

19 April 2016

Mrs Donna Anderson  
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Redland Bay Q 4165  
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To: Research Director  
The Queensland Parliament - Agriculture & Environment Committee  
George St  
Brisbane Q 4000

**Inquiry: Hendra Virus Vaccine & Its Use by Veterinary Surgeons in Queensland**

**Subject: Vaccinating for HeV - The Impact of the “No Vaccination - No Treatment” Policy:  
Do Horse Owners really have a Choice?**

Dear Research Director & Committee Members,

On 18 March 2016, my local veterinary practice, whom I have used for over 20 years, told me that they could not attend my horse with an infected leg, unless they came out & vaccinated my horse at the same time for HeV. This is a popular mantra running throughout Queensland Veterinary Practices & spreading through NSW also :

**“vaccinate or we cannot come out and treat your horse.”**

Dr David Lovell says “.. the situation for veterinary interaction with unvaccinated horses has now become untenable” ... because veterinarians are at risk of prosecution from Qld Workplace Health & Safety. (Item 1)

The upshot of this no vaccination- no treatment policy is that **unvaccinated horses are denied their rights to preventative medicine & disease treatment:**

- **No dental work** (Equine dentists can fill part of the gap here but an owner is still stuck should the horse need to be referred for dental surgery.
- **No sedations available** for young or unhandled horses that need to be treated or inspected for disease (includes no more annual dental check ups)

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- **No euthanasia services.** What do we do with our old horses when they have let us know it is time for them to go and we cannot get a vet out to euthanase them?
- **No medical care** at home nor during transport (unvaccinated horses on interstate transport have already been denied veterinary care)
- **No eye examinations**
- **No callouts to colic.** (Horses with colic have already died due to vets declining to attend.)

Dr David Lovell says “All horses owners on the South East Coast of Australia have ...”their choice whether or not to vaccinate.” (Item 1)

**Does the committee honestly think that we have a free choice here?**

Unvaccinated horses are just not being denied medical attention. They are:

- **being turned away from competition.** (even though the EA lifted its mandatory vaccination policy)
- **being denied agistment.** (places to keep your horse)

All for a virus which even Dr David Lovell acknowledges is “...not highly contagious and needs significant exposure to bodily fluids from the horse for transmission. ...As long as common sense and care is exercised, transmission is not likely.” (Item 1)

**1. Can the Committee please consider our consumer rights & the welfare issues of our horses when looking into this matter?** (My three closest veterinary practices all have the “no vaccination -no treatment” policy. I phoned another two veterinary practices from farther afield and they both appealed to me to get the vaccinations done so that I have peace of mind and can get a veterinarian when I need one.)

For a business to force the ongoing purchase of a product onto all of its customers so that we as customers are guaranteed future service seems to impinge on Consumer rights. Could it possibly be a case for the ACCC ?

The Impact of the “No Vaccination-No Treatment Policy: Do Horse Owners Really Have a Choice?

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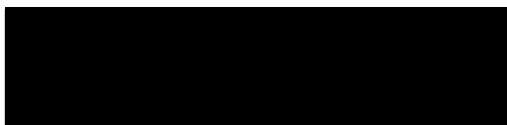
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**Also for the Committe:**

**2. Is it possible, to organise the set up and support a special group of adequately trained, consenting group veterinarians who are “happy to work with our non-vaccinated horses using PPE , exclusion tests, titre tests etc?**

.....as then our veterinarians can have CHOICE just as much as we can have CHOICE in this seemingly “across the board” HeV vaccination roll out which , by the way, the government deemed as “off the table.” (Item 2).

Sincerely,



Donna Anderson



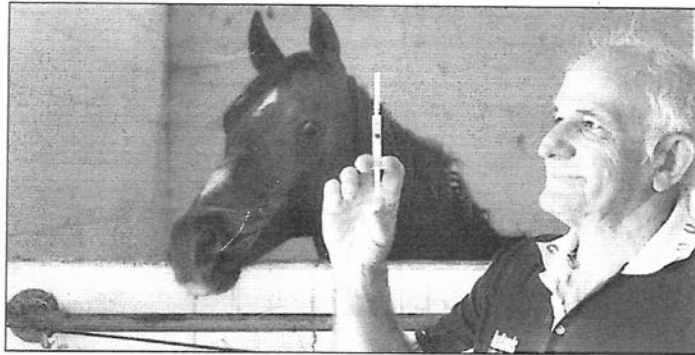
# Rationalising the need for Hendra vaccination

By DAVID LOVELL BVSC

It is almost impossible to understand and comprehend how the situation surrounding Hendra vaccination of horses could possibly descend into the current chaos. That being said, many cynics could easily conclude that the basis for all the angst is that the wonderful Hendra vaccine that we have has not been provided for free, instead it is a user pay cost, which of course it should be. In 2011, we had an unprecedented number of cases.

