Equine Infectious Anaemia Control Strategy for Great Britain

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Part One – Introduction

1.1 Purpose of document

Protecting the environment, society and the economy from the risks of animal disease is a priority for government. This document sets out a framework for how an outbreak of Equine Infectious Anaemia (EIA) in Great Britain (GB) would be managed.

It covers general control principles for the most likely scenarios for cases of EIA and the rationale for such controls. It is not intended to provide detailed operational instructions for how to deal with an outbreak. Defra’s Contingency Plan for Exotic Notifiable Diseases of Animals in England, the Scottish Government’s Exotic diseases of animals: contingency framework plan and the Welsh Government’s Contingency Plan for Exotic Animal Diseases cover these arrangements and should be referred to for detailed explanation of the systems, structures, roles and responsibilities implemented during an outbreak which are referenced in this control strategy.

By describing this framework all parties affected during an outbreak of EIA i.e. government, the equine industry, veterinarians and horse keepers, will be better placed to respond quickly and effectively to control the outbreak in order to protect public health, regain freedom from disease as quickly as possible and to minimise the wider impact on the public and the natural environment. If an outbreak occurs evidence and analysis from a number of sources (including veterinary, scientific and economic) will be used to assess the effectiveness of different control options. This strategy should enable affected parties to prepare to mitigate the likely impact of these control measures during an EIA outbreak.

1.2 Approach and strategic fit

The plan covers control of EIA in equines i.e. members of the horse family including mules and donkeys. This GB-wide control strategy is endorsed by the Department for Environment, Food and Rural Affairs (Defra), the Scottish Government and the Welsh Government. This control strategy is consistent with the following:

- the general animal health and welfare policy principle that ‘prevention is better than cure’
- ongoing obligations for the welfare of animals
- government’s wildlife management policies
- government’s exotic notifiable disease contingency plans
- to control the disease with the minimum disruption
• to return as quickly as possible to a situation where there is confidence that infection is not circulating in GB

• to minimise the effects of an outbreak or incursion on susceptible animals including the number of animals killed for disease control

• to minimise the burden on taxpayers and owners

In delivering this objective, the disease control measures will seek to:

• humanely cull only the infected equine(s)

• minimise adverse impacts on animal welfare, the rural and wider economy, the public, rural communities and the environment

Further information on the disease can be found at on .GOV.UK under Defra: animal diseases

Part Two – Background to the disease

2.1 The disease

EIA, occasionally known as ‘swamp fever’ is a viral disease of equines (horses, donkeys, mules and zebras). It is a World Organisation for Animal Health (OIE\(^1\)) and EU notifiable disease.

EIA may take an acute, chronic or sub-clinical form and clinical signs are extremely variable. Many horses have very mild or unapparent signs on first exposure. Signs of the acute form can include anaemia, fever, haemorrhage, rapid weight loss and skin swelling and in some cases it may be fatal.

All infected horses, including those that show mild or unapparent signs, become carriers and are considered potentially infectious for life. Infected animals must either be destroyed or remain permanently isolated from other equids to prevent transmission. EIA is a notifiable disease under the requirements of The Infectious Diseases of Horses Order 1987 (IDHO). This Order implements Council Directive 82/894/EEC on the notification of animal diseases within the European Union as amended by Decision 2012/737/EU. Failure to report suspicion of EIA is an offence under this legislation (see 2.5).

\(^1\) Office International des Epizooties
Controls and requirements in relation to EIA have been set at European level and subsequently transposed into national legislation. Further information on legislative requirements can be found in part 5.

2.2 Current disease distribution

EIA has a worldwide distribution, with some countries reporting disease on a sporadic basis and others reporting endemic disease. Within the EU it is considered endemic (i.e. at a stable prevalence) in Italy and Romania, while sporadic small scale outbreaks can occur in other countries at any time of the year and usually involving the non-thoroughbred sector. The most recent cases of EIA in the United Kingdom (UK) were reported in 2012; two horses that had previously been imported to the UK from continental Europe in 2007 were confirmed positive for EIA. Following epidemiological investigations it was considered highly likely that the horses were infected with EIA prior to importation and there was no known onward transmission associated with these cases whilst in the UK.

