

# Dachshund Back Pain

## How to Handle it in a Proactive Manner

By Dawn-Renée Mack  
Ruger Dachshunds

As you go through this document, please don't be intimidated. This is a lot of information, simply because I want folks to both be able to easily benefit from my experience and to have an informed conversation with their vet, or, better yet, use this as a jumping off point to their *own* research. HOWEVER, please understand that conservative treatment of IVDD is actually pretty simple and is not complicated at all; the most difficult aspect for the human owners is finding patience.

Dachshunds, as you hopefully know if you are reading this, are one of the breeds of dogs predisposed to a condition called IVDD, which stands for Intervertebral Disk Disease. It's a variable condition where disk material between the vertebrae infringes on the spinal cord in one of the two following ways—keep in mind within both of these definitions, there are mild to severe cases:

- **Disk Protrusion:** Commonly called a disk bulge, a disk protrusion occurs when the spinal disk and the associated ligaments remain intact, but form an out-pouching that can press against the nerves of the spinal cord.
- **Disk Extrusion:** A disk extrusion occurs when the outer part of the spinal disk ruptures, allowing the inner, gelatinous part of the disk to squeeze out. Disk extrusions can occur with the ligaments intact or damaged.

Generally, there is a protrusion before an extrusion. Some of the signs and symptoms of protrusions AND extrusions can be **pain (trembling, yelping, especially when the dog is picked up), skin that “jumps” when you touch it (especially over or behind the ribs) reluctance to move, arched back, a head held very low (or occasionally held high), a wobbly walk – think “drunken sailor” – or partial/total dragging of the hind end.** If you see ANY of these signs, immediately crate your dog and get to a vet (with a copy of this document) ASAP. *If you are part of the Ruger Dachshund family, call me anytime, day or night, and I will help you assess the situation. It's especially important if your only choice is the emergency vet. Not only are e-vets prohibitively expensive, they generally are hit-and-miss in terms of IVDD experience. There are great e-vets out there, but there are inexperienced ones, too. Wherever you end up with your dog, ask lots of questions, and don't be afraid to disagree with the vet. No one knows your dogs better than you do, and you are your dogs' best advocate. Listen to that little voice in the back of your head.*

The difficult part of assessing how to treat a dog prone to IVDD is when it comes to pain with the absence of neurological signs and symptoms. Is it just muscle pain? Or is it pain caused by a disk protrusion? My answer is to get a basic examination and blood work. A good veterinarian can rule out other issues, such as digestive/kidney/liver problems mimicking back pain, with an exam and basic blood work. **If those issues are ruled out, then you generally treat it as the worst-case scenario: IVDD.** Why, you ask? Well, if it's truly just a muscle issue, the best medications for IVDD (detailed below) also work well for simple muscle pain. This protocol might be a little overkill, but it is wise in a breed predisposed to IVDD. Because, if it turns out your dog does have IVDD, you are already giving the right medications. If you accept a different class of drug, it may end up decidedly not in the dog's favor. I have seen far too many cases of "simple muscle pain" morph into a dog with full-blown neurological symptoms in 48 hours of being on the wrong drugs, specifically NSAIDs (non-steroidal anti-inflammatories). Switching from a NSAID to prednisone (the anti-inflammatory of choice for IVDD) can be very dangerous without a seven-day washout period. And truly, for a dog losing his rear, you don't have the luxury of a week with no anti-inflammatory medication. **My attitude, and that of my veterinarian, who has treated hundreds of Dachshund back issues, is we treat for the worst and hope for the best. That means prednisone, not a NSAID.**

