

TRAP, NEUTER AND RETURN OF FERAL CATS: A TEXAS EXAMPLE



Margaret R. Slater. Department of Veterinary Anatomy & Public Health,
College of Veterinary Medicine, Texas A&M University,
College Station, TX 77843-4458. mslater@cvm.tamu.edu.

INTRODUCTION

In many countries, free-roaming cats—including feral and socialized cats—have emerged as the most problematic domestic animal. Reasons include concerns about predation of wildlife, public health (especially rabies), the welfare of the cats themselves and nuisance issues like noise and feces. Debates rage over what to do with these cats, who is responsible for them and what is appropriate. Government and animal control agencies, public health and wildlife organizations, humane societies, cat breeders, veterinarians and concerned citizens are all involved.

Historically, doing nothing or killing cats were the most common options. In the past several decades, concern over the appropriateness of killing cats who exist due to human negligence or deliberate release has arisen. In response, non-lethal methods of control have become popular and are advocated in many countries. Trap, neuter and return (TNR) is a non-lethal approach that can provide a long-term solution to controlling existing free-roaming cats. Particularly when coupled with adoption of tame cats and kittens, this method can maintain or decrease populations of free-roaming cats. After humane trapping, cats should be vaccinated for rabies, if appropriate, identified by ear-tipping and surgically sterilized at a minimum.

Concern over the efficacy of TNR in decreasing the numbers of cats and of the quality of life for cats in colonies managed by TNR still exists. Recently, several publications have documented the efficacy of TNR and the health of cats in managed colonies. In addition, the alternatives to TNR such as poisoning cats are often not accepted by the public. Placing cats in sanctuaries or relocation, is very costly and are not very effective in the long term.

MATERIALS AND METHODS

Source of Cats:

The Brazos Feral Cat Allies (BFCA) was founded in March 2001 as a trap, neuter and return organization serving the Brazos Valley in the central Texas area. Caretakers of feral cats contact BFCA and were put on a waiting list for the approximately monthly surgery sessions performed at the Veterinary Medical Teaching Hospital by senior veterinary students under faculty supervision. This was developed as a unique service learning program at the College of Veterinary Medicine.

