

VACCINATION NEWSFLASH [CIMDA support] RE: J DODDS VACCINE PROTOCOL

I would like to make you aware that all 27 veterinary schools in North America are in the process of changing their protocols for vaccinating dogs and cats.

Some of this information will present an ethical & economic challenge to Vets, and there will be skeptics. Some organizations have come up with a 'political' compromise suggesting vaccinations every 3 years to appease those who fear loss of income vs. those concerned about potential side effects. 'Politics', traditions, or the doctors economic well-being should not be a factor in a medical decision.

NEW PRINCIPLES OF IMMUNOLOGY

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Not only are annual boosters for parvo and distemper unnecessary, they subject the pet to potential risks of allergic reactions and immune-mediated haemolytic anemia. There is no scientific documentation to back up label claims for annual administration of MLV vaccines.

Puppies receive antibodies through their mothers milk. This natural protection can last 8 - 14 weeks. Puppies & kittens should NOT be vaccinated at LESS than 8 weeks. Maternal immunity will neutralize the vaccine and little protection (0-38%) will be produced.

Vaccination at 6 weeks will DELAY the timing of the first highly effective vaccine.

Vaccinations given 2 weeks apart SUPPRESS rather than stimulate the immune system.

A series of vaccinations is given starting at 8 weeks and given 3-4 weeks apart up to 16 weeks of age.

Another vaccination given sometime after 6 months of age (usually at 1 year 4 mo) will provide LIFETIME IMMUNITY.

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Vaccination Protocols Change

This came thru on the AKC Parent Club list on 9/28/03. The following is taken from the April/May Newsletter of the Senior Dogs Project:

Vaccinations: All Veterinary Schools in North America Changing Vaccination Protocols

Recent editions of the Senior Dogs Project's newsletter have reported on the ever-broadening trend of eliminating vaccinations for adult dogs, except for rabies, where required by state law.

We have now had a report that all 27 veterinary schools in North America are in the process of changing their protocols for vaccinating dogs and cats.

Here, in a nutshell, are the new guidelines under consideration: "Dogs and cats immune systems mature fully at 6 months. If a modified live virus (MLV) vaccine is given after 6 months of age, it produces immunity, which is good for the life of the pet (i.e., canine distemper, parvo, feline distemper). If another MLV vaccine is given a year later, the antibodies from the first vaccine neutralize the antigens of the second vaccine and there is little or no effect. The titer is not 'boosted' nor are more memory cells induced.

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"Vaccination at 6 weeks will, however, delay the timing of the first highly effective vaccine. Vaccinations given 2 weeks apart suppress rather than stimulate the immune system. A series of vaccinations is given starting at 8 weeks and given 3-4 weeks apart up to 16 weeks of age. Another vaccination given sometime after 6 months of age (usually at 1 year 4 months) will provide lifetime immunity."

Schultz: Dog vaccines may not be necessary

March 14, 2003



A veterinarian prepares to administer a canine vaccine to a dog at the School of Veterinary Medicine Clinic. Research by Ronald Schultz, professor and chair of pathological sciences in the School of Veterinary Medicine, questions whether current vaccination guidelines are causing our pets to be unnecessarily over-vaccinated. (Photo: [Jeff Miller](#))



Schultz

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by [Emily Carlson](#)

Once a year, Ronald Schultz checks the antibody levels in his dogs' blood. Why? He says for proof that most annual vaccines are unnecessary.

Schultz, professor and chair of pathobiological sciences at [School of Veterinary Medicine](#), has been studying the effectiveness of canine vaccines since the 1970s; he's learned that immunity can last as long as a dog's lifetime, which suggests that our "best friends" are being over-vaccinated.

Based on his findings, a community of canine vaccine experts has developed new veterinary recommendations that could eliminate a dog's need for annual shots. The guidelines appear in the March/April issue of Trends, the journal of the American Animal Hospital Association (AAHA).

Every year, when we take our dogs to the veterinarian's office, they could receive up to 16 different vaccines, many of which are combined into a single shot. Four of these products protect against life-threatening diseases, including rabies, canine parvovirus type 2 (CPV-2), canine distemper virus (CDV) and canine adenovirus type 2 (CAV-2); the rest protect against milder diseases to which only some dogs are exposed, including Lyme disease.

But, as many veterinarians are realizing, over-vaccination can actually jeopardize a dog's health and even life. Side effects can cause skin problems, allergic reactions and autoimmune disease. Though the case in cats, not dogs, tumors have been reported at the site of vaccine injections.

"These adverse reactions have caused many veterinarians to rethink the issue of vaccination," says Schultz. "The idea that unnecessary vaccines can cause serious side effects is in direct conflict with sound medical practices."

For 30 years, Schultz has been examining the need to vaccinate animals so often and for so many diseases. "In the 1970s, I started thinking about our immune response to pathogens and how similar it is in other animals," says Schultz. "That's when I started to question veterinary vaccination practices."

Just like ours, a canine's immune system fires up when a pathogen, like a virus, enters the body. The pathogen releases a protein called an antigen, which calls into action the immune system's special disease-fighting cells. Called B and T lymphocytes, these cells not only destroy the virus, but they remember what it looked like so they can fend it off in the future.

