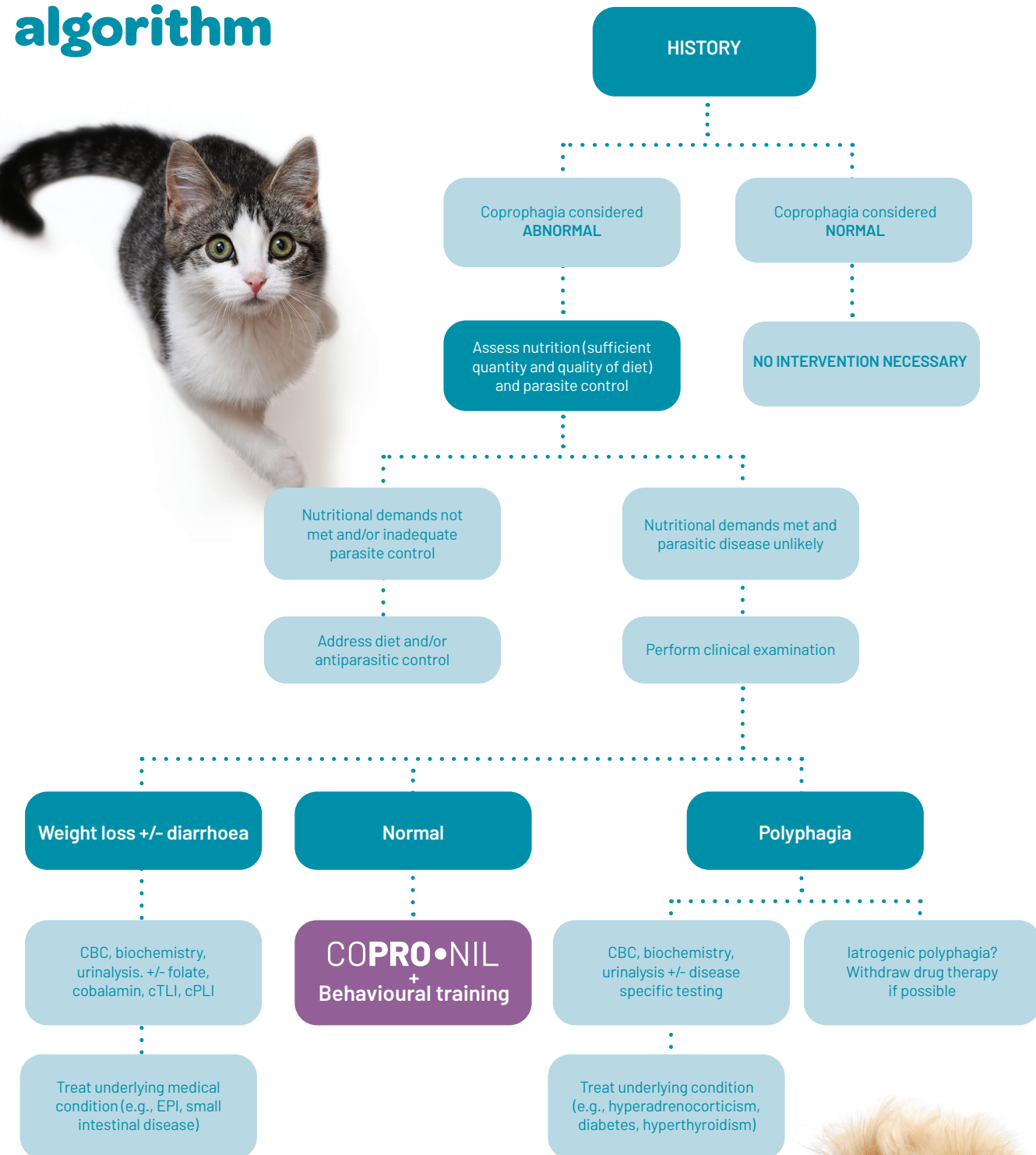


Coprophagia management algorithm



Copro • phagia
'faeces' 'to eat'

COPRO•NIL
BEHAVIOURAL AID FOR COPROPHAGIA

COPRO•NIL
BEHAVIOURAL AID FOR COPROPHAGIA

BREAK THE HABIT WITH COPRO•NIL



Speak to your TVM territory manager or visit tvm-uk.com/coprophagia for more information.

Also part of the TVM Behaviour Range!

Alphazium TT® The tasty choice for anxious dogs & cats



Alphazium TT contains a unique ingredient combination with TRIPLE ACTION, to help support pets before, during and after a stressful event.

For more information speak to your TVM territory manager or visit tvm-uk.com/alphaziumtt

Stop the poo chew!



