



CANINE OLFATORY SUPER-POWERS

As students of tracking we get reminded every day of the wonder of the dogs' sense of smell. Smell is the dog's dominant sense, so much so that a huge part of its brain is devoted to analyzing odors. Dogs have two giant olfactory bulbs attached to the brain which decode every smell they encounter. The bulbs weigh around 60 grams, four times as much as human olfactory bulbs. Given that a canine brain is one tenth of the size of a human one, that means the canine brain has forty times as much of its brain devoted to smell as we do. Little wonder then that a dog's sense of smell is calculated to be 100,000 better than a human's. In tests dogs have been able to pick up chemical solutions that form one or two parts in a trillion—the equivalent of smelling one bad apple in two billion barrels.

In addition to such a large part of its brain devoted to smell, the dog's nose has a moist leathery surface which acts like Velcro catching the tiniest molecules of smells, then dissolving them so that the dog's internal, smell receptor cells can analyze them properly. To keep his nose wet, a dog must produce a constant supply of mucus through its nasal cavities.

Dogs can smell many different things. They can detect odors that are up to 40 feet underground. They have been used to detect leaky gas pipes. They can also smell insects embedded in the ground or woodwork and are used to sniff out termite infestations. And dogs really can smell fear. If a dog goes into a room where a frightened dog has just left, he will appear anxious and agitated. This is caused by a scent, an alarm pheromone, which is produced by the anal glands of frightened dogs.

Dogs' noses are so sensitive that they can even smell electricity. While con-

(Continued on page 2)

PRESIDENT'S MESSAGE

Hi All

WELL READY OR NOT SUMMER IS HERE, I HOPE EVERYONE HAS A GOOD SUMMER. BEFORE YOU KNOW IT WE WILL BE DOING THE NOVEMBER TEST AND TRYING TO STAY WARM.

JUST WANTED TO REMIND EVERYONE THAT IT'S TIME TO ELECT CLUB OFFICERS.

I WANT TO GIVE A SPECIAL THANK YOU TO THE CLUB TRACK LAYERS THAT HELPED WITH THE ABTC NATIONALS. CHARLENE DUNN, TRACY FREELING, MARIAN BECK-EDWARDS AND NATASHA DECKER.

IT WAS A LEARNING EXPERIENCE, AND THANKS TO ALL OF YOU THE ENTRANTS HAD A GREAT TEST.

KEEP COOL, DEB

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Don't Forget: The next Club meeting is on August 15th and will be the Annual Meeting with election of officers.

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ducting an experiment, a researcher found that a dog could smell which of two compartments contained an electric current. He concluded this was because the charge resulted in the release of tiny amounts of ozone which the dog could detect.

Farmers train dogs to tell from the smell of a cow's urine whether it is in oestrus so they know the best time to introduce a bull for breeding.

As far as dogs are concerned, all humans have a unique smell. They can pick people out according to body and other odors they project. Scientists think that the only way a dog wouldn't be able to tell two people apart would be if they were identical twins on identical diets. As a result of this, dogs can track human smells over long distances. They can pick up on the difference in odors from different footprints to work out which direction their prey is headed. They can do this twenty minutes after a person has passed by even though the footprints are made a single second apart.

Scientists who tested four German Shepherds discovered that they track footprints by dividing the job into three phases. During the first, *search* phase, they move quickly, sniffing 10-20 times each breath. Once they have detected the smell, they enter the *deciding* phase, where they sniff at between two and five specific footprints. They do this for a longer period, slowing down as they do so. Finally, once the direction has been established, the *tracking* phase begins, with the dog once more moving quickly.

One of the most fascinating uses for a dog's sense of smell is in the field of human health. Dogs can anticipate in advance when a person is going to have an epileptic seizure. A Canadian study found that dogs who lived with children prone to epileptic episodes behaved unusually in advance of the attacks. Some dogs would lick the child's face or act protectively. One dog even guided a young girl away from a set of stairs shortly before she had an attack. The dogs' warnings came as early as five hours before the first symptoms of the epileptic episode were visible. Health authorities around the world are now training "seizure alert" or "seizure response" dogs, some of which can predict

the episodes, and all of which will respond in an appropriate way when an owner does have a seizure. Some will be trained to stay with and guard the owner, and some even to press a button on a phone which dials the emergency services.

