NATIONAL VETERINARY LABORATORY



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NEWSLETTER

Goodhearted Veterinarians and Bartonella®

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In This Issue:

In the winter 2014 issue of the NVL Newsletter we discuss "goodhearted veterinarians" and *Bartonella*. Veterinarians who are trying to do the right thing by helping unwanted stray and feral cats and kittens may expose themselves to the moral and legal consequences of their good deeds. In addition, we will chronicle a very good friend of this laboratory and a truly goodhearted sole practitioner, Dr. Andrew J. Williamson.

Valerie Sellen- In Memoriam:

Midway through the writing of this Newsletter, on January 5th, we received the sad news that our longtime laboratory testing supervisor, Valerie Sellen, lost her 7 year long battle with cancer.



Valerie Sellen at FA microscope

Valerie supervised the daily testing for FeLV, FIV and Bartonella. In her 38 year tenure she performed and read more than 1 million FeLV IFA FeLeuk® tests. She worked tirelessly until 2 months ago when her painful illness forced her to stop working. Even then she volunteered to perform whatever she could from home. Valerie was the type of person you could always count on; she NEVER let us down in any task. She could charm our most obstinate vendors and calm the ire of any client. She always said yes to any task that we asked of her and she showed tremendous courage in fighting the painful final days of her life. In the 38 years together, we only raised our voices to each other once, and of course in the end, she was right in that matter. When we traveled away from the lab we were always comforted to know that Valerie had everything under control. She proof-read every Newsletter and always found misspellings and often found a misplaced or absent coma or colonthis is the first of our 52 Newsletters that she did not proof for us. We shall miss Valerie very much as a friend and colleague. There can be no higher tribute for a person's life well lived.

With deepest sympathy-

Mari Bertero, Gloria Longo, Susan Hardy, Evelyn Zuckerman, and Dr. William Hardy, Jr.

The Goodhearted Veterinarian

All practicing veterinarians have, at one or many times, been a "goodhearted veterinarian" by treating indigent client's animals at no or reduced charges, treating injured wildlife at no charge, participating in low cost

taking in stray and feral cats for placement into loving homes. This last activity has opened many goodhearted veterinarians to moral and possible public health consequences. It has been estimated that about 40% of all owned cats originated as stray, feral or shelter cats (NVL unpublished data).

Herein is the potential problem for veterinarians who often receive these animals as "doorstep dropoffs" at the hospital or as surrendered animals from owners or persons who have found them. Some veterinarians personally adopt stray or feral cats brought to them by their clients



rabies vaccine clinics and

Feral cats

As Clare Boothe Luce once opined, "no good deed goes unpunished," some veterinarians have experienced the *Bartonella* related punishment of the zoonotic and veterinary consequences of their good deeds. The best way to illustrate these risks is to describe several of the many situations that have occurred.

Goodhearted Deed #1:

After agreeing to accept a litter of feral kittens from a client's rescue group, this hospital made sure all the kittens were healthy, free of fleas and intestinal parasites, were vaccinated and tested negative for FeLV and FIV. The kittens were not tested for Bartonella even though the hospital routinely Bartonella tested cats with inflammatory diseases. The kittens, now 4 months old, were adopted by clients and the zoonotic dangers of Bartonella from stray and feral cats were not discussed. One client adopted 2 of the kittens and both developed chronic URI. Six months after adopting the kittens from their veterinarian, a child in the family developed classical cat scratch disease (CSD) with sequelae of severe depression. After the child was diagnosed, the mother brought the 2, now 1 year old cats, and another 3 year old unrelated cat, back to the hospital for Bartonella tests at the suggestion of the family's pediatrician. Both adopted kittens were FeBart® positive (infected) but the older cat was +1, not infected. Ironically, the family's pediatrician diagnosed CSD right away after seeing a scratch on the child's arm from the uninfected older cat. The child's Bartonella antibody test was positive.

Goodhearted Deed #2:

A veterinarian adopted 2 adult cats from a local shelter. After the customary health examinations, FeLV & FIV tests, and routine vaccinations, the veterinarian brought the cats home. No Bartonella test was performed as this hospital had not started testing any cats for Bartonella. One adult in the household received numerous scratches from one of the cats over the next year. This person then developed chronic fever and signs of heart disease. There were no signs of the classical CSD prodrome of fever, skin papule and lymphadenopathy. However, the cardiologist knew that one spouse was a veterinarian and immediately thought of the possibility of Bartonella induced endocarditis. He preformed an echocardiogram and submitted a Bartonella serology, PCR, and blood culture. cardiogram showed a vegetative lesion of the aortic valve but the culture was sterile, the PCR was negative. However, the Bartonella henselae serology showed a high IgG titer of 1:256 and a negative IgM titer indicating a chronic Bartonella infection. The veterinarian's spouse responded well to IV antibiotic therapy and did not need surgical correction. Both of the shelter adopted cats tested $FeBart^{\otimes}$ positive (infected) after this incident. The cost for this Bartonella zoonotic disease was more than \$15,000.

