



ZOETIS DIAGNOSTICS

GetWell

Canine hypothyroidism

Guidance on diagnostic decision-making
for dogs with suspected hypothyroidism

zoetis

Signs, symptoms and diagnostic indicators

Hypothyroidism is one of the most common endocrine diseases in dogs, generally affecting middle-aged pets. Left untreated, it can lead to:



Lethargy



Exercise intolerance



Recurrent infections



Weight gain

How can you spot hypothyroidism?

Lethargy, exercise intolerance and weight gain can be signs of hypothyroidism. More specific clinical signs are often dermatological, including:

- ✓ **Alopecia on high wear areas**, such as the tail or lower limbs¹
- ✓ **Thin hair** with excessive shedding
- ✓ **Recurrent skin and ear infections**
- ✓ **Thickening of the facial skin** resulting in a “tragic” expression



When does clinical pathology point to hypothyroidism?

Mild to moderate non-regenerative anemia is seen in **~50%** of cases²

Hypercholesterolemia is seen in **~75%** of cases²

Can include mild increases in hepatobiliary enzymes, creatinine and SDMA.



Testing: Things to know

- 1 Hypothyroidism can be on the differential diagnosis list for a wide variety of presentations
- 2 Sighthounds, Giant Schnauzers and Dogues de Bordeaux tend to have lower TT4 than standard
- 3 Medications including steroids, NSAIDs, phenobarbital and sulfonamides may interfere with test results
- 4 Low TT4 levels are not exclusive to hypothyroidism and may be due to age or non-thyroidal illness, including post-operative recovery
- 5 High TT4 may be caused by a raw fed diet, functional thyroid mass, rebound following illness, or interference from anti-T4 antibodies
- 6 TT4 is an excellent screening test for hypothyroidism with very high sensitivity, allowing you to rapidly exclude hypothyroidism as a possibility if results are well within reference intervals
- 7 If the result is low or borderline, additional tests are needed — diagnosis can only be made on the basis of a low TT4 AND a combination of compatible clinical signs, clinical pathology abnormalities and endocrine testing³
- 8 Measuring fT4 will increase confidence in the diagnosis as it is less affected by medications and non-thyroidal illness. Measuring TSH is also useful as up to 75% will have increased TSH due to a lack of negative feedback.¹



Tailored treatment plans start with thorough diagnostic workups

What are the treatment options?

- ✓ Daily oral administration of thyroid hormones once or twice a day for life
- ✓ Patients will often start with twice-daily dosing to improve the initial response³

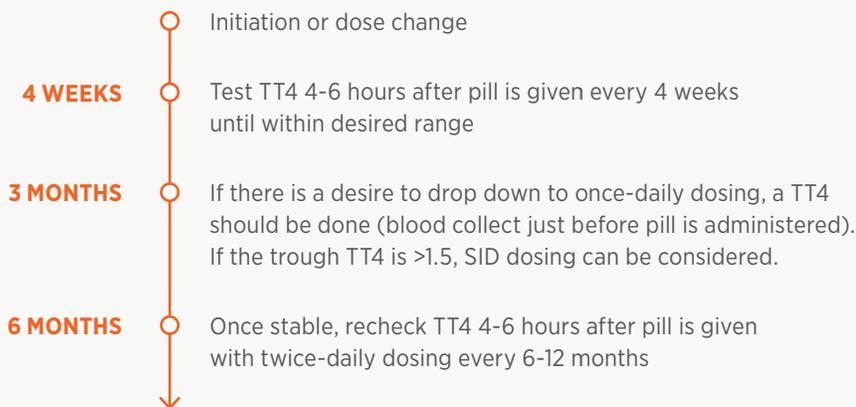
What kind of monitoring is necessary?

Regular monitoring will be necessary for at least the first 6 months.

Goal: Maintain TT4 concentrations in the upper half to a little above the reference interval

Concentrations >6ug/dL may suggest a reduction in dose is needed²

Treatment Timeline



Explore additional resources for sick pet testing in your **GetWell toolbox**

References: 1. Mooney, C.T. Canine hypothyroidism, in BSAVA manual of canine and feline endocrinology. 2023, BSAVA Library. p. 128-150. doi: 10.22233/9781910443866.18. 2. Mooney, C.T., Hypothyroidism in Dogs, in Ettinger's Textbook of Veterinary Internal Medicine-eBook, S.J. Ettinger, E.C. Feldman, and E. Cote, Editors. 2024, Elsevier Health Sciences. p. 1920-1935. 3. Scott-Moncrieff, J.C., Hypothyroidism, in Canine and Feline Endocrinology, E.C. Feldman, et al., Editors. 2015, Elsevier Saunders: USA. p. 77-135.

