



PEOPLE FOR
THE ETHICAL
TREATMENT
OF ANIMALS

January 15, 2026

Massachusetts Division of Occupational Licensure
Board of Registration in Veterinary Medicine
One Federal Street
Suite 600
Boston, MA 02110-2012

Via e-mail: vetmedboard@mass.gov

Dear Members of the Board:

I hope this correspondence finds you well. I'm writing on behalf of People for the Ethical Treatment of Animals—PETA entities have more than 10.4 million members and supporters worldwide, including more than 134,000 in Massachusetts—to respectfully request that your office investigate the mistreatment of animals and the conduct of veterinarians at the University of Massachusetts Chan Medical School (UMass Chan) in Worcester, Massachusetts.

PETA has recently received disturbing reports from inside sources at UMass Chan alleging incompetence, falsification of documents, and neglect of dogs and other animals in the school's laboratories. The inside sources provided PETA with photographic and videographic evidence of the allegations.¹ The allegations indicate that UMass Chan veterinarians Dr. George J. DeMarco (License #7564) and Dr. Joan Cadillac (License #9083) failed to comply with fundamental provisions of Massachusetts' Research Animal Regulations (105 CMR 910; hereafter, the RARs) and Code of Professional Conduct for veterinarians (256 CMR 7).

U.S. Department of Agriculture (USDA) inspection reports corroborate information supplied by inside sources indicating that both Dr. DeMarco and Dr. Cadillac failed to uphold the Code of Professional Conduct, specifically 256 CMR 7.01(4)(a)–(d), which states:

(4) A licensee shall not:

- (a) In any way aid or abet the illegal practice of veterinary medicine;
- (b) Engage in any conduct which reflects unfavorably on the profession of veterinary medicine;
- (c) Engage in fraud, deceit or misrepresentation in the practice of veterinary medicine or in the procurement of a license to practice veterinary medicine;

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¹Photos and a video are available [here](#).

(d) Engage in verbal abuse or harassment of a client or employee or physically abuse or threaten a client or an employee.

Dr. DeMarco, the attending veterinarian and Director of Animal Medicine at UMass Chan, is responsible for overseeing all animal care in the school's laboratories as well as reviewing and approving all operating procedures across the animal use program. He also serves on UMass Chan's Institutional Animal Care and Use Committee (IACUC), a federally mandated oversight body responsible for reviewing and approving animal research protocols, ensuring compliance with applicable animal welfare laws and policies, evaluating animal care and use practices, minimizing animal pain and distress, and addressing concerns related to the humane treatment of animals used in research. The IACUC is the last line of defense for animals in laboratories. Based on recent information obtained by PETA from various sources, including UMass Chan insiders, IACUC inspection records, and USDA inspection reports, it is evident that Dr. DeMarco has continually failed to properly adhere to federal and state laws in the course of his duties at UMass Chan.

According to PETA sources, Dr. DeMarco is facilitating a systemic and pervasive pattern of animal cruelty and negligence, all the while violating his veterinary oath and state and federal laws, including the Animal Welfare Act (AWA), Massachusetts public health regulations and veterinary standards, and the Code of Professional Conduct.

As outlined in this letter, Dr. DeMarco failed to properly review proposed experimentation protocols submitted to the IACUC for review and to hold principal investigators (PIs) at UMass Chan accountable. Instead of ensuring adherence to the protocol as required by law, Dr. DeMarco aided and abetted PIs in the unlawful falsification of veterinary documents by conspiring with them to rewrite IACUC protocols to cover up mistakes after the fact. The falsification of IACUC documents is in violation of 256 CMR 7.01(4)(a)–(c) as well as federal criminal statutes as noted below. Under Dr. DeMarco's supervision as the Director of Animal Medicine, the university's laboratories repeatedly failed to meet requirements for adequate feeding, effective veterinary care, humane housing, and prompt alleviation of pain and distress. Due to improper housing and husbandry conditions, animals endured prolonged suffering from untreated injuries, inadequate analgesia, and severe stress. Collectively, these allegations reveal systemic noncompliance and a disregard for the state's animal welfare standards governing the use of animals in experimentation.

Although the RARs primarily address the care of dogs and cats, their stated purpose—"to ensure the humane treatment of dogs and cats specifically and of other animals in general"—extends to all animals (105 CMR 910.001). This complaint, therefore, includes allegations concerning both dogs and other species. All incidents described in this complaint occurred in 2025, except where otherwise specified.