Why do we "treat for the worst and hope for the best?" Because currently the only way to *definitively* diagnose IVDD is with a pretty expensive and invasive myelogram (around \$800) or with a VERY expensive MRI (\$1500-\$2500). Generally, you aren't doing either of those unless your dog is on his way into surgery. Contrary to popular opinion, a back x-ray rarely shows a thing that is conclusively indicative of IVDD. Occasionally, the disk space will be much wider at the top of the vertebrae it's between (or vice versa) and that is usually indicative of a protrusion or an extrusion, but you still cannot make a definitive diagnosis with this information. I endlessly hear of inexperienced (with IVDD) veterinarians pointing to disk calcifications on an x-ray as evidence of IVDD. This is, in my experience, not accurate. Disk calcifications are common in chondrodysplastic (dwarf) breeds like Dachshunds. If you talk to neurosurgeons, they will tell you they rarely have a dog rupture a *calcified* disk. This is a more complicated topic than I can explore here, but suffice it to say that I can show you dogs with many calcifications who have never had a back problem, even at advanced ages, and I can show you dogs with few (3 or less) to no calcifications who go down in the back. If you are treating a dog with IVDD or possible IVDD conservatively, chances are you are going to treat him in the exact same way, with or without an x-ray, myelogram or MRI. So, why spend the money? You are better off saving that money for acupuncture treatments or steroid blasting.

## The “Holy Trinity” of Treatment for IVDD: Crate Rest, Proper Medication and Acupuncture

- **Crate Rest**—Dogs who have significant pain that doesn’t resolve with a few days of meds and crate rest likely have IVDD. **My rule of thumb is that dogs who have a suspected IVDD episode and have no neurological involvement should be crate-rested 5 to 6 weeks. Dogs who have any level of neurological involvement should be crate rested AT LEAST 8 WEEKS.** Not 10 days, not 2 to 3 weeks. A crate rest period that short is a recipe for another, worse episode. It’s my experience that being strict with the crate rest with the first episode generally means no further occurrences. Of course, this is just my experience, but longer crate rest certainly won’t hurt. **Most dogs who have been previously crate-trained seem to have no major problem with being in their crates for two months. Dogs, as with most things, handle adversity much better than humans.** It’s important not to over-feed your dogs while they are crate-resting, but extra treats in the form of safe chews help to alleviate boredom. **Crate train your puppies. It’s so important!**

**Dogs should be crate rested in a crate that is big enough for them to lay down in “E” position; stretched out lengthwise with legs fully extended – no larger.** If your crate is wider than your dog, a rolled up towel on one side of the crate helps to ensure your dog chooses to lay out straight, rather than curling into a “dog ball.” Keeping as much stress as possible off the spine by lying in a neutral position is a really good idea.

**Crate rest means your dog is in his crate unless he’s on a six-foot leash (you stand in one spot; don’t wander around the yard) going potty.** Some dogs who don’t try to jump up can be pottied in a small exercise pen. Support Dachshunds who are weak or worse in the rear with a rolled up towel (lengthwise) as a sling under a bitch or something narrower (perhaps a leash) for a male so he doesn’t urinate on it. Dogs are carried in and out of the house to potty. Support their rear ends; don’t let them hang down when picking them up or putting them down. Have the crate in the main part of the house where your family spends most of their time. Putting the crate on top of an end table or a portable grooming table gives your dog a good view of what’s going on and is much easier on *your* back.

A good idea for crate bedding is some kind of absorbent material in the bottom of the crate (a pee pad or better yet, a washable underpad), then a crate pad that is easily washable and of a material that will wick any urine away from your dog’s skin should he have an accident or be unable to hold his urine. Pupps Pro Fleece is perfect if you can find it. Other really good alternatives are Masterpiece Pet Product’s Double-Sided Fleece Blanket or Ultimate Vet Fleece from Jonart. A small water bowl attached to the crate is another good idea. I use 10-ounce metal coop cups, bolted to the crate.

- **Proper Medication**—As I said above, the non-steroidal anti-inflammatory class of drugs (NSAIDs like Rimadyl [generic is carprofen], Deramaxx, Metacam, Zubrin and plain aspirin) are NOT the drugs of choice for IVDD. Not only do these drugs not pack enough anti-inflammatory power for an IVDD problem, sometimes they can cause more issues (such as blood thinning with aspirin). **Prednisone and similar derivatives are the best choice for suspected and known IVDD cases. Period.** Additionally, you need to use the maximum dose of prednisone. If you are trying to get that swelling down, you need to hit it HARD. The maximum recommended dose of prednisone for a dog is 1 mg per kg of body weight every 12 hours. *Note: I have, under veterinary supervision, administered twice that dose for a few doses with no ill effects.* **The average miniature Dachshund (11 pounds) is going to need to start at 5 mg of prednisone every 12 hours.** I cannot emphasize the importance of hitting this with the max dose. Again, too many times I've seen dogs given smaller doses to start, and these dogs don't generally get worse, but they don't get better, either. Don't mess around. An experienced vet will likely keep your dog on this dose until you see improvement, then the dose will be reduced for a few days. If the dog reverts in terms of progress, then you go back to the previous dose. If he gets better, you decrease the dose again after a few days. Your vet will give you specifics to get your dog weaned off the prednisone totally.

