



Dog Care

Help And Information

Dog Training

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How To Take Your Dogs Temperature

A half minute short bulbed clinical thermometer is necessary. See that the mercury is well shaken down to 90°F. or so. The bulb of the thermometer should be lightly greased with vaseline and gently inserted into the rectum for about two inches. A restless animal can be held by an assistant. Keep the instrument in position for a full minute, withdraw, wipe with cotton wool dipped in antiseptic, and read the scale. A dog's temperature is best taken when he has been resting for half an hour.

When the thermometer is in daily use (during an illness, for example) it should be kept in a little glass jar—the kind used for meat pastes is suitable with a little cotton wool at the bottom, and diluted antiseptic. Be careful the latter is not too strong as it can affect the marking on the instrument. Never use hot water for washing.

Variations In Temperature

The normal temperature of a dog is considerably higher than the human—roughly 101•5°F. Variations are, however, perfectly possible in health, and some animals have a temperature as low as 100°F. Puppies tend to run higher normal temperatures than adults and an excitable dog may have a slight temperature for an hour or two even when perfectly well.

When a dog looks listless and dull, and refuses his food, the temperature should always be taken. If it is over 102.5°F . the veterinary surgeon should be informed. It may be nothing at all, but so often the virus diseases such as hard-pad and distemper begin in a very insidious way, so one cannot be too careful.

Again, the temperature should be taken daily for a week after whelping. There is often a slight rise—to 102.5°F .—and of this no notice need be taken, but if it rises to 103°F . or over, and the bitch seems shivery and disinclined for food, the veterinary surgeon must be told at once. Possibly a dead puppy or afterbirth has not been expelled and, if retained, it can be the cause of septicaemia in a very short time.

During illness the temperature should be taken at least twice daily, at the same times if possible, and the result written down. This is most important as the variations in temperature in some diseases and conditions are of great significance.

Broadly speaking, any rise over about 102.5°F . can be regarded as fever. Slight fever (or mild pyrexia) is from 102.5° - 103.5°F ., fever from 103.5° - 104.5°F . and high fever (or hyperpyrexia) from 104.5°F . upwards.

Sometimes slight fever, particularly in hard-pad, is more dangerous than fever or high fever. A very high temperature— 105.5° - 106.5°F .—should never be ignored and, apart from the treatment given for the disease of which the high temperature is merely a symptom, some attempt must be

made to reduce it. This can usually be done by ice packs (see Concussion) , aspirin, and plenty of fluids, but the veterinary surgeon attending the case may suggest or employ some other measure.

A sub-normal temperature can be more dangerous than high fever. After specific treatment in the virus diseases the temperature occasionally drops to 99°F. or so, but no notice need be taken provided the animal is kept warm. The temperature in cases of shock and collapse is usually very low—from 97°F. to 98.5°F. or so—and in cases of internal haemorrhage—an occasional and disquieting phenomenon in leptospiral jaundice and Rubarth's disease—the temperature can drop even lower, and the patient is severely collapsed with blanched mucous membranes.

A fatal outcome is common in such cases. Temperatures usually drop gradually to normal in the course of a few days or weeks, although they may rise again after a short intermission. (This is typical in distemper when, after a brief initial period of fever, the temperature returns to normal for about a week, then rises again.) When the fall is gradual it is termed a fall by "lysis", but when (as sometimes happens) it is rapid and dramatic within twenty-four hours or less it is known as a "crisis". In the old days, before the antibiotics and sulpha drugs were known, the high temperature in pneumonia cases in humans often ended by a crisis.

Fever must not be looked upon as an unmitigated evil as it at least shows that the body is putting up a strong resistance to the harmful infection causing the disease.

Even when the temperature returns to normal it should be taken daily for a week in case of a relapse, when it will rise again.

AFTER-CARE OF OPERATION CASES

The care of post-operation cases will depend to a large extent on the nature and severity of the operation, and whether surgical measures have been carried out as the culmination of a long, serious illness or in an animal whose general condition is excellent. Constitutional disturbance is either absent or very slight where a minor operation is performed (i.e., to correct inverted eyelids) but may be very great in a serious abdominal condition.

If the animal needs much in the way of skilled attention—difficult dressings, stimulants, and so on—he will probably be kept at the veterinary hospital or clinic as long as these are required. Similarly, if the dog's post-operative condition is such that removal would be dangerous he will be kept until it is safe for him to return to his owner.

Dogs, particularly pet dogs, usually recover more quickly at home, and veterinary surgeons for this reason try to return an animal as speedily as possible. The anxious amateur nurse may have the dog's care on her

hands sooner than she imagined!

