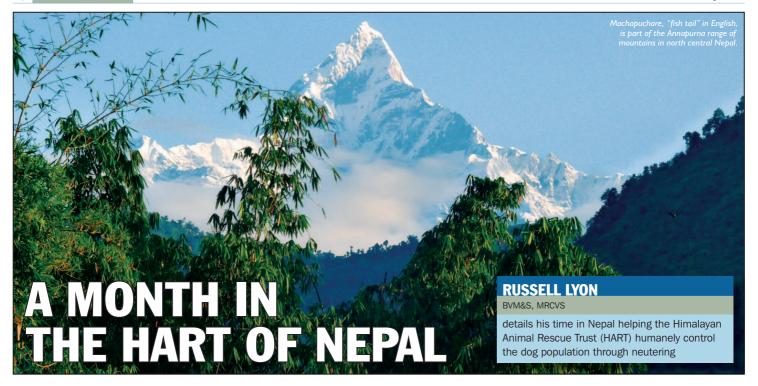
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WHEN I first agreed to work for the Himalayan Animal Rescue Trust (HART) in Nepal, I deliberately avoided talking with people who had travelled to the Himalayas, as I wanted to have my own impressions of the country.

I bought a Lonely Planet guide to Nepal, but gave it no more than a cursory glance before heading off to Heathrow and it was not in my hand luggage. However, I did listen to two pieces of advice.

The first was: "Get to the right side of the plane when flying from Kathmandu to Pokhara - you will then get a fantastic view of Annapurna as you come into land." I did a budget airlinetype sprint across the apron, got the correct seat and... of course the mountains were completely obscured by clouds. I couldn't see a thing.

The other bit of gratuitous advice was: "Keep your mouth shut when having a shower, as you do not want to swallow any Nepalese tap water." That seemed quite sensible, but as my shower was a hosepipe, which would not connect to the shower handle, the information was wasted on me

I was in Pokhara at the invitation of HART, to assist its work in improving the life of the many dogs and cats in the city and the surrounding area. The brief was also extended at the last moment, when it was realised I had equine experience, to allow me to participate in raising the welfare standards of equines in the region, which are used for trekking and transportation.

Pokhara is the second largest city in Nepal and is under the shadow of the Annapurna mountain range. On a clear morning, the view of the mountain peaks from the town is awe-inspiring. To get the full effect, you need to wake around five in the morning and take a taxi to Sarangkot to watch the sunrise over Annapurna, turning the snow-clad peaks to pink and gold.

I escaped the squalor, filth and air pollution of Kathmandu as quickly as possible. A day in that atmosphere without a face mask was enough to remind me what it was like to have asthma. Fortunately, the air was fresh and clean in Pokhara. I was certainly going to stay.

Nepal is a very poor country and, when the necessity of dayto-day living is often just survival, animal welfare has a low priority. Dogs roam the streets foraging for food on rubbish heaps in most towns and villages, often competing with cattle that have similar needs. A fortunate few are fed by the local communities and the dogs, in turn, guard and protect those that care for them.

Endemic

Rabies is endemic throughout Nepal and animals and humans die every year. Until recently, the authorities used strychnine in an effort to control the number of animals living on the streets and consequently keep rabies in check. It's a horrifyingly awful way to die. During my time in Nepal, there was a report of street dogs still being killed in this way in a district of Kathmandu. Many died in agony, and the risk of the poison leaching from dead bodies and unconsumed bait is a huge public health hazard

HART was set up with a base in Pokhara to demonstrate, in collaboration with other welfare groups, that there has to be a better way to control the dog and cat population and eliminate the risk of rabies.

The HART slogan proclaims on its literature, "No babies, no rabies

The success of the humane control of the dog population in Pokhara through neutering has been an example to the rest of Nepal. Every animal spayed or castrated is vaccinated against rabies and the evidence that it has been done is there with a marked notch in the left ear for people to see.

The work does not end there, however, as the message has to be spread throughout the community. Leaflets are given out and schools visited to demonstrate how people, especially children, should behave with street animals to avoid risk to themselves and the animals. Children will learn about rabies at school. but most are still unaware they could be infected - not only through a bite, but also by being licked by a rabid animal. HART distributes explanatory leaflets in the schools when visits are made. I have been told if a dog suspected of having rabies bites a person, the animal is liable to be stoned to death.

