AARDVARKS TO ZORILLAS: THE ODYSSEY OF THE PERIPATETIC WILDLIFE VETERINARIAN

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(tape transcription)

David Taylor founded the International Zoo Veterinary Group in which he is still a partner working exclusively with rare and high value exotic animals around the world. He has also achieved fame as a best selling author (40 books) humorously depicting his encounters in treating exotic animals in such books as Zoovet, Next Panda, Please!, and Vet on the Wild Side. Some of his non-biographical works which have become best sellers are You and Your Cat, You and Your Dog, The Ultimate Cat Book, and The Ultimate Dog Book. He is a regular presenter on radio and television. His autobiographies were dramatized in 3 peak-time series on BBC and overseas as One by One, for which he acted as technical advisor, extra, and script writer for some episodes. Taylor now lives in Richmond, Surrey.

Thank you very much. Benita, and ladies, and gentlemen, it really has been a great pleasure and a privilege for me to be invited to this banquet to speak at what strikes me as a highly successful first conference of your Association of Animal Health Information Specialists. And your profession is one which I have always had a great admiration and respect, because without your work, which is in the center of animal science, there would be no teaching and no learning and literally no advances, and we think very highly, depend very highly, although I think many people in the veterinary profession don’t realize this, on your careful attention to all the things that you do to make science accessible to the world. We have had, I think, an excellent meal here tonight, and in a way, of course, you also feed us. You feed the minds of your customers and clients. William Godwin once wrote that “he that revels in a well-chosen library, has innumerable dishes, and all of admirable flavor,” and its true, that you, in a sense, with your mind cooker, you are the quartermasters or the master chefs of this type of food for the mind.

When I was invited to come tonight to speak to you, I knew the sort of people you were; I thought I did anyway. I realized that I must be about to meet people who were eminent in your profession and I begun to wonder what you would be like. Of course, I thought about it, and Sour Dust, the great character, the Lord of the Libraries, in Mervyn Peakes’ the Gormenghast trilogy, who was dressed in scarlet sacking and had a face like brown paper came to mind. Maybe there will be some of those at least from America. Well, you may laugh, but call it an American. Herman Melville in his preface to Moby Dick, talking about, okay, it was a sub-librarian, wrote, I can’t see that this is really true tonight, “Thou belongeth to that hopeless sallow tribe which no wine of this world will ever warm, and for whom even pale sherry would be too rosy strong, but with whom one sometimes loves to sit and feel poor devilish too.” So, what was I going to meet in such eminent company? I find, of course, that you’re not like either of those two descriptions.

Of course, I was reassured by my knowledge of Benita Horder, who I have known for many years, because she really is a most special person in the life of the veterinary profession in Great Britain and, indeed, overseas. Over the years, I can’t remember how many years, I don’t think she would want to remember either, if it has been a question of gallstones in gorillas, on the telephone, and surprising enough, it is not always a question of, well I know where to look it up, but she would often come straight off the tip of her tongue with just the answer I was looking for. She referred, for example, to me going over the Alps with elephants following Hannibal’s footsteps. I thought that before I set off that I would like to know more about the original expedition. Who do you ring? (But, I wasn’t very au fait with the Punic Wars) I rang Benita Horder, want to know something about Hannibal. I felt I would like to read something about how Hannibal had coped with the health of his elephants. And she came up with all the useful stuff, never found out anything much about the vets who looked after the elephants on those expeditions, but I found that Hannibal’s doctor had the rather wonderful name of “Bogus,” which suits me alright.

I remember another time; I was going to do a television program, and I remembered that I read somewhere something about a house in Britain, about two or three centuries ago, had been surveyed very carefully by a naturalist, and he counted every insect, every animal, every living thing that lived in that house, a very interesting list it made. Then a couple of centuries later, it was surveyed again, and as a commentary on what had happened to this type of life in Britain, the numbers had decreased dramatically. I wanted to follow this up and make a program at it, rang Benita Horder and said something like, “somewhere once I read about
a house that had been surveyed in Seventeenth Century”. “Oh yes,” she said, “that’s the name of Bartons End and so on,” and she gave me all the information, literally, within about ten seconds.