2.3 Transmission

EIA may be transmitted directly, through sexual contact, mother to foal or through exchange of blood, or indirectly through vector and iatrogenic\textsuperscript{2} transmission. Vector transmission is mechanical rather than biological, with the virus being restricted to the mouthparts of biting (hematophagous) flies when taking a blood meal. Horse flies are the most effective vectors, although other vectors including stable flies and other tabanid flies can transmit the virus. EIA can be passed from a mare to her foal \textit{in utero}, and the virus can also be spread by iatrogenic transfer of blood, either in blood transfusions or on contaminated needles, surgical instruments and dental equipment. Other less common routes of transmission may be possible; the virus can be found in milk and possible transmission has been reported via virus-contaminated colostrum and milk in new born foals. The virus can also be found in semen and there has been one reported incident of possible venereal transmission. The virus does not appear to be shed in saliva or urine. Clinically infected horses are more likely to transmit the virus than subclinical carriers, because the level of viraemia is higher, but a subclinical carrier if used as a blood donor can be the source of infectious blood products which could infect multiple recipients.

EIA poses no risk to human health.

2.4 Incubation period and clinical signs

The incubation period is typically one to three weeks, but may be as long as three months.

\textsuperscript{2} Iatrogenic - the use of medical equipment such as needles, surgical instruments or blood and other biological products for medical use.
The clinical signs of acute EIA can vary from mild to severe and are often non-specific. In mild cases, the only sign may be a fever that can last less than 24 hours. More severe cases are characterised by recurrent febrile episodes, anaemia, rapid weight loss and oedema of the lower parts of the body. Acute infection may be fatal in some cases. Following the primary infection, the majority of cases become subclinical carriers; however, some animals develop recurring clinical signs that vary from mild to severe illness. Inapparent infections may become clinically evident during concurrent illnesses, severe stress or hard work.

Donkeys and mules are less likely to develop severe clinical signs.

There is currently no effective treatment for EIA and no vaccine available.

2.5 Suspicion of disease

EIA is a notifiable disease and anyone who suspects it in an equine must report it to the Animal and Plant Health Agency (APHA). In England this is via the Defra Rural Services Helpline on: 03000 200 301. In Wales APHA should be contacted on 0300 308 8268. Information on contacting APHA in Scotland can be found on their contact pages of GOV.UK. Information on suspect cases will be passed to APHA’s Veterinary Exotic Notifiable Disease Unit (VENDU).

If infection is suspected, the suspect horse(s) and any immediate contacts should be isolated.

On suspicion of EIA movement restrictions would be placed on a suspect premises whilst the presence of disease is investigated. Vector protection may be required, subject to epidemiological advice.

Part Three – Testing and confirmation

3.1 Testing for the disease

It is not possible to diagnose EIA on clinical signs alone therefore laboratory diagnosis is required for the confirmation of infection. Blood samples are tested for the presence of antibodies against EIA virus proteins; detectable proteins are usually present in the blood 7-14 days after infection and remain present for the rest of the animal’s life. The agar gel immunodiffusion (AGID or Coggins) test is currently the only test recognised officially for the purpose of international movement of horses.

An enzyme-linked immunosorbent assay (ELISA) test has been developed for EIA. This test can provide results more quickly and economically than the Coggins test. However, it
can produce false positive results and therefore non-negative results on ELISA must be confirmed by the Coggins test. The ELISA test is often used for routine screening in populations where EIA is not suspected, such as pre-breeding, pre-sales and pre-sporting events.

As stated in 2.5, anyone who suspects that their animal has EIA, must report it to APHA immediately. Any suspect or traced horse which initially tests negative will be tested again after ninety days, or ninety days after the last contact with an infected animal in the case of a tracing. The suspect premises will remain under movement restrictions whilst testing is ongoing.

