Running Title: Prevalence, popularity and volatility of congenital heart diseases in dogs

CLINICAL EPIDEMIOLOGY OF CONGENITAL HEART DISEASES IN DOGS:

PREVALENCE, POPULARITY AND VOLATILITY THROUGHOUT TWENTY

YEARS OF CLINICAL PRACTICE

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Abstract

The epidemiology of Congenital Heart Diseases (CHDs) has changed over the past twenty years.

We evaluated the prevalence of CHDs in the population of dogs recruited in a single referral center (RC); compared the epidemiological features of CHDs in screened breeds (Boxers) versus nonscreened (French and English Bulldogs and German Shepherds), investigated the association of breeds with the prevalence of CHDs, determined the popularity and volatility of breeds over a 20-year period; and analysed the trends of the most popular breeds in the overall population of new-born dogs registered in the Italian Kennel Club from 1st January 1997 to 31st December 2017.

This was a retrospective observational study, the cardiological database of the RC was analysed, and 1,779 clinical records fulfilled the inclusion criteria.

Descriptive statistics and frequencies regarding the most representative breeds and CHDs were generated. A logistic regression model was used to analyse the trends of the most common CHDs found in single breeds (French Bulldog, English Bulldog, Boxer, and German Shepherd), and in groups of breeds (brachycephalic breeds and the most represented large breeds). The relationships between the breed popularity and the presence of CHDs was studied.

The most common CHDs were Pulmonic Stenosis (34,1%), Patent Ductus Arteriosus (26,4%), Subaortic Stenosis (14,6%), Ventricular Septal Defect (4,8%), Aortic Stenosis (4,7%), Tricuspid Dysplasia (3,4%), Atrial Septal Defect (1,9%), Double Chamber Right ventricle (1,8%), Mitral Dysplasia (1,6%), and reverse Patent Ductus Arteriosus (0,7%). The most represented pure breeds were Boxer (19,4%), German Shepherd (9,4%), French Bulldog (6,2%), English Bulldog (4,9%), Maltese (3,7%), Newfoundland (3,1%), Rottweiler (3,1%), Golden Retriever (3,0%), Chihuahua (2,8%), Poodle (2,5%), Cavalier King Charles Spaniel (2,2%), American Staffordshire Terrier (2,1%), Labrador Retriever (2,3%), Dobermann (2,1%), Miniature Pinscher (2,0%), Cocker Spaniel (2,0%), Yorkshire Terrier (1,7%), Dogue de Bordeaux (1,6%), Dachshund (1,6%), and Bull Terrier (1,5%). Chihuahuas, American

Staffordshire Terriers, Border Collies, French Bulldogs, and Cavalier King Charles Spaniel were the most

appreciated small and medium breeds, all of which showed a high value of volatility.

In conclusion, this study found evidence for the value of the screening program implemented in Boxers, which

decreased the prevalence of Subaortic Stenosis and Pulmonic Stenosis. However, fashions and trends influence

dog owners' choices more than the worries of health problems frequently found in a breed. Effective breeding

programs are needed in order to control the diffusion of CHDs without impoverishing the genetic pool; in

addition, dog owners should be educated, and the breeders supported by a network of veterinary cardiology

centers.

Introduction

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Congenital anomalies of the cardiovascular system are defects present at birth, and often lead to perinatal death

in dogs. However, in some cases, congenital heart diseases are asymptomatic and undetected until later in life,

so the percentage of dogs with congenital heart diseases that survive to adulthood to breed can be rather high.

To decrease the incidence of CHDs in the dog population as a whole, the early identification of affected dogs

could inform a breeding program. Furthermore, some of the most common CHDs could be successfully treated

by surgical management, and an early diagnosis can help to provide a normal life expectancy compared to that

of the untreated dogs [1]. Knowing the epidemiology of CHDs plays an important role in maintaining dog health

and in preventing the diffusion of CHDs in the dog population.

Epidemiological studies on congenital heart disease in dogs have been conducted all over the world since the

early 1960s [2,3].

The most valuable studies were performed in the USA, Australia, the UK, Switzerland, Sweden and Italy [4-9].

The main studies report different prevalence of CHDs in the affected breeds, depending on the popularity of the

breed in a country in a given period of time [10-12]. In almost all studies, the most common CHDs observed were

PDA, PS, and SAS [1-9]. VSD, TD and TOF have also been described by the authors of these studies, but they are

not noted as frequently as the abovementioned CHDs [2,3,5,7,8].

In 2011, a retrospective epidemiological study on CHDs was performed in Italy by Oliveira et al. The included

data were collected at a single veterinarian referral center for cardiovascular disease in small animals, specializing

in the surgical and interventional treatment of congenital heart diseases. Since 1997, the RC, IBC and FSA have

also been included in a screening program that aims to reduce the prevalence of PS and SAS in Boxers, such that

many breeding dogs have been screened for these conditions before breeding.

In the last seven years, new CHDs clinical cases have been reported, and this phenomenon provided a worthy

opportunity to evaluate the epidemiology of CHDs in a large population of dogs in the same RC over a longer

period of time.

The aims of our study were to assess the prevalence of CHDs in the population of dogs recruited in a single RC

and to analyze the trends of the most popular dog breeds in the overall population of the puppies registered in

the ENCI database from 1st January 1997 to 31st December 2017 [13].

The clinic's database was updated and reanalyzed in order to investigate any changes in the epidemiological

features of congenital heart diseases in non-screened (French Bulldog, English Bulldog and German Shepherd)

and screened (Boxer) dogs, to determine the association of the breed with CHD and to study the popularity and

volatility of the breeds over this 20-year period.

Materials and Methods

The medical records of dogs referred for congenital heart disorders to Clinica Veterinaria Gran Sasso between 1st

January 1997 to 31st December 2017 were retrospectively reviewed.

The population affected by CHDs was organized in two spreadsheets (isolated and associated). Dogs affected by

one CHD were included in the isolated Congenital Heart Disease group, and dogs with two or more concurrent

defects were included in the associated Congenital Heart Disease group.

