BEAR WITNESS. SPEAK. DEMAND. ACT.

A shocking report into what goes on behind the razor wire at Huntingdon Life Sciences written by two people who worked there in 2005.

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HUNTINGDON LIFE SCIENCES ARE NO STRANGERS TO CONTROVERSY

1989: They were first exposed by Sarah Kite working for the BUAV. She worked there for 6 months. This first undercover job saw international press coverage of Huntingdon Life Sciences for the first time.

1997: Zoe Broughton worked undercover inside HLS in the UK for 9 weeks. She filmed, with a hidden camera, workers punching, shaking and terrifying 4 month old beagle pups. The resulting footage screened on national TV saw the suspension of Huntingdon’s licence. Also in 1997 and entirely separately, Michelle Rokke worked inside Huntingdon’s US lab in New Jersey. She filmed monkeys being cut open whilst they were still conscious, something reported here in 2005.

2001: We received documents from inside Huntingdon’s lab in Occold, Suffolk. These showed that a worker was frequently on drugs and was dealing drugs on site. Another worker turned up drunk but was only disciplined for turning up late. Also in 2001 we received a massive leak of documents relating to 5 years of experiments. These were xenotransplantation experiments on wild-caught baboons for the Swiss pharmaceutical giant Novartis. Huntingdon were frequently criticised by Novartis for sloppy procedures and they broke GLP (Good Laboratory Practice) 520 times during the course of these experiments.

The dog was laid on its back and the bone marrow taken from the chest bone. This wasn’t pleasant to sit through. The two team leaders I had done this procedure with hadn’t given the dog enough anaesthetic and the dog whimpered and moved. This was so upsetting for me. They didn’t give more anaesthetic but carried on.
Huntingdon Life Sciences’s managing Director Brian Cass has gone on record many times stating that the beating and rough handling of dogs filmed in 1997 was an isolated incident. He always forgets to mention that in 1989 Sarah Kite noted in her book Secret Suffering that there was a particular worker who was noted for his brutal handling of dogs. This very same person was filmed in 1997, some 8 years later, punching beagle pups in the face, so as you see hardly an isolated incident. In the last few years we have heard rumours that what was shown on national TV was in fact routine inside Huntingdon and that brutality was endemic at HLS. Our problem was that whilst we knew it we couldn’t prove it. Until now. Now we have cast iron proof that dogs are roughly treated at HLS, slapped and sworn at. Workers routinely don’t carry out even the most basic of procedures and, just like in 1997, animals are cut open whilst still conscious. Enough is enough. The only right thing for any company to do is to distance themselves from Huntingdon and Huntingdon Life Sciences must now close.

INSIDE HUNTINGDON LIFE SCIENCES, 2005:
The following account is written by two people who both worked in the Beagle Unit inside HLS for over 12 months, leaving in late 2005. The pictures displayed are stills taken from the TV programme “Animals.” At the end of the film it stated that the scenes of inhalation toxicology on dogs were not that the scenes of inhalation toxicology on dogs were not shot inside HLS. They were. We know because these two workers were there when it was being filmed. HLS would not let the TV crew film unless they put this at the end of the program. In the scene that shows the beagle being killed they had to get workers from elsewhere inside HLS to kill those dogs as the workers there did not want to be filmed on national TV killing dogs.

Animal Technician, must be animal lover, the job ad read. That’s me, I thought. I’ve had animals in my home since I was born. I could never imagine living without them. I had doubts, believe me. I had listened to talks given by both sides, for and against animal testing. However I’d never really decided how I felt about the subject. That was years ago. Maybe things have changed now or even better improved, I thought. So I rang and asked for an application form. When it arrived I filled it in. All the usual details were asked for, and a small amount of medical history.

A week or so passed and I received a letter inviting me to an interview. Amazingly the letter said the interview could be up to two hours long. I couldn’t imagine what they could possibly tell me that would take that long. The interview consisted of seeing four different people, and actually going into an animal unit. I saw animals, and the rooms they were ‘dosed’ in. I left feeling confused. I still didn’t know how I felt about working at a place that was so often slated and hated by so many people.
More than anything one specific thing bothered me, that they hadn’t told me exactly what my day to day job would entail. They don’t explain anything to you about what you will be doing. When we started we had no idea we’d be cleaning cages or holding dogs while they’re put to sleep. Until you get in there on the first day of work, you haven’t got a clue what you’ll be doing. If I’d known before I went in, I would never have done it.

