

Against ALL Odds

If you have a Golden that has overcome incredible odds to succeed in any venue, please submit your story along with high-resolution images to Connie Cleveland: connie@dogtrainersworkshop.com.

The requirements are simple:

1. The dog must have achieved a high-level title that would qualify it to be published in the *GRNews*; i.e., Hall of Fame, OTCH, MACH, PACH, TDX, VST, CT, MH, ***, UDX, etc.
2. The "odds" must be well documented – no "I think he was abused."



X-ray of Lewis' leg showing pin in right wrist



Topbrass Call In The Reserves

by Paige Jones

In August of 2005, a very serious, handsome male Golden Retriever puppy became our newest family member to join our 12-year-old Golden, "Dewey." Dewey had recently been diagnosed with axial osteosarcoma and we hoped that he could help us welcome the new pack member. We named the pup Topbrass Call In The Reserves, or "Lewis," as he was not a replacement for Dewey, but rather the up-and-comer! Lewis also means Famous Warrior, so his registered name and call name fit together nicely.

Fast forward eight years. Lewis has qualified for the Master National every year since 2010 and has received a Reserve JAM and a couple JAMs in Qualifying field trials. He rarely failed a hunt test and when he did it was usually due to my novice handler mistakes. In fact, he may have become Qualified All Age if not for my mistakes. We ran the Master National in 2012, and went out on the last bird in the last series– a blind. The judges told me he had had 9's and 10's that whole week. He definitely was on his game that week, nailing his marks and one- and two-whistling his blinds. It was thrilling to see him run the test like a pro.

Lewis qualified for the 2013 Master National test in Kansas. As part of our final preparation, I decided to run a Master test over the Labor Day weekend as a confidence builder and to polish our skills and teamwork. After the first day's events, I stopped by my friend's house for a quick visit. Someone tossed a tennis ball in the air and Lewis jumped to catch it – just a little hop, nothing big. In mid-air he yipped and held his right front leg out to the side, looked directly at me with a very strange look, and landed with his right front leg to the side. When he walked, he appeared to limp in way that appeared to favor his right wrist. He had injured the same wrist twice before, once in 2010 during a field trial and again in January 2011, at a Dave Rorem handler seminar. The second time he injured it, I had the injury examined with X-ray diagnostics. The vet determined that it was a simple soft tissue injury. After a two-week rest he returned to full capacity with no signs of permanent damage.

I was not overly concerned by this most recent injury. I presumed that Lewis had simply aggravated the old soft tissue injury and he just needed a short rest. Lewis spent Sunday at my friend's house while I ran the rest of the Master test with my young Golden,



Paige and Lewis at the 2012 Master National – photo by Shannon Atwater, UpClosePhoto



Six weeks after limb-sparing surgery, Lewis is running with soft cast on his leg. Photo by Tammy Hardy



Lewis saying good-bye to his friends at the clinic after finishing his chemotherapy.

“Jimmy.” By Sunday afternoon, he was no longer limping. Although it seemed to be a re-injury, I decided to take him to the vet just to be safe, since the Master National test was only a few weeks away. I was certain the vet would confirm my suspicions and recommend a short rest before the big event. My husband took him to the appointment and later that morning the vet called to say she had reviewed the X-ray and had some bad news. Her initial observations indicated what she believed to be a cancerous tumor in Lewis’ right ulna bone near the wrist, and she recommended that we get him to a specialist right way. Although we thought there was a strong chance she may have misdiagnosed the injury, we made an appointment with a surgeon for Friday that same week.

After examining Lewis, the surgeon indicated he was fairly certain it was osteosarcoma and presented us with our options:

1. Do nothing.
2. Perform surgical amputation of the entire right leg, followed with chemotherapy.
3. Perform a limb-sparing surgical excision of the diseased portion of the ulna bone, followed by chemotherapy.

The surgeon thoroughly explained each option, and thoughtfully helped us assess the risks, advantages and disadvantages associated with each procedure. It all seemed easy to understand and while option #1 was not a viable option for us, none of the remaining two options seemed better than the other. At that point the vet was still not able to definitively diagnose osteosarcoma (that could only be done with a biopsy), we knew the tumor needed to be removed if we wanted to consider anything that might prolong Lewis’ life; doing nothing meant certain death in a short time.

Since Lewis’ cancer affected the ulna, a minor weight-bearing bone, and not the radius bone which does support a majority of a dog’s weight, he was a prime candidate for the limb-sparing surgery. Most cases present in the radius bone and we were told it is rare to find the cancer in the ulna bone, so the limb-sparing procedure is rarely performed. The surgeon explained he would remove the diseased bone and place a screw in the wrist for lateral support. With normal results after eight weeks of recovery in a cast and splint, we could expect to see immediate full strength and stability, and nearly full range of motion and flexibility over time.

Because the prognosis for bone cancer survival is ten months to a year, many people often decide to remove the limb since the shorter 2-3 week recovery time allows the dog to be back doing dog things a lot quicker. However, we believed that sparing Lewis’ limb might be the right option. We still believed that he could beat the odds given the tumor resided in the ulna and seemed to have well-defined margins. The surgeon also indicated that once he was able to see the tumor, he may need to amputate, so we needed to be prepared for that option just in case.

When we were presented with similar options for Dewey’s situation, my husband and I resolved to do all we could without regard to cost to prolong a quality life and without sustaining or inflicting more suffering on the dog. It was a simple commitment and obvious framework, but it helped us make the right decisions. Dewey lived a happy life much longer than any of us predicted or could have reasonably expected. When we adopted the same framework for Lewis, the options seemed much easier to understand and our decision was much easier to make.

