


This chart is not intended to alarm you or to suggest that your Soft-Coated Wheaten Terrier has inherited any of the diseases it describes. It is purely to provide information for your Vet and yourself.

Comparison Chart of Hereditary Diseases

There are four hereditary diseases known to affect the breed.

| DISEASE | SYMPTOMS | LABORATORY ABNORMALITIES OFTEN ASSOCIATED WITH THIS DISEASE |
|--|--|--|
| Renal Dysplasia (RD) | | |
| Renal dysplasia is a congenital or neonatal disease which causes maldevelopment of the kidneys in utero, or early in life. | Increased water consumption Increased urination (dilute urine) Poor doer, decreased appetite Vomiting Possibly prone to urinary tract infection. | Low urine specific gravity Elevated creatinine and BUN Small kidneys Small, hyperechoic kidneys with or without cysts seen via abdominal ultrasound |
| Protein Losing Enteropathy (PLE) | | |
| PLE is usually caused by inflammatory bowel disease or lymphangitis/lymphangiectasia. In affected Wheatens there is a stimulation of the immune system in the bowel wall | Vomiting Diarrhoea Weight loss Ascites, oedema, pleural effusion | Note that not all of the laboratory abnormalities are seen in every case. The most important are indicated by an asterisk. Hypoalbuminemia* Hypoglobulinemia* Eosinophilia Hypocholesterolemia Lymphopenia |
| Protein Losing Nephropathy (PLN) | | |
| PLN is difficult to diagnose. The initial stages of the disease may be mistaken for liver, glandular or other enteric or kidney diseases. Wheatens with PLN may have serious thromboembolic events before renal failure starts, even before there is increased serum creatinine or BUN. An abnormality of the glomeruli usually causes PLN | Listlessness/depression Decreased appetite, vomiting, weight loss Ascites, oedema, pleural effusion Increased water consumption, increased urination (less common) Thromboembolic phenomena and hypertension (less common) | Note that not all of the laboratory abnormalities are seen in every case. The most important are indicated by an asterisk. Hypoalbuminemia* Elevated serum creatinine, BUN (later) Hypercholesterolemia Elevated MA (Microalbuminuria) Elevated urine protein/creatinine ratio* |
| Addison's Disease | | |
| Addison's disease (Hypoadrenocorticism) is the insufficient production and secretion of hormones (glucocorticoids, mineralocorticoids) by the adrenal gland cortex. The clinical signs are often non-specific and can mimic those of multiple other medical disorders | Listlessness/depression. Decreased appetite, vomiting, diarrhoea, weight loss. Inability to handle stress Sudden collapse Slow heart rate | Decrease in Na/K ratio (Sodium/potassium ratio) Abnormal ACTH stimulation test Elevated serum creatinine, BUN Sometimes, low urine specific gravity |
| Further information on all of these diseases can also be found in the 'Health Matters' section at: www.wheatenhealthinitiative.com and the health section of the SCWT Club of America's Web Site: www.scwtca.org |  | WHEATEN HEALTH INITIATIVE |

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