

A Letter for Your Veterinarian

Clumber Spaniel Club of America

Roe Froman, DVM

Dear fellow veterinarian,

Welcome to the world of Clumber spaniels. Largest of the spaniel breeds, Clumbers are generally quite easy going. We would like to help acquaint you with some of the more unusual, as well as the common problems your Clumber patients may encounter.

Clumbers are one of the first ten original AKC breeds, but their numbers are few. We work with a limited gene pool and are striving to improve the health and soundness of our dogs. Great progress has been made in the past decade.

Due to their thick ear leather and heavy, low-set ear, **ear infections** are not unusual. Routine cleaning can help to minimize problems. Clumbers who suffer from recurrent ear infections should be evaluated for possible food hypersensitivities.

Clumber eyelids are often "v" or diamond shaped, in accordance with the breed standard of conformation. Entropion may occur, but minor deviations of the lids may require only monitoring until full head maturation is reached (about two to three years of age). Ectropion is also sometimes seen, but care must be taken not to confuse the normal, diamond shape of the lower lid with ectropion. A properly shaped Clumber lid will often be looser than other breeds. Haw often shows. The proper lid, while loose, should not roll in or out, but drooping in and of itself is not unusual. Clumbers are supposed to have a lot of loose skin on their heads and faces.

Eosinophilic panosteitis is not unusual in growing Clumber pups. Like other large breeds, too rapid growth may play a role in this shifting leg lameness. EoPan is the most common cause of lameness in Clumbers between six to twelve months of age, when there is no evidence of injury. Shoulder or elbow abnormalities (OCD, ununited anconeal processes or fractured coronoids) should of course always be ruled out. Eosinophilic panosteitis is self-limiting and resolves once bone growth is complete. EoPan may also present as an intermittent hind leg lameness. **Elbow fractures** may occasionally be seen, secondary to incomplete closure of the humeral condyles. These fractures are severe and require the care of a skilled orthopedic surgeon.

Hip dysplasia is not uncommon in the breed. Their substantial bone and heavy rear musculing often seem to minimize overt clinical signs in Clumbers, even though their radiographs may show changes which could be crippling in other breeds. Clumbers are a chondrodystrophic (dwarf) breed and have an acetabular conformation which is naturally shallower than that of retrievers, Rottweilers, or German shepherd dogs.

Chondroitin sulfate/glucosamine supplements such as Dasuquin have frequently proven useful in managing Clumbers with hip dysplasia. Clumber pups should be raised on a large breed puppy food, and excessive weight gain should be prevented.

Clumber spaniels are worse than Labrador retrievers when it comes to **foreign body ingestion**. They will, and do, eat anything – unfortunately sometimes necessitating surgery. It is imperative that owners understand this tendency, and constant, careful supervision is essential.

The long, low body structure of the Clumber may predispose them to **intervertebral disc disease**. Both cervical and thoracic disc problems may occur. Medical or surgical therapies can be of great benefit. Immune mediated hemolytic anemia (IMHA) is a serious disease which has been encountered in Clumber spaniels. Since sulfa drugs have occasionally been suspected as a trigger in autoimmune conditions, it is best to avoid them in Clumbers.

Hypothyroidism is not unusual in Clumbers. We recommend the thyroid panel at Michigan State University College of Veterinary Medicine. Elevated autoantibodies are often a precursor to full blown hypothyroidism. If autoantibodies are present, we recommend a retest six to twelve months later. Some Clumbers will do better on the brand name Soloxine instead of generic thyroid supplements, but many do well on generics.

Rarely, **portosystemic (liver) shunts** have been reported in Clumbers. They may present typically, as young pups who begin to suffer neurological problems at weaning. Importantly, there are also a few case reports of adult (18 months to 4 years) Clumbers with late onset seizures and no prior clinical signs. Liver shunts in Clumbers have most often been extrahepatic (the reverse of most large breed dogs), and frequently amenable to surgical correction.

There have been occasional reports of punctate cataracts. These minute opacities in the lens in no way interfere with vision. They are not progressive. PRA (progressive retinal atrophy) has been reported rarely.

Cardiomyopathy is an uncommon but reported condition in Clumber spaniels.

Pyruvate dehydrogenase deficiency is a rare condition in Clumbers. It is a deficiency in the PDP1 enzyme, which regulates PDH. PDP1 deficiency in Clumbers leads to a profound exercise intolerance (affected dogs may present with the complaint that they cannot make it through a daily walk of a few blocks). It is a simple recessive trait, and a DNA test is now available. Carrier dogs should not be bred to other carriers but may safely be bred to clear dogs.

It is quite common for young female Clumbers NOT to have their first estrous cycle until they are 12 to 14 months old. This is not unusual and should not be cause for concern. Some Clumbers are natural whelpers, but uterine inertia may necessitate cesarean section. Anasarca (water puppies) is also known to occur in the breed.

Anesthesia in Clumbers should be straightforward, given normal precautions. Ketamine/Valium/Isoflurane or Propofol/Iso are both reasonable protocols. Rarely, excessively short muzzles or an elongated soft palate may make anesthetic recovery a bit more comparable to brachycephalic breeds.

Clumbers are in general a gentle, stoic breed. Their calm, accepting nature makes them enjoyable patients. If I can be of any assistance, or if I can answer any questions, please do not hesitate to contact me.

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