The Committee met on October 17, 2016 at the Sheraton Greensboro Hotel in Greensboro, North Carolina from 1:00 - 6:00 p.m. There were 32 members and 22 guests present. The meeting was chaired by Dr. Andy Schwartz and vice chair Dr. Katie Flynn. The mission statement was reviewed and the Committee determined changes were not necessary. Responses to the 2015 resolutions were discussed.

Presentations and Reports

Contagious Equine Metritis (CEM) and Import Issues
Rachel Cezar, USDA-APHIS, National Import Export Services (NIES)

Background on CEM Data
APHIS started collecting information regarding horses imported and contained at CEM state-quarantine facilities via excel spreadsheets around the end of 2012. This CEM report being presented will cover:

- Imported mares and stallions from FY2015 to FY2016

<table>
<thead>
<tr>
<th>Year</th>
<th>Mares</th>
<th>Stallions</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>1,035</td>
<td>160</td>
<td>1,195</td>
</tr>
<tr>
<td>2016</td>
<td>1,255</td>
<td>168</td>
<td>1,423</td>
</tr>
</tbody>
</table>

- 2016 Top 10 Exporting Countries: Germany, Netherlands, Belgium, U.K., Ireland, France, Portugal, Poland, Spain, Sweden
- Number of CEM Quarantine Import Horses per state for 2016
  - Florida 387, New Jersey 245, Kentucky 232
  - California 174, New York 73, Maryland 71
  - Oregon 70, Virginia 69, Ohio 45
  - Rhode Island 33, North Carolina 12, Wisconsin 5
  - Colorado 3, Tennessee 3, Georgia 1
- Approved States and Number of Facilities
  - Number of Facilities per State - Each state has its own operating procedure. Some states have a limited number of permanent facilities while others are on an as needed basis for
individual use, often depending on funding. These States address importations by private individuals. The latter States do not accept outside mares or stallions for quarantine.

- Top states doing CEM quarantine

**Federal Laboratory Oversight**
- Training of qualified laboratory personnel who receive and culture swabs is a regulatory requirement.
- This training is overseen and provided by National Veterinary Services Laboratory (NVSL).
- APHIS has updated the guidance memo “Approval of and Requirements for Laboratories to Conduct Tests for Contagious Equine Metritis” - VS Guidance 15202.2
  - This document replaces VSG 15202.1, which is rescinded
  - Valid through 9/14/2016 to 8/30/2019

**Federal Program Oversight**
- CEM coordinator conference calls held annually.
- APHIS has modified the spreadsheet template for uniformity of reporting
- APHIS provides an annual report of the CEM Import Program to the state animal health officials and equine stakeholders.
- USDA offers CEM training for those managing state CEM programs.
- CEM coordinator training is tentatively planned for March 2017 at the University of California, Davis.
- A course was held at New Bolton Center in October 2015.

**Federal Quarantine Facilities Oversight**
- APHIS animal import centers (AICs) work closely with the States to ensure that Permit for Movement of Animals (VS 1-27 forms) are returned to the AICs within 24 hours of arrival of horses at the CEM quarantine facilities.
- This serves to monitor transport and verifies arrival at state quarantine facilities.

**Equine Health International Movement Regulation Changes**
- APHIS has developed a workplan that will amend portions of the regulations for horse importation.
- We are now working with the APHIS Regulatory Development staff on the revised regulatory language.
- The revisions will be published as a proposed rule and open for public comments.
- The revisions will include general language to allow import under High Health Status High Performance Horse (HHP) guidelines from the OIE.
- Specifics of the HHP implementation will not be in the regulations, but rather will be in guidance documents.
- Further revisions may include:
  - Increasing the time horses are allowed to be temporarily exported to CEM regions from 60 days to 90 days.
  - Amending and streamlining the requirements for importing horses from Canada.

**Equine Infectious Anemia (EIA): Concept for Federal Regulations**
Alecia Naugle, USDA-APHIS-VS
APHIS-VS would like to assess the level of stakeholder support for the publication of an EIA proposed rule and we are seeking feedback on these regulatory concepts for EIA control.

**Existing EIA Regulations:** The States currently regulate most aspects of EIA control in the United States. State regulations vary. Federal regulations and associated policy documents are limited to movement restrictions of EIA reactors and the approval of EIA testing laboratories.

**Support for Federal EIA Regulations:** Over the last ten years, the U.S. Animal Health Association
(USAHA) and National Institute for Animal Agriculture (NIAA) have passed eight resolutions or recommendations supporting the strengthening of Federal EIA regulations. VS convened an EIA Discussion Group in 2015. Many group members showed enthusiasm to strengthen EIA control with the foundation being Federal regulations. They recognized that EIA test forms are an important form of equine identification and the lack of uniformity is problematic. Several prominent equine industry groups recently asked VS to consider a proposed EIA rule.

**Proposed Rule for EIA Control:** In light of the changing epidemiology of the disease and evidence of significant support, VS is again considering publishing a proposed rule for EIA control. The proposed rule would be performance-based and allow for changes without rulemaking or amending the CFR. The proposed rule would:

- Require a standard (12 months) EIA testing interval for all equine in interstate transit;
- Require use of the VS 10-11 test form or VS approved alternate forms that contain identical data fields;
- Require USDA Category II accreditation of veterinarians submitting samples;
- Require submission of all non-negative samples to National Veterinary Services Laboratories (NVSL);
- Centralize laboratory result and monthly data reporting to VS (and States);
- Clarify and standardize laboratory approval requirements; and
- Further define exposed equines to include epidemiological connections.

This regulation would codify existing EIA control practices, provide Federal authority, and provide comprehensive national standards. It would lay the regulatory groundwork and have flexibility for future control options based on epidemiology, diagnostic tests, or disease status. This proposed rule would negate certain interstate agreements allowing exemptions to testing and would supersede some State regulations with a more frequent testing interval.

**Nonregulatory solutions:** Are also being considered by VS to compliment the proposed EIA rule and to further strengthen EIA control.

*Please provide your feedback on the concepts in this document by December 31, 2016 to:*

vs.sprs.equine.health@aphis.usda.gov

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**Racing Quarter Horse - Equine Piroplasmosis**

Angela Pelzel- McCluskey, USDA-APHIS-VS

Since November 2009, more than 314,000 domestic U.S. horses have been tested for equine piroplasmosis (EP) through active surveillance and movement testing. To date, 331 EP-positive horses (321 *Theileria equi*-positive, 10 *Babesia caballi*-positive) have been identified through this surveillance. These positive horses are unrelated to the 2009-2010 *T.equi* outbreak on a Texas ranch where 413 positive horses were identified in connection with the outbreak and natural tick-borne transmission on the ranch was documented to have occurred over at least 20 years and has since been eradicated. Of the 331 positive horses identified through active surveillance, 280 were Quarter Horse racehorses, 13 were Thoroughbred racehorses, and 32 were horses previously imported to the United States before August 2005 under the complement fixation test. The epidemiology investigations conducted in all of these
cases have indicated no evidence of tick-borne transmission and the cases in racehorses specifically have involved iatrogenic transmission as the method of spread.

