

# Equine HEALTH REPORT

A National Institute for Animal Agriculture Publication

Spring 2007

## EHV-1: Evolving, Changing in Virulence, Behavior?

Over the last two years the occurrence of Equine Herpes Virus Type 1 (EHV-1) has risen dramatically and has caused some equine disease scientists to wonder if the disease is 'evolving and changing in virulence and behavior.'

Specifically, 11 outbreaks of neurologic EHV-1 were reported during 2006. The latest incident involved a group of 15 horses imported in late November from Germany through a federal quarantine site in New York and shipped to eight states.

While under quarantine at the New York Animal Import Center, the 15 horses from Germany were tested for diseases as required and listed in the Animal and Plant Health Inspection Service's (APHIS) regulations. One horse developed a fever while under quarantine and was treat-

ed by a clinician following appropriate protocol. When treatment was concluded and the horse no longer exhibited a fever or any other clinical signs of infectious disease, it was released.

Five of the imported horses were shipped to Florida and unknowingly carried the virus to horses they were commingled with. By the end of January, six horses in Florida died from the disease and 12 others recovered with treatment. Diagnosis of the outbreak in Florida was confirmed based on samples submitted to laboratories at the University of Kentucky. State authorities in Florida quickly placed quarantine on 10 premises and closely monitored the outbreak.

One of the original 15 imported horses was shipped to California where it died shortly after arrival due to the neurologic form of EHV-1.

The state veterinarians of Massachusetts, New Hampshire, Rhode Island, Pennsylvania, Kentucky, North Carolina and South Carolina were notified that horses imported from Germany and exposed to EHV-1 had been shipped to their states. The exposed horses were quarantined and monitored for EHV-1 signs. No clinical cases were reported among those horses.

Laboratory test results in Florida have confirmed no new cases of EHV-1, and the last quarantine was lifted in Florida in late January.

In addition to Florida and California, states reporting neurologic EHV-1 outbreaks in 2006 include Colorado, Georgia, Maryland, Michigan, New Jersey, Pennsylvania, and Wisconsin.

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### Information Sources on EHV-1

An "Equine Herpes Virus Myeloencephalopathy: A Potentially Emerging Disease" Info Sheet, published January 2007, states that the "current EHV-1 outbreaks are of concern because they likely fit the criteria of a disease that is evolving and changing in virulence and behavior. It is possible that the disease has not changed in incidence or character, and that testing and/or reporting has been increasing awareness or that the animals affected are a higher profile, causing more interest. However, it is not possible at this time to make this distinction."

The Info Sheet also notes "reports of neurological EHV-1 have increased in recent years. This may be attributable to a strain of EHV-1 with a mutation that encodes for a particularly robust replicase enzyme. The result of this mutation is that the

virus can reproduce rapidly with a predilection for nervous tissue, therefore the viremia occurs earlier, it reaches a higher peak, and it lasts longer."

The complete four-page "Equine Herpes Virus Myeloencephalopathy: A Potentially Emerging Disease" Info Sheet is available through APHIS Veterinary Services. APHIS Veterinary Services has also developed a brochure, "BioSecurity—The Key to Keeping Your Horses Healthy" that can be found at [www.aphis.usda.gov/lpa/pubs/HorseBioSecurity\\_final.pdf](http://www.aphis.usda.gov/lpa/pubs/HorseBioSecurity_final.pdf). Another resource to equine veterinarians who are members of the American Association of Equine Practitioners is "Equine Infectious Diseases Outbreak: AAEP Control Guidelines."

## EHV-1: Evolving (cont'd from page 1)

In January of this year, two California horses not from the original import group—a thoroughbred and a stable pony—died from EHV-1, and an aborted fetus tested positive for EHV-1. The mare that aborted the fetus and five other horses at the racetrack tested negative for the virus.

During January of this year, another two horses in Jefferson County, Wisconsin displayed neurologic signs of EHV-1 and were confirmed positive for EHV-1. The two horses—one of which tested negative for the virus were euthanized.

### The Disease, Treatment

EHV-1, also known as “rhino,” is among the most costly to the equine industry. The contagious virus is unique in its ability to target and attack three separate organ systems of the horse: respiratory, reproductive and central nervous system. The virus spreads rapidly from horse to horse via infected droplets in the air, on facility surfaces, fences, buckets and a common water source. The virus can also spread as a result of droplets being carried on feed, clothes, boots, jackets, and humans.

