

OFFICIAL VETERINARIAN

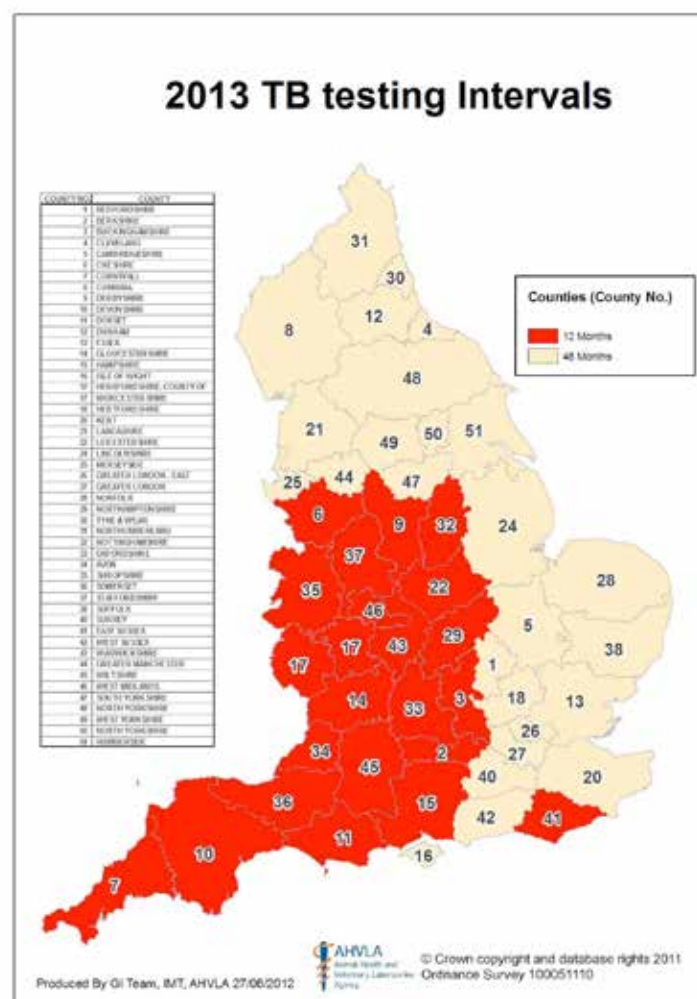
Changes to TB controls in England

Defra has announced the introduction of tighter control measures in England to reduce the risk of bovine TB spreading between cattle. The strengthened rules, which will come into force from 1 January 2013, include changes to the surveillance testing regime and cattle movement controls.

Surveillance testing

TB testing intervals will now be set at the county and not the parish basis, in line with EU law. Using a larger administrative unit than the parish makes more sense epidemiologically and will give a clearer picture of the distribution of the disease in England (see below for a fuller explanation of the benefits of this new strategy).

- England will be divided into two cattle TB testing frequency areas. Annual TB testing of farms will be extended from the south-west and west into central England, and East Sussex to include adjoining areas which are at risk from geographic spread of TB in the short to medium term.
- This means that, in addition to counties currently on annual testing, Cheshire, Derbyshire, Nottinghamshire, Leicestershire, Northamptonshire, Oxfordshire, Buckinghamshire, Berkshire, Hampshire and East Sussex will all be placed entirely onto annual testing.
- There will be no two-yearly and three-yearly tested areas or herds from 2013. The rest of England will be on a routine four-yearly testing frequency. There will be no higher testing frequency parishes embedded in the four-yearly testing counties.
- TB surveillance around Officially TB Free status withdrawn (OTFW) breakdowns in the four-yearly testing area will be enhanced and extended beyond the immediately contiguous herds, to better determine whether there has been any localised spread of disease. Herds within a 3km radius of the case which is initially identified will require an immediate skin test and then follow up tests 6 months later and, if results are negative, 12 months thereafter. During this time, these herds will be required to pre-movement test cattle.
- Individual high risk cattle herds (for example bull hire herds, heifer rearing herds, producer-retailers of raw drinking milk, regular purchasers of cattle from high incidence countries, post-breakdown herds, herds located near to or epidemiologically linked to OTFW herds) in the four-yearly testing area of England will continue to be tested for TB every year as currently.
- Mandatory gamma-interferon blood testing of new OTFW herds will continue where it is used currently at the edge of the new annually tested area (i.e. in the current 2, 3, or 4 yearly testing areas) with the aim of slowing disease spread across the country.