So far in 2016, 17,507 domestic U.S. horses were tested for EP with the identification of 68 horses positive for *T. equi*. Sixty-seven (67) were Quarter Horse racehorses and one horse was an Azteca mare suspected to have been illegally moved from Mexico. The Quarter Horse racehorses were participating in sanctioned racing, unsanctioned racing, or both and one of these horses was found to be dually infected with both *T. equi* and equine infectious anemia (EIA). The majority of these horses were found as clusters of positives associated with the same trainer and/or owner and epidemiology investigations conducted have implicated iatrogenic transmission (needle/syringe/IV equipment reuse, blood transfusions, contamination of multi-use drug vials, etc.) as the primary method of transmission in all Quarter Horse racehorse cases identified in 2016.

All EP-positive horses are placed under State quarantine and the horse owners are offered four options for long-term management under state/federal regulatory oversight: 1) lifetime quarantine, 2) euthanasia, 3) export from the country, or 4) long-term quarantine with enrollment in the APHIS-VS and ARS treatment research program. In February 2013, APHIS-VS established a policy to release horses previously infected with *T. equi* which had completed the official treatment program, been proven cleared of the organism by a series of methods over time, and were test negative on all available diagnostics. Of the 331 positive horses identified, 172 have either died or been euthanized, 19 have been exported, and 103 have been enrolled in the treatment program. Thirty-one (31) of the horses enrolled in the treatment program have met all of the test-negative requirements and have been released from quarantine. From the Texas ranch outbreak, 163 horses were enrolled in the treatment research program and have completed treatment with more than 140 horses having met all test-negative requirements and are eligible for release. Successful results from the treatment research program were previously reported by Ueti et al. in "Re-emergence of the Apicomplexan *Theileria equi* in the U.S.: Elimination of Persistent Infection and Transmission Risk" published in *PLoS One*, September 2012.

Given that the primary high-risk population for EP over the past several years has been determined to be limited to Quarter Horse racehorses, targeted surveillance in this population is critical to identifying positive cases quickly and mitigating further iatrogenic spread of the disease. While annual surveillance for EP was previously conducted at levels of approximately 75,000 horses per year in 2010 and 2011, surveillance numbers since that time have been dropping annually and now hover around 20,000 horses tested per year. Additionally, while there were once 11 states with EP test requirements to enter sanctioned racetracks in 2010, there are now only four states with an EP test requirement to enter tracks. This decline in surveillance testing in the high-risk population hinders the goal of early detection and is likely to lead to further disease spread over time. Additional industry support and involvement is needed at this juncture to: 1) increase EP surveillance in Quarter Horse racehorses and, 2) assist in educational outreach to prevent the poor biosecurity practices which have led to continued spread by iatrogenic means in this population.

**Vesicular Stomatitis Update**

Angela Pelzel- McCluskey, USDA- APHIS- VS

The 2015 vesicular stomatitis virus (VSV) outbreak in the United States occurred from April 29, 2015 to March 4, 2016. A total of 823 VSV-affected premises (New Jersey serotype) were confirmed or suspected in eight (8) U.S. states; Arizona (36 premises in 3 counties), Colorado (441 premises in 36 counties), Nebraska (38 premises in 10 counties), New Mexico (52 premises in 13 counties), South Dakota (50 premises in 7 counties), Texas (4 premises in 4 counties), Utah (56 premises in 8 counties), and Wyoming (146 premises in 10 counties).

The World Organization for Animal Health (OIE) removed vesicular stomatitis from the international list of reportable diseases as of January 1, 2015. APHIS-VS held a national-level VSV after-action review in January 2015 to review the response to the 2014 outbreak and to examine future VSV response actions in light of OIE’s delisting of the disease. Overall conclusions from the meeting included: 1) a VSV
control strategy is still needed to prevent movement of infectious animals and to secure both interstate and international trade during an outbreak; 2) VSV must remain reportable to State and Federal officials to implement this control strategy; and 3) while existing regulatory response protocols in cloven-hooved species must be maintained to rule out other diseases such as foot-and-mouth disease, response to equine cases can be appropriately modified to reduce the impact on State and Federal resources.

Based on these conclusions and other recommendations, USDA-APHIS-Veterinary Services (VS) and State Animal Health Officials (SAHOs) employed a modified response in the 2015 outbreak. New measures included a reduction in the quarantine period based on viral shed from affected animals, activation of VSV-approved NAHLN laboratories to assist in testing of affected equine species, and flexibility to use accredited veterinarians for sample collection in equine species and management of affected premises. Feedback from affected States on the modified approach was positive, especially with regard to the reduced quarantine period and the use of accredited veterinarians, both of which significantly reduced the impact on State and Federal resources while maintaining the necessary infection control strategy.

Although state and federal animal health officials were prepared to implement the successful response strategies employed in 2015 for a 2016 outbreak season, to date there have been no cases of VSV confirmed in the U.S. during the expected 2016 season.

Update on the National Animal Health Monitoring System (NAHMS) Equine 2015 Study
As of September 16, 2016
Josie Traub-Dargatz, Colorado State University and USDA-APHIS-VS, Center for Epidemiology and Animal Health

Study objectives for the NAHMS Equine 2015 study were developed based on the results of a needs assessment survey conducted in 2014. Summarized results are available at: http://www.aphis.usda.gov/nahms. The 28 states selected to participate in the study represented approximately 70% of equine operations and equids in the United States. NAHMS equine study results will be reported by region:

**Northeast:** Connecticut, Delaware, Maryland, Massachusetts, Michigan, New Jersey, New York, Ohio, Pennsylvania, Rhode Island, Wisconsin

**Southeast:** Alabama, Florida, Kentucky, North Carolina, Tennessee, Virginia

**South Central:** Arkansas, Kansas, Missouri, Oklahoma, Texas

**West:** Arizona, California, Colorado, Montana, Oregon, Wyoming

**Study Objectives:**
- Estimate the occurrence of owner-reported lameness and describe practices associated with the management of lameness.
- Describe health and management practices associated with important equine infectious diseases.
- Describe animal health related costs of equine ownership.
- Evaluate control practices for gastrointestinal parasites.
- Evaluate equines for presence of ticks and describe tick-control practices used on equine operations.
- Create a serum bank for future studies

**Phase I of study**
Representatives from the National Agricultural Statistics Service (NASS) administered the first questionnaire—which focused on general equine health and management practices—through in-person interviews with equine operators during May through July 2015. A total of 3,997 equine operations were selected by NASS for participation, of which, 2,612 were able to be contacted. Of those contacted, 1,920 (73.5%) completed the Phase I questionnaire.