“The clinical outcome of EHV-1 infection that carries the most dramatic negative consequences for the welfare of horses is the dreaded neurological disease,” states Dr. George Allen, Gluck Equine Research Center, University of Kentucky, Department of Veterinary Science, Lexington, Ky. “Once regarded as a rare and sporadic occurrence, EHV-1 has been observed with increasing and alarming frequency.”

Common to all horses with EHV-1 associated central nervous system disease are a weakness and paralysis of the muscles of the hind limbs that lead

## NAIS a Valuable Tool During Blizzard Recovery

Although the National Animal Identification System (NAIS) was designed for disease surveillance and trace back, its application was broadened during back-to-back holiday storms that stranded thousands of

animals on open range in Colorado, Wyoming, Kansas, and Nebraska as well as the Oklahoma and Texas Panhandles.

Blizzard I began Dec. 20 and was the fourth largest storm in Colorado recorded history. The blizzard engulfed the central High Plains and adjacent Rockies, dumping up to 32 inches in places. Blizzard II struck a week later and dropped a swath of heavy snow from New Mexico through Colorado and on to North Dakota. Severe wind and snow conditions resulted in 10-foot drifts.

The Colorado Department of Agriculture’s State Veterinarian’s Office realized the severity of these consecutive storms and concluded that starvation and dehydration were real possibilities and required addressing. That’s when the office turned to a state held list of premises that had been registered in a voluntary program.

“When a voluntary premises registration program was initiated, some people viewed it as part of a disease trace-back system, but I saw this as a tool to help farmers and ranchers trapped in an animal health crisis,” states Colorado State Veterinarian John Maulsby. “The storms became an animal health issue when animals did not have access to feed and help

might be needed to keep animals alive.”

Dr. Maulsby says the state veterinarian’s office focused its efforts on a particularly hard-hit six-county area. This area had about 350 voluntarily registered premises: beef, dairy, sheep and horses.

“About four hours of phone calls were placed directly to ranchers in southeast Colorado to evaluate the safety of those ranchers’ families and the well being of Colorado livestock during the recent blizzard recovery operation. Our access to this list of premises made this process possible,” Dr. Maulsby says. “Information on file gave us access to phone numbers, names and livestock information, and this information was used with strict confidentiality.”

Dr. Maulsby explains that the phone calls helped to determine if the animals had access to feed. If help was wanted, help was given.

“Having direct access to livestock owners gave us the opportunity to quickly assess the situation,” states Colorado Division of Emergency Management Director George Epp. “Protecting the health of Colorado livestock is a top priority to this operation, and the list of registered premises was a big help.” ●



### Equine Health Report

Spring 2007

Equine Health Report provides the latest information on issues pertinent to equine health initiatives, strategies, research and regulatory action. It is a communications initiative of the NIAA Equine Health Committee and is produced in cooperation with USDA-APHIS. Reprinting is encouraged.

For a free subscription, send your name and mailing address to NIAA at:  
1910 Lyda Avenue

Bowling Green, KY 42104-5809  
ph: 270-782-9798 fax: 270-782-0188  
e-mail: [NIAA@animalagriculture.org](mailto:NIAA@animalagriculture.org)  
Web site: [www.animalagriculture.org](http://www.animalagriculture.org)

to incoordination, gait abnormalities and the inability to rise from the sitting position. The neurological deficits, Dr. Allen explains, result from a thrombotic, ischemic inflammation of small blood vessels in the spinal cord and/or brain.

The interval between initial EHV-1 infection of the respiratory tract and the subsequent onset of neurological signs is 8 to 12 days. The neurological deficits appear suddenly and reach their peak intensity within 48 hours.

While no specific treatment is available for EHV-1, Dr. Judy Marteniuk, equine extension veterinarian, College of Veterinary Medicine, Michigan State University, says that supportive therapy—IV fluids and bladder catheterization and nursing care—keep horses quiet, minimize stress—are extremely important to an animal's survival. Anti-inflammatory agents can be used to minimize dam-

age to the spinal cord.

The Merck Veterinary Manual notes that "intensive care is necessary to avoid pulmonary congestion, pneumonia, ruptured bladder or bowel atony."

In an Ohio outbreak in 2003, Acyclovir—a human drug used in the treatment of herpes infections—was used and continues to be used with some success. "Another human drug that has been receiving significant focus," Dr. Marteniuk says, "is Valacyclovir (Valtex)."

