

COMMON HEALTH RISKS

CANCER

Cancers in dogs can take on many different forms and can arrive at any time in a dog's life. It can affect the old and the young, and almost every kind of cancer will be found in all breeds just as it is in humans. Some cancers do seem to have genetic bases.

CLEFT PALATES

This defect is an incomplete closure of the dog's palate which for those that don't know is the roof of a dog's mouth. The incomplete closure happens at the embryonic stage of the dog's life and the results can be fatal. Puppies are unable to suckle their mother's milk, and this can be a cause for some fading puppies, this defect can also be associated with hare lips in dogs.

HERNIAS

Diaphragmatic hernias are generally caused by trauma and are not thought to be genetic. Umbilical hernias are protruding organs poking themselves through an opening in the cavity wall of the abdomen which would normally close after birth. Inguinal hernias are the same as scrotal hernias they are failures of the inguinal canal, that is where the testicles passes and drops down through the inguinal canal, bitches may also be affected but it is usually the males that it is found in.

OSTEOCHRONDRITIS DISSECANS

O.C.D. Is localized fractures of the articulate cartilage its degeneration of bone and cartilage but it mainly affects the cartilage rather than bone, cartilage may form into a flap with lameness, the humerus is usually affected but so can be the femur, and some other bones.

CHRONIC DEGENERATIVE RADICULOMYELOPATHY C.D.R.M.

This disease is usually found in the age groups of 5 and above you will usually see increasing loss of mobility in the hind legs of the dog it is a progressive disease although at some point it may seem to stabilize, whereas the dog seems not to degenerate, but it is rarely permanent. The general outcome of this disease, without alarming anyone is very poor most dogs' lose total power of the hind legs and then become incontinent.

EPILEPSY

This is a most distressing complaint, not all convulsions are hereditary of course, they can be caused by blow to the head, brain tumours and the aftereffects of distemper, and here are a few more things which lead to epilepsy: Reduction of blood sugar level. Reduction of oxygen supply to the brain Poisoning by strychnine or lead etc. Brain inflammation, often virus induced. When convulsions start the dog becomes rigid, and they start shaking their heads, and rolling of the eyes occurs, they clamp the jaw producing lots of white frothy saliva. It will then fall on its side, with its legs making galloping actions and they often lose control of the bladder and the bowels. The shaking will gradually slow down and it will get back on its feet but look rather wobbly and dazed. The attack will be over in about 3 minutes but can last longer. G.S.D's should be left alone when recovering as some can be very aggressive and are best left alone until 20 minutes or so has elapsed. Others will be shaken and frightened and may act out of character to what he or she would normally be like. Only a vet can tell you whether you have epilepsy or not. A full brain examination and a reading with an encephalographic will tell him this. Epilepsy can be controlled by anti-convulsing drugs though some treatments can be expensive.

UNUNITED ANCONEAL PROCESS

Ununited anconeal process is commonly referred to as elbow Dysplasia or non-fusion of the elbow joint. It is a condition caused by a faulty union of the anconeal process (one of the elbow bones) with the ulna. The loose fragment of bone sets up irritation in the elbow joint. This first becomes noticeable at about five to six months of age. The dog will display intermittent lameness and you will notice a thickening on the outside of one or both elbow joints and the feet and the pastern will turn outwards. This can only be diagnosed by an x-ray been taken of the elbow joint. The most effective treatment is surgical removal of the loose piece of bone. This condition is believed to be hereditary but not very common.

GASTRIC TORSION/ BLOAT

Gastric torsion is a frequent killer of the G.S.D though it is not just the G.S.D that suffers. All larger deep chested dogs are at risk. The symptoms are rapid distention of food, fluids and especially gas either as swallowed air or as fermentation products. The consequences are twisting of the stomach leading to rapid death as the stomach is rotated. Some dogs may recover if caught early on, some may go on to have more attacks later, and some may not recover at all. Some theories exist for this. It is understood that feeding dry food can be a cause but dog's also eating soft meats have suffered too, and then there is exercising too near or after food, and there is also an excessive water intake to be taken into consideration. Young male dogs are the most commonly affected. Dogs that vomit up their food during an attack may have a better chance of survival. There are genetic implications.

