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### Animal Welfare in South Carolina—Listening Meeting

Representatives, thank you so much for listening to our concerns tonight. I am pleased to be able to voice my concerns both as a veterinarian and a citizen of South Carolina. I am a veterinarian and have practiced for the past 6 years in Charleston, at the Charleston Animal Society. My practice focus is shelter medicine. I hold a Master's Certificate in Shelter Medicine and have also completed several courses in Veterinary Forensics. I am a member of the American Veterinary Medical Association, the South Carolina Association of Veterinarians, and the Association of Shelter Veterinarians. I currently serve as the Director of Public Health and Spay/Neuter Initiatives at the Charleston Animal Society. I am also married to a veterinarian, and he owns his own practice. I am involved daily in the running of that business, and I take my role as a veterinarian very seriously.

Like several other presenters tonight, I am an expert in shelter medicine. I come before you today to present what I see as the most pressing issues facing animal health in our State. I feel strongly that, as a shelter veterinarian, I am uniquely qualified to speak to animal welfare concerns. Shelter veterinarians deal with the animals that others cannot or will not handle; we treat preventable diseases and take animals when owners don't want them any more. The goal of my job at CAS is to prevent animals from coming in to the shelter, which we primarily accomplish by aggressive spay/neuter tactics. Our spay/neuter clinic, which I am tasked with overseeing, performs about 10,000 spay/neuter surgeries per year. We adhere to The Association of Shelter Veterinarians veterinary medical care guidelines for spay-neuter programs, and we are proud of our record. I think our complication rate speaks for itself: we currently have a 0.04% fatal complication rate in our spay/neuter clinic. (As a comparison, studies have shown an average fatal complication rate of 0.1% in private practice.) We take each complication, whether fatal or not, very seriously and seek to learn from our mistakes. We shelter veterinarians are as dedicated to our patients as any other practitioner. We keep records and we treat diseases, injuries, and animal suffering. In fact, we are the state's experts in preventable animal diseases like parvo virus and distemper virus, as we see and treat these problems regularly. We are also some of the state's leading experts in animal cruelty, as we have the dubious honor of being on the front lines of animal mistreatment.

Our shelter medicine protocols, similarly, are based on published standards. We adhere as closely as possible to the Guidelines for Standards of Care in Animal Shelters published recently by the Association of Shelter Veterinarians. This document is the first of its kind, and it establishes what is acceptable and unacceptable in animal sheltering. It seeks to elevate the standards of care for all animals in sheltering systems across the country. Unfortunately, the level of care that we provide at the Charleston Animal Society not repeated in all shelters across our state. Many shelters are too resource-poor to provide the level of care that we do, and animals do suffer because of it.

I bring this up not to inflame the rhetoric, but to inform you and to own the problem. We, as shelter veterinarians, are quite aware of the issues in some shelters and, generally, the reasons for them. We cannot always change them ourselves, but we seek to educate and advise those caring for animals in less than ideal conditions. In general, when animals are housed and cared for in substandard conditions in shelters across the state, it can be traced back to a simple equation: too many animals and too little support from the community that supplies them. Combine that with a deficit of oversight from the state in regards to humane animal treatment and you end up with the current situation. Currently, there is no organized inspection of or oversight of animal shelters. This leads to a system of self-policing, often with substandard results.

Substandard conditions are not limited to animal shelters and sheltering. I personally witnessed substandard animal care in several private practices when I worked as a veterinary assistant before veterinary school. I mention this not to point fingers, but to provide perspective for this discussion. The veterinary profession is generally a proud one, but some veterinarians are able to get away with a substandard level of practice because of a deficit of regular inspections. We are generally left to police ourselves, and the results are (as with animal shelters) sometimes substandard.

The problem is not shelter veterinarians; it is a lack of them. Animal shelters tasked with housing stray and disenfranchised animals should not be expected to care for them without veterinary help. But, depending on resources, the shelter may not be able to afford to hire a veterinarian, even on a part-time basis. As a result, some shelter workers overstep their bounds and prescribe medications and treat wounds without veterinary advice. This is illegal. However, it is specifically and completely censored in the already existing Veterinary Practice Act. There are already laws against it! I have heard complaints of animals being treated by non-veterinarians in shelters and suffering as a result. My challenge to those repeating those stories is this: Did you report the violation? Did you attempt to follow the already-existing law and report the offenders?

The answer to the above question has always been no, even when posed to members of our state's veterinary association. I think this is a travesty that must be addressed. The problem is not a lack of legislation; it is a lack of reporting and/or a lack of enforcement. We must seek to elevate our state's standard of animal care by addressing the issue of individuals practicing medicine without a license. They must be reported, just as we report veterinarians who break the law. However, we cannot ignore the problem that started it all: animal overpopulation in our state and the disparity of care in animal sheltering.

To summarize:

- There is a staggering problem in our state of animal overpopulation
- Many shelters are forced to operate without a veterinarian, because of a lack of resources
- Animal shelter conditions vary widely, with some shelters providing substandard care and practicing veterinary medicine without a license
- The Veterinary Practice Act specifically prohibits practicing medicine without a license, but does NOT regulate standards of care in animal shelters
- The Association of Shelter Veterinarians has published Standards of Care for animal sheltering, which may be used as a guideline for animal care in the shelter setting

Regards,

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