E-MAIL NEWSLETTER EXTRA!

Trust But Verify - The Advantage of Open Health Registries.

From the Double Helix Network News
- the newsletter about genetics and
hereditary disease in the Australian
Shepherd, Winter 2004. Reprinted
with permission.
by CA Sharp

Ellen, an established and respected breeder, mated one of her bitches to a stud owned by David, another established and respected breeder. She kept a male pup who turned into a top competitor and an excellent sire. A few year later Ellen started receiving reports that some of her male's offspring had cataracts. Ellen had rarely experienced cataracts in her bloodline but, since it was a common breed problem, she had requested a copy of a current CERF exam form on David's stud and had asked about eyes and other health issues in his line before she bred her bitch. David had denied having any problem with eyes.

Ellen started talking to other breeders, trying to find out where the problem had come from. In the process, she heard rumors that numerous offspring of David's male either had cataracts or had produced them. Some people claimed the dog himself had developed them when he was 6 years old. After more investigation she learned that some of these rumors were true. David had lied to her. When she confronted him, he refused to give her a current CERF report on his dog and threatened to sue her if she pursued the matter further.

Ellen was furious and frightened. David had put her breeding program and those of others at risk. His actions had caused avoidable misery to dogs and their owners. She knew remaining silent would only add to the problem, but what could she do?

The story of Ellen and David is a composite of several incidents. Sadly, scenarios like this have played out time and again in breed after breed. Concerned breeders like Ellen work with each other and share information. They

place ads or write articles aimed at educating other breeders. They may develop lists of dogs known to have had or produced a genetic disease. And sometimes one or more "Incorrigibles" like David force them to abandon their efforts. For many years, the culture enveloping purebred dogs has provided more support to the Davids among us than it has for the Ellens....

Novices often ally themselves with mentor breeders while they are learning the ropes, but not all mentors are created equally when it comes to knowledge and honesty about genetic health issues. Even experienced breeders can be led astray by people they thought they could trust. Fortunately for us and our dogs, things are beginning to change. . . Although open health registries and published screening tests results have been commonplace in some European countries (as has mandatory reporting), too many in the purebred dog culture in the USA have been indifferent if not actively opposed to the open registry concept. . . .

Advances recently include - OFA developing it's semi-open registry service, breeds being able to participate in the voluntary AKC CHF Canine Health Information Center program, and individual organizations maintaining their own programs. . . With the open registries you can discover what dogs have failed a particular test, what results are recorded for a particular kennel and which offspring of a particular stud have results recorded. Since the US databases do not list negative results without the active consent of the dog's owner, some information may not be available. While you cannot know the status of an unlisted animal, conspicuous absences can suggest questions to ask if you are interested in acquiring or breeding relatives of the absent dog. Beware sires or kennels that have many missing names for a screening test that should be standard.

Active participation in open registries needs to become the gold standard for serious breeders.



The Official Newsletter of the Bearded Collie Foundation for Health

> VOLUME IV ISSUE I

Spring, 2004

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President's Musings

By Elsa Sell

Volunteers and donors

make it possible for many organizations to exist and BeaCon is no exception. Each director, past and present, gives of their time and knowledge. Each donor or volunteer gives their service or funds. We continue a tradition begun last year, of thanking these important people who help bring you what BeaCon has to offer the Beardie community. Individuals and organizations are listed alphabetically; there are past directors of the board, and donors/volunteers prior to 2003 and for 2003. In 2004. we will continue to recognize volunteers and annual donors on the web page, changing donor category when amount donated puts you into a higher category.

SAY WHAT? When asked if his dogs were enrolled in BeaCon's open health registry, a breeder said "no, that's only for sick dogs." **Folks, this is a myth!** Just one more time, I will repeat what has been well known for a long time by ge-

neticists, veterinarians, and many others – healthy dogs are essential in any health registry, open or not. Are OFA or CERF only for dogs with hip dysplasia or cataracts or autoimmune thyroiditis? Nope.

Ongoing Open Health Registry Data Collection. The fourth year registry entries close on June 30, 2004. Owners with dogs in the open registry will receive reminder notices in May to do their dog's update, either on-line or by hard copy.

UPDATE on Addison's Project (see article in newsletter). MORE BEARDED COLLIE DNA CHEEK SWABS are needed for this project! If your Beardie's DNA is not in the study, without delay, order a free kit for each of your Beardies from http://cgap.ucdavis/Addison's.htm

Breeders and owners - send me questions which you would like to have answered about the project. There will be an informal session on Addison's at the specialty. The researchers are unable to attend in person, but will provide answers for me to share with you.

Check out the OFA web site (www.offa.org). Do a search using the AKC registration number of a dog who has had an OFA screening test done. Dogs who have both OFA database listings and CHIC certifications are now cross-referenced from the OFA site. Dogs who have a CHIC (Canine Health Information Center) number will be listed in the OFA database with the CHIC logo, which will be linked to their information in the CHIC database. This helps breeders and owners using both sites find health data on dogs. Read the requirements of the Beardie Collie CHIC

program (established by the BCCA) on this site.