From March 2024 to August 14, 2025, in addition to Dr. DeMarco, UMass Chan employed only one other veterinarian—Dr. Joan Cadillac—to care for all the animals in the school's laboratories. According to the university's USDA annual report for fiscal year 2024, this population consisted of 1,485 hamsters, 112 guinea pigs, 70 pigs, 60 sheep, 50 rabbits, 12

domestic ferrets, two dogs, and one nonhuman primate.² According to its current Animal Welfare Assurance filed with the National Institutes of Health, the facility also maintains an approximate average daily inventory of 23,521 mice, 932 zebrafish, and 214 rats.³ A third veterinarian, Dr. Sidney Beecy, was added only recently, on August 15, 2025.

May 2025 – Under the supervision of Dr. DeMarco and Dr. Cadillac, dogs used in stroke experiments were subjected to neglect, inadequate veterinary care, deliberate food restriction, and unsafe housing

The laboratory at UMass Chan headed by PI Matthew Gounis uses dogs, rabbits, and pigs in stroke experiments.⁴ Dogs undergo multiple invasive surgeries to create and study aneurysms—dangerous bulges in blood vessels that can rupture. In the first operation to which the dogs are subjected, experimenters cut into the neck, reroute the carotid artery, which normally carries blood to the brain, and stitch it to the artery on the opposite side. They also remove a piece of vein from the neck to connect the two arteries, deliberately creating an abnormal pouch-like junction designed to mimic an aneurysm. After a three-week recovery period, experimenters cut an incision into the thigh and thread instruments through the femoral artery, inserting a flow remodeling device into the damaged vessel for testing. In the following weeks, they subject the dogs to repeated follow-up surgeries, with catheters and imaging equipment passed through their blood vessels. These experiments injure the animals' tissue and arteries and subject them to pain and a prolonged cycle of surgical interventions.

An insider reported that several hounds used in the Gounis laboratory—born in January 2025 at Oak Hill Genetics and shipped to UMass Chan in May 2025, at just 4 months of age—were subjected to treatment that violated the RARs while under the supervision of Dr. DeMarco and Dr. Cadillac.

1. Inadequate Feeding Practices: At UMass Chan, the existing dog kennels are of a dimension that can accommodate only dogs weighing no more than 19 kilograms, as required under the AWA and mirrored in § 910.103(C)(2) of the RARs. Instead of constructing larger enclosures to accommodate growing hounds purchased in May 2025, the laboratory managed the dogs' size by restricting their food intake, leaving them consistently underweight and chronically hungry. Photos show that their ribs and hip bones are visible, and some have developed food aggression severe enough to require solitary housing. Veterinary and animal care technicians repeatedly reported to DeMarco that the dogs were malnourished and emaciated. DeMarco allegedly responded to any employee requesting to increase food for the dogs that “the dogs are supposed to look like greyhounds (emaciated with ribs showing).” Inside sources reported to PETA that after Dr. Beecy was hired, she began weighing the dogs and increasing their food. Following this increase, DeMarco and Cadillac complained to Beecy, indicating that the

²University of Massachusetts Medical School. Annual report of research facility. November 12, 2024. <https://www.peta.org/wp-content/uploads/2025/12/umass-med-school-annual-report-fy2024-1.pdf>

³Terence RF. University of Massachusetts Chan Medical School Animal Welfare Assurance: Assurance # D16-00196 (A3306-01). December 18, 2024. <https://www.peta.org/wp-content/uploads/2025/12/UMass-Amherst-Animal-Welfare-Assurance.pdf>

⁴Matthew Gounis' protocol (“Image-Guided Vascular Remodeling for the Treatment of Brain Aneurysms” [A-1909]) proposed using 260 rabbits, 40 dogs, and 10 pigs.

dogs should not be fed too much, as their increased weight would pose an issue with noncompliant housing.

- a. Section 910.130 of the RARs mandates that institutions provide food to dogs “of sufficient quantity and nutritive value to meet the normal daily requirements for the condition and size” of the animal. Dr. DeMarco deliberately restricted the food provided to dogs used in the Gounis laboratory to prevent them from exceeding the weight threshold that would have required larger enclosures under the RARs. Instead of complying with the law by acquiring appropriately sized kennels, DeMarco and Gounis chose to underfeed the dogs to keep their weight artificially low. The accompanying photographs of the dogs document the malnourishment, particularly extreme in dog F484, whose account is presented below.
2. Dog F484: A young brown-and-white hound, identified as F484, was subjected to a series of invasive experiments. Within two weeks of her arrival at UMass Chan, she underwent survival surgery in which experimenters cut into her femoral artery to implant a flow remodeling device, leaving her with bruising and swelling. In the weeks that followed, she was sedated repeatedly for MRIs that also required “cutdowns” (cutting into the flesh to again expose the femoral artery and inserting the imaging instrument in the vessel) while simultaneously being dosed with blood-thinning drugs such as aspirin and clopidogrel. Despite being described as friendly and playful, she also bore injuries from fighting with cage mates, and she suffered bruising, abrasions, and seromas at surgical sites.

