Ratified AVA policies July 2011

The following policies were ratified by the AVA Board in July 2011. These policies are either new policies or existing policies that have been revised.

6.16 Importing dogs

Position statement

Dogs being imported should be considered for behavioural assessment as well as physical examination before they are permitted to enter Australia.

Dogs should not be imported if they exhibit or carry behavioural characteristics that may inappropriately threaten the safety of human beings or other animals.

The establishment and enforcement of behavioural standards for all dogs whose owners apply for their importation into Australia are strongly supported. These standards should also apply to any genetic material imported, with assessment of temperament of donors of semen, ova or embryos.

The Australian Veterinary Association (AVA) calls on the Australian government to change the importation regulations and permit conditions to satisfy the need for effective behavioural assessment of imported dogs.

Background

Current behavioural restrictions on import requirements for dogs are based on specific breeds. A case-by-case assessment of individual dogs is a more effective means of preventing the importation of aggressive dogs and thereby protecting the community.

Reference

www.daff.gov.au/aqis/cat-dogs

Other relevant policies and position statements

- 6.13 Aggression in dogs
- 6.15 Breed-specific legislation

Date of ratification by AVA Board: 8 July 2011

13.4 Control of wild rabbits

Policy

Reducing the adverse impact of wild rabbits is a legitimate and necessary objective for those responsible for managing agricultural land, pastoral land, national parks and other land. Methods employed for the control of rabbits must be as humane as possible. The total eradication of rabbits on the Australian continent is not a realistic goal.

Background

The European rabbit (*Oryctolagus cuniculus*) has caused, and continues to cause, very severe damage to agricultural and natural areas in the southern half of Australia. It poses a serious threat to the survival of some native species of plants and animals.

Guidelines

The following guidelines should be observed for the control for wild rabbits.

- The use of sodium fluoroacetate (1080) and anticoagulants is an acceptable method of poisoning rabbits. Strychnine should not be used in rabbit control.
- Methods of applying poisoned baits should minimise the risk to non-target species.
- Ripping of warrens alone is effective but should be used in conjunction with other methods so that rabbit numbers are minimal when ripping is carried out.
- The AVA rejects the use of explosives alone because the operator has insufficient control to ensure that it is not inhumane. It is a reasonable technique to employ to destroy warrens in rocky ground or inaccessible country after an efficient poisoning program has been carried out.
- Fumigation may be necessary, but the AVA urges that more effective, humane and less irritant fumigants be developed.
- The use of steel-jawed traps is inhumane and is not an efficient means of controlling rabbits.
- Shooting is humane if the bullet passes through the brain, causing instantaneous loss of consciousness. Shooting through the heart may be more practical in some situations. Shooting is generally not an efficient method of controlling rabbits if no other method is used, but it can be useful to reduce the number of rabbits that survive poisoning or warren ripping.
- Myxomatosis has been an extremely effective agent in rabbit control. Although this disease causes distress to rabbits, it is a necessary part of any comprehensive rabbit control campaign, given the context of the Australian environment.
- The imported calicivirus causes an acute fatal disease in rabbits and has now been released in the field for rabbit control. The AVA believes that this disease causes less suffering than other current methods of control, including 1080 and myxomatosis.

Other recommendations

The AVA supports ongoing research to find more practical and effective and humane methods of control, particularly research into fertility control (including virus-vectored immunosterilisation and related techniques).

Other relevant policies and position statements

- 13.1 Control of native and introduced animals causing damage to agriculture and habitat

Date of ratification by AVA Board: 8 July 2011

7.3 Distal limb neurectomy

Policy

Distal limb neurectomy in appropriate and in selected cases is an acceptable and useful treatment option for chronic irreversible heel pain causing lameness in horses.

The use of neurectomised horses in competitive events should be regulated by the sporting authorities and be subject to a specific Code of Practice or Standard of Practice.

The indiscriminate use of distal limb neurectomies is not supported.

Background

Distal limb neurectomy involves removal of part of the nerve to the hoof of the horse. It is performed in cases of ongoing irreversible heel pain. Opinion is divided on the merits of horses being allowed to compete in strenuous athletic events after distal limb neurectomy.

Guidelines

The welfare of the horse must be the major consideration before distal limb neurectomy is used as a treatment procedure.

Before performing a distal limb neurectomy, a veterinarian must be satisfied that the owner fully understands:

- all implications of the operation
- the possible side effects of the operation
- the requirement for continuing care of the horse after the operation
- that some sporting authorities prohibit horses from competition after distal limb neurectomy.

