

2010 Issue 4



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THE AMERICAN COCKER SPANIEL CLUB OF CANADA

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A Message From the Editor

The holiday season is once again here and with that comes the end of the 2010 shows; lots of nice dogs with lots of well deserved wins this year. Looking forward to 2011 and seeing many wonderful prospects in the puppy and show rings. Wishing each and every one of you all the best in this Holiday Season and please be safe!!!

I look forward to all of your brags, litters and accomplishments. Please be sure to send me your ad as you want it in the newsletter. Also, if you could put Newsletter Submission in your subject line. I have a special folder that automatically picks up Newsletter in the subject line and files it there. This way none are sure to be missed.

In this edition of the newsletter, there is an article on The Truth of Vaccinations by Brett Winn who has kindly given her permission to print that article in the newsletter. Thank you to Daria for obtaining that permission. There are also several brags of accomplishments.

Next editions of the newsletter are March 1 and June 1, 2011

Chris Wagner, Newsletter Editor

If your personal information has changed, please copy the information below and send in email it to Kelly Ladouceur at klad@shaw.ca

Change of Personal Information

Name:		
Address:		
City:	Province:	Postal Code:
Phone Number:	Email Address:	

New Member Applicant

The following new applicants have applied for membership in the American Cocker Spaniel Club of Canada. If you have any objections, please forward in writing to the [Secretary](#)* with 30 days of publication of this Newsletter.

Candice Proctor
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BRAGS

It is with a happy heart that I announce that my little black boy is now known as Ch. Shadyhill's Clancey Richards. Clancey is out of Ch Shadyhill's Tradition and Ch Shadyhill's Morning Flame and is a litter mate to Ch Shadyhill's Strike Up The Band. Clancey received the last points that he needed from judge Phyllis Wolfish. Clancey has taken me on a wild ride, he is my first cocker that I have taken into the show ring and the agility field. Learning the ropes wasn't always easy for us but we did it with the help of Clancey's breeder Jean DeWolfe and handling classes with Terri Lee Foley Cossar. Clancey isn't my first cocker, but he is the first cocker that I have learned to groom from bath to ring, and from our first disaster in the show ring in Moncton, to the show ring in Cape Breton where he got his new title. He will now be handled by Terri Lee, watch for them in 2011!!

Clancey and I would like to publically Thank Jean for her mentorship and for the poking and prodding at me to do more research on the breed. Without Jean's guidance, I may not be where I am today, living with a Canadian Champion. Luv you Ch Clancey.

Bonnie Richards

This weekend at Hamilton Dog Obedience Fall Trial Wesley got his CD. On both Saturday and Sunday he got Highest scoring spaniel. His scores were 193.5 191.5 and 194.5. Now on to open. Maybe he will finish his conformation title next weekend.

Janet Marechal
Shandys Kennels Reg'd

ASC July National
Silverdi's Quin Rede Ce Soir place 2nd in the 12-18 class

Essex County Sept
Silverdi's Rede For the Dance did very well with me at the end of the lead going Best of Breed

Oct 1 Detroit Cocker Specialty
Am/Can Ch Silverdi N Laro Always Rede CGC CGN took Ascob Veteran going onto Best Veteran In Show was also chosen for Select Dog what a great day many thanks Jean Ashley for showing Shane for me

Chatham Nov19 20
Silverdi's Rede For The Dance (Danny Boy) going BOW 3 pts each day finished his championship
Danny Boy is Champion # 5 for Am/Can Ch Silverdi N Laro Always Rede CGC CGN (Shane) who now 8 years eyes clear

Silverdi's Illusions In Life PCD CD ICD CGC CGN RN eyes clear 8+
It's been a good year

Wishing everyone Merry Christmas & Success in the New Year

Silverdi perm reg.

