

AVMA, AAHA to release vaccine positions

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Lakewood, Colo.-In response to public and professional demand, two of the nation's top veterinary associations prepare to address the contentious topic of vaccine use with unprecedented resolve.

But as the American Animal Hospital Association (AAHA) prepares canine vaccination guidelines, which carry some political risk, critics question why the American Veterinary Medical Association (AVMA), the profession's largest representative, is content to release just a position statement on the issue, seeming to ignore the need for real recommendations.

DVM Newsmagazine has learned the release of AAHA guidelines are expected next spring. AVMA's position statement was being submitted to the Journal of the American Veterinary Medical Association for publication at presstime.

"I think AVMA should take a more profound stance; the profession expects it," says Dr. Richard Ford, a North Carolina State University professor working on both projects. Ford champions changing vaccination practices. "The position statement is good, but it's not guidelines. I'd like to know what the AVMA has to say, but since when do you remember them doing anything controversial?"

Serving a need

While the position statement isn't a "cookbook," it's far from sub par, says Dr. Elizabeth Curry Galvin, AVMA assistant director of scientific activities.

The statement stresses AVMA's stance on education, a reduction in the profession's dependence on vaccine sales, which account for a significant portion of practice income, and encourages practitioners to use their own clinical judgment.

"This is a huge issue," Galvin says. "Vaccines have been incredibly successful in curbing disease, and the optimal revaccination durations are not known, this is true. But there just isn't enough information out there for us to develop guidelines.

"What we're saying is veterinarians have to continually educate themselves with what's out there, and do their own research into the annual vaccine environment."

Lack of guidance

But even research-savvy veterinarians hunger for more direction. Aside from following immunologists like Dr. Ron Schultz, a University of Wisconsin professor who's performed duration of immunity studies since the 1970s, or epidemiologist Dr. Larry Glickman, a vaccine critic at Purdue University who's studying post-inoculation antibody development, DVMs have little elsewhere to turn.

AAHA panel members are tight-lipped about contents of the group's forthcoming guidelines, but the American Association of Feline Practitioner's (AAFP) 1998 version for cats lends to speculation. While the 29-page document doesn't offer a cut-and-dry approach, it recommends increasing one-year revaccination intervals to three years, speculating that most vaccines last for at least that length of time. In conjunction, some manufacturers have increased their rabies inoculation protocols to three years as well.

Co-author Dr. Tomas Elston says writing the guidelines "opened up a can of worms."

"The subject is just so controversial," says Elston, a feline practitioner in Irvine, Calif. "The research that's out there has certainly changed the way we look at vaccines, but there's just not enough information. Vaccinating is a medical decision, and unfortunately with more knowledge, we have more questions.

"You don't just grab a vial from the refrigerator, read the manufacturer's label and use it. It's not that black and white.

Lack of research, support

Speculation feeds the gray area of vaccines. Practitioners and scientists like Glickman theorize the repeated use of vaccines breed antibodies that can attack a host's own organs, causing autoimmune disease. Schultz argues that many annual vaccines remain effective throughout a lifetime; at least one of his reports successfully challenges a distemper vaccine after seven years. But despite all the research, it wasn't until veterinarians started noting soft-tissue sarcoma developing at vaccine injection sites in cats that the issue sparked widespread debate.

That's when the Vaccine-Associated Feline Sarcoma Task Force began its ongoing quest to prove the vaccine-sarcoma connection. AVMA admits that the practice of annual vaccinations is based on historic precedent and not research. But that research is expensive, requiring large numbers of animals to be isolated and studied for long periods of time, says Schultz.

"That's why a lot more work doesn't come out," he says. "In the 1970s, there were four vaccines for dogs and we weren't using them often. Now there are 16 vaccines for dogs, and if they're not getting them annually, they're getting them more often than that.

"I'm the only one in the profession who challenges the immunity of vaccines. I'm really one among a total of three individuals who have challenge studies out. With just a few of us studying them and more vaccines on the market, how are we supposed to keep up?"

Framing concerns

As AVMA continues to "circle the issue," according to critics, AAHA's board members say the guidelines, still in draft form, aren't strict. Ford says they are just what the profession needs.

"We're not dictating what you should vaccinate with, but a lot of veterinarians want to know the protocols," Ford says. "The health implications of vaccines are difficult to know because there aren't enough studies to determine a cause and effect relationship between vaccines and induced injury.

"Still, most authorities agree there's a likely correlation and a lot of interest in the issue."

On the horizon

AVMA refuses to reveal much concerning its position prior to publication, but according to Galvin, the statement offers advice for veterinarians and proposes the following:

- * Create and promote a national adverse reporting system, documenting reactions to vaccines.
- * Manufacturers should improve vaccine labeling, clearly printing all that's known about a product.
- * Three-year rabies vaccines should be promoted rather than traditional annual boosters.
- * Veterinarians must promote the value of the exam and move away from their dependence on vaccine income. Emphasize communication, customization and learning the lifestyle of clients to attract patients to the practice.

"We're rolling together what we do know about vaccines, find in published research and expert guidance," Galvin says. "I think this will continue to unfold over the years as we improve on our information. All of our ideas need to come together to make the profession move forward."