Goodhearted Deed #3:

A 52 year old medical professional adopted an adult stray cat from her veterinarian to add to the existing adult cat in her house. The veterinarian did not test the cat for Bartonella. Several years later she developed severe vertigo and was unable to drive. Bilateral axillary and retroauricular lymphadenopathy developed. She had a petite mal seizure and fell and broke a bone in her foot. She consulted a total of 12 physicians, including 5 neurologists, 2 endocrinologists, 2 cardiologists a psychiatrist and an infectious disease specialist. After numerous diagnostic procedures, among the diagnoses considered were, MS, narcolepsy and "not being put together right." Finally, her primary care doctor considered Bartonella infection and submitted a serological test for Bartonella which was positive for Bartonella henselae. After 2 rounds of azithromycin therapy she was greatly improved. This 8 month ordeal cost approximately \$200,000 and economic strain necessitated her daughter to transfer to an in-state university. The patient reported no known scratches or bites from her 2 cats at home, both of which tested FeBart® positive after this ordeal.

Summary- One common theme to these cases is the lack of *Bartonella* counseling or testing by "goodhearted veterinarians" who gave cats and kittens to their clients. Many veterinarians continue to ignore the *Bartonella* zoonosis potential, especially from stray, shelter, rescue, and feral cats.

Dr. Andrew J. Williamson

My good friend, Andy Williamson retired on December 31st after 50 years as a sole practitioner. Andy grew up on a small New Jersey farm with animals and attended Rutgers University and graduated form Cornell University, College of Veterinary Medicine. After a few year stay in a mixed practice in Connecticut he decided, in 1964, to open the first private veterinary practice on St Thomas in the United States Virgin Islands. He then spent the next 50 years as a sole practitioner treating many different species of animals in a tropical paradise.



Dr. Andy Williamson and Reggie

Andy is an excellent clinician who handled every kind of medical and surgical condition that occurred in various species from iguanas to a resident pet cheetah. He was one of the first veterinarians in the world to observe and treat a new condition in dogs, at the time called tropical pancytopenia, later to be elucidated as Ehrlichiosis, when he saw dogs in his clinic with fever, severe epistaxis and leukocytosis. At that time his technician read an article in the Miami Times of a similar condition killing military dogs in Vietnam and Andy alertly contacted the military veterinary officer in Vietnam and eventually was connected to Walter Reed Hospital and the Pentagon. Andy had treated his dogs empirically with high doses of erythromycin and a few survived. These dogs were of great

interest to the military and they came to Andy's Hospital to draw blood samples from the survivors. From these samples, and from the military dogs, *Ehrlichia canis* was isolated.²



Ehrlichia- induced epistaxis

In the 1960s, Andy helped to establish the St. Thomas Humane Society to care for the numerous stray and abandoned animals on the

island. He served as the chairman of the Virgin Islands Veterinary Board for the past 27 years. Andy invited us to present 2 seminars to the VI veterinarians, the first on FeLV and, years later, one on *Bartonella*. Andy was one of the first veterinarians to send samples to our lab for FeLV testing in 1973 and in 1999 he immediately began sending samples for *Bartonella* tests. Several of his clients developed CSD. He tested almost 488 cats for *Bartonella* and had an astounding infection rate of 77% due to the heavy, year round, flea and tick populations in the Virgin Islands.³ He supplied us with the excess, to be discarded, EDTA blood from his feline patients that we use as our *Bartonella* positive control sera for the daily Fe*Bart*® WB test.

I first met Andy through a mutual friend, Dr. Tony Palminteri, co-owner of the Oradell Animal Hospital in New Jersey. Andy needed a relief veterinarian while he was off island for 2 weeks and, as a newly minted veterinarian, I jumped at the chance to have a family vacation in St. Thomas. Andy warned me of the "island characters" and their pets and sure enough the first case that walked through the door was a salty sailor with a nasty, squinting parrot pawing at his left eye. History was that during a rum and coke party aboard his sailboat someone tossed a swizzle stick at his parrot to stop it from its incessant chatter. Since I did not know how to restrain a parrot, and since I had become accustomed to having all 10 of my fingers, I merely dispensed a tube of ophthalmic ointment and said to return in 3 days. Of course I never saw the bird again. The next case through the door was a dog squirting blood from the nose, my first case of Ehrlichiosis.

