The Line Between Us

KATELYN SANTA MARIA
Stanford University

I am an identical twin, which comes with many blessings, but also so, so much comparison between us, from outward appearance to our personal goals and aspirations. One of the most frequent comparisons was our dream careers.

My love of animals started young, with a rescued red-eared slider named Swimmer who came to live with us when I was a kid. Caring for him, figuring out what he needed, and watching him thrive, motivated my desire to become a veterinarian. My twin sister felt something similar, as it turned out, just directed toward a different kind of patient: she wanted to go into pediatric medicine.

Growing up, an unspoken hierarchy always hung over our conversations. She was going to be a doctor, saving human lives. I was going to be a veterinarian, *just* working with animals. By the time we got to college, I found myself correcting people who called me a future doctor. Future veterinarian, I'd say. Not a doctor.

But veterinarians are doctors.

I didn't question it. Of course people took her more seriously. She was going to work with humans. I was going to work with animals. But the more time I spent in biology classes and research labs at Stanford, the less that separation made sense. We rely on animals in ways most people don't stop to think about. The drugs we take, the treatments we receive, and the safety standards we assume are built on data from animal bodies (National Institute of Health). Beyond that, animals shape our lives in ways we don't always stop to notice. They find people buried under rubble, help us through grief and illness, become part of our families, and even inspire the technologies we design to adapt and survive. They also sustain the systems that keep us alive: pollinating crops, regulating environments, and holding together biological networks that a changing world is already straining. We don't just share a planet with animals. We depend on them, in ways both obvious and invisible, every single day. And yet, we still see ourselves as fundamentally separate from them (Natterson-Horowitz, 2012).

In the same breath, we dismiss those same animals, and the people who treat them, as somehow less important, less worthy of serious medicine. The language reflects that dismissal, and it reinforces it. "Just animals." "Not a real doctor." These aren't neutral phrases. Repeated often enough, they build a wall between two fields that share much of the same biology, with serious consequences. When veterinary medicine is treated as lesser, its findings don't get read by physicians treating human patients. When physicians don't read veterinary literature, patients miss out on insights that

have sometimes existed in animal medicine for years. What seems like a matter of perception ends up shaping real health outcomes.

I started to see this more clearly when I learned about postpartum depression. In humans, it is a serious and often underdiagnosed condition that can disrupt the bond between mother and child and, in extreme cases, lead to neglect or harm (Brown Med-Peds Residency, 2022). Part of the challenge is stigma. Mothers are often expected to feel an immediate, instinctive bond with their child, and when that doesn't happen, it can be difficult to admit, even in a clinical setting. In animals, similar behaviors are recognized more directly. Veterinarians are trained to watch for maternal rejection or aggression and to intervene when it appears. In some cases, mares will reject or become aggressive toward their foals after birth, and interventions such as oxytocin administration can help restore maternal behavior (Natterson-Horowitz, 2012; Daigle, 2018). The difference here between the veterinary and human medical fields is that they historically have operated under different expectations about what is "normal," and those expectations shape what gets recognized and treated. When those conversations stay separate, we miss opportunities to learn from each other.

At Stanford, I came across the framework of One Health: the idea that human, animal, and environmental health are deeply interconnected. It wasn't a new concept so much as a new way of seeing something I had already been noticing. It made me realize that the separation I had taken for granted wasn't really about biology; it was about how we choose to organize knowledge, what we treat as connected, and what we keep apart. The differences we emphasize between species are often smaller than the similarities we quietly depend on. And the words we use to describe those differences matter more than we tend to admit. Changing them is not a courtesy. It is a precondition for the kind of collaboration that saves lives, both animal and human.

Now, when I'm standing next to my twin, I don't feel the need to correct people. We both want to be doctors, we say. She'll add, in her way, that our careers are "the same field, just different fonts." The more I learn, the more I know she's right. Not just about us, but about the way we've divided medicine more broadly. The line between human and animal health isn't as natural as we make it seem. Closing that gap starts with something as simple, and as difficult, as seeing the line for what it is: one we've drawn.

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