



Health assessment is one of the many obligations we have as licensed judges in the ARBA. Judges are one of the most visual components of a show and exhibitors value and respect their opinions. Because of this, we are obligated to offer valuable, honest, and accurate advice regarding the health of the animals we judge.

An ARBA Judge should consider their role as multi-faceted. At any given time they are an educator, an un-biased source of critique, and have the ability to make a lasting impression. The typical judge sees between 200-300 rabbits per show. With this in mind, it is important to frequently WASH YOUR HANDS after handling a large class of rabbits and especially important after handling a rabbit with some kind of ailment. Judges who refuse to wash their

hands frequently while judging are acting as vectors of disease – this is a concept that has been around for over 100 years!

General Tips

- Point out problems to breeders. When appropriate, inform them if the problem is genetic or iatrogenic (caused by you or the rabbit's environment) Offer suggestions on treatments along with differentials for problems.

Situations to avoid

- Diagnosing a medical condition. A rabbit that sneezes white, purulent material is not immediately diagnosed with *Pasteurella*. Caveats to this include broken teeth, split penis, etc.
- Judging with disregard to

sanitation. Again, wash your hands!

- Do not give "rough estimates" for drugs to breeders. Use published doses or refer them to a veterinarian. Pea sized can be misinterpreted!

Ailments

- **EAR MITES:** "Ear canker" refers to crusting, flaking, and scabbing exudates in the external ear canal of rabbits. This is caused by the mite *Psoroptes cuniculi* generally and responds well to Ivermectin therapy.

- **ABSCESSES:** The most common area for an abscess in a rabbit is around the head. The most common region on the head is along the mandible or maxilla (jaw) and usually implies a tooth root abscess. Other areas include the abdomen, inguinal region (prepuce for bucks, peri-vulvar for does), and dewlap.

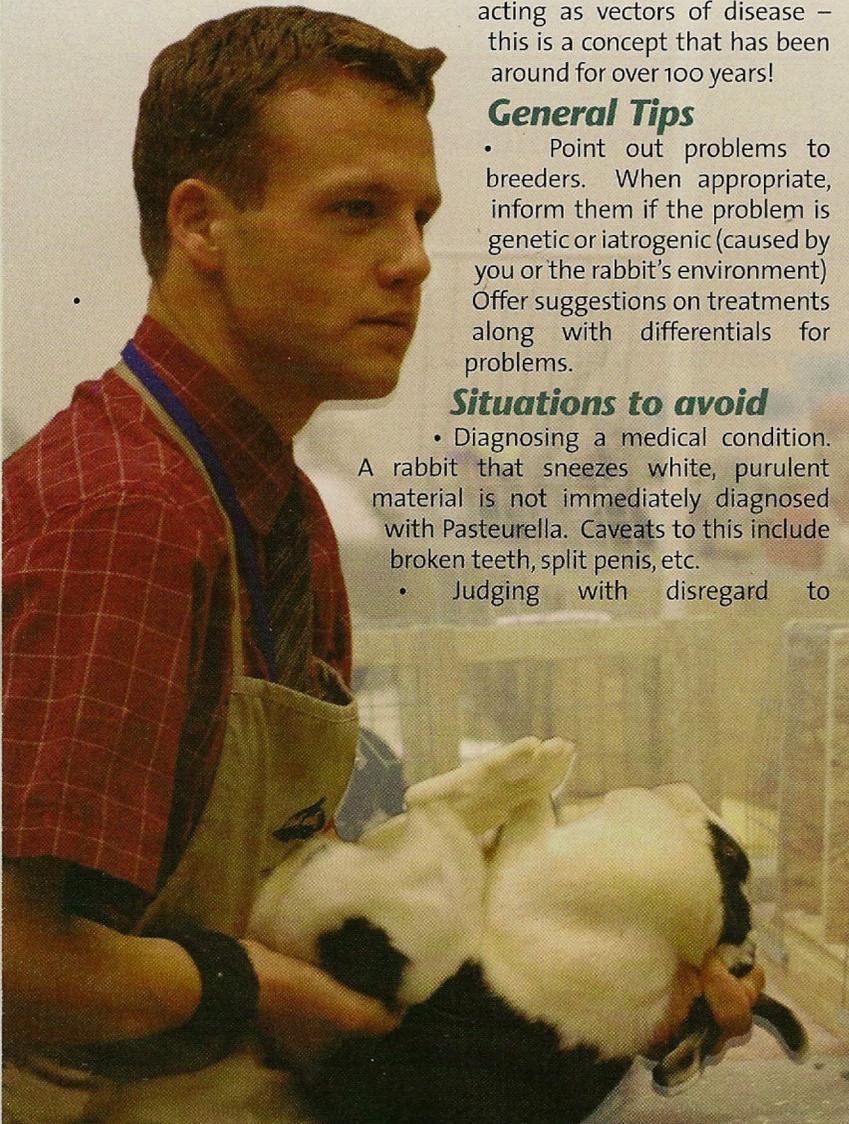
BE CAREFUL: If you palpate a large swelling in the ventral aspect of the mandible (the chin) and think it may be an abscess, palpate the other side of the chin. Large bucks with well developed heads will commonly have very pronounced mandibular salivary glands!

