

Feline Aggression to Owners – Differentials and Treatment
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The Problem

While house soiling is one of the most common behavioral complaints and reasons for relinquishment, abandonment, and euthanasia in cats, aggression is a close second. Cats are commonly aggressive to other cats in their homes, and they may also be aggressive to people in many contexts. Owner-directed aggression is likely an under-reported type of aggression in cats. This behavior is important because aggression to owners can negatively impact the human-animal bond and cause significant injuries to people.

Aggression to owners can develop as a cat enters social maturity, but it can begin in kittenhood as well. Play-related aggression, one of the most common causes of aggression to owners, often presents in kittenhood and can continue throughout a cat's life. Fear, irritable/pain-related, redirected, food-related, and status/conflict-related motivations are common. Petting-induced aggression to owners is also frequent.

Adult cats who develop new aggressive behaviors towards family members while in an otherwise stable home environment, must be medically evaluated for several diseases that can increase irritability (hyperthyroidism, hypertension, osteoarthritis, neoplasia, infectious agents, etc.).

These behaviors can be prevented in some cats with early positive socialization and positive experiences with family members throughout the cat's life stages. It is important to note that "positive experiences" are defined by the individual cat.

As with most behavioral disorders, multi-modal treatment is recommended and should include avoidance/safe management, environmental enrichment, and desensitization and counterconditioning to triggers. In some cases, medication may be warranted either during trigger times, daily, or both.

Avoidance

Safe management is critical to prevent the cat from practicing and being reinforced by the behaviors as well as to prevent injuries. It can be difficult to safely manage cats with aggression towards family members, but it's far from impossible. This can generally be done by creating a safe zone (such as a bathroom, guest room, multi-level cat cage, or large exercise pen +/- top) for the cat and putting the cat there BEFORE any known triggers are presented in the environment. Optimally, the cat is taught to go to these locations on cue during training sessions rather than physically handled and moved into the safe zone. If the cat will be confined in the same area as family members (like in a cat cage), it can be helpful to cover the confinement zone so the cat can't see family members performing trigger behaviors unless the family is actively working to teach the cat to tolerate these triggers in the moment. Most cats can be taught to go to their safe zones on cue within a few days to weeks if owners take a few minutes per day to work on the behavior with a *rational* behavior modification plan.

It is also important to instruct owners to completely ignore the cat (no petting, no talking, and no looking) unless the owners have a planned/structured interaction in mind. This prevents accidental triggering and reinforcement of behaviors the family might find objectionable.

Cats should be kept away from known trigger areas if they are out with the family. For instance, if a cat routinely swats at people who walk by when he is on a bookcase, the family can be counseled to stay well-outside the cat's threshold for swatting. Painter's tape or other visual markers can help them stay at the appropriate distance. Another option would be to put books or other items in the location so that cat cannot sit there while providing other out of the way perches the cat can enjoy.

A belled quick-release collar can always remain on the cat so the family can keep better track of the cat's location. Be aware that some cats learn to walk without ringing cat bells.

Cats can be trained to wear a body harness and leash so they can wear them if they will be out of their safe zone during family time. This can be tethered to furniture if needed. Cats should never be left alone on tethers since this could cause significant injury or death if the cat became tangled.

Teaching new ways to respond to triggers

Management alone doesn't help teach the animal new ways to respond. Instead a fun, scientifically based behavior modification plan should be designed. Once owners know the cat's warning signs and specific triggers (mealtime, petting, moving through the house, loud voices, smell of other cats on the owner, etc.) treatment can focus on desensitization and counterconditioning.

These plans generally break down trigger situations into small parts. Each of these small parts of the trigger will be utilized in the process of desensitization and counterconditioning. When the cat is doing well with each of these small parts of the trigger situation, they can be combined so the cat learns to tolerate and/or enjoy the entire trigger situation instead of aggressing during it. For instance, in petting induced aggression, the cat might be petted only 1 time before petting stops and a small reinforcer (food, short play session, praise) is administered. After several repetitions where the cat is tolerating this and ideally beginning to look forward to the reinforcer, the number of strokes before stopping for reinforcement will be increased to two and so on. Over time, the cat will learn to enjoy longer petting bouts.

Stopping events in progress

Owners should be counseled not to handle cats during aggressive events because they may be severely injured. A thick blanket can be tossed on a cat during an aggressive event as can a glass of water or an upside-down box. Shaken seltzer sprayed at the cat can be especially effective for stopping events in progress. These are emergency management techniques, not interventions for everyday use. Emergency items can be placed in potential trigger areas for easy access.

Environmental enrichment

Environmental enrichment is a critical component of keeping cats behaviorally and medically healthy. Cats should eat as many meals as possible from puzzle or predatory-play toys, have appropriate play sessions with owners for at least 7 minutes per day, have multiple scratching posts of the cat's preferred type, and be provided with multiple, soft elevated areas for resting and hiding. Water should be kept fresh and in multiple locations. Litter box areas should be monitored for cleanliness and the cat's preferred litter, depth, and box style.

Medications, supplements, and pheromones

Medications such as SSRIs (fluoxetine, paroxetine, and sertraline), TCAs (clomipramine), benzodiazepines (lorazepam, oxazepam, alprazolam), trazodone, and gabapentin can be helpful for cats with owner-directed aggression. SSRIs and TCAs are best given daily, but the other meds could be used at trigger times only (for instance, if the cat is stressed by the return of owners from out of town) for several days at a stretch if needed.

Supplements (Anxitane, Solliquin, Zykline), diet change (RC Calm, Hill's c/d multicare stress), and pheromone therapy (Feliway Multicat) can also be helpful for some of these patients and can be implemented concurrent with medication protocols.

Conclusions

Patients with owner-directed aggression can improve significantly with treatment. But treatment for this problem is not inherently obvious to most clients. They generally need guidance from a veterinarian skilled in applied behavior analysis and knowledgeable about normal feline behavior as well as psychoactive medication use. Thankfully, veterinarians are very capable of learning and implementing appropriate treatment and keeping their cat patients out of the "doghouse."