





Willa, adopted by Belinda Brzezinski and Tim Mascorella of Java Center, N.Y.

cgmagazine

The Magazine for Greyhound Adopters, Owners, and Friends Vol. 9; No. 3 Fall 2004

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Eight-year old Apollo (BDK's Apollo) lives with Sarah Regan Snavely of Bowman, N.D.

Back Cover

Bernie was adopted and loved by Dan and Lauren Emery of North Yarmouth, Me. Recently, he lost his battle with cancer (see In Memoriam in this issue).



Annie, adopted by David and Kathy French of Woodbine, Ga.

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EDITORIAL COMMENTS

By Cindy Hanson

Earlier this year, my household marked a milestone: All three of my Greyhounds are now in double digits. Herman and Hattie are 10 years old, and Hannah is 11. Aside from a couple of corns and a (very) few missing teeth, they're in great shape. And I feel pretty lucky.

Still, as they enter their autumnal years, I find myself wondering what path eventually will lead them from me. Will it be a slow journey on a winding trail, or an unexpected tumble over a steep precipice? Will I be a navigator, or a bystander? What will I do? I don't consider these questions dark. Certainly they are a product of my love for these dogs, which is sharpened by my knowledge that our remaining time together is limited. Truth be told, these questions are also a product of my fear. I have not yet lost a pet. I know my grief will be considerable. Will occasional contemplation of these questions help prepare me for the impact of the inevitable? I don't know. I hope so. I can't help but think we grow stronger when we face our fears.

One of the biggest fears for most Greyhound owners is diagnosis of cancer in their beloved pets. In this issue of CG, we confront the issue of cancer and find much to celebrate: the hopeful and inspiring stories of long-term cancer survivors; the ingenuity of researchers and caregivers who are broadening our range of treatment options and our understanding of the disease; the courage of Greyhounds with cancer and the human companions who care for them; and the compassionate communities of Greyhound owners that provide support and comfort to those whose worst fears are realized.

By facing our fears, we find strength. When we confront the possibility of illness, we can explore new and better ways of healing. By acknowledging the inevitability of loss, we celebrate life. Even if our four-legged companions are young and healthy, these are compelling reasons to turn our attention to the difficult topic of Greyhounds and cancer.



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They Didn't Chew the Magazine

In response to Lisa Stringer's letter (CG Readers Speak Out, Spring 2004 CG), I am quite the opposite. I've been adopting ex-racers for almost fifteen years and although I knew Celebrating Greyhounds Magazine existed, I was never a subscriber until your Fall 2003 issue. It came out at a most unique time, for I'd just adopted a 12-week old puppy in October and really knew nothing about what I was getting myself into! I am so thankful that you saw a need to educate those of us who have graciously taken in a puppy from an "oops" litter or a pup culled due to a slight birth defect or "runt" status. Unfortunately, although there are a lot of retired racers awaiting good homes, there are also many, many pups out there from breeding litters that never make it to training. We put on our blinders to these pups, and pretend that five or six registered racers out of one litter is the real number of pups born to that Mom.

I currently have three Greyhounds: a 13-and-a-half year old, a 6-year old, and the 8-month old. They are all special, but it's been particularly interesting watching the puppy grow up. We've had sleepless nights, worming problems, a fractured tibia, histiocytomas, chewed furniture, and countless destroyed shoes. But the puppy kisses I get every evening when I come home from work make it all worthwhile. Thank you, CG, for coming into our lives at just the right time with your sound advice and humorous approach to living with a Greyhound puppy.

Patti Bruch Springfield, Va.

Learning from our Greyhounds

As always, I enjoyed my recent copy of CG Magazine. I thought I'd share some reasons I suspect many of us speak or act less wisely than we would at other times with respect to Greyhound adoption (Editorial Comments, Spring 2004 CG). It is my humble opinion that many of us take the Greys on as our fur kids, whether we knowingly do so or not. Can you imagine telling a parent how to raise her child? Many of us know that is not a line to be crossed, but forget that line in the sand when we are working with the dogs. Many of us act like mothers protecting our young. Our big open hearts also make us not so easy.

In our society we see road rage, and out-ofcontrol parents at our children's little league games. At work, we laugh about "(parking) ramp rage," or speak of going "postal." That we preach diversity of cultures is admirable, but maybe



They grow so fast! Cammi, the puppy who graced the cover of our Fall 2003 issue, is just as charming at 2 years of age. Kate Bressler

because so many of us look "the same," we don't expect or accept diversity among those of us with less obvious differences. I'm lucky that when I have felt unwelcome at an organization's event, my dogs still jump up with kisses to all who would allow it. They are the best ambassadors. I try not to take things personally, but can so readily identify with coming home from an event and feeling beaten up for showing up. Fortunately my dogs remind me every day about getting over myself and continuing on.

You are appreciated more than any of us ever say. Keep up the good work.

Carole Oinonen Via E-Mail

Aw, Shucks

I just wanted to take a few moments to let you know how much my family enjoys your magazine. We have four daughters who can't wait until the next issue comes so they can compare the articles to our Greyhound Boomer and his little whippet sister, Jesse. The entire family volunteers with Greyhound Pets of America/Northern Virginia bringing awareness to Greyhound adoption in the Northern Virginia area. Anyhow — thanks for sharing an excellent magazine with our family.

Jim Lantzy Sterling, Va. Thank you for your letters (up to 300 words) and photographs. Please send letters and photos by mail to Celebrating Greyhounds Magazine, Attn: Editor, PO Box 120048, Saint Paul, MN 55112. Letters sent via e-mail to editor@adopt-agreyhound.org are also appreciated. Please include your home telephone number if you would like your letter to be considered for publication. Letters may be edited for brevity and/or clarity.

We regret that we cannot publish every letter or photo. \blacksquare



Patti Bruch's puppy, Camden.

The Life of an Athlete

Greyhound, the Life of an Athlete Reviewed by Karyn Zoldan track with voiceover, the video reveals that the dogs begin racing at 18 months of age, and that each dog develops his own racing person-

ality. The racers, which

weigh between 60 and

80 pounds, enjoy vita-

min-enriched special

diets. On race days,

dogs are weighed twice

before their event. The

three top-winning dogs

are checked for foreign

substances. According

to track personnel at the

Multnomah Greyhound

Park, races are limited

to eight dogs per race.

This limit reduces

Greyhound, the Life of an Athlete (video, 37 min.) Siobhan Crespo, Director Brava Films

Tumwater, Wash. \$19.95

reyhound, the Life of an Athlete is a **▼**fast-paced, lighthearted romp from precocious puppyhood to beloved couch potato.

The film begins at an Oregon Greyhound racetrack as the camera pans rows of muzzles, dog tags, and colorful racing blankets while a lively soundtrack builds excitement. The story is mainly told through voiceover, with brief interviews from breeders, gamblers, track personnel, adoption coordinators, and volunteers. And what would any Greyhound story be without a chorus of enthusiastic rooing?

Combining behind-the-scenes footage at the

opportunities for collision. However, gamblers prefer nine dogs per race, which offers a better payout.

From the track pomp and circumstance to the sheer thrill of watching the dogs run, the film segues to Greyhound history. The film shows this breed as part of Egyptian murals, the evolution of racing from crowd-gathering lure coursing in 18th century Oxford, England, and the sport of dog racing today, propelled by the modern invention of the mechanical lure.

From history, the film transitions to contemporary breeding farms, where puppies resembling clumsy lambs grab your heart to the tune of raucous ragtime music. I was tempted to reach into the television and snatch those pups right off the screen. All three breeders interviewed spoke of diminishing returns and how tough it was to make ends meet. Most have been in the business from ten to 20 years. One breeder who is also a full-time fireman said for 18 of his 20

years in the breeding business, he has shown a tax loss. In contrast to pet owners' beliefs about keeping these dogs indoors, at least one breeder interviewed considers Greyhounds to be outdoor animals, or livestock.

Filmmaker Siobhan Crespo is a Greyhound owner (Home for Hounds/Waldport, Ore.), and it shows. His camera excels in framing the elegance, the energy, and the allure of all things Greyhound. Though not a comprehensive learning tool for new adopters, the self-financed video offers a well-executed glimpse into the life of a working Greyhound. The film is neither politicized nor romanticized; it contains information useful to all viewers, regardless of their feelings about Greyhound racing.

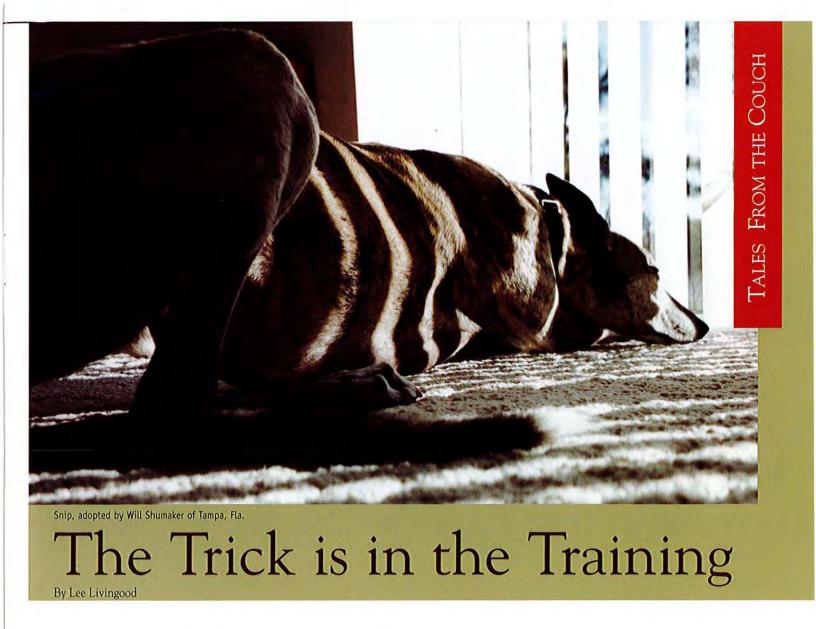
Every Greyhound who ends his racing career at Multnomah Greyhound Park, if not returned to the breeding farm, enters the adoption kennel and remains there until permanent placement. Three adoption groups take charge of the placement. Here I admit to tears of happiness as I watched volunteers speak earnestly about the joys of Greyhound ownership. Even Maggie McCurry of Wings for Greyhounds makes a cameo appearance with her friend, actress Linda Blair (The Exorcist).

My favorite vignette features an active, elderly man who tells how he coincidentally adopted his first hound, named Buffalo. Soon thereafter Biker, Yanny, and Whitney, the senior, raced into his life.

The film ends aptly with a celebration of Greyhound Planet Day, where volunteers walk their head-turning "skinny" athletes through a crowded park of inquisitive admirers who gather to interact and pet these wonderful sighthound ambassadors. And the roo goes on.

To order the video, visit http://bravafilms.com/ greyhound/ or call (360) 705-3994. ■

Karyn Zoldan is a CG copy editor.



ne of the reasons so many of us choose retiring Greyhounds is because they are so mellow and don't need a great deal of exercise. But we often fail to consider that we have taken in a retired professional athlete who is now unemployed.

While Greyhounds aren't high-intensity working dogs, they are nonetheless living, breathing creatures who need physical and mental activity and a sense of relationship with their humans. In other words, your dog needs a job.

A dog trainer acquaintance of mine has a plaque that reads, "An unemployed dog will quickly become self-employed," to which I've added the proviso, "and you won't like his career choice."

Age is no excuse. I've had a Greyhound in my class who was ten-and-a-half. She was a retired brood mama who had been off the farm for only several weeks when class started. And she was the star of the class. She worked rings around the other Greyhounds. So don't use your dog's age as an excuse for not finding things to keep him busy.

Let's look at some fun things we can do to help him find the right retirement career. I've tried to pick a few simple tricks like Take a Bow, Salute, Crawl, Yes/No, and Shell Game that don't require that you teach your dog to sit. But you will need to spend time teaching some foundation behaviors.

On Your Mark

I use a reward marker for training, so you will have to introduce that. Since I'm not trying to turn any of you into dog trainers, I'll cheat a bit on the purist version of clicker training and I'll over simplify some of the basics to give you just enough to get the job done. Feel free to use a real clicker if you want, but to keep it simple I'll use the word "click" here to illustrate the point at which the reward marker (word or sound — not to be confused with the treat) is presented to the dog.

A reward marker is extremely important. Generally, you have only about one second to reward (or punish) a behav-



Isaac, adopted by Praveen Mutalik.

ior your dog is exhibiting or your dog has no clue what you are rewarding (or punishing). While at first the treat must immediately follow the click, later you can extend the time between the click and the treat. Using a clicker allows you to extend that time a bit so even if your dog is across the room when you click, he understands that what he was doing at that instant is the behavior for which you are rewarding him.

You can find more detailed information on how to introduce and use the reward marker/clicker in *Retired Racing Greyhounds for Dummies*, or at www.clickertraining.com or www.clickandtreat.com.

First and most important, you'll need a generous supply of small, soft treats. Soft cat treats, tiny pieces of soft dog treats, or small pieces of lean roast chicken or beef work well. The treats need to be small and soft so your dog can eat

them quickly, otherwise you'll disrupt the flow of your training. The treats shouldn't be any larger than a piece of cereal.

The second most important thing you need is a quiet, distraction-free area inside your home where you know your hound is comfortable and at ease.

Gather up your dog and a supply of those yummy treats and head for the training area with your hound.

Put one treat in your hand and put your hand behind your back. Give yourself a second to get yourself calm and still, then quickly and distinctly say Yes! Silently pause for a second (say "one thousand" to yourself), then deliver the treat to your dog. It's important that you force yourself to pause, because we tend to anticipate the physical movement and move our hands before we speak. That means your hound will be watching your hands

instead of listening to the Yes! Do about ten repetitions.

Don't worry if your dog is standing, looking at you, or sitting. This is about getting him to associate the sound of the reward marker Yes! with the delivery of the treat.

After your ten repetitions, simply let the dog wander off for a moment. Say Yes! again. Does he perk an ear or turn toward you? Great. You're on your way. Go to different places around the house and do more repetitions. Try this when your back is turned to your dog, when you are sitting, or when he's across the room. Toss the treat. Deliver it from the other hand. Mix things up so it becomes clear to him that the only important thing in the picture is that Yes! said in the distinct tone that means a treat is coming.

If he doesn't respond after the first ten repetitions, try another ten. If he still isn't picking up

on it, wait a bit and repeat this exercise. Some dogs pick it up in as few as five clicks. Others may need more than a hundred repetitions before they begin to associate the sound with the delivery of the treat.

Once you've taken time to teach him a reward marker, you've increased the ways you have to teach a new behavior. For instance, if you want to teach a bow, you can simply catch him as he does a play bow. You click him with the Yes! and give him a treat. Before long, he'll start to offer that behavior to get you to click. You can teach a down the same way — all from the comfort of your sofa.

While there is a lot more to clicker training than I've covered here, one of the most important things you need to know is that you *must* treat any time you click — even if you click at the wrong time or click by accident.

Get Ready

Of course you'll need to have that generous supply of yummy treats handy.

To teach the bow you may need to use a towel or scarf to keep your hound from lying down. You'll need some paper first-aid tape for the Salute. For the Yes/No, use something like a small stick or an old pen, and some peanut butter or other smelly soft food you can dab the stick into. And for the Shell Game you'll need three identical cups or old cans (washed and checked for sharp edges).

Get Set

You should begin teaching any new skill in a quiet place. Work in a carpeted area so your hound will feel more comfortable and secure. Work with only one animal at a time. If you have more than one dog or if you have cats, they'll need to be in another room or physically separated from you in some way. As your hound learns these behaviors, you can begin to increase the distractions and change the locations.

Remember that any time you change the environment — new people, other dogs, new location — you are increasing the difficulty. You may have to re-teach some things you thought your dog knew. It takes a lot of practice in a lot of different places before a behavior is well-learned, so be patient with your pal and set him up to get it right by gradually making the environment more distracting. In other words, don't teach this only at home and then expect him to

be the star of the trick contest at the next reunion picnic.

Keep your sessions short. One to three minutes at a time is all you need. It's a great way to kill time during commercials. Longer sessions are boring for you and your hound.

Go

Take a Bow

Depending on your size and the size of your hound, you may need a helper and a towel or scarf. Kneel by your hound's side. Hold a treat in one hand. Place your other hand under his belly as shown in Figure 1. Place the treat at your hound's nose and slowly bring it from his nose to the floor near his chest. As soon he lowers his front torso to get the treat, click and treat him. Use your other hand to keep him from lying down.

Gradually increase how long he holds the bow by waiting longer to click. Once he seems to have the idea, begin saying *Take a bow* as you lure him into it. Gradually fade your hand signal so he bows on a verbal signal.

If your dog is too long or too big to handle this way, get a helper to hold a towel around his belly, while you lure your hound into the bow.

If your hound won't follow the treat, simply catch him as he does a play bow or takes a stretch after sleeping. As he starts to bend, say Take a bow then click him as soon as his front torso is about to hit the floor. Once he's been clicked and treated many times for bowing, it should be easier to get him to do it in response to the lure.

Salute

Place a small piece of paper tape on your dog's forehead as shown in Figure 2. When he raises his paw to get rid of it (see Figure 3), click. Say *Salute* as he puts his paw up to his forehead. Click as his paw is about to touch his head. Gradually decrease the size of the tape until he'll salute without the tape on his forehead.

Yes/No

Pick up that old pen and dip it in some smelly peanut butter. Show it to your dog (Figure 4). When he looks at it, move it straight up and down so if his eyes follow it his head is nodding Yes. As you do this, nod your head Yes (just once). In time, use just the pen with no peanut butter. Later fade out the pen so your head nod is all it takes to get him to nod Yes. Do the same thing to teach No — simply change the motion from an up and down nod to a side-to-side shake (Figure 5).



Figure 1: Take a Bow.



Figure 2: Place a piece of paper tape on your dog's head...



Figure 3: And he will try to get rid of it. Salute!

Shell Game

While dogs have a sense of smell so much better than ours, very few have learned how to use their noses effectively. Shell Game is entertaining to watch, provides mental stimulation, and gives your dog a job related to his natural abilities.

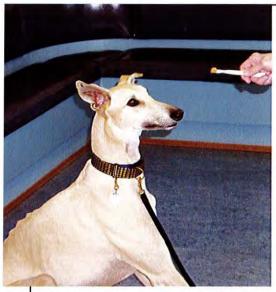


Figure 4: Move the pen up and down, and his eyes will follow. Does he appear to be nodding? Yes!



Figure 5: Move the pen from side to side, and he appears to be shaking his head No.



Gatsby and Whisper, adopted by Danielle Ring and Jim McNerney of Falls Church, Va.

Place three identical opaque containers on the ground (lightweight cups or empty cans work well). Show each container to your dog as you place it on the ground. Show him a really smelly treat. I like fish-based cat treats or dog treats like Yummy Chummies™ for this, since they tend to have a high smell value.

Pick up one of the cups and place the treat under it. Tell him Find it. As he nudges the con-

tainer, click and lift the container to reveal the treat. In time he'll get the game and find the treat immediately. At that point you can begin to move the cups around so he can't tell by sight where the treat is. When he noses the container with the treat, click and lift the container so he gets the treat. In time he'll identify the container with the treat with no more than a cursory sniff at the other containers.

Once you teach this trick, you can also use these skills to let your dog find his dinner. You can stuff Kongs with kibble and a bit of peanut butter or similar soft tasty item and hide them. At first put the Kongs almost in plain sight. Take your dog to each one and as you get to it, say *Find your dinner*. As he learns the game you can use a bit more ingenuity to hide the Kongs.

And the Winners are . . .

You and your Greyhound. Teaching tricks is a great way to foster a great relationship and to just have fun. And there are some not-soobvious side benefits. If you have a more active hound and get a spell of bad weather, or your dog can't get a lot of exercise because of health issues, tricks and nose work can be a great alternative. If you are interested in taking your retired racer into nursing homes or doing other kinds of therapy work, tricks are a great way to break the ice. People adore dogs who do tricks. And if you have a large dog like a Greyhound, it's an easy way to help your Greyhound seem warmer and friendlier to someone who might otherwise be afraid of a larger dog.

So get started and have fun.

Lee Livingood is a CG regular contributor and the author of Retired Racing Greyhounds for Dummies.

Resources for teaching tricks using clicker training and other positive methods:

Broitman, Virginia, and Lippman, Sherri. *Take a Bow* . . . Wow! Fun and Functional Dog Tricks. Doswell, VA: Take a Bow Wow, 1996. Video, 34 min.

Broitman, Virginia, and Lippman, Sherri. Bow Wow Take 2. Clever Tricks and Advanced Skills. Doswell, VA: Take a Bow Wow, 1997. Video, 38 min.

Coile, D. Caroline. Beyond Fetch: Fun, Interactive Activities for You and Your Dog. New York: Howell Book House, 2003.

Hunter, Roy. Fun and Games with Dogs: Educational and Fun Games to Teach Your Dog to Enjoy Working With You. Eliot, ME: Howln Moon Press, 1997.

Hunter, Roy. Fun Nosework for Dogs: Teach Your Dog to Enjoy Using His Nose (2nd ed). Eliot, ME: Howln Moon Press, 2003

Hunter, Roy. More Fun and Games with Dogs. Eliot, ME: Howln Moon Press, 1997.



Fawn the Greyhound watches out for her feline friend, Diane. Gayle Mayberry

Fawn Saves Her Feline Friend

By Gayle Mayberry

ecember 23 became memorable for my husband and me in 2002 when our granddaughter was born on that date, so on December 23, 2003 we were in the middle of birthday and Christmas celebrations and it was a very happy time. We never imagined when the day arrived that it would later become noteworthy for a different reason.

We have four Greyhounds. When we adopted our first, Fawn, we intended to have only one dog. Somehow, we always managed to come up with a good reason for "just one more," until we had added Liz, Felicia, and Ocho to our family. We also have three cats. In November 2003 Diane, our 11-year-old cat, was diagnosed with diabetes, which she probably acquired as a result of steroids she received for a skin condition. She was placed on twice-daily insulin injections. Our veterinarian warned us that a diabetic cat's pancreas can sometimes suddenly begin producing insulin again and that we should watch her carefully for any signs of hypoglycemia (low blood sugar). He wrote out a list of symptoms to watch for, the most alarming of which were seizures.

