

# **BLOODLETTING, BAR FIRING AND VETERINARY DENTISTRY A Case for Extraction**

**Presentation to  
VETERINARY PROFESSION  
STEPHEN ROBERTS LECTURE THEATRE  
UNIVERSITY OF SYDNEY**

**16 June, 1993**

Dr. TOM LONSDALE B. Vet Med MRCVS  
RIVERSTONE VETERINARY HOSPITAL  
GARFIELD ROAD  
RIVERSTONE NSW 2765  
AUSTRALIA

Tel: (02) 627 4011  
Fax: (02) 627 4285

Copyright (1993) T Lonsdale  
All rights reserved



**'PREVENTION ABOVE ALL'**

BLOODLETTING, BAR FIRING AND VETERINARY DENTISTRY  
A CASE FOR EXTRACTION

Copyright 1993 Tom Lonsdale  
All rights reserved

*'It is a curious commentary upon the human mind that absurdity and brutality make a stronger impression than commonsense.'* (Smithcors, 1958)

Interventionist veterinary dentistry is a modern creation with a regressive streak taking us way back to the dark ages of veterinary teaching. It ignores the injunction, *'the true practitioner of the veterinary art, is one whose practice is as rational as the knowledge of the times permit'* (Smithcors, 1958). Ignoring the omens, the incontrovertible natural truths and cries of derision the veterinary dentists crash on through. Rather than crash on through it is my view that the current veterinary dental ethic should crash in disgrace. Strong words you might say.

Fortunately, in olden time it was only some individual animals that were forced to undergo barbarous procedures. Nowadays the sophisticated market is driven by organised commercial interests employing a pliant mass media. Cultural conditioning has ensured modern pet owners force feed their animals processed pet foods. Virtually the entire pet population suffer insidious oral disease and the systemic consequences. Veterinary dentistry, on the surface a benign activity, panders to and profits from this disgraceful state of affairs.

#### The Historical Context

J F Smithcors' 'Evolution of the Veterinary Art' provides a wonderful source of information on the attitudes and conduct of our veterinary forbears. He records that down the ages blood thirsty phlebotomists have perpetrated their evil. At first the quantities extracted were measured in quarts rather than gallons. In the 1840's an eminent British veterinary surgeon commented, *'when bleeding is necessary the jugular vein should be freely open, the animal's head being held high, and the stream of blood permitted to flow until the pulse wavers or the animal becomes faint'*.

In the early 18th century Gil Blas writes of his experiences apprenticed to the physician Sangrado, *'it was a vulgar error that the blood is of any use in the system. The faster you draw it off the better'*. Not uncommonly the patient died with those attending believing they had been too lenient with the lancet.

Hot objects have been applied to various parts of the body since the early attempts at healing. In all centuries some have spoken out against the practice. The third edition of Dollar's Veterinary Surgery published in 1946 carried directions on firing. As a school student in 1967 I can remember rubbing the blister into the recently fired forelegs of a steeple chaser. The neck cradle was applied to prevent self mutilation once the local anaesthetic wore off. On 7 February, 1991 the council of the Royal College of Veterinary Surgeons voted that firing should be declared an unethical procedure. Once having connived at the practice the overseers of the profession were necessarily reluctant to rush into condemnation.

#### Specialists and Quacks

What is it that characterises these elaborate interventions which have so little benefit for the patient and yet enables them to persist? On an immediate plane we can say we are all creatures of habit with a diverse range of concerns. Our full schedule excludes a detailed consideration of any one aspect of our lives. Cultural conditioning and the structure and content of formal teaching have immense impact. During the renaissance Vesalius passed comment on what he saw as undue specialisation, *'this deplorable dispersion of the curative role brought a detestable procedure into our gymnasiums, wherein some were accustomed to administer the cutting of the human body while others narrated the history of the parts. The latter, indeed, from a lofty chair arrogantly cackle like jackdaws about things which they never have tried, but which they place in written form before their eyes. The former, however, are so unskilled in languages that they cannot explain the dissections to the spectators. They merely chop up the things which are to be shown on the instructions of the physician, who, having never put his hand to cutting, simply steers the boat from the commentary - and not without arrogance. And thus all things are taught wrongly, and days go by in silly disputations. Fewer facts are placed before the spectators in that tumult than a butcher could teach a doctor in his meat market.'*

