BVA RESPONSE TO WORLD VETERINARY ASSOCIATION’S REVISED DRAFT POSITION STATEMENTS

Introduction and background

1. As a World Veterinary Association (WVA) member, the British Veterinary Association (BVA) welcomes the opportunity to contribute to the revision of the WVA policy statements.

2. BVA is the national representative body for the veterinary profession in the United Kingdom and has over 15,000 members. Our primary aim is to represent, support and champion the interests of the veterinary profession in this country, and we therefore take a keen interest in all issues affecting the profession, including animal health and welfare, public health, regulatory issues and employment matters.

3. This response was put together with particular input from BVA’s Overseas Group, Veterinary Policy Group, Medicines Group and Ethics and Welfare Group.

General comments

4. We note that currently the various statements are based around different sections such as background and recommendations, so would suggest that it would be useful to apply a standard structure to the policy statements to allow for easier interpretation. This might take the form of an introduction, the background and then the position.

Position on Control of Inappropriately Aggressive Dogs

5. BVA has long been opposed in principle to any proposals which single out particular breeds of dogs rather than managing aggressive behaviour in individual dogs. BVA believes that the manner in which a dog behaves partly results from inherited characteristics but most importantly the rearing and training provided by the owner. The problems caused by dangerous dogs will never be solved until dog owners appreciate that they are responsible for the actions of their animals.

6. BVA, as a member of the Federation of Veterinarians of Europe (FVE), fully supports the FVE position on dangerous dogs, with particular reference to the recommendation urging the European Commission and Member States to postpone the adoption of further breed-specific legislation until a proper risk analysis has been carried out.

7. We support the WVA recommendation of education of owners and of dogs to engender a more responsible attitude to ownership and decrease the risk to the public. Those who train dogs should use humane and effective techniques, such as reward-based training methods.

8. Under the heading ‘owner responsibility’ we would encourage the use of the heading ‘Permanent identification and owner responsibility’. BVA has welcomed the
introduction of compulsory microchipping in the UK from 6 April 2016, which will facilitate both the identification of the owner of an inappropriately aggressive dog as well as reuniting lost dogs with their owners.

**Responsible use of antimicrobials**

9. BVA suggests that both the Background and Basic Global Principles sections could be briefer for ease of reading.

10. BVA supports a multidisciplinary ‘One Health’ approach, with medical, dental and veterinary professionals working together, as crucial in tackling antimicrobial resistance. The current WVA draft policy statement on the use of antimicrobials could be improved by making reference to One Health as a concept.

11. We strongly believe that decisions on controls for antibiotic use in animals should be based on scientific evidence, and should strike a proportionate balance between controlling the risk of resistance in animals and humans and providing the necessary medicines to enable targeted therapeutic treatment to ensure high levels of animal health and welfare to be maintained. Decisions on controls should be measurable, reviewable, and also take account of the impact of actions already taken in some countries. Consequently, we support the references to analysis of the risk to public and animal health.

12. Research undertaken in 2010 in the Netherlands\(^1\) concluded that strengthening the position of the veterinary practitioner as ‘gatekeeper’ of antimicrobials would be more effective than decoupling their present ability to prescribe and dispense. We support the critical role of the veterinary surgeon as a gatekeeper of antimicrobial use in animals. However, in the draft (page 2, paragraph 4, bullet point 3) the WVA ‘urges that antimicrobials should only be used under veterinary oversight.’ BVA suggests that this could be improved as follows ‘antimicrobials used in animals should only be used for animals under veterinary care with a valid vet-client relationship.’

13. Within the list of general considerations the third point states “Good animal health and welfare always starts with good care and management, minimizing adverse environmental exposures, ensuring availability of sufficient space, clean water, a proper diet, and minimal stress”. The list appears to be based around the five freedoms, therefore it may be clearer to highlight these guidelines or, to add ‘freedom to express normal behaviour and freedom from pain and disease’ within this list.

14. Within the Global Basic Principles section there is a typo on point 2; ‘Aantimicrobials’ should become ‘antimicrobials’. In the paragraph which follows there is reference made to ‘long time exposure’, which we would normally refer to as ‘long term exposure’.

15. BVA supports the inclusion of antimicrobial stewardship within codes of good veterinary practice and successfully lobbied the UK veterinary regulator, the Royal College of Veterinary Surgeons, to include this within their Code of Conduct for Veterinary Surgeons.

16. At point 4 of the Global Basic Principles we would once again suggest change to ‘Antimicrobials used in animals should only be used for animals under veterinary care with a valid vet-client relationship’ in the paragraph header and in the paragraph that follows insert ‘in animals’ after each use of antimicrobials.

17. We support the statement that the continued availability of all classes of safe, effective antimicrobials for veterinary medicine is a critical component of a safe food supply and optimal animal health and welfare. We are currently working with the Federation of Veterinarians in Europe (FVE) on the passage of the veterinary medicinal products and medicated feed legislation through the European Commission.

18. Point 7 of the Global Basic Principles makes reference to antimicrobials used for therapy and goes on to state that bacteriological diagnosis should inform clinical judgement in these cases. BVA suggests that when reference is made to infectious bacterial agents or bacterial diagnosis that the more specific term, antibiotics, replaces antimicrobials. Therefore the header would read ‘When antibiotics need to be used for therapy, bacteriological diagnosis with antibiotic sensitivity testing should, whenever possible, be part of informed professional clinical judgement.’ We would also suggest replacing the three instances of ‘antimicrobial sensitivity’ in the paragraph that follows with ‘antibiotic sensitivity’.