PRA (progressive retinal atrophy) exists in our breed. There are few cases, B U T, where there's one, there are likely others. This is a hereditary disease in other breeds. Let's not have it sneak up on us. Get CERFs done on all breeding mates, follow the CERF testing frequency guidelines set by the BCCA for CHIC participation, encourage pet owners to have their dogs checked if you have PRA in your line. CERF URL is: http://www.vet.purdue.edu/~yshen/cerf.html

Next Mini-survey. We invite you to tell us what topic you would like to see as the next mini survey focus. Send your ideas by June 1 to Karen Drummond at: 208 Greengate Drive

Columbia, SC 29223 beardiemom@worldnet.att.net

Reflection for 2004. BeaCon begins its fifth year in April. It has been a very busy and productive 5 years and we anticipate this will continue the next 5 years with increasing open registry participation worldwide. It is my hope that our work combined with owner participation and cooperation will let future generations of Bearded Collie lovers reflect on the wellness in the breed.

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Update on the Addison's DNA Project (E. Sell)

Grant # 225 (AKC CHF) – Establishing a Genetic Linkage Between Addison's Disease and DNA Markers. Dr.

Anita Oberbauer and Dr. Thomas Famula. UC Davis. The following information is from the mid-year 2 progress report and e-mail communications.

Objective 1. Collect pedigree data, Addisonian status, phenotypic information, and buccal swabs for extraction of DNA to use in genomic screening. As of 10/15/03 there are 1254 Bearded Collies (6.5% with Addison's), 1394 Standard Poodles (10.5% with Addison's), 408 Leonbergers (2.9% with Addison's), 709 Portuguese Water Dogs (3.7% with Addison's), and 31 West Highland Terriers (25.8% with Addison's). Beardies participating are from Australia, Canada, Denmark, England, Ireland, Scotland, New Zealand, Norway, Poland, Slovakia, Spain, Sweden, USA.

Objective 2. Statistically estimate the heritability of Addison's disease with a complex segregation analysis. The heritability estimates are quite high; Bearded Collies 0.71, Standard Poodles 0.75, Leonbergers 0.73, Portuguese Water Dogs 0.76. There are too few Westies for analysis.

Objective 3. Apply a regressive logistic model to the data to evaluate a mode of inheritance. With this approach, a single locus, autosomal recessive mode of inheritance is suggested for the Standard Poodle. In the Bearded Collie the data suggest a major locus but not unequivocally. This mode of inheritance may be proven statistically if a sufficient number of dogs are added in future analyses.

Objective 4. Utilize the results of the regressive logistic model suggesting a single locus of large effect segre-

gating in a breed(s) to initiate genetic screening in an effort to identify a genetic marker linked to that locus. Based on evidence from objective #3, in the Standard Poodle which has provided the most statistically significant data, the investigators are working from the premise that a single gene of large affect regulates the expression of the Addisonian phenotype.

A subset of an approximately 800 dog Standard Poodle family has been assembled to begin scanning. Using 182 highly related Standard Poodles, screening has begun but linkage has not yet been identified. Screening has also begun on a family of 92 Portuguese Water Dogs.

The report states that objectives #1 and #2 are completed; #3 and #4 remain to be completed.

Some have asked about the project budget – how much, where does the money go. Here are the expenditures for the first 18 months of the current project (\$34,300; total for 2 yrs was approximately \$46,000)

Survey data collection kits - \$5,030 DNA isolation and storage - \$2,700 Staffing - \$20,100 Prelim screening of DNA - \$6,470

Staffing is for the research associate who collects and collates the samples, distributes sample collection kits, runs the lab work and manages lab data collection, and evaluates the pedigrees. The next two year project cycle budget is \$60,734 with increased amounts designated for DNA isolation and storage, staffing, and materials related to DNA screening.

If you have a Bearded Collie in the

Addison's study who was normal when the blood specimen or buccal swab was submitted for DNA, and this dog now has Addison's disease – PLEASE NOTIFY THE RESEARCHERS ASAP!!!!!! (http://cgap.ucdavis.edu/Addison's.htm)

No doubt, everyone who has owned or bred an Addisonian Bearded Collie wants the lab to have found the marker(s) last year. Likewise, for non-breeders and those who are just beginning in Bearded Collies. A DNA marker to unequivocally identify carriers would assist breeders enormously in planning matings, with the ultimate goal being to eliminate Addison's disease from the breeds in which it is hereditary. Impatience with where we are after nearly 5 years is understandable. Remember that there was a significant recruiting gap of nearly two years. Additionally, it is vital to grasp that success comes only with getting enough samples, adequate funds to do the research, and some degree of luck with respect to markers chosen for testing. These are reasons that no one can reasonably give a timeline for finding a marker.

Participation by complete families (defined as progeny, sire/dam, grand-parents if all are alive) with at least one affected Addisonian dog is very helpful to the study. This is entirely dependent on cooperative breeders doing the foot work to find the family members and get the owners' help – not an easy task, but doable if you set your priorities to accomplishing it. REMINDER to those who have frozen semen in storage on deceased sires, remember that can be used for DNA extraction – contract the research lab for shipping details.

