

Letters to the Editor

Need more comprehensive look at issues surrounding pregnancy in practice

We read with interest the *JAVMA* News story "Pregnancy in Practice."¹ Although pleased that the issues of pregnancy and parenthood in veterinary medicine are receiving some attention, we thought that the content and tone were not reflective of the serious economic, medical, and emotional implications of these issues. Importantly, the article did not critically review or provide an in-depth discussion of the complex issues facing pregnant women, their families, and their employers.

There is increasing recognition that career flexibility and family-friendly policies are important for both men and women and may be vital for employee recruitment and retention.^{2,3} Whether because of an individual's intrinsic personal work ethic, the demands of a busy career, or the lack of support from one's employer, pregnancy and parenting place additional stress on those in a career already recognized for a high risk of burnout, stress, and depression.⁴ Employers, particularly small businesses such as veterinary practices, are likewise struggling to balance the demands of maintaining a profitable and adequately staffed workplace with the inherent needs of expectant and new parents.

We believe the issue of balancing workplace obligations with pregnancy concerns, maternity and paternity leave, and family obligations deserves a serious, in-depth, and critical review. There is currently a dearth of research examining the unique challenges inherent to balancing family obligations with a career in veterinary medicine. Furthermore, although veterinarians in government, industry, and academia may benefit from larger institutional policies regarding family and medical leave time, small business owners and employees are subject to a unique set of economic and workforce challenges. A report highlighting ways in which private

practices and veterinarians working in those practices have successfully addressed and overcome these challenges would be of great benefit to the veterinary community.

We urge the AVMA to act on these issues through public recognition of the challenges faced by working parents and pregnant women within the profession; by providing support for and publication of relevant, critical research on topics related to pregnancy, family leave, flexible scheduling, and the economic impacts on employees and employers alike; and by creating guidelines and support for employers navigating the needs of pregnant employees and working parents. Given that the veterinary profession is now dominated by women,⁵ the AVMA should be at the forefront of the development of women- and family-friendly policies that will help maintain veterinary medicine as a viable profession through the 21st century.

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1. Burns K. Pregnancy in practice: veterinarians share their stories. *J Am Vet Med Assoc* 2015;246:366-371.
2. Howell LP, Beckett LA, Nettiksimmons J, et al. Generational and gender perspectives on career flexibility: ensuring the faculty workforce of the future. *Am J Med* 2012;125:719-728.
3. Villablanca AC, Beckett L, Nettiksimmons J, et al. Career flexibility and family-friendly policies: an NIH-funded study to enhance women's careers in biomedical sciences. *J Womens Health* 2011;20:1485-1496.
4. Hatch PH, Winefield HR, Christie BA, et al. Workplace stress, mental health, and burnout of veterinarians in Australia. *Aust Vet J* 2011;89:460-468.
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Veterinarians' role in public policy

In their letter to the editor calling for an expanded definition

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Letters containing defamatory, libelous, or malicious statements will not be published, nor will letters representing attacks on or attempts to demean veterinary societies or their committees or agencies. Viewpoints expressed in published letters are those of the letter writers and do not necessarily represent the opinions or policies of the AVMA.

of one health, Ferguson et al¹ assert that the veterinary profession “is equipped to assume a leading role in developing integrative policies” broadly related to the one health concept. It is eminently reasonable to subscribe to this view on the basis of the profession’s broad expertise in medical issues, but perhaps less so when one considers the social dimensions that pertain to health.

The success of the one health concept depends on impacting public policies. One must ask, therefore, whether the veterinary profession has put enough focus into developing its skills in the policy domain. Specifically, should all colleges of veterinary medicine have administrative units devoted to health policy? Should veterinary medical associations have programs to enhance expertise in policy making among its members? As a profession, we have been successful in enhancing veterinarians’ skills in clinical and practice domains. Should we not be doing the same in the policy domain, particularly given its importance?

Public policy represents the integration of information from multiple disciplines in the natural and social sciences and humanities to develop plans to deal with specific situations. Skills related to development and implementation of public policy can be taught through the study of actual cases. Over time, a better understanding of the subject and greater expertise in its application will emerge. I observed this evolutionary course in veterinary pathology over my professional lifetime.

