

Breed Health Plans

The Club has just received the Breed Health Plans for the Border Collie!

The good news is that there are no changes to the Breed Standard.

The following document is as received from the Kennel Club. They have forwarded information regarding the presence and prevalence of certain diseases and conditions within the breed. This information has been obtained from three separate areas:

- A. The prevalence of conditions affecting certain parts of the dog, as documented by the KC/BSAVA Scientific Committee's Pure Bred Dog Health Survey, completed in 2004.
- B. An analysis which has been compiled using data provided by Agria Pet Insurance and covers all purebred dogs covered under the Kennel Club Healthcare Plan for the past 5 years.
- C. A list of conditions included in published material in peer-reviewed scientific literature.

The Club has to nominate a Health Representative and return its comments regarding conditions and welfare issues of most concern in the Border Collie. The Club is also requested to include any omissions from the list. Plus list the conditions in order of importance to the Breed. This has to be with the KC by the 30th December 2008.

The Committee will be discussing the matter but would appreciate any comments the membership wish to make. This does not leave much time.

Thank you

Jim Collins

Breed specific information from the Kennel Club.

Breed: **Border Collie**

A. Relative risks (using Health Survey data)

Diseases/conditions affecting health.

There is a greater reported prevalence of diseases/conditions affecting the following organ systems:

Cerebrovascular system

Diseases/conditions causing death:

There is a greater reported prevalence of death due to diseases/conditions affecting the following organ systems:

None recorded which are higher than the all breed average

NB. The enclosed glossary provides information on each body system. Many breeds have their own breed specific conditions listed on the KC website under the breed health survey reports (www.thekennelclub.org.uk/item/549)

B. Insurance Data

Statistics collated from insurance claims indicate that the most common claims are for conditions affecting the following organ systems;

Foot / pad problems

Traumatic wound / injury

Gastroenteritis

C. Conditions referred to in scientific literature

A review of scientific literature indicates that the following conditions are known to affect your breed;

Cerebellar cortical abiotrophies

Ceroid lipofuscinosis

Choroidal hypoplasia

Ciliary dyskinesia

Cobalamin malabsorption

Epilepsy

Lens luxation

Nemaline rod myopathy

Progressive retinal atrophy – X-linked

Retinal dysplasia/degeneration – ceroid lipofuscinosis

Sensorineural deafness

Glossary

Reproductive system; conditions affecting the male and female reproductive organs (including the prostate gland) e.g.. Pyometra, false pregnancy, dystochia, infertility, cryptorchid, irregular heats

Musculoskeletal system; conditions affecting muscles, tendons, ligaments and bones; e.g.: Arthritis, cruciate ligament injury, hip dysplasia, patellar luxation, OCD

Dermatologic; conditions affecting the skin and coat e.g.. Dermatitis, mites, pyotraumatic dermatitis, alopecia, pyoderma, fading nose pigment

Ocular; conditions affecting the eyes e.g.. Cataract, entropion, corneal ulcer, epiphora, KCS, cherry eye, distichiasis

Gastrointestinal system; conditions affecting the stomach, intestines and pancreas e.g.: Colitis, GDV, diarrhoea, pancreatitis, foreign body obstruction, vomiting

Respiratory system; conditions affecting the nasal cavity, nasopharynx, larynx, trachea and lungs e.g. cough, noisy breathing, coughing, rhinitis, long soft palate

Cardiac; conditions affecting the heart including murmur, arrhythmia, MVD, CHF, DCMP

Urologic; conditions affecting the urinary tract, kidneys, ureters, bladder & urethra e.g.. Cystitis, incontinence, cystouroliths, haematuria, kidney failure

Immune mediated conditions involving the immune system e.g. Food allergy, atopy, flea allergy, unspecified allergy, AIHA

Neurologic; conditions affecting the nervous system including the brain e.g.. Seizures, IVDD, deafness, meningitis, vestibular disease

Aural; conditions affecting the ears e.g. Otitis externa, earmites, excessive ear wax, aural haematoma

Benign neoplasia; non-cancerous masses, lumps or cysts e.g. Lipoma, histiocytoma

Cancer; malignant neoplasia e.g. MCT, carcinoma, lymphoma, soft tissue sarcoma, SCC

Dental; e.g. Retained puppy teeth, dental disease, defect other than extra teeth

Endocrine system; conditions affecting the hormonal system e.g. Hypothyroidism, Cushing's disease, diabetes mellitus, Addison's disease

Trauma; traumatic conditions affecting any organ system

Anal Gland; conditions affecting the anal glands e.g. Anal sacculitis, anal gland impaction or infection or removal

Hepatic system; conditions affecting the liver and gall bladder e.g. hepatitis, portosystemic shunt, liver disease/failure

Cerebrovascular; Stroke or cerebrovascular accident

Haematopoietic; conditions affecting the blood e.g. Anaemia, bleeding disorders, platelet disorder

Cardiopulmonary; conditions affecting the heart & lungs e.g. Coughing, pleural effusion, pulmonary oedema

Notes

A This survey, funded by the Kennel Club Charitable Trust, was conducted to estimate the prevalence of diseases and causes of death in the breeds of dog recognized here in the UK by the Kennel Club. A single breed club, the one with the largest numerical membership, was chosen to act as the breed's parent club and questionnaires were sent to its members.

