A NEW TREATMENT SCHEDULE FOR CANINE FILARIASIS

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This paper reports a new treatment schedule for canine filariasis and describes the clinical signs and the blood picture of three out of fifteen filaraemic dogs. The dogs described were between 2 and 9 years of age, and were either Mongrel, German Shephered or Golden Retrievers. The complaints made by the owners were anorexia, skin rashes and periodic blindness. Clinical manifestations of the dogs varied from mild to critical anaemia, ascites, oedema of the dependent parts and fever. Examination of microfilaria in a drop of blood and using the Knott's technique revealed the presence of microfilaria ranging from 300 to 20,000/ml of blood.

The dogs were treated with Levamisole 10-11 mg/kg body weight, orally, once daily for six consecutive days. An antihistamine was given to counteract the allergic reactions due to dying filarial worms. Six days after Levamisole treatment, the microfilarial count had dropped to zero except in one dog which had a count of 36/ ml of blood. Subsequently, the microfilaricidal therapy with ivermectin was administered. During and after treatment, the kidney functions were also assessed by urine analysis and was found to be normal.

Conventional microfilaricidal treatments are diethyl carbamazine citrate (DEC) and ivermectin, These drugs may show various side effects. DEC needs to be used for a longer period and may cause anaphylactic reactions and is also not recommended to be used in microfilaraemic dogs. The dramatic decline in microfilarial counts, which usually occur with in the first several hours after administration of ivermectin, may account for some acute adverse effects such as shock, renal impairment and diarrhoea.