

Reaching out to you with...



The Golden Paw



Volume XVI Number 3

August 2024

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SPECIAL

Healthy



Helpful safety tips
and articles.

A healthy
dog is a
happy dog!

Dog



New and
updated information.

Issue!



Keep for reference.



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 Masthead photo of **24-046 Mickey** by Connie McCabe
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About This Health Issue

By Deb Orwig

AGR President and Editor of *The Golden Paw*

Most of the health-related articles that are presented in this issue have been published in various previous issues of *The Golden Paw*, so some may be familiar to you. I have included them so they are all in one place – in your hands – hoping this issue will be a good resource for you. The articles are not included to intimidate you or make you paranoid about a disease or condition your dog might develop, but to inform you enough so that you hightail it to your vet if you suspect anything going amiss with your dog's health. In this case, a little knowledge is NOT a dangerous thing and may help you save your dog's life. My thanks to Liz Tataseo, who has been *AGR's* Health Care Manager for the past six years, to Linda Knight Gage before Liz, and to Teri Guilbault, who held the position before Linda, for researching and writing many of these informative articles. Thanks to Teri and Liz who reviewed and, where appropriate, updated all their health articles from the 2020 issue.

Is your dog healthy? Do you wish your dog could live forever, or at least as long as you do? I certainly do. However, it is a sad fact that their lifespans do not even begin to last as long as ours. Of the 22 dogs who have been my companions during the past 46 years, 18 have passed away, with an average age at demise of about 11. One of them left me at age 19 months and another at 5½ years; three made it to almost 16.

At *AGR* events and during home evaluations I have done, there have been many occasions when I have told someone who says they want a young dog that there are no guarantees as to how long any one dog will live. Not counting the 3 puppies born into Rescue in January 2016 that did not survive very long after whelping, *AGR* has lost dogs as young as 5 weeks of age (**15-010 Fiah**), 10 weeks (**19-057 Aspen**), 3 months (**20-024 Captain** and **24-021 Bentley**) and several between 1 and 5 years of age. However, **09-002 Goldie**, adopted by Teri and Jeff Guilbault, lived for over 17 years, and many of our rescued dogs have lived to 13, 14, 15 or 16. Among others, **23-101 Lilly** will be 13 in December; adopted by Sharon Flores when they were 12, **19-082 Cassie** was over 15 when she passed and **19-081 Riley** was almost 16; Connie McCabe and Nick Dodson's **10-060 Grizzly** was at least 15 and **19-019 Sierra** was 15; Cara Holland and Jack Craven adopted **22-079 ShadowMan**, who lived to 15; and Liz Tataseo's boy **11-062 Trip** reached 13.

Basically, a dog's genetics determine the length of its lifespan. But, we can help our dogs live as long as their genetics dictate. How do we do that? We give them a high-quality food. We provide them with a nice bed and toys to keep them entertained. We see to it that

they get exercise. We walk them on leash (and not on an extendable one that gives us no control) so that they cannot bolt and run out into traffic. We ensure that they have a safe environment in which to live, with no toxic chemicals, poisonous plants or cacti within reach. We train them to stay off counters and people, not to chew up things, and to otherwise be well-behaved. If we live near a preserve or an undeveloped desert area, we get the dog snake-trained. We see to it that our dogs have an annual check-up by our veterinarian, vaccinations when they are due, tests for valley fever and heartworm, and, here in Arizona, we keep them on Heartgard® or another heartworm preventative year round. It is a big job – and can be an expensive one – to be a responsible dog owner. Hopefully, some of the information presented in this issue of *The Golden Paw* will help you take good care of your dog so that he or she lives as long and healthy a life as possible.

From Sue Vallie, who was Director of Dog Care in 2017: *Vigilance is key, no matter the age. Just as with people, when a problem is caught early, there is a much better chance for effective treatment. Are there new lumps or bumps? Are they drinking excessively (although at this time of year, that is really hard to evaluate) or not enough? Are they lethargic? Are they not eating well? Are their gums pale? Have they developed a limp? While the heat takes its toll on all of us, making both man and beast less energetic and possibly reducing our appetite, being aware of what "normal" is can let you know how far off the current behavior is. Our suggestion is know what is normal for your dog, and check out things that are unusual. Peace of mind is worth the cost of a vet visit.*

Sue had a really good point. Early in 2020, I noticed that my boy **13-023 Duffy** was not "acting himself." It's hard to describe what I mean by that, though. He normally is a rather placid dog who does not really engage with people. "Aloof" is a word I have used as his label sometimes. But, he was acting a little more mopey than usual and seemed to want to sleep more. I mentioned his lack of enthusiasm to our vet and told her I wanted to have a senior panel done even though he was only 7½. This blood work includes analysis of the thyroid function. Hypothyroidism is rather common in older Golden Retrievers, so I thought that might be his problem. Nope. There was a medical issue, but it wasn't thyroid. Rather, **Duffy** had contracted valley fever and had a titer of 1:16. **16-009 Vin**, who went everywhere I took **Duffy**, and **11-056 Mufasa**, who often went, too, did not have valley fever. The three all lived in my house and all played/swam in my back yard and pool. All three had been on daily SAM-e supplement (**Vin** 200 mg twice a day, **Duffy** and **Mufasa**, who were bigger, 400 mg twice a day) for years. **Duffy** got valley fever and the other two didn't. Go figure. When the test results came back, Dr. Ferguson said, "You sure know your dogs!" meaning I knew something was wrong, but I just didn't know what. **Duffy** had to take fluconazole daily but only for 18 months. Living in Arizona since 1997, Larry and I have had 19 Golden Retrievers who've lived with us here over the years, and **Duffy** is the only one to contract valley fever. Guess we've been lucky!

If you live in Arizona, you need a working knowledge about valley fever, a disease that both you and your dog could contract. To learn more, read about TK and Reggie, p 11 and also pp 61-64.

Health Care for All Incoming Dogs

By Liz Tataseo, Director of Health Care

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When we are out in public collecting donations or doing major fundraising, we always say it is for the dogs! That money goes directly to vet costs to make sure each dog is as healthy as possible, so that they can be happy and healthy in their forever homes. We are able to work with several great animal hospitals that give us discounts so that we can pursue needed vetting for each dog.

Our veterinarians include *Four-Legged Friends Animal Hospital* in Phoenix – Dr. Valerie Ferguson has worked with us since the beginning, as has *Kennel Care* in Chandler, which has cared for many of our very sick dogs. *Animal Medical & Surgical Center* in Scottsdale is a state-of-the-art emergency and specialty hospital – their vets have saved many of our dogs. *Stetson Hills Animal Hospital* has served us in our North Valley area since 2011. *Academy West Animal Hospital* in Glendale has given us the security of both boarding and vetting, especially with emergency intakes. In 2019, we added *Crosswinds Animal Clinic* in Gilbert; in 2021, we started working with *Phoenix Mountain Animal Hospital* in Scottsdale; and in 2023, *Scottsdale Veterinary Clinic* joined our list. We also occasionally work with vets in Flagstaff, Prescott, Sierra Vista and Tucson. If you live in one of these outlying areas and need a recommendation for a vet, please don't hesitate to contact us.

We also have partnerships with many specialists including *Animal Health Institute – Companion Animal Clinic* at *Midwestern University*, *Arizona Dental Specialists*, *Arizona Oncology*, *Dermatology for Animals*, *EyeCare for Animals*, *Integrative Veterinary Oncology*, *Veterinary Emergency Group (VEG)*, *VetMed* (internal medicine and emergency services) and *Veterinary Neurological Center*.

The basic vetting we do for each dog during the initial three-week foster period is:

- health exam
- valley fever test (normally not done on a puppy under 6 months of age)
- heartworm test (normally not done on a puppy under 6 months of age); heartworm prevention medication provided to adopters for two months
- rabies and distemper/parvo vaccinations if not current
- leptospirosis vaccine series (2 injections 3 weeks apart)

- bordetella vaccine if staying at the vet for more than an appointment, or if beginning obedience training at a facility (*Partners*, *Master's Kennels*, *PetSmart*, *Petco*)
- spay or neuter (normally we recommend neutering and spaying at the minimum age of 12 months)
- implantation of an AVID microchip
- fecal if indicated by dog's history (e.g., shelter dogs or dogs kept outside), appearance of stool, or if dog is a puppy
- senior panel if over 8 yrs of age
- ear infections, lumps, bumps, physical issues and preexisting conditions will also be addressed during the exam

If warranted by the exam, dogs may be referred to a specialist for follow-up and treated for the condition. Financial coverage for follow-up exams and treatments needed for any ongoing illness or condition will be included for three months after finalization of the adoption.

In order for *AGR* to get the basic vetting done for each dog, two different avenues exist. If the dog comes from a shelter or is an emergency intake, the dog will, in the majority of those cases, go to one of our veterinarians first before being placed in their forever home. If an intake is a normal intake from a surrendering owner, the dog will most likely be placed in its new home first and the new family will take the dog to one of our veterinarians through a regular appointment, at their convenience, within the first few days the dog is in their home. *AGR* will be responsible for all vet bills until an adoption is finalized.

Each animal hospital has a dedicated *AGR* volunteer who coordinates vetting between the family and the veterinarian and is available for follow-up and any questions the family may have about the health of their dog. Liz Tataseo, Director of Health Care, is our vet liaison to most of the vets we use. Teri Guilbault handles *Kennel Care* and *Crosswinds* and Amy Maynard is our liaison to *Four Legged Friends Animal Hospital*. Liz is also available to do follow-up or to answer questions regardless of the veterinarian being seen.

We would not be able to do what we do for all our dogs were it not for the sizable discounts these vets give us. They help in a huge way to help us give our dogs a second chance at a great life. We sincerely thank them for their service and encourage you to use one of them as your regular vet. The list of our participating vets with their contact information is on page 66.

Health Tip: Play with Your Dog!

Canines receive stimulation and exhibit behaviors from different contexts – predation, aggression, reproduction. Neuro-psychologist Stephen Siviy determined that play affects the brain's level of a protein associated with the growth of nerve cells, possibly enhancing creativity. So, play with your dog, and stimulate his brain power!

Wags and Woofs

By Deb Orwig, President

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“Health” is the theme of this issue of *The Golden Paw*. It has been four years since our last Health issue, so it was time to produce one again. The word has many ramifications when it comes to Rescue and all that the organization encompasses. As a nonprofit animal rescue group, *Arizona Golden Rescue’s* health is dependent upon the quality of the organization, the strength of its volunteer force and the organization’s financial well-being.

We have a very well-run organization. I am frequently told “*AGR* really has its act together” by people who contact us to ask questions or to adopt a dog. Every member who does home evaluations or transports or hosts events is well trained. We provide that training through our mentoring program. We require new evaluators and transporters to do at least three ride-alongs with experienced members. We encourage “newbies” to come to events with their newly-adopted dogs and position themselves next to an experienced member to listen to the responses when the public asks questions. We also give them copies of our informational brochure to read, and, of course, they have already read our *Your New Dog* manual and have participated from start to finish in our adoption process.

A well-informed representative will always make a good impression. Our best impression is often the one made by Sharon Flores, our Co-Intake Manager, who answers the *AGR* telephone. She is really wonderful and patient with the many callers who need information from *AGR*. We often get compliments on the fact that we have a live person answering calls rather than an answering machine. Thank you, Sharon!

Connie McCabe continues to drive all over Arizona doing home evaluations and transports. She provides an invaluable service to *AGR* in these areas. She is also hard at work creating our 2025 calendar. An order form is enclosed with this newsletter. Thank you, Connie, for all that you do!

I want to mention Darlene Kaminski, occasionally with husband Rick Stephens, who helps out with dog transports, giving Connie a break with eastside pickups and deliveries. They do a tremendous job!

We have a new Information Systems Manager – Rick Rogers. Please read about him in Debbie Ball’s column (p 6); additional information about Rick and his family is in Connie McCabe’s column (p 9). Thanks, Rick, for all you have done and will be doing.

Since we are not hosting a golf tournament this year and because there has been only one official activity since *Paws At The Park* in mid-March, you might think we haven’t been very busy. You would be wrong. All the core teams have been busy. During the second quarter from April 1 – June 30, intake volunteers processed 22 dogs, with an additional two coming on July 11, 2024. All 22 second-quarter intakes needed health care of one sort or another, and three had to be euthanized due to untreatable health problems. All needed placement somewhere, which means many home evaluations had to be assigned, scheduled, and reports completed. There were many transports, more often than not multiple ones for specific dogs (first to a vet, then to a foster or potential adopter).

Speaking of reports... each core team volunteer is responsible for uploading a report into our database – Debbie Ball oversees all the reports and inputs data onto a spreadsheet for statistical purposes. Julie Wheadon prepares a weekly spreadsheet of information on approved adoptive families so Placement volunteers can access all the information we have about potential adopters in just that one place. In regards to Placement... sometimes as many as a dozen families are contacted, first by email or text and then by phone to determine if (1) the family is still interested in adopting a dog from *AGR* (many get dogs from elsewhere while they are waiting for contact from us) and (2) if they might be interested in Dog #__. Of course, most want to know the health and behavior status of a potential family member, so we have to have that information to give them.

Once a home is chosen for a dog, transport is needed and money is collected. Our finances are handled by Cindy Tigges, Debbie Ball and me. Money comes in from several different sources: PayPal (adoption application fees and some membership fees), checks that are handed to a transporter or come in the mail, Zelle transactions, and credit card charges. I keep a spreadsheet updated with every single financial transaction, and Cindy inputs it all into our Quickbooks account online. Debbie Ball keeps a spreadsheet specifically of expenses related to our rescued dogs.

In order to support all the effort expended by our fabulous volunteer staff, we need money. No member ever gets paid for what they do for *AGR*, but intake and processing dogs doesn’t come cheap. Recently, a letter was sent out to all adopters who have dogs we think are still living (594 families). The letter asks the adopter to “pay it forward” to help *AGR* rescue more dogs. Especially because we are not doing a golf tournament, we hope there will be a good return from this *Summer Fundraiser for Special Needs Dogs* mailing. I would like to thank the following volunteers for helping to get the letters ready for mailing: Sheila Joyce, Jean Klink, Trishia Murphy, Larry Orwig, Jill Prose, Liz Tataseo, and Julie and Garrett Wheadon.

Our Sewing/Crafts Team members – Deb Orwig, Denise Padavano and Connie Wozniak – have all been busy on their sewing ma-

chines making things for **AGR** to sell. In addition to microwave bowl cozies, our hottest-selling item, Deb now has a pattern for casserole dish cozies – these require too much fabric for us to keep a supply in our inventory, but she will make them for custom orders.



Connie Wozniak has created some stunning quilted table pads and table runners. In addition, Betsy Prose, sister of **AGR** member Fred Prose, has made a limited number of the green felt Dog Bone Advent Calendars we used to sell. They will come complete with 25 Milk Bone dog biscuits in the pockets. We will sell these for \$35 each. Fred bought a couple from me a few years ago. Betsy saw them at Fred’s house and offered to make more. I can’t wait to display all these items at our public events. They make fabulous, unique gifts for yourself or someone you care about.

Can’t attend our public events for one reason or another and you would like to peruse our merchandise,? You can make an appointment to visit Deb Orwig – all the merchandise is kept at her house.

No golf tournament? No, but some new activities are in the planning stages. It takes months of effort from the Director of Activities – Denise Padavano – and her team to design a new fundraiser that will be fun, interesting and lucrative, and make all the necessary contacts for donations and/or sponsorships. We hope you will join us for events coming up in September 2024 through March 2025. If you are willing to help with our fundraising events, please contact Denise.



On Another Paw...



*A Message to
Approved-to-Adopt Families*



Quite a few of you who are reading this publication have lost a dog within the last year or two. You feel you are finally ready to bring another furry companion into your life, so you have applied to adopt from **AGR**. You submitted your application, had your home evaluation done virtually or an update of same by phone, and may have been asked to submit photos of your back yard. You have done all that we require; you have been approved. Since then, you have been waiting... and waiting... and waiting for “the call” from Placement telling you we have a dog for which we feel your household would be a great match.

Why haven’t you gotten that call? It is not because you are “way down on the list.” **AGR** does not keep a list by chronological date of approval. We base our placements on which approved-to-adopt family would be the best family for a particular dog and his/her needs – that family could have been approved a week ago or a year ago. No, placement calls have not been made primarily because we have not taken in very many dogs so far this year – only 45, and of those, we have lost three before they could be placed.

So, we have had only 42 dogs available for placement.

I am a member of a Golden Retriever Rescue Presidents e-group. I have learned it is a nationwide trend that intakes of Golden Retrievers have significantly decreased over the last few years. We think this trend is due to the fact that so many people have had to stay home – either to work from home (if they are lucky), or because they have lost their job and *have* to stay home because they have no work to go to, or because they have gotten sick. When people stay home, they realize they really want to be around their dogs; they realize they can take care of them; they realize the dog behaves better when s/he gets attention. So, people are keeping their dogs, and that is a good thing. In addition, the local shelters, although overstocked with stray animals, rarely take in dogs we can rescue. Also, this year, due to travel restrictions and new health regulations on imports into the U.S., Rescues have been able to bring in only a few dogs from outside our country. We have brought four here from Mexico in the last year, but we may not be getting more any time soon.

So, to all of you who are waiting for “the call”, have patience and hang in there. To those of you who are contemplating submitting an adoption application, do so. We will continue to rescue dogs that need rescuing – they are out there somewhere – and you just may be the perfect match for one of those dogs.



What’s Up DOC?

**By Debbie Ball
Director of Operations**

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I have good news to report on two items! First, our public page on Facebook has finally been successfully restored since it was hacked in late November 2023; the Admin access for our Social Media moderator, Kathy Blue, and for me was restored as of May 1, 2024 and the false fundraiser postings done by the hackers were removed. This public page is our “face to the world” so we are glad to have control of this once again.

It was extremely frustrating over the past six months with countless days and hours spent on e-mails and phone calls with Facebook/Meta, *PayPal Giving Fund*, and the **FBI** in trying to reclaim our page and our good name. Now that this is behind us, we are happy to report that overall the *Giving Day* initial fundraiser on 11/30/23 that started all this mess was actually successful in gleaning us income in excess of \$15K, however not without a lot of angst. We have decided to keep the *PayPal Giving Fund* deactivated at least for the rest of 2024, meaning that Facebook fundraisers will not be able to use any link within Facebook to make such donations. We do still welcome donations made either by check mailed to **AGR**, or Zelle directly to info@arizonagold-

enrescue.org, or through use of the PayPal button directly on our website (just not from within Facebook).

Secondly, after our plea in the May issue of *The Golden Paw* asking for help with our website, **AGR** was fortunate to have new member Rick Rogers volunteer to assist with design and improvements to our website! Rick retired after 39 years with one of the largest media companies in the country, and his background includes extensive experience in I.T. management including web hosting and design. He's already made some terrific changes:

- The website menu has been optimized for dropdowns on Adopt, Membership, and Events – no more having to double-click on the words
- Information tab has been shortened to simply INFO so as not to run into Membership when viewed on a mobile device.
- Adoption application link now appears in the ADOPT dropdown under “Overview and Application”
- Membership application link now appears in the MEMBERSHIP dropdown under “Application and Renewal”
- Event photos are now a direct link in the dropdown under EVENTS (fewer clicks to get there)
- New menu item added for NEWS, which includes the link to 15+ years of prior *Golden Paw* newsletters
- DOGS menu has been simplified to *Available Dogs*, *Successful Adoptions*, and *Rainbow Bridge*
- A beautiful Rainbow Bridge page has been established honoring those 500+ dogs that have passed, listed in descending order by deceased date with links to the dogs' stories
- A Board of Directors page has been added beneath the INFO tab showing the directors' names, positions and responsibilities
- The Amazon Smile button has been removed – this program is now defunct
- Breadcrumbs were added to the page footers to improve search engine optimization.

Lastly, work continues on our documented *Policies and Procedures* files. So far, I have over 70 separate electronic files that I am mapping to various chapters and topics. Updating and distribution of these is an ongoing challenge.

Benefits of Exercise

When animals do not get enough exercise, they can become obese, develop heart problems, and experience physical pain and even emotional problems. Frequent exercise promotes self confidence, bone density, joint health, a strong heart, and healthy bones. If your dog is overweight, YOU have not been getting enough exercise with your dog!



Goldens Adventures

By Denise Padavano
Director of Activities

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I hope everyone has been enjoying the summer, handling the heat well and staying cool! Activities tend to slow down in the summer, with many people vacationing and heading to cooler climates. Most of our Golden pups have been lying under air conditioning vents, sitting in front of fans, munching on ice cubes or taking advantage of their human's swimming pool! They know how to stay cool and are more flexible with weather than we are! As the fall draws near with cooler weather, we hope to once again see our wonderful **AGR** volunteers and friends at our upcoming events! Volunteering is a great opportunity to meet new people, make new friends and meet our Golden beauties! We have some exciting **AGR** activities lined up that I hope you will consider volunteering for and attending.

Adult Golden **Charlie's** perspective: *Last spring I went to my first AGR PACC911 event and wasn't quite sure what I was getting into! There were lots of dogs and new humans that gave me lots of attention and pets. When I first arrived, I was nervous and jumped on my mom a lot, almost knocking her over. As I got over my nervousness, I had a lot of fun and even got some treats. My advice to newbies: venture out, meet new humans and dogs and you will have a blast – I sure did!*

NEW EVENT!

Cars & Canines

15060 N Northsight Blvd, Suite 107, Scottsdale 85260

Saturday September 28th, 2024

8:00 AM until 11:30 AM

The **#LovePup Foundation** and **D Pet Hotels Scottsdale** have teamed up to bring luxury cars and dog rescues together for a fun-filled event. Enjoy live music, stop by the **AGR** booth as well as the **#LovePup** pop-up tent and other vendors, and meet all the wonderful rescues who have amazing furry friends waiting to be adopted!

UPCOMING ACTIVITIES

In addition to *Cars & Canines*, here is a list of upcoming events. Be sure to mark your calendars and come join the fun! If you are available to help out at any of the events, please email me at agrgoldenevents@gmail.com. As each event gets closer, information will be sent out with specific volunteer opportunities and times. Hope to see you soon! Please regularly check our website calendar (www.arizonagoldenrescue.org) and **AGR's** Facebook page for dates, times and locations.

NEW EVENT!*Celebrate Fine Art, Wine & Dessert*

"Raise a glass to Goldens!"

Sunday, September 29, 2024; 1:00 PM until 4:00 PM

Pavilion Fine Arts Gallery

7034 E Main St, Scottsdale 85251

Wine and desserts will be available, silent auction baskets and beautiful displays of framed photography, fine art and handmade jewelry to view and/or purchase. Pre-registration is required and space is limited! Registration form is included with this newsletter.

FOOD!*Dine Out With the Dogs*

Sunday October 27, 2024; 12:00 PM until 7:00 PM

Paulie's Little Bite of Italy

15456 N 99th Ave, Sun City 85351

Bring your dog-friendly dog, your family, your appetite and some cash to **Paulie's Little Bite of Italy** in Sun City. Raffles, silent auction baskets, and merchandise will be available to help you complete your holiday shopping all in one place!

NEW LOCATION!**PACC911 ADOPT-A-THON**at **Pet Supplies Plus North Scottsdale**

31319 N Scottsdale Rd, Scottsdale 85266

Sunday December 8, 2024, 10:00 AM until 3:00 PM

AGR will have a booth for meet-and-greet activities, as well as merchandise for sale. Come, bring your dogs, join the fun and socialize with fellow dog-lovers!

PARADE!*Glendale Hometown Christmas Parade*

Saturday December 14, 2024, 10:00 AM until 1:00 PM

51st Ave & Glendale Ave, Glendale, AZ 85301

Come with your Golden and join other **AGR** members and dogs strolling in this wonderful parade. A relaxed mile through downtown Glendale, seeing thousands of smiling faces and children's squeals when they see the **AGR** dogs coming! Dress yourself and your dog in holiday decor and join in the fun with some exercise, too!

PRESENTS!Gift Wrapping at **Floor & Decor, Prasada**

13230 N Prasada Pkwy, Surprise, AZ 85388

We will again have gift wrapping at **Floor & Decor** this year. As soon as we have the dates and times approved, we will post them on our website and on Facebook. Join the fun by meeting the public, socializing with **AGR** members, and wrapping some gifts. Learn to make beautiful bows and bring your own gifts to be beautifully wrapped for the holidays! Hope to see you there!

*Health and Safety*

By **Liz Tataseo**
Director of Health Care

e.tataseo@yahoo.com

Editor's Note: In her regular column each quarter, Liz presents information on health subjects that are unusual, or about an issue we have encountered recently, or one that is new to us. This one' from the August 2020 issue is worth repeating!

Eating Stuff Around the House: BAD!

What is this a picture of? It is what a 12-week-old puppy (**20-024 Captain**) had in his intestines after chewing up someone's underwear. Think of how small a 12-week-old puppy is and he had this spread throughout his intestines! He had surgery to remove it and then was surrendered to **AGR** because he needed a second surgery. He did not do well, and after four days another surgery was attempted. Too many lesions, no motility and too late to save him. Whether it is a puppy, a 1-year-old, or a mature Golden Retriever, many of them will chew up anything if they can get their jaws around it. Blockages happen and can be resolved if everything goes right with the surgery. But once is enough and none would be better. Intestinal surgeries are difficult and bad things can happen. "Potential complications abound, including shock, leakage, ileus (no motility), dehiscence (splitting open), perforation, peritonitis, adhesions, stenosis (narrowing), obstruction, short bowel syndrome, recurrence, intussusception (telescoping on itself), and death."¹

The more often a dog needs surgery for a blockage, the greater the chance is that these complications will increase exponentially. A method of trying to prevent further issues is Enteroplication, a surgical technique that is designed to promote the formation of controlled adhesions between adjacent loops of small intestine. This too can cause its own complications.

So what's the best thing to do? Watch your dogs, see if they are dumpster divers, like to chew up your shoes or your clothes, or eat anything they can get in their mouth. Maybe they'll grow out of it, but probably not. If you are blessed with a dog that touches nothing, congratulations! I have four that are very good about not

chewing, but I can't say that about the fifth one **15-009 Reba** [in column header photo with Liz] chewed up dog beds, clothes, whatever she could get in her mouth when she was younger. No bedding in her crate was safe, nor being left alone when I wasn't in the house. She also enjoyed sprinkler drip heads and plants – now parts of the backyard are blocked off from her and the other dogs as she still loves the drip system. Now at age 9, she's good in the house. Fortunately she has a large intestinal system, but she needed to have assistance getting stuff out the natural way a couple times.

An **AGR** dog named **Jimmy (09-023)** ate his foster's eye mask and needed intestinal surgery. The foster had cleared the house of all items **Jimmy** wanted to eat but this one slipped onto the floor one night and he found it. He had already had one surgery to remove a sock he had ingested at the previous foster's. Fortunately, he was fine after his surgeries.

19-001 Lilly, a 10-year-old Golden, was surrendered to **AGR** because she was having complications after several intestinal surgeries for ingestion of foreign objects, the most recent being a towel. We took her to the ER and they tried to save her, but leakage and peritonitis had taken hold and we had to let her go to the Bridge.

A female Golden surrendered to us, **19-031 Daisy**, had several health issues but upon X-ray, it was discovered that her intestines were full of gravel and rocks. Fortunately, the vet had a way to get them to move out naturally without surgery over a few days.

These are just a few examples; many dogs fall into this category and you must be vigilant, especially early on after you get a dog.

Things to consider about foreign substances that a dog might eat: "The problems that are caused vary with the:

- duration that the foreign body has been present
- location of the foreign body
- degree of obstruction that is caused
- problems associated with the material of the foreign body

"Some ingested items, such as older pennies or lead material, can cause systemic toxicities. Others may cause regional damage to the intestinal tract itself due to compression or obstruction.

"Gastrointestinal foreign bodies, especially strings, can often lead to perforation of the intestinal tract and spillage of intestinal contents into the abdomen. This condition quickly leads to inflammation of the abdominal lining (peritonitis) and allows bacterial proliferation and contamination (sepsis), which are both life-threatening complications."²

Learn your dog's habits, watch for items disappearing. One thing it can do is make you a neater housekeeper, but beware the counter-surfers when you prepare food, and don't leave medications – yours or the dog's – where the dog can reach them.

¹ www.ncbi.nlm.nih.gov/pmc/articles/PMC6668353/

² www.acvs.org/small-animal/gastrointestinal-foreign-bodies



The Human Connection

By **Connie McCabe**,
Human Resources Director

photocraf@aol.com

"It's all about the dogs."

We say that a lot, because that is why we are all part of this wonderful group. You would not be reading this if it were not for your love for the dogs. But as much as that is true, it takes a lot of hard work from a lot of people to keep this organization, and therefore the dogs, alive and thriving.

Since this is the "Human Connection" column, in every issue I am going to mention a few interesting facts and stories about some of the people you might know. Hopefully, you will learn something new about them and gain more insight into how they got here. If you are interested in getting to know some of the members I have featured in this column and you have not received previous issues of this newsletter, you can download them from the INFO tab on our website.



Simba, Rick, Jeanine and Lucy Rogers;
Cameron was away on business

Let me introduce you to our newest family of volunteers - Cameron, Jeanine, and Rick Rogers. Despite being busy with the family's laser cutting business, Rick has done a phenomenal job of improving our website's functionality in a very short period of time. If you haven't been there lately,

please go see the new features at www.arizonagoldenrescue.org, especially the beautiful Bridge dogs page. They are fostering their first **AGR** dog, and we hope many more in the future.

They are certified animal lovers. **Simba** and **Lucy** are the Rogers' beautiful bonded Golden Retrievers. They are both ten years old, full of life, and they receive lots of love and attention. The Rogers also have two rescue horses.



Jeanine Rogers with **AGR's #24-033 Fozzi**; she had made friends with this skittish dog within a half hour after he was delivered

Dogs were actually responsible for Jeanine and Rick getting together in the first place. Rick inherited a Bassett Hound, **Lacey**, from his family. Since his work required him to travel frequently, and being single, a dog was the

last thing he needed at that point in his life. Jeanine and Rick worked together and being a dog lover who already had four dogs, she volunteered to watch the Bassett when Rick traveled. This was the start of their relationship, and about a year later they were married.

Jeanine is always volunteering to watch someone's dog if they are traveling, ill, etc. Several years ago, the mother of a coworker fell ill and was hospitalized. The family was unable to care for her dog and they were considering putting it down and of course, Jeanine volunteered to care for the dog. As it turned out it was a senior Golden Retriever named **Patty**. Rick, who always loved dogs, but wasn't fond of large dogs, fell in love with **Patty**. The lady eventually passed away, so **Patty** found a permanent home with the Rogers family. This was the beginning of many "Golden" adventures. At the high point they had four Golden Retrievers, a Pit Bull mix, three cats and two horses.

Jeanine has wanted to be a member of **AGR** for years and finally signed up the whole family! They all are looking forward to helping the **AGR** team in any way they can. Recently, Rick has assisted with the **AGR** website and Jeanine has been updating the Rainbow Bridge database.

Now let's meet Emilie Duncan and Jim Cogan, who are active volunteers and attendees at our events, especially the *Fore! Paws Golf Tournament* and *Paws At The Park*. In Emilie's words: *Jim and I met seven years ago at the elementary school where I taught for 32 years. He's a storyteller who travels all around the West working at schools, doing assemblies or workshops on things like character development, bullying, mythology, state history, or teaching kids how to tell their own stories in an engaging manner. I'm happily retired for many years.*



*We currently have a pack of three. **Levi** is a Golden/Lab mix, age 9. **Jazmin** is our 3-legged spirited rescue from Mexico who keeps both the boys in line. She looks like a small yellow lab and is 5. **Oliver** is "the baby" at 3, a full Golden and our resident goof-ball.*

*Jim lives in Idaho and we make frequent trips there, especially in the summer where the weather is MUCH cooler! He has a big back yard, and **Oliver** is obsessed with trying to get one of the squirrels that run along the fence and torment him from the trees. He's convinced it's only a matter of time till he's successful.*

We are both avid readers and always have a book nearby. We also travel quite a bit and favor road trips. We are history buffs

*and enjoy visiting our beautiful National Parks, as well as Civil War battlefields, American historical sites like Fort McHenry, and other places that enrich our appreciation of American history. We just did a Mississippi River road trip starting in Nashville, to Memphis, Natchez, Baton Rouge, and ending in New Orleans. We ate our way down the river, enjoying all the barbecue and oysters and gumbo! And got to see a show at **Grand Ole Opry** and toured **Graceland**. It was a wonderful visit to many beautiful southern cities.*

*We both have been lifelong dog lovers and owners. My family has had Goldens forever; both my siblings own Goldens currently. So, finding a great group like **AGR** has been fun for us. We enjoy the events and meeting the dogs and their owners. We've volunteered at the golf fundraiser for several years and always have a good time.*

We have no plans to expand The Pack, but I've learned that when it comes to Goldens.... I never say never!

The Financial Picture

By Deb Orwig

Summer Fundraiser for Special Needs Dogs

If you are an **AGR** adopter, you will notice that most of the descriptions in the *Diamonds in the Ruff* column are familiar. In July, all **AGR** adopters received a mailing with a plea for donations to support our 2023-24 Special Needs Dogs, including those mentioned in *Diamonds in the Ruff* columns in the last year. Years ago when co-founder Debbe Begley passed away, we established the *Debbe Begley Memorial Fund*. The money in this account has been used for dogs coming into Rescue with cancer (we have had several) or to help with medical bills that amount to over \$5,000 for any one dog (again, several dogs). In years past, we hosted *Paws & Pasta* (now called *Dine Out With The Dogs*) and deposited that revenue in the *Debbe Begley Memorial Fund*.

