BFCA Health Times

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IN THIS ISSUE:

Summer 2010

Health Committee updates by Vickie Podcast about CHIC DNA Bank by Anne CHIC 5 Star Awards by Paula Data on hits to our web site www.bichonhealth.org Articles pertinent to summer health issues written by committee members that are posted on our health web site: Skin Diseases—An Overview by Anne

Atopy—The Inhalant Allergy by Anne Reverse Sneeze by Vickie Tracheal Collapse by Vickie Respiratory Infections, Runny Noses and Coughs by Anne

Health Committee Updates

Bladder Stones Seminar from National Specialty in Indianapolis: The Powerpoint slides from the seminar by Dr. Jessica Clemans, DVM is available on our health web site at <u>www.bichonhealth.org</u>. Slides for both portions of the seminar are posted.

Important article to read: Read a significant article about canine immunity and disease resistance written by Dr. Jean Dodds on our web site at http://www.bichonhealth.org/HealthInfo/CanineImmuneSys.asp, which is too long to include in this publication. This is the intro to the article:

"This article discusses the essential role of the canine immune system in maintaining the body's overall general health and resistance to disease. The focus will be on environmental factors or events which may cause or trigger immune dysfunction leading to either immune deficiency or immune stimulation (reactive or autoimmunity). Related to these events is the development of cancer which is a disruption of cell growth control."

A new leader: With a heavy heart I have resigned from chairing this health committee for the last 7 years. The work of this committee is so significant to the welfare and future of Bichons that it deserves a chairperson who has adequate time to donate to our projects. I continue to work in the ER of a hospital in a 60% position, to breed and show my Bichons, and to run my legal nurse consulting business, which has grown considerably in the last 2-3 years. As you can imagine this leaves me with no free time, however I will stay on the committee as a member and an advisor to the new chairperson. Our new leader is Nancy McDonald, who I know will do a great job leading this dynamic group. Thank you Nancy! My main functions on the committee will be to coordinate research and answer health email questions from our web site.

A new medical advisor: We are happy to announce that Larry Letsche, DVM and member of BFCA, has agreed to help us by reviewing for accuracy the current and future articles written by health committee members that are posted on our web site. He is also willing to offer advice on research projects as needed. We are very grateful to Larry for his help!

Looking for fund raising coordinators: This major goal of the health committee is to concentrate on health issues in Bichons. To allow the **nurses** of this committee to devote more time to this goal, we need someone who can coordinate raising funds for Bichon health research. If you are willing to assist us, please contact Nancy McDonald at rosevine12@austin.rr.com.

Looking for research coordinators: The health committee needs your help in coordinating research projects for the top 10 health issues in Bichons. In the past I was the only person involved in this effort. As chair of this committee I have received several phone calls/emails over the years of scientists interested in involving Bichons in their research projects, either as research subjects or asking BFCA to donate funds to their research projects. Because of a lack of time to devote to this demand, I can say that we may have missed some opportunities. So, I am asking BFCA members to help by choosing one of the top 10 health issues listed below if you have an interest in it or have had experience with the health issue. You do not have to be a medical person, but that would be preferred when dealing with scientists using their medical jargon. To explain further, if you volunteer for a particular health issue and this committee receives an inquiry from a researcher, you will be contacted to discuss the details with the researcher and to coordinate any activities associated with the project, with the approval of BFCA. In addition, we would like you to be available as a resource to people who have Bichons with this health issue and consider offering education on pertinent topics, like writing an article to be posted on our health web site. One benefit to you is that you will become an expert on the health issue you chose. Please look at the list and consider helping us by contacting me (Vickie) at victoire2@mac.com. I am asking each member of this committee to chose a health issue, mine being heart problems because I am a Cardiovascular Nurse Specialist and I wrote all the articles on heart issues posted on our web site. A list of volunteers will be posted in future issues of this publication.

