LIGHTING THE WAY

The Official Newsletter of the Bearded Collie Foundation for Health

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Code of Ethics For Board of Directors The Bearded Collie Foundation for Health

The board of directors has established the following Code of Ethics which all directors will adhere to. In keeping with our purpose of improving health of the Bearded Collie by promoting research, education, and information dissemination from our Voluntary Open Health Registry, the Board of Directors will:

*Adhere to the policies and procedures established by the directors.
*Hold data obtained for the Voluntary Open Health Registry within BeaCon until published.
*Not become involved in complaints regarding breeder practices, irresponsibilities, or contract issues.
*Not promote one breeder or kennel over another, but will share information with all on health tests that are advisable.
*Not discuss health issues within a line or kennel outside the meetings of BeaCon.

Voted in as a policy, February 2000.

Presidential Reflections

Welcome to BeaCon's first newsletter. It is with eagerness and a sense of urgency that I write the first reflections. My hopes are that you will be inspired to seek an answer to the question: **ARE BEARDED COLLIES A HEALTHY BREED?** Ask different people and you get different answers - yes, no, don't know. The answer comes from one's experience, perception, or beliefs.

Why ask? Health of a purebred dog breed is essential for its conservation, to minimize emotional and financial impact on the dogs and their families, and to optimize performance.

What to do?
The ideal situation involves TWO PARTIES. FIRST is a breeder who does available health screening at the recommended intervals and incorporates that and other health information into their breeding program. SECOND is an owner, who keeps the breeder informed of their dog's health and temperament. Even when this happens, there still cannot be total guarantee of an always normal outcome for all pups. Why?

Some health problems are inherited. Some unwanted genes are passed along to future generations along with the good genes. Both owners and breeders should understand that bad genes come with the good; it's unavoidable. The conundrum is how to minimize the impact.

The environment may have influence and this is difficult to study. Some are firm in their belief that environmental events (e.g., vaccination, diet, heartworm preventive use) "CAUSE" genetic problems. Geneticists will tell you that environmental events may trigger a genetic disorder's becoming clinically evident, but the genetic predisposition has to be there in first place. A person or a dog does not acquire a genetic predisposition

from an environmental event; you get it from the genes you have inherited or a gene mutation.

Some disorders are already known to be genetic and there are health screening tests which differentiate normal from abnormal (see sections on OFA, CERF, BVA, GDC). These tests are available to breeders — examples include hip dysplasia, juvenile cataracts, autoimmune thyroiditis, and elbow dysplasia.

How does one learn whether health problems are caused by the "unwanted" genes or are merely sporadic? Data have to be collected, recorded, and studied over a long period of time. Progress is made when information is publicly available. If a disease is sporadic it will occur infrequently and without a pattern. If a disease is genetic, a pattern will emerge.

Most genetic disorders in the dog are transmitted via an autosomal recessive or polygenic mode of inheritance, which means that both parents are carriers of the trait. The proportion of contribution from each parent is equal in a simple recessive disorder. In a polygenic disorder the contribution from the sire and dam need not be equal. Since the number or the specific effect of the genes involved in polygenic traits isn't known until research is accomplished, no Mendelian prediction can be made.

Individual breeder knowledge about what problems have occurred in their line, and therefore what sire and dam may be carriers, is not necessarily available to others. People fear their reputation and kennel will be hurt by such revelations. This did not happen to those I know of who have shared their knowledge of Addison's with future puppy buyers

Is there a dog based system to collect and record health information on Beardies in an open registry over a period of many years? Yes. BeaCon was started as an independent non-profit health foundation for this purpose. Entry in the registry is free and for Bearded Collies with known sire and dam and whose owner(s) give consent. There are owners who would like to register their dog, but can't because a co-owner does not agree. That's life as a co-owner. I have great empathy for those of you in this situation. Anyone who might embark on a co-ownership arrangement in the future should think through all the pros and cons, including release of health information, before signing on the dotted line.

