Veterinary Biology with Dr. Vernard Hodges & Dr. Terrence Ferguson
Ologies Podcast
March 17, 2020

Oh, heeeyyy, it’s that diner that has bad coffee but makes up for it by offering an English muffin as toast option, Alie Ward, back with another episode of Ologies. Whew! Here we are. We are here. It is March 2020, and it’s a wacky time. This is a wacky time. But let’s keep on keeping on, including asking some smart people some really stupid questions about stuff that matters a lot to us. This one, whoo! It’s a twofer. Only once before in the history of Ologies have I sat down with two doctors at once, partly because it’s a nightmare to edit. But it’s worth it; and this one, it’s a real Triple A: All About Animals! If you’ve ever petted a dog on the head, or if you’ve ever fawned over a bunny, or respectfully admired a llama from afar, get ready. Also, I hope you listened to last week’s episode on Virology to help you wrap your head around why so many people on planet Earth are in pajamas on Wednesday afternoons. We’re doing it, and we’re doing to together by being apart.

Now, if you need more entertainment while you’re isolating, you can always enjoy my new Netflix show 100 Humans. Its weird social science looks at what makes us tick, and it may just scratch your itch for being around other people. And speaking of people, before we get started, a quick thanks to everyone out there making Ologies happen via Patreon.com/Ologies. It’s a dollar a month to join, and you get some extras, including submitting questions to ologists. Thanks to everyone who puts merch on your bodies by going to OlogiesMerch.com. And thank you for rating, and subscribing, and reviewing. That keeps the show up in the science charts. And for tell friends. That honestly helps so much. I read all your reviews. Sometimes they make me cry on the tarmac before a plane takes off, such as, this one, from NjckDanger, who says:

    A lot of podcasts are popcorn for the mind: each episode is pretty much the same, you know the taste, it’s good but not really filling. Ologies is trail mix for the mind. There are always different flavors, some you’ve never tried before. Plus, it’s a little saltier than you might expect. Ologies satisfies. - Sleepy John

Thank you, Sleepy John, I’m glad that you’re awake to listen to this.

Okay, veterinary biology. Let’s get into it. Veterinary comes from a Latin word meaning a cow or an ox. And biology is the study of life. So, veterinary biology is the medical study of kept animals. I have wanted to do this episode for sooo long since so many ologists originally set their sights on a career in vet med (and that is an insider term, it means veterinary medicine). It’s a super tough field, and I was so excited to hear that two of the greats were in Los Angeles for just a few days and they were willing to let me pepper them with questions.

So, I drove across town to Beverly Hills, in traffic! It was worth it. They were posted up at the swanky-as-hell Four Seasons while on a press tour for their brand-new, National Geographic Series, Critter Fixers: Country Vets. Put it in your DVRs, watch it, it’s amazing. They were both in suits. They were looking quite sharp at the end of a long press day, bringing a porcupine and an armadillo on Entertainment Tonight. But they squeezed me in, and we settled onto a couch and some chairs, and I shoved my mics in their faces.
Now, audio note, my audio was being captured by a separate mic that I never use, but it turns out, it was not ideal. So, Jarrett and Steven worked a ton behind the scenes this week to help fix it. It might be a little different than you’re used to. If this is your very first *Ologies* episode you’ve ever listened to, I promise audio quality’s usually top notch. I normally don’t record two people at once, and myself. Little bit of a tech diff, but this episode is 100% worth it because of both ologists.

They were kind enough to tell me about their friendship, and their life in central Georgia dealing with all manner of animals, their vet practice, how they learn and retain so much about so many species, things they wish all animal owners knew, weird things animals have eaten, hairballs, kidney issues, grain-free diets, chunky monkeys, how to keep your pets healthy for as long as possible, when to let go, the emotional side of veterinary medicine, some awesome advice for me personally, plus livestock mysteries, and more. So scrub in and get ready to fawn over two real-life critter fixers and veterinary biologists, Dr. Vernard Hodges and Dr. Terrence Ferguson.

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Dr. Vernard Hodges: Vernard Hodges.

Dr. Terrence Ferguson: Terrence Ferguson.

Alie Ward: And Doctors.

Dr. H: Yes. Dr. Vernard Hodges.

Dr. F: Yes, and Dr. Terrence Ferguson.

   Aside: How long have they been doctors?

Dr. H: So, I have been a doctor for a grand total of... I’ve been a doctor much longer. I’ve been a doctor for 23 years.

Dr. F: And I’ve been a doctor for 22 years.

Alie: Oh! Got it! So one of you is the pro here. [laughs]

Dr. H: [laughs] Yes! Exactly.

Dr. F: [laughs] That’s right.

Alie: Did you know each other going through vet school? How did you meet?

Dr. H: We met in college.

Dr. F: Yeah, we met in undergrad, so we’ve known each other almost 30 years now, give or take a year. I was a veterinary science major and he was a biology major. But I took classes in biology so that’s how he and I met in classes there.

Dr. H: And fortunately he became my friend because he was a lot smarter than me and he was a goody two-shoes.

Dr. F: Yeah, right.

Alie: [giggles] And so you’ve been practicing doctors for... we’ll say 22-and-a-half years. We’ll round-average it here.

Dr. H: For sure.

Alie: And how long have you been working together as you do?
Dr. F: Oh, for my entire 22 years we've been working together.

Dr. H: I taught him everything he knows.

Dr. F: Yeah, he graduated a year ahead of me. He worked at a local veterinary hospital. When I graduated I worked at the same hospital, so we worked together a year at another veterinary hospital. And after a year we decided that we wanted to open our own practice.

Dr. H: Right.

Alie: Amazing.

Aside: And by the way, Dr. Vernard Hodges has an edgy, hip, asymmetrical haircut that's almost like a half-mohawk. And he's wearing a dark, button-up shirt and a blue sport coat. And Dr. Ferguson has a lower voice, and he's wearing a t-shirt with the red Critter Fixer logo underneath a plaid, gray blazer. And his head is neatly shaved to a perfect shine.

They both grew up in Georgia, got their bachelor's from Fort Valley State University, and their doctorates in Veterinary Medicine from Tuskegee University in Alabama. Their southern accents? Amazing! They worked elsewhere for about a year before they teamed up and started Critter Fixers, their own practice together in rural central Georgia, south of Atlanta. But, like we hear from a lot of ologists, sometimes the path is linear, sometimes it has a few twists.

Alie: What was it about animals or about veterinary science that you loved? What drew you individually to this path?

Dr. H: So, I'm a big fish guy. I've always liked fish. I don't know, I just always had a fascination with fish. I teased him all the time, I wanted to be the first black Jacques Cousteau. I wanted to be, like, this fish guy. ["I love fish! Hai!"] I was one of these people that learned by doing. My grades were 'okay'. To make myself competitive with veterinary school I ended up working for the Agency for the International Development. And what we did was develop a fish project.

So, at 19 I went over to Nepal, and we raised fish in cages because they were looking for a cheap protein source. What we did was carpi phytoplankton. So, we kind of would put the cages at different depths, see where the phytoplankton grows, and we were able to tell them where to put the cages, especially during the summertime months. When I got to the veterinary school I was thinking, “I could do fish, and do these different things...” My grades were 'okay' but nobody... all the people with As couldn’t say they helped feed a village in Nepal. So, that's how I... I've always loved animals.

Aside: Other people may have had higher grades but Dr. Hodges had life experience, and hands-on fish science. So when in doubt, GTFO. Go work in Nepal for a while.

