

## Minutes of the

### BORDER COLLIE BREED COUNCIL MEETING held on Saturday 17th October 2015

Stoneleigh Park Lodge, Stoneleigh Park, Warwickshire, CV8 2LZ

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**Item 1**, the chairman opened the meeting on time and thanked everyone for attending. He said it was a great step forward that nearly all the clubs had been able to join us either in person or by skype and hoped this was the way forward for future meetings as every club's views were important to the breed council and this makes us a joined force.

**Item 2.** Apology from clubs - None has been received.

**Item 3.** Minutes of the last meeting were read out and Wessex BCC said they thought they were not quite correct this section of the minutes would be corrected under item 8 with this understanding the minutes were passed as correct proposed by BCC of GB 2<sup>nd</sup> by MBCC all clubs in favour.

**Item 4** Matters arising from the minutes:

There was quite a lot of things to discuss under matters arising but all these items are covered on the agenda so it would be easier to carry on with the agenda and discuss them in that order.

Judging Criteria: It was proposed that we ask Clubs to standardise their judging criteria which would give the Breed Council a better position to argue the KC's recommended levels for the Border Collie. At present for judges this stands at 160 for A list and no more than 20% of the A list requirement (=32) for the B list. It was suggested that the minimum dogs judged in order to be included on an A list should be 200 and the minimum for the B list 60. Currently only some clubs have criteria set at this level - this would mean the remaining clubs would need to raise the issue with their committee and bring a decision back to the breed council next time we meet. Here are the details as I currently have them -

BCCGB 200 / 60

BCC Wales 250 / 100

EABCC 160 / 70

MBCC 250 / 80

NEBCC 160 / 50

NWBCC ?

Scottish BCC 200 / 60

Southern BCC 200 / 80

Wessex BCC 200 / 60

WOEBCC BCC 200 / 80

**Item 5.** Chairman's report

The chairman said that he was really pleased that so many clubs had made the effort to be represented at this meeting and hopefully we will be able to have more of a quorum for future meetings. Most things he wanted to say would come up under different items so he would now hand over to the secretary.

**Item 6.** Secretary's report.

The Secretary said that apart from correspondence which was read out under each section she had nothing to report. It would really help if reps could please let her know if they would be attending meetings or not.

#### **Item 7.**

Treasurer's report Val Hawker read out the treasurer's report and a copy of the details would be available for every club to see on line.

#### **Item 8.**

Wessex B.C.C. working class at Crufts. Wessex BCC said they felt that the outcome from the last meeting had not been recorded correctly and they felt that we needed to move on with this. The minutes should have read 'A vote was taken and the vote favoured option 1 or option 2-no-one voted for option 3. The secretary said that it might have been an idea for Wessex to contact the KC direct as this was taking a lot of time to go through and if the KC said No we were all wasting a lot of time. If the KC says yes then we are almost in agreement anyway. All clubs said they were in favour of Wessex writing to the KC and see what answer they get.

#### **Item 9.**

BCCGB this is raised on behalf of a club member & has been agreed by our committee.

#### **KC Unverified Dogs Scheme**

The following dogs have recently been registered under the above scheme:-

1. 'Pollyvinall Woolahra' - tested TNS carrier with no traceable pedigree on the dam's side, as she is from Australia.
2. 'Dentbros The Imp' - Chocolate/White bitch with one blue & one brown eye (which does not conform to the Breed Standard). Assessed under the scheme by Vic Salt & Bruce Kilsby.

We understand from the Breed Council Chairman's Report from June 2013, that discussions with the KC have previously taken place, with the compromise that only tested clears would be registered. However, example 1 above shows that this is not the case and example 2 illustrates that animals are being registered which do not conform to the Breed Standard. Our member and our committee are very concerned regarding these two cases and request the Breed Council to further pursue the matter with the KC.

There was a great deal of discussion with regard to this and the secretary was asked to contact the KC and find out why these dogs were registered MBCC said they did mentioned several meetings ago that allowing these dogs to be registered could cause our breed a great deal of concern and this is really only the tip of the iceberg we will probably find that 100's of dogs have been registered with an health issue.

#### **Item 10**

MBCC asks the Breed council to inquire of the AHT why they have put in place a DNA test (Sensory Neuropathy) based on findings from examining approximately 3 dogs, none of whom were verified as Border Collies and why they have done this without any consultation with the Breed Health Representative, the Border Collie Breed Council or the Pastoral Breeds Health Foundation. The health rep KK who was at the meeting via skype and read out several papers that had been supplied for clubs to read this lead onto several conversations taking place about what is 'read and not read' KK said that she put on all the papers that she received about different health subject and it was really up to each individual whether they read them or not.

