

A publication of the Centennial Chinese Shar-Pei Club, Inc.

How to Photograph Your Dog: 5 Easy Ways to Get Picture Perfect Photos Every Time by Life In The Dog Lane



Gordon Photo used with permission from Pei People Shar-Pei Rescue

At last count, there are just under two thousand photos of our dog in our iPhoto album. I know, I know. We don't have kids, so we take photos of our dog. But, those photos did come in handy when we decided to write a book; we were able to source the photographs ourselves.

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Fallen Angels

Farewell Magnolia Night, "Miss Maggie". Maggie was owned by Anita Cox and will be greatly missed by all that knew her.

We must also say farewell to our club member, Una Chavarria. We are grateful to her family for their donations to our rescue program in her memory.

We must also say our final farewell to China Puff's Burning Ember, BN, RN, "Emmy" and Ch. China Puff's Fire & Ice, RN "Sparky", owned by Louise Watson. They may be gone but certainly not forgotten.

Due to circumstances beyond our control there was no October newsletter this year. We apologize for that, but will continue in the future to publish our newsletters every quarter.

Anyway, those near couple thousand photos have all been taken with our digital camera; a 'point and shoot' Sony we bought at Walmart for our wedding – in 2005. Megapixels? It's got...some, yeah. We haven't used fancy equipment or lighting. And we've just recently upgraded to using our iPod to take photos because our digital is showing signs of wearing out. Charger anyone? To be fair, we're using the set of rechargeable batteries that came with the camera, so they don't exactly owe us anything.

We've followed a few simple rules to get some great shots of our dog – every time. I grew up in a camera family, so I picked up a few tips as a child. But these tips are easy, and for everyone, so here goes:

5 Easy Ways To Get Great Photographs Of Your Dog

1. Have Your Camera With You

Seems like a no-brainer. But, the best things happen when you don't have your camera, right? Of course, in the world of smart phones, this one isn't that much of a problem anymore. But, regardless, keep a camera close by.

2. Go Low



Photo by Amanda Bauer

Our best photos are taken on our dog's level. When photographing from above, the dog's head can look too small for its body, and when shooting from below, you just get too much jowl and/or nostril. Not flattering. Crouch down or get on your belly. Set the camera on the ground to keep it still and press the button. They get used to you doing this. Or dare to Fill the fill the frame with your dog.

3. Get Outside



Photo by Alice Fix

Ever wonder why so many photos of dogs end up on those 'fail' websites? It's often because they have that haunting eye halo or red eye effect to them. Flash is often needed indoors and flash leads to red eye, particularly with animals. Head outside and take your shots in natural light, especially in the early morning or late afternoon when the light's coming in at an angle – your shots will look more natural and have a fantastic warmth to them. Those two effects can take a photo from looking good to looking amazing!

4. Avoid Distracting Backgrounds



Photo by Amanda Bauer

It's best not to photograph Fido next to the cactus plant. He's going to look like he's sprouting cactus needles. Of course, if you're outside, this can be easy – fields, parks, beaches, trails all provide natural backdrops that don't compete with the dog for focus in the shot.

5. Act Natural



Some of the best photos are taken when dogs are doing something ordinary – just going about their business; running, chasing, digging, sniffing, etc. Those are the moments you want to capture. So follow your dog around for a bit. It's kind of like stalking, but it can pay off with beautiful photos. Personality is king here. And the more the merrier – capture your dog mid-play with other dogs, your kids, or friends and family; that's when you get the really good stuff.

So that's our round-up of tips that have worked for us. Five easy ways to get some pictures that might just be worth a thousand words. Let us know if you try them. Good luck and happy snapping!

