

The Range Animal Hospital

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Advanced
Diagnostics, Medicine
Surgery, Dentistry, &
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for
Large & Small Animals

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Vaccinations

The news media had recently reported that we may be OVER vaccinating our pets. Actually, we have been looking at this for some time. We still do not have all of the answers we need from the scientists. Currently, our recommendations are as follows:

We know from some very good research that the rabies shot is good for three years, but the immunity goes down with time. Actually, after 1 shot about 99% of dogs are protected the first year, 95 or so the second year, and 85% the third year. After two vaccinations BY A VETERINARIAN, there has never been a reported case of rabies ever! No one has actually done long term studies of rabies immunity [you can actually measure immunity with a blood test], this is just retrospective observations. That may lead some to say that a dog only needs 2 rabies vaccinations in their lifetime. Actually we do not vaccinate dogs for their protection, we vaccinate them for OUR protection. As a result we still think it is good to vaccinate every three years. A SINGLE human death is completely unacceptable! Also the rabies recommendations are also THE LAW and we veterinarians cannot change them until we, or someone, gets the law changed.

Next let's consider Lyme disease. We have good reason to believe that the vaccine for Lyme disease only has good immunity for 6 months. Up here in the winter there is no transmission on Lyme disease in the winter. As a result, we vaccinate for Lyme in the spring, usually in May. If we lived in South Caroline I would vaccinate twice yearly, but only if lyme is endemic there.

All vaccination programs should be tailored to individual patients and to the area. Another example of this is Kennel Cough [Bordetella bronchiseptica infection]. It is often transmitted in kennel situations and all of our local boarding kennels REQUIRE it. I very much support this, but I do not recommend it to dogs that live in rural areas and are never kenneled.

Probably the most difficult decision is the distemper combination vaccination. In our distemper vaccination is Distemper [a severe and often fatal brain and respiratory infection], hepatitis [a severe, but rare liver infection], Adenovirus II [a common respiratory virus-similar to a cold], Parainfluenza virus [another common respiratory infection similar to a cold], Leptospirosis-2 different serovars [a blood, liver and kidney infection, this disease in on the increase], Corona virus [an intestinal infection, severe in pups but not so much so in adults], and Parvovirus [a very severe, sometimes fatal intestinal infection]. While many of these diseases have a vaccine that can be given individually, most clients, and patients do not want to receive a half a dozen

vaccinations instead of one or two. Lets consider each disease individually, and for the Ironwood area.

- Distemper, This is a terrible disease and we MUST vaccinate for it. After two or three vaccinations we probable could vaccinate every second or third year.
- Hepatitis, this is a terrible disease and we MUST vaccinate for it. After two or three vaccinations we probable could vaccinate every second or third year.
- Adenovirus II, since this disease is similar to a cold, not vaccinating could be an option, but it is highly contagious, and in households with many dogs, they all should be vaccinated. I get my flu shot even though a case of the flu isn't going to kill me. After two or three vaccinations we probable could vaccinate every second or third year.
- Parainfluenza, since this disease is similar to a cold, not vaccinating could be an option, but it is highly contagious, and in households with many dogs, they all should be vaccinated. I get my flu shot even though a case of the flu isn't going to kill me. After two or three vaccinations we probable could vaccinate every second or third year.
- Leptospirosis, a sometimes-fatal disease. This disease is on the increase and we also know that the immunity from the vaccine is not that long lasting [similar to Lyme disease, actually they are distant cousins]. We know of 9 different serovar, and we now believe only vaccinating for the two we currently do may not be enough. There are now vaccines that have more than just the two. In Ironwood we rarely see this disease; we think our current recommendations are adequate. We continue to watch developments in this area. We think vaccinating less than yearly is inadequate.
- Corona virus, in puppies is often a severe disease and we know vaccination to be very important. In adult dogs in a single dog household it may not be required, but again, I still get my flu shot. After two or three vaccinations we probable could vaccinate every second or third year.
- Parvovirus, a frequent, severe, and often fatal infection in pups and a severe, sometimes fatal disease in adults. Vaccination as a pup is imperative. As an adult, after several vaccinations, every two or three years may be adequate.

Now lets consider this. While severe, rapidly fatal reactions

can occur from vaccinations, after giving tens of thousands of vaccinations we have only ever seen this once and only in a horse. Rather severe systemic reactions have occurred only twice in this practice. Local reactions [a lump] are reported to us at least monthly, and so far they have all resolved with out further worry.

Lets blend this all together into some good recommendations:

- Vaccinate for Rabies at 4 months and then again in 1 year. Then every three years after that. THIS IS CURRANT LAW.
- Vaccinate puppies at 2, 3, and 4 months with the DHA2LLCP combination vaccination. Booster annually. Even though this may result in excessive vaccination for some of the diseases, the risks are extremely low and the benefits very much justify doing so.
- Vaccinate for Lyme at 4 months and then again each May. Since the Lyme vaccination requires 2 vaccinations before good immunity is formed, we give the first at 4 months with their Rabies and DHA2LLCP so as to avoid an additional trip in April.

Now lets consider Cats.

