

# The New York City Veterinarian

## VMA NYC Newsletter



### Veterinary Medical Association of New York City

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#### **TABLE OF CONTENTS**

##### **Page**

**3** President's Message

**4** Committee Updates

- Liaison

**6** - Membership

**8** Program and Calendar  
of Events

**9** Animal Health

**11** Global Wildlife  
Trade

**14** Classifieds

A monkey and a bull beat the summer heat on the banks of the Bagamti river in Kathmandu on May 25, 2012. Temperatures in the Nepalese capital are rising with the onset of summer. AFP PHOTO/Prakash MATHEMA



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## President's Message

By Dr. David Wohlstadter



Dear Colleagues:

With all that is happening in our profession, I'd like to take this time to briefly discuss the importance of organized veterinary medicine.

Subjects such as anesthesia-free dental cleanings, vaccine clinics, mobile spay/neuter clinics, internet pharmacies, and the Fairness to Pet Owners Act have stirred up many emotions. There are many strong opinions among us, and this is our great strength.

Although we will not always agree on everything, coming together as a group of professionals and sharing our experiences and ideas can lead to better solutions for the advancement of our profession. There may be challenges we cannot change or directly stop in their tracks. We can, however, be confident that we will continue to find innovative ways to adapt, excel, and move our profession forward.

Please encourage your colleagues to join the VMA of NYC and become involved in our profession. It would be great to see more people come to the board meetings, share ideas and learn about issues that affect us at the local, state, and national levels.

Always feel free to contact me with any questions or concerns:

[david.wohlstadter@bluepearlveter.com](mailto:david.wohlstadter@bluepearlveter.com)

Sincerely,

David Wohlstadter

## SUBMISSIONS WANTED!

We are looking for members to submit medical articles, photographs, stories and essays. If interested, or you want to know more, please contact Sally Slavinski at [sslavins@health.nyc.gov](mailto:sslavins@health.nyc.gov)

## Liaison Committee

Amy I. Attas, V.M.D.

The liaison committee interacts with our local specialty hospitals, educational institutions and not for profit organizations and lists in this column any information which is relevant for our membership. Please feel free to contact me if you or your hospital has information that would be relevant. Specifically, we highlight continuing education which is complementary to our membership and new hires in specialty areas. I invite you to contact me if your hospital has information that you would like to share with our membership at [dramy@citypetsvets.com](mailto:dramy@citypetsvets.com).

### News from Blue Pearl Veterinary Partners:

Continuing education lectures are free and open to all area veterinarians. There are also veterinary technician CE lectures which are open to all veterinary technicians and assistants. Registration is required and is done by contacting Dr. David Wohlstadter at [david.wohlstadter@bluepearlvet.com](mailto:david.wohlstadter@bluepearlvet.com). Dinner begins at 7 PM and the lectures start at 7:30 PM. Unless otherwise noted, lectures are given in Brooklyn, Queens and Manhattan at the addresses listed below:

**Manhattan**  
410 West 55th St  
(Bet 9th and 10th Avenues)  
New York, NY 10019

**Queens**  
107-28 71st Rd  
(Bet Austin St and Queens Blvd)  
Forest Hills, NY 11375

**Brooklyn**  
32 4th Ave  
(at Pacific St)  
Brooklyn, NY 11217

#### June 2012

*Behavior (for veterinarians)*

E'Lise Christensen DVM, DACVB

June 19, Tuesday - Queens

June 20, Wednesday - Manhattan

June 21, Thursday—Brooklyn

#### August 2012

*Chemotherapy Practices & Principles (for technicians)*

Joshua Lachowicz DVM, DACVIM Onc

August 9—Brooklyn

August 16—Queens

August 18—Manhattan

#### August 2012 continued.....

*Neurology (for veterinarians)*

Boaz Levitin, DVM, DACVIM

August 14— Queens

August 15—Manhattan

August 16—Brooklyn

*Dermatology (for veterinarians)*

Jill Abraham VMD, DACVD

Sept 12—Queens

Sept 18—Brooklyn

Sept 19—Manhattan



A bird comes in for a landing on an electrical power line in Monterey Park, east of downtown of Los Angeles in the San Gabriel Valley on May 24, 2012 in California. Birds are able to survive on an electrical power line because a bird only touches one line, whereas if it were to touch another line or a pole, electricity will travel through the bird to either the ground or another wire as electricity has to flow from something to something. While there is tremendous electrical potential when a bird sits on a wire, because it doesn't go anywhere the bird remains perfectly safe since the electrical potential has no path through the bird.