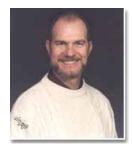
 $\underline{http://www.life in the dog lane.com/2013/06/20/how-to-photograph-your-dog-5-easy-ways-to-get-picture-perfect-photos-every-time/}$

"Dogs are our link to paradise. They don't know evil or jealousy or discontent. To sit with a dog on a hillside on a glorious afternoon is to be back in Eden, where doing nothing was not boring--it was peace." — Milan Kundera

Realistic Expectations When Training Your Dog

Daniel Estep, Ph.D. and Suzanne Hetts, Ph.D. www.AnimalBehaviorAssociates.com





Suzanne Hetts, Ph.D.

Daniel Estep,, Ph.D

Our humorous look at what we as pet owners had to be thankful for at Thanksgiving gave examples of some of our pets'more out of control antics. Our descriptions may have given the impression that Ashley, Mocha (our Dalmatians) and Buffett our cat are ill-behaved nuisances much of the time. Such is not the case.

Buffett is an indoor cat and is allowed out in the backyard only under our supervision. He does from time to time sneak over the fence to visit our neighbors, but we discover him quickly and bring him back home.

Mocha, for the most part, is a couch potato, and when he gets into trouble it's usually because he's following Ashley's lead. Ashley however, is another story. She is what we would call a difficult or "high maintenance" dog. For Ashley, and dogs like her, teaching her to respond reliably to commands so she doesn't do such things as dash out the door when it's open is going to be a life-long undertaking.

Many dog owners want their dogs to be reliable when it comes to obeying commands. They want to have voice control over their dogs when they are off-leash, they want them to avoid dashing through doors and gates when they are left open, they want their dogs to stay within the boundary of their yards even if they are not behind a fence (this violates leash laws in some areas), and they want their dogs to hold a "stay" position in the face of distractions.

Unfortunately, people too often expect this kind of reliability by the end of an eight week beginning obedience class. This is not realistic. We've

been working with Ashley on obedience commands in the year and a half that we've had her. She's much better than the completely untrained puppy she was, but she still has her lapses. Having your dog respond to your commands in situations where the temptation not to do so is strong, such as an open front door, requires a lot of practice. Obedience training a dog is not an eight week endeavor, but a life long one. It requires repetitions, good step by step training methods which don't set performance standards that are more difficult than what the dog has actually learned, helping the dog generalize his training to respond correctly in many different environments and to ignore distractions. How well the dog learns and performs is highly dependent on how good are the methods used to teach him.

Training should be fun for both dog and owner. Methods that focus too much on leash and collar corrections and deny the value of rewards, including but not limited to food in training, may not be as beneficial. By January, 2000*, standards for humane dog training will be available to assist owners in finding trainers who use humane methods.

While obedience classes won't solve behavior problems such as separation anxiety, house soiling, excessive barking or aggression, they are still an important tool in helping your dog be a better behaved pet who isn't a nuisance. A basic obedience or puppy class is only the beginning of training, not the end product.

*Since this article appeared, two publications have come out of this initial project.

1. Professional Standards for Dog Trainers: Effective, Humane Principles. Published by and available from the Delta Society, <u>www.deltasociety.org</u>

Edited version of this article was first published in the Rocky Mountain News, Denver, CO.

"If a dog will not come to you after having looked you in the face, you should go home and examine your conscience."

~~ Woodrow Wilson

Showing My Dogs in Brace at Nationals in Albuquerque by Jeanne Hill-Jurik



When they changed the Shar-Pei National venue to Albuquerque, NM earlier this year I thought that I would go as it was within driving distance and it was a chance to see a lot of Shar-Pei friends and their dogs. At Nationals they have a lot of special events that you don't have at regular dog shows and one of these is Brace. Brace is where one person shows two dogs together at the same time. The dogs are joined by a special connecting lead to their show collars and the handler has one lead. The purpose of showing in Brace is to show two dogs that conform to the breed standard, that are similar to each other and who move and look as one.

