Ear Polyps – Frequently asked questions (by Cat Moody)

Disclaimer: I am not a veterinarian, just a breeder who experienced the problem of polyps many, many times. Please consult your veterinarian for proper diagnosis and treatment of the problem. This is just intended to give some practical background information on what polyps are, what my experience has been, and treatment options.

My background:
My name is Cat Moody, and I was a breeder/exhibitor of Maine Coon cats for about twelve years, under the cattery name of Stormwatch. In the first seven years of breeding, I twice had cats who were affected by polyps, both after a bout of upper respiratory illness, one adult and one kitten. That’s a pretty statistically normal experience. However, in the last five years, I had at least 25 kittens affected, with no signs of upper respiratory illness. The incidence increased over the years until in the last year I bred, routinely 50-75% of my kittens were affected, and I stopped breeding as we were unable to determine the cause.

What causes them?:
There are several theories as to what causes polyps, but no answers. Commonly, vets think it may have to do with herpes or calici viruses, but since most cattery cats are positive for both viruses, it makes no sense that polyps typically affect only some breeders and not others. Typically, the vets most experienced with polyps have worked at animal shelters, where ill kittens are brought in with untreated ear infections.

Genetics:
While there may be a genetic component, that was conclusively ruled out in my case. My stud males were unrelated to each other, and most of the queens were as well. I got equal percentages of polyps from either male, or even from using outside males for stud. Every female in my house produced at least one affected kitten at some point, unless she was sent to live elsewhere for her entire pregnancy and while she raised the kittens. No females sold from my house (with one exception) ever produced an affected kitten, even if both the parents had been affected themselves, or even if the female herself had had a polyp when young. All of my affected kittens were diagnosed before they reached 14 weeks of age – if no polyp was evident at that point, the kitten would never have one. I know, this makes no sense, but we tested my cats for everything under the sun, and it remains a mystery – it had to be something environmental, but we couldn’t figure it out. We have had veterinarians all over the world take a look at this case, and all kinds of biopsies and tests done, with no result. It did drive me out of breeding, due to the expense and emotional torment. I have never heard of another cattery being affected by this, so consistently and over so many years. So the only silver lining in this cloud is that I’ve been through a lot of polyps, and am routinely referred to in some circles as “The Polyp Queen”. I get a lot of requests from folks looking for help, so thought it would be easier to just post a FAQ sheet.

How it forms:
A polyp is a fleshy stalk that grows out of the inner ear, or the “bulla”. This innermost part of the ear is a ball-shaped boney structure. Normally, any debris that accumulates in the bulla is flushed out from one of the two exits – out to the outer ear canal, or down the back of the throat through the eustachean tube. If for some reason the debris builds up, it forms a fertile base for the formation of a polyp. The polyp forms its roots in the bulla, and begins to grow. It can exit either way – through the ear (referred to as an “aural” polyp), or through the eustachean tube and down the back of the throat (the “nasopharyngeal” polyp). Veterinary literature suggests that the nasopharyngeal polyp is more common, but approximately 75% of mine were aural. As
the polyp grows, it can either start to come right through the eardrum, or obstruct the breathing of a cat. In either event, it’s important to remove it as soon as it is diagnosed. Our only fatality from a polyp was in a kitten that had to delay surgery (he also had a heart defect, so we wanted to wait until he was older), and the polyp grew so large that it adhered to a major blood vessel, which was nicked during surgery and the kitten bled to death. Left untreated, a large polyp in the throat can completely obstruct breathing and the kitten/cat can choke to death.

**Bilateral:**
I think I have the only current case in veterinary literature of a cat who had bilateral polyps, which were discovered several months apart. Generally, it will only form on one side or the other. There doesn’t seem to be any more susceptibility for a cat who has had one polyp to ever develop another.

**Symptoms:**
They can manifest in many ways. I’m sure the most common things that vets see are kittens who present with nasty ear infections or coughing, but the signs can be far more subtle than that. Over the years, I got so used to them that I found them long before they would be visible with an ear scope. What I usually noticed for a nasopharyngeal polyp was an odd clicking or snorting, or sometimes the kitten would seem to be gulping or gagging oddly. You might notice a problem in breathing or swallowing. For an aural polyp, the first indication was usually a very sticky whitish discharge from the ear. You might not even notice except that the fur under the ear would get clumpy and stiff. There may be a reddish irritation in the base of the ear. Those are very early warning signs, and do not necessarily indicate a polyp (unless the kitten was born at Stormwatch LOL). However, in an older kitten or cat, or one in which the polyp has progressed unnoticed, the symptoms can be sudden and severe. Vestibular syndrome can come on abruptly and dramatically – I’ve literally seen it appear in under a minute. A kitten who appears completely normal suddenly starts staggering in circles, with a severe head tilt. The head will tilt down on the side of the affected bulla, and the kitten will continuously turn in that direction. Another aspect of this is Horner’s Syndrome, where the third eyelid (again, on the affected side) comes up and completely obscures the eye. Nystagmus is also seen sometimes, where the pupil on the affected side shakes rapidly from left to right. To be honest, it looks awful, as if your cat has had a stroke – but its completely normal, because the polyp (or resulting swelling) is pressing on a cranial nerve. And take note – I’ve run across a few emergency room vets who have confidently told me that “cats don’t get vestibular syndrome” on the phone, implying that I must have looked up a fancy word somewhere….and then recanted an hour later when I put a circling, drunken kitten on the floor in front of them. Too many times I’ve heard of this behavior being immediately diagnosed as neurological – and while that may be the case, its also a very common manifestation of a polyp. These symptoms typically resolve completely several weeks after surgery, but in my experience, the longer we’ve waited after symptoms appear to have the surgery, the more likely the cat may retain a head tilt. Its sort of endearing and doesn’t seem to bother the cat much. In one case, we had a kitten we were POSTIVE had a polyp, but one never showed up despite all her symptoms. We finally had the surgery done months later, and they found no polyp, but the bulla was so infected it was causing all the same symptoms. She has a permanent head tilt…and is, of course, still called “Tilt” by her new owners.

