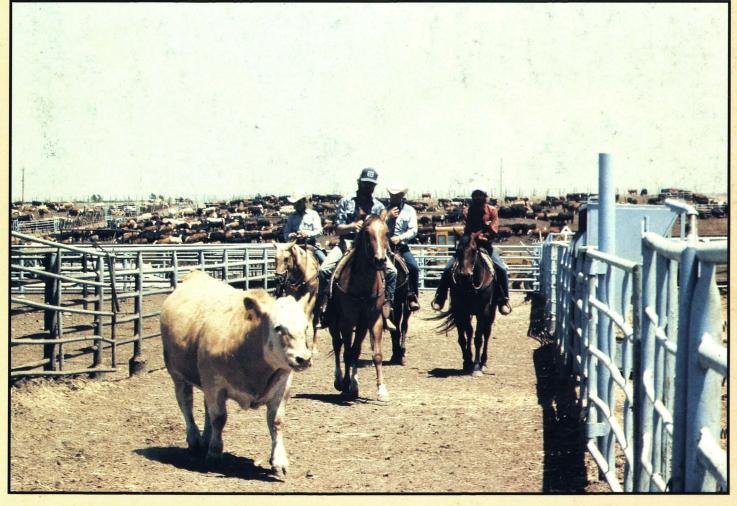
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Vancouver, British Columbia, Canada September 13-15, 2001

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PROCEEDINGS

of the

THIRTY-FOURTH ANNUAL CONFERENCE

AMERICAN ASSOCIATION OF BOVINE PRACTITIONERS

September 13-15, 2001

Vancouver, British Columbia

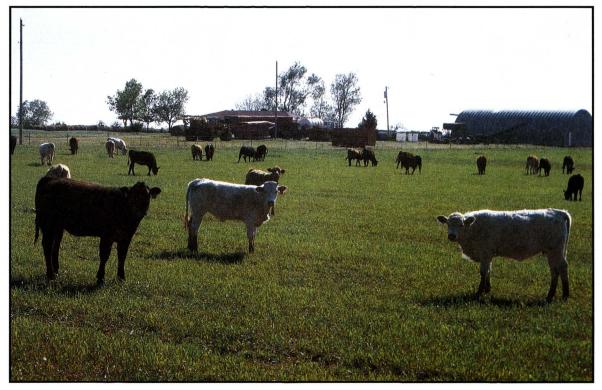


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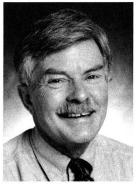
Prudent Drug Usage Guidelines

The production of safe and wholesome animal products for human consumption is a primary goal of members of the AABP. In reaching that goal, the AABP is committed to the practice of preventive immune system management through the use of vaccines, parasiticides, stress reduction and proper nutritional management. The AABP recognizes that proper and timely management practices can reduce the incidence of disease and therefore reduce the need for antimicrobials; however, antimicrobials remain a necessary tool to manage infectious disease in beef and dairy herds. In order to reduce animal pain and suffering, to protect the economic livelihood of beef and dairy producers, to ensure the continued production of foods of animal origin, and to minimize the shedding of zoonotic bacteria into the environment and potentially the food chain, prudent use of antimicrobials is encouraged. Following are general guidelines for the prudent therapeutic use of antimicrobials in beef and dairy cattle.

