



Always consult with a veterinarian that you feel comfortable with before diagnosing or treating any disease on your own. This information is for reference only.

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Epilepsy

Issue Description

It is characterized by recurrent unprovoked seizures. Canine epilepsy is often genetic. Epilepsy in cats and other pets is rarer, likely because there is no hereditary component to epilepsy in these animals.

Causes

In dogs, epilepsy is often an inherited condition. The incidence of epilepsy/seizures in the general dog population is estimated at between 0.5% and 5.7%. In certain breeds, such as the Belgian Shepherd varieties, the incidence may be much higher.

Symptoms

- The Prodrome –This stage is typically characterized by changes in the dog's mood or behavior and can last from minutes to hours or longer before the manifestation of the actual seizure activity. Many dogs become 'clingy' during this stage and try to stay close to their owners.
- The Aura – When the owner first notices the initial signs including: pacing, licking, salivating, trembling, vomiting, wandering aimlessly, hiding, whining, etc.
- The Ictus- This stage includes the actual seizure itself. It is a period of activity in which the dog may lose consciousness, gnash their teeth, thrash about with their head and legs, drool excessively, paddle their feet as if running as well as losing control of their bladders and bowels. In most dogs, a grand mal seizure should last less than two minutes. A dog who is having a series of seizures, such as 2 or 3 seizures within an hour or two, is said to be having 'cluster seizures' and should be taken immediately to a veterinary clinic, no matter what time of the day or night it is.
- The Post-Ictal Stage– This stage occurs immediately after the seizure. The dog may act drunk, doped, blind or deaf. Some will seem to pass out and just sleep. Other dogs will show signs of pacing endlessly or drinking large amounts of water. In most dogs, this stage lasts for 10-30 minutes, but may last longer in some dogs.

Diagnosis

There are three types of epilepsy in dogs: reactive, secondary, and primary. Reactive epileptic seizures are caused by metabolic issues, such as low blood sugar or kidney or liver failure. Epilepsy caused by problems such as a brain tumor, stroke, or other trauma is known as secondary, or symptomatic, epilepsy.

In primary, or idiopathic, epilepsy, there is no known cause. This type of epilepsy is diagnosed by eliminating other possible causes for the seizures. Dogs with idiopathic epilepsy experience their first seizure between the ages of one and three. However, the age of diagnosis is only one factor in diagnosing canine epilepsy. One study found a cause for the seizures in one-third of dogs between the ages of one and three, indicating secondary or reactive rather than primary epilepsy.

When an animal who has suffered a seizure is presented to a veterinarian, the veterinarian will do an initial work-up. This work-up may include a physical and neurological exam, a complete blood count, serum chemistry profile, urinalysis, bile tests, and thyroid function tests. These tests will help the veterinarian determine whether the animal is in fact experiencing seizures, and may help determine a cause for the seizures if there is one. Veterinarians may also request that dog owners keep a "seizure log" documenting the timing, length, severity, and recovery of each seizure, as well as any other factors that might be helpful, such as dietary or environmental changes.

Treatment

Treatments can include the drugs phenobarbital, phenytoin, potassium bromide, levetiracetam, zonisamide, and diazepam. Potassium bromide and phenobarbital are often paired for the treatment of animals with epilepsy (other drugs such as gabapentin are only recently being introduced into the treatment of animals). A veterinarian will often prescribe Zentinel in an effort to minimize the damaging effects of bromides on the liver enzymes.

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