

Arthritis in Older Dogs

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Arthritis is the end result of the wear and tear on the joints, usually developing over the years as the dog ages. Damage to any joint, whatever the cause, can result in the development of arthritis.

Hip and elbow dysplasia, chronic osteochondritis (OCD) and back conditions are generally the cause of the worst arthritis seen in many breeds. The knees (stifle joint) and feet are other joints that are frequently damaged and go on to develop arthritis.



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Neck problems

These are seen principally in very small breeds and Dobermanns. Many toy breeds spend their life bouncing up and down trying to get the attention of their owner/food giver. These dogs can end up with chronic arthritis at the base of the neck (similar to a stiff neck in humans), requiring periodic rest and treatment with anti-inflammatory drugs. In severe cases the use of neck braces for several days can give the dog a rest while the drugs kick in. These dogs can be very vocal about the pain and are reluctant to move or raise their heads.

Dobermanns are prone to "Wobblers" – a condition where the vertebrae destabilise at the base of the neck causing pressure on the spinal cord behind the lesion, resulting in a "wobbling action". Cases are generally seen over 5-7 years of age and treatment varies as to the severity of the condition and the age of onset. Older dogs are generally managed with drugs and rest.

Foreleg problems

When arthritic problems occur in the forequarter, they are usually very noticeable, as the forequarter bears some 80% of the weight of the dog while in forward motion.

Shoulders – while the shoulder joint is not commonly affected, when it is affected, the lameness can be quite severe. Large to giant breeds that have chronic changes, due to OCD in the shoulder when they were younger, can have tendonitis as well as bony changes within the joint. Toy breeds can get luxation of the shoulder joint which can be very difficult to stabilise.

Elbow- the most common joint affected by arthritis in the

forequarter would be the elbow. Chronic arthritis of the elbow is shown by reduced flexion and extension, often accompanied by considerable thickening of the joint. Affected dogs often stand with their elbows out from the body, try to shift their front weight from leg to leg, are reluctant to go for long walks and have decreased mobility. While the original cause may have been osteochondritis (OCD) causing elbow dysplasia in the younger dog (5-9 months of age), these joints gradually become more arthritic with age. OCD affects many breeds, particularly those over 18-20 kg weight as adults.

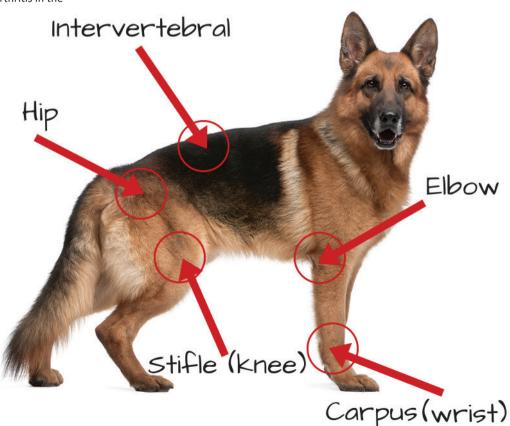
Pasterns (wrist) – while arthritis problems are not as common in this joint, they can be a source of considerable pain and almost fusion of the wrist. There is reduced flexion of the wrist and thickening. Most commonly seen in Collie breeds and Shelties as they age. There are usually dogs that have a life time of jumping up and down at gates and fences. Feet – sesamoids are very small bones in the feet that line within the tendons of the foot where the tendon runs across a joint (rather like the knee cap). Sesamoids can be damaged and/or fractured, resulting in joint thickening over the affected sesamoid and joint, leading eventually to fusion of the affected joint in the older dog. These problems are very common in older Rottweilers, Dobermanns and Bull Terriers. This can affect all four feet, most commonly the lateral toes first affecting the top then middle joints.

Spinal Disorders

Spondylitis – this is a spur formation between the vertebrae of the spine, which can gradually form bony bridges. When a bridge has been formed, the two vertebrae are linked and cannot move independently. The movement of the bony spurs against one another is very painful. The "bridges" can occasionally fracture because of an accident, eg. slipping downstairs, which can almost totally incapacitate the dog.

Spondylitis occurs in many medium to giant breeds, especially German Shepherd Dogs, Rottweilers and Great Danes. Spondylitis can also occur in cross breeds, in reality can appear in any breed, the highest incidences is seen in the heaviest, fast growing breeds and individuals. It is not considered a genetic condition, however, German Shepherd Dogs are considered to be over represented. Age seen – generally from 5-6 years onwards with the heaviest incidence above 8 years of age.

Cause – specific causes yet to be defined, but as the incidence is highest in the heavier breeds, one has to consider whether rapid growth rates could in turn set off minor OCD lesions along the vertebral facets in the young rapidly growing dog.



