

The Health-Harming View That Many Vets Cling To

If your veterinarian hasn't adopted the most current guidelines for these preventatives, your dog's health may be at risk. Especially since now everyone in the veterinary community agrees there's a potential risk of this devastating result happening.

Reviewed by Dr. Becker

STORY AT-A-GLANCE

- Immune-mediated thrombocytopenia is a very serious autoimmune disease in which a dog's body attacks its own blood platelets as though they are a pathogenic bacteria or virus
- The conventional veterinary community continues to insist there isn't enough evidence to prove vaccines can trigger autoimmune disease in pets
- Fewer than half of U.S. veterinarians follow the most current canine vaccination guidelines calling for a reduction in the number of vaccines dogs receive over their lifetime, and many fewer still offer titer testing in lieu of revaccination
- Since everyone in the veterinary community agrees there's a potential link between vaccinations and autoimmune disease, why aren't more vets working to reduce the number of vaccinations they give?
- Following the latest vaccination guidelines and offering affordable titer testing would be a good place for veterinarians to start

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An article in a veterinary publication purported to assess claims of vaccine-induced IMT (immune-mediated thrombocytopenia) and IMHA (autoimmune hemolytic anemia) in dogs. The conclusion of the author (a veterinarian) was that:

“Overall, the benefits of vaccination are clear and well-established, whereas the risk of IMHA and ITP associated with vaccination are theoretical and not convincingly demonstrated. While more research on the subject is clearly needed, the current evidence does not support changing vaccination practices for the purpose of reducing the risk of occurrence or relapse of ITP or IMHA in dogs.”¹

Unfortunately, the author neglected to mention two very important related topics: unnecessary revaccinations, and the fact that only about 40% of veterinarians follow current vaccination guidelines² (more about this later), which means 60% continue to give more vaccinations than necessary, and more often.

Immune-Mediated Thrombocytopenia

Immune-mediated thrombocytopenia is a very serious autoimmune disease in which a dog's body attacks its own blood platelets as though they are a pathogenic bacteria or virus.

Thrombocytopenia is the technical word for low platelet count. Platelets are components of blood produced in bone marrow and are essential to blood clotting during primary hemostasis, which is the clotting that takes place immediately after an event that damages a blood vessel. When the body's platelet count is depleted, severe bruising or uncontrolled bleeding can occur. Excessive bleeding and bruising can lead to anemia (a low red blood cell count), and if left untreated, death can result.

ITP is a complex and variable condition, so treatment is individualized. Often aggressive care is required when the disorder is initially diagnosed, and many dogs need to be hospitalized.

The immune system attack on blood platelets must be quickly controlled, which unfortunately usually means administering immunosuppressive drugs to save the pet's life. If anemia is present, a blood transfusion may be required, and supportive care in the form of oxygen and fluid therapy may be given.

Underlying diseases must be identified and treated to help control the ITP and lower the risk of recurrence. Longer term, the dog will require immunosuppressive and other drugs based on symptoms. It's not unusual for a dog to be on immunosuppressive drugs for several months after initial diagnosis. Supportive herbs such as milk thistle can be used at this time to help reduce stress on the organs of detoxification.

Any drugs or vaccines the dog received prior to developing ITP should be avoided for the rest of the dog's life, as should all vaccines and other immune system stimulants.

Many dogs can be weaned from all medications, but occasionally a dog may require intermittent drug therapy for the rest of his life. These dogs are good candidates for integrative veterinary care, which can help reduce flare-ups of autoimmune reactions and reduce the need for long-term drug therapy.

