New Tools to Achieve Success in Canine Atopy



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Atopy is an extremely common problem in Veterinary Medicine today. Atopy is the abbreviated terminology used to describe allergic dermatitis which is caused by environmental allergens. In the past several years our understanding of this disease and our

ability to treat it have increased dramatically. For example, we now know that allergen sensitization occurs via percutaneous absorption. This fact helps explain why pets with atopy often lick or chew their paws and typically do not have respiratory symptoms.

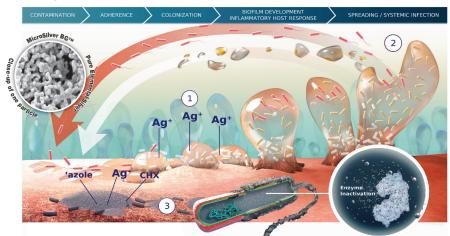
Research has illuminated multiple mechanisms and genetic factors that contribute to the development of atopy. This research has added support for the fact that atopy is primarily a genetically inherited disease. Clinical experience has continued to show us that atopy in dogs and cats worsens with age and does not self-resolve.

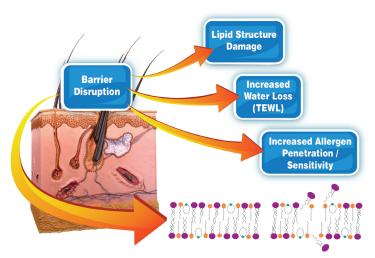
Several new treatment modalities for atopy are now available. Six core therapies exist: antihistamines, steroids, Atopica®, Apoquel®, Cytopoint®, and immunotherapy. Immunotherapy remains the only treatment option that can effectively prevent the entire allergic process. Other therapies focus on suppressing symptoms or blocking some aspect of the allergic response. Immunotherapy is also the only therapy which can prevent new sensitivities from developing and produce a clinical cure.²

Lessening allergen exposure remains important regardless of the core therapy utilized. Knowing that allergen exposure occurs across the skin provides us with a huge advantage in this fight. One of the key genetic factors responsible for increasing allergen exposure in atopic animals is reduced ceramide production.³ Ceramides are a key component of the lipid layer of the stratum corneum. When ceramides are decreased, allergens can more easily cross the skin barrier and become presented to the immune system. Presentation of an allergen to the immune system starts a complex series of reactions resulting in allergic inflammation and pruritus.

Studies have shown that we can replenish the ceramides missing from the epidermal barrier in a variety of ways.⁴ Shampoos,

MicroSilver (Ag+) Disrupts / Destroys the Biofilm
MicroSilver (Ag+) Prevents the Spread of Biofilm
MicroSilver (Ag+) Enhances Chlorhexidine and 'azoles Antibacterial / Antifungal Activity





conditioners, sprays and wipes are common modalities. Replenishing ceramides is a continual process because the epidermal barrier is in a continual state of renewal. Ceramides must be applied frequently for best effect; typically, at least twice weekly. Lastly, the full effect of replacing epidermal ceramides may not be evident until 4-8 weeks after treatment begins.

Considering the array of allergy treatment options we have available the biggest problem we face has shifted from providing comfort to treating infections. Allergic animals are prone to skin infection via multiple mechanisms including increased adherence between bacteria and keratinocytes and a blunted immune response to infection in the epidermis. Increased spread of antibiotic resistant genes amongst bacteria has also added to this challenge. Topical antimicrobial therapy has moved to the forefront of dermatology treatment for superficial pyoderma and Malassezia dermatitis. Topical therapy allows us to avoid antibiotic side effects for the patient and does not contribute to the development of resistant bacteria. Chlorhexidine remains a very effective topical antimicrobial. However, a new ingredient which has demonstrated excellent antimicrobial properties is MicroSilver. MicroSilver is exclusive to the VetBiotek product line. This ingredient has numerous antibacterial, antifungal, and anti-biofilm effects.

When possible for the client, I recommend that my atopic patients

are bathed with an antimicrobial shampoo containing ceramides on a weekly or twice weekly schedule. In addition to replenishing ceramides, medicated bathes can be beneficial for atopic patients by physically removing infectious organisms, allergens, and inflammatory mediators. Medicated wipes can be useful for all the same reasons. Leave-in conditioners, sprays, and mousse products are also available with the same ingredients. These products are quicker and more convenient which allows us to match our clients with the product that is most likely to facilitate compliance and increase success.

Reference

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