In this study, TOF was included in the group with isolated defects, because the pathology was considered as a

unique entity.

The breeds with more than 20 dogs each and the defects diagnosed in more than 10 subjects were included.

The breeds with fewer than 20 dogs and the CHD with fewer than 10 animals each were named as "others".

Subaortic stenosis Type 1, Type 2 and Type 3 were pooled in the SAS category, whereas pulmonic stenosis type

A, Type B, Type M, Type BHG, Type MHG and PS R2ACA were included in the PS group [14-23].

The crossbred dogs were considered as a single group. The unknown phenotypic features of the dogs and the

missing information on age and/or weight at presentation did not allow a categorization into small, medium and

large breeds.

The inclusion criteria were dogs affected by CHD with complete clinical records (signalment, history, and physical

examination), including thoracic radiography and echocardiography without sedation. The angiography and

postmortem examination were not executed in all cases. The diagnosis of CHD was obtained by a complete

transthoracic echocardiographic examination (TTE), which was performed in all patients. TTEs were carried out

using commercial ultrasound equipment with mechanical transducers ranging from 2 to 10 MHz (Caris, Esaote,

Florence, Italy), and then using ultrasound machines with electronic transducers also ranging from 2 to 10 MHz

(Megas Esaote, Florence, Italy; Mylab30Vet, Esaote, Florence, Italy; MyLab60, Esaote, Florence, Italy, Epiq 7

Philips S.p.A., Milan, Italy).

Two-dimensional transesophageal echocardiography (TEE 2D) was executed using an omniplane

transesophageal probe (Mylab30Vet, Esaote, Florence, Italy) ranging from 3 to 8 MHz Three-dimensional TEEs

were performed with an echocardiography machine equipped with an omniplane transesophageal probe x7

matrix ranging from 2 to 7 MHz (Philips IE33, S.p.A., Milan, Italy) when indicated and authorized by the owner.

The exams were performed, interpreted and/or reviewed by an ECVIM board-certified cardiologist (C.B.). The

patients were placed in right and left lateral recumbency, and the examinations were performed according to

the American Society of Echocardiography standards and guidelines and other published recommendations [24].

Angiographic procedures were also performed and/or reviewed by an ECVIM board-certified cardiologist (C.B.)

with a fluoroscopy system in cases undergoing interventional percutaneous procedures or when necessary for

diagnostic purposes (Villa Sistemi Medicali S.p.A., Buccinasco (MI), Italy and Digital Fluoroscopy system Philips

Veradius, Milan, Italy). Postmortem examinations were performed under the supervision of C.B.

The exclusion criteria were dogs with incomplete clinical records or that were affected by acquired heart disease.

The prevalence, the popularity and the volatility of the most common breeds were evaluated by using the cohort

of the puppies registered in ENCI database from January 1997 to December 2017.

Statistical Analysis

Two datasets were available for statistical analyses, and the descriptive statistics were calculated. The

Kolmogorov-Smirnov test was used to assess normality of the continuous variables. For data that were not

normally distributed, median and interquartile ranges (I/Q: lower and upper quartiles) are given. The Kruskal-

Wallis test was used to evaluate the significance of the association among the most common CHDs and the age

at presentation. The frequency distributions of all diseases in the overall sample for sex was calculated. The χ^2

test was used to compare the occurrence of each CHD in males and females both of purebreds and crossbreds.

The combinations of the observed heart defects were analyzed as groups of two, three, four and five CHDs,

except TOF, which was considered separately when detected alone.

The trend of the most common CHDs found in our population from 1997 to 2017 were evaluated in single breeds

(French Bulldog, English Bulldog, Boxer, and German Shepherd) and in groups of breeds (brachycephalic breeds

and the most represented large breeds). The years were pooled in 7 periods for a better description of the CHDs

trend: 1997-1999, 2000-2002, 2003-2005, 2006-2008, 2009-2011, 2012-2014, and 2015-2017. For each CHD,

dogs were considered 'positive' or 'negative' if they were affected or were not affected by that CHD, respectively.

The risk of finding dogs with a determined CHD in a specific period and for a specific breed can be estimated by

the following generalized linear model

$$E[Y|\gamma] = X\beta + \varepsilon$$

where Y is the vector of observations, β is the vector of the fixed effect (breed * period interaction) and $\text{var}[\varepsilon] =$

$\text{var}[Y|\gamma]$. This model, applied to a binomial distribution, provides the least square means and the relative

confidence intervals on a logit scale; the least square means can be reported to the probability scale by the

following equation:

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$$\text{logit}(p) = \ln\left(\frac{p}{1-p}\right) = \ln(p) - \ln(p-1)$$

147 This equation can be rearranged as:

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$$p = \frac{e^{\text{logit}}}{1 + e^{\text{logit}}}$$

The Clinica Gran Sasso internal CHDs database was merged with the ENCI database in order to estimate the odds

ratios of the overall CHD. Contingency tables were constructed for the relationships between overall CHD and

each breed. The magnitude of the relationship was expressed as the odds ratio and relative 95% CI with

associated P-value.

To investigate the association of CHD and the breeds' popularity, the Pearson correlation coefficients were

estimated for the total number of CHDs detected in each breed, the OR of overall CHD were determined, and

two measures of breed popularity were calculated as reported by Ghirlanda et al. [10]:

1) Total popularity, defined as the total number of registrations for each breed in 1997-2017:

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$$t_i = \sum_{k=1997}^{2017} p_{i,k}$$

2) Volatility, defined as the average relative change in registrations from one year to the next:

$v_i = \frac{1}{21}\sum_{k=1997}^{2017}\left|\frac{p_{i,k}-p_{i,k-1}}{p_{i,k}}\right|$

where:

t_i = popularity of the ith breed;

v_i = volatility of the ith breed;

$p_{i,k}$ = number of dogs of the ith breed registered in IKC in a year k (1997≤k≤2017)

21 = the number of registration changes in the period 1997-2017

For all analyses, statistical significance was set to the 5% level.