continued

Changes to TB controls in England

Changes to Cattle Movement Controls

New rules concerning cattle movements are also being introduced from 1 January 2013:

- Re-stocking of Officially TB Free status suspended (OTFS) herds will only be permitted after the herd's first post-breakdown test (after any identified reactors have been removed) and subject to a satisfactory veterinary risk assessment. This change will bring such herds in line with the conditions already in place for OTF status withdrawn (OTFW) herds;
- The window for movements of cattle from TB restricted herds will be reduced from 60 to 30 days from the day of their last tuberculin skin test with negative results. However, movements to slaughter (direct or via an Approved Finishing Unit or slaughter gathering) will continue to be permitted within 60 days of a test with negative results;
- The current moratorium on new Approved Quarantine Units (AQU) will continue, and existing AQUs will be phased out, i.e. from 1 January 2013 existing AQUs will not be able to re-stock; and
- Sanctions against operators of Approved Finishing Units (AFU) that breach operating conditions will be reviewed on a case by case basis, with the licence to operate being removed for serious breaches.

Further information about the changes to TB controls can be found at:

<http://www.defra.gov.uk/news/2012/10/18/cattle-movement-controls-and-surveillance-strengthened-to-tackle-bovine-tb/>

Other measures

Defra is developing further measures to reduce disease risks, including targeting the edge of the high risk area with the aim of stopping the geographic spread of disease, risk-based trading, reviewing use of gamma-interferon blood testing and how persistent herd breakdowns are dealt with, and is looking at measures to deal with TB in other species. Details on these will be announced as they are developed.

Benefits of the revised surveillance testing strategy for England 2013

The revised surveillance testing strategy offers the following disease control benefits:

1. Annual testing in high incidence and high risk areas that are likely to have endemic bTB:
 - Allows early removal of infected cattle,
 - Prevents disease spread, and
 - Complies with legislative requirements for surveillance.
2. Annual testing in a substantial buffer area around the high incidence area in order to:
 - Account for the already identified, slow geographic spread,
 - Ensure early detection of spread if it happens and to prevent further spread,
 - Ensure adequate testing of these areas for future OTF status, and
 - Comply with legislative requirements for surveillance.
3. Four-yearly testing in the areas where bTB is not endemic, supplemented by slaughterhouse surveillance and risk-based surveillance in order to:
 - Ensure that introduced disease does not go undetected,
 - Allow surveillance evidence to be maintained for future application of regional OTF status, and
 - Allow a faster return of affected herds in low incidence areas to the default 4-yearly testing regime and derogation from PrMT, reflecting their true risk status.
4. The approach is epidemiologically sounder than the previous, parish-based, retrospective approach and provides a strong alternative to the blanket annual testing proposed by the European Commission.
5. The approach allows targeting of more intensive surveillance resource in areas where it can have a real disease control impact (e.g. the edge area) and prevents less efficient use of resources where impact is minimal (non-endemic areas).
6. Reflects the true epidemiological distribution of bTB in England.
7. Provides for a more stable surveillance strategy that will produce surveillance data that allows year-on-year comparison of prevalence/incidence data.
8. Will send the right messages to delivery partners: risk based surveillance and careful investigation of each breakdown in low incidence area is important.
9. Will send the right messages to cattle keepers: bTB is not an endemic disease in all parts of England, risk based approach to cattle movements is important, eradication / OTF status is possible.

