Scoring Otitis Externa

Canine otitis externa is among the most common medical problems in dogs. Lack of an accepted, uniform scoring system of disease severity makes it difficult to compare published clinical trials.

This pilot study aimed to develop and assess an objective clinical scoring system. The Otitis Index Scores (OTIS) assessed severity and response to treatment and used 0-3 (OTIS3) and 0-5 (OTIS5) scales for assessment of erythema, edema/swelling, erosions/ulcerations, exudate, and pain. These were compared with the US2 clinical scoring system, which is used by the US Food and Drug Administration when assessing veterinary products for regulatory purposes. Other data assessed included odor, owner-perceived pain, abnormal tympanic membrane, treatment outcome, and otitis type.

The OTIS3 and OTIS5 scales had high correlation, but the OTIS3 scale was marginally superior and easier to use. The US2 scale was highly variable. Pain and pruritus did not correlate well with lesion scores. Neutrophil and microbial counts were variable and could not be used to generate cutoff points to differentiate healthy and affected ears or assess response to therapy. The authors recommended assessing the 0-3 OTIS3 for erythema, edema/swelling, erosions/ulcerations, and exudate for further validation. *Funded in part by Novartis Animal Health*

Commentary

When comparing otitis externa treatment recommendations and evaluating efficacy of new medications, having a tool for objective clinical measurement is helpful. The OTIS validated in this paper evaluates erythema, edema/ swelling, erosions/ulcers, and exudate of the external ear canal. Interestingly, the OTIS3 clinical assessments for the parameters of pain and pruritus level, odor, evaluation of the tympanic membrane, and cytology results did not necessarily differentiate a healthy ear from an affected ear or determine if an affected ear would have a successful clinical outcome. That does not mean that those parameters are not important; they are all significant when treating a patient and determining the underlying cause of infection. However, the 4 included criteria had acceptable reliability for evaluation of clinical outcome and will likely be used in future clinical research.—Darcie Kunder, VMD

Source

Nuttal T, Bensignor E. A pilot study to develop an objective clinical score for canine otitis externa. *Vet Dermatol*. 2014;25(6):530-537, e91-e92.

CARPRIEVE® CAPLETS

(carprofen)

Non-steroidal anti-inflammatory drug For oral use in dogs only

Brief Summary: Before using please consult the product insert, a summary of which

follows.
CAUTION: Federal law restricts this drug to use by or on the order of a licensed

veterinarian. INDICATIONS: For the relief of pain and inflammation associated with osteoarthritis and

for the control of postoperative pain and information associated with osceparinities and in dogs.

CONTRAINDICATIONS: Carprofen should not be used in dogs exhibiting previous hypersensitivity to carprofen.

PRECAUTIONS: As a class, cyclooxygenase inhibitory NSAIDs may be associated with gastrointestinal, renal and hepatic toxicity.

The most frequently reported effects have been gastrointestinal signs. Events involving suspected renal, hematologic, neurologic, dermatologic, and hepatic effects have also been reported. Patients at greatest risk for renal toxicity are those that are dehydrated, on concomitant diuretic therapy, or those with renal, cardiovascular, and/or hepatic dysfunction.

Carprieve[®] Caplets is not recommended for use in dogs with bleeding disorders (e.g. Von Willebrand's disease), as safety has not been established in dogs with these disorders. The safe use of Carprieve[®] Caplets in animals less than 6 weeks of age, pregnant dogs, dogs used for breeding purposes, or in lactating bitches has not been established. WARNINGS:

Keep out of reach of children. Not for human use. Consult a physician in cases of accidental ingestion by humans. For use in dogs only. Do not use in cats. All dogs should undergo a thorough history and physical examination before initiation of NSAID therapy. Appropriate laboratory tests to establish hematological and serum biochemical baseline data prior to, and periodically during, administration of any NSAID should be considered. Owners should be advised to observe for signs of potential drug toxicity (see Information for Dog Owners, Adverse Reactions, Animal Safety and Post-Approval Experience). ADVERSE REACTIONS:

During investigational studies of osteoarthritis with twice daily administration of 1 mg/lb, no clinically significant adverse reactions were reported.

Post-Approval Experience

The categories of adverse reactions are listed in decreasing order of frequency by body system.

Gastrointestinal: Vomiting, diarrhea, constipation, inappetence, melena, hematemesis, gastrointestinal ulceration, gastrointestinal bleeding, pancreatitis.

Hepatic: Inappetence, vomiting, jaundice, acute hepatic toxicity, hepatic enzyme elevation, abnormal liver function test(s), hyperbilirubinemia, bilirubinuria, hypoalbuminemia. Approximately one-fourth of hepatic reports were in Labrador Retrievers.

Neurologic: Ataxia, paresis, paralysis, seizures, vestibular signs, disorientation

Urinary: Hematuria, polyuria, polydipsia, urinary incontinence, urinary tract infection, azotemia, acute renal failure, tubular abnormalities including acute tubular necrosis, renal tubular acidosis, glucosuria.

Behavioral: Sedation, lethargy, hyperactivity, restlessness, aggressiveness.

Hematologic: Immune-mediated hemolytic anemia, immune-mediated thrombocytopenia, blood loss anemia, epistaxis.

Dermatologic: Pruritus, increased shedding, alopecia, pyotraumatic moist dermatitis (hot spots), necrotizing panniculitis/vasculitis, ventral ecchymosis.

Immunologic or hypersensitivity: Facial swelling, hives, erythema.

In rare situations, death has been associated with some of the adverse reactions listed above. To report a suspected adverse reaction call 1-866-591-5777.

Norbrook Laboratories Limited Newry, BT35 6PU, Co. Down, Northern Ireland I02 OCT 2014

