

ents.

Hilton Veterinary Hospital

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Hello to all our valued pet par- make cost and

We sometimes hear our own clients say that they have heard that they can only see us for specialist procedures. Whilst it is true that Hilton Veterinary Hospital (HVH) is one of only three small animal referral practices in the whole of KZN, at least 50% of our day is kept busy with primary care and local emergencies. Could this be because cases are not always referred when they should be? I am not sure where the misinformation comes from So just to clear up any misconceptions, all animals registered and cared for by HVH are welcome here and are charged tariff rates for all their care.

Our vets are always happy to explain procedures and costs to you and give you choices on levels of care. Of course the higher levels of care procure better success rates, but you make those choices. If only we could always be in a position to do the very best for every animal.

So when you come and see us,

make cost and level of treatment part of the discussion. Remember that our vets will always want to do the best for your animal, but will work with you to achieve the best possible results within your restrictions.

Unfortunately standards of veterinary care can vary dramatically from practice to practice. Sometimes that is obvious to animal parents and sometimes not. I personally do not see the value of unconfirmed diagnoses because poor response to treatment usually follows. Rather than focus on what others do, we focus on what we believe is the very best for your animals. This includes but is not limited to high levels of comfort and all night care, attention to detail regarding hydration, nutrition, anti-nausea and pain control, availability for emergencies 24 hours every day.

HVH also accepts emergency critical care and medicine referrals from other veterinary practices from all over KZN. (continued on page 2)

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After Hours
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Please phone
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Contact Details:

If your contact details have changed then please inform us.

This month's
theme:
Acupuncture and
"The Vaccine
Issue"

Editorial Continued

We, however do not have unhealthy levels of narcissism. No practice can possibly do everything well for every possible situation. We get lots of help from human medics and we will also refer cases from time to time when we feel there is someone better to handle a specific situation. We will never tell someone nothing else can be done just because we cannot do the procedure.

The veterinary profession has been judged recently by some one sided clipped journalism. I think the best way to test your sea worthiness is to sail through a storm. I think transparency is a good thing because it breaks down the illusions and exposes the reality of the situation, you just need to give the whole truth when you discuss a subject and very often a completely different picture is painted.

So where does this leave the veterinary profession? Within the veterinary profession there are many veterinarians that strive for perfection, achieve high levels of patient care, focus their attention on preventative care but have the expertise, staff, facilities and equipment to deal with diseases, do charity work in many forms and work hours that would make most people shudder. The veterinary profession has been created by animal lovers that want proper care for their animals. It is the vets job to meet those needs where possible.

So what big changes are ahead for our profession? Firstly more attention will need to be paid to preventative care and education of owners.

The best way to achieve that is with an annual check up where the animal is examined from head to toe. In cats, for example, a blood pressure measurement should be taken at every annual check up and with every disease animal. Cats suffer from blood pressure problems as much as humans do. High blood pressure is called the silent killer and leads to, or is caused by, heart disease and kidney disease.

Early detection and treatment can save your cat from early demise as a result of high blood pressure. Secondly we will have to be absolutely transparent about the costs of high end treatment, offer options to clients but be careful to explain the benefits of early aggressive preventative care and emergency treatment. Thirdly success rates and taking problems to resolution should improve in all practices.

Thank you to all the staff and clients who contributed to this newsletter.

Regards

Martin de Scally

Dedicated to the health of your pets.

In the next newsletter I will explain the renovations happening at HVH. Just in case any rumours are started, we will be fully functional throughout the process and greatly improved when completed.

Nurse's Clinic: Buffalo Capture Sr Jane Lindeque

At the end of June this year I left a very cold and frosty Curry's Post and headed up to Kruger Park for my annual visit to the Veterinary Wildlife Services division of SAN parks. This year we would be helping the students from the University of Oregon to get the necessary samples for their buffalo project.

I was lucky enough that another nursing student came with me and Nina and I had a wonderful trip. On arriving at the vet camp we were told that the next day we would be have a very early start and would be heading up to the "Buffalo camp" near Satara. If any of you know Kruger you will know that it is quite a drive from Skukuza to Satara. So at 3.30am we were up and ready to go. I was quite excited that we would see lots of animals on the road on our drive up but that was not to be. Besides the odd sleeping looking Impala we saw nothing.

