

To all involved with Greyhounds in Need UK in the rescue and export of galgos 22/2/05

Arising recently out of a case of a vaccinated galgo who two months later developed distemper in the country of export, we have discussed and agreed the following.

I perhaps need to point out, in the defence of all involved, that the matter was not due to negligence. The dog was vaccinated on 26th November, and spent four weeks, from 9th December in the care of Josep Plans, our veterinarian, in his private boarding kennels in Spain and exhibited no signs whatsoever of distemper before her departure. He himself took her to the airport on January 7th for her flight. The procedures followed for her salvation were no different than those followed now for 14 years by 5500 other greyhounds whom this charity has rescued and exported from Spain and prepared for homing in conjunction with other mainland European groups. .

The reason for the disease appearing after vaccination, and appearing so late in this particular dog, is not clear. But we now try to look for ways of making future rescued dogs safer from such a rare occurrence happening again.

Some background is possibly relevant here. These dogs are bred by hunters and very likely not vaccinated fully as pups. They suffer malnutrition, the stress of racing, tough handling, extremes of temperature, even pregnancy, followed by abandonment to the elements. Refuges and dog pounds round Spain pick up these dogs, bringing them to premises already crowded with hundreds of other breeds of dogs, many of them not entirely healthy. The refuges in turn function on meagre resources in makeshift warehouses or discarded farm dwellings, usually without electricity, running water or regular staff.

On abandonment, these dogs are frightened and confused, being uprooted from the habitat in which they were born and bred. They are picked up by strangers and taken elsewhere; they may undergo, often in poor shape, hugely long journeys in uncomfortable vehicles (in the case of this bitch, from Cadiz to Vic, via Albacete, ~ 1000 km); they may be full of parasites or recovering from whelping. They are then kennelled together with dogs from many other different parts of the country, carrying a different pathological 'flora'. So these dogs are both vulnerable and hugely challenged, and with the pressure all of us are under to rescue as many from death as possible, we find ourselves trying to cope with more dogs than are comfortable for us. We 'process' these dogs further and promptly, to the best of our ability with de-parasitation, blood testing, treatments and sterilisation together with the promotion of their adoption on the internet, always meanwhile being pressed by the refuges throughout Spain to take more galgos who are filling their premises and who need to be passed into our care, so that *they* in turn can take in more from the streets.

Vaccine is a deliberate 'assault' to the bodily system. It introduces the body to infection. The idea is that as a response to it, the body will produce its own antibodies to the disease we are trying to protect the dog from. Science and the manufacturers can assess this up to a point, but in the occasional dog who is possibly being challenged in many other directions at the same time, which we may not necessarily appreciate, the protective response may not rise high enough and the dog may end up not being protected. That is the only theory that can explain this instance. We have heard of humans getting chickenpox twice. Who can explain why?

Distemper has mainly not been seen in northern Europe since the 1950s. In the UK, all working and pet dogs are vaccinated routinely, and no one, not even a hardened hunter, would fail in this respect. The disease is so rare that vets are not accustomed to spotting it or treating it and distemper carries with the public, an element of shock, consternation and anger, **threatening the very foundations and support we have from the public for our work.**

So what measures shall we now take to prevent such an instance happening again in the future?

After having discussed it with veterinarian Josep Plans, he suggests the following as a procedural protocol for dogs coming to Vic in the future.

- 1) The dog should be observed for 24 hours after arrival at the refuge.
 - a) De-parasite internally.
 - b) Treat external parasites e.g. fleas, ticks.
- 2) If after 24 hours after the first treatment, if worms are still observed in the faeces, treat the dog for another 4-5 days.
- 2) After 8-10 days of their deparasitation, if the dog exhibits no pathological symptoms, give the vaccine, Pentavalente and Anti-rabi
(*A note from us: Only dogs who are healthy should be vaccinated otherwise the immune system is compromised.*)
- 4) 15 days after the vaccine, the dog can be moved (to Vic etc)

To carry out this estimated time for each procedure is very important, in order that symptoms are not obscured that might present themselves, altering the clinical picture of the dog.

5) In Vic we will give a booster vaccine to reinforce the first injection and dogs should wait at least **21 days** after this second injection before they are exported. The timing of therefore of sterilisation and other procedures will also be taken into consideration and will of necessity postpone even further the departure date.

6) It would be helpful if the refuges themselves would carry above all, the Leishmania test. If they can do the others, Ehrlichia, Filariae, Borellia, that would be even better.

The refuges could contact Pep on 93 885 6607, to ask more about this.

- 7) Finally a word about Leishmania. We have received dogs in the UK and elsewhere who showed negative tests in Spain who still have succumbed to the disease even years later. We know that due to the complexity of disease, negative testing cannot guarantee that the dog will not later succumb. It is a disease which lurks. When it does occur in our countries, it can cause great upset and accusation, even from vets, against our charity. We deal with it the best we can. To bring in dogs knowingly with the disease is inviting trouble. Yes, occasionally we find good owners who will take responsibility but it is rare. I would ask you, and I hate to say this, whether you in the refuges should consider offering these dogs a dignified painless end. Let us hope that one day this complicated disease of the sandfly will be resolved and we can take in these dogs with confidence and hope for a healthy future for them.

Concerning the management of vaccine, we suggest:

a) that only recognised and proved, in date, vaccine be used with the stamp for the dog's identity card, and not cheaper versions that may be diluted

b) that storage of vaccine is strictly adhered to according to the manufacturer's recommendations. Best is that it is stored in a *vaccine refrigerator* with a maximum/minimum thermometer which sets off an alarm if the vaccine for some reason has been subjected at any time to an unsuitable temperature. If by accident, it is frozen or reaches room temperature, its efficacy is as zero and it should be thrown away and replaced.

Regretfully, all this will slow up our work and in addition is passing back to the refuges some of the onus and cost of this work. Our work in our charity also relies totally on raising money from the public. With the tsunami disaster and the fact that this work has gone on now for ten years or more and is no longer a novelty, donations are becoming harder to find in our own countries, and our committee, of necessity, are looking for ways to cut costs.

While I am contacting you all in the refuges, here is a suggestion on a different matter. Volunteers in Spain from time to time ask us about the whereabouts of the dogs whom they rescued in the first place. When we entrust a dog into the hands of another group, it becomes complicated for us to answer your questions. I think the following is the best solution. In future, if you would like to hear news, create a little page carrying your postal and email details, a small photo of the dog, a nice message to the new owner thanking them for adopting your dog and explaining who you are and how the dog was first rescued and that you would like to hear news of him/her, and PASTE or STAPLE this securely and neatly (so it isn't bulky) **into the back of the vaccination book**. If you make the message very short and do it also in English, it might help. This way it stays with the dog and neither the group leaders nor we have the ticklish task of divulging someone else's personal information. The new owners, who have the right to do so, then make the decision themselves to contact you.

We would welcome your comments about all the above items.

Anne Finch