AFP PHOTO / Frederic J. BROWN

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To show our appreciation for the ongoing loyalty of veterinarians who refer to The AMC, we are offering gift cards which may be passed along to your clients requiring specialty care. These cards entitle them to a \$100 discount towards a specialty service\* at The Animal Medical Center.

To request your cards, call Ms. Nancy Gilfillan, Director of Client Communications at 212-329-8833.

*\* Services for specialty consultation or services your practice does not provide*

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- Renal Medicine & Dialysis - Orthopedic Surgery - Neurosurgery  
- Soft Tissue Surgery

## The Animal Medical Center's Partners in Practice

### **ALL DAY (9AM - 4PM) COMPREHENSIVE CONFERENCES**

**Objectives. Learn/Gain:** New, ground breaking information. Comprehensive review. Practical clinical knowledge relating clinical signs, physical examination findings, and disease natural history. The best current and emerging diagnostic methods and techniques. Ability to plan effective strategies to treat, prevent, and monitor disease. Interactive Q&As

JUNE 16 SAT FELINE MEDICINE  
SEPT. 9 SUN OPHTHALMOLOGY  
OCT. 14 SUN VET. TECHNICIAN  
DEC. 2 SUN EMERG/CRITICAL CARE

### **PARTNERS IN PRACTICE TUESDAY (7 - 8:30PM) PRACTICAL EVENING WORKSHOPS**

**Objectives:** Small Group Interactive Learning. Case Management Discussions. Accurately diagnose & prognosticate. Provide optimal/effective therapies

JUNE 12 NEUROLOGY DRS WEST/MCCUE  
JUNE 26 RADIOLOGY READING, DR FISCHETTI  
SEPT 11 RENAL MEDICINE, DR LANGSTON  
SEPT 25 URINARY CALCULI DR KOVAK  
OCT 9 CARDIOLOGY, DR FOX  
OCT 23 ONCOLOGY, DRS LEIBMAN, HOHENHAUS, CAMPS  
NOV 13 DERMATOLOGY, DR MACINA  
NOV 20 RADIOLOGY, DR FISCHETTI  
DEC 11 ENDOCRINE, DR APPLEMAN  
DEC 18 ANESTHESIA, DR MUIR

**REGISTER ON LINE:**<http://www.amcny.org/pipseminars>

**QUESTIONS? CONTACT DR. PHILIP FOX**

## The Membership Committee

Alexandra van der Woerd

A total of 10 veterinarians were introduced as new or returning members of the VMA of NYC during the December meeting of 2011 and the January and February meeting of 2012. They are as follows:

### **New members March 2012**

Andrey Dembitsky, DVM

### **New members April 2012**

Mary Buelow, DVM  
Richard Demmerle, DVM  
William Swann, DVM  
Lorelei Wakefield, VMD

### **New members May 2012**

Jill Elliot, DVM  
Kristin Lester, DVM, MBA

As always, we welcome these new members into our association, and hope to see them regularly at our meetings.

## THANK YOU

**Thank you, thank you, thank you -- for the lovely "appreciation" plaque recently received. It was a joy and a privilege to work for many years as your executive secretary and I wish you all well in the future.**

**Effie Cooper**



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## Calendar of Events

*Program Committee*

Dr. Mark E. Peterson, Chairman , Dr. Deirdre Chiaramonte, Dr, Sally Haddock

### September 5, 2012

Speaker: Tara Bidgood, DVM, PhD, Dip. ACVCP  
Pfizer Animal Health

Topic: Pharmacology



### October 3, 2012

Speaker: Barrak M. Pressler, DVM, PhD, Dip. ACVIM  
The Ohio State University

Topic: Treatment of Proteinuria

### November 7, 2012

Speaker: Karen Rosenthal, DVM, MS  
St. Matthew's University, Grand Caiman Islands

Topic: Exotics

### December 5, 2012

Speaker: Bruce Keene, DVM, Dip. ACVIM  
North Carolina State University College of Veterinary Medicine

Topic: Cardiology

Remember, our Continuing Education program is meant for our VMA of NYC members, so please do not ever hesitate to provide your input and suggestions for great speaker or timely topics to make our C.E. program the best it can be. I can always be contacted via email ([mark@animalendocrine.com](mailto:mark@animalendocrine.com)). Or feel free to call me in my office (212.362.2650) if you have any suggestions.

