Review by the NIH Veterinary Panel of Animals for which Relocation is not Recommended by the Michale E. Keeling Center for Comparative Medicine and Research The panel met with Dr. James M. Anderson, M.D., Ph.D., Director, and Robin Kawazoe, Deputy Director, Division of Program Coordination, Planning and Strategic Initiatives (OD/NIH)

## Background

The NIH Veterinary Panel (Panel) was formed after NIH's acceptance with modifications, of a recommendation from the Council of Councils (Council), following a <u>Council Working Group on Assessing</u> <u>the Safety of Relocating At-Risk Chimpanzees</u>. The Panel works independently of any NIH program, external stakeholder groups or organizations, and sites holding chimpanzees.

At-risk chimpanzees were defined in the <u>Council report</u> as those animals that are more likely than not to experience one or more severe adverse events because of the relocation and integration process. Severe adverse events include permanent or serious injury, long-term destabilization, or death within 6 months of arriving at the receiving facility (a timepoint based on the duration of the post-trip adjustment phase and the additional time for follow-up). Recommendation 6, as accepted by NIH was, "When either the sending or receiving facility recommends not to relocate a chimpanzee, independent expert veterinary opinion should be sought to inform the relocation decision."

NIH implemented this recommendation by establishing a panel of three NIH veterinarians from the NIH intramural research program with expertise in chimpanzees or other nonhuman primate veterinary medicine, but who are independent from the NIH Chimpanzee Management Program. The Panel was charged to review the records of the chimpanzees under consideration for relocation, discuss with the sending Attending Veterinarian his/her rationale for not signing the health certificate necessary for transfer, and consult with other veterinary specialists who have examined the animals, and if needed, to examine the chimpanzees.

As of March 31, 2021, there were a total of 111 NIH-owned or -supported chimpanzees located at the three non-sanctuary facilities: the Alamogordo Primate Facility (APF) in New Mexico, the Keeling Center for Comparative Medicine and Research (KCCMR) in Texas, and the Southwest National Primate Research Center in Texas. This summary reflects discussions during three meetings focused on the NIH-owned chimpanzees at the KCCMR.

## Initial Meeting with the Panel – April 13, 2021

## **Purpose of the Meeting**

The purpose of the April 13, 2021 meeting was two-fold:

- 1) To develop a full understanding of the process followed by the Panel members in reviewing and deciding which chimpanzees could or could not be moved from KCCMR to the Federal Sanctuary operated by Chimp Haven; and
- 2) To ascertain whether the Panel operated independently of any other Federal staff, received sufficient information such that they felt fully informed about their decisions, received

requested medical and behavioral records about each chimpanzee, and followed a protocol in conducting their reviews leading up to their decisions.

### **Review Context and Process**

The Panel noted that they conducted their review from the perspective that the chimpanzees should be transferred to the Sanctuary unless a facility demonstrates that the animals should not be transferred. The members noted that their decisions were based on what is best for the animals. Each panel member was assigned as a lead for the review of each animal, but all members reviewed each animal's records, and they met as a group to discuss their respective reviews. The members stated that their decisions, i.e., there were no dissenting opinions.

The Panel confirmed that they operated independently of any other Federal staff, received all medical and behavioral records they requested about the chimpanzees at KCCMR, and followed a <u>written</u> <u>protocol</u> for conducting their reviews. Their determinations are based on the review of the medical and behavioral records of each chimpanzee; discussions with the sending veterinarian and other KCCMR staff; a virtual site visit of KCCMR (e.g., to gather and discuss additional information); discussions with a behavioral expert at KCCMR and with the behaviorist at Chimp Haven; a separate discussion with the subject matter expert on cardiovascular disease in chimpanzees/nonhuman primates;, and meetings among the Panel members to discuss the information they obtained. As explained in the protocol, the Panel members were told that they could visit the facilities if such visits were needed for their review. Based on the information provided about each chimpanzee and its social group, the Panel did not request an in-person visit to the facilities.

