

WHI Newsletter

The Independent Breed Health Group



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Dogs are miracles with paws. ~ Attributed to Susan Ariel Rainbow Kennedy



"To provide a platform for the reception and transmission of information about the health and well-being of the Soft-Coated Wheaten Terrier"

Issue: Twenty-four

March 2013

Viewpoint

This Viewpoint spot is simply a brief introduction to the content of the Newsletter. After the doom and gloom of a long, dreary winter, which has brought more than its fair share of bad weather; the concern of what our food labels actually tell us about what we are eating; rising prices and rising unemployment, we felt it was time to brighten our lives with

a celebration or two! We all know that the Wheatens we live with are absolutely the best of companions but our focus in this edition is the amazing capabilities that some of our breed has, in fulfilling particular roles. They are quite simply our Wheaten Heroes and we are very grateful to their owners for telling us their stories.

In this edition you will also find our usual diverse mix of articles and information but our second major reason to celebrate is the news of our forthcoming seminar on the 12th May, which marks the 10th Anniversary of the formation of WHI in February 2003. Full seminar details will be found on page 2.

Lynn Carter

WHEATEN HEROES

Mollie's Story



Mollie at 8 weeks

Mollie is my 5 year old Wheaten Terrier; she has been trained by the charity Support Dogs to be my registered Disability Assistance Dog. Mollie is my second Support Dog but my *first* Wheaten Terrier.

One thing that I have learnt over the last five years is that life with a Wheaten is *never* dull or boring! Mollie can turn any situation, however mundane, into something to be enjoyed.

Our day always starts and ends the same way. We begin with a very early morning run in the fields, at least Mollie does; I just watch on with envy and wish I had a fraction of her energy and enthusiasm! There are lots of scents to follow and check out, not to mention pheasants and rabbits to chase. The other end of the day always finds us curled up together on the settee; usually with Mollie on her back, legs in the air and head on my knee - bliss!!

How we spend the rest of each day is different. As a registered assistance dog, Mollie is allowed to accompany me at all times and wherever I go. Mollie is at my side, whether I am out for coffee or lunch with friends, visiting a museum, craft centre, art gallery or doing the weekly shop. There are the trips to hospital as well; however, even these are fun with Mollie.

We attend lots of fundraising events, which are of course, very important. Support Dogs is a charity and gets no Government or local authority funding, so it relies heavily on such events. The dogs themselves always attract the most attention. Mollie plays her part because she often likes to sit on my knee and people come up to me thinking that she is a stuffed toy! As long as they put the money in our pot we don't mind!

As well as our trips out there are the 'jobs' around the house. Mollie considers these tasks great fun and therefore they are great fun for me. How many people can say that they look forward to doing the washing??? If you could hear her squeals of delight as she pulls out each item of washing, you couldn't help but feel happy too. Whatever she does for me it is always done with enthusiasm

and pleasure. It doesn't matter how many times she collects the post, picks up things that I have dropped, opens or closes the door, fetches things for me or helps me up off the floor. Every time it is as if she is doing it for the first time.

There is also another side to Mollie; she is incredibly perceptive. It took me a while to realise just how much in tune with me she is. I'm sure that she is aware of what I'm going to think and do even before I do! She is very aware if I am having a bad day and after her run in the fields she is quite happy to play in the garden or quietly wander around with me or just curl up with me on the settee. She never puts any demands on me, she knows that things will get back to normal soon and there is always tomorrow for another outing.



When it was time for Meg, my first Support Dog to retire, I wanted a Wheaten Terrier. I discussed this with Support

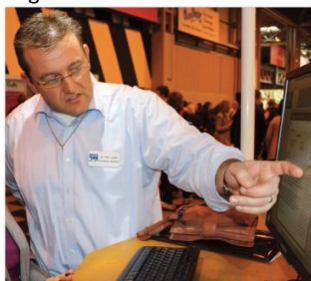
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10th Anniversary Wheaten Health Initiative Seminar Genes and Thermals!



We are delighted to announce that **Dr Tom Lewis BSc (Animal Science), MDip (Quantitative Genetics and Genome analysis), PhD (Quantitative Genetics)**, who is currently working at the Animal Health Trust, is to be one of our speakers at the WHI Seminar on Sunday May 12th 2013.

In 2011 Dr Lewis was awarded the Winston Churchill Travelling Fellowship which enabled him to spend time in Australia, collaborating with universities and institutions, and researching strategies for prioritising health in pedigree dog breeding. He hopes his findings will be able to benefit dog breeders in the UK.



Dr Lewis demonstrating the Kennel Club's Mate Select Programme on the AHT stand at Crufts this year.

Dr Lewis is interested in both genetic selection and the maintenance of genetic diversity in domestic and companion animals, and the development of tools that allow more effective consideration of health in breeding strategies.

His name will be familiar to many of you due to his role in the AHT's Quantitative Genetics team. He was at Crufts this year on the AHT stand explaining the use of Estimated Breeding Values (EBVs).

These are a more accurate reflection of the genetic risk of disease and were mentioned in Dr Sampson's presentation at the WHI seminar last year (Page 8, Newsletter 22, Mar 2012 and also previously on Page 3, Newsletter 20, Jan 2011)

Dr Lewis has been associated with projects such as; the Genetic evaluation of elbow scores and the relationship with hip scores in UK Labrador retrievers and Premature Mitral Valve disease, Syringomyelia, Curly Coat syndrome and Dry Eye syndrome in Cavalier King Charles Spaniels.

We are extremely lucky that Dr Lewis has agreed to take time out of his extremely busy schedule to speak at our seminar and we hope that you will be there to listen and to ask lots of questions.



Readers of this Newsletter will know that we like to bring new things to your attention whenever we can and Veterinary Thermal Imaging provides the second focus of our seminar.

We are very pleased to welcome **Hayley Springett BSc(Hons), RVN, PGCE and Certified Veterinary Thermographer**, who will be giving a presentation in the afternoon, on the use of this exciting new diagnostic tool.

VTI is the first UK company providing Thermal Imaging for companion animals. They work under a code of conduct prescribed by the RCVS, providing thermography reports for owners after Veterinary referral or for Physiotherapist instruction following referral, in addition to consultancy services to both the private and public sector.

Back and joint problems in dogs can be picked-up before they cause undue discomfort to your

**Hanslope Village Hall
Newport Road
Hanslope
MK19 7NZ**

Coffee at 10.00 a.m.

Booking essential
Tickets: £15
Pre-booked Lunch:
£5
To Book: Tel: 01246
554742

Veterinary Thermal Imaging

pet; this allows early treatment which in most cases is quicker, more effective and cheaper.

Thermography compares favourably to the cost of other diagnostic tests, with prices starting from as little as £30, for example X-rays are around £100-£150 per plate and MRI scans, £800-£1000.

The results gained through thermal imaging correlate very well with those discovered through other diagnostic methods and are covered by most insurance policies, if carried out under Veterinary referral.

Such issues as: Shifting and non-specific lameness, osteoarthritis, skin cancers, back and foot problems, as well as dental disease can be detected with a quick, non-invasive, painless procedure which can be carried out in your own home. Treatment can then be targeted, usually more effectively and with better prognoses.



The day will conclude with some time to celebrate the 10th Anniversary of the foundation of Wheaten Health Initiative and a chance to socialise over tea/coffee and birthday cake!

Mollie's Story (Cont)

dogs and with their approval went on to the S.C.W.T. puppy list. When a suitable litter became available I went with a member of the S.D. team to visit them at 6 weeks. The puppy was chosen by the S.D. Trainer. At 8 weeks old I brought Mollie home and as soon as she was fully vaccinated, her socialising and training started. At 18 months old she was assessed and qualified and so we became a working partnership, she was of course, still very much my pet dog.

My life before Meg and Mollie and Support Dogs was very different; I have Multiple Sclerosis and I had become very self-conscious about my obvious disability and began to lose confidence. I felt very vulnerable, and found people's questions difficult to answer and their response of feeling sorry for me, even worse. As a result I found no pleasure in going out and so stayed at home.

As I have already indicated,

things just couldn't be more different now. We are out somewhere every day and it is a sheer pleasure to be out with Mollie. It is Mollie who attracts the attention - not me. Most people are unfamiliar with the breed, so the first question is usually, "What breed is she?" followed by questions about Support Dogs. There are of course that rare group of people who know the breed, but they are often shocked to hear that she is a trained assistance dog! But whatever the reason people always stop and talk.

When out, I am used to hearing, 'Hello Mollie' followed by, 'Hello Pat' but I'm happy with it that way round; Mollie getting the attention, not me. It makes going out a pleasurable experience and something to enjoy.

