



INTERNAL MEDICINE CASE STUDIES

Case 14: Phenobarbitone-responsive ptyalism in a 6 year old female Griffon Bruxellois

A 6 year old female Griffon Bruxellois was examined at the R(D)SVS Medicine Service with a four week history of hypersalivation, gagging, retching, vomiting, lethargy and weight loss. On clinical exam the dog was quiet and severe ptyalism was present with retching and gagging that was causing respiratory distress. Both submandibular salivary glands were enlarged and hard. Gagging and retching could be easily elicited by gentle palpation. Haematology, biochemistry, urinalysis, thoracic radiographs and FNAs of salivary glands were unremarkable. The clinical and diagnostic findings were highly suggestive of idiopathic ptyalism and so the dog was treated with phenobarbitone. The dog's attitude and demeanour quickly improved and had almost completely resolved after the third day of treatment. Phenobarbitone concentration and liver function were subsequently assessed at regular intervals.

Ptyalism (hypersialosis) can occur as a result of primary salivary gland diseases such as sialoadenitis and salivary gland infarction or from reflex stimulation of salivary gland secretion secondary to disorders such as oesophageal reflux. Phenobarbitone-responsive ptyalism is a disorder which is increasingly recognised in dogs and has been speculated to be a form of limbic epilepsy; clinicians at R(D)SVS were some of the first to describe this condition¹. Although this condition remains poorly understood, the prognosis appears to be good in most cases and in some dogs, withdrawal of phenobarbitone therapy is possible¹.

References

- ¹ Stonehewer et al (2000) Idiopathic phenobarbital-responsive hypersialosis in the dog: an unusual form of limbic epilepsy? *JSAP*. 41, 416-421