

FEARS, PHOBIAS, AND ANXIETIES IN DOGS

BASICS

OVERVIEW

- Fear is the feeling of apprehension resulting from the nearness of some situation, person, or object presenting an external threat; the response of the autonomic nervous system prepares the body for “freeze, fight, or flight;” as such, it is a normal behavior, essential for adaptation and survival; context determines whether fear response is normal or abnormal/inappropriate; most abnormal reactions are learned and can be unlearned with gradual exposure
- A phobia is a persistent and excessive fear of a specific stimulus, such as a thunderstorm; immediate, excessive anxiety response is characteristic; it has been suggested that once a phobic event has been experienced, any event associated with it or the memory of it is sufficient to generate the response; most common phobias are associated with noises (such as thunderstorms or firecrackers)
- Anxiety is the anticipation of future dangers from unknown or imagined origins that results in normal body reactions (known as “physiologic” reactions) associated with fear; most common visible behaviors are elimination (urination and/or passage of bowel movements [defecation]), destruction, and excessive vocalization; separation anxiety is the most common specific anxiety in companion dogs—when alone, the animal exhibits anxiety or excessive distress

GENETICS

- Profound form of fear and withdrawal of unknown cause (so called “idiopathic fear and withdrawal”)—noted in Siberian huskies, German shorthaired pointers, Chesapeake Bay retrievers, Bernese mountain dogs, Great Pyrenees, border collies, and standard poodles among others; appears to be a strong familial (condition that runs in certain families or lines of dogs) component, with likely genetic influence

SIGNALMENT/DESCRIPTION of ANIMAL

Species

- Dogs

Breed Predispositions

- Profound form of fear and withdrawal of unknown cause (idiopathic fear and withdrawal)—noted in Siberian huskies, German shorthaired pointers, Chesapeake Bay retrievers, Bernese mountain dogs, Great Pyrenees, border collies, and standard poodles

Mean Age and Range

- Most fears, phobias, and anxieties develop at the onset of social maturity (12 to 36 months of age)
- Profound form of fear and withdrawal of unknown cause (idiopathic fear and withdrawal)—occurs at 8 to 10 months of age
- Old-age onset separation anxiety of unknown cause (so called “idiopathic separation anxiety”)—may be a variant of a decline in thinking, learning, and memory, frequently associated with aging (known as “cognitive dysfunction”); reported in elderly dogs

SIGNS/OBSERVED CHANGES in the ANIMAL

- Fears and anxieties—variable signs; diagnosis may be made only on the basis of nonspecific signs for which no identifiable stimulus is present
- Mild fears—signs may include trembling, tail tucked, withdrawal, and hiding; reduced activity and passive escape behaviors
- Panic—signs may include active escape behavior; increased, out-of-context, and potentially injurious motor activity
- Classic signs of sympathetic autonomic nervous system activity, including diarrhea that may be diagnosed as inflammatory bowel disease (IBD) or irritable bowel syndrome (IBS); the autonomic nervous system is involved in the control of muscles in the heart, blood vessels, gastrointestinal tract, and other organs; it is composed of two parts—the sympathetic and the parasympathetic parts; the two parts cause opposing responses; for example, the sympathetic nervous system speeds up the heart and causes the blood vessels to constrict or become small while the parasympathetic nervous system slows the heart and causes the blood vessels to expand or dilate
- Physical examination findings usually normal, except for self-induced injuries
- Anxieties—lesions secondary to anxious behavior (such as lick granuloma) may be more common than generally has been appreciated; “lick granuloma” is a thick, firm, oval lesion located on the leg, caused by the dog frequently licking at the site

CAUSES

- Any illness or painful physical condition increases anxiety and contributes to the development of fears, phobias, and anxieties
- Aging changes associated with nervous system changes; infectious disease (primarily viral infections in the central nervous system) and toxic conditions (such as lead poisoning)—may lead to behavioral problems, including fears, phobias, and anxieties
- Fear—from a horrible experience; dog may have been forced into an unfamiliar experience
- Dogs that are deprived of social and environmental exposure until 14 weeks of age may become habitually fearful

- With phobias and panic—may have history of inability to escape or get away from the stimulus causing the phobia and panic (such as being locked in crate)
- Separation anxiety—history of abandonment, multiple owners, rehoming, or prior neglect is common; dog often abandoned/rehomed because of separation anxiety