Just short of 60,000 questionnaires were distributed and around 14,000 were returned completed, and used as the source of data for further analysis. The overall response rate was 24%, with breed response rates varying from 4.5% to 64.7%. A breed-specific analysis was performed for all breeds where the response rate exceeded 15%. The data retrieved contained information on 36,006 living dogs and 15,881 dead dogs.

Your breed may only have information presented in this section if an individual breed report was possible (i.e. minimum of 15% response rate) from the Survey.

B. The insurance analysis has been compiled using data provided by Agria Pet Insurance and covers all purebred dogs covered under the Kennel Club Healthcare Plan for the past 5 years.

The data has been broken down by organ system group, and reflects the areas where the commonly reported illnesses are recorded in each individual breed.

Within each of those groups the most commonly reported conditions are also listed. Where insufficient data is available to make meaningful reports (usually in numerically small breeds or when less than 50 claims have been made), this is stated.

Whereas the use of such data is extremely valuable in that it refers to conditions actually treated by veterinary surgeons, care should be taken not to use the information in isolation, as on occasions inconsistencies may occur in the way that conditions are reported. Consequently the treatment and subsequent condition may vary from that which is originally reported. It should also be noted that dog population differences may affect the statistics available

C. The scientific literature is full of reports of research into canine diseases, so we have reported those inherited diseases that have been identified in your breed and reported in one of the peer-reviewed scientific journals. The advantage of such reports is that they will be supported and validated by appropriate scientific evidence. The disadvantage is that such reports rarely detail the prevalence of such conditions and so it is difficult to evaluate the significance of such reports to the breed as a whole. Nonetheless, such reports do provide evidence that a disease has been described and diagnosed in your breed.

For simplicity, we have just reported the diseases/conditions that have been identified in your breed. For those that want more detail on the conditions mentioned, and perhaps the references to some of the scientific reports, then these can be found at www.vet.cam.ac.uk

This database, developed by Dr David Sargan at Cambridge University, can be searched either by breed or specific condition.

Requirements for ongoing health surveillance by Kennel Club registered clubs

In our previous correspondence it was suggested that Breed Clubs which did not yet have a breed health committee or representative, should give urgent consideration to ensuring that one or other of these was in place.

The Kennel Club has subsequently decided that this should be mandatory for all Breed Clubs. It is therefore requested that all Breed Clubs nominate a single lead health coordinator for the club and inform us accordingly by return of the form enclosed. This should be done **by Tuesday 30th December 2008**.

Where there is more than one Breed Club in a breed, the Kennel Club requests that Breed Clubs and Councils liaise to select one single health coordinator to represent the breed as a whole. This agreement should occur **by 31st March 2009**.

It is vital that this surveillance concept be accepted by the clubs' memberships, if we are to ensure that the reporting of newly diagnosed conditions in dogs becomes the norm. That way each breed will have immediate access to its current health status and will be able to act accordingly and in a responsible manner. One of the important functions of the health group will be to collate and record this health information. Of course, some breeds will already have such health surveillance covered by existing health groups.

For its part the KC is currently working to establish new systems that will eventually allow individual health groups to feed their data into a central resource that will be able to monitor health across all breeds. This will most easily be achieved by annual or bi-annual health reports from individual breed health groups, presenting the health statistics that have been collected since their previous report.

In the shorter term, the KC will establish an electronic communications group of all of the nominated breed health coordinators/monitors. Ultimately, once the system is running efficiently, regular meetings (possibly every two years) will be organized for all health coordinators to discuss health trends, to which specialists in some of the identified conditions will be invited to contribute to the discussion.

Such a system of surveillance will also enable more immediate consultation between the KC, specialists and breed clubs if/when a newly emerging condition is discovered within a breed or breeds. Better real time breed health surveillance will greatly improve our ability to react to newly emerging problems and focus the efforts of the KC, the breed clubs and veterinary and scientific specialists to addressing the issues and dealing with them to minimize their impact on the breed.