

Vaccines

We over-vaccinate in this country. Vaccines are effective in controlling diseases in populations, but should be used judiciously knowing they can also cause disease in individuals. We recommend that clients minimize vaccines where sensible. Over-vaccinating our pets is not a benign action. Vaccines have the potential to cause adverse effects and reactions that vary from mild to life threatening. Vaccines, by design, will stimulate the immune system, but they can, if overused or poorly made, overstress the immune system.

Over-vaccination is implicated in many immune system issues, cancers, seizures and other chronic systemic conditions. This is why we will not vaccinate animals that are too young, or too old, and we will not recommend vaccinating an animal that is ill.

The Royal Treatment Veterinary Center recommendations include separating vaccines - give one injection at a time, and wait 10 -14 days before the next vaccine (i.e. do Rabies or other vaccines at least 2 weeks apart from other vaccinations).

Note: The only vaccine required by law for an adult dog in Illinois is a 3-year **rabies vaccine**. The 3-year and the 1-year are poured out of the same vat, but are just labeled differently. The reason for this is that the first vaccine must be boostered before it lasts 3 years, so there has to be a vaccine labeled 1 year to make sure that boostering takes place in a puppy or for the first time a pet gets the rabies vaccine. After that, the vaccine lasts at least 3 years. There is research being done that proves that the 3-year vaccine lasts 5-7 years. But it will not be legal to use vaccines at that frequency until the FDA approves this research. We'll keep you posted.

Other vaccines are given based on the age, and condition of the animal, and the possible risk of exposure.

Distemper combination vaccines are given as puppy series. There can be a booster given at a year of age, or pets can have blood tests to help determine if there is still immunity to avoid having to give the vaccine again. This blood test is called a vaccine titer. The distemper combination vaccine is now considered at least a 3-year vaccine. Most people in immunology suspect it is likely a lifelong immunity from the initial puppy or kitten series.

Many kennel facilities and dog parks may have their own requirements. Often, even if a distemper vaccine is required, the facility will accept a blood titer test instead (it will proves that the animal still has immunity to the disease).

Bordatella is required (we recommend the new oral vaccine to use where possible) for most boarding facilities and dog parks, it is typically a once a year and some facilities require every 6 months.

Leptosporosis vaccine is an annual vaccine that can create significant adverse reactions so we try to avoid this vaccine if possible. The vaccine may be required for dog park tags in very congested urban areas with exposure to rats and rat urine or if an animal swims where there may be diluted rat urine. Leptospirosis is a very serious disease that can be treated with antibiotics and often requires hospitalization, and even with treatment it can be life threatening. The risks from the vaccine are also serious and potentially life threatening. We do not generally recommend this vaccine, and even our local neurology specialist does not recommend this vaccine for patients because they see so many pets with seizures secondary to the administration of this vaccine. Ask your veterinarian to assess your animal's risk/benefit for this troublesome and annual vaccine.

Lyme vaccine is a vaccine that we do not recommend. It can cause signs of Lyme disease that are not treatable with antibiotics. Lyme disease is treatable with antibiotics and holistic medications and the vaccine is not one we recommend.

Vaccines for **Giardia** and vaccines for **Corona virus** are not necessary and we do not recommend them.

PREVENTIVE MEDICINE

Heartworm disease is carried by mosquitoes and the first stage of the disease happens when an affected mosquito (not all are affected) bites a dog. This stage itself does not pose a health threat; the tiny microfilaria circulate in the bloodstream and take a few months to change into their next life stage, which is a worm that lives in the heart. The problems occur when these microfilaria change in to worms that are more difficult to kill and can lodge in the heart (which can be between 2-5 months after infection). Heartworm medication given monthly or every other month kills the small microfilarial stage that may have infected the dog in the previous month or more. Killing the small form of the heartworm microfilarial parasite keeps it from from becoming the large heart worms that become a problem in the heart. This is why we say that it protects for "the month before it is given." Any pet that has been infected by a mosquito bite has a couple months (maybe 5 months) to get rid of the infection before it becomes the large worms. The Heartworm medications kill the microfilaria. This is also why we give the medication in Chicago from June (to protect for May and April mosquitos) through December (to protect for November and October) during any possible mosquito exposure. There is no need to give the medication if there has been no mosquito exposure during the previous month or two. If you travel where there are mosquitoes, it is important to give the heartworm medication *after* travel to mosquito areas. Because some breeds and sensitive animals do better on Interceptor rather than Heartgard, we prefer Interceptor for prevention.

We are working on an alternative protocol to avoid having to give prevention. The heartworm test that we do annually to make sure a pet isn't harboring any adult worms is testing for only adult worms. But we can do blood tests (different from the typical annual heartworm test) to look for the tiny microfilaria, and do it periodically and with enough time to kill them before they become adult worms in the heart. If we get a positive test, then we will use Interceptor heartworm prevention.

Flea and Tick Control

We do not recommend using any pesticides for flea and tick control. Besides the fact that pesticides are implicated in many disease conditions, it is also not good for our environment to use pesticides topically on our animals. An animal with a topical or oral pesticide is shedding this pesticide from the skin and simple activities like swimming in a pond will cause the death of all the invertebrates within 10 feet. This means that the shedding of the pesticide in the skin is not benign and can certainly affect the environment, humans, children and other pets. Our world does not need more pesticides. There are many effective and less toxic methods to deter ticks and fleas. We recommend an essential oil combination that is used as a once a month leave-on and also can be a topical spray to use even daily.

If pets develop fleas, we recommend using the essential oil leave-on topical once monthly for 3 months, use flea shampoo1 x week, flea combing and wash bedding 2-3 x week, vacuum floors and rugs well 3 x week. Usually that is all you need to do.

Ticks on an animal should be pulled off with slow deliberate tension. Do not use matches or topical chemicals. Make sure to check the tick to see if the head is still intact (they are very small). If you need help, you can save the tick for identification or to check the head at your vet. Identifying the tick can be useful to see if it is a carrier of Lyme disease or other tick-borne diseases, depending on the geographic location where it was contracted. Deer ticks are VERY small, and are different than dog ticks, that are easily found.