Canine Separation Anxiety: Home Alone

Kenneth M. Martin, DVM, DACVB
www.TEAManimalbehavior.com
www.veterinarybehavior.com

Outline
- Prevalence, signalment, & risk factors
- Probable causes & prevention
- Clinical signs & video examples
- Behavioral diagnosis, differentials, history taking
- Treatment - Behavior & Environmental Modification
  - Pharmacotherapy
  - Supportive Therapy

Prevalence
- 17% or 10.7 million U.S. dogs
- 20-40% of cases at specialty clinics

Steve Connell, D.V.M.
Lilly Research 2006
Signalment

- Studies biased toward
  - Males (60-70% of subjects) in most studies
  - Mixed breed dogs
  - Shelter dogs
  - Rescue organizations

- Mixed breed dogs, over 3 years, >5 instructions
  - More resistant to improvement
  - Desensitizing to departure cues & change routine difficult

Risk Factors

- Dogs in single adult human household
  - 2.5x more likely than dogs from multi-owner homes
- Intact 1/3 as likely as neutered dogs
- Spoiling, sex, presence of other pets
- Not associated with separation anxiety
Risk Factors

- Hyperattachment significantly associated
  - 3x more likely to follow owner
  - 4x more likely to have excited greetings
  - 5x more likely anxious at departure


Probable Causes

- Puppies
  - Never left alone
  - Early removal from litter?
  - Early illness
  - Traumatic events
  - Predisposition to fear or dependency

Probable Causes

- Conditioned over-attachment to human/dog
- Change Routine
  - Ownership (shelter dogs)
  - Move into a new house
  - Occupants to a household (new baby)
  - Owner’s work schedule
Prevention

- Selection of dog
- Alone training
- Regular walks off property
- Ignoring before leaving home
- Offer food storage toy

Prevention

- Crate training
  - Exposure at a young age
  - Feed meals in the crate
  - Hide treats (crate fairy)
  - Confine in the crate
    - When home
    - With a food storage toy
  - Never use the crate for punishment

Clinical Signs

- Separation anxiety (actual human absence)
- Barrier frustration (virtual human absence)
  - Destructive behavior
    - Chewing, scratching (usually entrance/exit of home)
  - Elimination behavior
    - House soiling, urine marking or both
  - Vocalization
    - Whining, howling, barking (high pitch)
- Occur within less than 10 minutes of departure
Clinical Signs

- Hypersalivation
- Non-passive behavior
  - Pacing, circling, repetitive, compulsive locomotor behavior


Clinical Signs

- Self injurious behavior
  - Escape behavior
  - Broken/worn teeth
  - Torn/worn nails
  - Compulsive behavior

Clinical Signs

- Hyperattachment
  - Seek constant contact with attachment figure
- Aggression
  - Toward attachment figure
  - Rare
Clinical Consultation

- Preliminary history prior to appointment
  - Veterinary technician/assistant
- Work-up
  - PE, CBC, CHEM, UA, Fecal, +/- T4
- Definitive diagnosis and treatment plan
  - (15-30 minutes)
- Prescribe drugs (consent form)
- Cost
  - Technician/assistant time
  - Doctor time (average client transaction)

Medical Differentials

- Sherman BL.

Behavioral Differentials

- Generalized anxiety disorder
- Phobias (thunderstorm/noise)
  - Probability SA given dog has noise phobia 88%, storm phobia 86%
  - Probability NP/TSP given dog has SA 63%/52%.
- Housesoiling (cocker, beagle, shitzu, mixed)
- Territorial aggression
- Destructive behavior (adolescence)
- Cognitive dysfunction syndrome
- Compulsive disorder

3. Incomplete HT, 81% improved, 39% SA, 85% improved, intact males mark
Behavioral History

- When does the behavior occur (time of day)?
- Where does the behavior occur? Duration?
- Presence or absence of the owner (actual or virtual)?
- Triggers? (1 specific person leaves)
- Hyperattachment (attention getting behaviors or “velcro dog”)?
- Has the dog been house broken?
- Rule out phobias, territorial behavior, adolescent behaviors

Treatment

- Avoid punishment
  - May foster codependence
  - Contributes to anxiety
  - Separation anxiety is not a problem of training

Treatment

- Avoid confinement
  - Most dogs are less anxious if not confined or kenneled
  - Consider small room with baby gates or use ex-pen
Treatment

- Hyperattachment
  - Ignore all attention getting behaviors for 3-4 weeks, and give the dog attention on owners own terms, not when the dog demands it
  - Dog should sit before it gets attention

Treatment

- Ignore dog
  - Prior to human departure (~20 minutes)
    - Ten minutes into the ignoring offer a frozen food stuffed Kong toy (confine?)
  - When humans return home
    - (20 minutes or until the dog settles down)

Treatment

- Desensitize to departure cues
  - Vary departure routine
  - Avoid cues of departure when leaving
  - Do ‘cues’ when not leaving
Treatment

