

# LIVING WITH DRY-EYED WESTIES

Written by Mary Martha Young



TS, MacDuff and Duncan

May 1, 2013

Duncan, a wonderful Westie who lived fifteen and a half years, provided my introduction to ["dry eye"](#) when he was eight years old. He was one of two Westies who lived with his companion, T.S., and me. They shared a big yard in North Carolina accessed by a deck from the house. Duncan stopped coming up the stairs to the deck on occasion so our vet X-rayed him and nothing appeared to be wrong with his legs or back. His regular vet referred him to the North Carolina State Veterinary School for evaluation. I recall dropping him off on the way to work and thinking it would be a short appointment since they wanted him all day. The student assigned to his case kept going over him from stern to stern and I almost mentioned that his back end was sitting on the ground, not his head, when she started on his eyes. At which point she looked at me and said "Do you know that Duncan is going blind?" After explaining to me that his tear production had stopped and that his eyes had developed ulcers, the reassuring news came: it was not too late to scrape his cornea and allow the layer to reform. Daily medication would also be needed.

We started the process and it took several scraping treatments before the layer was smooth. Duncan bumped into furniture and walls during this time and had to be carried up and down stairs. He had fooled me by following close behind T.S. when they went in and out of the house. T.S. was the more athletic of the two and eventually Duncan could not see well enough to stay close enough to climb the stairs in T.S.'s paw steps. Many Westie owners think "more is better than one" and could miss this first sign of trouble.

The medication sequence that Duncan was prescribed is fairly typical. We began with a saline solution to wash his eyes out each morning followed by drops of cyclosporine dissolved in avocado oil formulated by the vet school. The next group that Duncan met at the NC State Vet School was dermatology. He was allergic to the avocado oil and big, black, scabby patches developed around both eyes -- sort of reverse panda in appearance. They consulted with his ophthalmologists and switched him to a cream-based cyclosporine ointment. It was less concentrated but still worked for him. Placing a strip of ointment on the eye was a level of difficulty higher than putting in drops, but he was quite cooperative.

Over the next seven years, his treatments became more aggressive. Eventually we increased the regimen to twice a day for the ointment and added a triple antibiotic ointment at night. He had started sleeping with his eyes partly open so his eyes needed the protection. At fifteen and a half, Duncan did not have great eyesight but he certainly could see well enough to go about living a high quality life until he died.

Duncan was hospitalized a few times in his last three years for pancreatitis and other illnesses. Vets do not always carry these specialized eye medications so it is important to take the medications with you if you expect to leave a dry eye Westie overnight. Provide written directions for application as some technicians will not have treated a patient with dry eye before. Once I had to make two round trips between San Francisco and San Leandro because I had forgotten Duncan's eye meds. Even if the specialists have the medications on hand, it will be a more costly hospitalization if you have to repurchase them.

After Duncan died, someone with [Westie Rescue of Northern California](#) heard that I had lost my dear Duncan. They told someone else who knew about a couple of Westies who were looking for a home. Gail Krieger was fostering a darling girl who was rescued from the shelter in Martinez and there was another girl in the Carmel area looking for a new Mom. Both of these Westies had dry eye disease.



Annie and Tessa

My experience with Duncan was very helpful since I fell in love with them and had no doubt that I could handle their eye problems. Tessa came first and had eye discharge and obvious vision problems. Annie arrived four days later and her eye discharge was worse than any I had ever seen.

I took both girls to see Duncan's ophthalmologist, Dr. Cynthia Cook, at [Veterinary Vision](#). I expected that she would start the scraping procedure and they would recover nicely, an optimistic belief on my part. Dr. Cook explained that their disease had not been caught in the early stages and their eyes were deeply scarred. Treatment would be medication only and some improvement could be expected but not dramatic improvement. Since May she has seen Tessa and Annie several times. We started out with the saline flushing. I was able to clean Tessa's eyes adequately but had to go back for further training for Annie. Her eye "gunk" was green and sticky and resistant to normal flushing. Dr. Cook literally flooded her eyes for minutes to get them clear enough for medication. It was the difference between hosing off the sidewalk with the hose and using one of the attachments to increase pressure and velocity. I used bottles and bottles of saline solution until finally her eyes started producing enough tears to preclude production of discharge. With Tessa it required about a month and Annie took about three months to return to that bright-eyed, brown-eyed Westie look. We use the cyclosporine in oil solution and also the triple antibiotic cream that I used with Duncan. Dr. Cook added a prednisolone solution after about a month and a half which significantly improved Annie's progress. She decided I should use it for Tessa too.

Tessa began producing tears and could see as well as Duncan could in his later years. Annie could see about a foot when she arrived. She was a very needy dog and wanted to be with me all the time. I had to put my hand a foot in front of her face to coax her to come (she was totally deaf) in the beginning. Soon she followed my progress around a large room. As with all new

pets, I learned new things regularly. Unbeknownst to me, Annie liked to bark at and chase bikes. Last week she was sitting on the sidewalk helping me sweep leaves when she barked at a cyclist and gave chase. A Mom has never been so proud of "bad dog" behavior. The cyclist was at least 15-20 feet away and Annie not only saw "something," she knew what she saw and acted like all good Westies with trigger points. Needless to say, her days as sweeping assistant ended that day and I began to make it a practice to avoid kids on bikes on the sidewalk when walking her. All of this good news came with lots of attention paid to what Dr. Cook recommends. Duncan had trained me well for these girls but taking care of him was much less work. Annie and Tessa got eye wash, prednisolone solution, cyclosporine in an oily ointment and Optimmune, a creamy ointment THREE times a day, every day, seven days a week for the rest of their lives.