Another nice bonus is the enjoyment she gives to others. You only have to walk into a hospital waiting room with Mollie and see how things alter;

suddenly there are smiles and questions about her and time passes quickly and pleasurably. I remember once an elderly lady I used to meet on my weekly, supermarket shopping trip, said to me that Mollie gave her the incentive to get up and come shopping - just because she knew that Mollie would be there, ready to give her a lovely welcome. So it's not just me that thinks Mollie is wonderful!!

I am a very independent person and find it very difficult to ask for help or talk about how I am feeling - with Mollie, I don't have to; she knows and understands how I feel and knows what to do and what's more she enjoys it!!

I guess it must be obvious from reading this that I think the world of Mollie! Mollie is a wonderful companion, a wonderful help and above all, she is a wonderful pet dog. I can't imagine life without her!

Pat Williams and Mollie



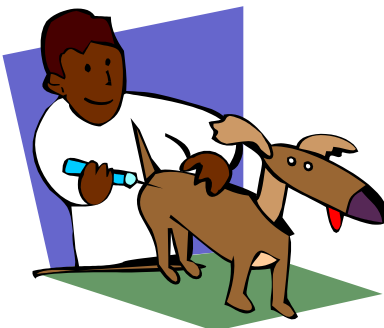
Mollie 'on duty' in her Support Jacket



'Chill-out' Time!

To find out more about the work of Support Dogs, or to make a donation towards their invaluable work go to www.support-dogs.org.uk

The Vaccination of Dogs and Puppies



For over forty years, Veterinary surgeons have been routinely advising us to have our dogs vaccinated against the common canine diseases. Worldwide, three diseases are recognised as a common or 'core' threat to dogs; canine distemper, canine parvovirus and infectious canine adenovirus (hepatitis). A fourth disease, leptospirosis is also regarded as a 'core' disease in the UK. The vaccines that prevent these four diseases are referred to as the **core vaccines**. Some countries have identified certain other vaccines which they regard as **core**. For instance, in some countries outside the UK, mandatory rabies vaccination is a legal requirement and if you are taking a dog out of the UK to one of these countries, a rabies vaccination will be required before international pet travel.

Non-core vaccines are available for several other canine

diseases. Administration of these vaccines is optional, depending on variant factors such as the lifestyle of the dog, the geographical area in which it lives and the prevalence of specific diseases. Dependant on the age and health of the individual dog, the risk-benefit ratio of vaccination should also be assessed. Non-core vaccines in the UK include those for kennel cough (bordetella bronchiseptica) and canine coronavirus (an intestinal infection).

Vaccination programmes have been successful in that two of the diseases, distemper and adenovirus (hepatitis), are now very rarely seen in the UK, although they are still present in wild animal populations of foxes and feral mink and also in areas where there are significant numbers of unvaccinated dogs.

In recent years, there have been many debates about vaccination; dog owners and other concerned parties have questioned the need for vaccination, the timing of the injections, the frequency of boosters and the incidence of any adverse effects. Different groups of experts have produced guidelines that have often been confusing, with advice from manufacturers and regulators differing from that given by veterinary experts.

In order to be able to publish globally applicable recommendations for the vaccination of dogs and cats, the World Small Animal Veterinary Association (WSAVA) formed a Vaccines Guidelines Group (VGG) consisting of immunological experts from around the world. In 2006, they produced a substantial research document which included a set



The Vaccination of Dogs and Puppies (Cont)

of factsheets relating to the major canine and feline vaccine-preventable infectious diseases. Following this, in 2010, the VGG published updated and expanded canine vaccine guidelines, based on the morbidity of disease (severity of disease signs) and mortality rates. All resulting documents are freely available on the WSAVA website.

www.wsava.org/guidelines/vaccination-guidelines

VGG RECOMMENDED PROTOCOLS FOR VACCINATING PUPPIES

The ability of a vaccine to effectively immunise puppies will depend upon the antibody titre of the dam and the amount of MDA (Maternally Derived Antibody) the puppies receive from her. The first three days after birth are vitally important to this process. Specialised epithelial cells in the intestinal tract of a puppy absorb the MDA, which is carried in the colostrum (first milk) produced by the mother.

Approximately 72 hours after birth, there is gut closure and no additional antibodies can be absorbed. This passively acquired immunity (MDA) provides protection against many of the infectious agents to which the dam has been exposed (either by vaccination or natural exposure) and to which she has developed antibodies.

However, the passively acquired immunity that provides temporary protection for the pup also prevents active immunisation with the core vaccines if they are given whilst MDA is still circulating in the pup's body.

Depending on the antibody titre of the dam, all or most of this **passive protection** will have waned by 8 - 12 weeks of age. Pups with low levels of MDA may be vulnerable to infection and capable of responding to vaccination at an early age while pups with high levels are

incapable of responding until more than 12 weeks of age.

The protection against each separate virus or bacteria is dependent on the amount of MDA for each of the pathogens.

These varying levels of antibody to individual pathogens mean, for instance, that pups may become susceptible to the distemper virus, parvovirus and adenovirus at different times. For example: where a puppy becomes susceptible to infection by distemper at 8 weeks and parvovirus and adenovirus at a later age of 12-14 weeks. If that puppy is vaccinated at 6 weeks of age, it will not develop immunity to *any* of the three diseases. If it is vaccinated at 8-10 weeks, it should develop immunity to distemper but *not* to parvovirus or adenovirus. A vaccination administered again at 11-12 weeks will not provide full immunity whereas a dose of vaccine given at 14 weeks or older should provide immunisation to all three diseases.

Multiple doses are given to puppies, not because they require multiple doses to immunise, but because they need to be given multiple times to ensure they are given when the passive antibody, to that specific virus, has declined to a level that won't neutralise (inactivate) the vaccine virus. The vaccine virus must infect the puppy to provide immunity; when MDA is high enough, it will block the immunisation process.

The recommendation of the VGG is for initial vaccination at 8 – 9 weeks of age followed by a second vaccination 3 – 4 weeks later and a third vaccination given between 14 – 16 weeks of age.

In contrast, vaccine manufacturers' data sheets recommend an initial course of two injections and some vaccines are also designed so that the second vaccination is

given at 10 weeks of age. The thinking behind this is to allow the early socialisation of puppies. The VGG recognise that this is of benefit to the social development of the puppy but emphasise that great caution should be maintained by the owner – pups should only be allowed access to controlled areas and only to other dogs and puppies that are healthy and fully vaccinated.

The VGG recommends that whenever possible a third dose of core vaccine be given at 14 – 16 weeks of age.

VGG recommendations state that vaccination should **not begin earlier than six weeks of age** and if the pups are to stay with the breeder until they are eight to ten weeks or older, it is recommended that vaccinations **begin at eight to ten weeks rather than six weeks**. Revaccination should be three to four weeks later with a final vaccination given when the pups are fourteen to sixteen weeks of age.

The Guidelines also state that revaccination, regardless of the type of vaccines, should not occur more often than every 2 weeks during the period from six to sixteen weeks of age and that ideally, no more than three doses of core vaccines should be administered to a given pup during the early neonatal period.

If the first dose of the vaccine is given at sixteen weeks of age or older, only one dose is generally needed because there is almost no likelihood that MDA would prevent effective immunisation. However, even when vaccination begins at sixteen weeks, VGG recommend two doses, two or more weeks apart, as there is a small percentage of pups that do not develop a response, for whatever reason, to a specific infectious MLV vaccine with only one dose. The vaccines which prevent canine distemper, parvovirus and



One reason a dog can be such a comfort when you're feeling blue is that he doesn't try to find out why.

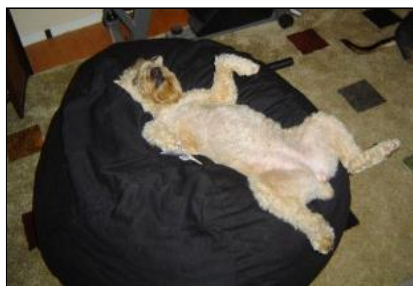
Author Unknown



The Vaccination of Dogs and Puppies (Cont)

If your dog is fat, you aren't getting enough exercise

Unknown



My goal in life is to be as good a person as my dog already thinks I am.

Author Unknown

adenovirus are the infectious vaccines, also referred to as modified live viral (MLV) vaccines.

It must be understood that **only** infectious modified live vaccines will immunise using just one dose.

The VGG also state that all dogs should receive a booster 12 months after completion of the puppy vaccinations. The VGG redefined the **basic immunisation protocol as, the puppy regime plus the first booster.** This 12 month booster will also ensure immunity for dogs who may not have responded adequately to their puppy vaccinations.

