



Animal &
Plant Health
Agency

Zoonoses and Veterinary Public Health

Quarterly report Q1 – January to March 2026

Project FZ2100

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Background

Monitoring the occurrence of certain animal diseases can highlight the potential for zoonotic transmission and provide an indication of human, environmental, and foodborne health risks. These Zoonoses and Veterinary Public Health reports summarise the surveillance activities of the Animal and Plant Health Agency (APHA), APHA partner postmortem providers and Scotland's Rural College (SRUC) Veterinary Services, for zoonoses and infections shared between humans and animals in Great Britain. Data (which primarily relates to farmed animal species) gathered by the network of Veterinary Investigation Centres are used for the production of the quarterly and annual report summaries. Quantitative diagnostic data for all of Great Britain is provided by the Veterinary Investigation Diagnosis Analysis (VIDA) surveillance system. Summaries of veterinary public health investigations into incidents and outbreaks of zoonotic disease and associated activities are also included. This report covers the relevant VIDA data and zoonoses investigations for Quarter 1 (January to March) 2026.

The Zoonoses and Veterinary Public Health project (designated the FZ2100 project) is funded by Defra, the Scottish Government and the Welsh Government through the APHA's Bacterial Diseases and Food Safety portfolio. The FZ2100 project also uses returns from scanning surveillance projects.

This report provides information about non-statutory zoonoses, as well as *Coxiella burnetii* (Q fever), avian chlamydiosis (in psittacines), and brucellosis in dogs, which were made reportable in Great Britain in 2021. The detection of *C. burnetii* and brucellosis in dogs were made reportable through amendments to the Zoonoses Order. The Psittacosis (Ornithosis) Order is the legislation that covers avian chlamydiosis. Non-statutory zoonoses are defined as any zoonoses for which no specific animal-health derived legislation exists and so excludes *Salmonella* and those diseases which are compulsorily notifiable in specified animal species, for example, tuberculosis (TB), which is notifiable in all mammals. Information concerning notifiable and other reportable zoonoses is recorded elsewhere, some under specific projects such as FZ2000 (*Salmonella*).

1. General scanning surveillance

1.1 Zoonoses VIDA data for Great Britain: January to March 2026

Table 1 (collated 15 May 2026) summarises general scanning surveillance VIDA data for clinical diagnoses of potential zoonotic organisms that may be shared between animals and humans from specimens submitted to APHA, APHA partner postmortem providers and SRUC Veterinary Investigation Centres for the 3-month period between January and March 2026. The table also compares the latest findings with the data for Quarter 1 for the preceding 2 years, 2025 and 2024. It includes rare zoonotic infections and those for which zoonotic potential is confined predominantly to immunocompromised individuals. Diagnoses use strict criteria and are recorded, once per incident, using the VIDA system.

The list is subject to selection, submission, and testing bias. It is not definitive and excludes notifiable and most reportable diseases, notably salmonellosis, which is recorded elsewhere.

Table 1. General scanning surveillance: Zoonoses VIDA data for Great Britain, January to March 2026 – all species

Table notes:

- species columns are: Cattle; Sheep; Goats; Pigs; Birds; Misc. which includes miscellaneous and exotic farmed species; and Wildlife
- ‘-’ in a cell indicates that a diagnosis is not available for that species
- birds: data for birds includes domestic and wild birds
- wildlife: data for wildlife includes mammals only