AHVLA research into TB cattle vaccination

More than £23m has been invested in a TB cattle vaccine and associated research and development since 1998, and a further £9.3million is being invested over the next four years. Whilst vaccination is a potential tool to stop the spread of bovine TB, it is not currently available as there remains significant licensing and regulatory barriers before cattle vaccines can be used.

An injectable vaccine based on the human tuberculosis vaccine BCG (Bacille Calmette-Guérin, an attenuated strain of *Mycobacterium bovis*) has been licensed for use in badgers and, for the foreseeable future, a BCG vaccine is also the lead cattle TB vaccine candidate. Vaccination with BCG can reduce the progression, severity and excretion of *M. bovis*. However, vaccination of cattle against TB is currently prohibited by EU legislation, mainly because BCG can interfere with the tuberculin skin test, which is recognised as the primary diagnostic test for TB in cattle.

In an attempt to clear the way for a cattle vaccine, AHVLA has developed a DIVA test which can 'Distinguish between Infected and Vaccinated Animals'. In January, AHVLA submitted a dossier to the UK's Veterinary Medicines Directorate (VMD) for approval in principal of a Marketing Authorisation for the BCG-based cattle vaccine. Defra is in discussion with the EU to change the current legislation to allow a BCG cattle vaccine and the DIVA test to be used to tackle bovine TB. The aim is to allow both to be used legally in the UK - but the timetable remains uncertain.

The licensing process itself is complex, but it is hoped to have feedback from the VMD within a year. But the VMD will only be able to grant a marketing authorisation for BCG once the existing EU prohibition on vaccination of cattle against TB is lifted.

Due to the ban on vaccination in Europe, carrying out field trials within the UK is complex; however AHVLA has been collaborating with other countries where vaccination programmes are ongoing. In particular, small-scale field trials carried out in Ethiopia over two years, funded by the Wellcome Trust, suggest a level of protection in individual animals of approximately 56-60% could be expected from cattle vaccination. The duration of immunity with the current vaccine is between one and two years, which would mean annual vaccination would be required at farm level.

Although these are small-scale trials, they are indicative of the sort of protection that might be expected. Larger-scale trials will be required to give greater understanding of the effects of vaccination, particularly at the herd level. The results also show that vaccination does not protect all animals, which is why a DIVA test is needed so that infected animals can be removed from a vaccinated herd.

A follow-up study is now being repeated in Ethiopia through funding from the Gates Foundation and the Department for International Development (DFID).

A medium-term approach to cattle vaccination is looking at producing vaccines that improve BCG and its performance. This initiative is being linked to global multi-million pound efforts to develop improved TB vaccines for humans.

Pilot badger culls to go ahead in England in 2013

The National Farmers Union (NFU) has written to Defra to request that the pilot badger culls in West Somerset and West Gloucestershire go ahead in 2013. The request follows new survey results which revealed higher than anticipated badger numbers in the two pilot areas.

Following a thorough assessment of their current capability, the NFU informed Defra that in light of these new figures they could not be confident of removing the required minimum 70 per cent of the badgers in the two pilot areas this autumn.

Defra has agreed to postpone the pilot culls until summer 2013 to allow farmers to continue their preparations and have the best possible chance of carrying out the cull effectively.

Further information is available on the Defra website at: <http://www.defra.gov.uk/news/2012/10/23/badger-cull/>

Risk-based routine skin testing for bTB in Scotland

AHVLA has made significant reductions to the number of herds eligible for routine TB testing in Scotland, based on Scottish Government's new risk-based routine TB testing policy.

In the initial implementation period the aim of exempting 'low risk' herds from routine testing has now been applied to all herds in Scotland. As a consequence, it is estimated that the number of herds receiving a routine herd test over a four year period will be reduced by approximately 30%.

An AHVLA project team was set up last year to identify precisely how many herds might be eligible for routine herd test exemptions and to liaise with Scottish Government on how the new TB testing policy could best be implemented.

Scotland was recognised as being officially TB free (OTF) by the European Commission in September 2009, and OTF status provides the flexibility to design a dedicated and original routine TB surveillance programme for the Scottish national herd, rather than being tied to four yearly routine skin testing.

