

Managing the Arthritic Pet

Osteoarthritis (often referred to as 'OA') is often referred to as 'wear-and-tear' arthritis in people, to distinguish it from other forms of arthritis such as rheumatoid arthritis. In dogs OA is usually secondary to developmental joint disorders such as hip dysplasia and elbow dysplasia. OA of any joint can also develop secondary to injuries such as fractures and ligament problems. OA is a progressive condition which cannot be cured, but it can often be managed successfully without surgery.

OA does not always cause symptoms. It is not unusual for dogs which were otherwise believed to be entirely normal to be diagnosed with OA when x-rays are taken of their joints for some other purpose. The diagnosis of 'arthritis' can be alarming for many owners, but if your dog had led a full and active life with no evidence of stiffness or lameness (limping) prior to the diagnosis being made, then your dog is unlikely to need any specific treatment.

In some dogs however, OA will cause problems. The symptoms may be very minor, such as mild stiffness when your pet first gets up after resting, or they may be more significant, for example causing persistent lameness and joint pain. Some dogs and cats with joint pain will be withdrawn, less active and may be more 'grumpy'. The signs associated with OA can be intermittent and short-lived. We call a period when symptoms are present a 'flare-up' of the OA. These flare-ups will often respond to a period of rest and medication, and the patient will return to 'normal'.

The primary goal of OA therapy is the alleviation of pain. Unfortunately there is no one product or therapy that can successfully manage osteoarthritis in all animals; therefore we combine multiple treatment methods in an attempt to give our pets the best outcome possible.

There are FIVE key elements involved in the non-surgical management of osteoarthritis:

1. Weight Control

This is probably the single most effective (and the cheapest!) non-surgical means of managing osteoarthritis we have at our disposal. It is clear that the joints of overweight dogs carry much more load, and are under more 'stress' than those of slim dogs. For dogs with OA, being overweight will make their joint pain and lameness worse. There are studies which clearly show that weight-loss in these patients is associated with reduced lameness/discomfort. In addition recent studies have shown that dogs that are overweight from an early age, will develop OA before their non-overweight companions, and that the slim dogs will live longer, healthier lives. Thus all overweight dogs should start a weight-loss diet. This is something which is best done in conjunction with your veterinary surgeon so that your pet's weight can be monitored on a regular basis and the diet adjusted as necessary.



There are many specially formulated 'diet' foods for dogs, which are low in calories, but high in fibre so that dogs still feel full after eating. Some foods also have added supplements which are thought to improve joint health. Beware of 'light' foods – these are best for keeping weight off your pet rather than achieving real weight loss. Ideally you should discuss using a prescription weight-loss diet with your local veterinary surgeon.

2. Exercise

It is vital to keep your arthritic pet moving! However, the key is to provide a regular amount of moderate exercise to maintain muscle mass and tone and joint mobility, avoiding unusually long or strenuous walks. Try to also keep the amount of exercise similar from day-to-day. The amount of exercise that an individual can tolerate will vary from dog to dog. Your pet's limits must be determined by trial and error. As a guide, it is reasonable to aim for around 30 minutes of exercise twice daily, but some dogs will happily manage more than this and others may struggle with this level of activity.

If there is a sudden 'flare up' of lameness/discomfort, exercise will need to be reduced to not more than 5-10 minute walks, on a lead, two or three times daily. As the pain and inflammation resolve, exercise can be gradually increased again to the 'normal' level.

You should also think about how you can moderate your dog's activity around the home to avoid undue stress on the joints. Avoiding stairs, avoiding slippery flooring (such as tiles/laminate) and using a ramp to get in/out of the car (rather than jumping) can all be helpful.

3. Medication

Dogs experiencing a 'flare-up' will benefit from a short course of a non-steroidal anti-inflammatory drug. These are known as NSAIDs (pronounced N-Sades) and include drugs such as Metacam (meloxicam), Rimadyl (carprofen) and Previcox (firocoxib). These provide pain-relief and are also anti-inflammatory. A week or two of an NSAID may be sufficient to control a flare-up. Some dogs will need longer term medication or may benefit from sporadic use on 'bad days'. These drugs belong to the same group of drugs as ibuprofen and aspirin, but you should never be tempted to give your dog any of the NSAIDs used by humans - some of these NSAIDs can be very dangerous to dogs and cats. All NSAIDs can potentially upset the stomach. Side effects to the NSAIDs we use in dogs are uncommon but if your dog develops diarrhoea or vomits whilst on one of these drugs, particularly if you notice blood, you should stop the medication and consult your veterinary surgeon.

Steroids are profound anti-inflammatory drugs but they can have serious side-effects. They are rarely used in the long-term management of OA. We will sometimes inject steroids into a particularly painful joint to alleviate the pain in that joint, with less risk of side effects than a course of tablets. Joint injections are only given when we are sure there is no infection within the joint.

Pentosan polysulphate (Cartrophen Vet) can reduce the pain and inflammation associated with osteoarthritis. It is generally administered as a course of four injections, given one week apart. Some dogs show marked improvement following treatment, however not all



dogs respond, and the duration of improvement can be very variable. It should not be used in dogs with known bleeding problems or who are also receiving NSAIDs.

There are also 'biological' options for treating OA. Platelet-rich plasma (PRP) and stem cells can both have a palliative anti-inflammatory effect when injected into arthritic joints, although they do not work for every patient.

4. Nutraceuticals

These are dietary supplements to promote 'joint health' and are popular for both humans and animals. A glucosamine and chondroitin sulphate combination is most commonly used. There is some evidence in human studies to show that given over a long period (years) this combination can slow down the progression of OA, although this is very controversial. No such benefit has been demonstrated in dogs. However glucosamine/chondroitin supplements do act as weak pain-killers. This may allow a reduced dose of NSAIDs, or no NSAIDs, to be necessary. These supplements are generally safe with minimal side effects and they can be combined with NSAIDs.

Nutraceuticals are not considered drugs, and therefore do not have to go through any licensing or regulation prior to sale. It has been shown that some of the products on sale do not contain what their labels say they contain. Your veterinary surgeon will be able to advise you of reputable brands for your pet.

5. Hydrotherapy/Physiotherapy

Some arthritic dogs can benefit from regular hydrotherapy sessions, which can help improve joint range of movement and maintain muscle mass. Swimming, as a non-weight bearing exercise, can also be a useful activity to assist with weight loss, when normal exercise may not be well tolerated. Physiotherapy can also be helpful.

When all else fails...

The majority of pets with OA can be managed successfully via the measures discussed above. Sometimes however a pet will continue to have joint pain/lameness despite these measures. In these situations there may be surgical options for relieving your pet's pain. Joint replacements are possible in many patients, [total hip replacement \(THR\)](#) being the most commonly performed joint replacement in dogs (and also cats). THR can be very successful in eliminating joint pain, potentially providing a new lease of life for your pet. Elbow replacements are also available for dogs. For some joints, fusing the joint (known as arthrodesis) can be a very successful procedure and will reliably eliminate joint pain. OA of the knee (in the hindlimb) is usually associated with [cruciate disease](#) for which early surgical treatment is advised but for end-stage cases knee replacement can be performed. These are all complex surgeries which should only be undertaken by vets with considerable orthopaedic experience, such as the specialist team at [Anderson Moores](#).