Statistical analyses were performed using the GLIMMIX, FREQ, MEANS and UNIVARIATE SAS® procedures (SAS

Institute Inc. Base SAS® 9.4 Procedures Guide: Statistical Procedures, Second Edition. Cary, NC: SAS Institute Inc.

2013).

170 Results and Discussion

171   This retrospective study was based on the 1,779 clinical records that fulfilled the inclusion criteria. Single cardiac

172   defects were present in 1,568 dogs (88.14%), and 2 or more concurrent defects were found in 211 dogs (11.86%).

173   The total observed cases of congenital heart defects are reported in Table 1, including information on sex and

174   age at presentation.

176   **Table 1. Congenital heart defects**

CHDs	TOTAL		ISOLATED		ASSOCIATED		MALE				FEMALE				AGE (months)
	N	%	N	%	N	%	ISOLATED	ASSOCIATED	TOTAL	%	ISOLATED	ASSOCIATED	TOTAL	%	Q_2 ($Q_1 - Q_3$) 9
PS	689	34.1	570	82.7	119	17.3	339	67	406	58.9	231	52	283	41.1	10 (5 - 24)
PDA	534	26.4	490	71.1	44	8.2	156	15	171	32.0	334	29	363	68.0	7 (3 - 20.5)
SAS	296	14.6	220	31.9	76	25.7	139	44	183	61.8	81	32	113	38.2	12.5 (4 31)
VSD	98	4.8	39	5.7	59	60.2	21	33	54	55.1	18	26	44	44.9	8 (4 - 20.5)
AS	95	4.7	80	11.6	15	15.8	54	7	61	64.2	26	8	34	35.8	25 (10 - 81)
TD	69	3.4	51	7.4	18	26.1	26	8	34	49.3	25	10	35	50.7	10 (6 - 28)
ASD	42	2.1	21	3.0	21	50.0	10	3	13	31.0	11	18	29	69.0	15 (7 – 35)
DCRV	37	1.8	21	3.0	16	43.2	14	9	23	62.2	7	7	14	37.8	6 (4 - 11)
MD	32	1.6	27	3.9	5	15.6	15	5	20	62.5	12	0	12	37.5	8 (4 - 17.5)
TOF	21	1.0	0	0.0	21	100.0	0	11	11	52.4	0	10	10	47.6	5 (3 - 9)
rPDA	15	0.7	15	2.2	0	0.0	6	0	6	40.0	9	0	9	60.0	11 (5 - 29)
MVS	12	0.6	6	0.9	6	50.0	4	4	8	66.7	2	2	4	33.3	26.5 (3 - 76)
BAV	10	0.5	5	0.7	5	50.0	3	5	8	80.0	2	0	2	20.0	14 (2 - 26)
PLCVC	10	0.5	0	0.0	10	100.0	0	6	6	60.0	0	4	4	40.0	6.5 (4 - 21)
AVCD	10	0.5	5	0.7	5	50.0	0	1	1	10.0	5	4	9	90.0	14 (10 - 47)
others[a]	52	2.6	18	2.6	34	65.4	6	14	20	38.5	12	20	32		10 (4 – 54)
	2022	100.0	1568		454		793	232	1025		775	222	997		

Legend: CHDs, congenital heart diseases; PS, pulmonic stenosis; PDA, patent ductus arteriosus; SAS, sub-aortic

stenosis; VSD, ventricular septal defect; AS, aortic stenosis; TD, tricuspid dysplasia; ASD, atrial septal defect;

DCRV, double chamber right ventricle; MD, mitral valve dysplasia; TOF, Tetralogy of Fallot; rPDA, reverse

patent ductus arteriosus; MVS, mitral valve stenosis; BAV, aortic bicuspid valve; PLCVC, persistent left cranial

vena cava; AVCD, atrioventricular canal disease;

others[a] CTD, cor triatriatum dexter; AVF, aortovenous fistula; PPDH, pericardial peritoneum diaphragmatic

hernia; QAV, quadricuspid aortic valve; AH, aortic hypoplasia; AI, aortic insufficiency; AOr, aortic overriding;

APW, aortopulmonary window; MI, mitral insufficiency; TVS, tricuspid stenosis; TA, truncus arteriosus; CollF,

systemic to pulmonary arterial collateral flow; AC, azygos continuation; ACT, anomalous coronary truncus.

The most common CHD in our overall population, both isolated and associated with other conditions, were PS

(34.1%), PDA (26.4%) SAS (14.6%), VSD (4.8%), AS (4.7%), TD (3.4%), ASD (1.9%), DCRv (1.8%), MD (1.6%), and

rPDA (0.7%). Among these CHDs, the youngest dogs at presentation were affected by TOF (median 5 month) and

the oldest by AS (median 25 months) (Table 1). The results from the Kruskall-Wallis test showed that the dogs

diagnosed with AS were significantly older than the dogs affected by PDA, PS, AS, DCRV, VSD, SAS, TD, and TOF

(Fig 1).

Figure 1 – **Average age (months) of the dogs belonging to the most represented isolated CHDs**

Isolated congenital heart diseases were diagnosed in 1,377 dogs belonging to 92 purebreds and 191 crossbreds.

The top 21 represented purebreds were Boxer (19.4%), German Shepherd (9.4%), French Bulldog (6.2%), English

Bulldog (4.9%), Maltese (3.7%), Newfoundland (3.1%), Golden Retriever (3.0%), Chihuahua (2.8%), Rottweiler

(3.1%), Poodle (2.5%), Cavalier King Charles Spaniel (2.2%), American Staffordshire Terrier (2.1%), Labrador

Retriever (2.3%), Dobermann (2.1%), Miniature Pinscher (2.0%), Cocker Spaniel (2.0%), Yorkshire Terrier (1.7%),

Dogue de Bordeaux (1.6%), Dachshund (1.6%), and Bull Terrier (1.5%).