Top 10 Health Issues in Bichons Frises

- 1. skin problems/allergies*
- 2. bladder/kidney stones
- 3. patellar luxation/ligament tears
- 4. dental diseases
- 5. cataracts/eye diseases
- 6. cancers
- 7. heart diseases
- 8. liver diseases
- 9. stomach/intestinal problems
- 10. diabetes

CHIC DNA Bank Podcast

DNA collection is very important to our breed as a whole. It will be up to Bichon breeders to provide samples because there is little focus on doing so in the pet dog community. There has always been a bit of doubt/hesitation on the part of breeders to trust that privacy will be protected. But surely by now we have grown up enough to have faith in our scientists. This is the one way we can participate in research at low cost to us as individuals and to the club. And tomorrow is too late in dogs because tomorrow could be the day that an important dog is no longer available for research. Link to podcast:

http://links.mkt2242.com/servlet/MailView?ms=Mjc5OTg5NQS2&r=MTAxMTI5NjkwOTES1&j=ODA 0MzEzNzES1&mt=1&rt=0

Link to DNA Bank info on our web site: <u>http://www.bichonhealth.org/DNABanks.asp</u>

****NOTE**: The health committee will have free DNA swabs available again at our table at the 2011 national specialty.

CHIC 5 STAR AWARDS

The BFCA Health Committee has issued the following CHIC 5 Star Awards this past quarter: MyBliss Galaway's Irish Imp Nancy Noonan*

White Shadow Galaway Hide N'Seek

Nancy Noonan*

Allure's U Chenoa Joe

Lisa Des Camps*, Katherine Dillon* * Denotes BFCA members

The CHIC 5 Star Award is issued to any Bichon owned by a BFCA member with a CHIC number, has passed the CHIC tests, and additionally has obtained any two of the following (see http://www.bichonhealth.org/CHIC.htm for more information and applications):

- 1. Cardiac OFA certification by cardiologist or practitioner
- 2. Legg-Calve-Perthes OFA Certification
- 3. DNA registered with AKC
- 4. Urinalysis that tests for diabetes, bladder infection, crystals
- 5. Bile acid blood test to rule out liver shunt
- 6. Standard veterinary blood panel including:
 - CBC (complete blood count): WBC, RBC, hemoglobin
 - Electrolytes, BUN, Creatinine (to assess kidney function)
 - Blood glucose level (to rule out diabetes)
 - Liver enzymes (to rule out liver disease)
 - Pancreas enzymes (to rule out pancreas disease)

All new CHIC 5 Star Awards will be posted in each issue of The Health Times, and in a

cumulative list. Former recipients of the award: Jasme Raggedy Ann Mayno Blanding* Mayno Blanding* Merrell Absolutely Spellbound Merrymaker's Living Doll Cindy Morey* Victoire Cheers to Austin Vickie Halstead* Victoire Diamond Rio Citrine David & Darlene Scheiris, Vickie Halstead* Victoire Juniper's Hot Tamale Louise Davidson, Vickie Halstead* Victoire L'Amour Champagne Lace Jan Strom, Vickie Halstead* Victoire Melodie's Bleu Reign Melody Michel*, Vickie Halstead* Victorie's Norwegian Red Vickie Halstead* * Denotes BFCA members

Data on Hits to Bichon Health Web Site

2009: <u>bichonhealth.org</u> gets 1,759 visits every month. This information, when compared to other sites on the web, makes this website be ranked 691,625 out of the top 1,000,000 websites.

In March 2010, bichonhealth.org was ranked (according to Compete.com) among the 639,539 most visited websites accross the US. bichonhealth.org received a 2,206 visitors during that month.



SKIN DISEASES—AN OVERVIEW

Anne Jones RN, BSNE

To start with, we should clarify that there are at least 35 or more skin diseases that can be quickly named as possible irritants to canine skin! Some days we think our dogs must have them all, when they scratch, lick, moan and groan! There are numerous pests that cause skin reactions. There are the inhalants that may cause allergic response. There are the growths, the sores and the problems of hair loss. What's a Bichon owner to do?

It has often been said that the best specialty to have for a human doctor is dermatology because the patient never gets well and does not need to be seen at night. Maybe veterinarians feel the same way but there do not seem to be many dermatologists in veterinary medicine. However they can be found. Yet the first place to seek help is with your primary vet who should know your dog's history and will be able to make an initial decision as to whether the "new" problem is the "old" allergy or if there is another cause for this itch.

These are some of the types of skin issues you may deal with. Some are rare in Bichons and others do occur with frequency. The list of possibilities is long and the final determination or diagnosis may also be long in coming. There are the pests that we know to look for (fleas and ticks) and there are other unexpected pests. Immune mediated problems (allergies) are hugely complex to diagnose and to treat. Lick sores, friction loss of hair (elbows are common in some breeds), and hormonal disorders all leave bald spots. Bacterial infection, contagious disease and other issues may be either the sole cause of skin problems or they may be a secondary complication. There are the various lumps, bumps and growths that seem to particularly plague the Bichon Frise.