## Liaison Committee

Sally Slavinski DVM, MPH DACVPM

# Multistate Outbreak of Human *Salmonella* Infantis Linked to Dry Dog Food

From the CDC Websites

[www.cdc.gov/mmwr/preview/mmwrhtml/mm6123a4.htm?s\\_cid=mm6123a4\\_w](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6123a4.htm?s_cid=mm6123a4_w)  
and [www.cdc.gov/salmonella/dog-food-05-12/vet-info.html](http://www.cdc.gov/salmonella/dog-food-05-12/vet-info.html)

CDC is collaborating with public health and agriculture officials in multiple states, the Public Health Agency of Canada, and the Food and Drug Administration (FDA) to investigate an outbreak of human *Salmonella* Infantis infections linked to direct or indirect contact with dry dog food. Multiple brands of dry dog food produced by Diamond Pet Foods at a single manufacturing facility in Gaston, South Carolina, have been linked to human illnesses (1).

On April 2, 2012, the Michigan Department of Agriculture and Rural Development detected *Salmonella* in an unopened bag of Diamond brand dry dog food collected during routine retail testing, resulting in a recall of a single product. Public health investigators used PulseNet, the national molecular subtyping network, to identify recent human infections with the same strain of *Salmonella* found in the dog food sample.

During February 1–May 31, 2012, a total of 22 cases (20 cases in 13 states, and two cases in Canada) of human infections with the outbreak strain were reported. The median patient age was 46.5 years (range: <1–82 years); 68% were female. Thirty-five percent (six of 17) were hospitalized. Epidemiologic investigations found that 83% (15 of 18) reported dog contact, and of the 11 patients who recalled types of dog food, eight reported brands produced by Diamond Pet Foods. The results of further product testing by multiple agencies and the provision of production codes by ill persons led to expansion of recalled products to include 17 brands, representing approximately 30,000 tons of dry dog and cat food produced at the implicated production facility. Pet illnesses associated with recalled products have been reported to FDA's pet food complaint system (2); as of May 31, 2012, the outbreak strain was isolated from one ill dog and one asymptomatic dog in Ohio, both of which had consumed recalled products.

This is the second documented outbreak of human salmonellosis linked to dry pet food in the United States (3). Persons should be aware that dry dog and cat food can be contaminated with *Salmonella* and should not be handled or stored in areas where human food is prepared or consumed. Washing hands is the most important step to prevent illness, especially right after handling pet food and treats or cleaning up after pets (4).

In addition to humans, animals may have been affected. Animal illnesses associated with recalled products have been reported to FDA's consumer complaint system.

Pets may get *Salmonella* infections from eating contaminated pet foods. People may get *Salmonella* infections from handling contaminated pet products, or having contact with infected pets or their feces.

### Salmonellosis in dogs and cats

Dogs and cats can become ill due to a *Salmonella* infection and have diarrhea, fever, vomiting, decreased appetite, or abdominal pain; however, some dogs and cats may be asymptomatic. Like humans, some dogs and cats can become carriers and can infect other animals or humans. If your client has a pet that is known to have eaten any of the recalled products and they have concerns that the pet may have salmonellosis, they may want to bring the pet to you, their veterinarian, for assessment.

### References

1. CDC. Multistate outbreak of human *Salmonella* Infantis infections linked to dry dog food. Atlanta, GA: US Department of Health and Human Services, CDC; 2012. Available at <http://www.cdc.gov/salmonella/dog-food-05-12/index.html>. Accessed June 7, 2012.
2. Food and Drug Administration. How to report a pet food complaint. Silver Spring, MD: US Department of Health and Human Services, Food and Drug Administration; 2012. Available at <http://www.fda.gov/animalveterinary/safetyhealth/reportaproblem/ucm182403.htm>. Accessed June 7, 2012.