It remains a mystery how they are able to pick up on epilepsy in this way. Some think they pick up on tiny behavioral or scent cues. Others are convinced it is a reaction to electrical activity in the body. But the fact that dogs also respond to psychological seizures which are non-epileptic and don't display abnormal electrical activity casts doubt on this.

The training of dogs to recognize human cancer by its smell is in its infancy, but has the potential to make an important contribution in the field of cancer. Scientists think that simply by sniffing samples of human breath, dogs can detect lung, breast and other cancers with an accuracy rate of between 88 and 97 percent. The accuracy rate of a hospital scanner is between 85 and 90 percent.

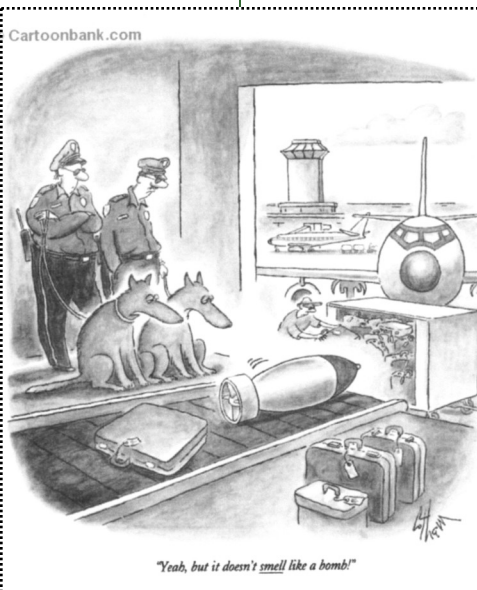
Dogs have also been trained to tell by smell when a diabetic's blood sugar has fallen to a dangerous level. They are able to alert the person before he becomes unconscious. A hypoglycemic episode, (low blood sugar) is an emergency and can occur

rapidly leading to collapse and coma. It's not clear if this has a smell but there is evidence that it does. The dog may be picking up a particular smell or indeed the absence of a particular scent. It's all very much trial and error at the moment and we are learning from the dogs.

Other uses for the dog's superior sense of smell are being discovered every day. Effective and accepted by the public, trained dogs are the most frequently deployed detection systems for identification of explosives threats in mobile applications. In addition to being highly sensitive, dogs can

rapidly discriminate the unique profile of an explosive in the presence of a large excess of distracting odors, far exceeding the capabilities of current portable instrumentation.

(Most of the preceding article was taken from an article written by Garry Jenkins and published at: <http://knol.google.com/k/canine-senses-how-dogs-smell>.)



"Yeah, but it doesn't smell like a bomb!"

TRACKING IN THE SUMMER IN TEXAS

Jean Seibert sent this little reminder of some of the dangers of working our dogs in the summer and I wanted to pass it along to everyone.

There is a great product out now that you may want to consider. I saw it demonstrated at the Disaster Dog Combat Challenge last year and was very impressed. It's called the ChillyBuddy cooling vest:

<http://www.chillybuddy.com/dogcoolingsolutions/index.html>

And for the research behind this product:

<http://www.chillybuddy.com/dogwintersolutions/about.html>

DANGERS OF WORKING DOGS IN HEAT, TREATMENTS

The first thing that needs to be understood is that dogs and people are different enough that most of the info cannot cross lines. I do not profess to know what the appropriate procedures for people are, other than what I learned in first aid.

Dogs do not lose enough electrolytes thru exercise to make a difference, but if the dog gets truly into heat stroke the physiological changes will make them necessary. BUT oral replacement at that point is futile, they need intravenous fluids and electrolytes and lots of it.