Diseases affecting skin, causing itch, licking and hair loss, making the poor dog miserable and leaving the owner wishing to hide this moth eaten pet of hers – these are major frustrations for both owner and veterinarian. They may also be the most frequent reason for seeing a vet, in any breed, but particularly in a breed where the major health issue is allergy.

There is no reason to discuss allergy in this article. It is covered elsewhere. Some of the inherited problems are rare in Bichons whereas they are major in other breeds. Cheylitiella Mange, known as walking dandruff, seems to have missed the Bichon up to now and may it ever be so! Sarcoptic mange is a common skin disease in packs and strays and is caused by a mite, as is Red Mange (demodicosis). Lick sores (acral pruritic dermatitis) is more often seen in short-coated breeds. Note that Bichons are NOT a "home alone" breed and may lick from boredom!

We know that some Bichons are highly allergic to fleas and this is a disease in and of itself. Fleas will drive the allergic Bichon nuts and one that is not allergic may offer fleas free room and board and never mind them. Only when tapeworm appears in the stool later will the owner know there were fleas on board! Lice and ticks are individual dog issues and may never bother some Bichons if they are indoor dogs.

Hormonal disorders can be frustrating to treat and may well be a cause of hair loss in Bichons. Hypothyroidism would be the most suspect condition when hair coat is thin, brittle and slow to grow. Excess cortisone (both from medication and from adrenal hyperfunction) and excess estrogen can cause hair loss in some breeds. In the Bichon this may happen from protracted treatment with predisone. Mange (caused by a mite) and ringworm (fungus) can cause patterned hair loss.

Infection may be a complication from several skin problems, with hot spots (acute moist dermatitis) being common in Bichons. Hot spots can result in pyoderma (skin infection) if the hot spot is not dried up promptly. A juvenile pyoderma, called puppy strangles, is found in very young pups and can become quite serious if not properly treated. It was once a common cause of death in young pups. Any skin problem that causes scratching and biting of the skin can ultimately cause infection from trauma.

Warts are actually rare in dogs but papillomas are growths that are somewhat similar and may or may not have a stem. Lipomas are fatty tumors that are usually benign but can become infected if the skin is broken. They typically are round and soft, filled with fluid and grow slowly.

It is very important that any growth be examined by a veterinarian because only he or she will be able to identify those that are or may become cancerous! The most common skin cancers are mast cell tumors, melanomas and adenomas. It would be remiss not to add that any "lump" or raised area around the mammary glands of a female have to be seen promptly because mammary cancer is the most common cancer in bitches of all breeds. Remember that any lump or tumor that grows rapidly may be cancerous, as may any open sore that does not heal.

Common skin growths seen in some Bichons are called sebaceous cysts. These can occur on any part of the body from top of the head to hocks and any place in between! These are small capsules surrounding a lump of cheesy material called keratin. If chewed, they can become infected. It has been this author's experience that they will start early in <u>some</u> Bichons and keep appearing in new places throughout their lives. They may be excised but if they are that numerous, your dog may be seeing the vet every few months for removal. It is harmless to leave alone those that are not easily scratched or chewed. It may be advisable to remove any that are receiving constant attention from teeth or paw. Most do not have this many and the occasional little cyst may dry up on it's own.

ATOPY—THE INHALANT ALLERGY

Atopy, simply stated, is the veterinary term used to describe allergy to airborne substances. Allergies can fall into four categories (airborne, contact ,flea and food) with contact and food allergies being the least common in dogs. Airborne allergy is difficult to diagnose because the allergen is often prevalent both inside and outside the home. The body translates these substances to be "foreign" and therefore the body reacts by forming histamines to combat them. It is the chemicals like histamine in the body which cause itch, sores, upset tummy and gastrointestinal upsets that drive both the pet and the owner slowly crazy!

There is no real cure for atopy, only efforts to control the reaction and to clean up his environment of the substances that have caused it. Since many of the substances are in the outdoor environment, the allergic dog is best kept inside most of the time, bathed more often to rid the coat of the offending substances and observed indoors for indications of what may be aggravating the problems inside the house. Just as with humans with allergic rhinitis, frequent vacuuming of the house may help. Wool carpets and furniture may aggravate the problem. In other words, anything that might aggravate human allergy may well add to the pet's misery.

While the picture seems bleak, atopy is not as severe in all dogs and may only be a seasonal problem. Since some of the drugs that will help to control the problem may have dangerous side effects, it is best to use topical treatment and to clean up his environment rather than to rely on sterioid medication. Of the drugs that can be used <u>occasionally</u> prednisone is best known and is also, unfortunately, the most dangerous if overused. Antihistamines may provide some relief and should be tried, fatty acid supplements will strengthen the immune system and a quality diet will create a healthier dog. These are all addressed elsewhere. Fatty acid supplements are readily available from veterinary clinics and catalogs dealing in pet supplies, as are special shampoos that may soothe irritated skin.

