

9 Behavior Counseling

Senior Pet Behavior Problems

It is not unusual for behavior problems to develop in older pets, and often there may be multiple concurrent problems. Some of the changes associated with aging may not seem significant, but even a minor change in behavior might be indicative of underlying medical problems or a decline in cognitive function. Because early diagnosis and treatment can control or slow the progress of many disease conditions, be certain to advise your veterinarian if there is any change in your pet's behavior.

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What are some of the causes of behavior changes in senior pets?

Behavior problems in senior pets can be caused by:

- Changes in routine or home environment
- Physical problems such as illness or degenerative disease
- Senility or cognitive dysfunction

Changes in the household, changes in the environment, and new stressors can lead to problems regardless of age. For instance, moving, a change in work schedule, a family member leaving the home, or new additions to the family such as a new spouse or baby can have a dramatic impact on the pet's behavior. However, older pets are often more resistant or less able to adapt to change.

As pets age, they are susceptible to an increasing number of medical and degenerative problems. Problems with one or more organ systems may play a role in the development of a wide variety of behavior problems. For example, diabetes or diseases of the bladder, kidneys, liver, or intestines can lead to house soiling. Diseases of the endocrine organs such as the thyroid gland and pituitary gland can lead to a variety of behavioral and personality changes.

A decline in the senses (hearing and sight), painful conditions, and those that affect mobility may cause the pet to be more irritable or more fearful of approach and handling (see (3) Diagnosing a Behavior Problem – Is It Medical or Behavioral?).

As with other organs, the brain is susceptible to age-related degenerative processes that can affect the pet's behavior, personality, memory, and learning ability. When these changes occur, the pet may show varying degrees of cognition or cognitive dysfunction and in pets that are more severely affected, this might be referred to as cognitive dysfunction or senility decline (see (10) Senior Pet Cognitive Dysfunction). Many of these changes are similar to what occurs in aging humans. In fact, the amyloid deposits that are found in the brain of dogs with cognitive dysfunction are similar to what is seen in the early stages of Alzheimer's disease in people.

How can I find out why my pet's behavior has changed?

Regardless of age, every behavior case should begin with a complete veterinary physical examination and a clinical and behavioral history. In addition, blood tests and a urinalysis may be needed to rule out organ disease and endocrine imbalances, especially in the older pet. Sometimes a more in-depth examination of a particular organ system may be indicated. Additional laboratory tests, radiographs, ultrasound, spinal tests, brain scans, or perhaps a referral to a specialist may all be appropriate. A decision on which tests are needed would be based on the pet's age, previous health problems, any ongoing drug or dietary therapy, and an evaluation of all of its medical and behavioral signs and the findings of the physical exam.

My pet is quite old. Is there any point in doing these tests?

Unfortunately, many pet owners do not even discuss behavior changes with their veterinarians because they feel that the changes are a normal part of aging and perhaps nothing can be done for their dog or cat. This is far from the truth. Many problems have an underlying medical cause that can be treated or controlled with drugs, diet, or perhaps surgery. Hormonal changes associated with an underactive or overactive thyroid gland, diabetes, diseases of the pituitary gland, and testicular tumors can all lead to dramatic changes in the pet's behavior, and many of these problems can be treated or controlled. Degenerative organ systems can often be aided with nutritional supplementation or dietary changes. High blood pressure, cardiac disease, and respiratory disease may be treatable with medication that can dramatically improve the quality and even length of the pet's life. Drugs and dietary therapy that are useful in the treatment of age-related cognitive dysfunction are also available. For a more extensive list of health problems affecting behavior, see (3) Diagnosing a Behavior Problem – Is It Medical or Behavioral?

What are some things to look out for?

Some of the common things that should be reported if they develop in your pet include changes in behavior (see checklist below), an increase or decrease in appetite or drinking, an increased frequency or amount of urination, loss of urine control (dribbling urine, bed wetting), changes in stool consistency or frequency, skin and haircoat changes, lumps and bumps, mouth odor or bleeding gums, stiffness or soreness, excessive panting, coughing, changes in weight (increase or decrease), and tremors or shaking. The checklist on the next page can be used to determine if your pet has any changes that might

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need to be reported to your veterinarian. If any of these signs arise, they could indicate an underlying medical condition, a sign of stiffness or pain, a sign that your pet's senses are beginning to decline, or a sign of cognitive dysfunction (see (10) Senior Pet Cognitive Dysfunction).

As mentioned, sometimes a change in behavior is the first sign of pain, illness or degenerative disease. However, the cause and significance of these signs cannot be determined unless they are reported to the veterinarian, since many of these signs are subtle in their early stages and may only be noticed in the home environment.

Can problems be treated?

Many of the problems of senior pets can be controlled or even resolved. Early detection and intervention with drugs, diets, or supplements can control or greatly slow the progress of many disease conditions, improving the pet's quality of life and perhaps even longevity (see (10) Senior Pet Cognitive Dysfunction).

Checklist for Behavior Changes in Senior Pets

Clinical signs	Severity Mild = 1 Moderate = 2 Severe = 3	Indicate when problem first began
1. Weight: Increased ___ Decreased ___		
2. Appetite: Increased ___ Decreased ___		
3. Vomiting ___ Diarrhea ___ Constipation/Straining ___		
4. Drinking: Increased ___ Decreased ___		
5. Urination: Increased ___ Decreased ___ Straining ___		
6. Coughing ___ Weakness after exercise ___ Panting ___ If yes, describe:		
7. Lumps/Tumors ___ If yes, describe:		
8. Skin problems ___ If yes, describe:		
9. Mouth problems: Bad breath ___ Decreased chewing ___		
10. Weakness ___ Incoordination ___ Muscle tremors/Shaking ___ If yes, describe:		
11. Pain/stiffness ___ Slow rising ___ Problems climbing/jumping ___ If yes, describe:		
12. Vision changes: At night ___ During the day ___ If yes, describe: Hearing changes: Less sensitive to noise: ___ More sensitive to noise ___ If yes, describe:		

Clinical signs	Severity Mild = 1 Moderate = 2 Severe = 3	Indicate when problem first began
13. Disorientation (confusion) Gets confused or lost ___ Goes to wrong side of door ___ Gets stuck and cannot navigate around or over obstacles ___ Less responsive to stimuli (sights, sounds) ___ Does not recognize familiar people, pets, places ___		
14. Interactions (relationships) Petting or contact: Increased ___ Decreased ___ Greeting behavior: More enthusiastic ___ Decreased ___ More irritable or aggressive with family people ___ Pets ___		
15. Sleep-wake cycles Sleeps more during day ___ Restless sleep ___ Wakes at night ___ If yes, describe:		
16. House soiling – Indoor elimination Stools ___ Urine ___ Spraying/Marking (vertical) ___ Signals but no elimination ___ Does not signal anymore ___		
17. Activity: Decreased ___ Increased ___ Pacing/wandering ___ More playful/exploratory ___ Less playful/exploratory ___ Repetitive/Unusual activities (e.g., licking, staring) ___ If yes, describe:		
18. Anxiety (fears/phobias) Newly emerging fears or anxiety ___ Increased agitation/Restlessness ___ Increased vocalization ___ Separation anxiety ___ If yes, describe:		
19. Learning and memory Forgets name ___ Forgets previously learned commands ___ Decreased ability to learn new tasks ___ Decreased ability to do working tasks ___ Decreased ability to do agility ___ If yes, describe:		