HART was started by Barbara Webb and Jim Paterson, who felt they must do something for the street dogs of Nepal and became involved in welfare work. They set up HART about three years ago and recruited Khageshwaar Sharma to be a director in Nepal. The "HART family" in Pokhara HART record for the most dogs neutered in a day was 32, with two vets operating. The basic surgery is done by a low, right-flank approach and horizontal incision. I found it was surprisingly easy to exteriorise the lower left ovary and ligate the ovarian blood vessels, but the surgery always requires an assistant to be scrubbed as well. The Nepalese vets are very skilled at this procedure, but I found they had no experience in a routine mid-line approach for an ovariohysterectomy, which is very necessary when an animal has a pyometra or is heavily pregnant. Neither of the Nepalese vets

resident Nepalese managing

director, a secretary called Chan-

dra, one resident vet (usually

Nepalese) and four male-only vet nurses. They all occupy a

large house on lakeside Pokhara

and a different district in the town

is targeted most days. At around

six in the morning, the team

sets out to gather dogs from the

community to be spayed and

vaccinated. It's not unusual for

up to 16 dogs to be spayed and

vaccinated in a day. I am told the

method for castrating a cat. I was able to demonstrate my approach to these procedures and the resident vet, Basanta Wagle, felt confident enough to

working for HART knew how

to carry out a routine vertical

incision approach for a cat or. for that matter, the current UK start using them straight away when appropriate

The anaesthetic protocol is interesting, in that gaseous anaesthesia is not possible in Nepal. The procedure with dogs is to inject 20mg/ml xylazine IM and then about 15 minutes later give 50mg/ml ketamine IV. When the animal is anaesthetised, it is clipped, cleaned and shaved in the prep room (a table on the balcony of the house). The patient is then brought into the theatre and attached to a drip through a butterfly connection. This is really important as it's almost certain the patient will need a top-up of anaesthetic again IV and given at 0.5ml to 1.0ml, depending on the size of the dog and depth of anaesthesia. The topping-up mixture is one part xylazine to two parts ketamine and works really well.

I would have preferred to use medetomidine hydrochloride/ butorphanol tartrate combination instead of xylazine, but these are not available in Nepal or India, probably due to expense.



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I used xylazine and ketamine for cat anaesthesia IM, as almost all the cats neutered were feral. Unfortunately, this combination did not seem to work as well as it did for me in Greece in similar circumstances, and many cats needed top-ups of ketamine out of proportion to their weights.

The ketamine supplied in Nepal and India is half the strength we know in the UK, but even taking that into account, it did not explain why the initial dose regime was not very effective. I did wonder whether the drug concentrations in the bottle were perhaps not always as stated. However, all the cats survived the surgery and seemed to be none the worse for the experience.

We did have one dog fatality (only the second in three years), which was unexplained, as the surgery had been very good. We subsequently found the animal had been unwell for three days prior to the procedure. The owners had not seen fit to inform anyone, and its condition had not been picked up during the pre-op check.

Early starts

Not all surgery is carried out at base. Team members deploy to a "camp" at least once a week, taking all the kit with them and a large tent. It usually means an early start - up at five in the morning to be away by six. Patients start arriving around seven to 7.30am and it's on with the work before it gets too hot. It was nearing the end of the monsoon period, so it was still very warm and humid. Fortunately for me, the tent was just for show as we managed to move into a suitable building.

Other days start at five in the morning, as HART director Khageshwaar sees it as part of his mission to survey all the dogs from one year to the next in all the districts of Pokhara, and this is the best time of day for the job. He expects, and gets, a very accurate survey of the percentage of true street dogs (such as strays that no one claims) and "community" dogs that are very much part of that community and the occasional much-loved and pampered pet. The notch on the left ear is the giveaway, showing the animal has been neutered and vaccinated.

During my time in Pokhara, we received a request to go to Manang, which is on the north side of the country, bordering Tibet. It's very wild and mountainous, with a population of big-horned blue sheep, elusive snow leopards, musk deer and yaks. Sadly, my time was running out and it was not possible to visit, as it involved a long drive, then a two-day trek with porters.

The problem the locals have in Manang is some very large and aggressive Tibetan mastiffs, which they say have been killing goats and could be a risk to children. The people wanted

the dogs caught and neutered, which means the message is getting through to the local authorities at all levels. There is also a plan to go a district further east from Pokhara, where up to 150 animals could potentially be spayed and vaccinated over four to five days.

My second last week was World Rabies Awareness Week and HART set out a stall in the street outside the main municipal offices to vaccinate any animals the locals wanted to bring along, and distribute as many leaflets as possible, which I found great fun. The next day, we went up a valley to the west of Pokhara doing the same, stopping at every village and generally spreading the word. We managed to vaccinate 54 dogs and cats, as well as one baby monkey rescued by locals after dogs had killed its mother. It wasn't all work either — when we finished, we had a fish curry lunch and a wonderful dip in a

mountain torrent that was better than any Jacuzzi.

In addition to the catch, neuter, vaccinate and release programme, HART is there for the many emergency traffic accident cases, the horrible maggot-infected dog bite wounds, untreated tumours and the many other diseases that would otherwise leave the animal to die in agony.

It's a never-ending job for HART and the dedicated team of



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professionals who do a fantastic job, but they need help. You can volunteer to visit Nepal, where vets and nurses are needed. Alternatively, you could help in by raising money that will directly benefit needy animals. Just go to www.hartnepal.org or email any enquiry to enquiries@hartnepal. org or contact me through *Veterinary Times* and I will be pleased to help.

