

News & Views



Letter from the President

I'm pleased to report that the college is doing fine during the closing weeks of my administration. Due to the emphasis on our core mission of credentialing, we have received a record number of candidate applications (75+) during the past two years. Thanks for your efforts to encourage colleagues to pursue certification, and, in many cases, sponsoring and mentoring candidates. This is the sole means by which the college can increase membership and remain viable as a presence, if not a force, for improvement in the fields of veterinary preventive medicine and public health.

I want to recognize and compliment the various committees that discharge the duties and responsibilities of the college so well. The Internal Affairs Committee, chaired by Dr. John Sanders, provides oversight for all activities and publishes our annual report. In the past year, this committee also published a special five year report. Both documents are essential to our functioning under the approval umbrella of the American Board of Veterinary Specialties. The Credentialing Committee, ably chaired by Dr. Francois Elvinger, screened 40 new applications for exam candidacy. They did a terrific job reading approximately 800 pages of application documents in about three weeks time to ensure a timely notification of acceptability. At this point the Examinations Committee enters the picture with the construction of new essay questions, and the selection of multiple choice

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Statement by Russ Currier

The functional year ends in June and planning budget and operations begins at the AVMA convention Executive Board meeting in July. We look forward to seeing many of our members at the AVMA Convention and welcome identification of issues that need to be addressed. Incidentally, we are not a 'skull and cross bones' society so if you want to attend the meeting as an observer – no secret handshake is required; you are welcome to join us on Friday, 18 July 2008. [See schedule in this newsletter.] If you have something to offer, please communicate that to me at ACVPM, P.O. Box 22219, Des Moines, IA, 50325 or by email to evp@acvpm.org. Requests can also be sent to President John Herbold, 21203 Harvest Hills, San Antonio, TX, 78258 or johnherbold@yahoo.com.

I will continue to collect late dues with penalties temporarily waived. Individuals who have not paid dues for 2008 were mailed an invoice a month ago and we welcome payment at soon as possible.

One difficulty with dues involves members who have a permanent change of address. The U.S. Postal Service's

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Statement by President -elect Peggy Carter

I am pleased to become your next ACVPM president. I look forward to working with all of you at a time when our field is 'front and center' in the spot light due to emerging zoonotic diseases and the wide array of activities included under bio-preparedness. The ACVPM supports the One Medicine concept that is now becoming a core session of future AVMA meetings.

President Herbold has showcased ACVPM committee work in his 'president's message' of this newsletter and I echo his recognition of these activities in support of the College. Every year we add a new member to the committees for a three to five year term with the last year serving as chair. Anyone wishing to serve on a committee is welcome, in fact encouraged, to declare their interest to me for consideration. My email address is peggycarterdvm@aol.com.

com. Committee work is more than a chore and affords you an opportunity to impact college operations; broadens your background on what others are doing; and keeps you up to date on what issues are 'hot' of which you may not be aware. In short, it offers great networking - so let me hear from you!

The next two years will focus on using the results of the job analysis to improve the examination process; continuing education of our diplomates; and educating employers on the value of certification. I need your help and look forward to working with all of you in the next couple of years. And in response to President Herbold's Churchill quote above, I wish to offer Thomas Jefferson's statement on becoming ambassador to France after Benjamin Franklin, "I succeeded him because no one could replace him." ■

Report on Jim Steele Lecture Parasites and PIN

This year's Jim Steele Lecture was held at the University of Texas, School of Public Health on 3 April 2008, exactly on Dr Steele's 95th birthday; it was a remarkable event. The address was given by recently retired CDC parasitologist and ACVPM diplomate, Dr. Peter Schantz and entitled "People, Pets, Pigs and Parasites – Helminths in the Homeland." Peter reviewed *Taenia solium* and its somewhat complex cycle, and its association with poverty and substandard living conditions. Neurocysticercosis was also addressed to include episodes in the U.S.; the difficulty of clinical management; and the need to control this parasite, especially in Latin America. Peter commented that this disease is potentially eradicable and sensitive to several control measures in its cycle but it will take commitment and resources to assure its elimination.

Dr. Schantz also addressed common helminthes of our household pets. Demographically, 50% of households in the U.S. have pets, and two thirds of households with children have pets. Visceral larval migrans and ocular larval migrans are 'wandering worms' that wreak havoc especially in children prone to pica in urban areas. An essential key to prevention, Peter observed that "the veterinarian is the ideal person to advise pet owners about pet associated zoonotic infections and how to minimize the risks to humans since 83.6% of dog owners visit a veterinarian each year." Another helminth challenge is canine heartworm that is now distributed in all 50 states with occasional transmission to humans.

