BACKGROUND INFORMATION:

Classical Swine Fever (CSF) is a highly contagious and economically significant viral disease of pigs. The severity of the illness varies with the strain of the virus, the age of the pig, and the immune status of the herd. Acute infections, which are caused by highly virulent isolates and have a high mortality rate in naive herds, are likely to be diagnosed rapidly. Infections with less virulent isolates, however, can be more difficult to recognize, particularly in older pigs. The range of clinical signs and similarity to other diseases can make classical swine fever challenging to diagnose.

The United States Department of Agriculture (USDA), Animal and Plant Health Inspection Services (APHIS) now has funding to use the tonsil as part of a routine surveillance program to detect CSF and is offering incentives to encourage practitioners to submit samples for surveillance.

Tests using the tonsil have been developed by the Foreign Animal Disease Diagnostic Laboratory (FADDL) at USDA’s Plum Island Animal Disease Center to aid in detection and diagnosis of CSF. USDA’s *Classical Swine Fever (CSF) Surveillance Procedure Manual* includes tonsil, tonsil scrapings, and nasal swabs as appropriate samples for CSF detection if collected and submitted properly. As an incentive for producers and veterinarians to submit tonsils, the USDA will credit the submitter with 50 dollars to be applied to the diagnostic workup for cases tested by one of the following National Animal Health Laboratory Network (NAHLN) laboratories: Arizona, California, Florida, Georgia, Iowa, New York, North Carolina, Texas, or Washington.
The National Pork Board (NPB) and the Swine Health Information Center (SHIC) have funded a negative cohort study to validate CSF nucleic acid detection by Polymerase Chain Reaction testing performed on swine oral fluids. The NPB, the SHIC, and USDA are funding the positive cohort study needed to complete the validation of oral fluid testing.

The Iowa State University Veterinary Diagnostic Laboratory reports that outside of the USDA CSF surveillance testing, over the past 5 years only 383 diagnostic tests were performed on porcine tonsils submitted with the approximately 50,000 diagnostic case investigations into clinically ill swine that involved the submission of a case history and tissues for histopathological evaluation by a diagnostic pathologist.

In the absence of an effective surveillance program that includes official CSF testing of tissues routinely submitted to the NAHLN laboratories for diagnostic case investigations, low virulence CSF strains may become widespread before detected.


The State pork producer associations of Arizona, Colorado, Florida, Hawaii, Illinois, Indiana, Iowa, Kansas, Kentucky, Michigan, Minnesota, Missouri, Mississippi, Montana, Nebraska, New York, North Carolina, Oklahoma, Ohio, Pennsylvania, South Dakota, Texas, and Wisconsin recognize the need for an effective CSF surveillance program as a key element for protection of the United States swine herd. To ensure effectiveness, they support the approval of additional tissues for official CSF testing.

RESOLUTION:

The United States Animal Health Association and the American Association of Veterinary Laboratory Diagnosticians urge the United States Department of Agriculture, Animal and Plant Health Inspection Service to approve tonsil, spleen, and lymph nodes as additional tissues for official Classical Swine Fever testing in the National Animal Health Laboratory Network laboratories.

INTERIM RESPONSE:

USDA, APHIS, Veterinary Services (VS), recognizes the concerns of USAHA and appreciates the opportunity to respond. VS approved spleen as an additional tissue for CSF testing in foreign animal disease investigations (FADIs) in NAHLN laboratories on December 10, 2018, and lymph nodes for CSF testing in FADIs on January 31, 2019. Tonsil has historically been the preferred sample for CSF testing in NAHLN. Along with tonsils, APHIS recently added spleen and lymph nodes as recommended sample types for FADIs, particularly for ASF and CSF.