



# SVME Newsletter

Newsletter of the Society for  
Veterinary Medical Ethics

Winter 2021

## President's Message

It is an honor to serve the SVME as President once again. I thank Rolan Tripp, for his work as our past President-Elect. Rolan resigned this position because he has launched an Artificial Intelligence-based Behavior Company that has absorbed 95% of his time. I have renewed my commitment to the SVME as President, Newsletter Editor, Meeting Planner, etc.). I hope you read this entire Newsletter!

Roni Miyashiro, our long time Exec. Sec., has collaborated closely with our new Exec. Director, Julie Jennings (JJ), and turned over her duties and responsibilities. We are grateful to Roni for her loyal contributions to the SVME over the past 10 years, and we wish her a bright future! We welcome JJ, who brings amazing leadership, technical and organizational skills to the SVME. JJ will work closely with me and our SVME Board of Directors to enthusiastically drive our SVME "Renaissance."

The 2021 VMX SVME all day Track Meeting has been rescheduled from January 2020 to Saturday, June 5th, 2021. The topic, Ethical Perspectives on Euthanasia, is conflicted with many ethical issues. Our Keynote speaker is Temple Grandin, along with additional notable speakers such as Kathleen Cooney, Dani McVeti, Mary Gardner and Kathy Anderson. You will enjoy reading their abstracts in this newsletter. We also plan to offer virtual options if there is a need.

Our Board of Directors meets monthly on Zoom to develop our committees. Dr. Scott Swetnam recruited Dr. Heather Fees, who volunteered to Chair our Membership Committee. The goal of the Membership Committee is to grow the SVME and promote veterinary ethics. They began with reaching out to The Ohio State Veterinary School's incoming class. Our Liaison Committee will

## Inside this issue:

<i>President's Message</i>	1-2
<i>SVME Student Chapter at OSU</i>	3-4
<i>RCVS Mind Matters Initiative</i>	5
<i>SVME Nigeria Forum</i>	5
<i>SVME Ethics Track VMX</i>	6
<i>VMX Speakers</i>	7-18
<i>Shomer Ethics Award Winner</i>	19
<i>Membership Application</i>	20
<i>SVME Mission Statement</i>	21
<i>Board of Directors Member List</i>	21



...continued

focus on journals and schools. The Fundraising and Public Relations Committees are also top priorities. Please contact JJ at [svmedirector@gmail.com](mailto:svmedirector@gmail.com) if you would like to Chair or join a committee.

We have many goals for this coming year and the next 5 years, including promoting the visibility of SVME, increasing membership, encouraging student participation with Student Chapters and increasing enrollment in the annual Student Essay Contest.

*Dr. Alice Villalobos*



## SVME Student Chapter at OSU

The SVME is pleased and honored to announce the first SVME Student Chapter at The Ohio State University, College of Veterinary Medicine (TOSU-CVM). In the summer of 2020 the SVME invited veterinary students at The Ohio State University, College of Veterinary Medicine to apply for the SVME Student Liaison position.

Due to her strong initiative, enthusiasm, and commitment to veterinary medical ethics, Emma Brennan (TOSU-CVM, Class of 2023) was selected as the SVME Student Liaison for The Ohio State University, College of Veterinary Medicine. Since her selection as SVME Student Liaison for TOSU-CVM, Emma has been sharing the opportunities of SVME membership and leadership with her fellow students and has recruited officers, members, and a faculty advisor. The SVME Student Chapter at TOSU-CVM is scheduled to be recognized as an official student organization in February 2021.

TOSU-CVM, SVME Student Chapter Officers:

President: Emma Brennan (TOSU-CVM, Class of 2023)

Vice-President: Miguel Pascual (TOSU-CVM, Class of 2023)

Secretary: Hailey Bryan (TOSU-CVM, Class of 2023)

Treasurer: Lauren Driskell (TOSU-CVM, Class of 2023)

Faculty Advisor: Christopher Frasure, M.A.

The SVME is grateful to Dr. Rustin Moore, Dean, The Ohio State University, College of Veterinary Medicine; Amanda Fark, Director of Career Management and Professional Development; Dr. Caroline El-Khoury, Director, Office of Professional Program Support; and Dr. Mary Jo Burkhard, Associate Professor and Associate Dean for Faculty and Student Affairs, Inclusive Diversity and Planning for their time, input, and support. Their efforts made the SVME Student Chapter at TOSU-CVM a possibility. Emma Brennan's initiative and hard work have turned this possibility into reality. Miguel Pascual, Hailey Bryan, and Lauren Driskell's interest and initiative formed the leadership team for the SVME Student Chapter at The Ohio State University, College of Veterinary Medicine. Mr. Chris Frasure's interest in serving as faculty advisor allows our Student Member group to apply for official "student organization status" with the University. The SVME Student Chapter at TOSU-CVM will "Be The Model"™ for future SVME Student Chapters at other veterinary colleges. We are pleased and excited for our Student Members and the opportunities for leadership and mentorship they will have through their involvement with the SVME.