During the summer, we take in more dogs than in any other 3-month period, but we have no significant fundraisers between April and September, and this year we will not have many until late October, since we will not be hosting the *Fore! Paws Golf Tournament*. There are no Meet-and-Greets due to the extreme heat. With a very few of our rescues, the amount of money we need to spend to ensure that the dog is healthy is less than the dog's adoption fee. However, for the majority of dogs we have placed in new forever homes, our costs have been more than the adoption fee, and in some cases thousands of dollars more.

We do not for a moment begrudge any amount of money we have spent improving the health of our rescued dogs. But the money we have spent above and beyond what was covered by the adoption

fees has to be recovered by other means, and those means are our fundraisers.

You do not have to be an adopter of an *AGR* dog to help us raise some needed funds at this time of year when nothing much is coming in. If you can help *AGR* financially, please send your check to *AGR*, 5350 W Bell Rd, Ste C122-158, Glendale, AZ 85308. Or, you can send money by Zelle if your bank supports that option. Or, you can call Deb Orwig at 623-693-0589 with your credit card information – for all such donations, the normal 4% convenience fee will be waived (*AGR* is still charged that fee). All donations are tax deductible to the extent allowed by law. If you have already sent in a donation by the time you receive this newsletter, we sincerely thank you!

Reporting period: January 1, 2024- June 30, 2024		
Total Assets as of July 21, 2024: \$326,020.87		
	<u>Income</u>	<u>Expenses</u>
Adoption Application Fees	\$ 4,200.00	\$
Adoption Income	21,389.00	665.00
Adoption Fee Refunds		3,000.00
Bank Charges (PayPal)		226.87
Calendars – Sales	279.00	
Credit Card Expense		149.69
Donation Income	27,772.34	
Honorary	3,088.24	
Memorials	2,818.00	
Summer Fundraiser	600.00	
Event Expense		100.00
Grants	9,800.00	
Insurance		1,645.62
Interest	2,503.80	
Internet Services		657.60
Legal and Professional Fees		10.00
Membership Income	15,560.00	
Merchandise	4,139.20	1,010.14
Office Expenses & Supplies		973.75
Paws At The Park Picnic	1,992.00	291.57
PATP Auction	1,570.00	
PATP Donations	1,075.97	
PATP Prizes	1,075.00	
Postage		615.85
Rent or Lease		1,566.36
Stationery and Printing		2,491.28
Telephone Expense		117.03
Dog-related Expenses		
Behavior Training		1,920.00
Boarding		5,568.00
Microchip and Heartgard® Expenses		64.97
Veterinary Services		136,392.16
TOTAL	\$97,862.55	\$157,465.89
NET INCOME: - \$59,603.34		
Checking Account on 07-21-24:	\$121,760.89	
CD Maturing on August 7, 2024:	\$100,548.09	
CD Maturing on September 3, 2024:	\$106,664.26	
Outstanding Credit Card Balance on 07-21-24:	\$23,679.92	



Diamonds in the Ruff

By Debbie Ball

Diamonds in the Ruff are dogs on which *AGR* has had to spend at least \$2,000. For the second quarter of 2024, we had eleven dogs that met this benchmark. Please consider donating to help with the expenses of a specific dog, or just earmark it for *Diamonds in the Ruff*. All donations are tax deductible to the extent allowed by law, of course, and will be acknowledged as such.



22-007 TK is a 6-year-old male purebred Golden that was diagnosed with valley fever in 2021, but his prior owners stopped giving him medication as they could no longer afford it. When he was surrendered to *AGR*, his valley fever titer measured 1:256 (highest possible reading), he weighed only 44 pounds, and was so weak he could

not walk nor stand without assistance. He was adopted by our Health Care Director Liz via our *GPHA* program and remains on daily oral anti-fungal meds. In April and May 2024, **TK** was having seizures, so a neurology checkup was done which revealed that he has extensive meningitis (the likely cause of the seizures), along with severe changes to his skull and osteomyelitis in other bones. **TK's** expenses for 2nd quarter 2024 were **\$8,247**, and total overall expenses for him since early 2022 amount to **\$33,067**.

22-067 Reggie came into Rescue in 2022, a then-4-year-old neutered male purebred Golden surrendered by his owners as they could not afford any more medical care. **Reggie** was diagnosed with valley fever that went to his brain and spinal fluid, causing numerous seizures. He has had radiographs, bloodwork, an MRI of the brain and medications. Because of his ongoing medical needs, he has been adopted into our *GPHA* program by Connie and Nick in Glendale, and they have witnessed him suffering from multiple seizures. **Reggie** is currently on numerous medications in hopes of stabilizing his health. **Reggie's** 2nd quarter 2024 expenses were **\$4,320**, and overall expenses since his 2022 intake total **\$16,205**.



23-042 Kai came into Rescue in mid 2023 as a 1-year-old unneutered male purebred Golden whose former owner surrendered him to *AGR* because they could not afford his necessary hip sur-



gery. In late September 2023, **Kai** had his first hip surgery, and in April 2024 his second hip surgery was done. **Kai** continues to recuperate under the watchful eyes of his adopters Julie and Garrett in Glendale. 2nd quarter 2024 expenses for **Kai** were **\$11,384**, and overall expenses since his 2023 intake total **\$23,197**.

23-088 Booker is an estimated 1-year-old male Golden mix, an unneutered shelter save that was rescued by **AGR** in October 2023. After receiving his initial vetting and vaccinations, he was fostered by Cathy in Mesa; she noted that he seemed very fearful, anxious, and prone to escape. He was moved back to boarding in December, then to another foster in mid-March. In early April, **Booker** required an emergency vet visit with radiographs and gastropexy due to vomiting and lethargy for suspected bloat. **Booker** has been adopted by Colleen in Phoenix, who took him to specialized training classes and generously donated the funds for that. **AGR's** 2nd quarter expenses for **Booker** amounted to **\$8,012**.



24-013 Milu is an 8-year-old neutered male Golden mix rescued in mid-February 2024 by an owner that had inherited the dog from someone else and now wanted to travel and could not keep **Milu**. This poor guy had not been to a vet in many years, had a significant dental issue, a heart murmur, and badly needed grooming. He was brought up to date on needed

vaccinations and in April had several tooth extractions. Placement worked hard to find **Milu** just the right home, and as all good things come to those who wait, **Milu** is now being adopted by Sarah in Phoenix who has fallen in love with this little guy! Expenses for **Milu** so far amount to **\$2,493**.

24-021 Bentley was an 11½-week-old male purebred Golden Retriever puppy surrendered at an emergency vet – the former owners could not afford his needed medical care. **Bentley** had been sick and lethargic, did not want to eat or play. He was diagnosed with telescoping intestines at the emergency veterinary office, was given a laparotomy and plasma fluids; unfortunately, after



only a few days his intestines began shutting down with no hope of recovery, and this little boy crossed the Rainbow Bridge on 4/7/24. One of our Intake team co-managers adopted him and held him while he passed. **Bentley's** vet expenses were **\$5,821**. We are thankful for the receipt of an \$800 grant from the April Fund of the **Golden Retriever Foundation**, as well as \$1,000 from the **Phoenix Animal Care Coalition (PACC911)** which help with our expenses for this puppy.

24-022 Charlie was a 5-month-old male purebred Golden Retriever who was also surrendered at an emergency vet by the former owners who could not afford his needed surgery. **Charlie** had all the signs of having ingested some kind of toxin and so was given intravenous fluids, an ultrasound, bloodwork, and emergency hospitalization. Sadly, **Charlie** went downhill fast with high liver values, arrhythmia, and blood in his urine. After being unresponsive one night, he was euthanized the following morning. Expenses for **Charlie** were **\$4,602**. We are thankful for the receipt of an \$800 grant from the April Fund of the **Golden Retriever Foundation**, as well as \$1,000 from the **Phoenix Animal Care Coalition (PACC911)** which helps to offset our expenses.



The next four qualifying dogs came into Rescue together in late April 2024, having been relinquished at an emergency veterinarian by a "Good Samaritan" finder. The two males and two female 3-month-old purebred Golden retriever puppies were thin and small, with at least one male puppy testing positive for parvo virus. All four puppies had been exposed to parvo. They were moved to **AMSC** in Scottsdale for isolation, intravenous fluids, medications, diagnostics, and hospitalization. The two female puppies improved quickly and were placed with potential adopters within days of intake. Our Intake Co-Manager Sharon Flores graciously fostered the two male puppies until they were well enough to be placed. All four puppies will need to be spayed/neutered when they are of age. **AGR** is very thankful for grants of \$4,000 received from **Phoenix Animal Care Coalition (PACC911)** and an additional \$3,200 received from the **Golden Retriever Foundation** toward these puppies' expenses, which altogether total over **\$20K** so far.



24-025 Chandler is one of the male puppies who struggled the most. In early June, he was adopted by Amanda and Jason in Chandler who have renamed him **Che**. Expenses for him have amounted to **\$7,454** so far.

24-026 Ross is one of the male puppies and has been adopted by Adam and Cassie in San Tan Valley and have renamed him **Charlie**. His expenses total **\$5,414** so far.



24-027 Phoebe is one of the female



pup-
pies

and has been adopted by Gary and Nita in Peoria and have renamed her **Riley**. Her expenses so far have been **\$3,029**.

24-028 Rachel

is one of the fe-

male puppies and has been adopted by Tammy and Aaron in Phoenix. They renamed her **Sunshine**. Expenses for her have been **\$4,145** so far.



A Terrible Tragedy



On Friday, June 28, Dr. Thompson from **Madison Animal Clinic** called **AGR** about a one-year-old female Golden. Her family had gotten her from **MCACC** 10 days ago. **Chloe** got sick and they took her to an Urgent Care. She got worse, so they went to Dr. Thompson. She was not in very good condition – she had severe pneumonia and needed oxygen. The family then took **Chloe** to **Veterinary**

Emergency Group (VEG) in Phoenix and signed our surrender form there. **VEG** put her on on IV meds, oxygen, and a nasal tube for food. X-rays showed 3 of 4 lung lobes to be involved. She was breathing more easily in the oxygen box, but the **VEG** vets wanted her transferred to a specialty hospital where more treatment options were available, so we authorized her transport to **AVECC** in Gilbert for intensive critical care. Unfortunately, she ceased breathing on the way but was resuscitated. The vets at **AVECC** said she'd be intubated probably for several days, but many issues could arise, none good. After discussion among three Board members around 4:30 AM, we reluctantly sent her to the Bridge to end her struggle. Her cost to us in less than the 24 hours she lived after we took her in was **\$9,392**.

A dog's normal body temperature is 100° - 102.5° F.

To My Rescuers

By Kathy Blue

*I was alone, lost and really sad too,
I had nowhere to go and then they called you.
You quickly approved all that might save me.
They tried really hard but it was not meant to be.*

*My body was weak and I was called from above.
I heard rustlings of wings like those of a dove.
I received such care as they whispered goodbye,
and cradled my body as I soared to the sky.*

*Though I wanted to stay and give you my love,
I heard God calling my name high from above.
I now run in meadows, strong and pain free
eyes on the gate when you'll come to join me.*

*There is no longer sickness, hunger or care,
with a rainbow above and sweet smells in the air.
It's so beautiful here; many friends fill my day.
We frap and we doze and we run and we play.*

*I want you to know special people like you
who give of themselves; purpose solid and true,
will surely see Heaven and bask in the sun.
Reunions of Gold are the medals you've won.*

*So thank you for caring and please don't be sad.
I'll treasure the very short time that we had.
You all gave me your love right from the start
and now I return it straight from my heart.*

Chloe

Tips to Help AGR

With the holiday season of gift buying and entertaining fast approaching, please do the following if you have not already:

- Link your **Fry's Grocery** VIP card to **Arizona Golden Rescue**; **AGR** will then get a small % of your sales; your personal rewards points for gas and other products will not be affected. To sign up go to <https://www.frysfood.com/community/community-rewards>
- Come to any or all of our fall/winter events and check out **AGR's** unique, high-quality handmade merchandise – buy something!
- Purchase a 2025 calendar even if you don't use a calendar – there are interesting stories about some of our rescued dogs, as well as beautiful photography
- Donate items, especially gift cards, for our upcoming raffles and silent auctions
- Donate first-class postage stamps

MAGIC MOMENTS

By Denise Padavano and Deb Orwig

Magic Moments... when a stray Golden Retriever or Golden mix is spotted in a shelter kennel and does a happy dance when taken out; when a neglected backyard dog is surrendered by its owner to a member of our Transport Team and is delivered to a foster family that shows the dog love, comfort, toys and good-quality food for, perhaps, the first time in the dog's life; and the most magical of all... when a rescued dog meets his or her forever family and we see the dog's excitement and the sparkle in the family's eyes. As rescuers, we are privileged to share in these Magic Moments. Below are stories of Arizona Golden Rescue's Magic Moments from April 19 through July 10, 2024. All adoptions finalized after July 10th will be in the next issue.



23-074 Quinn is a male Great Pyrenees and is estimated to be 8 years old. He came to **AGR** as a stray from **Maricopa County Animal Care & Control** shelter in September 2023. **AGR** transporters Connie and Darlene picked him up and found him to be very gentle and sweet, but extremely thin and matted. After spending time at the County, which is noisy and stressful for any dog, **Quinn**

appeared to be tired and sad. He was taken to **Academy West Animal Hospital** where he weighed in at 75 lbs. He received the standard vetting, which included vaccinations, tests for valley fever and heartworm, and neutering. His bloodwork showed that his liver values were elevated, but after six weeks they were rechecked and were found to be normal. His values were rechecked in 3 months to make sure there were no other issues. **Quinn** spent three weeks in boarding until he was taken to fosters Donna and Berek, and their resident 13-year-old golden **Annie** in Phoenix. After meeting **Annie** with no issues, **Quinn** explored the large back yard with enthusiasm. While he was initially frightened of Berek, he now runs down the hall to greet him in the morning and then they both go outside to play. Fostering **Quinn** for 4½ months had been an absolute joy for Donna and Berek, so they decided to adopt him, their first foster failure! He has filled out nicely at 90 lbs. and his coat is magnificent! He loves being hugged, and enjoys running around, playing and snuggling. He is one of the gentlest and most good-natured dogs they have ever met! Donna and Berek are currently looking for a dog trainer that will help **Quinn** deal with his reactive behavior to other dogs when on a walk. Other than that, he is a very sweet boy. They take him to a coffee shop on Sunday mornings and sit outside. Even though there are other dogs and people, he just lies down and doesn't react at all! Donna wrote, *We introduce **Quinn** as our Great Pyrenees from Arizona Golden Rescue. It took him several weeks to trust us and he is still afraid of strangers. He loves to sit on the couch with us and cuddle and to sleep in our bed... as does his small Golden sister, **Annie**. Needless to say, it gets crowded. True to his Pyrenees nature, he likes to keep watch and does a perimeter check of house and yard every day. **Quinn** is such a sweet, af-*

*fectionate, loving boy. He and **Annie** get along well... Whenever she goes out the doggie door, he follows (through the patio door, as the doggie-door is a work in progress.) We leave Phoenix from May through October, so he doesn't have to deal with the heat. He enjoyed walking on the beach the other day, but the waves were scary. His nickname is "Marshmallow." He came to us at 70 pounds and topped out at 90... One of his favorite things to do is play with his dad. He gets energized and zooms around the house and yard! He actually jumps with joy! We have had to do a lot of research on his breed, because Pyrenees are not just big Goldenes. Now that he is a major part of our lives, we couldn't imagine not having our Great Pyrenees from Arizona Golden Rescue.*



23-075 Bodhi is a 3-year-old neutered Goldendoodle. It was a hard surrender by the owner, as **Bodhi** had been his buddy and hiking partner since he was 1½ years old. He was surrendered because while his dad was taking **Bodhi** for a walk, he started to pull causing him to fall, hit his head and cause a concussion. Also, since his fiancée is pregnant with a high-risk pregnancy,

he was concerned that **Bodhi** might knock her over – he is energetic, very strong, friendly, and needs obedience training and the owner had no time to do it. **Bodhi** received our standard vetting with all vaccinations and bloodwork and was found to have a large cyst-like mass on the side of his chest and a nodule on his spleen. The pathologist report indicated a mast cell tumor requiring surgery, which was done in October 2023. A follow-up report stated the splenic nodule was benign, and the mast cell tumor was low grade and not expected to spread, but the deep surgical margins presented a risk for the tumor to regrow locally. After seeing an oncologist, we decided that **Bodhi** would have two treatments of electrochemotherapy to kill residual tumor cells to reduce the risk of recurrence. After being boarded for 3 months, **Bodhi** was transported to fosters Cindy and Gary in Scottsdale while he received treatment for his cancer. After a month, **Bodhi** went to his new home in Tempe with Aricca, Scott and their 4-month-old Bernadoodle, **Frank**. Unfortunately, after a month **Bodhi** was returned

to Rescue – **Frank** wanted to play constantly, and since **Bodhi** wasn't interested, the puppy started to display excessive barking behavior that was difficult to control. So, **Bodhi** was transported back to fosters Cindy and Gary for another month before he found his forever home with Carmine and Marisa in Phoenix. Carmine and Marisa will take **Bodhi** to his follow up appointment in September to recheck his mast cell tumor area. The family commented that they love **Bodhi**, and he is doing well. They took him up North for the Memorial Day holiday, and **Bodhi** really enjoyed it. **Bodhi** has been through a lot, and now it's time to enjoy life with his new family! Marisa wrote: ***Bodhi** has been a wonderful addition to our family. He was a fit from the moment we met him. We feel so lucky to have been chosen to have him be part of our lives. He is such a sweet, easy-going pup and he brings us so much joy! He loves his morning walks and then likes to chill out for the rest of the day. He has a funny thing he does when we get home – he is excited to greet us and then promptly sticks his head between our legs for pets and comfort. We get a real kick out of that!* This story just reinforces our belief that the right family is out there somewhere for every dog we rescue, but that it may take a while to find that family!



23-084 Biscuit is a very sweet 3-year-old male Golden Retriever who came into Rescue in October 2023. After having him since he was 12 weeks of age, the family decided to surrender **Biscuit** to **AGR** because the husband was going back to work in the office. **Biscuit** usually spent the day with the husband at home but now would be alone all day. He is

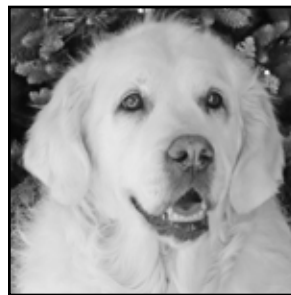
loveable, well-mannered, and calm. He has epilepsy that is being controlled with medication; the seizures seem to happen when he is sleeping. **Biscuit** received the standard vetting at **Four Legged Friends** which included vaccinations and tests for heartworm and valley fever; he was overweight at 109 lbs. **Biscuit** came in as a very frightened and anxious dog, and while being fostered by Connie and Nick in Glendale, also displayed fear of the dark. He was examined by **Eye Care for Animals** in Scottsdale and found to have normal vision. It was speculated that he may have had some traumatic episodes when the lights have been low, so the fosters have adjusted their lighting and always leave a light on for him. During the time with his fosters, **Biscuit** has lost weight, been neutered, and has become more self-assured, while enjoying playtime with the resident dogs. He was placed with Richard and Sara and their resident Golden, **Charlie** (who looks like his twin) in Phoenix. They are teaching **Biscuit** how to use the dog door, and their son says that he is **Biscuit's** human! Look for handsome **Biscuit** on the cover of our spectacular 2025 calendar.

23-088 Booker, a male Golden/Australian Shepherd mix, was estimated to be 1-year-old in October 2023. He was found as a stray

and came to **AGR** from **Pinal County Animal Care and Control**. **Booker** was described as very sweet, but timid and not wanting to eat. Once transporter Darlene picked him up and shared her lunch of peanut butter crackers with him, he started to warm up to her. **Booker** was vetted at **Academy West Animal Hospital** where he received the standard treatment of vaccinations,



tests for valley fever and heartworm, and neutering. After he had been in boarding almost a month, a home was found in Mesa that seemed to be a good placement. After settling in his new home for about a month and being placed on anxiety medication, **Booker** continued to periodically exhibit fear of the husband. As his anxiety continued, it started to manifest itself in new barking behavior. Sadly, they didn't feel they had enough patience to deal with his anxiety issues and decided to return him to **AGR**. While being boarded, **Booker** needed to be treated for Giardia and tapeworm. After two months, transporters Connie and Darlene took him to his new foster home with Colleen in Phoenix. They noticed he looked more relaxed and after arriving at his new home, explored the backyard. After three weeks, though, **Booker** became lethargic, started vomiting and not wanting to eat. He was taken to the ER, and it was discovered that he may have eaten pieces of his bed that he chewed up. After an exam and X-rays, the vet indicated that there was probably an obstruction in his intestines. Once he was given an IV for hydration, the vet said the object would move through his large intestines and be eliminated on its own. After recuperating from this procedure, **Booker** was ready for board-and-train for his anxiety. He spent three weeks in training and did very well once he returned home. Fostering **Booker** for 2½ months proved to be rewarding, and Colleen decided to adopt him – a foster failure, and a happy new life for **Booker**! We thank Colleen for very generously donating the entire cost of the training program.



23-101 Lilly was 12 years old when she came into Rescue in December 2023. Her owner passed away, and the family was not able to keep her. At that time, she was up to date on all her vaccinations and bloodwork, and had just started taking thyroid medication. Her former owner treated this sweet, lovely girl like a queen! Although slightly overweight from too

much good food, she has beautiful clear eyes and a gorgeous coat. When transported to **Academy West Animal Hospital**, **Lilly** was checked by the vet and diagnosed with osteoarthritis. She also had dental disease that required several teeth to be extracted. She was placed on arthritis medication, and once thyroid levels are stable, she will be scheduled for a dental. **Lilly** was placed with foster Elaine in Sun City West for three weeks but had to be returned

to Rescue due to family health issues taking Elaine back to Ohio. **Lilly**, who had already lost 6 pounds on the green bean diet, had to wait just another 1½ weeks to find a loving and caring home with Scott and Sue in Scottsdale. She was greeted with lots of love and explored her new yard with enthusiasm! **Lilly's** new family took her for a dental and after four extractions, she is feeling better. During the dental, she had a mild hypotension incident and a second-degree heart block. She will need to go back to the vet in a month for follow-up x-rays, and additional teeth extractions. This sweet old girl is happy and enjoying her senior years with lots of attention and TLC! Sue related: *Since January, Lilly has been a delightful member of our family. She brightens our days with her antics. The highlight of her day is starting the morning with a walk. She doesn't hurry and is very happy exploring every bush! Lilly loves people and is our welcoming committee every time someone visits our house. She also adores getting her tummy rubbed. We can't picture our house without her.* Families who adopt our old rescues deserve a special place in our hearts!

24-002 Bentley is a 10-year-old neutered male Golden/Lab mix who came into Rescue in January 2024. He is very sweet, calm, and friendly to dogs and cats. The owner had had **Bentley** since he was 10 months old and needed to surrender him – since she has ALS and had to move to a group home for care, she was unable to take him. He was originally adopted from **Arizona Golden Retriever Connection** when he was young and was treated for parvo. Since **AZGRC** is no longer in business, the owner was referred to **AGR**. **Bentley** was placed with fosters Paige and Jeff, their resident male dog, **Binks**, and cat in Scottsdale. This change was difficult for **Bentley** – he was exhibiting signs of anxiety through whining and pacing. After being very patient and attentive to **Bentley**, the fosters saw a positive change after 2 weeks. **Bentley** seemed to be settling in, showed less anxiety and was eating better. While being with the fosters for 2 months, **Bentley** developed a cough and had difficulty breathing. Upon taking him to the vet and ER several times, and having x-rays and an ultrasound, it was found that **Bentley** had pneumonia. This condition landed him in the hospital for several days on IV antibiotics. He has since recovered and will have a 3-month follow up with the vet. In the time **Bentley** was with his fosters, they came to love him and decided to add him to their family! Paige has related: *He has really come around now that he is feeling better. Bentley is my shadow. He gets along well with our older dog and leaves the cat alone. Bentley definitely gravitates towards women but really loves everyone. He has fit into our family perfectly. We adore everything about our sweet boy. He loves his furry and human siblings, morning walks, car rides and his home-cooked dog food. He is cautious around some new people but is one of the most loyal dogs I have ever had the pleasure to know. Bentley is never more than a foot*



away from his people. Thank you, **Arizona Golden Rescue**, for bringing him into our lives! We are so happy **Bentley** has found his new forever home!



24-007 Dusty and **24-008 Sundance** are 10-month-old spayed female Golden Retrievers that came into Rescue in January 2024. Being littermates, they are bonded to one another. Their owner moved out of the country and left the dogs with her dad who has health issues. Handling these two young dogs had become very difficult for him, so they

were confined most of the day in an outside covered kennel that had a dirt floor. Transporters Connie and Nick said they were badly in need of baths, so when delivered to **Academy West Animal Hospital**, they were first taken into the salon for grooming. Once cleaned up and gorgeous, they were ready for anything! Both girls needed our standard vetting with vaccination updates, tests for valley fever and heartworm, and spaying, which was performed when they turned one year old. They both needed treatment for Giardia. After two months, these two beautiful girls were placed together with Adriana and Travis in Glendale. Upon entering their new home, they each had toys and a new bed waiting for them. Once outside, they explored their new grassy yard, running and playing with each other! After a little over a week, it was noticed that **Sundance**, now called **Sunny**, was squinting. She was taken to the vet and the pressure in her eyes was slightly elevated, indicating a possible scratch. She was prescribed antibiotic ointment and her eyes have improved. **Dusty** and **Sunny** are enjoying life together in their new forever home, and training is in the near future for these girls! Travis wrote: *Dusty and Sunny have been wonderful since they joined us in our household.*



Their constant excitement and cute little faces are always a joy to see when we get home. We have only had them for a couple of months, but they are already an important part of our family. Sunny is constantly looking for fun and will always try to get

Dusty to join her. Dusty, meanwhile, is usually trying to eat bushes or escape her sister by jumping onto the table. We love seeing them chase each other around the yard with zoomies. Whenever we come home, Dusty is always waiting with as many toys as she can fit into her mouth – so far, her record is three. Meanwhile, Sunny is always so excited her whole-body wiggles.



Though our mornings now start a little earlier than they used to,

we are happy to get out with them on walks and trips to the dog park. They are becoming more social with other dogs and are starting to make new friends. Seeing the two sisters get more comfortable and play with each other is amazing. They still look out for one another and have a great bond. We love our Golden girls!



24-013 Milu is a small 8-year-old Golden mix whose owner was going to travel and couldn't take him. He had not had any vetting for 5 years, so we had to have our standard everything done. The vet detected a significant heart murmur and noticed that **Milu** needed a dental, which was performed with cardiac protocols. **Milu** was recently adopted by Sarah in Phoenix.

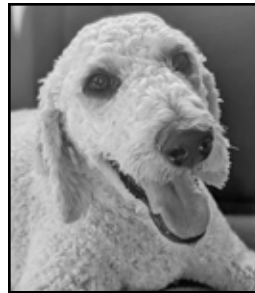
She lives in an apartment, and at about 20 lbs this little boy is just the right size for that kind of dwelling. Sarah told us her nephew affectionally called him "Meatloaf" (he's loaf-shaped, so it fits). He's very chill but gets the zoomies and acts like a puppy – for about 5 minutes. He likes to unstuff toys and will hide them in various places. He is a really good boy – barks only occasionally. He likes to be with Sarah, and really loved her nephews when they visited. He is the perfect size, a sweetie and a cutie. He has gotten along well with other dogs at a local dog park, so Sarah intends to bring him to our dogs-welcome events starting in the fall. We look forward to meeting him!

24-014 Buddy/Gorgeous George/Bear is a male Golden Retriever estimated to be about 7 years old. He was found as a stray at a General Store in Waddell. The finder, who had called him **Buddy**, kept him the required seven-day stray hold, but the owner did not come forward. During that time, he was scanned for a chip, but none was found. They



also posted him on Next Door, PetFinder, Craigslist, and at the store where he was found. The finder described him as sweet, kind and loving attention. He was taken to **Academy West Animal Hospital** where he was vaccinated and tested for valley fever, tick fever and heartworm. He tested positive for tick fever and was put on medication. When he was cleared, he was scheduled for neutering. After being boarded for a month, **Gorgeous George** (named by Connie) was taken to his new forever home with Ken and Marilyn and their resident 8-year-old Golden mix **Cody** in Phoenix. **Bear** had been at his new home for about 10 days when he started to show some difficulty with walking. Bloodwork and X-rays were done at an ER and showed arthritis in his elbows, with one side being very inflamed. He was placed on pain medication and is now doing fine. Ken and Marilyn are very happy with **Bear** and say he is a lovey, cuddly boy, and loves to be petted and held. They com-

mented: After our senior rescue **Sam** died from cancer, we knew we wanted to get another friend for our **Cody** and were thrilled to hear about **Bear**. We had no idea how much joy and laughter this goofy sweet boy would bring to our family. He and **Cody** got along right away and now play together all the time. They love running outside together in the early morning and lounging together when they are tired. **Bear** came to us well trained, loves to EAT more than anything and would be happy to be loved on 24 hours a day. We are very grateful we were chosen to adopt **Bear**. He is such a happy boy; we love him so much already, and **Cody** is very happy to have a buddy that loves to play.



24-015 Kenny, a 2-year-old spayed female Goldendoodle, was surrendered in March 2024. This was a difficult surrender because her owner had **Kenny** since she was one year old. He had to give her up because his fiancée has two Pit Bulls that are not dog friendly. **Kenny** is friendly, sweet, gentle, and likes to cuddle. She had displayed submissive peeing when the owner came home from

work and was excited to see him. **Kenny** received the standard vetting at **Academy West Animal Hospital**. She was diagnosed with valley fever and started on medication. After being placed with Susan in Phoenix for four days, **Kenny** was returned to **AGR** – Susan had decided to move to Wisconsin with her sister who recently found a house, and due to **AGR's** policy of not adopting to out-of-state residents was unable to take **Kenny**. **Kenny** was then placed with fosters Daniel and Rose and their three Goldendoodles in Phoenix. **Kenny** was with her fosters for less than two weeks when she found her way into Kathleen's heart in Buckeye. It was love at first sight! When a follow-up call was made by Darlene, an **AGR** transporter, Kathleen said that **Kenny**, now called **Kenna**, is a perfect little angel! She is eating and taking her meds as directed. She sleeps all night in bed with Kathleen, and there have been no issues with submissive peeing. **Kenna** gives a small bark and goes to the door to let her know that she needs to go out. When Kathleen's sister-in-law came over for a visit, she said that **Kenna** was great. She did not jump or become overly excited. **Kenna** appears to be a great fit for Kathleen!

24-016 Winston, a neutered 10-month-old English Cream Golden Retriever, came into Rescue in March 2024. He was surrendered because the owner's female resident lab didn't like him and growled at him all the time. **Winston** is very respectful and gave the other dog space but is very shy and fearful. Transporter Connie took him to **Academy West Animal Hospital** for vetting and commented that **Winston** is one of the most terrified dogs she has ever met. **Winston**



received vaccinations, bloodwork was done, and he was neutered in June. After 2 weeks of boarding, Connie took **Winston** to her house for photos. Once he met her resident dog **Reggie**, his tail wagged, and he followed him around the yard doing zoomies and wanting to play. **Winston** enjoyed some treats and loving from Connie and Nick, which he had previously shied away from. After 1½ months, **Winston** was transported to his forever home with Michael, Brenda, their two resident dogs, **Noah** and **Tabitha**, and 9 cats in Surprise. Once at his new house, **Winston** started to wag his tail and ran around the backyard with his new siblings! As soon as he went inside, **Winston** was greeted by several resident cats and was happy to meet them. Connie spoke with Brenda, and she said: *Winston is doing well. He is really well-suited for our home. He is so cute when I go to feed him. He goes to his bed and sits all prim and proper and happy.* Enjoy your new life, **Winston**, with your numerous furry friends and family!



24-017 Pippen was only 12 weeks old when he came to **AGR** in March 2024. He is an English Cream Golden and was not yet neutered due to his young age. **Pippen** was surrendered because when he was just 9 weeks old, he lived with young children who tried to take food away from him, and one of them was bitten in the scuffle. The family brought

in a trainer to work with **Pippen**, but the dad felt it was best if he was returned to the breeder. The breeder was unable to keep him, so he was surrendered to Rescue. **Pippen** received vetting with vaccinations and bloodwork, and was placed with fosters Fred and Jill in Phoenix for three weeks. Since they were going on vacation, he went to fosters Connie and Nick in Glendale. After another three weeks, **Pippen** found his forever home with Denita and Dave, and resident dog **Abbey** in Scottsdale. When **Pippen**, now called **Charlie**, met his new family, it was love at first sight and **Abbey** was very happy to have a playmate. Denita related: *Charlie is a very smart little boy – within 24 hours of his arrival, he learned to open all the lever-handle doors! He's into everything all the time, a typical puppy! Two-year-old Abbey is mentoring Charlie, and he is fast becoming a well-behaved boy. Charlie and Abbey play well together, but Abbey is the boss. Charlie likes to go upstairs and look out the window to survey his kingdom. He also likes to watch TV, especially animal shows. He is currently learning how to swim. Charlie is such a joy. We love both of our rescues!* The family has been given an adoption addendum for **Charlie's** neuter to be done when he is about a year old.

