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*The Official  
Newsletter of the  
Bearded Collie  
Foundation for  
Health*

**VOLUME VII  
ISSUE II  
Fall, 2009**

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**Reflections**

**Elsa J Sell, President**

As we gather momentum going into year 10 I would like to welcome newsletter readers who have been added to the mailing list in recent years. BeaCon periodically adds new BCCA members to the newsletter mailing list. For those not well acquainted with BeaCon, it is a USA, IRS non-profit 501(c)(3) organization with no paid staff and unaffiliated with any Bearded Collie club. There is no "membership" in the traditional sense of paying a membership fee and gaining benefits. There is a small board of volunteer directors with representatives from the US, the UK, and the Czech Republic.

BeaCon's mission is to

advance understanding of health issues in the Bearded Collie by promoting education and research, and, maintaining an open health registry. The on-line open health registry is for all Bearded Collies with known parents and it is accessible to anyone who registers, whether or not they have a dog in the registry. There is a web site that contains both general and Bearded specific health information, and this newsletter, which is available in hard copy or by email. BeaCon supports research specific to or that will impact on Bearded Collies.

Now let's move on to the topics in this issue. Dogs have been in the news a lot lately, so I selected several articles along with several case reports and information about eye screening with CERF (USA program) that is available through on-line registries (CERF and OFA).

In January update reminders for the open health registry are sent out. The reminders go to anyone with a live dog in the registry who has been in contact in the last 5 years; those dogs entered or up-

dated in the previous 6 months do not receive a reminder. Most reminders are sent by email – the rest by mail (and many of these are to Europe and the UK) which is costly. Remember to update your dog's information as "unchanged" in the update field if nothing has changed – rather than not doing any update. Why? It provides current status information which in turn gives a more accurate picture of what is happening.

You may update at any time – the log in page is: [www.beaconforhealth.org/sqlweb](http://www.beaconforhealth.org/sqlweb) If you have forgotten your username and password, there is a new link on the log in page that you can click for automated receipt of the information.

Anyone can use the on-line search or report functions to study the registry information of dogs that are in the public section. A few dogs are in a private, non-searchable section either because the co-owner consent hasn't yet been received or because the owner wanted the information private (yet still available for preparation of the yearly cumulative reports).

The yearly report becomes available late February. The report has been translated into Czech the last 2 years and a German translation of last year's report should be available later this fall.

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### **Monitoring Blood Pressure**

Linda Aronson DVM

When we go and see our doctors one of the first things that happens is that they measure our blood pressure. If it is so important for us, how come it's by no mean routine at the veterinarian's office? The answer is it is, and more and more vets are including routine monitoring of blood pressure as part of their wellness check up particularly for senior animals. It can allow for early diagnosis of several conditions most notably Cushing's disease, chronic renal failure, heart disease and some adrenal tumors. Early detection can change the course of illnesses and produce more favorable outcomes. For example stroke – bleeding in the brain - may be avoided. One reason that veterinarians have not leapt

to measure blood pressure is because of the so called white coat effect. Stressed animals will naturally have higher blood pressure in the hospital setting than in the home. One way to avoid this is to send the owner home with a blood pressure monitor to confirm or refute findings in the hospital. Certainly reading blood pressure is less invasive and cheaper than collecting blood and urine, and can alert us to which patients would benefit from this.

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*This article first appeared in the September, 2009 AKC GAZETTE and is reprinted with permission. To subscribe to the GAZETTE please go to: [www.akc.org/pubs/index.cfm](http://www.akc.org/pubs/index.cfm).*

### **Scraps and Spratts to Specialty Diets**

He was a lightning rod of inspiration. Or, at least, a lightning-rod salesman. James Spratt was a Cincinnati-raised electrician selling lightning conductors in London when, one day in 1860, he found himself at the ship-

yards watching stray dogs jump upon discarded ship biscuits. Offered some for his own dog, he declined, feeling his dog deserved better.

