

ATOPIC DISEASE

Atopic disease is an itchy skin condition sometimes referred to as atopy, environmental allergy, inhalant allergy, or 'hay fever'. It may occur in dogs, cats, and many other animals. In dogs, it is a common, often hereditary problem that can occur in any breed of dog but in many breeds such as terriers, retrievers, and also German Shepherds, Bulldogs, Pugs, Lhasa Apsos, Shih Tzus, Boxers, Dalmations, Spaniels (especially Cocker Spaniels) and Shar Peis seem to be more likely to have this problem. Cats have not demonstrated a clear breed predisposition.

The most common sign is itching. This is seen as foot licking, leg chewing, face rubbing, armpit, belly and groin licking. Head shaking and ear infections are also very common. The coughing, sneezing, runny eyes that are common with human allergic reactions may occur, but are much less frequent in animals. The agents causing the allergies may be inhaled or possibly absorbed through the skin. Cats can show any of the signs seen in dogs, but their normal grooming behavior can be difficult to differentiate from the excessive licking seen in atopy. Cats sometimes only show 'miliary dermatitis' as the only noted problem (which may not always be itchy). Flea allergy (allergic reaction to flea bites/ flea saliva) can go along with atopy but itching is usually focused on the rump, tail, groin and thighs. Animals with these allergies may ALSO be allergic to (or develop allergy to) certain foods (see Food Allergy handout). The scratching and inflammation associated with atopy often lead to SECONDARY INFECTIONS (bacteria or yeast or both) and seborrhea (dandruff) which create additional discomfort.

The typical history associated with an allergic animal is that clinical signs begin to develop between 6 months to 3 years old. For approximately 50% of dogs, the first few winters may be free of signs unless there is allergy to house dust/ dust mites/ or other indoor items. Allergies usually worsen with age, and the problem can progress to year round in many cases. The other 50% of dogs start with year-round clinical problems.

DIAGNOSIS is based on history, clinical signs and eliminating all other problems that can cause similar signs. This may be a time-consuming process. There is still NO laboratory test (such as a blood test) to diagnose atopy. Confirmation of atopy is based on intradermal allergy testing or blood tests, however, these tests are not 100% and can not be used alone to diagnose atopy.

Allergies may be controlled, and can not be cured. Treatment of allergic pets depends on the severity of clinical signs and the history of the patient. Avoiding items that cause allergies is ideal, but often difficult with airborne agents.

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Treatment options:

PREVENTATIVE THERAPY:

- Hyposensitization using an allergy vaccine is considered the safest/most effective therapy. This is the therapy of choice in most allergic pets. The downside is that injections must be given all year long (usually done at home by the owner), and the vaccine may take up to 12 months for full effect. Many pets show improvement during the first 4 months of treatment. This is usually continued as a life long therapy. The intradermal allergy test (IDAT) is done to determine what should be included in the allergy vaccine. Antihistamine and steroid therapy interfere with skin testing, so antihistamines need to be stopped 2 weeks prior to skin testing, and most steroid need to be stopped 6-8 weeks prior to the test.

This therapy is successful 60-70+ % of the time. Some animals still need added therapy during their worst time of the year. This is the only therapy that strives to prevent the allergic reaction from occurring, ie preventative. Symptomatic therapy may be used concurrently.

SYMPTOMATIC THERAPY:

Less Aggressive

- Antihistamines have fewer side effects and are effective 20-30% of the time. Multiple daily dosing is required in pets. Two week trials with each antihistamine are done to determine which antihistamine is most effective for an individual.
- Fatty acid supplements also have few side effects and are effective 20-30% of the time. High dose omega-3 fatty acids are the most common form of supplementation that helps with atopy. Other combinations of fatty acids can also be used. These medications are often more effective if used in combination with antihistamines. Trial and error must be used to determine which medications to use.
- Bathing and topical therapy are also helpful. These usually only help short term but may help decrease itching.

More Aggressive

- Atopica[®] is a new therapy for atopy that is very effective (60-100%) and has very few side effects. Since this is new therapy, dogs need to be rechecked periodically while on this medication (initially monthly then less frequently). This therapy has also been used successfully in cats.
- Cortisone-type drugs (steroids) are the most common nonspecific, anti-inflammatory, anti-itch medications used. These are also the most dangerous since they can have many unwanted, potentially life threatening side effects. Life long monitoring is required if using steroid therapy. This therapy should only be used for short periods or if safer options are not effective.

Secondary bacterial and yeast infections must always be considered if an animal has had an allergy flare-up. If the infection is present, it may seem as if the medications used for the allergy aren't working. Microscopic cytology of skin samples need to be taken to determine if these are present. If present, then anti-bacterial or anti-yeast medication must also be used along with the therapy to control atopy. Failure to address this problem can result in persistent clinical signs.