Aside from suspect cases, owners of equines who travel overseas, e.g. for competition, are encouraged to have their animals tested for EIA on a regular basis. In addition, the Horserace Betting Levy Board (HBLB) Code of Practice recommends an EIA test annually as part of pre-breeding screening. For routine screening, where EIA is not suspected, a single negative test is sufficient, rather than two tests ninety days apart.

### 3.2 Disease confirmation

EIA is confirmed by the relevant Chief Veterinary Officer (CVO) based on a positive Coggins tests performed on an official sample at the National Reference Laboratory or a laboratory approved for export testing.

When EIA is diagnosed in any equidae, the premises at which those equidae reside will be declared an infected premises (IP). On confirmation of EIA by the relevant CVO, movement restrictions would be placed on the IP so no equines can move on or off, pending further testing.

Infected equines are a lifelong risk to others and therefore will be humanely destroyed by an APHA veterinarian to control the disease. All other equidae present at the premises and within any restriction zones put in place will be tested and any equidae with positive test results will usually be humanely destroyed by an APHA veterinarian.

A request to exempt an infected equine(s) from destruction will be considered taking into account the local situation and the need to preserve genetic diversity, or other characteristics, and the need to prevent exposure of other susceptible animals from potential infection both at the time and in future. Requests will be considered on a case by case basis and there may be additional permanent safeguards or controls (such as naming) required before a request can be granted.

Carcass removal and destruction in England and Wales will be facilitated by APHA under The Specified Diseases (Notification and Slaughter) Order 2006, The Specified Diseases (Notification & Slaughter) (Wales) Order 2006 and The Specified Diseases (Notification and Slaughter) (Amendment) and Compensation (Scotland) Order 2014.
3.3 Compensation

The Equine Infectious Anaemia (Compensation) (England) Order 2006 and The Specified Diseases (Notification and Slaughter) (Amendment) and Compensation (Scotland) Order 2014 provided, in England and Scotland, for the nominal payment of £1 for animals that have tested positive for EIA and subsequently humanely destroyed for disease control purposes. Parallel legislation for Wales could be effected as emergency legislation if required.

3.4 Movement controls and restrictions including exports and imports³

On confirmation of EIA movement restrictions are placed on the IP, and under the relevant Movement of Animals (Restrictions) Order a temporary control area of minimum of 200m zone would to be placed around the IP whilst investigations are ongoing to restrict and test any equidae present. The size of the IP and the equine population will be taken into account when drawing up the zone. There may be restrictions including closure of certain footpaths or bridleways crossing an IP, but given this is an infection with only spatially limited insect vector transmission this is less about the disease risk and more to help management of the IP. Local Authorities may place advisory notices on bridleways which are not closed to allow owners to make an informed decision regarding the risk of exposure.

Council Directive 2009/156/EC, implemented under The Trade in Animals and Related Products Regulations, 2011, The Trade in Animal and Related Products (Wales) Regulations 2011 and The Trade in Animal and Related Products (Scotland) Regulations 2012 (as amended), outline animal health conditions governing the movement and importation from third countries of equidae, sets down a requirement, following the slaughter of the last infected animals, for all remaining equines at an IP to be tested, with negative results twice, 90 days apart before restrictions can be lifted.

The movement of equines to other Member States from holdings unaffected by EIA can continue under the condition that the equine(s) have not been in contact with others from the IP during the past 15 days. Exports to Third Countries will be dependent on whether the health certificate requires the country, region or premises to be free of EIA.

Key requirements for the importation of equines from third countries:

- animals show no clinical sign of EIA when the certificate is drawn up during the 48 hours prior to shipment

³ This document has been drafted while the UK remains a member of the EU.
• no case of EIA has been associated with any premises where the animals were kept during the 90 days prior to shipment

• if imported on a permanent basis, the animals were subjected to a diagnostic test for EIA with negative results on blood samples collected during the 30 days prior to shipment

• if imported on a temporary basis, the animals were subjected to a diagnostic test for EIA with negative results on blood samples collected during the 90 days prior to shipment

3.5 Infected premises

Premises are considered infected until the infected animals have been humanely destroyed and removed and the remaining equines have been subject to two negative test results 90 days apart following the removal of the last infected animal. If the outbreak occurs during the insect vector season the other horses on the IP should be isolated in vector proof accommodation or every effort made to avoid vector contact between the horses.