We arrived at the camp just as the sun was rising and what a beautiful view it was. It was cold and we all gathered together to be given our tasks for the day. Nina and I were the only "veterinary" people there besides the two SAN parks vets and were given the task of getting all the samples done " as quickly as you can". We were gathering blood, hair and ear notch samples for the University of Oregon that have been running a research project on these buffalo for the last 10 years.

Our first 3 buffalo went down quickly and I must admit that as I ran towards the first one with all the necessary equipment a thought flashed through my head "I hope like hell these animals stay asleep" After quickly checking their respiration, they had to be blowing hard through their nostrils, we had to work fast. Each animal had to have 12 vials of blood drawn from their jugular vein to start with. This looked so easy with the jugular bulging out like a hose pipe. But after the first one of battling to get it I managed and felt so chuffed with myself. After that it was just a matter of getting the angle of needle right and the blood pumped out. Then it was taking a notch of skin from the ear for DNA sampling and then hair samples from the tail. We also always had to keep an eye on the breathing and check that the animals were not bloating. A number of them did bloat and we had to call one of the vets

immediately to insert a trochar needle to allow the gas to escape.

One of the buffalo that was darted was an enormous bull. He was quite magnificent to look at and especially when I was so close. I got to have a good look at his huge boss and enormous horns, all the time thinking "I hope he stays asleep while I jab him with a needle." I was even more impressed when one of the vets said "You will battle to get his jugular as he is so big" and I got it first time. I had a quiet smile to myself.

Once again I was so impressed with how efficiently the team from Wildlife Services works together. Although it is always a stressful thing to do nobody panicked and everyone got on and did their job as quickly as possible and always with the animals well being foremost in their minds.

By the end of our week we had darted and sampled 68 buffalo with no fatalities. Nina and I had got the art of getting jugular veins down pat and after every successful sampling we felt a sense of great achievement and relief when the buffalo gave a snort, stood up and rush off back into the bush and away from us.

I have been invited back next year to go and help and as I said to the one student "You don't have to invite me twice" What a privilege to be able to do this type of work.





Acupuncture Dr Lillian Hirzel

What is Acupuncture?

Acupuncture is a therapy method aimed at healing a variety of conditions through the stimulation of selected anatomical locations in and under the skin with needles. The practice is founded in Traditional Chinese Medicine which is a system of natural healing aiming to restore proper energy flow to the various organs, glands and tissues of the body. Acupuncture points have been well chartered for humans and animals. These points are thought to be connected with each other and with various internal organs via meridians. Many of these meridians or channels trace the paths of the body's major nerve trunks.

How does Acupuncture work?

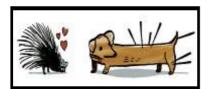
Insertion of needles into the skin is thought to stimulate the body in various ways

- 1. By releasing ENDORPHINS—the body's own built in pain killers
- 2. By increasing BLOOD FLOW to the selected area—this increases oxygen supply to the area and helps to rid the affected area of toxins.
- 3. By stimulating various HORMONES and NEU-ROTRANSMITTERS to dull pain, stimulate the immune system and regulate various body functions

What conditions can Acupuncture treat?

Acupuncture aims to treat a wide variety of conditions but is most commonly used for the relief of pain. We aim to work in conjuncture with general pain meds, but to decrease their dose and long term use. Treatment is affective for:

- 1. Hips pain caused by arthritis, hip dysplasia, lumboscaral disease, muscle strains etc
- Fore limbs— pain due to arthritis, osteocondriitis dessecans, joint degeneration and injuries
- 3. Back—muscle spasms, disc prolapsed rehabilitation
- 4. General inflammation
- 5. Chronic renal failure
- 6. Chronic skin conditions including ear infections



What does Acupuncture treatment entail?

Successful acupuncture treatment often consists of course of treatments. The first treatment involves a thorough clinical exam which includes an evaluation of the patient's pulse. After the patient is evaluated appropriate acupoints are selected and needles inserted.