1. Hart, B. L., Hart, L. A., Thigpen, A. P., Tran, A., & Bain, M. J. (2018). The paradox of canine conspecific coprophagy. *Veterinary medicine and science*, 4(2), 106-114. 2. Stull, J. W., Kasten, J. I., Evason, M. D., Sherding, R. G., Hoet, A. E., O'Quin, J., Burkhard, M. J., & Weese, J. S. (2016). Risk reduction and management strategies to prevent transmission of infectious disease among dogs at dog shows, sporting events, and other canine group settings. *Journal of the American Veterinary Medical Association*, 249(6), 612-627. 3. Baan, M., Kidder, A. C., Johnson, S. E., Sherding, R. G. (2011). Rhinoscopic diagnosis of *Eucoleus boehmi* infection in a dog. *JAAHA*, 47(1):60-63. 4. Nijse, R., Mughini-Gras, L., Wagenaar, J. A., Ploeger, H. W. (2016). Recurrent patent infections with *Toxocara canis* in household dogs older than six months: a prospective study. *Parasites Vectors* 9, 531. 5. Shadwick, S.R., Ridgeway, M.D., Kubier, A. (2013). Thyrotoxicosis in a dog induced by the consumption of faeces from a levothyroxine-supplemented housemate. *Can Vet J*. 54(10):987-989. 6. Hutchins, R.G., Messenger, K.M., Vaden, S.L. (2013). Suspected carprofen toxicosis caused by coprophagia in a dog. *JAVMA*, 243(5):709-711. 7. McKeown, D., Luescher, A., Machum, M. (1988). Coprophagia: food for thought. *Can Vet J*. 29(10):849-850. 8. Reed, D.H., Harrington, D.D. (1981). Experimentally Induced Thiamine Deficiency in Beagle Dogs: Clinical Observations. *Am. J. Vet Res*, Vol. 42 No 6, pp 984-991. 9. Wiberg, M.E. (2004). Pancreatic acinar atrophy in German shepherd dogs and rough-coated Collies. Etiopathogenesis, diagnosis and treatment. A review. *Veterinary Quarterly*, 26:2, 61-75. 10. Westermarck, E., Wiberg, M. (2003). Exocrine pancreatic insufficiency in dogs. *The Veterinary clinics of North America. Small animal practice*, 33(5), 1165-ix. 11. Hall, E., Day, M. (2017). Diseases of the Small Intestine. *Textbook of veterinary internal medicine, 8th Edition*. Elsevier, pp 1516-1517

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For further information, please contact TVM-UK Animal Health Ltd, Kirtlington Business Centre, Slade Farm, Kirtlington, Oxfordshire OX5 3JA.
tvm-uk.com

COP-001-A4



What is Coprophagia?

Coprophagia is the ingestion of faeces by an animal; up to 23% of dogs may eat faeces, with 16% being regular offenders.¹ Coprophagia can increase the risk of pathogen transmission^{2,3,4} (some of which may be zoonotic) and rarely, result in medication toxicity.^{5,6}

Ultimately the behaviour is unpleasant for many owners, and in severe circumstances may even be a reason for them to consider rehoming or euthanasia.⁷

- **Conspecific coprophagia** describes the eating of faeces from the same species and can either be
 - Autocoprophagia (animal eating its own faeces)
 - Allocoprophagia (ingestion of another animal's faeces of the same species).
- **Interspecific coprophagia** refers to the ingestion of faeces from different species and is quite common in dogs (such as eating cat, horse, cow, or sheep faeces).



23%
of dogs may eat faeces

Just...why?

