



Head Tremors (Bobbing) in Dogs

(Idiopathic Head Bobbing—Dogs)

Basics

OVERVIEW

- Common, very specific, often self-limiting, head and neck tremors in dogs
- Commonly called head bobbing but idiopathic head tremors is more appropriate; synonyms: episodic head tremor syndrome, bobble-head doll syndrome, head shaking, head tremors, head wobbling, head nodding
- A movement disorder is suspected, but the pathophysiology remains unknown

GENETICS

- Unknown

SIGNALMENT/DESCRIPTION OF PET

Species

- Dogs

Breed Predilections

- Dogs—any breed, but English bulldog (EB), French bulldog, Boxer, Doberman pinscher (DP) and Labrador retrievers are predisposed; reported prevalence of 19–38% in EB

Mean Age and Range

- Dogs—mean age at onset of signs is < 3 years old, but can start at any age

Predominant Sex

- Reports that males are over-represented in DP and EB breeds

SIGNS/OBSERVED CHANGES IN THE PET

Historical Findings

- Sudden onset of head tremor episodes; possible recent stressful event (estrus, pregnancy, birth with nursing, vaccination, illness, etc.)
- Littermates may be affected (a form identified in Doberman pinschers ≤ 1 year old that runs in families (known as “familial”))

Physical Examination Findings

- No abnormalities noted if not currently experiencing an episode
- Typical up-and-down or side-to-side rapid head tremors—episodes last from a few seconds to a few hours
- Variable tremor episode frequency, duration, and inter-episode interval



- Occasional reports of abnormal posture (subtle head tilt, stiffness, floppiness) during episodes, but not between episodes
- Occasional reports of abnormal behavior (disorientation, sleepiness, agitation) immediately prior to an episode
- All dogs are reported to be responsive to their surroundings during the episode
- Rare reports of associated generalized seizure
- Episodes can often be interrupted by distraction or treats
- Other nervous system abnormalities (drunken or dizzy movement (known as “ataxia”), trouble knowing where to place the feet (known as “proprioceptive deficits”), partial paralysis (known as “paresis”); consistent with concurrent, unrelated nervous system conditions such as neck bone/spinal lesions (known as “cervical spondylomyelopathy”) in Doberman pinschers, malformed bones in the spine (known as “hemivertebrae”) in bulldogs) are often noted

CAUSES

- Unknown mechanism

RISK FACTORS

- Genetic basis suspected but unproven
- May be triggered by a recent stressful event

Treatment

HEALTH CARE

- No known effective treatment
- Attempts to interrupt the episodes by distracting the dog should be tried by the client
- If head bobbing episodes significantly impair life functions such as eating or sleeping, or the quality of life of the dog, consult a veterinary neurologist for further recommendations

DIET

- Good quality diet

SURGERY

- Not applicable

Medications

None effective, including anti-epilepsy medications unless that condition is concurrent

Follow-Up Care

PATIENT MONITORING

- None specific

POSSIBLE COMPLICATIONS

- Concurrent epilepsy may be present and may need to be addressed

EXPECTED COURSE AND PROGNOSIS

- Self-limiting in 49% of English bulldogs in one study
- Head tremor episodes may continue life-long at a variable frequency, usually decreasing over time
- Prognosis is excellent as head bobbing is not associated with a life-threatening condition

Key Points

- This condition may be life-long, but can also gradually decrease over time
- Intervention is only necessary if the condition interferes with quality of life