This is the first time that we have ever had two dogs from the same litter and we always get comments on much they look alike and asked if they are twins. Both dogs are on the same page and do everything together so

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I thought if I was ever going to do Brace this was the time. I have never done brace before so the dogs and I were starting from scratch. I went on E-bay looking for the necessary Brace lead and collars and luckily I was able to find the right equipment. Everything arrived about a week later.

It was time for some practice so I got the equipment out, figured out how it went on and rigged up the dogs. Of course they both looked at me like I had lost my mind but undaunted I got their attention and said; "Let's go!" Well my female, Cleo, thought this was some kind of punishment and went slow and my male, Titus, decided it was time to go fast and be the lead dog. So I had one dog going slow and the other trying to drag both of us. Our driveway is long so we kept going to the end and I tried to slow Titus down and encourage Cleo to go faster. What had I gotten myself into?

The first time we only practiced for about 10 minutes and we did a few more short practice sessions over the next few weeks leading up to Nationals. The dogs were doing better and I had Titus on the outside as he was the faster dog. Both dogs are finished Champions and were used to the ring and having a judge go over them but running in unison was still a challenge.

Show day came at Nationals and we were up. I had run them both together outside the show ring and I think they were up for it. In the ring we go walking in together and stopping for the judge's initial look. I stack both dogs next to each other and try to get them to look at me while I stand in front of them. The judge says; "Take them around the ring." I look at both dogs and softly say; "let's go." We start off and we are moving together! Titus is not trying to be lead dog and Cleo is keeping up with him! We get back to where we started and the dogs stop in unison and I stack them again for the judge's examination. I show the bite and tongue on each dog and she goes over each dog with her hand. Both dogs are well behaved through the examination and the judge says: "Please take them around in a triangle." Triangle? We didn't practice a triangle. Oh well, we do two legs of the triangle and I stop them to straighten them to do the third side as it is like doing the diagonal of a down & back in the show ring and we are done! The dogs did a great job and I am very proud of them.

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We are lined up for the final judge's viewing and she come by me and says; "It is a hard decision but as you stopped for the final leg on the triangle I'm going to give you second." So it was me and not the dogs who cost us first place. I was very happy with second and the dogs know they did well. I had a lot of people who came up to me after we showed who said we looked great and should have won. The main thing was that it was something I did together with my dogs and we all enjoyed it. A day with my dogs is never a bad day.

Vets and Physicians Find Research Parallels By William Grimes

Three times in the last two months, researchers from St. Luke's-Roosevelt Hospital Center in Manhattan headed across town to the Animal Medical Center to look at dogs.

Doctors at the hospital's Vascular Birthmark Institute were enticed by the chance to study anomalies of the arteries and veins that are rare in humans but common in dogs. And the traffic between human and animal hospitals flows in the other direction, too: Late last month, veterinarians from the Animal Medical Center began meeting with their counterparts at Memorial Sloan-Kettering Cancer Center to set up trials of a noninvasive device for removing tumors of the urinary tract with electrical impulses.



Photo by Michael Stravato for The New York Times

Dr. Jonathan M. Levine at Texas A&M studies spinal cord injuries in pets like Dexter, a dachschund.

Exchanges of this sort are becoming increasingly common. Once a narrow trail traveled by a few hardy pioneers, the road connecting veterinary colleges and human medical institutions has become a busy thoroughfare over the last five years or so, with a steady flow of researchers representing a wide variety of medical disciplines on both sides.

One reason is a growing frustration with the inefficiency of using the rodent model in lab research, which often fails to translate to human subjects. So researchers are turning their attention to the naturally occurring diseases in dogs, horses, sheep and pigs, whose physiology and anatomy more closely resemble those of humans.

"The drugs cure the mice and keep failing when we try them on humans," said Dr. John Ohlfest, an immunotherapist at the University of Minnesota Masonic Cancer Center, who began working with the university's veterinary school in 2005 to study canine brain cancers. "The whole system is broken."

