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Dog Tips

Your Pet's Immune System Might Not Need This

The American Animal Hospital Association has updated its canine vaccine guidelines in 2022, but it's more ideal to apply a different approach that takes into consideration these five criteria. If you do vaccinate your pup, be sure to request this homeopathic vaccine detox.

Reviewed by Dr. Becker

STORY AT-A-GLANCE

- In 2022, the American Animal Hospital Association (AAHA) issued a new set of canine vaccine guidelines
- There are no notable changes from the 2017 guidelines to core vaccine recommendations (distemper, parvo, adenovirus, and rabies); the parainfluenza virus vaccine remains an optional core according to the AAHA
- When it comes to rabies, it's ideal to give the first vaccine at 6 months, and then as required by law, a booster one year later and every three years thereafter
- Sadly, it seems at some point between 2017 and 2022, the AAHA backed away from their brand-new willingness to consider vaccine titer tests to check immunity to distemper, parvo, and adenovirus
- If your own veterinarian isn't offering titers at a reasonable cost, shop around. Any veterinarian truly concerned about the health of pets should happily offer affordable titer testing in lieu of automatic revaccination

Editor's Note: This article is a reprint. It was originally published May 22, 2023.

The American Animal Hospital Association (AAHA) has updated their canine vaccination guidelines for 2022.[1] These are the guidelines conventional veterinarians use. The last update was in 2017, which followed the much improved 2011 update that thankfully ushered in some new-and-improved thinking about the duration of core vaccines and how often to vaccinate.

Prior to 2011, canine core vaccines (distemper, parvo, and adenovirus) were to be given yearly, but the updated guidelines stated that core vaccines could be given at three-year or greater intervals. In addition, the AAHA admitted that immunity lasts at least five years for distemper and parvo, and at least seven years for adenovirus.

With regard to non-core vaccines, they're not recommended unless the risk of acquiring the disease is significant and outweighs the potential risks associated with the vaccines.

2022 AAHA Canine Core Vaccination Recommendations

- **Combination vaccine to include Canine Distemper (CDV) + Canine Parvo (CPV-2) + Canine Adenovirus (CAV-2) + (optional) Canine Parainfluenza Virus (CPiV)**

- **Initial vaccination in puppies up to 16 weeks of age —** At least 3 doses of a combination vaccine between 6 and 16 weeks, 2 to 4 weeks apart.
- **Initial vaccination in dogs over 16 weeks of age —** 2 doses of a combination vaccine, 2 to 4 weeks apart.
- **Revaccination —** A single dose of a combination vaccine within 1 year following the last dose in the initial vaccination series. Administer subsequent boosters at intervals of 3 years.

- **Rabies —** As required by law.

The Recommended Core Vaccine Protocol

The recommended approach is to administer a first round of distemper, parvo, and adenovirus (no parainfluenza) before 12 weeks of age, usually around 9 to 10 weeks. Your vet gives the second round between 15 and 16 weeks. Two weeks after the second round, the dog is titered to ensure they have been immunized and not just vaccinated.

When it comes to rabies, it's ideal to give the first vaccine at 6 months, and then as required by law, a booster one year later and every three years thereafter.

Remember, all animals need to be healthy to receive vaccines, so any ongoing health issue or new diagnosis affecting your pet's health disqualifies him from this schedule (thankfully). Dr. John Robb's **Protect the Pets** campaign is working to amend the mandatory rabies over-vaccination laws in each state, and to accept rabies titers instead.

The Ideal Approach to Non-Core Vaccines

Non-core vaccines, which include leptospira, Borrelia burgdorferi (Lyme), bordetella, canine influenza viruses H3N8 and H3N2, and Crotalus atrox (western diamond rattlesnake) are typically not recommended by integrative veterinarians.

The AAHA provides an **age and lifestyle-based vaccine calculator** to help veterinarians and dog parents determine what non-cores, if any, should be given. The ideal criteria follows:

- First, your dog should be healthy. If he has allergies, endocrine issues, organ dysfunction, cancer (or is a cancer survivor), or another medical issue he's not a candidate to receive vaccines.
- The vaccine is for a life-threatening disease (this eliminates most non-cores immediately).
- Your dog has the opportunity to be exposed to the disease.
- The vaccine is considered both effective and safe (most aren't, especially the bacterins).
- Your dog has never had an adverse reaction to a vaccine. Do not vaccinate a pet that has had a previous vaccine reaction of any kind.

If you do vaccinate your pet, ask your integrative veterinarian to provide a homeopathic vaccine detox such as Thuja (a common choice for all vaccines except rabies). Chlorella also helps remove adjuvants, which are usually aluminum and thiomersal (mercury).

It's also important to realize that several non-core vaccines are only available in combination with other vaccines, some of which are core. Check with your vet to ensure none of the non-core vaccines are being piggybacked on core vaccines your pet receives.

Unfortunately, most traditional vets do not carry single vaccines, so it's a good idea to ask to see the vaccine vial before assuming your pet is only receiving one agent at a time.

Antibody Titer Tests

Sadly, it seems at some point between 2017 and 2022, the AAHA backed away from their brand-new willingness to consider vaccine titer tests to check immunity to distemper, parvo, and adenovirus.

Specifically, a disappeared section from the 2017 guidelines noted that, "Measuring antibody levels (quantitative or qualitative) provides a reasonable assessment of protective immunity against CDV, CPV, and CAV2." The thrust of the 2022 guidelines seems to be about overcoming "vaccine hesitancy":

> *"Altogether, routine 'titer testing' to ascertain the necessity to revaccinate at currently recommended intervals is not usually advised, except in cases in which dogs have a history of adverse responses to vaccination, there is a suspicion of vaccine-related autoimmune disease, or when owners express resistance or hesitancy to having their dogs vaccinated or boostered — in which case client communication and education may help overcome this hesitancy."*

Many canine companions today, especially seniors, have at least one chronic disorder or disease. To assume that because these dogs have no history of vaccine adverse reactions, they will derive more benefit than risk from repeated vaccinations against diseases they are very likely already immune to, makes absolutely no sense.

It makes much more sense, and is ultimately much more humane, to check their immune status through titer testing rather than subject their aging and/or compromised bodies to repeated rounds of unnecessary, problematic chemical agents. It's disappointing that AAHA is suggesting vets try and persuade clients who want to titer to vaccinate instead, because it will just lead to more frustration on both sides.

It's worth noting that passionate pet parents and proactive veterinarians in other parts of the world have developed much more progressive titering protocols that hopefully can be instituted in North America someday.

In the Netherlands and Belgium, for instance, many vets titer puppies and kittens before their first vaccines to determine if there are maternal antibodies present, and can predict when a puppy's immune system is competent to receive vaccines by completing maternal nomographs. This allows animals to receive one perfectly timed vaccine, followed by a titer four weeks later to ensure they were adequately immunized.

Integrative vets in this country understand convincing clients to titer once after young animals have received their initial vaccines has taken many years to accomplish. Convincing owners to titer before and after a vaccine is absolutely the best medicine, but may prove to be a difficult protocol to institute for economic reasons.

Let's hope the demand for titer tests continues to increase among pet parents, along with access to affordable testing. Your vet can submit samples to **University of Wisconsin-Madison vet school** for a reasonable fee ($55) and **Healthy Dog Workshop** allows pet parents to submit their own samples.

If your own veterinarian isn't offering titers at a reasonable cost, shop around. Any veterinarian truly concerned about the health of pets should happily offer affordable titer testing in lieu of automatic revaccination.

Sources and References

[1] 2022 AAHA Canine Vaccination Guidelines