Dr. H: And that's, kind of, what helped mold me. In our practice now, we treat fish. You'll see fish on the show. We treat all variety of animals. That's how I got involved.

Aside: What about Dr. Ferguson?

Dr. F: I wanted to be a veterinarian for a long time. Since I was, probably, eight years old, I was bitten by the ‘veterinary bug’. I had a dog that was injured and I nursed it back to health. So I thought... Looking back, it really wasn’t hurt very bad, but I thought I’d done something
miraculous, and here I am, I want to be an animal doctor. I’ve always wanted to be one. It’s
funny, I tell people that… A lot of times we talk about what we want to be when we’re older,
but I can say that I wanted to be… and you can look in the yearbook, and it has veterinarian
on my name. So, I’m kind of proud of that, and God just blessed me to become. But there did
come a point… Like he said he did summer jobs, I did a couple summers also with the US
Fish and Wildlife Service and had an opportunity to work in Alaska one summer with
salmon and whooping crane.

But I reached a point where I became unsure. As you know, the profession of veterinary
medicine is not very diverse, and it wasn’t until I was a junior in college that I saw the first
black veterinarian, or a veterinarian that looked like me. So, there was a point that I felt like,
“Can I do this? I don’t see anybody that looks like me and is doing it.” And I almost veered
over to Fish and Wildlife because I had… we did it in the summer and I saw people that
looked like me, and I knew that was something I could do. But I met a mentor when I was a
junior in college, and he was a black veterinarian, and he encouraged me to stay on path if
that’s what you want to do.

Alie: Wow. And do you think that you guys also, kind of, keep encouraging each other because
you work together?

Dr. H: All the time. Every day.

Dr. F: Oh yeah, there’s no doubt.

Dr. H: I mean, in the profession, people kind of don’t understand… Sometimes people think maybe
we just play with puppies, you know? Which we do, that’s a great part of it, but in a matter
of seconds we can go from, unfortunately, having to euthanize an animal that’s maybe 15
years old and relieve suffering, leave that room, wipe the tear out of our eyes, and a minute
later we’re in another room with a new puppy and have to talk to the owner about different
things on how to raise this puppy. So, the emotions are up and down, and sometimes at the
end of the day it pains on your emotions. Especially when you do that four or five times in a
day. The rollercoaster is tough, so it’s great to be able to talk to each other and say, “Hey
man, it’s gonna be all right,” and like, “Man, I had a rough day,” or he tells me he had a rough
day, and know you won’t be judged because this has been your friend for 30+ years.

Aside: So, Dr. Ferguson makes the point that even though it’s been his dream job for years,
it does not mean that it is a breeze. Who knew?

Dr. F: And being a veterinarian, we see multiple species. So, you know, I may get an animal in that
we’ve only seen one animal that year, maybe a monkey, maybe something that’s very
strange or rare. And I may have to give him a call, like, “Hey dude, I have this monkey, and
I’m looking through the books, and I don’t see it! What do you think?” So, it’s great having
him to be able to bounce things off of because, like he said, he understands because he’s in
the same shoes that I’m in. So it’s great having each other. I know I definitely wouldn’t be
where I am if I had not had a partner.

Dr. H: Same. But we also have a very playful competition too. We’ll be like, “Hey dude… Hey man,
I’ll one-up you.” We literally say, “I one-up you today.” And he’ll be like, “Whatchya got?” I’m
like, “Man, I had an African toad today. This thing weight three pounds…”
Or he’ll call me, and he’ll have some case, like, “Man, I had a snake with pneumonia.” So we definitely have a playful competition of stuff we see.

**Alie:** When it comes to veterinary medicine, how do you even prepare for that? Because you’ve got a ruminant with four stomachs, you’ve got a toad that breathes through its skin... Where do you begin?

**Dr. F:** School. A lot of people wonder... you know, you get out and you may practice large animal medicine, or you may practice small animal medicine, or you may practice exotics. We kind of do all of them. But when you're in veterinary school you don’t specialize. So, we had to learn about all the species. And once you come out, you know, you’re kind of refining your skills. Are there times when you have to go back to book or call someone? Of course there are. There are a lot of species and you don’t see them every day.

**Aside:** Dr. Hodges says that in the early days they’d have to do dip tank x-rays, wait for them to develop, and then send a snail mail envelope with a question, to a specialist, wait for it to get there, wait for the specialist to write something back, and snail mail back. But now modern technology lets them get an x-ray in less than a minute and they can get a complete pathology or cardiology report from a specialist in, like, half an hour. This is good news for vets. It’s better news for pet owners, which by the way, in America, according to a 2019 study, there are 94 million pet cats in the US. 90 million dogs! And hey, guess what, fish people! 157 million fishes out there in your houses. So yes, technology helps them too.

**Dr. H:** Even though we’re in rural Georgia, we do have the specialists that we can reach out to, and modern technology has definitely... I would say, in our lifetime... [to Dr. Ferguson] Don’t you think we can keep an animal alive, maybe, 2-4 years longer?

**Dr. F:** Yeah, because of advancements. We can detect things a lot earlier. We have chemistry panels of blood we can run now to check kidney problems a year or so before it happens. At one time we only thought when an animal came in, it was sick, we ran blood, had kidney failure.

**Dr. H:** And we had to send that blood off and wait a day.

**Dr. F:** Yeah, and we had to wait. But we know 2/3 of all kidney function is lost once we see the values are abnormal. So, now we have tests that we can detect that and we can do something to slow that process down.

**Dr. H:** Or the old dog that had arthritis. I mean, really we had no medicine. But now, they came out with Rimadyl, and Deramaxx. So, they came out with different medicines for old dogs that are arthritic that we’re able to treat now. Something I'll tell you, I thought about this the other day, [to Dr. Ferguson] have you noticed we're having more talks about cognitive dysfunction? Which is doggie senility and Alzheimer’s. We're able to keep them alive longer but, unfortunately, we haven't figured out, as far as the brain, they do get senile. So, we get the dog that is staring at the wall, or goes outside and forgets where it is. We have that talk a lot more.

It’s kind of the gift and the curse of technology. I noticed, like, “Man, I’m having this talk a lot.” But I’m able to keep that dog that has a heart problem... we can keep them alive. Or arthritis, we can keep them alive longer. Kidney problem, we can keep them alive. But we just haven't figured out the brain yet. ["Where am I??"]
Alie: When it comes to your typical day, I know that you're sometimes, maybe you're out looking at a llama in a barn, and maybe you're delivering puppies in the office... What is a typical day like? And then, also add cameras on top of that.

Dr. F: There really is no typical day, and I'm not being... I'm being facetious, but then again it's serious because we will make schedule-out calls, but you never know what you're going to see when you go out and you never know what's going to come through the door that's not scheduled. We try to do our surgeries in the morning because we'd like for them to be done about 10 and taken care of so that they're able to be up and go home that same day, depending on the procedure. And then in between surgeries and the rest of the day we're seeing clients and we may... You just never know what's going to come in.

Dr. H: What about that c-section that comes in between.

Dr. F: Right. I might be in surgery doing a cruciate surgery that it may take a while to do, and he calls and hollers in and says “Look, I have a dog that's...”

Dr. H: “Hey man, I need that room.”

Dr. F: Right, because he has a C-section.

Dr. H: That actually happened on the show.

Alie: Did it really?

Dr. H: I mean it was not... it was like, he was in teaching one of our newer vets how to perform orthopedic surgery. And I was like, “Bruh, I need that, uh, surgery room!” He thought I was playing.

Dr. F: Yeah, initially I did.

Dr. H: We joke a lot.

