



Miniature Schnauzer
Rescue of Houston, Inc.
www.MSRH.org

Volume 2, Issue 12



December 15, 2010

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CUSHING'S DISEASE
CUSHING'S DISEASE CAN TROUBLE OLDER DOGS

By Norma Bennett Woolf
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MSRH Mission Statement

Miniature Schnauzer Rescue of Houston, Inc. is an all volunteer, donation sponsored, non-profit organization dedicated to the overwhelming task of saving the lives of abused, abandoned or unwanted Miniature Schnauzers who, through no fault of their own, have lost their homes. Many of these dogs come to us healthy. However, some are sick, injured, or abused. They come from shelters, off the streets, from owners who, for whatever reason, can no longer care for them, and from puppy mills, where they have never felt the loving security of a home. Our goal is that they will never have to feel unwanted or unloved again.

Animal bodies are a marvel of interactions between organs and systems kept in balance by the production of enzymes that aid in metabolic processes and hormones that regulate body functions. When the balance is disturbed by illness, injury, or advancing age, the body goes awry: appetite and water consumption change, organs malfunction, or medication to treat one illness causes another.

Such is the case with Cushing's disease, also known as hyperadrenocorticism, the production of excess hormones from the adrenal glands. Cushing's disease usually strikes older dogs with a bucket full of symptoms that can mimic other diseases. Increased appetite, increased drinking and urination, panting, high blood pressure, bulging abdomen, skin lumps and discoloring, hair loss, muscle weakness, and nervous system disorders can occur with the disease.

The adrenal glands are located above the kidneys. The adrenals produce cortin, a complex of steroid hormones that help regulate body weight, mineral balance, the structure of connective tissue, some white blood cell production, and skin health. Adrenal glands are stimulated to produce cortin by adrenocorticotrophic hormone (ACTH) from the pituitary gland. Cushing's disease can be triggered by a tumor of the adrenal glands or of the pituitary gland; either one can cause the adrenal glands to run amok and produce an excess of corticosteroids.

Diagnosis

The symptoms may creep up on the pet and pet owner. The danger signs of vomiting, diarrhea, pain, seizures, and bleeding do not occur; the pets do not appear critically ill. To the contrary, the symptoms often appear to be connected to normal aging. Muscle weakness also causes a reduced tolerance for exercise and lethargy, both of which are typical in aging dogs and cause no alarm to owners. Often owners do not seek veterinary advice until the signs become unmistakable or intolerable--when the dog breaks his housetraining or begs to go outside during the night, for example.

The typical Cushing's dog has a bulging, sagging belly caused by a decrease in muscle strength and redistribution of fat from body storage areas in the abdomen. As the disease progresses, hair loss may also become a major concern and the skin thins and may lose its resistance to infection.

Once suspected, Cushing's disease can be diagnosed with blood tests. Once it is diagnosed, tests can also differentiate between disease caused by pituitary gland tumor and disease caused by adrenal gland tumor.

There are several drug therapies available, including Lysodren, Ketoconazole, and Anipryl®. Lysodren kills the outer

Continued on Page 2

Cushing's Disease continued from Page 1

layer of the adrenal gland that manufactures the corticosteroids. Careful regulation of the drug determines how much of the cortex is killed, so that a normal amount of the hormone can be produced. This protocol requires periodic blood tests to make sure the dog has a normal amount of cortisol and does not develop Addison's disease. Once the proper dosage has been determined, the dog's condition may be maintained by periodic instead of daily doses.

Ketoconazole works by suppressing cortisol secretion in the adrenal glands. It requires daily dosing, monitoring, and acute observation by

the pet owner, and is expensive. Some dogs cannot absorb it, rendering it useless in 20-25 percent of cases. It is useful for dogs that cannot tolerate Lysodren, has a low incidence of toxicity, and is completely reversible if necessary.

Anipryl® was approved for use in canine Cushing's disease in June 1997. Anipryl® helps restore the balance of natural brain chemicals which in turn alleviate the symptoms of the disease. In clinical trials, about 70 percent of dogs responded favorably with a lessening of symptoms and reduction in cortisol production.

