UPDATE

American Heartworm Society Recommendations for Canine Heartworm Testing, Prevention and Treatment during the COVID-19 CRISIS

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The outbreak of the COVID-19 pandemic in March 2020 led almost immediately to changes in how patient appointments were conducted in veterinary hospitals. Veterinary professionals are considered essential workers in most jurisdictions. Nevertheless, many veterinarians were asked by authorities to minimize non-emergency visits to their clinics in the initial days and weeks of the crisis in order to safeguard human health and preserve supplies of personal protective equipment.

The American Heartworm Society (AHS) responded by issuing recommendations in April 2020 to help veterinarians address questions about heartworm prevention, diagnosis and treatment, e.g., refilling heartworm preventives, navigating delays in heartworm antigen testing and managing interruptions in administration of adulticidal therapy in heartworm-positive patients. The goals of these recommendations were (1) to ensure that heartworm prevention regimes could continue uninterrupted, even if annual heartworm testing had to be delayed; and (2) to provide guidance for handling interruptions of adulticidal therapy in heartworm-positive dogs.

Since then, most veterinary hospitals have resumed full appointment schedules and are seeing patients for routine wellness visits, albeit with altered processes such as curbside drop-off and pick-up to minimize face-to-face interaction between veterinary staff members and the public. This has made it possible for practices to once again provide routine examinations and disease screening procedures.

As a result, the Society recommends that veterinarians resume following the established AHS guidelines for canine heartworm prevention, diagnosis and treatment. Those guidelines include the following specifics:

- **Heartworm prevention:** Year-round administration of preventive drugs approved by the US Food and Drug Administration (FDA) is recommended for dogs and cats along with reducing mosquito exposure via vector control. The latter includes standard environmental control of mosquitoes and their breeding environments, use of approved repellants and, when possible, reducing outdoor exposure during key mosquito feeding periods.
- **Heartworm diagnosis:** The AHS recommends annual antigen and microfilaria testing in dogs. If the annual heartworm test was delayed, it should be rescheduled as soon as possible to get the patient back to an annual screening program. If any lapse of heartworm prevention also occurred, a follow-up test is recommended six months later.
- **Heartworm treatment:** In dogs infected with adult heartworms, the AHS recommends use of doxycycline and a select macrocyclic lactone prior to a three-dose regimen of melarsomine to treat heartworm infection in both symptomatic and asymptomatic dogs. Any method utilizing only macrocyclic lactones as a slow-kill adulticide is not recommended.

In making this recommendation, the Society acknowledges that veterinary adherence to these practices may be limited for individual veterinarians by extensive backlogs of patient visits and/or the inability of some clients—especially those at high risk for COVID-19—to travel to and from veterinary hospitals to seek care for their pets. In such cases, veterinarians should rely on their clinical discretion and formulate approaches that best serve their patients and clients.

The intent of the AHS heartworm guidelines is to provide clarity and support to veterinarians who are working to provide the best possible care and treatment of patients during the COVID-19 pandemic. Understanding that the clinic environment is dynamic and that the protection of public health may dictate further adjustments, the American Heartworm Society will continually review and revise these recommendations if conditions necessitate it. In the meantime, veterinary professionals are encouraged to contact the Society with additional questions by emailing info@heartwormsociety.org. ■

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