The SVME is inviting all veterinary colleges to participate in the SVME Student Chapter opportunities. Each veterinary school student chapter will have a dedicated SVME Member serving as liaison for the students to the SVME. Membership in the SVME is free for veterinary



## SVME Student Chapter at OSU

students and SVME Student Chapter advisors as well as the Dean of the Veterinary College hosting an SVME Student Chapter. Regular membership is \$40/year.

The SVME offers an online Ethics Course for its members. Student members can participate in this course for \$15. Regular member price for the online Ethics Course is \$175. The SVME encourages all members to participate in the SVME Ethics Course.

The SVME provides a private forum through Google ListServ for communication and discussion about topics and concerns raised by our members.

The SVME sponsors an annual Student Essay Contest with a prize of \$1000 plus up to \$1000 travel expenses to present the winning essay at VMX in Orlando, FL at the Ethics Track which is also sponsored

by the SVME. This year's student essay contest deadline has been extended to February 1, 2021 due to Covid19 restrictions and Virtual VMX this year.

All veterinarians, veterinary paraprofessionals, and any individual who is interested in promoting veterinary medical ethics are invited to join and participate in the SVME as we shape the future of our great profession. We look forward to active engagement and a lifelong connection with our Student Members.

Please visit [www.SVME.org](http://www.SVME.org) for additional information about membership and donation opportunities.

For further information about SVME Student Chapters and SVME Membership please contact: Heather Fees, DVM, [vetohio@gmail.com](mailto:vetohio@gmail.com)



## Well-being project seeks veterinary volunteers

The RCVS Mind Matters Initiative has provided £20,000 to commission a study into the impact of moral injury across the veterinary professions.

*Paul Imrie January 04, 2021*

A research project looking at how upsetting workplace experiences affect veterinary well-being is recruiting participants.

The study by King's College London has been funded by the Royal College of Veterinary Surgeons (RCVS) Mind Matters Initiative through its £20,000 Sarah Brown Mental Health Research grant and is being led by psychologists Neil Greenberg, Dominic Murphy and Victoria Williamson.

The study aims to investigate the impact of "moral injury" on the veterinary professions – including the types of moral injuries veterinary professionals may encounter, their prevalence, perceptions and what support is needed when they occur. Morally injurious events are defined as experiences that violate a person's moral or ethical code.

An online questionnaire, suitable for all members of the veterinary team, can be submitted by members of the RCVS for the study.

## SVME Nigeria Forum

Two previous winners of the SVME Alice Villalobos Student Essay Contest from Nigeria, Dr. Abraham Olayide and student, Timothy Ojodare wanted to expand the message of veterinary medical ethics to more international veterinary communities. They created the SVME Nigeria Forum. Their activities over the past year have brought more knowledge of veterinary medical ethics to nine Nigerian veterinary faculties with direct engagement of approximately 120 veterinary medical students. Through this SVME forum, they have encouraged students to join the SVME. Furthermore, they will mentor students for their 2021 Essay Contest. They are also actively expanding the knowledge of veterinary medical ethics through webinars. They have enjoyed the full support and encouragement of the SVME. They have a line-up of activities proposed to expand the impact of the SVME in Nigeria in 2021 and beyond.

## Meetings & Events

**SVME Ethics Track at VMX Convention  
Saturday, June 5, 2021, Orlando, Florida**

### *Ethical Perspectives on Euthanasia*

<b>9:00-9:50am</b>	<b>Keynote Speaker</b> <b>Farm Animal Euthanasia Issues</b> <i>Temple Grandin</i>
<b>10:05-10:55am</b>	<b>Euthanasia or Dysthanasia: Where Are We Headed?</b> <i>Kathleen Cooney</i>
<b>10:55-11:25am</b>	<b>Break</b>
<b>11:25-12:15pm</b>	<b>The Subjectivity of Suffering: How We Ethically Make the Decision</b> <i>Dani McVety</i>
<b>12:15a-1:30pm</b>	<b>Lunch</b>
<b>1:30-2:20pm</b>	<b>What Would You Do? The Euthanasias That Are Not Black and White!</b> <i>Mary Gardner</i>
<b>2:35-3:25pm</b>	<b>Ethical Guidelines on Behavior Euthanasia</b> <i>Rolan Tripp</i>
<b>3:45-4:35pm</b>	<b>Shelter Euthanasia: Its Impact on Animals, Staff and Society</b> <i>Cathy Anderson</i>