Continued on page 12.....

## Multistate Outbreak of Human *Salmonella* Infantis Infections Linked to Dry Dog Food continued...

3. Behravesh CB, Ferraro A, Deasy M 3rd, et al. Human *Salmonella* infections linked to contaminated dry dog and cat food, 2006–2008. *Pediatrics* 2010;126:477–83.  
CDC. *Salmonella* from dry pet food and treats. Atlanta, GA: US Department of Health and Human Services, CDC; 2011. Available at <http://www.cdc.gov/features/salmonelladrypetfood>. Accessed June 7, 2012.

### **FREQUENTLY ASKED QUESTIONS**

#### **Pet foods that have been recalled**

Multiple brands of dry pet food produced by Diamond Pet Foods at a single manufacturing facility in Gaston, South Carolina have been linked with human illnesses. Diamond Pet Foods has expanded its recall of some brands of dry dog and cat food manufactured in this facility.

More information on the recalled products, including production codes, and distribution information, can be found on:

FDA—[www.fda.gov/AnimalVeterinary/SafetyHealth/RecallsWithdrawals/default.htm](http://www.fda.gov/AnimalVeterinary/SafetyHealth/RecallsWithdrawals/default.htm)

Diamond Pet Foods Recall Information— <http://diamondpetrecall.com/>

#### **Reporting suspected or confirmed *Salmonellosis***

Veterinarians and clients alike can report cases of animal illness associated with pet food in two ways: (1) call the FDA Consumer Complaint Coordinator in their state, or (2) report electronically through the Safety Reporting Portal . Reports should include product details such as brand name, production code (Example: BDR0105E2XJW), expiration date (Example: Best by 3-APRIL-2013), manufacturer or distributor, and location of purchase. Reports also should include medical information, including a veterinarian's report. FDA will review the consumer complaint and determine next steps including whether a sample collection (diagnostic and/or finished product) is necessary.

More information regarding how to report a pet food complaint can be found on the FDA website.

#### **Samples to collect from an animal with suspected *Salmonella* infection and a history of exposure to a recalled pet food**

If you are presented with an ill animal suspected to have come in contact with recalled products or with clinical signs consistent with salmonellosis, please report the case to FDA as described above.

For testing, the American Association of Veterinary Laboratory Diagnosticians (AAVLD) and the American Veterinary Medical Association (AVMA) recommend submitting diarrhea (preferred) or vomitus samples to a state or university veterinary diagnostic laboratory such as Cornell for *Salmonella* culturing and pulsed-field gel electrophoresis testing (PFGE). Additionally, stool samples can also be submitted for pets that appear healthy but were known to eat a recalled product.

#### **What advice should I give clients about their pets and the recall?**

Provide treatment recommendations to your clients and advise them against giving away their pet or euthanizing their pet because of a *Salmonella* infection. Talk to them about taking precautions to minimize the risk of illness to their family and how to safely clean up after their pet.

Be sure to tell the client that *Salmonella* infections are a zoonotic disease meaning that the infection can spread between animals and people. *Salmonella* is transmitted from animals to humans by the fecal oral route. Inform clients of proper hygiene and sanitation precautions to protect themselves and their family as well as any other pets they may have. It is important for people to wash their hands--and make sure children wash their hands--before and, especially, after feeding pets. Also, advise clients to always wash hands right after handling or cleaning up after their pets. If the client or any of their family members are ill, encourage them to contact a health care provider immediately.

# GLOBAL WILDLIFE TRADE— Devastating Impacts on Wild Populations and Potential Human Health Hazards

Dr. D. McAloose, VMD, DACVP  
Wildlife Conservation Society

The global trade in wildlife and wildlife products is one of the greatest threats to species conservation and biodiversity in modern history (Pavlin 2009). Estimates are that billions of plants, wild animals, and their products are *legally* (Karesh 2005) or *illegally* (Rosen 2010) traded each year. And if you think that the trade is something that only happens in developing countries, think again. The United States (US) is one of the world's largest consumers of imported wildlife and wildlife products (Pavlin 2009). United States Fish and Wildlife Service (USFWS) records reveal that *legal* wildlife trade between 2000 and 2006 included importation into the US of over half a million shipments and > 1.48 billion live wild animals (Smith 2009). While fish made up the majority of shipments, many different taxa including birds, reptiles and mammals were among those being traded (Smith 2009). And of the 246,772 mammals imported into the US between 2000 and 2005 primarily for commercial use or biomedical research, 190 genera and 68 families were impacted (Pavlin 2009).