VIDA codes	Diagnosis	Q1 2024	Q1 2025	Q1 2026	Cattle	Sheep	Goats	Pigs	Birds	Misc.	Wildlife
311	Babesiasis	0	0	0	0	-	-	-	-	-	-
258, 659	<i>Brachyspira pilosicoli</i> (intestinal spirochaetosis)	15	28	21	-	-	-	21	0	-	-
013	<i>Campylobacter</i> fetopathy	81	109	87	2	85	0	-	-	0	0
282	Chlamydiosis (<i>C. psittaci</i>)	0	0	0	-	-	-	-	0	-	-
014	<i>Chlamydia abortus</i> fetopathy	142	123	114	0	114	0	-	-	0	0
732	<i>Corynebacterium pseudotuberculosis</i> (CLA)	4	2	1	-	1	0	-	-	-	-
318	Cryptosporidiosis	75	77	43	39	3	0	1	0	0	0
362	Cysticercosis	0	1	0	-	0	0	-	-	-	-
193	<i>Dermatophilus</i> infection	0	0	0	0	0	0	-	-	0	0
022, 133, 615	Erysipelas	3	4	3	-	0	0	3	0	0	-
371, 372, 373	Fasciolosis	53	69	37	17	18	1	-	-	1	0
363	Hydatidosis	0	0	0	-	0	-	-	-	-	-

VIDA codes	Diagnosis	Q1 2024	Q1 2025	Q1 2026	Cattle	Sheep	Goats	Pigs	Birds	Misc.	Wildlife
015, 136, 139	Leptospirosis (all categories)	0	2	0	0	0	0	0	-	0	0
016, 140, 150, 189, 711	Listeriosis (all categories)	63	87	55	15	40	0	0	0	0	0
217	Louping ill	2	2	1	0	1	-	-	0	0	-
225	Orf (parapox virus)	7	8	1	-	1	0	-	-	0	-
152, 153, 157, 158	<i>Pasteurella multocida</i> pneumonia (pasteurellosis)	85	92	53	33	12	0	7	1	0	0
223	Pseudocowpox (parapox virus)	0	1	0	0	-	-	-	-	-	-
027, 262	Q Fever (<i>Coxiella burnetii</i>)	1	0	0	0	0	0	-	-	0	0
374	Red Mite (<i>Dermanyssus gallinae</i>)	0	0	0	-	-	-	-	0	-	-
195	Ringworm	1	2	1	1	0	0	0	0	0	0
379, 392	<i>Sarcoptes scabiei</i> infection	1	1	0	0	-	0	0	-	0	-
024, 171, 172, 644	Streptococcal infection (excluding bovine mastitis)	47	32	32	0	0	0	31	0	0	1
745	Swine influenza	16	7	9	-	-	-	9	-	-	-
026, 315	Toxoplasmosis (including fetopathy)	85	58	40	-	40	0	-	-	0	0
142	Tuberculosis (excluding bovine <i>M. bovis</i>)	11	2	5	-	0	0	0	0	5	0
034, 154	Yersiniasis (including fetopathy)	3	15	6	1	2	1	1	0	1	0

The table is intended only as a general guide for veterinary and public health professionals to the diagnosed occurrence of animal-associated infections in predominantly farmed animal species in Great Britain.

Common minor diseases of zoonotic importance, such as orf and ringworm, are grossly underestimated by the VIDA recording and reporting system, as it is unusual for practising veterinary surgeons to submit material for diagnosis.

Further information on scanning surveillance activities is available at [Animal disease scanning surveillance at APHA - GOV.UK](#)

1.2 Highlights from APHA and SRUC disease surveillance centres

Some diagnoses are more common during specific times of the year, for example *Campylobacter* fetopathy, *Chlamydia abortus* fetopathy, and Toxoplasmosis are more commonly diagnosed during Q1 as this is the peak time of year for ovine abortion submissions. Further information on scanning surveillance activities (covering avian, cattle, small ruminant, pigs, miscellaneous and exotic farmed species, and wildlife) is available at [Animal disease scanning surveillance at APHA - GOV.UK](#). Additional information on surveillance diagnoses is provided in the monthly surveillance reports and in the disease surveillance dashboards, which can be found at [View APHA surveillance reports, publications and data - GOV.UK](#).

