

A case of phobia in a Chinese Crested Dog

Silvia Moricci*

Veterinary behaviorist freelance

Abstract: A Chinese Crested Dog, entire male, 22-month-old, is referred to the consultation by his owner, a colleague veterinary surgeon, because, while he is waiting to enter the ring of a dog show, he has been afraid of other dogs and people around him. From that moment the dog does not want to enter in the ring and to be manipulated by the judge. The diagnosis was of simple phobia that could evolve into a complex phobia. A behavioral modification, based on desensitization and counterconditioning, was recommended, suspending the dog's participation to dog shows. One month after the behavioral modification was started, for obtaining a better improvement of dog behavior, Fluoxetine drops (0.3 ml/kg SID equivalent to 1.2 mg/kg SID) was prescribed. After 3 months of Fluoxetine treatment, the dog walked quietly in the street, still showing short episodes of fear in unknown places or due to trucks transit but he quickly overcame them. Gradually he was starting to go to more and more crowded places, but he went away if someone tried to approach him.

He learned basic training with the owner. It was not yet brought back to a dog show.

Treatment with fluoxetine was suspended after 6 months, by gradual weaning, without worsening behavior of the dog. Phobia problems related to dog shows were resolved and the animals was calm in the ring and during the examination performed by the judge.

Key Words: dog, phobia, counter conditioning technique, fluoxetine.

* *Corresponding Author:* silviamoricci@inwind.it

Presentation

A Chinese Crested Dog, entire male, 22-month-old, is referred to the consultation by his owner, a colleague veterinary surgeon, because, while he is waiting to enter the ring of a dog show, he has been afraid of other dogs and people around him. From that moment the dog does not want to enter in the ring and to be manipulated by the judge.

History and presenting signs

The dog was purchased, at the age of 5 months, by a breeder in Seville (Spain). When the new owners went to pick it up, the dog was suspicious for about 15 minutes before to permit to be petted.

The owner reports that, at the airport, the puppy was in her arms and he seemed quiet when people approached to touch him.

The dog is brought to Italy in a home located in the country, far away from any source of urban noise, where the owner lives with her husband.

The owner is a Chinese Crested Dog breeder and in the house, there are other 13 Chinese

Crested Dogs (5 males and 8 females), besides two other dogs (a boxer and a fox terrier, both females) and 10 cats.

The dog was purchased for breeding purposes.

All dogs live together in the house and they can access both inside and outside through a cat flap.

They sleep on the sofa or bed without a precise rule. The food is regularly delivered twice a day. In the morning, dogs eat dry food while homemade food is given in the evening.

All dogs eat together in the kitchen; also the dog object of the consultation, consumes his meal in the kitchen together with the others but inside a cage because he eats very fast and he disturbs the other animals.

The owner reports that when she is in the garden with the dog, he always tends to stay close to her, he hardly moves away from her to play with the other dogs and if they run to the gate or to the fence because they have heard some noise, he stays with her.

Dogs are rarely taken to town or outside the home environment except for exhibitions and never a single dog but always 2 or 3 dogs together.

When the dog was 6 months old, he was brought, for the first time, to a dog show with other subjects. He was not afraid in the ring except when he had to be touched by the judge on the table. In this circumstance he tried to retreat but he was firmly kept.

When he was 15 months old, he was brought to a dog show abroad with two other subjects; the owner reported a critical episode: when the dog was in her arms to enter the pavilions of the show, he had a panic attack without any apparent reason; during the show, he was not able to stay both on the table and in the ring from which he attempted to escape.

Back in Italy, the owner asked a veterinarian and breeder colleague for advice on how to handle the problem. The vet suggested her to administer Alprazolam as needed.

For the first month, after the panic attack, on the advice of owner's colleague and friend, the dog was brought 2-3 times a week to the owner's veterinary clinic. While the dog was distracted with a treat, he was touched by foreign people entering the clinic. Alprazolam (0.075 mg/kg) was administered one hour before the dog went to the clinic. The owner reported that the dog has showed aggressiveness towards unknown dogs for 3-4 months.

