Ethics and Equine Medicine: Curse, Pipedream, or Opportunity?

David W. Ramey, DVM

Equine veterinarians exercise special knowledge and skill. The use of this special knowledge is governed by society, through laws, as a service to the public. Generally, those governing are not veterinarians. Ethics is a moral endeavor, and even though practical applications of ethics may not always be black and white, a strong code of professional ethics, practiced both individually and organizationally, helps to keep the public’s trust in equine veterinarians and encourages the horse-owning public to continue seeking their advice and services. Author’s address: PO Box 16883, Encino, CA 91416; e-mail: ponydoc@pacbell.net. © 2013 AAEP.

1. Introduction

Ethics is a branch of philosophy that involves systematizing, defending, and recommending concepts of right and wrong conduct. Etymologically, the term ethics originates with horses, coming from the Greek word ethos, meaning “accustomed place” (as in ἡθεὰ ἐπιτω “the habitat of horses”). Late Latin borrowed the Greek word as ethicus, the feminine of which (ethica, for ἡθική φιλοσοφία “moral philosophy”) is the origin of the modern English word “ethics.” One of the earliest examples of a code professional ethics is the Hippocratic Oath.

Equine veterinarians make judgments and informed decisions and possess and apply skills that, in general, the public cannot make and does not have. When members of the public lack training and expertise in any area, they can be easily exploited. Thus, to prevent exploitation of the public and to preserve their own integrity, most professions have internally enforced ethical codes of practice to which members of the profession are expected to adhere. These codes allow a profession to define a standard of conduct. Ethical standards also help maintain the public’s trust in a profession, encouraging the public to continue seeking their services.

2. What Behaviors Characterize Ethical Professional Conduct?

Professional organizations may break down their ethical approach into discrete components. These components include:

- **Honesty**: Truthfulness and straightforwardness along with the absence of lying, cheating, or theft. This would include honesty about the potential effectiveness of treatments being offered.
- **Integrity**: An adherence to moral principles.
- **Transparency**: Operating in such a way that it is easy for others to see what actions are being performed.
- **Accountability**: Answerability, blameworthiness, liability, and the expectation of assumption of responsibility for one’s actions.
- **Confidentiality**: The expectation that the vet-
erinarian will hold secret all information relating to a patient, unless there is consent permitting disclosure from the client.

- Objectivity: Fairness, having no personal stake, factuality, and nonpartisanship (that is, not acting in one’s own self-interest).
- Respectfulness: Courteous regard for people’s feelings.
- Obedience to the law.

Ethical standards and behavior provide confidence to the public about the reliability and actions they can expect when using the services of a professional. They build trust. In maintaining a strong veterinarian-client relationship, trust is essential. Trust can be hard to both gain and maintain, but it can be lost very easily. Still, if veterinarians should act ethically, and if ethical practice improves the public’s perceptions of professions, one might reasonably wonder why it is necessary to have discussions on ethics at all in professional organizations and why ethical practice may sometimes seem to be an elusive goal. To answer these questions, it is necessary to look at the players in the ethical engagement and to examine the obstacles to ethical practice.

People Have Their Own Ethics

Ethics is a philosophical discipline, and it has been argued that ethics is objective, perhaps most eloquently by the Russian-American philosopher Ayn Rand, in books such as The Fountainhead (1943) and Atlas Shrugged (1957). However, one individual’s moral and ethical judgments may be clearly different from another. As such, individuals may disagree about a certain moral or ethical situation, even if they share many of the same morals and ethics.

Nevertheless, it can be argued that some ethics are better than others. If that is the case, it should be possible to ascertain which ethics are better through a critical examination of the reasons underlying one’s practices and beliefs. So, for example, practices that are fairer, more honest, kinder, and more considerate are likely to be considered more ethical than practices that are unfair, dishonest, cruel, or thoughtless, and particularly when such practices are judged by society at large.