On the evening of December 23, Fawn and Liz were downstairs. Felicia and Ocho were upstairs in my home office with me. Tom, my husband, was upstairs in his home office. I heard barking downstairs. I made a halfhearted attempt to get the offender's attention: "Who's doing that barking?" I yelled. The racket continued. Tom went downstairs and saw that Fawn was barking, but he found nothing amiss. Diane was lying asleep on the heating vent, which she likes to do in the winter. Liz followed him back upstairs, and he figured that would take care of the problem. As soon as he got back upstairs, Fawn's incessant barking started again. Any barking from Fawn is unusual, but this continued behavior when she was alone in a room without people had never occurred before. Tom went back downstairs. Fawn was standing in the middle of the room with one of Liz's toys in her mouth, shaking it furiously. Fawn does not normally play with toys and picks one up only if she is excited or nervous about something. Tom noticed that even with all the commotion, Diane had not moved from her spot on the heating vent. He went immediately to her and picked her up. She was totally limp.

Tom shouted upstairs to me that he thought Diane had had a seizure.



Misty, adopted by Janice and Tom Cleveland of Cedar Knolls, N.J.

Within the ten minutes it took us to get to the veterinarian's office, Diane had two more seizures in my arms. Our veterinarian later said that when we rushed her into the clinic, at first glance he thought she was dead. He quickly administered a solution of 50 percent dextrose. She began to revive, but she was still very unstable. Diane spent Christmas in the veterinary ICU while they tried to get her blood sugars under control. She came home four days later, very weak and having lost a significant amount of weight, but finally stable.

As 2004 arrived, Diane slowly began to recover. By mid-January she was off of insulin and returning to her old self, running through the house and playing, climbing up on my chest in the evening to nap, and begging Tom to pick her up and cuddle her like a baby.

We have had Diane since she was a kitten. If not for Fawn's persistence that night, she would have died lying alone on the living room floor, and we would never have forgiven ourselves for not being there when she needed us.

Fawn has always been a very special dog to us, with a sweet personality, awareness, and sensitivity. With her actions that night, she became one of our heroes. ■

Gayle Mayberry lives in Lexington, Ky. with her husband Tom, Greyhounds Fawn, Liz, Felicia, and Ocho, and cats Sam, Diane, and Woody.



Kirby, adopted by Russell and Dana Laggan of Redford, Mich.

The "C" Word

By Jim Bader, DVM

The word cancer strikes fear into the heart of all Greyhound owners. It seems every Greyhound owner has been touched by *cancer*, either through his own dog or that of a friend. How is cancer diagnosed? As a veterinarian, how do I approach an owner after diagnosing his Greyhound with cancer?

The word *cancer* is derived from the ancient Greek and Latin. Cancer is described as far back as the 5th century BC, and mummies with cancers of the bones or soft tissues have been unearthed. The word cancer actually means "crab" in Latin. The crab is a metaphor for the central tumor with the radiating veins, which resemble the crab's legs and claws. The ancients recognized cancer's ability to spread throughout the body, as well as their inability to treat it. The ancients also recognized that some treatments were worse than the disease, actually causing more suffering than the disease itself. Cancer became so feared that people would not tell friends of their diagnosis, and they would hide from the public for fear of being scorned. The concept of cancer as a reason for ostracism persevered until the late 20th century, which saw the advent of better diagnostics, chemotherapeutics, radiation, and improved surgery skills. We know now that cancer is a treatable and beatable disease on many fronts, and need not be feared.

Diagnosing cancer can be very simple or very complex. The simplest diagnosis is made if the actual tumor is visible or obvious. The veterinarian can perform a fine needle aspirate on a tumor and examine it under a microscope in a matter of minutes. Another way to diagnose cancer is with a biopsy of the lesion. A small piece of the tumor is removed and preserved in formalin for a pathologist to examine. The amount of tissue removed depends on the area. With a skin tumor, for example, the veterinarian may remove the entire tumor. The goal of the subsequent examination is to determine if the entire tumor has been removed. In the case of a tumor on an organ, just a piece may be removed and sent to a pathologist. All tumors that are removed should be sent to a pathologist for evaluation; if it is important enough to remove, it is important enough to be evaluated.

The most difficult tumor to locate is the tumor that causes a paraneoplastic syndrome, a condition in which the tumor produces a hormone-like substance that disturbs the balance and health of the patient. The most common paraneoplastic syndrome is ele-



Emmett, adopted by Amy Wanken of Columbus, Ohio.

vated blood calcium from lymphoma. The lymphoma produces a hormone that the body recognizes as parathyroid hormone, which regulates blood calcium. Symptoms include lethargy, weight loss, and usually increased water intake and urination. The elevated blood calcium is evident through bloodwork. Then the search is on, because there are several causes of elevated blood calcium, including lymphoma, anal gland tumor, kidney disease, and blastomycosis (a fungal infection). Further diagnostic tests are warranted to isolate the cause and source of the problem.

After diagnosis, the veterinarian must stage the patient. Staging consists of a total evaluation of the Greyhound, including examination of laboratory data and radiographs. The veterinarian and owner should then discuss the treatment plan, reasonable goals, and possible side effects. This discussion is critical. I want clients to be educated, informed, and prepared to do what they feel is best for their Greyhound.

Diagnosing cancer in a patient is usually a straightforward procedure. What is not simple is telling the Greyhound's owner. As a veterinarian and a pet owner, I know what it is like to be on both sides of the exam table. It is difficult to tell a client, and it is difficult to hear the message.

When I diagnose a patient with cancer, I feel there is no way to sugarcoat the diagnosis. I present the message in the most direct way possible. My next step is to answer any questions the owner may have. He usually does not have many questions at first, because the news is such a shock. I describe how the disease will progress and what can be done to bring about a cure or remission. I immediately refer some cases to a specialist, if the owner is receptive. The most important step in this process is to schedule an appointment for one to two days from the first visit, to give the owner time to absorb the news and collect his questions. At the next visit, we discuss the owner's questions and come to a conclusion about a treatment plan. As a veterinarian, I can only inform the owner of the various ways to treat the cancer. I cannot make the decision about treatment. Every owner has the right to do what he feels is best for his Greyhound. This may even mean no treatment at all. I tell the client a treatment plan can change; if at any time the Greyhound is not benefiting from the treatment, I respect the owner's decision to discontinue it.

As a pet owner, I have had several animals diagnosed with cancer. The tightness I feel in my stomach as I review and interpret my pet's laboratory results or radiographs is excruciating. The emptiness that comes with having to tell my wife and children rips at my heart. My mind is racing: Did I miss something? Am I right? How did I not see it earlier? I know the facts about treatment and hope my Greyhound will be the exception to the rule and be cured, but as a veterinarian, I have to acknowledge reality. The pet owner side of me always has hope; the veterinarian side faces the facts. The owner side also cautions the veterinarian side from doing too much, and I am reminded that the first rule is to do no harm.

We know cancer can be devastating. This is why some owners do not have their Greyhounds checked immediately after suspecting a problem. (Owners often treat themselves the same way.) Facing the reality of the situation is not easy. But early detection offers the best chance for a cure.

Here is an example. I examined a Greyhound named Moe on a Monday morning. His owners had noticed a small mass on his ribs on Friday, and the mass had doubled in size over the weekend. I performed a fine needle aspirate, diagnosed a sarcoma on a rib, and referred him to a specialist for surgery to resect the rib. He had surgery on Tuesday, came home on Friday, and has been disease-free for three years. Another example of successful early detection involved Fire, who underwent surgery to remove a Grade II mast cell tumor ("Lumps and Bumps — Friend or Foe?" Spring 2003 CG). Fire has also been disease-free for three years.

If your Greyhound receives a diagnosis of cancer, ask as many questions as possible. Some cancers can be beaten with early detection and appropriate treatment. For the cancers that we cannot defeat, be your Greyhound's best friend when you decide on a course of treatment.

Dr. Jim Bader is a CG regular contributor.

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Patterson, James T. The Dread Disease: Cancer and Modern American Culture. Cambridge: Harvard University Press, 1987.

New Research on Corns and Warts in Greyhounds

Ilaria Borghese, president of Thera-Paw Inc., reports that a new study is underway to gain a better understanding of the causes of corns and warts in Greyhounds (see "Corns and Warts: Definitions, Causes, and Treatments, Fall 2003 CG). In collaboration with Drs. Steven F. Swaim and James C. Wright at Auburn University's College of Veterinary Medicine, Borghese is collecting data on Greyhounds, including general health, diet, living situation, and medical conditions. The goal of the study is to provide insight into the causes of corns and warts that will inform future treatments of the condition.

Participation in the study consists of completing a questionnaire for each of your Greyhounds. The questionnaire takes about 10 minutes to complete. Results will be summarized to ensure that responses remain anonymous. Since the research will consider differences between Greyhounds who have corns and warts and those who do not, the researchers ask that you consider responding to the questionnaire even if your Greyhound does not have corns or warts.

You can find the questionnaire online at www.therapaw.com, or call 1-908-542-1342 and ask that a copy of the questionnaire be mailed to you.

Purina Circles Program Benefits Greyhounds

The AKC Greyhound parent club, The Greyhound Club of America (GCA), has been privileged to be the recipient of monies as part of the Purina Parent Club Partnership Program. This program, set up by Purina, is based on weight circles collected from Purina dog foods and sent in by Purina Pro Club members. Each Pro Club member who designated Greyhounds as their breed and declared for the Purina Partnership Program resulted in a credit to GCA. Pro Club members donating these circles come from a diverse Greyhoundowning public.

On March 12, 2004, the GCA received a check for \$17,173.03 from Purina while at the same time Purina sent an equal amount

of money to the AKC Canine Health Foundation for use in whatever research fund or funds the GCA chooses to sponsor. The agreement with Purina states that the money "shall be used to support canine health, rescue, and educational efforts to positively impact the general well-being of the breed."

This large sum of money gives the GCA a unique opportunity to positively impact various Greyhound programs. In addition to rescue and support of health research for Greyhound-specific diseases, they are contemplating various education programs as part of the use of these monies. The GCA plans to open participation in the education programs to everyone interested in attending and will publicize them in various venues. These programs should include speakers and workshops at various locations throughout the US. Programs may cover various Greyhound health issues, obedience training techniques and workshops, lure coursing and show ring training, and judging workshops. GCA will also use these monies for the development of educational materials.

With the ongoing support of the Greyhound-owning public the GCA hopes to expand on current programs, as well as establishing and continuing new beneficial programs for many years. — Sheryl Bartel

PETCO Lends a Paw to Greyhounds Nationwide

In 2002, PETCO established an in-store fundraiser in conjunction with Greyhound Planet Day. For an entire weekend in September, PETCO strives to raise funds and



PETCO supports Greyhound adoption.

awareness by encouraging customers to make donations or "round up" their purchases to benefit Greyhounds. The 2002 drive raised \$54,000 for Greyhound-focused organizations. The 2003 campaign exceeded that amount by 32%, bringing in a total of \$71,291.

PETCO has even higher hopes for 2004, as the fundraiser for Greyhound Planet Day (September 19, 2004) has been extended to an entire week.

For information about how your adoption group can apply for support, please visit www.PETCO.com.

Free CG to Adopters of Special Needs Greyhounds

Do you know someone who has adopted a special needs Greyhound? If so, tell this Greyhound lover that he or she is eligible to receive a free copy of Celebrating Greyhounds Magazine. All the adopter needs to do is send a note to the Editor at CG Magazine, PO Box 120048, Saint Paul, MN 55112 or editor@adopt-a-greyhound.org. The note must include a description of the dog's special need, the name of the adoption group or other source of the dog, and the adopter's name and mailing address. (The special needs Greyhound is one who is at least 7 years old at the time of adoption or one of any age who has a special medical problem at the time of adoption.)

Clarification

In "Joint Supplements" (Spring 2004 CG), the dosage guidelines for glucosamine were explained as follows: "Typical dosage

guidelines for glucosamine in dogs are 500 mg for every 25 lbs in body weight twice a day." This should have read: "Typical dosage guidelines for glucosamine are 500 mg. for every 25 lbs. in body weight, to be taken daily. Usually the total daily dose is divided in two and morning given evening with meals to reduce any chance of stomach upset."



Ricci's increasing thirst was a sign that her pituitary adenoma had returned.

We're Off to See the Wizard Team

Ricci's Recurring Brain Tumor

By Marilyn A. Gaffney with Carolyn J. Henry, DVM, MS, DAVCIM (Oncology) Photos by Marilyn A. Gaffney

Ricci's original tale of treatment for a pituitary macroadenoma (brain tumor) began when she was diagnosed by the Wizard Team at the College of Veterinary Medicine at the University of Missouri-Columbia (MU) in May 2000 ("Ricci's Remarkable Diagnosis," Summer 2002 CG). After 19 radiation treatments, follow-up computed tomography (CT) scans indicated that the 1-1.5 cm mass had continued to shrink to virtual non-existence.

In January 2003, we noticed that Ricci was once again consuming large quantities of water and urinating frequently. These symptoms, polyuria/polydipsia (pu/pd), led to the diagnosis of Ricci's brain tumor in 2000. The tumor pressed on the hypothalamus, which controls thirst, causing Ricci to continually crave water.

Although we desperately wanted to attribute Ricci's extensive thirst to the dry winter air, we realized that an appointment to see the Wizard Team was necessary. (The Wizard Team, the group of veterinarians who provided exceptional care and treatment for Ricci, acquired its name during Ricci's initial radiation treatments. As we would begin driving to MU, I got in the habit of singing to Ricci "We're Off to See the Wizard," the only part of the song from the "Wizard of Oz" that I remember.) On March 31, 2003, a CT scan confirmed that Ricci's pituitary macroadenoma had recurred. The tumor was now about 2 cm, slightly larger than the size when the original diagnosis was made 34 months previously.

All of the veterinarians, including Dr. Jimmy Lattimer, Ricci's radiation therapist, were surprised by the tumor regrowth after such a lengthy period of remission. Two years of quality time is considered excellent, and Ricci had enjoyed 32 months post radiation.

Though several treatment options were offered, the decision was not easy. The options offered at MU were additional radiation therapy, chemotherapy, or palliative (pain relieving) therapy.

Retreatment with radiation therapy is not usually done. There is concern about the lack of stem cells to repopulate the tissue, as some stem cells may have been damaged during the first course of radiation therapy. Also, radiotherapists are afraid of necrosis (tissue death), and are usually dealing with a recurrence in a relatively short time frame of three to six months. Repeat radiation therapy has a higher risk of side effects, due to the possible damage of neurologic tissue surrounding the tumor. Plus, just because a tumor originally responded well to radiation does not mean the tumor will respond as favorably when reirradiated. Possibly the cells forming the recurring tumor are cells that were not eradicated by the initial radiation treatment. There is the risk that the cells creating the recurring tumor may be resistant to radiation. Dr. Lattimer had reirradiated four canines, but none of these had brain tumors. Little documentation is available. Reirradiation is unproven ground.

There are few chemotherapy regimes for tumors in the brain. Chemotherapy is usually administered in brain cancer as salvage therapy for recurrent or slowly progressing cancers in patients who have previously been treated. Many chemotherapy drugs do not cross the blood-brain barrier. The two chemotherapy agents that were offered as treatment options for Ricci were CCNU (also known as Lomustine or CeeNu) and BCNU (Carmustine).

CCNU is given in capsule form ideally once every three weeks. It interferes with the growth of cancer cells and eventually destroys them. Since the growth of normal body cells may also be affected by CCNU, other effects can also occur. Undesirable side effects can include gastrointestinal upset, bone marrow suppression, and elevated liver enzymes. Monitoring the white blood cell count is necessary just as it is with people undergoing chemotherapy.

BCNU is a similar chemotherapy but is given by injection. This drug and its administration are more expensive.

The goal of these chemotherapy drugs is to slow the growth of the tumor and improve the clinical signs. Chemotherapy is not likely to destroy the tumor completely because the cancer cells can become resistant and may reproduce more quickly than the drug can eliminate the cells.

The use of prednisone is a palliative treatment if no other treatment is chosen. Prednisone could reduce the inflammation in the brain around the tumor, but steroids often increase pu/pd. This had to be taken into account when considering Ricci's quality of life.

The consensus by the veterinarians, my husband, and me was that Ricci did not appear to be in pain. Our goal, regardless of treatment option, was to preserve Ricci's quality of life.

In my search for information about treatments for recurring brain tumors, I learned about stereotactic radiosurgery, also known as gamma knife surgery. This procedure was being done in animals by Dr. Rowan Milner and his colleagues at the University of Florida (UF) in Gainesville. Dr. Milner was kind enough to return my phone call and explain to me what UF could offer.

The procedure for stereotactic radiosurgery would require the patient to arrive at UF on Monday to have a CT and MRI (magnetic resonance imaging). A treatment plan would be devised, and the actual radiosurgery would be done on Thursday. Stereotactic radiosurgery, done under local anesthesia, is the use of a computer-guided radiation therapy system to aim highly-focused beams of radiation directly into the tumor. All the radiation is focused directly to the area of the tumor, and little radiation reaches normal brain tissue. The mega-dosage of radiation is delivered all in one treatment, contrary to conventional radiation therapy, which delivers the radiation in many sessions. The cost for stereotactic radiotherapy in Ricci's case was estimated to be between \$4,000-\$5,000.

For the most part, there is little problem in using stereotactic radiosurgery. A benefit is that the collateral damage zone is limited to 3 mm around the treatment area. Radiosurgery has been shown to be at least equal to conventional radiation therapy in treating brain tumors. Pet owners must know, though, that there are risks — though small — of worsening neurologic signs and even death.

At the time, Dr. Milner had treated 45 cases, primarily nasal tumors and osteosarcoma, with stereotactic radiosurgery. He was even familiar with Greyhounds' special needs, such as anesthesia precautions, having treated several Greyhounds who had been adopted from tracks in Florida. Dr. Milner advised, however, that he

had not performed radiosurgery on any recurring pituitary macroadenomas. He pointed out that recurring tumors are often radio-resistant.

Dr. Terri Tucker-Warhover, a radiation oncology resident at MU, has been studying stereotactic radiation, including out-rotations at UF and at a hospital in St. Louis where this treatment is being performed on humans. It is hoped that in the not too distant future MU will have the equipment required to provide this type of treatment, making it a more feasible option for owners of pets living in the Midwest.

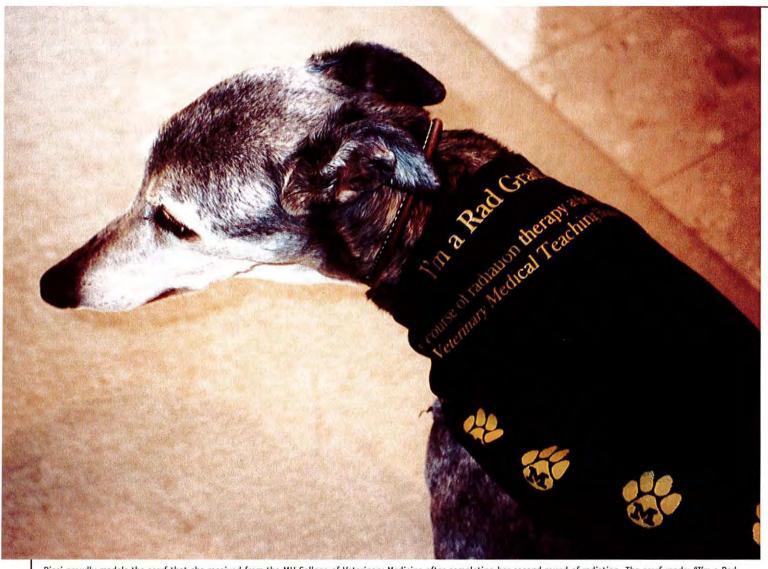
Having all this information actually made it both easier and more difficult to make a decision about treatment for Ricci. The first choice was whether to treat or not to treat. Ricci was 11 years old, and she had already undergone 19 fractions of radiation therapy almost three years earlier. After gathering and pondering as much information as possible, our final decision was made by asking Ricci's veterinary oncologists, Drs. Carolyn Henry and Kim Selting, what they would do if Ricci were their dog.

Our faith in the Wizard Team's recommendation and our comfort with Ricci's prior care at MU swayed us to opt for conventional radiation therapy delivered via linear accelerator at MU. Radiation therapy appeared to be the option that would give Ricci the best chance. We realized the substantial risks but decided, regardless of the unforeseeable outcome, we would know that we had done the most possible for Ricci.

Dr. Lattimer designed a treatment program for Ricci which involved 20 fractions, administered on a daily basis Monday through Friday. Ricci began treatment on April 14, 2003.

Ricci tolerated the treatments relatively well, as she had done years earlier. At the advanced age of 11, anesthesia was a bit of a challenge, but nothing that the Wizard Team couldn't overcome. Ricci's appetite remained good, and she tolerated staying at the veterinary hospital quite well.

Leaving Ricci at the hospital was more difficult on us, her humans, than it appeared to be on her. Ricci received wonderful care and attention, and she has many friends at MU. We repeated the same regimen as with Ricci's initial radiation therapy. Either Mike or I would make the two-hour drive to Columbia from St. Louis early on Monday mornings. After working half days on Thursdays, I arrived at the veterinary hospital by 3 p.m., sprang Ricci to spend the night with me at a hotel, and then took her back for the first appointment on Fridays, so we could



Ricci proudly models the scarf that she received from the MU College of Veterinary Medicine after completing her second round of radiation. The scarf reads: "I'm a Rad Grad! I completed my course of radiation therapy at the University of Missouri Veterinary Medical Teaching Hospital."

be home by noon to share the weekends. We followed this routine until Ricci's final treatment on May 9, 2003, when she was discharged.

A follow-up CT to assess the treatment results was performed on August 4, 2003. The Wizard Team considered the results encouraging. The CT showed that the pituitary macroadenoma was reduced to 1.23 cm. An irregular-shaped cystic area, noted on the CT scan in March and thought to be associated with retention of fluid, had also decreased in size. The tumor margins were more sharp and defined than before the radiation treatment. The reduction in size of the tumor and the reduction of inflammation resulted in decreased pressure on the surrounding brain tissue, alleviating pressure on the hypothalamus and reducing Ricci's desire for water. The CT also showed little evidence of radiation damage to the surrounding brain tissue.

It was thought that Ricci was past the time period for any acute adverse reactions.

Dr. Lattimer intends to publish Ricci's case as a report on successful reirradiation, and additionally plans to include Ricci in a paper to be prepared on the treatment of some 40 brain tumor cases in dogs. Hopefully, the documented results of Ricci's treatment will benefit other canines, although it is not a common approach. Possibly, too, Ricci's good outcome will help other pet owners faced with difficult decisions about retreatment options.

Ricci has continued to experience good quality of life. The amount she drinks is within normal range, although we do monitor and record her intake. Ricci's appetite remains good. She even has us trained to provide her an afternoon and evening snack. When the weather is perfect, Ricci delights in short walks. She also enjoys sleeping a lot, moving from her bed to ours and to the couch. This seems quite normal for a 12 year-old Greyhound.

