



This case report demonstrates the usefulness of PURINA® PRO PLAN® VETERINARY DIETS DRM Dermatitis for a dog suffering from Canine Atopic Dermatitis

A clinical case study with a dog suffering from Canine Atopic Dermatitis

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Photo 1 - General appearance of the patient

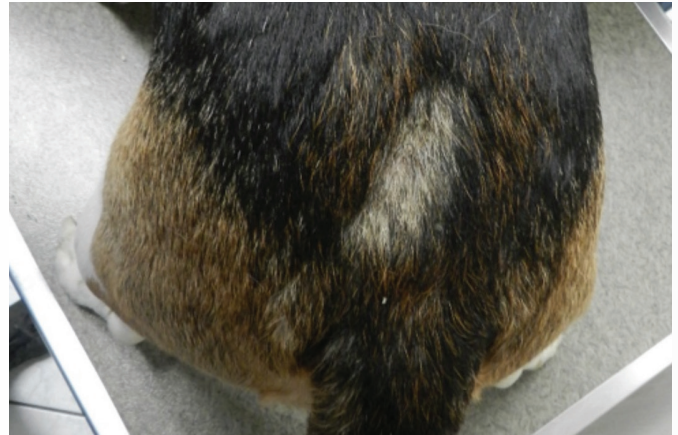


Photo 2 - Overview of the lumbar lesion

Details and case history

"Jerry," a male Beagle 18 months of age, was presented with progressive pruritus and erythema which had developed over several months (Photo 1). The animal lives in an apartment with no other dogs and is fed a commercial food available from large retail outlets. Its vaccinations were up to date and the patient had received proper internal and external antiparasitic treatment. He had no history of disease. The patient had been developing erythematous and pruritic dermatologic lesions over the past few months in the dorsolumbar, auricular, and pedal triangle. His owner did not report any lesions bothering him.

Clinical examination

The animal's general condition was good and he had a healthy weight of 18 kg. The dermatosis was clinically characterized by lumbosacral alopecia and erythema, papulo-pustulosis on the inner surface of the thighs, erythema and slight lichenification of the inner surface of the pinnae as well as the external ear canal, and plantar interdigital erythema and lichenification on all four feet (Photo's 2 and 3). The owners reported a marked pruritus. No trace of parasitism by fleas was noted.



Photo 3 - Close-up view of the auricular inflammation

Differential diagnoses

The symptoms and the history suggested several hypotheses: canine atopic dermatitis, a combination of FAD + otitis + infectious pododermatitis, or *Malassezia* dermatitis.

Additional examinations

Microscopic examination of skin scrapings did not reveal any parasites. Lumbar and interdigital cutaneous impression smears showed only occasional populations of cocci and very low-grade neutrophilic activity. No phagocytosis was observed. Microscopic examination of the product of external ear canal swabbing did not reveal any bacteria or yeast. The trichogram did not show any abnormalities in the hair growth cycles. The tape test (Scotch tape test) revealed only an occasional corneocyte or coccus, but no proliferation of *Malassezia*.

Diagnosis

The history, clinical signs, and follow-up exam results led us to consider a diagnosis of **Canine Atopic Dermatitis**. Following the consultation, Jerry was shown by intradermal skin testing to be sensitive to the airborne allergens *Dermatophagoïdes farinae* and *andacarus siro*. We agreed with the owners to try and manage the dermatosis using Canine DRM Dermatitis.

Therapeutic management and follow-up

In order to best judge the therapeutic efficacy of the new diet, in agreement with the owners, no change other than the alteration in diet was prescribed. The dietary transition took place over 5 days, and then Jerry was kept on the diet strictly for 2 months. Monthly monitoring was planned.

After the first month of follow-up, there was a noticeable improvement in the auricular and pedal areas, but the lumbar pruritus had become markedly worse one week prior to the follow-up consultation.

A single dorsolumbar alopecic lesion was noted (Photo 4). Additional dermatologic exams were carried out but were unremarkable. No fleas were seen. The diet was palatable and easily digestible. The owners mentioned that the peak of the pruritus seemed to have passed and



Photo 4 - Overview of the lumbar lesion

the cutaneous inflammation appeared to be subsiding, so the decision was made not to intervene medically and to continue solely with dietary therapy in this case.

At the end of the second month, Jerry no longer had pruritus, his skin was no longer erythematous, and the three auricular, pedal and lumbar lesion sites were asymptomatic (Photos 5 and 6). The owners were fully satisfied with Jerry's positive outcome, his appetite, and the quality of the stools.



Photo 5 - General appearance of the patient

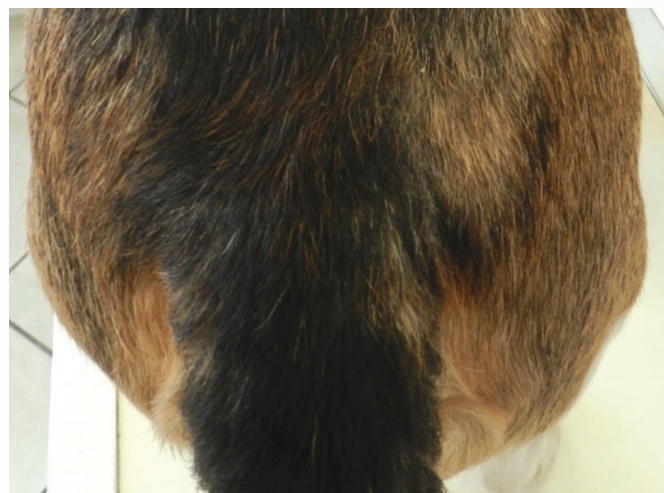


Photo 6 - Overview of the lumbar lesion

Discussion and conclusion

This clinical case shows the value of using Canine DRM Dermatitis food for dermatosis, in particular canine atopic dermatitis. The composition of this product (when fed exclusively) led to a clear reduction in clinical signs. In addition to its notable efficacy, Canine DRM Dermatitis appeared to be highly palatable and easily digestible. Clearly, additional studies are needed to confirm the positive results obtained for Jerry.

In conclusion, this diet is recommended for long-term management of dermatoses such as canine atopic dermatitis.