

B – SLO and more



Editor's Note: I first met B in BeaCon's Open Health Registry when checking new entries. His youth coupled with several health problems sure grabbed my attention. He had hip dysplasia diagnosed at 6 months, SLO diagnosed at 3 years 10 months, hypothyroidism diagnosed a little after 4 years and then a pad problem with loss of skin, hair, pigment, and development of sores. He is 4 ½ years old. His owners say he is a very sweet dog and they are "hoping to give him the playful life every Beardie deserves."

His SLO care began with his regular vet and then by two dermatologists who have stated that it is one of the worst cases they have ever seen. The first sign of a problem was excessive bleeding after a dew claw was trimmed in early July 2016. He continued to lick that dew claw and it was swollen and red. His regular vet diagnosed a fungal infection in early August. Treatment was cephalexin, fluconazole (antifungal), rimadyl, and a cone to prevent licking. He also had nail cleaning twice daily with 3% chlorhexidine; most nails were split up the back and they looked hollow. The dew claw didn't improve and it was removed by the vet in late July. Very soon another nail from a back paw was lost.

His owner did an internet search for causes of nail loss and found out about SLO; she scheduled a dermatology appointment in early August and SLO was confirmed by the clinical appearance and history. It was predicted that all nails would be lost and indeed almost all were gone within a month. The treatment regimen was changed; cephalexin and fluconazole were stopped. Pentoxifyline, niacinamide, prednisone, and doxycycline were started; tramadol was given for pain. He began having diarrhea several times daily.

Six weeks later (mid-September), there had been no improvement. The dermatologist thought the diarrhea was from the medications, started several meds to treat the diarrhea while continuing the medications for SLO. At this visit the owner mentioned that B was losing hair and that his skin was scaly. She questioned whether he might also be hypothyroid but the vet said there were no clinical signs of that. There was disagreement on this point. The diarrhea continued and B required IV fluids once because of dehydration.

Two weeks later B was seen by a new dermatologist at the hospital where he had gotten IV fluids. This dermatologist confirmed hypothyroidism with lab testing and B was started on thyro tabs. Because he was still very sick from all the previous meds, those were stopped and then restarted one at a time. He could not tolerate the 100mg of the Atopica, so it was decreased to 50mg. It is thought that the prednisone and thyroid problem caused the hair loss. The doxycycline has made him the most sick.

B was also placed on a hydrolyzed protein diet to allow intestinal healing after the many weeks of diarrhea. Even so, B would not eat the diet so was changed to a grain free chicken formula

In mid-October he began having the pad problem of lost pigment, hair loss, and sensitivity to touch. Hydroxyzine was prescribed for possible allergies; it was used only about two weeks. His pads were also treated with Douxo Chlorhexidine spray which had no effect and so A&D ointment was started in December. So far the pads are improving and a pad biopsy has been postponed. B is playing more and feeling better.

Pads with hairloss, loss of pigment, and open sores



Unfortunately, in mid-December B began losing his nails for a second time. There has been bleeding of the nail bed associated with loosening and the loss of nails. The Atopica was briefly changed to a generic version. A black discharge developed around the nails and a scraping identified a bacterial infection that was treated for Simplicef (3 weeks). The nail beds are improving now although two nails are split up the back. His diet is a grain free, gluten free formula. Most nails are very brittle and many are misshapen. The owners learned through the SLO Yahoo group that dogs whose first round of nail loss is quick, usually also lost nails a second time which has happened; and that it takes about 5 months on the medications to get the immune system under control. If all goes well for two months, the plan is to start cutting back on the Atopica.

Some nails have been removed because it is quite painful when the nails are loose and snag against things. Currently he is under the care of 2 vets – 1 for regular care and hypothyroidism; 1 for SLO and the pad problem. The breeder was notified of the nail problem; support hasn't been forthcoming.

The photos below show his nails in various stages of the disease from active to healed but abnormal.





Editor's Note: If you need more persuading about SLO, check out the fall 2013 newsletter on SLO (<http://us2.campaign-archive1.com/?u=1831c0c9014c14b431a145995&id=d3274e8a16>)

I urge every reader to consider what they might do to help assure that future generations of Bearded Collies never experience the miserable life that B has had and the great costs (time, emotion, financial) the owners have borne so far.

What can a breeder do? What can a non-breeder do? Everyone can enter their dog in BeaCon's open health registry – healthy or with a health problem (see Dr. Battaglia's article in this newsletter about why you should do this). Some can contribute by participating in research. Take the time to thoughtfully study related sections elsewhere in this newsletter. Become an active participant in various research projects if your Beardie meets the criteria.

