



**NEWSLETTER JUNE 2001**  
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## NOTES FROM THE PRESIDENT'S DESK

There have been several articles about dog's health, circulating over the Internet lately, from different sources. It is great that these concerns can be so widely and quickly shared. However as in all things being passed along, facts have a strange way of stretching and sometimes being exaggerated; this can cause alarm in more ways than one! I have found that while it is good to have these things brought to my notice, it pays to have them confirmed for accuracy before sharing them further! Sometimes good intent however well meant, is not enough. I would like to wish you all a good summer and hope to see as many of you that can make it, at our specialty in Manitoba.

Fern

## A WORD FROM THE EDITOR

You will notice more changes on our masthead this month. Barb Hoffman has been forced to resign her position as secretary due to health problems. I'm sure you'll all join me in sending Barb our best wishes and hopes for a speedy recovery. Meanwhile, Al Alcock has volunteered to step into the breach on an interim basis, so he is now wearing the Secretary-Treasurer's hat. Thanks, Al!

This didn't start out to be an issue on health-related matters: it just grew that way. Probably because of the amount of time (and money.....) I've been spending at the vets' lately. I hope you find it interesting and useful.

## SPECIALTY UPDATE

Our 2001 Specialty in Winnipeg, Manitoba, is fast approaching! Premium lists are now available and will be sent to all our members by the Show Secretary for the Manitoba Canine Association. If you don't receive one, contact Lynne Samuel at ph#(204)783-5863, or E-mail: [isamuel@mb.sympatico.ca](mailto:isamuel@mb.sympatico.ca)

## BOOSTER NEWS

The Canadian Cardigan Corgi Club is holding a Booster Show at Kilbride KC near Milton, Ontario, on July 14 (as somebody has pointed out, Bastille Day. "Citoyens chiens, aux barricades!"). Premium lists have been mailed to all members in Ontario.

We also have a Booster on **Sunday August 26<sup>th</sup>** in Long Sault, Ontario, in conjunction with the Stormont, Dundas and Glengarry Kennel Club. Judge is Mr. Richard Beauchamp of California. Mr. Beauchamp is a Pembroke breeder, author of a recent series on breed type in 'Dogs in Canada' magazine, and of the book 'Welsh Corgi: Pembroke and Cardigan'.

***Eight sets of points over two weekends!*** The SD&G Kennel Club offers four outdoor shows in four days - August 24 to 27 - at the same location: the beautiful park setting of the Long Sault Parkway adjacent to the St. Lawrence River. There is camping available in the park. On the following Labour Day weekend - August 30 to September 3 - the

Cornwall District Kennel Club offers four indoor shows at the Cornwall Civic Complex; there is camping available on-site. Saturday September 1 is Cornwall KC's silver anniversary celebration, and there will be a **special award** for the Cardigan Welsh Corgi going Best of Breed!

Cornwall is 18 km (10 miles) from Long Sault. If you camp at the park, you don't even have to move!

Premium lists for SD&G will be mailed to Ontario members; and are available from:

Diane Edwards Show Services

1562 Route 203

Howick, Quebec J0S 1G0

tel.: (450) 825-2824

Premium lists for Cornwall Kennel Club are available from:

C & A Show Services

7 Vin Vista Drive, RR #3

Ingleside, Ontario K0C 1M0

tel.: (613) 537-2634

For additional information contact Marilyn Boissonneault at (613) 543-3435.

### **LEPTOSPIROSIS.....it's back!**

In the seventeen years since we bred our first litter, I'd never heard of leptospirosis, and certainly never had a dog vaccinated for it. Something like smallpox in humans, it was assumed to be an 'olde tymer' disease that had been licked. Unfortunately, it wasn't, and it's back.