Over the summer, F484 steadily lost weight, dropping from more than 14 kilograms to as little as 12.5 kilograms, prompting staff to remark repeatedly in emails, on which DeMarco was copied, that she looked “pretty skinny.”⁵ Her body condition score eventually fell to 1.5 out of 5, signaling emaciation. She developed diarrhea and was treated with metronidazole, received acupuncture sessions, and required repeated feeding adjustments, yet her health remained precarious. The laboratory records document a young dog’s enduring invasive surgeries, chronic weight loss, cage injuries, and gastrointestinal illness in the course of a few months—her life reduced to a series of procedures, complications, and patchwork attempts at management in the laboratory, all at the direction of Dr. Cadillac and under the supervision of Dr. DeMarco.

F484 weighed 14 kilograms but was restricted to just two cups of kibble per day, with staff barred by Dr. DeMarco from offering additional food or treats. At just 8 months of age and weighing 14 kilograms, this puppy should have received around two and a half to three cups of food each day, but Dr. DeMarco restricted her to only two cups, leaving her chronically underfed and hungry.

- a. As noted previously, § 910.130 of the RARs mandates that institutions provide food to dogs “of sufficient quantity and nutritive value to meet the normal daily requirements for the condition and size” of the animal. However, Dr. DeMarco’s

⁵Please see Photograph F484.

failure to provide adequate food to F484 constitutes noncompliance with § 910.130 of the RARs and the veterinary Code of Professional Conduct.

- b. Section 910.133 of the RARs states that dogs “housed in the same primary enclosure shall be maintained in compatible groups.” However, Dr. DeMarco, as Director of Animal Medicine, failed to provide safe and compatible housing for F484, resulting in her suffering injuries from fighting with cage mates.
 - c. Section 910.134 of the RARs mandates that each institution establish a program of “adequate veterinary care.” However, Dr. Cadillac failed to properly review the dog’s administered medications and performed acupuncture on F484 even though she was concurrently receiving clopidogrel, a blood-thinning medication. Acupuncture is contraindicated for dogs receiving clopidogrel because of the elevated risk of bleeding and hematoma formation.⁶ Clopidogrel significantly inhibits platelet aggregation; even minor invasive procedures, such as acupuncture, may increase the risk of hemorrhage or hematoma. It is important to note that 256 CMR 5.05 (Complementary and Alternative Veterinary Medicine) requires prior diagnosis of the animal’s condition and that the veterinarian maintain continuing education and professional competence, which can include acupuncture training.
3. Dog F474: A black, white, and tan hound, identified as F474 and described as shy but friendly and active, was subjected to invasive procedures soon after she arrived at UMass Chan. On June 4, 2025, experimenters cut into her femoral artery to implant a flow remodeling device, and just a week later, on June 11, they performed a cutdown for invasive imaging. During this procedure, a catheter was mistakenly left behind, and staff suspected that F474 may have swallowed it. The catheter was later passed through the dog’s digestive tract and was recovered in her feces. By mid-June, F474 had also been attacked by her stressed cage mates, sustaining bite wounds that required stapling.

In the weeks that followed, F474 endured repeated sedations, surgical aftereffects, and a cascade of complications, including bruising, swelling, fluid-filled seromas, abrasions, and oozing wounds at surgical sites on her thigh. She developed persistent and painful problems with her right front paw, including swelling, abrasions, inflammation, bleeding nail beds, and open wounds that required repeated interventions and acupuncture. Her body condition deteriorated, with her weight plummeting from 16.3 kilograms in July 2025 to 13.5 kilograms by late August 2025—a 17% drop.

From late July to December 2025, a joint on F474’s right front leg had been swollen.⁷ A small lesion appeared on the same leg due to the dog’s licking the area in response to discomfort. Staff applied ointment to the wound and used bitter apple spray to prevent the dog from licking the area. No X-rays were taken of the leg, so it was never determined whether the swelling was due to a fracture, infection, or another cause, and no diagnosis

⁶Budde JA, McCluskey DM, Plumb DC, eds. *Plumb’s Veterinary Drug Handbook*. 10th edition. Educational Concepts, LLC, dba VetMedux; 2023.

⁷Please see Photographs F474_1 to F474_9. In several photographs, the swelling on F474’s right front leg is conspicuous; in others, her ribs are clearly visible beneath a markedly thin frame.

was made. F474 also did not receive pain medication for the swollen joint. Instead, Dr. Cadillac treated her with acupuncture while simultaneously administering daily doses of clopidogrel, an anticoagulant that is contraindicated for use in animals undergoing acupuncture. By performing acupuncture without proper diagnosis of F474's condition or training to do so, Dr. Cadillac acted in apparent violation of 256 CMR 5.05, all while under the direction and supervision of Dr. DeMarco.