Left untreated, Cushing's disease will progress and can lead to life-

threatening disorders, such as diabetes, congestive heart failure, and liver and kidney failure, and to chronic maladies, such as hypothyroidism and infections of the skin, ears, gums, eyes, or bladder. If your pet exhibits any of the early signs of Cushing's and is six years old or older, make an appointment with your vet right away. Pituitary Cushing's disease cannot be cured, but the treatments available can prolong your pet's quality of life and keep him around for years longer. If an adrenal tumor is causing the disease, surgery may be indicated. Either way, it's better to get started on treatment.

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Part 4 of 8: TICK-BORNE DISEASES

Lyme Disease (Borreliosis) in Dogs

Veterinary & Aquatic Services Department, Drs Foster & Smith, Inc.

History

Lyme disease (borreliosis) is an infectious, tick-borne disease first recognized in dogs in 1985. It is caused by *Borrelia burgdorferi*, a type of bacteria called a 'spirochete'. The common deer tick *Ixodes scapularis* (formerly called *Ixodes dammini*) is the primary carrier of *B. burgdorferi* in the Northeast and upper Midwest. The tick *Ixodes pacificus* is the primary carrier in the western United States.

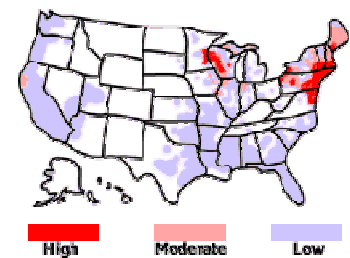
Although Lyme disease was first diagnosed in Connecticut in 1975, there is evidence that it has existed in wildlife for many years. Tissue samples taken from a white-footed mouse in Massachusetts in 1894 have now undergone DNA testing that show the mouse was infected with Lyme disease. Certain environmental factors have caused

Lyme disease to be more prevalent in people in the twentieth century. Before 1900, the habitat in the East and upper Midwest was heavily deforested by settlers. Deer and their associated ticks were greatly reduced. The reforestation of these areas and the resulting booming white-tailed deer population in these areas are probably a big factor in the increase in the incidence of Lyme disease. This coupled with the increased awareness and testing capabilities has led to the greatly increased reporting of the disease.

Where is Lyme disease found?

Despite the fact Lyme disease has been diagnosed in people from all 50 states, it is felt that they acquired the disease by traveling to endemic areas (areas where the disease is consistently present). Only a relatively small portion of

the United States is endemic for the disease. However, all of the areas where Lyme disease is present are areas with high human and pet populations bringing the total number of people and animals that can be potentially exposed to a high number. In humans, 85% of cases have occurred in the eastern coastal states from Massachusetts to Virginia. Ten percent of the cases come from Wisconsin and Minnesota and 4% from California. All of the other states account for less than 1% of the disease.



Lyme Disease continued from Page 2

Life cycle of the deer tick

The deer tick (*I. scapularis*) goes through several stages in its life cycle. In the spring, the eggs hatch into larvae. During the summer, a larva will feed on a small mammal, such as a white-footed mouse. If the mouse is infected with *B. burgdorferi*, the larva can become infected. This infected larva will then winter over until the following spring when it becomes a nymph (and is still infected) and feeds on another small mammal or a deer, dog, or human. In situations where the nymph was not infected as a larva, it could become infected by biting an infected animal. The nymph then molts into an adult. The infected adult then feeds on a larger mammal, such as a deer, dog, or human, and lays its eggs, which will hatch the following spring. In summary, a dog or person usually acquires Lyme disease through the bite of an infected nymph or adult tick.

How is Lyme disease transmitted?

For a nymph to transmit *B. burgdorferi*, it must be attached to the host for about 48 hours. If a tick dies or is removed before 48 hours, transmission of the bacteria will not occur. Even if a tick is a carrier of *B. burgdorferi* and it attaches to a dog for more than 48 hours, the dog may not contract the disease. In fact, studies show that only around 10% of dogs that are exposed to *B. burgdorferi* will contract the disease. There is no evidence to suggest that infected dogs pose a risk to other members of the household, except as a reservoir of infected ticks. Once a tick has had a full meal, it will detach and not bite another mammal. The risk come from ticks that have not gotten a complete meal and are detached. They could possibly seek out a human and bite

them causing infection.

