

reluctance to move, stilted hindlimb gait and intermittent lameness in October 2016. Lumbosacral diskospondylitis was diagnosed with clinical signs responding to anti-inflammatories but recurred following cessation of treatment. Following two positive results on serological testing for *B canis* in March 2017, a sample of whole blood was submitted to APHA for cultural confirmation. *Brucella* was readily isolated and confirmed as *B canis* by phenotypic and molecular approaches. The dog is currently undergoing treatment with an eight-week course of doxycycline with a good response to date.

This represents the second culture-confirmed case of *B canis* this year in a dog imported from Eastern Europe. The previous culture-confirmed case occurred in a dog from Romania (VR, April 15, 2017, vol 180, p 384) and followed an earlier suspected case in a dog, also imported from Romania, reported on the basis of clinical signs and serology (McLaughlan and others 2017). The organism was not previously thought to be present in the UK. The case highlights again the need for veterinary professionals to be alert to the possibility of potentially zoonotic *B canis* in dogs, and particularly in imported animals, with reproductive or chronic inflammatory disease.

Adrian M. Whatmore, Lorraine Perrett,
Animal and Plant Health Agency,
Weybridge KT15 3NB
Martin Friggens, North Park Veterinary
Group, North Tawton EX20 2DT

Reference

MCLAUHLAN, G., PEPLINSKI, G., SPENCE, S. & BRUCE, C. (2017) Warning after dog tests positive for brucellosis. *Veterinary Times*

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PET TRAVEL

Second UK isolation of *Brucella canis*

WE wish to report a second culture-confirmed case of *Brucella canis* in the UK. A male dog, aged around five months, was imported from Bosnia in November 2015 and presented with