

A SURVEY OF THE VETERINARIAN'S PERSPECTIVE OF VELVET HARVESTING OF STAGS

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1. INTRODUCTION

The following are abridged results from a survey conducted in March 1990. The survey was designed to collate practising veterinarians' views on velveting procedures and their opinions on the animal welfare aspects of velveting. The survey was sent to 365 Deer Branch members of whom approximately 330 are vets directly involved in deer practice. There were 110 replies. Comments are as presented and do not necessarily reflect the opinions of the author or the policy of the Deer Branch NZVA.

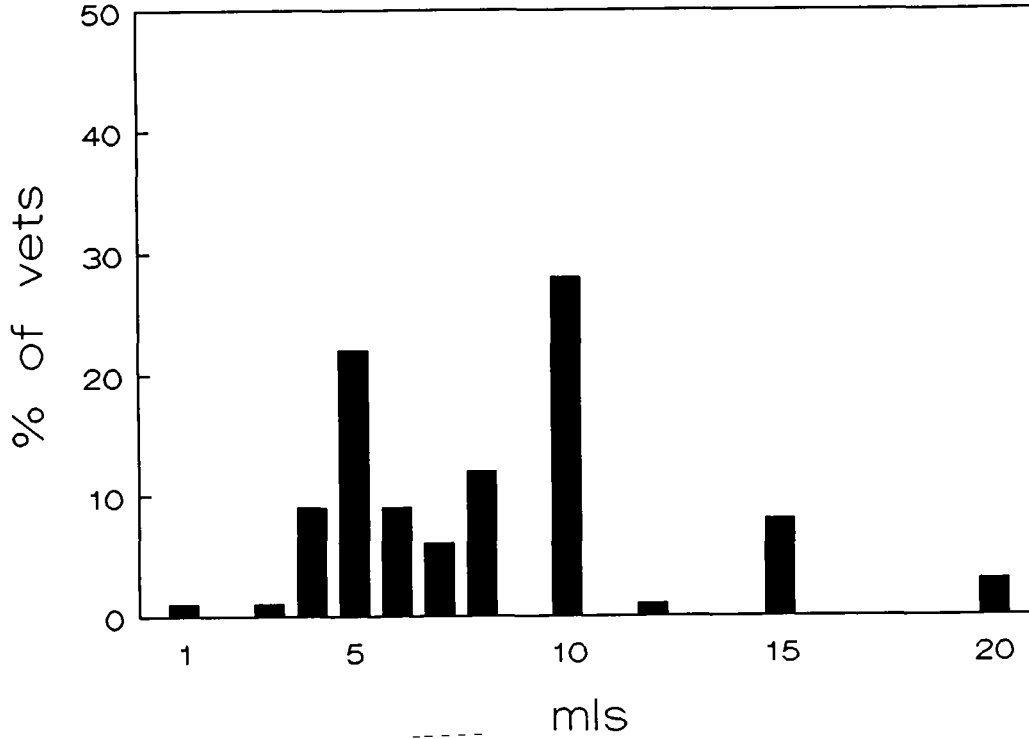
2. SURVEY RESULTS

Note: the questions are exactly as worded in the survey

	Percent
2.1 What do you use to tranquillise stags?	
- always Xylazine	66
- Sometimes Xylazine sometimes Fentaz	16
- Always Xylazine + Fentaz	8
- Sometimes Xylazine)	
- Sometimes Xylazine + Fentaz)	
- Sometimes Xylazine + Stresnil)	5
- Always Xylazine + Stresnil	2
- Always Xylazine + Ketamine	1
- Always Xylazine + ACP	2
2.2 During velveting do you prefer the stags	
- Sternal recumbency	55
- Standing	26
- Standing or sternal recumbency	9
- Lateral recumbency	7
- Sternal or lateral recumbency	3
2.3 Do you use local anaesthesia?	
- Nerve block	66
- Ring block	17
- Nerve block and ring block	15
- No local used	2
2.4 Do you use a tourniquet?	
- Yes	97
- No	3

