FDA to Hold Petfood Standards Meeting

The U.S. Food and Drug Administration plans a May 13 public meeting to collect information about pet-food standards from various stakeholder groups.

These stakeholders include, but are not limited to, the Association of American Feed Control Officials, veterinary medical associations, animal health organizations and pet food manufacturers.

As mandated by the FDA Amendments Act of 2007, the agency is working to develop standards including ingredient standards and definitions, processing standards and updated labeling standards. The FDA also wants input from these stakeholders as to whether these standards should cover all animal feeds.

FDA is accepting written comments on pet food standards (identify comments for Docket No. FDA-2007-N-0442) through June 13, 2008, via www.regulations.gov or mailed to Division of Dockets Management (HFA-305), Food and Drug Administration, 5630 Fishers Lane, Room 1061, Rockville, MD 20852.
Source: Veterinary Practice News

Cat Kibble Crisis

By Barbara Axel

I own two elderly tabby cats. The eldest, who weighs in at 7 pounds, is at least sixteen years old and was a feral who started living in our garage when she was about two. She had been living on her own till then and was a great hunter. She was in good health and her coat glistened. When she was examined by a veterinarian at the time she was spayed, he found that she had no internal or external parasites.

We started feeding her a well known name brand of cat kibble, but this formerly healthy and beautiful wild cat lost all her fur within the month. Immediately we changed brands and crossed our fingers. All now went well.

Several years later another cat adopted us. He is a male, now about 13 years old who ran away from home when he was about a year of age. At that time we were renting a cottage while our new home was being built. The cat was well socialized, but could not compete with the 30 or so other cats the neighbor harbored, so he ran to a less threatening environment. We were not situated to take on another responsibility, but this cat had other ideas.

He got underfoot and tripped me every time I walked out of the house, and purred when I said nasty things while regaining my balance. He was in bad shape; battered, extremely thin, had a scarred and scabbed coat, and his ear tips had been bitten off. I reluctantly gave in. How could I indifferently allow this being to die? We talked to the owner, and with his permission adopted this personable feline who bonded to the other cat and all our dachshunds. This gentle, loving cat became ours.

He was fattened up somewhat and a few weeks later he was brought to the veterinarian where all necessary procedures were accomplished. He slowly gained condition and health. By the time he had regained his normal weight of 12 pounds and was finally in good condition he had also developed bladder crystals, a frequent problem for neutered male cats.

We again looked for a new product to feed. We found one nationally recognized brand that suited both cats' dietary needs and they have been successfully fed this kibble for about a decade. We bought the 20 pound bag size.

Recently the manufacturer changed the bag label and weight. The new bag weighted 16 pounds and sold for the same price as the 20 pound bag. However, we were assured the ingredients were the same.

We bought the new bag and compared the new to the old bag. There were crucial differences in addition to the 4 pound lighter weight.

Cats are obligate carnivores and must be fed a highly proportioned animal protein diet to thrive.

HOWEVER:

- The new bag ingredients label eliminated liver and eggs and had only one animal protein listed.
- It had instead added cranberries and blueberries. I have never seen a feline attack a blueberry bush for food.
- The old bag statement "helps maintain urinary tract health, lowers urinary PH--low magnesium" was missing from the new bag.
- MADE in the USA was not stated on the new bag as it had been on the old.

I called the company spokesperson. I was told that the reduced size was to bring the product into conformity with other products. The price was not determined by the manufacturer, but by the retailer. The information concerning urinary tract health was eliminated because it is too expensive to conduct the tests now that there are different ingredients in the product. However we should trust them that urinary tract health maintenance on the new product is the same. The new cat food IS manufactured in the United States. It just doesn't state that on the label. I found out from the representative that the calcium/phosphorus ratio was not correct.

So while the manufacturer claimed the new kibble was the same as the old, I had to treat it as a new food. We mixed ¼ new kibble to ¾ old kibble and served it the first week. While the 12 pound boy seemed to do well, the old girl did not. She had constipation, vomited, and stopped eating at all. We were very concerned that we were adding too much stress to elderly felines whose immune system is more fragile.

