

# Dog & small animals vet



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Dr Adam Gordon - Maroubra Veterinary Hospital

Adam Gordon graduated from the University of Sydney in 1990. He completed a Masters degree in Veterinary Studies at Murdoch University in 2002. Adam has been in companion animal practice since 1990 and is principal of Maroubra Veterinary Hospital.

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## Vaccination

The advent of vaccines has been one of the single most important medical advances that has contributed to improving the health of people and animals. Smallpox, a deadly and contagious disease has been eradicated from people as a consequence of vaccination. In dogs, diseases such as parvovirus and distemper are now uncommon due to widespread vaccination.

Veterinarians who were in practice in 1978\* when the worldwide epidemic caused by canine parvovirus emerged tell horror stories of hospital wards full of dogs dying from this dreadful disease. Thankfully, dogs that are immunised against parvovirus (as well as distemper and canine adenovirus) have a very high degree of protection against infection.

Most pet owners are quite happy if the only reason for a trip to the vet is for the annual vaccination and check up. Whilst at face value this routinely performed procedure seems simple and straightforward, there are many complex issues for veterinarians to address when vaccinating companion animals. One of these issues is the frequency of vaccination required to provide protection against the diseases we are vaccinating against.

It has been accepted practice to vaccinate animals annually since the development of vaccines for companion animals in the 1950's. These early vaccines were quite crude, but still effective. It was found through experience that annual revaccination provided continuing protection against these infectious diseases.

However, until recently little or no research had been done to determine how long immunity really lasts, and whether booster vaccinations can be given at intervals longer than 12 months.

Advances in vaccine development have resulted in vaccines that are safer and more effective. Furthermore, research has confirmed that following vaccination with certain types of vaccine, immunity persists for at least 3 years. There is now a commercially available vaccine that provides protection for 3 years against parvovirus, canine adenovirus and distemper. These are the potentially fatal diseases that dogs have been vaccinated against for many years.

The other disease that our pet dogs are routinely vaccinated against is Kennel Cough, or infectious tracheobronchitis. Whilst this is not usually a fatal disease, it does cause a nasty cough. It is also highly contagious in kennel and hospital situations, hence its name. Vaccination for this disease is essential if you wish to board your dog at any time.

Research into kennel cough has shown that annual vaccination is definitely required to confer the best protection. In some instances, biannual vaccination is appropriate, and indeed required by some boarding establishments in order to minimise outbreaks.

So how can we know exactly how often we should be vaccinating our pets? The short answer is that ultimately we must rely on the vaccine manufacturer's recommendations. They have performed the studies necessary to demonstrate the safety and efficacy of their vaccines.



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Any clients wishing to participate are invited to contact Sydney Animal Behavioural Service on 02 9949 8511 or via email on [www.sabs.com.au](http://www.sabs.com.au).

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References: 1. Young, D.R., Jeannin, P.C. and Boeckh, A. (2004) Efficacy of fipronil(S)-methoprene combination spot-on for dogs against shed eggs, emerging and existing adult cat fleas (*Ctenocephalides felis*, Bouché) *Vet Parasitol* 125:397-407. 2. Jeannin, P.C., Green, S.E., Boeckh, A. and Soll, M (2003) Efficacy of FRONTLINE Plus (fipronil(S)-methoprene) for cats against developing stages and adult fleas (*C. felis*) *Proc 19th Int Conf of the World Assoc for the Adv of Vet Parasitol*. Merial Australia Pty Ltd, Level 6, 79 George Street, Parramatta NSW 2150. (ABN 53 071 187 285) @FRONTLINE and FRONTLINE PLUS are registered trademarks of Merial. ©2008 Merial Limited. All rights reserved. FRLN-07-048A. H&T MCA0251/UA

There are blood tests that can be performed to measure the antibody levels in the blood against a certain disease. Some have advocated using these tests to determine whether an animal needs to be revaccinated. This approach however is fraught with potential problems. The immune system and its response to disease is an incredibly complex and not fully understood phenomenon. These blood tests may not accurately predict immunity from disease.

The only way to determine the immunity of an animal against a disease is to expose the animal to the disease and see if it is protected. As this is not something



we would do with our pets, we must rely on the recommendations provided to us by the vaccine makers.

Ultimately, there is no "one size fits all" approach to vaccinating our pets. Your veterinarian can advise you of what is the most appropriate for your pet given the circumstances. What is certain, is that the benefits of vaccinating far outweigh any risks. Furthermore, irrespective of whether your pet is vaccinated annually or every 3 years, it is vital that your pet has a thorough physical exam either yearly or twice yearly to ensure good health and detect disease early.

\* The author was a little boy in 1978.



