



Hello and welcome to Global Sanctuary for Elephants' podcast, Global Rumbings. Global Sanctuary for Elephants, or GSE for short, is a nonprofit organization with a mission to create vast safe spaces for captive elephants where they are able to heal physically and emotionally, often from very traumatic pasts. I'm your host, Nadia Mari, and I'll be taking you to the lush jungle of the Mato Grosso region in central Brazil, home of GSE's initial project Elephant Sanctuary Brazil, currently home to six female Asian elephants, lovingly referred to as the Girls.

Nadia:

Hello, everybody. Welcome back, and thank you for joining us again this week for a new episode of Global Rumbings Today's podcast and actually, the next few podcasts are very unusual in terms of our recording setting, because I am actually in Brazil, I am at the sanctuary. I am looking out into the sanctuary grounds. Absolutely spectacular view. So I just have to look up and say, hi, Kat, hi Scott.

Scott:

Hey, Nadia, how are you today?

Kat:

Hey, Nadia.

Scott:

It is very strange looking over across the table and seeing you there. We're supposed to be looking at it through the computer, so definitely a little, a little odd for this recording.

Nadia:

Very, very lovely, very unique experience. How am I? I'm tired, but happy. I spent the morning shoveling elephant poop in yard five with two of your caregivers, Luisa and Shirlei. And then I had a really, really tasty lunch that I will say my name sister cooked. Zenadia is her name. So there's Zenadia and Nadia here at the sanctuary. And I had two helpings.

And then Zenaida made me a cup of coffee, and I still fell asleep in one of the swinging chairs at the office. And, yeah. So I'm feeling good. I'll try to stay awake during the recording.

Scott:

And if you don't stay awake we're going to punish you with more poop cleaning.

Nadia:

Talking of poop, well, our last episode, we talked a lot about poop and how that reflects an elephant's health. Of course, it also reflects a human's health, but we were talking about elephant poop, about consistency, about size. And I've had ample opportunity today again to look at various forms and sizes of elephant poop and say, oh yes, this is a perfect honey melon sized elephant poop.

So let's go back to Mara and the health issues that we talked about, or you mentioned last time that began to show themselves, I think a couple of months after she had arrived at the sanctuary.

Scott:

Yeah. So as we talked about before with Mara, her digestion had been off for a long time. We attributed it to her diet, and then everything seemed to be going pretty well. And it was a few months after she arrived things started going a little bit off again, and Kat actually was here when it first started. We were, Trish and I were on Bambi's rescue, working to get her out of the zoo.

And what ended up happening was, it started off by her just being really selective about random foods.

Kat:

Yeah, it'd just be like one thing, you know, she was fine, she would eat everything, but for some reason, she didn't eat apples, which isn't normal. And then it was like four days later and she'd eat really well. She'd eat hay really well. And then she wouldn't eat apples and carrots. And it's like, okay, where is this going?

Scott:

And as time went on and she became more and more selective and it brought up more question of what's actually going on? Is this a palatability issue? Is it a tooth issue? Is it a digestive issue? It's not always easy to say, oh my God, it's not always easy to say or to see. and we ended up, as time went on she became really hyper selective, and very, very, very low food intake.

And, sometimes she would eat maybe 2 or 3 apples in an hour. It was, we were with her almost all day long.

Kat:

It took a while to get there. I mean, you're talking weeks to progress to the point where we're like, practically begging her to eat a piece of watermelon that can't have a single little tiny bit of white rind on it. Otherwise, it's completely rejected.

Scott:

She would have a piece of watermelon that was, you know, the size of what you talked about, the size of a honey melon. And, you know, that's relatively large. And if it had a piece

of white, I'm talking like a centimeter of white on it, she would eat it. She would just give it back to you fully rejected.

And I think she was just, we realized, what we presume happened anyway, is that something was causing discomfort in her physical body. You know, when she was eating, it wasn't that she was having difficulty digesting. It was actually a pain that was causing or discomfort that was within her. And she was looking for what the cause was.

And the selection was actually a process for her to try to eliminate what's causing the discomfort. And when one thing didn't work, then she went to the other thing, went to the other thing. And oh maybe it's the white on the watermelon there, you know, but ultimately it was probably none of these things. and likely it's because she has some sort of malformation in her abdomen.

