

Mid-Atlantic Chinese Shar-pei Rescue Operation

Non-Profit, Tax Exempt

Dedicated to the
rehabilitation
and adoption
of purebred
Chinese
Shar Pei

Quarterly Newsletter

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With this issue we are preempting our usual format which has been in effect since our first newsletter in January 1998. Our rescue work began in 1987 and continued through the present. But at a time when there are more dogs in shelters than ever before, we are faced with possible closure. Worse than that, we are facing having to put dogs "down" for lack of foster and permanent homes. We currently only have five dogs in our care. All of these dogs are in kennels at great cost. But more important than that, they have little socialization and three of them are frankly, unadoptable without socialization. They are not aggressive; they are handsome dogs – but they, through no fault of their own, have been neglected by their former owners to the point that they are frightened to death of people. Two of these dogs were a part of the cruelty case you may have read about in the Washington Post, where the owner, a doctor with the Health Dept., did not shoe his horses and their hoofs became so overgrown that they could not walk. Well, that same doctor had a stall with six Shar Pei, who apparently lived their lives in that stall. Volunteer's visits to them once or twice a week does not do the job. They need to go into a compassionate home for much interaction with people. We have turned dogs of this nature around before. But we are faced with the possibility that they may never be socialized.

Our Vet and kennel bills are overwhelming and despite all our efforts to "get the word out" to the public, we have received little or no adoption applications, which I understand is a nationwide problem. Over the years there have been people who kept the operation going. Deb Pope edits, prints, stamps and mails out all the newsletters at her own expense and keeps our web site updated. Karen Perkins, even though she has moved to Massachusetts, pays for the web site. Maureen and Jason Tankersley spend most Sundays walking and playing with our kenneled dogs. Jeannie and Bryan Johnson transport and foster at a moments notice. Mike Bassett helps with socialization as do other volunteers who help with the walking. Pam and Curtis Robbins along with me, try to carry the rest of the load. If you have supported MACSPRO over the years, you will remember when we took in the "Richmond 13" or the "DC 8" or many of the other large groups of dogs that came in to our rescue. But today the load is becoming too heavy and a look at our financial report, in this issue, will give you an idea of what we are facing. If you have ever received a dog from us or admire the work we have been able to do, please reach down into your hearts now and think of a way to help save these dogs and our rescue operation. We are not "crying wolf" this time. If there is no response, we will feel that we are no longer useful or needed and will "fold our tents and move on". The ones who will most suffer the loss will be the dogs that come into the shelter tomorrow.

RESCUES & ADOPTIONS since December 2005 – below is an updated list of our rescues and adoptions since our last newsletter in May. Those listed with an "*" next to them are dogs that are still available for adoption. All our dogs are spayed or neutered prior to adoption (health/age permitting); have been heart worm tested; parasite tested and have all necessary shots.

266-05 Pacino had not only serious scars across this back but in his mind. He began to be aggressive with people and we had to put him down. We all cried over this decision but he definitely was not a happy dog.

267-05 Arthur just wanted to be an only dog. Mr. Engelberger, whose adopted dog, Bebe had just died, agreed to foster and that has turned into a permanent home in a big house with a fenced yard for Arthur.

271-05 Coco, who was treated for heartworm has found a permanent home with her foster in Baltimore.

273-05 Fannie was adopted and unfortunately she became aggressive to outsiders and could not be controlled. She had to be put down.

274-05 Niko, a sable male was adopted by a couple who recently had lost their beloved "Mickey", who was also a MACSPRO rescue.

277-05 *Ashley, our "ShaLab" is still being fostered in North Carolina and has grown into a sweet gal. The foster Mom has lots of her own dogs and wants very much for Ashley to find a "forever" home where she can get all the attention.

278-06 Parker, a beautiful fawn male, came to us from the Baltimore City, MD shelter. It was discovered that he had Shar Pei fever and the Robbins have opened their hearts and home to him.

279-06 Barkley, a big handsome male, had been tied in a yard all his life. He had no interest in people. He was totally unsocialized and without the continual work of the Tankersleys and the Dumfries personnel, he would have never come around. He is now happily becoming a favorite in a condo in North Carolina.

280-06 Ellie, a sweet female from Frederick County, MD, is believed to have Amyloidosis. She is a happy dog who wags her tail at everyone. A wonderful couple in Arlington, VA has undertaken to care for her with our help with all medical work.