It's this immunological memory that enables vaccines, which purposely contain live, weakened or dead pathogens, to protect against future disease.

But, as Schultz points out, vaccines can keep people immune for a lifetime: we're usually inoculated for measles, mumps and rubella as children but never as adults. So, can dogs be vaccinated as pups and then never again?

While evidence from Schultz's studies on both his own dogs and many other dogs from controlled studies suggests the answer is yes, Schultz recommends a more conservative plan based on duration of immunity and individual risk.

Schultz says that core vaccines, or the ones that protect against life-threatening disease, are essential for all dogs, yet he does not recommend dogs receive these shots yearly. "With the exception of rabies, the vaccines for CDV, CPV-2 and CAV trigger an immunological memory of at least seven years," he explains. (Studies testing the duration of immunity for rabies shots show it lasts about three years.)

For these reasons, Schultz suggests that dogs receive rabies shots every three years (as is required by law in most states) and the other core vaccines no more frequently than every three years.

Some non-core vaccines, on the other hand, have a much shorter duration of immunity, lasting around one year. But, as Schultz points out, not every dog should get these types of vaccines, because not every dog is at risk for exposure.

Today, many vaccinated dogs receive a shot for Lyme disease. However, Schultz says that the ticks carrying the Lyme disease pathogen can be found in only a few regions of the United States. More importantly, Schultz adds, "The vaccine can cause adverse effects such as mild arthritis, allergy or other immune diseases. Like all vaccines, it should only be used when the animal is at significant risk." He notes that the Veterinary Medical Teaching Hospital at the UW-Madison School of Veterinary Medicine rarely administers the Lyme disease vaccine.

Another common vaccine that Schultz says is unnecessary protects against "kennel cough," an often mild and transient disease contracted during boarding or dog shows. "Most pet dogs that do not live in breeding kennels, are not boarded, do not go to dog shows and have only occasional contact with dogs outside their immediate family," Schultz recommends, "rarely need to be vaccinated or re-vaccinated for kennel cough."

Schultz says that it's important for veterinarians to recognize an individual dog's risk for developing a particular disease when considering the benefits of a vaccine. "Vaccines have many exceptional benefits, but, like any drug, they also have the potential to cause significant harm." Giving a vaccine that's not needed, he explains, creates an unnecessary risk to the animal.

Recommending that dogs receive fewer vaccines, Schultz admits, may spark controversy, especially when veterinarians rely on annual vaccines to bring in clients, along with income.

But, as he mentions, annual visits are important for many reasons other than shots.

"Checking for heartworm, tumors, dermatological problems and tooth decay should be done on a yearly basis," he says. "Plus, some dogs, depending on their risk, may need certain vaccines annually." Rather than vaccinating on each visit, veterinarians can use a recently developed test which checks dogs' immunity against certain diseases.

Schultz adds that veterinarians who have switched to the three-year, instead of annual, vaccination program have found no increase in the number of dogs with vaccine-preventable diseases.

"Everyday, more and more people in the profession are embracing the change," notes Schultz. And, that the new vaccination guidelines supported by the AAHA, along with the task force members representing the American Colleges of Veterinary Internal Medicine, Veterinary Microbiology and the American Association of Veterinary Immunologists, is evidence of just that.

[\(View a full news release version of this story\)](#)

Purdue University and Hayward Foundation Study on Vaccines

For 15 years, some Great Dane breeders have postulated the adverse effects of the aggressive use of vaccines on the immature (puppy) immune system. This concern led these breeders to a more conservative approach to vaccinations, the monitoring of antibody titers before boosters were given, or in some cases safe alternatives to conventional practice were invoked.

Over the last two years a cutting edge scientific research study has been conducted at Purdue University, under the direction of Larry Glickman, VDM,PhD and his associate Dr. Harm HogenEsch (Curricula Vitae and the impressive credentials of these scientists are included for your review). The study proposal is to investigate the autoimmune responses to vaccines in dogs. This study, at Purdue, was conceptualized by Great Dane people, and subsequently funded (\pm \$175,000.00) by a Great Dane friendly organization called the John & Winifred Hayward Foundation. Originally, it was considered ideal to conduct the study with a colony of Great Danes. However, the feasibility and practicality of maintaining and housing a controlled group of Great Danes was economically out of reach. Therefore, the study identified the Beagle as the canine of choice, but recognized the applications of any results to the canine population as a whole, including Great Danes.

The study has produced some dramatic results, with concrete and clear evidence that there are adverse events elicited as a result of the use of vaccines following manufacturer's recommendations. (Review the following article for a more complete picture of study results.)

In Dr. LaRosa's (Trustee of the Hayward Foundation) article (following), he states that a number of autoantibodies to several critical proteins and DNA were identified in the vaccinated group. Identifying these autoimmune antibodies, and monitoring their titers may lead, in addition to the thyroiditis conditions, a better understanding of the role of vaccines in soliciting adverse events that contribute to problematic conditions observed in the Great Dane, such as Cardiomyopathy, and Various Bone related disorders.

The positive outcomes of the study at Purdue will hopefully be the identification of a number of genetic markers that will facilitate a brighter and healthier future for our breed, as well as recommendations for safer vaccines and their uses.