If feasible, she should try to find out at the hospital whether the dog has to be kept as much at rest as possible, and what his general condition is. Dogs, unlike human patients, are not confined to bed as a rule after an operation unless they are so weak or shocked that rest and quiet are essential, in which case they will be kept in the hospital. Movement within reason is beneficial, and recent research has shown that human patients, too, are often better if exercise is encouraged from the start.

The bedding for a post-operative case should be freshly laundered—a light-coloured or white blanket is useful.

Diet in post-operation cases.

Diet should be light and confined to fluids for a few days, and glucose should be added to all drinks. There is always loss of blood with which to contend; shock may still be present in a mild degree and fluid mixed with glucose will do much to remedy this. The return to normal diet should be gradual by way of such light, easily digested fare as baked custards, white fish boiled in milk, brown bread and milk, lightly boiled eggs, etc. Virol is excellent for convalescent patients, whether medical or surgical.

When solid diet is permitted this should be especially nourishing—for instance, four meals a day; breakfast of cereal and milk; for mid-day feed, a generous allowance of raw meat or boiled rabbit plus whole meal and halibut oil; for tea, an egg beaten up in milk, and for the evening meal, raw meat or fish.

These body building foods (or proteins, as we call them)—meat, fish, milk and eggs—are needed to replace the protein being used by the body to repair the injured tissues. In much the same way the nursing and expectant bitch is fed liberally with these protein foods to help her to replace her own "body builders" which are being used for the growth and nourishment of her puppies.

Dressing the Wound

As the wound will normally be aseptic the original dressing should not need renewal unless the veterinary surgeon particularly wishes it. There is, however, sometimes discharge from the wound and these cases will, of course, need to be dressed, although usually gentle removal of the discharge with clean cotton wool and warm boiled water is all that is required.

When dressing an operation wound everything used to touch it should be sterilized (i.e., rendered free from bacteria) by boiling beforehand. Cotton wool, broken up into small swabs, should be boiled in a scrupulously clean covered saucepan and the water used for this when cooled, will be useful for removing any discharge. Remember that the water will stay sterile only if the lid is firmly on.

A piece of lint sufficiently large to cover the wound should be cut from a packet of sterilized lint (this is obtainable from the chemist), using scissors which have been boiled. If an antibiotic powder or any other dressing is to be applied, have this in a screw-topped jar or sealed container kept tightly covered except when actually in use, and boil the teaspoon used for applying the powder.

It is advisable to use forceps, also sterilized, to handle the cotton wool swabs used for wiping away the discharge, but in any case the hands should be thoroughly scrubbed with plenty of soap and water. Have everything ready on a tray beforehand—the covered saucepan with the cotton wool swabs in the warm boiled water, the scissors, the piece of lint (which should be left covered up in its packet until the last moment), the spoon and powder (if this is ordered), bandages and/or surgical coat and a receptacle for the soiled dressings.

Have the scissors, forceps and spoon in the saucepan in which they have been sterilized immersed in the boiled water until you need to use them; if left uncovered they will quickly become contaminated by germs in the atmosphere.

If the soiled dressing adheres to the wound it must never be pulled off; a little of the warm boiled water should be trickled between the dressing and wound until the dressing can be gently removed. Never touch the wound with your fingers if you can avoid doing so, and preferably use forceps for handling the wool to wipe away the discharge. Be careful to wipe the latter away from the wound and not across it. Do not have the cotton wool any wetter than necessary.

Occasionally it may be necessary for the veterinary surgeon to remove a suture (stitch) to allow drainage, and if the wound appears very red and swollen in one part, with no discharge, he should be informed.

The sutures are removed about a week after the operation and it is a wise precaution to take the temperature daily for about five days. Any rise to 102?5°F. and over should be reported. The animal should wear a surgical coat until healing is complete and dressings may have to be continued for some days after the removal of the sutures.

Most post-operation cases need plenty of rest and quiet; even if the dog seems to be little affected, any surgical interference is a shock to the system and the animal needs a peaceful convalescence.

How To Make Surgical Coats

Surgical coats, used for protecting wounds (particularly abdominal) after operations, should be made from clean, strong white material (old sheeting is usually very suitable). Four holes should be made for the legs, the material drawn up and fastened along the back and round the neck, and shaped where necessary over the thighs.

Perfect fitting is not necessary provided the coat prevents the dog from licking at his wound or worrying at the bandages. He should be able to move comfortably. When shaping, be careful with the scissors as it is easy to cut off too much material. Here and there a few stitches can be inserted to keep the coat tidy and it should be fastened by tapes (never safety pins) along the back. At least three coats should be made to allow for accidental soiling and regular laundering.

