

ETHICAL CONSIDERATIONS IN CANINE REPRODUCTIVE PRACTICE

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Ethics can be defined as the code of conduct for a group. An individual may have his / her own interpretation of what constitutes right or wrong behavior, his / her own individual ethos. However, the group defines ethical behavior in a field such as veterinary medicine. The AVMA recommends that professional associations of veterinarians should adopt the AVMA Principles of Veterinary Medical Ethics or a similar code, and each association should establish an active committee on ethics. Different segments and specialties within the veterinary community may have differing views regarding what is ethical in the practice of veterinary medicine. This occurs quite frequently in the discussion of canine reproduction. A recent discussion on the Veterinary Information Network concerning ethics included comments such as these: "I do not really understand how any veterinarian in their right mind can support or participate in breeding cats or dogs." Another was quoted saying, "How can any veterinarian ethically breed or support breeders?" This was followed by, "I hear vets recommend breeds and see vets support the stuff that breeders do, and I just don't get it. I, too, do not support breeders as clients." And finally: "I have always found it funny that in a profession where a portion of our oath is to do no harm, we continue to support breeding of purebreds." With such varied opinions within the profession, how do veterinarians involved in small animal reproduction obtain guidance in ethical behavior as it relates to breeding? What group defines the ethics for such an individual? Should reproductive or breeding ethics be defined by local and state associations or by specialty boards and groups? The AVMA Judicial Council states in its 1997 revision that the Principles of Veterinary Medical Ethics are purposely constructed in a general and broad manner, but veterinarians who accept the Golden Rule as a guide for general conduct and make a reasonable effort to abide by the Principles of Veterinary Medical Ethics in professional life will have little difficulty with ethics. It also encourages veterinary associations to include discussions on professional ethics in their meetings. It is in light of these growing debates and the scarcity of ethical publications pertaining specifically to small animal reproduction that this discussion is presented.

Small animal theriogenologists face an increasing number of ethical decisions. This challenge is fueled by an increase in the scope of reproductive capabilities along with a heightened demand for accountability in dog breeding. It has been suggested that small animal theriogenologists offer two types of reproductive service to clients. One type is the encouraging of neutering of animals and the second to expand services to owners of breeding animals¹. In the latter, the veterinarian and the breeder work in a partnership role with the goal being the betterment of the breed. The first type of service is being offered at the majority of small animal practices in the United States and Canada. Many of these veterinarians express little desire to make available the second type of expanded reproductive services. They are being exclusively offered by a steadily growing number of practices and theriogenologists scattered across the US and Canada. The ethical principles of those offering advanced reproductive and breeder services may justifiably differ from veterinarians that choose not to offer such services. Without offering an apologetic diatribe, the attempt is herein made to describe some of the challenges faced by those practitioners. The ethical choice is all too often not clearly definable in these situations.

Past discussions of “breeding” ethics concentrated on subjects such as the breeding of animals with genetic defects and surgery performed to conceal such defects. Some aspects of the long accepted principles pertaining to those subjects are receiving new and justifiable scrutiny. Many defects can still not be clearly defined as genetic. As an example of change, The AKC in 1993 modified its rules regarding the exhibiting of dogs that have undergone surgical procedures. The surgical repair of umbilical hernias, cherry eyes and damaged cartilage is now acceptable procedure in conformation dogs. To the purist, could the removal of retained deciduous teeth be interpreted as concealing a genetic defect? Does the administration of thyroid supplement to a hypothyroid dog constitute deceptively concealing its natural condition in the show ring? Would a veterinarian be expected to recommend neutering these animals (as suggested by the AVMA ethical guidelines) when performing such procedures or treatments? These may be extreme examples, but they illustrate some of the “gray areas” and the confusion that can result.

Historically, genetic counseling has ranged from recommendations to simply “not repeat” a mating, to recommendations to eliminate all relatives of affected animals from the breeding pool. Neither of these two extremes serves the best long-term interest of breeds.⁴ In light of the expanding understanding of the canine genome, breeding recommendations based on genomic makeup are changing. Information available from genetic research will only be useful in improving canine health if veterinarians have the knowledge and skills to use it ethically and responsibly. There is not only great potential to improve overall canine health through genetic selection, but also the potential to do harm if we fail to maintain genetic diversity. Our profession must be in a position to correctly advise clients on the application of this information to individual dogs as well as to populations of dogs, and particularly purebred dogs.²

Many ethical dilemmas in reproductive practice arise as the result of our interactions with the breeder client. The motto of the responsible breeder of purebred dogs is “Breed to Improve.” Many individual breed clubs have enacted breeder codes of ethical behavior. Veterinarians should recommend review of and adherence to the appropriate breed club’s breeder code of ethics. Most of the clubs are endeavoring to assist in uncovering the genetic basis of the diseases affecting their breed. As this revolution in diagnostics unfolds it will become more recognized that every dog that carries a genetic defect need not be eliminated from the gene pool. These individuals may have many positive qualities. The rapid advances in genetics and genetic screening will enable us to ethically continue breeding many genetically “imperfect” dogs.² However, if the client is unwilling to take on the commitment of both time and finances necessary to test progeny, then the breeding of any affected animals and potential carriers must be discouraged.

