



Chronically itchy skin, recurrent ear infections, hot spots? Your pet may be suffering from skin allergies. Diagnosis can be tricky, as skin allergies often look identical to ringworm or parasitic infections (e.g., mange, flea infestation), and the inflammation can result in secondary bacterial or fungal infections. While skin allergies cannot be cured, most cases can be well-managed with supplements and medications, and pets with allergies can lead very normal and comfortable lives.

The two most common causes of skin allergies in pets are:

Atopic dermatitis: Majority of cases

Causes: Inherited allergies to pollens, dust mites, molds, etc. Can be seasonal (e.g., pollen) or year-round (e.g., dust mites).

What Next? A veterinary dermatologist may perform an intradermal skin test on your pet to create an “allergy vaccine”—an injection containing tiny amounts of the allergens. Not all pets improve with this treatment, however, and some react to too many allergens to create an effective vaccine. For most AD cases, symptomatic treatment is key for keeping your pet comfortable.

Food allergies: Only about 10% of cases

Causes: Commonly chicken, beef, corn, wheat—but almost any food can become a cause at any time.

What Next? “Food elimination trial” for 6 to 8 weeks, where only hydrolyzed diets or a novel protein plus a novel carbohydrate is fed. *NO other treats or foods are allowed during the trial.* If the itching and skin infection resolves, we add a “challenge” by feeding the original diet. If the symptoms return, we have a diagnosis of a food allergy. Food allergies are managed by avoiding the offending food items.

What can we do?

★ **Baths!**



★ **Diet**



★ **Fish Oils**



★ **Antihistamines**

e.g. Benadryl



★ **Corticosteroids**

e.g. Prednisone



★ **Non-corticosteroid
Immunosuppressants**

e.g. Atopica, Apoquel

★ **Allergy shots / drops**

specialized vaccine



★ **Cytopoint (IL-31 antibody)**

monoclonal antibody injection

★ **Antibiotics / antifungals**



Treatment comparison on back ↪



Treatment	Cost	Overview	Notes	Dosage Notes
Bathing	\$	Effective for removing pollens or other environmental allergens. Reduces bacterial or fungal overgrowth.	Recommendation: Antimicrobial shampoos, such as CeraSoothe Chlorhexidine Shampoo	Bathe 1-2 times per week
Fish Oils	\$	Safe and inexpensive. Omega-3 fatty acids are anti-inflammatory and help build normal skin barrier.	Recommendation: Purchase a product that lists the amount of EPA and DHA per capsule.	Dosage: EPA: 180mg per 10lbs of body-weight DHA: 120mg per 10lbs of bodyweight
Antihistamines	\$	Safe, inexpensive, and accessible as OTC, but only effective for mild itching. Can be added to other allergy therapies.	Recommendation: Benadryl, Claritin, Zyrtec, etc. May require experimenting to find best fit.	Dosage: Benadryl (diphenhydramine) 25mg per 25lbs, up to every 8 hrs and/or Zyrtec (cetirizine): 10mg per 22 lbs, every 24 hrs
Corticosteroids Ex. Prednisone	\$	Inexpensive; most potent. Quickest short-term way to alleviate itching while other therapies are taking effect. Effective at preventing secondary ear and skin infections, inflammation, and redness.	Side-effects: Increased thirst, urination, and hunger. Thinning of the skin; weakened muscles; poor hair coat; liver changes; kidney changes.	For long-term, given every other day or less. Blood tests are recommended after 3 months if well tolerated.
Atopica (cyclosporine) non-corticosteroid immunosuppressant	\$\$\$	Fewer side-effects than steroids, but can take 4-6 weeks to work. Effective at preventing secondary ear and skin infections, inflammation, and redness.	Side-effects: Vomiting for the first week of therapy; gingival hyperplasia (overgrowth of the gums); papillomas; infections; enlarged lymph nodes; increased hair growth.	Can be given daily or as little as twice weekly. Blood tests are recommended after 3 months if well tolerated.
Apoquel (oclacitinib) JAK inhibitor non-corticosteroid immunosuppressant	\$\$\$	Fewer side-effects than steroids. Fast-acting; effective in ±85% of AD cases. Less effective at preventing secondary ear and skin infections, inflammation, and redness.	Side-effects: Decreased appetite; vomiting; diarrhea.	Can be stopped without tapering, but is typically given every day. Cannot be used in dogs younger than 12-months-old.
Cytopoint (IL-31 antibody) monoclonal antibody injection	\$\$\$	Safe. Takes effect within 5 days, works in ±80% of patients, and lasts for 4-8 weeks. Less effective at preventing secondary ear and skin infections, inflammation, and redness.		Can be used in dogs younger than 12-months-old.
Allergy shots / sublingual drops specialized vaccine	\$\$\$\$	Safest option for moderate to severe allergies. Works in 60-70% of patients, but may take several months and up to a year to work.	Side-effects: Rare. About 1% of dogs develop an allergic reaction with swelling of the face, which requires emergency veterinary care. Therefore, <i>you must monitor your pet after the shot is given for 1-2 hours.</i>	Shots: Given at home, tapering dosage to every 20 days for life. Drops: Given once a day.
Antibiotics / antifungal medications	\$\$	Secondary bacterial and fungal infections from chronic inflammation/self-trauma can worsen itchiness. If infection is present, the goal is to first resolve it, and then to reduce overall skin inflammation.		