

L I G H T I N G

T H E

W A Y



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Presidential Reflections

By Elsa Sell MD

As we near the end of summer in rainy Georgia, I'm amazed that our Beardies haven't turned green with mold, and that the sheep are still walking (it has taken more than one treatment to keep foot rot under control). The drought is broken and one wonders what nature has in store for this fall and winter.

Along those lines, I wonder what is in store for Beardies and their health and temperament in the coming years. Widespread interest and commitment to documenting frequency of wellness and health and temperament problems are essential for progress.

BeaCon's open health registry is a source of such information. It began 3 years ago and it is now available on line (www.beaconforhealth.org/open_registry_log.htm) for data entry. By the time you receive this newsletter, year 4 of the registry will be underway. According to those who have tried the on-line system, it is not as difficult as they

thought it might be. For those not comfortable with on-line data entry or no access to the internet, written forms are available.

As of September 1, there are 267 owners and 566 dogs from the UK, Australia/NZ, Germany, and North America. Several UK Bearded Collie Clubs and USA regional Bearded Collie clubs have distributed the registry form with their newsletter recently. These are the signs of interest and commitment. I am awed by owners whose lives are so busy and sometimes complicated with work issues or the care of their elders or ill children (or selves) taking the time to report their Beardie's wellbeing or health problems!!!!

On the other hand in the USA at least, not very many include health information in their breeding related ads. If you don't believe me, just count the breed ads with and without health screening test results in the Beardie Bulletin; it is well below 50%. I dream of the day when it will be fashionable to report health screening tests alongside the beautiful photographs of various conformation and performance successes. Perhaps this will come from pressure by puppy buyers, if not from breeders themselves.

As required by the USA parent club, the litter listing for Bearded Collies in the monthly Bagpipes includes the OFA hip results for both sire and dam. Initiating that procedure (January 1998 was the first litter listing containing such information) wasn't easy for those who worked to accomplish it. Yet, it was an import-

tant first step to sharing health information. Could the litter listing require a current CERF for sires and dams in the future?

The parent club of another breed, the Portuguese Water Dog, requires owners to fully disclose all health data on dogs being advertised (memorials and dogs less than 1 yr are exceptions). Non-breeding ad health statements must refer to 3 health screens. Breeding related ads must refer to 4 tests and copies of health certificates must be submitted with each ad. If a dog is not tested or is too young to test – that is stated in lieu of test references.

Enough said. I hope each reader will find an article in this issue that will stimulate curiosity and consideration of what he or she can do to promote health in the breed. Dr. Battaglia's article was written for breeders of all breeds—so it is not specific to Bearded Collies.

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The Importance of Autopsy

By Elsa Sell MD

Even mention of this topic makes most people squeamish; they don't want to bother the vet; they don't want the cost; they don't want to do anything more to their dog (never mind that he/she is gone to the Rainbow Bridge); they are exhausted by the cost and extent of medical care. I learned the value of autopsy long ago as a pediatric resident in training. Not all deaths had clear cut causes and it was only with autopsy

that there came better understanding of the disease process in puzzling cases. The results provided a comforting closure to the family members. That lesson was repeated often enough in my 25 years of medical practice to value the procedure highly; although there were cases where autopsy did not help. I remembered this lesson when our first Beardie, dear Heather the Elder Feather (CH Kinloch Willow Signature, UD) died 6 wks after going blind at age 10 ½ yrs. Without an autopsy we would not have known that she died of an invasive nasal carcinoma!

Here's another illustrative case. At age 10 months, this young Beardie began to exhibit fear behaviors of everything. Aggression towards family members and strangers came along soon after. Dermatological and allergic type problems also developed; these were attended to medically and homeopathically. Because of escalating aggression towards family members the dog was euthanized when young. The family was heart broken with having to make the decision, even though human safety was of concern. Autopsy showed scarring on the frontal lobes of the brain, in an area which can affect personality in humans. The vet indicated to the family that the condition would not have improved and that it wasn't possible to know what caused the brain scarring or when it occurred. The autopsy findings gave relief to the family after the agonizing decision to euthanize a young dog whom they dearly loved. Permission was given to relate this case in anonymity in

the hopes that others will consider an autopsy on their dearly departed beloved Beardie.

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"True leaders are not those who strive to be first but those who are first to strive and who give their all for the success of the team. True leaders are first to see the need, envision the plan, and empower the team for action. By the strength of the leader's commitment, the power of the team is unleashed."

