

April 25, 2006

Kathleen O'Hagan  
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Dear Dr. O'Hagan:

On behalf of our more than 1 million members and supporters, I am writing to inform you that your work will be featured on our Web site FemFatalities.com. Of all the experiments we've seen, few showed as much disregard for ethical principles and scientific validity as your study "Uterine Circulatory Response to Exercise in Pregnancy." Not only is your work cruel to the 60 rabbits you plan to confine, experiment on, and kill, but it also wastes hundreds of thousands of taxpayer dollars that could be better spent on clinical research, prevention, and patient care.

The rabbits in your laboratory suffer an array of abuses. They are forced to run on a motorized treadmill until they are exhausted. They undergo major surgery in which they are cut open in order to implant probes and run wires through their bodies, and the hardware from these probes is left for weeks in a box that is stapled between their shoulders. The rabbits also have multiple catheters stuck inside their sensitive ears with the use of only topical analgesia. These 60 innocent rabbits are subjected to fear, stress, and pain before they—and their full-term babies—are finally killed.

Along with the fundamental ethical problems with these experiments, there are simply too many physiological differences between pregnant rabbits and pregnant women for there to be any relevance to your findings. Moreover, there are serious flaws in the experimental design of your study that exasperate the inherent problems with animal experimentation.

The National Heart, Lung, and Blood Institute's Working Group on Research on Hypertension During Pregnancy states, "Animal models are of limited benefit because of significant differences in placentation among mammals, as well as differences in length of gestation and perhaps even posture between mammalian models and humans." For example, in human placentation, there is a more pervasive and intimate apposition between maternal and fetal tissue, affecting, among other things, the nature of blood flow between the mother and fetus. Additionally, human gestation lasts for nine months and usually produces one infant, whereas rabbit gestation lasts a mere month and produces a litter of babies. Moreover, the stages of development for a rabbit fetus do not adequately correspond to those of a human fetus. In addition to these gestational differences, humans walk upright and rabbits walk on all fours. This changes the forces acting on blood flow, the spatial relationship between the fetus and key organs such as



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the heart, and how the fetus moves during physical activity. These differences make your work with rabbits inapplicable to women.

Your experiment also suffers from the difficulties of studying animals in laboratories. Physiological data, particularly heart rate and blood pressure, are unpredictably affected by the stress and fear of life in a laboratory. These effects make observation of hypertension particularly unreliable, which may be why your own work on blood pressure and renal sympathetic nerve activity baroreflex in pregnant and nonpregnant rabbits has produced contradictory findings (O'Hagan 2001). Furthermore, because you are studying exercise, it should be noted that laboratory confinement presents an irremedial confounding variable—confined rabbits receive deficient levels of exercise between their exercise trials. It is the equivalent of strapping women in bed and letting them up only to run on a treadmill a handful of times during their nine-month pregnancy.

You have been publishing papers on your “rabbit exercise” studies since 1993, and in that time, you’ve made no noticeable contribution to medical science. In fact, many of your articles remain uncited or cited only by yourself. With all the above taken into consideration—and because other researchers are not referencing your results—it is difficult, if not impossible, to see how your studies are making any contribution to human health. In contrast, human research has yielded real results. Epidemiology and clinical studies have proved that moderate exercise is safe and beneficial for pregnant women and their babies. Clinical trials using Doppler ultrasound have clearly shown that uterine blood flow is only mildly affected by exercise and that fetal blood flow is not affected at all. Epidemiology suggests that regular physical activity can protect against the development of preeclampsia, as can a healthy diet and refraining from smoking. If we can safely and effectively study exercise in pregnant women, what is the point of doing so with rabbits on treadmills?

We ask that you end your current experiment, and not seek an extension to your NHLBI grant. In addition, we ask that you confine your future research to exercise in humans or concentrate on teaching, which is, after all, your primary vocation.

Sincerely,

A handwritten signature in cursive script that reads "Matthew Mongiello". The signature is written in black ink and is positioned above the typed name.

Matthew Mongiello  
Research Associate