COOLING: Evaporative cooling is the most efficient means of cooling. However, in a muggy environment, the moisture will not evaporate so cooling does not happen well. I cool with the coldest water I can find and will use ice depending on the situation. The best way is to run water over the dog, so there is always fresh water in contact with the skin. When you immerse a dog in a tub, the water trapped in the hair coat will get warm next to the dog, and act as an insulator against the cool water and cooling stops. If you can run water over the dog and place it in front of a fan that is the best. Misting the dog with water will only help if you are in a dry environment or in front of a fan. Just getting the dog wet is not the point, you want the water to be cool itself, or to evaporate.

For MOST situations all you will need to do is get the dog in a cooler environment, i.e. shade, or in the cab of the truck with the air conditioning on (driving around

so the truck does not overheat and the AC is more efficient). Up to a couple of years ago, I was very concerned about my dogs getting too hot in the back of my black pickup with a black cap. A new white truck fixed a lot of that problem. When I had one dog I just pulled the wire crate out of the car and put it in some shade and hopefully a breeze. But having 2 dogs and running from one stake to another, that was not feasible. So I built a platform to put the wire crates on. This raises the dog up in the truck box where the air flow is better. Then I placed a 3-speed box fan in front blowing on the dogs with a foot of space to allow better airflow. I purchased a power inverter that connects to the battery and allows the 3 speed fan to run from the truck power. It has an automatic feature that prevents it from draining the battery. When I turned that fan on medium I would find that the dogs were asleep, breathing slowly and appeared very relaxed and comfortable in a matter of 20 minutes or less, even on very hot muggy days.

ALCOHOL: I do carry it for emergencies. It is very effective at cooling due to the rapid evaporation. It should only be used when other methods are not working. You should be on your way to the veterinarian before you get to this point. We recommend using rubbing alcohol, which is propylene alcohol, not ethyl, for those of you not aware. So do not try to drink it. Alcohol should be used on the pads and lower feet area where there is little more than skin and blood vessels over the bones. Use a little bit and let it evaporate, you can use too much as some is absorbed through the skin. There are concerns about toxicity, but you have to get the temperature down.

I purchased those cooling pads that you soak in cold water, but found that the dogs would not lay on them. I would hold them on the back of a dog that just worked to get a quick cool, but have not used them for years. I also bought a pair of battery-operated fans but found them pretty useless. Spend your money on the power inverter and get a real fan.

WATCHING TEMPERATURE: If you feel your dog is in danger of heat injury, check its temp and write it down. Keep checking the temp every 3 minutes. I recommend getting a "rectal glass thermometer. The digital ones from the drug store I have found to be very unreliable, Don't forget to shake it down completely each time, sounds silly, but when you are worried about your companion, things tend to get mixed

up. This is VERY IMPORTANT: Once the temp STARTS to drop, STOP ALL COOLING EFFORTS. The cooling process will continue even though you have stopped. If the temp starts at 106.5, and then next time it drops to 105.5, stop cooling the dog, dry it off, and continue monitoring. You will be amazed how it continues to go down. If you do not stop until the temp is 102, the temp will drop way too low. I cannot emphasize this point enough.

When the dog is so heated that it is panting severely, only let it have a few laps of water. Water in the stomach does not cool the dog, you just need to keep the mouth wet so the panting is more effective. Do not worry about hydration until the temp has started down. A dog panting heavily, taking in large amounts of water is at risk of bloat. Due to the heavy panting they will swallow air and this, mixed with a large amount of water, is a recipe for bloat. Once the temp is going down and panting has slowed to more normal panting, then allow water. The dog will rehydrate itself after temp is normal. If the dog has a serious problem and even though you have gotten the temp normal, get the dog to a vet, as it can still need IV fluids and some medication. Also, a case of heat stroke can induce a case of hemorrhagic gastroenteritis (not parvo), with a ton of very bloody diarrhea and a lot of fluid and electrolyte loss. These cases need aggressive treatment.