Author Unknown

**What If?
Thinking the Unthinkable.
Linda Aronson, DVM**

As breeders of beardies we do the best we can to make sure the puppies we produce have the best conformation, health and temperaments – even if type is something we may never all agree on. We also try to do everything we can to ensure those puppies go to the best homes there are. We do everything to safeguard their futures with contracts stipulating what will happen if the owners decide they no longer want to or are unable to keep their puppy, when pets should be spayed or castrated, and a lot more guidelines for those puppies we send to show homes. However, contracts are, as we all know, very hard to enforce. We also spend a lot of time talking to the new owners about every aspect of puppy care, feeding, grooming, training, house-breaking, sports, toys, crates and health problems that they should be aware of within the

Breed. We also know that in their excitement of adding a new family member most of it went in one ear and out the other. If we have established the right bond with the new owners we hope they will come back to us for every question they have, and at first they do, but many want to just enjoy their own puppy and communication begins to dwindle. Staying in touch and frequently checking in with all the owners is something we should be doing though, and not just to make sure they are participating in the registry. We need to know how every pup we produced works out, for our own information, certainly to improve our abilities to assess future litters, but what about once they are grown up?

We need to know of any health problems, but particularly those which are known to be inherited or may be inherited. There is a scenario that was presented to us recently though, and it is one that may help us try and formulate a plan in case we find ourselves in the same situation. An adult Beardie was diagnosed with Addison's disease and the owners opted to have the dog euthanized before letting the breeder know. I don't know the reasons for the owners' decision, although we can speculate on them. I do know the breeder was very unhappy. She would have wanted the opportunity to recover the dog and treat it. On the one hand we can look at this as a decision that was solely the owners to make. It may have been made based on their financial ability, there unwillingness to care for a dog with an illness that would require constant monitoring and would not be the healthy com-

panion they wanted, or it could have been based on the recommendation of the veterinarian. Sadly, many vets feel it is their business to make decisions based on their perceptions of the owners and their circumstances. Many vets will not have treated cases of Addison's and not be able give an accurate prognosis – that most dogs with hypoadrenocorticism can live happy and pretty healthy lives with appropriate treatment. At this time, making the decision, the owners were probably not thinking about the breeder. Obviously, there are times when a dog is in pain, failing fast, has been in a bad accident when the owner should make the decision without consulting the breeder, with the best interests of the dog only being important. This was a situation in which the breeder felt she should have had the opportunity for input, to ask that if the owners did not want to pursue treatment they return the dog to the breeder. Given that adoptive homes rarely want to take on a dog with chronic (and expensive) illness, that is probably committing herself to caring for the dog for the rest of its life. She was not given that option, however.

While she could stipulate in her contract that the owner should consult the breeder whenever the dog becomes sick or euthanasia is being considered – a useful clause, but as with the rest of the contract basically impossible to enforce – is there anything more the breeder could have done? It's not easy to bring up the subject of what if... we don't like to consider the possibility that those cute fluff balls could ever de-

velop a life threatening, chronic disease, especially when they are at what should be the start or maybe the middle of a long and happy life, but to prevent us from finding ourselves in this situation, it is what we need to do. We need to be comfortable discussing the health problems that afflict our basically healthy breed, particularly the ones we know to be prevalent in the breed. We can tell the buyer we have done everything currently possible to give them a healthy puppy, but that there are no guarantees, and some puppies will be afflicted despite our best efforts. Having discussed the possibilities we then need to go one step further. We need to lay our commitment to the puppy on the line, to say that if the dog becomes sick, and the owners for whatever reason feel they cannot cope with the illness, that we will take that puppy back, whatever its age, just as we would take it back if it was healthy but the owners changed their minds. We made the decision to bring the puppy into the world, and want to be there for the decision as to when it should leave. Then we need to remind the owners of this commitment at appropriate intervals. Say something once, even something of such impact, and it will be forgotten, it takes at least three iterations for anything to be remembered.

Hopefully, all your puppies will live full and healthy lives with their new owners, but if that is not to be the case, we have a lifelong responsibility to them, and should make it clear that this is so.

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MEET THE DIRECTOR GORDON "FITZ" FITZGERALD

Gordon Fitzgerald, more popularly known as Fitz, is flying high about Beardies. He supports his crew of two by serving as an ambulance company EMS helicopter pilot. He also provides a couple useful services to dog lovers: cleaning carpets and selling vacuum cleaners.

Fitz has been “in dogs” for 35 years, including Dalmatians, Irish Setters and English Cocker Spaniels. He even served as Prez, Veep and Board member of the Hawkeye Irish Setter Club of Greater Des Moines. After falling in love with Beardies in 1990, he showed his dogs in conformation and dabbled in herding.

Who Is It???

See if you can identify any of these pictures of some of the more influential Beardies in the history of the breed. The answer will be under the picture.



6 CC's BOB, Crufts 1975
Moolniglet
Brambledale Heatherneed
Ch. Osmarle Bonnie Blue Braids
Ch Brambledale Balthazar.

Fitz’s wife, Jerri, just loves them. Their two children are grown, with a daughter in Carlsbad, CA, and a son (and two grandchildren) near New Orleans. The Siamese Fighting Fish are the Beardies’ only competition in the Fitz household today.

