



Housoiling—Dogs

Basics

OVERVIEW

- Urinating and/or defecating (having a bowel movement), as a means of eliminating or marking territory, in a location that the owner considers inappropriate

GENETICS

- Some dog breeds appear to be houstrained more easily than other dog breeds

SIGNALMENT/DESCRIPTION OF PET

Species

- Dogs

Breed Predispositions

- Potential genetic breed-related likelihood for ease of houstraining and submissive or excitement urination (“submissive urination” occurs when someone enters the room or home and the dog urinates to signal that it is insubordinate to the person; this is “normal” dog-greeting behavior and is seen especially in dogs that are shy or do not have self-confidence—unfortunately, this “normal” dog behavior is not desirable; “excitement urination” occurs when a dog gets overly excited or enthusiastic and leaves “dribbles” of urine at your feet)

Mean Age and Range

- Inappropriate elimination due to improper or incomplete houstraining primarily seen in younger dogs
- Submissive and excitement urination seen primarily in younger dogs
- Urine marking begins to be displayed as the dog reaches sexual maturity
- Housoiling is a common complaint from owners of elderly dogs

Predominant Sex

- Female dogs generally are easier to houstrain than male dogs
- Intact male dogs are more likely to urine mark than neutered male dogs and intact or spayed female dogs

SIGNS/OBSERVED CHANGES IN THE PET

- Urinating and/or defecating in inappropriate areas (according to the owners), usually inside a home
- Abnormal physical examination findings would be related to an underlying medical cause (such as urinary tract disorders) of inappropriate elimination; the urinary tract consists of the kidneys, the ureters (the tubes running from the kidneys to the bladder), the urinary bladder (that collects urine and stores it until the animal urinates), and the urethra (the tube from the bladder to the outside, through which urine flows out of the body)

CAUSES

- Causes of housoiling can be related to a primary behavioral problem or secondary to or in association with a

medical disorder

- May be associated with signs of other behavioral disorders (such as separation anxiety)
- May be associated with lack of time spent on owner's part to teach housetraining properly
- May be associated with punishment of a dog that submissively urinates, which may make the problem worse
- Determine potential triggers, via a complete behavioral history, including when, where, and how often the elimination occurs and reliability of outdoor elimination; triggers are situations or things to which the dog reacts, leading to problem behaviors
- If no abnormal physical examination findings are identified, the housesoiling is probably due to a behavioral cause

Behavioral Causes

- Lack of or incomplete housetraining
- Marking behavior
- Submissive urination
- Excitement urination
- Separation anxiety syndrome
- Cognitive dysfunction syndrome (condition in which older dog is confused, forgetful, and may lose its housetraining)
- Noise phobia
- Fear-induced
- Excessive thirst due to psychological need to drink water (known as “psychogenic polydipsia”) and excessive urination (known as “polyuria”)

Medical Causes

Degenerative Abnormalities

- Hip dysplasia/osteoarthritis/degenerative joint disease
- Kidney failure

Anatomic or Structural Abnormalities

- Ectopic ureters (condition in which one or both ureters [tube from the kidney to the bladder] insert into the bladder in an unusual location, frequently leading to dribbling of urine)

Metabolic Disease

- Incontinence (inability to control urination and/or defecation)
- Diabetes mellitus (“sugar diabetes”)
- Diabetes insipidus (“water diabetes”)
- Liver insufficiency
- Excessive production of steroids by the adrenal glands (known as “hyperadrenocorticism” or “Cushing's syndrome”)
- Inadequate production of steroids by the adrenal glands (known as “hypoadrenocorticism” or “Addison's disease”)

Cancer

- Kidney cancer
- Bladder cancer
- Other cancers causing weakness

Infectious/Inflammatory Diseases

- Urinary tract infection
- Crystals in the urine (known as “crystalluria”) in association with bladder inflammation (known as “cystitis”) or stones in the urinary tract (known as “urolithiasis”)
- Inflammatory bowel disease
- Pancreatic disease
- Intestinal parasites

RISK FACTORS

- Intact male
- Co-existing behavioral problem, such as separation anxiety

- Owners poorly informed or motivated to properly housetrain their dog

Treatment

HEALTH CARE

- Any appropriate measures to assure continued good health of the dog

ACTIVITY

- Take dog outside often to ensure that it has enough access to eliminate outside, or provide acceptable access to the outside, for example, via a dog door (if dog is trained properly)
- Increase activity level to help in the treatment of other problem behaviors, as well as to improve the dog's health

DIET

- If the dog is eliminating bowel movements inappropriately, feeding meals at specific times (as opposed to free-choice feeding) may help in maintaining the dog on a schedule of defecation
- Feeding a diet of higher caloric density may help decrease the urge to defecate as often
- Water should not be withheld from the dog

SURGERY

- Neutering an intact male dog decreases urine marking rapidly in 30% of dogs, with a gradual decline in 20% of dogs, and no change in 50% of male dogs; the results are the same regardless of the age of neutering