The best method of treatment is prevention. Learn to watch your dog, and see the changes in the size of the tongue, and how quickly it goes down. Learn your dogs response to the different environments, and be careful when you head south for an early season hunt test or trial. I have been to Nashville at the end of May, only 5 hours away, but the difference in temp and humidity did affect the dogs as they were used to more spring weather in Ohio. Try different things in training to help keep the dog cool and learn what works better.

Another very important point: Do not swim your hot

dog to cool it then put in put in a box/tight crate. Remember, evaporation cannot take place in a tight space, and the box will turn into a sauna and you will cook your dog. Carry a stake out chain, and let the dog cool and dry before putting it up. I demonstrated this lesson this spring with my 10-month old pup. After doing a 15-minute session in yard drill on a warm 70°+ day, she was panting pretty hard and was pretty hot. She was OK but it was time to stop. Just for the heck of it I took her temp. She was 103.6, above normal but not too bad for a dog that had just finished working. In my back yard I have a 300-gallon Rubbermaid tub filled with water. I took her to it and she jumped in and out 3-4 times. She appeared totally improved, tongue was much smaller, and eyes brighter and her full spring was back into her step. So I re-took her temp and it was 104.2, so even though she looked better she was actually hotter. This is a perfect lesson to show not get a hot dog wet and then put them in a box. The water on her skin caused the blood vessels to constrict, decreasing blood flow to the skin. Therefore the hot blood was shunted back to the dog's core and retained the heat. You may have felt the same thing, after exercising but still being very warm, take a shower and get cooled off but as soon as you turn the shower off you start sweating again.

I know this is a bit long, but hopefully this is easy to understand and helps provide some useful information. Remember: Prevention, learn your dog. It is worth the time and effort.

(This article was written by Nate Baxter, DVM, in Lebanon, Ohio and is used with permission.)

DFW Tracking Club was founded in the summer of 2005 by members of the tracking community who wished to offer tests, teach classes, and serve the tracking needs in the DFW area.

The mission of the DFW Tracking Club is to provide a need to the tracking community for tracking tests, tracking classes, and tracking education.

DFW Tracking Club has instructors who can service all levels of tracking from the novice to the advanced tracker. Our classes are structured to teach dogs and their humans to track for an AKC tracking test.

DFW Tracking Club is an AKC recognized club, and a 501(c) tax exempt organization.

For more information about the DFW Tracking Club, check out our yahoo group at dfwtrackers@yahoo.com or email the club secretary at info@dfwtc.org

JUBA'S STORY by Paula Gifford & Betsy Watkins

Paula: It was at a dog show in Longview, TX in 2007 that I ran into Charlene Dunn for the first time in about five years. She told me about a newly formed Tracking Club and suggested I bring my Rhodesian Ridgeback, Juba. It had been a while since I had done any tracking but decided to check it out. So in October of 2007 I took Juba and we started tracking. All went well until March, 2008, when I had knee surgery which entailed a long recuperation before I could get into the field again. When I did start tracking again, I found I was very unstable and, after falling five times (not just in the field), Charlene helped me to make the decision that I not try to do the tracking myself. A tracking title for Juba seemed to be unlikely when, in August, 2009, a very good friend, Betsy Watkins, said she would work with Juba for me. For the next 8 months she worked with Juba with help from Club members, Deb Lyons, Cindi Todd, and Charlene. It was really a high moment for me when Juba certified and was able to enter a tracking test. Betsy continued to handle him and I tried to stay out of sight.

In March, 2010, he was entered in his first TD test in Ferris, TX. He was 105 yards from the end when he failed to locate the article and was whistled off. On to Houston a week later. Here we had success and Juba finished the track in 9 minutes to get his TD and qualify for a Versatility Title. Am I proud? You bet! And I have lots of thanks to all those who helped and encouraged me.