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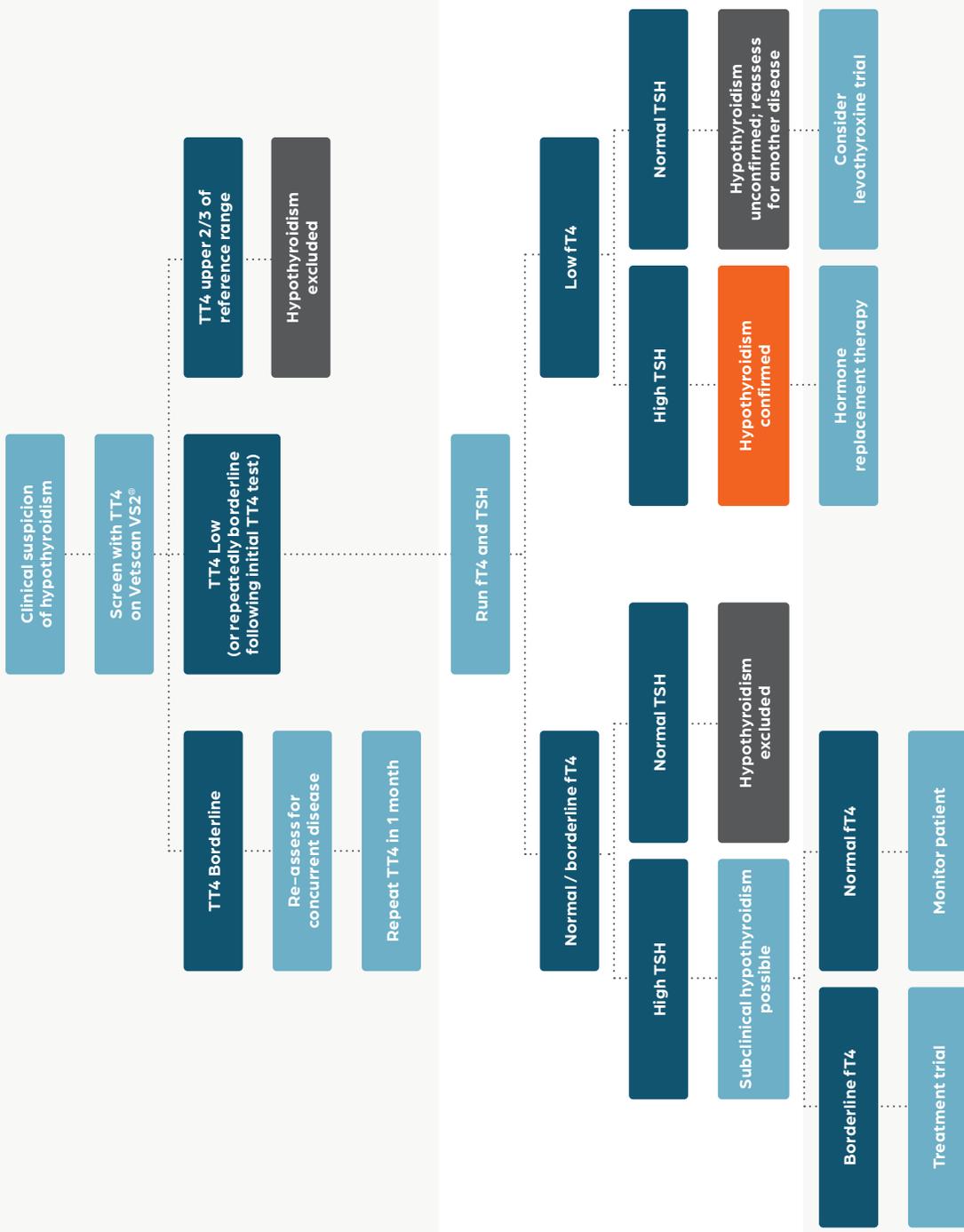
Individualized care starts with comprehensive diagnostic insights

Diagnostic Decision Making: Suspected Hypothyroidism

STEP 1

Analyze thyroid hormone levels on patients with clinical signs

- ✓ Obtain a minimum diagnostic database using the:
 - Vetscan Imagyst®
 - Vetscan Opticell™
 - Vetscan VS2
- ✓ Run dermatology and cytology testing to address any dermatological concerns:
 - Vetscan Imagyst®



STEP 2

Complete additional tests based on TT4 results

- ✓ Schedule a complimentary consultation with a board-certified specialist anytime* via Zoom or email guidance and support

STEP 3

Develop a fully-informed treatment plan

TT4, total T4; fT4, free T4; TSH, thyroid-stimulating hormone.

* Dependent on consultant availability

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