Paracelsus, described by some as the most original thinker of the 16th century, by others as a bombastic braggart had this to say about quackery as he saw it. *'Now when any enterprise is directed towards selfish gain the art becomes falsified and the results as well.....quacks maim and cripple, throttle and slay in order that their own profits may increase.'* Allegedly one of the greatest quacks of all time was Markham whose Maisterpeece was first published in 1610 and went through 21 editions, remaining popular for 100 years. He recommends *'watering a horse only once in 24 hours, a fat horse from a 'crystal spring' but a lean horse should be given undiluted sewage from a dung hill or a common sewer. Or river water into which blood, offal and excrement are cast. The horse should be ridden after watering to heat the water and before racing the rider should micturate into his horses mouth!'*

### Self Deception

A willingness to engage in self-deception unites the old phlebotomists, cauterisers and the modern-day dentists. A gullible public is useful as are dumb, uncomprehending patients. All crackpot notions stem from somewhere and in this case we can say it is direct colonisation of the mind by men from the land of Gumabone, Nylabone and Nylafloss. The initial acquiescence gives way to eager adoption of the new fashion. For a successful mythology to grow it is helpful to develop elaborate methods. The old time frock-coated physicians devoted much effort to the perfection of a grave expression. They instructed the surgeon with flourish and the running of blood provided the colour and sound effects. Roping a miserable horse and the positioning of the irons was a dangerous and dramatic affair. Clearly the practitioners possessed extraordinary powers and the animal must have been of great worth to warrant such major intervention. The owner stood proudly by.

Our dentists now perform theatrical feats with the most elaborate equipment. Their follow-up recommendations require ritual and not a little blood letting. That people who know that their own oral disease is due to inadequate toothbrushing can be persuaded to brush the teeth of a cat is both extraordinary and true.

For really wicked confidence tricks to perpetuate requires that the problem be ubiquitous. Periodontal disease is certainly in this category. Without treatment it gets progressively worse. That the dentists preferred treatment makes very little difference is a benefit since they can argue that more not less treatment is required. Accordingly they prescribe more toothbrushing which brings their clients into even closer contact with their failure. This achieved it is easy to require the six monthly attention at the hospital (or should we say theatre) with the lights and the smell for 'prophys' under general anaesthetic.

### Mutual Endorsement

Having secured dominance the collaborators spend much time quoting each other in order to defend their positions. The anatomical and physiological facts are generally agreed by all parties. As one would expect the dentists and pet food people weave these into their tale as if one item of fact renders the whole elaborate fabrication true.

*'Well, the Australian Veterinary Dentistry Association through Jeff Brady have recommended "that the best preventative home dental care includes a nutritionally sound diet in conjunction with regular raw marrow bones weekly". We would totally concur with that.'* (Dr K McQuillan, representative of Uncle Bens of Australia, ABC Radio National Daybreak, 14 September, 1992)

*'What I recommend is that dogs should be fed a nutritionally sound diet which would be the easiest way to go is with tinned food such as Pal, Whiskas and any of the better known commercial brands. But they need dental exercise and so on that they should have hard dog biscuits or eat bones regularly two to three times a week. But it's a very simplistic approach to say that if you give a dog just a natural diet of bones he's never going to have teeth problems. That's a fairytale.'* (Dr Stephen Coles, Radio National, Daybreak 14/9/1992)

Pathology and treatment appear to be the subject of a mutual agreement between the dentists (and other vets) and the commercial interests. Pet food company advertising material recommends attendance at the vet clinic on a regular basis. Once at the clinic there is likely to be a wide choice

of processed pet food on display and posters proclaiming the evil of bacterial plaque. (If a major corporation were to sell bacterial plaque might they reach an agreement with the vets and pet food companies? After all the bacteria have been here for 3.5 billion years and it's about time someone stuck up for them.)

