

Practitioners need to contribute to accumulation of evidence base...

"TOO busy" is no longer an acceptable excuse for practitioners to avoid having to make a personal contribution to the accumulation of evidence-based veterinary medicine, BVA members were told at their association's annual congress in London.

Professor Lance Lanyon, former principal of the RVC, argued that there was a need for a long-term cultural shift in the way first opinion practice is carried out to ensure that it can provide the data needed by clinical researchers.

In the debate, *Evidence-based medicine – can the profession deliver?*, Prof. Lanyon acknowledged the major barriers in the way for practitioners wanting to become involved in any major clinical investigation. While laboratory-based research can secure a source of funding and prestige for the institution concerned, that is not the case for practice-based research.

Indeed, "Such work can interfere with the smooth running of the business, is regarded by some colleagues as unethical, by the public as unjustifiable, by animal welfare charities as unsupportable and by the state as illegal," he said.

For earlier generations of practitioners, it may have been reasonable to claim that they had insufficient time for the labour-intensive process of extracting worthwhile data from written clinical notes.

But now case data can be stored on standard, hierarchical electronic templates that are amenable to interrogation and used both for research and clinical audit, and so all practitioners have a responsibility to make this available for analysis by others, he said.

Prof. Lanyon believed that responsibility for creating the conditions for these changes lay with the RCVS. The College needed to clarify the status of practice-based research under the Animals Scientific Procedures Act and work with the Home Office to ensure that there is a suitable system for obtaining ethical approval for investigations involving live pet animals.

It also had to give further guidance to the profession and ensure that the necessary skills to conduct practice-based research were developed as a

Day 1 skill for new graduates.

Meanwhile, the UK veterinary schools would need to ensure that undergraduates received that training. They must also take the lead role in developing the standard operating procedures and the software needed to create a universal system for coding clinical data. This was needed to allow each clinic to effectively analyse its own case data and provide them in a form useable in multi-centre research studies.

Another major barrier to be overcome is the "unhelpful opposition" of the animal welfare charities to allowing experimental procedures on pet animals. These are "generally fairly trivial procedures which may not be of benefit to the individual animal but may be necessary to improve the welfare of the wide population", he noted. The charities should take responsibility for explaining this to the general public and they can also play a role in financially supporting that research.

Professional associations like the BVA will also have a part in ensuring that the profession is able to contribute fully to developing the evidence-based model for clinical practice. Those bodies should be able to provide logistical support to their membership as well as the resources

needed to monitor progress and ensure that the profession delivers on its responsibilities, he said.

Prof. Lanyon had begun his presentation with an insight into the attitudes towards the British veterinary profession in its infancy, following the foundation of the RVC in 1791. At that time equine surgery was largely the province of the farriery profession, which saw the production of veterinary graduates as a threat to their livelihoods.

"They saw the veterinary profession as over-educated, middle-class popinjays who would use their position in society to do unnecessary procedures for the enrichment of themselves and to satisfy the vanity of their clients.

"Now, computerised case records have given the opportunity to every member of the profession to contribute to the ongoing progress in veterinary knowledge and enabled us

to use the power of numbers to reveal some of the nuances of treatment and outcomes that are the whole basis of clinical veterinary practice. If we dodge that challenge, then the farriers would have been right."

In questions, practitioners raised the issue of how they will find the time to keep abreast of the huge volume of literature being produced by veterinary researchers.

Marnie Brennan, a lecturer in epidemiology at the Centre for Evidence-based Veterinary Medicine at the University of Nottingham, assured practitioner colleagues that they would receive help from the academic arm of the profession.



Professor Lance Lanyon.

She recognised that traditional methods for disseminating information could be inadequate – indeed, it could take up to 13 years for best practice approaches to emerge from an academic institution and be published in the pages of a standard textbook. However, resources such as her department's *Best Bets for Vets* website (www.bestbetsforvets.org) provides convenient access to

summaries of current knowledge on common clinical problems for busy practitioners.

Audience members also noted that the system envisaged by Prof. Lanyon would generate significant costs, so who was expected to pay for it? He argued that it would be the ordinary clients of veterinary practice that would ultimately foot the bill.

"But what this amounts to is good veterinary practice and that is what they pay for at the moment."

VMD's restrictions 'unnecessary'

CLIENTS trust their veterinary surgeon to choose the appropriate medicine to treat their animal – so why can't the regulatory authorities show the same confidence in the profession's training and judgement?

Iain Richards, a past president of the SPVS, posed the question in his presentation at the BVA congress session "Trust me, I'm a vet". He argued that the Veterinary Medicines Directorate placed restrictions on the practitioner's choice of treatments which were unnecessary and contrary to the best interests of the patient and its owner.

Mr Richards argued that the VMD's interpretation of European rules on prescribing veterinary medicines were having "a huge impact on professional life" and the situation was likely to get worse. It could now be considered a criminal offence for a practitioner to use a medication that was not authorised for use in that particular species

or clinical condition.

He cited examples where the cascade principle or the guidance provided in product data sheets resulted in sub-optimal care or financially wasteful decisions. For example, the use of certain non-steroidal anti-inflammatory products is contraindicated according to the product literature in pregnant or lactating bitches.

