nation when he talks of medical advances made without the use of experimental animals. He would have to ignore that the theory, that cowpox lesions contained something that would protect a person from getting smallpox if rubbed into scarified skin, had to be substantiated by inoculation of experimental beings—human beings.

Animal rights activists make claims that cell cultures can take the place of experimental animals. Such a claim ignores the fact that cell cultures derive from organs taken from animals. Thus, from Dr. Buyukmihci’s moral viewpoint, it would seem that the use of cell cultures is really no different from the medical researchers who, shortly after the Roe versus Wade opinion, had a row of live heads, taken from aborted babies, with the great vessels intubated to maintain blood circulation by a pump.

Another claim of animal rights activists is that animal experimentation for the safety testing of drugs can be replaced by using a computer model. This might work if we knew all the variables found in the compound or mixture being tested. Since the test is really to detect whether something unknown and unexpected, such as strychnine, might be present, we must remember the computer adage: “GI-GO.”

It is hard to imagine how antibody-containing biological products could be produced without at least some damage to the source animal. Nearctic Crotalidae antivenin is a case in point. This is made by injecting horses with gradually increasing doses of mixed venoms of the Nearctic Crotalidae (to which most North American poisonous snakes belong). The venom must be very painful to the horses. The most docile of horses, after getting part way through their series of venom injections, become very vicious. The veterinarian walks in the middle of the aisle in the “Snake” barn, swivelling his eyes to detect the pair of heels coming at his head. Yet without these painful injections and the antivenin produced as a result, the person suffering from snakebite would have to live or die according to his/her own resources.

Another example is botulism antiserum, made by injecting preparations of Clostridium botulinum. These usually produce deep suppurating lesions. The antiserum helps save the lives of many people.

Another clostridial disease, gas angina, is no longer treated with antiserum. Antibiotics and debridement are used. The efficacy of antibiotics is determined with animal experimentation. In vitro antibiotic sensitivity testing tells how sensitive the Clostridium growing on the culture plate is to the particular antibiotic. It does not tell how effective the drug is in vivo.

Real veterinarians realize that their duty is to human beings, through care of animals or care of animal products. It is doubtful that many veterinarians enjoy inflicting pain on animals. We must admit, it is probably true that there are a few veterinarians who build up their egos as they do research without considering that their research may equate to torture. The existence of such evil does not justify animal activists’ interference with the scientific efforts of countless other researchers.

W. J. Mathey, VMD, PhD
Nipomo, Calif

Dr. Heerens responds:
I can see by the responses to my letter that the phrase, “... takes their (animals) natural lifestyle into consideration...” has been cause for misinterpretation. I am sure, however, that there must be a 20th-century middleground between wandering in the jungle and spending a lifetime alone in a cage, and that an intelligent person can come to a sensible conclusion in this matter.

It is difficult to believe that Dr. Mathey can—as he claims—have feeling for animals and is “sad” when he has to kill them without making improving their lot one of his priorities. The conditions he describes make it very clear that more intensive searches for better alternatives to animal research and more emphasis on finding ways to alleviate suffering of the animals we use are extremely urgent.

Yes, Dr. Mathey, the real world is cruel, but that is no excuse for not trying to improve it.

Sylvia Heerens DVM
Berkeley Heights, NJ

Dr. Buyukmihci responds:
Dr. Mathey finds it “hard to imagine” how some of the medical advances he mentions in his letter could have come about without using nonhuman animals. I wonder whether he realizes just how capable and innovative are human beings? If he had been alive in 600 AD, he would have found it “hard to imagine” that some of us would be walking on the moon or that there would be computers and printers that could format and print a book in minutes, compared with the months it painstakingly took by hand, and so forth. I repeat: no mortal could possibly know that any advance that involved nonhuman animals could not have come about without them or that advances could not continue to come about if we discontinued using them. Moreover, one could argue that human beings could be used instead, and therein lies the crux of my argument, apparently completely missed by Dr. Mathey. If it would be unethical to use human beings
in those circumstances, then the same objective criteria for why it is unethical could and should be applied to all animals. Dr. Mathey provides no arguments for why human beings should be considered morally superior to nonhuman beings.