Dr. F: But you know, on the second time around, I know when he's serious.

Dr. H: And there was a puppy that was dangling out of this dog that was stuck.

Dr. F: So it's time to get real, get serious, you know, get the other dog off the table so we can get this C-section taken care of. It becomes, just like that, a life and death situation. We just don't know what's coming in the door.

Dr. H: And it's definitely a roller coaster.

Alie: What do you wish that pet owners or your clients did different, or knew? Is there something that you wish you could just telegraph it into pet owners’ heads?

Dr. H: In society today it’s bigger, the better, the more exotic, or unique the better. And everybody wants to go-big-or-go-home and these things. But a lot of times it’s simple things. Like these exotic pets, [clip from 2009 movie The Hangover: “Phil, there is a TIGER in the bathroom!”] I really wish they were educated on how to take care of them. You know, I had a case last week, it's a simple case. There's this bearded dragon, which is a type of lizard. It came in, I took X-rays. It had brittle bones, it wouldn't move, it was dragging itself across the floor. It needs calcium! It needs a UV light or sunlight! Obviously, you can't stay outside with your lizard all the time, so you need some UV light. You try not to make the person feel bad.
But I was talking to her and I was like, you know, “This is what’s going on.” And it was something simple, I was like, “I want you to google something. Just google ultraviolet light and metabolic bone disease.” And I said, “I’m going to go take an x-ray.” When I came back in, she said, “Wow, Doc, thank you. I see what’s going on. It’s simple.”

But those kind of simple things, something… a $20 light could have prevented this, you know? So it’s just, I wish… Everybody wants to get more and more exotic. I mean, we’re seeing all kinds of different animals, you know? And so I just wish that people were educated more, you know, there’s not just the financial thing.

Dr. F: Yeah. And that’s a big thing. Educating the clients. And it’s not always that they can’t do, they just don’t know. A lot of issues with these exotics are husbandry issues, whether it’s the type of feed or what they’re feeding, the humidity or the temperature that they are, what they’re feeding, what they’re… you know, things like that, that cause a lot of issues. So just basic education on how to take care of them would go miles.

Dr. H: So that would probably be the biggest thing, because with advances, you know, everybody wants to have this cute little different animal, but they just don’t want to take care of it. So, I want everybody to be happy and enjoy their pet, but you know, I mean, something simple as… I know we have Easter coming up, so I am worried about these Easter bunnies. [Alie and Dr. Ferguson agreeing in background] Because people, they think, “Okay, you just put it in a cage. You don’t feed it hay, you don’t have to worry about their teeth growing for life.” They don’t understand the husbandry. It’s just the small things, you know. Or the chick, they get these little chickens, they get little chicks. I mean, it’s just those kinds of things, I just wish the population was educated a little bit more

Aside: Rabbits are fluffy and soft, they’re easily litterbox trained but they live 10-12 years. Most people don’t know that. And most of the little buns - 95% of them bought as impulse Easter gifts - end up in shelters. Or, abandoned outside. 80% of bunnies in rabbit rescues were once Easter pets, and sometimes they’re “rescued,” but used as food for reptiles. So before you acquire a living creature, consider if you can meet its needs.

Alie: Are you saying I shouldn’t have bought a stingray and kept it in my bathtub?

Dr. H: [laughing and animated] Ooooh broo that might not be the greatest idea in the world.

Alie: But it’s such a good dinner party conversation!

Dr. H: [laughing] For sure. For sure.

Dr. F: Wow.

Alie: Just wanted something different! What about, on the road to becoming a veterinarian, what do you wish people knew or what is, like, some encouragement that you would want to give to your younger self or people who are like, “I want to be a vet but it’s hard!”

Dr. H: So the first thing I’d like people to know is, and this is not to discourage, but I want them to realize it and what I tell the kids, they are only 31 veterinary schools in the United States.

Alie: Really? Only 31?

Dr. F: Yes.

Dr. H: So the average GPA to get into veterinary school now is about 3.7.
Alie: That's very high.

Dr. H: That is very high. So, not only that, there are a lot of people with high grades, so you have to find that thing that makes you different.

Dr. F: That separates you.

Dr. H: You know, go to your local veterinarian and ask them, can you volunteer? Or go to your local shelter. Find that thing that makes you different. But yeah, that’s one of the things I want people to see. I know we have 50 states, and there are not even 50 vet schools. There are only thirty-one.

Dr. F: And I guess on that same line of trying to separate yourself, I find a lot of times, because I saw it when I was in veterinary school, that some want to be veterinarians and it looks very glorified from the outside. Like you said earlier, you get to hold the babies, you get to cuddle, but you know, dogs go to the bathroom, they urinate on you, they bite you, cats scratch you, horses can kick you. So what I encourage them at a young age is to come in, shadow me. Shadow one of the veterinarians, let’s make sure this is what your passion is and what you love.

It can look glorified on the outside but when you get on the inside it may be something that you don’t like. And the last thing that I want them not to do is invest all their time, and energy, and money into something and they decide, “I’m in the first year of veterinary school, man, I don’t think I really like this.” So I want them to know earlier, “This is what I want to do. I have a passion for this. I’m on track on what I want to do.”

Aside: To be honest, this is good advice for any profession really. Except for podcaster because no one wants to shadow me recording asides into a pile of towels in my closet. Which I’m not even doing right now, ‘cause honestly we’re all isolating and I’m just beached on the couch like Jabba the Ward under the comforter, which is not as exciting as some of the things that the Critter Fixers have seen. Dr. Hodges says when he was in Vet school, they had a call out in the field. Into an actual field.

Dr. H: So in an ambulance you... You know, ambulances go out and get people. In veterinary school, we had something called ambulatory. I was in ambulatory class, I was a senior veterinary student, and we went out and it was about seven of us in a veterinary truck. So we went out to this big farm and when we got to the farm, you know, what do you expect? You expect to see livestock and different things, right? But when we got this farm, there were like 50 dead cows.

Alie: Whoa!

Dr. H: Bloated, smelly in the Alabama sun, because we both went to Tuskegee. [“Oh dear!”] And the first thing he said was, “What's going on?” Well, obviously, our mouths were wide open like, “Uhh, I don't know.” So, you know, we’d been learning all kinds of stuff over the previous three years, so we said, “Well maybe this...” and we were all wrong. He said, “Look, get out there and do a necropsy.” Necropsy is when you check… with animals… Autopsy, is obviously with humans. So we did a necropsy and all these bloated, smelly, stinky cows. And he said, “What's wrong?” And all of our answers are wrong.

He said, “Listen...” And it’s the one thing we learned. He said, “Listen, the first thing you got to come to doing a farm is you got to look. You got to listen. You’ve got to look at your
surroundings.” He said, “It’s been thunder and lightning every day. Look at the top of this tree.” It’s burnt to a crisp. He said the lightning struck the tree. Boom. All the cows who were gathered around during the lightning, they were electrocuted, they died.


Dr. H: Right? So you should simply look, you should learn. And I never took that for granted. So when I see a case, sometimes it isn’t what it looks like. You got to look, you got to observe, you gotta smell. You gotta know it. So just always stop, look, and listen. That’s one of the things you learn in veterinary medicine. I’ll never forget that as a senior veterinary student.

Dr. F: When I talk to kids I always tell them that you have to use your senses — except one, we don’t taste.

Dr. H: [snickering] It has happened a few times. Unfortunately.

