Results of a random mini-survey of Adelaide
veterinary surgeries' vaccination practice for adult dogs

Elizabeth Hart

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<th>Summary of survey results:</th>
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<td>On Friday 18 September 2009, one month after the announcement of the Australian Veterinary Association’s new dog and cat vaccination policy, I rang ten veterinary surgeries, randomly picked from the Adelaide Yellow Pages, to check the reaction to my enquiry about revaccination for my six year old dog. I advised that my dog had been vaccinated (i.e. with core MLV vaccines for parvovirus, distemper virus and adenovirus), and that I wasn’t sure when she had her last one, <strong>but it was within the last two years</strong>.</td>
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I spoke to nine veterinary receptionists and one vet. As veterinary receptionists are the frontline in veterinary surgeries, it is to be expected they will be familiar with their surgery’s vaccination protocol.

**All ten people contacted initially recommended “annual” revaccination, i.e. a C5 (or C3) booster.**

When pressed, only two veterinary receptionists indicated their surgeries offered “triennial” revaccination, despite the fact that, according to the APVMA’s PUBCRIS, a so-called “triennial” vaccine was first registered in 2005, and another in 2006.

One of the people I spoke to was a vet. When I asked about “triennial” revaccination she responded she was “not convinced about the new vaccine, it hasn’t been around long enough etc”. I then referred to the 2003 AAHA guidelines, indicating that these vaccination guidelines had been around for six years. I suggested she was not giving pet owners the opportunity to make their own informed choice etc. She then responded “Sounds like you probably want to go someplace else, thanks” and hung up on me.

My research indicates that when a dog is successfully vaccinated as a puppy with the MLV core vaccines for parvovirus, distemper virus and adenovirus, it is immunised. It is my understanding from a careful reading of the scientific literature that the so-called “annual” and “triennial” vaccines are likely to provide long duration of immunity, probably lifelong. (See note/references at the end of this paper for further information).

It is unacceptable for veterinarians to dictate that pet owners have a medical intervention for their pets, such as vaccination, if this intervention has not been proven to be necessary for the animal. **Unnecessary vaccination is of no benefit to the animal and puts it at needless risk of an adverse reaction.**

The “annual” and “triennial” revaccination recommendations on vaccine product labels are manufacturers’ recommendations. The Australian Pesticides and Veterinary Medicines Authority advises that veterinarians are under no obligation to follow these recommendations. These recommendations conflict with information in the World Small Animal Veterinary Association (WSAVA) dog and cat vaccination guidelines, i.e. that “dogs that have responded to vaccination with MLV core vaccines maintain a solid immunity (immunological memory) for many years in the absence of any repeat vaccination”, and that duration of immunity after vaccination with MLV vaccines for parvovirus, distemper virus and adenovirus is **at least seven years**, based on challenge and serological studies.

Repeated annual or triennial revaccination with MLV core vaccines has not been proven to be necessary after successful puppy vaccination. **It remains a matter of serious concern that many veterinarians are still withholding vital information from pet owners’ consideration. They are not obtaining “informed consent” from pet owners before vaccinating their pets.**

This raises serious questions about ethical standards, professional responsibility and consumer protection.

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<th>Record of Contact with Veterinary Surgeries:</th>
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<tr>
<td>Note: Names and telephone numbers identifying the veterinary surgeries have been removed from this document, although I have retained a copy of this information for my records.</td>
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<th>Veterinary Surgery No. 1</th>
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<td>Spoke with the surgery receptionist.</td>
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The receptionist recommended “annual” revaccination – C5 booster. She advised me that if the dog hadn’t been vaccinated within the last year she would need to have a “special one”, i.e. a “puppy vaccination” with an intranasal component (for kennel cough). (Note: I had already mentioned my dog had been revaccinated within the last two years.)

“Triennial” revaccination was not mentioned…

I asked about “triennial” revaccination. She indicated that the surgery was still recommending “annual” revaccination, although she did allude to the new protocol. No “triennial” vaccines in stock.

