

DOI: 10.21767/2577-0594.100008

Cuban Ambulatory Veterinary Clinic

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Received date: February 5, 2019; Accepted date: February 12, 2019; Published date: February 25, 2019

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Citation: Lazo MVJMM (2019) Cuban Ambulatory Veterinary Clinic. J Anim Sci Livest Prod Vol.2 No.2:08.

Introduction

Taking as reference 1959, the year where precisely in Cuba took place important economic and social changes, we can say that the Cuban Veterinary Medicine became widely benefited, only until that year in Cuba had graduated 848 Veterinary Doctors after the creation of the School of Veterinary Medicine of Havana, founded on April 10th, 1907. The wide gratuitous access to education without any distinction for everyone, not only alphabetized the people but continued with educational programs that significantly improved their cultural level. Universities were opened, universalizing this type of education; today we have several Veterinary Faculties in several provinces of the country that had graduated more than 5000 veterinary doctors with study systems linked to the daily practice; to this, we should add the Technological Institutes that form technicians in Veterinary Medicine and Artificial Insemination. These possibilities have allowed the consolidation of a scientific-technical work in our profession, also supported by a vast academic program of Masters and Science PhDs. Experience, performance, competitiveness and new ethical principles present us to the era of One Health or direct assistance to the people, under the fundamental principles of Primary Health Care (PHC), conceiving a general strategy based in the active and conscientious social participation, prophylaxis, sanitary measures and health care with quality and efficiency among others.

Under this principle generally works the veterinary clinical attention, reaching all points of the urban, suburban and rural geography, without leaving out a net of clinics and consults that also assist.

This veterinary health program has been developed under the conditions of a subsistence economy against a commercial economic embargo set by the governments of the USA, reinforced by extraterritorial laws and that has been going on for already 57 years. This situation prevents us to access a great variety of veterinary drugs, and of course, to diagnostic means and state of the art technologies. On the other hand, the development of the individual and collective capabilities have motivated a high degree of creativity for the animal health care, sanitation, prevention, the use of native vaccines, among others, which allows us to maintain an equilibrated status of animal health.

The house to house ambulatory work educates the client and the professional and gives the possibility of treating both productive and small animals (pets), common to our environment, the epizootiological/epidemiological surveillance is more effective and emerges a relationship professional-client-animal with new ethical values of solidarity and love to the animals, reflected in a marked improvement of pets and productive animals, compared with indexes of developed countries, and also kennel clubs for different races in order to maintain the genetic values, the organized existence of animal protectors and the existence of a law project for animal protection and welfare, in phase of elaboration to be proposed later to the Cuban Parliament.

The clinical care work is carried out in several ways: individually and in teams, and the local system of epizootiological surveillance integrates to the national surveillance system. The internal and external parasitic diseases and those of the skin are frequent, coinciding with the characteristics of our tropical climate. There is an anti-rabies vaccination campaign, coordinated with zoonosis specialists from the Ministry of Public Health, completely gratuitous, thus guaranteeing a very favorable immunological status regarding rabies, especially canine. Also common is the work of surgery regarding sterilization, preferably for females, mostly dogs and cats, which are supported by groups for animal protection which carry out massive campaigns also gratuitous; the more complicated surgeries are less frequent, motivated as we previously stated by the limitations in the necessary resources. It is important to point out in these years the use of alternative medicines (Bioenergetics and Natural), which have greatly substituted the limitations stated earlier and has also allowed achieving some degree of specialty in them.

We bet for our ambulatory clinic, effective and efficient, with the use of appropriate technologies, with interdisciplinary support defined in processes of decentralization, synonym of Primary Health Care, which is essential health care, based on practice, in scientific evidence and in socially acceptable methodologies and technologies, universally accessible to all individuals and animal owners in the communities, through their total participation and at a cost that the community could bear with self-determination.