Fitz’s current passions (besides his family, furry and otherwise) are rescue and health. He helps rescue, foster and transport homeless Beardies in need. He signed on as a BeaCon board member more than three years ago and has served as newsletter editor for the past two years. His expertise as editor of BeaCon’s Lighting the Way came by practicing on the newsletter of the Magnolia BCC. Although no longer a member of the BCCA, he is a member of the Carolinas BCC and is helping with the 2003 National.

Known as the one at Beardie Camp with the most “sheep treats” on his clothes, Fitz really enjoyed seeing Beardies and their owners have fun.

He supports BeaCon because he wants to help insure that the breed he has come to adore remains healthy and vigorous. He says, “Knowledge is the only weapon against genetic health problems. An Open Registry is the only way to bring that knowledge to the breeder and the puppy buying public.”

Feeling that rumor is the biggest and most harmful area in the dog fancy, Fitz says, “More breeders have been damaged without foundation by rumor than any combination of actual health problems in their lines. The only way to fight rumor is

through fact....The Open Registry is the only way a breeder can prove the rumor is false.”

He feels the greatest danger to the Bearded Collie as a breed today is “ignorance and an unwillingness to take active steps to combat the health issues facing Beardies today.

He continues with his opinion of the Open Registry: When the Open Registry was first announced, there was an uproar predicting dire consequences that would take place. One of those was inaccurate entry of the data, accidental or intentional. The only incorrect entry I know of happened to one person, one of our Directors, and I am pretty sure it was accidental; furthermore the error was corrected immediately upon discovery, as would be the case for anyone having a dog in the registry.. Another presumed consequence was misuse of the data. I ask now if

Who Is It???



Brambledale Balthazar
With two children X B. Bluebell
Benedicta
Owned by Lynne Sharpe
(Nee Evans)

anyone can show any instance of this. Finally, there was the expressed belief that persons themselves involved with Beardies couldn't handle this data with accuracy. Who besides Beardie lovers would spend the enormous amount of time and effort necessary to do this? Especially since there is no source for the money it would cost to initiate the open registry with some commercial provider which are few and far between.

He continues, "The only thing that can possibly cause the Open Registry not to help Beardies, Beardie breeders and Beardie buyers alike is an unwillingness to participate. Including Beardie owned people who have healthy Beardies. The more Beardies in the data, the better the registry. The data will only give an accurate picture if we have a truly representative distribution of dogs with and without health problems entered into it. So please take the time and fill out an entry for your Beardie. You can do the breed more good that way than any other."

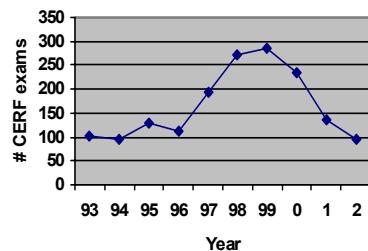
Fitz jokes that he participates on BDL and BCL "more often than most people probably want me to." He doesn't mince words when talking about ethics and the Right Thing To Do. He says Beardie owners can contact him any time for health information, either by phone (985-879-1913) or by e-mail (grfitz@bellsouth.net). If he is unable to answer your questions, he'll put Beardie owners in touch with someone who can.

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Eye Conditions

Summary from CERF Update, Winter/Spring 2003 Lighting The Way.

1) The number of CERF exams has



steadily declined from 1998-1999. The reason for this decline is not known. The trend will be reported yearly.

2) CERF "Categories" are diagnoses which haven't yet been defined as a hereditary disease for a specific breed. Category E includes punctate cataracts – more on this to come.

3) Yearly CERF exams are an important part of a responsible breeding program because some inherited eye problems have later onset and because some category diagnoses change with time to heritable problems.

There are no secrets to success: don't waste time looking for them. Success is the result of perfection, hard work, learning from failure, loyalty to those for whom you work, and persistence.

Colin Powell

Cataracts in Bearded Collies

Source: CERF Research Database, 1991-2002

Questions

- Do punctate cataracts persist and are they precursors of hereditary cataracts?
- What is the frequency of different types of cataracts?
- Are hereditary cataracts a problem in the breed?

The CERF (Canine Eye Registration Foundation) research database contains all exams which are done by participating ophthalmologists recorded on CERF forms.

The table below (table 1) gives the number of CERF exams for 1991 through 2002. The percentage figures are based on total number of exams.

Those figures provide useful but limited information because the data are based on the number of exams done and because so few Beardies have CERF exams.

To try and answer the questions listed above, BeaCon funded a project to study cataracts in individual dogs. CERF provided information

from the research database. Confidentiality of dog identity was maintained by assigning an unique sequential number to each dog.

