Dr Jutta Ziegler

TOXIC CROQUETTES

Aliments industriels, antibiotiques, vaccins...
Pourquoi ils rendent nos animaux malades
Comment s'en passer

THIERRY SOUCCAR ÉDITIONS

TOXIC CROQUETTES

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THE AUTHOR

Jutta Ziegler was born in 1955 in Darmstadt and lives in Hallein near Salzburg, Austria. After studying veterinary medicine in Vienna (1975-1981), she opened her first clinic in Kuchl, south of Salzburg. Since 1999, she has run a practice dedicated to pets and an annex offering natural products, most of which she has developed herself.

She is also a specialist in homeopathy and, for years, has been actively dedicated to alternative therapies, and more particularly to "biologically appropriate raw food" (or BARF for Biologically Appropriate Raw Food), a diet that respects the physiology of the body. animal. She transmits her knowledge during consultations, seminars and conferences. She has two children.

SUMMARY

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To simplify the reviewer's search, the index is made up of hyperlinks that point to different targets in the text, so don't be surprised to find hyperlinks scattered throughout the book.

FOREWORD

WHY DID I WRITE THIS BOOK? WHY NOT LEAVE IT AS IT IS?

The animals entrusted to us, to us veterinarians, allow us to earn a good living and their owners are most often unaware of the gears in which their visits with us lead them, like hamsters in their wheel.

Many even thank their regular veterinarian for the allegedly dedicated care their dog or cat received.

In no way do I want to incriminate the idealists among veterinarians. They do exist. I challenge those of my sisters and brothers who unscrupulously take advantage of their clients' love for their animals, play with their fears in the worst possible way to justify all imaginable initiatives, however inappropriate or superfluous.
It is not a question of denouncing here the medical errors which can always occur, the veterinarians being only men. Instead, I want to reveal the countless abuses that take place every day in law firms, whether out of ignorance or deliberate deception.

As in human medicine, the pet owner's fear, lack of knowledge and bad conscience are easy levers to pull: "If you don't do this or that, this or that may happen" or "Why don't you didn't you do this or that? On the basis of these arguments bordering on the threat are imposed unnecessary treatments, vaccinations and drugs. This is how many pets systematically end up in the category

sick: the clinical picture is expanded or reinterpreted until a healthy dog or cat is transformed into a sick animal or one requiring at least treatment. And it does not occur to the frightened owner, in the grip of doubt, to question what “the demi-god in white” announces to him.

Veterinarians basically fall into three groups.

The first group, cynical and corrupt, knows how to fleece pet owners. He is fully aware of the dubious morality of his business. Driven by difficulties and financial constraints or by pure greed, he acts independently of the good of the animals entrusted to him. For him, fundamentally, profit takes the place of ethics.

The second group of veterinarians care little about professional ethics and are content to do as they have learned in the past or as others. He copies, without thinking of criticizing it, what has supposedly proven itself for a long time and simply lets himself be carried away by the masses, sheltered behind his blinkers. It is mainly this second group that takes up without hesitation or questioning the recommendations of the animal feed industry and pharmaceutical groups. He is not aware of the ambivalence of his trade. On the one hand, the veterinarians of this group act well with the intention of helping the animals entrusted to their care. But on the other hand, they do not wonder for a second about the causes of the chronic diseases which are multiplying. They certainly attend continuing education seminars assiduously, which is a good thing, but without being able to take a step back, to show good sense.

Which veterinarian still takes the risk of telling the master that his

dog, for example, is doing like a charm and can go home quietly? Great is the fear, making such remarks – and do they still correspond that much to reality? – to lose the client and throw him into the arms of a colleague. This is how trivialities are blown up and the four-legged patients are tormented with unnecessary examinations and treatments.

At the same time, disease prevention is completely neglected. They are simply accepted as falling from the sky, however often they occur, and taken care of in such a way that secondary conditions are truly programmed in advance. Case examples are the red thread of this book.

The third group of veterinarians is unfortunately still very small, but it has the merit of growing visibly. As in human medicine, the number of veterinarians who refuse to be bought off by industry continues to grow. The same goes for those whose priority is not to get rich, but to take the time to determine what is really best for the health of the animals entrusted to them. These veterinarians work independently of the kibble and drug industry and are only accountable to their conscience.

From an economic point of view, one might think that the representatives of the first group are also those with the highest incomes. This is certainly the case on the whole, but there are also a growing number of firms that work for the benefit of animals, consider them holistically, ethically – while ensuring proper profit. It must of course be allowed to us, to us veterinarians as well as to the practitioners of human medicine, to live

of our work. This is the reason why, as in any profession, it is right that serious and zealous professionals earn more… but certainly not at the expense of the health of the animals to be cared for! It is finally positive that more and more owners of dogs and cats are critical and already informed thanks to the Internet. Thanks to them, firms working in a global perspective will multiply in proportion.

This book aims to help you, dear readers, to question prescribed diets and medications, as well as questionable diagnostic and treatment methods, and to identify at the outset which group the veterinarian to whom you have affair.

But back to the question posed in the introduction: why did I write this book? For more than thirty years I have been working as a liberal in a firm dedicated to pets. These last years have been for me the framework of a growing awareness: we, veterinarians, train the animals entrusted to us towards a chronicization of their affections, influenced as we are by false information. These relate in particular to the way in which our dogs and cats are fed, the far too frequent vaccination and the outrageous use of antibiotics and chemical drugs in general. We veterinarians are largely responsible for the increase in diabetes, epilepsy, diseases of the pancreas, liver and kidneys, allergies and so on. Of course, the excessive selection to which many dogs and cats are subject also plays a significant role. It causes chronic infirmities and the appearance of diseases that we never encountered thirty years ago, or only exceptionally.

Another phenomenon should, as professionals, make us

to reflect on. To those who claim loud and clear that, thanks to new and ever more expensive treatments and to diet kibbles supposedly adapted to each disease, the longevity of our pets does not cease to increase, I retort that this is not correct. . Certainly, today we still come across a few large dogs aged fifteen or more. But when, exceptionally, they reach this age, it is as chronically ill. Formerly, that is to say twenty or thirty years ago, when our dogs and our cats fell ill, they had already reached an advanced age and soon died. Today, our domestic animals take a lot of often useless medication so that they hardly exceed the age of twelve. It's hard to know how many poor dogs and cats are wasting away on permanent medication.

The parallel with us humans is obvious. We ourselves are living longer, statistics show. But the price to pay is a lower quality of life, with chronic disease reaching us earlier and earlier. As in our animals – and how could it be otherwise?

–, chronic conditions are increasing due to poor quality industrially denatured diets, inadequate lifestyle, drug poisonings and polluted environment, among other causes. Admittedly, more and more voices are being raised calling for a change of course. The fact remains that our healthcare system is collapsing because no one can or will afford the ever-increasing additional costs. Prophylaxis and information are the poor relations and as long as there are doctors to always trace the same furrow, no fundamental change is to be expected. The same goes for veterinarians and their four-legged patients. Without an evolution of minds or a change of paradigm, nothing can change. For a long time to come, we will have to deal with ever fatter and sicker children and adults, and ever fatter and sicker dogs and cats.

ever sicker.

We veterinarians are not followed by any health insurance fund, which is not so bad. However, if such a fund existed, it would surely not pay a penny for a large number of unnecessary examinations, prescriptions and treatments or for so-called diet foods. But who would determine what is useful or not?
The liberal exercise of the veterinarian must be preserved. Let me point out, however, that approximately eighty to eighty-five percent of dogs suffer from a chronic disease to a greater or lesser extent: obesity, liver damage, metabolic diseases, various gastrointestinal disorders, weakened immune system, allergies, cancers, infections and all kinds of skeletal conditions. In terms of the mortality rate, cancers now occupy by far the first place in the statistics.

We veterinarians should therefore make use of our precious therapeutic freedom and maintain a frank and direct relationship with the owners so as to intervene upstream, through information and prevention, in order to avoid as far as possible the diseases mentioned above. Unfortunately, the daily life of the professional is most of the time very different. For lack of veterinary knowledge, but also above all out of financial interest, the animals are tormented and exhausted by all sorts of useless measures which only hasten their entry into chronicity.

This book aims to shake you up and open your eyes, dear readers! It intends to challenge both my sisters and brothers and the owners of the animals in care about the errors and abuses that occur in large numbers in veterinary practices.

I am fully aware that most of my corporation does not

shares neither my achievements nor my convictions, for fear among other things of losing its precious advantages. They will reproach me for my incompetence, they will say that I spit in the soup and what else do I know? However, the number of chronically ill dogs and cats is increasing along with the number of antibiotics, dewormers, etc. administered, which proves me right: something is wrong with our system. No argument can contradict this reality. These are the facts.

It is obvious that I will not succeed in influencing or convincing the first group of veterinarians, cynical and corrupt, presented above. The second group, on the other hand, that of the "followers", is no doubt still open to some criticism and lines of thought. The third group already thinks and works like me. These sisters and brothers will find in this book the confirmation of what they had only foreseen or feared until now, as well as what they already knew.

In closing, let me give you an example of unparalleled cynicism observed in one of the representatives of my corporation. About a year ago I met a colleague from Tyrol who is one of the strong advocates of various diet foods, which of course he himself distributes on a large scale. When I asked him if he knew what he was doing to animals by prescribing such products, his response was: “Of course I know, but customers are flocking to it. This is what makes me live, and even very well! " What more can be said ?

I am well aware, unfortunately, that “colleagues” of this type have no interest in revising their way of thinking. The pressure must come from the group with the greatest power in veterinary medicine. And that group is you, dog and cat owners! Find out what is best for your animal and, if necessary, dare to say

no to your vet.

When, as was the case a few days ago, I hear from an owner who tells me that his dog has not relapsed since being taken into my practice, it is the greatest compliment , that as a veterinarian, one can do to me. I hope you find a professional near you who works with global methods for the benefit of your animal's health and begins by sparing him the diseases induced by unsuitable foods and treatments.

My book should be able to help you see more clearly while showing you what the alternatives are and how to use ready-made foods, medicines, dewormers and vaccines with lucidity.

JUTTA ZLEGLER,

Hallein near Salzburg, January 2011

CHAPTER 1

THE FELIX CAT CANNOT URINE

The consequences of a diet based on croquettes and canned pâtés

The cat Félix was only five years old when he fell seriously ill. Sitting for hours already on his cat toilet, he tries in vain to urinate. He just manages to make a few drops of blood at the cost of intense pain. He screams so loudly that his mistress, Johanna P., panicked, joins all ceaseless business at the first veterinary clinic. There, Felix is carefully examined and the diagnosis falls: he has bladder stones or, more precisely, struvite stones (ammoniac-magnesium phosphate) in the bladder. Felix is anesthetized and a urinary catheter is placed. An antibiotic and an analgesic are administered to him by injection and Johanna P. is authorized to bring Felix home with ten antibiotic tablets, a paste to acidify urine and forty-eight fresh sachets of 100 grams each. against calculations (Price: €48.00).

The following day, Felix's condition improves noticeably, but he refuses the diet pâté. After two days of hunger strike, Johanna P.

phones the clinic and asks what else she could give her cat. The veterinary assistant advises her very kindly while warning her: a rapid relapse is to be feared in the event of prolonged refusal of the diet. The only solution: replace the freshness sachets with croquettes. Johanna P. therefore returns to the clinic to proceed with the exchange. Impossible unfortunately, since Madame P. has – logically – started the batch of sachets. Forty-four sachets out of forty-eight are intact, but for lack of a complete batch, it is now impossible for the clinic to sell the remaining forty-four sachets. Needless to say! Very annoying though...

Johanna P. returns home with a 3.5 kilo bag of bladder diet croquettes (Price: €32.00). Same refusal from Felix. It also spits out the paste to acidify the urine. Johanna P. manages to get her Félix to take the antibiotic tablets by using skill, patience and… liver pâté, not without a guilty conscience, since according to the veterinarian, Félix must not take anything other than his diet foods.

After two more days during which Félix still stubbornly refuses to eat, Johanna P. calls another veterinarian. He listens to the statement of the antecedents and invites Mrs P.
to come straight to his office. She installs Félix, already emaciated, in his transport cage and takes the road. Arrived in the waiting room, she is struck by the number of trial doses and posters advertising diet foods. Unfortunately, the consultation does not tell him anything more. To the question about the possible origin of the struvite stones, she does not get a more satisfactory answer than at the first clinic:

"A lot of cats suffer from it, it happens often," says the

veterinary. This is illuminating!

"Then all I have to do is give him these foods for life. expensive diet and he doesn't like it at all? asks Mrs P.

— Yes, of course, otherwise he will fall ill again, warns the veterinarian who has the solution right away. There are stone diet foods from another brand that he is sure to like!

Félix is given an injection and Madame P. leaves, this time with twelve boxes of stone diet (Price: €32.40) and, to vary, three kilos of croquettes from the same range (Price: 29, €90). Excuse a bit!

Johanna P. returns home with her protege and full of hope. But the new food does not cause enthusiasm in Felix either. He tastes a few crumbs of kibble before turning away in disgust. He barely touches the boxes. Madame P. is in despair and wonders what she did wrong. Advertising like the veterinarian assures that ready-made food is the best for cats and that it tastes good to them. It is therefore impossible to do harm by giving only ready-made foods of superior quality!

Why then does the cat Felix end up with struvite stones? Johanna P. did everything right, however, since she never served her cat anything other than ready-to-use food that was “balanced” and “adapted to her needs”.

There are countless cat owners who ask themselves the same question every day without receiving a satisfactory answer from their veterinarian. Questions about proper nutrition for healthy cats or illnesses caused by errors

food is clearly not welcome. As an answer, veterinarians themselves often recommend Whiskas & Cie as a first step, before selling overpriced diet food to the owners of sick cats. These special foods are not only expensive, but of poor quality, which obviously does not shock anyone, quite the contrary: the more sick animals there are, the more their masters are obliged to consult the veterinarian.

Many veterinarians, it seems, blindly defer to the recommendations of the pet food industry. No wonder there since, unfortunately, the appropriate diet of the cat is absent from veterinary training. Future professionals certainly learn to develop food programs by referring to tables of needs, but the tables in question only repeat the indications of the industry! During their training, the students are presented with various industrially prepared ready-made foods and they must, for example, calculate using the corresponding indications (ingredients and additives) the daily needs of a cat. The industry is therefore included from the outset in the studies without the slightest criticism. It's so convenient! Why, under these conditions, would a student, who has learned nothing except ready-to-eat food, suddenly start to question everything, when, on top of that, the lucrative aspects of selling food are clearly shown to him? even before the start of his professional career? Similarly, during the internships that he will do later in veterinary practices and clinics, he will never be presented with any alternative to ready-made food. The same applies to continuing education devoted to dog and cat food: it is the industrial sponsor who sets the themes and content in advance. Thus, in general, veterinarians do not know anything other than the food elaborated by

industry and find themselves in a bind.

When a young veterinarian opens his own practice, the industry immediately showers him with welcome gifts: mountains of boxes and diet kibbles are delivered postage-free to the address of the new practice, accompanied by cases of free samples – of course! – for teachers. The new practitioner thus has at hand the diet food adapted to each disease. It is so simple to maintain such a well-oiled mechanism!
To feed healthy puppies and kittens, the veterinarian recommends giving only ready-to-use food from the start.
Reason given: it contains everything they need for their growth.
This is the beautiful fable told every day to thousands of pet owners.

Yet this formula – **everything dogs and cats need is already in it** – is the deadliest heresy served up by the industry. According to her, like most veterinarians, the needs of our pets come down to certain percentages of protein, fat and crude fiber, as well as a certain number of international units (IU) of vitamins and *minerals .* synthetic, all chemically mixed in the laboratory. The result: a pure artificial product of industry. And to make sure that our poor companions eat this dead mixture well, we incorporate flavor enhancers with added preservatives so that everything does not go to waste. For each age, for each race, for each predisposition, there is a special variant, even if in reality the differences in composition are minimal: all look alike *a priori.*

But back to our Félix and his struvite calculations. As we have seen, he only knew in his life Whiskas, Kitekat et Cie, the

more often in the form of croquettes according to the recommendations of the veterinarian.

“You can easily try all the brands sold in supermarkets; if your cat likes it, it's because he's been successful,” the veterinarian told Johanna P. who, as a good mistress, left it at that.
The fact that Felix is now ill has, from the professional's point of view, nothing to do with his diet. Diseases, it should be known, come out of nowhere and a sick animal makes, by the way, more money in the fund of a practice than a healthy animal.

Why does our Felix have struvite stones? Cat kibbles contain a high proportion of cereals (up to 80%). The rest is mostly low-quality protein, “re-energized” with additives. The cat is, however, a pure carnivore and its food should contain at least ninety-three percent good quality animal protein. Cereals have next to nothing to do with proper food, save, by comparison, the small amount still in the stomach of the mouse eaten by the better-off cats, free to roam the countryside.

The cat's intestine is not at all designed to digest cereals. It is very short and therefore unable to adequately break down and utilize carbohydrates (cereals). This is why no type of kibble can meet a cat's need for quality protein. Result: too high a proportion of cereals causes a change in urinary pH (degree of acidity) which opens wide the doors to the formation of bladder stones. Moreover, by consuming its natural food, namely mice or raw meat, the cat

absorbs enough liquid, which is not the case with kibble. To cover its needs, the cat fed with kibble should absorb three times the dose in water, whereas as an animal originating from the desert, it drinks little. To compensate for the lack of liquid linked to dry food, the cat's body concentrates more urine and the bladder empties less often. This urinary concentration as well as the alkalinization of the pH due to the far too high proportion of cereals ultimately lead to the formation of struvite stones.

And Felix in all this? In the meantime, Johanna P. had had enough of expensive, barely tasted diet foods, most of which ended up in the trash. She again gives Felix the food he likes, the one before the illness. She carefully mixes the acidifying paste into it. It does not work badly. At times, she even manages to give Félix a few crumbs of diet kibble. As he came out of the adventure rather hungry, he reluctantly eats them, but eats them anyway.

A few months pass during which Félix is doing more or less well. Then one day, he's back sitting in his litter box trying to urinate. The few drops that ooze make him cry out for pity. *It's not going to start again!* Johanna P. thought before driving Felix to the veterinary clinic again. There, same procedure as before: anesthesia, probe, injections, tablets.
But new diagnosis: oxalate stones, that is to say kidney stones.
" How is it possible ? » asks Mrs. P. to the veterinarian on duty while telling him about her difficulties in the face of Felix's refusal to eat his diet food, even though he regularly absorbs the acidifying paste. The veterinarian, indignant, makes Mrs. P. responsible for the appearance of the oxalate stones. She probably added too much acidifying paste to the food. Now the urine is too acidic, hence the

calculations.

This time, Felix takes longer to recover. He drinks more and eats less and less. He does not like his new diet food for oxalate stones and prefers to fast.

After a few more months, Felix is shaggy and has lost considerable weight. Disappeared his so proud appearance. Johanna P. once again contacts the clinic and reports Felix's poor condition. The veterinarian gives him an appointment for a blood test which must be carried out as soon as possible. On the treatment table, Felix bites and scratches whoever tries to approach him. Usually good paste, it is frankly aggressive. A new anesthesia is practiced to succeed in taking the blood. The result is not good: it has high levels of urea and creatinine, the same for phosphorus. Felix has kidney disease.

He was given infusions and a few injections. As before, Johanna P. is provided with forty-eight freshness packets and tablets and four kilos of kibble – for the kidneys this time a powder that Felix will have to swallow once a day to lower the high phosphorus content in his blood.

“This diet is compulsory,” the veterinarian declares, noticing Madame P.'s desperate expression at the sight of the new stock of food and its cost. “ Kidney disease imposes a diet that is less rich in protein. To Johanna P.'s question as to the possible causes of this disease, the answer is as follows: “The kidneys are the weak point of many cats and given Felix's background, that was to be expected. Urinary stones often cause kidney failure, which sometimes does not appear until several years later, but most often after only a few months. »

It turns out that kidney disease is also the consequence of a poor diet. Diet croquettes or normal croquettes, it doesn't matter: both contain far too high a proportion of cereals. The kidneys cannot metabolize them, resulting in permanent overuse. And now Felix needs to eat less protein? It is as if a cow could no longer eat hay or grass, even though this is her main natural food source.

American studies have long clearly shown that a reduced protein intake does not cure kidney disease. Quite the contrary: the most important thing, whether for healthy cats or cats with kidney disease, is to give them quality proteins which, in their optimal form, can only be found in raw meat. Traditional ready-to-eat food, including diet food, is, in addition to its far too low protein content, made not from meat, but from animal by-products.

On the other hand, we use vegetable proteins that the cat's body absorbs very poorly or not at all. The protein content written on the boxes and packaging does not indicate their quality. Added to this are cereals that overwork the kidneys. A real poisonous cocktail for cats that are by nature pure carnivores and that are actively made sick! It is not difficult to explain the increasing frequency, in recent years, of kidney and bladder diseases in cats. They increase with the use of ready-made food and diet. Cats that are given little or no ready-made food but lots of fresh meat, on the other hand, have few bladder or kidney problems.

As for the interest of lowering an increased phosphorus level in cats with kidney disease, it has not yet been demonstrated. The lowering of

Phosphorus levels through medication should supposedly prevent the harmful buildup of calcium in the kidneys. But this artificial lowering by chemistry influences the calcium level. We therefore come to completely upset the sensitive combination of two minerals. The main causes of bladder stones are actually changes in the pH of urine and their abnormal concentration. This explains why kidney disease often follows bladder stones, even if the two clinical pictures can appear independently of each other.

How many times have I, in my own practice, had to euthanize cats that are still young (five years or even less) because of kidneys that no longer work at all. And their number is growing visibly! Yet cats, certainly sick but whose diet is still modifiable, can live a long time and above all in good shape, provided that they have not been desensitized to their natural food: raw meat or mice. In these unprocessed foods, proteins and phosphorus are present in their natural bioavailability. Neither bladder stones, nor struvite stones, nor oxalate stones form, since the pH of the urine is normal and not subject to constant variations.

That said, it can be difficult to reaccustom cats to natural food that have never known anything but ready-made foods and who have been genuinely addicted to artificial flavorings and other pheromones. However, through “soft weaning”, that is, incorporating raw meat into ready-to-eat foods and gradually reducing industrial foods, it is possible to achieve this. On the other hand, the outcome is fatal if the owner returns to industrial food after the recovery of the cat. The reappearance of the affections is then programmed. After several relapses, most

owners nevertheless become reasonable and finally respect the ban on ready-to-eat foods.

Masters and mistresses are indeed more informed than most veterinarians. The latter stoically persist in prescribing a diet either low in phosphorus and protein in the event of renal pathology, or capable of lowering or increasing (depending on the clinical picture) the pH in the event of bladder stones. This is the standard treatment and how could it be otherwise? This is what has always been taught at university.

Here is the characteristic illustration through the exchange by e-mail that I had on November 5, 2009 with the director of the faculty of veterinary medicine of the University of Vienna.

Dear Sister,

Let me tell you about my food embarrassment. What do you recommend for cats with kidney disease? Which diet foods are the best tolerated and the most effective in terms of raw materials, additives, etc.? I thank you in advance.

With my respectful greetings,

Dr Jutta Ziegler

Now here is the answer.

Dear Doctor Ziegler,

When it comes to diets for cats with kidney disease, "Hill's k/d" is the food with the

lowest protein and phosphorus contents and therefore recommended in the event of moderate to severe renal insufficiency (if the animal accepts it, which is not always the case). The Royal Canin equivalent has slightly higher levels, but is recommended for less serious cases, in the event of Hill's refusal and as permanent food; and it is in any case much better than the kidney food offered in the specialist trade or than normal food.

Clearly: in the presence of serious cases, Hill's 6 to 8 weeks. When urea and phosphorus have stabilized in the blood, start by mixing Royal Canin and Hill's, then, depending on the condition, Royal Canin alone.

With my best regards,

SIGNED BY THE NAME OF THE DIRECTOR

Go find yourself there! What does Madame Doctor X mean by “normal food”? Whiskas, Sheba and Co.? All this clearly shows the close links that exist between universities and the feed industry. It makes sense for vets to perpetuate what they've heard and learned in college. Especially since it is to their advantage.

Not a word from my dear colleague about the raw materials used in the foods mentioned. Not a word either about the poor quality proteins and the far too high proportion of cereals overstraining the kidneys. No information on the composition of the proteins, nothing either on preservatives harmful to health. And nothing finally on the possible alternative consisting in giving to a sick cat

kidneys a food prepared at home based on quality proteins. Only dependence on industry comes into play here. Common sense is not required, unfortunately.

However, it is so simple to give a cat the appropriate food (see Chapter 9). All that is needed is the common sense already mentioned and a minimum of confidence in what you do yourself, qualities that are disappearing in our industrialized world. Result: the masters who feed their cat with raw meat prefer not to talk about it or do it only in veiled terms. It is common, in fact, for them to hear themselves called heartless criminals by other pet owners who exclaim, “How can you be so irresponsible? Your animal will have deficiencies! He surely won't, believe me. On the contrary.

And what becomes of our Felix? He continued to lose weight, he rarely eats his diet food which is repugnant to him. Apathetic, he is only a shadow of himself. When he is particularly bad, Johanna P. takes him to the veterinary clinic where he is given infusions. Obviously, she consulted other veterinarians who all told her the same thing. She is not far from resignation.

One day when Félix is in particularly bad shape, spending his days without eating and contenting himself with drinking water, she decides, with a heavy heart, to deliver him definitively from his suffering. She goes with him to the clinic to have him euthanized. This time, the final bill is respectfully mailed to him.

Felix did not reach the age of seven.

A sad story that infuriates. Felix's example is not, however, not an isolated case, but one case among many, many others.

CHAPTER 2

LABRADOR PAUL SCRATCHES ITSELF UNTIL THE BLOOD

Why allergy diets only work momentarily or not at all

The Labrador Paul has always eaten croquettes (special puppy). Sylvia H. picks up the adorable little Paul at eight weeks and gives him, to be sure not to make any mistakes, the kibble recommended by the breeder. "He's already used to them, they suit him well and they contain everything he needs," she told him. But, in the following weeks, little Paul regularly had diarrhoea. Each time, however, the charcoal tablets prescribed by the veterinarian work.

Several times the puppy has to take antibiotics, because the diarrhea is particularly bad and Paul is really sick. He receives all his vaccines, he is wormed, we get rid of his fleas: the complete program of the manuals. A few short weeks later, however, Paul begins to scratch horribly. He cannot calm down, he changes places constantly, especially at night; they are constantly scratching and biting themselves. The vet treats the fleas again and gives him

an injection against the itch. They temporarily calm down to start again after a few days.
The inflammation also affects the ears which are crimson red. Paul is in terrible pain.

Sylvia H. brings Paul back to the veterinarian who prescribes him ear drops, antiallergic baths, as well as antibiotics to take for ten days. Added to this, of course, is a new sting.
Diagnosis: the puppy has an allergy. Paul must therefore now be fed with a so-called hypoallergenic food, in the form of special croquettes. Between the baths, the drops to put in the ears and the antibiotics to administer, Sylvia H. is not idle. She is not reluctant however: it is necessary to overcome this allergy! But Paul doesn't like his special croquettes at all. Sylvia H. does not give in and gives him nothing else. Paul takes it upon himself and eats. He is only six months old and is already one of his veterinarian's chronically ill patients.

At the end of the ten-day course of antibiotics, Paul is much better. Another problem, however: the tablets had adverse effects on his stomach and intestine. Result: the diarrhea is back. Sylvia H., who has learned to navigate Paul's many ailments, gives him charcoal tablets. Again, they are very effective.

But a few weeks later, Paul starts scratching like crazy again. No part of his body escapes it. The inflammation of his ears reappears and he suffers a lot. Sylvia H., in despair, changes veterinarians. The new vet orders an allergy test and puts a collar around Paul's neck so he can't scratch anymore.
While waiting for the results of the test, he is given cortisone injections as a preventive measure and cortisone tablets take over at home. THE

The test result is as follows: Paul is allergic to dust mites and food storage mites, as well as corn and beef and lamb.

Since the antiallergic croquettes he ate until then contained corn, they are replaced by others, based on soy this time. Sylvia H. is also instructed to permanently clean all the fabrics with which Paul comes into contact and to obtain a vacuum cleaner equipped with an anti-mite filter. It will also be necessary to freeze the croquettes before consumption to eliminate storage mites. Sylvia H. respects all prescriptions. She is ready to do anything to relieve Paul, who is causing her so much pain with his incessant itching and painfully inflamed ears.

For a while it doesn't work too badly, then Paul starts scratching again. Sylvia H. immediately puts his collar back on him to stop him. But one day, the attack of itching is so strong that he manages to get rid of it and rips her to pieces, before biting and scratching himself until he bleeds. By force, the skin of his belly, in particular, presents clear lesions. The affected areas are black and look like leather. As for those more recently attacked, on the back this time, they turn bright red and suppurate. Sylvia H. is completely desperate.

Paul, who will now be almost a year old, has never really been well. He is always very tired, walks do not give him particular pleasure and his pace is very far from that of a happy and healthy dog. His hair is dull and shaggy. He is no longer allowed to lie down in the living room because of his rather strong smell and his flatulence. Dog and mistress are equally unhappy with the situation. At regular intervals, the diarrhea returns. The t

coal eventually cease to act. Exasperated, Sylvia H. puts Paul in the car and drives him to a veterinary clinic recommended by an acquaintance. She's far from home, but a skin disease specialist is supposed to practice there.

In this specialized clinic, Paul undergoes a blood test and his stools are analyzed. A new allergy test, ultrasound and X-ray are also performed. Sylvia H. eagerly awaits the results. They do not bode well: the liver values are high, the pancreatic enzymes are out of the ordinary, the faecal elastase (witness of the activity of the pancreas) is insufficient and the blood count is poor. The allergy test, meanwhile, reveals that Paul, in addition to being allergic to dust and storage mites, wheat, corn, beef and lamb, is also allergic to soy. . He was given drips and pills to protect his liver and prescribed enzymes for digestion. Obviously, you have to change antiallergic kibble again. This time, the recipe is exotic to say the least: deer meat with tapioca. However, it is not enough to make Sylvia H smile again. The sums spent on analyses, treatments, medicines and food indeed reach threatening proportions for her wallet, a single twelve-kilo bag of various anti-allergic foods costing alone between fifty-six and eighty-five euros. And Paul does not heal for all that, his condition worsens.

The third change of food gives only a temporary improvement. All the treatments undertaken have led to nothing and Paul is obviously getting worse and worse. Sylvia H. then decided to make a very last attempt which led her to my office in the spring of 2008. As a specialist in homeopathy, I am constantly confronted with such cases, apparently without hope and for which

everything has already been tried. What happened in Paul's?

