## <u>Treating Allergy Step-by-Step</u>



Step 1:

Most itchy dogs have symptoms that are confusing; however, there are some characteristic symptoms that are typical for certain diseases.

- 1. 80% of dogs with scabies will thump their leg when you rub/scratch their ear margin. Skin scrapes for scabies are only 20% accurate.
- 2. Any itch or dermatitis on the lumbar area (behind the ribs) is most likely flea allergy; even if fleas are not observed. Capstar administered orally every 48 hours for 1 month will resolve flea allergy dermatitis.
- Food allergy is difficult to diagnose but if a dog has dermatitis around its anus or is a German breed or is less than 1 year of age; food allergy is likely and a food trial should be performed.
- 4. If a dog is foot licking, it is most likely atopic (environmental allergies)

STEP 2 WHAT ARE THE INFI	ECTIONS?
Perform 3-Slide Technique (Slide 1: Ea	r Swab; Slide 2: Skin Scrape/Impression Smear; Slide 3: Tape Preps)
☐ Pyoderma	☐ Otitis (Cocci, Yeast, Pseudomonas)
☐ Demodex	☐ Pododermatitis (Cocci, Yeast)
□ Dermatophytosis	☐ Yeast Dermatitis

Step 2:

80% of allergic dogs have secondary bacterial or yeast skin or ear infections.

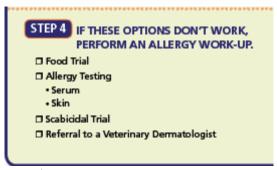
- 1. It is impossible to look at the lesions an guess what is the cause of the infection.
- 2. Every dog with skin disease should be screened for secondary infections.
- 3. Cytology is the only way to confirm which infections are present.
- 4. If used for <u>every</u> case, the 3 slide technique will generate income, represents best medicine and saves the owner time and money by avoiding therapeutic misadventures.
- 5. The 3 slide technique is easy, fast, and accurate.
  - a. Every dermatology case should be screened using the 3 slide technique.
  - b. Technicians can be rapidly trained to perform the screening.
  - c. Technicians are often more patient and thorough than doctors.
  - d. One fee for all 3 slides makes it easier to implement this strategy.
  - e. What are the 3 slides?
    - i. Skin scrapes for demodex or scabies
    - ii. Skin impression smears or tape preps for bacteria or yeast
    - iii. Ear swabs for cocci, yeast, or pseudomonas.

STEP 3 CONSIDER APPROPRIATE MEDICATIONS
☐ ATOPICA® (Cyclosporine capsules, USP) MODIFIED
☐ Topicals (Disinfecting shampoo, Anti-itch conditioner)
☐ Antihistamines
☐ Essential Fatty Acids
☐ Sleep Promoters
☐ Dex Na Phos

Step 3:

If no obvious diseases exist and the infections are identified for treatment; the patient will likely respond to symptomatic therapy.

- 1. Every allergic dog should be bathed in disinfecting and anti-itch shampoo; weekly.
- 2. If a rescue dose of steroids is necessary for SEVERE itch, Dexamethasone injection can be administered to stabilize the mast cell membranes and "reset" the itchy inflammation.
  - a. Injectable dex only lasts for a few days and rarely causes problems.
  - b. The patient does not need the LONG duration of effect of DepoMedrol or Vetalog but rather only needs a quick reset to allow the alternative medications to work better.
  - c. It is too easy for owners to get refills of oral steroids making injections easier to regulate by the doctor. This also insures a recheck visit and infection screening so that pyoderma or yeast dermatitis is not treated with steroids.
- 3. Antihistamines and essential fatty acids are beneficial with almost no adverse effects.
  - a. EFAs can be administered through the diet. Any food trial diet or joint diet will have LOADS of EFAs.
  - b. Any antihistamine that reduces the symptoms is the one that should be used. Consider Clemastine and amitriptyline as they are non-sedation and cheap..
- 4. Benadryl is a useful antihistamine and sleep promoter.
- Atopica can be a first line treatment choice if more conservative therapies fail (antihistamines, EFAs, etc). Some owners may want to select the most effective treatment option as the initial therapy.
- 6. A food trial does not have to be performed before treating with Atopica unless there are suggestive symptoms (see Step 1).
- 7. Atopica is the only treatment in this group that actually targets the cause of the allergy; the T helper cells.



Step 4:

If the patient has not responded before step 4, it is likely going to be a frustrating case to manage and referral should be seriously considered.

- 1. Referral will be the fastest and easiest option for resolving the allergic symptoms if nothing has worked so far.
- 2. The food trail is placed in step 4 because, unless there are obvious suggestive symptoms, food trials in a general practice settings are very unrewarding.
  - a. If 100 itchy dogs are evaluated, food allergy is likely the allergic cause in 15% (15 dogs). Based on the AAHA 2003 Compliance Study, food trials are only 14% successful. Therefore, 15 dogs with only a 14% success rate = 2% overall success.
  - b. Only 2 out of 100 itchy dogs would be successfully treated with a food trail if every dog was forced through a food trial due to the rarety and lack of owner compliance.
  - c. Due to this low success rate, it is logical to delay the food trial until other more successful therapies are attempted.
- 3. Allergy testing is most successful if the patients are diligently followed and even micromanaged. Typically, dermatologists do this better.
  - a. Performing both a blood test and skin test simultaneously is ideal.
  - b. Blood tests can be used successfully if the patients are closely monitored.
  - c. Skin testing has been the historical "gold standard" but is not without flaws.
- 4. If the patient has not been treated for scabies yet, now is the time: just in case it is an atypical presentation.

## Treating The Itchy Dog

