



Hilton Veterinary Hospital

Website: www.hiltonvethospital.co.za

72 Hilton Avenue Hilton 3245

Tel (033) 343-4602

Free Small Animal Veterinary Advice e-mail: martin@hiltonvethospital.co.za

Inside this issue:

Hello again from Hilton Vet Hospital. We hope that you and your family (including pets) are well. And that you had a great festive season. As usual it is now a time to knuckle down and get in some hard work.

I used to think I was busy, until I see what my grade 4 and 6 sons have to get through. There is choir, piano, cricket, cross-country, swimming, chess, soccer, singing lessons, orchestra and of course, school. There is hardly time to play with our Labrador and Poodle. At times you can feel the tension mounting in them. It is just an observation, but the most laughter is heard and they are at their happiest when they play with their dogs. These creatures appear to be pre-programmed to bring out the best in us. Apparently playing with an animal lowers your blood pressure.

Congratulations to Dr Daniela Steckler and her husband Dr Steve Hughes, on the birth of their precious little son, Benjamin. We wish you lots of love, happiness and laughter with your new little bundle of joy.



In February we will temporarily say good bye to Dr Trish Mills, as she goes on maternity leave. We wish her and her child well. Trish, please book in at a human hospital. Yes, they will care for you as well as you care for your patients.

We would like to extend a very warm welcome to Rebecca Upfold. Many of you will know Rebecca from the Veterinary Hospital. She was assisting with nursing, stock and many other areas last year. She is now going to be studying Veterinary nursing as well as helping out in the reception area in the afternoons.

We mentioned in the last newsletter that we would talk about malicious poisoning in this newsletter, so please read the article and take heed.

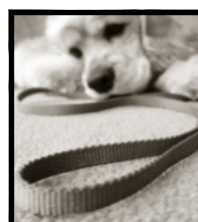
Thank you for your support in helping us to build Hilton Vet Hospital into a place where dogs and cats would want to go for their treatment.

If your contact details have changed please remember to inform us.

Regards

Martin de Scally

Dedicated to the health of your pets.



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After Hours

Emergencies:

Please phone
(033) 343 4602

Contact Details:

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This month's theme:
Malicious Poisonings

The Nurse's Clinic: The use of Butorphanol in Elephants by Jane Lindeque

In July 2011 on one of my trips up to Kruger Park I was lucky enough to do some work with Dr Michelle Miller from the University of Louisiana. She was doing a study on the use of the drug Butorphanol in elephants.

The first day we were up early and given a brief talk by one of the vets as to what we would be doing once the elephant was darted and down. I was in charge of getting blood and hair samples.

I was then asked if I would like to fly in the helicopter with the vet and watch the darting from the air. Wow, a dream come true!! We took off from the airport at Skukuza into a misty, but beautiful bushveld morning. We flew low over the Sabie river, sending Impala and graceful Kudu running. The Hippo ducked under the water as we flew over. We were looking for one of two elephants and not a whole herd as this could cause problems once we had darted one of a herd. It was not long before we spotted 2 bulls grazing peacefully and they were quite close to the road. This is always something the helicopter pilot looks for as the ground crew need to get to the elephant as soon as possible after it is darted.

The vet loaded the dart gun and the helicopter circled and we flew just above the tree tops. The pilots call this the "death zone" because they say if anything goes wrong mechanically with the chopper at this stage there is no room to move and they crash.



I hang on to my seat, adrenalin pumping and loving every minute of it. The vet strapped himself into a harness and stood on the strut of the chopper. We came in from behind the elephants, who were by now a bit agitated and the dart flew and found its target. One big elephant rear end!!

The chopper landed in a safe area and as close to the elephant as possible and we all jumped out and ran to get on with the necessary tasks. Thank goodness the blood pumped out the large veins in the ear and I managed to get the necessary amount that I needed. Then I went round to the tail to get some hair samples. Well that proved to be quite a job, its not very easy to just pull some hair out of an elephants tail. After a few really good tugs I did managed to get some of the thick and almost plastic like hair out. Mission accomplished!!

We then kept the elephant under sedation for a full hour. Every 10 minutes various tests were done and heart rate, breathing rate etc recorded. What an experience to be able to see, touch and smell and elephant so close. They do have very long eye lashes.