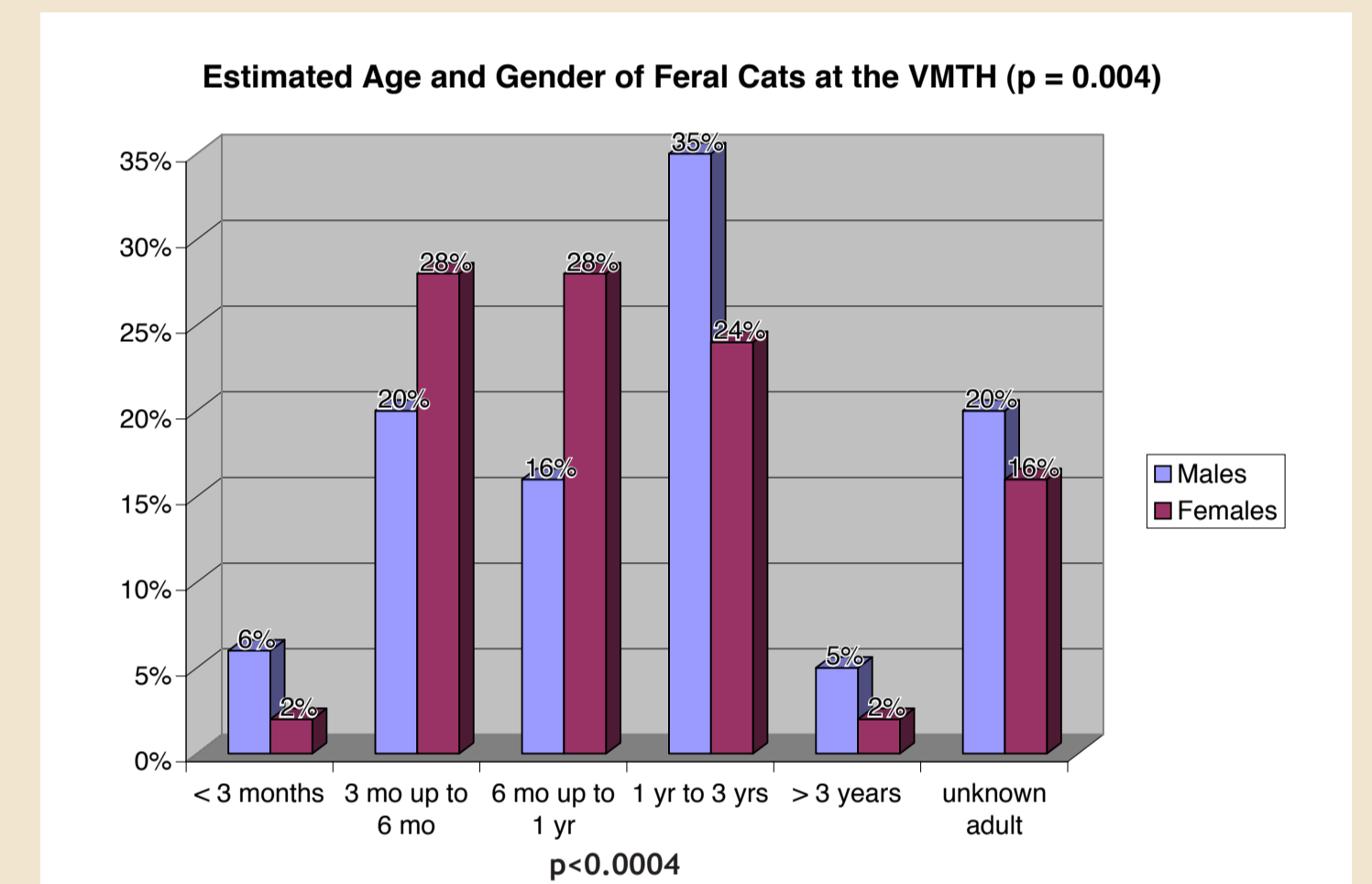
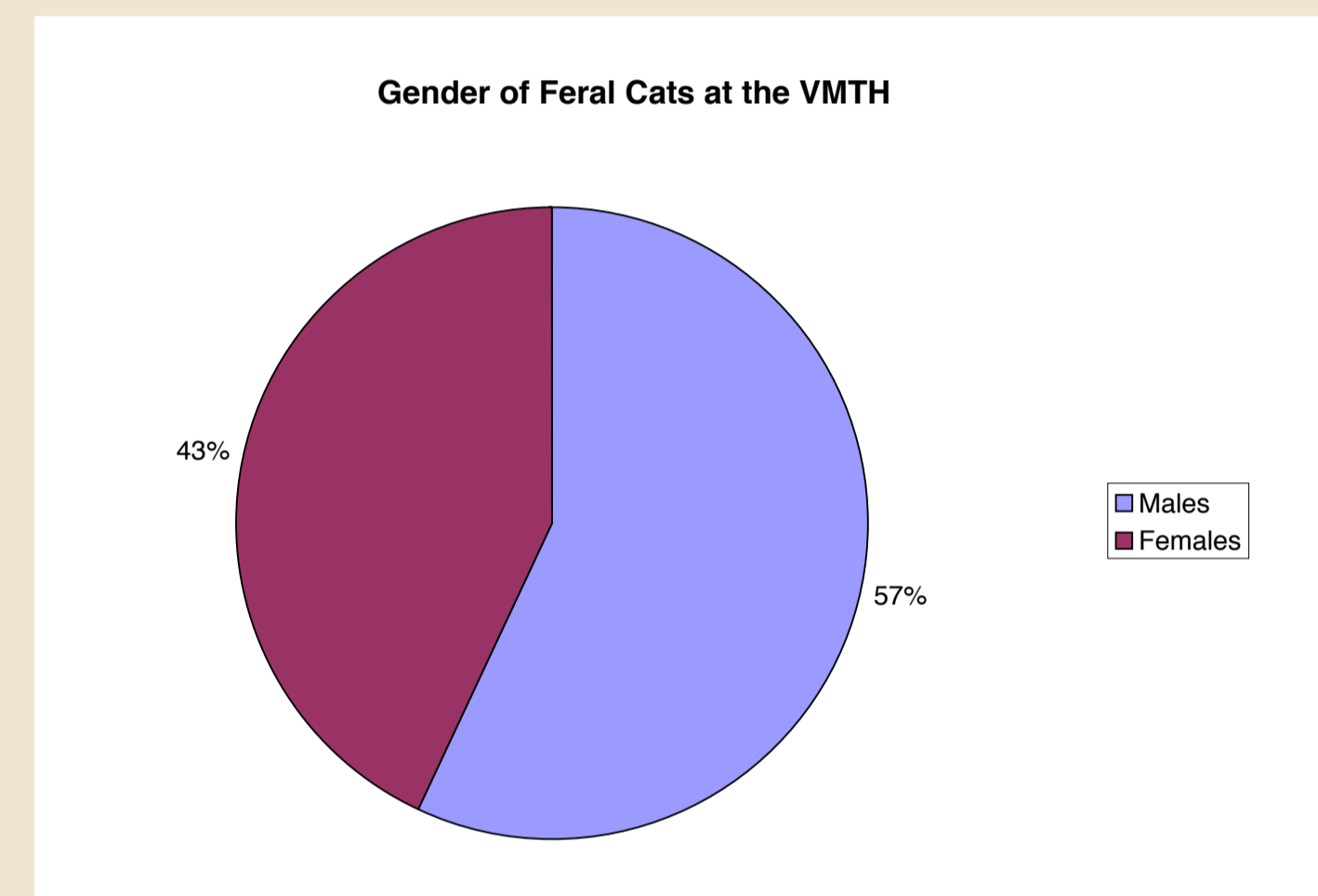
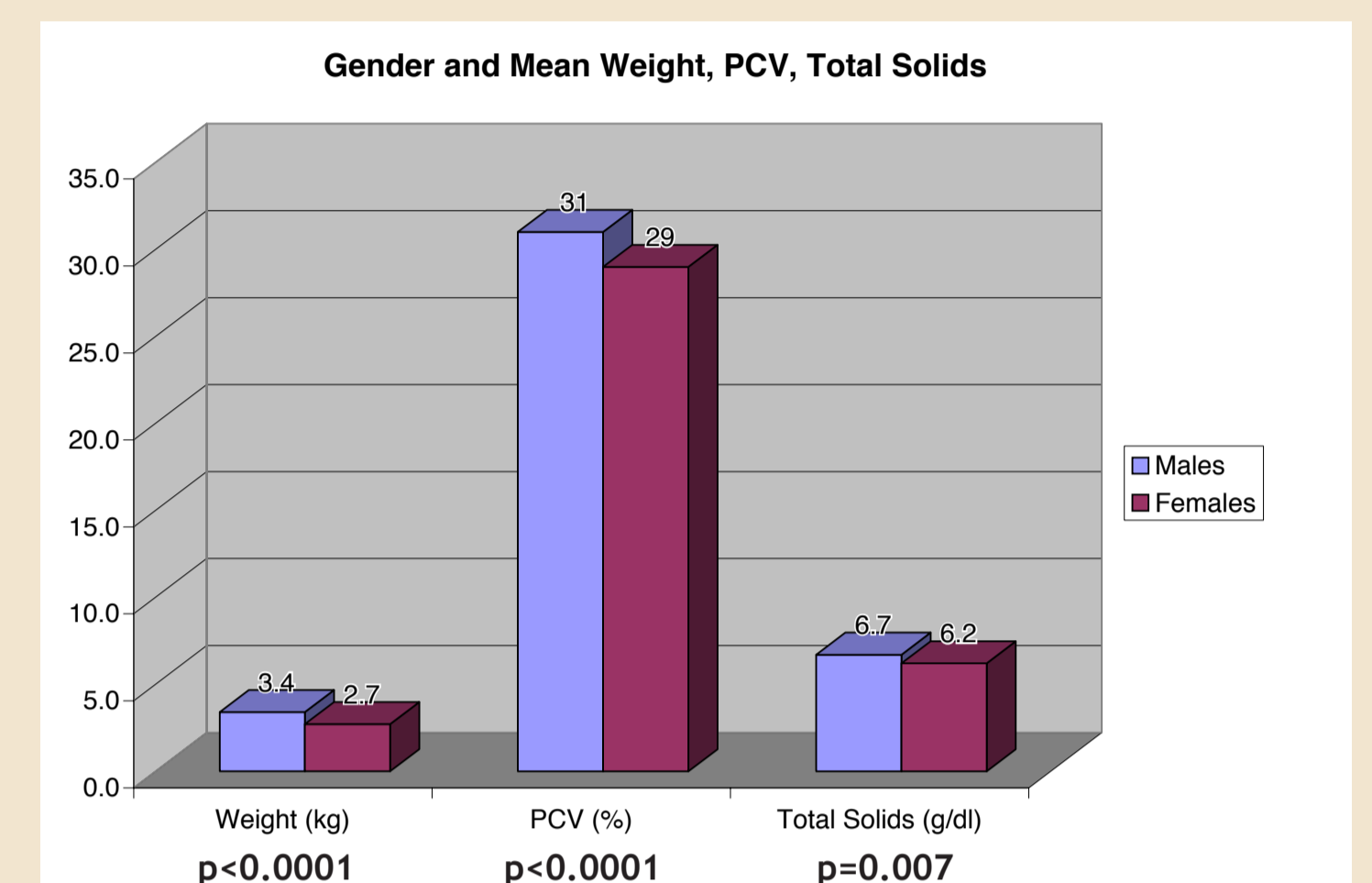