Spotlight on Marya (Mia) Sedgwick By Chris Walkowicz





Now

Our representative "down under" is no stranger to the Beardie World. Although she's owned and shown Doberman Pinschers, a Pyrenean Mountain Dog, an Old English Sheepdog and a "magical" Bouvier des Flandres, her heart now belongs to Beardies. Currently, she has three Beardies in her new house, recently built in Bungonia, New South Wales, Australia. But when my husband and I visited her last year, I found she made the house expandable to accommodate more.

For many years, Mia was an RN specializing in OT/ER/ICU care of humans. In addition, she is a qualified facilitator and creator of adult training programs.

Mia has participated in conformation with her Beardies and hopes to join the ranks of breeders soon. Currently, she is a member of the BCC of Victoria. Prior to that she served as Vice President and as the newsletter editor of the BCC of New South Wales. She uses these skills to produce Beardies International, a magazine representing the Beardies of the world. She says the magazine is a source of great joy for her as it gives her the opportunity to personally liaise with fellow Beardie lovers around the world. "I have found the Beardie world enormously creative in so many aspects - I wonder if our Beardies who can show us different

ways of doing the same thing rubs off on the humans!!! It (Beardies International) is a sheer delight to edit and publish."

In addition, Mia has served as the inaugural President of BONE to the present. She says, "Thanks to our wonderful team, we have managed to rescue between 300-400 dogs." In her "spare" time, she serves on the Members Education Committee for the RNSWCC and is assistant co-ordinator for the Working Dog Group (which includes Beardies in Oz) Judges Training Programme for the same organization.

She's an enthusiastic member of the BeaCon board, running the minisurveys, because of her heartfelt belief in the aims of the organization. She believes the Open Health Registry is important because "it will sustain the health of Beardies in the long term and encourage good breeding programs."

Due to her busy life, she participates usually as a lurker on bdl and bcl, jumping into discussion on issues of health and education. Mia is always willing to help. Contact information is Lochmoor1@bigpond.com, phone 0248-444-456.

Mia also tries to keep up with her love of reading (you should see her amazing library!) and music, in between her activities and planning a Beardie garden/activity center at her new house. Beardies are always in the forefront, however. She says, "I spoilt myself by having a wonderful Beardie Educational Tour in both the UK and USA. Beardie owners everywhere were so open and free with their knowledge and experience, and permitted me to handle their dogs to assist my learning

"In my quest for knowledge of our

lovely breed, I am in constant awe of the generosity of Beardie breeders around the world. They have shared not only of their knowledge but also allowed me "hands on" to assist me in understanding our lovely breed. There are so many to acknowledge – I am sure they know who they are."

Thank YOU, Mia, for the knowledge you've shared with us!

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Lost and Found

By Chris Walkowicz

This article is reprinted with permission from Dr. Carmen Battaglia, AKC CAR

Dogs enhance our outdoor adventures. Those of us who have dogs prefer to have them with us whenever we can. They're perfect companions for the hunter. But even the best trained dog can be separated from his owner, and many outdoor enthusiasts own other types of pets as well.

Nearly two million horses, rabbits, coatimundis and other animals are safer today because of the American Kennel Club (AKC). Although the AKC is a registry of purebred dogs, their Companion Animal Recovery (CAR) program accepts enrollment of all species, including a baboon, 73 pot-bellied pigs and a two-toed sloth. Naturally, the most popular pets -- dogs and cats -- boast the greatest number of enrollments.

Since 1995 when CAR was launched, 146,122 pets have been reunited with their owners (as of June 30, 2003). Dr. Carmen Battaglia, President and CEO of the program, says the system links veterinarians, shelters, rescue groups and other animal organizations with pet owners through permanent identification -- microchips and tattoos. He sees CAR as an

opportunity to make a difference and to eliminate the need for the heartrending lost pet signs in neighborhoods.

"We recover a pet every eleven minutes. Our wall is full of letters," Dr. Battaglia says. "There are so many moving individual stories, including a little boy's pet rabbit, a military dog being transferred from California to Germany and a dog who survived seven months in a Pennsylvania winter before being reunited with his owner."

Microchips are suggested because tattoos can fade or be changed. A veterinarian inserts a microchip the size of a grain of rice in the neck of the animal. The HomeAgain microchip is recommended because it stays in place and has an unalterable number. This chip's individualized number can be read by any universal scanner. A portion of every enrollment goes to the purchase of scanners. To date, CAR has contributed more than \$2 million to provide 20,000 scanners to shelters, SPCAs, humane societies and animal control agencies.

Owners can order microchips from the internet for \$63.50 (including enrollment) or purchase them through veterinary clinics where purchase costs may vary. Assistance dogs are enrolled at no charge. Clubs and shelters often sponsor clinics for microchipping animals as well.

Permanent Protection

After the veterinarian inserts the chip under the skin, the owner fills out the form provided and enrolls the pet with CAR. The one-time fee of \$12.50 includes permanent listing, and updates are free. If the pet is lost anytime in its life, the animal is scanned and CAR is contacted with the chip number. It's important for owners to provide alternate contacts and to update information if they move or change veterinarians. Owners

who travel frequently can contact CAR prior to their trip with an e-mail, a fax or mail, giving contact instructions. The CAR website, www.akccar.org, provides addresses and numbers.

