

Happy (and healthy) new year!

This is the time of year when millions of Americans get off their couches and visit the gym (at least for a few weeks). What better time to remind them of the importance of cardiac health to the quality of life and longevity of their cat or dog?

We look forward to being your partner in making 2014 a healthy, successful year for you, your practice and the companion animals and owners you serve. ■



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Practical information is only a click away

Our website (www.cardiaceducationgroup.org) is designed to provide the latest research, diagnosis tips and treatment recommendations.

We have been very busy updating our website with new and helpful information. If you haven't visited recently, here are some of the new features:

NEWLY LAUNCHED RADIOGRAPH VIEWER, VHS TOOL AND CASE STUDIES

- We are excited to launch the first-of-its-kind [radiograph viewer and VHS tool](#). The user-friendly interface allows you to search various radiographs by breed, disease, abnormality or folder (of case study). On designated radiographs, you can practice your measurement skills by performing a VHS measurement with the CEG's state-of-the-art digital tool.
- We have launched [17 new feline and canine radiograph case studies](#). Each will take you through the case background, clinical history, radiographs, and diagnosis and treatment of the specific condition.

INTERACTIVE CASE STUDIES GET A NEW ADDITION

- If you haven't worked through one of our [interactive case studies](#), we encourage you to do so. If you have already completed them, you may want to take a second look. We have added an advanced physical diagnosis section that includes a diagnostic test selection portion to each case study.
- Keep an eye open for "Hailey" and "Mickey", two new interactive case studies that will be added as soon as they are RACE-certified for CE credit.


NEW ARTICLES AND RECOMMENDATIONS

- Two excellent [new circulation articles](#) by our members have been added to the website: "Diagnosis and Management of Systemic Hypertension in Cats & Dogs" by Dr. Rebecca Stepien, and "When Should I Worry about Pulmonary Hypertension In My Patients?" by Dr. Alan Spier.
- Found under the ["CEG Recommendation"](#) tab is a new CEG piece entitled "Recommendations for Preclinical Feline Hypertrophic Cardiomyopathy (HCM)". This new piece is available in a .pdf download.

RESOURCES FOR YOU AND YOUR PRACTICE

- Finally, under our ["Resources"](#) tab on the website, we have added several new pieces of information.
 - We have developed "Client Handouts: Notes From The CEG". Click on the topic you need and print as many copies as you like.
 - Another useful topic under the ["Resources"](#) tab is the CEG Formulary. Currently we have the ["Canine Formulary: Medications for Dogs"](#) available for download. Check back soon for the Feline Formulary.
 - Lastly, we have updated the [ABCD chart](#). Remember, this is a great piece for downloading. ■

Medication (Drug Class)	PREPARATIONS	TYPICAL DOSAGE	POTENTIAL ADVERSE EFFECTS
Amiodarone (antiarrhythmic)	For injection: hexamer® amiodarone without preservative 150 mg (1.5 mg/ml) or 360 mg (3.6 mg/ml) in premeasured bags Tablets: 200, 400 mg	Parenteral: 2-5 mg/kg, IV infused over 30 to 60 minutes with careful BP and rhythm monitoring PO: 8-10 mg/kg, q12-24h for 7 to 10 days then reduce to 4-6 mg/kg, q24h chronically	<ul style="list-style-type: none"> Do not use amiodarone prepared with polysorbate80 intravenously due to risk of anaphylactoid reaction Typically not the 1st line therapy Long elimination half-life Elevated liver enzymes/hepatotoxicity (common), monitoring recommended Thyroid dysfunction, blood dyscrasia, proarrhythmia Up-titration of dose to desired BP effect In resistant systemic hypertension, doses at the higher end of the dosage range are needed In CHF, initial dosages should be at the lower end of the range Hypotension, RAAS activation, gingival hyperplasia
Amiodipine (arterial dilator)	Tablets: 2.5, 5, 10 mg	PO: 0.1-0.2 mg/kg, q12h or 0.2-0.4 mg/kg, q24h	<ul style="list-style-type: none"> Up-titration of dose to desired BP effect In resistant systemic hypertension, doses at the higher end of the dosage range are needed In CHF, initial dosages should be at the lower end of the range Hypotension, RAAS activation, gingival hyperplasia

CEG RECOMMENDATIONS BY HEART FAILURE STAGE			
A Dogs with no structural disease but high risk for developing heart disease.	B Dogs with structural heart disease that have not yet developed clinical signs of heart failure.	C Dogs with past or current clinical signs of heart failure.	D Dogs with end-stage disease with clinical signs of heart failure refractory to standard therapy.
			
A1: Normal auscultation	B1: No cardiac enlargement	B2: Cardiac enlargement is present	C: Clinical signs of heart failure
<ul style="list-style-type: none"> Annual auscultation Additional screening tests for selected breeds Client education 	<ul style="list-style-type: none"> B1: No treatment, consult a cardiologist if necessary. 	<ul style="list-style-type: none"> B2: MMVD - ACEI in dogs with severe cardiac enlargement DCM in Dobermans - Pimobendan & ACEI in confirmed cases, consult a cardiologist regarding use of beta-blockers or other therapies DCM in other breeds - ACEI in confirmed cases, consult a cardiologist regarding use of pimobendan, beta-blockers or other therapies 	<ul style="list-style-type: none"> Furosemide, Pimobendan, ACEI, Spironolactone, +/- other treatments. Furosemide, Pimobendan, ACEI, Spironolactone, +/- other treatments.

Common Misperceptions About Congestive Heart Failure Series

Myth #5 All dogs have a heart murmur if they are in heart failure

Almost all small dogs with mitral valve disease will be diagnosed with a heart murmur long before they are in CHF. However, a larger dog with dilated cardiomyopathy (DCM) may not have a detectable heart murmur, or if a murmur is present, it is likely to be lower in intensity (softer) than a mitral insufficiency murmur.

DCM is characterized by cardiac dilatation and reduced myocardial contractility, and although the CHF can be diagnosed based on radiographs, an echocardiogram is more useful to diagnose the reduced myocardial systolic function. ■

heart

health month

March is Canine Heart Health Month. Help us get the word out about canine heart disease by initiating client focused educational events in your clinic. For more information, go to www.cardiodvm.com and click on Heart Health Month.