Regulation 11 of IDHO empowers a Veterinary Inspector to require the owner of a premises where disease is suspected or confirmed to have existed within the last 56 days to cleanse and disinfect it, and any vehicle or equipment used in connection with the transportation of the infected animal, with an approved disinfectant. Any disinfectant used must be on the list of those approved under ‘General Orders’ by The Diseases of Animals (Approved Disinfectants) (England) Order 2007, The Diseases of Animals (Approved Disinfectants) (Wales) Order 2007 and The Diseases of Animals (Approved Disinfectants) (Scotland) Order 2008. The list of approved disinfectants is published on GOV.UK.

3.6 Official disease notification to international partners

The CVO will inform the European Commission and the OIE of confirmation of disease within 24 hours of confirmation. Other trade partners will be alerted as appropriate. Country level disease free status from EIA is not recognised by either the EU or OIE.

After withdrawal from the EU, our reporting obligations to the OIE and trade partners will remain the same.
Part Four – Disease tracing

4.1 Epidemiology

In an EIA outbreak scenario APHA’s National Emergency Epidemiology Group (NEEG) would be convened. The NEEG would conduct a detailed epidemiological investigation to attempt to establish:

- the origin of the virus, the extent of infection and any associations with clinical disease on the index IP
- the length of time during which EIA infection may have been present in equidae on the index IP
- the identification of other IPs (secondary IPs) on which there are equidae which may have become infected from the same source as the index IP, or from the index IP itself
- the presence and distribution of insect vectors and opportunities for iatrogenic transmission on the index and any secondary IPs
- the movements of any equidae on and off the index and secondary IPs during the risk period

If the infected equine is imported and is thought to have been infected prior to importation (rather than acquiring infection in the UK), every effort would be made to trace any other equines from the same consignment, if such animals exist.

4.2 Source Tracings

Alternative sources of infection would also be considered including history of surgical interventions or other veterinary treatments, whether the equine was a recipient of blood or blood products, whether any EIA-related clinical signs have been observed in other equines on the premises.

4.3 Spread Tracings

Tracing should be undertaken for equines where there is evidence of blood product use, close contact, iatrogenic contact, sexual contact or during the insect vector season if the animals were within 200m. These are termed ‘direct/high risk contacts’ as shown in the following disease tracing scenario diagrams. If equines were not subject to any of these routes of contact, there is no need to trace.
Traced animals where contacts were confirmed to be more than 90 days earlier can be tested just once, and restrictions lifted as soon as negative results are known. If less than 90 days, testing should be two tests, the last one being 90 days after the date of last confirmed contact. Testing criteria are set down in Council Directive 2009/156/EC, which is implemented in GB via the relevant government’s Trade in Animals and Related Products legislation.

The default tracing window for onward spread has, based on expert opinion and available scientific literature, been set to start seven days prior to the onset of clinical signs in clinically affected equines and seven days prior to destruction for non-clinical but infected equines. This time covers not only the incubation period (for a new infection), but the time prior to clinical signs when an already (sub clinically) infected but horse is becoming more infectious. It is important to note that the risk period for onward spread will be set by the NEEG and may be lengthened if evidence of previous clinical episodes, blood or blood product donation, reproductive or iatrogenic means of onward transmission is identified.

Equally, the NEEG will advise (based on risk assessment) as to whether all potential tracings within the spread tracing window would need to be restricted and tested e.g. if an infected equine had been at a competition within the days prior to the onset of clinical signs and had very short duration of relatively close contact i.e. approx.100m with no evidence of iatrogenic transmission.

If other equines at the traced premises are not direct/high risk contacts then no restriction or testing will usually be required. Otherwise equines should be restricted and tested, with the timing of testing dependent on the timing of last contact.