Ethical Responsibilities to Oneself

Ethical concerns are more than simply how veterinarians treat animals. Whatever else veterinary medicine may be, it is also a business by which veterinarians support themselves and their families. Although ethical conduct is important to how professionals relate to others, it is also important to consider the ethical responsibilities to oneself.

Unfortunately, the “ethical responsibility to myself,” argument may be used as a justification for putting the veterinarian’s needs above obligations to the horse, the horse owner, or society. Ethics that are overly self-oriented tend to foster irresponsible and dishonest conduct. Under such circumstances, actions become Darwinian, in which the ultimate goal becomes survival (“If I don’t do it, someone else will”). Such Darwinian behavior was captured by Joseph Heller, in his 1961 novel, Catch-22.

“From now on I’m thinking only of me.”

Major Danby replied indulgently with a superior smile: “But, Yossarian, suppose everyone felt that way.”

“Then,” said Yossarian, “I’d certainly be a damned fool to feel any other way, wouldn’t I?”

Ultimately, this type of conduct—even if it is practiced by only one individual—undermines the integrity of both the individual professional as well as of the profession itself.

It can be difficult to be ethical and consider more than oneself, especially if one practices in a world full of competing desires (eg, “The horse first” versus “If we win this class we qualify for the championship!”) and pressures to compromise. If it were easy to be ethical, there would be no need for discussions on ethics. While doing the right thing and acting fairly and ethically is at the foundation of building a professional reputation, there are also times when telling the truth or refusing to perform a procedure may result in the loss of the client and may not be in a veterinarian’s immediate self-interest. There are times when acting ethically carries a cost. Ultimately, the acid test of one’s character and commitment to ethics is whether he or she will do the right thing even if it is not necessarily in his or her immediate best interest to do so.

Ethical Responsibilities to Society (Social Responsibility)

The idea that an individual or an organization has a responsibility to society is called social responsibility. Being socially responsible means that an individual or organization has responsibilities that lie beyond their own immediate self-interest. Whereas the goal of a business may be thought to maximize profits, social responsibilities imply that business activities should also benefit society at large and not be solely devoted to the bottom line. As it concerns equine medicine, this would mean that the success of a particular veterinary endeavor should not only be determined by how much money it makes, but also by how many horses and people it helps. “Equitarian” endeavors, or providing volunteer assistance at rescue facilities, pony clubs, or other organizations, for example, would be good examples of veterinarians fulfilling their ethical responsibilities to society. Such actions benefit the veterinary profession in general by generating good will and positive press as well as the individuals who participate in such endeavors.

Professional organizations such as the American Association of Equine Practitioners (AAEP) also maintain ethical codes to inform society of its ethical principles. If individual veterinary practitioners fail to meet the ethical standards of the organiza-
tion, their membership may be revoked by the AAEP. Such disciplinary action is intended to protect those professionals who act with conscience to practice from being undermined commercially by those who have fewer ethical qualms. Unfortunately, in cases in which professional bodies regulate their own ethics, there are opportunities for such bodies to become self-serving and to fail to follow their own ethical code when dealing with renegade members and in responses to societal pressures. If professional bodies fail to regulate their own ethics, it can cast an entire profession into disrepute and lead to onerous external regulation. Thus, it is as important for professional organizations to act as ethically and responsibly as it is for its individual members.

Ethical Responsibilities to the Client

Veterinary medicine differs from most of human medicine in that the client and the patient are not the same individual (or species). As such, the veterinarian’s role with the client and his or her equine patient is most closely akin to the role of the pediatrician, whose patient is the child, but who has to deal with the parent concerning matters of treatment as well as payment for services rendered.

Although many clients want only what is best for their animals, others—particularly in performance horse disciplines—may have other, competing interests. For example, the goal of getting to the next show, the next race, or the next event may be more important to a client than the health of the horse. Some clients may even be willing to risk injury to the animal in the pursuit of short-term gain. Further, clients can sometimes stand in the way of effective treatment for their horses, however much they “love” them. It is not the ethical responsibility of the veterinarian to simply accede to a client’s demands. The veterinarian’s ethical responsibility to self, as well as the responsibility to the horse, supersedes such demands. Veterinarians who act at the whim of a client also put themselves in a vulnerable position, should a procedure go wrong; the defense, “I was just doing what the client wanted,” is not tenable, should an adverse reaction occur, and the procedure is not justifiable medically. The law generally assumes that the veterinarian’s primary duty is to the animal and not to the client.  

