

Comments on the dilemma in the April issue:

‘Repeat vaccinations’

The dilemma in the April issue concerned a client from the medical profession questioning why their dog required repeat vaccinations (In Practice, April 2012, volume 34, pages 246-247). Their understanding was that the immune response had a long memory following vaccination and they implied that yearly vaccinations were only being recommended to provide a regular income stream for vets. David Williams commented that this was a common concern of clients. While the assumption that vaccination should incite long-term immunity against a particular pathogen was correct, the issue was complicated by differences between pathogens, vaccines and the prevalence of the pathogen in the recipient population. Since most companion animal diseases being vaccinated against were no longer circulating in the population, there were no natural boosters for immunity, which meant vaccination was required more frequently. It was also a case of playing it safe for vaccinations with an uncertain duration of immunity. The benefits of vaccination outweighed the side effects. Aside from protection against disease, yearly vaccination encouraged owners to present their pet for examination more frequently, which meant that any conditions were more likely to be diagnosed at an early stage when they were more likely to be treatable. A way forward was to ensure transparent communication with clients so that the vet and the client could come to a rational and amicable decision about the vaccination protocol for the animal. A requirement that some services, such as vaccinations, should not subsidise others, such as the treatment of sick animals, would also be justifiable.


Siobhan Mullan comments: The suggestion that more expensive services should not be subsidised by vaccination charges certainly seems a fair way to ensure that each client only pays for costs directly incurred by them. However, there are other ways that justice can be interpreted.

The form of social justice discussed by the philosopher John Rawls (1999) allows for deliberate inequalities, provided they work to the advantage of the least well off. In the case of private veterinary practice, this system would allow for an unequal pricing structure of services. It might seem fairer if all the clients of the practice agreed to this system in the first place – as a sort of practice insurance scheme. This system would also allow for people to ‘pay into the scheme’ to an unequal degree; for example, when it came to annual vaccination payments.

Of course, with a system that benefits the least well off, it may not be the case that owners who have taken the most care to prevent problems are afforded the most subsidy. In order to prevent a pretty unpalatable system that is open to abuse, some checks and balances would be required, as well as a more open-minded pet-owning public, I suspect!


Reference


 Siobhan Mullan is a research fellow at the University of Bristol with interests in practical welfare assessment and animal ethics. She holds the RCVS diploma in animal welfare science, ethics and law.

Have you faced a dilemma that you would like considered in a future instalment of Everyday Ethics? If so, e-mail a brief outline to inpractice@bva-edit.co.uk. We pay a small honorarium for contributions that are published.

doi:10.1136/inp.e2847