MORE BRAGS

Lizzie was entered at the Oakville and Hamilton obedience trials this fall where she earned her PCD title (she also did a 4th leg at the London trial). She also earned her CARO Rally Novice Team title at The Poodle Farm and Rat Pack Dog Sports trials now making her Nesmar's Elizzie Beth's Sam RNMCL RN PCD RNT. Proud of her to have 4 titles at only 2 ½!

Abbey was entered at the London trials where entered in the Novice C class she placed first with a 192! She also earned her CARO Rally Novice Team title with two 2nd places with scores of 199 each at The Poodle Farm! She finished the title at the Rat Pack Dog Sports trials. She is now Lurians Abbey Road RNCL CGN CD RN RA RNT.

Simon, now 10 ¾, came out of retirement in November and entered at The Poodle Farm for his CARO Rally Novice Team Title in his first run he tied for first place with a 196 and with only 5 seconds difference in time, he earned a 2nd place with 10 teams entered! In his second run he again scored a 196 and tied for third and placed 4th! He did a great job! We will finish his title in early December.

Virginia Davies

My four year old boy Tim, Jomardi's Grand Celebration (By Ch Braewood Grand Larceny ex Jomardi's Season's Beginning) achieved his CDX title at the Caledon Trials on November 27th with a score of 195. His judge was Diana McKenzie. Carol Chalmers (his breeder) and I are very proud of him. Tim's tail is still wagging so I think he is happy too!

Take Care
Margo Pereira

According to <http://www.canuckdogs.com> there are no more Rally trials in Canada for the year. That means that it's official - Gracie is the #4 American Cocker Spaniel for Rally Obedience in Canada for 2010. She accomplished this in only two weekends of showing, with her bonehead handler (me!) causing us to fail one trial because she skipped a station entirely.

I am SOOO proud of Miss Gracie - she's had a stellar year.

This year she earned two Specialty High in Trial wins to earn her CD title in June (American Cocker Spaniel Club of Canada National Specialty & Midwest Cocker Club Specialty) and several High Scoring Cocker in Class wins to earn her Rally Advanced title.

Silverwood's Elegantly KLAD PCD, CD, RN, RA, CGN, Therapy Dog

Although she was spayed without ever being bred, I think she continues to contribute to the breed as an excellent ambassador, through her therapy work and her obedience and rally successes. I couldn't be prouder of this girl if I tried!

And on October 24, 2010 my buff dog Jack Jack went Winners Dog and Best of Winners over 15 other dogs for a five point win! He was beautifully groomed and handled by Lori Gauvin, and the judge was Lynn Storeshaw. Jack Jack is formally known as Calla's All Bets On KLAD (Multi Ch Fairwinds FridayNight Tango x Ch Fairwinds Black Seductress), and he was bred by Jackie Forchuk & Donna Kjorsvik. Jack Jack just needs 2 more points to finish his Canadian championship.

Kelly Ladouceur
KLAD Cockers

The Truth About Dog Vaccinations

By Brett Winn



The risk of a Vaccine Administered Adverse Event (VAAE) increases when multiple vaccines are given simultaneously.

Canine vaccinations play an important role in protecting dogs from contagious and lethal disease. However, they are not without cost. Despite increased publicity in recent years about the adverse effects of vaccinations, many people still assume annual vaccines for their dogs are necessary and many veterinarians continue to administer them. The question is not whether to vaccinate, but for which diseases, when, and how often?

Dog vaccinations are a double edged sword. Studies have shown that most canine vaccinations provide immunity from seven years to life, if given when a dog's immune system is mature. However, vaccinations also have considerable potential for harm. Dog owners should be informed of the benefits and risks in order to make appropriate decisions for their pets. The seemingly obvious source for this information are veterinarians and vaccine manufacturers, but a conflict of interest exists between them and the education of the public. For what vaccine manufacturer wants to fund a study that might find their product to be unnecessary and/or harmful? And it is certainly understandable if some veterinarians are reluctant to advise against annual vaccinations, when those vaccinations represent a substantial portion of their annual revenue.