**Melissa Catt BVSc - Paddington Cat Hospital**

Melissa graduated from the University of Sydney in 1990. She worked in a private small animal practice in Adelaide for two years and then in England for a further two years. Melissa continued in private practice on her return to Sydney before starting Paddington Cat Hospital with her husband, Randolph Baral in 1997. Melissa is interested in all aspects of feline medicine and has a particular liking for soft tissue surgery. Of course, Melissa was nominatively destined for feline medicine.

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# Cat vet

## Cystitis

It looks as though finally the drought is breaking, with the rain pouring down outside my window. A good day to write about cystitis, as I'll explain later.

Cystitis literally means inflammation of the bladder wall (where the urine is stored after being produced by the kidneys). It is a fairly general term, and isn't actually a diagnosis by itself. Cystitis may be associated with underlying bacterial infection, but this is probably less than 2% of total cases (though more often in older cats). The vast majority of cats with cystitis have 'sterile' cystitis, when there is no infection involved. Cats with sterile cystitis may have urine crystals or stones, or even tumours (luckily very rare, particularly in cats less than ten years old), but usually no specific cause is found.

The reasons owners bring their cats in to see their vet are many and varied with cystitis. Perhaps puss is spending a lot of time scratching around in the litter tray and only producing small amounts of urine (or none at all) or they may be spending more time than usual cleaning around their back end. Maybe the urine is pink or red in colour, and sometimes the signs are non-specific, and the poor cat just looks miserable. Sometimes the owners bring their cat in to be seen for a 'behavioural' problem, as many cats with cystitis will urinate in the wrong place (often the bath or the drain hole, but it can be anywhere it's not meant to be). It's not uncommon for owners to assume their cat is constipated, as the signs may look similar. By and large, we diagnose cystitis as a problem much more commonly than constipation.

Sterile cystitis first tends to be diagnosed in young to middle aged adult cats. If the cat is an older puss, then we would be concerned about an underlying reason for the cystitis. One of the most common causes of urinary problems in geriatric cats is a urinary tract infection (UTI) due to the urine not being concentrated enough. This needs further diagnostic tests to look for kidney disease, diabetes or another reason for abnormally dilute urine. UTIs are very rare in younger cats.

In the consultation, often the only abnormality we can find on a physical examination is a small painful bladder. The wall of the bladder is very inflamed and tender, and so every time a small amount of urine travels to the bladder from the kidney, it stings

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the bladder and the cat feels an urgent need to pee- this explains all those signs mentioned above. Getting a urine sample to check for things like crystals is very helpful, but very often impossible, as there isn't any urine in the bladder to collect. If this is a first time occurrence in a fairly young, otherwise healthy cat, then we tend to assume it is uncomplicated sterile cystitis and treat accordingly. If it is a recurrence or there are any other problems, then it's important to collect a urine sample (and maybe other tests, like blood tests or ultrasound of the bladder) for assessment. This may require a further visit, or even the day in hospital.

For reasons no-one is sure of, we tend to see a lot more cases of cystitis in rainy weather. Sometimes weather changes and cold weather can be a trigger as well, but the rain seems to be the worst offender. Interestingly, this doesn't only affect outdoor cats; cats that are confined to inside also seem to be affected in wet weather.

By and large, cats are very sensitive to any changes in their environment, and this may explain the response to rainy weather. Any changes in the home environment like a new cat, relatives staying for a week, even the owner spending more time at home can be considered a stress and can trigger cystitis. It's also more common in overweight cats.

Treatment varies, but often it is recommended to feed tinned food, as this dilutes out the urine and makes it less painful. Anti-inflammatory drugs are often useful, but it is important to be confident the kidneys are healthy. There are various other medications that might be indicated in particular circumstances, but despite much research, no-one has worked out what the causes are, and so unfortunately there isn't one definite answer. Most cats will actually get better all by themselves with no help from us in 3-5 days, but seeing a very uncomfortable cat with cystitis in and out of the litter tray for that amount of time can be very distressing (I can vouch for this!). It



# Bird & exotics vet

Caring For Your Rabbit

Pet rabbits are very commonly seen at our veterinary clinic. They are very affectionate, cuddly and well suited to living with us at home. Unfortunately, despite them being very common pets I see that many people find the information available on how to care for these little animals very confusing. The rabbits are often not on the correct diet or are inadequately housed and many become unwell because of this.

## Housing

Rabbits can be kept indoors or outdoors provided they are protected from the extremes of heat and cold. They are extremely sensitive to heatstroke as they neither pant nor sweat and temperatures above 26°C should be avoided. 18-22° C is optimum.

Rabbits should also have access to unfiltered sunlight on a regular basis and given the opportunity to exercise – daily supervised periods in the garden are ideal. Rabbits love to dig and burrow. So if your rabbit is outside expect it to dig many holes.