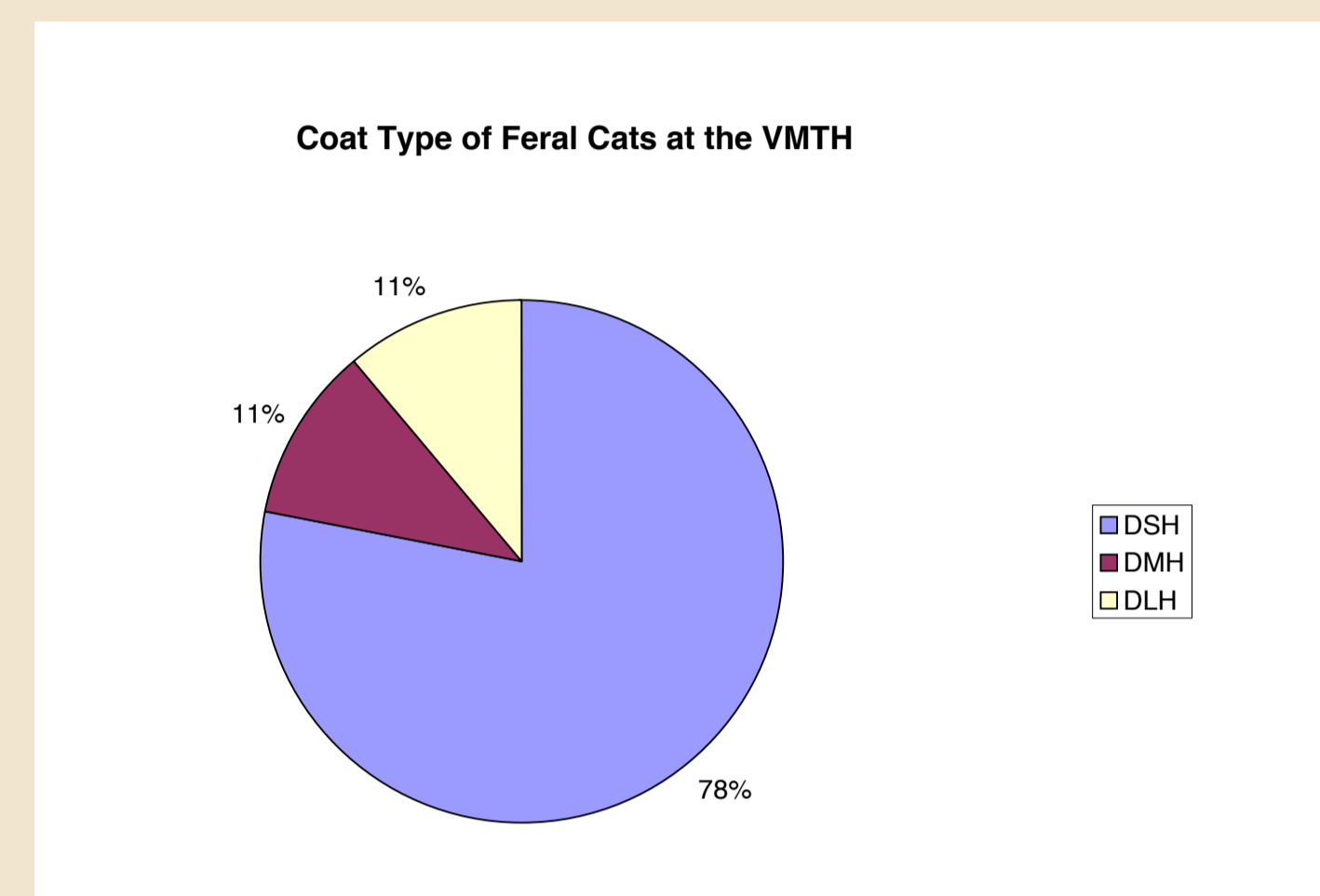
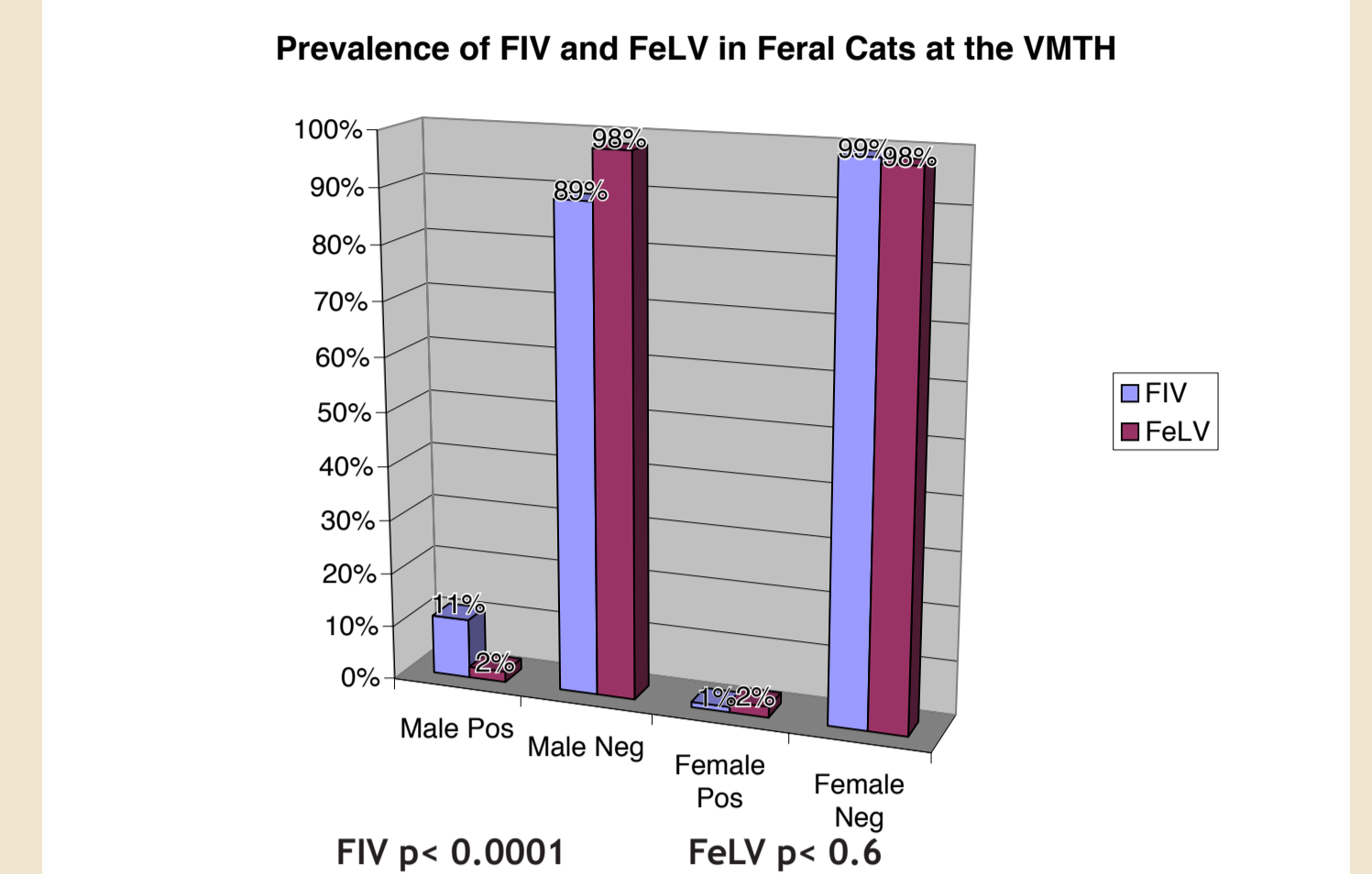