Each day with Ricci is a blessing. Because the veterinarians, residents, technicians, and students at MU have not only provided wonderful care for Ricci, but also compassion and care for Ricci's humans, the name has stuck. The Wizard Team has our sincere gratitude.

Marilyn Gaffney lives in Chesterfield, Mo., where she loves and cares for Dal Pal Ricochet, CDX (aka Ricci). Ricci is 13 years old this September. Carolyn J. Henry, DVM, MS, DAVCIM (Oncology) is Assistant Professor of Oncology in the Department of Small Animal Medicine, College of Veterinary Medicine and Division of Hematology/Oncology, School of Medicine, at the University of Missouri-Columbia.



Bernie (EL's Money To Burn) 1991-2004

Bernie was adopted and cherished by Dan and Lauren Emery of North Yarmouth, Me. He was pictured on the front cover of the Spring 2000 and Winter 2002 issues of CG, the back cover of the Fall 1996 and current issues, and inside the magazine more times than he could count. Bernie retired from racing at the Seabrook Dog Track before his second birthday. His winning personality led him to long careers helping Greyhounds and people. For seven years he danced with joy to do adoption demos, where he thrived on introducing the public to the magic of Greyhounds. As a registered therapy dog he loved the six years he spent volunteering at Brentwood Rehab and Nursing Center, where the staff, residents, and patients adored him. Bernie earned his nickname Snoop from a number of hair-raising escapades, including chasing a deer through the Maine woods on Christmas Eve dressed in his yellow raincoat, dragging a 6-foot leash. He barely had time to retire from his work before being stricken by osteosarcoma just short of his thirteenth birthday. Bernie was buried near his friend Boomer, with his beloved deflated basketball, in the woods he knew so well.



Bucky 1991-2004

Adopted by Ray, Michelle, Mikey, and Kyle Burr of Gregory, Mich. In 1993, Bucky appeared on pages 45 and 46 of the Spring 2003 issue of CG. A few years ago, Bucky was lucky enough to walk in the Detroit-based America's Thanksgiving Day Parade with our adoption group, Greythounds of Eastern Michigan. He was pictured on national television in his little reindeer ears and red coat. He dressed as a king and attended many renaissance festivals in Michigan to help spread the word about Greyhounds. He was helped to the Rainbow Bridge a few weeks before his 13th birthday because of cancer that had spread to his liver. We were blessed to have him in our lives, and he will forever remain in our hearts.



Peaches (OT's Peach State) 1990-2004

A frightened fawn brindle, Peaches worked her Greyhound magic on Cynthia Cash. Peaches wouldn't make eye contact, but when she wagged her tail a fraction of an inch, Cynthia knew this was meant to be. Cynthia didn't know then that Peaches would change her life and thousands of Greyhounds would find their way into adoption because of her. Because of Peaches, Cynthia became involved in Greyhound adoption and moved over 3,000 Greyhounds from the tracks and farms into adoption groups. Slowly, Peaches began to unfold. She accepted and loved every foster dog that passed through her home, learned to trust, and eventually came to greet visitors. Peaches also became the teacher, showing Cynthia the beauty that lay beneath the frightened outward appearance. She taught Cynthia to look beyond the apparent for the miracle that was to be found in the loyal, loving heart and graceful soul of a Greyhound. Cynthia and Peaches spent 12 years together. Sadly, Peaches lost her battle with osteosarcoma in March. She was grace and serenity and will be missed, but fondly remembered. Peaches was pictured on page 40 of the Fall 2001 issue of CG.

Without the Greyhounds whose stories and images populate its pages, Celebrating Greyhounds Magazine would not exist. With In Memoriam, we express our gratitude and bid farewell to those who have, in previous issues of CG, enriched our lives by sharing a bit of themselves with us.



Monet. Praveen Mutalik

Making Choices

By Dana Provost

y Greyhound started limping one day. I wanted to believe it was just a muscle strain, that Monet had just gotten silly one day and strained something. A month later, he was in so much pain that I knew I had to take him into the veterinarian. It wasn't good news. The x-rays showed a starburst-like form on his left back leg in the neck of the femur region.

My mind went numb.

The veterinarian said that he would send the x-rays to a New York radiologist but he suspected osteosarcoma. He suggested a consult and biopsy with a local orthopedic veterinarian. I returned home defeated, with many questions unanswered and so many decisions to be made. A tornado of emotion overwhelmed me. I immediately started to research osteosarcoma in Greyhounds. I wanted to give Monet the best quality of life and make an informed, rational decision. I read as much as I could before meeting with the orthopedic surgeon a week later.

This was not my first experience with cancer in a Greyhound. A few years earlier, my Allie was diagnosed with skin cancer. I remember a friend's whippet, Adam, was diagnosed at the same time. I opted for oral chemotherapy and immediate removal of the skin lesions. My friend chose to remove the skin lesions and

forego chemotherapy. At the time, I felt I made the right decision, and I was elated with Allie's progress.

Nine months later, she was gone. Adam is still here. Did I make the right decision? I condemned myself for a long time afterwards. Believing that my choice had shortened Allie's life, I promised myself that I would *never* put another Greyhound through chemotherapy. I now find myself going down that very road with Monet, but with the most aggressive cancer there is. How could I not treat with chemotherapy? Believe me, *never* is a strong word.

Moner's biopsy came back positive for osteosarcoma. I looked at the various treatment options, the survival rate of each combination, and the financial cost. Panic set in. I went home and lay down by Monet and cried. I asked him what he wanted and looked into his eyes. Help me, he seemed to say. I didn't see Put me down, I can't go on. Or did I see only what I wanted to see?

I continued my research. I found solace in Circle of Grey, a network of Greyhound owners who seek support during times of illness and grief. My closest friends knew of the decision that I faced.

I chose amputation and chemotherapy.

Some of my friends became distant. I knew that they did not support my decision. I felt deserted and sad, which was hard knowing the road ahead. I found this was a common reaction from friends hearing of the disease. I kept true to myself and Monet and proceeded alone. One friend told me that if her Greyhound was diagnosed with cancer, she would put him down. Those words hurt me at the time, but I realized that people come from different places. I had dealt with this disease before. Monet had always been a healthy, sturdy Greyhound. We proceeded with the treatment. I chose to enjoy the time I had left with Monet, however long it might be.

It is easy to second-guess the decisions that you face and the path you choose. Remember that no decision is wrong — you know your Greyhound, and you know yourself. The friends who seemed so distant at first now see the quality of life that Monet has with the

treatment. They tell me they have *never* seen him so happy and full of life.

This journey with Monet has taught me that all Greyhounds are different. Their illnesses are different, and their situations are different. All you can do is educate yourself and trust your instincts. Whatever decision you make is the right one for you and your Greyhound. And if you ever have to go down this road, you are not alone. The most important question to ask is this: What quality of life will my Greyhound have?

I take each day as if is a new one with Monet and his Greyhound half-sister, Renoir. Sometimes we take for granted that our pets will always be there, and that's not the case. Some of them leave us way too soon. I sink into Monet's fur and memorize his smell, his funny quirky ears, the touch of his fur as his hair grows back and fuzz turns to real fur, his cute little stump, the cuddly bear look he has when his tongue hangs out, and especially the look in his eyes that reaches into my soul; I will have these forever.

Monet's chemotherapy treatment is coming to an end. He is doing very well and his continued progress warms my heart every day. ■

Dana Provost is CG Features Editor.



Tera, healthy and happy. Kathy Rowley

Miracles Do Happen

Artemisinin

By Kathy Rowley

n April 28, 2003, our 8 year-old Greyhound Tera was diagnosed with bone cancer. We heard those dreaded words with disbelief. She had been healthy, happy, and symptom-free until the night before her diagnosis. There had been no warning signs. Suddenly, we weren't sure she would live to see her ninth birthday. We agonized over making the best decision for her, knowing that there is rarely a cure for this kind of cancer. According to Dr. Charles A. Kuntz of the Regional Veterinary Referral Center in Springfield, Virginia, only 10 percent to 15 percent of canines can be cured of osteosarcoma.¹

I knew that even with amputation — the recommended course of action — the cancer couldn't be eradicated. Amputation would only eliminate the cancer at the site. It was just a matter of time before it recurred in another part of her body. The question wasn't if it would reoccur, it was when. If we could have eradicated the cancer with amputation, we would have chosen to do so. However, had we chosen to amputate, she would have suffered tremendously, and she would have suffered again while rehabilitating. Then she would have suffered once more when the cancer recurred in another part of her body. Not all dogs do well with only three legs and not all dogs tolerate the amputation surgery well. The odds were not in Tera's favor.

Tera's oncologist had given us one week to make our decision regarding amputation. After that, she said it would be too late to amputate because the cancer would have already spread to another part of her body. We decided that the best thing for Tera was not to amputate. This was a very difficult decision for us. We knew she would only have weeks to live before the pain became too great for her as the cancer progressed, and bone cancer spreads very quickly. We gave Tera Rimadyl[®] and waited for her to let us know when she was ready to leave us.

Then something happened that changed our lives.



Annie Oakley, adopted by Amy and Peter Revelas of Simpsonville, S.C.

On April 30, 2003, I called a friend to let her know that Tera's bone cancer had been confirmed with a biopsy and that we had decided not to amputate. She asked if I had read the May, 2003 Whole Dog Journal (WDJ) article about something called artemisinin. I had not. In reading the article, I learned about the use of artemisinin in the treatment of cancer. Deciding we had nothing to lose, I ordered it from Holley Pharmaceuticals, which was mentioned in the article. I discovered that artemisinin is virtually nontoxic, has been available and in use for about 30 years, and that "the herb itself has been used

by the Chinese for many centuries."2

We started Tera on artemisinin on the Saturday following her diagnosis, and she seemed somewhat better on Sunday. We thought it was just a coincidence. On Monday, she continued to act as though she felt better. By Tuesday, she was running around like there was nothing wrong with her. The change in her behavior was dramatic, but we were not ready to accept the possibility that the artemisinin could actually be working.

The WDJ article mentioned Dr. Henry Lai of the University of Washington and his promising

research using artemisinin in treating various forms of cancer. The article chronicled the use of artemisinin in the treatment of a Golden Retriever with bone cancer. The dog was thought to still be alive after two years. I contacted Dr. Lai, and he was gracious enough to provide me with some information on artemisinin. Because artemisinin is still considered experimental, the most effective recommended dosages and treatment protocols have not yet been worked out. I took the information that Dr. Lai provided to me, what I had gleaned from the WDJ article, my research on the Internet, and my gut feeling as to what was best, and began Tera's treatment.

Artemisinin is a molecule extracted from a naturally occurring herb that grows in China and Vietnam. For many centuries, the Chinese have treated various ailments with it. This compound comes from the herb sweet wormwood artemisia (*Artemisia annua L.*), also known as sweet Annie. Artemisinin is now widely used to treat malaria.

What does malaria have to do with cancer? Dr. Lai made the connection between malaria and cancer in 1994 when he discovered that cancer cells sequester iron just as the malaria parasite does. "In order to sequester iron needed for their rapid cell division, cancer cells also have higher percentages of receptors that transport iron (called transferrin receptors) into iron cells." He found that malaria and cancer cells are alike in that they both contain high amounts of iron.³

Artemisinin combines with iron inside the tumor cell to form a free radical, which is a charged particle. This acts like a mini-tornado, destroying the cell's membrane and internal structures (the organelles). Very few normal cells have a mechanism to transport artemisinin into the cell, which is why development of toxicity is infrequent. Most people who use artemisinin start at a daily dose of 1-2 mg per kg of body weight. To date, no one has yet reported the toxicology range for pets with cancer, since no scientific clinical trials have been performed.

Artemisinin is not an FDA-approved drug. Kristin Kellar-Graney, graduate student in the Multidisciplinary Tumor Biology Program in the Department of Orthopedic Oncology at the Washington Cancer Institute, and participant in Georgetown University's Multidisciplinary Tumor Biology Project, told me this is why many veterinarians are not familiar with it and why no studies have yet been performed.

Artemisinin has been shown to kill breast cancer cells and leukemia cells in vitro within hours. It shows great promise for treating colon as well as other forms of cancer. It is being tested in both animals and humans. Kellar-Graney anticipates that the Washington Cancer Institute at Georgetown University and the Regional Veterinary Referral Center of Springfield, Virginia will begin a canine osteosarcoma study using artemisinin in the near future. Kellar-Graney explained to me that before the research can begin, they must raise \$150,000 to perform the fully randomized clinical trial that is data-worthy and could potentially be sent to the FDA for new animal investigational drug application. The in vitro data (human, mouse, and dog osteosarcoma cells) is complete, and preliminary results seem favorable. Realistically, this medication will probably need

to be administered as an injection to be most effective. (The liver learns how to metabolize very quickly and the artemisinin may lose its effectiveness as quickly as after seven days of continuous administration.) Unfortunately, as is often the case, lack of funding is a limiting factor for this research.

Another study is pending. Dr. Kevin Hahn, DVM, PhD (Diplomate ACVIM — Oncology), communicated to me that a canine study is being considered at Gulf Coast Veterinary Specialists in Houston, and it appears that the initial study will be available for those dogs with metastatic disease treatment.

We decided upon Tera's treatment without discussing it with Tera's veterinarian or oncologist. Dr. Lai told me that antioxidants can neutralize the effects of artemisinin, so I decided not to take any chances. Tera's food contains antioxi-

dants. I started Tera on 50 mg of artemisinin twice a day, with a small amount of dog food, on an otherwise empty stomach. After about six weeks she seemed to be experiencing some distress, so I increased her dosage to 100 mg twice a day. Within a day she was fine again and showed no signs of discomfort.

Many conventional veterinarians, in my experience, are not open-minded about alternative therapies. I was pleasantly surprised by the response we received from Tera's veterinarian, Dr. John Sylwester (Lakewood Veterinary Hospital, Lakewood, Colorado) when he examined her leg approximately four weeks after we started the artemesinin treatment. He agreed that we had nothing to lose by pursuing this treatment. He also noted that she showed no signs of pain. We agreed that we would x-ray her leg again in three months to see if there was any



Thena, adopted by Jan Whitaker of Berwick, Victoria, Australia.



Bob, adopted by Mary Childree of South Windsor, Conn.

change. We knew the odds were against her still being alive in three months.

I am thrilled to report that we celebrated Tera's ninth birthday on September 18, 2003. Two days later, her cancerous leg was x-rayed for the first time post-diagnosis. Dr. Sylwester conveyed the results of the radiologist's radiograph report to me. According to the assessment, "the lesion appears to be in remission" and the x-ray showed "increased cortical bone proliferation and smooth periostium."

The two x-rays, side-by-side, were compelling. Not only was Tera behaving as though she was getting better, she really was getting better.

On February 28, 2004, we had Tera's leg xrayed again. Her x-ray showed no change since the previous x-ray. Her bloodwork continues to be perfect and her condition is stable. Tera is still doing incredibly well. I had hoped that her cancer would be completely gone. It is still there, but she has apparently reached a plateau. I hope that with ongoing treatment with artemisinin, she will continue to do well and the cancer will diminish even more. I now give Tera 100 mg of artemisinin in the morning and 150 mg in the evening.

When we made the decision to treat Tera with artemisinin, we had decided that we would consider the treatment successful if she lived as long as she might have, had her limb been amputated. It is my understanding that approximately 50 percent of the dogs who have a leg amputated will live an additional six months, and 10 percent will live for another year.4 These statistics are for amputation alone, not amputation combined with chemotherapy or limb-sparing surgery plus chemotherapy. (Incidentally, because Tera's cancer occurred in a hind leg, she was not a candidate for limb-sparing surgery.) Tera is now approaching the one-year mark and we are looking at setting a new goal. We have no way of knowing how much longer we will be lucky enough to have Tera, but we feel incredibly fortunate that artemisinin has worked for her.

For more information about artemisinin, please visit the following links:

- www.caninecancerawareness.com/ HolisticDrugs.html
- www.pet-manual.co.uk/showthread/ t-4692.html
- www.artemisinin-foundation.org/ pages/943533/index.htm
- www.springboard4health.com/ store/more_artemisinin.html

- www.mwt.net/~drbrewer/canart2.htm (Cancer Smart Bomb: Part II: Artemisinin Follow-up)
- www.depts.washington.edu/ bioe/artemisinin.shtml
- www.northeastherbal.org/ articles/articleartemisinin.htm

Kathy Rowley lives in Lakewood, Colo. with her husband Russ and Greyhounds Tera, Tori, and Suki. She has been actively involved in finding homes for retired racing Greyhounds since 1993.

¹Charles A. Kuntz, "Canine Osteosarcoma," in Musculoskeletal Cancer Surgery: Treatment of Sarcomas and Allied Diseases, Martin M. Malawer and Paul H. Sugarbaker, eds. Dordrecht, The Netherlands: Kluwer Academic Publishers, 2001, p. 604.

²Christina L. White, "The Chinese Cancer Smart Bomb Part I: An Idea from Ancient Chinese Medicine." www.michaelmandeville.com/quest/regeneration/cancercure/casbomb1.htm (Originally published in the Summer 2002 issue of *New Horizons*, a quarterly newsletter of the Brewer Science Library, Richland Center, Wisc.)

³Christina L. White, "Cancer Smart Bomb Part I: An Idea From Ancient Chinese Medicine." www.mwt.net/~drbrewer/canart1.htm

"Charles A. Kuntz, "Canine Osteosarcoma," in Musculoskeletal Cancer Surgery: Treatment of Sarcomas and Allied Diseases, Martin M. Malawer and Paul H. Sugarbaker, eds. Dordrecht, The Netherlands: Kluwer Academic Publishers, 2001, p. 604.

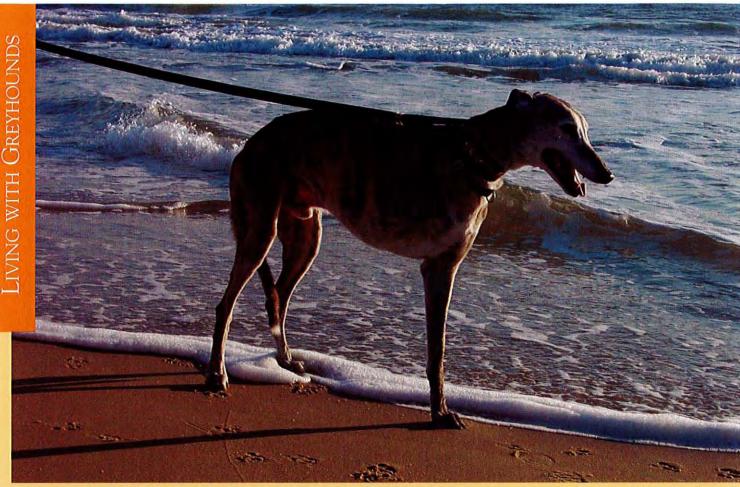
Sources of Artemisinin

Only buy from a reputable source. All artemisinin is not created equal.

- Holley Pharmaceuticals, www.holleypharma.com
 1-866-8HOLLEY or 714-871-7070
- Wellcare Pharmaceuticals, www.hepalin.com 1-877-728-2073
- Allergy Research Group, www.AllergyResearchGroup.com
 1-800-545-9960



Witchy, adopted by Carolyn Flajnik of Oak Hill, Va.



Post-amputation, Mercury visits Dewey Beach. Jean Pletl

Circle of Grey

By Stephanie Russell and Jean Pletl

e, who choose to surround ourselves with lives even more temporary than our own, live within a fragile circle, easily and often breached. Unable to accept its awful gaps, we still would live no other way. We cherish memory as the only certain immortality, never fully understanding the necessary plan.

-Irving Townsend

Circle of Grey Is Formed

In December 1993, Jean welcomed her first Greyhound into her home. A ribby, 3-year-old brindle boy, he was named for the rock legend Freddie Mercury, and for Mercury the god of speed. What she did not know at that time was that Mercury (a.k.a. Select the Level) would become her mentor, teacher, and heart dog.

Mercury was the gold standard of Greyhounds. Sleek and graceful, aloof when appropriate, he pogo-ed when happy, and rooed like a crooner. Jean found that getting to know Mercury, and the Greyhound as a breed, was a delightful experience. Subsequently, two more Greyhounds, Selene and Hoppy, joined Mercury. Life was good.

It started as a limp. Perhaps it was a muscle strain, perhaps an old injury, or perhaps arthritis. At the age of nine, it could have been anything. When the limp did not improve with conservative treatment and one normal x-ray only a few short months old, another x-ray was taken. This time, the x-ray showed a cruel image — the sunburst signs of osteosarcoma.

The next 30 days were a blur: endless tears, hours and hours of searching the Internet for information, an emotional rollercoaster ride that seemed to have no end. Why Mercury? How unfair that Jean had to decide to let Mercury go or to move forward with treatment — amputation, chemotherapy, or a combination of the two. Family and friends were sympathetic, but none had walked the path in her shoes. Mercury underwent an amputation of his right front leg and shoulder in November 1999. Four treatments of chemotherapy followed over the next several months.

Seeking support, Jean posted Mercury's progress frequently to the Greyhound-L, a large e-mail list of Greyhound owners. While she received many, many notes of support and encouragement (some from others who had a Greyhound with cancer), it took only one note of condemnation to knock her down at the knees. A stranger told her she was cruel to amputate the leg of a Greyhound and that spending so much money on one dog was taking money from many other Greyhounds that needed help. Jean was devastated. Then she got mad. Jean thought that if she received such a note, then others were likely receiving them as well. There had to be a place to go, a place for those who understood the emotions and difficulty in facing the diagnosis of cancer or other illness. With the encouragement of many cyber-friends, Jean decided to create a support group for Greyhound owners. Circle of Grey began on February 14, 2000.

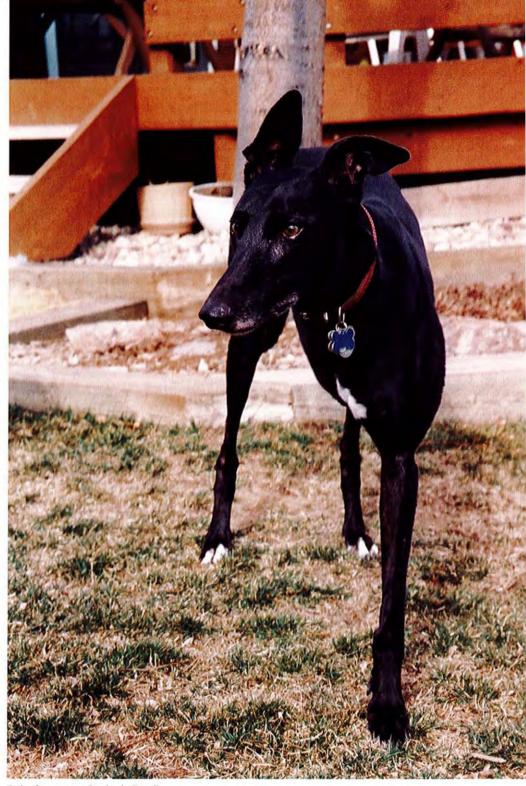
Jean chose the name "Circle of Grey" because a circle has no end, just as the love, spirit, and special bond with our Greyhounds has no end. Her initial purpose in creating this online list was to bring together people who were dealing with cancer and terminal illness in their Greyhounds. She wanted Circle of Grey to be a place to share experiences, tears, and small victories with others who clearly understood.