Preceding Dr. Schantz's lecture was a noon hour presentation on progressive inflammatory neuropathy [PIN] by Dr. Jennifer McQuiston. She

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Steele 95th Birthday

by Jacob A. Brody

For the past 30 years, I have been working on epidemiology and aging, and if the work goes well, I hope to do it for another 30 years. The formal study of aging, gerontology, and its medical counterpart, geriatrics, are fairly new enterprises. There have always been old people, and there has always been a keen personal interest in the phenomenon and a yearning to be part of it. It is only in the last 50 or 60 years, however, that enough people are studying it to form a new discipline. Yet in this short time we have created our own charlatans, as well as our Scylla and Charybdis*. The charlatans are the antiaging hucksters who fatten themselves on the frail hopes and fears of the elderly. On the Scylla side are adherents to the poetic notion of “the failure of success” which predicts a prolonged sick and unhappy old age, while with Charybdis are the hopefuls who suggest a scenario of minimal sickness in which life expectancy increases with the postponement of fatal diseases and since humans are mortal their deaths would occur soon after the development of costly chronic diseases. This optimistic notion has huge appeal to policy makers and others responsible for providing funds and care in late life. Both Scylla and Charybdis scenarios are patent examples of H.L. Menken’s Meta-law, which states that “for every complicated problem there is a straight forward answer and it is always wrong.”

And in this vein at the end of my talk, I will tell you Jim Steele has done it better than most.

In Northern Europe and Japan, life expectancy is 3 or 4 years longer than in the United States. It is not difficult to understand that these 3 or 4 years are the oldest years that these old people live. At present among French women, almost 45 percent of deaths occur after age 85. I do not know what the *joie de vivre* quotient for French women over age 85 is, but there are

obviously a lot of them who are in the process of finding out.

You may wonder why there is no believable Dr Spock for aging. The need is there, as is a huge and lucrative market.

The problem is that scientific facts are elusive. In the face of being overweight, eating forbidden foods, living with lousy air and water and exposing ourselves entirely too much to doctors, we are living longer than ever.

Uncontested words of wisdom are scarce. Among them are: do not smoke, eat green leafy vegetables, exercise, keep in touch with people and events, do cross word puzzles in ink, be sure to take good care of yourself, and neither a borrower nor a lender be.

The gallop of increased life expectancy in the Twentieth Century produced an unprecedented longer living species. We greet this with exuberance and a degree of caution as our social, economic, health and humanistic structures learn to adapt to the new reality. We also wonder why among countries of the world the United States ranks 42nd in longevity. Epidemiologically, aging manifests itself differently by sex, and in different populations, and there is much to observe through insightful comparisons. As Yogi Berra put it “you can observe a lot by just watching.”

In 1900 life expectancy in the United States was just under 50 years and now is over 76 years. Half the decline in mortality was accomplished by 1920. It is doubtful that the hand of the physician or the social planner



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Steele 95th Birthday continued...

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was prominent in the period during which the greatest mortality reduction occurred. Instead, it appears that improved living conditions, running water, and better nutrition and sanitation were the major factors in the decline. Infants and children stopped dying from diarrhea and respiratory diseases and the leading cause of death became, and still is, heart disease. This pattern has occurred or is occurring throughout the developed and developing world, increasing life expectancy almost universally.

The decline in death rates has not been smooth. From about 1950 to 1970 the rate plateaued and even rose a bit. This was the result of the rise of heart attacks. It appears that heart attacks are a Twentieth Century phenomenon, being first mentioned in the medical literature in 1912. This catastrophic illness, which many of us have had and all of us have seen, at least in the movies, was apparently not just missed by physicians prior to 1912. There are no descriptions of it in the Bible, Shakespeare, Dostoevsky or Dickens. It probably was occurring, but rarely before the Twentieth Century.

Concomitantly with the above-mentioned improvement in sanitation and the environment several factors of improved civilization carried heavy baggage with them, such as the introduction of the cigarette as the smoke of choice, the abundance of fatty foods and a more sedentary work and lifestyle, which resulted in the rise of heart attacks. By about 1970 Allen's Law of Civilization asserted its self. "It is better for civilization to be going down the drain than up it." Doctors quit smoking and they made everyone else do so. The villainy of cholesterol was unmasked and the jogging movement gained momentum. This contributed to a steep decline in death rates with the population over age 65 leading the charge. The fastest growing segment of society became the elderly, which effectively blind sided Social Security and Medicare, Republicans and Democrats.