24-018 Daisy is a one-year-old spayed female Goldendoodle who came to **AGR** in March 2024. **Daisy** was found as a stray in Phoenix – she walked into a family's yard and had on a collar and leash but no tags. They tried to find the owner with no results. The wife took her to the vet because **Daisy** was covered



with cactus and needed to be sedated and clipped. During grooming, she was accidentally cut on one leg and needed to have two staples. While at the vet, she was scanned for a chip, but none was found. The vet said she probably had been a stray for quite a while because she was very skinny, matted and had fleas. The family was unable to keep her because they

have a 2-year-old, a baby on the way, 2 dogs and a cat. Since boarding wouldn't take her until she was treated for fleas, transporter Darlene graciously volunteered to foster **Daisy**. While on a walk, **Daisy** tried to catch blowing Bougainvillea flowers and was fascinated by the birds flying overhead. Although she had been through a lot in her short life, her puppy playfulness came out! She is described as very sweet, loves balls and squeaky toys, and likes to be petted. After two days, **Daisy** was taken to **Academy West Animal Hospital** for the standard vetting and grooming. She will be spayed at **AGR's** expense in July. **Daisy** spent a month in boarding before she found her forever home. Transporter Darlene drove **Daisy** to her new home with Stephanie, Kirk, and their three daughters, and resident Standard Poodle, **Honey**, in Peoria. **Daisy** was greeted enthusiastically by **Honey**, who wanted to play right away, but **Daisy** was more interested in investigating the large one-acre back yard. Once inside, both dogs seemed a little calmer and settled. Five minutes after Darlene left the house, Stephanie texted that **Daisy** and **Honey** were playing together! **Daisy** is now safe and happy in her new home! From Stephanie: *Daisy met our family in May and has fit right in! She got a new best friend, Honey, and three little humans who adore her. Daisy sleeps in bed with Mom and Dad, loves her toys and loves to run and roughhouse with Honey all day long. Arizona Golden Rescue was a joy to work with – they definitely have the dogs' best interest at heart.*

24-019 Willow (in back in this photo) and **24-020 Tucker** are 2-year-old mini-Goldendoodle littermates (female and male, respectively, and both already sterilized) that we refer to as “the bookends” because they look so much alike. Their owner was moving out of state and couldn't take the dogs. They had



their rabies vaccination in February, but we had to have all the other vaccinations done, plus tests for heartworm and valley fever. They were placed with Jane in Scottsdale. Transporter Connie said: *Willow was originally a little shy when I picked her up but seems to have gotten over that. Jane was ecstatic and will spoil them*



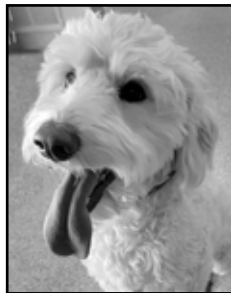


Tucker

rotten, I am sure. We went over the contract – she is a retired attorney and said the contract was great, something we always are pleased to have confirmed. Jane wrote: **Willow and Tucker** bonded with me within a month. They are so smart and affectionate. **Tucker** is more assertive and rambunctious, **Willow** is shy and retiring. She insists on eating in her crate and is much better behaved on walks. They love

their toys, especially a small stuffed llama. They regularly watch television and bark at every dog food commercial. They have been swimming, love the small dog park – so many other Doodles to encounter – and eagerly await their two daily walks. Both were initially very picky eaters, but we have finally hit on their favorites. Dog beef jerky is always a hit, and both get a Greenie each day. Sure, they bark a lot, but the darling facial expressions delight me constantly. I could not ask for two more adorable companions and cannot imagine living without them.

24-024 Stella, a 2-year-old Goldendoodle, is a return-to-Rescue (formerly **23-003 Bella**). The original adopters got a puppy so she would have a playmate and she got overprotective of the puppy, not only with the other resident dog but with them, so they sent her to a 4-week boot camp for training. However, when she came back she attacked the 14-year-old Chihuahua/Dachshund, a dog that she had lived with since her adoption, causing damage that required at least an overnight stay at the vet. Before this incident she was described as wanting to please and very loving. They suggested that she would do best in a no-other-dog home, which we found with Jacob in Phoenix. She had been started on fluoxetine, an anti-anxiety drug. Jacob was patiently waiting for her when Connie brought her to him. He was instantly smitten. After dinner, they went for a walk and he said she was very frightened, nervous and on alert when seeing or hearing other dogs, almost to the point of being frantic. They did meet one neighbor with a friendly dog and that went well. Jacob had people over for breakfast and she did fine with them. It took **Stella** a couple weeks and a change in her anti-anxiety medication before she really started to relax and feel safe with Jacob and the many friends he's had come over.



The Parvo Puppies

On April 24, 2024, we received a call from **Blue Pearl Emergency** in Peoria– they said a Good Samaritan had “found” four sick Golden Retriever puppies and brought them to the ER. The two males and two females were thought to be 2 to 3 months old. One of the puppies was quite ill – was vomiting and had bloody diarrhea; the other three had milder symptoms. The sickest one tested positive for parvovirus, so all the puppies had at least been

exposed. Would we take them? Of course. Transporter Connie picked them up at the ER and took them all to **Animal Medical & Surgical Center** for 24-hour specialty emergency care. All of the puppies tested positive for parvo. There is no specific treatment for parvo – either a puppy is going to survive the disease or won't. However, supportive care is given with fluids, anti-nausea medication, nasal feeding tubes and antibiotics to ward off possible secondary infections. Fortunately, all four puppies survived. All have been adopted with addenda given for neuters or spays when the puppies are about one year old. They are all in the process of being fully vaccinated, but are too young to need testing for valley fever or heartworm. The two girls were placed as soon as they were well enough to leave the hospital (one in two days, one in three). The boys were both fostered by our Intake Co-manager, Sharon, who had fostered parvo puppies for **AGR** in the past. She was familiar with the clean-up protocol – pick up poop immediately and douse the area with bleach. The virus is transmitted in the feces and can remain viable in the environment for up to a year, so the adopters were all cautioned to use the same protocol.

24-025 Chandler was renamed **Che** by his adopters, Amanda and Jason, who live in Chandler. He was the largest of the four puppies, but he was also the sickest. He was at **AMSC** for 7 days until he was well enough to go to Sharon's for foster care. She already had **Ross** with her and the two boys enjoyed playing with each other. **Ross** left after just



a couple days; Sharon reported that **Chandler** started barking at stuffed toys trying to get them to play with him! He became more energetic by the day. However, he had a recurrence of the vomiting and diarrhea and had to visit the ER again. He was also kept in foster care until his soft stools resolved. His first night at his new home was rough – he spent the night barking in the crate even though Jason was nearby on the couch. Sharon had coached the family that **Chandler** would nap after eating but she would wake him up at least 30 minutes before bedtime and play hard with him to tire him out. Apparently this procedure worked because we had no more reports about the puppy not sleeping at night. Amanda reported: **Che** has brought so much love and joy into our house. He enjoys going to work with Jason (in his home office) and swimming is a favorite! Though he does enjoy the pool, he'll choose a mud puddle anytime! He is a lover and quickly enchants anyone who comes over. We can't wait to see **Che** grow into a strong young dog and this Monday (07/08) he'll be able to go 'out and about' with us and we can't wait to see him on that adventure! Adventures are endless with puppies, but also priceless experiences!

24-026 Ross was renamed **Charlie** by his adopters, Adam, Cassie and mom Emily in San Tan Valley. He had a brief but fun reunion with **Phoebe** at Sharon's and spent several days playing with **Chandler** at Sharon's once the latter was discharged from

the hospital. He has recovered well and by now has been fully vaccinated and micro-chipped. Adam wrote: *Our 4-month-old pup is already an integral part of our family. Despite his young age, he's full of energy and curiosity, which sometimes leads him to mischievous adventures, like sneaking up on the counter for a forbidden snack. Learning to swim has been a bit of a challenge for **Charlie**, but with our encouragement, he's gradually becoming more comfortable in the water. His playful nature is evident as he loves engaging with all of us, especially during the visits from our nephews, ages 6 and 3, who adore playing with him. Potty training has been a success, and **Charlie** has mastered the use of the dog door, giving him the freedom to explore the back yard. Baths and the power dryer are still new experiences, but he's adapting well. With a loving family consisting of my mom, my wife, and me, **Charlie** is set for a life filled with love, play, and endless adventures.*



24-027 Phoebe, who was renamed **Riley** by her adopters, Nita and Gary in Peoria, was the first to recover from the parvo infection. She was fostered by Sharon for a couple of days. She did not want to eat the first day, so the vet recommended rubbing some Karo syrup on her gums to get some glucose into her – that

did the trick. She had a joyful but brief reunion with **Ross** when **Ross** was brought to Sharon's for fostering. When Connie transported the puppy to her new home, she had to insist that the lantana and firesticks in the back yard be fenced or removed. Both are toxic to dogs, and since puppies are prone to chew on anything and everything, **AGR** has the policy of not placing puppies in homes where they could get into such plants. The adopters did fence off the plants within a day. After the puppy's first vaccine, Nita reported: ***Riley** is playful, smart and the vet said she's doing great!*

24-028 Rachel was transported directly to her new home with Tammy and Aaron in Phoenix. The vet tech had said: *She's the smallest one (of the four) but has the biggest attitude!* Transporter Connie reported: ***Rachel** serenaded me all the way from **AMSC** to her new home. She was quite comfortable there. They have a foster dog that is living in the back yard right now. She has puppy mill dog behavior and is very frightened of people; they are letting her de-*



*compress. I saw her and she seemed interested but did not attempt to approach me. They did say that someone else came to the home with their dog and that the dogs sniffed noses with no issue. Puppy **Rachel** will be a handful, I think! Hopefully the foster dog will come around soon. The next morning, Tammy told Connie: *We had a great night! She pooped this AM and it was normal. She's eating and drinking well; no throwing up. She slept through the night except when we had midnight meds. She is playful and full of love. Thank you so much for bringing this sunshine into our lives. So much sunshine they renamed her **Sunshine!** A couple days later, though, the loose stools did recur, so the puppy had a visit to the vet and was given a probiotic and a different food. Both helped, and three days later Tammy reported: **Sunny** is doing great. **Sunny** loves the dog that had been a stray. Both dogs have really bonded and are doing wonders for each other. **Sunny** might make a good therapy dog when she grows up!**



24-029 Odie, a purebred Golden male, was only 9½ weeks old when he was surrendered by an owner who was having an allergic reaction to the puppy. The owner also mentioned that he was gone a lot, had never had a puppy before, and didn't realize how much time was needed to take proper care of the dog. **Odie** was fostered for a short time by Patty in

Phoenix, then was transported to Danielle and Greg in Scottsdale. What a great environment for a puppy – another puppy to play with as well as two kids. He needed all his vaccinations and treatment for Giardia. After just a couple days, Greg told us that **Odie** is pretty calm for a puppy. He was playing with their other dog, **Bonnie**, who is about the same size. He also mentioned that puppy **Odie** loves to eat – of course, he's a Golden puppy! After finalization, Danielle wrote: ***Odie** is very playful and silly, he loves to play catch and chase the children and our other dog around. He dances with my son by putting his paws up on his back. He is rambunctious and loves to run and play. He chews on things and always has to have something in his mouth, but he is also a good listener and definitely aims to please!* Happy new life, **Odie!**

Possible Remedy for Storm Anxiety

Pat Hastings, a respected AKC dog show judge, breeder and handler, swears by this remedy for dogs with storm anxiety. Get a bottle of peppermint oil from the health food store. When a storm is approaching, put a drop or two of the oil on the bottom of each foot of the dog, right on the pad. While no one knows why this works, once the oil is on for a bit, the dog seems to no longer care about the thunderstorm. And the dog will smell very nice! Others besides Ms. Hastings have testified that this home remedy works. Surely, it is worth a try!

OVER THE RAINBOW

We honor the memory of our human and canine companions who have passed on...



10-043 Jackson Guilbault



13-100 Buddy Buechting



14-064 Sarah Gora



15-097 Casey Bailey-Correll



17-018 Barney Lagerman



20-008 Hope Snedden

21-002 Charlie Robertson-Krcil



12-014 Riley Ingram



14-036 Toby Burns



15-031 Charlie Watkins



15-099 Oakley Bakke



The Rainbow Bridge

There is a bridge connecting Heaven and Earth. It is called the Rainbow Bridge because of its many colors.

Just this side of the Rainbow Bridge there is a land of meadows, hills and valleys with lush green grass.

When a beloved pet dies, the pet goes to this place. There is always food and water and warm spring weather. The old and frail animals are young again. Those who are maimed are made whole again. They play all day with each other.

There is only one thing missing. They are not with their special person who loved them on Earth.

So each day they run and play until the day comes when one suddenly stops playing and looks up! The nose twitches! The ears are up! The eyes are staring! And this one suddenly runs from the group!

You have been seen, and when you and your special friend meet, you take him or her in your arms and embrace.

Your face is kissed again and again and again, and you look once more into the eyes of your trusting pet.

Then you cross the Rainbow Bridge together, never again to be separated.



21-051 Charley Cardinal



22-059 Arti Jacks



23-055 Allisson Guilbault



24-042 Chloe Guilbault



Watson Axne



Rufus Davis

And

Rick Brown

Beloved husband of AGR member Cindy Brown

HERE and THERE

Event in June 2024:
Pet Supplies Plus Moon Valley Meet-and-Greet

By Denise Padavano

The **Pet Supplies Plus** Phoenix in Moon Valley invited **AGR** to their Summer Pet Party event indoors on June 22nd from 1PM - 4PM. They have a Community Room in their store where they host monthly in-store events, and occasionally host 1-2 monthly adoption events with different Rescues. We were invited by Silvia C., the event coordinator, to attend the event with our dogs in hopes of attracting potential adopters by sharing our literature and information. We set up in their Community Room, which allowed 5-6 dogs to hang out



Anne Pappas with Lilah, Trishia Murphy with Rosie, Denise Padavano with Charlie, Dean Mortimore with Sugar, Deb Orwig with CaliGirl (lying down), and Jeanne Wegener with Asher

comfortably with space to spare. Dean Mortimore brought **Sugar**, Trishia Murphy came with **Rosie**, Deb Orwig brought **Asher** and **CaliGirl**, Denise Padavano came with **Charlie**, and Anne Pappas brought **Lilah**. Jeanne Wegener helped set up and handle Deb's **CaliGirl**. An area was set up for customers to have their dog's photograph taken featuring a Hawaiian theme backdrop. Each of our dogs had a chance to enjoy posing and having their photo taken! We had quite a few store customers stop by to visit, talk about Rescue and love on the dogs. We did receive one completed application from the event from a woman who specifically came because she knew we would be at the event. The dogs wore donation vests, and we collected **\$70** for our time. **AGR** members had time to visit with each other and enjoy sharing our story with the public. Silvia enjoyed having us at the store and has invited us back with our dogs to participate in future events at our convenience.



Denise Padavano with Charlie



Rosie is Lilah's mother – they always get excited when they have a reunion!



Sugar Mortimore



Handsome **23-084 Biscuit**, with his gorgeous red-gold coat and wearing a purple bandanna, graces the colorful cover of our upcoming 2025 Calendar, *A Touch of Gold*. As usual, Connie McCabe has done a masterful job creating the calendar and taking most of the photos therein. We have held the price at \$12, plus postage if you need one mailed; postage, which increased in July, will cost \$3.00 for one, \$4.50 for two, \$7.50 for four; more than 4 will be negotiable. Calendars should be available at our upcoming fall and winter events. Order yours now with the Calendar Order Form enclosed with this newsletter – if you want it/them mailed, they will be as soon as the calendars are back from the printer. Remember, Amber, Topaz, Pearl and Gold members get one free.

Squeaky Toys

The excitement your dog feels when he plays with a squeaky toy is instinctual. It goes back to a time when dogs had to hunt and kill prey to survive. The squeaky noises of prey animals would help dogs locate their prey, and the noises the prey animals made during the kill were very satisfying to a hungry dog. "Hunting" a squeaky toy gives your dog the same type of satisfaction. And the more the toy squeaks, the more excited your dog becomes. That's why so many dogs will try to "kill" the toy by destroying it and pulling out the squeaker. When you purchase a squeaky toy for your pet, be sure to put safety first. Finding the right squeaky toy can be hard work. First, examine the toy and confirm that it does not have a lot of pieces that can be chewed off and swallowed. Next, look for features (eyes, nose, etc.) that are embroidered onto the toy, not attached. Check the seams and fabric to determine how easily your dog might chew through them. Swallowing squeakers or stuffing can be life-threatening and can happen very quickly. For this reason, it is very important to always supervise your dog's play. From Dr. Jon's petplace.com column

Goal: Keeping Pets Safe
An Ounce of Prevention is Worth
a Pound of Cure

Be mindful of exposing your furry friends to substances and other items that may prove harmful. Every year thousands of animals are hurt or seriously injured by poisonous items, many as seemingly innocent as a plant. To help pet owners identify potentially dangerous objects, the *ASPCA* has the following tips. Visit <http://www.aspcapet-care/animal-poison-control> for more information.

1) Dogs can eat most foods that humans can eat. However, there are several foods you should **NEVER give to dogs**, because they are toxic. Toxic foods include ALCOHOL, AVOCADOS, CHIVES, CHOCOLATE (including baking, semi-sweet, milk, and dark), COFFEE (grounds, beans, chocolate-covered espresso beans), GARLIC, GRAPES (as few as seven grapes have been reported to cause death in some dogs), HOPS (used in home beer brewing), MACADAMIA NUTS, MOLDY OR SPOILED FOODS, ONIONS (including dried onion flakes, onion powder and onion salt), RAISINS, RHUBARB LEAVES, TEA (caffeine), SALT, TOMATO LEAVES AND STEMS (green parts) XYLITOL (a sweetener used in gum, candy, baked goods and toothpaste) and YEAST DOUGH. You should not give your dog turkey except in small quantities (“just a taste” is OK). Also, dogs do not produce significant amounts of lactase, the enzyme that breaks down milk sugar (lactose), so limit milk products. In addition, keep salt intake to a minimum (i.e., keep those salty chips and fries to yourself!).

2) Keep all medications out of your dog’s reach, preferably in closed cabinets. Pain killers, cold medicines, anti-cancer drugs, antidepressants, vitamins and diet pills are human medications that can be lethal to animals even in small doses.

NEVER give your dog any medication without first consulting your veterinarian. Medications that should NOT BE GIVEN to dogs include aspirin (except coated), acetaminophen, and ibuprofen. Aspirin toxicity may cause gastrointestinal problems, respiratory difficulties, neurological problems, bleeding disorders and kidney failure. Ibuprofen also causes bleeding ulcers, and in increasing doses eventually leads to kidney failure that is fatal if not treated early. Symptoms include poor appetite, vomiting, black tarry stools, vomiting blood, abdominal pain, weakness and lethargy. Dogs are less sensitive to acetaminophen than cats are. A 50-pound dog would need to ingest more than seven 500 mg tablets to suffer toxic effects. If you ever suspect that your dog has ingested any amount of these medications (or any other human meds), please contact your family veterinarian or local veterinary emergency facility immediately. To ensure the safety of your dog, give him only medications prescribed by your veterinarian and only in the dosage prescribed.

3) Be aware of the plants you have in your home and yard. Some plants, such as Sago Palm, Oleander and Rhododendron, can be toxic to pets if ingested. Lilies can be especially toxic to cats.

4) Keep cleaning agents stored properly. Cleaning agents have a variety of properties. Some may only cause mild stomach upset, but others can cause severe burns of the tongue, mouth and stomach.

5) Be careful when using rat and mouse baits. The most common active ingredients found in rat and mouse baits are anticoagulants, which interfere with blood clotting processes. Ingredients of this type include warfarin, brodifacoum, bromadiolone, difacinone and difethialone. Other formulations can contain bromethalin, cholecalciferol, zinc phosphide or strychnine. Some baits also contain inactive ingredients meant to attract rodents, and these ingredients can sometimes be attractive to pets as well.

6) Always read the label *first* before using flea products on or around your pets. Some flea products for dogs can be deadly if given to cats.

7) Common household items can be lethal to animals. The essential oils in liquid potpourri could be quite hazardous to pets. Due to the risk for serious illness, pet owners should place potpourri simmer pots and unused liquid in rooms where pets cannot gain access. Consider using relatively safer alternatives, such as plug-in or solid air fresheners used in out-of-reach locations. Other items potentially dangerous to pets include mothballs, pennies, tobacco products, homemade play dough, fabric softener sheets, dishwashing detergent, and batteries.

8) Automotive products such as gasoline, oil and antifreeze should be stored in areas that are inaccessible to your pets: As little as one teaspoon of antifreeze can be deadly to a cat. Less than one tablespoon can be lethal to a 20-pound dog.

9) Be sure your pets do not walk on lawns or in gardens treated with fertilizers, herbicides or insecticides until these have dried completely. Always store such products in areas that are inaccessible to your pets. If you are uncertain about the usage of any product, contact the manufacturer for clarification before using it.

Mental Game for a Healthy Dog

Where Is It? Hide the dog’s favorite toy in the house or yard. Say, “Where is your [toy*]?” or “Go find your [toy*].” Help your dog look for the hidden toy and find it; say, “Wow, look what you found!” When the dog has found the toy, lead him to the bin toys are stored; tell the dog to “leave it” or “put it away.” Give the dog a small treat each time as you say, “Leave it” or “Drop it” (exchange the treat for the toy). Soon, the dog will pick up and put away his own toys on command!

21 Symptoms You Should Never Ignore in Your Dog

Submitted by Shelly Culver, Vet Tech at *Four Legged Friends Animal Hospital*
reprinted with permission

There are serious symptoms that should never be ignored in your dog. A symptom is defined as "any problem that can indicate an underlying disease" and may be the first clue to the presence of a life-threatening problem in your dog. Here is a list of 21 symptoms that should never be ignored if you see them from your dog.

1. Pacing and Restlessness. In dogs, pacing and restlessness can indicate pain, discomfort and distress. Restlessness can be associated with a condition called "bloat" (gastric torsion), which is a serious condition caused by the abnormal dilation and twisting of the stomach. Bloat commonly occurs in large breed and deep-chested dogs and can quickly become fatal.

2. Unproductive Retching. Attempting to vomit but being unable to bring anything up is also a common sign of bloat in dogs. Contact your veterinarian immediately.

3. Collapse or Fainting. Acute collapse is a sudden loss of strength causing your dog to fall and be unable to rise. Some dogs that collapse will also lose consciousness – this is called fainting or syncope. Some dogs recover quickly and look essentially normal seconds to minutes after collapsing, while others stay in a collapsed state until helped. All reasons for collapse and fainting are serious and should not be ignored.

4. Not Eating or Loss of Appetite. Anorexia is a term used when an animal loses his appetite and does not want to eat or is unable to eat. There are many causes for "loss of appetite"; it is often the first indication of illness. Regardless of the cause, loss of appetite can have a serious impact on an animal's health if it lasts 24 hours or more. Young dogs 6 months of age or less and toy breeds are particularly prone to the problems brought on by loss of appetite.

5. Weight Loss. Weight loss is a physical condition that results from a negative caloric balance. This usually occurs when the body uses and/or excretes essential nutrients faster than it can consume them. Weight loss is considered clinically important when it exceeds 10% of the normal body weight and is not associated with fluid loss. There are several causes for this, some of which are very serious.

6. Breathing Problems. Respiratory distress, called dyspnea, is labored breathing, difficult breathing and shortness of breath. This can occur any time during the breathing process, during inspiration (breathing in) or expiration (breathing out). When your dog is having trouble breathing, he may not be able to get enough oxygen to his tissues. Additionally, if he has heart failure, he may not be able to pump sufficient amounts of blood to muscles and other organs. Dyspnea is often associated with accumulation of fluid (edema) in the lungs or chest cavity (pleural effusion). Pleural ef-

fusion can lead to shortness of breath and coughing and should be evaluated immediately.

7. Red Eye. A red eye is a non-specific sign of inflammation or infection. It may be seen with several diseases involving parts of the eye, including the external eyelids, third eyelid, conjunctiva, cornea and sclera. It may also occur with inflammation of the structures inside the eye, with glaucoma (high pressure within the eye), or with certain diseases of the orbit (eye socket). Either one or both eyes can become red depending on the cause of the problem. Some of the possible causes can be serious and ultimately cause blindness.

8. Jaundice. Jaundice, also referred to as icterus, describes the yellow color taken on by tissues throughout the body due to elevated levels of bilirubin, a substance that comes from the breakdown of red blood cells. There are several causes for jaundice, and regardless of the cause, jaundice is considered abnormal and serious in dogs.

9. Trouble Urinating. Trouble urinating can include straining to urinate, frequent attempts to urinate, and discomfort when urinating. Discomfort may be demonstrated as crying out during urination, excessive licking at the urogenital areas or turning and looking at the area. There are several underlying causes. Some of the causes if left untreated can result in death in as little as 36 hours.

10. Drinking and Urinating Excessively. These signs are often early signs of disease including kidney failure, diabetes mellitus, thyroid gland problems, and uterine infection (pyometra), as well as other causes. Dogs normally take in 20 to 40 ml per lb of body weight a day (237 ml = 1 cup). If you determine your dog is drinking excessively, make an appointment with your veterinarian.

11. Fever. A fever is defined as an abnormally high body temperature resulting from internal controls. It is believed that fever is a method of fighting infection. The body resets the temperature control center of the brain to increase the body's temperature in response to an invasion of foreign matter such as bacteria or a virus. Normal body temperature for a dog is 100° - 102.5° F. If your pet's temperature is high, call your veterinarian.

12. Seizure. A seizure or convulsion is a sudden firing of nerves in the brain. The severity of a seizure can vary from a far-away look or twitching in one part of the face to your dog falling on his side, barking, gnashing his teeth, urinating, defecating and paddling his limbs. A seizure can last from seconds to minutes. Seizures are a symptom of a neurological disorder – they are not in themselves a disease. They can be caused by several disorders such as epilepsy, trauma, toxins and tumors.

13. **Bruising and Bleeding.** Abnormal bruising and bleeding arise with disorders of hemostasis (clotting). Clotting abnormalities are also called coagulopathies, because they reflect the inability of the blood to coagulate or clot. Bleeding from clotting disturbances may occur in the skin, mucus membranes and various internal organs, tissues or body cavities. The impact of internal bleeding on the individual may be mild to severe depending on the amount of blood lost.

14. **Coughing.** Coughing is a common reflex that clears secretions and foreign matter from the throat, voice box and/or airways, and protects the lungs against aspiration. It affects the respiratory system by hindering the ability to breathe properly. Common causes include obstruction in the windpipe, bronchitis, pneumonia, heart-worm disease, lung tumors, kennel cough (*Bordetella bronchiseptica*), valley fever and heart failure. Some of the causes are life threatening and should be evaluated by your vet.

15. **Bloated or Distended Abdomen.** Abdominal distension is an abnormal enlargement of the abdominal cavity. This term is usually reserved for abdominal enlargement due to causes other than simple obesity. One cause is fluid accumulation. Another cause is enlargement of any abdominal organ such as liver, kidneys or spleen. Distension of the stomach with air (bloat), or fluid or distension of the uterus during pregnancy can result in abdominal distension. Pressure from the abdomen pushing in to the chest can make breathing more difficult and pressure in the abdomen may decrease appetite. It is important to recognize abdominal distension; it can be a symptom of a life threatening disease and should be investigated thoroughly.

16. **Bloody Diarrhea.** Blood in feces can appear as “melena” which makes the stool appear black and tarry; this suggests digested blood in the feces. Melena is different from fresh blood in the stool (hematochezia). Bleeding into colon and rectum appears as fresh blood in the stool. Bloody diarrhea should always be evaluated by your veterinarian as soon as possible.

17. **Bloody Urine.** Hematuria is the presence of red blood cells in urine. It may be visible to the naked eye (gross examination) or microscopic. There are several possible causes – some are bacterial infection, stones in the bladder, and cancer.

18. **Bite Wounds.** Bite wounds are the result when two animals engage in a fight or aggressive play. Bite wounds, which may only appear as a small puncture in the skin, can be quite extensive. Once a tooth penetrates the skin, severe damage can occur to the underlying tissues without major skin damage. Some wounds may appear deceptively minor but may have the potential to become life-threatening, depending on the area of the body bitten. All bite wounds should receive veterinary attention.

19. **Bloody Vomit.** Vomited blood can be fresh blood, which is bright red, or partially digested blood, which appears as brown coffee grounds. There are a variety of causes for vomiting blood and the effects on the animal are also variable. Some are subtle

and minor ailments and others are severe and life threatening.

20. **Lethargy and Weakness.** Lethargy is a state of drowsiness, inactivity, or indifference in which there is a delayed response to stimuli such as sound, sight, and touch. Lethargy is a non-specific sign associated with many underlying systemic disorders and should not be ignored if it persists for more than 24 hours.

21. **Pale gums.** Pale gums can indicate blood loss or “shock”. The possible causes of blood loss and shock are life-threatening and should be evaluated immediately.

Please do not hesitate to contact your veterinarian if you observe your dog exhibiting any of these symptoms!

What is Normal?

If you know what normal body temperature, heart rate and respiratory rate are for a dog, you will more likely be able to tell when your dog is in distress and know that it is time to call your vet.

Body temperature should be taken rectally. Normal body temperature for a dog is 100° - 102.5° F. Call your vet if your dog has a body temperature of more than 104° or less than 99°.

The larger the dog, the slower the normal heart rate. You can check your dog’s “resting” heart rate by rolling the dog onto his right side and placing your hand over the left side of his chest where a raised elbow will touch the chest. You can also try to find the pulse of the femoral artery high on the inside of your dog’s thigh. Count the number of heartbeats in 15 seconds and multiply by 4. The normal rate for a dog over 30 pounds is 60-120 beats per minute.

Normal gum color, i.e. mucous membrane color, is pink. If gums are pale, white, yellow, blue or bright red, call your vet. If your dog has pigmented gums, pull down the lower eyelid to check mucous membrane color.

Determine normal breathing rate when your pet is at rest. Count the number of breaths (one rise-and-fall) per minute, and if it is between 10 and 30, no worries; dogs can breathe up to 200 times per minute when panting. If you notice your dog using his abdominal muscles to breathe, is gasping, making loud noises, taking shallow breaths, panting excessively or exhalation seems to be difficult, consult your veterinarian immediately. If you are not sure your dog is still breathing, place a mirror by the nose and mouth; if the mirror fogs, then the dog is still breathing.

A wise Arizona dog owner will get his/her dog(s) tested for valley fever annually.

Common and Not So Common Health Issues Everyone Should Know About

By Liz Tataseo

ALLERGIES: Do you see your dog scratching, chewing and rubbing areas of their body at different times of the year or all the time? Sometimes hotspots turn up periodically or loss of hair occurs. Allergies are becoming more common, and like humans, dogs can get seasonal allergies or have allergies to the food they eat. Food allergies can often be solved by changing to a food protein that is novel or uncommon such as salmon, venison, bison etc. Chicken and beef are a cause of very common food allergies in dogs so changing usually helps get rid of the symptoms.

Seasonal allergies are becoming more common – those usually require medication that can range from OTC's like Benadryl and generic antihistamines to prescription meds. Some dogs require stronger allergy medications like Apoquel or Cytopoint injections, which require a prescription. Always see your vet to determine what is needed.

ANAL SAC DISEASE: Anal sac disorders are the most common problem of the anal area in animals, especially dogs. Impaction usually involves both sacs and is indicated by a sac that is distended, mildly painful when touched, and not readily expressed. Usually when a dog defecates, the fecal matter movement helps empty the anal sacs. If the feces are too soft, or the anal sacs long and thin, this may not always occur and they fill up. Groomers often express a dog's anal glands when a dog is groomed, but doing it this way can cause the glands to stop being evacuated normally. If your dog starts scooting on his behind or always exudes a strong odor, it may be an impacted anal sac. Get the dog checked by your vet.

ARTHRITIS: Like humans, arthritis shows up as a dog gets older. Arthritis can be treated but not cured. Your dog may get up slower, limp, or not like their joints to be touched. Instead of letting them rest, exercise is good for arthritis, along with joint supplements like glucosamine, chondroitin or a combination of these. Losing weight can also help take the stress off joints. If your dog likes to swim, that, too, is great exercise without stress. Always consult your vet if your dog has arthritis-type symptoms. New medications can help without causing kidney or liver issues as side effects.

DENTAL DISEASE: See article on pages 43-44. Brushing your dog's teeth regularly, using effective dental chews or getting veterinary dental cleanings all can add years to your dog's life.

OBESITY: See article on page 51 Your vet can help with suggestions on how to help your dog lose or gain weight appropriately.

NOT SO COMMON ISSUES: Bloat, cancer, coughing, diabe-

tes, diarrhea or constipation, seizures or frequent urination attempts are all issues that should be seen and treated by a vet and are becoming more common in dogs.

BLOAT IS AN EMERGENCY. It is not common but can occur quickly if it does. If your dog starts gagging and tries to vomit but nothing happens, is hunched over and their abdomen feels hard and increased in size, get them to an ER immediately. More than a 30-minute wait can be deadly. Bloat occurs when the entire stomach and intestines twist inside the dog. Unlike humans, dogs do not have the type of tissue holding the digestive tract in place. Once twisted, gas fills the system and it cannot untwist. Tissues start to die off and there is no saving it. Deep-chested dogs are more likely to bloat especially if they eat too fast, play excessively after eating or eat too much at one time. Often, when deep-chested dogs are neutered, a vet can tack down the stomach to the abdominal wall which can keep everything from twisting. See more on page 43.

CANCER: lumps, sudden weight loss and decreased appetite are symptoms that may indicate cancer. See article on pages 28-29.

COUGHING is a sign of respiratory issues like kennel cough (viral respiratory issue) or valley fever. Fortunately, there are vaccines that can keep your dog from getting kennel cough and flu-like viruses from other dogs.

CONSTIPATION can be caused by eating something too large to travel through the digestive system (watch out for your dog eating toys, gravel, clothing, etc.), gulping down instead of chewing a chew toy, not having access to water all day, or medications that your dog is on. Persistent coughing should always be checked by a vet and may require an ultrasound or x-rays.

DIABETIC SYMPTOMS include changes in appetite and excessive thirst and urination for no known reason. Diabetes can lead to urinary tract infections and eye issues such as cataracts and blindness. UTIs, especially in females, manifest as frequent urination or trying but failing to produce urine. A vet visit is needed.