4.4 Disease tracing scenarios

The following diagrams show the most likely scenarios and testing recommendations, where there is no evidence of iatrogenic transmission or where an equine hospital / clinic is not involved. In these cases, it is likely there would be a greater tracing exercise and wider testing requirements, which would be advised by the NEEG and the National Experts Group (NEG). As iatrogenic spread can occur with a sub clinically infected horse, it is not possible to set a spread or tracing window based on the season or the time since clinical signs were observed.
Scenario 1: Horse with clinical signs, testing positive during the low insect vector season

- EIA confirmed in a horse with clinical signs
  - Other horses on the IP
    - EU Law: Requires that all horses restricted and tested twice 90 days apart to establish infection status
    - Trace all horses in contact with the infected horse from 7 days prior to onset of clinical signs plus any with iatrogenic or close contact. Seek epidemiological input to check if sufficient
    - Restrict horses that have been in contact and test twice with final test 90 days after last possible contact
    - Restrict horses at iatrogenic or continued close contact risk from the traced horse and test 2x at 90 day interval after last possible contact
  - Destroyed
    - Other horses present at the traced premises with negligible risk of transmission - no test and no need for vector proofing. Horses must be shown to be kept separate from other restricted horses and ensure no potential for transmission from them. After 7 days, if no clinical signs in restricted, separated horses, no further action required
Scenario 2: Horse with no clinical signs, testing positive during the low insect vector season.

**EU Law:** Requires that all horses restricted and tested twice 90 days apart to establish infection status.

- Other horses on the IP
  - EIA confirmed in a horse with no clinical signs
    - Destroyed
      - Trace all horses in contact with the infected horse from 7 days prior to destruction plus any with iatrogenic or close contact. Seek epidemiological input to check if sufficient
        - If horses are traced from the IP and have had no close or iatrogenic contact with the infected horse, no requirement to test or restrict
          - Restrict horses that have been in contact and test twice with final test 90 days after last possible contact
            - Restrict horses at iatrogenic or continued close contact risk from the traced horse and test 2x at 90 day interval after last possible contact
              - Other horses present at the traced premises with negligible risk of transmission - no test and no need for vector proofing. Horses must be shown to be kept separate from other restricted horses and ensure no potential for transmission from them. After 7 days, if no clinical signs in restricted, separated horses, no further action required
Scenario 3: Horse with clinical signs testing positive during the insect vector season

- **EIA confirmed in a horse with clinical signs**
  - **Destroyed**

- **Other horses on the IP**
  - **EU Law: Requires that all horses restricted and tested twice 90 days apart to establish infection status**

- **Trace all horses in contact with the infected horse from 7 days prior to onset of clinical signs plus any with iatrogenic or close contact. Seek epidemiological input to check if sufficient**

- **Vector transmission is a risk therefore restrict horses that have been in contact and test twice with final test 90 days after last possible contact**

- **Restrict horses which were considered to have been at risk from vector transmission, iatrogenic or continued close contact risk from the traced horse and test 2x at 90 day interval**

- **Other horses present at the traced premises with negligible risk of transmission - no test but vector proofing required. Horses must be shown to be kept separate from other restricted horses and ensure no potential for transmission from them. After 7 days, if no clinical signs in restricted, separated horses, no further action required**
Scenario 4: Horse with no clinical signs testing positive in the insect vector season

- **EIA confirmed in a horse with no clinical signs**
  - **Destroyed**
  - **Other horses on the IP**
    - **Trace all horses in contact with the infected horse from 7 days prior to destruction plus any with iatrogenic or close contact. Seek epidemiological input to check if sufficient**
    - **EU Law: Requires that all horses restricted and tested twice 90 days apart to establish infection status**
    - **Restrict horses that have been in contact and test twice with final test 90 days after last possible contact**
    - **If a horse is traced from the IP but has had no close or iatrogenic contact with the infected horse separate from other restricted horses for seven days. If the restricted horses show no clinical signs, these horses can be released from restriction**
    - **Restrict horses at iatrogenic or continued close contact risk from the traced horse and test 2x at 90 day interval since last contact**
  - **Other horses present at the traced premises with negligible risk of transmission - no test and no need for vector proofing. Horses must be shown to be kept separate from other restricted horses and ensure no potential for transmission from them. After 7 days, if no clinical signs in restricted, separated horses, no further action required**
  - **Separate horses which are at risk of vector transmission and restrict for 7 days. If the IP contact horses show no clinical signs, vector risk horses can be released**

