

# Helping an Overweight Dog Lose Weight

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## S-O-A-P

### Subjective

**PRESENTATION:** Freddie, an 8-year-old, neutered Labrador retriever, is presented for lethargy and exercise intolerance of 3 weeks' duration.

**HISTORY:** Six months earlier at his annual wellness examination, Freddie was classified as overweight. Increased exercise and monitoring of food intake was recommended; results and recommendations from earlier wellness examinations were similar.

The client reports Freddie's pace on his walks has slowed and for the past 3 weeks he lies down after 5 minutes, unable to complete exercise. Appetite remains intact.

**MEDICATION & SOCIAL HISTORY:** Vaccinations are current. Preventives for heartworm, fleas, and ticks are given monthly. No medications are being given. There is no recent travel history. There are 2 cats and 1 other Labrador retriever in the household.

**NUTRITION HISTORY:** The patient is fed large-breed, senior dry food with no change in brand or diet since his last examination; 2 scoops (from a 56-oz fountain soda cup) are provided q8h. The patient also eats some cat food, 10 treats q24h, and some table food from children in the home. Water is offered ad libitum.

### Objective

Temperature	101°F (38.3°C)
Heart Rate	125 bpm
Respiration	35 breaths/min; active panting
Pain	Mild body tension observed; patient is restless, attempts to lie down. Score of 1.5, based on CSU Canine Pain scale <sup>1</sup>
Eyes/Ears/Nose/Throat	Grade 2 periodontal disease
Musculoskeletal	Difficult ambulation; no lameness or localized pain
Integument	Skin dry and flaky caudally; no fleas noted
BCS <sup>2</sup>	9/9
Muscle condition score (MCS) <sup>3</sup>	Mild muscle loss
Body weight (BW)	85 lbs (38.6 kg)

Remainder of the physical examination was unremarkable.

### Assessment

Obesity is noted, with resulting difficulty in ambulation, increased respiratory rate, increased pulse rate, and poor haircoat. Sarcopenia, noted as mild muscle loss, is observed in the temporal skull region and bilateral scapula. Significant periodontal disease is also present.

### Plan

The veterinarian advises an exercise regimen, makes a specific feeding recommendation using therapeutic weight-loss food, and recommends periodontal therapy after at least 3 progress examinations.

The veterinary nurse is empowered to educate the client on pet obesity and its risks while supporting, or reinforcing, the veterinarian's recommendations. Progress examinations that will include weighing the patient, performing a BCS and MCS, pain evaluation, and discussion of the exercise and nutrition plan with the veterinary nurse are scheduled every 2 weeks.

# The Takeaway

## Diagnosis

Obesity and sarcopenia, secondary to age and limited mobility

The diagnosis of grade 2 periodontal disease is also documented. The veterinarian recommends beginning the weight management program before scheduling a professional dental cleaning, as the patient's weight and affected respiratory system contribute to anesthetic risk.

## Treatment

The veterinarian recommends a goal weight of 70 lbs (31.8 kg) and, once achieved, will reevaluate the patient to determine if further weight reduction is warranted.

**THERAPEUTIC WEIGHT-LOSS FOOD:** The recommended intake is 750 kcal/day (based on an estimated 70 lbs [(31.8 kg)] target body weight), including 75 kcal/day for treats.

Target body weight = 31.8 kg

Resting energy requirement<sup>4</sup> (RER):  
RER kcal/day =  $70(\text{BW})^{3/4}$  = 937.4 kcal

Daily energy requirement<sup>5</sup> (DER):  
DER = (RER × \_\_\_ weight loss factor)  
=  $937.4 \times 0.8 = 750$  kcal/day

Treats are allowed at 10% of DER or 75 cal/day, leaving intake at 675 kcal/day for meals

\*To calculate with a basic calculator, enter:  $(\text{kg} \times \text{kg} \times \text{kg}, \sqrt{\quad}, \sqrt{\quad}) \times 70$

(See **Resources**, page 44.)

**EXERCISE REGIMEN:** The recommendation is to begin with 2-minute walks 5 times per day; after 7 days, walks should be increased to 3 minutes 5 times per day. Puzzle-feeding toys should be used for some portion of the caloric intake (ie, kibble).



**PHYSICAL REHABILITATION:** A veterinary technician specialist (physical rehabilitation) should perform passive range of motion (PROM) and balance exercises with the patient at the practice and give the client additional physical therapy exercises to be continued at home.

## Practical Considerations

The human–animal bond must be recognized. Clients should be educated on the benefits of weight loss, including the potential to extend a dog's life.<sup>6</sup> (See **Client Communication**, page 44.) Clients may also be encouraged to hear that exercising with a pet has been shown to increase the amount of exercise and weight loss for client and pet alike.<sup>7</sup> ■

**Education, patience, and support are key to managing an overweight or obese patient.**

## References

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5. Brooks D, Churchill J, Fein K, et al. 2014 AAHA weight management guidelines for dogs and cats. *J Am Anim Hosp Assoc*. 2014;50(1):1-11.
6. Kealy RD, Lawler DF, Ballam JM, et al. Effects of diet restriction on life span and age-related changes in dogs. *J Am Vet Med Assoc*. 2002;220:1315-1320.
7. Kushner RF, Blatner DJ, Jewell DE, Rudloff K. The PPET Study: people and pets exercising together. *Obesity (Silver Spring)*. 2006;14(10):1762-1770.



