SWORN AFFIDAVIT

1

Collin Armand Martin ID number 8205065266087 states under oath in English. I make this statement in terms of section 212 (4) of Criminal Procedures Act 51 of 1977.

2

I am a 43-year-old male working as a specialist veterinary pathologist for Idexx South Africa, where I have been employed since 2014.

3

I qualified as a veterinarian in 2008 at Onderstepoort Faculty of Veterinary Science. I am currently registered as a specialist anatomical veterinary pathologist with the South African Veterinary Council and my registration number is S020/06090. I worked as a veterinarian from 2009 to 2014 as a small animal clinician at Blue Hills Veterinary Clinic in Kyalami. I left Blue Hills to pursue an anatomical pathology residency with Idexx at Onderstepoort in 2014 and was trained by Dr. Liza Du Plessis, Dr. Sarah Clift amongst others at the faculty. I qualified with an MMedVet (Pathology) in 2020. I am currently a senior specialist anatomic veterinary pathologist for Idexx South Africa.

4

Due to unavailability of state post-mortem services, I was contacted the inspectorate at the SPCA Cape of Good Hope and asked I could assist with a post-mortem on a suspected cruelty case.

5

I performed the post-mortem at the Wildlife section of the SPCA Cape of Good hope on the morning of the 22nd July 2025 and made the following observations. The carcass was in bag labelled with admission number A63866.

6

The carcass was that of an adult Fox Terrier, intact female in very poor body condition. The paws are covered in sand. The spinous process, ribs and spine of the scapula are prominent. There are numerous ticks noted on the skin, some of which are moving. The oral mucous membranes are severely pale and slightly yellow. The mammary glands are developed but no milk is present. The neck region shows broken hair shafts (consistent with a collar).

On opening the carcass, the entire carcass shows marked yellow discolouration (icterus). The lungs are pink and well aerated. The liver shows marked accentuated lobulation and yellow discolouration. The spleen is markedly enlarged. The urinary bladder is filled with dark red coloured urine. The blood smear shows 4+ babesia parasites within the erythrocytes. Only a mild monocytosis is noted. No other pathology was noted in the remaining organs.

7

The carcass shows changes typical of severe babesiosis (anaemia, splenomegaly, icterus, haematuria) and this was positively confirmed on blood smear. Canine babesiosis is caused by infection with a protozoal parasite (*Babesia canis rossi)* which is typically transmitted via infected ticks. In this case, there were numerous ticks noted on the skin. Incubation period for the disease is 7-10 days after inoculation. Typically, most owners observe their pets as "not themselves" and "not eating" with progressive weakness and lethargy as the anaemia worsens. Treatment during these periods is usually rewarding and completely curative.

Prevention is based on ectoparasite control with appropriate ectoparasiticide using the protocol appropriate for the product used. The is a progressive infection causing severe anaemia due to intravascular haemolysis of red blood cells. This can overwhelm both hepatic capacities to metabolise freed haemoglobin, (noted clinically as yellow icterus) and overwhelm the resorption capacity of the kidney (hence haematuria). In this case, the anaemia was severe and in long standing cases, complication become more common. There are numerous potential complications but, in this case, I suspect severe hepatopathy as well as possibly acute renal failure. Regardless, if left untreated, death is inevitable. The dog was also in very poor body condition. The exact cause is difficult to determine and may be multifactorial. It could be secondary to lactation as well as a due to fever associated inappetence from the babesiosis. However, please establish if this bitch was given an adequate lactation diet prior to death.

My conclusion through my training, knowledge and experience was that this animal suffered due to untreated disease and at the very least, should have been brought for

veterinary attention prior to death. It was also in very poor body condition and level of nutrition/care is seriously in question here.

8

I know and understand the contents of this statement.

I have no objection to taking the prescribed oath.

I see the prescribed oath as binding on my conscience.

_____

DEPONENT

The deponent has acknowledged that he knows and understands the contents of this affidavit/declaration, which was signed and sworn to before me at _____ on this the _____ day of _____ 2025, the regulations contained in Government Notice No R1258 of 21 July 1972, as amended, and Government Notice No R1648 of 19 August 1977, as amended, having been complied with.

_____

COMMISSIONER OF OATHS

Full names: _____

Designation: _____

Business address: _____