TREATMENT

HEALTH CARE

- Usually outpatient
- Inpatient—patient with extreme panic and separation anxiety that needs to be protected until anti-anxiety medications reach effective levels (may take days to weeks); patient that must be treated for or protected from physical injury (such as throwing itself from a window); constant daycare, dog-sitting, or inpatient monitoring and stimulation may be best
- Affected dogs respond to some extent to a combination of behavior modification and treatment with anti-anxiety medication
- Control any condition that causes itchiness (such as skin allergies) and/or pain, because itchiness and pain are both related to the nervous system pathways of anxiety and its perception
- Some patients with profound form of fear and withdrawal of unknown cause (idiopathic fear and withdrawal) may need to live in a protected environment with as few social stressors as possible; these animals do not do well in dog shows

Behavior Modification

- Gear toward teaching the dog to relax in a variety of environmental settings
- Avoid reassuring the dog when it is experiencing fear or panic; the dog may interpret this as a reward for its behavior
- Encourage calmness, but do not reinforce the fear reaction
- Remember that not all dogs are calmer when crated; some dogs panic when caged and will injure themselves if forced to be confined
- Absolutely avoid punishment for behavior related to fear, phobia, or anxiety
- Desensitization and counterconditioning—most effective if the fear, phobia, or anxiety is treated early; goal is to decrease the reaction to a specific stimulus (such as being left alone in the dark); “desensitization” is the repeated, controlled exposure to the stimulus that usually causes a fearful or anxious response, in such a way that the dog does not respond with the undesirable response; with repeated efforts, the goal is to decrease the dog’s undesirable response; “counterconditioning” is training the dog to perform a positive behavior in place of the negative behavior (in this case, fear or anxiety)—for example, teaching “sit/stay” and when performed, the dog is rewarded; then when the dog is placed in a situation where it might show the undesirable response, have it “sit/stay”
- Signs involved are subtle; learn to recognize physical signs associated with the fears, phobias, and anxieties

DIET

- Diet modification may be necessary to control itchiness (such as in food allergies) to decrease nervous system stimulation of pathways of itchiness and anxiety

MEDICATIONS

Medications presented in this section are intended to provide general information about possible treatment. The treatment for a particular condition may evolve as medical advances are made; therefore, the medications should not be considered as all inclusive.

Anxiety

- Anti-anxiety medications increase central nervous system levels of serotonin—tricyclic antidepressants (TCAs) and selective serotonin reuptake inhibitors (SSRIs); examples include amitriptyline, imipramine, sertraline, and fluoxetine
- Clomipramine—takes 3 to 5 weeks to begin to be effective; best drug if repetitive behavior is the hallmark sign and for separation anxiety involving repetitive barking, motor activity, or elimination
- Treat coexistent signs symptomatically (such as loperamide for diarrhea)
- Most treatment will be long-term, possibly years; treatment duration will depend on number and intensity of signs and duration of condition
- Minimum treatment should be 4 to 6 months

Phobias and True Panic Disorders

- May respond to benzodiazepines; work best if administered before any signs of anxiety, fear, or panic; must be given minimally 30 to 60 minutes before the anticipated stimulus that causes the phobia or panic reaction
- Medications include diazepam, clorazepate, and alprazolam
- Severe separation anxiety (such as dog breaks out of crate or throws itself from windows) and thunderstorm phobia that is accompanied by panic—alprazolam can be used with other medications on an “as-needed” basis

FOLLOW-UP CARE

PATIENT MONITORING

- Long-term (chronic) treatment—blood work (complete blood count [CBC] and serum biochemistry) and urinalysis: as indicated by clinical signs, annually for young patients, and semiannually for older patients; adjust medication dosages accordingly
- Observe for vomiting, gastrointestinal distress, and rapid breathing (known as “tachypnea”)

PREVENTIONS AND AVOIDANCE

- Expose dogs to a variety of social situations and environments when they are young puppies (up to the time they are 14 weeks of age) to decrease the likelihood of fearful behavior; puppies and dogs that were deprived of social and environmental exposure until 14 weeks of age may become habitually fearful, which can be avoided with only a little exposure during this formative time

POSSIBLE COMPLICATIONS

- If left untreated, these disorders are likely to progress

EXPECTED COURSE AND PROGNOSIS

Anxiety

- Most treatment will be long-term, possibly years; treatment duration will depend on number and intensity of signs and duration of condition
- Minimum treatment should be 4 to 6 months

KEY POINTS

- Early treatment with both behavioral modification and medication is key; if left untreated, these disorders are likely to progress
- Gear behavior modification toward teaching the dog to relax in a variety of environmental settings
- Avoid reassuring the dog when it is experiencing fear or panic; the dog may interpret this as a reward for its behavior
- Encourage calmness, but do not reinforce the fear reaction
- Absolutely avoid punishment for behavior related to fear, phobia, or anxiety