The Hayward Foundation is limited by its charter to investigate Human Genetic Disorders, therefore its ability to significantly fund this study further falls outside of the realm of its charter. However, the Trustees of the Hayward Foundation have committed an additional \$25,000.00 to help in the maintenance of this colony until further funding is identified.

Glickman has stated that the colony will be lost unless further and immediate funding is identified to maintain the colony. Dr. Glickman is applying to the AKC Foundation and the NIH (National Institute of Health) for funding. Two years of research will not be lost but the future of this work which relies on maintaining the colony for some time to come will be lost.

VACCINE SAFETY (?)

A Possible Etiology of Autoimmune Diseases

By : William R. La Rosa, M.D. (Trustee)

The Hayward Foundation is dedicated to research and eradication of human genetic diseases. There is much anecdotal hearsay about the safety of vaccines in dogs as well as in humans. The Vaccine Safety Committee recently emphasized the need for more definitive research on possible adverse effects during the development of new vaccines and vaccine combinations. (National

PROGRESS REPORT

Effects Of Vaccination On The Endocrine And Immune Systems of Dogs

Phase II

Purdue University, November 1, 1999

Drs. Harm HogenEsch and Larry T. Glickman

Concern has been growing among owners, breeders, and veterinarians that current vaccines cause immune-mediated diseases in dogs. Vaccination is highly effective in preventing infectious disease, but the safety of many vaccines and the frequency of their administration are being questioned. The Vaccine Research Group at the Purdue University School of Veterinary Medicine has been conducting several studies to address these issues. In one such study, we are trying to determine if current vaccines cause changes in the immune system of the dog that will eventually result in life-threatening immune mediated diseases.

The Beagles being used in this study were bred by us and then vaccinated following a typical schedule used for pet dogs. These Beagles have been closely followed for three years with blood and other tests performed at regular intervals.

To date, routine vaccination of these Beagles has not caused any overt signs of clinical disease. **However, the blood of all the vaccinated dogs contains significantly elevated concentrations of antibodies directed against proteins that are present in commercial vaccines as contaminants of the production process. None of the unvaccinated control dogs has had a similar increase in these antibodies.** These proteins are typically of bovine origin since fetal calf serum is used to grow the viruses for vaccine production. The close similarity in structure of the bovine proteins to dog proteins results in a situation whereby the antibodies produced by the vaccinated dogs may cross-react with dog tissue proteins in a process similar to autoimmunity.

Experiments in other animal species suggest that these autoantibodies might eventually cause diseases in the vaccinated animals, but these Beagle dogs will need to be followed longer to determine if this is the case. In addition, the pattern of individual responses of the immune system to vaccination in this study suggests a possible genetic predisposition to autoimmunity.

The study described above is unique in that it attempts to determine if vaccinations that dogs routinely receive throughout their life have a cumulative adverse effect. The only way this is possible is under experimental conditions where one group of dogs remains unvaccinated. The vaccine studies we are conducting both in Beagles and in pet dogs under natural conditions are designed to answer the question: **"Does vaccination play a role in autoimmunity, how safe are currently used vaccines, and how often should these vaccines be administered?"**

FURTHER UPDATE: In March, 2000 I personally contacted Dr. Glickman regarding this study and in the course of events that followed; Dr. Glickman has agreed to extend the study to our breed, the Great Dane. In the initial conversations, Dr. Glickman postulated that to continue the study further would cost in the neighborhood of one to two million dollars. When I told him that we have a number of Great Danes that are totally unvaccinated and could act as 'controls'. he came back very excited and proposed the further study with Great Danes.

June 2002

Funding is now in place for this study , thanks to the Great Dane Health Foundation. An 11 page questionnaire was sent out to all Great Dane participants and returned to Purdue University where blood testing kits were mailed out.

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[Click here: haywardstudyonvaccines](#) Here's one study being done on autoimmunity and vaccines....did you know that there is a TON of info on vaccines and autoimmunity in humans. I think this link to this website is the only study being done for the dogs.BTW....I just read that there is a link to the MMR shot kids receive and Autism. There is also a strong link with Multiple sclerosis and vaccines.

Here is part of this webpage....

Autoimmune diseases in dogs are clinically similar to those in humans. We hope that Veterinary and Medical Schools will continue and expand these preliminary research studies. Our companion dogs are crashing all around us and maybe we are now finding one of the sources of the problems. It has been so easy to point fingers at breeders but they may not be entirely at fault. Let us continue this important research to help our future generations of dogs and possibly children. Yes, indiscriminate breeding can genetically predispose the dog but is the trigger mechanism indiscriminate vaccinations ?

My personal interpretation of the above information in brief is: (from Dr. La Rosa MD)

- 1. These studies appear to support the conclusions of some breeders that multiple vaccinations may be harmful to dogs. Be cautious and keep current in the scientific literature.*
- 2. Current vaccines induce autoantibodies. Contaminants may be part of the problem.*
- 3. We need to research and explain the mechanism. Does it alter the DNA causing genetic abnormality or is the susceptible gene already in place? Can we find the genetic marker to avoid the adverse reaction of vaccination ?*
- 4. The dog is a good model for study because different breeds already have susceptibility to specific diseases and genetic markers will be easier to find than in other diverse animals (and humans).*
- 5. What is the solution or cure, and especially how is this applicable to humans.*

6. Most current vaccines are effective in preventing disease, but they may be administered more frequently than is actually required.