For veterinarians in government employment, public policy provides context to and pervades all of their professional activities. Given this, it would make sense to develop a professional society or association devoted to public policy consisting of veterinarians working in this field and related academicians. There has been some interest in such action in Canada,² but historically, these kinds of professional initiatives (eg, specialty colleges and boards) have depended on leadership largely in the United States. The profession would be stronger if

appropriate leadership took up the challenge.

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2. Nielsen NO, Buntain B, Stemshorn B, et al. Public policy and veterinary medicine. *Can J Vet Med* 2014;55:389–390.

Don’t leave “medical” out

It was reassuring to read about the progress the AVMA has made in its strategy management process and to see the objectives outlined in the association’s new strategic plan.¹ It is critical that all of us in the profession support the aims expressed in the AVMA’s new mission statement: “To lead the profession by advocating for its members and advancing the science and practice of veterinary medicine to improve animal and human health.”

To achieve our mission, it is critical that the AVMA and its members be meticulous and persistent in informing the public that we represent one of the medical professions. It is my strong belief that we cannot succeed in this if we continue to write or speak about protecting and enhancing the lifelong value of “the veterinary degree” or enhancing the public image and reputation of “the veterinary profession.” Rather, I contend, that we must write about the veterinary medical degree and the veterinary medical profession as well as veterinary medical students, veterinary medical schools and colleges, and veterinary medical education. That is, we must be consistent in the use of the word *medical* or *medicine* after the word *veterinary*.

According to the article, the association’s new vision statement is as follows: “The American Veterinary Medical Association’s vision is to be the trusted leader in protecting, promoting and advancing a strong, unified veterinary profession that meets the needs of society.” I hope that the vision statement will be revised to read “a strong, unified veterinary medical profession that meets the needs of society.”

I hope that there are others who share my concerns and that

they will be active in promoting the use of medical or medicine in conjunction with veterinary as we present this great profession of ours to the public.

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1. Burns K. Growing member value: AVMA Strategic Plan aims to increase member satisfaction. *J Am Vet Med Assoc* 2015;246:476–480.

Upselling veterinary services

I agree with the sentiments expressed in the recent letter to the editor from Dr. Carin Smith¹ and had the same reaction when I first saw the ABC News 20/20 segment on upselling of veterinary services. I suspect that most of us have, at one time or another, worked with veterinarians who upsold for financial benefits or because of a lack of confidence in their diagnostic skills. This is an important issue that affects the public impression of the veterinary profession and makes us an easy target for sensationalized media stories.

The solution lies in acceptance and education, not in denial. Every health-care provider (human and animal) needs to not only understand but also truly believe that the practice of good medicine is not the practice of excessive medicine.

In my 23 years of practice, I have heard countless stories from clients about their disillusionment with previous veterinarians because of what the clients perceived as upselling, excessive or unnecessary diagnostic testing, or overmedication. It should be our goal as a profession to address these issues, rather than ignore them. We can begin by asking ourselves three questions when considering the care of any individual patient:

- Is this diagnostic test truly necessary and in the best interests of the patient?
- Is this treatment or procedure truly necessary and in the best interests of the patient?
- Is this medication truly necessary and in the best interests of the patient?

Any time we cannot answer yes to each of these questions, we be-

come part of the problem highlighted in the 20/20 segment, instead of part of the solution.

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1. Smith C. Don't get mad; get even-handed (lett). *J Am Vet Med Assoc* 2015;246:499.

More on animal welfare

Writing on behalf of the Humane Society Veterinary Medical Association (HSVMA), I want to thank Dr. Kipperman for his recent commentary on the role of the veterinary profession in promoting animal welfare.¹ The HSVMA agrees with Dr. Kipperman that national veterinary associations' positions on animal welfare, particularly farm animal welfare, often lag behind the views of society as a whole and the veterinary profession specifically. The two examples discussed—battery cage confinement of laying hens and confinement of pregnant sows in gestation crates—are excellent illustrations of this point. In 2008, the AVMA adopted a housing policy² on veal calf management that "supports a change in veal husbandry practices that severely restrict movement, to housing systems that allow for greater freedom of movement without compromising their health or welfare."³ However, the AVMA has yet to adopt similar positions against battery cages and gestation crates, despite the support among individual veterinarians for similar statements. The HSVMA would encourage the AVMA to extend their greater freedom policy to chickens and pigs that it has adopted for veal calves.