What are the symptoms of Lyme disease in dogs?

The symptoms of Lyme disease in dogs differ from those in people and usually occur much later after the tick bite. Clinical illness in dogs usually occurs 2 to 5 months after a bite from an infected tick. Cats can develop Lyme disease, but it occurs rarely in them, even in endemic areas. Other domestic animals, such as horses have contracted Lyme disease, but it does not appear to be a significant problem. Dogs show several different forms of the disease, but by far, the most common symptoms are a fever of between 103 and 105 degrees, lameness, swelling of the joints, swollen lymph nodes, lethargy, and loss of appetite.

Although not common, some dogs have developed severe progressive kidney disease as sequelae to Lyme disease. This severe kidney failure is difficult to treat and may result in death of the dog. It is recommended that a dog with a positive Lyme antibody test have additional blood tests and a urinalysis to assess kidney function. Some dogs may also develop heart problems or nervous system disease after being infected with *B. burgdorferi*.

Dogs do not develop the typical rash or the circular are of redness around the bite (*erythema migrans*) which is seen in people.

How is Lyme disease in dogs diagnosed?

Blood tests are available to assist in the diagnosis of Lyme disease. The standard blood test detects antibodies made by the dog in response to infec-

tion with *B. burgdorferi*. Many dogs show positive test results, but are not actually infected with the disease. These animals have been exposed to the organism, but fought off the infection on their own. These animals will have antibodies to *B. burgdorferi*, but not have the disease. Thus a single positive result means only that the dog was exposed. As mentioned earlier, only around 10% of the exposed dogs actually contract the infection.

The 'C6 antibody test' can distinguish between antibodies made as a result of exposure and those produced as a result of vaccination against Lyme disease. This simple test can be run in a veterinarian's office. As with the other antibody tests, however, the C6 test will not distinguish between exposure to *Borrelia* and actual infection.

Test results must always be interpreted in combination with other information to obtain the correct diagnosis. Suspected animals should have a history of tick exposure, compatible clinical signs, and have a rapid response to antibiotic therapy. If an animal that is suspected of having Lyme disease does not clinically improve within 48 hours of starting antibiotic therapy, it is best to assume that it is not Lyme disease and other diagnostic tests would need to be done to find the source of the problem.

How is Lyme disease in dogs treated?

Treatment for Lyme disease is very straightforward and consists of using either a tetracycline or penicillin-based antibiotic. The two most com-

Continued on Page 4

Lyme Disease continued from Page 3

monly used are oral doxycycline or amoxicillin. A recent study showed that both antibiotics worked equally well. The antibiotics must be given a minimum of 14 days, but 30 days is recommended. However, some preliminary studies show that some animals may not even clear the organism after 30 days and will relapse once the antibiotic is discontinued. In these cases, the animal may have to be on the antibiotic for much longer. It appears that many animals may never completely rid themselves of *B. burgdorferi* despite antibiotic treatment. These animals may never show any further signs of the disease. Despite the fact that some animals may develop chronic infections, the vast majority of infected dogs respond rapidly and satisfactorily to doxycycline treatment. In some animals with severe arthritis, pain relievers may also be used in addition to antibiotics. The use of steroids in this disease is definitely contraindicated.

How is Lyme disease prevented in dogs?

Prevention of Lyme disease involves the use of vaccination and tick control programs. Dogs who were infected once with *B. burgdorferi* can become reinfected, so they too need protection.

Vaccination: There are whole-cell killed vaccines on the market including Lymeavax® by Fort Dodge and Galaxy® Lyme by Schering-Plough. Recombi-

nant vaccines, such as Recombitek® Lyme by Merial and ProLyme® and Continuum™ Lyme by Intervet are also available.