Part Five – Management of an outbreak

5.1 Roles and responsibilities

Defra and the Scottish and Welsh Governments will provide strategic leadership during an outbreak. Strategic decisions will be taken by the relevant minister or CVO, delegated as appropriate. Their decisions will be based on advice from experts, veterinarians, policy teams, economists and delivery agents. As necessary, key GB-wide policies will be submitted to the Animal Disease Policy Group (ADPG) for approval.

ADPG is the key strategic policy forum for GB-wide animal health and welfare issues. It takes expert advice from the NEG, reaches official-level agreement on UK and GB control strategies and, where appropriate, makes recommendations on major policy issues for submission to ministers. ADPG includes representatives of the devolved governments to ensure that their policy positions are taken into consideration and fully understood, and to facilitate a co-ordinated approach to GB/UK disease control.

The Equine Disease Coalition (EDC) was formed in 2011 and is an industry led ‘core group’ comprising key figures from the equine sector. It has representation from, amongst others, World Horse Welfare, the Animal Health Trust, the British Equine Veterinary Association and the Royal Society for the Prevention of Cruelty to Animals. Working closely with government, its aim is to advance awareness and prevention of equine disease in GB. The EDC would have a key advisory role to play in the event of an outbreak.

At a strategic level, it is unlikely that there would be a need to put in place recognised provisions for management of an outbreak of EIA, e.g. establishment of a full National Disease Control Centre or Forward Operating Base as there would be for other exotic animal diseases such as Foot and Mouth Disease. The relevant CVO together with policy leads and APHA will decide what level of response is needed and how this should be implemented.

5.2 Communications and raising awareness

An important control measure in all scenarios is informing the public and raising awareness, particularly among veterinarians and animal owners at the most appropriate level (e.g. local, regional, national or international).

EIA is a notifiable disease. Communications encouraging reporting of suspicion of the disease will need to be developed in conjunction with the relevant local authority and key stakeholders.
Good communications are key at every stage of controlling a disease outbreak. Early, regular and consistent involvement with the media and stakeholders will be necessary in order to ensure that reporting is responsible, accurate and informative, promoting awareness of the issues involved and ensuring that the necessary control measures are understood and accepted, particularly within restricted premises.

The use of social media e.g. Facebook, Twitter and Instagram is becoming increasingly important as a rapid means of both communicating messages and receiving information from stakeholders and members of the public. The EDC would have a key communications role to play in the event of an EIA outbreak e.g. through the sharing of information through Group members’ own communication networks.

Local authorities, under the Civil Contingencies Act 2004, will play a vital role in communicating with local residencies, businesses and the media. Interested parties such as BEVA, the British Veterinary Association (BVA) and the British Horse Council (BHC) as well as other equine owner groups, breed groups and organisers of animal events will need to be kept involved and informed as they will be sending clear messages to their members. Involving as many groups as possible on a regular basis will help to ensure that the message that is disseminated is consistent and accurate.

Key features of the communications strategy will include:

- communications plan for each stage of an outbreak (suspect case, disease confirmed, during control measures, ongoing controls)
- agreed key messages that cover several strands (awareness, risk reduction, context and proportionality, acceptance and support for government interventions)
- targeted communications aimed at animal owners and those at higher risk of coming into contact with suspect cases to facilitate cooperation with control measures

5.3 Exit strategies

Drawing up an exit strategy from an EIA outbreak would largely be influenced by the circumstances specific to the particular outbreak and determined by the following considerations:

- size, number and type of affected premises
- geographical factors (size of infected area and density of equines present)
- number and management of equines testing positive
- number and management of contact animals, including the results of laboratory tests conducted on them
5.4 Legislative powers

Controls and requirements relating to EIA are set at a European level and transposed into national legislation.

