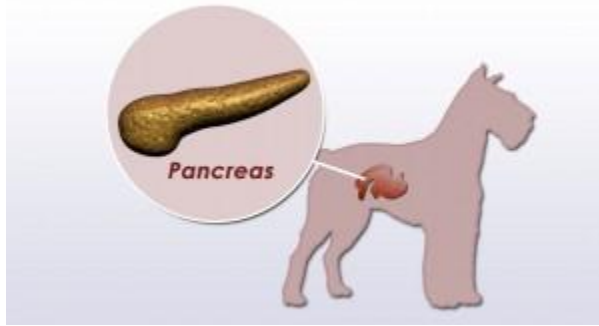


# Canine Pancreatitis

---



The pancreas is a glandular organ that lies along the base of the stomach and the entrance into the small intestine (the duodenum). Its function is to produce digestive enzymes and insulin. The enzymes produced by the pancreas are only activated when released into the duodenum through the pancreatic duct. In the case of pancreatitis (inflammation), the enzymes may become activated while inside the organ causing “digestion” of the delicate tissues therein. This is a very painful condition and is certainly life-threatening. Vomiting is the most common symptom of pancreatitis; however, in sub-acute or chronic cases it may or may not occur. Pancreatitis may be triggered by the recent ingestion of a high fat meal; it may be associated with medications or parasitic infection of the organ; and certain dog breeds are predisposed to this disease. Pancreatitis must be treated swiftly and aggressively, then managed and prevented in the long term to prevent relapse.

Miniature Schnauzers are the poster-children of pancreatitis. Any breed can succumb to the disease, but Schnauzers are more likely to develop refractory (non-responsive) and chronic illness. Diabetic dogs are also predisposed to pancreatitis; and, if a large portion of the pancreas which produces insulin is damaged during an episode, diabetes mellitus can occur secondarily. Furthermore, certain drugs and chemotherapy agents can increase a dog’s susceptibility to pancreatitis. In many acute cases, there is a history of the dog consuming a large portion of fat from brisket trimmings, a ham bone, or other table scraps.

Symptoms can include vomiting, diarrhea, a painful abdomen, inappetence (disinterest in food), and fever. A diagnosis is confirmed with a physical examination, blood count and chemistry profile, abdominal radiograph (x-ray) or ultrasound, and a Specific Canine Pancreatic Lipase (spec cPL) Test. Lipase is the elevated enzyme associated with pancreatitis, but it has many origins in the body; therefore, the spec cPL is the only reliable blood test for pancreatic lipase. Amylase is another enzyme that may be elevated during illness, but it is not specific for pancreatitis. The liver is commonly inflamed secondarily, and its leakage enzymes may be elevated on a chemistry profile as well. Radiography and abdominal ultrasound are used to rule out masses (cancer) that may be the underlying cause of disease.

Pancreatitis may be acute or chronic. There is no specific cure for the disease. Acute cases are treated supportively with intravenous (IV) fluids and electrolytes, injectable antibiotics, anti-emetic drugs for nausea, and pain medications. It is widely known that pain slows recovery by suppressing the immune response, so pain management is an important part of treatment. In chronic cases (sometimes called a smoldering pancreatitis), and after an acute episode is resolved, the dog will be prescribed a special fat-restricted diet. Some other foods including treats, and especially table scraps, can trigger a relapse.

The prognosis for pancreatitis depends upon the initial trigger of inflammation, the severity of illness, how quickly treatment is instituted, and the dog’s predilection for chronic pancreatic disease. Any vomiting dog should be screened for this potentially life-threatening condition.