*James Spratt Would Serve  
No Fat*

Actually, he probably served plenty of fat. Like most dog owners of the day, Spratt likely fed his dog a mix of table scraps and perhaps some castoffs from the butcher. Throughout history, dogs have scavenged off the discards of human meals. Country dogs could live off the land to a large extent, but city dogs became almost totally dependent on what their human owners offered. When there weren't enough scraps, some families baked up a batch of cornbread.

Seeing the niche for something tasty and nutritious, yet convenient, Spratt cooked up the first "Spratts Patent Meat Fibrine Dog Cakes" made of wheat meal, vegetables, beetroot, and meat. His meat ingredients remain a mystery, but were probably not, as his first billboard ads suggested, bison hunted by American Indians.

Bison meat or mystery meat, the idea caught on, first with country gentlemen feeding their sporting dogs. By the 1890s, dogs from every walk of life were eating Spratts Cakes, and the Spratt name was on dog products from soaps and medicines to portable kennels. Spratt's best known employee, and one of his first, was Charles Cruft, of Crufts dog-show fame, who started as an apprentice office boy and quickly advanced to manage the company's show-dog department. It was by meeting so many show-dog owners that Cruft found himself in a position to leave Spratts and make a name for himself holding premier dog shows.

*No Bones About It*

Spratt monopolized the dog-food market for almost 50 years, until 1908 when the F.H. Bennett Biscuit Company introduced Milk-Bone dog biscuits, among a host of other cracker products. Bennett, a health enthusiast, concentrated on making his dog bones especially nourishing by including meat, cereals, milk and food minerals fortified in liver oil, wheat germ, and irradiated yeast to

provide essential vitamins. He made them hard, reasoning it was healthy for dogs to chew. And his final touch? Forming them in the shape of a bone. Who could resist? Until 1922 consumers had the stultifying choice of two dog foods, Spratts or Milk-Bone. Unfortunately, neither had a long shelf life, and were apt to grow mold or see their fat content go rancid.

#### *Opening A Can Of ...*

Everything changed in 1922, when P.M. Chappel, a horse dealer with connections in the packing industry, sold canned horsemeat under the name Ken-L-Ration. Chappel had sold canned horsemeat in Europe, but he was unprepared for the resistance of Americans to the use of horses as food. Eventually the lure of convenience won out, and the food became so popular that Chappel tried raising great herds of his own horses for meat. That strategy backfired, leaving the company in financial straits until they began also producing kibbled dog food and recommending that owners mix canned and dry—a recommendation that

persists today.

Then came the Depression. Curiously, canned and dry dog foods flourished during the Depression, with more than 200 brands of canned food alone. Of course, they were all made at about six plants, with different labels slapped on the same food. It was World War II that spelled the temporary demise of canned foods, because tin became too sought after to use for dog food. Before the war, canned food ruled the market, but afterwards dry food surged ahead.

#### *Health Food*

Dog owners wanted not only convenient food, but healthy food. In 1925, Clarence Gaines was one of the first to capitalize on that desire. Gaines had 20 Pointers and was working for his father, who owned a flour and feed mixer mill. He developed a recipe to feed his own dogs, and was soon selling it as Gaines Dog Meal.

Gaines may have been the first to realize the importance of promoting the nutrition of his food, declaring it was “100 percent complete and

balanced nutrition.” He further promoted the health angle by competing with his own Gaines-fed Pointers at field trials across the country.

He was followed by veterinarian and breeder Leon Whitney, who was the first to base his formulation on scientific research. His food, Bal-O-Ration, was eventually sold to Quaker Oats. The real innovation in dog veterinary diets didn’t occur until 1948, however, when Dr. Mark Morris developed special diets for dogs with heart and kidney disease. He founded both Hill’s and Science Prescription Diet, and the Morris Animal Foundation.

#### *Expanded Market*

A major dog-food innovation occurred in 1957, when Ralston Purina developed a new type of dog food, called expanded food. Unlike biscuit kibble, which was baked and then broken up, expanded food is extruded, shaped, coated with fat, then cooked. Almost all dry food today is of the expanded type.

The 1960s saw two more

innovations: semi-moist foods, led by Gaines Burgers, and the treat market, led by Hartz, both of which are still strong market leaders.