What an experience. I leave for Kruger again at the end of June for another 2 weeks of wonderful and exciting work with the vets. I am so looking forward to it.



Malicious Poisonings By Dr Martin de Scally

There are two reasons why malicious poisonings in pets occur:

- ✖ To stop an animal from being a nuisance
- ✖ Criminals trying to silence pets so as to avoid detection

There are three main groups of poisons:

- ✖ Anticoagulants (cause bleeding)
- ✖ Cytotoxins (cause tissue damage)
- ✖ Neurotoxins (affect the brain)

Anticoagulants are normally not used as malicious toxins because they act too slowly for the purposes of criminals. They affect the animal by preventing the liver from forming clotting factors which make up part of a clot. Without clotting factors, clots fail and the animal bleeds either internally (usual case) or externally. These toxins are used mainly as rodenticides and usually take at least 3 days to work. Animals present lethargic and often dyspnoeic (have difficulty breathing) as a result of a chest cavity or lung bleeding. If any professional poison company tells you that their poisons are pet and child friendly be very careful. It usually means that they have taken a small fact about the poison completely out of context. They are **toxic** and must be used with **caution**. If they have accidentally eaten anticoagulants, induce vomiting immediately and get them to your vet. There is a blood test to confirm decreased clotting ability. This test should always be done before giving the antidote because with modern rodenticides the treatment may need to be given for 6-8 weeks. They are life threatening.

Cytotoxins are caustic substances, such as ethylene glycol and gramoxone. Caustic substances and gramoxone are tissue irritants which burn the oesophagus (feeding tube). If the animal survives gramoxone they usually die from lung fibrosis 2-3 months later. I have personally seen a case where 8 dogs were maliciously poisoned with gramoxone. There is **no anti-dote** and the animals suffer incredible pain. Few survive long enough to end up dying from lung fibrosis unless they inhaled aerosolised sprays of the toxin at much lower doses. Gramoxone should be banned.

It is used for agricultural purposes only in 3rd world countries. It is a major threat to both pets and humans contacting the toxin. It is absorbed through the skin and can be ingested by licking contaminated skin. Earth inactivates gramoxone so literally eating sand if accidental ingestion has happened will help reduce the catastrophic consequences. Caustic substances are usually paint solvents or cleaning chemicals. Animals usually survive after appropriate treatment. Some require opening of an oesophageal stricture to allow food to pass (the narrowing caused by a scar after oesophageal damage). Making animals vomit with these toxins, is dangerous and likely to cause more damage. Use neutral substances to inactivate acids and alkali not opposites (water, milk).

Neurotoxins are mostly organophosphates and carbamates. They are readily available and are easily hidden in meat and other foods. Their action can be rapid, as short as 5 minutes after ingestion. They usually cause salivation, vomiting, diarrhoea, fitting, weakness, tremors, collapse, and paralysis including the breathing muscles. They also affect the nerves to the heart and blood vessels inducing very slow heart rates and vasodilation. These two problems induce very low blood pressure. Treatment is partially symptomatic and includes fluids, atropine and in severe cases oxygen or ventilation. There is an antidote, the use of which is controversial in carbamate poisoning but universally accepted for organophosphate poisoning.



Malicious Poisonings continued By Dr Martin de Scally

The most recent human studies show no adverse effects but potential benefits if the antidote is used in carbamate poisonings. Activated charcoal is given to help remove the toxin from the blood into the intestine. To prevent re-absorption from the intestine, intestinal motility must be addressed to keep the stool moving through. Minor toxicities can be saved; major ones really do fight for their lives. Some go into status epilepticus, where they fit continuously and cannot breathe. Those patients are placed on ventilators and sedated with propofol (an anaesthetic agent) to stop the fitting. These animals lose their swallow reflex and will choke if you make them vomit. If you are quick enough after the ingestion of the poison, the animal can be anaesthetised, their airways sealed with an endotracheal tube and the stomach can be washed out. If they have eaten a poisonous collar (tick control) it must be retrieved. A scope should be used where possible, If a scope is not available the vet will have to operate to remove the collar. In the long term these patients can have liver damage and pancreatitis. These patients are usually still vomiting days after initial recovery.