Dealing With Paralysis

Paralysis

This condition, a symptom or result rather than a disease in itself, is tedious to nurse and alarming to see, but even apparently hopeless cases can sometimes make remarkable recoveries. Paralysis can be caused by acute constipation bringing with it auto-intoxication, but the remedy for this is simple and when the cause is treated the paralysis disappears. In distemper and hard-pad, and in some other serious diseases affecting the central nervous system, paralysis is fairly common.

The veterinary surgeon will, of course, always be informed at its onset, which is shown by weakness, staggering, and stiffness of the hindquarters. It can involve the whole body but more usually it is the hindquarters which are affected. The dog is unable to stand but drags his legs behind him when he tries to move. The bowels are constipated and the bladder may share in the general paralysis although later there may be incontinence. When the brain is seriously affected the dog will lie completely helpless, unable to lift more than his head.

The bowels and bladder must receive attention to begin with, as elimination is always of vital importance in these cases, and constipation can make the condition much worse. If not otherwise directed, Epsom salts are useful and an enema can be given if the salts do not operate in a few hours. If the dog is supported standing and his flanks are gently pressed, the bladder may be

emptied successfully. This should be repeated two or three times a day. Failing this, it may be necessary to pass a catheter, but as this can be dangerous in unskilled hands it is a job for the veterinary surgeon. A cloth wrung out in hot water (100°F.) and held to the abdomen between the thighs sometimes helps.

Dogs which are able to walk at all should be encouraged to do so, if necessary supported, unless the veterinary surgeon wants his patient to be kept still. A wide, strong bandage round the abdomen, with a curtain ring sewn to the top and a lead attached, will form a useful sling to support the animal where he needs it and yet give some freedom.

When the dog is absolutely helpless he should be nursed in a smooth, flat, firm bed and turned every hour. Incontinence is an inevitable problem. Warmth for the spine is helpful, so the dog should have a well-covered hot water-bottle placed along his back. Gentle massage and stroking down the length of the spine is often useful.

Remember to keep the patient warm, and as a paralysed animal's skin can be easily injured, bruised or broken, be sure that his bed is comfortable. Always handle him very gently and smoothly, and do not forget to turn him regularly.

Although paralysis is a trying condition to nurse, and sometimes takes a long time, the animal has a good chance of complete recovery provided that the nervous system is not permanently damaged. No one should be in

a hurry to have an animal destroyed unless the veterinary surgeon in attendance advises that the case is hopeless.

Dealing With Poisons

Poisoning in dogs is not very common but when it does occur prompt action is required. The subject of poisoning is complex because a number of agents may produce the symptoms of poisoning. These symptoms can be summed up as follows:

Abdominal pain, usually colicky in nature; there may be vomiting, and later diarrhoea. In some types of poisoning nervous symptoms may be seen, particularly where strychnine or the phenols are involved. Collapse, with cold extremities, inability to stand, and stertorous, harsh breathing are the final symptoms.

Immediate action

In all cases of poisoning, or suspected poisoning, give an emetic. The best is a small lump of washing soda, administered by opening the animal's mouth, dropping the soda on the back of the tongue, and firmly pushing it down the throat with a finger. This procedure should be adopted in all cases of poisoning with one exception. This is in cases of strychnine poisoning, in which the animal has in the later stages convulsive or fit-like movements. In

such cases the risk to the owner in opening the mouth and putting a finger inside is too great, as this might bring on a convulsion and clamping of the jaws.

A veterinary surgeon should be consulted promptly in all cases of poisoning and suspected poisoning. A few comments on the commonest poisons are alphabetically listed below.

Arsenic

This is found in some rat poisons. The symptoms are usually vomiting, restlessness, severe abdominal pain, strong desire for water (if allowed, this intensifies the vomiting and increases absorption of the poison).

Barium chloride

This also is found in certain rat poisons. It produces symptoms of an acute nature—vomiting, diarrhoea and loss of use of the limbs.

Coal tar, carbolic (phenols)

Phenol poisoning may result from several sources. Dogs walking in tar may lick sufficient off their feet to produce acute poisoning. Lysol baths and

carbolic soaps are other causes of trouble, dogs being extraordinarily susceptible to the phenols and very little is required to produce symptoms of poisoning.

Symptoms are abdominal pain, twitching and paralysis. Blindness is a fairly constant symptom in an advanced case. If any phenol or tar is still present on the skin, wash this off immediately, as well as giving general treatment, as absorption of the tar from the skin may be quite considerable. Never use carbolic soaps or disinfectant when bathing a dog.