NEW!!! VACCINATION PROTOCOL

by Dr. Jean Dodd

All of the 27 Vet

Universities in the US have followed the immunization protocol as suggested by Dr. Dodd for years.

All of these Hospitals will be changing their Vaccination Programs apparently. This is welcome news and you should print this out and take it with you to your Vet should you need reinforcement against over-vaccination.

VACCINATION NEWSFLASH [CIMDA support] RE; J DODDS VACCINE PROTOCOL

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mothers milk. This natural protection can last 8 - 14 weeks. Puppies & kittens should NOT be vaccinated at LESS than 8 weeks. Maternal

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first highly effective vaccine. Vaccinations given 2 weeks apart SUPPRESS rather than stimulate the immune system. A series of vaccinations is given starting at 8 weeks and given 3-4 weeks apart up to 16 weeks of age. Another vaccination given sometime after 6 months of

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Vaccinosis

[Read Margaret Rivera's Vaccinosis Story here](#)

Vaccinosis - the malaise (fever, muscular aches, bone pain, prostration, etc.) as the result of being vaccinated."

Definition From: ~A Dictionary of Homeopathic Medical Terminology~

Article Taken with permission from:

~Tiger Tribe Sept/Oct 1992~

Consider this scenario: You take your five year old cat to the vet to have his teeth cleaned. The vet suggests that, while the animal is there, they give all the yearly shots: the three in one, the feline leukemia booster and the rabies vaccination. So, while still under the effects of the anesthesia, your cat's immune system is barraged with this multiple-virus "protection" program. For weeks afterwards, the cat "doesn't seem the same, but you can't quite tell why.

Seven months later the cat develops a tumor in his chest, and within a month it grows so rapidly that the cat has to be put to sleep.

While the conventional veterinary community might protest any claim that there is a connection between the vaccinations and the tumor, something inside you knows differently. What a vaccination is supposed to do is mimic the process of disease itself. When a weakened version of a virus is injected into the body, the immune system is "tricked" into producing antibodies and the T-cells and B-cells that protect the body against a particular disease. If the animal is exposed to the virus in the future, the body remembers the virus and responds with the appropriate antibodies.

John Fudens, DVM, says he does not have a problem with the concept of vaccination. "the problem I have is with the method. An injection is totally

unnatural and artificial procedure. "No disease, short of being bitten by a rabid dog, is injected by needle. What happens in this case is that the disease totally bypasses the natural mechanism that is set up by the mouth and the respiratory system to resist most communicable diseases."

Richard Moskowitz, MD, in his remarkable article, "The Case Against Immunization" carries this observation further by pointing out that the creation of circulating antibodies "is only one, and by no means the most important" of the mechanisms by which the body handles a viral attack. In fact, he says, if we vaccinate, we have short circuited very important primary responses to disease and have "accomplished what the entire immune system seems to have evolved in order to prevent: we have placed the virus directly into the blood, and given it free and immediate access to the major immune organs and tissues, without any obvious way of getting rid of it."

Also, what vaccination protocols fail to take into consideration is the unique state of an animal's immune system. We can never know how long whatever protection is gained from the vaccination will last or even if it will be effective. The only true immunity occurs when an animal gets a disease and survives. It is then immune to that particular disease for life.

Dr Fudens points out that "with the natural disease process, the virus or bacteria doesn't include the antibiotics or the fungicides that are used to protect the vaccine against bacterial contamination. And it doesn't include aluminum sulfate, mercuric oxide, or any of the chemical substrates that are used to carry the virus particles into the body in the injection procedure. "And certainly you don't have the multitude of viruses coming in as one group or one entity. You pick them up one at a time. So when you have four, five, six or even seven viruses, it's a totally unnatural process."

Dr. Fudens prefers to stimulate the immune system to produce antibodies with the use of homeopathic nosodes, disease substances that are diluted to the point where only the "energy" of the disease is left. "It still accomplishes the same thing," he says, "but you don't have the other contaminants which cause all the types of damage we see."

Dr Fudens, who has practiced veterinary medicine for over twenty five years, says that the worst reactions to vaccinations he sees are to the feline leukemia vaccine. "These animals will come in with severely depressed immune systems. They will actually mimic the disease they were vaccinated for. I vaccinated with the leukemia vaccination when it first came out and I can't tell you how many cats came back and I'd swear they had leukemia. "Every skin problem you see is due to vaccinations, without fail. Later on in life, arthritic situations and degenerative spinal diseases are the result of vaccinations. And I am convinced that FUS in cats is also vaccination-related. The rabies vaccination in dogs and cats causes so many problems it isn't funny. It causes personality changes, skin changes,

damages the thyroid and endocrine systems. It lowers the immune system tremendously, and after that, of course, the animal becomes fair game for just about any disease."

