

March 21, 2013

M^e Steve Magnan
Directeur des Poursuites Criminelles et Pénales
Palais de justice de Québec
300, boulevard Jean-Lesage
Québec (Québec) G1K 8K6

Re: Request for Investigation Action Regarding Laval University's Use of Live Piglets for Pediatrics Residency Training

Submitted via Facsimile (418-646-4919) and Postal Mail

Dear M^e Magnan:

I am writing on behalf of the Physicians Committee for Responsible Medicine ("PCRM") to request that the Directeur des Poursuites Criminelles et Pénales investigate Laval University ("Laval") for violations of the Animal Health Protection Act. Laval regularly violates Quebec law by subjecting live piglets to "abuse" and "ill-treatment" in the school's pediatrics residency program. We ask you to investigate the live animal component of this training program and take steps to prevent further violations of Quebec law.

Unlike other Canadian pediatrics residency programs, Laval's program involves the use of live animals. According to documents obtained by PCRM from Laval via Quebec's public records law, each resident is instructed to make an incision between a piglet's ribs, insert tubes into the chest cavity, insert a needle into the abdominal cavity, cut open and insert a needle into an animal's veins, and insert a needle under the breast bone and into the sac surrounding the heart. The piglet is then killed and residents are instructed to make incisions in the animal's throat, into which a tube is inserted. These activities constitute "abuse or ill-treatment" specifically prohibited by Quebec's Animal Health Protection Act, R.S.Q., c. P-42, s. 55.9.2(4).

According to the animal use protocol obtained via Quebec's public records law each year Laval uses 24 piglets weighing just 8-9 kg for this training.¹ These piglets are sold to Laval by Ferme Aldo Inc., a pig farm based in St-Lambert-De-Lauzon, Quebec.

Although the Act permits the use of animals for "teaching," section 55.9.15(1) requires that all such activities be "practiced in accordance with generally recognized rules." In medical education, standards and common practices for training physicians constitute accepted rules.

Laval's animal use protocol justifies the use of piglets by claiming "there are no satisfactory options allowing realistic demonstration and practice of all the procedures (thoracic drainage, pericardiocentesis or cricothyroidotomy) other than the high-fidelity animal model." This statement is simply untrue. Multiple human-based simulators are available that allow these procedures to be taught without the use of live animals. Laerdal's infant simulator, SimBaby, can

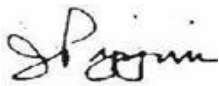
¹ Received by PCRM in French and translated by Schreiber Translations, Inc.

be used to teach thoracic drainage (chest tube insertion),² as can CAE Healthcare's BabySim infant simulator.³ Laerdal's SimNewB can also be modified in a way that it can be used to teach residents pericardiocentesis – a method developed by the University of Arizona College of Medicine.⁴ Newborn cricothyroidotomy can be taught using BUYAMAG, Inc.'s Airway Newborn simulator.⁵ Simulab's TraumaChild System – a realistic anatomical human body simulator that comes with lifelike human skin, subcutaneous fat, and muscle – can teach cricothyroidotomy and peritoneal wash,⁶ another procedure for which piglets are used at Laval. Gaumard's Nita Newborn V800 newborn simulator can be used to teach central venous access,⁷ also taught at Laval using piglets.

A 2007 article in the official journal of the Canadian Paediatric Society outlined the utility of medical simulators like those mentioned above: “High-fidelity simulators are life-like mannequins connected to computer systems that control the physiological and physical responses of the mannequin. These simulators are able to provide direct feedback to learners in safe, risk-free environments. This technology has been used to teach all aspects of medical care, including medical knowledge, technical skills, and behavioural training or communication skills.”⁸

We believe that Laval University should be held liable for subjecting piglets to “abuse” and “ill-treatment” in the course of “teaching activities” that are not “practiced in accordance with generally recognized rules.” Thus, we request that you investigate the live animal component of its pediatrics residency curriculum as soon as possible. We thank you for your time and are happy to provide whatever assistance you may need.

Sincerely,



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² <http://www.laerdal.com/us/SimBaby#/specs>. Accessed February 8, 2013.

³ http://www.caehealthcare.com/home/eng/product_services/product_details/babysim#block_37. Accessed February 8, 2013.

⁴ http://astec.arizona.edu/sites/astec.arizona.edu/files/pdf_files/ASTEC%20Hydrops%20Fetalis%20Poster.Pdf. Accessed February 8, 2013.

⁵ http://www.buyamag.com/cpr_models_manikins.php. Accessed February 11, 2013.

⁶ <http://www.simulab.com/product/surgery/open/traumachild-system>. Accessed February 8, 2013.

⁷ <http://www.gaumard.com/nita-newborn-v800/>. Accessed February 8, 2013.

⁸ Cheng A, Duff J, Grant E, Kissoon N, Grant VJ. Simulation in paediatrics: An educational revolution. *Paediatr Child Health*. 2007 July; 12(6): 465–468.