The key to reducing vaccine reactions in dogs is to reduce the number and frequency of vaccinations given. Before examining the potential unwanted consequences, here is a brief look at vaccines and their effect on the canine immune system.



This Chihuahua receives the same amount of vaccine as a Great Dane!

What Is a Vaccine?

A vaccine is one or more disease antigens that, when injected into a dog's body, causes his immune system to produce specialized proteins known as immunoglobulins, or antibodies. Antibodies fight infection and disease and neutralize the antigens by binding to them. The cells that created the antibodies (a form of white blood cell) have a memory of the antigen so that when the antigen is encountered again, the cells' "memory" enables them to rapidly produce more antibodies i.e. to mount immunity against that pathogen. The most common dog vaccination is a combination cocktail called DHLPPC which includes pathogens for:

- Distemper
- Adenovirus-2
- Leptospirosis
- Parainfluenza
- Parvo
- Coronavirus

all in a single injection. Other vaccinations often given at the same time are:

- Rabies
- Bordatella (Kennel Cough)
- Lyme Disease

- Giardia

There are two types of vaccines, killed (inactive), and modified-live (MLV). A killed vaccine takes a virus or bacteria and renders it unable to reproduce with heat or chemicals. The immune system doesn't readily recognize dead antigens, so the antigens are combined with substances called adjuvants. An adjuvant slows the release of the antigen and lengthens the dog's exposure to it in what is known as the "depot" effect. The immune response is improved and less antigen is required. Oils, aluminum salts, and proteins are examples of adjuvants. Killed vaccines contain preservatives such as thimerosal (which is 49% mercury), to kill germs that might have accidentally contaminated the vaccine. Adjuvants and preservatives share culpability for some of the adverse reactions dogs experience.

MLVs are created from isolated bacteria and viruses that have been attenuated, or weakened so as to not cause the disease. They do reproduce in the dog's cells, and provoke immunity by mimicking infection with the virulent disease agent. MLV products are preserved by freeze drying, or with small amounts of antibiotics. They produce a stronger immune system response with fewer doses than do killed vaccines, and do not require the addition of adjuvants. MLV vaccinations are thought to sometimes over stimulate the immune system, causing it to malfunction. They are contraindicated for dogs with already suppressed immune systems. MLVs have the potential to revert to the virulent form of the disease.

Risks and Benefits

The benefits are obvious. The dog doesn't get the diseases for which he has been vaccinated and the dog's owner has peace of mind, and doesn't have to pay for expensive treatment when the dog becomes infected. The risks are harder to assess as unwanted side effects vary in type, number and severity from dog to dog. The likelihood of a dog having an adverse reaction depends upon his sex, age, size, health and genetic predisposition as well as the type and number of vaccines administered.

Potential Side Effects

A Vaccination Administration Adverse Event (VAAE) can be subtle or severe. Anaphylaxis, characterized by the sudden onset of symptoms such as vomiting, diarrhea, seizures and shock, is an immediate and life threatening response to vaccines that some dogs experience. The dog may experience cardiac and respiratory failure leading to death unless immediate treatment is available. Anaphylactic reactions most often occur with killed variations of vaccines such as those for Rabies, Leptospirosis, and Coronavirus. Less dramatic adverse reactions can include the following:

- localized pain and swelling at the injection site
- fever
- loss of appetite
- aggression
- depression

- skin allergies

Dogs with seasonal allergies sometimes worsen after vaccination. The distemper vaccine can cause encephalitis (inflammation of the brain). Some dogs and more commonly, cats, have developed cancers on injection sites. Pregnant dogs vaccinated with MLV products are at increased risk for abortion.



Small white dogs are more susceptible to auto-immune disease and adverse reactions to vaccines.