Recovery for horses that survive EHV-1 can take several months. And, while recumbent horses may survive, they may have some degree of neurological deficit. The prognosis for animals that remain down for longer than 24 hours is poor. Horses at risk of contracting the virus include the young, the old and the immune challenged as well as horses that are stressed or

exposed to an EHV-1-infected horse.

Horses can shed the EHV-1 virus from the onset of clinical signs until one to two weeks after the clinical signs are no longer present. A 21-day quarantine period following clinical signs of the disease is recommended.

Although horses can be vaccinated against EHV-1, vaccination does not directly protect against the neurological form of the disease.

"EHV-1 is deeply entrenched within the world's horse population as apparent, latent infections—silent carriers," Dr. Allen states. "The capacity of EHV-1 to persist in the body of the horse in a dormant but potentially reactivatable state after recovery from a primary infection provides an inexhaustible and globally distributed biological reservoir of the virus for continuous transmission of infection among adult horses and to new generations of young horses." ●

## Bio-security Measures Recommended for Control of EHV-1

Guidelines developed by the American Association of Equine Practitioners (AAEP) states that horses exposed to EHV-1 and those showing clinical signs should be confined to a stall or moved immediately to a separate facility. Non-porous buildings are highly desirable for quarantine and management.

Disease surveillance includes taking the temperatures of suspected animals at least twice daily and logging temperatures. Horses with fevers greater than 101.5° F should be reported to the stable veterinarian. Suspect horses should be isolated, and the veterinarian should obtain whole blood (EDTA tube) and nasal swab samples for PCR testing. Anyone suspecting a horse to have EHV-1 should report the case to the state veterinarian's office immediately.

Steps to limit the spread of the disease include:

- Assign specific individuals to care for affected horses.
- Use personal protection equipment: gloves, booties, tyvek suit.
- Dispose of covering or clothing in a lidded trash receptacle after handling a sick horse. If items are not disposable, place in a container and wash daily with laundry detergent and fully dry.
- Wash hands under running water with soap for 15 seconds. Follow with 62 percent ethyl alcohol hand gel or foam disinfectant.
- Place footbaths and hand sanitizers at all primary perimeter access points.
- Prevent all contact between horses.
- Do not allow horses to share water sources; clean buckets daily.
- Do not submerge hoses in water buckets.
- Do not place manure and bedding in open air.
- Decontaminate carts and wheelbarrows between stalls or use separate containers. Do not spread manure on pastures.
- Do not share equipment. Shared equipment should be scrubbed and disinfected between use.
- Launder and dry all cloth materials.
- Do not share medications among horses, and wash hands after treating each horse.
- Clean surfaces by wetting them down without spraying. Scrub with brush and powdered laundry detergent or Dawn dish detergent. Let stand for 10 minutes. Rinse with running water—no spray. Squeegee and allow to dry.
- Clean all aisles and common areas twice daily.
- Clean all trailers and wooded barns.

"The guidelines used in the Florida outbreak were developed using information and assistance from the University of Florida, College of Veterinary Medicine, the AAEP and the Gluck Research Center in Kentucky," states Dr. Michael Short, DVM, equine program manager, Florida Department of Agriculture and Consumer Services, Division of Animal Industry.

## Equine 2005 Study:

- 2,893 equine operations interviewed July and August 2005
- 28 states representing 78.0 percent of equids and 78.6 percent of operations with five or more equids in the United States
- More than 95 percent of operations had full-size horses
- 34.8 percent had equids other than horses: donkeys, burros, mules, ponies and miniature horses
- 40.3 percent identified their primary functions as "farm/ranch"
- 37.0 percent identified their primary function as "residence with equids for personal use"
- Resident equid was defined as an equid that spent or was expected to spend more time at the operation than at any other operation, whether or not it was present at the time of the interview
- West region: California, Colorado, Montana, New Mexico, Oregon, Washington and Wyoming
- Northeast region: New Jersey, New York, Ohio and Pennsylvania
- South region: Alabama, Florida, Georgia, Kentucky, Louisiana, Maryland, Oklahoma, Tennessee, Texas and Virginia
- Central region: Illinois, Indiana, Kansas, Michigan, Minnesota, Missouri and Wisconsin
- Large operations, 20 or more equids; medium operations, 11 to 19 equids; and small operations, five to nine equids

## Equine 2005: Equine Biosecurity, Biocontainment Practices

Contact with other animals. Insect control. Manure management. Non-resident equids. These are just four biosecurity and biocontainment areas studied during Equine 2005 and reported in a recently released APHIS/VS Info Sheet "Equine Biosecurity and Biocontainment Practices on U.S. Equine Operations."