In March 2010, researchers from Glasgow University were commissioned to produce options for a more effective, targeted surveillance programme, which could make savings for Government and farmers alike, without significantly affecting the ability to detect tuberculosis quickly. The report from the Glasgow team remains available on the Scottish Government website at: <http://www.scotland.gov.uk/Publications/2011/06/16155558/11>

On the basis of the results from the Glasgow Report, 'low risk' herds must comply with one of the following three criteria:

- Herds with fewer than 20 cattle which have had less than 2 consignments of cattle moved on from high incidence TB areas (including Northern Ireland and the Republic of Ireland) in the previous 4 years.
- Herds that slaughter more than 25% of their stock annually and have fewer than 2 consignments of cattle moved on from high incidence TB areas (including Northern Ireland and the Republic of Ireland) in the previous 4 years.
- Herds that slaughter more than 40% of their stock annually.

Update on DNA ear tagging of TB

A post-implementation review carried out following the introduction of the DNA tagging of TB reactors in England, has found that such tagging is proving to be a strong deterrent to cattle ID switching, and is also helping to reduce the number of herds under long-term restrictions.

In order to evaluate the impact of the measure, AHVLA conducted a study on a set of long-term restricted herds to analyse ear tag ordering histories for two years prior to the implementation of DNA ear tagging. This was to baseline the quantities and patterns of ordering within these herds so that a comparison could be made post implementation.

Of the 523 herds that were examined in the study, 57 were found to have suspicious ear tag ordering patterns around the time of the TB skin test, and 23 of these herds had patterns suggesting that the practice of retaining TB reactors on farm could have been happening on a more systematic basis. The ordering of double replacement ear tags for reactor animals after the reading of the TB skin test at TT2 when the identity of reactors is known, yet prior to slaughter, was considered suspicious.

A year on from the introduction of DNA ear tagging AHVLA revisited the herds initially reviewed to assess any changes in behaviour and the effect on replacement ear tag ordering patterns. The results show that prior to DNA tagging, in the 57 herds where suspicious patterns were noted, 13% of the total number of reactors identified had double replacement ear tags ordered after the TB test reading. Following the introduction of DNA ear tagging, this dropped to 1%. For the 23 herds where more systematic patterns were noticed, the percentage of reactor identities that had double replacement ear tags ordered after the reading of the TB skin test fell from 22% to 1.5%. This represents a significant change in behaviour.

In addition, in the year following the introduction of DNA tagging, 18 of the 57 long-term restricted herds where suspicious ear tag ordering patterns were observed have had clear TB tests and their restrictions lifted.

Using the Sam IT system

AHVLA's Sam IT system holds information on all of the agency's customers, stores documents and enables work to be managed electronically. At the end of last year the system was updated to manage TB processes and with the intention of enabling OVs to access parts of Sam in connection with TB test work. Having worked with a small number of OV practices to make some final improvements to the system, AHVLA started wider roll out of Sam to practices in the summer using a network of Customer Account Managers to help practices prepare for, and start using, Sam.

AHVLA has now supported over 250 OV practices to use the system, meaning that they always have an up to date view of work allocated to them by AHVLA, and are able to submit TB test results directly into the Sam system. The majority of TB tests are now being received by AHVLA this way and the overall number continues to rise as users become increasingly familiar with this new way of working.

OV Practices using Sam will no longer receive monthly paper worklists, but can access more flexible worklists – they being able to be sorted, filtered and searched – online. Additionally, practices using the system no longer need to complete and return the *NV01 Visit Notification Form* to inform payment agencies of test dates, as this information is now automatically reported via Sam to these agencies.

Overall most OV practices have been supportive of the new way of working and can see advantages for them of using Sam. There are a small number of users and practices who have experienced problems when using the system. AHVLA has continued to work closely with these to help identify and overcome these issues, the causes of which range from initial access registration and enrolment through the Government Gateway, IT systems and settings in some practices and broadband availability in some areas. AHVLA is also using feedback from practices to consider further enhancements to Sam.

