



Does my anxious greyhound need medication?©

Sometimes, yes. Unfortunately, we often hear dog trainers or self-professed animal behaviourists claim that medication should only be a last resort and is akin to “using a sledgehammer to crack a walnut”. This view lacks a clarity of understanding of the role of medication in the treatment of anxiety. Behavioural medication can be the humane choice for anxious and fearful pets and can help improve their quality of life.

Many people believe that using medication for behavioural problems is inappropriate, dangerous or even an easy way out. It is none of those things. Using medication to mask problem behaviour, which is normal but perhaps annoying for owners, is of course wrong.

Pathological anxiety, extreme fear, separation distress and noise phobias are medical issues associated with abnormal neurophysiology, neuroanatomy and imbalances in neurotransmitters in the brain. Thus these conditions require an accurate diagnosis, management and medical intervention, in the same way that diabetes needs insulin or an infection may require antibiotics.

Why might a retired greyhound require medication?

Please refer to the article, [*Understanding Anxiety and Its Implications for Pet Greyhounds*](#) for more information.

Signs that your greyhound may require behavioural intervention include growling, snarling, biting, lunging at other dogs on walks, resource guarding, excessive fear, hiding, pacing, excessive panting, “sleep startle” with aggression, destruction, freezing on walks, trembling, intermittent diarrhoea, difficulties with house training or signs of separation distress. These dogs do not need more training; they have a mental health issue. The best approach is to contact a Veterinary Behaviour Consultant or Veterinary Behaviour Specialist to ensure an accurate diagnosis and to receive the most up to date and appropriate treatment options.

Do greyhounds in training have anxiety?

The short answer is yes. It is the author’s opinion that unrecognised anxiety contributes to post race distress syndromes and is a significant contributor to wastage, both before and during racing. Unfortunately, greyhounds that bark or display other kennel vices indicative of frustration and anxiety, such as chewing their bed or the wire of their cage, will spend long periods of time in barking or yard muzzles. In fact, the widespread use of such devices and “discounts for bulk orders” at on-line retailers is a clear indication that many greyhounds suffer immense distress in a training or kennel environment. Whilst they may stop the perceived problem and spare a bed worth a few dollars, they do not change the dogs underlying emotional state.

Other greyhounds may only begin to show signs of anxiety when they find themselves in a novel environment, such as a pet home. Many “non-chasers” are in fact fearful, under socialised dogs that are more worried about their environment, than chasing the lure. A chronic lack of socialisation may in part have led to the widespread reliance on live baiting as a means of getting fearful dogs to chase.



Why is anxiety common?

It is generally accepted that early socialization and habituation are vitally important for puppies. In order to be a well-adjusted canine citizen, dogs need to be exposed to a wide variety of sociable and friendly dogs and people as well as sights, sounds and smells during the critical sensitive period, i.e. before 12 weeks of age. If the industry is serious about improving rehoming rates, then this must include exposure to domestic environments; a standard that few greyhound rearing or training properties could hope to achieve.

Current practices in the greyhound lifecycle do not demonstrate an awareness of the critical importance of brain development in utero and the first few months of life.

Many greyhounds are not routinely physically handled in their first year. We know that the best time to lead train a dog is between 5- 9 weeks of age, yet the industry norm is more in the vicinity of 7 - 12 months plus.

Greyhounds invariably are not exposed to the environment that is critical to their success until after the sensitive developmental period has ended, including:

- Lead training
- Transport
- Kennelling
- Starting gate
- Race track & as importantly
- A suburban environment in preparation for anticipated retirement

This not only contributes to wastage, but can make the transition to pet less than smooth for a significant number of dogs. We would never expect guide dogs to be successful in a domestic environment if they were raised in a paddock with minimal human intervention for 12 – 15 months. In fact we would be outraged. So why do we have this unrealistic expectation of the greyhound?

When it is all said and done, and despite industry touting the introduction of socialisation programs, rehoming will remain an extremely traumatic event for many dogs.

It can be very distressing for new adopters when their pet does not fit the description of the “laid back couch potato”. The reality is that a significant number are fearful and many have anxiety. Unfortunately, bad advice based on outdated notions of dominance, punishment, blame, lack of leadership and sensitization via repeated exposure to fear inducing stimuli, only serve to compound the issue, leaving owners confused and frustrated. It may ultimately result in relinquishment of the dog.