World Wildlife Fund, Inc.

On a global scale, the *illegal* wildlife trade is a multi-billion dollar, commercialized industry that includes small scale operators and organized crime groups and is estimated to be among the largest black markets, second only to the illegal drug trade in its scope and scale (Zimmerman 2003). Importantly, this trade affects not only common but endangered species as well, and in Colombia it is considered the second greatest threat to biodiversity (Zimmerman 2003). In one report that summarized over 900 confiscations of illegally traded wildlife and wildlife products between 1996 and 2008, materials originated from over 100 countries (marked concentration in South and Southeast Asia) and 76% of seizures included endangered species (Rosen 2010). In this report, over 26% of the mammal product seizures were skins, pelts or furs from tigers and leopards; ivory tusks weighing over 90,000lb and estimated to represent more than 5000 individual elephants, constituted an additional 25% of the mammal product seizures.

Less organized but perhaps no less devastating, is the smuggling of wildlife products by everyday citizens. A recent report from Paris estimated that over 5 tons of bushmeat (meat from African wild life) *per week* is smuggled in passenger luggage from Central and Western Africa through Paris Roissy-Charles de Gaulle airport for personal consumption or sale in markets (Chaber 2010). In the United States and here in New York, illegal trafficking in wildlife products is also alive and well. In 2007, the Bushmeat Crisis Task Force estimated that approximately 15,000 pounds of bushmeat, including meat from nonhuman primates, is carried in passenger luggage or arrives via the mail at U.S. airports each month. In that same year, a Staten Island woman was charged with illegally smuggling 720 lbs of baboon, green monkey and warthog meat into the country for human consumption.

Continued on page 17....

## GLOBAL WILDLIFE TRADE— Devastating Impacts on Wild Populations and Potential Human Health Hazards, continued.....

The illegal trade in wildlife and wildlife products is clearly a monumental problem for conservation. What can be done to stop the trade? As a first step, increasing awareness and influencing behavior to decrease demand is critically important. As veterinarians, we are often seen as the local experts for many animal-related issues. If your clients ask about the significance and safety of wildlife or wildlife products they see in pet stores or local markets, you will be in an excellent position to help educate them about the dramatic and potentially irreversible impacts of these animals and animal products on wild populations. You can tell them how wildlife trade is damaging ecosystems and decimating countless species around the globe and that:

- of the more than half a million shipments of nearly 1.5 *billion* live animals legally imported into the United States between 2000 and 2006, over 90% of these animals were destined for the pet trade and over 80% of shipments contained animals from wild populations (Smith 2009)
- illegal harvesting, whether it be 24 tons of pangolins (seized in Vietnam in 2008), 361 tons of ivory (seized globally between 1989 and 2009), 470 African rhinos (poached between 2006 and 2009) (Bennett 2011), 600 endangered star tortoises (seized in Malasia in 2011), or bushmeat smuggled in passenger luggage for personal consumption, is *unsustainable* and is a serious, illegal criminal industry
- while we can't say for certain that handling or consuming bushmeat will make people sick, the fact that:
  1. diseases like ebola, HIV, monkey pox and highly pathogenic avian influenza are known to have been transmitted to humans through contact with wildlife,
  2. history and science tell us that the next emerging infectious disease in humans will likely come from a wild life reservoir (~75% of emerging infectious diseases in humans have a wildlife origin (Taylor 2001), and
  3. our ability to detect viral particles in bushmeat (Smith 2011), all illustrate the real and potential human health risk from handling wildlife products that have not passed through the safe guards veterinarians and other experts have put in place to ensure a healthy food supply
- in addition to the dedicated cooperation of local, national, and international governmental and non-governmental agencies, your client can contribute to fighting the illegal wildlife trade by choosing not to transport or purchase wildlife or wildlife products for consumption, decorative purposes, or as pets.