Evolution has created the human species with no other purpose than to pass its genes to the

next generation. Survival of the fittest has been shaped by cruel history with only one goal – to reproduce itself. After the reproductive years the positive force of evolution diminishes and we are left to work out the rest of life as best we can. On average this latter period lasts from 30 to 40 years and we want all of it and more. Currently at age 65, life expectancy is almost 18 years. At 75 it is 11 years and at 85 is more than 6 years.

Science, medicine and social policy must be allies. We live long because we have learned to postpone the onset, or cure fatal conditions such as heart disease, stroke and cancer. We even manufacture time for our pets and ourselves by extraordinary means such as renal dialysis, artificial hearts and other organs, heroic late life interventions and medication such as insulin and the cholesterol and blood pressure lowering drugs.

Postponement of diseases and conditions of old age turns out to be effective prevention. Late life illnesses tend to increase exponentially in frequency. That means that after a certain age the number of new cases doubles periodically. An example is hip fracture. After about age 40 the incidence doubles every 6 years throughout life with half the cases occurring after age 80. The potential power of postponement suggests that if we delay the onset by 6 years we reduce by about 50 percent the lifetime risk. Other conditions which give again a bad name are Alzheimer's disease, Parkinson's disease, arthritis, loss of vision and hearing, depression and isolation. Important research is under way and is really quite well funded. We can only wish the researchers God's speed.

With mortality postponed we are living for many years at old and vulnerable ages. Life's quality will be reasonable for most of us. Still, increasing the chance that all will experience this desirable outcome requires the means to delay the onset of the physical, physiological, psychological and social events that confront us.

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Steele 95th Birthday continued...

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Let me conclude on a mellow note with some of Satchel Paige's Maxims. This great African American professional baseball player spoke these words upon his retirement from the pro game at age 59.

"Avoid fried meat, which angry up the blood."

"If your stomach disputes you, lie down and pacify it with cool thoughts."

"Keep the juices flowing by jangling around gently as you move."

And finally – "Don't look back. Something might be gaining on you."

It's a pity he did not know about green leafy vegetables.

To conclude, as promised, I will explain the secret of Jim Steele's remarkable success. As you know one of the leading causes of aging is free radicals. These are loose oxygen molecules which rove about causing mayhem. When oxygen comes into contact with iron we get oxidation or rust. When it comes into contact with steel nothing happens.

Thank you for your kind indulgence.

Jacob A. Brody is professor emeritus in epidemiology at the University of Illinois-Chicago, School of Public Health with research interests in aging, cross-national mortality comparisons, long-term care, and age specific onset of diseases late in life. ■

Related Book Review: Plan B 3.0 by Lester Brown

Between the lectures mentioned above, Dr. Steele hosted several attendees in a conference room to discuss a variety of zoonotic problems and economic development issues in Africa. At the conclusion of this meeting, Jim, with generosity of spirit as well as means, provided a copy of Lester Brown's new book -- just released a few months ago -- entitled "Plan B 3.0: Mobilizing to Save Civilization." This wonderful book begins with a chapter that summarizes the world's ecological problems [e.g. sustainability] and ends with a summary chapter on solutions. In between are two major groups of chapters that detail the problems and later detail the solutions. The vision and scope of this book, coupled with its readability, elicits a vision of what we need to do to exercise some

global leadership on climate change, fossil fuels, improved agriculture, etc, etc. I highly recommend this book to our membership. Each copy of the book that was gratuitously distributed contained a book mark signed by Mr. Brown with the inscription: "Hope to have things turned around by Jim Steele's 100th!" It is available -- single copy paperback \$17.00 -- from the Earth Policy Institute at <http://www.earth-policy.org/Books/PB3/index.htm> 1350 Connecticut Ave. NW, Suite 403 Washington, DC 20036 email: epi@earth-policy.org tel: 202.496.9290 x 13 fax: 202.496.9325 ■

Colorado State University Veterinarian Honored with Scholarship Impact Award

FORT COLLINS - Dr. Mo Salman, a veterinarian known for his work bringing international countries together to focus on animal health, has been named this year's recipient of the Scholarship Impact Award, one of the highest annual honors given by Colorado State University.