We are now receiving nearly 3,000 tests per week via Sam and are encouraged that the majority of these tests results are sent within one day of the test being completed. Over the next couple of months AHVLA will roll out Sam to remaining practices that have registered to use it.

Further updates on the roll-out, as well as details on how to register to use Sam, can be found on the OV pages of the AHVLA website at: <http://animalhealth.defra.gov.uk/about/official-vets/access-to-sam/index.asp>

Sam e-learning

AHVLA has recently updated the Sam e-learning modules and Practice Guide for OV Practice staff on the AHVLA website: <http://animalhealth.defra.gov.uk/about/official-vets/access-to-sam/elearning.asp>

Revisions have been made to guidance concerning:

- Sam status updates (traffic lights) on Web page
- Part-Tests
- Producing clear Test Certificates
- Adding Animals
- Using Ctrl > F to find a particular animal
- OAls found in Assign Animal tab

Understanding your perspective

As part of establishing a Quality Management System for TB testing in cattle by OVs, AHVLA would like to reduce the number of errors occurring during the processing of TB test charts by OV practices, and find out what we can do to prevent them.

Aligned with this is work currently underway to establish how satisfied OV practices are with how OV claims and overdue TB tests are managed, and OV practices' preferred means of communication with AHVLA.

In order to gather this information, AHVLA Customer Account Managers will ask OV practice admin staff to complete two short questionnaires during OV practice visits for the rollout of Sam. Each questionnaire will take about 10 minutes to complete. Practice views and feedback on these issues will broaden our insight into the TB testing process, OV claims and overdue TB tests and will be very much appreciated.

Future scanning surveillance model

AHVLA's Surveillance 2014 project is taking forward the recommendations of the independent Surveillance Advisory Group's to develop an improved future scanning surveillance model in England and Wales.

The project aims to create a new, more effective and financially sustainable surveillance system, including a new emphasis of approach with greater engagement with a wider range of information sources and the systematic collation of data from private veterinary practitioners in order to ensure that threats are identified and understood. It is also examining possible new roles and responsibilities for AHVLA vets, changes to the provision of a diagnostic service, and is considering options for the infrastructure required that will make the system both more effective and affordable. This includes the possible introduction of an enhanced carcase collection service making post mortem examination facilities more accessible to a greater number of livestock keepers and their vets.

Ideas will be discussed with the wider veterinary profession, livestock farming industry and other interested stakeholders through an online survey and a series of regional meetings. These are likely to be held throughout January 2013. The consultation will engage stakeholders in reviewing the current surveillance system, explaining why change is needed, and will look to examine options for strengthening the surveillance network, including the diagnostic and surveillance components. It will also examine how the system should be governed.

Private veterinarians and others with an interest on scanning surveillance will be notified when the consultation phase begins and will be invited to share their ideas and thoughts on what the future might look like.

Further information is available at: http://vla.defra.gov.uk/science/sci_surv_model.htm

Submission of samples to diagnostic laboratories

When sending diagnostic samples to laboratories, e.g. for brucella investigations, Official Veterinarians must comply with the Carriage of Dangerous Goods Regulations and assign the correct United Nations (UN) number.

The current conditions (ADR 2011), giving further guidance on UN classification and packing instructions may be found at this link: <http://www.unece.org/trans/danger/publi/adr/adr2011/11contentse.html> (part 2 and part 4).

The samples which Official Veterinarians collect on behalf of AHVLA are classified under ADR Regulations as UN3373 Biological Substance Category B (refer to ADR part 2 clause 2.2.62) and must be packed according to P650 packing instruction (refer to ADR part 4 pages 146 and 147).

OVs must follow these instructions for the collection, preparation and dispatch of samples.

A Quick Reference Guide to ADR for OVs is available on the AHVLA website at:

<http://animalhealth.defra.gov.uk/about/official-vets/documents/quick-reference-guide-ADR.pdf>

Prevention of ill health from animal contact at visitor attractions

A code of practice on the prevention or control of ill health from animal contact at visitor attractions has been published by Farming and Countryside Education (FACE).

