





Welcome to our Spring newsletter.


NEWSLETTER Spring 2011

In this Edition...

Poisonings 

A surgical patient; from admission to discharge 

Blondie; an old lady with kidney failure 

NZVA conference; and more 

Every time we get a poisoned dog brought in to the clinic, the cry goes up "You have to tell people about poisonings in the newsletter!" so please read on.

I hope you will find our nurses corner interesting too; following a dog having surgery through the day. There's more to it than you think!

Enjoy!

POISONINGS - PREVENTABLE TRAGEDIES!!

RAT BAIT

These generally contain Warfarin or related compounds, which act as anti-coagulants. They stop the blood clotting mechanisms in the rat that eats the poison, but unfortunately they have the same effect on pets, particularly dogs, who are just as likely to eat any bait they find.

Symptoms

- Signs of poisoning do not show up until several days after eating the poison.
- External bleeding is possible, but not common.
- Internal bleeding is the usual symptom, but is often not evident. Signs include bloody or very dark stools, bloody urine or coughing up blood.
- The most common symptom is weakness caused by loss of blood internally. Pale gums are also seen.

Diagnosis

- An in-house "PCV" blood test will quickly establish whether and to what extent the dog has become anaemic.
- A "prothrombin time" blood test at the pathology lab in Auckland will establish whether the blood loss is due to prolonged clotting time.

Treatment

- If the dog has just been seen to have eaten rat bait we can make the dog vomit.
- Vitamin K1 is the antidote to warfarin type poisonings. We start treatment with an injection and send the dog home with a two week course of tablets. The different classes of anticoagulants vary in how long they stay in the body, so we re-test prothrombin time two days after finishing treatment, and often have to continue treating for several more weeks.
- The cost of diagnosing and treating a 25kg Labrador for two weeks is typically about \$300.
- Blood transfusion! Often by the time a poisoned dog arrives at the clinic it has lost so much blood the only thing that will save it is a blood transfusion. We have to call up a donor dog, collect blood and transfuse before we lose them. They need hospitalization for some time and will go home with a bill of \$1200 or more.



Secondary poisoning by eating a poisoned rat is possible in theory, but in practice we hardly see it, but what does catch people out is that rats will move baits. They carry them back to their nests and can drop them on the way.

The take home message: Take extreme care when using rat bait. Watch out for dropped baits and check your dog every day while you're poisoning: Look for pink gums and plenty of energy. If in doubt; get him checked!

SLUG BAIT

Most slug bait sold in garden centres contains Metaldehyde. Again, dogs are the most commonly poisoned pets, because they are not fussy about what they eat. (Slug bait is often advertised as having "pet deterrents" added, but nobody told the dogs! They like this stuff and they don't need much).

Symptoms

- Metaldehyde is a neurotoxin. Signs develop fairly quickly after eating the slug bait. They start with twitching, which quickly progresses to uncontrollable seizures, respiratory failure and ultimately death.

Diagnosis

- The appearance of the twitching patient is usually quite characteristic.

Treatment

- There is no antidote for metaldehyde. If the patient's symptoms have not progressed too far we make them vomit and give them activated charcoal to bind the toxin and prevent further absorption. Tremors are controlled with sedatives.
- More advanced cases need full anaesthesia and their stomachs pumped. Depending on how much toxin has been absorbed these dogs may need to be kept anesthetized for several days. This obviously requires intensive hospitalization day and night and these cases will go home, if we save them, with bills up to \$1500!



The take home message: Don't use this stuff!!!

There is a product called "Quash" which is completely safe for pets and very effective at killing slugs and snails. Tell your neighbours', tell everyone!!



NURSES CORNER: WHAT HAPPENS WHEN YOUR DOG GETS SPAYED?

When you bring your dog in first thing in the morning a vet will do a full clinical examination to ensure that she is fit and healthy for an anaesthetic, make sure she is not coming on heat and check that she has an empty stomach.

You will be offered a pre-anaesthetic blood test, to make extra sure that your dog is safe to be anaesthetised, and intravenous fluids, which reduce the risks of blood pressure dropping during her anaesthetic.

Your dog will then be admitted into the dog ward of the hospital. She will be given a premedication injection, which includes some preoperative pain relief and a sedative, to calm her prior to surgery and provide a smooth induction to anaesthesia.

Once the premedication has taken effect, a small area on her front leg is clipped and an intravenous catheter is placed into her cephalic vein. This gives us a valuable port to administer drugs and intravenous fluids.

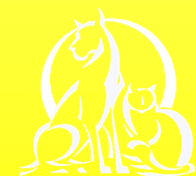
A short-acting intravenous anaesthetic is then given, which makes her lose consciousness, and an endotracheal tube is placed down her throat. We administer oxygen and an anaesthetic gas through this tube.

From the time she is anaesthetized, until she is fully awake again, a nurse is with your dog constantly, monitoring her level of anaesthesia and checking her vital signs. We check her respiration rate, gum colour and capillary refill time, temperature and presence or absence of certain reflexes. We also have monitoring equipment, such as Doppler to record blood pressure and a Pulse Oximeter to record heart rate and oxygen levels.

A large area on her tummy is clipped and the skin is cleaned with an antibacterial solution. Once she is carried into the operating theatre and put onto the heated table, a second surgical scrub is done, while the surgeon scrubs their hands. All nurses and vets in theatre wear hats and masks, and the operating vet wears sterile gloves and gown, and the dog is covered with sterile drapes.