- a. Section 910.134 of the RARs mandates that adequate veterinary care include prevention and that dogs who are "sick or diseased [or] injured ... be provided with veterinary care." The regulation also directs institutions to ensure "the appropriate use of anesthetic, analgesic, or tranquilizing drugs, whenever [an] animal is likely to suffer more than transient pain." However, Dr. DeMarco and his staff failed to take appropriate diagnostic measures to determine the cause of the swelling observed *for months* on F474's leg and failed to provide pain relief to the dog. Dr. DeMarco's decision to approve acupuncture to treat her condition while she was receiving daily doses of clopidogrel increased the risk of prolonged bleeding or hematoma formation at acupuncture sites, which constitutes an additional failure by Dr. DeMarco to comply with veterinary care provisions outlined in the RARs.
 - b. Under the supervision of Dr. DeMarco, there was a failure to recover a catheter following experimental surgery on F474, which led to the dog's ingesting the device and later passing it in her feces. The unmonitored presence of this foreign object in the gastrointestinal tract would likely have caused pain or discomfort as it passed. The incident reflects a failure to employ methods designed to prevent injury, pain, and distress, in violation of § 910.134 of the RARs, under the supervision of Dr. DeMarco.
 - c. Section 910.133 of the RARs states that dogs "housed in the same primary enclosure shall be maintained in compatible groups." However, Dr. DeMarco failed to take action after receiving complaints and suggestions from animal care staff regarding F474's being incompatibly housed. DeMarco failed to provide safe housing with compatible cage mates for F474, resulting in her suffering serious bite wounds—injuries that necessitated surgical stapling.
 - d. Section 910.130 of the RARs mandates that institutions provide food to dogs "of sufficient quantity and nutritive value to meet the normal daily requirements for the condition and size" of the animal. However, F474's 17% weight loss over a two-month period indicates that under Dr. DeMarco's supervision, UMass Chan failed to provide F474 with adequate nutrition, constituting noncompliance with § 910.130.
4. Dog F442: Following a 2025 surgery, a brown-and-white hound, identified as F442, developed a baseball-sized seroma at the incision site on her leg where the femoral artery had been accessed. The swelling was first noticed on September 2, 2025; however, laboratory records show that no treatment was provided beyond observation.⁸ Three weeks later, the seroma had begun to grow and harden, indicating the persistence and progression of the condition without intervention.

⁸Please see Photographs F442_1 and F442_2.

- a. Section 910.134(B) of the RARs mandates that dogs “be observed daily by the animal caretaker in charge [and that] sick or diseased [or] injured ... dogs ... be provided with veterinary care or humanely disposed of.” While it appears that F442 was observed daily, Dr. DeMarco and his staff did not provide timely and appropriate treatment for the seroma despite observing its growth. This failure to provide treatment both undermined the purpose of the daily observations mandated in the RARs and allowed the swelling to progress, causing unnecessary pain and suffering.
5. Dog F480: A white-and-tan hound, identified as F480, underwent surgeries on June 5 and June 12, 2025. Following the second operation, staff noticed small seromas in the inguinal region. On June 15, a laboratory employee reported to Dr. DeMarco and others an incisional dehiscence at the left inguinal site with necrotic margins. On this date, Dr. DeMarco wrote a plan for the next day to sedate F480 and repair what appeared to be necrotic tissue. An Elizabethan collar (e-collar) was placed on the dog. On the following day, June 16, Dr. Cadillac examined F480 but failed to follow the plan written by Dr. DeMarco. Instead, Dr. Cadillac treated what she described as a scabbed wound with topical medication. Two days later, on June 18, employees discovered that the e-collar had come off and observed that the wound was necrotic. It was suspected that F480 had eaten the ties for the collar. The e-collar was reapplied. On June 25, an employee noticed that the e-collar again was no longer on the dog, and the securing fabric tie could not be located, raising concern that the dog had eaten the tie. University records document that Dr. Cadillac suspected the dog had eaten the collar tie in this instance. On June 26, a fabric tie was recovered in the dog’s vomit.⁹ University records show that on June 28, employees discovered more vomit containing what appeared to be an additional 16-inch fabric tie.
 - a. Section 910.134(B)(4) of the RARs states, “It shall be incumbent upon each research institution to ensure that all personnel who carry out animal anesthesia, surgery, or other manipulations are qualified through training and experience to accomplish these tasks in a humane and scientifically acceptable manner.” However, the dehiscence of F480’s surgical incision likely stemmed from poor suturing technique or inadequate post-surgical monitoring and would have caused her pain and distress. Dr. DeMarco and his staff’s failure to prevent this pain and distress constitutes noncompliance with the veterinary care provisions set forth in the RARs. Additionally, the university’s failure to prevent F480 from ingesting the fabric tie indicates further noncompliance.

