AVAR Files Petition with USDA
Seeks to Eliminate Violations of Federal Law

A "Petition for Rulemaking and Enforcement Under the Animal Welfare Act to Eliminate Violations of the Review of Alternatives Provisions" was filed by the AVAR with the United States Department of Agriculture, Animal and Plant Health Inspection Service (USDA-APHIS), after blatant violations of federal law continue at U.S. Veterinary Medical Schools.

Although AVAR is the primary petitioner in AVAR vs. Ann M. Veneman, Secretary of Agriculture, several veterinary medical students and a recent graduate joined as co-petitioners. The students joined the petition because each of them has recently faced opposition with their respective veterinary medical school when they requested an alternative to harming animals. Further, in some cases, an alternative to harming animals was provided and then taken away.

Attorneys at Kimbrell and Mendelson LLP, who are considered experts on the federal Animal Welfare Act, reviewed protocols and other records provided by the AVAR on animal use at U.S. veterinary medical schools and a comparison of alternatives used. "We found great discrepancies between veterinary medical schools in how many animals are used and killed each year, as well as the non-harmful alternatives to these uses. We also found that protocols were not being filled out completely or correctly and that, in many cases, investigators failed to search for alternatives to harming and killing animals," said Joseph Mendelson. "We are very concerned that violations are occurring at most all these schools, and we are aware that similar violations are also occurring at schools of human medicine and other universities which fall under federal guidelines," he said.

Some schools are replacing the use of animals with humane alternatives. Other schools are completely ignoring the availability of alternatives and are continuing to kill large numbers of animals. When looking at the protocols from these schools and then comparing the numbers of animals used and killed at various schools, the results are profound, even though the universities claim that the number of animals they 'order' on their protocols doesn't necessarily reflect the true number they use.

"In the same courses at various schools, the numbers of animals used may differ substantially," said Nedim Buyukmihci, V.M.D., AVAR's president and a professor of veterinary medicine at the University of California, Davis. For example, in the 1998-99 school year at North Carolina State University, 760 animals were killed in clinical procedures, whereas at Tufts University, University of Florida, Virginia Tech, and University of Maryland, no animals were killed in these procedures. At the Texas A&M University, 419 animals were killed for anatomy training whereas no animals were killed by Michigan State

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An Interview with AVAR Member, Richard Bachman, DVM

Dr. Richard Bachman

One thing Dr. Rick Bachman will admit to is that he thrives on challenges and variety. No matter what he takes on, he tends to add a little twist to the project hoping to accomplish more. For example, rather than having taken a direct route to veterinary medicine, he majored in marine biology at three universities before graduation from the University of California, Berkeley. When at the University of California, Davis, School of Veterinary Medicine (UCD), he graduated with an emphasis in large animal medicine and then completed graduate work in public veterinary medicine.

Dr. Bachman has owned his own private practice for 15 years. However, he couldn’t sit still and run “just” a practice for very long. He has always had a strong interest in animal shelters and animal control ever since he set up a volunteer organization at the city of Berkeley shelter during his undergraduate years. Later, he began working as a shelter veterinarian. At that time, shelter veterinarians were uncommon, so Dr. Bachman designed a program to train veterinary students from UCD in an externship at his animal shelter. AVAR subsequently helped to expand the externship program to other shelters. Dr. Bachman’s work hasn’t gone unnoticed; in 1999, he was named “Shelter Veterinarian of the Year” by the American Humane Association.

Dr. Bachman currently consults with several city, county, and private shelters through his service, Shelter Medicine Support, while running his private practice. He also works with the AVAR on issues involving shelter medicine. We interviewed him about some issues that shelter veterinarians routinely face and why all animal shelters need a medical program.

AVAR: What constitutes a shelter medical program and why do you think it is important for every animal shelter to have one? What percentages of shelters do you estimate have a working program?

Bachman: A shelter medical program is an organized effort to deliver veterinary services to all the animals within the shelter. Historically, shelter workers have done their best to provide care for animals but have been severely restricted by available resources and manpower limitations. Individual animal care, as provided in a veterinary practice setting, is impossible to deliver at a shelter due to
the sheer number of animals who are impounded each day. In addition, treating a population of animals who have a disease is vastly different from treating an individual animal with that same disease. I often ask my colleagues this question: What would you do if 30 cats with upper respiratory infection were at your practice door in one morning? Basically, you would look for a different approach to managing the disease as a group rather than in an individual.

Today, we as a society expect more from animal shelters, and some states mandate better care by law. The need to develop a system or program to deliver veterinary services to shelter animals is rapidly being developed as a new veterinary discipline called Shelter Medicine. New caretakers want more information about their new pet that oftentimes has a medical or behavioral flavor to it. Veterinary professionals need to be able to supply this information to ensure retention of the new pet in the home. There is a wide range of shelters with working medical programs. Historically, the nonprofit, limited-admission shelters have had better resources from which to pull medical programs, while government-run shelters still struggle to provide this service. In either case, we are seeing an emergence from the Stone Age in terms of shelter medical program development. Unfortunately, there remains a low percentage of shelters that have an in-house medical program directed by a veterinarian.