Along with the chip, a tag is provided to be attached to a collar and alerts any rescuer that the animal is enrolled with CAR. If the pet is ever sold or given to another person, provisions are made for transferring records. The original owner provides the new one with a letter confirming transfer of ownership. This is completed by the new owner and sent to CAR with a fee of \$6.00.

California has enrolled the largest number of animals, although Colorado has had more recoveries. It doesn't matter where or when an animal is found – or where the owners might be. Help is available. Wherever a caller is located, CAR has a round-the-clock 365-day hotline (1-800-252-7894) for anyone who has lost or found an animal that is listed in the worldwide database.

A German Shorthaired Pointer's owners were traced to China where they were traveling. Macie had escaped from the dogsitter and the panicked pup had been hit by a car. Her tagged collar lay several feet away. Fortunately, a woman stopped to help, found the collar and called the number

Who is this???



on the tag. With CAR's staff calling the alternate numbers, they were able to reach the dog's owners before the dog-sitters knew she had escaped! The owners were able to make arrangements with Macie's veterinarian for her care until they returned.

Emergency Preparation

Each year, hundreds of pets are lost during hurricanes, tornados and other emergency situations. During a hectic evacuation, animals can escape. Owners might not be home during a disaster and can be prevented from returning home to rescue pets. Worrying about their pets causes needless stress, worry and heartache for owners.

"We want to make sure every pet that is separated from its owner during severe weather can be reunited with that family," Dr. Battaglia advises owners, "It is so easy to have one's pet microchipped and enrolled in the database, it would be heartbreaking to let that be the one thing to keep a pet and its owner apart."

Even if the pet is evacuated with the owner, most emergency shelters do not allow animals, and humane societies might be full. Plans should be made in advance for someone who could care for your pets in a safe location.

When making provisions for human members of the family during a possible disaster, people should remember food, water and medications for their pets as well. Emergency plans should include keeping vaccinations current and a copy of the certification in the car or emergency pack.

CAR's website, located at www.akccar.org, reads: "A permanent charitable fund has been established with the goals of providing resources, support, funds, and other assistance to Search and Rescue animals and han-

dlers participating in rescue and recovery efforts in connection with natural or civil disasters; to veterinary units providing support to the canine rescue teams; and to not-for-profit animal shelters and similar not-for-profit organizations providing care for domestic animals orphaned or displaced as a result of natural or civil disasters."

It's Never Too Late

Imagine the delight of Simba's owners when they were contacted that the Bichon Frise been found after he'd been missing four years! Angela Rush, Southfield, Michigan, says "I was in shock and so excited. We figure he'd been stolen because local veterinarians and humane societies had been alerted about his ID."

Searches for Simba had had been to no avail, and the owners eventually moved from Virginia to Michigan. One day they received a call from a friend (an alternate number) who asked if they were sitting down. Their former veterinarian called to say Simba had been scanned and ID'd at a shelter about twenty to thirty miles away from the owners' former home, an example of how important it is to continue updating information.

Rush says, "The chip has proven itself. I wouldn't have an animal without it."

When cats are lost, they often become victim to larger animals, as well as to cars and other dangers. After Bramble wandered away, Deborah Gregory, Shoreline, Washington, feared coyotes had killed the Manx cat. One year later, Bramble was found across Puget Sound. Other than a small weight loss and a flea infestation, Bramble was no worse for wear, recognizing her owners immediately and bossing around their two new cats. Gregory says, "We are taking our other two cats in to the vet for their microchips!"

CAR employees are patient.

They don't give up when the going gets tough. A German Shepherd Dog was found in Lakeville, Minnesota, but his owner lived in Costa Mesa, California. He was called at work to notify him that Nick had been found, but unfortunately, he no longer was employed there. So the CAR representative called the owner's home, where an answering machine picked up. At the alternative number, another answering machine was on duty. The second alternative number reached a real person who said the owner was traveling with the dog and suggested his parents be called...but his parents were on vacation! Obtaining the name of their motel, the dogged caller obtained the number and called (by this time in the wee morning hours). Although woken up, his parents were happy to receive the call and contacted their son. Nick and his owner were reunited just one hour later.

Many years ago, someone tinkered with a lock and let our champion German Shepherd Dog out of our car while we were out of town. We searched for Brandy, alternately crying and calling her name. We were fortunate to find her several hours later. But it would have been comforting to know she had a permanent I.D. and that it was recorded with AKC CAR.

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Potential Poisonings from Medications Intended for Human Use

By Jo Tucker

Over-the-counter (OTC) drugs and prescriptions intended for humans are common place within the home, but what will happen if your dog becomes exposed to these potentially poisonous agents?

Many drugs are not very toxic and will probably not even warrant a trip to

the vet, but some can cause serious intoxication which will need urgent veterinary attention. The following are some of the most commonly encountered poisonings. If you suspect your pet has ingested potentially harmful drugs, veterinary assistance should be sought immediately.

Sex Hormones & Steroids

Oral contraceptives and hormone replacement therapies contain oestrogens and/or progesterone. Even in large quantities, if these drugs are ingested they rarely cause any more than mild gastrointestinal upset. Progesterone could disrupt oestrus in female animals.