The technical term for "dry eye" is Keratoconjunctivitis and some Westie owners may be tempted to assume that the condition is similar to a human whose eyes feel "dry." In our human case, adding saline solution does the trick and our eyes feel better. For a Westie with dry eye, the saline only lasts for seconds and then your dog is in pain and could lose their vision without using the medications. Most importantly, after I experienced Annie's and Tessa's more advanced disease, I realized that my next two Westies, Phoenix and Skyrin, were nine years old and they had never been tested. I took them immediately to the regular vet and they both have excellent--ABOVE average--tear production. The test is real easy--the vet places a paper wick in the bottom eyelid and measures the distance the tears travel up the wick in a given time interval.

All Westie owners should make the tear production test a regular part of your dog's annual checkup. Start early enough, 6 or 7 years old, to get a good baseline tear production value and it will be easy for your vet to see changes. If your Westie starts to develop "dry eye" there will be time to reverse the disease before regular treatments become your only option. Also, there are surgical means to replace the tear ducts that can be used in younger dogs. The earlier the diagnosis, the fewer treatments per day will be needed to keep those bright eyes seeing you, and all those other critters of interest, as your Westie becomes a respected senior citizen.

Annie demonstrated the lowest tear production of any of my dry-eyed Westies and showed marked improvement in a year with the medication regimen. A year later her checkup showed only 3-7 millimeters of tear flow and Dr. Cook prescribed a new drug for her (Tacrolimus 0.02 % solution added last in the sequence); her eyes appeared to get clearer in a few weeks and discharge disappeared altogether. The positive results were confirmed when she was rechecked two months later and I saved the wicks showing 12-20 millimeters. Dr. Cook was ecstatic and renamed her "Double-Digit Annie." Her eyesight significantly improved to seeing me when I was 40-50 feet away. It was such a pleasure to see her look around for me and then make a mad dash in the correct direction from that distance.

As of this writing, I have yet another Westie with "dry eye." I was asked by Westie Rescue of Northern California to be a Foster home for a 3 month old puppy named Dixie who was surrendered. They told me I was asked since I used to volunteer with the San Francisco SPCA Hearing Dog Program and assisted with training our dogs to answer the door and alert for events of importance like a smoke detector sounding. After losing my dear Annie and Skyrin within two months at the end of 2005, I donated all of my things "dog" to the SPCA and kept the two original crates belonging to Duncan and T.S. in case the SF Bay Westie Club needed Fosters. I took little Dixie in February of 2006 as a Foster. After three weeks I was head over heels in love with her and asked the Rescue if they had a permanent home for her. They said they did and then said "That would be you, crazy lady, who thought she could live without a Westie." Then I called them in a week and asked if they might have a boy available as Dixie was the most active puppy

in the land and she needed a playmate. And sure enough, along came Dudley who had also been an ill-advised Christmas present in 2005. And he too was 3 months old.



My vets at VCA San Francisco Veterinary Specialists were so pleased that I took their advice of one word when I lost Annie and Skyrin: "PUPPY!" I could not wait to show them off as my new family members and of course realize now that no matter what, I will always have a Westie or two and always from the club Rescue Program.

That Rescue is my new vocation as I was given Westie Rescue of Northern California as my responsibility from the SFBWHWTC Board of Directors when Sandy Gilmer and Pam Evans decided to retire from duty in 2011 after 12 and 23 years of service, respectively.

It only took Dixie THREE YEARS to develop the dreaded Westie "dry eye" condition so off we went to see Dr. Cynthia Cook of [Veterinary Vision](#) again. If I had not had the aforementioned three Westies with this disease, Dixie could clearly have missed the critical early diagnosis since she was very young to have developed this condition. She also would have been more like Annie and Tessa than Duncan, since her treatment has started with the conventional and moved on to new medications. The constant is Neo-Poly-Dex antibiotic ointment or aqueous solution which is still prescribed for this disease but many dogs are quite comfortable with the addition of only the cream Optimune ointment. Dixie quickly moved on to the 0.02% Tacrolimus and then on again to a more concentrated 0.03% solution which is prepared by a formulation pharmacy for Dr. Cook. And just this past checkup she was switched to a 0.03% aqueous Tacrolimus solution that must be stored in a refrigerator. I had noted that she stopped being under control before the other Tacrolimus should have actually expired so they got the new cold storage version. She has also developed eye infections off and on in the past four years (she is 7!) that needed oral antibiotic treatment in addition to the Neo-Poly-Dex solution and Tacrolimus. Since she is seen every six months at [Veterinary Vision](#), a very serious retinal blistering was observed and treated. The blisters were reduced to lesions using an aggressive Prednisone treatment. I was told she would likely go blind but she only experiences night blindness and is still very much on rodent and bicycle patrol from her window. When she is taken out for bathroom breaks after dark I use a flashlight and gently steer her to the door with her shoulders.

The good news is, the science is keeping up with this condition and treatments are being added and are still being invented to treat Keratoconjunctivitis. My advice has changed from including a tear production test in the annual wellness exam to having tear production checked whenever eye discharge of any color or consistency is observed regardless of age. Dudley goes once a year since Dixie was diagnosed and it is covered by my Pet Insurance.

I have had several Westies that I have rescued in the past two years who came with dry eye and some were being treated and others were not. Many vets are unfamiliar with the frequency of occurrence in Westies so do not hesitate to go to a Board Certified Ophthalmologist. And [Veterinary Vision](#) has assisted me by seeing some of these Westies at a discount for our Rescue which is enormously appreciated. Veterinary costs are far and away our highest expense when rescuing these precious beings that need a new (or first!) forever home.