Let's start from the beginning. Since birth, like his mother, Paul has only been given kibble. This is how the first stone was laid for the origin of the affections to follow. Because, being fed in this way, it was impossible for Paul to build up a healthy carnivore intestinal flora. Normally, a mother transmits to her puppies, from birth and thereafter, essential bacteria as well as digestive enzymes. The process begins at birth, during the passage through the genital tract, then continues with the regular washing and licking carried out by the mother, etc. These substances, which are so important, Paul did not receive them from his mother because of his own unsuitable diet and he was unable to build up a healthy intestinal flora himself afterwards since he was fed exclusively with kibble.

What's wrong with kibble? All dry food is mechanically crushed during its manufacture to the point of making its components unrecognizable, then heated to very high temperatures. It is thus easier to work with, but this process destroys the enzymes so precious for digestion and denatures the proteins. As for the bacteria essential for digestion, they have no chance of survival. What is left alive in the kibble: nothing except storage mites! I will come back to it.

What can we do to start with Paul's case? It must be changed to a "live" food. Which of course does not mean, in this case, giving him live chickens, but food whose ingredients are still present in their original natural composition. When making kibble, the ingredients are, on the contrary, reduced to their main components, before being reassembled to obtain a new shape. However, a material

in its original form has nothing to do with the sum of its chemical components. And it is only available when food is offered in its natural form – namely meat and meat trimmings – and raw. Vegetables and aromatic herbs will complete this meal.

Sylvia H. is ready to take over the preparation of Paul's meals. You will have to start by reconstituting a healthy intestinal flora, which does not happen overnight. Paul's various allergies don't make choosing meat varieties any easier.

"Sterile" croquettes not only prevent the development of a healthy intestinal flora, but they also lead to an excessive and permanent strain on the pancreas due to the far too high proportion of cereals, resulting in a significantly increased risk of diabetes . For reasons of cost exclusively – cereals being much cheaper than meat, carnivores are transformed into granivores.

Ready-to-eat foods take up to twenty-four hours to pass through the intestine, while fresh meat takes only about six to eight. The time required for digestion therefore differs significantly. The constant overwork of the digestive tract linked to a food whose composition does not conform to the needs of the animal ends up causing an enzymatic deficit, then an abnormal fermentation in the intestine. The first reactions are diarrhoea, as they appeared early in Paul. Fermentations release substances that make the intestinal wall more permeable. This then allows larger molecules to pass and thus arrive directly in the blood. The immune system reacts by starting to produce more antibodies, themselves harbingers of the allergy. If the body constantly receives the substances in question (among which also include all

artificial additives), these can directly affect the metabolism. The immune system panics and constantly develops new defense reactions.

This mechanism also applies to ingredients which, in an ordinary situation, could never trigger an allergy, such as beef, a food that is normally both natural and healthy for a dog. These immunological reactions reproduce themselves in a chain, one excessive sensitivity succeeding another, which also explains why desensitization is not enough and only acts in the short term. It consists of making a vaccine against a specific antigen (ie the substance that triggers the allergy) administered in the form of a shot. Treatment, which can last for years, usually begins with a simple blood test to identify triggering allergens. Depending on the results and the corresponding allergy, we go from one type of food to another and only the ingredients differ. Indeed, a diet food is certainly limited to a single source of protein, but for the rest nothing distinguishes it from the others: the manufacturing process during which all the nutrients are destroyed, artificial additives are added..., remains the same. This also applies to preservatives and potentially allergenic flavorings. It is therefore logical that this solution cannot work, except in the very short term.

In Paul's case, you have to go very gradually. It will be necessary to start by purifying the overstretched intestine, then continue by reconstituting a functional intestinal flora. An elimination diet will be put in place only in the second time, in order to determine what Paul supports or not.

Two days of fasting will first be observed, during which Paul will only take water and a tablespoon of natural yoghurt which

will provide live bacteria beneficial to the intestinal flora. Then he will be entitled to cooked chicken (to start, raw later) with carrots, accompanied every day by natural yogurt, seaweed and clay. One day of fasting per week will always come in between. Everything is well tolerated by Paul. Chicken is no problem. After four weeks, the new menu consists of beef with vegetables. The meat is less and less cooked. After a few more weeks, Paul's digestion is well regulated and he eats his meat raw. His digestive system is now working very well and he enjoys his raw meat along with his daily serving of vegetables. Clay and seaweed are always part of the menu, as well as different aromatic herbs or plants: parsley, basil, oregano, chives or dandelion. The fact that he now tolerates beef well, which was positive in the allergy test, testifies to the now natural constitution of his intestinal flora.

Allergies to certain specific types of meat, such as beef at Paul's, often only concern the industrially processed product. In its raw form, that is to say raw, it is most often tolerated without difficulty. Paul's elimination diet shows that he tolerates almost all types of meat very well, but not in their industrial form. It turns out that he actually does not tolerate lamb meat. If he consumes it, his ears immediately turn red. This meat is therefore completely eliminated from their diet. From now on, the diarrhea is just a bad memory, the itching has calmed down a lot, but as far as the ears are concerned, everything is not yet back to normal. Inflammatory outbreaks are still relevant, allergies do not disappear as if by magic. But, thanks to his reconstituted intestinal flora, Paul digests well, as evidenced by the disappearance of diarrhoea. His intestinal wall no longer allows foreign substances to pass into his blood, which relieves his system

immune.

The dust mite allergy is of course still present, but in a significantly reduced form. Paul therefore needs to spend more time outdoors. This is easy to put in place for Sylvia H. who has a garden surrounded by a brand new fence in which Paul can exert himself. The allergy to storage mites is evacuated since it is absolutely forbidden for Paul to consume ready-made foods. However, this type of mite is only found in kibble. The second vet's advice to freeze kibble to kill mites is nonsense. They are certainly destroyed by freezing, but it is mainly their excrement that triggers allergies. Paul is also not entitled to leftovers (charcuterie, seasoned meat, etc.), because the additives contained in foodstuffs (whether intended for humans or animals) can be dangerous for him. Sylvia H. is pleased to now be able, by relatively simple means, to deal with a complex problem. She takes all the more pleasure in preparing Paul's meals as she sees how much he likes them. Over time, the ear infections have lessened, his now shiny coat is magnificent and his general condition is much better. He is full of life, playful and enjoys going out again. His bad smell is forgotten and he no longer writhes in pain. He can now stay with his masters in the same room without stinking. It's not the same dog anymore!

Similar cases often arise in my office, unfortunately. All do not evolve as well as Paul, but a clear improvement is observed in each of them. Some dogs are also stuffed with drugs that further damage their intestinal flora and overexcite their immune system, so much so that a complete recovery is sometimes necessary.

What are the treatments usually offered afterwards in most veterinary practices? After allergy tests and possible desensitizations (expensive, long and with short-term effects), cortisone most often takes over, as the standard remedy offered by any helpless veterinarian in the face of allergies. It is most often a long-term treatment in which side effects and illnesses (Cushing's syndrome, collapse of the immune system) are accommodated for the benefit of a temporary improvement.

However, a veterinarian should reflect and ask himself why antiallergic foods only work in the short term and why it is necessary to constantly seek new and more exotic ingredients to escape ever new allergies. Because by constantly recommending new anti-allergic foods, veterinarians artificially trigger new allergies. Some of these foods contain, like any ready-to-eat food, so many different ingredients that it is impossible to identify specific allergens. Several sources of vegetable protein are often added to one or more sources of animal protein, hence the impossibility of determining the true culprits. A properly followed elimination diet contains **only one source of protein** along **with one variety of vegetable or carbohydrate.** Nothing more. And this in no case in the form of ready-made food!

Seriously, it's obvious! One day or another, when there will be nothing left to replace ostrich, horse and buffalo meat, tapioca and endive, we may see truffles appear as the last escalation in the menus. industrial. Otherwise, there will only be a long-term cortisone-based treatment with its attendant symptoms. This is unfortunately what

usually produced, in a consistent pattern, in any standard veterinary practice dedicated to companion animals. Allergies in dogs and cats are more and more frequent and the phenomenon began in parallel with the introduction of industrial food. Fighting the problem with identical or slightly modified products made using the same industrial processes can only go wrong in the long run.

But curiously, very few people realize this. Including among the co-responsible veterinarians, who are too busy promoting their expensive diet foods to invited masters to persevere with a lot of disease-causing drugs.

I am not suggesting that all my colleagues behave this way on purpose. But some are perfectly aware and act by simple calculation. Some time ago I happened to meet a colleague who is the head of one of the firms with one of the highest turnovers in Austria in the sale of animal feed . When I asked him if he knew what he was doing and what industrial food ended up causing in the dogs and cats entrusted to us, he replied that he knew full well, but that the influence croquettes on his turnover was so enormous that he could not and did not want to give it up. Many older colleagues are well aware of the problem or are at least beginning to realize that food may have a significant connection to the steady increase in allergy cases. They are not the only ones on the rise, since the increase also concerns diseases that were not encountered in such proportions before.

In the event of a serious allergy, some colleagues are quite reasonable to begin by discarding ready-made food, before introducing

an elimination diet based on home-prepared food. But – find out why! – they are not opposed to returning to ready-made food, as soon as the animal finally gets better. Trust in this food seems limited, but commercialism and convenience prevail. Experience shows that the animal's state of health is hopeless. As long as the evil is not taken at the root – and the evil is here, as often, a food exclusively based on ready-made food – the allergic phenomenon remains uncontrollable. And everyone wins: veterinarians like the drug and kibble industry. Our poor dogs and cats pay the price.

What is the alternative? Biologically Appropriate Raw Food? In this case, only the butcher wins, or better still the organic farmer who still slaughters his animals himself and has to pay dearly for the disposal of his meat waste. This sector will struggle to find aid. It will be supported neither by veterinarians nor by the pharmaceutical industry and even less by the animal feed industry, because its implementation would go hand in hand with a drop in revenue, in particular from the sale of expensive diet croquettes!

After more than thirty years of experience and false leads in detours (yes, I too once sold diet foods, convinced of their relevance and their necessity), the outline of a very simple solution to which I have achieved is to feed our dogs and cats biologically appropriate raw food. The results prove me right and prove that it is the best. Unfortunately, there are no test series comparing ready-to-eat diet food and natural food. Only comparative studies are carried out comparing different industrial products. Who else could finance these series of tests? Obtaining a result that goes against their economic interests would in no way benefit the participants. It's not going

otherwise in human medicine. The tests always relate to the products of various pharmaceutical companies. Good products, often simpler, healthier and cheaper, but not patentable, never benefit from the least series of tests.

How many dogs have I seen whose coat changed visibly in a short time with a simple change of food and which I hardly recognized, either by their smell or their vitality. In long-haired dogs in particular, a metabolic disorder is immediately noticeable by changes in the coat and skin. A dog fed with raw meat looks completely different, its smell is also very different. This is obvious to any attentive observer.
Only, as too few masters feed their dog in a manner appropriate to its species and as all or almost all dogs have a shaggy and lackluster coat, it is less noticeable. One day ask the owner of a dog with dull hair and a repulsive odor what he gives him to eat. You will always get the same answer: ready-made food. Try it, you'll see!

I still remember the launch in the seventies of Chappi or Pedigree Pal, the first cans for dogs, the most famous at the time. Their effect was drastic. The dogs that ate it looked dirty, gave off a foul odor and deposited huge red droppings in the middle of the landscape. It came out the same amount that had been given or almost. These canned food brands were then and continue to be *by and large* the most mediocre products on the market. It is obvious that only the most resistant dogs support this pittance without falling ill. In the meantime, many products have appeared, which certainly raise the level of raw materials, but nevertheless remain ready-made products with all their disadvantages.

Let me share with you in the following paragraphs some of the questions asked by desperate owners of pets with allergies on a large German Internet forum dedicated to dogs.

About Susie, five-year-old female West Highland white terrier, sterilized:

> *We have been treating an allergy in our West Highland white terrier for two years without success. After numerous attempts at treatment (diet foods, auto haemotherapy(1), almost daily medicinal baths, antibiotics, etc.), our veterinarian himself has run out of solutions. The ailments are as follows: oozing and partly purulent pustules all over the body, large dark crust, very red skin. Without taking cortisone, our dog would no longer be there.*

Response from the veterinary team:

> *Unfortunately, your request does not reveal how the allergy diagnosis was made or what examinations have been carried out to date. A food allergy can only be identified by means of an exclusive elimination diet that is resolutely followed for a minimum of six weeks. To detect an inhaled allergen causing an allergic reaction in the context of what is called atopy (allergy without an identifiable cause), the research can go through a blood test or preferably an intradermal skin test. If a culprit allergen is detected but cannot be avoided (eg dust mite), the solution is to do what you*

calls desensitization. During this treatment, increasing doses of the responsible allergen are injected under the dog's skin, in order to obtain a habituation of the organism.

In the Westi, a kind of yeast (Malassezia) settles on the already affected skin, which causes an aggravation which in turn requires special treatment. A skin biopsy can give more information about the cause of the disease. If it is impossible to make a clear diagnosis, then no targeted treatment is possible and only symptomatic treatment remains.

About Wotan, 4 month old male German Shepherd, allergic to dust mites and storage mites, fed at Royal
Canin Junior for German Shepherd, under cortisone:

Good morning,

Our dog has an allergy to dust mites and storage mites diagnosed by a blood test. To suppress the itching we have to give him cortisone tablets, which obviously is very bad for a puppy. But we haven't found any other solution so far. We put the croquettes to soften in water and we give him a little safflower oil once a day. Otherwise, it's a small piece of dog full of life. What more can we give him against the itching?

The veterinary team's response is essentially the same as that provided for the first case, except for the recommendation to proceed.

vacuum cleaner with special filter frequently in parallel with desensitization and to consult a specialist in skin diseases.

About Toby, a neutered seven-year-old male Golden Retriever. History: prostate disorders. Food: Bosch Active.

> *Immediately after eating, our dog is itchy, he rolls on his carpet, scratches his jaw and all along his paws. It is active and free three to four hours a day.*

The veterinary team advises trying different brands of generally recommended hypoallergenic food (all in kibble form).

About Mr. Spock, male crossbreed, six years old. Food: RoyalCanin antiallergic.

> *For about a year, Spocky has been in treatment almost every week. The allergy test is positive to beef, lamb, chicken, turkey, soy, barley, rice, corn and cow's milk (all class 5 on a scale of 6 ranking the levels of allergenicity). He has very itchy, dry pustules all over his body, red patches the size of a two euro coin on the inside of his thighs and scattered on his stomach, as well as severe desquamation. Our dog is losing hair, smells strong and is very restless. Puppy already, it happened to him to scratch in an impressive way and to crawl on the back on the carpet… Immediately after the result of the tests of allergy, I gave him the food recommended by the veterinarian. We haven't given him anything else for three months. None*

hit. We only bathe him with a special shampoo. We also gave him Atopica tablets. We stopped with the agreement of the veterinarian, because the demonstrations worsened. Spocky is now taking Cefazic(2) 600 mg (which has often had an effect on him). A new herbaceous allergy test was carried out and proved negative. The veterinarian considered that only autohemotherapy could still be attempted and that in case of failure, only cortisone remained. Does cortisone treatment always work and what are its side effects? Since the allergy food does nothing, should I replace it with Nova Foods(3) (fish and potato), or can it be useful if I prepare the food myself? __ What should I do to make Spocky's life bearable? I have spared no expense and no effort has made me back down, without success so far. It's really exhausting.

Response from the veterinary team:

You can absolutely start by preparing the food yourself, the classic hypoallergenic diet consisting of horse meat with potatoes. Improvement should occur within a few days. If you don't want to prepare everything yourself, you can go then or now to Nova Foods...

My comment : What does this mean? The veterinary team is visibly lost. Start by advising to prepare the food, which is right indeed, and recommending at the same time

a ready-made food… The colleagues do not seem to be aware of the absurdity of their proposal. If a dog is allergic to convenience foods, I can't just switch brands! Otherwise, all that's left is cortisone. In this case, Spocky took drugs that dampen the reactions of his immune system (Atopica is used during organ transplants to prevent rejection), then antibiotics (Cefazid). The fact that his immune system, already overstretched for years, is collapsing, is only a logical consequence.

What I find difficult to understand is why some veterinarians do recommend that you prepare the food yourself – they don't seem to rely so much on the various anti-allergic foods – but on ironing. then to good old croquettes, once the success has been obtained. Advising to prepare meals by choosing a single source of protein is fair and allows you to gradually detect which allergies are present. But let's not forget that certain allergies, to beef for example, are often present only when this meat has been industrially processed and does not concern fresh food prepared at home. In case of return to croquettes, with their industrially processed beef, it's off again for the same galley. It is also impossible, by going about it this way, to control allergies linked to the various additives present in ready-made foods.

And what becomes of our Paul? It will remain susceptible for life. While a healthy dog tolerates a portion of ready-made food once in a while, when his owners are on vacation or the meat is gone, Paul reacts to him immediately. Sylvia H. is well aware of this, so much so that she scrupulously ensures that her dog does not eat anything that has undergone any industrial processing, which excludes for example

any charcuterie. Since she has been following these precautions, Paul has been doing very well.

Faced with this type of complex clinical picture, we veterinarians, if possible, should work in a global way, have an explanatory and informative approach towards the owners and refrain from resorting to a new chemical treatment each time a new symptom appears. Ever new drugs and ever more preposterous varieties of food are surely not the solution.

And please don't touch diet foods!

Here is to close this chapter the story of Mrs. P. about the medical background of his shepherd dog, Luna:

> *Luna, a shepherd type puppy, arrived in our family three and a half years ago. Luna has grown into a very active dog and a very loving family member. When he was two and a half years old, we discovered an inflamed, oozing area on his hind leg. My vet at the time thought it might be an allergy. I had to change the filling of her basket and put some ointment on the affected area. No improvement to the key, quite the contrary. Luna started scratching her belly all the time and lost a lot of hair. It was then that I discovered that the hair on her abdomen was completely falling out and the skin in that area was turning black. New inflamed areas appeared on the inner side of the front and hind legs. The vet explained to me that it was a serious allergy.*

> *To my questions aimed at identifying possible causes, I*

said that it could be due to many things, that the problems were just beginning and that only cortisone treatment could relieve her. So he gave Luna a cortisone shot and prescribed pills. The inflammations regressed and an improvement in the skin of the belly was visible. Because of the cortisone, Luna was very hungry and very thirsty, which led to noticeable weight gain.

After about four weeks, she started scratching again and two very inflamed areas appeared on her body. His coat became dull and his skin flaked a lot. My veterinarian then explained to me that Luna had also developed a bacterial infection, which is common in the event of an allergy, the skin being very fragile. He refrained from telling me that the cortisone itself makes the skin very dry and fragile. Luna then took a strong antibiotic while continuing the cortisone tablets. I asked again if another solution was possible without obtaining a useful answer. In the days that followed, Luna's condition did not improve much. Because of her dry skin, she scratched a lot and her hair fell out a lot. I told myself it couldn't go on like this. The medications only made my dog's condition worse.

That's when I called Luna's breeder on the phone who advised me to go see Dr. Ziegler. I called her the same day and told her about Luna's background.

The doctor asked me what I was feeding him. A ready-made food, always the same, I replied. Dr. Ziegler explained to me that in more than eighty percent of allergy cases, food is the cause.

main source and that many dogs develop allergic reactions to regular dog food. It was therefore necessary to start by cleansing the intestine, then to change food.

I first gave Luna for three days only yogurt with live lactobacilli (lactic ferments). Then I took her to Dr. Ziegler. She explained to me that the cortisone had contributed to a lot of drying out her skin and that it was necessary to switch to raw food. This was all new to me since we always hear that raw meat makes dogs aggressive.

The enthusiasm and competence of Doctor Ziegler however convinced me to turn to this food and I left with a food program for Luna: steamed vegetables or reduced to small pieces, raw meat, bellies, bones, yogurt. I started looking for a butcher close to my home where I could buy meat trimmings, stomachs, offal and bones. Then I immediately started giving Luna the food

planned.

In the morning on an empty stomach, there was a cup of yogurt with the addition of a little clay, dried herbs, compote of rose hips and two tablespoons of fish oil. Later, it was time for meat or offal accompanied by mixed vegetables. In the evening, Luna ate a meaty bone, from the belly or from the throat.

Luna immediately accepted this food, it cracked the bones and gobbled up the paunches, throats and whole organ parts. In fifteen days, she was scratching

already much less. Some time later, his coat also became more beautiful and the hairs on his belly slowly started to grow back. I was very happy with the progress and took great pleasure in getting good meat for my dog, as well as seeing how joyfully and perseveringly Luna overcame a

welcome us.

After about five weeks, Luna had a relapse.
She started to scratch a lot again, inflamed areas reappeared and she lost her hair again.
Dr. Ziegler explained to me that such a relapse was nothing unusual. Now I had to go on an elimination diet, that is, change the type of meat every six weeks, to find out which meat Luna tolerated well. So I began, for six weeks, to give him only pieces of beef, then I moved on to poultry. The itching subsided and the appearance of his coat gradually improved. When I switched to pork, Luna started scratching vigorously again two days later. I immediately stopped. I put Luna on a diet based on

yogurt for three days, then I resumed meals, this time with poultry. At the moment, Luna is eating mutton which she likes very much and which is good for her.

Today, about six months have passed and Luna's belly has regained its coat, the black patches and inflamed areas have disappeared, and above all she hardly scratches anymore. She now digests without problems (previously,

she often had diarrhoea) and her coat is shiny.
She even regained her sporty figure. Thanks to this food based on meat, fats, fruits and vegetables, I found a dog in perfect health, balanced and lively. And that without any medication.

With this story, I would like to sincerely thank Dr. Ziegler for his solicitous follow-up and for his permanent support in the face of my initial hesitations, particularly when it came to switching to another food for Luna.

CHAPTER 3

THE NEVERENDING STORY OF SHEPHERD TOBY AND HIS KNOCKED JOINTS

The dramatic consequences of excessive selection and poor nutrition

WHEN THE P. FAMILY GOES TO GET HIM FROM THE BREEDER, TOBY, the little shepherd, is an awake puppy. Before choosing him, the father of the family was well informed about German shepherds and chose a recognized breeding. Might as well be careful. According to the media, there is no shortage of corrupt breeders. As Toby is of a so-called large breed, we give him right from the start – of course! – kibbles for dogs reaching the large size in question.

"You're sure you're right," the breeder told the P family. "That's what we've raised all our dogs with for years!" »

The P. family ensured that both Toby's parents were free from hip dysplasia (the dreaded malformation of the hip joint that occurs especially in large dogs, also called beep *dysplasia* or HD). She wants to have a dog

good health, without early joint problems – or delayed ones of course. It is with a large bag of special kibble for large breed puppies provided by the breeder that the little guy starts in life.

For the first few months, Toby is developing very well. He only eats the croquettes recommended by the breeder and it happens, which is very practical, that the usual veterinarian offers them for sale. The P. family also respects the instructions not to put too much strain on the young dog during his first year and takes him in his arms, especially when going up and down the stairs. Vaccination, deworming, flea removal, everything prescribed by the veterinarian is carried out. Toby is both a vigorous and chubby puppy, which pleases everyone since he is all the more pleasant to cuddle. In a word: it is chewable!

But at the age of nine months, Toby begins to hobble in front: a stroke to the right, a stroke to the left. The P. family takes him by car to the vet. The diagnosis that falls astounding: osteochondritis dissecans (OCD) in both shoulders! It is an anomaly in the development of the shoulder joint which weakens the cartilage. An X-ray image clearly shows the changes in the cartilage and allows the disease to be identified.

What to do ? The veterinarian, a known surgeon (and surgeons like to operate) advises to operate without delay. Both shoulder joints should pass under the scalpel. The P. family does not hesitate for long, they are ready to do anything for Toby's well-being. The veterinarian tells him that, without immediate intervention, the risk is severe osteoarthritis, which only hastens his decision.

Toby is operated. On both sides. He and his family support

patiently the inconvenience of subsequent treatments. The young dog is recovering very well and after a few weeks he can stand on his two legs again. His food obviously remains the same. “It has nothing to do with his diet, says the veterinarian, it's hereditary and more and more frequent these days. »

The P. family believes him and continues to give Toby the usual croquettes. That they could be the cause of Toby's disease is not considered, neither by the veterinarian nor by the breeder who considers the disease as a fatality and declines all responsibility. Both parents are proven to be free of osteochondritis dissecans and elbow dysplasia (a developmental abnormality of the elbow joint also called *elbow dysplasia).*

In the meantime, Toby has started to walk in a funny way: with each step, he turns his shoulders outwards and his hindquarters sway from side to side. It never occurs to anyone that there could be a problem. Quite the contrary: Toby's swaying is seen as an originality that makes you smile.

At one year, as is common with German Shepherds and most other large breeds, Toby had his hips x-rayed to check for hip dysplasia. There is mild dysplasia in him. “It's not a big deal, says the veterinarian, it doesn't prevent a German Shepherd from reaching an advanced age. He does not recommend any treatment.

Anyway, Toby cannot be admitted to breeding, he is already excluded because of his osteochondritis dissecans. As the radio hips required general anesthesia, the veterinarian advised to take the opportunity to castrate him while he was asleep. “Any risk of testicular cancer and prostate disease will be ruled out by the

same occasion," he said. Toby is therefore neutered.

From the age of a year and a half and on the orders of the veterinarian, Toby must now be content with a so-called "light" food since a tendency to overweight has already appeared in him before castration. However, neutered dogs are more likely to gain weight. Only, despite the sufficient rations, Toby is always hungry. The prescribed "light" food, naturally offered for sale – how practical! – at the vet, does not really satisfy him.

A few months later, when he had almost reached the age of two, disaster struck: in the middle of a walk, Toby cried out and lifted a hind leg without being able to rest it. The father of the family and his son drag him with great difficulty to the house, before immediately taking him to the vet. There, the diagnosis is made: rupture of the cruciate ligament of the knee. Only possible treatment: the immediate operation. *They were only missing that !* says the head of the family to himself. *If there is no other solution, all that remains is to have the dog re-operated.*

This time, the postoperative period is more painful. With a weight – despite the "light" food! – of almost forty kilos, walking on three legs is frankly laborious. The P. family is in a state of emergency, but overcomes the heavy burden. After a few weeks, Toby can walk again, but his hindquarters sway has become noticeably worse. He continues to eat the "light" food recommended by the veterinarian and supplements with green lipped mussel extract for the reconstruction of his joints and cartilage. When he doesn't feel like walking anymore, there are painkillers. They are certainly bad for the stomach, but they have an effect against pain.

After a few months, Toby is almost fully recovered. He is now two and a half years old and weighs forty-five kilos, which is

far too heavy and makes it look much older than it actually is.
Despite his serious affections, he remained of a very gentle nature. It's really good pasta and his family loves it more than anything.

It is during a mountain excursion that the next disaster occurs. Toby cries out again, he can't put down the other back leg, the one that wasn't operated on. Here we go again for the same galley: getting back to the car with a dog on three legs, going to the vet and learning about the diagnosis, namely rupture of the cruciate ligament, on the other side this time. The father of the family sees from here the continuation. Toby will again have to have surgery, he will once again suffer martyrdom for weeks, then hobble and hobble until he is fully recovered. As if that weren't enough, his patient owners have already shelled out huge sums for young Toby. The father, in despair, does his accounts: the P. family could already have bought half a car with the money spent. He doesn't dare talk about it, aware of the love the whole family has for Toby. He does not want to pass for the stingy service who refuses to treat his dog for base financial reasons. Ilse therefore resolves to scrape the bottom of the drawer to pay for Toby's third operation. *This is the last time,* he told himself secretly.

But the father of the family is mistaken, unfortunately. Toby's medical journey has not yet come to an end. He regularly takes pills for the reconstitution of his bones and his cartilage. His masters also give him flavored painkillers which he likes. He has already consumed an industrial quantity of it since he needs it almost constantly to be able to move around without suffering too much.

There are countless medical pathways of this type. Some

veterinarians adapt easily: a lot of affected dogs means a lot of money coming in. The profit comes, on the one hand from the sale of ready-made food, in this case especially diet food with doubtful interest and this often for the whole life of the dog, on the other hand from the operation of the damn joints no other cause than this poor diet. Once in this gear, dogs and masters go from disaster to disaster. Why is the number of joint injuries constantly increasing? What is the cause of this phenomenon? Is it possible to stop it? Answering these questions is not in the interests of veterinarians, let alone the feed industry.

Toby's journey perfectly illustrates how joint problems that we ourselves have generated in our dog evolve.
Let's go back to the beginning: joint disorders such as hip dysplasia, elbow dysplasia and osteochondritis dissecans are abnormalities in the development of the large joints of almost exclusively hereditary origin, according to breeders' associations and veterinarians. Larger breeds such as the German Shepherd, Rottweiler, Bernese Mountain Dog, Mastiff, etc. are undoubtedly more prone to these conditions due to their size and heavy weight. But how to explain that the breeding precautions taken for several decades are not bearing fruit? The German Shepherd Association was one of the first institutions to make screening for hip dysplasia mandatory in breeding dogs… but at the same time it was the first to recommend ready-to-eat food! With what result? Despite stricter selection, today we encounter significantly more joint problems (primarily the dreaded hip dysplasia) than thirty or forty years ago.

It is also curious that in countries which practice screening for hip dysplasia (HD) without the condition excluding the condition from breeding (England and the United States, for example), the number of dogs affected is the same as in Germany or Austria where selection is severe. The countries in which proven HD excludes breeding are few. Germany, Austria, Switzerland, Sweden and Holland are among them. In England, France and the United States, the question is approached a little more critically by calling into question the hereditary nature of HD; specialists think in any case that hereditary factors are not the only ones involved in the onset of this disease. Considering the various forms that HD can take, it is logical that its appearance does not have a single cause.

We have also recently isolated a gene potentially responsible for the onset of HD. Why not, but the discovery may only apply to one form of hip dysplasia.
The many cartilage and joint disorders, all grouped together under the term “HD”, surely cannot all be reduced to a single gene. We could now simply exclude this gene from breeding and wait to see what happens. But it's not that simple since we don't know what other characteristics this recently studied gene is associated with. It may be that there are actually fewer cases of HD, but that the dog breed concerned is deprived of another important characteristic and comes into the world without hair or with a short tail, for example. Unfortunately, there is no limit to the blameworthy farming practices. From the moment the German Shepherd was allowed to have a gait that is more like a frog than a dog, serious spinal and hip disorders resulting from this unphysiological posture were programmed in advance. .

Screening for elbow dysplasia and osteochondritis dissecans as a prerequisite for being declared suitable for breeding is a relatively recent practice. It is therefore legitimate to ask this question: why are these conditions more and more frequent and not the reverse since, nowadays, dogs are fed with ready-made foods that supposedly cover all their needs? Here we are back to the statement quoted above: *Everything a dog needs is already inside!* If so, how come the number of dogs with joint damage is increasing instead of decreasing?

Why has the life expectancy of large breeds dropped to eight or ten years? Fifty years ago, sheepdogs, for example, didn't they reach the age of at least thirteen or fourteen?
I still remember very well dogs who, when I was a child, lived a very long time, and that without permanent treatments (painkillers) or complicated operations. For anyone endowed with logic and able to look beyond the end of their nose, the reflection is essential: it is not possible, how is it that this path taken by so many "experts" clearly leads in the wrong direction? And why aren't there more concerned pet owners seeking to be heard?