We should be careful not to tar all people with the same brush. Many vets are unaware of the significance and prevalence of periodontal disease. *'It would appear that the veterinary surgeon-patient approach to reducing periodontal disease in dogs and cats is largely ineffective and that people have come to accept that periodontal disease is inevitable'*. (Borthwick, 1987)

Denise Humphries, Consultant, Pet Care Advisory Services (Public Relations arm of the pet food industry) speaking on ABC Radio 2BL, 5 February, 1993 *'Cats don't have a great deal of problem with their teeth if the owners are careful.'* as she was extolling the virtues of new-fangled milk products (liquid food) and other canned concoctions.

### MASS PSYCHOLOGY

Social scientists have commented that Mussolini's Italy and Hitler's Germany depended on the State control of the mass media. By simultaneously creating a climate of fear and also providing paternalistic support thoroughly obnoxious regimes could proliferate. We saw how the quack Markham implied that natural foods were in some way inferior but his *'lean horse should be given undiluted sewage'*. The modern equivalent can be found in the pet food advertising which selectively condemns one partial aspect of a diet whilst trumpeting their own 'magic formula'. The climate of fear of the natural is thereby created, the paternalistic solution provided and all done so effectively by control of the mass media.

It took a long and bloody war to end the fascist distortion of social values. When one considers that the pet food industry probably commands resources and media influence equal to Hitler's Germany then it may be that we are in for a long haul.

The old adage that 'a little knowledge is a dangerous thing' is particularly apt in the instance of our phlebotomists, cauterisers and veterinary dentists. This, of course, is another 'commentary on the human mind' and as recently as 20 June, 1993 Max Walsh was writing in the Sydney Morning Herald on yet another aspect.

He quotes from Professor Argyris in his book, 'Knowledge for action' which details a universal organisational disease. (And I am thinking of the veterinary and veterinary dental professions)

*'According to Chris Argyris, all organisations are prone to this because it flows from a natural human response that we practice from the time we leave the cradle. This is the response we have to particular problems, problems that we see as personally threatening. What we do, with increasing skill as we mature, is develop ways of by-passing the problem, then of covering up the by-pass and then covering up the cover-up.....as a result, instead of being cleared up, the original flaw not only goes on festering, but its very existence becomes taboo - undiscussable, and so irremediable.'*

It would seem that all persons in the hierarchy learn that all new news is to be treated as bad news since the messenger usually shoulders the blame. Regardless of who is to blame in the diet and disease rort the tale needs to be told. Please read on.

### THE SCIENTIFIC ARGUMENT

Those who invoke the scientific argument frequently have least idea of the meaning of the term.

*'Ask a scientist what he conceives the scientific method to be and he will adopt an expression that is at once solemn and shifty-eyed, solemn because he feels he ought to declare an opinion, shifty-*

*eyed because he is wondering how to conceal the fact that he has no opinion to declare. If taunted he would probably mumble something about 'induction' and 'establishing the laws of nature', but if anyone working in a laboratory professed to be trying to establish the laws of nature by induction we should begin to think he was overdue for leave.'* (Medawar, 1972)

They bandy the term around with such familiarity that they have themselves fooled and succeed in fooling too many others beside. If they can be persuaded to disclose what they mean it usually transpires that it is their system of beliefs that they choose to describe as 'scientific' and anything that challenges their smug certainty is labelled 'unscientific'. Inductive logic is extensively employed as a 'proof' of ideas. Statistical models and mere fact gathering are their preferred methods providing them with comfort and mountains of meaningless figures.

Having a hypothetico-deductive/falsificationist approach to the acquisition of new knowledge gives them shudders of incomprehending torment. Their reductionist linear 'cause and effect' model frequently fails them, yet they cling to it with child-like passion. Consider the bacterial involvement in periodontal disease for instance. On the one hand they determine that bacteria 'cause' periodontal disease since germ-free rats do not develop the problem. At the same time they hold the view that bacteria do not 'cause' periodontal disease since the disease appears to advance or remain static, independent of bacterial populations.