## Farm Animal Euthanasia

*Temple Grandin, Ph.D.*



**Temple Grandin**

Livestock proponent, autism advocate,  
author, speaker and distinguished professor at CSU

The word euthanasia means good death in Latin. Many animals and people do not have a good death. One of the most recent difficult issues was the mass depopulation of thousands of pigs when COVID-19 shut down slaughter plants. Some of the methods used were highly questionable, and pig welfare was severely compromised. It is important to differentiate between methods that are true euthanasia and methods that may be acceptable for emergency depopulation. Euthanasia must be a true good death without pain. Emergency depopulation may sometimes have a lower standard of welfare. However, the absolutely worst methods must never be used. It is a serious ethical question to determine when a method that is not true euthanasia would be allowable. Some of the documents that have been published about depopulation methods with lower standards state they can be used under “constrained” conditions. I do not like this vague wording. It would be better to state specifically where the methods with lower standards would be allowable such as depopulating animals with highly contagious diseases.

In pets, medical treatments may be continued that unintentionally prolong suffering. Many people have a difficult time deciding when they need to end a pet’s suffering. The animal may deteriorate slowly and the person does not perceive how much it may be suffering. I will always remember Aunt Ann’s German Shepherd, Boots. When I went away to graduate school at the end of the summer, Boots was weak but still fully mobile. She probably still had a life worth living. When I returned to visit a few weeks later, Boot’s hind legs no longer functioned and she dragged herself around by her front legs. Her rear paws were scraped from dragging. I told Ann that it was time to have her euthanized. She said “Thanks for making the decision.” Since I had been away for several weeks, the deterioration had become obvious.

I often get asked about my work with slaughter houses. Do the cattle know they are going to get slaughtered? This is a question that I had to answer. When I observed cattle walking into a vaccination chute at a feedlot and then cattle walking into a slaughter plant, their behavior was the same at both places. If they knew they were going to get slaughtered, their behavior should have been more agitated at the slaughter house. Research has also shown that cortisol levels after on-farm handling or slaughter are similar.

There are also concerns on how killing thousands of cattle in a slaughter house affects the psychological well-being of the workers. In a cattle plant, each animal is shot with a captive bolt gun and for pigs, groups of pigs enter an elevator that lowers them down into CO2 gas. Many employees have told me that they like CO2 because “The box does the deed.”



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The psychology of the captive bolt operators on a cattle slaughter line may be difficult. A person has to shoot each individual animal. From hours of observation when I worked on cattle handling construction projects, I learned that the operators fell into three categories. The most common category was the “Box Stapler.” This person is very efficient at their job and they perform it as if they were stapling boxes. Unfortunately, there were a few people who became sadistic. They enjoyed torturing animals. This would seldom occur today because the plants are better managed. However, when I was working on a restrainer installation in the early 80’s, there was a young guy who deliberately shot the eyes out of cattle. The third category has turned slaughter into a sacred ritual. Many of the rabbis who performed kosher slaughter were very serious about their work.

Blunt force trauma as a method of euthanizing small piglets is an acceptable method according to the AVMA. When done correctly, unconsciousness is instantaneous, but I am concerned about how such a violent physical act will have on the mind of a person who does it. A person who said he was “comfortable” when he held a baby piglet by the back legs and slammed its head on the concrete floor is concerning. The science tells me that the piglet did not suffer but I got concerned about the well-being of the person’s mind.

**Temple Grandin** was born August 29, 1947 in Boston. She is a well-known scientist and industrial designer, whose own experience with autism, helped her to create industrial systems to counter stress in specific animal and human populations.

Grandin was unable to talk at age three and exhibited many behavioral problems. She was later diagnosed with autism. Her parents, rejected a doctor’s advice to place her in an institution. They sent her to a series of private schools, where her high IQ was nurtured. She graduated with a bachelor’s degree (1970) in psychology from Franklin Pierce College (now Franklin Pierce University) in New Hampshire. She earned a master’s degree (1975) and a doctorate (1989) in animal science from Arizona State University and the University of Illinois. From 1990 has she taught animal science at Colorado State University in Fort Collins, where she also managed Grandin Livestock Systems. Grandin has authored many articles, chapters and books that increase awareness of the hypersensitivity to sound and touch that is common to autistic people and animals. She devoted her life to devising systems to alleviate the anxiety of autistic children and adults. She is renowned for her work to reduce anxiety in animals as they proceed to slaughter.





