

SKIN ISSUES, THEN AND NOW

For the last dozen years or so, we have been fostering rescued Westies in Michigan. Since we began to have hands on experience with the foster dogs, we have had to deal with the allergies and skin issues that Westies have become 'known for'. I remember a time when we simply allowed shelters to put down the dogs whose skin was exceptionally bad because we had no real solutions. But when we began to foster, we began to work with our vet to try to salvage these dogs. For a few years our process with most of these cases was to give them good food, daily baths in medicated shampoo and basically hope for the best. With many, this approach did allow them to recover well enough that they were able to find new homes. But, of course, it didn't resolve anything about their allergies and periodically they tended to continue to have issues. And many, after adoption, ended up on endless steroids which we know cause all kinds of significant health issues.

Then in the fall of 2003, I attended a Westie Foundation Seminar covering Atopy*. Dr. Thierry Olivry was the speaker and it was here that I first learned of cyclosporine and its use on dogs. Following this seminar, I talked to our vet about it and he contacted a local doggie dermatologist to find out more. It sounded promising but at that time there was no "dog" version out. It wasn't until the next spring that Atopica was introduced. By that time, our vet had been to a conference which covered the topic and had more information available. It was then that we got a dog in who needed enough help that this seemed a practical application. The dog responded well and eventually grew a nice coat of hair and became our first success. Since then we have handled several dogs each year. And over time, we have learned and perfected our approach. To date, we have seen many successes and no failures.....even the very worst cases are now living quality lives.

Sadly, we continue to get the calls from distraught owners who have spent thousands of dollars and months or years of effort to no avail. There are still so many vets who insist of treating skin issues with continuous steroids. These owners come to us when they have reached the point of despair and are ready to give up or put down the dog. Even though we tell them that there is a solution, most have already made the decision and don't have it left in them to start the struggle anew. We have posted this paper covering our approach to the issue on our website in hopes that people searching for answers might find it and take it to their vet or contact our vet. And we have learned that this does happen. But all too often, we end up with the dog.

Many blame food for their dog's allergies but we don't assume that food is the problem. It is actually seldom the issue and it is a very difficult issue to test for and define. We assume that it is not food and use the following approach instead:

TREATMENT FOR WESTIES WITH SEVERE SKIN ISSUES

December 15, 2008 (updated 2/17/12)

Our vet is Dr. Brad Theodoroff at Animal Medical Center of Troy 248-852-9800

Generally when a dog comes into Rescue and is having allergy/skin issues, we take him to see Dr. Theodoroff. Following is a general description of the things that are usually done to help the dog. When these procedures are followed, we have a very high success rate.

Dr. T. checks the dog over.

- checks for fleas; if present, then treats for adult fleas with Capstar, and or Parastar Plus.
- both ear canals tested for yeast, bacteria and mites
- tape prep of skin sores and feet for bacteria and yeast
- skin scraping to check for mites
- blood panel, heartworm testing, fecal testing
- all dogs are started on Sentinel for flea and heartworm prevention, and hookworm, whipworm and round worm treatment and prevention
- thyroid panel if the dog has the look of a dog with thyroid issues (unusual)

Most Recues with skin disease or itch are suffering from Atopic Dermatitis. In human medicine, the common name for Atopic Dermatitis is eczema. Recently, there is emerging evidence that the inflammation in Atopic Dermatitis results primarily from inherited abnormalities in the skin - a skin "barrier defect". This barrier failure causes increased permeability of the skin and reduces its antimicrobial function. Additionally, the "barrier defect" means that Water is lost; Irritants (soap, detergent, solvents, dirt) and Allergens (pollens, dust-mite antigen, microbes) may penetrate through the skin "barrier defect".

Dr. T. usually recommends the itchy dog start on Hill's J/D food which has lots of Omega 3 fatty acids and can often provide enough support for the mildly allergic dog without going into the steps below. Additionally the Omega 3's are powerful antioxidants and have anti-inflammatory functions that aid in skin health and healing. The Omega 3's are thought to help restore or improve the disrupted skin barrier and do help the skin retain moisture. J/D has more Omega 3's than the skin and allergy diets. Every cup of J/D is the equivalent of a cup of DermCaps and has more Omega #'s than any other supplement. (No, this isn't a typo.....Yes, J/D is a joint disease food but it is what we use for the skin/allergy issues.)

Dr. T. usually will apply Revolution at the time and then again in 2 weeks time just in case there are undetected Sarcoptic mites (mange).

He will often give us

- antibiotics if he feels they are appropriate and always if steroids are used (Simplicef, Clavamox, Zeniquin or Baytril are the typical antibiotics used) Note: There is now an antibiotic injection, Convenia, that we use; it is more expensive but one less thing to give orally. Convenia last for 2 weeks. Many Rescues will need to be on antibiotics for 4 to 6 weeks, sometimes even longer!