Some veterinarians have criticized the ineffectiveness of the Lyme vaccines and do not recommend their use. Although many dogs have been vaccinated and treated for Lyme disease, some vaccinated animals contract the disease, but it appears that the vaccinated animals are less likely to contract the disease than unvaccinated animals. Vaccinations can be started after 12 weeks of age, and it is recommended that two doses be given three weeks apart, then boosted yearly after that. Because of the inherent problems of over-vaccination, it is recommended that only dogs that are exposed to ticks in areas where Lyme disease is a problem be vaccinated.

Tick Control: Tick control is probably the most important thing an owner can do to prevent Lyme disease in their pet. Ticks carry many other diseases besides Lyme disease and by preventing them from attaching to your pet, we can prevent all of these diseases. Avoiding areas of high tick infestation during periods when ticks are active is one of the best ways to avoid contact.

Using insecticides on the dog that repel ticks is another method. With the advent of once-a-month topical insecticides, tick control has become a lot easier and more effective. Permethrin, which is an ingredient in Bio Spot®

Spot On® for Dogs, and K-9 Advantix®, is a very good repellent, and if the tick attaches itself to the animal, it will die within 12 hours preventing the passage of *B. burgdorferi*. (Permethrins should NOT be used on cats.) Frontline®, containing fipronil, also controls ticks. Very few tick collars are effective with the exception of a collar that contains amitraz. Amitraz is an organophosphate that is very effective at repelling and killing ticks, but has little effect on fleas. Often using a once-a-month topical product along with a Preventic® collar provides the best protection.

Summary

The tick-borne *spirochete Borrelia burgdorferi* causes Lyme disease. It often causes symptoms of lameness and fever. It is very treatable with antibiotics. There are vaccines available for dogs. The human Lyme disease vaccine has been discontinued. Preventing tick attachment is one of the best ways to control the disease.

For information on human Lyme disease, please see:

<http://www.cdc.gov/ncidod/dvbid/Lyme/>

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**If there are no dogs in Heaven, then when I die
I want to go where they went.
~ Will Rogers**



Burk, dreaming of being a lap dog!

Featured Pet—Burk

"Only as far as I reach can I grow; only as far as I seek can I go. Only as deep as I look can I see; only as much as I dream can I be." I'm Burk, and I'm a male salt & pepper Miniature Schnauzer with cropped ears and a docked tail. I'm about 10 yrs. young, and I weigh 16 lbs. My dream? I'd love to be a lap dog in a retired person's home! I'm good with other dogs, but I'd be better as an only four-legged friend! Like some Schnauzers, I can be a little strong willed! I'm very sweet, and I want nothing more than your hand on my back, giving me a little pet! I battled heartworms and won—and now I'm 100% healthy awaiting your forever home! I sleep in the BIG bed next to my foster Mom and love to cuddle. I know when it is breakfast time and will let you know. I am completely housebroken. Ask for me on your adoption application! Adoption fee: \$250

FESTIVE HOLIDAY CANINE COOKIES

- | | |
|--------------------------------|----------------------------|
| 1/2 cup unsweetened applesauce | 3 cups whole wheat flour |
| 1 egg, slightly beaten | 1 cup white flour |
| 1/2 cup chunky peanut butter | 1/2 cup cornmeal |
| 1 teaspoon vanilla | 1/2 cup quick-cooking oats |
| 1-1/4 cups water | 1/4 cup chopped peanuts |

Preheat oven to 350 degrees. In a large mixing bowl, combine applesauce, egg, peanut butter, vanilla and water. Mix well. Add flours, cornmeal, oats and peanuts and mix well to form a dough. Turn dough onto a floured surface and knead until thoroughly mixed together. Roll out dough to 1/4 inch thick and cut out shapes. Place on greased baking sheet and bake for 45 minutes until lightly browned. Cool on rack. Makes 30 cookies.



Parker Road Animal Hospital & Pet Resort
 6740 Airline Drive
 Houston, Texas 77076
 Tel: (713) 694-0552
www.parkerroadpetresort.com

Be sure to mention that you are associated with MSRH when you board your dog at Parker Road Pet Resort and a donation of \$1 per day per dog will be made to MSRH. Not only will your dog be treated like royalty, but MSRH will be receive a benefit, as well.