Today, there are ranges of ready-made foods for all situations: overweight dog, dog suffering from joints, liver or kidney disease, stomach or fragile intestine, allergic or affected. of any other ailment. You can usually find a special food for each breed of dog: recipe for dachshund, recipe for Westie, recipe for chihuahua, etc. Castrated dogs and non-castrated dogs are also entitled to their special recipe "adapted to each need. individual ". I'm curious to see

which will differentiate the recipe intended for dogs that lift their right paw to pee from that reserved for left-handers.

Suppose you come across a product at the supermarket on which it is written: "Reserved for people under 50" or "Reserved for people over 1.70 meters tall", or even better "Reserved for blondes/blondes", or finally “Reserved for light-skinned Scandinavians” versus “Reserved for Black Africans”. The imagination has no limits!
No doubt you would have the impression that you are taken for a fool? In the animal feed industry, however, these products seem to be the most successful.

These *special foods,* designed for different breeds with supposedly *special needs,* are a pure invention of the industry which clearly leads to the conclusion that none of them can be optimal.
Toby, for example, started as a puppy eating his ready-made food designed for large dogs. Its protein and fat content, as well as the balance of essential minerals such as calcium and phosphorus or its vitamin A content are supposed to precisely meet the needs of large dogs. The same goes for a few additional factors that are particularly important for growth. Let's take a closer look at what it really is...

Let's start with calcium and phosphorus. The needs mentioned in the literature show significant differences. Already in 1997, Professor Ellen Kienzle (University of Munich) concedes:

> *The fact that variable average requirements are published complicates the situation. The source discrepancy is largely due to differing estimates of the bioavailability of administered calcium or phosphorus preparations (Waltham-Buch der*

clinical dietetics of dogs and cats).

Since the calcium and phosphorus content of foods for large dogs fluctuates greatly from one manufacturer to another (values from 1.0 calcium to 0.9 phosphorus to 0.6 calcium to 0.68 phosphorus), whether or not a growing dog receives adequate calcium and phosphorus is a matter of pure chance, both in terms of the amounts and the ratio between the two elements.

There are all kinds of calcium and phosphorus preparations on the market. The range extends from organic calcium salts in various concentrations that are well tolerated and absorbed, to inorganic calcium salts whose bioavailability is only twenty to seventy percent. When data on requirements are so fluctuating and the bioavailability of different preparations added to food varies so much, how could these ready-made artificially obtained products provide appropriate and balanced calcium and phosphorus intakes?

The next point concerns vitamin D. Vitamin D regulates the metabolism of calcium and phosphorus, it is responsible for their absorption from the intestine and their fixation by cells or tissues. The NRC *(National Research Council),* for example, recommends 404 IU of vitamin D per kg of food compared to 350 to 1,000 IU for Meyer and Zentek. In ready-to-eat foods for large breeds, up to 1,500 IU are even added per kilo of food, which is a good margin of safety. Too much vitamin D, however, leads to hypercalcemia (excess calcium in the blood). The body reacts by producing too much calcitonin. This hormone prevents the bone substance from renewing itself normally. The ability of the skeleton to

reacting to variable stresses during growth is thus greatly reduced. The consequences are joint deformities and it may be that osteochondritis dissecans and hip dysplasia have settled in this way in our Toby.

Furthermore, too high a vitamin A content (data vary between 9,500 and 15,000 IU per kilo of food) can disrupt the formation of cartilage and bone in its final form. The disturbance can also affect the development of blood vessels and lead to deficiencies in the corresponding bone, and therefore in the joints.

Vitamin and mineral requirements are still largely modeled on those set for farm animals (pigs and calves) intended for fattening, which grow rapidly and have a limited lifespan. The destiny of a dog, however, is not to be fattened for six months before being eaten; he must be able to enjoy healthy joints for a long time.

Back to our male sheepdog, Toby. Puppy already, he has a good appetite, his food benefits him, hence a tendency to be overweight. The fact that food with too high an energy content results in too rapid growth, greater weight and therefore an overload of the cartilaginous skeleton is no longer disputed today. Excessive intakes of synthetic vitamin A and minerals (calcium and phosphorus) are also factors favoring the onset of osteochondrosis and hip dysplasia.

The fact that in the past, i.e. before the launch of ready-to-eat food, puppies were able to eat their fill without developing bone deficiencies testifies to the decisive role of ready-to-use food in triggering this type of ailments. With a

"natural food", and by that I mean that is not produced industrially, an overdose of vitamins and minerals is impossible. Dogs fed this way are not affected by overweight. I will come back to this a little later.

In the case of Toby, too high an energy intake for the puppy that he was was certainly the triggering factor of his illness.
It is impossible today to verify to what extent unsuitable calcium and phosphorus levels or a vitamin overdose may also have played a role. The regular vet should have realized the puppy's nutritional status and reported it to the P family. An early and resolute calorie reduction would have saved unfortunate Toby a great deal of suffering. The low-calorie diet came much too late; likewise, the industrially manufactured "light" food prescribed was totally unsuitable.

But as long as they profit from the sale of ready-to-use foods, veterinarians will be careful not to consider that these can be the cause of certain ailments. Who is ready to go against his own interest? Have you ever seen a dog raise its paw to water itself with urine? My only uncertainty concerns the number of veterinarians who have doubts but keep their heads in the sand, according to the following principle: what everyone does can't be so bad?

In September 2008, the congress of the Association of Austrian Companion Animal Veterinarians *(Verein Österreichischer Kleintierpraktiker) was held in Salzburg.* I was impressed by the conference on the origin of joint diseases (ED, OCD and HD) given by a Swiss specialist in hip dysplasia, known and respected by professionals. In a low voice, he briefly mentioned the fact that the so-called "poor man's meal" could help many dogs with

beginnings of bone and joint ailments, thus sparing them many ordeals. He made it clear that he did not dare to say it too loudly, alluding to the representatives of the food industry present at the congress. The latter were naturally not only present, but also the main sponsors of the whole meeting. In such a case, critical remarks are obviously rather inappropriate.

As to whether or not hip dysplasia has hereditary components, specialists still do not agree on the question. For most veterinarians, only heredity can be the cause, this argument being the most lucrative. In any case, the fact is that hip and elbow dysplasias and osteochondritis dissecans can be food-borne, and the number of ailments correlates with the consumption of ready-made food. This clearly means that it has been statistically proven that the number of bone and joint diseases increases significantly in animals fed ready-to-eat food.

Our Toby reacted to the too high energy intake with impaired bone and cartilage development in the shoulder (OCD) and hip (HD). Her dysplasia was not discovered until she was a year old, while her staggering gait was an early clue. This approach resulted in an inadequate solicitation of the knees, hence the successive ruptures of the cruciate ligaments. An operation took place, but the report with the defective hip was not considered. We just put a lid on a boiling pot.

From the time of the first vaccinations, when Toby was presented to a veterinarian, the latter should have intervened by correcting the diet according to the following principle: replace ready-made foods with fresh foods and avoid anything that provides too much energy,

mainly carbohydrates here in the form of cereals. Any ready-to-use food produced industrially has too high a percentage of cereals (generally more than 50%, if not 70 to 80%). As we have already seen, cereals are cheaper than meat and provide quickly available energy, which can have fatal consequences, precisely in the growth phase. An animal such as the dog, which hardly needs cereals, quickly finds itself overweight and logically grows much faster. The repercussions on the joints as on the whole musculoskeletal system are dramatic. Veterinarians overlook this reality, since taking it into account, in the interest of the health of their proteges, implies giving up the proceeds of the sale of ready-to-eat foods. Our dogs and cats, meanwhile, bear the brunt of this failure.

A host of owners are lulled into the fable of “good ready-made food”. They make their animals sick by feeding them and once the disease is there, they serve them the corresponding diet menu which in turn is very likely to cause the next disease. No one establishes a cause and effect link between food and these chain diseases, not even veterinarians, which is hardly believable knowing that they are best placed to be at the

fluent.

Let's come to so-called “light” foods, which are also totally unsuitable. Real empty shells. If we look at the composition of a "light" food among the best known, the most recommended and the most sold by veterinarians, its ingredients already betray its mediocrity. The proteins used in particular, cheap and of poor quality, do not meet the needs of an overweight dog at all. His damaged metabolism rightly calls for quality proteins

superior; it is not enough to add fiber as is most often the case in "light" foods. Naturally fed dogs and cats do not gain weight. Have you ever seen an overweight wolf or wildcat?

Let's take a closer look at the ingredients of this hit food. **The main ingredient** (it appears in the first place of the declared ingredients, the other ingredients follow in descending order) is **poultry meal.** But here it is: only poultry **meat** meal contains quality proteins, poultry meal, on the other hand, is only a conglomeration of dried by-products: feathers, legs, claws, beaks, etc… Once transformed into flour, it is impossible to identify these poor quality raw materials. There is, for example, a feather meal *(sic),* produced by a well-known company and intended for the manufacture of pet food, the nature of which is obviously no longer recognizable. The quality of the proteins – if it can still be questioned… – is correspondingly, that is to say extremely poor.

Lignocellulose is also an ingredient. It is a cellulose soiled by remains of lignin (lignin is an organic substance stored in plant cell walls and used for conversion into wood); it is therefore made of wood, jute or bamboo.

Let's continue with the following ingredients.

Dried beet pulp : this is a by-product obtained after extracting sugar from beets (pure waste).

Corn gluten : it is a sticky residue, resulting from the industrial processing of corn and rich in proteins. It certainly contains a lot of

vegetable proteins, but they are very difficult to assimilate by a carnivore, I will never repeat it enough. Corn gluten prevents diarrhea and thus keeps non-absorbable and toxic substances in the body, with the consequent overload of the kidneys and liver.

Animal fats : without further details, this is pure ultimate waste. These fats must be dehydrated before they can be made into dog food, a process that causes them to go rancid quickly. An American study concluded that the absorption of these fats is linked to the onset of heart problems, the development of tumors and an increased risk of cancer. Waste products such as old fats from frying are also transformed.
The imagination and economic foresight of the animal feed industry have no limits.

The dioxin scandal in Belgium, for example, was triggered by such fats added to animal feed.
In 1999, the Fogra company had collected recycled fats and oils for the Verkest company. The containers of frying oils had not been clearly separated from those containing used motor oils. These polluted oils ended up in animal feed, resulting in increased mortality or disease symptoms in poultry farms. Food analysis has revealed a high concentration of dioxin responsible for pollution. Dioxin was found, during additional investigations, not only in food intended for poultry, but also for other animal species. Dioxin is a poison absorbed by the intestine and stored in body fat.

In addition to the consecutive disorders of digestion and enzymatic functioning, dioxin promotes cancer. It is not without reason if most rendering professionals in Belgium,

Holland and Germany have the production of fats as an ancillary activity.

Surveys carried out in Switzerland have revealed that half of the fats intended for animals are polluted by mineral oils. But these cheap fats are mainly used by large producers of food for dogs and cats that I will not mention by name, but that you know like everyone else thanks to the advertisements broadcast daily.

But let's go back to the list of ingredients contained in our "light" food.

Psyllium : These are psyllium seed husks that can fill up to fifty percent of their volume and are therefore supposedly satiating.

Crustacean and cartilage hydrolyzate (glucosamines and chondroitins to strengthen the joints). Its production is more reminiscent of recycling leftovers. Glucosamine is obtained from shrimp and shrimp shells; chondroitin, for its part, mainly from shark cartilage, but also from beef lungs, ears or pig snouts. It remains to be seen whether chondroitin and glucosamine have any interest from the point of view of nutritional physiology.

L-carnitine : This vitamin-like substance is believed (unproven) to promote fat burning, which would actually be helpful considering the amount of sugar and carbs in this so-called “diet” food.

Sodium triphosphate : it is a stabilizer, emulsifier and

artificial acidity regulator. The vitamins, minerals and synthetic amino acids added in quantity explain the use of this substance to upgrade a product that is largely of poor quality.

Finally, the proportion of **crude fiber** is very high (8.2%). A high proportion of crude fiber increases stool bulk; it also reveals that poor quality vegetable raw materials were used. Likewise, the high proportion of **raw ash** (8.2%) certainly guarantees firm stools, but at the same time overloads the kidneys enormously (especially in the event of simultaneous intake of synthetic vitamins). This proportion should not exceed 5%.

Almost no veterinarian, it seems, bothers to question these ingredients. Only the crude protein and fat contents are taken into consideration. The majority of veterinarians are obviously unaware that crude protein and fat contents of 24% for the former and 10% for the latter, for example, can be achieved by using old shoe soles and oil used engine. The use of these "basic products" has been proven by relevant tests carried out in the laboratory!

When a dog has diseased joints like our Toby, the veterinarian often recommends a "special mobility" food.
(“Mobility”). The latter is, in terms of ingredients, of just as poor quality as the “light” food analyzed previously. The addition of a green mussel extract is put forward for its indication in the treatment of diseased joints.

The "Dietary foods, nutrition and allergies" commission of the Federal Institute for Risk Assessment, headed by Dr. Rolf

GroBklaus, waved the red card in 2008 against advertising messages related to a disease that he considers unacceptable. The beautiful promises of many manufacturers of food supplements and health ingredients were targeted and, among other things, it was forbidden to qualify green-lipped mussel extract as effective in the event of joint problems. The awarding of this red card concerns food for humans, but can certainly apply to animals. Most consumers are unaware that these supplements are not subject to any authorization and are not the subject of analyzes aimed at establishing their effectiveness and their harmlessness. When you consider that the pharmaceutical companies themselves fund the studies they cite, the results don't mean much. As for independent studies, they do not exist.

Consumers who are pet owners are well and truly misled by the industry. We simply add to ready-made foods, which are by themselves of mediocre quality, certain healthy ingredients – in our example, green lipped mussel extract – in order to enhance them and give them a semblance of health. face efficiency to joint problems. The prices of these foods, including health ingredients, which can of course only be obtained from the veterinarian, are sky high: a fifteen kilo bag with mediocre contents can, depending on the brand, exceed the ninety euros. A beautiful mirror with larks!

Healthy ingredients are not necessary when the dog is fed naturally. Back to green mussel, glucosamine and chondroitin. These last two substances are sufficiently present in cartilage and bone. If its food includes it, and cartilage and bone are part of a dog's diet, the animal does not need substitution in the form of questionable healthy ingredients. Likewise, the

The assumption that "If it doesn't do any good, it doesn't hurt either" is not always correct. Indeed, glucosamine sulphates can reduce (penicillin, chloramphenicol) or amplify (tetracycline) the effect of certain antibiotics. Glucosamine is also a sugar which as such had to be taken into account in the diet of diabetic animals.

Here we are witnessing the creation of a need that does not exist. As with humans, we start by highlighting a need, most often through the media, before finding the corresponding cachet and putting it on the market. These are not the examples that are missing in the field of food supplements and health ingredients. In animals too, the market is booming and it's hard to find your way around. These supplements, in particular those containing synthetic vitamins which are increasingly used, including in domestic animals, should generally be used with caution. Uncontrolled absorption can very well be harmful. Unfortunately, there are no independent studies on synthetic supplements for our pets. In humans, the best-known study, called “ATBC”, was conducted in Finland and involved giving smokers synthetic preparations of beta-carotene. Beta-carotene is considered a free radical scavenger that smokers generate in high amounts.

The study had to be interrupted due to the marked increase in the number of smokers with lung cancer after absorption of beta-carotene.

An excess of synthetic vitamins can therefore do serious damage. Most of the time, adding healthy ingredients to pet food is pointless and superfluous. The fact that, on top of that, you can only get these foods with supplements from the

veterinary and on prescription amounts to making fun of owners forced to buy something at high prices that their animal does not benefit from and which can even, in the worst case, harm it. Supplements, and especially those containing vitamins, minerals, etc., are in fact drugs that fall within the competence of the veterinarian (aware of his responsibilities) and should only be used in a targeted manner.

And what happened to Toby? He did not exceed the age of seven and eventually had to be euthanized because of his broken joints.

CHAPTER 4

FOR WHAT, ABUSIVELY VACCINATED, THE BETINA CAT COULDN'T ESCAPE

Meaning and nonsense of annual vaccinations

WHEN Betina is born on a farm, she is a magnificent cat with long black hair, white paws and a forehead adorned with a white star. It was at the age of seven weeks that Betina arrived in her family, who welcomed her with tenderness. The three children in particular are delighted with the presence of the adorable baby cat with whom they constantly play. Betina is not allowed to go out, she is a pure living room feline. But that's irrelevant, because family days are busy and exciting enough. Of course, Betina is dewormed and receives all possible vaccines at nine weeks, as she should. For basic immunization , the usual veterinarian carries out a combined vaccination against typhus, coryza and chlamydiosis, associated with a vaccine against feline leucosis. The first immunization against rabies is also carried out. A reminder of all these vaccines is planned within three to four weeks. Vaccination against FIP (feline infectious peritonitis, which only affects cats) is recommended at a later date.

To the worried question of Mrs. G. who wonders if so many vaccinations at the same time are necessary and healthy for a pure apartment cat, the answer is pithy: "If you really want to protect your cat against all possible diseases, all are vital. Vaccines today are well tolerated and have no downsides. And in case your cat manages to get out, we are prepared against all possible diseases, including rabies, especially since it is also dangerous for humans. It is therefore better to play the safety card and vaccinate against all the diseases for which a vaccine exists, so as not to leave anything to chance. »

Madame G. allows herself to be persuaded and Betina receives all the recommended vaccines. She comes punctually with the kitten for all the reminders and after a period of two months, the immunization also in two injections against FIP is undertaken. In the meantime, Betina is regularly wormed, three times in all. Mrs. G. learns from the veterinarian that, in cats, vaccines only work for one year and that she will have to come every year for booster shots. Very conscientious and not wanting to make any mistakes, she carefully notes each deadline. Betina is developing very well, she is sterilized at six months and, in the following years, she receives the prescribed boosters. Everything is going well and the beautiful Betina, as demonstrative as she is cuddly, brings a lot of joy to her family.

But when Betina reached the age of six, Madame G. discovered, a few weeks after the annual booster session, a swelling in her neck at the injection site. Very worried, she had her examined by the veterinarian. He reassures her by telling her that this is a perfectly normal reaction to the vaccine, which can sometimes occur and is called post-vaccination granuloma. After a few weeks, the swelling takes on the appearance of a firm nodule, the size of a hazelnut.

On the advice of her veterinarian, who no longer speaks of benign granuloma, Mrs. G. has a sample taken which is analyzed in the laboratory. The diagnosis is damning: Betina has a malignant sarcoma, that is to say a
cancer.

The veterinarian recommends surgically removing the sarcoma without delay, which Mrs. G. accepts, since Betina is only six years old and has always been in excellent health. Her children are also in favor of the operation since, according to the veterinarian, it is the only chance to save the cat. After the operation, Betina is not very well, every movement makes her suffer, so much so that she remains all day without moving in a corner. She doesn't really have an appetite either and is losing a lot of weight. Impossible to dislodge her from her corner, nothing helps, not even her favorite treats.

After a while, Betina ends up getting better anyway.
She is recovering visibly, starting to eat well again and purring with pleasure when you caress her. The G. family is full of hope; it's a success, the cancer has obviously been defeated! Unfortunately no. A few days later, Madame G. discovered a new nodule on Betina. This time it is a few centimeters deeper. The tumor has grown back! What to do ?

The veterinarian advises a new operation. But Madame G., as a responsible citizen thank God and not paralyzed with respect before the "demi-god in white", does not allow herself to be convinced a second time. She begins to do research on the Internet, in books and goes around her knowledge. She quickly realizes several things: Betina has received several vaccines, against rabies and leucosis, with adjuvant. In addition to adjuvants (solutions, emulsions or physico-chemical mixtures intended to strengthen a vaccine), the vaccines in question contain as

preservative of thimerosal, a highly toxic mercury compound.

Post-vaccination sarcoma arises from chronic inflammation at the injection site. This chronic inflammation is intentional and massively enhanced by the adjuvant. The phenomenon is expressly desired in the case of so-called inactivated vaccines, in order to increase the immune response. So-called live vaccines do not need these boosters. The chronic inflammation present at the injection site disappears in most cases, but can also progress to sarcoma, a cancerous tumor. Cells begin to degenerate, cancer cells forming from connective cells.

Unfortunately, there is no rabies vaccine without an adjuvant. The only protection against sarcomas caused by the rabies vaccine is to vaccinate as rarely as possible or not to vaccinate at all, especially pure house cats. With regard to leucosis, typhus and coryza, there are now products without adjuvant (Purevax, for example). However, these vaccines are a little more expensive to purchase than the current adjuvanted version. Many veterinarians continue to assert that post-vaccination sarcomas are caused by poorly made injections (not under the skin, but in the skin) or by impurities present at the time of the injection. Which amounts to saying that the risk of sarcoma would exist during any drug injection, which is obviously not the case!

During her research, Mrs. G. also learns that the degree of malignancy of sarcomas is generally high. In the region of the neck specifically, the probability is great, because of the difficult access, that the surgeon cannot remove all the tumor tissue. The rate of

recurrence grows accordingly and the tumor regrows faster. It is now recommended, because of the frequency of sarcomas, to inject vaccines with adjuvant into the paw, which can be amputated in the event of sarcoma formation. This is not a bad joke, but the sad reality.

Madame G. does not have Betina operated on a second time. The family waits a few more weeks and refuses to torture her further. The tumor quickly grows to the size of an orange, so that the stretched skin begins to tear. When a liquid flows out of it, the G. family resolves, with a heavy heart, to free Betina.

The veterinarian will never stoop to acknowledging that the development of sarcoma was due to vaccinations. He will continue to stick to his schedule of regularly vaccinating all cats – including house cats – against rabies and leucosis every year. He will also persist in carrying out the annual reminders of the combination against typhus and coryza.

In the meantime, information concerning the potential danger for our domestic animals of vaccines with adjuvant has circulated in the veterinary community. And the fact that these vaccines cause sarcomas has since been scientifically proven. There is no longer any doubt. But instead of reacting to this knowledge and using unadjuvanted vaccines, most practices happily continue to administer adjuvanted vaccines and stick to completely outdated vaccine schedules. that is to say with annual reminders.

Unfortunately, I must admit that a few years ago, I too carried out annual reminders. I too, for years, took at face value the false information provided by the pharmaceutical industry. I am no exception. Today I

reproaches me for not having turned earlier to independent sources of information. In my defence, I am nevertheless able to prove that I have never vaccinated pure house cats against rabies and leucosis.

It goes without saying that the G. family was frankly shocked to realize that their Betina had been the docile victim of veterinary ignorance.

Now, what was the mistake, from a veterinary point of view, in Betina's case? What was it possible to avoid? A first thing: vaccinating an authentic apartment cat against rabies is really pure nonsense with exclusively commercial aims. Indeed, how likely do you estimate to come across a rabid fox in your apartment? It also happens that Germany and Austria, for example, have been free of rabies (fox rabies) for years, as has France. Vaccination against rabies is only necessary for dogs and cats traveling abroad and there are vaccines valid for three years for this purpose (European Ordinance 998/2003), even if protection persists well beyond that. . As far as the basic immunization is concerned, it is enough to perform a single injection and not two as was the case for Betina, like what usually happens in veterinary practices, unfortunately.

A pure apartment cat does not need to be vaccinated against leucosis either. The feline leukosis virus is only transmitted from person to person and does not fall from the sky, nor is it caught because a bird has landed on the balcony railing or the terrace. You also cannot bring the virus home under your shoes, as can happen with typhus.

Let's now look together at the different cat diseases against which vaccination is routinely practised.

Leukosis : feline leukosis virus (FeLV)

Feline leukosis takes different forms of leukemia. It is a cancerous disease of the lymphatic tissue which initially manifests itself by an increased susceptibility to infections. Only kittens less than one year old who are allowed to go out should be vaccinated, and only after a blood test has revealed that the animal is free of the virus. Leucosis is especially dangerous for young animals; the older they grow, the more their resistance against leucosis infection increases.

According to Professor Ronald Schultz, one of the world's best known and most eminent veterinary immunologists (University of Wisconsin, USA), ninety percent of kittens are infected before the age of three weeks. By the age of one year, the sustained infection rate is less than fifteen percent. The older a cat grows, the more its immune system is able to defend itself in the event of contamination. Immunity acquired by the animal itself is much more effective than that induced by vaccination. On the other hand, even a vaccinated cat can contract the disease, because in the event of permanent contact with animals excreting the virus, even regular vaccination does not protect.

There are no scientific studies on the duration of protection by the vaccine. The recommendations of pharmaceutical companies are therefore purely arbitrary and devoid of scientific basis. It can be assumed that vaccine protection persists well beyond a year. Considering the ability of cats over one year to defend themselves against the leucosis virus, one can wonder about the meaning of the annual recall. The risk of developing a post-vaccination sarcoma in this case is much higher than that of being

contaminated. In Betina's case, her immune system has also been weakened by the unnecessary annual reminders against typhus and coryza.

Typhus

Typhus is a viral condition that is accompanied by a drastic drop in the number of white blood cells. It is the digestive tract of the cat which is mainly affected. When the disease breaks out, it takes the form of violent vomiting and diarrhoea. In kittens, it can be fatal in a very short time. All kittens should be vaccinated, including house cats, since humans can bring the pathogen home.

Protection by the vaccine is good and is maintained well beyond one year. Scientists Scott and Geissinger have shown in their studies on the duration of immunity that after two injections, cats are protected for at least seven and a half years, the tests having stopped there. Leading American experts even believe that vaccination provides lifelong protection. An annual reminder is therefore not necessary. Unnecessary typhus vaccinations only expose cats to the risk of side effects without increasing their protection. On the other hand, carrying out a blood assay for antibodies is useless insofar as the value of the assay does not provide information on vaccine protection. Even a very low level of antibodies can guarantee sufficient protection. To justify the recommendations consisting of frequent reminders, most often annual, the vaccine manufacturers relied on dosages, then they stopped in a purely arbitrary way the value below which the vaccine protection is supposed to have disappeared. However, according to a study conducted by Michael R. Lappin (Professor of Small Animal Medicine, Colorado State University, 2002), the measured dosage value is not indicative of this protection.

vaccine. Resistance tests have shown that barely detectable levels still provide protection to affected cats.
So-called memory cells play a decisive role here: they are able to recognize viruses years later and come into action in the event of contamination. These memory cells are produced at the time of vaccination, in the same way as antibodies, but are not detectable by laboratory techniques. This also applies to all vaccinations. The assays therefore only make sense if it is a question of determining whether the maternal antibodies are still present in the puppy or kitten, which makes it possible to set an optimal vaccination date.

The extension to three years recently proposed by certain official “permanent commissions” is, like the annual reminders, completely arbitrary. Studies of the duration of immunity by Scott and others show that it is not necessary. The basic immunization in two injections is more than enough.

Coryza

The vaccine complex most often includes several components: herpes virus, calicivirus, *bordetella* bacteria and chlamydia. Vaccines against coryza do not demonstrate any particular efficacy, especially against the ever-evolving caliciviruses. If vaccination pr essential (case of refuges in particular), a basic immunization consisting of two partial vaccinations is then sufficient. Regarding the calicivirus, the researchers assume that vaccination favors particularly aggressive strains, which would explain the sudden disproportionate incidence of this disease in the 1990s. The best protection in shelters remains hygiene, a

good ventilation and as few animals as possible. In addition, vaccinated animals can also catch coryza.
As in the case of the flu vaccination in humans, this is due to the constant evolution of viruses.

FIP (feline infectious peritonitis)

Feline infectious peritonitis is an inflammation of the peritoneum (the membrane that lines the abdomen and viscera) caused by mutant coronaviruses. Affected cats have a fever, lose a lot of weight and have ascites (accumulation of fluid in the abdomen). The disease is almost always fatal. The vector is a coronavirus which almost all cats carry, but which only becomes dangerous and can only cause the symptoms of FIP after mutation (genetic modification). Kittens become infected at four to six weeks of age, mainly through contact with their mother.
Most of the time, the infection has a mild course; however mutants of the virus sometimes develop with a most often fatal outcome. In the absence of proof of its effectiveness, vaccination is not recommended; vaccines are even suspected of promoting the onset of the disease. Since almost all cats (50-100% depending on living conditions) are already infected with the coronavirus, vaccination makes no sense anyway. Even in cats free from the coronavirus, protection is uncertain, as shown by German studies carried out in shelters. Among twenty vaccinated cats, twelve fell ill, compared to ten among twenty non-vaccinated animals.

In summary, we come to the conclusion that our Betina has indeed been vaccinated to death. How many times, lately, have I approached colleagues to find out if their vaccination habits had

changed since data on post-vaccination sarcomas and evidence on durations of protection well over one year became public. Hard to believe, yet almost everyone I asked the question directly continues to vaccinate as before! A small number still switched to non-adjuvanted vaccines. The colleagues continue to refer to the leaflets of the vaccine manufacturers, according to which there are no multi-year licenses for the vaccines. This is not entirely true since Purevax, for example, an unadjuvanted vaccine for cats against typhus and coryza, is approved for three years throughout Europe.
The German veterinary association BPT (Bundesverband Praktizieren der Tieràrztee.V.) has recently recommended having your animal vaccinated against typhus every three years and against coryza every two years. These numbers are also arbitrary, but they are still an improvement over the previously recommended annual vaccinations or updates.

How can these differences of opinion on the duration of effectiveness of various vaccines be explained? Any vaccination goes hand in hand with an antibody assay. The level that the level of antibodies must reach to offer sufficient protection has been set unilaterally by the pharmaceutical companies. The higher this level is set, the more vaccination is necessary. The fact that the vaccine dosage reveals little or nothing about an individual's immune response, but only indicates whether or not they have been vaccinated, does not fit well with the plans of pharmaceutical companies seeking to achieve profits. Vaccination leads to the formation of s which, although not detectable, play an essential role in the immune response. Their memory persists and they are able to come into action several decades later. Let us think of the vaccinations carried out once or twice in us humans and which do not remain

less effective for life. Why should it be any different with dogs and cats?

These elements explain why we can arrive at such different interpretations. But back to my colleagues: from complete ignorance to the rejection of the most recent knowledge, passing through aggressive behavior in the face of any (fellow) criticism, the range of reactions is wide and I have encountered them all. It is easy for me to imagine how these veterinarians behave with pet owners discussing vaccinations and related issues with them. Some of them tell me when they change vets and find their way to my practice.

Why is this so? As is so often the case, economics takes center stage. “I just have to put the key under the door if I only vaccinate every three years and if I content myself with basic vaccinations. Vaccinations are the biggest part of my livelihood. This is what an elderly confrere told me recently. Dear colleague ! What can I say, except that if the annual vaccination is your main source of income, something must have gone wrong in your practice.

Do we veterinarians have the right, even leaving aside questions of morality and ethics, to carry out useless vaccinations which can even sometimes prove fatal (vaccine with adjuvant), when we are perfectly aware risks ? This amounts, out of pure financial interest, to knowingly accepting the risk of harming the animals entrusted to us and whose protection is our responsibility. That no one comes to tell me, to justify the annual reminders, that one relies on the old recommended vaccination schedules

by the pharmaceutical industry for the sole good of the animals!