- Schedule feed the dog twice a day
- Leash walk dog twice a day off the property
- Marker train 10 minutes a day
  - Especially a down stay

Pharmacotherapy

- TCA
  - Clomipramine (Clomicalm **FDA approved)
    - 3 mg/kg PO BID with food
- SSRI
  - Fluoxetine (Reconcile **FDA approved)
    - 1-2 mg/kg PO SID with food

Pharmacotherapy

- Clomipramine (Clomicalm **FDA approved)
  - N=99, 1-2 mg/kg PO BID + Beh. Mod. (King et al 2000)
    - 73% significantly improve by 12 wks vs 41% Beh. Mod. alone
    - Improved 3 x faster for destruction, defecation, urination
    - No significant difference in vocalization at any time
    - Side Effect - transient vomiting

Pharmacotherapy - Clomipramine

- **Side effects**
  - Emesis (20%), lethargy (14%), diarrhea (9%), polydipsia (3%), reduced appetite (3%), aggression (2%), seizure (1%)

- **Contraindications**
  - Concurrent anticholinergic (antihistamine or acepromazine), sympathomimetic drugs (PPA), thyroid supplements, serotonin modulators (SSRI, MAOI - Amitraz/ Promeris, Tramadol)
  - KCS, Glaucoma, Prostate disease, Diabetes mellitus, Seizures, Arrhythmias
  - Breeding or performance animals

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Pharmacotherapy

- **Fluoxetine (Reconcile **FDA approved)**
  - N=242, 1-2 mg/kg PO SID + Beh. Mod. (Simpson et al 2007)
  - 42% improve by 1 wk vs 17% Beh. Mod. alone
  - 72% improve by 8 wks vs 50% Beh. Mod. alone
  - Destructiveness and vocalization statistically significant
  - Urination and defecation improved numerically
  - Hypersalivation - no difference


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Pharmacotherapy - Fluoxetine

- **Side effects**
  - Calm or lethargy, reduced appetite, vomiting, shaking, diarrhea, restlessness, excessive vocalization, aggression and -- in infrequent cases -- seizures

- **Contraindications**
  - Diabetes mellitus, seizures
  - Serotonin modulators (SSRI, MAOI - Amitraz/ Promeris, Tramadol)
  - Breeding or performance animals
Pharmacotherapy - Adjuncts

- Rapid onset of action
  - Given 1-2 hour prior to owner departure
  - Used during the 'loading phase' plus SSRI, TCA
  - Used as an adjunct - works synergistically

- Benzodiazepines
  - Alprazolam (Xanax)
    - 0.02-0.1 mg/kg PO pm
  - Lorazepam (Ativan)
    - 0.1-0.2 mg/kg PO pm
  - Clorazepate (Transene)
    - 0.5-2.2 mg/kg PO sid/tid
  - Clonazepam (Klonopin)
    - 0.1-1.0 mg/kg PO bid/tid

- Alpha 2 agonist
  - Clonidine (Catapres)
    - 0.01-0.05 mg/kg PO up to bid

- Serotonin agonist/antagonist
  - Buspirone (buspar)
    - 1-2 mg/kg PO sid/tid
Pharmacotherapy

- MAOI
  - Selegiline (Anipryl) for Cognitive Dysfunction
  - 0.5-1 mg/kg PO SID in the morning

Supportive Therapy

- Dog Appeasement Pheromone
- Lavender/Chamomile
- Body wrap
- Nutraceutical

Supportive Therapy

- Music Therapy
  - "Through a Dog's Ear"

References:
Monitoring Therapy

- Video recording

- Video analysis of dogs with separation-related behaviors (Palestrini et al., 2010)
- Video analysis of dogs suffering from anxiety when left home alone and treated with clomipramine (Cannas et al., 2014)

Planned departure technique?

- Desensitization of dog to human departure
- Avoid ever leaving the dog home alone (day care)
- Use neutral stimulus for training (radio)
- Train to quiescence
  - Relaxed down stay (Kong toy)
  - Gradually leave for longer and longer periods of time without anxiety (departure diary)

How to use the planned departure technique successfully

- Use a cue that tells the dog when it will leave the home with its owner
  - Harness the dog to prevent anticipation
  - Absence of cue, dog will be left home
- Use video surveillance
  - Return to the dog prior to anxiety
What Usually Does Not Work

- Getting another pet
  - Often the social attachment is toward a person
  - Exception is littermates
  - History will dictate onset with death of housemate

- Punishment
  - Increases stress and anxiety
  - Associated with the owner
  - Creates codependence
  - Dogs do not...
    - Destroy personal items to get back as us

- Confinement
  - Often intensifies the panic attack
  - Exception is well kennel trained dogs
  - Occasionally necessary to prevent destructive and self injurious behavior
  - Must be escape proof
    - Kustom Krates
      - [www.kustomkrates.com](http://www.kustomkrates.com)
    - ProSelect® Empire Dog Cage
Questions?

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