Betsy: In another lifetime(early 70's) I worked with Nancy Overton.... tracking with one of my Skye Terriers. We were doing very well until an injury to Jonesy put an end to our plans. Nearly 40 years later, opportunity came my way again when my friend Paula had her Ridgeback, Juba, almost ready but could not continue because of her health issues. Juba and I started working together in August 2009. It took a lot of help and patience from Charlene, Cindi and Deb to get us on the right track (no pun intended). We eventually were certified and entered our first test in March of 2010 at Ferris. If we had just found that last corner it would have been great. However, the next weekend there was a test in Houston that Paula had entered—just in case. I had already planned to go to the shows at Houston Farm & Ranch since my German Wirehair Pointer special was entered. So it was a perfect weekend. On Saturday Lily won the Sporting Group and Sunday was the tracking test. The conditions included wet field grass, a gusty wind, cold and clear. Juba's starting time was 8:47 a.m. and he finished at 8:56 a.m. My Lily won the Sporting Group on Saturday and Juba passed on Sunday. Who could ask for more! We floated home that Sunday evening.



Ch Kei River's Check Mate Juba, JC, CD, CGC, TD with handler Betsy Watkins, judges, Kathleen Milford and Bob Brown, and tracklayer Sally Elkins.

Another Success Story

Joe and Michelle (Chelly) Quinn have just been voted in as members of DFWTC but already have this recent success under their belt. This is a quote from the judge's book:

“Our last TD dog, Flaxen Fields Flew the Coop Faraway, now TD, Golden Retriever, dog, owned by Michelle and Joe Quinn from Sunnyvale TX, certified by Charlene Dunn on 12 April 2010. This was one of those typical Golden Retrievers that took off down the first leg, got to the first turn and checked the corner then off it went down the second leg, owner hanging on. First turn was a 90 degree left, long second leg to an almost 90 degree left, just a bit

open, then to a 90 degree right and to the glove. This was the first tracking title for this owner and I talked to her later and she said she needed something to do after the kids left home and so training a dog was a great choice.”

“Guide dogs for the blind, hearing dogs for the deaf, dog companions for those that live alone...Dogs who comfort the sick and the elderly and befriend lonely children. All over the world there are hundreds of thousands of the faithful animals serving us with their love.”

The temperatures are soaring and it is hard to get out in the heat and do any moving, but fall will be here soon and some dates to look forward to:

- On **September 25th**, the Fall Beginner Classes will begin with Charlene Dunn and Tracy Freeling teaching.
- On **November 28th** the Club will put on a TD test with Cindy Morrow as chairman/secretary.
- On **January 16th** is the VST test with Sarah Helper serving as chairman/secretary.

August 2010

| Sun | Mon | Tue | Wed | Thu | Fri | Sat |
|----------------------|-----|-----|-----|-------|-----|-----|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| 15 <i>Meeting</i> | 16 | 17 | 18 | 19/17 | 20 | 21 |
| 22 | 23 | 24 | 25 | 26 | 27 | 28 |
| 28 | 30 | 31 | | | | |

WHAT'S AHEAD:

August:

August 15: Club Meeting - 1:30 HEB

September:

September 19: VST
Denver, CO (Columbine State Poodle Club) Closes 9/9/2010

September 19: VST
Overland Park, KS (Greater Kansas City Dog Training Club) Closes 9/2/2010

September 26: TR, TX
Littleton, CO (Golden Retriever Club of America) Closes 8/25/2010

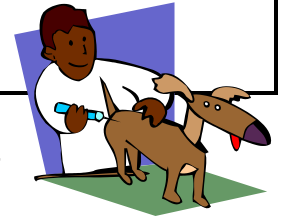
September 26: VST
Denver, CO (Golden Retriever Club of America) Closes 8/25/2010

September 25: DFWTC Beginner classes will begin (end November 13) Tracy Freeling and Charlene Dunn, Instructors

September 2010

| Sun | Mon | Tue | Wed | Thu | Fri | Sat |
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| 12 | 13 | 14 | 15 | 16 | 17 | 18 |
| 19 <i>Test</i> | 20 | 21 | 22 | 23 | 24 | 25 <i>Classes</i> |
| 26 <i>Test</i> | 27 | 28 | 29 | 30 | | |

Annual vaccinations come under scrutiny



INTRODUCTION

For generations of pets, the annual booster vaccination has become a ritual - Fido goes to the clinic to get his inoculations and an exam that is considered a byproduct of the "shot visit" by many owners.