- **SLOBBERS:** Slobbers implies ptyalism or excessive salivation. The most common cause of this in domestic rabbits is malocclusion which may be present in the incisors or the maxillary or mandibular cheek teeth (molars).

- **FUR MITES:** Commonly referred to as "walking dandruff," rabbits with this condition will have large flakes of skin that easily epilate from the coat when evaluating. The problem is usually caused by *Chyletiella parasitovorax* and is treated in a fashion similar to ear mites.

- **COLDS:** The term "snuffles" encompasses an upper respiratory infection of most domestic rabbits. The disqualification calls for active white purulent nasal discharge. Any rabbit evaluated with lack of discharge but severe matting of the front paws should be a prime suspect and watched carefully. Stress is one of the most common reasons a rabbit will have nasal discharge. It is in the author's opinion that any judge disqualifying for this condition should immediately wash their hands before proceeding to judge again!

- **TUMORS/SWELLINGS/HERNIAS:** The majority of firm masses on a rabbit's body are abscesses. Tumors are difficult to diagnose while judging unless you happen to run a fine needle aspirate on the mass. The exception to this is large bilateral masses in the abdomen of intact does which can



be uterine adenocarcinoma. Hernias are a result of fat, omentum, or bowel loops protruding through planes of muscles. The most common locations for these in rabbits are at the umbilicus (belly button), caudal to the umbilicus and cranial to the pubis, and in the inguinal region of bucks. Hernias in young rabbits can sometimes resolve on their own following sexual maturity. Hernias past 8-9 months of age generally will not resolve and pose a serious risk especially if loops of bowel are permanently protruding through as these are prone to incarceration.

• **VENT DISEASE:** Venereal spirochetosis or rabbit syphilis is an easy to identify disqualification. The causative agent is generally *Treponema paraluis-cuniculi*. Rabbits will have inflamed, reddened, scabbed areas around the vent. Moist dermatitis may be present and a foul odor usually accompanies the infection. Scabbing on the nostrils, around the eyes, and even on the dewlap is from autoinfection while rabbits are practicing coprophagy or grooming their inguinal region.

General

• **SPLIT PENIS:** The normal penis of a buck will have the urethra exit the body via the urethral orifice and reach a tip at the glans penis. The most common incorrect disqualification I have seen is misinterpreting the urethral orifice as a split penis. Keep in mind that normal variations in anatomy allow a wide range of openings for the penis. Hypospadias is the clinical manifestation of a split penis which involves a large dissection of the shaft of the penis essentially filleting open the urethra and giving the appearance of a female at first glance.

• **TESTICLES:** Testicles descend in the buck around 12 weeks of age. Male rabbits have partially open inguinal rings implying that they can actively retract their testicles through the ring if stressed, excited, or positioned a certain way. Typically a true cryptorchid testicle will not have an associated scrotal sac present. Any judge that is about to disqualify for a non-descended testicle should first stimulate the hind end of the buck to see if the testicle is merely retracted.