It is not difficult to persuade an owner that he is putting his animal in danger if he does not have it vaccinated regularly with a formula such as: "If your dog/cat falls ill because of a lack of sufficient vaccine protection, you will be solely responsible. This is simply unfair, both to the owner and to his animal. A pure business of fear and bad conscience!

In the case that concerns us, that of the cat Betina, it is indisputable that the vaccination is directly linked to her cancer. Cases of this type are unfortunately not that rare. According to estimates by Dr. Martin Kessler, a specialist in pet cancer, the frequency of development of post-vaccination sarcoma in cats eight years of age and older is one case per thousand. There are many other side effects in the case of which the direct relation with the vaccination is not identified.

Here are some stories from a well-known pet Internet forum where veterinarians provide support to owners seeking advice.

Marianne about her cat Mikki:

My cat had a high fever (40.5°C) a week after the vaccination (typhus, coryza, leucosis). I dread the recall scheduled for the end of the month. Do I have to start over since Mikki is a pure apartment cat? I'm afraid he's allergic to the vaccine.

Response from veterinarians:

If the fever did not appear until a week after the

vaccination, there is probably no direct link… Only regular booster shots effectively protect animals – including house cats!

To the question of the owner of several cats seeking to know why the cost of vaccination against the same disease is twenty-one euros at one veterinarian and sixty-nine at the other, the answer is as follows:

It is impossible for me to recommend a veterinarian at advantageous prices but, in accordance with the scale of fees, dif erent prices are possible to a certain extent for the act of vaccination... If these sums seem to you too high for one vaccination per year or for dewormers, what do you plan to do if your unvaccinated cat gets sick?

Susanna wonders about the vaccination of her animals who are already a little old:

These gentlemen should all be vaccinated in November.

Jamy, the dachshund, will then be 1 year and 3 months old and my cat Balou 10 years old. They will obviously both be vaccinated. But

As for my other two older dogs, I'm not quite sure I want to put them through this. Jacky is already 15 and Karamel 16, both have been vaccinated every year so far. They are still in great shape, blood tests did not reveal any disease.

Response from veterinarians:

Your question is justified, but there too there is no

universal answer. What is important to know is, among other things, whether the older dog lives, for example, in a big city and goes out for walks in places where many dogs meet, or whether he lives in a rural environment where relations canines are restricted. In the first case, the risk of contagion is in my opinion too high, precisely when a dog gets old, to give up vaccinating it... Moreover, the fatigue linked to vaccination is most of the time overestimated and in case "big" reminders, it is possible to divide them into two injections.

To continue to vaccinate old dogs like these, who have already been over-vaccinated by annual boosters, defies reason. The argument that dogs in big cities are more at risk than dogs living in a rural environment has no other purpose than to panic. If vaccine protection exists, it does not matter where the dog is.
On the other hand, dogs living in town are most often multi-vaccinated anyway. From a professional point of view, it is not right to recommend for two old dogs a superfluous vaccination, the duration of their vaccination protection being already much higher than their life expectancy.

Why are annual reminders superfluous? Haven't we vaccinated dogs and cats every year for decades? Why would this practice suddenly be bad? These questions bring us to the heart of the matter: how long does vaccination really protect? It was following the vaccination against rabies, compulsory in the event of leaving the territory (in the clear of a trip abroad), that the regrettable scourge of the annual reminder of all vaccinations of the dog and the cat.

Let's come to each of the dog diseases this time, against which it is common to vaccinate every year.

Distemper

Distemper, a viral infection, can manifest itself in different forms. The usual symptoms are runny nose and eyes, pneumonia and diarrhea. Vaccination protects for a very long time.
The viruses of this disease are related to the human measles virus. The facts show that a basic immunization in two injections protects the man all his life. The idea that an annual booster may be necessary does not cross anyone's mind. Would you like to get vaccinated against measles every year? In England, long-term studies have shown that protection against distemper persists for many years: dogs were still protected against the viruses of this disease seven years after the basic vaccination carried out when they were puppies. This does not mean that the protection lasts only seven years; the studies just haven't looked at longer periods of time. It is therefore likely that, as in humans, this vaccine protection is sufficient for life. Professor Ronald Schultz recommends vaccinating dogs from the age of twelve weeks. A control of the level of antibodies is carried out thereafter.

If they are present in sufficient concentration, there is no question of recall and that definitively.

Parvovirose

A virus similar to cat typhus is responsible for parvovirus, which is why it is also called “dog typhus”. It is a relatively common disease that can be dangerous, especially for puppies and young dogs. Dogs are mainly contaminated by contact with the excrement of infected animals. THE

main symptoms are bloody diarrhea and vomiting. As with distemper, vaccination protects for a very long time. The basic immunization is necessary, the annual or three-year reminders on the other hand are not useful since they do not increase the vaccine protection. For parvovirus too, the resistance tests carried out concluded that protection was at least seven years old. There are no tests for longer durations yet.

Hepatitis

This inflammation of the liver is transmitted by adenoviruses. It is manifested by fever, vomiting, diarrhea, bleeding and sometimes also by neurological disorders. As with distemper and parvovirus, a basic immunization is indicated. According to American studies, vaccine antibodies persist for at least nine years.

Leptospirosis

Pathogens are bacteria transmitted mainly through the infected urine of rodents (rats, mice, etc.). Most of the time, the disease has a benign course, but it can, in severe cases, cause stomach aches, vomiting, fever, as well as kidney and liver damage. Vaccination against leptospirosis is very controversial. On the one hand because it has significant side effects, on the other hand because it happens more and more often that dogs contract leptospiroses not covered by vaccines. These are made from killed bacteria with multiple side effects, hence their nickname “dirty vaccines”. Certain elements of these killed bacteria can trigger an overreaction of the immune system in the form of allergies and cause brain damage, among other things. To the states-

United, only dogs exposed to an increased risk of infection are vaccinated, because they are in contact with wild animals for example. Professor Ronald Schultz does not vaccinate his dogs against leptospirosis, considering that the vaccine can do more harm than good.

kennel cough

Kennel cough is caused by different pathogens, both viral and bacterial in nature. The hepatitis vaccine works against adenovirus type 2, adenovirus type 1 is contained in many combination vaccines and there is, for dogs at risk, a vaccine against the bacterial agent Bordetella bronchiseptica to be *instilled* in the nose. Kennel cough is a problem mainly in shelters, where dogs live in close quarters. It concerns both healthy and sick dogs. Often, vaccination cannot prevent infection, only weaken it. Kennel cough is generally not life threatening and therefore vaccination is not necessary for dogs living under normal conditions.

herpes virus

Herpes viruses can result in abortions, the birth of stillborn puppies or dying prematurely. Vaccination is only useful for bitches that can give birth but do not show antibodies. In this case, two injections are made, the first seven to ten days after mating, the second about a week before the date of birth.

Borreliosis

The relevance of this vaccination is debated, in particular because the

vaccine is only effective against a species of borrelia *(Borrelia burgdorferi sensu stricto)* which is very uncommon in our country. In our latitudes, the species *Borrelia burgdorferi garinii* and *afzelii* are mainly found , but they are not contained in the vaccine. Less than five percent of dogs infected with ticks become ill. The usefulness of vaccination against borreliosis is therefore quite negligible. The vaccine is also suspected of triggering chronic arthritis in genetically susceptible animals. However, most veterinarians advise in good conscience to vaccinate. They unreservedly take up the recommendations of the pharmaceutical industry, the risk of contracting borreliosis being greatly exaggerated.

In summary, we can conclude that vaccine protection against viral diseases such as parvovirus, distemper or hepatitis persists well beyond a year. Professor Marian C.
Horzinek from the University of Utrecht, renowned virologist, specialist in domestic animals, is in favor of lifelong immunity, especially for distemper, when the animal has been vaccinated as a puppy.
In contrast, the duration of protection against bacteria-triggered illnesses, such as leptospirosis and kennel cough, appears to be less than one year. These diseases can be treated well; the effectiveness of the corresponding vaccines is highly controversial. The risk of lasting damage to the immune system is here too great compared to a preventive vaccination of questionable interest. Professor Ronald Schultz recommends vaccinating dogs once or twice when they are puppies and then stopping. Vaccination against rabies should be carried out every three years, only if stays abroad are planned.

Let us now quote the words of recognized professors on the subject of vaccination.

Professor Alice Wolf (Texas A & M University, Austin, *Veterinary Proceedings,* 1998): *We do not re-vaccinate children and adults every year, nor do we carry out antibody assays to check whether the protection is adequate. Experience has shown that it is. Human vaccines are no different from animal vaccines; similarly, the immune system of dogs and cats is no different from that of humans.*

TR Philipps/RD Schultz *(Kirk's Current Veterinary Therapy*, 1992):
Annual boosters have been a practice for many years in the absence of scientific validation or justification. With rare exceptions, there is no immunological need to revaccinate every year. Immunization against viruses persists for several years, or even the entire life of the animal. Effective vaccination against most bacterial pathogens creates an immunological memory that persists for years and allows the animal to produce a protective anamnestic response when exposed to virulent pathogens…

Professor Roland Friedrich, virologist at the University of Gießen (tribune to a commission of experts): " *Annual vaccinations are superfluous. »*

Professor Uwe Truyen (Interview for dog magazine *Der Hund) :*
Vaccination against leptospirosis should be avoided… I also consider vaccination against kennel cough unnecessary. What is decisive for protection is not vaccination, it is living conditions.

But hardly anyone, it seems, has any interest in scientifically reconsidering the usual practice of annual booster vaccinations: neither, unfortunately, the veterinarians who are reluctant to give up on one of their main sources of income, nor the pharmaceutical industry, of which no criticism is to be expected. As for veterinary schools, nothing pushes them to question the validity of the vaccination schedule. Undertaking studies requires time, work and has a cost, yet the financial means available for this research are almost non-existent.

What are the arguments of veterinarians in favor of annual vaccinations, supposedly essential, in the face of critical owners? The list is long and extravagant. This can consist, as we have already seen, in arousing the fear of an infection for lack of sufficient protection or even in highlighting so-called epidemics. Mistrust of studies conducted in the United States also serves as a pretext for many colleagues. Even if we are no longer obliged to rely solely on American studies since German universities (that of Gießen among others) now adhere to American recommendations.

The argument that annual vaccinations have helped eradicate serious diseases such as parvovirus and distemper is not acceptable. It is not the annual booster, but the basic vaccination by itself which is the cause of a lower frequency of these diseases. Vaccine protection is neither prolonged nor reinforced by the annual booster. This statement is a pure invention of the pharmaceutical industry. It is also not correct from a professional point of view, even if this bad habit is common, to renew the basic immunization of the dog or the cat in case of
exceeding the one-year interval between two vaccines. As if the

protection disappeared after a full year! The special regulations applicable only to rabies for traveling dogs and cats are brazenly transposed to all other diseases. Veterinarians and the pharmaceutical industry are rubbing their hands: the first for their purse, the second for its shareholders!

The best protection against serious diseases, for both dogs and cats, is first stable immunity. It is acquired through relevant basic immunizations, better living conditions and a species-appropriate diet. Vaccinations do not act differently from drugs, but in veterinary medicine as in human medicine, there is no medicine without side effects!

When it comes to vaccination, what are the most serious side effects?

Let's first talk about the reactions of the immune system and in particular anaphylactic shock. This is the most serious form of allergic reaction; it affects vital organs and its outcome can be fatal in the event of circulatory arrest.

Edema, skin conditions, itching and autoimmune diseases (including thyroid) may also occur, as well as diarrhea and vomiting, or diseases of the nervous system, inflammation of the nerves, paralysis and of course post-vaccination sarcomas as described above.

If these sarcomas always appear at the site of the injection which makes their cause easy to diagnose, it is most of the time not so simple, in the presence of another disease, to establish a direct relationship with

the vaccination. With hindsight, I can venture to say that some owners have told me that their dog's or cat's affection had appeared shortly after the vaccination or that, each year after the recall, their animal had changed from this or such way. If in the past I did not take these stories very seriously, I am fully aware today that an inappropriate vaccination can cause certain symptoms including allergies.

We veterinarians should also ask ourselves questions about the many hormonal disorders, foremost among which are the increasingly frequent thyroid pathologies these days. And instead of prescribing ever new and supposedly better drugs, we should focus more on prevention, such as using vaccines more responsibly. Countless illnesses are “home-made”. We vets unfortunately don't have a clue – or maybe thank God which pathologies we are ultimately ourselves.

–,
responsible.

For owners who wish to take charge of the health of their animal, I suggest the vaccination schedule opposite, briefly summarized.

FOR CATS

- **Apartment cats.**

Vaccinate **only against typhus.**

Basic immunization (vaccine without adjuvant Purevax, for example), namely vaccination in two injections of the kitten. If the cat is more than sixteen weeks old during the primary vaccination, a single injection is sufficient. Indeed, contrary to what many veterinarians claim, immunity persists for life.

- **Cats allowed out.**

Vaccinate against typhus as described above.

Coryza : vaccination does not protect against infection, it only alleviates the symptoms. Here too, the vaccination in two injections of the kitten has an effect for a very long time, if not for life. Reminders do not increase protection. It is likely that they do not bring anything to the shelters either. It is better to take care of hygiene and the absence of stress.

Leucosis : useful only in kittens and young cats.
Basic immunization (two injections) here too. The protection persists for life. Test new arrivals in groups of cats of a certain size. Primary vaccination in two injections also for older cats. In the event of close and permanent cohabitation with congeners infected by leucosis, vaccination does not always protect.

Rabies : only vaccinate if absolutely necessary (stay abroad). Then use a four-year vaccine (Vanguard R and EnduracellR(4)). There is no vaccine without an adjuvant.

- **Vaccinations of reduced or non-existent interest in cats.**

FIP (feline infectious peritonitis): the risk of triggering the disease is most often increased by vaccination.

Chlamydia : chlamydia are contained in many combination vaccines for cats. The protective effect is bad, and the risk of side effects is high.

Fungal infections : the vaccine recently arrived on the market is supposed to accelerate the healing of fungal infections in cats. This vaccine is very often found when side effects are reported. The risk factors are above all stress and living together in a confined space. Sufficient hygienic conditions are in any case more effective than a vaccination of questionable interest. The experiences reported by

owners with this vaccine are mostly negative.

FOR DOGS

Only vaccinations against **distemper, hepatitis, parvovirus** and, if necessary, **rabies are useful for the dog.** All dogs should have basic immunization against these diseases. They certainly hardly exist any more, but the corresponding vaccinations are important in protection against the puppies, resulting from massive unscrupulous breedings, which are sold near the highways and could bring these diseases to us. A two-shot immunization in puppies is sufficient to provide lifelong protection. Most of the time, veterinarians only have combination vaccines in stock. Vaccinations against seven or eight conditions are generally not recommended. There is a combined vaccine against distemper, hepatitis and leptospirosis. The latter is separate and can be replaced by distilled water.

A clarification concerning vaccination against rabies: the risk of infection is extremely low. But people who travel abroad should have their dog vaccinated. However, there is a vaccine approved for three years (Madivac(5)). The rabies vaccine should never be given at the same time as other vaccines and puppies should only be vaccinated from around six months of age (after the permanent teeth have come out).

- **Vaccinations of reduced or non-existent interest in dogs.**

Leptospirosis : vaccines, if they protect, only do so against two species of leptospira. The risk of side effects is very high.

Borreliosis : the vaccine is almost useless since it only acts against very rare borrelia in our country. The vaccine administered, to cells

whole, has many side effects.

Kennel cough : it is caused by many agents different pathogens, hence the limited benefit of vaccination.

Coronavirus : we easily vaccinate against coronaviruses these lately, the vaccine being supposed to protect against diarrhoea. The infection evolves in a very benign way with regard to the side effects. The protective effect is disputed by experts.

What if your vet insists on doing the annual boosters? The best is obviously to change veterinarians. What if all the veterinarians near you are on the same line? You don't have to have your pet vaccinated, here's all I can tell you. You are free to decide what will be done to your dog or cat. Do not be intimidated by the first argument sewn with white thread come. Instead, try asking your vet if they get vaccinated against measles, mumps, and rubella every year!

To close this chapter, let me tell you one last story from my own experience.

Madame A. was the owner of Dora, a sixteen-year-old Labrador dog. Dora was already quite weakened by age, not to mention her arthritic joints and her diseased kidneys. When she got up again, she only moved at a snail's pace. In 2009, Madame A. suddenly had to travel to Italy accompanied by Dora. Unable to reach me, she went to a colleague in the sector, so that the compulsory vaccination against rabies was carried out. Dora had been regularly "provided" with an octovalent vaccine given every year, sixteen times in all during her life as a dog. After consulting the vaccination record, the veterinarian gave his opinion: "He

would be reasonable to do everything. The deadline has passed for all illnesses. The old Dora, although a rickety castle with a very limited life expectancy, had to undergo once again a vaccination against eight diseases. A week later, I had to euthanize Dora due to acute kidney failure.

Madame A. was so flabbergasted that she could not find the strength to complain to her colleague. But the bitterness remained, of course.

Finally, allow me, dear readers, to draw your attention to the fact that vaccinations which are supposed to suppress epizootics can actually promote them.

The ineffectiveness and simultaneous dangerousness of certain so-called preventive vaccinations find their clearest illustration in the development of foot-and-mouth disease. Until 1992, vaccination was compulsory against this disease which, in addition to the so-called mad cow disease, is considered the most dangerous and contagious epizootic for ruminants and is manifested by ulcers in the mouth. and claws. All cattle over four years of age had to be vaccinated annually against foot-and-mouth disease. By comparing the evolution of the epizootic in the countries with and without compulsory vaccination, it was possible to observe without ambiguity that it was spreading much faster in the countries with compulsory vaccination than in the countries without compulsory vaccination. Since **1991(6),** it is no longer permitted to vaccinate against foot-and-mouth disease in Germany and Austria. The import of vaccinated animals is also prohibited. With what result? No epizootic has reoccurred in these two countries

It is the same in humans where mass vaccinations, such as those against diphtheria or measles, have prevented the disappearance

epidemics. The outbreaks of diphtheria in Russia, a well-vaccinated country, and of polio in thirteen countries considered particularly well-vaccinated show that what applies to animals also applies to humans: vaccination protects as long as contagion is impossible.
But if an epidemic breaks out, vaccinated and unvaccinated get sick alike. The eradication of the diseases against which one vaccinates is precisely prevented by this vaccination.
(See : *Impfen – Das Geschäft mit der Angst(7)* by Dr. G. Buchwald, a book to be recommended whose reading makes you think seriously, in particular on the prejudices linked to vaccination in children(8)).

The following quotation is taken from this same book (Preface by Dr. Jürgen Birmanns) :

It is not surprising that pediatricians are calling for compulsory vaccination. The general vaccination obligation was repealed in Germany in 1983 The notions of declining vaccination coverage or vaccination gaps are psychological weapons aimed at intimidating and stigmatizing parents who are critical of vaccines. The fact that a free-spirited adult takes an informed position against a risky medical procedure must be respected. Anyone who does research without preconceived ideas knows that diseases have causes. They are linked either to diet, lifestyle or the environment. It is paradoxical, with this lucid observation in the background, that researchers are in the process of developing vaccines against cancer of the cervix, hypertension, obesity and nicotine addiction... Massive vaccination of healthy people is of great concern. Doctors would do better to invest in primary prevention.

End of quote.

It's a safe bet that the development of veterinary vaccines against diseases such as obesity will soon come to the fore…

CHAPTER 5

WHY THE female dog DOBERMAN SANDRINA DESTROYED THE FURNITURE

" Happiness Pills " and Other Psychotropics for Dogs and Cats

SANDRINA IS A DOBERMAN BITCH FROM A RENOWNED AND PROSPEROUS BREED. The B. family, the new owners of young Sandrina, have always had dogs and know a lot about large breeds, both in terms of education and living conditions. She therefore never experienced, with her previous dogs, the slightest behavioral disorder, the slightest strange behavior. But with Sandrina, it's a completely different matter!

Already a puppy, Sandrina is unusually lively and fiery. Impossible or almost to control it and to tire it.

The children of the family take turns to keep the dog permanently occupied and to control her overflow of energy a little. At six months, Sandrina is still not potty trained. When she's on the loose she's so busy with what she's doing and distracted by her surroundings

that she forgets, it seems, to do her business. After these endless walks, she relieves herself by returning to the living room, right in the middle of the carpet: high class! Whether her masters scold her, grab her by the neck and shake her like a mother would with her disobedient puppies, or even punish her by ignoring her for a few minutes as any serious dog training book advises, nothing market. Sandrina seems to be immune to any educational measure. On the other hand, she seems curiously incapable of entering into a relationship, of establishing direct contact with the members of her family. The rare times when she is not unleashed, she seems oddly detached, absent. Nor does Sandrina appreciate being on the knees or in the arms of her masters, adults or children; this is obviously very disagreeable to him. But she is unable to remain alone: no chair, no table is high enough to prevent her from jumping over and the traces of her panic in the devastated home of the B. family are impressive. Part of the furniture still remembers it. In the meantime, the B. family has eliminated all carpets. Sandrina herself took care of removing the curtains and destroying all the sofa cushions.

At the school of the dog that she attends, she is not long in being put aside. It bothers the teachers as much as the other students. Impossible to keep her on a leash. She jumps like a goat, barks constantly and terrifies everyone around her. She ends up taking private lessons, since she is unable to submit and makes the whole group of dogs nervous with her unbridled behavior. The private lessons recommended by the canine association are not only expensive for Mrs. B. and her family, but they are useless. Sandrina's behavior does not improve. It's a complete waste of time and money!

Madame B. has already raised several dogs which have accompanied her for many years. What particularly pains her is Sandrina's total lack of interest in her. While all the dogs she's had reacted to the sound of her voice, knew perfectly well when she was talking to them or when they had done something wrong and there was a storm in the air, Sandrina on the contrary does not react to anything. Sensitive interaction, so important on the educational path rewarded with an acceptable four-legged companion, is non-existent with Sandrina. She doesn't really care who she has around her. Only the action counts!

Mrs. B. and her family members are very distressed by their dog. Whereas with the previous dogs the children disputed the permission to go for a walk, with Sandrina no one proposes anymore. It must be said that each walk turns into torture: Sandrina pulls on her leash, barks indiscriminately, jumps constantly in all directions and doesn't listen to anything. There is no question of untying her since she does not respond to any order and takes the opportunity to scamper off like crazy. Madame B. has already had to pick it up several times at the shelter; visibly disoriented, she had disappeared before being caught up by passers-by who had dropped her off.

She may have a health problem, thinks Madame B., who decides to have her examined by a veterinarian. The examination turns into a nightmare, both for the mistress and the female dog and for the veterinarian. Sandrina plays crazy, keeps barking and jumps from one end of the office to the other as if it were a play area. Only anesthesia allows in-depth examinations and a blood test .
Mrs. B. thought of bringing a stool sample because Sandrina sometimes tends to have diarrhea and bloating.

According to the veterinarian, the results of the stool and blood tests do not indicate anything abnormal and otherwise, Sandrina is doing like a charm. “She may be a little speedy and fearful, says the vet, but that will pass on its own as she grows up and with the education that it takes. »
His advice: finally find a “suitable” dog school.

Against the occasional digestive disorders resulting in diarrhoea, bloating and frequent burping and because she constantly has a terrible appetite (Sandrina eats earth and dog droppings, including her own!), the vet prescribed an antibiotic for a week and, to prevent him from eating his droppings, a mixture of minerals and vitamin tablets. "Many dogs have the same problems, he says, these are symptoms of deficiency unrelated to his behavior. He attributes his behavioral problems only to educational errors committed by the B family. Mrs. B., seized by doubt, inquires with other dog schools and always gets the same answer: bad education!

The veterinarian does not ask any questions about food. However, it turns out that Sandrina has been eating industrial food since she was a puppy.

Mrs. B. has a bad conscience and blames herself and her family. But what could she possibly have done wrong? However, she did not educate Sandrina differently from all her other dogs. She will soon be one year old and her behavior is getting worse. No one takes pleasure in his company anymore, which is rather a huge burden for the whole family. She is still not clean; it's as if she couldn't tell the difference between inside and outside.

The B. family decides to entrust Sandrina to a professional

experienced in individual coaching. He takes the dog under his wing and the intensive coaching begins. The whole family should participate in the exercises to follow a consistent line. According to the coach, everything was done wrong. It would have been necessary to educate differently a dog so powerfully guided by his impulses. The most important thing is therefore to set up days with a regular and coherent schedule.

Some time later, Sandrina is certainly more or less clean, but her hyperactivity, her lack of interest in her loved ones, her inability to concentrate on anything specific and her bouts of destructive fury remained. the same. The long coaching of several weeks turns out to be in vain and the coach ends up not knowing how to go about it either. He has however managed without problems, he says, by using patience, consistency, practical tips, and by means of small progressive coaching sequences, to integrate so many dogs into the daily life of their family. He specifies that he works according to the method of canine coach Martin Rütter called “DOGS” (for Dog Orientated Guiding System), which allows him to obtain good results most of the time. Why not with Sandrina?

Desperate, the B. family ends up wondering if they should get rid of Sandrina, but first they want to interview a new veterinarian and have the dog seriously examined again. Sandrina's good health is confirmed. However, the vet has another idea. He specifies that there is now a ready-to-use food provided with additives with a tranquilizing action. It has been specially designed for this kind of excessively active and nervous dogs. Its name: “Calm Stress management” for dogs and cats. Here is the description:

> *Calm is the first food in the world enriched with alpha cas ozepin and L-tryptophan, natural regulators of*

stress… These regulators present in the scientifically developed composition of Calm are proven to be effective in compensating for stress in dogs and cats. Selected nutrient supplements act simultaneously against problems associated with stress such as lack of appetite, digestive disorders and skin and coat pathologies… Compared to tranquilizing preparations administered orally, the tedious taking of medication is spared and desired effect is obtained through daily food.

These are the words used to promote this food.

It is obviously only available from the veterinarian and its price is accordingly. “We are going to try it, advises the veterinarian, and if it does not work, there is a drug, Reconcile. It is a dog tranquilizer that acts in the same way as Ritalin in hyperactive children. The B. family, which is ready to hang on to any branch, buys the food in question and also takes a box of Reconcile without waiting. This preparation exists in the form of chewable tablets with beef flavor. *Just in case,* Madame B. thinks to herself, *if ever the kibbles don’t work…*

Calm kibbles contain alpha-casozepine and L-tryptophan.

Alpha-casozepin the activity of a neurotransmitter (ÿ-aminobutyric acid, GABA for short) which has an inhibiting effect on stress and anxiety. Alpha-casozepine is a protein component derived from milk. It is one of the few natural substances capable of influencing cortisol levels and fighting anxiety. Alpha-casozepine is one of the ingredients in authorized doping products (Vapronol T6) which promise athletes high

level and amateur to reduce the stress associated with competition and intensive training, and to shorten the recovery phase after exercise. Tryptophan is also a protein of animal origin, precursor of serotonin, another neurotransmitter that restores balance and relaxation. Without serotonin, nothing works in the brain; it is also commonly referred to as the “happiness hormone”.
A deficiency in serotonin leads to a change in behavior patterns: lack of self-control, concentration and sensitivity
accrue au stress.

Artificial L-tryptophan is only supplied in Germany for the treatment of depressive pathologies on medical prescription; drugs containing tryptophan and presented as sleeping pills and mild tranquilizers are available without a prescription. In Austria and Switzerland, you always need a prescription to obtain L-tryptophan. Mentioned side effects include daytime fatigue, dizziness and headaches. Until today, L-tryptophan is still banned in the United States due to the possible triggering of a fatal blood disease (eosinophilia-myalgia syndrome, EMS). After 1,500 cases, 38 of which were fatal, tryptophan was withdrawn from the market. In Germany, it has been authorized again since 1996 as a medicine: the renewal of the authorization was obtained in court by the pharmaceutical industry. The decision was motivated by the fact that the disease had only affected people who had taken a tryptophan manufactured in Japan and that it was probably due to impurities present in the local production. But it later turned out that other manufacturers were affected by cases of SEM.

The following quote is taken from the independent newspaper *Der Drug letter(9),* edition 10/03:

> *Tryptophan is also the typical example of the natural essential nutritional element which, through industrial production, the addition of synthetic chemical reagents and a high dosage can become a drug capable of putting the life in danger. (The mode of appearance of the SEM remains to be clarified, NDA)*

Another question that remains to be clarified is how the body reacts to prolonged intake of synthetic tryptophan. L tryptophan is produced by biosynthesis from a mutant *Escherichia coli* bacterium . An apparently natural substance is therefore sold to animal owners in the form of a food additive, whereas it is a medicine delivered to humans on medical prescription. Few, in my opinion, owners and veterinarians are aware of what is actually mixed in food under the beneficial and innocuous name of nutritional supplement.

L-tryptophan is of course also present in our human diet in its natural form, and this mainly in meat. As an essential amino acid, it must be provided by food, the body cannot manufacture it itself. A diet low in animal protein, as in the case of a dog fed exclusively with kibble, easily leads to a tryptophan deficiency.

For what ? Because in the croquettes, the proportion of protein indicated on the packaging is achieved mainly thanks to the high proportion of vegetable proteins and not by the addition of meat (animal proteins). A deficiency can easily be due to the high proportion of maize, which is particularly low in tryptophan.

Note that the "tranquilizing food" mentioned above first contains rice, then chicken meal and corn. Apart from the fact that the

Poultry meal is not meat, but a by-product of poultry farming (otherwise it would be listed as poultry meat meal, see page 68), cereals appear in first and third position among the ingredients. It's way too much ! Not only do consuming dogs have to turn into granivores, but a poor quality product is upgraded by the addition of supplements (alpha casozepine and L-tryptophan). It goes without saying that this revaluation also concerns the price. We will come back to it.

The effect of both substances is comparable to that of Valium (diazepam). The tranquilizing food therefore simply contains psychotropic drugs for dogs! Have we all become so influenced (by advertising in particular) and devoid of critical sense that the perversion of this prescription escapes us? We even go so far as to rejoice in the fact that the industry has succeeded in concocting the *ad hoc* food for us in the event of behavioral disorders, if our animal is affected. In summary, our animals first make themselves sick by eating the poor quality products that we serve them, then come the so-called miracle nutritional supplements which, in turn, generate new disorders. Thus the ready-made food industry is constantly pushed to remedy, by means of new supposedly effective supplements, deficiencies which it has itself caused.

We now live in a society where adults with

stress are no longer the only ones to resort to psychotropic drugs. Thousands of children take Ritalin (a tranquilizing drug) for hyperactivity and now our pets are showing more and more behavioral problems and also need the corresponding treatments. And veterinarians are on board.

Behavioral disorders in dogs are indeed on the rise. The dog trainer profession is booming and special training for dogs is offered everywhere. In the event of poor education, appropriate and consistent training is generally enough for a dog to find its place in the daily life of its owners and not turn into a domestic tyrant.