Through these actions, and by telling their friends and neighbors, they will help to save not only our iconic and culturally important species, such as tigers, gorillas, parrots and sea turtles, but will so save currently common species that will become the next endangered species when others have disappeared.

Continued on page 17....

## GLOBAL WILDLIFE TRADE— Devastating Impacts on Wild Populations and Potential Human Health Hazards, continued.....

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- Chaber AL, Allebone-Webb S, Lignereux Y, Cunningham AA, Rowcliffe JM. The scale of illegal meat importation from Africa to Europe via Paris. *Conservation Letters*. 2010;3:317-321.
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- Smith KF, Behrens M, Schloegel LM, Marano N, Burgiel S, Daszak P. Reducing the risks of the wildlife trade. 2009;324: 594-595.
- Smith KM, Anthony SJ, Switzer WM, Epstein JH, Seimon T, Jia H, Sanchez MD, Huynh TT, Galland GG, Shapiro SE, Sleeman JM, McAloose, D, Stuchin M, Amato G, Kolokotronis SO, Lipkin WI, Karesh WB, Daszak P, Marano N. Zoonotic viruses associated with illegally imported wildlife products. *PLoS One*. 2012;7(1):e29505. Epub 2012 Jan 10.
- Taylor LH, Latham SM, Woolhouse ME. Risk factors for human disease emergence. *Phil. Trans. R. Soc. Lond.* 2001;356:983-989.
- Zimmerman ME. The black market for wildlife: combating transnational organized crime in the illegal wildlife trade. *Vanderbilt Journal of Transnational Law*. 2003;36:1657-1689.

In the previous article, the author mentions that animals, especially wild animals, have been reported as the source of approximately 75% of all emerging and re-emerging infections in humans. The reasons often cited for the emergence includes forest exploitation, agricultural development and an exponential increase in the bushmeat trade. <sup>1</sup>

Some recent examples of new and re-emerging diseases from wild animals include monkeypox virus which originated from Gambian giant rats and other small rodents in Africa, and severe acute respiratory syndrome (SARS) caused by a coronavirus which was associated with horseshoe bats and palm civets in China. Historically, exposure to non-human primates (NHP) has been shown to have served as the route of introduction of several retroviruses to humans; most notably simian immunodeficiency virus (SIV) which adapted to humans and is now known as human immunodeficiency virus (HIV), the virus responsible for causing AIDS. <sup>2</sup>

In an article recently published in PLoS ONE, Dr. Smith and her co-authors note that the health risks to the US public, agricultural industry, and native wildlife posed by the wildlife trade have generally not been quantified due to minimal surveillance of live animal imports and the absence of surveillance of wildlife product imports. <sup>2</sup>

To better assess the risk and identify known and potential pathogens associated with bushmeat and the global trade in wildlife, the authors implemented a study to test seized wildlife products coming into JFK and several other airports. This was the first study of its kind, and may serve as a model for an ongoing surveillance system.

The wildlife products were mostly bushmeat from dead animals that were brought in illegally for human consumption before being seized at customs. A total of 44 animals were tested, 9 non-human primates and 35 rats. Simian foamy virus, cytomegalovirus, and lymphocryptovirus were identified, suggesting that such wildlife products could serve as the reservoir of pathogens into the human population. Readers are strongly encouraged to read this article, which is available free online at <http://www.plosone.org/article/info:doi%2F10.1371%2Fjournal.pone.0029505>

### References

1. Chomel BB, Belotto A, Meslin F-X. Wildlife, exotic pets, and emerging zoonoses. *Emerg Infect Dis* [serial on the Internet]. 2007 Jan [date cited]. <http://wwwnc.cdc.gov/eid/article/13/1/06-0480.htm>
2. Smith KM, Anthony SJ, Switzer WM, Epstein JH, Seimon T, et al. (2012) Zoonotic Viruses Associated with Illegally Imported Wildlife Products. *PLoS ONE* 7(1): e29505.

## VETERINARIANS AVAILABLE

**-Per Diem or Steady Part-Time Work.** Available most Mondays, Tuesdays, Thursdays and Fridays. Excellent people skills. Good practice builder. 35 years experience. References available. Contact Dr. Tobias Jungreis at 516-295-1125.