According to Dr Fudens, cats, as a species, are more susceptible and sensitive than dogs to the unnatural effects of procedures like vaccination. "The cat is a fine and sensitive animal because of its protein and nutritional requirements. The more strict your requirements for a certain level of life and health, the more susceptible you are to conditions that would damage or change it. The cat is magnificent in many respects, but it is also very vulnerable. It can only withstand a minimum level of insults until the immune system breaks down."

In an article published in the August 1985 Prevention Magazine, Richard Pitcairn, DVM, said "The more I learn about the nature of the immune system, the more concerned I am about the increasing number of vaccine viruses we are giving animals and possible repercussions that may result."

Five years later at a workshop on Chronic Diseases in Raymond, Maine, Dr. Pitcairn seemed even more emphatic about the effects of vaccinations: "Another big reason for the increase in Psora (the homeopathic term for the disease which underlies all chronic illness) besides the allopathic drugs suppressing disease, is the use of vaccinations. I think that's the reason so many diseases are coming out at their base to be auto-immune dysfunction. They (the vaccines) hit it (the immune system) hard, they disorient it, confuse it, and it starts reacting wrongly."

In addition, Dr Pitcairn has observed the reaction of many animals to the homeopathic remedy Thuja, often used to counteract negative reactions to vaccinations in both people and animals. "Thuja causes improvement in so many animals it makes you wonder what we're doing with this vaccination stuff."

In addition to seeing the side effects of vaccinations experienced by individual animals, many homeopaths question whether or not conventional vaccinations are producing a population-wide suppression of disease that has serious implications for the future health of all creatures. What is clear, according to Jeffrey Levy, DVM, is that a pattern exists where we see the elimination of one disease (feline distemper for example, or smallpox in humans) followed by the emergence of a worse disease (feline leukemia for cats, AIDS for humans). While one can place any kind of interpretation one wants on these facts, says Levy, the pattern is quite clear.

In responding to the claim that side-effects of vaccinations are a necessary evil for the greater good of society, Dr Levy states "It's not the greater good. You're protecting the individuals artificially, and in doing so degrading the health of the population at large."

Richard Moskowitz, in the essay previously mentioned, seems to support Levy's assertion: "At the bottom, I have always felt that the attempt to eradicate entire microbial species from the biosphere must inevitably upset the balance of nature in fundamental ways we can as yet scarcely imagine. "The fact is that we have been taught to accept vaccination as a sort of involuntary communion, a sacrament of our own participation in the unrestricted growth of scientific and industrial technology, utterly heedless of the long-term consequences to the health of our species, let alone to the balance of nature as a whole".

While Dr Levy recommends the use of homeopathic nosodes to his clients, he says that there are limitations to vaccinating even with these side-effect-free remedies. "The nosodes are effective and safe, but what they are doing essentially is putting a band-aid over a susceptibility. Somewhere down the line you are going to have to deal with that susceptibility in one disease form or another. "So, from my perspective, the alternative to using nosodes is to treat the case constitutionally (the use of single remedies that match the total symptom picture of the chronic or acute state of health). When you do this, you improve the immunity, resistance to disease, and so forth. Basically, it offers the same and perhaps greater protection than the nosodes, but it does it from the inside out, rather than pasting a bandaid over the top."

Mitchell Fleisher, MD, in a recent letter to Yoga Journal, would seem to support the same perspective: "The vast majority of the professional classical homeopathic community does not advise the use of homeopathic or allopathic vaccines in the long-term prevention of communicable diseases. Rather professional homeopaths would prescribe a single remedy, based upon the totality of the individual's symptoms... that is intended to strengthen the immune system and assist the defense mechanism in overcoming disease."

The letter goes on to point out that there is a great deal of evidence for homeopathy's ability to handle viral epidemics. During the 19th century, homeopathy enjoyed a surge of popularity when it was found to be extremely effective in dealing with the epidemic diseases that spread throughout the country. In fact, during a cholera epidemic in Cincinnati in 1849, only 3 percent of homeopathic patients died, compared to 48-60% of the conventionally treated patients.

Dr Levy points out that if given immediately after exposure to a known disease, nosodes can prevent the development of clinical disease. Of course, we are often unaware when our animal companions are exposed to diseases. But Dr. Levy offers hope, "Viral diseases such as feline leukemia, feline infectious peritonitis...are usually incurable with conventional medical treatment (antibiotics, steroids, etc.). However, they frequently respond very quickly and favorably to homeopathic treatment."

Deciding not to vaccinate or to use the homeopathic nosodes can be difficult. **W. Jean Dodds, DVM**, ([see vaccination protocol](#)) has begun studies on the effectiveness of nosodes, funded in part by the American Holistic Veterinary Medical Association. Hopefully, some solid evidence that these remedies work will give people alternatives to the legally required conventional vaccines. But of course, even the nosodes, as free from side-effects as they are, do not guarantee absolute freedom from disease. Only a perfectly healthy creature, human or animal, can consider this possibility. So making a decision implies taking more responsibility for your cat's health. Such responsibility will probably involve nutritional support, as well as alternative methods of dealing with viral and bacterial infections, should they arise.