281-06 Leigh, a crème female from Animal Welfare Action, was with us many months. She was so pretty and playful that we could not understand her long stay. She was adopted by a family in Salisbury, MD with the approval of their Pug-Pei mix, Scooter.

282-06 Jeb, a meat mouth fawn male, also came to us from Animal Welfare Action. He was adopted by the Cornwall family in PA and after some adjustment with the family dog and cat, is doing well.

283-06 Tara, was a chocolate female from Prince George shelter. She came in as a stray and appeared to be abused. She was terribly afraid of people and after heartworm treatment, spaying and much work by our volunteers; she bit a kennel worker and continued to get aggressive from fear. Having no alternative, she was put down.

284-06* Sara, is a crème female and
285-06* Kara, also a crème female. Both with brown tipped ears. These dogs came from Anna Arundel County, MD on a cruelty case, which you may have read about in

the Washington Post. Horses were also involved. We have had these dogs for several months in a kennel as no foster homes have been available. They are completely unsocialized and need people to work with them on a daily basis to improve. It would be a labor of love for these beautiful girls.

286-06* Remi is a fawn male, healthy and playful. He came in from Montgomery County, MD and is anxiously waiting for a home.

287-06* Penny is an "old style" female. She has the long legs and big ears of the Shar Pei that originally came from China. She came to us with 6 two-day old puppies. Unfortunately, they had picked up a respiratory infection at the shelter and all the puppies died within a few days. Penny was a wonderful mother and she was quite distressed at their death. Jeannie and Bryan Johnson tenderly cared for them – even helping supplementing their feeding every four hours. She is spayed now and in good health and looking for a forever home.

We currently have four dogs in our care. We have enough funds to last until next Wednesday. If it had not been for a \$2,500.00 member donation this week, we would not have been able to pay our bills and keep the dogs housed to date. Remi and Penny could easily fit into a home immediately. Sara and Kara will need a lot of attention before they can interact with people. They are making progress but without your help, next week, we will have to put them down. It's pure hell to have to give an order to destroy a dog that is healthy and does not know why they are not chosen. n

INCOME AND EXPENSE STATEMENT

11 December 2005 thru 30 June 2006

Prior Balance:	\$2,533.36
Income:	
Adoptions,	
Membership & Donations	<u>\$14,364.45</u>
	\$16,897.81
Expenses:	
Medical Care	\$ 6,445.93
Register micro chips	\$157.50
Kennel	\$9,038.56
Foster Care	\$262.99
Corporation License	\$75.00
Check printing	\$44.25
Purchase sale items	<u>\$35.00</u>
	\$16,059.23
Balance:	\$838.58

Combined Federal Campaign of the National Capitol Area #7122 Government employees – We have again, this year, become eligible to receive donations through CFCNCA. Don't forget to list us as your designed charity. Thank you. n

Do You Shop at Food Lion?

If you shop at Food Lion, there is a simple way to help raise money for MACSPRO that won't cost you a penny. All you have to do is go on line to foodlion.com and register your MVP card to benefit MACSPRO. If you don't have a card, you can sign up for one there also. Once you have registered, a portion of your grocery bill will be donated to MACSPRO. Get great food and help your charity at the same time.

Health Articles

Shar Pei Fever

Many times I have received calls from people stating that their dog died of "renal failure". When I ask if they had Shar Pei fever, I find that often they don't even know about the fever. This is a disease known only to people (called Mediterranean fever in people) and Shar Pei. It is not contagious between either people or dogs. Please read the symptoms carefully and the accompanying articles from Shar Pei owners to help you identify the problem.

The most important thing is to keep the temperature down. Read the articles to see how two Shar Pei owners handle the situation.

Symptoms of Shar Pei Fever

1. Your Pei /puppy is very lethargic
2. Your Pei probably won't eat or is less interested in eating at the beginning of the attack
3. Your Pei has a raging fever (anything above 104) and could be shivering. Your vet may find no cause for the temperature
4. Your Pei's muzzle may be swollen as well as the eyes. This can look like a bee sting
5. Your Pei may scream with pain when you touch his muzzle
6. Your Pei may have stiffness in all his joints and have difficulty putting one or both of its back legs to the ground
7. The back legs (hocks) may be swollen and thickened
8. Some dogs have diarrhea and vomiting, may be bloody
9. After an attack you will notice that your dog loses his muzzle. This will come back in time.