But that is not because the product is dangerous, simply that the manufacturer hasn't chosen to test it in that group on economic grounds, he said. "Why not say this product has not been tested in bitches and with that caveat practitioners should be able to use their professional judgement?"

In human medicine, he said the manufacturer was not allowed to justify warnings to prevent a product being used in particular groups when the necessary research hadn't been carried out. This was a paradox that his own research efforts had not been



Iain Richards.

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able to explain, and he is still uncertain whether it was created by the European authorities or the VMD.

Another example involved an unnamed antibiotic product which was available in two strengths, only one of which was authorised for use in a particular species. Practitioners were forced to use the higher strength product available only in a bottle far larger than needed for that animal while the rest was unlikely to be used within the 28-day period set for broached products.

Practitioners might be tempted to make a pragmatic decision to save costs for the owners and themselves by using the lower strength product but that would put them at risk of legal action, he warned.

In other situations, the current rules placed a practitioner in danger of physical harm. He cited another unnamed product which is only licensed for use in animals up to 150kg.

"This means that if you want to treat a shire horse or a large bull then you may have to give them painful injections in six different places – and that isn't something that I would recommend doing."

This amounted to a lack of trust in the practitioner's professional judgement which Mr Richards said was very frustrating. That is particularly so when the VMD's opinion of practitioners appears to be shared by the profession's own regulatory body, the RCVS.

He pointed out the latest advice in

the Royal College's code of professional conduct specifically warns against the off-label use of veterinary medicines. This contrasts with the situation for human doctors who are told by the General Medical Council and the Medicines and Healthcare Products Regulatory Agency that off-label use is permitted when it is in the best interests of the patient, he said.

Earlier, the RCVS chief executive Nick Stace had explained the efforts being made by the College to maintain the animal-owning public's trust in the profession.

However, during questions, a BVA past president, David Tyson, challenged the direction that the current leadership is taking the profession. He felt that on issues such as antibiotic use in food animals and the control of bovine TB, the profession was out of step with the public mood and risked antagonising a lot of people.

Meanwhile, the RCVS's promotion of evidence-based medicine was likely to result in practitioners feeling that they have to provide costly gold standard diagnosis and treatment: "In 90% of the time it simply isn't needed," he said.

Mr Stace responded that the RCVS was trying to encourage the profession to adopt an approach that is established in human medicine because it has been shown to provide the best standards of care. "That is much more likely to instil greater trust in the profession than it is to erode it."

Legal sanctions needed for pet care

PERSUASION alone will not make people treat their pets properly: it has to be supported by the threat of prosecution, the Earl of Selborne, a Conservative peer, told the BVA congress.

He said the Coalition government was mistaken in believing that it could create a more responsible society without resorting to legislation.

An honorary associate of the BVA, Lord Selborne served on the House of Lords science and technology committee which examined the evidence on the use of "nudge interventions" to influence public attitudes and achieve policy objectives.

In its July 2011 report *Behaviour Change*, the committee found that while a mixture of non-regulatory interventions, such as tax breaks, can create the conditions for changing public attitudes, governments also needed to use traditional legal sanctions.

In the Congress session on *Getting*

clients to behave, he said that the Coalition had entered office hoping to develop non-bureaucratic solutions to public health problems such as reducing obesity and stopping smoking. But the lessons they have learned could equally be applied to the issues raised by irresponsible pet ownership.

So while the veterinary profession, welfare charities and others may try to improve standards of care through education, they are only likely to have limited success. "Quite frankly, it will always be more effective when backed up by legislation," he said.

Nicola Martin, head of pet health and welfare [sic] at the PDSA, highlighted the scale of the challenge, revealed by a series of surveys that the charity has conducted into public understanding of the needs of their pets. This research has shown that "stressed, lonely, bored, overweight, aggressive and misunderstood" describes the current state of our pet

nation", she said.

Awareness of the physiological and psychological needs of their animals among UK pet owners is disappointing. Far too many dogs receive too much of the wrong sorts of food, leading to an epidemic of obesity. So 2.5 million dogs are fed mainly on leftovers and owners will continue to give unnecessary treats to overweight dogs because they believe it will make the animal happy and more loving.

A particularly alarming finding was the lack of planning that went into the decision to acquire an animal: "People will often spend more time on choosing their Christmas presents," she said. In 26% of cases the pet owner will not carry out any research on how they should look after an animal and a mere 4% will go to their vet for advice before obtaining the pet.

Nevertheless, the veterinary profession and its allies must continue trying to get the messages of responsible pet ownership across to their clients and must be prepared to tailor those messages to the individual client, she said.



The Earl of Selborne.

Others warned, however, that presenting clients with conflicting messages will undermine those efforts. Julian Marius believed that obesity will often result from clients feeding their pets according to the instructions on the product packaging. They make no allowance for all the extra calories that

the pet receives in treats and it is not in the interests of the manufacturer to discourage owners from overfeeding the animal, he said.

Session chairman and BVA president Robin Hargreaves denied that petfood manufacturers would encourage behaviour that might lead to a serious welfare problem like obesity. He praised the efforts of the industry trade association in organising the "Weigh in Wednesday" campaign aimed at encouraging pet owners to take their animals to their veterinary practice for nutritional advice.

He believed that there has been a shift in attitudes among the veterinary bodies, welfare charities and industry which now recognised the need to work together in driving home the messages on responsible pet care.

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