Ovine abortion diagnoses

February and March are usually the busiest months for ovine abortion investigations. Veterinary Investigation Officers (VIOs) provide zoonoses advice to private veterinary surgeons to pass on to their farm clients when potentially zoonotic organisms are identified. Potential zoonotic organisms that may be detected during ovine abortion investigations include *Chlamydia abortus*, *Toxoplasma gondii*, *Campylobacter* sp., *Listeria* sp., *Salmonella* sp., *Yersinia* sp. and *Coxiella burnetii*. Table 1 includes ovine abortion diagnoses with the most common causes being *C. abortus* (the cause of ovine enzootic abortion), *Campylobacter* and Toxoplasmosis. Data for the 2026 lambing season will be provided in the Q2 quarterly report.

In addition to the zoonotic advice provided by VIOs, advice on the risks of infections that may be a risk to pregnant women from parturient or post-parturient animals is available on the GOV.UK website: [Pregnancy: advice on contact with animals that are giving birth](#). Public Health Wales have issued similar guidance: [Advice issued to pregnant women during lambing season - Public Health Wales \(nhs.wales\)](#).

2. Specific scanning and targeted surveillance and other studies

2.1 Campylobacter

Human campylobacteriosis is usually caused by the thermophilic *Campylobacter* species *C. jejuni* and *C. coli*, which can be found in a wide range of livestock, poultry and wildlife species. Poultry and poultry meat products are the main sources for human infection, and campylobacteriosis is the most commonly reported bacterial cause of food poisoning. The United Kingdom Food Security Report 2024 indicated that there were 71,710 laboratory-confirmed human infections in 2023, 66,327 in 2022, and 67,546 in 2021. There is additional data for England available at: [Campylobacter data 2016 to 2025 - GOV.UK](#)

Further information on *Campylobacter* including reducing the spread of zoonotic and veterinary diseases is available at: [Campylobacter: a silent risk in our farm animals, wildlife and the wider environment – APHA Science Blog](#).

This Zoonoses and Veterinary Public Health report does not cover foodborne illness related to *Campylobacter* infection. However, non-thermophilic *Campylobacter* strains (such as *C. fetus*) can also, rarely, cause severe systemic illness in people. Only *Campylobacter* fetopathy numbers are detailed in Table 1 above.

England and Wales

In Q1 2026 there were 110 *Campylobacter* isolates identified by the APHA Starcross laboratory which were mainly from ruminant abortions and comprised:

- Bovine – a total of 4 isolates: 1 *C. fetus fetus*, 2 *C. fetus venerealis intermedius* and 1 *C. jejuni*.
- Ovine – a total of 106 isolates: 2 *C. coli*, 96 *C. fetus fetus*, 5 *C. jejuni*, 2 *C. sputorum* and 1 *C. lari*. *Arcobacter* sp. (which is a *Campylobacter*-like bacterium and an emerging foodborne and waterborne zoonotic pathogen) was detected in two ovine samples.

2.2 Leptospirosis

Targeted surveillance by APHA for leptospirosis is variously achieved by analysis of results from:

1. Real-time polymerase chain reaction (RT-PCR) for pathogenic leptospires on appropriate diagnostic samples.
2. Microscopic agglutination test (MAT) antibody testing on sera submitted for disease diagnosis; or for monitoring and export (mainly dogs). Diagnostic MAT titres are considered seropositive at 1/100 or above (1/50 for *L. Hardjo bovis* in cattle).

Serology results are influenced by vaccination (dogs and cattle). MAT results are also very dependent on the range of serology (pools or single serovars) undertaken.

Kidney specimens examined by RT-PCR for pathogenic leptospires

Between January and March 2026, a total of 57 kidney specimens (kidneys from 1 alpaca, 21 cattle, 31 pigs, and 4 foxes) were submitted for testing by RT-PCR for pathogenic leptospires. There were no positive kidney test results. Seven of the submitted samples (two bovine and five porcine) were unsuitable for testing because they were too autolysed.

Serology for *Leptospira* serovars

During Q1 2026, a total of 600 serum samples from a range of species were tested for *Leptospira* antibodies. Of these, 109 canine sera were tested for export purposes and 24 canine sera were tested for diagnostic purposes. There were 82 porcine samples which were tested for *L. Bratislava*, and 359 bovine samples were tested for *L. Hardjo bovis*.