Results of Phase I will be available in the report “Baseline Reference of Equine Health and Management, 2015,” which is currently being reviewed by the NAHMS technical editor. The report includes estimates on population, health management and events, diagnostic testing, biosecurity, and movement and disposition of equids removed from operations. Once finalized, the report will be posted on the NAHMS Web Site. In addition, a hard copy of the report will be sent to equine operators that
requested one during the NASS interview. A limited number of hard copies will be available upon request for other stakeholders.

**Phase II of study**

The start of Phase II was postponed until May 1, 2016, due to the USDA’s Veterinary Services’ mandatory response to the 2015 highly pathogenic avian influenza outbreak. Phase II data collection, with the exception of operator-submitted fecal samples to be used for parasite testing, will be completed by October 15, 2016. Participating operations were visited by veterinary medical officers or animal health technicians who administered an in-depth questionnaire, conducted a biosecurity assessment, performed equid tick examinations and collected biologic samples.

Of the 1,920 operations that completed Phase I of the study, 943 (49.1%) agreed to be contacted for participation in Phase II.

Preliminary information based on records entered into NAHMS database as of September 16, 2016:

**Questionnaire status**
- 264 operations have completed the Phase II questionnaire

**Biologics status**
- Serum bank–samples from 206 operations and 1,569 equids
- Tick examinations conducted on 167 operations and 1,109 equids—58 operations had one or more equids with ticks present; ticks from 178 equids were submitted for identification
- *Salmonella* testing–on 147 operations and 1,003 equids
- Biosecurity assessment–conducted on 177 operations
- Parasite testing (pre- and post-deworming samples tested)- conducted on 139 operations
- Complete sets of fecal samples for parasite testing (pre- and post-deworming) from 750 equids have been completed

**Acknowledgements**

I would like to thank the NASS study coordinator and the NASS enumerators who visited and collected data for Phase I of this study. In addition, I would like to thank the USDA-APHIS-VS and State personnel for their efforts in collecting questionnaire data and biologic samples for Phase II of the study, the NAHMS equine study team and others at NAHMS who contributed to the study, and the laboratory personnel involved in testing biologic samples. I would like to acknowledge that FDA’s Center for Veterinary Medicine provided funding for the portion of the study investigating internal parasites. A special thanks goes to the equine operations that participated in the study.

**Equine Disease Communication Center Update**

Bailey McCallum, Equine Disease Communication Center

The Equine Disease Communication Center (EDCC) works to protect horses and the horse industry from the threat of infectious diseases in North America. The communication system is designed to seek and report real time information about disease outbreaks similar to how the Centers for Disease Control and Prevention alerts the human population for diseases in people. Ultimately frequent and accurate information about disease outbreaks improves horse welfare and helps to prevent negative economic impact that can result from decreased horse use and transport due to a fear of spreading infection and enforced quarantine.

Working in cooperation with state animal health officials and the United States Department of Agriculture, the EDCC seeks information about current disease outbreaks from news media, social media, official state reports and veterinary practitioners. Once information is confirmed, it is immediately posted on the website [http://equinediseasecc.org](http://equinediseasecc.org) and an email message is sent to all states, horse organizations and the USDA. Daily updates are posted until each outbreak is contained or deemed no longer a threat. Facebook and Twitter are also used to communicate alert information.

Alerts and updates on current disease outbreaks are listed on the alert page [http://equinediseasecc.org/outbreaks.aspx](http://equinediseasecc.org/outbreaks.aspx) and include the date listed, disease name, location and current status (Figure 1). Specific premises are not named, but the general location by town, county and state is listed. When locations, events or horses are at risk they are to be listed. Updates are to be posted as they are received.
As part of the National Equine Health Plan one of EDCC’s goals is to provide information about endemic and foreign diseases. Links are available for specific information about diseases, vaccination, and biosecurity, and contact information for state animal health officials and the USDA are available on the website.

2016 Disease Cases Reported (as of October 3rd, 2016):
202 alerts posted since January 1st, 2016.
213 outbreaks reported since January 1st, 2016
- Eastern Equine Encephalitis: 62 cases reported (FL, SC, NC, VA, TN, NJ, LA, TX, NY, WI, MI)
- Equine Herpesvirus: 18 quarantines reported (TX, NM, NY, NE, WI, FL, MD, PA, VA, SC, IL, GA, CA, AZ, WA)
- Equine Infectious Anemia: 9 quarantines reported (CO, PA, FL, NY, OK)
- Equine Influenza: 2 quarantines reported (WV, CA)
- Piroplasmosis: 4 cases reported (NM, TN, UT)
- Potomac Horse Fever: 3 cases reported (FL, WV)
- Rabies: 4 cases reported (AZ, FL, OK)
- Strangles: 19 quarantines reported (FL)
- West Nile Virus: 92 cases reported (NV, NE, WA, OK, FL, MN, NY, CO, WI, ND, ID, CA, TX, UT, KY, OR, MT, KY, OH, Ontario-CAN, AZ, WV)

The IDOHC committee requested a budget outline of the EDCC to be presented at next year’s committee meeting.

American Horse Council Update,
Cliff Williamson, American Horse Council

The American Horse Council (AHC) is a Washington, D.C. based association that represents over 120 equine organizations before Congress and the federal regulatory agencies. AHC member organizations include breed registries, national and state equine associations, state horse councils, recreational associations, and organizations representing race tracks, horsemen, horse shows, veterinarians, farriers, rodeos, and other equine-related stakeholders.

The AHC also includes individual horse owners and breeders, veterinarians, farriers, trainers, professional, amateur, and recreational riders, and commercial suppliers. Individually, and through our organizational members, the AHC represents several hundred thousand horse owners and others involved in all sectors of the horse industry.

Current Efforts of the AHC

Obviously, a healthy horse is critical to the economic viability of the horse industry and the sporting, recreational, and social benefits it provides to the country. The AHC takes seriously its role in providing education for the equine industry. This ranges from providing news and legislative updates, to industry wide health initiatives such as the National Equine Health Plan and the development of new educational webinars. An important aspect of our efforts is our annual meeting, held in Washington D.C. Respecting the increased profile of equine health, the AHC has committed to expanding the time we dedicate to disease and health issues, including additional meeting time specifically for Health and Regulatory Committee discussions and a panel discussion focused on biosecurity efforts within the industry.