Ethical considerations often directly involve the welfare of the patient. Veterinarians are encouraged to put the needs of the patient first. For example, what is the appropriate age to recommend cessation of breeding in the bitch? What factors should be considered? The list might include previous pregnancies, general health and breed. Should we consider the commitment of time and finances the breeders will be willing to make toward maintaining health in the event of emergency or complication? We should also consider such factors in justifying procedures such as the medical treatment of pyometra or other infertilities. It is our duty to ensure the welfare of the dog first and foremost.

Breeders may request euthanasia of healthy and adoptable purebred puppies possessing mild defects. They may simply wish to avoid the exposure of genetics faults in their lines. If the veterinarian assists in the placement of such puppies as pets in lieu of euthanasia, client confidentiality must ethically be maintained. Client/patient confidentiality issues often arise when dealing with clients who breed and show their pets. Veterinarians should train their staff regarding discussions that may be inappropriate with breeder clients. It may not be acceptable to expose what breeds within your own client base have hereditary hernias, murmurs or other specific defects commonly. Breeder clients should not be allowed access to sections of the veterinary hospital where confidential client information is written on a treatment board or cage card. Mistakes regarding client confidentiality can lead to lost trust, lost clients and possible legal action.

The veterinarian's responsibility does extend beyond the individual client or patient to society in general. Public health and pet overpopulation are issues that should play a major role in shaping the ethics for the group. This must be given due consideration when considering playing "matchmaker" for pet owners or backyard breeders looking for a mate for their beloved dog. It is vitally important that the veterinarian take time to educate and consult with the first time breeder, the potential "backyard" breeder or the local "puppy mill" regarding health and ethical issues. Advertising advanced reproductive services to the general public could influence public perception on topics such as pet overpopulation. Can a veterinarian legally or morally deny such services to a portion of the public toward which such advertising has been directed? Questions arise regarding the marketing of canine frozen semen. Would the distribution of a catalog of available sperm from certain breeds or stud dogs be appropriate? Requests have been made by overseas "importers" for the sale of unused, overstocked or available semen of certain breeds. Is any ethical dilemma created by these practices?

Many breeders, trainers and handlers maintain large medicine chests for their dogs stocked with prescription products for the treatment of diarrhea, lameness, infection and other common conditions. Veterinarians should not supply prescription medication in bulk in the absence of a current examination and diagnosis or without a valid veterinarian-client-patient relationship. Antibiotic resistance is an expanding problem that is poorly understood by most breeder clients. In the interest of both animal and public health we must educate clients regarding administration of the complete course of antibiotics when prescribed. Antibiotic resistance can result from misuse/overuse. Antibiotic leftovers tend to accumulate and be used in "emergencies" when appropriate veterinary care should be sought.

Some of our interactions with colleagues require special consideration. The shipping of inferior quality semen without making either the bitch owner or veterinarian aware is an example. Veterinarians should make every effort to ensure that the recipient is aware of the quality of the semen. If the client requests shipment without notification should the veterinarian comply? How much history can the veterinarian reveal regarding a stud's previous collections or infertility treatments without violating client confidentiality? How should the receiving veterinarian handle the situation when semen arrives with extremely low sperm count or morphologic quality? If a shipment should arrive that shows evidence of damaged semen as the result of improper packaging, what course should be undertaken? Reproductive referrals and

consultations also demand special consideration. Occasionally these cases may show evidence of “poor quality medicine” that has endangered the health or safety of the individual. The AVMA recommends that where there is clear evidence of such treatment, there is a responsibility on the second veterinarian’s part to report the matter.³ Other questions arise when a referral is received for a specific procedure or treatment and it is the opinion of the receiving veterinarian that the dog or dogs presented should not be bred.

Honesty is paramount in our interactions with regulatory and government agencies. Veterinarians may be asked by unscrupulous parties to alter age, breed, weight or date of examination for certificates of export or other official documents. Properly completing all government, air shipment, DNA, OFA and other certificates and registration documents maintains the professional integrity of our entire group and profession. Veterinarians should familiarize themselves with the preparation and requirements for proper shipping and handling of dangerous goods such as liquid nitrogen containers and vapor shippers. Attempts to ship dry ice or liquid nitrogen in packages improperly packaged or labeled is illegal and reflects poorly on our profession.

Many breed clubs have established a code of ethics for their breeders. These codes give guidelines in general terms for breeding dogs and conducting business with the public. We as veterinarians should also establish and accept a code of ethics for breeding animals and conducting our business. The Society for Theriogenology should take a leading role in this endeavor. The Society and each of its members should endeavor to improve their knowledge and understanding of how the principles of veterinary medical ethics relate to them. Through interactions and discussion with veterinary associations, breeder groups, dog registries and humane organizations, we as theriogenologists can work toward the improvement of the health of the individual animals and breeds with which we work.

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2. Meyers-Wallen VN: Ethics and genetic selection in purebred dogs. *Reprod Domest Anim* 38[1]: 73-6, 2003
3. Principles of Veterinary Medical Ethics. Opinions and Reports of the Judicial Council, 1997 Revision.
4. Bell J: Common Genetic Disorders: Diagnosis & Counseling. Western Veterinary Conference 2002.