Lepto, as it's often called, is a very serious bacterial disease that affects many species of animals including dogs and humans, but rarely affects cats. It is spread through the urine of infected or recovered animals (which can shed the bacteria for months or years even though they show no symptoms); dogs can pick up the bacteria from contaminated lakes and rivers, or stagnant water such as puddles and ditches. The main result of lepto is kidney damage, although it can have other impacts, including abortions and still births. In humans, as well as kidney damage, it can cause liver failure, hemorrhage and meningitis. It can be fatal. A number of vet clinics in our area have seen dogs with lepto this spring, and several animals have died.

Clinics in eastern Ontario (and I assume elsewhere, as cases of lepto are showing up all over the continent) are recommending vaccination against lepto as part of the 'core' vaccinations your dog should get every year. The initial vaccination requires a booster shot 3 to 4 weeks after the first one, then once a year as part of the annual check-up. Given that lepto can be difficult to diagnose and treat, can be transmitted to humans, and can be fatal to both of you, I strongly recommend that you speak to your vet about lepto vaccination for your Cardigan.

## A NASTY CAN OF WORMS

The message on the answering machine didn't say much, just 'I need to talk to you about a Corgi'. When I called, it turned out that the dog in question had been found wandering loose, and obviously had been for some time since he wasn't in very good shape. The woman who found him thought he might be a Pembroke. She'd had Camper - as in 'poor little guy, you sure aren't a very happy camper, are you?' - for a week and he hadn't eaten a thing. The vet was still trying to figure out what was wrong with him, but in the meantime Laurie was terribly concerned that Camper wasn't eating. She found my name and number in an old edition of the 'Dogs Annual', and as I was the closest person listed under either Corgi she thought I might be able to determine if he was indeed a Pembroke, and maybe suggest something to get him to eat.

When Laurie found Camper, he was wearing a choke collar and the tattered remains of a leash. (It is a minor miracle that Camper's collar hadn't snagged on something and strangled him. A choke chain is for training only, and should NEVER be left on a dog that isn't supervised!) He had no tattoo or microchip for identification. His claws hadn't been clipped in quite some time: they were so long they were beginning to curl under and into his pads. He was vomiting and had terrible diarrhea...so badly that his anus was swollen and he screamed when he had to pass a stool. Finally, he'd been shot: Laurie found several BB pellets under his fur. To be certain she had found them all, she shaved him. When I saw him, poor Camper was naked except for the furnishings on his hind legs.

But he was definitely a purebred Pembroke: an intact male about 18 months old, red and white with a black mask. Not surprisingly, he was very subdued, and moved like a much older dog when he moved at all. After several days of medication from the vet he'd finally stopped vomiting, but still would not eat. Laurie showed me a sample of his stool: it was a thick, shiny black mess. I've done enough whelpings that I realized Camper was essentially passing blood, old blood.

Laurie called the vet again. She told the vet that I had confirmed Camper was a Pembroke, and passed on my observations about his stools. By coincidence, the vet had completed the latest tests and determined that Camper had *hookworm*...a really, really bad case of it.

Hookworms live in the small intestine and suck blood - sort of like internal vampires. Enough of them will cause anemia, and death. To quote from The Dog Repair Book by Ruth James, DVM, "By the time you notice that a puppy or dog has hookworm disease, he is in BIG trouble. Chances are good that he will need supportive treatment, which may include blood transfusions, to keep him alive until a wormer can take effect. Powerful wormers are required which can only be obtained through a veterinarian. Treating a dog who is sick with hookworms is not a do-it-yourself job. It is very important that a severely anemic dog be handled very gently and that stress be avoided, or he may go into shock and die."

Although hookworms can penetrate the skin, most cases are acquired when the dog

eats the infective larvae. Puppies can also acquire the worms from an infected mother, either through the placenta or in her milk. So good sanitation (a euphemism that means picking up all your dog's feces and disposing of them) is important to prevent infections, as is the practice of regular worming for all dogs. Hookworms, unlike tapeworms, won't likely be visible in the feces; you'll need to take a stool sample to the vet, where it will be examined for several species of worms by a technician who isn't paid nearly enough to do this job.