SEIZURES: Don't wait if your dog goes into seizure – take your dog to a vet. Seizures can result from having system-wide infections or diseases such as valley fever, overheating or cancer. Dogs can have continuous cluster seizures that prevent them from getting enough oxygen; don't wait, get to the ER!

VALLEY FEVER – IMPORTANT for Arizonans! See article on pages 61-64. Any change in your dog's physicality, eating or behavior, take them to a vet!

Close encounters of the Sonoran Desert Toad kind: Flush your dog's mouth out and get to a vet immediately!

Understanding basic test results for your dog

(Excerpts below – see full article in May 2023 newsletter)

By Liz Tataseo

Often, after your dog has blood tests done, your vet might say, “everything looks good for his/her age.” Or “we need to do further testing to rule out some things.” Below are some of the basic tests that are done routinely on your dog and what they could mean. This is not information to have you diagnose your dog’s condition but to know what is being tested.

The **complete blood count** measures the number of cells of different types circulating in the bloodstream. There are three major types of blood cells in circulation: red blood cells (RBC), white blood cells (WBC) and platelets.

Red blood cells, which are produced in bone marrow, pick up oxygen brought into the body by the lungs and distribute it to cells throughout the body. A complete blood count also includes a measure of hemoglobin, which is the actual substance in the red blood cell that carries the oxygen.

Packed cell volume (PCV) is another measure of red blood cells. A small amount of blood is placed in a tiny glass tube and spun in a centrifuge. The blood cells pack to the bottom of the tube and the fluid floats on top. The PCV is the percent of blood that is cells compared to the total volume of blood.

White blood cells include neutrophils (PMNs), lymphocytes, monocytes, eosinophils, and basophils. Lymphocytes are produced in lymph nodes throughout the body. The other white blood cell types are produced in the bone marrow. Most white blood cells in circulation are neutrophils, which help fight infections. Lymphocytes also help fight infection and produce antibodies against infectious agents. Monocytes may be increased in pets with chronic infections. Eosinophils and basophils are increased in pets with allergic diseases or parasitic infections.

Platelets are involved in the process of making a blood clot. Low platelet counts occur if the bone marrow is damaged and doesn’t produce them, or if the platelets are destroyed faster than normal. Animals with a low platelet count bruise easily and may have blood in their urine or stool.

Blood Chemistry

Albumin is a small protein produced by the liver. Albumin acts as a sponge to hold water in the blood vessels. When blood albumin is decreased, the pressure created by the heart forcing blood through the blood vessels causes fluid to leak out of the blood vessels and accumulate in body cavities or in tissues as edema. Albumin is decreased if the liver is damaged and cannot produce an adequate amount of albumin or if albumin is lost through damaged intestine or in the urine due to kidney disease. The only

cause of increased albumin is dehydration.

Alkaline phosphatase originates from many tissues in the body. When alkaline phosphatase is increased in the bloodstream of a dog, the most common causes are liver disease, bone disease, or increased blood cortisol from specific drugs or because the animal has Cushing’s disease (hyperadrenocorticism).

Alanine transaminase (ALT) is an enzyme produced by liver cells. Liver damage causes ALT to increase in the bloodstream.

Amylase is an enzyme produced by the pancreas and the intestinal tract that helps the body break down sugars. Amylase may be increased in the blood in animals with inflammation (pancreatitis) or cancer of the pancreas.

Bile acids are produced by the liver and are involved in fat breakdown. A bile acid test is used to evaluate the function of the liver and the blood flow to the liver. Patients with abnormal blood flow to the liver, a condition known as portosystemic shunt, will have abnormal levels of bile acids. The bile acid test measures a fasting blood sample and a blood sample two hours after eating.

Bilirubin is produced by the liver from old red blood cells. Bilirubin is further broken down and eliminated in both the urine and stool. Bilirubin is increased in the blood in patients with some types of liver disease, gallbladder disease, or when red blood cells are being destroyed at a faster than normal rate (hemolysis). Large amounts of bilirubin in the bloodstream will give a yellow color to non-furred parts of the body, which is called icterus or jaundice.

BUN (blood urea nitrogen) is a waste product produced by the liver from proteins from the diet and is eliminated from the body by the kidneys. A low BUN can be seen with liver disease and an increased BUN is seen in pets with kidney disease.

Calcium in the bloodstream originates from the bones. High blood calcium is commonly associated with cancer. Less common causes are bone disease, poisoning with certain types of rodent bait, chronic kidney failure, and primary hyperparathyroidism, which is over-function of the parathyroid gland. Low blood calcium may occur in dogs and cats just before giving birth or while they are nursing their young. Called eclampsia, it causes the animal to have rigid muscles, which is called tetany. Animals poisoned with antifreeze may have very low blood calcium.

Cholesterol, a form of fat, can be increased in the bloodstream by hypothyroidism, Cushing’s disease, diabetes, and kidney diseases that cause protein to be lost in the urine. High cholesterol does not predispose dogs and cats to heart and blood vessel disease as it does in people.

Creatinine is a waste product; elevation may indicate kidney disease or dehydration.

Creatinine kinase (CK or CPK) elevation suggests damage to muscle, including heart muscle.

Glucose is blood sugar; it is increased in dogs with diabetes mellitus. It may be mildly increased in dogs with Cushing's disease. Low blood sugar occurs less commonly and can be a sign of pancreatic cancer or overwhelming infection (sepsis). and can cause depression or seizures.

Lipase a pancreatic enzyme responsible for the breakdown of fats. It can be increased with pancreatic inflammation or cancer.

Phosphorus in the bloodstream originates from bones. It is increased in the bloodstream by chronic kidney disease.

Potassium increase in the bloodstream indicates acute kidney failure.

Sodium may be slightly increased in the blood if the patient is dehydrated, although many dehydrated dogs have normal blood sodium. Low blood sodium is commonly seen with Addison's disease (hypoadrenocorticism).

Total protein includes albumin and larger proteins called globulins, which include antibodies.

Depending on test results, your vet may want to do more diagnostic tests: urinalysis, serology testing for antibody levels such as for valley fever, imaging which could include X-rays, ultrasound (US) or computed tomography (CT).

Cancer in Dogs

One in every 3 dogs will suffer from cancer. Cancer does not have to be a death sentence, though: 50% of all dogs with cancer will die from the disease, **but the other half will live!**

The probability of a positive outcome is much higher if cancer is found early – routine veterinary care and wellness screenings are the best way for early detection so **make sure that your dog is seen by his/her vet on a regular basis.**

American Veterinary Medical Association's top 10 signs of cancer:

1. Abnormal swellings that persist or continue to grow
2. Sores that do not heal
3. Weight loss
4. Loss of appetite
5. Bleeding or discharge from any body opening
6. Offensive odor
7. Difficulty eating or swallowing
8. Hesitation to exercise or loss of stamina
9. Persistent lameness or stiffness
10. Difficulty breathing, urinating or defecating

Cancer Screening Tests for Dogs

By Liz Tataseo

People have available many types of screening tests for specific types of cancer: mammograms, colonoscopies, and various blood tests. Plus, humans can speak about how they are feeling or explain changes in their body. Unfortunately, dogs can't speak, nor do they let us know they don't feel well until cancer has spread extensively. Lumps, bumps, and growths can be seen and these give us a heads-up on some cancers, but the insidious ones – lymphoma, osteosarcoma and hemangiosarcoma – most often are not discovered until it is too late.

Now, vets have a simple blood-screening test that allows them to detect cancer much sooner. It does not detect specific cancers, but rather the molecules that arise from the growth of cancer cells. The Nu.Q Vet Cancer Screening Test developed in collaboration with Texas A & M scientists has been shown to detect cancer chemicals in dogs that yet to have any symptoms of cancer. (VolitionRX Limited developed the product in conjunction with Texas A & M).

The OncoK9 Cancer screening test (PetDx® – The Liquid Biopsy Company for Pets™) is a San Diego-based molecular diagnostics company. Its flagship product, OncoK9®, enables veterinarians to detect cancer in dogs with a simple blood draw. As a first-in-class multi-cancer early detection (MCED) test, OncoK9 employs cutting-edge genomic analysis that leverages next-generation sequencing (NGS) technology and proprietary bioinformatics algorithms, empowering veterinarians to provide superior care to canine patients.

The screening tests can be used for older dogs when cancer more commonly occurs and for younger breed dogs that have high risk of getting cancer: Golden Retrievers, Boxers, Flat-Coated Retrievers, Beagles, Bernese Mountain dogs, Rottweilers, West Highland Terriers, and Shetland Sheepdogs.

There have been several studies, one with over 1000 dogs, to test the efficacy of the simple blood test. How does it work? When a person or dog develops cancer cells, nucleosomes are released into the blood and can be detected with antibodies specific to nucleosomes. For the three most aggressive cancers mentioned above, the detection rate in this study was 85.4%. Detection for eight of the most common cancers in dogs was 62% (lymphoma, hemangiosarcoma, osteosarcoma, soft tissue sarcoma, mast cell tumor, mammary gland carcinoma, anal sac adenocarcinoma and malignant melanoma). Once nucleosomes are detected, veterinarians can suggest more specific types of tests to look for cancer: ultrasound, X-rays, CT or further blood testing.

The tests can give three types of results:

- Nucleosomes not detected. This result does not totally rule out cancer developing in the future. If other symp-

toms or signs are present, retesting several months later might be prudent, or other types of testing may be recommended.

- Nucleosomes detected. This result increases the probability that cancer is present. A more detailed and extensive exam will then be needed to determine where cancer might be.
- Sample failed. Bad sample or not produced correctly.

These tests might be most helpful for the specific breeds mentioned that are 7-8 yrs old and older with no symptoms or signs of illness but that are prone to cancer.

One of our vets, *Four Legged Friends Animal Hospital*, offers the OncoK9 cancer screening test, and they have information on their website. One of our other vets, *Stetson Hills Animal Hospital*, also offers cancer screening and advises discussing with your vet about testing especially if your dog is 7 or older.

As is usual when something new comes along, you need to decide if this testing is right for you and your dog. The most important action on your part is to know when your dog has changes that occur such as: eating/not eating, difficulty peeing or pooping, energy level, lumps and bumps, limping, difficulty getting up, coughs, breathing difficulties, changes in personality, seizures, unexpected weight gain or loss. If so, see your vet!

Snake-Avoidance Training

Every year thousands of dogs are bitten by rattlesnakes. We have had two reports of *AGR* members' dogs getting bitten right in their back yards. Most dogs will survive, but the pain to your dog and the cost to your wallet are immeasurable.

Our most recent casualty of a snake bite was **23-020 Honey**, an 8-year-old Golden mix. Snake bites are almost always on the dog's face, since the dog is curious and leans down to see what this interesting critter is. **Honey** was bitten in her left eye by a rattlesnake on the patio of an assisted living facility in Scottsdale! She was rushed to an ER by her owner but the owner could not afford the treatment, which consisted of an anti-venin injection plus periodic bloodwork checks to make sure she wasn't bleeding out (the anti-venin disrupts clotting). **Honey** had a couple of follow-up visits at one of our regular vets, plus an exam at *Eye Care for Animals*. Her eye healed and she has normal sight in it. However, she needed surgery on her eyelid so that her eye would not dry out. The total cost to *AGR* for **Honey** has been \$6,593.



Despite the prevalence of rattlesnakes in Arizona, many vets do not carry the antivenin. If they do carry it, it will cost up to \$1,000 per vial; usually a dog will need two or more vials. *AMSC* related to us that one dog they treated required eight vials! And then, of course, you have additional costs for IV fluids, emergency care and the like. It is expensive to treat a snake bite! Much, much less expensive to get your dog trained to avoid rattlesnakes!

Dogs can be vaccinated against snake bites. However, the vaccine does not cure the dog if it is bitten. Also, the vaccine does not prevent a bite or prevent a reaction to a bite, it only reduces the intensity of the reaction and slows down the damaging affect of the venom in your dog, thus buying you some time to get your dog to a vet for treatment.

Where can you get Snake-Avoidance Training?

Partners Dog Training School, 4640 E Forest Pleasant Place, Cave Creek; cost for a first-time session is \$109 per dog; if you have multiple dogs, the cost would be \$99 for each other dog. If you have snake trained your dog with them before, the cost is \$89 per dog. **480-595-6700** www.snakeproofing.com

ViperVoidance, 43226 N. 7th Ave., New River; \$80 per dog includes 1 retest within 30 days; annual retest is \$40. **480-215-1776** www.vipervoidance.com

Pet Insurance

If you are considering purchasing canine health insurance, research the various companies available and make the best choice for your personal finances and your resident animals. You can get good information from <https://www.caninejournal.com/best-pet-insurance/>. Before you buy a policy, try to get answers to the following:

- 1) Can I choose my own veterinarian?
- 2) What are the policy's conditions and exclusions? Is there a cap on payout? Deductible per occurrence or per year?
- 3) What are the waiting periods?
- 4) Are congenital (present at birth) or pre-existing conditions covered?
- 5) Does the company offer multiple-pet discounts on premiums?
- 6) How long does it take for a claim to be processed?
- 7) Is the company licensed in my state?
- 8) Have any consumer complaints about the company been registered with the state's Department of Insurance?

Note: It may be especially important to consider purchasing health insurance if you have adopted a dog that has come from a shelter or was picked up as a stray by a Good Samaritan. The main reason is that the Rescue has no health history for the dog – its history begins with its rescue, so there is no way to predict what health conditions you may face in the future.

Goldens and Hip Replacement

By Liz Tataseo

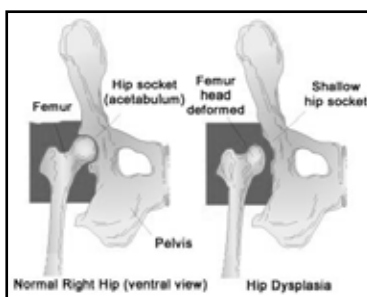
In the past four years we have had 5 young dogs that have needed Total Hip Replacement (THR) surgery. One dog, **19-063 Odie**, needed only one hip replaced to achieve physical health. Two others whose hips were very bad needed both hips replaced. **20-017 Rudder** had both hips repaired in 2021. **21-011 Raya** had her first hip replaced in June 2021; her second surgery was in April 2022. **22-089 Mila**, first hip in February 2023; second in September 2023. **23-042 Kai's** first was done in October 2023 and second in April 2024. All are doing well.

Unfortunately, many dogs are born with congenital hip issues that start to show up anywhere from age 5 months to a year or two. Older dogs usually get hip issues from accidents or arthritis, or they were never diagnosed early in their life. Previously, the usual surgical method for young dogs was either an FHO or TPO.

FHO: Femoral Head Osteotomy – An FHO restores mobility to the hip by removing the head of the femur. This removes the ball of the ball-and-socket joint, leaving just an empty socket. The muscles of the leg will initially hold the femur in place and, over time, scar tissue will form between the acetabulum and the femur to provide cushioning that is referred to as a ‘false joint’. Although this joint is anatomically very different from a normal hip joint, it provides pain-free mobility in most patients.¹

TPO: Triple pelvic osteotomy – A TPO involves bone cuts in the pelvis so that the socket (acetabulum) portion of the joint can be rotated over the ball (femoral head); the bones are then stabilized with a bone plate². These procedures were usually highly successful, but often the TPO resulted in later issues with decline of function and further fixes were needed.

Canine hip dysplasia is a developmental disorder in which the hip joint is abnormally shaped. Because of the altered biomechanics of the hip joint, osteoarthritis develops early, causing significant pain and disability.³



Older adult dogs would do fine with THR (Total Hip Replacement) but younger dogs did not because of growth factors and the implant materials used several years ago. However new technology, primarily both cemented and non-cemented hip replacement systems, means young dogs, 10-24 months, can have a successful THR.

THR surgery usually involves a pre-surgical workup with X-rays and blood work, with surgery to be done after the replacement

prosthesis size can be determined and sterilized. Also, the skeleton of the dog must be mature and has to have finished growing. The hip joint is a ball and socket joint. The ball is at the top of the thigh bone (femur), and the socket (acetabulum) is in the pelvis. Total hip replacement surgery removes and replaces both the ball and socket with prostheses. Most canine hip replacement prostheses have a metal ball at the top of the femur that fits into a dense plastic socket. The prostheses are generally held in place using special bone cement. Some surgeons place hip prostheses that use no bone cement. These are referred to as ‘cementless’ implants. Currently, there appears to be no distinct advantage between cemented versus cementless implants for the total hip replacement.

Usually, dogs go home the next day after surgery. Great care must be taken to ensure the incision is left alone to prevent compromising the stitches/staples or cause infection. Strict activity restriction and crate/pen confinement are necessary. In 10-14 days the surgeon will want to examine the incision site. If external stitches/staples were used, they would be removed at this time. The surgeon will give specific instructions on when and how to begin physical rehabilitation of the dog. Usually, dogs should not run, jump or play for the first two months after surgery. Full activity would probably be reached by 3 months. In some cases, only one hip needs to be replaced, but if the second hip needs replacing, that would not happen until the first hip is totally rehabilitated.

Over 90% of dogs experience dramatic improvements in their overall function after THR. While the prognosis is typically excellent following THR, peak recovery (progressive resolution of lameness, muscle development, etc.) is generally not achieved until 4-6 months postoperatively.³

As with any surgery, THRs have their own set of potential complications. All surgeries carry some risk of unsuccessful outcomes, complications, injury or even death, from both known and unforeseen causes. The most described THR complications include:

- Hip joint dislocation
- Incision-related issues
- Surgical site infections (short and long-term)
- Loosening of the implants over time
- Sciatic nerve injury
- Femur (thigh bone) fracture during and after implantation

While the occurrences of THR complications are the exception, they are thoroughly reviewed during the initial pre-surgical visit.³

Because of advancements in veterinary surgical procedures, our Goldens will enjoy a life without pain or physical impairments.

¹www.vcahospitals.com/know-your-pet/femoral-head-osteotomy-fho-in-dogs

²www.vcahospitals.com/know-your-pet/femoral-head-osteotomy-fho-in-dog

³www.medvetforpets.com/canine-total-hip-replacement

⁴www.mspca.org/angell_services/total-hip-replacement-in-young-dogs

Over-The-Counter Drugs

Many of us use over-the-counter drugs to help our dogs when they become sick or uncomfortable. Numerous over-the-counter medications and supplements are safe to use with our pets. The following chart includes a lot of “safe” drugs and the dosages that are weight-appropriate. Adult Golden Retrievers can receive the recommended adult human dose of many of the medications in the following list. We do not encourage anyone to self-medicate an animal without your veterinarian’s knowledge. **Please always check dosage with your vet.**

This list is not exhaustive, but it does contain many of the more commonly used substances. The information in this chart was compiled in 2007 by Deb Rising, then a veterinary technician and always a friend of Goldens. She has given us permission to reprint it. Since thirteen years have elapsed since Deb produced this chart, I asked Dr. Valerie Ferguson, owner of **Four Legged Friends Animal Hospital** (3131 E. Thunderbird Rd, Phoenix) to review it for accuracy and make any necessary updates. She said the information was great but added Pepcid, an antacid, and Zyrtec, an antihistamine. Before using any of these over-the-counter preparations, please always check with your veterinarian to determine if their use is warranted and safe for *your* dog. Our thanks to both Deb Rising and Dr. Ferguson for this information!

Name of Drug	Description	Dosages	Additional Info
Activated charcoal suspension (also known as micronized charcoal)	Absorbs toxins; used to treat ingestion of poisons	3 to 6 ml per pound given orally; repeat dose in 1 hour (5 ml equals 1 tsp)	
Aspirin (baby) or Bufferin (Ascriptin)	Pain reliever	5 to 12 mg per pound given orally every 8 to 12 hours	Never use in conjunction with cortisone (steroids) or if a bleeding disorder is present; should not be used post-surgically due to anticlotting effects; long-term use can lead to gastric irritation, ulceration, and bleeding
Benedryl	Antihistamine	1 to 2 mg per pound given orally every 6 to 8 hours	
Beta-carotene	A precursor to Vitamin A; it is converted to Vitamin A by the dog's body and is not toxic, so it can be given safely in place of Vitamin A, which can be toxic in high doses	A 20-lb dog can be given daily a dose of beta-carotene equivalent to 10,000 IU of Vitamin A for <i>short-term use</i> ; a 20-lb dog can be given daily a dose of beta-carotene equivalent to 1,000 IU of Vitamin A. Never exceed the recommended adult human dosage.	
Chlorpheniramine	Antihistamine	A 20-lb dog can be given 2 mg orally every 8 to 12 hours; at no time should the dose exceed 12 mg	A good brand name to look for is Chlor-Trimeton
Chondroitin sulfate	A naturally-occurring compound made up of a combination of protein and carbohydrates; protects joints and can be used to treat arthritis	A 50-lb dog can be given 1,000 mg daily	Often used in combination with glucosamine sulfate; if using both, give your dog half doses of each
Cod liver oil	Used to treat corneal ulcers and/or erosions	1 drop in affected eye daily	Before treating, check with your vet; corneal ulcers and erosions can be quite dangerous, so it is best to use this treatment with veterinary supervision
Colloidal silver	A suspension of tiny silver particles in water	For topical use on burns and wounds; use as a flushing preparation 3 times a day	Sometimes used in valley fever treatments
Cranberry	Herb used to treat urinary-tract problems	A 20-lb dog can be given ¼ of the recommended adult human dose	Best used in tablet form

Name of Drug	Description	Dosages	Additional Info
Dandelion	Herb with diuretic properties used to help reduce pulmonary congestion	A 20-lb dog can be given $\frac{1}{4}$ the recommended adult human dose	Best used in tablet form
Dimethylglycine	Vitamin-like supplement that can be used as an immune stimulant	A dog under 25 lbs can get 50 mg; between 26-50 lbs, can get 100 mg; between 51-90 lbs, can get 150 mg; over 90 lbs, can get 200 mg	Because different companies use different concentrations of dimethylglycine in their solutions, you must check the concentration of milligrams per milliliter listed on the bottle and calculate the number of milliliters to give your dog
Echinacea	Herb used to promote healing of wounds and improve immune system	A 20-lb dog should be given $\frac{1}{8}$ of the recommended adult human dose; use for 10-day intervals separated by a 7-day rest; stop use after three 10-day trials	Obtain organic freeze-dried sources when possible
Flaxseed oil	Herbal oil that encourages healthy skin and a full hair coat; a natural anti-inflammatory agent and immune modulator	A 20-lb dog can be given the equivalent of $\frac{1}{4}$ to $\frac{1}{2}$ of the recommended adult human dose; Golden retrievers can receive the recommended adult human dose	Keep refrigerated so that the oil does not become rancid; purchase a human-grade, organic, cold-pressed form of the oil
Gatorade	Sugar and electrolyte drink; can be used to prevent dehydration when treating repetitive vomiting and diarrhea	Put $\frac{1}{4}$ inch in bowl in place of water; when dog empties bowl, wait 20 minutes, then place another $\frac{1}{4}$ inch in bowl; repeat until vomiting subsides	
Glucosamine sulfate	A naturally-occurring compound made up of a combination of protein and carbohydrates; protects joints and can be used to treat arthritis	A 50-lb dog can be given 1,000 mg daily. Golden retrievers with hip dysplasia can get a minimum of 1,500 mg daily	Often used in combination with chondroitin sulfate; if using both, give the dog half-doses of each
Iodine	Mineral that prevents goiter (enlargement of the thyroid gland)	A 20-lb dog can be given $\frac{1}{8}$ of the recommended adult human dose	Give in the form of kelp tablets
Kaopectate	Absorbent used to treat diarrhea and vomiting	0.5 to 1.0 ml per pound given orally every 2 to 6 hours	
Lactobacillus	The "good" bacteria naturally present in the intestines of healthy animals that controls the "bad" bacteria and yeast; synthesizes B vitamins and provides the cells of the intestinal lining with fatty acids	A 20-lb dog can be given $\frac{1}{4}$ of the recommended adult human dose	When purchasing, opt for high-quality brand-name products that are stored in refrigerated areas of the store in order to ensure that the viability of the live bacteria is maintained
Lecithin	A fat found in animal and plant tissue; used to help strengthen the sphincter muscle of the bladder; also aids in promoting mental alertness in old animals	A 20-lb dog can be given $\frac{1}{4}$ of the recommended adult dose of soy lecithin oil daily	Buy fresh bottles of lecithin sold in refrigerated areas; it is important to keep it refrigerated to avoid it getting rancid
Licorice root	Herb that acts as a natural cortisone; helpful in reducing throat swelling and inflammation of stomach	A 20-lb dog can be given $\frac{1}{8}$ of the recommended adult human dose	Do not use for longer than 10 days

Name of Drug	Description	Dosages	Additional Info
Metamucil (psyllium husks, not seed)	Natural source of fiber that acts as a bulk cathartic and prevents and treats constipation	A 20-lb dog can be given ¼ of the recommended adult human dose	It is very important to increase your pet's water consumption when supplying psyllium; if no bowel movement is produced in 48 hours, see your veterinarian
Milk Thistle	Herb that contains antioxidants important for maintaining a healthy liver	A 20-lb dog can be given ¼ of the recommended adult human dose	Used to protect the liver when dog is taking fluconazole for valley fever or other drugs that affect liver health
Parsley	Diuretic herb that can help reduce pulmonary congestion	A 20-lb dog can be given ¼ of the recommended adult human dose	Best to get in tablet form
Pedialyte	Pediatric electrolyte solution that can help to treat eclampsia and vomiting	A 20-lb dog can be given ½ the recommended children's dose	
Pepcid	Antacid; stomach-soothing agent	10 mg twice a day for a dog 40 lbs or less; 20 mg twice a day for dog over 45 lbs	
Pepto-Bismol	Antidiarrheal agent that also soothes the stomach	0.5 to 1.5 ml per pound given orally every 2 to 6 hours for short-term use (1 or 2 days)	Use only for 1 or 2 days; if symptoms continue, seek veterinarian's advice; it may cause the dog's stool to turn black, which is often confused with blood in the stool
Plant-derived digestive-enzyme supplements	A source of enzymes that helps the body to digest its food	A 20-lb dog can be given ¼ of the recommended adult human dose; dose should be sprinkled over lightly-dampened food 10 minutes before it is served	Buy a brand name for humans unless a pet supplement is available; the supplement should contain amylase, protease, lipase and cellulose
Proteolytic enzyme supplement	A specific type of digestive enzyme supplement that contains only protease	A 20-lb dog can be given ½ the recommended adult human dose	For most effective results, give apart from meals; bromelain or papain tablets are recommended
Robitussin DM	Cough suppressant	0.25 to 1 ml per pound given orally every 6 to 8 hours	Because it merely subdues symptoms and makes the animal more comfortable, do not use for more than 4 days without a veterinarian's advice; you could be covering up a more serious problem
Selenium	Mineral used for protecting the immune system; helpful for maintaining healthy heart, joints, and muscles	A 20-lb dog can be given no more than 30 mcg daily without a veterinarian's recommendation	Because it is toxic in high doses, be sure that you are not also providing selenium with any other supplements (or <i>only</i> give in a combination tablet)
Shark cartilage	Natural anti-inflammatory for arthritis treatment	A 40-lb dog can be given 1/3 of the recommended adult human dose	Available in tablet or powder form
Sulfur	Mineral required for synthesis of body proteins; can also act as an antioxidant	500 mg in the form of methylsulfonyl methane (MSM) per 30 pound daily	Purchase in form of methylsulfonyl methane
Trace mineral supplements	Essential minerals that keep the body functioning properly	A 20-lb dog can be given ¼ of the recommended adult human dose	Best form to purchase is chelated trace mineral tablets that contain as many as 74 different trace minerals
Valerian	Herb used for its sedative properties; reduces anxiety and helps to treat muscle spasms	A 20-lb dog can be given 1/8 of the recommended adult human dose	If this dose does not produce acceptable results, double the dose and evaluate the effect; valerian has a bad taste, so mix it with your dog's food to mask the taste

Name of Drug	Description	Dosages	Additional Info
Vitamin B complex	Vitamin that helps to maintain healthy nerves, skin, eyes, hair, liver and mouth	Goldens can use the recommended adult human dose	
Vitamin C	Vitamin used for strengthening the immune system; also, an anti-allergic, anti-inflammatory, anti-bacterial, anti-viral and detoxicant agent	500 mg per 20 pounds daily; reduce the dose if a soft stool develops	Best purchased in calcium ascorbate or sodium ascorbate forms rather than acetic acid form, which can upset the stomach; try to obtain a brand that includes bioflavonoids
Vitamin E	Essential antioxidant vitamin used for strengthening the immune system	A 20-lb dog can be given 200 IU daily when treating a health problem	Because it is a fat-soluble substance that accumulates in the body, it can become toxic in high doses
Zinc	Essential mineral used for tissue repair and healing, proper immune-system functioning, and healthy skin and coat	A 20-lb dog can be given 10 mg daily' dogs under 20 lbs can be given 5 mg daily; dogs 40 lbs or over can be given 15 to 20 mg daily	Absorbed most efficiently if purchased in its chelated form; potentially toxic in high doses, so be sure you are not supplying in any other supplements; take with a copper supplement, because it may interfere with absorption of naturally-occurring copper
Zyrtec	Antihistamine	0.5 to 1.0 mg/kg once a day: a 20-lb dog can be given ½ to one 10 mg tablet once a day	Sometimes effective when Benadryl is not

CAUTION: Do not ever give Tylenol (acetaminophen) or ibuprofen (Advil or Motrin) to a dog without advice from your veterinarian. Administering such medications to dogs can create very dangerous and even life-threatening complications.

Abbreviations used in table

- kg – kilogram
- lb – pound
- lbs – pounds
- mg – milligram
- ml – milliliter
- tsp – teaspoon
- Tbsp – tablespoon

Conversions

- 1 pound = 2.2 kilograms
- 1 tsp = 5 ml
- 3 tsp = 1 Tbsp
- 4 Tbsp = ¼ cup

IU – International Unit. a unit of measurement for the amount of a substance, based on biological activity or effect

*Does Your Dog Have Bare Elbows?
Try These Tips*

- Use fresh Aloe Vera, Bag Balm ointment, or Tree Tea Oil on the site
- Use Neosporin ointment and a padded shirt to protect the areas; be sure the shirt has been washed and is free of bleach, laundry detergent and fabric softeners
- Keep your pet off concrete – your dog may have an allergy to something in it, or the concrete may just have rubbed the fur off, as it is very abrasive
- Ask your vet to do a scraping of the elbow and look at it with a microscope to see if there are any embedded foreign bodies
- Consult a Dermatologist – it will save you money in the long run

- Change dog food to a no-grain variety, and do not use Science Diet prescription food as it is full of grains
- Sometimes allergies develop in older dogs
- Be sure the dog hasn't been lying in grass sprayed with insecticides or weed killers

Does Your Dog Have "Allergy Feet"?

14-033 Dolly had a condition called pododermatitis. Her severe allergies caused blisters and bloody eruptions on and between the pads of her feet. Many medications were tried including numerous antihistamines and antibiotics, but the most effective treatment was Preparation H®! The Preparation H®, which contains cortisone, shrinks the swelling and helps close up the blood vessels, promoting healing! She also had cold laser treatments when she had an outbreak, and these also helped.

Some Common Disorders of Senior Dogs

By Liz Tataseo

Hard to believe, but veterinarians consider smaller dogs to be “senior” at 7 or 8 years of age, bigger dogs at an even younger age. Not that dogs act like a senior citizen, but changes do occur. This is probably not news to those of you who have had senior dogs, but for those with younger ones, please keep all of this in mind.

One area that can exacerbate age-related problems is excessive weight gain. Weight gain can increase the risk of arthritis, heart disease, diabetes, high blood pressure, skin disorders and other conditions. These conditions may not show up immediately, but an overweight dog has a higher chance of getting these age-related issues later. You control what your dog eats, so make sure they are at an appropriate weight.

Some of the most common issues for senior dogs include dental disease, arthritis, eye disorders, kidney disease, bladder stones, endocrine issues like Cushing’s disease and hypothyroidism, heart disease, diabetes, skin tumors, urinary incontinence, prostate problems (if a male is intact), cancer, liver disease, anemia and cognitive dysfunction. I know this sounds like a lot of problems. Like us humans, though, it’s usually just one or two issues that arise at any one time.

Bringing your dog into regular vet visits for an exam and keeping current on vaccines is an important annual procedure. At 7-8 years, it is always good to get a senior blood panel that will give the vet some baseline information to compare with what might arise in the future. Don’t wait if you think your dog is sick or has had a change in behavior. Dogs are very stoic and, like all animals, often don’t show that they are feeling sick.

Dental disease and gingivitis are common in older dogs. Untreated dental issues can lead to tooth loss. Gum infections can spread to the rest of the body and cause further issues such as heart disease or kidney problems.

Arthritis is very common in older dogs, which is why weight management is so important. Signs include difficulty rising, falling on slippery floors, trouble climbing stairs and finding a comfortable sleeping position. There are many anti-inflammatory drugs that can really help, and new ones are easier on a dog’s kidneys and liver.

As dogs age, vision issues crop up – cataracts and tear production leading to chronic dry eye. Golden Retriever Uveitis is an autoimmune disease that can lead to glaucoma and cataracts and eventually blindness. If your dog’s eyes are gummy all the time, or they rub their eyes or blink a lot, see your vet.

Kidney disease is one of the most common diseases of older dogs. Special diet and medication can keep a dog healthy for a much

longer life. Blood tests can help diagnose this problem early on even before the dog shows signs of a problem.

Older dogs have an increased likelihood of developing bladder stones. Most are small and may not cause issues, but if one becomes stuck in their urethra, then there will be major problems. A urine test can give an early indication of crystals forming. A special diet can help keep these stones from growing.

An underactive thyroid is common in older dogs. An unexplained change in weight, dry coat and loss of hair are all signs of hypothyroidism. Again, this can be determined by blood work. Medication given daily will get your dog back to a healthy life. Cushing’s disease is harder to diagnose and not as common, but it is treatable.