These days, for convenience and budgets, some owners forego the exam and take Fido or Fluffy to a pet supply store or a low-cost clinic for a jab of protection against rabies, distemper, parvovirus, and other canine diseases.

But change is in the wind. Research shows that vaccines have a longer term of effectiveness against disease than previously thought, and some veterinary colleges have published alternative vaccination protocols that suggest three-year intervals after the initial shots and a 12-month booster.

Some veterinarians go further; they divide vaccinations into two groups according to the prevalence of the disease in their area and recommend skipping vaccinations altogether for older animals that seldom leave home and for pets with already-compromised immune systems.

The changes may be a welcome, but they can have hidden dangers if pet owners forego the annual exam as a result. Fido needs that checkup even if he is fully protected against disease by last year's vaccination.

WHY THE SWITCH?

An increase in knowledge about the canine immune system and more information about the length of time that immunity is conferred by particular vaccines have prompted veterinarians and researchers to question the yearly booster for adult dogs.

As a result, several universities have changed their vaccination recommendations and both the American Veterinary Medical Association and the American Animal Hospital Association have published changes in their vaccination guidelines.

"We are making this change after years of concern about the lack of scientific evidence to support the current practice of annual vaccination and the increasing documentation that over-vaccinating has

been associated with harmful side effects," said the announcement of a new vaccination protocol at the Colorado State University Veterinary Teaching Hospital. "Boosters, the annual re-vaccination recommendation on the vaccine label is just that - a recommendation - and is not a legal requirement except for rabies. This recommendation could just as well have been every leap year or full moon and is not, in most cases, based on duration of immunity studies."

According to the AVMA policy statement approved in 2001, the annual re-vaccination recommendation found on many vaccine labels is based on historical precedent and US Department of Agriculture regulation, not on scientific data, and in cases where data has been provided, there are still questions about the duration of immunity provided by the injection.

Furthermore, there is evidence that some vaccines provide immunity for more than one year and that annual boosters may subject the dog to events such as suppression of the immune system, development of autoimmune disorders, or vaccine-site infections.

The AAHA recommendations approved in 2003 echo the same concerns about too-frequent vaccination and encourage owners to work with their veterinarians to devise a health program that takes into account the diseases that are a problem in the pet's environment.

SO WHY VACCINATE?

Although there is a growing concern over vaccine frequency, there is no doubt that vaccines control diseases that can kill puppies and dogs and protect individual dogs from illness and death.

According to an article in the Journal of the American Veterinary Medical Association in 1995, concerns about too-frequent vaccination center on the potential for vaccines to trigger autoimmune diseases in susceptible dogs. Data is scant, but suspicion is growing, according to Dr. Ronald D. Schultz of the University of Wisconsin Department of Pathobiological Sciences.

"I am a strong advocate of vaccine use," Dr. Schultz

said in the JAVMA article. "We need to strike a balance between those who feel that no vaccines should be given and those who are vaccinating every week. Annual vaccination has become a knee-jerk response that, for the most part, is unnecessary. We have come a long way in reducing disease through vaccination, but perhaps we have gone too far."

HOW VACCINES WORK

Vaccines stimulate the immune system to produce antibodies to the disease so that the dog is protected against various organisms in the environment. If the immunized dog is later exposed to the infectious agent, the antibodies react quickly to attack and destroy the disease. (See "Vaccination: Shield against canine diseases" at

<http://www.canismajor.com/dog/vaccine.html>)

Initial shots are given to puppies to gradually phase-in immunity as the mother's milk protection wears off. Puppies are generally vaccinated against parvovirus, distemper, adenovirus (vaccine also protects against hepatitis), and parainfluenza in combined shots and against rabies in a single vaccination given at the age of three months. They may be inoculated against leptospirosis, Lyme disease, and corona virus if local conditions warrant or if the pet will be traveling in an area where these diseases are known to be a problem. (See "Puppy viruses: Distemper and Parvovirus can mean big trouble" at

<http://www.canismajor.com/dog/pupvirus.html>)

Vaccines come in two types: killed virus and modified live virus or bacterin. The killed vaccines are mixed with an adjuvant to boost the effectiveness, and various adjuvants are suspected of causing problems. Killed vaccines are more stable, but they require more injections to immunize the pet and are more likely to cause allergic reactions ranging from low-grade fever or muscle aches to hives, facial swelling, or even vomiting and diarrhea. In rare cases, a pet may collapse within a few minutes of the injection from a severe anaphylactic reaction, but most reactions take a day or more to manifest.