Cataracts are classified by:

- 1) Location on the lens (cortex, capsular, nucleus, sutures).
- 2) Anatomical position (anterior, posterior, equatorial)
- 3) Degree of involvement (punctate, intermediate, generalized/diffuse).

Dogs Having A Single CERF Exam (n=154). Information is given below. The cataracts were classified by the examining ophthalmologist as significance unknown (sig unk) or hereditary. (table page 9)

The several key findings are:

- 1) Cortical cataracts occurred more often in the anterior cortex.
- 2) Cataracts in the sutures are more often posterior.
- 3) Intermediate cataracts (n=41) were classified as hereditary in all locations and anatomical positions except when in the capsule.

Punctate cataracts were classified as

| Item | Male | Female |
|--|-------------|-------------|
| # exams | 784 | 1043 |
| # normal exams | 591 (75.4%) | 834 (80%) |
| # cataracts - both hereditary and significance unknown | 146 (18.6%) | 150 (14.4%) |
| # cataracts - hereditary | 73 (9.3%) | 64 (6.1%) |

| Location | Anatomical Position | Type | Sig | Unk | Hereditary |
|----------------------|---------------------|------------------|-----|-----|------------|
| Anterior (n=94) | Cortex | Punctate | 43 | 27 | |
| | | Intermed/diffuse | | 18 | |
| | Sutures | Punctate | 4 | | |
| | | Intermediate | | 2 | |
| Posterior (n=71) | Cortex | Punctate | 14 | 7 | |
| | | Intermediate | | 11 | |
| | Sutures | Punctate | 38 | 8 | |
| | | Intermediate | | 4 | |
| Equatorial (n=33) | Cortex | Punctate | 16 | 13 | |
| | | Intermed | | 4 | |
| Nucleus (n=10) | Unspecified | | 4 | | |
| | | Punctate | | 4 | |
| Capsular (n=18) | Unspecified | Intermed | 2 | | |
| | | Punctate | | 2 | |
| | I | intermed | 2 | | |

both hereditary and significance unknown in all locations except in the capsule. **This means that some dogs with punctate cataracts get CERF clearance with Category E on the CERF certificate and some don't get CERF clearance. That's a real conundrum don't you think?**

More Than One Exam with At Least One Exam Normal (n=46).

The first CERF was normal in 41 dogs examined before the age of 3 years. One or more subsequent exams showed an intermediate hereditary cataract in 1, punctate non significant cataracts in 25, and punctate hereditary in 14.

The first exam in 3 dogs revealed a punctate cataract (1 was classi-

fied as hereditary); all were normal on subsequent exam, which was done by a different examiner than the first exam.

Results of the sequential exams revealed another noteworthy finding. **Location of punctate cataracts changed!** Following are examples. The age of exam is in years and the * indicates that the ophthalmologist classified the cataract as hereditary!

- Normal age 2-3 → posterior and equatorial cortical punctates (sig unknown) 5-6 → normal one month later → equatorial and posterior cortical punctate (sig unknown) 6-7
- Normal ages 1-2, 3-4, 6-7 → anterior and posterior cortical punctate age 8-9, → nucleus punctate 9-10

- Normal age 2-3 → posterior cortex punctate* 6-7 → equatorial cortex punctate (sig unknown) 1 day later
- Normal age 2-3 → posterior and equatorial cortical punctates (sig unknown) 5-6 → normal one month later → equatorial and posterior cortical punctate (sig unknown) 6-7
- Normal 6-12 mo → posterior suture punctate* 3-4 → normal 5-6 and 6-7 → posterior and anterior cortical punctate (sig unknown) 8-9
- Normal 6-12 mo → posterior suture punctate (sig unknown) 3-4 → normal 4-5

These individual cases are so valuable; thanks must go to the owners who sought repeated opinions from one or more ophthalmologists. Would that others could do this too.

What have we learned about punctate cataracts? The location and hereditary significance of punctate cataracts changes, that the onset is usually after age 3, and there are too few cases to know if having a different examiner made a difference in the exam results or classification as hereditary or significance unknown..

Seven dogs with sequential exams had cataracts that were classified as hereditary at each exam (with one exception).

- Nucleus intermediate 2-3 yr and 4-5 yr
- Ant cortex intermediate 9-10 yr and 10+ yr

- Equatorial cortex punctate twice at 10+ yr
- Posterior and anterior cortex intermediate 1-2 yr, 2-3 yr, and 10+ yr with equatorial cortex and nucleus intermediate also at 10+ yr
- Posterior cortex punctate 4-5 yr → post cortex intermediate 6-7 yr
- Nucleus intermediate 0-3 mo → nucleus punctate 2-3 yr (sig unknown) → nucleus intermediate 3-4 yr → equatorial cortex punctate 7-8 yr
- Posterior cortex intermediate 6-7 yr → equatorial cortex intermediate 7-8 & 8-9 yr → anterior sutures intermediate 9-10 yr

Note that some of these dogs' cataracts were in different locations on different examinations.