The American Horse Council’s Health and Regulatory Committee have participated in the development of comments for numerous USDA regulatory efforts and rule changes this year. The AHC commented on the APHIS EIA Discussion Group, the 2016 APHIS Equine Operational Plan, and OIE’s Working Equid Welfare Rule to name a few. The committee was also heavily involved in the industry’s contributions to the APHIS Administrator’s Sector meeting in the spring. The AHC has also reestablished connections with the National Institute of Food and Agriculture (NIFA) as well as the Agricultural Research Service (ARS) in an effort to promote and grow the opportunities for equine specific research.

The following are a few examples of the efforts the AHC are currently undertaking on behalf of equine health.

2017 Economic Study of the Horse Industry

According to the Economic Impact of the Horse Industry in the United States, a study done for the American Horse Council by Deloitte Consulting, LLC, the horse industry has an annual $102 billion impact
on the U.S. economy and supports 1.4 million jobs. There are 9.2 million horses in the U.S. 4.6 million Americans are involved in the industry, including nearly 2 million horse owners. Forty-five states have more than 20,000 horses; thirty-five states have more than 100,000. The industry is built on the agri-business of breeding, raising, training, and using horses.

The AHC is in the selection process for a 2017 economic impact study. It’s been ten years since the last study, which captures not only the economic effects of all the segments of the horse industry, but also provides invaluable demographic data and insights into the professions and related industries that are impacted by equine ownership. The study enables the equine industry to educate the public, the media and elected officials on the industry’s economic size, impact, and importance. The AHC has reached out to State Animal Health Organizations (SAHO’s), state horse councils, and veterinary schools in an effort to draw attention to the invaluable data that can be collected for their respective efforts. We are seeking pledges and contributions to fund the study presently and hope to begin work in spring 2017.

**Operation Gelding**

The Operation Gelding program provides materials, guidance, and support to organizations nationwide to host no- and low-cost gelding clinics for owners who may not otherwise be able to afford to have their stallion castrated. Unintentional breeding contributes to the unwanted horse population, with costs of more than $2,000 per horse to rescue facilities for the annual care of unwanted foals. Since 2010, 107 clinics, run by more than 300 volunteers, have been hosted in 29 states and have resulted in 1,348 stallions gelded.

The Unwanted Horse Coalition (UHC) received a $100,000 grant from the DeWitt Fund of the Community Foundation for Monterey County (CFMC) to support Operation Gelding. As a result of this grant, along with recent grants from the National Horsemen’s Benevolent and Protective Association and the American Association of Equine Practitioners, the number of stallions gelded will almost double by 2018.

The UHC will be seeking veterinarians who are willing to partner with organizations in their local areas to host a gelding clinic before September 2017. Guidelines for 2017 clinics will be available soon, and organizations can apply now for clinics to be held in 2016.

**Proposed Horse Protection Act Regulations (HPA)**

As many of you know, the U.S. Department of Agriculture’s (USDA), Animal and Plant Health Inspection Service (APHIS) has proposed changes to the regulations governing enforcement of the Horse Protection Act.

The AHC strongly opposes soring and believes action must be taken to stop the soring of "big lick" Tennessee Walking Horses, Racking Horses and Spotted Saddle Horses. However, the AHC is concerned that certain provisions of the proposed rule from APHIS-Animal Care are too broadly written, not sufficiently defined, and could cause confusion for the horse show industry. Like all industries, the horse show industry requires clarity in any regulatory regime that impacts its operation. Soring is a problem that is well defined and limited to a very specific segment of the walking horse industry and any new regulations should reflect this fact.

The AHC strongly believes USDA should explicitly limit all new provisions to Tennessee Walking Horses, Racking Horses, and Spotted Saddle Horses, mirroring the Prevent All Soring Tactics (PAST) Act. Making this change will address most concerns the horse industry has with the proposed rule and will fulfill the purpose and intent of the HPA.

The AHC wants to be clear, many of the proposed changes to the HPA regulations are needed, such as replacing the ineffective Designated Qualified Person (DQP) program with a new independent inspection program. Additionally, because of a long history of utilizing action devices, stacks, weighted shoes, and foreign substances to sore horses, a ban of these items on Tennessee Walking Horses, Racking Horses, and Spotted Saddle Horses is justified and needed.

However, the AHC believes it is equally important that any new regulations be narrowly focused on the problem of soring and do not inadvertently impact or unnecessarily burden other segments of the horse show industry that have no history of soring horses.

**Other AHC Activities**

In addition to its work important to the health and welfare of the industries’ horses the AHC continues its work on wide range of legislative and regulatory issues including taxes, immigration, public lands and agricultural policy that are important to the economic health of the industry.

**American Association of Equine Practitioners Update**

Grant B. Rezabek, Oklahoma State University
The American Association of Equine Practitioners (AAEP) reactivated the Infectious Disease Committee in the summer of 2016 to serve as a standing committee of the AAEP to be a partner and resource.

Subcommittees objectives for 2016 include:
- Support Equine Disease Communication Center (EDCC)
- Update and develop new Infectious Disease Control Guidelines
- Update and develop new resources for Biosecurity, working in collaboration with other industry stakeholders

The AAEP convention will be held December 3-7, 2016 in Orlando, Florida and state animal health officials (SAHOs) are encouraged to attend. There will be an in-depth Infectious Disease Management session on December 6th from 1:00-5:00 p.m.

Additionally, a standing committee of the AAEP is the Welfare Public and Policy Council. The following issues are being worked on by the committee:
- Soring Issues in Walking and Gaited horses
- Racing Medication
- Carriage Horse Industry
- Endurance Horse Riding
- Chuck wagon racing
- Double Decker trailers
- Lay teeth floaters

The AAEP is working collaboratively to address the health of the equine.

Serological Diagnostic of Antibodies Against *Borrelia burgdorferi* and Equine Herpesvirus Type 1 in Horses Using Multiplex Assays
Bettina Wagner, Department of Population Medicine and Diagnostic Sciences and Animal Health Diagnostic Center, College of Veterinary Medicine

Antibody detection in biological samples has been traditionally performed by different serological diagnostic assays. For example, the classical method for measuring antibodies against the Lyme pathogen *Borrelia burgdorferi* is ELISA followed by confirmatory Western blotting, while antibodies against equine herpesvirus type 1 (EHV-1) are mostly determined by serum neutralization testing. These assays typically use whole pathogens or pathogen extracts for total antibody detection. Serological multiplex assays allow the simultaneous quantification of antibodies to multiple analytes or antigens. Multiplex assays also offer improved analytical sensitivity, a wide linear quantification range, and can provide an assay matrix for antibody isotype differentiation. The Lyme Multiplex assay is based on three specific antigens of *B. burgdorferi*, called outer surface protein A (OspA), OspC and OspF, which are differentially expressed by the pathogen depending on the host and infection stage. The Lyme Multiplex assay provides quantitative results for antibodies to each of the Osp antigens in a single test run. Moreover, the results offer an advanced test interpretation that can distinguish between early and chronic infection, and can identify infection in vaccinated animals. The results can be used to make treatment decisions by considering the infection stage of the horse. They also allow a follow up on treatment success, evaluate the success of vaccination, and can help to identify severe outcomes of Lyme disease such as neuroborreliosis in horses. The new EHV-1 multiplex assay uses different glycoprotein antigens of EHV-1 for antibody detection. The assay has been validated against and highly correlates with EHV-1 serum neutralization testing. The EHV-1 multiplex assay allows for antibody isotyping and consequently can evaluate if ‘protective’ T helper 1 (Th1)-associated isotypes are dominating the immune response of a horse or if host immunity is shifted towards a Th2-associated antibody pattern. The assay can be used to accurately quantify antibodies against EHV-1 in serum of vaccinated or naturally infected horses. In summary, serological multiplex assays provide a new approach for quantitative antibody detection and offer an opportunity for advanced interpretation of humoral immunity in infected and vaccinated horses.