Of the most common CHDs found in the selected breeds, PDA was absent in Boxers, American Staffordshire

Terriers and Dogue de Bordeaux. However, the same breeds experienced a large percentage of cases of PS (Boxer

and American Staffordshire Terrier) and SAS (Dogue the Bordeaux) (Table 2) [25,26].

212 **Table 2. Distribution of CHDs in purebreeds and in crossbreds**

Breed	PS	PDA	SAS	AS	TD	VSD	MD	DCRV	ASD	rPDA	other CHDs [a]
Boxer	34.8	-	37.5	19.9	3.0	0.4	0.4	0.4	2.6	-	1.1
German shepherd	8.5	65.9	14.0	3.1	4.7	-	-	-	0.8	-	3.1
French Bulldog	82.6	4.7	-	3.5	-	7.0	1.2	1.2	-	-	-
English Bulldog	88.1	1.5	1.5	1.5	4.5	-	-	-	-	-	3.0
Maltese dog	5.9	76.5	-	-	-	5.9	2.0	-	-	9.8	-
Newfoundland	11.9	42.9	38.1	-	4.8	-	-	-	-	-	2.4
Rottweiler	23.8	7.1	45.2	2.4	2.4	-	4.8	2.4	2.4	-	9.5
Golden retriever	29.3	7.3	31.7	2.4	14.6	-	4.9	9.8	-	-	-
Chihuahua	25.6	59.0	-	-	-	2.6	-	10.3	-	2.6	-
Poodle	20.0	65.7	-	-	5.7	2.9	-	-	2.9	2.9	-
Labrador retriever	6.5	22.6	12.9	-	35.5	3.2	6.5	-	3.2	3.2	6.5
Cavalier King Charles	40.0	60.0	-	-	-	-	-	-	-	-	-
American Staffordshire	86.2	-	-	3.5	-	-	6.9	3.5	-	-	-
Dobermann	3.5	89.7	-	-	-	-	-	-	3.5	-	3.5
Miniature Pinscher	96.4	3.6	-	-	-	-	-	-	-	-	-
Cocker Spaniel	59.3	37.0	-	-	-	-	-	-	-	-	3.7
Yorkshire terrier	30.4	47.8	-	-	-	8.7	4.4	-	4.4	-	4.4
Border Collie	4.6	59.1	-	-	-	18.2	-	-	4.6	-	13.6
Dachshund	9.1	68.2	4.6	-	-	4.6	4.6	-	-	-	9.1
Dogue de Bordeaux	4.6	-	72.7	4.6	9.1	-	-	-	-	-	9.1
Bull Terrier	-	5.0	15.0	30.0	5.0	-	30.0	5.0	-	-	10.0
other purebreeds[b]	39.3	36.3	7.5	3.1	2.4	4.1	2.0	2.0	1.0	1.4	1.0
Crossbreeds	41.4	42.9	2.6	1.1	1.1	3.7	1.1	1.1	1.1	1.6	2.6

Legend: CHDs, congenital heart diseases; PS, pulmonic stenosis; PDA, patent ductus arteriosus; SAS, sub-aortic

stenosis; AS, aortic stenosis; TD, tricuspid dysplasia; VSD, ventricular septal defect; MD, mitral valve dysplasia;

DCRV, double chamber right ventricle; ASD, atrial septal defect; rPDA, reverse patent ductus arteriosus;

[a] MVS, mitral valve stenosis; BAV, aortic bicuspid valve; AVCD, atrioventricular canal disease; CTD, cor

triatriatum dexter; AVF, aortovenous fistula; PPDH, pericardial peritoneum diaphragmatic hernia; QAV,

quadricuspid aortic valve; AH, aortic hypoplasia; AI, aortic insufficiency; AOr, aortic overriding; APW,

aortopulmonary window; MI, mitral insufficiency; TVS, tricuspid stenosis; TA, truncus arteriosus; CollF,

systemic to pulmonary arterial collateral flow; AC, azygos continuation; ACT, anomalous coronary truncus;.

[b] West Highland white terrier; German Spitz; Corso Dog; Beagle; Jack Russel; Schnauzer; English setter; Pitbull;

Australian Shepherd; Fox Terrier; Bernese mountain dog; Bolognese; Pembroke Welsh Corgi; Belgian shepherd;

Greyhound; Shi tzu; Epagneul Breton; Pug; Swiss shepherd; Weimaraner; Akita Inu; Bichon Frisè; Bullmastiff;

Great Dane; Italian Segugio; Shiba Inu; Czechoslovakian Wolfdog; Greater Swiss Mountain Dog; Neapolitan

Mastiff; Pekingese dog; Pyrenean Mountain Dog; Basset hound; Bergamasco shepherd; Bobtail; Chow Chow;

Dogo Argentino; Griffon Blue de Guascogne; Hungarian Bracco; Irish setter; Italian Greyhound; Italian shepherd

dog; Lagotto; Maremma Sheepdog; Miniature Schnauzer; Pointer; Samoyed; Shetland Sheepdog; Welsh Terrier;

Whippet; Alaskan Malamute; Appenzeller Mountain dog; Bavarian Mountain dog; Cairn Terrier; Cirneco

dell'Etna; Dalmatian; Flat Coat retriever; Irish terrier; Italian Bracco; Jagd terrier; Karst shepherd; Lancashire

Heeler; Magyar Agar; Norfolk terrier; Parson Russel terrier; Perro de Agua; Podenco ibicenco; Rhodesian

Ridgeback; Scottish shepherd; Shar Pei; Spinone; Saint Bernard Dog.

PDA was frequently found in Dobermanns, German Shepherds, Maltese and Dachshunds (Table 2). A small

percentage of breeds experienced rPDA, and it was mostly detected in Maltese (9.8%) (Table 2).

In addition to Boxers, PS was very common in other brachycephalic breeds, including French and English Bulldogs.

Interestingly, PS was also the most common CHD in Pinschers, in which the only other congenital heart disease

observed was PDA (Table 2).