Our First Experience with Shar Pei Fever

By Pam Robbins

Since I have known Joyce Hanes (3+ years) I have listened to her experiences with her Tigger (Shar Pei) and Shar Pei fever. She sleeps in a chair for the entire duration of the attack and never leaves his side. Every time it happened, I would think to myself that I was sorry for both her and Tigger but would thank God that our Peis did not have it. The attacks always sounded so horrible and frightening. Well now I know personally how it feels and thank Joyce for helping Curtis and I get through it. Without her I don't know what we would have done. Here is our story with Parker.

One Sunday morning we woke up with Parker having had diarrhea and pee'd in his room. Since Parker is absolutely fastidious, I was shocked. Anyway, Curtis fed him (he ate just fine), put him out and came back upstairs to clean up the mess. Curtis made the comment that he didn't think Parker felt good, that he was listless. I checked Parker and he seemed ok. Once again we went outside and I noticed that Parker was weaving when he walked. I also noticed that his legs looked swollen. I walked over to him and found that his muscles were shaking. My mind is thinking "Uh-oh I bet he has a temperature." I checked his temperature - 105.8?. Off we went to Pender Emergency Clinic.

When we got there they took him in back. The tech came back out a few minutes later and told us that the vet was with another emergency and that she would look at him when she was done. His temperature was up to 106 by this time. I told her that I felt that Parker probably had Shar Pei fever and that I wanted a shot of Ketoprofen immediately and then we could wait for the doctor and the diagnostics. She went and asked the vet who agreed. An hour later the vet came in and said that we needed to draw blood to determine if Parker had an infection and also to look at his kidney and liver functions. We agreed. They wanted to keep him overnight due to the temp. We agreed that we would let him stay for a few hours but not overnight since their estimate was over \$1300 for 1 day in the hospital. At 9:00 that night we went to pick him up. His blood work showed no elevated white count and all other values were normal. His temp was also back to 101.9. We brought him home. He was interested in eating some food (rice and chicken) but not interested in drinking. Every 2 hours we checked his temp. As expected his temperature continued to rise overnight and by 5:00 am was back up to 104. Joyce Hanes and I had talked earlier in the evening so she told me how to pack him down in ice and hope that we got the temperature down. By 6:00 am we were up to 105.

Back to the emergency vet we went only to find out that they could not give Ketoprofen more than 1 time within a

24 hour period. They gave him subcutaneous fluids (250cc) and rubbed his foot pads down with isopropol alcohol. Between the fluids and the alcohol his temp lowered to 103. We then spoke with a vet knowledgeable about Shar Pei fever. She explained that Ketoprofen is great to lower the temperature which is imperative to get the organs cool. However, administering too much can damage the kidneys and liver. It seems that the Ketoprofen is slow to do damage over time but does so nevertheless. They did a urine test to check his kidney functions. We asked her if we could take Ringers Lactate home with us, some spare needles and administer the subcutaneous fluids ourselves. She agreed. In Parker's case since he had had 2 bouts of bloody diarrhea throughout this period we could not give him aspirin, Derramax, or any other non-steroidal anti-inflammatory. So, we had to count on the fluids, ice and using the alcohol on his pads to keep Parker's temp down. All in all, Parker did not have a normal temperature for 36 hours. He was also very lethargic for the full 36 hours. Parker's urine test showed a +1 protein in his urine. Not alarming but something that must be checked.

Since we were leaving that weekend we decided that we had to put Parker in Dumfries to protect him in case of another attack. In a kennel, he could easily die. Once in Dumfries, they determined that the protein was gone from his urine but that his Bilirubin was elevated. This has to be rechecked to ensure that it has returned to normal. Since this was Parker's first attack (as far as we know) then all the vets involved said that they would not start Colchicine at this time. If he has another attack we will add it to hopefully prevent and/or reduce the severity of the attacks. Our normal vet believes it is better to start Parker on a low dose of a NSAID (nonsteroidal anti-inflammatory) to try and prevent the fever from rising and then when his fever goes up, give him a larger dose. This way we would already have the medicine in his system before the temperature rises. Of course, we have to monitor the kidneys and liver to ensure that the NSAID is not doing any harm. We plan to start him on Deramax next week. Our vet is also looking into the proper dosage of Milk Thistle to help clear out the liver. Milk Thistle is used in humans and has been used some in dogs to protect and clean out the liver. I will keep you informed as to how that works. n

