Ptyalism/Pseudoptyalism

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Following are differential diagnoses for patients presented with ptyalism/pseudoptyalism.*

- GI condition
  - Abdominal pain (eg, from visceral stretching)
  - Disease associated with nausea
  - Esophageal disease (eg, reflux esophagitis, megaesophagus, foreign body, neoplasia, stricture, spirocercosis)
  - Gastric dilatation volvulus
  - Gastric ulceration
  - Hepatic failure (eg, hepatic encephalopathy), particularly in cats
  - Hiatal hernia
  - Renal failure
- Idiopathic or nonresponsive condition
- Neurologic condition
  - Facial nerve paralysis
  - Idiopathic trigeminal neuritis
  - Infectious disease (eg, rabies,† pseudorabies, tetanus, botulism)
  - Lesions of cranial nerves IX, X, or XII
  - Myasthenia gravis
  - Nausea from vestibular disease
  - Seizures
- Oral cavity or maxillofacial cause
  - Craniomandibular osteopathy
  - Faucitis
  - Foreign body
  - Immune-mediated disease (eg, masticatory muscle myositis, pemphigus)
  - Lip fold abnormalities
  - Mandibular fracture
  - Oropharyngeal neoplasia (eg, tonsillar squamous cell carcinoma)
  - Oropharyngeal trauma (eg, laceration)
  - Periodontal disease
  - Stomatitis (eg, calicivirus, herpesvirus, FeLV/FIV, caustic agent, electrical burn, ulceration secondary to systemic disease [eg, uremia])
  - Temporomandibular joint luxation or fracture
  - Tongue lesion (eg, linear foreign body), glossitis (eg, uremia, caustic agent, electrical burn), or tumor
- Physiologic reaction
  - Excitement
  - Hyperthermia
  - Purring
  - Response to feeding
- Reaction to medication
  - Anesthesia
  - Avermectins (eg, ivermectin, moxidectin/imidacloprid, selamectin) given topically or PO
  - Bitter drugs
  - Cholinergic drugs (eg, bethanechol), anticholinesterase drugs (eg, pyridostigmine), cholinesterase inhibitors (eg, organophosphates)
  - Pancreatic enzyme supplements
  - Pyrethrins/pyrethroids
- Salivary gland condition
  - Foreign body
  - Salivary gland neoplasia
  - Salivary mucocele
  - Sialadenitis or necrotizing sialometaplasia (ie, inflammation of the salivary glands)
  - Sialadenosis (idiopathic, noninflammatory salivary gland enlargement)
    –May be a form of limbic epilepsy
  - Sialolithiasis
- Sepsis
- Toxicosis
  - 5-hydroxytryptophan (ie, Griffonia seed extract)
  - Bite from a venomous animal (eg, black widow spider, scorpion, toad [*Bufo* spp], coral snake, sea hare [*Aplysia* spp])
  - Household cleaner
  - Human sleep aid (eg, zolpidem)
  - Human tricyclic antidepressant (eg, clozapine)
  - Illicit drug (eg, cocaine, amphetamine)
  - Insecticide/pesticide (eg, boric acid, aldicarb)
  - Metaldehyde
  - Mushroom (eg, *Amanita muscaria*)
  - Plant/tree (eg, Kentucky coffee tree, poinsettia)
  - Rodenticide (eg, zinc phosphide)

See page 49 for references.

*Differentiating between ptyalism and pseudoptyalism can be challenging; some conditions (eg, oropharyngeal and CNS diseases) can result in both increased salivary production and the inability to swallow.

†Rabies should always be considered in patients presented with drooling.