The Panel shared several documents which summarize their reviews:

- A spreadsheet organized by social groups. The Panel indicated that they reviewed each animal at KCCMR individually, and then reviewed the animals as members of one of 11 social groups. The social groups were identified for the Panel by KCCMR. The spreadsheet includes information on social group, duration of social history, and medical information, e.g., age, anesthetic risk, behavioral problems, diabetes, renal or hepatic disease, osteoarthritis, and cardiac disease.
- 2) One-page summaries of their review of each animal at KCCMR. Each summary contains date of birth, assigned animal number, sex, a statement about each animal, and a summary of the Panel's detailed review and whether and why the animal could be moved or not.

The Panel reviewed the records about each animal, and not just its health categorization.<sup>1</sup> While they said that they considered the Categorization Framework developed by the Council of Councils Working Group, they did not depend on it for their decision-making, remarking that it lacked specificity. The Panel members stated that many chimpanzees at KCCMR seemed to have substantial health issues, and some of the animals have significant behavior issues; others have varying degrees of anesthetic risk, cardiovascular disease, osteoarthritis, renal or hepatic disease, and other conditions.

<sup>&</sup>lt;sup>1</sup> The IVP was not specifically asked to re-classify animals.

The Panel determined that transfer of the animals with substantial health problems would accelerate their deterioration, and indicated that their determination considered the entire process of relocating the chimpanzees, i.e., pre- and post-transport physical exam including administration of anesthesia, transport, quarantine, introduction and integration processes, changes in caretakers and veterinary staff, and adjusting to new surroundings. For those animals that had severe health or behavioral conditions, the Panel does not recommend relocation of those animals because these conditions could cause the animals to die in transport and it was too much of a risk to move them, or it would be extremely difficult to successfully integrate some of the animals into a new location.

The Panel was asked about a situation where movement of a single animal was proposed and what factors were considered in making such a determination. The Panel noted that they reviewed each animal individually, and then considered the animal as part of a social group. The Panel noted in some cases, an animal currently at KCCMR had been part of an earlier social group whose members are now located at Chimp Haven and that animal, if moved, could rejoin its past social group members. The Panel reiterated that their decisions were based on the best interests of the chimpanzees taking into account their physical and psychological condition. The Panel reported they had spoken to a subject matter expert on cardiovascular disease in chimpanzees/nonhuman primates separately asking a series of questions, including the process used for determining cardiovascular health of animals in general. The cardiologist answered their questions but did not offer (and was not asked for) an opinion on the decision of whether an animal should be moved. Because of the extent of behavioral issues among some of these animals, the Panel also consulted with a behavioral specialist at KCCMR and, separately, with the behaviorist at Chimp Haven. The Panel said it was very helpful to understand how Chimp Haven veterinary and behavioral staff handle animals where there are known behavioral issues, including aggression. Chimp Haven provided an extensive presentation to the Panel on how they manage cases where an animal has been known to be aggressive. Their experience is that an animal can be managed well, even if previously deemed to be aggressive.

From their previous experience in identifying animals to move or not move to the federal sanctuary, the Panel had spoken to the veterinary and other staff at the Federal Sanctuary to review the process followed once a chimpanzee arrives at Chimp Haven. Most chimpanzees are anesthetized up to three times during the process of relocation (anesthesia for pre-transport physical, potential anesthesia to move into a transport box, and anesthesia for an exam post-arrival at Chimp Haven).

The Panel noted that NIH Chimpanzee Management Program staff have been exceptionally responsive to their requests for information and scheduling virtual interviews, and that KCCMR shared the chimpanzees' medical and behavioral records and responded to questions in a timely manner.

#### **Initial Determination for KCCMR Chimpanzees**

Based on their review of medical and behavioral records, discussions with the Attending Veterinarian at KCCMR, a subject matter expert in cardiovascular disease in chimpanzees/nonhuman primates, behavioral expert at KCCMR, behaviorist at Chimp Haven, and a teleconference with veterinary and other animal care staff at KCCMR, the Panel determined that 11 of the remaining 52 animals at KCCMR are not precluded from transfer to the federal sanctuary at Chimp Haven.

