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SERVING THE CAVALIER KING CHARLES SPANIEL

(Compiled by Karlin Lillington; with permission to link, crosspost, and reproduce)

This document is an attempt to gather together symptoms shown by syringomyeliaaffected Cavalier King Charles Spaniels. Cavaliers unfortunately are affected by SM in disproportionately larger numbers to any other breed. The primary symptoms (usually at least one of these is present) are described as:

- excessive scratching (especially while on the lead, and often 'air scratching' where the dog scratches in mid-air, which may cause the dog to hop while walking)
- ongoing tenderness around the neck, head, shoulders, or hind limbs; or weakness and/or pain in limbs
- yelping as if in pain, but for no apparent reason

Understandably, such descriptions can be confusing – how much scratching is 'excessive', for example? Some people might turn to their vet with such questions, but many have found their vets either were unfamiliar or only vaguely familiar with syringomyelia. This document, an attempt to help clarify how affected dogs may act, is a compilation of descriptions of a whole range of symptoms from owners of syringo-affected cavaliers, offered by neurologists, vets and owners of affected dogs. While it might be tempting to dismiss particular symptoms because they may originate in a normal dog behaviour, true SM symptoms are distinctive and become excessive, with most affected dogs showing odd behaviour in conjunction with any of the three points above -- *with a vet unable to find any other identifiable cause for any of the behaviours.* Some SM dogs may show NONE of the more common signs, but will display others on this list.

At this point an owner should consult with a neurologist, ideally one familiar with SM. If syringomyelia is suspected the only way to make a definite diagnosis is by an MRI of the head and neck regions. However, symptoms may be so distinct that the condition can be diagnosed from symptoms alone. At this point the dog may be treated with medication, homeopathy, or shunt or decompression (skull) surgery. Homeopathic remedies alone do not tend to help affected dogs. Decompression surgery, while the most serious and invasive alternative, usually halts the progression of the condition but does not guarantee it will not return and existing neurological damage often will be permanent. However most dogs seem to significantly improve or at the very least, stabilise after surgery. About 25% of dogs seem to develop scar tissue after surgery which can cause cerebro-spinal fluid (CSF) pressure to build again and SM to recur. Some neurosurgeons are experimenting with inserting a titanium mesh to reduce or prevent scarring, a technique used successfully in human surgeries. Information on the success rate of various treatments is at present only anecdotal.

Below, general symptoms are listed, and a range of ways in which each has been expressed in different dogs. Keep in mind that many of these symptoms are also typical dog behaviour, so owners should look out for a range of symptoms and/or a gradual worsening of a single or a handful of symptoms and/or excessive behaviour. Symptoms typically show between 6 months and three years, but may appear at any time including in puppies as young as 8 weeks old. Dogs exhibiting symptoms before age 2 tend to be more severely affected. Dogs may go through good periods when the symptoms subside and bad periods when they are severe or return. and these periods may vary day by day, week by week, or be months apart. Many of the symptoms typically occur when the dog is on the lead or excited (because pulling on the neck area while on the lead irritates the area where damage often occurs and syrinxes are located, and excitement causes the CSF to circulate faster and thus, the pressure to build in the head and spine). Note that although scratching and pain are considered key symptoms, some dogs never show one or the other, but may show other symptoms. Fewer than 50% of dogs ever scratch as a symptom so SM should not be ruled out on the basis that the dog isn't scratching. Also it is NOT true that SM dogs only air scratch, without making any contact with shoulder or head. Many affected dogs do scratch in the normal way, but repetitively and excessively.

Scratching

Dogs display frequent and in sever cases, frantic scratching at head, shoulders or ears, often on one side only. This can progress until the dog is scratching itself raw or scratching and yelping in pain, or scratching manically while lying on the floor. Scratching can happen in long 'episodes' of several minutes at a time. Sometimes scratching includes biting at areas, sometimes until those areas are raw. Sometimes touching a sensitive part of the dog's body brings on scratching.

Air scratching, a circular scratching motion with the leg, where the dog never actually scratches itself, is another common symptom - often occurring while on the lead. Often it becomes more frequent over time until walks become difficult. This can lead to a 'bunny hop' gait as the dog tries to scratch the air with one leg and walk.

If you suspect your dog may have SM, get a harness for the dog for walks as soon as possible, as this significantly relieves the pressure at the neck that makes dogs scratch in discomfort during and right after walks. The neck is often sensitive because this is where the brain protrudes into the spinal column of affected dogs and is also where syrinxes (fluid pockets) form in the spine due to CSF pressure. In rare cases, a collar actually may be more comfortable than a harness due to the location of syrinxes or neurological damage. Note that several neurologists feel all cavaliers should be walked and trained on harnesses, not collars, as pulling on a collar could possibly cause undiagnosed syrinxes to worsen.