Corticosteroids and anabolic steroids, used for body-building, rarely cause anything more than gastrointestinal upset.

Multivitamins and Minerals

Ingestion of large amounts of multivitamin, folic acid and multimineral supplements do not usually result in more than gastrointestinal upset, except for:

Iron salts - these are corrosive and cause liver and heart damage. Multivitamins rarely have enough iron to cause systemic toxicity, although it is important to check the dose ingested. The toxic dose for elementary iron is greater than 30mg/kg bodyweight. Clinical signs of iron toxicity develop within 6 hours and consists of severe irritation around the mouth or cheeks, vomiting and diarrhoea, which may show signs of haemorrhage, depression, lethargy and weakness. Patients suffering from severe iron poisoning develop dehydration, shock, liver and kidney impairment and coma.

Vitamin D ingestion may be toxic in dogs if greater than 0.5mg/kg bodyweight. Clinical signs can have a de-

layed onset of more than 12 hours and include vomiting, lethargy, depression, anorexia, polydipsia (excessive drinking), polyuria (excessive urinating) diarrhoea, ataxia (staggering gait), constipation, muscle spasms, twitching and convulsions, with renal insufficiency in severe cases.

Antacids, Anti-diarrhoeal Drugs and Laxatives

OTC antacids very often contain magnesium and/or calcium carbonates as their main ingredients and are usually of low acute toxicity. Excess ingestion may produce mild gastrointestinal effects, ensuring hydration is the only treatment required.

Anti-diarrhoeal drugs may contain a weak opioid loperamide or low doses of morphine or codeine. Other ingredients include activated attapulgite, simethicone, dimethicone, citrate salts, ispaghula husk, kaolin or aluminium hydroxide. These ingredients rarely cause any problems other than constipation. Ensuring hydration is the only treatment required.

OTC laxatives contain senna, bisacodyl or docusate sodium as their principal ingredients. The effects may be delayed and can show as profound diarrhoea, dehydration and electrolytes loss. Treatment is to maintain hydration and check on electrolytes levels. Some laxatives are chocolate flavoured but these do not contain theobromine, which can be poisonous for dogs

Salbutamol

Salbutamol is the active constituent of inhalers used for sufferers of asthma, emphysema and chronic bronchitis. It is also available in tablet form. Puncturing of the inhaler cartridges or nebulas, and ingestion of the tablets can cause systemic toxicity. The onset of clinical signs is rapid and can produce

tachycardia (acceleration of the pulse rate), tachypnoea (increased rate of breathing), with restlessness, polydipsia, tremors and muscle weakness. A temperature may be present, swelling around the eyes, and low potassium levels. If tablets were ingested, prompt use of activated charcoal may reduce the absorption, but this is not effective if the dog has ingested nebules or inhaled from a punctured inhaler. The dog should be observed for a minimum of 4 hours.

Analgesics (Pain relief)

This group of OTC are probably the most dangerous. The constituents of concern are paracetamol, asprin, and ibuprofen.

Ibuprofen is particularly dangerous to dogs and can cause severe gastrointestinal irritation leading to ulceration or perforation if ingested in quantities greater than 10mg/kg bodyweight. Doses higher than 200mg/kg can lead to renal failure and the dog should be monitored over several days. OTC tablets usually contain 200mg of the drug; therefore small dogs only need a few tablets to become severely poisoned. Clinical signs can be seen 3-4 hours after ingestion and can remain for some period of time. Electrolytes should be assessed and corrected if necessary. Therapy may have to be maintained for 14 days. Ibuprofen is not so toxic in non-canines.

Paracetamol is toxic in all animals, but especially in cats. Fatal liver damage is likely in cats ingesting 20mg/kg bodyweight. Other animals taking doses greater than 150mg/kg is considered very dangerous.

Aspirin doses above 50mg/kg bodyweight are considered potentially toxic in most animals. Clinical signs of toxicity are severe gastrointestinal upset (vomiting & diarrhea, with or without evidence of bleeding) hyperventilation and respiratory distress, dehydration and electrolytes imbalance resulting in coma, convulsions and cerebral oedema.

Prevention

Most accidental poisonings occur because medications are stored on a low shelf or left exposed in bags etc. All medication should be kept in cupboards and out of reach of pets and children. Some poisonings occur when owners treat their petswith their own medicines. This is the cause for many paracetamol cat deaths. It is advisable not to give medications to animals intended for human use.

Sources of Information

Local pharmacies are a good source of information or contact:

In the UK — The Proprietary Association of Great Britain, Tel: 020 7242 8331 email: info@pagb.co.uk

In the US — Poison Control at 1-888-426-4435

Summary

"Many OTC medications do not present a great hazard to animals if ingested, although certain considerations need to be taken where multivitamin and multimineral preparations are ingested by dogs. Analgesics can present significant risks in all animals and all ingestions should be taken seriously. Where prescription drugs or OTC drugs for management of colds and coughs, or drugs for sedation are concerned, then it is better to seek advice from local pharmacies or a poisons information service as to appropriate management and likely effects."