In the 1980s, premium and specialty foods hit the market, with formulas aimed at dogs of specific age groups. This has now morphed into foods aimed at different breeds and sizes.

The last decade has seen yet another change in the dog-food world: the emergence of the small specialty food companies, often selling “natural” wholesome foods made of premium human-grade ingredients, or of frozen, vacuum packed, or freeze-dried raw-food products. As everything comes full circle, there’s even a greater emphasis on home-prepared foods. If only they could package them ...

*Caroline Coile is the author of more than 30 books about dogs, and is a two-time winner of the Dog Writers Association of America Canine Health Foundation award.*

Sidebars:  
*Label Me Dog Food*

Dog-food labels did their part to advance their products, and in some cases, dog welfare. Some early labels carried this plea: "Help us stop the maiming and killing of dogs by hit-and-run drivers." It's said this effort helped pass new laws in some states.

The Association of American Feed Control Officials (AAFCO) was formed in 1909 to oversee labeling on animal foods. The mandatory information on packaging that we see today is similar to that required in the 1930s.

#### *The 2007 Pet-Food Recall*

Consumer confidence in dog food was shaken in 2007 when contamination resulted in the deaths of hundreds of pets from kidney failure. Veterinary pathologists now believe it wasn't the first time. In 2004 pet foods sickened more than 6,000 dogs in Asia. Again, the cause was kidney failure.

Fungal toxins, which have caused smaller deadly outbreaks throughout the years, were initially blamed in both cases, but necropsies re-

vealed insoluble crystals in the kidneys. The culprit in the 2007 event was traced to wheat flour from China that had the industrial chemical melamine added to it to make it appear higher in protein. It also had cyanuric acid in it. Melamine, while not nutritious, is not deadly. But when it combines with cyanuric acid, a byproduct of melamine manufacture, it forms deadly crystals in the kidneys. North American pet-food manufacturers unknowingly bought the adulterated wheat and used it in their foods. The 2004 outbreak was traced to ingredients from Thailand. Researchers believe these are the only two incidents of this type.

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#### **Advocacy Elsa Sell, MD**

The two Beardies whose health problems are described below belonged to one owner who agreed that their stories could be told as encouragement to be the best advocate that you can be. (Told in the first person).

**Case 1.** G's AIHA was origi-

nally set off by predisposition, hormones (her first season August 2007) and Advantix for suspected mites, book-ending her season two weeks either side. The first very small signs were mid October with split second pauses that looked like she didn't know where she was when she was excited; I mean so small I didn't know if what I was seeing was in my imagination or not. These pauses, or as I was later to realize, lack of oxygen or dizzy spells, gradually increased in time and frequency over the next six weeks until the pauses were for a full second or so.

Approx 20<sup>th</sup> November I took her to the first vet, who told me there was nothing wrong with her although her gums were pale and only occasionally coral pink; he convinced me that she probably had very mild epilepsy and that it was OK for her to have her 16 month booster. Ten days later and late in the day she collapsed before my eyes. I spent the next hours on the phone with one of her breeders and going through the diseases on the BeaCon site until I came

across AIHA. I rushed her to my old vet's practice the next morning and although the vet working that morning disagreed with me, I demanded she take blood so I had an idea if this was AIHA. The hematocrit was 14% (37-55% normal range) but she was still walking and wagging her tail.

The other lab results did not come back for two more days. I went in to have more blood drawn for a Coombs test and asked for a referral to a Specialist. I was given a referral but could not get in for two days; they in turn referred me to a different specialist and luckily I got an appointment the same day. Some lab work came as I was driving to the specialist – there were no no reticulocytes. She had a multitude of tests that day; all clear except for the bone marrow aspirate, the blood test, and the unanalysis. She had a packed blood cell transfusion soon after the tests were back. The diagnosis was non-regenerative autoimmune hemolytic anemia (AIHA).

Treatments included predni-



sone (1 mg/kg every 12 hrs) for the AIHA and antibiotics when eventually a UTI detected initially was found upon review of lab work. The hematocrit increased from the intital 14% to 32% by week 3 and 40% by week five. Although gradual reduction in prednisone dose began at 3 weeks, there was little change between 5-9 weeks, and that was thought to contribute to iatrogenic Cushing's disease. Signs of the latter were cost loss, enlarged liver, muscle wasting, and grey skin. Once the prednisone was down to 10 mg/day, Cushing's began to remit.