The Vaccine Guidelines Group state that **breeders have a special role to play in ensuring the health of all dogs** and that by following their guidelines for puppy vaccination, breeders will be able to ensure that the puppies they raise and sell are properly vaccinated, with the core vaccines, at an age when they are able to develop immunity.

The responsibility of the breeder is then to pass on any veterinary records to the new owner in order to make sure that, if the vaccination programme has not been completed before the pup is sold, the new vet has the information required to complete the programme and the pup will have the protection required.

ANNUAL BOOSTER VACCINATION OF DOGS

Many Veterinary Surgeons routinely remind us that in order to protect our dogs from disease, we need to re-vaccinate each year. We even have an annual National Vaccination Month where pet owners are strongly urged to have their dogs vaccinated or risk exposing them to serious illness or death.

It appears that for a large number of dogs, the yearly

booster is non-negotiable. There are some situations where dogs are required to have an annual booster because participation requires evidence of a current vaccination certificate; a stay in boarding kennels, attending dog training classes, working as Pets as Therapy dogs or visiting grooming parlours. Also, some insurance company policies are void if the dog is not vaccinated annually.

VGG RECOMMENDATIONS ON THE ANNUAL BOOSTER VACCINATION OF DOGS

The guidelines state that core vaccines can give **'up to a lifetime of immunity** when one or preferably two doses are given **in the absence of MDA (maternally derived antibody).'** **'Dogs that have responded to vaccination with MLV core vaccines maintain a solid immunity (immunological memory) for many years in the absence of any repeat vaccination.'** It must be emphasised that **these recommendations only apply to the modified live vaccines (MLV);** they do not apply to vaccination using killed core vaccines, optional vaccines and those containing bacterial antigens. Optional vaccines include Leptospira, bordatella and borrelia (Lyme disease) and require more frequent boosters for reliable protection.

Vets, who follow the recommendations on manufacturers' data sheets, will advise that an adult dog that has not been regularly vaccinated must receive two vaccinations (as for a puppy). However, the VGG state that **'this practise is unjustified and contrary to the fundamental principles of immunological memory. An adult dog that had received a complete course of core vaccines as puppies, followed by the 12 month booster will only require a single dose of core vaccine to boost immunity'.** However, a dog with an unknown

vaccination history should receive two vaccinations to ensure immunity.

The VGG also recommend that following the 12 month booster, **subsequent revaccinations are given at intervals of 3 years or longer, unless special conditions apply.**

The reason for the differences between VGG recommendations and those of many vets is that the VGG base theirs on **current scientific knowledge and thinking,** whereas the manufacturers' data sheets reflect the knowledge available at the time that the vaccine received its original license (which may be more than 20 years earlier). Further confusion is often caused by company reps. advising, as they are legally obliged to do, that vets must follow data sheet recommendations.

Kate Watkins

Refs:

World Small Animal Veterinary Association - Veterinary Guidelines Group 2010

www.wsava.org

The Vet's View by Steve Dean - Dog World November/December 2011

Editor's note: The subject of vaccination and immunology is a vast and often contentious one. We will be re-visiting the subject in future Newsletters.

For further reading view:

http://www.vmd.defra.gov.uk/pdf/Vaccines_authorisedDog.pdf

This is the Department for Environment, Food and Rural Affairs; the Government Department charged with such things as the administration of the Pet Passport Scheme. The link will display the currently authorised vaccines for administration to dogs and the length of immunity they provide, where known – it makes an interesting read!



The Popular Sire Effect

The following article was previously printed in the Kennel Gazette and is reproduced in its entirety, with the kind permission of the Kennel Club.

The popular sire effect, which results from the over use of a particular stud dog and/or his progeny, is thought to produce a reduction in genetic diversity by effectively excluding other males from the gene pool.

It has been estimated, based on pedigree analysis of 10 representative breeds for which the Kennel Club has electronic records dating back to the 1970's, that on average no more than 20 per cent of registered dogs have recorded offspring. The inference being that in the context of pedigree dog breeding there can be widespread loss of genetic diversity over relatively few generations.

This is hardly surprising as many purebred dogs live out their lives as companion dogs with owners who have no interest whatsoever in breeding from their dogs.

It can sometimes be misleading to quote percentages without reference to the underlying values. Take for example a breed with an average 10,000 registrations per year and an active reproductive life, in the case of males, of say ten years.

In such a population one might expect that at any one time there is a potential of 50,000 males. If only five per cent of this population is used for breeding this gives an effective population of at least 2,500 males over a ten-year period.

However, for a breed with only 100 dogs registered per year the maximum size of the breeding population of males becomes 500 and even if 20 per cent of registered males are used the effective population will be limited to about 100 males over a ten-year period.

Taken at face value such calculations might suggest that the popular sire effect is most

likely to occur in the case of numerically smaller breeds.

However, the popular sire effect is not necessarily confined to the numerically smaller breeds. There are likely to be instances of sires which, although not bred with a large number of females, produce sons and/or grandsons for which, even if they are individually used at relatively low frequencies, the cumulative summation of their contribution to the gene pool is to make the original sire a 'founder' who appears in the pedigree of a high proportion of descendants born in later generations.

This phenomenon has the potential to cause a diminution in the variety of available genes within a breed and increase the risk of introducing and disseminating defective genes.

The aim of the show breeder is to breed dogs of outstanding quality and which fit the ideal for the breed in terms of conformation, temperament and characteristics.

In most breeds it is quite rare for there to be more than a handful of top notch males being exhibited at any one time and breeders may well give preference to the dog or dogs which dominate the show ring when choosing sires.

It is nonetheless important to recognise that this approach to breeding can be associated with the rapid introduction and spread of undesirable traits.

Diseases that have been attributed to the popular sire effect include copper toxicosis in Bedlington Terriers, rage syndrome in English Springer Spaniels and histiocytic sarcoma in Bernese Mountain Dogs.

Such effects may not become immediately apparent and it

may take several generations before the tell tale signs of inherited disease emerge.

Governing bodies such as the Kennel Club are aware of the potential impact of the effects of popular sires on genetic diversity and the need to educate breeders to understand and avoid the pitfalls that are associated with the over-use of particular stud dogs and/or their progeny.

Indeed some overseas organisations have looked at restricting the numbers of litters that can be sired by a particular male.

Owners of males should carefully consider the desirability, whenever possible, of ensuring that potential sires are carefully screened for any known genetic defects prior to being used at stud.

The responsible stud dog owner will not permit widespread use of a young male until there has been adequate opportunity to study the offspring that are produced during his initial period at stud.

Once a young sire's performance has been evaluated and the potential for him to pass on genetic defects has been assessed, a decision can then be made as to whether he can be used more extensively at stud.

Semen is easily stored for many years and then used to produce offspring long after the donor dog has died. Such an approach surely commends itself to sensible breeders and is likely to be both more desirable and more effective than placing restrictions on the number of litters that can be registered from any particular sire.



Saving just one dog won't change the world, but it surely will change the world for that one dog.

Richard C. Call



A Warning about the Potential Safety of Vinyl Dog Toys.

Although the following allegations have been robustly defended by the toy manufacturers; who claim that polyvinyl chloride (PVC) is a completely safe product for use in dog toys, there are a growing number of people who query whether this is true.

PVC seems to be the material of choice for the perfect dog toy; often colourful, soft and chewy, they appeal to owner and dog alike.

The first thing you may notice about PVC is the smell that it sometimes gives off, which is often quite acrid and long-lasting.

Over the past few years concerns have been raised about the use of PVC in children's toys. The product contains specific additives and many government agencies, such as, Japan, Fiji, Argentina, Canada, Australia and the European Union, has either banned the use of these products in children's toys or initiated investigations into their use. The action had been taken after studies raised concerns that the plasticizers used to soften vinyl could interfere with the development of very young children.

Testing on animals provided the data for these studies. However, even though the conclusions were based on tests on animals, the protection suggested now for human babies and young children, hasn't extended to the use of PVC in dog toys and other related equipment.

The issue raised by those with concerns about the use of PVC in toys for dogs is that the very nature of dog play i.e. exposure of the PVC material to chewing,

warmth, saliva and the exertion of pressure, may be allowing toxins from the additives to be ingested by the dog.

The constituents of PVC

Chlorine is one of the primary chemical building blocks in PVC. It is a recognised fact that chlorine is capable of producing some of the most dangerous pollutants in certain conditions.