I am not sure why Dr. Mathey brought up the issue of computers as alternatives, because I did not comment on this, nor would I believe that they could be an alternative to a living system. As for cell cultures, although Dr. Mathey is correct about the need for tissue from living animals, he appears to be unaware that cells and tissue could be and are taken from human and veterinary patients. There simply is no need to kill healthy individuals solely for the purpose of obtaining this material. With respect to his verbiage on Roe versus Wade, I have no idea about what he was talking.

It is sad that Dr. Mathey appears to consider criticism of nonhuman animal use as “interference” and “offensive.” As a scientist and humanist, I value criticism and challenge. Not only is this healthy, it also ensures that progress will be made by forcing people to reevaluate their ideas and methods. It is unlikely that progress in eliminating human oppression, for example, would get very far without challenges to the status quo.

Finally, implicit in Dr. Mathey’s comments is the notion that human beings are somehow superior to other animals. In many categories, this unquestionably is true. When it comes to compassion and caring for others, human and nonhuman beings, we appear to be without equal in potential. If, however, we consider ourselves to be so much better than others because of this and other traits, we behave in a most despicable and self-degrading manner by subjugating and destroying those “below” us.

Nedim C. Buyukmihci, VMD
Davis, Calif

Feral cats

In reference to the special report on neutering of feral cats as an alternative to eradication (JAVMA, Aug 1, 1993, pp 449-452), I am concerned that Drs. Zaunbrecher and Smith accepted a feral cat population of approximately 40 animals as an unavoidable but minor nuisance for their facility. After they gave the cats a set of vaccinations and neutered them, the cats were re-released into the environment, and the doctors believed that they did a good thing.

Unfortunately, feral cats are not a benign entity. Many parts of the world have severe ecological disturbances caused by feral cats eating wild animals, especially birds. Islands such as the Galapagos are especially sensitive. Even in the United States, however, the Audubon Society has noted a decrease in native song birds that it has attributed, at least in part, to predation by cats.

What of the public health significance of 40 feral cats around patients with compromised immune systems, such as the elderly in nursing homes? Forty cats make a lot of fecal waste, scattered all around the facility. Since they are hunting, toxoplasmosis is a real consideration.

Are once-a-lifetime vaccinations of any value? There was no mention of annual re-trapping of the feral cats to vaccinate them again. Isn’t this population of cats being set up for an epidemic of disease, such as feline panleukopenia, down the road? And if a cat brings a bat into the nursing home, will a rabies vaccination given ten years before make this cat safe to have around the patients?

This situation sounds like the result of problem clients that each veterinary practice occasionally sees. Someone with a kind heart takes in more pets than can reasonably be handled. Other than a little food, the pets get sporadic care. Eventually, all the pets fight among themselves and catch disease, after which the owner is bewildered when arrested for negligence by a humane officer. This sort of care is not something that I think we should promote.

I am also a little concerned that the authors made a table of costs without any consideration to the veterinarian’s time, other than a passing remark in the text. It makes it look like spaying or neutering cats should cost only $8.75 and $5.15, respectively. People will then expect us to perform these services for that, or little more. (After all, our time is of so little importance that it wasn’t mentioned.) If this report is to give any guidance to facilities for their feral animal problems, then a realistic estimate of the costs should be made, allowing for the veterinarian’s time and overhead.

But I recognize the authors’ quandary. The situation of feral cats is a complex one, especially when the patients of the facility are thwarting removal of the cats. With the health problems these cats were facing, any action would seem better than none. Also, the authors make the extremely important point that pets are extremely valuable to the mental well-being of patients in institutions. I helped get a dog established in a local nursing home several years back. When we brought the dog into the facility, the patients lit up like someone turned on a switch! I commend the authors for trying to improve the patients’ lives through pets.

An alternative suggestion might be to establish several