

Akela du Domaine du Baschberri



Breed: Border Collie
Microchip number: 250269611470427
Birth date: 2025-04-04

Registration number: 61988
Test date: 2026-04-18
ID kit: DJYWGKS

Health conditions known in the breed

Early Adult Onset Deafness For Border Collies only (Linkage test)	Gene	Risk Variant	Copies	Inheritance	Result
	Intergenic	Insertion	1	AR	Carrier

Information about the genetic condition

Gradual hearing loss affecting both ears is observed usually between the ages of 5 to 7 years. Please note that this test is specifically for the Border Collie breed and is a predictive linkage test rather than a test for the true causal variant. Not all dogs with two copies of the linked marker will go on to show signs of hearing loss.

Breeder recommendation

This disease is autosomal recessive meaning that two copies of the mutation are needed for disease signs to develop. A carrier dog with one copy of the Deafness mutation can be safely bred with a clear dog with no copies of the Deafness mutation. About half of the puppies will have one copy (carriers) and half will have no copies of the Deafness mutation. Puppies in a litter which is expected to contain carriers should be tested prior to breeding. The carrier rate of the risk variant is up to 35% in the Border Collie population, highlighting the importance of keeping healthy carriers in the breeding program by breeding them to dogs tested "Clear" (zero copies) of the risk variant. Please note: It is possible that disease signs similar to the ones caused by the Deafness mutation could develop due to a different genetic or clinical cause.

Collie Eye Anomaly (CEA)	Gene	Risk Variant	Copies	Inheritance	Result
	NHEJ1	Deletion	0	AR	Clear

Information about the genetic condition

Collie Eye Anomaly is primarily characterized by choroidal hypoplasia, leading to an underdeveloped vascular supply to the retina, and is especially visible temporal to the optic nerve. CEA lesions may be present in both eyes or asymmetric in nature. CEA-associated choroidal hypoplasia is non-progressive and usually does not cause visual deficits on its own. However, CEA has a range of clinical expressions. Vision impairment is more likely in dogs with the "extended CEA phenotype," which may include optic nerve head colobomas, retinal detachment or intraocular hemorrhage secondary to coloboma(s) in severely affected dogs. Optic nerve head colobomas appear as excavations of the optic disc surface. Diagnosis of CEA lesions should be completed before 10 weeks of age, as retinal pigmentation can mask choroidal hypoplasia as the puppies grow, a phenomenon termed "go normal" by breeders. Research is ongoing to determine what additional genetic factors may be present that influence the range of severity seen in dogs with CEA.

Breeder recommendation

This disorder is autosomal recessive, meaning two copies of the variant are needed for a dog to be at an elevated risk for being diagnosed with the condition. A carrier dog with one copy of the Collie Eye Anomaly variant can be safely bred with a clear dog with no copies of the Collie Eye Anomaly variant. About half of the puppies will have one copy (carriers) and half will have no copies of the variant. Furthermore, a dog with two copies of the CEA variant can be safely bred with a clear dog. The resulting puppies will all be carriers. Puppies in a litter which is expected to contain carriers should be tested prior to breeding. Carrier to carrier matings are not advised as the resulting litter may contain affected puppies. Please note: Recent research has suggested that additional genetic risk factors likely exist in some breeds that resemble or contribute to CEA risk, especially the more severe disorder expression. It is possible that disorder signs similar to the ones associated with this CEA variant could develop due to a different genetic or clinical cause.