## Euthanasia or Dysthanasia; Where Are We Headed?

*Kathleen Cooney, DVM, CHPV, CCFP  
Companion Animal Euthanasia Training Academy  
Loveland, Colorado USA*



A euthanasia performed properly is one of the most fulfilling parts of our work in veterinary medicine. While we do not like taking life, we appreciate the importance of doing it well, with compassion and skill. It means our patient had a gentle ending to follow hopefully what was a pleasant and fulfilling life. With a gentle ending as the goal, we may find ourselves highly prepared to offer it or perhaps unwittingly lacking. What exactly is a gentle ending, aka good death experience, and how do we know when we've delivered it? With such a complex medical procedure as euthanasia (most are amazed at how much really goes into it), we must know how to get it right and recognize when it doesn't and be willing to change our approach. For the protection of the patient, the client, the team, and our profession, we need to put ethics and professionalism front and center.

By now, most of us appreciate that euthanasia means a good death. Euthanasia today implies the pet patient dies quickly, with minimal to no pain, distress, or fear of its demise. In taking the veterinary oath, we pledge among other things to use our scientific knowledge and skills for the benefit of society through the protection of animal health and welfare, and the prevention and relief of animal suffering. It's one of the main reasons most of us cherish the option of euthanasia to begin with. We recognize that sometimes ending life is the only guarantee we have to prevent further discomfort and misery. Those of you in practice can attest to how frequently you've reached for euthanasia and how grateful clients are for the option.

When euthanasia goes poorly, we now refer to this as dysthanasia. A newer word found in only a few sources, dysthanasia is the opposite of euthanasia. While the two words have numerous comparisons and differences, the following illustrate the concept:

### **Euthanasia**

The animal feels minimal to no anxiety, pain, or fear.

Proper technique is delivered.

The procedure is in line with professional and societal welfare expectations.

Observers (i.e., loved ones) feel safe and supported.



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## Dysthanasia

- The animal feels unacceptable pain, anxiety, and/or fear.
- Improper technique is used.
- Observers (i.e., loved ones) experience distress and anguish.
- Support among the patient, client, and veterinary team breaks down.

The difference between euthanasia and dysthanasia can be further defined by knowing species/breed variations, how to safely perform euthanasia in various locations, and knowing when to postpone or even call it quits. We can get ahead of ourselves and assume proceeding with euthanasia is the only course of action. However, if the mental health of loved ones is in question, and the pet is not suffering in crisis, perhaps waiting could be allowable. It's highly subjective of course and completely situational.

When we make the choice to practice modern, bond-centered euthanasia, we are taking a stance. We say under no uncertain terms, this patient's death matters, and the client's experience is important. If a veterinarian or team member ever feels they are ill suited to deliver a gentle death, it is their ethical obligation to step back. Calling in another more qualified practitioner can be hard to do, but really shows clients and colleagues how much you believe in doing things right. We are encouraged to know our limits, but once we know how to perform euthanasia safely for the type of patient and situation, we press on. If not, we pass the baton. Today, there are more euthanasia specialists than ever before; those who have dedicated their entire careers to this procedure. And the world is beginning to increase euthanasia education and training to ensure practitioners are prepared. This is definitely a step in the right direction.

Kathleen Cooney has been practicing advanced end-of-life care since 2006. She is well-known for her work in companion animal euthanasia and has authored two books on the subject. Dr. Cooney has collaborated in euthanasia training for the AVMA, AAHA, IAAHPC, HABRI, the Fear Free program, and is Founder and Director of Education for the Companion Animal Euthanasia Training Academy (CAETA). The core certificate program is Dr. Cooney's design and is based around the [The 14 Essential Components of Companion Animal Euthanasia](#). She is a strong advocate for best practices in all aspects of end-of-life care and speaks nationally and internationally on such topics. Dr. Cooney is also the founder of Cooney Animal Hospice Consulting and past President of the International Association for Animal Hospice and Palliative Care (IAAHPC) and remains active in their organization, including design of their Animal Hospice and Palliative Care Certification Program, launched in 2016. In 2019, she received training to become a Certified Compassion Fatigue Provider.



## The Ethics of Euthanasia: is it convenience or not?

*Dani McVety, DVM  
Lap of Love Veterinary Hospice*



When it comes to ethical-border-line euthanasia requests, we have a very important decision to make as veterinarians. In order to achieve the best outcome for all parties involved we need to ask the right questions from the start. Instead of deciding whether or not you are comfortable euthanizing that pet, the question should be “what are the alternatives for this pet.”