Still, in the eyes of the law, owners also have virtually complete control over their animals, with the exception of the laws barring overt cruelty and neglect. Owners may choose not to treat sick animals, may choose to euthanize a sick animal, or, on the other hand, may demand some therapy to “improve performance” that may not be in accordance with industry standards, or even law. This state of affairs can create a major problem for veterinarians who, embracing the pediatrician model, want to act only in the interest of the horse. The veterinary clinician does not have the power of law behind him or her to force the owner to take (or prevent) action. Thus, although some veterinarians may see their role as analogous to pediatricians, society (ie, the legal system) has not yet caught up with the ethics underlying that view, even though many members of society would probably agree with it.

Aesculapian authority, the traditional “godlike” place of honor given to physicians in society and referring to Aesculapius, the Greek and Roman god of medicine and healing, is probably the veterinarian’s most powerful tool for getting clients to act in the best interest of the animal. However, this authority can easily fail if a veterinarian fails to fulfill his ethical responsibilities. For example, a veterinarian could advocate for an unproven therapy without disclosing the fact that the therapy was unproven, causing the client to waste time and money, with no benefit for the animal. This action would be clearly unethical, lacking both honesty and transparency. If such action were discovered, the discovery probably would reflect poorly on the veterinarian as well as the veterinary profession in general.

Societal Obligations to Horses and Owners

Whereas veterinarians may have ethical obligations to society, society has essentially no ethical obligations to veterinarians, or to horse owners. Societal concerns—undoubtedly expressed by the majority of the population that does not own horses—are simply for the perceived welfare of horses. In general, societal concern for animal welfare is increasing.

For example, society regulates how owners can keep horses, with laws on the books pertaining to horse welfare and abuse. As such, horse owners cannot care for their horses in any manner that they choose, even if those owners proclaim themselves to be horse care “experts.” Owners who fail to care for their horses in accordance with societal standards can have their horses taken away from them; individuals who treat their animals in a particular fashion can be fined or jailed.

There are numerous examples of society’s interest in the ethical treatment of horses. The failure of the Tennessee Walking Horse industry to protect horse welfare has led to Federal legislation banning the practice of “soring.”5 Even though those with “expertise” in that industry may feel that they should be able to use whatever means necessary to get their horses to move in a certain fashion, clearly, society feels differently, and has regulated accordingly. Numerous other examples of societal regulations in the horse world—made with or in spite of advice from the veterinary community—exist, including:

1. Federal legislation banning horse slaughter has been proposed and introduced in the United States Congress several times (The Equine Prevention of Cruelty Act). Although the act has not been passed, these proposed laws were introduced over the ob-
Perceptions of how veterinary medicine is fulfilling its obligations to society are also important. It has been said that, “Perception is reality”; the way others perceive veterinarians is “reality” for the veterinarian. For example, if veterinarians are perceived as, “In it for the money” or as acting in ways deemed merely to protect their own turf—as opposed to acting in the best interest of the horse—society may choose to ignore the veterinarian’s voice when discussing its concerns about horses. Among the most powerful influences on the perception of professions is their ethical conduct.

In November 2012, Gallup polling service released their Honesty/Ethics in Professions survey, rating the honesty and ethical standards of people in different fields. At the top of the list were nurses (85%), people who generally do not make primary care decisions but devote their careers to providing care. On the other hand, professions at the bottom of the list, such as car salespeople and members of the United States Congress, suffer from the perception that their incentives often are not aligned with the interests of their customers. The Angus Reid Three Country Public Opinion Survey found veterinarians to be very highly thought of, with 92%, 89%, and 86% of respondents characterizing veterinarians as deserving of a “great deal” of respect in Canada, the United States, and Great Britain, respectively. In general, individuals whose work requires them to respond to the needs of others—not only medical professionals but others, such as firefighters, military personnel, and teachers—tend to rate very highly in public opinion surveys, whereas those that are seen as being in it for their own benefit—for example, lawyers, politicians, and used car salesmen—tend not to fare well. Ultimately, it will be up to the veterinary profession to decide where on such lists it wants to fall.