Those that would condemn me should note that I was trained and practised their form of 'science' only to find the results decidedly lacking. A turning point for me was the chance meeting with a Greek veterinarian attending the British Small Animal Veterinary Association Conference at Harragate. He advised that I read Lovelock's 'Gaia Hypothesis' and the following hypothesis was born.

***Periodontal disease is the subtle dependable disease which modulates the effects of starvation in wild carnivore population dynamics.***

- ***A 'feedback loop' ensures daily chewing of raw meaty bones sanitises the oral cavity of the successful carnivore.***
- ***Failure of the 'feedback loop' facilitates multiplication of pathogenic bacteria within plaque and development of periodontal disease.***
- ***Incremental losses of carnivores and herbivores are thereby facilitated.***
- ***The populations of herbivores, carnivores and bacteria are maintained in dynamic equilibrium.***

(Lonsdale, 1992. Unpublished)

The old 'cause and effect' paradigm is utilised in conjunction with the 'perturbations at the margin' of the Chaos theory located within the protective envelope of the Gaia Hypothesis. Whilst not proven and an indefinite tool it can yield valuable predictive and descriptive information about our world.

Practitioners, by their very nature, do not have the resources to carry out in depth/controlled studies. They can, however, provide strong anecdotal evidence of field problems. It is the academics' job to produce the hard 'scientific' evidence. So goes the theory but judging by the following the scientific evidence generated by the academics is just a little rubbery.

*'The ideal level of protein intake for dogs is still a matter of debate amongst nutritionists, veterinarians and breeders, with recommendations varying two- to three-fold. Perhaps the best way to investigate this further is by the use of purified diets, but this brings an added challenge*

*because they do not usually reflect the normal diet. Relating these basic studies to practical feeding of the dog represents a key issue for veterinarians and nutritionists to resolve.'*  
(Johnson, 1993)

*'Hazewinkel et al (J Nutr 121:S99-S106) in a study of growing Great Dane puppies with varying calcium and phosphorus levels, concluded that the dogs are unable to protect themselves against chronic excessive calcium intake regardless of the ratio of calcium to phosphorus. A balanced Ca:P ratio does not offer protection from a high level of calcium in the diet. Many pet foods in Australia, even some especially formulated for puppies, contain higher levels than this new recommended maximum for calcium of 2.5% (according to their own guaranteed analysis). Check these for yourself and see!' (NutriPet News, 1993)*

*'The conclusion that cats fed a single commercial food exclusively were at greater risk for developing taurine deficiency and dilated cardiomyopathy than cats fed a variety of foods is not unexpected. This and other examples of diet-induced disease should serve as a warning to veterinarians who prescribe or endorse the feeding of one food exclusively to any animals, especially for maintenance.'*  
(Pion, P D et al, 1992)

### ENVIRONMENTAL IMPACT

To corrupt Margaret Thatcher's line "We should all be environmentalists now". Accordingly established protocols should be subjected to an environmental audit and all new techniques and specialties should have environmental considerations factored into their basic precepts.

From the veterinary dental point of view the errors are two-fold.

- a) Developing an elaborate interventionist regimen in the absence of sound theoretical knowledge. Thus they take no account of other specialties or downstream economic and environmental consequences.
- b) Giving professional endorsement to the environmental disaster known as the pet food industry.

The environmental costs of reportedly the world's second most traded commodity are:

1. Unnecessary processing
2. Unnecessary packaging
3. Unnecessary transportation
4. Displacement of perfectly useful table scraps
5. Foul excrement opposed to the more wholesome natural product
6. Excrement, packaging and food scraps filling the rubbish tip
7. Abattoir offal fed to pets instead of being recycled through stock feed and fertiliser.

### CONSUMER PROTECTION

In the absence of a commonsense, ecological theory of oral disease (c.f. 'Cybernetics') a monstrous therapeutic regimen comes to dominate. A natural preventative approach leads to minimal disease. The need for treatment implies a failure of the preventative system. Either the wrong type of program or too little too late.

