

**Table S1.** Standardized questionnaire formulated *ad hoc* for the evaluation of clinical signs and symptoms of hyperthyroid cats, as reported by the owner (Owner Hyperthyroid Cat Clinical Score, OHCCS).

| OHCCS (Owner Hyperthyroid Cat Clinical Score)                              |   |   |  |  |  |  |
|--|---|---|--|--|--|--|
|  | 0   | 1   | 2  | 3  | 4  | 5  |
| <i>Polyphagia</i>  | Not reported; the cat shows unmodified feeding behavior | Request of extra-food before or after feeding time  | Occasional request of extra-food during the day and before or after feeding time                                   | Frequent request of extra-food during the day and before or after feeding time   | Constant request of extra-food during the day and before or after feeding time   | Constant request of extra-food all day and night long  |
| <i>Weight loss</i>   | Not reported  | Weight loss clinically undetectable but detectable on the board   | Mild weight loss clinically detectable ( $\approx$ 2–3 % of BW)  | Moderate weight loss clinically detectable ( $\approx$ 4–5 % of BW)  | Severe weight loss clinically detectable ( $>$ 5 % of BW)  | Extreme weight loss clinically detectable with muscle wasting ( $>$ 10 % of BW)  |
| <i>PU/PD</i>   | Not reported  | Greater in or nocturia up to 2xnormal, weekly reported  | Greater in or nocturia up to 2Xnormal, daily reported  | Urine production $>$ 2Xnormal but $<$ hourly. Frequent search of water (water consumption still in the normal range)                     | $>$ 1 mL Kg <sup>-1</sup> h <sup>-1</sup> urine production $>$ 2 mL Kg <sup>-1</sup> h <sup>-1</sup> . Constant search of water (water consumption $>$ 45 mL/kg/day) | $<$ 3 mL Kg <sup>-1</sup> h <sup>-1</sup> urine production. Constant search of water (water consumption $>$ 60 mL/kg/day)  |
| <i>Vomiting/Diarrhea</i>   | Not reported  | Vomiting and/or diarrhea reported one or two times monthly, self-limiting. Consultation and supportive therapy not needed | Vomiting and/or diarrhea reported one or two times weekly. Consultation needed without home therapy                | Vomiting and/or diarrhea reported $>$ 2 times weekly or on a daily base. Consultation an home therapy needed                             | Diarrhea or vomiting reported $>$ 3 times on a daily base; hospitalization and supportive care needed  | Diarrhea or vomiting reported several times on a daily base; hospitalization and intensive care needed. Life-threatening condition                               |
| <i>Behavioral changes (aggressiveness, irritability, panic attacks...)</i> | Not reported; the cat shows unmodified social behavior  | Occasional signs of irritability and discomfort during social interactions, without showing an aggressive behavior        | Frequent signs of irritability and discomfort during social interactions, with few episodes of aggressive behavior | Constant signs of irritability and discomfort during social interactions, with frequent episodes of aggressive behavior                  | As score 3 + changing in social hierarchy with other pets and or altered interactions with the owner. Few episodes of vocalization during the night                  | Several episodes of aggressive behavior on a daily base; total subversion in social hierarchy, absence of interactions with owners, vocalizations all night long |
| <i>Anorexia</i>  | Not reported; the cat shows unmodified feeding behavior | Oral intake always present but with signs of disorexia and capricious appetite; dietary change not needed.                | Oral intake altered (1 day duration); dietary change required to maintain appetite                                 | Oral intake altered (1–3 days duration) but no hospitalization needed. Oral nutritional supplements/appetite stimulants may be indicated | Oral intake severely altered ( $>$ 3 days duration); hospitalization and feeding tube needed.  | Oral intake severely altered ( $>$ 5 days duration); hospitalization and intensive care required. TPN indicated. Life-threatening condition                      |
| <i>Lethargy</i>  | Not reported; the cat shows unmodified ADL              | Occasional or intermittent lethargy over baseline weekly reported; unmodified ADL   | Mild lethargy over baseline; diminished spontaneous activity not causing difficulties in performing ADL            | Moderate lethargy causing some difficulties with performing ADL; ambulatory only to point of eating, sleeping and litterbox area         | Severely restricted in ADL; unable to confine urination and defecation to litterbox area. Food consumed only if offered in place                                     | Disabled, must be force fed and helped to perform ADL  |

