A SUBMISSION TO THE HENDRA VIRUS VACCINE INQUIRY

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I am a retired veterinarian living in the Sunshine Coast hinterland on a small farm. There are usually between 10 and 15 horses on this property which is in the "endemic flying fox zone". There have been cases of Hendra virus infected horses in the area and there is a substantial horse population.

My greatest concern is that a horse infected with this virus may show no or minimal symptoms up to days before overt signs of ill health show. Even then, the presenting symptoms vary greatly and could be confused with a number of other causes.

I have to provide protection to members of my family (grandchildren) and other visitors to the property. Also the welfare of the horses, some of which occasionally leave the property to attend equine events, coming in contact with other horses and members of the public, is a responsibility not to be taken lightly.

It is noted that the committee is required to consider the points numbered 1 to 6 as "Terms of Reference". The following comments will address those points.

Point 1. The development, trials and approval processes.
These processes have been a "success" story for Australian science, having been recognised world-wide as a successful response to contain and protect people and animals from an emerging enzootic viral disease.

The emergence of this previously unknown virus suddenly in 1994, in the heart of Brisbane's horse training and racing suburb of Hendra, was a shock and a "wake-up" call. The implications for animal welfare and human health were sudden and serious. The capacity and resources of Governmental regulatory responses (human and animal health) were severely tested. The public outcry at that time called for a response to identify the cause and implement protection for people and animals. Governments (taxpayers) eventually provided some $12 million to support concerted efforts by scientists to solve the mystery and paved the way for an effective vaccine to protect horses, and consequently humans and possibly other domestic animals such as dogs etc.

After the production and use of the new vaccine, there has been a vocal "Anti-Vaccination" Campaign which has led to this inquiry.

Notably, people who initially agitated for decisive action to develop a method of protection are now the same groups and individuals who have taken to "social media", to lobby politicians, seeking attention through "sensational" reporting in television and print media, to object to the use of the vaccine. Initially, their understandable concerns were for their "pet" animal, or their economic interests in horse businesses, or disruption caused to public equine sports and social activities. Now they are citing reasons not to vaccinate such as "cost", "side effects", etc…….all of which have no substantive evidence to support those positions. For example, "cost" of vaccinating has to be balanced against not only other costs of responsible ownership horse welfare obligations, but also

workplace safety and human health considerations. The cost of the vaccine is inconsequential to the "total costs" of responsible horse ownership.
Regrettably the "anti-vaccination" argument has elements of irrationality generated by "self-interests". There is downright hypocrisy on the part of some people in the equine industry who have changed their opinions based on spurious (sometimes self-generated) information and gossip. Demonstrable political "nervousness" in response to "social media" campaigns has resulted in this inquiry process, at further expense to taxpayers. Unfortunately this "response" to the "anti-vaccination campaign" will also undermine public confidence in established scientific and regulatory processes of University researchers, Government departmental scientists (Health, Primary Industry, and Workplace Safety), CSIRO, AARL, and regulatory processes of APVMA. Loss of confidence in these frameworks will place Biosecurity of animal production and human health in jeopardy. Imagine the chaos if diseases such as Rabies, Foot and Mouth, or several other exotic diseases, should penetrate the biosecurity barriers and invade the highly susceptible animal and human populations. The government needs to demonstrate confidence in the "systems" that are in place which are based on sound science. Other ways for politicians to address the "concerns" of this vocal anti-vaccination lobby need to be considered.

Point 2. I note this point will be covered by FACTUAL information presented by others. However, my PERSONAL experience with this vaccine has been that I have not seen any side effects in horses vaccinated on my property. Having all my horses vaccinated, I will not allow unvaccinated horses on my property. My horses have had minor side effects, such as needle site swelling, with other vaccines such as tetanus and strangles vaccine, but NOT with HeV.

Point 3. Risks and Cost/Benefits will be provided to the committee by others.

Point 4. I agree with guidelines/procedures recommended by Departments and Professional bodies in regard to unvaccinated horses in flying fox endemic geographical areas.

Point 5. *Impacts on the equine industry and the economy arising from veterinarians applying a policy not to treat unvaccinated horse.*
Veterinarians, knowing the risks to the horse, to themselves and horse owner/handlers AND the legal risks under Work Safe law, are ENTITLED to make Professional decisions about how, when and why they would attend an UNVACCINATED horse. Similarly, vets have to make "judgement" calls in the interests of workplace safety where, say, owners have lack of safe facilities to treat horses.

It is unavoidable that vets will incur extra costs associated with protecting themselves and others and will have to pass these costs on to the client. This could include a return on capital outlaid in facilities for quarantine or transport purposes. Horse owners should bear in mind that if they do not vaccinate and have to seek veterinary assistance there will be increased fees.

Severe repercussions would occur, for example, an unvaccinated horse, with perhaps undetected symptoms, attended an event eg a pony club, show, campdraft, race meeting, yearling sales. If the horse exhibited suspicious symptoms at the event, a vet (in full PPE and following protocols) would have to proceed to take samples for diagnostic purposes and there may be a delay of 48 to 72 hours for a result. In the meantime, all horses and people at the event would have to be monitored. Such a scenario could be catastrophic for the event organisers, the participants and the industry. Therefore, it should be mandatory that for horses from flying fox areas:-

- ALL HORSES ATTENDING PUBLIC EVENTS SHOULD BE VACCINATED AGAINST Hendra virus.

- ALL HORSES IN GEOGRAPHICAL FLYING FOX AREAS (as designated by appropriate government department) MUST BE VACCINATED.

There are many racetracks (and other equine gathering points) in coastal Queensland and New South Wales where horses from flying fox areas congregate. It is not unusual for, say, a racehorse to exhibit signs of sudden illness (eg colic, heat stress, muscle soreness and gait abnormalities,) at a race meeting. The difficulty is to differentiate such symptoms from unvaccinated racehorses. This presents a risk to people, for example swab attendants, strappers, jockeys etc who come in unavoidable close contact with horses and body fluids (blood, urine, saliva, sweat etc.) where it is impractical to use PPE. Therefore, at least as a preventative measure, rules and regulations of horse events should require that:-

- ALL HORSES AT EVENTS SHOULD BE VACCINATED. (An "event" being where numbers of horse are congregated for "public" purposes.)

Point 6. Workplace Health and Safety policy and procedures in the equine industry needs to be developed in close consultation with participants. There are many and varied interactions between humans and horses.
The requirements of compliance/noncompliance with work safe laws could impose a greater costs and have "economic/social" impacts on the "industry", possibly greater than HeV vaccination costs.

Conclusion. The Welfare of Animals is critically important. Having strong emotional attachments to animals is a good thing if it results in responsible ownership obligations which mean the animals are well nourished, housed and protected from diseases and are not exploited cruelly.
The potential costs (to horses and humans) of not vaccinating horses in a geographical flying fox zone are too great to ignore.
Fortunately the vaccine is available and effective. The alternative of moving to a flying fox/ Hendra free area does not have to be a solution.
I concede that I have a "cost advantage" in being able to do my own veterinary work. However, I make this submission in the sincere belief that if "cost" is THE factor preventing people from vaccinating their horses against Hendra virus, then maybe they should re-consider having ownership of, and responsibility for horses in this flying fox zone.