

MATHE SCOTTIE GUARDIAN (



Quarterly Newsletter of the STCA's Health Trust Fund

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elcome to the second edition of the 2020 Scottie Guardian, the quarterly eNewsletter of the STCA Health Trust Fund.

Today is Easter Sunday, April 12, 2020, and we are all in the middle of a



nation-wide shelter in place regime to help reduce the spread of the novel Coronavirus. It has been a strange and at times scary journey, and we are not at the end yet. Many Americans and people around the globe have lost their fight against this virus, but many more have recovered or never even experienced symptoms. We can be encouraged by those statistics, and we all are looking forward to emerging from our homes, to resume our lives, get back to work, and embrace our friends and family once again.

This issue of the Scottie Guardian will cover some aspects of the **COVID-19 experience:**

- The virus and our pets: are they safe? Updated information
- Visiting the Vet's office in the days of the COVID-19 shut-
- Our editor Fran Sanden's experience working for the CDC and infectious disease protocols
- Glad You Asked- all about itchy Scotties.
- And much, much more!

We hope you enjoy this issue, and we wish all of our readers, friends and family a safe, healthy and promising second half of 2020.

Marcia Dawson, Chair STCA Health **Trust Fund** hijinkscot@gmail.com



Be sure to visit the STCA webpage at www.stca.biz for more details on Health and the Health Trust Fund pages, including links to the ScottiePhile Health library and HTF donation pages.



Life under the COVID-19 Shut-Down



These are interesting times. As of this writing, April 17, 2020, many of us are hunkered down in our homes, waiting and watching the events that swirl around our country and the world. Every day the story changes with an updated understanding of the scope of this new virus and some new bewildering statistics. Researchers race to provide an effective therapy and develop a future vaccine. A pandemic of epic proportions has swept around the globe, sickening and killing many people, crippling the economies of many countries, and crushing the optimistic spirit so much a part of Spring, new life, and rebirth. Signs are beginning to point to a slow return to normalcy by degrees, but not quite yet.

An important part of this life-on-hold is keeping up with the COVID-19 information with respect to our Scotties. How does this virus affect them? How we can take the best care of our dogs in this extraordinary time? Knowledge is the key. There are some valuable resources to consult and review on a regular basis as the story continues to change.

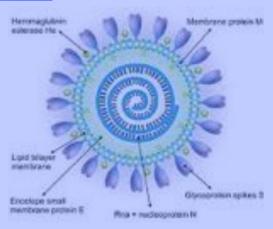
Can my Scottie catch the virus?

It does not appear that dogs are susceptible to this particular Coronavirus, the SARS-CoV-2. This is a large family of viruses, some of which do infect our pets. The strain of Coronavirus that some of us vaccinate our dogs against is in fact a gastrointestinal virus, like a milder form of Parvo. It is not a respiratory virus in our dogs. There have been a very few isolated cases of a dog or cat being infected with SARS-CoV-2, but they did not become clinically ill and these are by far and away the exception. Ferrets appear to be quite susceptible, and there are even tigers in the Bronx zoo who contracted the virus from their keeper. But dogs do not appear to be in danger nor present a danger to us. Go to the following links to read more:

https://www.vin.com/apputil/Project/DefaultAdv1.aspx?pld=25078&catId=142951&id=9548687

 $\frac{https://www.avma.org/resources-tools/animal-health-and-welfare/covid-19/sars-cov-2-animals-including-pets}{}$

https://www.akc.org/expert-advice/news/can-dogs-get-coronavirus/





continued on next page...

Can our dogs actually protect us against the virus?

There is good evidence that living with and caring for our dogs not only helps our mental state but even helps to enhance our own immune systems. Good news! Read more at this link:

http://caninechronicle.com/current-articles/can-dogs-enhance-your-immunity/

What if my Scottie needs to see my vet during this time? What can I expect?

Along with many other service industries deemed essential, your veterinarian is still there to help you. Many practices are seeing patients using a "curb service" routine, where a technician will come out to your parked car, take your dog indoors to see the veterinarian, perform the requested or needed services, and then return the dog to your car. If further consultation is needed, many vets are using phones or telemedicine to communicate with their clients. Emergencies are being handled as they arrive, and surgeries are handled as needed. Elective procedures (spays and neuters, for example) may be postponed. Read more about your veterinarian and their special care at the following link:

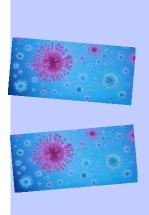
https://www.avma.org/resources-tools/animal-health-and-welfare/covid-19/covid-19-faqs-pet-owners

What if I get sick myself?