- ketoconazole tablets, rinses and or creams may be used if yeast is present in high numbers
- a single steroid Dexamethasone Sodium Phosphate(Dex SP) shot that last around 1 week (sometimes followed by another but not always. (This is to relieve the itching until the Atopica, antibiotics, baths, moisturizers and the Omega 3's can kick in.) Sometimes an injection of Tiamcinolone, a stronger and longer lasting steroid is given. Stronger and longer does not mean better since steroids have profound effects on the immune system and long-term health for our Rescues.
- Pyoben shampoo (a benzoyl peroxide, antimicrobial, keratolytic, follicular flushing shampoo) that we use daily until the skin starts to improve. Then we may reduce to every other day or as needed. Note: How often the dog needs to be bathed depends on the severity of the skin issue. The shampoo needs to stay on for 10 minutes at least; during this time, massage the shampoo into the worst areas on the dog; be sure to use a soft toothbrush between the dog's toes. After the shampooing, the dog is rinsed very well with fresh water, if you think you did a good job rinsing, do it one more time. Once well rinsed, massage and/or squeeze the excess water from the hair coat.
- If there are high numbers of yeast found on the tape preps, then KetoChlor is used in place of the Pyoben.
- Humilac (a non-greasy, non-waxy, humectant moisture preserving rinse) which we use as the final rinse after every bath. We make a rinse at a ratio of 5 caps of Humilac to 1 a quart of water and pour the rinse on the wet coat skin and rub it in the coat and skin so that the skin doesn't dry out from the frequent bathing. Daily bathing and Humilac rinse use will lessen the itchiness. Oily or waxy rinses tend to trap bacteria and yeast and/or draw dirt to the skin.
- There are now spot-on Skin Lipid Complexes (Allerderm Spot On) that have been proven to help repair and restore the damaged skin barrier. These are meant to be placed on the dog to cover all the skin. Some veterinary dermatologists are using these products just on the troubled spots (bottoms of the feet, ears, under arms, belly) to lessen the cost of use. Dr T is just starting to use these products and has yet to form his own opinion on their value.
- Once the secondary infections and the skin trauma have healed, (1-2 weeks) treatment becomes long-term allergy management. **Allergies don't go away; some form of treatment will always be needed.** During the allergic times, if you are lucky, the J/D alone will work, or the J/D and a topical cortisone (Genesis Spray), and/or cortisone injection or tablets only when your Westie is allergic. Long-term, Atopica is the best choice in many cases. (We prefer not to use steroids on a long-term basis due to the serious possible side effects.)
- If temporary cortisone use is needed, Dr T prefers injections of Dexamethasone Sodium Phosphate. Sometimes Tiamcinolone (Vetalog) tablets are used. The Tiamcinolone medication will stop the itch with a lower likelihood of causing the Westie to have increased urination and secondary water drinking (PU-PD). Prednisolone, a common steroid, will stop the itch but is more likely to have the PU-PD side effects. The Dexamethasone Sodium Phosphate tends not to cause the PU-PD side effects.
- We have had one dog that had a lot of yeast issues and had to also be treated for yeast eventually. (with shampoos and rinses made for yeast infections)

<http://www.westie3.fatcow.com/RESCUE/ALBUM/CHRISSEY/RESCUEChrissey.htm>

This was an extreme case.

- Note: Putting a tight t shirt on the dog will keep the dog from traumatizing the skin from scratching. They also seem to feel less of a need to scratch when wearing the shirt.

For dogs with really bad skin issues, (very bad itch or skin allergies many months out of the year):

- Atopica: For the typical Westie (16.1 to 33 pounds) we start at 50mgs a day. We always give with Reglan to avoid nausea for the 1st week or two.
 - o Typically we give Reglan when the dog's tummy is empty, about 1.5 hours before a meal. Then after $\frac{1}{2}$ hour, we give the Atopica. Then after an hour, we make sure the dog gets a meal to help keep his tummy settled. The Reglan can be discontinued after 7- 10 days. (Some dogs do react to the Reglan and something else must be used but this is unusual. The "reaction" we have seen is hyperactivity.)
 - o We give the Atopica daily for 30 days and then continue daily until we see a definite improvement. At that time, he instructs us to reduce to every other day for two weeks or more and see if the improvement continues. If it does, we eventually get down to every 3rd day or twice a week. There are reports of dogs being able to go off the Atopica totally and becoming allergy free but Dr T has yet to have a dog become allergy free. Sometimes the dog may not need to be on the medication year round, depending on when the dogs has allergies, Atopica, can be restarted daily at least 1 month prior to allergy time and then used at the lowest effective dose during the pet's allergy season.
 - o Some Dogs that do well on year round Atopica 2x/week, may need to return to every other day (or daily) use during peak allergy times

Note: The steroid shot will mask the effects of the Atopica. You cannot reduce the Atopica until you are sure the steroid shot is worn off and the improvement is actually continuing.

Note: Dogs that have ear infections will require ear drops such as Mometamax or Baytril. Medication is selected based on what is seen on the ear canal testing

<http://www.itchnot.com/> is a good website for owners and DVM's not well versed in the proper testing and treatment of the itchy dog. The site is the creation and resource of a Tennessee veterinary dermatologist and a spokesperson for Atopica, Dr. Keith Hnilica's.

Note: We have had a couple of dogs who are relatively small and were on a 25mg daily dose. Their skin issues were significant and while the 25mg dose was sufficient to keep it under reasonable control, there were still regular breakouts. One of these dogs gained some weight and was able to move up to 50mgs. When this happened, the results were significantly better. The 2nd dog was moved to the 50 mg dose and her adopter reports that her skin is now doing very well. Neither has been able to wean off the daily dose but they are living good quality lives with no known side effects.

Following are a couple of "Then and Now" photos of a couple of our more significant cases.....

THEN: LILY WHEN SHE ARRIVED IN RESCUE (November)



NOW: LILY (4 months later)



THEN: CHRISSY WHEN SHE ARRIVED IN RESCUE (March)



NOW: CHRISSY AT ADOPTION (October)



Further notes on Atopica:

Many are concerned when they learn of the cost of Atopica. At \$2-3 a pill, on a daily basis it is rather expensive. However, for most dogs, the daily dose is very temporarily. Once weaned down to twice a week, the cost is reasonable and the quality of life is well worth this expense.

* <http://www.westiefoundation.org/pages/health/seminars.html>