Today, there are over 300 people on the list. Circle of Grey is more than just an e-mail support group; it is a family. It is cancer awareness. Circle of Grey started its first luminary Celebration of Souls at sunset in Dewey Beach in 2000. The Celebration has grown each year at Dewey Beach and is now also part of the Greyhound Gathering in Kanab, Utah.

Much of the growth of Circle of Grey was due to the initiative and inspiration of Stephanie Russell. Her greyhound, Cody, also had osteosarcoma.

Cody's Story

Cody, a.k.a. Garths' Bookin, chose the Russell family on June 30, 1994. Stephanie's son was just a cute little 5 year-old at the time and Cody seemed to feel that Tim was not a threat. Cody was a spook from day one, but he bonded easily with the family. He was so frightened of everything: blowing leaves, bicycles, roller blades, and anything outside of their home. Stephanie worked long and hard with this special boy, eventually taking him to meet-and-



Cody after surgery. Stephanie Russell

greets where he would stand behind her and shake so much it sounded like he was tap dancing. Slowly, he settled down and just stood behind her, unless someone with special needs approached. Cody had a special knowledge of those in need and he would slowly approach them, as though to offer his own comfort.

Cody and Stephanie had a special closeness.

When her husband and daughter mentioned that he was limping in early January 1999, Stephanie just couldn't face it. He was only eight, but she knew what it was. This just couldn't happen to the big, black, handsome, oh-so-special boy of hers. Nope, she wasn't going to allow it. But during the Broncos vs. Jets halftime show (the one before the Broncos won the Super Bowl), she was

massaging Cody's leg when he let out a shriek as she touched the place below his front right elbow.

Stephanie took Cody to see the veterinarian right away. The location of his pain led the veterinarian to believe that it was a muscle or ligament problem. That was until he received the x-rays. They showed that the tumor had almost totally consumed the outside bone below Cody's elbow. He veterinarian suggested she take Cody to Colorado State University (CSU), where he might be admitted to an osteosarcoma study. If Cody definitely had osteosarcoma, he would be in the study. However, he had to undergo a bone biopsy and bone and body scans prior to surgery.

Unfortunately, during the biopsy, Cody's leg bone broke. The veterinarian at CSU hinted that Stephanie should just let Cody go. She knew then and there that all Cody wanted was for the pain to be gone and to come home. And come home he did — less than 24 hours after surgery.

The first couple of weeks were rough, but then even chemotherapy didn't really faze him. Cody's only problem was his dislike of having to go to CSU for his chemotherapy and later for his check-ups.

Life in Ft. Collins, Colorado. The idea for the luminaries and the Celebration of Souls came directly out of this experience.

Circle of Grey works towards finding a cure for the horrid disease of cancer. With each Celebration of Souls at the Dewey Beach gathering, we have collected donations for the Greyhound Project's Canine Cancer Fund at the Morris Animal Foundation.

To represent the Circle of Grey, Jean chose the colors purple, yellow, and white. Purple is for Royalty, Yellow is for Hope, and White is for Healing Light and our Angels at the Bridge. Stephanie took ribbons of those colors and added them to a Greyhound pin to create our Circle of Grey Pins. Initially, the pins were another way to raise money for the Morris Animal Foundation. Recently, we were offered a Rainbow Bridge Bracelet, made by Teri Rogo, to raffle as a fundraiser for Morris.

While Stephanie still wants to help find a cure for cancer, she also needed to do something to offer comfort. She loves to crochet and had wanted to make blankets for the Linus Project, a as well as fleece, yarn, or money for postage. As of March 2004, Circle of Grey has sent 186 blankets, mainly to Greyhounds with cancer. Once in a while, they send blankets to senior hounds of the group, breeds other than Greyhounds, and also a few of the members themselves.

The success and growth of this family is due to the endless compassion of each person. Even when personal pain and loss is overwhelming, there is never a shortage of healing thoughts, words, and prayers. We are so proud of each and every person who has been a part of Circle of Grey, whether for a few days or a few years.

We light a candle every Sunday at 9 p.m. EST to remember those who are bravely dealing with cancer and to remember those who have crossed the Bridge. Please feel free to join the group by lighting a candle of your own.

Saying Goodbye

Mercury underwent amputation and chemo and lived a very happy and full life for almost 15 months to the day of his diagnosis. On January 11, 2001, cancer was found in his left shoulder. He was set free of his pain the following day.

Cody survived 27 months post-diagnosis — a wonderfully long time, considering the odds with osteosarcoma. That time was a period with a very high quality of life for Stephanie's handsome boy. He traveled with her, took walks, and actually became less of a spook — he was very playful and happy with life. After a weekend of pain from metastasis to his left shoulder, on April 30, 2001, a sunny Colorado afternoon, Stephanie and her family said goodbye.

Stephanie Russell lives in Louisville, Colo. with one senior Greyhound, one Whippet, one Doberman, one Green Cheeked Conure, and one Leopard Spotted Gecko. She is the webmistress for the Greyhound Shopping Mall, co-moderator of the Circle of Grey Yahoo support group, and sends Healing Blankets to ill Greyhounds. She is also a wife, mom of two children, a software engineer, and a third generation native of Colorado. Jean Pletl lives in Upstate N.Y. with her Greyhounds Selene, Kid, and tripod Riley; Mercury and Hoppy are at the Rainbow Bridge. Jean is currently working on her master's degree in Acupuncture and Oriental Medicine and hopes to continue her training and become an animal acupuncturist.

To join Circle of Grey, please visit this website http://groups.yahoo.com/group/CircleofGrey/



George, adopted by Fiona and Nigel Moore of Reichenburg, Switzerland.

When Jean asked Stephanie if she wanted to join the Circle of Grey, Cody was already beating the odds. He was in the study and on the study drug. He was doing incredibly well. Stephanie wasn't sure if she could provide anything to this new e-mail support group, but she joined anyway.

Circle of Grey Expands

In June 1999, with Cody 18 months postdiagnosis, he was invited to join the survivor's lap with other canine cancer survivors from CSU at the American Cancer Society Relay for group the gives blankets to children who are ill. But the Linus Project has size constraints that were prohibitive for her. She read a letter by Kelly-Sue Thompson in Whippet News, offering blankets to whippets in foster homes. She contacted Kelly-Sue and together they started sending Circle of Grey Healing Blankets in February 2002. Kelly-Sue's contributions soon were overshadowed by the contributions of other Circle of Grey members. Stephanie has two partners who help her ship the blankets, with many others providing blankets they have made or purchased



Four-legged guests at Gracie's "celebrate life" party. (Gracie is in the center of the photo next to the black and white plush toy.)

Gracie's Party

A Celebration of Life

By Deb Lipartito with Carol Swenson Photos by Deb Lipartito

ancer is never pleasant. When faced with the diagnosis of cancer in a beloved pet, the last thing anyone wants to do is celebrate. When Carol and Rick Swenson rushed their Greyhound, Gracie, to the emergency room in February 2003, they were very worried. The veterinarian told them that a mass had ruptured in Gracie's abdomen and she needed immediate surgery to save her life. Gracie made it through the surgery like a champ, but her prognosis was not good. She was diagnosed with hemangiosarcoma of the spleen. Although Gracie's diseased spleen was removed, she was given only one to three months to live. Two years earlier, Gracie had been diagnosed with hemangiopericytoma in her front leg. The tumor was removed and her prognosis was good. She received localized chemotherapy as a follow-up and saw a holistic veterinarian who adjusted her diet and put her on various supplements. A year and-a-half went by with no return of the tumor. Gracie was doing fantastically — then came the hemangiosarcoma diagnosis.

So now what? Should one only look at the seriousness of the issue and dwell on the negative? Absolutely not. Carol is a very positive person. She and Rick enjoy life and do their best to make sure their dogs enjoy the best life possible. Carol's friend, Marilyn Long, immediately suggested that they have a "celebrate life" party for Gracie. Carol mentioned the idea to me and I told her that I thought it was a fabulous idea. After all, Gracie was feeling great. She had recovered quickly from her abdominal surgery. She was happy and spunky and seemed totally healthy to those who did not know any better. Why not celebrate her life while she was still able to fully enjoy it?

The date was set for March 9, 2003 and a few special friends were invited to the celebration. In total, there were nine Greyhounds and seven human guests. Guests brought goodies like homemade doggie cake with yogurt icing and chicken



Mmmm . . . cake!

liver pate with biscuits, as well as lots of love and positive attitudes. Some brought bandanas and party hats for the dogs to wear, party favors for the dogs to take home, and toys for Gracie. The dogs at the party were completely overjoyed with all of the toys, treats, and attention they received. As usual, they were happy to be around their families and other Greyhounds. After all, family, friends, and good times are uplifting for everyone, even our Greyhound family members. My own Greyhounds always enjoy our company and constantly want to be with my husband and me. When we retrieved their leashes and prepared to head out to the party, they ran around bouncing off of each other, excitedly anticipating our outing.

As the party proved, good spirits are contagious and help heal the soul. Everyone had a great time. We spent a wonderful evening enjoy-

ing quality time with our dogs and our friends. Carol and Rick appreciated the diversion of the party and the support of good friends to help take their mind off Gracie's recent diagnosis. And best of all, Gracie enjoyed an evening of fun with the other dogs and their humans. We reminisced about the good times Gracie and her family had over the past seven years. We took photographs so that we would later have them as a wonderful reminder of the festivities and of Gracie while she was still feeling good. Gracie played with her new toys and waited patiently for each new treat to be brought out. We all watched with satisfaction as she enjoyed some special homemade goodies, which she shared with her doggie friends. What better way to spend quality time with Gracie than to celebrate her life? In fact, when I recently discussed the party with my friend, Sue Bulsza, she liked the idea so much that she said, "Why wait until a terrible diagnosis to have a party? We should have parties to celebrate our Greyhounds regularly!"

The three months given for Gracie to survive soon passed. Gracie was still doing very well. Six months passed. There was still no degradation in her condition. Gracie was amazing everyone, living life to the fullest. She was running, playing, eating, and most importantly, she was happy. Then in October, eight months after Gracie's diagnosis of hemangiosarcoma, Gracie began to limp. A lump that Carol discovered on Gracie's hind leg was confirmed to be osteosarcoma. She was again given about one month to live. Gracie received strong pain medication to keep her comfortable. She lost her fight with bone cancer (her third type of cancer) on November 21, 2003. She was very much loved and happy until the very end. The party earlier that year was a nice memory of her happy days.

When faced with a terminal illness in a

beloved pet, as difficult as it is, try not to spend your days focusing on the gravity of the situation. Instead, spend time with your pet celebrating her life in whatever way is best for the situation. A party like Gracie's may not be appropriate in all cases. But whatever you choose to do, keep your spirits up, if not for you, then for your pet. Both you and she will truly benefit from it — and the good memories will live on forever.

Deb Lipartito resides in Lower Gwynedd, Pa. with her husband Ed and Greyhounds Dabney, Reo, and Sweetie. She is Vice President of Teratron Inc., a software engineering consulting company founded by her husband, and volunteers for Make Peace With Animals in New Hope, Pa. Carol Swenson resides in Harleysville, Pa. with her husband Rick and Greyhounds Casey and Minney. She also volunteers for Make Peace With Animals in New Hope, Pa.



Gracie relaxes after the party.



Duke and Christy, adopted by Jack Simon of Cincinnati, Ohio.

Combating Cancer Through Science

Morris Animal Foundation Provides Hope by Funding Research

By Heidi leter

Your dog has cancer. These words make a dog owner's heart plummet.

Dogs, like humans, are susceptible to cancer, particularly as they age. According to the Animal Cancer Center at Colorado State University, cancer is the number one natural cause of death in older cats and dogs, accounting for nearly 50 percent of natural deaths each year.

Those statistics are eye opening, and words like melanoma and osteosarcoma certainly sound frightening. But thanks to tremendous advances in veterinary medicine, cancer is often treatable, particularly when diagnosed early. Treatment varies and can include surgery, chemotherapy, radiation, and immunotherapy.

What's more, new treatment advancements are happening all the time, in part due to studies funded by Morris Animal Foundation. Each year, the Foundation funds about \$4 million for animal health studies. This year the 56-year-old nonprofit organization is funding more than half a million dollars for nine studies of cancer in dogs, conducted at universities around the world. These diverse projects are looking at the link between genetics and cancer, new treatments for bone cancer, tumor vaccines, and new diagnostic techniques.

As scientists learn more about cancer, they are finding that genetics are a significant factor in cancer development. A number of Foundation-funded investigators are examining the link between genetic mutations and cancer in hopes of developing more effective ways to treat the disease in dogs.

Lymphoma is one of the most common cancers in dogs and, fortunately, it also is one of the most treatable. About 90 percent of dogs with lymphoma who are treated with chemotherapy go into remission. The problem is that remission doesn't last. Some dogs relapse in less than six months, while others live another two years.

Dr. W.C. Kisseberth at The Ohio State University is developing a tool called a cDNA expression array. This tool will help scientists determine why lymphoma cells behave differently from dog to dog. He believes that, as in humans, lymphoma cells may look the same under the microscope but actually fall into subclassifications. Dr. Kisseberth and his colleagues hope to use the DNA array to determine subclasses of lymphoma based on the genes they express.

"We will be able to determine if there are specific genes that correlate with a good or poor prognosis for dogs diagnosed with lymphoma," Dr. Kisseberth says. That knowledge will help scientists develop specific drug therapies that more effectively fight the disease.

One apparently genetic disease that seems to be on the rise is malignant histiocytosis, an aggressive cancer that affects cells in a dog's immune system. "Cancer of these cells is extraordinarily rare in people and becoming increasingly more common in dogs," says Dr. Cheryl London, a veterinary scientist at the University of California-Davis who is working to develop new therapies for treating this deadly cancer. The disease begins as a solitary tumor but spreads quickly to other locations, making radiation and surgery ineffective treatments.

"We're trying to identify some of the genetic and molecular abnormalities in this tumor to provide a better understanding of the biology of the disease," Dr. London says. If she can identify a specific mutation common to this type of tumor, she may be able to identify potential targets for therapeutic intervention.

Foundation-funded studies aren't limited to those conducted in the United States. Dr. Jan Mol at Utrecht University in the Netherlands is developing a genetic test that could lead to treatment for mammary cancer. This type of cancer is particularly high in dogs that aren't spayed, because it is linked to elevated levels of estrogen and progesterone. "If you do not spay the dog, there's a high likelihood that she will develop a mammary tumor at some time in her life," Dr. Mol says.

Earlier this year, he and fellow investigators developed a micro-array, which is a glass slide with 20,000 microscopic gene spots on it. Dr. Mol will use the slide to compare the genetic profile in normal dogs with the genetic profile in dogs with mammary tumors.

"The idea is that if you can make the profiles, you can predict how the tumor will behave," Dr. Mol says. "That's important for determining the appropriate treatment." Dr. Mol hopes to have the genetic profiles done within the next two years.

Innovative work is going on at the University of Wisconsin-Madison as well. Dr.

David Vail is developing a "tumor vaccine" for melanoma, the most common oral cancer in dogs. Dr. Vail says studies like his, which Morris Animal Foundation has funded for the past three years, are critical to developing new treatments for this disease.

As long as the tumor remains localized, the disease responds fairly well to aggressive surgery and radiation therapy. Unfortunately, the disease usually spreads to the lymph nodes, lungs, and other organs. Once this occurs, conventional therapy no longer helps, and most dogs die within eight to ten months.

"We're looking at ways to stimulate the dog's immune system to get rid of the tumor cells that ultimately spread or have already spread to other parts of the body," Dr. Vail says. So far, he has treated 34 dogs with malignant melanoma and has seen significant responses in several of them. Dr. Vail is quick to emphasize that more work must be done, but he and fellow investigators are



Friday, adopted by Cathy Norris of Fremont, Mich.

making progress toward an effective cancer vaccine. They plan to present their results at veterinary conferences later this year.

Scientists at the University of Glasgow and the University of Wisconsin also are looking closely at another devastating cancer called hemangiosarcoma (HAS), wherein the malignancy arises in vascular (blood vessel) cells. According to Dr. Lesley Nicolson, lead investigator on a study at Glasgow, this type of cancer accounts for about 5 percent of all non-skin malignancies in dogs. Current treatments, which usually involve chemotherapy or surgery, have limited success because the disease usually spreads before it is diagnosed.

Dr. Nicolson is interested in learning more about the application of viruses as therapeutic agents in dogs. The investigators are in the process of identifying peptides, which are short stretches of amino acids that bind to HSA tissue while leaving normal tissues alone. These peptides could be used to direct tumor-killing viruses to tumor tissue, thus providing a novel treatment for this aggressive disease.

Dr. Stuart Helfand at the University of Wisconsin-Madison is also examining therapeutic targets in HSA called receptor tyrosine kinases (RTKs). In basic terms, RTKs act as "locks" on the outside of a cell. When they are unlocked, the cell grows. Dr. Helfand is evaluating a new class of drugs that block RTKs and may help inhibit the growth of malignant HSA cells.

What makes cancer so frustrating is that no one really knows the cause. Scientists must look at many factors. For example, at the University of Montreal, Dr. Monique Doré is studying the role the COX enzyme may play in squamous cell carcinoma. Scientists already know COX is involved in the process of inflammation, that it is the target of anti-inflammatory drugs such as aspirin and ibuprofen, and that it can lead to problems such as arthritis. They suspect it also may be related to cancer.

Dr. Doré chose to study squamous cell carcinoma because this type of skin cancer is prevalent in all dogs. It is most commonly found in the mouth, on the skin, and on the toes, but it can spread to other parts of the body. Treatment usually involves removing the tumor, but in some cases, such as with oral tumors, that is nearly impossible.

"We need to find new therapies and drugs for tumors that can't be removed," Dr. Doré says. She and her fellow investigators know that the COX enzyme is expressed in the squamous cell carcinomas of dogs. They are studying cell cultures taken from dog tumors to try to understand how this enzyme may participate in the cancer process. This valuable information could help scientists develop new drugs and treatments that target the COX enzyme and help stop the spread of this cancer.

Investigators at the University of Missouri are making progress on a new treatment for osteosarcoma, an aggressive bone cancer that primarily affects large dogs, including Greyhounds. According to Dr. Carolyn Henry, the lead investigator, osteosarcoma affects 8,000 to 10,000 dogs in the United States each year.

What makes the disease fatal is that it usually spreads to the lungs. In addition, many dogs are euthanized after diagnosis because the bone lesions can be very painful. Fortunately, this type of cancer is fairly easy to detect because dogs exhibit limping or swelling, usually with no known trauma.

The cancer is usually treated with a combination of amputation and chemotherapy, but some affected dogs are poor candidates for amputation. The investigators are studying an alternative that combines chemotherapy with a radioactive drug called 153 Sm-EDTMP, which is used to provide pain relief in people with bone lesions secondary to metastatic cancer. "I think there are ways we can combine this drug with other treatments to get a good outcome for dogs and permit them to avoid an amputation," Dr. Henry says.

Dr. Henry hopes to wrap up case accrual within the next two years. Currently, 22 dogs, two of which are Greyhounds, are enrolled in the study.

In many cases, technologies used successfully in humans are effective in animals as well. Investigators at the University of Pennsylvania are showing promising results with magnetic resonance imaging (MRI). This tool is often used to distinguish between cancerous and noncancerous lesions in humans. Now investigators have shown that MRIs can also help diagnose the severity of liver and spleen lesions in dogs. These types of lesions are common in dogs but are cancerous only about half the time. Currently used technologies such as ultrasound can identify lesions but will not determine if they are cancerous. This often leads to unnecessary biopsies, which are costly and can be risky, particularly for older dogs.

The availability of MRIs would give veterinarians more accurate diagnostic techniques and help them recommend the most appropriate treatment. According to Dr. Chick Weisse at the University of Pennsylvania and his co-investigator Craig Cliffords at Red Bank Veterinary Hospital in New Jersey, the results so far are promising.

As scary as it may be for us to hear about types of cancer, these scientists are committed to learning more and helping our pets live longer. The more they learn, the more likely these veterinary pioneers will be able to develop life-saving treatment options. This strengthens Morris Animal Foundation's commitment to funding animal health studies and makes us grateful for the support of animal lovers like you. To learn more about the Foundation, visit our website at www.MorrisAnimalFoundation.org.

Heidi Jeter lives in Denver, Colo. She is the publications and media specialist for Morris Animal Foundation, a nonprofit organization that funds animal health studies. The Morris Animal Foundation Greyhound Cancer Fund is a recipient of funds raised at Greyhounds Reach the Beach. Please continue to support this research by sending donations to Morris Animal Foundation, Canine Cancer — The Greyhound Project Account, 45 Inverness Drive East, Englewood, CO 80112.

Common Signs of Cancer in Pets

If your pet shows the signs below, take him to the veterinarian. Many of these conditions also can signify noncancerous conditions that still warrant attention from your veterinarian.

- Abnormal swellings that persist or continue to grow
- · Sores that do not heal
- Weight loss
- Loss of appetite
- Bleeding or discharge from any body opening
- Offensive odor
- · Difficulty eating or swallowing
- · Hesitance to exercise or loss of stamina
- Persistent lameness or stiffness
- Difficulty breathing, urinating, or defecating

Source: American Veterinary Medical Association



Chipper is still here, 30 months after his osteosarcoma diagnosis. Debbie Mosier

Dogs of Hope

Long-term Osteosarcoma Survivors

Stories compiled and edited by Marcia Herman

Your dog has osteosarcoma is one of the most chilling phrases a Greyhound owner will ever hear. If you believe the published statistics and the message of most veterinarians, you might conclude that all dogs diagnosed with osteosarcoma will die in less than a year, regardless of treatment method. This myth is dispelled by the stories that follow. The reality is that the odds of surviving osteosarcoma improve greatly if the lungs are kept cancer-free and certain therapies are initiated.

Battling osteosarcoma requires psychological and physical fortitude, finances, time, nursing skills, and a positive attitude. In this article, seven Greyhound owners reveal their fears, joys and triumphs, and eye-opening experiences with the disease.

Sophie (45 Months)

On Friday evening, May 22, 1999, 8-year-old Sophie broke her left front leg in the yard while chasing a squirrel. Steve and I rushed her to Emergency Veterinary Hospital in Bridgeton, Missouri.