Link Between Vaccines and ITP

A 2012 Purdue University study failed to confirm a link between idiopathic immune-mediated thrombocytopenia and recent vaccination, however, the researchers noted that "... the possibility of an association cannot be completely ruled out based on the small sample populations and requires further investigation."³

Veterinarian Dr. Robert Runde, writing for dvm360.com, points out other limitations of the study, including lack of information on the number of vaccines the dogs in the study received throughout their lives. According to Dr. Runde, "... it is difficult to conclude whether recent or cumulative vaccinations may or may not increase the risk of idiopathic ITP."⁴

Many in the holistic and integrative veterinary community are convinced the vast majority of immune-mediated diseases, including ITP, are triggered or exacerbated by vaccines, particularly bacterins (vaccines against bacterial organisms, such as the Lyme vaccine and the leptospirosis vaccine) as well as killed vaccines (rabies vaccine).

Studies like this one that look only for associations between recent vaccinations (less than two months) and immune-mediated disease have very limited use. Some animals' immune systems are reactive the very first time a foreign and toxic agent like a vaccine is introduced. The response in these pets is immediate and often overwhelming.

Other animals' immune systems respond to cumulative vaccinations over a period of months (commonly three to six months, or longer). In addition, while sometimes it's a vaccine alone that triggers immune disease, more often, it is vaccinations coupled with other medications, environmental toxins, a poor-quality diet and other lifestyle stressors.

The strength and balance of every animal's immune system is different, so there's no way to predict — unless your dog has had a reaction in the past — how much danger he's in from exposure to the modified virus contained in any given vaccine or the many toxic ingredients it also contains.

Autoimmune Hemolytic Anemia

AIHA is a life-threatening disease in which an animal's immune system destroys its own red blood cells. Antibodies produced by the immune system to fight pathogens, instead target the body's red blood cells and destroy them. Red blood cells are necessary to carry oxygen to the tissues of the body, and pets cannot survive without adequate oxygenation of all of the body's tissues.

In dogs with AIHA, the surface of the red blood cells becomes altered by an underlying disease process or a toxin. These alterations catch the attention of the immune system, which sees them as foreign invaders or pathogens. The immune system targets the altered red blood cells and destroys them through a process known as hemolysis, either within the red blood cell vessels or as they circulate through the spleen or liver.

Conventional treatment for AIHA is usually aggressive. The goal is to stop the destruction of red blood cells, so they can regain their ability to efficiently move oxygen to all the body's tissues. If there is any known underlying condition contributing to the destruction of red blood cells, this needs to be addressed. And the animal's health needs to be supported until their red blood cell supply is back to normal.

If the disease is life-threatening at the time of diagnosis, the pet may need blood transfusions immediately. This can be risky because while the immune system is still attacking red blood cells, an increase in the number of them through transfusion can trigger an even more aggressive immune system response.

Sometimes a blood substitute called Oxyglobin is used. This is a substance that has the ability to carry oxygen to all of the body's tissues and avoid the risk associated with transfusion of real blood to your dog.

Drug therapy is also typically introduced in the form of a corticosteroid like prednisone to intentionally suppress the immune system, so it will slow down or stop attacking the red blood cells. These drugs are usually given in very high doses, and if the animal's response isn't sufficient, even stronger immunosuppressants are administered, including chemotherapeutic agents. Needless to say, all these drugs have significant side effects — some of them are quite serious.

Some minor success has been seen with the use of intravenous immunoglobulins, which come from human blood. In rare instances, usually only in specialty veterinary hospitals, a process called plasmapheresis, which removes the antibodies from the blood, is also used. Sometimes a splenectomy is performed.

Supportive care for autoimmune hemolytic anemia is critical, and can include recurrent transfusions, nursing support, hospitalization, medications and IV fluids to keep the animal as hydrated and healthy as possible.

Integrative veterinarians offer adjunctive therapies while the initial crisis is being treated. The Chinese herb Yunnan baiyao effectively reduces bleeding anywhere in the body. Homeopathic phosphorous can also be very beneficial, as can the traditional Chinese medicinal formula Qing Ying Tang.

Many dogs with autoimmune hemolytic anemia unfortunately require long-term or even intermittent lifetime therapy, because relapses are common.