It is always important to have a plan for your pets in case of any disease or incapacitation. Read the following flyer from the AVMA:

https://ebusiness.avma.org/files/coronavirus/COVID-19-Protect-Animals-Flyer.pdf

We know this period will eventually pass, and we will emerge again to resume our lives. There will be changes and losses that cannot be recovered. But life will go on! In the meantime, stay well and take the best care of yourself and your Scotties.





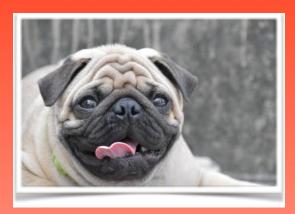


SOCIAL DISTANCING

LATE BREAKER!!!

SARS-CoV-2 in a dog: North Carolina

By Scott Weese on April 28, 2020 POSTED IN DOGS



Here's one for the "not surprising but freaking people out" files.

A dog in the North Carolina (US) has tested positive for SARS-CoV-2, the virus that causes COVID-19. The dog was in a household with infected people, and was tested a part of household surveillance study coordinated by researchers at Duke University. The other dog, cat and lizard in the family tested negative. It's the first reported infected dog in the US (but probably not actually the first infected dog).

The dog is a pug named Winston. The owners reported Winston had some mild respiratory signs for a few days; however, such signs aren't exactly uncommon in pugs so it's probably hard to be confident that the dog had clinical signs due to infection with SARS-CoV-2 (especially since dogs don't seem to be particularly susceptible to the virus based on everything we've seen – and not seen – so far).

Does this change anything? No. The same messaging applies:

- There's a chance for human-pet transmission of this virus.
- The animal health implications are probably limited.
- The human health implications are completely unknown at this point (but are probably quite low in the grand scheme of things).

I'm lazy so I'll cut and paste the same messages as before:

- Socially distance your pets, just like you and the rest of your family. Keep them inside with you, and when outside, keep them under control so they don't interact with anyone else (or anyone else's pets).
- If you're infected, limit contact with people *and* animals
- If you're infected, keep your pet in the house with you.

https://www.wormsandgermsblog.com/

A Personal Look at the Centers for Disease Control and Prevention (CDC) by a Retiree...ME...your Editor, Fran Sanden

Although I could write volumes about my 28 year career with CDC, I'll limit myself and then cite some references.

CDC morphed out of the Malaria (1942-1945) and became the on July 1, 1946. From its humble employees, it now employees over 40 countries in addition to every Atlanta, Georgia.



Control in War Areas program Communicable Disease Center beginning of fewer than 400 15,000 people with a presence in state. CDC is headquartered in

In 1951, the Epidemic Investigation Service (EIS) was established. EIS officers were primarily physicians but today, in addition to physicians, veterinarians, nurses, pharmacists, other allied health professionals, and doctoral level scientists (e.g., PhD, ScD, DrPh) are among the EIS ranks. These officers are the "Disease Detectives" we hear about on the news. They are the backbone of CDC.

CDC is divided into Centers, Institutes, and Offices (CIOs). Armed with BS degrees in biology and health education from the School of Public Health at the University of Maryland, my CDC career started as a biologist in the rabies research laboratory of the Center for Infectious Diseases (which is now the Poxvirus and Rabies Branch, Division of Viral and Rickettsial Diseases, National Center for Zoonotic, Vector-borne, and Enteric

Diseases, Coordinating Center for addition to research, our mission their efforts to quell rabies in Additionally, we became involved the U.S. and American citizens while overseas (e.g., Peace Corps (yes, CDC had to be invited by the officer was sent to that state to



Infectious Disease at CDC). In was to support the states in their state's animals. in every human rabies case in who came down with rabies Volunteers). Once invited in state to participate), our EIS oversee the treatment of the

patient. We, in the laboratory back in Atlanta, worked around the clock to support the diagnosis and treatment, often traveling to the Atlanta airport to retrieve specimens before traveling back to the lab to complete the investigation from our end.

During my 12 years in the rabies research laboratory, our team was on the frontline in the development of the 5-dose human diploid rabies vaccine licensed in 1980 which replaced the 21-dose mouse brain vaccine. My typical day started in blue jeans, T-shirt, lab coat and gloves. Since rabies is a class 3 pathogen, I spent my mornings working under a negative pressure laminar flow biosafety hood. My afternoons were spent behind a fluorescent microscope reading the results of my morning efforts. I took every virology course given by CDC and during my evenings, I attended Georgia State University where I obtained an MS degree.



SEORGIA LISES IN LISE

While working in the rabies lab, AIDS reared its ugly head. In 1984, I volunteered to spend 3 months in Kinshasa, Zaire, to help set up an AIDS diagnostic laboratory. Back to the rabies laboratory after my TDY (Temporary Duty Yonder), I and another microbiologist spent a month in Zimbabwe flagging for bats in bat caves. We were looking for rabies-like viruses in the bat population. We found none.

