MANAGEMENT OF COMPULSIVE TAIL CHASING AND BITING IN A DOG

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An adult German shepherd dog aged 3 years was presented to the University Veterinary Hospital, with the complaint of lesions of tail and chasing and biting of tail. On examination of the tail, lesion suggestive of folliculitis and biting were evident. Presence of fleas was ruled out by clinical examination. Examination of anal gland did not reveal any abnormalities and endoparasites were ruled out by fecal examination. Examination of deep skin scrapings from the tail revealed the presence of mite of Demodex spp. The dog was treated for demodicosis with Ivermectin @ 200microgram per kg b.wt. s/c, benzoyl peroxide shampoo wash followed by amitraz 12.5% (diluted@4ml per litre of water) wash at weekly intervals. The treatment was continued for six weeks. Clinically, there was appreciable improvement with healing of the lesion and considerable reduction in tail chasing and biting. Two skin scrapings during the last two weeks of treatment did not reveal any mites in the sample tested and the treatment for demodicosis was discontinued. After a week of discontinuing the treatment, the owner brought the animal back with the complaint that the tail chasing and biting continued and the severity was slowly increasing with development of a lesion. Skin scraping examination from the tail did not reveal any mites.

Detailed history from the owner revealed that the condition had become a compulsive disorder with the animal chasing and biting the tail as a matter of routine. History also revealed that no specific attention was given to the dog during the day time. The owner was advised on the need to start a regimen of behaviour modification and therapeutic management. A regimen of treatment was initiated with clomipramine at the rate of 1.0 mg/kg bwt. p.o. q12 h. Owner was advised to pay more attention to the dog including having long walks with the pet. The dose had to be increased to 1.5 mg/kg bwt. p.o. q12 h after 3 weeks and to 2.0 mg/kg bwt. p.o. q12 h by 6 weeks as owner did not report satisfactory improvement with treatment. Appreciable improvement in the condition was reported by 9 weeks of treatment. Withdrawal of the drug resulted in worsening of the condition and the owner was advised to continue with the treatment along with behavioural modification.

Tail chasing is a reported compulsive disorder in dogs as also recorded by Landsberg et al. (2003). Tail chasing in itself is considered as a locomotor compulsive disorder while tail chasing and biting is considered as a self injurious compulsive disorder. The etiology of repetitive behaviours in dogs is not fully understood as also mentioned by Tynes and Sin, (2014). In the present case, the inciting factor could be pruritus associated with folliculitis and resultant biting and the persistence of itch-bite cycle, which developed into a repetitive behaviour, even with healing of the tail lesion. Seksel and Lindeman (2001) reported considerable reduction in tail chasing with clomipramine. However, as in the present case, withdrawal of the drug could not be done. In some cases studies, clomipramine has been used to treat a wide range of behaviour disorders in dogs including compulsive disorders and noise fears, as also reported by Ramsey (2011). However, these cases need to be managed with behavioural modification also, as in the present case where-in-which attention paid by the owner including long walks appeared to have helped in the overall outcome.
References