



## WHERE DO WE START?!



## COMMON CAUSES OF SKIN DISEASE

- Allergies
- Ectoparasites
- Infectious organisms
- Neoplasia /autoimmune disease



## THE VET NURSES ROLE

- What can we do as veterinary nurses for dermatology patients?
  - Have a good knowledge of common causes of skin disease
  - Record a thorough clinical history
  - Recognise clinical presentations of different allergies
  - Take cytology samples of diagnostic quality
  - Provide on going follow up and advise for clients



## OBTAINING A CLINICAL HISTORY

- Make LONGER appointments where possible!
- Complete a questionnaire prior to appointment
- To include:
  - When did the animal start showing signs of skin disease?
  - What are the main area(s) affected?
  - Is there any seasonality?
  - What is their current diet and have they been on any food trials or special diets before?
  - Current flea control and how often applied?
  - Current medication?
  - Shampoo/bathing regime?



## COMMON ALLERGIES AND THEIR CLINICAL PRESENTATIONS

- There are 4 main types of allergies we see in cats and dogs;

- Flea allergic dermatitis
- Contact allergy
- Food adverse reaction
- Atopy



There are generalised clinical signs associated with all skin cases but there are key areas to examine that can give us some more information on an individual case.



## FLEA ALLERGIC DERMATITIS

- **Clinical presentation:**
  - Excessive grooming
  - Alopecia around rump, medial and lateral thigh area
  - Miliary dermatitis
  - Any age can be affected
  - Seasonality



## CONTACT ALLERGY

- **Clinical presentation:**

- Areas that touch the grass when the animal has been lying down or standing generally affected. See alopecia and erythema of,
  - Sternum
  - Inguinal and axillary areas
  - Ventral abdomen
  - Plantar/palmar surface of feet
- Any age can be affected
- No seasonality



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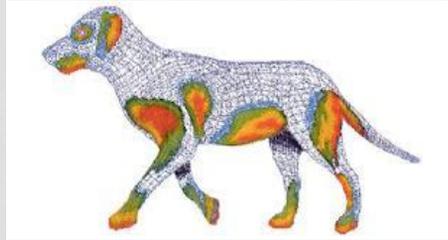
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## ATOPIC DERMATITIS AND FOOD ADVERSE REACTIONS

- Atopy and food allergies have very similar clinical presentations, can be hard to differentiate

- **Clinical presentation:**

- Pruritus and erythema
- Face, around the eyes & lips
- Paws – top and bottom
- Abdomen and groin
- Perineum
- Axillae and elbow folds
- Otitis



## ATOPIC DERMATITIS AND FOOD ADVERSE REACTIONS

- Atopy:
  - Age of onset 2-4 years
  - Can have a seasonal pattern
  - Roughly 80% animals
- Food
  - Affects animals of under a year or older animals
  - No seasonality
  - Associated GI signs



## INFECTIOUS ORGANISMS

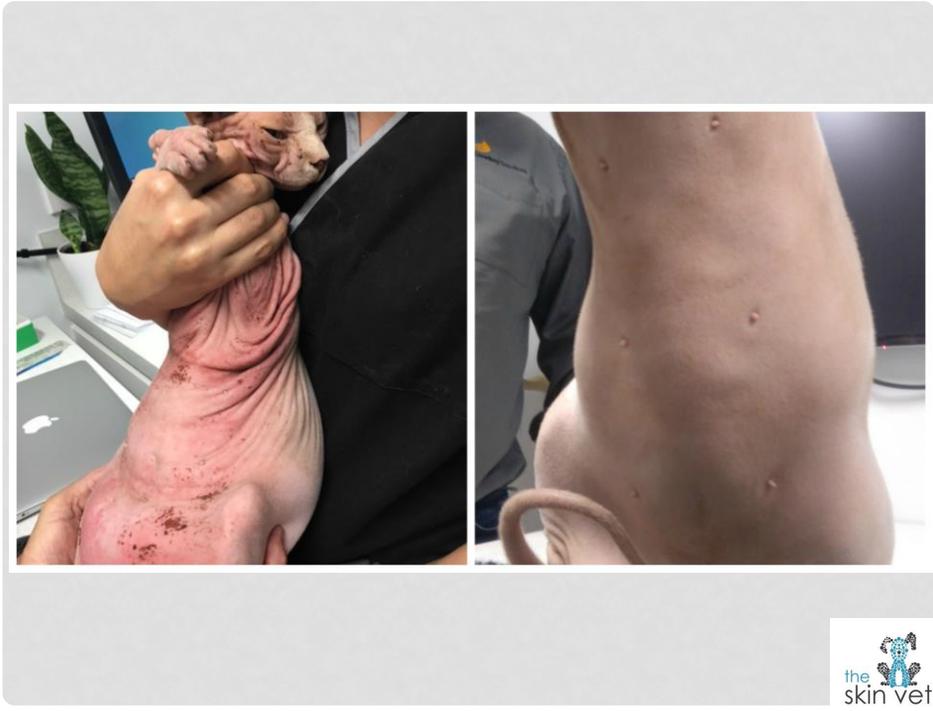
- Secondary infections go hand in hand with allergies
  - Bacterial infections and yeast over growth
  - Major cause of pruritus
  - Cannot find underlying cause of allergy prior to infection being resolved



