



Separation Anxiety Syndrome

Basics

OVERVIEW

- A distress response of dogs (occasionally cats) separated from the person or persons to whom they are most attached
- The separation may be real (the person is gone from the home environment) or perceived (the pet is just located away from the person, as being in a different room)
- The resulting may lead to episodes of destruction, vocalization, and elimination
- Separation anxiety is a subset of separation-related problems that may have different underlying motivations, including fear, anxiety, overattachment to the person(s), and lack of appropriate stimulation or interactions

GENETICS

- None known

SIGNALMENT/DESCRIPTION OF PET

Species

- Primarily dogs; speculated that 7–28% of companion dogs experience some degree of separation anxiety syndrome
- Possible in cats

Mean Age and Range

- Any age, most commonly in dogs greater than 6 months of age; number of cases may increase in dogs greater than 8 years of age

Predominant Sex

- None recorded

SIGNS/OBSERVED CHANGES IN THE PET

- Destruction, vocalization (whining, howling, barking), and indoor elimination are reported most commonly; destruction often targets windows and doors and/or the person's possessions
- Other signs include behavioral depression, lack of appetite (anorexia), drooling, hiding, shaking, panting, pacing, attempts to prevent the person's departure, and self-trauma from lick lesions; diarrhea and vomiting are occasionally noted
- Signs of strong pet-person attachment may be present; usually excessive attention-seeking behaviors and following behaviors; excessive, excited, and prolonged greeting behavior upon the person's return, regardless of the length of the absence



- In cats, elimination problems in the person's absence may be linked to separation-related anxiety
- Separation distress behavior(s) occurs regardless of the length of the person's absence and tend to occur within 30 minutes of the person's departure, but may occur on and off all day
- Specific triggers may be identified, such as the person getting keys, putting on outer garments, or packing the car; triggers are situations or things to which the pet reacts, leading to separation anxiety
- May occur on every departure and absence or only with atypical departures (such as after-work, evening, or weekend departures); the reverse pattern also may be seen
- In cats, elimination problems in the owner's absence may be linked to separation-related anxiety
- Physical examination usually is normal
- Injuries possible in escape attempts or while engaging in destructive activities
- Skin lesions from excessive licking
- Rare cases of dehydration from drooling or diarrhea due to stress

CAUSES

- Specific causes are unknown
- Speculated causes include the following:
 - ♦ Improper socialization to the person's departure and absence
 - ♦ Lack of appropriate pet-person interactions
 - ♦ Prolonged contact with humans, without learning to be alone
 - ♦ Improper or incomplete early separation from the mother dog (known as a “bitch” or “dam”)
 - ♦ Traumatic episodes during the person's absence
 - ♦ Decline in thinking, learning, and memory, frequently associated with aging (known as “cognitive decline”)

RISK FACTORS

- Suspected, but not proven, risk factors include adoption from humane shelters, extended time with preferred person (such as during vacation or illness), boarding, lack of detachment when young
- Senior pets
- Possible correlation between separation anxiety and noise phobias (such as thunderstorm phobias)

Treatment

HEALTH CARE

Independence Training

- Teach the dog to be more independent of the person(s)
- All attention is at person's initiation—person begins and ends attention sessions, rather than the dog initiating attention
- No attention on pet demand
- Attention must be earned by the pet by performing a task, such as “Sit”
- Decrease following behavior while the person is at home
- Teach the dog to calmly stay in another location, away from the person

Changing the Pet's Perception of Predeparture Cues

- Repeat predeparture cues (such as picking up keys, walking to the door) without leaving
- Repeat two to four times daily, until the dog does not respond to cues with anxious behaviors (such as panting, pacing, following, or increased vigilance)
- Goal is to remove the dog's association with the cues and the person's departures, and to diminish the anxious response

Counter-Conditioning (Response Substitution)

- Teach the dog to “Sit/Stay” near the typical exit door
- Gradually increase the distance between the dog and the exit door
- The person slowly progresses toward the door, increasing the time away on each trial
- Eventually elements of departure, such as opening and closing the door, are added
- Finally, the person steps outside the door and returns

Classical Counter-Conditioning

- Leave the dog a delectable food treat or food-stuffed toy on departure
- Associate departure with something pleasant

Changing Departure and Return Routine

- Ignore the pet for 15–30 minutes prior to departure and upon return
- On return, attend to the dog only when it is calm and quiet
- May allow dog outside to eliminate