Our Experience With Shar Pei Fever

By Maureen Tankersly

Our beloved Dudley experienced his first episode of Shar Pei fever about 7 months ago. The episodes are characterized by a high fever and lethargy, accompanied by swollen and painful hocks. Usually, his hocks are so painful that he cannot sit or lie down. In one instance, his muzzle, rather than his hocks, was affected. At the onset of an

episode, we immediately give him Rimadyl (prescribed by the vet) to lessen the pain in his hocks and to bring the fever down. The Rimadyl can be given only once every 12 hours; usually only one dose is required. We dampen and freeze hand towels to wrap loosely around his hocks, as the pressure of an ice pack is too painful for him. We'll also drape the towels around his neck or hold them in his armpits to bring down the fever. He doesn't drink as much water as we'd like during a fever episode, but he will lick ice cubes if I hold them in my hand. If it is cool and dry outside, we will let him stay outside (his favorite place to be) to help lower his temperature.

Dudley was put on a regular regimen of Colchicine after his second fever episode. He takes a 0.6 miligram tablet every 12 hours (he weighs about 50 pounds). The Colchicine seems to have lessened the duration of the episodes. A side effect of Colchicine that keeps many dogs from being able to take it is diarrhea. Dudley did have severe diarrhea after we started him on the Colchicine, but we've been able to control it by adding canned pumpkin (Libby's 100% Pure Pumpkin, not pumpkin pie mix) to his regular diet. We started with 2 heaping tablespoons mixed into his food and slowly adjusted the amount upward until his stools were back to normal. We feed him twice each day and he gets 6 heaping tablespoons of pumpkin mixed into each meal. An added benefit of the pumpkin is that he loves it and his appetite is better than it has ever been.

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Further comments on Shar Pei fever

By Joyce Hanes

I have had several dogs with Shar Pei fever, going back some 20 years. The knowledge and treatment of the fever has changed greatly over the years. I won't detail the suffering both the dogs and my family went through when no one knew what it was or how to treat it. Would you believe that today there are veterinarians who still don't know what Shar Pei fever is?

My Tigger, a rescue, would get fevers as often as twice monthly and they would last up to 72 hours. Don't be fooled when the fever goes away in a few hours – it is libel to come right back just when you go to bed thinking everything is ok and wake up to find a very sick dog. The high fevers can cause brain damage or even death. The fever usually lasts 24 hours but can last up to 72 hours.

Now with the procedure I follow, Tigger has not had a bout of fever for over 3 months (knock wood). First I stopped feeding him commercial food (you don't even want to know what "meat products" means on the ingredient list). No red meat, only fish and chicken; mixed vegetables, sweet potatoes, brown rice and a very small amount of dry dog food; Vitamin C, Flaxseed and Colchicine twice a day. Eggs are a weekend treat. All this can be fixed in advance and microwaved for one minute.

Also, I keep a Ketoprofen shot in the frig. Now I know that some vets say too much Ketoprofen is bad for the kidneys but the fever is worse. One shot at the offset of the fever can stop the fever, along with ice packs or even cold showers. It is the high temps that damage the kidneys far more than one shot of Ketoprofen. I discussed this with Dr. Nichols at Dumfries Animal Hospital and Dr. Hambright of Nebel Street Hospital and they both agreed that one shot at the start of the fever was acceptable over letting the fever go unattended.

I keep ice packs in the frig and have Tigger lay on them (with a towel between) and rub them over his major arteries. It is preferable to have a blood panel done after the fever is over to determine kidney and liver status. Based on what I saw and conversations with JoAnn Redditt, I have started giving 500m Amoxicillin for 5 days after the attack. Now some may not agree. But based on the improvement and the fact that Tigger will be six years old this year and his three siblings are all dead – well, that's good enough for me. n

