



A champ till the end

Each life is a miracle that changes the world and leaves it a better place than it was before.

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Belinda van Gemert writes:

"Schumi was my hero – a bright-eyed, beautiful, kind-hearted boy with an unusual copper glow to his striking coat. On 29 January 2009 he was diagnosed with lymphoma in the chest and given

two weeks to live without treatment. Chemotherapy followed from end-January.

"The road was rocky, but Schumi was determined to overcome this obstacle. He surprised all and inspired everybody around him. Then the miraculous news — the lymphoma had vanished. Schumi had given it his best shot and was now exhausted. Unfortunately, remission was short-lived and the downhill journey followed. Sadly, he was put to sleep on 22 June 2009.

"Schumi seemed part of the TAH Bellville family. Thank you to Drs Frank Kettner, Kerry Franz and Kevin Solberg for treating him with loving care and respect.

"May we all become more responsible pet owners: realise their unconditional love and treat them as precious gifts till the end of their lives. Schumi, my brave hero, it was an honour owning you for 5 1/2 years.

"Each life is a miracle that changes the world and leaves it a better place than it was before."

Watch out for aspergillosis

Caused by the *Aspergillus* fungus found almost everywhere in the environment, aspergillosis is a respiratory disease of birds. Growing in warm and moist environments, the microscopic fungus spores become airborne and close confinement, dusty conditions, as well as poor ventilation and sanitation increase the chance of inhaling the spores.

Usually, the fungus doesn't cause disease; but if a bird doesn't have a healthy immune system, it can cause illness. Predisposing factors include other illnesses, stress, poor nutrition, unsanitary conditions, another injury to the respiratory system (eg smoke inhalation), and prolonged use of medications such as antibiotics or corticosteroids.

Aspergillosis appears to be more common in parrots and mynahs than other pet birds. Birds with acute aspergillosis have severe difficulty breathing, decreased or loss of appetite, frequent drinking and urination, a bluish colouration of mucous membranes and/or skin and even sudden death. The fungus generally affects the trachea, voice box and air sacs. The lungs may also be involved.

Chronic aspergillosis is much more common and deadly due to its insidious nature. It can be difficult to diagnose. The bird may not become symptomatic until the disease has progressed too

far for a cure. The respiratory system is the primary infection location. Weight loss will be the first symptom to occur followed by respiratory symptoms. Difficulty breathing, and/or exercise intolerance are common.

If the voice box is involved, a change in voice or reluctance to talk may occur.

Your vet will need a detailed history of the course of the illness and an accurate description of the bird's diet and husbandry. X-rays, a complete blood count and a chemistry panel may help support a diagnosis. Endoscopy is often needed to visualise the aspergillosis granulosis.

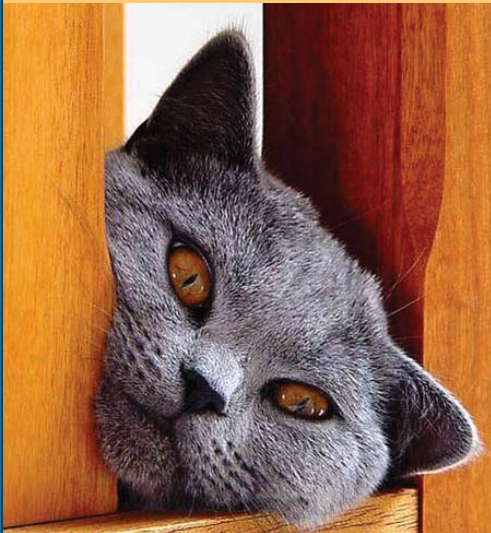
Surgery may be performed to remove accessible lesions. Antifungal drugs may be administered orally, topically, by injection, or nebulising, depending on the drug. Therapy needs to continue for weeks to months and more than one antifungal drug may be used. Supportive care such as oxygen, supplemental heat, tube feeding and treating underlying conditions often are needed. Unfortunately, the prognosis is always guarded.

Good husbandry to prevent aspergillosis outbreaks is imperative. Keep your bird in a well-ventilated environment. Clean food and water dishes every day. Replace cage lining regularly. Thoroughly clean cages, toys, perches, etc, at least once a month. A balanced diet is needed to maintain good cellular resistance to the fungus. Seed-only diets contain very low levels of Vitamin A essential for cell health.

Source: Veterinary & Aquatic Services Dept, US



Tygerberg Animal Hospital Group:
Durbanville: 021 9763015;
Bellville: 021 9191191;
Goodwood: 021 5912571;
Kenridge: 021 9140886;
Parow: 021 9397102;
Sonstraal: 021 9751870;
After Hours Clinic: 082 3187458
www.tah.co.za.



Talking the talk

Here's when and how your cat vocalises.

Purring - often a sign of contentment. Some cats purr when they're in extreme pain/in labour, or simply trying to calm themselves down. Therefore, purring can be a sign of pleasure or pain; but usually it's the former. Scientists haven't yet been able to discover how purring works, but it's suspected that it's caused by minute vibrations in the voice box.