In **general** for a severe poisoning to survive, the patient will need intensive care and aggressive, appropriate treatment. They need many things done to them to improve their chances of survival and reduce their suffering. Those animals that survive with minimal treatment probably would have anyway.

I do not believe it is ethical to leave poisoned animals unattended at night. Even coming back to check on them once or twice is unlikely to be sufficient.



Their drips could stop, they may have seizures, they would not receive on-going treatments of activated charcoal and atropine and least of all they could lie in their own faeces and urine without any attention until the next morning.

Hilton Veterinary Hospital has made our all night care facility available to all the vets in the surrounding area that want to make use of it. We treat many poisonings at Hilton Vet, including snake bites. We are fully equipped with supportive equipment such as ventilators, antidotes and trained staff to do so. Not all patients survive but many survive that would not have. There is about a 90% success rate.

You need to try and avoid poisonings. As people become more desperate to get what you have, so your dogs become more of an obstacle to them. They will want to overcome that obstacle. It is a good idea to keep your dogs indoors at night where they are protected and they can warn you of potential intruders.

Those of us in the appropriate positions of power should help legislate the use of poisons even for agricultural use. I believe you should need a licence proving competency to buy and use these hazardous products.

I would be very happy to never see another case of poisoning as a vet. These animals and owners suffer tremendously. A good idea if you do use these products is to always have activated charcoal available (also known as medicinal charcoal) and educate yourself on how to safely use the products, what the symptoms of toxicity are and who to contact should something happen.



Staff Profile

Martin de Scally

Martin started Hilton Veterinary Hospital in 2010. He has been practising as a veterinarian for over 21 Years. Martin specialised in Small Animal Veterinary Medicine at Onderstepoort. He receives many referrals from other vets in the area and from other parts of the country. Martin is also involved in continuing education locally, nationally and internationally. He has presented at South African Veterinary Congresses and World Veterinary Congresses. Martin is currently the chairman of the South African Veterinary Association KZN branch, he is a member of the Rabies action group in KZN and 2012 he was elected on to the World Small Animal Veterinary Association committee.

Martin is married to Lauren and they have 2 sons. Nicholas is 11 years old and Christopher is 9 years old. They both enjoy playing soccer, running, cycling, swimming, playing the piano and singing. They have 2 dogs, Jane and Josie.

Martin enjoys seeing difficult cases and is passionate about doing ultrasounds.

In his spare time Martin enjoys running, cycling, playing soccer, playing the guitar, singing with his sons and being a Dad.



To make you smile

Before I was a Dog Mom

Before I was a Dog Mom: I made and ate hot meals unmolested; I had unstained, unfurred clothes; I had quiet conversations on the phone, even if the doorbell rang:

Before I was a Dog Mom: I slept as late as I wanted and never worried about how late I got to bed, or if I could get into my bed.

Before I was a Dog Mom: I cleaned my house everyday, I never tripped over toys, stuffies, chewies, or invited the neighbor's dog over to play.

Before I was a Dog Mom: I didn't worry if my plants, cleansers, plastic bags, toilet paper, soap or deodorant were poisonous or dangerous.

Before I was a Dog Mom: I had never been peed on, pooped on, drooled on, chewed on, or pinched by puppy teeth.

Before I was a Dog Mom: I had complete control of my thoughts, my body and my mind. I slept all night without sharing the covers or pillow.

Before I was a Dog Mom: I never looked into big, soulful eyes and cried. I never felt my heart break into a million pieces when I couldn't stop a hurt. I never knew something so furry and four-legged could affect my heart so deeply.

Before I was a Dog Mom: I had never held a sleeping puppy just because I couldn't put it down. I had never gotten up in the middle of the night every 10 minutes to make sure all was well. I didn't know how warm it feels inside to feed a hungry puppy. I didn't know that something so small could make me feel so important.

Before I was a Dog Mom: I had never known the warmth, the joy, the love, the heartache, the wonderment, or the satisfaction of being **A Dog Mom**.



If you have a story about your pet that you would like to share with us, then please e-mail it to lauren@hiltonvethospital.co.za