Table 2. Single *Leptospira* serovars tested in dogs, pigs, and cattle expressed as percentage positive for the number of samples tested for each serovar

Table notes:

- more than one serovar may be detected in a serum sample
- abbreviations used in this table:
 - Canine E. = canine export (dogs tested for export purposes)
 - Canine D. = canine diagnostic (dogs tested for diagnostic purposes)
- the total tested columns are the numbers of samples tested for each serovar
- % positive is the percentage of each tested serovar which gave a positive result, for example 19.3% of 109 canine export samples tested were positive for *L. Canicola* antibodies

Species	Serovar	Total tested: Q1 2026	% positive	Total tested: Q1 2025	% positive
Canine E.	<i>L. Canicola</i>	109	19.3	87	17.2
Canine E.	<i>L. Icterohaemorrhagiae</i>	9	0	3	0
Canine D.	<i>L. Australis</i>	1	100	1	100
Canine D.	<i>L. Autumnalis</i>	1	0	0	0
Canine D.	<i>L. Bratislava</i>	23	0	22	0
Canine D.	<i>L. Canicola</i>	16	37.5	27	14.8
Canine D.	<i>L. Copenhagenii</i>	24	29.2	24	12.5
Canine D.	<i>L. Grippotyphosa</i>	0	0	1	0
Canine D.	<i>L. Icterohaemorrhagiae</i>	23	13	29	3.4

Species	Serovar	Total tested: Q1 2026	% positive	Total tested: Q1 2025	% positive
Canine D.	<i>L. Pomona</i>	0	0	0	0
Canine D.	<i>L. Sejroe</i>	0	0	2	50
Porcine	<i>L. Bratislava</i>	82	23.2	51	31.4
Bovine	<i>L. Hardjo bovis</i>	359	7.8	362	7.7

In addition to single serovars, *Leptospira* pools (multiple serovars) are tested on a significant number of canine, porcine, and bovine samples. Pooled serovars are not included in the above data.

***L. Hardjo* bulk milk antibody tests**

In March 2026 individual milk and bulk milk antibody testing by enzyme-linked immunosorbent assay (ELISA) were discontinued by APHA. This means that data from bulk milk test results of bulk tank samples submitted from dairy herds for monitoring purposes will no longer be reported. There are other veterinary laboratories which offer ELISA tests on bulk milk.

2.3 Mycobacteria (excluding bovine cases of *M. bovis*)

Since *Mycobacterium bovis* became notifiable in all species in 2006, the number of samples examined by APHA has increased, particularly from pets and camelids. Samples from pigs are mainly submitted by Official Veterinarians at abattoirs. TB (*M. bovis*) in non-bovine animals' data is published at [Data on TB in Non-Bovine Species - GOV.UK](#)

Table 1 includes animals and samples which have been submitted under the scanning surveillance program and in which a diagnosis of tuberculosis has been reached. The VIDA code criteria includes finding suspicious lesions followed by demonstration of the organism by staining smears and microscopy, culture, PCR and histopathological examination. There were 5 VIDA-coded TB cases between January and March 2026 which were in 2 alpacas, 2 llamas and 1 cat. *Mycobacterium microti* was detected in 1 alpaca and the cat. *M. bovis* was detected in the other alpaca and in 1 llama. For the second llama the species of mycobacterium was not stated. When TB infections are suspected VIOs provide zoonoses advice for private vets to pass on to their clients.

The [Small Animal Expert Group Annual Summary 2024](#) includes an interesting article on TB in cats caused by *Mycobacterium caprae* infection. Sixteen feline tuberculosis cases were identified across England and Scotland. All cases were in domestic cats being fed the same raw meat-based diet. Infections with *M. bovis* and *M. microti* (both members of the Mycobacterium TB Complex) are the most frequent cause of clinical TB in domestic cats in the UK. By contrast, *M. caprae* infections in animals are extremely rare in the UK and were historically restricted to a few isolated cases in deer and cattle in the South East of England. The cases in the 2024 report represent the first reported cluster of feline *M.*

caprae infections worldwide. Due to the risk of zoonotic transmission, APHA informed the public health authorities of each bacteriologically confirmed case. This was a collaborative investigation with the University of Edinburgh, which also demonstrates the value of engagement between organisations.

