

Vaccination Facts - Non-Core Vaccines

Measles Vaccine (MV). This vaccine is supposed to provide temporary immunization of young puppies against distemper by 'cross-protecting' them against the disease in the event there are still maternally derived antibodies present. It is always given in combination with other vaccines – distemper plus measles, or a 4-way combination of distemper plus measles plus adenovirus plus parainfluenza. It is only recommended for healthy dogs between 6 and 12 weeks of age.

Kennel Cough. Kennel cough is a highly contagious respiratory infection, exhibiting itself in harsh, dry, spastic coughing. It is especially serious in a Bulldog puppy, where mucus secretions can close off smaller windpipes. Several organisms cause Kennel cough. A vaccine against Canine Parainfluenza protects against one of these, just as the Adenovirus vaccine protects against another. Bordetella vaccine protects against another kind. Show dogs should have this additional protection. You can give puppies Intra-Trak intranasally at three and four months and follow-up for active show dogs.

Canine Parainfluenza (CPiV). There are two delivery systems for this vaccine – intranasal and parenteral (injected). This is a flu vaccine.

The intranasal form prevents clinical signs of illness, infection and shedding. The injected form prevents clinical illness, but not infection or shedding. It is used for dogs that aggressively resist intranasal delivery.

The parenteral vaccine is always given in combination with certain core vaccines; the intranasal form is always given in combination with the bordetella vaccine alone, or with bordetella plus adenovirus.

It is always given in a single dose. Revaccination recommendations, depending on the form of the vaccine (intranasal or parenteral), are per the combined core vaccine schedule, annually, or more frequently for 'high risk' animals.

Bordetella (Bb) Vaccine. The bordetella vaccine can also be delivered intranasally or by injection.

Parenteral administration requires two doses, 2 to 4 weeks apart. For the initial vaccination, it is recommended the second dose be given at least a week before the dog is boarded, attends a dog show, etc. Revaccination is recommended annually.

The intranasal vaccine is single dose, with revaccination recommended annually or more often for 'high risk' dogs. Some dogs experience side effects for 3 to 10 days after vaccination, including coughing, sneezing and nasal discharge.

Canine Influenza Vaccine is given in two doses, 2 to 4 weeks apart, in dogs older than 6 weeks. Annual revaccination is recommended.

Canine Adenovirus (CAV-2) – Intranasal. The intranasal form of the adenovirus vaccine is a non-core vaccine. It's recommended for dogs at risk for respiratory infection caused by the adenovirus, and it may not provide immunity against canine hepatitis. It should not be considered a replacement for the injectable form of the vaccine. This vaccine is available only in combination with the intranasal bordetella and parainfluenza vaccines.

Borrelia burgdorferi (Lyme disease). Vaccine is given in two doses, 2 to 4 weeks apart, in dogs older than 12 weeks of age. Revaccination is recommended annually and/or at the beginning of tick season as determined regionally.

Notes: Recommended only for use in dogs with known risk of exposure, living in or visiting regions where exposure risk is high or where Lyme disease is endemic. Tick control products are required in addition to the vaccine.

Leptospira interrogans. This disease is spread in the urine of infected animals, with rats serving as a main repository of the infection. Major symptoms involve pain in the kidneys, a thick, brown coating on the tongue, bloody stool, severe thirst and increased urination, and jaundice. Vaccination is recommended in areas where Lepto is prevalent. You may want to discuss with your Vet the advisability of Lepto vaccine for your dogs, especially if their previous vaccination was not done with the latest version of the vaccine. If you use it, you should monitor your dog closely for at least several hours after the vaccine is given, especially after the second shot when antibodies created by the first shot may cause allergic reactions.

Vaccine is given in two doses, 2 to 4 weeks apart, in dogs older than 12 weeks of age. Revaccination is recommended annually, but only for dogs with reasonable risk of exposure.

This refers to the 4-way killed whole cell or subunit bacterin. The 2-way killed bacterin form of this vaccine is not recommended. Notes: Vaccination should be based on known geographic occurrence/prevalence and exposure risk of the individual dog.

Canine Oral Melanoma. This vaccine is only available for treatment of dogs with malignant melanoma. It is not intended for the prevention of oral melanoma.

Crotalus atrox (Western Diamondback rattlesnake vaccine) (toxoid). Field efficacy and experimental challenge data in dogs are not available at this time. (Vaccine efficacy and dose recommendations are based on toxin neutralization studies conducted in mice.)

Canine Coronavirus (CCov). This vaccine is not recommended. Neither the modified live nor the killed CCov vaccine has proved effective against combination coronavirus/parvo disease. Only the parvo vaccine is protective against dual viruses.