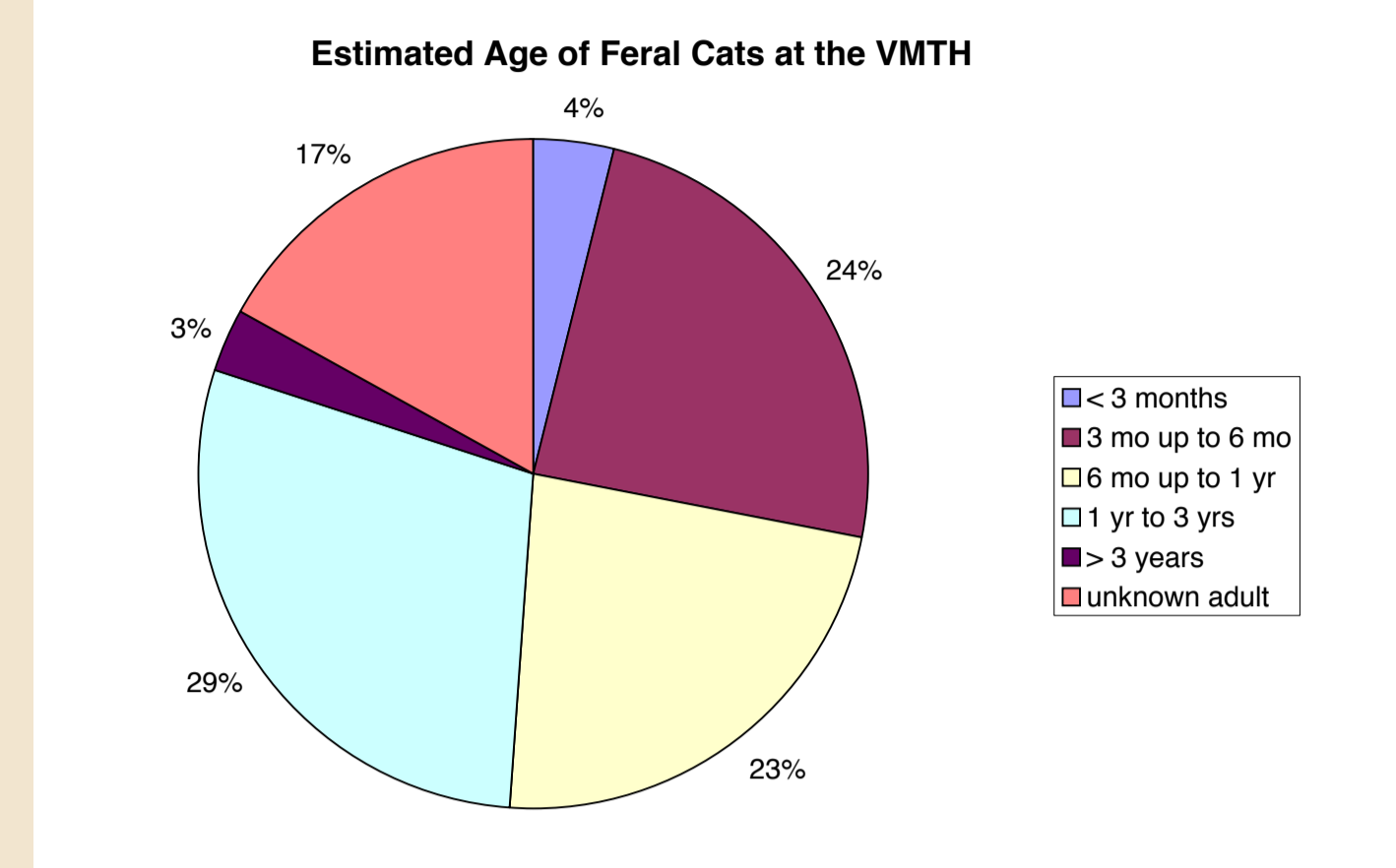
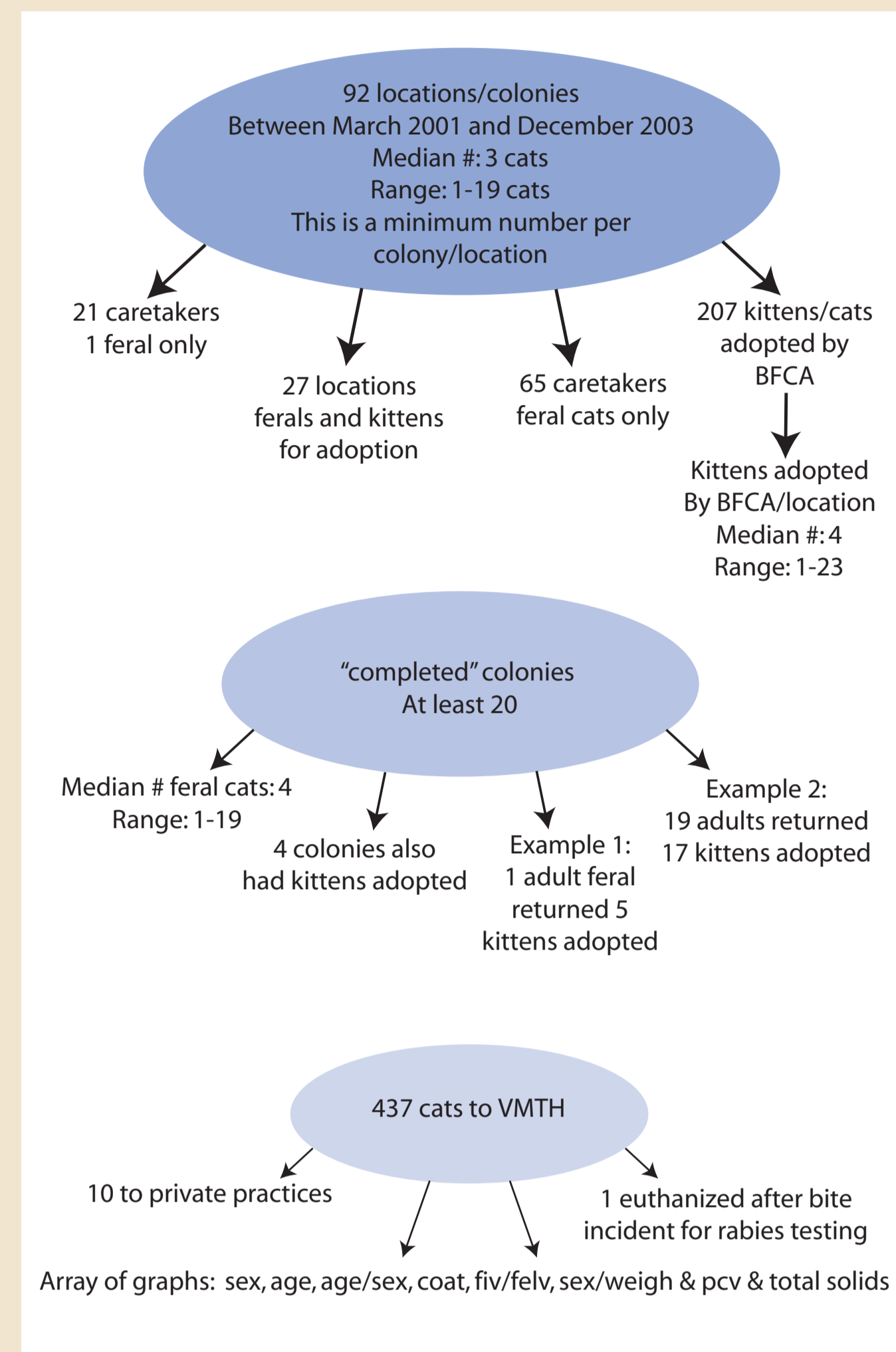
Feral cats were also occasionally seen by one local private practice. Young kittens and socialized adult cats were placed into foster homes as available. All health care and sterilization for these socialized animals were performed by 3 local private practices. The partnership with the VMTH was approved by the Hospital Research Review Committee for client owned animals.

