

SHAKIR'S STORY



We are relating our boy's fight with cancer in the hope that it will alert Saluki owners, particularly those people fairly new to the breed, to the potential health problems that seem to be prevalent in certain deep-chested breeds, such as the Deerhound, Golden Retriever, German Shepherd and indeed the Saluki. annette@saluki.plus.com

Last September, from all outward appearances, Shakir (Mumtaz Centaurus) was in the peak of fitness, when Brian and I set off for a week's holiday abroad to recharge our batteries, having been drained emotionally with the loss of two close family members. Within forty-eight hours of our departure, we received a phone call from our dog sitter to say that Shakir would not eat or move from the settee to play in the garden. Like most Salukis, Shakir is a sensitive soul, so we thought at first that he was missing our company, but on hearing the next day that he had still not eaten and was extremely lethargic, alarm bells started to ring, and we arranged for him to see our local vet. ECGs and Ultrasound scans were taken, results of which lead the vet to believe that Shakir was suffering from a primary heart condition called cardio-myopathy. Apparently his heart beat was very rapid at the time, so much so that his whole body was shaking erratically as if his heart was jumping out of his rib cage. His eyes were weeping and his nose was running with liquid. He was given Vetmedin and Fortekor tablets to strengthen the heart muscle.

The vet phoned me direct to Sicily to say he needed to see a heart specialist as soon as possible, so we caught the next available plane back to the U.K. The specialist took another ECG and Ultrasound scan using higher spec machines than previously; he concluded that Shakir had a slightly irregular heart beat and surmised that the medication had stabilised the situation somewhat, and said to give him more of the same until he saw him again in a week's time. Shakir experienced very good days interspersed with bad days when he was very slow in his movement and extremely restless. Also he developed fluid retention due to the fact that his blood was not moving around his body quickly enough most likely due to the heart medication, and he was given Spironolactone to control this situation. On our second visit to the specialist, he took another trace and confirmed that Shakir was suffering arrhythmias and recommended that he took a beta-blocker called beta-cardone, as he said that a run of 30 seconds of arrhythmias meant a dead dog on your hands. Again, Shakir seemed to pick up over the next few days until the Sunday when he suffered a complete collapse. He could not lift his head or stand up properly from sitting and looked thoroughly weakened after vomiting several times that day.

All medication was stopped and we paid a visit to the emergency local vet, who said he did not know what to suggest, as two complete blood tests had come back showing no abnormalities present. We asked to be referred to The Royal Vet Hospital at Potters Bar, and we were instantly given an appointment that night. They took a full history of Shakir's condition and his family health background, which included cardio-myopathy, a heart condition, and haemangiosarcoma, a cancer of the spleen, both of which are specific diseases associated with a widespread genetic susceptibility associated with the breed. Often, vets will state the cause of death as heart failure as this is usually the last organ to be affected by the cancer and most dog owners do not autopsy their dogs, and if they do, the vets do not always understand their findings. We were told that Shakir would need to stay for up to 'a three day hospital visit' to undertake various tests, and they would keep us informed daily by telephone. It was therefore a surprise to receive a phone call one hour into our return journey home; it was Ian, the hospital vet, to say that his prognosis of dear Shakir's illness was not good – he had found haemangiosarcoma in his spleen, which had ruptured and was bleeding small droplets into his chest cavity.

My mind was a blur, but I remember him saying something to the effect that as this cancer is a disease of the red blood cells, the circulatory system spreads it rapidly throughout the body. It is called 'the silent killer' as it is painless and does not manifest itself until it often reaches an advanced stage. In rare cases, where it is caught before the spleen erupts, it is possible to remove the spleen and treat the patient with chemotherapy, but this usually only affords a further life expectancy of a further four or five months. This operation was not an option for Shakir as the cancer had already spread from the spleen to the liver. Ian said to pick him up in a few hours, take him home for his last couple of days and euthanase him if he was still alive on the third day. We were devastated by this news and worried that he might die before we were able to get back to him to say our 'goodbyes'. When we picked him up he looked so thin and weak that we really had to resign ourselves to the fact that we were going to lose him very soon. We made an appointment for Wednesday 9.00a.m. for a home visit from our vet to put him to sleep, but on the Tuesday evening we looked into his eyes and decided he wasn't ready to leave this world quite yet, and cancelled the booking. I searched the internet yet again to find out more about this disease and it was clear that there is no cure at this late stage, but we could at least make him more comfortable.

I put an entry on the UKSaluki site asking for any information or advice on this particular cancer and the first reply came from Canada, where they are very much more aware of both cardiomyopathy and haemangiosarcoma in Salukis. As word spread, we received emails, phone calls and cards from Saluki owners nearer to home and I gleaned not only much good advice, but also great comfort from the messages of sympathy and concern for Shakir, which were greatly appreciated. I was given the name of Sue Armstrong, from Balanced Being in Wetherby, Yorks, who has been a veterinary surgeon for twenty five years and also specialises in homeopathic remedies for cancer patients. This very knowledgeable lady conducted an urgent telephone consultation, followed by an on-line fifteen-page questionnaire on Shakir's characteristics and family history, after which time she made her deliberations over the weekend and sent various homeopathic remedies to support his liver and general well-being. We are also using Bach Flower remedies, Oak, Olive and Walnut as recommended by Helen Graham. Shakir has not eaten properly for six weeks now and we have needed to feed him with Hills Prescription Diet by syringe. Suggestions came through from other saluki owners as to which foods might tempt him, such as tinned cat food, pate, chicken and rice rolls, Dairy Lea cheese wrapped in thin ham, sardines, broccoli and spinach pureed plus protein drinks, as cancer depletes the body of protein. Shakir is able to enjoy trotting around the garden and going for short walks on most days, but is still suffering from inappetence, which makes it difficult to put weight on him, but he has definitely improved in strength this last couple of weeks. I do find it sad that we need to keep him separate from the other two boys, Quest and Rocco, as due to his weakened state he has become aggressive towards them, which is very much out of character for him. It may in part be due to vulnerability but also when the liver/spleen is involved it can tip the balance that way – the old saying 'to vent your spleen' has sound credentials. This separation of the boys is proving difficult at times, and Shakir has shared our bed for the past six weeks, with Brian and me cliff-hanging on the edge of the bed either side of him!!

I am completing a DNA swab test on Shakir to send to the Animal Trust Research Team for holding in a DNA bank in the hope that future research will find a cure or a marker to detect certain diseases at an early stage, and I urge others Saluki owners to do the same through the Saluki Club's health officer, Daphne Tovey. The American Saluki Health Research Inc, headed by MaryDee Sist, has carried out research into Saluki health, and I found their site www.saluki.fi/congress/health_marydeesist.pdf to be most informative. The most disconcerting finding was that more than 50% of the Salukis examined had one or more forms of cancer contributing to their demise. Also, sudden death can often, but not always, be attributed to an arrhythmia or rupture of a haemangiosarcoma, the latter of which often seems to attack male salukis in their middle years – Shakir is just six years old! Please take these health warnings seriously and be open to investigating conditions that occur in Salukis. From my experience recently, I believe that saluki owners in the UK are willing to share their concerns with others to ensure the future health of the breed. Thank you for taking the time to read our story. Annette & Brian Buckley