Additional drugs to use with the IVDD dog:

- ✓ **Famotidine (Pepcid)** – This OTC drug helps protect your dog's stomach from prednisone. If you see your dog vomit blood or if he has blood in his stool, get him to your veterinarian immediately. An 11 pound dog gets 2.5 mg of this drug every 12 hours.
- ✓ **Methocarbamol (Robaxin)** – This drug is a muscle relaxer. It helps with pain, and helps the dog keep a neutral spine. An 11 pound dog gets between 62.5 and 125 mg of this drug every 12 hours.
- ✓ **Tramadol (Ultram)** – This drug is a non-habit forming synthetic opiate that pairs very well with prednisone. It provides fabulous pain relief. Tramadol has a very short half-life, so it can be given as often as every 4-6 hours. The dose for an 11 pound dog is between 12.5 and 25 mg every 4 to 12 hours.
- ✓ **Gabapentin (Neurontin)** – This drug is a fairly new one to my veterinarian's protocol. It's a drug traditionally used for neuropathy in human chemotherapy patients. We use this for dogs with neurological symptoms only. The dose for an 11 pound dog is 25 mg every 12 hours.

Homeopaths and supplements I use and recommend for IVDD dogs:

- ✓ **Discus compositum** – This homeopath, manufactured by Heel (BHI), is for the treatment of discogenic disease including root impingement, intervertebral neuralgia, impairment of connective tissue and rheumatic disorders. I crush a tablet into about an ounce of filtered or distilled water, and give a dropper full as needed, usually twice a day, but more often is totally acceptable.

- ✓ **Vitamin C** – I give Vitamin C to bowel tolerance, usually no more than 500 mg per day for an 11 pound dog. I use a powdered, buffered tasteless version called sodium ascorbate.
  - ✓ **Salmon Oil** – Salmon oil is a natural anti-inflammatory that I give daily to my healthy dogs. IVDD dogs get their dose doubled from 1000 IU per day to 2000 IU per day.
  - ✓ **Acti-Flex K9** – I give this supplement to all of my dogs from 8 weeks on. In the two who have developed back issues, I doubled the dose. I give 1.5 mL per day to healthy dogs, 3 mL to dogs who have had issues. Key substances in *Acti-Flex K9* work together to improve performance and flexibility by increasing the dog's supply of joint-lubricating synovial fluid, which repairs and strengthens the joints and connective tissues.
  - ✓ **Adequan® Canine** – This supplement, which is injected into the leg muscles, is a prescription, water-based, intramuscular, polysulfated glycosaminoglycan (PSGAG) that helps prevent the cartilage in your dog's joint from wearing away. It helps keep the cartilage healthy and intact, so that the bone in the joint cannot touch other bones. It seems to help with cases of IVDD, though it technically shouldn't be able to based on the label. However, the dogs don't lie.
- **Acupuncture**—One of my favorite modalities of all time, acupuncture in the hands of a veterinarian who specializes in it and believes in it is simply amazing. Dogs can't have psychosomatic reactions to treatment as humans can. Acupuncture is a method of encouraging the body to promote natural healing and to improve functioning. This is done by inserting needles and applying heat or electrical stimulation at very precise acupuncture points. It is very non-invasive and can be used on even the most painful dog, unlike chiropractic, which should NEVER be used on an acute IVDD dog.

Please, if you can, choose a veterinary acupuncturist who either exclusively practices acupuncture or practices on a regular basis.

## **Additional Resources**

In addition to my “Holy Trinity” above, there are other helpful treatments, including cold laser and steroid blasting. **Cold laser, or Low-level laser therapy (LLLT), is similar to acupuncture in that it is non-invasive.** It is a medical and veterinary treatment that uses low-level lasers or light-emitting diodes to alter cellular function. LLLT is controversial in mainstream medicine with ongoing research to determine whether there is a demonstrable effect. However, I have seen dogs react to it positively, and really, that's all the proof I need with a treatment that is non-invasive.

