I’ve grown up in dogs. Over the course of 50-plus years in the sport, I have been involved with numerous breeds and health issues. What is assured is that there will always be health issues to be concerned about. The more serious issues can garner breeder hysteria once they are identified in a breed, causing the pendulum of interest in the problem to swing to the extreme until research and knowledge bring it back to normal. Some animal scientists will argue that the “Popular Sire” syndrome – that is, many different bitches of varying genetic background breeding to one common sire – propagates genetic disease while a more diverse breeding program reduces the risk of genetic disease.

An example comes to mind: I bred Min. Schnauzers for over 20 years and had a “popular sire” that was, fortunately, healthy genetically. The breed at that time recognized an increase in Juvenile Cataracts, which were known to be a recessive gene. My particular dog never produced the problem and was not affected, nor did any of his progeny within 3 generations produce the problem. I was lucky, as the breed did have a significant problem with JC at the time. Some breeders decided they would “help” the breed by offering their affected dogs for breeding so that a dog could be “tested” for the gene. The obvious problem becomes, what does one do with the resulting affected puppies, and if the “test” breeding produces no affected puppies, 50% of the litter could still carry the gene because of the affected parent. The intentional breeding of affected dogs is best left in the hands of researchers. A positive role for the breeder in health testing is to take part in health clinics, offering a convenient and often less expensive opportunity to test for health issues.

A simple recessive gene is pretty easy to breed out if you control all the resulting progeny. You must first determine if you really should be breeding the dog that could be affected or might carry a problem gene. Two examples of a difficult decision to make for me were when I bred Toy and Standard Poodles. I owned a Toy that won at the Garden and produced numerous champions. At the age of 9 years, he was diagnosed with PRA, a disease we knew little about in those years. He was taken to A&M Vet. School and my biggest concern was that this dog was a very popular sire – how should I handle this problem? I was reared with an ingrained sense of responsibility toward dogs that I owned, bred and/or cared for, so ignoring the problem was out of the question. I asked the specialist what was known about the problem and it was precious little at the time.

In the same time frame as the PRA diagnosis for my Toy Poodle, my Standard Poodle was diagnosed with Hip Dysplasia. The Standard Poodle was a relatively young dog at the time and in his prime. Again, we knew very little about Hip Dysplasia and didn’t even know if it was genetic. We did know it was a debilitating condition and should be recognized as such.

I spent a good deal of time with the vets at A&M trying to assess how to move forward in my breeding program and how to responsibly advise those who had already bred to my two dogs. The Toy Poodle already had 3 generations of champions following him, so you can imagine the impact on the breed from my one “popular” sire. The specialists at A&M gave me the following advice for breeding a dog suspected or diagnosed with a health issue that is not identified as genetic: if your dog offers the breed something that no other dog at that time can offer the breed, breed it selectively to a dog known not to have or to have produced the issue.

Control all the resulting progeny. What you do not keep to breed, spay/neuter before placing. What you do keep to breed, breed only to clear dogs, again controlling the resulting progeny. By following this plan you could conceivably breed out the problem in five generations. That’s a very serious commitment and a decision not to be made lightly! I did notify every breeder who had bred to either dog and asked them to follow the guidelines put forth by the specialists. The toy poodle was withdrawn from breeding and I selectively bred the Standard poodle according to the guidelines. Hip Dysplasia was bred out of my line of Standard Poodles and a grandson of my dog was BIS at Westminster.

The point made is that we must take responsibility for the dogs we breed and should not “throw the baby out with the bath water”. Be objective, learn all you can, communicate with other breeders and do your research. Know more about the dogs in pedigrees than their names and learn how genetic traits, disorders and diseases are passed down through the generations. If you are new to the breed, slow down enough to meet and talk to long time breeders, picking their collective brains on the dogs they have first hand knowledge of. The care you take with your first breeding will impact the breed as a whole for generations to come – think about it!

As members of NTC, we owe it to our breed to take responsibility for the health of our small gene pool. Diversity becomes more important, but that too must come from the knowledge of what comes before. Just because you are not breeding to a dog that is closely related to your dog, the breeding can still harbor the genes that produce health problems. On the other side of that fence is the stud dog or brood bitch that, like my Min. Schnauzer is truly genetically healthy and can improve the gene pool in a healthy way, whether it is line bred or out crossed.

The best plan is to take the time to first, test your dog for known health issues and communicate with the owner of your stud dog of choice to ascertain what health testing has been done on that dog. Ask the owner of the stud dog what/where the health issues are in the dogs behind the stud dog. Additionally, as the owner of the stud dog, ask the breeder the same questions – what health tests have been done, what are the results, and what health issues is the breeder aware of in the pedigree of the bitch. Whether you choose to register your dog with one of the health registries or not, you do owe it to your breed to at least test for known health issues before breeding. The Norfolk Terrier Club has identified what it believes are the top 3 health concerns for Norfolk Terriers: Eyes, Heart and Patellar Luxation. Many kennel clubs now offer reasonable Eye and heart testing at their shows. Though these two tests must be performed by specialists, Patellar Luxation is a very simple test that may be performed by your local veterinarian.

Lastly, when you place a Norfolk please identify the tests you have had done on the dog and what testing should be done in the future. Establish early on with the buyer that you want to remain in communication with them for the life of that dog and assist the buyer in identifying a reasonable health testing plan.

Resources:
Canine Health Information Center (CHIC)
Orthopedic Foundation of America (OFA)