The industry was in turmoil. The media was overplaying and beating up hysteria over the outbreak. Events were being cancelled and the industry was demanding that "someone do something". Well, someone did.

The governments of Queensland and NSW committed funds, a private enterprise company took up the challenge, and the very complicated and difficult task of developing a vaccine commenced. Late in 2012, a vaccine was made available, albeit to only be used under special permit as all the safety trials had not been completed, but due to the urgent need for horse owners to be able to protect their horses, the normal process was fast tracked in an attempt to safeguard the community.



Equine veterinarian David Lovell believes that cost is a deterrent to horse owners getting their animals vaccinated against Hendra.

Make no mistake, efficiency trials had clearly demonstrated that the vaccine was very effective, and that it seemed to be relatively free of side effects.

Because of the perceived urgency, the early restricted release was approved and we had available, a gold standard means of protecting our horses and owners.

As it has become obvious, some of the more ungrateful members of the community, many of whom were the exact same group of people who were initially demanding the vaccine, seized upon the extremely minimal chance that some unknown possible side effect may occur.

Instead of being grateful that finally there was a means of safeguard-

ing stake holders, an unbelievable tirade of ill informed, emotional and hysterical rubbish has dominated the social media in protest. The vaccine has proven to be extremely safe, and all ongoing trials have only further confirmed it's efficacy.

As I said above, the underlying cause of all this has been the fact that the vaccine is not free.

It is a cost, but let's get real, it is an extremely minimal cost in the overall scheme of owning a horse. Do not forget that the consequences of Hendra infection are the death of the horse and an extreme risk to the safety of the owners.

Fortunately, the greater majority of caring, committed horse owners had taken up the opportunity to vaccinate and there is a very large majority of happy, healthy protected horses out there.

There are still many that are not and unfortunately, many of the unvaccinated horses are the less intensively managed animals that spend most of their life out in paddocks with sometimes, minimal human contact.

Also, some owners have chosen to vaccinate the perceived "important" horses, and leave the older or retired animals alone.

The reality is that both of these groups would fit into the more at risk category of horses being likely to be exposed to the virus. The game has now changed forever.

The Queensland Government, through their Occupational Health and Safety arm, have chosen to charge and prosecute three individual veterinary surgeons for breaches of the duty of care when dealing with positive Hendra cases.

These cases are still pending and the final outcomes are not known at this point.

The situation for veterinary interaction with unvaccinated horses has now become untenable.

The reality is that firstly, Hendra disease is extremely rare. Secondly, it is not that easy for humans to become infected from a horse.

Human exposure to a horse with

Hendra, has to be reasonably close or invasive, for the disease to transmit.

In most cases, common sense and reasonable precautions would be reasonably safe.

The disease is not highly contagious and needs significant exposure to bodily fluids from the horse for transmission.

This is not to say that contact with a sick Hendra horse is not serious, it's extremely serious but as long as common sense and care is exercised, transmission is not likely.

Any invasive procedure, particularly with the head and mouth, is extremely dangerous, as is contact with any bodily fluids.

Every veterinarian that examines a horse, will make a risk assessment and act accordingly.

Certainly if a horse has progressed into a fulminating, or confirmed case of Hendra, then maximum security must be invoked.

The problem is that signs and symptoms of Hendra disease are extremely variable, particularly in the earlier stages.

No one can look at a horse that is displaying virtually any symptoms that would designate the horse as "sick", cannot possibly not consider Hendra as a possibility.

The law states, that if a veterinarian has any suspicion that a horse could have Hendra, then nothing can be done with this horse without maximum personal protection equipment engaged, until the possibility has been ruled out by an exclusion test.

This means that the horse must be placed into strict quarantine and cannot be treated until samples have been taken from the horse, taken to the laboratory, and returned a negative test.

This can mean a delay of anywhere from one to four days depending on the circumstances.

