

## *2<sup>nd</sup> Hungarian Vizsla Breed Health Survey*

*Aug 2011 – Feb 2012*

Thank you for participating in this valuable tool to monitor the health of the Hungarian Vizsla. It is almost 11 years since the first breed survey was produced. The information gathered in this survey will provide valuable information on the current health status of our breed as well as allowing comparison between this survey and that conducted 11 years ago.

The results will be published in both the Hungarian Vizsla Club and Hungarian Vizsla Society Newsletters.

Completed forms should be emailed to:

[healthsurvey@hungarianvizslaclub.org.uk](mailto:healthsurvey@hungarianvizslaclub.org.uk)

Alternatively, the form can be printed for completion and sent to:

Sue Millson  
The Oak Tree,  
Five Oak Green Road,  
Five Oak Green,  
Tonbridge,  
Kent.  
TN12 6RL

There is an appendix at the end of the survey form which provides details of the diseases specifically mentioned in the survey. However, please feel free to contact me if you have any queries or are unsure of anything. Contact details are given below.

Please ensure all sections are completed, particularly if you do not wish to put your contact details on the form, as I will have no means of contacting you for clarification on any point.

Thank you again for your co-operation.

Sue Millson

KC Breed Health Coordinator

Tel: 01892 834178

Email: [sue@lutra.me.uk](mailto:sue@lutra.me.uk)

*Information on Current Vizslak Owned:*

Optional info:				
Pedigree Name				
Owner Name				
Address				
				Country
Required Info:				
Year of birth		Country of origin (if not UK)		Sex:

Section 1: Neurological system (primarily Brain, Spinal cord)				
<b>a) Does your Vizsla suffer from seizures /fits</b>			Yes/No	
If Yes:	Age Diagnosed:		Is medication required?	Yes/No
Additional info				
<b>b) Tumours (brain/spinal cord)</b>			Yes/No	
If Yes:	Age diagnosed:			
Additional info				
<b>c) Laryngeal Paralysis</b>			Yes /No	
If Yes:	Age occurred:			
Additional info				
<b>d) Any other diagnosed neurological problems not covered above?</b>			Yes/No	
Additional Info				

Section 2: Ears				
<b>a) Recurrent infections</b>			Yes/No	
If Yes:	Outer ear	Yes/No		
	Middle Ear	Yes/No		
	Inner Ear	Yes/No		
	Age at first appearance:			
Additional Info				
<b>b) Trauma</b>			Yes/No	
If Yes:	Type of Trauma:			
Additional info				
<b>c) Disease</b>			Yes /No	
If Yes:	Age diagnosed:		Diagnosis:	
Additional info				
<b>d) Any other diagnosed ear problems not covered above?</b>			Yes/No	
Additional Info				

Section 3: Eyes			
<b>a) Cataracts</b>		Yes/No	
If Yes:	Type		
	Age diagnosed		
Additional Info			
<b>b) Entropion/Ectropion</b>		Yes/No	
If Yes:	Type		Age diagnosed:
Additional info			
<b>c) Glaucoma</b>		Yes /No	
If Yes:	Type		Age diagnosed
Additional info			
<b>d) Any other diagnosed eye problems not covered above?</b>			Yes/No
Additional Info			

Section 4: Bones and Joints			
<b>a) Hip Dysplasia</b>		Yes/No	
If Yes:	Hip Score (if known)		Age Diagnosed
Additional Info			
<b>b) Elbow dysplasia</b>		Yes/No	
If Yes:	Elbow Score (if known)		Age diagnosed:
Additional info			
<b>c) Anterior or Cranial Cruciate Ligament (ACL) Tear or Rupture</b>			Yes /No
If Yes:	Age diagnosed		Treatment
	Was this injury due to known trauma?		Surgical/Non-surgical
		Yes/No	
Additional info			
<b>d) HOD (Hypertrophic Osteodystrophy)</b>		Yes/No	
If Yes:	Age diagnosed		
Additional Info			
<b>e) Any other conditions not covered above (e.g. fractures, amputations, arthritis, etc.</b>			Yes/No
Additional info (please state which bones/ joints involved)			

Section 5: Toxic Reaction		
<b>a) Ingestion/Injection or Inhalation</b>		Yes/No
If Yes:	Type (e.g. snake bite; medication)	
	Age diagnosed	
	Outcome	
Additional Info		
<b>b) Any other diagnosed allergy problems (excluding food allergies; see below) not covered above?</b>		Yes/No
Additional Info		

Section 6: Digestive Tract			
<b>a) Bloat</b>		Yes/No	
If Yes:	Age at onset		
	Treatment	Surgical/non-surgical	
Additional Info			
<b>b) Ingestion of foreign body</b>		Yes/No	
If Yes:	Age:		
	Treatment	Surgical/Non-surgical	
Additional Info			
<b>c) Food Intolerance (e.g Gluten allergy)</b>		Yes /No	
If Yes:	Type	Age diagnosed	
Additional info			
<b>d) Any other diagnosed feeding problems not covered above?</b>		Yes/No	
Additional Info			