X-rays showed a break of the left carpus (distal radial and ulnar fracture). The leg was stabilized with a cast wrap; it couldn't be set because of a "moth-eaten" area visible on the x-ray. It was bone cancer. Sophie's only option was amputation. I will never forget the veterinarian telling us, "Dogs are born with three legs and a spare." Shocking as it was to hear, I never forgot that statement or how true it rings. The emergency room veterinarian administered torbugesic for pain, instructed us to keep her inactive, and directed us to carry her until she received treatment. I spent the weekend researching osteosarcoma.

Our veterinarian, Dr. James Connoyer, saw Sophie on Monday morning. He agreed with the emergency room veterinarian's assessment. Chest x-rays showed cancer-free lungs; a good sign. He referred us to a specialty practice in St. Louis and arranged an appointment that afternoon.



Sophie at 8 years of age, the day after breaking her leg. Carol Weingold

Dr. Michael Slawienski, a surgeon with Associated Veterinary Specialists, examined Sophie and told us our only options were amputation or euthanasia. He explained that amputation without chemotherapy would relieve pain from the broken leg and the cancer, but would

not extend her life expectancy. With both procedures, we could hope for a 12-month survival. Sophie had just turned eight and was in excellent health. We decided to give her every opportunity to battle the cancer and return to a good quality of life.

Sophie's left front leg was amputated at the shoulder. She had no immediate complications from the surgery. While she was hospitalized, we made the house and deck "handicap-accessible." Two days later, Sophie came home. We were instructed to bring a clean T-shirt to cover her incision and also provide us with a handle to help Sophie balance herself. When the technician brought her out, Sophie took one look at us and headed in the other direction. Did she blame us for what had happened? Or, was she getting so much attention that she preferred her treatment at the hospital? We chose to believe it was the latter.

We were given a lengthy list of post-op instructions, supplies, pain medication, and antibiotics. We needed to keep the wound clean, prevent licking, and limit Sophie's activity until her sutures were removed.

Her first days were difficult. She ate well and gained her balance quickly, but she was restless, fretful, and seemed depressed. Someone stayed with her 24 hours a day and slept on the floor with her at night.

We didn't use the prescribed Elizabethan collar or muzzle, but kept a clean T-shirt on her at all times. Wrong! At night we woke to the sound of slurping. Two days after finishing her course of cephalexin and nine days after her surgery, she awoke one morning with a nasty infection at the incision site. Her surgeon immediately cultured the discharge and ordered more cephalexin until the results were known. We cleaned her incision with hydrogen peroxide, applied warm compresses, reapplied bandages, and wrapped her torso twice a day. Four days later her culture showed a heavy growth of both staphylocci and enterococci. She started Cipro* for two weeks. On June 10, the bone biopsy results confirmed osteosarcoma.

We continued fighting infection, yet Sophie's wound wasn't closing. On June 24, the surgeon cleaned the wound and inserted a drain while Sophie continued antibiotics. After another culture came back positive, the surgeon stopped the Cipro* and started 800 mg of choramphenicol. Since this drug is no longer manufactured commercially, the pharmacist compounded it.

When we expressed our concerns to Dr. Slawienski, he said something insightful: "Animals with cancer who experience infections often have a better than normal survival rate."

On June 30, Dr. Slawienski removed the drain. He was pleased with the incision. On July 9, Sophie was ready for chemotherapy. Her lungs still appeared clear and she was perky, peppy, and acting

perfectly normal again. Two days later she had her first appointment with internist Dr. Liesl Bigge. Dr. Bigge was also pleased with Sophie's condition and gave her the first of three scheduled chemotherapies consisting of 15-minute IV injections. We chose carboplatin because of its easy administration and minimal side effects. Although more expensive than cisplatin, the usual drug of choice, its advantages were worth the additional cost. Sophie experienced no side effects. We started feeding Hill's n/d (neoplasia diet) and supplemented with vitamins C, E, and omega-3 fatty acids.

On September 9, Dr. Bigge recommended three additional carboplatin treatments. We consulted with Dr. Carolyn Henry, a veterinary oncologist with the University of Missouri in Columbia. She knew of no studies with carboplatin that showed better results with additional doses. The decision was ours, but if the extra treatments didn't help, they probably wouldn't hurt either. On December 21, the sixth and last carboplatin treatment was administered. Over two years, Sophie continued to see Dr. Bigge faithfully every three months for chest x-rays and rechecks. Our prayers were answered; Sophie remained well.

Two years post-diagnosis we continued to marvel at her good health. Dr. Bigge thumbed through Sophie's thick file and referred to her post-op infections. She reiterated what the surgeon initially said although there were no studies on the subject — most oncologists found that dogs who had infections in conjunction with osteosarcoma tended to have an approximate three-year survival rate.

Forty-one months after Sophie's initial diagnosis, a baseball-sized tumor appeared on her right scapula. Dr. Bigge recommended palliative radiation for pain management even though Sophie didn't appear to be in pain.

Sophie returned to Dr. Henry who ordered numerous tests, including bone and CT scans, to reevaluate the cancer. Samarium isotope was considered because once implanted it would not require repeat treatments as radiation would. Results of the bone scan revealed a second metastasis on a lumbar vertebrae and a fracture. Sophie would not be a good candidate for samarium because of soft tissue involvement at the scapula.

When Sophie received her third radiation treatment, she had her first pamidronate treatment in hopes of helping stabilize the fractured vertebrae. When Sophie took her fourth and final radiation treatment, lab results showed pro-



Sophie enjoys a frosty treat one month after surgery to amputate her leg. Carol Weinhold

tein in her urine. We discontinued the pamidronate to preserve her kidneys and began oral Fosamax*. The goal was to keep Sophie comfortable, stable, and pain-free with late stage cancer. Radiation shrunk the apparently painless tumor. Fortunately, the tumor was not in a weight-bearing area.

In January 2003, blood work showed kidney problems. We changed Sophie's diet from n/d to k/d (kidney diet). Her condition slowly declined over the next few weeks. Eventually she became more restless and required pain medication at night. She lost interest in food and became less active.

On February 12, 2003, our beloved Sophie peacefully slipped away. At 11 years and 9 months of age, she was victorious over osteosarcoma for 45 months. Although no necropsy was done, veterinarians believed that osteosarcoma did not directly cause her death. Sophie had a wonderful life with four, then three legs. There were some difficult times, but the good days far outweighed the bad. We believe we made the right decisions and now look back on her initial post-op difficulties as a blessing. — Carol Weinhold

Cody (27 months)

In January 1999, Cody was diagnosed with osteosarcoma just below his right elbow. Our veterinarian, Dr. Bob Irmiger, who works closely with the doctors at Colorado State University, found an osteosarcoma study underway there. If our dog was eligible, CSU would pay all but \$700 of the initial \$1,200 for the tumor biopsy, bone scan, body scan, amputation, and subsequent pathology of the leg. Chemotherapy, testing, and the study drug would be provided for 24 months.

Cody made it through surgery with flying colors. Later that night we were told that Cody was standing on his own. Less than 24 hours after his front right leg and shoulder blade were removed, he came home.

Cody underwent five doses of the chemotherapy drug Adriamycin. After completing treatments in May, he began receiving the study drug. This was a controlled study, so he may have received the placebo, but somehow I knew he was on the real drug.

Cody left us on Monday, April 30, 2001, 27 months post-diagnosis. During that time, only the first couple of weeks and the last weekend were really rough. Otherwise, Cody walked, managed



Cody relaxes with his whippet buddy Dundee just prior to amputation. Stephanie Russell

stairs, took trips to the mountains, and just enjoyed home life. His quality of life never suffered.

Later, we discovered that of the over 300 dogs CSU enrolled in the study, Cody was one of only six with the tumor below the elbow. We also learned the osteosarcoma had metastasized to his left humerus. Incredibly, all four bone scans always lit up in the left humerus. The radiologists thought it was arthritis, not cancer; otherwise Cody would no longer have been eligible for the study. Was the drug responsible for the slowing of the metastasis? We like to think so. — Stephanie Russell

Chipper (30 months and counting)

We adopted Chipper in February 1998 after years of wanting a Greyhound. He was and still is the perfect Greyhound, except now he only has three legs.

In July 2001, my son asked if we could teach Chipper to shake the other paw instead of the one he usually gave us. When Chipper gave me his left front paw I realized that there was a bump on his wrist that I hadn't seen before. Chipper went to the veterinarian the next day. She referred me to a veterinary specialist and wrote "osteosarcoma" as the possible diagnosis. I panicked.

Two days later, Chipper saw the specialist. In the meantime, I did major Internet research to learn about osteosarcoma. I saw x-rays that looked exactly like Chipper's and knew he had bone cancer. We went to the specialist, Dr. Allsup of Michigan Veterinary Specialists in Southfield, Michigan, prepared for bad news. We did not want to amputate an ex-racer's leg. The doctor never tried to convince us to amputate; he just presented the facts. He also had a large bulletin board in the room covered with pictures of threelegged dogs, including a couple of Greyhounds. We left there saddened knowing that osteosarcoma is a very painful disease with no cure. Amputation takes away the pain, but eventually the cancer metastasizes to another body part.

We talked it over and decided to amputate. Chipper was only seven and had been with us less than three years. He stayed at the hospital four days. He was a sad sight when we picked him up. Three weeks later, he started going up and down the stairs on his own.

Chipper had five Adriamycin® chemotherapy treatments over three months. The only side effect was diarrhea on every fourth day of chemo.

Now he's back to his old "Chipper" self. He

runs, plays, and is still the alpha. He can't take long walks because he tires easily, but going to the corner and back makes him happy.

Chipper is doing great. His chest x-rays from last spring showed his lungs were clear. He's beaten the odds; according to the veterinarians, he should have gone to the Bridge almost two years ago. — *Debbie Mosier*

JC (34 months)

JC was a robust 9-year-old and we expected he would have many happy days in our new house. On one of his mini-sprints around the yard, JC suddenly pulled up with a little yip and limped into the house. He gave no further hint of distress, so we decided not to take him to the veterinarian. A few weeks passed and the pain seemed to be gone, but we were concerned about the swelling on his wrist that had not gone away. We scheduled an appointment.

When the veterinarian returned with JC's radiograph, she wore a serious frown that didn't fit our suspicions of a sprained wrist. An enlarged area of bone was cracked. She noted its features and somewhere in her explanation we heard the "o-word" — osteosarcoma. Her diag-

nosis was unequivocal. We were devastated. We lost two dogs in two years and now it appeared we were going to lose another.

She referred us to a local veterinary specialty hospital. A few weeks after diagnosis, JC's left front leg was amputated. The next day he was swathed in bandages. Heavily sedated, he hardly seemed to recognize me. I sat there petting him, wondering if we did the right thing. Would it have been better to put him down?

JC soon had the strength to go outside on lead to relieve himself. On day four we brought him home. By then he was swollen from surgery, ballooning to twice his normal size. He was swollen from just under his jaw to between his hind legs and moving appeared extremely uncomfortable for him. He was bruised and his platelet count low. The operating surgeon prescribed doxycycline and sent in a tick titer.

JC had a hard time at home. No assistance with a sling or guiding hands could compel him to go outside, so 24 hours later we returned to the hospital. The veterinarian on call found a urinary tract infection, prescribed additional antibiotics, and ordered us to take JC outside every four hours. The antibiotics had taken effect. His swelling subsided and he was able to go outside again. His tick titer came back negative, but he was kept on a full course of doxycycline, just in case.

The complications from surgery and the slow-healing incision delayed his first treatment

for a month. His four carboplatin treatments were every four weeks because his white cell counts were always too low to proceed at the usual three-week interval.

As weeks passed, JC's personality returned. He walked and cantered around the back yard. He resumed his regular station beside us on the couch. By May 2001, we had adopted another Greyhound and erected a permanent fence that dramatically increased his play area. One day he broke into a full run and sprinted around the yard at a speed that seemed equal to what he could have achieved on four legs. Afraid he would injure himself, I called him back to the house. He ran back so fast he couldn't slow down in time to negotiate the ramp and was headed toward our raised deck at full speed. Realizing he couldn't stop in time, he leaped over a bed of flowers, over a railing four feet above the ground and made a perfect three-point landing on the deck right in front of me, then hopped into the house as if nothing of importance had happened. Our JC was back.

In early March we found tumors in his spleen and liver, and surgery was not recommended. Our veterinarian said it was very unlikely the osteosarcoma had spread to those areas, but we'll never know for sure since we declined a biopsy. If the tumors could not be removed, there was no reason to attempt one. On October 9, 2003, we said goodbye to JC.

Except for the first few months and the last few

weeks, his post-osteosarcoma life was a wonderful time for him. He acquired that gentleness and grace all older Greyhounds seem to develop. Our love for him grew as we realized how fortunate we were to have every new day with him. — Martin Roper

Caito (38 months)

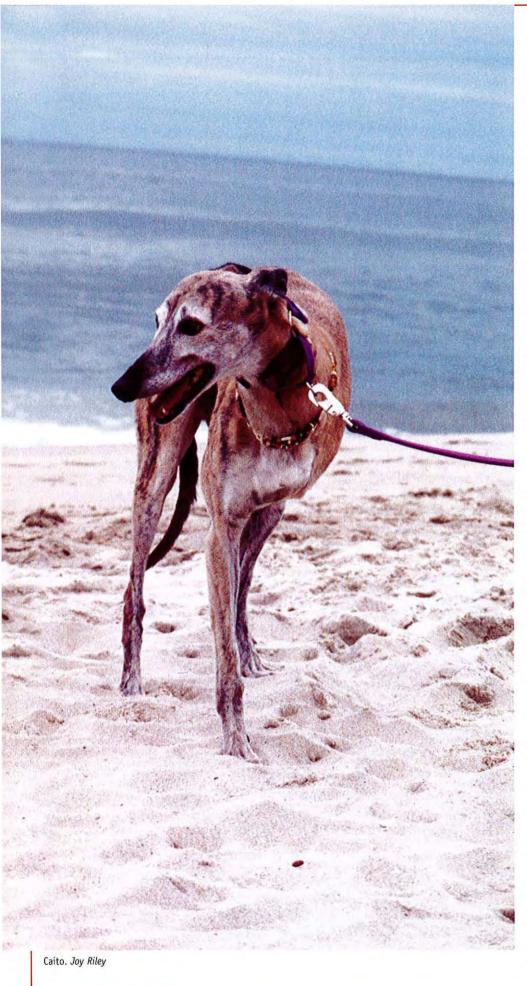
Caito was a happy, healthy 8-year-old when he came in from a play session favoring his left front leg. I gave him enteric-coated aspirin. Caito was still limping two days later. We brought him to Dr. Karla Awalt, a graduate of Colorado State University who knew Greyhounds.

Dr. Awalt thought a toe might be bothering him. X-rays comparing the lower parts of his front legs showed a difference. Just above the joint on his left ulna was a very faint shadow which may have gone unnoticed without the comparative films of the right leg. Dr. Alwalt called Auburn University and scheduled us into their small animal clinic the following Monday. I talked with our regular veterinarian, Dr. Jeff Sims, about options. Removing a leg from a world-class athlete was unfathomable to me, but as we talked about pathological fractures and pain control, I decided this was the route we'd go if Auburn confirmed the diagnosis of osteosarcoma. Caito's lungs were clear and his blood work normal.

Caito's leg was amputated on September 21, 1998. His recovery was uneventful. He used a homemade ramp to get in and out of our Ford



JC. Nicole J. Hill



Explorer and he mastered the steps at home in a few days. In the meantime, I had talked to many people with osteosarcoma experience and done in-depth research.

An agonizing month later, the diagnosis was confirmed via the pathology report. Dr. Sims consulted with veterinary oncologists in Memphis, at Colorado State University, and at Purdue University. We chose Adriamycin[®] chemotherapy beginning in late October. Caito received treatment five times on alternate Fridays. As a nurse, I expected the worst, *i.e.*, vomiting, diarrhea, and loss of appetite. Dr. Sims hydrated Caito and ran complete blood work two days before each treatment. He gave Caito an anti-emetic and sent him home with Reglan[®]. The only adverse effect was fatigue.

After finishing the chemotherapy, Caito seemed to be stiff despite taking glucosamine throughout. Ady Cerrata, whose Greyhound Sabre was diagnosed with osteosarcoma shortly after Caito, worked with a holistic veterinarian who performed acupuncture at home. She suggested we try it. Caito was better after one treatment. The acupuncturist came to our home three more times.

Caito went on to enjoy hosting countless foster Greyhounds, doing meet-and-greets, and romping on Dewey Beach the following year. In late October 2001, Caito's back leg began to bother him. He was the last to go out and last to come in, but was eating fine and his spirits were good. Blood work and X-rays looked good. Dr. Sims felt the slowdown was neuromuscular, age-related, and the result of Caito being a tripod for over two years.

On November 11, 2001, Caito finished his dinner. While on his bed in front of a roaring fire, he gave a faint startle. I immediately went to him, and he quietly died in my arms. Caito left this world as peacefully and as perfectly as he lived in it. — *Joy Riley*

Josie (37 months)

In 1994, we adopted Josie. By 1996, when he was four, he became lame in the right front leg. The diagnosis was osteosarcoma.

After much research, we consulted with holistic and traditional veterinarians. Rather than amputation or traditional chemotherapy, we opted to treat with mega-doses of antioxidants and the anti-oxidant supplement pycogenol in addition to some traditional medications.

Josie's daily regimen included vitamins C (1,000 mg) and E (1,000 IU). We administered pycogenol in 90 mg doses three times a day. Fairly

new to the United States in 1996, pycogenol has been available in Europe since the 17th century. Feldene®, a traditional medication, was also partly accountable for slowing the growth of the tumor, according to Harold Reece, DVM, Josie's Chicago surgeon. For pain management we gave 100 mg Rimadyl® tablets after a complete blood count (CBC) was done and when absolutely necessary. All the veterinarians agreed this protocol shrunk the tumor and saved Josie's leg.

Josie went into remission by New Years Day, 1997. Encouraged, we sought help from Dr. Stan Gorlitsky, a South Carolina holistic veterinarian, who prescribed European, Chinese, and Native American herbal remedies. He suggested sprinkling one to four tablespoons of lameze, a blend of nine oriental herbs with licorice, on each meal. There were many meals where Josie actually flipped his dish over as if to say, *I'm not eating that!* We became experts at administering pills, either by coaxing with a tasty treat or literally throwing them down his throat. The hardest thing some days was to get Josie to eat after taking so many supplements, pills, and medicines, but our efforts worked.

The vitamin/supplement doses and the new doctor's herbal protocol kept Josie cancer free until March 1998, when he experienced an unfortunate fracture in his left hind leg (through the lytic, or destroyed, area of the tibia). The cancer regenerated faster than the healing process. Josie's leg was amputated up to mid thigh in late August of that year. Josie took longer than usual to recover from surgery and two months to learn to adjust to life on three legs. There was much bruising, but the area healed nicely.

At his death in January 2000, Josie weighed as much as he did with four legs — 84 pounds. He was still strong-willed, spunky, and a bit of a brat. Overall, he had more good days than bad in his eight years.

The cancer never metastasized to the heart or lungs; he never had an infection. Today, veterinarians reminisce with us because his case was such a learning experience. — Art and Sharon Stefanski

Slick (51 months)

Slick was diagnosed with osteosarcoma in August 1998 after he broke his leg. There were no physical signs prior to the break — no limping, favoring, or soreness. Doctor Mary Jean Gorse, DVM, MS, of Veterinary Specialty Services in St. Louis repaired the leg because there were no visible tumors at the time. She said the screws went



Slick. Nancy Miller

in well — the bone was strong — and that made her think there was no cancer involved. Fortunately, the veterinarians at the practice always do a biopsy for a suspicious break, and that is how we discovered the cancer so early. If not, the scenario could have been very different.

Slick's right front leg and shoulder were amputated. He underwent a dual protocol chemotherapy treatment of cisplatin and Adriamycin®, receiving four treatments three weeks apart. The first treatment was delayed because of an infection at the amputation site; they had to reopen part of the wound and cut away some dead tissue several weeks later. That prolonged healing time and postponed the chemotherapy.

Slick did really well, despite concerns about the delay. Because he was the second dog at the clinic to have the dual protocol chemotherapy, there were no statistics on longevity. They told us that Slick had an 80 percent chance to be alive after 12 months and a 50 percent chance to make it to 24 months. Slick's ordeal was featured in a television news story in St. Louis, Missouri.

In July 2000, two years after the diagnosis, they found Slick had a tumor in his lungs. We watched it for several months. Because the tumor grew very slowly and was the only one, we opted to have it surgically removed. Much to everyone's surprise it was a primary lung tumor and not metastasized osteosarcoma. We never expected to buy that much time for him, so we considered ourselves very fortunate. Slick was euthanized on

November 23, 2002, not because of osteosarcoma but from complications of old age.

These seven dogs represent only a small portion of Greyhounds with osteosarcoma and by projection, show only a small portion of treatment successes as well. Greyhound osteosarcoma terrifies us, yet these stories show it is not an immediate sentence of death.

Marcia Herman was the founding editor of Celebrating Greyhounds Magazine and served as its editor-in-chief through the Fall 2001 issue.



Josie. Art and Sharon Stefanski

Be Creative and Have Fun with Greyhound Rubber Stamps

By Lisann Porter and Becky Taggart-Redmond

Your rubber stamps can be used to make a wide variety of items, including gift bags and boxes, scrapbooking projects, gift tags, gift wrap, bookmarks, and greeting cards and notecards for all occasions. You can also decorate furniture, walls, picture frames, paper napkins, fabric, t-shirts, and even doggie treat bags.

All projects begin with rubber stamping basics:

Assemble your supplies. First, you will need rubber stamps. Most craft stores carry rubber stamps and stamping supplies. An excellent selection is available on line at www.stampinup.com. Voyagers Jewelry Design (www.voyagersjewelrydesign.com) carries a large line of Greyhound rubber stamps. You will also need ink pads (black and two or more colors), card stock and paper, envelopes, glue or adhesive (stick or bottle), markers, pens, pencils, and a really good pair of scissors. As you become more practiced, you may also want to acquire a paper cutter, ribbon in assorted colors, textures and lengths, and a stamp positioner (similar to a T-square ruler). Fun supplies for future projects could include glitter, embossing powder, an embossing heat tool, and brushes.

Practice stamping. Using scrap paper, learn how to position the stamp, how to ink the stamp, how much ink to use, and how hard to press down on the rubber stamp. Always practice first on scrap paper before using your good paper. Practice on various types of paper, because inks and stamps produce different results on different kinds of paper.

Press the stamp on the inkpad several times. While holding the paper down, press the stamp firmly on the paper. Then lift the stamp straight up or pull it directly away from the surface; always pull straight and not at an angle. Do not rock the stamp.