By requesting euthanasia in the first place, the family is communicating to you that the human animal bond is broken. We can either help change the situation for them (remove the pet from their care via adoption or euthanasia), or do nothing by sending them home because “I just can’t do it.” And in my opinion, doing nothing is professional suicide; you’ve now ruined any rapport you had with that family, a small loss that does not create societal trust and respect for our profession. Helping a family, in whatever way, is far preferable than sending them home with a broken human-animal bond.

Remember, medicine is not our product in the veterinary world, the human-animal bond is. Without that bond, they are not coming into our clinics. When euthanasia is requested, the family is telling us that there’s something wrong with that bond and they care enough to tell you about it instead of letting the dog or cat go on the side of the road.

So what should be done in these extreme cases of uncomfortable euthanasia requests? Allow me to push the boundaries a bit. Regardless of the situation, we must take responsibility for the pet in some way. As a house call hospice veterinarian, if I am at a home of a pet that I do not feel comfortable euthanizing, and with an owner that simply cannot go on, the pet will come home with me. Yes, it’s happened, but only about once a year.

Have I euthanized animals that I may not have euthanized if they were mine? Absolutely. Have I euthanized animals that other veterinarians have refused to euthanize? Absolutely. Have I euthanized animals whose owners were completely at a loss, unable to go on for many reasons, and with tears in everyone’s eyes (including mine), we knew it was a difficult but good decision? Absolutely. And when those families hug me, knowing that I did not judge them for that tough choice we made together, that I did not force an altruistic or idealistic view on them, and that I partnered with them in opting for the best alternative option for their pet, a new level of respect is earned.

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The use of the label “convenience euthanasia” should be treated as a diagnosis. A proper diagnosis happens only after appropriate questions have been asked and diagnostics have been run. In this case, the questions are about the family’s position of not being able to care for the pet, and the diagnostics should center around what possibilities exist given the current situation.



In addition to her important role as a hospice veterinarian, Dani McVety, DVM is a speaker, consultant, author, and host for PetCareTV. With a deep love for the human-animal bond, Dr. McVety enjoys just about anything that has to do with pets! Growing up with horses taught her a great deal about the need for respect of these animals we share this earth with. Although she originally wanted to practice equine medicine, volunteer time with human hospice during college steered her on a different path. After graduation, she practiced emergency medicine and gained a greater understanding of how to help families at a time in which they felt the most helpless. This has become her greatest fulfillment in veterinary medicine; helping to ease the stress and fear of the people that love their animals. Already an accomplished entrepreneur before vet school graduation, Dr. McVety partnered with Dr. Mary Gardner about one year later after founding Lap of Love. Together they have grown the company into one of the most respected networks of doctors in the veterinary profession, setting the standard for end of life care higher than it has ever been before.

Dr. McVety frequently writes and speaks for professional and lay audiences on end-of-life veterinary topics in hopes of empowering both parties to seek the highest standards of care. Dr. McVety and Lap of Love have been featured on numerous local, national, and professional media outlets including CNN, The New York Times, ABC, Fox 13, University of Florida Alumni Magazine, and many more. She proudly graduated from the University of Florida College of Veterinary Medicine and is the youngest recipient of the college’s Distinguished Young Alumni Award (2013), the Florida Veterinary Medical Association’s President’s Award (2014), and most recently, the Pet Industry Woman of the Year (2017).



## What Would You Do? The Euthanasias That Are Not Black & White

*Mary Gardner, DVM*



I decided to become a veterinarian in my 30's after the loss of my first heart dog. So, I can empathize with owners on how much the loss can affect them. And it affects all of us differently. Exclusively helping owners with end of life care was not what I thought my career would lead to but it has been my path for over a decade and I love it. Sitting bedside with families, listening to their stories, seeing the love they have for their pets, and helping them pass with love and dignity is very rewarding.

However, it has not come without its challenges. Not all cases have been cut and dry and easy on my morals/ethics. Not all are the 14 yr old Golden with lymphoma that hasn't eaten in a week or the heart failure cat with an outstretched neck and you all breathe a sigh of relief when they pass and finally find comfort. There have been those where I think, "Well, if he were mine, I wouldn't let go just yet." Or "she would do better with a few adjustments, why don't we try that first?". And, to be sure, I have had those appointments where I have kindly and without judgement offered other solutions and we opted not to euthanize. But there are those that many would struggle with. The younger diabetic cat that is difficult to manage, the dog aggressive dog that has to be kept out in the back yard, the old dog urinating all over the house and the family does not want to investigate the cause, or the very senior dog with old age ailments but the family needs to move and cannot care for him anymore.