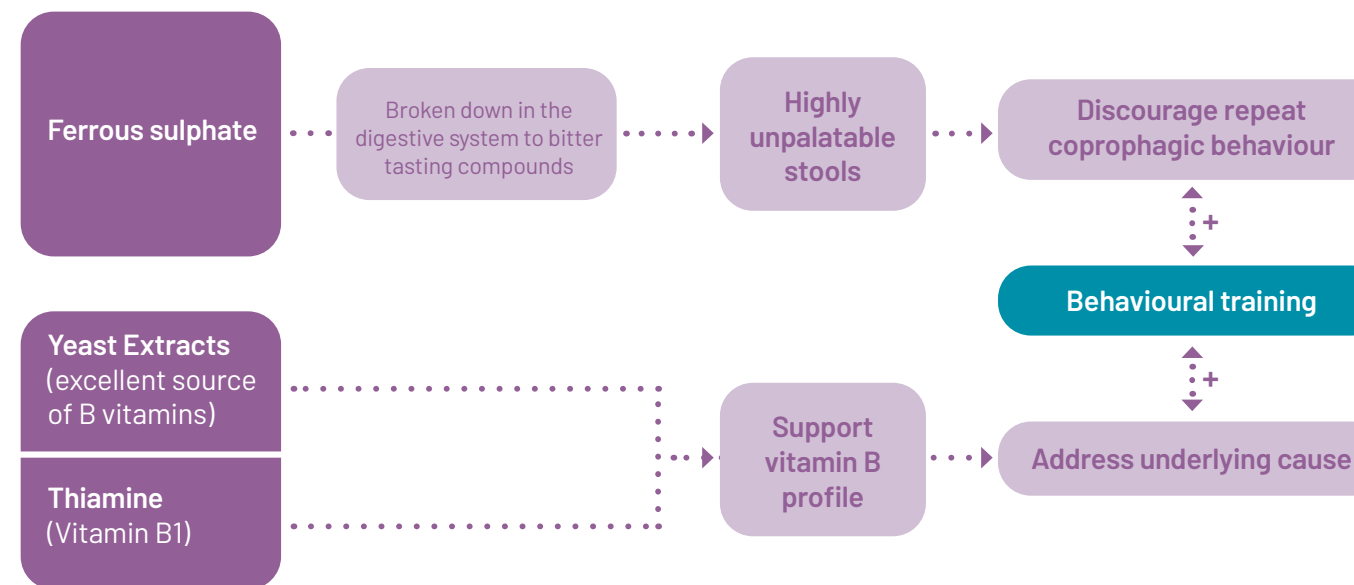
In the majority of cases, coprophagia is an abnormal and undesirable behaviour with a number of potential medical or behavioural causes...

How does COPRO•NIL help?

COPRO•NIL is a **faecal taste-modifier** and behavioural aid to help with the correction of undesirable coprophagic behaviour.

COPRO•NIL also provides a **comprehensive B vitamin source** as deficiencies in B vitamins may contribute to coprophagia.

COPRO•NIL makes the faeces unpalatable to an animal, giving the owner an opportunity to break the cycle by modifying behaviour.



Glutamic acid is added to enhance product flavour and increase acceptance.

Directions for Use

- Administer 0.5g per kg per day (1 level teaspoon per 10kg), divided between each meal.
- Sprinkle onto every feed, and avoid snacks between meals, to ensure COPRO•NIL is consistently present in every stool.
- Administer daily for 10-14 days.
- If coprophagia is still exhibited or long-term habit breaking is required, COPRO•NIL may be continued for up to 6 weeks.
- Where interspecific and/or allocoprophagia is occurring between pets within the home, feed COPRO•NIL to all dogs and cats within the household at each feed.

0.5g per kg per day



1 level teaspoon = 5g of COPRO•NIL

10-14 days

Weight	Total daily amount	Twice daily	Three times daily
5-10kg	1/2 tsp	1/4 tsp	1/6 tsp
10-20kg	1 tsp	1/2 tsp	1/2 tsp
20-30kg	2 tsp	1 tsp	2/3 tsp

Medical Causes

Nutritional deficiencies	<ul style="list-style-type: none"> • Starvation • Inappropriate diet • Vitamin B deficiency⁸
Malabsorption	<ul style="list-style-type: none"> • Exocrine pancreatic insufficiency^{9,10} • Enteropathies¹¹
Polyphagia	<ul style="list-style-type: none"> • Drug induced (e.g. steroids) • Metabolic (e.g. hyperadrenocorticism, diabetes mellitus, hyperthyroidism)
Normal	<ul style="list-style-type: none"> • Nursing bitch/queen • Exploratory behaviour in preweaned puppies • Occasional ingestion of ungulate faeces

Behavioural Causes

Boredom	Lack of environmental stimulation or exercise
Attention seeking	Previous incorrect use of punishment/reward associated with toileting
'Hide the evidence'	Incorrect toilet training methods used
Chronic anxiety or stress	Multiple potential causes (e.g., separation anxiety)

Whilst it is important to identify and treat underlying medical causes, the majority of cases are behaviour-associated¹ and therefore require behavioural modification training to help resolve the behaviour.

FREE DOWNLOADABLE ADVICE SHEETS AVAILABLE FOR YOU AND YOUR CLIENTS

For optimal results, COPRO•NIL is best used in conjunction with behavioural modification training.

Visit tvm-uk.com/coprophagia for further guidance and free downloadable resources to help you and your clients tackle this unpleasant behaviour permanently.

For intractable cases, behavioural referral should be considered, visit apbc.org.uk for further information.



Presented in 100g tubs.

Powder formulation ensures even distribution throughout faeces, unlike with tablets or pills.

Can be used on wet or dry food.

