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March 27, 2004

Division of Dockets Management (HFA-305) **Mailed via Certified Mail**
Food and Drug Administration **Emailed on March 27, 2004, 9:40 A.M. PST**
5630 Fishers Lane, Room 1061 **in two transmissions.**
Rockville, MD 20852

Re: Agency Information Collection Activities; Proposed Collection; Comment Request; Control of Communicable Diseases; Restrictions on African Rodents, Prairie Dogs, and Certain Other Animals Docket Number 2004N-0049

As a voter, tax payer, animal lover, and consumer, I have a few comments and suggestions in response to the above referenced docket as well as a few questions that I kindly request a response.

To date the offices of the FDA and CDC have not responded to my original comments to Docket No. 2003N-0400. Since the docket above pertains to information collection, I am wondering why there are no responses or comments from both offices to people's requests for information and response to add to this data collection process? My letter contained many logical arguments that have been ignored, side-stepped, and left unanswered by the FDA and CDC, why? I would like to request immediate written response to my comments dated November 8, 2003 and January 6, 2004 as it pertains to Docket No. 2003N-0400 to add to this information collection period for this docket. These answers are critical in demonstrating the poor logic being applied as it pertains to making this proposed ban permanent.

Upon calling the offices of the CDC and FDA about the matter, I have not gotten any answers to my questions either, why? When asked why the importation of animals and quarantine measures are not being addressed as the ultimate underlying issue pertaining to the proposed ban, I still have not gotten an answer. Prairie dogs do not inherently carry monkey pox, the sylvatic plague, or tularemia. They only contract the illness from infected fleas, or other infected animals. Other rodents, including rats, rabbits, hamsters, guinea pigs, gerbils and other common household pets could contract the same disease but only if they are exposed to it, the same as the prairie dog. What is the FDA and CDC going to do when another disease outbreak occurs due to improper handling during importation and quarantine and the animals are exposed to these more routine pets? Again, why isn't this the true issue of the matter at hand than the banning of prairie dogs and other African Rodents? What has the FDA and CDC done to preserve the native prairie dog when putting this ban in place? It is common knowledge that the species is truly declining as we speak due to development. Many of these animals have been given another chance at life as pets instead of being bulldozed, poisoned, shot or worse. What have both agencies done with this ban to ensure animal welfare and the preservation of one of our keystone prairie species?

From my communications with both agencies, there has been the argument that there is no substantive clinical data to document how vectoring or harboring of MPV occurs in prairie dogs and due to lack of data is why the ban may not be lifted. Since the last infected prairie dog to die of MPV occurred in July of 2003, again, please answer why no one else, including pet prairie dogs, have contracted MPV during the past eight months? According to common logic, how would the public or any scientist be able to prove a negative? Monkeypox is no longer an issue and I thank both agencies for their quick response in limiting the outbreak to only 35 human laboratory confirmed cases. But, with no prairie dogs infecting others, how can anyone prove the threat is still an issue? You would think

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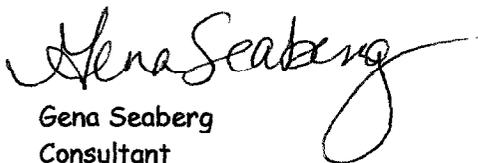
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that if prairie dogs were harboring MPV, we would still see some cases in the past eight months. Please answer how this won't occur again with other imported animals in the future and if it won't, why are our native species being banned and not all species that could contact this illness?

Again, there is inherent risk to anything in life, including pet ownership. I will ask again, there are other known zoonotic illnesses associated with other pets, yet why are they not being banned? Please answer how both agencies are equitably applying their logic with this ban? I can contract illness from different reptiles, avian species and felines yet they are not being banned, why? Again, I challenge why the FDA and CDC are not addressing the failure to comply with importation and quarantine as the true problem here and fail to see the logic being applied to one of our native species. If you are going to ban the prairie dog, then to apply your logic, all rodents should be banned, why isn't this happening? Too much money to regulate this endeavor? Then why should this ban be inequitably applied to our native animals? What will happen when more rabbits are kept instead and people get sick when they are exposed to an infected imported animal that hasn't been under proper quarantine? Ban all rabbits? Rats? What precedent is being set when both agencies are not addressing the real problem? I challenge the lack of regulation to already established measures as the true problem here and I want an answer as to what is being done to prevent future exposure to other illnesses to other species of animals? I want the documentation to show this information as well.

There are major flaws with the data collection with this docket as well as docket 2003N-0400 since there is no comment or data back to those that have commented to reflect and the information is one-sided. Please respond to all of my questions to both dockets immediately and have your answers reflected in this data collection period. Thank you for your time in advance.

Humbly submitted,



Gena Seaberg
Consultant

Cc:

President George W. Bush	Vice President Richard Cheney
Dr. Julie Louise Gerberding, Director, CDC	Dr. Mark McClellan, Commissioner, FDA
U.S. Representative Jay Inslee	U.S. Representative Rick Larsen
U.S. Representative Brian Baird	U.S. Representative Doc Hastings
U.S. Representative George R. Nethercutt, Jr.	U.S. Representative Norm Dicks
U.S. Representative Jim McDermott	U.S. Representative Jennifer Dunn
U.S. Representative Adam Smith	Senator Maria Cantwell
Senator Patty Murray	Tommy G. Thompson, Secretary, DHHS/HHS/OS
Dr. Lester Crawford, Deputy Commissioner, FDA	Gloria Dunnivan, Division of Compliance, FDA
Dr. Ed Thompson, Jr., Deputy Director for Public Health Service, CDC	
Dr. David Fleming, Deputy Director for Public Health Service, CDC	
Mary Selecky, Secretary of Health, Washington State Department of Health	
Dr. John Grendon, Washington State Health Department	
Dr. Mira Leslie, Washington State Health Department, Public Health Lab - Epidemiology	
Dr. Sharon Hopkins, Public Health Veterinarian, Public Health - Seattle & King County	
Dr. Federico Cruz-Uribe, Director of Health, Tacoma-Pierce County Health Department	
Dr. M. Ward Hinds, Health Officer, Snohomish Health District	
Philip L. Chao, Office of Policy and Planning, FDA	
James E. Barrow, NCID, CDC	