Symptoms – arching over the back, pain on rising and on palpation along the back. On X-ray, the characteristic lipping and new bony bridges linking between various thoracic and or lumbar vertebrae are clearly visible. Many dogs can have quite extensive changes that actually fuse the vertebrae together, these changes are stable over long periods of time, however they can flare up in colder weather and with excessive exercise. Slipping can fracture or crack the bridges, creating excruciating pain.

Treatment – rest and use of anti-inflammatory drugs usually works very well. Acute cases may require 4-6 weeks rest. Weight should be reduced if well above normal. Care with adequate housing and coats in the colder weather will assist.

Prognosis - Severe cases may have a poor prognosis if there is nerve dysfunction and pinching secondary to the arthritic changes. Most cases can be reasonably well managed for years.

Diskospondalyitis – inflammation and infection of the ends of vertebral bodies – usually in 2-3 sites along the back. Occurs in medium to giant breeds, German Shepherd Dog's, Rottweilers, Great Danes and crossbreds. It is not considered a genetic condition. Average age of onset 4-6 years, males outnumber females 2:1.

Symptoms - can vary from mild to acute onset. Signs of acute pain along the back as well as difficulty in rising, arching over the back, reluctance to jump, stilted gait, occasionally ataxia or paresis (reduced nerve response) of the hindquarters. Any disc space can be affected, most commonly the lumbar vertebrae.

Causes - bacterial, generally staph infections.

Treatment - for minimum 6 weeks on strong antibiotics and anti-inflammatories. Ongoing treatment with anti-inflammatories is often required, occasional bouts of severe inflammation may require repeat long courses of antibiotics.

Prognosis - Long term outcome depends on the infection and degree of spinal cord damage. Generally good long term with variable degrees of nerve damage – usually stabilises after treatment.

Cauda Equina – is a condition where the disc at the junction of the lumbar and sacral vertebrae becomes unstable, pushing up and pinching the spinal cord. These dogs can have a whole range of symptoms including stiffness in rising, as well as possible faecal incontinence. Seen in many breeds, more commonly in the medium to large breeds, including the German Shepherd Dog, Labrador Retriever, St Bernard, Rottweiler, cross breeds etc, most commonly over 8 years of age.

Symptoms - seen in the older dog, usually over 5-6 years of age (more commonly over 8-9 years), showing difficulty in rising, pain and lameness in the hindquarters, often more severe in one leg than the other. The more severely affected dogs may have faecal incontinence and the tail may have limited movement. On a lateral X-ray of the pelvis, the changes around the lumbo-sacral junction are very obvious and fairly distinctive.

Differential Diagnosis – as these symptoms are very similar to chronic HD in the older dog, these different syndromes must be properly differentiated in order to treat them correctly.

Treatment - most dogs respond well to rest, use of strong anti-inflammatory agents for several weeks and will often stabilise on ongoing medication. In the younger animal and/or severely affected individual where there is considerable nerve pinching from disc protrusion, surgery to remove the disc may be warranted.

Prognosis – depends on the severity of symptoms, however most respond well to rest, adequate medication and can survive for years on good management techniques. Those animals with faecal or urinary incontinence are obviously more severely affected and their long term prognosis can be poor unless there is very good (and rapid)

response to medication; these dogs are candidates for disc removal surgery, but often their advanced age may preclude this being really feasible.

Hindquarters

Hip Dysplasia – many breeds (and cross breeds) develop arthritic changes secondary to hip dysplasia. As hip dysplasia is defined as an ill fitting hip, the body tries to stabilise the joint by developing bony changes in an attempt to keep the hip firmly anchored to the joint. As a result, over time there is a reduced arc of movement for the leg, in severe cases there is muscle wasting around the hip area and a reluctance to bear weight or move very far.

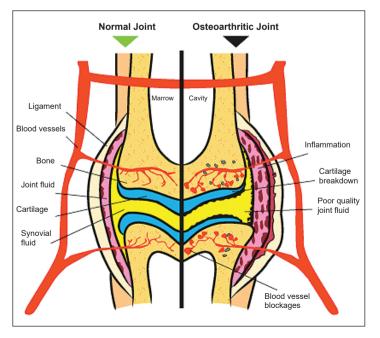
Younger dogs have quite a few options open including femoral head replacement, etc. Older dogs with gradually reducing mobility are often usually managed on drugs alone, with courses of treatment particularly during the winter months.

Stifles (knees) – are a common site for damage of ligaments within the knee and patella luxation. Anterior cruciate ligament damage would be the most common injury seen, usually resulting from dogs racing out, breaking and twisting to catch balls, frisbees etc. Occasionally the meniscus (cartilage) can be damaged as well. Many of these dogs go on to damage the other knee as well, as their habits often remain unchanged. Despite repairs, many of these dogs have residual arthritis that can result in some stiffening and thickening of the joints with age.