Now it is well known that the veterinary dentists are big on treatment taken straight from the out-dated drilling, filling and billing paradigm. Their artificial attempts at prevention derive more from wishful thinking than wisdom. The doggy dentifrice, toothbrushes, chew toys etc provide an expensive reminder. The net result is both an extraction of dollars for both prevention and treatment when in fact neither are necessary. The common term for this is 'over servicing'. Not content with their evident headway they seek to demean the natural alternatives.

Q. 'Why not give bones to dogs and cats to control periodontal disease?'

A. 'Because they do not fit in with the modern American way of life'

(Harvey, C E, 1991 USA Veterinary Dentist)

And the more insidious:

*'Most dogs now are on more convenience foods and we have to accept that. The best thing to do would be to go and give your dog probably an oxtail with the hide still on it once a week but that's just not socially acceptable.'*

(Coles, S. President of the Australian Veterinary Dental Society. ABC Investigators, 1993)

So much for the professional's role as an opinion leader. At the very least a range of alternatives should be offered with an accompanying explanation of the costs and benefits.

It is in the area of dietary requirements that consumers are in need of the most protection. The 100% 'complete and balanced' propaganda of the pet food corporations holds the consumers hostage. Various practices have grown unchecked and serve the pet food interests perfectly. A credulous veterinary profession, government and public allows:

Advertising of an outrageous nature. If one adopts an intelligent approach to the claims one detect not mere 'puffery' but outright distortion.

Nutrition articles in the professional journals could mostly come under the category advertising. Just check out the titles and content and you will see they mostly have a commercial 'angle'. Validating or discrediting rival claims is the order of the day. Sometimes they raise red herrings and deflect the proper interest. Apart from the veterinary profession's innate conservatism and respect for authority I suspect this nutritional rubbish goes unchallenged due to its being deadly dull and quite indigestible.

Regulations governing pet foods afford the authorities scant control. The Association of American Feed Control Officials sets the guide-lines for processed pet foods. Dr R L Wysong, DVM comments:

*'The confusion, even blindness, by researchers and regulatory agencies (however well intentioned) is apparent in the following incredible contradiction by authors with DVM, PhD and specialty board certification in veterinary internal medicine and nutrition credentials:*

*"These protocols (The authors are discussing AAFCO studies) were designed to assure that pet foods would not be harmful to the animal and would support the proposed life stage. These protocols were not designed to examine nutritional relationships to long-term health or disease prevention." (G F Collings, et al, Veterinary Forum Oct, 1992, p34)"*

*In other words a food could cause disease and destroy long term health yet at the same time "not be harmful" and be "100% complete"! So after a pet has been fed the "proven" food for a period of time equal to the duration of an AAFCO study (26 weeks), all bets are off. The "100% complete and balanced" food may then be literally poisoning the animal with the blessings of the entire academic, professional, scientific, governmental and industrial pet food establishment.'*  
(Wysong, 1993)

Dr H Southwood, President of the Sydney Metropolitan Practitioners Branch of the AVA does not appear to hold with Dr Wysong's disparagement of the pet food industry. He speaks with admiration of the pet food industry in the March, 1993 edition of the AVA News, Letters Page:

*'First, it is my belief that the widespread availability and use of commercial rations has generally contributed to a longer and healthier life of pets.....  
Second, to my knowledge Tom has no post-graduate qualifications or specialist qualification in animal nutrition nor does he have any valid scientific data to back his assertions. This position contrasts strikingly with the major players in the pet food industry.....  
Finally, I congratulate the pet food industry on their patience and tolerance in the face of this attack. I have no vested interest in this matter yet my patience is exhausted.'*

Dr Kathy McQuillan works for a large pet food company. She does not declare her employment details when writing her regular 'advertorial' column in a national women's magazine. The following is likely to create anxiety on the part of the owner, bring about the breaking of teeth on inedible bones and ensure that the edible variety are never offered. The hungry pets will need to fill up on the advertised alternative flanking her column.