Why are more and more dogs like Sandrina becoming really problematic cases? Her mistress is however experienced in dog training and thinks she has done everything to raise Sandrina correctly. This is indeed the case and she has only overlooked one reality: hyperactivity in dogs is not yet considered a sign of disease in veterinary medicine, but as the only consequence of educational errors. The fact remains that more and more over-excited dogs destroy furniture and torment their owners to the extreme. The consumption of psychotropic drugs for dogs is logically growing visibly.

Perhaps a certain similarity with the growing problems of raising children comes to mind? Are there not more and more children who stand out for their way of acting, who push their parents and those around them to the limit with their outbursts of uncontrollable aggression, who are unable to concentrate and exhibit genuine autistic behavior, appearing to barely perceive those around them? In children, it has already been discovered that there is a causal relationship between food and behavior. Some food additives can act like drugs. It is possible to lessen the manifestations of diseases such as autism by avoiding certain food components. Significant improvements have also been achieved in hyperactive children through a change in diet. By what process?

Let's look, for example, at how quickly alcohol reaches our brain and spreads its effects on our nervous system. In the same way as alcohol, other components of the diet can, via the bloodstream, cross the blood-brain barrier very quickly to reach the brain directly. Of course, this does not happen to everyone. In most of us, the blood-intestinal barrier is tight enough that dangerous substances like food additives cannot get out of the intestine. But in some people, the intestine is not completely sealed: this phenomenon is called “leaky gut syndrome” (intestinal permeability syndrome). These substances then freely reach the interior of the body, including the brain. Certain synthetic food colorings such as yellow tartrazine (El02) are suspected of contributing to the onset of attention deficit disorder with or without hyperactivity (ADHD). Australian studies showed as early as 1996 that the dose of tartrazine was correlated with the degree of symptom manifestation. Sweeteners such as aspartame (diet Coke) can also intervene in cerebral metabolism. Like glutamate which is chemically related to it, aspartame can, from a certain dose, damage the brain cells and have the effect of symptoms such as headaches, chills, etc... and trigger confusion, balance or vision problems. Everyone knows the "Chinese restaurant syndrome" caused by glutamate: this flavor enhancer widely used in prepared meals can also be the cause of unpleasant symptoms such as tingling in the neck, headaches, nausea, fatigue, etc.

We therefore see that certain components of food, in particular artificial additives, can have a neurotoxic effect and thereby influence our way of acting. If the chemical mechanisms

transmission no longer work as they should in the brain, it is easy to imagine how behavioral problems can arise. Sandrina's behavior can perfectly be compared to that of a child with attention deficit disorder with or without

hyperactivity (ADHD). In the same way, it often happens that it is impossible to calm her down, make her hear anything and get her to concentrate on a given task.

Many have become aware of the connection between human food and diseases of the nervous system. That there may be a relationship between the industrial food of our dogs and their behavioral problems is, on the other hand, never considered or almost, unfortunately. The food factor, as a major cause of psychic disorder, is purely and simply hidden. Industrially produced food can, however, trigger a reaction in the immune system (allergy) in sensitive dogs, which itself intervenes in the functioning of the cerebral metabolism.

We are well aware of the effects of allergies on the skin (rashes), the respiratory organs (asthma) and the intestine (diarrhea), mainly. Allergies which are accompanied by behavioral disorders are, on the other hand, largely foreign to us. As we know, allergies are hypersensitivity reactions of the immune system to certain substances which, if not harmful in non-sensitive individuals, can cause serious damage to their health in people or animals who are. . Each time a food is absorbed and contact is made with the environment, the body has the task of breaking down foreign substances to transform them into substances naturally present in the body. If one of the stages of this transformation process is disturbed, the so-called autoimmune diseases, allergies are born. These are most often some

proteins present in ready-to-eat foods which are allergenic. Food allergens are mostly insufficiently broken down during digestion, so that they directly reach the brain via the blood-brain barrier and thus influence neurotransmitters with the potential effect of behavioral changes (hyperactivity, For example). Additives such as the tartrazine mentioned above can act in the same way.

Now back to Sandrina. She was only raised on ready-to-eat food. We first gave her the same kibble as the breeder, so as not to disturb her. The permanent bloating, the sporadic diarrhoea, Sandrina's unusual appetite and the fact that she eats her own droppings should have attracted attention. Mrs B. admittedly mentioned these symptoms to her veterinarian, but he did not establish any causal relationship between Sandrina's digestive problems and her behaviour.

Diarrhea, bloating and eating poop are the first signs that the intestine is not working as it should. The very fact that she eats her droppings signals that the intestinal flora is not healthy. Unfortunately, this symptom is most often interpreted by veterinarians as a sign of deficiency and treated with mineral blends and vitamin supplements. However, I do not know of any case in which the intake of a mixture of minerals caused the dog to lose the habit of eating its droppings. How could it be otherwise? Most of the time, industrially produced foods already contain more (synthetic) minerals and vitamins than necessary. But some misinformation gets passed around from vet to vet and persists.

Already a puppy, Sandrina showed that something was wrong. She is

initially over-excited and unable to concentrate. Something is clearly not working for him. The junk food's responsibility for her behavioral problems only becomes clear when Sandrina finally switches to species-appropriate food and her symptoms improve significantly within a few weeks.
Today, Sandrina is certainly a lively female dog, but more hysterical. She can accompany her family on walks, even detached. She reacts to orders given by her family with whom she is able to communicate normally. She no longer decamps and behaves well on a leash.

But one thing at a time ! How is all this suddenly possible? After giving her tranquilizing kibbles for three weeks, the B. family sees almost no improvement in Sandrina. She is certainly a little calmer at home, but in freedom her behavior remains unchanged. She is hysterical and jumps like a goat at the end of her leash. If there is no noticeable improvement, Mrs. B. gives her her usual kibbles, plus one pill of Reconcile tranquilizer a day. With this pill, the female dog remains listless all day. *Looks like she's come from another planet,* Madame B thinks to herself.

It is in this state that I see Sandrina for the first time. She is a splendid dog. What strikes me the most is his total lack of reaction. Whether we yell at him or try to get his attention in some other way, it doesn't matter to him. She doesn't react in the least. The comparison with an autistic child, unable to perceive his surroundings, is obvious. Sandrina has been taking Reconcile for about a month when she is introduced to me. This drug with the pretty name (it contains the same active substance as Prozac used in humans) intervenes in the cerebral metabolism and

ensures that the concentration of the neurotransmitter called serotonin remains high at the contact points between neurons in the brain. Specially suitable for dogs and with a taste of beef, this medicine from the pharmaceutical company Eli Lilly has been authorized by the American Food and Drug Administration (FDA).

The opinion of veterinarians on the use of Prozac/Reconcile is share. Some believe that psychotropics for dogs should only be used in emergencies, such as during New Year's Eve fireworks or in situations where the pressure is unusual. As for veterinarians who have specialized in behavioral disorders, they are the first to plead in favor of a generalized use. Their argument is that Reconcile used in behavioral therapy would reduce bouts of destructive rage, separation anxiety and continual howling in anxious dogs.

The economic magazine *The Economized* estimates that the American market for psychotropic drugs for animals reaches an annual turnover of one billion dollars. Today, ten to twenty percent of American dogs take it because, if left alone, they destroy all the furniture, relieve themselves indoors and bark constantly. The Reconcile supposedly alleviates the symptoms well. The pharmaceutical group that manufactures it immediately created a department dedicated to medicines for pets. Medications actually designed for humans are here adapted to animals. In the past, the corresponding market did not exist. But nowadays, the number of people willing to invest large sums to treat their animals, including with psychotropic drugs, continues to grow. Of course, the pharmaceutical companies were quick to notice this.

There is now also a "fat burner" for dogs: Slentrol from Pfizer. Slentrol was originally designed for humans, but was not approved due to its significant side effects. Most of the time, we are content to recompose in another form, for domestic animals, pre-existing active substances. But it also happens that we resuscitate products in their original composition, like Slentrol here, which were rejected during human tests. Eli Lilly's department dedicated to pets also intends to test its wide range of active substances with the aim of “curing” obesity in particular, but also other veterinary diseases. This is how active substances can be "recycled" in a very profitable way. Of course, you have to start by creating the corresponding market. This is not the biggest problem because, in human medicine too, the drug often exists before the corresponding market has been created.

Let us take for example the lowering of the normal values of the so-called “bad cholesterol” or even the extremely extensible standards applicable to bone density or blood pressure. New “suitable” values are set purely arbitrarily, most often with reference to “studies” produced by the manufacturing pharmaceutical industry. This is how more and more people deviate from the values of “good health” and enter the category of those who need treatment, ie *ad hoc drugs.* Isn't it wonderful? This is how new markets are constantly emerging.

Prozac, as a selective serotonin uptake inhibitor (SSRI), has dramatically changed the public image of depression.
In ten years (from the end of the eighties to the beginning of the nineties), a world market of nineteen billion dollars saw

the day for SSRIs. Antidepressants were then in tune with the times, with a positive image in society, since they acted just as well in the event of eating, sexual or anxiety disorders, as in the event of depression or post-traumatic stress. Their spectrum of action was, however, visibly extended to a large field of mild disorders of the general condition such as lack of initiative or self-esteem. Teenagers took it to cure their heartache, managers to fight against exhaustion and neglected housewives to forget their frustration. Prozac was promoted as the "happy pill" by society and the media made a big fuss about it. But it became clear by the mid-1990s that considerable personality changes were occurring on Prozac, and the connection between Prozac and increased suicides was recognized. Eric Harris, the 18-year-old boy who shot 12 students and a teacher in the Columbine High School massacre in the United States in 1999, was prescribed an SSRI. "Every time someone shoots around in a school, you realize these drugs were at stake," said Ann Blake, author of *Prozac: Panacea or Pandora?* in an interview with the *Daily Express.* Withdrawal symptoms were underestimated. No lesson had obviously been learned from the problems associated with stopping Valium and drugs nicknamed "benzos". The withdrawal period was accompanied by serious side effects such as weakness, exhaustion, nausea, increased blood pressure, dizziness and nervousness. After discontinuation, patients suffered from excitement, confusion, anxiety, and sudden panic attacks.

Since the fall of 2001, Prozac is no longer protected by its patent, which has led to the arrival of many generics on the market. And now fluoxetine (the active ingredient of Prozac) reappears in the form of tranquilizer tablets for our dogs, prescribed with

eagerness without the slightest criticism! So ask the veterinarian who wants to prescribe Reconcile to your dog if he knows about Prozac. Or rather no, don't ask him anything, because he will surely not know how to answer you.

Let's go back to Sandrina and her healing. When the B. family introduced me to the dog, they made no secret of their intention to part with her or even to have her euthanized, even if this prospect drives them to despair The hope of an improvement is at its lowest and the B. family cannot bring themselves to keep their dog permanently on the psychoactive pill.

Yet the solution turns out to be as simple as Sandrina's background is complicated. It consists of switching Sandrina to a biologically appropriate raw food (or BARF for Biologically Appropriate Raw Food). From the outset, the B. family's mission was to avoid all industrially manufactured food. In short: no treats either, no cakes for dogs, no cold cuts. Nothing that may contain additives of any kind. Sandrina therefore eats very fleshy bones. Gnawing and tasting them keeps him occupied for hours. And surprisingly, switching to raw meat and vegetables also seems to improve his physical condition. Once the intestine has been cleaned up and the intestinal flora reconstituted, diarrhea and bloating disappear. As for the unappetizing habit of eating one's poop, it is diminishing without stopping completely.

To be honest, I initially had serious doubts and wondered if it was still possible to do something for Sandrina.
It is after three months and after numerous telephone conversations with her masters, that I see her again. As I said before, she found her place within her family. Admittedly, she is still a lively female dog, who does not stay in place, but she is capable of getting into

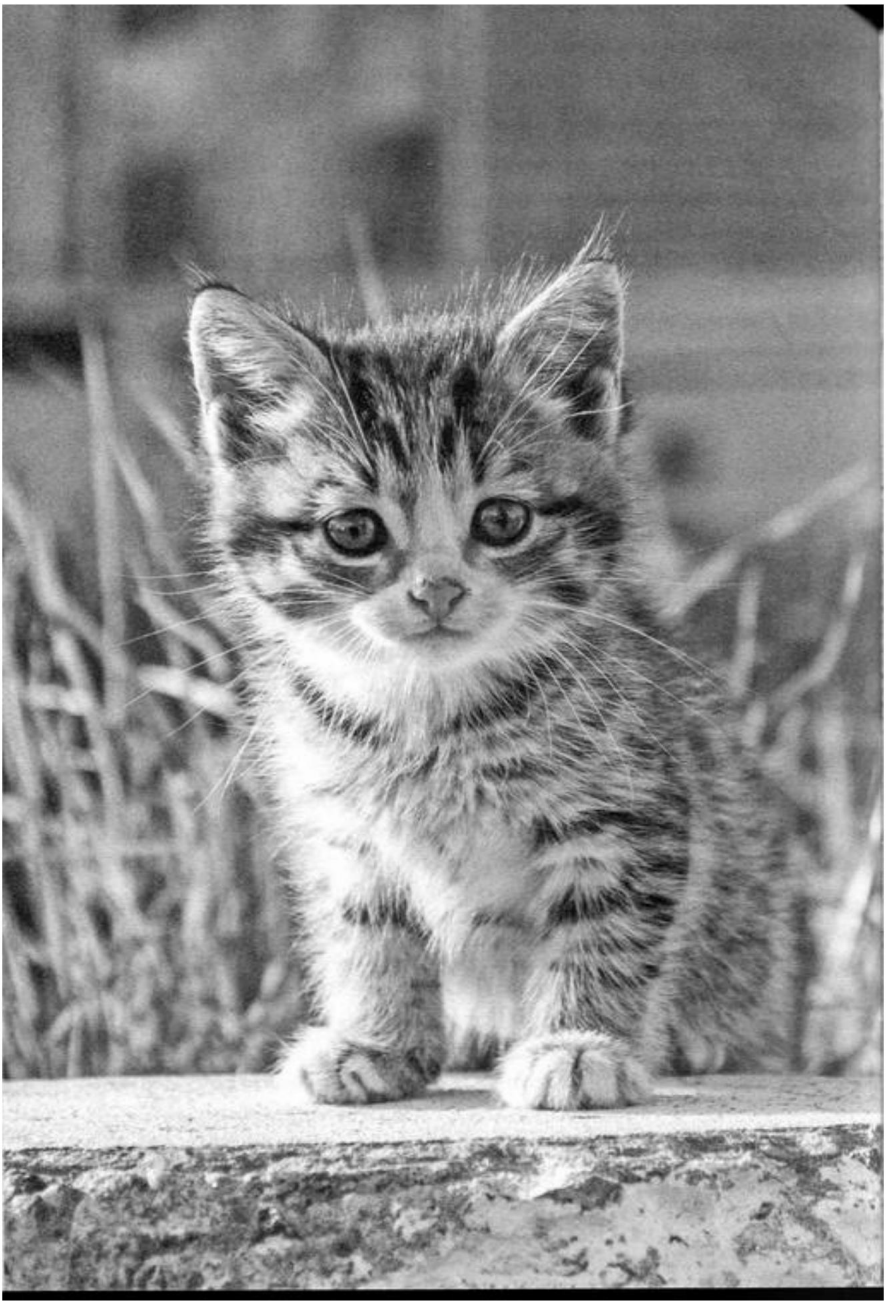
contact and communicate with family members. The latter now knows well how to go about it with her dog and it would no longer occur to anyone to part with her or worse, to have her euthanized. This is called a last minute happy ending!

But all the same or similar cases are not always solved so easily. Most often because of the dog owner's narrow-mindedness and laziness. Indeed, many owners have not yet realized that a large part of their animal's behavioral problems are attributable to dietary errors. How could they, when veterinarians themselves are unwilling or unable to take this reality into account.

In addition to poor nutrition and poor education, there are of course many factors that can lead to behavioral problems. A significant number of dogs (especially in the city) do not live in appropriate conditions. When a dog is left alone, every day, for hours, in a small apartment, when he only has a few minutes to relieve himself on the asphalt and when walks worthy of the name – when there are any – only take place on weekends, it is not surprising to see him presenting with behavioral problems. These days, most dogs don't have anything to do anymore. When the dogs of yesteryear accompanied their master on the hunt, in search of traces, or guarding the herds among other tasks, those of today no longer have, in the big cities in particular, the slightest occupation. The dog is a pack animal; being alone for a long time is not in his nature. He has an extremely sensitive sense of smell and keen hearing. Let's think for a second about the amount of smells and noises we are exposed to on a daily basis and the effect they must have on a dog's sensitive nose and ears when, on top of that, he is forced to "vegetate". " In

the artificial environment of a big city, deprived of nature and freedom.

These factors undoubtedly also contribute to causing singular behaviors in our dogs. However, foods with added sedatives and psychotropics are certainly not the solution. Instead of constantly prescribing new pills, our mission as veterinarians should be to question ourselves upstream about these disorders and to devote ourselves more to prophylaxis by delivering sound advice on food and living conditions.



CHAPTER 6

THE CALVARY OF A KITTEN
ALMOST POISONED BY
THE VETERINARIAN

Uncontrolled use of antibiotics, cortisone, avalanche dewormers, etc.

IMAGINE YOU HAVE A HEALTHY THREE-MONTH-OLD KITTEN, and you notice one day that he has a sore on his head about 1.5 centimeters in diameter. It looks like a perfectly benign scrape. But since you are not quite sure and want to be sure, you consult a veterinarian.

This examines the wound and recommends taking a sample to send it to the laboratory. The vet suspects a skin infection, allergy, or fungus. Until the results arrive, the prophylactic treatment for ten days is as follows: antibiotic tablets (Baytril) against possible skin infection, tablets against fungi (griseofulvin), as well as cortisone ointment in case , if it turned out to be an allergy. Everything is accompanied by a medicinal shampoo for the bath. "That way, we've prepared for everything, says the veterinarian, we can calmly await the results of the

sampling. It will be 130 euros, without the laboratory fees. »

Back home, you bathe your kitten with the famous shampoo, which in itself is already an almost insurmountable task.
The little animal defends itself with all its strength, it bites and sends claws around it, so much so that you come out of the operation with a few nice scratches. By nature, cats are never happy to get all wet; you are now able to confirm it. You also need to give two tablets a day. A whole antibiotic tablet and a quarter antifungal. Getting pills in a cat's little mouth isn't child's play. But, after a few failures – the kitten spits everything out – you still end up being smarter than him. Thank you liver pâté, the tablets are gone! After a few days, giving tablets has no more secrets for you, you are never short of tips.

But five days later, your kitten has a look that you no longer like. His hair stands on end and he refuses almost any food. The little he still eats, he immediately vomits. He also has nauseous diarrhea which is found, not in the small bin provided for this purpose, but everywhere in the apartment. You can't get mad, you can see he just doesn't have time to reach his cat toilet before the diarrhea sets in. There is nothing left of the little lively and nimble animal of a few days ago. Your kitten is already very weak. He's just a miserable little being. Of course, you take him back to the veterinarian who gives him a transfusion and an injection to stimulate his appetite. In the meantime, the first analysis results have arrived: no indication of allergy. So far, no fungus has been detected, but if the current fungal culture is positive, you will be notified immediately. Some types of mushrooms put

longer to develop. It will absolutely be necessary to continue to give all the tablets. We give your kitten an injection against diarrhea and you are asked to come back the next day if it is not better.
The addition amounts this time again to 130 euros, laboratory included.

The next day, far from getting better, your kitten is even worse.
It is with a seriously ill, disheveled and indifferent little animal in your arms that you consult another veterinarian. This time your choice is happier. The new vet tells you honestly that you are slowly but surely poisoning your cat with the medications you are giving him. To allow him to survive, he is given hepatoprotective infusions, because the blood liver values are very high and your cat is already very dehydrated. At the end of the treatment, you can bring your kitten home, provided that you force him to eat and above all that you remove all the medication given before. The veterinarian explains to you that the active substance contained in the antifungal (greiseofulvin) can seriously damage the liver and kidneys. By reading the leaflet, you notice that it warns against administration to kittens, because the latter can only break down the active substance slowly, resulting in increased side effects which can be among others: nausea, vomiting , diarrhea and liver damage. Some of these symptoms tell you something.

A few days and several transfusions later, your baby cat is better. The intestinal flora greatly disturbed by the drugs (especially by the antibiotics) has even been reconstituted and the diarrhea has disappeared. As for the possible sequelae, the veterinarian can of course not decide in advance. There is now not much left of the small hairless area that led you to consult. The final analysis still pending requested by the first veterinarian does not tell you

nothing more: no mushrooms.

This example is really extreme, you will tell me, dear readers. However, no. This case did exist as I have described it.
This is the typical example of the common use of drugs in veterinary practices. Whether these practices must be attributed to the lack of assurance which leads to preparing for all eventualities for fear of missing out on anything (which is most often the case with young colleagues) or whether it is act of transforming a perfectly benign case into a lucrative patient, these are, in my opinion, gross professional faults which our animals bear the brunt of.

We veterinarians are in good company here.
Human health professionals also prescribe antibiotics without necessity or control. Here is what a doctor answered to the "question of the week" selected on an Internet advice service made available to insured persons of the regional health insurance fund of Rhineland-Palatinate (AOK Clarimedis) :

> *The rapid recourse to the antibiotic is often useless. Most common infections are triggered by viruses. But antibiotics do not work against viruses!*
> *Many patients suffering from flu infections or coughs nevertheless expect their doctor to “give them something”. Scientists from the University of Düsseldorf found in a 2007 study that 40% of antibiotic formulas are useless in case of respiratory tract infection since this type of infection can be fought by our own immune system. The uncontrolled intake of antibiotics, on the other hand, promotes resistance and disrupts the intestinal flora with*

as a possible consequence antibiotic-associated colitis (inflammation of the intestine triggered by antibiotics, NES).

Let's take a closer look at the exemplary case of our kitten. Instead of starting by waiting to see how the hairless area evolves, which in this case turned out to be harmless, we place this poor animal under an avalanche of chemicals. We can start by asking ourselves why was an antibiotic prescribed? Antibiotics are used against pathogenic bacteria. Bacterial infections are usually accompanied by fever, inflammation, redness and possibly, depending on the area of the body concerned, severe pain and impaired general condition. However, in the present case, none of these symptoms were present.

Most veterinarians prescribe antibiotics with multiple side effects as if they were cough drops. At the slightest scratch, at the slightest skin change, at the slightest little sore, we bring out the big artillery. In other words, we're trying to kill a fly with a bazooka. In other words, we play with the fear of the owner for his animal: if the cat or the dog does not take this or that medicine, it will be his fault if his animal does not recover, if his condition worsens, even s 'he dies. Obviously, no alternative is offered. The fact that antibiotics are first of all very expensive, that they can then cause resistance and that they are finally, and this is the main thing, not free of side effects obviously does not interest anyone. I know many firms that operate this way, whether through my own experience as an assistant or through the stories told to me by young colleagues. The first reflex when an animal arrives is the duo

antibiotic/cortisone. Most of the time, the owner also comes home with his antibiotic tablets. The effects of its intake mainly affect the intestinal flora. Diarrhea which occurs at the end of the treatment is not, however, most often related to the taking of medication, but considered as a new clinical picture to be treated with even more chemistry. Rare are the veterinarians to whom it comes to mind, after an antibiotic treatment (which was justified or not), to restore the intestinal flora by the contribution of bacteria.

Medicines, especially antibiotics, are, as I said, very expensive. The costs of the veterinarian, for the purchase of the number of tablets corresponding to the need of a dog of about thirty kilos for a treatment of ten days, exceed sixty euros. The tablets in question are then resold almost twice as much. Representatives of the pharmaceutical industry are flaunting the dizzying increase in the need for antibiotics and other drugs, and the volume of sales and profit that go with it – including for veterinarians, of course. Does this mean that we veterinarians should be proud to prescribe more and more drugs, thereby increasing not only our own turnover, but also that of the pharmaceutical industry?
Or is the increase in needs really real?

I doubt that the real needs have increased. What is definitely on the rise is the frequency of prescriptions from veterinarians, whose first instinct is often to stick antibiotics on each animal, whether it needs them or not. Critics will object to me that in the past owners gave less importance to the medical follow-up of their animals, which explains the increase in the consumption of drugs. There is no doubt that consultations are more

common today. However, we cannot say that, say in the last ten years, the behavior of owners has changed considerably in terms of the care given to their animals. The use and misuse of drugs him, yes.

It must be said that the market for veterinary drugs is flourishing. Many technologies developed for human health are recycled in the animal world. Animal medicine is a less risky activity than human health, because research and development costs are lower and the probability of giving rise to a new treatment is higher.

According to the SIMV (Veterinary Medicines and Reagents Industry Union), the veterinary medicine market in France in 2013 represented 813 million euros in turnover.

This market benefits from the dynamism of the companion animal segment due to the growing investment of the French in the well-being of their domestic companions (39% market share) but also that of production animals which represents more than half market (56%) and that of horses (5%).

France is the second largest animal health market in the world with 7.5 million dogs and 11 million cats, in addition to 44 million production animals (cattle, pigs, sheep, goats), 250 million poultry (chickens, turkeys, guinea fowl), 29 million ducks, 10 million rabbits, 800,000 horses.

Breakdown of the market by main therapeutic classes in 2013:

- ÿ Vaccines 22%,
- ÿ Pesticides 17%,
- ÿ Insecticides 9,9 %,

ÿ Antibiotics 19%,
ÿ Topical products 8.8%.

These figures are the “positive” result of determined sales strategies. While surely desirable in other branches of the economy, this outcome becomes frightening when it comes to our pets.

For my part, I give almost no antibiotic tablets in my office. In the rare cases where it is really necessary to give an antibiotic, I administer it by injection. It works perfectly. But the pharmaceutical industry, and of course the veterinarians, make appreciable profits with the tablets which alone constitute a lucrative business. A sick animal that leaves with ten expensive pills as treatment earns more than one that receives an “unfortunate” injection.

Moreover, the mentality of animal owners has been so closely modeled on that of human patients that the veterinarian is also required to “prescribe something”. Inviting to leave the practice without a medicine bag borders, in the eyes of many owners, on negligence. The banalities also need their drug treatment. Sending home committing simply to wait and see how the situation develops is not well seen. We demand pills, because pills work for everything...

Here is a typical cry for help from an Internet forum dedicated to animals:

My dog (Eurasier; 10 years old) has been suffering from colitis (inflammation of the large intestine) for two years. He took too many antibiotics (due to a parasitic attack). I'm in

already at my seventh vet. I have already tested several diet foods. I am currently attending the veterinary health center in B. My dog has been taking cortisone for three weeks. His condition did not change.
For a day or two, his poop is normal, then it shows signs of blood again or comes with drops of blood. I'm a little desperate, I don't know what to do.

One can read countless calls for help of this kind on the web, similar cases keep piling up in my office. The question that bothers me more and more consists in knowing why my sisters and brothers are still so few, unfortunately, to worry like me about why certain specific clinical pictures are more and more frequent. The fact that we veterinarians can ourselves be the cause of many preventable ills is not even considered.

The argument that our dogs and cats are living longer and longer because of “good veterinary care” doesn't hold water.
As with humans, the increase in life expectancy is due primarily to much better hygienic conditions and general care, and only secondarily to new medical advances. Apart from a few rare specialized fields such as traumatology, no decisive progress has been made in the treatment of chronic diseases in human medicine (cancer, rheumatism, osteoarthritis… to name but a few) since the 1960s. -ten. The same is true in veterinary medicine. New so-called innovative drugs are coming

certainly constantly on the market, but in reality they do not differ, or very little, from those which already exist.

Our dogs and cats may be living longer on average today (according to the latest statistics), but it's no less true that they get sick earlier and stay sick longer. When I was a child, my family always had dogs and cats and I don't remember any of these animals suffering from a chronic disease. The dogs, in particular, have all passed the age of fifteen, and that without being ill. As for the cats (one of my uncles had a big farm), either they died prematurely, or they were victims of one of the epidemics which affected them regularly, or they lived very old. Metabolic diseases like diabetes, Cushing's syndrome or chronic joint ailments barely existed .

The scale taken over the last twenty years by chronic clinical pictures is frightening. Critics will argue again that in the past we did not even have the tests to diagnose certain diseases. That's obviously true, but we didn't need it either. It was only with the enormous increase in cases that testing procedures became more refined, with the need for ever more complex examination methods now existing. We have come to the point where diseases are purely and simply invented in order to be able to sell the corresponding drugs. I recently had in my hands a journal intended for veterinarians

Austrians *(Vet-Journal,* edition 05/2010). When I read the baptismal name of a new disease, I couldn't believe my eyes. "Cognitive dysfunction", since that is what it is, simply refers to the fact that our pets are aging and therefore no longer should be expected of them when they are old. , the physical and mental performances of which they were capable young or in the prime of life. Aging has already become, in our dogs and cats too, a disease to be taken seriously. And the solution exists

now as a "fountain of youth for aging dogs".

This disease with serious consequences was discovered, it is surprising, by one of the most famous companies in the animal feed industry: Nestlé Purina! The firm claims to have discovered, through tests, that it is beneficial to add medium-chain triglycerides to the food of aging dogs, which are supposed to stop the aging process at work in their brains. Dogs should be able to benefit from this supplement from the age of seven.
Naturally, the group already offers the *ad hoc food.* Its name: Anti Age.

Here is an excerpt from the famous article I came across:

> *Nestlé Purina has been able to demonstrate, in large cognitive tests (i.e. orientation tests, curiosity tests, etc.), that considerable improvements are noted in the following areas in dogs taking MCTs { medium-chain fatty acids): 1 ÿ "memory and ability to interact; 2 ÿ adaptability, empowerment and experience of new instructions; 3 ÿ attention span and alertness.*
>
> *Although these results need to be confirmed by new studies, it is quite possible that a food enriched with MCTs also has positive effects on dogs with mild to moderate cognitive dysfunction. Anti-Age has been shown to be an effective means of delaying the onset of cognitive consequences linked to the aging process and influencing*

> *the quality of life as a whole, not only of the dog but also of its owner. Pro Plan Senior Original 7+ with Anti Aging is the nutritional solution for all aging dogs cared for within your veterinary practice.*

Are there really colleagues who believe it? Obviously, yes. Otherwise this article and the product that goes with it would not exist. The notion of anti-aging speaks to many people. Why not line your pockets by offering *ad hoc* products for pets? What particularly touches me is the way in which veterinarians allow themselves to be taken in by such nonsense and turn into henchmen of these large groups. Profit obviously dictates its law. We veterinarians, however, are on the front line and it is up to us not to add grist to the mill of these aberrations and to enlighten owners to make them adult consumers regarding the future of their pets.