We immediately stopped serving the new food from the old manufacturer and started searching.

After searching we found a product from a different manufacturer that states it is kind to sensitive stomachs.

- The label states it is manufactured in the USA.
- The animal protein content is much higher. This kibble contains chicken meal, chicken, ocean fish, dried egg product, as well as probiotics.
- The calcium/phosphorus ratio is correct.
- The caloric density is higher. And yes, it is more expensive.

Our little senior citizen is eating once more and shows no gastric disturbances. Her coat so far is in good condition.

Our big boy is also eating his new kibble with gusto. So far he is doing well. There is no mention of urinary tract health on the label. We are crossing our fingers.

The moral of the story is to be suspicious. In the light of the many pet food problems and recalls in the recent past it is a good idea to look at the ingredient label and guarantees on every bag or tin of food you buy. Do keep the old container for comparison. And if you do find major discrepancies as did I, do change foods after telling the manufacturer why you will no longer buy his product.

Feline hyperthyroidism

By Ann Marie Falk, Information Specialist
Office of Public Engagement, University of Illinois College of Veterinary Medicine

Feline hyperthyroidism is the most common hormonal disease diagnosed in cats today. It is arises when a tumor on the thyroid gland causes an increase in the secretion of thyroid hormones. Most often, the tumor is benign.

"For the past 20 years researchers have been searching for a cause, but the underlying cause of feline hyperthyroidism is not known. We do not know of any predisposing factors. Things such as food, vaccination status, and kitty litter do not put cats at risk for this disease," explains Dr. Thomas Graves, a veterinarian specializing in internal medicine at the University of Illinois Teaching Hospital in Urbana.

Feline hyperthyroidism is a disease seen more commonly in older cats. The average age of onset is 12 years. However, all cats over 8 years should be routinely screened. Early diagnosis is the key to successful treatment.

"Old age is not a disease! A skinny, scruffy cat does not look that way because it's old but rather because it has an underlying disease. Cats are very good at hiding disease until they are really sick," says Dr. Graves. "In the case of feline hyperthyroidism, lack of treatment can lead to an increase in blood pressure resulting in changes in the heart and kidney failure. Eventually death can occur due to congestive heart failure."

Cats with feline hyperthyroidism frequently have an increased appetite with concurrent weight loss and vomiting. They may also experience hyperexcitability and other behavioral changes. Some, however, show no signs of disease.

Because feline hyperthyroidism can look like chronic renal failure, diabetes, inflammatory bowel disease, and intestinal lymphoma, thorough diagnostics, including a urinalysis, complete blood work, and a chemistry panel, are necessary. An elevated concentration of the thyroid hormone in the blood points toward feline hyperthyroidism.

Currently there are three treatment options available: medical therapy, surgery, and radioiodine. Radioiodine is arguably the safest and most effective way to treat feline hyperthyroidism. One dose of radioiodine is given in a licensed nuclear medicine facility and a hospital stay of about 5 days is required.

Surgery is also usually curative, often less expensive, and can be done in many veterinary practices. In the hands of an experienced surgeon it is a safe procedure. No muscles need to be cut and no body cavities are opened, so post-surgical recovery is usually quick and uneventful.

"Feline hyperthyroidism can be managed medically with a drug called Tapazole. This medication is not curative and will need to be given for the rest of the cat's life. It works to control the hormone levels," explains Dr. Graves.

Tapazole is the cheapest form of treatment in the short term. There can be side effects from the drug, so cats will need to be monitored closely. Blood work should be checked every 2 to 3 weeks when starting up treatment. http://www.cvm.uiuc.edu/petcolumns/index.cfm?function=showarticle&id=401

Dogfighting now a felony in all 50 states

Dogfighting is now a felony offense in all 50 states. Wyoming Gov. Dave Freudenthal signed legislation March 4 that increased the penalty for participating in dogfighting from a misdemeanor to a felony. Idaho passed similar legislation just a week earlier.

