



### Canine Pruritus Case Scenario

#### CASE SCENARIO

##### Presenting Complaint:

Fiona, a 3-year-old, female spayed, Shih Tzu presents to you for a 5-week history of pruritus.

##### History:

Five weeks ago, Fiona started itching along her abdomen and rump, but this has progressed to include the neck, armpits, and paws. Her pruritus only partially responded to prednisone. Other than skin disease, Fiona seems normal. Standard inoculations are up-to-date (DA2PLP to distemper, adenovirus type 2, parvovirus, leptospirosis, parainfluenza virus, and rabies) and were last given 7 months ago. Fiona had successful corrective surgery for an intussusception as a puppy. Rarely, her left knee cap luxates (medial grade 1) causing her to skip a few strides on this limb.

##### Physical Exam:

T = 101.1 °F (38.4 °C)

P = 98/min

R = 20/min

BW = 7.2 kgs (15.8 lbs)

BCS = 5/9

Fiona is bright, alert, and responsive, but is actively biting, rubbing, and/or scratching her axillae, groin, paws, rump, and perineum in the exam room. Negative pinna-pedal response/reflex AU. Excoriated patches of alopecia are present at the base of the tail. The ventral neck and trunk is mildly to moderately erythematous and partially lichenified with a slight surface oily hue. Linear excoriations are seen in the axillae. Perineal skin is erythematous, lichenified, and excoriated. Dorsal pedal surfaces are partially alopecic. Interdigital spaces are erythematous. The pinnae and ear canals are normal. The nasal planum, oral cavity, claws, and paw pads do not have lesions suggestive of dermatological disease. Both anal sacs are empty, normally sized, and nonpainful. With manipulation, the left patella can be luxated medially, but it spontaneously returns to its normal position. The rest of the exam is normal.

##### Diagnostics:

Cytology: Cocci 2+

Skin Scrape (deep + superficial): Negative

