

# Canine Hypoadrenocorticism: Diagnosis



**ZYCORTAL**<sup>®</sup>  
HIDDEN DISEASE. VISIBLE ANSWER.



## Signalment:

- Possible at any age but more common between 3 and 6 years
- More common in large pure-breeds dogs

## History:

- Waxing and waning chronic gastrointestinal signs
- Vomiting, diarrhea, inappetence, weight loss, lethargy, weakness, collapse, polyuria, polydipsia, shaking, abdominal pain, melana or hematochezia, and hematemesis
- Sometimes no relevant medical history

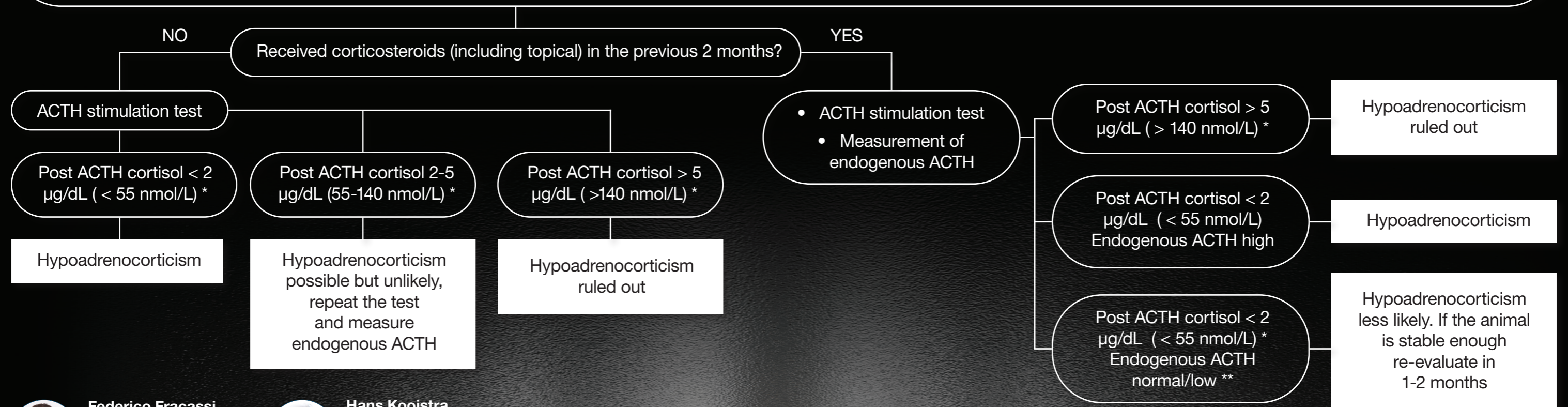
## Physical examination:

- Usually nonspecific: thin-body condition, dehydration, and a painful abdomen
- Acute hypoadrenocortical crisis: signs of hypovolemic shock, including bradycardia or tachycardia, collapse, hypothermia, weak pulses and poor capillary refill time

**Hypoadrenocorticism possible**

## Diagnostic workup

- Biochemistry: **Low Na<sup>+</sup> and/or high K<sup>+</sup> (important)**, Na<sup>+</sup> : K<sup>+</sup> ratio < 27, low cholesterol, glucose, increased urea, creatinine and calcium
- Sometimes no electrolyte abnormalities (eunatraemic, eukalaemic hypoadrenocorticism)
- CBC: some dogs have mild anemia, lack of a stress leucogram, eosinophilia, and lymphocytosis
- Urinalysis: usually impaired urine concentration ability
- Abdominal ultrasound: usually small adrenal glands



\* The specific reference range of the laboratory should be used  
\*\* In rare cases, secondary hypoadrenocorticism is detected (low endogenous ACTH)