

LC. Addison's Disease

LC had always been sound sensitive. By 2 years, it had progressed to full panic attacks with severe panting and shaking if she saw lightning or flashes of light, or heard thunder or fireworks. Her inclination was to hide in the corner behind the toilet in the windowless bathroom. I would shut the door and just sit with her. At age 4 when we moved and had windows in every room, she would hide in a closet, but I also had to turn on all the lights, and play the radio or TV loudly, in addition to sedating her with valium.

Her first estrus was at 6 months. She cycled every 5-7 months and each estrus lasted 4 full weeks. At age 4.3 years she was spayed. It was at least 2 weeks before her energy started to come back. When LC was quite young I read an article in the Beardie Bulletin about a Beardie named Tegan who nearly died before her adrenal failure was diagnosed. Because my girl displayed some of the same behaviors, I told my vet that I suspected she would develop adrenal failure at some point. To her credit, my vet took my intuition seriously and started monitoring electrolytes.

At age 3.4 years LC's first cortisol stimulation test was low normal; at age 4.4 years, very low normal; at 5.4 years: Zero. One month later she experienced adrenal crisis. A year of medication, nutritional and mineral supplementation trial and error, with my vet consulting the endocrinologist at Washington State University, and getting help from a local vet and resources at Dynamite Marketing, LC's sodium/potassium ratio was normal. Ultimately, to lower her potassium we had to raise her sodium, to drive the potassium intracellular and normalize the Na/K+ pump. She was maintained on Fluorinef 3.5 mg, multivitamins, MSM, SOD, trace mineral/potassium supplement and Nutro dog food every 12 hours. If her stools became even slightly softer than normal it meant she needed 0.25mg prednisone.

During the first 5-6 months of getting Addison's under control and because of the glucocorticoid load, she had a lot of muscle wasting and also developed an umbilical hernia and urinary incontinence (*Editor's Note from Linda Aronson, DVM: the incontinence may have been more due to spaying as the prednisone dose was relatively low and the hernia perhaps became more obvious because of the weight loss*). LC was given some muscle/weight building drugs and a high protein diet; gradually the hernia resolved and the incontinence was manageable with ephedrine (later used phenylpropanolamine).

LC died at age 11 of mesothelioma. For about a year prior to her death, she had been intermittently lying with her upper back pressed against the edge of a door frame. Discomfort was relieved with acupuncture. Neither the regular nor the holistic vets could identify any abdominal masses or tenderness. On a Monday night, she developed noisy and labored breathing. Tuesday am, X-ray showed large pulmonary effusion (fluid around the outside of the lungs). The vet drained 12cc of fluid, and stopped when she became restless. Because she also had adrenal failure, I made the decision to forego any further treatment and to euthanize her when her breathing became an issue. That occurred 3 days later. Mesothelioma was diagnosed on necropsy. Her breeder reported that LC's dam had died of some type of rare, abdominal tumor.

Lessons: Be alert, be aware of health problems (and their non-specific symptoms) known in the Bearded Collie and tell your vet. Although many are reluctant to do so, a necropsy may help establish a cause of death as in LC's case.

(Editor's Note: There are 94 Beardies with Addison's disease in BeaCon's open health registry.)