Dioxins are by-products of many industrial processes and one of them is the manufacture of vinyl. Dioxins can cause cancers, reproductive and developmental problems, and immune system damage in animals. They also they spread around the environment and can enter the food chain. Even at the end of its useful life, if incinerated, an object made from PVC, will release dioxins into the environment.

Vinyl also poses a problem in re-cycling as the chlorine it contains cannot be mixed with other plastics.

Although vinyl itself is pretty stable during its lifetime and therefore probably safe for the user, PVC on its own is too hard and brittle, so manufacturers use a number of additives to make it soft, flexible, and absorbent to colourants/fragrances. While vinyl itself may be relatively safe during use, the same may not be said about its additives.

Vinyl may contain a number of additives known to be highly toxic, among them lead, however, those which are the major focus of attention are substances called "phthalates." Phthalates (pronounced with an "f" at the beginning, as in photograph), make vinyl soft and flexible. The phthalates are what give it that familiar "vinyl"

smell. If you have noticed that old vinyl often becomes dry and brittle, it is because the phthalates will leach into anything it comes into contact with, such as, earth, skin, air etc. As the phthalates leach out the flexibility goes.

Not all phthalates are used in vinyl and not all may be dangerous. But six types that are normally found in vinyl have been identified as posing some serious concerns with regard to health. They are:

DINP (di-isononyl phthalate)	DIDP (di-iso-decyl phthalate)
DEHP (diethylhexyl phthalate)	BBP (benzyl butyl phthalate)
DNOP (di-n-octyl phthalate)	DBP (dibutyl phthalate)

All six of these chemicals have been banned in the European Union for use in children's toys and childcare products.

Phthalates can cause measurable toxicity and biochemical changes in the kidneys and liver. They can also cause a lowered sperm count and abnormalities in sperm. There are correlations between exposure to phthalates and other signs of damage to the reproductive systems in babies and children.

Because of the continued use of phthalates in dog toys and because of the ways in which dogs interact with their toys; they may be at particular risk of developing problems associated with these chemicals. For a start, dogs often enjoy a particular toy and will continue to play with it, mouthing and chewing it for as long as it lasts. They may be at increased risk because they also carry on with the chewing and mouthing of toys throughout their lives rather than just for a limited period in their early years, as children do.



Although the leaching of chemicals from toys containing phthalates is a constant process, it is possible that the way the dog plays with the toy adds to the problem as certain factors can speed up the process, such as 'mechanical pressure' i.e. squeezing.

It seems there are sound reasons for questioning whether the toys we give our dogs are safe – all kinds of issues have been raised in the past about the safety of commercial food and treats; now it appears we must consider the manufacturing materials used in toys.

Lynn Carter

Refs:

(Land of Holistic Pets)
<http://tinyurl.com/bq29n53>

<http://tinyurl.com/cdwy13t>
<http://tinyurl.com/cje4ujr>



WHEATEN HEROES

Amber and Niahm's Story

I noticed your appeal for stories about dogs that have done that bit more to help people, and I just thought you might like to include something about Amber and Niahm although they are now "retired".



They were both PAT dogs for Pets As Therapy. Possibly they were one of the few, if not the only, mother and daughter team at the time. We visited a local Residential Care Home for several years before my work commitments meant I couldn't give all the time I really wanted to, so handed over the mantle to another volunteer and their dog who could go more regularly.

However, the time we did visit was some of the most enjoyable and happy times as well as sad and heart breaking ones.

It was always amazing to see the smile come to people's faces when one of the dogs visited them. We had one gentleman who had suffered a stroke and had been unable to

communicate physically or verbally since it happened. After a couple of visits from one of the dogs he first of all tried to reach out to stroke her, then tried to speak for the first time. His family, who were there at the time were in tears, and so was I, because it was the first sign of any improvement they had had.

But it can be sad, when you see old friends passing. I am convinced that one lady, who was always waiting to give treats to the dogs when we arrived, had waited one last time to see Amber before leaving us. She had taken ill 2 days before our visit and wasn't in her usual spot when we got there. The staff took me to see her in her room, but said they hadn't expected her to even be there still, so I knew things were bad.

I put Amber on the bed beside her and she stroked her for about 10 minutes then fell asleep. As we left I knew I wouldn't see her again. She never woke up and she died that night. It can be very hard when that happens, especially when you get to know someone that well over a period of time.

Both girls were great ambassadors for the Charity, appearing in the local and national press on a couple of occasions and at fundraising events. Amber especially became a "face for the Charity".

She was the dog that the recently retired Chief Executive, Maureen Hennis, chose to appear on her official photograph for the Charity for several years. Amber also led out the 25th Anniversary Pets As Therapy parade of PAT Dogs in the main arena at Crufts in 2008, appeared on the video used to promote the Charity's work, and also appeared on stage to promote the Charity with Caesar Milan at the Newcastle Arena in 2010 – not that she thought much of him as she kept turning her back on him even in the photos. See, Wheatens do have taste !!



It has been a pleasure to have shared the Wheaten personality and affection with all the people we visited. We just hope we made a difference to their lives in some way.

Denise Pascoe

For more information about PAT visit: <http://www.petsastherapy.org>

Auction Items



**Ceramic tile of
Wheaten head**



'Jack of All Trades' (Print)



Mobile phone case



**Set of 4 Placemats
Also two cushion covers
in same design**



**'The Arran Fisherman's
Drowned Child' (Print)**



WHI Auction News

On this page are pictures of some of the items we will be auctioning through E-bay to raise funds to help to meet the costs of the seminar.

Watch our website for details of the Auction in June and be ready to make your bids!



**Collector's item
Wheaten Model**



**'The Look' by Darcie Olsen
Print signed on the back by the artist**



WHEATEN HEROES

Tilly's Story

A dog is not "almost human" and I know of no greater insult to the canine race than to describe it as such.

John Holmes

My name is Tilly (Calvenace Tilly Tickletum, I am nearly 5 years old and became a Pets as Therapy dog 4 years ago. My owner, Jenny, has been a Pets as Therapy volunteer for 10 years. She started with her previous Wheaten, Holly, (Stevelyn Wheels on my Heels)



when her Mum was in a Nursing Home and she use to take Holly in to visit. She could see how the patients benefitted from receiving a visit from a Pets as Therapy dog.

I live with Lottie, an Airedale, who has been a P.A.T. dog for about 8 years. We are P.A.T. dogs for the Balcerne Gardens Trust, which is an organisation in Colchester, who has a Nursing Home, Sheltered accommodation and a residential home, so you can imagine we are kept very busy.



The girls on duty in their special jackets. Ed's note – just look at that wonderful Airedale smile!

We both love our visits, we get lots of strokes but mainly we

love the treats that are kept in the Secretary's office, second drawer down!

Lottie actually taps on the drawer but I am more ladylike and wait for the treats very patiently!!!!

Last year Jenny had a call from the Brain Injury Unit in Colchester and they asked if we would visit. It is a small secure unit of 17 patients and the patients really took to us, one patient had not spoken very much but remembered our names the next time we visited, so we must have made a great impression.

I love sitting on the patients feet and getting stroked, it really is good therapy for both of us and it keeps their feet nice and warm! Jenny is an Assessor for Pets as Therapy and many of the dogs she has assessed are now visiting hospitals, hospices and residential homes and making such a difference to people's lives.

We often accompany Jenny when she gives one of her talks on Pets as Therapy, Lottie the Airedale usually goes to sleep and yawns but I just sit and listen and look angelic! I would recommend Pets as Therapy if you like meeting people, and like getting stroked – you will give so much pleasure to so many people.

One of the new innovations Pets as Therapy are involved in is Read2dogs; some children are not confident reading out loud in classrooms and taking a dog into schools and getting the children to read to a dog has worked very well.

One of the ladies Jenny assessed recently is about to introduce this scheme into her school and Jenny may take me along as I would love listening to the children telling me a story.

Apart from Pets as Therapy, we do Obedience and have both gained our Kennel Club Gold Good Citizens Award.

I do agility and got two clear rounds last year in an Agility competition but my main problem is I jump too high which slows me down and I would love to know if any other Wheatens have this problem?



When I am jumping I am like a flying missile and make lots of people laugh!

As told by Tilly to her owner, Jenny Goff

If dogs could talk, it would take a lot of the fun out of owning one.

Andy Rooney

If you get to thinking you're a person of some influence, try ordering somebody else's dog around.

Will Rogers



Editor's note: The article which follows was sent to us by a breeder, Linda Salisbury, who has written a frank and detailed account of her experiences.

An introduction to her story is given here by her veterinary cardiologist.

Sharing information is never easy and the greatest barrier is often the reaction of those who would not have the courage to do so themselves.

We applaud the honesty she has demonstrated in her decision to share her story and she should receive praise and respect for doing so.