The operation itself involves removing her whole uterus and both ovaries and tying off all the blood vessels to these organs. Then the surgical wound is closed up with dissolving stitches on the inside and nylon ones in the skin. The whole operation usually takes 30-45 minutes, depending on the size of the dog and how fat she is. (The fatter, the more difficult!)

Once her surgery is finished, the anaesthetic gas is turned off & she gets oxygen for a few more minutes, then she is taken through to the recovery room. She is kept warm and monitored closely until she is sitting up and can be left quietly to recover, with regular checks to chart her vital signs. While one nurse is doing this, another is cleaning the instruments to get them ready for sterilization in the autoclave.



A few hours later she is taken out to the toilet and given an anti-inflammatory for additional pain relief, and by late afternoon she is ready to go home!



Placing an intravenous catheter



The endotracheal tube goes in



Monica charts her vital signs while Didier operates



Ready to go back to recovery



Waking up!

BEAUTIFUL "BLONDIE" - A CAT WITH CHRONIC KIDNEY DISEASE

Blondie is a beautiful, sleek black nineteen and a half year old cat. We have known her at the Mill Road Vet Clinic since she was a kitten and have come to love her as her owners do!

Blondie was admitted to our hospital on the 8th of September 2010 for a routine dental. As far as her owners were aware, she was physically well. A pre-anaesthetic blood test (PABs) and urinalysis was performed on Blondie prior to her dental and surprisingly, she had quite high Blood Urea Nitrogen (BUN) and Creatinine, and her urine wasn't concentrating properly, all of which indicates kidney disease. Due to her decreased kidney function, Blondie's dental was postponed with a view to getting her kidney disease under control first.



Blondie tucks into her breakfast while the vet nurse administers her SQ fluids

We recommend PABs for all animals, particularly animals over 8 years of age, prior to a general anaesthetic to pick up any subclinical disease (such as kidney disease, liver disease or diabetes) that could become worsened by a general anaesthetic.

Blondie had her blood pressure taken, and as it was very high, she was started on medication to lower this. High blood pressure is very common in older animals and is often a complication of kidney disease. An intravenous catheter was also placed into one of Blondie's front legs and she was given intravenous fluids for 5 days in hospital until her BUN and Creatinine had decreased.

Contrary to popular belief, kidney disease in cats if caught early enough, is very manageable. Blondie was sent home on Hill's K/D, a food specifically formulated for kidney disease, which has reduced phosphorus and protein levels to decrease the filtering load on the kidneys. Changing a renal cat's diet onto Hill's K/D is one of the most important things we can do to increase the length of quality life for the cat. As long as the transition onto Hill's K/D happens slowly, most cats adapt well to the change in diet. Blondie was also sent home on her blood pressure medication to be given every day, and appetite stimulants to be given every 3 days. Appetite stimulants are often given to cats with renal failure to help to keep them eating and to help them maintain their weight.

Her dedicated owners were taught how to administer subcutaneous (SQ) fluids to Blondie, and she gets 75mL run in under the skin of the back of her neck twice daily. A cat in renal failure drinks a lot, but is often dehydrated due to having dilute urine and urinating more frequently. Administering a bolus of fluids under the skin via a needle and drip line once or twice daily can help to boost the cat's hydration. Cats cope with a small needle in the back of their neck for 3-4 minutes surprisingly well!!

Blondie is doing very well with her kidney disease, and her dental was done in December 2010. She is eating well and is pottering about happily. Blondie comes in regularly for weight checks and blood pressure checks and it's always lovely to see her! She is currently staying in our hospital for 5 weeks while her family are away, so that the nurses can administer her pills and twice daily SQ fluids, and she is a very happy cat!



CONTINUING EDUCATION

NZVA CONFERENCE

This year's NZ Veterinary Association's Annual Conference was held in Hamilton in June and Michelle was the lucky one that got to go this year.

The theme for the Companion Animal component was "Feline Medicine and Surgery". The topics covered varied from medical problems such as renal failure, hyperthyroidism, diabetes, FIV and nasal disease, to gastro-intestinal surgery and pain relief.

She came home armed with all the latest ideas and evidence on these subjects from specialists in New Zealand and around the world.

And she won the clinic some new cat scales!



ROAD TRAFFIC TRAUMA - PATIENT STABILIZATION AND EMERGENCY SURGERY

Debbie has been kept busy over the last few months with an online Vet Scholar course, run by surgical specialists from Massey University and the Veterinary Specialist Group in Auckland.

The course covers effective resuscitative efforts and emergency management of traumatic injuries to the head, chest, skin and bone.

Unfortunately road traffic accidents are a problem we deal with all too often and they almost always present as emergencies, so we don't have time to stick our heads into textbooks!

We know the whole practice will benefit from this course, as Debbie passes what she's learnt onto the rest of us.

STAFF NEWS

WELCOME ELAINE!

Some of you may have met Elaine McIlhinney, who is currently doing some locum work for us. Elaine is from Scotland and gained her Veterinary degree at the University of Glasgow in 1999. She worked as a small animal vet in Glasgow for 8 years, in several different practices, including a state of the art Accident and Emergency practice, before emigrating to New Zealand in 2007.

She and her husband, a psychiatrist, and three lovely daughters have settled in Maunu.

Elaine joins Mill Road armed with great knowledge and experience, enthusiasm and a lovely "bedside manner". We hope to see lots more of her smiley face in the future.



HILLS FELINE ADULT CHICKEN 1.5 KILO BAGS

2 for \$42 while stocks last
normally \$52.20