A link to the document can be found at: <http://www.face-online.org.uk/codeofpractice>

Update on the use of vaccination against bluetongue

The use of approved inactivated bluetongue vaccines to help protect against the disease in England, Scotland and Wales have now been agreed. **Live attenuated vaccines however are not permitted**, as they are forbidden to be used outside of a bluetongue restricted zone under EU law due to the risk of reversion to virulence.



In England, the Bluetongue (Amendment) Regulations 2012 came into effect in August 2012 and amend The Bluetongue Regulations 2008. These permit the use of inactivated Bluetongue vaccines in Bluetongue free areas. A General Licence (EXD568(BT)(E)) has been issued to permit vaccination using inactivated vaccines with a marketing authorisation granted by the European Medicines Agency to protect against Bluetongue serotypes 1, 2, 4 and 8.

Further information is available on the Defra website at:
<http://www.defra.gov.uk/animal-diseases/a-z/bluetongue/>

The General Licence can be found at:
<http://www.defra.gov.uk/animal-diseases/files/bluetongue-vaccination-general-licence-120824.pdf>



In Scotland, the Bluetongue (Scotland) Order 2012 came into effect in September 2012. This Order will permit vaccination against all Bluetongue serotypes within bluetongue free areas using an inactivated Bluetongue vaccine approved by the Veterinary Medicines Directorate (VMD) or EU.



In Wales, the Bluetongue (Wales) (Amendment) Regulations 2012 came into force in October 2012, similarly permitting the use of inactivated approved bluetongue vaccines.

Further information is available on the Welsh Government website at:
<http://wales.gov.uk/topics/environmentcountryside/ahw/disease/bluetongue/?lang=en>

The use of voluntary vaccination against bluetongue is not permitted in either Northern Ireland or the Republic of Ireland. However, trade of vaccinated animals to any part of Ireland will not be affected by the use of vaccines approved for use in the UK.

Publication of cattle health and welfare report

The Cattle Health and Welfare Group (CHAWG), which includes members from AHVLA, the Animal Health & Welfare Board of England, Defra, and the Scottish and Welsh Governments, has published its first report on cattle health and welfare in Great Britain.

The report provides a snapshot of health and welfare in both the dairy and beef sectors and effectively establishes a baseline for the cattle industry, whilst also highlighting a number of important issues.

The report is available from the EBLEX website:
http://www.eblex.org.uk/documents/content/returns/chawg_annual_reportfinal_110912.pdf

Further information on the CHAWG can be found at:
<http://www.eblex.org.uk/returns/health-welfare-cattle.aspx>

Hydrogen Sulphide (H₂S; slurry gas) poisoning in cattle

AHVLA have received reports of acute neurological disease, including blindness and deaths, in cattle that are very likely to be due to the inhalation of hydrogen sulphide gas from slurry.

Hydrogen sulphide is produced by the anaerobic decomposition of sulphur containing organic matter, which occurs in slurry pits. The risk of hydrogen sulphide poisoning is significantly increased if the slurry is agitated, as this releases the gas, and if gypsum (CaSO₄) has been used as a bedding material and added to the slurry.

Poisoning can affect both animals and people. At low levels the gas is an irritant to eyes and the upper respiratory tract but at higher levels the gas will cause pulmonary oedema, asphyxia and death. Reports of some cows that have been poisoned by hydrogen sulphide are of acute CCN-like nervous disease followed rapidly by death. Some bovines survived acute nervous signs but have become permanently blinded.

Although H₂S is detectable at low levels from its odour of rotten eggs, this should not be relied upon as a means of detecting the gas because gaseous release can occur very rapidly. It should also be remembered that the distribution of the gas within the air space will not be uniform.

Gypsum recovered from plasterboard, and waste plasterboard itself, has been used as a bedding material on some cattle farms. The Environment Agency advises that the use of waste gypsum as a bedding material is not allowed without a specific permit and that such permits are very unlikely to be granted.

