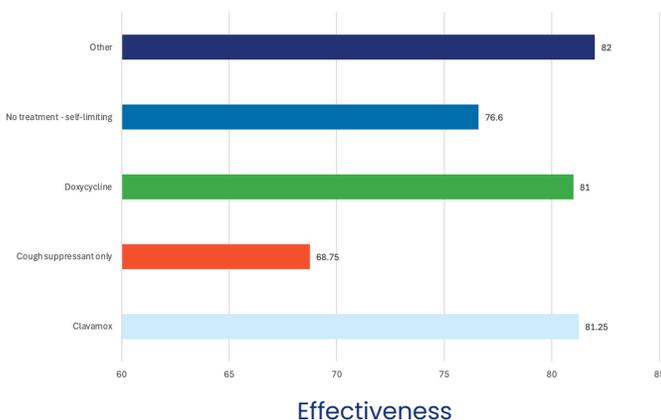
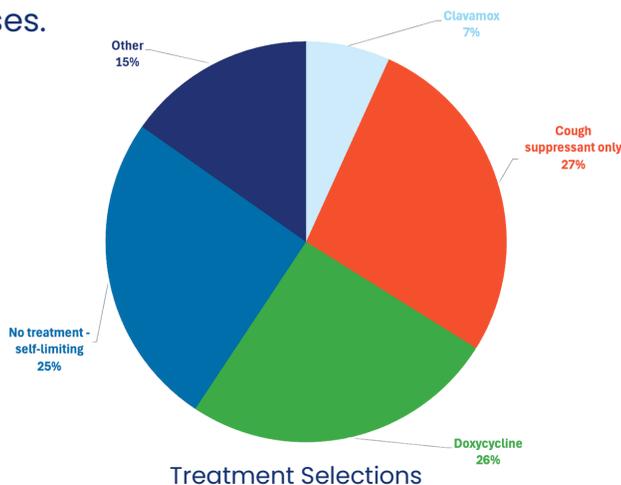


Kennel Cough

When asked about their management of kennel cough, most DVMs reported using a cough suppressant as their primary treatment approach. Doxycycline was the next most common intervention and was rated as having an average effectiveness of 81% when used for cases where a bacterial component was suspected. Several respondents noted that combining doxycycline with Tamaril-P appeared to yield especially effective results in managing both infection and cough-related discomfort. A smaller proportion of veterinarians indicated that they provide no treatment at all for mild, self-limiting cases, relying instead on supportive care. While some respondents reported success with a range of other options—such as nebulization, alternative antibiotics, or anti-inflammatory therapy—these treatments were used less frequently and typically reserved for more severe or refractory cases.



Specialist Preferred Treatment for Suspected Bacterial Kennel Cough

Doxycycline remains the first-line antibiotic when a bacterial component is suspected.

- Dose: 5 mg/kg PO every 12 hours or 10 mg/kg PO once daily
- Duration: 7–10 days

Why Doxycycline?

The ISCAID guidelines recommend doxycycline for dogs with:

- Mucopurulent nasal discharge
- Fever
- Lethargy
- Inappetence
- Without evidence of pneumonia

This recommendation is based on doxycycline's proven activity against *Bordetella bronchiseptica* and other common respiratory pathogens.

Important Note: The UW–Madison Shelter Medicine program advises that many cases of kennel cough are viral and resolve on their own. Overusing antibiotics—especially prophylactically—can contribute to antimicrobial resistance.



Effectiveness & Clinical Considerations

- **Effective:** Doxycycline is widely regarded as effective when bacterial infection or secondary bacterial involvement is suspected.
- **Self-limiting cases:** Most uncomplicated kennel cough cases are viral and improve with supportive care alone (rest, hydration, cough suppressants if appropriate).
- **Escalate if needed:** Consider antibiotics if clinical signs worsen, persist beyond expected duration, or if there is risk of progression to pneumonia.

Clinical Takeaways

- **First-Line Option:** Empiric doxycycline remains the drug of choice when bacterial involvement is suspected.
- **Judicious Use:** Reserve antibiotic treatment for patients with moderate-to-severe signs or those at risk for secondary infection.
- **Supportive Care:** Mild, viral cases often respond well to symptomatic management without antibiotics.

