Inflammatory Bowel Disease (IBD)
By: Dr. Kay McGuire DVM

**Inflammatory Bowel Disease (IBD)** is a condition of digestive system of the dog involving the stomach, small intestine and/or large intestine. Most often the condition is due to unknown causes or unknown etiology (Idiopathic). The syndrome involves a hypersensitivity reaction to antigens in the bowel lumen or mucosa. Implicated antigens have included parasites, bacteria, dietary constituents, and drugs.

The most common symptoms are characterized by chronic small bowel diarrhea, weight loss, and flatulence and odor of stool. Vomiting may also be the only sign seen in IBD. With chronicity of symptoms, large bowel diarrhea, halitosis and anorexia may develop.

The most common tests done initially on a vomiting, diarrhea dog are fecal flotations and stained fecal smears. Parasitic evaluation is necessary and many times the veterinarian may broad-base deworm the dog on initial presentation whether or not evidence of parasites are found. Whipworms and **Giardia** are sometimes very difficult to detect and prophylactic treatment is frequently initiated.

Food antigens frequently play a major role in this disease, especially in the Westie. The veterinarian may suggest a food of a novel protein and carbohydrate source that the dog has never been exposed to. A food trial of approximately 4-8 weeks may be appropriate before further diagnostic tests are done, depending on the condition of the animal. The definitive diagnosis rests on identifying the inflammatory infiltrates in the intestinal mucosa with biopsy. This is accomplished by endoscopic exam and endoscopic biopsies or exploratory/laparoscopic surgery and full thickness intestinal and stomach biopsies. The disease is characterized by the type of cells found in the intestinal mucosa (Lymphocytic-plasmacytic, eosinophilic, or granulomatous infiltrates).

**Lymphocytic-Plasmacytic Inflammatory Bowel Disease** is the most common IBD and thought to be due to allergic reactions within the bowel and throughout the digestive tract. The wall of the large intestine is invaded by the individual’s own inflammatory cells in response to some triggering antigen. The antigen may be initiated by food hypersensitivity, insect stings, and even vaccines.

Depending on the severity and the waxing and waning of the symptoms, many dogs do well on just an alteration of the diet. Others may require short-term or long-term treatment with immunosuppressive drugs and antibiotics. Prednisone is used most commonly to suppress the allergic response in long-term decreasing doses. Stronger immunosuppressive drugs like Azathioprine may have to be initiated if the Prednisone or Methylprednisolone has no effect. Antibiotics like Metronidazole or Tylan may be initiated to suppress bacterial overgrowth of the intestine. Motility modifiers like Sulfasalazine and other anti-inflammatory like glucosamine have also been shown to have some effect on the intestine.

There are many variations of the severity and symptoms of the disease noted as IBD. Please consult your veterinarian with as complete of history as possible if your Westie should present with either persistent vomiting and/or diarrhea or recurring vomiting and/or diarrhea. Diagnostics may absolutely be required for correct treatment.

***Disclaimer***

Any information contained on this site relating to various medical, health, and fitness conditions of Westies and their treatment is for informational purposes only and is not meant to be a substitute for the advice provided by your own veterinarian. You should not use the information contained herein for diagnosing a Westie’s health - you should always consult your own veterinarian.

For additional information and articles, please visit www.westieclubamerica.com.

Copyright © 2010 The West Highland White Terrier Club of America, Inc. All rights reserved.