Coal gas

Often the animal is unconscious. Remove to open air, open the mouth, pull out tongue and apply artificial respiration until help arrives. If the animal is breathing regularly when found, allow plenty of fresh air and give a stimulant, e.g., drops of brandy on tongue, may be given . The patient should be kept warm and quiet until he has been examined by a veterinary surgeon.

Food Poisoning

There are three main types of food poisoning. Food may contain:

1. Toxins (poisons produced by bacteria).
2. Bacteria (which may produce toxins within the animal's intestines).

3. Chemical poisons or irritants (usually contaminants, or from faulty "canning").

1. Toxins

This is the commonest, and also the least serious, of the types of food poisoning. Symptoms are diarrhoea, abdominal pain, and in severe cases the motions may be blood-tinged. Enteritis from toxins in food can be caused by cooked foods as well as by raw. The heating or cooking of food will kill the bacteria or germs present but will not necessarily destroy the toxins they have already produced.

Meat is the main offender, and it should therefore always be fresh, cooked immediately, and kept in a cool place in a saucepan with a tightly fitting lid. If any has to be used more than two days later, re-boil. This will help to prevent any trouble.

In cases of enteritis from "bad" meat give a mild purgative, e.g., $\frac{1}{2}$ -2 teaspoonfuls castor oil or Epsom salts. A teaspoonful of brandy added to this will alleviate the colicky type. (The purge should be omitted if the dog is very diarrhoeaic, or if dysentery i.e., blood in motions—is seen.)

Thin arrowroot gruel ad lib is the best and most readily available treatment. Medicinal charcoal is also useful, and may be given with the arrowroot. The gruel should be substituted for the normal drinking water until the attack

has passed. Your veterinary surgeon should be consulted in all cases where blood is seen in the motions, or when the attack has not cleared up within 12 hours.

Bacterial food poisoning

This is a more serious form of enteritis. A certain degree of fever is usually present (102?5°F.-103?5°F.) The animal is markedly dejected, and tight skinned. For first-aid measures treat as instructed in previous section. If, however, this type of poisoning is suspected your veterinary surgeon should be consulted immediately as the dog will require medicinal treatment to kill the bacteria, which often establish themselves in the intestines. This type is therefore likely to be more prolonged and need remedies more specific.

It is most important to be scrupulously careful in washing one's hands after dosing, cleaning or nursing such patients as certain types of these bacteria can produce enteritis in humans, if ingested.

Chemical poisons (food contaminants)

Occasionally food becomes contaminated by a poison or chemical. Paraffin, kerosene, and others are usually so noxious that the animal will

refuse the food. Rat poisons sometimes are accidentally mixed with food, in which case the animal should be treated as for the specific poison.

Faulty canning as a cause of chemical poisoning is today most rare, but if such a case is met with, treat as for type 1 food poisoning, but using Epsom salts, not castor oil, as a purge.

Lead Poisoning

This may occur in puppies or dogs which lick, or chew, lead paint covered objects. Symptoms are: abdominal pain, reeling, and finally the dog becomes comatose. Treatment, An emetic should be given immediately. When this has acted, give 2 or 3 small doses of Epsom salts at 1/2-hour intervals..

Phosphorus

This is a common constituent of rat poisons, e.g., Rodine. First give an emetic, then small amounts of permanganate of potash crystals dissolved in a little water. Follow this by a dose of Epsom salts, and finally a little glucose in water. Do not give any oily purge, or any milk, or other fatty food.

Barbiturates

Occasionally a dog will accidentally eat some phenobarbitone, intended for medicinal purposes, or other types of barbiturate. First give an emetic. Follow this with stimulants, e.g., black coffee, and constant stimulation until a veterinary surgeon sees the case.

Strychnine

This is occasionally put down to kill rats or moles, although its use is strictly controlled by law. The animal will show excitement, and convulsions of a rigid

nature, arching the neck and lying stretched out with legs stuck straight out. Give an emetic only if no convulsions are seen, as these spasms affect the jaws and are uncontrollable, and may therefore result in a severe bite. Quiet is essential and if possible give a large dose of a sedative . The animal should be seen by a veterinary surgeon as soon as possible.

Dealing With Pyometra & Shock

Pyometra

This is an important and serious condition (pus in the womb) in which the uterus is infected. Although it is usually confined to maiden bitches of 6 years of age or more, it is occasionally seen in young bitches as a result of infection acquired at the time of whelping or contracted from the stud dog. When a bitch is not bred from, the uterine tissues begin to deteriorate in the course of time, and this makes them more likely to become infected with harmful bacteria.

In the case of young bitches accidentally infected after mating or whelping there is no degeneration of the uterine tissues, but infection occurs from outside, usually with the commoner groups of micro-organisms. All bitches should have at least one litter, which will, to a large extent, prevent this dangerous condition.