Section 7: Heart/Blood Disorders (excluding autoimmune disorders – see section 9)			
<b>a) Heart or circulation disorders</b>		Yes/No	
If Yes:	Type of disease		
	Age at diagnosis		
	Treatment/outcome		
Additional Info			
<b>b) Blood disorders</b>		Yes/No	
If Yes:	Type of disease		
	Age at diagnosis		
	Treatment/outcome		
Additional Info			

Section 8: Urinary System (Kidneys/Bladder)			
<b>a) Infections</b>		Yes/No	
If Yes:	Type of infection		
	Age at diagnosis		
	Treatment/outcome		
Additional Info			
<b>b) Tumours</b>		Yes/No	
If Yes:	Type of tumour	Malignant/Benign	
	Age at diagnosis		
	Treatment/outcome		
Additional Info			
<b>c) Incontinence</b>		Yes/No	
If Yes:	Age at Diagnosis		
	Treatment/Outcome		
	Was this spaying related?	Yes/No	
Additional Info			

Section 9: Immune mediated Illnesses**		
<b>a) Polymyositis (PM)</b>		Yes/No
If Yes:	Age at onset:	
Additional Info		
<b>b) Masticatory Muscle Myositis (MMM)</b>		Yes/No
If Yes:	Age at onset:	
Additional Info		
<b>c) Myasthenia Gravis</b>		Yes /No
If Yes:	Age at onset:	
Additional Info		
<b>d) Polyarthritits</b>		Yes/No
If Yes:	Age at onset:	
Additional Info		
<b>e) Inflammatory Bowel Disease</b>		Yes/No
If Yes:	Age at onset:	
Additional Info		
<b>f) Pemphigus</b>		Yes/No
If Yes:	Age at onset:	
Additional Info		
<b>g) Immune Mediated Haemolytic Anaemia (IMHA)</b>		Yes/No
If Yes:	Age at onset:	
Additional Info		
<b>h) Immune Mediated Thrombocytopenia (IMT)</b>		Yes/No
If Yes:	Age at onset:	
Additional Info		
<b>i) Sebaceous Adenitis</b>		Yes/No
If Yes:	Age at onset:	
Additional Info		
<b>j) Lupus- Systemic Lupus Erythematosus (SLE or Discoid)</b>		Yes/No
If Yes:	Age at onset:	
Additional Info		
<b>k) Addison's Disease</b>		Yes/No
If Yes:	Age at onset:	
Additional Info		
<b>l) Hypothyroidism</b>		Yes/No
If Yes:	Age at onset:	
Additional Info		
<b>m) Steroid Responsive Meningitis-Arteritis</b>		Yes/No
If Yes:	Age at onset:	
Additional Info		

\*\* A brief description of each of these illnesses is given in the appendix at the end of this survey.

**N.B.:** These immune mediated diseases are the subject of a further and detailed online survey. You are urged to **ADDITIONALLY** complete the questionnaire found at "<http://www.vizslahealth.net/>".

Section 10: Malignant Tumours and Non-Malignant Lumps		
<b>a) Malignant tumours</b>		Yes/No
If Yes:	Type	
	Age diagnosed	
	Outcome	
Additional Info		
<b>b) Mon-malignant lumps (Lipomas, Hystiocyomas)</b>		Yes/No
If Yes:	Type:	
	Age Diagnosed:	
	Outcome	
Additional Info		

Section 11: Reproduction			
<b>a) Male</b>			
Castrated	Yes/No		
If yes:	Age when castrated:		Reason for castration:
Additional Info			
<b>b) Female</b>			
Spayed	Yes/No		
If Yes:	Age when spayed		Reason for spaying
Had the bitch had a season prior to spaying?		Yes/No	
Additional Info			
<b>c) Litters</b>			
Any problems with either mating or birth of pups		Yes/No	
If Yes	Type of problem		
	Outcome		
Additional Info			
<b>d) Puppies</b>			
Any problems with abnormalities in puppies from mating		Yes/No	
If Yes:	Type of abnormality		
	Outcome		
Additional Info			

Section 12: Behaviour		
<b>a) Does your Vizsla express fear in reaction to loud noises?</b>		Yes/No
If Yes:	Type (e.g. Thunder: Fireworks; gunshot)	
	Age first noticed	
Additional Info		
<b>b) Does your Vizsla exhibit aggression to other dogs?</b>		Yes/No
If Yes:	Type:	Fear Aggression/ Aggression
	Age first noticed:	
<b>c) Does your Vizsla suffer from separation anxiety?</b>		Yes/No
Additional Info		

Section 13: Docking			
<b>a) Is your Vizsla Docked</b>		Yes/No	
If Yes:	Age when docked		
If No:	Has your dog sustained any tail injury?		
	Outcome:	Healed/Amputation	If amputated, age at amputation:
	Does this dog work?		
Additional Info			

