



THEPOODLESCENE

WINTER EDITION—JANUARY 2006

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Poodle Club of Canada

Quarterly Newsletter

Newsletter Editor: Alysia Reichertz

Next Edition: May 2006

Special Submission Deadline: April 15, 2006

Send to: Alysia Reichertz
7084 Sixth Line
Belwood, ON
N0B 1J0
Phone: 1-519-843-7728
Fax: 1-519-843-7729
E-mail: joanne.reichertz@sympatico.ca

Advertising:

Full Page: \$10.00

1/2 Page: \$ 5.00

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PCC EXECUTIVE

President Dr. Joanne Reichertz
First VP Donna Crispi
Second VP David Pateman
Treasurer Peter Welsh
Secretary Carolyn Savage
(519) 855-4903
46 Main St
Hillsburgh, ON, N0B 1J0
Directors Denise York - BC
Tanis Waldo -AB
Kay Murphy -ON
Denise York -BC

Website www.poodleclubcanada.com

Up Coming Events

All About Pets

Sponsored by Royal Canin

To help or for more information

Please call or email Anne Bell

519-848-3663

sanvar@sympatico.ca

PCC Puppy Match

May 17, 2006

Please call or email Donna Crispi

905-642-5002

donnacrispi@sympatico.ca

Comedy Corner

Do you think this would work for Northern Poodle Owners???

Subject: cheap southern wireless security

How to install an affordable, wireless security system:

Go to a secondhand store, buy a pair of men's used work boots, a really big pair. Put them outside your front door on top of a copy of Guns and Ammo magazine.

Put a dog dish beside it. A really big dish.

Leave a note on your front door that says something like....

"Bubba, big Mike and I have gone to get more ammunition, back in 1/2 an hour. Don't disturb the Pitbulls, they've just been wormed!"

How to give a cat a pill

1. Pick cat up and cradle it in the crook of your left arm as though holding a baby. Position right forefinger and thumb on either side of cat's mouth, and gently apply pressure to his cheeks. When cat opens mouth, pop pill into mouth.

2. Retrieve pill from floor and cat from behind sofa. Repeat the process.

3. Retrieve cat from bedroom and throwaway soggy pill.

4. Get second pill, cradle cat in left arm holding rear paws tightly with left hand. Force jaws open and push pill to back of throat with forefinger. Hold mouth shut for a count of 10, if you are able. Hold cat's mouth closed as well.

5. Retrieve pill from gold-fish bowl and cat from top of wardrobe. Call for help.

6. Kneel on floor with cat wedged firmly between knees, immobilizing front and rear paws. Ask assistant to hold cat's head firmly with one hand while forcing wooden ruler into cat's throat. Flick pill down ruler with forefinger, and rub cat's throat vigorously.

7. Retrieve cat from living-room curtain valance.

8. Carefully sweep shattered figurines from hearth and set aside for later gluing. Get third pill.

9. Wrap cat in beach towel and ask assistant to lie prone on cat with cat's head visible under assistant's armpit. Put pill in end of paper tube you've made for this purpose. Then, force cat's mouth open with pencil, and blow.

10. Check label to make sure pill is not lethal to humans. Sip water to take taste away. Apply bandage to assistant's forearm and remove blood from carpet with soap and cold water.

11. Retrieve cat from neighbour's roof. Get fourth pill. Place cat in cupboard and close door, with cat's neck and head outside cupboard. Force mouth open with dessert spoon. Flick pill down throat with rubber band.
12. Fetch screwdriver from garage and put cupboard door back on hinges. Apply cold compress to cheek and check records for date of last tetanus shot. Throw bloodied, ripped t-shirt away and fetch another from bedroom.
13. Apologize to neighbour who crashed into fence while swerving to avoid cat.
14. Call 911, ask fire department to retrieve cat from front tree.
15. Get remaining pill.
16. Tie cat's front paws to rear paws with garden twine, and securely tie to leg of dining table. Put on heavy-duty pruning gloves. Force cat's mouth open with tire iron. Drop pill, previously hidden in one ounce of raw hamburger, into cat's mouth. Hold head vertically with nose pointed to ceiling, and pour one half pint of water down cat's throat, and two jiggers of whiskey down your own.
17. Ask assistant to drive you to hospital. Sit quietly while doctor administers anesthetic, stitches fingers, forearm and removes pill remnants from eye.
18. Drop off cat, along with a donation, at animal shelter. Adopt a goldfish.



New Title Holder

Ch. Sanvar's Midnight Air



(Can.Am.Ch. Sanvar's Timbit ex Ch. Sanvar's Catch White Lightning)

Shown here winning Best of Breed under Eve Whitmore

Kalev Poodles
Cindy Lester
183 Churchill Drive
Barrie, ON
705-737-9668

New Title Holder

Ch. Aurlavi Mistique of Embertone



(Ch. Embertone Colour Dance ex Ch. Embertone Haz Gems of Fire)

Shown here finishing at Markham

Also Winners Bitch at the PCC National Specialty – June 2005

Embertone Reg'd

Pamela Barbadoro

79 Louisa Street

Meaford, ON

519-538-0877

New Title Holder

Ch. Pyx Glorious Quest



Jaden finished his championship at ten months after getting off to a great start winning the breed over specials.

Breeder/owner/handler: Stephanie A. Crump
www.geocities.com/pyxpoodles

New Title Holder

Ch Pyx Poodlicious



Jube' finished her championship the same weekend as her brother Jaden. She will continue her show career in the States attaining her American Championship.