How likely is the open registry to be successful? That depends upon participation. Some have voiced reluctance to participate because BeaCon's directors are involved with the data collection. There was no other choice for financial reasons. GDC was asked, but can't manage our program because of their current programmatic demands. There was worry that we might prematurely release information or have an unfair advantage in our own breeding programs by knowing what dogs are being reported with what problem. This is unlikely because only 5 of the 11 directors have been involved with data collection. Only two doing data collection are breeders. No director saw all the data until June 2001, except the central coordinator who saw it for the first time in April. For whatever time period a director has been privy to health information, each has been bound by our Code of Ethics. Finally, some thought we might alter a dog's information. That would be ethically taboo.

I believe that verbalized reasons for not participating in the registry are a smoke screen for fear of revelation, that revelation will be place the breeder in a bad light, and damage a hard earned and very good reputation. From my experience as health chair during the 96 BCCA health survey, I can assure you that the quickest ways to an inauspicious reputation with current owners are: (1) To blame an owner for causing a disease without solid scientific proof, or (2) To not tell an owner that Addison's exists in the breed or your line when a vet is struggling to diagnose a sick dog's problem and eventually learns that it is Addison's.

Do you want to know how healthy Bearded Collies are? Search your soul. If your answer is yes, join the registry.

Do you want to avoid letting a health problem of late onset (e.g., juvenile cataracts, progressive retinal atrophy, autoimmune hypothyroidism or Addison's) be perpetuated a long time before we realize that it is serious and there are many carriers of the trait in the population? If your answer is yes, join the registry.

BeaCon offers a system for learning about which dogs remain healthy throughout life, and which do not and why not. If someone has constructive ideas for how to do this even better, you are welcome to contact us. You may even want to consider becoming a BeaCon director - but be prepared to work!

Another registry will become available through the AKC Canine Health Foundation's CHIC program. Participating parent breed clubs decide which known hereditary health problems to include in CHIC. Requirements include permanent identification of dogs and that there must be a test which differentiates normal from abnormal dogs. Data will be reported collectively and without identification for research purposes. An owner can choose to make results (normal or abnormal) part of the public record. The Bearded Collie Club of America is participating in the pilot phase of CHIC. By virtue of program design, CHIC will not deal with health problems where normals and abnormals cannot be distinguished nor will it provide long term health tracking, except for the disorders where repeated exams are done as recommended (thyroid panels, CERF exams).

References

"Health Registries: Addressing genetically mediated disease in purebred dogs will be a primary focus of the new

millennium". By Rodney Remin. Dogs in Canada, September 2000, pp. 46-48.

Breeding Better Dogs. By Carmen L. Battaglia. B.E.I. Publications. ISBN 0-932419-0602.

"The Case for Data Collection". By Malcolm B. Willis. AKC Gazette, August 1996, pp. 42- 44.

Genetics of the Dog. By Malcolm B. Willis. Howell Book House, 1989. ISBN 0-87605-551-X

"Registries and Prioritizing Genetic Diseases". Chapter in **Control of Canine Genetic Disease**. By George A. Padgett, 1998. ISBN 0-87605-004-6

GDC: www.vetmed.ucdavis.edu/gdc/gdc/htm

Respectfully submitted,
Elsa Sell, MD, President, BeaCon for Health & Member, AKC CHF President's Council

Disease Based Registries

OFA (www.offa.org)-Orthopedic Foundation for Animals

Hip dysplasia. Anesthesia is recommended but not required for X-rays. X-ray must be permanently identified. Grading can be done for "prelims" after 4-5 months; certificates are not given until 2 years. Three passing grades are given OFA numbers (excellent, good fair). The four dysplasia grades are not given an OFA number. Grading takes into account various anatomic features of the hip joint, yet these are reported only for dysplastic hips. Differences between right and left are not indicated for those who pass. Unless an owner has chosen the open database, dysplastic hip grades are closed to public information.

Elbow dysplasia. It is polygenic and 3 etiologies can occur independently or together to cause elbow dysplasia. There are no grades for normal and 3 grades for abnormal. Certification can be done after 2 years.

OFA thyroid panel. A dog can be certified normal as early as 12 months. OFA recommends reexamination at ages 2, 3, 4, 6 and 8 years because the thyroid status can change over time. There are other laboratories doing complete thyroid panels with different thyroid component testing. Autoantibodies to 1 or more thyroid hormones should be included in any panel. The recommendation regarding age of testing holds no matter what panel is done.

