



Treating Canine Arthritis

Your 6 Point Action Plan

From my 20 plus years of clinical practice and the management of thousands of patients, I found there were **6 key building blocks** to the successful treatment of osteoarthritis in dogs.

Don't rule out surgery

Consider using a good supplement

Sensible use of anti-inflammatories

Review activity and exercise

Control your dog's body weight

Get the right diagnosis

1. Get the Right Diagnosis

This is absolutely number one and for two reasons. Let me explain why this is so important to you and your dog.

Firstly, when your vet talks to you about 'arthritis', they will almost always be referring to osteoarthritis. Although by far and away the most common form of arthritis, osteoarthritis is only one form of arthritis that can occur in dogs. Other forms of arthritis in dogs are treated differently. You also want to make sure that you are researching and finding out about the correct problem. Otherwise you could get very confused. If you haven't done so, watch our free arthritis video at <u>www.arthritisdogs.net</u>. It will help you to understand what osteoarthritis is and how it differs from other forms of arthritis.

Secondly, osteoarthritis in the dog usually occurs as a result of another joint problem such as hip dysplasia, elbow dysplasia or a cruciate ligament rupture. We need to confirm that the osteoarthritis is not just an accompanying problem or a 'passenger'!! It may only be contributing to some of the joint discomfort. Treatment more targeted at the underlying condition may have a major impact in reducing joint discomfort and improving your dog's mobility. For example, osteoarthritis will be present in the stifle (knee) joint with a cranial cruciate ligament tear or cruciate disease. However, treatment of the underlying cruciate problem, usually with surgery to make the joint more stable, can drastically reduce joint discomfort and increase the patient's ability to exercise. It is not unusual for osteoarthritis to be present in a joint but be clinically silent. What do I mean? Well, x-rays may show features of osteoarthritis are present in a joint but that joint is not specifically the cause of your pet's current lameness. We regularly see arthritis in the hip joints on x-rays even though the main cause of lameness is a rupture of the cranial cruciate ligament in the stifle (knee).

2. Control Your Dog's Weight.

If your pet is overweight, reducing their body weight to within the expected range for their breed, size and age can have a dramatic effect on the success of treatment. The dosage of any pain killers and antiinflammatory drugs being used can usually be reduced significantly with appropriate weight loss; in some patients medication will no longer be required. In my experience, it is difficult to get your dog's weight down to the



right level on your own. Involve the veterinary practice team. They will firstly be able to give you an honest view on whether or not your pet needs to lose weight. Assessing excess body weight in dogs can be extremely difficult for the untrained eye. Dogs don't show weight in the same way we might do ... double chin, spare tyre!! So get professional input and know where you stand. Your vet will also be able to advise you on a dietary protocol that should work. It is very difficult to remove substantial amounts of body weight by exercise alone. This is because the overweight pet will be unfit and unable to do a lot of exercise and increasing their walks may increase the joint pain.

3. Review Your Dog's Activity and Exercise.

Exercise, particularly that which puts a lot of strain on an arthritic joint, can significantly exacerbate joint discomfort in arthritis. Your pet will often be very keen to go for a walk but may pay the price later in the evening or the following day when



getting up looks really painful. However, it is important to find a regular exercise regime that your dog can enjoy without suffering for later. Exercise will help to stop the arthritic joints getting too stiff and it will help keep up the strength in the supporting muscles and ligaments. Waterbased activity can be very useful. There

are many dog swimming pools or water treadmills around these days and your vet can advise on a suitable place near you. Water-based activity is usually very 'osteoarthritis–friendly' and can allow a good work out with placing too much stress on painful joints.

Keep exercise within the capability of your pet and, just as you should do yourself, build it up gradually. I would avoid hills and uneven ground and use a mix of short spells on and off the leash. If your dog hasn't been very active then start with 15-20 minutes once or twice a day to begin with.

4. Sensible use of a licensed, 'joint-friendly' NSAID.

NSAIDs are the Non-Steroidal Anti-inflammatory Drugs. These are quite controversial medicines as they can be associated with unpleasant side—effects and their misuse can be fatal. Treat them with respect and only use them under the guidance of your veterinary professional. I discuss them in greater depth in the <u>Arthritis HELP™ Video</u> <u>Series</u> and in the articles and blog posts at arthritisdogs.net.

Which one? As clinicians, we tend to have our particular favourite anti-inflammatory, one we have got on well with. That may be because we like the formulation e.g liquid versus tablet or have just seemed to get good results in our patients with few adverse responses. Take the advice of your vet. You can always change medication if one product doesn't seem to suit your pet. There are several good, licensed anti-inflammatories available for dogs. For example, meloxicam (Metacam), carprofen (Rimadyl) and firocoxib (Previcox).

Don't use human prescription drugs. **Please!** Medications that are relatively safe for people can be toxic to dogs. Some NSAIDS are licensed in both species but many are not. Even if they are, your tablets may be a different strength. One NSAID that we commonly use ourselves is Ibuprofen. Ibuprofen has a relatively narrow safety margin in dogs. So giving your own medication could have disastrous consequences such as gastrointestinal ulceration or even kidney failure.

Some NSAIDs have been shown to have 'cartilage friendly' properties and theoretically may be less likely to aggravate the cartilage damage and loss that is taking place in a joint with osteoarthritis. Aspirin has been shown to hasten cartilage degeneration and for this reason it should be avoided as an anti inflammatory in osteoarthritis.

In the early stages of osteoarthritis, and for many patients indefinitely, short courses of these drugs will settle joint pain and flare ups of joint discomfort. There is often no need to keep patients on these drugs indefinitely. In particular, it is worth seeing how your pet is off medication once signs have settled and you have made adjustments to body weight and exercise patterns. You can always start treatment again! Of course, any change sin medication regime should be discussed with your veterinary team first.

5. Consider using an oral glucosamine/chondroitin supplement

There is considerable anecdotal evidence that oral glucosamine preparations with or without chondroitin sulphate may alleviate the joint discomfort of osteoarthritis. They <u>may</u> even slow the joint degeneration supporting repair attempts and blocking the actions of some of the destructive chemical in arthritic joints. They appear to be very

safe and so 'why not try them' would be my view. However, be sensible. Use them as part of an overall treatment plan developed with your veterinary surgeon's input and guidance. Take any claims of them being a 'wonder cure' with a pinch of salt but they may help and could reduce your pet's dependence on NSAIDs.

6. Don't Rule Out Surgical Options

If signs are poorly controlled or your dog needs continuous medication is required then surgery should be considered. Surgical options to alleviate pain vary from joint to joint. In the case of hip osteoarthritis, total hip replacement would be the best option if your pet were a suitable candidate. In some joints, replacement is not a viable option but a surgical fusion of the joint, an arthrodesis, may give satisfactory, pain-free mobility. This is usually the field of an experienced specialist and I would recommend referral for a consultation to get their opinion and hear their suggestions. A good Specialist will understand your reservations and fears and should not try to force you into surgery.

I hope this short article has helped you structure your approach. I look forward to keeping in touch through blog posts, articles and videos.

Best Regards to you and your companion

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