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## SKIN ISSUES, THEN AND NOW

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Beth Widdows

For the last eight 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 on 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 a 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

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Our vet is Dr. B. Theodoroff at Animal Medical Center of Troy 248-852-980

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
- skin scraping to check for yeast and mites
- blood panel
- thyroid panel if the dog has the look of a dog with thyroid issues (unusual)

Dr. T. usually recommends the itchy dog start on Hills 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 have powerful antioxidants that

aid in skin health and healing. J/D has more Omega 3's than the skin and allergy diets. (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 or Baytril are the typical antibiotics used)  
Note: There is now an antibiotic injection that we use; it is more expensive but one less thing to give orally for several days.
- a single steroid (Tiamcinolone) shot that lasts around 2 weeks to a month (sometimes followed by another but not always) (This is to relieve the itching until the Atopica can kick in.)
- 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.

- Humilac (a non-greasy, non-waxy, humectant moisture preserving rinse) which we use as the final rinse after every bath. We add it to a quart of water and rinse the dog so that the skin doesn't dry out too much 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.
- Once the secondary infections and the skin trauma have healed, (1-2weeks) 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, 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 Tiamcinolone (Vetalog). This 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.
- 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/EDU/RESCUEChrissy.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 1<sup>st</sup> week or two.

- ◇ Typically we give Reglan when the dog's tummy is empty, about 1.5 hours before a meal. Then after ½ 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 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.)
- ◇ 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 a week or two and see if the improvement continues. If it does, we eventually get down to twice a week. Occasionally a dog may be able to go off of it totally but normally it stays at 2x/week.
- ◇ Dogs that do well on the 2x/week Atopica may need to return to a

3x/week or every other day dosing during the time that their allergies are the worst.

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: These dogs may have ear infections that also require ear drops such as Mometamax or Baytril.

Note: Recently 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 2<sup>nd</sup> 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)**



**THEN: CHRISSY WHEN SHE ARRIVED IN RESCUE (March)**



**NOW: LILY (4 months later)**



**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/seminars/030919\\_WestieAD.pdf](http://www.westiefoundation.org/seminars/030919_WestieAD.pdf)