There are two types of pyometra, open and closed, the latter being far more acute. The symptoms vary, but fever is always present (from 103°F. upwards); there is loss of appetite, vaginal discharge (in the open type) of a brownish or pinkish colour and, as the condition becomes worse, great thirst, frequent vomiting and finally prostration. If untreated, a toxæmia quickly sets in.

In the closed type, which can rapidly prove fatal, the symptoms are more acute, the fever is usually greater, there is no discharge and as the pus cannot escape, it is pent up within the uterus, there is considerable abdominal enlargement and the abdomen feels hard and is painful to the touch. A case of pyometra may begin as an open type and end as a closed, or vice versa.

Whatever its type, pyometra is a very serious and frequently fatal condition, and it requires immediate expert attention if the bitch's life is to be saved. Provided it is performed before the animal becomes too weak and toxic, an operation involving removal of the uterus and its infected contents (ovario-hysterectomy) is usually successful, but it must be carried out quickly. Mixture i may be given in small amounts until the veterinary surgeon arrives (Appendix, p. 115).

Where the bitch is valuable as a brood or is very old and weak, more conservative treatment may be decided upon, and this is often successful provided it is begun at an early stage, but whatever the type of pyometra, and whatever the age of the bitch, early treatment is important.

Although pyometra can appear at any time, the danger period is about 4-6 weeks from the end of the last season, and any signs of increased thirst, slight abdominal enlargement, etc., should be regarded as highly suspicious.

Shock

Shock is evidenced by a collapse of the circulation. It is usually due to internal injury, haemorrhages, poisoning, peritonitis or similar severe and serious states. It is important that in all cases of shock the animal is attended as soon as possible by a veterinary surgeon. An animal in a state of shock is weak but usually conscious, extremities are cold, mucous membranes (e.g., gums) pale, and respirations shallow and rapid.

The animal should be placed in a warm room surrounded by rugs, blankets and hot water-bottles. Lying the animal on its right side on an electric blanket is ideal as this gives regular, equal warmth. Stimulants should not be given by mouth if there is any suspicion of internal injury, but if this possibility is absent any of the following may be given:

One teaspoonful to 1 tablespoonful (according to size) of brandy or whisky. Glucose (dissolved in a little warm milk) or any other warm milk food, e.g., Bengers', Horlicks', etc. Small amounts should be given every 5-10 minutes.

The animal must be kept absolutely still and quiet. If there is any vomiting following the administration by mouth of a preparation, this dosing should be stopped.

Dealing With Stings

Snake Bites

Fortunately, only occasionally are dogs bitten by a snake in this country. Whilst a bite is unlikely to prove fatal to humans it can sometimes kill a smaller animal like a dog. The case must be treated promptly, and the animal should be seen by a veterinary surgeon as soon as possible. First-aid measures are important, and in some cases vital. Naturally they must vary with the site of the bite, and with the distance from home or help.

If the bite is on a limb, and you are some distance from home, tie a handkerchief firmly above the bite. This will keep the poison localised until you can take more active measures.

When at home, if possible nick the site of the bite with the corner of a razor blade, making a small cut between the fang marks. Flush this small wound thoroughly with cold water, then rub into it some potassium permanganate crystals. Do not loosen your handkerchief until after this has been done. You may then give a little glucose and water by mouth. Keep the dog warm until he has been attended by a veterinary surgeon.

It is wise, if you live in an area where snakes are found, to carry a few antihistamine capsules or tablets with you, and a little phial containing some potassium permanganate crystals. Your veterinary surgeon will be able to give you these, and a capsule or tablet of one of these given promptly by mouth will help to minimise general poisoning from the bite.

Bed Or Pressure Sores

Thin-skinned dogs which have had a long and debilitating illness are sometimes subject to these, which are caused by pressure and congestion of the blood in the affected areas. Large, shallow, unhealthy sores appear which are sometimes very resistant to treatment.

If a bed sore is noticed a veterinary surgeon should be consulted. In the meantime, zinc ointment spread on lint and bandaged on the parts, or boracic powder thickly sprinkled over the sore and a bandage applied, will do no harm as a first-aid measure.

These sores can be prevented by attention to hygiene (clean bedding), frequent turning of helpless or paralysed patients, massage with methylated spirits to harden the skin in danger areas, the protection of pressure points with cotton wool or air pillows, and general attention to comfort. Deep, soft beds are essential and if blankets are used, be careful that these are kept very smooth.

Stings

Stings are common in the summer months, and are of course acutely painful. They are usually caused by wasps, bees or hornets, and the usual site of their attack is in the mouth, owing to the dog snapping at the insect. The animal shows extreme discomfort, scratching and pawing at the mouth and salivating profusely.