This work has been supported by the Harry M. Zweig Memorial Fund for Equine Research and by Assay Development Funds from the Animal Health Diagnostic Center at Cornell University.

Laboratory Quality Standards, Why Does it Matter?
American Association of Veterinary Laboratory Diagnosticians (AAVLD) Accreditation
Requirements: Version 2016-07
a. 36 Laboratories in U.S./Canada
b. Primarily State Agriculture or Academic (Veterinary Medicine or Veterinary Science Departments)
c. Evaluated critically on a variable cycle, constant re-evaluation and improvement, moving forward to uniform live-time reporting.
d. Meets standards of OIE ISO 17025 as a minimum to ensure international cooperation for movement

II. Demonstration of current OIE test recognition for important equine diseases: specific discussion on CEM and EIA testing.

III. Quality System/Quality Monitoring:
   a. The key feature of laboratory operation that ensures reliable, reproducible results.
   b. Includes a wide variety of policies including: ethics, confidentiality, document control, training, subcontracting, monitoring, test validation, test development, reporting results, etc.
   c. Specific example of monitoring refrigerators in an accredited laboratory environment.

IV. Description and definition of diagnostic test verification, testing by methods comparison and true test validation. Reported AAVLD requirements for test validation.

V. Reminder of the National List of Animal Reportable Diseases (NLRAD). Discussion of some changes affecting equine and that the program remains open for comment period.

Equine Disease Forum Summary
Katie Flynn, California Department of Food and Agriculture

The Equine Diseases Forum was held on January 19-21, 2016 in Denver, Colorado. The forum was a first-time event that brought together eighty-six (86) equine industry professionals, including equine organization leaders, veterinarians, representatives of equine health care companies and regulatory animal health officials, to gain a better understanding of equine disease issues. The objectives of this unique forum were to provide the latest updates on equine health disease threats, to identify potential solutions for addressing current equine health risks and to enhance equine industry communications on equine health issues. Through participation in this forum, State and Federal animal health officials gained unique insight to the equine industry's views on equine health, which will ultimately enhance communications and future collaborations about equine disease control. The Equine Disease Forum white paper, presentations and discussions can be found at http://www.animalagriculture.org/equineforum.

The following equine health challenges and concerns pertinent to regulatory officials were identified during the forum:

- The horse industry is recognized to be a diverse, multi-segmented industry. However, there is a lack of consistent and universal horse census and economic data about the horse industry, which is ultimately leading to a limited understanding of equine demographics in the United States.
- There are increasing threats of disease outbreaks due to movement and commingling of horses of unknown disease status. Depending on the disease agent involved, the impacts of a disease may include loss of use of the horse(s), death of affected horse(s), placement of restrictions on equine movements, costly treatment, impacts of implementation of additional biosecurity and preventative measures, trade implications, and other economic impacts.
- Current disease control measures are no longer adequate. Advancing equine health will require new methodologies, enhanced communications, and collaboration.
- Challenges faced by State Animal Health Officials (SAHOs) include an increased number of equine disease outbreaks, limited equine expertise of staff in some states, limited funding for equine programs, limited Federal authority for certain equine regulatory diseases of concern,
limited traceability of equines, and limited ability to efficiently communicate with all segments of the equine industry.

- The equine industry plays an important role in protecting equine health by being the eyes and ears of the equine population. When disease is observed, it is critical to contact State and Federal officials to make them aware of suspected reportable diseases and to alert animal health officials of equine industry concerns. Equine industry stakeholders, including horse owners and private practitioners, should engage with State and Federal officials to provide expertise, experience, and industry perspective at the local level; to obtain the latest information on equine regulatory disease information for dissemination; and to discuss best practices to protect equine health.

- To advance equine health, equine industry leaders can promote and practice biosecurity, educate fellow industry members about equine health issues, support Federal regulations to ensure consistent management of equine diseases across the U.S., and to implement industry-wide disease prevention measures.

- Primary equine health regulatory concerns include the limited ability to control disease (untested equine populations, illegal horse movements, lack of funding for testing and tracing, and lack of traceability which contribute to disease spread) and the inability to provide adequate outreach to the segmented equine industry (difficult to reach every horse owner, and the speed of social media vs. the speed of government agency outreach).

- During an equine disease outbreak, there is need for immediate transparency, notifications, clear guidance, and updated public information on the outbreak to enable informed decision-making at all levels.

- Biosecurity plans are not one-size fits all; there is a need for premises and event-specific plans to address identified risks. Horse owners and event organizers should work with their private practitioner and SAHOs to evaluate the risks on the premises in order to develop the most suitable infectious disease control plan for the premises or event.

- Equine traceability is a priority of the equine industry. The current identified traceability issues include a lack of traceability, lack of individual identification, and lack of documentation of movements. Movement requirements set by the state of destination vary from state to state, which leads to confusion and concern within the equine industry. The variation of enforcement of interstate movement regulations, due to decreasing state funding and personnel resources, also places the equine populations at risk for potential disease introduction and spread.

- The lack of a centralized database for microchip information is a current challenge for equine microchipping for identification. Presently there are various repositories for equine microchip data to include the microchip company, breed registries, discipline registries and private veterinary clinic records. The industry needs a mechanism for timely access to microchip data for tracing a diseased animal or reuniting a displaced animal with its owner after a natural disaster.

- Current interstate movement issues include determining the role and value of a health certificate dated within 30 days of movement to a horse being moved, the need for industry collaboration with compliance, incentive for the horse industry/owner to track horse movement, and how best to add value to a veterinary inspection (e.g., health certificate).

- Illegal movement of horses is of great concern to the equine industry. Specifically, horses illegally entering the U.S. from Mexico pose a significant disease risk for equine infectious anemia (EIA) and piroplasmosis, which are prevalent in Mexico. Additionally, risks for introduction of foreign animal diseases are posed when horses from other countries are routed through Mexico and enter the U.S. illegally (or sometimes even legally).

