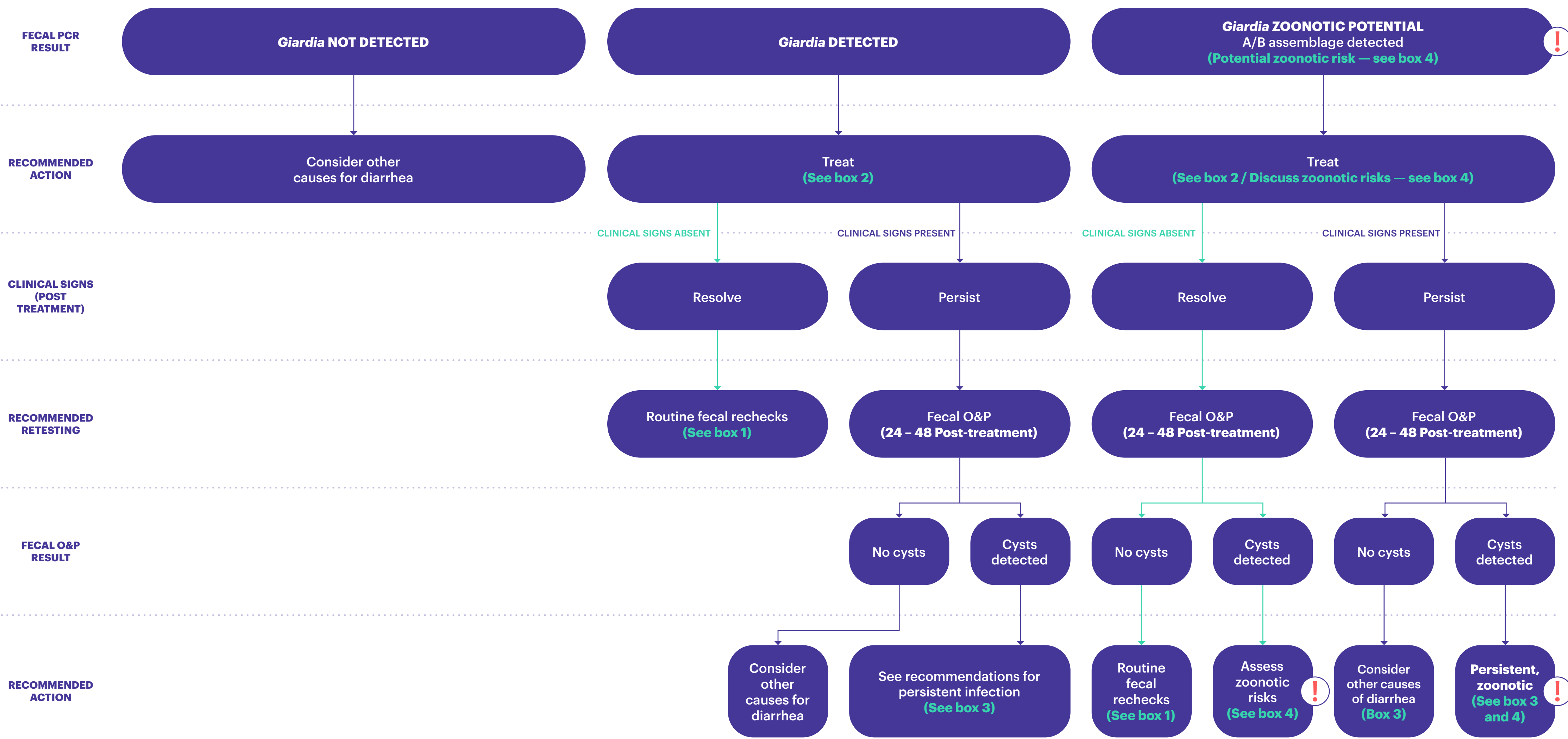
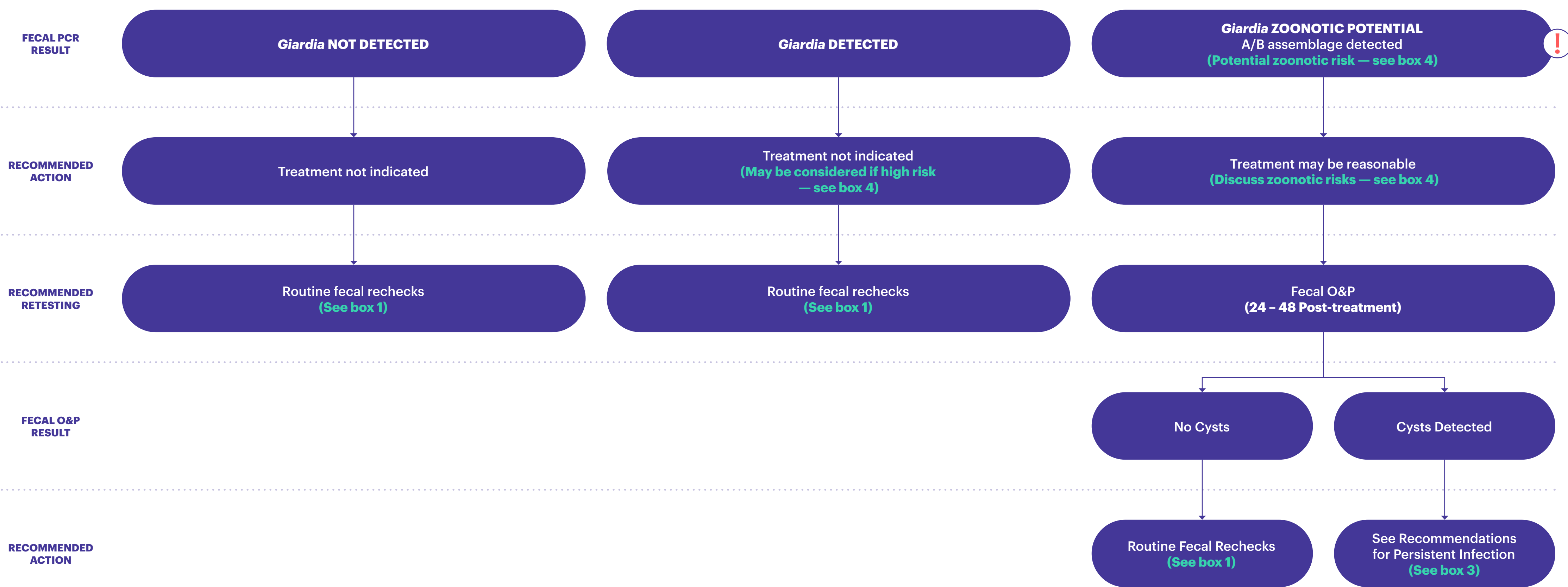