Opposition to international scheduling of ketamine

19. In November 2014 BVA responded to a Home Office consultation on proposals to reschedule ketamine in light of advice from the Advisory Council on the Misuse of Drugs (ACMD). BVA conducted a survey of our member practices and concurrent surveys were undertaken by our specialist divisions, the British Small Animal Veterinary Association and the British Equine Veterinary Association (BEVA). Prior to the consultation, the BVA, BSAVA, and RCVS Good Practice Guides on veterinary medicines recommended ketamine to be stored in a locked cabinet and its use recorded in an informal register. As a consequence of this, the majority of respondents to the BVA survey on the rescheduling of ketamine felt that it would not represent significant additional burden.

20. We concluded that we could not support the re-scheduling of ketamine to Schedule 2 status unless there was clear evidence that this change would reduce the risk or misuse of ketamine. As a result of consultation with their members, BEVA did not support rescheduling to full Schedule 2 status in any circumstance as they were confident that control could be demonstrated in compliance with the current regulations and restrictions caused by ‘safe custody’ would have no impact on misuse, but would impact on animal welfare.

21. BVA believes that ketamine is an essential veterinary medicine that has unique properties as an analgesic and anaesthetic drug. It is the sole agent available to induce general anaesthesia in large animals and is widely used in the UK and beyond. Furthermore, the potential routes of administration and the relatively wide
safety margin in relation to dosage is particularly useful in wild and fractious animals. Rescheduling would have an unacceptable impact on animal welfare internationally.

22. BVA strongly supports the WVA position in opposition to the international scheduling of ketamine by placing it in Schedule 1 of the 1971 UN convention on psychotropic substances. Ketamine is still widely used in UK veterinary medicine; in the survey of our members conducted in 2014 we found that half of the respondents used ketamine daily, approximately 35% weekly, 6.5% monthly, and 8.5% occasionally. The consequences of Schedule 1 international restriction and the potential for limited access to and use of ketamine would be felt across the full range of UK veterinary practices areas.

23. In terms of specific comments about the wording of the position statement on ketamine, we would suggest that the wording in the second paragraph is slightly unclear. It currently states “the impact of the reduction of its availability would allow for incomparable more loss to the global health”. It could be clarified by changing the wording to “the impact of the reduction of its availability would be incomparable to the significance of loss to global health if access was further restricted”

24. Paragraph three of the ‘Background’ section states: “a wide range of emerging and re-emerging zoonotic diseases on human-animal-environment interface”. We propose that the word ‘on’ could be replaced with ‘at the’ human-animal-environment interface.

Draft position on the role of the veterinarian in animal welfare

25. BVA regards animal welfare as a fundamental priority issue for the veterinary professions and we have signed up to the Universal Declaration on Animal Welfare. We also promote the concept of One Health and the benefits of good animal welfare in improving human health and the environment, as recognised in the WVA statement.

26. We therefore support the WVA position paper on the role of the veterinarian in the important issue of animal welfare.

27. We are in the process of developing an Animal Welfare Strategy and as part of that we’re currently reviewing our working definition of and position on animal welfare, and developing a statement on the profession as animal welfare focussed. The revised BVA animal welfare position will also recognise the importance of animal behaviour and mental wellbeing for animal welfare, which is often an overlooked aspect of animal welfare. We are therefore pleased to note the references to indicators of positive wellbeing and emotions of animals in the WVA statement.

28. In terms of specific comments on the content of the revised WVA animal welfare position statement, we would suggest that the first sentence of the second paragraph could be re-phrased to make it clearer. Currently it says ‘ensuring good animal welfare is a core mandate of the veterinary community generally and veterinarians individually’, and instead could perhaps say something like ‘ensuring good animal
welfare is a core objective for individual veterinarians and the wider veterinary community’.

29. We would query whether it is necessary to use quote marks in the second paragraph to illustrate the general form of veterinary oaths or statements. We would also query the assertion in the fifth paragraph that animal health and production have traditionally been the ‘only’ indicators of good animal welfare, used by the veterinary community. We acknowledge that historically they have often been the main focus of the veterinary professions but not necessarily the sole focus. In the same paragraph, the phrases ‘affective state’ and ‘natural living’ could be removed and clarified, perhaps by simply stating ‘it has been recognised that good animal welfare also includes consideration of how the animal feels, as well as allowing the animal to express species-specific behaviours’.

30. We welcome the reference to the widely used concept of the veterinary oath which includes a key commitment to animal welfare. This reflects BVA’s plans to develop a short position statement highlighting the fact that the veterinary profession is animal welfare focused, with the existing oath from the UK veterinary regulator requiring members to “above all” constantly endeavour to ensure the welfare of animals in their care. We would be happy to share this statement with WVA once available.

31. We are pleased to note that the WVA paper now specifically refers to the five welfare freedoms, following our response to WVA’s consultation on this statement in 2014. Though we note they are not referred to as the ‘freedom five’.

32. We welcome the call for animal welfare science to be integrated into the veterinary education curriculum and CPD, as well as for veterinary engagement in educating animal owners and the public about animal care.

33. BVA is also calling for animal welfare to be included in the general national school curriculum. We consider that pupils should learn about animal welfare and the duty of care to provide for the five welfare needs of animals (as laid out in the 2006 UK Animal Welfare Act (and equivalent legislation in Scotland and Northern Ireland)), to ensure that as adults they have a good understanding of the needs of animals. Including animal welfare on school curriculums could also have important One Health benefits, as early learning about the needs of other animals has benefits for children’s personal and social development.