**FELINE CALCIUM OXALATE AND URATE UROLITHS**

Uroliths with calcium oxalate (CaOx) and urate indicate that two diseases processes are occurring concurrently or in succession. The primary etiology underlying both minerals in most cats is unknown. Hypercalcemia and defects in urate metabolism (hepatic portosystemic shunt) should be investigated since these diseases have a definitive treatment.

**MINIMIZING RECURRENCE**

**DIAGNOSTIC CONSIDERATIONS**

- Serum calcium. Investigate causes for hypercalcemia, when present.
- Serum bile acids.

**MEDICAL CONSIDERATIONS**

- Potassium citrate if urine pH is consistently <6.5 (starting dose: 75mg/kg q12-24h)
- Correct hypercalcemia based on cause (e.g. food change, prednisone, parathyroid removal, etc.)

**NUTRITIONAL CONSIDERATIONS**

- Lower purine/protein/sodium foods that produce neutral or alkaline urine (e.g. Hill’s l/d, i/d, others). If needed, feed canned therapeutic food or add water to food to lower urine specific gravity below 1.030.

**MONITORING CONSIDERATIONS**

- Urinalysis every 3 to 6 months to adjust pH to 6.5 to 8.0, and urine specific gravity to less than 1.030.
- Medical imaging every 6 to 12 months to detect recurrent stones when small to potentially permit their removal without surgery.

**Review manufacturer’s therapeutic food literature to determine indications/contraindications. For pets with multiple health concerns, consult a veterinary nutritionist to select an optimal food.**

Support from Hills Pet Nutrition, veterinarians, and pet owners make our work possible.