Virgin gypsum has in the past been used as a desiccant on a small number of farms. This would have been purchased and used in small quantities as a light dusting not as bedding material. These smaller quantities are less likely to enhance hydrogen sulphide generation in bedding systems or slurry systems.

Backing paper from plasterboard from which the gypsum has been removed can be used as bedding in accordance with a waste exemption.

Please inform your clients of this risk, and advise them that the use of waste recycled gypsum as a bedding material is not advisable and is not legal without a permit.

Changes to pig housing regulations

Some of the provisions of the Welfare of Farmed Animals (England) Regulations 2007 (WOFAR) and the equivalent legislation in Wales and Scotland, which since 2003 have applied only to newly built or re-built premises, will apply to all pig holdings from 1 January 2013. These provisions are applicable regardless of whether farms are 'assured' or not.

The provisions coming into force include:

- Maximum slot widths and minimum slat widths for concrete slatted floors.
- For sows and gilts, minimum lengths are specified for the sides of pens.
- For sows and gilts, minimum unobstructed floor area and dimensions for solid floors.

Information, together with more general advice and guidance on pig welfare issues, is available from the Defra website at: <http://www.defra.gov.uk/food-farm/animals/welfare/on-farm/pigs-welfare/>

New regulation on the protection of animals at time of killing

A new European Regulation which affords greater protection to animals at the time of killing comes into effect on 1 January 2013.

The welfare of animals at slaughter and killing is currently subject to the requirements of The Welfare of Animals (Slaughter or Killing) (WASK) Regulations 1995, as amended. In 2008 the European Commission (EC) brought forward proposals to update regulations in order to strengthen the protection of animals at the time of slaughter or killing, whilst ensuring a level playing field for all business operators concerned. In doing so, the EC has granted a degree of flexibility to Member States to enable them to maintain or, in specific fields, adopt more extensive national rules affording greater protection to animals, provided the rules do not affect the functioning of the internal market.

The subsequent EC Regulation 1099/2009 comes into effect on 1 January 2013 (although some measures in relation to layout, construction and equipment in slaughterhouses do not come into effect until December 2019 for existing slaughterhouses).

The Regulation will apply to all EU Member States, although some existing national measures, which provided more extensive welfare protection than the new EC Regulation, will be maintained in individual countries. In certain areas (killing outside a slaughterhouse, slaughter in accordance with religious rites and slaughter of farmed game) new national rules might be introduced to further improve welfare protection in these areas.

Defra, and the Scottish and Welsh Governments are considering the implementation of the regulation.

Further information is available at:



<http://www.defra.gov.uk/consult/2012/09/13/animal-welfare-killing>



<http://www.scotland.gov.uk/Topics/farmingrural/Agriculture/animal-welfare/AnimalWelfare/slaughter/consultation>



<http://wales.gov.uk/consultations/environmentandcountryside/120924protectionofanimals/?status-closed&lang-en>

Export Health Certification

Operational instructions for OV's involved in export work are now available on the AHVLA website at:
http://animalhealth.defra.gov.uk/External_OV_Instructions/Export_Instructions/Updates/index.htm.

Export Health Certification is essential for the successful export of commodities and consequently facilitates trade. OV's must follow the Royal College of Veterinary Surgeons (RCVS) certification advice in the RCVS Guide to Professional Conduct, the 12 Principles of Certification and the guidelines on good certification practice.

It is important for veterinary surgeons to be aware of their responsibilities in ensuring the integrity of the veterinary certification process. This is vital given both the importance of the work area and the potential for challenge.

It must be stressed that before signing a certificate a veterinary surgeon should consider:

- Caution – scrutinise the document
- Clarity – be clear what the document is asking
- Certainty – be sure what it is you are able to attest to.