Dr. Laurence J. N. Cooper, who develops immune-based therapies at the M. D. Anderson Cancer Center in Houston and recently started making canine T cells for lymphoma research at Texas A&M's veterinary school, said: "There's got to be a better way. Canine biologies look like ours, and the treatments look like ours."

The growing realization that vets and medical doctors may have very good reasons to talk to one another has led to a host of collaborative research projects aimed at speeding the journey from lab to human clinical trials and, in the end, producing a result that can be applied to human and animal patients alike.

These projects often emanate from partnerships like the National Cancer Center's comparative oncology program, created in 2006 to coordinate canine cancer trials among 20 oncology centers across the United States, or the Center for Comparative Medicine and Translational Research at North Carolina State University's veterinary college, which recently signed a partnership agreement with the Institute for Regenerative January 2014 Rocky Mountain Wrinkle Vol. 12, Issue 1

Medicine at Wake Forest Baptist Medical Center to do research on regenerating organs in humans and pets.

"In the past I might have gone over to the medical school with a specific problem and ask advice," said Dr. Larry D. Galuppo, an equine surgeon at the University of California, Davis, who has been experimenting with the latest stem-cell therapies to repair tendon injuries in horses. "But it wasn't programmatic the way it is now."

It is not unusual, these days, for veterinary surgeons to call in their human-medicine counterparts for consultations or even to take part in tricky operations. Vets go on rounds at hospitals for people, and vice versa. Both sides attend each other's conferences. "It's still grass roots, it's still early days, but it's very exciting," Dr. Ohlfest said.

In part, the proliferation of partnerships reflects a philosophical movement known as "one health," or "one medicine," the recognition that about 60 percent of all diseases move across species and that environmental pollution, animal diseases and human diseases constitute a single interlocking problem.

This was the subject of a joint declaration by the American Medical Association and the American Veterinary Medical Association in 2006 aimed at encouraging information sharing and joint projects among the far-flung branches of veterinary and human medicine.

More concretely, the completion of the canine genome map, in 2005, set off an explosion in basic research. Although less celebrated than the Human Genome Project, the canine map gave researchers a blueprint with clear potential for human use, since the gene codes for canines could be matched, one for one, with their human counterparts.

Cooperation can take the form of advanced research into new forms of diagnostic imaging, or gene manipulation. Or it can be as humble as fitting a dog with a shoe.

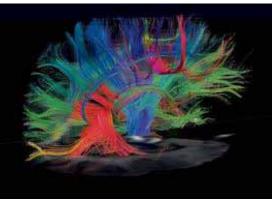
Dr. Robert Hardie, a surgeon at the University of Wisconsin's school of veterinary medicine, turned to the orthotics lab at the university's medical school in 2005 when he could not heal a post-surgery foot wound in Sam, a 200-pound Irish wolfhound.

As many other large dogs with footpad injuries do, Sam kept putting weight on the wound, caused when a toe had to be amputated. The orthotics team took a cast of Sam's foot and made a foam-lined plastic boot with Velcro straps. Dr. Hardie later worked with the team to develop specialized braces for tendon injuries.

Often, partnerships embrace multiple institutions and, within institutions, fields as diverse as biomechanics and textiles.

Dr. Jonathan M. Levine, a veterinary neurologist at the Texas A&M University College of Veterinary Medicine and Biomedical Sciences, joined forces with the medical school at the University of California, San Francisco, to test a promising new drug that blocks a particular enzyme that inflicts secondary damage, like the aftershock to an earthquake, on injured spinal nerves.

Working with dachshunds and other dwarf canine breeds, which often suffer from spinal cord injuries because of their propensity to develop herniated discs, he recently won a grant from the Department of Defense, which is interested in the application of his research to battlefield injuries.



At the same time one of Dr. Levine's colleagues, Dr. Jay Griffin, has collaborated with specialists at the University of Texas Health Science Center in Houston to develop a new technique, called diffusion tensor imaging (dti), whose sensitivity allows them to see precisely how spinal cord cells die.