Client Obligations to the Veterinarian

Clients have few ethical responsibilities to their veterinarians. One could reasonably assert that clients have an ethical responsibility to pay their bills and to tell the veterinarian the truth about their horse(s), as well as about their concerns and expectations. However, as anyone who has practiced knows, they may not always fulfill those responsibilities. Furthermore, clients have no ethical responsibilities to even use veterinarians; societal concerns, as reflected by law, are that horses are cared for but do not necessarily mandate who provides care. The point is that insofar as a veterinarian-client relationship goes, ethical obligations can be something of a one-way street. In their own interest, veterinarians would be well served to seek out clients who act ethically and who have the best interest of their horses in mind; clients and their horses will be best served by veterinarians with an ethical bent.
Ethical Responsibilities to the Horse

Ideally, in regard to the care and treatment of horses, the ethical responsibilities of horse ownership, societal interests in horse welfare, and veterinary medical treatment should mirror each other, all working together for the best interest of the horse. Ethically speaking, the veterinarian’s moral duty is to the patient; the veterinarian is obliged by the nature of the veterinary profession to act in the best interest of the patient; consequently, veterinarians must avoid orders or requests from the third party that are not in the best interest of the patient.

Unfortunately, client demands—for example, for “better” performance—may not be in the best long-term health interest of the horse. This fact sometimes makes the veterinarian’s goal of ethical practice in the best interest of the horse’s health difficult. In addition, societal concerns—even if they are well-meaning—may not be expressed in ways that are beneficial for the horse. For example, whereas the goal of allowing horses to run free on the range in the American West may be laudable, it may not be in the best interest of the horses if there is not sufficient range to sustain or there is a lack of sufficient predators to control their herds. Nevertheless, by virtue of their special knowledge about horses, ethical veterinarians are in the best position to argue for the welfare of the horse, and it is to the ultimate advantage of both the horse and the veterinary profession that they do so.

3. Responding to Ethical Challenges

Whereas veterinarians have a special authority that helps buttress their legal authority to practice medicine on animals, there are a number of challenges that can confront even the most ethical of veterinarians. The way in which veterinarians handle such challenges will ultimately determine the long-term health of the veterinary profession. Such challenges include the following.

(1) The ability of clients to readily obtain their own pharmaceutical products from on-line pharmacies, feed stores, and so forth. Owners can obtain virtually any substance they believe a horse needs.

Veterinarians have typically made a living by selling two things: products and services. The human medical field has traditionally chosen to outsource its products to pharmacies; this has avoided the ethical conflict inherent in selling a product that an individual prescribes.

The only thing that veterinarians have that is unique is their special knowledge. Individual products do not vary among vendors; the only thing that may differ is price. Veterinarians simply cannot compete with large companies offering drugs at discount prices and would probably be wise not to try to do so. Indeed, some states require veterinarians to write prescriptions for clients to have filled elsewhere if requested by the client for an animal being treated by the veterinarian (veterinarian’s do not have to, and should not, respond to requests for blank prescriptions). The AVMA’s Principles of Veterinary Medical Ethics recommends that veterinarians comply with their client’s wishes and provide written prescriptions if the client prefers having the prescription filled elsewhere, assuming, of course, the existence of a veterinary-client-patient relationship.

