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HOUSE-SOILING: ELIMINATION PROBLEMS IN DOGS

Why is my dog soiling the house?

There are numerous reasons that a dog might soil the house with urine and/or stools. Determining the specific reason is essential for developing a treatment program. Dogs that soil the home continuously or intermittently from the time they were first obtained may not have been properly house-trained,

Dogs that have been previously house-trained, may begin to soil the home for medical reasons or behavioral reasons. Assuming medical causes can be ruled out (see below), some of the behavioral causes can be a change in owner schedule, a change in housing or any change in the pet's home that might lead to anxiety. For example, if you leave the dog alone for longer than the dog is accustomed, or significantly change the daily schedule or routine, your dog may begin to house-soil. Dogs that are exhibiting an increase in anxiety may begin to urinate in the home, due primarily to a loss of control when anxious and not due to spite. Dogs that exhibit separation anxiety may soil the home, and require an intensive retraining program.

Why am I finding urination on upright objects?

Marking is urination on upright objects. It is most likely to occur on or near the odors, especially the urine, left by other dogs. The volume of urine is usually small. The problem is much more common in intact males, but some neutered males and spayed females will mark. Dogs may mark territory for a number of reasons including mate hormonal influences, other dogs entering the property, moving to a new household or getting new furniture, or as a response to increased stress or anxiety.

Why does my dog urinate when he meets new people on coming home?

Two specific types of house-soiling, submissive and excitement urination, differ from most other forms of house soiling in that the dog has little control over its elimination. Submissive urination occurs when a person approaches, reaches out, stands over or attempts to physically punish it. The dog not only urinates but may show other signs of submission such as ears back, retraction of lips, avoidance of eye contact, and cowering. Although this problem can be seen in dogs of any age, submissive urination is most commonly seen in puppies and young female dogs. Owner intervention in the form of verbal reprimands or punishment, only serve to aggravate the problem by making the dog act more submissive which leads to further urination. Excitement urination is similar to submissive urination except the stimuli that lead to elimination are those that lead to excitement, particularly greeting and giving affection to the dog. These dogs may also be overly submissive, but not necessarily.

What medical problems could cause my dog to house-soil?

There are numerous medical problems that could cause or contribute to house-soiling, and these become increasingly more common as the dog ages. Medical problems that cause an increased frequency of urination as bladder infections, bladder stones or crystals, or bladder tumors, those that cause a decrease in control or mobility such as neurological deterioration or arthritis, and those that cause an increase in urine volume (amount) such as kidney disease, liver disease, diabetes, or Cushing's disease could all contribute to indoor elimination. Certain drugs such as steroids may also cause a dog to drink more and therefore urinate more. For dogs that defecate in the house, any condition that leads to more frequent defecation such as colitis, those that cause an increased volume of stool such as problems with absorption or lack of digestive enzymes, and those that affect the dog's mobility or control such as arthritis or neurological deterioration must be ruled out. As dogs age, cognitive brain function decline, could also contribute to indoor elimination.

How can the cause of house-soiling be determined?

For dogs that are house-soiling a physical examination and medical history are first required. For most cases a urinalysis and general blood profile will also be needed, and additional tests such as radiographs and contrast studies may be indicated based on the results. If there is any abnormality in elimination frequency or amount, stool color or consistency or urine odor, more comprehensive laboratory tests may be necessary. Once medical problems have been ruled out, it will then be necessary to determine if your dog was ever completely house-trained, whether there were changes in the pet's household or schedule at the time the problem started, whether the dog is marking or eliminating on horizontal surfaces, whether or not the pet is exhibiting anxiety when the owners leave or when it is locked in its confinement area, and whether there is any evidence of submissive or excitement urination.

How can house-soiling be treated?

Training techniques for house-soiling dogs are virtually identical to those needed to housetrain a new puppy. However, even if house-soiling dogs are retrained to eliminate outdoors, indoor sites may continue to be used, since the odor, substrate, and learned habit may continue to attract the dog back to the location. In addition, dogs that eliminate indoors are in essence, reinforcing a self rewarding behavior since they relieve themselves and do not perceive that the area they have used is inappropriate.

The key to effective housetraining is constant supervision. Prevent access to indoor elimination sites. Mildly correct the pet if it is eliminating in an inappropriate location. Redirect the dog to appropriate areas at times when elimination is necessary. Reinforce the acceptable behavior with lavish praise or food rewards when the dog eliminates in the designated area. If a word cue is used prior to each elimination-reward sequence, the dog may soon learn to eliminate on command. If you have trouble keeping the dog in sight leave a remote indoor leash attached to the dog. This leash can also be used to deter any elimination or preelimination behaviors (such as sniffing, circling or

squatting) in the act and to direct the dog to the appropriate area without delay. Whenever you are not available to supervise, the dog should be housed in either a confinement area where it does not eliminate (such as a bedroom, crate, or pen), or in an area where elimination is allowed (such as a dog run, papered pen or room, or outdoors).