BVA-British Veterinary Association

The BVA system evaluates hip structure by considering each side separately on 9 different hip joint features; each feature is scored 0-6, with 0 being best. The total for right and left constitute the dog's hip score. All scores done are published in the Kennel Club Breeds Record Supplement. This system is also used in Australia and New Zealand.

CERF (www.vmdb.org/cerf.html)-Canine Eye Registry Foundation

Eye exams for CERF can only be done by a veterinary ophthalmologist. Results are written on a form. The owner receives a copy, the ophthalmologist keeps a copy and submits the third to CERF for research purposes. Eye findings can change over time so it is strongly recommended that yearly exams be done in breeding stock or others where identification of a problem in a line is important. The most frequent heritable eye condition reported in Beardies is juvenile cataracts.

As of 2/28/2001 a permanent identification (microchip, tattoo, DNA) is needed for any dog to be registered with CERF. Exams on dogs with no permanent ID will have the suffix -N after the CERF number. CERF exams are good for 12 months from the data of exam.

The significance of punctate cataracts in Bearded Collies isn't known. If you have a dog with punctate cataracts please have follow-up exams done and report these to the registry so we can learn if they remain static or progress to cataracts which cause disability and which are considered hereditary. The following figures are from the 2000 AKC yearly registrations and from CERF's records online.

Breed	# dogs registered	# dogs CERFed
Bearded Collie	**682**	**105**
Belgian Sheepdog	**398**	**239**
Belgian Tervuren	**446**	**451**
Border Collies	**1911**	**302**
Portuguese Water Dog	**1023**	**768**

Location to order DNA kits:

The most direct URL is
http://cgap/ucdavis.edu
Or
http://www.vgl.ucdavis.edu/research/canine/Samples.htm

Contributions toBeaCon's directed donor fund with AKC CHF

Checks should be made out to AKC CHF and be accompanied by a letter requesting that the money be deposited in BeaCon's directed donor fund. Send to: Erika Werne, 251 West Garfield Road, Suite 160, Aurora, OH 44202

PEAS, PLEASE,
OR THE WORK OF JOHANN MENDEL
A 19th CENTURY SCIENTIST

BY ELIZABETH COOLIDGE-STOLZ

Johann Mendel was an excellent student and particularly interested in mathematics and the sciences. Johann could not afford to attend university, so he chose to enter the priesthood. He moved to the monastery at Brno, in what is now the Czech Republic. There, Mendel taught at the local high school and conducted experiments in the monastery gardens. He worked with many plants and became an experienced plant breeder.

After much consideration, Mendel chose peas to work with because in pea plants, eggs are normally fertilized by sperm cells from the same plant because fertilization occurs before the flower opens. This is called self-fertilization. Self-fertilization over many generations produces pea plants that show the same characteristics. Such strains of plants are considered purebred. Mendel reasoned that if the plants consistently show the same traits, they must contain the same hereditary information. Mendel had observed that many of his purebred strains had contrasting forms of the same trait, such as pea color or pea shape. If he bred a plant from one strain with one from the contrasting strain, the offspring plants would be hybrid, that is, they would contain hereditary information from both purebred strains. Mendel chose seven contrasting traits that were easily distinguished.

First, he cross-fertilized purebred plants with contrasting forms of the same trait. When he crossed a purebred plant producing round peas with one producing wrinkled peas, all of the hybrids produced round peas. More-over, the round peas produced by the hybrids were not visibly different from those produced by purebred plants. Mendel found this general inheritance pattern for all 7 traits.
The hybrid plants showed only one of the two contrasting forms, and the form looked the same in the hybrid as it had in the purebred plant. Mendel termed the purebred plants his parental, or P, generation and his hybrids the first-filial, or F1, generation.

Next, Mendel cross-fertilized F1 plants with each other. Mendel found that some of the offspring plants, the F2 generation, produced round peas. Other F2 plants produced wrinkled peas. Overall, he recorded 5474 round peas and 1850 wrinkled ones.

