WINTER 2009

YourVet

EAST PORT VETERINARY HOSPITAL

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Other Staff Members:

Stacey Theofanou, Rebecca Spring, Kate Bisco, Emma Crocket, Amie Burgess, Summer Earles , Annie Thomson, Wilhelmina Ridding, Nikki Moulston, Debbie Dawson

Consultation Hours:

Consultation by appointment.
Monday to Friday: 8.00am-6.00pm
Saturday: 8.30am - 12.00 noon.

Deluxe Grooming!

East Port Veterinary Hospital now offers a full grooming service on Tuesdays and Thursdays, with Nikki Moulston. This service includes hydrobathing, clipping and nail trims – the ultimate day spa! To book your pet in, call us on (02) 6583 5677.

Protecting Sutures and Wounds

Whether it's a routine sterilisation procedure or a stitch up after an accident, many pets will require some form of wound and suture management at least once in their lifetime. Even wounds without external sutures still need to be given time to heal. It is a shame when healing is delayed due to a pet's "intervention". Licking, biting at sutures, chewing off bandages, rubbing tummies along the ground and too much bouncy play can all contribute to delayed wound healing.

There are many ways to help protect wounds and sutures

1) Elizabethan collars

These are plastic lampshade-shaped collars, which slip over the animal's head and attach to their own collar. They are usually transparent and well tolerated, although there will be a period of adjustment as the animal becomes accustomed to their new width! Expect backwards walking and doorway crashing initially. Make sure your pet can access their food and water whilst wearing the collar. In an emergency, a bucket or a flower pot with the bottom cut out can make a temporary Elizabethan collar.

2) Pain relief

Pets often lick or worry at wounds because they are uncomfortable. Your vet may prescribe pain relief for your pet postoperatively to help stop pain related wound trauma.

3) Bitter chemicals

There are a number of safe but nasty tasting chemicals available, which can be smeared around wounds or on bandages to deter licking and chewing. Unfortunately, many determined pets will soldier on regardless of the unpleasant flavours, so they may only offer short-term protection.

4) Mechanical barriers

Socks, T-shirts and bandages can be used to cover and protect wounds. These need to be used carefully as they can potentially rub and irritate wounds.

5) Distraction

Take your pet's mind off its wounds by providing environmental distraction with bones, food filled toys and chew sticks. Unfortunately, animals usually need to be rested after surgery and their sutures need to stay clean and dry, so long runs on the beach or bouncy plays with friends cannot be used to provide distraction.

6) Sedation

For the hard-core wound worrier there is always chemical restraint. Sedatives and anti anxiety drugs can be used in the short term to calm the extremely exuberant or determined patient post operatively, so they can rest and allow their wound to heal.

Always contact your vet if you are concerned about your pet's wounds or sutures.

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Thunderstorm Phobias

This winter, many parts of Australia will be lashed by thunderstorms. This may bring welcome rain for some, but for dogs with thunder phobia it means anxiety and stress. Thunder phobic dogs respond to the thunder, lightning, rain and changes in barometric pressure caused by storms, with an exaggerated fear response. They may pant, whimper, tremble, hide and experience incontinence and destructive behaviours.

Any dog can have thunder phobia but it does seem more common in the herding breeds. The symptoms tend to worsen with age and owners unwittingly often reinforce the behaviour by attempting to comfort the animal during storms. This just confirms to the animal that there is indeed something happening that's worth worrying about!

Thunder phobias can be improved by desensitising affected animals to the sounds of a storm. Speak to your vet about obtaining a 'Thunder CD'. The recording is played at a very low level, or one that does not trigger a fear response. Gradually, the volume is increased until the animal can tolerate the loud noises. During this time, owners take a "jolly hockey stick" approach to their pet and neither comfort nor reprimand their animal but carry on their normal daily tasks. Because sound recordings do not mimic the other meteorological aspects of storms, such as atmospheric pressure changes, they are unlikely to actually cure a phobic dog. Medications can be used to decrease anxiety and to sedate if the pet is at risk of trauma.

Exposure of young pups to loud noises and flashes in a friendly, relaxed setting can help prevent a thunderstorm phobia developing.

Treat my pet!

Methicillin resistant *staphylococcus aureus*

'Methicillin resistant *staphylococcus aureus*' (MRSA), is a bacterium that is resistant to the antibiotic 'methicillin'. This antibiotic was developed in the 1950's after staphylococcus aureus became resistant to penicillin. MRSA is now resistant to a broad range of antibiotics. Humans may become **infected** by the bacteria and develop clinical disease. They may also be **colonised** with MRSA and act as a carrier.

For many years, MRSA was only seen in hospital patients. Patients who became infected could experience skin or wound infections. More severe cases had potentially life-threatening problems like pneumonia, heart valve infections and blood poisoning. More recently, MRSA has also been found in the community. This is known as 'community acquired MRSA' (CA-MRSA), and it can be spread between people who are not initially unwell at all. Risk factors include participating in contact sports, sharing towels and athletic equipment or having a weakened immune system. Times spent in crowded conditions (e.g. childcare) and being associated with health-care workers are also known risk factors. In its worst form, clinical disease associated with CA-MRSA includes severe soft tissue infections, blood vessel clots and a potentially aggressive and fatal form of pneumonia, which occurs in otherwise healthy young adults.