- 1. The veterinarian's primary responsibility to the client is to help design management, immunization, housing and nutritional programs that will reduce the incidence of disease and the need for antimicrobials.
- 2. Antimicrobials should be used only within the confines of a valid veterinarian-client-patient relationship; this includes both dispensing and issuance of prescriptions.
- 3. Veterinarians should properly select and use antimicrobial drugs.
 - a. Veterinarians should participate in continuing education programs that include therapeutics and emerging and/or development of antimicrobial resistance.
 - b. The veterinarian should have strong clinical evidence of the identity of the pathogen causing the disease, based upon clinical signs, history, necropsy examination, laboratory data and past experience.
 - c. The antimicrobial selected should be appropriate for the target organism and should be administered at a dosage and route that are likely to achieve effective levels in the target organ.
 - d. Product choices and regimens should be based on available laboratory and package insert information, additional data in the literature, and consideration of the pharmacokinetics and pharmacodynamics of the drug.
 - e. Antimicrobials should be used with specific clinical outcome(s) in mind, such as fever reduction, return of mastitic milk to normal, or to reduce shedding, contagion and recurrence of disease.
 - f. Periodically monitor herd pathogen susceptibility and therapeutic response, especially for routine therapy such as dry cow intramammary antibiotics, to detect changes in microbial susceptibility and to evaluate antimicrobial selections.
 - g. Use products that have the narrowest spectrum of activity and known efficacy *in vivo* against the pathogen causing the disease problem.
 - h. Antimicrobials should be used at a dosage appropriate for the condition treated for as short a period of time as reasonable, i.e., therapy should be discontinued when it is apparent that the immune system can manage the disease, reduce pathogen shedding and minimize recurrence of clinical disease or development of the carrier state.
 - i. Antimicrobials of lesser importance in human medicine should be used in preference to newer generation drugs that may be in the same class as drugs currently used in humans if this can be achieved while protecting the health and safety of the animals.
 - j. Antimicrobials labeled for use for treating the condition diagnosed should be used whenever possible. The label, dose, route, frequency and duration should be followed whenever possible.
 - k. Antimicrobials should be used extra-label only within the provisions contained within AMDUCA regulations.
 - 1. Compounding of antimicrobial formulations should be avoided.
 - m. When appropriate, local therapy is preferred over systemic therapy.
 - n. Treatment of chronic cases or those with a poor chance of recovery should be avoided. Chronic cases should be removed or isolated from the remainder of the herd.
 - o. Combination antimicrobial therapy should be discouraged unless there is information to show an increase in efficacy or suppression of resistance development for the target organism.
 - p. Prophylactic or metaphylactic use of antimicrobials should be based on a group, source or production unit evaluation rather than being utilized as standard practice.
 - q. Drug integrity should be protected through proper handling, storage and observation of the expiration date.
- 4. Veterinarians should endeavor to ensure proper on-farm drug use.
 - a. Prescription or dispensed drug quantities should be appropriate to the production-unit size and expected need so that stockpiling of antimicrobials on the farm is avoided.
 - b. The veterinarian should train farm personnel who use antimicrobials on indications, dosages, withdrawal times, route of administration, injection site precautions, storage, handling, record keeping and accurate diagnosis of common diseases. The veterinarian should ensure that labels are accurate to instruct farm personnel on the correct use of antimicrobials.
 - c. Veterinarians are encouraged to provide written guidelines to clients whenever possible to describe conditions and instructions for antimicrobial use on the farm or unit.

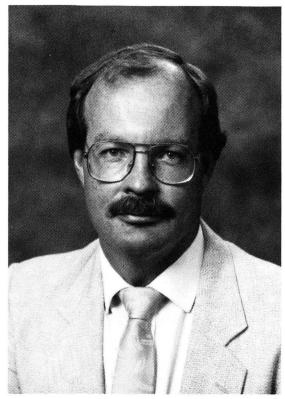


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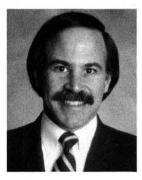


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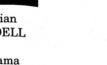
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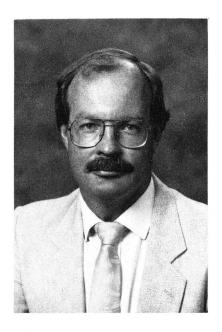
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For brief summary see page 56.

A Message From The President



The year 2001 marks the beginning of a new century. Food animal medicine, and bovine practice in particular, is also embarking on a new era. Not so long ago, our profession concentrated on individual animal health but now that area is diminishing, being replaced with production orientated practice. That is not to say that there will be not be a need for individual medicine in the future. There will always be a need and a place for that. To ignore that aspect of bovine practice would be a disservice to these clients and their animals. They deserve the same high level of care as anyone or anything else. However, our profession needs to recognize a changing market. Global trade, and a world that is shrinking due to information technology, means we are no longer isolated. What we do for our clients will have effects that reach farther and farther. We must learn to take into account trade issues, international commodity prices, political whims, biosecurity issues, consumer issues, etc. if we are continue to maintain our position of the primary source of information and advice for our clients.

This puts AABP in a rather difficult position. It must serve a very diverse and even more widespread constituency. I believe that it does an admirable job of this. Its annual conference is recognized as the leading bovine meeting in the world where there is something for everyone; all leading edge. Just like our clients, if you go above and beyond the norm, it then becomes the expected standard. As good a job as AABP does in representing bovine veterinary medicine and offering leading edge continuing education, it cannot rest on its laurels. It can only continue to offer the latest and best with your help. Without input from the membership, the Board and the various committees, are flying a bit blind. They can only provide what they perceive is needed. I urge you to get involved and express your needs and concerns. With your help, we can continue in this new era with confidence that our profession will become even stronger and that the food we are responsible for will continue to be wholesome, safe, and inexpensive.

In closing, I would like to express my gratitude and thanks to you, the members, for the opportunity and honor of serving as president. Some of my fondest memories and greatest friendships have arisen because of AABP and I will be forever grateful for that.

Best regards

Rod Sydenham DVM

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