If you give all the vaccinations a conventional vet suggests and your cat develops a tumor, certainly no one is going to blame you. "You did all you could" would probably be the standard condolence. Perhaps some might blame all the pollution in our environment. But we may be looking in the wrong place for the substance of this pollution. Perhaps, as has often been the case, "the enemy is us." With our pride in science's ability to do better than nature, we may just have created another Frankenstein that lurches beyond our control.

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Consider Before You Vaccinate

(Taken from Tiger Tribe Sept/Oct 1992)

1) If you vaccinate with conventional vaccines, try not to allow your vet to use anything but a killed vaccine (however, this option may not always be available). Modified live vaccines are considered the most dangerous by experts in immunology. They have the ability to replicate and then mutate in the body and are banned in Scandanavian countries.

2) Although it might be less expensive, do not vaccinate for several diseases at once. The rabies vaccine, especially, should be given seperatly from other vaccines. (6 week intervals)

3) If you vaccinate conventionally, consider using homeopathic remedies to counteract any potential adverse affects form the conventional vaccines. **Jeff Levy, DVM**, recommends that the appropriate nosode (made from the disease you are vaccinating for) be given immediately after the vaccination. The next day give Thuja 30C, followed one week later by Sulphur 6X for one week. In most states the only "required" vaccination is rabies. The appropriate nosode for this would be Lyssin30C.

4) Don't vaccinate for feline leukemia. Dr Levy has pointed out that there is a great deal of evidence that this vaccine is both dangerous and ineffective.

5) Don't vaccinate if an animal is in poor health, pregnant, undergoing surgery, or especially when also receiving a corticosteroid injection for allergies.

6) If you decide to use the nosodes, you will need to contact a veterinarian who uses homeopathy in his/her practice. While most homeopathic remedies are available over-the-counter, the nosodes are available only by prescription.

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Killed Versus MLV Vaccines

(Taken from Pure-bred Dogs/American Kennel Gazette)

Dr Christine Wilford's comments about vaccines in the Veterinary News section of the June Gazette were timely and important. I'd like to provide further considerations for your readers about the killed versus modified-live virus (MLV) vaccine issue.

The risks posed by MLV vaccines were reviewed in a landmark paper by Tizard (JAVMA, Vol.196, 1851-1858, June 1990). It is well recognized by experts in the field that a properly constituted killed vaccine is always preferable to one of MLV origin. The primary reasons (for this preference) reflect safety to the host and the environment. Killed vaccines do not replicate in the vaccinated animal, do not carry the risk of residual virulence and do not shed attenuated viruses into the environment. Furthermore, killed vaccines do not bear the risk of contamination with adventitial viruses present in the tissue culture cells used to grow MLV vaccines.

Finally, Dr Wilford's statement that "modified-live parvo vaccines pose no threat to dogs" is simply overstated. They can trigger autoimmune disorders of blood cells (platelets, red blood cells), bone marrow failure and immunosuppression in genetically or physiologically susceptible animals. Vaccines, while necessary and generally safe and efficacious, can be harmful or ineffective in selected situations.

W Jean Dodds, DVM, Santa Monica, CA

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Training and Vaccinations

[Lyn Richards](#)

This subject is one of my "pet" (pun intended) peeves. I deal with Vets and Vet Techs on a daily basis who instruct their students to keep the pup "home and away from strange dogs" until the age of 5 months or so.

Well, guess what? Being that our breed (I have Danes for those of you who do not know me) weighs about 70-80 pounds by this age, the poor unsuspecting owners are literally being bowled over, never mind dragged around by these poor unsocialized Dane pups who are just overwhelmed and thrilled by all the new smells, sights and sounds. Add the inundation with strange dogs and the mix CAN be a lethal one.

The owners can begin training their pups at the age of 8 weeks, even if the pups only lie in the owners arms and OBSERVE classes for the first few weeks. I offer free unlimited classes for beginner dog folks, and I don't run separate pup kindergartens. I do keep the bigger, older dogs in a different class from the "pup" aged dogs, but that is the only separation I have.

I have had great success with this method, as the very young pups learn a LOT from just watching, and the owners comment that the pups tend to be more attentive as they get older.

Separating pups from the world for the first 4 months of life, is to me likened to parents who isolate their little babes from other kids from birth thru age 4 or 5, then the poor kid spends the first 2 years of day care or kindergarten in bed with colds and illnesses.

My breeder goes one step further.....if the pups are exposed to a lot of strangers as young pups (3 weeks old) the mothers immune influence is still strong in the pups, and they have the opportunity to build up their own immune systems while being protected by mom.

Once the litter is healthily established (The breeder can see that there are no failing or weak pups) she invites folks to come visit and handle the pups. They are extremely well socialized and healthy.....all of her dogs.

On vaccines, I have been in constant touch with Jean Dodds, DVM and am a believer that we are WAY over-vaccinating our dogs, to the point of causing immune system failures. I am not ready to eschew vaccinations all together, but I DO use Jean Dodds modified vaccination schedule, coupled with homeopathic remedies.

When questioned directly, most vets would agree that far more of their clients die or are rehomed from behavior problems, particularly aggression, than die from

infectious diseases. I think prenatal and postnatal care in general and at what age the puppies are released to new homes are more important than finishing vaccinations before permitting socialization.