**FIRST DAY:** I was given blue uniforms, wellies and toe-ctor shoes. There are a number of inductions that the company gives but not one of these is about working with the animals. Even the health and safety induction was about office work and not anything to do with animals.

Most inductions were long and drawn out. I think the people who actually work with the animals should be on a different course to the office workers. There was no mention that at any point you could get bitten by an animal. In the dog building I was met by the NACWO (named animal care and welfare officer). I was told at this point that I would be working every other weekend as overtime. I was astonished to learn that I would be working twelve days on and two off continuously!

Then I met my team leader. She was in the middle of doing a bleed with another member of staff. I was shocked at what I saw and thought it was quite barbaric. The holder was sitting on a stool with the dog to her right hand side also sitting on the chair. She used her right hand to hold the dog’s front legs down and keep the dog tight to her body. Her left hand was used to hold the dog’s muzzle upwards so that the neck was clearly visible to the technician taking the blood. The dogs were struggling and whimpering as the needle was stabbed and plunged in and out of their necks. I found it very difficult to watch.

The trainee technician was trying to reassure the dog but it didn’t work at all. She took me round where my team worked and I was shown the units where the dogs were, which was building J24. There were nine units my side, each unit holding a maximum of 32 dogs. Some units were empty. There were five full-time staff and one part-timer. I was shown the day books.

Everything that happens in a unit each day is recorded in time in the day book, from the first time anyone goes in the unit, right through each procedure to the last thing done in there that day. When the dogs first arrive at HLS they have a number tattooed in their ear. The dog is put into the right pen, then within a few days of being there, the HLS number is tattooed into their other ear. Most dogs hate this and have to be held tight to do it. Some even mess themselves because they are so scared.

Every time I have to get the dogs out for something, I’m just thinking I don’t want to do this. They think every time I come out of this cage I’m going to have something done to me, and they are. We had a meeting with some of the top dog staff one afternoon who showed us some under-cover video footage and then we were asked questions about it. There were around 20 staff in the room, some trainees, some licence holders. Not one person answered the questions. Everyone just sat there, silent. Most of the staff had a very uncaring attitude towards the animals and they seemed to be able to just “switch off” to what was happening.

If you didn’t “fit in” with the team you were given all the horrible things to do, more dogs to clean out, more procedures to hold for. You didn’t get all your breaks, you were given procedures to ‘hold for’ at lunchtime so you’d have to have a late lunch. The same people time and time again got away without cleaning out, and
never had to miss a break or usual lunchtime. They were invited on lunches out and were gone for an hour and a half and sometimes came back smelling of alcohol. Sometimes you’d get a group of people, like 4 or 5 people, holding a dog still for a procedure and it’d always be whimpering. It’s bad enough for me to watch and I understand what’s going on, they haven’t got a clue what’s happening...it’s really horrible.

I was told that whenever you start something in a unit, before going into the unit, you write your start time in the day book. When you finish you enter the finish time and initial it. Sometimes you were so busy you forgot to put a finish time or anything at all. At the end of the day the books were all checked by a licence holder and signed. If you had forgotten to write a time you were told to make one up. This is falsifying data and shouldn’t be done.

Each morning and afternoon the first and last job to be done was ‘writing up’ the dogs. This is where you have a sheet with each dog’s number on it (before they go on a study or after the study has finished) and you go round the unit checking for abnormal faeces, vomit, under or over active dogs and that they are still alive.

You write the time in and initial it. When the dogs are on a study they are on a computer system, either VMS or Xybion. This is the first job at 8.30am and the final check is at 4.30pm. The dogs are left from 4.30pm till 8.30am without a check. At 6pm the lights went out in the unit (by timer switch) and at 6am the lights came back on.

