

Pack pooches in the cargo hold, CMA says

Stick Fido in cargo. Leave Fluffy with relatives. Put Rover in a kennel. Bring your pet anywhere you want when you go on vacation, as long as it's not the cabin of your plane, urge Canadian Medical Association delegates.

A motion to recommend a ban on pets travelling inside passenger cabins on all Canadian passenger planes was carried on Aug. 23 at the CMA's 144th annual general meeting in St. John's, Newfoundland and Labrador. The motion was moved by Dr. Mark Schonfeld, chief executive officer of the British Columbia Medical Association, who says the rights of people with pet allergies to travel without respiratory problems trumps the rights of animal lovers to travel with their pets.

"We need to have some national regulation on preventing this sort of willy-nilly exposure of people on flights to pets in the cabins," says Schonfeld, a general practitioner in Vancouver, who suggested that certified service dogs be exempted. "We need to take a more proactive approach. The illness aspect has not been given enough profile. It's been mostly about, 'I have my pets and I have my rights.' But it's the right of each individual Canadian to breathe clean air. The problem is, if you are in a confined space at 30 000 feet, you cannot get away from the exposure."

For Schonfeld, it's a personal issue. His wife has severe animal allergies and must carry an EpiPen on planes. During a recent trip, exposure to a pet in the aircraft cabin led to a terrible asthma attack that left her sick for three or four days after. Dr. Bradley Fritz, another BC physician, told a similar story. On a recent flight to California, his wife had an asthma attack that resulted in her hospitalization. "It makes no sense," Fritz said in support of the motion. "Pets should not be up there."

Besides, placing pets in the cargo hold during flights is hardly a hardship, either for the animal or its owner, says Dr. Larry Erlick, a family physician in



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Scarborough, Ontario, and the owner of a beagle named Hunter. "As much as I love animals, they can travel in accommodations other than the cabin, even if

they are separated from you for a few hours," says Erlick. "There comes a time when individual issues may put society at risk. The other issue, more

importantly, is that there is a potential for life-threatening risk, as with peanuts. Are we able to respond to that risk at 30 000 feet? The answer is: No.”

Most delegates rose in support of the motion, though one suggested that it was not the role of the CMA to influence how citizens travel. A ban on dogs in airplane cabins would just raise a host of other questions, she suggested. Should pets be banned from taxis? From buses? From trains? Why should service animals be exempted? Do they not induce the same allergic reactions? For these and other reasons, she said, CMA should keep its nose out of commercial travel.

Another motion that generated considerable discussion was a request that

CMA oppose the sale of undergraduate training positions to foreign students if it negatively affects Canadian applicants’ opportunities or education. One delegate suggested that, in light of the national physician shortage, it was not in Canada’s best interest to fund the education of doctors who “will not service Canada,” especially when there are so many qualified Canadian applicants compelled to seek medical education in other countries, at great financial expense. Canadian medical students studying abroad struggle to find residency spots in Canada, another delegate noted, making their eventual return home more difficult. And if medical schools become dependent on foreign funds to survive, another delegate

warned, it could mean that other countries would “have influence on the educating of our doctors.” The motion passed.

Other successful motions included one to recommend that over-the-counter medications containing acetaminophen have prominent warning labels about the risk of overdose; one to support policies that target specific determinants of health and populations rather than “population health” in general; one to improve access to dental care for low-income Canadians; and one to encourage increased formal training in advocacy for medical students. — Roger Collier, *CMAJ*

CMAJ 2011. DOI:10.1503/cmaj.109-3983