

OBESITY IN DOGS

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The rising obesity epidemic has been described as a significant health problem affecting both people and their pets. Obesity is most often the result of excessive dietary intake, and/or inadequate energy utilization. Over 60% of American adults are overweight or obese, and up to 40% of their pets join them in this condition. A review of the literature on canine obesity draws parallels between risk factors, the negative impact on health, and treatment of obesity in humans and their companion pets.

Risk factors for canine obesity include:

- 1) Overeating: may be due to the availability and palatability of pet foods, competition for food from other animals present at the time of feeding, begging at the table and receiving high-fat treats all contribute to obesity in dogs.
- 2) Lack of exercise (as parallels trends in humans)
- 3) Hormonal Factors: Spay and neutering, endocrine disorders (such as hypothyroidism and hyperadrenocorticism)
- 4) Drugs such as corticosteroids and Phenobarbital that increase appetite.
- 5) Aging: associated with a decrease in lean body mass and metabolic rate, possible medical conditions and overall reduced activity.
- 6) Genetic: Certain breeds are at greater risk for obesity, including Labrador Retriever, Dachshund, Sheltie, Cocker Spaniel, Beagle, Basset Hound, Cavalier King Charles Spaniel, and Cairn terrier dogs.

When considering all of the above factors we must remember that humans are the ultimate risk factor in canine obesity. Canine obesity is a human-created phenomenon, since dogs don't put food in their bowls - we do! Feeding is a major part of the human-animal bond. For many dog and cat owners, feeding equals love.

Conditions Caused or Complicated by Obesity:

The conditions caused or complicated by obesity include decreased life expectancy (obese dogs live 2-years less compared with non-obese paired littermates), increased incidence of hip dysplasia and degenerative joint disease, pulmonary and cardiovascular disease, reduced immunity, exercise and heat intolerance, hyperlipidemia and dyslipidemia, increased incidence of pancreatitis, dystocia and possibly decreased fertility, hypertension, increased incidence of mammary tumours and transitional cell carcinoma of the urinary bladder, diabetes mellitus, skin fold dermatitis, difficulty with performing surgical procedures, increased morbidity and mortality during and after anaesthesia (many anaesthetics are fat-soluble and so obese animal may take longer to recover from anaesthesia and complications associated with ventilation may occur.).

Treatment of Obesity in Dogs:

Dietary Management:

Calorie restricted diets can be specifically calculated using derived mathematical equations, although, simple and practical dietary recommendations provide a greater the chance of adherence to the dietary regime. Switching to a low calorie dog food or simply reducing the amount of food that the dog is eating by 1/3 and providing a filler such a canned pureed pumpkin, in an amount double to the quantity of food eliminated may aid in weight loss.

Lifestyle Management:

Increase in physical activity promotes fat loss and may assist in lean tissue preservation. Regular exercise may also prevent a regain of weight that can occur after successful weight loss if a sedentary lifestyle of maintained. Treatment of obese dogs may require a change in the behaviour of the guardian and family. The family environment may shape attitudes towards food and exercise, leading to overeating and a sedentary lifestyle.

Physiotherapy:

An intensive physiotherapy program has been shown to be useful in weight loss and management of osteoarthritis and lameness. As well, owners can be taught to massage their own dog and provided with a home exercise program.

Conclusion

Obesity is a significant public health problem affecting people and their pets. The same factors that underlie human obesity also underlie the growing prevalence among companion pets. Understanding risk factors, the negative impact on health, identification of overweight and obese animals, and subsequent treatments can help us to accept our role in the development and treatment of this epidemic.