Greeting - A particular sort of vocalisation, such as a low meow or chirp, possibly with simultaneous purring.

Distress - Mewing is a plea for help or attention often made by kittens. There are two basic types of this call, one more loud and frantic, the other more high-pitched. In older cats it's more of a panicky repeated meow.

Attention - Often simple meows and mews in both older cats and young kittens. A commanding meow demands attention, food, or to be let out.

Protest - Whining meows.

Frustration - A strong sigh or exhaled snort.

Happy - A meow that starts low then goes up and comes back down.

Watching/Interest - Cats will often 'chatter' or 'chirrup' when seeing something of interest out of the window. This is sometimes attributed to mimicking birdsong to attract prey or draw others' attention to it, but often birds aren't present.

From the time when we sang the song as children "With a knick knock paddy whack, give a dog a bone", we believed that dogs should be given bones. People who feed bones to their dogs believe that dogs in the wild eat bones all the time and only cooked bones pose a risk. Some claim that they've done so for years without a problem.

But, the sad reality is that there are many Internet discussion forums where former bone feeders have repented after their dogs developed life-threatening problems. Speak to any vet and most will tell you about bones stuck in the oesophagus, or removing a bone and bone fragments from the stomach and intestine. Others tell of chipped teeth or teeth pulled out of alignment, some resulting in abscesses.

When wolves eat bones they feed on the whole carcass, swallowing bones protected by hide and hair. They generally also don't swallow large pieces at a time, but chew off smaller sections. Wolf experts agree that wolves probably do experience gastrointestinal problems as a result of bones, but there has been no way of monitoring this. A respondent from The Wolf Society of Great Britain claimed there was documentation of wolves choking on bones or starving to death after bones became lodged in the throat.

There are many safe dental chews and rawhides available from your vet as dog treats. However, exercise caution when giving rawhides to dogs who chew it into tiny slivers.

No bones about it



Also, if your dog tends to gulp down everything in sight, a rawhide can be dangerous. But if he takes his time, using plenty of saliva to soften the rawhide when chewing, it shouldn't be a concern.

So, to sleep easy at night, tell all in your family as well as dog sitters that feeding bones to your dog is prohibited.

pet trivia

- Jacobson's organ, located in the roof of a cat's mouth, is a special scent organ analysing smells. That's why cats sometimes 'sneer' when encountering a strong odour.
- Cats step with both left legs, then both right legs when walking or running. And they walk on their toes.
- Almost 10% of a cat's bones are in its tail, which is used to maintain balance.
- Standing about 90 cm at the shoulder tops and weighing 55 kg, the Irish Wolfhound is the largest dog breed. The Chihuahua is the smallest breed, standing 15 - 23 cm at the shoulder tops and weighing 1 - 2,5 kg.
- The term 'dog days' has nothing to do with dogs. In Roman times it was believed that Sirius, the Dog Star, added its heat to that of the sun from 3 July to 11 August, creating high temperatures. The Romans called the period *dies caniculares*, or 'days of the dog'.

CLOWN COLUMN



Canine parvovirus (CPV) is a contagious disease characterised by diarrhoea that's often bloody and often associated with vomiting. Current vaccinations help control proliferation of this disease but despite being vaccinated, some dogs still contract and die from parvo.



The disease is spread through contact with faeces containing the virus. The latter is known to survive on inanimate objects such as clothing, food pans and cage floors for five months and longer in the right conditions. Insects and rodents also may play an important role in transmission. Therefore, any faecal material or vomit needs to be removed with a detergent before using a bleach solution. The latter should be used on bedding, dishes, kennel floors and other contaminated impervious materials.

Generally, incubation is from 7-14 days. Active excretion of the virus in the faeces can begin the third day after exposure, often before clinical signs appear, and may last for one to two weeks after the disease's onset.

There's a broad range in symptom severity. Many adult dogs exposed to the virus show few, if any, symptoms. The majority of cases are seen in dogs less than six months old with the most severe cases in puppies younger than 12 weeks. There also are significant differences in response to parvovirus infections and vaccines among different dog breeds, with Rottweilers, Doberman Pinschers and Labradors more susceptible than other breeds.



The intestinal form known as gastroenteritis is most common - characterised by vomiting, diarrhoea, dehydration, dark or bloody faeces and in severe cases, fever and lowered white

balanced electrolyte solution is preferred and special shock fluids are used in bad cases. In less severe cases, subcutaneous or oral fluids may be used, but this is often not enough. Antibiotic therapy generally is given to help control secondary bacterial infections.

In cases of vomiting, drugs to slow the vomiting are used. After the intestinal symptoms start subsiding, a broad spectrum deworming agent is often used. Patients are encouraged to eat as soon as possible and tube-feeding is often applied. The cells of the stomach intestine need 'external' nutrition to regenerate.