DTI image

The big bet is that veterinary science and human medical science can combine to achieve efficiencies that translate across species. In some instances, this has already happened.

Dr. Hollis G. Potter, head of magnetic resonance imaging at the Hospital for Special Surgery in Manhattan, has been working with Dr. Lisa A.

Fortier of Cornell University's college of veterinary medicine to analyze meniscus injuries using sheep.

Quantitative M.R.I. techniques like ultra short echo-time imaging makes it possible to see how knee tissue heals, and how much stress it can stand after surgical repair, information that has immediate application for the human knee. "In just a couple of years, we've taken this process from sheep to humans," Dr. Potter said.

The reverse route is even quicker. "Traditionally there has been a 10-to-20-year lag between animal and human medicine," said Dr. Chick Weisse of the Animal Medical Center in Manhattan, who for the last two years has been treating hard-to-reach canine tumors with a frozennitrogen technique he learned at Sloan-Kettering.

"That gap has narrowed," he said. "Now you see renal transplants, hip replacements — things they said would never be done on animals. Things are happening so fast right now that it's almost simultaneous."

Dogs Recognize Familiar Faces from Images



Dec. 18, 2013 — So far the specialized skill for recognizing facial features holistically has been assumed to be a quality that only humans

and possibly primates possess. Although it's well known, that faces and eye contact play an important role in the communication between dogs and humans, this was the first study, where facial recognition of dogs was investigated with eye movement tracking.

Main focus on spontaneous behavior of dogs

Typically animals' ability to discriminate different individuals has been studied by training the animals to discriminate photographs of familiar and strange individuals. The researchers, led by Professor Outi Vainio at the University of Helsinki, tested dogs' spontaneous behavior towards images -- if the dogs are not trained to recognize faces are they able to see faces in the images and do they naturally look at familiar and strange faces differently?

"Dogs were trained to lie still during the image presentation and to perform the task independently. Dogs seemed to experience the task rewarding, because they were very eager to participate" says professor Vainio. Dogs' eye movements were measured while they watched facial images of familiar humans and dogs (e.g. dog's owner and another dog from the same family) being displayed on the computer screen. As a comparison, the dogs were shown facial images from dogs and humans that the dogs had never met.

Dogs preferred faces of familiar conspecifics

The results indicate that dogs were able to perceive faces in the images. Dogs looked at images of dogs longer than images of humans, regardless of the familiarity of the faces presented in the images. This corresponds to a previous study by Professor Vainio's research group, where it was found that dogs prefer viewing conspecific faces over human faces.

Dogs fixed their gaze more often on familiar faces and eyes rather than strange ones, i.e. dogs scanned familiar faces more thoroughly.

In addition, part of the images was presented in inverted forms i.e. upside-down. The inverted faces were presented because their physical properties correspond to normal upright facial images e.g. same colors, contrasts, shapes. It's known that the human brain process upside-down images in a different way than normal facial images. Thus far, it had not been studied how dogs gaze at inverted or familiar faces. Dogs viewed January 2014 Rocky Mountain Wrinkle Vol. 12, Issue 1

upright faces as long as inverted faces, but they gazed more at the eye area of upright faces, just like humans.

This study shows that the gazing behavior of dogs is not only following the physical properties of images, but also the information presented in the image and its semantic meaning. Dogs are able to see faces in the images and they differentiate familiar and strange faces from each other. These results indicate that dogs might have facial recognition skills, similar to humans.

Helsingin yliopisto (University of Helsinki) (2013, December 18). Dogs recognize familiar faces from images. *ScienceDaily*.

http://www.sciencedaily.com/releases/2013/12/131218095847.htm

This is a little bit different view on Flexi leashes. It gives you something to think about when you are out walking your dogs.



