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Integrating nutrition with therapy: Role of skora-33 in managing *Malassezia* dermatitis in dog- a case report

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Abstract

Malassezia dermatitis is a widely occurring fungal skin disease in dogs which needs good management. This study assessed the influence of SKORA-33 supplementation alongside antifungal treatment on dogs' blood values. The disease was diagnosed based on clinical signs and confirmed by microscopic examination using Loeffler's methylene blue stain. Dogs were treated with antifungal drugs along with SKORA-33, which contains essential fatty acids, vitamins, antioxidants, and minerals. After three weeks of treatment, dogs showed clear improvement, including reduced skin lesions and better hair growth. Changes in blood values were mainly due to secondary infections, not directly caused by *Malassezia*. The study suggests that SKORA-33 is a helpful supportive supplement that improves recovery when used along with standard treatment.

Keywords: *Malassezia* dermatitis, Swab smear, CBC, Loeffler's methylene blue staining, Dog nutritional supplement (SKORA-33)

Introduction

Malassezia are lipophilic commensal yeasts of the skin and mucosa of dogs (Bajwa, 2023) ^[1], particularly those between one and eight years of age, as noted by Bardshiri *et al.* (2014) ^[2]. Certain breeds, such as West Highland White Terriers, English Setters, Shih Tzu's, Basset Hounds, American Cocker Spaniels, Boxers, Dachshunds, Poodles, and Australian Silky Terriers are considered more susceptible to this condition (Hobi *et al.*, 2022; Bajwa, 2023) ^[5, 1]. There is no clear gender or age predisposition (Bond *et al.*, 2020) ^[3]. *M. pachydermatis* is the predominant species in the healthy skin of dogs, *Malassezia* typically cause superficial dermatitis, otitis externa and/ or paronychia (Bond *et al.*, 2020; Guillot and Bond, 2020; Hobi *et al.*, 2022; Bajwa, 2023) ^[3, 4, 5, 1]. In dogs, this occurs secondary to ectoparasites, allergies (flea bite hypersensitivity, food-induced and environmentally induced atopic dermatitis), endocrinopathies (hyperadrenocorticism, hypothyroidism, diabetes mellitus), superficial pyoderma, keratinization disorders or rarely autoimmune diseases. These diseases alter the environment of the yeasts in a favourable way (Bond *et al.*, 2020) ^[3]. *Malassezia* dermatitis can be localized or generalized. Dermatological signs include alopecia, erythema, scales, crusts, greasiness and in more chronic cases, hyperpigmentation and lichenification (Bond *et al.*, 2020) ^[3]. *Malassezia* can proliferate within the stratum corneum, the outermost layer of the epidermis, leading to the accumulation of various metabolites and allergens. Epidermal Langerhans cells and keratinocytes recognize *Malassezia* antigens leading to the formation of antimicrobial peptides and specific cytokines resulting in either a "neutral" commensal state (IL-10, TGF- β) or an inflammatory response (IL-1, IL-6, IL-8, TNF α) (Ruth Ashbee, 2006; Bond *et al.*, 2020) ^[9, 3]. Managing *Malassezia* dermatitis requires both treating yeast overgrowth with antifungal drugs and addressing underlying causes. In addition to medications, non-drug approaches can help improve skin health and reduce symptoms (Marchegiani *et al.*, 2020) ^[6]. SKORA-33 is a plant-based supplement containing fatty acids, antioxidants, vitamins, and minerals to support skin and hair health in pets. It helps maintain skin strength and elasticity, protects against damage, reduces itching, and supports healthy hair growth.

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Materials and Methods

A non-descript male dog weighing 10kg of 5 year old presented to Bark India Charitable Trust, Villupuram with history and clinical signs of alopecia, erythema, crusts and hyperpigmentation, which was tentatively diagnosed as *Malassezia* dermatitis. After a detailed history, physical, and dermatological examination, followed by collection of samples for cytological examination was obtained. Cotton swabs rubbed on the affected sites were used for cytological studies. Blood (5 ml) was collected for the determination of various haematological and biochemical parameters. Yeast counts were assessed by examining 15 microscopic fields, recording the average number of budding yeasts observed before and after treatment. Therapeutic evaluation, pre and post-treatment was based on cytological evaluation (Mean yeast count) and visual analog scale for pruritus (history) generated on day 0 and day 29. Affected skin was sampled with a sterile cotton swab, smeared on a slide, air-dried, heat-fixed, and stained with Loeffler's alkaline methylene blue for 2–4 minutes (Selvi *et al.*, 2015) [11]. Diagnosis was based on the presence of more than one budding yeast per oil immersion field with clinical signs. Dog received oral Itraconazole (5 mg/kg, once daily, 2 consecutive days/week for 4 weeks) (Pinchbeck *et al.*, 2002) [8], antifungal shampoo, a 7-day course of antibiotics, and SKORA-33 supplements (half to one tablet, 10–20 days) according to severity. Haematology and serum biochemistry parameters were taken pre and post treatment for evaluation.