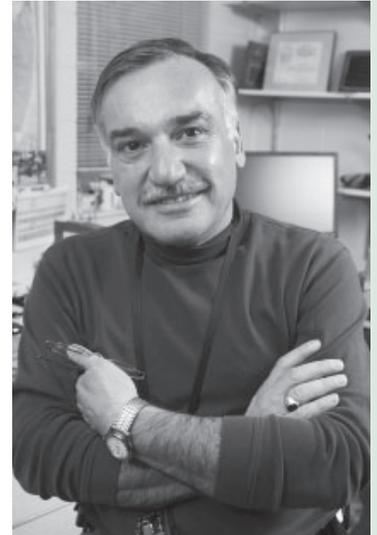
Salman, professor in the Department of Clinical Sciences in the university's College of Veterinary Medicine and Biomedical Sciences, addresses animal health issues that can impact economic and human health across the globe.

Salman was honored with his award at the Celebrate Colorado State! Luncheon on April 29. The award, given by Colorado State's Office of the Vice President for Research, includes \$10,000 to support Salman's research.

Salman has been instrumental in building national animal health program infrastructure

in countries that have recently won independence or been involved in a period of war such as Somalia, Afghanistan and Iraq.

"Dr. Salman's work truly embodies the mission of a great research and outreach university," said Bill Farland, vice president for Research at Colorado State. "His efforts to better society and the world through education and collaboration have indeed had a positive impact on reducing hardship around the world and in boosting the health of human, animals and societies around the globe." ■



Report from American Association of Public Health Veterinarians

Greetings from the incoming president of the American Association of Public Health Veterinarians (AAPHV)! Our current officers are John Sanders (President), Katherine Feldman (Incoming President), Hugh Mainzer (Past President), Heather Bair-Brake (Secretary), and Louisa Castrodale (Treasurer).

Many of you may be puzzled by the various organizations representing public health veterinarians, so I would like to introduce you

to the AAPHV. The AAPHV is an offshoot of the previous Conference of Public Health Veterinarians; both groups were intended as umbrella organizations for veterinarians working in all aspects of public health, in any type of organization. While there are various organizations representing veterinarians in specific public health disciplines or venues (e.g., National Association of State Public Health Veterinarians, Association of Teachers of Preventative Medicine, National Association

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questions from the database that were reviewed and edited last fall. Dr. Mo Salman will complete a special two year term as chair of the Examinations Committee and deserves special recognition for his yeoman's efforts to keep the committee on task with the development of the exam and its subsequent scoring in late June and early July. A Herculean task of major proportions if I may say so. Thanks to Mo and his committee that consists of Drs. David Goolsby, Brian McCluskey, Renee Funk, Dale Moore, and Scott Brooks!!

In other committee work, the Continuing Education Committee, chaired by special arrangement for a second year by Dr. Paul Garbe, has assisted the AVMA with additional authors to complete a new round of Zoonoses Updates. They have also been working to plan a "One Medicine" program for the 2009 AVMA Convention in Seattle.

Other committees continue their work including Membership and Outreach, that arranges the set up and staffing of the ACVPM exhibit during AVMA conventions. I also want to recognize

the Communications Committee that publishes a monthly newsletter edited by the committee chairman Dr. Radford Davis; and the Ad Hoc Study Group Task Force and the Job Analysis Task Force for their past and ongoing efforts.

Finally the Executive Board (EB) members remain very committed to the life of the college and deal with everything from the day-to-day responsibilities, as well as long term plans and strategies. The EB includes Past President Dr. Patty Scharko, Secretary/Treasurer Dr. Candace Jacobs, and three councilors Drs. Liz Wagstrom, Kevin Grayson, and Gary Bowman. Ex officio members include Dr. John Sanders and Dr. Beth Karp, President, Epidemiology Specialty. My successor is Dr. Peggy Carter who will ensure we improve the college even more in the next two years. As Winston Churchill observed, "It is no use saying 'We are doing our best.' You have to succeed in doing what is necessary." Peggy is a seasoned leader and fully vetted and will rise to the task with my continuing support.