*'Give your pet only raw bones. For dogs, large marrow bones are best, as they have plenty of tasty sinew to pull and they are large enough to ensure that most dogs will not be able to splinter them. I've always found that smaller bones - like lamb flaps or shanks or brisket bones are eaten entirely by many dogs. This can result in constipation, vomiting or blood in the faeces as bone fragments are passed. With bones, there also is a risk of broken or cracked teeth. Cats tend to cope well with raw chicken wings, but the bones may cause some cats to vomit and others may not wish to chew the wings.'*

(Dr K McQuillan, Women's Weekly, April, 1993)

That the consumption of processed foods is the prime determinant of oral disease in pets was known to Sir Frank Colyer, the human dentist in 1947. He wrote his findings in the British Dental Journal. Modern day veterinary dentists are just as likely to be found writing in the pages of the pet food industry publications.

Multinational monopolists control the processed pet food market. Not unexpectedly their products cost more than the locally-produced and -owned natural alternatives.

The pet food companies will doubtless be aware of the Trades Description Act provisions on false and misleading advertising. The Cruelty to Animals Act could be invoked where it is felt that a corporation has counselled, aided or abetted the feeding of an animal so as to cause ill health and suffering.

One must assume the companies obtained legal advice before issuing advertising brochures with the following statements, *'many cats also like to chew on raw chicken or rabbit bones to help exercise gums and teeth'*. (Whiskas cat food brochure) *'To assist your pet maintain healthy teeth, regularly give your dog a raw, uncooked bone. Avoid chicken or fish bones.'* (Tuckertime cat and dog food brochure) That they cannot agree on the benefits of chicken bones may change with time. Does a '100% complete and balanced' pet food become a '120% complete and balanced' pet food with the addition of raw bones? If angry consumers bring Class Actions for the loss and suffering of their pets due to diet-induced periodontal disease, the following question will be put. Does placing a vague reference to raw bones on the pet food label exonerate the processor?

#### ANIMAL HEALTH

Pet health in the age of the heavily marketed processed pet foods is in a depressing state. The quotes from Dr H Southwood, President of the Sydney Metropolitan Practitioners Branch of the AVA depicts a certain attitude and reveals that little is being done. *'Uncle Bens Aust is a major sponsor of the AVA. I believe you should consider either taking issue with the national body or resigning your membership if you are uncomfortable with any association between veterinarians and pet food manufacturers.'*

*I think there is and has been for several years, general agreement that:*

- a. oral hygiene is important and that raw bones afford the optimal way to provide this.*
- b. Significant oral disease causes systemic ill health.'*

Experiencing a sore gum or toothache for a day is problem enough for oneself. Contemplating the lifetime suffering of animals force-fed processed foods condemns the complicity of the veterinary profession as being utterly disgraceful.

On a superficial level the pathology of periodontal disease is well-known. The research in our practice has produced dramatic findings on multi-systemic disease. An overview is presented here.



### Foul Mouth Aids

An initial paper was published in the Post Graduate Committee in Veterinary Science's Control and Therapy series, December, 1992. It was thought that academics would notice the serious implications of an immune-compromised population of animals and instigate the appropriate investigations. To my knowledge nothing was done and my research paper addressing this topic is in course of completion.

Eight animals were chosen for review since at presentation they suffered from periodontal disease and a low white blood cell count and RCC values. Upon treatment for the periodontal disease and change of diet the RCC values increased an average 28% and the WBC values increased an average 78%. All the animals showed an improvement in well-being as subjectively assessed. Of major significance was the presence of four cases in the list having been presented for routine vaccinations. The owners believed them to be 'normal'. Subsequent treatment and testing revealed that their base level readings should have been in the order of 34% higher for RCC's and 55% higher for WBC's.

The inescapable conclusion is that periodontal disease has been factored into clinical pathology reference values. This can be confidently stated since the commonly utilised reference values are derived either from processed food fed colony animals or alternatively from 'normal' animals presented for routine work at veterinary hospitals.

It was the numerical demonstration of the inadequacy of clinical pathology that triggered our examination of the other steps in the diagnostic pathway.

