

Staff News

It does not seem possible that 12 months have passed since Head Nurse Michelle and V/N Nicola both went on maternity leave, but they are now back with us. Michelle has been with the Practice for over 11 years so is well known to many of you. Nicola will be arranging our regular puppy parties again, so if you have a new puppy and would like more information give the surgery a call. With their return to the nursing team and the addition of 2 new trainees Haley in her second year and Sharon her first we now have a full complement of nurses available to help and offer support at all times. Please talk to our reception team about the various nursing clinics the team offers.

Congratulations go to trainee V/N Lucy Monnery who passed her exams in June, we are very proud of her.

Sadly for us V/S Andrew Phillips is leaving us to work in New Zealand. Andrew joined us 3 years ago and has become a very valued member of the team and will be missed by clients and staff, we wish him well in his future career.

Over the last 3 years we have had a student veterinary surgeon with us, Alex Civello and we are pleased to announce that he will be joining us from late July as Andrew's replacement.

Why not visit our website to read more about the staff of Cliffe Veterinary Group. www.cliffevets.co.uk

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SUMMERTIME feature...

by Steve McKeon, BVetMed, MRCVS
Glenthorne Veterinary Group



The Eurotunnel's booked and the Pet Passport is ready, but as more pets accompany us on European holidays we should consider the foreign diseases they may encounter and how to protect them. Even in the UK, similar 'vector-borne' diseases (diseases carried by insects and passed on to our pets) are becoming more common. Some simple precautions will reduce the risks and keep our animals healthy.

Diseases encountered when travelling!

The Pet Travel Scheme's main purpose is to protect human health and the threat to the animal population from Rabies. Pets can contract other exotic diseases if bitten by infected insects such as sandflies, mosquitoes and ticks which are more prevalent in warmer climates. Unlike rabies, there are no effective vaccines to protect against these diseases. Animals may not show symptoms until long after their holiday and their return to the UK. Diagnosis can be difficult and when treatments are available they may be complicated and not always successful.

The key to preventing these diseases is to avoid the ticks and flies which spread them:

- Effective 'spot-ons' and collars that kill and repel ticks and insects are available from your vet. Apply at least one week before travel and follow the directions carefully; some have to be repeated fortnightly.
- Check your pet's skin thoroughly every day and remove any ticks. Don't pull ticks out because this leaves mouthparts in the skin. A 'tick-hook', available from your vet, removes ticks cleanly and easily.
- Trips to the Mediterranean and Southern Europe are safest in cooler seasons when mosquitoes and sandflies are less active.
- Sandflies bite from dusk to dawn so keep dogs indoors at night.

Monthly worming with a product recommended by your vet will kill larval heartworms before they become an established population in the heart. It's best to discuss travel plans with your vet to formulate a parasite treatment schedule for your pet.

Bon voyage!

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Lyme disease (in UK!)

- Ticks transmit this bacterial infection to dogs and cats causing fever, lethargy and arthritis.
- Ticks on vegetation attach to passing animals.
- Ticks are widespread in UK woodlands, heathlands, moorlands; particularly South West England, Lake District, Wales and in Scotland.

Babesiosis

- Protozoan parasite spread by ticks to dogs.
- Invades red blood cells and causes fever and severe anaemia.
- Prevalent throughout France and most of mainland Europe.

Ehrlichiosis

- Bacterial infection spread by ticks to dogs and sometimes cats.
- Highest risk areas are South of France and Mediterranean countries.
- Symptoms: fever, swollen glands, bleeding, weight loss, arthritis and nervous signs.

Heartworm

- Spread to dogs and cats by infected mosquitoes.
- Worms live in arteries between the heart and lungs.
- Prolonged warm temperatures allow worm to develop inside mosquito, so highest risk in summer in Southern Europe.
- Symptoms: coughing, weakness weight loss, and finally heart failure.

Leishmaniasis

- Protozoan parasite spread by sandflies to dogs and rarely cats.
- Highest risk in summer in Mediterranean coastal areas.
- Dogs suffer weight loss, skin disease, liver and kidney problems.

WORKING TOGETHER FOR A HEALTHIER FUTURE

Small talk

Nursing care...

The role of a Veterinary Nurse with surgical patients

SUMMER 2011 EDITION

CLIFFE

VETERINARY GROUP

SMALL ANIMAL NEWSLETTER

All the Latest News from your XLVets Practice...

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Foreign Bodies...

Foreign bodies in cats and dogs can be the most rewarding or frustrating cases we see as vets...



Welcome...

Gary Jennings BSc, BVetMed, MRCVS, Hook Norton Veterinary Group

Welcome to the summer edition of Small Talk! For those of you planning to travel abroad on the pet passport scheme this summer, we have a timely article looking at potential exotic diseases not commonly seen in the UK. If you are staying in the UK, the hot weather can increase the risk of other illnesses. Heat stroke is a potentially fatal illness and we all must remember the danger of animals being left in vehicles. Foreign bodies in cats and dogs can lead to complicated problems; we provide some hints and tips of what to look out for. Finally, the role of the veterinary nurse is highlighted in the article which focuses on the nursing care of surgical patients. Summer can be a brilliant time to enjoy with your pets and family so have fun!

Enjoy your summer...



by Rebecca Hillman RVN Belmont Veterinary Centre

Nursing care of the surgical patient

Veterinary nurses play a primary role in patient care within the veterinary practice. By working alongside veterinary surgeons, veterinary nurses are able to provide the patients with the best possible care during their time at the surgery. We understand that it can be a stressful time when pets are admitted for surgery and aim to treat each patient as an individual and as if they were our own pets. Behind the scenes, the registered veterinary nurse will be involved in many different areas including the kennels and theatre.