John Herbold ■

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assisted in the investigation in Austin, MN and later in Nebraska and Indiana pork processing plants. Conclusions from the study were reported two weeks later in a 'late breaker' abstract at the Epidemic Intelligence Service Conference: PIN appears to be associated with working closely with swine heads during post slaughter processing, and specifically with removing brains with compressed air. Three slaughterhouses using a similar technique have stopped brain removal. Investigation into an etiologic agent continues. ■

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forwarding period is very short and speaks to the need for members to access the database to keep your listing updated. Having difficulty accessing the database? Please contact Joe Adam, webmaster at jadam@acvpm.org for assistance with your login or password. Individuals who do not have Internet capability can post a note to our offices.

Finally, although this job has been gratifying in so many ways, I do plan to step down in June 2009, therefore a replacement will be sought in the second half of this year. If you are under-employed and interested in this position we welcome your expression of interest this fall. The job requires computer skills [Word, Adobe, Excel & website maintenance], correspondence competencies, and budget management. An Executive Vice President SOP will be available this fall for review by interested parties. ■

Linking Human and Animal Health

By Laura H. Kahn, Bruce Kaplan and Thomas P. Monath
The San Diego Union-Tribune May 19, 2008

This election season voters must decide which candidate will improve the nation's security and well-being. It is troubling, then, that a clear and present public health and security issue has been all but ignored by the campaigns – protecting citizens against pandemic disease threats and bioterrorism.

Anthrax, avian influenza (known as “bird flu”), SARS (severe acute respiratory syndrome) and viral hemorrhagic fever are well known to many voters – not the least of which because two of these examples may be used by terrorists seeking to conduct bioterrorism attacks on American soil.

What many citizens and policy-makers may not realize, however, is that all of the above diseases, and many more, are transmitted from animals to humans, and are dubbed “zoonotic diseases” for their ability to jump species. And how the federal government and public health departments around the country respond to such possible pandemic disease threats is critical to the safety of millions of people.

For example, when the first outbreak of SARS occurred in China in late 2002, the Chinese government was slow to acknowledge the outbreak and respond appropriately, and ultimately thousands were unknowingly infected with the disease – many of whom had traveled by air around the world, spreading the disease beyond China's borders. Hundreds died, and public health experts saw this example as an ominous warning.

In addition, since the strain of bird flu classified as H5N1 re-emerged in Southeast Asia in 2003, thousands of birds were infected, and more than 200 people died. Governments have been forced to kill millions of birds, particularly poultry, to try and quell the spread of disease.

Indeed, H5N1 is viewed by many scientists as one of the worst possible pandemic threats we may face, potentially more deadly than the strain of avian flu that killed 58 million people around the world in 1918-19.

While the United States can't control how other

countries respond to global pandemics that may ultimately infect or otherwise impact Americans, we can be better prepared at all levels of government to respond to a major zoonotic disease outbreak or bioterrorist attack.

And so the presidential campaigns have a unique opportunity to spread an important message about how we can better protect the homeland.

But how should policy-makers and health professionals respond? Most important, the U.S. government must encourage far greater collaboration between human and veterinary medicine to both recognize and respond to emerging infectious disease threats.

Human beings for millennia have depended upon and lived with animal species, and both have derived mutual benefits: food, companionship, work service, even recreational sports. However, both have suffered from similar and frequently identical diseases that have severe public health, security, and even economic implications.

This is not a new or radical idea. It has been around for centuries and recognized by medical visionaries. For example, in the 20th century a veterinary scientist and eminent public health expert, Dr. Calvin Schwabe, coined the term “One Medicine” – now called “One Health” – to describe how human and veterinary medicine could offer better health by joining forces. Implementing the One Health concept is more than a marriage of convenience – it is a union of utter necessity. A cornerstone of public health and the prevention and control of possible epidemics such as bird flu, SARS or West Nile virus is effective surveillance and early detection of diseases.

Moreover, medical advances from understanding basic biological principles to developing vaccines, therapeutic drugs, and more effective surgical procedures for different species would be realized more expeditiously.

Such collaboration works. As an example, Rolf Zinkernagel and Peter C. Doherty, a physician and veterinarian immunologist, respectively, discovered how both human and animal bodies distinguish normal cells from virus-infected cells – an advance that benefited humans and animals alike. For their achievement, they were awarded

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of Federal Veterinarians, etc.), it was felt that one organization representing the diversity of veterinarians working in public health would provide valuable collaborative and networking opportunities, and its membership could reach a critical mass in order to qualify for representation on the American Veterinary Medical Association's (AVMA) House of Delegates (HOD). While representation on the AVMA HOD was the original intent, it has never been realized due to a number of administrative and logistical challenges.