Results and Discussion

Dog presented with dermatological problem suggestive of *Malassezia* dermatitis was screened and found positive for *Malassezia* by direct microscopy. Predominant clinical signs observed in the affected dog was pruritus, erythema, scales, hyperpigmentation and otitis. These findings were in accordance with Selvi *et al.*, 2024 [10], who reported that pruritus, erythema, hyperpigmentation, malodour, and traumatic alopecia are the major clinical signs in dogs with *Malassezia* dermatitis (fig 1-5). Haematological and serum biochemical values revealed no difference between pre-treatment (0 day) and post-treatment (29 day). Staining the impression smear with methylene blue resulted in a monochromatic view of *Malassezia* organisms, which appeared under the microscope as small, oval to peanut- or footprint-shaped structures (Fig.2). Clinical response to supplement therapy was monitored on day 29 after 4 weeks of treatment in terms of cytological evaluation of mean yeast count. The response to therapy on day 29, as compared to day 0 (prior to treatment), was highly significant and there was a considerable reduction in the mean yeast count after treatment. Thus, an excellent clinical response was noticed in a dog supplemented with SKORA 33 along with standard antifungal treatment, with no side effects recorded.



Fig 1: Dog showing erythematous lesions with alopecia at sternal region.

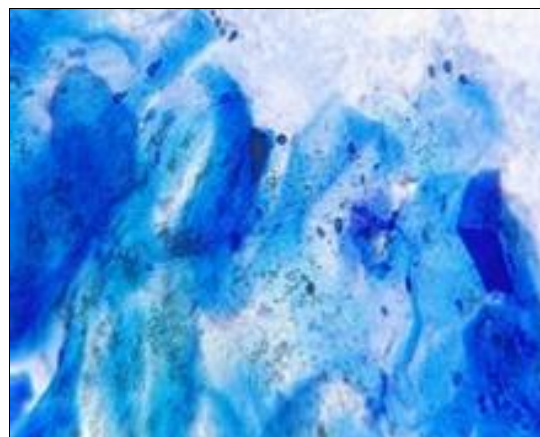


Fig 2: Swab impression cytology showing budding yeast stained with Loeffler's methylene blue.

Table 1: Comparison of hematological and serum biochemical values, pre and post treatment in *Malassezia* affected dog

S. No	Parameters	Pre-treatment (0 th day)	Post-treatment (29 th day)
1	Hb (g/ dL)	12.6	12.4
2	PCV%	36.5	35.53
3	TLC (x 103/ cmm)	12.87	12.58
4	Platelet ((x103/μL)	268	264.7
5	ALT(U/L)	47.9	47.5
6	Total protein (g/dl)	5.3	5.5
7	Albumin (g/dl)	2.3	2.6

Conclusion

The study showed that adding the nutritional supplement SKORA-33 to standard antifungal therapy significantly improved treatment outcomes. Clinical signs such as pruritus, erythema, scaling, hyperpigmentation, and otitis were markedly reduced over 29 days (Fig.1) and hair regrowth was observed. Overall skin health improved, with a significant reduction in mean yeast counts on cytology (Patterson and Frank, 2002) [7]. No changes were noted in hematological or biochemical parameters (Table.1), indicating the supplement was well-tolerated. These results support SKORA-33 as a safe and effective adjunct in managing *Malassezia* dermatitis in dogs, promoting faster and more complete recovery.

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Conflict of Interest

Not available

Financial Support

Not available

References

1. Bajwa J. *Malassezia* species and its significance in canine skin disease. Canadian Veterinary Journal. 2023;64:87-90.
2. Bardshiri B, Tavana M, Peighambarzadeh SZ, Abdollahimi M. Occurrence of *Malassezia* pachydermatis in the external ear canals of dogs with and without otitis externa. Walia Journal. 2014;30:24-26.
3. Bond R, Morris DO, Guillot J, Bensignor EJ, Robson D, Mason KV, Hill PB. Biology, diagnosis and treatment of *Malassezia* dermatitis in dogs and cats: clinical consensus

- guidelines of the World Association for Veterinary Dermatology. *Veterinary Dermatology*. 2020;31(1):27-34.
4. Guillot J, Bond R. Malassezia yeasts in veterinary dermatology: an updated overview. *Frontiers in Cellular and Infection Microbiology*. 2020;10:79.
 5. Hobi S, Cafarchia C, Romano V, Barrs VR. Malassezia: zoonotic implications, parallels and differences in colonization and disease in humans and animals. *Journal of Fungi*. 2022;8:708.
 6. Marchegiani A, Fruganti A, Spaterna A, Dalle Vedove E, Bachetti B, Massimini M, *et al.* Impact of nutritional supplementation on canine dermatological disorders. *Veterinary Sciences*. 2020;7(2):38.
 7. Patterson AP, Frank LA. How to diagnose and treat Malassezia dermatitis in dogs. *Veterinary Medicine*. 2002;97:612-622.
 8. Pinchbeck LR, Hillier A, Kowalski JJ, Kwochka KW. Comparison of pulse administration versus once daily administration of itraconazole for the treatment of Malassezia pachydermatis dermatitis and otitis in dogs. *Journal of the American Veterinary Medical Association*. 2002;220(12):1807-1812.
 9. Ashbee HR. Recent developments in the immunology and biology of Malassezia species. *FEMS Immunology and Medical Microbiology*. 2006;47:14-23.
 10. Selvi D, Kshama MA, Ramesh PT, Isloor S, Mahesh V, Rao S. Diagnostic approach and effective management of Malassezia dermatitis in dogs using itraconazole pulse therapy. *The Pharma Innovation Journal*. 2024;13(4):179-183.
 11. Selvi D, Vijayalakshmi P, Abiramy A, Rajkumar K, Satish Kumar N. Malassezia dermatitis: a potential dermatological threat in dogs. *Raksha Technical Review*. 2015;5:16-19.

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