Cost of “annual” vaccination – C5 booster: $82.50
Cost of “annual” vaccination – “special one” with intranasal: $88.50

**Veterinary Surgery No. 2**

Spoke with the surgery receptionist.

The receptionist recommended “annual” revaccination – C5 booster.

Cost of “annual” vaccination – C5 booster: $81.50

“Triennial” revaccination was not mentioned…

I asked about “triennial” revaccination. She said “Oh, OK, I think I’ve heard of it”. She went off to ask the vet and returned to advise they didn’t have any and didn’t know of any other surgery that did. She said “We’re not doing them at the moment….not sure if they’re fully approved”.

**Veterinary Surgery No. 3**

Spoke with the surgery receptionist.

The receptionist recommended “annual” revaccination – C5 booster. Also suggested a C3 booster.

Cost of “annual” vaccination – C5 booster: $75.00. C3 booster: $65.00.

“Triennial” revaccination was not mentioned…

I asked about “triennial” revaccination. She didn’t seem to know anything about it. She didn’t offer to go and check with the vet. She said “We still recommend “annual” vaccination”.

**Veterinary Surgery No. 4**

Spoke with the surgery receptionist.

The receptionist recommended “annual” revaccination – C5 booster.

Cost of “annual” vaccination – C5 booster: $75.00

“Triennial” revaccination was not mentioned…

I asked about “triennial” revaccination. She said “I’ve not heard of that”. I asked her to go and check with the vet. She returned to advise “We don’t use it here”.

**Veterinary Surgery No. 5**

Spoke with the surgery receptionist.

The receptionist recommended “annual” vaccination – C5 booster. Also suggested a C3 booster.

Cost of “annual” vaccination – C5 booster: $78.00. C3 booster: $66.00

“Triennial” revaccination was not mentioned…
I asked about “triennial” revaccination. She said “I haven’t heard of it”. I asked her to check with the vet. She returned to advise that they don’t stock it because it hasn’t got the kennel cough component, and that needs to be given every year.

I asked if they were a member of the Australian Veterinary Association. She checked and advised they were.

**Veterinary Surgery No. 6**

Spoke with the surgery receptionist.

The receptionist recommended a C5 booster.

Cost of “annual” vaccination and check-up – C5 booster: $77.55

“Triennial” revaccination was not mentioned…

I asked about “triennial” revaccination. She was most emphatic that they give “annual” vaccination as part of the annual check-up. They don’t stock the “triennial” vaccine because it doesn’t include the kennel cough component. I asked if they were a member of the Australian Veterinary Association, and she advised they were. I asked if she was aware of the new vaccination protocol but she did not seem to be. When I tried to raise the point that it has been recommended to reduce revaccination with the core vaccines due to the possibility of adverse reaction, and that the kennel cough vaccines could be given separately, she was again emphatic that they give the “annual” vaccination as part of the annual check-up.

**Veterinary Surgery No. 7**

Spoke with the surgery receptionist.

The receptionist recommended “annual” vaccination – C5 booster. Also suggested a C3 booster.

Cost of “annual” vaccination – C5 booster: $78.00. C3 booster: $76.00

“Triennial” revaccination was not mentioned…

I asked about “triennial” revaccination. She advised me that the surgery was sticking with “annual” vaccination because otherwise clients won’t come back for the yearly check-up. I went into more detail re the reasons why it is being recommended that revaccination be reduced, referring to the WSAVA guidelines etc; but I did not meet with a very satisfactory response. I asked if the vets/surgery are a member of the Australian Veterinary Association. She went off to check and advised me that they were and that every veterinary surgery had to be a member. I responded that the AVA had advised me that only 50-60% of vets were members of the AVA.

**Veterinary Surgery No. 8**

Spoke with the surgery receptionist.

The receptionist recommended “annual” revaccination – C5 booster. Also mentioned the special vaccination for dogs with questionable vaccination history, i.e. the intranasal component which means they don’t have to come back after four weeks. (Note: I had already mentioned my dog had been revaccinated within the last two years.)

Cost of “annual” vaccination and check-up – C5 booster: $98.00 (includes urine analysis).

