

SUBMISSION TO QLD Hendra Inquiry – 22.4.16

Derek Major BVSc MACVSc CMAVA

1. I make this short submission from a personal standpoint. My views are also represented in submissions from:
 - Agnes Banks Equine Clinic
 - Australian Veterinary Association
 - Equestrian NSW

2. My relevant background includes:
 - Veterinarian in equine practice 37 years
 - Practice Principal of a 9 person equine-only practice near Sydney
 - Past Chairman and current elected Board Member of Equestrian NSW
 - Past President and Board Member of Australian Equine Veterinary Association (AEVA/EVA)
 - Past Board Member of Australian Veterinary Association (AVA)
 - Honorary Veterinary Advisor and Veterinarian/Chief Veterinarian to the Royal Agricultural Society of NSW (RAS NSW)
 - Federation Equestre Internationale (FEI) Head Veterinarian (AUSTRALIA) for a number of years
 - Horse rider and competitor

3. My first personal encounter with the Hendravirus issue was some 16 years ago. As Chief Veterinarian to the RAS I was confronted with a horse of Queensland origin which died suddenly in a public area after a short period of malaise. Hendravirus was scarcely considered at that time, until I had transported the horse to my veterinary hospital and observed the post-mortem lesions to be identical to those reported for Hendravirus. Swift and efficient work by Dr Rod Hoare from NSW DPI in fast tracking testing at Geelong Australian Animal Health laboratory relieved my anxiety within 24 hours, but the incident caused me to reflect on the potential disaster to the Show public, my staff and family, and the commercial operation of the Show had the horse tested positive.

4. As the then Chairman of Equestrian NSW when the Hendra issue became more acute and a vaccine was fast tracked I am on record as being the most measured and conservative in instituting a vaccination policy for the membership. I felt, and still do, that good hygiene would almost eliminate the risk of horse to human transmission and I felt comfortable with my own risk.

5. A number of factors caused me to revise my opinion in favour of a risk-assessed vaccination policy for Equestrian NSW. These were:
 - A clear message from those with legal knowledge, and an understanding of Workplace Health and Safety legislation came through, to the effect that the Board had a duty to exercise any practical risk management practice to reduce the likelihood of a catastrophic event, however uncommon.
 - There appeared at the time to be an exponential increase in the number and frequency of Hendra events in QLD and northern coastal NSW
 - Cases were being recorded further South than in previous years
 - In 2 NSW events there had been significant human exposure for some time prior to the disease being recognised.

6. These factors caused my Board and myself to reconsider its policy position. It was resolved a prudent policy would recommend that event organisers enforce vaccination where conditions of the show required involuntary exposure to Hendravirus, to membership, their horses and the public. The Hendra policy of ENSW and Equestrian Australia is currently suspended due to member lobbying.

7. As a veterinarian practicing outside the known disease range but within the potentially endemic area I find the disease risk difficult to manage. I am obliged to manage certain cases as Hendra suspects, causing both myself and the client considerable angst. Optimum outcomes for horse welfare are potentially compromised. For example I am reluctant to transport a recumbent or neurological horse to my clinic if its Hendra status is unknown. It is then likely to lie in the sun or be euthanased.

8. I am also sympathetic to my colleagues who practice within the “Hendra zone”, and who are genuinely fearful of contracting the disease. I recognise that a number of them have simply walked away from horse practice. I note that the death and disease in humans has only ever occurred where Hendra had not been considered. To suggest that equine veterinarians live and practice in biosecurity outfits is ludicrous.

9. “Biosecurity” sounds like a panacea but it is far from that. Try telling teenage girls not to kiss their horse on the muzzle!

10. “Reactions” to Hendra vaccination are wildly exaggerated. Of the last 4000 doses administered at my clinic I have only personally observed 2 “reactions”. Neither was life threatening, and both made a complete recovery within one week.

11. The current vaccination requirements are unnecessarily costly and onerous, as well as impractical. I do not believe it is necessary to restart a priming sequence if a vaccinated horse lapses.

12. I believe it would be possible to gain consensus from the relevant experts in formulating a sensible, practical, cost effective and scientifically valid definition of "Hendra protected" which would reduce the risk of transmission to humans or horses to a level approaching zero. This definition could be applied where appropriate within the horse industry.

Agnes Banks, NSW 2753