In 2014, > 1,000 veterinarians from all 50 states joined with the HSVMA in supporting housing breeding sows during gestation in a manner that would allow them sufficient room to stand up, fully turn around, and stretch their limbs. Laws phasing out extreme confinement of certain farm animals have been enacted in Oregon, Colorado, Arizona, Michigan, Maine, Florida, Kentucky, Rhode Island, Ohio, and California, often with strong veterinary support. The California referendum known as the Stan-

dards for Confining Farm Animals (Proposition 2), which passed in 2008, received the endorsement of the California Veterinary Medical Association and > 700 California veterinarians.

Battery cages and gestation crates are just two examples of physical as well as mental and behavioral welfare concerns where the HSVMA believes the veterinary profession should show greater leadership. There are others, such as socialization of dogs from puppy mills, housing of animals used for research, and the use of animals in rodeo events such as calf roping, steer tripping and wrestling, and bull riding.

The HSVMA encourages the AVMA to promote the idea that the mental health of animals and their ability to express natural behaviors are as important as their physical health. The veterinary profession, both at the association level and as individuals, should reflect the changing roles of animals in society. It should also act as a leader in guiding and improving stewardship of all animals and use its influence to positively impact public policy related to the welfare of all animals, which it is charged to protect.

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1. Kipperman BS. The role of the veterinary profession in promoting animal welfare. *J Am Vet Med Assoc* 2015;246:502-504.
2. AVMA. Veal calf management. Available at: www.avma.org/KB/Policies/Pages/Veal-Calf-Management.aspx. Accessed Mar 11, 2015.
3. Nolen RS. New veal calf housing policy encourages greater freedom of movement. *J Am Vet Med Assoc* 2008;233:689.

I read with great interest Dr. Barry Kipperman's recent commentary¹ on the role of the veterinary profession in promoting animal welfare and agree with his observations. Specifically, I support Dr. Kipperman's premise that the use of certain language suggests a particular viewpoint, as when we talk about using animals rather than caring for them. In addition, I agree that the designation of certain

animals as production animals does not foster empathy and implies that production animals have a different moral status than companion animals.

As a veterinarian who has devoted much of his career to understanding animal behavior, I could not agree more that animal welfare must consider not only the physical health of animals but also their mental health and ability to satisfy behavioral needs (ie, express normal behaviors). Historically, production animal welfare did not take mental health and behavioral needs into consideration. Battery cage confinement does not allow laying hens to stretch or flap their wings or express natural behaviors such as perching and nesting, and confinement in gestation crates does not allow breeding sows to turn around, lie down comfortably, or express natural behaviors such as rooting, nesting, and socializing with other pigs. Thus, I do not believe that either housing system is acceptable.

I urge the AVMA to take a stronger stance on animal welfare issues, especially as they pertain to production animal welfare. As a national organization representing the veterinary profession, the AVMA should take a leadership role in clearly acknowledging that the mental health of animals and their ability to express natural behaviors are as important as their physical health.

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1. Kipperman BS. The role of the veterinary profession in promoting animal welfare. *J Am Vet Med Assoc* 2015;246:502-504.

The spirit of accreditation

It seems to me that the current controversy over the continued role of the AVMA Council on Education (COE) in accrediting veterinary colleges in the United States¹ reflects an unfortunate lack of trust within our profession. Although I was not personally involved in the Virginia-

Maryland College of Veterinary Medicine's most recent accreditation cycle, I think some of the college's history may be instructive.

Opening the Virginia-Maryland College of Veterinary Medicine was neither quick nor easy. It was a turbulent, two decades-long saga that began in 1971 with a letter to the Virginia General Assembly from the Virginia Veterinary Medical Association. A governmental study commission authorized planning money in 1974, and the founding dean was hired. But, it was not until 1977 that the Virginia State Council for Higher Education gave approval for the college and, then, only on the condition that other states be secured as partners. That same year, the COE issued a letter of reasonable assurance, and the Virginia legislature provided startup budgets for a few faculty and staff positions and the first building.