If living in a hutch, ensure that the floor area is made of solid material such as plexiglass or wood with a thick layer of regularly changed straw or hay to prevent foot trauma. A concealed area is also important to allow the rabbit to feel secure. The living area must be easy to clean and well ventilated but kept in a dry, draught-free area protected from rain.

The good news is that if your rabbit lives in doors they can be trained to use a litter box and this should be changed daily to prevent urine scalding. But, be careful inside as rabbit will still love to nibble and dig and so may chew on furniture and also on dangerous objects such as power cords.

## Feeding

Unlike most of our pet mammals (like dogs and cats) that we keep at home, rabbits are herbivores (plant eaters). In the wild rabbits, like horses, have a diet that is generally very high in grass. This is a diet that is very high in fibre. To imitate this they should be fed a diet of 80% grass, good quality wheat or oat hay. A fresh supply of grass – either by grazing on your own lawn or by collecting grass for your rabbit – is also very important and can replace the wheat or oat hay. Without this high fibre many rabbits will experience teeth and/or gastrointestinal problems that can in the longer term prove fatal.

Often the only hay available is lucerne hay. This is the typical green hay you may see at a pet shop. While this won't lead to teeth or intestinal problems, it is very high in calcium. The problem is that the calcium is absorbed in to the body and then commonly leads to kidney and bladder stones.

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Because animals matter

is really important to think of anything at home that might be a stress factor that you might be able to do something about (for example ensuring the litter trays are clean and there are enough of them).

If your cat with cystitis is a male cat, then there are some special considerations. Male cats have a much narrower outflow tube (as it is contained within the penis and can't stretch), and a proportion of male cats with cystitis signs may actually have trouble urinating at all ('blocked' cats). This is an emergency, and you must seek IMMEDIATE veterinary attention, as it can be life threatening. These cats usually have crystals in their urine, and usually need a life-long diet change to a special prescription diet (the tinned versions are far better) and constant awareness.

So, as they say it never rains but it pours, but hopefully we won't be seeing many of those poor sore kitties with peeing problems over the next few days!

**Dr Alex Rosenwax – BVSC MACVSc (Avian Health)  
Bird & Exotics Veterinarian, Green Square.**

Alex graduated from the University of Sydney in 1991. He achieved Membership of the Avian Health Chapter of the Australian College of Veterinary Scientists in 1996. In November 1996 he opened the first and only Sydney all bird and exotic pet practice. The Clinic moved to 1 Hunter St Waterloo in 2003 and sees approximately 80% birds, and 20% fish, reptiles and other exotic pets. Alex is the current president of the Australian Veterinary Association Avian Group.

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Twenty percent of the diet can also include a variety of vegetables and herbs (e.g. broccoli, endive, beet and carrot leaves, brussel sprouts, Asian greens, chickory, kale, parsley, dandelion, coriander, basil, dill and mint). Avoid celery and lettuce as they are of little nutritional value.

Unfortunately the most commonly fed food is so called "rabbit food". This comes in two forms, either a "rabbit muesli" consisting of seeds with a small amount of hay, pellets and other additives or "rabbit pellets". Commercially available pelleted diets, cereals, grains, nuts, seeds, corn, beans and peas should only be used for up to 10% of the total diet. So rather than being used as the majority of the diet they should be used as a treat only. This is because these foods are low in fibre and high in energy. The pellets have similar problems and as well as often being high in calcium. Both can lead to teeth and intestinal problems as well as overweight rabbits.

Other treats that may be included in your rabbits' diet are small amounts of fruits and capsicum.

Food and water should be fresh and changed daily.

It is often suggested that in order to help prevent overgrown incisor teeth and provide behavioural enrichment, wooden toys may be provided to chew.

## Health Care

Rabbits need to be seen by your veterinarian at least as often as dogs and cats. They often hide the signs of disease until they are very sick. So if your rabbits' behaviour changes or is not eating as it usually does then they should be taken to the vet as soon as possible.

A vaccination against Calicivirus (a disease spread by mosquitoes that can cause sudden death) is required at 8-10 weeks of age, a booster at 12-14 weeks and again with a regular health check every 9-12 months for life. At each vaccination your rabbit should have a full physical examination. Overgrown back teeth leading to the inability to eat is a common, life-threatening problem and so teeth need to be examined at regular health checks and at every vaccination.

Many rabbits need flea and mite control. This is often achieved with "spot on" treatments on the skin. Your veterinarian can advise you of the safest best product at the time of vaccination.

Desexing is recommended for female rabbits at 5-6 months of age to help prevent unwanted litters and the development of uterine cancer, which occurs in 50-80% of rabbits over 4 years old. Desexing is also recommended at 4-6 months for male rabbits to reduce aggression, territorial behaviour (including inappropriate soiling) and bullying.