Physical and laboratory evaluation

During the consultation, the dog showed signs of fear towards strangers, he moved away, and he kept the tail low. If someone tried to touch him, he ran away. Outside, in a known place and if there were not persons in street he was calm, he walked on the leash without problems, and sniffing to the ground.

If there was some people in the street or the place was unknown he became cautious, jumping for any noise; he often froze and tried to go back.

The dog was regularly vaccinated. No previous illnesses and accidents were reported. No laboratory tests were performed.

Diagnosis

The diagnosis was simple phobia that could evolve into a complex phobia. (Colangeli & Giusani, 2009).

Therapy

A behavioral modification, based on desensitization and counterconditioning, was recommended, suspending the dog's participation to dog shows, but the owner preferred to continue to bring the dog to shows, because this was the reason for his purchase, administering him Alprazolam.

A month later, the dog was again brought to a dog show. One hour before the exhibition Alprazolam (0.075 mg/kg) is administered the dog but the animal did not want to stay in the ring, he took off the collar and escaped.

The owner decided to start the rehabilitation therapy with the systematic counterconditioning and desensitization protocol. It is recommended that she remained more time with the dog, frequently playing with the animal.

The dog continued to be taken to the clinic, but he was no longer manipulated. It was suggested to take the dog out in less noisy streets without forcing him to stay outside.

The dog was trained with the clicker and stimulated with simple olfactory research exercises and problem-solving games.

Follows up

After one month from the beginning of the counterconditioning program, the dog began to be more independent. When the owner was in the garden all together, the dog was no longer attached to her but went away to explore and run, along with the other dogs, to the gate, if someone arrived.

The dog gladly went in the car to go to the clinic and gradually began to approach people to sniffle them. On the street the dog still showed fear of people passing by and of strong noises.

For obtaining a better improvement of dog behavior, Fluoxetine drops (1.2 mg/kg SID) was prescribed. After one month from the beginning of the drug treatment, dog behavior sensibly improved, showing less anxiety in stressful situations or in the presence of strangers or loud noises.

After 3 months of Fluoxetine treatment the dog walked quietly in the street, still showing short episodes of fear in unknown places or due to trucks transit but he quickly overcame them. Gradually he was starting to go to more and more crowded places, but he went away if someone tried to approach him.

He learned basic training with the owner. It was not yet brought back to a dog show.

Treatment with fluoxetine was suspended after 6 months, by gradual weaning, without the dog behavior became worst.

Phobia problems related to dog shows are resolved and the animals I calm in the ring and during the examination performed by the judge.

Discussion

Companion dogs commonly experience states of anxiety, fears, and phobias. As Barbara Sherman and Daniel Mills outline, the use of these three terms is often confused, although the underlying neural and emotional systems may be different.

“Anxiety is a reaction to a prospective or imagined danger or uncertainty and it includes physiologic signs (e.g. increased respiratory and heart rates, vasomotor changes, trembling or paralysis, increased salivation or sweating, gastrointestinal disturbances) and behavioral signs. The behavioral signs may include changes in activity (e.g. immobility, pacing, circling, restlessness); changes in nearest neighbor distances (e.g. remaining close to a person or conspecific); or changes in appetite, including anorexia.

Fear is an emotion of alarm and agitation caused by a present or threatened danger. Among animals, fear is manifest by physiologic responses, such as tachycardia, hypersalivation, or elimination, in addition to behavioral responses associated with escape, avoidance, or defensiveness. Fear responses occur in response to the presence or proximity of an object, individual, or social situation.

A phobia is a marked, persistent, and excessive fear of clearly discernible circumscribed objects or situations. Exposure to a phobic stimulus almost invariably provokes an immediate behavioral response with concomitant physiological signs of autonomic arousal. The response may take the form of a situationally bound or situationally predisposed “panic attack”. Phobias often lead to avoidance behavior” (Sherman & Mills, 2008).