We believe there's a potential that there's a tumor. It's impossible to say, some sort of something that was causing a stricture in her digestion, because sometimes you would see her eat really well one day and say, eat really well in comparison to what she had been eating. Not in comparison to what a normal elephant would be eating, and she'd eat maybe 20 or 30% more.

And then immediately afterwards, you know, the next day she wouldn't eat anything at all.

Kat:

Yeah, she was big on eating a lot at night, and she would have a good night meal. And then in the morning she was like, don't even show me food. She's like, I don't want to eat it. But it was when she ended up lying down that we actually could see that there was some sort of whether it's a blockage.

We've had elephants in the past that we've worked with that ate rocks at the facilities that were at, they don't have anything to do. So they just dig up dirt and eat rocks, you know. So whether she has a bunch of rocks at the bottom of her intestines, probably not her stomach, or if she has an actual mass, we don't know.

But you can visibly see something when she was at her skinniest point when she lay down. And that was when we were like, oh, I guess maybe our suspicions are correct. But, you know, we've talked about it before. Limited diagnostics, because of their size, you can't just stick her in an MRI or do an ultrasound that's going to show us anything except for her fat layers.

So it is kind of an assumption from what went on. But it was actually after she lay down and when she got up that she started eating well again. But she was.

Scott:

She lost a lot of weight. So I think one thing as time went on with her digestion, I mean, her lack of food intake, she lost a lot of weight.

Kat:

She lost a lot of weight.

Scott:

There were times that we were very concerned, you know. We leave her at the end of the day and come back and talk about what we're seeing.

And there are times that we are saying, we don't know what's going to happen. How much longer can she continue with this if she doesn't start eating better soon, she's not going to be able to sustain herself.

Kat:

And of course, we're trying different medications, different supplements. We're talking to veterinarians from all over the world, as usual. You know, our egos don't prevent us from reaching out to see if anybody has anything they can suggest. And, you know, vets were talking about endoscopes, and there actually is one place that has an elephant endoscope. And they said, you're not going to see anything, you know, with even how far it can reach.

You're not going to get to where you need to. It was just constant care and essentially begging her to eat different kinds of foods and Gatorade and what have you.

Scott:

And think about an elephant that's not eating a white on a watermelon. And then you want to try to give her a medicine, you know, she's not going to take the medicine because then you're trying to mask the taste of it. And then you're putting peanut butter and all these other things. She didn't want anything. So it was really, really, really tricky.

Kat:

Just before she probably, maybe two weeks before she went down, the only medication we could get into her was injectable.

Nadia:

So when she was down and got back up, you said that she ate better. Do you think then that was possibly a physical shift of whatever is inside her tummy or her intestines?

Scott:

What started happening right at the end there, we came in one day, and of course, we're used to this very skinny, skinny elephant because she's been losing so much weight and she was massive. I mean, she was bloated and she was so, so, so bloated. And this can also go catastrophically bad. That level of bloat can cause can cause death.

Kat:

You know, doing rectal fluids and all of this other stuff and giving her something for that.

Scott:

And so with the bloating, it just got substantial. One day I remember her walking down the road, heading back towards the barn and calling on the radios, oh no. It was like, oh no, this

is really bad. and that evening she actually laid down. We left her late that night, her last treatment. Early the next morning, she had been laying down, and she was able to get rid of all the gas on her own, but she was exhausted.

She was down on the ground. We didn't know exactly what was going to happen at that point Rana and Bambi were by her side throughout all of this. They were by her side.

Kat:

But we had them go into yard four so we could safely do stuff with her, because we pulled blood to make sure that that all looked normal, which it did. But I mean, at that point we were staying with her until about 1:00 in the morning, and then we were going down in the morning at about five in the morning.

I mean, we were there all the time because it was the only way you could get her to eat anything.

Scot:

So we had Hannah and Ma go into the yard four, and she was actually in the back of yard two at that time. They shifted into the yard four and they stood there as close as they could watching as we took care of her.

Kat:

They're very good about it though. I mean sometime you're not sure if you can get somebody to shift away from an elephant they're close with, but I think they get it sometimes. So.