New Principles of Immunology -- Current Recommendations for Dogs

By Dr. Bob Rogers

Distemper & Parvo “According to Dr. Schultz, AVMA, 8-15-95, when a vaccinations series given at 2, 3 & 4 months and again at 1 year with a MLV, puppies and kitten program memory cells that survive for life, providing lifelong immunity.” Dr. Carmichael at Cornell and Dr. Schultz have studies showing immunity against challenge at 2-10 years for canine distemper & 4 years for parvovirus. Studies for longer duration are pending. “There are no new strains of parvovirus as one mfg. would like to suggest. Parvovirus vaccination provides cross immunity for all types.” Hepatitis (Adenovirus) is one of the agents known to be a cause of kennel cough. Only vaccines with CAV-2 should be used as CAV-1 vaccines carry the risk of “hepatitis blue-eye” reactions & kidney damage. Bordetella Parainfluenza: Commonly called “Kennel cough” Recommended only for those dogs boarded, groomed, taken to dog shows, or for any reason housed where exposed to a lot of dogs. The intranasal vaccine provides more complete and more rapid onset of immunity with less chance of reaction. Immunity requires 72 hours and does not protect from every cause of kennel cough. Immunity is of short duration (4 to 6 months).

Rabies

There have been no reported cases of rabid dogs or cats in Harris, Montgomery or Ft. Bend Counties [Texas], there have been rabid skunks and bats so the potential exists. It is a killed vaccine and must be given every year.

Lyme disease is a tick born disease which can cause lameness, kidney failure and heart disease in dogs. Ticks can also transmit the disease to humans. The original Ft.

Dodge killed bacteria has proven to be the most effective vaccine. Lyme disease prevention should emphasize early removal of ticks. Amitraz collars are more effective than Top Spot, as amitraz paralyzes the tick's mouth parts preventing transmission of disease.

Vaccinations Not Recommended

Multiple components in vaccines compete with each other for the immune system and result in lesser immunity for each individual disease as well as increasing the risk of a reaction.

Canine Corona Virus is only a disease of puppies. It is rare and self limiting (dogs get well in 3 days without treatment). Corona virus does not cause disease in adult dogs.

Leptospirosis vaccine is a common cause of adverse reactions in dogs. Most of the clinical cases of leptospirosis reported in dogs in the US are caused by serovars (or types) grippityphosa and bratsilvia. The vaccines contain different serovars eanicola and icthohaemorrhagica. Cross protection is not provided and protection is short lived. Lepto vaccine is immuno-suppressive to puppies less than 16 weeks.

Conclusion

Dogs & cats no longer need to be vaccinated against distemper, parvo, & feline leukemia every year. Once the initial series of puppy or kitten vaccinations and first annual vaccinations are completed, immunity from MLV vaccines persists for life. It has been shown that cats over 1 year of age are immune to Feline Leukemia whether they have been vaccinated or not. Imagine the money you will save, not to mention less risks from side effects. PCR rabies vaccine, because it is not adjuvanted, will mean less risk of mediated hemolytic anemia and allergic reactions are reduced by less frequent use of vaccines as well as by avoiding unnecessary vaccines such as K-9 Corona virus and chlamydia for cats, as well as ineffective vaccines such as Leptospirosis and FIP. Intranasal vaccine for Rhinotracheitis and Calici virus, two upper respiratory viruses of cats provide more complete protection than injectable vaccines with less risk of serious reactions.

The AAHA and all 27 veterinary schools of North America are our biggest endorsement for these new protocols.

Please consider as current on all vaccinations for boarding purposes .

2 years or older

1. Rabies with in last year
2. Bordetella within last 4-6 months
3. DHP & Parvo given anytime over 6 months of age, but not necessarily within the last year.

Recommended: Physical exam for transmissible diseases and health risks. n



The Mid-Atlantic Chinese Shar-Pei Rescue Operation, Inc.

Non-Profit, Tax Deductible

Application for Membership

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ E-Mail: _____

Last chance for dues renewal for Year 2006: \$25.00

We are about to close our doors unless we can get your support. Your entire contribution will be used for medical and boarding expenses. If you enjoy the various information available in the newsletters, please show your appreciation by sending in your contribution today. Thank you.

Contribution enclosed: _____

(You may pay by credit card via our web site: www.macspro.org) Thank you for your support.

Signature: _____ Date: _____

Mailing address: MACSPRO, P.O. BOX 34034, BETHESDA, MARYLAND 20827

**MACSPRO
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Wait! Inside there is a poster suitable for hanging anywhere you want to advertise our rescues.

“Our Gang”

Available for Adoption through the Mid-Atlantic Chinese Shar-Pei Rescue Operation
Website: www.macspro.org Phone: (301)881-1221



Kerry



Sarah



Penni

Adopt me now!



Remi



Ashley