HAEMOPHILIA

Haemophilia is failure of the blood to clot normally. The commonest problem in factor V111 where there are two genetic problems involved -one being Von Willebrand's Disease (V.W.D.) and the other, more common, classic Haemophilia A. Other bleeding diseases exist in dogs but only V.W.D. and Haemophilia A have been reported in the G.S.D. This disease can be mild severe or moderate depending on the factor, mildly affect dogs may only bleed after injury or surgery, whereas severely affected dog bleed into the joints, muscles, and body cavities. Male haemophiliac can survive to adulthood without detection which is why the problem exists. Only males are affected but the females are the carriers.

PANCREATIC INSUFFICIENCY

The pancreas is a large gland situated in the dorsal part of the abdomen. It has endocrine and exocrine portions, the former secreting hormones directly into the bloodstream while the latter secretes products via the bile duct onto an epithelial surface. The pancreas is close to, and under the influence of hormones secreted by, the duodenum. One of these hormones is Secretin which controls bicarbonate concentration of the pancreatic juice. The other is Pancreozymin which controls the enzyme content of the pancreatic juice. This pancreatic juice is rich in sodium carbonate and bicarbonate which controls stomach acidity, but it also contains digestive enzymes, including Amylase, Chymotrypsin, Lipase and Trypsin. Since the pancreas is involved in insulin production and digestion any abnormal functioning of the gland could lead to adverse effects on either process. A dog with pancreatic problems may have sudden abdominal pains and vomiting but this may not be immediately apparent and may only occur after months or years of insufficiency. Affected dogs will have bad digestion, clay coloured and foul - smelling stools. The GSD can be affected from the age of 6 months to 2 years and most by the age of 4, with very few developing it later on.

PANOSTEITIS

Pan osteitis is excessive production of bone along the long bones which is termed Pan osteitis. It can be called bone inflammation. The cause is unknown but usually affects dogs between the ages of 5 and 12 months of age and can give rise to lameness and pain if the affected limb is squeezed. The condition appears to be self-limiting by around the age of 20 months old. Diagnosis is by radiography and pain killers are used to alleviate the symptoms.

PANNUS

Although first reported as far back as 1913 this disease was not named until the 1950s when it was known as Uber Reiter's Syndrome or Chronic Superficial Keratitis. The term Corneal Pannus derived from the Latin word Pannus which means a cloth and studies in (1984) aptly describes the lesion. Pannus is an infiltration of the cornea of the eye by vascular or fibrovascular tissue. It is a bilateral, though not symmetrical, non-ulcerative, non-suppurative Keratitis (inflammation). It usually appears in the lower outer corner of the eye and is then self-limiting so that it rarely covers more than one-quarter to one-third of the eye. Very occasionally it can cover the whole surface leading to blindness. The condition occurs in both sexes and can occur over a wide age range from 1 to 10 years but usually in excess of 5. There appear to be 2 forms. One form is pigmented, and onset is from 4 to 10 years; the other form is un-pigmented and the onset ranges from 1 to 7 years. Although it can be treated there is usually a recurrence. It is well established that the G.S.D. is the most commonly affected breed but the etiology is unknown. There is some suggestion that the problem may be an autoimmune reaction. Studies found that affected corneal tissue reacted with anti-igG and anti-igM sera, while some studies found affected dogs had an increased number of mast cells in the conjunctiva.

PITUITARY DWARFISM

Dwarfism in the dog is well established though most kinds are of Achondroplasia or Chondrodysplasia type with abnormalities of the long bone. Dwarfs appear to be more or less normal in their size at birth but as they get older, they show a markedly reduced size when compared to their litter mates. By the time they are 8 weeks old they are very much smaller than others in the litter, the hair coat is shorter and there are no guard hairs. The puppy coat of secondary hairs is kept until around 12 months of age after that the coat is usually lost, initially around the throat and the thighs then over the whole body. Hair is kept in tufts around their feet and on the ears. After this state of alopecia, the skin tends to become scaly, wrinkly and then goes from grey to black in colour, and the muzzle often appears shorter.

CATARACTS

The G.S.D. is not a breed in which inherited eye disease is a major problem, certainly not in comparison to some breeds, but studies showed two forms of cataract have been reported. The term c inherited. Acquired cataracts can be due to trauma, exposure to great heat or to radiation. Sometimes cataracts are secondary to some other inherited disease (e.g., generalised progressive retinal Atrophy). Even inherited forms may differ in their mode of inheritance and the location on the lens as well as in relation to age at onset. If cataract is not related to other disease, then it is usually known as primary cataract. Both forms seen in G.S.D. are primary cataracts.