She was thought to be in AIHA remission 27 weeks after treatment started. However in an effort to keep her well I had her spayed just days after her 2<sup>nd</sup> birthday. Six weeks later the AIHA was back but the vet who did the op said her horns looked like she was not far off coming back into season; so predisposition, hormones and the op seemed to have set it off the 2<sup>nd</sup> time. The specialist would not help me again unless I had another bone

marrow biopsy done. Jean Dodds and Jo Tucker said no and I agreed. Jean & CIMDA helped us through the 2<sup>nd</sup> illness but she will remain on a low every other day dose of Pred to try to keep this at bay.

I and the breeders know of a bitch on the dam's side who had Addison's. Also in her dam's lines there was a bitch of their own breeding who has a litter brother that is the sire of an Addisonian dog. There is also another dog in her lines who has thrown an Addison's pup and there are rumoured to be more. So there is a family history of autoimmune disease.

Think of how you would have reacted at each of the decision points. Could You Be This Strong An Advocate For Your Bearded Collie? Be prepared with information and be firmly yet politely persuasive.

**Case 2.** M's Addison's seems to have been set off by a sequence of events. First he had infected anal glands. Second he had five weeks of antibiotics which did not clear the infection

and one of the antibiotics is new and a step up from Clavulox. Then he had an operation to remove the anal glands preceded by in house blood work which the vet told me showed only a slightly elevated hematocrit (51%). I should have requested a copy as it probably would have suggested Addison's. Sunday Sept 7, and just over two weeks after the op he started skipping meals, his gums were a vivid pink due to dehydration, he was getting progressively more lethargic and had very little strength in his hind legs. The local vet did in house bloods Wednesday Sept 9, and told me everything was in range. We started him on another round of antibiotics the following day as all he came up with was a urine infection and possibly that he had degenerative acl damage. By Friday he was not eating at all, Saturday morning he vomited his antibiotics.

Luckily I got in to see the vet who was on call the night G had relapsed with AIHA (this vet listens to me). We went back through the bloods from Wednesday, the

creatinine was elevated other values indicated kidney involvement. She thought pancreatitis. I said "No" as I have dealt with this with another dog. She continued through the results and read out high Potassium. I guessed Addison's, she checked her references and agreed. I left him at the vets, went home and found and emailed back to the vet Linda Aronson's updated Addison's paper. He had more blood taken (the ACTH stimulation test) and he was put on a drip with sodium in it to flush the potassium quickly. He was on a drip for the next 24 hours at maintenance levels.

Currently he is on 0.3mg Florinef every 12 hours and a small amount of pred. Time will tell how effective this is and I may change him over to Percorten-V if it proves hard to manage with the Florinef. It's early yet but he seems so much better than he has for some weeks, has strength in his back legs, can run, bounce etc with no sign of degenerative acl damage what-so-ever. He comes from a different kennel than G and is related to several other dogs with Addison's. I

have let them know about his diagnosis.

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*This article first appeared in the September, 2009 AKC GAZETTE and is reprinted with permission. To subscribe to the GAZETTE please go to: [www.akc.org/pubs/index.cfm](http://www.akc.org/pubs/index.cfm).*

### **125 Years of Ailments and Cures**

Eighteen eighty-four was a pivotal year. Besides marking the genesis of the American Kennel Club, it was also the year the rabies vaccine was invented. Though producing a vaccine may not seem significant now, 125 years ago a bite from a rabid dog meant certain death. Most people in those days had a justified fear of dogs. The breakthrough vaccine was used in a young boy who was mauled by a rabid dog. Despite horrible wounds and the rabies, the boy survived. The vaccine, prepared by Louis Pasteur, was strictly an innovation for humans. It took another 50 years before the first commercial rabies vaccine for

dogs became available.