**AVAR**: What are some of the common medical situations in shelters and how does a medical program help to deal with them?

**Bachman**: The most common medical conditions in shelters involve infectious diseases that result from exposure to a continual incoming stream of new animals, some of whom carry infectious agents. Upper respiratory infections are the most prevalent. In addition, trauma cases are numerous. I use a term called “putting out fires” often when I work at shelters. There always seems to be a catastrophe waiting around the corner. The fire could be a disease outbreak, such as panleukopenia (feline distemper), or an unsuccessful adoption due to a non-disclosed prior medical condition, or even a trauma patient brought in by a field officer. All cases require a prompt medical action to be taken. I have found that a properly designed medical program reduces the number of fires that need putting out. In turn, the staff has more time to spend on other proactive preventative programs within the shelter. A medical program through disease surveillance and proactive protocols tries to reduce the number and severity of the problems which occur in all shelters. Many states have holding periods for impounded animals, yet many shelters routinely “depopulate” when there is a disease outbreak, even if the animals haven’t been held the required length of time. How should shelters handle disease outbreaks and still comply with law? A response to a disease outbreak does not necessarily equate with the need to “depopulate.” Any disease outbreak has to be evaluated for the agent involved, risk of exposure, severity of symptoms, and potential outcome to the shelter population as a whole. The term “depopulate” is a strategy reserved for the most serious conditions in which seemingly healthy but exposed animals are euthanized in order to protect new arrivals or simply to try and end the disease outbreak. It should be a last ditch effort used after failure of all other strategies to control a disease outbreak.

**AVAR**: What can advocates do to convince the director at their local shelter or whoever else makes this decision to develop a medical program if they don’t already have one?

**Bachman**: The best advice is to research shelters that have a medical program and see if the program would work for your shelter. A working medical program requires the use of registered veterinary technicians and a veterinarian. I have found that in-house medical programs can be self-funding through indirect expense savings but, more importantly, they elevate the shelter’s image and staff morale in an immeasurable way.
AVAR Takes on Pound Seizure in Sacramento

Of the 58 counties which make up the state of California, only one still sells companion cats and dogs from its shelter in a practice that reportedly began back in the 1960’s and is known as pound seizure. The issue has been the subject of intense media and public interest for many years. AVAR recently brought the issue back into the spotlight, when it uncovered violations of an agreement made between Sacramento County and purchasers of its animals.

Pound seizure has been before the Sacramento County Board of Supervisors twice and lost on a public referendum once in 1989. The animal control department, Sacramento County Animal Care and Regulation (SCACR), currently sells unwanted animals to the University of California School of Veterinary Medicine (UCD) and Sutter Hospital. In 2001, two cats and 284 dogs were sold from SCACR to UCD and Sutter Hospital, according to SCACR records (although UCD records claim one additional dog). Of these, 46 individuals were used for research, 228 were used for veterinary training, 11 were adopted, one was euthanized due to illness, and one died before being used. These animals were purchased for $75 each.

Of the dogs who were taken to UCD, 137 were used for anatomy training, despite the fact that UCD has a client donation program for obtaining cadavers of animals who were euthanized for medical reasons. Some of the dogs were kept from weeks to months before being killed. Fifty-one of the dogs were used for research.

AVAR to AVMA - Forced Molting Position Still Unacceptable

The AVAR will be approaching the AVMA for the fifth time, asking it to change its position statement on forced or induced molting in ‘laying’ hens. A revised position statement was accepted last year in accordance with a resolution submitted by the American Association of Avian Pathologists and the Association of Avian Veterinarians. Although the new position statement condemns total food withdrawal, the most common method of inducing molt, it still finds ‘intermittent’ feeding to be acceptable. It also erroneously refers to induced molting as a process that simulates natural molting, and it promotes more research into the matter, rather than outright condemnation of this inhumane practice.

Regarding AVMA’s assertion that induced molting is a process that simulates natural molting, according to Ian J.H. Duncan, Professor of Poultry Ethology, Chair in Animal Welfare, Department of Animal and Poultry Science at the University of Guelph, “Nothing could be further from the truth. Under natural conditions, domestic fowl reduce their food intake but do not stop eating (a) when they are incubating a clutch of eggs, and (b) when shortening day-length pushes them out of reproductive condition. In this latter case, when birds stop laying, they go into a natural molt and feathers are gradually replaced over most of the body surface and this is a prolonged process. Natural molting is thus triggered by hormonal changes following a shortening of day-length in contrast to forced molting in which food is removed in order to force the bird out of reproductive condition.”