The easy availability of prescription medications to clients does not mean that veterinarians cannot act ethically, nor does it mean that veterinarians cannot sell products (although prescribing products that one sells does carry its own inherent conflict of interest). The AVMA notes several advantages when clients purchase their medications from veterinarians, all of which are consistent with good medicine and ethical practice.鈥

- Veterinarians have medications in stock and can provide medications immediately.
- Veterinarians can answer questions, provide instructions for use, and demonstrate how to give medications.
- Medications controlled by veterinarians have the assurance of having been handled properly.

Clearly, there are many types of businesses that show little concern for any of the ethical issues associated with selling prescription medications. However, “fighting fire with fire” by offering drugs on demand is unethical; according to the AVMA Principles of Veterinary Medical Ethics, it is unethical, and in most states, unlawful, for a veterinarian to write a prescription or dispense a prescription drug outside a veterinarian-client-patient relationship. Rather than compete directly against unethical selling of drugs by engaging in that practice, ethical veterinarians might consider other business models, for example, practicing more along the model of “concierge medicine” in human medical practice, focusing on providing care, as opposed to selling products.

(2) Competing non-veterinarian “experts” (in a variety of areas), many of whom state that they provide services about which veterinarians either do not know or do not care (eg, care of the horse’s teeth), and a seemingly endless array of products and services.

Veterinarians are in the business of providing care; horse owners are generally interested in providing the care that their horses need. However, a variety of factors—including advertising, lobbying, differing ideologies, competitive pressures, and economic interests—have led some people to believe that a variety of treatments, supplements, or diagnoses are important for the welfare of their horses.

Veterinarians are uniquely qualified to help clients determine which products and services are good for their horses. By virtue of their special
knowledge about horses and their ability to conduct scientific research, they can help determine whether such products and services are not in the best interest of the horse or of their client’s pocketbook.

It may not be advisable to try to compete against other “experts” on their own turf. For example, equine veterinary “dentists” do not offer an obvious advantage to lay “tooth floaters” in the eyes of clients. If, by virtue of the ethics and knowledge, veterinarians only perform services that are necessary and supported by good science, it will build client trust. Any other attempts to maintain professional hegemony over the horse’s mouth are likely to be derided as “turf protection.”

In that same vein, veterinarians are probably at a disadvantage when competing with chiropractors (who actually have chiropractic degrees), as well as many other non-veterinarian service providers. Similarly, veterinarians who provide special products or supplements may have a difficult time in distinguishing themselves from other purveyors of such products. Veterinarians who engage in such competition risk being viewed as, “In it for the money,” by their peers, and when and if such products are shown to be a waste of time and money, by the public, to the detriment of both the individual veterinarian(s) and the veterinary profession.

The rationale for such products and services is often presented in terms of client satisfaction, for example, “what the customer wants.” Although providing what the customer wants may be thought of as desirable, in human medicine, studies indicate that it may not be desirable. In 2012, a study of more than 50,000 US adults found that patients who grade their care the highest are more likely to have worse health outcomes and accrue more medical expenses than the least-satisfied patients, even after adjusting for factors such as age, income, illness severity, and insurance coverage. Ethical veterinarians should focus on what is best for the horse and not on competing in areas in which they have no special knowledge or training. They will be rewarded in terms of client loyalty when owners recognize that their veterinarian is interested in the welfare of their horse(s), first and foremost.

(3) “If I don’t do it, somebody else will.”

This is a famous and time-honored rationalization known as the “futility illusion.” The rationale is clear enough. An action, for example, administering a forbidden substance to a horse, is objectionable. The concern is that if the veterinarian who is present does not undertake the action, someone else will, and the substance will be administered regardless. Consequently, the conclusion goes, there is no point in not giving the substance, because it will not prevent the action, and business will be lost. The fear is that ethical refusal to do the right thing will only hurt the ethical person without preventing the unethical action. Of course, the rationale is faulty, self-serving, and absurd. If a group of young people were to come across a solitary old person, and one of the group decided that the old person should be robbed and could not be dissuaded, the rest of the group would not be blameless if they decided to participate in the robbery because it was going to happen anyway.