Canine Auto-Immune Disease

The most pervasive side effects of vaccination cover a spectrum known collectively as auto-immune disease. There are many different auto-immune disorders, but they all share an immune system gone awry. The dog's immune system begins to destroy his own cells as if they were the disease causing agent. Some canine diseases thought to be either caused by, contributed to or triggered by (in the case of genetic pre-disposition) canine vaccinations include:

- Autoimmune Hemolytic Anemia
- Addison's Disease
- Inflammatory Bowel Disease
- Lupus
- Rheumatoid Arthritis
- Thyroid Disease
- Epilepsy

A partial list of breeds known to be vulnerable to vaccine related auto-immune disorders includes:

- American Cocker Spaniel

- Akita
- Boxer
- Dachshund
- German Shepherd
- German Shorthaired Pointer
- Golden Retriever
- Great Dane
- Greyhound
- Old English Sheepdog
- Shetland Sheepdog
- Shih Tzu
- Vizsla
- Weimaraner
- Standard Poodle

as well as many white coated (particularly small) breeds or those with coat color dilution genetics such as merling (Collies, Australian Shepherds), harlequin Great Danes, blue and fawn Doberman Pinschers, etc. A dog may exhibit symptoms in one or multiple areas. The weakened immune system leaves the dog vulnerable, especially when neither owner nor vet recognizes the real culprit and multiple vaccines continue to be administered. Vaccinations are not the only culprit in canine auto immune disorders; certain dog food preservatives, environmental toxins and pesticides are also suspect.



One key to reducing adverse reactions is to reduce the overall number of vaccinations given.

Limiting Risk: Less is More

In 2002, a landmark report published by the American Veterinary Medical Association (AVMA) Council on Biologic and Therapeutic Agents (COBTA) stated in part, "...the practice of revaccinating animals annually is largely based on historic precedent supported by minimal scientific data; unnecessary stimulation of the immune system does not result in enhanced disease resistance and may expose animals to unnecessary risks...". It is clear that the "*one vaccination protocol fits all*" mentality of previous years must be reviewed, and that the benefits of vaccination must be weighed against the potential risk for an individual dog and his circumstances. It is important that dog owners not feel intimidated into giving more vaccines than they feel is wise. The only vaccination mandated by law is the Rabies vaccine, and even that is three years into a seven year (grass roots - consumer funded) study that hopefully will demonstrate seven year efficacy. Dogs that spend time around other dogs, that are boarded frequently, or who attend dog shows and dog parks, may need more careful monitoring than dogs that never leave home. Regardless of circumstance, the good news is that there are ways to minimize risk.

Limit the number of vaccinations the dog receives. More is not necessarily better. A study published in 2005 in the Journal of the AVA (American Veterinary Association), determined that the risk of adverse side effects increased with the number of vaccines given simultaneously. When a dog is vaccinated with multiple pathogens, his immune system is forced to respond to them all. The various pathogens "compete" for the immune response, resulting in a lesser response over all. Consider vaccinating only for the "core" (potentially fatal) diseases: Distemper, Parvo and Rabies and Adenovirus-2. Consider the non-core vaccines in light of a dog's individual risk. There is no need to vaccinate for Lyme disease unless the dog lives in or is traveling to an area where Lyme is prevalent AND the dog's habitat or lifestyle puts him at risk. A tick carrying Lyme Disease generally must be attached to the host for 24 hours to communicate the disease, so rapid, habitual detection and removal of ticks negates the need for the vaccine. As much as possible avoid multiple disease "cocktail" vaccinations.

Limit the frequency of vaccinations with both puppies and adults. A puppy is typically given a series of "puppy shots" that begins as early as six weeks of age and concludes around sixteen weeks, followed by a "booster" at around one year. These vaccinations are wasted when the puppy is still protected by the immunity he received from his mother. Maternal antibody interference is the most common cause of vaccine failure. Exactly when the immunity conferred by the mother wears off varies between puppies, but it is known to last longer than previously thought. Up to twenty percent of 18 week old puppies have enough maternal antibodies present to interfere with successful Parvo immunization. One option is to delay vaccinating entirely until the puppy is over 22 weeks of age. Delayed vaccination undoubtedly reduces the risk of VAAEs, but requires vigilance on the part of the puppy's owner to be aware of disease risk and to make intelligent choices when exposing his puppy. The time period prior to such delayed vaccination overlaps one critical to socialization, so it is important the puppy be socialized only in places where the other dogs are known to have been immunized, such as friends' homes, and not public places such as Pet Smart where the status of dogs encountered is unknown. Certainly the beginning of a vaccination series should wait until the puppy is at least eight weeks old and longer when possible. Allow a minimum of three weeks between vaccinations.