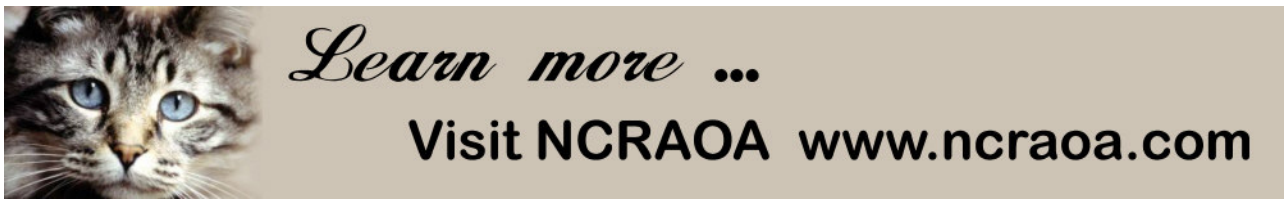
The AVMA praised the measures, and noted that the Association has for years recommended animal fighting be considered a felony offense throughout the country. "The AVMA condemns any and all events involving animals in which injury or death is intended, and we encourage veterinarians to collaborate with law enforcement with respect to recognition, enforcement, and education about dogfighting," said Adrian Hochstadt, assistant director of state legislative and regulatory affairs at the AVMA.

JAVMA News May 1, 2008

New on NCRAOA Website

Veterinary Learning Systems (VLS) granted one-time permission to North Carolina Responsible Animal Owners Alliance (NCRAOA) to reproduce for educational purposes only the article, “Editorial: An Education in Euthanasia”, on its Web site www.ncraoa.com. The article is authored by Robert J. Neunzig, DVM, DABVP and appeared in *Compendium: Continuing Education for Veterinarians,* December 2007, Vol. 29, Issue 12, pages 708, 710.

NCRAOA encourages interested parties to read this well written article which sorts fact from fiction regarding methods of euthanasia for shelter animals. The article can be found here: http://www.ncraoa.com/petpopulation.html



CVM Leads National Trial for Canine Acute Disc Herniations

Posted April 25, 2009 The College of Veterinary Medicine (CVM) is the lead investigator in a national trial evaluating the effectiveness of medical therapies combined with surgical treatment of severe acute disc herniations in dogs.

A common problem in chondrodystrophoid breeds such as Dachshunds, Bassett Hounds, Pekinese, Beagles, and Lhasa Apsos, acute intervertebral disc herniations (IVDD) occur when the disc material located between spinal vertebrae degenerates and herniates into the spinal canal, causing both contusive injury and compression of the spinal cord. Symptoms range from a loss of coordination and back pain to complete paralysis of the hind end.

Disc herniations are the most common cause of canine paralysis and 50% of dogs suffering severe spinal cord injury that causes loss of sensation and paralysis to the hind legs remain permanently paralyzed and incontinent despite state-of-the-art treatment.

"Current IVDD treatment calls for surgical decompression of the spinal cord followed by rehabilitation to help the dog recovery full mobility," says Dr. Natasha Olby, CVM associate professor of neurology and principle investigator for the study. "There is controversy, however, about whether adjunctive medical therapy could improve outcome, and this trial will compare the effect of two different drugs with a placebo on outcome of surgically treated dogs."

According to Dr. Olby, the medications being investigated for use as adjuncts to surgery are methylprednisolone sodium succinate (MPSS) and polyethylene glycol (PEG). MPSS has demonstrated small benefits in human clinical trials, but these trials are controversial and many clinicians question their results. Moreover, MPSS can cause side effects such as gastrointestinal hemorrhage and increased incidence of infections. Limited experience with PEG suggests the drug is safe and while a preliminary trial in dogs suggested that it was beneficial it has not been evaluated in a blinded, prospective study so its efficacy is unclear at this time.

"This clinical trial will compare the use of MPSS, PEG, and saline placebo as adjunctive treatment to surgical decompression of the spinal cord," says Dr. Olby. "The data generated will represent the first objective information on the medical management of acute disc herniations in paraplegic dogs. We hope to resolve the controversies surrounding the medical treatment of this common disease and to improve the outcome of the group of patients that currently remain paralyzed."