Date of ratification by AVA Board: 8 July 2011

3.4 Use of projectile syringe equipment

Policy

Systems for the remote injection of drugs in livestock, wild animals or companion animals can be used safely and humanely, provided that the people involved in the procedure have the required licensing, skills, competencies and knowledge. Licensing is a necessary legal requirement. Non-veterinarians who need to use projectile syringe equipment must be under the direct supervision of a veterinarian.

Background

Significant developments have been made in the design and use of systems for the remote injection of immobilising drugs, vaccines and other medications.

Veterinarians and non-veterinarians must have specialised skills and knowledge before any attempt is made to use such equipment on an animal. New South Wales has an accreditation course to ensure that people are appropriately trained. Other states are encouraged to adopt a similar program.

It is recognised that non-veterinarians may be required to use or deploy remote injection devices when veterinarians may lack firearms skills or when a veterinarian may not be readily available in an emergency situation. Human safety issues must also be considered in the use of projectile syringes, particularly when immobilising drugs are being used, including the retrieval of projectile syringes.

Permits must be obtained where appropriate from the relevant authorities before using projectile firearms. All precautions should be taken to minimise risks to human safety or to the animal's welfare when using remote injection devices.

The selection of appropriate immobilising drugs and drug dosages requires careful consideration of a range of variables, including species, the individual animal (age, sex, mental state, health status) and the effect required. The Australian Veterinary Association's special interest group, the Australian Veterinary Conservation Biologists (AVCB), can provide advice and assistance on the selection and use of projectile syringe equipment, and on drugs appropriate for the chemical restraint of a range of species.

Date of ratification by AVA Board: 8 July 2011

6.7 Vaccination of dogs and cats

Position statement

Vaccination protocols should be determined within a veterinarian–client–patient relationship, based on attributes such as duration of immunity of available vaccines and an individual animal's requirements.

Every animal should be immunised and each individual animal only as frequently as necessary. Current scientific consensus recommends that adult cats and dogs should be vaccinated with core vaccines triennially where applicable.

Informed consent is important.

Core vaccines should be administered to all animals to protect them against severe, life-threatening diseases that have a global distribution.

Background

Vaccination is one of the most common veterinary procedures undertaken in small animal practice. Vaccination programs have played an important role in preventing diseases and fostering early detection and treatment through regular clinical examinations during the life of the animal (Klingborg et al. 2002). Vaccination recommendations in the past were considered a simple part of animal care, but are now a complex and controversial issue (Klingborg et al. 2002). It is being recognised that veterinarians should aim to reduce the vaccine load on individual animals to minimise the risk of adverse reactions to the products (Day et al. 2007).

Although annual vaccination has long been considered standard practice in Australia, scientific information exists to suggest that the duration of immunity (DOI) delivered by many of the products available is variable and may be significantly longer than 12 months.

Guidelines

- The Vaccination Guideline Group (VGG) of the World Small Animal Veterinary Association (WSAVA) recommends that vaccines be defined as core, non-core or not recommended.

- Core vaccines should be administered to all animals to protect them against severe, life-threatening diseases that have a global distribution.
  Dogs: canine distemper virus, canine adenovirus and canine parvovirus.
  Cats: feline parvovirus, feline calicivirus and feline herpesvirus.
- Non-core vaccines are required by only those animals whose geographic location, local environment or lifestyle places them at risk of contracting specific infections.
  Dogs: parainfluenza virus, *Bordetella bronchiseptica* and *Leptospira interrogans*.
  Cats: feline leukaemia virus, *Chlamydia felis* and *Bordetella bronchiseptica*. Feline immunodeficiency virus vaccines may also be classified in this group.
- Vaccines that have insufficient scientific evidence to justify their use are not recommended.