Dr. F: [group laughter] Unfortunately, not knowing. Or even when you approach the animal, or if we’re in the clinic and it walks in the door, it may not even be coming in the room yet, but you’re already getting a visual. And one thing that we always learned, probably the first time we walked in veterinary school, is you have to know normal before you know abnormal. There’s no way to know what’s abnormal unless you know what’s normal.

So you know, you’re watching the gate, you’re smelling, what does it smell like, there are different things that clue you in. So almost like investigators, you know, we try to clue in on all of these things to try to figure out what’s going with them. But you have to be basic and work your way up. You never start with, you know, you have this big long word and because you want to be the veterinarian that says “Yes, I had the dog in the had spiral trichomonas” or something.

Dr. H: So maybe the middle show might be Matlock [clip from ’90s show Matlock, starting with an apathetic sigh: “Ooooh. Are there any lawyers in this town?”]

Dr. F: That might be the best show! [laughs]

Dr. H: That might be! Something like Matlock, because you got investigate so—

Alie: Dog detective. [laughs] Critter Fixers: Dog Detective!

Dr. H: Exactly. That is maybe the show that best describes what we do.

Alie: Can I ask you questions from listeners?

Dr. H: Yeah, sure. You can ask whatever.

Alie: I let listeners know that I was coming to meet you guys and they sent in their own questions...

Dr. H: For sure. That’s no problem!

Aside: But before your questions, we’ll take a quick break. As you may know each episode we donate to a cause of the ologists’ choosing and this week the Critter Fixers chose the It Takes A Village Foundation, which instructs children in all aspects of business and then helps them to come up with ideas for their own business. They also provide assistance to local adults, they conduct community business outreach, and they are bookmarking this donation to go to testing and test prep to help kids. So you can learn more about what they
do at ItTakesaVillageFoundation.com, which, side note, was founded by Dr. Hodges and the VP is Dr. Ferguson. That donation was made possible by some sponsors of the show.

[Ad Break]

Okay, back to your questions. This first one regarding just general weirdness was asked by Gabrielle Jolin, Ford Gonzales, Unuseful Spoon, Aeriel, PJ, Sakura, Janie Martin, Courtney Williams, aaand...

Alie: HR Bungu wants to know: What is the weirdest animal you've ever treated?

Dr. H: Probably for me, I would think, a spider.

Alie: [incredulous] A spider? What kind of spider?

Dr. H: Yes, we had this tarantula this guy brought in and it wasn't eating like he thought, that was different. I did have to research and think about that a little bit. I mean, he had these big spiders. I don't know if it made the show. I know they did tape it, but I don't know if it made the show. It would get in the web, but it would kind of stand in the corner, it would be there. But the biggest thing is this, his cage was a little small so it didn't need to eat as much, so it was more of a husbandry issue actually. Once I got it out, which was weird, this thing was as big as my palm of my hand, so you know... and it actually kind of shocked me. And then when it bites, it's almost like a...

Alie: When it bites?

Dr. H: Yes. Almost like an electrical shock, it's not terribly bad. But that was probably the weirdest. I was wondering why would somebody want a spider, but it was interesting. I think that was probably the weirdest. But the biggest thing is just knowing about what these animals need in captivity. A captive spider obviously wouldn't need to eat as much as a spider that, kind of, lives in the desert or doing everything. So that was pretty weird.

Alie: What about you?

Dr. F: I guess the weirdest... I don't have a spider, but I think because we're in Georgia, whether it's rural Georgia or Atlanta, doesn't matter. I think the camel. The camel was probably the most out of place.

Alie: What was it doing there?!

Dr. F: Well it was a camel that they used in nativity scenes...

Alie: Ooooh...

Dr. F: ... and it's in the show also. It's hard to say, it was... it was getting a little frisky.

Dr. H: It was a little frisky. It liked to go away in a manger. [clip from Dumb & Dumber: "No humping!"]

Dr. F: We had to go and uh... [both laughing] and uh...

Dr. H: Remove some humps.

Dr. F: ... to try to make it, um... I think it did better this year, the nativity scene. A little calmer this year.

Dr. H: Yeah, the kids weren't surprised by the camel.
Alie: Wasn't swiping on Tinder as much?

Dr. H: Exactly!

Alie: Kaydee Coast wants to know: If you could read animals minds, would you want to?

Dr. F: Oh yeah, most definitely. Yeah, that would be... It would make our job a lot easier. You know, if we knew exactly what was wrong when they came in. I always ask the students when I go do career day, I ask them to tell me what is the difference between you and I when we go to the doctor and when the pets come to me, and they always overthink it. They think of everything I say, "No, this is simple. The animals can't talk."

Alie: Yep!

Dr. F: You know, if I stood them on the table and I said, “Open wide,” and, “What’s wrong?” I may get a bark, or meow, or a kick even, but I’m not going to get the answer. So of course we would.

Dr. H: Exactly. That would definitely be the answer because it would save me some time. I wouldn’t have to go do an endoscopic exam. That’s where we go down into the stomach. And you know, the dog would be able to tell me when I see a thing... because you can see clearly in there. So I'm in the stomach and I read P-A-M-P-E-R. Pamper. So the dog has eaten a diaper. Fortunately I was able to pull it out, but he could have saved me a little bit of time.

Alie: Did you guys see that recent internet video of the python?

Dr. H: Yes, we did. That was, uh... different.

Dr. F: Oh yes. That was awesome, wasn't it? For watching, not for the snake, though.

Alie: Yeah, the snake I’m sure was somewhat relieved. Is that the weirdest thing that you’ve seen a pet eat, is a Pamper? Ever find car keys in there? Like car keys in an alligator or something?

Dr. F: Years ago with the telephone cords that were twisted. We didn’t know what it was. We took an x-ray. That was back in the day when we had to dip tanks and took forever to develop x-rays. So we look at this x-ray and we just see a coil that’s, you know, not very long. We’re all looking like, "What is that?"

Alie: Spirakeet?

Dr. H: [laughing] Yeah exactly!

Dr. F: Yeah, “What is that?” So, we end up having to do an exploratory, and that’s what it was. But the funniest thing, after during the surgery, the owner said, “Yeah, I know what that is. I’m going to put all this stuff away. We’re going to get rid of it.” The cat came in two more times over the next few years with a cord, doing the same thing.

Alie: Gotta get a cordless phone!

Dr. F: Yeah. Thank god now, but back then, you know, they had the cord, so I think that was...

Dr. H: You’re telling our age, bro.

Dr. F: Yeah, well. That’s your age, remember. You’re older.

Dr. H: Ah yeah, I got you.
Dr. F: But yeah, that was... and we always see coins. They eat coins a lot.

Dr. H: So the weirdest thing I've seen is the gold chocolate coins, they come in a little mesh bag and I couldn't figure out what was going on. And this dog ate them whole, so I couldn't figure it out. So I literally took out... I think I counted 26 of those gold coins. And the chocolate was still good. So the wrapper must have been good 'cause they didn't really melt. That was probably the weirdest thing to just kind of keep pulling these coins out. [slot machine jackpot]

Alie: Sarah Trevino, first-time question-asker wants to know: Very important question. Do dogs love us as much as we love them, and do they know how much we love them? Do you think?

Dr. H: I don't know if they know... In veterinary school, we used to talk about the human-animal bond, and I definitely can see it. I think my dog loves me as much. I think so. I mean, I love my dog a whole lot.

Dr. F: I think we have unconditional love, yeah. I mean, you just think when you go to work you can have a great day or you can have you a horrible day, and when you get home it doesn't matter. You're going to be greeted the same way with excitement, with love. I don't know the level, but I definitely know they know that we love them and it's unconditional both ways.