Ever wonder where you'd end up if you took your dog for a walk and never once pulled back on the leash?

Robert Brault,
www.robertbrault.com

Breeding For Health

Forward by Vicky Ironside, MA, VetMB, CVC, MRCVS,

I had the great pleasure of meeting Linda and her lovely Wheaten Terriers a few years ago and have to admire her for her dedication to keeping and breeding from healthy dogs.

I would like to add some words to her very honest account of her experiences of having heart murmurs investigated in some of her dogs.

Firstly I would like to stress that I did not find any worrying cardiac disease present in the Wheaten Terriers. Yes, some of the findings were outside what is generally considered normal, but only just. There is inevitably a grey area between 'normal' dogs and those who have very mild congenital heart disease.

When completing a heart test certificate, dogs with results falling into the grey area, will usually be marked as equivocal. Lillie and Orla both certainly fall into that category for sub aortic stenosis (SAS).

The term heart murmur often conjures up visions of disastrous cardiac disease, but this is certainly not always the situation. The heart sounds normally heard with a stethoscope (lub-dup, lub-dup etc) are created by the sound of blood hitting closed valves. The blood usually flows around the heart smoothly but anything leading to turbulence in the flow may be heard as a murmur (a whooshing sound around the normal heart sounds).

Sometimes turbulence is created by perfectly innocent changes in the heart. For example, when a dog is consistently athletic, the heart

can become larger and this might lead to a small valve leak, heard as a murmur.

All dog breeds have obvious external differences in their anatomy, but their internal organs are sometimes also subtly different. Boxers are a good example of a breed which is thought by many cardiologists to have hearts of a different shape, so that in perfectly normal dogs, there is often a murmur heard as the blood flows through their normal aorta. In other words the blood flow is a little turbulent without it being associated with SAS (the congenital condition, where the aorta is abnormally narrow and there are often abnormalities in the aorta valve).

However Boxers are predisposed to SAS so this makes their grey area a very tricky one to interpret.

For these reasons veterinary cardiologists prefer to have a set of normal values to use in echocardiographic examinations for every breed!

This is a rather high expectation and has only been obtained for the very popular breeds or those who sadly, have severe congenital cardiac disease associated with the breed.

Unfortunately, listening to a heart with a stethoscope alone, cannot give us the definite cause of a murmur. Echocardiography is the only readily accessible diagnostic tool that veterinary cardiologists have available to allow them to give a more definitive diagnosis of the cause of a heart murmur.

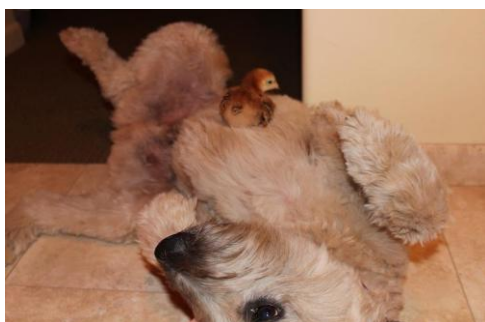
We all know that when a massive gene pool is not available for breeding, there are more chances that specific mutated genes will spread within a dog breed rapidly, and some of these genes may contribute to the expression of diseases. If the spread of a congenital cardiac disease can be detected before it becomes too widely spread then it is likely to be much easier to eliminate from the breed.

Heart murmurs heard in Wheaten Terriers may well currently turn out to have many different causes which are generally innocent or associated with the usual spectrum of congenital diseases found in any group of dogs.

If a cardiac disease was emerging as a problem within any breed then it is only likely to be detected if owners of dogs with murmurs follow up with echocardiography and then the information is chelated efficiently by the cardiologists involved.

I would strongly encourage this to happen in all breeds but also feel that it is important not to panic any owners with dogs who have murmurs. Equally I totally appreciate that the cost of echocardiographic examination makes it a harder decision to have this test performed on a dog with no symptoms, but hope that Linda's enthusiasm will encourage more owners to take that step.

Vicky Ironside, MA, VetMB,
CVC, MRCVS,
Veterinary Cardiologist



Breeding For Health – A Breeder's Story

Visiting the vet can be a traumatic experience, even with healthy dogs, once the bill is handed over! That was the only surprise I was expecting when the dogs went along for their annual health check and vaccination top up in early November 2009.

Many of us will have been through that awful experience of going along to the vet with our beloved pet knowing they are not well and wondering what the prognosis will be. You only have to look at the vet's face to know the news is not going to be good. However, I was not taking in a dog which was ill in any way, so why was my vet looking concerned and taking longer than usual with the routine examination of my fit and healthy young bitch only 17 months old?

Finally, the vet announced, "I can hear a heart murmur".

We knew nothing about heart murmurs so, to us, it seemed at that time that anything wrong with the heart had to be bad, didn't it?

The dog in question, Lillee, was born at our home at 2.21am on June 18th 2008. Her mother was my lovely Orla, my first Wheaten. It was a first litter for her and for me. She wore the pink ribbon as the first female born, hence her kennel name, Lillee the Pink.

She had all her health checks and passed with flying colours before going off to live near Blackpool at 8 weeks old. Sadly, due to family circumstances she returned to us on her first birthday, initially a temporary arrangement but three and a half years later she is still here and she is going nowhere!!

The vet didn't realise at first, that we felt as if a bombshell had been dropped on us. We talked about hereditary problems and congenital defects, not really

understanding the implications but fearing that future breeding was probably not an option for Orla or her offspring without further investigation. All my future plans seemed to have been blown out of the water in one fell swoop.

The vet organised a visit to a veterinary cardiologist with our dogs. Although based some distance away clinics were held at a local vet's every few weeks, for referred cases such as ours. This would be an initial examination to decide what further action, if any, needed to be taken.

We went to the clinic feeling apprehensive for Lillee but otherwise confident as all our dogs were young, fit, healthy and very active and had *never given any cause for concern*.

The specialist reported that Lillee needed a scan to determine the condition of her heart, which came as no surprise, however, her examination of Orla, her mother, revealed she also had a heart murmur and needed a scan to determine the condition of her heart.

At this point I thought my heart also had a problem, this was the last thing I expected to hear. Orla was 3 1/2 years old and nothing had been detected before during routine examinations.

The vet went on to examine the third dog we had taken, Yogi, who was Orla's son. He recommended that he should also have a scan.

By now my heart was in a million pieces and I still had one dog left to be checked; this was Yoyo another daughter but although he was unsure about what he could hear he suggested that if we were not planning on breeding with her, it probably wasn't necessary to have her scanned at that time. It is difficult to put into words

how I felt. I needed answers but I wasn't sure I wanted to know what they were. The implications and repercussions could be far reaching and might not just affect me and my dogs.

It was with some fear and trepidation that we went along to the veterinary cardiologist's clinic for the heart scans in Sheffield.

Apart from a little shaving nothing invasive was necessary. Echocardiography was performed and mild sub aortic stenosis (SAS) was identified in Lillee. A grade 2/6 cardiac murmur was heard. There were no other significant findings.

So what did this mean for Lillee's future? The good news was that the prognosis should be favourable and there was no need to treat her any differently with respect to lifestyle and feeding. She needs no medication.

SAS is considered to be a *congenital condition, although the stenosis can develop over the first year of life. The cardiologist thought that although there may be 'coding' for the condition in Lillee's genes, it could be exclusive to her and *not necessarily inherited* from her parents. However, as a precaution, it was advisable not to breed from her, so that if she was carrying any potentially faulty genes, they could not be passed on to her progeny.

Lillee lives a normal, active, typically manic, Wheaten life. No one watching her charge about chasing balls with our other dogs, would suspect anything other than that she is a 100% healthy dog. She will be 5 in June 2013.

We took the vets' advice and had her spayed. It was a very sad day for us; I know we all think our dogs are the best but to us she is perfect and it was our dream to have a litter from



In order to really enjoy a dog, one doesn't merely try to train him to be semi human. The point of it is to open oneself to the possibility of becoming partly a dog.

Edward Hoagland



Breeding For Health – A Breeder's Story (Cont)

her. Her character and temperament are superb; we just wanted to have a son or daughter from her to continue her line.

Once we knew the outcome for Lillee it was Orla and Yogi's turn for a trip to Sheffield.

The report for Orla (Lillee's mum) was similar to Lillee's. Her initial examination had produced a 3/6 grade ejection type cardiac murmur but the echocardiography showed the SAS to be only borderline. All other comments were the same, so she was spayed too. Just like her daughter Lillee, she has a very active life and needs no medication. Orla celebrated her 7th birthday in February this year.