[Lore Haug, DVM](#)

VACCINATION NEWSFLASH

I would like to make you aware that all 27 veterinary schools in North America are in the process of changing their protocols for vaccinating dogs and cats.

Some of this information will present an ethical & economic challenge to vets, and there will be skeptics. Some organizations have come up with a political compromise suggesting vaccinations every 3 years to appease those who fear loss of income vs those concerned about potential side effects. Politics, traditions, or the doctor's economic well being should not be a factor in medical decision.

NEW PRINCIPLES OF IMMUNOLOGY

"Dogs and cats immune systems mature fully at 6 months. If a modified live virus vaccine is given after 6 months of age, it produces an immunity which is good for the life of the pet (ie: canine distemper, parvo, feline distemper). If another MLV vaccine is given a year later, the antibodies from the first vaccine neutralize the antigens of the second vaccine and there is little or no effect. The titer is not "boosted" nor are more memory cells induced.

"Not only are annual boosters for parvo and distemper unnecessary, they subject the pet to potential risks of allergic reactions and immune-mediated hemolytic anemia.

"There is no scientific documentation to back up label claims for annual administration of MLV vaccines

"Puppies receive antibodies through their mothers milk. This natural protection can last 8-14 weeks. Puppies & kittens should NOT be vaccinated at LESS than 8 weeks. Maternal immunity will neutralize the vaccine and little protection (0-38%) will be produced. Vaccination at 6 weeks will, however, delay the timing of the first highly effective vaccine. Vaccinations given 2 weeks apart suppress rather than stimulate the immune system. A series of vaccinations is given starting at 8 weeks and given 3-4 weeks apart up to 16 weeks of age. Another vaccination given sometime after 6 months of age (usually at 1 year 4 mo) will provide lifetime immunity.

CURRENT RECOMMENDATIONS FOR DOGS

"Distemper & Parvo. According to Dr. Schultz, AVMA, 8-15-95, when a vaccinations series given at 2, 3 & 4 months and again at 1 year with a MLV, puppies and kitten program memory cells that survive for life, providing lifelong immunity.

"Dr. Carmichael at Cornell and Dr. Schultz have studies showing immunity against challenge at 2-10 years for canine distemper & 4 years for parvovirus. Studies for longer duration are pending.

"There are no new strains of parvovirus as one mfg. would like to suggest. Parvovirus vaccination provides cross immunity for all types.

"Hepatitis (Adenovirus) is one of the agents known to be a cause of kennel cough. Only vaccines with CAV-2 should be used as CAV-1 vaccines carry the risk of "hepatitis blue-eye" reactions & kidney damage.

"Bordetella Parainfluenza: Commonly called "Kennel cough", recommended only for those dogs boarded, groomed, taken to dog shows, or for any reason housed where exposed to a lot of dogs. The intranasal vaccine provides more complete and more rapid onset of immunity with less chance of reaction. Immunity requires 72 hours and does not protect from every cause of kennel cough. Immunity is of short duration (4 to 6 months).

RABIES

There have been no reported cases of rabid dogs or cats in Harris, Montgomery or Ft. Bend Counties [Texas], there have been rabid skunks and bats so the potential exists. It is a killed vaccine and must be given every year.

Lyme disease is a tick born disease which can cause lameness, kidney failure and heart disease in dogs. Ticks can also transmit the disease to humans.

The original Ft. Dodge killed bacteria has proven to be the most effective vaccine.

Lyme disease prevention should emphasize early removal of ticks. Amitraz collars are more effective than Top Spot, as amitraz paralyzes the tick's mouth parts preventing transmission of disease.

VACCINATIONS NOT RECOMMENDED Multiple components in vaccines compete with each other for the immune system and result in lesser immunity for each individual disease as well as increasing the risk of a reaction.

Canine Corona Virus is only a disease of puppies. It is rare, self limiting (dogs get well in 3 days without treatment). Cornell & [Texas A& M](#) have only

diagnosed one case each in the last 7 years. Corona virus does not cause disease in adult dogs.

"Leptospirosis vaccine is a common cause of adverse reactions in dogs. Most of the clinical cases of leptospirosis reported in dogs in the US are caused by serovars (or types) grippityphosa and bratislava. The vaccines contain different serovars canicola and icterohemorrhagica. Cross protection is not provided and protection is short lived. Leptospirosis vaccine is immuno-suppressive to puppies less than 16 weeks.

NEW RECOMMENDATIONS FOR CATS

Feline vaccine related Fibrosarcoma is a type of terminal cancer related to inflammation caused by rabies & leukemia vaccines. This cancer is thought to affect 1 in 10,000 cats vaccinated. Vaccines with aluminum adjuvant, an ingredient included to stimulate the immune system, have been implicated as a higher risk.

We now recommend a non-adjuvanted rabies vaccine for cats. Testing by Dr. Macy, Colorado State, has shown this vaccine to have the lowest tissue reaction and although there is no guarantee that a vaccine induced sarcoma will not develop, the risk will be much lower than with other vaccines.