Summary

- In only 1 case did punctate cataracts progress to more extensive involvement - to intermediate.
- It is unknown whether a dog with punctate cataracts produces offspring with cataracts because there is no pedigree linkage available through CERF.
- Punctate cataracts may persist, they may disappear, and their anatomical location and position may change.
- The location and position of other cataracts may also change.
- It is impossible to know the total frequency of hereditary cataracts since ophthalmologists have disparate approaches to classifying punctate cataracts as hereditary or not.
- Bearded Collies have the type cataracts (location and position) which are hereditary in other breeds

- It is not known whether different examiners account in part for different findings on sequential exams.

Where To Next? The data suggest that far too few Bearded Collies have even a single CERF exam, and very few have sequential exams as is recommended by CERF.

Thus, we encourage all breeders to perform CERF's yearly on breeding stock to at least age 5 years. In addition we hope that breeders understand the importance of asking ALL puppy buyers to have their dog's eyes examined if they are offspring of dogs having cataracts classified as hereditary. This is the only way we will even have a chance to learn whether Bearded Collies with a cataract pass the problem on to their offspring! You need not feel shy asking puppy buyers to help better the breed's health; some would view that both parties share in the responsibility to do so.

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"Greatness is not in where we stand, but in what direction we are moving. We must sail sometimes with the wind and sometimes against it -- but sail we must, and not drift, nor lie at anchor."

Oliver Wendell Holmes

Breed Dilemmas and Extinction

**By Dr. Carmen Battaglia Ph.D.
Reprinted by permission
Visit Dr. Battaglia at his website:
WWW.breedingbetterdogs.com**

No breed seems to be free of dilemmas. For some it begins with the conflicts that continue among club members or the breeders who question the carrier status of stud dogs or the offspring they produce. Others believe it is the lack of quality observed in the winners, the growing number of carriers or the increase in dreaded diseases. Whatever it is, when breeders gather, the dilemmas usually dominate their conversation. But regardless of the topic, the solutions rest with the breeders and the elected officers of their clubs. They have the power to change and create their breed's reality. A look at the big picture suggests that it all boils down to whether they will choose to continue on a path of trial and error or whether they are willing to try and make a difference.

Over the past three decades the sport of dogs has steadily increased in popularity. More than 15,000 events are held annually that involve 1.5 million exhibitors in addition to those who attend as spectators. In such an environment it is now easy to see why so many breeds are entering a critical period in their destiny. The facts show that with this kind of growth there also comes an increase in the number of inexperienced breeders and a continued rise in health and conformation problems.

Analyses of many breed problems suggest that some of their most important problems are not so obvious. For some, it is the lack of quality in the dogs being bred. For others, it is the lack of skills needed to manage and exhibit what they own. But in general, the lack of training in the fundamentals of how to breed and manage what they keep continues to persist. What breeders keep should be given more attention when you consider that 60% of the top dogs in most breeds are not owned by their breeders. This suggests a lack in the skills necessary to recognize the better pups when they occur.

When all of these problems are combined they produce what many believe are the primary reasons for the reduction in breed quality and the decline in the size of many gene pools. All of this is happening despite the advances being made in technology and the improvements that have occurred in health testing and nutrition.

This lack of progress can be traced to a fundamental problem. Surprising as it may be, it is not the lack of information or willingness to act that hinders progress. It is the persistence of outdated beliefs and attitudes that are based on folklore and myth. According to Padgett (1991), most breeders continue to believe that the dogs they own are genetically normal. This, he says, is because of the investment of time and money they have in their stock that they do not wish to see diminished. For these reasons most usually avoid talking about problems when they occur. Therefore, when the

opportunity occurs to notice one or more trends in their kennel, they keep the results secret. In the meantime the knowledgeable breeders work alone and their isolation makes little or no impact on their breed outside of their own kennel. This scenario seems to produce one of the greatest dilemmas facing most breeders and their clubs.

A closer look at this situation suggests that most breed problems rest on the shoulders of the bitch owners because they control the matings, produce the pups and sell them to their new owners. In short, they have both the power and the influence to determine quality or the lack thereof. They hold not only the keys to the gene pool but also to the future of their breed.

