



The Tell-Tale Tumor

Navigating Grief and Guilt After a Devastating Diagnosis

By Rachel Brix, CCBC-KA, CPDT-KA

Emmie was officially diagnosed with her brain tumor on Valentine's Day last year, although I think she had self-diagnosed several months before. I don't know if I could've or would've done much differently, as it was inoperable, and I know I would never have put her through radiation therapy (she would've hated it); but I wish I had known sooner. She tried to tell me something was wrong, but I didn't quite get the message.

The tumor started whispering six months earlier when she began scratching her left ear to the point it bled. The vet evaluated her for bacteria and infection, found an exceedingly small amount of bacteria and put her on antibiotics. Em had always been extremely sensitive to her body, so it made sense she would notice a slight change in her ears, but scratching until it bled? The antibiotics didn't work, so the vet pivoted to allergies. This made sense also, as it was September by this time, and Emmie and my other dog, Apache, had seasonal allergies. We had also moved, and she had some skin issues the previous year, so maybe the allergies were manifesting in her ears in a new climate this time? Nevertheless, I sought a second opinion, especially since the allergy medication wasn't working either, and by now she was scratching both ears

rather heavily. Besides the scratching, Emmie appeared to exhibit mostly normal behavior.

The new vet tried different medications, which seemed to help, but by this time, it was well into winter, allergies no longer made sense to me, and indoor allergies had never been a thing for us. I sensed something else was to blame, but those thoughts subconsciously lingered in the land of make-believe, where dogs never get sick. That "something else" became obvious when Emmie's left side of her face atrophied. The tumor had spoken. From then on, she no longer scratched her ears.

I know Emmie knew something was wrong in her head, and all she could do was scratch at her ears to try to relieve the... sensation? Discomfort? Pain? She'd been trying to tell me, but I didn't understand. I never made the leap from ear scratching to brain tumor, especially with no notable behavior changes. I know that even if we had been able to diagnose her back in August or September, the options were few, but I still wish I had known. We could've focused on palliative care. Scratch that: I wish I had been more in tune with my dog. I didn't understand what she was trying to tell me, and it hurts. Like I failed as the primary caregiver to my

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best girl. Failed as the one person who should have deciphered what she was clearly getting at. Failed to push the vets harder for more testing and further investigation. Failed as a canine professional.

A year later, I no longer blame myself (scratch that: not as much, anyway). So, I share Emmie's story as a plea to dig deeper into our pets' communication efforts. Observe as closely as possible, ask all the questions, probe, and collaborate with vets to investigate thoroughly. Even though we know dogs will hide pain or discomfort, Emmie wasn't trying to hide anything from me; she wanted me to know her secret, that her tumor was talking, but I didn't hear her.

PERIPHERAL NERVE SHEATH TUMORS

Emmie's facial atrophy was quick and obvious: it seemed as though it happened overnight. Alarmed and confused, I texted pictures to my vet. I also started furiously googling causes. These tumors are uncommon, and my vet admitted not having much experience with what we determined to be the cause: a peripheral nerve sheath tumor, which makes up only 27% of nervous system tumors in dogs. Usually malignant, nerve sheath tumors are considered sarcomas and occur in the periphery of the central nervous system, affecting nerves and tissues that surround the brain and spinal cord. As they grow, they put pressure on nearby tissue and can cause pain and mobility issues. Benign forms do exist, but they are far less common, as are nerve sheath tumors in the legs and abdomen. The cause of nerve sheath tumors is unknown.

Clinical signs include:

- Seizures (most common clinical sign)
- Behavior changes: jumpy, aggressive, staring into space, painful
- Circling/pacing (in the direction of the tumor)
- Head muscle atrophy
- Vision loss/blindness

- Trigeminal neuritis, or "dropped jaw." Some dogs have trigeminal neuropathy, where they have difficulty chewing, but this can happen without the presence of a tumor, and it doesn't necessarily happen when a tumor is present.

Treatment can involve surgery, but the location is problematic and risky, and regrowth is likely anyway. Radiation is another option. Survival times are typically 4-21 months after diagnosis, the average being 1 year. Emmie was at the low end: 4 months and 4 days.

Had we suspected a brain tumor and diagnosed her earlier, though, I don't think I would've changed anything. I wouldn't have risked surgery, and radiation would've diminished her quality of life without necessarily prolonging it. As it was, she had four great months almost to the day after her diagnosis. We continued our daily walks, weekend adventures, and trips out to run along the shore at the harbor, her favorite place. I could tell she was slowing on certain days, but her spirit never wavered. On her 13th birthday, we walked to the doggie bakery in town, did backyard agility, and played games. Ten days later, she would be dead.