Graduated Planned Departures and Absences

- Begun after dog does not respond to predeparture cues
- Use short absences to teach the dog how to be home alone
- Departures must be short enough not to elicit a separation distress response
- Goal—pet learns consistency of person's return and to experience departure and absence without anxiety
- Departures must be just like real departures (person must do all components of departure, including leaving in the car, if that is how he or she usually departs); person will leave a safety cue (such as leaving a radio or television on, ringing a bell) on planned departures only (must not be used on departures where length of absence is not controlled, such as work departures)
- *Initial departure must be very short, 1–5 minutes*
- Length of absence is slowly increased at 3- to 5-minute intervals, if no signs of distress were evident at the shorter interval; increase in interval must be variable; intersperse short (1- to-3 minute) with longer (5- to 20-minute) departures
- If destruction, elimination, or vocalization occurs, departure was too long; use videotape to assess pet's anxiety
- If departures and absences are continued, even though distress behaviors are present, the dog will get worse
- Once the pet can be left for 2–3 hours on a planned departure, it often can be left all day
- Safety cue is slowly phased out over time, or can be used indefinitely

Arrangements for the Pet during Retraining and Person's Absence

- Allow no more destructive activity, if possible
- Mixing up or eliminating triggering departure cues may help diminish the anxious responses
- Doggy daycare arrangements or pet sitters
- Gradual conditioning to a crate; crates are not recommended, unless the dog is already crate-trained and comfortable being left in a crate

ACTIVITY

- Regular, scheduled daily exercise and playtime are beneficial

DIET

- No dietary changes are necessary, unless pet also has diarrhea or vomiting

Medications

Medications presented in this section are intended to provide general information about possible treatment. The treatment for a particular condition may evolve as medical advances are made; therefore, the medications should not be considered as all inclusive

- Clomipramine (Clomicalm)—a tricyclic antidepressant (TCA)—approved by the federal Food and Drug Administration (FDA) for use in the treatment of separation anxiety in dogs; approved for dogs older than 6 months of age; must be given daily, not on an “as needed” basis, as it may take 2–4 weeks before behavioral effect is evident
- Fluoxetine (Reconcile)—a selective serotonin reuptake inhibitor (SSRI)—approved by the federal FDA for use in the treatment of separation anxiety in dogs; administer daily
- Other TCAs, such as amitriptyline
- Benzodiazepines, such as alprazolam, for panic at owner departure
- DAP (Dog Appeasing Pheromone); a synthetic analogue of the natural appeasing pheromones of the nursing bitch, which calm puppies; used to calm dogs in fearful, stressful, and anxiety situations (such as separation anxiety and noise phobias); available as a plug-in diffuser and collar

Follow-Up Care

PATIENT MONITORING

- Good client follow-up is necessary to monitor both the behavioral treatment plan and medication, if prescribed
- Weekly follow-up is best in the early stages to assess effectiveness of the treatment plan and compliance with instructions—once the dog has become more independent, has become less responsive to predeparture cues, and is calmer on departures and returns, graduated planned departures may be implemented

PREVENTIONS AND AVOIDANCE

- Teaching pets how to be left home alone, making pets independent

POSSIBLE COMPLICATIONS

- Injuries during escape attempts
- Ongoing destruction and elimination disrupt the human-animal bond and may result in relinquishment of the pet to an animal shelter or animal control facility
- Other anxieties cause signs that mimic separation distress; if not identified and treated, the problem behavior may worsen

EXPECTED COURSE AND PROGNOSIS

- Separation anxiety often responds well to behavioral modification, with or without medication
- Some severe cases can be very resistant to treatment; other behavioral disorders occurring at the same time may make resolution more difficult
- Drug therapy alone is rarely curative for most behavioral disorders; realistically, drug therapy can be expected to decrease the anxiety associated with the person's departure, but the dog still must be taught how to be left alone during the person's absences

Key Points

- Have realistic expectations of the time course of treatment and the need for behavior modification, in order to have successful resolution of the problem
- Drug therapy alone is rarely curative for most behavioral disorders; realistically, drug therapy can be expected to decrease the anxiety associated with the person's departure, but the dog still must be taught how to be left alone during the person's absences
- Problem behavior may take weeks or months to resolve, depending on severity and duration of the problem

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