What made Andy a great veterinarian was not his patience, he had very little of that, but his true love of animals and of veterinary medicine. He was generous to a fault, often treating animals of the local population gratis, for reduced fees, or for lobster, fish, chickens or rum. Many times over the years, he was called to the clinic, at all hours, to treat animals, domestic or wild, that had been hit by cars driven wildly by many in St. Thomas. He once treated his neighbor's pet cheetah who was constipated. After much difficulty in administering several Fleet enemas, and with no results in the clinic for 30 minutes, Andy sent the animal home in his neighbor's Volkswagen Beetle. About 20 minutes later, his neighbor called to tell Andy the enemas had indeed worked in the car on the way home. On my many stays with Andy, I often saw the cheetah roaming the yard next door as if it was at home on the Serengeti; I always tried not to look like a gazelle.

Andy always loved to have veterinarians visit him in his isolation in St. Thomas. Dr. Bill Stockman, my veterinary classmate and co-owner of the Oradell Animal Hospital, and I visited Andy more than a dozen times for scuba diving, and each time Andy insisted that we stay with him in his home. We both became certified scuba divers in St. Thomas and spent many weeks diving and photographing the underwater life of the islands. We even experienced an earthquake while underwater off of St. Thomas. Andy is still very proud of the accomplishment, of his one and only deep sea fishing trip, when he caught the second-largest marlin ever caught in the world.



Aeolus and Andy

Sailing was Andy's second love and he would sail his beautiful classic antique sailboat, Aeolus, the 10 miles to the British Virgin Island of Tortola where he would hold his one weekly veterinary clinic. One notable Aeolus sail-dive trip was planned with Dr. Bill Stockman, Andy



and I to dive the famed ship wrecked Anegada reef with veteran wreck explorer Bert Kilbride. We loaded Aeolus with our dive gear and set

Satellite image: Anegada top, Virgin Gorda bottom

off from St. Thomas on our 40 mile sail to meet Bert at his dive shop on the island of Virgin Gorda. Of course, halfway to our destination, a terrific storm blew in and we struggled in huge seas. We finally arrived around 8 PM in pitch black howling winds off The Bitter End Hotel and dropped anchor. Nerves rattled Andy decided to send Bill Stockman ashore in Aeolus' tiny dingy to make dinner reservations. No sooner had Bill cast off than he was swept out to sea by the off shore gale winds. He struggled for an hour rowing madly just to make it back to Aeolus. Needless to say, that evening we spent wet and hungry but were still excited to be diving the next day. At sun up the winds were still howling and when we finally made it ashore to the Kilbride dive shop he informed us, in no uncertain terms, that he "wouldn't go to Anegada in this storm even if his grandmother was drowning up there." So ended our long planned dive trip. Now, as Andy is leaving St. Thomas, he could not part with his beloved Aeolus, so he gave her to a family member who will keep her in the San Juan Islands in the state of Washington so he can occasionally sail her in retirement.

Our lab will miss Andy's help and his calls to consult or just chat. One cannot replace such a wonderful friend and we hope Andy and his wife Mardi enjoy many years of blissful retirement in their log cabin atop a mountain in Oregon. I hope he writes that veterinary book of the "tails" of a veterinarian's life in the Caribbean.

References:

- 1. This famous quip was first quoted in print by Luce's social secretary Letitia Baldrige in *Roman Candle* (Houghton Mifflin, Boston, 1956), 129: "When I would entreat her to engage in resolving a specific case, she replied, 'No good deed goes unpunished."
- 2. Hildebrandt, P.K., D.L. Huxsoll, J. S. Walker, R.M. Nims, R. Taylor, and M. Andrews. Pathology of canine ehrlichiosis (tropical canine pancytopenia). Am. J. Vet. Res. 34:1309-1320, 1973.
- 3. Hardy, WD, Jr., Zuckerman, E, Corbishley, J. Seroprevalence of *Bartonella*-infection in healthy and diseased cats in the United States and Caribbean: Evidence for *Bartonella*-induced diseases in cats. International Conference of the American Society for Rickettsiology, Big Sky, Montana, Aug. 17-22, 2001.