Heart disease can include chronic valve issues that lead to abnormal blood flow, which can lead to heart enlargement and heart failure. Congestive heart failure and cardiomyopathy are often seen in senior dogs but can remain hidden for years.

Older dogs have a higher risk of diabetes either due to diet or pancreatic insulin issues. Diabetes is treatable with medication, just as in people.

Skin tumors are common in the older dog. Depending on the size, location and test results, vets can recommend removal or just monitor the lumps for changes.

Incontinence can happen as a dog ages, but there are medications that can help.

Cancer often crops up in the senior dog. Many types of cancer are treatable, especially if found early – another reason for regular vet visits! Again, the stoicism of many dogs may mask any obvious symptoms until it’s too late for effective intervention.

Cognitive decline in dogs, just like in people, can occur as a dog ages. Some signs are being less patient and more irritable. Sometimes they forget regular behaviors such as peeing and pooping and where to do these. They might sleep more and not answer as usual when you call. There is medication that can help with this type of issue, or there could be a physical problem that can cause these issues. See your vet!

DON’T PANIC! These are just examples of what can happen with a senior dog. Usually they have mild issues of one or more of these, and always there is the right medication to help. Remember, feed your dog based on good nutrition and don’t overfeed. Look for changes in your dog’s behavior, but some issues you will not be able to get an early sign of or see any overt symptoms. So, make it a practice to take him or her to your vet regularly even if they have no overt symptoms.

Emergency Preparedness

In August 2010, Liz Tataseo represented *AGR* at a conference on *Emergency Preparedness for Animal Safety*. She brought back a 16-page handout containing some excellent information that had been collated from several different agencies including the *American Red Cross* and the *Humane Society of the U.S.* There isn't room in this newsletter to print all of it, so we have put the entire handout up on our website; you can access it there and take what you want from it. I will reprint only a small part here.

In the Phoenix area, we experience "disasters" only rarely – dust storms, flooding, damaging winds and microbursts and large hail stones are about it. However, many of our readers live in areas where there are tornadoes, hurricanes, heavy snow, forest fires, mudslides or raging rivers that breach their confines. Regardless of the type of disaster you might experience, as the Scouts say, "Be Prepared!"

Be Prepared with a Disaster Plan

The best way to protect your family from the effects of a disaster is to have a disaster plan. [As] a pet owner, that plan must include your pets. Being prepared can save their lives.

Different disasters require different responses. But whether the disaster is a hurricane, a fire, or a hazardous spill, you may have to evacuate your home.

In the event of a disaster, if you must evacuate, the most important thing you can do to protect your pets is to evacuate them, too. Leaving pets behind, even if you try to create a safe place for them, is likely to result in their being injured, lost, or worse. So, prepare now for the day when you and your pets may have to leave your home.

1. Have a safe place to take your pets.

Red Cross disaster shelters cannot accept pets because of states' health and safety regulations and other considerations. Service animals who assist people with disabilities are the **only** animals allowed in Red Cross shelters. It may be difficult, if not impossible, to find shelter for your animals in the midst of a disaster, so plan ahead. Do not wait until disaster strikes to do your research.

Contact hotels and motels outside your immediate area to check policies on accepting pets and restrictions on number, size, and species. Ask if "no pet" policies could be waived in an emergency. Keep a list of "pet friendly" places, including phone numbers, with other disaster information and supplies. If you have notice of an impending disaster, call ahead for reservations.

Ask friends, relatives, or others outside the affected area whether they could shelter your animals. If you have more than one pet, they may be more comfortable if kept together, but be prepared to house them separately.

Prepare a list of boarding facilities and veterinarians who could shelter animals in an emergency; include 24-hour phone numbers.

Ask local animal shelters if they provide emergency shelter or foster care for pets in a disaster. Animal shelters may be overburdened caring for the animals they already have, as well as those displaced by a disaster, so this should be your last resort.

2. Assemble a portable pet disaster supplies kit. Whether you are away from home for a day or a week, you'll need essential supplies. Keep items in an accessible place and store them in sturdy containers that can be carried easily (duffle bags, covered trash containers, etc.). Your pet disaster supplies kit should include:

- Medications and medical records, especially of vaccinations (stored in a waterproof container) and a first-aid kit.
- Sturdy leashes, harnesses, and/or carriers to transport pets safely and ensure that your animals can't escape.
- Current photos of your pets in case they get lost.
- Food, potable water, bowls, cat litter/pan, and can opener.
- Information on feeding schedules, medical conditions, behavior problems, and the name and number of your veterinarian in case you have to foster or board your pets.
- Pet beds and toys, if easily transportable.

3. Know what to do as a disaster approaches. Often, warnings are issued hours, even days, in advance. At the first hint of disaster, act to protect your pets.

- Call ahead to confirm emergency shelter arrangements for you and your pets.
- Check to be sure your pet disaster supplies are ready to take at a moment's notice.
- Bring all pets into the house so that you won't have to search for them if you have to leave in a hurry.
- Make sure all dogs and cats are wearing collars with securely fastened, up-to-date identification. Attach the phone number and address of your temporary shelter, if you know it, or of a friend or relative outside the disaster area. You can buy temporary tags or put adhesive tape on the back of your pet's ID tag, adding information with an indelible pen.

You may not be home when the evacuation order comes. Find out if a trusted neighbor would be willing to take your pets and meet

you at a prearranged location. This person should be comfortable with your pets, know where your animals are likely to be, know where your pet disaster supplies kit is kept, and have a key to your home. If you use a pet sitting service, they may be available to help, but discuss the possibility well in advance.

Planning and preparation will enable you to evacuate with your pets quickly and safely. But bear in mind that animals react differently under stress. Outside your home and in the car, keep dogs securely leashed. Transport cats in carriers. Don't leave animals unattended anywhere they can run off. The most trustworthy pets may panic, hide, try to escape, or even bite or scratch. And, when you return home, give your pets time to settle back into their routines. Consult your veterinarian if any behavior problems persist.

The following are organizations and resources that you can contact or access to help you plan how to protect your pets.

Local Government Animal Control Maricopa County website: <http://www.maricopa.gov/Pets/> Additional educational materials at <https://www.cdc.gov/disasters/petprotect.html>

If you don't have a plan and need information quickly, contact <https://www.maricopa.gov/FAQ.aspx?TID=208>

Local Animal Shelters: Because most emergency shelters do not admit pets, local animal shelters may be able to offer advice, such as what to do with your pets if you are asked to evacuate your home. Enter "local animal shelters" in Arizona in your Internet search engine; many listings will come up.

Other resources:

<http://www.redcross.org/services/disaster/>

<http://www.avma.org/disaster/>

<https://redrover.org/>

<https://www.centrevillesquareanimalhospitalva.com/blog/pet-first-aid-kits/>

<https://www.fda.gov/animal-veterinary/resources-you/animal-health-literacy>

In emergency situations, pets could be poisoned by exposure to harmful chemicals, products, or foods. For information on protecting your pets, visit the *Animal Poison Control Center's* website: <http://www.aspc.org/pet-care/poison-control/> If you suspect that your pet has been poisoned, call toll-free 1-888-426-4435 (calls are answered 24/7; credit card needed for consultation fee).

Is Your Peanut Butter Safe to Give to Your Dog?

If you have peanut butter in your pantry, check the label for **xylitol**. If it contains that chemical, do not use that brand with your dog -- xylitol is highly toxic. Jif®, Skippy®, Peter Pan®, and the Kroger® brands are all safe to use.

Pet First-aid Kit

Creating a pet first-aid kit is a smart idea that will prepare you to act quickly in case of emergency. Put everything related to your pet's health issues in an easily-accessible bag. A clear plastic tote is ideal, as that will allow you to readily find whatever you need, and you can place a card with emergency numbers on the inside facing out so they are easily read. On your Emergency Numbers card, be sure to include:

- Phone number of your veterinarian
- National Animal Poison Control Center – open 24/7/365; charges a consultation fee 888-426-4435
- Closest Veterinary Emergency Animal Hospital phone number and address

Include a folder with copies of all your pet's medical records. These records will be most important if you have to take your pet to an Emergency Animal Hospital or to a veterinarian who is not your regular vet, for example, if you have need of a vet while on a trip out of your home area. If you leave your pet home with a pet sitter, leave copies of these records, as well as a letter signed by you giving the pet sitter permission to have your pet treated by a vet.

A very handy item is a book on pet health care; there are several good ones available. Be sure to read it before you have to use it!

Keep a list of substances which might be found in and around your home that are toxic to pets – see pages 39 through 41 in this newsletter.

Carry a blanket or large towel in your vehicle. These can be used to wrap a cold animal or to carry an animal that is injured or bleeding.

First-Aid Kit contents should include:

- Tweezers
- Dog nail trimmer
- Styptic powder – to stop bleeding if you cut a nail too short
- Scissors
- Bandages and gauze
- Betadine sponges – for cleaning cuts and wounds
- Eyedropper
- Peroxide – use to induce vomiting upon ingestion of non-food object or if pet eats something toxic – see page 38; can also be used for cleaning wounds
- Rubber gloves
- Saline solution – regular human contact lens saline solution can be used to flush out dirt, sand, or other eye irritants

- Sterile Vaseline – applied around eyes, will prevent soap and water from getting into pet’s eyes while bathing pet
- Sterile telfa pads (non-stick) to put on a wound before applying bandage
- Triple antibiotic ointment

After applying what first-aid you can, be sure to seek veterinary care as soon as possible to assure the best outcome for your pet.

Be Prepared for a Poison Emergency

In spite of your best efforts to secure your home, your animal may become poisoned, so you need to be prepared. Your animal companion should regularly be seen by a local veterinarian to maintain overall health. Know the veterinarian’s procedures for emergency situations, especially ones that occur after usual business hours. Keep the telephone numbers for the veterinarian, the ASPCA Animal Poison Control Center (888-426-4435), and a local emergency veterinary service in a convenient location.

Poison Safety Kit

Keep a pet safety kit on hand for emergencies. Such a kit should contain at least:

- A fresh bottle of hydrogen peroxide 3% (USP)
- Can of soft dog or cat food, as appropriate
- Turkey baster, bulb syringe or large medical syringe
- Saline eye solution to flush out eye contaminants
- Artificial tear gel to lubricate eyes after flushing
- Mild grease-cutting dishwashing liquid to wash animal after skin contamination
- Rubber gloves
- Forceps to remove stingers or plant thorns/spines
- Muzzle – an animal that is excited or in pain may unintentionally (or intentionally) try to harm you even if you are trying to help it
- Pet carrier or crate

Poison Ingestion

If you suspect that your dog has ingested a poison, call the National Poison Control Hotline at 1-800-222-1222 or ASPCA’s Poison Control at 1-888-426-4435 as soon as possible. 1-800-222-1222 is the telephone number for every poison center in the United States. Call this number 24 hours a day, 7 days a week, to talk to a poison expert. Call right away if you have a poison emergency. Also call if you have a question about a poison or about poison prevention.

Although there is still a network of 57 poison centers around the country, there is now one single telephone number for poison emergencies. When you call 1-800-222-1222 you will still talk to your local poison center experts. It is worth the price of the call (have your credit card ready for a potential \$65 charge), because certain poisons will cause further damage to the dog if the dog is made to vomit up the substance.

If you witness your pet consuming material that you suspect might be toxic, do not hesitate to seek emergency assistance, even if you do not notice any adverse effects.

Inducing Vomiting with Hydrogen Peroxide

Call your veterinarian immediately once you’ve determined that your dog has eaten something dangerous. Call a veterinary emergency clinic if your vet is not available. *Take their professional advice first before you make a dog vomit using hydrogen peroxide.*

Trap your dog in a secure area, such as a bathroom, patio or kitchen to avoid having to chase it and having to clean up vomit from carpet. If possible, ask someone to help you with restraint to make a dog vomit using hydrogen peroxide, since the job isn’t as easy for one person (unless your dog is small). Give a small dog only about a capful of hydrogen peroxide. Use the cap of a regular-sized bottle of hydrogen peroxide – about a teaspoonful. Administer more – around 2 tablespoons – to a large dog. If you have a syringe, use it to inject the liquid down into your dog’s throat. Wait patiently and quietly until your dog vomits – it should occur soon after you administer hydrogen peroxide, but it can take up to five minutes. Look for foreign objects in the vomit and make sure your dog has expelled the dangerous items it swallowed. Repeat the procedure if nothing substantial comes up. Realize there may be nothing obvious to see if you are trying to help your dog eliminate a poison.

If you suspect that your dog has ingested some kind of chemical substance, call the **Poison Control Hotline** for advice. *Some chemicals can cause more damage if they are brought back up by the dog.* Poison Control may advise using activated charcoal or something else to denature the chemical, so best to make that phone call before using hydrogen peroxide.

Play Dough

At all costs, keep homemade play dough, the kind made with flour and salt, away from your dog. The salt content is so high that it will cause severe dehydration, which can lead to brain hemorrhage and death if your pet eats it.

Are Your Dog’s Bowls Toxic?

Do you eat off the same plate or out of the same bowl or drink out of the same glass every day without washing those items between uses? Of course not! Do you wash your dog’s food and water bowls after every use or at least once a day? If not, why not? Bacteria can grow on minute food particles left in the bowls; mold can grow in water bowls not washed frequently. To keep your dog safe, please wash your dog’s bowls every day either by hand or in your dishwasher.

Items To Avoid For Your Dogs

You name it, and dogs can get into it. Some dogs actually seek out things to chew, eat or destroy. Some of these items are generally nontoxic while other items (including foods) can be highly toxic.

According to a list published online (<https://pets.webmd.com/dogs/guide/top-10-dog-poisons>), items below marked with superscript numbers are the top ten most toxic items that dogs ingest.

Alcoholic beverages – can cause intoxication, coma, and death

Apple seeds – contain cyanide; remove core if feeding apple pieces as a snack

Baby food – can contain onion powder, which can be toxic to dogs; can also result in nutritional deficiencies if fed in large amounts

Bones from fish, poultry or other meat sources – can cause obstruction or laceration of the digestive system

Cat food – generally too high in protein and fats for dogs

¹ **Chocolate, coffee, tea and other caffeine-containing products** – contain caffeine, theobromine, or theophylline, which can be toxic and affect the heart and nervous system

² **Cigarettes and cigarette butts** – nicotine is as bad for your dogs as it is for a smoker; the fibers in the cigarette butts can get impacted in the intestine; see **Tobacco**

Citrus oil extracts – can cause vomiting

¹ **Cocoa bean mulch** – smells enticing like chocolate but is extremely toxic

Fat trimmings – can cause pancreatitis

⁶ **Grapes and raisins** – contain an unknown toxin which can damage the kidneys

Hops – unknown compound causes panting, increased heart rate, elevated temperature, seizures, and death

Human vitamin supplements containing iron – can damage the lining of the digestive system and be toxic to the other organs including the liver and kidneys

Large amounts of liver – can cause Vitamin A toxicity, which affects muscles and bones

Macadamia nuts – contain an unknown toxin which can affect the digestive and nervous systems and muscle

Marijuana – can depress the nervous system, cause vomiting, and cause changes in the heart rate

Milk and other dairy products – some adult dogs and cats do not have sufficient amounts of the enzyme lactase, which breaks down the lactose in milk; this can result in diarrhea. Lactose-free

milk products are available for pets

Moldy or spoiled food, garbage – can contain multiple toxins causing vomiting and diarrhea, and can also affect internal organs

³ **Mushrooms** – can contain toxins, which may affect multiple systems in the body, cause shock, and result in death

Onions and garlic (raw, cooked or powder) – contain sulfoxides and disulfides, which can damage red blood cells and cause anemia; cats are more susceptible than dogs; garlic is less toxic than onions

⁴ **Paint balls** – paint type is toxic

⁹ **Pennies** – copper is toxic to dogs; can get caught in throat

Persimmons – seeds can cause intestinal obstruction and enteritis

Pits from peaches, plums and apricots – can cause obstruction of the digestive tract

Potato, rhubarb and tomato leaves; potato and tomato stems – contain oxalates, which can affect the digestive, nervous, and urinary systems

⁵ **Potpourri** – often has some toxic plant materials mixed in

Raw eggs – contain an enzyme called avidin, which decreases the absorption of biotin (a B vitamin); this can lead to skin and hair coat problems; raw eggs may also contain *Salmonella* bacteria

Raw fish – can result in a thiamine (a B vitamin) deficiency leading to loss of appetite, seizures, and in severe cases, death; more common if raw fish, especially salmon, is fed regularly

Salt – if eaten in large quantities it may lead to electrolyte imbalances

⁷ **Slug bait** – extremely toxic to dogs

¹⁰ **String, yarn, ribbon, cassette tape and other similar items** – can get caught in throat or become trapped in the digestive system and require surgery for removal; called a “string foreign body”

Sugary foods – can lead to obesity, dental problems and possibly diabetes mellitus

Table scraps (in large amounts) – table scraps are not nutritionally balanced; they should never be more than 10% of the diet; fat should be trimmed from meat; bones should not be fed

Tobacco – contains nicotine, which affects the digestive and nervous systems; can result in rapid heart beat, collapse, coma and death; if you smoke, keep your cigarettes put away

Yeast dough – can expand and produce gas in the digestive system, causing pain and possible rupture of the stomach or intestines

⁸ **Xylitol** – a sweetener used in some chewing gums and candies; highly toxic to dogs

If your dog eats something and you have any doubt about whether it is dangerous or toxic, always call your veterinarian or local emergency clinic.

Antibiotics - 5 Things You Should Know

from *The Pet Place* column online by Dr. Patricia Khuly, 2-23-15

Antibiotics are for bacterial infections, and that means they won't work for every kind of infection. For example, colds and flus are caused by viruses and, as such, will NOT respond to antibiotics. Offering them in these cases only exposes a wider range of bacteria to these drugs, thereby increasing the chances for the development of resistant strains of bacteria.

Make sure it's the right antibiotic for your dog's problem.

This is crucially important when it comes to treating most bacterial infections. But how to tell? Increasingly, veterinarians are testing the site of infection (ears, urine, skin, airways, wounds, etc.) to see what kinds of bacteria are affecting the area and which antibiotics will kill them best. This test is called "culture and sensitivity", and it is by far the best way to know that the right antibiotics are being used and that they are being used judiciously.

Antibiotics aren't without their risks to dogs. Historically, both human medical and veterinary professions have been too quick on the draw when it comes to prescribing antibiotics. The misuse of antibiotics can court antibiotic resistance, which can actually exacerbate a patient's illness. As antibiotics are fraught with side effects ranging from mild gastrointestinal upset to deadly autoimmune diseases, it's especially important to take the use of these drugs very seriously and only when absolutely necessary.

Three crucial words: "Take as directed!"

- DON'T skip doses or fail to use the entire course of antibiotics as prescribed. Giving an antibiotic willy nilly or stopping short of the whole course can prove far worse than not using antibiotics at all.
- DON'T start using an antibiotic you happen to have "left over from the last time." This is a really bad idea not only because of what has already been explained, but also because you should never have any antibiotics ever "left over" to begin with. (That is, unless you have to suddenly stop an antibiotic for a legitimate, doctor-directed reason or your pet dies.)

Not so sure your veterinarian is on board with these by-now well-accepted tenets of appropriate antibiotic use? Get a second opinion. It is never OK to live with uncertainty on this crucial issue. And just in case you're the kind that likes to be more self-reliant than most, consider getting even better educated on the subject. For more detailed reading on what's right and not right in the world of antibiotics in animal health, check out The Bella Moss Foundation. This UK group is dedicated to the responsible use of antibiotics worldwide and its comprehensive website always of-

fers the most practical and up-to-date information on the subject.

ASPCA'S Top Ten Pet Poisons

AGR's Home Evaluators are trained to look for things that could be hazardous to a Golden in a potential adoptive home. Some of the things they look for are in this list. If any such item is found where a Golden could get at it, the homeowner is alerted and the situation is discussed. Please check your own homes at least once a year for things that might not have been put away properly in a cabinet or on a high shelf where they cannot be reached by a dog or cat.

Human Medications, the #1 cause of pet poisonings – prescription and over-the-counter drugs such as painkillers, cold medications, antidepressants and dietary supplements. Imodium can mask underlying causes of diarrhea, like parasites. Drugs like Pepto Bismol contain aspirin, which can irritate a dog's digestive tract and cause severe damage to cats. Ibuprofen can cause ulcers and bleeding in the intestinal tract and damage the kidneys; high doses can cause fatal renal failure. Acetaminophen, the key ingredient in Tylenol, is toxic to dogs and cats because the liver enzyme responsible for its breakdown works differently in cats and dogs than it does in people – one dose can kill a cat. Pets often snatch pill vials from counters, kitchen islands and nightstands or gobble up medications accidentally dropped on the floor, so it is essential to keep meds tucked away in hard-to-reach cabinets.

Insecticides – misuse of flea and tick products, especially, such as applying the wrong topical treatment to the wrong species. Thus, it is always important to talk to your pet's veterinarian before beginning any flea and tick control program.

People Food – people food like grapes, raisins, avocado and products containing xylitol (sugarless gum) can seriously disable our fur kids. One of the worst offenders, chocolate, contains large amounts of methylxanthines, which, if ingested in significant amounts, can cause vomiting, diarrhea, panting, excessive thirst, urination, hyperactivity, and in severe cases, abnormal heart rhythm, tremors and seizures.

House Plants – many varieties (see list of *Toxic Plants* on p 41).

Veterinary Medications – non-steroidal anti-inflammatory drugs, heartworm preventatives, dewormers, antibiotics, vaccines and nutritional supplements can be damaging if misused or improperly dispensed. Keep all pet medications out of reach of your pets.

Rodenticides – many baits used to attract rodents contain inactive ingredients that are attractive to pets as well. Depending on the type of rodenticide, ingestion can lead to potentially life-threatening problems for pets including bleeding, seizures or kidney damage.

Household Cleaners – bleaches, detergents and disinfectants can cause serious gastrointestinal distress and irritation to the respiratory system.

Heavy Metals – lead, zinc and mercury, not music! Lead is especially pernicious, and pets are exposed to it through many sources, including consumer products, paint chips, linoleum, and lead dust produced when surfaces in older homes are scraped or sanded.

Garden Products – fertilizer exposure can cause severe gastric upset and possibly gastrointestinal obstruction; cocoa mulch smells wonderful (like chocolate) but is especially toxic. Don't use it!

Chemical Hazards – chemicals such as ethylene glycol (anti-freeze), paint thinner, drain cleaners and pool/spa chemicals are a substantial danger to pets. Such chemicals can cause gastrointestinal upset, depression, respiratory difficulties and chemical burns.

*Prevention is really key to avoiding accidental exposure, but if you suspect your pet has ingested something toxic, please contact your veterinarian or the **Animal Poison Control Center's 24-hour toll-free hotline at 888-426-4435.***

Ear Infection Protection

Mix equal parts white vinegar and vodka and put in a dropper bottle. **Be sure your dog's ears are free of infection before using this preparation.** Put a couple drops in each ear twice a week. The alcohol will keep the ear canal dry and the acidity of the mixture will prevent the growth of yeast and bacteria. Administering these drops is especially important after the dog has been swimming.

Apples

Apples, in general, are good for dogs, as are other fruits and vegetables. Apple seeds are NOT good for any animals. The seeds of members of the apple family contain cyanogenic glycosides. If the seed hull is broken, such as by chewing on the seed, a cyanide compound will be released. If consumed in large enough quantity, such seeds can be fatal. So, take the seeds out before giving apples to your dog!

Treats for Allergy Dogs

Recommended by a vet tech at **Academy West Animal Hospital**: To make treats out of whatever special food your dog eats: add water and soak the dry kibble you use for your dog's meals until you can make it into a dough. Shape into balls and flatten; if desired, cut shapes with cookie cutters. Bake for 15 minutes at 350°. Cool before treating your dog.

How Often To Bathe a Dog?

That all depends on your pet. Factors include: his hair coat and hair length, how often he gets dirty, where he lives (if he is indoors or outdoors most of the time), his shedding cycle, and any underlying skin problem. Some dogs need baths only a couple of times a year, while others need weekly grooming. It is beneficial to brush your dog about twice a week. Bathing your dog every month or two is not unreasonable, but some dogs, especially outdoor dogs, will need more frequent cleanings. A good rule of thumb is to bathe your pet when his coat gets dirty or begins to smell "doggy."

Toxic Plants

*There are many common foods, plants and flowers that can be very toxic to your dog. Below is a list of the most common types. An * indicates that a substance is especially dangerous and can be fatal. Confirm that you do not keep any of these plants in house or yard. Get complete list from ASPCA's website: <http://www.asPCA.org/pet-care/animal-poison-control/toxic-and-non-toxic-plants>.*

Almonds*	Hydrangea*
Amaryllis bulb*	Holly berries
Apricot*	Iris corms
Autumn crocus*	Jack-in-the-pulpit*
Avocado (leaves, seeds, stem, skin)*	Jimson weed*
Azalea (entire rhododendron family)	Kalanchoe*
Begonia*	Lantana*
Bird of Paradise	Larkspur
Bittersweet	Lily (bulbs of most species)
Bleeding Heart*	Lily-of-the-Valley
Boxwood	Lupine species
Bracken fern	Marijuana or hemp*
Buckeye	Milkweed*
Buttercup	Mistletoe berries*
Caladium*	Monkshood*
Calla Lily*	Morning Glory*
Castor bean* (can be fatal if chewed)	Mountain Laurel
Cherry	Narcissus (Daffodil)
Chinese sacred or heavenly bamboo*	Oak* (remove bark for use as a bird perch)
Chokecherry (unripe berries)*	Oleander*
Chrysanthemum (a natural source of pyrethrins)	Onions*
Clematis	Peaches*
Crocus bulb	Pencil cactus plant* (Euphorbia species)
Croton	Philodendron (all species)
Cyclamen bulb	Poinsettia
Daffodil (Narcissus)	Potato (leaves and stem)
Delphinium	Rhubarb leaves*
Dumb cane (Dieffenbachia)*	Rosary Pea* (can be fatal if chewed)
Elderberry (unripe berries)	Schefflera
English ivy	Shamrock (Oxalis species)*
Fig (Ficus)	Spurge (Euphorbia species)*
Four o'clocks	Tomatoes (leaves and stems)
Foxglove (Digitalis)	Umbrella Plant (Schefflera)
Garlic*	Yew*
Hyacinth bulbs	

Online Pet Meds

When you have multiple dogs, it is much cheaper to buy Frontline®, Heartgard® and other prescriptions online, unless your vet is willing to match prices (never hurts to ask). But online ordering of pet meds can get you expired meds, counterfeiting, incorrect prescriptions, etc. so caution is needed. Companies that are legitimate and safe are registered with VIPPS. Link for safe online pet med ordering: <https://safemedsonline.org/resource/find-a-certified-vipps-online-pharmacy/>

Homemade Liverwurst Pill Pockets

These "pill pocket" treats are really simple to make. When it's time for your dog to take his medicine, simply take a "dough" ball and hide the pill in the center. Then offer it to your dog like a treat.

- 3/4 cup plain shredded rice cereal
- 3 ounces Liverwurst (room temperature)
- 2 ounces cream cheese (room temperature)

Place shredded rice in a bag and crush using a rolling pin. Mix liverwurst and cream cheese together until smooth. Mix with shredded rice. Roll into small balls the size of gum drops. Store in the refrigerator in a resealable plastic bag or container. Will last 7 to 10 days.

Diabetes in Dogs

Diabetes mellitus is a disease of the pancreas. It is the failure of the pancreatic beta-cells to regulate glucose (blood sugar), which is a vital substance that provides energy and must work inside the cells. Insulin allows glucose to leave the bloodstream and pass inside the cells. Without an adequate amount of insulin, glucose is unable to penetrate the cells. Left untreated, diabetes causes glucose to accumulate in the blood, which can be fatal. Though many diabetic dogs lose a dramatic amount of weight prior to a diagnosis, some become more bloated, which is hard to notice if the dog is overweight already. Fatigue is another warning sign; thirst and constant urinating are also symptoms. Sight loss is a side effect of canine diabetes. Urine and blood tests can confirm the diagnosis of diabetes. A feeding routine is a priority in keeping diabetes in check, since meals and administering insulin must be done every 12 hours. If you feel your dog may be showing signs of the disease, check with your veterinarian right away. The earlier diabetes is identified, the faster you may be able to bring it under control. Canine diabetes is a real and serious disease. But, if treated properly, diabetic dogs can live a happy, normal life. For more information on canine diabetes, visit <http://www.caninediabetes.org>

The Green Bean Diet

When **14-033 Dolly** came into Rescue, she was a little over 8 years old and weighed 113.6 pounds. She was so overweight she had a lot of difficulty getting up off the floor and could barely waddle! She was started on the "green bean diet" right away. This is not a meal plan where you just add green beans to the kibble. You have to reduce the amount of kibble you would normally use by half and add green beans (canned with no salt added, frozen, or fresh are best). The green beans add filler but few calories. If your dog will not eat green beans, try broccoli, cauliflower, zucchini and/or yellow squash. The ideal weight loss should be ½ to 1 pound per week. **Dolly** got down to a svelte 78 pounds, but it took a year! She galloped out to get the newspaper every morning and could chase the rest of the Orwig pack around the back yard! **14-034 Jaxx** has had similar weight-loss success, and **12-108 Mia** lost 55 pounds on the green bean diet! They should all live longer, healthier lives! **Dolly** was almost 14 when she passed away.

Connie's Wheat-Free Pumpkin Peanut Butter Dog Cookies

- 5 cups brown rice flour (plus ¼ cup to add if needed and to flour rolling surface)
- 2 tablespoons flax seed
- 1 ½ cups pumpkin puree (not pumpkin pie filling)
- 4 extra large eggs, beaten
- 4 tablespoons creamy peanut butter
- 1 teaspoon ground cinnamon
- ¼ cup water as needed to make dough workable

Preheat oven to 350° F.

Mix the "wet" ingredients first: pumpkin puree, eggs, and peanut butter in one bowl. Next mix the dry ingredients: flour, flax seed and cinnamon in a large bowl. Mix the dry with the wet to make crumbly dough. Separate into 3 balls to make easier to roll if you are going to use cookie cutter. Add water or flour as needed to keep dough workable. If you pinch a piece and it crumbles, add a little water; if it is really sticky, it is too wet and you will need to add a little flour. Gather the dough together and form into a ball. Place on a lightly-floured work surface and roll it out to about ¼-inch thickness. You can either use a cookie cutter to cut out cute shapes, or just cut into squares with a knife. Gather the scraps together and roll them out again and again until dough is used up. Place the cookies on a baking sheet – they can be crowded pretty close together since they do not expand much. Alternatively, I simply press the dough into a 10" x 15" cookie sheet and spread to edges with my fingers. Then I use a pizza cutter to score the squares. Bake for 30 minutes for hard treats. Let cool and store in freezer.

Bloat

By Teri Guilbault

Bloat is a very serious health risk for many dogs, yet many dog owners know very little about it. Research has shown that it is the second leading killer of dogs after cancer. Golden Retrievers are high on the list for being susceptible to this condition. One of our beloved rescues went to the Bridge as an unfortunate casualty of bloat. If you suspect bloat, take your dog to a vet immediately!

The technical name for bloat is “Gastric Dilatation-Volvulus” (“GDV”). Bloating of the stomach is often related to swallowed air (although food and fluid can also be present). It usually happens when there’s an abnormal accumulation of air, fluid, and/or foam in the stomach (“gastric dilatation”). Stress can be a significant contributing factor also. Bloat can occur with or without the stomach twisting. As the stomach swells, it may rotate 90° to 360°, twisting between its attachments at the esophagus and the upper intestine. The twisting stomach traps air, food, and water in the stomach. The bloated stomach obstructs veins in the abdomen, leading to low blood pressure, shock, and damage to internal organs. The combined effect can quickly kill a dog. Be prepared! Know in advance what you would do if your dog bloated. Unfortunately, from the onset of the first symptoms there is very little time to get immediate medical attention. Best rule of thumb for this, and any other medical condition, is: *know your dog and know when it’s not acting right*. Typical symptoms often include some of the following:

- Attempts to vomit that are unsuccessful
- Dog does not act like its usual self, a very early warning sign and the only sign that almost always occurs
- Significant anxiety and restlessness
- Hunched up appearance
- Lack of normal gurgling and digestive sounds in the tummy
- Bloated abdomen that may feel tight
- Pale or off-color gums
- Excessive drooling
- Coughing
- Foamy mucus around the mouth
- Unproductive efforts to pass stool
- Pacing and whining
- Heavy or rapid panting, or shallow breathing
- Unable to stand, or collapses
- Accelerated heartbeat

If you believe your dog is experiencing bloat, please get your dog to a veterinarian immediately! Bloat can kill in less than an hour, so time is of the essence. Call your vet to alert them you’re on your way with a suspected bloat case. Better to be safe than sorry!

Here is a partial list of things that you can do to reduce the risk of bloat developing in your dog:

- Avoid highly stressful situations or try to minimize stress as much as possible.
- Do not exercise for at least an hour or longer before and especially after eating.
- Discourage rapid eating – if your dog “inhales” his or her food, there are specialized bowls that you can purchase that are compartmentalized to make it harder to consume food as quickly.
- Feed two or three smaller meals a day versus just one larger one.
- Allow access to fresh water at all times except for one hour before or after a meal.
- When switching dog food, do it gradually – over a period of weeks is suggested.
- Do not feed dry food exclusively, but if you do, avoid foods containing fat as one of the first four ingredients, avoid foods that contain citric acid, and select a food that includes rendered meat meal with bone product among the first four ingredients.
- Discourage rapid or excessive drinking.
- Use of an elevated food bowl has been debated by many well-known veterinarians – some recommend only bowls that are elevated, and some say not to use them.

A couple tips which are always good rules of thumb:

- If your regular vet doesn’t have 24-hour emergency service, know which nearby vet you would use – keep the phone number handy.
- Always keep a product with simethicone on hand (Mylanta Gas (not regular Mylanta), Gas-X, etc.) in case your dog has gas. If you can reduce or slow the gas, you’ve probably bought yourself a little more time to get to a vet if your dog is bloating.