Structural

• **EYES:** Blindness is a difficult abnormality to detect in rabbits due to a virtually absent menace response (a menacing gesture toward the eye will not elicit a blink as in other species). Because of this, the most accurate way to identify blindness is via gross ocular examination. Corneal opacity, stromal masses, spots in the iris, and hyphema (blood in the anterior chamber) are all reasons for disqualification.

• **CONJUNCTIVITIS:** Tears produced from the lacrimal gland in the medial aspect of the orbit help serve as a natural means of immunity for the overall health of the eye. These tears are washed away via the nasolacrimal duct – a large punctate orifice at the medial canthus of the eye. The duct is a long, tortuous canal that courses through the maxillary sinus and drains at the nares (nose). Occlusion of this duct causes backing up of tears and epiphora (excessive tearing). Tears cannot exit the eye correctly and infection ensues. Mild

cases of conjunctivitis are seen as small areas of wetness around the eye. Severe conjunctivitis presents with massive erythema of the orbit, severe matting, moist dermatitis, and possible sloughing of skin.

• **MALOCCLUSION:** Normal occlusion of the rabbit mouth involves the maxillary incisors overlapping the mandibular incisors. Rabbits are elodonts, which means their teeth continuously erupt throughout life. Severe malocclusion (wolf teeth) usually involves one or both sets of incisors growing out of check and usually cause severe consequences such as lack of appetite, pain, salivation, and abscessation. Simple forms result from the two sets of incisors meeting head on with little to no overlap. It is important to note that malocclusion does not occur exclusively in the incisors.

• **PIGEON BREAST & DEVIATED STERNUM:** Breeds with a narrow chest (various semi-arch breeds come to mind) are predisposed to these structural abnormalities. The sternum has six segments called the sternebra. The first segment is the manubrium, the middle four are the body, and the sixth segment is the xiphoid

Calling all Veterinarians

The ARBA Rabbit & Cavy Health Committee is compiling a directory of veterinarians who are available to assist the ARBA membership with their rabbit & cavy health concerns on a more local basis.

To be listed, we ask that the veterinarians satisfy the following requirements:

- Knowledgeable in both rabbit & cavy medicine & surgery
- Familiar with the drugs and dosages commonly used
- Comfortable with the concept of herd health practices in rabbits & cavies
- Sensitive to the unique doctor-client-herd relationship with breeders

Any ARBA member may submit the name of a veterinarian that he or she regularly works with. By providing the ARBA membership with a comprehensive list of veterinarians that are willing to assist our unique and highly specialized niche of the rabbit and cavy industry, we hope to further strengthen the importance of healthcare in our great hobby.

TO BE CONSIDERED, PLEASE SUBMIT THE FOLLOWING INFORMATION TO WWW.ARBA.NET:



Name of Veterinarian:
ARBA Member?
Veterinary Hospital Affiliation:
Rabbits ___ Cavies ___ Both ___
Address of Veterinary Clinic
City, State, Zip
Phone Number
E-mail contact:
Emergency service

process which has a broad plate of cartilage at the end. The term "pigeon breast" is somewhat misleading since it implies there is a breast bone. What they are referring to is the manubrium which is actually a segment of the sternum. Narrowing of the chest will cause the manubrium to angle downward and cause the protrusion you commonly feel. The medical term for this is pectus carinatum. A deviated sternum will be an abnormality of the body of the sternum or the xyphoid cartilage. This may include areas of abnormal fusion of the costal cartilage to the sternum, a mal-aligned xyphoid, or increased concavity in the sternum.