2.4 Q fever

PCR is used to confirm the presence of *Coxiella burnetii*, typically following the identification of suspicious acid-fast bodies in Modified Ziehl-Neelsen (MZN)-stained smears of placentae (or foetal samples). MZN is a screening test performed on all received placental samples. Confirmation of *C. burnetii* as a cause of fetopathy requires histopathology and immunohistochemistry of placental tissue, in addition to a positive PCR result. In each case when *C. burnetii* is detected by PCR, public health colleagues are informed of the incident and the zoonotic potential of this organism is highlighted to the farmer and private veterinary surgeon, with the provision of [an advisory sheet about Q fever](#).

Comparisons of *C. burnetii* data with previous years should be made with caution because from April 2021 Q fever has been a reportable disease. Since 2023 there has been a notable increase in bovine test requests for the APHA *C. burnetii* PCR test. It is important to note that an increase in the detection of *C. burnetii* does not necessarily equate to an increased prevalence.

During the period January to March 2026 a total of 70 (31 bovine, 1 caprine and 38 ovine) samples were tested for the presence of *C. burnetii* by PCR. For the samples which were submitted from British farms, *C. burnetii* was detected in 4 of the bovine samples and in 11 of the ovine samples. The *C. burnetii* PCR has been validated for placental and foetal fluid samples, although other samples are also tested on agreement with the customer.

Table 3. Samples tested by PCR for the detection of *C. burnetii* during January to March 2026

Table notes:

- Species tested comprised cattle, sheep and goat
- Negative – *C. burnetii* was not detected; Positive – *C. burnetii* was detected
- The data for the positive samples, positive submissions and positive farms is for samples from British farms (GB Positive).
- Sample types this quarter included placenta, foetal fluid, foetal tissue, vaginal swabs, milk replacement powder and colostrum replacement powder.
- The positive samples are listed in the table, with the exception of the milk replacement powder and the colostrum replacement powder, which were submitted from one of the positive sheep farms.

Species	Samples tested	Negative	GB Positive	Positive Submissions	Positive farms	Placenta positive	Foetal tissue positive	Stomach contents positive	Swab positive
Cattle	31	26	4	4	4	3	0	0	1
Sheep	38	25	11	6	4	4	3	2	0
Goat	1	1	0	0	0	0	0	0	0

All four positive cattle submissions were from four dairy farms, all in England. For sheep, two of the positive farms were in England and two of the positive farms were in Wales. The PCR does not differentiate between viable and dead organisms, i.e. dead *C. burnetii*, if present in milk products, will be detected.

In addition, during Quarter 1 2026 the detection of *C. burnetii* in 19 bovine bulk milk samples by PCR at an overseas laboratory (18 from English dairy farms and 1 from a Welsh dairy farm) were reported to APHA. During this period a private veterinary laboratory reported the detection of *C. burnetii* in six submissions. Two of these were from English dairy farms, both comprising bovine abortion investigations. The other four positive submissions were from the same four positive sheep farms described above. Testing of the sheep samples was initially done at the private veterinary laboratory with additional testing of samples at APHA.

2.5 *Streptococcus suis*

Streptococcus suis isolates from diagnostic material submitted to APHA and SRUC Veterinary Investigation Centres are typed further for disease surveillance purposes. The submission numbers and serotypes from porcine diagnostic material submitted during the period January to March 2026 are shown below, with data for the previous 2 years (Q1 2025 and Q1 2024) for comparison.