Depending on the condition being treated the needles are left in between 10 and 20 minutes. The patient can remain with the owner during the treatment and return home immediately after. The doctor will advise on when the next treatment is required depending on the condition and the animal's response to treatment. In most cases treatment are scheduled a week apart for 3 treatments and then monthly as required. In acute cases the patient may be treated every few days initially.

What to expect

The needles used for acupuncture are very thin and cause no or little pain on insertion. Most animals are calm during treatment; some even falling asleep. Owners report that patients are often tired after their first treatment and sleep soundly. Depending on the condition being treated, an improvement is seen over the course of two to three treatments. We advise at least 4 treatments before deciding on the effectiveness of acupuncture for the particular patient.







The Vaccine Issue by Dr Martin de Scally

Up until recently the department of agriculture has required that animals residing in a rabies area be vaccinated annually. This has changed. The champion of rabies in KZN, Mr Kevin le Roux has through a multimillion rand campaign got rabies under control. As a result of this, only a few isolated outbreaks occur which are sorted out quickly. This has lead to a letter from the department of agriculture stating that rabies vaccinations need only be done every three years, provided that the vaccine used is registered as such.

The World Small Animal Veterinary Association (WSAVA) has also published guidelines on vaccines in order to reduce over vaccination and its complications, not the least of which is autoimmune disease.

Veterinarians that follow these guidelines will in future be using vaccines registered for every three years and only vaccinate every three years. There is an initial course of primary vaccinations and booster vaccines for puppies and kittens followed up with a booster after 1 year and thereafter followed up with a vaccination every 3 years. Unvaccinated puppies and kittens older than 16 weeks need a primary injection, a booster after 1 month a booster after 1 year and thereafter a booster every 3 years. Nowadays it is even possible in house, to check titres for parvo virus, hepatitis and distemper vaccine. So for sceptical pet parents we can prove that revaccination annually is not needed.



It is still strongly advised that an annual check up is done on all animals by a qualified veterinarian. In these consultations all aspects of preventative care and a review of the animal's health and need for further immunisation is assessed. This should include body condition score, muscle condition score, skin health, organ system assessment, pain assessment, dietary assessment, teeth check, and the usual temperature, pulse and respiratory check. This may allow diseases to be detected and treated early. Early treatment of disease usually allows for a better success rate.

Vaccines are also broken into core and non-core. Core vaccines are always recommended every three years and non core vaccines are only given in special circumstances. Your vet will guide you on these at the time of consultation but you can also go read about them on the WSAVA website.

Many people think that preventative care is annual vaccination. This is not correct. Preventative care includes: de-worming, flea and tick control, micro chipping, appropriate sterilisations, high quality breed, activity level and age appropriate diets.

I am sure this news will provoke discussion so please feel free to contact us.



Staff Profile:

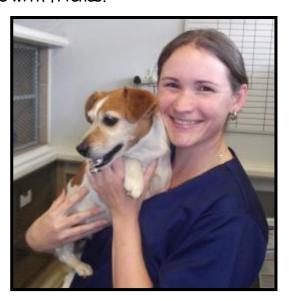
Nicky Rose Innes

Nicky joined Hilton Vet Hospital in April 2010 and worked here for 2 years. She left for a while and has rejoined us as a locum vet nurse.

Nicky is married to Jason and they have 1 son Michael who is 10 months old. They have 1 dog, Jhembi and 1 cat, Ru Bear.

Nicky enjoys the patient care side of nursing and physiotherapy as well as long term treatments.

In her spare time Nicky enjoys being a Mom, curling up with a good book, fire poi (fire dancing), water skiing and spending time with friends.





Update on Patient's Page

By Maggie Wright

Some 8 years ago, Martin saved our little Maggie, who was dying from Addison's disease.

This is a letter written by Maggie after being hospitalized for 5 days.

Dere frends. my name is Maggie Wright.
(aka Maggie Speshil.) My humin, hoo is my
mutha sed I must rite to say thank yew to
the peepul hoo askt abowt me wen I was in
hospitil for 5 days. I had a toob to a vane in
my leg. Gross! It shuddnt happen to a gerl
dog. My humin sez if I give her a big frite
agane she wil giv me bak to Ess Pee See Eh
I wil trie not too. Thank yew, dere frends,
luv (woof). Maggie."

To make you smile:

