



ABCs of Addison's Disease

My Dog has Addison's Disease. Now what do I do?

by Karen Selbert, DVM

That's the question.

After watching our dogs struggle with a debilitating illness and stumping the professionals, after checking them into the hospital and holding our breath waiting for the diagnosis, and finally, having them home after surviving a scary, stressful and expensive crisis, here we stand, alone and terrified, and wondering, now what do we do? How do we manage this disease? How do we avoid ever having to watch our dog be this sick again? How do we keep him safe? Will he

ever be the same? What do I feed him? How many pills does he take? What are the side effects? What are the "lytes" and why do they matter? Why am I doing this? Is this the right thing to do? Is it worth it??

Addison's can seem like a terrifying and overwhelming disease, but it can be managed, and our dogs can live completely normal and fulfilling lives. It does take a certain amount of savvy to figure out the important aspects, and this primer should help highlight the key points in managing a dog with Addison's.

Rules for living with an ADog:

1. Trust your gut

Always believe in yourself. No matter what the professionals say, if you think there is something amiss, then trust that feeling. YOU are your dog's best advocate, and ONLY you can be his voice.

2. Create a partnership

You and your DVM need to work together as a team to create an accurate targeted long-term treatment plan for your ADog. Finding a DVM with whom you can easily discuss the ins and outs of Addison's and one who can answer your questions is important. Work hard to find a DVM you can trust and communicate with.

3. Never withhold water

No matter what, it is never appropriate to withhold water from a dog with Addison's disease. If for any reason your ADog can't keep water down, it's time for a visit with your DVM! If there are concerns about drinking too much and peeing too much, there are other options, but NEVER withhold water.

4. How and when to give pred

Short for prednisone, this is the medication that replaces cortisol, one of the hormones missing in all Addison's patients. Pred should be given in the

morning, every day, to best mimic the body's normal physiology. Pred should also always be given with food to help absorption and decrease irritation of the lining of the stomach. The small doses of pred we use to supplement our ADogs needs to be given daily: every other day is insufficient and causes too many swings. There are other forms of steroids as well, including dexamethasone, triamcinolone, but prednisone and prednisolone are the most common.

5. Lethargy/vomiting/diarrhea

Give a boost of pred. Once a dog has started treatment for Addison's disease, there is no good way to measure cortisol levels. The only way you can tell if the cortisol is running too low, is observing your dog. Does he seem sleepy, is he laying around, did he skip a meal, did he have a bout of soft runny bowel movement? Give a tiny boost of pred as soon as possible! Once the pred is absorbed, then you can check into other potential reasons for their being ill.

- a. What dose of pred do I boost with?
It depends: often doubling the dose (measured in milligrams: mg) a single time will be enough to help, but check with your DVM to be sure.

b. What about diet?

During a crisis or low cortisol event, a bland diet would be appropriate until the appetite resumes. But after your ADog has normalized, whatever he was eating before the crisis should be fine. There are no limitations for an ADog, other than just plain common sense.

6. Other times to boost pred

Anytime we anticipate stress—remember, stress can be good or bad—and we think something extraordinary or exciting is going to happen, boost that pred. This includes things like boarding, grooming, hiking, swimming (if not a normal regular activity), having house-guests, going on vacation, going to a competitive event (agility trial, field trial, flyball). But especially and most importantly, prior to surgery or anesthesia. How much extra pred to give depends on your individual dog's needs, and experience will help you determine how much to use. Sometimes only a tiny dose will be needed to help.

7. Let the lytes guide you

ADogs are treated with either Fludrocortisone (Florinef) or Percorten-V (DOCP). These medications replace the hormone (aldosterone) that ADog's adrenal glands no longer make. If there is anything that seems "off" at any time during treatment, or after any change of dosing, it is important to check their electrolytes! Lytes are the only way to measure how well their hormone replacement is working. This is relevant only for those dogs that have typical Addison's disease. Dogs with atypical Addison's don't need to have their lytes checked all the time: they make their own aldosterone and keep their lytes balanced.

"Lytes" stand for "electrolytes" which refers to sodium (Na) and potassium (K).

Aldosterone allows the kidneys to move these lytes around and keeps them at levels that are healthy. Without Aldosterone, they lose too much sodium and the potassium gets too high.

8. The pred doesn't affect the lytes

No amount of prednisone will change the lytes. Only DOCP (Percorten-V) and Florinef will change the lytes. A pred boost can help maintain a dog in crisis and buy you some time, but only the aldosterone replacing drugs will really make any difference in the lytes.

9. Just one ACTH stim test

Once the Addison's is confirmed, and your ADog is taking daily pred, you will never need to repeat this costly test. This test is done before any steroids are given to our dogs, and is what confirms the diagnosis. Because the test is based on a biofeedback loop, once our ADogs have started prednisone, it will always test positive. Pred suppresses the ability of the body to make its own cortisol. All dogs taking any steroid will "fail" this test. This test should NEVER be performed to "check the dose" of pred in an established ADog.

10. Know your ratio

The ratio is the number that compares the sodium to the potassium. Because the ratio was too low, it triggered the doctor to screen for Addison's itself. Once diagnosed, the ratio tells you if you need more or less of the Florinef or Percorten-V. Here is a calculator to help you calculate the ratio: <http://www.addisondogs.com/addisons/helpers/small/electro.html>

11. Florinef vs. Percorten-V

If your dog has typical Addison's, it will need one of these drugs; these are the medications to control the lytes.

a. In some countries, Florinef is your only choice, although

some people do manage to get Percorten-V imported with the help of their DVM. Florinef sounds easy: they are pills that are given daily. In fact, as a bonus, the Florinef also acts as a cortisol replacement, and most dogs can be weaned off their pred when they take this drug. Sounds like a good deal, doesn't it?

b. However, it is a human drug, and not always processed effectively by dogs. In fact, the vast majority of ADogs on this medication need constant vigilance over their lytes and increases in doses based on the lytes. Only the starting dose of Florinef uses the patient's weight; all other adjustments are based on the lytes results. In fact, there is no top dose of Florinef; you just keep upping the dose to try to get the lytes under control. The sad part is that this often results in too much cortisol, and these dogs get all the side effects of cortisol overdose; increased thirst, increased urination, urinary accidents, panting, poor hair coat; the list goes on and on.

c. Percorten-V is another form of lytes control, but it is an injection. This can be scary and overwhelming for some people. Percorten-V is great at getting the lytes under control. Some have concern about the cost; it is an orphan drug, and tends to be expensive when given at the starting, recommended dose. However, most dogs do well at lower doses. In fact, most dogs do BETTER at lower doses! Owners can be taught by their vet to give Percorten-V injections at home.

12. LED (lowest effective dose)

This is far and away one of the most important points in living with an ADog and allowing them to live their life to the fullest!! Knowing what your ADog's LED of medication is takes some time, but is worth it in the long run. Stepwise reductions in prednisone eliminates all the side effects of too much pred. Finding the LED of the Percorten-V not only eliminates the side effects of too much Percorten-V (increased thirst and urination, urinary accidents, aggression, muscle weakness and tremors), it also makes it super cheap! If your DVM needs help in finding more information about the LED of Percorten-V, check this out: <http://onlinelibrary.wiley.com/doi/10.1111/avj.12019/abstract>

13. Be in the know

Getting familiar with the concepts of what is going on inside the bodies of our ADogs will help us make the right decisions for them. Knowing what drugs your dog is taking, what doses (in milligrams) of the drugs, and how often is critical information to be aware of. Keeping track of your ADog's lytes over time, is also helpful. Often we create spreadsheets or charts to keep track of this data; this allows us to see trends over time. Although this can be overwhelming at first, having the information handy will be helpful for you, your vet, and in an emergency.

14. Find a group of like-minded people to help you

Check us out on the Internet at: <https://groups.yahoo.com/neo/groups/AddisonDogs/info> and on facebook at: <https://www.facebook.com/groups/2347518387>

Karen Selbert, DVM, is a veterinarian in Wauwatosa, Wisconsin, and she is proudly owned by her own ADog Aidan.