In Tables 3 and 4, the frequency of the most common CHDs by sex are reported for the purebreds and crossbreds,

respectively.

Table 3. Distribution of CHDs by sex in purebreds.

CHD	N	Frequency	95% CI	Male frequency	Female frequency	p-value
PS	491	35.66	33.13 – 38.19	41.17	29.64	<0.0001
PDA	408	29.63	27.22 – 32.04	19.47	40.73	<0.0001
SAS	213	15.47	13.56 – 17.38	18.64	12.01	0.001
AS	80	5.81	4.57 – 7.05	7.51	3.95	0.005
TD	49	3.56	2.58 – 4.54	3.48	3.65	0.86
VSD	32	2.32	1.53 – 3.12	2.50	2.13	0.64
MD	25	1.82	1.11 – 2.52	1.95	1.67	0.70
DCRV	19	1.38	0.76 – 2.00	1.81	0.91	0.15
ASD	17	1.23	0.65 – 1.82	1.25	1.22	0.95
rPDA	12	0.87	0.38 – 1.36	0.56	1.22	0.19
other CHDs [a]	31	2.25	1.47 – 3.04	1.67	2.89	0. 48

Legend: CHDs, congenital heart diseases; PS, pulmonic stenosis; PDA; patent ductus arteriosus; SAS, subaortic

stenosis; AS, aortic stenosis; TD, tricuspid dysplasia; VSD, ventricular septal defect; MD, mitral dysplasia; DCRV,

double chamber right ventricle; ASD, atrial septal defect; rPDA, reverse patent ductus arteriosus.

[a] MVS, mitral valve stenosis; BAV, aortic bicuspid valve; AVCD, atrioventricular canal disease; CTD, cor

triatriatum dexter; AVF, aortovenous fistula; PPDH, pericardial peritoneum diaphragmatic hernia; QAV,

quadricuspid aortic valve; AH, aortic hypoplasia; AI, aortic insufficiency; AOr, aortic overriding; APW,

aortopulmonary window; MI, mitral insufficiency; TVS, tricuspid stenosis; TA, truncus arteriosus; CollF,

systemic to pulmonary arterial collateral flow; AC, azygos continuation; ACT, anomalous coronary truncus.

Table 4. Distribution of the CHDs by sex in crossbreds.

CHDs	N	Frequency	95% CI	Male frequency	Female frequency	p-value
PDA	82	42.93	40.32 – 45.55	21.62	56.41	<.0001
PS	79	41.36	38.76 – 43.96	58.11	30.77	<0.0002
other CHD[a]	30	15.71	13.79 – 17.63	20.27	12.82	0.17

Legend: CHDs, congenital heart diseases; PDA, patent ductus arteriosus; PS, pulmonic stenosis

[a] VSD, ventricular septal defect; SAS, subaortic stenosis; rPDA, reverse patent ductus arteriosus; AS, aortic stenosis; ASD, atrial septal defect; DCRV, double chamber right ventricle; MD, mitral valve dysplasia; TD, tricuspid valve dysplasia; AVCD, atrioventricular canal disease; AVCDp, partial atrioventricular canal disease; AVF, aortovenus fistula.

In purebreds, PS, SAS and AS were significantly more frequent in males (p<0,005) while PDA was significantly more frequent in females (p<0,0001) (Table 3).

PS and PDA were also the most common cardiac defects in crossbreds, and PDA was detected significantly more frequently in females, and PS was detected more frequently in males (Table 4).

In 189 purebred dogs and in 22 crossbreds, two or more defects were detected. The most frequent association was among two simple defects (74.4%), and PS was the most frequently detected disease (59.24%). PS was associated with SAS (22.29%), VSD (19.11%) and PDA (8.28%). SAS was associated with PDA in 8.28% of the dogs (Table 5).

Table 5. Associations of congenital heart defects

CHD$_A$		N.dogs	%
PS	SAS	35	22.29
PS	VSD	30	19.11
PS	PDA	13	8.28
PS	Other CHDs [a]	15	9.55
SAS	PDA	13	8.28
SAS	VSD	5	3.18
SAS	other CHDs [b]	10	6.37
VSD	DCRV	7	4.46
VSD	other CHDs [c]	6	3.82
ASD	AVCD	5	3.18
other combinations[d]		18	11.46

Legend: CHDa, associated congenital heart diseases; CHD$_s$, congenital heart diseases, PS, pulmonic stenosis; VSD,

ventricular septal defect; PDA, patent ductus arteriosus;

[a] DCRV, double chamber right ventricle; AS, aortic stenosis; ASD, atrial septal defect; TD, tricuspid valve dysplasia;

AVF, aortovenosus fistula; PLCVC, persistent left atrial vena cava; TVS, tricuspid valve stenosis;

[b] TD, tricuspid valve dysplasia; MD, mitral valve dysplasia; MVS, mitral valve stenosis; BAV, bicuspid aortic valve;

PLCVC, persistent left atrial vena cava; QAV, quadricuspid aortic valve; TOF, tetralogy of Fallot

[c] PDA, patent ductus arteriosus; ASD, atrial septal defect; MD, mitral valve dysplasia; AOr, aortic overriding;

[d] ASD-AS, atrial septal defects – aortic stenosis; ASD-TD, atrial septal defect – tricuspid dysplasia; ASD – AVCD,

atrial septal defect-atrioventricular canal defects; PDA-AS, patent ductus arteriosus - aortic stenosis; PDA – ASD,

patent ductus arteriosus-atrial septal defect; PDA – TD, patent ductus arteriosus-tricuspid dysplasia; PDA – MVS,

patent ductus arteriosus-mitral valve stenosis; PDA – AVF, patent ductus arteriosus- aortovenosus fistula; TD –

DCRV, tricuspid dysplasia - double chamber right ventricle; TD – AS, tricuspid dysplasia – atrial septal defect TD

– CTD, tricuspid dysplasia- cor triatriatum dexter; TOF – APW, tetralogy of Fallot-aortopulmonary window; AS –

BAV, aortic stenosis-bicuspid aortic valve; DCRV - HCM; MVS – TVS, mitral valve stenosis- tricuspid valve stenosis.