Patella luxation is very common in smaller, toy breeds, with loose ligamentation. The patellas usually luxate medially and can, over time, become fixed due to the shortening of the patella ligaments. These dogs can be permanently lame, or have an intermittent lameness as the patella slips out of position, destabilising the knee. Surgery is generally performed to stabilise the patellas. Some of these dogs may require treatment for some arthritis as they age.

General Symptoms of Arthritis

These include stiffness of movement, difficulty in getting up in the morning, slowness going up and downstairs, reduced ability of affected limbs moving through a normal arc of movement for the joint to bear weight, and consequent limping. The symptoms increase in severity in cold or damp weather, after exercise and with age.





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'If despite treatment for arthritis, the dog is not improving within a relatively short space of time, return the dog to your veterinarian in case there could be other conditions involved, particularly if the dog is not weight bearing on the affected leg.'

General Treatment for Arthritis

This is aimed at reducing pain. Once arthritic changes are present, they cannot be reversed. With chronically arthritic individuals, pain relief is all important and drugs of some sort should be used to relieve discomfort and pain. Drugs used act in various ways to diminish the pain in the affected areas.

Drugs used include cortisone (particularly for spinal cord pinching or damage), Previcox*, Metacam*, Rimadyl*/Carpofen* (NSAID's) as well as injections of Cartrophen* when needed.

Cartrophen (penosan) is a drug that increases the blood supply to the cartilages within the joint. This is used frequently with inflamed cartilages and where there is joint damage. Often a course of Cartrophen injections is given weekly for 3-4 weeks that can help stabilise the joint cartilage for several months at a time. This can be used in conjunction with other drugs. Elderly, arthritic patients sometimes benefit from monthly injections.

NSAID's (non steroidal anti nflammatory drugs) have to be given with care in the elderly patient and it is advised that dogs over 10 -12 years of age should ideally have their liver and kidney function checked before use, as they can cause further damage to these organs if they are not in good health.

Stronger drugs (above) can often be complimented with or substituted by "alternative herbal therapies" in milder cases and can, in some cases, make considerable improvement in the mobility of the dog. These alternative drugs include NZ green mussel extract (Liprinol*), Sasha's Blend*, glucosamine etc.

Remember that many of these drugs can cause gastric irritation (even the alternative ones) and they are generally given with food to minimise gastric irritation. If adding herbal treatments, give them at different times to any existing conventional drug. If the herbal treatment appears to be helping, gradually reduce the other drugs being given. Any adverse reaction such as vomiting, decreased

appetite, etc should immediately result in the removal of any drug or treatment creating such an effect and your dog should be checked by your veterinarian.

Alternative therapies can often assist in the care and welfare of older arthritic individuals. These can also include homeopathic remedies, chiropractic treatment and acupuncture.

Drugs that can assist with pain include Tramadol* and can be given in conjunction with anti-inflammatory drugs.

Assisting at Home

There are several ways of easing the chronic arthritic sufferer to make daily living more comfortable:

1. Bedding - blankets, coats, thick bedding

All of these are useful with elderly animals, particularly the coats. Many of the older dears do appreciate long coats over their backs and pelvic areas during the colder months. Unfortunately some dogs, (particularly the males), feel that a coat is beneath their dignity, and will, under no circumstances, wear a coat! Good thick bedding is essential for the arthritis sufferer as it ensures that the dog is not sleeping on cold, hard cement or tiles.

2. Good shelter from the elements

Some tiresome old dears refuse the comforts of home and hearth, and will sleep where they are used to sleeping, outside under the stars and covered in frost. For their own good, put them inside at night in the laundry or in a shed with some form of bedding.

3. Weight

Many older dogs have, like humans, a slightly stretched waistline. A small amount of extra weight can be beneficial in case of illness, but obese dogs with any degree of arthritis will really suffer by having to carry extra weight. Arthritic dogs in particular should not weigh more than 10-15% above their ideal weight.

Many owners ask the question.... "Is my dog in pain?"

The answer to this question varies, as the individual response to pain is enormously diverse. Some dogs may have very little in the way of obvious arthritic changes, yet present a picture of being almost totally crippled; and the reverse can happen where there are massive bony changes, yet little obvious pain. Most veterinarians take each case on its own merits, according to how badly the animal is affected, how they respond to treatment and the supportive care given by the owners.

If, despite treatment, the dog is unable to get up and totter around by itself, then a decision must be made for the sake of the dog. Inability to stand and walk around indicates that the arthritis is at a point where drugs etc, are insufficient to cope with the pain, and it is kinder to put the old darling out of its misery, because misery is inevitable if they are kept as virtual paraplegics. Unfortunately many of these difficult decisions must be faced each winter, as the effects of arthritis are acerbated by the cold; so be warned, and be prepared to do a little extra for your dog and be kind, if and when, you have to make that final decision.