Modified live vaccines work more quickly and for longer periods, are less expensive, and require only a single dose to be effective. However, they should not be used in sick animals and may cause suppression of the immune system in susceptible animals or

abortions in pregnant bitches.

Vaccinations challenge the immune system in a complex manner, so it is not advisable to vaccinate a puppy or dog that is sick. Vaccines can fail if the animal has a fever or is taking steroids, or if they are given too close together or too far apart. They can also fail if the vaccine has been improperly handled or stored and may not protect a puppy that has lost immunity from mother's milk before the vaccine is administered.

Despite problems, vaccinations are still a pet owner's best line of defense against distemper and parvovirus that can kill puppies and young dogs, against rabies that will kill dogs - and people - of any age, and against other contagious diseases that can cause short term and long term health problems.

Pet owners should work with their veterinarians to design a vaccination schedule for each pet based on age, health status, reproductive status, and environment.

Rotating vaccines so that they are not all given at once is one option, and titer tests for antibodies is another. However, titer tests are more expensive than vaccinations and not completely reliable, so many vets do not recommend them.

Adverse reactions to vaccines should be reported to the veterinarian and the US Pharmacopeia, a private organization that operates a reporting program in conjunction with the American Veterinary Medical Association. USP can be reached at www.usp.org on the world wide web or at (800) 822-8772.

If veterinarians follow new protocols for vaccination intervals or owners and their veterinarians decide that particular pets don't need or should not receive annual vaccinations, the veterinarian should provide a statement to show at grooming shops, boarding kennels, or training schools. Those who plan to board pets or to take them to dog shows, dog parks, or other gatherings should add Bordatella vaccine to their inoculation protocol to protect against kennel cough. (See "Canine coughs: A cough is not necessarily a cold" at

<http://www.canismajor.com/dog/cough.html>) Initial Bordatella vaccine is administered through the nose; subsequent doses and boosters can be given as an injection.

CORE AND NON-CORE VACCINATION

AAHA and AVMA suggest two vaccination programs for their clients: a core vaccine protocol for triennial vaccination against the high-risk, contagious, and potentially fatal diseases of rabies, parvovirus, adenovirus-2 (hepatitis vaccine), and distemper and a non-core schedule for protection against additional diseases that may be extant in particular regions of the country.

The AVMA describes a non-core vaccine program as follows:

"Non-core vaccines are those that target diseases that are of limited risk in the region, and/or represent less severe threats to infected patients, and/or vaccine benefit: risk ratios are too low to warrant the use of these products in all circumstances, and/or scientific information is inadequate to evaluate these products. Veterinarians and owners/clients need to carefully consider the benefits and risks of using these vaccine products on an individual basis."

ANNUAL EXAMS

The veterinarian does far more than inject the vaccine; he listens to heart and lungs, probes the belly, looks at teeth and gums, examines eyes and ears, checks for parasites and skin disorders, asks questions, watches the dog move. He discusses ideal weight and exercise if necessary, and listens to questions and concerns of the owner. Dogs that visit the veterinarian once a year live longer and are less likely to be surrendered to a shelter because the owner has an animal health professional to answer questions and to find potential problems before they become serious. Shot clinics in pet supply stores or elsewhere do not provide these opportunities.

HOMEOPATHIC REMEDIES - AN ALTERNATIVE TO VACCINES?