In that same vein, it may also be argued that it is more humane for an unethical procedure (ie, tail blocking, or cutting a tail) to be performed by a veterinarian, with the use of aseptic technique, adequate sedation, and post-procedure analgesia, than it is to subject the animal to the risk of such procedures performed by an untrained individual. When considered in a vacuum, that is undoubtedly the case; invasive procedures should be performed by trained individuals with the use of adequate post-operative analgesia. Whereas the “futility illusion” would still apply under such circumstances, the fact is that the procedure being performed would still be unethical, and its performance by veterinarians would only serve to perpetuate the unethical practice and thus could not be condoned.

The futility illusion is invoked when someone has something to lose (ie, business) by not doing the dubious action, or something to gain (ie, money) by doing it. In fact, there are times when someone else will not do it. In 1989, months before the Berlin Wall fell, Hungarian border guard Bella Arpad refused to obey orders to shoot East Germans crossing to freedom. No one else shot, either, and history changed. Furthermore, the impact of a refusal to actethically can also lead to a good result, even when the action happens. The individual’s determination to do right is always desirable in itself. Under any circumstances, the futility illusion is merely an excuse for not acting in the best interest of the horse.

(4) Providing treatments.

When horses need treatment for disease or injury, it is in their best interest that they receive the treatments that are most likely to be effective. Of course, some conditions—for example, tendon injuries or osteoarthritis—lack universally effective treatments. Thus, new treatment opportunities are being constantly advanced to veterinarians. However, because of any number of factors, including lack of funding, lack of sufficient numbers, and lack of incentive, many such treatments are advanced with little or no evidence of efficacy.

There is certainly nothing wrong with providing new therapies, per se. However, the ethics of informed consent mandate that the person selecting a therapy for his or her horse fully understand:

- the nature of the decision/procedure
- reasonable alternatives to the proposed intervention
- the relevant risks, benefits, and uncertainties related to each treatment
The failure to provide necessary information so that the client fully understands what is known about the potential risks and benefits of a treatment is an ethical failure on the part of the person providing treatment. Furthermore, therapies should not be promoted on the basis of criteria that are not relevant to the likelihood of a successful outcome for the horse (“new,” “natural,” etc).

Other difficult ethical dilemmas may occur when a client’s ideology differs from that of the veterinarian. To take a simple example, consider a horse suffering from chronic laminitis, in which there are no realistic options except euthanasia. Despite many veterinarians’ opinions that euthanasia decisions should be left up to the client, there are cases in which the client refuses to let go, and the horse suffers. Although the owner may choose to try myriad unproven approaches, in such a case, a veterinarian should consider doing whatever it takes to end the animal’s suffering and pull out all stops to persuade the owner to euthanize, if, in the veterinarian’s judgment, the animal has no positive quality of life left. Therapies that lack a good foundation can lead to animal suffering as well as a waste of client resources if they do not work.

If a client demands an essentially harmless but probably worthless therapy, perhaps the best a veterinarian can do is articulate his or her reasons for rejecting the therapy in question but not relinquish the client (and the animal) totally to the treatment. Ethical veterinarians should continue to work with their clients, in part to help ensure that unscrupulous practitioners or the cost of new treatments do not financially bleed them and in part to keep the client focused on objective milestones that signify efficacy or lack thereof.

(5) Self-Policing.

Self-policing is a process in which individuals or groups provide their own discipline and enforce it without outside help. Self-policing allows a profession to maintain control over the standards to which they are held. Stringent self-policing serves as a way to handle internal problems within a profession and is an alternative to public relations campaigns to repair the damage that can occur when such internal problems are exposed.