There are many very useful articles on the Internet with suggestions on how to help your dog avoid this condition or how to recognize this condition if it happens. Suggestions in this article were adapted from <http://www.globalspan.net/bloat.htm>

Dental Care for Dogs

By Teri Guilbault and Liz Tataseo

Your dog’s teeth should be cleaned regularly, including a good dental cleaning by your vet. Plaque is the beginning of dental disease. Bacteria and calcium in saliva form plaque, which then forms more of a substance that vets call calculus (not the math kind) and, if nothing is done, more plaque continues to form. Too much plaque can cause gingivitis of the gums – inflammation that is red and swollen. If your dog eats hard food or chews on toys like

Kongs® or Nylabones®, this initial soft plaque can be dislodged, keeping your dog's teeth clean, but there are still places in a dog's mouth where this chewing action doesn't reach. Check out <https://www.everydayhealth.com/pet-health/bad-pet-breath-causes.aspx>

Here are the signs of trouble in your dog's mouth:

- Bad breath
- Excessive drooling
- Inflamed gums
- Tumors in the gums
- Cysts under the tongue
- Loose teeth

Those last three symptoms are really not good! As with humans, dental disease can lead to other illnesses: heart problems, kidney issues and major infections.

Your regular vet is quite adept at doing dental cleaning and extractions, and at treating gum issues. Vets may want to do X-rays so they can see if there are any hidden issues that need to be treated. Usually, they will want to do blood work prior to a dental, if that hasn't been done before or for a year or more, to make sure your dog is healthy enough for the anesthesia. A vet usually refers a dog to a dental specialist if the scope of the issue is beyond what a regular dental cleaning/extraction/treatment can do. Dental vets also specialize in doing regular dental cleaning for dogs that have chronic health issues and need special care for their dental cleaning.

You can help your dog keep good dental health by brushing his or her teeth regularly. Brushing will help prevent the decay, calcification and infection that could be potentially harmful to your dog down the road, and the gentle massage of the toothbrush will stimulate your dog's gums as well. Some dogs enjoy it and others need to gradually work up to that. You can start by using a piece of gauze wrapped around your finger and rub in a circular motion in one area of the mouth at a time. Most of the buildup occurs on the surface of the outer portion of a tooth because those teeth touch the cheek. The inside surface of a dog's tooth gets little buildup, so if your dog doesn't want you to clean the backside of his teeth, it's not something to worry about. Tooth brushing kits can be purchased at any of your local pet supply stores for a nominal amount. These have toothbrushes with small heads and very soft bristles.

CAUTION: Please do not use human toothpaste when brushing your dog's teeth! Dogs do not spit, and human toothpaste is not edible. Ingestion of human toothpaste can lead to digestive upsets. Or, use baking soda and water to make your own paste. Daily brushing is ideal, but even twice a week is better than not at all.

Here are some of the mouth problems and conditions that can occur without good dental care¹:

- Periodontal disease is a painful infection between the tooth and the gum that can result in tooth loss and spread infection to the rest of the body. Signs are loose teeth, bad breath, tooth pain, sneezing and nasal discharge.
- Gingivitis is an inflammation of the gums caused mainly by accumulation of plaque, tartar and disease-producing bacteria above and below the gum line. Signs include bleeding, red, swollen gums and bad breath. It is reversible with regular teeth cleanings.
- Halitosis, or bad breath, can be the first sign of a mouth problem when it is caused by bacteria growing from food particles caught between the teeth or by gum infection. Regular tooth-brushings are a great solution.
- Swollen gums develop when tartar builds up and food gets stuck between the teeth. Regularly brushing your dog's teeth at home and getting annual cleanings at the vet can prevent tartar and gingivitis.
- Proliferating gum disease occurs when the gum grows over the teeth and must be treated to avoid gum infection. An inherited condition common to boxers and bull terriers, it can be treated with antibiotics.
- Mouth tumors appear as lumps in the gums. Some are malignant and must be surgically removed.
- Salivary cysts look like large, fluid-filled blisters under the tongue, but can also develop near the corners of the jaw. They require drainage, and the damaged salivary gland must be removed.
- Canine distemper teeth can occur if a dog had distemper as a puppy. Adult teeth can appear eroded and may decay. As damage is permanent, decayed teeth should be removed by a vet.

So, when you brush your teeth, remember to brush your dog's teeth also. It will help your Golden live a healthier life.

¹ List of dental problems from <https://www.webmd.com/pets/dogs/video/dog-dental-care>

Epilepsy and Seizures

By Liz Tataseo

Unfortunately for Goldens, seizure activity is one of the more common neurological conditions that exist for these great dogs. But that is not a big number, it is 0.5% to 5.7% of all dogs.¹ Idiopathic epilepsy (repeated seizures over time with no known cause) is the most common form. It is considered an inherited disorder and usually manifests at a young age. Other causes that

can come on late in life include liver or kidney disease, infectious disease, brain tumors, brain trauma and toxins.

We have experienced dogs with brain trauma (literally shaken-baby syndrome in a very young puppy), infectious disease, a systemic-wide incidence of valley fever that invaded the brain, and older dogs that developed seizures secondary to disease issues. Unfortunately, the puppy had to be euthanized. The valley fever dog has recovered and did not need seizure medication.

A number of epileptic dogs have been surrendered to Rescue. These have mostly been male dogs, all of which after testing show no known cause, so they are considered to have idiopathic epilepsy. Research does indicate that more males than females have seizure activity. Neutering or spaying is not a factor.

Several of the surrendered dogs have come in stable and with continued medication will remain stable. Once started, seizure medication should never be stopped. Stopping can actually cause a rebound effect and cause more seizure activity and at a higher level.

Seizures usually occur at a time of change in brain activity: during excitement, feeding, falling asleep or waking up. While seizures appear traumatic to the owner, seizures are not painful for the dog. However, the dog may feel confusion and disorientation afterwards and take some time to recover. Usually, once recovered, they return to normal behavior. Based on research, dogs do not swallow their tongue during seizures, so don't stick your hand in a dog's mouth!²

An individual seizure or one lasting 2 to 3 minutes is not dangerous to the dog. However, if a seizure lasts longer than 5 minutes or there are multiple seizures one right after the other (i.e., cluster seizures), that is a life threatening situation – the dog should be taken to a vet immediately.

Age can be an indicator of what kind of epilepsy is manifested. In dogs up to one year old, it can be a congenital, hereditary, or a toxic or inflammatory disorder. A manifestation between one and five years of age is probably idiopathic epilepsy. A dog older than five may have neoplasia, metabolic or vascular diseases or inflammatory disorders as a cause of seizures. Examples include low blood sugar, brain tumors, fungal infections, distemper, encephalitis, stroke, head trauma, parasites or toxins such as lead, ethylene glycol (anti-freeze), and organophosphates (fertilizers).

Idiopathic epilepsy means no underlying cause can be diagnosed for the seizures. This usually means it is either genetic (inherited) or there is a structural cause. Structural could mean a birth injury which could cause seizures later in life – so hard to diagnose years after the injury. Several breeds have a high incidence of inherited epilepsy, including the Golden Retriever. It may be seen more often in the Golden because of the popularity of the breed. As noted before, males have a higher incidence than females.

The purpose of treatment with various anti-seizure medications is to reduce the frequency and severity of seizures. Epilepsy is not a curable disease. Treatment may fail if pills are forgotten or pills are spit out. Intestinal upset can prevent absorption of the medication and so can interactions with other drugs.³

Medications traditionally have been phenobarbital and potassium bromide (KBr). It can take 10 to 14 days for phenobarb to reach therapeutic levels, and often a dog can initially be doopey or slow to respond. Dogs usually become used to the dosage as therapeutic levels are reached and return to normal behavior. KBr is added if seizures are not well controlled by phenobarb alone, but KBr can take weeks to reach therapeutic levels.

Newer anti-seizure drugs include Levetiracetam (Keppra) and Zonisamide (Zonegran), which have fewer side effects than the traditional medications. These drugs appear to act sooner and cause less sedation in a dog. Sometimes they are used in combination with phenobarbital and KBr. Again, once anti-seizure medications are started, they must be given for life. Dogs can live a long and normal life with epilepsy as long as care is taken to continue treatment.

¹ Bollinger-Schmitz, Kim and Kline, Karen "An Overview of Canine Idiopathic Epilepsy for the Small Animal Practitioner", Iowa State University Veterinarian, Volume 62, Issue 1, Article 14

² Ward, Ernest DVM, Client Information Sheet, VCA Animal Hospitals

³ Child, Georgina, "Seizure Disorders in Dogs", Small Animal Hospital, Richardson Place, NSW

Dogs and Their Eyesight

By Teri Guilbault

Dogs normally have great senses of sight and smell, but like humans, sometimes their eyes aren't always as clear as they used to be. Take some time and look your dogs right in the eyes. Do their eyes still look bright and shiny, or are they starting to cloud over just a bit? Does it look like maybe there's something just not quite right, or is it just maybe you've noticed that there's some unusual eye tearing and extra moisture around them? Dogs, like humans, can develop cataracts as they age and even earlier. High cholesterol can also cloud their eyes, and yes, they can lose their sight entirely if they develop an eye condition and it's left untreated. Inverted eye lashes (entropion) can cause their eyes to water excessively, and the lashes may need to be removed or surgery done on the eyelid to correct the problem.

12-112 Bailey was a wonderful 8-year-old Golden Retriever who was surrendered to us when, due to financial difficulties, her owner had to move. When we picked up this poor girl, we discovered that she had a myriad of health issues, but, most importantly, she had the most horrible-looking eyes that you could ever imagine,

particularly her right eye. We immediately transported her to **Animal Medical & Surgical Center** for a complete health evaluation, overhaul, and a big question: What IS going on with those eyes?



Bailey was immediately diagnosed with KCS (keratoconjunctivitis sicca) or Dry Eye Syndrome. A diagnosis is made by measuring the volume of tears in the dog's eyes. A Schirmer tear test which was performed involves placing a filter paper strip into the tear pool at the inner corner of the eye and leaving it for one minute to see how much of the strip gets wet. A normal strip would be wet to a distance of 20 mm. In dogs with Dry Eye, the strip wets less than 10 mm. Bailey's strip was 0. There were no tears at all!

Dry Eye Syndrome in dogs is not much different from dry eyes in humans. It is a tear gland disorder that prevents normal production of tears, and hence, a dry cornea. Dogs with Dry Eye normally have a dull and opaque look as opposed to that bright and glistening sheen you see when you look at your dog's healthy eyes.

There are several causes for KCS in dogs. The most common cause, however, is an ongoing immune-related issue. It can also be caused by injury to facial nerves or to the tear glands themselves or, in rare instances, a genetic absence of tear glands, but that is normally seen in smaller breeds of dogs.

Some of the symptoms of KCS are:

- excessive blinking
- swollen blood vessels and tissue that line the eyelids and eye surfaces
- discharge of mucus or pus from the eyes
- corneal changes in the blood cells with pigmentation and ulceration.

Treatment of this disorder is normally a frequent application of an ophthalmic cyclosporine, which is an immunosuppressive drug that reverses immune-mediated destruction of the glands surrounding the eyes. Once a diagnosis has been made, treatment becomes life long. Treatment can also include the application of artificial tears and topical antibiotics until the tear volume increases and again becomes adequate.

If left untreated, KCS can cause severe eye ulceration and glaucoma. A severe case of KCS can lead to impaired or complete loss of vision. In **Bailey's** case, there were more medical problems than just the poor condition of her eyes. We had to send her to the Bridge only a little over a month after we rescued her.

Please always keep watch over your wonderful furbuddies for any changes in their behavior or appearance that may indicate some-

thing amiss. Unfortunately, most issues don't go away on their own but only get worse over time. We all owe it to our babies to keep them as healthy and happy as possible. If you notice anything unusual about your dog's eyes, don't hesitate to ask your veterinarian about it. If there are problems with your animal's eyes, excellent veterinary ophthalmologists are available in the Valley to assist in treating those problems. Your fur kid loves to watch you. Be his hero and keep watching over him.

Information obtained for this article was taken from conversations with Dr. Levine at **AMSC**, www.petmd.com/dog/conditions/eyes/c_dg_keratoconjunctivitis_sicca and <https://education.webmd.com/viewarticle/999442>

Eye Problems: Glaucoma and Cherry Eye

By Liz Tataseo and Deb Orwig

Does your Golden hold either eye closed, paw at it, or do you see the third eyelid (red/pink membrane) covering the eye? Your Golden may be experiencing eye pain which could be due to glaucoma. Other symptoms are a red, teary, cloudy eye with a blue hue and squinting. You may also notice that one eye is bigger than the other, or both may appear larger than normal. This is due to the fluid buildup in the eye and is a dangerous situation for your dog. Dogs which have a sudden eye swelling need to go to the vet immediately.

There are two types of glaucoma in dogs: primary glaucoma, which is inherited and comes on very suddenly, and secondary glaucoma, which comes about as a result of an eye injury or infection. Golden Retrievers can have an inheritable inflammatory condition called "Golden Retriever Uveitis," which can cause blindness if untreated, but even if treated this condition can lead to glaucoma. This is what has occurred in my boy **Gonzo**, who had glaucoma in his left eye for several months as a result of uveitis, was blind in that eye, and had to undergo a treatment to permanently reduce the pressure in his eye.

Due to the swelling in the eye, the optic nerve can be damaged and vision becomes limited or can progress to blindness in the eye without treatment. Treatment, if in the early stages of glaucoma, is most often eye drops that reduce the pressure in the eye, although the drops can cease to work over time.

You can test your dog's vision by bringing your hand, palm forward, towards the eye from the side of his head slowly so as not to create air currents. A sighted dog will react by blinking or turning toward your hand, but if the vision is impaired the dog will not react.

Treatments when the pressure cannot be controlled by eye drops include Cyclophoto Coagulation and Ciliary Body Ablation. Both procedures kill the ciliary body cells that produce the aqueous humor (eye fluid) which causes the buildup of pressure in the eye.

The first is a surgical laser procedure and the other is an injection of an antibiotic called gentamycin. The laser treatment can be used for dogs that still have eyesight. The ablation procedure causes total blindness so would not be used if the dog has sight in the eye.

Other treatments can include cyclocryotherapy (freezing the ciliary body) or shunts to drain off the fluid, but

both can have post-procedure complications before recovery. Another option: If there is total blindness and the pressure cannot be reduced with other treatments, the eye can be surgically removed with few complications afterward. Also, for those who want a cosmetic solution, the dog can have an intraocular prosthesis implanted inside the eyeball after the eye contents are removed.

Glaucoma is the leading cause of blindness in dogs and is usually detected after damage has occurred to the eye or the eye has literally blown out due to the pressure. Dr. Joanna Norman of Eye Care for Animals suggests all dogs, especially Golden Retrievers, have an eye exam by the time they reach seven years of age, then have one yearly to detect eye changes, diseases and possibly the early stages of glaucoma.

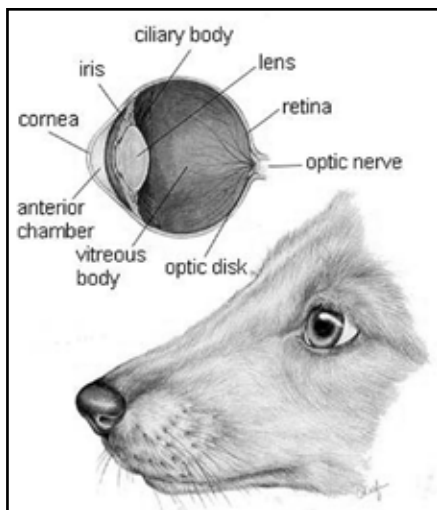
References: <http://www.eyevet.ca/glaucoma.html>, *EyeCare for Animals* in Avondale; https://en.wikipedia.org/wiki/Ciliary_body

Cherry Eye



AGR recently took in 8-year-old **24-040 Zeus**, a Goldendoodle that has cherry eyes. The owner told us **Zeus** had always had them, they didn't seem to bother him and he was not on any treatment for them. We intend to have his eyes evaluated anyway.

What is cherry eye? All dogs possess a third eyelid at the inner corner of their eye. Dogs with cherry eye have a weak attachment between the tear gland and the third eyelid, which can cause it to dislodge and a small, pinkish-red bulge (which shows as white in the above photo) will manifest on the inner corner of one or both eyes. Untreated cherry eye can lead to conditions like dry eye (see page 46 about Keratoconjunctivitis sicca). Often, surgery to remove the third eyelid is done. The dog will then need to be treated with lubricating eye drops for the rest of his life.



Eye and Ear Problems: Uveitis and Vasculitis

By Liz Tataseo



Meet **Gonzo**, who was my medically-needy Golden. I called him that because during his 13+ years of life he had many visits to the vet for small and large "incidents" needing treatment. Torn dew claws, stomach surgery for chicken carcass removal (don't ask), immune-mediated myositis (a painful auto-immune

disease that prevented him from opening his jaws), lymph node aspirations and thrombocytopenia (low platelet count). So, when I saw the small open sores on his inner ear flaps, it was not a big deal especially since his one-year-old fur brother continued to "help" by licking them when he could, which did not help. They went away with cleaning and medication but came back along with some crusty, yellow crud around his ear tips.

Off to the vet for antibiotics, a fungal test and blood work. His blood work was great. The sores went away but not the crusty stuff – now the tip of his ear had black crusty stuff. We went back to the vet for a referral to a dermatologist. Dr. Schick at *Dermatology for Animals* in Avondale examined him all over, said this was probably vasculitis but didn't like the way his eyes looked and had Dr. Norman, an ophthalmologist, give him a quick check. Sure enough, there was something else. We had a full eye exam by Dr. Norman after our dermatology appointment, and she confirmed uveitis in both eyes, an inflammation of the middle layer of the eye. There is actually a form of this disease called "Golden Retriever Uveitis." Without treatment, blindness can occur. What are these two conditions and what causes them?

Ear margin vasculitis is a condition of ear margins, (tips, edges) where the tiny vessels on the edges of the ears collapse or become inflamed due to an aberrant immune response, and can lead to blood-starved areas, which can lead to necrotic areas (tissue death). If this is not treated, the ear edges can turn black, hard, and leathery. Once this stage has been reached, cracking and bleeding can occur and the ear tips can die and fall off. Vasculitis can also occur in other parts of the body including feet, nail beds and internally.

There can be different reasons for this type of immune response:

- Extreme cold can constrict the tiny blood vessels and result in this effect on the edges of natural and cropped ears
- Reactions to rabies vaccine is believed by some to be a cause of this condition. There are ongoing studies on this type of vaccine reaction.

- Tick fever
- Valley fever
- Bacterial, viral or fungal infections
- Lupus
- Cancer

There can also be no known cause. **Gonzo** was negative for tick fever and valley fever and was being treated with a drug called Pentoxifylline that helps increase blood flow by making the blood cells more flexible and by opening up capillaries. It was important to have a complete eye exam, because if a dog has uveitis with hemorrhaging of the retina or a blood clotting problem elsewhere, the Pentoxifylline could not be used.

Uveitis is an inflammation of the middle layer of the eye, the layer under the clear cornea and white sclera. This inner area has a rich blood supply and nourishes the retina and also contains the ciliary body which produces the fluid inside the eye. Nontreatment can lead to corneal ulcers, ocular infections, cataracts, retinal detachment, glaucoma and blindness, just to name a few. Uveitis can be caused by most of the reasons listed above for vasculitis, but according to research, in 75% of the cases the cause is never determined.

Gonzo also had a cancer screening with abdominal ultrasound, chest X-rays and urine analysis by an internal medicine specialist. All negative. He fell into the category of no known cause. **Gonzo** was on Pentoxifylline and doxycycline or equivalent for the rest of his life, but his ears healed completely.

Overt signs of uveitis are:

- squinting and rapid blinking or rubbing of the eyes; excessive green or yellow discharge
- swelling of the eye or eyelid
- a change in color of the iris, especially cloudiness or redness

Gonzo had to take drops of prednisolone acetate, a corticosteroid, twice a day. In hindsight, I remember some squinting and blinking, but these were not excessive. He eventually did develop glaucoma due to the uveitis and was blind for the last two years of his life, but he continued to go to Meet-and-Greets and enjoy life up to the end. These are not uncommon conditions. Your vet normally will examine the eyes and ears of your dog and can detect unusual changes in both. It is important for the dog parent to be on the lookout for changes in a dog's physical condition. With **Gonzo**, it was always something, but he lived a good long life. I am very glad I had canine health insurance for him and my other dogs!

Heart Issues: Heart Murmurs in Goldens

By Teri Guilbault

The heart maintains circulation of blood in the body. It is a four-chambered organ containing right and left atria (upper chambers) and ventricles (lower chambers). The right side pumps deoxygenated blood returning from the venous system in the body into the lungs. From the lungs, oxygenated blood enters the left side of the heart where it is pumped out into the tissues of the body through the arteries.



In 2012, we took in a lovely lady, **12-065 Lucy**, a two-year-old, Golden Retriever, who was surrendered to our organization as her owners were downsizing and, unfortunately, could not keep her. When she came in, we were told she had a heart murmur. One of our vets confirmed that there was definitely a murmur. To conclusively determine exactly the extent of the murmur,

we had additional testing done on her. A diagnosis of subaortic stenosis (SAS) was confirmed, and we were told that **Lucy's** gradient was very severe at 7.7. Normally, dogs with a murmur to this degree do not live to their first birthday – we hoped she would survive for many more years. Update on 7-11-20 from her adopter: *Lucy is still with us – she just turned 10 years old! Her heart condition has worsened in the last year, and she's now on a full regimen of medications to moderate her heart rate and keep fluid from building up. We've been assured she's in no pain and she's still her normal happy self, so we're going to continue to care for her. We know there is no cure, but we love Lucy very much and it's hard to let her go.* They had to help her to the Bridge in spring 2021 at age 11. The adopters felt they had gotten a lot more years with her than they thought they would. **AGR** sincerely thanks them for taking such good care of **Lucy** for so many years.

Subaortic stenosis (SAS) means a narrowing of the area just below the aortic valve, usually due to the presence of an abnormal fibrous band of tissue. The narrowing causes pressure overload in the left ventricle. SAS in dogs is often discovered when a heart murmur is detected during a routine physical examination of an otherwise healthy puppy. In severe cases, the arterial pulse may be weak, but generally puppies appear bright, alert, and happy. In older animals, symptoms such as exercise intolerance, general fatigue, and fainting can occur. In the most unfortunate cases,

A Healthier Gut Equals a Healthier Pet!

An allergy is an immune response to what is seen as a foreign invader by the immune system. Since an unhealthy gut leads to inflammation and a weakened immune system, keeping the gut as healthy as possible simultaneously enhances the body's natural ability to defend against allergens. A probiotic supplement can be incredibly helpful. Ask your vet for a recommendation.

dogs with SAS can die suddenly following development of severe ventricular arrhythmias. A definitive diagnosis is made during an echocardiogram to measure the pressure gradient between the left ventricle and the aorta. In dogs with SAS, the pressure gradient is abnormally increased and correlates with the severity of the stenosis.

This condition can be congenital (present at birth) or develop when the dog is a very young puppy. Other types of aortic stenoses exist, but SAS is by far the most common and represents more than 95% of the cases. As with other breeds of dog such as Newfoundlands, Rottweilers, Boxers, German Shepherds, Samoyed and Bulldogs, the Golden Retriever is a breed that has shown to have a high prevalence of this condition. In **Lucy's** case, her SAS was congenital, as it was more recently in **23-032 Winnie**.

The prognosis for SAS depends on the severity of the stenosis and the presence or absence of other cardiac issues. Puppies with mild murmurs (Grade I or II) and low pressure gradients will likely plateau in severity of their SAS by one year of age and often lead normal lives. In general, the louder the murmur, the more severe the condition, but exceptions do exist. Puppies diagnosed with SAS should be reevaluated at one year of age to assess any changes in their cardiovascular status.

Two-month-old **23-032 Winnie** not only had congenital SAS, but she was also diagnosed with patent ductus arteriosis (PDA), which is a persistent opening between the two major blood vessels leading from the heart. **Winnie** had catheterization surgery to correct the PDA.



Dogs with moderate pressure gradients may remain asymptomatic or rarely progress to congestive heart failure. If congestive heart failure does occur, then the dog would be prescribed medication in order to help prolong the quality and length of life. Surgery is an option, but this procedure is rarely performed on animals, as there are no studies that prove any prolonged life expectancy. Inserting a balloon to dilate the affected area can also sometimes be done, but any positive effects are not long lasting.

Ed. Note: Some of the information above was taken from a pamphlet published by Penn Veterinary Medicine, Matthew J. Ryan Veterinary Hospital Section of Cardiology at the University of Pennsylvania

Hypothyroidism

By Teri Guilbault

As we mature, we tend to gain a few more pounds, our skin changes texture (did I mention wrinkles?), our hair tends to thin or just plain fall out, we tire a little more easily, we are more sensitive to cold weather and we tend to get a little crabby. When our beloved

furkids get older and show these types of symptoms, we are concerned because that is usually a sign that something is amiss.

Hypothyroidism in dogs, or basically a sluggish or inactive thyroid, can cause many problems in dogs, including those issues that I mentioned above. Hypothyroidism is thought to be the most common genetic illness in dogs. This disease causes alterations in a dog's cellular metabolism and, as a result, affects the entire body. It can also be a contributing factor to seizures in dogs. But while there is a genetic predisposition for thyroid disorders, environmental factors such as pollutants and allergens can also play a role. Hypothyroidism usually affects middle-aged dogs (ages 4 to 10) of medium to large breeds, and may be more common in spayed females and neutered males. It can affect all breeds, but is often found in Golden Retrievers, Labrador Retrievers, Doberman Pinchers, Irish Setters, Dachshunds, Boxers and Cocker Spaniels. Untreated hypothyroidism can cause a lower quality of life for your dog, but the good news is that with the right medication, it is easy to treat.

A suggestion for helping to lower a dog's risk for seizures resulting from hypothyroidism is to make sure that your dog is in an environment as free of chemical pollutants as possible, as there are a number of chemicals that can cause seizure activity in dogs. Diet can also help. Dog foods should be as preservative-free as possible, as certain types of preservatives can also cause seizure activity. In addition, there has been discussion over the Internet about switching dogs over to a raw, organic diet to help control and lessen the likelihood of seizures, and that regular preventative vaccinations for your dog can also play a part in lessening seizures.

If you suspect that your dog may have hypothyroidism, please talk to your veterinarian – he/she is always the best resource for your animal's health. Your vet can run a Total T4 or an FT4, which are recommended blood tests to screen for this disease. As always, your veterinarian will best be able to determine a course of treatment. The initial testing to confirm this disease is normally the biggest expense that you would incur. Thyroid replacement medications such as Soloxine (levothyroxine) are a replacement for the hormone that the thyroid gland normally produces to regulate the body's energy and metabolism and are not very expensive. Online pet pharmacies or retailers such as **Costco** offer medications at very reasonable prices. Depending on the dosage, costs normally run \$15 - \$40 per month. Regular retesting will ensure that your dog's thyroid level is within the normal range. Once a dog's thyroid level has been stabilized, then normal testing would occur every 6 to 12 months.

Information for this article was taken from the following sources:

<http://www.drsofostersmith.com/pic/article.cfm?aid=2030>
<http://dogs.about.com/od/caninediseases/p/Canine-Hypothyroidism-Diagnosis-And-Treatment-Of-Underactive-Thyroid-In-Dogs.htm>
<http://www.thyroid-info.com/articles/dog-hypo.htm>
<http://thyroid.about.com/cs/catsdogspets/a/hypothyroiddogs.htm>
<http://www.vetinfo.com/seizures-from-hypothyroidism-in-dogs.html>

IBD: Irritable Bowel Disease

By Liz Tataseo

IBD is a chronic disease of the gastrointestinal system. If your dog has experienced chronic vomiting or diarrhea over a period of time and regular medication has given no relief, he or she may have IBD. It involves the accumulation of inflammatory cells that line the stomach, small intestine, large intestine or a combination of all three. The mechanisms of IBD are not well known, but it is thought to result from responses to diet and/or bacteria or overuse of some medications. Depending on the severity of IBD, it can also involve diarrhea with blood and mucous present (colitis).

While fecal tests, X-rays or blood work can rule out specific causes of vomiting or diarrhea, the only way to diagnose IBD is through biopsies of the tissue in the stomach or intestines. Also, there are many types and severities of IBD, so it is important to get the proper diagnosis in order to treat effectively. Types of IBD are classified by the end result of the disease, not by the causes, as those are still nebulous.

Lymphoplasmacytic Enteritis: This is the most common form of IBD and results from an overabundance of white blood cells, lymphocytes and plasma cells in the lining of the gastrointestinal tract. This accumulation causes inflammation that can result in scar tissue and irreversible cell damage.

Eosinophilic Enteritis: This form is caused by a dietary protein (food allergy reaction). It is necessary to find the right protein that the dog will tolerate. In many cases it is a “novel protein” like bison or venison.

Antibiotic Responsive Diarrhea: Overuse of medications can destroy intestinal bacteria, or an overgrowth of one particular type of bacteria can cause inflammation.

Other: Any disease that produces inflammation such as fungal disease, cancer, heart failure and chronic NSAIDs or steroid drug therapy can lead to IBD.

Treatment may include finding the right food that will not cause inflammatory reactions, along with drug therapy to calm down the inflammatory response. Steroids such as Prednisolone or Prednisone are the most common anti-inflammatory drugs which can cause improvement in one to two weeks. Budesonide is a newer steroid that is effective and has fewer side effects than Prednisone.

Other medications such as certain antibiotics can also be used to help with bacteria that may be exacerbating the inflammation. Metronidazole, Tetracycline and Doxycycline are examples of useful antibiotics.

Dogs that may have serious side effects or are not responsive to steroids may be treated with Cytoxan, Imuran or Leukeran. These drugs can cause bone marrow suppression, however.

Finally, long-term dietary management and low-dose drug treatment are necessary throughout a dog’s life, as IBD cannot be cured, only controlled.

Sources:

Blue Pearl Specialty & Emergency Pet Hospital

Eldredge, Debra M. DVM; Carlson, Lisa D. DVM; Carlson, Delbert G. DVM; Giffin, James M.D., Dog Owner’s Home Veterinary Handbook, Fourth Edition, Wiley Publishing, Inc.

Ward, Ernest DVM, VCA Animal Hospitals

Oral Issues: Your Dog’s Mouth

By Liz Tataseo and Deb Orwig

Check your dog’s mouth periodically to see if there is anything that might mean your dog has a health issue. Notice these: bad breath – a telltale sign of dental disease; gingivitis – inflammation, irritation and bleeding of the gums that develops from the buildup of bacteria between teeth and gums; peridontitis – symptoms include spots of blood left on toys, a brownish tartar build up on teeth, inflamed and sore-looking gums and dropping food from the mouth even though your dog has an appetite; mouth tumors – benign or malignant small to large lumps in the gums near teeth or on the inner jawbone area or lips; salivary mycocele – a large fluid filled sac or a large swollen mass under a dog’s neck or inside the mouth cavity resulting from a collection of leaked saliva due to a damaged salivary gland or salivary duct. Review the references below for the 8 common types of benign mouth tumors and 9 types of malignant oral tumors. One of the reasons oral tumors are so deadly is that if they are not found early, metastasizing occurs and by then it is too late to treat. Even nonmalignant tumors can cause major issues. Epuli arising from the bone can cause jaw bone disintegration that is virtually undetectable by sight. We have had several rescued dogs come in with epuli and two with bone involvement. Papillomas grow on a stalk and look like cauliflower; they can proliferate especially in an immune-compromised dog. Deb had a big surprise in February 2018 when she looked into **14-033 Dolly’s** mouth and found them growing all over the inside of her mouth. The danger arises when they grow down into the throat and can cause breathing and swallowing issues. Once **Dolly’s** “warts” were frozen and she was taken off the Cyclosporine that had been prescribed for over two years for allergy treatment, over time they all disappeared. Early detection and diagnosis of lumps and growths means a healthier, longer-lived dog.

References:

<https://vcahospitals.com/know-your-pet/oral-tumors-in-dogs-an-overview>

<https://www.natural-dog-health-remedies.com/canine-mouth-cancer.html>

Morbid Obesity

By Deb Orwig

Originally published in the November 2012 issue of *The Golden Paw*

One of our heartaches as rescuers is to have a dog come in that is morbidly obese. Synonyms for “morbid” are “gruesome,” “sickly” and “horrible.” When a dog weighs 1½ to 2 times more than it should, we use all those adjectives. We have all seen morbidly obese humans – have you ever watched *The Biggest Loser* on TV? We all know that being so overweight is not healthy. Morbid obesity will lead to a shorter life and, most likely, a myriad of health problems along the way. You have heard people blame their weight on their metabolism. Yes, a slow metabolism, such as one that might be caused by hypothyroidism, can certainly be a factor. But, the bottom line is that people and dogs gain weight because they consume more calories than their bodies burn up.

Unless a dog is a stray and hangs out by the back door of a restaurant where leftovers are tossed within easy reach, the only way a dog is going to weigh more than it should is if his or her providers – i.e., humans – allow it to eat more than it should. Part of the problem comes from the pet food industry. Do you follow the instructions on the bag regarding how much kibble to give your dog? Don't. More often than not, the food manufacturer will indicate quantities that are considerably more than a healthful amount for your dog. Why? Because they want to sell more food.

In 2012, Our Intake, Placement, and Health Care Teams and Board members had an online discussion about morbid obesity, as four of the dogs we took in during just one quarter were in this category: three females and one male. There have been numerous others every year since. We were and are concerned for the dogs' long-term health. We are concerned because we know these dogs will most likely have a shortened life span. We are concerned about placing these dogs with families and then having them die within a relatively short time. Not good.