Ask Me How I Feel About ''Flexi'' Leashes

By Cassie-Leigh Stock

Ahhhhhhhhh, haha, retractable leashes... a hot topic that came up this afternoon in a happy

meeting with Cody's Creations (who is not a proponent, either) that inspired me to write down some brief thoughts...

As most people who know me know, I HATE flexi-leashes. This might be the one dog training tool that I absolutely cannot find ANY value in; (even silly ones usually at least have some kind of foundation in a reasonably good idea... for the most part); NOT this one (if you ask me...).

Everything you can do with a retractable leash can be done on a long, fixed line (albeit maybe not as conveniently). The benefits of convenience, in my opinion, are far outweighed by the potential negative consequences of using of one these bad larry's. Exhibit A... (Fear tactic? Possibly.)

The injury in the photo to the right is a pretty typical example of what retractable leashes (cords, maybe more accurate?) can and do cause on a regular basis. (I will accede to the fact that the argument could be made that the leash didn't cause the injury; the poor - or complete lack of - training of the dog at



the end of it did). However, when was the last time you saw a welltrained dog walking down the street attached to one of these? I'm going to venture a guess here & say never. Been wrong before, but...



The reasons I can't stand these things are as
1) Simple mechanical malfunctions. I worked at a major corporate-owned PETsTORE for 6 years and I can tell you from experience that these things malfunction. Often, the mechanism inside breaks (never EVER at a convenient time... speaking of convenience) resulting in the line being continuously let out when you don't want it to be OR jammed. When and if the line jams and the contraption is

ripped out of your hand, guess what happens? Your dog was already taking off after something (or it wouldn't have been yanked out of your hand) and now he has a plastic monster chasing after him. It is scary to dogs when this happens, and many a canine has ended up on a "Missing" poster over it.

2) Manners. I can't tell you how many times on how many different occasions (at how many different events, to the disillusion of how many people) I have seen someone's dog 16 feet away from it's owner wrapped around a display



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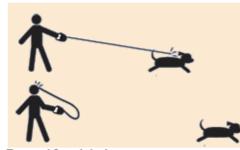
Exhibit B Some not-so-fun side effects of retractable leashes (illustrations taken from the Flexi leash website)



Finger amputations and fractures (OMD)



Cuts and burns



Eye and face injuries



Injuries to bystanders



Falls

in a store, peeing on a table at an event, tying up another dog, "THIS CLOSE" to becoming dinner for another dog, in a completely different aisle or on a completely different STREET than the person holding the other end of the leash, jumping up, scratching, lifting their legs, wrapping up an exhibit, pulling down shelving ... You see where I'm going with this. "Manners" is also a nice way of saying this is yet another reason I can't stand these things. Safety may be more accurate, which brings me to:

Reason #3) They are dangerous. Notice the pictures that I have included thus far depict injuries to humans...never mind the injuries to unfortunate dogs, including the bystanders. I will again accede to the fact that it is probably possible to use these things appropriately (?), responsibily, but I am gritting my teeth while even typing out that sentence because I have such a bad taste in my mouth for these due to what I have consistently seen over the years. I cannot

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recall ever once seeing somebody use one of these things responsibly... and I have seen a LOT of dog/human interactions (ya think? ;).

Retractable (extendable...flexi... choose your word) leashes frequently cause injuries up to & including those in Exhibit B, adapted from Flexi's own website.

I can already hear somebody arguing with me in favor of "Flexi" leashes by saying something like, "Well, I could say pit bulls frequently cause injuries up to and including the propaganda photos to my right" which is bs for many reasons and I will debunk that potential argument in another article.

4) ... and one of the more important reasons in my profession: retractable leashes send mixed (poor) communication signals to the dog. There is ALWAYS tension on a retractable leash... ALWAYS. The dog is aware of this, and this can have a SLEW of negative consequences, too innumerable to include all of them in this article, but teaching Cooper to walk with tension on the leash (read: pull) being the least of it.

