Separation Anxiety Case Studies
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Separation anxiety is commonly seen in dogs. It is treated with a combination of medication, behavior modification and environmental changes. Safety recommendations are offered as well when appropriate. Most cases of separation anxiety will require a bridging medication which will work quickly to allow the owners to leave the pet alone and also a primary medication which will be effective over time to keep the patient’s anxiety level down. Ideally, with proper behavior modification, many patients can be maintained on one medication after approximately 6 months of treatment. If the patient has concurrent behavioral diagnoses which complicate treatment, the likelihood of maintenance with one medication is decreased. Mild cases of separation anxiety may be treated effectively with a PRN medication and behavior modification alone. Moderate to severe cases or cases in which the dog is injuring herself should be treated with a bridging medication, a primary medication, behavior modification and environmental modification. Treatment should always include behavior modification and environmental modification recommendations regardless of the severity of the case.

Patient: “Harrison”
**Signalment:** 8 ½ year old, M/N, Brittany Spaniel, 19.5 kg
**Presenting complaints:** Destruction and panic when left alone
**Previous treatments:** clomipramine, 25 mg BID, diazepam, 8 mg BID, alprazolam, 2 mg before departure.
**Previous Medical History:** UTI
**Behavioral history:** Harrison had displayed mild signs of hyperattachment since he was a puppy, however when the owners moved to a new home in a new state, Harrison began destroying at the garage door and the windows when the owner’s departed. He followed the female owner around no matter where she was in the house. He has very little obedience training. He trembles and tucks his tail when there are storms or fireworks and is afraid of men with tool belts. He first becomes anxious when he sees the female owner start to shower or get dressed. The owners have attempted to confine him in a crate when they depart, sneaking out without the dog noticing, playing music and mixing up the progression of their departure routine. Treatment with clomipramine had no effect as did treatment with amitriptylline, melatonin, alprazolam or diazepam. A video brought to the appointment showed pacing, panting, crying, barking, whining beginning immediately after the owner departed. Soon after the owner departed, Harrison began scratching at the door that she exited.
**Medications at the time of presentation:** amitriptylline 25 mg BID, Melatonin 3 mg at night.
**Concurrent behavioral problems:** Fear of storms and fireworks.
**Behavioral examination:** Harrison was friendly, but fearful. He spent a lot of time climbing on the owner or hiding under her chair. He came to the appointment wearing a buckle collar and a DAP collar. He continually paced and panted during the appointment. Harrison is very food motivated.
**Laboratory tests:** CBC, serum chemistry, T4, fT4, U/A wnl
**Diagnoses:** Separation anxiety
Storm fear
Noise fear
Treatment:
Because the patient had been on amitriptylline for less than a month, it was abruptly discontinued
and Reconcile was started at a dosage of 16 mg once daily for 14 days, then 24 mg once daily
thereafter. In addition, diazepam was prescribed at a dosage of 14 mg, 1 hour prior to departure.
The following behavior modification was recommended: structured interactions,
counterconditioning to departure cues, relaxation exercises, doggie daycare, making departures
and returns low key, leaving from a different door for training sessions and use of food toys for
departures.

One week follow up: After one dosage, the owners reported that Harrison had an insatiable
appetite and he was agitated. Diazepam was discontinued and trazodone was prescribed at a
dosage of 75 mg 1 ½ hours prior to departure.

4 week follow up: Owner is able to leave the house for 30 minutes without trazodone. Using
trazodone for departures longer than 30 minutes. Harrison is still aware of their departure cues.

3 month follow up: Harrison does not panic when the owners depart without administering
trazodone as long as the departure is less than 2 hours. For longer departures, the owners still
administer trazodone. The Reconcile dosage is reduced to 16 mg.

8 month follow up: With the exception of a couple of incidents, Harrison continues to be stable.
The owners elect not to leave him for more than 2 hours without administering trazodone. He
continues to receive 16 mg of Reconcile once daily.

Discussion: In this case, serial videos were very helpful in assessing when and at which dosages
each medication should be administered. It also allowed the owner to gauge true improvement
over simply sedating the patient. Finally, this case demonstrates how behavior modification and
medications work together to produce a positive outcome.

Patient: “Zoe”
Signalment: 1 year old, F/S, Rottweiler, 26 kg
Presenting complaints: Destruction and crying in her crate, distant attitude, sad demeanor
Previous treatments: alprazolam, 1.5 mg BID-TID.
Previous medical history: Localized demodex at 9 weeks.
Behavioral history: After Zoe’s dam died, she became distant. She began destroying in her crate
and panicking when the door was closed when she was a puppy. She has fractured a canine
attempting to get out of the crate. As soon as the owner closes the crate door, she cries, pants,
paces and scratches to get out. The owner has tried giving her toys, covering her crate, moving
the crate to a window, giving her bones and putting her crate near the other dog’s crates. Zoe
reacts anxiously when she is confined to the crate when the owner is home, but it is not as severe
as when the owner departs.
Medications at the time of presentation: alprazolam, 1.5 mg BID-TID.
Concurrent behavioral problems: None.
Behavioral examination: During the appointment, Zoe paced in the room. Her ears were up and
her tail was down most of the time. She displayed dilated pupils, and was hypersensitive to
noises outside. She continued to seek attention from the owner even when she was offered treats.
Laboratory tests: CBC, serum chemistry, T4, fT4, U/A wnl
Diagnoses: Separation anxiety
Generalized anxiety
Confinement anxiety

Treatment: At the time of the appointment, Zoe was receiving alprazolam. The owner felt that this medication was helping Zoe to have a more friendly attitude and be calmer when she left so this medication was continued. In addition, Reconcile at a dosage of 8 mg once daily for 14 days, then 16 mg once daily thereafter was prescribed. Behavior modification included: sit for everything, counterconditioning to the crate, relaxation, feeding Zoe out of food toys when the owner departs, discontinuation of punishment when the owner comes home, giving her old rags and towels to destroy in the crate, rotating her toys in the crate and counterconditioning to departure cues.

One week follow up: Zoe is sitting for every interaction, but the owner is having a very difficult time getting her to lie down for the relaxation training.

Five week follow up: The owner reports that Zoe will go to her crate in the morning and settle down with her bones and food toys. She will sit in her crate when the owner is not home. Zoe is still anxious when the owner departs. Zoe’s appetite has decreased substantially. The owner was instructed to decrease the dosage of the Reconcile to 8 mg and increase the dosage of alprazolam to 2 mg BID.

12 week follow up: The owner reports that Zoe is doing very well in her crate when the owner departs. Her personality is more lovable and she seems “happier.” She is able to lie down and relax away from the owner and doesn’t follow her around as much anymore.

One year follow up: Zoe’s behavior remains stable. She has not had any relapses. The owner requested a weaning schedule for the Reconcile. The owner was advised to decrease the Reconcile in the following manner: 4 mg once daily for 14 days, then 2 mg once daily for 14 days, then discontinue.

Fourteen month follow up: The owner reports that once the Reconcile was reduced below 8 mg, Zoe became apathetic again and began showings signs of stress in her crate when the owner departed. Treatment with Reconcile, 8 mg once daily was again instituted.

Two year follow up: Zoe continues to be stable. She continues to receive Reconcile, 8 mg once daily and alprazolam, 2 mg BID.

Discussion: What is interesting about this case is the response of the dog to a below maintenance dosage of the medication. While dosages within 1-2 mg/kg are known to be effective, in this author’s experience, some dogs respond to lower dosages with positive outcomes. In this case, unlike the first case (Harrison), the owner was not as diligent with the behavior modification and the outcome was still positive.