Camper is a lucky dog: as bad as it was, his case hadn't yet progressed to severe anemia. I spoke to Laurie a couple of days after the worm treatment started; Camper was eating ravenously, bouncy and energetic as a young Corgi should be. I think Laurie's going to keep him.

So: get a stool sample from your Cardigan, and head to the vet's. Deworming is something we (at least, I) tend to forget; and as Camper's experience shows, neglecting to de-worm can open a nasty can of worms.

### **DISC DISEASE IN CARDIGANS**

I read somewhere that you can measure how well a dog is loved by the number of nicknames he/she has. I guess Eli is a very well-loved dog, because apart from his well-known alias of Bonehead, he also knows and responds to Happy Dog; Eliavichinski (don't ask), usually shortened to Inski; Your Largeness; and Pooh-dog. He's currently learning another: Zipperback.

About a month ago, when I got home from obedience class with Cleo, Jim reported that Eli had fallen down the stairs. Unfortunately he hadn't seen the accident so didn't know what had caused it. Not surprisingly, Eli seemed a little tender in the ribs, so as a precaution I gave him a couple of baby aspirin and tucked him into a crate for the night.

Next morning, he could scarcely walk. The vet's office said "Come immediately".

Of course, the fear of damage to Eli's spine was uppermost in my mind - especially since the Vickers lost his litter sister, Flynn, just two months earlier with disc disease, and in 1988 we went through the same thing with Patches, who survived. Cardigans, like other short-legged, long-bodied breeds, are prone to disc problems: like a poorly designed bridge, there is just too much body length between limbs to provide adequate support for the spine. Disc problems are so common in the Dachshund that the condition is often referred to as 'Dachsie disease', but I think the heavier bone of the Cardigan must contribute to the incidence of disc problems in our breed. Naturally, Eli has *very* heavy bone.

The structure and function of the disc is virtually identical in dogs and humans. Between every pair of vertebrae there is a disc, to act as a shock absorber and prevent the friction of bone rubbing on bone. The disc is a tough, elastic outer ring with a Jello-like inner core called the nucleus. When a disc 'ruptures', (actually the technical term is a herniated disc) some of the nucleus is forced through a tear in the outer ring, and

protrudes into the spinal cord, causing pain and paralysis. Because the disc is soft tissue, conventional X-rays are generally useless in determining whether a disc has ruptured, and if so, which one(s); Eli's X-ray showed nothing at all. However, the most conservative, least invasive treatment for a suspected ruptured disc is X-ray, crate rest and large doses of steroids, to reduce inflammation.

This approach was prescribed for Eli. After a week, unfortunately, the paralysis was slightly worse, and he now had no bladder control. We got a referral to the Alta Vista Animal Hospital, which has two surgical specialists on staff: they could see Eli that afternoon.

Dr. Philibert performed a few simple tests to determine the extent of Eli's paralysis and approximately where the ruptured disc was located. He bent Eli's rear feet backwards (one at a time!) so that the top of the foot rested on the table with the pad up; a dog functioning normally would immediately move his feet back to the correct standing position, pad down, but Eli took several seconds to do so. This is called 'knuckling', and is evidence that the dog doesn't know where his feet are; it's considered a sign of nerve damage. Next he tested Eli's reflexes, using the same type of little rubber hammer human doctors use; the fact that Eli's legs twitched as they should was taken as a sign that the nerve damage probably wasn't severe. Finally, taking a pair of tweezers with sharp points, Dr. Philibert marched them up either side of Eli's back, starting at his tail. The point at which he flinched from a poke with the tweezers indicated the point beyond which he had full feeling in his back, and therefore was indirect evidence of where the ruptured disc was located: it appeared to be immediately below the rib cage. Doctor Philibert's tentative diagnosis was a ruptured disc where the thoracic vertebrae meet the lumbar vertebrae, but this could only be confirmed by a myelogram, which must be performed under full anaesthetic. In this procedure, a dye is injected into the spinal column, so that the soft tissues of the disc will show up on an X-ray. Dr. Philibert considered Eli a good candidate for surgery; if the myelogram confirmed the diagnosis, he would proceed immediately with the surgery. The only thing he was concerned about was the lack of bladder control, which (to my surprise) is not a common side-effect of disc damage; he wanted to do a complete urinalysis and blood workup before surgery, so that would be scheduled for the next day.

