

Committee on Resources

Subcommittee on Fisheries Conservation, Wildlife and Oceans

Statement

Testimony by Dr. Charles Manire, Chief, Marine Mammal Rehabilitation Program, Mote Marine Laboratory, Sarasota, FL

Thank you for this opportunity to testify in support of H.R. 1934, the Marine Mammal Rescue Assistance Act of 1999. I am here in my capacity as Chief of Mote Marine Laboratory's Marine Mammal hospital facility and as a participant in the Southeastern U.S. Marine Mammal Stranding Network.

Established in 1955, Mote Marine Laboratory is an independent, nonprofit institution dedicated to excellence in marine and environmental science research and education. It is one of the few remaining independent marine research and education facilities in the country. As a natural outgrowth to the coastal research conducted at the laboratory, Mote first became involved in marine mammal stranding events in the late 1960's. In 1992, Mote was designated as part of the U.S. Stranding Network, allowing stranded marine mammals to be brought to Mote from throughout Florida and the Southeastern United States. In 1994, a modern Marine Mammal Hospital facility, built with private funds, replaced a variety of makeshift tanks and pools to better meet the needs for care of stranded dolphins and whales. This facility has become increasingly important as several other Florida facilities have ceased accepting these animals.

While the purpose of Mote's marine mammal stranding program is research and rehabilitation, the ultimate goal is to return animals to the wild as quickly as possible. To accomplish this, medications, diagnostic tests and other critical care services are a necessity, similar to the regimen provided to a patient during a hospital visit in an intensive care unit. Live-stranded whales and dolphins are treated and monitored by Mote staff and hundreds of volunteers who provide around the clock care. Mote is most fortunate to have more than 1200 volunteers involved in marine mammal rehabilitation. Without these dedicated individuals who donate both time and money to the effort and the donated services of local medical laboratories and hospitals, the program would not exist, since the other costs of rehabilitating these animals are so high. The average rehabilitation for a dolphin or whale at our facility lasts about three months and the average cost of staff time, food and medicine (items we cannot get donated!) for a single marine mammal is about \$31,425.

Currently, many facilities must limit the number of animals treated because of the limited funds available. The staff at Mote's Dolphin and Whale Hospital, like a number of other facilities, have been forced to turn away several animals over the last few years as a result of these limited funds. In addition, a number of large sea life parks that were once involved in rehabilitation efforts have ceased such activities because of the real threat of disease transmission from sick wild animals to their captive animals. Consequently, several of the facilities that could afford to rehabilitate marine mammals due to large gate receipts, are no longer involved. That leaves the smaller facilities with more limited receipts to care for even more animals. We feel that this bill will help alleviate some of the problems associated with this change.

Since its inception, Mote's Marine Mammal Hospital Program has been funded entirely by private donations, without the help of federal, state or local funding. While hospitalized dolphins and whales always generate tremendous public interest, the financial burden for Mote is significant. With the fiscal

hardship of caring for marine mammals and fewer facilities able to care for them, many facilities have had to turn away animals that possibly could have been saved. That is why the grant program created by this legislation is so important to the very survival of marine mammal stranding facilities.

But you might ask, of what value is a dolphin and whale hospital. As a research institution, we learn from the animals which pass through our hospital, from both the successes and from those which do not survive. Stranded marine mammals may serve as sentinels to alert us to problems of pollution and disease, some of which may have important human health significance. New information is gathered that provides for improved care of subsequent animals in Mote's care and other treatment facilities and we learn new data on the basic biology of the species. For example, one dolphin which was successfully treated in our hospital was Gulliver, an offshore form of bottlenose dolphin. When Gulliver was readied for his return to the wild, he was fitted with a satellite-linked radio transmitter and tracked for 47 days following his release off Florida's Cape Canaveral. Contrary to predictions based on previous data for offshore bottlenose dolphins, Gulliver did not simply move parallel to the U.S. shoreline, but instead traveled more than 2,200 miles to the southeast, to a point northeast of Puerto Rico. He showed us that our initial notions about the limits of the ranges of offshore bottlenose dolphins were naive, and that federal management agencies need to consider a very different model that takes into account other ranging possibilities when developing their mandated conservation plans.

Because of the limited information that is available, much of the rehabilitation of marine mammals is research oriented and, often, trial and error. There are not volumes of texts on marine mammal disease. As a matter of fact, the number of books available regarding the veterinary care of marine mammals can be counted on the fingers of one hand. Consequently, we seek to publish as much new information as we possibly can to share it with other facilities. Unfortunately, fund raising is often much more critical and takes up much of the time of the veterinary staff. We feel that one benefit of this bill would be to allow more effort to be put into publications and presentations which would be of benefit to rehabilitation facilities around the world.

The information and samples gathered from individual animals and from groups of animals following mass strandings is shared routinely with the National Marine Fisheries Service in their studies of the epidemiology of stranding events. Indications of one disease new to cetaceans and another one new to the Gulf of Mexico have been observed recently using samples obtained by Mote veterinary staff during rehabilitation of animals from two separate mass strandings. With additional funding as would be provided by this bill, even more collaborative efforts with NMFS would be possible because it would not be limited to those tests that NMFS could fund with their already scant budget.

There are several suggestions that we have regarding H.R. 1934, the Marine Mammal Rescue Assistance Act of 1999. First, we feel that the grants that would be made available by this Act would go a long ways toward improving the quality of critical care these endangered and/or protected species get during rehabilitation and we would like to thank Congressman Saxton for sponsoring this legislation. We feel, however, that it would be a mistake to reallocate funds from the National Marine Fisheries Service budget to fund this act. We feel that the NMFS budget that relates to marine mammals is already greatly restricted and we would request that additional funding from some other source be made available to fund the grants proposed in this act. Secondly, we feel that the grants should go to fund only facilities recognized as part of the U.S. Stranding Network. This would eliminate the possibility of non-professional groups from bringing in animals just to obtain grant funding.

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