NOVEMBER INTAKES = 22 ADOPTIONS = 21

VOLUNTEER SPOTLIGHT—SHERI GOLDEN

I think dogs are one of God's gifts to us through life. Maybe there is something to "dog spelled backwards is God". My life has been blessed with a variety of dogs growing up with fond memories. They were usually the sporting dogs like Labradors, Weimaraners and Dobermans who would stay outside unless weather dictated coming inside. This was good, because my family, friends and I would spend time outside. I never thought about an inside dog. As life would have it, I went off to college where pets were not allowed in the dorms or apartments. I looked forward to having a dog when I purchased my first house, so the dogs would have a yard. My life was spent with lovely house cats in the interim. In 1996, my cube mate had a litter of Standard Schnauzers. For six weeks, I listened to the development of the litter, and I eventually adopted a little female. Her name is Basia. I was living in a townhome at the time with a yard consisting more of concrete than grass. Basia got along with everyone, including the cats. She was housebroken and crate trained. I should have known how special Basia was. She was my best companion, and we had memorable road trips together. I intended to include another dog companion for Basia and me within 5 - 6 years. I blinked before I realized it, Basia was celebrating her 14th birthday. I had been reading several articles about dogs being abandoned by owners due to the economy and a variety of other reasons. I knew Basia and I were set in our ways, but we could open our home to another dog. I began looking for a dog that would feel comfortable in our home. I came across the "Miniature Schnauzer Rescue of Houston" website with adorable dogs and individual stories about each dog. There was one in particular who was considered "Special Needs" due to her having three paws. Her name was Senta. Senta was pulled from a shelter on the coast. There was no identification. She was listed as around 14 lbs. and around 2 years old. I thought she may be a fit considering Basia is 14 years and Senta having 3 paws. It was Saturday morning during the Labor Day 2009 holiday. I e-mailed an inquiry and quickly received a response from Marilyn Malaney. I inquired about Senta adapting to a home with another older dog and cat. Marilyn said Senta's personality was easy going, so it was up to Basia feeling comfortable around Senta. I was living in Austin at the time, so Marilyn agreed to meet in Columbus for a "Meet & Greet". The meeting went well. Senta was such a happy dog, and Basia tolerated Senta's extreme happiness. Our "Meet & Greet" photo is included here. Senta is a cherished part of the family. I personally had no idea how set in our ways Basia and I had become. Basia and I would do our walks then quickly return inside. Basia, Senta and I had longer and more frequent walks in the initial couple of months. Senta gets along well without the 4th paw. I do not think she knows she may be considered a "Special Needs" without her paw. When we travel to see friends, Senta keeps up running with the best of them (including her favorite Basset Hound - Leila). I know Basia has benefitted from having Senta in our family. They are both snoring beside me as I type this quick article.

Life has its challenges, but the challenges were easier having Basia and Senta. I am grateful for them. They remind me to focus of the quality of life with relationships and not get caught up in life's drama. Somehow, it always turns out okay by faith.

I am humbled by the individuals who coordinate and dedicate their time to the "Miniature Schnauzer Rescue of Houston". I cherish each opportunity to assist the organization and interaction with the rescued Miniature Schnauzers. It is a miracle the organization accomplishes what it does with the budget and time constraints. I have had the opportunity to assist in transporting Miniature Schnauzers from the shelters, foster homes, groomers and to the "Miniature Schnauzer Rescue" organization. From my experience, my life has been enriched with Basia, Senta and volunteering with the "Miniature Schnauzer Rescue of Houston".