The mouth or area stung should be thoroughly bathed with a solution of bicarbonate of soda made up in tepid or warm water. A concentration of 1 tablespoonful of household bicarbonate to 1-2 pints of water should be used; this is quite harmless if swallowed. Ordinary washing soda may be used instead; in this case the sting area may be wiped with a crystal of this, or a solution of 1 teaspoonful to $\frac{1}{2}$ pint of warm water may be applied.

The bathing should continue for at least 5 minutes and can be repeated every 10 minutes or so until the irritation has subsided. Ammoniated quinine applied sparingly will also be found effective. For excitable dogs it is wise to give 5-10 gr. potassium bromide or similar sedative as this will help to quieten the animal. In the case of bee stings it may be possible to remove the hair-like sting with forceps.

If veterinary help is within a reasonable distance it is as well to have the animal examined as soon as the initial bathing has been done.

An injection of one of the recently developed anti-histamines will greatly relieve the local irritation and swelling. It will also prevent any systemic disturbances. These drugs may also be given by mouth, and if there are large numbers of wasp nests in the vicinity, and stings are common occurrences, it is advisable to contact your veterinary surgeon and obtain an anti-histamine for future use. This can then be given immediately following a sting, but the local bathing should not be neglected.

The above remarks apply also to urticaria (nettle-rash) except, of course, that the areas affected are usually greater and the degree of irritation not so severe. Caladryl (Parke Davis) is an ideal preparation to treat this as it also contains an anti-histamine. Alternatively Cortoderm (Crookes) which has a hydrocortosone plus calamine is equally effective.

Dealing With Thorns In Pads

Thorns In Pads

This minor mishap occurs frequently with dogs whose lives are not bounded by an asphalt road or concrete side-walk. It is only minor in nature, like a blister on a human foot, and if dealt with promptly and sensibly the incident is soon forgotten. Look carefully at the pads as soon as the dog begins to limp or licks at his foot. If this is done the thorn will often be seen intact, its point embedded in the pad.

Carefully grasp the stout end of the thorn and pull it out, taking care not to break it. When at home once more, bathe the foot thoroughly with warm water, dry, then dab with tincture of iodine. No further attention should be necessary.

If, however, the thorn has broken, leaving only the sharp point in the pad, a good light, a sharp pair of eyes, and a pair of forceps are the most successful combination. Removal will have to be done at home, but little damage is likely to happen on the way as the dog will "carry" the tender limb. Fine pointed forceps are ideal, but depilatory (eyebrow plucking) forceps are quite useful. When the thorn has been removed dab the point of entry with a little iodine.

When, despite a thorough search, no sign of the thorn can be found soak the foot thoroughly in warm water, gently washing the pads at the same time. Sometimes a small crack or cut, or split, may be the cause of the pain, and minute granules of glass, dirt or sand getting lodged in these small wounds cause quite a tender foot. This bathing should be repeated twice daily until the pain has gone.

If after 2 or 3 days there is any swelling, heat or pain it is as well to consult your veterinary surgeon. The foreign body may have worked right into the fleshy portion of the pad and produced a small abscess. This will have to be opened under local anaesthetic, and then probed and cleansed to remove the cause of the trouble.

Generally speaking, however, the thorn in the pad case is one which the intelligent owner can deal with quite adequately himself.

Cracked Pads

When a dog limps and the pad is cracked the only way to cure the condition is to protect the dog's foot during healing. A piece of lint sufficiently large to cover the pads should be smeared thickly with boracic ointment and secured as follows: a length of "Sleek" plaster should be taken from just below the pastern (or knee) joint over the foot and up the back while the dog is standing on the foot.

Secure this by bandaging in the ordinary way round the leg and foot with more plaster. This, if efficiently done, makes a secure, neat and immovable covering, that can be left until it drops off naturally. Although dogs make the most determined efforts to chew the strapping off they will find this impossible if the bandaging has been properly done.

Ticks

Ticks are sometimes a cause of extreme irritation to dogs. They are oval in shape and grey or brown in colour, and about ¼" long, being much larger

than the more common parasites, fleas or lice. Ticks are most frequently acquired by dogs in the autumn months, especially if the dogs have been on land recently pastured with sheep. The tick is a blood-sucker and buries its head, which has very powerful jaws, into the dog's skin. The rear portion of the tick lies free of the skin, and when touched gives the impression that the parasite is only lightly adhering to the animal.

Any attempt to pull the body of the tick will result in the body coming away, leaving the head and jaw portion firmly embedded in the skin. If this happens, the irritation caused by the remaining head will result in a painful area. A small abscess may form.

