



IVDD Grades 1 to 5 Explained

What your dog's grade actually means, on one page

PETSLIKEMINE

INTERVERTEBRAL DISC DISEASE

PET NAME	GRADE TODAY	DATE	ASSESSED BY
_____	_____	_____	_____

The grade is the single most important number in IVDD: it is the strongest predictor vets have of whether a dog will walk again, and it drives the choice between rest and surgery. It is a snapshot of how your dog is right now, not a fixed sentence. Find your dog in the table, then read the dividing line that matters most.

GRADE	WALK?	WEE?	DEEP PAIN?	USUAL APPROACH	ROUGH OUTLOOK
Grade 1 - Pain only Arched or hunched back, yelping, reluctant to jump or use stairs	Yes	Yes	Yes	Strict rest and pain relief	Very good. Around 90% of grade 1 to 2 dogs recover.
Grade 2 - Walking but wobbly Weak or uncoordinated behind, knuckling over, scuffing nails	Yes, not normally	Usually	Yes	Often rest, closely watched; surgery if it worsens	Good, roughly 84 to 90%. Watch closely for any slide.
Grade 3 - Can't walk, some movement Cannot stand, but you can see the back legs still trying to move	No	Sometimes affected	Yes	Surgery often advised	Good. Around 90% with surgery vs 70% with rest.
Grade 4 - Paralysed, still feels deep pain No movement behind, often cannot wee without help	No	Often needs help	Yes	Surgery usually advised	Strong: around 80 to 90% with surgery vs 50% with rest.
Grade 5 - Paralysed, deep pain lost No movement and no conscious response to a firm toe pinch	No	Usually needs help	No	Surgical emergency, time matters	Guarded: under 5% with rest; about 60% with surgery, best within 48 hours.

Rough group figures from the veterinary literature: a guide to the odds for dogs as a whole, not a prediction for your individual dog. Your own vet is the only one who can judge your dog's case.

THE DEEP-PAIN DIVIDING LINE

The single biggest factor in the outlook is whether deep pain is present or absent. It is the line between grade 4 and grade 5, and it is why the figures fall away so sharply between them. Deep pain is a conscious response, the dog looks round or cries out at a firm toe pinch, not the leg pulling back on its own. It should be judged by your vet, not at home, because a reflex twitch can mislead.

Written and reviewed by Dr Alastair Greenway MRCVS and Claire Greenway BVM&S MRCVS. This sheet explains and records. It does not diagnose or prescribe. Always follow your own vet's instructions.

How to use. Bring this to your appointment and write in your dog's grade, so every conversation starts from the same number.

BRING THIS WITH YOU TO YOUR NEXT VET APPOINTMENT



IVDD Grades 1 to 5 Explained

Grades change, the neck reads differently, and what to ask

PETSLIKEMINE
INTERVERTEBRAL DISC DISEASE

A GRADE IS A SNAPSHOT, NOT A SENTENCE

Dogs move between grades in both directions. Many improve with the right treatment, and the early grades in particular do very well. Dogs can also deteriorate as the disc problem progresses, which is why your vet wants to recheck and monitor rather than assess once and walk away.

ASCENDING SIGNS: ACT WITHOUT DELAY

If the problems seem to creep forward up the body, for example weakness that started behind beginning to affect the trunk or front legs, or a fast deterioration rather than holding steady, treat it as an emergency and get straight back to your vet.

NECK DISEASE READS A LITTLE DIFFERENTLY

Most IVDD affects the middle of the back, which is what the grades above describe. Disc disease in the neck tends to be dominated by pain and, because the affected cord is higher up, can involve all four legs. As a whole it tends to respond less well to rest than back disease does, which is one more reason a neck problem warrants prompt advice.

QUESTIONS FOR MY VET ABOUT MY DOG'S GRADE

WRITE THESE IN BEFORE THE CONSULT

WHERE TO GO NEXT

Once you know the grade, our guide to deciding between surgery and conservative treatment weighs the path ahead with these same figures side by side, and our guide to strict crate rest covers how to do the resting properly. Find both at petslikemine.co.uk.

Written and reviewed by Dr Alastair Greenway MRCVS and Claire Greenway BVM&S MRCVS. This sheet explains and records. It does not diagnose or prescribe. Always follow your own vet's instructions.

How to use. The grade is the foundation of the plan, not the whole story. Even the frightening grades carry more hope than that first scary number suggests.

BRING THIS WITH YOU TO YOUR NEXT VET APPOINTMENT