CLEANING OUT: After the first write up of the day came the cleaning out. When you enter in the morning the dogs are either in two’s or three’s. You’d let the pair or three dogs out into the middle of the unit whilst you scraped out, with a spade, the old sawdust and feces, checked the water valve in each unit, put a shovelful of sawdust in and put each dog back into its right pen. This took ages as you can imagine! The first time I cleaned out 32 dogs it took me an hour and a half. You do get quicker but on busy days you’d get given half an hour to clean out 32 dogs and of course corners were cut and edges of pens would gradually build up with urine and feces and sawdust. When you did get enough time it took much longer, or you were made to do a unit which had been neglected for a while and it was horrible.

Sometimes the dirtiness of a unit hit you as soon as you went in, and the dogs were living in it all the time. The units are supposed to be power-hosed every four weeks which meant the dogs being moved to another nearby unit and their unit being powhosed. This didn’t happen every four weeks, sometimes because we were too busy, short-staffed or it was just overlooked. When the unit was eventually powhosed the pen bars would be thick with feces and it took hours to clean.

When I went in the next day, one of the dogs was dead in his pen.

FEEDING: All the animals are fed on Harlan Teklad. Whether they are 5-6kg or 12-13kg dogs they are all given 400g daily. If the dogs aren’t on a study they get fed as soon as they are cleaned out. If they are on a study they usually get fed an hour after dosing. This can be as late as lunchtime when they are fed. On very rare occasions dogs that have stayed the same weight or lost weight for three or more weeks get 500g of Teklad but that was extremely rare on my team. On some studies the higher dosed dogs go off their food. They were left as long as three days without eating, then they would sometimes get the food moistened. Very, very rarely, were they offered tinned food. The food is left in for two hours then taken away. Any residues are weighed and recorded for each dog.

HOW THE UNIT IS SET UP FOR A STUDY: Before the dogs arrive we are given a list of dogs (supplier numbers) and they are sorted into who’s going to be in certain groups. We work to a ‘protocol’ which tells us how many dogs will be on that study, and what class the study will be. Class ‘4’ is a hazard group and once the study starts everyone that enters that unit has to wear a boiler suit, mask, gloves and over-shoes. If I was caught entering that room without all of these I would be in trouble but I have seen my team leader, vets, study directors
and the NACWO all enter the room without any of these on. Then they go into another unit. What are they passing on?

Anyway it depends how many dogs are on that study. One study for example is 32 dogs, 16 male and 16 female. Males one side of the unit, females the other. Starting from the door the first four males and females are what are called “control” dogs. They are not on any drugs but they have to be dosed the same as the others. If the dose is a capsule, they are given an empty capsule, if it’s an injection (called sub-cut), injected into the scruff of the neck, it is usually purified water or similar. These dogs have a white card on their pen.

Then there was group 2 dogs (yellow pen card). The dose was quite low and apart from the odd one which vomits there aren’t usually many signs. The dose depends on the study. It could be around 0.5ml to each kg, it could be more. Again it was the next four males & females after the “control” dogs. Then it was group 3 dogs (blue pen cards): same amount of dogs as other groups, this could be 1.5ml per kg or more. It depends on the study as to side effects. Then the last four males & females were in group 4 (pink pen cards). Usually this group’s dose was double group 3’s. These had the most side effects and could be quite nasty. One study I was working on was an anti-cancer drug, class 4 hazard, and that had a group 5 section of dogs. Two days after dosing the group 5 dogs and a couple of group 4 dogs were very ill. When I got there in the morning there was blood everywhere in these groups. I was shocked, but told to write each dog up as having red-stained feces. Cleaning this out was not a pleasant job and I was glad I was wearing a face mask.

They had a discussion and it was decided that the dogs wouldn’t get any medication and they would see how they went over the next couple of days. I said I was unhappy about the decision but I was just a “trainee”, what did I know!

The dogs, about 5 of them, were lifeless all day, more blood all day, they didn’t want to eat, drink or exercise so they were not paired up that night.