What makes this problem solving so difficult begins with what they believe to be true. Because there is a prevailing attitude that most dogs are genetically normal, when an abnormal pup occurs or a recessive gene expresses itself, most avoid talking about it. Those who talk about their problems are considered to have dogs that are less than average or perhaps abnormal. Because these attitudes prevail and because they are passed along from one breeder to the next, it is easy to see why problems and many diseases have not been eliminated. For example, it has been reported (Padgett) that the average number of defects in most breeds may be fourteen, which has not seemed to concern many clubs but this statistic takes on more meaning when comparisons are made to specific breeds. For

example, the German Shepherd Dog has at least 7 defects, while the Pekinese are known to have 14 and the Beagles 31, which is more than twice the average, but significantly less than the highest, which is the Rhodesian Ridgeback with 58. Other breeds with high number of defects are Cocker Spaniels with 52 and Bulldogs with 44.

In this environment it is not surprising to find that the problems of most breeders and their clubs are not in reaching their goals but in establishing them. As mentioned earlier, the root of these problems can be found in the misguided belief that most dogs are without defective genes. After years of this kind of thinking, the impact on many breeds has become predictable.

Since reliable estimates have not yet been developed for each breed, health histories and breeder behavior have not become the next best alternatives. While individuals working alone cannot solve breed problems, organizations such as the AKC in conjunction with national breed clubs (parent clubs) can develop programs that can make a difference. Using new technologies and ideas, stronger educational programs can be developed. It is especially important that they reach the novice who continues to use outdated trial and error breeding methods. For too many, the words "pedigree analysis" remains just a phrase. Unless the novice gets help, breed problems will worsen and the number of carriers will continue to increase. As their frequency multiplies, more dogs will become

| <u>Who Is It???</u> | |
|--|--|
|  | |
| Mr. & Mrs. Lewis Breeders/Owners: | |
| II Working Group | |
| 1988 | |
| BIS Working Breeds of Scotland | |
| 20 BOB, 4 BIS, BIS Crufts 1989 | |
| 25 CC's(Bitch CC record holder) | |
| Junior Warrent Record Holder (101 points) | |
| Top Puppy 1984 | |
| Potterdale | |
| Ch. Tamewalley Easter Song at X | |
| Ch. Orrora's Frank | |
| 6/11/1983 | |
| Ch. Potterdale Classic Of Moonhill | |
| Excellence is never an accident; it is always the result of high intention, sincere effort, intelligent direction, skillful execution and the vision to see obstacles as opportunities | |
| Author Unknown | |

Table 1. AKC Dog Registrations (1997-2001)

| 2001 | Rank | Breed | 2001 | 2000 | 1999 | 1998 | 1997 |
|-------------------|--------------|----------------|----------------|----------------|----------------|----------------|-------------|
| 112 | Salukis | 84 | 79 | 80 | 63 | 67 | |
| 113 | Bel Terv | 84 | 84 | 78 | 89 | 106 | |
| 114 | BelShp | 83 | 80 | 80 | 85 | 101 | |
| 115 | Ret-Flat | 82 | 100 | 75 | 98 | 84 | |
| 116 | PBGV | 73 | 83 | 72 | 100 | 92 | |
| 117 | Bdlngrn | 66 | 54 | 57 | 56 | 57 | |
| 118 | Span-WelSpr | 61 | 63 | 58 | 57 | 60 | |
| 119 | W Ptg Grif | 55 | 66 | 44 | 37 | 41 | |
| 120 | Briards | 51 | 61 | 57 | 60 | 58 | |
| 121 | Span Am W | 49 | 45 | 57 | 62 | 68 | |
| 122 | Lowchen | 49 | 44 | 37 | 24 | 35 | |
| 123 | Span Clum | 47 | 60 | 43 | 51 | 46 | |
| 124 | Black & Tan | 47 | 47 | 48 | 55 | 57 | |
| 125 | Anat Shep | 42 | 48 | 49 | 41 | 45 | |
| 126 | Pulik | 40 | 36 | 48 | 36 | 0 | |
| 127 | Pol Low Shp | 40 | | | | | |
| 128 | Mini Bull | 40 | 42 | 49 | 42 | 44 | |
| 129 | Kuvaszok | 35 | 48 | 49 | 59 | 84 | |
| 130 | Spin Ital | 33 | 6 | | | | |
| 131 | Fin Spitz | 30 | 2 | 30 | 27 | 39 | |
| 132 | Scot Deer | 28 | 28 | 27 | 27 | 33 | |
| 133 | Ret Curl | 27 | 25 | 25 | 31 | 28 | |
| 134 | Kom | 26 | 23 | 32 | 31 | 40 | |
| 135 | Canaan Dog | 26 | 25 | 20 | 18 | 11 | |
| 136 | Span Field | 25 | 28 | 28 | 36 | 49 | |
| 137 | Span Field | 25 | 23 | 33 | 22 | 21 | |
| 138 | Greyhounds | 25 | 28 | 28 | 36 | 49 | |
| 139 | Sealyham | 24 | 18 | 21 | 17 | 28 | |
| 140 | Skye Terrier | 24 | 23 | 25 | 38 | 31 | |
| 141 | Pharaoh | 23 | 19 | 16 | 20 | 19 | |
| 142 | German Pin | 23 | | | | | |
| 143 | Span Sussex | 20 | 16 | 21 | 22 | 16 | |
| 144 | Dandie | 20 | 33 | 38 | 30 | 33 | |
| 145 | Ibizan | 18 | 12 | 13 | 17 | 19 | |
| 146 | Plotts | 18 | 35 | 30 | 8 | 0 | |
| 147 | Fox Am | 18 | 14 | 14 | 15 | 13 | |
| 148 | Harrier | 11 | 6 | 6 | 10 | 11 | |
| 149 | Otterhound | 8 | 7 | 2 | 4 | 9 | |
| 150 | Fox Eng | 7 | 8 | 5 | 7 | 6 | |
| Total Reg | | 2001 | 2000 | 1999 | 1998 | 1997 | |
| All Breeds | | 461,863 | 506,727 | 527,023 | 555,964 | 564,165 | |