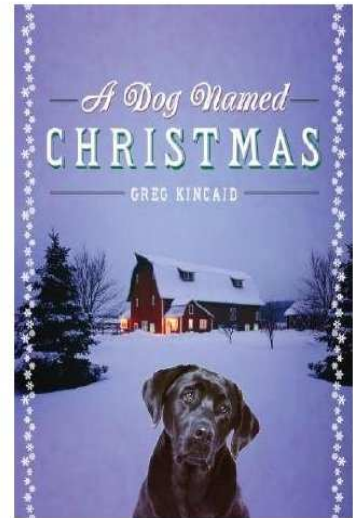


Sheri with Senta & Basia — "M & G Day"

BOOK OF THE MONTH

"A DOG NAMED CHRISTMAS"

BY GREG KINCAID



Just in time for the holidays, this is a touching story of a young man, his doubting father, and a stray dog.

Todd McCray, a developmentally challenged young man, hears about a special program the local animal shelter is running for the holidays. In an effort to clear the shelter for the holidays when there is not enough staff available to care for the animals, the town shelter is asking the public to "bring a dog home just for the holidays." The idea is that families will choose a dog to visit them for a couple of weeks at Christmas time and then return the dog after the holidays are over.

Todd immediately wants his family to participate, but his dad, who in the past has dealt with the death of two very special dogs, wants no part of the program. Given the title of the book and that it is a holiday release, it is fairly obvious from the beginning that the McCrays are going to participate. To what extent they become involved and how their involvement changes their lives is really what the book is about.

This is a relatively short book. The actual story is only 143 pages long. Author Greg Kincaid has written a story so warm and tender that it will have readers laughing and crying at the same time. This is the perfect book to get you in the holiday spirit, and it is a book that can be enjoyed by all members of the family, both young and old.

"*A Dog Named Christmas*" may be purchased from <http://www.amazon.com> for \$10.17 (hardcover) or \$9.66 (Kindle). It is not available in paperback. It has received 47 customer reviews, with 39 of them being 5-star.



Greg Kincaid was born in Providence, Rhode Island, on March 30, 1957. He has lived in rural Kansas most of his life. He is married and has five children. His first book, "*Death Walk at Acomd*", was a young adult novel published in 1992 by Sunstone. "*A Dog Named Christmas*" was his second novel published by Random House in 2008, which made it to the New York Times Extended Best Seller's List. Greg has just recently published a prequel to this book released by Crown Books entitled "*Christmas with Tucker*". When he is not writing books, Greg is an attorney and an advocate for both animal shelters and literacy.

DON'T FORGET TO ENROLL IN THE 2010 KROGER NEIGHBOR TO NEIGHBOR PROGRAM!

A PORTION OF YOUR GROCERY BILL WILL BE DONATED TO MSRH.

QUESTIONS? SEND E-MAIL TO NEWSLETTER@MSRH.ORG

Dear Sophie: How do you remove a tick?

Dear Sophie:

With all of these articles in the newsletter about ticks and tick diseases, I've started to worry about what to do if I find a tick on me. What does a tick look like? How do I get that awful thing off of me?

Tossin' and Turnin',
Wary Larry

Dear Larry:

Generally speaking, the Texas Gulf Coast is not a high risk area for ticks, but this does not mean that there is not some tick population here. Our groomer found two ticks on my little brother Barkley a couple of years ago and fortunately removed them. He must have gotten them from just going for a walk around our neighborhood, because there were several unmowed vacant lots we walked by. Your parents should make note that it is always important to keep the grass and shrubbery trimmed in your yard and also keep the weeds under control in all of the flower beds.

Your parents should brush and comb you daily. This is the best time to find ticks that have not yet become embedded in the skin. They can be picked up on a comb and flicked into a container of alcohol, which will kill them. Then dispose of them down the toilet.

To distinguish a tick from a flea, ticks are sluggish movers with 8 legs more like a spider where fleas are insects with 6 legs that hop around all over the place. Also, the size of a tick can vary greatly depending on whether it

has had a meal or not. To give you some perspective of tick sizes, please see Figures 1 and 2.



Fig. 1-Deer Ticks



Fig. 2-Deer Tick varying sizes after a meal

After brushing and combing, your parents should carefully examine around your neck, head and ears to see if they encounter a bump like a small pea. If so, they should move back your fur to see if you have a tick protruding from your skin—in other words, an embedded tick. If you do, then if your parents have some latex gloves, one of your parents should put them on and get some tweezers. The other parent or another family member should hold you.