Link Between Vaccines and AIHA

Some of the known underlying triggers for secondary AIHA are infectious agents, heartworm disease, inflammatory bowel disease (IBD), certain drugs, hypersensitivity reactions (for example, to bee stings) and vaccines. Again, according to the conventional veterinary community no “statistically significant association” exists between vaccines and AIHA, and they are only willing to consider a link if the onset of the disease occurs within four weeks of a vaccination.

And again, those in the holistic and integrative veterinary community absolutely believe there is a direct and prevalent link between vaccines and this terrible disease.

Why Aren't Conventional Vets Taking Steps to Reduce the Risk of Autoimmune Disease in Dogs?

If there is even the slightest possibility that vaccinations trigger autoimmune diseases like IMT and AIHA in dogs — and everyone agrees the possibility exists — why aren't more veterinarians recommending titer tests in lieu of revaccinating?

Pet owners and proactive veterinarians in other parts of the world have developed much more progressive titering protocols than are offered in North America. In the Netherlands and Belgium, for instance, many veterinarians titer test puppies and kittens before their first vaccines to determine if there are maternal antibodies present.

This allows the animals to receive one perfectly timed vaccine. They're titered again four weeks later to assure they were adequately immunized.

Integrative vets in the U.S. understand that convincing clients to titer once after young pets have received their initial vaccines has taken many years to accomplish, and that convincing them to titer before and after a vaccine is optimal but may prove too difficult a 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. Dr. John Robb has arranged for a rabies, parvo and distemper **titer package for \$55**. If your veterinarian isn't offering titer testing 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.

Just as important as the titer testing question is, why are over half of conventional veterinarians still not following the latest guidelines — published eight years ago — that reduce the number of core vaccines dogs receive throughout their lives?

In 2011, the American Animal Hospital Association (AAHA) Canine Vaccination Task Force updated their vaccination guidelines, establishing that the core vaccines (with the exception of the one-year rabies vaccine) — canine distemper (CDV), canine parvo (CPV-2) and canine adenovirus (CAV-2) — are now recommended at three-year or greater intervals versus one-year intervals.⁵

(The AAHA updated the guidelines again in 2017⁶ to address new non-core vaccines developed since 2011. Non-cores are not recommended unless the risk of acquiring the disease is significant and outweighs the potential risks associated with the vaccines.) Also, in the updated 2011 guidelines, the AAHA acknowledged that in the case of the non-rabies core vaccines, immunity lasts at least five years for distemper and parvo, and at least seven years for adenovirus.

The Recommended Canine Vaccine Protocol

An ideal protocol is to administer a first round of distemper, parvo and adenovirus (no parainfluenza) before 12 weeks of age, usually around 9 to 10 weeks. The second round should be given between 15 and 16 weeks. Two weeks after the second round, the vet should titer to ensure the dog has been immunized and not just vaccinated.

When it comes to rabies, it's best 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. 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.

As mentioned above, non-core vaccines are typically not recommended, which include bordetella, leptospira, *Borrelia burgdorferi* (Lyme), canine influenza viruses H3N8 and H3N2, and *Crotalus atrox* (Western diamond rattlesnake). The AAHA has developed a Lifestyle-Based Vaccine Calculator to help veterinarians and dog parents determine what non-cores, if any, should be given. Each vaccine your dog receives should meet the following criteria:

- 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).

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 piggy-backed on core vaccines your pet receives.

Unfortunately, most conventional veterinarians 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.

Sources and References

¹ [Veterinary Practice News, August 29, 2018](#)

² [Dr. Jean Dodds, Titer Testing](#).

³ [Journal of Veterinary Internal Medicine, Jan-Feb 2012](#)

⁴ [dvm360, November 1, 2012 \(Archived\)](#).

⁵ [Journal of the American Animal Hospital Association, Volume 47, Issue 5 \(September/October 2011\)](#)

⁶ [2017 AAHA Canine Vaccination Guidelines \(Archived\)](#).