Today Americans take rabies vaccines for granted. If we are bitten by a dog, it's generally not a big deal. The story in developing countries is quite different—rabies is still a significant cause of death due to unvaccinated dogs. To put it in perspective, the World Health Organization reports that one in 10 stray dogs in Bangkok is infected with rabies.

Another viral disease, distemper, was rampant at the turn of the 20th century. Described in 1905 by a French veterinarian, it got its name from Old French and means "to disturb," referring to the seizures triggered by the virus.

At this time, treatments for the disease were just as hard on dogs as the infection itself. In one instance, dogs believed to have contracted distemper were given injections of turpentine under their skin. The theory was that the foreign chemical stimulated the dogs' immune systems to pump out white blood cells, which attacked the virus. The sterile abscess formed by the turpentine eventually

drained.

In 1928, a crude distemper vaccine was developed, made from the virus itself. Unfortunately, the live virus often caused distemper to erupt in the dog it was designed to protect.

Better vaccines against distemper became available in the 1940s. They were so successful that by 1949, veterinarians were convinced that without some form of preventative immunization, it was almost impossible to raise a dog to maturity. The vaccines have saved countless lives, but we still see outbreaks of distemper in unvaccinated groups of dogs.

The current concern with canine distemper is not its effect on dogs but its consequences on wildlife. This virus was thought to play a role in the demise of the Tasmanian tiger. The black-footed ferret was almost driven to extinction. African wild dogs continue to suffer from serious outbreaks of this virus. It also infects sea lions.

Veterinarians welcomed sig-

nificant developments in anesthesia about a century ago. Before this time, the only way to do surgery was to forcibly restrain the dog. Dr. Frederick Hobday, an English veterinarian, recommended chloroform. He considered it the ideal anesthetic because it had a better taste than ether and the anesthesia lasted longer. He also invented a bellows mechanism to assist breathing.

In a study of more than 1,200 operations, only five dogs were lost. Four of these were found to have other diseases on a postmortem. The death of the last one, a Pug, was not a surprise because "this breed of dog being usually risky to anesthetize on account of the shape of the nose."

Problems under anesthesia were dealt with differently in those days. The best way to revive a patient was to lay him on his side and press down on the thorax to empty it. The natural elasticity of the ribs made the chest expand again to pull in air. This was artificial respiration circa 1910. If the dog passed urine or feces during the anes-

thetic, it was considered a bad omen. So was stoppage of the heart for more than five minutes.

In 1966, we saw the creation of the Orthopedic Foundation for Animals (OFA). The mission of the OFA was to provide radiographic evaluation, data management, and genetic counseling for canine hip dysplasia. The foundation allowed breeders to determine the status of the hips in their dogs, helping breeding decisions.

The OFA was a first for canine medicine. It highlighted the fact that disease prevalence could be changed by selection. This impetus motivated dog breeders into looking at controlling other diseases the same way. Breeders in 2009 now have numerous genetic tests to detect many conditions, something that would not have been thought possible 40 years ago.

In 1978, parvovirus came on the scene. This virus erupted in the canine population, triggering vomiting, bloody diarrhea (dysentery), and in dogs both young and old,

death. Within a year, like a plague, it was on every continent.

The virus's origin has been hotly discussed. Some believe that it mutated from a pig or cat parvovirus. There is also a conspiracy theory in which an experimental virus got out of the lab (or was leaked out). We will likely never know where this virus originated.

Veterinarians quickly drew battle lines against parvovirus. Initially, they used feline panleukopenia vaccines (another parvovirus) to help protect dogs. Though not perfect, it did offer substantial protection. In the early 1980s, vaccines made from canine strains of the virus became available.

Vaccination programs against parvovirus are quite effective, but we still see this disease in unvaccinated older dogs and in young dogs that have not completed their vaccine series.

The 1980s was the decade of improved diagnosis of endocrine (hormonal) diseases. Newly available testing al-

lowed veterinarians to discover that several ailments were more prevalent than ever believed.

The granddaddy of all endocrine diseases is hypothyroidism. With better testing, breeds thought to be clear suddenly had dogs with thyroid deficiency. We also found out that the immune system was producing antibodies against thyroid tissue. This autoimmune thyroiditis destroyed the gland, creating an inability to produce thyroid hormone. Just as important, we also learned that there is a genetic predisposition to this disease. Interest in regular testing has waned compared to those days, but some breeders still test in an effort to keep their line clear of this malady.