The parent with the tweezers should then:

- Grasp the tick with the tweezers as close to the skin as possible without pinching your skin.

- Pull the tick with the tweezers using a straight, steady pulling motion. Be gentle; pulling or squeezing too hard on the tick can cause its head to remain lodged in the skin, which can lead to inflammation and secondary infection. If the head does remain lodged, you can always get assistance from your veterinarian.
- Dispose of the tick by throwing into the jar of alcohol to kill it and then dispose of it down the toilet. Do not touch it with your bare hands.
- Apply a good antiseptic cleanser first and then antiseptic ointment to the bite.
- Remove and dispose of the gloves.
- Wash hands thoroughly.
- Clean tweezers with alcohol.

Your parents should observe you for a couple of weeks after tick removal for any signs of illness.

By the way, if you've heard of any folklore remedies like burning a tick with a match, or drowning them in gasoline, oil, or petroleum jelly, I read from numerous sources that these methods do not work. Also, don't flush them down the toilet without first killing them in a jar of alcohol. Just flushing them down the toilet will not kill them, believe it or not.

Sincerely,
Sophie



UPCOMING EVENTS

NO SCHEDULED EVENTS AT THIS TIME

RESULTS OF EVENTS PAST & DEEPEST GRATITUDE TO OUR VOLUNTEERS!

H.A.P.I. Rescue Meet & Greet, December 4: Due to various logistical complications, MSRH was unable to participate in this event as originally scheduled. We are on the look out for new opportunities for similar events like these in 2011. Stay tuned!

Many thanks to Gabriela Garcia for chairing the H.A.P.I events throughout 2010 and to all of the volunteers who brought foster dogs, helped man the booth, and helped set up and take down. Your efforts have really made a difference!



If you and your pet enjoy listening to the Music My Pet CD, you may also enjoy this one created just for the holidays. "Holiday Treats" is a collection of popular holiday melodies produced with the same calming approach as the first release "Classic Cuts". Play it when you leave the house or whenever your pet needs to relax. It is the perfect gift designed to relax both you and your pet.

Produced by Tom Nazzola, performer on Disney's award winning Baby Einstein DVD's/CD's.

TO ORDER GO TO:

http://secure.musicmypet.com/shop/products_new.php

Price: \$11.99

YOU CAN ALSO DOWNLOAD FROM ITUNES
FOR \$9.99

YOU AND YOUR DOG COULD BE CHARACTERS IN JUDI McCOY'S 6TH BOOK! HERE'S HOW!

Judi will begin writing book #6, "Fashion Faux Paw", in March 2011 (release date 2012). This one will have Ellie and Rudy going to Manhattan for a style show. The models will be walking the runway with a canine companion, also all "dolloed" up in their own attire. One of the models will get murdered. There will be a Mini Schnauzer that needs rescue. Ellie has an old friend (maybe from college) that lives in Houston and belongs to MSRH. Her friend will offer to come get the Schnauzer and bring the dog back to Houston. This will obviously give her friend a chance to play catch up on Ellie's life. MSRH will be mentioned in the acknowledgements along with a write up about our organization. In order for a chance to be Ellie's Houston friend (can use any name you choose in the book) and your Schnauzer to be the one needing rescue, purchase a raffle ticket(s). The chances are \$5/each or 3 for \$10. See Page 10 for ticket forms. All proceeds from the raffle go to MSRH! **RAFFLE DEADLINE IS FEBRUARY 1, 2011.**



NAME: _____

PHONE: _____

EMAIL: _____

Miniature Schnauzer Rescue of Houston Says:

"Thank You Judi McCoy!!"