As in human medicine, where tests and pharmacological studies are carried out by the pharmaceutical companies themselves and can generally be (and are) manipulated according to need, it is advisable to take with a grain of salt the tests carried out by the manufacturers of croquettes who intend to sell their products we Nestlé Purina, which marketed the product called Anti-Aging, found in supposedly large studies that "the lifespan of dogs could be extended by two years through dietary interventions. , such as calorie reduction". Ah good ! Do we now need tests to "scientifically" confirm crystal clear facts? Common sense is no longer, obviously, unless that of the consumers

responsible and critically veterinarians are denied.

Are we really so easy to manipulate – the article quoted above was indeed published in a serious veterinary journal – that we take such nonsense at face value?
Apparently yes, because no product without corresponding need. Apart from the fact that Nestlé Purina's much-vaunted food is not biologically appropriate, we veterinarians must therefore be persuaded of the need to give old dogs even more additives, in the form of occurrence of medium chain triglycerides whose only function is to upgrade a product of no interest. Manufacturers are, it seems, aware of the poor quality of their merchandise, otherwise they wouldn't be spending their time creating new supplements to spice it up.

But let's get back to chronic illnesses which, regrettably, are often “home-made”. Side effects and long-term sequelae are knowingly accepted for the benefit of short-term improvement in symptoms. The antibiotic/cortisone duo often takes effect very quickly, no doubt about it. With cortisone in particular, we often observe an effect the next day, in case of itching for example. However, if taken for a long time, the effect diminishes before eventually disappearing.

As for the side effects of antibiotics, they are not, except the destruction of the natural intestinal flora, as serious as those caused by other drugs, even if allergies can occur. Urticaria (the hairs then stand up like a brush on different areas of the body) is the most common allergic reaction.
Asthma, painful head swelling or severe shock

anaphylaxis are rarer but can also occur. It should also be remembered that in the event of uncontrolled consumption of antibiotics, resistance is created, the pathogenic bacteria which have become accustomed to them no longer being eliminated. These resistances are constantly progressing, so that new antibiotics are constantly needed to obtain the desired effect. This problem is also "home-made" because only a continuous and totally excessive use of antibiotics can cause such a rapid increase in resistance.

Now let's come to cortisone: everyone has heard of it speak, nobody really wants it and yet, in veterinary practices, it is one of the favorite and most often prescribed drugs. As we have seen above, it is generally used in first intention in any sick animal in association with an antibiotic. In recent times, cortisone is readily replaced by analgesics (called nonsteroidal anti-inflammatory drugs, NSAIDs) which are also not without side effects. Cortisone rightly has the reputation of being the cause of many undesirable effects. Cortisone preparations with the active substance dexamethasone, prednisolone and hydrocortisone are medicines which also act very quickly and are well tolerated, provided however that they are used wisely and especially in the short term.

Cortisol is a very important hormone for our body that it manufactures itself in the adrenal glands. Without cortisol we could not live, our dogs and our cats either. It acts on the metabolism of carbohydrates, fats and proteins and the body needs it to overcome stress. The functioning of the adrenal glands is controlled by the pituitary, itself located in the

brain. When there is too little cortisol in the blood, the pituitary secretes substances that cause the adrenals to increase their production. If, conversely, there is too much cortisol in the blood, the adrenals are instructed to decrease or even suspend the production of endogenous cortisol. If this interaction is disturbed, for example because of a tumor of the adrenal glands themselves resulting in increased production of cortisol, a tumor of the pituitary gland or an exaggerated intake from the outside (by the veterinarian) of cortisone, new diseases are emerging.

Interactions between cortisol levels and adrenal activity and of the pituitary gland are subtle and can be easily disturbed, for example by the arrival of cortisone in the blood. Unfortunately, cortisone is rarely used cautiously. It is rather resorted to from the outset, in first intention and as a remedy of choice for any itching, for the slightest modification of the skin and for the slightest disorder of the general state. Veterinarians seem to share this conviction: it takes a quick effect, if success is not immediate, the owner of the animal may well be unhappy.

All the allergic animals that I have seen in recent years and who often have a long ordeal behind them have received cortisone treatment over a long period. Given what is taught to students of veterinary medicine, this should come as no surprise. In the books intended for these students, the treatments applicable to allergies are essentially limited to the administration of antibiotics and cortisone.

One accommodates, it seems, deliberately and without the least criticism of the undesirable effects. These are manifested

especially if the drug is taken for some time (several weeks). Cortisone has an immunosuppressive action, which means that infections can be favored. Once the dog has gained weight, is losing its hair or has muscle wasting, when it does not leave its water bowl all day and drinks a lot, when it drags around panting, then it is too late ! At this stage, only lifelong medications can still have an effect and provide the animal with a more or less bearable existence, which will however no longer have much to do with the quality of life of a dog or a cat. in good health.

The dachshund dog Isis was one of these sad cases. Sterilized from good hour, she was placed on permanent treatment with prednisolone because of persistent itching and rashes. Isis looked like a well-fed, fat pink piglet. Her belly almost touched the ground, you could count her sparse hair and her skin was thin as a sheet of cigarette paper. She was drinking like a camel and just hanging around listlessly. The statement of his background was lapidary: "Syndrome de Cushing iatrogène", that is to say in French: hormonal disorder triggered by medical malpractice. The cause of this disease is a dysfunction of the pituitary gland, its consequence excessive production of ACTH (stress hormone).

Cushing's syndrome can of course also be due to a disorder, a tumor within the body itself. We could *a posteriori* come to know how many cases are of iatrogenic origin, but it is not in the interest of the responsible veterinarian, of course, to admit his error. It is therefore rare for proven owners to learn the truth. They are reduced to offering a more or less acceptable existence to their treasure deprived of a normal quality of life. The fact is that any artificially induced disease is one disease too many.

Treatments based on too high a dose of cortisone and of too long duration can also make our dogs and our cats diabetic (see on this subject Chapter 7).

The prescription of analgesics takes place in the same climate of trust. It is legitimate, after surgery or in case of acute pain, to give the appropriate medication. But these days, non-steroidal anti-inflammatory drugs (NSAIDs) are used for almost any general condition. The pharmaceutical industry shows great inventiveness in formulating advice for use for the slightest futility: passivity, fatigue, lack of cleanliness or even mood swings in cats, for example. A common painkiller is therefore recommended as first-line treatment and as the preferred remedy.
The fact that these anti-inflammatories, used over long periods, can cause serious side effects (kidney, gastrointestinal tract, etc.) is of course not mentioned in the practice. This is how the cohort of drug-consuming animals and paying owners is renewed.

And while the animal is in our office, why not take the opportunity to give it many other so-called essential medicines, such as dewormers or flea repellents, etc. for regular use, which brings us to the subject following: the so-called prophylactic cures. According to the recommendations of the pharmaceutical industry, the deworming treatment of puppies (with Welpan 7 from the firm Bayer, for example) should begin at the age of two weeks and be renewed every fortnight. Young dogs (from around three months) should be dewormed every two to three months and adult dogs aged one year and over three to four times a year (with Flubenol from the firm Janssen, for example). The recommendations are the same for kittens, except that the

cats accustomed to going out should be wormed even more often. If we respect the instructions in the instructions, an adult dog will have undergone at the age of fifteen some sixty-six deworming treatments! The quantities of chemicals ingested by our dogs and cats throughout their lives are unimaginable.

What exactly is the chemical deworming treatment of an animal? Since conventional dewormers poison and eliminate worms from the intestine, the poison (a neurotoxin) is logically also absorbed by the dog or cat and greatly overtaxes the detoxification organs of the kidneys and the liver. This prolonged overload does not only damage the organs, it can also make the bed of allergy. I have come across many such cases in my practice, in which allergies had developed under the hammer blows of dewormers.

In my practice, owners of allergic pets are brought to heel and taught how to keep their dog or cat away from all poison – whatever form it takes. Prolonged deworming cures indeed lead to a disturbance, if not the destruction, of the natural intestinal flora, with the consequence of chronic diarrhoea . This massive disruption of its flora makes the intestine more susceptible to new infestations by worms. When the intestinal flora is healthy, there is less risk of worms becoming a serious problem for the affected animal. In other words, a healthy intestinal flora can overcome a minor infestation and prevent worms from multiplying unchecked. In the wild, wolves and wild cats instinctively seek out certain tubers, herbs and plant extracts that loosen worms and evacuate them naturally. It is obviously

impossible for our pets. These mixtures of plants are however available for sale and it is possible to mix them with the

food or simply putting them in the animal's mouth; unlike pills, the operation is easier than you might think. These cures carried out regularly, two to three times a year, are a natural and very effective alternative to chemical deworming treatments.

If you naturally feed your dog or cat by allowing him to eat raw meat regularly, there are in any case far fewer problems with worms than when the animal receives purely industrial food. The bacteria present in the intestinal flora of an animal fed with raw meat are indeed much more aggressive than those of a dog or a cat fed with ready-made food. Worms are less likely to become sedentary. Owners who want to make sure their pet is free of worms can get an added guarantee by having simple, inexpensive stool tests done on a regular basis. Doing so would save a lot of chemicals and a lot of overwork on our animals and their organs. That this is in the projects of many veterinarians, I allow myself to doubt it, the sale of dewormers bringing in a lot. A deworming tablet for a dog weighing around ten kilos is sold for 6.50 euros. At the rate of some fifty to sixty deworming treatments during the life of the dog, this amounts to 357.50 euros, the price to pay for tablets which greatly overwork his organism. If the dog weighs more than ten small kilos, the bill is accordingly.

In order to sell a maximum of easy-to-administer dewormers to dogs and cats alike, the pharmaceutical industry came up with the idea of a hit formula: the flavored dewormer tablet! Thanks to him, the often painful struggle when it comes to giving this pest control to your dog or cat is over. And when something is easy to execute, we

use it more often...

The same irresponsibility unfortunately applies in the field of preventive anti-flea and anti-tick treatments. Let's look at what one of these common preparations contains: Frontline Spot-on.
This product is applied to the skin and has a systemic mode of action, which means that it penetrates the body. The active ingredient is fipronil 268.0 mg; as for the excipients, they are the artificial antioxidants E320 (BHA) and E321 (BHT) chemically related to the phenol of disinfectants and wood protection products. In animal and test-tube tests, high-dose E320 has been shown to alter genetic makeup, especially in cells of the gastrointestinal tract. Long-term animal studies have shown that the excipients E320 and E321 were carcinogenic at high doses and caused stomach and liver cancer in mice.

These two preservatives are also used in Royal Canin foods. As for fipronil, it is a neurotoxin which acts on the central nervous system of insects and causes their death. It goes without saying that these poisons reach not only the blood of the insects to be fought, but also that of the animals to be treated.

Regarding the adverse effects, here are the details provided by the leaflet (10) :

> *Among the extremely rarely suspected side effects: transient skin reactions at the application site (skin discoloration, local alopecia, pruritus, erythema) as well as general pruritus or alopecia have been reported. Exceptionally: hyper salivation, reversible neurological symptoms (hyperesthesia, depression, nervous symptoms),*

vomiting or respiratory symptoms have been observed after use.

As a special precautionary measure for the disposal of unused product, it is always specified about fipronil that it can harm organisms living in water, which is why it is advisable to avoid contaminating yards and rooms. of water with the product or its empty containers.

This precision is not enough for you yet? Never mind, let's continue:

This product may cause irritation to mucous membranes and eyes. Therefore avoid contact of the product with the mouth and eyes. It is recommended that recently treated animals not be allowed to sleep with owners, especially children. Do not smoke, drink or eat during application.

Who would think of inflicting that on himself and his animal?

It goes without saying that a flea infestation must be fought, but there are excellent biological products for this. Only an extreme situation, when the infestation becomes invasive and the owner is overwhelmed, justifies using products of this type, which are so toxic and aggressive. In normal cases, sprays based on essential oils are more than enough. What applies to worms also applies here: in a healthily fed animal, a flea infestation does not take on the same magnitude as in an industrially fed dog or cat. In naturally fed animals, the immune system, which has suffered less, defends itself better, in particular

in case of allergy to flea bites.

Frontline(11) & Cie are however selling like hot cakes in most veterinary surgeries. It is without warning and without proposing possible alternatives that these highly toxic and expensive products are sold to the customer, in this case to the innocent owner. Potential side effects are not discussed either in veterinary practices or in pharmacies, which are not authorized to dispense these preparations without a prescription. However, side effects occur much more often than one would imagine. A final clarification: in treatment and prevention, it is recommended to apply the preparation every month. The amount of poison that the animals must assimilate without protesting is correspondingly high.

Impossible to assess the repercussions of continued use on the health of the animals entrusted to us. In most cases, a single application at the height of tick season will be inconsequential. But when poisons are continuously administered, they build up over time and lead to long-term damage without establishing cause and effect.

Cases of sudden onset epilepsy, permanent unexplained itching, etc. attributable to the use of such spot-on products are not uncommon. A number have been presented to me in my office. I particularly have in mind the medical journey of a cat named Jimmy, because he came from one of the litters of my own cat. About two years old, Jimmy was constantly infested with fleas, which was why he was regularly treated with spot-on preparations. He suddenly began to have epileptic fits: he began by drooling enormously, then he began to tremble and finally his whole body was seized with convulsions. Jimmy was taken to the vet

who gave him an antiepileptic. The cat and its owner got along rather well, except that the latter did not intend to give his animal lifelong medication that made him indifferent and apathetic.
Mr. B., Jimmy's owner, wanted to know more and went to consult a neurologist. Neurologists love this kind of patients who allow the master or mistress to be billed for expensive MRIs and scanners. Suspected of having a tumour, Jimmy was anesthetized to perform an MRI. Obviously, no tumor was detected in this
cat only two years old and no cause was determined for the seizures. The only solution recommended after the costly useless diagnosis: continue to give antiepileptic tablets. Mr. B. was no more advanced. It was only a few weeks later that I learned this story, when Mr. B., discouraged, called me to tell me everything.

When I questioned him about the medications, the deworming treatments and the insecticides administered before the attacks, he admitted having used a Spot-on preparation on his cat every month. He continued besides until this day to regularly administer an ampoule to Jimmy. We immediately dropped everything: the deworming cures, the Spot-ons. As for antiepileptic drugs, their dose was gradually reduced before complete cessation. Jimmy hasn't had a seizure since.

By suppressing poisons of this kind, it is possible to remedy many evils in a very short time. Only, no one thinks about it!
It often happens that epilepsy, a disease more and more often diagnosed in dogs and cats, is the consequence of insane chemical blows. As soon as we realize what quantities of neurotoxins our pets are exposed to by the monthly administration of Spot-on and other deworming treatments

permanent, the fact that ailments such as allergies, epilepsy, brain damage, etc. are constantly increasing can no longer surprise us unduly.

Here is the story of one concerned owner:

I have a small bichon frize male who has developed strong allergies to Frontline (and also to ***Exspot(12)).*** *During the first year when we were using Frontline, I noticed that on the day of application and a day or two after, my dog was very tired and his eyes were a little glassy (like a fever). We consistently observed similar symptoms after the annual booster shot the second year I switched to Exspot. The symptoms were the same. The third year, I bought sometimes Frontline, sometimes Exspot.*

About two weeks after applying the third or fourth dose of the season, my little treasure completely fell over (like with epilepsy). The "nice" vet we were seeing at the time diagnosed an enlarged heart, so my dog was on heart medication and draining tablets for a year. The seizures not only persisted, but became more frequent and stronger (I continued to use the tick repellents). The new vet I went to found nothing wrong with the heart and referred us to a specialist. This one examined the heart with color Doppler and all that follows. Result: flawless heart. Before going to this specialist, I started keeping a diary in an effort to discover the triggers of the seizures and draw parallels

between dates.

It was then that I realized that all the crises without exception were synchronous with the anti-tick (they always started one or two weeks later). My dog had another attack the day after the next dose. I took him to our vet to whom I shared my suspicions. He gave her an antidote shot. I never used these products again and my dog has never had a seizure since then (two and a half years). To me, that's proof that neurotoxins have nothing to do with a dog's skin.

The Ways of the Cross of many dogs, cats and masters are frightening and would fill several books. Sometimes, these ordeals last the entire life of the animal, which never recovers its health and remains a chronically ill person with an artificial existence, to the delight of veterinarians and the pharmaceutical industry.

Finally, I would like to address the issue of so-called restorative injections which many veterinarians have run out of ideas, most often just to do something anyway. The owner asks for nothing better, as long as he is dangled with the advantages of this injection. It's easy to make a dog or cat owner who is worried about their treasure believe just about anything. Behind these restorative injections most often hide unnecessary vitamin preparations, cortisone or other substances that are supposed to stimulate the immune system. It goes without saying that the use of a drug is justified in the presence of the corresponding disease. But, in its absence or when a vitamin deficiency is proven, which is very rare, these drugs are either ineffective or harmful. Synthetic vitamins can indeed influence

very negatively metabolic processes. As their name suggests, they are made synthetically, that is to say artificially, and what is more with the help of genetically modified bacteria.
They can in no way replace natural vitamins.

Administering vitamins without asking questions is far from being as innocuous as is commonly assumed. The popular opinion that "nothing bad can happen with vitamins, if they don't work, at least they don't hurt either" can cause more damage than you think.

In recent times, attention has been focused on certain particular clinical pictures. It seems that today almost one in four cats over the age of thirteen suffers from hyperthyroidism. This disease is therefore increasingly diagnosed in older cats. The thyroid and its hormones control several metabolic processes. In case of hyper-function, most often due to a tumor, this metabolic process is accelerated. The affected cat is restless, loses weight as its appetite increases, sometimes has diarrhea or vomits, and exhibits various skin changes.

Due to the supposedly increased frequency of this disease, extensive research has been conducted. Cats that eat canned food have been found to be three times more likely to develop hyperthyroidism. Fluctuating iodine concentrations, bisphenol A (BPA) present in the coating of cans (which is important from a health point of view because, although the final polymers are to a large extent themselves biologically inert, they can possible to release the raw material BPA which itself can be harmful to health), the phytoestrogens present in soybeans, as well as other organic impurities have been considered as agents

triggers *(Vet Journal* 05/2010, Dr. Florian Zeugswetter).

Bisphenol A is an estrogen-like substance (which mimics the action of natural estrogens) used by the chemical industry to produce special plastic materials called polycarbonates or epoxy resins. Polycarbonate is a versatile and easy to work with type of plastic that is present in many everyday products. Bisphenol A is found in plastic food packaging, but also in baby bottles and plastic dishes, for example. It is also found in cans and more specifically in the epoxy resin interior coating.

Bisphenol A is very controversial these days. According to the BUND (Bund für Umwelt und Naturschutz Deuschland, the Federal Association for the Environment and Nature Conservation), bisphenol A can harm the brain development of the fetus, infant and toddler. In adults, the most recent studies provide evidence of a link between high levels of bisphenol A in the blood and diabetes or certain liver damage and heart disease.
Last year, the chemical industry produced some four hundred and ten thousand tonnes of bisphenol A. This represents a market worth around three billion euros. The harmful effects associated with bisphenols are now known. The only point of contention concerns the dose from which health is threatened and the new limit values to be set. We bet that the bases of these values will be determined according to criteria that will have little to do with human and veterinary health...

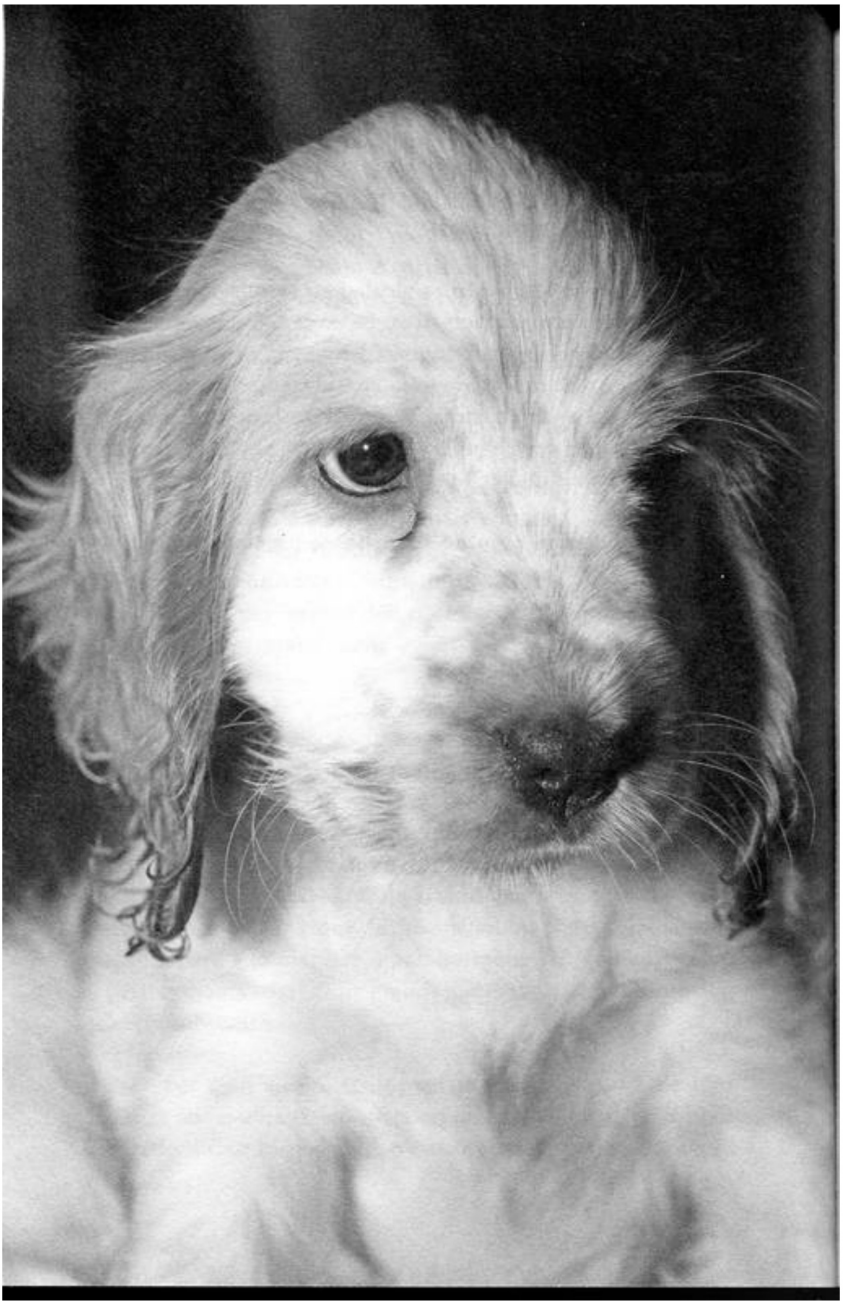
And besides, even if the limit values are lowered, nothing guarantees the absence of harm. In the end, we still know very little about the cumulative effect of all these toxic substances. To what extent can they accumulate in the body in the event of constant absorption, however minimal? We do not know yet. But we

We already know that bisphenol A can act in the human body like a hormone and that infants and small children run great risks in the event of absorption of this substance.

The fact that it has been estimated that one in four cats over the age of thirteen suffer from a thyroid condition should give us pause. Bisphenol A is certainly not the only cause; let's not forget other factors like soy supplements containing estrogen and chemicals found in insecticides, for example.

The cat's organism in particular is extremely sensitive to disturbing influences. It is easy to understand, given the background described above, that a permanent overload, for years, of substances containing hormones can have a devastating effect on the health of our furry friends. The surge in cases of hyperthyroidism should prompt us to ask ourselves some questions.

My conclusion from experience: less is often more!



CHAPTER 7

SABA, THE FOUR-LEGGED WALKING BARREL

The questionable nature of restrictive diets and foods against diabetes

SABA, A CROSS BITCH, IS SIX YEARS OLD when I see her for the first time in my practice. This is a poignant example of a case of obesity. She weighs nearly twenty-eight kilos for a cocker size! With its relatively short legs and small pointed head, it looks more like a barrel than a dog.
She walks like a duck and every step makes her suffer. Like a working vacuum cleaner, Santa swallows everything within reach. In addition to her croquettes, she is entitled to sweets, real calorie bombs with a lot of sugar as a flavoring agent. Within her large family, everyone keeps an eye on her and ensures that she does not die of hunger.

Besides, Saba doesn't exercise enough. She grew up in a gardenless apartment in a big city and she can only go out on a leash. She is therefore never free, which contributes to her excessive weight gain. The D. family comes to see me with Saba, because t

diet, supposedly essential, administered by the veterinarian in addition to expensive croquettes, diet too, does not pass. This diet pill is called Slentrol. It is supposed to reinforce the feeling of natural satiety, on the one hand, and to reduce the absorption of fats contained in food, on the other hand.

Since her first year, Saba has regularly taken anti-heat medication. At the age of five, she became diabetic and has needed insulin every day since. The D. family is already frankly ashamed to go out with Saba on the street. She is regularly approached in a derogatory way by passers-by because of the overweight of the dog. As longer walks are no longer possible anyway, Saba's physical exertion is limited to a few minutes out in the dark of evening and at dawn.
She spends the rest of her days snoring on the sofa or in her basket: an unenviable life for a dog who is still only six years old.

Saba has secondary diabetes. It is so called because it is only a symptom of another basic condition. The main cause for her is certainly overweight, but regular anti-heat injections that contain progesterone can also cause this type of diabetes. The D. family isn't doing too badly with Saba's diabetes and giving her her daily shot isn't a problem. But all the members of the family agree on the fact that she vegetates more than she leads a pleasant dog's life. They of course tried to make her lose weight, including under veterinary supervision using expensive diet kibbles. The result has always been modest because, with the croquettes in question, Saba has an even greater appetite than with her “normal” industrial food. This is not surprising since if you look critically at one of the diet foods from a major manufacturer, you immediately notice that lignocellulose appears at the to

“ ***Lignocellulose*** *(from the Latin* lignum, *wood, tree) constitutes the cell wall of plants converted into wood, it serves as the structural framework in which lignin is stored during the process of conversion into wood (lignification).* (Source from wikipedia.org) Lignocellulose is nothing but a concentrate of raw wood fibers. Thanks to the enormous swelling capacity of its fibers, the volume of food increases, leading to faster mechanical satiety. If some crude fiber content has its place in the food, the fact that it occupies the first place is suspect, because the wood does not satiate and the dog develops food cravings.

In second place, we find the famous **poultry flour** mentioned several times. Poultry meals differ from poultry meat meals, which do contain meat, by the fact that they consist of all that remains of the poultry. These poultry meals can for example be exclusively composed of feathers, which explains the very poor quality of the proteins. However, an overweight dog needs high quality protein sources to prevent a deficiency from generating other diseases. By giving a dog these dangerous "light" products, we only cause secondary pathologies in the form of liver and kidney diseases.

What else is in industrial weight loss kibbles?
Wheat **gluten** feed comes next. It is an industrial by-product of wheat starch and gluten. Gluten makes up about eighty percent of the total protein in wheat. Wheat bran, on the other hand, is produced from the husk of the grain and is used, as part of a complete human diet (muesli, crispbread, etc.), as a fiber provider.

Wheat gluten is used everywhere in pig farming. This product is a perfect addition to the rations of meat or breeding pigs and piglets. It allows you to feed a ration with a high energy concentration. The product tastes good and lowers the cost of fodder (Source: newsletter from the **site(13)** www.raiffeisen.com)

Wheat gluten is therefore a supplier of vegetable proteins. However, vegetable proteins are only very poorly assimilated by the dog and even less by the cat. Feeding them this type of food turns them into herbivores. Secondary pathologies are squarely programmed in advance. Tapioca, whose name sounds pleasant to the ear at first glance and which appears in the next position among the ingredients, is nothing other than a starch with a neutral taste (produced from the cassava root) which , not only acts as a carbohydrate supplier, but also prevents the kibble from decomposing after cooling due to its transformation into a sticky mass during production. No animal protein in sight so far. Animal proteins only appear at the very end of the list of declared ingredients, without specifying their exact nature. Since the ingredients should be listed in order of quantitative importance, this gives an idea of the proportion of quality animal protein present in these kibbles! Foods of the “light” type are therefore essentially made up of worthless “filling material”.

Despite the diet croquettes , Saba is getting bigger and bigger. To try to calm her cravings, she raids: not a trash can, not a heap of rubbish escapes her expeditions and she grabs everything she can reach from the table. To do this, she develops an unsuspected agility: it is not rare, in the D. family, that the roast or the cake

of Sunday purely and simply disappears, even when it was "in a safe place" at the top of the buffet. And on the occasion of increasingly rare walks, she finds a way to dig up everything that is even a little edible. The usual veterinarian constantly decreases the quantities of food, which does not give much. Saba certainly loses a few hundred grams at times, but it never lasts long. Because, due to her lack of nutrients, her cravings persist and she is adept at calming them. When only a poor "stopgap" is available, the feeling of hunger remains, whatever the quantity given, and is reinforced as long as the organism is deprived of the essential substances. This is the reason why many dogs who eat "light" are constantly hungry. In addition, the high crude fiber content of this difficult to digest food overwork the organs responsible for metabolism and can cause persistent functional disorders over time. It is the whole digestion that is complicated by all the components, all of which are difficult to digest. Manifestations such as vomiting, diarrhoea, constipation, etc. ensue and the immune system experiences a general weakening. This is also the reason why many dogs develop serious allergies, resulting in pronounced skin and/or intestinal symptoms, after a “light” diet.

This is the case of Saba. Her coat is getting duller and duller and she constantly scratches. Cortisone shots are given to her every month against the itching with the effect of temporarily relieving her.

When his diabetes was diagnosed, his blood sugar reached 310 mg/dl (the norm in dogs is around 100 mg/dl). Diabetes is linked to the lack of insulin; the breakdown of blood sugar is no longer done sufficiently or at all, hence hyperglycemia. If this is not countered by insulin, serious organ damage ensues, including blindness in the worst case. Following the diagnosis, Saba

switches to anti-diabetes kibbles which differ little from anti-obesity kibbles, except that carrageenan **(E407)** is used as a filling agent suitable for diabetics. In the food industry, this substance is used to thicken jams, ice cream, fresh cream, etc. In diet and "light" products, it gives more volume without increasing the nutritional value in the least. Produced from red algae, it is suspected of being responsible for ulcers in the gastrointestinal tract and of favoring the appearance of intestinal and breast cancers. Indigestible and of low molecular weight, it is retained by the cells of the intestinal wall and does not break down further. The consequence can be cell death which itself leads to the destruction of the intestinal wall and the appearance of cancerous cells. American researcher Joanne Tobacman has established a causal relationship between increased consumption of this thickener and higher rates of breast cancer and ulcers of the gastrointestinal tract. The quantity consumed is obviously decisive: it is continuous and non-isolated consumption, that is to say the cumulative effect, which can trigger these diseases. What a thickener like this does in dog food escapes me...

Diabetes has become the second most common hormonal disorder in dogs. Eighty percent of sick animals are unsterilized bitches. During one of the phases of their cycle (metestrus), the hormone called progesterone is secreted. Progesterone stimulates the formation of insulin-antagonist growth hormones. In retrospect, it is of course no longer possible to determine whether in Saba's case the diabetes was triggered by the injections of hormones containing progesterone and used to repel the heat, by the monthly injections of cortisone, by the obesity or by the three factors combined. However, it is possible to ensure

introducing some changes, that the amount of insulin administered is lowered.