May 2025 – Under the supervision of Dr. DeMarco and Dr. Cadillac, a rabbit used in a vaccine experiment sustained a severe degloving injury, developed necrotic tissue, and suffered an e-collar-induced open wound on the back of her neck

⁹Please see Photographs F480_1 to F480_4.

The UMass Chan laboratory headed by PI Shuying Liu studies the immune system's response to nucleic acid-based vaccines using rabbits, mice, and rats.¹⁰ In these experiments, animals are repeatedly injected with DNA or RNA vaccines every few weeks, with blood drawn at multiple points along the way. They are kept alive for months to over a year before ultimately being euthanized so their tissues can be collected.

An insider reported that a rabbit used in the Liu laboratory was subjected to treatment that violated the RARs.

1. Rabbit #2202 arrived at UMass Chan on May 20, 2025, and was repeatedly injected with vaccines and subjected to blood draws. Within weeks, she sustained a severe degloving injury to her hind foot, leaving muscles exposed.¹¹ It was unclear whether the injury resulted from fighting or from the foot's becoming caught in the cage. On June 19, Dr. Cadillac attempted to suture the wound but found there wasn't enough skin to close it, and the surgery left muscle exposed. The condition of the toe subsequently worsened, and on June 23, Dr. Cadillac observed that the tip of the toe, the toe pad, and the top of the nail were dark, suggesting that the tissue had become necrotic. On June 24, the rabbit was sedated, the wound was cleaned, and the sutures were removed. The tissue still appeared to be necrotic. Following an inquiry Dr. Cadillac received from Alexandre DuFresne, Research Compliance Specialist at UMass Chan, regarding her treatment plan for the necrotic toe, Dr. Cadillac amputated the second and third phalanx of the toe on June 26, confirming in the surgical record that the tissue was necrotic.¹² At the time of the initial surgery on June 19, an e-collar had been placed on the rabbit to prevent her from biting her wound. The collar was used despite serious welfare concerns associated with their use in rabbits, including that they cause stress, difficulty eating and drinking, and painful chafing that can lead to open sores. Indeed, the rabbit developed a large, infected wound that extended across the nape of her neck.¹³ As evidenced by the photos referenced in Footnote 13, the rabbit's scruff was not properly clipped and cleaned, even though clipping and cleaning the area is standard practice in veterinary medicine for wounds of this kind. University records fail to provide details on the condition of the scruff. In addition, Dr. Cadillac stated to a veterinary services employee that the rabbit's skin was stained and that this staining created only the appearance of a wound. On July 16, Rabbit #2022 was euthanized. Throughout the course of events with Rabbit #2202, Dr. Cadillac and Dr. DeMarco failed to follow the specific protocol requiring that rabbits with unexpected illness or non-study-related injury be removed from the study.
 - a. Dr. Cadillac, working under the supervision of Dr. DeMarco, was unable to determine whether Rabbit #2022's initial degloving injury resulted from fighting or from her foot's becoming caught in the cage. Either circumstance indicates that Dr. DeMarco and Dr. Cadillac failed to provide safe and secure housing, contrary to the intent of the RARs.

¹⁰Shuying Liu's protocol ("Immunogenicity study of nucleic acid-based vaccines" [202200023]) proposed using 165 rabbits, 480 mice, and 64 rats in Column D experiments.

¹¹Please see Photographs Liu_1 and Liu_2.

¹²Please see Photographs Liu_6 and Liu_7.

¹³Please see Photographs Liu_3 to Liu_5.

- b. The failure to close the wound during the June 19 surgery left the rabbit vulnerable to tissue necrosis. The exposed muscle likely contributed to the necrosis observed four days later by allowing infection, impairing blood flow, and preventing proper healing. This would have caused significant pain and distress, contrary to the intent of the RARs.
- c. The application of the e-collar without subsequent proper monitoring led to the development of the large, painful infected area that extended across the nape of the rabbit's neck, contrary to the intent of the RARs.

January 2025 – Under the supervision of Dr. DeMarco and Dr. Cadillac, a ferret used in respiratory experiments died from an untreated intestinal obstruction

The UMass Chan laboratory headed by PI Alicia Gruntman and under the supervision of Dr. DeMarco uses ferrets in respiratory experiments that cause considerable pain and distress.¹⁴ The animals are injected intravenously with a recombinant adeno-associated virus and subjected to repeated blood draws from the jugular vein over a six-month period. Using a bronchoscope, experimenters collect cells from the ferrets' lungs—an invasive procedure repeated as many as 15 times before the animals are ultimately killed. In one arm of the protocol, ferrets are restrained alone in a clear Plexiglas chamber for two hours to measure their breathing. Afterward, they are subjected to respiratory challenges in which they're exposed to elevated carbon dioxide or reduced oxygen levels for several minutes.