- Rabies, in Gogebic County Michigan, Vaccinating IS THE LAW. In other counties it varies. Vaccinate just like dogs.
- Panleukopenia, [also called cat distemper, but a different virus from dog distemper, a severe often fatal blood and bone marrow infection] a very severe infection in kittens and sometimes-fatal disease in adults. After two or three annual vaccinations we probable could vaccinate every second or third year.
- Rhinotracheitis Virus, this disease is similar to a head cold, and very common in kittens. It is HIGHLY contagious. It occasionally causes a long-standing rhinitis [infection in the nose with discharge]. Not vaccinating could be an option in adults, but it is highly contagious, and in households with many cats, they all should be vaccinated. Again, I get my flu shot even though a case of the flu isn't going to kill me. After two or three annual vaccinations we probable could vaccinate every second or third year.
- Calcii Virus, this disease is similar to a head cold, and very common in kittens. It is HIGHLY contagious. It occasionally causes a long-standing rhinitis [infection in the nose with discharge]. Not vaccinating could be an

option in adults, but it is highly contagious, and in households with many cats, they all should be vaccinated. Again, I get my flu shot even though a case of the flu isn't going to kill me. After two or three annual vaccinations we probable could vaccinate every second or third year.

- Chlamydia Infection, This is an upper respiratory infection, and is not prevalent in Ironwood. It is highly contagious. Not vaccinating is an option and we do not in most circumstances. In households with many cats, especially if there are cats coming and going frequently, they all should be vaccinated.
- Ring Worm, actually a fungus skin disease. This is a very unusual disease in Ironwood and we do not generally recommend vaccination.
- Feline Peritonitis, a multi systemic infection in cats that can cause several different syndromes. It is incurable and fatal and, fortunately, extremely rare in Ironwood. We currently do not recommend vaccination
- Feline Immunodeficiency virus, an AIDS like disease in cats. IT IS NOT THE SAME VIRUS AS HUMAN AIDS AND IS NOT TRANSMISSIBLE TO HUMANS. Vaccination is only recently available. It is very uncommon in Ironwood and we currently only recommend vaccination in special circumstances.*
- Leukemia Virus is a uniformly fatal blood, bone marrow and lymph gland infection. Cats are either born with it, acquire it from moms infected milk or acquire through close physical contact, often a fight. It is also a sexually transmitted disease. It is common in Ironwood and seems to be even more common in Ontonagon. Since it requires cat-to-cat contact for transmission, single cat households with no outdoor exposure to other cats do not require vaccination. If one cat in the household is infected all others MUST be vaccinated. All outdoor cats should be vaccinated.*

*We have in hospital tests for these diseases and run them frequently. We have a good handle on there prevalence.

Lets blend this all together into some good recommendations:

- Vaccinate for Rabies at 4 months and then again in 1 year. Then every three years after that. THIS IS CURRANT LAW.
- FVRCP, this is a combination Panleukopenia, Rhinotracheitis Virus, Calcii Virus,

- Vaccinate kittens at 2, 3, and 4 months. Booster annually. After 2 or 3 annual vaccinations it may be reasonable to vaccinate every 2 to 3 years, especially in indoor cats. Outdoor cats probably are at greater risk and maybe should be vaccinated yearly.
- Leukemia Virus, this is the vaccine that has started all of this concern about over vaccinating. A small number of cats get sarcomas, that is a cancerous tumor of the connective tissue, at the vaccination sight. The leukemia vaccine seems to be the biggest problem. In my experience the incidence of these tumors is very small. In fact I don't believe I have ever seen one, but I have seen one cat with a sarcoma in the area where we give injections. Considering this owner and the history of the cat, I do not believe it had ever been vaccinated. Since the risk of leukemia in outdoor cats is great, and the risk from the vaccine is small, we recommend vaccination. The risk of leukemia in indoor cats is extremely small, as is the risk of sarcoma. For indoor cats, we do not recommend vaccination.
- Chlamydia Infection, Ring Worm, Feline Peritonitis, Feline Immunodeficiency virus, vaccinate if individual circumstances make the benefits greater than the risk. Making these decisions is probably some of the most important work we do as veterinarians!

Finally, preventive health care is both the most life saving and the cheapest health care. Lets not throw the baby out with the bathwater. I am concerned that the pendulum is going to swing too far in the other direction and we will not vaccinate animal that really should be. Then we will be wondering why all of these infectious diseases are on the increase. I, by the way, will not be wondering.

We see extremely rare serious complications from vaccination, and more common not so serious complications. We see frequent fatal, frequent serious infectious and preventable disease. To me this is a no brainer. It seems to me that the lawyers and the academians are spending more time talking about this than the practitioners. We worry when lawyers practice medicine, we listen and analyze when the academians speak, and we try to do what's best for my clients and patients.

After all of this, you have probably figured out that this is a whole lot more complicated than you ever thought. That's why we have doctor's degrees. I laugh at the pet catalogs that sell vaccines. They usually have a chart of recommendations, suggesting it to the whole nation. In my mind, they are businessmen, not veterinarians. They should be ashamed!