As for Yogi, I am happy to say he was given a clean bill of health and we were given the vet's blessing to go ahead and breed with him if we so wished. The unexplained noise heard at his first consultation with the cardiologist was found to be made by nothing more than blood whooshing past a band of connective tissue within one of the chambers of his heart.

Yoyo is the most active, energetic, fun loving, and craziest of all our Wheatens, we call her our party girl and with no plans to breed from her at this point, we decided not to investigate further.

I still didn't know much about heart murmurs and the implications, but I was pleased that all the dogs were insured; although claiming for Lillee's treatment wasn't without a fight as Lillee was living with us but her previous owner still paid her insurance premiums. Perhaps this could make a good subject for future newsletters? - "Insurance Companies and their Get Out Clauses!" I now know a lot about insurance!

Now that I had no immediate

concerns about the welfare of my dogs, the biggest problem was what I should do next. I was uncertain about telling the owners of Lillee's brothers and sister and possibly worry them unnecessarily. None of the owners had reported that their vets had found a problem and I knew that the three males had already been castrated without any issues arising from anaesthesia during the procedure and recovery. However, when the owners of the remaining female decided to have her spayed, I decided to inform them. I knew that the vet would then be extra vigilant and specifically listen for a murmur just to be on the safe side. We needn't have worried; he said she was probably healthier and fitter than any of us!

I also had to talk to the breeder of my first Wheaten, Orla as he needed to know; how was he to make important decisions about future litters if he wasn't fully aware of all the available health information associated with his lines? I should not have worried about having this conversation; he was great; stressing that I should never feel alone with a problem no matter what. The good news was that neither of Orla's parents had been diagnosed with heart murmurs.

Then came the next dilemma; I had already informed all those who needed to know – did I need to do anymore? I did not want my dogs and those of Orla's breeder to be labelled unfairly as the unhealthy ones. If I didn't intend breeding from dogs with heart murmurs and I hadn't heard of any other Wheatens with heart murmurs, was there any need to tell anyone else?

But some time later in general conversation I learnt of a couple of other Wheatens which had heart murmurs and as time

went on I heard of more; it seemed I wasn't alone after all! It was good to be able to open up and talk to other owners, although I found no one seemed to understand the condition any better than I did. To the best of my knowledge, none of these other Wheatens had been seen by a veterinary cardiologist.

It left me wondering how many Wheatens there actually are with heart murmurs and whether any of them are being bred from. I wonder whether any of them have produced progeny with murmurs.

About 2 years after Lillee's murmur was found, I received a phone call from the owner of one of her brothers. He had just been diagnosed with a heart murmur and at this time he was nearly 3 ½ years old, (about the same age as his mum, Orla, when she was diagnosed). Had this dog been bred from, he could have already produced offspring (at the same age his brother, Yogi, had sired 15 children from two matings). Currently the murmur does not affect him at all and his owners and their vet have decided not to investigate further unless something changes. At his most recent check up the vet had difficulty detecting the murmur.

There is good news too, as I eventually decided to have Yoyo tested by the cardiologist who gave her a clean bill of health. I was able to be with her and watch the whole procedure, which was a very interesting experience, although very complex. Everything was explained to me, as I watched blood flowing around the chambers of Yoyo's heart. I did learn that some of the noises could be explained as leakage, the images on the scan showing a back flow of blood between the chambers through the valves, but this is a



If dogs could talk, perhaps we would find it as hard to get along with them as we do with people.

Karel Čapek



Breeding For Health – A Breeder’s Story (Cont)

very common phenomenon and nothing to worry about.

So now we know that Orla, one of her sons and a daughter all have murmurs that had not been diagnosed until they were adults. I have no answers, just questions. I wonder whether these murmurs are inherited and if so, whether the number would rise with each generation; this is something we can only speculate about. The dogs I have written about are neutered and consequently can never be bred from, so they will not provide the answers. I have wondered whether I should have risked a litter from Lillee and monitored her progeny closely throughout their lives, to possibly provide some answers. However, that would only be possible with the full cooperation of all the

owners. Sadly not all owners are willing to keep in touch and even those who would, may not be prepared to take on a puppy in this type of situation.

So, in conclusion, breeding for health sometimes means some very hard decisions have to be made. It isn't easy but it is worth every one of those decisions to try to ensure the future health of our wonderful breed.

Linda Salisbury

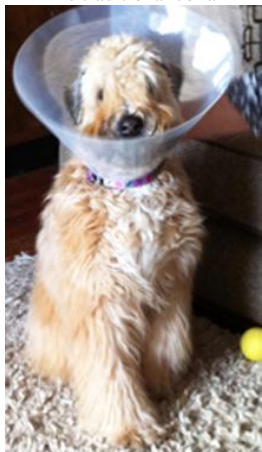
***Congenital:**

Of or relating to a condition that is present at birth, as a result of either heredity or environmental influences.

<http://tinyurl.com/blp8sdd>



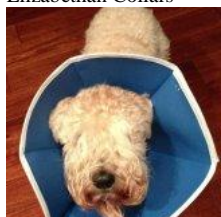
The traditional collar



The inflatable collar



Different types of soft Elizabethan Collars



ELIZABETHAN COLLARS

Elizabethan or Buster Collars

When Buddy had to wear a stiff plastic Buster collar to stop him nibbling his poorly paw a few weeks ago it was debatable which of us hated it the most. The accompanying trauma that went with it was concerning for me, the crying, the pantomime of him trying to pull it off, and the worry about his additional discomfort when he walked into things that jarred his neck, so I did a little Internet research and asked some friends if they had any better ideas.

Soft cones are available and there seem to be several types starting at around £5 up to £20, the way they fasten on varies, usually between poppers, ties or Velcro strips. Some have removable stiffeners so you can fold them back to enable eating and drinking. These are reported to be much more comfortable for the dog to lie down and sleep in and most people prefer them, although some dogs are reported to be intolerant even of these types

of collar. A drawback is that if the wound is on the front paws it may be possible for the dog to manage to fold them under its chin to gain access and lick!

Inflatable collars at around £10 - £12 received good reviews with most owners feeling these were the best as they are felt to be more comfortable and easier for the dog to wear. The dogs are said to adjust to them really quickly too unlike the cones. Again, I received reports of some dogs being able to reach around them so I guess it depends on the dog's tenacity in attempting to get to his wound as well as his acrobatic ability.

Wrapping has been recommended for wounds on the body, after spaying for example. Stitches can tighten as time progresses so the desire to remove them can become stronger and use of a wrap that prevents access can be more comfortable as a preventative method. Someone told me they use a child size tee shirt and another person showed me

something that was like an upside down dog coat. The coat was made to fasten in front of the chest and over the back, rather than underneath, so that the wound on the chest/abdomen area was inaccessible. These can be easily cut from soft fabric like polar fleece and fit very snugly.

On the whole, everybody hated the Buster Collars and felt that the soft collars were to be recommended over the plastic cones, but it is vital that the correct size is used so that the dog cannot reach any parts of its body. i.e. the cone should reach to the dog's nose. With the plastic ones, dogs can also see through the plastic and they tend to bump into things, not realising the cone is in the way, - with the soft cone, it is solid so this does not happen.

As with many things, it appears that this comes down to personal choice and that you could spend a fortune trying to find the correct method to suit your dog!

Jan Thackray



WHEATEN HEROES

Saidhbh and Abban's Story

ISCWT Saidhbh (Helene D'Or 06.09.2001) and Abban (Parkalissene Abban 13.02.2006) are both Irish Therapy Dogs with me as their handler since September 2012.

Saidhbh was shown in the UK in 2005 at the SCWT Club of GB 50th Anniversary Show and has 1 Reserve Green Star. Abban has been shown regularly since 2006 with 5 Reserve Green Stars to his name.

Irish Therapy Dogs was set up in 2008. It is fairly similar to PAT Dogs in the UK and relies totally on fundraising and donations. Volunteers wear a uniform, as do the dogs, pay a contribution to cover insurance and undertake to volunteer for at least 1 year, which involves visiting their designated location for an hour once a week, unless they are ill or on holiday.

Dogs large and small, purebred or cross bred, are very carefully tested and selected to insure their suitability for visiting hospitals, nursing homes, schools and work places or residential units for the disabled and those with special needs. Saidhbh and Abban were tested at a day care centre for Alzheimer sufferers; both passed with flying colours and are the first ISCWT to join the Irish Therapy Dog contingent.

As luck would have it, there was an urgent request for a visiting dog from the local District Hospital, in essence a geriatric unit, which I live next door to, so we only have to walk out one gate and in next door when the weather is dry. Our visits are flexible and can be any week day morning at the same time, which is ideal for me, since I am self-employed.