inferior. Out of this scenario comes a breed's worst problem. One that first begins by repeating itself over and over until it prevails. It begins when breeders can be heard to say "it's just another problem of this breed". This scenario, when repeated year after year, serves as a reliable signal that skill levels are dangerously low. For example, there are growing numbers of breeders who produce pups of such poor quality that they must sell them on limited registrations or on spay/neuter contracts. Both actions send a signal to the buyers that the pup lacks quality. As larger numbers of breeders begin to sell pups this way, the number of registered dogs in their breed declines and their gene pools begin to shrink. This problem is becoming more widespread than previously thought. It will translate into the demise of several breeds. For example, in 2002 there were 38 breeds that registered fewer than 100 dogs each year for five consecutive years (1997-2002). As seen in Table 1, there were only 4 exceptions to this trend among these breeds. More importantly, there were 44 breeds that registered fewer than 100 litters each year for this same five-year period. This five-year downward trend for both dog and litter registrations points to another issue. It is called survival. The data suggests that for some breeds there is a possibility for extinction which could occur within the next ten years.

The dilemma of declining registrations in a breed signals yet another symptom, that being the decline of gene pool diversity. Twenty-three

of the 38 breeds listed in Table 1 showed a steady decline in registrations and are candidates for a loss of gene pool diversity.

The AKC and its breed clubs collectively spend millions on health research aimed at the reduction of health problems and the carriers. In such an environment problems should be getting smaller not larger. Standing in the way however, seem to be four problems that complicate matters. First, the widespread attitude that most dogs are genetically normal, which leads to the second, the tendency to avoid talking about problems when they occur. Third, the general lack of skills needed to breed better dogs and the fourth, which is related to the first three, that most clubs have not established their goals and have no mechanism linking pedigrees to test results. These four scenarios have proven to be the best mechanism by which breeds hide, rather than solve their problems. The net effect is that their problems increase along with the carriers who persist at the expense of their breed.

Developing a mechanism that can expand the base of education, coupled with the willingness to share information, is the challenge. Given today's technology such efforts are well within the grasp of the AKC and every parent club. The first step begins by establishing goals and agreeing on a list of problems to be addressed. The second involves the development of a strategic plan that includes finding better ways to use test results along with better methods for identifying carriers. One

recommendation was offered in the 2002 AKC/DNA Committee Report. It suggests that AKC provide the link that bridges pedigree information with test results. The third step requires a mechanism that will motivate clubs and breeders. One approach has been to include incentives. Some of the most effective motivators have been titles, certifications and awards. All have proven to be effective ways to motivate people. The following includes some of the known ingredients that can help address these problems.

1. Open each program to all breeders.
2. Offer titles, awards and other forms of recognition-incentives for those who achieve success.
3. Develop continuing education programs that include:
 - Modes of inheritance
 - Breeding strategies
 - Pedigree analysis
 - Litter and puppy evaluation
4. Provide a mechanism that collects and distributes information about each problem.
5. Establish a link between positive identification, test results and pedigrees.
6. Include website and e-mail support.
7. Provide camera-ready reports and articles regarding the status of each project with updates and success stories:
 - Newsletter editors
 - Webmasters

No program is perfect and there is always room for improvement. Given today's advanced technolo-

gies, these steps are well within the Grasp of those interested in solving breed problems. It is important to remember that information is power and that those who accumulate, study and organize it can surely reap its benefits.