What is a priority in Saba's case is to initiate lasting weight loss and avoid hormone and cortisone shots. For a restrictive diet to be healthy, weight loss should not exceed one to two percent of total weight per month, the main thing being to provide good quality protein. Bright days are ahead for Saba. Seventy-five percent of its needs will now be covered by fresh meat, cartilage and bones, to which will be added vegetables and aromatic herbs. Carbohydrates will be kept to a minimum and there will be little fat, in the form of quality oils. The objective is first to lighten Saba by around four kilos in one year.

The D. family respects all the instructions and Saba changes visibly. The bones occupy her for hours, gnawing them gives her a lot of pleasure: she simply enjoys being a dog. Although accustomed since puppyhood to eating only cans and kibble, she switches easily and without problems to a biologically appropriate raw food (BARF). The cravings soon become more and more rare and Saba is so busy with her bones that she forgets to rummage in the trash.

The result after one year is a weight loss of just four and a half kilos. Saba now weighs “only” twenty-two and a half kilos. Walks interest her again and passers-by no longer laugh at her. She is certainly still too big, but today, two years later, she weighs only twenty-one kilos and it is possible to maintain her at this weight thanks to the change in food observed. Since the D. family is large, the father has made a plan to provide

enough exercise at Senta. Every day it's a new family member's turn to spend at least an hour with the dog in nature, jogging or just walking briskly. It works wonderfully.

In addition, it was possible to reduce insulin intake by half; as for the cortisone injections, they turned out to be superfluous in a few weeks, the itching having completely disappeared.
The idea of having the dog sterilized to avoid hormone injections and escape the natural rise in progesterone was of course topical. But since the D. family refused to have their dog operated on and since, on my side, I could not promise that the operation would control her diabetes, we let Senta have her heat naturally twice a year. It works without a hitch: the D. family injects him with his already drastically reduced insulin dose every day and Senta enjoys his life as a dog.

Diabetes is almost always irreversible in dogs, ie incurable. It is certainly possible to reduce the symptoms to a minimum and to reduce the intake of insulin. But, it takes time. If we realize that approximately forty percent of our dogs and cats are overweight and that approximately ten percent are frankly obese, a gigantic market is opening up, not only for "light" food , but also for slimming pills like Slentrol mentioned above. According to its manufacturer, Pfizer, Slentrol was tested on six hundred dogs which lost between eighteen and twenty percent of their weight in the space of six months. Studies conducted by Pfizer and other manufacturers themselves must, as we now know, be taken with extreme caution, as they are rarely objective. Indeed, test subjects who do not react in the desired way are removed from the studies and, to put it bluntly, falsifications and

lies persist until the desired success is achieved. As always, economic interests are at the forefront. Because who would pay for expensive studies for nothing to come out of them, even negative results? Apart from these suspicious successes, the side effects, such as those of Slentrol for example, can be considerable. The leaflet advises, in the event of the onset of liver disease, to immediately withdraw the drug and, in the event of repeated vomiting or diarrhea, to reduce the dose by twenty-five percent or to completely discontinue the treatment. Slentrol (active substance: dirlotapide) is a preparation which was originally designed for overweight people and tested on them. But, due to severe side effects, such as headaches, severe bloating, colic, diarrhea and flatulence, this drug has not been granted approval for human use. Interesting, isn't it?

Dirlotapide is a substance which, by its constitution, inhibits the dissolution of fats and their resorption by the intestinal wall. On the other hand, appetite is believed to be reduced by the secretion in the central nervous system of certain satiety hormones. Under no circumstances should cats take this fat blocker, as the change in metabolism can trigger serious liver disease in them.

Here is an excerpt from the veterinary magazine *Editorial Kleintiermedizin* (editions 1 and 2/2007) which deals with the introduction of Slentrol in practices:

> *Dear sisters, dear colleagues,*
>
> *Overweight dogs (and their owners) is a widespread ailment in our prosperous society. Experts estimate that forty percent are overweight and ten*

hundred clinically obese. If we assume that a weight loss treatment extends over several months, the potential of fat blockers is easy to realize. Can we afford to reject a product like dirlotapide (Slentrol) as decadent?

Or isn't it smarter to take this new chance to anchor the weight loss industry in our offices, away from the suspicious restrictive diets available in retail? The skill is on our side.

Slentrol is available on prescription; the information on the product specifies that its use must be made on veterinary indication and under clinical supervision. The goal is to remove the risks associated with being overweight and to recover physical condition and health. What more ? The launch in Europe will take a few more months. It's not so bad because; in the meantime, you will have the opportunity to discreetly dispose of your stocks of weight-loss foods. Because what owner will still want to buy tasteless, expensive and often disdained diet kibbles for his dog, when it will once again be possible to give him everything he likes and, on top of that, he will lose weight thanks to a few drops of additive (dirlotapide)?

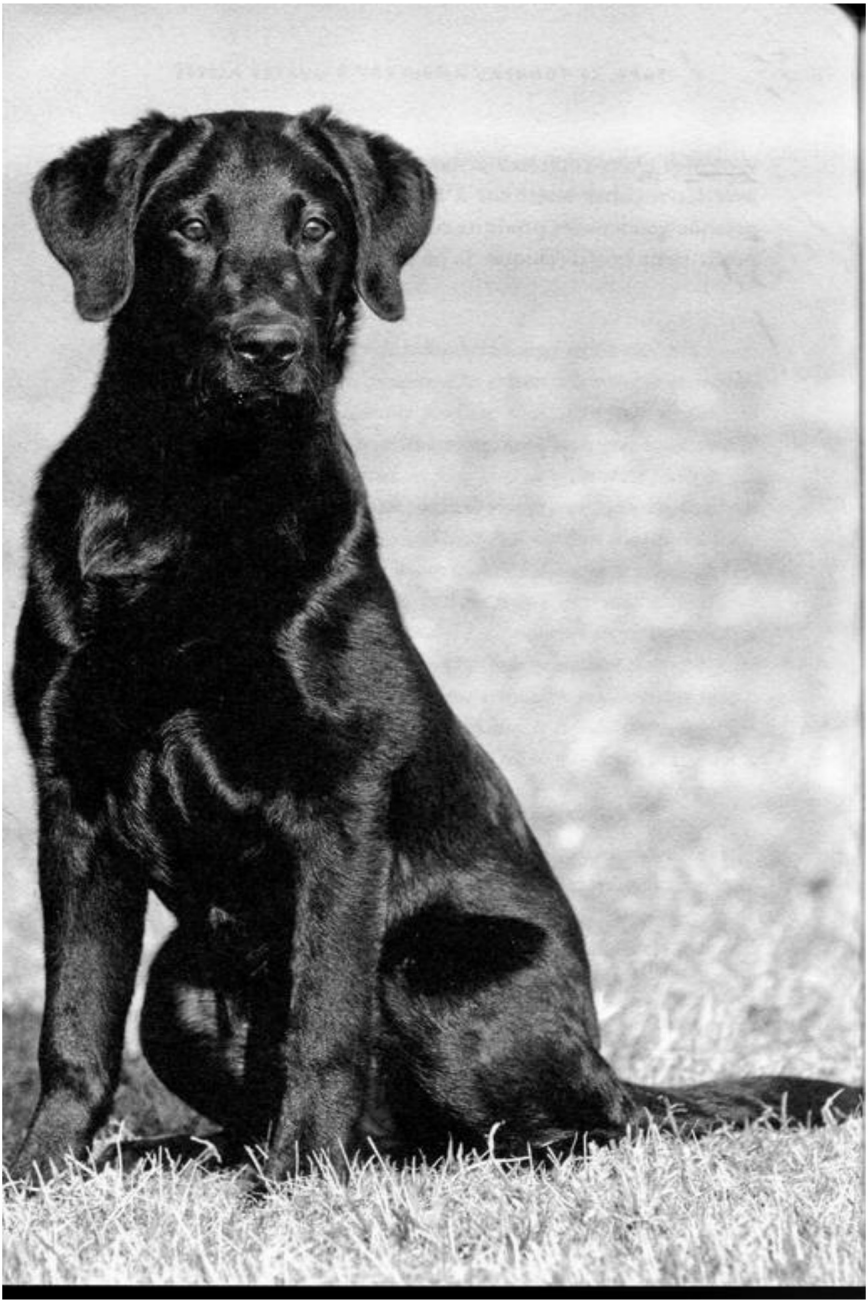
Sincerely,

Dr Dieter Mueller

(veterinarian, pet specialist)

My dear colleagues therefore know very well what to expect with restrictive diets with questionable interest. But almost all of them sell the corresponding products. Once again, profit takes the place

of ethics, I can only reaffirm that.



CHAPTER 8

THE SAD STORY OF MAX, FIVE YEAR LABRADOR

When dogs and cats are victims of the misuse of high-tech medicine

Labrador Max is transported in the middle of the night by his mistress, Madame R., to the veterinary clinic. He is weak, apathetic and Mrs. R. does not want to wait until the next morning because Max is really sick. At the clinic, the young on-call assistant begins by taking an x-ray of the abdomen, then an ultrasound and a blood test. Max is supported in steady state and put on a drip. Madame R. returns home exhausted, but with the reassuring feeling that her dog will be well taken care of. Early the next morning, she is already back with Max. There, the head of clinic present repeats an ultrasound. He analyzes the blood results again and suspects a tumor of the spleen, most likely ruptured.

Until then, nothing to say. Thanks to the infusion, Max is a little better and his mistress is allowed to take him home. “We'll wait,” said the head of clinic, “you'll call us back if Max is worse. But, on the way back, Max collapses again. He can no longer

move or even just lift your head.

Ms. R. decides to join my office immediately. Max's pulse alone already indicates that the dog is about to die of a hemorrhage. Despite the emergency operation, which involved removing the spleen and the ruptured tumor, Max died two hours later from having lost too much blood. The blood literally overflowed from the opening of the abdomen and it oozed nonstop from the torn tumor. If Max had been operated on a few hours earlier, he could have been saved, especially since a dog can very well live for a few years without a spleen.

I knew the head of the clinic personally. When, failing to understand, I asked him insistently why he had not operated on the dog immediately - his diagnosis, tumor of the ruptured spleen, being correct -, he answered me that, from a statistical point of view , such a percentage of ruptured spleen tumors stopped bleeding on their own and operated dogs didn't survive very long either. And when I wanted to know why he had sent home a dog in such a state, I only got an evasive, unsatisfactory answer.

Of course, the clinic fees were not reimbursed to Max's family. No fault had been committed, since Max's condition had improved when he left the firm. Such was in any case the argument of the head of clinic.

When mistakes of this kind are made by young assistants, it may still be understandable – even if they are serious – and intensive training allows them to improve. But coming from a director who has been practicing in his own clinic for thirty years, it is a clear proof of incapacity. Young assistants are frequently hesitant when it comes to making a diagnosis. It's human

and understandable, especially since they are often given (too) many responsibilities, in clinics in particular. Sometimes they have some difficulty in mastering certain simple clinical examination protocols that require tact, psychology and a little common sense. For fear of missing something, all possible medical equipment is used to be able to rely on the exploitation of the results, whether or not they match the clinical examination.

I never really knew why Max had been sent home, the practice in clinics being to treat as best they could, rather too much than not enough. The animal is considered less and less as a sick person, but more as a client who must provide for them by using them to finance expensive devices, disproportionate facilities and a team. It is clear then that veterinary interests take second place to financial constraints. From the moment an animal is treated as a customer, everything happens as in the liberal economy: you can or you have to sell as much as possible, regardless of the real need of the customer. Medical morality and ethics take a complete back seat. In medicine, however, and this is as true in veterinary medicine as in human medicine, it is a question of beings who suffer and who do not come to the doctor for fun, but because they want to be cured.
If they come across one of those growing numbers of physicians who see their patients only as paying customers, to whom they have to stick as many tests, treatments and medications as possible, they is finished with professional ethics. Forget morality, only profit counts. It's easy to fool a pet owner who wants nothing but the best for them. The bigger and more expensive a veterinary practice is, the more profitable it must be, which complicates things a lot and encourages playing with the fear and concern of the owner. Expensive devices like nuclear magnetic resonance and computed tomographs

whose price often exceeds 150,000 euros must obviously be amortized, so there is no question of paying attention to stubborn or recalcitrant owners.

A case that took place in Bavaria illustrates this situation very well. Mr. P. wanted in this case to have a magnetic resonance tomography performed on his dog on the advice of his veterinarian. At the end of the diagnosis, however, Mr. P. refused, because of the already very advanced age of the dog, the recommended operation and heard himself reply: "We have no idea of refusing an operation like that. when you know how much the diagnostic technique used costs! How is the professional supposed to cover his costs? Mr. P. left the clinic relieved of 600 euros, swearing never to set foot there again. His dog survived without surgery for a few more months and, at fourteen, he was freed from his suffering.

It will be objected that there must be veterinarians capable of carrying out examinations of this kind. I don't disagree in the least. But when examinations and operations are carried out only to make profit and not out of medical necessity, and this to the detriment of the animal and its master, it is morally indefensible. It's rare for an owner to be able to separate what really needs to be done from what only needs to be done to get the most out of devices and increase revenue. The “operators” as I like to call them therefore have free rein. However, it is possible to replace examinations that require a complicated medical technique with clinical evaluations that are both simple and precise. It's also not uncommon for pet owners to blame only themselves. This is the case when, far from being satisfied with simple methods, they downright demand unnecessary examinations.

Nothing surprising in this since, by their own experience of the

human medicine, they are accustomed to being examined up and down and across by all kinds of equipment before a definitive diagnosis is made. To believe that human and veterinary medicine are worthless without their technological gadgets. Fingering, common sense and a clinically trained eye are no longer popular, unfortunately. If a computer tomography proves really necessary for an animal, which is rare, it is possible to ask the owner concerned to go to an independent university a little further away to have the examination carried out there. University clinics must of course also work according to certain economic criteria, but they are logically less affected by the race for personal profit than private practices and clinics.

I can't resist the urge to give you on this subject the testimony of a Labrador owner about her experience with a neurologist veterinarian:

> *Our stay at P.'s veterinary clinic in Bavaria: It all started on that sad Monday morning, when we were sent to P. with our two-year-old male Labrador, Quipu, to consult a neurologist there following a suspected heart attack. spinal cord or herniated disc. At the time of the breakfast taken together, we realized that something was not as usual: the dog was missing! No matter how many times we called him, our Quipu did not join the table, even though due to his appetite he is always the first. We went to look and when we found him in the hallway we found that he could barely walk. We of course immediately decided to go to our veterinarian.*
>
> *As if by chance, this (hopefully unique) event happened*

produced just as our regular vet was enjoying his well-deserved week off. After examining Quipu, a visibly embarrassed temporary worker gave him a cortisone shot and referred us to a specialist, self-styled animal neurologist, consultant at a veterinary clinic dedicated to neurology.

We arrived there with our dog who still could barely walk. "Ah, yes, you're the emergency," we were told, immediately handing out a string of questionnaires to fill out. My husband looked around and listened to what an assistant said on the phone: no, it was no longer possible to come for a scan today, three emergencies having arrived in the meantime. The poster stuck to the wall behind his back, which indicated that a scanner cost 600 euros, made my husband quite nervous. After scrupulously filling out all the questionnaires, we were asked to enter the consulting room where, for the first time in our lives, we met an animal neurologist. What show ! Sure, geniuses sometimes have a reputation for not necessarily giving much importance to their looks, but his gorgeous hair was beyond anything we could imagine and only confirmed the cliché of the mad scientist. We expected to find all kinds of high-tech instruments, but the cabinet was equipped like a normal office. The neurologist wanted to have a precise idea of the course of the last hours. We tried to stick to what seemed to us the essential, that is to say the symptoms

presented by our dog. But this was far from meeting the expectations of our interlocutor. The details of the change of pace were the subject of a discussion not only meticulous, but colorful. In other words, this tall, sheep-haired veterinarian began to imitate our dog's supposed gait. Many details such as the direction taken by the hind legs, the curvature of the back and the expression of the dog were the subject of the greatest attention and eloquent conclusions were drawn.

In the meantime, with his cortisone injection and after having deposited bulky stools on arriving in front of the neurology office, our dog had recovered slightly. During his examination, he emitted a resounding fart which aroused the greatest consideration on the part of the neurologist and obviously made it possible to draw new conclusions useful for the diagnosis. For his part, my husband, noticing that our dog had got back on his feet and thus seeing the threat of a 600 euro bill receding, also began to recover slowly. A few farts later and after a state-of-the-art neurological hammer exam, during which the neurologist literally got down to our dog's level (he was lying below him), we took a blood test. in Quipu which was analyzed in the clinic's laboratory. After a shot of B vitamins, our dog was kept under observation while we were asked to wait at the nearby cafe. My husband, who was still digesting the day's events, didn't exchange a single word with me during our late breakfast.

Half an hour later, we returned to the clinic and it was with joy that, as soon as we entered, we heard our dog bark. When the door opened, our Quipu came to meet us, wagging his tail; he didn't look the least bit disturbed anymore. We left the clinic – incidentally without a clear diagnosis – claiming to be back soon, relieved of 400 euros and enriched with an experience that we are not about to forget.

When our usual vet was back; we once again had our dog examined. After listening to how everything had gone, she concluded that he had simply eaten too much, which had given him painful stomach pains preventing him from getting up. The excessive stools and disconcerting farts were also signs of an acute digestive problem. The visit to the neurologist and the examinations carried out there were therefore superfluous and we could have attended, by going to the theater, an equally skilful and fascinating pantomime number for much less.

Of course – and thank God –, the profession of veterinarian is a liberal profession and it is normal for each doctor to be able to acquire the equipment and instruments that he himself considers necessary. On the other hand, I am resolutely critical of the procedures of some of my colleagues when dealing with dogs, cats and their owners, many of whom do not know how to defend themselves and are delivered unarmed to veterinarians. They are the real victims of a medicine henceforth subordinated to economic interests. There is, however, a positive aspect: the number of disbelieving pet owners has increased noticeably in recent times, although it is not

still represents only a tiny proportion of them.

In the case of the death of the male Labrador Max, several factors played a role. First of all, of course, we have the lack of assurance of the veterinary student who took charge of Max first and who was required to carry out all the examinations that could shed light, the material constraints and their cost falling on the owner. If Max had been operated on immediately, superfluous examinations would not have bothered anyone. But in a case like this that ended in the death of the animal, the process takes on even more importance.

Specialization is gaining ground. Nothing wrong there in itself because a veterinarian can thus acquire in certain areas more advanced training than that provided for "general veterinarians". But if that consists of cutting animals into separate parts, considering them in isolation and then repairing them, then the organism as a whole no longer exists and we are on the wrong track.

As in human medicine, we often treat only symptoms. The ophthalmologist deals only with the eyes without taking into consideration the causes which are perhaps to be sought outside the eye; the dermatologist rushes to the skin changes and ignores the links of cause and effect; the surgeon always operates, even if other less invasive methods exist, etc.
Unfortunately, this trend has also made its appearance in veterinary medicine. The practitioners who consider the animal as a whole and examine it accordingly are less and less numerous and narrow-minded specialists forget how a general clinical examination is carried out. They no longer need it since the animals are sent to them by colleagues who have already made a pre-selection. Allow me to doubt that this is the right path. By criticizing the symptomatology

pure, common in today's medicine, of course I question a good part of official medicine. I cannot say more without going beyond the scope of this book and I will soon deal with this question separately.

Few colleagues admit their mistakes. In thirty years of practice, examples accumulate and here is to close this chapter one of them, characteristic.

Male shepherd Mac presents to the vet Mr. Mac limps with his left front paw. An x-ray is taken. She reveals nothing out of the ordinary and the dog is sent home with painkillers. A week later, Mac is still limping. A new X-ray is performed, by another veterinarian this time. Diagnosis: clear fracture of the leg.
The second veterinarian wants to check with the first if by chance he has not taken the wrong leg, which, in the heat of the moment, can happen. The first vet's escape is to claim that the owner introduced him to another dog the week before and that this is his x-ray. Mac's owner, who has no other dog, feels duped and courteously calls the veterinarian M. to ask him for at least a partial refund, which he is refused. No errors will be recognized. Mac's master has no chance of being compensated and his confidence in the profession has taken a serious hit.

CHAPTER 9

WHY SO MUCH DISTRUST TOWARDS RAW FOOD BIOLOGICALLY APPROPRIATE

How vets are overpricing ready-to-eat food and promoting its sale

IN THIS CHAPTER, MY INTENTION is not, dear readers and readers, to bother you with tables of nutritional values or specific needs such as found in books exclusively devoted to food; their place is not here. Rather, I intend to show you how simple it is to feed a dog or cat in a species-appropriate way.

Let's start with the **cat.**

Originally from the desert, cats are not used to drinking a lot. It is first by feeding that they absorb the quantity of liquid that they need. In the wild, they meet their needs by hunting, killing and eating mice (six to twelve per day), snakes and other small animals. As cute and cuddly as they are, let's not forget that our dear living room felines are originally nothing

other than predators.

These facts, no one disputes them. Not even the so-called nutrition experts on the payroll of companies that make it their mission to design appropriate cat and dog food. The fact remains that, in practice, these realities are ignored.
In fact, this is what you can read on the homepage of one of the largest manufacturers, which, among other things, markets diet food distributed exclusively to veterinarians: "As the cat is a carnivore, we mainly use high quality raw materials of animal origin. By looking closely at the different ingredients, we realize that this is false. We can then read that “these raw materials are combined with carbohydrates (rice and corn) and selected vegetable fibers (beet pulp and corn fibers). »

Here then ! And why do ? If the cat is a pure carnivore, what good are the carbohydrates contained in this food and, what is more, in quantities that far exceed those of proteins? Going over all the ingredients declared for each of the many foods sold by veterinarians would take us too far, especially as I have already partly done so in the previous chapters.

The fact is that everything always happens according to the same wrong pattern. The general guidelines as to how to feed a pure carnivore (like the cat which needs 93% protein) or an omnivore (like the dog) are correct. But most of the time, the composition of the products produced by the industry deviates considerably, if not completely, from these guidelines. To be honest, I find it hard to understand why so few people notice this, whether vets or knowledgeable owners.

It is however more than obvious that the organic needs of a dog

or a cat have nothing to do with what the industry offers. This should be obvious to us, especially to us veterinarians!

Here is an excerpt from a website extolling the qualities of a special food distributed exclusively by veterinarians: " *The more man and dog live together closely, the greater the risk of nutritional errors, the danger for the dog being to be humanized .* So far so good, but here's what follows: " *Despite eating high quality, whole foods, food-related problems frequently occur: dull coat, dry skin, itchy or sore limbs.* »

Do you understand something about it? No such problem is encountered with biologically appropriate raw food (BARF). Any owner who feeds their dog or cat fresh meat knows this. Why, when it comes to industrially produced food, do we warn on the home page of possible problems? The producer's confidence in his own feed seems limited. Is this clarification intended to encourage the buyer to try different kinds? If intolerances, or even illnesses, occur, should we conclude that it was not the right one?
A well-known veterinarian in Austria, specializing in nutrition and dietetics and working for one of the largest producers, draws attention in her numerous "specialist articles", which by the way look more like advertising press releases, to the following fact: " *Vomiting, diarrhoea, intestinal sluggishness and constipation are among the most common ailments presented by dogs and cats brought in for consultation* ". To each of these clinical pictures described as common and almost normal corresponds of course to a specific diet food. Or how the disease becomes, so to speak, a normal state that lasts...

Cats are strict carnivores (remember, they need 93% protein) and therefore only need small amounts of fibre. In nature, the cat absorbs them by eating the hair or the skin of its prey. Cats living naturally in this way do not experience the kidney and bladder ailments, allergies and diarrhea suffered by our living room felines fed, not to say abused, with ready-made food. Nowadays, our cats mostly live in apartments without going out and eat almost only industrial foods. However, no ready-made food, however "rich" it may be, can replace fresh meat. We certainly cannot serve mice to a pure house cat; however, through raw food, we can not only provide him with enough quality protein, nutrients and natural vitamins, but also satisfy his instincts, especially for games. If it receives a whole chicken wing, for example, the domestic cat can also exercise its instinct for play and predation. When we observe with what pleasure a living room feline tastes this choice morsel, a cat condemned to cans and croquettes can only make us sad.

I hear from here the first fears: will this fresh meat be enough for my cat? Won't it lack taurine, this or that?
Won't he show deficiency symptoms? Certainly not!
But it takes more than one sentence to answer these questions.

If you give him different varieties of meat, i.e. muscle, organ meats including hearts and livers, bones and cartilage and you occasionally sprinkle the meat, to make fiber, with a little bran wheat or aromatic herbs, not to mention a few drops of a quality oil, then your cat has everything it needs.
The operation is complicated in the presence of a cat accustomed to an industrially produced food for which, not knowing what it is, the

fresh meat is not edible. A cat of this type is so fixed in its choices by artificial flavors that it no longer touches any food that does not contain them.

It is then necessary to try to offer this animal known for its stubbornness something that it can still eat raw. You can start with steamed meat with a little oil to which you mix the ready-made food that the cat knows, before slipping in raw meat little by little, very gradually until come to the raw.

This can be quite a difficult undertaking, as cats are, as you surely know from experience, extraordinarily stubborn. They are capable of refusing for days and without flinching a food which they do not know and of trying to force their masters, by their uninterrupted mewings, to break their hearts, to be conciliatory and to give them what they desire. . And more often than not, the cat wins.

This is why it is best to give fresh meat (chicken hearts and gizzards, beef cut into small pieces) to kittens from the nursing phase, when they start to eat on their own. When the animals are used to it early, there are no more problems later.

Cats are also very fond of raw eggs; cottage cheese, kephir and cottage cheese (lactose-free dairy products) can complete the menu.

In cats, taurine (an essential amino acid) must be provided by food. Your cat supports itself by eating heart (from poultry, pork and beef) and seafood. Resorting to taurine tablets should only take place in case of categorical refusal

of the above foods from your cat. But since most cats are very heart-loving, you can give up taurine tablets without regret.

In the wild, cats eat the bones of their prey, which is important for calcium phosphate balance. They can completely be replaced by poultry legs, wings and necks. If your cat is loath to eat bones, eggshell powder may do the trick. Fish, preferably from the sea for its high content of omega-3 fatty acids, is also a valuable food for cats.

Many books dealing with biologically appropriate raw food have appeared lately which will provide you with plenty of information. Their presentation is not always simple. It is necessary to count, to weigh, which complicates things exaggeratedly. In fact, your cat does not need a set amount of vitamins and minerals on a daily basis. Considering the few simple pieces of information presented above, you can't go wrong. The cat (like the dog) is perfectly capable of storing vitamins and minerals for a certain time, which will be released as needed. It is therefore not essential that the intake of essential substances take place every day in precisely fixed quantities; in nature, these contributions are not made to the nearest gram either.

This also applies to the **dog.**

He also does not need daily quantities of nutrients, vitamins, etc. determined to the hair. He rather needs (like the cat and the man too, by the way) varied foods, which not only meet the needs of his organism, but flatter his taste. You don't eat the same spaghetti with tomato sauce, the same fillet of beef or the same cake every day either.

crème.

A general rule applies to the adult dog: the amount of food served daily should be about two to three percent of its weight. Example: if your dog weighs twenty kilos and is neither too fat nor too thin, his daily ration should weigh five hundred grams on average. It will consist of 70% raw meat or meaty bone and 30% vegetables, fruits and herbs. If the dog is old or overweight, the proportion of meat should be reduced in favor of fleshy bones.

Like the cat, the dog is not a cereal eater either.
They are not suitable for dogs that are already too big, not very active or growing. Cereals are made up of carbohydrates that provide energy quickly. But if this energy is not immediately used by the body, it is stored in the body for periods of scarcity in the form of fat cells. However, it is safe to give cereal from time to time to a healthy, lean and active dog.

The best for a dog is to vary the menus. Choose meat and meaty bones from any type of meat animal you can find, whether at the supermarket, discount store, butcher or, if you're lucky enough, at a farmer near you. One of the daily meals will consist only of meat, fish and meaty bones, the second of steamed or mashed vegetables (the dog's stomach cannot break down raw vegetables), herbs and /or fruit (ripe and super-ripe). These vegetables and fruits must always be supplemented with quality oil (fish oil, rapeseed oil, linseed oil, safflower oil, etc.) or cottage cheese so that the fat-soluble vitamins are better absorbed. You can find the list of

fruits, vegetables and herbs that work best on the many Internet forums dedicated to BARF and in many books.
You will also find the list of all the varieties of fruits and vegetables that are not suitable for dogs or only conditionally, such as onion, garlic, green pepper, etc.

Like when you cook for yourself, there are no limits to your imagination when you prepare food for your dog.
Many owners whose dogs have switched to the BARF diet have enthusiastically confirmed to me that it is a real pleasure to feed a dog this way. The dog is really a dog: he is occupied for hours with his bone or can delight in his raw belly which he chews as long as he wants. Behavioral problems are automatically less. Nothing to do with idle dogs who swallow their box or their kibble in thirty seconds before looking for “victims” to tease in order to spend their excess energy (see Chapter 5).

Some of you, dear readers, will rightly say to me: “And then what else? I work, I have children, I already have thousands of things to do, I still won't be preparing special dishes for my dog or my cat! Despite all the love I have for him, there is no question. »

I understand that very well, believe me. I am a mother myself and as this book has taught you, I work (with good grace) at my practice, I give dietary advice and, as quality herbs and oils are not always easy to find outside large cities, I also produce the corresponding supplements myself. So I don't have a minute to myself and yet my dog Pauline and my five cats are largely fed according to the stated criteria.

previously. And when I can't, it happens to me too, I resort to the second choice solution that follows.

For many cat and dog owners, it is impossible, for professional reasons, to go shopping every day and get fresh meat. Freezing and thawing also takes a bit of work, and some vegetarians adamantly refuse to touch raw meat. In this case, a compromise must and can of course be found. Your dog or cat should eat fresh meat at least two or three times a week. On other days, you can give him ready-made food with a high meat content and no additives.

My intention is not to condemn all ready-to-use foods wholesale because, in the event of absolute impossibility of giving raw meat, there are a few isolated brands which it is possible to use without a bad conscience. You won't find these products at the veterinarian, at the supermarket, at the pet store, or at any of the animal supermarket chains that have been expanding in recent years. But there are a few innovative companies, most often small ones, which carefully select their raw materials and deliver to their customers directly, without intermediarie

These small businesses are forced to distinguish themselves by the quality of their products, otherwise they would not survive in such a competitive environment. Let's think a little bit: all the big brands inevitably produce mass goods and invest so much in advertising and marketing that there is not much left for the purchase of quality raw materials. In practice and for example, breeders receive free kibble in fifty-kilo bags, which allows them to condition purchasers of puppies to use

of a specific food. Who gives a lot of gifts gets the most buyers, of course. Veterinarians profit from their side of profit margins which increase according to sales, thus flirting with immorality. If so many gifts are made and so much money can be spent on advertising, it is logically on the product itself that the savings are made. Small innovative companies have nothing to offer. They invest in the quality of their products. They also do not have access to category 3 raw materials (see below). They must therefore turn to suppliers who can deliver relatively small quantities. However, it turns out that low quantity goes hand in hand with quality.