There were 14.2% of dogs affected by a combination of three defects, and PS was the most frequent (61%).

Eight dogs showed had four or five single defects, PS was the most frequent; it was detected in all 8 dogs.

The Tetralogy of Fallot was found in 21 (10%) dogs; 16 (7.4%) were isolated CHD conditions, and 5 (2.4%) were

dogs affected by two or three single defects (Table 1).

A significant and positive relationship between the overall number of CHDs and popularity of breed was

observed, suggesting that the prevalence of CHDs grows as the number of ENCI registered dogs increases (r =

0.54, p= 0.01) [13].

The number of the CHDi found in the selected breeds, the OR for the overall CHDi, the popularity of the breeds

and the volatility for each breed are reported in Table 6.

Table 6. Number of CHD$_i$, OR referred to overall CHD (with confidence interval), popularity, and volatility in each breed

Breed	CHDi	OR	p value	t_i	v_i
Chihuahua	6	0.90 (0.65 – 1.24)	0.593	51457	13
American Staffordshire	6	0.89 (0.61 – 1.28)	0.6586	38859	11
Border Collie	7	0.70 (0.46 – 1.07)	0.120	36973	11
French Bulldog	10	6.98 (5.60 – 8.71)	0.000	15855	10
Cavalier King Charles	3	2.29 (1.59 – 3.29)	0.000	15904	9
Golden retriever	10	0.55 (0.40 – 0.75)	0.000	86696	7
English Bulldog	12	2.74 (2.14 – 3.51)	0.000	30417	6
Labrador retriever	10	0.22 (0.15 – 0.31)	0.000	154498	4
Dachshund	7	0.53 (0.34 – 0.80)	0.001	49035	4
Miniature Pinscher	5	5.60 (3.84 – 8.15)	0.000	6127	3
Cocker Spaniel	5	0.84 (0.57 – 1.23)	0.419	38247	2
Dogue de Bordeaux	7	2.02 (1.33 – 3.09)	0.003	13130	2
Maltese dog	5	2.30 (1.74 – 3.05)	0.000	27179	2
Poodle	6	1.18 (0.84 – 1.65)	0.352	35703	0
Bull Terrier	8	1.61 (1.03 – 2.50)	0.045	14974	-2
German shepherd	13	0.32 (0.26 – 0.38)	0.000	386970	-3
Rottweiler	15	0.52 (0.38 – 0.70)	0.000	93858	-4
Boxer	14	4.01 (3.50 – 4.61)	0.000	97670	-4
Doberman	4	0.66 (0.46 – 0.96)	0.029	51524	-7
Newfoundland	7	2.88 (2.11 – 3.92)	0.000	17924	-10
Yorkshire terrier	6	0.94 (0.62 – 1.42)	0.918	29099	-10

Legend: CHDi, isolated congenital heart diseases; t_i, popularity; v_i, volatility.

Chihuahuas, American Staffordshire Terriers, Border Collies, French Bulldogs and Cavalier King Charles Spaniels were the most popular small and medium breeds, and all of these breeds showed a high value of volatility (Table 6). The probability of detecting a CHDi at first presentation is significantly elevated in French Bulldogs, Cavalier King Charles Spaniels, English Bulldogs and Miniature Pinschers (Table 6). Large breeds, including as Boxers and German Shepherds, on the contrary, demonstrated a decrease in volatility along the same period of time, even though the popularity of the breeds is higher than that found in small and medium breeds (Table 6).

To the best of our knowledge, this is the longest epidemiological study on CHDs performed in dogs from a single

referral center.

The clinic involved in this study is a valuable site from which to monitor the evolution of trends among different

breeds because it has been a referral center for CHDs studies in the authors' country since 1997 and is based in

a large city in the northern part of the country. In accordance with other studies, PS, PDA, SAS and AS were the

most common CHDs in the purebred population, PDA and PS were prevalent in crossbreds, and in both groups,

males were significantly more frequently affected by CHDs than females [4-9,27]. There were, however, some

differences concerning the prevalence of CHDs in the different breeds. The most common CHD in this study

proved to be PS, as a single or complex defect, associated with SAS (22.29%), VSD (19.11%), PDA (8.28%) and less

common CHDs (9.55%) (Tables 1 and 5). The main breeds affected by all Types of PS were brachycephalic breeds.

English Bulldogs (88.1%) and French Bulldogs (82%), had the greatest prevalence of PS from the beginning of the

study, and the prevalence increased over time as the Boxer PS prevalence decreased (Fig 2).

Figure 2 - **Probability of identifying Pulmonic Stenosis in Boxers, French Bulldogs and English Bulldogs**

admitted from 1997 to 2017. Abbreviation: Probability, P.

The most common PS Types found in the aforementioned breeds were Type A in French Bulldogs (42.25%), Type

A equal to Type B in English Bulldogs (40.68%) and Type A in Boxers (59.14%).

In Boxers, only Types A and B of PS were found, while other Types were found in French Bulldogs (PS Type BHG

12.68%; PS Type M 15.49%) and in English Bulldogs (PS Type BHG, PS Type M and PS Type MHG, all together

18.64%)[15]. Although most common in English Bulldogs, PSR 2ACA was also found in French Bulldogs, Brussels

Griffons, American Staffordshire Terriers and Corso dogs [20].

The probability of admitting a Boxer affected by PS decreased from 1997 (35%) to 2017 (23.8%) in the overall

population of the RC (Fig 2). This result can be explained as an effect of the screening program that has been in

effect since 2000 in the RC. In collaboration with BCI and FSA, the screening program collected, in a separate

database, the individual phenotypic information on the traits leading to a PS diagnosis, which then gradually led

to a reduction of Boxers affected by PS [18,28]. The increased number of veterinary centers qualified to perform

the screening before breeding Boxers could also be a reason to explain the reduction of incoming Boxers affected

by PS in the authors' RC.