Dr. H: Kind of like that movie 50 First Dates [clip from 50 First Dates: “Don’t call me Luce, I barely know you” “Sweetie, you’re sorta dating him.” “Wha?” “Sorry I’m not better looking.”] Every time, it’s a new day. They love you like... It doesn’t matter. It’s the first date every time we come home.

Dr. F: Yeah, that’s it!

Alie: Awww! Rachel Weiss wants to know, why do dogs like to eat grass when they have upset bellies? Or is that a myth?

Dr. F: You know, we used to be, “They have tummy aches, or they have this...” but I've seen dogs that just like to eat grass.

Dr. H: Just like to eat grass!

Alie: Okay!

Dr. H: A lot of times in the wild, a lot of these guys eat a lot of berries, and grass, and different things. So I think it’s just a palliative tool, so they’ll eat it.

Alie: Interesting! Yeah, whenever I see my dog snacking on grass I'm like “[gasp] Do I have to call an ambulance?!”

Mo Casey wants to know: What is the number one thing we can do to protect the health and wellbeing of wild critters? And Brianna Moczynski says: This! Yeah. Anything we can do for wild critters?

Dr. H: Protecting the environment.

Dr. F: Protect the environment, conservation, things like the US Fish and Wildlife, organizations like that to try to conserve different species. Those are the most important things. I think a lot of times we can get in trouble too by trying to domesticate everything. And I think we get in trouble then because we kind of mess up the natural balance of things.
Dr. H: Like a Florida alligator?

Alie: OOH! Did somebody try to domesticate a Florida alligator?

Dr. H: Oh they do it all the time.

Aside: Just google ‘Florida + pet alligators’ and [high pitched] WHOO-boy! Plenty of Fox News clips of people cradling giant reptiles pop up. In the following news clip, a man wearing cargo shorts is crouched down next to a murky backyard ditch, as the head of his 47-year-old pet alligator bobs in and out of the water serenely, waiting to be hand fed more morsels of its favorite snack: chocolate chip cookies. [clip from YouTube Video, Florida man fights to keep pizza-loving pet alligator: “Once he was in the house, he didn’t want to leave. I think it took us like three weeks to get him to go back outside. He was on the couch all the time, or in the bathtub.”] I did a little more googling and heads up: when they’re not eating Chips Ahoy, a lot of pet alligators are — how do we say this — [emphasis] “rescuing” other people’s unwanted Easter purchases. So, that’s bad news.

Dr. H: I mean, yeah, all the time.

Alie: Doin’ it for the ‘gram.

Dr. H: Yeah for sure.

Alie: Not necessary!

Dr. H: Oh exactly.

Alie: Veronica says: CAT HAIR BALLS! Oh my god they’re so gross! Is there anything I can do, or give the fur babies to prevent it, or lessen the amount that they hack up? Did I mention, so gross?

Dr. F: [laughs] Yeah, there are different products that we have. Cats are naturally groomers, so they naturally lick themselves and groom themselves. And basically when you see the cat that is ungroomed or not thrifty looking — probably a sick kitty. So they have mats or hairballs. Some of them get so large and heavy they can’t groom them themselves. But normally they groom themselves and they’re going to ingest hair. So there are products that you can give, different laxatives and lubricants that you can give maybe a couple times a week that will help clear them out and they can pass them out in the stool rather than having so many hairballs.

Dr. H: And what are those products, bro?

Dr. F: Laxatone, Purrg... I didn't know we were gonna name products. Mineral oil.

Dr. H: Mineral oil. We gotta give her some uses! [Alie giggling] And I would tell her, personally, be thankful because... I'm going to give her a fancy word and she's welcome to google this. It's called a trichobezoar. That is a biiiiig [morphed to extra deep pitch] BIG HAIRBALL. Oftentimes we see that in cows. When cows... sometimes these things can be as big as basketballs.

Alie: [confused and bewildered] How did it get hair in there??

Dr. H: Because they’re licking themselves! So, she's very fortunate that she doesn’t have a cow. [laughs]
Dr. F: Or maybe she does! [laughs]

Dr. H: Maybe she does and she’s got a trichobezoar. [laughs]

Aside: Wow. Wow. Okay, wow. I know we’re all socially isolating. We got some time on our hands. But do not Google Image Search a trichobezoar unless you want to see what appears to be stomach-shaped dreadlocks, still moist from their fresh removal from human insides. Now, the condition that causes hair eating in humans has been dubbed Rapunzel Syndrome for the long tail that the hairball trails behind it. I like to imagine it does so elegantly. But it’s a real thing. I can’t imagine it’s comfortable. Boy howdy, don’t look at it if you can help it. Now, as long as we’re talking horrors, let’s dip into your questions about American health insurance – but for pets. This question was asked by Kate Coldren, Sarah Howell-Miller, and Heather Shaver.

Alie: Heather Shaver has a question, financially: In your opinion, how much is too much to spend on a pet’s vet bill? Like, how do you make the decisions, taking into economics and the animal’s suffering? And is it good to have health insurance? How do you guys feel about that?

Dr. H: My thought when it comes to that is, definitely, if you can, start out… Pet health insurance has definitely evolved over time. It has evolved over the years, and we have it in our practice quite a bit now. And they usually pay pretty well, but you can’t have any preexisting things. But this is the thing I always ask: “Doc, what will be the quality of life?” Quality of life is everything. I mean, before you get to finance. I have people who come in and they have unlimited funds and they’re willing to do anything. But I’ll talk to them, at least give them the option. I never tell them what to do, but I explain the quality of life and what will be the quality of life if they choose a procedure, if they choose not to procedure, if we keep moving on. It’s something you could ask your veterinarian. It’s a tough decision. “What do you think my dog’s possible quality of life or my cat’s quality of life?” But that’s the way I would start the actual talk, and you can kind of go from there. Quality of life would be the best message I could give people.

Dr. F: I think so, yeah. That’s what I would say. You know, you can have unlimited funds and quality of life is no going to be good afterwards. That’s not being fair to your baby. I always say they’ve given us so much unconditional love, they’ve been so fair to us. So we want to be fair when that time comes, and sometimes it’s hard to see it. So what I’ve done is I have a sheet that numerically has questions and you have to give an answer from zero to 10. At the end, we add those numbers up, and if we’re lower than a number, then we’re probably at the point that we’re suffering. So we may need to consider making a decision. And if it’s higher than that, then we’re doing fine. But a lot of times, just visually having a client to be able to see it helps a lot, because I’ve been there, I’ve had animals, and I know, “I don’t want to do it. It’s not time.” But I’m being unfair. I tell them, “Let’s not be selfish. Let’s give them the joy that they’ve given us all these years.”

Alie: All right, and do you guys both have pets?

Dr. H: Oh yeah.
Dr. F: Oh yeah, of course.
Alie: What do you have?
Dr. H: So I have a German shepherd, a Cane Corso...

Aside: Oh hey, I looked this up because I thought a Corso was maybe a type of lizard or a house lemur but it’s a big-ass Italian dog. And it looks like it would kill anyone who wronged you, but also hug you when you’re sad, much like any Italian. I now love them.

Dr. H: ... a Frenchie, who sleeps on my hip every night. I have Jamison, who is a gecko, and I have Drake, who is a bearded dragon.

Alie: Oh, so you do have a bearded dragon!
Dr. H: Oh yeah.
Alie: Nice!

Dr. F: So I have a Cane Corso, miniature schnauzer, shih tzu, and a bearded dragon who’s Rex. We call him Rex.

Alie: Oh my gosh! Do people ever come to you and a pet needs a home and you’re like, “Should I adopt it?”