“Triennial” revaccination was not mentioned…

I asked about “triennial” revaccination. She advised me yes, they do have that too. However, she mentioned that if I was not sure of my dog’s vaccination history, my dog might not be able to have that one, I would have to check with the vet.

I asked about the price of “triennial” revaccination – same price as C5 booster.
Spoke with the surgery receptionist.

The receptionist recommended “annual” revaccination - C5 booster.

Cost of “annual” vaccination and check-up – C5 booster: $82.50.

I was advised if my dog’s last vaccination was unknown, she might have to have the “puppy series”, i.e. come in for at least two boosters. (Note: I had already mentioned my dog had been revaccinated within the last two years.)

“Triennial” revaccination was not mentioned...

I asked about “triennial” revaccination. She advised me that yes they do recommend “triennial” revaccination – same price as a C5 booster. She advised me the annual kennel cough vaccination would cost $71.50.

I asked if the vets/surgery are a member of the Australian Veterinary Association but she wasn’t sure.

Spoke with the veterinarian. (Not identified as such at first, this became apparent later in the conversation.)

The veterinarian recommended “annual” revaccination – C5 booster. She also suggested that if the dog’s vaccination history was unknown it would need to have two vaccines. One vaccine might not be enough to mount an immune response. (Note: I had already mentioned my dog had been revaccinated within the last two years.)

“Triennial” revaccination was not mentioned.

I asked about “triennial” revaccination. The person on the phone then indicated that she was the vet in the surgery. She was “not convinced about the new vaccine, it hasn’t been around long enough etc...” I then referred to the 2003 AAHA guidelines, indicating that these vaccination guidelines had been around for six years. I suggested she was not giving pet owners the opportunity to make their own informed choice etc. She then responded “Sounds like you probably want to go someplace else, thanks” and hung up on me.

Conclusion

The quality of responses received raises concern that pet owners will continue to be misinformed about the necessity for vaccination, and that information on long duration of immunity and possible adverse reactions will continue to be withheld.

It is time the veterinary profession was brought to account for its long history of unnecessary and possibly harmful vaccination of pets, and abuse of pet owners’ trust.

Example of an informative canine vaccination policy:

On the topic of core and non-core vaccination, veterinary practitioners should advise their clients of the risks and benefits of these medical interventions. Veterinarians should obtain “informed consent” from their clients after informing them of crucial information contained in vaccination guidelines and other relevant information, eg:

- that vaccination should be reduced to “minimise the potential for adverse reactions to vaccine products”;
- that “dogs that have responded to vaccination with MLV core vaccines maintain a solid immunity (immunological memory) for many years in the absence of any repeat vaccination”;
- that duration of immunity after vaccination with MLV vaccines for parvovirus, distemper virus and adenovirus is at least seven years, based on challenge and serological studies.
that, currently, vaccine product label revaccination recommendations for so-called “annual” and “triennial” canine core MLV vaccines are not evidence-based. (Note: The APVMA advises that veterinarians are under no obligation to follow manufacturers’ revaccination recommendations, these are “recommendations” only.);

- the possible adverse reactions to vaccines, including adverse reactions listed on vaccine product labels and in the scientific literature;

- that the full range of possible adverse reactions and long term health consequences of vaccination are unknown;

- refer to non-core vaccines only if applicable as these vaccines “are required by only those animals whose geographical location, local environment or lifestyle places them at risk of contracting specific infections”.

A consent form listing these important points should be understood and signed by the client before vaccination takes place.

Note: My paper “Over-vaccination of pets – an unethical practice”, and my report for the Australian Pesticides and Veterinary Medicines Authority “Is over-vaccination harming our pets? Are vets making our pets sick?” provide more detail and references on this subject:

- Over-vaccination of pets – an unethical practice
  http://users.on.net/~peter.hart/Over-vaccination_of_pets__-__an_unethical_practice.pdf

- Is over-vaccination harming our pets? Are vets making our pets sick?
  http://users.on.net/~peter.hart/Is_%20over-vaccination_harming_our_pets.pdf