In the last decade, English Bulldogs and French Bulldogs have been dramatically increasing in popularity in our

country, as observed in this study's population. Decreased popularity of Boxers was a trend that was observed

in the results published by other authors and in our clinic, as mentioned above [10,29,30].

The factors that influenced the success of brachycephalic breeds are well known by authors in UK, Denmark and

the USA, where many studies have been conducted [30,31]. The lovers of the brachycephalic breeds were less

influenced by health and longevity in terms of breed selection compared with non-brachycephalic dogs' owners.

A variety of different drivers have been identified to explain the popularity of English Bulldogs and French

Bulldogs, including factors that influenced owners' decisions to buy brachycephalic dogs. The breeds'

appearances (large forehead, big eyes, round face, and bulging cheeks), good behavior, deeply affectionate

temperament and good relationships with children have been described as the most important determinants

driving people's desire for these breeds [10,30,31].

All of the typical brachycephalic features valued by the owners of Boxers can be found in English Bulldogs and

French Bulldogs; however, the Bulldogs have a breed size more suitable to current lifestyles. The large size of

Boxers could somewhat influence buyers' breed choice and may explain the decline of this breed in our clinical

setting.

PS in American Staffordshire Terriers (86.2%) and Golden Retrievers (29.3%) progressively increased from 1997

to 2017; this observation is in contrast with our explanation for the decrease in Boxer popularity regarding their

size. In fact, even if the breeds are medium or large in size, they are very different from Boxers, not

interchangeable, and their success was because they became fashionable. For example, American Staffordshire

Terriers, are a status symbol among some young people groups' in large European cities, and the success of

Golden Retrievers was due more to the influence of movies (Fig 3) [12].

Figure 3 - **Probability of identifying Pulmonic Stenosis in Boxers and other large breeds (American Staffordshire**

Terrier; Golden Retriever; German Shepherd; Rottweiler) admitted from 1997 to 2017. Abbreviation:

Probability, P.

Since 1963 (The Incredible Journey - Walt Disney) to 2017 (A Dog's Purpose - Lasse Hallström), Golden Retrievers

have been movie stars, which is a well-known reason to explain the increasing popularity of the breed in a social

context, and many studies have been performed to explain how media can influence a buyer's choice [10-12].

PDA was the second most common CHD in our population, in both pure and crossbred dogs. The presence pf

PDA was significant in females; therefore, a penetrant autosomal recessive and sex-linked inheritance can be

excluded [23]. Although PDA was absent in Boxers, our results indicate the prevalence of PDA was higher than in

studies performed in United States and Europe [4-7]. In our study population, PDA was the 2nd most commonly

observed CHD; it was frequent in large dog breeds including Dobermanns (89.7%), German Shepherds (65.9%),

and Newfoundland (42.9%), as well as in medium and small breeds such as Border Collies (59.1%), Maltese

(76.5%), Poodles (65.7%), CKCS (60%) and Chihuahuas (59%). The highest frequency of PDA was observed from

2006 to 2011, and then decreased [5,6,9,33,34]. The reason for the change in the frequency of PDA in that period

of time could be explained by the use of Amplatzer Canine Duct Occluder, which is suitable for large breed dogs

and that became available in our center in 2006 (Fig 4) [35].

Figure 4 - **Probability of identifying Patent Ductus Arteriosus in large breeds (Bull Terrier; Dobermann; Golden**

Retriever; Labrador Retriever; Newfoundland; Rottweiler) admitted from 1997 to 2017. Abbreviation:

Probability, P.

Nine cases of rPDA were found in Maltese; it is a very uncommon CHD, and in Maltese has only been described

in a publication issued from the same RC in 2011 [9].

SAS was the 3rd most common defect in our study, as a single defect or associated with PS or PDA (8.28%). SAS

was found in 72.7% of the Dogue de Bordeaux admitted to the RC from 1997 to 2017, and Type 2 and Type 3

were the most frequent (36.36% each) (Tables 1,2,5).

The three different subtypes were quite equally distributed in Boxers as Type 1 (39.6%), Type 2 (36.63%) and

Type 3 (23.76%). It interesting to note that SAS was the 2nd most common CHD in our population from 1997 to

2011, and then its frequency decreased through 2017. SAS and PS are very commonly associated with each other

in Boxers (85.8%), and the screening program at this center was aimed to reduce the incidence of both (Fig 4).

The reduction of SAS in Boxers is an interesting result because it demonstrates the effectiveness of the screening

and breeding program in Boxers. In other words, the increased prevalence of PS in 20 years is not a failure of the

Boxer screening and breeding program, but rather the result of the large increase in fashion breeds, such as the

French Bulldog, English Bulldog and American Staffordshire Terrier, that are not screened.

AS was the 4th most common CHD in our population. AS was significantly more frequent in males (7.51% CI 4.57–

7.05, P< 0.005) (Table 3) than in females, and Bull Terriers were the most affected breed (30%) (Table 2).

The dogs diagnosed with AS were older than the dogs affected by other CHDs, and the extreme ages at

presentation were 50 months (AS) and less than 12 months (TOF) (Fig 1). This result is not surprising because

defects of greater severity are associated with the worst symptoms at an early age. Indeed, in many cases, AS is

mild in young dogs and becomes progressively worse with age. The murmur in AS can be very soft and necessitate

Doppler echocardiographic examination for definitive diagnosis, which is a very different clinical scenario from

TOF [5,36].

Many complex defects were found in our population, and PS was the most common CHD detected in association

with the other CHDs (SAS, VSD, PDA) (Table 5). The overall prevalence of the PS-SAS association in Boxers (85.8%)

seems very high; however, the value has been estimated over the 20-year period (Fig 5). SAS-PDA was very

common in Newfoundland; this complex CHDs was found in the 84.6% of the admitted dogs belonging to this

breed (Fig 5).