And Reason #5: The total lack of control any given owner has on one of these things leads to injuries to other dogs with unusual frequency. I took the liberty of sharing the following blurb, adapted from http://www.henkimaa.com/2011/02/15/dog-whisperer-needed/ because it Is so typical. Read on:

"This is the second time my friend Marcia's dog Kimmee has been attacked by her neighbor's dogs.

All three dogs were on leashes, but both of the attacking dogs were (1) larger than Kimmee; (2) on extendable leashes that were fully extended, leaving their owner with little control over them; (3) too large and strong for their owner to control both of them at the same time to begin with, [reliably on extendable leashes].

And this is the second time. The other dogs' owner should know better. Marcia had taken Kimmee outside for a poo, and suddenly around the corner came here came the neighbor dogs at the ends of their leashes, their owner obviously not paying a great deal of attention to what her dogs might encounter out of her sight, running ahead as they were.

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Even though she knew her dogs had attacked Kimmie just a few months' previous, to the tune of over \$300 in veterinary care. This time was worse (& the vet's bill reflects it)."

I did not actually include in these pictorials the injuries inflicted on dogs by their own "Flexi" leashes.. I have knowledge of



these through friends who work at vets' offices and those injuries include: tail injuries resulting in amputation, lacerations down to the bone, injuries to tendons, torn skin (think inner thighs from leashes going under dogs), eye injuries, burns to the skin, etc.

In conclusion, I'd like to go on record as saying I can't stand extendable/retractable/Flexi leashes. I do not believe that they can be used 100% safely for the simple malfunction argument alone. They do nothing to help in a typical dog's training because of the constant tension on the collar. They give the owner extremely limited control... to the potential physical detriment to both human & canine, as evidenced above. They basically *represent* a gigantic percentage of what I feel is wrong with dog ownership these days; lack of: control, responsibility, understanding, and training. Rant concluded. Love it or hate it, thank you for reading.

I invite you to come check us out on facebook at www.facebook.com/hexdogs! Again, love it or hate it, thanks for reading. Reach out anytime at hexdogs@gmail.com, and please visitwww.hexdogs.com to see what we are actually about.

http://www.hexdogs.com/2/post/2013/04/ask-me-how-i-feel-about-flexi-leashes.html

Cassie-Leigh Stock is in her late 20's and resides in Massachusetts with her Pitbulls. She is an enthusiastic & certified dog trainer & hopelessly devoted pit bull lover!

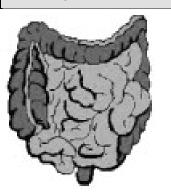
Dr. Vidt's Corner: Inflammatory Bowel Disease

Inflammatory bowel disease is not so much a disease as it is a group of clinical signs related to a large number of underlying causes. The clinical signs primarily involve the gastrointestinal tract and can vary somewhat based on what part of the GI tract is affected. Vomiting is the primary sign if the stomach is

affected. If the small bowel is affected the signs are related to a proteinlosing enteropathy - diarrhea or loose stools, weight loss, loss of appetite, etc. If the large bowel (colon) is affected signs are related to colitis such as loose stools (cow-pie type), mucous and/or bloody stools, straining to defecate and increased frequency of defecation. The underlying pathology in IBD is infiltration of the gut wall by various types of inflammatory cells such as eosinophils, macrophages, lymphocytes and plasma cells. This infiltration causes thickening of bowel wall which interferes with digestion of food and absorption of nutrients malabsorption/maldigestion syndrome. ANY SHAR-PEI WITH A NON SPECIFIC ILLNESS SHOULD BE WORKED UP FOR IBD! Laboratory findings are non-specific, but may include a low albumin and globulin due to intestinal loss of these proteins mild anemia due to GI hemorrhage and electrolyte abnormalities due to chronic vomiting and diarrhea. Special testing such as B12/Folate levels may be useful. Fecal alpha-1 protease inhibitor is a new test which may prove useful in the diagnosis of IBD. The primary mode of diagnosis is intestinal biopsy which may be done via gastrointestinal endoscopy which is non-invasive or via exploratory laparotomy abdominal surgery. These procedures should be considered early in the course of the disease when the dog is the best anesthetic candidate. Waiting too long increases the risk. Bear in mind also that there is a 5-7 day delay in getting the biopsy results back. Therapy and prognosis does vary somewhat based on the type of IBD seen on the biopsy. Exploratory surgery also allows the veterinarian to rule-out other causes of GI disease and chronic illness such as cancer, bacterial or fungal disease, liver disease and intestinal foreign objects.

