

Management of horses returning to UK from high risk areas of Europe/Middle East 03 March 2021

Currently, there is a Europe-wide alert of increased risk of disease associated with Equine Herpes Virus (EHV-1), which originated in Valencia (ESP) and has already resulted in related outbreaks in at least three other countries in Europe.

In response, British Equestrian is putting in place the following measures for all horses returning from France, Spain, Portugal, Belgium, Italy, Austria, Poland, Netherlands, Germany, Slovakia and Qatar from 1 March 2021:

- 1. All horses returning to the UK from France, Spain, Portugal, Belgium, Italy, Austria, Poland, Netherlands, Germany, Slovakia and Qatar should be isolated from others which may attend British Equestrian member body events and any other competitions and training events. Furthermore, we strongly advise that they are separated from all other horses. The same also applies to horses which have transited through the above countries on their return to the UK.
- 2. To be considered isolated, the isolated horses must be kept in a building that is physically separated from other horse buildings by a public highway or equivalent.
- 3. Isolated horses must be attended to by separate staff and riders who are not in contact with horses on other (non-isolated) premises.
- 4. To minimise risk of disease spread within an isolation premises, biosecurity measures on the property must include:
 - a. hand-sanitising facilities so that staff can clean their hands between handling each individual animal
 - b. foot dips outside every stable
 - c. separate coveralls outside each stable that are changed between caring for different horses
 - d. separate tack, equipment, feed bowls for each horse
 - e. facilities for disinfection of mucking out equipment must be in place.
- 5. British Equestrian expects the horse owner/guardian's local veterinary surgeon to verify these standards are in place on the isolation premises.
- 6. All horses on the premises, **including those** which have not travelled in Europe recently, must have close clinical monitoring with twice daily temperature recording. Temperature records should be kept and made available for review by the members' local veterinary surgeon.
- 7. All horses on the premises **including those** which have not travelled in Europe recently will be excluded from participation in British Equestrian's competitions and training events and all other member body competitions and activities. Unaffiliated competition and activity should also be avoided.

- 8. The excluded status will apply until:
 - a. Either: All horses on the premises have been free of clinical signs for at least <u>28 days</u> from the day the last horse(s) returning from areas of Europe defined above arrived on the isolation premises.
 - b. Or: Laboratory data confirming that all horses on the premises are free from disease is provided to British Equestrian. These laboratory data must include:
 - i. Paired serology (to measure antibodies against EHV) with two samples taken a minimum of 10 days apart, using the complement fixation test (CFT) which is available at <u>Rossdales Laboratory</u>.
 - ii. And, a pair of nasopharyngeal swabs taken at the same time as the serology samples.
 - iii. For the purpose of interpretation of these data, day 0 is defined as the day the returning horses arrived at the isolation premises.
 - iv. Samples must be submitted to <u>Rossdales Laboratory</u>. Veterinary surgeons should contact the laboratory (via <u>laboratory@rossdales.com</u> or by telephone 01638- 663017, Emergency (24hrs) 01638 663150 for advice on shipping of and processing schedules for samples and to request supplies such as suitable nasopharyngeal swabs and transport media.
- 9. The above requirements for laboratory data to clear excluded status will apply to both horses which are unvaccinated and those that have received vaccines at any previous time and interpretation of laboratory data will be informed by vaccination history that should also be provided at the time of sample submission.
- 10. Samples must be accompanied by a submission form available at <u>Rossdales</u> <u>Laboratory</u>.

British Equestrian: advice on EHV vaccination

- Vaccination decreases nasal shedding of virus if a vaccinated horse does become infected. Therefore, vaccination decreases the total amount of virus in the environment which in turn reduces the likelihood that other horses become infected.
- However, no EHV-1 vaccine is registered for use to prevent neurological disease and vaccination has not been shown to reduce the risk of neurological signs.
- Travelling, housing in large groups, and mixing of horses are all recognized risk factors for precipitating clinical signs of neurological EHV. Therefore, our strong advice is that travel to competitions in Europe should be avoided while the current outbreak remains active regardless of whether horses are vaccinated or not.

- It is essential that vaccination is not considered a means to overcome suboptimal biosecurity. Avoiding mixing in at risk populations, close monitoring, early diagnosis and isolation of suspect horses remain the cornerstones of prevention regardless of vaccination status.
- Vaccination of animals known or suspected to have recently been in contact with EHV-1 is <u>not</u> recommended.
- Although vaccination will reduce the risk for the horse population as a whole, there is some evidence from previous outbreaks that recent vaccination is a risk factor for development of neurological signs in individuals thus advice for this group of horses is less definitive.
- As it is currently unclear how long the current outbreak will remain active in Europe, we are not currently recommending vaccination for horses which are scheduled to travel to Europe in the next few weeks. British Equestrian will continue to advise its members as the outbreak progresses.
- EHV is an endemic disease in Europe therefore it will continue to represent an
 ongoing threat after the current outbreak is over. Therefore, we advise EHV
 vaccination for horses travelling to Europe this summer and beyond. For horses
 to remain protected it is important that once the primary course has been
 given, vaccination should be continued in future with boosters required every
 six months.

This advice has been prepared by members of the BEF Equine Infectious Disease Advisory Group with support from British Equine Veterinary Association:

Philip A S Ivens, MA, VetMB, Cert EM (Int. Med.), DipECEIM, MRCVS, EBVS European Veterinary Specialist in Equine Internal Medicine, RCVS Specialist in Equine Medicine (Internal Medicine), Buckingham Equine Vets Ltd, Wicken, Milton Keynes.

Celia M Marr, BVMS, MVM, PhD, DEIM, DipECEIM, FRCVS, EBVS European Veterinary Specialist in Equine Internal Medicine, RCVS Specialist in Equine Medicine (Internal Medicine), Rossdales Equine Hospital and Diagnostic Centre, Newmarket, Suffolk.

John McEwen, MBE BVMS MRCVS Director of Equine Sports Science and Medicine, British Equestrian Federation, Equestrian House , Abbey Park , Stareton, Warwickshire.

J Richard Newton, BVSc MSc PhD FRCVS, Equine Infectious Disease Service, Newmarket, Suffolk.

David I Rendle, BVSc, MVM, Cert EM (Int.Med.), DipECEIM, FRCVS, EBVS European Veterinary Specialist in Equine Internal Medicine, RCVS Specialist in Equine Medicine (Internal Medicine), Tiverton, Devon.

Helpful links:

- → BEF EHV info sheet
- → BEF Biosecurity info sheet