Then, ten years ago, I was treating a killer whale in France, which was chronically ill, a very, very difficult case indeed. We tried everything we possibly could, and eventually the owner said to me, “I hope you won’t take this in the wrong way,” he said, “but I think we could do with some spiritual help.” He said, “What I want you to do, is take this brown paper parcel to such and such an address in Nice.” This is absolutely true. “You will meet there a nun who will have a look at a photograph of this killer whale and tell you exactly what is wrong with it.” He said, “She’s an Antoiniste nun, and you don’t need to ask any questions. Just go along and give her this brown paper parcel, which was stuffed with francs, with money. So I did.

I went along with the director of Marine Land and found this strange little chapel, didn’t look really Christian, but I had never seen anything quite like it before, and I knocked on the door, and out came a little, she looked like a Catholic nun. She was expecting us. I went in and showed her the photograph of the killer whale, and then she took us to stand in front of a photograph, rather faded sepia photograph, of a man with a long beard, looked a little bit like Rasputin, who was Father Antoine, the founder of this quasi-christian sect, and she stood there with her hands clasped in front of the photograph, and after some minutes of silence, she turned and she said, “Yes,” she said in French, she said that Father Antoine has given me the word, “The whale has got,” she said, “I don’t know exactly what he means,” but she said, “he’s got a grille in its intestines.” So we went away, having given her the money, and kept wondering how to interpret what this was. What is a grille, “grille”, in the intestines? Is it some sort of obstruction or partial obstruction, and so forth? I in the end, we lost the whale. It died and the postmortem, I am rambling on a bit, it had an abscess in its lungs. We couldn’t find anything wrong with the intestines.

But anyway, the point of this story was, when I came home, I wanted to know who the Antoinistes were. I went through the Oxford Dictionary of the Christian Church and the Encyclopedia Britannica and so forth, what is an Antoiniste and who was this cursed Father Antoine? Rang up Benita Horder! No problem. Following day, letter in the post, she had sorted it out, some sort of obscure sect that originated in the last century among miners in northern France. Nobody ever heard of her, not even the Archbishop of Canterbury. Anyway, so I have got a great deal of respect for your profession and particularly the bit of it I know best of all ……?….. and Benita.

Books, of course, have always played, and must always play a great deal, a part in my life. Because when I began as a zoo vet, at the end of the 50’s, there was, as many of you realize, very little in the literature about my field of work, particularly living as I did then in the north of England in an industrial cotton town. There just wasn’t any way of learning anything about, what I regarded then, and still do, as real animals. I have never been very interested in all these show dogs and cats that have been changed, modified, and bred in aesthetically pleasing ways for men. I am much more interested in real, unchanged animals, and I wanted to become a zoo vet, and it was really questioned in those days, all breeding, all sorts of literature that was peripheral to exotic animal medicine, because it literally didn’t exist. Then it would have meant, slowly but surely, those of us who were beginning to do exotic animal medicine, experimenting. And its surprising how few animals we lost in those early days, in the 50’s and 60’s, experimenting, trying to find out how we could start to practice real medicine on these unusual species.

There were two major problems in those days to overcome. When I was a young vet, the vets who treated wild animals, by and large, guessed their diagnosis, if it would be in a zoo, it would be the other side of the bars, it would be the other side of a ditch, from a distance, or they would have to wait until the animals were so ill, virtually moribund, that they could get up to them and have a look at them. Of course, then it was far too late. We needed two things more than anything. One was some form of anesthesia or tranquilizer which could be used, preferably from a distance, on zoo animals, because it couldn’t necessarily be injected into a vein at that distance, would work if it could be injected virtually anywhere, under the skin or into the muscle.