Store ink pads flat and upside down, in plastic zipped bags or in plastic containers. Keep them at room temperature and away from the sun.

Clean the rubber stamps before putting them away. A commercial-type stamp cleaner (liquid or cleaning pad) is best because it contains a conditioner that keeps your stamp in like-new condition. Water mixed with a gentle soap or even alcohol-free baby wipes will also work.

Text can be added to cards and projects several ways. Rubber stamps are available with individual letters, words and short phrases or titles. Text can also be printed directly on your card stock using a computer and printer, or you can write by hand with permanent markers.

Once you use and practice the basic stamping techniques, remember to practice, practice, practice. It will be easy and lots of fun to let your creativity run wild, as the three examples illustrate.



With photos, assorted paper, and Greyhound rubber stamps, the creative possibilities are endless. Here are two.

Greyhound Note Cards

Materials needed:

- 5 1/2 x 8 1/2 in Confetti Card-Weight Paper
- 4 1/4 in x 3 1/4 in piece of brown or tan paper, card weight or lighter
- 14 in piece of 1/4 in wide ribbon
- 2 2 in x 2 3/4 in pieces of red paper, card weight or lighter
- 2 1 3/4 in x 2 1/2 in pieces of brown or tan paper
- 1 1 1/2 in x 2 1/4 in piece of white Confetti or white card stock
- 1 photograph, cut to approximately 1 1/2 in x 2 1/4 in
- Black inkpad
- Napping Hound stamp from Voyagers Jewelry Design
- Colored pencils

Instructions:

Fold the Confetti Card Weight paper in half.

Center and glue the 4 1/4

in by 3 1/4 in piece of brown or tan paper on the front of the card.

Wrap the ribbon clear around the front edge of the card. Tie it and trim the ends.

Center and glue (over the ribbon) the two pieces of red paper.

Center and glue the two remaining pieces of brown or tan paper over the red paper.

Center and glue over one piece of brown paper the piece of white Confetti or white card stock.

Center and glue the photo over the remaining piece of brown paper.

Using your black inkpad and your Napping Hound (or other Greyhound) stamp, stamp a Greyhound on the bottom piece of white Confetti or card stock. Let the ink dry.

If you wish, use colored pencils to shade in some red fawn color on the dog and to color the collar red.

If you wish, you could use Greyhound stamps or photos in both sections. Change the sizes and shapes of the sections to fit your stamps or photos as you wish.

Lisann Porter and Becky's Taggart-Redmond and Becky's Greyhounds) work together and promote Greyhound Adoption every day at Voyagers Jewelry Design in Cambridge, Wisconsin (www.voyagersjewelrydesign.com). The Redmonds have been adopting Greyhounds for 14 years; the Greyhounds continue to be inspiration for their Greyhound jewelry and rubber stamp designs.





Harry, adopted by Nancy and Andy Smith of Birmingham, Ala.

What to Do When There's Nothing to Be Done

By Lee Jolliffe

You're a good pet owner and you've taken your Greyhound to the veterinarian for a cough or the sniffles or a slight limp, fully expecting to be given a simple prescription to take home for your dog. Instead, you are caught completely off guard by a different diagnosis. It's cancer. And it's terminal.

Actually, the title of the book First, You Cry is wrong. You probably don't cry. At first, you're too shocked to take it in. It's bewildering as well as heartbreaking. Having been through this twice with my own sighthounds and having been there as friends have coped with terminally ill dogs, I am writing to share what I've learned about making your way through this difficult process.

First, move slowly and make no snap decisions. Pop psychologists tell us the first stage of grief is denial. Yet in veterinary medicine, sometimes the diagnosis really is wrong. The signs of cancer — even what appear to be tumors on x-rays — can be present in ailments other than cancer, and the dog can't describe how he's feeling to help confirm the diagnosis. One of my Whippets coughed just two or three times one night. The next day, he was diagnosed with advanced, inoperable lung cancer. He had a cluster of tumors near his heart that even I could see on the x-rays. On his next visit a few days later, they were all gone. The "tumors" had been artifacts of congestive heart failure, clouding the x-ray. (Sadly, the heart failure was also a terminal diagnosis. Though caught early, it was eventually untreatable.)

Even if the diagnosis is correct, you need time to process the information, to deal with your emotions enough to formulate reasonable questions for your veterinarian. Unless you're told that immediate surgery is needed, give yourself at least a full day to think about how you'll handle this. And allow your approach to evolve as you learn more and monitor your Greyhound's progress.



Carrie, adopted by Bill and Amy Reynard of Winston-Salem, N.C. Rich Hoynes

Next, meet with your veterinarian to discuss treatment options and costs. Ask if there are treatments that could extend the life of your dog, but be sure to weigh the invasiveness and pain involved against the potential for survival. In other words, it's not necessarily fair to put a dying pet through major surgery.

You will want to save your animal's life. But your veterinarian can help you determine what is realistic. You must decide whether to step back and only manage the symptoms or embark on an all-out effort at life extension.

You might want to be wary of a teaching hospital looking for cases where students can practice advanced techniques, or a veterinarian who is gung-ho to perform surgery or complex treatments, when you have a terminal diagnosis. Get a second opinion. Find out what outcomes are possible. How much real help is surgery, chemotherapy, or radiation? (Notice I don't mention searching the veterinary journals. If you have the medical background, fine. If not, you may find them to be frightening gibberish.)

If you decide to consult a specialist, ask your veterinarian for help. Taking my sighthound to Iowa State University's heart specialist would have cost \$400 just for an initial visit, and I was

expected to pay to rerun tests and x-rays my own doctor had already performed. But through my doctor, I was able to get the most important advanced test done for only \$100 as a "consult" by the \$400 specialist.

Ask your veterinarian what expenses to expect during the course of the disease. To keep my Whippet with congestive heart failure alive for six months cost over \$100 a month in prescription medicines alone. While your entire decision won't be based on cost, the impact of a sick pet on the family budget can be substantial.

Whether you choose palliative care or surgery, the next step is adapting your home and routine to fit your Greyhound's newly reduced abilities.

Become your Greyhound's rehab team. When a newly disabled human is leaving a hospital rehabilitation unit for home, a rehab team meets: Physician, rehabilitation nurse, occupational therapist, social worker, and even a universal-design architect. The team analyzes the person's limited physical capacities and creates a plan for adapted homespace and daily routines. For the human, this might mean "swing-wide" door hinges to accommodate a wheelchair, a ramp from the garage into the house, or a roll-in shower.

For your Greyhound, rehab planning is even more important, because she can't tell you verbally what she needs. You have to trust your intuition and pay very close attention to nonverbal cues from the dog. Imagine what is best for her minute by minute, much as you would for a human infant.

Tap the Greyhound network. While you're working with your veterinarian on treatments and managing your home to give your Greyhound the best care, be sure to get support for yourself in your sorrow, too. Yes, far more terrible things are happening in the world than the loss of a pet, but you love your Greyhound and fortunately, millions of people are like you in sharing their love with animals. Spend time with other Greyhound owners in your nearest Greyhound rescue group. Look for commiseration from friends who have dogs. Allow for some private time just to live with the grief. Nothing makes the grief disappear, but knowing others feel the same is calming.

Contact your veterinarian when you see changes or new symptoms. The illness is terminal and you know your pet is only going to become more and more ill. If symptoms change or deterioration accelerates suddenly, go back to the clinic. Changes in medicines may be necessary. Entirely new conditions may be present. Random viruses will take advantage of an already weakened pet. For instance, a cancer patient with nausea suddenly also got a fever. The pet had an ear infection, unrelated to the cancer except that the pet's compromised immune system allowed the infection to take hold. The Whippet with congestive heart failure developed small granules at the corners of his eyes. He had developed clogged tear ducts and might have lost his eyesight without immediate treatment for the new condition.

Let go when you must. How do you know when it's time to quit fighting? Fortunately, there are some ways to tell. First, let your veterinarian help you decide. Veterinarians have more experience in recognizing the last stages of each type of illness. They also know when the quality of life takes a sharp downhill turn.

The simplest test is eating. As long as your Greyhound is eating moderately well, you are doing the right thing to keep on going. When the dog quits eating, your time is extremely short.

Euthanizing a sick pet is not necessarily appropriate in the early stages of cancer, where your pet's health gradually deteriorates, possibly over the course of several years. Putting an animal down is more appropriate to dreadful mangling from a car accident or clear suffering in the late stages of a painful illness. You do not necessarily have to hasten the process of dying, particularly early in the course of a disease. Check with your veterinarian and ascertain whether your dog is in pain or will eventually be in pain. If not, set aside that idea that you need to make a potentially wrong decision. This is a weight you may not need to carry.

Sometimes you can tell your dog is rapidly slowing down and actually foresee that death is imminent. Consider taking a dog who loves the outdoors outside to die, curling up with him on a coverlet in the grass under the trees. Sometimes death isn't foreseeable at all. One sick Whippet fooled me frequently. Many times I thought he would be gone before I came home from work. Yet the day he finally did die, it was totally unexpected. He had seemed better that day, not worse.

Whether predictable or a sad surprise, your sick dog will gradually fade and then, choosing her own time, die.

Now, you cry.

You, meanwhile, have given much to your

Greyhound during the illness. The best thing now is to cry. Then pull out your photos of your Greyhound before she got sick — running like the wind in a lure coursing event, romping

are some of the areas in which you may find challenges along the way:

Personality Changes. Even if the cancer doesn't slow down blood flow or brain activity, being sick will affect your Greyhound's personality. Expect bewilderment at new limitations. The dog may have a shorter temper with other pets, be grouchy with children,

aring for a sick pet is a journey. Here

Your real Greyhound is still there, but wrapped in some traits of an invalid. Just as we don't reject elderly humans (or babies) for their limits, remain open to your Greyhound

and be needier with the primary caretaker.

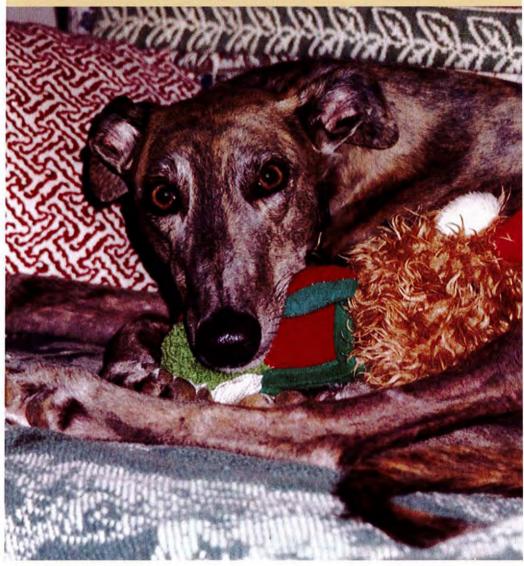
You may be tripping over a dog who is forever

just behind you and under your feet.

in the yard with the other dogs, sleeping upside down in that silly "dead cockroach" pose, stealing the cat's toys, bursting with life. This is the Greyhound to keep forever in your heart.

and adjust your expectations. (It would be cruel to scold a sick dog for snapping at a playful child, when the dog feels terrible and only wants to be left alone.)

Medications and Side Effects. Ask what primary results each medication is meant to offer, and check on common side effects. It's reasonable to keep charts of multiple medications, effects, and the timing for administering each pill to a terminally ill dog. Some medicines may be prescribed primarily to alleviate the side effects of others. But know whether to expect sleepiness, confusion, rashes, or disinterest in food or drink, so you can respond to your pet's needs. For instance, if your dog won't drink enough water, try hand-feeding ice chips. If neither drinking



Mocha, adopted by Laurie Sterling of Shavertown, Pa.



Susie, adopted by Bill and Kathy Helm of New Boston, Mich.

water nor ice interests the dog, try freezing chicken broth and making it into ice chips, or use salt-free chicken broth in place of the drinking water.

Running, Jumping, Climbing, Walking. Watch the x-rays and track the locations of the cancer. Observe your Greyhound's outward physical condition. Involvement of the heart, lungs, joints, or limbs will mean that you should limit your dog's activity. An easily winded dog is safer walking than running. Tender joints don't need to be jumping on concrete. At first, you may be able to use simpler measures, like leashed walks instead of untrammeled runs. Later, you may also

have to help physically, lifting the dog down steps or into the car, or providing a steadying arm while your male dog relieves himself. Inside, the short jump up onto your bed may become impossible without your help.

Contact with Other Pets. Greyhounds are like snack food. Some of us can't have just one. And a romping group of Greyhounds can injure the already sick one, even unintentionally. It's best to isolate the weak Greyhound when you aren't there to supervise, so that an exuberant young-ster doesn't jump right onto the sick dog's tenderest sore spot. You also don't want your sick pet to gallop around with more rambunctious buddies, and early in an illness, she may be tempted. This isolation also works to the sick Greyhound's advantage, because you create an adapted space just for her.

Special Spaces. Outdoors, you may need to create a lightweight ramp to help your Greyhound reach terra firma. Even a wide board with a chock at the bottom to steady it will work. Sometimes a smaller enclosure is needed. One friend's dog with a slow-growing cancer began to lose track of where he was and would panic in the back yard. With a smaller, crudely fenced off area, he was fine. Indoors, a separate room for the sick dog may be needed, even for owners who usually crate their pets. For instance, if a diuretic is prescribed to help keep your Greyhound's lungs clear, crating would be unkind, because the dog will have no choice but to urinate and the impulse will come on without warning. Better to use a bathroom with plastic and newspapers on most of the floor, with bedding in one section, than to condemn the poor animal to soiling her crate and sitting in cold, wet urine all day.

You will want to spend more time with your sick Greyhound, knowing that time is growing short, but illness does lead to loss of bodily control. If your pet has accidents as a result of the disease, pick a bed or sofa (I admit, I picked all the beds and sofas) and wrap it in heavy-duty plastic, available cheaply as vapor barrier at hardware stores. Then wrap bedding and blankets on top of your plastic. You'll do a lot of laundry, but you can cuddle your dying pet as much as you want. I am convinced that this contact helps the sick dog rest better and supports the immune system's fight against the illness, prolonging life and making the illness more bearable for both of you.

Temperature and Bodily Comforts. Greyhounds are not very tolerant of cold temperatures. As the

sick animal loses weight, he'll become colder much more readily. Watch carefully and provide warmer rooms and more covers as you notice your sight hound is less able to fend off the cold. (You probably don't need to be told that space heaters and piles of blankets on the floor don't mix. Open up those heat vents instead.) I once brought my elderly Greyhound home from a kennel, and noticed that every time she came in from outside and went to her crate, she gave me the dirtiest look. I phoned the kennel and asked whether they'd been giving her some particular type of treat. The kennel owner said she had been so sorry for my "skinny dog" that she had been putting her crate blankets into the dryer to warm them up for her. I took the hint. And this would clearly be a kindness to a sick dog thinned down by illness or age.

Most Greyhound owners are already giving their dogs super-soft, cozy beds. But now is the time to think like a hospital and provide a thick foam mattress like the ones used for people with cancer and AIDS. Or pile up several thick comforters. After you put your dog to bed, stay to cover him up, too, after he settles into his cozy nest.

Stimulus/Response and Food. Basic psychology tells us that a response must immediately follow the stimulus to be effectively linked. Just try punishing your Greyhound for a puddle by the door, hours after it happened. The dog doesn't seem apologetic. Instead, he looks resentful, as if to say, "Who, me? What puddle?" The one exception to this requirement for close timing in the stimulus-response link is nausea. In a phenomenon called the Garcia effect, an animal experiencing nausea hours after the food "stimulus" will still be able to associate that nausea with whatever was last eaten. This can become a quandary, because one true test of whether your Greyhound is nearly at the end of her life will be whether or not she's still eating. Yet many cancers and other terminal illnesses will make your pet feel nauseous.

Your challenge is to continue to come up with foods your dog will eat. Ordinary kibble is often unpalatable to a sick dog. You may have to change the menu every two or three days, as the dog learns to associate the newest food with the continuing nausea. Don't alight happily on a food your Greyhound will eat and buy huge quantities. The day after tomorrow, raw hamburger in a slurry of hot water — so appetizing yesterday — will be a complete turnoff to your dog. My own sick dogs have preferred raw ham-

burger in hot water, browned hamburger with or without milk, sweet ham (an all-time favorite), egg noodles cooked in canned beef broth rather than water (and served with the broth), egg noodles cooked with the greasy broth from a sweet hambone (not the salty type), scrambled eggs, boxed corn bread stuffing, and stewing beef cooked slowly with lots of broth. With my favorite dog breeder's advice, I added a vitamin and mineral supplement to many of these meals until my dogs turned down meals with the additive, associating that with the nausea.

While most of these foods do result in a more odiferous pet, seeing your sick dog wolf down her food is worth a bit of diminished air quality.

Work, Leisure, Travel Plans, and Sleep. Supporting your dog-owning habit will likely require that you leave your sick pet at least long enough to go to work, but if your dog's time is short, curtail some leisure and travel to spend more time with your Greyhound while you can. (There is much to be learned about people from their reactions when you tell them you can't make it to an event because you want to stay with your sick Greyhound. At my workplace, we all looked anew at our resident curmudgeon when he had to take a personal day after his dog died.) If you do need to travel, consider whether to take the sick dog with you or have a trusted friend take care of her in your own home. A sick dog left in a kennel may die in the owner's absence. Very often, they simply give up. (Veterinarians in several states have told me this, over my lifetime.)

With my hostess's permission, I took a sick sighthound with me on a 12-hour drive to participate

in a family wedding. During the wedding and reception, I hired a sitter for the dog, just to be with him and to let him out when he needed it. He lived five more months, but I am not confident he would have lasted that weekend at a kennel.

Even if you are staying home as much as you reasonably can, there are seven or eight hours every day when you are not caring for your sick dog. You are asleep. If you usually allowed your Greyhound to sleep at the foot of the bed before the illness, let him sleep there now, if you can. If you kept the dog in your room at night, try to continue that now. If your dog usually slept downstairs while you slept upstairs, though, you may want to change your habits during this final illness. A sick dog seems to rest easier with its owner nearby. A worried owner sleeps more soundly, too, if the sick dog is not a whole staircase away. Knowing that the arrangement is short-term, consider shifting to a sofa in the family room to be with the Greyhound, or bring the sick Greyhound into the bedroom even if your dogs are usually forbidden there. Your dog's ability to rest can enhance his immune response to illness.

Lee Jolliffe lives in Des Moines, Iowa with her teenaged son, two Greyhounds, three ferrets, four cats, five Cockatiels, a guinea pig, a gecko lizard, and miscellaneous wild creatures who stop in to visit. To support her pet paradise, she teaches magazine journalism at Drake University. Her thanks go to Deb Narwold, sighthound breeder in Kelley, Iowa, and veterinarians Michael Henning and Lisa Takes at Starch Pet Hospital, for their help, support, and extremely good advice on coping with terminal illness in dogs.



Harmony, adopted by Gordon and Nancee Dexter of Missoula, Mont.



The Scream Porch

Story by Bruce DeKing as told to Nancy Waddell Illustration by Bruce DeKing

ne of life's greatest pleasures for my wife Adrienne and me centers around our screened porch. At the end of a hot summer day, with the late afternoon breezes and the fragrance of my just-mowed backyard, the porch is a sanctuary. Add the company of our Samoyed/Shepherd mix Sammy, Greyhounds Duncan and Future, and the promise of a dinner that will taste great regardless of what it is, and our screened porch seems almost, well, decadent.

It had been just such a day. I was sweaty and a little ripe after mowing the grass. As I headed toward the shower, Adrienne left for the store to gather the makings of the night's dinner. The dogs were in various stages of snoozing around the living room. All was right with the world.

Or was it? Getting out of the shower, I'd heard a lot of paw traffic out by the kitchen door. I wrapped a towel around my waist and ventured into the kitchen. All three dogs were standing or dancing at the door to the porch. "Do you guys have to go out?" I asked. There's a doggie door on the porch, so they could just continue on through to do their business. I let them out and returned to the bathroom, exchanged the wet towel for a dry one for my hair, and went to the bedroom to dress. I figured I had plenty of time before they'd finish and want to come back in.

Not so. There was an even greater commotion at the door. I went to make sure no one was hurt, pulling on my undershorts and tightening the towel, turban-style, around my head as I went.

There, standing on the porch and staring at me through the kitchen door, were the three dogs. Future, the gray brindle, was proudly holding in his mouth a live — though somewhat stunned — squirrel. I stepped out on the porch and Future came to me, bringing me the semiconscious squirrel as a present.

I stood there in my shorts and turban and thought this over. If I told Future to drop it, he would. But what would the squirrel — though stunned, he was beginning to show signs of stirring — do? If I tried to herd the boys into the house, would

he follow? I immediately envisioned National Lampoon's Christmas Vacation and the satanic squirrel wreaking havoc on the Griswolds' Christmas tree.

I was the master of stealth as I got Sammy and Duncan into the house. Softly, I told Future to drop it, then ushered him in as well. The three dogs stood shoulder to shoulder on the other side of the screen, enthralled by the sight of me confronting the reviving rodent.

I have never considered myself to be a student of wildlife, but I have often read the body language of my dogs and determined that they had committed some nefarious act, or were about to. The totally focused looks the three dogs were directing at the bushy-tailed varmint made me study the squirrel more closely.

Evidently, the squirrel had gotten himself together. As I turned toward him, he took off, running laps around the ledges below the screens of the porch. I got the door to the kitchen shut before the dogs could lunge through and join him.

The irate squirrel continued to run around the porch. The watching dogs were going crazy. I had to get the squirrel off the porch. The only way out was through the screen door and onto the driveway. I left the porch door open, went to the garage, and grabbed the first two implements that came to hand: a broom and a snow shovel.

The single-minded squirrel was still circling the screens as I waved the broom in his direction. He finally leapt to the floor but continued circling. As he neared the porch door, I shifted weapons, grabbed the snow shovel, and scooped him out the open door and onto the driveway. Inside the house, the dogs cheered me on with a chorus of yips and barks and "Let me at 'ems!"

The squirrel was obviously injured. He hobbled a little but made no move to get away. If he made his way into the backyard or stayed on the driveway, the dogs could still see him and, possibly, get to him. I had to direct the squirrel to the relative safety of a tree or at the least into the neighbor's yard. I took the broom and started a directional sweeping strategy, intending to maneuver the little guy toward the trees.

At that moment, Adrienne returned from shopping and pulled the car into the driveway. She looked at me and rolled down the window.

"What the hell are you doing in the middle

of the driveway in your underwear with a broom?"

She had a point. There I was, a dependable, stable, respected pillar of my community, standing in the middle of the driveway in my underwear, wearing a towel on my head, and brandishing a broom, looking for all the world like a malevolent mahout.