The procedure is to locate the ruptured disc with the myelogram, then to surgically remove all of the nucleus from that disc by cutting a slit in the outer ring. Since other discs immediately adjacent to the ruptured one are often weakened and prone to herniating too, it is common practice to remove the nucleus from these as well, as a precaution. In Eli's case, the myelogram showed a ruptured disc between the twelfth and thirteenth thoracic vertebrae - one up from where Dr. Philibert's external tests had suggested it would be. Eli's discharge sheet reads 'Pediculectomy T12-13 and fenestration T12-13 to L 3-4'; in other words, removal of the disc material that was protruding into Eli's spinal cord at the twelfth thoracic vertebrae, then the removal of the apparently normal nuclei from the discs down to the fourth lumbar vertebrae ('fenestration' in surgical terms means the creation of an artificial 'window', in this case to remove the disc material. I looked it up in the Concise Oxford!). The entire procedure took about one hour, and left Eli with an incision about 16 inches long down the middle

of his back, held together every quarter inch with staples. (Hence the new nickname: it looked exactly like a zipper!)

Eli was released from the animal hospital within twenty-four hours - another surprise! Post-operative care included a ten day course of antibiotics to ensure the incision healed properly, continued crate rest, and exercise on leash *only* for six to eight weeks. For at least a week, we were to take him outside with his back end supported by a sling, to minimize flexion of his back. They didn't think he would need painkillers (he did). There would be a follow-up visit in 10 to 14 days, at which time the staples would be removed. The urinalysis and blood work had shown no reason for the lack of bladder control (although when the hospital staff catheterized Eli for surgery they drained off about 400 ml of urine!); they advised that if he continued to dribble, or was unable to pass urine normally, I should call them immediately.

Somehow it's never possible to follow the post-operative care instructions quite as closely as the hospital suggests. Eli *hated* the sling; after three or four days we gave it up, except to get him down the front steps. We did give him painkillers - half an Aspirin every 12 hours seemed to keep him comfortable. He did dribble a bit the first day or so, but I didn't call the clinic, and in a conversation with my own vet we finally figured out the problem: apparently some male dogs are *so male* that if they can't assume the customary cocked leg position they simply won't go. Eli was retaining urine because he wouldn't pee like a girl! Fortunately, this misguided bit of canine chauvinism didn't last.

The incision healed up beautifully and the staples were removed after 14 days. Dr. Philibert was satisfied with Eli's progress. He cautioned me that the same short-legged long-bodied breeds that are prone to ruptured discs also often don't fully recover from the surgery. We should see gradual improvement in Eli's condition for about eight weeks, but after that, what we see is what we'll get.

As of this writing, it has been a month since Eli fell, and three weeks since his surgery. He is still rather unstable on his back feet, particularly if he is tired. The problem is, he feels so much better that it is hard to keep him as quiet as he should be. We had given him a bit more freedom of movement as of a few days ago, but last night I noticed that he was pacing again, as he did immediately after the surgery, so we will restrict his movement to a short leash again. We don't know how far his recovery will go; his ability to sire puppies won't be affected (three of his four litters were by artificial insemination anyway) but he may never get into a show ring again. More to the point, his quality of life shouldn't be diminished much, if indeed at all.

