

SWISSY SPLEEN SYNDROME -David E. Jackson, VMD and Sharyl L. Mayhew, BA, LVT

(Exerpt from full article printed in the Senninel)

All dogs, from Chihuahuas to Mastiffs are the same species. All dogs, because they are canines, share some common attributes and problems with all other canines. Each individual breed of dogs has been developed over time for certain special attributes, appearances, and abilities, and indeed some problems have grown to be considered breed specific as well.

Mixed breed or random bred dogs are often touted as being healthier or more vigorous than their purebred cousins, but in reality, they suffer from some or all of the illnesses and diseases that affect the entire species, and at the same rate at which their purebred cousins succumb. The difference is that there are no special studies or information gathering groups that document and follow the issues of mongrels. On the other hand, national breed clubs and breeders regularly discuss problems they encounter with their fellow fanciers and breed enthusiasts.

Studies are funded and papers are written about rare and strange, as well as unusually common, problems encountered within certain breeds or breed types of dogs. We all know that Dalmations are prone to deafness. We know that Irish Setters are more likely to bloat than many other breeds and we know that Bedlington Terriers have a storage disease that seems to affect them out of all proportion to all other dogs. We are grateful that the Greater Swiss Mountain Dog Club of America has invited us to write to the quarterly SENNtinel about our unique experiences with this wonderful breed. We hope that our experiences may help others and we hope to continue to gather information about specific problems that seem to occur in GSMD's, particularly at this time, with their spleens.

Greater Swiss Mountain Dogs and fanciers are still infants in the purebred dog world of today. The breed has been around a long time, but the organized study of documented cases of problems has only just begun. You are a small group, relatively speaking. Many people, many veterinarians and many otherwise knowledgeable dog people have barely, if even, heard of GSMD's. A handful of veterinarians, who have clientele made up of breeders and longtime owners of the breed have information based on experience that others throughout the country do not. For the most part, this breed is relatively healthy for the size that they are. GSMD's are plagued with far fewer problems than more populous breeds, for example Rottweilers, or German Shepherd Dogs, in the similar size range. The national population of your breed is not sufficient for the average veterinarian to see enough of them to start to form opinions about what a "typical" Swissy problem might be. Fortunately, because of our location and our clients with fair numbers

of Swissies, and because of our ability to communicate now as never before, we are learning some things about Swissies that we hope to share with others throughout the country.

If you mention spleen to most people, they will have a blank look. If you say spleen to long time GSMD owners they grow pale and sweaty. The spleen is the largest single mass of lymphatic tissue in the body. It is an organ that assists with immune function similar to the way the lymph nodes work. Enlargement of the spleen (splenomegaly) may be coincidental or caused by disease, medications, sedation or trauma. In most dogs, mild splenomegaly is not considered remarkable and may even be expected when the animal is fighting an infection or disease. Many cancers that affect dogs become evident on the spleen first. All dogs can have a tumor or tumors on the spleen that prove deadly, whether malignant or benign, because if the spleen or the tumor bleeds, the dog may die.

Torsion of the spleen is generally considered a coincidental finding after a gastric dilatation volvulus event (GDV - bloat/torsion of the stomach). The prevailing consensus is that the stomach bloats and twists and takes the spleen along for the ride. GDV is a medical emergency and surgery is needed to decompress the stomach, reposition it and tack the stomach so that it will not likely torse again. Many times the spleen is checked for viability or gross damage and left in place if necrosis is not present at the time of the surgery to repair GDV.

Some Swissies who have GDV also have torse spleens. This is consistent with all other dogs that suffer GDV. However, GSMD's have regularly demonstrated that, on this subject, they do not exactly fit the mold. In the veterinary literature, this topic is briefly discussed, if at all.

In a normal Swissie, the spleen looks smooth and uncreased, and is about the size and shape of a good NY Strip steak - 6 to 8 inches long by 2 inches wide, and not very thick-less than one inch. However, at a rate too numerous to ignore, it seems apparent that many GSMDs may suffer pronounced splenomegaly for no obvious reason other than the spleen may have been constantly twisting, folding, and unfolding. Most of the spleens removed from GSMDs are 18-24 inches long, 8-10 inches wide and very thick. We have seen from 2-6 inches. This size spleen is not at all an uncommon abnormal finding in this breed.

PRIMARY SPLENIC TORSION WITHOUT ACCOMPANYING GDV IS RELATIVELY RARE IN DOGS, BUT IT IS NOT EVIDENTLY RARE IN THE GSMD. THE TYPICAL PRESENTATION OF A GREATER SWISS MOUNTAIN DOG WITH A TORSSED OR DAMAGED SPLEEN IS NOT THE SAME AS IT IS WITH MOST OTHER DOGS, I.E. IN OUR EXPERIENCE THEY DO NOT SUFFER GDV FIRST OR AT ALL. IT IS OUR SUPPOSITION THAT GSMDS MAY HAVE A BREED TENDENCY OR A CONFORMATION

ANOMALY THAT ALLOWS OR CAUSES THE SPLEEN TO CHRONICALLY FOLD OR PARTIALLY TORSE AND THEN RETURN AGAIN AND AGAIN TO NORMAL POSITION OVER A PROLONGED PERIOD OF TIME. THEY MAY ALSO BE PREDISPOSED TO PRIMARY SPLENIC TORSION WITHOUT ANY GASTRIC INVOLVEMENT WHATSOEVER. WHETHER THE SPLEEN IS CONFORMATIONALLY HANGING IN AN UNUSUAL POSITION OR HAS BREED SPECIFIC WEAKNESS OR LAXITY IN PLACEMENT, ATTACHMENT (GASTROSPLENIC OR SPLENOCOLIC LIGAMENTS) OR BLOOD SUPPLY IS UNKNOWN.

We are at the beginning of discovering many of the medical realities of this breed. It is possible that splenic torsion in this breed is something new, possibly with an environmental cause that we do not yet suspect, but we think it more likely that it is a BREED SPECIFIC PROBLEM that has been there all along. While we are not prepared to recommend or suggest that any normal spleen be removed as a precaution, we are suggesting that the possibility of a splenic abnormality be discussed with every Swissy owner before an abdominal surgery so that appropriate guidance and pre-approved permission to remove the spleen is granted.

Splenectomies performed on other breeds have always been for tumor removal or for traumatic injury. In our practice we have only seen idiopathic independent splenic torsion occur in the GSMD.

Dr. Jackson very generously is willing to donate his time to talk to veterinarians and owners regarding any Swissy medical question. DEJVMD@aol.com. VCA-University Veterinary Clinic, 10681 Braddock Road , Fairfax , Va 22032 , (703) 385-1054