- The Australian Veterinary Association (AVA) believes that in most cases, core vaccines need not be administered any more frequently than triennially and that even less frequent vaccination may be considered appropriate if an individual animal's circumstances warrant it. However, local factors may dictate more frequent vaccination scheduling. These recommendations may be 'off label' for some vaccines.
- Individual animals will require assessment by a veterinarian to select the most appropriate vaccine and vaccination protocol. The veterinarian–client–patient relationship is important to fully understand the individual's needs.
- Revaccination recommendations should aim to create and maintain clinically relevant immunity while minimising the potential for adverse reactions.
- Because of maternally derived antibody and the variability in its level and duration between individuals, vaccines should ideally be administered two to three times to puppies and kittens, with timing of the final dose being variable but not earlier than the age of 16 weeks (the suggested age varies with the manufacturer and the vaccine). If cost is an issue and only one vaccine is possible, it should be at the age of 16 weeks or older.
- A booster vaccine should be administered approximately 12 months later.
- 'Off label' use of vaccines will require consultation with the pet owner for informed consent.
- An 'annual health check' is strongly recommended, even if animals are not to be vaccinated.
- Non-core vaccines target diseases that are of limited risk in a geographic region or, based on the lifestyle of the pet, help prevent against diseases that are a less severe health risk to infected animals.
- The decision to use non-core vaccines is made for individual pets based upon consultation between the veterinarian and owner.
  - Many non-core vaccines require annual vaccination.
- Vaccines that the WSAVA VGG considered in their 2007 report should not be recommended at that time included canine coronavirus, *Giardia* for cats and dogs, feline immunodeficiency virus and feline infectious peritonitis.
- At the time of vaccine administration the following information should be recorded in the patient's permanent medical record:
  - date of vaccination
  - identity of person administering the vaccine
  - vaccine name, batch number and expiry date
  - site and route of administration.
- Adverse vaccine experiences are defined as any side effect, unintended consequence or lack of protection associated with the administration of a vaccine product. This includes any injury, toxicity or hypersensitivity reaction associated with the vaccination, whether or not the event can be attributed directly to the vaccine. Any adverse event should be reported, identifying the product, animal and reaction involved, to the manufacturer and the Australian Pesticides and Veterinary Medicines Authority (APVMA) Adverse Experience Reporting Program.
- Recommendations for vaccination protocols should be determined within a veterinarian–client–patient relationship rather than by non-veterinarians such as within boarding facilities.

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Date of ratification by AVA Board: 8 July 2011

7.9 Use of whips in horse racing

Policy

Excessive or incorrect use of a whip on any horse, including the whipping of horses unable to improve their position in a race field, is not condoned.

Background

Whips are used during horse racing to control or guide the horse and to make the horse perform more competitively; however, there is ongoing research questioning whether whip use will result in improving a horse's placing (Evans and McGreevy 2011).

The whip functions as a training aid by being a tool for negative reinforcement and hence the whip should be used to educate the horse when it responds incorrectly.

Incorrect use of a whip includes the use of the whip on any part of the body other than the hindquarters or the shoulder and any use that results in welts or breaks the horse's skin or causes psychological injury to the horse.

There should be additional research into the use of whips in horse racing.

References

Evans D, McGreevy P. An investigation of racing performance and whip use by jockeys in Thoroughbred races. *PLoS One* 2011;6:e15622.

Other relevant policies and position statements

- 7.6 Equine competitive events
- 17.8 The provision of optimum veterinary services to the horse racing industry

Date of ratification by AVA Board: 8 July 2011

6.21 Vaccination of rabbits and ferrets

Policy

Vaccination of pet rabbits against rabbit caliciviral disease and ferrets against distemper is recommended.

Background

Rabbit calicivirus disease occurs in wild and domestic European rabbits (*Oryctolagus cuniculus*) in Australia, causing acute haemorrhage and sudden death. The virus was prematurely released in Australia in 1995. A short time later a vaccine became available for use in pet and farmed rabbits.

Myxomatosis occurs in Australia; however, a vaccine is not available or allowed to be used in Australia because of the risk of the vaccinate strain entering the wild rabbit population and stimulating immunity.

Distemper occurs in ferrets. Distemper is also known to exist in Australia, therefore the ferret population can be considered to be at risk (Norris et al. No specific monovalent vaccine for ferrets is available in Australia. Consequently polyvalent canine vaccines are used.

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Date of ratification by AVA Board: 8 July 2011

15.3 Circus animals

Position statement

The use of animals in circuses is a matter of growing community debate and can have considerable animal welfare implications. Such use is acceptable only where the welfare of the animals concerned is not compromised and the operators must be subject to enforceable and auditable licensing arrangements, underpinned by compliance with national animal welfare standards. Animals for which the standards are not applicable should not be kept or trained for use in circuses.

Guidelines

The following conditions should be included in the standards or licensing arrangements.