- Interstate movement documentation of horses is critical for traceability during a disease outbreak or natural disaster. However, the documentation is only as good as the accuracy of the information recorded. Current paper-based systems are often inefficient or ineffective for timely tracing of animals. Utilization of existing and future technology is necessary for advancing the traceability of the equine population in the U.S.

- The reliability of current serological tests performed on horses imported into the U.S. should be reviewed to confirm that they are optimal, based on their test associated characteristics (e.g., sensitivity and specificity), to ensure that test negative horses are free from disease at the time of temporary or permanent importation.
Attendees discussed next steps and action items for animal health officials and the various equine stakeholders to advance the health of the U.S. equine population. Highlighted below are suggestions for consideration by regulatory officials.

State Animal Health Officials

- States to solicit assistance from local equine industry stakeholders to identify and address the equine health issues of the industry and their regulatory importance.
- Potential feedback mechanisms for In-State communications include the State Veterinarian and state-level equine advisory committees/councils. Outreach mechanisms include newsletters, social media, disease reports and presentations.
- SAHOs can be more proactive in addressing influenza concerns by ensuring more reliable reporting of incidents so changes in number of cases can be documented.
- Each State to designate an equine subject matter expert, who can be the state point of contact for the equine industry.

Federal Animal Health Officials

- Development of Federal rule to address current deficiencies in the control Equine Infectious Anemia.
- Develop outreach to increase industry awareness of Equine Infectious Anemia and the current high risk populations in the U.S.
- Identification and evaluation of possible surveillance streams for Equine Infectious Anemia testing of the currently untested population in the U.S.
- Harmonization of performance horse import requirements by different countries is a work in progress. Facilities used for post-arrival quarantine in the U.S. should be reviewed for their ability to afford the opportunity to maintain adequate exercise of performance-fit sport horses while in quarantine.
- Federal communications should include industry feedback mechanisms and USDA output mechanisms. Output mechanisms include newsletters, social media, disease reports and presentations.
- Designate a Federal animal health official equine subject matter expert in each District as a point of contact for industry stakeholders and SAHOs.
- USDA to host State/Federal animal health official equine conference calls on a routine basis to discuss current equine regulatory health issues.

While the forum succeeded in bringing together experts from diverse backgrounds to discuss advancing equine health, participants and organizers understood that these efforts are an initial step forward and must lead to further dialogue and cooperative efforts to achieve the goals shared by the many stakeholders. National Institute for Animal Agriculture (NIAA) and USAHA will continue to provide leadership to establish a platform to facilitate collaborations for identifying and helping to implement solutions for advancing equine health in the future. A second Equine Forum focusing on Advancing Equine Identification and Traceability will be held in January 2017.

For additional information including the 2016 Equine Disease Forum White Paper and presentations visit [http://www.animalagriculture.org/equineforum](http://www.animalagriculture.org/equineforum)

State Veterinarian Equine Regulatory Survey Results

Katie Flynn, California Department of Food and Agriculture

In July 2016, state veterinarians were sent a survey regarding state equine regulatory health issues. The impetus for the survey was the concerns voiced by equine industry stakeholders during the 2016 Equine Disease Forum held in Denver, Colorado. Specific concerns were state variations in equine reportable diseases and equine interstate movement requirements; the lack of communication and collaboration by regulatory animal health officials with the equine industry; and the industry lack of understanding or knowledge of state regulatory authority. The survey objective was to obtain state-specific information on their equine reportable disease list, equine regulatory authorities, disease-specific testing requirements and methods, frequency of communications with equine stakeholders, and the extent of state animal health official collaboration with the equine industry.

The survey asked state veterinarians to categorize equine diseases of interest as Not Reportable, Reportable Actionable or Reportable Monitored. Forty-nine (49) states completed the survey; two (2)
states only responded Reportable or Not Reportable. Below is a summary table of the responses by disease.

<table>
<thead>
<tr>
<th>Reportable Disease</th>
<th>Not Reportable</th>
<th>Reportable Actionable</th>
<th>Reportable Monitored</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coronavirus Related Disease</td>
<td>37</td>
<td>1</td>
<td>6</td>
</tr>
<tr>
<td>Eastern Equine Encephalitis</td>
<td>0</td>
<td>14</td>
<td>18</td>
</tr>
<tr>
<td>Equine Herpes Virus-1 Abortion Cases</td>
<td>20</td>
<td>7</td>
<td>12</td>
</tr>
<tr>
<td>Equine Herpes Virus -1 All Cases</td>
<td>17</td>
<td>9</td>
<td>12</td>
</tr>
<tr>
<td>Equine Herpes Virus -1 Neurologic Cases</td>
<td>1</td>
<td>41</td>
<td>2</td>
</tr>
<tr>
<td>Equine Herpes Virus -1 Respiratory Cases</td>
<td>22</td>
<td>6</td>
<td>10</td>
</tr>
<tr>
<td>Equine Herpes Virus -1 Non Clinical Cases</td>
<td>24</td>
<td>4</td>
<td>12</td>
</tr>
<tr>
<td>Equine Infectious Anemia</td>
<td>0</td>
<td>42</td>
<td>0</td>
</tr>
<tr>
<td>Equine Influenza Virus</td>
<td>27</td>
<td>1</td>
<td>15</td>
</tr>
<tr>
<td>Equine Viral Arteritis</td>
<td>8</td>
<td>23</td>
<td>8</td>
</tr>
<tr>
<td>Equine Viral Arteritis Carriers</td>
<td>12</td>
<td>11</td>
<td>15</td>
</tr>
<tr>
<td>Leptospirosis</td>
<td>34</td>
<td>1</td>
<td>8</td>
</tr>
<tr>
<td>Lyme Disease</td>
<td>37</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>Pigeon Fever (Corynebacterium)</td>
<td>37</td>
<td>1</td>
<td>6</td>
</tr>
<tr>
<td>Potomac Horse Fever</td>
<td>32</td>
<td>6</td>
<td>11</td>
</tr>
<tr>
<td>Rabies Cases</td>
<td>1</td>
<td>35</td>
<td>5</td>
</tr>
<tr>
<td>Rhinovirus Infection</td>
<td>34</td>
<td>3</td>
<td>7</td>
</tr>
<tr>
<td>Salmonellosis</td>
<td>36</td>
<td>2</td>
<td>8</td>
</tr>
<tr>
<td>Strangles Carriers</td>
<td>36</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td>Strangles Cases</td>
<td>34</td>
<td>6</td>
<td>9</td>
</tr>
<tr>
<td>Vesicular Stomatitis</td>
<td>0</td>
<td>41</td>
<td>2</td>
</tr>
<tr>
<td>West Nile Encephalitis</td>
<td>4</td>
<td>7</td>
<td>24</td>
</tr>
<tr>
<td>Western Equine Encephalitis</td>
<td>2</td>
<td>14</td>
<td>18</td>
</tr>
</tbody>
</table>

These survey results illustrate the variation in state equine reportable disease lists, which was identified by the equine industry as a challenge. For example, strangles is not reportable in thirty-six (36) states, reportable actionable in six (6) states, and reportable monitored in eight (8) states.

