

## The State of Veterinary Care in Morocco: A Visit to American Fondouk



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“Is Erin able to bring any sort of eye drops for a kitten who lost his eye? There are no vets in Meknes.”

This was a text message I received two days before leaving for my vacation in Morocco in early November 2021. Accompanying it was this picture (right) of tiny black-and-white Bagheera, afflicted with a ruptured right eye. My initial response was my canned “can’t provide advice from a photo, needs a VCPR, have to see the kitten, et cetera,” until I realized that a presumptive diagnosis was probably enough for me to rationalize bringing a bottle of ophthalmic tobramycin drops and an E-collar in my carry-on bag. After all, it was unlikely to cause harm, and I’d be able to lay eyes on the kitten in a few days to verify my suspicion. If I didn’t do it, nobody else would. By the time I saw Bagheera (and his brother Mowgli, and his surrogate mother Ritaj), the eye was much less exudative and more end-stage, so I performed an exam, verified his sex, and showed the owners how to restrain him and apply eye drops every 6 hours for a week to mitigate secondary infection. Fortunately, he seemed comfortable and happy otherwise - which was a good thing because he was *\*not\** going to allow an E-collar! I advised the owners to pick up some lysine treats if they could find them, for all three cats, suspecting a high prevalence of chronic feline herpesvirus infection.





When I arrived in Morocco, I was shocked at the sheer number of adult cats and kittens roaming the streets of Morocco's urban medinas, probably a third of whom had similar eye lesions in various states of progression. Some seemed happy despite their maladies, but others were suffering. This was not surprising, given the high transmission rates of feline herpesvirus keratitis and other ocular infections in dense cat populations, presumably complicated in Morocco by limited genetic variability, competition for food, and concurrent parasitic and other infections. Surprisingly, the feral cats are the lucky ones - their presence is generally welcomed in the medinas because they aid in rodent control, whereas the street dogs are seen as nuisances at best and dangerous threats at

worst. For the most part, these are not pets; they are co-inhabitants of the crowded medinas and the arid scrub deserts who must coexist with people. Cats are fed, but dogs are shoed away.

It is easy to appreciate that there is a significant difference between the care that these animals need and the care that society can provide for them as unowned animals in a developing country. During my stay in Morocco, I visited Angell's affiliated large animal hospital in Fez, dubbed American Fondouk (right). In Arabic, "fondouk" means "hotel" and historically refers to common lodgings in the medinas where travelers could rest their bodies and those of their animals during long trips. American Fondouk was founded in 1927 by an American traveler named Amy Bend Bishop; it provides care free of charge to Morocco's working animals, primarily horses and donkeys, whose owners'



agrarian livelihoods depend on their animals' health and good working condition. American Fondouk's director, Dr. Gigi Kay (left, pictured with me), has adequate resources and personnel to treat the variety of equid cases presented daily. Still, the equipment and staff necessary to operate a mixed animal practice are beyond feasible for the organization. She acknowledges that Fondouk staff are trying to launch fundamental medical care for the area's cats and dogs, but they have significant limitations in what they can do. She suggested that a team of veterinary staff from America would be of great benefit to helping establish training and procedures for providing care to these forgotten small animals.



In addition to the staffing and training challenges in establishing a small animal practice, there is also the non-trivial matter of acquiring drugs for use in surgery and treatments. Most of the medications on-site at American Fondouk are appropriate for use in livestock but not in small animals, and I quickly realized how fortunate our American pets are regarding access to care. There is no inhalant anesthesia or controlled substances to facilitate surgical anesthesia. Dr. Kay lamented the loss of their one bottle of dexmedetomidine when it was dropped on the floor, delaying surgeries until it could be (expensively) replaced. Pain

medications are also challenging, especially for cats and dogs who are less tolerant of non-steroidal anti-inflammatory drugs (NSAIDs) than are their equid cousins. For example, Fondouk's equine intern, Dr. Marie-Charlotte Marrone (upper left and lower right, pictured with me), asked me to consult on a sweet dog with an infected wound. I recommended a dose of human Augmentin that would be appropriate and easy to obtain without being too expensive. Still, I was unable to recommend a stronger pain medication than gabapentin because there are few veterinary-specific NSAIDs available in Morocco, and the ones available to me are unfamiliar to an American veterinarian. Increased finances would probably go a long way toward alleviating these problems, but there would likely be headaches involved with procuring drugs and medical supplies from other countries to import to Morocco.

Fortunately, the travel company with whom I took my trip (Wanderlust Voyages, Malden, MA) is owned by Belghit and Megan, two animal lovers who share a common desire to improve access to care for the animals of Morocco's streets. We chatted over lunch about what would be required to send a team of professionals to Morocco to set up a temporary clinic and perform some veterinary outreach work in Fez, and I was encouraged to see that they are highly motivated to accomplish this goal. They have already established a camel rescue fund that was able to provide over US\$1,000 in 2021 to feed and provide for working camels in the Sahara. As an employee of MSPCA-Angell, I am in a great position to help establish a link between our clinics in America and American Fondouk's hospital in Morocco, and I look forward to fostering relationships with our Moroccan colleagues to try to provide the best possible veterinary care for these animals.



When I returned to the States, I realized that even though veterinary medicine is a challenging profession, American veterinarians have access to a wide range of drugs, supplies, and knowledge not readily available in other countries. I appreciate the struggles that veterinary teams face in areas where care is limited. There is an excellent opportunity to provide care for some of these underserved animals and their human companions, and I am excited to look into further opportunities to help wherever we can.

If you want to contribute to American Fondouk, you can do so directly on their website at [fondouk.org](https://fondouk.org).