Deadly puppy killer

The majority of cases are seen in dogs less than six months old with the most severe cases in puppies younger than 12 weeks.

blood cell counts. Acute parvovirus enteritis will progress rapidly and if left untreated death can occur as early as two days after the onset.

Not all cases of bloody diarrhoea with or without vomiting are caused by parvovirus and many sick puppies are misdiagnosed. The only way to know if a dog has parvovirus is through a positive diagnostic test. In addition to traditional testing of the blood for titers, a simpler test of the faeces with an enzyme-linked immunosorbent assay antigen test is also available. Testing of all suspect parvo cases is the only way to diagnose and treat the disease correctly. A complete physical exam and additional laboratory tests such as a complete blood count and chemistry panel help to determine the severity of the disease.

Parvo treatment usually involves supportive therapy. Intravenous administration of a

Undertaking treatment of affected dogs and puppies without professional veterinary care is extremely difficult. Even with the best available care, the mortality of severely infected animals is high. Without the correct amount of properly balanced intravenous fluids, the chance of recovery in a severely stricken animal is small.

If a puppy recovers from parvovirus infection, he's immune to reinfection probably for at least 20 months and possibly for life. In addition, after recovery the virus isn't shed in the faeces.

In summary, parvovirus is a common problem that's a huge killer of puppies. Due to its ability to be transmitted through hands, clothes and most likely rodents and insects, it's virtually impossible to have a kennel that won't eventually be exposed to the disease. Modified live vaccines are safe and effective, but despite the best vaccination protocol, all puppies will have a window of susceptibility of at least several days where they'll be at risk.

In addition, the newer CPV-2c strain presents new challenges. Prompt treatment by a veterinarian will increase survivability in infected puppies and working with your vet on a vaccination programme best for your puppy is important.





A tail to tell

There are a number of potential reasons for abnormal tail carriage in a feline. Inflammation of the rectal and anal area will cause pain. The cat's response is to tuck in his tail. Painful anal sacs or injury may be another problem. Or a potential parasite problem could cause discomfort. If there's been a history of diarrhoea or urinary tract disease, the resulting discomfort would also cause the tail to be held down. Sometimes it may be a symptom of a musculoskeletal or neurological disease. The list could go on and on. Fracture of the tail usually causes paralysis and this section will be drooping down or dragging on the floor.

Any sign of discomfort displayed by your cat needs to be investigated by your vet. After a physical exam, if the cause of the problem is obvious, the appropriate treatment will be recommended. In some cases the cause may be subtle and require advanced diagnostic procedures. Laboratory tests, X-rays, or ultrasound are some of the tools available to your veterinarian or veterinary specialist. Once the abnormalities are identified, the treatment can be determined.

Quotable quotes



"Dogs come when they are called. Cats take a message and get back to you." - Mary Bly

"Heaven goes by favour. If it went by merit, you would stay out and your dog would go in." - Mark Twain

"The reason dogs have so many friends is because they wag their tails instead of their tongues." - Unknown

"Women and cats will do as they please, and men and dogs should relax and get used to the idea." - Robert A Heinlein

Nursing passion



In what was then standard 6, Sister Norma Boshoff decided to fulfil her passion for animals by becoming a veterinary nurse.

So, after matriculating in Bloemfontein, she set off for Onderstepoort. On qualifying in 1998, she worked at a northern suburbs practice for two years before setting off for Egypt. Here she worked at an animal shelter for a year and then at a private practice for two years. Prior to returning to Cape Town, Boshoff spent a few months in the UK.

After a year-long stint at the same practice where she started, she joined TAH six years ago. Currently, her duties are at the Bellville branch. Boshoff said her favourite part of veterinary nursing was helping to pull a very ill patient through.

Married with a two-year-old son, Ewan, Boshoff has two cats, Casper and Geegee. She loves relaxing, socialising and generally chilling out.

Person you admire the most: Nelson Mandela

Person who had biggest influence on your life: My mother

Philosophy of life: Enjoy every second

Favourite time of day: Bed time

Favourite food & drink: Pizza and Savanna Dry

Best reading: Not a reader

Favourite TV programme: CSI

Best holiday: Thailand

Biggest extravagance: My house

Hobbies: Movies, sleeping, painting

Sport (self): Gym

Sport (spectator): Rugby



WHO'S WHERE BELLVILLE Dr Ater McDonald Dr Colin Levitan Dr Ian Campbell Dr Frank Kettner

Dr Nolan Moss Dr Sam Pillay Dr Kevin Solberg Dr Michelle Adam Dr Rouxlene Sheridan

Dr Kerry Franz **DURBANVILLE** Dr John Adam Dr Izak van der Vyver Dr Bradley Hodgson

GOODWOOD Dr Paulina Crous **PAROW** Dr Pieter Human **SONSTRAAL** Dr Sophia Frick

KENRIDGE Dr Stephen Smith Dr Liesl Shaw Dr Franci Swart.

Although each branch handles all species, Kenridge is our exotics (reptiles, wild animals, etc) branch.