

Talking about Cushing's

Dr Audrey Cook DACVIM, DECVIM, DABVP provides advice for when you should discuss Cushing's with owners



When to talk about Cushing's

- If the pet owner's concerns match the profile for a dog with Cushing's
- If you, the clinician, see signs of Cushing's when you examine the dog
- If you, the clinician, are addressing another condition and it is not responding as you expected. Could Cushing's be concurrent and affecting your success treating the first condition?

Focus on the patient first

You will hear something the client says that triggers thoughts of Cushing's:

- Increased thirst and urination
- Increased appetite (a change in appetite)
- Increased panting
- Weakness



You will see something:

- Hair changes - coat quality will not be good, changes in colour, shaved hair not returning
- Skin changes - look at the ventral abdomen for decreased skin thickness, visible blood vessels, comedones
- Abdominal distention due to enlarged liver, increased deposition of fat in the abdomen (adiposity), weakened abdominal muscles
- Poor musculature
 - Abdominal distention
 - Hind limb weakness



You might suspect something:

If the dog has a condition you've been treating and it is not responding as you expect, Cushing's may be causing the lack of response



Diagnostics and communicating the plan

- Lab changes alone, without history or clinical signs consistent with Cushing's should not prompt pursuit of a diagnosis of Cushing's
- Avoid leading questions when taking a history from the owner, ask open ended questions instead:

“Tell me about Rex's drinking habits” or “Tell me about Rex's water intake”

- Give clients a simple, defined overview of Cushing's. Too much information can be confusing and create uncertainty in their mind. This could be an appropriate introduction to HAC for owners:

“Dogs have two glands near the kidneys that make an important hormone called cortisol. The body is supposed to keep that hormone level exactly where it needs to be, but in some dogs, the adrenal glands make too much cortisol, leading to signs like increased thirst and appetite, or hair loss.”

- It is important to manage expectations when discussing diagnostic testing, for example:

“I recommend we run a blood test to see if Rex has Cushing's. It is usually all we need. However, if this first test lets us down, we can run a second test.”

- If the history and clinical signs seems subtle and are not overwhelmingly problematic for the dog or the owner yet, plant the seed that the dog may have Cushing's and postpone diagnostics for 3 months
 - If the patient is >20 kg, Dr Cook's experience is that 50% of them have Pituitary Dependent Hyperadrenocorticism (PDH) and 50% have Adrenal Dependent Hyperadrenocorticism (ADH). As the weight of a dog increases, the likelihood of ADH increases
 - DO NOT delay diagnostic testing in large breed dogs who have a history or clinical signs consistent with Cushing's because 50% of adrenal tumours are malignant. Delay could result in metastatic spread and a missed opportunity for potentially curative surgery.

You cannot make a diagnosis of Cushing's WITHOUT knowing the signalment, history and clinical signs of the patient you ran the test on.

You can ONLY interpret the results as consistent with Cushing's.

**Focus on the patient first, then the labwork.
Labwork can be interpreted. Diagnosis requires knowledge of the patient.**

Remember what you have heard, what you have seen and any difficulty observed treating the patient's first disease

Treatment



- Be realistic about the cost of treatment, but not apologetic. Be positive that you can manage the patient successfully, but let the owner know it is a lifelong treatment.



- Putting the cost into context is often helpful. For example, the cost of treating their dog for Cushing's can often equate to the cost of a daily latte. This helps the client relate the cost of a highly scientific treatment to the value of something that is quite simple



- Make the owner aware of the benefits of treatment and the implications of not treating



- Dogs living with Cushing's experience multiple symptoms that affect both their's and their owner's quality of life
- Survival times in studies of dogs treated for Cushing's vary greatly, but you can assure owners that their dog will have a better quality of life when the overproduction of cortisol is controlled

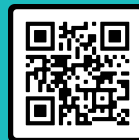


- Having a positive attitude towards treatment will create a sense of confidence for the pet owners that they are doing the right thing

Monitoring

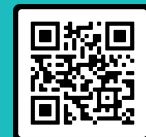
- It is essential to know how the dog is doing over time. Consult with the owner regarding the dog's clinical response at home
- Upon each recheck, focus your impression on how the dog is doing before interpreting any bloodwork

This leaflet has been produced to compliment a webinar hosted by Dr Audrey Cook.



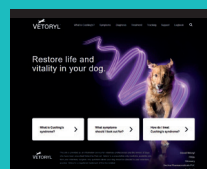
Webinar

To further your knowledge and understanding of Cushing's and for more information on discussing Cushing's with owners access the Dechra Academy module



Module

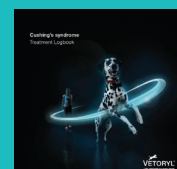
For more resources to help you support the owner following their dog's diagnosis:



Client Website
www.canine-cushings.co.uk



Owner Brochure



Owner Logbook

VETORYL: Vetoryl contains trilostane UK: **POM-V** IE: **POM**

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Dec 2023 DVP1339web