**Surgical Corrections:**
Polyps must be treated surgically, not medically. No amount or combination of antibiotics is going to make it disappear. There are two basic methods. One is generally referred to as
“plucking”, and is less invasive and less expensive than the alternative. Unfortunately, it has a
dismal success rate. The kitten/cat is sedated, and the vet goes in through the mouth or the ear
and grabs the exposed part of the polyp with a puller and extracts it. The problem is, just like
pulling a dandelion, the roots are likely to remain in the bulla, and the polyp grows back – 70%
off the time. The only time I made use of this method was in a very young kitten who was too
small a candidate for successful surgery, who was literally choking to death on the polyp (which
made sedating her even more risky). We plucked it and bought her some time to grow up and
put on weight. It grew back within four weeks, but by then she was big enough to sail right
through her surgery with no problem. By far the preferred method is the ventral bulla
osteotomy, or VBO. It is expensive (in this area, its about $1200-$1500), you need a skilled
surgeon, and there is a recovery period – but we’ve never had one grow back. The only
complication we ever had, which is extremely rare, is a bone infection at the surgery site that
manifested several months later (and was successfully resolved). The vet surgically opens up
the bulla through the side of the neck, scrapes it clean and dislodges the root of the polyp. The
polyp is then pulled out, and a drain inserted. The kitten is usually at the vet from 2-4 days, and
about ten days of after-care are involved – generally, just giving an antibiotic, making sure the
incision and drain are clean, and hot-compressing the area to reduce the swelling. The kitten
usually seems to feel much better in a couple of days. Even if the kitten did not have symptoms
prior to the surgery, they will post-surgically – typically, a head tilt and Horner’s syndrome. In
most cases, those symptoms will take 2-4 weeks to completely resolve. The good news,
again, is that having the VBO done is 99% effective, and no polyp should ever recur. Its one of
the few diagnoses a cat can have that there is a reliable and long-term solution for. It does,
however, bring up some difficult considerations for a breeder – you have to be able to justify
spending $1500 to “fix” a kitten and then sell the kitten for $500 or whatever. On the plus side, its
90% or better cure-able, the kitten will never be affected again, and the new parents and the
kitten can anticipate a completely normal life. I never once chose to put a kitten to sleep if just
money could cure the problem – but you can see how it drove me out of breeding financially. I
don’t know too many breeders who have unlimited funds, and cost might be a factor for most in
making the decision. The success rate is high, the risk is low…..but the price to be paid is very
expensive. Our only complications were one fatality due to bleeding (and I think that was
unavoidable in retrospect), one permanent head tilt, and complete deafness in the one cat who
was bilateral. I can’t say for sure if all the aural polyps do result in deafness, because you
wouldn’t notice a cat who was deaf in one ear. I’m often asked if I would breed a cat who had
a polyp, or had an affected littermate, or had a parent with a polyp – that is an individual
breeder’s decision. In my case, we knew it was not a matter of genetics, and that was not a
factor in our breeding decisions. We also knew that in this cattery, although all of our cats were
probably herpes and calici positive, we didn’t have a single incidence of manifested illness or
typical ear infections in either cats or kittens during those five years (I know, its odd). Our
kittens were always fully isolated from adults, so if it was viral in nature, it must have been
something that the mother cats were shedding at a certain point in gestation or in nursing. We
won’t ever know – and I hope none of you go through that! Most of the cases I’ve heard of were
in a single, older kitten or cat, or a particular litter that had several affected kittens. I don’t know
if it is because I bred Maine Coons and that’s the people who refer to me, but most of the cases
I have heard of were in Maine Coons. If you have other questions that I can try to answer,
you can email me at
mailto: Catmoody@aol.com
- but please remember that I am NOT a vet, only a breeder, and you should be consulting with a vet if you suspect or confirm a polyp. This is just intended to share what I’ve gone through, to make the process a little more familiar to others who have the problem. By

Cat Moody
(Stormwatch Maine Coons)