Breeder/owner/handler: Stephanie A. Crump
www.geocities.com/pyxpoodles

Optigen

Statistics for Canadian Miniature and Toy Poodles tested during 2004

Total number tested for prcd form of PRA: 70

Pattern A – 45

Pattern B – 21

Pattern C – 4

Statistics for ALL Poodles tested for PRA during 2005

Total number tested for 2005 **worldwide**: 1690

Toy Poodles – 965

Normal/Clear – 659

Carrier – 273

Affected – 33

Miniature Poodles – 725

Normal/Clear – 485

Carrier – 222

Affected – 18

Countries tested during this period include: USA, Australia, Austria, Belgium, Canada, Denmark, Estonia, Finland, France, Germany, Ireland, Israel, Italy, Japan, The Netherlands, Norway, Poland, Russia, Spain, Sweden, Switzerland & UK.

As I see it

By Dr. Joanne Reichertz DVM

First published in The Poodle Review – Jan/Feb 2000 Issue

“So your Vet says that you have Coccidia in the kennel”

Recently I have had several people asking me how to treat their dogs for coccidia and another protozoan parasite giardia.

Most coccidial infections in dogs are commensal and nonpathogenic. This means that although the dog has coccidia living in its intestines, no damage is done and no symptoms of the infection are seen. In these cases the coccidiosis is only diagnosed by the identification of oocysts (coccidia eggs) in a fecal sample. Infection usually occurs by ingestion of infective (sporulated) oocysts from a feces contaminated environment. Fresh feces do not

contain infective oocysts. The coccidial oocysts require a day or two with adequate moisture, moderate temperatures and sufficient oxygen to become infective to another dog. Infection can occasionally occur by ingestion of infective cyst-containing tissues of a paratenic (transport) host, particularly rodents.

As most infections of coccidiosis are asymptomatic, it is important to understand that the mere identification of coccidian oocysts in a dog's feces does not justify a diagnosis of the disease coccidiosis unless the history and clinical signs warrant it. Large numbers of oocysts may be counted in the feces of perfectly healthy dogs. On the other hand, severe and even fatal coccidiosis sometimes occurs in the early stages of infection before oocysts have had time to develop. In such cases oocysts have yet to appear in the feces. Chronic diarrhea is the main symptom of coccidiosis, resulting from the destruction of intestinal epithelium by hordes of multiplying organisms. Diarrhea has many causes, only one of which is coccidian infection, so diagnosis of coccidiosis is uncertain in individual cases.

However, coccidiosis in a kennel situation can be an entirely different problem. It often shows up as regularly recurring episodes of diarrhea in successive litters of young puppies. The diarrhea varies from soft to fluid and is occasionally mucoid or bloody. Other signs can include vomiting, lethargy, weight loss, and dehydration. Given a kennel with reasonably steady environmental conditions, clinical coccidiosis will regularly appear in each new litter of puppies unless effective treatment measures are used. It is often said that coccidian infection is self-limiting, meaning that the number of infecting organisms grows to a maximum number and then drops to a very low level as the puppy becomes immune or resistant to the organism. Small numbers of oocysts are still shed, but the infection is now inapparent except on fecal examination. The disease coccidiosis results from either overwhelming infection or the interaction of more moderate levels of infection and stress, such as weaning or transfer to a new home.

The level of environmental contamination with oocysts is best affected by removing all fecal material and getting all surfaces as clean as possible. There is no reliable disinfectant. Drying and direct sunlight are the most effective way to destroy oocysts. Giving young puppies coccidiostats during exposure, allows them to become infected and develop immunity without allowing disease to occur. Puppies treated in this manner will not experience the growth setback due to the diarrhea caused by the disease. Occasionally in Toy and Miniature puppies the infection can be heavy enough to cause death. Treatment of a puppy with fully developed coccidiosis is a matter of supportive therapy because, by the time oocysts are detected in the feces, no available drug will have much effect on the population of coccidian in that particular puppy. Controlling coccidiosis in a kennel with new litters of susceptible puppies arriving at regular intervals is challenging. The objective is to control the outbreak in each litter of puppies before it becomes bad enough to cause overt disease in the puppies. Sulfa drugs are used as coccidiostats. A pediatric form of Trimethoprim-sulfa is available from your veterinarian as is Sulfadimethoxine for older puppies and adult dogs. Other drugs used are furazolidone and amprolium.

“Now the Vet says the puppies have Giardia”

Giardia are also protozoa which infect the small intestine, interfere with mucosal absorption and sometimes produce diarrhea. There are two forms of this organism: mobile trophozoites and nonmotile infective cysts. The incidence of these organisms is highest in young animals and animals confined together in groups and so can easily occur in a kennel situation. Again the majority of giardia infections are subclinical and thus inapparent, especially in mature animals. Clinical giardiasis is characterised by large volumes of foul-smelling, light-colored, watery or “cow paddy-like” diarrhea and weight loss. Diarrhea may be acute or chronic, intermittent or continuous and either self-limiting or persistent. The severity can be worsened by infection with other parasites especially roundworms.

Diagnosis of giardia depends on identification of cysts or trophozoites in a fecal floatation or smear, however a negative fecal examination does not clear a puppy of giardiasis as with coccidiosis. Cysts are infective when passed in the feces. Unfortunately humans can get this disease, so puppies should be treated, even if they have no symptoms, especially when there are children which may be exposed.

Dogs can be treated with quinacrine, but anorexia, fever and lethargy may appear as side effects. Metronidazole is more expensive and somewhat less effective, but is relatively free of side effects. Control of giardia infection involves prevention of fecal contamination of food and water supplies, and sanitation and disinfection of the environment with Lysol (2-5%), Sterinol (1%), or chlorine bleach (sodium hypochlorite, 1%).