During Equine 2005, National Animal Health Monitoring System (NAHMS) personnel collected data regarding measures that can reduce the risk of disease *introduction* on an operation and measures that can reduce the *spread* of disease on an operation and from one operation to another. Equine 2005 found that, overall, 65.1 percent of operations separated animals for isolation or infection control. Large operations separated animals for isolation and infection control more often than medium and small operations. Large operations were also more likely than small operations to restrict the movement of personnel working with isolated animals.

When it came to visitor biosecurity measures, one out of four operations required people coming onto their facility to practice some form of infection control. The most common control measure was cleaning and disinfecting hands, with 15.9 percent of operations employing this method. Other biosecurity visitor measures practiced included using separate equipment or disinfecting equipment, 14.0 percent; requiring visitors to park vehicles away from animal areas, 11.7 percent; disinfecting or changing boots, 9.2 percent; changing clothes or wearing clean overalls, 6.7 percent; and "other," 1.1 percent.

Dogs and cats were found to have direct contact with resident equids on 76.9 percent of the operations while they had contact with equid feed on 66.4 percent of operations. While wildlife can be an important potential source of disease, skunks, opossums, raccoons and bats were found to have contact with equids or their feed on

25 percent to 50 percent of operations.

Approximately nine of 10 operations fed equids grain concentrate or energy sources other than hay during the 12 months preceding the study. The majority of the grain/concentrate, 79.1 percent, was purchased in bags from a retail source, leading to concern regarding bags having a layer of protection against possible contamination by outside sources. More than 85.0 percent of operations stored grain/concentrate in a manner that prevented fecal contamination by mice, rats, domestic and wild birds, livestock, dogs, cats and other wildlife.

While more than three-quarters of those interviewed used a well or municipal water as the main water supply for equids, 18.1 percent of operations used surface water such as a pond, river, stream or cistern as a water source. These water sources raise concern, as they can result in disease exposure due to difficulty in controlling water quality.

Insect control was practiced by nearly nine out of 10 operations, and almost three out of four operations relied on applied repellents. Insecticides were applied in or near equine housing areas on slightly more than one out of three operations and slightly more than one out of four operations used equine face masks.

More than half of those interviewed emptied and refilled water containers with fresh water at least weekly as well as frequently removed manure and weeds from their operations.

The highest percentage of operation, 42.0 percent, disposed of manure by spreading it over land on the operation where no livestock graze. A slightly lower percentage of operations, 37.2 percent, applied manure where livestock graze. Categories were not mutually exclusive, and some operations used more than one method of manure disposal.

Allowing manure to accumulate

or let nature take care of it was a common practice in about one out of three operations. Other practices such as selling or giving away manure or hauling it somewhere other than a landfill were more commonly used by large operations than small operations.

### Introduction of Equids On, Off the Operations

Transmitting viruses and bacteria between resident and non-resident equids is a real situation, and one out of three operations had introduced either a non-resident or new resident during the 12 months prior to the study. Almost one of five operations had one or more non-resident equids during the previous 12 months.

For operations that had non-resident equids, the majority had fewer than 10 non-resident equids visit.

Slightly more than one of five operations added new resident equids during the 12 months prior to the study. These equids accounted for 6.3 percent of the total number of resident equids. Of new resident equids, 70.7 percent were obtained from within the same state.

For operations that added new resident equids, the most common health requirements implemented at least some of the time for new additions were a Coggins test for EIA, vaccination, and deworming within the past year.

Three out of four operations' resident equids had left the home operation and returned after direct contact with outside equids. Of the operations where resident equids had left and returned after contact with outside equids, the majority were not isolated after returning. Only one of 10 operations isolated returning equids, and 26 percent only isolated returning equids for a cause such as disease or disease exposure. A small percentage of operations, 2.8 percent, routinely isolated returning equids before arrival at the home facility.

The complete "Equine Biosecurity and Biocontainment Practices on U.S. Equine Operations" Info Sheet is available from USDA APHIS/VS. ●

## Equine 2005: Foal and Equid Deaths

The causes of death among foals and older equids were one focus of Equine 2005, a National Animal Health Monitoring System study. Part 1 of the study was released November 2006.