When I went in the next day, one of the dogs was dead in his pen. I went berserk and was told to go and get a coffee whilst the team leader, NACWO, vets and study directors sorted everything. It was decided that another two dogs were to be put to sleep that day. The study was put on hold for a few days, then it was decided that the group 5 was “too high” a dose and the highest they wanted was a group 4. Two more dogs were put to sleep over the next week or so. I was talking to another Team Leader about the study and she said that they knew the group 5 was too high a dose and they knew there would be problems, but they went ahead anyway.

**ANIMALS DOSED FIRST DAY:** Study starts. It’s always such a busy day when a study starts. Usually two people go in early to clean them out. There is a pre-dose bleed. On a bleed there is a licence holder and a trainee doing a bleed. The blood tubes are all labeled up a couple of days before. Each dog has its own tube and it has on there what time point it is. There were always two minute intervals between between dogs so the holder would have to go into the unit, get the required dog, which was done as were all controls, all group 2’s, group 3’s and group 4’s. You had exactly two minutes, so once a dog had the needle put in its neck (bleed from jugular vein) you had exactly two minutes for that blood to be taken and then to take that dog back,

The team leader called the vets as the dogs were underactive. The vet came in the afternoon and suggested the dogs be given tablets in their water to help them as they were dehydrating. They weren’t eating either. The vet suggested something else to help them, I don’t know what. We were never told anything like that.

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dogs because when I carried them to and from procedures I would hold them tight to me and cuddle and kiss them. So there was a pre-dose bleed, then at around 9am the dogs would be dosed at two minute intervals. The study directors would come over and they are supposed to check everything was done correctly but they would stand in the way and chat generally between themselves and not take any notice of the study starting. The next bleed would be 15 mins. after dose, 2 hours after dose, 8 hours after dose, 12 hours after dose and 24 hours after dose. When the 15 min, 30 min and 1 hour bleeds were being done, there would be at least two teams bleeding, which would be a licence holder and a carrier.

The dogs were in and out of their pens constantly and they would get a bit uncooperative and agitated. The necks would be very bruised and swollen and they would still go in and take the blood. One licence holder I worked with would go in and out about five times with the same needle, not hitting the vein. The amount the same needle could be used was two. I reported this to my team leader but nothing was done.

If we had a naughty dog who wasn’t going to sit still it would take longer than the two minute intervals and we’d constantly be running backwards and forwards with the dogs, some of which weigh 12-13kg plus, to make up the time. The time was never changed if it took longer, so again people were falsifying data. We would be expected to do overtime for the 8 and 12 hour bleeds and it wasn’t liked if we said no. On busy days like the start of a new study, the animals didn’t get any exercise time 12 hour bleed. They always looked so sad on these days.

**URINE CAGES:** Depending on the study, at different times throughout the study the dogs would be put into urine cages. These were very small cages, with hardly enough room for them to turn round. They were on a tray with holes in it so the urine went down the tiny holes, into a hole in the middle of the cage and down into a pot. The dogs were put into the cages at 4pm in the afternoon and taken out of the cages at about 8.40am the next morning.

As the cages were so small, when the dogs had feces they were treading and lying down in it as they had no choice and couldn’t get away from it. Quite a few times dogs got their claws stuck in the holes of the bottom and in the morning their claw would have been pulled out and they had raw toes and couldn’t walk on that foot for days. In the morning the pots were all checked for urine. If they had been they were carried back to their pen. If they hadn’t been they had to be catheterised, which was upsetting for the dog. They had been in the cage all night and all the dogs around them had gone back and they’d be barking and pacing. When the dogs were taken out of the cages they would be very smelly and covered in their own feces, not at all pleasant. When they were in the cages from 4pm to 8.40am they had no water.

**HOLD FOR DOSING:** As a Trainee Animal Technician I held for all types of procedures, some very invasive and some a little less so. I always felt barbaric after holding dogs against their will. I would hold anything from 20 to 64 dogs. It was exhausting for both me and the dogs. Sometimes while carrying dogs back after dosing I would pass the pens of dogs that had already been dosed and see vomit, body tremors, or a lifeless dog curled up in the corner of its pen. This always broke my heart because normally they would be jumping up and barking with excitement when I entered the room.