Both Saidhbh and Abban really enjoy visiting the elderly patients who have a range of ailments and varying degrees of mobility. From experience, I know how ideal Wheatens are for interaction with older people and those suffering from

dementia.

Irish Therapy Dogs provided the Matron with plenty of literature about the organization and the thinking behind the provision of dogs for patients. She was encouraged to communicate this to all the staff and to have the literature available for them to consult. They were not unused to dogs in any case, as some years previously they had taken over a retired guide dog for the blind that was on the premises daily until he went to his just reward.



Saidhbh and Abban visit on alternate weeks. The dogs are lively and enthusiastic as soon as they see me wearing my uniform and taking out their special collar, lead and coat.

On our first visit we were shown round the wards and day room where the patients are located. A certain number will be in hospital for respite care, while others are on a more permanent basis.

I always ask each patient if they like dogs and do not press anybody to stroke the dog or interact with it, if they are not a dog lover. Some people are keen to do so one week and not the next, depending on how they are feeling.

Those who can speak are always delighted to tell me about dogs they have owned in the past. They ask the dog's name, about the breed and other questions.

Common questions include how they can see through the fall, their age, whether they have had

pups, and how many dogs I have. Some people will have heard of the Wheatens before, but not know that it was originally a badger hunter.

At this stage, some now remember me and the 2 dogs, plus their names.

Quite a number of people are invalidated, so a smaller dog which can be lifted or supported standing on its hind legs is an advantage. Then the head, legs or chest can be stroked resting on an arm rest or at the edge of

patients clearly brighten up and are pleased to see them arriving. The staff members give us a big welcome too.

Word has now gone round amongst visitors and relatives as well, as the dogs are greeted by them and have already been spoken about. It is extremely rewarding to be able to bring a welcome change to the routine of these elderly patients.

Bernadette Moynihan
Parkalissene
ISCWT

<http://www.irishscwt.net>

Editor's note: It is lovely to be able to feature Wheatens from other countries in our Newsletter; especially in this context. Thanks to Bernadette for contributing (and watch out in the next edition for news of a Wheaten Hero from an even greater distance!)



Yes it really is a Wheaten!
Mud is good for the skin,
they say!!

a bed, even if the patient only has very restricted movement.

Often those who cannot speak or are only barely audible and the otherwise disabled get such obvious pleasure by just running their fingers through the long soft coat, rubbing the muzzle, the top of the head or another part of the body they can reach. Saidhbh and Abban are very well-behaved at all times, and never react adversely. However, they do not forget their terrier nature, as they are always alert, watching what is going on and looking out the large windows and door in the day room.

They sit beside patients on command where this is suitable. They have both realized that the odd biscuit crumb may be lurking around on the floor under a table after morning tea or coffee. Abban is fascinated by the fish tank, never having seen one before, and was initially trying to get closer to the fish.

The dogs give off such a friendly and bright aura that the



Web Resources for the Soft-Coated Wheaten Terrier Owner

Sources for Wheaten Information
exchange on the Internet
Compiled by Jan Thackray

*A man may smile and
bid you hail
Yet wish you to the devil;
But when a good dog
wags his tail,
You know he's on the
level.*

Author Unknown

We Need Your Help!

We really want our raffle at the seminar to be something special.

NOW is the perfect time for you to look out those unwanted gifts that are cluttering up your drawers and cupboards and help us to raise funds.

Club Websites:

<http://www.wheaten.org.uk>

The SCWT Club of GB has recently revamped its website. It gives information on health and well-being, grooming etc. and is a good place to start when looking for advice on obtaining a Wheaten puppy. You can also find out about events being organised by the Club throughout the year.

<http://www.scwtca.org>

The SCWT Club of America has a really good website to browse for information about anything Wheaten, especially as you can access their magazine, 'Benchmarks'; the March edition is on there now.

Organisations devoted to the SCWT:

<http://wheatenhealthinitiative.com>

If you are receiving this Newsletter regularly you will already be aware of our Website that is dedicated to giving information about the health of SCWTs. It also has a comprehensive section on the history of the Breed. An archive of past Newsletters is also available. The site has recently been reformatted to allow for better compatibility with smart phones and touch screens.

Facebook Groups:

There are many groups on Facebook, here are three popular ones:

Wheaten Health Matters

(Open Group) For Wheaten enthusiasts who are interested in where they can obtain health information and help others who may have a health question or problem. It can also be used to discuss the many facets of the breed and its ancestry.

Soft Coated Wheaten Terrier Owners

(Open Group) A social group where Wheaten owners can post photographs and stories about their Wheaten; it has worldwide membership.

ISCWT Art and Collections

(Open Group) Fascinating group with interesting photographs and descriptions of Wheaten collectables.

Yahoo Groups

These are less popular than they used to be with the advent of Facebook but there are still several active sites.

Wheatenagility

This is an active site founded in 2009 and currently has 75 members. As the name implies, it is for those with an interest in agility.

SCWTUK

Founded in September 2003 and remains an active site with friendly exchange of information. Members chat about health, show wins, pedigrees etc. Advice and guidance is also available on all aspects of the SCWT.

SCWTbeeder

Founded in the USA in 1999 this is a forum for discussing all aspects of health and breeding SCWTs. To qualify for membership you must be a past or present breeder or a SCWT owner who plans to breed in the near future.

Wheatenlink

Forum for friends and members of the Soft Coated Wheaten Terrier Club of GB. It was created in January 2000 and was very well used then but activity has been low for the last 3 years. Archive of previous posting available

This is just a brief resume of some of the more popular sources of information and a Google search will throw up many other interesting websites. If you know of a good website please tell us about it so that we can feature it in our next Newsletter.

*Fox-terriers are born
with about four times as
much original sin in them
as other dogs.*

*Jerome K. Jerome, Three
Men in a Boat*



Seamus and 'Big Ted'



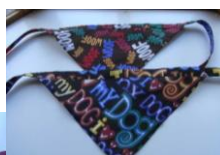
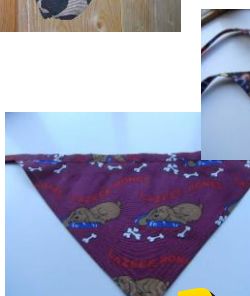
Treat Yourself and your Dog and Help Wheatens at the Same Time

It isn't our normal practice to advertise items for sale in the pages of the Newsletter but there is always an exception to the rule, in a good cause. Linda Salisbury has been heavily involved in the event "Dogs Unleashed" held each year in Derbyshire in June. Linda works extremely hard at these events and has given money raised through her efforts to both WHI and the SCWT Club of GB. Linda has now branched out into a new 'initiative'! producing bandanas and other dog-related accessories to raise money for WHI and for the SCWT Club's Rescue and Health funds. Please have a look at what is on offer and treat yourself, your dogs and Wheatens in general!

Tidies to store your plastic carrier bags



Grooming Pouches for your equipment



Bandanas

Bandanas can be tied around the neck or threaded through the collar



Bandanas

Extra Small	£3
Small	£3.50
Medium	£4.50 (Wheaten size)
Large	£5

Bag Tidies £5

Grooming Pouches £15

To Order and for P&P details please email:
lindaphilsalisbury@btinternet.com



Update on the Work of the AHT

Seasonal Canine Illness (SCI)



We have reported in the Newsletter before about outbreaks of a mystery illness affecting dogs walked on wooded areas in certain parts of the country and being investigated by the Animal Health Trust.

'Seasonal Canine Illness' (SCI) is the term which has been applied and until recently, there was much confusion about the illness and how it was transmitted.

Those who watched the report one Sunday evening on the television programme, 'Countryfile' will know that there have been areas of considerable progress.

However, there is still much to learn about the spread and treatment of the disease, which

is associated with the clinical signs of vomiting, lethargy and diarrhea. Is often noticed in the autumn months and has been responsible for some fatalities in affected dogs.

Focusing on two sites in Norfolk, two in Nottinghamshire and another in Suffolk, the AHT has continued to collect data from dog owners that have visited the selected sites.

In September 2011, when there were further reported cases, the AHT visited one of the sites with a scientist from the Natural History Museum to review the conditions at the place and time that SCI cases were occurring.

This provided evidence that SCI was unlikely to be caused by

exposure to toxins from exotic plants, blue-green algae, bracken spores or mushrooms, all of which had previously been suggested as potential causes of the disease.

Further investigation has suggested a possible link between SCI and harvest mites; the larval stages of an insect found in woodland areas. These may be responsible, transmitting the illness when they bite dogs and other animals at this time of year.