The development environment of the puppy can greatly influence the onset of these pathologies for which there is a genetic predisposition of some breeds (Storengen & Lingaas, 2015).

It is in fact known that a stimulating environment, combined with early manipulations (Gazzano et al, 2008) can permit a better stress coping.

There is a number of methods with which to approach phobia, well explained by Walker and colleagues and their description is exactly reported above:

Toughening up. Simple repeated exposure to the aversive stimulus.

Pavlovian Counter-conditioning. The aversive stimulus is used as a conditional stimulus for appetitive unconditional response.

Instrumental counter-conditioning. In which the aversive stimulus comes to act as a discriminative stimulus for the performance of a rewarded instrumental response.

Other two more widely used methods are systematic desensitization and flooding (or implosive therapy).

Systematic desensitization aims at brief exposures to the minimized stimulus which terminate if fear is shown.

In flooding therapy, the patient is exposed in full measure to the aversive stimulus and any attempt to escape or avoid is opposed. The act of flooding causes an immediate increase in fear levels which lead to hasty abandonment of the enterprise (viz. shooting over gundogs in place; standing on the lead of thunder phobic dogs as they attempt to flee), (Walker et al., 2008).

In this clinical case, the counter conditioning technique, with systematic desensitization was applied with good results, especially when the pharmacological therapy, based on Fluoxetine, was added.

References

- Colangeli R., Giussani S. 2004. *Medicina comportamentale del cane e del gatto e di nuovi animali da compagnia*. Poletto Editore.
- Gazzano A., Mariti C., Notari L., Sighieri C., McBride E.A. Effects of early gentling and early environment on emotional development of puppies *Appl. Anim. Behav. Sci.* 2008; 110: 294-304.
- Sherman B.L., Mills D.S. Canine anxieties and phobias: an update on separation anxiety and noise aversions. *Vet. Clin. Small. Anim.* 2008; 38: 1081-1106.
- Storengen L.M. & Lingaas F. Noise sensitivity in 17 dog breeds: Prevalence, breed risk and correlation with fear in other situations. *Appl. Anim. Behav. Sci.* 2015; 171: 152-160.
- Walker R., Fisher J., Neville P. The treatment of phobias in the dog. *Appl. Anim. Behav. Sci.* 1997; 52: 275-289.

Un caso di fobia in un cane di razza Chinese Crested Dog

Silvia Moricci*

Veterinario comportamentista libero professionista

Sintesi

Un maschio intero di 22 mesi di razza Chinese Crested Dog, è portato in consulenza dal proprietario, una collega veterinaria, perché, mentre era in attesa di entrare nel ring di una mostra di bellezza, si spaventò per la presenza di altri cani e di persone attorno a lui.

Da quel momento, il cane non volle più entrare nel ring ed essere manipolato dal giudice. La diagnosi è stata di fobia semplice che può evolvere in una forma complessa. È stata raccomandata una terapia di modificazione comportamentale, basata sul controcondizionamento e la desensibilizzazione, sospendendo la partecipazione dell'animale alle mostre canine.

Un mese dopo l'inizio della modificazione comportamentale, fu iniziata una terapia con Fluoxetina in gocce (0,3 ml/kg SID equivalenti to 1,2 mg/kg SID). Dopo 3 mesi di trattamento, il cane camminava tranquillamente in strada, seppur manifestando brevi episodi di paura in luoghi sconosciuti o al passaggio di camion ma mostrando una rapida ripresa.

Gradualmente il cane ha iniziato ad essere condotto senza problemi in luoghi sempre più affollati ma continuava a mostrare evitamento nei confronti di persone che tentavano di avvicinarlo. Ha imparato esercizi di educazione di base col proprietario e non è stato condotto a mostre cinofile.

Il trattamento con fluoxetina è stato sospeso dopo 6 mesi. Con uno svezzamento graduale, senza che il comportamento del cane sia peggiorato.

I problemi di fobia del cane per l'ambiente delle mostre cinofile si sono risolti ed il cane è tranquillo nel ring e durante l'esame effettuato dal giudice.