Two comments have been particularly apropos... Kathy Blue pointed out: *It is not easy to change one's habits when it comes to spoiling our canine companions. It takes education, understanding and commitment. That's why we spend so much time at home visits educating on proper diet and how to determine an appropriate quality dog food... After taking over Dallas's care (my dad's dog) 18 months ago, and working with Dr. Harbo at Four Legged Friends, I have really had my eyes opened. You can literally spoil your pet into an early grave. There are alternative snacks like dehydrated sweet potato chips, green beans etc. It is not being mean, it is being a good and responsible guardian.* And Judy Petitto said, *I think it goes back to [people] equating food with love. We just need to love them with the right food so we*

can keep them with us as long as possible.

If you have read through *Magic Moments*, you may have noticed that the term “green bean diet” is used when a dog is significantly overweight. What is the green bean diet?

Green beans – fresh, canned or frozen – will add bulk but few calories to your dog's meal. If your dog is overweight, we recommend substituting an amount of green beans for part of the kibble that is normally used. For example, if you are currently feeding 1½ cups of kibble twice a day and your dog is overweight, cut the kibble to ¾ cup and add ½ can of green beans, preferably the no-added-salt variety, with the liquid.

Before starting your dog on a diet, take him or her to your vet for a check-up and weigh the dog. Once the dog has been put on a reduced-calorie regimen, weigh the dog once a month on the same scale to determine the rate of weight loss. The larger the dog, the more it will lose at first; then you will most likely see a decrease or even a plateau in weight loss for a while before the scale registers more loss. During these plateaus, increase the amount of exercise you are giving your dog, and the plateau will not last as long. The ideal weight loss for a large dog is ½ lb to 1 lb a week. With **12-108 Missy**, for example, who weighed in at 131 pounds, it took over a year for her to lose half her body weight, which her adopter helped her do. If a dog loses weight too fast, there can be complications involving internal organ damage.

How much should your dog weigh? That is a discussion you should have with your vet. A normal-size female Golden Retriever should weigh 50 to 60 pounds, depending on her frame; a normal-size male should weigh 65 to 75 pounds. If you have a Golden mix, the ideal weight range may vary a lot more, depending on what breed or breeds contributed to the mix.

One thing many of us have noticed is that it is a rare Golden who will regulate its own food intake. Given the opportunity to eat at any time (i.e. being “free fed”), a Golden will eat and eat and eat... and gain and gain and gain! If you are free-feeding at your house, please consider changing to a twice-a-day feeding schedule. Leave the food down for no more than 10 minutes. If your dog is used to eating anytime it wants to, it may not eat much at first when changed to a twice-a-day routine. But within a few days to a week, it will be eating its entire meal in just a couple minutes.

Also, no snack in between meals unless it is one or two small treats. Of course dogs like treats, but they don't need them. We recommend purchasing small-dog-size treats, even for a Golden. If you buy the large-dog-size biscuits, break them in half or even in fourths and give your dog only one piece.

And remember... If you have a fat dog, *you aren't getting enough exercise!*

Neurological Issue: Fibrocartilaginous Embolism

By Teri Guilbault

When we went to bed one evening, all was well with our pack of five, and everyone, as usual, found their favorite spot and went down for the night. We woke up to our usual routine – I normally get up first and let four of the five dogs out to do their business. **Blossom** did not usually come out until the other dogs were in and the treat jar opened calling her name. That morning, **Blossom** did not come as usual, and I figured she had just decided to sleep in, as she was resting quietly when I stepped over her on my way to the kitchen. Shortly thereafter, I heard my husband yell to me that **Blossom** could not get up. He carried her out to the Great Room, and when she tried to stand, all that would happen is her left leg would just go limp and her back end would drop down to the floor. When she tried to walk, she would end up dragging herself. Needless to say, at 7 AM I called one of our vets to see about getting her in right away for an evaluation. We knew that she had some hip dysplasia, so I initially thought that her hip had finally given out. That turned out to be furthest from the truth.

After running blood work, including a valley fever recheck, doing X-rays and a general examination, the vets told us they suspected a fibrocartilaginous embolism or FCE. A blood clot? A stroke? They recommended taking her to a veterinary neurologist who would be able to diagnose her condition by doing an MRI of her spine. Good thing we have pet insurance! So off we went to *Veterinary Neurology Associates* in Phoenix. I was given three options, none of which were great: 1) an FCE, although he said that in 99% of the cases that would be caused by trauma (jumping, hard play, accident, etc.); 2) a blown disc which would require surgery; or 3) spinal lymphoma.

It turned out that **Blossom** had experienced an FCE, which in common terms, is a stroke of the spine and which occurs when a piece of connective tissue from the intervertebral disc breaks off and blocks blood flow to the spinal cord. All of us who have been involved in Rescue for a while have dealt with a lot of disorders, diseases, cancers and other conditions, but none of us had ever heard of this, even though the largest number of cases occurs in giant or large breed dogs, with most cases occurring in the age range of 3 to 5 years. **Blossom** was almost nine.

Since the main issue caused by the FCE is swelling around the spine, we were advised that we would have to wait to see how she would be affected once that swelling subsided. We were told she could remain paralyzed or gain control of her back legs by varying degrees. We purchased a brace for her so that we could lift up her back legs to help her walk around. Gradually with each passing day and as the swelling eased, **Blossom** was able to put more and more weight on her back legs, and she gradually gained control so that she could walk unassisted. We also massaged her

back and legs daily, which seemed to help. After a couple months, **Blossom** was walking and running again, albeit with a slight limp. She was fortunate to have no further issues with this, other than the limp, for the remainder of her life.

Neurological Issue: Myasthenia Gravis

By Liz Tataseo



We sadly became more aware of myasthenia gravis (MG) when one of our great dogs, **15-096 Ford**, young and apparently healthy for months, succumbed to the effects of this rare neurological disease. There are two forms of the disease: a congenital form in which symptoms can occur at 6-8 weeks, and an acquired form in which symptoms can occur between 1-4 years or 9-13 years. The acquired form is an immune-mediated disease. The congenital or inherited form is most often seen in Jack Russell Terriers, Springer Spaniels and Smooth Fox Terriers. The acquired form can occur in all breeds but is most often seen in Golden Retrievers, German Shepherds, Labrador Retrievers, Dachshunds and Scottish Terriers.

Symptoms of MG are exercise-related muscle weakness that improves with rest, regurgitation of food, and megaesophagus (dilated esophagus). Megaesophagus is common with the acquired form of the disease and can lead to aspiration pneumonia from the inhalation of regurgitated food. Hypothyroidism can occur at the same time as acquired MG.

In order for impulses to travel through nerves and from nerves to muscles, a chemical called acetylcholine (ACh) must be present in the nerve endings to transmit the signals. The disease results from the ACh receptors being destroyed by antibodies produced by an immune-mediated response of the dog's own immune system. There are blood tests for the diagnosis of acquired MG that can determine the presence of anti-ACh (ACh antibodies).

Dogs with acquired MG and resulting megaesophagus need specific supportive care, since dehydration and lack of nutrients are major factors in the declining health of the dog. Aspiration pneumonia is a primary complication of this disease. Having a dog eat and drink water from chest-high bowls and remain standing for a time following feeding can help prevent regurgitation and aspiration. Special structures called Bailey chairs (*AGR* owns one) are available or can be built to allow elevated eating and drinking.

There are different levels of acquired MG: mild, moderate and severe. Treatment and management depend on the level of the disease and on owners working closely with their veterinarians for optimum results. One enigma with this disease is that many dogs spontaneously go into remission about 4 months after diagnosis.

Treatment often involves a drug that prevents the breakdown of ACh and allows more time for transmission of nerve impulses to occur. Dosages and frequency of drugs must be carefully monitored and evaluated. New treatments are being researched especially for extreme levels of this disease.

Although 19-month-old **15-096 Ford** passed away as a result of acquired MG, note that this is a very rare disease and is seldom seen in anyone's lifetime with dogs. All the adopters of **Ford's** seven offspring were notified about his illness and passing, as was the vet who had overseen the care of all the puppies whelped in January 2016 that he sired. If any of the puppies develops acquired MG, it should be detected early enough for them to respond to treatment. At 17 months old, none had shown any symptoms. **16-009 Vin**, who is now 8½, has not shown any symptoms; we do not currently know about any of **Ford's** other offspring.

References:

Myasthenia Gravis, Dog Owner's Home Veterinary Handbook, Fourth Edition
Myasthenia Gravis, Neurology/Neurosurgery, School of Veterinary Medicine,
University of California, Davis
Myasthenia Gravis, University of Prince Edward Island

Neurological Issue: Vestibular Syndrome

By Deb Orwig

Vestibular syndrome is often called "old dog disease" since it occurs most often in middle to senior-age dogs. Although it can be caused by an infection in the inner ear canal, the cause is often unknown and is therefore referred to as "idiopathic" vestibular syndrome. The symptoms may be caused by an inflammation in the nerves connecting the inner ear to the cerebellum, which controls balance and spatial orientation. If an inner ear infection is ruled out by a veterinary exam, then there is no treatment except time and patience. The onset of symptoms can be scary for a dog owner, especially because the dog develops the condition very quickly – something suddenly will appear very wrong with the dog! You may think the dog has had a stroke or seizure. The dog may appear drunk, with lack of balance, falling, bumping into things, circling and head tilt. Rhythmic eye motion known as nystagmus may be present. The dog may be unable to get up by himself, need assistance walking (a harness or sling may be needed) and may have trouble eating and drinking unless hand fed or given water by hand, because he will have a hard time with the fine motor movements necessary to eat or drink from a bowl; vomiting is common.

The condition usually resolves on its own in 7 to 30 days. The vet may want to prescribe anti-nausea and dizziness medication and may want to administer fluids. Some may prescribe steroids to reduce inflammation and may even recommend acupuncture. Once the dog has recovered, it usually will not develop the condition again. By all means, if your dog develops any of these symptoms, take your dog to your vet!

Parasites and Infections: Heartworm

By Deb Orwig

Although some veterinarians (none of ours included) do not believe heartworm exists in Arizona, it does. I had a dog, **11-056 Mufasa**, who proves it. We know he was a bred-and-raised-in-Arizona dog who tested positive for the infestation when we got him at age 1½ in 2011. The next year, another rescue named **Maddy (12-011)** also tested positive. Recently, **16-082 Rudy**, who was picked up as a stray, did, as well, as did **19-045 Lady**, who was a shelter rescue.

The *American Heartworm Society* reports that heartworm has been diagnosed in all 50 states and has spread to new regions within those states every year. Multiple variables from climate variations to the presence of wildlife carriers and stray and neglected dogs cause rates of infections to vary dramatically from year to year and even within communities. The vector for the spread of the disease is the mosquito. Because infected mosquitoes can come inside, both outdoor and indoor pets are at risk.

Heartworm disease is caused by foot-long heartworms that live in the heart, lungs and associated blood vessels of affected pets, causing severe lung damage, heart failure and damage to other organs in the body. Even with treatment, if not detected early heartworms can cause lasting damage and debilitation.

Dogs contract heartworm from the bite of an infected mosquito. The mosquito picks up immature heartworms called microfilaria from an infected host, then when it bites your dog it injects the microfilaria into the dog. The microfilaria lodge in the heart and mature into the adult heartworm – this can take up to 6 months, and the adult worms can survive for 5 to 7 years in dogs.

In the early stages of heartworm infestation, the dog likely will show no symptoms. The longer the dog is infected, the more symptoms like one or more of the following will appear:

- mild persistent cough
- reluctance to exercise
- fatigue after moderate activity
- decreased appetite
- weight loss
- swollen belly due to fluid retention
- caval syndrome indicated by sudden onset of labored breathing, pale gums and dark bloody or coffee-colored urine

AGR tests all dogs over 6 months of age. If a dog tests positive, we have the treatment done, because if the dog has heartworm and it is not treated, eventually it will be fatal.

Annual testing is necessary, even when dogs are on heartworm

preventative year-round, to ensure that the prevention program is working. Heartworm medications are highly effective, but dogs can still become infected. If you miss just one dose of a monthly medication – or give more than 15 days late – it can leave your dog unprotected. Even if you give the medication as recommended, your dog may spit out or vomit a heartworm pill, or rub off a topical medication. If you don't get your dog tested, you won't know if your dog needs treatment.

The test for heartworm is a simple and relatively inexpensive “snap test” that can be done with a few drops of the dog's blood right in your vet's office. If there are heartworm proteins present, then a more extensive test can be done by a diagnostic lab to determine the level of infestation. Any level needs treatment.

All approved heartworm medications work by eliminating the immature (larval) stages of the heartworm parasite. Preventative medications, whether oral chews or tablets (Heartgard Plus[®], Interceptor[®], Iverhart[®], Sentinel[®], Advantage Multi[®], Tri-heart Plus[®], Trifexis[®]), topical (Revolution[®]) or injectible, must be prescribed by a veterinarian. Except in cases of puppies under 6 months of age, the vet will require the heartworm test before issuing the prescription.

Heartworms are easy to prevent, but difficult and costly to cure. **Rudy's** treatment, which consisted of injections of Immiticide, cost **AGR** about \$450 with our Rescue discount.

AGR strongly recommends to get your dog tested yearly for heartworm and keep the dog on a monthly preventative year round.

Parasites and Infections: Leptospirosis

By Deb Orwig

In early 2017, **Raintree Pet Resort and Medical Center** asked us for permission and vaccinated **16-081 Ranger** for leptospirosis, as they are in one of the areas, Scottsdale, in which cases were starting to be reported. Then **Four Legged Friends** also suggested vaccinations for it. **Academy West Animal Hospital** in Glendale had not been keeping the leptospirosis vaccine on hand, since it was rare to see dogs with this disease in Glendale, but they now carry the vaccine at our request. Several of our dogs who come in with extensive vet records show that they have already had this vaccine, for example **17-008 Sprinkles**.

“The Department of Public Health recorded 40-plus dogs testing positive in the year of 2016,” said Dr. Sarah Bashaw with **El Dorado Animal Hospital** in Fountain Hills. “A lot of the cases started in Scottsdale, but they reported cases as far west as Avondale, some cases in Gilbert, and we've had the first cases I know of in Fountain Hills.” Since our own dogs go to many places throughout the Valley, it might be appropriate to consider having them vaccinated; check with your own vet.

Because it was rare in AZ and could be passed on to humans, she said she wants dog owners to know what to look for. “Some dogs will have mild symptoms and never show any clinical signs, others can be more severe, start out with vomiting, diarrhea, weakness, tremors, shaking, lethargy, and/or fever,” Bashaw said. “A simple set of vaccinations can prevent it and antibiotics can treat it.”

Information about Leptospirosis

Leptospirosis is transmitted between animals through contact with infected urine, venereal and placental transfer, bite wounds, or the ingestion of infected tissue. Crowding, as found in a kennel, can increase the spread of infection. Indirect transmission occurs through exposure of susceptible animals to contaminated water sources, food, or even bedding. Stagnant or slow-moving water provides a suitable habitat for *Leptospira*. As a result, disease outbreaks often increase during periods of flooding. In dry areas, infections are more common around water sources. Freezing greatly reduces the survival of the organism in the environment. This explains why infections are more common in summer and fall and why they are more prevalent in temperate areas.

Leptospira bacteria penetrate mucous membranes or abraded skin and multiply rapidly upon entering the blood system. From there, they spread to other tissues including kidneys, liver, spleen, nervous system, eyes, and genital tract. As the body fights the infection, the organism is cleared from most organs, but it may persist in the kidneys and be shed for weeks or months in the urine. The amount of damage done to the internal organs varies depending on the serovar and the host it infects. After 7 or 8 days of infection, the animal will begin to recover, if the damage to the kidneys or liver is not too severe. Infections in dogs with *Leptospira* serovars *canicola* and *grippityphosa* have been associated with kidney infections with minimal liver involvement. Whereas, the serovars *pomona* and *icterohaemorrhagiae* produce liver disease. Dogs younger than 6 months tend to develop more cases of liver disease regardless of the serovar.

In acute infections, a fever of 103-104°, shivering, and muscle tenderness are the first signs. Then vomiting and rapid dehydration may develop. Severely infected dogs may develop hypothermia and become depressed and die before kidney or liver failure has a chance to develop.

In subacute infections, the animal usually develops a fever, anorexia, vomiting, dehydration, and increased thirst. The dog may be reluctant to move due to muscle or kidney pain. Animals with liver involvement may develop jaundice. Dogs that develop kidney or liver involvement may begin to show improvement in organ function after 2 to 3 weeks or they may develop chronic renal failure. Despite the possibility of severe infection and death, the majority of leptospiral infections in dogs are chronic or subclinical. Dogs that become chronically infected may show no outward signs, but may intermittently shed bacteria in the urine for months or years.

In 2017, *Arizona Golden Rescue* added the leptospirosis vaccination to our standard vetting procedure for all dogs. Effective vaccination requires two injections of the vaccine 2-3 weeks apart. We strongly encourage all our readers to get your own dogs vaccinated, especially those of you who take your dogs to dog parks or other public places.

Parasites and Infections: Physaloptera

By Teri Guilbault

When our organization takes in a new rescue that has been a stray, we have a fecal sample tested to ensure that the dog is not carrying any parasites that can make it sick or be transmitted to other dogs and/or cats in the new household. It is not unusual that we find *Giardia*, roundworms or other common parasites, which we immediately treat. One of our rescued Golden Retrievers tested positive for *Physaloptera*, which is a relatively uncommon nematode parasite that can be contracted by dogs if they eat a beetle, cricket, grasshopper or a small animal like a mouse that carries the larvae of the *Physaloptera*. Once inside of the dog or cat's stomach, it attaches itself to the stomach lining or small intestine and feeds on the dog's blood and tissue – when it has grown to adulthood, its eggs are then passed in the feces. *Physaloptera* look similar to roundworms, although shorter, and can easily be confused with roundworms if they appear in the vomit of a dog. In severe infections, *Physaloptera* can cause stomach bleeding, vomiting, loss of appetite and weight, gastritis, and black, tarry stools. The good news is that it is not infectious to other dogs or to cats or humans. Drugs used to kill stomach worms in your cat or dog include ivermectin, pyrantel pamoate and fenbendazole (Panacur).

Our dogs can pick up parasites at any time. A simple check of your dog's stool by your veterinarian will help to identify any potential problems and keep your dog free of parasites. Please remember to keep this an important part of your dog's annual checkup.

Parasites and Infections: Ticks

By Teri Guilbault, Linda Knight Gage and Deb Orwig

Have you noticed that your dog is constantly scratching or shaking his head or licking his paws? It may just be due to some dry skin or allergies, but the itching and scratching could also be caused by a tick... or several. Shelter dogs and even some owner-surrenders that *AGR* rescues can have ticks. When **12-117 Buddy** came to us, his ears and much of his body were so infested with ticks we could hardly see his skin! When we got the puppies **16-050 Bertha** and **16-052 Blondie** from a backyard breeder in Tucson, hundreds of ticks fell off in the crate in Deb's car and hundreds more fell off on the floor of the vet's office. **19-062 Daisy**, who had been kept outside, was surrendered to *AGR* because she had ticks that her owner did not want brought into the house.

Ticks are parasitic arthropods that feed on the blood of their hosts and are a dreaded enemy of both canines and humans. Ticks do not fly, jump or blow around in the wind. Not all ticks transmit disease, but those that do are a threat.



American Dog Tick
Female, left; male, right

Most tick-borne diseases take several hours to transmit to a host, therefore locating and removing a tick quickly will lower the risk of disease. Dogs can be exposed to ticks in areas of tall grass, meadows and parks. Ticks can even be transported on birds that drop them into your yard. When a tick finds a host, it buries its mouthparts in the skin, thus beginning the blood meal. They will often attach themselves in crevices and/or areas with little to no hair – between the toes, within skin folds, and in and around the ears are all great hide-outs for ticks.

The life span of a tick can be several months to years, with thousands of eggs being laid by an adult female at any one time. There are four life stages of most species of ticks – eggs, larvae, nymphs, and adults. In order for a tick to thrive, it needs to be attached to a host to get a supply of blood, which allows it to grow to its next life stage.

Lyme disease is the most well-known disease transmitted by ticks to humans and canines – this disease does not occur in Arizona. Some ticks can also cause a temporary condition called “tick paralysis.” Difficulty walking could possibly develop into paralysis in your dog. When a tick is removed, these signs typically begin to resolve. You should always contact your veterinarian as soon as possible if you notice any weakness, lameness, joint swelling and/or anemia after finding a tick. Proper testing is necessary, and treatment should begin immediately. One of the dogs we brought in from Mexico, **24-009 Guera**, tested positive for Lyme disease. She was treated with a month of doxycycline, then retested negative.

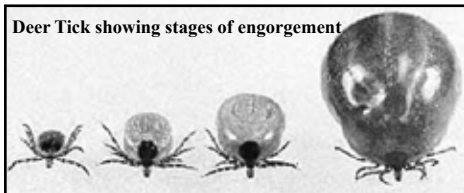


Tick fever or Ehrlichiosis is a common tick disease found in dogs and humans. A tick ingests the organism *Rhipicephalus sanguineus* when feeding on an infected host and can transmit tick fever to subsequent dogs that it feeds upon. The incubation period is typically 7-21 days after attaching to the host. Symptoms depend upon which phase of the disease is present in your dog. The acute phase is accompanied by rather non-specific symptoms which may include poor appetite, listlessness, fever, cough or discharge from the eyes or nose. The chronic phase may display the acute symptoms as well as nosebleed, other abnormal bleeding, swelling of the legs and weight loss. In both phases, symptoms result from destruction of red blood cells, platelets and occasionally white blood cells. Symptoms of either phase may also include diarrhea, vomit-

ing bile, lameness, paleness of gums, lethargy or increased thirst. Blood tests determine the diagnosis of tick fever. *AGR* has every adult dog tested for this disease, as sometimes dogs are asymptomatic. Initially a profile indicates anemia, and an IDEXX snap test confirms presence of antibodies. At two weeks or more post-therapy, an Ehrlichia PCR test will determine if the organism has been eradicated. Similar clinical signs that are present may be diagnosed as other diseases including cancer, therefore diagnosis of tick fever is very important. Titers may be negative early in the course of the disease even though the disease is present.

Tick-borne diseases such as tick fever and the uncommon anaplasmosis are carried by the common brown dog tick. These diseases can make your dog sick with fever, lethargy, and other flu-like symptoms. Fortunately, they are curable if treated with the antibiotic doxycycline. Failure to treat a dog for these diseases can cause death, so it is really important to keep a watchful eye out for ticks.

If you have ticks around your home, you are probably already spraying or using something to get rid of them, as they can and do multiply quickly. If you have found ticks on your dog or other animals, it's also a good idea to make sure the animals are tested regularly for tick fever. Using a flea and tick preventative such as Frontline® is really the best remedy, as it kills the fleas and ticks before they can breed and cause a problem.



Deer Tick showing stages of engorgement

Ticks can be relatively small or can end up being about the size of a lima bean if they've been feeding on your dog and are fully engorged.

Those are the females. They then drop off the dog, lay their eggs and die. If you see a largish gray shriveled up tick, likely dead, on the floor, look for the cluster of pinkish eggs. If you find a large engorged tick on your dog, look carefully, there is often a smaller male. Ticks need to be removed and disposed of quickly and safely. The following is a quick guide to help you:

- With fine-tipped tweezers, grab the tick by the head or mouth parts right where they enter the skin. Do not grasp the tick by the body – you do not want to crush the tick and force harmful bacteria to leave the tick and enter your pet's bloodstream. Without jerking, pull firmly and steadily directly outward. Do not twist the tick as you are pulling.
- After removing the tick, place it in a jar of alcohol to kill it. Petroleum jelly, a hot match, or alcohol will NOT cause the tick to 'back out.' In fact, these irritants may cause the tick to deposit more disease-carrying saliva in the wound. Ticks are NOT killed by flushing them down the toilet.
- Clean the bite wound with a disinfectant. Apply a small amount of triple antibiotic ointment. Wash your hands.

Once an embedded tick is manually removed, it is not uncommon for a welt and skin reaction to occur. A little hydrocortisone spray or cream will help alleviate the irritation, but it may take a week or more for full healing. In some cases, the tick bite may leave a permanent scar and a hairless area. This skin irritation is due to a reaction to tick saliva. Do not be worried about the tick head staying in; it rarely happens.

Our vets treat all dogs that stay at least overnight, as well as those on whom they find ticks when they do their exam. Frontline®, Effitix®, Advantix® or some other tick-killing topical product is used. Tick collars are not always reliable. These products contain toxic components – always consult your vet before using them. In this case, more is not better.

Parasites and Infections: Transmissible Venereal Tumor

By Teri Guilbault

As a Rescue with dogs coming in from numerous different sources, *AGR* has gotten some dogs with very unusual diseases!

Imagine a tumor that can be transmitted by touch. For dogs, this is not a matter of imagination. The transmissible venereal tumor is such a tumor and can be found on both male and female dogs. Transmission is by simple physical contact with the tumor and is most commonly spread during mating, but can also be spread during routine sniffing, licking or biting. Most of these tumors are found on the dog's genitals but can also be found on noses, mouths or other areas.

This type of tumor may appear as a fleshy cauliflower-like growth or may simply start with genital bleeding. It is common where there are large numbers of roaming dogs or in shelter situations. In most cases, this tumor is not malignant and simply grows and bleeds and is eventually rejected by the dog's immune system. However, if the dog's immune system is compromised due to young age, poor health, or even after delivering puppies, the tumor can spread in a cancerous fashion. It can be diagnosed either by doing a biopsy or by taking a smear of the tumor's cells and looking at them under a microscope.

Treatment of these tumors can be done by simple surgical removal, although that is not the most effective means, as they will usually recur within 5 months. Most veterinarians will recommend a series of 4 to 8 vincristine infusions over a period of time. Response is normally seen very quickly, even after just one injection. There is still a chance of recurrence, but at a much lower rate than with surgery. *AGR* rescued two dogs in 2010 that were diagnosed with this type of tumor and another, **19-077 Lola Noel**, in 2019. All dogs had excellent results with the vincristine therapy; the probability of complete recovery was high.

Skin Conditions: To Itch Or Not To Itch

By Liz Tataseo

Unfortunately for our dogs, skin diseases can occur at any time in many different ways. They can be caused by outside forces (insects, allergens) or internal forces (auto-immune issues, hormones, tumors) or by the dogs themselves (lick granulomas).

Outside Forces: Itchy skin diseases such as contact dermatitis, atopy, insect bites or food allergies are common and can be hard to diagnose and treat. First, the causative substance has to be determined so it can be eliminated and the right treatment found. Some vets now use a special blood test that can determine what the dog is reacting to, but often it takes a canine dermatologist to do skin testing to identify the cause.

Contact dermatitis usually looks like red bumps on the skin or overall skin inflammation; it can be caused by contact with a chemical, paint, detergent, rubber or plastic food dishes. In addition to skin inflammation, hair loss can occur at the point of contact. If a dog is allergic to the substance, the inflammation can spread beyond the point of contact.

Atopy is a seasonal issue caused by environmental allergens such as pollen and causes severe itching; it can get worse every year. It usually starts with foot chewing or face rubbing. A drug that works really well for this is Apoquel (I personally know this), but this medication can be expensive.

Insect bites from fleas, ticks, fly larvae, or lice can cause severe itching around the tail, along the back, or under the chin, ears and elbows. Hair loss also occurs with many dogs. Scabies is caused by sarcoptic mange all over the body. In 2011, we brought in a dog we named **Prince (11-011)**, who had sarcoptic mange. Most of his fur was gone and he smelled terrible. He required a month of medicated baths three times a week. He also had low thyroid and allergies.

Hormones: Skin issues caused by hormone imbalance usually result in hair loss; one of the most common is hypothyroidism. This can cause hair loss without any itching and is often noticeable when a dog's coat becomes thin, dry and falls out easily. Weight gain for no noticeable reason can occur along with the hair loss. A thyroid test can determine if the dog has hypothyroidism and medication can return the dog to good health, although the dog would have to remain on it for the rest of his life. Once hormone balance is achieved, the fur may or may not return to its full glory.

Hormone-related hair loss can also be caused by cortisone excess from Cushing's disease, estrogen excess or deficiency, or growth hormone deficiency. An example of growth hormone deficiency or response is Alopecia X or Black Skin disease. This condition

causes hair loss and hyperpigmentation of the skin. Usually there is no sign of any systemic illness and the dog feels and acts normally. We thought **17-063 Rufus** (photo at right) might have this condition.



Food allergies are non-seasonal and can cause inflamed skin, pustules, bumps and moist weeping redness on most parts of the body. It can be hard to determine what particular food ingredient causes the reaction, so limited-ingredient diets and novel proteins are recommended. A novel protein would be protein other than beef, chicken, turkey or fish – recommended would be venison, lamb, bison, rabbit etc.

Autoimmune issues: Skin diseases can be caused by an antibody attacking the normal components of the skin. This antibody destroys the cohesiveness of the skin and can cause inflammation, pustules, hair loss and weeping redness. An immune-mediated skin disease is one that can be a reaction to an outside source such as a drug or other substance that reacts with an antibody and the complex is deposited in various locations in the body. This complex causes an inflammatory response which destroys the tissue. An example of auto immune skin disease is Pemphigus, which is directed against the walls of the skin cells and the skin cells separate. Four types of Pemphigus exist. Foliaceus is the most common and can inflame the skin everywhere but also can cause thickening and cracking of foot pads. Erythematous is localized to the face, head and foot pads. Vegetans is rare and forms pustules in skin folds. Vulgrais is uncommon but occurs in lips, nostrils and eyelids.

Systemic Lupus and Discoid Lupus are examples of immune-mediated skin disease. The former is body wide and can affect many parts of the body including the skin. Lameness is often the first symptom, but severe dermatitis followed by crusting, oozing and hair loss can follow. This disease is difficult to diagnose and usually requires chemotherapy to treat. Discoid Lupus is a milder form of Systemic Lupus and is limited to the face and often the nose. It can be treated with steroids; sunscreens/sunblocks are also useful. Any of these conditions can be exacerbated by the dog's licking excessively or, if not treated, the intrusion of bacteria that leads to widespread infection. See your vet for any strange skin occurrence, excessive licking or itchiness.

A rare condition that is an inherited recessive condition is Ichthyosis. This is a severe, chronic condition and is incurable but possibly manageable. Read Teri's article on page 58. Another skin condition we have encountered with a rescued dog is sebaceous adenitis. More information on this type of skin problem is on page 61.

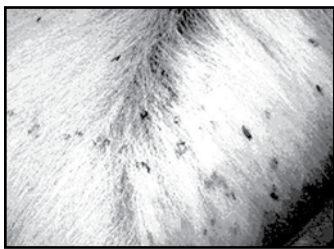
There is an excellent article on skin conditions at <https://www.caninejournal.com/dog-skin-conditions/>. Other information sources: <http://www.dog-health-handbook.com> and www.vetinfo.com

Skin Conditions: Ichthyosis

By Teri Guilbault

Dermatology issues, rashes, allergies, etc., are very common in all breeds of dogs. Sometimes they are controlled easily and sometimes not. As with all questionable conditions, however, it is always a good idea to consult your veterinarian or veterinary specialist for a proper diagnosis.

I had the opportunity to learn about an interesting skin condition. My dog **Blossom** was beautiful down to the bone (aren't



they all), until you really looked down that far at her skin. From the time we got her when she was 8 weeks old, she has always had this black, flaky skin condition. The pink Golden Retriever belly that she should have was black, as were her arm pits and hind quarters, and I was constantly

brushing out dark flakes. No matter what I fed her or bathed her with, those flakes were always there. I finally took her to see a dermatologist and found what was going on. She had Ichthyosis.

Ichthyosis is a rare genetic skin condition in dogs that causes the outer layer of skin to develop abnormally. It is characterized by excessive dry, scaly flakes of skin. Some flakes are very small, but I've seen them the size of quarters, too. During gestation, the dog's skin membrane fails to develop completely, and as a result, there is a constant "shedding" of the skin layers. The skin of the dog is abnormal at birth, with it cracking and peeling off starting when the dog is about two weeks of age. Most of the dog's body is covered with tightly-adhering, tannish-gray scales and feathered "horny" projections, which give a rough texture to the skin. Although some of these projections adhere to the skin, others constantly flake off, riding up hair shafts in large sheets. Large quantities of this scaly debris can also accumulate on the skin surface forming dry, reddened patches. Sometimes, this even causes hair loss, although in **Blossom's** case, she still had a beautiful Golden coat. We found that frequent brushing helped to some degree.

Unfortunately, there is no cure for this skin condition, and trying to control the scaling is very difficult. However, although it looks terrible, it doesn't cause the dogs any itching or anxiety, but the symptoms may be controlled with frequently applied medicated shampoos and rinses to control the itching and to maintain both skin hydration and skin barrier function. Ichthyosis is not contagious to other dogs, to cats or to humans.

***Skin Conditions: Lumps and Bumps***

By Liz Tataseo

Most dogs, including Golden Retrievers, get lumps as they age, but younger dogs are not exceptions. Most of these lumps are benign cysts, lipomas (fatty tumors) or granulomas, but some are much more serious. It is recommended that a new mass, or one that has suddenly changed in size, be evaluated by a vet and, if deemed necessary, a needle aspiration should be performed to determine the type of cells present.

There are benign masses that should be removed before they lead to ulcerations of the skin or interfere with sight or movement: warts, follicular or sebaceous cysts, benign histiocytomas (often found on young dogs), sebaceous adenomas if they are ulcerated, large lipomas and basal cell tumors that can become malignant.¹

One lump that looks like many of the ones just mentioned is a malignant tumor which can be treated quickly and without long-lasting issues if found early. However, left to grow and spread it can affect internal organs and lead to death. These are **mast cell tumors**. They are one of the most common skin tumors in dogs and often look like harmless cysts, histiocytomas or lick granulomas.