In the 1990s, responding to clients' desires, veterinarians began to explore alternate ways of treating dogs. They became trained in acupuncture and chiropractic, as well as homeopathy and Chinese and Western herbs. A change in thinking about nutrition accompanied this, with some veterinarians endors-

ing homemade or raw foods rather than commercial blends. Diverging opinions on which vaccines are required to protect dogs also began to develop. We now see veterinary practices that are exclusively alternative, and many are flourishing.

Since 2000, the most significant advancement has to be in surgery on dogs. Specifically, we are seeing veterinarians using laparoscopic techniques. A laparoscopic ovariectomy (spay) is now available, as well as liver biopsies and chest surgery. The benefit is that this technique is easier on the dog and recovery is faster because it allows the veterinarian to do complex surgeries through tiny incisions.

The tools that future veterinarians will have to help your four-legged friend can only be dreamed of. But even though there have been all these incredible steps made by the veterinary profession over the last 125 years, there is something that is constant—the personal touch. This is ultimately why veterinarians chose the profession they did: They enjoy a sloppy kiss from a dog.

*Jeff Grognet is president of the British Columbia Veterinary Medical Association and the regular nutrition and health columnist for AKC FAMILY DOG.*

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**DNA Identification of Dog Breed  
Elsa Sell**

Source: WSJ, Thursday, 9/17/09, p D1 (The Cranky Consumer) and company web sites.

Although those with pure-bred Bearded Collies have no need for DNA testing to prove their dog's breed, some of us may have "mixed" breed dog and likely we have a family member, friend, or neighbor with a "mixed" breed dog. Thus, one may be curious to know whether it is possible to define the dog's heritage with DNA testing. Is it worth the money and effort? It all depends.

The on-line buying process was good for all sites. The sample needed (cheek swab or blood draw in 1 case), the cost (\$59.95-\$124.99), and

results differed among the four companies listed. The article's author tested her dog that physically resembles a pit bull-weimaraner mix.

One company groups possible breeds in the pedigree by level of strength (level 1 contributing more than 75% to the pedigree; level 5 contributing less than 10%). That one said the dog was Italian greyhound and Boston terrier (level 3), bichon frise and golden retriever (level 4), mastiff and West Highland white terrier (level 5).

Another company said 25% Staffordshire terrier, 12.5% from the bull terrier (same ancestral group as the Staffordshire terrier), and a trace from the wire fox terrier.

Another company found Staffordshire bull terrier as a secondary contributor only.

The differing results may in part be because the number of breeds in each company's DNA dataset differs, ranging from 157 to 108 to 62.

So, who knows? Does one really need to know? Some

of the suggested advantages of testing include gaining clues about behavior, possible health problems, and planning for training. Several companies commented that one cannot reliably determine heritage by the dog's physical appearance. For those wishing to explore the topic further, here is the list of companies in alphabetical order. All now use cheek swabs..

BioPet Vet Lab –  
Biopetvetlab.com.  
62 breeds in database  
Provides ancestry analysis certificate  
Provides behavior, health, & personality summary  
Good FAQ section

DDC Veterinary –  
Vetdnacenter.com  
Offers DNA testing for some hereditary diseases  
Resells BioPet test

Mars Veterinary –  
Wisdompanel.com  
157 breeds in database  
Unclear how results are reported

MetaMorphix –  
Canineheritage.com  
Over 100 of the most popular breeds  
Good FAQ section  
Provides certificate of DNA breed analysis

## Evolution of Social Cognition in Dogs

Source: Science, August 28, 2009, vol 325, p 1062-5.  
Podcast available at:

[www.sciencemag.org](http://www.sciencemag.org),

in search box type in “Going To The Dogs”, select the author Virginia Morell, then podcast.