Skin testing is an option to determine just which are the offending airborne substances. These must be done by a qualified specialist since most veterinary clinics are not able to provide the proper test kits for these tests. Shots may be given to desensitize the dog to allergens. The most frequently diagnosed allergens are pollen, dust, molds and dust mites.

For the dog mildly affected, the following suggestions should be considered:

Keep your pet inside, especially during spring and fall and when cutting grass, which only stirs up the pollens;

Avoid housing him in the basement which may contain dusts and molds that could affect his allergies;

Reduce house plants which could produce pollen and which also tend to hold dust and to have molds in the soil;

Frequent baths, daily brushing, and wiping his feet when he has been outside may help;

Check the house for carpet, furniture and bedding that may hold irritants and vacuum or wash them frequently.

The actions listed above may well be sufficient to keep your pet from scratching. For the severely affected pet, it will be vital to do these and to watch him for signs of the other forms of allergy, such as flea allergy. Food and contact allergies are relatively rare in dogs but flea allergy is quite common. However do NOT use flea preventives unless you actually find he is allergic to fleas because these can have their own harmful effects! And remember that a clean house and a brushed dog will most likely never have a flea problem.

REVERSE SNEEZING

Vickie Halstead RN, CVNS, CCRN, CEN, CLNC

Reverse sneezing is also called paroxysmal respiration or pharyngeal spasm, is actually not a true sneeze, but is the opposite of a sneeze. Episodes may be alarming, as the owner believes the dog is short of breath, but it is not harmful and causes no permanent damage.

Episodes may last a few seconds to a minute. The dog will extend its neck gasping inward through the nose with a snorting sound, which is repeated several times. Episodes can be interrupted by massaging the throat, pinching the nostrils briefly, or by sticking fingers into the mouth to stimulate swallowing.

The physiology of reverse sneezing is that the trachea (windpipe) is temporarily narrowed by irritation in the soft palate (back of the throat), so that the normal amount of air cannot enter the lungs. This is more common in small dogs due to the smaller diameter of the trachea, may be present for the dog's entire life, or may develop as the dog ages. Irritants to the soft palate that may stimulate episodes include pollen, dust, chemicals, stress, pressure on the throat with a lead, or excitement and may occur after drinking or eating.

Reverse sneezing can occur in conjunction with serious illnesses such as chronic rhinitis (inflammation of the nose caused by a virus), nasal polyps, tracheal collapse, or Primary Ciliary Dyskinesia (PCD). The latter 2 diseases are evidenced by coughing in addition to reverse sneezing, which you can read about on this site.

There is no need to seek veterinary assistance if reverse sneezing occurs infrequently, such as 1-2 times per week. However, if the episodes occur several times per day, see a veterinarian who may prescribe medication to relieve the pharyngeal irritation, and search for signs of other more serious illnesses. It may be helpful to videotape episodes for your veterinarian to view.

TRACHEAL COLLAPSE Vickie Halstead RN, CVNS, CCRN, CEN, CLNC

Tracheal collapse disease occurs mostly in older small breeds of dogs, but occasionally in young dogs as an inherited disease. This condition does occur in Bichons, but is not common.

The trachea (windpipe) is a tube of flexible tissue that connects the larynx (voice box) in the throat to the lungs, which allows air to enter and leave the lungs. Rings of cartilage maintain the trachea in an open position, but with this disease those rings are weakened and the trachea can collapse while breathing. At the bottom of the trachea, where it divides into the right and left bronchi (smaller airways) that lead to each lung, is an area called the carina where the cough reflex exists. Coughing occurs if there is stimulation to the carina by excess mucus, tubes, or tracheal collapse. In addition to being a breathing tube, the trachea is lined with cilia that move mucus and inhaled debris up and out of the trachea, which can be impaired with this condition due to the deformed trachea. The trachea, cilia, and cough reflex serve as a filter to prevent mucus and debris from reaching the lungs, so malfunction of this mechanism can lead to respiratory infections.

The major clinical sign of this disease is a chronic honk-type of cough that is worse with stress, exertion, inhaled irritants (cigarette smoke or dust), hot and humid weather, and drinking water. Also the dog may exhibit a rapid respiratory rate, excessive panting, reverse sneezing, exercise intolerance, and frequent respiratory infections. Clinical signs worsen as the disease progresses.

