

## **The Two Ends of the Dermatology Spectrum Which ALWAYS WORK.**

### **Roid-abiotics:**

At the most basic level, almost all skin cases **can** be managed by *Steroids and Antibiotics*. There are very few cases that wouldn't stop itching and heal' on Prednisone (or a Prednisone shot called Depo Medrol) and some antibiotics. That's how we did it in the eighties. A dog would come in and we could turn out a happy owner and dog with a "*Depo and some Clavamox*" but also, witness them suffer between cycles of meds, or keep them on that pair of meds 24x7x365 and watch them slowly deteriorate in other health-areas. But it really worked. And some vets still do that as a matter of reflex or habit.

It's not fancy and it hurts them in the long-long run but *it really works 99% of the time.*

-OR-

### **Dermat-ALL-ogist\*.**

(Specialist who ends up employing ALL treatment modalities together in ALLmost ALL cases.) If history is any indicator, Dermat-ALL-ogists will avoid steroids but put your dog on *everything* else to treat literally, everything else. I'm not kidding. The last two cases came home with a \$1700 bill for allergy-testing, skin cultures and biopsies and then "just in case" treatments for literally **EVERYTHING** that can go wrong in the dog's skin, from infection to ringworm, to food allergy, to mites to atopy. Basically the whole pharmacy and a special diet, MINUS steroids. What was the point of all that testing if you're going to start ALL medicines anyway?

1. *Cytopoint **AND/OR** Apoquel*
2. *Antibiotics for perpetuity*
3. *Antihistamines for perpetuity*
4. *Ivermectin based anti-mite treatments for perpetuity (Bravecto or similar)*
5. *Hypoallergenic / limited antigen / hydrolyzed-protein food for perpetuity*
6. *Antimicrobial and antifungal baths at a high frequency for perpetuity*

*I can do this, instead of referral if it appeals*, but it's an **expensive**, scorched-earth approach which requires zero skill. But works. *At least* you won't have to pay a top-dollar dermat-ALL-ogist to prescribe and supply all these medicines.

No 'cause' is specifically found, and great expense goes into treating a dog for literally everything, **never knowing what part of the care you can stop.**

\*I am NOT belittling Dermatologists - They know more about skin than I know about the entirety of Vet Medicine, but it doesn't always translate into a novel or minimalistic approach to cases.

And I can do EITHER one or something in the middle.

### **What I Normally Do**

We can address the symptom with as *little* medicine as possible, using moisturizers, wet washcloths, baby wipes, nutritional modifications, and non-steroidal approaches and minimizing the use and impact of antibiotics. This is my normal approach, it's cheaper, but it's a little labor-intensive, and might involve some itching that persists despite your efforts. At least at first.

But *most* people are naturally 'results oriented' and want suppression of symptoms RIGHT NOW and they're alright with the considerable expense (Dermat-ALL-ogist panel) of meds, or 'Roidabiotics', with those side effects 12 months from now using certain medicines in *that* admittedly effective regime.