Everyday ethics

THIS series gives readers the opportunity to consider and contribute to discussion of some of the ethical dilemmas that can arise in veterinary practice. Each month, a case scenario is presented, followed by discussion of some of the issues involved. In addition, a possible way forward is suggested; however, there is rarely a cut-and-dried answer in such cases, and readers may wish to suggest an alternative approach. This month's dilemma, 'Mammary mass in an overweight dog', was submitted by a reader and is presented and discussed by Rachel Casey. Readers with comments to contribute are invited to send them as soon as possible, so that they can be considered for publication in the next issue. Discussion of the dilemma 'Irresponsible dog ownership', which was published in the September issue of In Practice, appears on page 494. A further response to the dilemma 'Regulation breach on farm' published in the July/August issue appears on page 495.

The series is being coordinated by Siobhan Mullan, of the University of Bristol. It is hoped it will provide a framework that will help practices find solutions when facing similar dilemmas.

Mammary mass in an overweight dog

A client brings in a nine-year-old female neutered labrador to ask your advice about a mammary mass. The mass is relatively small and well defined, and you consider it of value to biopsy and/or remove it. However, the dog is 33 kg (ideal weight 15 to 16 kg), struggles to walk and pants after coming from the car park to the waiting room. Looking at previous records, you see that the owner has not visited the practice for several months. At the last visit, they had been to two weight loss clinics and the dog's weight was 27 kg. A note on the record suggests that the owner was reluctant to follow the advice given or to change the dog's food from the working dog diet it was on, and could not afford a prescription diet. When you mention the weight problem and the need for the dog to lose weight before surgery is considered, the client becomes aggressive, tells you 'the dog is on a diet and the weight problem is under control' and refuses to discuss attending weight clinics again or changing food. You feel that the welfare of the dog is compromised, and mention this to the client, who becomes angrier and storms out of the practice.

Issues to consider

This is obviously a client who is challenging to deal with, and I suspect many of us would be tempted to leave the problem until the client returns, rather than contacting them to persuade them to address the issue. This would avoid further unpleasant confrontation, and allow us to focus our efforts on clients who are willing to listen to our valuable advice. However, it seems likely that the client will do nothing to deal with their dog's weight, as they were reluctant to follow previous advice. There is also the issue of the mass, which will inevitably get bigger with time, and, since the owner left apparently unimpressed, it is likely that they will not return with the dog to the practice until they really have to. This approach is therefore likely to result in the dog suffering a continuing decline in its welfare.

Another option would be to report the owner to the RSPCA. However, this carries potential issues of breaching client confidentiality and you would need to be sure that it would be in the best interests of the dog (Yeates 2008). Would an independent expert look at the dog and conclude that the owner should be prosecuted? The RSPCA might serve an improvement notice, which might lead to the owner making improvements, or the dog could be seized. If so, it would be more likely to be given an appropriate diet and lose weight, but would long-term kennelling pending prosecution be the best overall option for its welfare? Kennelling can be stressful for dogs because of the noise, loss of predictability and control, reduced social interaction and reduced space (Rooney and others 2007).

When judging whether the welfare of the dog would be better in kennels than with the owner, consideration should be given to other aspects of its life. For example, are there suspicious previous injuries that might be non-accidental? Do you have any evidence that the owner has directed anger towards the dog; for example, did reception staff observe any aggressive behaviour before the appointment or did the dog appear to be anxious of handling by its owner? And without such evidence, do the welfare implications of the obesity outweigh the potential negative effect of the dog being removed from its home environment and kennelled?

The final option is to contact the owner. This may be the least appealing option, but it has the potential to lead to the best welfare for the dog. It would be worth first taking the time to consider why the owner reacted the way they did. People are rarely 'difficult' without reason. Furthermore, the owner was not entirely in denial about their dog's weight, as they had previously

Rachel Casey is a senior lecturer in companion animal behaviour and welfare at the University of Bristol, where she runs a programme of research investigating various fundamental and applied aspects of companion animal behaviour. She is an RCVS recognised specialist in veterinary behavioural medicine, a diplomat of the European College of Veterinary Behavioural Medicine and a certified clinical animal behaviourist.
any comments?

Readers with views to contribute on ‘Mammary mass in an overweight dog’ should e-mail them to inpractice@bva-edit.co.uk so that they can be considered for publication in the next issue, or fax comments to 020 7383 6418. The deadline for receipt of comments is Thursday, November 10. Please limit contributions to 200 words.

Possible way forward

Ignoring the problem is an attractive but unsuitable option for the welfare of the dog. Reporting to the RSPCA may be a final option should the owner not respond to further communication, and might also depend on your evaluation of other factors influencing the dog’s welfare. You should also consider the legal implications (for example, whether client confidentiality would be breached and whether sufficient advice has been given to avoid the possibility of the owner suing for negligence). You should definitely try to speak to the owner again as a first option. Use a different approach from the previous encounter, considering why the owner might have responded as they did, and perhaps focus on the risks of the mammary mass and the requirement for surgery, rather than the weight per se. It may be that a weight loss clinic is not suitable for this owner – for example, if they are overweight themselves and embarrassed about discussing weight issues in public. If this is the case, you could offer one-on-one help and weigh-ins with a member of practice staff when the practice is quiet. If they are worried about the cost of a prescription diet, you could discuss the principles of a balanced ‘home-made’ diet. Taking time to consider the owner’s perspective may be very worthwhile in achieving good welfare outcomes for the dog, and may also be good for business if the client becomes bonded to the practice because of your clear interest in the welfare of their pet.

references


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attended two weight loss clinics. There are potential reasons for them not wanting to discuss their dog’s weight. Perhaps they were embarrassed, or overweight themselves. Elderly or disabled people may find it difficult to exercise their dog. Maybe someone else they respect had told them they must feed a labrador a working diet. Perhaps they live alone, and ‘share’ their meals with the dog from loneliness. Research has suggested that owner attitudes and lifestyles are an important component of the risks for pet obesity (Bland and others 2009). You might also consider discussing the case with the member of staff who saw the client for weight clinics.