But where do our pets come into the equation? Evidence is now building that dogs, cats, and particularly horses can act as carriers of MRSA. Rather than being the 'bad guys' who have introduced the bacteria to humans, it appears that in most cases a human carrier has actually initially infected the animal, which then becomes colonised. Many small animals do not become clinically ill while colonised with MRSA, often clearing the bacteria fairly quickly *unless* a human reinfects them! Horses are believed to remain colonised for longer than dogs and cats. In addition, some evidence suggests that humans who have successfully been treated for MRSA infections can be recolonised by their pets, who were infected by their owner in the first place!

How can we avoid becoming colonised by MRSA and passing it to our pets? We should always observe good hand washing hygiene, avoid sharing personal items (clothes, towels, sheets etc) with others and keep any wounds covered. Those who work in veterinary hospital situations observe strict '*asepsis*' (keeping things sterile) when placing IV catheters and performing any surgical procedures. Vets are trained to wash hands and change gloves between patients and are mindful of the overuse of antibiotics. Owners can help by always following the instructions for their pets' antibiotics and finishing the *full* course. Never share unused antibiotics with another pet. Avoid requesting antibiotics and respect a decision by your vet to perhaps 'wait and see' whether an antibiotic is truly needed or whether the animal's own immune system can clear the infection.

Above all *don't panic*! While MRSA is a significant public health and veterinary challenge, with some simple precautions we can keep the world a safer place for our pets and ourselves!

Emergency! Sudden loss of a pet

The death of a pet is a distressing event in any owner's life. When that pet dies from an acute illness or injury, especially in an emergency situation, the grief and emotion experienced by the owner is compounded.

Many vets believe that there are three main 'hotspots' of grief in veterinary practice. Dr Belinda Beynon, a Western Australian emergency veterinarian, who also runs a service supporting pet-owners through bereavement, calls these "the 3D's". The first is the ***diagnosis*** of a disease or injury. The second involves ***decision-making*** by the owner regarding treatment options or the lack of them, and the third is the ***death*** of a pet. In most situations there is enough time between these hotspots to allow an owner to come to terms with each in a step-by-step fashion. However, in an emergency situation, all three may occur in a rapid succession with minimal warning. In this situation, the potential for enhanced grief responses is heightened.

So how can vets help clients who find themselves in this situation? Naturally, we aim to come to an accurate diagnosis as quickly as possible, although in some emergencies this may not be easy or possible. Many clients are forced into decision-making before a final diagnosis is made, based on the fact that their pet may be suffering beyond what reasonable treatment can allay.

We discuss the likelihood of a pet's quality of life, not just their chance of survival, allowing time where possible for thoughtful decision making. However, occasionally we need to help a client shift rapidly from trying to save their pet's life, to helping their pet's death have quality, dignity and peace. Sometimes the only way to ensure this is to perform euthanasia. When the end actually comes, grief felt by the client can manifest variably, depending on the suddenness of their pet's death and the role they have played in it. In emergency situations, grief may be exacerbated by a sense of guilt, which can be valid, imagined or unjustified.

How can you help yourself if you lose a pet in sudden, unpredicted tragedy? It may be useful to spend some time with your pet after they have passed away so you can remember them at peace. Not everyone will need or want this, but a few moments to say goodbye can be a powerful memory and an aid to healing. Do consider requesting a post mortem if you need to know more about the cause of your pet's death, or if no diagnosis was possible. This can usually be performed either 'in-house' or by a qualified veterinary pathologist.

Allow yourself time to mourn. Maybe take time off work. Talk to your pet, and honour their memory. To quote Dr Beynon, "…the grief associated with pet loss is known as disenfranchised grief. No one acknowledges your loss, no one sends cards, and no one brings food. There are no socially sanctioned rituals to honour your pet, so it is important to create your own." Whether you have a funeral or an ash scattering, plant a tree or write a letter to your pet, take as much time as you need to honour your feelings and their memory.

Lumps

The original sounding "Lumps" is a common condition of guinea pigs. It occurs when harsh, abrasive foods damage the mucous membranes inside the mouth. Bacteria can enter these wounds and are conveyed to the local lymph nodes in the neck. The lymph nodes enlarge and can become filled with pus. Treatment usually involves lancing or surgical removal of the affected lymph nodes. It is worth stroking your guinea pig regularly under the chin and neck region because if this condition is caught early, it may respond to antibiotics alone.

Terrific terriers

The terrier dog group constitutes a delightful bunch of bright, bouncy, busy dogs. Their name derives from the Latin "terra" meaning 'earth'. They were originally bred to 'go to earth' and hunt small animals such as rats and foxes in their underground burrows. They come in a variety of sizes from the smaller West Highland White Terrier and the Scottish Terrier to the larger Airedale Terrier. Whatever their size, they have large amounts of personality to go with equally large amounts of energy.

