SEBACEOUS ADENITIS

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A. Etiology

1. Unknown
2. May be an immune mediated disease
3. May be a genetically inherited defect – autosomal recessive trait.
4. Keratinization abnormality with obstruction of sebaceous duct?
5. Abnormality in sebaceous lipids?

B. Clinical features - 2 forms

1. Sebaceous Adenitis with Hyperkeratosis – Long Coated Breeds
   a. Seen in all color variants of standard poodles (may be similar in other long-coated breeds of dogs such as Samoyeds and Akitas).
   b. A symmetrical partial alopecia and excess scaling with follicular casts. Remaining hair is dull and brittle.
   c. Affects dorsal planum of the nose, top of head, dorsal neck and trunk, tail and pinnae.
   d. Non-pruritic and no offensive odor
   e. May develop secondary bacterial folliculitis with pruritus.
   f. Hair may become straight and lose its “curl”.

2. Granulomatous Sebaceous Adenitis – Short Coated Breeds
a. Affects short-coated breeds of dogs - Vizslas, Weimaraners
b. Begins as a moth-eaten alopecia with minimal to no scaling.
c. Primarily affects the trunk, head and ears.
d. Non-pruritic

C. Diagnosis

1. Histopathology
   a. Initial nodular granulomatous to pyogranulomatous inflammation at the level of the sebaceous glands.
   b. Depending on the type, there may or may not be prominent hyperkeratosis.
   c. Chronic cases develop a complete loss of sebaceous glands with fibrosis, atrophy of hair follicles and in some cases complete loss of the adnexa with fibrosis.

D. Treatment

1. Propylene glycol - a hygroscopic lipid solvent that penetrates the horny layer and increases water content. 50-75% propylene glycol with water-applied daily as a spray.

2. Bath Oil Treatments (light mineral oil) – 50:50 mixture of bath oil and water, spray over the entire body, rub into the hair coat well, allow to soak for 1-2 hours. Remove oil by bathing with dish soap 2-3 times, and then finish with a moisturizing shampoo and conditioner/crème rinse for the final bathing. Repeat q 7 days for the first month, the q 14-30 days prn.

2. EFA Supplement - Derm Caps ES - 1 capsule BID; Evening Primrose Oil (EPO) - 500 mg BID.

3. Anti-seborrheic shampoos, conditioners and emollients have been of little benefit.

4. Treat secondary pyoderma if present.
5. Isotretinoin (Accutane®) - 1 mg/kg SID-BID.
6. Acetretin (Soriatane®) - 1 mg/kg SID-BID
7. Cyclosporine (Neoral, Gengraf, Atopica) - 5 mg/kg BID.
8. Retinol (Vitamin A) – 8,000-20,000 IU – SID-BID

E. Prognosis

1. Akitas – tends to be more severe, chronic recurrent pyoderma more of a problem, possible signs of systemic illness.

2. Standard Poodles – aesthetic disease, secondary pyoderma rare, difficult to regrow “normal” hair coat.