Raffle Tickets: \$5 each OR 3 for \$10

Make checks payable to: "MSRH"

Mail tickets to:

MSRH

1827 Ash Meadow

Houston, Texas 77090

Judi McCoy is the author of "The Dog Walker Mystery Series" and is offering you an opportunity to have YOU and YOUR PET featured in her sixth book,

"Fashion Faux Paw"

due out in 2012. All proceeds benefit MSRH! If you win, you'll be contacted to provide the names for Judy's newest book! **Raffle Deadline February 1, 2011**



NAME: _____

PHONE: _____

EMAIL: _____

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due out in 2012. All proceeds benefit MSRH! If you win, you'll be contacted to provide the names for Judy's newest book! **Raffle Deadline February 1, 2011**

Many Thanks To Our November Transport Volunteers!

MUCH APPRECIATION GOES TO: Sally Jo was picked up from BARC by **Sherry Eitel/Marilyn Malaney** on 11/03/10; Kerski, a stray, was picked up by a **Good Samaritan (Ellen)** on 11/03/10; Corky & Cory, owner surrenders, were picked up by **Sherry Eitel**, on 11/09/10; Starbuck was picked up by **Wendy Rodriguez/Mary & Thomas Hamblet/Marilyn Malaney** from San Antonio Animal Care Services on 11/10/10; Frasier was picked up by **Debbie Hancock** from Deer Park Animal Control on 11/11/10; Hummel was picked up by **Kara McClain** from Pasadena Animal Control on 11/13/10; Meredith, Regina & Rory were picked up by **Thecia Taylor/Cheryl Martinez/Ivonne & Ruth Palacios/Marilyn Malaney** from Harlingen Animal Control on 11/14/10; Lady Bug, a stray, was picked up by **Lindsey Updegraff** on 11/14/10; Cole & Levi Strauss, owner surrenders, were picked up by **Mona Wroblewski** on 11/15/10; Sherman, an owner surrender, was picked up by **Marilyn Malaney/Jennifer Slaton** on 11/16/10; Adeline, a stray, was picked up by **Marilyn Malaney** on 11/19/10; Bitsy, an owner surrender, was transported by her owner on 11/19/10; Luka was picked up by **Zach Stippel/Beth Bedar** from Beaumont Animal Control on 11/23/10; Kona & Orson were picked up by **Angela Palmer/Marilyn Malaney** from Harker Heights Animal Control on 11/26/10; Farley was picked up by **Marilyn Malaney** from Conroe Humane Society on 11/27/10; Tucker was picked up by **Wendy Rodriguez/Donna Paparrazo/Marilyn Malaney** from San Antonio Animal Care Services on 11/27-28/10; and Carrie Elizabeth was picked up by **Donna Paparrazo/Laura Yokel** from BARC on 11/28/10.

From the Editor

Dear Readers:

Those of you who have senior dogs may find the article on Cushing's Disease this month of interest. I have had permission to print this article for a whole year, but am just now getting around to doing it deciding it was time. Why? Just this year I met two people who told me their dogs were suffering from it. One I met at the Reliant dog show, and the other is a lady who owns a store here in Galveston where I shop from time to time. So, the disease must not be that uncommon. Now that you know what to look for, watch for signs and get to a vet for a check up, if necessary.

On another note regarding doggie health, my dog Barkley has been troubled with itchy skin most of his life. It is worse at certain times of the

year than others, so it is apparent that it is allergy related—but to what?

We've tried prednisone a few times when the itch was at its worst, but as soon as we stopped that therapy, the itch was back. I didn't like this approach one bit, because of the long-term side effects. We've tried therapeutic shampoos to no avail, too. Our vet has suggested that we try cyclosporine (brand name Atopica®), which is not a steroid. It belongs to a drug classification known as an immunosuppressant. I don't like the sound of that either, but my vet gives it to his own dog with great results. First, you start out giving a daily dose for about 4 to 6 weeks after which you should be able to ultimately reduce it to a dose twice weekly. We're going to try it and hope for the best. After



Linda with Sophie & Barkley

all, little Barkley is scratching right now until he bleeds. If you have experience giving this drug to your dog, I'd like to hear your thoughts on it. Please e-mail me at newsletter@msrh.org. If I can share it with the readers, let me know. If you want it kept confidential, I will honor that.

Sincerely,

Linda

Happy Holidays from the MSRH Family to Yours!