**DIFFERENT TYPES OF DOSING:** The different ways a dose is put into an animal are capsule, sub-cut, oral gavage, infusion, dermal, eye-drops. Capsule was as it says, a capsule which was quite big. It was given to the dog in its single pen, by a licence holder, put to the side of the mouth at the back and pushed down with the thumb. I have found the capsule in the dog’s food bowl. I told a licence holder, who threw it in the bin. I told the team leader after I had got the capsule out of the bin that the capsule wasn’t damaged by saliva and could have been given to the dog again. There should have at least been a comment made in the day.
book that the dog hadn’t been dosed that day but nothing. The team leader was going to speak to the licence holder about it, but it wasn’t done and no comment was ever made in the day book because I checked.

Another capsule study gave the Group 4 dogs red raw eyes. All the fur around the eyes went and they were so sore. The vets were called and they were given eye drops called visco-tears because the eyes weren’t making any fluid and they were dry. These drops had to be put in the eyes twice daily. They didn’t make the soreness any better. The eyes had thick yellow slime which would crust up and it wasn’t until quite a few team members told the team leader how crusty the eyes were that they started to be bathed in the morning before the drops were put in. The third eyelids were nearly always visible.

**SUB-CUT:** Means subcutaneous. This was an injection done under the skin on the scruff. The scruff had to be shaved weekly and marked into a rectangle divided into two with a permanent marker pen. The injection was done in one side one day, the other side the next day. After the fluid had been injected there would be a lump on their neck. The particular study I had was a painkiller from puffa-fish. As soon as you took the first dog out to be dosed, the group 4 dogs would start salivating very heavily, shaking their heads, and by the time they were dosed their pens would be soaked with saliva and very often they would vomit before dose because they knew what was coming.

After dose, most groups 3 & 4 would vomit and be underactive for up to an hour. The Group 2 dose was actually injected into a colleague by a licence holder, not the whole dose but part of it. This was just washed by a first aider. I had some of the dose squirted into my eye by a licence holder because the dog moved.

**ORAL GAVAGE:** This is done by a plastic tube inserted down the throat and into the stomach. The dose was put down the tube via a funnel and then flushed through with water to make sure all the dose was flushed into the dog. The dogs hated this procedure and often regurgitated the tube. When the tube was taken out the dogs regularly brought up the dose because they would be sick.

**INFUSION:** This was done by a cannula inserted into a vein in the leg. Each day a different foot was used so it would be 4 days before that leg was used again. The fluid was pushed through at a slow rate through a machine.

The cannula would have to be taped to the leg and it took a couple of people to hold the dog’s leg whilst it went in and one person had to stand with 2 dogs whilst they were being dosed to stop the dogs pulling them out.

**DERMAL:** This was a powder or liquid put onto a shaved part of the dog, usually the back so they couldn’t bite or scratch it. It sometimes made the skin raw or red.

**EYE-DROPS MEDICINE:** Entering the eye by drops. Given to each dog in its pen. The dogs’ eyes in Group 4 became almost shut, red raw, hair loss, third eyelids visible. The dogs would rub their faces continuously on the floor or pen bars as they were itching, which made their side effects much worse. The eyes became so swollen.

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beside you on a chair for a procedure. They would struggle and not sit down. As soon as anything went near the dog they would cry and want to get down. Sometimes as many as three people would have to hold one dog, which made the dog more upset. A licence holder would grab the dog by its scruff, sometimes lifting the dog up off the chair, have the dog hanging and really shout at it to behave. Sometimes they would hold the scruff, whilst the dog was sitting on the chair, and push its head and neck down whilst shouting at it.

• During a sub-cut study, the dose would come over from the pharmacy daily. The dose came in brown jars with a label on it for the control, group 2 etc. The amount of liquid was weighed out at pharmacy for how much was needed, plus a little extra. The dose bottles were weighed again when they reached us and the weight recorded. When the dosing was over, each bottle was weighed again. On a number of occasions the final weight was way under what it should be, meaning that some of the dogs had been given too much dose. This was recorded in the weight sheet and it must have been covered up one way or another because it was never recorded in the day book and the NACWO was never informed. This certainly would have had an effect on the end result data of the study. Once I overheard that the weights weren’t right and kept a look out in the day books. I asked the licence holder what would happen. They said they didn’t know.

