1961

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Veterinarian's Responsibility in Disease Reporting

John B. Herrick, D.V.M., M.S.*

Figures such as "100 Million Dollar Loss to a Certain Disease" or a "250 Million Dollar Loss to the Production of a Particular Livestock Species" is not meaningful to the average livestock producer. Yet, when statements are made that mastitis costs the average dairyman $1.00 per cow per month or that grubs cost $5.00 loss per infected animal slaughtered, they appear to create more interest. These are figures that no more effect the pocketbook of both the livestock producer and the veterinarian than the large stupendous figures. However, the main point is that the figure is more in the realm of the producer's finances. Both set of figures are not accurate because in most cases the figures are only estimates. The reason for the estimates is the complete lack of morbidity and mortality reporting in all types of livestock production. The incidence of and the effect of livestock morbidity and mortality is not known in the United States. It may be beyond the realm of reason to expect actual figures on these losses; however, they would be much more meaningful than the estimates now used.

A death certificate is made out for every human and the cause of death is noted. These have been questioned as to their accuracy, yet they give a realistic figure of the mortality of humans. Morbidity figures of humans are also more accurately kept due to the case report type of records kept by those associated with human health.

Morbidity and mortality figures of animals have been obtained from many different sources, but the most accurate that could be obtained would be from practicing veterinarians. However, veterinarians in general do not uniformly comply with the time-consuming task of reporting all animal illnesses and deaths. Over 30 states have a reporting system, yet very few of the veterinarians in these states report. This leaves a question as to the value of figures obtained from the reports.

Veterinarians are the only logical people to report morbidity and mortalities of animals. It is definitely known that not all livestock producers use veterinarians, nor would they report all animal diseases and deaths. On the other hand, if a veterinarian reported the cases that he himself contacts, this would give a much more accurate figure than what now exists. This would hasten compulsory disease reporting by all segments of the industry. Also, proper quarantines and disease control measures can be more effectively instituted. In Iowa with our 950 veterinarians in practice, less than 100 report. This figure does not indicate sufficient interest in the program.

Comments from Iowa veterinarians on why they don't use the reporting systems that have been heard are "Don't have time" — "Get the farmer to do it" — "system too complicated" — "What good is it?" — "Nobody's business what goes on in my area" — "If we give further details, the government will have bigger programs to push at us" and "I don't get paid for it." From these comments it appears that we need a sound educational program.
Disease reporting systems are fundamental to a sound livestock disease control program for the following reasons:

1. They pinpoint the needed emphasis on disease control in practice. If a number of cases of Infectious Bovine-Rhinotracheitis exists in one practice area, this may direct the necessary control measures in another practice area.

2. They provide necessary information for a sound teaching, research and extension program. Emphasis cannot be specifically directed on an educational program unless the problems are definitely known. This also holds true for disease control programs.

3. They identify epidemics and aid in the study of various diseases.

4. They create an awareness of disease in the minds of livestock producers.

5. They stress the importance of animal disease control to the meat and milk producing public and aid in the enforcement of disease control regulations.

Disease reporting systems are an obligation of the practitioner as much as other phases of his veterinary practice. A veterinarian assumes a moral responsibility and a dedication to control and eradicate disease. Reporting, records, and forms are a part of this responsibility. Circumvention of these obligations promotes lay intervention for a responsibility that is primarily that of the professional man. It is also fundamental that all phases of veterinary medicine should cooperate on such a program.

Regulatory and teaching agencies should combine forces with veterinary and public health associations in establishing a disease reporting system. Emphasis should be placed on the need of simplicity, yet thoroughness of the forms, and interpretation of the forms.

A veterinarian assumes the responsibility of animal disease control because he is a professional man and a leader, not merely a "veterinary mechanic." Red tape forms are not wished on free enterprise by government, but are created by faulty free enterprise and assumed by the government. Disease reporting is as fundamental to the practicing veterinarian as is his license.

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