## CLINICAL EXAMINATION

- Identify different skin lesions, scabs, crusts, pustules etc
  - Measure lesions and take photographs for file
- Erythematous or alopecic areas
- Key areas to examine and take samples for cytology:
  - Face and lip folds
  - Feet (top and bottom) nail beds
  - Axillae and elbow folds
  - Vulva
  - Ears





## TAKING SAMPLES FOR CYTOLOGY

- Test kit to contain:
  - Microscope slides
  - Selotape
  - Pencil
  - Ear buds
  - Paraffin oil
  - Haemostats
  - Scalpel blade (size 10)
  - Needles (25g)
  - Gloves



## IMPRESSIONS SMEARS

- **Indications:**
  - Surface infection
  - Moist exudative lesions
  - Excoriations
  - Crusting
  - Pustules and scabs
- **Technique:**
  - Place slide directly on top of affected area and press gently
  - May require taking top off scabs and popping pustules!





## SUPERFICIAL TAPES

- **Indications**

- Superficial infection
- Crusting
- Non oozing wounds
  - Feet
  - Facial and vulval folds

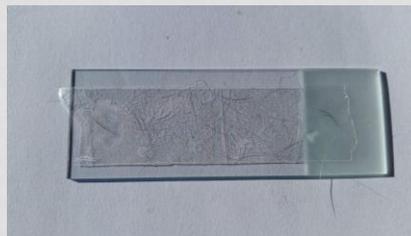


## FEET

- **Technique:**
- Both top and bottom of the feet
- Spreading toes, place finger underneath webbing and gently press upwards
- Cutting hair/matts away
- Place tape up around nail bed pressing gently with finger nail



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## LIP AND FACIAL FOLDS

- **Technique:**

- Trim long hair
- Tape directly onto area, press firmly, remove gently
- Separate facial folds!
- Vulval folds



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## EARS

- **Indications:**

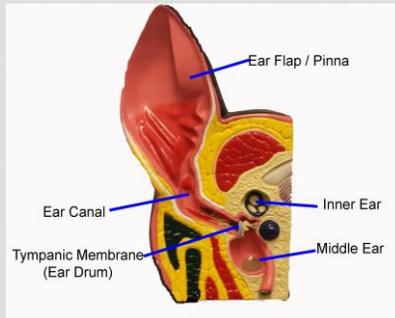
- Otitis
- Head shaking
- Discharge
- Erythema or inflammation of the pinnae



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- **Technique:**

- Lift pinnae upwards (not backwards)
- Gently insert cotton tip into opening of ear canal
- Roll tip into any exudate and gently along the canal



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## SKIN SCRAPES

- **Indications:**

- Parasitic infections such as Sarcoptes and Demodex
- Intense pruritus – Sarcoptes
- Alopecic areas – Demodex
- Care face and feet

- **Technique:**

- Equipment needed,
  - Microscope slides
  - Paraffin/mineral oil
  - Scalpel blade size 10 or bigger
  - Cover slip



## HOW TO PERFORM A SKIN SCRAPE



## TRICHOGRAMS

- **Indications?**

- Look for causes of alopecia
- Ectoparasites such as Demodex
- Dermatophytosis
- Hair growth stage
- Broken tips may indicate secret groomers!



- **Technique:**

- Place a drop of paraffin oil onto microscope slide
- Distract animal by scratching elsewhere on body
- Squeeze skin first if looking for mites
- With haemostats grasp a few hairs at a time
- Pull hairs in direction of hair growth
- Place on slide in same direction

- Care on painful areas such as face and feet



## TRICHOGRAMS



## STAINING AND EXAMINATION

- DiffQuik
- Coplin jars/pottles
- Incontinence sheet/litter tray
- Change often
- Gloves
- Pegs
- Immersion oil
- Blue stain in dropper bottle
- Tissue



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## STAINING TECHNIQUE FOR IMPRESSION SMEARS/EAR SAMPLES



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## STAINING TECHNIQUE



## STAINING TECHNIQUE FOR TAPE SAMPLES

- Do not use fixative!
  - Dip and agitate into pink and blue stain 5 x 1 seconds
  - Rinse under tap
  - Remove excess water with paper towel
- Or place a drop of pink stain under selotape then wipe off excess stain the drop of blue stain



## CLIENT CONTACT

- Post appointment contact:
  - Phone/email day after appointment
  - Does client have any questions regarding appointment?
  - Able to administer medication?
  - Regular check in to see how all is going, ensure completing course of prescribed medication etc
  - Owner feels valued and prevents things from going backwards! 😊



## CONCLUSION

- There are many areas nurses can be involved in when assessing the dermatology patient:
  - Obtaining clinical history from clients prior to appointments
  - Have good underlying knowledge of causes and presentations of skin problems
  - Taking cytology samples of diagnostic quality
  - Staining samples for examination
  - Follow up client communication



## QUESTIONS?

Showering won't be  
enough after today.  
I'll need to be  
autoclaved.



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