**KARA M. BURNS**, MS, MEd, LVT, VTS (Nutrition), is founder and president of the Academy of Veterinary Nutrition Technicians. She teaches nutrition courses around the world and is a member of many national, international, and state associations. Kara has authored many articles, textbooks, and chapters on nutrition, leadership, and veterinary nursing.

**FUN FACT:** Kara is proudly owned by Fribble the French bulldog, the best dog ever, as well as Ollie the Persian cat, the best cat ever.

## Resources

- American Animal Hospital Association. [https://www.aaha.org/public\\_documents/professional\\_guidelines/weight\\_management\\_guidelines.pdf](https://www.aaha.org/public_documents/professional_guidelines/weight_management_guidelines.pdf)
- Pet Nutrition Alliance. [PetNutritionAlliance.org](https://www.petnutritionalliance.org)
- World Small Animal Veterinary Association. [WSAVA.org](https://www.wsava.org)

## Client Communication

Education, patience, and support are key to managing an overweight or obese patient. Managing patient weight is often a very frustrating undertaking for clients and veterinary teams; however, the health of the patient, including the decreased risk for diabetes mellitus, osteoarthritis, anesthetic complications, and respiratory issues, is paramount. The veterinary team must advocate for the patient.

- **GENERAL:** Weight management programs are not one-size-fits-all.<sup>3</sup> Offer clients suggestions on ways, without food, to reward or bond with their pet (ie, dogs—going for a leash walk, playing with toys, petting the dog, verbal praise, feeding puzzles; cats—interactive toys [eg, laser pointers, feathers on a pole], feeding puzzles).
- **EXERCISE:** When exercise is restricted, PROM exercises help to improve range of motion and promote healthy joints and proprioception. Balance exercises contribute to increasing muscle mass and rebuilding core muscle strength.
- **CONDITION SCORING:** Educate the team and the client to evaluate BCS regularly. (See **Client Handout**.) Ask the client to call with a weekly score that is documented in the medical record. Involving the client empowers him or her to be part of the pet's treatment and weight management plan. Explaining why the BCS is necessary and how it aids weight monitoring, and having the owner do this at home, helps the owner accept and follow the veterinary team's recommendation. The same attention should be devoted to MCS, and although the client can do this, the veterinary team should closely monitor MCS in follow-up examinations.
- **FEEDING INSTRUCTIONS:** Recommend the appropriate weight-loss food and calculate the initial feeding amount. Consistency in feeding is critical, including feeding only from a designated dish. Introduce the concept of using an 8-ounce measuring cup for feeding. Emphasize the total energy intake and that the patient should be fed only what is in the treatment plan. Encourage clients to feed other pets separately, if possible (eg, feeding cats in an up-or-away area).
- **FOLLOW UP:** Evaluate, adjust, communicate, and encourage on a consistent basis. Be sure to celebrate weight loss, be it 0.5 or 5 pounds.

# Evaluating Your Pet's Body Condition Score

Body condition scoring (BCS) is important to assess a pet's fat stores and muscle mass. BCS combines visual assessment (from the top and side) and touch-based assessment (waist, ribs, abdominal area, tail base) to estimate fat tissue mass. Report your pet's BCS back to your veterinary practice every other week or until advised otherwise.

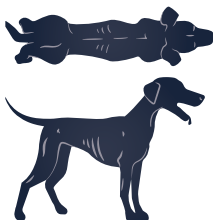
## Positioning Your Pet

To evaluate your pet's BCS, be sure the pet is standing. Begin by examining your pet's chest, then abdomen, waist, and base of the tail. Remember to view from the top and from the side. Stand close enough that you can view and touch these areas.

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## Scoring Your Pet

### Visual and Touch Assessment



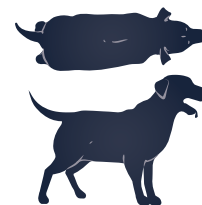
#### BCS 1-3: Very Thin, Underweight

- Visible ribs and pelvic bones
- No palpable fat
- Severe waist and abdominal tuck
- Accentuated hourglass figure



#### BCS 4-5: Ideal

- Ribs are easily felt
- Tail base is smooth
- Abdominal tuck
- Hourglass figure



#### BCS 6-9: Overweight, Obese

- Fat over ribs
- Fat on neck and limbs
- No abdominal tuck
- No waist
- Thick fat deposits at tail base

### Complementary Assessment

Your pet's BCS can be supplemented with an assessment that simply uses your own hand. You can estimate what a very thin, ideal, or obese pet feels like by examining your knuckles in 3 different positions.



#### Very Thin

Make a tight fist and run your fingers across your knuckles. This represents an underweight dog. No fat is felt, and the muscle/tissue between each rib has diminished, resulting in valleys in between the ribs.



#### Ideal

Relax your hand and run your fingers across the back of your hand around the knuckles. You should be able to feel individual bones covered with minimal fat without pushing hard. This is how a pet with an appropriate weight should feel.



#### Obese

Turn your hand over, relax your hand, and run your fingers across the palm. You will feel a thick covering similar to how an obese dog would feel when you are petting the ribs. You know there is a bone in there somewhere, but you cannot feel it.