Table 4. *Streptococcus suis* serotypes from porcine diagnostic material

Table notes:

- UT = untypeable
- 1/2 = is a recognised distinct serotype which reacts with both 1 and 2 antisera

	1/2	1	2	3	4	5	6	7	8	9	13	14	19	23	31	UT	Total
Q1 2024	1	2	7	1	-	2	-	6	2	1	1	1	-	1	-	5	30
Q1 2025	2	3	7	3	-	1	-	3	1	-	1	1	-	-	-	7	29

	1/2	1	2	3	4	5	6	7	8	9	13	14	19	23	31	UT	Total
Q1 2026	3	-	9	1	5	-	1	2	-	-	-	1	1	-	2	3	28

Serotype 2 was the most common serotype in Q1 for all three years, 2024, 2025 and 2026.

2.6 Toxoplasmosis

Serological examinations for *Toxoplasma gondii* using the latex agglutination test (LAT) are undertaken by APHA on sera submitted to Veterinary Investigation Centres. The findings presented below provide a summary of the serological status of samples submitted for diagnosis, monitoring and screening purposes but do not constitute a structured survey. Positive samples, as defined here, have LAT titres of 1/64 or greater and indicate a history of exposure to this protozoan parasite. Toxoplasmosis as a cause of fetopathy in sheep and goats is diagnosed through antigen (PCR) testing of placental cotyledon.

During the period January to March 2026 of the 26 sheep samples submitted for Toxoplasma serology 8 were positive. The positive samples were from 6 submissions. Toxoplasma fetopathy figures for sheep and goats are included in Table 1.

3. Investigations into zoonotic and potentially zoonotic incidents

Protocols for the investigation of zoonotic disease incidents in England and Wales are set out in the [Guidelines for the Investigation of Zoonotic Disease \(England and Wales\)](#).

There is similar [guidance on the investigation and management of zoonotic disease in Scotland](#).

Advice for members of the public planning a trip to animal-associated visitor attractions, and other information, can be found on the [UK Health Security Agency \(UKHSA\) zoonotic disease webpage](#).

The Industry Code of Practice for preventing or controlling ill health from animal contact at visitor attractions is available on the [National Farm Attractions Network website](#).

The APHA-assisted investigations described within sections 3.1 Cryptosporidiosis, 3.2 STEC (Shiga toxin-producing *Escherichia coli*) and 3.3 *Corynebacterium ulcerans* cover England and Wales. During the investigation of cryptosporidiosis and STEC human outbreaks APHA provides comprehensive veterinary advice including advice on identified deficiencies to assist farm businesses to comply with the Industry Code of Practice for preventing or controlling ill health from animal contact at visitor attractions.

3.1 Cryptosporidiosis

Investigations to assist in human outbreaks of cryptosporidiosis where an animal associated source is suspected are undertaken at the request of Consultants in Communicable Disease Control (CsCDC) of the UKHSA and Public Health Wales (PHW) and in collaboration with the National Cryptosporidium Reference Unit, Swansea, and follow jointly agreed guidelines. Consultants in Public Health Medicine (CsPHM) lead on these zoonoses investigations in Scotland.

Quarter 2 (Q2) is traditionally the busiest time for APHA cryptosporidiosis investigations and is related to the frequency of open farm visits undertaken by families or school groups around the Easter holiday and bank holidays. Contact with young ruminants, most commonly lambs, either through bottle-feeding or handling is a high-risk activity for the zoonotic spread of *Cryptosporidium parvum* in these settings. The availability and accessibility of appropriate and suitably located hand-washing facilities including soap, rather than antimicrobial gel (which is not effective for this pathogen) is extremely important. Prolonged close contact with animals, for example cuddling, is also a higher risk activity with potential for extensive clothing contamination.

Quarter 1 2026 summary

APHA provided advice within an Incident Management Team to assist with the investigation of two cryptosporidium cases involving two students who attended an agricultural higher education setting. There were other farms that were potential sources of infection. An update will be provided in the next quarterly report.