What this means, is that virtually any horse that has a temperature, is off feed, is dull and depressed, shows signs of colic, respiratory or neurological disease, or in fact is in any way acting strangely, then Hendra has to be considered.

Even worse is the fact that it is well established that a horse may be shedding virus, for a period of 24 - 48 hours before obvious symptoms are displayed. In this case, even apparently normal horses can pose a risk.

Therefore any invasive procedure, such as dentistry, endoscopy, tubing, eye examinations and blood collection, require maximum personal protection measures.

The position is clearly stated under the heading, "General Biosecurity Obligation" in the new Queensland Biosecurity Act, which articulates the veterinarian's position.

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## Vets have to weigh up risks

From page 10

It states "that a person who deals with biosecurity matter or a carrier, or carries out an activity, if the person knows or ought reasonably to know that the biosecurity matter, carrier or activity poses or is likely to pose a biosecurity risk, the person has an obligation (a general biosecurity obligation) to take all reasonable and practical measures to prevent or minimise the biosecurity risk".

This bureaucratic gobbly gook implies that any veterinarian would be a person who knows, or ought reasonably to know, there could be a risk, and therefore has an obligation to minimise the risk. The situation is untenable. The chances of any horse actually having, or be in the early stages, of Hendra disease, are extremely low, but because of this obligation, any horse displaying virtually any symptoms, must be considered a possible risk and therefore has to have an exclusion test before

relaxation of precautions.

Even though the odds of any animal having Hendra are low, any vet that fails to investigate the possibility, is playing Russian roulette with workplace health and safety and prosecution if they fail in their duty of care.

This then is why many veterinarians are now refusing to see any horse that is not vaccinated.

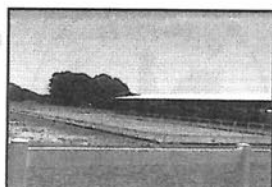
It is not because they are "frightened of the disease", or "don't care about the animal". It is because of the risk of prosecution, if they have not complied with very demanding requirements of personal protection equipment for themselves, their staff, and any of the people involved with the management of the animal.

Veterinarians are being vilified and crucified for "not caring". This is very unfair.

All horse owners on the east coast of Australia are aware of the disease - their choice whether or not to vaccinate.

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## Grapevine October Edition - Workplace Health & Safety

### Hendra Virus Meeting with Government Agencies

The ongoing concerns of veterinarians against the prosecutions were discussed at an interagency meeting on October 14. At the meeting, Laurie Dowling represented the Qld Division and Ian Fulton, Jeffrey Wilkinson, Nathan Anthony and Ben Poole represented the EVA. Government agencies included Biosecurity Qld, Workplace, Health and Safety and Queensland Health.

The main topic concerned clarity on what was required of veterinarians prior to a diagnosis of Hendra virus in a horse and in particular obligations regarding third parties and clients. Opinions on the level of biosecurity protection from government agencies at the meeting varied which makes it difficult for vets to know what is required. Other topics discussed included the mandatory vaccination of horses (deemed off the table by the government) and possible vaccination campaigns (Qld Health does this for children's vaccinations) which the AVA strongly supported. The risks associated with leaving clients with medication for follow up treatment was deemed very high unless the horse was vaccinated or had been found to be negative on an exclusion test and even then government stressed that vaccinations may not be 100%.

In this grey area, vets need to know what resources are out there to inform your actions. There are a number of very long documents out there which veterinarians are required to be familiar with.

The following link to the interagency document **Hendra Virus Infection Prevention Advice** provides the most definitive advice for various horses in varying stages of health and procedures and what is recommended. See Tables 1 and 2 in this document on pages 25 and 28.

<http://www.health.qld.gov.au/phvdocuments/cdb/henv-inf-prev-adv.pdf>

A useful link in this document gives an AVA/EVA Youtube video on biosecurity measures for vets to follow

<http://www.ava.com.au/suit-up>

Biosecurity Queensland also has *Guidelines for veterinarians handling potential Hendra virus infection in horses*, a 54 page document which outlines everything you need to know if you get a Hendra positive case. It can be found at the following link. Always use the link when reviewing as it will hold the latest advice. At the moment, it is version 5.

<https://www.def.qld.gov.au/animal-industries/animal-health-and-diseases/a-z-list/hendra-virus/veterinarian-guidelines>