We opted for limb-sparing surgery and the surgeon scheduled the procedure immediately.

Admission and preparation went smoothly, but the wait to learn the results seemed like an eternity. When the surgeon called us, he gave us the best news we could have expected. He was able to remove the tumor with good margins – the remaining upper and lower portions of the ulna bone that were free of any visible tumor-infected areas – and would receive the biopsy results within a week. Although he was unable to determine by observation the exact type of cancer, he was certain the results would confirm the diagnosis of osteosarcoma.

Lewis came home the next day in a full cast and splint, which he kept for the next six weeks. The vet replaced the splint with a soft cast for the final two weeks. The biopsy confirmed a diagnosis of osteosarcoma, but the pathologist verified that the surgeon established clean margins, which cleared the way for the follow-on chemotherapy. Since we knew that surgery was only palliative, we needed to determine the details of the chemotherapy. While researching our options of specialists and treatments, we learned about a University of Pennsylvania study that is using a genetically modified version of *Listeria* bacteria as a vaccine to lead the dog’s body to recognize and attack the particular types of

TOPBRASS CALL IN THE RESERVES MH WCX**



Sire: Am-Can Ch. Malagold Storm Warning OS SDHF
CH Honeybee's Swarm Warning MH MX
MXJ WCX VCX RA OS
Am-Can Ch Honeybee's Four Leaf Clover
CDX SH OA WCX VCX OD

Dam: FC AFC OTCH Topbrass Ascending Elijah OS FDHF
LaCrosse I Dare You OD
Redstar's 'Tess' Of Lacrosse MH WCX *** OD

Whelped: June 19, 2005
Breeders: Jackie Mertens
Owners: Paige Jones and Jeff Irving, Alexandria, VA

cancer cells found in osteosarcoma. We decided to work with Dr. M.J. Hamilton, an oncologist in Pennsylvania, who was familiar with the study and helped coordinate our enrollment. He suggested a protocol of carboplatin for four sessions, an aggressive treatment that might accelerate Lewis' entry into the study program.

The idea of the vaccine, which is given to dogs after amputation and chemotherapy, is to prevent metastasis of the cancer and prolong overall survival. We also understood that our current treatment of amputation or limb spare and follow up chemotherapy still only offered a median survival time of 200-300 days. However, preliminary results from dogs that have undergone standard of care amputation and chemotherapy followed by vaccination have been encouraging. Of the first six dogs vaccinated in this clinical trial, five are still alive and have survived between 400 and 700 days. Four of these dogs are tumor free. Other dogs have been vaccinated more recently, so long-term survival data for these dogs are not yet available.

"These early results are really very exciting," Dr. Nicola Mason, the lead investigator on the trial, explained. "They suggest that the vaccine is able to stimulate an effective anti-tumor immune response that is able to kill metastatic cells and delay or prevent tumor recurrence in these dogs."

It is important to understand that the vaccine appears to be safe. Only low-grade toxicities consisting of a mild fever and occasionally one or two episodes of vomiting the same

day as vaccination have been reported. There have been no long- or short-term complications observed with the vaccine. The results are highly promising and a larger "Phase II" clinical trial is now being planned.

We formally applied for admission to the study in September 2013, and it required us to participate in four sessions of chemotherapy before the study's protocols could begin. Lewis was accepted despite the fact that the study typically only accepted dogs with total limb removal. In mid-November the vet removed Lewis' cast, with orders to move slowly with little stress on the right wrist joint until he adjusted to walking on his new bionic wrist. After a few days, I took him to some pet water therapy pools where his love of retrieving and jumping into the water helped him to get back into the swing of things. It was the best kind of water-assisted physical therapy we could provide. He limped a little but was definitely on the road to recovery. Just before Thanksgiving, he was the test dog at a Master test in North Carolina. He was nearly flawless despite the fact he had had no training since August. He still had a bit of a limp, likely due to the varied and uneven terrain of the corn fields he had to navigate, but...he was AWESOME!

Lewis completed his last chemotherapy sessions on December 11, 2013, and the surgeon and oncologist gave Lewis the green light to run hunt tests again, so I entered him in the Double Master in Cheraw, South Carolina the weekend of December 13th. The water was cold but the weather was sunny, and as we walked up to the line in our very first series, I could see the excitement in his face and body. He was back to doing what he loved and was ready for action. Since he had all four legs, no one knew his behind-the-scenes story. They only knew that they were observing one the best markers on the circuit, performed by a dog with great style and an obvious love of his job! He passed both tests of a Double Master and now has two legs towards his Master National 2014 qualification.

We posted his success on Facebook and one of the judges that weekend immediately posted a comment. He said that the test was a "big boy" test and ribbons were well-earned. He also said he had the pleasure of judging and that Lewis not only passed, he did it with heart and style. A few others who watched him that weekend chimed in with their comments about Lewis and his wonderful performance that weekend.

During the holiday I received a call from Dr. Nicola Mason at the University of Pennsylvania. She reviewed the process and the results of the study with me. So far, 12 dogs have completed the study with the first group living over 600 days past initial diagnosis. I indicated we still wished to participate and we set the first appointment for the vaccine for January 3rd of 2014. He will be the first dog to go through the study that is a limb-spare, so I think they are particularly interested in his results. By the time you read this, Lewis will have received all three vaccinations with what we hope to be great results. Of course, none of us know how or when this will end, but I do know that if any dog could ever defy the odds and continue with heart and style, Lewis can. His record speaks for itself. He is a remarkable dog, and my goal is that we will qualify and run and QUALIFY in the 2014 Master National Test in California! ❖