



Submission No. 278

29th April, 2016

Research Director
Agriculture and Environment Committee
Parliament House
George Street
Brisbane, Qld, 4000
aec@parliament.qld.gov.au

Dear Sir/Madam,

Re : Hendra virus (HeV) EquiVacc[®] vaccine and its use by veterinary surgeons in Queensland

The Australian Horse Industry Council (AHIC) is a national representative body serving the broad spectrum of the Australian Horse Industry. AHIC member organisations account for well over 100,000 individuals. The main role of the AHIC is to provide a voice for the interests of horses and horse owners in national forums and, as such, we are often put in a position of representing a broad, and often divergent array of opinions. This is particularly so in relation to Hendra Vaccination. We are happy to submit the following comments based on suggestions put to us by various member organisations.

The Australian Horse Industry Council commends the Queensland Government for undertaking this review.

AHIC believes that the processes for evaluation and registration of the vaccine were appropriate. Given that infection of both horses and humans with the Hendra virus may cause death, the expeditious manner in which the vaccine was made available to veterinarians under permit was welcomed. The AHIC believes the science is sound and the vaccine is safe and the single most effective measure to prevent Hendra infection.

During the period that the vaccine has been used, with mandatory reporting of adverse reactions and use restricted to veterinarians only, there has been much debate and hearsay about the actual incidence of reactions, and their severity.

AHIC welcomes a review of the evidence of use, the nature and prevalence of localized and systemic reactions to vaccination, and the incidence of horse death or severe illness (including abortions) related to vaccination.

Economic modelling on the cost impact of the disease should take into account the diversity of the horse industry, and the prices charged by veterinarians to administer the vaccine.

Anecdotal reports of veterinarians failing to update the Hendra database is a concern. If this database is no longer considered a necessity, does this remove the requirement for the vaccination to remain vet-only?

Australian Horse Industry Council

ACN 080 921 660 ABN 18 080 921 660

P.O. Box 802, Geelong VIC 3220 Phone: (03) 5222 6650 Fax: (03) 5229 8244

Web: www.horsecouncil.org.au

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Cont'd.**

A scenario of vaccine administration by non-veterinarians should be included in the review as a reduction in costs to horse owners may influence vaccination rates.

Mandating vaccination for horses entering events from "at risk" areas has been shown to reduce entry numbers with subsequent impact on revenue for horse societies and regional businesses. This should be included in economic models, bearing in mind that many horse events are major fund raisers for small regional communities and charities.

The potential seriousness of Hendra virus infection for humans and horses requires workplace health and safety measures to be implemented where there is occupational contact with horses. Strict protocols for use of PPE by veterinarians and horse handlers when dealing with horses in "at risk" areas, and/or suspected of being infected are needed. The Review should establish these protocols based on current global best practice for potentially lethal infectious diseases.

In the case of vets refusing to treat horses not vaccinated against Hendra, actual case data of the application of this policy by individual vets and the ramifications for horses and horse owners should be examined in the review.

Yours faithfully,

AUSTRALIAN HORSE INDUSTRY COUNCIL



**Joy Poole OAM
President**