Diagnosis

1. Superficial bacterial pyoderma

2. Flea infestation with suspected flea allergy dermatitis

3. Moderate to severe minimally blanching erythema with multifocal area of hyperpigmentation and lichenification noted along the caudal ventrum (rule out secondary to bacterial pyoderma vs drug reaction vs vasculitis vs other)

4. Bacterial intertrigo of lips

5. Possible additional underlying allergic component (rule out food allergy vs atopy)

History

Bailey is a 2 year old male castrated German Shepherd service dog who presented to OSU Community Practice Service for a rash in his inguinal area. His owner noticed some bumps and a hot area in his groin region on Friday or Saturday (2/4/2012). The area felt greasy/ wet to him and he thought there was a smell. Bailey has been doing well at home and is eating, drinking, urinating, and defecating normally without any coughing, sneezing, vomiting, or diarrhea. Bailey does occasionally burp after he eats, but nothing comes up as far as the owner can tell. He has a history of ear infections but his ears are doing well on once weekly cleaning with Epi-Otic. Bailey has been receiving monthly Frontline Plus and Heartguard and his current diet is Innova/Evo red meat formula.

Findings

Physical Examination

Weight: 36.6 kg (previously 35.4 kg) BCS: 3/5 (3 is ideal)

Attitude: quiet, alert, responsive

Hydration: adequate MM: pink/moist CRT < 2 secs

Temp: 101.5 F Pulse: 120 bpm Resp: 24 bpm

Cardiovascular: normal rhythm with no murmurs/arrhythmias detected

Respiratory: normal bronchovesicular sounds in all lung fields; no crackles or wheezes

Eyes, ears, nose, mouth: Ears clean, no erythyma; Worn 104, 204, 304, and 404 (canine teeth)

**Integument: Inguinal region is extremely erythematous and warm to the touch, mildly lichenified and hyperpigmented. There are epidermal collarettes present and some scaling. There is some mild scaling in the right front elbow. Fleas were seen on the back leg.**

Gastrointestinal: firm, non-painful abdomen with no masses/organomegaly detected

Lymph nodes: No peripheral lymph node enlargement

Neuro: No ataxia, normal PLR, normal menace; full neurologic exam not performed

Musculoskeletal: Ambulating normally, a full orthopedic exam was not performed

Dermatologic Exam:

Flea dirt found around tail base, both ears, and on caudal dorsum. A single papule noted on the chin. Partial alopecia of lips and lip folds (worse on right than the left). Mild erythema on ventral aspect of neck with focal partial alopecia where collar lies. Mild loose scaling from dorsum of head to base of tail. Few crusting papules on base of neck with mild erythema and focal partial alopecia. Papular dermatitis noted along the caudal dorsum, bilateral inguinal areas, medial thighs and caudal thighs bilaterally. Partial alopecia and mild to moderate erythema noted along the caudal thighs, lateral legs distal to the hocks and medial thighs. Moderate erythema noted in perianal region. Moderate to severe area of minimally blanching erythema with multifocal areas of hyperpigmentation and lichenification noted along caudal dorsum, prepuce and bilateral inguinal regions. Multifocal epidermal collarettes noted on caudal ventrum. Right medial elbow extending to axilla is mildly erythematous with crusting papules and epidermal collarettes. Mild tan ceruminnous debris noted in left horizontal ear canal with mild amount of hair. Tympanic membrane intact and within normal limits. Right ear contained a small amount of tan ceruminous debris. Tympanic membrane intact and within normal limits. Numerous live flea noted along trunk and head.

Skin Cytology:

Perianal: 0-5 cocci/oif

Right medial elbow: 0-5 cocci/ oif

Lip fold: 0-5 rods/ oif

Inguinal papule: 0-5 cocci/oif

CBC:

HCT: 47% (36-54)

Plasma protein: 6.5 g/dL (5.7-7.2)

Platelets: 257 x 10^9/L (106-424)

Procedures

Physical Exam

Skin cytology

CBC

Treatment

Capstar Canine >25 lb capsule: Given once PO

Instructions

Please give Bailey the following systemic medication:

**1) Cephalexin 500 mg capsules:** Please give 2 capsules (1,000 mg) by mouth every 12 hours for the next 4 weeks. This is an antibiotic that will help clear the bacterial infection on Bailey’s skin. The most common side effects include vomiting and diarrhea. If you notice any of these signs or think that Bailey is not acting like himself, please discontinue this medication and call OSU.

Please continue using the following medications as previously directed:

**1) EpiOtic Ear Cleaner:** Please fill both ear canals and massage the cleaner in the canal once a week indefinitely. You can wipe the cleaner and debris out with a cotton ball or tissue. Allow Bailey to shake his head after cleaning to allow him to work up more of the debris from in the canal. Please contact us for a refill of Epi-Otic.

**2) Douxo-Chlorhexidine Wipes**: Please wipe Bailey’s lips once daily until his recheck appointment.

**3) Triz Chor 4 Shampoo:** Please bath Bailey once weekly until his recheck appointment. \*\*\*Do not bathe Bailey within 48 hours of applying Frontline Plus\*\*\*

**4) Frontline Plus**: Please apply one tube on the skin between Bailey’s shoulders every 2 weeks until further directed. \*\*\*\*Do not apply Frontline Plus within 48 hours of giving Bailey a bath\*\*\*\*\*

Flea Control:

Since we suspect that Bailey has a flea allergy, it is crucial to treat both him and his environment for fleas. Even just one flea can be enough to cause a severe skin reaction in flea allergic animals. We recommend consulting a professional exterminator to treat your apartment and the environment.

Prognosis

Today on the dermatologic exam we found a number of live fleas on Bailey. We have diagnosed him with a flea infestation, suspected allergy dermatitis and a superficial bacterial pyoderma (skin infection). At this time, we are unable to definitively locate a cause for Bailey’s moderate to severe erythema and hyperpigmentation of his caudal ventrum (groin region). A complete blood count was performed today and indicated that Bailey has an adequate platelet count. The rest of the CBC was within normal values. Other potential causes of his skin condition could be a drug reaction, secondary to his pyoderma, a vasculitis or another immune-mediated reaction. If Bailey does not respond to treatment for his superficial bacterial pyoderma and suspected flea allergy dermatitis, a biopsy of his skin is recommended. Should Bailey become systemically ill in the meantime, he should be rechecked earlier than 2 weeks. In order to treat Bailey’s flea infestation, we recommend that you consult a professional exterminator to treat the home and environment.

Dermatology has scheduled you an appointment for **Thursday, February 23, 2012 at 2:00 pm**. If this conflicts with your schedule, please contact OSU or Dr. Barrett so that we can reschedule the appointment.

**Dr. Barrett’s email address is susan.barrett@cvm.osu.edu**

**OSU’s phone number is 614-292-3551**

**Next Appointment**

Dermatology has scheduled you for a recheck appointment on **Thursday, February 23, 2012 at 2:00pm**. Please let us know if this date and time do not work for you so that we can try to schedule a different date.

Bailey was a very good boy today and we enjoyed seeing him! Thank you for trusting us with his care!

If you have any questions or concerns, please call OSU at 614-292-3551. You can email Dr. Barrett with the insurance claim forms or with any questions or concerns at **susan.barrett@cvm.osu.edu**