European level

**Council Directive 2009/156/EC on animal health conditions governing the movement and importation from third countries of equidae:**

- defines rules for the movement of equidae between Member States
- sets common standard form for health attestation for registered equidae and form of health certificate for movement of equidae for breeding, production and slaughter
- defines rules for importation of equidae in EU from third countries (only from countries included in the list of countries and territories from which equidae may be imported (Council Decision 79/542/EEC drawing up a list of third countries from which the Member States authorize imports of bovine animals, swine and fresh meat)
- provides for restrictions concerning the movement of equidae from holdings where the presence of EIA has been confirmed until, following the slaughter of the infected animals, the remaining animals have undergone two *Coggins tests* with negative results


- requires that outbreaks of EIA are to be notified to the European Commission and other Member States via the Animal Disease Notification System

**Commission Decision 2010/346/EU on protective measures with regard to EIA in Romania:**

- sets down protective measures for the movement of and trade in equidae and equine semen, ova, embryos and certain equine blood products from Romania (given the EIA situation in Romania)

**Commission Regulation (EC) No 180/2008 concerning the Community reference laboratory for equine diseases and Commission Implementing Regulation 72/2013:**

- designates the AFSSA laboratory in France, as the Community reference laboratory for equine diseases other than African Horse Sickness
Council Directive 92/65/EEC laying down animal health requirements governing trade in and imports into the EU of animals, semen, ova and embryos not subject to animal health requirements laid down in specific Community rules referred to in Annex A (I) to Directive 90/425/EEC:

- sets down testing requirements for semen, ova and embryos, including testing for EIA through the Coggins test

Regulation (EC) No 1774/2002 laying down health rules concerning animal by-products not intended for human consumption:

- requires equine serum to have come from a country where EIA is compulsorily notifiable

National level

The Animal Health Act 1981 (as amended) and The Animal Health and Welfare (Scotland) Act 2006:

- provides Ministers with powers to make Orders for the purpose of, amongst other things, disease control

The Infectious Diseases of Horses Order 1987:


The Specified Diseases (Notification and Slaughter) Order 2006, The Specified Diseases (Notification & Slaughter) (Wales) Order 2006 and The Specified Diseases (Notification and Slaughter) (Amendment) and Compensation (Scotland) Order 2014:

- provides for carcass removal and destruction

The Equine Infectious Anaemia (Compensation) (England) Order 2006:

- provides, in England, for the nominal payment of £1 for animals that have tested positive for EIA and subsequently humanely destroyed for disease control purposes

The Specified Diseases (Notification and Slaughter) (Amendment) and Compensation (Scotland) Order 2014:

- provides, in Scotland, for the nominal payment of £1 for equines killed for the purpose of controlling equine infectious anaemia

The Diseases of Animals (Approved Disinfectants) (England) Order 2007, The Diseases of Animals (Approved Disinfectants) (Wales) Order 2007 (as amended) and The Diseases of Animals (Approved Disinfectants) (Scotland) Order 2008:
- provides rules for the approval of disinfectants for use in relation to animal diseases


- article 5 provides, rules for the temporary control area

The Trade in Animals and Related Products Regulations 2011; The Trade in Animals and Related Products (Wales) Regulations 2011 and The Trade in Animals and Related Products (Scotland) Regulations 2012:

Glossary of abbreviations

ADPG  Animal Disease Policy Group
APHA  Animal & Plant Health Agency
CVO  Chief Veterinary Officer
DEFRA  Department for Environment, Food & Rural Affairs
EDC  Equine Disease Coalition
EIA  Equine Infectious Anaemia
ELISA  Enzyme-Linked Immunosorbent Assay
HBLB  Horserace Betting Levy Board
IDHO  The Infectious Diseases of Horses Order 1987
IP  Infected Premises
NEEG  National Emergency Epidemiology Group
NEG  National Experts Group
OIE  Office International des Epizooties (World Organisation for Animal Health)
TPA  Tripartite Agreement