To: The Public Health Committee of the Connecticut Legislature

Re: Bill #HB 5659 - AN ACT CONCERNING THE VACCINATION OF ANIMALS

I am writing to support An Act Concerning the Vaccination of Animals. The original rabies exemption bill passed in 2006 was sponsored for me by Senator Andrew Roraback and Representative Roberta Willis, and I remain strongly committed to advancing CT law to match evidence-based research regarding rabies vaccination. I worked at a fox hunt with over 100 hounds during the rabies panic of the 1990s and I am the Training Officer for Connecticut Canine Search and Rescue. Having worked professionally with dogs for 30 years, I have learned first hand of the dangers of improperly administering vaccines. Improper administration includes over-vaccination. This bill will bring CT law up to date with evidence-based, best clinical practice, and best clinical practice recommendations will protect public health be ensuring animals are protected from rabies with appropriate vaccination and monitoring by their treating veterinarians:

• Animal vaccines cause medical crises, including seizures, anaphylactic shock, cancer, kidney failure, liver failure, degenerative arthritis, immunosuppression, and autoimmune disease. The American Veterinary Association (AVMA) now posts vaccine side effect warnings on their website, including reactions identified as “life-threatening” and “medical emergencies.”

• Vaccines can only be given to “healthy” animals per the manufacturers’ packaging inserts included with the vaccine serum. Vaccinating a sick animal can worsen the animal’s condition, or even kill it, as the vaccine includes not just the rabies virus, but also adjuvants such as mercury and gentamicin – which are listed as “hazardous materials” on the vaccine material safety data sheet. Adjuvants are added to make the vaccine “more stimulating.”

• The same 1-mL dose of rabies vaccine is given to 10-pound cats and 150-pound dogs; it is not graduated based upon body size.

• The American Animal Hospital Association (AAHA) Canine Vaccine Task Force reported that there are no upper limits on antigen content – which they believed created safety and efficacy concerns - and veterinarian Dr. Martin Goldstein found that manufacturers may be adding to the dose up to ten times the necessary amount of the ingredients necessary to induce immunity.

• The AAHA Canine Vaccine Task Force states “Rabies vaccine antigen is highly immunogenic. Throughout the US and Canada, a single dose, administered at/greater than 12 weeks of age, is considered to induce protective immunity.”

• The Journal of the American Veterinary Medical Association (JAVMA) dated 3/1/16 reported, “New guidance in this issue of the JAVMA advises that cats and dogs that are exposed to rabies and are overdue for a vaccine can have a booster shot followed by an observation period rather than be subject to quarantine or euthanasia. The recommendation appears in the 2016 edition of the Compendium of Animal Rabies Prevention and Control (J Am Vet Med Assoc 2016;248:505-517) from the National Association of State Public Health Veterinarians, along with other updates from the 2011 edition.” The period of observation is defined as 45 days on the owner’s property.
• The Compendium recommendation was based in part on research completed by the Rabies Laboratory at the Kansas State Veterinary Diagnostic Laboratory. Summarized in the JAVMA article:

“Between 2010 and 2014, the researchers obtained serum samples from a total of 74 dogs and 33 cats that, according to the study abstract, “had been exposed to rabies and brought to a veterinarian for proactive serologic monitoring or that had been brought to a veterinarian for booster rabies vaccination.”

Results: “All animals had an antirabies antibody titer ≥ 0.5 IU/mL 5 to 15 days after booster vaccination. Dogs with an out-of-date vaccination status had a higher median increase in titer, higher median fold increase in titer, and higher median titer following booster vaccination, compared with dogs with current vaccination status.”

The authors concluded, “Findings supported immediate booster vaccination followed by observation for 45 days of dogs and cats with an out-of-date vaccination status that are exposed to rabies, as is the current practice for dogs and cats with current vaccination status.”

• The CT Department of Public Health has adopted the 2016 Compendium guidelines (see http://www.ct.gov/dph/cwp/view.asp?a=3136&q=396178) but the CT Department of Agriculture has failed to adopted these evidence based recommendations, leaving animals at risk of needless euthanasia and extended quarantines (six months versus the new recommendation of four months) in isolation.

• Rabies is the one disease that veterinarians are required by law to vaccinate against. Unfortunately, the current law bases re-vaccination schedules upon the calendar, not evidence based recommendations. The current rabies exemption program in CT is too burdensome as it requires the exemption determination be made by the state veterinarian at the Department of Agriculture, not the treating veterinarian. This wastes valuable time at the business and state levels as the treating veterinarian must complete a consultation with the Department of Agriculture’s state veterinarian. Both are required to produce time-consuming documentation which taxes the over-extended state agency and the highly regulated and busy veterinarians. It also takes months to obtain an exemption, and, without the exemption, animals cannot be licensed.

• Changing the law will protect the public from rabies by removing the incentive to forge rabies certificates, not license dogs, and/or take animals across state lines to states that do not require vaccination of sick animals. For example, New York and Massachusetts only require a letter from a veterinarian to exempt ill animals. This bill can return the exemption authority to the treating veterinarian as was the intent of the original rabies exemption bill proposed in 2005 but changed in 2006 by the CT Department of Agriculture to take the decision over from the treating veterinarian, creating a cumbersome process for exemption of sick animals.

Please note, I am also asking the Committee to request the CT Department of Agriculture to update its rabies regulations to adopt the 2016 Compendium recommendations and to post the new recommendations on their website as was done in Massachusetts as part of a statewide update completed to reduce red tape (see http://www.apnewsarchive.com/2016/Review_of_regulations_aids_unvaccinated_cats_and_dogs/id-dfd7d0b4f90b48cd975dc85d6984a772).

Thank you for your time and support updating the rabies vaccination law to incorporate the best clinical recommendations.