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Pseudo-Pregnancy in Bitch and Its Management

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Phases of the Estrus Cycle in Bitch

The oestrous cycle in the bitch is monoestrous, occurring only once or twice a year, and is divided into four distinct phases. Proestrus lasts about 6–11 days, marked by vulvar swelling, bloody discharge, and rising estrogen levels; the bitch attracts males but refuses mating. This is followed by estrus (5–9 days), during which discharge becomes straw-colored, the vulva softens, and the bitch accepts the male. Ovulation occurs 24–72 hours after the LH surge, and unlike most species, the bitch ovulates primary oocytes that mature over 2–3 days. Diestrus then follows for around 60 days, whether or not pregnancy occurs, characterized by high progesterone from a functional corpus luteum. The bitch shows no longer receptivity during this phase. Finally, anestrus is a long period of sexual inactivity lasting 4–5 months, with low hormone levels and ovarian quiescence. This prolonged cycle makes canine reproduction unique among domestic animals.

Which Phase does Pseudo-Pregnancy Fall under?

Pseudo-pregnancy in the bitch occurs during the **diestrus phase** of the oestrous cycle, when the corpus luteum remains functional for about 60 days regardless of conception. During this period, progesterone levels are high, but as they decline toward the end of diestrus, prolactin secretion increases, leading to signs that mimic those of actual pregnancy. These may include mammary gland enlargement, lactation, nesting behaviour, restlessness, and maternal instincts toward objects. Pseudo-pregnancy is a normal physiological phenomenon in dogs, resulting from their fixed luteal phase, and it typically resolves spontaneously without treatment, although in some cases, management may be necessary.



Why is it termed as Pseudo-Pregnancy?

It is termed pseudopregnancy because the bitch shows physical and behavioural signs resembling true pregnancy, such as mammary development, lactation, and nesting, even though no conception has occurred. This false pregnancy results from hormonal changes during diestrus, especially declining progesterone and rising prolactin, without the presence of actual embryos.

What are the Risks during Pseudo-Pregnancy?

Pseudo-pregnancy in bitches, though usually self-limiting, can pose several health risks. Hormonal changes during diestrus, with high progesterone followed by rising prolactin, cause mammary enlargement and lactation, which may lead to mastitis or prolonged milk secretion. Mammary hyperplasia during repeated episodes can increase the risk of future mammary tumours. Behavioural issues such as anxiety, restlessness, or aggression may also occur. More seriously, the progesterone-dominated uterine environment suppresses contractions, enhances glandular secretions, and keeps the cervix closed, creating favourable conditions for bacterial infection. This can lead to **pyometra**, a potentially life-threatening uterine infection, making pseudopregnancy a condition requiring attention.

Effective Management of Pseudo-Pregnancy

Effective management of pseudopregnancy in bitches is guided by the severity and duration of clinical signs, as well as the animal's reproductive status. In mild or uncomplicated cases, active treatment is usually unnecessary because pseudopregnancy is a physiological, self-limiting condition that typically resolves spontaneously within 2–3 weeks as prolactin levels decline naturally. Conservative management is the cornerstone in such cases. Owners should be strongly advised to prevent any stimulation of the mammary glands, including licking, suckling, or manual milking, as these actions promote prolactin release and prolong lactation. The use of Elizabethan collars, abdominal bandaging, or protective garments may be recommended to limit self-stimulation and improve the animal's comfort. Dietary and environmental modifications, such as reducing caloric intake and increasing exercise, may also help accelerate resolution of clinical signs.

In bitches exhibiting moderate to severe pseudopregnancy, characterized by excessive mammary enlargement, marked lactation, mastitis, or pronounced behavioral changes such as nesting, aggression, anxiety, or depression, pharmacological intervention becomes necessary. Dopamine agonists, particularly cabergoline and bromocriptine, are the drugs of choice, as they effectively suppress prolactin secretion from the pituitary gland, leading to rapid cessation of lactation and resolution of behavioral signs. Supportive therapy, including



analgesics or antibiotics, may be required in cases complicated by mastitis. Behavioral abnormalities that significantly compromise animal welfare or owner safety may be managed with short-term use of sedatives or anxiolytic agents.

In bitches with recurrent episodes of pseudopregnancy or those predisposed to complications, ovariohysterectomy (spaying) is considered the most effective and definitive long-term preventive measure. Surgical sterilization eliminates cyclic ovarian hormone fluctuations responsible for pseudopregnancy and thereby prevents recurrence. However, spaying should ideally be performed when the bitch is not exhibiting active pseudopregnancy, as surgery during the luteal phase may exacerbate clinical signs.

