



THE LABRADOR RESCUE TRUST

ESSENTIAL GUIDE TO IDIOPATHIC VESTIBULAR SYNDROME ‘old dog stroke’

This Veterinary Help Sheet has been very kindly written by Robert White-Adams MRCVS, who regularly writes informative columns in The Trust’s ‘Labradors Forever’ magazine

“Different Strokes”

Anyone spending time around dogs will sooner or later encounter an “old dog stroke” – barely a week goes by without me seeing a case. It is strange then that this is one of the least understood conditions in veterinary medicine. Here’s the low-down:

What happens with an “old dog stroke”?

“Strokes” occur in older dogs causing loss of balance, weakness, staggering, inability to rise, twisting and turning of the head/neck and occasionally vomiting. The condition was dubbed “Stroke” since the signs resemble those seen in humans suffering true strokes - even though we know more now, the name has stuck.

So - what is an “old dog stroke”?

A Stroke is an alteration of the brain’s blood supply caused by a blood clot or bleed in a supply artery to part of the brain. This can occur in dogs but is very rare. The “old dog stroke” is entirely different. In this condition it is not the brain itself which is affected, but the signals and messages entering the brain from part of the inner ear called the “Vestibular Apparatus” – the part of the ear that deals with balance and posture. These signals can be altered by physical damage to the inner ear (such as infection or inflammation) but in the “old dog stroke” syndrome no physical damage is present and the cause of this sudden electrical alteration in signals is unknown. In veterinary terms the condition is called Idiopathic Peripheral Vestibular Syndrome (IPVS) or similar.

How does IVPS occur?

IPVS affects older dogs and occurs very suddenly. In its mild form an affected dog may show only a slight tilt or turn in the head. In more severe cases the inner ear signals are so distorted that the patient is unable to stand or walk unaided, will circle when made to walk, has a marked head turn or tilt and often vomits due to nausea.

Regardless of severity, there is one sign present in virtually all cases – “Nystagmus” – a flicking of the eyes from side to side. Nystagmus may be constant, or occur only when the patient’s head is held in certain positions.

How is IVPS treated?

There are no direct treatments for IVPS and most cases recover on their own. Some medications can help the patient be more comfortable in the early stages: mild sedatives



THE LABRADOR RESCUE TRUST

Page 1 of 2 (Veterinary Help Sheet 7 – 1 March 2010)

or anti-anxiety medication can help if the patient is distressed, a drip can be useful if the patient is not drinking, anti-nausea drugs may be used if the patient is vomiting, steroids used to be commonly used (but any benefit is unproven) and recently it has been suggested that a drug called Vivitonin™ may help speed recovery and prevent future episodes (although this too also is unproven). The most important thing is lots of TLC!

What is the prognosis in IPVS?

The majority of cases of IPVS show improvement within 48 hours and continue to improve for the next few weeks, although it is common for the patient to retain a permanent head turn or tilt. The prognosis is not so good where there is other disease (for example, a patient with hip arthritis will struggle more with weakness and loss of balance). Occasionally we also see patients that fail to improve in the first 2 or 3 days and then quality of life becomes a real concern.

IPVS can be recurrent, tending to be more severe each time. Sadly there are, as yet no proven preventative treatments.

What else should I know?

It is critical to seek veterinary attention if you think your dog has IPVS - there are other conditions that appear similar but require prompt intervention if there is to be a successful outcome.

The Trust wishes to extend their most grateful thanks to Bobby White-Adams for his invaluable contribution to our rescue work.

This help sheet has been written by Robert White-Adams MRCVS. Robert has extensive experience working in mixed and small animal veterinary practice and anything to do with Labradors. He got his first and now sadly missed TLRT dog in 2001. Robert opened his own veterinary practice in 2008 which welcomes all pets, but especially Labradors.

Robert White-Adams MRCVS, Practice Director, Companion Care Weston-super-Mare Ltd,
Inside Pets at Home, Unit 2B Gallagher Retail Park, Weston-Super-Mare, North Somerset BS23 3YY
T: 01934 418004 E: wsm@companioncare.co.uk W: www.companioncare.co.uk/wsm

These Information Sheets are intended to serve as a guideline to new homes and foster homes. They are the result of many years of experience from our helpers and we hope that they provide a useful insight. Please note that these are only guidelines and The Labrador Rescue Trust, its helpers and officers make clear that it is the responsibility of each home/foster home to recognise the needs of their dog and to react to those needs. The Trust, its helpers and officers cannot be held responsible for the behaviour of any individual dog.

THE LABRADOR RESCUE TRUST COMPANY

Registered Charity Number: 1088198

© The Labrador Rescue Trust Company 2010

(Company Limited by Guarantee), Registered in England Number: 4145991

Registered Office: The Old Mill, Park Road, Shepton Mallet BA4 5BS

www.labrador-rescue.com



THE LABRADOR RESCUE TRUST

Page 2 of 2 (Veterinary Help Sheet 7 – 1 March 2010)