BCC of Wales said that sometimes articles are just looked at and skimmed through and some are read in detail if we were to read them all it would take for ever so maybe a edited

to the point version could be uploaded which would surely make more sense and then the whole article would be read? Everyone agreed!

KK said she would re-send the article concerned so that everyone had a chance to read the original again and take in all the details of the report.

This conversion lead on to several topics one of them being Glaucoma and data and how clubs informed are. KK said that a recent report of border collies by the Roslin Institute needed to be read in full before any more comments were made.

BCC of Wales asked what has happened to the couple whose dog has lost its eye. This question lead on to quite a long conversation with the chairman saying that he felt it was really important for people and clubs to work together we can't all get on but we need to pull together if we need dogs details for any testing. BCC of GB said sometimes it is an issue with the cost of some tests.

Scottish BCC said that they felt that the whole breed needs to be aware of the charges and complete health tests now available. (See note below forwarded to the secretary from Scottish BCC)

This was what prompted me to look at this lab; this is a results sheet for one of Ambre Smith's bitches that she posted on FB. I was just surprised that all tests were done by The one Lab and then even more surprised when I discovered she'd paid equivalent of £74 and if you have 6 done you get a further 10% off.

Australia charges £75 for just one DNA test which is so expensive.

BCC of Wales why there is such a difference in the price for the same test in different countries.

KK said that please do not forget depending on who do the test will depends on whether the KC will record the results of that test.

KK said we had been given a list of companies whose results the KC would accept.

MBCC said that they felt that that the cost of health testing is a real issue for some people and it seems at the moment Optigen is one of the more expensive especially after what Scottish BCC have just said.

MBCC would also like to know if the results of the Breed Council votes on the proposed Control Scheme have been passed to the KC now the minutes of the Breed Council have finally been passed. The health rep KK said it was going to the meeting with the KC for the ending of November and she will keep us updated of the outcome.

MBCC proposes that the quorum required for a Breed Council meeting be reduced from 5 to 3, due to the difficulties getting a quorum for meetings which means some items are delayed for months. This will need to go to the AGM but it might be easier now we can all get together via skype.

#### **Item 11. AOB**

A.N.K.C - The BCC of Wales said they felt the breed council should look at the breed standard of the ANKC as the results could alter our breed out of all recognition. It was suggested that the breed council should be producing its own version of this and it should have illustrations.

Should the breed council produce its own extended breed standard with illustration? Scottish BCC felt this was a good idea so did most clubs present but SBCC said they could not comment until it had gone back to its committee. MBCC will take this proposal back to its club but in principal are in favour. Wessex BCC said would the KC take any notice? So could each club please reply buy the next meeting?

Date of next meeting – This will be confirmed in the New Year and will be late April/May and the meeting will be the same time as the AGM if this is possible.

The item below has been forwarded to secretary by KK to forward to all breed clubs reps.

## Glaucoma Research Update

Following on from Kathie Kinton's recent report to the Border Collie Breed Council what follows is a summary of the research so far from the leader of the research team at the Roslin Institute, Professor Kim Summers, and well worth reading in full before reading the rest of this posting.

### ***Goniodysgenesis and glaucoma: recessive vs polygenic inheritance.***

*There are a number of models to account for conditions that are clearly heritable (run in families). Firstly if the condition is dominant, affected offspring would always have at least one affected parent. Two affected parents could have affected and unaffected offspring. If the condition is recessive, two unaffected parents can have affected offspring but if both parents are affected all offspring should be affected. Finally if the condition is polygenic (ie several - many genes involved) there will be a familial clustering of affected individuals but there will not be simple patterns of inheritance. For example, with hip dysplasia, on average two affected parents may have about one third unaffected offspring, which does not match either single gene model. The implications of these models for breeders are different.*

#### **1. Dominant**

*This is easy to breed out as it is just a matter of avoiding breeding from any affected individual. However, we believe this is unlikely to be the case for goniodysgenesis or glaucoma, since there are cases where neither parent was affected and yet one or more of the offspring have failed the test.*

#### **2. Recessive**

*The problem here is that the undesirable genetic variant can "hide" for generations. We all inherit two copies of every gene and for a recessive the good version masks the presence of the undesirable version. Two individuals with a common ancestor can both be carrying the undesirable variant inherited from that ancestor and when mated their offspring have a 1 in 4 chance of inheriting this from both parents and hence being affected. This is why we would always recommend not mating closely related individuals. As the number of generations from the common ancestor increases the probability that both parents carry that variant decreases so the chance that two related individuals are both carriers decreases. However, that possibility is always there when the animals have*

*a common ancestor, however far back. The data we have are largely consistent with a recessive model, although we know of situations where two affected parents have apparently had one or more unaffected offspring. At this stage we can't tell from the databases whether this is due to failure to report a fail, lack of testing of the litter or the diagnostic uncertainty of having the test done by different people. Therefore we are reluctant to say that goniodysgenesis is recessive, but clearly breeding relatives (even if unaffected) would not be desirable.*