**-Relief - Per Diem.** General practice. Orthopedic and Soft Tissue Surgery. DVM, Cornell. Internship Oradell. Residency in Small Animal Surgery, Cornell. Phone Dr. Kathy Sevala at 1-718-267-6489 or 1-718-578-9085.

**-Relief Veterinarian.** Experienced with excellent medical, surgical and client skills. Contact Dr. Christine Asaro at (631) 806-9343 or (718) 238-2513, or e-mail: [chrisasaaro@hotmail.com](mailto:chrisasaaro@hotmail.com)

**-Donald W. Stremme, VMD.** Experienced veterinarian (34 years) available for small animal and exotic relief work in Manhattan. Licensed (including DEA and USDA) in PA, NJ, and NY. Please send inquiry via e-mail to [CCAC-DWS@aol.com](mailto:CCAC-DWS@aol.com)

**-Experienced veterinarian available for relief work including surgery.** Please call Shirley Koshi 212-288-9088 or Email: [kitydogdoc@gmail.com](mailto:kitydogdoc@gmail.com)

**-Relief/per-diem veterinarian:** experienced, capable, personable. Dan Grayson, DVM. 917-755-1615.

**-Full or part-time** Dr. Eduarda Krieger. NY Licensed. Seeks work at small animal practice in NYC. Phone: 917-239-3377.

**-Veterinarian available** for permanent Per Diem any weekday except Friday. Experienced LI vet with strong medical, surgical and people skills seeks position in Queens 2-4 days per month. Call Dr. K. at 516-374-5050.

**-Relief/Per Diem** General practice and emergency. Internship trained. Please contact: Dr. Marion Pattillo at [docmane0523@gmail.com](mailto:docmane0523@gmail.com) or 646-963-5648.

**- Part time or Relief Veterinarian available** in NYC. Currently practicing in Westchester. Please contact me at [drmartinvet@gmail.com](mailto:drmartinvet@gmail.com)

## VETERINARIANS NEEDED

**-Animal Care and Control (ACC)** of NYC is seeking full-time, per-diem and on-call veterinarians to work in our Care Centers in Manhattan, Brooklyn and Staten Island. Join a team of dedicated and caring professionals who provide veterinary care for homeless and abandoned animals. You will work with a wide variety of species, medical conditions, emergency and public health issues. Volunteer opportunities are also available. Competitive Salary, full benefits. See [www.nycacc.org](http://www.nycacc.org) for a full description. Send cover letter and CV to [hr@nycacc.org](mailto:hr@nycacc.org) or 212-442-2066. Call 212-442-2061 for more information.

**-WANTED:** Part-time or per-diem vet with interest in preventive and shelter medicine needed for two or three days a week with Williamsburg, Brooklyn clinic. New York State license and prior experience required. Email resume to [feltonvet@verizon.net](mailto:feltonvet@verizon.net) or fax to 718-388-6968.

## LVT DESIRED

**LVT needed in SW Nassau County**, 5 miles east of Kennedy Airport. 2 Dr. practice. FT weekdays 11-7. Strong dental and surgical skills a plus. Fax resume to Abby 516-374-6817.

## FOR SALE

**One year old Veterinary Practice** for sale. Good for a retiree or a new graduate. High potential – very reasonable. Please contact Kay at 917-751-1906

## VARIOUS POSITIONS AVAILABLE

**ANIMAL CARE & CONTROL OF NYC (AC&C)** has many new and exciting job openings available at this time. If you love working with animals and helping people they may have a great career opportunity for you. Some of the positions that are available are Communications Associate, Volunteer Liaison, Veterinarian, Licensed Vet Tech, Animal Care Officer, and Animal Control Officer. If you are interested in learning more about the available positions or want to apply, please visit their website at [www.nycacc.org](http://www.nycacc.org).

Want to place a classified ad? Please send your submissions to [vmanyc@solutionsplisonline.com](mailto:vmanyc@solutionsplisonline.com). Submissions will only be accepted from NYC VMA members. Be sure to provide a brief description of the posting and appropriate contact information.