In 1986, Congress passed the Technology Transfer Act which enabled federal scientists to patent their technology. CDC established a Technology Transfer Office in 1988 and I jumped ship, leaving the laboratory for a 7-year stint in that office. The director of the office was looking for a scientist to interact with CDC scientists and be their liaison with our contract patent attorneys. Only problem was that I didn't know anything about patent law. So, I attended Emory University where I studied only intellectual property law and subsequently took and passed the patent bar exam and became a registered patent agent (no, I'm not an attorney; the only requirement for sitting for the patent bar is having at least a bachelors degree in a science).

In 1997, I moved again, this time to the Office of the Director where I joined the Human Subjects Office. I studied the Human Subjects regulations, took the national qualifying exam, became a CIP (Certified IRB Professional), and spent the next nine years teaching the Human Subjects rules and regulations to CDC scientists, state scientists, and international collaborating scientists.

I retired in 2006 as a Public Health Scientist and moved with my husband, a CDC molecular biologist, to Colorado, his home state. Two years later, CDC's HIV/AIDS office called and asked me to join an international HIV/AIDS team. I said yes and for the next six years traveled all over Africa and SE Asia teaching CDC collaborating physicians, nurses, and scientist researchers the U.S. human subjects regulations. Why? International collaborators receive U.S. funding, and as such, they are required to follow U.S. regulations.

I loved my CDC career and feel very fortunate to have been a part of this dynamic agency.

References:

https://www.cdc.gov

https://en.wikipedia.org/wiki/Centers_for_Disease_Control_and_Prevention















Bulletin Board News!



Check out the New & Improved HTF Health Library on the STCA Website!

Also, you can now access the Cerebellar Abiotrophy (CA) Registry.
Go to: www.stca.biz
and follow the Health links!







KUDOS!!

To the San Francisco Bay STC
For a successful Bladder Screening Clinic!
Held on March 8, 2020 at
Adobe Animal Hospital in Los Gatos, CA.
Nineteen Scotties were screened and 18 were clear!

STC of California was forced to postpone their clinic planned for the end of May.

STC'S of Greater Dayton and Michigan have decided to postpone their screening clinics until 2021.







During this SIT/STAY order, my club, the Scottish Terrier Club of Greater Denver is sending us recipes and AKC TV videos to watch. I 'd like to share the latest with y'all.

The recipe this month is really an excellent tasty crusty Dutch oven bread Club President, Charlie Gann, received from a friend. She reports that it's fantastic and very easy. At our altitude, here in Colorado, cut the baking time down by 8 or so minutes. (Recipe on next page)

Here is another AKC TV series to watch during our "Sit and Stay" at home time. This has 4 items to it, one information on Corona virus and 3 fun ones!

https://akc.tv/watch/19/4673/video-3/april-7th-2020/?ctx=/watch/4/2044/series/akcdogcenter-live-from-101-park





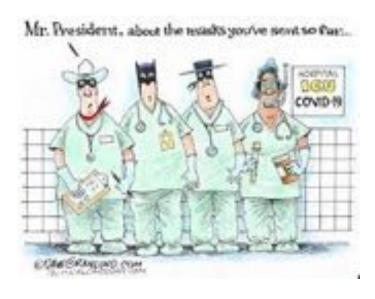




















41/2020

Faster No Knood Broad | Janny CanCook.com

No Knead Bread

You'll need a 4 or 5-quart Dutch oven with an oven-safe handle. I recommend an oven thermometer to make sure your oven is hot enough and a pair of oven gloves are advisable. (For the original overnight method, simply switch to COOL water and let the dough rest overnight on the counter top for 8 to 24 hours). ALWAYS AERATE (not sift) YOUR FLOUR BEFORE MEASURING! - Jenny Jones

Prop Time: 5 minutes

Cook Time: 40 minutes

Total Time: 4 hours, 25 minutes

Makes: One loaf



Ingredients:

- 3 cups (390 gms) all-purpose or bread flour (aerate flour before measuring).
- 1/4 tenspoon yeast, active dry or instant (1 gm).
- I teaspoon salt (6 gms)
- 1 1/2 cups hot water, not boiling (354 mL) I use hot tap water about 125-130° F
- (about 2 Tablespoons extra flour for shaping)

Instructions:

- 1. Combine flour, yeast and salt in a large bowl. Stir in water until it's well combined.
- Cover with plastic wrap and let stand at reom temperature for 3 hours.
- After 3 hours dough will become puffy and dotted with bubbles. Transfer it to a well-floured surface and sprinkle dough with a little flour. Using a scraper fold dough over 10-12 times & shape into a rough ball.
- Place in a parchment paper-lined bowl (not wax paper) and cover with a towel. Let stand on counter top
 for about 35 minutes.
- Meantime place Dutch oven with lid in a cold oven and preheat to 450° F. My oven takes 35 minutes to reach 450°.
- When oven reaches 450° carefully, using oven gloves, lift the parchment paper and dough from the bowl and place gently into the hot pot. (purchment paper goes in the pot too) Cover and bake for 30 minutes.
- After 30 minutes, remove lid and parchment paper. Return, uncovered, to oven and bake 10 + 15 more minutes. Let it cool at least 15 minutes before slicing.

No Dutch Oven? Didn't Turn Out? Other Questions? Click berg.

Want It Faster? Click here for my 2-HOUR No Knead Bread.

Acrating and Sifting are Not The Same: Click here to learn more.

stouthers.



GLAD YOU ASKED!!

This column will appear in each issue of the Newsletter. You ask the question and we'll attempt to answer it.

Q: My Scottie is scratching and chewing and digging nonstop. It's driving me crazy! I feel so badly for him. I have not seen a flea on him anywhere. What is his problem??

A: After thoroughly examining your Scottie, your vet makes the diagnosis of atopic dermatitis (atopy). Atopy is actually an allergy to airborne particles, similar to hay fever in people. People with allergies sneeze and have watery eyes and can be miserable for the spring, summer, and fall. Dog, on the other hand, have itchy skin.

Atopy in our Scotties is an immune response to the particles, pollens, dust mites, and molds flying through the air, both outdoors and inside our homes. Certain breeds, such as Goldens, Labradors, Westies, Cairns, Boxers, and Pugs, have a genetic inclination to develop atopy, but any dog can become sensitized to the many allergens around him.

Key features of atopy in our dogs are:

- Young age at onset
- Seasonal symptoms
- * Chronic or recurring yeast infections in the skin
- * Ear flap involvement (smelly ears, pink, and greasy)
- Front feet involvement (endless chewing and licking of feet and between toes)
- * Typical flea bite areas (base of tail and inside back legs) are not involved
- * Positive response to anti-inflammatories

There are many ways to approach the treatment of atopic dermatitis in your Scottie, and your vet will help you decide the best approach. Complicating the picture are secondary bacterial infections, those opportunistic bugs that find a moist, inflamed, and irritated area and set up shop. Antibiotics are always called for when there is an infection. While atopy may not be entirely cured, it can be

managed with various medications, supplements, and appropriate bathing. And, a good flea control protocol is always important to keep away the additional misery of fleabite dermatitis in your Scottie.

POLLEN

SEASON



Follow this link to read more on Atopic Dermatitis: https://veterinarypartner.vin.com/doc/?
https://veterinarypartner.vin.com/doc/?





From Your Editor's Desk

Today, I want to talk to you about COVID-19 and wearing masks. As the CDC now recommends, it's a good idea to wear masks. Some states are even requiring it when you're out and about.

Since we're on the subject, during the infamous plague (*Black Death*) of 1347-1350 when millions of people died, doctors wore masks that looked like beaks. But why?

The answer...

Plague doctors wore masks with a being infected by deadly diseases believed was airborne. In fact, they miasma, a noxious form of 'bad air. items (e.g., herbs) with the hope bad smells, (i.e., miasma), thought (and other diseases). Thus, doctors



bird-like beak to protect them from such as the Black Death, which they thought disease was spread by The masks were filled with aromatic that wearing them would keep away to be the principal cause of the plague believed the herbs would counter the

"evil" smells of the plague and prevent them from becoming sick. That theory was debunked in 1881 when Louis Pasteur advanced the role of germs as the cause of disease. This revelation came to be known as the germ theory.

By now, you're probably overwhelmed with information about COVID-19; therefore, I'm going to give you some references to review on the subject of whether our beloved pets can be infected.

- 1.https://www.akc.org/expert-advice/news/can-dogs-get-coronavirus/https://
- 2.www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/animals.html
- 3.https://www.avma.org/resources-tools/animal-health-and-welfare/covid-19

Until we meet again, my current message to you is to wash those paws and refrain from sniffing butts.

The Scottish Terrier Club of America's Health Trust fund is a 501c3 organization established in 1994 for the purpose of supporting research to benefit all Scotties, investigating and monitoring health issues in the breed using registries, databases and health surveys, and communicating important new health information and research findings to all Scottie owners. All donations made to the HTF are tax deductible to the extent allowed by the law.