The above information has been extracted from UK VET journal, written by Alexander Campbell BSc, VPIS (London), Medical Toxicology Unit.

Nails! Nails! Nails!

BeaCon takes pleasure in presenting the results of our second mini survey. Firstly we would very much like to THANK all those who took the time to participate in this survey. This wonderful co-operation to assist our breed is valued by so many.

You may be aware that we asked for non-Beardie participation as well to gain some additional insight. There was a broad range of other breeds participating albeit in smaller numbers.

Like our previous survey, we asked for both affected and non-affected participants and we are delighted to report that we received both in goodly measure!

We hope you will be interested in the results and we would ask you to bear in mind that this is a very small survey in statistical terms but does give us some indications as to the issues that were raised.

Countries and Number of Dogs (total 805)

Brazil — 1
Canada — 68
Czech Republic — 2
Finland — 2
France — 2
New Zealand — 16
Scotland — 4
South Africa — 9
Sweden — 59
The Netherlands — 2
United Kingdom — 108
USA — 491
Not Specified — 1

Australia — 40

Breeds of Dogs

Bearded Collies Irish Water Spaniel Bedlington Terrier Lakeland Terrier Boxer Newfoundland Briard Retriever, Labrador Bulldog Rhodesian Ridgeback X Bullmastiff Rottweiler Chow chow Siberian Husky Collie (? Rough/smooth) Standard Poodle Doberman West Highland White Giant Schnauzer Weimaraner Greyhound Unknown mix

Basic Demographics (# households =227). The number of dogs in a household ranged from 1 to 21. House flooring was quite varied – combinations 112, wood of various types 76, tiles/slate 76, carpet 34, and linoleum/vinyl 25 among the more common. Outside surface exposure was also quite varied – lawn 183, combinations 140, concrete/cement 61, fields or paddocks or meadows 36, gravel type materials 18, dirt 18, roads 14.

Nail care (# households =227). Nails were cut at these frequencies – weekly 39, monthly 89, as needed 24; and a whole host of others: biweekly, 6-8 wks, when groomed, bimonthly, 2-3 mo, vet's advice, 7-10 wks, twice yearly. Tools used for trimming nails – clippers 126, Dremel 52, guillotine 51,

and others. Thirty indicated no trimming and felt that the surface the dogs were on made it unnecessary.

Bearded Collie Households.

Total # households - 186 (572 Beardies and 100 others)

households with no chronic nail problems – 139

households with one or more chronic nail problems – 47

Beardies with chronic nail problem – 63

Sex of dog with chronic nail problem – 25 female, 37 male, 1 unlisted

Beardies with relative with a chronic nail problem – 15/63 (24%)

Relationship of relative with chronic nail problem:

Littermate – 6

Grandfather, grandson – 2 (reported by 4, but three appear to be identical entries)

Grandson – 1 Half brother – 1 Several in line – 1

Beardies who have produced an offspring with a chronic nail problem - 18

Diagnoses of the chronic nail problem was symmetrical lupoid onychodystrophy (SLO) in 26 with 18 male and 8 female; av age of onset 3.1 yr (min 0.5 yr, max 7.5 yr), systemic lupus erythemato-

Who is this???



Geographic Area

Area	# Dogs	# Beardies	# Households with Affected Beardies	Beardies Pro- ducing Chronic Nail
Non - USA	313	239	28	6
USA Regions				
Mid Atlantic	57	39	3	0
Midwest	180	137	10	8
New England	40	17	1	1
South	103	65	10	2
Southwest	26	3	0	0
West	85	73	3	1
TOTALS	807	575	55	18

sus in 1, bacterial infection in 5, fungal infection in 6, other in 4.

It appears the diagnosis of SLO was made from a combination of the clinical signs, biopsy, and elimination of other possible diagnoses (e.g., infection). Only 13 (50%) had biopsy (toe, nail, and/or skin) proven SLO. Among the dogs with SLO, 4 also had other diagnoses – 2 bacterial infection; 1 both bacterial and fungal infection; 1 systemic lupus erythematosus.

Veterinarians and owners alike seem reluctant to perform the GOLD STAN-DARD diagnostic test for SLO, a claw biopsy. This may be due to cost, inexperience with the procedure, or not wanting to make the dog more uncomfortable. From reports of owners who have had a claw biopsy done, they report minimal disturbance to the dog. If available, a dew claw can be used for the biopsy.

Clinical Signs in Beardies with Chronic Nail Problems

Dx not SLC) (n=30)	SLO (n=26		
Split nails	63%	96%		
Nails fall off	53%	92%		
Pain	50%	89%		
Nail bleeding	37%	81%		
Abnormal nail growth				
	37%	77%		
Persistent nail li	icking			
	40%	73%		
Lameness	40%	65%		
Infection	43%	50%		
Bad nail odor	17%	12%		

Physician Management for SLO. Primary care was from a general veterinarian alone (n=18) or along with a dermatologist (n=2); dermatologist (n=2), internal medicine (n=2), alternative medicine (n=1), immunology inter-

est (n=1). Ten reported seeing a specialist at some time for evaluations.

