



Malassezias dermatitis - an emerging disease in dogs

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Malassezia dermatitis is a secondary inflammatory disease caused by an yeast, *Malassezia pachydermatis* in dogs, *M. sympodialis* in cats. *M. pachydermatis* (also known as *Pityrosporum pachydermatis* or *Pityrosporum canis*) is a yeast, which is a normal inhabitant (commensal) of skin, ear canal, rectum, vagina and anal sacs in dogs. When certain factors are favourable it cause disease. The major clinical problems exhibited are dermatitis and otitis externa in dogs. Factors favouring the growth are abnormal level of ceruminous lipids (in the ear canal), high humidity and other primary diseases of the animal. Alterations in normal microflora in the ear and skin from prior or concurrent antibiotic therapy may play a role as predisposing factor in allowing overgrowth of malassezia organisms. Also previous medication with corticosteroids, allergic conditions (due to flea, food, etc.), concurrent infection with Staphylococci and chronic skin diseases can act as co-factors in the development of this disease.

Basset hound, German Shepherds, Labrador retrievers, Dachshunds, poodle Chihuahua are some of the common breeds affected.

Dogs of 2 to 4 years of age are commonly affected. However dogs of any age can get the disease. Dogs of either sex were found equally susceptible. This disease is having little zoonotic potential but it can be dangerous in immuno compromised persons.

Clinical signs

Most important clinical signs are alopecia, intense pruritus, erythema (severe reddening of skin) greasy coat, excess whitish to yellowish scales. The main complaint of the owner will be rancid or musty odour. In chronic form there can be hyperpigmentation and lichenification (thickened wringled skin).

The common areas affected are ventral abdomen, axillae, ear pinna, face, feet, front leg and skin folds. In cats typical signs are acne and generalized exfoliation. Animals affected with otitis externa shows pruritus, erythema of pinnae, head shaking, ear pain and head tilt. Apart from skin and ear affections, stomatitis, pharyngitis and tonsillitis associated with *Malassezia pachydermatis* in dogs had been reported.

Diagnosis

Common materials to be collected are:

1. Using wet swab rub the lesion and a smear is prepared on a glass slide, (2) skin scrapings, (3) impression smears from moist lesions, (4) ear-roll swabs..

An elongated oval, peanut or foot print shaped yeast cells can be demonstrated by staining the samples using Dif-Quick, Wright's, leishman's or new methylene blue stains. One or more organisms per high power field is suggestive of the disease. Cultural examination is difficult. However isolation is not necessarily significant because the organism is a commensal.

Treatment

Identify the primary underlying disease and treat it. Specific therapy for malassezia include topical application of ketoconazole shampoo (Nizral, Ketovate etc.) once or twice in a week. Severe and generalized condition require oral Ketoconazole (Nizral, Ketovate or fungicide tab. 200 mg) @ 10 mg/kg once daily for 2 to 3 weeks. In case of impaired liver function instead of ketoconazole itraconazole @ 5 mg/kg once daily with food for 2-3 weeks is recommended. However, Grisiofulvin is not effective.

Along with above treatments, 4 per cent boric acid or 2 per cent acetic acid solutions can be instilled into the ear canal for 7 days in otitis externa. Anti-inflammatory drugs like corticosteroids will not provide relieve for pruritus. To control this disease and to prevent the recurrence it is essential to identify and treat the primary disease conditions.