Following admittance, nurses will ensure that the patient is comfortable in kennels by offering warm, absorbent, comfortable bedding along with litter trays for cats and rabbits. Water and appetising suitable food will also be offered as appropriate. To help them settle and reduce anxiety familiar objects such as toys and blankets can also be brought in.

The veterinary nurse is involved in selecting and preparing the equipment and instruments required for surgery. They might also obtain blood samples and connect intravenous fluids known as 'drips' prior to surgery.

Most patients require pre-anaesthetic medication - a 'pre-med' which reduces anxiety and includes pain relief. The nurse will either assist the vet in administering the medication or administer the drugs selected by the vet. After pre-medication the nurse will monitor the patient until he or she is ready for theatre.

When the patient is ready for theatre, the nurse will assist the vet during anaesthetic induction. We ensure that patients are comfortably and safely restrained and give

constant reassurance, allowing the process to be as stress free as possible. The nurse then prepares the patient for surgery by clipping and cleaning the surgical site. During the surgery the anaesthetic is constantly monitored, making appropriate adjustments according to the readings and patient's conditions in conjunction with the vet.

During the recovery period, monitoring continues. Nurses ensure that the animals are not left unattended, and are kept warm and comfortable. Once fully awake and before going home, patients might be walked if appropriate, given a meal and the progress monitored. Good nutrition, appropriate rest and exercise are vital in aiding the recovery.

For many operations the post operative check may be performed by the veterinary nursing team who are well placed to monitor their patients' progress after nursing them through their procedure.



Foreign Bodies in Cats and Dogs

by Bob Pettit BSc (Hons) BVM&S Cert SAS MRCVS Kingsway Veterinary Group

Foreign bodies in cats and dogs can be the most rewarding or frustrating cases we see as vets. It never ceases to amaze me what we sometimes retrieve from our patients, ranging from stones, toys to kitchen knives!

The most common cases occur in puppies or young dogs. Being inquisitive in nature they like to chew and mouth objects which can be ingested and possibly become lodged in the gut. Common offenders are stones, bones, toys and items of clothing which can be embarrassing for the owner when you retrieve several pairs of pants from a stomach! Clinical signs can vary from intermittent vomiting if the object is rattling around the stomach, to an acutely ill dog if the object is stuck in the small intestine. Chop or chicken bones are particularly bad as they have sharp edges which can lodge and penetrate the gut resulting in a fatal infection. The best way to prevent intestinal foreign bodies in young dogs is to ensure that toys and clothing are not left lying on the floor and small bones are not given.

Other common offenders are young cats which like to chew string or wool. Something as innocuous as string can be lethal as the gut tends to grip the thread, telescope itself along its length and can result in perforation with fatal consequences if left. Signs are often vomiting, lack of appetite and lethargy.

The really challenging cases involve the ingestion, inhalation or penetration of plant material. Cats and dogs often chew grass which is covered in small barbs and this can get stuck behind the soft palate. This can result in a dramatic onset of gagging, retching, sneezing, and occasionally grass sticking out of the nostril. Other common cases involve dogs running onto thrown sticks, thorn injuries in pads and working dogs which inhale grass seeds. Grass seeds are notoriously problematic as they tend to migrate and result in infection in many areas of the body. These cases often present with vague signs such as a high temperatures, off food and maybe a mild cough. As plant material can't be seen easily on x-ray it can be very difficult to locate the foreign body and may require CT or MRI scans to find the object.

On a final good note, in most cases, once the culprit is found and removed the animal will generally make a full recovery.



DID YOU KNOW...

Sticks may splinter and cause damage to a dog's digestive system as they pass through...



Verity J. Griffiths BSc(Hons), MA, VetMB, GPCert(SAS), MRCVS, Southfield Veterinary Centre

Anaesthetic care...

Once in a while, something happens which makes you reassess your attitude to a situation. It was about three weeks ago when one of my dogs started falling over and holding her head on one side. As a vet I knew there were a number of possible clinical conditions which could be causing these distressing clinical signs but, as a worried owner, all rational thought abandoned me!

Suddenly I was in the shoes of a frightened, concerned, worried pet owner. My pet was going to require an anaesthetic to investigate her problem. Many times, I have had to explain why an anaesthetic may be required, what we use and how safe it is to a client in the position in which I now found myself.

The definition of anaesthesia is 'a reversible process of depression of the central nervous system with drugs and a reduced or absent response to noxious (nasty) stimuli, which the patient does not recall'. It may come in two different forms, general anaesthesia or local (or regional) anaesthesia. As the name suggests the latter is the use of drugs to temporarily block sensation in a small area of the body by using either topical gels or solutions, or localised injections to numb an area or part of the body. In small animals we occasionally use these techniques perhaps by giving an epidural if performing hind limb surgery for example. However, in most cases, because we can't ask our patients 'to sit still and don't move' we use a general anaesthetic. A general anaesthetic can be induced by inhaled gases or by a drug injected into a vein

(intravenously). It is up to the vet in charge of the patient to decide which regime is most appropriate for that patient. Is it a fit healthy animal coming in for a routine procedure such as a castration or is the patient very poorly where other factors then have to be considered? The vet is also responsible for assessing whether they have the facilities, skills and experience to use a particular anaesthetic protocol. Most modern practices now have monitoring equipment and staff trained to an extremely high standard, with techniques and drugs being used in veterinary practice which are also used by our medical colleagues in human hospitals.

As I tell my own clients, 'we use the same anaesthetics and equipment used for 90 year olds having hip replacements!' Yes, there are risks for any animal undergoing an anaesthetic but, we try to reduce these risks to a minimum with skill, excellent monitoring, appropriate drug choice and extreme care of the patient at all times.

I took comfort in reminding myself this and knew Ochre was in the 'best possible hands'.