The evidence that forced molting reduces well-being is overwhelming. Mortality doubles in the first week of food deprivation, doubles again in the second week and the behavioral evidence suggests that hens suffer enormously.

Many fast-food chains have now refused to accept eggs from force-molted hens and the industry is diligently working to find ways to force molt without withholding any food. Despite this, the AVMA continues to endorse what is seen by most members of the public as archaic and cruel. The practice is banned in most European countries. The Canadian Veterinary Medical Association is opposed to forced molting through any food withdrawal. According to Duncan, “The evidence that forced molting reduces well-being is overwhelming.”
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University. "These huge discrepancies exist throughout the professional teaching arena," he said.

The petition requests that a number of violations be addressed, including an immediate investigation and citation of veterinary schools that fail to fully comply with the review of alternatives requirement, including the failure to consider alternatives and the failure to provide a narrative, citing methods and sources used to determine that alternatives were not available. It also seeks to amend the regulation for painful procedures by clarifying, as per federal law, that a 'painful procedure' includes any procedure that may cause pain and distress, even if pain-relieving drugs are administered, and that a painful procedure triggers the requirement for reviewing the availability of alternatives.

Because there is redundancy and duplication of animal use, which also is a violation of federal law, the petition asks for immediate enforcement of the Animal Welfare Act by investigating and citing veterinary schools that fail to fully comply with the requirement that addresses this issue, as well as asks for an amendment to the regulation for unnecessary duplication assurance by requiring a written narrative describing the methods used and sources reviewed to support the assurance statement that a procedure is not unnecessarily duplicative.

Federal law also requires that personnel who use animals at federally-funded facilities receive proper training. Because there also are violations in this area of the law, we are asking that there be immediate enforcement of it by investigating and citing veterinary schools that fail to require their investigators to receive training in limiting the use of animals, that there be creation of a mandatory uniform animal use form to streamline the enforcement process, and that there be an amendment to the regulation for training of personnel in the availability of alternatives by requiring that research facilities provide their employees yearly training in methods that limit the use of animals.

AVAR Responds to the AVAR's Petition

AVAR President Nedim Buyukmihci, V.M.D., and National Director Teri Barnato accompanied Attorneys Joseph M endelson and Andrew Kimbrell to a meeting with USDA-APHIS representatives in Washington, D.C., last December. Among those from the USDA-APHIS was Deputy Administrator Chester A. Gipson, D.V.M.

The USDA-APHIS acknowledged that violations of federal law have occurred. They agreed to set forth a plan to address the petition and help resolve the violations. The plan includes:

*A visit to each veterinary medical school with an emphasis on reviewing teaching protocols, Institutional Animal Care and Use Committee (IACUC) activities, and a review and documentation of procedures that cause more than momentary or slight pain or distress to the animals. Projected completion date: July 31, 2003.

* Working with the Association of American Veterinary Medical Colleges (AAVMC) to establish an USDA Animal Care outreach program setting up animal welfare programs in the veterinary schools and establishing IACUC training focused on teaching protocols. Projected beginning: September 30, 2003.

* Meeting with the representatives of AAVMC to discuss the petition and concerns outlined in the petition. Various meetings have been scheduled.

* Reviewing the need for recommended regulatory changes as outlined in the petition. Completion date: March 31, 2003.

The Association of American Veterinary Medical Colleges will hold its meeting in March 2003, where deans, associate deans, and other faculty will discuss this issue, as well as asks for an amendment to the regulation for unnecessary duplication assurance by requiring a written narrative describing the methods used and sources reviewed to support the assurance statement that a procedure is not unnecessarily duplicative.

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On January 21st, the West Hollywood City Council unanimously adopted a resolution condemning the practice of cat declawing within the city boundaries and directed the City Attorney to explore the legalities of permanently banning this procedure citywide. The resolution urges the veterinary community to encourage animal guardians to look for other, more animal-friendly, alternatives.

According to Hernan Molina, Deputy to Councilmember John Duran, who introduced the measure, "This is a clear message that West Hollywood prides itself on providing strong leadership in compassionate care of animals." The City Attorney is anticipated to bring a draft ordinance banning cat declawing back to the City Council for discussion and potential adoption within the next one to two months. If approved, the ordinance will make West Hollywood the first city in the nation to pass such a restriction. It is expected that the measure will bring opposition from some veterinary groups. Last year, the city passed a motion officially referring to animal caretakers as "animal guardians" rather than "owners."

The issue was brought to the City Council by The Paw Project, a nonprofit whose mission seeks to ban cat declawing in other California cities and, eventually, nationwide. "The West Hollywood ban on cat declawing is just a start. We know there is tremendous support for banning this cruel practice around the country, including by many veterinarians," said AVAR Member Jennifer Conrad, DVM, the organization's director. The Paw Project currently is sponsoring a statewide anti-declawing bill, AB 395, recently introduced by California Assemblymember Paul Koretz (D-42nd District).