The author recalls a scenario in which a very fearful, young greyhound jumped a fence and ran almost 2 km’s before the greyhound trainer was able to track him down. Despite being clearly distressed, the trainer claimed that the dog was out “looking for a couch”. Anthropomorphism does not help dogs get the care and treatment they need and can undermine the seriousness of the issue.



What can medications do to help?

Prevention is certainly better than cure, however the changes required must occur much earlier in the dog's life than retirement.

Medications are not used as a "quick fix". A pill cannot erase years of anxiety and a lack of early socialisation in the short term. They are only one part of an overall treatment plan, which should also involve environmental management and behavioural modification, tailored to suit the needs of the individual. The latter is not the same as training.

If we take a look at the wide variety of behavior problems in family pets, it becomes obvious that fear and anxiety play a major role. Animals will often remain fearful of, and take longer to habituate to, things they were not exposed to in the sensitive period as puppies. What you may not think is fearful may in fact be very frightening to a greyhound that has spent most of its life in a rural/kennel environment.

When an animal experiences fear, anxiety or stress the body prepares for fight or flight (or freeze and fiddle), with a subsequent release of hormones such as adrenaline and cortisol. However, continual stimulation of the release of these hormones, for example in pets with anxiety, can lead to profound health and behavioral issues.

It also prevents them from learning, regardless of how much training they receive.

Medication can help the patient to learn by reducing the patient's anxiety and the accompanying abnormal or maladaptive arousal and reactivity levels, thus enhance and facilitate learning. In order to learn at the molecular level of the brain, new proteins must be made. These proteins form the basis of the neuronal signalling pathways that lead to long term behavioural changes.

Chronically elevated glucocorticoids, whether due to an underlying behaviour problem or due to aversive training techniques, or both, will interfere with learning at the cellular level. Cortisol prevents the manufacture of neural proteins in the brain. Chronic stress can lead to shrinkage and the death of cells in the areas of the brain essential for memory and learning. Conversely, elevated cortisol leads to the reinforcement of fear in the amygdala; the brain's fight or flight centre. In the medium to long term, these changes may become irreversible. The right medication used in the right way reduces elevated cortisol and assists in the manufacture of new proteins in the brain and improves neuronal health; the exact opposite of chronic stress.

Therefore it should now be obvious why early intervention is imperative, rather than leaving it as a last resort.

Put simply, stressed pets cannot learn.

In summary, medication can aid in reducing anxiety and distress for both the pet and owner and improve their quality of life. Their judicious introduction earlier in the course of the disease may lead to the patient developing a less severe form of anxiety, ensure better treatment outcomes, and for some pets, reduce the risk of punishment, anger, relinquishment and euthanasia.

Ultimately, only if the pet's level of arousal is reduced, will it be in a position to review options and make conscious decisions as to whether a stimulus, event or encounter is positive or negative or of no consequence; a process critical to behavioral modification and long term behavioral change.



It is important to note that whilst a cure may not be possible, with understanding, management, no punishment, appropriate medication, and guidance from your behavioural veterinarian, you can help provide your special pet with a good quality of life.

It should not be obvious to anyone that your pet is on medication apart from being less anxious, fearful or reactive.

How long will my pet require medication?

This will depend on several factors such as how long your pet has had the condition, the severity of the symptoms, the ease of managing any/all environmental factors that may be contributing to the behavioral problem and the ability of the owner to implement behavioral modification, recognise and avoid triggers, and protect the pet from what makes them fearful and behavioral modification.

Generally though, it may take upwards of 6-8 weeks before effects may be seen and medication should be continued for a minimum of 6-12 months before weaning is considered. In serious cases, medication with a quicker onset of action may be necessary, for example panic.

It is worth remembering that we are attempting to rebuild a brain, a complicated and at times lengthy process.

Some pets may require medication for the remainder of their life.

In summary

The largest cause of premature death of pets in Australia is euthanasia for behavioral problems; using a drug with a very serious side effect, namely aforementioned death. In contrast, side effects associated with behavioral medications are not as common as you might think and rarely serious. How is it then that medication has become more controversial than shock collars, barking muzzles, yard muzzles, physical punishment or spraying our distressed pets in the face with water?

Just a last word on anxiety in greyhounds; sleeping a lot is a symptom of anxiety. That lazy couch potato may actually be screaming on the inside. If you have concerns, trust your instincts and ask a professional for help.