Scott:

Yeah. And then what? She just needed to rest. She wasn't trying to get up on her own. And when they're not trying to get up, you immediately don't start trying to lift them up. And especially in that scenario where she's tired, she just needed to rest her body. She had clearly been on the ground for at least a couple of hours, which in one was good because she was able to get rid of, release all that gas, whatever that blockage was, that was, you know, causing the gas to build up.

That was able to be expelled. And during that time, when she was lying down with her being so skinny and without the bloating from the gas, you could see something in her abdomen. There's what looks like a giant basketball type form in the bottom of her belly. It looks like it's going to be superficial, but we know based on how elephants are formed, it's going to be quite deep inside her abdomen.

So that's when we first started seeing this mass, and we were trying to figure out what that is. And when she got back up, she just started eating the world. She wanted to eat everything. And of course, then we had to use caution to not let her eat too much, because she finally started feeling good. And we were concerned.

Okay. She's eating well today. Tomorrow she's probably not going to eat because she's going to cause. You know, she's going to cause, you know, pain again. And the next day, she

wanted to eat more. And the next day she wanted to eat more. The next day she wanted more. So we started seeing this trend, and we were cautiously optimistic.

And the only thing we can come up with is likely this mass or potentially something else, was causing a stricture that when she ate too much food, it would cause pressure, cause pain, she stops eating. And that same stricture likely caused the gas buildup. And with her movement laying down to move that and with the, you know, extra pressure from the gas like these shifted things in her abdomen enough that things started flowing again.

Nadia:

And how is she today? Because in the mornings we go into the elephant kitchen. When I say we myself and all your, your caregiver team and we prepare the buckets for the four elephants for Bambi, Mara, Rana and Guille and Mara always has a special crate. She has different foods. So she is still on a special diet for her supplementary feeding?

Kat:

Yeah, because of concern over an ulcer, she doesn't get grain like everybody else. She likes grain and she's not allowed to have grain. And she gets much more produce than everybody else. She gets, you know, while everybody gets these black - what are they, 5 pounds Oh, they're not even that big.

Scott:

No, no. They're like two and a half gallon and.

Kat:

Two and a half gallon buckets that have grain in them. And then we top it off with like 10 pounds of produce. She gets like 50 pounds of produce.

Scott:

No, it's about 15 pounds. Sorry. 15 kilos. Thirty something pounds.

Kat:

Yeah. But she's also on very low dose pain medication, just in case she does still have some degree of pain with that.

Scott:

She still gets cooked pumpkin, which I know many of you have seen the video of her eating her pumpkin slop. At times it can be very, very messy. It's one of the things she would eat when she wasn't well was the cooked pumpkin.

Kat:

And it's good for fiber and it's good for moisture because you always have to worry about dehydration in those situations. And with digestion issues, especially with elephants, you want high fiber to make sure everything is passing through. So it's a good thing she likes it because it's good for her.

Nadia:

And she's put on. When you say she lost a lot of weight, how much is that roughly? And has she put that weight back on again? How much is that in? Well, in pounds and kilos if you can.

Scott:

The problem is she was way overweight at the same time.

Nadia:

Ah okay.

Scott:

So, honestly, I don't recall if we had a weight from her at the beginning of all that. I think we did. Only from the zoo. You know, they had an estimation.

Or during the trip, I don't recall her exact weight and I don't recall exactly how many kilos. but she was skinny, skinny, skinny. And she's now back up to a good weight for her age and size. You know, her overall body condition score is actually quite good.

Kat:

Yeah, it's like hundreds of pounds and kilos. I mean, it's not like a little bit of weight. She lost a lot of weight.

Scott:

Skinny, skinny, skinny girl.

Nadia:

So as we've talked about before, the elephants come with a past, which means that they have lots of medical issues. And, like then in Mara's case, it is something that you are monitoring on a daily basis. And being here now at the sanctuary, I see that you are in constant conversation with the caregivers to see what they are observing.

Then you talk to your vet Mateus so you are always, as I understand, ready and prepared to change something in her diet. But at the moment, at least for a few days, the week I've been here. It does seem to be that she is stable and she's eating well, and she's enjoying her time with Rana.