An insider reported that a ferret used in the Gruntman laboratory, under the supervision of Dr. DeMarco, was subjected to treatment that violated the RARs.

1. A ferret identified as #700561 was born at Marshall BioResources in September 2024, shipped to UMass Chan on January 14, 2025, and placed in the Gruntman laboratory. On April 22, 2025, she was sedated for a blood draw from her jugular vein. The following morning, she was described in university records as less active and quiet on exam, with signs of dehydration (skin tenting) and possible vomiting in her cage. Despite being offered supportive food, she showed no interest in eating. That same day, an employee noticed that a 4- by 4-inch section of the hammock in the ferret's cage was missing and suggested to Dr. Cadillac that the ferret be X-rayed to observe and then remove any foreign bodies in her stomach. Dr. Cadillac dismissed this idea. Over the next two days, the ferret's condition worsened. On April 24, veterinary staff noted persistent vomiting—including cotton vomitus, a bag of which was handed directly to Dr. Cadillac by a staff member. The presence of cotton in the vomit would seem to suggest ingestion of the bedding material. Following this, Dr. Cadillac directed staff to force-feed the ferret via syringe and administer the anti-vomiting drug maropitant to the ferret, but this further worsened the animal's condition. She exhibited continued dehydration and lack of appetite.

¹⁴Alicia Gruntman's protocol ("Animal Modeling Core for Alpha-1 Antitrypsin Deficiency" [20220011]) proposed using 122 ferrets in Column D experiments.

By April 25, Ferret #700561 appeared depressed. She hadn't passed feces and had abdominal bloating and a dangerously low body temperature of 92 degrees Fahrenheit (a normal body temperature for ferrets is 100 to 104 degrees). Radiographs were finally taken, revealing air and ingesta in the stomach and large intestine, consistent with a gastrointestinal obstruction caused by a foreign body. Euthanasia was approved by Dr. Cadillac after failed attempts to collect blood, but the procedure itself was prolonged and stressful. Staff were forced to administer the drug in three separate doses over a six-minute period because the gauge of the catheter used for intravenous delivery was too small, the Euthasol was not diluted to permit adequate flow of the viscous euthanasia solution, and the catheter was not checked for patency. The animal did not die until eight minutes after the first injection. Necropsy confirmed severe gastrointestinal compromise: a dilated, fluid-filled stomach and a bruised, distended small intestine obstructed by a half-inch piece of bedding.¹⁵

- a. Under the supervision of Dr. DeMarco and Dr. Cadillac, UMass Chan staff failed to perform timely diagnostics to determine the cause of Ferret #700561's inappetence and lethargy, setting off a series of harmful missteps. After the ferret began vomiting, in an effort to clear the obstruction, staff administered an antiemetic (at the direction of Dr. Cadillac) that worsened her suffering. Dr. Cadillac failed to provide critical support in the form of IV fluids. The ferret was given only 35 milliliters of IV fluid, far below the appropriate amount. Dr. Cadillac refused to order radiographs for three days, which delayed confirmation of the intestinal blockage. This failure by Dr. Cadillac, under the supervision of Dr. DeMarco, to act promptly and appropriately contravenes the intent of the RARs and violates the veterinary Code of Professional Conduct.
- b. Dr. Cadillac's use of a catheter too narrow to allow proper administration of the viscous euthanasia solution demonstrates either incompetence or disregard for humane methods. As a result, the ferret's suffering was prolonged—it took eight minutes for the animal to die—in direct violation of the intent of the RARs and the Code of Professional Conduct.

2024-2025 – Under Dr. DeMarco's supervision, pigs and rabbits used in cardiac experiments experienced severe pain, injury, and death

The UMass Chan laboratory headed by PI Kevin Donahue uses pigs and rabbits in cardiac experiments. The pigs, who are only 3 to 6 months old, are housed alone in barren kennels with cement flooring.

They are occasionally provided with a rubberized mat but more often left directly on the hard cement. Pine shavings are used as bedding, yet the fine particles irritate the pigs' eyes and respiratory tracts, causing painful injuries.

In this laboratory, which is under the direct supervision of Dr. DeMarco, experimenters induce a myocardial infarction in pigs by occluding a major artery to the heart for two and a half hours using a balloon inserted through a blood vessel. The experimenters surgically implant a defibrillator device into a vein in the neck and the tip of the heart. This device is used to

¹⁵Please see Photographs Ferret Necropsy 1 and Ferret Necropsy 2.

repeatedly shock the heart and force the pigs into abnormal heart rhythms. This causes severe pain, but the laboratory uses only mild opioids such as buprenorphine to address it. Following a scathing February 27, 2024, USDA inspection report,¹⁶ which documented a critical AWA violation for inadequate veterinary care for pigs used in PI Donahue's Protocol 028, the protocol was amended to instruct laboratory staff to administer the stronger opioid hydromorphone to help address the breakthrough pain experienced by pigs in this laboratory; however, the laboratory still does not stock this opioid.