To remove the tick in its entirety is therefore most important, and this can be managed by making the parasite relax its hold on the animal. This is best done by holding a swab of cottonwood, well soaked in methylated spirit, surgical spirit, ether or chloroform, over the tick for a good 3-5 minutes. The spirit must come into direct contact with the head, so the dog's hair should be parted at the tick's point of attachment. It is important that the spirit-soaked swab is pressed firmly on the tick to ensure adequate penetration of the anaesthetising fluid.

After this thorough soaking the body of the tick should be grasped and a firm, gentle tug should remove it intact. The small wound caused by the tick should be well swabbed with a little tincture of iodine, and this dressing repeated each day for two days.

Deaths In New Born Puppies

Sometimes puppies within the first few days of birth begin to whimper continually, lose interest in suckling and do not thrive. If left untreated, they die. This condition is sometimes erroneously ascribed to so-called "acid milk" in the dam; actually, it is normal for all bitches to have acid milk.

Although baby puppies may die from many causes—cold, lack of milk, injury at birth, too long "on the way", amongst others—when the above symptoms occur they are probably due to a streptococcal or staphylococcal infection.

Only immediate measures will be of avail. This naturally requires the attention of the veterinary surgeon as antibiotics may be required. In addition, many puppies are lost through lack of warmth at whelping time or during the first week or two, so keep the kennel or whelping room very warm, supplying a covered hot water-bottle in the whelping bed in winter.

Every puppy is born in a kind of bag and if this is not broken quickly at the head of the puppy it will die. When a bitch invariably produces her young very slowly, and the puppies die as a result, parturition can often be "speeded up" with specific injections.

How To Rear Puppies By Hand

When a bitch is unable to rear her family a foster-mother should be obtained if possible. Failing this, the litter must be raised by hand. It is an arduous and exhausting business, but there is no reason why such methods should not succeed if the owner is willing to sacrifice time and sleep. More than one champion has been reared by hand.

An especially rich full-cream baby milk food should be used (a good one is "Humanised Trufood"). This, during feeding, should be kept standing in a basin of hot water to maintain blood heat. It should be mixed to the consistency of condensed milk and then slightly thinned to resemble very rich, creamy cow's milk. Add medicinal glucose (one salt spoonful per puppy for small breeds) and give a teaspoonful or more of the mixture to each puppy, using an old-fashioned medicine dropper with a rubber bulb.

It is best to feed each puppy on a covered hot water-bottle; they like to push at it with their feet while drinking. Open the puppy's mouth, put the dropper in and feed slowly, allowing time for the little thing to swallow and breathe. He may protest at first but will quickly learn to enjoy it. Be careful not to give too much. The puppies should be fed every two hours during the day and every three hours at night. After ten days the night feeds are cut down to one at midnight, one at 4 a.m., and one at 8 a.m.

After a fortnight there is no need to feed at night at all. Crooke's halibut emulsion {not the halibut oil—the emulsion is specially prepared for infants and can be mixed with milk) is excellent and should be added to the feeds—from two drops twice daily for each puppy.

The puppies must be kept very warm and if the dam is able to keep them clean so much the better, otherwise the abdomen should be gently rubbed in a circular action until the bowels have acted, and the puppies kept clean with cottonwool dipped in a mild antiseptic and carefully dried with dry cottonwool. A dusting with boracic powder on abdomen and rear completes the process. At three weeks scraped raw meat can be given, as with the normally reared puppy.

Hand-reared puppies usually thrive if kept very warm and fed regularly and punctually. Keep all utensils, medicine dropper and similar articles scrupulously clean, just as you would do for a human baby.

Dealing With Nasal Discharge

Nasal Discharge

The nose, in health, is always moist, and by a discharge we mean one which is clearly perceptible, whether watery or mucopurulent. In the former case there is the perpetual "dew-drop" at the end of the nose, often seen in

hard-pad. It should not be confused with the occasional "drip" seen in nervous puppies when handled by strangers.

A nasal discharge is due to a variety of causes which may be summarised as local and general.

When the cause is local it may be due to a small foreign body (e.g., a grass seed), to breathing heavily polluted air (for example, when an oil-stove smokes), to some strictly local infection or to a congenital abnormality.

When the cause is general it is associated with disease—for example, distemper.

The temperature should be taken. If normal, and the dog is cheerful, it is probably a local trouble. Sometimes, even when there is no general illness, the dog is depressed and hangs his head; this is often due to a headache and a five-grain aspirin tablet will bring much relief.