A number of laboratories have engaged in research on evolution of social cognition using a variety of species including ants, dolphins, fish, and monkeys. Dogs weren't among the species because domestication was thought to preclude objective study. Even so, a number of dog ethology and cognition labs have been or are being developed in places such as the Eötvös Loránd University in Budapest, Harvard University, and Duke University. There has been a conference on the subject of dog cognition and one issue of the journal Behavioural Processes was devoted to the dog. Ethology is the scientific study of animal behavior with a focus on behavioral processes. Readers of this



newsletter had an opportunity to learn about Neonatal Influence on Dog Behavior by J deWit in the spring 09 issue. That study was conducted under controlled laboratory conditions several decades ago.

Some believe that domestication of the dog gives an opportunity as a natural experiment to study how the dog survives in a new habitat, the human home. Dog cognition studies can also provide comparative study with their ancestor, the gray wolf.

Advantages of using dogs to study domestication effects are their single common ancestor species (the gray wolf), mapping of the dog genome which set up the possibility of linking behavioral traits to specific genes, and cost. A number of labs use the model of the earlier program in Hungary in which dogs are not housed in research facilities but in their own human homes. This greatly diminishes cost and complaints by animal rights groups. Furthermore, research can be replicated because there are an ample

number of willing owners; replication is difficult in laboratory raised species due to cost for long term housing and care and, availability. Replication is important when assessing research findings.

One interesting study involved hand raising gray wolf pups much as pet dogs are raised. They gave carefully designed pointing tests to wolves and dogs at different ages. The 8 week old and 4 ½ year old gray wolves were as good as dogs at following the human pointing cues to hidden food. However, 4 month old wolves failed. They were too busy doing other things to pay attention to the pointing. In contrast to the young dogs, the young wolves had trouble making eye contact with their humans. The researchers believe those differences indicate the young wolves are on a different developmental path from dogs perhaps because dogs must live in our world and obey our rules. It takes the wolves longer to learn to accept humans as social partners.

There is debate though

about whether a dog's skills are learned or an evolutionary change. The problem of controlling the nurture side of the equation – owners feed, train, and treat their dogs – can introduce unknown quantities into a field where some believe that strict control of the environment is a must. It seems that the pros outweigh the cons, so in the future we'll be hearing more about research on topics such as how dogs understand verbal commands, how they recognize their owners, what a dog knows about your state of mind, or how a dog can distinguish between different kinds of growls. One investigator says that the heart of dog cognition is their strong desire to work with and for us and their ability to communicate without language. No doubt those who have done training of various sorts with their dogs recognize these cognitive features. Having solid research to support one approach or another may facilitate trainers in unexpected ways down the line.

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**Special thanks go out to our**

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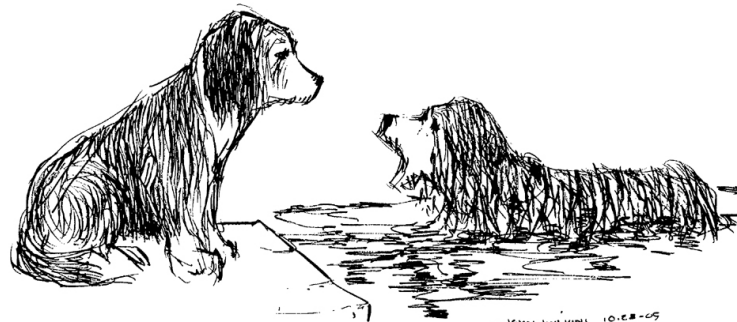
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For \$100-\$199 you receive a sterling silver angel pin  
For \$200 and up you receive a 14K gold angel pin  
The pins can be viewed on the BeaCon Web Site.  
[Http://www.beaconforhealth.org/](http://www.beaconforhealth.org/)

If one goose is a geese shouldn't a gang of geese be geeses? Definitely, but somewhere in the corruption of the King's English a group of geese on the ground became a gaggle and a skein in the air. Besides devotees of crossword puzzles and the game Trivial Pursuit who knows that? If I had my way a muster of mongeese would be mongooses and a family of fish would be trouts or salmons. (More next newsletter)

**From Cattle Today**

**MacLean and Company .....**



***“She said the mud bath at the spa felt so good so I went out to find one and try it!”***



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