To address the identified challenge of locating state equine reportable disease information, the individual state reportable disease survey data and link to the state reportable disease list was provided to the Equine Disease Communication Center (EDCC) (http://equinediseasecc.org/). The EDCC is an industry-funded initiative information resource for horse owners to obtain disease information and outbreak alerts.

The second parameter assessed in the survey was state equine regulatory authorities, more specifically, equine disease authority, equine welfare authority and equine facility registration or inspection authorities. As predicted, states have disease authority over equine entities in the state. However, non-disease authorities varied. For example, some state veterinarians have equine welfare authority and a few have registration or inspection authority for equine premises. The below table summarizes the non-disease authority of state veterinarians over equine entities.
The third parameter evaluated in the survey was State mode and method of communications. During the 2016 Equine Disease Forum, state animal health officials recognized the need for increased communication with the equine industry, however, the lack of state funding and personnel restrict their ability to meet these needs. The below table illustrates the number of states that update websites and social media sites when necessary, such as when an equine regulatory disease case is confirmed.

<table>
<thead>
<tr>
<th>Mode</th>
<th># states</th>
</tr>
</thead>
<tbody>
<tr>
<td>Website</td>
<td>48</td>
</tr>
<tr>
<td>Facebook</td>
<td>31</td>
</tr>
<tr>
<td>Twitter</td>
<td>26</td>
</tr>
<tr>
<td>Blog</td>
<td>9</td>
</tr>
<tr>
<td>Newsletter</td>
<td>17</td>
</tr>
<tr>
<td>Email Distribution Veterinarians</td>
<td>40</td>
</tr>
<tr>
<td>Email Distribution Industry</td>
<td>30</td>
</tr>
</tbody>
</table>

Communication is key to addressing equine regulatory issues. As evidenced by the survey, states are utilizing various methods to communicate with the equine industry.

The fourth parameter evaluated by the survey is industry and regulatory collaboration. One recommendation from the 2016 Equine Disease Forum was for states to solicit assistance from local equine industry stakeholders to identify and address the equine health issues of industry and their regulatory importance. The survey indicates sixteen (16) states currently have an equine industry advisory board/council/committee to seek input from on equine regulatory health issues for the state.

<table>
<thead>
<tr>
<th>Mode</th>
<th>None/NA</th>
<th>Welfare Authority</th>
<th>Required Registration with State</th>
<th>SAHOs routine visits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Racetracks and Affiliated Facilities</td>
<td>13</td>
<td>11</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>Rodeos and Rodeo Type Events</td>
<td>4</td>
<td>14</td>
<td>1</td>
<td>8</td>
</tr>
<tr>
<td>Public Equine Events</td>
<td>3</td>
<td>15</td>
<td>3</td>
<td>11</td>
</tr>
<tr>
<td>Equine Rescues</td>
<td>9</td>
<td>19</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Equine Boarding Facilities</td>
<td>8</td>
<td>15</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Equine Breeding Farms</td>
<td>7</td>
<td>15</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Public Equine Auctions</td>
<td>3</td>
<td>19</td>
<td>23</td>
<td>30</td>
</tr>
<tr>
<td>Equine Veterinary Clinics</td>
<td>12</td>
<td>13</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>EIA USDA Approved Labs</td>
<td>13</td>
<td>3</td>
<td>15</td>
<td>6</td>
</tr>
<tr>
<td>Laboratories Performing Equine Diagnostics Tests</td>
<td>25</td>
<td>2</td>
<td>4</td>
<td>2</td>
</tr>
</tbody>
</table>
Additionally, the Forum participants recommended states designate an equine subject matter expert to be the industry point of contact in the designated state. The survey reveals that currently sixteen (16) states have a designated equine veterinarian or specialist to handle all equine issues.

The last parameter addressed by the survey was state testing requirements for equine infectious anemia, equine viral arteritis, and equine piroplasmosis. The below chart outlines the equine infectious anemia state test requirements.

<table>
<thead>
<tr>
<th>Test Requirements</th>
<th># of States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intrastate testing</td>
<td>20</td>
</tr>
<tr>
<td>Change of Ownership testing</td>
<td>21</td>
</tr>
<tr>
<td>6-month entry</td>
<td>4</td>
</tr>
<tr>
<td>12-month entry</td>
<td>44</td>
</tr>
<tr>
<td>Semen/Embryo import</td>
<td>1</td>
</tr>
<tr>
<td>TB Tracks</td>
<td>23</td>
</tr>
<tr>
<td>QH Tracks</td>
<td>18</td>
</tr>
<tr>
<td>Public Events/Exhibition</td>
<td>30</td>
</tr>
<tr>
<td>Public Assembly or comingling points</td>
<td>22</td>
</tr>
<tr>
<td>Boarding or Breeding Premises</td>
<td>12</td>
</tr>
</tbody>
</table>

Four (4) states currently require equine piroplasmosis testing for entry to racing Quarter Horse tracks. One (1) state requires equine viral arteritis (EVA) testing for stallion import, four (4) states require EVA test for semen import into the state, and one (1) state requires EVA test for breeding premises. The 2016 Equine Disease Forum participants voiced concern about the increased incidence of EP in racing Quarter Horses and EVA in the general equine population. Based on the survey result, there is limited required surveillance testing of equine for movement purposes.

In summary, the survey validates the concerns raised by the industry stakeholders during the 2016 Equine Disease Forum. Advancing equine health will require further State Veterinarian communication and collaboration at the local, state and national level.

The Role of Animal Health Officials in Equine Biosecurity
Katie Flynn, California Department of Food and Agriculture

The Equine Herpes Virus-1 (EHV-1) outbreak, associated with the Western National Cutting Horse Event in Ogden, Utah in May 2011, increased awareness and need for biosecurity measures at equine events. Biosecurity practices are those measures intended to prevent the introduction and spread of infectious disease agents on a premises. As demonstrated by the 2011 EHV-1 Outbreak, an infectious disease incident can have devastating effects on the horse industry. Based on lessons learned from this incident, the horse industry has taken great strides in highlighting the need for enhanced biosecurity.