Declawing, also called surgical claw removal or onychectomy, is by any name an extreme measure opposed by AVAR and numerous other animal right groups. Not only is the claw removed - the entire last part of the ten front toes is amputated. A graphic analogy in human terms would be the cutting off of a person's finger at the last joint.

General anesthesia is used for this surgery, which always carries a certain degree of risk of disability or death. Because declawing provides no medical benefits to cats, any risk may reasonably be considered unacceptable. In addition, the recovery from declawing can be painful and lengthy and may involve postoperative complications such as infections, hemorrhage, and nail regrowth. Any of these complications may subject the cat to additional surgery.

Scratching is a natural behavior for cats. It removes the dead husks from their claws, marks territory, both visually and with scent glands in their paws, and stretches their muscles. Unfortunately, what is natural behavior for a cat often is considered misbehavior by a cat's human guardian, especially when furniture or other household objects are damaged in the process.

The sensible and humane solution to undesirable scratching is to modify the cat's conduct by making changes in the environment. Many people, however, choose to modify their cats by having the cat's claws removed. Usually, the front claws are the only ones cut off, but some people also have the back claws removed.

The American Veterinary Medical Association has been recently reported as reviewing its position on the declaw issue, as well. It seeks to advise member veterinarians to counsel their clients more about the procedure before agreeing to perform it.

The Paw Project will forward any letters supporting these anti-declaw measures to the appropriate legislative offices. Please send a letter of support for banning the practice of cat declawing to:

Paw Project
PO Box 445
Santa Monica, CA 90406.
MATERIALS AVAILABLE FROM THE AVAR

**BOOKLETS AND BROCHURES**

“Cosmetic Surgeries... Standards of Cruelty”
A brochure that details the history of the ear cropping and tail docking of dogs and the surgical procedures involved. 10 cents each.

“Guide to Congenital and Heritable Disorders in Dogs”
A 28-page booklet detailing the congenital and heritable disorders found in 153 breeds of purebred dogs. $1 each.

“Surgical Claw Removal... An Extreme Solution”
A brochure that describes the medical and ethical reasons for not declawing cats and provides alternatives to this extreme surgical procedure. 15 cents each.

“Early-Age Sterilization: The New Standard for Performing Castrations and Spays in Shelters, Private Practices, and Veterinary Medical Teaching Hospitals”
An educational brochure on the need for early-age sterilization and how this can help reduce cat and dog overpopulation. 15 cents each.

At about 150 pages, this guide provides detailed information on the how-to’s of student conscientious objection to harmful animal use. $10 each.

**EDUCATIONAL DATABASE**

“Alternatives in Education Database”
This database is now only available online, through the world wide web. Log onto AVAR’s home page (http://AVAR.org) and choose the link for this. Instructions, search hints and more are provided online.

**FLYERS**

The AVAR will send one free copy with a self-addressed, stamped envelope. Flyers may be photocopied.

**VIDEOS**

“Early-Age Neutering, A Practical Guide for Veterinarians”
Demonstrates useful techniques for veterinarians for neutering male and female puppies and kittens from 6-16 weeks of age. The purchase price is $15, plus shipping. Videos may be borrowed for up to two weeks with a $20 check made payable to the AVAR, $15 of which will be refunded when returned. U.S. residents add $5 for shipping, non-U.S. residents add $8.

Now Available in Spanish.

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terminal soft tissue surgery training laboratory, even though UCD has a shelter medicine program where students could easily be trained in anesthesia and tissue handling by performing sterilization surgeries which benefit animals. Sutter Hospital would not release any records, a violation of state law.

The agreement between SCACR and these institutions, referred to as the Memorandum of Understanding, stipulates various requirements in order for UCD and Sutter Hospital to purchase animals from the shelter. After AVAR checked into whether the agreement was being followed, it found that there were various violations. The violations ranged from unnecessarily duplicative uses of animals and not keeping the animals free of avoidable stress, pain, and suffering, to being derelict in submitting required protocol peer review and other records to the county. Prior to bringing the issue to the attention of the county supervisors, AVAR offered UCD a reasonable phase-out program last year that would have ended the use of SCACR animals for anatomy by January 2003, a phase-out of all other uses of live dogs and cats by January 2005, and a phase-out of SCACR cadavers by 2007. The proposal was flatly refused. This is of great concern given UCD’s public pronouncements of their commitment to eliminating harmful or fatal animal use in their curriculum.

Currently, the veterinary schools at Tufts University, University of Pennsylvania, and University of Wisconsin have no terminal procedures in any small animal courses, including electives. The new veterinary school in Southern California, Western University of Health Sciences, will take students this fall and promises also to have no terminal procedures on animals.

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