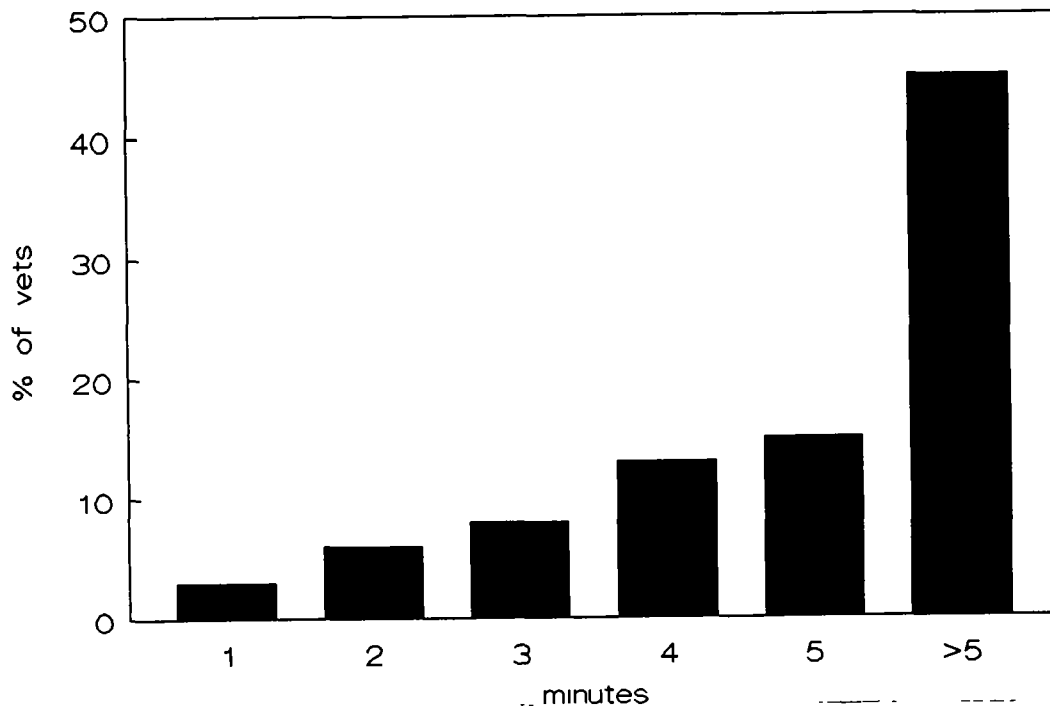
2.5 How many mls of local anaesthetic per antler do you use?

Mls. of local anaesthetic used per antler



2.6 How many minutes do you allow between administering local anaesthetic and velveting?

Time allowed between administration of local anaesthetic and velveting



	Percent
2.7. What material do you use for a tourniquet?	
- Rubber inner tube	64
- Rubber bands	20
- String	9
- Elastic bandage	4
- Rubber cord	3
2.8 How long do you advise the tourniquet be left on for?	
- 10 minutes	41
- ½ hour	36
- 1 hour	17
- 2 hours	6
2.9 Do you cut the velvet from a lateral to medial direction?	Percent
- Yes	37
- No	30
- Yes + no	33
2.10 Do you consider antler removal a necessary deer farming procedure?	
- Yes	97
- No	3

Of all the reasons given for answering 'Yes" 62% stated safety and 14% stated income.

2.11. If answer to Q 2.10 is 'yes" at what stage do you think it is more appropriate to remove (economic consideration excluded)?

79% considered that it was more appropriate to remove antlers at the velvet stage. Reasons included safety of stags, handlers and easier cutting. 13% considered that it was more appropriate to remove at the hard antler stage when no analgesia was necessary and it would eliminate the need to cut off regrowth.

7% considered the late velvet stage when it was just beginning to harden was the most appropriate stage, before a temperament change in the stags and late enough to avoid regrowth.

2.12 Do you think velveting should only be performed by a veterinarian?

78% answered 'yes'. The reasons given included stag welfare - to ensure velveting is done properly and humanely (58 people). The controlled use of dangerous drugs (29 people). To keep animal welfare groups satisfied (10 people) and a vet would be better equipped to deal with any emergencies (10 people).

17% answered 'no'. Many of these people felt that a reliable client could be instructed how to velvet humanely and responsibly. Some felt that ideally it should be vet only but in practice not possible citing geographical isolation and vast numbers as reasons for this stance. 5% answered 'unsure'.

2.13 Describe how you feel about performing velvet harvesting

30% of people stated they felt satisfaction in carrying out a surgical procedure in a correct and humane manner. 33% said they felt quite happy and did not

mind performing the procedure. 18% felt it was a routine job to be done. 13% felt it was not their favourite job.

