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MEGAESOPHAGUS IN DOGS DUE TO SEPARATION ANXIETY: TWO CLINICAL CASES

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Megaoesophagus in adult dogs usually has an idiopathic aetiopathology. However, recent studies indicate that the abnormality appears to be neurogenic rather than myogenic. The two cases presented here provide positive evidence on the development of megaoesophagus due to separation anxiety. In both cases, antidepressants fluoxetine and citalopram were used with a satisfactory response.

“Billy”, an eight-year-old male Labrador was presented to the Veterinary Teaching Hospital (VTH) with complaints of lethargy and severe regurgitation. Billy was brought up for seven years with his littermate who died one year previously. Thereafter, Billy received less care and was kept in an outdoor-cage. Megaoesophagus was confirmed by contrast radiography. Billy was given more attention, and metoclopramide was administered orally (1mg/kg) 45 minutes before meals. He was fed with small quantities of solid food four times daily using an elevated feeding position and was kept in this position for 20 minutes afterwards. He showed an impressive recovery. Four months later, Billy returned with the same complaint, was hospitalised and managed similarly. In addition, citalopram was given twice daily (1mg/kg). Six months later, Billy is doing well.

“Jake”, a nine-year-old male Labrador, was presented to the VTH with respiratory distress and severe regurgitation. One month before presentation, the owner with all the family members returned after a three-month absence during which time Jake was managed by a helper who had known him for several years. When Jake was brought to the clinic, he could not walk, was agitated and his heart rate rapidly increased by almost any movement of an object or person. Megaoesophagus was confirmed by contrast radiography. Jake was managed in the manner described above, after discharge. The owners made alterations in their daily routine, and Jake was on antidepressant medication (fluoxetine 20mg/kg). Four months later, Jake is doing well, has less regurgitation, is less excitable and joins the client in their daily evening walks as usual.

The two cases described above indicate that separation from loved ones could influence the development of megaoesophagus. The use of antidepressants in these two cases were helpful in management of clinical signs.