Dr. H: Sometimes, but typically we try to be almost like the Tinder of veterinary medicine. We tried to matchmake. We’re like, “All right, we’re gonna swipe you to the left. I know somebody who’d need this.” So that’s kind of what we do.

Alie: Amazing! Jamie Pickles wants to know: How often are you called on to answer human medical questions? Like, “You’re a doctor, could you look at my rash?”

Dr. H: Every time I go to the grocery store.

Alie: [laughs] How annoyed are you by this? They want to know.

Dr. F: It definitely happens.

Dr. H: You know, “I got ringworm...” And I’m like, “Ma’am, that’s--” “Can you look under; don’t worry about this. You can see--” I said “Ma’am, that’s a little too much skin. I don’t want to see that.” “Is this a ringworm? Can you get closer?”

But yeah, often we do. Sometimes I try to steer people in the right direction, because sometimes they're scared. I mean, they're like, “Look, this is what's going on.” Or the more common question... I'll never forget in parasitology class, and I'm glad we were taught that, is lice. But everybody has their own lice. So humans have theirs, cats have theirs, dogs have theirs. So everybody’s got... Typically when people are... like the physicians or someone would come in and say, "My dog gave me this lice," we're like "Nahhh, you didn't get that from the dog!" [all laugh]

Dr. F: Yeah, but they can get, speaking of parasites, mange, which is an external parasite. And funny thing is, we've talked about scabies. So the dog comes in and has no hair and scabies and you're looking and say, “Have you been itching?” And the funny thing, one lady, she grabbed her shirt and she snatched it up. “Yeah, is that what these red spots are?!”

Alie: Oh no!
Dr. F: I’m like, “Ma’am, please.”

Alie: You’re like, “You’re not getting a two for one on this.”

Dr. H: Exactly.

Dr. F: I just asked a question, you know. “Do you have,” I don’t need to see ’em. If you do, you need to go see your doctor.

Dr. H: So yeah, the answer to that is Yes. Every time we go to the grocery store.

Aside: Also, I was like: you can get scabies from a pet? Okay, so human scabies and cat and dog scabies, they’re all different species. But you can get some bites if an animal is heavily infested. But it’s treatable in humans. Just not… by your vet.

Alie: Oh my gosh. Some other people asked about horses. And someone wanted to know: When a horse has a fracture, what can be done about it? Not a lot at this time, right?

Dr. F: Not a lot, yeah.

Dr. H: Typically not. Typically, unfortunately, because of their weight and just the way they’re built, unfortunately, typically that leads to a veterinary medicine decision that we never like to make, which is unfortunately euthanasia most times.

Dr. F: There’s a lot of weight on there. It’s almost like they’re on one finger, so it’s a lot of weight and it won’t heal properly.

Aside: Okay, I looked into this and there is a woman named Dr. Julia Montgomery in Saskatchewan working on research involving horse harnesses that could save their lives by lifting them up and letting their fractures heal without all that weight. So, hmm? Hippology episode, anyone? Horses? Yes?

Alie: Jen Lee wants to know, first-time question asker: Is it really okay for people to take fish or other antibiotics? Have you ever known someone who did this?

Dr. F: To take fish antibiotics?

Dr. H: Fish antibiotics? We don't recommend that people take any antibiotics that are prescribed to their animal.

Dr. F: Yeah, period.

Alie: Right. I’ve known people who don’t have insurance who get tetracycline from aquariums.

Dr. F: Don’t do that.

Dr. H: Don’t recommend that. Not a good idea.

Dr. F: Definitely don’t recommend that.

Aside: This next nephrological question was shared by Joni Waldrup, Morgan Alexandra Coburn, and Samantha J Guenther.

Alie: A few people asked about preventing kidney disease in kitties, and is adding water to their food a good idea? What else can people do?

Dr. H: Low protein.

Dr. F: Yeah. You want to have water available all the time.
Dr. H: Low protein foods definitely help because proteins have to be broken down. And a lot of times that puts more on the kidneys. So that's one of the things, that's why they have these special diets with less protein and ash. Diet is one big thing that we do see. And I definitely see that angle that we're coming from because we see a lot of kidney disease in animals. And going back to technology, they have a new test, what, SDMHA?

Aside: I know. You want to know what SMDA means. And I looked it up, and it's symmetric dimethylarginine. SMDA. But it's not to confused with an SMDH test, which is the threshold at which something makes you shake your damn head.

Dr. H: Which tells us before they even develop it now. What would you say, that test maybe came along about two years ago?

Dr. F: At the most.

Dr. H: Which is just amazing, it's amazing technology, where before, we looked at creatinine and blood urea nitrogen, which tells us, “This animal is in kidney failure.” But now, a totally healthy kidney, we can find out those things by just something called a SMDA test. It's pretty cheap. And we recommend doing those as an earlier preventative, at least after, what, six?

Dr. F: Yeah, five, six years old.

Dr. H: Five, six years old, and we'll know it before and we can start making some different medical-type changes to prevent it. So that would be the one thing. Try to do some preventative tests. That, more than anything, can let us know if there's a precursor to kidney disease.

Dr. F: Because a lot of times these things can be hereditary. So testing them yearly, or even when they get older, every six months, to catch these things before they start causing failure. We definitely have a better chance.

Dr. H: And they're pretty inexpensive. I mean, we're talking probably less than 80 bucks. It's not a terribly expensive test.

Alie: That's good to know. Lauren Mascibroda asked about mental illness or behavioral disorders in pets. They have a cat with anxiety, another with behaviors that their research compares closest with OCD. How about animals that you’ve put on Prozac, or…? How does that work?

Dr. F: They have several behavior drugs. The thing about it is, most don't work or don't work well without having training with it. Basically, a lot of them put the animals in the frame of mind to learn, then they have to be trained from there. A lot of dogs have separation anxiety. The owners leave and they just tear the house up. They have to be put on medication, but there are certain training things we have to do along with it at home. It's not like you're going to get a medication and everything's going to go away and it's going to be fine. You have to do other things along with it.

Aside: Such as, Dr. Hodges explains:

Dr. H: Simple things you can do. Let's say you're going to stay home and watch television. Grab your keys, shake 'em, [keys shaking] and if you have a pocketbook, grab your pocketbook, and sit on the sofa. Because this dog is getting wound up, he’s watching you. It's getting the cues. It knows, “Okay, this guy's about to leave,” so find those cues that you usually do, but just sit home. Sit home that night. Let's say you come home... One thing we recommend is if
the dog is really going on, ignore the dog. You ignore it initially, coming in. Let’s say you get home, wind down, grab your keys, grab your pocketbook, shake ’em, and just sit down and watch TV, or sit down with the dog. And the dog won’t pick up on those cues. Those are some training things that you can do that are really simple.

**Alie:** Okay. That’s good to know. A few people, including Lacey Allain, Jennifer Lemon...

**Aside:** Kim Bonacker, Katie Viles, Anna Elizabeth, Emily Jean, Demi Espinoza, Jessica Drew, and Justin Darr, who wanted to know about grain-free versus grain-inclusive diets.

**Alie:** Everyone seems to have an opinion. Nobody knows what to eat. How do you feel about it?

**Dr. H:** Phew.

**Dr. F:** Whew. Do we need to go down this road?

**Dr. H:** Whoo boy. I’ll tell you, I’m asked this every day. So, I’ll tell you, I don’t know the answer. But this is the thought, though, because I’ve talked to the actual drug reps. There was a test, and there was a trial. And they found that a small sample did develop cardiovascular disease.