Scott:

She's quite stable right now as far as digestion goes.

Kat:

She's good for a while, but yes, she is the most watched. Well, Bambi is watched a lot more closely now, recently with her vision issues, but before that, I mean definitely the most closely watched elephant. If she doesn't eat a carrot, everybody knows you know she is the only elephant that if she leaves anything or if she eats slower than normally or, you know, yes, she is very closely paid attention to, but she's been doing good for a long time.

Nadia:
Oh, great.

Kat:
Now that we said it.

Scott:
You talked a little earlier about the veterinary team. And just to augment that a little bit more, you mentioned Mateus who is definitely here on the front lines. He is the caregiver/veterinarian from Cuiaba. And he also studied in the United States. We also have another veterinarian from Cuiaba. She is a horse vet specialist named Luciana.

She comes about every two weeks, unless we need something more. And then she is always ready at a moment's notice. And then specifically if Mateus ends up being on vacation, she's on call 24/7. And then also we have Dr Trish London, who is a longtime friend of the sanctuary. One of the first interns that we had back in the sanctuary in Tennessee and involved with several other rescues.

She also does work in Asia. And those three, combined with Kat form our primary veterinary team, as well as other consultants that we call in periodically, as needed for additional advice. So a pretty well-rounded team and everyone gets involved with all these discussions.

Nadia:
So, yeah, I think we, here am I sort of, we're not on a zoom call today, so there really is no time pressure. But, now I understand when you say, you know, we've got stuff to do. And, I think this afternoon I'm going to become a little bit OCD because I saw that the refrigerator, the geladeria, is it that in Portuguese, needs as, at the female Asian bond needs cleaning.

So after I've helped in the elephant kitchen if there is some time, I might go and clean out the fridge. So there's always lots of stuff to do. And I don't know what you've got planned Kat, what you've got planned Scott, but, yeah. Thanks for taking time out. And now I really do understand that you really seriously do take time out. That you do such a, after the few days, the week I've been here.

My utmost respect to you both. To the entire team. Luckily, today when I was shoveling poop, it was quite cloudy and there was a lovely breeze because otherwise, I don't know how your team does it. I know they get used to the heat, but, yeah, even so, it's a, running a sanctuary is fantastic because it's a sanctuary for the elephants.

But the human team, the maintenance team, the caregivers, the domestic staff, they just do an incredible job. So, yeah.

Scott:
Yeah. So earlier today, Nadia was talking about, you know, how hard it was working. And I told her that the trick is just to work faster. And the faster you work, the more the breeze blows. You create your own breeze, so you create your own ventilation. And by creating your own ventilation, then you therefore cool off. That's my theory anyway.

I'm not sure it's going to work, but we're going to try to. I'm going to get Nadia to work a little faster and see if it helps keep her cool.

Nadia:

I knew I was doing something wrong. I, you know, I'm a rookie. I'm sorry. You know, I got things wrong.

You were talking about cleaning the geladeira. And. Yes, I think that's a task that you may really enjoy because people actually use our cooler not as a geladeira to keep things cool, but as a type of air conditioning. because we don't have air conditioning out here. But sometimes I walk in and they have the walk in cooler or wide open, because I think it is a sanctuary version of air conditioning.

And I think people are going to start fighting over cleaning they walk-in cooler. And the general idea to, because it might be the most comfortable place in the sanctuary.

Nadia:

Okey dokey. Then, you'll take me back down to the office, drop me off for the elephant kitchen. Maybe, as I said, some refrigerator cleaning. And so. Yes. Thank you.

Scott:

Yeah, it feels weird to say. See you later when you're right across the room. You are right there in front of us. So. Yeah. I'll see you in five seconds. Let's get back to work. Nadia. And, we will chat again on the podcast in a couple weeks.

Nadia:

Okie dokie then. yeah. We'll see each other around. Okay. Thank you. Bye.

That's all that we have time for this week. We you enjoyed the podcast. And if you did, don't forget to subscribe so you never miss another episode. Another great zero cost way to support us is by leaving a five star rating or glowing review, as this helps other people discover the podcast. Thank you so much. And until we meet up in two weeks time, take care.