



**HORSE SPORT  
IRELAND**

# Horse Sport Ireland

**Protocols for sport horses arriving in  
Ireland from high-risk areas of Europe.**

An outbreak of the neurological form of equine herpesvirus 1 (EHV1) disease has been reported at an FEI competition in Valencia, Spain.

Horse Sport Ireland, upon consultation with DAFM and the Irish Equine Centre, is putting in place the following measures for all horses returning from continental Europe from 1<sup>st</sup> March 2021

All horses arriving in Ireland from continental Europe **must** be isolated from all other horses for a period of 14 days on arrival in Ireland.

To be considered isolated, the isolated horses must be kept in a stable block or well-ventilated building that is physically separated from other horse buildings by at least 10 metres. American barns with poor ventilation are not suitable, as large groups of horses sharing a common airspace can all be infected by one horse shedding the virus. Horses can also be kept isolated in a paddock; the secure fence lines must be at least 10 metres away from the next paddock.

Isolated horses must be attended to by separate staff who are not in contact with horses on other (non-isolated) premises. One of the principle vectors of this virus is contact, therefore, to minimise risk of disease spread within an isolation premises, equine and human biosecurity measures on the property must include the following:



## **SPECIFIC GUIDELINES ON ISOLATION**

The Codes of Practice often refer to the isolation of horses. In the biosecurity sense, 'isolation' means a separate facility with separate staff, separate protective clothing, separate utensils/ equipment and thorough cleaning and disinfection of stables between each occupant. Ideally, isolation areas should be able to operate as separate premises from their main operations, including having their own dedicated accesses.

### ***Premises***

1. The isolation facility should be a separate, enclosed building of sound, permanent construction, capable of being cleansed and disinfected effectively.
2. An adequate supply of fresh, clean water must be available at all times for the isolated horses and for cleaning purposes.
3. Adequate supplies of food and bedding material for the whole of the isolation period must be made available and stored within the isolation facility before isolation commences.

4. Equipment and utensils used for feeding, grooming and cleansing must be used only in the isolation facility.
5. Protective clothing must be available at the entrance to the isolation facility and not be taken outside of this facility.
6. A separate muck heap should be used within the isolation facility.

### **Procedures**

1. Before use, all fixed and moveable equipment and utensils for feeding, grooming and cleansing within the isolation facility must be disinfected using an approved disinfectant.
2. Attendants of the isolated horses must have no contact with any other horses during the isolation period.
3. The isolation period for all isolated horses shall be deemed to start from the time of entry of the **last** horse.
4. No person may enter the isolation facility unless specifically authorised to do so.
5. When no attendants are on duty, the facility must be locked securely to prevent the entry of unauthorised persons.

Horse Sport Ireland reserves the right to request verification by athlete's veterinary practitioner that the isolation standards are appropriate, and/or to request HSI appointed veterinary personnel or DAFM personnel to attend the premises to verify these standards and protocols are in place on the isolation premises.

All horses on the premises, including those which have not travelled in Europe recently, must have close clinical monitoring with twice daily temperature recording. Temperature records should be kept and made available for review by the veterinary surgeon. Veterinary advice should be sought immediately if a horse spikes a fever.

All horses on the premises will be excluded from travel from the premises and participation in all national equestrian competitions and training events and all other HSI affiliate competitions and activities.

All incoming horses from continental Europe will be required to be tested as per the regime outlined below.

The excluded status will apply until:

Laboratory data confirming that all horses on the premises are free from disease is provided to Horse Sport Ireland. These laboratory data must include:

1. Paired serology (to measure antibodies against EHV) with two samples taken a

minimum of 10 days apart, using the complement fixation test (CFT) which is available from the Irish Equine Centre (IEC). Ideally these clotted blood samples should be taken on day 2 and day 12 of the isolation period.

2. A pair of nasopharyngeal swabs taken at the same time as the serology samples. For interpretation of these data, day 0 is defined as the day the horses arrived at the isolation premises.

