

Private Practice in Today's Vietnam

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Dr. Huỳnh Thị Thanh Ngọc describes what it took to open the first private veterinary hospital in Vietnam and what defines their practice today in terms of culture, capabilities, and education.

Petcare Vietnam was established on June 16, 2005 in Ho Chi Minh City (HCMC) as the first private hospital in Vietnam. In 2006, we opened 2 other facilities in HCMC; in 2009, we expanded to Vung Tau, a coastal province 130 km northeast of HCMC, with our fourth facility. Currently, we are a team of 28 people: 18 veterinarians, 6 nurses/technicians, and 4 ancillary staff members.

Vietnam has more than 10 million dogs and cats and more than 500 private

veterinary clinics. The best clinics are mostly located in either HCNC (380) or Hanoi. The most advanced include 4 that are Japanese owned and run, 1 run by a firm in Thailand, and 20 that are fully Vietnamese. The 4 Petcare Vietnam clinics combined welcome about 100 patients per day, 85% of which are dogs, 15% cats. Occasionally hamsters, parrots, ornamental chickens, rabbits, gibbons, and monkeys are presented for care.

Initial Start-up, Professional Training, & Continuing Education

Prior to opening our doors in 2005, we had to send our veterinarians to human hospitals and laboratories to observe surgeries and acquire additional skills in diagnostic imaging (ultrasound and radiology). Why human hospitals? As Vietnam is a developing country, there was a lack of dedicated veterinary facilities in which young graduates could obtain



quality hands-on practice experience. For this reason, continuing education provided by the World Small Animal Veterinary Association (WSAVA) is undoubtedly valuable as it helps to bridge the gap between young and experienced practitioners. Since the establishment of the Vietnam Small Animal Veterinary Association (VSAVA) in 2010, veterinarians across the country are given the opportunity to upgrade their capabilities through at least 5 seminars and workshops annually. All Petcare Vietnam practitioners are members of VSAVA and are required to attend all WSAVA/VSAVA seminars and workshops. Some staff members have had the opportunity to attend continuing education offerings in Thailand, Singapore, and Indonesia.

Culture & Regulations

There is no one way to generalize how pets are regarded by Vietnamese people.

Our culture is as varied as our country is long, 1650 km. On the far extreme (and wrong) end of the spectrum, Vietnam is one of 11 countries in the world in which dog and cat meat is still consumed; approximately 5 million dogs are consumed each year. This statistic signifies a small, yet considerable, portion of a 90-million human population who do not give a second thought to animal welfare, let alone veterinary care. From the middle of the spectrum toward the brighter end, a majority of—if not all—dogs and cats are considered family members and are taken care of as such.

Despite this love, seeking veterinary care has not always been traditional, mainly because of cost concerns. This is also the reason why Petcare's original customer base was primarily foreigners and expatriates. Fortunately, we have observed a shift in mindset and behavior



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over time, as Vietnamese clients now represent 60% of our customers. Two intertwining reasons explain the shift: 1) increasing general standard of living; 2) more veterinary clinics are available and accessible, providing a medium for veterinarians to communicate the importance of beyond-the-basics medical care to pet owners.

Rapid Advancement

Just 5 short years ago, most cases presented for care consisted of GI disorders, internal/external parasites, and distemper or parvovirus infections. Today, these conditions are more or less under control as pets are vaccinated and dewormed correctly. In addition, owners have also become more acquainted with dry commercial pet food, which helps to decrease gastrointestinal disorders. Cases now include acute and chronic nutritional problems; skin diseases; heart, kidney, and endocrine disorders; toxic exposure; and hip dysplasia/elbow dysplasia (HD/ED). The need to control HD/ED, hereditary orthopedic disorders, has become more prominent since the emergence of show dogs and the establishment of the Vietnam Kennel Association (VKA) in 2009. Most emergency cases are caused by the debilitation of chronic diseases, dehydration caused by vomiting or diarrhea, poisoning, and dystocia.

Practice Constraints

Although all Petcare Vietnam hospitals are equipped with in-house diagnostic facilities (eg, X-ray, ultrasound, blood testing), these facilities are not the norm in Vietnamese veterinary clinics. The number of veterinary facilities in Vietnam with such capabilities can be counted on the fingers of two hands. As most clinics do not have access to in-house tools for

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rapid assessment of clinical parameters and diagnostic imaging, practitioners typically intervene based on clinical signs. In addition, Vietnamese practitioners are allowed to perform in-house rapid testing for only heartworm, parvovirus, coronavirus, and distemper; blood chemistry and complete blood cell counts must be conducted at official governmental laboratories.

Another major drawback to practicing in Vietnam is the lack of access to veterinary medications: Anything that is used to treat humans is banned from veterinary use, including injectable anesthetic/analgesic drugs. Moreover, pet owners often assume human medications are usable for pets. Human oral pain medications, much to the detriment of animal welfare, are often given to pets. Frequently, our Facebook page receives inquiries such as “What medicine can I buy at the [human] pharmacy to treat my dog?” after 2 sentences that describe the dog’s condition. It takes time to (re) educate a population of 90 million that this is not a safe practice.” ■■■