The cause of IBD in Shar-Pei is probably related to two breed predispos-

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itions - foodallergy and IgA deficiency. 70% - 90% of Shar-Pei are deficient in IgA which is an immunoglobulin found in secretions of the GI tract, reproductive tract and the respiratory system. IgA has an important immune system function in these areas. It helps prevent infectious agents and antigens in the diet from crossing the lining of the gut. When antigens in the diet gain access to the gut wall an immune response is

stimulated which eventually results in inflammation and damage to the gut wall. Allergic responses to substances in the diet can also elicit a severe inflammatory reaction. Other causes have yet to be elucidated.

Therapy of IBD involves the use of specific drugs and dietary management. Drug therapy consists of immunosuppressive therapy with prednisolone or other corticosteroid. These are used to decrease inflammation and suppress the immune response so healing can occur. Other drugs are often combined with corticosteroids because of a synergistic effect. Sulfasalazine is often used for immune-mediated colitis as an anti-inflammatory medication. It is converted to aspirin in the colon. Sometimes other more potent chemotherapeutic agents are needed such as azathioprine. Dietary therapy is also extremely important. The use of novel protein sources is paramount as is the use of simple diets with minimal additives. There are a variety of diets available through your veterinarian specifically formulated for use in IBD. They often use lamb, chicken, rabbit, duck, turkey or venison as their protein source. All natural diets are sometimes used as well. IBD should be one of the major considerations in any Shar-Pei with weight loss and normal laboratory findings.

The special GI functions tests described in this article are done at the Gastrointestinal Function Test Lab. The address is:

GI Lab, College of Veterinary Medicine, Tamu 4474, College Station, TX 77843-4473, Telephone:(979) 862-2861 Fax: (979) 862-2864 E-mail: <u>gilab@cvm.tamu.edu</u> Web site: <u>www.cvm.tamu.edu/gilab</u>

http://www.drjwv.com/article.php?view=0005.php&name=Inflammatory +Bowel+Disease

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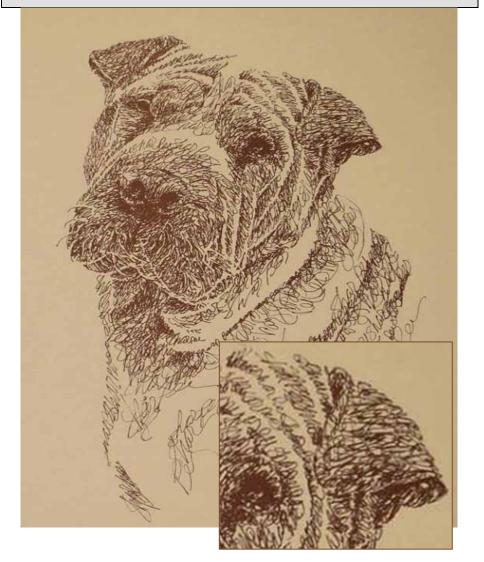
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A note from the Editor:

We would like to thank everyone who has taken the time to contribute an article to this newsletter. The Rocky Mountain Wrinkle is a club publication, and as such requires the participation of club members through- out the year. Your participation will help to make this publication meaningful and worthwhile for the membership of the club. All contributions and ideas are greatly appreciated.

Please forward your input for inclusion to the Publisher at the address listed below.

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