Your dog must never be allowed access to indoor sites where it has previously eliminated unless you are there to supervise. Access to these areas can be denied by closing doors, putting up barricades or booby trapping the areas. Odors that might attract the pet back to the area can be reduced or removed with commercial odor counteractants. Be certain to use a sufficient amount of the odor eliminator to reach everywhere that the urine has soaked into. The appeal of the substrate can be reduced by changing the surface covering (a plastic runner with nubs up, taking up the carpet, or electronic mats).

Feeding schedules can be regulated to improve owner control over the situation. After a dog eats, it will usually need to eliminate in 15-30 minutes. Dogs that eat free-choice often need to relieve themselves at a variety of times throughout the day. Dogs that eat one or two scheduled meals each day often void in a more predictable manner. Feeding a low-residue diet may also be of benefit because the dog often has less urgency to defecate and produces less stool. The dog that eliminates in its crate poses special problems. In these cases, crates and cages may not be the ideal training aid. Since the purpose of the crate is to provide a safe, comfortable area for the dog to "curl up and relax", it is not appropriate for dogs that are anxious about entering or staying in their crate. While this can be overcome with training techniques, it may be better to confine these dogs to a small room such as a laundry room or kitchen where the dog is fed, or a bedroom where the dog sleeps.

If the dog has reduced control due to its physical health, scheduling changes may need to be made. Some owners may be able to arrange their schedules so that more frequent trips to the elimination area can be provided. Alternatively a dog walker, or doggy day care, may need to be considered. If the owner cannot accommodate the dog's decreased control, installing a doggy door, or providing a papered area may be necessary.

When age related cognitive decline is suspected, a drug trial with l-deprenyl may be useful in conjunction with retraining techniques.

How can separation anxiety be treated?

To try and differentiate house-soiling from separation anxiety, it may be necessary for the owner to keep records of when the elimination occurs. If the elimination takes place when the owner is gone, or the dog is prevented from being near the owner, separation anxiety should be considered. If the house-soiling dog exhibits separation anxiety, treatment should be directed not only at re-establishing proper elimination habits (see above), but also at the underlying separation anxiety. Drug therapy may be useful in those cases where anxiety is a contributing factor. It should be noted that punishment at homecoming is not only useless for correcting a problem that has occurred during the

owner's absence, but also serves to add to the pet's anxiety during future departures and homecomings.

How can submissive and excitement urination be treated?

For submissive urination, it is important that the owner and all visitors interact with the pet in a less dominant or threatening manner. The pet should be allowed to approach the owner. Kneeling down and speaking softly, rather than standing over the dog and petting the chest instead of the head, may help reduce submissive responses. Physical punishment and even the mildest verbal reprimands must be avoided. In fact, owners who attempt to punish the pet for urinating submissively will make things worse, since this intensifies fearful and submissive behavior. When greeting a very submissive dog, the owner may initially need to completely ignore it at greeting, even to the extent of avoiding eye contact. Counter-conditioning can be very helpful in controlling submissive urination. The dog is taught to perform a behavior that is not compatible with urinating, such as sitting for food or retrieving a toy when it greets someone. If the dog anticipates food or ball playing at each greeting, it is less likely to eliminate.

For excitement urination, those stimuli that initiate the behavior should be avoided. During greetings, owners and guests should refrain from eye contact, and verbal or physical contact until the pet calms down. Greetings should be very low key and words spoken in a low, calm tone. Counter-conditioning, distraction techniques and drug therapy might be useful. Caution must be taken to only reward appropriate competing behaviors (e.g. sit up and beg, go lie on your mat, retrieving a ball). Inappropriate use or timing of rewards might further excite the dog and serve as a reward for the excitement urination.

The use of drugs to increase bladder sphincter tone might also be considered as an adjunct to behavior therapy, for refractory cases.

Another important aspect of treating over-excitement to visitors, is repeated presentations of the stimulus so that the dog learns the correct response. If visitors come only infrequently, the dog does not have the opportunity to learn a new behavior. By scheduling visitors to come, visit briefly, then leave by another door and re-enter, the dog may learn to be less excited and/or submissive with each entrance. Each time the person returns they are more familiar and less likely to stimulate the urination behavior. This allows the dog to "practice" the good behavior and reinforce the appropriate response.

How can marking be treated?

Neutering will eliminate male marking behavior in over 50% of dogs and is also recommended for female dogs that mark during estrus. Confining the pet so that it is unable to watch other dogs through windows in the home may be helpful. Urine residue must be removed from around doors, windows or other areas where stray dogs have been marking. The owner should give rewards to reinforce marking at outdoor sites where marking is permitted and marking should not be permitted anywhere else. New upright objects that are brought into the home should not be placed on the floor until the

pet is familiar with them. During retraining, the owner must closely supervise the pet and when it cannot be supervised it should be confined to its crate or bedroom area, away from areas that have been previously marked. It might also be possible to booby trap those areas that the pet might mark. If anxiety is an underlying factor in the marking behavior, then treatment of the anxiety with desensitization and counter-conditioning may also be helpful.