**Alie:** On grain free?

**Dr. H:** On grain free, right.

**Alie:** I read that study.

**Dr. H:** So there was a study... There’s been millions and millions of dogs that have eaten this, and this was a small sample. I don’t know, but this is what I say: All my life they’ve told me to drink a glass of wine every day to live forever. Then, a couple years ago they said: Look, you drink a glass of wine, you’re gonna die. So I don’t know the answer, I’ll be honest. If there are more tests... I just don’t know because there’s just not enough tests. It’s that one study, so I don’t know whether to drink wine or not. So if I’ve been told all my life...

**Dr. F:** There are studies that even the regular food, there’s not a lot of grain in it. So it’s not enough to even make a difference. But we don’t know. There are millions of dog foods. One thing I can say is, a lot of times when different fads come out... maybe they’re not fads, but things that are for humans, we transition those things right over to the animal world, and we fashion them to make them look pretty, and we label things that are attractive to us. They may not necessarily be good for your animal. It may not make a difference, but because they’re attractive to... It’s marketing. We grab it because “they said it was good for us, should be good for my animal.” That’s not always the case. The jury is still out on a lot of these things.

**Dr. H:** Just like everybody else, we’re bombarded with questions from our clients who see stuff on social media. I’ve researched, and there is that one study, but it’s not a huge, huge study. So I’ll be honest, I don’t know.

**Alie:** I read that that study was funded by [singsong] Purina.

**Dr. H:** Right, that’s exactly – so you’re kinda all over the place with that, right. So I’m not sure.

**Aside:** Okay, sidenote: In case you’re not familiar with the study titled *Diet-Associated Dilated Cardiomyopathy in Dogs: What Do We Know?* It was published in the Journal of the American Veterinary Medical Association in late 2018, and it relates green-free diets high in legumes like peas and lentils with some statistics on reported heart problems in certain
breeds like golden retrievers. A lot of vets are not super convinced by this, all seem to say way more research is needed. If you do scroll down to the bottom of the study, under the acknowledgements section, you’ll see that its lead author has received research support by [dramatic pause] Purina. Which makes a lot of grain-inclusive foods. Interesting.

Speaking of research, what do two vets think of using CBD, or cannabinoid oil, for our furry, and scaly, and feathered friends? Melanie Baker, Amelia Heines and Theresa Bossenova all want to know:

**Alie:** Melanie Baker wants to know: Is there enough data or research yet on CBD usage for pets to draw any conclusions about efficacy for pain, or inflammation, or fear, anxiety?

**Dr. F:** That’s something that’s just started. It’s probably pretty similar to the grain, you know, there are pros and, there are no cons, the con is – does it work? But we’re seeing more and more products that are being labeled, and it depends on which state. There are certain states where, as far as veterinary is concerned, we can use it or we can’t use it. So it’s not something that’s widely used yet, but it’s definitely probably going to be.

**Dr H:** Personally, I don’t know. But I have seen some cases where it seems that people who kinda use it in conjunction with the seizure medicine, that the seizures do go down somewhat. I’ve seen some cases that I think – you know, I don’t have scientific proof – but I’ve seen some cases that it may help in some epileptic types. So it’s possible, yes.

**Alie:** Let’s say, this is a question that I’m asking for a friend, the friend being my dog –

**Aside:** So who else asked about weight management? [dramatic pause] Absolutely no one. Just me. I was literally the only person with this question.

Well then, this is for all the people who are maybe ashamed to ask how you deal with a chonk. And when to intervene if your once-emaciated rescue orphan becomes an absolute unit.

**Alie:** She’s, like, 12 pounds. Maybe she’s gotten to be about 13 and a half. How much should I be walking a little dog a day?

**Dr H:** When you say 13 pounds, is that a –

**Dr F:** What breed is she?

**Dr H:** Right, is that a Georgia 13 pounds where you got a little bit, you been eating some collard greens and a little bit… [laughing]

**Alie:** She’s definitely… I got her in July, she was a rescue, and she was emaciated, and she’s seven. You could feel every bone, and now she’s definitely not.

**Dr F:** I can tell you one thing than an old veterinarian told me a long time ago: [drumroll] You can kill them with kindness. A lot of issues come from being obese and overweight. So just because you’re telling me that you think it is – it is.

**Alie:** Okay, okay.

**Dr. H:** Typically that’s how it works.

**Dr. F:** That’s how it works. [Alie laughing] You want to be careful because of joint issues, you know, being too heavy and not being mobile when we get older.
Dr. H: Diabetes.

Dr. F: Diabetes is another big thing. What you may want to do it find a diet that’s lower caloric value, or maybe even weight reduction, I don’t know.

Dr. H: This is the number one question I ask: The food product’s fine. What kind of treats are you getting?

Alie: Oh! Greenies.

Dr. H: How many?

Alie: Maybe like three a week. Not a lot, not a lot! But I think I need to...

Dr. H: This is what maybe we would try.

Alie: We both need to go walk.

Dr. H: We’re gonna use green, but we’re gonna say green beans.

Alie: Ooooh.

Dr. H: Yeah. Green beans is a good treat. Let’s try green beans.

Alie: Okay, that’s so smart! Are you supposed to be able to feel a dog or cat’s ribs?

Dr. F: Yeah, you don’t want to see them, but you want to... if I’m standing behind a dog or cat and I’m reaching on both sides, I want to feel them without having to press too hard. I should be able to feel them by rubbing. If I have to press a little bit, then we got a little bit too much fat there. But I don’t wanna see them, because we’re too thin. That’s a good way to judge where we are, as far as scoring them, body condition.

Aside: So, [in a babying voice appropriate for addressing an adorable dog] guess who got a treat of a green bean today? And didn’t hate it? That’s right! Mah chunky li’l love muffin, my small monkey, my li’l smunk.

Okay, also, in Nephology, I said I had a pet raccoon, and I was referring to Gremmie, who is a dog, and very much not a raccoon. Just by looking like a raccoon, and her pre-adoption life of being a dumpster goblin on the streets. Which is hard to even think about. I can’t even think about it.

Speaking of difficult things...

Alie: The last questions I always ask: I always ask the hardest thing about your job first, the worst thing about your job, even the most annoying thing. Is it paperwork, is it having to stick hands anywhere weird, what’s the hardest thing about being a vet?

Dr. H: For me it’s pretty easy, it’s cut and dry. It’s probably the same answer. Being in practice now 20 years, we have the luxury now of seeing a full life cycle of a dog. So we see a puppy that we’ve had, we’ve got it at six weeks old, and we’ve watched it become 14, 15, 16, 17...

And sometimes we’ve been with this dog, we’ve been with these people, we’ve watched the kids grow up. Some cases, unfortunately they’re suffering. So there’s many cases now that we’ve watched them grow up, and they’ll say, “Well, Doc, can we wait a few hours, because the kid is in college and they want to come be with us?” So you have this kid come back, who
you've watched grow up with this pet, and the pet and the family and – it's just heartbreaking. That's the hardest part for me.

**Dr. F:** Definitely euthanasia is tough. Just being on an emotional rollercoaster sometimes. We mentioned earlier, you may have that client in room four, and you're consoling them, and you've seen that patient since they were born, basically, you've seen the family and the kids grow up, and you have to go next door, and there's a client in there that has a six-week-old puppy or kitten that's just starting its thing off. So you're emotionally going from one state to another state, and sometimes this goes on and on. Emotionally, sometimes it can take a toll, so that's probably the toughest part of the job, just being able to regroup, go into another room, start over.

