

CANINE WOBBLER SYNDROME

What is the Wobbler Syndrome?

The term “wobbler” originated from a spinal disease of horses that causes incoordination while walking. The canine version is more appropriately known as Caudal Cervical Spondylomyelopathy. It results in a wobbly gait when walking or running due to pressure on the spinal cord in the lower part of the neck. Many of these dogs stumble when walking, and the rear legs may be affected first.

How does it happen?

This disease begins because there is an instability between two or more vertebrae in the lower part of the neck. When instability exists, the body attempts to correct the problem. This results in a thickening of the ligaments that are within the joint; one is above the spinal cord and two are below it. As these ligaments thicken, they put pressure on the spinal cord.

The spinal cord is much like a large telephone cable that contains thousands of wires, each carrying important messages. When the telephone cable is crushed, the tiny wires within are broken so they cannot transmit information. A similar event occurs when the spinal cord is compressed by the thickened ligaments. They are unable to carry messages from the brain to the nerves in the legs, so the legs cannot move as they should.

My dog is paralyzed in all four legs. Is this part of this disease?

Yes. The pressure on the spinal cord from the thickened ligaments causes the dog to walk in a very uncoordinated fashion. However, another event often follows. The instability present between the vertebrae also puts unnatural stress on the disk that is located between the bones. After weeks or months of stress, the disk will rupture. When this happens, the pressure on the spinal cord is so great that paralysis occurs. This may involve only the front legs or, in other cases, all four legs.

Are certain breeds of dogs more commonly affected than others?

Yes. Great Danes and Doberman Pinchers are the commonly affected breeds, but any large breed is at risk for this disorder. Great Danes are usually affected when they are young, about 1-3 years of age. Doberman Pinchers and other breeds are typically 6-9 years of age when the symptoms begin.

How is the diagnosis made?

Radiographs (x-rays) of the neck often reveal that the cervical vertebrae are not properly aligned. If the dog is the right breed and the symptoms are correct, this provides strong evidence of the Wobbler Syndrome. However, plain radiographs do not show the spinal cord so the presence of pressure on it cannot be proven in this manner. A myelogram is a radiograph made after a special contrast material (dye) is injected around the spinal cord. The dye outlines the cord so that points of pressure can be readily observed. A myelogram is needed to give conclusive evidence of the

Wobbler Syndrome. It requires general anesthesia.

What is the treatment?

Anti-inflammatory drugs and pain relievers are often prescribed in the early stages of this disease. They may provide some relief from the symptoms, but this improvement is only temporary. As the disease progresses, medication will no longer be helpful. Special precautions must be taken when pain relievers and anti-inflammatory medications are given to Doberman Pinschers as there is a high incidence of inherited bleeding disorders in this breed; some medications may precipitate a bleeding crisis.

In some dogs, a specially-fashioned neck brace can be helpful in limiting motion in the neck. This can be helpful in some dogs, especially dogs for which surgery is not feasible. However, most dogs have progressive disease and are helped best with prompt surgery.

Successful treatment requires that the pressure be removed from the spinal cord. There are several surgical procedures that have been used, but none have been successful in all cases. The findings on the myelogram are used to determine the surgical procedure that is most likely to be helpful.

What is involved with after care?

The degree of after care will depend on the dog's ability to walk at the time it goes home from the hospital. If it can walk, but it is incoordinated, it will need assistance so that a fall does not occur. If it is still paralyzed at the time of discharge, the amount of after care can be considerable because of the dog's weight. If you are not able to lift your dog and you do not have someone else who can help you do so, you should discuss this situation before you opt for surgery.

What is the prognosis?

If surgery is performed at the time the dog is incoordinated, there is a fairly good chance of success. If paralysis of all four legs has occurred, the success rate is less.