Funded by the Morris Animal Health Foundation, the study involves 12 veterinary neurology centers from throughout the U.S. that are involved in recruiting 180 dogs to receive one of the three possible therapies (MPSS, PEG, or placebo). To be considered as a participant, patients must have recent onset of the most severe grade of injury—paralysis with no sensation in the hind limbs of no more than 24 hours duration.

Please see www.cvm.ncsu.edu/vth/clinical_services/neuro/acute_disc.html for more information on the clinical trial, selection criteria, benefits to patients and their owners, and to find contact information for the investigators.

Participating medical centers include:

North Carolina State University College of Veterinary Medicine;
University of Georgia College of Veterinary Medicine;
University of Tennessee College of Veterinary Medicine;
University of Pennsylvania School of Veterinary Medicine;
University of Missouri-Columbia College of Veterinary Medicine;
Iowa State University College of Veterinary Medicine;
Carolina Veterinary Specialists Medical Center of Charlotte, NC;
Veterinary Specialty Hospital, San Diego, CA.;
Northwest Veterinary Specialists, Clackamas, OR;
Gulf Coast Veterinary Specialists, Houston, TX;
Dogs and Cats Veterinary Referral, Bowie, MD;
Animal Specialty Clinic, Yonkers, NY.;
Bush Veterinary Neurology Services, Leesburg, VA.

Dr. Michael DeBakey Awarded Congressional Gold Medal

The medal, the highest honor bestowed on a civilian, was commissioned after both the US Senate and US House of Representatives approved legislation supporting the award for the pioneering heart surgeon. President Bush signed the final bill last October.

"Dr. DeBakey has an impressive résumé, but his truest legacy is not inscribed on a medal or etched into stone. It is written on the human heart," President Bush said during the ceremony. "His legacy is the unlost hours with family and friends who are still with us because of his healing touch. His legacy is grandparents who lived to see their grandchildren. His legacy is holding the fragile and sacred gift of human life in his hands -- and returning it unbroken."

Dr. Michael E. DeBakey, long-time chairman of the board of the Foundation for Biomedical Research, is the chancellor emeritus and Olga Keith Wiess Professor of Surgery in the Michael E. DeBakey Department of Surgery and director of the DeBakey Heart Center at Baylor College of Medicine in Houston, Texas.

While still studying medicine, he developed the roller pump which became an essential component of the heart-lung machine. In 1942, Dr. DeBakey was assigned to the U. S. Surgeon General's Office and rose to the rank of Colonel and Chief of the Surgical Consultants Division. Three years later, he was awarded the Legion of Merit. In the early 1950s, Dr. DeBakey pioneered developments for cardiac bypass surgery. He performed the first successful removal of a blockage in a carotid artery in 1953 and the first patch-graft angioplasty in 1956. Dr. DeBakey was the first surgeon to perform a successful aorto-coronary artery bypass, and the first to successfully use an artificial heart.

Dr. DeBakey is this country's most honored physician. He is a recipient of the prestigious Lasker Award for Research, the AMA Distinguished Service Award, the Presidential Medal of Freedom with Distinction, the National Medal of Science, the Eleanor Roosevelt Humanities Award, and the United Nations' Lifetime Achievement Award. He has been inducted into the Health Care Hall of Fame and named a "Living Legend" by the Library of Congress. NASA has honored Dr. DeBakey with the Commercial Invention of the Year Award. He is a recipient of the Gold Hippocrates International Award and has been nominated for the Congressional Gold Medal. Much of Dr. DeBakey's success can be directly attributed to his work with the animal model. *Sources: AP newswire; Foundation for Biomedical Research*

UNC: From PETA Target to Home of Nobel Prize Winner

Chapel Hill. Dr. Oliver Smithies, Excellence professor of pathology and laboratory medicine at the University of North Carolina at Chapel Hill School of Medicine, was a co-recipient of the 2007 Nobel Prize in physiology or medicine.