In his published article, Mendel interpreted his results as follows: **P generatio**n- The parental plants contain two particles, or factors of hereditary information for each trait. For the round vs. wrinkled cross, one parent has two factors for round peas while the other has two factors for wrinkled peas. When the sex cells form in the parents, each sex cell receives one factor, either round (in one parent) or wrinkled (in the other parent).

F1 generation- When the original cell for each F1 plant forms through fertilization of parental sex cells, its contain two factors, one round and one wrinkled. Because all of the F1 plants produce round peas, you can say that the round factor dominates the wrinkled factor. In other words, round peas are the dominant trait and wrinkled peas are the recessive trait (because the wrinkled trait receded, or faded away, in the F1 hybrids);

F2 generation- When the F1 plants form sex ells, half of them contain a round factor and half contain a wrinkled factor. There are four possible combinations of factors in the F2 plants: round-round, round-wrinkled, wrinkled-round, and wrinkled-wrinkled. Because any plant with a round factor produces round peas (the definition of dominance), about 3/4 of the F2 plants should produce round peas. Mendel recorded 5474 round peas and 1850 wrinkled peas. Therefore, 5474/7324= 74.7%, or almost exactly 3/4 round peas. In addition, Mendel concluded that factors pass without change from generation to generation because all round peas were alike and all wrinkled peas were alike.

You can also summarize Mendel's work with modern terminology. (If you think about it, you have almost certainly heard about genes, but not about factors. Different forms of one gene are called alleles. Round and Wrinkled are two alleles for pea shape. The genotype, or genetic makeup, of the parents are round-round and wrinkled-wrinkled.

Note that the purebred plants carry only one kind of allele for the trait of pea shape. This is why self-fertilization of purebred plants produces purebred plants---the genotype does not change. The phenotype, or physical makeup, of the parents are round peas and wrinkled peas. The sex cells formed in the parental plants carry one gene for pea shape, either the round allele (in one parent) or the wrinkled allele (in the other parent).

In his article, Mendel used the letters of the alphabet for his traits. He used a capital letter for the dominant form of each factor and a lowercase letter for the recessive form. In the box figure, you can see that the dominant, round allele is symbolized by R, and the recessive, wrinkled allele is symbolized by r.

F1 generation- All F1 plants have a hybrid, Rr genotype. All of the F1 plants show the dominant, round pea phenotype. The sex cells formed in the F1 plants carry one gene for pea shape, either the R or r allele; **F2 generatio**n- Three genotypes appear in the F2 plants: RR, Rr, and rr. Plants with either a RR or Rr genotype (1/4 and 1/2 of the total) show the dominant, round pea phenotype, whereas only rr plants (1/4 of the total) show the recessive, wrinkled pea phenotype.

The Figure: This box, which shows the genotype of sex cells and the possible genotypes of offspring, is called a

Punnett square (named for a biologist, R.C. Punnett).

Punnett Square showing PxP -> F1 breeding

	r	r
R	Rr	Rr
R	Rr	Rr

Punnett Square showing F1xF1 -> F2 breeding

	R	r
R	RR	Rr
r	Rr	rr

Punnett squares allow you to see the possible sex cells and the possible genotypes of offspring for any given cross. In this case, you can see the combinations of the R (round) and r (wrinkled) allele in the PxP and F1XF1 breedings that Mendel performed.

Additional terms:
When individuals have two copies of the same allele (such as the RR and rr parent genera-tion plants), we can say they are homozygous for the gene in question (pea shape in this case). Homo means same, and a zygote is a fertilized egg cell, so homozygous literally means "same in the fertilized egg."

When individuals have two different alleles for a gene, we can say they are heterozygous for the gene in question. Similar root, but hetero means different.

The Heart of an Addisonian Breeder
By Chris Walkowicz

I recently received the call every breeder dreads. A tear-choked voice said "The vet thinks my dog has Addison's." My heart sank. Though I've had a few other problems now and then over the years like all breeders, this hadn't been one. I was hoping I'd never hear those words.