Equine 2005 found that 4.9 percent of foals born alive died in the first 30 days. The percentage of those that died in the first two days, 2.6 percent, and those that died between Days 3 and 30, 2.3 percent, was similar. Thus, the likelihood of a foal dying based on days at risk was higher in the early neonatal period.

The top three reasons for death among foals that were born alive but died in the first 30 days were injury/wounds/trauma unrelated to birth, 18.6 percent; unknown causes, 17.9 percent; and failure to get colostrum or milk from the mare, 14.9 percent. Other frequently reported causes of death included dystocia, trauma, or complications at birth; birth defects; and other digestive problems. "Other" causes of death were predator attacks and adverse environmental conditions.

Total deaths during a 12-month period ranged from 2.8 percent in the Northeast region to 1.6 percent in the South region.

Percentage of resident equids

more than 30 days of age that died or were euthanized during a 12-month timeframe showed that 45.7 percent involved equids 30 years or older. As might be expected, the second largest group, 6.7 percent, was equids 20 years of age to less than 30 years of age. Percentages of other groups—more than 30 days but less than six months, six months to less than five years, and five years to less than 20 years—was similar: 1.2 percent, 1.1 percent, and 1.2 percent respectively.

At 28.9 percent, old age was the leading cause of death among foals older than 30 days of age and all other equids. The second most common reason for death was injury/wound/trauma, 16.3 percent, with colic responsible for 14.6 percent of deaths. Lameness, leg or hoof problems accounted for 7.7 percent. The remaining 32.5 percent of deaths were attributed to unknown causes, cancer, digestive problems other than colic, neurologic problems and other specific causes with each accounting for 7 percent or less of total deaths. To learn more about highlights of Equine 2005 Part 1, visit <http://nahms.aphis.usda.gov> or contact USDA:APHIS:VS:CEAH at 970.494.7000. ●

### Cause of Death – Foals Dying First 30 Days % Foal Deaths

Injury/wounds/trauma unrelated to birth .....	18.6
Unknown .....	17.9
Failed to get colostrum or milk from mare .....	14.9
Other .....	13.7
Dystocia, trauma or complications at birth .....	10.7
Birth defects .....	8.9
Other digestive problems (e.g. diarrhea) .....	6.4
Respiratory problems (e.g. pneumonia, strangles, Rhodococcus equi, etc.) .....	3.6
Infectious disease unrelated to specific body system, blood infection (septicemia) .....	3.3
Colic .....	1.5
Neurologic problems (e.g. spinal problem, wobblers, seizure, EPM, WNV, sleeping sickness, maladjustment syndrome) .....	0.5

## Equine 2005: Equid Vaccinating Practices

It's a proven fact that vaccination can reduce the likelihood of disease occurring in exposed animals. As such, the American Association of Equine Practitioners recommends that all horses receive vaccines to protect them against core diseases: tetanus, eastern and western equine encephalitis (EEE/WEE), West Nile virus (WNV), and, in most regions, rabies. But what percent of farms, ranches, boarding and training centers, breeding farms, and other equid operations vaccinate, and what are the main reasons for not vaccinating?

These and other relevant questions were answered in Equine 2005, a USDA National Animal Health Monitoring System study.

Overall, three out of four operations gave some type of vaccine to resident equids during the 12 months previous to the study. A higher percentage of operations in the West, 83.8 percent, gave at least some vaccines to resident equids compared to operations in the Central, 77.4 percent; South, 72.3 percent; and Northeast, 72.0 percent. Farms and ranches were found to be less likely to administer vaccines to equids than operations with a primary function of boarding/training, breeding farm, and "other."

Veterinarians were the primary source of vaccines, and about half of all operations relied on veterinarians to administer vaccines. As operation size increased, so increased the percentage of operations that used operation personnel to administer the majority of vaccines.

Of the 94.4 percent of operations that knew which vaccines were given during the 12-month period, 85.3 percent were vaccinating against WNV. Other vaccines given included tetanus, 81.3 percent; EEE/WEE, 75.6 percent; influenza, 72.5 percent; and rabies, 44.5 percent.