LOVE AT FIRST SIGHT

I knew I was taking her home from the moment I saw her. Having recently lost 13-year-old Percy, my first dog as an adult, I was not looking for another dog. I was nevertheless convinced I was meant to have this hapless puppy because "surely she was husky/beagle like Percy was." It was 2011, and I was the Lead Dog Trainer at Petco. She was one of the rescues on Adoption Day, lying in a crate and looking very depressed. I called my then-husband and asked him to please come to my work to meet her. Afterward, we went to dinner, and I told him we were taking her home; her name would be Emerson, and we would call her Emmie.

Em was beautiful: tri-colored and fluffy and "looked like" a husky/beagle mix, but she was neither breed. She tested detectable breeds of Chow Chow, American Cocker Spaniel, Australian Cattle Dog, St. Bernard, Bull Terrier, Boxer, Harrier, Otterhound, Miniature Pinscher, and then 25% "Super Mutt," which included various

shepherds among other breeds. Not believing the sheer magnitude of the mix, I tested her DNA again with a different company, and the results were nearly identical.

Emmie had been dumped at the local animal control in Branson, Missouri, with a broken leg, giardia, and hookworm infestation. By the time I'd met her, she'd undergone surgery and had pins in her leg. She was only 10 weeks old. Emmie's operation and/or her mandatory post-op crate rest were unsuccessful. When I took her to the vet post-adoption, I found out her leg had not been healing properly, the pins had migrated, and she would likely always have a "bum leg," which included a luxating patella on top of the large chunk of femur she'd been missing due to the unknown injury. She wasn't a good candidate for additional procedures, but in hindsight, I wondered if I should've gotten third and fourth opinions. Despite having to overcompensate most of her life by extending her hock to stand balanced, Emmie thrived. She loved running the fence when deer came too close, long walks and hikes, swimming wherever and whenever, and digging in spots specially chosen; you just never knew where those would be or when her mood would hit.

Agility and swimming were her beloved activities. We took numerous agility classes over many years, and despite her special needs, she loved it. The A-Frame was her favorite. I always ran her Preferred, which allowed her to participate at 4 inches below the standard for jumps for her height and tacked on 5 seconds of additional time to complete any course. We attended a couple of competitions, just to see, and Emmie would get the zoomies, and that was that. We stuck to our classes, and we loved our date nights, complete with a stop for a Pup Cup or French fries.

She told me she loved swimming while on a leash walk as an adolescent. I'd absentmindedly tossed a stick into a stream, and she went in after it, dragging me with her. We had our usual swimming holes, and I'd gather just the right sticks, the bigger the better. From shore, I'd throw them out as far as I could into the water, and she'd swim for them and bring them back until she was tired, which she let me know by promptly lying down and gnawing on the stick. She also loved to dry herself off whenever wet: I'd lay down a towel and she'd flop onto it and writhe around until she'd scooted herself several feet off the towel.

Em didn't really have any behaviors I found inappropriate; she was just a really cool dog, and her quirks were endearing. Although I could've done without the random snout crotch-punching of passersby on our walks when in more crowded situations, but that would be nitpicking.

Considering whatever physical traumas she had as a very young puppy, she was very receptive to subsequent socialization and life skills training. She was very independent and never really exhibited any apparent signs of fear. In fact, she was a confident dog, modeled confidence for my other two rescue dogs, and served as a beacon of safety for them. As strong as she was, she was also sensitive to her body, which I assumed was the manifestation of her early trauma. If a fly landed on her, she instantly focused on its removal. I would know immediately if she had a minor scrape or lesion because she would

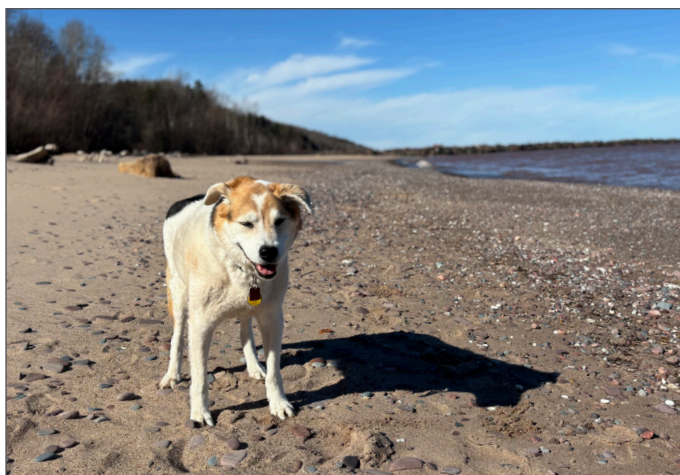
tend to it obviously and often. She alerted me to the few hot spots she'd had before I could even see or feel them present on her skin.

We tried several harnesses, but she was never comfortable with any of them, and even her collar had to be worn loosely. In general, she preferred not to be petted or touched, but on those rare occasions she wanted to cuddle or be petted, I was thrilled and eager to oblige. She did especially love darting under people's knees when they were seated (any person would do), and she would position herself so her lower back and bum would rub in said person's knee pit, and she would shimmy and dance "petting herself" as it were. I loved it.