Treatments for SLO were listed for 22 dogs, but response was noted less often. Most frequently successful was a combination of tetracycline, Derm-Caps, niacinimide sometimes with steroids or vitamin E. Tetracycline and/or niacinamide was stopped after control was achieved, only to be restarted for relapse in 2. The effect of tetracycline is thought to be immunosuppressive. Other treatments (success usually not stated and we didn't want to record success without documentation) were 3V fish oil capsules or steroids combined with other meds; antibiotics and antifungal agents, kzyme with high protein/high fat diet; Imuran (a potent immunosuppressive); daily foot soaks; nail removal. One dog was euthanized after all treatment including Imuran failed

Summary. 805 dogs worldwide participated in the survey of which 572 were Bearded Collies with 63 having a chronic nail problem. Environmentally there were wide variations in both external and internal surfaces. Nail care was also varied and no statistical correlation has been attempted. More male Beardies were involved with both chronic nail problems (37 vs. 26 females) and SLO (18 vs. 8 females). Age of onset of SLO was relatively young – 3.1 years.

It should be noted that only 50% of SLO cases were proven by claw, nail, or skin biopsy. Far more clinically suspected cases of SLO need to have biopsies conducted to make sense of the data. Even so, it is helpful to see the group of clinical signs which occurs in the dogs with clinical SLO at a

higher frequency rate and more consistently that in those with other chronic nail problems. Treatments were varied and were usually multiple.

BeaCon thanks you sincerely for your participation.

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WHO WILL TAKE CARE OF MY DOGS?

By Chris Walkowicz

If you became ill or died tomorrow, what would happen to your dogs? Could they be neglected or mistreated? Would they end their days at a humane society? This fear caused me sleepless nights, particularly since I travel a lot, often with a dog or two accompanying me.

I wanted to protect my traveling companions. I made copies of the document below for each vehicle. On the back of each copy, I typed my dogs' names and a brief description, with a statement that all vaccinations are up to date. I then laminated the copies for the vehicles.

Breeders have the greatest cause for concern. Although a relative or friend **might** care for one or two pets, we can't expect them to adopt five or ten – or



All expenses for the care of my dog(s) will be guaranteed.

If the dog(s) are not injured, they are to be cared for by the nearest, reputable boarding kennel and be kept in the best possible manner until arrangements can be made to transport them home.

If the dog(s) are injured, they are to be cared for by the nearest reputable veterinarian. I would prefer that my veterinarian:

(phone) be contacted regarding decisions on the dog (s)' care and treatment. If any dog(s) are injured beyond all hope of recovery, those dogs are to be humanely euthanized.

Descriptions of the dog(s) are attached, as are their health and vaccination records. The welfare of my dog(s) is my primary consideration.

Thank you,

Name		
Address		
City		
State:	Zip:	
Phone:		

Statement of Intent

For more permanent foster care, I have attached a statement of intent to my will. Because it's possible for dogs to become senior citizens by the time probate is completed, I've spread copies around like a puppy in a pile of leaves. One copy is in a drawer with all the individual dogs' folders. My daughter has one, as does my vet and another good friend.

I update the statement periodically – ideally, when I add a new dog. But, at the very least, I make the necessary changes annually when I do my taxes.

First, I found someone willing and able to distribute the dogs among friends who could care for the dogs temporarily. My daughter knows our pets well and agreed to help place them. While, in most cases, a friend would likely have better access and knowledge to place show dogs, friend-ship can change. Relatives don't. Of course, when contacted, most friends would immediately help, if not actually take over the chore, during such an upsetting and traumatic time for the family.

At first I wanted my youngsters to be placed with someone who would show and breed them to continue my line. Then I realized it wouldn't make much difference to anyone -- including myself -- if I were dead!

I would want them to continue living in the style to which they've become accustomed – with comfy beds to nap on, snacks during dinner preparation, a loving touch and good physical care. If that includes showing and breeding, fine. But the priority is to ensure as few changes as possible and that my pets have loving homes.

Some dogs may have difficulty adjusting. Or it might be almost impossible to find them a good home. These

can include very old dogs, ones with chronic illness or disease, or those too shy or aggressive to change their allegiance. Rather than having them end their days bewildered or in fear, I have directed that they be euthanized.

Although a similar instruction was overturned by a court in California, this can be avoided if you use a statement of intent rather than a will. I instructed that my dogs be placed in my daughter's care with the stipulation that if she were unable to care for them or find them homes, they'd be euthanized. My vet knows and would acquiesce to my wishes. So this would be *fait accompli* by the time a will could be overturned.

Then I found people who would give my dogs good homes. I know these friends will care for the dogs as I would. I also know that if they cannot keep the dogs, they will provide a loving foster home until they can find a permanent home, and that they'll be as selective in choosing an adoptive family for my dogs as they'd be when placing their own pups.

We elected to endow a small trust fund for each retiree (those no longer bred). This helps cover not only food but also, medical expenses as the dogs age. Too large a trust, however, can be challenged.

All of the dogs are listed with registered name, call name, description, year of birth, tattoo number and microchip if appropriate. A clause covering any other puppies or adults living with us at the time is included.

This statement of intent gives me peace of mind.

