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Hendra (HEV) EquiVacR vaccine and its use by veterinary surgeons in Queensland.

From Catherine Macleod
[REDACTED] Nimbin NSW 2480

Submission 1. “the development, trials and approval processes.”

1. Prior to the vaccine being fully registered I furnished the AVPMA and Zoetis (Ref No s-15-44045 V. also Ref No S-14-44232-V) Microchip number 900006000 209096) with reports regarding one of the adverse effects of the Hendra vaccine on my horse. I had understood that the report had to be in by 31st March 2015 to be included in the data classified. I received an email from APVMA saying that they had received my report on the 27th March 2015 and that they had considered it prior to registration of the product but had not included it in the data classified by 31st March 2015 prior to the registration of the product.(but had classified it on 4th May 2015).Zoetis emailed me to say that as the adverse vaccination event had taken 3 days to manifest he did not consider it due to the vaccination. The day after the product was registered I received an email from APVMA stating that they considered the reaction my horse experienced was possibly caused by the vaccine. I believe other horse owners also received this notification from APVMA even though they had submitted adverse reaction reports well prior to registration.(Zoetis represented by R L'Estrange).
2. If it takes on average of 20 years to for a human pharmaceutical product to be approved for general release (or 10 years if it is fast tracked) how can this Hendra vaccine be registered for usage within a few years?
3. I would submit that this trial was essentially flawed due to the failings of Zoetis and APVMA to, amongst other things,failing to conduct adequate trials and failing to acknowledge adverse effects from horse owners.

Submission 2. “the incidence and impacts of adverse reactions by horses following vaccination and the reporting of adverse reactions and economic impacts of the HEV Equivac R vaccine.”

1. On the 21st October 2014 my 30 year old gelding received his 4th Hendra vaccine shot as requested by his treating (veterinary) equine dentist. 3 days later he was found in the paddock with colic, a heart rate of 80 (very elevated), a temperature of 39.8 (very high), inappetance, depression and signs of colic. Vet was called and administered a variety of drugs, namely Sedivet, Lectade, Ketuprofen, Duprocilin and paraffin oil. Horse continued to be treated for 3 days after the event and has not fully recovered.

2. Five months after the second Hendra vaccination my horse developed a jagged saw tooth effect underneath the coronet band which gradually deepened and increased in size, while 2 other feet grew huge “V” shapes down from coronet band. This was on the hoof wall and eventually grew out completely but not till 12 months after the last Hendra vaccination on October 2014. 2 Equine vets were sent photos of the hoof but could come to no definite conclusion as to the cause of the event.
3. Economic Impacts to owner: Cost of vet services for colic episode \$449.70. Ongoing economic impacts – now horse is unable to be vaccinated it is necessary for the owner to have annual titre testing done in order for vets to attend and treat any episodes where symptoms may be those of Hendra. Cost of titre test \$320 vet travel fees \$150 vet PPE procedure \$120 plus consultation fees vet and processing fees of blood sample about \$60. This would be well over \$600 per year!

Submission 4 “whether the guidelines/procedures required for veterinarians attending horses that are not vaccinated against HEV as proportionate to the circumstances.”

1. Guidelines are not proportionate to consequences – all 7 human deaths occurred by doing very invasive procedures without PPE e.g nasal lavaging, autopsy.

Submission 5 “impacts on the equine industry and the economy arising from veterinarians applying a policy not to treat unvaccinated horses.

1. Impacts on the equine industry and economy will be massive and far reaching if all vets apply a policy of not treating unvaccinated horses. My belief is that there has been a multitude of adverse reactions to horses as a result of the vaccine (and by adverse reactions I don't just mean localised swelling) and those owners will obviously not be vaccinating again. Veterinary practices will become increasingly unviable as unvaccinated horses will not be attended. Racing stables and all equine stables will no longer be keeping equines at the same numbers as the cost of the compulsory vaccine dictates. This will have a flow on effect to all aspects of the industry, employment and the economy in general. Many people will get out of horses altogether as I am intending to do.