June 2018

Rhodes Vet Clinic



Rhodes Veterinary Clinic

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Anal Glands

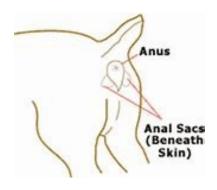
The anal glands or more formally the paranal sinuses are located in between the internal and external anal sphincter muscles on either side of the anus. These are the glands that produce the scent marking fluid that the dogs smell on one and others faeces. The duct from this gland is rather narrow and empties just on the inside of the anus. When the dog poos the glands are supposed to empty onto the faeces. This tells all other dogs who and where it came from.

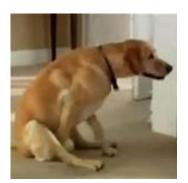
Sometimes the ducts get blocked. This is often due to infection of the gland. It isn't in a great place as there are a lot of bacteria in the rectum! This is uncomfortable for the dog as the gland becomes distended. When this happens they tend to scoot on their bottoms in an effort to relieve the pressure. Sometimes they will also lick at them. Occasionally where the dog does not manage to relieve the blockage themselves or we haven't done it for them the gland will rupture. This is painful and requires treatment.

If your dog is scooting, licking at their bottom a lot or has foul smelling breath please make an appointment as it is often easily fixed by manually expressing the anal glands. Where there are recurrent issues, especially infection with anal gland rupture or scar tissue preventing normal function of the glands, removal is the best option.

We provide:

- Surgery & Medicine for small and large animals
- Herd Health Advice
- Soft Tissue & Orthopaedic Surgery
- Dentistry
- Digital X-ray
- Ultrasound
- In House Blood Testing
- Nutrition
- Prescription Diets
- Microchip Identification





Simpson Office:

Our Simpson Office is open Monday & Friday 10am to 3pm P: 03 5594 3257

Colac Office:

Our Colac Office is open Monday to Friday 8am to 6pm Saturday 9am to 12 noon

www.rhodesveterinaryclinic.com.au

We are available 24/7 for emergencies.
Our emergency number is:

5232 2111

Downer Cows

Why is she down initially? Calving paralysis? Milk fever? Ketosis? Dislocated hip? Systemically ill? An accurate diagnosis is essential to enable the correct management and to establish prognosis and time frame.

Nursing care is everything and can be very labour intensive. It is a difficult decision to be made. However if you are physically unable to provide the level of nursing care required (Can't spare 1-2 hours daily, no shed/shelter, no bedding, no tractor to enable daily lifting of the cow etc.) then it is often kinder to euthanasia the animal than to allow a drawn-out death.



So what do we mean by sufficient nursing care:

On a deep bed. Minimum 20cm straw/shavings. To reduce ongoing muscle and nerve damage and to keep her warm.

Sitting in sternal position. Do not allow cows to lay flat out on their sides as they will commonly aspirate stomach contents. They may require propping up with hay bales. If the cow consistently wants to lay out on her side this is usually a poor prognostic indicator.

In a shed. Failing this under good trees or a makeshift shelter - needs to block the wind and keep her out of the sun and rain. Cows get very cold when they can't move to warm up especially when sitting on cold ground. Blood flow to her legs is extremely important and hypothermia is not a good cause of death.

Food and water within reach at all times. Do not provide more pellets/grain per day than she is already used to as gastric upset will occur. Good quality hay is essential.

Lifting daily. Frequency of lifting recommended may differ with diagnosis.

In a confined area - They injure themselves further when able to drag themselves around. This is especially true when they get their back legs out behind them in a 'frog legged' position. If they have been in this position for any length of time euthanasia is likely to be required. However, if she is not rocking herself from side to side, you will need to change which back leg she is sitting on at least twice daily. This is to reduce bed sores, muscle and nerve damage.

Many cows who go down will often develop (if it wasn't the initial cause) clinical or subclinical hypocalcaemia, hypoglycaemia, and ketosis. This is especially true if they have been off feed for any period of time or have been eating poorly/less than they would normally eat. As such we would recommend the treatment of down cows with **ketol (or equivalent), oral calcium, and 4in1.**



RVC HAS NEW BANK DETAILS:

BSB: 193 879 ACCT: 441509064 Please amend your payment details

2018 AFL Footy Tipping Competition Results after Round 11: 1. Alan 72 2. Janine 70 3. Sharyn 70 4. Sue 70 5. Cindy 70 6. Colin 70