AAPHV officers are now exploring the feasibility of working towards HOD allied group status so public health veterinarians would be truly represented in the world of organized veterinary medicine. The first step in this path is to determine the level of support among current AAPHV members, including ACVPM diplomates, for this effort. Currently, ACVPM diplomates are automatic members of the AAPHV, without paying additional dues. To this end, we will soon send out an electronic survey to our members and we ask that you take the few minutes required to complete it.

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the 1996 Nobel Prize in Physiology or Medicine. And earlier in the 20th century, the control of rabies in animals – a critical public health worry at the time – was largely due to collaborative veterinarian-physician interactive knowledge. The development and utilization of effective vaccinations for dogs and cats as a barrier against human disease, surveillance of wildlife (such as bats, foxes, raccoons and skunks, which continues today) with appropriate public communication alerts, vaccinations and joint physician-veterinarian public education campaigns dramatically reduced risks from this deadly disease.

An all-inclusive approach wherein physicians, veterinarians and other allied health scientists at every government level – federal, state and local, plus at research institutions – working side-by-side and sharing each other's respective areas of expertise, would provide many breakthroughs for improving and protecting the lives of America's citizens. It is time this issue received the

We hope you will join us at our upcoming meeting to be held jointly with the National Association of State Public Health Veterinarians (NASPHV) on Sunday July 20 from 12-2 p.m. (location TBA) at the AVMA Convention in New Orleans. Business to be conducted will include inducting the new president, electing the President Elect, and discussion to qualify for HOD representation. Please submit any nominations for President Elect to Heather Bair-Brake (hhb9@cdc.gov).

To learn about membership in the AAPHV, please contact our Treasurer, Dr. Louisa Castrodale, at aaphvtreasurer@gmail.com. If you have any suggestions or want to get involved, do not hesitate to contact me by email, kfeldmandvm@aol.com. I look forward to seeing you in New Orleans!

Respectfully,
Katherine Feldman, DVM, MPH
Incoming President, AAPHV

attention it deserves.

Kahn, a physician, is a research associate at the Program on Science and Global Security at Princeton University's Woodrow Wilson School. She can be reached via lkahn@princeton.edu. Monath, a physician, is a partner at the Pandemic and Biodefense Fund, Kleiner Perkins Caufield & Byers. He can be reached via thomasm@kpcb.com. Kaplan is a veterinarian. He can be reached via bkapdvm@verizon.net.

Epidemiology Specialty News

Epidemiology Specialty members voted in May on proposed amendments to the By-Laws of the Specialty. Thirty-two members voted unanimously to adopt the amendments. The most significant change to the By-Laws was the addition of an appeals procedure to meet requirements of the American Board of Veterinary Specialties (ABVS). Other changes were made to provide clarification, remove conflicts with the ACVPM Constitution/Bylaws, and correct typographical errors and inconsistencies. The updated By-Laws will soon be posted on the ACVPM website.

Dr. Dale Moore, Director of Veterinary Medicine Extension at Washington State University, was recently elected Secretary of the Specialty. Her two-year term will begin this summer. I would like to extend my sincere thanks to Dr. George Moore for his service as Secretary of the Specialty for the last two years.

The annual meeting of the Epidemiology Specialty will be held in the Prince of Wales Room at the Hilton New Orleans Riverside Hotel on Sunday, July 20, 2008 from 1:00 to 3:00. All Specialty members are encouraged to attend.

The Continuing Education Committee has organized an Epidemiology Hot Topics session for the AVMA Annual Convention in New Orleans. The five-hour session is scheduled for the afternoon of Saturday, July 19, 2008. Presentation titles and speakers are listed below:

- 1:00-1:50: Global Applications of Epidemiology, Leon H. Russell
- 2:00-2:50: Risk Assessment for Production Decision Making: Modeling Introduction Risk and Impact of BVD in Cow-Calf Herds, Michael W. Sanderson
- 3:00-3:50: Plum Island Animal Disease Center—Responding to High Consequence Foreign Animal Diseases, Lawrence R. Barrett
- 4:00-4:50: Teaching, Preaching, and Practicing Companion Animal Epidemiology, George E. Moore
- 5:00-5:50 -The Accidental Epidemiologist: How an Inadvertent Choice Made for a Wonderful Career, Michael G. Groves
- Can Beef Cattle Systems be Managed for

Food Quality, Safety, and Security? David R. Smith

-Veterinary Epidemiology in the Public Health Service, Sean F. Altekruse

-How a Veterinarian Survives as a Medical Epidemiologist in the “Human” World, Elizabeth L. Hannah