I fumbled for the right thing to say, realizing I didn't really know a lot. Typically, like most of us, when one can't re-late to a situation, I'd read the scenarios and information about Addison's and then forgotten most of what I'd read. I calmed and soothed the owner, trying to get around the sodden lump that had been breakfast, but was now sitting like a rock in my stomach. As soon as I hung up, I con-tacted the sire's owner and then Elsa Sell, former Chair of the BCCA Health Committee and current President of BeaCon for Health (Bearded Collie Health foundation).

The tests did prove positive. Poor Gabby. Poor owners. Poor me. I was upset of course. But I also knew I had done the best I could, always making sure the dogs I mated were healthy. Sometimes these things just hap-pen. It doesn't do any good to point fingers. All I can do at this point is to support the owners, and cooperate in all studies and tests. Gabby's dam was spayed.

The siblings' owners have all been contacted and have agreed to participate in the familial blood testing. All my dogs have had blood draws for the study, and the sire's owner has agreed to participate as well with tests on all her dogs. I refunded the purchase price of course.

This came out of left field and smacked me in the face like a baseball. The dam had three prior litters, and some of these dogs are six years old. No other progeny have shown symptoms. The dam is now thirteen years old and in great health, as are littermates. (Some have passed on through non-related, old age complications.)

Gabby is doing well on her meds. Her owners have ac-cepted the adjustment and, thankfully, don't blame me. We keep in touch and live each day as it comes.

I encourage breeders to participate in the health surveys and to participate in blood tests. If we breeders set a high priority on this study, perhaps someday we can eradicate this disease.

The strange thing is that, when I acknowledged I had pro-duced Addison's, I feared (as breeders do), buyers would be afraid to purchase dogs from me. ***The opposite was true, however!*** I received more calls than ever. These callers said, "We've been told you're honest." Now, do I think I'm more honest than others? No, maybe I just have the courage of my convictions, and that is that ***until we are open about our problems, we will never de-crease or eliminate them***. I felt horrible for a while until I realized that, percentage wise, we haven't done badly. The buyers felt that way also when I told them how many pups we'd produced and how many had problems.

Since the time this article above the dotted line was writ-ten for the BCCA Beardie Bulletin, I have retired from breeding. I have also discovered that another bitch and my stud each produced an Addisonian. So I've produced three out of 110+ pups, about the same or a little less than the average for the breed. Still too many, in my opinion. God willing, and the cooperation of other breed-ers, we will have a future when no Beardies or their own-ers have to suffer the consequences of Addison's and other diseases.

BONUSES
By Chris Walkowicz

I've always been a strong believer in openness about health issues. Of course, I've filled out my health surveys and sent them in to BeaCon. (It didn't take long to reach its destination since I'm one of the coordinators inputting the information.

But I wanted to know that my puppies were doing ok.

Naturally I've heard from any who have had problems. (Isn't that always the way it goes? We don't squeak unless we have something to squawk about.) So I finally finished my book deadline and reached for my files. 110 puppies over the past 25 years, AKC! Gritting our teeth, Ed copied the survey forms while I typed envelopes along with a cover letter asking owners to please help us gain knowledge on Beardie health. I even sent it to those whose Beardies had passed on years ago -- not everyone will still have records, but some might.

Sure, it took a little time -- much more than filling out surveys on my own dogs. (If they're healthy, it's an easy five minutes. If they've had problems, it might take ten or fifteen minutes.) Not all have responded. But it's worth the effort. This job had definite bonuses. I discovered who had moved without notifying me. (Imagine not remembering to notify your 10-yr.-old dog's owner that you've moved! I can't understand having anything else more important on their minds!) I also received wonderful letters about their WunderBeardies, and an even bigger bonus -- PICTURES! And, it meant healthy dogs to add to the registry, not just those with problems.

But the biggest bonus of all is knowing we're helping Beardies of the future -- and their owners -- to have a better quality life. The more we know, the more we can avoid producing problems. We can take that bonus and bank it!

Chris Walkowicz, the Bearded Lady

A Discussion of Open and Closed Registries

Compiled and Submitted by Scott Cook

This information comes from several sources—The GDC and OFA websites, the Penn Hip Website, and —Linda Weisser, Health Committee Chair for the Great Pyrenees Club of America

A Registry is a place where information is stored. In the dog world, registries store information about diseases or abnormalities that are known or suspected to be genetic. Both the GDC and the OFA are registries.