Although there are overarching general principles of biosecurity for equine facilities, a unique detailed biosecurity plan should be tailored to each individual premises and event. There is no one-size fits all plan since each horse and each premises have unique disease risks. Additionally, the saying “the devil is in the details” is extremely true for a biosecurity plan. A biosecurity plan is only as effective as the weakest link. For example, a very detailed plan may require all grooms to wash their hands after handling each group of horses. If nine (9) of the ten (10) grooms wash their hands, but one (1) does not, then the individual not following the plan can introduce and spread a pathogen.

The good news is there is a heightened awareness of the impact of disease outbreaks and the need for prevention. The industry is now embracing the need for biosecurity and industry leaders are sharing
the message and providing new resources and tools for biosecurity. Advancing equine health through the implementation of biosecurity relies on collaboration and communication among all stakeholders, including state animal health officials. The United States Equestrian Federation (USEF) took the first step. Effective December 1, 2017, all USEF competitions must have an equine isolation protocol in place. The ultimate goal would be for competitions to have a complete biosecurity plan that centers on the isolation protocol. Additionally, USEF is encouraging event management and event veterinarians to consult with the state animal health officials before an event to obtain input and feedback. It is therefore important for state animal health officials to promote key biosecurity concepts when being contacted as a resource for biosecurity information.

There are numerous biosecurity measures that can be implemented to prevent disease introduction and spread. However, the following key concepts should be at the core of all plans:

- Monitoring the health of the horses
- Isolating all sick animals
- Limiting horse-to-horse contact
- Limiting horse-to-human contact
- Avoid sharing of equipment
- Avoiding use of communal water troughs.

Application of these biosecurity concepts with a horse health management program focusing on vaccination, cleaning and disinfecting, parasite control and vector control will advance the health and protection of the equine population.

The internet has a wealth of biosecurity resources available for the horse industry. State Animal Health Officials (SAHOs) can promote biosecurity by directing individuals to reputable sites for more information. The Equine Disease Communication Center (EDCC) (www.equinediseasecc.org) site biosecurity tab has the majority of the biosecurity resources and is destined to be the one-stop shop site of the future. Below is a list of additional websites which contain brochures, guidelines, and videos on the subject.

**Horse Owner Biosecurity Resources**

- USDA-APHIS Info Sheet
- Equine Biosecurity Risk Calculator (Equine Guelph)
- Equine Biosecurity Principles and Best Practices Guide (Alberta Veterinary Medical Association and Alberta Equestrian Federation)
- Biosecurity On The Road Article (The Horse.com)
  - http://www.thehorse.com/free-reports/30235/biosecurity-on-the-road
- Infographic: Protecting Your Horse From Disease

**Biosecurity Videos**

- www.thehorse.com videos
  - Choosing a Disinfectant for Barn Use
  - Stall Cleaning and Disinfection Part 1
  - Stall Cleaning and Disinfection Part 2
  - How to clean/disinfect Horse Equipment
  - How to Clean and (not quite) Disinfect Leather
  - How to Clean/Disinfect Water Buckets and Troughs
  - How to Quarantine a New Horse
- Biosecurity Tips for Horse Farms- Dr. Scott Weese
- Infectious Diseases and Biosecurity Lecture by Dr. Paul Morley

**Premises Level Biosecurity**

- Biosecurity Guidelines – American Association of Equine Practitioners
- Basic Equine Facility Biosecurity for Horse Owners and Horse Professionals
Ultimately, the roles of the state animal health official in fostering equine biosecurity are collaboration and communication. Industry-wide acceptance and implementation of biosecurity measures will assist in controlling and preventing equine diseases of regulatory importance.

Committee Business:
Committee business session included discussions on the continuance of subcommittees, the USDA-APHIS-VS National Reportable Animal Disease List, and the Emergency Animal Disease and Preparedness and Response Plan.

Three resolutions and two recommendations were presented.

RECOMMENDATION 1:
EQUINE IDENTIFICATION FORUM FOR EQUINE INDUSTRY STAKEHOLDERS
BACKGROUND INFORMATION:
In light of recent disease outbreaks and industry traceability challenges, equine identification and traceability has been the topic of industry interest. During the 2016 Equine Disease Forum, co-hosted by the USAHA and the National Institute for Animal Agriculture (NIAA), the audience of industry stakeholders proposed hosting a forum to discuss ways to advance equine identification and traceability.

RECOMMENDATION:
The Infectious Diseases of Horses Committee requests the United States Animal Health Association (USAHA) Executive Committee co-host with the National Institute of Animal Agriculture (NIAA) an Equine Identification Forum for equine industry stakeholders.

RECOMMENDATION 2:
NATIONAL EQUINE DISEASE COMMUNICATION CENTER
BACKGROUND INFORMATION:
The United States horse industry is unique in the livestock sector for its broad diversity of activities in all regions of the country and the world. Horses involved in business, sport, recreation, entertainment, gaming, and environmental support add to the agribusiness economic engine. In addition to an annual economic impact of over $102 billion, the equine industry produces other public benefits, including recreation, exercise, working animals, stress reduction and entertainment.

The horse industry is at continuous risk of a disease outbreak of such proportion as to widely imperil the health of horses and threaten the economic viability of the industry. The economic burden of equine disease outbreaks may include costs incurred associated with movement restrictions, enhanced testing, disease-specific treatment requirements, cancellation of equine events and equine mortality. Effective management of equine infectious disease incidents requires preplanning and communication between all entities involved in monitoring and protecting horse health, including individual owners, venue managers, industry associations, State Animal Health Officials (SAHOs) and United States Department of Agriculture, Veterinary Services (APHIS-VS). A June 2010 Impact of Equine Diseases workshop, co-hosted by VS and the American Horse Council (AHC), highlighted the need for the equine industry to have a comprehensive national equine health plan (NEHP) outlining the prevention, diagnosis and control of equine infectious disease and the responsibilities and roles of the APHIS-VS, SAHOs, practicing veterinarians and individual horse owners. The AHC subsequently developed a NEHP framework document. One part of the NEHP is the need for a comprehensive national Equine Disease Communication Center (EDCC) for providing accurate, real-time information on equine infectious diseases to regulatory officials and all segments of the industry to control disease and optimize equine health. The American Association of Equine Practitioners (AAEP) in conjunction with the AHC devised a plan and initiated creation of the infrastructure for an EDCC. In January 2016, the EDCC became fully functional with a website and call in number. Between January 1 and August 1, 2016, there have been 123 disease alerts posted regarding 77 disease outbreaks. SAHOs have supported the EDCC by
providing notification of confirmed disease cases in their states. For the EDCC to be effective, continued communication and collaboration between VS, SAHOs and the horse industry is essential.

**RECOMMENDATION:**

The Committee on Infectious Diseases of Horses requests the United States Animal Health Association (USAHA) Executive Committee to consider a nominal sponsorship of the EDCC to demonstrate SAHO acknowledgement of the importance of the EDCC.