SEPARATION ANXIETY BASICS

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Canine separation anxiety is characterized by signs such as destructiveness, inappropriate elimination and distress vocalizations that occur in the actual or virtual absence of the owner or caregiver¹. Other behavioral signs exhibited by the dog may include hypersalivation, anxiety in response to pre-departure cues, rearranging of household items or hyperattachment behaviors during interactions with the owner.

It is important to confirm the diagnosis prior to initiating treatment because other conditions can have similar presenting signs²⁻⁴. Differential diagnoses for destructive behavior can include play behavior, environmental exploration, noise phobia, territorial aggression or understimulation. Similarly, differential diagnoses for inappropriate elimination may include incomplete housetraining, urinary tract infection or other urinary tract conditions, conditions resulting in polyuria such as diabetes or hyperadrenocorticism, marking behavior or lack of sufficient outdoor access for normal elimination.

Information that supports a diagnosis of separation anxiety can be gathered by questioning the owner about the dog's behavior patterns, directly observing the dog's response to separation or using a recording device to monitor the behavior of the dog when left alone. Once an accurate diagnosis has been made and other potential factors have been ruled out, therapy can be initiated.

Clients living with a dog with separation anxiety often make significant adjustments to their own lifestyle to accommodate their dog's anxiety disorder. In addition, therapy for separation anxiety can be overwhelming and time consuming and so it is important that recommendations are tailored to an individual dog's needs for greater response.

Treatment recommendations that focus on the relationship between the dog and caregiver or exercises that can be performed outside of non-training departures include independence training, relaxation training, habituation to departure cues, providing appropriate leadership, mental stimulation, physical exercise and graduated departure training.

At the time of owner departure, recommendations to decrease the dog's level of stress include downplaying the owner's departure, minimizing cues immediate preceding a departure and creating a relaxing routine that allows the dog to be settled and relaxed prior to the departure of the owner.

Any unnecessary departures should be avoided when possible. During the time when the dog must be left alone, using background noise or audio recordings can block external noise and may help the pet to remain calm. Leaving the dog with a long lasting, high value toy or food reward can distract the pet from the owner's departure and also help the dog associate the owner's absence with a positive emotional state. Some dogs are better managed with safe confinement in a room or crate whereas others respond better when given more freedom to move throughout the home.

When the owner or caregiver returns, ignoring the dog and allowing it to settle back to its normal arousal level prior to direct interaction from the owner can provide the owner with the opportunity to interact with the dog without unintentionally reinforcing anxiety related behaviors. Punishment should be avoided for damage or elimination that occurred during the owner's absence and the owner should be educated about the motivation for the "guilty" look to help them respond appropriately in that situation.

Maintenance and situational medications as well as over-the-counter therapies can be used to decrease the dog's stress response during periods of separation that occur before the dog has learned to tolerate that experience without anxiety⁵⁻¹⁰. It is important for clients to understand that using medication as part of a treatment plan is not a "cure" for the condition and that medication must be used in combination with behavior modification for maximum benefit as well as for compliance with label indications.

The owner should be educated about the prognosis for their dog's condition and should also be informed about the potential for relapses of anxiety following periods of extended contact or changes in household routine.

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