### The Inability of the Clinical Diagnostic Pathway to Address Oral and Related Sub-optimal Health Problems

The initial disability of the clinical method resides in the fact that it is retrospective. It depends on identifying pre-existing pathology. Appropriate prevention ensures the pathology does not arise.

Of equal concern is that the diagnostic pathway leading to therapy and management is either hopelessly crude, ill focussed or plain wrong.

The following sets out in simplified fashion how the veterinarian possessing a high index of suspicion regarding the diet/periodontal disease/general health nexus takes cumulative decisions differing from his orthodox counterpart.

### Owner Observation

Subjective assessment of a subtle nature. Clinicians usually lack the decision criteria for evaluating these.

A QUESTION/TEST	B OBSERVATION	C ORTHODOX VET ATTITUDE	D HIGH INDEX OF SUSPICION VIEW
Tell me your problems	Sleeps a lot	Older dogs frequently do	Animals with chronic periodontal disease frequently do
	Restless sleeper - howls a lot	Ditto	Ditto
	Seems a bit stiff	Ditto	Ditto
	Seems bad tempered	Many cats are	Cats with periodontal disease and 'neck' lesions suffer much pain

History Taking

What diet do you feed?	Commercial 'complete' and balanced' food	Excellent	That's a worry
Do you offer bones?	Large ox bones once a week	Good	That's a worry
Is your animal listless and slow?	Yes	Usual	That's a worry
<u>Clinical Examination</u>			
Cursory examination of mouth	Nothing noticed due to poor patient cooperation	All is probably OK	Visual observation yields partial information only
Sniff the breath	Rancid	This test not performed	That's usual, highly significant and likely to respond to dietary change
Skin/coat condition	Poor	That's usual	That's usual and likely to respond to dietary change.
Abdomen shape	Flabby	Ditto	Ditto
<u>Clinical Aids</u>			
Thermometer	Temperature normal	That's OK	Thermometer seldom yields useful information in chronic disease
Stethoscope	Unremarkable	That's OK	Cardiac and pulmonary signs undetectable until too late to reverse
<u>Clinical Pathology</u>			
Haematology	Within reference range	That's OK	Reference range misleading
Biochemistry	Within reference range	That's OK	Frequently within the range until too late to effect change
<u>Ancillary Aids</u>			
General Anaesthetic Examination			
a) Oral	Apparently normal	That's OK	Periodontal disease is insidious and hard to detect. Probing, tooth movements, gum shape - highly unreliable
b) Other	Apparently normal	That's OK	Conscious animals do not relate how they feel. Anaesthetised animals reveal even less.

X- Rays

a)	Oral	Unremarkable	That's OK	Highly unreliable
b)	Whole body	Unremarkable	That's OK	Collagen and other periodontal induced diseases do not show up.
c)	Whole body	Heart, liver, kidney abnormalities detected	Needs treatment	Probable over-diagnose the problems. Constant toxemia from mouth likely chief problem.

Diagnosis

	None made	Leave as is	Change diet +? scale teeth
	Suspect bacterial disease	Antibiotic treatment trial	Antibiotic treatment trial + change of diet +? scale teeth
	Suspect immune problems	Steroid treatment trial	Steroid treatment + change diet + ? scale teeth

Prognosis

	Standard for age of animal	Will have recurrent problems	Will likely not see the patient for several years
--	----------------------------	------------------------------	---

Three other issues help preserve the status quo.

- Litigation - In the litigation conscious USA the leaving of tooth roots in the gums is a punishable offence. The vast overservicing of the clients and the sale of processed pet foods is not.
- Peer Review - Articles submitted for publication on this new topic are likely to be refereed by adherents of the orthodox view. No prizes for guessing the outcome.
- The Media. The fourth estate is supposedly the last safeguard to the freedoms and integrity of our society. Straight away we must acknowledge they have been infiltrated by the major commercial interests. Advertising revenue and mutual favours count.

In our own experience journalists have frequently identified with the sentiments reflected in this paper. However unsafe libel laws have prevented a thorough airing of the allegations.