Treatment for mild cases is aimed at early antibiotics for respiratory infections, weight loss if obese, low-stress routines, avoiding situations that trigger episodes of coughing, moderate exercise, using a harness instead of collar which can press on the trachea, and avoiding cigarette smoke in the house. During more severe episodes some drugs that may be helpful are steroids, bronchodilators (they dilate the airways), cough syrup, and low-dose sedatives. If your dog seems to be in extreme respiratory distress, seek emergency veterinary care immediately. Surgical splinting of the trachea can be done for more advanced cases, but this is a major surgery that may have complications. Some universities are inserting a stent to keep the trachea open, which is a smaller surgery.

Research for this article includes: The Merck Veterinary Manual The 5 Minute Veterinary Consult by Larry Tilley& Francis Smith Textbook of Medical Physiology by Arthur Guyton & John E. Hall The Dog Owner's Home Veterinary Handbook by James Griffin & Liisa Carlson

UPPER RESPIRATORY INFECTIONS, RUNNY NOSES AND COUGHS Anne Jones RN, BSNE

You notice a runny nose, hear a cough, think your dog may be breathing funny. At what point does this require a visit to your veterinarian? We seem to be far more willing to wait for further signs of illness with our children than with our pets. As with a child, a dog may have mild symptoms that will clear quickly without treatment – but they may also be signs of a developing or a chronic disease. We hope to help you understand what these symptoms means.

As with most illness, the signs you see are just that – signs or symptoms of what is beginning in the upper respiratory system. Let's discuss that cough. It may be a dry cough or a wet cough. For instance with **kennel cough**, the dog may have just a mild cough that seems more like an irritated throat but then he may develop a hacking cough that seems to go on and on. He may choke or may eventually cough out some foamy stuff, especially when he has been more active, such as running around outside. If this dog has been kenneled recently, you may suspect kennel cough, a contagious disease that spreads rapidly among groups of dogs at boarding kennels, dog shows or in a breeding situation. Often times it will clear on its on after a period of time but it can lead to more serious complications. Prevention is easy with an intranasal medication so if you do expect your dog to be kenneled, if you use a groomer where you leave the dog all day or if you walk your dog or let him play in a community dog yard, this is one condition that warrants immunization. There is a bacterial form of disease that is sometimes considered a form of kennel cough that is called **infectious tracheobronchitis**, which will require antibiotic treatment.

A dog with a cough should not be given cough suppressants without veterinary examination to determine if the cough is **pneumonia**. Pneumonia may be secondary to allergy or from either bacterial or viral infection. It can also result from aspirating a foreign substance or object. Pneumonia must always be considered a serious illness and warrants veterinary supervision of the treatment of an affected dog. One of the essentials is to determine if there is an underlying genetic predisposition to pneumonia, especially if the dog has had a tendency all his life to respiratory problems. An inherited condition called **primary ciliary dyskinsea** is an autoimmune condition that will likely cause the dog problems throughout his life. To learn more about this problem, click on the link in the preceding sentence. It is known to exist in Bichons. Another sign of this condition may be a chronic **runny nose**.

A runny nose may also be a sign of sinus infection and that infection may be a complication from an abscessed tooth, especially to be considered in an older dog. Bichons have notoriously bad history of dental disease and maintaining a clean mouth is essential. The author recently experienced a 3 month ordeal in an 18 year old Bichon with sinus infection from an abscessed tooth and it was not an easy treatment. One does not anesthetize a dog of his age to pull a canine tooth with its long root so we were left with treating the disease – and a lot of prayer! His recovery actually began, after 3 months of antibiotics, when he finally sneezed hard enough to rid his nasal passages of lots of junk, allowing proper drainage. He had almost stopped eating (couldn't smell his food!) and was so thin that one wondered what was keeping him alive. Yet he has recovered, gained a pound or more, and intends to join his mother in becoming one of those rare 19 year old Bichons! Or so we choose to think.

When do you go to the vet with any of these symptoms? Any mild signs of respiratory infection can be watched for a day or two but once the cough, the runny nose or the funny breathing begin to worsen, sooner is better than later. For the dog with recurrent illness of this type, it will be very important to find out if he has immune system issues, from <u>hypothyroid disease</u> to primary ciliary dyskinesia. With either of these, oversight by your veterinary will be critical to maintaining stable health.

This article has been reviewed by a veterinarian for accuracy.