**Dr. H:** And that human-animal bond like we're talking about. But there's a human-veterinary bond too, because we watched these dogs, we know them, we know the people. And being in rural Georgia, again, I talked about the grocery store, these are the same people who see you in the grocery store and say, “Hey, Doc! Penelope is doing really good!” And you're like, “Okay,” or “Hey, Doc, I've got to come see you because Penelope is not really doing good, and I'm afraid we're going to have to make that decision.” And you dread that. You really do.

**Alie:** How do you guys make sure that you, and vets in general, take care of your own mental health? I know that that's something that...

**Dr. H:** That is very – that is something that the profession is really looking at, because unfortunately we have had suicide. Dr. Ferguson, we went to your classmate’s... who owned a practice, he unfortunately committed suicide six or eight months ago. It is a mental rollercoaster. Just get with your peers. We have to talk about it, and talk it through, because sometimes it’s tough. You feel down, and you can fix 100 animals, but if you lose that one, that's the one you think about. People don’t understand, that’s the one that eats at you. That's the one that when you go home and sit at your table you're like, “Could I have something different?” And it's hard, because we're used to success, and we want it to be 100%, but it never is, and that eats at you a lot.

**Dr. F:** There's definitely something in our profession that's called ‘compassion fatigue’, which is a new term that they use, and that's exactly what it is, it’s fatigue from compassion. You just love – we're in the profession for a reason. We didn’t get in here because we didn't like animals, we're here because we love them. We have to make those tough decisions sometimes, or sometimes they come in and they don’t make it, and like you said, we want everyone to make it. You start questioning yourself, “Could I have done something better?” And you know that there’s nothing that you could have done better.

Another thing about veterinarians is we all want everything to be 100% right. That's kind of who we are. So if it doesn't go like we want it to go, we really stress ourselves, put a lot of pressure on ourselves. And then we have to go from there to the room where we’re starting over with a new puppy. And then you have to go home and you take it home. So it is something that mental health is a big thing in veterinary medicine, and we're learning how to deal with it and cope with it. Once you have a classmate or someone you know that it has happened to, you know it's real then, and becoming more and more.

**Dr. H:** Again, not knocking physicians, some of my best friends are physicians, but if a person goes to a physician and they have a lump that their physician thinks it's cancer, they'll refer it and
you go and see someone in two weeks, right? You're waiting to get in, maybe four weeks. A dog comes in with a lump, I have think, "Okay, is this cancer?" I have figure it out, I may have to biopsy, I may even have to surgically take it off, all within three hours. [Alie whispers "Wow."] You know, you've got to figure it out, you've got to take it off, you've got to look at the histopathology under a microscope and make this decision. Whereas even with humans, if they come in, we give our physicians, “Okay, well, he thinks it’s a lump, I gotta wait to get into an oncologist.” I mean, you have to be an oncologist. You have to be these things, and that can mentally put you into some tough places.

**Alie:** You're wearing every hat for every animal!

**Dr. H:** Every hat for every animal!!

**Alie:** In every species! If you've got a camel over here, and you're his oncologist, and you've got a spider over here and it's a nutritionist.

**Dr. H:** Right! It is a tough thing.

**Alie:** There's a lot of ologies. When I went to title this episode, I was like, “Is it veterinary technology??” But a veterinary technologist is completely different.

**Dr. F:** It's more or less a veterinary assistant, like a nurse.

**Alie:** And they also help you run everything, right?

**Dr. H:** Correct.

**Alie:** So we'll give claps to them too. [clapping]

**Dr. F:** No doubt, no doubt.

**Dr. H:** Couldn't do it without them.

**Dr. F:** We could not do it without them. I was initially trained as a veterinary technician, that's how I got started, so I definitely have an appreciation for the technicians and nurses.

**Alie:** What about the best thing about being a vet? What is something that just gives you butterflies and gets you out of bed?

**Dr. F:** You get to play with the babies every day.

**Dr. H:** Every day. And it's different. When I'm driving to work, I can be a dermatologist, a cardiologist, an oncologist, a surgeon, a pediatrician, a – who delivers the babies?

**Dr. F:** An obstetrician.

**Dr. H:** Obstetrician, I may do a C-section, all before lunch time! [Alie laughs] So that's the best thing.

**Dr. F:** Yeah. I always say, the veterinarian has a special job, because we can make everyone in the house happy. If you bring me your animal, your dog or your cat, and it's not doing well, and I help you make it well, not only does that dog feel better, you feel better. So we can make the whole house happy.

**Dr. H:** There you go.

**Alie:** Are you excited to go from being vets to being vets and TV stars also?
Dr. H: We are. And we get that question all the time. So I don't know if we’ll be TV stars, I don’t know how this will go, but I can promise you one thing: We’ll always be Southern gentlemen. I promise you that. That will never change.

Alie: And friends.

Dr. H: Yes, and friends.

Dr. F: Yes, that’s right.

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So work hard at what you love, and get by with a little help from your friends. Also, ask smart people stupid questions, because the questions are not stupid. And look! They love answering them. Also, watch Dr. Ferguson and Dr. Hodges on Critter Fixers on NatGeo Wild, they are amazing and so is the show.

Stay safe, isolate, isolate, isolate, wash your hands, and listen to the Virology episode from last week if you need to understand why it’s important to stay inside and skip the discos for a while. Trust me you’re saving lives by introverting.

More episodes are up at AlieWard.com, you can follow us at @Ologies on Instagram and Twitter. I’m @AlieWard on both. Thank you, Erin Talbert for adminning the Ologies Podcast Facebook group. Thanks Shannon Feltus and Boni Dutch of the comedy podcast You Are That for managing all the merch at OlogiesMerch.com. Thank you, Emily White and all the Ologies podcast transcribers for getting transcripts made, especially so fast. They're on my website on the Ologies Extras page.

Thank you, Jarrett Sleeper for assistant editing. He makes the mental health podcast My Good Bad Brain, and he does weekly Sunday morning livestreaming with the traumatologist episode guest Dr. Nick Barr, which is so good.

And of course, to the rescue every week is Steven Ray Morris, a cat daddy and host of The Purrrcast and the dino podcast See Jurassic Right. Nick Thorburn of the band Islands wrote and performed the theme music, and happy birthday to my wonderful sister Janelle this week.

If you stick around until the end of the episode you know I tell you a secret. This week’s secret is I know that we’re all isolating, I have been sleeping like 12 hours a day, and I think that’s just some major catch up? I don’t know, I’m starting to worry. But I have gotten so little done despite having all of this extra time from cancelled events. If you’re feeling the same way, please do not beat yourself up. So if you’re feeling a little bit less productive than you hoped you would be, don’t worry, you’re in good company, I’m right there with you. And that being said, let’s try to do things that will cheer us up a little, like whittle spoons, or watch movies, or pet your pets. Or maybe adopt one. Perhaps now is the time.

Okay, stay safe, love y’all,

Berbye!
While staying at home, your buddy in Vancouver, Aska Djikia, who involuntarily twitched the other day when someone touched their face and then shook a someone’s hand... in a TV show. Happy quarantining!

Hannah Dent

Ariana Pedersen

More links which may be of use:

Watch “Critter Fixers: Country Vets” on National Geographic

Their vet practice: critterfixerveterinaryhospital.com

Follow Dr. Hodges & Dr. Ferguson

100 Humans on Netflix

How many pets are in the US?

Scabies in humans

This 47 year old alligator likes cookies

Helping horsies heal

More on that horse harness

Okay the movie was “50 First Dates”

Grain-free diet study …funded by Purina

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