The study showed regional differences

for several diseases. For example, 48.6 percent of operations in the Northeast region vaccinated equids for protection against rabies compared to 38.0 percent in the South region, 28.8 percent in the Central region and just 18.4 percent in the West region. A higher percentage of operations in the Northeast and Central regions—17.1 percent and 17.0 percent respectively—vaccinated against Potomac horse fever compared to operations in the South and West regions—7.2 percent and 6.1 percent respectively. It is believed the difference in vaccine use across regions may be due to a perceived difference in the likelihood of exposure to causative agents or a difference in vaccination recommendations from the veterinarians in the various regions.

### Why Not Vaccinate

When operations reported that a specific vaccine was not administered, a follow-up question offered eight alternatives regarding why the vaccine was not used: concern of adverse reaction to vaccine, vaccine considered ineffective, little risk of disease exposure, not recommended by veterinarian, financial constraints on horse expenditures, thought vaccine was important but did not get around to it, effort and cost of vaccination outweighed financial and other benefits of vaccination, or reasons other than those listed.

Reasons given by operations that gave some vaccines but not the specified core vaccines followed similar patterns across the eight types of vaccines. The highest percentages—ranging from 39.9 percent to 58.5 percent—cited little risk of disease exposure as the reason for not giving each of the eight vaccines.

For all but the WNV vaccine, the second highest percentage of operations—18.2 percent to 31.8 percent—reported the reason for not giving the specified vaccines

as not recommended by veterinarian, followed by effort and cost of vaccination outweighing financial and other benefits of vaccination. For the WNV vaccine, the second highest percentage of operations cited the reason for not giving the vaccine was effort and cost outweighed financial and other benefits of vaccination, followed by concern of adverse reaction.

For operations that gave no vaccines, almost two-thirds reported that little risk of disease was the reason for not vaccinating. The next most common reasons for not administering vaccines were consistent across vaccines: effort and cost of vaccination outweighed financial and other benefits of vaccination, 12.3 percent to 13.3 percent of operations; though vaccinating was important but did not get around to it, 7.8 percent to 12.3 percent of operations; and financial constraints on horse expenditures, 5.2 percent to 5.8 percent of operations. None of the other reasons for not vaccinating exceeded 3.2 percent of operations.

### Movement Patterns

For operations that did not vaccinate any equids, close to 15 percent had non-resident equids come onto their operations and stay for fewer than 30 days. Among operations that vaccinated one or more equids for at least one disease, 20.3 percent had non-resident equids come onto the operation and stay for fewer than 30 consecutive days.

Among the operations that did not vaccinate any equids, 40.5 percent had resident equids leave the operation and return. Almost 30 percent of operations that did not vaccinate any equids transported equids off the operation by vehicle. For these operations, travel by vehicle was within the respective state on 94.5 percent of operations, to adjacent states on 13.3 percent of operations, and beyond adjacent states on 5.7 percent of operations.

In comparison, on operations that did vaccinate, 94.8 percent of operations transported equids within their respective state, 37.1 percent to adjacent states, and 12.7 percent beyond adjacent states.

To learn more about vaccination practices on U.S. equine operations uncovered during the Equine 2005, visit <http://nahms.aphis.usda.gov> or contact USDA APHIS: VSP:CEAH at 970.494.7000. ●

*For operations that administered any vaccine to resident equids during the previous 12 months, percentage of operations by person who administered the major of vaccines and by size of operation*

	% OPERATION			
	5-9 Equids	10-19 Equids	20 or More Equids	All Operations
Veterinarian	54.1	44.4	39.2	50.3
Operation personnel, including operator	29.6	39.1	43.4	33.3
Equid owner, not operator	15.8	16.4	17.4	16.1
Other	0.5	0.1	0.0	0.3

## News Briefs News Briefs News Briefs News Briefs News Briefs

### Dr. Doug Corey Named President of AAEP

Doug Corey, DVM, Adams, Ore., was installed as president of the American Association of Equine Practitioners (AAEP) during the organization's 52nd annual convention in December 2006. Others on the association's executive board include Eleanor M. Green, DVM, Gainesville, Fla., president-elect; Harry Werner, DVM, North Granby, Conn., vice president; Tom Brokken, DVM, Fort Lauderdale, Fla., immediate past president; and R. Reynolds Cowles, Jr., DMV, Free Union, Va., treasurer.

New members of the AAEP's board of directors are Jim Morehead, DVM; Dan Wilson, DVM; Julie Wilson, DVM; Rustin Moore, DVM; and David Whitaker, PhD who represents the equine industry.