Program injectable 6 mo flea prevention for cats has been shown to be very tissue reactive & therefore has the potential of inducing an injection site fibrosarcoma. If your cat develops a lump at the site of a vaccination, we recommend that it be removed ASAP, within 3-12 weeks.

Feline Leukemia Virus Vaccine This virus is the leading viral killer of cats. The individuals most at risk of infection are young outdoor cats, indoor/outdoor cats and cats exposed to such individuals. Indoor only cats with no exposure to potentially infected cats are unlikely to become infected. All cats should be tested prior to vaccination.

Cats over one year of age are naturally immune to Fel.V whether they are vaccinated or not, so annual vaccination of adult cats is not necessary.

The incubation period of Feline leukemia can be over 3 years, so if your cat is in the incubation state of the disease prior to vaccination, the vaccine will not prevent the disease.

Feline Panleukopenia Virus Vaccine. Also called feline distemper is a highly contagious and deadly viral disease of kittens. It's extremely hardy and is resistant to extremes in temperature and to most available disinfectants. Although an effective treatment protocol is available, it is expensive to treat. Because of the serious nature of the disease and the continued presence of virus in the

environment, vaccination is highly recommended for all kittens. Cats vaccinated at 6 month or older with either killed or MLV vaccine will produce an immunity good for life.

Adult cats do NOT need this vaccine.

"Feline Calicivirus/Herpesvirus Vaccine. Responsible for 80-90% of infectious feline upper respiratory tract diseases. The currently available injectable vaccines will minimize the severity of upper respiratory infections, although none will prevent disease in all situations. Intranasal vaccines are more effective at preventing the disease entirely. Don't worry about normal sneezing for a couple of days. Because intranasal vaccines produce an immunity of shorter durations, annual vaccination is recommended.

VACCINES NOT RECOMMENDED Chlamydia or pneumonitis. The vaccine produces on a short (2 month) duration of immunity and accounts for less than 5% of upper respiratory infections in cats. The risks outweigh the benefits.

Feline Infectious Peritonitis. A controversial vaccine. Most kittens that contract FIP become infected during the first 3 months of life. The vaccine is labeled for use at 16 weeks. All 27 vet schools do not recommend the vaccine.

Bordetella. A new vaccine for feline bordetella has been introduced. Dr. Wolfe of [Texas A&M](#) says that bordetella is a normal flora and does not cause disease in adult cats. Dr. Lappin of Colorado State says that a review of the Colorado State medical records reveals not one case diagnosed in 10 years.

NEW DEVELOPMENTS

Giardia is the most common intestinal parasite of humans in North America, 30% or more of all dogs & cats are infected with giardia. It has now been demonstrated that humans can transmit giardia to dogs & cats & vice versa.

Heartworm preventative must be given year round in Houston.

VACCINES BADLY NEEDED "New vaccines in development include: Feline Immunodeficiency virus and cat scratch fever vaccine for cats and Ehrlichia [one of the other tick diseases, much worse than Lymes] for dogs.

THE VIEW FROM THE TRENCHES; BUSINESS ASPECTS

"Most vets recommend annual boosters and most kennel operators require them. For years the pricing structure of vets has misled clients into thinking that the inherent value of an annual office visit was in the "shots"..they failed to emphasize the importance of a physical exam for early detection of treatable diseases.

It is my hope that you will continue to require rabies & Kennel cough and emphasize the importance of a recent vet exam. I also hope you will accept the new protocols and honor these pets as currently vaccinated. Those in the boarding business who will honor the new vaccine protocols can gain new customers who were turned away from vet owned boarding facilities reluctant to change.

CONCLUSION Dogs & cats no longer need to be vaccinated against distemper, parvo, & feline leukemia every year. Once the initial series of puppy or kitten vaccinations and first annual vaccinations are completed, immunity from MLV vaccines persists for life. It has been shown that cats over 1 year of age are immune to Feline Leukemia whether they have been vaccinated or not. Imagine the money you will save, not to mention less risks from side effects.

PCR rabies vaccine, because it is not adjuvanted, will mean less risk of mediated hemolytic anemia and allergic reactions are reduced by less frequent use of vaccines as well as by avoiding unnecessary vaccines such as K-9 Corona virus and chlamydia for cats, as well as ineffective vaccines such as Leptospirosis and FIP.

Intranasal vaccine for Rhinotracheitis and Calici virus, two upper respiratory viruses of cats provide more complete protection than injectable vaccines with less risk of serious reactions.

The AAHA and all 27 veterinary schools of North America are our biggest endorsement for these new protocols.

Dr. Bob Rogers

Please consider as current on all vaccinations for boarding purposes

DOGS

Initial series of puppy vaccines

1. distemper, hepatitis, parvo, parainfluenza - 3 sets one month apart

- concluding at 16 weeks of age.
2. Rabies at 16 weeks of age (later is better)
 3. Bordetella within last 4-6 months

First annual (usually at 1 year and 4 months of age)

1. DHP, Parvo, Rabies
2. Bordetella within last 4-6 months

2 years or older

1. Rabies with in last year
2. Bordetella within last 4-6 months
3. DHP & Parvo given anytime over 6 months of age, but not necessarily within the last year.

Recommended: Physical exam for transmissible diseases and health risks,

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