**Steroid blasting is a treatment developed by a veterinary neurologist, Dr. Cheryl Chrisman DVM, M.S., Ed.S, ACVIM-Neurology (retired), at the University of Florida.** (Incidentally, my main veterinarian studied under Dr. Chrisman.) It involves the administering of large doses of intravenous steroids hourly for 48 hours. Personally, I would not use this treatment except on dogs who have partial paralysis or worse, who are not responding positively to oral drugs, and who, for whatever reason, are not surgical candidates. Sandy Russell, from Duchwood Dachshunds, has written a large article on this topic, including the protocol. You can find it at <http://bit.ly/UIHSJt>.

**Also, something to keep in mind for the well-being of healthy *and* recovered dogs is therapeutic massage.** Smooth, supple muscles are less apt to torque a dog's back. Most dogs, even those who just play in the backyard, are very athletic. If we humans were half as physical as many dogs, we would be world-class athletes with massage therapists at our beck and call. Keep this in mind. There is rarely a dog who doesn't have painful muscles.

### **NEVER, EVER...**

- Allow a practitioner to perform chiropractic maneuvers on a dog suspected to have IVDD. The risk is not worth it. Better to start with acupuncture, crate rest and medication.
- Give a dog with suspected IVDD a NSAID.

Lastly, for most dogs, even if his owner cannot afford surgery, **IVDD IS NOT A DEATH SENTENCE.** One of the really cool things about dogs is that even though they are so synergistic with people, they don't come with all the hangups that we humans do. A dog who is not in chronic pain really doesn't give a fig if his back end doesn't work quite correctly. Additionally, remember that if you had some really bad back pain, you probably would want someone to at least *try* treating you before they euthanized you—right? I run into people all the time who think that a dog in pain from or a dog who is crated due to IVDD has an owner who is not being “fair” to the dog. I think it stems from that helpless feeling we all have when a creature who is dear to us and is hurting is unable to communicate with us in that verbal way in which we function best. Just remember, most of the time, this is simply temporary. Wouldn't the “fairest” course be to give your dog a chance? Patience is an underrated virtue. I've never once in my life regretted being patient, but I cannot tell you how many times I've regretted being impatient.

**The single, best resource for support if you find yourself faced with a dog with IVDD is the Dodgerslist.com website.** They have an active email list, moderated by folks who have much more experience with what works than most veterinarians. They are a supportive community, and I highly recommend them to everyone. You can also find them on Facebook. They have tons of educational literature on their website, but they have to be a bit more conservative in their recommendations. Keep that in mind.

Speaking of which, I have to tell you that I am not a veterinarian. This IVDD protocol is what I have decided to use after much research and discussion with both my personal veterinarian, several other veterinarians and veterinary neurologists and my own experience and that of the owners I have assisted through IVDD episodes. No IVDD protocol is without risk. I have made every effort to insure the accuracy of this information, provided "as is" with all faults and without warranty of any kind, expressed or implied. In no event shall I be liable for any incidental or consequential damages, lost profits, or any indirect damages even if informed of the possibility thereof. In addition, this advice should not be construed as veterinary advice, and any treatment of your own animals should be under the treatment of and after consultation with your regular veterinarian.

*-Dawn-Renée has been "in dogs" her entire adult life, completely dog-crazy from the time she was a toddler. She had her start in all-breed and mixed-breed rescue in 1989 at eighteen years of age. She found Dachshunds a few years later, completely by accident. She started showing her rescue Dachshunds in companion and performance events, then expanded into conformation after watching Dachshunds at breed shows for almost 4 years. She purchased her first show-quality miniature wire Dachshund in 2001. She has been breeding miniature wire and smooth Dachshunds since 2002 under the Ruger name. She is open about both the problems and the successes she's had, and loves nothing more than to "talk Dachshunds." She has successfully used conservative methods to rehabilitate two IVDD Dachshunds of her own, eleven for other people, several rescues, and she's been involved in assisting countless other owners deal with IVDD with both conservative and post- surgical methods.*