When the dog has a slight temperature (102?5°F. upwards), the eyes are inflamed and reddened with or without a slight discharge, and he seems a little depressed and perhaps disinclined to eat, it is probable

that the nasal discharge is a symptom of one of the virus infections, such as hard-pad.

Unless the cause is obvious (for instance, the smoking stove mentioned above) a nasal discharge in a previously healthy dog always needs investigation if it persists for more than a few hours. A veterinary surgeon should be consulted and, if describing the condition by telephone, the type

of discharge (clear and watery or thick and purulent) should be mentioned, whether slight or profuse, when it began, the dog's general state of health, and whether there is any possible reason.

For example, if a dog has been taken for a walk in fields of uncut hay, grass seeds may be responsible. Do not touch or wipe off the discharge until the veterinary surgeon has examined the dog.

Removal of Purulent nasal discharge

When the cause of the trouble has been diagnosed and treatment begun, the owner can make the animal far more comfortable, and certainly more presentable, by regular removal of the discharge every two or three hours. The veterinary surgeon may advise inhalations (see p. 63) or nasal drops, and the latter may cause sneezing and so help to remove the accumulated matter as dogs cannot blow their own noses!

The nostrils should be cleaned very gently with cotton wool wound round a match-stick and dipped in warm water with a very mild antiseptic (T.C.P. answers well for this purpose). Discard each piece of cotton wool after using once and introduce the match-stick into each nostril with the greatest gentleness. Finish with dry wool. Sometimes pure olive oil is better than water. After cleaning the nose in this way smear a little vaseline over the surface and under the flaps of the nostrils, which are apt to get stuck down

with the discharge. All swabs used for cleaning should be burnt immediately

Mésalliance

Mésalliance, or accidental mating of the in-season bitch, is a frequent mishap and is often regarded by the owner as a major disaster, especially if the animal has a pedigree. If the bitch is found at time of actual mating no attempt should be made to separate her from the dog. By that time interference will only add the risk of injury to the bitch, and this may result in severe bruising or even tearing of the vagina. Such damage may have permanent results.

As soon as the animals have parted your veterinary surgeon should be consulted. Douching of the vagina by the owner should not be attempted; unless this is done by a skilled person injury or infection may occur. Also, this course is not generally effective in preventing the unwanted litter. The hormone injection is effective in the majority, if not in all, cases of mésalliance.

It does not in any way harm the bitch's powers of reproduction at a later date. It is important, however, that the injection be given within a reasonable time of the accidental mating; a delay of over forty-eight hours is likely to reduce the efficiency of the injection considerably.

Incidentally, the fallacy of "tainting", or marking of subsequent pedigree litters by a mating with a mongrel dog, has been quite conclusively disproved and has no scientific basis.

It is of course impossible to breed from the bitch at the season when the mésalliance occurs if a hormone injection has been given.

Lack of Milk In Nursing Bitches

A very trying condition which may be partial or complete. Sometimes it is due to insufficient protein (e.g., raw meat) and when this is the case plenty of raw meat should be given and a generous allowance of warm milk.

When this has no effect your veterinary surgeon may be able to help. A hormone injection is now available which has been successfully used for this condition. It is administered hypodermically and should be given as soon as possible after whelping.

A gentle massage of the milk glands with a little warm olive oil will also stimulate the blood supply to the area, and thereby increase the glands' ability to produce milk. This is also useful in cases of over-hard or distended milk glands when no infection is present.

Broken nails

Broken nails are common, particularly in the sporting breeds, when the dew claws have not been removed. Breaking or tearing of the nail does, however, occur on the toes as well, and involves one of two areas. The tear may be at the base of the nail, when the whole of the nail is torn from its attachment to the toe and is usually left hanging by a portion of skin. Alternatively, the break may occur half-way down the body of the nail, the root remaining firmly attached to the skin at the base of the claw. In both types of injury it is usual for the broken end to be left attached to the body portion. This portion should not be pulled or any attempt made to remove it although the point of attachment may appear small it is usually quite tough, and the pain caused by touching the broken claw is considerable. Gentle bathing with warm water containing a little non-irritant antiseptic should be the first step. Then a pad of cotton wool or gauze should be placed over the injured claw, taking care to keep the broken portion in line with the rest of the toe.

A bandage over this pad will ensure that the injured end is kept clean and free from jarring until the broken portion can be removed. This should be done by the veterinary surgeon, who may have to employ a local anaesthetic.

A pair of nail clippers may be used if the break is near the free end of the nail and a sharp snip just over the break will often sever the broken end quickly and painlessly. A clean dressing should be kept on for several days

until the broken end has healed. It is important that this should be done as dirt and grit can enter the wound and cause a secondary infection, which will greatly delay healing.

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