Mario R. Capecchi of the University of Utah's Howard Hughes Medical Institute and Sir Martin J. Evans of the United Kingdom, shared the Nobel Prize "for their discoveries of principles for introducing specific gene modifications in mice by the use of embryonic stem cells."

The achievement marks the pinnacle of a scientific career for Smithies, a UNC faculty member for 19 years, containing numerous honors and two major innovations that have fundamentally changed the science of genetic medicine and laid the foundation for today's research into gene therapy. Smithies is the first full-time UNC faculty member to win a Nobel Prize.

In the mid-1980s, while at the University of Wisconsin at Madison, Smithies co-discovered a technique to introduce DNA material in cells, replicated a natural process called homologous DNA recombination. He thought that genetic disorders could be treated by correcting mutations in bone marrow cells, or stem cells. This "gene targeting" led to the creation of transgenic mice, or "designer mice," that replicated human disease. Smithies' lab produced the first animal model of cystic fibrosis, a disease caused by one defective gene, and also studied high blood pressure, atherosclerosis and other diseases.

This method also enabled scientists to study specific genes by creating "knock-out mice." By targeting and removing, or knocking out, a specific gene, researchers can find out what happens when it's missing. Smithies has used the analogy of removing a steering wheel from a car; without it you soon find out why it has a steering wheel. Now this research method is commonplace in biomedical research and has been the basis for thousands of published papers.

According to the Nobel committee, "gene targeting in mice has pervaded all fields of biomedicine. Its impact on the understanding of gene function and its benefits to mankind will continue to increase over many years to come."

In a recent speaking engagement Smithies said, "The future of the life sciences industry depends on our ability to continue to support its research and educate our citizens about the public health benefits of its continued development."

The PETA attack

Three years earlier UNC-Chapel Hill had been the target of an undercover PETA investigation. PETA has a long history of sending their believers into the workplace and laboratories as spies, often manipulating videotape to "document" alleged abuse. In 2003 a PETA disciple (KT), converted to animal rights activism after attending Animal Rights Conference 2001, applied and was hired by UNC as a Laboratory Animal Technician. KT's job was to work with rats and mice and perform husbandry duties, such as providing the animals with food, water, and clean cages, and observing them for signs of illness and bringing any concerns to the vet staff.

On May 12, 2004 PETA publicly announced that it would file a complaint against UNC-Chapel Hill for alleged violations of standards in the care and use of laboratory animals. The complaint was filed with the Office of Laboratory Animal Welfare (OLAW) of the National Institutes of Health. PETA's goal was to interrupt research funding and/or have the animal facilities closed. PETA claims to choose which facilities are investigated based on the number of animals used, trying to expose larger, more prestigious, most well-known facilities.

In an interview, KT stated, " ….all of the industries that exploit animals are bad in their own ways. Suffering for animals in laboratories is oftentimes more "institutional" than the overt abuse and cruelty that we see for farmed animals." It seems fair to assume that KT predetermined she would find abusive situations to document for PETA. That point became very clear during interviews with researchers, veterinarians, and other husbandry workers by an independent review committee. Staff members recalled trying to teach KT the difference between rodents exhibiting real illness and those that were, for instance, lethargic because of a painless, inherited condition.

Two independent review teams arrived at the University in rapid succession. The first was a panel of three independent, nationally recognized experts in animal care, who spent weeks reviewing records and then came to campus for inspections and interviews. While a few policy and procedure infractions were noted, none involved deliberate cruelty or wanton disregard for an animal's suffering.

One month after the first review team left, a second arrived on campus. A panel of reviewers from Association for Assessment and Accreditation of Laboratory Animal Care (AAALAC) spent several days on campus in July, putting animal-care personnel through the wringer all over again. This time, the focus was less on organizational deficiencies and more on the day-to-day details of animal care. In November, AAALAC renewed the university's accreditation.

In its findings OLAW stated it was not able to sustain PETA's allegations of inappropriate transfers of animals between investigators or intentional overcrowding to avoid costs, or that sick animals were hidden to avoid treating them. In addition, there was no evidence to support contentions of failures to exercise appropriate veterinary judgment or provide care for certain sentinel animals.

