



In the Grasp of the Animal Kingdom

AN INTERVIEW WITH DR. CLARKE ATKINS

In the 8 years I've been involved in veterinary publishing, Dr. Clarke Atkins is someone I've had the pleasure of working with on a number of articles; an author who I know is incredibly well respected for his dedication and depth of knowledge with regard to his field of medicine—companion animal cardiology.

I had the opportunity to meet Dr. Atkins in person at the 2011 AVMA Convention in St. Louis. Our conversation revolved around his current research on heartworm disease. However, I also had the chance to get a “behind-the-scenes” view into Dr. Atkins’ life and outlook on today’s veterinary medicine. —Kelly Soldavin, Editorial Director

Why did you decide to pursue veterinary medicine as a career?

I made this decision much earlier than is probably advisable. My first recollection of choosing veterinary medicine as a career was a “what I want to do when I grow up” essay I wrote in seventh grade. I had by then raised many animals, including dogs, cats, pigeons, guinea hens, and a burro and my imagination was firmly in the grasp of the animal kingdom. In honesty, there was no other choice for me; I struggled for years trying to come up with an alternative career path...just in case.

Why did you choose a career specializing in cardiology?

I originally chose a career in internal medicine that, over several decades, morphed into cardiology. After graduating and completing my internship, I became

an internist in private practice in California. However, I accepted an academic position as an internist, replacing a departing cardiologist, at Oklahoma State University, which led to teaching and providing case coverage in cardiology.

My mentors in internal medicine included Steven Ettinger (University of California–Davis), Neil Harpster (internship), and Larry Tilley (private practice). I was supported in my pursuit of cardiology by John Bonagura and, in later years, by Bob Hamlin and Bruce Keene.

Can you describe your current pursuits?

I currently maintain a clinic presence, though less than in previous years. I teach students in the clinic and spend a good deal of time training house officers (interns and cardiology residents).

Dr. Atkins and third-year cardiology resident Dr. Marisa Ames examining Martin, an English springer spaniel with cardiac disease.

Clarke Atkins, DVM, Diplomate ACVIM (Internal Medicine & Cardiology), is a professor of medicine and cardiology at North Carolina State University College of Veterinary Medicine and the Jane Lewis Seaks Distinguished Professor of Companion Animal Medicine. Dr. Atkins is known for his research and teaching in small animal cardiology and is the 2004 Norden Award recipient for excellence in teaching. His research involves canine and feline heartworm disease and pharmacologic therapies for cardiac disease in dogs, cats, and horses. He is the author of over 150 publications. Dr. Atkins received his DVM from University of California–Davis and completed his internship at Angell Memorial Animal Hospital in Boston, Massachusetts. Prior to his current position, he was on faculty at University of Wisconsin and Oklahoma State University and in private practice in California.



Probably the most rewarding aspect of my job is the research projects carried out with our trainees. My current research interests include heartworm disease; in particular, investigating the problems reported in the Mississippi River delta region (to learn more, view Current Controversies & Dilemmas in Heartworm Disease at tinyurl.com/heartwormwebcast).

My other research interest is the management of heart failure, with a focus on drugs that suppress the renin-angiotensin-aldosterone system, such as ACE inhibitors and mineralocorticoid receptor blockers (spironolactone).

What should the clinician be aware of with regard to heartworm disease?

Despite having 8 effective heartworm products on the market (with differing spectra of parasitic activity and methods of administration) that require administration as infrequently as monthly to every 6 months, we are not winning the battle on heartworm infection.

Sales of heartworm preventive products are on the decline, owner compliance is poor and, in this decade, a quarter of a million cases are recognized each year in dogs receiving veterinary care. This does not take into account the hundreds of thousands of dogs that do not receive veterinary care or heartworm preventive.

What do you feel are the most important issues facing the veterinary profession?

I am not sage enough to really answer this question, but I will share one concern regarding escalating veterinary fees and total costs per case.

