



Dog and Cat Vaccination



The concept of vaccination is probably one of medicine's greatest ever discoveries, and the role of vaccinations in preventing serious disease in both animals and humans cannot be under-estimated. It remains an essential part of 'pet health care' and, in most cases, it's advised that all dogs and cats are vaccinated appropriately. However, there has been much discussion recently as to whether we are now 'over-vaccinating' our animals.

About Our Vaccinations

In dogs, we vaccinate against distemper virus, adenovirus 1 (hepatitis virus), adenovirus 2, parvovirus and para-influenza virus. This constitutes the 'DHPPi' component of our vaccines. We also vaccinate against 4 strains of the *Leptospira* bacteria, which constitutes the 'L4' component of our vaccines. Leptospirosis is the 'dog equivalent' of Weil's disease in humans and is transmitted via a number of different animals depending on the strain of the bacteria. These include rats, other dogs, horses and pigs. It is not common but sadly is often fatal.



We can also give dogs the 'kennel cough' vaccination, which provides **partial** protection from the *Bordetella* bacteria. Kennel cough is actually caused by a multitude of infectious agents, so dogs can still get kennel cough despite the vaccination. The 'kennel cough' vaccination is given up the nose and is generally not well tolerated, but is often a requirement of boarding kennels.



Following the initial puppy course and first year booster, we only vaccinate dogs with the 'core' (distemper, adeno and parvo virus) component every 3 years. However, the antibody response to the parainfluenza (Pi), leptospirosis (L4) and 'kennel cough' vaccinations are much shorter-lived than the 'core' vaccine components and these need boosters annually.

In cats, we vaccinate against calici virus, panleukopenia virus (feline enteritis) and rhinotracheitis virus (feline herpes). This constitute the 'CVR' component of our vaccines. We

also vaccinate against the leukaemia virus, which constitutes the ‘Leukocell’ component of our vaccines. Cats require annual boosters to all of these except the rhinotracheitis/herpes virus. There is a vaccine against the FIV virus (feline AIDS) but this is not available in the UK.

Our protocol for vaccinating new puppies and kittens depends on if, and when, they had a first vaccination, what components were in that vaccination, what manufacturer produced it, and the age of the animal. Unfortunately vaccinations from different manufacturers are often not compatible. Hence, how we vaccinate your puppy and kitten is dealt with on a case by case basis.



What Are The Concerns?

One reason vaccination has created so much debate is that many of these illnesses are now very rare. The main reason for this is because we routinely vaccinate against them - should our vaccination protocols drop, this may no longer be the case! A number of the diseases we vaccinate against are very serious and often fatal.

The other concern is the risk associated with vaccination. Severe vaccination reactions are rare, and development of an adverse reaction is often dependent on the animal’s genetics (eg. small breed dogs, certain families). A swelling on the neck at the injection site, slight neck pain and mild lethargy post vaccination is, however, common. We also have to be very careful when vaccinating any animal with a previous history of adverse reactions to vaccination and/or immune-mediated disease. Vaccination is often not recommend in these cases.

However, for any vaccination to be licensed, it has to undergo stringent safety tests. There has been a detailed review on pet vaccination by the WSAVA, which can be found online <https://www.wsava.org/Guidelines/Vaccination-Guidelines>. There is also the option of performing antibody testing for the ‘core’ diseases instead of re-vaccinating but there are obvious cost implications to this. Performing an annual vaccination and check-up also ensures we are able to examine your pet and pick up potential illnesses earlier than would otherwise be the case.

As with all medical interventions and procedures, a risk:benefit analysis must be made.

If you have any further questions on vaccination, how they work and/or antibody testing, please do get in touch with us.