There are now on the market boxes for dogs and cats whose ingredients are of very good quality. It's really meat that is worked, then gently heated in the boxes. Obviously, the result is a preserve that should not be the exclusive food of a dog or a cat. I will be careful not to advertise - otherwise I would not be better than the barker veterinarians in the industry, even if the level is not comparable -, but I can give you the beginning of a revelation: you will not find boxes top quality practically only on the Internet or directly from the manufacturer.

Remember **that no large group** offers quality products. These large groups only work with so-called category 3 raw materials. They are cheap and almost unlimitedly available. Companies do not deny the use of these raw materials. The law allows them to do so. We just hope that the client will be stupid enough not to get it.

What are Category 3 raw materials according to Regulation (EC) No 1774/2002? The following lines are not for

sensitive souls, might as well warn you.

On the one hand, these are butcher's cuts which, although suitable for consumption, are not intended, for commercial reasons, for human consumption. This includes bones, rind, fat and other parts of the same nature. Also included in this category are cuts of meat discarded because they are unfit for consumption, although they do not yet show signs of communicable disease.
Finally, this same category includes skins, hooves, horns, claws, hair, furs, pig bristles, feathers and eggshells. For the information to be complete: the products falling into category 1 are the corpses of laboratory animals and animals suspected of suffering from contagious diseases. Category 2 products include, for example, manure, stomach and intestinal contents, and slaughterhouse waste containing drug residues.

It is from category 3 foodstuffs that the large groups produce the food intended for our domestic animals. The law states that “the materials will be collected or incinerated without delay” or used “as raw material in a licensed pet food production plant”. If this information concerning the classification and its consequences on the content of so-called Premium foods does not make you drop the box or the bag of croquettes from your hands, then you might as well close this book right away, nothing can shock you anymore.

The collection and recovery of these materials is even remunerated, so everything is very inexpensive for animal feed manufacturers. There is nothing inherently wrong with slaughterhouse waste being used in animal feed. But when it's big industry that

takes care of it, this waste is already beginning to deteriorate during transport, which is very long most of the time, in uncooled containers. These "raw materials" must obviously be heated to very high temperatures, ground and sterilized in the processing plants, in order to find at least a use as "animal meal" in animal feed. These animal meals are then bought by large companies which transform them into “extrudates” or canned food. All commercially available kibbles – with the exception of cold-pressed kibbles (see below) – are “extrudates”.

The manufacturing process of the extrudates is vaguely reminiscent, in its procedure and technique, of that of the meat grinder. The mixture used consists of the "animal meal" presented above and cereals. We take advantage of their starch to transform the mixture into a sticky mass. This mass and various additives are pressed under the supply of humidity through the matrix (pierced steel disc) of a machine called an extruder, under high pressure (up to 60 bars) and temperature (up to 180 degrees). . It is the products resulting from this high-intensity treatment over a short period that are called extrudates. During their manufacture and due to the heat treatment and high pressure, almost all nutrients, proteins, enzymes and vitamins still present in the "raw material" are destroyed. To compensate for these losses, synthetic additives are added after the fact. Finally, to give them more flavor, the kibbles thus obtained are sprayed with animal fats and oils, so that the sense of smell of the dog or cat is flattered by this poor potpourri. It should be noted in passing that extrudates swell enormously in the stomach and are the main cause of the dreaded and often fatal stomach twist in dogs.

For all these reasons, extruded kibble should be strictly rejected, including for occasional use. The only acceptable compromise is cold-pressed kibble. Good cold-pressed croquettes are certainly heated (up to around 80°C) too, but much less than extruded croquettes. The original proteins, enzymes and vitamins are therefore largely preserved and do not need to be supplemented afterwards. Due to this particularly delicate manufacturing process, these cold-pressed croquettes can only be kept for about six months in a cool place. They do not contain the chemical preservatives that have nothing to do with healthy food and natural oils such as safflower oil are used as antioxidants.

Good cold-pressed croquettes can be recognized by the absence of additives among the declared ingredients. Some manufacturers of cold kibble have adapted to the requirements of large industry and meet, thanks to the addition of synthetic additives, the legal criteria for complete dog food. In essence, cold-pressed croquettes fluctuate in their natural composition and therefore do not meet the legal requirements of complete food which must contain very precise quantities of minerals and vitamins. Europe loves standards, think instead of the apples, bananas and cucumbers you buy for yourself at the supermarket. It's a shame, because as a result these kibbles, whose quality is really good, do less well than extruded kibbles during consumer tests whose criteria are not necessarily relevant.

The information communicated to the consumer is therefore completely false. It is indeed the croquettes which contain the most additives in always equal quantities which occupy the first places of these tests. The winner is therefore the one who produces a stable chemical cocktail. Quality raw materials or scrap, it doesn't matter for these tests.

Note in passing that the cats do not yet have their cold-pressed croquettes.

Cooked meat is no more suitable than canned food because cooking destroys proteins, nutrients and vitamins. The result is once again a can, admittedly free of chemicals, but a can is definitely still a can. I have sufficiently explained in the preceding chapters the ways in which an exclusively industrial food causes multiple diseases in our domestic animals which were largely unknown before the era of ready-to-eat foods. I now intend to show in the following paragraphs with which arguments sewn of white wire and pulled by the hair the veterinarians, the industry of animal feed and other institutions in privileged relation with the manufacturers (breeders, associations or shelters, for example) position themselves against a diet based on raw meat.

Argument #1: “Raw meat can worm dogs and cats. " It's wrong !

It is mainly mice that give worms to cats; as for dogs, they most often catch it in contact with their congeners. The meat usually sold, whether in the supermarket or at the organic farmer's, is subject to meticulous inspection and is therefore a strictly controlled food. A

infestation by tapeworm larvae or others cannot escape it.
In addition, the intestine of an animal fed with raw meat is much more resistant in the event of infestation by worms, because its intestinal flora is much more aggressive and allows less fixation and multiplication of worms. This is not the case in animals receiving exclusively ready-made food.

Argument #2: “Raw meat contains bacteria, including salmonella (poultry) that can make cats and dogs sick. " It's wrong !

Since their intestines are very short and therefore food passes through quickly, cats and dogs are insensitive to salmonella and other bacteria. Once again, a pet fed with raw meat has an aggressive natural intestinal flora that does not give bacteria a chance. On the other hand, prey caught in the wild is not free of bacteria, quite the contrary. Compared to mice and other prey, our supermarket meat is practically sterile. The theoretical low risk of Salmonella infection exists naturally, however "it is only in the event of a resistance weakening event (infestation by parasites, viral infections, surgical interventions, for example) that the virulent strains can multiply, their pathogenic properties manifesting themselves after an incubation period of two to seven days” (quote from *Krankheiten der Katze/ Cat Diseases* by Vera Schmidt and M. Ch. Horzinek).

The risk is therefore negligible. In thirty years of practice, I have never yet encountered a cat in which I even suspected a salmonella infection. I have been feeding my cats myself for years raw poultry, beef and pork; none of them has ever developed any illness related to salmonella.

Anyone who is still hesitating can of course put the meat in the freezer first. Salmonella will be reliably eliminated. Similarly, the risk of infection with the dangerous Aujeszky virus affecting pork is extremely low since it is no longer

present with us for thirty years. I also don't know of any case of a cat having contracted Aujeszky's disease after eating pork. Anyone who is wary of supermarket meat from potentially non-European sources will simply turn to the meat offered by organic farmers.

In order to confuse pet owners and entice them towards ready-to-eat foods, the slightest possible danger is made a point of view. The possibility of our animals becoming seriously ill has much more to do with junk food than with virtual worms or bacteria that are supposed to colonize meat. The operation is simply to create panic, in order to make ready-made food appear more appealing and healthier than natural raw food. If I have cared for a number of animals that have fallen ill because of industrial food, I have, conversely, never met an animal that had suffered harm in connection with its consumption of raw meat.

Argument n° 3: "There is everything you need in food loans. " It's wrong !

In ready-made food, there is above all everything that a dog or a cat does not need! To mask the taste of the mediocre raw materials used (category 3 waste from meat processing), foods are often artificial flavorings. Indeed, our dogs and our cats not being stupid, they would not even touch and would eat even less this waste without taste correction. It is therefore necessary to deceive their taste buds.

Among these aromas, there is in the first place sugar, hidden under the qualifier of caramel. However, sugar is not suitable for dogs and cats in any way and, in the event of a permanent intake, it can trigger diabetes, give rise to joint problems and attack the enamel.

teeth. Apart from the fact that today there is a special food for each size, each age, each breed, each sex, for castrated/sterilized animals or not, which in itself already provides information on the insufficiency of each of them, one must also count, among the various ingredients, with additives in the form of vitamins, minerals and synthetic amino acids. They are necessary because industrial processing destroys or denatures all ingredients.
However, the added synthetic vitamins are not produced from cereals, fruits or vegetables, but are made artificially. It's simpler and cheaper. These synthetic vitamins in no way correspond to their natural counterpart.
They lack the consubstantial materials with which they form a body in natural products such as fruits and vegetables, for example. On the other hand, synthetic manufacturing allows only a limited choice of vitamins, when the palette of carotenoids (precursors of vitamin A), for example, has more than two hundred and seventy estimated variants. Artificial production can only make one type, beta-carotene. The consequence is a long-term restriction of the natural multiplicity of vitamins, the repercussions of which are felt at the level of animal metabolism.

The fact is that synthetic vitamins, in the absence of consubstantial materials, are subject to forced resorption from the intestine. They escape his control, arrive unimpeded in the blood and thereby even in the internal organs. The metabolism, in particular of the liver and the kidneys, is one day or another exceeded and manifests it by immunological reactions and, if necessary, by tumoral degeneration.

An excess on one side leads to deficiency symptoms on the other. Vitamin balance is a very complex system that will take time to explain.
Research on games

of interaction and reciprocity at work between the different vitamins, the different minerals and the different trace elements is still only in its infancy. Let the nutritionists explain to us how they are able to develop a balanced diet, when so many points remain to be clarified. In reality, almost any ready-to-eat food is an artificially engineered chemical magma in the laboratory. It is clear that I do not put in the same basket as the "big", the rare manufacturers who are an exception by not using synthetic vitamins, by resolutely renouncing aromas, by applying respectful manufacturing processes natural structures of raw materials, etc.

The concept of a synthetic vitamin doesn't mean much to most veterinarians. It has been a long time since these vitamins (between 150,000 and 200,000 tonnes per year) have not been produced from natural raw materials. It is so much cheaper for industry to make vitamins from genetically engineered bacteria or plants. This is how a plant that did not look like much, the ladies' cress, acquired an unexpected fame. It turned out that a genetic manipulation of this plant makes it possible to produce vitamin E in large quantities very quickly. That only one variant of vitamin E is produced in the laboratory does not seem to bother anyone. As for the classic artificial production of vitamin B from "biological matter" (corpses), it is not frankly appetizing, even if the corpses have recently been replaced by genetically manipulated bacteria.

In all the common foods available from the veterinarian, only synthetic vitamins are used. Ask your veterinarian one day if he knows the difference between natural vitamins and synthetics and what about the manufacture of these vitamins

synthetics and their lack of diversity. He probably won't know what to say to you.

Kibble manufacturers are very creative and adapt to market requirements. Slogans such as "without artificial preservatives" or "with natural antioxidants" are flourishing lately. In the first case, we are careful not to specify that the fats used, which are generally purchased externally, are indeed subject to chemical preservation, the reporting obligation disappearing because of this external purchase. In the second case, that of “natural antioxidants”, it is, for example, vitamin E which is put forward. However, vitamin E is produced artificially (see above), so it is anything but natural. This is how the consumer is systematically taken for a fool.

We have also got into the habit of putting the concept of "organic" into all the sauces. A box that says "Organic Lamb" may only contain three to four percent lamb waste and not meat. It is rare that the owner of the animal realizes how much he is being deceived and with what nerve he is being lied to.

Lately, many foods contain exotic ingredients in the form of plant extracts: yucca, aloe or alfalfa. If these ingredients are justified to treat certain diseases, their long-term effect is potentially toxic, especially in cats, and it is difficult to estimate what a daily consumption can give. Why manufacturers use these ingredients is a mystery to me. Maybe to stand out from the competition? Or just to be able to present something new and special? I've said it before, it's so easy to manipulate pet owners...

Argument #4: “Too much protein overloads the kidneys

(especially those of the cat) and triggers allergies (especially in the dog). " It's wrong !

Let's start with the so-called kidney overload caused by excess protein in cats (see Chapter 1). This is an industry claim to justify the presence of mediocre supplements. The cat needs a lot of quality protein and is not able to metabolize the high proportion of cereals contained especially in the kibbles. It's not the excess of protein that makes you sick, but the lack of it.

In the context of consultations dedicated to allergies in dogs, an excess of protein is often mentioned as a triggering agent, which has the consequence of prescribing a food with a reduced protein content which can go as far as vegetarianism. It can't and doesn't work. You should know that poor quality protein can very well trigger allergies. With a high quality protein food there is none (unless other factors act as triggers). A purely vegetarian food is dangerous for a dog, even though some veterinarians recommend it. There is even a vegetarian diet food available exclusively from the veterinarian. This very incomplete food causes protein and phosphorus deficiencies.

Dogs fed this way for an extended period suffer from massive muscle wasting and eczema. The intestinal flora of the dog is not made to digest vegetarian food and compose from it the quality muscle proteins that are essential to it. Only herbivores can do this whose intestine is much longer than that of carnivores and which also have fermentation pockets capable of digesting vegetable fibers correctly. The carnivore has a short intestine and an intestinal flora

designed for the digestion of animal proteins. Impossible to turn a dog into a cow or a cow into a carnivore. Let us remember the mad cow scandal: herbivores had been fed with animal meal. We know the rest. This is why a dog must remain a dog and a cow must remain a cow.

Argument 5: “Cats and dogs need carbohydrates for energy. " It's wrong !

The fact is that cereals are much cheaper than animal proteins. So it's all about making us believe that our pets absolutely need carbohydrates like rice, pasta, corn, etc. Carbohydrates only benefit industry, not animals.
The cat can derive all of its energy needs from animal proteins; as for the dog, he does not need carbohydrates either. Dogs fed exclusively with kibble develop an intestinal flora which, over time, is forced to adapt to at least easily digestible carbohydrates. This new flora in turn promotes the appearance of yeasts and bacteria that have no place in the intestine of a “normal” dog. Digestive disorders in the form of diarrhea then occur, as well as a greater susceptibility to certain diseases. One day or another, the intestine, which forms a barrier between harmful substances and the body, can no longer fulfill its mission. The system breaks down and pathologies set in. Invasive bacteria and yeast attached to ingested carbs release addictive toxins and can trigger cravings directed at those same carbs. It is therefore advisable, in order to preserve the intestinal bacterial flora and thereby the health of your dog, to largely give up carbohydrates.

Argument #6: “Over time, cats and dogs have

suitable for ready-to-eat food. " It's wrong !

It is only since the end of the sixties and the beginning of the seventies that ready-to-eat foods have been produced on a large scale. Think of the time it took for evolution, that is to say thousands of years, to bring about profound changes such as the one that consisted in adapting the digestive system and the metabolism of the cat to small prey. How could an organic modification affecting the intestine have occurred in some fifty years, a period during which ready-to-eat foods have multiplied on the market? Admittedly, breeding measures can bring about changes. But they only concern the appearance of the dog and the cat: its size, the color of its coat or its constitution. The intestine and hence the digestion of the dog and the cat are strictly identical to those of the wolf and the wild cat; they did not adapt in any way to anything new. The kind of arcane argument used to influence the consumer is hard to believe.

Argument no. 7: “Croquettes prevent tartar and clean teeth. " It's wrong !

The dog is a glutton who swallows his food whole in a few seconds. It only chews the biggest pieces of meat well, obviously bones or dried meat. The same goes for the cat who also swallows his pâté and his croquettes without chewing much. The cause of tartar in our pets is precisely in their incorrect diet. Its appearance is favored by the fact that they chew too little and swallow too soft food with the incorrect composition (too many sugars and carbohydrates). But, for tartar too, the solution is already on the market: there are now special croquettes to clean the teeth, as well as toothpaste for

dog and cat with abrasive, enzymes or substances with antimicrobial action which, in addition to mechanical cleaning, are supposed to produce chemical cleaning. Anyone who has ever tried to brush their cat's teeth can count themselves lucky if they came out of the operation more or less unscathed!

About sixty percent of domestic cats and eighty percent of dogs today suffer from dental pathologies from the age of three. It is an accepted reality. There are of course dogs and cats which, for hereditary reasons, are more susceptible than others to these pathologies. But the increase in these clinical pictures is the consequence of a poor diet. Rather than giving their dog or cat larger chunks of meat or bones, the owner is encouraged to brush their pet's teeth daily and/or give them teeth-cleaning kibble.

The principle of these "cleansing" croquettes is based on their texture, their shape and their particular size. The cat or dog is supposed to break them with its teeth before swallowing them. But that does not work, because the kibbles in question are so fragile that they break as soon as the animal seizes them between its teeth. Special additives, supposed to reinforce the cleaning effect, are mixed with these kibbles. Polyphosphate microcrystals deposited on it are also supposed to eliminate dental plaque. The procedure is not very clear, the dog and the cat almost always engulfing their kibble in one block, giving a bite in the best of cases. Antibacterial or anti-inflammatory substances are still added to the ingredients: hello the chemical cocktail!

A colleague praises in a canine magazine the effectiveness of a "stick to nibble", the Dentastix for dogs. I quote it:

Dentastix sticks are a simple and effective way to keep your dog's teeth clean and healthy. These treats for dental hygiene are not only good, they also prolong the pleasure of chewing and their effectiveness is clinically proven.
Used daily, Dentastix can reduce the formation of plaque and tartar by 80%.

Obviously, we do not mention who is the author of these studies. The "clinical" studies in question always turn out to be positive for the product since they are carried out by the manufacturers themselves. As for the veterinarians, they are hired as "rental smooth talkers" in exchange for princely remuneration, that goes without saying. Apart from the fact that the recommended sticks contain only four percent meat and the rest is made up of waste products from cereal processing and poor quality fats, they also contain sugar, which is particularly good for teeth as everyone knows.

The veterinarian “praised” for the occasion continues his recommendations: “ *Do not give your dog bones, they could cause health problems such as severe constipation. »*
I literally quote. Does this colleague really believe what he says? I can hardly believe it. But if I review the many statements made by veterinarians, even those concerning the bones, nothing surprises me anymore.

Argument #8: “Don't give bones. The bones splinter and may constipate. " It's wrong !

Raw bones do not splinter since they are elastic! Cooked bones are made brittle by cooking and can splinter, hence their danger to dogs and cats. Raw bones on the other hand

are safe because they still have elastic fibers that make them relatively soft. Giving too much can certainly cause stools that are a little firmer. It is possible to counter it by leaving a little meat on the bone (fleshy bone) or by giving, at the same time as each bone, a piece of raw meat or offal. In thirty years of practice, I have never encountered a single case of constipation due to raw bones. Conversely, I have had the opportunity to treat many animals suffering from constipation following the consumption of cooked bones, some of which had to be operated on.

This is the reason why **cooked bones should not be given.** Raw bones, on the other hand, do no harm. In nature, prey is not cooked, not even steamed. The birds that dogs and especially cats like to eat without leaving a crumb are not cooked either. If bird bones splinter and are so dangerous, all you have to do is watch your cat all day. This rumor has the hard skin. Veterinarians are not left out to spread this nonsense, like the colleague mentioned above and his advertising. Bones and cartilage are very important in the diet of dogs and cats.

Thanks to them, a bad phosphocalcic balance is almost impossible, because the two minerals are present in their natural form and in physiological balance. Unlike artificially produced commercial mineral mixes or chemically compounded feeds in the laboratory, no overdosing is possible, any excess being eliminated.

Your dog should be offered a meaty bone about three times a week. For your cat, the bones can optionally be minced. Any concern about the phosphocalcic balance of your animal will thus be eliminated. Dogs fed a lot of raw meat and bones have almost no joint pathology, such as the dreaded dysplasia of the hip, elbow, etc.

Argument no. 9: "Preparing meals yourself requires expertise, it's too complicated for a layman. " It's wrong !

This myth comes from the industry. Before the “invention” of ready-to-eat foods, our animals fed on butchery scraps and meal leftovers. Most of the diseases proliferating today were rare or non-existent. They are all grouped under the term "diseases of civilization" and both veterinarians and owners take their side.
I even sometimes have the impression that some owners are proud to find in their dog the disease from which they themselves suffer (diabetes, for example), according to the formula "shared pain halves". These animals are entrusted to us, they cannot defend themselves and their fate and health is in the hands of their owner, the veterinarian and the industry.

CHAPTER 10

HOW TO AVOID THE UNNECESSARY INTERVENTIONS AND PROCESSING ERRORS

Solutions for the good of your animals

IT is not easy for me to write this last chapter since it points out certain practices of my profession. The purpose of this book, however, is to reveal the abuses and to protect our animals from unnecessary diagnoses and interventions, and from the treatments that make them sick.

I have a colleague in Germany whose name I wish to mention here; his courage and his resolution have earned him all my esteem. This is Vera Biber who has written some very informative books on proper feeding of dogs. She had realized long before me what usually happens in veterinary surgeries and that the wrong diet produces sick animals in droves. Giving priority to prophylaxis and informing owners, she had the courage to leave her practice to devote herself to writing books on food and lecturing on the prevention of disease. Hats off!

Keeping owners informed is also at the heart of my mission. Perhaps I will also succeed in encouraging a few colleagues to reflect, to question their mode of exercise and to change a little bit.

But let's take things in order. Imagine you walk into a veterinary practice. You start by entering the reception room or the waiting room. If displays of brochures and bags of kibble from well-known brands jump out at you, the best thing, if your pet suffers from a chronic illness, is to get away as quickly as possible. Because, in terms of nutrition, a central issue in chronic diseases, firms of this ilk display striking incompetence by offering such foods for sale and disqualify themselves.

Similarly, posters inviting annual vaccinations or promoting deworming and antiparasitics are indicators of farmers who are more interested in the sale of their products than in the health of the animals brought to them. You should only use such practices in an emergency, if your pet needs to be taken care of quickly after an accident, for example. They are not suitable for the treatment of various metabolic diseases, their first instinct being generally, for each condition, to pass on to the owner the corresponding diet food. Except for the costs incurred in exchange for poor quality food that is not appropriate to the species, you have nothing to expect from your visit to such a cabinet.

“What about the firm I currently attend? you'll ask yourself, before realizing that the same is probably true with your vet as it is with everyone else you know. Of the

the reception and the waiting room, the advertisements for kibbles are essential and you are overwhelmed with advertisements for various pharmaceutical products. Personally, I avoid practices – of human medicine, I mean – which have a similar appearance and in which pharmaceutical advertising is omnipresent. It is not possible to trust a doctor who lends his name to advertisements since he is not free from his prescriptions. It is no different with veterinarians. The pharmaceutical companies that offer the biggest discounts, fund conferences, and more (everyone knows it's even worse in human medicine) obviously compete for the most lucrative deals. It doesn't matter how good the medicine is, as long as the price and discount are suitable. Whether in human or veterinary medicine, these same companies also have the annoying habit of highlighting drugs that have just been released and are even more expensive, even though, most of the time, they are barely distinguishable from those that are already on the market, except for a few insignificant features… and their price.

As for veterinarians, they prefer to use expensive drugs that bring more money rather than generics most often of the same value, but much less expensive. Generics are medicines containing exactly the same active substance as the original, but whose patents have expired, hence the possibility of copying them. A heart medication, often essential as a permanent treatment for dogs, is a good example, its use being painful for the owner's wallet. In its original packaging, this medicine (Fortekor 5 mg, active substance: benazepril, ACE inhibitor) costs 18.50 euros for fourteen tablets. For a small dog who needs one tablet a day, the monthly costs reach almost 40 euros.

If the owner has access to the much less expensive generic (and whose effect

is the same), he will only pay 10 euros for ninety-eight tablets also containing 5 mg of benazepril. The monthly cost being only about three euros, he will now pay less than a tenth of the initial price. It is true that the benefit of the veterinarian is much less…

I myself know almost no firm without advertising from the secretariat. One day I took the trouble to consult the sites of a hundred veterinary practices on the Internet. Almost everyone has their own and offers a virtual tour of the different spaces. During this research, I found only a very small number of waiting rooms and receptions where the croquettes were not staged. Some cabinets look like bowl shops.
In short, I have not yet found an academically trained veterinarian who does not sell diet kibble in his practice.

The only truly neutral waiting rooms, devoid of any hype, are those of practices practicing “alternative” medicine, which for me does not mean in opposition to academic medicine. But, thank God, there are also veterinarians who wonder if there are not, apart from purely symptomatic treatments, other, more gentle methods of helping their four-legged patients. In no case do I question academic medicine: in the face of emergency and for many pathologies, it is essential. But it also has major drawbacks. Faced with many chronic ailments, she unfortunately does not have the appropriate means. It is content with symptomatic treatment which is often accompanied by heavy side effects.

It is striking to note that firms practicing methods

treatment such as acupuncture, homeopathy or species-appropriate nutrition, to name a few, do not clutter their waiting room with advertisements for processed foods and pharmaceuticals. The sisters and brothers, who follow an alternative continuing education, are much more critical and question themselves much more about the causes of the diseases than the purely academically trained veterinarians. However, whoever really wonders ends up realizing how the system works and to what extent the veterinarian turns into a henchman of the industry. It's not just about food, but also the mindless sale of food supplements, dewormers, flea and tick repellents, etc. These critically minded veterinarians won't consent to transform complacently their cabinet in store where pharmaceutical representatives and kibble representatives jostle.

A change is urgent within the cabinets, it seems to me, for the good of the animals first and not of the turnover. It is preferable that you avoid presenting your sick animal, which suffers from allergies, metabolic disorders or joint pathologies, in one of these merchant cabinets. You will not be well advised and you will begin a long wandering of several months, even several years, from office to office, all working in the same way. Pets with allergies in particular often require long-term care and if the vet has nothing to offer other than allergy testing, cortisone, antibiotic shots and industry-developed anti-allergy diets , you better turn around. You will save yourself a lot of trouble and money.

The search for a suitable veterinary practice often requires a lot of patience, unfortunately. But, thank God, their number is increasing along with the growing demand for methods of care

alternatives expressed by pet owners. These practices approach the issue of nutrition and the use of medication with a critical eye.

Let's continue our visit now: you now enter the cabinet itself and put your animal on the examination table. From here you can collect new impressions. Does the vet ask specific questions? Does he inquire about the treatments already undertaken?
Medication given so far? What does your pet eat?
Or does he take action without making a long speech?

It is often difficult for you to know if what the veterinarian offers in terms of diagnosis and treatment is best for your animal and if it is really necessary. Many roads indeed lead to Rome. Veterinarians are also entitled to their individual freedoms, but there are some basic rules you can stick to. Turn your heels in the following situations:

- The veterinarian immediately wants to consult the vaccination record and points out in a tone of reproach that your 10-year-old dog has not had his last annual booster;
- He does not listen to you and makes you understand that, in any way, you don't know anything about it;
- He wants to convince you of the need to use regular worming and chemical flea repellents;
- He wants to stick antibiotic tablets on your pet for ten days for the slightest ailment without considering the slightest alternative;

- He wants to convince you of the need for vaccination against borreliosis;
- It gives you a bad conscience if you don't do this that he says and offers no alternative;
- He does not know, in the face of articular diseases, any possible treatment, apart from analgesics with numerous side effects;
- He absolutely wants to sell you so-called essential dietary supplements, but is unable to tell you what a correct diet should look like;
- In the face of even potential affection, he wants sell you the corresponding croquettes without waiting;
- He constantly interrupts you and won't let you finish your sentences.

It is best that you avoid vets of this ilk. The worst you can come across are what I call “rental bullshit”. They are sponsored by the industry, it doesn't matter if it is food or pharmaceutical, only the business counts! Vets who publicly do the article for certain products are all hire smooth talkers in that they are paid to say what they say. They are the worst representatives of our profession since they deviate from what should be their fundamental attitude, namely to prioritize the welfare of the animals entrusted to their care.

Those among my colleagues who, as soon as you arrive in their office, make an initial estimate in cold hard cash of what they are going to be able to pass on to you in terms of drugs, diagnostics and treatments are, in my opinion, not in their place and should seek another profession. You'd be surprised how many there are. Between them, the veterinarians express themselves in all frankness and recognize without ambiguity their practices. It's an “insider” who tells you.

Even if I may give the impression, my intention is not to pillory all of my colleagues. There are many exceptions, of course. These exceptions also live from their work, but their prosperity is not based on the highest possible sales figures for drugs and kibble, but on innovative and individualized treatments. Their scope of action is wide and pet owners know very well how to make sense of things and recognize when fair advice is given to them with honesty. Over time, this mode of practice also proves to be financially rewarding. And isn't it more gratifying to be able to look at yourself in the mirror at night and say to yourself: "I take full responsibility for everything I did today", rather than "Today, I passed on this and that to so-and-so who didn't need it anyway, but I made such a turnover. It is doubtless a question of nature. And believe me: it is possible for a veterinarian to earn a good living while remaining honest, it is both his duty and his right.

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1 Mode of treatment, mainly used in allergology, which tends to fall into disuse (NDT).

2 Broad-spectrum antibiotic for dogs and cats not available in France. Active substance: cephalexin (NDT).

3 Brand of animal feed manufactured by an Italian company, not widely distributed in France (NDE).

4 Recall every four years authorized only in Belgium for the Vanguard R, annual recall in France for both brands, according to the service note DGAL/SDSPA/N2008-8096 dated 24 April 2008 from the Ministry of Agriculture and Fisheries, Bureau of Animal Identification and Movement Control (NDT).

5 Not available in France (NDT).

6 Since the main partners of the European Union have anticipated the end date (prophylactic vaccination against foot-and-mouth disease was banned throughout the Union from 1 January 1992) , the French Minister for Agriculture and Forestry decided to prohibit foot-and-mouth disease vaccination in all animal species by interministerial order dated March 29, 1991 – JO Senate of 07/11/1991 (NDT).

7 *Vaccination – The business of fear,* not translated into French.

8 You can also read *Vaccines, lies and propaganda* by Sylvie Simon (Thierry Souccar Éditions, 2013) (NDE).

9 Journal of Physician-edited Drug Information (NDT).

10 The two original excerpts that follow are taken from the corresponding French legal notices, they are not a translation of the German version (NDT).

11 Unlike France, Frontline (fipronil) is only available

only in pharmacies (without prescription) in Germany. The Frontine Combo (fipronil + methopren) is only available on prescription in Germany and

Switzerland. 12 French equivalent: Activyl from MSD laboratories (NDE).

13 Cooperative grouping of companies in the agricultural and bank, named after its creator.