Unfortunately, self-policing attempts often fail because of the inherent conflicts of interest that occur. For example, whereas the legal profession has a model ethical code and more than 400,000 members, its members are not held in high esteem; in fact, the legal profession is routinely the brunt of jokes about its lack of ethics. An organization may be loath to criticize unethical practice of its members because of fears of bad publicity or loss of membership. However, if the public becomes aware of the failure to self-police, an external, independent organization may be given the duty of policing them. For example, in October 2012, New York Governor Andrew Cuomo completed a takeover of horse racing in the state, hoping to end “...decades of scandal and mismanagement in an industry important to the state.”21

It would follow that individuals should also be active in self-policing their own to maintain a high standard of practice. However, individuals may also be reluctant to criticize colleagues because of fear of being ostracized. Even the vernacular used to describe individuals who point out unethical practice is couched in pejorative terms (eg, “ratting out,” “snitching,” “squealing”). Regardless, outside agencies are more than happy to make sure that veterinarians practice ethically and responsibly; veterinary malpractice is arguably the most rapidly evolving area of the law in the United States.22,23

4. Ethics: Curse, Pipedream, or Opportunity?

Ethics may be perceived as something of a curse, particularly by those who feel that ethical concerns constrain a practitioner’s ability to do what he or she wants. However, the fact is that veterinary professionals cannot simply do whatever they want—even if they are not constrained by ethics, as the law and the legal system stand ready to provide a reminder. If other individuals—veterinarian or non-veterinarian—act free of ethical concerns, any advantages provided by such freedom are short-lived and illusory.

It is probably a pipedream to think that every veterinarian who practices on horses will behave ethically or with the horse’s best interests in mind. However, if ethical practice is perceived as the standard by which veterinarians should operate, it should be possible for ethical veterinarians and the organizations that represent them to lead the fight against such practices. Ultimately, societal concerns about unethical practices result in laws regulating them and open the door to the legal profession to redress complaints through the legal system. Although ethical practice can be a challenge for equine veterinarians, strict attention to ethical practice provides an opportunity for veterinarians to separate themselves from other providers of products and services to horse owners. Ethics is a powerful driver of clients’ perceptions of trust, honesty, and professionalism. If veterinarians are perceived as practicing for the benefit of the horse, their opinions and expertise are likely to be solicited; on the other hand, if they are perceived as being in it for themselves, they may be derided.24 Professional organizations representing veterinarians should advocate strongly for the ethical treatment of horses and especially before public pressure requires that they do so. Leaders can strongly influence unethical behavior in the workplace.25 Vocal advocacy for the welfare of the horse will only serve to benefit veterinarians as well as the veterinary profession.

References and Footnotes


“Primum Non Nocere” (above all, do no harm) is not stated in the Hippocratic Oath. Searches of writings back to the Middle Ages have uncovered the appearance of the axiom expressed in English, coupled with its unique Latin, in 1860, with attribution to the English physician, Thomas Sydenham. An American Gallup survey looking specifically at veterinarians, conducted in 2012, asked veterinarians what was the most important virtue they could bring to their profession. Sixty-four percent of respondents said they considered integrity to be the most important virtue. The survey also asked: If you consider integrity to be the most important virtue, why do you believe this is the case? Eighty-nine percent of respondents said they considered it important to be honest and ethical. Of those who responded, 41 percent cited the Hippocratic Oath as the source of the principle of non-maleficence. Of those who did not, 31 percent cited the American Veterinary Medical Association code of ethics as the source of the principle. Of those who did not, 31 percent cited the American Veterinary Medical Association code of ethics as the source of the principle.

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Veterinarians were not included in the 2012 poll; in the last Gallup survey looking specifically at veterinarians, conducted in 2007, veterinarians scored “very high,” with 71% of those polled viewing veterinarians as having high standards of honesty and integrity.

Veterinary authority is derived from a combination of traits—“sapiential” (ie, special wisdom and knowledge); “moral” (deriving from the overwhelming moral imperative to heal, relieve suffering and retard death); and charismatic (derived from the fact that medicine is still related to magic in the eyes of the scientifically and medically naive; ie, most people). This combination has led to state laws regulating the practice of veterinary medicine.

In human medicine, the practice of “doctor dispensing” is under increasing fire, and some states, including California and Oklahoma, have clamped down on the practice. Available at: http://www.nytimes.com/2012/07/12/business/some-physicians-making-millions-selling-drugs.html?pagewanted=all&_r=0.