### Dr. Barret Research Fellow Scholarship

Jennifer G. Barrett, DVM, MS, PhD, of Urbana, Ill., was awarded the American Association of Equine Practitioners' first Research Fellow Scholarship during the AAEP 52nd annual convention. Dr. Barrett is a resident in equine surgery at the University of Illinois at Urbana-Champaign Veterinary Teaching Hospital. The Research Fellow Scholarship was developed by the AAEP Foundation to emphasize the importance of equine research and to reward a researcher for his or her contributions. The scholarship is made possible through the monetary contributions of AAEP past presidents and is for AAEP member graduates and residents who are completing their residency or a graduate program while participating in equine research.

### Drs. Ragle, Bramlage and Madigan Honored

The American Association of Equine Practitioners honored Claude A. Ragle, DVM; Larry R. Bramlage, DVM, MS; and John E. Madigan, DVM, with the association's Distinguished Service awards during its 52nd annual convention. J. Clyde Johnson, DVM, and Charles D. Vail, DVM, were deemed Distinguished Life Members, and Thomas J. Divers, DVM, was given the Distinguished Educator Award.

### NIAA Selects Vise-Brown as New CEO; Reorganizes and Makes Other Staff Changes

**Michele Vise-Brown** was appointed Chief Executive Officer (CEO) of the association by the NIAA Board of Directors effective January 1, 2007.

In making the announcement, NIAA Board Chair Scott Stuart said, "We believe we've selected the ideal person to head NIAA. Michele Vise-Brown has been with NIAA since 2003 serving as Director of Member Relations and Committee Operations; she has done an outstanding job for us. Of particular note is the leadership she has provided this year in the absence of a full-time CEO. Nowhere was that more evident than with ID/INFO EXPO 2006 in Kansas City last August. She and the staff made the 2006 event the most successful in history."

Stuart went on to say that he and the rest of the Board of Directors believe that because Vise-Brown knows NIAA so well, her selection as CEO assures a virtually seamless transition and eliminates any need to relocate the office.

Vise-Brown replaced Dr. Nevil Speer who had been the acting CEO since June. "The association owes Dr. Speer a huge debt of gratitude for his leadership for the past six months," said Stuart. "I'm sure it has been a burden to him as he has many responsibilities at the Department of Animal Science at Western Kentucky University."

"He's been a joy and inspiration for me and the rest of the staff to work with," added Vise-Brown. "We've all learned a lot and grown under his direction and I know I'll be relying on him for help as I start this new challenge."

#### *In other staff changes*

**Pamela Meador**, formerly NIAA's part-time accountant, has joined the staff full time and is responsible for accounting and operational functions.

"Her understanding of NIAA, finan-

cial support, agriculture knowledge and exceptional customer service is much welcomed to NIAA staff and members" said Vise-Brown.

**Gale Johnson** is serving as NIAA's Director of Communications on a contract basis. "Gale has worked with NIAA on numerous projects over the years including the Eradicate Scrapie! outreach program, last year's ID/INFO EXPO and a number of other projects. He is a huge asset because of his familiarity with NIAA and his very extensive background in all phases of agricultural communications," stated Vise-Brown.

Two Western Kentucky University students, senior **Cora Newsom** and junior **Jenna Brown** are working as staff assistants. Newsom, who joined NIAA last summer, is majoring in Economics with minors in Agriculture, Finance, and Business Administration. Brown joined the staff at the beginning of this year and is studying Agriculture Business with an emphasis in Agriculture Communications. Both women have extensive personal animal agriculture backgrounds raising and showing livestock, 4-H, and activities at the University.

**Kelly Gill** is a graphic designer under contract. She is a past employee of The Liberty Group, NIAA's printing house. She is on call to design promotional material or complete layout for NIAA publications.

**Julie Jones** is now a Registered Nurse and is working full time at the Vanderbilt University Burn Unit, but she is still involved with NIAA. She is maintaining the NIAA, Scrapie and Johnes websites and helps train her replacements on her day off.

**Nevil Speer**, even though he has taken on more duties at Western Kentucky University, has agreed to help NIAA as needed.

**Ken Olson** will continue to work on the Johnes Education Initiative. Launched in the summer of 2005, the program is a collaborative effort between industry and government to educate producers, veterinarians and others involved in beef and dairy production about Johnes disease.