We always kept her strong, especially her bum leg, with exercise and at-home physical therapy and monitored for any changes with X-rays. She always took supplements and periodic pain meds. But as she aged, she would let me know when her leg was bothering her. For example, she started to slow down and look sheepishly at me toward the end of our walks. So, we shortened our walks and modified her meds. One afternoon, she had the zoomies after her bath as usual, and her leg gave out. We were fortunate to find an excellent vet, not only a Certified Veterinary Pain Practitioner (CVPP) and Certified Canine Rehabilitation Therapist (CCRT) but also a 5-year residency at the American College of Veterinary Sports Medicine. Emmie underwent an extensive rehab program for 10 weeks after it was determined she had tears in her CCL, or cranial cruciate ligament (the human equivalent of an ACL). Due to the composition and nature of her leg, she was not a good candidate for surgery.

I sought a specialist for her leg; should I have sought a specialist for her ears, too? Would having done so have yielded a different outcome? Considering her propensity towards sensitivity and acute body awareness, it didn't surprise me when she began scratching her one ear during what had become allergy season with a move to a new climate. But also, because of her acute body awareness, I should've been more perceptive. Maybe I'm just mad and sad and guilt-ridden and all the things we feel when our dogs die.





THE FINAL CHAPTER

We had gone on our regular 90-minute Sunday morning walk. Walks had gotten a little slower, but the enthusiasm was constant. We went to Dairy Queen for ice cream and a drive on backroads. That evening, I caught her and Apache sharing a bed:, which was odd; it was the first time I knew of in the 6 years they'd lived together. Their relationship was respectful and tolerant, sprinkled with rare occasions of very brief play. They got along just fine but were not close. I captured a picture since it was "so cute," not knowing Emmie wouldn't ever be the same in a few hours, and I'd be making The Call. I don't know who lay down with whom, but by the positioning, I'd say Em lay down with him. I now believe they were saying goodbye. They knew what I didn't know.

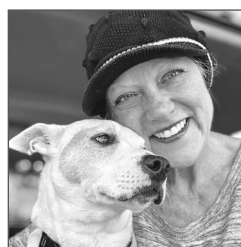
That night, around midnight, she got up and could barely stand but was determined to walk. I carried her down the stairs and outside, thinking maybe her leg was acting up and she had to toilet, even though she never woke up in the middle of the night to go out. In the yard, she shakily walked in slow circles, and she seemed confused. She did urinate, and I carried her back inside, and when she calmed, I lay with her. By now, the tumor was screaming. Screaming at me. Forcing me to acknowledge what I'd been blind to before: the tell-tale tumor would no longer be ignored. The evidence was in my face, seizing my Emmie, stealing her from me, and my powerlessness mirrored her helplessness, and we both succumbed. I suspect it had been screaming all along for Emmie, but for her, it now fell silent.

In the morning, it was more of the same: she could walk, but wobbly and erratically, and she could not control her movements effectively. And she was... vacant. She appeared confused and out of it. Emmie was no longer Emmie. Yet, she insisted on eating breakfast and unsteadily took part in the puzzle feeding with much gusto. I was grasping at routine, and I knew it, but it brought a small comfort. For a brief time, I tried to convince myself she'd be OK, half-believing she'd come out of it. She rested most of the day, and it seemed so... normal. I made her a cake. It was all I could think to do. I spent the day assessing the situation and trying to make her last day comfortable, but it felt futile. And permanent. Although I knew she had a tumor and her time was limited, it was devastating and yet a blessing at the

same time to go from our usual ice cream and a Sunday stroll to euthanasia in less than 36 hours.

I know it's not my fault Emmie had a brain tumor, but I feel as though I should've questioned more, investigated more, and done more. I can only imagine a dog's frustration, confusion, depression, knowing something is off, especially one who is as sensitive to what's going on with her body as Emmie and can only scratch her ears until they bleed, and her humans are not figuring it out. How lonely that must have felt for her. To know she suffered on some level in silence breaks my heart, guts me. And guilts me. Apache is giving me separate concerns as well. Three vets have taken similar approaches to his current issue: trying various allergy medications and topical treatments. I'm pressing harder. I don't want to be paranoid, but I don't want to miss anything this time if I can help it.

I'm so grateful Emmie's last four months were active and enjoyable. I'm so thankful she had so much fun, experiences, and love in her life. I'm so glad I always spent what some thought was "too much time" with her. I'm comforted to have shared part of my life with her. But I miss her. Everything aside, it is what it is. There's no blame to be cast, nothing that could've been done differently. My brain can come to terms with that. Now, I need my heart to catch up.



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RESOURCES

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