I don't have much data on this, but I wonder if back weakness in Cardigans runs in certain lines; apart from Eli and Flynn, their mother Emily has had a very mild bout with back problems (at age 11!) and her father Percy had the surgery at age 12. Is this age-related or evidence of a weakness in the line? (Eli has just turned seven.) Dr. Philibert thought Eli's case showed evidence of traumatic injury (falling down stairs) rather than a progressive deterioration. Regardless, we know our breed is susceptible to disc disease. To help protect your Cardi, keep him/her fit: an overweight or out-of-condition dog is more likely to run into trouble. And maybe, avoid long, steep staircases!

## ***In Memoriam***

Aberwyvern Llanfyllin, 1994-2001, bred by Marilyn Boissonneault; owned, cherished and sadly missed by the Vickers family: Colin, Joan, Ryan and Rhiannon. Flynn didn't shine in the show ring, but found her true calling as family companion and therapy dog.

### **WHERE DO CARDIGANS COME FROM?**

A newly discovered chapter in the Book of Genesis has provided the answer to the question: "Where do Cardigans come from?"

Adam said, "Lord, when I was in the garden, you walked with me everyday. Now I do not see you anymore. I am lonesome here and it is difficult for me to remember how much you love me."

And God said, "No problem! I will create a companion for you that will be with you forever and who will be a reflection of my love for you, so that you will know that I love you even when you cannot see me. Regardless of how selfish or childish or unlovable you may be, this new companion will accept you as you are and will love you as I do, in spite of yourself."

And God created a new animal to be a companion for Adam.

And it was a good animal.

And God was pleased.

And the new animal was pleased to be with Adam, and he wagged his tail.

And Adam said, "Lord, I have already named all the animals in the Kingdom and I cannot think of a name for this new animal."

And God said, "No problem! Because I have created this new animal to be a reflection of my love for you, his name will be a reflection of my own name, and you will call him DOG and he is a Cardigan Welsh Corgi."

And the Cardi lived with Adam and was a companion to him and loved him.

And Adam was comforted.

And God was pleased.

And the Cardi was content and wagged his tail.

After a while, it came to pass that Adam's guardian angel came to the Lord and said, "Lord, Adam has become filled with pride. He struts and preens like a peacock and he believes he is worthy of adoration. The Cardigan has indeed taught him that he is loved, but perhaps too well."

And the Lord said, "No problem! I will create for him a companion who will be with him forever and who will see him as he is. The companion will remind him of his limitations, so he will know that he is not always worthy of adoration."



God created CAT to be a companion to Adam.  
And Cat would not obey Adam.  
And when Adam gazed into Cat's eyes, he was reminded that he was not the Supreme Being.  
And Adam learned humility.

And God was pleased.  
And Adam was greatly improved.  
And the Cardi was happy.

And the Cat didn't give a damn one way or the other.

- with thanks, once again, to Al Alcock!

## **LAST CHANCE TO RENEW MEMBERSHIPS!**

This is **absolutely** your last chance to renew your membership for 2000! You will find a handy tear-off renewal form on the back of the newsletter. Please take a minute or so and fill it out, write out a cheque, and send to Al Alcock.

Some of you received a "puppy membership" when you acquired a Cardigan from a Club member this year. We hope you have enjoyed receiving this newsletter, and that you will choose to stay with the Club. There are lots of ways for you to get involved in the Club if you wish. And of course you will continue to receive this great newsletter! This is the first year that our new Constitution is in effect, requiring that everyone who wants to become a new *regular* member be sponsored by two regular members in good standing. *This does not apply to current full members renewing their memberships.* It does apply to current associate, junior or puppy members who wish to become full voting members of the Club. I suggest you contact the breeder from whom you acquired your Cardigan as one sponsor; they'll likely be happy to do it. Any other member, including an Executive member, can be the other. All of the Executive is listed on the masthead, with their addresses. Think of it as another way to keep in touch!

If you currently have a puppy membership and want to stay with the Club, but don't care about voting privileges, you can become an associate member, in which case you don't need sponsors. Just fill out the form and send it and a cheque to Al Alcock.