At the end of the day, it is my head that I have to pillow and be at peace with my decisions. My lecture at VMX will go over some of these types of cases. We will interactively share what we would do, not do, suggest, etc. And with non-judgement in both directions, I will share what I ended up doing so that it will hopefully help other veterinarians in the same situation navigate these challenging decisions and most importantly not shoulder guilt that should never be ours in the first place.

Dr. Mary Gardner loves a gray muzzle! She is a small animal veterinarian, speaker, consultant, author and inventor. But Veterinary Medicine was not her first career choice. After graduating from the University of Miami, she began working for an enterprise wide retail order management software company where she was a software designer and focused on order management/fulfillment, inventory management and forecasting, drop ship management, cross-channel fulfillment and supply chain management.



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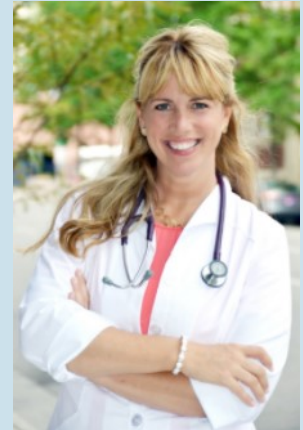
However, in a twist of fate, she decided to return to school to pursue her doctorate in Veterinary Medicine. Dr. Gardner graduated from the University of Florida in 2008 and began working at a general practice in South Florida. In 2010, she left general practice and co-founded Lap of Love International with Dr. Dani McVety.

Bringing those 10 years of software experience into the veterinary industry, Dr. Gardner led the development of Lap of Love's proprietary practice management software (Sunshine), which is specific for veterinary hospice and euthanasia services. In 2013 she developed The Pet Hospice Journal, an online interactive Quality of Life Assessment program, which is free to the public.

She is responsible for all internet and social media marketing as well as developing, constructing and supporting company-wide enterprise applications. When not working, Dr. Gardner is passionate about her furry brood of 2 dogs and 3 cats - all in their senior and geriatric stages.

Dr. Gardner writes and speaks for professional and lay audiences on all aspects of end of life care, including Veterinary Hospice and Euthanasia. She is also fluent in internet & social media marketing, search engine optimization and a variety of other topics. She has spoken at NAVC, AVMA, WVC, State VMA's, IAAHPC, professional sales meetings, veterinary schools and animal hospitals around the country. She was also honored with presenting the keynote address to the graduating Class of 2014 Oregon State Veterinary Medicine students.

Dr. Gardner and Lap of Love have been featured in numerous local and national news media including DVM News Magazine, Today's Veterinary Practice, Vetlearn.com, DVM 360, Entrepreneur Magazine and The New York Times.

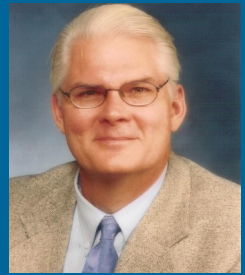






## Ethical Perspectives on Behavior Euthanasia

*Rolan Tripp, DVM, CABC*



Society has the right to permanently eliminate healthy but behaviorally problematic pets. That determination is given to veterinarians. We can provide a step-step objective method to process the decision before any behavior euthanasia situation, using canine aggression as a model.

The behavior history is the most important component of this final decision. However, in the case of strays or in other situations, a history is not available. In this case the behaviorist must gather data and try to reconstruct the detailed context of the attack plus examination - if the animal is available. This exam is the focus of the International Society of Veterinary Forensic Veterinarians ([www.ivfsva.org](http://www.ivfsva.org)) who make available an online 12-page "Standards Document for the Forensic Live Animal Examination."

A controversial consideration in behavior euthanasia is genetic predisposition. The CDC has collected unbiased data showing that Pitbull attacks causing human fatality are significantly more frequent than other breeds. This finding has contributed to breed specific legislation. However, assigning a predictable future behavior based on physical characteristics is the basis of racism, gender and age bias, etc. Therefore, breed specific legislation has been called, "breedism" and a proponent, a "breedist." This illustrates the need for an evaluation of the specifics of each case and why this topic seems appropriate for ethical discussion.

The attack motivation is an important consideration; however, the dog cannot be interviewed. In humans, "Self Defense" is an accepted motivation for violence. If the attack were determined to be in response to being beaten, that might carry weight. However, a smiling child who runs to hug and kiss an unfamiliar dog might appear to that fearful dog as a fixed stare, tooth bared, direct attack requiring a lethal response.

The degree of inhibition of the bite is important. In the example of the child interaction above, it might have been a single "inhibited bite" intended to facilitate the dog's escape. The inhibited bite is the human equivalent of "pulling the punch" by reducing the intensity. Teaching canine bite pressure inhibition should be part of every puppy socialization class before 4 mo of age. It is done by encouraging mouthing, then yelping and rejecting interaction for several seconds if the bite pressure exceeds what would be allowed on human baby skin.