The Panel discussed with us in-depth and at length the bases for their determinations for each of the 11 animals. This included review of specific laboratory results over time, reasons why the Panel felt it was safe to move each animal, and further medical assessment that is needed in some cases. Their

determination, after assessing all available information and discussion, and based on their individual and collective many years of experience and their professional veterinary medical judgment, was that it would be safe to transfer a subset of the animals at KCCMR.

### Second Meeting with the Veterinary Panel - August 12, 2021

A follow-up meeting with the Veterinary Panel was held on August 12 to obtain an update based on their continued review of animals at KCCMR. The Panel had requested additional information on specific KCCMR animals in mid-May which they received in late May. The Panel requested additional information on specific KCCMR animals in early July which they received in mid-July.

Based on consideration of the additional information received, of the 11 animals remaining at KCCMR, the Panel disagrees with the Attending Veterinarian about two and possibly three animals which the panel believes could be safely moved to Chimp Haven. Their determination about the third animal is pending a cardiac examination scheduled for late August.

## Third Meeting with the NIH Veterinary Panel – September 15, 2021<sup>2</sup>

Another meeting with the Veterinary Panel was held on September 15 to discuss the results of the August cardiac examination and the Panel's determination for or against moving that animal. Following the cardiology exam and having reviewed the full examination report, the Panel agreed with the KCCMR Attending Veterinarian that the animal should not be moved to Chimp Haven because of the risk of a fatal cardiac event during relocation.

# <u>Fourth Meeting with the NIH Veterinary Panel – November 19, 2021 and Final Determination About</u> <u>Two Chimpanzees<sup>2</sup></u>

Following a September 29 teleconference between the KCCMR veterinary staff, the NIH Veterinary Panel, and a NIH Chimpanzee Management Program staff member who is a veterinarian, and consistent with the <u>review protocol</u> followed by the Panel, the Chimp Haven Attending Veterinarian reviewed the medical and behavioral records for the two animals in question and requested and obtained additional information from KCCMR veterinary and behavioral staff.

Following review of additional information provided by KCCMR, Chimp Haven stated its support of the KCCMR assessment that the two chimpanzees should remain at KCCMR, and that the Chimp Haven Attending Veterinarian would not agree to the transfer of these animals to Chimp Haven.

The additional information provided by KCCMR to Chimp Haven was shared with, and reviewed by, the NIH Veterinary Panel which changed its initial determination and concurred that the two animals should not be transferred from KCCMR. The reasons for the Panel's determination are:

(1) Due to the strong and sole social bond between a geriatric chimpanzee with mobility issues that will not be moved and one of the two chimpanzees in question. The chimpanzee in question serves as a behavioral support for the geriatric chimpanzee who is dependent on this chimpanzee when they are separated from the main social group for medical purposes. After multiple discussions with KCCMR and Chimp Haven staff, the Panel concurs with both

<sup>&</sup>lt;sup>2</sup> These meetings were also attended by Robert Eisinger, Ph.D., Senior Scientific Advisor, DPCPSI, OD/NIH.

facilities that this chimpanzee should not be transferred at this time. If the geriatric chimpanzee with mobility issues dies before the chimpanzee in question, the chimpanzee in question who serves as her behavioral support will be re-assessed for potential transfer to Chimp Haven based on age, health, behavior, social grouping, and environmental needs.

(2) Because the other chimpanzee in question who had a unilateral nephrectomy and has a history of aggression, thus increasing the probability of wounding and tissue injury with resultant worsening of renal function and the need for medical interventions when introduced into a new social group at Chimp Haven. After extensive communications with the KCCMR staff and the Chimp Haven staff, the Panel concurs with recommendations of both facilities to not relocate this chimpanzee due to her increased risk of deterioration or death due to her existing renal condition and co-morbidities.

KCCMR, Chimp Haven, and the NIH Veterinary Panel concur, and the two chimpanzees in question will remain at KCCMR.

There are seven chimpanzees located at KCCMR that are not being moved at this time because they serve as behavioral support for another chimpanzee that is not being moved. If that paired chimpanzee dies, the other chimpanzee will be re-evaluated for potential transfer to Chimp Haven based on their age, health, behavior, social grouping, and environmental needs.