Signs of disease
Colic in horses

The term *'colic'*, as used by veterinarians, refers to abdominal pain. The underlying cause may be either within the *gastrointestinal tract* (GIT) or in one of the organs found in the abdomen (*liver, kidneys, uterus, bladder* etc). Thus it may refer to a multitude of conditions with different causes, symptoms and prognoses.

Most horse owners will be familiar with the symptoms of colic. They include rolling (slowly or aggressively), kicking at the belly, biting at the flanks, sweating, decreased appetite, decreased manure production, pawing at the ground, getting up and down repeatedly, or even just plain old depression. Not all cases of colic will exhibit the same symptoms, and the symptoms rarely point directly to the underlying cause.

The equine GIT includes the mouth, the *oesophagus* (gullet), the stomach, the small intestine, the *caecum*, the *colon*, the *rectum* and the *anus*. GIT related causes of colic include excess gas in the intestine, simple obstruction (e.g. feed impaction or sand colic), simple interruption to the intestinal blood supply (e.g. migrating parasite larvae), more serious obstruction of the gut also affecting intestinal blood supply (a twist or *torsion*), inflammation of the intestine (*enteritis*), and *ulceration* of the stomach or intestine. Non-GIT causes of colic include *peritonitis* (inflammation of the abdominal wall lining), uterine emergencies in broodmares, and bladder rupture (newborn foals).

A veterinary assessment of a colicky horse involves a complete physical examination – including heart and breathing rate, mucous membrane colour, gut sounds, and body temperature. A rectal examination may allow assessment of various structures including intestines, bladder, ovaries and uterus, spleen, *aorta* (major blood vessel), left kidney and parts of the colon.

Medical treatment for some cases of colic may be performed 'on-farm'. This may include pain relief, anti-inflammatory medications, or a drench. If surgery is required, the situation becomes more complex. Abdominal surgery in a horse is a major undertaking that requires specialised facilities and significant postoperative care. Survival rates for horses with 'colic' are highest in those with mild pain and no obvious intestinal distension. Prognosis is worse with severe pain, intestinal distension that can be felt and absent gut sounds. Red mucous membranes suggest the horse may already be in toxic shock.

As a horse owner, the most important thing is to know your horse in its healthy state. Behavioural changes that indicate problems needing veterinary assistance will then be noticed early. Prompt referral of severe colic can be crucial for survival.

Laughter is the best medicine!

Where does a cat go when it loses its tail? The retail store.

What do you call the cat that was caught by the police? The purrpatrator.

A man took his dog to the vet and asked the vet to completely remove the dog's tail. The vet, confused, said "Why do you want me to do that? The dog's tail is perfectly healthy." The man replied "Well the wife's mother comes this weekend and I want to make sure there are no signs of any welcome!!"

It's that time of year again – we're getting ready for winter. If you notice your pet becoming less active, stiff to rise from sitting or lying down, or less able to jump up on things the way they used to, they might have osteoarthritis.

There is lots that can be done for this degenerative disease, so if you think these symptoms describe your furry loved one, give us a call.

What's new at East Port?

1. ***Is your pet East Port's next "Thinner Winner?"***

60-70% of Australia's pets are overweight, mimicking the trend in human populations. When faced with how to tackle this overwhelming problem, Dr Amy Lee decided reality TV held the answer.

East Port Veterinary Hospital's "Thinner Winner" weight loss program is complimentary, and is based on the TV show "The Biggest Loser." Participants have 3 educational sessions, where they learn how to get their pets to lose weight – and keep it off.

Peppered with prizes and great support from other Thinner Winner owners, this program makes weight loss fun!

2. ***Puppy Pre-School – teach your pet it's ABC's!***

You're giving them their vaccinations, you're up to date with flea, tick, heartworm and intestinal worm prevention – but have you considered their education?

East Port Veterinary Hospital runs puppy preschool classes on a Tuesday and Wednesday night, to socialise and train your furry friend.

Puppy preschool classes are vital in socialising young dogs and teaching them how to behave around "strange" dogs and people. Whilst pups very readily get used to those they see everyday, these classes teach them how to communicate with new pups and humans without it ending in aggression. And what's more, they're fun for the whole family!

Our qualified instructor can also identify any potential behavioural issues nipping them in the bud before they become a real problem.

3. ***Echocardiography for pets with heart disease***

If there is one problem with owning a pet in Port Macquarie, it's the lack of access to specialist centres, which are often used in cities to diagnose and treat more complicated health problems.

That's why East Port Veterinary Hospital aims to provide excellent facilities and knowledge, to ensure your pet still receives optimal health care, despite living away from a city centre.

To help achieve this, we now offer echocardiography – or examination of the heart – performed by Dr Vanessa Aird. "Echo" allows detailed examination of the heart and diagnosis of heart disease, which in turn lets us give your pet, the most appropriate and effective treatment available.

After-hours Service:
Our after-hours emergency service is staffed by our own veterinarians 24 hours a day, 7 days a week, 365 days of the year. To utilise this service, phone the hospital on (02) 65835677 and leave a brief message with your contact details and the nature of the problem. Our on-duty veterinarian will return your call within minutes.