

## Hypothyroidism

Also Known As: Underactive Thyroid.

**Transmission or Cause:** This condition is a result of a decrease in production and release of the T4 and/ or T3 hormones that are produced by the thyroid gland. The most common cause of Hypothyroidism is degeneration or inflammation of the thyroid gland. Other causes of this condition may include: congenital (hereditary) disease, iodine deficiency, malignancy (cancer) or the lasting response of some medical treatments.

**Diagnosis:** Blood work will be submitted to the laboratory to measure the level of the thyroid hormones. Further laboratory work or diagnostics may be imperative for diagnosis.

**Treatment:** Treatment involves the synthetic supplementation of the thyroid hormone by administration of an oral medication for the duration of the pet's life. Further diagnostics will be warranted if limited response is observed, which will be decided by the treating veterinarian.

**Predisposed Dogs:** There are several breeds of dogs that are predisposed to this condition. These breeds include: Golden Retrievers, Labrador Retrievers, Boxers, Poodles, Great Danes, Cocker Spaniels and Doberman Pinchers. This condition is more commonly diagnosed in middle aged, sexually altered dogs.

**Symptoms:** Some of the symptoms of Hypothyroidism include: drastic and unexplained weight gain, dull and brittle hair coat, alopecia (hair loss), recurrent pyoderma (skin infection), excessive dander, lethargy/low energy and neurologic deficits.

**Prognosis:** The prognosis of this condition is dependent on the cause. Generally, this condition has a very good prognosis. This condition will likely need long term daily treatment. When the thyroid hormone has become regulated with treatment, the symptoms will decrease and the pet's quality of life will improve over time.

**Long Term Management:** Medication will need to be given once to twice daily long-term for the control of this condition. Initially, blood work will need to be preformed every 4-6 weeks until the levels are within an acceptable range for improvement. Long term, blood work will be required at least every 6 months to measure levels to determine appropriate dosing. It is probable that the dose of medication may need to be adjusted at some point during this process.

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