Many forms of information are available from a registry. The forms of information that are available, and to whom, help to define the difference between ***Open*** and ***Closed*** registries.

The GDC is an *open* registry, the OFA is a *closed* registry. What this means is that OFA releases information only on *clear dogs* (although as of last July, owners can sign a release to allow OFA to publish abnormal results), while GDC releases information on *all dogs*--clear and affected. GDC and OFA use basically the same "system" for evaluating hips. The plates are taken the same way--VD Pelvis with stifles included. The X-Rays are submitted to a "panel" of experts for evaluation. These experts often read plates for both registries. To some degree, OFA has a modified open registry in that it does make public information on clear animals. Penn Hip is a somewhat different system of evaluation. It involves x-rays but also "stress" positions. Penn Hip measures hip laxity, which may be a predictor of future hip development. Only a vet trained and licensed in the system can do Penn Hip x-rays.

We will use hip dysplasia as our example but the method applies to all forms of genetic "disease" for which a registry maintains records.

When you send a hip plate to OFA you send only the x-ray and an application form with the dog's name and AKC number. If the dog has one of the 3 normal ratings (excellent, good, fair), the result is a “clear”. The owner is sent a clearance certificate with an assigned OFA #. The OFA makes available to parent clubs and the AKC, a list of those dogs that have cleared. Information on dogs that did not clear is strictly confidential and released only to the owner and the veterinarian, unless specified otherwise by the owner.

When you submit a plate to GDC, you send the x-ray, an application and a three or four-generation pedigree on the dog. As with OFA, information about the reading of the X-Ray is sent to owner and veterinarian. The GDC maintains a pedigree database on all dogs whose plates they have read. The GDC may release to a National Parent club a list of dogs that have *cleared* just as OFA does. The *total* information on clear, non-clear and relatives can be obtained from GDC by application from an individual. Or, if a breeder wants information on a prospective stud dog or a puppy that they wish to purchase, they may submit a request to GDC and they will be given information on that individual dog and on all offspring and relatives for which GDC has records. This information includes both clear and affected individuals and is made possible by the computerized records and pedigrees that they maintain. There are strict guidelines for requests for information.

The GDC is also an open registry, which means that information is available to the public on an individual dog and on its ancestors, relatives and progeny. This is made possible by the database. The GDC wants the plates of dogs that are not clear, and in order to get all of this information in the database GDC refunds any charges for dogs that do not clear.

One of the weaknesses of OFA is that people simply do not submit affected x-rays. Who wants to pay OFA to tell you what you already know? With OFA it doesn't matter much anyway, since they keep no records of relationships between individual dogs.

GDC's no-charge policy means that we can urge everyone to send "bad" plates. That gives a much more accurate picture of what is really going on.

The OFA is primarily a "registry" body. They issue numbers for dogs who do not show certain conditions; such as hypothyroidism, elbow dysplasia, or cardiac abnormalities. The GDC is both a registry and a "research" body. The GDC has research databases and registries, on conditions in many breeds, ranging from adenitis in Poodles, to dwarfs in Pyrs, to craniomandibular osteopathy in Westies. They search for genetic links in many diseases. The pedigree database makes this kind of thing possible.

Now that we have a basic definition, why does it matter if we use one or the other? Aren't all registries equal?

Well, no they're not, and that has to do with genetics and selection. Suppose that you want to breed to a certain male and he has a hip clearance number. So far, so good. But what if he is the only dog in his litter that has been cleared? Or suppose that two of his littermates are dysplastic? Or suppose that his sire produced a number of dysplastic offspring from different bitches? Almost all genetic "problems" have complex modes of inheritance and it is extremely important for a breeder to have as much information as possible on clear dogs, affected dogs, offspring and collateral relatives – in other words, complete family information. This is quite difficult to obtain because most dogs are in pet homes where health screening is very infrequently done unless encouraged and sometimes financially supported by the breeder (e.g., include cost of X-Rays and reading in purchase price of puppy so that you can learn these vital pieces of information).