• Needles were repeatedly put into dogs’ necks, often more than 5 times before a new needle was used. The dogs get terrible bruising and lumps on their necks but they still continued to have blood taken from the same areas. There is often a short supply of products like needles, gloves, masks, disinfectants and detergent. When you go to a store room and there is none there you have to search the whole dog building to see if another team can spare some. Disinfectant to clean the floors was in very short supply and we often had to water it down so we could make it last longer. Sometimes there wasn’t a team in the whole building that had any. Supplies came in once a week and were ordered by a former team leader who was always telling us just how much each item cost and that we should use things much more sparingly than we did.

• Some dogs that had been there for nearly a year had been on three studies. On one of the studies they all had their thyroid glands taken out by surgery. Then they constantly had to have thyroid tablets. In the end, after being there for so long, they got so bored that they started fighting regularly. One weekend, a worker wasn’t in the unit exercising them, she was outside the unit keeping an eye on them and they started having a really nasty fight. Instead of shouting for help, she just stood there and watched the dogs fight. She then said ‘they’re having a fight’ and we rushed in and tried to separate them. About 6 or 7 dogs were attacking one dog. They had hold of it by its ear, legs, tail and hind leg. The dog was yelping and screaming. The weekend worker just stood and watched while it took us a long time to get the dogs off. The injured dog was bleeding badly, its ear was almost in two. The injured dog was taken into the annexe. The vet and NACWO were called. They decided because the dogs were going to be killed next week anyway, they would just euthanise him there and then. A similar fight took place the next day. Again the dog was terminated.

I worked in one team where the dosers would race each other to see who could get all the dosing done the quickest, as this was usually done before morning break and the quicker it was done the quicker we could go to break. I’m sure that this is what resulted in the dogs always being given the wrong amount of dosage.

• There was a study that made dogs grow warts. These were put into two units. That end of the annexe was cordoned off, a false wall was put up, dividing the rest of the unit from the end 3, so there was a spare unit for powerhosing. Everything that was put this end was cleaned with Virkon. Every pen, bin, bowls, toys etc was Virkonede. These dogs had procedures done by a “gun” like instrument which they shot onto six sites on the stomach. These dogs had to be sedated because it was a painful experience. They had four lots of treatment over approx. 6-7 weeks, then the warts started to grow in the dogs’ mouths. Some of the warts were enormous. They were measured each week on health check.

She just stood there and watched the dogs fight. About 6 or 7 dogs were attacking one dog. The dog was yelping and screaming.
One of the little female dogs had these warts all up her nose and legs... I was told: “Oh she’s being put down in a few weeks - it doesn’t matter...” When the study came to the end, the dogs were put down in the annexe, not taken to the normal place to be put to sleep. This was questioned and the answer given to me was “I’m not answering your questions.” I also asked how many dogs were being put in each yellow bin bag, and given the same answer. The dogs were put in yellow bags and wheeled down to necropsy in a large yellow skip-type smallish bin we used to take rubbish out in or go and get small amounts of saw dust and food in. I know for a fact that this wasn’t washed first. The units were cleaned out and then all three units were power hosed. The dividing wall was taken down. Then the units were used to put dogs in overnight whilst their unit was powerhosed. The two units of dogs that were put into these units developed warts. Not all the dogs got warts but a good 60% of them did.

One female dog in particular had warts in her mouth, and on her face, legs and paws. They were big warts. The dog was then given a nasty nickname because of her warts, and a male worker used to call her ‘dirty bitch’, ‘slag’ etc. It was then discovered that the warts had come from the “wart study” because:

a) the units hadn’t been powerhosed properly,
b) they should have been Virkon ned again to kill any remaining germs. The unit wasn’t Virkon ned again and then another study was put in there for a 13 week study.

DEATH: When a study came to the end everyone seemed happy that it was ending and that there wouldn’t be as much work to do.

