Review of Small animal dermatology

The manual appears in a compact soft-cover edition and is well illustrated with photographs. In this way it serves as a quick reference for the investigation of dermatological conditions in small animals. However, the format (A5) restricts the size of the images, and hence their clarity. The manual is written in the question and answer format, and is thus useful as a test of the Veterinary clinician’s knowledge. However, covering the entire curriculum of Veterinary Dermatology in this format has made it cumbersome, as searching for the answers (unless they appear in adjacent pages) can be arduous for the busy practitioner.

Southern Africa suffers from a dearth of texts relevant to small animal dermatology, which has resulted in veterinary practitioners devoting valuable time to researching foreign texts about dermatological diseases that are not encountered in Southern Africa: many chapters in this manual are thus irrelevant to us. Question 1 of the text involves a northern hemisphere condition, namely hookworm dermatitis, which is unlikely to be encountered in our sunny climate. Question 2 involves a breed of dog unlikely to be seen in South Africa. The diagnosis, keratoacanthoma, which is breed related, is also unlikely to be encountered here (although it is a rare possibility in German Shepherd dogs). Questions 10 and 11 (pp. 14, 15) are similarly irrelevant here, as they concern blastomycosis. Question 61 (Bowen’s disease) is irrelevant for South Africa. Question 78 discusses polydactyly, although breeds showing this genetic defect have, fortunately, not been introduced to Southern Africa. Piedra (pp. 105, 106) and Timentin (p. 121) are, thus, not relevant here. Questions 175 is also irrelevant here (zygomycosis).

For assistance in perusing this manual, it should be noted that the many abbreviations employed in the text are explained in a separate list which appears on the last page. An important abbreviation, that of MDR1 (p. 66), is absent from the list and this remains unexplained. In Question 81, a differential diagnosis for thin skin is given erroneously as hypothyroidism, because the skin is thickened with this disease. In Question 83 (p. 90), South African practitioners may be confused by the term ‘pyotraumatic dermatitis’, as this condition is known here as ‘acute moist dermatitis’, or simply ‘hotspot’. The related Question, no. 84 (p. 91), asks for the common causes for the recurrence of this disease, but the answer (p. 92) ignores demodicosis – a frequent (and commonly missed) cause of relapsing acute moist dermatitis in Southern Africa. Question 104 (p. 111) shows a facial lesion in a cat where ectoparasite causes are omitted, these being mites (Notoedres, Otodectes, Demodex, Cheyletiella), as well as fleas and mosquitoes. The given diagnosis of sporotrichosis has no relevance here. Question 169 appears to be a repeat of 161 (feline eosinophilic granuloma complex). In South Africa, hyperthyroidism would be a differential of Question 182 but this possibility is omitted. Question 183 appears to be a repeat of Question 166, and this in turn a repeat of 153 and 73, concerning demodicosis. This results in the reader having to peruse various sections of the manual concurrently. A comprehensive index assists in exploring individual diseases. However, ‘Stud tail’ is incorrectly indexed as it does not appear to have any connection to its designated Question 133.

The author has chosen this format of questions and answers in an attempt to cover the complete spectrum for presenting symptoms as well as all possible aetiologies. Although this would probably be more appropriately achieved in the classic textbook format, which deals with each disease in a separate chapter, clinicians could find useful guidelines in the various questions and answers whilst consulting other texts concurrently.