

Inflammatory Bowel Disease (IBD)

IBD er en engelsk forkortelse for Inflammatory Bowel Disease. Det dækker over en gruppe af sygdomme der har det til fælles, at dyret får tarmbetændelse uden kendt årsag. Fælles for sygdommene er, at tarmvæggen infiltreres af betændelse celler. Lidelserne grupperes efter hvilke celler, der har invaderet tarmvæggen, samt i hvilket tarmafsnit sygdomsprocessen foregår.

Symptomerne er opkast, diarre luft i maven og evt. mavesmerter.

Diagnosen kan være særdeles vanskelig at stille, idet symptomerne ligner en almindelige mave/tarm infektion, og dyrlægen vil altid først behandle en sådan.

Hvis sygdommen fortsætter på trods af behandlingen, vil mistanken om IBD komme. For at bevise dette skal først alle andre årsager til mavetarm lidelser udelukkes, og derefter tages der prøver (biopsier) fra de syge tarmafsnit. Først når en ekspert har set på celleprøverne og konstateret en infiltration med betændelses celler, som ikke kan forklares på anden vis, henføres sygdommen som IBD.

Behandlingen er meget varierende fra patient til patient men indeholder ofte følgende elementer:

- Diæt fodring
- Medicin der regulerer immunsystemet (binyrebarkhormon)
- Antibiotika i kortere eller længere tid
- Medicin der normaliserer tarmbevægelse
- Mælkesyrebakterier der hjælper med at normalisere tarmfloraen

Årsagen til sygdommen er som sagt ukendt, men det formodes, at der er et utal af medvirkende faktorer: Fejl i immunsystemet, arvelig disponering, allergi, infektioner, parasitter med meget mere.

Visse hunderacer er mere udsat for sygdommen end andre. Således ses det oftest hos boxer fransk bulldog basenji og lundehund.

Sygdommen er kronisk og selv med optimal behandling vil man kunne se tilbagefald, og behandlingen skal evt. justeres efter symptomerne.

Fra PWDCA

Inflammatory Bowel Disease (IBD)

Currently, the cause of canine IBD is unknown, but is believed to have an autoimmune basis. Genetics, nutrition, infectious agents and abnormalities of the immune system can all be underlying factors. There are several forms of IBD, which are determined by the type of cell causing the inflammation. The most common is Lymphocytic-Plasmacytic, second most common is Eosinophilic, a rare form known as Regional Granulomatous, and Suppurative or Neutrophilic. Symptoms can include chronic diarrhea, vomiting, bloody stools, abdominal pain, and weight loss. There currently is no cure for IBD. However, strict diet changes and anti-inflammatory drugs will help in the control and stabilization of the dog. Early detection is of the utmost importance and can be very difficult because the symptoms can mimic other diseases. A positive diagnosis usually occurs after performing an endoscopy exam with biopsy.

How the PWDCA is dealing with this:

IBD can be life threatening or fatal if left unattended. In the past several years, there have been more cases of IBD diagnosed in the Portuguese Water Dog, than in prior years. There also may be a genetic connection to IBD.

Current Status (as of November 1, 2001):

Because of the Georgie Project findings with Addison's disease (another autoimmune disease), their scientists speculated that the same autoimmune gene might be implicated in IBD. Using the IBD database of the participating IBD dogs, they found that five of the IBD affected dogs were already part of the Georgie Project and had been genotyped. Examination of the DNA marker that identifies immune involvement in Addison's demonstrated that the allele marker associated with increased risk of Addison's was only present in one of these five dogs. The fact that the allele of the autoimmune marker was not found in the other four dogs led to the conclusion that this same immune gene could not be involved in both Addison's and IBD. Using blood samples submitted by other IBD dogs, they confirmed this conclusion.

However, there appeared to be another allele of this same DNA marker present in all five dogs already in the Georgie Project. Other data from the IBD database also pointed to this allele being involved in IBD. Because this allele of the DNA marker is much less frequent in the PWD population than the Addison allele, the Utah group hoped it could be used to screen for dogs at risk with IBD. Further genotyping of affected IBD dogs was necessary to confirm that this allele was indeed required for IBD. Unfortunately, results using DNA from the blood of additional IBD dogs (received during the last four weeks as a result of our committee's request) did not confirm the role of this new allele in IBD.

They are nevertheless convinced that there must be a genetic cause of IBD and are preparing to widen their search to include other possible genes. This research is very important to the future of our PWDs. To further the search for the other markers linked to IBD, our committee continues to work with the Georgie Project requesting participation of any newly diagnosed IBD dogs. Because of this new research, each participating IBD dog will be genotyped for all 500 of the available DNA markers