References:

- AKC, 2002 Board Committee Report on DNA, AKC, 260 Madison Ave, NY, NY
Padgett, George A Control of Canine Genetic Diseases, Howell House, NY 1998
Padgett, George, "Genetics I introduction", 1991 Beagle Review, darcroft Publishing, Wilmington, VT, Vol. 1, No. 1, winter 1991, Pg 14-16
Teeling, Mary and Roethel, Cynthia, Editor, "Genetic Diseases, disease frequency and gene frequency of the Rhodesian Ridgeback", a Health and Genetics Seminar presented by George A. Padgett, Michigan State University, Veterinary Medicine, 2001

About the author-

Carmen L. Battaglia holds a Ph.D. and Masters degree from Florida State University. He is an author of many articles and several books, an AKC judge, researcher, well known lecturer and leader in the promotion of breeding better dogs. Dr. Battaglia is also a popular guest on TV and radio talk shows, including several appearances on Animal Planet. His seminars on breeding better dogs, selecting sires and choosing puppies have been well received by breed clubs. Those interested in learning more about his writings and seminars should visit his website.

Canine SLO FAQ
By Andrea J Chee
Reprinted with permission from the
SLO list

What is SLO?

SLO is an autoimmune disease of dogs which can cause severe claw problems in otherwise apparently healthy dogs. It is characterised by the loss of claws from more than one paw - eventually all claws may be lost. Other symptoms may include: receding quicks, secondary infection (often with a strong smell), claw splitting (usually down the back of the claw), pain, distorted/twisted claws and lameness.

What is an autoimmune disease? Essentially, AI diseases are related to allergies. The immune system is supposed to attack foreign substances which pose a risk, such as viruses or bacteria.

If the immune system reacts to things which are essentially benign, like pollens or nuts, you get an allergy. If it attacks some part of its own body, you get an AI disease. Your dog's claws are damaged because the dog's immune system is damaging them.

The immune system needs to be in balance - if it's too weak it can't fight off infection, if it's too active it attacks things it shouldn't.

Age

Most dogs first show symptoms of SLO at 4 or 5 years of age, however dogs of all ages have been reported as having developed it, including puppies under one year of age.

More in the next newsletter

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.

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 or snail mail, didn't receive the earlier editions, or want to be removed from the mailing list.

G. R. Fitzgerald
142 Glenhill Drive
Houma, La 70363
gfitz@bellsouth.net

Donations

Contributions to BeaCon and the open health registry should be mailed

to:

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

First time Donors

For up to \$15-\$99 you receive a logo pin

For \$100-\$199 you receive a sterling silver angel pin

For \$200 and up you receive a 14K gold angel pin

The pins can be viewed on the BeaCon Web Site.
[Http://www.beaconforhealth.org/](http://www.beaconforhealth.org/)

E-Mail Contest

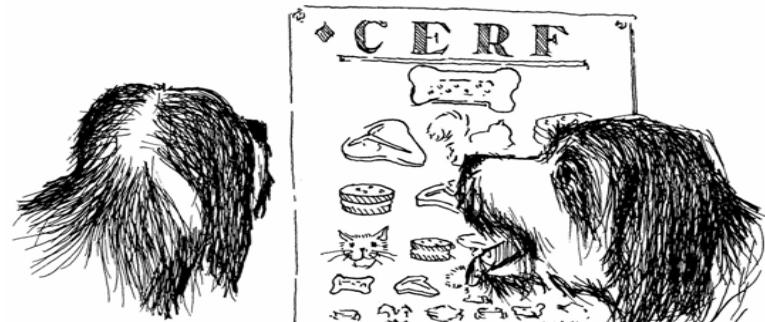
Don't forget, if you elect to receive your copy of the BeaCon Newsletter by e-mail, you will be entered into the drawing for some great Beardie "stuff". Just contact the editor at; gfitz@bellsouth.net to get your name on the list. Not only can you win a nice prize, but the postage saved can be used for health issues. Thanks!

The BeaCon Board of Directors

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Any member of the Board of Directors may be contacted at these addresses for any questions you might have. Please contact the Board if you have any ideas or wish to participate in any of BeaCon's ongoing projects.

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"It's the new eye chart. It tests for 'Can Easily Recognize Food!'"

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- Mail to Elsa Sell, 262 Liberty Rd, Milner, GA 30257
- Overseas customers for Year 2 book (price will depend on local printing costs and mailing).

UK/Europe - Contact Jo Tucker (jo@cimda.fsnet.co.uk)

Australia/New Zealand - Contact Mia Sedgwick
(lochmoor1@bigpond.com)

- Contact Elsa Sell for prices and mailing costs.
 - If a purchase is to be a gift for someone please give their name to place on the document(s). Name and mailing address to whom item (s) is/are to be sent:
-
-
-

Year 3 will be available Late Fall

Contact any Board member for more details

"This is the beginning of a new day. You have been given this day to use as you will. You can waste it or use it for good. What you do today is important because you are exchanging a day of your life for it. When tomorrow comes, this day will be gone forever; in its place is something that you have left behind...let it be something good."

Author Unknown