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Submitted Via Facsimile: 541-573-4411

Mare Sterilization Research Project
BLM Burns District Office
28910 Highway 20 West, Hines, Oregon 97738

Attention Project Lead:

BLM stated it was “investing in a diverse portfolio of research projects to develop new, modern technologies and methods for wild horse and burro management”. BLM is looking to improve existing population growth suppression methods or develop new methods according to the environmental assessment. However, BLM does not need to investigate the safety and efficacy of three separate methods of surgical sterilization of wild horse mares. These three methods have been performed on domestic mares and discounted as a last and least preferred method to manage hormonal issues. The three surgical procedures for permanent sterilization of mares described in the mare sterilization research project, ovariectomy via colopotomy, tubal ligation and hysteroscopically-guided laser ablation of the oviduct papilla all require certain pre-operative and post-operative considerations for aseptic surgical protocol and pain management. Pre-operative bloodwork and a thorough examination are always performed on the relatively few domestic mares which are spayed. Other options other than surgery are always considered first due to the risk involved with any of these procedures. Aseptic surgical protocol and pain management is the standard of care for each and every surgery or the performing veterinarian would undoubtedly be sued by the owner and reprimanded by the state veterinary board.

Wild mares will not have their surgeries performed in a sterile surgical suite. Their surgery will be performed in a non-sterile chute or standing in stocks at the local BLM facility without benefit of routine standard of care. Unlike domestic mares who are easily handled, the very handling of these wild mares presents additional pre-operative stressors, which cannot be mitigated.

BLM does not possess the statutory authority to treat America’s wild free roaming mares as research test subjects to perform surgeries which are not the standard of care for domestic mares.

Case in point, is a photograph of Dr. Leon Pielstick as he was beginning to perform a surgery attired in bibs used predominately for working cattle and performing the surgery with a non-sterile plastic sleeve that is used to pregnancy check cattle. This is not acceptable for a domestic mare, why wild mares? To learn this procedures has been performed on some of the Sheldon wild mares, undoubtedly in a similar
manner, is gross negligence and inhumane on the part of the Department of Interior and the veterinarians who performed the surgery in less than aseptic conditions.

This type of trial and error butchery is a violation of the least feasible management clause of the Wild Free Roaming Horses and Burros Act.

In private practice, colopotomy is considered an inferior procedure with likelihood of post-surgical infections and complications (i.e., colic) especially during these unsterile conditions. Post-operative care usually lasts several days to often weeks and mares are monitored and in most cases are monitored in box stalls or cross ties, which cannot be accomplished with wild mares. Post-operative bleeding is a situation which cannot be easily remedied even in domestic mares.

Standard of care for tubal ligation and/or ovariectomy is performed under aseptic conditions with a laparoscope and pain mitigation along with private confinement and treatment which can last days to weeks. Complications can also be colic, infection and pain mitigation is required.

Hysteroscopically guided laser ablation is not a preferred method by board certified equine surgeons because it is considered experimental even under the best of conditions. Field veterinarians and veterinary students are woefully inadequate to perform any of these surgeries, which in my opinion should only be done by board certified equine surgeons in appropriate surgical suites and with post-operative care performed by educated and expert staff in an equine veterinary hospital setting.

In recent conversations with Littleton Equine Medical Center veterinarians Scott Toppin, DVM, DABVP and Kelly Tisher DVM the following comments were made to me.

Dr. Toppin stated he had serious concerns about the dangerous and inhumane conditions under which these surgeries would be performed. He also stated concerns about the sterility of the procedure and pre and post-operative pain control.

Dr. Tisher shared that their practice equine surgeon, Dustin V. Devine DVM, MS DACVS, performs approximately six to twelve of these surgeries with a laparoscope annually. Littleton Equine is the leading equine veterinary private practice in Colorado.

Mass experimental surgeries performed under these conditions outlined in the proposal, amounts to negligence and abuse. I believe experiments such as this proposal are unethical, inhumane and unwarranted. Any veterinarian(s) who would perform these experiments is in violation of the oath taken as a graduating veterinarian, “above all else, do no harm”. If a veterinarian in private practice performed these procedures in the manner described in this document they would most certainly be
reported to and disciplined by the regulatory board of that state. Discipline would likely mean suspension of that veterinarian’s license to practice in that state.

All horses should be judged the same when it concerns care. Elective, unethical treatment should not be performed on either domestic horses or wild horses. BLM gives the impression that all wild horse areas are overpopulated, when in fact, most wild horse areas do not have a genetically sustainable population without intervention. This is due to over manipulation of herds to promote adoption, decreasing original herd use areas and allowing livestock to over graze our public lands. Once again, BLM is exceeding the statutory authority granted by Congress in the management of our wild horses.

Since the inception of the WHBA, BLM has practiced a management for extinction policy. It is ever so clear in the “experimental research policy” BLM is now proposing.

Sincerely,

Donald E. Moore, D.V.M
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