3.2 STEC

Shiga toxin-producing *Escherichia coli* (STEC, formerly known as VTEC) outbreak investigations are undertaken, according to agreed guidelines, at the request of CsCDC of UKHSA and PHW (CsPHM in Scotland) where an animal-associated source is suspected. These investigations often also involve collaboration with other organisations, including the environmental health departments of local authorities and the Health and Safety Executive (HSE). Other STECs or whole genome sequence (WGS) types may be detected incidentally during the investigation of animal premises and advice is offered accordingly.

Quarter 1 2026 summary

There were no STEC zoonoses outbreaks which required APHA assistance during Q1 2026.

3.3 *Corynebacterium ulcerans*

Corynebacterium ulcerans was first isolated from cases of throat infection in humans in 1926, with zoonotic outbreaks initially associated with direct contact with farm animals or consumption of unpasteurised milk. More recently zoonotic incidents have increasingly

been potentially linked with contact with companion animals such as dogs and cats. *C. ulcerans* can be asymptomatically carried in the throat of some dogs and cats. *C. ulcerans* has also been isolated from skin lesions, nasal discharge, and other anatomical sites of clinically unwell animals. The organism can produce diphtheria toxin, which can cause human disease with the same clinical signs as cutaneous or respiratory diphtheria caused by *C. diphtheriae*. *Corynebacterium ulcerans* infections are neither statutorily reportable or notifiable in animals, but APHA is involved due to the public health risk these pose.

APHA assists public health colleagues in the investigation of human index cases of *C. ulcerans* where there has been animal contact. Similarly; for animal index cases, APHA supports the private veterinary surgeon in recommended next steps. In Q1 2026, APHA published guidance on gov.uk to support private veterinary surgeons in managing animal index cases: [Information for assistance with toxigenic *Corynebacterium ulcerans* animal index cases - GOV.UK](#) The guidance for the public health management of toxigenic *C. ulcerans* in companion animals in England is available online: [Public health management of toxigenic *C. ulcerans* in companion animals](#).

Quarter 1 2026 summary

During Q1 2026 APHA assisted with 24 pet index cases involving cats and dogs and three human index cases, Table 5. The pet index cases comprised 11 feline index cases and 13 canine index cases. Some of these households had no other pets. Of the households which elected to have the contact pets swabbed, *C. ulcerans* was detected in one case which was a contact dog of a canine index case. One feline index case, a cat with a nasal discharge, has not cleared infection following a course of antibiotics. The cat is receiving further treatment and will be re-swabbed to check for clearance of infection.

Table 5. Count of pet index and human index cases of toxigenic *C. ulcerans* during January to March 2026

Month	Index cases			
	Cat	Dog	Human	Total
January	4	4	1	9
February	3	2	1	6
March	4	7	1	12
Total	11	13	3	27

Of the three toxigenic *C. ulcerans* human cases, one had no contact with pets and one chose to test the contact pets, a dog and a cat. Toxigenic *C. ulcerans* was not detected in either pet.

3.4 Q fever (*Coxiella burnetii*)

In each case when *C. burnetii* is detected by PCR, public health colleagues are informed of the incident and the zoonotic potential of this organism is highlighted to the farmer and private veterinary surgeon, with the provision of [an advisory sheet about Q fever](#).

For all ruminant abortion investigations and reports of the detection of *C. burnetii*, APHA provides comprehensive advice to private veterinary surgeons, including information about optimising ruminant abortion investigations, laboratory testing, and zoonoses advice for private veterinarians to pass on to their clients.

Transmission of *C. burnetii* to humans is most frequently due to inhalation of contaminated aerosols or contaminated dusts. Aerosolised bacteria are spread in the environment by infected animals after normal births or abortion. Birth products contain the highest concentration of bacteria, but *C. burnetii* is also found in urine, faeces and milk of infected animals.

Quarter 1 2026 Investigations summary

During Q1 2026 APHA provided advice to public health colleagues regarding the zoonotic implications of the detection of *C. burnetii* in livestock at specific locations. For the majority of cases there were no reported zoonoses concerns, although occasionally there are queries regarding immunocompromised farming family members and / or staff with human health concerns that are passed on to public health colleagues.