Have adult dogs titered, and do not vaccinate when titers are adequate. A titer (pronounced TIGHT-ER), test measures the antibodies in a dog's blood, and indicates if his immune system was mounting immunity at the

time his blood was drawn. Titer tests are a bit problematic in their interpretation. The dog may show no antibodies to a particular pathogen and yet his cells be fully capable of producing them when needed. The lack of antibodies doesn't always indicate a lack of protection, but rather that the memory of the pathogen had not been provoked at the time of the test. One way around this frustration is to deliberately expose the dog to the vaccine a week or ten days prior to his titer test. This is done by purchasing and mixing a vaccination of the type he is to be titered for, but instead of injecting it into the dog, put it on a cotton ball or tissue and allow the dog to sniff it, or perhaps even rub a bit of it on his nose. This increases the likelihood of the titer test result's accuracy.

Ongoing Research

Two researchers are at the forefront of the field of canine immunology, Ronald D. Schultz, Ph.D, DVM and W. Jean Dodds, DVM. They are currently working together on a Rabies Challenge study that is underway at the University of Wisconsin's School of Veterinary Medicine where Dr. Schultz is a professor and the current chair of the Department of Pathobiological Sciences. Dr. Schultz has been studying the efficacy of vaccines and immunity since the 1970's. Regarding the practice of annual vaccination, he says, "...we have found that annual revaccination, with the vaccines that provide long term immunity, provides no demonstrable benefit and may increase the risk for adverse reactions." Dr. Dodds, an expert on Canine Autoimmune Thyroid Disease and founder of the first private non-profit blood bank for animals, Hemopet, is equally recognized as an authority on canine vaccines and immunology. Dr. Dodd's limited vaccination protocol is widely followed by purebred dog breeders concerned about the incidence of adverse reaction. Regarding titering at the one year period, she says, "If the titers are sufficient, then a booster isn't needed."



Dachshunds are among the breeds known to be vulnerable to vaccine related auto-immune disorders.

Other Considerations

One concern for small dog owners in particular, is the amount of vaccine given. A Chihuahua is vaccinated with the same amount of pathogen as a Great Dane. Some researchers maintain that since at the cellular level there are the same number of receptor sites in every dog, that there is no reason to adjust dosages for body size. However studies show that the smaller a dog, the greater his potential for vaccine reaction.

There is a period of vulnerability, particularly with Parvo, when a puppy's maternal antibodies prevent his immunization with a vaccine, and yet are insufficient to protect him from actual infection with the virus. This is important to remember with puppies in areas with widespread incidence of Parvo.

Just as with humans, there is an emerging body of evidence on the role inflammation plays in the canine body. Long thought to be a cause of healing, it is increasingly thought to be a causative agent in disease, and not a cure. The natural response in a dog's body to vaccination is an increase in inflammation.

In Conclusion

The study of canine immunology will be ongoing into the foreseeable future. Troubling questions remain for which there are no absolute answers or all encompassing solutions. Vaccination decisions are unique to every dog and should be determined by the dog's age, health, breed, etc. Links for further reading as well as to some of the latest and most conservative vaccination protocols have been provided.

Additional Reading and Resources

- [Everything Vaccines](#)
- [Canine Health Concern](#)
- [Dr. Jean Dodds Vaccination Protocol](#)
- [AAHA Canine Vaccine Guidelines](#)

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