The dogs were written up and cleaned out as usual. The first dog would usually go around 9-9.30am. They were weighed so they knew how much anaesthetic to use.

If you’d been the one looking after the dogs, they wanted you to take them down. You could say no but it was better for the dog to know the person taking them down because they would be more likely to behave. There was a kill sheet so you knew which order to take the dogs down in. Usually there were two groups of “post-mortem” people, so you’d take one dog, then the next and then there’d be a gap until the next two.

Every study that I took the dogs down on had to have bone marrow taken. When the dog was put to sleep, you’d be sitting on a long work top. The dog would have its front feet on me and back legs and bottom on the side. The front leg would be shaved. We were shown how to bring the vein up for the needle to be put in. When bone marrow was to be taken, the dog wasn’t to be dead when it was taken but nearly there. The dog was laid on its back and the bone marrow taken from the chest bone. This wasn’t pleasant to sit through. Two team leaders who I’d done this procedure with hadn’t given the dog enough anaesthetic and it whimpered and moved. This was so upsetting for me. They didn’t give more anaesthetic but carried on. We had to hold the needle in place so they could inject the rest when the bone marrow was done. This didn’t happen with many dogs but it shouldn’t have happened at all.

One particular team leader whom I carried for didn’t clean up the blood between dogs and when the next one was taken in they could smell the blood and anaesthetic and it would panic them. I was always told not to cry, they were doing their job, the dogs bred for a purpose and now they’d done their part and they had to go.

On a night out someone from necropsy was boasting about cutting the head open and sawing through the bone to get to the brain and how the smell of blood made them hungry. They admitted that not only one dog was put in a bin bag, odd parts here and there ended up with another dog. Vans came to collect the dogs at night and took them to be burned. It always made me really sad knowing these dogs were to be incinerated not even as a whole animal...

Incompetence
This is now the sixth time Huntingdon Life Sciences have been exposed. How many more animals need to be abused inside HLS? How many more times do we have to prove that they are breaking the law before the British Government acts and their customers distance themselves from Huntingdon?

Huntingdon, their customers and the British Government have repeatedly said that the beagle beating scenes secretly shot inside Huntingdon by Channel 4 in 1997 were isolated incidents. We always knew that they weren’t but didn’t have the proof. We can now prove that these statements are a lie and that law breaking, falsifying of data and extreme animal cruelty are endemic inside Huntingdon.

From 1989 to 2006 we can show that animal cruelty, sloppy procedures and law breaking go hand in hand at HLS and the only thing that can happen is that they close for good... Lastly we would like to say a big thank you to the two ex-workers who had the courage to speak out and expose just what is going on inside Huntingdon Life Sciences today.

CONCLUSION
- Blood in wrong dog’s tube
- Dogs sworn at for no reason
- Bleeds missed
- Dogs shaken and slapped
- Urines missed
- Dogs poked and prodded with brooms etc for fighting
- Needles not changed after three attempts
- Dogs not adequately anaesthetised before bone marrow removal
- Needles not put in sharps bins
- Dogs not health checked thoroughly
- Not given correct vet treatment
- Restraining of animals using scruff
- Wrongful administration of drug
- Some dogs’ treatments missed all day
- Dogs left to suffer with dry/wet abrasions impetigo which was passed on to staff’s children (fact)
- Senior Technician goes to pub every lunch time and has three pints of Stella, then drives himself and three other workers back
- Same Senior Tech always on drugs, and always late for work. Many people caught this person asleep whilst exercising dogs.
- Dogs pulled along by choker leads
- Inhalation masks done up so tightly that dogs’ skin on head was wrinkled
- Number of vets cut from 6 to 3

HELP ANIMALS INSIDE HUNTINGDON LIFE SCIENCES
CONTACT: Stop Huntingdon Animal Cruelty (SHAC-UK)
6 Boat Lane, Evesham, Worcs, WR11 4BP
ph: 0845 458 0630 • email: info@shac.net • web: http://www.shac.net

Visit the ANIMAL EXPERIMENTATION section of Kinship Circle’s Letter Library for many sample letters to HLS customers, suppliers, financiers: