

CANINE PAROVIRUS

SPECIES/AGES AFFECTED

Canine Parvovirus affects dogs. The majority of cases occur in puppies and young adults.

RISK OF INFECTION / EXPOSURE

There is a high risk of infection in unvaccinated animals or in puppies that have not completed their series of initial vaccinations. The virus is very tough, and is able to last in the environment in spite of freezing temperatures; it is readily carried on shoes and clothing into new areas. Because the virus is considered ubiquitous (everywhere) in the environment, nearly all dogs will come in contact with it during their lifetime.

METHOD OF TRANSMISSION

Infected animals shed the virus in high numbers in their stool. Virus particles can last months to years in the environment, allowing a puppy to become infected without coming into direct contact with a sick animal.

PREVENTION / VACCINATION

It is recommended that all puppies have a series of vaccines between the ages of 2 and 4 months to build up protection against the virus. They should be restricted from public outdoor areas until their vaccination series is completed at 16 to 20 weeks of age. Vaccines are readily available from your veterinarian. Most puppies receive their first vaccine at 6-8 weeks of age.

Your veterinarian will determine the vaccine protocol most appropriate for your pet.

TRANSMISSIBLE TO PEOPLE

It is not transmissible to people.

CLINICAL SIGNS

Clinical signs include tiredness, vomiting, diarrhea (often bloody), and unwillingness to eat.

CONSEQUENCES OF ILLNESS

With appropriate medical care, up to 80 percent of Canine Parvovirus infected dogs will survive. Without proper medical care, many dogs will die due to dehydration and secondary infections. This disease is far easier to prevent than to treat.

DIAGNOSIS

Your veterinarian may take a sample of your pet's stool to check for evidence of the virus, or take blood to test for lowered immune cells.

TREATMENT

Treatment involves supportive care until the body's immune system can catch up and fight off the virus. This usually involves hospitalization for up to 5-7 days with intravenous fluids, antibiotics for secondary infection, and anti-nausea medication. Complications can include intussusception (where the intestine telescopes in on itself), which may require surgery to correct.