Pet evaluated for **CLINICAL SIGNS** (typically diarrhea) & **GIARDIA DETECTED**



Pet evaluated for wellness/preventive fecal screening & *Giardia* detected with **NO CLINICAL SIGNS**



CLINICAL DECISION-MAKING *GIARDIA*

Pet signalment, history (clinical, treatment), test results, risk, and pet-owner specific factors will inform individual case treatment decisions. Consideration should be given to appropriate antimicrobial use/stewardship and One Health.

<p>1 FECAL TESTING</p> <p>The KeyScreen® GI Parasite PCR panel detects 20 GI parasites and markers for zoonotic potential <i>Giardia</i> and hookworm treatment resistance. It can be used for routine monitoring/screening and for patients with clinical signs, e.g., diarrhea.</p> <p>Routine endoparasite monitoring (wellness/ screening):</p> <ul style="list-style-type: none"> The Companion Animal Parasite Council (CAPC) recommends fecal testing 4 times/year in the first year of life and twice/year for adult pets. The Canadian Parasitology Expert Panel (CPEP) recommends fecal testing twice/year in the first six months of life, and 1 to 2 times/year for dogs over 6 months. Risk factors (Box #4) may impact (increase) advised testing frequency. <p>Retesting for <i>Giardia</i>:</p> <ul style="list-style-type: none"> At 24 to 48 hours, after completion of appropriate treatment of <i>Giardia</i> (Box 2), fecal testing by centrifugal flotation (O&P) can be used to evaluate for persistent shedding of <i>Giardia</i> cysts. Note, PCR is highly sensitive, some pets may continue to detect positive during this timeframe. 	<p>2 MANAGEMENT/TREATMENT</p> <p>Treatment goal:</p> <p>Improvement of clinical signs (diarrhea)</p> <p>Pharmaceutical treatment:</p> <p>Drug and other treatment recommendations: capcvet.org/guidelines/giardia</p> <p>Non-pharmaceutical treatment:</p> <ul style="list-style-type: none"> Supportive care Dietary management (higher-fiber, probiotics) Bathing of patient to remove infectious cysts from hair coat, perineum Picking up feces immediately to reduce environmental contamination Cleaning of environment Disinfection if possible/practical 	<p>3 PERSISTENT <i>GIARDIA</i></p> <p>Pets may have persistent clinical signs or infection (despite appropriate treatment) due to:</p> <ul style="list-style-type: none"> An alternate underlying disease as a cause of (or contributor to) clinical signs, e.g., chronic enteropathy or neoplasia Co-infection with another pathogen Environmental re-infection Compliance concerns, e.g., medication, dosing, duration Immunosuppression Drug resistance <p>To help rule out environmental re-infection, re-testing (centrifugal fecal flotation, O&P) at 24-48 hours post-treatment (Box 1) can be considered.</p> <p>Repeating treatment for patients with clinical signs and persistent cysts detected can be considered.</p>	<p>4 RISK ASSESSMENT ZONOTIC POTENTIAL</p> <p>Management is guided by individual pet risk factors, including contact with or exposure to:</p> <ul style="list-style-type: none"> Young children, the elderly, immunocompromised, or pregnant individuals Other household pets Highly contaminated environments, e.g., kennels, dog parks etc. Environments shared with wildlife <p>Additional risk assessment resources at CPEP: research-groups.usask.ca/cpep</p> <p>Zoonotic potential <i>Giardia</i>:</p> <ul style="list-style-type: none"> If zoonotic potential <i>Giardia</i> (A or B assemblage) is detected, pet-owners should be informed of potential zoonotic risks. If the A or B assemblage is not detected, pet-owners can be assured that zoonotic risk is low.
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Antech Consultation Services (1-800-872-1001, option 2) are available for case support and conversation.