### **3. Polygenic**

*In the polygenic situation, the disease is determined by a number of different genes. An affected individual has had to inherit the risk variant for all of these from one or both parents. The chances of this decrease as the individual gets further from a case of the disease. In this case perhaps one could consider breeding distant relatives who have no incidences of the condition in their families, including aunts and uncles, distant cousins etc, not just the direct lines, for several generations (the more generations free from the condition, the better, but certainly at least four). The family structures we have seen for the Border Collies in our study are consistent with this polygenic model (because there are no real predictions about inheritance patterns).*

*This summary largely echoes the advice that was received from Aimee Llewellyn, who also stressed that using older dogs who are unaffected is safer than using young dogs, if goniodysgenesis and glaucoma are progressive and develop as the dog ages. In summary (in her words): "The best-case scenario is to seek out, and pair up those dogs with the widest number of close relatives (parents, siblings, progeny) **who are unaffected.**" I would add that it would be even better to use animals who have no affected relatives in several previous generations. This could be based on both goniodysgenesis and glaucoma, but it would be particularly important to avoid animals who have relatives with glaucoma.*

*Since goniodysgenesis is quite prevalent in the Border Collie population at the moment, avoiding breeding from all individuals who have failed the BVA gonioscopy test could result in reducing the breeding pool of dogs and hence the genetic variability in the breeding population. The problem here is that the undesirable version of other genes may end up at higher frequencies and lead to other health issues. So it is important to use as wide a variety of animals for breeding as possible.*

*These thoughts are intended to provide background information for decisions about breeding strategies that may reduce the risk of passing on goniodysgenesis and the predisposition to glaucoma. Without a specific genetic test for the single or multiple genes involved we can't guarantee that puppies produced following these ideas will be free of goniodysgenesis and glaucoma, but could reduce the incidence in future generations.*

*Sadly, the latest peer review has been turned down - there were concerns expressed by the review panel about the number of eye panellists used and the fact that two results were changed on second testing - as far as we are aware this was the only time this has happened and we can assume that test results ARE valid.*

*In addition the reviewer had concerns that the data was worldwide and again a number of Vets were involved with the testing results.*

Going back to the early days of the group CEA research was carried out, and achieved a DNA test, using data gathered from using eye panellist results - it would seem perfectly reasonable therefore to assume that using results of gonioscopy tests carried out by in many cases the SAME panellists would be an acceptable way forward.

It has not been an easy path for us to tread trying to find out WHY Glaucoma reared its ugly head in the Border Collie breed and how it is inherited - it now looks increasingly likely that the inheritance of narrow angles is different to the inheritance of glaucoma. The results clearly show however, that it is inheritance is not dominant as confirmed by Prof. Summers.

We have found it very hard to get DNA samples from as many dogs as the researchers would have liked, both here in the UK, Europe and Australia - despite numerous requests. Thanks must go to those that have provided DNA samples.

Researchers can only work on what they have and if the samples are limited it makes the work doubly hard.

Since Alan Wilton wrote his paper on the subject and the study was passed over to Roslin as recommended by Alan the study had three aims. Firstly to look at the pedigrees and see if there was evidence that goniodysgenesis is inherited. That part of the study has been completed and confirmed that it is inherited. The risk factors of lines that can be bred from is outlined above.

Secondly, there was a need to disentangle the relationship between goniodysgenesis and/or glaucoma so that a genetic test could be developed. This is the area that requires further research in light of the recent research paper.

The researchers are therefore looking at the 75 plus dogs, about half affected with goniodysgenesis and then a separate analysis of the dogs that have gone onto lose eyes due to the glaucoma.

Going forward the genotyping study will analysis the results. The researchers have asked for any owners that have not submitted DNA if they would be willing to do so as this will both assist the genotyping and the development of a genetic test either directly by Roslin or working in partnership with others.

They need DNA for any dogs that have failed the gonioscopy and even more importantly the DNA for any dogs that have lost eyes due to glaucoma. Close relatives and sire and dam's DNA would be of great value to the research to move it onto the next stages and back to the reviewer.

If anyone has results that are not on the database or "missing" information on the database it would be appreciated if you would kindly take a little time to complete. In addition, if any of you have had your dog's re-tested and your entry shows only one result could you email us the date and the name of the vet that did your second and in some cases third test. This will help when the data is submitted again to the reviewers. We know for example that some dogs were tested at the testing days and received the same results demonstrating the reliability of the data and the BVA Vets.

As many of you are aware the research is being funded by the Dog Trust but this only has 6 months left to run we will of course support any application for further funding. DNA sent now might make all the difference.