

NASAL PARAKERATOSIS IN LABRADOR – TWO CASE REPORTS

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Two Labrador dogs with hyperkeratosis of nasal planum were presented to the Teaching Veterinary Clinical Complex (City hospital), Gandhi Gunj, APMC yard Bidar without any other systemic disease condition. Both the pets were vaccinated against all the infectious diseases with regular deworming history. The present paper reports the management of nasal parakeratosis in two Labrador dogs.

Key words: Nasal Parakeratosis, Labrador, Keratin and Keratolytic agents

Nasal parakeratosis is very common dermatosis in Labrador retrievers and hereditary in nature. The dermatosis is more evident between 6 to 12 months of age. An autosomal recessive mode of inheritance is suspected for dermatosis (Hnilica, 2011). The present paper reports successful management of nasal parakeratosis in two Labrador dogs.

Case history and observations

Case 1: A one year old fawn colour female Labrador dog with regular

vaccination against all the infectious diseases was presented to the Teaching Veterinary Clinical Complex (City hospital), Gandhi Gunj, APMC yard Bidar, Karnataka with a history of dried nasal septum with accumulated keratin over the nasal plane. The lesions were non pruritic. On clinical examination, pet was apparently healthy and did not show any other abnormalities and symptoms other than accumulation of brownish dried keratinaceous debris, crusts on the nasal planum. Foot pads were normal and didn't show any signs of hyperkeratosis.



Fig.1: Scaly lesions on the fawn coloured Labrador dog

Case 2: A 7 month old black colour female Labrador dog with regular vaccination against all the infectious diseases was presented to the Teaching Veterinary Clinical Complex (City hospital), Gandhi Gunj, APMC yard Bidar, Karnataka with a history of accumulated dried crusts over the nasal plane. The

lesions were non pruritic and non painful. On clinical examination, pet was apparently healthy and doesn't show any other systemic abnormalities and symptoms other than accumulation of brownish to greyish dried keratinaceous debris, as crusts on the nasal planum. Foot pads were normal and didn't show any signs of hyperkeratosis.



Fig.2: Crusts over the nasal planum in black coloured Labrador dog



Fig.3: 50 percent reduction in the crust lesions after 4 weeks of treatment

Treatment and Discussion

In both the cases, skin coat colour was shiny and free from dandruff and alopecia. Pets were taking food and water normally. No ocular lesions were noticed in both cases. Physiological and haemato-biochemical parameters were within the normal range. Initially both the dogs were treated for zinc responsive dermatosis and administered with oral Zincovit[®] syrup for 20 days along with Bevon[®] syrup. No signs of improvement were seen. Later both the pets were kept on ointment containing salicylic acid, petroleum jelly and aloe vera twice daily and oral tapering dose of prednisolone for two weeks. After one month of treatment clinical recovery with shedding of keratin material was evident. Then treatment was discontinued. Case 1 showed complete recovery. Case 2 showed accumulation of keratinous material after one month. The above said treatment was continued with again tapering dose of oral

prednisolone with application of ointment. Owner was advised to apply the ointment over the lesions for 4 weeks. Among both the cases, case 1 showed complete recovery without clinical recurrence whereas case 2 showed clinical recurrence with 50 percent improvement seen in the condition.

No specific treatment is known for nasal parakeratosis condition. However, clinical improvement seen with topical keratolytic agent like salicylic acid ointment along with petroleum jelly and aloe vera. Oral immunosuppressive doses of prednisolone might be effective (Hnilica, 2011).

References

Hnilica, K.A., (2011). Keratinization and seborrheic disorders: In small animal dermatology - A colour atlas and therapeutic guide. 3rd ed., Elsevier saunders. Pp. 364.