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MISCONCEPTIONS, PITFALLS, DO'S EN DON'TS IN R&R MEDICINE

The first pitfall in R&R medicine is to be found in the attitude of the veterinarian. Still many vets wrongly assume that, given the low purchase price of these patients, their owners don't want to spend much money on them. The often still applied 'rodent consultation rate' illustrates that. Don't forget that many kittens change owners for free. It is our task to advise the client what diagnostics and treatments are necessary to provide the best results, not to decide whether it might be too expensive or not. Leave that decision to the client.

Another pitfall is the available literature. It is common and understandable that the images of diseases that are used often illustrate the "ideal" case. Thus, initial stages, extreme and abnormal images are often not recognized as such by the practitioner. The abnormalities of the skin and fur that often can be seen in association with dental disorders are rarely shown in the chapter 'integumentary disorders', neither in the chapter 'dental problems'

K & K medicine is still in an anecdotic development phase. Thus in surveys often ancient sources are quoted. These data are then again incorporated in newer editions.

This parroting is the cause of stubbornly lingering misconceptions, like otitis media being often the cause of torticollis in rabbits, the giant hairball in the stomach being the cause of gut stasis, where causality is usually just the other way around. And there is the overestimated role of *Pasteurella* in the formation of the typical white pus, for which it holds that this white pus can be caused by any bacterial species, or it can be just sterile indeed. The sensitivity of *Pasteurella* to penicillin is, moreover, dependent on the antibiogram, and not on the literature.

Then there are pitfalls that can again be found within ourselves, and which are not reserved to the veterinary medicine: tunnel vision and lack of communication. Possibly tunnel vision affects the more experienced veterinarian easier, who has seen comparable images many times and thus puts a new case with a similar appearance sometimes a wrong context.

As examples may be mentioned: an irregular, solid enlarged uterus in a rabbit with haematuria is not always a uterus carcinoma, a thickness at the jaw might not be a jaw abscess, and a recidivism of a previously successfully treated abscess might not be an abscess at all. A simple research (X-ray, needle aspiration biopsy) can prevent senseless surgery and costs in such cases. Regarding communication, we must remember that, unlike owners of dogs and cats, the owners of rabbits and rodents are often wrongly informed, or not informed at all, about the care and diseases in these animals. We should transfer this information.

Because we often need to mention important matters relating to the acute problem and the corresponding treatment at the same time, it will be too much information for the owner. Therefore it is useful to give all the information, (already) written as a hand-out.

Other do's and also don'ts will be presented. A large part of what will be shown is based on mistakes that respected colleagues and myself have made in the past. It would be a waste not sharing those for the benefit of our patients.