According to the *National Canine Cancer Foundation*, mast cells are cells that occur in the skin and other tissues, like the intestines and respiratory tract. They are also an integral part of the immune system. They consist of large amounts of histamine, heparin, and proteolytic enzymes (enzymes which break down protein). These have a toxic effect on foreign invaders, like parasites, and are released when the mast cell is triggered by the immune system. A mast cell tumor results from these mast cells. When histamine, heparin, and enzymes are damaged by some external invasion, they pose health hazards. Large amounts of these substances are released into the body and usually have adverse effects on heart rate, blood pressure, and other body functions.

Several *AGR* members have had dogs with mast cell tumors and, fortunately, have been able to catch them early and have them removed. Mast cell tumors can return, so vigilance is necessary for any new lump. A 9-year-old dog surrendered to *AGR* in December 2014 (**14-097 Jake**) had large, untreated mast cell tumors that were beyond anyone's treatment capabilities. Had the dog come to us a year sooner, we might have been able to save his life, but the cancer was too far advanced and the dog had to be euthanized.

According to *North Carolina State University College of Veterinary Medicine*, treatments for mast cell tumors that are beyond minimally invasive (tumors) involve diagnostic tests... recommended to ensure there is no obvious evidence of spread to other

places in the body. These tests include:

- Complete blood count (CBC)
- Serum biochemistry panel
- Urinalysis (U/A)
- Lymph node aspiration cytology
- Abdominal sonogram

If metastasis has occurred, current protocol involves a combination of prednisone, vinblastine, and CCNU, the three drugs with demonstrated effectiveness against mast cell tumors. Chemotherapy can also be used alone if surgery and radiation therapy are not performed.

Sad but true is this statement from an article by Rhonda Hovan in *Understanding Cancer in Golden Retrievers*²: “Let’s get started with some data of how cancer affects our breed. Approximately 60% of all Goldens will die from cancer. By gender, it’s 57% of females and 66% of males. Human cancer is also skewed slightly toward males, so it’s not surprising that dogs are too. For comparison, the rate of cancer in Goldens is just slightly less than double the rate of cancer in all dogs, which is estimated to be about one in three (and which actually is about the same as in humans). But even though our cancer rate is nearly double the all-breed average, it’s important to keep in mind that the average lifespan of the breed is still within the same 10-11-year range as in all breeds.”

While the above information may seem disheartening, many Goldens live long, healthy lives only surrendering to illness (yes, often cancer) in their old age. It is when cancer hits young dogs in the prime of their lives that we ask, why is this happening? And it is why it is important to always check over your dog for lumps, bumps or any small injury that might not be healing quickly and get them evaluated by a vet.

Papillomatosis

The term papillomatosis is used to describe a benign tumor on the surface of the skin. A virus, known as the papillomavirus, causes the growth. The general appearance is wart-like, raised, with the central surface having an open pore if the wart is inverted.

Sebaceous Cysts

Sebaceous cysts are common surface tumors found anywhere on the body. These cysts begin when dry secretions block hair follicles, causing an accumulation of hair and sebum (a cheesy material), and the subsequent formation of a cyst.

Lipomas

A lipoma is a benign growth made up of mature fat cells interlaced with fibrous connective tissue. Lipomas are common in overweight dogs, especially females. A lipoma can be recognized by its oblong or round appearance and smooth, soft, fatlike consistency. Many lipomas occur just under the skin. However, **20-022 Cassie**

had a large (15 cm) internal one that was pressing on her spleen and intestines, so we had it removed.

Histiocytomas

Histiocytomas are rapidly growing tumors found in dogs 1 to 3 years of age. They occur anywhere on the body. These benign tumors are dome-shaped, raised, hairless surface growths that are not painful.

Sebaceous Adenomas

Sebaceous adenomas arise from the oil-producing sebaceous glands in the skin. They are not dangerous.

Basal Cell Tumors

This is a common tumor usually found on the head and neck in dogs over 7 years of age. It appears as a firm, solitary nodule with distinct borders that set it apart from the surrounding skin.

CAUTION: If you find any lumps or bumps on your dog, please get them checked by your vet.

¹ <https://www.akc.org/expert-advice/health/dog-skin-lumps-bumps/>

² Rhonda Hovan has been a breeder/owner/handler of Golden Retrievers under the “Faera” prefix for over 30 years, producing more than 60 Champions. As a health and genetics writer, she has won the Veterinary Information Network Health Education Award and the Eukanuba Canine Health Award. Rhonda is the Research Facilitator for the *Golden Retriever Club of America*, founded the Starlight Fund at the *AKC Canine Health Foundation* to support Golden Retriever health research, serves on the Advisory Board of the *National Canine Cancer Foundation*, and is an Emeritus Director of the *Orthopedic Foundation for Animals*. She wrote the article, originally published in *Golden Retriever News*, to help answer some common questions from breeders and owners, such as “Why did my dog get cancer?” and “What can I do to help my dog avoid cancer?” She is a frequent speaker on topics of canine health, and lives in Akron, Ohio, with five Goldens and two rescued raccoons. Excerpt from the article was reprinted with permission from the author.

Skin Conditions: Mange

By Liz Tataseo

Ed. Note: Since mange is caused by external parasites, I could have put this article under the Parasites heading. However, since the manifestations of mange are poor skin conditions, I am including the article in this section.

In 2011, we had the opportunity to rescue a Golden from a terrible animal-hoarding situation. When this young lad came to us, we already knew that he was suffering from mange. Mange? What is mange? This was our first experience with this disease since the incorporation of our organization, and we have not seen it since.

Mange is caused by mites (minute arthropods related to spiders) that live on the skin of animals as parasites and can quickly and easily infest an animal’s entire body. There are three types of

mange: sarcoptic, which is also called “scabies;” demodectic, or “red mange;” and cheyletiella, or “walking dandruff.” Common symptoms of mange include hair loss, itching and inflammation, dry, crusty and thickened skin, and sores or blisters.



11-011 Prince had the worst case of sarcoptic mange we have ever seen; he had open, weeping sores all over his body and very little fur left

Sarcoptic mange is caused by mites burrowing into the skin. Dogs with this type of mange tend to have a moth-eaten appearance as clumps of fur fall out. Eventually, if left untreated, dogs will continue to lose their fur until it is gone. Dogs of all ages and breeds can contract sarcoptic mange, and it is easily transmitted to dogs or to people who come in contact with an infected animal. With this type of mange, there is extreme itchiness, rash with

irritated and inflamed skin, scabs and hair loss. Areas most affected will be ears, elbows, hocks, abdomen and chest. Dogs that have this disease are likely to develop “hot spots” as they lick the areas that bother them. Treatment for this type of mange is medicated baths which kill the mites, and a systemic pesticide called Revolution®. During an outbreak, the dog’s immune system may become depressed, so steroid treatment may not be advisable. Sarcoptic mites are one of the most destructive parasites because they can spread over the dog’s entire body, causing life-threatening skin infections.

Demodectic mange is not as severe as sarcoptic mange, and veterinarians say that this disease is most common in puppies aged 3 to 9 months old. It often appears around the eyes or the corners of the mouth, and on the forelimbs and paws of the dog. Left untreated, it can cover the entire surface of the skin. The main difference between demodectic mange and sarcoptic mange is itchiness. Demodectic mange doesn’t itch at all. Even though there are no signs of itchiness, however, it still causes discomfort to the dog. Also, unlike sarcoptic mange, demodectic mange is not contagious. Demodectic mange is often treated with medicated shampoos if the dog has minor, localized areas. With this type of mange, infestations often resolve themselves within several weeks in young dogs as their immune system develops and kills off the mites on its own. However, treatment is still advised.

Cheyletiella mange is also called “walking dandruff.” The mites causing this type of mange do not burrow into the skin but live on the top layer, and their entire 21-day life cycle is on the one animal they infest. They cannot survive off a dog for more than 10 days. These mites are highly contagious and transferred by direct contact with an infected animal. Symptoms of this type of mange are regular sneezing and rubbing the face area; there may also be hair loss around the eyes and nose. Treatment is weekly bathing with a medicated shampoo and dips over regular periods for three weeks.

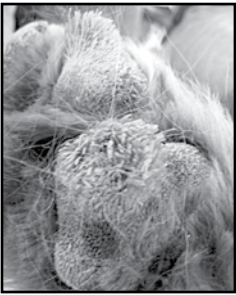
As with any other type of skin issues, it is always best to consult your veterinarian when symptoms appear. Early diagnosis and treatment is always the quickest and easiest way to keep your dog healthy and happy.

Treating Lick Granulomas

Mix 2 parts Bitter Apple with 1 part Icy Hot or Liquid Heat. The itch of a lick granuloma is sort of like phantom limb pain – it itches, but scratching and licking don’t soothe it, so the dog just keeps going at it. It makes them so crazy that the Bitter Apple alone isn’t enough to deter them. Using the combo above produces a deep tingle that makes it feel a little less irritated so that the Bitter Apple is enough to stop their licking. This works on 70-80% of lick granulomas. You may want to use a cone part of the time, too, until the itch settles down a bit. Lick granulomas occur most frequently when a dog is bored or stressed, so more activity/exercise is beneficial, too.

Skin Conditions: “Porcupine Quills”?

By Deb Orwig



Check your dog’s pads. Are there growths on the pads that look like miniature porcupine quills? One of our members noticed such

growths on the bottoms of her dog’s feet. As she had never seen anything like this before and was worried about what it might be, she took the dog to see our vet Dr. Ferguson. Dr. F. immediately said “Arthritis.” Whaaat? How could that be arthritis? Well, it isn’t arthritis *per se*, but it is a result of a combination of things: arthritis in the legs causing the dog to favor her feet and to not want to walk very much, and foot fur and toenails that are allowed to get too long, preventing the normal scouring and wearing away of the footpad material. What happens under these conditions is that the footpad material itself grows. In itself, it is apparently not painful to the dog, but it sure looks ugly and could eventually hamper movement even more. So, check your dog’s feet, keep the fur trimmed back and the toenails clipped as short as possible so the dog is walking on the pads, and you won’t have to wonder where those “porcupine quills” or that “fungus” came from!



Skin Conditions: Sebaceous Adenitis

By Linda Knight Gage



14-040 Charlie was a nice 7-year-old male Golden who came in with **14-043 Boomer**, **Charlie's** littermate and best buddy. **Charlie** had a horrible skin condition that had been treated unsuccessfully for years and needed vet attention for a proper diagnosis. Littermate **Boomer** did not have it.

AGR's vet suspected **Charlie** had sebaceous adenitis and performed a skin biopsy. The results were positive. Started on a skin care regimen, **Charlie** was on his way to a healthier coat and skin.

Sebaceous adenitis is an immune-mediated perplexing condition, in which the sebaceous glands in the skin become inflamed for unknown reasons and are eventually destroyed. Normal sebaceous glands produce sebum, which is a fatty secretion that helps prevent drying of the skin. This rare type of inflammatory skin disease typically affects young adult dogs, 1 to 5 years of age.

This condition can appear differently in different breeds. In long-coated breeds, the dogs have dry scaly skin with patches of hair loss on the top of their head, face, back of the neck, as well as on their back. Silvery scales tightly adhere to tufts of the remaining fur and can easily be seen. Other signs of sebaceous adenitis include hair that is brittle or dull, small areas of matted hair and alopecia (hair loss). Mildly-affected dogs have normal looking coats, but abnormalities can be seen upon microscopic examination of skin biopsies. Some dogs like **Charlie** exhibit a "rat tail" and have bilaterally symmetric hair loss and excessive skin scaling. This condition may also lead to a secondary bacterial infection of the skin with pimples, crusting and an offensive odor. Some dogs have severe, draining ear infections. Sebaceous adenitis may or may not be itchy. The dog's skin may also be blistered or raw, and there might be complete hair loss along with loss of the sebaceous glands during advanced stages of the disease. Short-haired breeds can also have this condition, exhibiting a moth-eaten appearance to their coat, with mild scaling also affecting the head, ears and trunk of the body.

A skin biopsy is needed to determine if this condition exists. This involves removing small pieces of the affected area (done with



local anesthesia) and submitting them to a pathologist.

Dogs can spontaneously improve, but most dogs will need life-long care for this condition, although it is a cosmetic disorder with no internal manifestations of disease. Response to treatments can be highly variable, resulting in frustration for the dog and the owner. Fatty acid dietary supplements are given along with anti-seborrheic shampoos used on a regular basis to remove the scales and dead hair. This treatment might be the answer for a mildly-affected dog. Other cases might need additional treatments including spraying the dog with a propylene glycol and water mixture to help restore lubricants to the skin, as well as oral essential fatty acid supplements.

A dog with sebaceous adenitis should not be bred. Although not genetically proven, it is believed that this condition is inherited as an autosomal trait in some breeds. This is a gene that both parents carry and pass to a litter. Several breeding studies are in progress to determine the exact cause of sebaceous adenitis.

If you suspect your dog has this condition, please see your veterinarian as soon as possible to determine a course of action. This uncomfortable affliction needs to be treated as soon as it is suspected and diagnosed. Treatment will help your dog feel more comfortable and improve his overall well-being.

Valley Fever

By Liz Tataseo and Deb Orwig

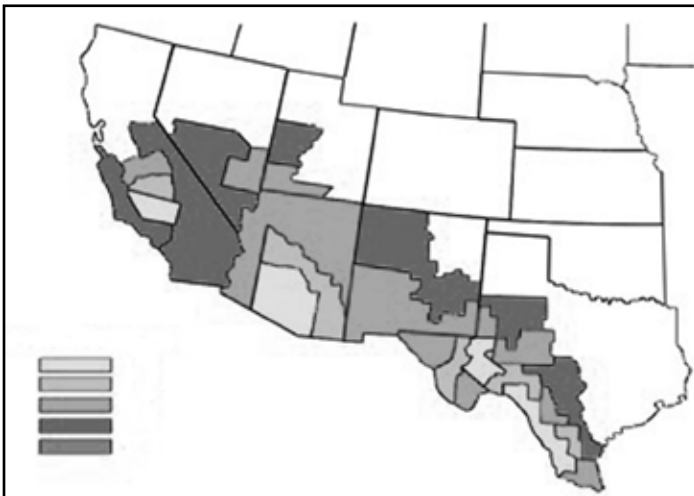
Editor's Note: Since valley fever is such a problem in Arizona and we all need to be educated about it, I have included an update of a 2022 article originally published in November 2014. Few other states' Rescue groups have to deal with this disease, because it rarely occurs in significant frequency anywhere else (see distribution map on page 62). Detecting and treating this insidious disease is necessary but expensive for AGR. Years ago we received two annual grants of \$1,500 from Albertsons/Safeway/Vons specifically for diagnosis and treatment of valley fever – each grant helped us test and treat about 10 dogs. Since we test for valley fever in every rescue over six months of age, and then have to put about 20% of them on fluconazole, the grant money helped tremendously. We sincerely thank the company for its support. The Golden Retriever Foundation is currently considering providing some financial compensation for VF testing and treatment, and we hope they approve it.

What is valley fever? Valley fever in dogs (and humans) is caused by the fungus, *Coccidioides sperules*, which grows in the soil and can become airborne during wind, construction or farming. Infection occurs when the individual, whether dog or human, inhales the spores. Valley fever symptoms can occur within three weeks of inhalation, and the first sign can be a lingering cough. About one-third of people who are exposed are able to fight off the respiratory infection caused by the fungus, which often presents as a prolonged case of flu. About 70% of dogs who inhale the fungus

do not become sick. In others, it can be a mild case or prolonged, debilitating and potentially lethal. Valley fever incidence is one of the reasons **AGR** requires all dogs adopted to be inside dogs. Dogs left outside for long periods of time are more likely to get valley fever. The spores are airborne, though, so even dogs mostly kept indoors like **13-023 Duffy**, can contract the disease.

Valley fever titers. Valley fever levels are determined by a ratio called a titer, which measures the antibody levels in a dog's blood. When a dog has been exposed to the fungus, their immune system begins to produce antibodies to fight the fungus. Dogs that are positive for valley fever at the 1:2 or 1:4 titer levels (levels manifest exponentially) are considered exposed but not active and usually do not receive medication, but **AGR** pays for a return visit to the vet for a retest in three months to make sure the titer is still low or negative.

Dogs with titer levels of 1:8, 1:16 and up are given an antifungal drug called fluconazole, which is the generic form of Diflucan. **AGR** recommends giving a dog milk thistle and SAM-e, or Denamarin® (combo of both), to offset any liver issues that can be caused by the fluconazole. Fluconazole is not effective for some dogs, so ketoconazole, itraconazole, or voriconazole are prescribed instead.



Distribution Map of Valley Fever Occurrence
from Valley Fever Center for Excellence website

Because valley fever is most prevalent in Arizona and occurs in other areas of the Southwest, one of the blood tests that **AGR** asks all of our vets to do is the Cocci test. If you look at the map above, you can see the percentage of dogs positive for valley fever in various areas of the Southwest. Arizona is one of those areas that has a high percentage of dogs that have been found positive for the disease, which is why **AGR** has every rescue over 6 months of age tested. Some exhibit classic symptoms such as coughing, limping, lack of appetite and energy and possibly fever. Many dogs have no symptoms of the disease, even though positive. If a dog has the dis-

ease and is not treated, dire things can happen, as with **22-007 TK**. Valley fever is not contagious and cannot be passed from animal to animal, from animal to person, or from person to person.

Disseminated Form of VF. Dogs and people can get the disseminated form of valley fever. If this form develops and is left untreated for a long period of time, as in **11-062 Trip's** case, it can have awful consequences. Valley fever can most often spread to the bones of an individual and cause lameness or swelling of the legs and, at its worst, bone lesions and calcification. But it can infect almost any organ in the body including the brain, as it did for **13-048 Bonita** and **22-007 TK**, or in the spinal fluid as in **22-067 Reggie**. Dogs with disseminated valley fever are usually prescribed pain medication to support the time needed for the anti-fungal medication to work. The time needed for a dog to be on medication for the disseminated form varies, but most likely the dog will need to take the medication for the rest of its life.

We have had numerous dogs test positive for valley fever. Here are some examples – two were asymptomatic, and all of them had the same disease. **11-062 Trip** was surrendered in 2011 with a hind limb he could barely walk on and most of the time didn't use. No one had taken the time to find out what was really wrong, so, suspecting the worst, the family surrendered him to **AGR**. After testing, **Trip** was found to have the disseminated form of valley fever, and the leg could not be saved. As a tripod (notice no right hind leg in the photo), he was on the medication for only two weeks and there was a visible improvement in his energy level and demeanor. **Trip** eventually tested clear of the disease, but he was tested yearly to be sure he remained negative. He lived til he was about 15!



14-067 Scout was surrendered to **AGR** in early September 2014 and had no symptoms of the disease – he looked like a happy and healthy two-year-old. After testing, he was found to be positive for valley fever (with a titer of 1:32) and placed on medication. His littermate brother, **Chip**, who had lived with **Scout** all his life, tested negative.



13-016 Caesar came into Rescue in early 2013. He had lived in the Prescott area all of his 8+ years, so we did not think he would need testing for valley fever. However, our vet advised us to go ahead with the test even though **Caesar** was not exhibiting any symptoms and even though he had come from the northern part of Arizona where the incidence of valley fe-

ver is very low. We thought we might be wasting our money on the test (at upwards of \$350, it is not inexpensive) until **Caesar's** titer came back positive at 1:32. He was also started on medication.



14-077 PJ came to *AGR* from Tucson in September 2014; he was limping on his front legs and in pain. After X-rays and because we did not want to wait until blood test results were back (takes about a week, as the vet sends out the dog's blood sample to an analytical laboratory), **PJ** was placed on medication for valley fever and pain medications. The test results revealed

a titer of 1:32.

22-008 Madonna, when surrendered, had a titer of 1:128, the second highest measurable titer. She was not in an extreme condition, but she was lethargic, lacked energy and had developed an actual fever (some don't get a fever). After several vet visits and tests, she was diagnosed with a probable bone lesion on her breastbone and mammary tumors that might be related to the VF.



22-013 Oliver came in with a known titer of 1:32 but had no overt symptoms. However, his original vet had said the VF had lodged in the dog's eye, and *AGR's* ophthalmologist

was sure he was blind in that eye. **22-067 Reggie**, with a titer now of 1:16 (it had been higher), has exhibited eye problems, and the VF has also infected his brain and spinal fluid.



One of the worst cases we have ever seen in *AGR* was in 2013. **13-048 Bonita's** valley fever titer was 1:256, the highest level that can be measured. She exhibited all the classic symptoms such as coughing, limping, lack of appetite and energy, and fever. Her initial blood work confirmed that she had a chronic infection in her system. The vet suspected valley fever and thought that it had invaded **Bonita's** spinal column and brain, as she exhibited a

“drunken soldier” swaying walk. She was in extreme pain so was started on high doses of morphine and corticosteroids, as well as on fluconazole. After six months of medication, **Bonita's** titer had dropped to 1:32, and by February 2014, it was even lower at 1:16, excellent progress considering how high it was originally. She was on fluconazole for the rest of her life, but she acted like a normal dog for three years until she passed away.

22-007 TK also had a titer of 1:256. **TK** was surrendered in an extremely severe condition because he had been without treatment for over one year. He had lost over 30 lbs, was skin and bones and could not walk. X-rays showed he had bone lesions in most of his bigger bones and jaw area. He has meningitis caused by the spreading lesions in his skull.



Trip, Scout, PJ, Caesar and Oliver all had titers of 1:32. Most dogs will have to take the anti-fungal medication for several months up to 1-2 years. Some that have a very high initial titer may have to be on the drug for a longer time, perhaps for the rest of their lives. Dogs with the more common mild respiratory infection will usually start feeling better in one to two weeks but must remain on the medication to completely eradicate the fungus – if the dog has two negative tests 3 months apart, the vet will usually recommend that the medication be stopped.

The Valley Fever Center for Excellence, located at the University of Arizona in Tucson, was established to address the problems caused by the fungus, *Coccidioides*, the cause of coccidioidomycosis (valley fever). Two-thirds of all infections in the United States occur in Arizona, mostly in the urban areas surrounding Phoenix and Tucson. The Center's mission is to mobilize resources for the eradication of valley fever through: 1) the development of public awareness and education about valley fever; 2) the promotion of high-quality care for patients with valley fever; and 3) the pursuit and encouragement of research into all aspects of *Coccidioides* species and the diseases that it causes.

A study by the *Valley Fever Center for Excellence* and supported by the Valley Fever Vaccine Project of the Americas found that:

- Dogs that spent 80% of their time outside were 5 times as likely to be infected than those who spent their time indoors.
- Dogs that were taken outside for walks had a decreased incidence of the infection if walked on sidewalks.

A Vaccine to Give Hope for the Devastation of Valley Fever

Each year many dogs are lost or crippled by valley fever (VF). Owners can spend thousands on medication and veterinary care if their dogs contract the disease. Researchers at the *University of*

Arizona have created a vaccine that has given protection to tested mice from lethal doses of valley fever. The next step is to proceed to testing in dogs and develop a usable vaccine just like there are such for distemper, parvo and rabies.

On March 21, 2017, Lisa Shubitz, DVM, presented information on the development of a VF vaccine and also on T-cell testing to determine a dog's own immunity to the disease. The treatment of choice for VF is fluconazole, an anti-fungal medication that inhibits the growth of the fungus in the dog until the dog's immune system can counteract and destroy it. At that point the dog is immune if the dog's T-cells retain their "memory" for the fungal spores. This is also true for humans – same medicine, same immune response. Unfortunately, dogs are at greater risk for complications due to the disease than are humans: 25% in canines vs 1% to 5% in humans.

Researchers used a live mutant strain of *Coccidioides* (VF spores) that had a gene, delta CPS1, removed so the spores were rendered harmless and could not cause the disease but could still provoke an immune response in the dog. Specially-bred mice without immune systems were used for the various tests. These mice were given 10 to 100 times the dose of the vaccine lethal to the spores and did not get sick. Conclusion: the vaccine will not cause VF. The second part of the research involved vaccinating mice and then infecting them with the virulent form of VF. A comparison was done with a placebo and previous protective substances. The mice with the vaccine had much lower incidences of VF.

Research must be done to develop tests to measure the immune response to the vaccine in dogs. Some dogs buoyed by medication have a powerful immune response and fight off the disease and become immune. Other dogs without an appropriate immune response do not seem to get better, or even have higher titer levels when retested. Such dogs may need to remain on medication for the rest of their lives.

Formulation of a vaccine that is shelf stable and easy to administer, licensing, and studies in dogs that receive the vaccine are in progress. It is estimated to cost \$2 to \$2.5 million dollars to continue the research. Questions still to be answered: When to vaccinate? How long does the immunity last? Must there be boosters?

To help support this valuable research, a tax-deductible donation can be made by credit card or check. By credit card, go to www.vfce.arizona.edu and click on "Support the Center" in the dropdown menu for the "About" tab, and use the "Click here to donate online..." box on the About page. To donate by check, mail to **Valley Fever Center for Excellence**, P.O. Box 245215, Tucson, AZ 85724 (EIN 86-6050388) and make payable to **University of Arizona Foundation**, memo line Canine Vaccine.

IMPORTANT: Have your dog tested for valley fever annually even if the dog does not exhibit typical symptoms!

Rare but Serious Medical Issues

By Liz Tataseo

In 2021, we had a few dogs surrendered to *AGR* with serious and unique medical issues. As with all medical issues, our goal is to get a diagnosis and treatment for the dogs so they can live a healthy and happy life. Sometimes it takes a long time to achieve a diagnosis, and there is often more than one issue affecting the dog.

Multiple Issues



Dogs with multiple issues included a stray, **21-002 Dickens**, (renamed **Charlie**), a 6-year-old Golden mix who came from the **Pinal County** shelter. He was skeletal and barely able to

walk, and had many other health issues. After his exam and neurological consult, an MRI and spinal tap were done and he was diagnosed with multifocal forebrain and brainstem meningoencephalitis, tested positive for Ehrlichia and also had an enlarged testicle (no, he had never been neutered) diagnosed as septic neutrophilic inflammation and necrosis. Thanks to several months of antibiotics and outstanding care by his adopters, this sweet boy became a healthy, happy dog. He just passed away recently.

An unvaccinated female was surrendered to *AGR* with untreated valley fever and having recently had a litter of puppies. After initial vetting and being treated with needed medication, **21-019 Brighton** unfortunately had to go back to the vet overnight because of lethargy, high temperature and not eating or drinking. After going home with more medication, she returned for a follow-up vet visit the next day, and more blood work and X-rays were done. She was given more fluids and went home with some to be given at home. She was slowly getting better, and with great care by her adopter was able to make regular vet visits for follow-up blood work and her vaccinations. This lovely 3-year-old English Cream Golden was finally well enough to be spayed and happily played with her Golden brother for almost another two years.



Liver Shunt

A liver shunt is an abnormal blood vessel that shunts blood around the liver instead of through the liver, as it should, to filter out all

the toxins that the body accrues from its own metabolic processes. Because of this shunt, the toxins/wastes continue to circulate through the body and cause dangerous issues. Liver shunts can be outside or inside the liver. Most are congenital issues that show up early in life or are acquired due to another problem with the liver. Issues from liver shunts include hepatic encephalopathy, failure to grow, nervous system issues, seizures and eventually death from all the excess toxins circulating in the blood stream. A sweet, small Goldendoodle puppy, **21-023 Zuzu** now called **Maple**, had such an issue. After much testing and several medications including a prescription food, she was scheduled for a CT scan to determine the type and location of her liver shunt. Liver shunt surgery



slowly closes the shunt over time so that the liver and body are not shocked from a sudden change. **Maple** returned to health and is enjoying her new life with her adopters. We hope for the same with one of our newest rescues, **24-042 Spam**, a 10-week-old female Golden puppy who has been diagnosed with a liver shunt. Surgery will not be done until she is 5-6 months old. In the meantime, she is with a foster that is being very careful to give her only special prescription food, so that ammonia does not build up in the puppy's system.



Rectal Prolapse

Rectal prolapse is not uncommon, but **AGR** had our only dog with this condition in 2021. With this problem, the rectum protrudes through the anal opening and literally hangs outside. Usually this occurs in puppies due to gastrointestinal parasites, but veterinarians are still unsure if that is the only reason. Rectal prolapse can also occur in adult dogs. Definite signs of prolapse are a tube of flesh protruding from the anus, straining when pooping and excessively licking. Always get your dog to a vet if you see these behaviors happening. Depending upon the severity of the prolapse, the tissue may be sutured in place, but only for 48 hours. If this procedure doesn't solve the problem, then further surgery may be needed to anchor the large intestine to the inside of the anus or body. Complications of prolapse can be fecal incontinence and infections. A sweet Goldendoodle, **21-033 Bennett**, was surrendered to us with prolapse surgery already completed, but, unfortunately, he came in with the complications of incontinence and rectal bleeding. After a vet visit and the discovery of a nodule or lump



in his rectum and pain and straining when he did try to poop, he was seen by the specialists where his surgery was originally performed. After initial treatment with pain meds and antibiotics he went back for a CT scan. Unfortunately, the vets could not correct the problem, so we had to send **Bennett** to the Bridge.

Limb Deformity

Deformity of a leg is not something we often see, but it is not uncommon. Limb deformities are usually congenital and sometimes caused by an accident during birth. Interestingly, front limbs are affected more than back limbs. Forelimbs can be deformed when one of the two bones in the forearm grows faster than the other. This will cause the forelimb to be bent or twisted. Years ago, we had a Golden with one limb twisted and bent but otherwise normal. One of our vets was able to completely untwist the limb by breaking bones, using appliances to hold them together and using an outer metal cage to keep the limb in alignment until it healed.



Another limb issue is when the limb is deformed and is shortened, often with an incomplete paw. **AGR** has taken in two dogs with such a deformity, **21-032 CaliAnne** and **22-022 Trooper**. **CaliAnne** was only 14 weeks old when we accepted her. After an exam and X-rays by a specialist, it was determined that in addition to her deformed right paw and shortened limb, she has congenital luxation of her right elbow, which can mean arthritis in her

future. The recommendation was to monitor her function and comfort as she grows, and after her growth plates have closed, to fit her with a prosthetic limb. If more serious issues develop, then amputation may be the best option. The adopters decided not to pursue getting a prosthesis, nor will they consider amputation. **CaliAnne** is almost 4 years old now. She can run as fast as her 4-legged brother; her other brother has the same limb deformity – he has shown her that being different does not make a difference. **Trooper** gets along well, too. He had lived with his short front right limb without a paw for 7 years before we got him; a prosthesis for him was not considered.



17-003 Juggy, renamed **Jessie**, had an unusual leg deformity. Her



left front leg was bent and twisted, but the orthopedic surgeon was able to straighten it out, pin it in place and put a cage around it until it healed. She looks and walks like a normal dog now thanks to his expertise.



An ounce of prevention is worth a pound of cure. Take your dog to your vet for an annual check-up. A relatively little money will be much better spent on preventative measures than a few thousand on a cure if a problem is discovered!

AGR's Wonderful Veterinarians

Academy West Animal Hospital, 6231 W. Bell Road
Glendale, AZ 85308 602-938-8650; M - F 8 AM - 5:30 PM,
Sat 8 AM - 3 PM, closed Sundays; boarding available

Animal Medical & Surgical Center, 17477 N. 82nd St,
Scottsdale, AZ 85255 480-502-4400; 24-hour emergency
service daily; several specialists including neurology

Crosswinds Animal Clinic, 67 S. Higley Rd, Ste. 108, Gil-
bert, AZ 85296 480-497-6617; M - F 8 AM - 6 PM, Sat 8
AM - Noon

Four Legged Friends Animal Hospital, 3131 E. Thunder-
bird Rd, Phoenix, AZ 85032 602-787-0015; M, W, F 7 AM
- 5:30 PM, Tu & Th 8:30 AM - 7 PM, Sat 8 AM - 1 PM,
closed Sundays

Kennel Care Veterinary Hospital, 6277 W. Chandler Blvd,
Chandler, AZ 85226 480-940-0066; M - F 7 AM - 6 PM, Sat
8 AM - 2 PM, closed Sundays; boarding available

Phoenix Mountain Animal Hospital, Dr. Jason Kanarish,
10685 N 69th St, Scottsdale, AZ 85254 602-595-6116; 8
AM - 5:30 PM M-F; 8 AM - Noon Saturdays; closed Sundays

The Scottsdale Veterinary Clinic (and 24 hr ER), 7311 E.
Thomas Rd, Scottsdale, AZ 85251 480-945-8484
info@tsvpets.com

Stetson Hills Animal Hospital, 3870 W. Happy Valley Rd,
Ste. 126, Glendale, AZ 85310 623-889-7090; M & Th 8 AM
- 6:30 PM; Tu, W & F, 8 AM - 5:30 PM; Sat 8:30 AM - Noon

A good general reference is:

Eldredge, Debra M. DVM; Carlson, Lisa D. DVM; Carlson,
Delbert G. DVM; Giffin, James M.D. in *Dog Owner's Home
Veterinary Handbook*, Fourth Edition, Wiley Publishing, Inc.

**Check your first-aid supplies right now to be sure none of
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Golden Hearts



We are so grateful to everyone who has given us their sup-
port. You all truly have hearts of gold! All donations to **AGR**
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All 2025 Calendar Sponsors will be listed
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All who donate in support of our *Summer Fundraiser for Special
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*Phoenix Animal Care Coalition (PACC911)
to help with medical expenses of
24-021 Bentley, 24-022 Charlie and 24-042 Chloe*

*Golden Retriever Foundation's April Fund
to help with medical expenses of 24-021 Bentley,
24-022 Charlie, 24-025 Chandler, 24-026 Ross, 24-027 Phoebe,
24-028 Rachel and 24-042 Chloe*

Thank You

*To Connie McCabe and Nick Dodson for vacation dog care for
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14-064 Sarah Gora	24-042 Chloe Guilbault
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