Finding the obligatory state partner was complicated. Following discussions with Virginia's contiguous states and the District of Columbia, an agreement to develop a regional veterinary college was signed by Virginia Tech and the University of Maryland in April 1980. In September of that year, the charter class of students was accommodated in temporary facilities. Provisional accreditation was granted in 1982, but graduation of the inaugural class in 1984 was marred by lingering problems such as inadequate operating budgets, insufficient faculty, and stalled building plans. Consequently, the COE denied full accreditation, but assigned limited accreditation. This was reevaluated annually until the maximum 5-year allowable period expired in 1989, when, recognizing that some concerns persisted, the COE granted full accreditation for three years, after which accreditation would be revoked if ongoing concerns were not addressed. This stern warning was a powerful catalyst; building construction resumed, budget issues were resolved, and more faculty were hired. Additionally, funded by a grant from the PEW Charitable Trust Foundation, the Center for Government and Corporate Veterinary Medicine was established at the Maryland campus in 1990, providing a unique area of

concentration in the newly revised curriculum. When the COE again visited in 1993, the college had satisfied all requirements and received full accreditation for the usual 7 years—22 years after inception and 16 years after the letter of reasonable assurance was issued.

The history of the Virginia-Maryland College of Veterinary Medicine illustrates some important characteristics of the COE accreditation process, including a lack of political motivation in accreditation decisions, a dedication to upholding high educational standards, a commitment to cooperation in the enforcement process, and a willingness to consider unconventional college structures so long as they successfully educate and train well-qualified veterinarians. Acknowledging Virginia-Maryland's unprecedented educational model, the COE allowed extra time for the college to complete the process and provided extra support. Without these accommodations, the Virginia-Maryland experiment might well have had a different outcome.

Veterinary colleges in the United States and Canada are accredited through an evaluation process that, while upholding the highest standards, also embraces institutional individuality. Whatever the final administrative structure for accreditation becomes, we must work hard to keep the spirit of trust alive, and not let anyone or anything diminish or destroy it. The versatility of our graduates defines the veterinary profession.

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1. Larkin M. Learning to listen: in bid for re-recognition by USDE, AVMA education council called to reach out to practitioners. *J Am Vet Med Assoc* 2015;246:566–571.

I read with interest the recent JAVMA News story regarding the listening session held by the AVMA Council on Education (COE) at this year's North American Veterinary Community Conference.¹ According to the report, Dr. Sheila Allen, dean of the University of Georgia College of Veterinary Medicine, commented after the session that “she did not feel any AVMA influence on COE activities when she

served on the council.” Notably, Dr. Allen served as the Association of American Veterinary Medical Colleges' representative on the COE from 2007–2013, and chaired the council from 2012–2013.

First, I firmly believe that it is a conflict of interest for the dean of any college of veterinary medicine to serve on, much less chair, the very organization that accredits colleges of veterinary medicine.

Second, while I can appreciate that Dr. Allen did not feel that the AVMA placed any undue influence on the council's decision, she can hardly be considered a disinterested observer.

Finally, and most importantly, Dr. Allen's comment does not address the primary concerns of those who argue that the AVMA should not be involved in veterinary college accreditation. Whether the AVMA has actually improperly influenced accreditation decisions is not relevant to this discussion. The real issue is that under the current accreditation system, decisions might be influenced by the AVMA. I contend, therefore, that the system needs to be changed.

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1. Cima G. AVMA hears calls to end accreditation role. *J Am Vet Med Assoc* 2015;246:574–575.

Editor's note:

For more information on conflicts of interest as they relate to the role of the AVMA Council on Education (COE) in accrediting colleges of veterinary medicine, readers are encouraged to refer to the two commentaries published in the March 15, 2015, issue of JAVMA.^{1,2} The COE has adopted a conflict of interest policy intended to prevent any member of the council with a conflict from participating in any way in accrediting decisions; that policy is posted on the AVMA website.³ Finally, it should be noted that several members of the Liaison Committee on Medical Education, which is the human medical counterpart of the COE and accredits medical education programs lead-

ing to the MD degree in the United States and Canada, are deans of schools of medicine.⁴

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2. Matushek KJ. Conflicted by conflicts of interest. *J Am Vet Med Assoc* 2015;246:601–602.
3. COE accreditation policies and procedures: principles. 5. Fundamental principles of accreditation. Available at: www.avma.org/ProfessionalDevelopment/Education/Accreditation/Colleges/Pages/coe-pp-fundamental-principles.aspx. Accessed Mar 23, 2015.
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