Two EXCELent Epidemiology workshops will be taught by ACVPM and Epidemiology Specialty Diplomates in New Orleans. There will be a basic workshop the morning of Saturday, July 19, 2008 (Event ID 5623) and an advanced workshop the morning of Sunday, July 20, 2008 (Event ID 5624). There is a \$35 fee for each workshop and advance registration is required. As of May 20, 2008 there were two slots available for the basic workshop and four slots available for the advanced workshop. Please see the AVMA Convention website for further information and registration. After accessing the AVMA Convention website (<http://avmaconvention.org/>), click on the “CE Session Finder” icon and enter the Event ID number listed above.

Two ACVPM Diplomates will take the Epidemiology Specialty examination this summer. Dr. Susan Trock, Chair of the Examinations Committee, will administer the exam on Friday, July 18, 2008 in New Orleans.

Please consider volunteering for one of the four committees of the Epidemiology Specialty (Examination; Credentials; Nominations; and Continuing Education). Several committee members will be completing their terms in July. The committees and their current members are listed on the Epidemiology Specialty website. If you are interested in joining or learning more about a committee, please let me know!

Beth Karp, DVM, MPH
President, ACVPM Epidemiology Specialty
birddog@qis.net
(301) 980-9247

Meeting Room Assignments for AVMA Convention, New Orleans

Thursday, July 17, 2008

8:00 am – 5:00 pm ACVPM Examinations Committee Meeting – Grand Salon Section 04, Hilton New Orleans Riverside

Friday, July 18, 2008

8:00 am – 12:00 pm ACVPM Examinations Committee Meeting – Grand Salon Section 04, Hilton New Orleans Riverside

8:00 am – 5 pm ACVPM Executive Board Meeting – Rosedown, Hilton New Orleans Riverside

Sunday, July 20, 2008

1:00 pm – 3:00 pm ACVPM Epidemiology Specialty Annual Meeting – Prince of Wales, Hilton New Orleans Riverside

3:00 pm – 5:00 pm ACVPM General Business Meeting – Grand Salon Section 19 & 22, Hilton New Orleans Riverside

Monday, July 21, 2008

5:30 pm – 7:30 pm ACVPM Forum on Prevention for One Health – Blaine Kern Ballroom AB, Marriott New Orleans at the convention Center

Note: The One Medicine Symposium on Monday-Tuesday, 21-22 July 2008 will be held in the Convention Center. Check AVMA program for details.

Awards and Honors Solicited

Any ACVPM diplomate who received an award during the past 12-15 months is requested to notify the EVP and provide a brief summary of the honor or award. The EVP will compile a list and forward it to the Nominations and Awards Committee for review and possible inclusion at the ACVPM exhibit display during the AVMA Convention in New Orleans. Please submit all notifications to evp@acvpm.org no later than 15 June 2008. Thank you!

Death Notices – No Obituary Available

Edwin A Beckcom Jr, 6 November 2007

Edwin W. Lindquist, 27 December 2007

* Editor's Note - Since some readers may not have a classical education, here is explanation from Rodale's The Phrase Finder:

CHARYBDIS

Charybdis suggests Scylla and Charybdis, the former a dangerous rock on the Italian side of the strait of Messina, the latter a whirlpool on the Sicilian side. In the *Odyssey* Homer pictures the Sicilian side of the strait as a low rock containing an immense fig-tree, under which dwelt Charybdis, who thrice every day swallowed down and sucked in the waters of the sea and three times threw them up again. The phrase "between Scylla and Charybdis" consequently means to be beset by danger whichever way one turns.

a Scylla and Charybdis situation

SCYLLA

Scylla, of Scylla and Charybdis fame, was actually a dangerous rock on the Italian side of the Strait of Messina, in avoiding which seamen had to steer into Charybdis, an equally dangerous whirlpool on the Sicilian side. The ancients personified her as a monstrosity, daughter of Crataeis, and believed that she barked like a dog and had 12 feet and 6 long necks and heads, each of which contained 3 rows of sharp teeth. Vergil, differing from this Homeric account, speaks of several Scyllae and places them in the lower world. Following the prevailing accepted description as given in the *Odyssey*, however, when we speak of being between Scylla and Charybdis we mean to be beset by terrific difficulty however we move.

appeasement or war? Scylla or Charbydis?