**Peggy Logsdon** resigned from NIAA effective December 31, 2006. ●



*Michele Vise-Brown*

## USDA Endorses International Standards for Animal ID Technologies

The U.S. Department of Agriculture strongly believes that the best approach to establishing the National Animal Identification System (NAIS) is as a voluntary system driven by the states and the private sector. Accordingly, USDA has adopted a technology-neutral position regarding animal identification methods and processes and purposefully not designated any specific identification technologies for use with NAIS, recognizing that the market must ultimately determine which methods should be used.

Although not selecting or requiring the use of specific technology, USDA recognizes the importance of having a basic level of standardization to ensure, among other things, compatibility across vendors in the national program, that technologies are adaptable or compatible with devices produced by different manufacturers, and that other countries recognize the identification technologies and/or devices used with NAIS. USDA has reviewed the recommendations of the NAIS Subcommittee that resulted from consensus of species working groups, and endorses the use of technology standards published by the International Organization for Standardization (ISO).

USDA's decision is supported by the species working groups, several of which (bison, cattle and equine) have recommended that ISO compliant radio frequency identification (RFID) technology be used with NAIS. Specifically, USDA endorses the use of ISO 11784 and 11785, which would establish an RFID technology standard for producers or service providers who elect to use radio frequency technology in the NAIS. While USDA is in favor of standardization and believes basic technology standards should be met, USDA remains technology-neutral and has not exclusively designated RFID or any other specific identification technology for use with NAIS.

Rather, when RFID technology is used, the incorporation of ISO 11784 and 11785 by USDA in authorizing the use of the Animal Identification Number (AIN) will be followed to ensure the compatibility across vendors. "These standards are imperative so industry partners in NAIS can be assured one reader can scan and successfully read all AIN tags that have RFID technology," states Bruce Knight, undersecretary for USDA's marketing and regulatory programs mission area. "But USDA is not requiring the use of RFID tags or injectable implants; that remains a choice of the animal owner."

USDA will continue to consider emerging and developing technologies to ensure NAIS devices remain current with the marketplace. To encourage flexibility,

USDA supports the establishment of standards for other technologies through the American National Standards Institute (ANSI); such standards could then, in turn, facilitate the development of standards for technologies at the international level. ANSI coordinates the development and use of voluntary consensus standards in the United States and represents the needs and views of U.S. stakeholders in standardization forums around the globe. The Institute oversees the creation, promulgation and use of thousands of norms and guidelines that directly impact businesses in nearly every sector. ANSI is also actively engaged in accrediting programs that assess conformance to standards.

Additionally, pilot or field trials will be considered for the demonstration of such technologies to ensure the NAIS can advance with such technologies. At present, APHIS is supporting field trials or pilot projects involving three additional radio frequencies and three biometric markers for use with the NAIS. Companies will have the opportunity to collect data in field conditions under the supervision of state and federal animal health officials, which is a necessary first step in attempting to support the development of standards through the ANSI and, ultimately, the ISO.

For more information on the NAIS, please visit <http://www.usda.gov/nais>.

## Subcommittee to Focus on Role of Equine ID in Animal Health

The Role of Individual Equine Identification in Animal Health is the theme for the National Institute of Animal Agriculture (NIAA) Equine ID Subcommittee meeting which will be held during the annual conference in Sacramento, April 2-5, 2007.

"The National Animal ID System (NAIS) shift to voluntary does not lessen the need for individual identification nor lessen the role it can have in practical applications for equine health and welfare," said Amelita Facchiano, Subcommittee Chair.

Mary Giddens, DVM and Co-Chair, has enlisted colleagues to discuss recent disease outbreaks and the need for identification and movement tracking in controlling them. In addition to Equine

Herpesvirus-1 (EVA-1) and Equine Viral Arteritis (EVA), foreign animal diseases such as Equine Piroplasmiasis (EP) and Contagious Equine Metritis (CEM) are diseases that can require immediate and accountable tracking of horses post import.

"Like many others," Dr. Giddens said, "I feel strongly that there are numerous benefits associated with horse identification. We need to focus on the practical and positive applications that will lead to better, safer, and more humane lives for our horses."

To see a complete list of speakers or for more info on the NIAA annual meeting, committee agendas, and schedules, go to: <http://www.animalagriculture.org/>. ●

**Equine**  
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National Institute for Animal Agriculture  
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Bowling Green, KY 42104

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