Blyde D. 1990. Leg problems in cheetah cubs.

Keywords: Acinonyx jubatus/cheetah/cub/OCD/treatment

Abstract: Recommendation how to treat cheetah cubs with leg problems. Four cheetah cubs were born with Osteochondrosis Dissecans (OCD). After dietary modification five of eight affected legs returned to normal. OCD is probably hereditary in nature.

MEMORANDUM

TO:

Colin Hyde Kevin Milton Glen Cleary Tim Downs Margaret Butler

FROM:

David Blyde

RE:

LEG PROBLEMS IN CHEETAH CUBS

DATE:

29 August 1990

Having discussed the radiographic and clinical findings of the Cheetah cubs with Tony Black he has made the following recommendations:-

- Make sure cubs have plenty of exercise. Therefore they will be placed back on exhibit as before.
- Decrease amount of food. Therefore diet for each cub will drop to 2.0 kilograms of meat each day except Wednesday and Saturday which will be kept as starve days.
- Decrease the calcium supplement. Therefore each cub should only receive 2.5g (½ teaspoon) Calcium Carbonate daily with food and 5g (1 teaspoon) S.A. 37 powder daily with food.
- Immobilise and re-radiograph the four Cheetah cubs in three weeks to assess progress.

David Blyder BVSV

DAVID BLYDE BVSc

- Arrange for Ovambo and Nakuru to replace Marah and the four cubs as the exhibit animals for the next six months.
- 4. Investigate the heritability of OCD in Cheetahs and the prevalence of this disease both in the wild and in captivity.
- Assuming some heritability is involved in this disease, re-assess the species management plan for Cheetah in Australasia.
- Consider permanent sterilization of the four cubs.

David Byder BVSV

DAVID BLYDE BVSc

MEMORANDUM

TO: Division 2 Supervisor

Head Keeper

Assistant Curator

Director WPZ

FROM: Veterinarian

RE: LEG PROBLEMS IN CHEETAH CUBS

DATE: 23 August 1990

Background:

On the weekend of 19th, 20th August, all four Cheetah cubs were reported as having 'turned out' front feet. All four have now been anaesthetised and radiographed to assess the problem. These radiographs will be sent to Dr Tony Black, a veterinary orthopaedic specialist for evaluation and recommendations on treatment. I expect his opinions to be known early next week.

Present Position:

confirmed

Having examined the radiographs myself, I believe the problem to be a condition called Osteochondritis Dissecans (OCD) of the distal ulna. There is a strong possibility that this may be a heritable disease and was in fact present in the cubs' sire (Claudius).

To correct this problem, a number of surgical options are available. This will necessitate a number of anaesthetics and a long length of time (2-3 months) off exhibit.

Recommendations:

- Await Dr Tony Black's recommendations and act on these recommendations as quickly as possible as this condition is likely to get worse with time.
- If complex surgery is necessary to correct the deformations, Dr Tony Black be brought up to perform the surgery with regard to the value of these animals as exhibits at WPZ.

FINAL REPORT TO THE DIRECTOR WPZ ON THE LEG PROBLEMS EXPERIENCED IN THE LAST LITTER OF CHEETAH CUBS BORN AT WPZ

Background:

Four Cheetah cubs were born to Claudius (sire) and Marah (Dam) on 30.11.89. On the weekend of 19th, 20th August 1990 (9 m.o.) all four cubs were reported as having 'turned out' front legs. The problem was diagnosed as Osteochondrosis Dissecans (OCD) of the distal ulna, interfering with normal growth of the bones in the forelegs (see Memorandum W403/1).

After dietary modification, five of the affected eight legs returned to normal.

Surgery (ulnar ostectomy) was performed on three legs:-

- Right foreleg of Asante.
- Left foreleg of Etosha.
 Left foreleg of Kareeba.

By March 1991 (16 m.o.) the only visibly affected leg was the left foreleg of Etosha.

Present Position:

Only three cubs remain in the litter as Kareeba died as a result of Thiamine deficiency on 30th March 1991.

Both Asante and Malindi are clinically normal to the untrained observer. Etosha's left foreleg remains bent cranially and turned out but not enough to be noticeable at a distance. It must be noted that he is not lame with this problem.

Malindi has had a long acting progesterone implant surgically placed to prevent her coming into cestrus.

Comment:

Osteochondrosis Dissecans in these Cheetah cubs is probably hereditary in nature (see attached publication).

would be unwise to knowingly propagate this genetic abnormality. Dr Tony Black's final comment regarding Etosha was that the risks and problems associated with straightening the bone surgically far outweigh the chance of the animal becoming more cosmetically normal. He has suggested therefore, that if there is no lameness to leave well enough alone.

Recommendation:

That Etosha's left leg be left alone and although he will have a permanently rotated leg, this is preferable to the problems that could arise from attempting corrective

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