Medications

Medications presented in this section are intended to provide general information about possible treatment. The treatment for a particular condition may evolve as medical advances are made; therefore, the medications should not be considered as all inclusive

- If urine marking or inappropriate elimination is anxiety-induced, medications may be helpful, but only in conjunction with behavior modification
- Selective serotonin reuptake inhibitors (SSRIs) or tricyclic antidepressants/anti-anxiety medications (TCAs) may be helpful; an example of an SSRI is fluoxetine; an example of a TCA is clomipramine
- Full onset of action of these medications can be 4–6 weeks after initiation of treatment, and owners need to understand the amount of time necessary before seeing response
- Drugs are much less effective if anxiety is not part of the problem; will have negligible effect in dogs that are not housetrained or in dogs with submissive urination
- Pheromone products potentially can help decrease anxiety
- Progestins for control of urine marking are rarely recommended because of potential severe side effects

Follow-Up Care

PATIENT MONITORING

- Monitor progress with the owner through follow-up visits or telephone calls; the owner should keep a journal of incidents, inciting factors, and treatments instituted to give an objective view of improvement

PREVENTIONS AND AVOIDANCE

- Properly housetrain the dog
- Neuter male dogs and spay female dogs
- Treat any underlying medical condition
- Treat any underlying behavioral condition

POSSIBLE COMPLICATIONS

- Inappropriate elimination is the most common individual reason for relinquishment of a pet to a shelter
- Recurrence of housesoiling may happen if owner does not continue medical and behavioral treatment

EXPECTED COURSE AND PROGNOSIS

- Prognosis for any behavioral problem is highly dependent on the owner's ability to follow instructions; usually dogs with behavioral problems are not considered “cured” but instead they are “managed”

- The following estimations of prognosis are based on the owner following instructions for behavior modification:
 - ♦ Prognosis for decreasing submissive and excitement urination is good
 - ♦ Prognosis for managing incomplete housetraining is good
 - ♦ Prognosis for urine marking in previously intact male: 50% improve (30% quickly, 20% more slowly) with neutering, even without behavior modification
 - ♦ Prognosis for managing urine marking in spayed or neutered dogs is good, if the triggers are identified and managed with avoidance or other forms of behavior modification
- Some dogs with underlying medical causes of inappropriate elimination can still eliminate inappropriately after the medical cause has been treated properly

Key Points

- Proper housetraining should be stressed with clients from the very beginning
- Potential long-term management necessary to control the problem
- Treat underlying/contributing medical problems
- Treat other underlying/contributing behavioral problems
- Clean the soiled areas with an enzymatic cleaner, to help eliminate any odor that may attract the dog to eliminate in that location again; if the object soiled is a piece of clothing or other smaller cloth object (such as a throw rug), wash it
- Punishment is inappropriate, especially if the act of elimination (urination or defecation) has not been witnessed by the owner, as punishment may create anxiety, fear, and defensive aggression for the dog
- Inappropriate elimination is the most common individual reason for relinquishment of a pet to a shelter

INCOMPLETE HOUSETRAINING

- Keep the dog completely supervised at all times; if supervision is not possible, confine the dog, unless confinement causes panic, destruction, and/or injury to the dog
- Take the dog outside frequently to eliminate
- Reward the dog for eliminating at the appropriate time and place; requires the owner to go outside with the pet
- Thoroughly clean soiled areas
- Use a consistent “key phrase” to help the dog associate the act with the location and timing of elimination
- Feed on a set schedule and always have water available

SUBMISSIVE OR EXCITEMENT URINATION

- Do not punish the behavior, since this may make problem worse
- Ignore the dog when it comes into the house (no verbal or physical interactions or eye contact)
- The dog should go outside to eliminate before it is greeted by any person, including family members
- The dog should be greeted in a non-confrontational and quiet manner; do not lean over the dog or institute interactive play at the time of greeting
- Alternative activities at homecoming (such as asking for a toy or requesting a “Sit”) may help in mild cases
- For excitement urination, much the same recommendations are applicable as for submissive urination, especially concentrating on not getting the dog overexcited

URINE-MARKING BEHAVIOR

- Neutering is effective in many dogs to decrease urine marking
- Determine any possible triggers to the behavior, including anxiety-provoking stimuli
- Address those triggers with desensitization and counter-conditioning and/or avoidance of the trigger, as appropriate; triggers are situations or things to which the dog reacts, leading to problem behaviors
- Make the areas urine marked aversive to the dog by use of “booby traps,” such as upside-down plastic carpet runners or aluminum foil, or by use of remote punishment at the very beginning of each and every urine-marking episode, but only if the owner is able to catch the dog in the act of marking
- Prevent access to preferred marking locations
- Alternatively, change the significance of the area to a positive place, by feeding the dog in the area marked

Notes

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