Herbal and homeopathic remedies and treatments such as acupuncture and chiropractic are gaining popularity as alternatives to modern medicine for people and pets, but it is highly unlikely that anything in this assortment of alternative remedies will replace vaccinations against canine and feline diseases. Homeopathic nosodes have been used as a vaccine substitute and credited with preventing these diseases, but there are no studies that support their use on a broad scale and no quality assurance in their

production.

Susan Gayle Wynn, DVM, said on the Alternative Veterinary Medicine website that ". . . unfortunately, there is no convincing evidence that nosodes do prevent disease. A few studies published in homeopathic journals suggest that nosodes may decrease the severity of active disease and possibly prevent the spread of epidemics, but these studies are not well-controlled."

Wynn, a homeopathic veterinarian, continued: "The results of one well-controlled study suggest that parvovirus nosodes are completely ineffective in preventing parvoviral disease under experimental challenge conditions. Until well-designed studies are completed and thousands of pet owners make a concerted effort to help with potential retrospective studies, nosodes remain an unknown quantity and I do not recommend using them as a sole strategy for disease prevention."

Dr. Wynn recommends puppy and kitten vaccinations followed by annual boosters for a year or two.

For more information

AAHA WRAPS UP CANINE VACCINE GUIDELINES, DVM News Magazine,
www.dvmnewsmagazine.com/dvm/article/articleDetail.jsp?id=46546

REPORT OF THE AMERICAN ANIMAL HOSPITAL ASSOCIATION CANINE VACCINE TASK FORCE: 2003 CANINE VACCINE GUIDELINES, RECOMMENDATIONS, AND SUPPORTING LITERATURE,
www.aahanet.org/members_only/practice/canine%20vaccine%20full%20report.pdf

AVMA Policy & Guidelines - Principles of Vaccination
www.avma.org/noah/members/policy/polvaccination01.asp

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APRIL MEETING MINUTES

DFW Tracking Club

April 18, 2010

HEB Hospital

The meeting was called to order at 1.55 p.m. by President Deb Lyons. Members in attendance were Deb Lyons, Paula Gifford, Cindi Todd, Nancy & Rod Barclay, Sarah Helber, Sherry Creighton, Koni Vahdat and Charlene Dunn. Guests in attendance were Betsy Watkins, Horst & Jane Bungarz, Chelly Quinn and Susan Norvell.

February meeting minutes were read. Cindi moved to accept with Koni as 2nd. Motion approved.

President's Report – Nominating committee needs to be organized. Koni Vahdat, Cindi Todd and Tracy Freeling volunteered or were volunteered.

Vice President's Report – No report.

Secretary's Report – Judges and dates for November trial were accepted and confirmed by AKC.

Treasurer's Report – The Income/Expense Report was passed around and it was noted that the TD test did lose money.

COMMITTEE REPORTS:

November Test: Cindy Morrow will be Chair/Secretary with Paula Gifford and Nancy Barclay doing Hospitality. Deb Lyons will be Chief Tracklayer.

January VST: The test dates are January 15 and 16, 2011. Sarah Helber will be Chair/Secretary. Deb Lyons will be Hospitality Chair and Cindi Todd will be Chief Tracklayer. It was mentioned that the judges could stay with club members (the judges volunteered this information) or they would share a motel room. Paula Gifford volunteered her spare bedroom.

OLD BUSINESS

By-Laws Revision Committee. Discussion tabled.

Budget. Discussion tabled.

Belgian Tervuren Test. Natasha Decker, Koni Vahdat, Tracy Freeling, Charlene Dunn and Deb Lyons will be working this test. 2 rooms have been reserved for their use. Times are tentatively set. Breakfasts and lunches are to be served on site. Saturday night dinner is Dutch treat. If there are any additional volunteers they would be greatly appreciated.

NEW BUSINESS:

7 new members, 2 married couples included, applications had their first reading.

Next meeting is scheduled for June 13th at the HEB Hospital at 1:30 pm. A motion to adjourn was made by Charlene, seconded by Sarah. The meeting was adjourned at 2:55 pm.

Respectfully submitted,

Cindi Todd