In their official response to the allegations, UNC stated:

- A PETA activist working in one of our animal facilities violated university rules with the unauthorized videotaping of animals and staff. Selectively edited videotape taken over the course of many months can easily be used to misrepresent the quality of our program, making isolated incidents seem part of a pattern that does not in fact exist. We also have reason to believe that some of the videotaped images may have been staged.

- UNC-Chapel Hill has an excellent lab-animal program rigorously inspected and fully accredited by the Association for Assessment and Accreditation of Laboratory Animal Care (AAALAC). UNC has expended thousands of hours of staff and faculty time to comply with strict standards recommended by OLAW and AAALAC. As a result, we have created a model program for animal care and use.

- Our animal-husbandry workers inspect the animal rooms daily and refer cases to our veterinary staff for prompt treatment. Regular inspections by internal and external reviewers ensure that this system is working effectively.

- In summary, we believe that the PETA complaint represents harassment designed to cripple animal research. If OLAW elects to reopen an investigation of UNC on PETA's say-so alone, it will set a dangerous precedent that will jeopardize the future of biomedical research, not only at UNC but across the nation.

- Our research advances the knowledge and treatment of human diseases such as cystic fibrosis, cancer, and cardiovascular disease. Much of this research is based on the use of animal models that simulate human disease.

North Carolina and the entire field of biomedical research are indeed fortunate that PETA failed in its mission to sabotage UNC's animal facilities and valuable programs.

Sources: UNC press releases; UNC Response to PETA; PETA website

In Their Own Words: From leaders in the animal rights movement.

Do you know the difference between animal rights and animal welfare?

"The law review article I wrote was about animals' legal rights and suggested that we could remove animals from the property status, elevating them to the level of human incompetents who require guardianships." ***Joyce Tishchler, Animal Legal Defense Fund (ALDF). Voiceless, August 2005***

"Six million Jews died in concentration camps, but six billion broiler chickens will die this year in slaughter houses." ***Ingrid Newkirk, President, PETA, The Washington Post, November 13, 1983.***

"The optimum human population of earth is zero." ***Dave Foreman, Earth First!***

"Human beings, as a species, have no more value than slugs." ***John Davis, editor of Earth First! Journal***

"I hope that fathers accidentally shoot their sons on hunting excursions, while carnivores suffer heart attacks that kill them slowly." ***Gary Yourofsky, Special Editorial: Animal Rights & Ethical Vegans, University of Southern Indiana newspaper, 1/24/2008***

"Christianity is our foe. If animal rights is to succeed, we must destroy the Judeo-Christian Religious tradition." ***Peter Singer, author of Animal Liberation***

Michael W. Fox, vice-president of the Humane Society, said that, "to call an animal with whom you share your life a 'pet,' is reminiscent of men's magazines where you (a figure of speech, don't take it personally) have the Pet of the Month." It is supposed that the continued use of the word "pet" to designate dogs or cats threatens to reduce their level of respect to the current status of twentieth century North American women. Now that's radical. ***The McGill Red Herring***

"[Biomedical researchers] are up on a pedestal, but we're whacking away at the base of that pedestal, and it's going to fall." ***John McArdle, Humane Society of the United States***

"We do not have the right to use animals for any real or perceived need, whether it be food, clothing, entertainment, medical issues." ***Janine Motta, treasurer of the New Jersey Animal Rights Alliance; Asbury Park Press***

Protecting your right to responsibly own and breed animals.

Join NCRAOA. See our home page for membership information and application

For more information on animal health, training, reports on pet issues, animal sheltering, or to learn the difference between animal welfare and animal rights – visit our website at www.ncraoa.com

North Carolina Responsible Animal Owners Alliance, Inc. (NCRAOA) is a statewide organization of animal owners and professionals dedicated to animal welfare, responsible animal ownership, and maintaining the rights of responsible citizens to breed and own animals. NCRAOA, a 501(c)3 organization, provides education and information to the public and supports reasonable and humane animal welfare laws.