Data Collection:

The number of cats coming from each caretaker was recorded. Cats entering the adoption program were tracked by BFCA members. BFCA requested a \$10 donation for each cat—the majority of caretakers were able to make that donation level.

Feral cats were weighed on arrival at the VMTH and housed in special cages until surgery. A standard form was used for all cats that served as the medical record. All cats were anesthetized with an anesthetic mixture of acepromazine, glycopyrrylate, butorphanol and ketamine. Following immobilization, cats were placed on masks for oxygenation, tested for feline leukaemia and feline immunodeficiency virus using a SNAP combo test. If cats were positive they were euthanized. Negative cats received a physical examination, and were vaccinated, microchipped, prepared for surgery according to standard procedures and spayed or castrated and ear-tipped. Blood was also taken for PCV and total solids. Female cats were intubated and placed on inhalant anesthesia; they also received antibiotics due to the extended surgical times of student surgeons.

RESULTS



CONCLUSION

Need for Trap, Neuter and Return Programs:

In Texas, cats may still be viewed as vermin and they are commonly shot or deliberately run over with automobiles. Yet, word of mouth has continued to bring caretakers to BFCA and the VMTH to have their feral cats sterilized, vaccinated, identified and tested before returning to their original location. This illustrates the drive to care for these cats even in areas where cats are not always valued companions.

Feral Cat Welfare Issues:

Feral cats seen at the VMTH were slightly more often males than females. Males were significantly heavier and were more likely to be < 3 months of age or over 1 year of age compared to females. Clinically unimportant differences in PCV and total solids were seen for males and females. There were no clinical problems associated with PCV's less than 21 seen in 13 cats. FIV was significantly more likely to occur in male cats but the prevalence of FIV and FeLV was low.

Populations:

Numbers of cats in a given location that were brought to the VMTH for surgery varied widely. This number should be considered the minimum number of cats. Numbers of kittens removed from the colonies and adopted through BFCA also varied.

In some cases, removing kittens substantially reduced the numbers of cats returned to the colony. Sterilization certainly prevented future litters in these colony locations.

Because none of these colonies are in truly isolated locations, new cats migrating in or being abandoned nearby are a reality. Ongoing monitoring will help prevent unwanted litters from being born by trapping and sterilizing or adopting all new cats.

Effectiveness:

At the level of the colony, caretakers can stabilize and, in some cases, decrease the numbers of cats present without euthanasia or relocation. Colony caretakers continued to be interested in using this non-lethal method of control.

Demonstrating the effectiveness of trap, neuter and return at the level of the town or city will require long-term, high volume sterilization of feral cats.

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