General expression of pain

Often syringomyelia is first noticed because a dog begins yelping or whining or

whimpering, even shrieking or screaming, seemingly for no reason. Again, this often occurs while on the lead. Pain episodes can disappear then return even after a year or more. Some episodes can be severe with the dog shivering with pain and crying out for long periods.

Often the dog is so uncomfortable and tender that it cannot abide being touched in areas such as the head, neck or shoulders or even on an entire side. Sometimes the pain is so severe that the dog cannot be picked up or held. Eyes may look pained. Dogs may pant with pain.

In some dogs, weather changes such as storms or cold fronts seem to bring on pain episodes (some neurologists believe this may be due to shifts in atmospheric pressure which affect the CSF fluid pressure). When in pain, some dogs seclude themselves under tables, chairs or beds and may avoid light. Some seem to have episodes mostly at night. Pain can occasionally make the dog irritable with other dogs or with people.

Seeking cool areas or restlessness

Often an affected dog will shift constantly rather than sleep comfortably, and go in search of cold places such as tile or cement floors or even out in the rain, which seems to bring some relief.

Weakness in limbs

Some dogs acquire a "rolling gait" that can worsen. They may show a lack of coordination. They may collapse easily, even falling over while standing. Sometimes brushing, grooming or bathing bring on collapsing episodes. They may fall over, usually to one side, when playing (though investigate <u>Episodic Falling Syndrome</u> if this happens frequently).

Dogs can start to have difficulty getting up and down stairs and couches and beds. They can have leg twitching episodes. They might not be able to balance well when set down. A paw or leg might go weak.

Feet licking

Some dogs will lick at their paws or legs obsessively, often until raw.

Tiredness and lethargy

Some dogs become very sleepy and rest much of the day and night, often with their head elevated, which seems to be more comfortable for them.

Fly-catching, head shaking, lip-licking

Fly catching is a neurological condition in which the dog snaps at the air, as if snapping

at flies, and has been reported in many syringomyelia dogs though it occurs as a separate condition on its own, as well. Dogs often will shake their heads and ears, yawn excessively (probably an attempt to clear pressure they feel in their heads), or lick at their lips excessively.

Eating and drinking

Many dogs become uncomfortable eating with dishes placed at a low level and raising them seems to significantly help relieve discomfort. Some dogs start to choke on food or refuse food. Some gag or vomit regularly.

Head rubbing

Some dogs start to rub their head from side to side on the floor as if their heads hurt, doing this excessively (NB: normal dogs will do this with pleasure, often before rolling on the floor). They sometimes 'mush' their face against the floor. In severe cases dogs have rubbed their faces raw on the floor. An affected dog often follows a scratching session by rubbing its face against the floor.

Digging or pushing

Some dogs begin to dig obsessively at carpets or sofas especially after they have experienced an episode of pain. They may run along the length of a sofa pushing themselves against it. Again, this behaviour is normal in many dogs; with SM dogs, the activity is frantic and an expression of pain.

Nerve damage, stiffness, seizures

This can affect a dog in many ways, from loss of feeling, hearing, or muscular movement. Some dogs have neurological problems with their eyes. Nerve damage seems to be progressive with this condition though some dogs have little or no visible damage and others have severe damage. The surgery seems to halt the progression of such damage but will not reverse existing damage.

Some dogs develop a stiffness in the neck, back and/or limbs. In severe cases the neck may stiffen and bend permanently to the right or left ('neck scoliosis'), or the whole body may bend into a 'C' shape when the dog runs. The head may tilt permanently to one side or the other. The dog may have head tremors. Some dogs begin to have seizures, in some cases, several a day and often very severe. Some dogs start to walk in circular patterns.

Keep in mind:

Many symptoms listed have nothing to do with syringomyelia so it is important for a vet to eliminate other possibilities first, including <u>PSOM (primary secretory otitis</u> <u>media), or 'glue ear'</u>, which causes some similar symptoms and seems to be common in cavaliers. Allergies to many things, including diet, can also cause dogs to rub their

heads on the floor. Ear infections, ear mites, skin conditions or skin irritants like mites or fleas can cause a dog to scratch obsessively or scratch or shake the head and ears. Some dogs are also yelpers, especially when excited. It's a good idea to eliminate more common possibilities first before exploring whether a dog has syringomyelia.

However, many dogs are misdiagnosed with allergies for a long time and if allergy treatments seem to have no effect, consider talking to a neurologist (note that vets often dismiss concerns about SM believing the condition to be very rare and will not realise the high level of incidence in cavaliers. If a vet won't give a referral to a neurologist consider contacting one directly). Early treatment -- especially if opting for surgery -- is very important. Do not postpone taking a dog in to see a good vet -- ideally, one familiar with this condition -- if its actions seem to point towards syringomyelia. Waiting even a matter of weeks may result in permanent neurological damage as health can decline swiftly in severely affected dogs. Some neurologists believe that for dogs that are to have decompression surgery, the earlier the surgical intervention, the better chance the dog has of a good result.

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