2.14. Of your deer farming clients what percentage would request you to remove spiker velvet?

None	16%
<10%	9%
10-30%	62%
50%	7%
>50%	6%

2.15 Have you been asked to supply Xylazine for velveting purposes? Do you supply it?

66% answered	yes/no
16% answered	yes/yes
18% answered	no/no

2.16 If yes to #2.15, under what circumstances do you agree to supply the Xylazine?

Circumstances under which Xylazine was supplied included such measures as signed agreements with selected clients. Specific repeated instruction of the procedure with the vet fully satisfied as to the manner in which the velveting was done. Records of volumes supplied and numbers to be velveted.

Concern was expressed by some vets regarding the availability of Xylazine to farmers from external sources.

2.17 Have you been asked to supply local anaesthetic for velveting purposes?

42% answered	yes/no
34% answered	yes/yes
24% answered	no/no

2.18 If yes to #2.17, under what circumstances do you agree to supply local anaesthetic?

Circumstances under which local was supplied included veterinary instruction, farm visits to monitor and records kept of numbers velveted and volumes dispensed.

A number of vets answered yes/no but felt it was becoming harder to resist pressure with more efficient and greater number of crushes being available.

It was also stated that competition from vets who do supply can be a problem.

Two vets expressed concern as to whether farmers would wait long enough for the local anaesthetic to take effect and others were concerned whether the effectiveness of the restraint of crushes would mask pain response in stags.

Two vets felt that local anaesthetic supplied to farmers would be an improvement in some situations where no anaesthetic was used at all.

GENERAL COMMENTS

A number of vets expressed concern that if velveting was made vet only, this would aggravate an already present black market for Xylazine and similar drugs.

A number of vets would like to see a uniform stance by vets on drug supply.

A number of vets cited instances where velveting of stags of all ages is carried out by farmers without the use of tranquilisers or analgesia, and expressed an urgency that these people should be prosecuted.

4. SUMMARY AND CONCLUSIONS

The first part of this survey concerned with velveting techniques indicated some general trends among vets.

The majority of vets (66%) use Xylazine alone to restrain stags followed by those vets who prefer to use a Xylazine plus fentaz mixture (16%).

A hand syringe was preferred by the majority of vets (57%) followed by a long pole (27%) and westergun (17%).

Sternal recumbency was the preferred position of stags for velvet removal. Nerve blocks were more commonly used than ring blocks and rubber inner tube was the most frequently used material for a tourniquet.

Five or alternatively ten mls per antler of local anaesthetic were the most commonly used volumes to deenervate the antler. Perhaps this choice was influenced by simplicity of administration.

Of the times recommended for the interval between administering local anaesthetic and velveting, 5 minutes and >5 minutes shared 65% of the recommendations.

There was a fairly wide range of recommended times for the tourniquet to be left on. 10 minutes and ½ hour shared 70% of the recommendations with the remainder being for a longer period.

The question of what direction the velvet was cut was included to gauge how many vets make use of the fact that the lateral side of the antler receives a more extensive nerve supply than the medial, hence can be a better indication of the effectiveness of local anaesthetic administration when attempting to cut through it than the medial side. Approximately one third of the vets make use of this phenomenon.

The second part of the survey was concerned with veterinary opinion on two main issues - animal welfare aspects of velveting and drug supply by vets for the purpose of velveting.

The majority of vets considered antler removal a necessary deer farming procedure for safety and practicality of deer farming. They felt this was a justifiable procedure when done in a humane and responsible manner, i.e. with minimum pain and discomfort to the stags.

With regard to the velveting of spikers there are differing opinions among vets about the way it should be carried out. Until the stress levels induced by cutting without analgesia and that induced by chemical or physical restraint and placement of local anaesthetic can be scientifically quantified, the difference of opinion will no doubt remain.

At present there appear to be three different views among vets with regard to drug supply to farmers.

1. Those vets who feel velveting should be vet only, to ensure that the tranquilisation, analgesia, removal of velvet and recovery of stags are carried out humanely and responsibly. They also feel that the control and use of drugs should be vet only to ensure safety of both stags and people and for prevention of misuse and abuse of drugs.
2. Those vets who feel that reliable clients adequately trained and seen to be velveting to a required standard would be quite an acceptable practice. The reasons they condone this practice include herds with large numbers, efficient crushes and geographic isolation.
3. Those vets who supply drugs without due consideration of the manner in which they are used.

From the comments made by vets in this survey it appears that at present there are 3 different views among farmers on the way they feel velveting should be done.

1. Those who are happy to have only vets velveting their stags;
2. Those who prefer to do it themselves:
 - (a) with drugs supplied under the supervision of a vet
 - (b) with drugs supplied from an unnamed source,
- or
3. Those who velvet their own stags without the use of drugs.