That evening, Adrienne and I enjoyed a delicious dinner on our newly named Scream Porch, cherishing the cooling breezes while Sammy, Duncan, and Future snoozed around us. I'd explained what happened while she was preparing dinner, and Adrienne had listened with a smile hovering around her lips. Her final words on the subject that lovely evening were a gentle admonition to me.

"Bruce, dear," she said, "it could have been worse. You could have imagined yourself to be Ben Kingsley auditioning for Gandhi." ■

Bruce DeKing is a CG regular contributor. Nancy Waddell got her first Greyhound in 1994; her house-hold currently includes 12-year-old Kelvin, 11-year-old Tess, and 9-year-olds Dasher and Sugar.





Accompanied by Lori Reynolds (center) and Matt Noar (right), the Greyhounds make their stage debut. Ching Zedric/www.ChingPhoto.com

Greyhounds Debut in Peoria Ballet

By Lori Reynolds

Overture

My 10-year-old daughter, Kinsey, has been a student at the Peoria Ballet Academy for five years. In the summer of 2003, I was asked to assist artist Holly Highfill with the huge task of painting new backdrops for the April 2004 performance of *Giselle* in exchange for Kinsey's ballet tuition. I had never done anything like this before, but it sounded like fun and I'm always up for a challenge.

Holly and I got to know each other pretty well during two weeks of long, humid 90-plus degree days and nights working without air conditioning. While we worked, Holly shared her thoughts about the scenery and props. Feeling my old creative streak re-emerging, I shared my own thoughts with her. After we finished the backdrops, Holly recommended me to Erich Yetter, Peoria Ballet artistic director, to help him obtain props for the performance.

Giselle tells the story of a 15th-century peasant girl who falls in love with a nobleman in disguise. She goes insane and dies after discovering he is already engaged and has betrayed her. It is a popular ballet, but the Peoria Ballet had not staged it before, so the costumes, props, and scenery needed to be created for the production.

During a discussion of props, Erich told me he envisioned a pack of Greyhounds for the hunt scene in Act 1. I think I may have actually jumped up and let out a whoop of excitement. He said somebody told him that I may have access to some Greyhounds. I knew my own hounds would not set a paw on the stage. Ten-year-old Casper had a leg amputated a couple years ago. He gets around just fine, but I don't like to have him stand for long periods of time. At age 12, Sam enjoys his sleep too much to be involved in much of anything. Luckily, I have stayed in touch with several people from my Greyhound rescue years as founder and first president of Peoria Greyhound Adoption (PGA), so I knew I could get my hands on some strong, young dogs.

I asked Erich if it would be permissible for the adoption group to set up a display and have dogs in the lobby for people to meet during intermission and after the show. I also wanted to include a little adoption advertisement in the show's program so people could find out about the creatures they would be seeing on the stage. He agreed, but insisted that the group working in the lobby would need to be in period costume consistent with the theme of the performance.

After the winter holidays, I started the search for Greyhounds who look like they could get out and hunt. I contacted Central Illinois Greyhound Adoption (CIGA) and made arrangements to hold auditions at their upcoming meet-and-greet at PETsMART. I also submitted a casting call announcement to the Greyhound List, a discussion group on the Internet, seeking tall, muscular, slim dogs for a ballet performance. I kept in mind that I needed big, flashy dogs with great stage presence, even tempers, and no fear of strangers, loud noises, or the weird stuff that goes on backstage. I received several appropriate submissions by e-mail, and met quite a few more perfect specimens at the meet-and-greet.

By March, one of our canine cast members was injured and unable to participate. Another had been returned to adoption by his owner. Now we were running short and the performance was only a month away. Scrambling to find replacements, I felt blessed to find a two-dog Greyhound owner. At the same time, since the human costumes were finished, it was time to start thinking about the canine outfits.

Rehearsals had started for the human cast, but the Greyhounds weren't needed until we held dress rehearsals at the theatre. Arrangements for the dogs' dressing room were made. The Greyhounds needed a comfortable place to lounge out of the way of the hurrying dancers and off the hard floor. I was beginning to worry that as the dogs moved across the stage they might expect everyone within reach to pet them. Would they cooperate? When we stop in our designated spot, will they lie down and fall asleep?

One week before the show, I made the dogs' collars from the same fabric as that of the human costumes — a richly colored tapestry in greens, blues, and browns. After the collars were complete, I showed them to Erich in case he wanted them to be "Yetterized" (a term coined by the costume staff referring to Erich's desire to have everything sparkly and shimmering). We decided that the added jewels probably wouldn't show

because they would end up being on the underside of the dogs' necks.

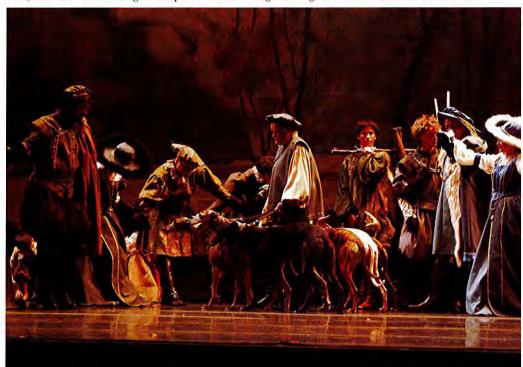
Erich told me that the production would travel to Ohio Northern University in March 2005. He asked me to arrange for the dogs to go. I suggested that it might be easier and more convenient to find local dogs rather than to transport the Peoria dogs to Ohio. He agreed, so I located an Ohio adoption group (Team Greyhound) that was eager and willing to do the job.

There was a mix-up at the first dress rehearsal. When the dogs arrived, there was no dressing room available for them. We asked a small group of young boys to leave their tiny little dressing room to make room for the dogs. The room was small and stuffy, and the dogs panted and drooled. Just before our grand entrance, we made our way to the backstage area, took a quick pit stop at the grassy area just outside the backstage door, and then hurried to get into position and

black dog on the floor, he stopped dancing and bent over with laughter. Erich probably needed a bit of comic relief at this stressful time, and our first dress rehearsal ended on a happy note. We left the stage and discussed the dressing room situation. We decided to set up a place for the dogs in the loading dock just outside the backstage area. We would keep the dock door open so the dogs could enjoy the breeze and stay cool. We made plans to meet there the next evening.

At the second dress rehearsal, I was surprised to see that more people showed up with more dogs, about 12 in all. I was pleased, but a little confused about what to do. Did we really need that many dogs? Would owners' feelings be hurt if we didn't use them all? I left to get into costume.

I returned to a flurry of excitement about a special visitor. Roberta Flack was performing at the Civic Center. As she arrived, she saw the dogs waiting around the truck dock area. She



Ching Zedric/www.ChingPhoto.com

wait for our cue. The dogs were a bit confused by the strange surroundings, but happily went along with the game. They all behaved perfectly. We went right to our places, with Matt Noar, who volunteers with PGA and CIGA, and I each taking four dogs. One of the Greyhounds, Dumbledor, decided he just couldn't take it anymore and lay down. Erich had his back to us as he danced around, filling in for the professional guest dancers that would be arriving the next day. As he turned to face us and saw the tired

made her entourage stop — blocking traffic — so she could get out and visit with the dogs. She asked a lot of questions about Greyhounds and adoption, and left an address so she could receive copies of the photos that the dogs' owners were taking. Unfortunately, I just missed her.

I also returned to the dilemma of the surplus dogs. We split the dogs between Matt and I, and went on stage. My group of dogs got tangled. One pulled behind and I had to drag him to our spot with my arms and hands wound together in



Ching Zedric/www.ChingPhoto.com

all the leashes. Matt had no trouble with his group. We stopped and ran through the entrance again. Matt did fine, but once again, my group got tangled. Meanwhile, Dumbledor lay down again. This time, Rambo stood over him in a display of dominance: Growling and snapping ensued. I made the decision to dismiss Rambo (coincidentally, the dog that I had to drag in the previous run-through) and Dumbledor. Another little female seemed uncooperative and hung her head, so we let her go. That helped to thin the crowd a bit. The director had commented earlier that he really liked the look of the brindles, so we kept brindles Treat, Fritz, and Gomer; Ty, a glossy blue brindle; Oak, a sleek white and brindle; and Sunday, a lovely fawn. They were all nicely behaved and looked beautiful together. We thought that three dogs each would be easier to handle. I hoped that nobody's feelings were hurt. I worried about how the dogs would behave in the real show the next day. I was becoming very nervous.

The Curtain Rises

The dogs arrived on opening night with their cushions, treats, and water bowls. Carrie Noar brought her costume and meet-and-greet supplies. Matt and their dogs would join her in costume after he was finished on stage. We thought that if the dogs' owners would come backstage with us and help keep the dogs facing the right direction, it would help us get onstage easier. Then, they could grab the dogs when we left the stage.

Thankfully, it worked perfectly and the dogs were great. All we had to do was walk slowly in a semi-circle on the stage with the rest of the elite hunting party. Our group also included various huntsmen with bows and arrows, a pair of young men carrying a deer hung by its feet from a horizontal pole, and several couples dressed in fashionable finery. As we paraded with our dogs, we looked down our noses at the commoners in the village. Finally, we stopped in our designated spots: Matt and his pack at the front of the stage to the left, and myself towards the rear. After a few minutes of watching the main character interact with other members of the hunting party, we exited stage left.

Our big moment went off without a hitch. We all breathed a collective sigh of relief. After all the months of preparation and stress, the show went smoothly and was a great success. I ran up to the dressing room to change my clothes, then ran down to the lobby to make sure everything was ready. After a few minutes, the doors opened, and what seemed like thousands of people rushed into the lobby.

Curtain Call

Matt Noar said about the lobby meet-andgreet: "We were asked anything from the usual questions you get at the meet-and-greets, to things like 'Are your dogs trained just to do stage performances likes this? They looked like they knew what they were doing.' People were surprised to find out that the dogs were all from different families who volunteered their dog for the shows, and that the Greyhounds had no special training. The people were very close; hands were everywhere, reaching in on the dogs. The children were usually up front with their parents trying to get to them, but stuck in the crowd. At the end of the performance, we continued to stay in the lobby. Most people were heading home, but persons coming to the table seemed a little more serious about the dogs and the group, and interested in adoption."

Matt suggests that other groups doing a similar meet-and-greet have people dressed neatly in matching group polo shirts off to the sides with dogs, rather than just at the table. Large signage is also helpful. I think we were just not prepared for such a large crowd and didn't have enough people to staff the meet-and-greet. There was no



The Greyhounds pose with their proud owners and backstage visitor Roberta Flack. Anne Wolf

way to know how many people would be interested in seeing the dogs in the lobby.

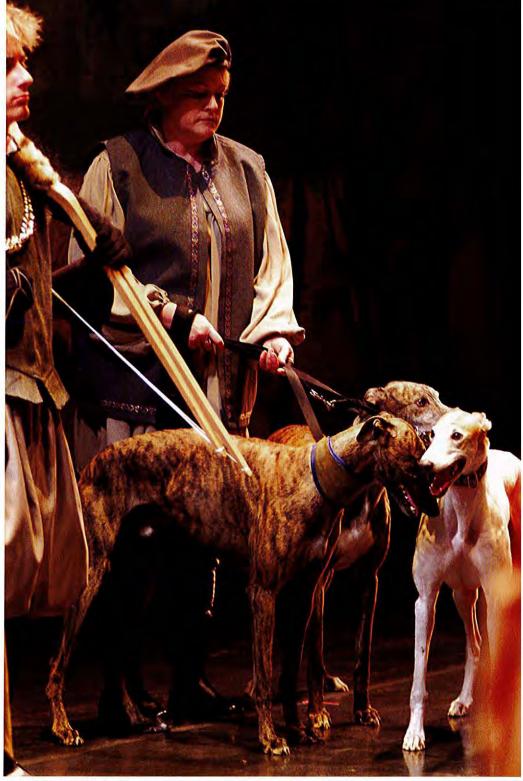
Rave Reviews

Tracy Taylor, owner of one of the performing dogs: "Fritz LOVED being in the Peoria Ballet's performance of *Giselle*! He kept heading for the stage entrance before his cue, because he knew he had gone that way the night before at rehearsal. He worked well with the dog handlers and didn't mind the wait till his entrance. Although his stage career has been short-lived, he really milked the crowd for pats on the head during intermission at the meet-and-greet. Many children and also many adults came to pet the dogs during intermission, and I think I even saw a well-dressed woman nuzzle a dog in the face. Now *that's* a dog-lover!"

Anne Wolf, owner of another performing Greyhound: "Deciding it would be fun and a great opportunity to meet some adopters from the Peoria area, I contacted Lori and told her we would love to help. The first night of rehearsal was a great experience. Greyhounds from both CIGA and PGA quickly greeted each other and found floor space to wait for attention as they astounded all that had never seen Greyhounds together. The director and ballet performers could not believe we could put 12 Greyhounds together without any commotion among them. The following night was dress rehearsal. Again, the Greyhounds were at their peak waiting to go on stage by lounging around their green room waiting for their scene. The night of the performance some of the Greyhounds were able to participate in a meet-and-greet during intermission. Matt and Carrie Noar, who volunteer with both CIGA and PGA, did a wonderful job promoting Greyhound adoption to ballet attendees who had been amazed to see Greyhounds on stage during the first act of Giselle. It was a great opportunity to show off the various personalities, coloring, and sizes of Greyhounds.

"With adopters from both adoption groups participating, none of us could recall CIGA and PGA working together for an event like this. It was a wonderful experience as an adopter to talk with others who have adopted and to share our stories. Several of us are hoping this type of gathering continues whether it is for community events or Greyhound gatherings."

Erich Yetter, Peoria Ballet artistic director: "The Greyhounds made the scene look like a Renaissance tapestry. They added a regal, equine



Ching Zedric/www.ChingPhoto.com

grace and made it seem so real. Greyhounds look like ballet dancers with their long, thin limbs!"

Holly Highfill, scenic designer and artist: "Having the Greyhounds in the scene made it more splendid, lovely, and dramatic. On the other hand, they blended in really well — didn't steal the scene, just added the right touch."

Lori Reynolds lives with her husband and daughter just outside Peoria, Ill. They are owned by their one remaining Greyhound, three-legged Casper, and four other dogs. Lori divides her time between homeschooling her daughter, volunteering for the Peoria Ballet, and babysitting hounds for their vacationing owners.



My Introduction to Greyhounds

never really wanted a dog. I'd had dogs before, but I was a cat person. I loved cats. A cat had been my best friend for over 14 years. There just wasn't anything like a cat. A cat will curl up in your lap, a cat will finish the leftover milk in your cereal bowl, and a cat will always put you in your place. Cats know they belong and that we are only here to do their bidding. Now that may sound odd, but to those of us who love cats, it's the best feeling in the world. A cat loves you on his terms, not yours and somehow, that's comforting. I don't know why, but it is.

Dogs just didn't "fit" my personality at the time. When I thought of dogs, I thought of my friend's mixed breed who always wanted to lay his head on my leg and breathe hot dog breath into my lap. Big, dumb, dirty dogs — that's how I saw them - all of them. It's not that I hated dogs; I just really didn't want one. Granted, I wouldn't have hurt a dog and if I saw one wandering aimlessly down the road, I might even try to help him find his way back home. I just didn't ever want to have another dog in my home. The fur, the mess, the fleas! I didn't have these problems with my cats because they never left my house — they were all indoor cats. Oh sure, we had fur, we had the litter box (yuck!), but we never had fleas . . . not until we adopted Bear, the American Eskimo. Bear came along before Frontline® or Advantage® — in the days of flea baths and bombing the house for fleas. Bear was, literally, a fleabag. No matter what I did, no matter what I tried, Bear had fleas.

Sometime around Bear's third birthday, we moved into a condo. The condo association did not permit dogs over 25 pounds. What would we do with Bear? At over 50 pounds, he certainly couldn't pass the weight requirement. Besides feeling bad about denying Bear his home, I was concerned about Andrea, my 9-year-old daughter; she loved Bear. I thought about where Bear could live without breaking Andrea's heart. Finally, I came up with a plan. I offered Bear to my ex-husband, knowing that he liked dogs and hoping that he would give Bear a home for the rest of his life. I knew that Andrea would still be able to see Bear on the weekends and I guessed that my ex-husband would never give Bear away lest he feel Andrea's wrath. Bear lived happily with my ex-husband for the next 14 years.

Three years after we moved into the condo, we bought a house. At that time I had one cat, Spats, and one crusty old parrot, Dillinger. I was



And then there were two: Ladybug.

content without a dog. Over the next couple of years, I adopted three more cats and, still, was quite content without a dog. I didn't actually like dogs. I still grumbled when my friend's mixed breed breathed hot dog breath in my lap and I certainly didn't miss the fleas. I could take long weekends and not worry about the cats or the bird. They were happy as long as I left out plenty of dry food and water. They didn't need someone to come in and check on them and I didn't have to impose on my family or friends to care for my animals should I decide to be gone for three or four days. I was content without a dog.

There are things that happen in our lives over which we seem to have no control. Some people call it fate; others call it destiny. I call it divine intervention. The fact was that I was a miserable person. I was combative, judgmental, and fairly negative about most people and things. To put it bluntly, I was a pretty unhappy camper and I was completely unaware of my attitude. Enter divine intervention. Larry, my husband, had a car accident on his way to work one cold January morning. Within minutes after the accident, he suffered a severe heart attack. Things were touch and go at first. Ten days and one angioplasty



More came home: Hawk (center) with Ariel (left) and Mama Dog (right).



Addison was the ninth Greyhound to call the Lavery house a home.

later, he was home. Five days after Larry was released from the hospital, we were in the family room watching television. Actually, I was watching television and Larry was sound asleep on the sofa. It was 11 p.m. Sunday night and

there was nothing worth watching. Infomercials, bad movies, and reruns of talk shows I wouldn't watch during prime time. Since Larry was recovering from a heart attack, I didn't really want to wake him. I decided I'd

watch something, and when he woke we'd go up to bed. Now, every red-blooded American male knows that women should *never* be allowed to use the television remote. Larry says it's because I broke that rule that our lives were forever changed.

As I flipped through 68 channels of mindnumbing television, I stumbled on a program about dogs. Well, cats would be better, I thought, but even dogs beat infomercials. The program was called "The Crusaders" and the piece I happened upon spotlighted Louise Coleman and her efforts to help the racing Greyhounds on the east coast. I knew nothing about racing dogs and, in fact, thought they were the skinniest, ugliest dogs I had ever seen. The show explained that racetracks on the east coast closed during the winter months and most of the racing dogs from that area had no place to go at the end of the racing season. To this day, I still say it was divine intervention that got me out of my chair that night. The program listed a phone number to call about adopting a racing Greyhound. I ran for a pencil and paper and wrote down the phone number.

Larry was still sound asleep on the sofa and totally unaware that our lives were about to take a dramatic turn. I walked over to the sofa, woke him up, and said, "Can I have a Greyhound?" Larry looked at me, blinked, and said, "Are you nuts? You don't even like dogs." "I know," I said, "but they're killing them — I just want to save one." That's all I had in mind; one dog that might not otherwise have a chance. That's right, I was a pity adoption.

The next day I called the number from the television program and requested information on adoption. I was given the phone numbers of Greyhound Rescue and Adoption near Indianapolis and Central Indiana REGAP. I called Greyhound Rescue and Adoption and talked to LaDonna Rae. She gave a quick lesson in Greyhounds, offered to send an application, and then told us we would have to travel to Waterloo, Iowa to adopt. That wasn't a problem; I just figured we'd make it a weekend trip. The application came. I filled it out, but for some reason, did not mail it back immediately. Instead, I bought Adopting The Racing Greyhound by Cynthia Branigan and started to read. When I had finished the book, I was still determined to have a Greyhound. My only concern was whether the Greyhound would not be compatible with my cats; after all, they were extremely important to me, and they were here first.



Lee Lavery with Huggie. Diane Sprehe

About the time I decided to send in the application, Larry (who had gone back to work much sooner than the doctors wanted) came home from work with a local newspaper. It contained an advertisement from a Greyhound adoption group in New Lenox, Illinois. Well, that was a lot closer than Waterloo. We called the phone number and were told we should attend a "meet-and-greet" (what the heck was that?) the next Sunday. The meet-and-greet was in Chicago Ridge, Illinois, about 50 miles from our home. After church that Sunday, in the middle of an ice storm, Larry and I slowly made our way to the pet supply store in Chicago Ridge. What we saw when we walked in was nothing short of amazing to us. There must have been 12

to 15 Greyhounds wandering around in that tiny store. Kids were all over them. People were walking up to strange dogs and petting them — even kissing them — and no dog made a sound. No barking, no growling, just wagging tails and sloppy kisses.

Larry and I continued to go to meet-and-greets for about three more weeks before we finally made the decision to actually bring a Greyhound into our home. The rest is history. The day we brought our first Greyhound home, I stepped off the ledge into the great abyss of life with Greyhounds. I really don't remember too much about life before Greyhounds, except that I had more money and more time, and my house was a lot cleaner. Apparently, there had been a void in my life that,

until the first Greyhound walked into my heart and home, I didn't know existed.

So here I am nine years later with nine Greyhounds in my home and, sadly, four more in their urns in the china cabinet. I work with an adoption group that has adopted out about 1,500 Greyhounds over the years. We have over 500 adopting families and we are in the process of building a shelter in northwest Indiana. What a ride it has been. Sometimes up, and sometimes down, but never boring and never, ever has it been anything but a blessing. Funny how things turn out sometimes, isn't it?

Lee Lavery works with Greyhound Guardians, Inc. in northwest Indiana.



The Belle Toll

A Greyhound's Legacy

By Ioni Kay Muir and Judy Pfaff-Schlappy

It was to be Belle's last race, the race to the final finish line.

Belle came back to the Rocky Mountain Chapter of Greyhound Pets of America when her owners of nine years complained that she smelled bad and had started to pee on the floor. When they banished her outdoors, she barked, further annoying them. Though it was clear this dog needed to be evaluated by a veterinarian, her owners felt it was easier to dump her.

Post time for Belle's last race was two short weeks ago when Judy brought her to my home. She was thin, her teeth were in an awful state, and her urine had a bad smell. We loaded her in the car and took her to the veterinarian's office. Urine and blood tests revealed the awful truth. She was in renal failure so advanced that she should not have been able to stand. But Belle was up and moving and eating heartily. She had light in her eyes and her mind was bright. The veterinarians shook their heads in wonder. In addition to the renal failure, she had bad teeth and a raging bladder infection.

Belle started her race with a bad break from the gate.

We decided to try some fluid therapy to see if her kidneys would respond. She seemed to rally. She enjoyed having several small meals a day and almost constant companionship. She seemed to be pulling ahead in the backstretch and we hoped she would be able make up lost ground.