Despite reports that pet owners are willing to spend money to care for their pets during the economic downturn, many simply cannot afford veterinary care, even moderate veterinary care, particularly after going through a diagnostic/therapeutic process that has weakened them financially prior to referral.

While I am an advocate of veterinarians receiving adequate compensation, which has often not been the case, recently I have become concerned that the pendulum has swung too far in the other direction. I worry that veterinarians' status in the public eye will deteriorate and we will lose the respect we now enjoy—even in the presence of better care.

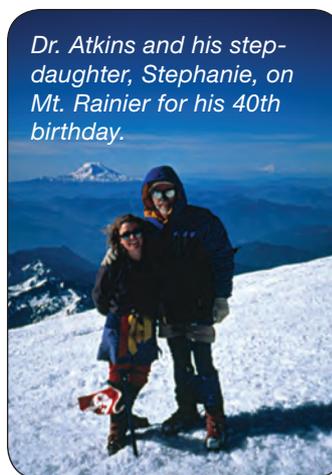
What is the most exciting change you've seen in veterinary medicine?

The advent and progression of veterinary specialization began around the time that I became a veterinarian. It has been accepted, progressed, and escalated at a rate that I never could have imagined. This has truly improved our profession's reputation, increased the public's expectations, and dramatically improved the high-end of veterinary care.

What is the worst change that has taken place during your career?

The increasing practice of using the Internet as a source for information regarding diagnosis and treatment of patients (eg, discussion forums) instead of turning

to peer-reviewed material or communicating directly with a specialist. We encourage our clients to come to us with questions regarding their pets' care instead of using Internet forums...we should hold ourselves to the same standards.



Dr. Atkins and his stepdaughter, Stephanie, on Mt. Rainier for his 40th birthday.

How do you manage your work-life balance?

In truth, I do not. There is virtually no separation and I should not be considered a role model in this regard. However, what I have done well is to break away and go places, often exotic places—in many instances, because I am a veterinary academic.

In 2007, my wife and I hiked from France all across Spain (500 miles) on the Camino de Santiago de Compostela over 35 days. I have trekked in the Himalayas, climbed Mount

Rainier, hiked the Continental Divide Trail with my friends Greg Grauer and Rance Sellon, hiked the Inca Trail with my wife and Terri DeFrancesco, taken a train across the Australian outback, rafted the Grand Canyon, camped within the Norwegian Arctic Circle, been on a remote tributary of the Amazon in Peru, and will be trekking in Patagonia this year.

I honestly do not think that this represents balance but it does represent a method to escape and find the illusion of balance by geographic and communication (well, except for the BlackBerry in recent years) isolation, which is probably a good thing.

Tell us about your most memorable moment as a veterinary professional?

Memorable *moments* include receiving letters of acceptance from University of California–Davis, Angell Memorial Animal Hospital, and into ACVIM for Internal Medicine and, later, Cardiology.

But truly memorable *events* are different. One memorable event was diagnosing taurine-deficient dilated cardiomyopathy in a cat named Snowball. Her successful treatment began a long-term friendship with Jane and Terry Seaks. They have become friends of the NCSU College of Veterinary Medicine and funded the first endowed chair in the college's history—The Jane Lewis Seaks Distinguished Professorship of Companion Animal Medicine. These generous, thoughtful, and forward thinking people have made incredible contributions to NCSU and veterinary medicine in general.

The second is representative of the success and growth of our trainees. Just over a year ago, our service received an emergency—a 13-year-old dog with heartworm caval syndrome. This syndrome, which is highly fatal in young dogs, is a killer in older patients. The dedicated owner chose to treat and our first-year resident surgically removed the heartworms and managed the case through several months of complications, including heart failure, aspiration pneumonia, and septic arthritis. This took an incredible amount of intensive medical care, client communication, and just plain hard work. It was representative of a resident maturing into a specialist as well as demonstrating fortitude and an intense dedication to the patient and owner. It is incredibly rewarding to be a part of this type of “moment.” ■