1. No new non-domestic animals are to be bred, imported, kept, displayed or used in any way. For those animals already in circuses, provision must be made for them to live out their lives in an appropriate environment retired from circus performance so as to maintain established strong bonds with their human carers. Removing them totally may adversely affect their welfare; however, regular welfare assessments should be performed to determine their status.
2. All circus animals need to perform or be exercised daily (e.g. training or other activities).
3. Standards of health, welfare, nutrition, housing, confinement, transport and handling are to be not less than those that are described, legislated or enforced for similar domestic animals used or kept in our society.
4. Environmental enrichment is an essential consideration for circus animals within the limitations of an itinerant lifestyle.
5. Licences to use or display animals in circuses should be underpinned by a clear, unambiguous, enforceable National Code of Practice or Standard. Alternatively, an auditable, accountable and prescribed quality assurance system is required. Although veterinary advice may be sought from local veterinarians in emergency situations, circuses should retain veterinarians with relevant expertise, especially in relation to non-domestic animals. These veterinarians should act as professional advisers, be involved in regular health assessments of the animals and be available for telephone consultations with local veterinarians.

Background

Circuses are a traditional form of travelling entertainment with ancient connections, especially in Europe. The first circus in Australia was operating in 1840. Their proponents maintain that animal acts differentiate circuses from cabaret acts. Public support for circuses is still demonstrated by large attendances at their performances. In some jurisdictions (such as the Australian Capital Territory), the use of animals in circuses is no longer permitted under animal welfare legislation.

Circus animals include both domestic species (small and large) and non-domestic species. It is difficult to meet the needs of non-domestic animals – for example, for space, socialisation, exercise and natural habitat – within the constraints of circus life. Most animals are weaned early and hand reared to allow imprinting, thus facilitating handling and training.

These animals are different from zoo animals and are likely to be kept under different conditions. For example, animals that normally socialise well may need to be kept as individuals. Circus animals are exercised during training procedures, so the size of their cages may not be as critical as for zoo animals. Positive re-enforcement training is recommended.

Domestic circus animals present fewer welfare problems than non-domestic animals.

Generations of breeding in confinement and socialisation with humans make the husbandry requirements of domestic animals less difficult to maintain than non-domesticated species. They interact with people and can be more easily exercised and trained.

Reference

Australian Department of Agriculture, Forestry and Fisheries. Recommended National Circus Standards. http://www.daff.gov.au/__data/assets/pdf_file/0004/146749/Circus_Guidelines.pdf. 2010. Accessed August 2010.

Date of ratification by AVA Board: 8 July 2011

OBITUARY

Kathleen Ionie Walker OAM (nee Farr)

1917–2009

In light of the the Australian Veterinary Association (AVA) establishing a scholarship to commemorate one of Australia's pioneering female veterinarians, Dr Kathleen Farr, I would like to remember this remarkable woman with the obituary I wrote after her death, which was, unfortunately, not published at the time.

Kath was one of the first females to graduate from the University of Sydney in 1938. After graduation, she practiced in both Victoria and New South Wales (NSW) before joining the Australian Army Veterinary Corps in 1943 and being posted to Brisbane and Moreton Island. After the War, she married Thomas Walker and moved to Coolatai Station in Warialda, western NSW, where she promptly set about educating the district on the need for veterinary expertise, while juggling being a veterinarian, mother and housewife (Oh, those burnt dinners!).

Having being orphaned by the time she graduated, Kath set up the Farr Prize for Equitation for second year veterinary science students, in memory of her parents. Recipients who also wrote Kath a letter of thanks were granted a holiday/work experience at Coolatai Station. This was where I met Kath for the first time. Kath met me at the railway station dressed in a skirt, shirt and heels, making me doubt that she was a real veterinarian. Kath never wore slacks, but as she said, she 'always made sure she wore a skirt or dress big enough to get over a fence.'

A Life Member of the AVA, Kath, accompanied by Tom, was a regular at AVA conferences where she liked to ask difficult questions of the lecturers. Also a 60 year member of the Australian Red Cross, Kath was awarded the OAM for services to veterinary science in 1999.

Throughout her life, Kath regularly travelled to Sydney to indulge in the ballet and sail on the harbour. She was an avid reader and a talented embroiderer. Kath passed away in 2009 at the age of 92 (Tom passed away in 2010) and is survived by her two sons, six grandchildren and one great-grandchild. To this day, I still miss our weekly phone calls, her acidic comments, laughter and friendship.

Mary Rose Couper

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The Kath Farr Scholarship, worth $1000, will be awarded annually to a final year female veterinary science student from The University of Sydney who wishes to pursue a rural veterinary career.

The AVA is calling for donations to the fund through the Veterinary Science Foundation at The University of Sydney to help support the future careers of female rural veterinarians and commemorate the life of one of Australia's great veterinarians.