An insider shared accounts of two other pigs used in PI Donahue's protocol whose treatment, supervised by Dr. DeMarco, contravened the intent of the RARs.

1. A pig identified as #822 underwent an induced myocardial infarction in the Donahue laboratory and subsequently developed atrial fibrillation. On May 22, 2025, Pig #822's rectal temperature was just 92 degrees Fahrenheit—well below the normal range for pigs (101.5 to 103.5 degrees). He also sustained a reperfusion injury to his ear, caused by impaired blood flow to his extremities. Such injuries are intensely painful, as the sudden return of blood to oxygen-deprived tissues triggers inflammation, swelling, and nerve irritation. Other pigs in the laboratory have suffered similar injuries to their ears, nose, tails, feet, and vulva, with oxygen deprivation causing tissue necrosis and blue-black discoloration. All instances are clearly documented in laboratory records.
2. A pig identified as #845 underwent an induced myocardial infarction on July 11, 2025. By July 22, as documented in laboratory records, he exhibited bruising and cyanosis of the distal right ear that was sensitive to the touch. On July 23, the area measured approximately 2 by 5 centimeters and had turned a red-black color. Dr. DeMarco assessed the lesion as consistent with vascular thrombosis likely related to prior ear catheterization. He expressed concern about possible necrosis. On July 29, Pig #845 was sedated and the devitalized tissue was debrided. By July 31, the wound measured approximately 1 inch on the inner pinna, 1.75 inches on the outer pinna, and 2 inches in length, with little or no perfusion along the pinna margin.

On August 4, the entire ear wound was black and necrotic, and the pig avoided handling of the ear and shook his head when touched, indicating significant pain.¹⁷

- a. Dr. DeMarco approved housing the pigs on pine shavings despite the well-known risk of eye and throat irritation from fine particles produced by this bedding. Staff repeatedly suggested a large-particle alternative bedding called “flake” to Dr. DeMarco, but he ignored their suggestions. By ignoring safer alternatives and subjecting the pigs to preventable harm, Dr. DeMarco and the university demonstrated a reckless disregard for the welfare of the pigs—conduct that contravenes the intent of the RARs and violates the veterinary Code of Professional Conduct.

¹⁶Gladue P. Inspection report (INS-0000932741). February 27, 2024. <https://www.peta.org/wp-content/uploads/2025/12/2024-02-27-umass-med-school-ir-pig-protocol.pdf>

¹⁷Please see Photographs 845_1 to 845_12.

- b. Dr. DeMarco's failure to stock hydromorphone despite its inclusion in PI Donahue's protocol—which DeMarco and UMass Chan's IACUC reviewed and approved—reflects a failure to maintain the necessary supplies to provide adequate pain relief, in contravention of the intent of the RARs and in violation of the Code of Professional Conduct.
- c. Despite the well-recognized susceptibility of the pinnae and other extremities to reperfusion injury following myocardial infarction and atrial fibrillation, Dr. DeMarco failed to employ simple measures to prevent such injuries. For example, the provision of supplemental oxygen could have helped maintain stable hemodynamics, while temperature control and heat supplementation using a Bair Hugger could have helped prevent hypothermia. Avoidance or careful management of ear catheterization—including limiting dwell time or using the smallest feasible catheter—could have prevented the painful injuries sustained by Pigs #822 and #845. Dr. DeMarco's failure to suggest and/or apply these simple measures to limit pain and discomfort to pigs in the Donahue laboratory contravened the intent of the RARs and violated the Code of Professional Conduct.
- d. Section 910.200 of the RARs recognizes the responsibility of the "animal care committee" (i.e., IACUC) to provide institutional oversight for projects involving the experimental use of animals. Section 910.200(A)(4) states that "[t]he experiment must be conducted so as to avoid all unnecessary suffering and injury to the animal." However, UMass Chan's IACUC, on which Dr. DeMarco serves in the role of attending veterinarian, failed to ensure that PI Donahue's protocol incorporated concrete measures to prevent ischemia-reperfusion injuries in pigs. By approving a protocol without such safeguards, the IACUC failed to ensure that procedures conducted in the Donahue laboratory would minimize discomfort, distress, and pain to animals, thereby contravening the intent of the RARs and violating the Code of Professional Conduct.