- **SORE HOCKS:** Simple pododermatitis is the absence of hair on the ventral surface of the hock and does not constitute disqualification. Advanced cases of sore hocks leave the area with scabs, active hemorrhage, discoloration, evidence of infection, and possible necrosis of the surrounding soft tissues. Severe sore hocks should be actively pointed out to breeders as these are at a high risk for causing infection of the tibiotarsal joint causing a joint infection and osteomyelitis (infection of the bone).
- **TEETH:** A broken tooth is often times overdramatized at the expense of some simple education with the breeder. As mentioned before a rabbit's dentition is one that erupts continuously throughout life. As long as the tooth root has not been extracted during the accident, you can simply tell the exhibitor the tooth should grow back just fine.
- **TAIL:** Brittle, lifeless tails are sometimes misleading. The tail is an extension of the spine and when there is a lack of blood flow to the small amounts of tissue surrounding the spine, the tail is declared dead. Hair however is usually growing in these tails which makes calling the tail truly "dead" problematic. Disqualifications arise when there is an obvious deviation of the tail which cannot be corrected regardless of re-positioning. This usually implies the tail is fractured (and subsequently healed), dislocated, or have entire

portions missing.

- **TOENAILS:** A rabbit's toenail is the most distal of three phalanges in the front and back feet. Always try to differentiate if the nail is broken or has been completely removed. If the distal phalanx is ripped out of a rabbit's paw, regrowth is not possible. Broken nails however have a good prognosis for returning to function.

Other

The following two conditions are not explicitly mentioned in the Standard as a disqualification but are serious problems and need to be addressed while judging:

- **WRY NECK:** Head tilting has a short list of differentials including infection with *E. cuniculi*, ascending infections of *Pasteurella*, neoplasia (cancer), trauma, and other forms of inflammation. Mild forms of a head tilt simply involve a visual appreciate of the angle of the head appearing deviated. Severe forms of torticollis involve entire vestibular disruption causing a rabbit to completely lose balance and begin rolling.
- **DIARRHEA:** True diarrhea is a serious problem in domestic rabbits. It must first be differentiated from compacted cecotropes that were not re-ingested during coprophagy. Species of *Clostridium* commonly cause the profuse diarrhea seen in rabbits and is a major risk for an affected rabbit being judged closed to other healthy individuals.

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YOUTH COMMITTEE REPORT



TOM BERGER: TLBERGER793@YAHOO.COM

Hello All. First I want to congratulate everyone who competed in the youth contests at convention. We had an amazing turn-out and some fabulous competition. You should all be very proud. I also want to congratulate the host committee, they did an outstanding job. I would like to thank all the volunteers that helped the youth, we could not have done this without you. From myself and all my committee and I think I can speak for all the youth also, THANK YOU! To all the youth who participated in the judging and breed ID, thank you for being patient when we fell behind a little but I still think it is better than waiting in line all day. We will try to get the times worked out a little earlier next year. I apologize because had we noticed that there were so many individual senior judging contestants we could have set up another set of judging classes. I really think that as a whole the week went rather well with the exception of just a couple of minor glitches; considering the fact that we added a couple of contest and tried to set times for all the judging and breed ID contestants. I want to also thank Gordon and Lynette Williams for

all the work they did. The Williams' did an amazing job. I also want to thank my wife Sandy for all the hard work she does as well as Lisa Schmidt for her work and taking pictures for us at the banquet. Next year the convention will be in Wichita Kansas. The last time they hosted a convention it was great. I am sure it will be another fantastic convention So I encourage everyone to attend because they really put on a great convention. We are considering on doing a couple things a little different next year and I would like feedback on these. 1) In the management contest we would like to add a separate class for cavies. The reason is because the management practices are different so it is somewhat hard to score comparing rabbit management with cavy management. 2) In the educational contest we have talked about separating the entries into age groups, we wouldn't add any more divisions but we would have more class winners. It doesn't seem right to compare a 10 year old's entry to an 18 year old's entry. There would still be only one division winner per division. We have decided not to do expand the Quizbowl to the older two ages this year but it is very possible we will in the future.

One problem I would like to address is the contest entries. Last year we received entries almost any way imaginable. We got them through my e mail/ through the ARBA e mail /postmarked to the ARBA/posted mark to other committee members.

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