Figure 5 - **Associated congenital heart defects admitted from 1997 to 2017.** Abbreviation: PS, pulmonic

stenosis; SAS, subaortic stenosis; VSD, ventricular septal defect; PDA, patent ductus arteriosus, DCRV, double

chamber right ventricle; ASD, atrial septal defect; AVCD, atrioventricular canal disease.

PDA and SAS are also very common as simple defects in Newfoundland (Table 2), and the detection of one CHD

should be cause for investigation of the other CHDs, in order to exclude the presence of both. The left ventricle

volume overload due to a large PDA could cause the overestimation of the severity of SAS. In this case, the

correction of PDA determines the reduction of the volume overload, and because the gradient across the aortic

valve decreases significantly, the actual severity of subaortic stenosis can be evaluated only after the ductal

closure.

Knowing the association among simple CHDs and the breeds involved could be a useful diagnostic tool that

should be taken into account in clinical practice.

From 1997 to 2017, several changes have occurred in the clinical and diagnostic approaches to CHDs. The

evolution of diagnostic technology, the changing criteria in the classification of some congenital heart diseases,

and the increased attention to the selection of breeds prone to CHDs has modified the epidemiological conditions

of CHDs in the study RC.

In the final section of the study, the relationships among the popularity, volatility and number of CHDs in

individual breeds were investigated over a 20 year time period.

The analyses of the popularity of the breeds found that the number of CHDs detected in a breed increases with

the number of registrants of that breed in the ENCI database. This result can be explained by the response to a

growing market demand. In this case, the objective of some breeders is to increase the number of puppies of the

breed, and little attention is paid to the gene pool strength, to the selection of the ascendants and to a

trustworthy breeding program.

Recent studies indicate that breeds with more inherited disorders have become more popular, not less popular,

suggesting that health considerations have been secondary in people's decision to acquire a specific breed of

dog [11,14].

Volatility is the average absolute annual change in ENCI registration of dogs belonging to a breed, and it was

found to be independent from some breed features (e.g., longer life, inherited genetic disorders, health

problems). Societal influences (fashions and fads) have been described as having a primary effect on the

popularity of companion breeds, and the volatility of the breeds is an interesting parameter to measure the

change in breed popularity over time. The volatility of the French Bulldog was very high (0.10), and the OR of

disease was also high (6.98 CI 5.60 – 8.71). In contrast, the volatility of German Shepherds was very low (-0.03)

even though the number of registrations of German Shepard puppies is the highest in 20 years among the breeds

in our study population. This observation is in accordance with the results obtained by other authors that found

that social influence has been more important than functional traits (e.g., health and trainability) in determining

owners' choice of a breed [11,37].

Breed size is thought to be a very important trait behind the owner's decision to choose a breed. This observation

is well supported by the volatility values, with significantly lower or more negative values for large breed dogs,

and significantly more positive values for small or medium breed dogs. Chihuahuas, French Bulldogs and CKCS

were the most valued small breeds. Among medium size breeds, the Border Collie and American Staffordshire

Terrier showed the highest volatility.

However, size was not the only parameter that influenced the popularity of a breed; Yorkshire Terriers and

Maltese showed a very low volatility despite their small size.

The influence of media, including movies, television and radio, on the audience is well known and described[10-12].

Unfortunately, people may choose dog breeds based on this media influence and on the idea that a breed is

fashionable or a status symbol. These dog owners may not care about the social context in which it should be

introduced or the health problems from which a breed may suffer.

The limitations of this study were primarily associated with its retrospective nature; some cases could not be

included because of a lack of clinical and diagnostic information. In particular, the absence of information about

the prevalent breeds in crossbred dog has been a limitation in identifying relationships between breed and CHD

in this class of dogs. A bias could also arise because the study was conducted in a single cardiological referral

center that specializes in the surgical or percutaneous repair of PS, PDA, VSD and ASD, and this center has been

unique in our country for a long period of time. This specialization of this particular center is the reason why CHD

and some breeds (e.g., Boxer, German Shepherd) are overrepresented in our study population. However, this

specialization could also be a point of strength because any variation in the preferences of breeds can be

monitored from a consistent study location.

Conclusions

In conclusion, this study allowed us to evaluate the Boxer screening program for CHDs, whose success is

evidenced by the decreased prevalence of SAS and PS in this breed.

However, the paradox that people buy breeds of dog that are predisposed to congenital heart diseases was also

evidenced in our study, and, as reported elsewhere, fashions and trends influence many individual choices

[11,12,29,30]. The owners are not often fully aware of the potential problems their dog may face prior to

acquisition of a dog [31,32]. It is also possible that owners do not perceive the clinical signs of some inherited

cardiac disorders as problems, but rather as normal, breed-specific characteristics (e.g., murmur in CKCS).

In general, when choosing a breed, owners may consider other characteristics to be more important than dog

health. Nevertheless, the authors think that an effective breeding program should start with educating the

owners about the health problems of a breed. If the owners are not motivated to buy a healthy breed, then

breeds with inherent health problems will be perpetuated, and the motivation of breeders to address health

problems in their breed reduced.

In this context, the importance of creating a network of veterinary cardiology centers that monitor the

distribution of a breed and treat the problem of CHDs using the same clinical approach and diagnostic procedures

is clear. This approach could be a useful instrument to provide breeders with effective support in implementing

the breeding program in order to control the diffusion of CHDs, without impoverishing the genetic pool.

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Months

Age

SAS-PDA
NEWFOUNDLAND 84.6%
GERMAN SHEPHERD 15.4%

Other combinations
12%

ASD AVCD
3%

VSD Others
4%

VSD DCRV
5%

SAS Others
6%

SAS VSD
3%

SAS PDA
8%

PS Others
10%

PS PDA
8%

PS SAS
22%

PS VSD
19%

PS-SAS
BOXER 85.8%

PS-VSD
MIXBREED 23.3%
PINSCHER 16.7%
FRENCH BULLDOG 13.3%