The AHT is continuing the investigation into this and other theories, working with a range of scientists and vets, as well as experts in other related fields.

A definitive answer has yet to be found but the AHT believe that the search area is narrowing.

The Kennel Club Genetics Centre at the A H T

The Genetics centre was opened in 2009 with the intention of helping dog breeders to reduce or eradicate genetic illnesses from their breeds. Since that time five different genetic mutations, associated with diseases in 20 different breeds of dog have been identified.

DNA tests have been developed to identify whether a dog is clear of the mutation or a

carrier of it and this is established through the use of a simple cheek swab.

This translates to more than 14,000 dogs from the UK and the rest of the world, which have been identified as carriers of hereditary diseases.

The exciting development of Estimated Breeding Values (EBV's) means that whole dog

breed populations can be assessed and evaluated for risk of inherited disease.

The Mate Select service developed together with the AHT and now offered by the Kennel Club through its website, is one of the first of a number of tools in development, to enable breeders to breed the healthiest puppies they can.



The Kennel Club Cancer Centre at the A H T

There was news from the AHT that the first canine patients to receive radiotherapy in the new Cancer Centre had begun their treatment. Lucy the Labrador, Rupert the Pug and Ruby; a Springer Spaniel, were all

receiving treatment at the Centre which was officially opened by HRH The Princess Royal, in November last year.

The new Centre means that radiotherapy, surgery and

chemotherapy are all now part of the treatment options for patients.

Lynn Carter

Ref: Animal Health Trust Annual Review 2011

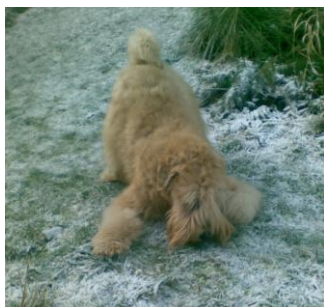


Wheaten Genome and Life Study (NIH)

If you took part in this study and thought that by now you should have received the first of the annual questionnaires which you agreed to complete, don't panic!

It is just over a year since the NIH Study began and Helen J Moreland, SCWTCA Coordinator, informs WHI that Dr Heidi Parker is just 'ironing out the kinks' before emailing participants to tell them that the annual questionnaire is available.

If you have changed your email address since the study began, please inform the NIH Team as soon as possible: email: dog_genome@mail.nih.gov



Cat's motto: No matter what you've done wrong, always try to make it look like the dog did it.

Anon

Update on NIH Study

Dr. Heidi Parker

With the completion of enrolment in the Lifetime study at the end of 2011, we now have a clear picture of our participating population. There are a total of 238 dogs enrolled and the following is a brief summary of the group based on the introductory survey:

The lifetime study participant group is 65% female and 35% male with an average age of 4½ yrs this month. The group comprises two primary generations of SCWTs with peaks of enrollment for dogs that are currently either 2 yrs of age or 5½ yrs of age. The average age of males and female are essentially the same (4.2 and 4.5, respectively).

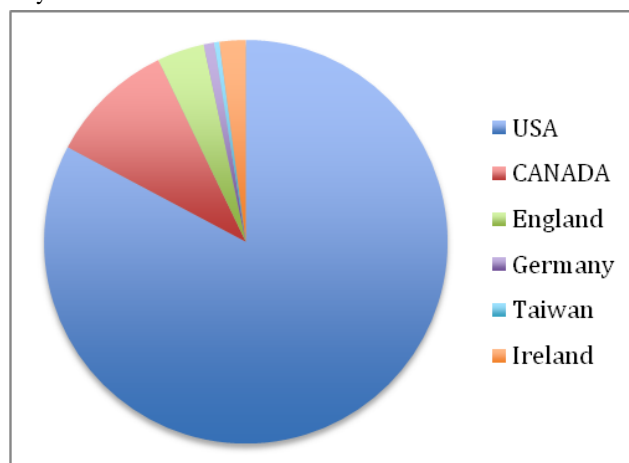
On average, owners acquired their puppies at 10 wks of age. Approximately 52% were purchased while 37% were born in their current homes. Approximately half of the males and 1/3 of the females in the study have been spayed or neutered.

Just over half of the

participants' owners have indicated an intent to include their dog in a breeding program and nearly one quarter have already produced at least one litter. 82% of the dogs come from the United States and represent between 2 and 3% of the SCWT population registered by the American Kennel Club.

The vast majority of the participants (80%) are currently in excellent health and 90% see a veterinarian at least once a year. The most common ailments reported to date are kennel cough (12%) and allergies (14%).

We are now reaching the end of 2012 and it is time for the first annual health survey of the SCWT lifetime study.



The survey should be available online in the coming month. Watch for notices in your mailboxes with instructions for accessing and completing the survey. Information is the foundation of any good research project and with your help we will all learn more about the health of this amazing breed.

Dr. Heidi Parker is a Research Fellow in the Cancer Genetics Branch at the National Human Genome Research Institute of NIH. Dr. Parker received her Ph.D. from the University of Washington and Fred Hutchinson Cancer Research Center where she studied the population to structure of the domestic dog.

She continues her work on canine genetics at the National Institutes of Health by applying information gained from population studies to the mapping and identification of genes involved in complex traits and diseases. Dr. Parker is currently leading projects aimed at identifying genetic variants associated with cancer susceptibility, auto-immune disorders, and limb morphology, as she continues to study breed structure, development, and history through genetics.



.....And Finally

Key Contact Details UK Key Researcher - Vet referral only:

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If Dr Allenspach is not available, and you would like to discuss the possibility of a Post Mortem, please contact:

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FRCPath, MRCVS (or a member of his Team)
Professor of Companion Animal Pathology, Royal Veterinary College
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Fax: 01707 661464
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Please Note: If you are a fully paid up member of the Soft-Coated Wheaten Terrier Club of GB, then application can be made for help towards the cost of a Post Mortem

Completing the pANCA Longitudinal Study June 2007 – March 2013!

I can't believe the pANCA Research Project has been ongoing since 2007 and here we are; finally at the end of the Project in 2013..... 6 years later! It has been a labour of love for all who have taken part, especially those involved with the longitudinal study; new friends have been made and professional expertise and knowledge of our breed's hereditary diseases has been gained.

Dr Allenspach and the RVC pANCA Project Team now feel they will have enough data to complete the study and once all the data is analysed, there will be a final report of the findings.

WHI will inform everyone once the report is available. However, there is still one final thing you can do to help Dr Allenspach; she would like to know of the death of any Wheaten which had taken part in the longitudinal study.

Importantly; she would also like to hear from you, if your Wheaten is suspected or diagnosed with PLE or PLN.

If your dog should die, please consider a Post Mortem. Contact Dr Allenspach or one of the appropriate specialists at the RVC for information and advice as it can provide important data for the research.

Contact information is on: <http://tinyurl.com/c9wh5az>

this is the Post Mortem page of the Wheaten Health Initiative web site.

If you would like to read about the Project visit the WHI Web site link:

<http://www.wheatenhealthinitiative.com/Pages/pancahistory.html>

Finally, Dr Allenspach and her Team at the RVC and Wheaten Health Initiative and the SCWT Club of GB, would like to say a BIG 'Thank you' to all the owners and their Wheatens who have supported the project.

Thank you
San Jeffries
pANCA Project Co-ordinator

Click on the photo to start the on-line Questionnaire



A cat, after being scolded, goes about its business. A dog slinks off into a corner and pretends to be doing a serious self-reappraisal.

Robert Brault,
www.robertbrault.com

For all those who have visited the WHI website and complete their 6-monthly update forms, the picture above will have been an all too familiar sight.

participate right up to her death at 15 years 9 months, on the 27th October 2012, missing only the final update in March this year.

You may not know, however, that the Wheatie in the picture is Jasmine, (Chloeanco Winter Jasmine). Jasmine was one of the first cohort of Wheatens to be tested as part of the pANCA Research Project in June 2007 and she was 10 years old at the time. Jasmine continued to

We know that the contribution of Jasmine and all those other Wheatens over the years has helped in some way to a brighter future for the Breed.

Thank you to each and every one of those wonderful dogs.

Labradors are lousy watchdogs. They usually bark when there is a stranger about, but it is an expression of unmitigated joy at the chance to meet somebody new, not a warning.

Norman Strung



Wheaten Health Initiative

“To provide a platform for the reception and transmission of information about the health and well-being of the Soft-Coated Wheaten Terrier”

Some days you're the dog; some days you're the hydrant.

Unknown

Well, that's another edition finished – time for a lie down!



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Smart phone users - here is the WHI QR code to access our site directly from your phone:

