

Veterinarians and Brachycephalic Dogs: “Once I saw the problem, I couldn’t ‘un-see’ it.”

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The statement quoted above was made by a veterinary colleague – a private practitioner and specialist in reproduction. She and I have had many conversations about breeding dogs. Her busy practice was well-known for assisting pedigree and purebred dogs with artificial insemination (AI) and assisted whelping/caesarean sections among the common procedures. About 40% of her practice was brachycephalic dogs. Over the last two years we have been discussing the ethics of assisting dogs that without AI and/or surgical intervention would be unable to reproduce. She mentioned that it had been a discussion at her clinic, with at least one veterinary technician quitting because she could not morally continue to participate. My friend asked what she could do to move towards a more ethically-conscious practice.

The basic tenets of theriogenology/reproductive veterinary practice would suggest that only healthy dogs be used in breeding. Traditionally though, assessment of health was rather limited and focused on the presentation of the bitch or dog in question. But is that enough? Good breeding practices now include various tests to determine the suitability for pairs of mating animals, e.g.:

- Freedom from obvious signs of disease, including skin problems/allergies.
- Testing for breed-relevant genetic conditions and only mating carriers of deleterious genes to dogs known to be free of the mutation.
- Screening for hip/elbow dysplasia, heart conditions and/or hereditary eye diseases as appropriate for the breed.
- Other breed-specific issues.

Historically, veterinarians may have advised on some of these items, but may not have refused services based on a lack of their fulfillment. But with changing societal expectations and evolving medical knowledge, is it time that veterinarians should question whether they are/have been **complicit in furthering breed-specific problems and in producing compromised puppies?** What is our responsibility as veterinary professionals?

As my colleague and I discussed brachycephalic dogs, we recognised that the problems of inherited conditions went further than those covered by the tests listed above. To protect the health and welfare of offspring, shouldn’t dogs be excluded from breeding if they have extremes of conformation, including:

- Signs of BOAS (Brachycephalic Obstructive Syndrome) including obvious breathing sounds, and/or
- Severe skin folds, especially around the eyes, evidence or history of corneal ulcers, or related eye problems,
- And given what we now know about the spinal morphology of these dogs – shouldn’t an x-ray be done to make sure the dog is free of abnormal or missing vertebrae?
- Teeth – we know that breeding, e.g., two of the current style of most brachycephalic dogs will result in puppies with (severely) abnormal teeth.
- And as a basic consideration – should you help to breed a dog that either cannot mate on its own, or where it is likely that it will need surgery in order to whelp?

Without these considerations, are veterinarians normalizing health issues in these breeds? And if they ignore them, what is their motivation (see Chapter 4, Ethical Challenges of Treating Brachycephalic Dogs⁽¹⁾)? Are they prioritizing what owners want over welfare and health concerns for the dog, the offspring, and the long-term health of a breed? These are challenging concerns for veterinarians; but we have all made an oath to protect the well-being of our patients.

My colleague initially raised concerns that if she followed these guidelines, i.e. refused breeding assistance for affected dogs or for mating that would result in high risk/unhealthy progeny, she might lose up to 40% of her practice. That did not change the facts.

Fast forward to 2022 and her practice is changing. They do more in terms of pre-breeding assessments, and refuse to assist in breeding dogs affected with deleterious conditions. She expects that the described aspects of her work – and her income – will be reduced by at least 30% this year. But, as she said, **“Once I saw the problem, I couldn’t ‘un-see’ it.”**

This is a powerful message. This veterinarian and her team delighted in helping clients. But, as her/their understanding of the challenges in certain breeds grew, the conflict between the ethical position for the health of dogs vs. supplying services clients desired grew. Until, finally, she changed her approach to increase focus on dog health and welfare, and breed improvement.

This story brings home several key points.

1. Veterinarians do not want to judge their clients. They respect owners' love for these dogs/breeds. But in the end, professional ethics must prevail – for the well-being of dogs and of the veterinary team, and because it is both ethically right and (increasingly) legally correct.
2. Breeders need to understand the seriousness of this challenge for veterinarians and not revert to blaming vets for 'anti-breed' sentiments. Clients may not worry about these ethical problems – but veterinarians must.
3. Veterinarians taking these positions may initially suffer financially. But public awareness is growing and soon it may be seen as proactive and ethical. However, this is further complicated by the incredible increase in the popularity of these dogs. And some veterinarians will continue to provide on-demand breeding services despite the risks until/unless it is prohibited by law.
4. Any dog should be able to reproduce naturally. Artificial insemination should not be used to overcome innate physical inabilities of the dog; elective c-sections should not be used to replace a natural ability to whelp.
5. What we did, said, thought or didn't think in the recent or distant past does not matter. **It only matters what we do now.**
6. Veterinarians, individually and through their organizations, need to take a leadership position and work collectively with other groups to help create human-behaviour change among the dog-owning public, all breeders (from within and outside kennel clubs), and all stakeholders in dog health and welfare.
7. Parenthetically, this would not be as controversial if breeders followed the guidelines and strategies of their own organisations, e.g. the Fédération Cynologique Internationale (FCI), which say: *"Only functionally and clinically healthy dogs, with breed typical conformation, should be used for breeding;... i.e. to only use dogs that do not suffer from any serious disease or functional disabilities"*. (<http://www.fci.be/en/Breeding-42.html>) Presumably, a problem arises when 'breed typical conformation' includes aspects that are directly related to functional disability and serious disease.

Changing times, changing ethics

We need to remind ourselves that societal morals and ethics change over time as do our tolerance for actions based on personal morals and ethics. A 2019 study looked at 1900-2007⁽²⁾; Figure 1 below shows how attitudes have changed.

"...the present study investigated historical shifts in the cultural salience of multiple domains of morality". "Harm-based morality...rose sharply after 1980" and "points to a growing concern with suffering, care, and protection of the vulnerable." In simple terms, **societal views on acceptable 'morality', especially related to 'harm' have been changing.**

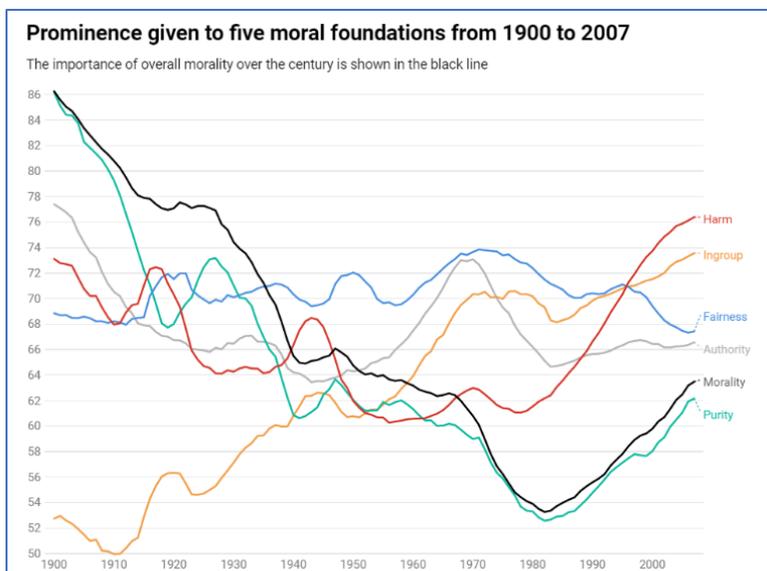


Figure 1. From: "Changing morals: we're more compassionate than 100 years ago, but more judgmental too" March 4, 2019; <https://theconversation.com/changing-morals-were-more-compassionate-than-100-years-ago-but-more-judgmental-too-112504>. Authors from The University of Melbourne ⁽²⁾.

There are many topics we can cite on ‘harm’ and related to health and well-being. For example:

- Smoking – saw a rise and fall over the last hundred years. Once the health implications were appreciated, it took over 30 years to reduce the practice to where it is in many countries today, i.e. you may decide to smoke, but you are not allowed to affect others by your practice. Hence its legislated exclusion from public areas.
- Women’s issues, e.g. control over their own bodies – suffragette actions took hold in the late 1800’s-early 1900’s. Today female equality has made great strides, with further improvements needed in some regions.
- Countries like Canada have been active against the practice of genital mutilations, with our Prime Minister speaking out and saying that he understood that this was embedded in cultural practices for some people – but *in this day and age we have realized that the practice is unacceptable.*
- Indigenous rights – also in Canada there was a long history, relating back to colonial times, of mistreating and ignoring the rights of our First Nations. We are on a path of truth and reconciliation. Many other countries are pursuing similar actions.

“Concern with suffering, care, and protection of the vulnerable”

If we relate these points to the world of dogs – it is time that we drop attachments to ‘traditions’ in breeding where past norms are out of line with our current understanding of dogs as sentient beings, our current commitment to dog health and welfare, and a consideration that, as a dominant species, it is time that we subsume our human desires if they conflict with the needs/rights of other species. Zoos have changed. Does dog breeding need to respond, as well? It seems evident that if this is not done voluntarily, then it will increasingly be addressed by legal and legislative mandates.

This should not be about vilifying the past. As the examples above show it is common for socially acceptable actions to become socially unacceptable. But it is time for ethical and compassionate people to speak up against those that adhere to past norms, expressing sentiments such as, “these dogs have been around for 200 years, and they are just fine” in direct denial of valid scientific evidence – including those supporting such talk on social media.

Many countries have welfare guidelines stating, e.g. that dogs exhibiting deleterious heritable conditions that could adversely impact on the welfare of the progeny must not be used for breeding; but guidelines may not be followed, and enforcement is poor. It is time to examine all breeds and dogs in the light of current science, morals, and ethics; to look at aspects of conformation, genetics (e.g. coefficients of inbreeding), health and welfare and ensure that future generations of dogs will be healthier and have better welfare – regardless of our past actions and norms. I believe there is great hope for most breeds. Some will need considerable help.

If kennel and breed clubs acknowledge and accept these responsibilities they can work together with veterinarians, researchers, and legislators⁽³⁾. If they hold fast to out-dated traditions and allow/promote extremes of conformation and the concomitant health risks, division and conflict may continue. Those disturbed by these sentiments need to consider whether their actions really prioritize the well-being of dogs. Veterinarians – individually and collectively must also examine their personal responsibilities and take appropriate actions⁽⁴⁾. It is time.

*Postscript: I shared this document with my colleague for her approval and she said this: “I know that our short-term pain will lead to longer term gain. And all in this repro group, (vets and vet technicians) are proud of our decision. Today, like many other days, we told another Frenchie breeder that we will not be able to provide repro services for this particular bitch. The owner left angry, and called from the car and complained for another 15 minutes. We have the whole speech on why we made the decision, but most people appear not to see it yet from our point of view. **But I wasn’t so different, trying to justify what I was doing from every possible perspective, until finally, it clicked.**” The honesty, integrity, and bravery of this group does our profession proud.*

Post-Postscript: And there are other veterinary clinics out there taking a similar approach, e.g.: <https://www.valleyvets.net/advice/brachycephalic-dog-breeding-our-position-statement-december-17>. Members are welcome to send us further links to those taking a similar approach.

References:

1. Health and Welfare of Brachycephalic (Flat-faced) Companion Animals - A Complete Guide for Veterinary and Animal Professionals; Edited by Dr. Rowena M.A. Packer and Dr. Dan G. O’Neill; www.routledge.com/9780367207243.
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4. Bonnett, BN on DogWellNet.com: [How do Veterinarians Navigate the Complexities of Health, Welfare, and Owner Attachment?](#)