Closed registries do not make this information available and in most cases, do not maintain pedigrees that make it possible to trace links of inheritance. All geneticists will tell you that, while it is interesting to know the status of an individual un-affected dog, a breeder attempting to eliminate or avoid a given problem must have as much information as is available on all related individuals.

Now, in the best of all best possible worlds, all breeders would make all information, "good" and "bad" available to anyone interested. However, we know that not all breeders are honest and some are afraid for their reputations; and in some cases we are talking about breeders and dogs that are dead or have left the breed. Only open registries can make (and continue to make) genetic information available for the benefit of individual breeders and for the greater benefit of the breed as a whole.

For me, the open vs. closed registry situation is a difference of philosophy and commitment. The only way that progress in the control of genetic disease can be achieved is by the use of open registries. It is interesting and useful to know that an individual dog has clear hips (the OFA system) but it is more useful and far more important to know the hip status of all family members.

As Dr. Padgett (dog breeding saint) has said many times, the only way that any of us can deal with health and genetic problems in our breeds is to be totally open, honest and willing to share. Open registries are a step in that direction.

As Dr. Padgett also says, no progress can be made in the elimination of genetic defects until we have all information and until we all start talking to each other.

OBSERVATIONS FROM DR GEORGE PADGETT ON DOG BREEDING AND GENETIC DISEASE CONTROL

"Traits will not disappear by themselves. Nature will not save us because natural selection has nothing to do with dog breeding" **

"What dog breeders do best is lie to each other."*

"Dog breeders in general need to face genetic defects as a realistic part of the problems encountered in the process of producing good sound animals." **

"We need to quit whispering about defects, and gossiping about defects, and instead set up a sound program that allows the standard selection procedures to go on so that we breed good dogs and avoid major defects." **

“Breeder participation is the most confusing part of any control program because each breeder is sitting back waiting for the next breeder to admit something is wrong with their dogs. No one wants to be first because they think it will be used against them and, under current customs in nearly every breed club, (at least in America), IT WILL.” **

“The reasons behind this attitude are many fold and too complicated to discuss here, but perhaps needless to say the attitude must be changed. It will not change overnight. Breeders must understand that genetic diseases are present in the breeding population of each and every species and in each and every breed. There is no escape by closing your eyes. Genetic diseases need to be recognized as a problem to contend with and one that can be controlled.” **

“It must be recognized that the ethical thing to do is to discuss genetic defects and to know what defects are present in the breeding population of your dogs as well as the breed.....Only peer pressure will alter attitudes in this regard and thus breed clubs and groups within clubs will play a significant role by stating that it is ethically correct and beneficial to one’s own dogs and to the breed as a whole to openly discuss defects. Unless this occurs there is no hope of controlling any genetic disease.” **

** Quoted from: DOG BREEDING AND GENETIC DISEASE CONTROL By Dr. George Padgett.

Odds and Ends

Donations

Contributions to BeaCon and the open health registry should be mailed to:

Chris Walkowicz
1396 265th Street
Sherrard , IL 61281-8553.

Donors of up to $100 receive a logo pin
For $100-199 you receive a sterling silver angel pin
For $200 and up receive a 14K gold angel pin
The pins can be viewed on the BeaCon Web site.

Addison Tape from the National Specialty

The videotape of Dr. Oberbauer's seminar on the Addison's update can be obtained from Elsa Sell for $10. There are only a few left. Contact her at:
beardiebeacon@earthlink.net

Open health registry forms can be obtained by contacting any of the Board of Directors.