Another consideration regarding behavior euthanasia is considering the potential for injury. Because of their size, Chihuahuas are one of the most likely breeds to exhibit fear aggression, but one of the least likely for behavior euthanasia. After size, another consideration is



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“benignness of stimulus.” If the trigger of a serious attack was gentle petting, the prognosis is poor.

If sufficient history is available, then “consistency of the stimulus and response” improves the prognosis, depending on the details. If it is possible to identify specific stimuli, and if each stimulus can be controlled, then a counter conditioning gradient can be incorporated as part of the treatment plan. This is only indicated if there is also evidence of bite inhibition and good mental health of the animal.

Based on neural physiology, the possibility exists that canine mental illness incidence might be similar to humans. A study by the National Institute of Mental Health found that approximately 6% of Americans are severely mentally ill, compared to the 20-25% of the US homeless population. This further illustrates how many perspectives should be considered before behavior euthanasia.

Bio:

[The International Association of Animal Behavior Consultants](#) has certified Dr. Tripp in both canine and feline behavioral therapy (CABC). His special interests include animal behavioral psychopharmacology and PsyMed; measuring psychological stress influence on medical conditions and longevity. He is organizing a [research project](#) incorporating artificial intelligence psychometrics in canines and felines using a behavioral diagnostic test and treatment program for small animal practice. Interested individuals can contact him at [RTripp@PetHappiness.net](mailto:RTripp@PetHappiness.net).





## Shelter Euthanasia

*Cathy Y. Anderson D.V.M., M.S.*



The practice of euthanasia in US animal shelters began in the 19<sup>th</sup> century and evolved along with the animal welfare movement. Early practices for disposing of unclaimed strays at the local “pound” utilized inhumane methods such as drowning or suffocation in carbon monoxide gas chambers. As the public began to regard pets as family members, and they became aware of the massive volume of unwanted animals euthanized in shelters each year, more humane methods for population control became necessary. The modern approach to controlling pet overpopulation incorporates strategies for maximizing live-outcomes from animal shelters along with professional guidelines and legal mandates designed to ensure a humane death if necessary.

The Association of Shelter Veterinarians published Guidelines for Standards of Care in Animal Shelters in 2010 to provide a road map for humane animal sheltering in the United States. This document specifically addressed euthanasia in the shelter, including best practices guidelines for the facility, location, method, record keeping, and animal handling. The Association of Shelter Veterinarians also has a Position Paper on Euthanasia of Shelter Animals that recommends appropriate training for shelter personnel who perform euthanasia and references the AVMA Guidelines for Euthanasia of Animals and the Humane Society of the United States (HSUS) Euthanasia Reference Manual for guidance. Today, the majority of animal shelters utilize Certified Euthanasia Technicians to perform euthanasia by injection with controlled drugs authorized by the Federal Drug Enforcement Agency (DEA).

State and local governments set the training requirements for shelter euthanasia technicians. While they can vary dramatically, most agencies require some variation of the 16-hour Euthanasia by Injection course, created by the HSUS in the 1980’s. This course helps standardize the drugs used for sedation, methods for injection, the means of verifying death, recordkeeping, and safe disposal of animal carcasses. The HSUS training also addresses the mental and emotional toll experienced by euthanasia technicians. Because humane euthanasia requires the use of controlled drugs, the DEA now recognizes animal shelters as Mid-Level Practitioners in 32 states to allow for direct purchase of necessary medications. In the remaining states, a supervising veterinarian must obtain a DEA license at the shelter and is responsible for dispensing and tracking euthanasia medications used by the animal shelter.



...continued

Selection of shelter animals for humane euthanasia is a decision that is heavy with moral and ethical repercussions. Euthanasia due to lack of space in an animal shelter is now regarded as an unacceptable practice for population management. Instead, modern animal shelters incorporate population management strategies intended to increase live outcomes, including:

- high-quality, high-volume spay neuter
- microchips, licenses, and identification tags to help reunite lost pets with their owners
- community cat trap/neuter/vaccinate/return-to-field programs
- intake diversion programs to address lack of access to veterinary or behavior care
- support services for pet owners experiencing housing insecurity or domestic violence
- surrender-by-appointment after attempting to rehome pets using online technology

By focusing on animal welfare, the annual rate of shelter euthanasia has fallen dramatically over the past fifty years from a high of 18 million to a current rate of approximately 1.5 million pets in the USA.