Foot Pad and Foul Mouth Disease

Our findings on plasma cell pododermatitis and feline eosinophilic granuloma complex were published as Control and Therapy articles Nos. 3270 and 3271. Only one veterinarian contacted me on these subjects despite the implied challenge to orthodox veterinary teaching on diet and disease.

Obtaining further research information on this entity has been problematic. At the time of going to press eosinophilic granuloma and plasma cell pododermatitis appear to be parts of one diet-related syndrome. The results should soon be available and subsequently published (referees willing).

## Epilogue

Bloodletting and bar firing have finally lost respectability. Processed pet foods are currently respectable and pet dentistry is gaining acceptance. These twin ills are arguably a greater threat to the science, the environment, consumer welfare and health of our pets than anything that has gone before. Now is the time to scour these blemishes from the face of our society before another five hundred years slips by. As a starting point we need the acknowledgement of the veterinary dentists and their determination to right the wrongs. This they may find difficult. May I suggest that they cast off their prejudices for just one day. Instead assume the attitudes and recommendations contained in this paper and note how they feel at the end of the day.

Should anyone still be contemplating the adoption of the veterinary dental ethic would they please remember the greatest commandment of them all. 'Do unto others as you would have them do unto you'. If you were a domestic dog or cat, how would you hope to be cared for?

## ACKNOWLEDGEMENTS

Thanks to Drs Bruce Duff and David Snow of Macquarie Vetnostics for laboratory support. Thanks to the team at Riverstone Veterinary Hospital for their belief in and dedication to this project.

## FURTHER READING

It is suggested that these lecture notes be read in conjunction with the Preventative Dentistry Course Notes for the Post Graduate Committee in Veterinary Science, University of Sydney Veterinary Dentistry Course - Stephen Roberts Theatre June 14 – 18, 1993

Borthwick, R (1986) *The distribution, prevalence and some factors associated with periodontal disease in dogs and cats*. University of Edinburgh report to Waltham Centre for Pet Nutrition.

Colyer, F (1947) Dental Disease in Animals. *Brit. Dent. J.* **82**:31

Gleick, J (1987) *Chaos, Making a New Science*. Sphere Books, Division of McDonald and Co., London

Johnson J, (1993) *Protein Requirements of Dogs* Waltham International Focus, Vol 3, No 1 p9.

Lonsdale, T (1992) *Pandemic of Periodontal Disease - A Malodorous Condition* Monograph, 20/8/92

Lonsdale, T. (1992) *Cybernetic Hypothesis of Periodontal Disease in Mammalian Carnivores* (unpublished)

Lovelock, J (1979) *GAIA- A New Look at Life on Earth* OUP Oxford

Medawar, C (1984) *The Wrong Kind of Medicine* Hodder & Stoughton

Pietroni P (1991) *The Greening of Medicine* Gollancz Paperbacks, London

Smithcors, J F (1958) *Evolution of the Veterinary Art* Balliere, Tindall and Cox, London

Dog Fancy (March, 1993) source for

### **SPECIAL REPORT**

#### **PET HEALTH ALERT!**

Important new information revealing why pets are increasingly suffering from heart disease, arthritis, dental disease, diabetes, cancer, auto-immunities, food allergies, obesity and a host of skin, coat, eye, ear, and digestive afflictions. This special report can arm you with the knowledge necessary to keep your pet from being a victim.

#### **You'll learn:**

1. Why the "complete and balanced" claim on pet foods has resulted in deadly disease
2. About a grocery store food which can prevent the present dental disease epidemic
3. How the advise "don't feed table scraps" has killed thousands
4. Why laboratory testing and fad diets, such as rice and meat, seldom solve food allergies
5. That premium diets thoroughly tested, have doomed untold numbers of pets
6. The ignored dangers of pet foods with shelf life guarantees of six months or more
7. A simple guiding principle to help you make your own best decisions not only for your pet's health, but your own.

Send \$2 for  
postage  
and cost to: Dr. R. L. Wysong  
1880 North Eastman Road  
Midland, MI 48640-8896