Export health certificates are effectively an agreed contract between Defra and the importing country. Consequently the terms of the certificate have to be very carefully read and understood to ensure OV's are fully aware of exactly what is being asked to be certified. Equally the OV should be completely confident that this is within their 'knowledge' before the certificate is signed. These terms cannot be varied in any way without agreement between Defra and the importing country.

Official Veterinarians provide independent assurance that consignments meet the defined conditions in full – not a variation, or part, of those conditions. For example the purpose of asking a veterinary surgeon to certify that 'the product was subjected to pasteurisation at a minimum of 72 degrees Celsius for at least 15 seconds' is for you to attest that the pasteurisation was conducted precisely as specified, not whether the milk has been pasteurised.

We would strongly recommend familiarity with the RCVS Code of Professional Conduct (section 21 on certification and the 12 principles of certification). These are available, as part of a set of operational instructions mentioned above, at:

http://animalhealth.defra.gov.uk/External_OV_Instructions/Export_Instructions/Professional_Conduct/index.htm.

The welfare of animals, especially in relation to export, is a very sensitive area and can be highly scrutinised – as such it is essential to bear in mind the need to ensure that the animal is healthy and fit to be transported. Animals standing in a field may not show any signs of injury or stress, so it is essential you take sufficient time to inspect them properly if they are to undertake a journey. To certify animals as fit to travel, you should be confident that they can cope with the environment experienced during transit and if you have any doubt about the fitness of an animal to cope it should not be considered fit for the journey.

Submitting samples for notifiable disease testing

There have recently been some instances of private vets submitting diagnostic samples to laboratories requesting testing for notifiable diseases. This article is to remind OV's of the procedure where a notifiable disease cannot be ruled out during a clinical examination of an animal.

If a notifiable disease is suspected in either a live animal or carcase by a veterinary surgeon, animal owner or any other person in charge of that animal or carcase, there is a statutory requirement to notify that suspicion. This requirement is met by the person who suspects disease, notifying the local AHVLA office immediately.

Samples must not be submitted for testing for a notifiable disease where that disease cannot be excluded from the list of differential diagnoses in a particular case. If there is any reason to suspect it, no matter how unlikely, please discuss it with the Duty Vet at your regional AHVLA office.

If samples are incorrectly submitted for testing for a notifiable disease the laboratory will not test them but will immediately notify AHVLA. A veterinary enquiry will then be initiated and, if disease remains suspected after that, will impose restrictions and take samples for testing. Samples not taken under official control or supervision by AHVLA cannot be used to confirm or rule out notifiable disease. Only those collected by, or under the authority of, AHVLA can be used as such.

Isn't West Nile different?

There is one exception to the need for a veterinary inquiry to be undertaken where a notifiable disease is on the list of differentials, and that is West Nile Fever. In cases where West Nile Fever cannot be entirely ruled out but it is low down on the list of differentials, please contact the local AHVLA office and discuss the case with the Duty Vet. If they agree that it is not suspected, authority will be given for samples to be submitted privately for testing for West Nile Virus. This is currently the only exception to the need for an AHVLA veterinary inquiry.

What about samples submitted for testing as part of export or breeding requirements?

The submission of samples for testing for a notifiable disease from animals being exported or as part of breeding checks is not affected (provided the animal being sampled is healthy and has no illness suggestive of notifiable disease).

For any further advice on notifiable diseases please see the AHVLA website (<http://animalhealth.defra.gov.uk/managing-disease/notifiable-disease/index.htm>) or contact your local AHVLA office.

New Country Director appointed to lead AHVLA in Wales

AHVLA has announced the appointment of Richard Bowen as its new Country Director for Wales. He succeeds Martin Sharples, who will resume his role as the agency's Operations Director in Wales.

As Country Director, Richard Bowen will be responsible for all AHVLA activity in Wales, in particular ensuring that the agency is ready to deal with outbreaks of exotic animal disease. He will lead AHVLA's work to support Welsh Government aims and priorities with regard to animal health and welfare: TB eradication; sustainable food and farming; and delivering the agreed Programme for Government requirements relating to animal health and welfare.