Cathy Anderson D.V.M: Cathy is a 1987 graduate of Michigan State University and completed a master's degree in shelter medicine through University of Florida in 2017 and a certificate in forensic sciences. She is a trainer for Euthanasia by Injection (HSUS course) as well as for Chemical Immobilization. She also teaches Humane Euthanasia for the University of Florida Shelter Medicine curricula. She is the medical director at the animal protection shelter, Adopt a Pet in Fenton, MI. She is the co-founder and president of Pixie's Animal Welfare Society; an organization that is currently developing a spay/neuter service for rescue groups to serve cats in Jackson Michigan. She serves on the chairperson of the Legislative Committees of the Michigan Veterinary Medical Association.

## 2021 SVME Shomer Ethics Award Winner

*Dr. Anne Quain*



The SVME Shomer Ethics Award Winner for 2021 is a well-respected veterinary ethics author in Australia New Zealand and Europe. Dr. Anne Quain, (formerly Dr. Anne Fawcett) earned her veterinary degree at the University of Sydney in 2005. She is a lecturer at the Sydney School of Veterinary Science (SSVS) and a companion animal practitioner in Sydney. She completed a Master's Degree in small animal medicine and surgery through Murdoch University. She is a member by examination in the animal welfare chapter of the Australian and New Zealand College of Veterinary Scientists (ANZCVS), and a Diplomate of the European College of Animal Welfare and Behaviour Medicine in Animal Welfare Science, Ethics and Law. She teaches veterinary ethics at the SSVS and the University of Queensland, and is an examiner in the Animal Welfare Chapter of the ANZCVS.

Anne co-authored the book, *Veterinary Ethics: Navigating Tough Cases*, with Dr Siobhan Mullan. She is also the author of numerous peer-reviewed journal articles and book chapters. She co-edited the *Vet Cookbook*, which was published by the Centre for Veterinary Education and sold out. She is a member of the Humane Society Veterinary Medical Association leadership council.

The Robert Shomer Ethics Award is given to an individual who has made a significant contribution to the field of veterinary medical ethics. The recipient must have a distinguished career as a leader in the field of veterinary medical ethics through scholarship, advocacy or mentorship. Anne Quain is thrilled to be honored with the Society for Veterinary Medical Ethics prestigious Shomer Ethics Award for 2021.



## APPLICATION FORM

### SOCIETY FOR VETERINARY MEDICAL ETHICS

NAME: \_\_\_\_\_

BUSINESS \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME (optional) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

PLEASE SEND MAIL TO: \_\_\_Office \_\_\_Home

Business Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Home Phone: \_\_\_\_\_

OCCUPATIONAL AND PRESENT POSITION:

PROFESSIONAL DEGREES:

PROFESSIONAL MEMBERSHIPS:

INTERESTS IN VETERINARY ETHICS:

MAJOR OBJECTIVES OF THE SOCIETY ARE:

To encourage ethical practices and professional behavior of veterinarians in all aspects of the profession.

To increase the understanding of the philosophical, social, moral and ethical values encountered by the veterinary profession.

To sponsor seminars and other presentations on ethics and values at local, state, regional and national meetings of veterinarians and other interested individuals.

To promote the teaching of ethical and value issues at colleges of veterinary medicine and to identify speakers on these subjects.

To encourage persons from other professions and disciplines, such as biomedical research, discussions and studies of these issues.

To exchange information about veterinary ethical issues via bulletins, periodicals, and newsletters.

To maintain archives of appropriate documents and materials related to these disciplines.

*I hereby make application to the Society for Veterinary Medical Ethics*

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Date)

Dues are \$40 for Regular Membership & Free for students per year.

Please mail this completed & signed application to: John S. Wright, DVM, SVME Treasurer, Dept. of Veterinary Clinical Sciences, University of Minnesota College of Veterinary Medicine, 1352 Boyd Avenue, St. Paul, MN 55108 (email: [wright008@umn.edu](mailto:wright008@umn.edu))



## SVME Mission Statement

c/o

John S. Wright, DVM, SVME Treasurer  
Dept. of Veterinary Clinical Sciences  
University of Minnesota College of  
Veterinary Medicine  
1352 Boyd Ave.  
S. Paul, MN 55108



The Society for Veterinary Medical Ethics was founded in 1994 by a group of veterinarians, biomedical researchers and academics to promote discussion and debate about ethical issues arising in and relevant to veterinary practice. The SVME publishes a newsletter, provides a listserv, holds an annual meeting at the AVMA convention, sponsors an annual student essay contest and honors an individual annually with the Shomer Award for outstanding contributions to veterinary medical ethics.

*Individuals interested in information or in joining the SVME can visit the SVME website below to learn more about the organization.*

[www.svme.org/](http://www.svme.org/)

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