ADL: activity of daily living; BW: body weight

| OHCCS (Owner Hyperthyroid Cat Clinical Score) / Clinical chart             |       |             |                |             |           |          |                              |
|--|-------|-------------|----------------|-------------|-----------|----------|------------------------------|
| CASE NUMBER/<br>PATIENT SIGNALMENT   | # ___ | Owner _____ | Cat name _____ | Breed _____ | Age _____ | BW__     | Life-style____ Feeding _____ |
| Date:  | ET    | T1          | T2             | T3          | FT        | Comments |                              |
| <i>Polyphagia</i>  |       |             |                |             |           |          |                              |
| <i>Weight loss</i>   |       |             |                |             |           |          |                              |
| <i>PU/PD</i>   |       |             |                |             |           |          |                              |
| <i>Vomiting/Diarrhea</i>   |       |             |                |             |           |          |                              |
| <i>Behavioral changes (aggressiveness, irritability, panic attacks...)</i> |       |             |                |             |           |          |                              |
| <i>Anorexia</i>  |       |             |                |             |           |          |                              |
| <i>Lethargy</i>  |       |             |                |             |           |          |                              |
| <b>OHCCS-TOTAL SCORE:</b>  |       |             |                |             |           |          |                              |

ADL: activity of daily living; BW: body weight

**Table S2.** Standardized questionnaire formulated *ad hoc* for the evaluation of clinical signs and symptoms of hyperthyroid cats, as reported by the veterinarian (Veterinarian Hyperthyroid Cat Clinical Score, VHCCS).

| VHCCS (Veterinarian Hyperthyroid Cat Clinical Score)  |  |   |   |  |  |  |
|---|--|---|---|--|--|--|
|   | 0  | 1   | 2   | 3  | 4  | 5  |
| <i>Modified BCS</i>   | BCS = 7 or >, fBMI in the Over weight area                                     | BCS = 6, fBMI in the Normal area  | BCS = 5, fBMI in the Normal area  | BCS = 4, fBMI in the Normal or Under weight area   | BCS = 2 or 3, fBMI in the Underweight area   | BCS = 1, severe muscle wasting, fBMI in the Underweight area   |
| <i>Coat and skin status</i>   | Coat extremely well kempt, clean and shiny                                     | Coat well kempt, clean and shiny  | Coat kempt enough, clean but opaque   | Coat poorly kempt, opaque but still clean  | Unkempt coat   | Skin lesions, alopecic areas   |
| <i>Attitude toward clinical maneuver</i>  | Collaborative and friendly patient which can be handled with minimum restraint | Collaborative patient which need some restraint   | Tolerant patient which need restraint   | Poorly tolerant patient which shows early signs of annoyance. Firm restraint needed                        | Intolerant patient which shows immediate signs of annoyance. Firm restraint needed.                | Intolerant and aggressive patient which need restraint devices to be examined  |
| <i>Ocular fundic examination focused on hypertensive lesions</i><br>(Performed only when mean systolic blood pressure was > 160 mmHg and diastolic blood pressure was > 100 mmHg) | Not reported   | Vomiting and/or diarrhea reported one or two times monthly, self-limiting. Consultation and supportive therapy not needed | Vomiting and/or diarrhea reported one or two times weekly. Consultation needed without home therapy | Vomiting and/or diarrhea reported > 2 times weekly or on a daily base. Consultation an home therapy needed | Diarrhea or vomiting reported >3 times on a daily base; hospitalization and supportive care needed | Diarrhea or vomiting reported several times on a daily base; hospitalization and intensive care needed. Life-threatening condition |
| <i>Cardiac auscultation</i>   | Normal heart rate and heart sounds   | Mild to severe tachycardia (<200 bpm) with normal heart sounds  | Severe tachycardia and "pounding" heart sounds  | Heart murmur   | Gallop rhythm  | Signs of cardiac heart failure   |
| <i>Modified semi-quantitative thyroid palpation</i>   | Equivalent to score 0 according to Norsworthy et al., 2002                     | Equivalent to score 1 according to Norsworthy et al., 2002  | Equivalent to score 2 according to Norsworthy et al., 2002  | Equivalent to score 3 according to Norsworthy et al., 2002   | Equivalent to score 4 according to Norsworthy et al., 2002   | Equivalent to score 5 and 6 according to Norsworthy et al., 2002   |

BCS: Body condition score; fBMI = feline Body Mass Index.

| VHCCS (Veterinarian Hyperthyroid Cat Clinical Score) / Clinical chart |    |       |          |       |     |          |            |         |
|---|----|-------|----------|-------|-----|----------|------------|---------|
| CASE NUMBER/<br>PATIENT SIGNALMENT                                    | #  | Owner | Cat name | Breed | Age | BW       | Life-style | Feeding |
| Date:   | ET | T1    | T2       | T3    | FT  | Comments |            |         |
| <i>Modified BCS</i>   |    |       |          |       |     |          |            |         |
| <i>Coat and skin status</i>   |    |       |          |       |     |          |            |         |
| <i>Attitude toward clinical manoeuvre</i>                             |    |       |          |       |     |          |            |         |
| <i>Ophtalmic examination</i>  |    |       |          |       |     |          |            |         |
| <i>Cardiac auscultation</i>   |    |       |          |       |     |          |            |         |
| <i>Modified semi-quantitative thyroid palpation</i>                   |    |       |          |       |     |          |            |         |
| <b>VHCCS-TOTAL SCORE:</b>   |    |       |          |       |     |          |            |         |