Visit BeaCon on the web at-www.beaconforhealth.org

The BeaCon Board of Directors

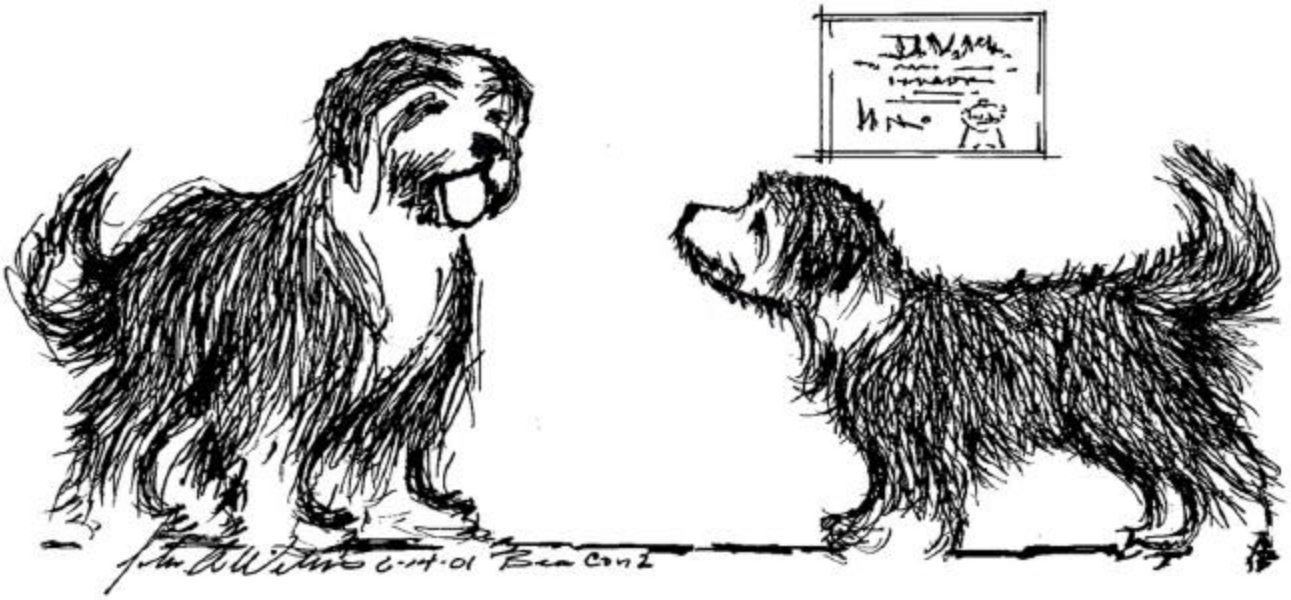
Elsa Sell-beardiebeacon@earthlink.net
Sharon Dunsmore-Kincuran@durham.net
Chris Walkowicz-walkoway@revealed.net
Scott Cook-k9luvr@peoplepc.com
Kathy Coxwell-Hattieboo@aol.com
Gordon Fitzgerald-grfitz@bellsouth.net
Cheryl Poliak-cpoliak@hotmail.com
Linda Aronson-PetShrink1@aol.com
Karen Drummond-beardie-mom@worldnet.att.net
Elizabeth Coolidge-Stolz-editormom@mediaone.net

Any member of the Board of Directors may be contacted at these addresses for any questions you might have.

Future editions of the BeaCon newsletter will be available free to anyone interested in the Health of Bearded Collies. Please contact the editor if you wish to receive any future editions of the newsletter by e-mail, didn't receive the first edition, want to have another person added to the mailing list or want to be removed from the mailing list.

GR Fitzgerald
142 Glenhill Drive
Houma, La 70363
Or
grfitz@bellsouth.net

MacLean and Company



" Your first Vet visit? When he takes your temperature – don't sit down!"

Open Registry Booklet(s))) Order Form

The Bearded Collie Foundation for Health Open Health Registry Booklet can now be ordered by completing this form and sending it to Elsa Sell. Booklets will be printed after sufficient orders are received. Prices include book rate mailing and insurance. For Non-USA orders, please contact Elsa Sell regarding mailing costs BEFORE filling in and mailing the form.

Elsa Sell
262 Liberty Road
Milner, GA 30257

Registry Participants: ____ booklets at $28.33 = $_____.____

Non-registry Participants: ____ booklets at $32.33 = $_____.____

I would also like to donate to BeaCon. = $_____.____

Add $4.12 for priority mailing and insurance per booklet = $_____.____

Total enclosed = $_____.____

Make check, money order or cashier's check payable to BeaCon. US dollars only Please.

Name and address where Open Health Registry Booklet(s) is to be mailed:

_____

_____

_____

Lighting the Way
The BeaCon Newsletter
142 Glenhill Drive
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