Section 14: Skin Conditions			
<b>a) Atopy</b>		Yes/No	
If Yes:	Age at diagnosis		
	Treatment/outcome		
Additional Info			
<b>b) Malassezia (a type of yeast infection)</b>		Yes/No	
If Yes:	Age at diagnosis		
	Treatment/outcome		
Additional Info			
<b>c) Sarcoptic Mange</b>		Yes/No	
If Yes:	Age at diagnosis		
	Treatment/outcome		
Additional Info			
<b>d) Demodectic Mange</b>		Yes/No	
If Yes:	Age at diagnosis		
	Treatment/outcome		
Additional Info			
<b>e) Any other skin condition not covered above</b>		Yes/No	
If Yes:	Type of disease		
	Age at diagnosis		
	Treatment/outcome		
Additional Info			

Section 15: Any other problems not covered by previous sections	
Type of problem:	
Additional Info	
Type of Problem:	
Additional Info	
Type of Problem:	
Additional Info	

Section 16: Previously owned Vizslak, now deceased (from 2000 onwards)					
Sex		Age at death		Cause of death	
Additional Info					
Sex:		Age at Death		Cause of death	
Additional Info					
Sex:		Age at Death		Cause of death	
Additional Info					
Sex:		Age at Death		Cause of death	
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Or alternatively sent to:

Sue Millson, The Oak Tree, Five Oak Green Road, Five Oak Green, Tonbridge, Kent . TN12 6RL.



## ***Appendix: A short description of some Immune Mediated Illnesses that have been reported in UK Vizslak***

### **Polymyositis (PM)**

Polymyositis is an immune mediated inflammatory disorder and several muscle groups can be involved. In Hungarian Vizslak it is those of the tongue, swallowing mechanisms, pharynx, head and oesophagus that are principally affected. Lameness too is a common finding. There is not a specific test for PM and extensive investigation is required. This illness can be confirmed only after the elimination of two similar diseases (Masticatory Muscle Myositis and Myasthenia Gravis) and muscle biopsy submission to the Comparative Neuromuscular Laboratory in San Diego.

### **Masticatory Muscle Myositis (MMM)**

(or eosinophilic myositis) is an inflammatory disease affecting the muscles of mastication. There is a simple blood test for this illness. It is called the 2M antibody test.

### **Myaesthesia Gravis (MG)**

is an illness resulting in generalised muscle weakness that is typically exacerbated by exercise. The esophagus is often involved. A simple blood test (acetylcholine receptor) detects specific autoantibodies.

### **Inflammatory Bowel Disease - IBD**

An illness where an abnormal mucosal immune response to certain causative factors results in the recruitment of inflammatory cells to the intestine. Chronic vomiting, diarrhea and weight loss are common.

### **Polyarthritis (IMPA)**

is an immune-mediated inflammatory disease of joints. Clinical signs include fever, stiffness of gait, lameness, reduced range of motion, crepitus, and joint swelling and pain in one or more joints. The pain is usually very severe.

### **Immune Mediated Haemolytic Anaemia (IMHA)**

An illness where the defective immune system attacks and destroys its own red blood cells. Anaemia and other complications result.

### **Immune Mediated Thrombocytopenia (IMTP)**

An illness where the defective immune system attacks and destroys the blood system's platelets. This interferes with clotting mechanisms and bleeding (and subsequent bruising) result.

### **Sebaceous Adenitis**

An inflammatory disease process directed against the sebaceous glands, resulting in their destruction. Sebum production is compromised and so scaly lesions (affecting trunk, head and ears particularly) and pruritis (itchiness) are symptomatic. A veterinarily known predisposition in Vizslak.

### **Pemphigus**

An illness where the defective immune system targets cells between the skin layers or in mucous membranes. Ulceration, crusting and pustule formation result.

### **Lupus (SLE or Discoid)**

SLE (Systemic Lupus Erythematosus) is the most complicated autoimmune illness because the immune system forms antibodies against the nuclear component of its own cells. Multi-systemic disease results. Discoid Lupus is an immune mediated skin disease primarily affecting the nose and face.

### **Addisons**

(primary) is caused by an autoimmune destruction of the adrenal glands resulting in the progressive loss of production of adrenal hormones. Sodium: Potassium ratio <27 may be an indicator. Clinical signs may wax and wane but might include lethargy, vomiting/diarrhoea, anorexia, collapse. Diagnosis must be confirmed via ACTH stimulation test. Once Addison's is correctly diagnosed, a properly treated dog can live a normal active life.

### **Hypothyroidism**

is the most common endocrine disorder in the dog and in 80% of cases is caused by a progressive, autoimmune destruction of the thyroid glands. Production and secretion of the thyroid hormone is impaired and deregulation of metabolism results. Clinical signs are diffuse.

### **Symmetrical Lupoid Onychodystrophy**

results in destruction of the nail bed tissue which causes the nails to fall off and break

### **Steroid Responsive Meningitis/Arteritis (SRMA)**

is an inflammation of the meninges (the membranes that cover the brain and spinal cord) and is believed to have an immune mediated pathogenesis. Clinical signs include fever, severe neck and sometimes spinal pain, back arching and stiffness of gait. In the vizsla we have also had reports of hypersensitivity to touch and poor neck flexion.