SUCCESSFUL MANAGEMENT OF IDIOPATHIC VESTIBULAR SYNDROME IN A GERMAN SHEPHERD DOG

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ABSTRACT
A six-year-old male German Shepherd dog was presented to Small Animal Medicine Unit, TVCC, RIVER with reduced feed intake, left sided head tilt, frequent vomiting and abnormal eye movement and gait for the past 2 days. Upon clinical examination, the dog had asymmetric ataxia with left sided circling. Nystagmus was also noticed. No abnormal changes were noticed on haemogram except for reduction in thrombocytic count. The condition was diagnosed as Idiopathic Vestibular Disease and was treated symptomatically. The animal recovered within 3 days' post treatment and regained appetite, balance and activity completely. Vestibular system in the inner ear is responsible for maintaining orientation and balance of the animal with response to external stimuli (Parnes et al, 2003). Any cause of dysfunction in the vestibular system is responsible for the symptoms like incoordination, loss of equilibrium, circling or falling, nystagmus, nausea and vomiting (Kraeling, 2014). A clinical case of such Idiopathic or Geriatric Vestibular Disease observed in a German Shepherd dog is placed on record.

KEYWORDS: Nystagmus, haemogram, thrombocytic.

MATERIALS AND METHODS
A six-year-old German Shepherd (Reg. no: 3805) was presented to the Small Animal Medicine Unit of Teaching Veterinary Clinical Campus, Rajiv Gandhi Institute of Veterinary Education and Research, Puducherry with history of reduced appetite, incoordination, circling, nystagmus and frequent vomiting for the last 2 days. Upon distant examination, the dog was unable to stand on its own and severe incoordination in gait was noticed. Left sided circling along with head tilt was noticed. Close examination revealed aural hematoma on the left, nystagmus and poor vision. On clinical examination, rectal temperature was 37.7 °C with pale conjunctival mucous membranes and slightly swollen popliteal lymph nodes. Haemogram revealed Hb – 8.1 g%, PCV – 22%, RBC – 3.85 m/mm³, WBC – 12,300 / mm³, DLC – N: 34%, L: 56%, E: 8%, M: 2% and platelet count was 6,000 / mm³. Serum biochemistry revealed normal Creatinine (1.0 mg/dl) and BUN (28.0 mg/dl) values. Peripheral blood smear examination revealed absence of any blood parasites. Ultrasonographical examination of the abdomen showed no abnormality in any organ. The condition was tentatively diagnosed as Idiopathic or Geriatric Vestibular Disease based on the clinical symptoms and normal blood picture.

Fig. 1: Showing left sided head tilt in German Shepherd dog.
The dog was treated symptomatically with Inj. Cefotaxim @40 mg/kg b. wt. I.V, Inj. Ondansetron @0.2 mg/kg b. wt. I.V, Inj. Ranitidine @2.0 mg/kg b. wt. I.M for 5 days and Inj. Prednisolone @1 mg/kg b. wt. I.M for 3 days. Fluid therapy was given to correct the electrolyte imbalance with both Dextrose Normal Saline and Ringers’ Lactate @10ml / kg bd. wt. The owner was advised to give Tab. Revital, one daily, Syrup. Thrombofit and Syr. Immunol one tea spoon each P.O.

Nystagmus was reduced by the 2nd day, head tilt and incoordination was reduced by the 3rd day. Complete clinical recovery of the animal with normal physical activity and good appetite was noticed by 5th day of presentation.

**DISCUSSION**

Clinical findings present in this case are typically attributed to left side (unilateral) and can be described as unilateral vestibular disease. Older dogs are said to be mostly effected with this disease and typical signs like ataxia, head tilt, nystagamus and vomiting are noticed (Thomas, 2000). Otitis interna and otitis externa are known to be the cause most of the times (Kim, 2017) but the present case had no abnormalities detected in otoscopy. Aminoglycosides, anti-cancer agents like Cisplatin, loop diuretics like Furosemide and Polymyxin B can cause ototoxicity (Oishi et al., 2013 and Pickrell et al., 1993) but, there was no such history. So, it was presumed that the condition was due to improper ear cleaning and maintenance. Usually the treatment is symptomatic and supportive. Improvement can be noticed in the animal within 3 to 5 days (Kent et al., 2010). In this present case, the dog was treated with antibiotics, steroidal anti-inflammatory drugs, vitamin supplements and immuno stimulants along with fluid therapy. The dog regained the gait, activity and appetite completely and was performing normal activities by the end of 5th day post treatment.

**CONCLUSION**

Idiopathic vestibular disease is caused by the dysfunction of the vestibular system, which results in symptoms like incoordination, loss of equilibrium, circling or falling, nystagmus, nausea and vomiting as observed in the present case. Older dogs are said to be mostly affected and hence the name geriatric vestibular disease. Treatment for this condition is usually symptomatic. Early diagnosis and treatment results in auspicious prognosis. The present case of six-year-old male German Shepherd dog with vestibular disease has recovered by the end of 5th day post treatment.

**REFERENCES**