Belle certainly had a crowd of people on their feet cheering for her. Watching the Greyhound community rally behind her was awesome. Volunteers lent their support, and everyone felt involved. E-mails and phone calls were exchanged rapidly, all looking for news of Belle. People dug deep in their pockets and paid the "Belle Toll" to cover her expenses. People prayed, lit candles, and hugged their hounds a little closer. All of these things are the lifeblood of Greyhound adoption and rescue. For myself, I felt a renewed commitment to the breed and to rescue.

After almost three days of IV treatments, Belle's kidneys showed no real change. This was a devastating blow as she rounded the far turn and headed into the home stretch. For another week Belle basked in the sun, waded in the pool, and ate as much and as often as she liked. She had the softest beds to sprawl on, and her every need was tenderly met.

Too soon, the finish line loomed ahead.

On Belle's last day, she became confused and restless. Her steps faltered, and the light in her eyes dimmed. We sat together and waited, her head in my lap. Then, like they all do at the end, she pulled away from the pack — our pack — and crossed the finish line alone. I hope she raced into loving arms on the other side of the wire. I hope they laid a winner's blanket across her back. Her last race may have had more impact than all the other races she ran, combined.

I relished Belle's short life with me. She seemed happy here. I tried to make her comfortable and give her the best I had to offer. I spent lots of time thinking about her and why she came home to rescue in her last days. I will long remember her sweet face. She was full of life and curious about everything up to the last. In some ways, perhaps, it would have been easier just to put her down right away, but having her here and sharing her last days were golden. We all agreed we would not take heroic measures to save her; we wanted only to give her some quality and dignity. She died among friends, securely wrapped in our love.

I hope that the "Belle Toll" will continue. Perhaps people will donate a dollar for each year of their dog's life to celebrate their birthdays or adoption dates. This money will be set aside to aid displaced senior Greyhounds. In this way Belle's last race will become her most important.

Joni Kay Muir is a volunteer for the Rocky Mountain chapter of Greyhound Pets of America. Judy Pfaff-Schlappy is Treasurer of the Rocky Mountain chapter of Greyhound Pets of America.

What is the Belle Toll?

It started the way many things Grey often do — with a phone call: "We want to return this dog. She smells and frankly, we don't even like her." As I struggled to focus on gratitude that our group had been called to intervene on Belle's behalf, I drove the ten miles to get Belle and delivered her to her new and final home, with Joni.

It was obvious the moment I met Belle that she needed medical attention. Although cost was a secondary concern, there was no doubt that her care would be expensive. At Joni's suggestion, we phoned and e-mailed our members and told Belle's story. We asked for help with Belle's care through contributions to "The Belle Toll" so that we could buy her some time or at least some comfort. We suggested that folks donate a dollar for each year of their dogs' lives. The response was overwhelming. Within a week's time, we collected over \$800.00.

Belle's care and her cremation amounted to only one-third of the money that was donated. The remaining money and the donations that still come in regularly are designated as planned — to aid in caring for displaced senior Greyhounds. In addition to the dollar-per-year donations to commemorate birthdays and "gotcha" days (adoption anniversaries), we've also received holiday gifts and memorial contributions to the fund.

Adoption groups must often come up with creative approaches to emergent situations. Perhaps the Belle Toll is a fundraising approach that your adoption group can use. We hope that provision for other Greyhounds in need will be Belle's lasting legacy.

Donations to The Belle Toll can be sent to The Belle Toll, Judy Pfaff-Schlappy, Treasurer, Rocky Mountain GPA, 641 West Artemos, Missoula, Mt. 59803.



Eliot, adopted by Diane Tothero of Conestoga, Pa

You're Invited

Saturday, September 11 Seventh Annual Greyhound Picnic Northern Lights Greyhound Adoption 11:00 a.m. to 4:00 p.m. Snail Lake Regional Park Pavilion 4191 Snail Lake Blvd. Shoreview, Minn.

Join us for a fun-filled day of Greyhounds. The fabulous Gilley Girls Dancing Greyhounds Drill Team will be returning! Shopping, food, games, raffles, silent and live auctions, and Greyhounds galore. Fun for the whole family. Contact: Donna Barr, (763) 754-9754 or guber2nac@aol.com

Saturday, September 11 (rain date Sunday, September 12) Greyhound Reunion/Walk-a-Thon Greyhound Rescue of N.E. 12:00 p.m. to 4:00 p.m. River Bend Farm Uxbridge, Mass.

A fun-filled day of interaction with Greyhounds and their owners. There will be items to purchase, a raffle and auction, food, and entertaining doggie contests. Take part in our Walk along a beautiful canal. It will be a great day for Greyhounds and humans! Contact: Michelle Tewksbury, (508) 478-1617; adopt@greyhoundrescuene.org

Saturday and Sunday,
September 11 & 12
Canine Fun Days and Greyhound Reunion
Greyhound Adoption of Ohio
11:00 a.m. to 5:00 p.m. Saturday,
10:00 a.m. to 5:00 p.m. Sunday
Cleveland Metroparks Polo Field
Rt. 87 and Chagrin River Road
Moreland Hills, Ohio

Lure coursing for fun, "just for fun" agility, fun dog show, demonstrations, fun run, The Maze, entertainment, raffles, auctions, blessing of the animals, and great food! Contact: Linda Perko, (800) 269-1148 or RJRJLP@aol.com; www.GreyhoundAdoptionofOH.org

Sunday, September 12 Second Annual Reunion and Fun Day Greyhound Pets of America/Ohio 11:00 a.m. to 3:30 p.m. Elks Lodge Defiance, Ohio

Greyhound games, lunch (\$9.00 for adults, \$4.00 for children), silent auction, raffles, and vendors. Contact: Nancy Meyer, (419) 784-2984 or jimmeyer@bright.net

Sunday, September 12
Annual Picnic/Reunion
Greyheart Greyhound Rescue and
Adoption of Michigan, Inc.
11:00 a.m. to 3:00 p.m.
Bell Creek Park
Five Mile Road and Beech Road
Redford, Mich.

Come one, come all. Visit, shop, eat, and have fun! 1-866-GET-GREY

Sunday, September 12 Second Annual Picnic Greyhound Welfare, Inc. 11:00 a.m. to 4:00 p.m. Circle D Farm 15535 Carrs Mill Road Woodbine, Md.

Catered picnic open to the public and their Greyhounds with fun games, contests, obedience training demonstration, silent auction, raffle, and more. Contact: Julie N. Sanders, (301) 980-7753 or js@greyhoundwelfare.org; www.greyhoundwelfare.org

Sunday, September 19 Greyhound Planet Day

The purpose of this international event is to raise the public's awareness of the wonder and magic of Greyhounds as pets, educate others on the current status of Greyhounds around the world, and to honor those Greyhounds who have left us already. For more information and a complete listing of events associated with Greyhound Planet Day, please visit www.ameurogreyhoundal-liance.org/ghplanet.htm

Saturday, September 19
Seventh Annual Picnic/Reunion
Quad Cities Greyhound Adoption
Rock Island Conservation Club
Rock Island, Ill.
Great vendors, good food, raffle, auction,

and the Gilley Girls Dancing Greyhounds Drill Team! Contact: Janet Stoefen, (309) 793-4578 or (309) 737-0652; janet@qcgreyhoundadoption.org

Saturday and Sunday, October 2 & 3 Fall Open House Greyhound Friends, Inc. 12:00 noon to 5:00 p.m. 167 Saddle Hill Road

Hopkinton, Mass.

Come visit with lots of other Greyhounds and their owners! Meet Greyhounds looking for that perfect home. Let your pups run in our fenced field. Food, games, and shopping for Greyhound items for both humans and hounds. Contact: Louise Coleman, (508) 435-5969 or greyhndfds@aol.com.

Sunday, October 3
Fourteenth Annual Greyhound
Homecoming
Make Peace With Animals
1:00 p.m. to 4:00 p.m.
Valley Road Picnic Site
Valley Road
Hopewell Twp., N.J.

Our annual Homecoming will be held rain or shine. Vendors, blessing of the hounds, memorial service, tick testing. \$5.00 parking fee. Contact: Jo Ann Fotheringham, (609) 448-1742 or Jofother@aol.com

Friday-Sunday, October 8 through 10 Age of Chivalry Renaissance Festival Greyhounds of Fairhaven 10:00 a.m. to 5:00 p.m. Friday and Sunday, 10:00 a.m. to 10:00 p.m. Saturday Sunset Park Lakeside 2601 E. Sunset Road Las Vegas, Nev.

For the third year the Greyhounds of Fairhaven will be promoting Greyhound adoption at the Age of Chivalry Renaissance Faire. If you will be in the Las Vegas area, please come by to say hello and meet our most noble hounds. Contact: Marsha Roe (602) 493-1063, info@GreyhoundsOfFairhaven.org; www.GreyhoundsOfFairhaven.org

Saturday, October 16
Tenth Annual Las Vegas Greyhound
Picnic in the Park
Greyhound Pets of America/
Southern Nevada
11:00 a.m. to 4:00 p.m.
Floyd Lamb State Park
Area 5
9200 Tule Springs Road
Las Vegas, Nev.

Enjoy our Egyptian-themed picnic complete with hot grilled lunch, fun contests, and an exciting raffle. Shop with vendors, artisans, and at our silent auction. Contact: Mary Kraus, (702) 392-5822 or picnicinfo@lasvegasgreyhounds.org; www.LasVegasGreyhounds.org

Saturday, October 16
Tenth Annual Gala Greyhound Gathering
Greyhound Pets of America/Wisconsin
10:00 a.m. to 4:00 p.m.
Waukesha County Expo Center
Silent and live auction, huge bag raffle,

Silent and live auction, huge bag raffle, games for dogs and kids, shopping, and much more. Come to celebrate the tenth anniversary of our biggest fundraising event, and bring the hands! Contact: Ellen Paulus, (414) 228-8695 or pawprint@execpc.com; www.gpawisconsin.org

Sunday, October 17 Houndraiser 2004 Greyhound Pets, Inc. 10:00 a.m. to 3:00 p.m. Evergreen State Fairgrounds Monroe, Wash.

Houndraiser 2004 is our last major event of the year with two Greyhound quilts as special raffle prizes, raffle baskets, silent and live auctions, Halloween costume contest, doggie games, baked goods, the complete Greyhound Pets warehouse, many vendors, and dogs available to preapproved adopters. Contact: (US) Cathy Munro, (425) 742-1388 or adopt.greyhounds@verizon.net; (Canada) Colleen Stranix, (604) 946-8202 or stranix@dccnet.com; www.macca-l.org/pet-fest2004/

Saturday, October 23 (rain date October 30)

Third Annual Greyhound Jamboree Greyhound Pets of America/Central Texas 11:00 a.m. to 5:00 p.m.

San Gabriel Park

Georgetown, Texas

The biggest Greyhound gathering in Texas! Fun, food, and fast dogs. Speed Alley, unique contests, fun games for the whole family, raffle, silent auction, vendors, Greyhound kissing booth, gypsy dog-paw reader, and other cool happenings. Contact: Jennifer Define, (512) 260-1962 or jennifer_perry@dell.com; www.gpacentraltexas.org

Saturday, October 30 Howl-O-Ween Fun Day Greyhound Pets of America/Maryland 10:00 a.m. to 2:00 p.m. Trinity Episcopal Church Towson, Md.

Costume contest, special photo opportunities, great shopping, silent auction, "pet-I-cures," sandwiches, cider, and our famous bake sale. Contact: Ethel Whitehurst, (800) 600-8607 or ethelwhitehurst@comcast.net

Saturday, October 30
Greyt Greyhounds & Friends Fair
Heart of Texas Greyhound Adoption, Inc.
9:00 a.m. to 4:00 p.m.
Graff Pavilion
O.B. Schnabel Park
San Antonio, Texas

Fun, food, and fellowship for hounds and humans at our third annual Fair. Boardwalk of games for families and their canine friends, silent auction, raffle, hound costume contest, vendors, sales, and more. Contacts: Paul, paul@heartoftexasgreyhounds.com; Elizabeth, Elizabeth@heartoftexasgreyhounds.com; Cheryl, (210) 621-0123; www.heartoftexasgreyhounds.com.

Sunday, November 7
Reunion 2004
Greyhounds Only, Inc. Adoption and
Rescue
11:00 a.m. to 4:00 p.m.
Warren Park Field House
Chicago, Ill.

Enjoy a fun day with your hounds and help raise funds for GO at the same time! Many exciting vendors selling great things for hound and human. Contests for your dogs including costume contest, mummy wrap, and more. Live auction, silent auction, fabulous bags raffles, and 50/50 raffles. Get a psychic reading for your dog and a professional photo while you're here. Contact: Lee Tauriello, (773) 743-0201 or Goreunion2004@aol.com

Sunday, November 14
Second Birthday Party
Greyhound Adoption of Greater
Rochester, N.Y.
1:00 p.m. to 3:00 p.m.
Irondequoit Mall Former Express Store,
Second Floor
285 Irondequoit Mall Drive
Irondequoit, N.Y.

Our special guest will be author Carolyn Raeke. Cake, punch, and dog biscuits will be served. Contact: Brenda Grammatico, (585) 377-0811 or events@greyhoundadopt.org; www.greyhoundadopt.org

Saturday and Sunday,
November 21 & 22
Devonshire Renaissance Faire
Greyhounds of Fairhaven
10:00 a.m. to 6:00 p.m.
Los Olivos City Park
2802 E. Devonshire Street
Phoenix, Ariz.

Again this year the Greyhounds of Fairhaven will be promoting Greyhound adoption at the Devonshire Renaissance Faire. If you will be in the Phoenix area, please come by to say hello and meet our most noble hounds. Contact: Marsha Roe, (602) 493-1063 or info@greyhoundsoffairhaven.org; www.GreyhoundsOfFairhaven.org

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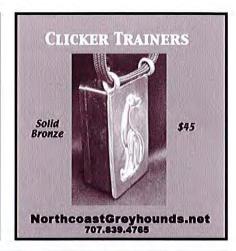
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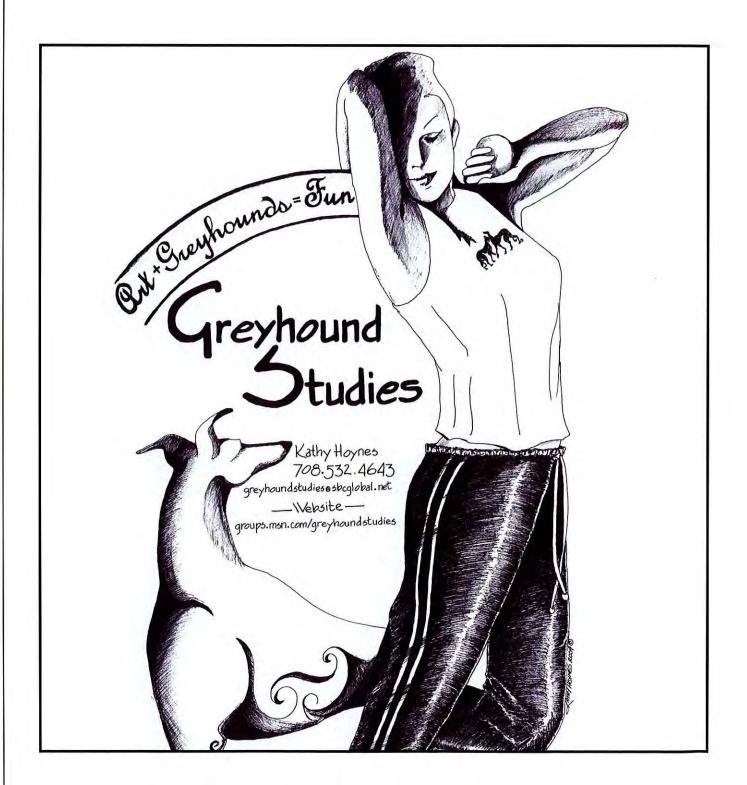
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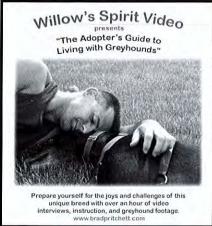


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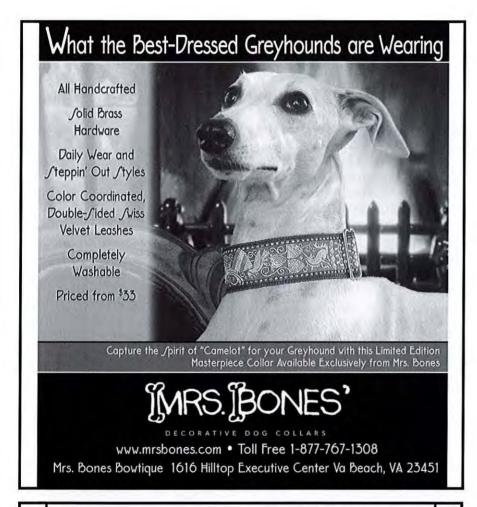
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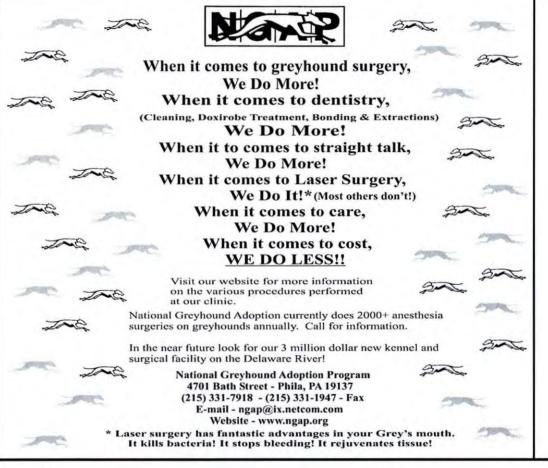
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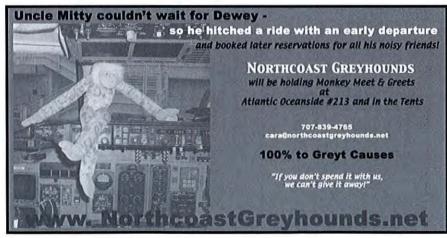
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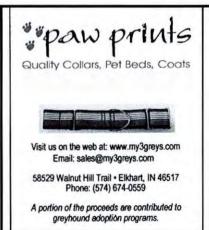
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"DON QUIXOTE DE LOS GALGOS" By Anthony Valentino Robinson

THEY NEED YOUR HELP!

Greyhounds in Spain are living terrible lives and dying horrific deaths. *Greyhound Adoption of Ohio* has teamed up with *The American European Greyhound Alliance* to bring you this beautiful print, to help the greyhounds of Spain!

Please visit our websites to learn more about these gentle creatures, to see other wonderful items that are part of this benefit and to find out how you can help!

> www.ameurogreyhoundalliance.org www.GreyhoundAdoptionofOH.org

(To see other works by this artist)

All profits from the sale of "DON QUIXOTE DE LOS GALGOS" will benefit the greyhounds of Spain.

Our thanks to The Brett Mitchell Shaheen Collection, of Greyhound Adoption of Ohio, for commissioning this beautiful print.

THE WINNER OF OUR RAFFLE WILL ADOPT "WOODY THE GREYHOUND"!

Woody is a simply gorgeous, unique, larger than life-sized, wooden, carousel greyhound! We couldn't believe it the first time we saw him! Woody is 43 inches high and 52 inches long and weighs about 75#. His estimated value is \$4500-\$5000. For additional information about "Woody" or to purchase raffle tickets, go to our site or contact us at:

Greyhound Adoption of Ohio
7122 Country Lane ~ Chagrin Falls, OH 44023
440-543-6256 ~ 800-269-1148
E-mail: RJRJLP@AOL.com
www.GreyhoundAdoptionofOH.org



Drawing to be held at Dewey Beach 2004! (Winner need not be present)



Eleventh Annual Canine Fun Days and

Greyhound Reunion

Two days of fun for *all* dogs and their people!
Sept 11th ~11-5 ~ Sept 12th ~ 10-5
Tented Event ~ Rain or Shine!
Sunday at 10AM ~ The blessing of the animals & breakfast!

SKIDBOOT'S COMING!

Back by popular demand!

You've seen him "sneak up on his toy" to win the \$25,000 finals of Animal Planet's PET STARZ competition! You've seen him on THE LATE SHOW with David Letterman, Jay Leno's TONIGHT SHOW and twice on OPRAH! Now see him at the eleventh annual CANINE FUN DAYS AND GREYHOUND REUNION!

Join us on September 11th and 12th for a weekend of fun and games! This year, our special guest, all the way from Quinlan, Texas, is SKIDBOOT! This incredible dog and his cowboy friend, David Hartwig, have been creating excitement all around the country! Now you can see him perform "up close and personal"!

In addition to SKIDBOOT, there'll be LOTS of fun things to see and do! All events are geared for dogs that have never tried them before, to seasoned competitors!

STUFF TO DO!

- Eat great food!
- Watch great demonstrations Sheep herding, Police dogs Search & rescue, Frisbee, Obedience, Carting and more!
- Participate in raffles and auctions and see "Woody" the carousel greyhound -Drawing at Dewey Beach!
- Buy greyt stuff!

STUFF FOR YOUR DOG TO DO!

- · Agility fun course
- · Lure coursing (fenced field)
- Fun Run
- · The Maze
- Open running times
- Senior Recognition (special gifts for oldest dogs)
- · Fun dog show (see right)
- Get a "pawdicure"

A FUN DOG SHOW!

- Best Costume (\$100 1st prize & silver trophy!)
- · Kissing Contest
- · Best Trick
- · Prettiest Eyes
- Best Buns
- Dunking for Dogs
- · Baldest Butt
- Find my Dog..and more

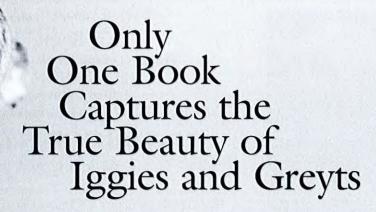
"Non-greyhound" events include "Weiner Dog Races", "Basset Hound Races" and "Little Dog Races"

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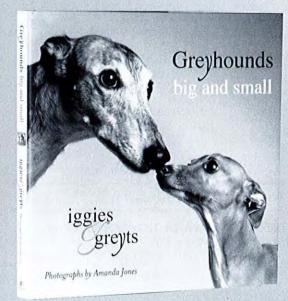
Info: www.GreyhoundAdoptionofOH.org ~ Email: RJRJLP@AOL.com ~ 440-543-6256 or 800-269-1148 Greyhound Registration ~ \$25 /greyhound family ~ Includes great welcome bag & a raffle ticket for "Woody"!

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Visit Amanda Jones on the web: www.amandajones.com

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