In the Donahue laboratory, under Dr. DeMarco's supervision, experimenters subjected rabbits to median sternotomies in which a vertical incision was made along the length of the breastbone, allowing access to the heart, and the pericardium was opened. The rabbits were denied adequate pain relief and became severely stressed, stopped eating, and developed gastrointestinal stasis—a painful condition in which gas, fluid, and food accumulate in the digestive tract, causing bloating and agony that can quickly prove fatal. Additionally, rabbits in the Donahue laboratory were housed in a room adjacent to one housing dogs. Exposure to frequent barking elicited repeated thumping—a well-recognized sign of fear and distress in rabbits.¹⁸

1. Rabbit #1984 showed obvious signs of pain—squinting eyes, hunched posture, depression, and gastrointestinal stasis—yet received only limited interventions and lingered in distress for weeks before being killed on April 15, 2022.
2. Rabbit #1985, who underwent surgery on April 13, 2022, appeared scruffy and inactive and barely ate, but her suffering went similarly unresolved before she was killed on May 6.

¹⁸Please see the video file (Rabbits stressed upon hearing dogs in adjacent room).

3. Rabbit #1986, housed alone, underwent a median sternotomy on April 13, 2022, and rapidly declined. She became scruffy, stopped eating, produced almost no waste, and developed hypothermia—clear red flags indicating that she was in severe postoperative distress. Despite these obvious warning signs, her suffering went unresolved, and she was found dead on April 16. Necropsy revealed fluid buildup in the chest, adhesions around the lungs and heart, and a congested liver, underscoring the grave consequences of inadequate postoperative care.
 - a. Section 910.200 of the RARs recognizes the responsibility of the IACUC to provide institutional oversight for projects involving the experimental use of dogs and cats. In particular, § 910.200(A)(4) states that “[t]he experiment must be conducted so as to avoid all unnecessary suffering and injury to the animal” and § 910.200(A)(5) states that “[t]he scientist in charge of the experiment must terminate it whenever he/she believes that its continuation may result in unnecessary injury or suffering to the animals.” However, rabbits used in PI Donahue’s protocol endured extensive suffering before they were killed, and Rabbit #1986 suffered egregiously before she was discovered dead in her cage. Although the Donahue protocol specifies criteria for removing rabbits from the study and euthanizing them, the humane endpoint criteria were either inadequately defined or improperly applied, failing to prevent severe pain and distress, in contravention of the intent of the RARs. As the attending veterinarian on the IACUC, Dr. DeMarco was responsible for reviewing and approving all protocols submitted to the committee. As Director of Animal Medicine, he was responsible for ensuring that operating procedures were followed to minimize the rabbits’ suffering. Dr. De Marco failed in both roles.

Many of the complaints received by PETA from credible sources at UMass Chan were related to procedures conducted in the Donahue laboratory. After observing failures in the administration of pain management and animal care in the Donahue laboratory, employees continually reported these failures and violations to Dr. DeMarco. Insiders reported that Dr. DeMarco failed to take any action if surgeries conducted in the Donahue laboratory deviated from the IACUC-approved protocols. To conceal these failures and prevent complaints, Dr. DeMarco and Donahue regularly conspired to rewrite the previously approved protocols. This was done *after* the surgical procedures were completed, creating false statements and violating federal law, specifically 18 USC 1001(a)(3), which prohibits individuals from “knowingly and willfully ... mak[ing] or us[ing] any false writing or document knowing the same to contain any materially false, fictitious, or fraudulent statement or entry.” In addition, this behavior violates Massachusetts’ Code of Professional Conduct for veterinarians.

Dr. DeMarco committed additional violations of federal law when he aided and abetted PI Donahue by repeatedly falsifying IACUC protocols after the fact to cover up egregious violations of basic animal care and use standards by Donahue.¹⁹

¹⁹18 USC 2. <https://uscode.house.gov/view.xhtml?req=granuleid:USC-prelim-title18-section2&num=0&edition=prelim>

The federal AWA does not insulate Dr. George DeMarco, Dr. Joan Cadillac, or UMass Chan from liability under state law because it expressly does not preempt the field. Moreover, the enforcement of state law for the protection of animals is crucial given that the AWA provides only minimal protections—and even those have been routinely found by the USDA's own internal watchdog to be inadequately enforced. Additionally, the conduct of Dr. George DeMarco, UMass Chan's Director of Animal Medicine, appears to fall squarely within the scope of that prohibited by Massachusetts law. We respectfully urge your department to conduct a thorough investigation into the concerns detailed in this complaint and, if they are substantiated, take swift and decisive enforcement action, including citing the veterinarians for violations of the RARs and the Code of Professional Conduct for veterinarians. I would be pleased to provide any additional information or assistance that may aid your office in its review and investigation of these concerns.

Thank you for your consideration of this important matter.

Sincerely,

Dorothy Manera
Senior Technical Advisor
Laboratory Investigations Department
PETA