Sample State of Intent Concerning Pets

In the event that we, the owners of the following dogs, should be incapable of caring for our dogs any longer, or in the event we should die, ownership of said dogs should pass to:

In return for the amount of One Dollar, she/he will distribute these animals per the following suggestions, or as she sees fit. She/he will also endow a \$500 trust fund for each retiree, i.e., dogs no longer used for breeding.

In the event the above party is unable to care for them or distribute them:

should be placed with:	
or with a good pet home.	 _

All puppies and any other dogs owned by us or living with us should go to the above people for sale, dispersal or keeping.

In the event the above people cannot or will not take charge of the dogs, they should be euthanized.

Descriptions:

Descriptions.
Name
Call name
Sex Birth date
Color
Weight
Tattoo/microchip:
Identification of these dog(s) may be made by:
or by my veterinarian:
confirmed by:
Medical records are at:
Registration and files on dog(s) are in
DATED:
WITNESS:

Attach a sheet with everyone's name, address and phone number. I added a clause saying that everyone who allowed our dogs to live with them, or anyone taking one of the dogs above seven years of age should be allowed to choose one of my prized collection of statues, books or art.

Now, sleep peacefully.

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Elbow Dysplasia

Linda Aronson, DVM

The X-ray examination of elbows in Beardies is a relatively new undertaking, but it is pleasing to note that per OFA, Beardies have the third lowest incidence amongst all breeds. Like hip Dysplasia though, elbow Dysplasia refers to several conditions, not just a single disease, and as such, definition can depend upon who is doing the interpretation. Recently, a Beardie received a mild elbow Dysplasia rating from OFA, despite having hips that were rated excellent. The owner decided to pursue the issue further, as neither she nor the vet who had taken the Xrays saw any signs of arthritic change or other problems on the film, nor did the dog show the slightest hint of lameness. So further X-rays were taken by an orthopedic veterinarian, and his interpretation may be of interest to other Beardie owners, particularly the owners of dogs that compete in performance events as the original dog described does. Like the owner and original vet, he saw no signs of Arthritis or Dysplasia, what he did see was an enlargement of the olecranon, the bump of bone on the ulna that forms the point of the elbow. He theorized that this was the result of increased stress put on the bone by the dog working — like muscles, the more bones do, the more

Age. He also commented that he had seen the same thing in other dogs competing in performance events and especially in herding breeds. He said that one client whose dog showed the same change had repeatedly submitted X-rays and eventually got an OFA elbow clear certificate. He feels that most vets are used to seeing X-rays of relatively sedentary dogs - he mentioned Labs - and so would not be familiar with the phenomenon.

So are we recommending you don't X-ray your working Beardie's elbows? On the contrary, BeaCon encourages you to do so, and we would eventually love to compile results to try and prove the orthopedist's observations if enough performance Beardies have been X-rayed and their owners share the data with us.

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Attitude is a little thing that makes a big difference."

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First time Donors
For \$15-\$99 you receive a
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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/

E-Mail Contest

Don't forget, if you elect to receive your copy of the BeaCon Newsletter by email, you will be entered into the drawing for some great Beardie "stuff". Just contact the editor at:

grfitz@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!

Who is this? Answers

Page 13 — Sallen Zadok Sire — Wishanger Wild Hyacinth Dam — Bredon Whisper DOB — 1/4/1970 Breeder — Nic Broadbridge

Page 11 — E Ch Pepperland Lyric John at Potterdale, DOB 5/11/75 owned by the Mike and Janet Lewis

Page 6 — E Ch Edenborough Blue Bracken, DOB 3/1/70

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Please contact the Board if you have any ideas, questions, problems or wish to participate in any of BeaCon's ongoing projects.

Visit BeaCon on the web atwww.beaconforhealth.org

Special thanks go out to our Past Directors:

Elizabeth Coolidge-Stolz Melinda Cummings Sharon Dunsmore Kathy Kovacic Kathy Pavlich Gail Romine Debra Thomas

Open Health Registry Book - year 3 ordering information

\$44 USA (printing on loose leaf, 3 hold punched paper; printed matter mailing + insurance). Send order to Elsa. These will be printed in groups of 10. If there are a large number of orders, you would be reimbursed according to cost to print.

Canada - contact Elsa for mailing cost.

Originals of the book are sent to Jo Tucker and Mia Sedgwick. They have generously agreed to take orders from their respective areas to reduce mailing costs.

Please contact:

Europe, UK - Jo Tucker (jo@cimda.fsnet .co.uk). She should have the original to copy from by March 1.

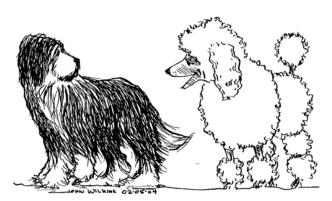
Australia, New Zealand - Mia Sedgwick (Lochmoorl@bigpond.com). She will take orders after April 2 (traveling until then).

Elsa's mailing address:

764 Liberty Rd, Milner, GA 30257

USA orders may be placed on-line at our web site (www.beaconforhealth.org) if you use Paypal.

MacLean and Company...



"They did my nails too. They're violet.

What colors are yours?"