CONGENITAL PERIPHERAL VESTIBULAR DISEASE

Disease of the vestibule system is concerns with problems in the region of the middle ear. Problems of the vestibule system are usually characterized by loss of balance, head tilting, leaning, rolling and spontaneous jerking of the eyeballs. Frequently, diseases of this region are acquired, especially with relation to canine distemper virus. It's seen in the first stages at around about 3 to four weeks of age, affected pups can carry their heads either tilted to the left or right or even backwards, and with the sideways tilt the pup tends to circle in the direction of the tilt, but there is effectively no loss to the hearing. Recovery rate is unclear at this time.

ENTROPION

The inward turning of the eyelids is a painful condition in the dog and is seen in a variety of breeds. Although widely believed to be inherited, evidence to support this is not readily found the problem is rare in the G.S.D. Although the success of operations may make incidence appear less. ESOPHAGEAL DYSFUNCTION The Oesophageal is a muscular tube lined with mucous membrane running from the pharynx to the stomach. Peristaltic movement causes the food to be propelled down towards the stomach and the same movement in the opposite direction results in vomiting. Problems can occur with the right aortic arch, which tends to encircle and constrict the oesophagus and cause vomiting.

MEGAESOPHAGUS

Enlargement of the Oesophagus is sometimes seen in connection with GAN and can be associated with Myasthenia Gravis but is also known in circumstances that suggest genetic involvement. This is believed to be true of the Great Dane and the G.S.D. It is identifiable early in life and should not be confused with cleft palate. Affected pups can develop inhalation pneumonia and either die or recover by 9 weeks of age. Non recovery cases continue to vomit after eating and are predisposed to Gastroesophageal Intussusception which is the telescoping of a part of the intestine into the lumen of an adjacent part. Affected animals are best discarded from breeding, even if they recover.

HIP DYSPLASIA

Hip Dysplasia is by far the most common condition. This is caused by the malformed femur head (thigh bone) failing to fit into a shallow Acetabulum (hip socket) thus causing partial or complete dislocation. In severe cases the dog will have great difficulty in walking and getting up he may also 'bunny hop' or gallop in preference to trotting. A dog may also show changes in his or her temperament. A dog who was previously even-tempered may become bad tempered even a biter. And then on the other hand there could be a badly dysplastic dog in x-ray terms but to the trained eye show no sign. Then there is the dog that can move soundly and even jump and show no signs of been dysplastic can be x-rayed and have bad hips, there's just no way of telling unless they are x-rayed by the veterinarian. There are many degrees of this complaint and a G.S.D. With minor or moderate HD is perfectly capable of leading a normal life. As this is a hereditary complaint, no dog can be described as being 'free' or 'clear' as it is impossible to know what its genetic make-up is. On no account should a badly dysphasic shepherd be used in a breeding program. In bad cases of Dysplasia surgical removal of the femur head has been reasonably successful, also an operation called Pectineal Myotome which involves cutting the pectineal muscle on one or both sides of the inner thigh. Hip replacement is another alternative but can be very expensive, but it has been successful.

PATENT (PERSISTENT) DUCTUS ARTERIOLES (PDA)

The Ductus Arteriosus is a foretell blood vessel connecting the pulmonary artery to the ascending arch of the aorta. It is normally 'lost' after birth but can persist. This result in recalculation of arterial blood from the aorta through the lungs can lead to cardiac insufficiency and left side heart failure. The condition is congenital and inherited. It can occur in mild forms when the blood vessel is partially closed. This condition is known in the G.S.D. But is not a breed in which PDA is regarded as other than rare. IMPORTANT NOTE: The above-mentioned common health risks in GSD's are for informational purposes only. For detailed information, please always consult with your veterinarian. Every care has been taken in the breeding and rearing of this dog to produce a sound, healthy animal, and to eliminate hereditary conditions. It is therefore a condition of sale and purchase that no warranty can be given as the ultimate health, hip score, show, breeding or work potential of this animal. You agree to provide correct care and attention to the dog. If this is found to be inadequate, or the dog is neglected or abused, I reserve the right at any time to remove the dog from your care. You agree to notify me of any changes to your contact details.