3.5 Avian chlamydiosis (psittacosis)

Chlamydia psittaci, the causative agent of avian chlamydiosis (psittacosis), can cause serious human illness. The disease has been described in many species of birds, particularly in parrots, parakeets, budgerigars, and cockatiels. Other commonly affected birds include pigeons and doves. Ducks and turkeys may also be affected, but chickens less frequently. Birds can asymptotically carry the organism without any signs of disease, or they can become mildly to severely ill.

C. psittaci can lead to inapparent subclinical infection or acute, subacute, or chronic disease, characterised by respiratory, digestive, or systemic infection. The clinical signs are generally non-specific and vary greatly in severity, depending on the species and age of the bird and the *Chlamydia* strain involved. Humans are most likely to contract *C. psittaci* infection through inhalation of dust or aerosols contaminated by secretions from infected birds for example faeces, ocular and respiratory secretions. It is therefore important to follow current health and safety measures when in contact with birds. Further information on psittacosis infection is available online at: [Psittacosis - UKHSA guidance](#) and [Psittacosis - HSE factsheet](#).

Quarter 1 2026 summary

The detection of *C. psittaci* in psittacine birds is statutorily reportable to APHA. During Quarter 1 2026 there were no reports of the detection of *C. psittaci* in psittacine birds. There was a case involving a Great Tit which was found dead by a member of the public. This bird was submitted to the Garden Wildlife Health (GWH) project team. A sample of kidney was submitted to APHA Penrith Veterinary Investigation Centre. *C. psittaci* was detected by PCR. GWH colleagues informed the member of the public of the result highlighting zoonoses advice. There were no reported public health concerns.

4. *Brucella canis*

Since July 2020, there has been a large increase in the number of incidents of canine brucellosis due to infection with *Brucella canis*. APHA, in liaison with health protection agencies across Great Britain, has been involved in investigating these incidents. The UK Chief Veterinary Officer advised on this potential zoonotic disease in a letter published in the Vet Record in February 2021. Amendments to the Zoonoses Order in 2021 added dogs to the list of animals for which brucellosis is a reportable disease in Great Britain.

Further information is available in APHA's [Canine brucellosis: general information for veterinary staff - GOV.UK](#) and in our list of [Frequently asked Brucella canis testing questions - GOV.UK](#)

[General information for the public and dog owners is available on the GOV.UK website.](#)

The [Human Animal Infections and Risk Surveillance group \(HAIRS\) Brucella canis risk assessment](#) outlines the current risk to the UK human population from canine brucellosis.

The British Small Animal Veterinary Association (BSAVA) have published a [scientific document on Brucella canis](#)

From 7 October 2025, dogs commercially imported from Romania must have a negative *Brucella canis* test result [Brucella canis: testing dogs before import - GOV.UK](#)

Quarter 1 2026 summary

During the first quarter of 2026, there were 98 epidemiologically separate incidents where there was evidence of infection with *B. canis*. All were identified by serology and presented at least one other risk factor for *B. canis* infection and were reported to the relevant public health authorities. In this quarter, for 24 dogs that have previously tested positive, this was a second test, for 4 of the dogs this was third test and for one dog this was a fourth test.

In addition, 20 tested dogs were serologically positive for *B. canis* with no other risk factors identified and have not triggered an incident response.

Most incidents identified during this quarter involved the testing of a single dog, although this may be subject to change if further information about significant contacts becomes available.

Investigation into an incident that commenced in the last quarter of 2025, involving a dog breeder, is continuing with the cooperation and joint management of several different government departments. As a part of this incident 58 dogs have been tested so far and tracing is still ongoing.

In addition to providing information about *B. canis*, APHA's [Imported disease summaries for dogs and cats - GOV.UK](#) document provides a short summary of some other diseases that could be imported into the UK with the importation of dogs and cats. This list is not

exhaustive but provides a useful summary and signposts to further information for some conditions of concern.