I was involved with the first drugs that came out of that type in the 50’s, and the first one was phencyclidine, what you Americans called angel dust, those of you who still take it. But phencyclidine, made by Parke-Davis, was a marvelous drug. I remember we got our first supplies from America, started to use it in Manchester, trying it on a whole variety of animals. It was good for quite a lot of things and not good for others. At the same time, our colleagues in the medical profession were experimenting with phencyclidine in humans, again because it could be injected anywhere under the skin — subcutaneously, intramuscularly — would make an ideal emergency anesthetic, — roadside anesthetic for accidents. A slip of it under the skin, general anesthesia.
So, while we were working in Manchester on lions and tigers and wolves, the big zoo, not there now, but then a big zoo in Manchester, our colleagues at the Royal Infirmary were working on human beings, experimentally, and they picked a ward of old men. We weren't having a lot of trouble with the use of this drug in our big cats. We got, sometimes, and you'll see this from old Daktari films, on television, you'd see the claws of the animals while they were under anesthetic doing this sort of contraction a little bit, which is always a sign of phencyclidine. And the old men, when they were given it, they say too that their finger tips tended to burn. I sometimes wonder whether the tigers and lions' fingertips under phencyclidine did have a kind of burning, unpleasant feeling. But the other thing that the tigers didn't get that the old men did, they got erections, and that was a serious problem. It wasn't at first, because the problem was we had a ward full of men at Manchester Royal Infirmary, old men, men who hadn't seen an erection for years, they were in there, all sorts of geriatric patients, they would get hernia operations, things like that, and they were given phencyclidine, and lo and behold you then had a ward full of old men, very proudly presenting erections because of the phencyclidine when they woke up. The problem was, they wouldn't go away. Now all of the old men were very happy and making very unpleasant lunges at passing nurses when they first woke up. But by the following day, when many of them were having to be catheterized to pass urine, the thing became really very unpleasant and serious. Quite seriously, that was one of the big problems which resulted in phencyclidine never taking off as an anesthetic in human beings, even for emergency work, although we continue to work with it right up until fairly recently.

The other problem about that we faced in those days, of course, that once we got the drug like phencyclidine, and after phencyclidine came many others, much more precise, and in many cases, reversible drugs, and we are getting new ones every year now and ones which are very specific. We needed a method of delivering the anesthetic from here to there, to an animal which was at a safe distance from us.

Now that was the other thing that I was involved with, the development of the first flying darts. These were darts which would inject into the animal when they arrived on the target. You see, if you throw a hypodermic syringe through the air, like a dart on a dart board, its no use because the plunger won't go down. The thing was to develop some system which when the needle went in, the plunger would go down. The first syringes we had worked on was an old kind of schoolboy chemistry principle. You had a plunger. It was like a hypodermic syringe, but behind the plunger, in the plunger, there was a hollow space. In that hollow space, you put a little bit of bicarbonate of soda, and then behind that you plugged up the hole in the plunger with a little brass plug. Then behind that you put vinegar, and then you put a cap on it, a feathered cap, and then the syringe went through the air, thrown by a rifle or a crossbow, although the crossbows were terrible. They were so powerful, they would sometimes in the early days put a whole syringe in and out, straight through, in one side of the chest of a bear and out the other shoulder. The trouble was, of course, that when the mechanism, when the syringe hit, the little brass plug fell out of the back of the plunger. The vinegar mixed with this bicarbonate, carbon dioxide gas fizzed, down goes the plunger. That's okay if you are dealing with deer and things like that, but if you are dealing with a chimpanzee, he's not going to sit there looking, smiling, all fizzes and bubbles, and pushes the thing down. What he does, he picks the thing out and throws it back at you, and this happened quite a lot. And with that phencyclidine flying through the air, you never know what might happen! So things got better after that. As soon as we got these drugs, combined with delivery systems, blow pipes, and rifles, and syringes that were fired like explosive charges which were so rapid in their injection, that a chimp or an orangutan couldn't get them out quickly enough, then at last we could begin to practice good medicine.

(Slide show followed presentation)