Samples must be submitted to the Irish Equine Centre. Veterinary surgeons should contact the laboratory for advice and for the appropriate sampling materials (nasopharyngeal swabs and virus transport medium) and submission forms.

Irish Equine Centre, Johnstown, Naas, County Kildare, Ireland. Eircode: W91 RH93

Telephone: +353-45-866266 Fax: +353-45-866273

Email: [virology@irishequinecentre.ie](mailto:virology@irishequinecentre.ie) or [acullinane@irishequinecentre.ie](mailto:acullinane@irishequinecentre.ie)

Web: <http://www.irishequinecentre.ie>

To facilitate interpretation of the serology results the EHV vaccination history of the horse(s) should be provided to the laboratory with the first samples, along with a completed submission form.



## HORSE SPORT IRELAND: GENERAL INFORMATION ON EHV AND VACCINATION

Most horse owners know that equine herpesvirus type 1 causes upper respiratory infection in young horses and abortion in pregnant mares, but this recent outbreak in Spain is the more severe form which causes neurological disease that affects the horse's brain and spinal cord and may result in paralysis and death.

EHV-1 routinely causes upper respiratory infection in young horses (weaning, yearlings, and 2-year-olds) resulting in depression, a snotty nose, loss of appetite and a persistent cough. If a number of young horses are housed or pastured together, most will become sick and then recover uneventfully. Pregnant mares that become infected often abort their foals late in gestation, deliver stillborn foals or weak foals that die within days of birth.

EHV 1 is not a notifiable disease.

### *Diagnosis*

Neurological symptoms include incoordination that can progress to the inability to stand, lower leg swelling, the inability to urinate or pass manure, urine dribbling and reduced tail tone. Some of these symptoms also occur in other neurological diseases, so it is important that the animals be examined by a veterinarian as soon as possible.

### *Treatment*

Because EHV-1 is a virus, it does not respond to antibiotics. Therefore, supportive treatment

is the only option and is tailored to the individual patient and guided by the severity and range of clinical signs. It usually includes anti-inflammatory drugs, fluids to maintain hydration, and slinging of horses that are unable to stand. In most cases, horses that remain standing have a good prognosis, although recovery may take weeks or months.

### ***Disease transmission***

EHV-1 is spread primarily through coughing or sneezing, but can also be carried in fetal tissues, the placenta and uterine fluids from mares that have aborted. Studies have shown that the virus doesn't live long in the environment, but transmission via coughing or sneezing can occur over a distance of up to 10 metres. Direct contact with infected horses as well as contaminated feed, equipment, clothing, and tack can also spread the disease. However, on the positive side the virus is easily killed by disinfectants effective against herpesviruses.

When treating an area where the disease has occurred, remove all organic material such as manure and dirt. Then disinfect all surfaces and equipment with a disinfectant with proven efficacy against herpesviruses. Make sure you wear rubber gloves when handling the disinfectant. Don't forget to wash and disinfect any trailer that has been used to transport sick animals.



## **MINIMISING RISK OF DISEASE SPREAD**

If you have questions about EHV 1, talk to your local veterinarian.

Vaccination decreases nasal shedding of virus if a vaccinated horse does become infected. Therefore, vaccination decreases the total amount of virus in the environment which in turn reduces the likelihood that other horses become infected.

However, no EHV-1 vaccine is registered for use to prevent neurological disease and vaccination has not been shown to reduce the risk of neurological signs.

Travelling, housing in large groups, and mixing of horses are all recognized risk factors for precipitating clinical signs of neurological EHV. Therefore, our strong advice is that travel to competitions in Europe should be avoided while the current outbreak remains active regardless of whether horses are vaccinated or not.

It is essential that vaccination is not considered a means to overcome sub-optimal biosecurity. Avoiding mixing in at risk populations, close monitoring, early diagnosis and isolation of suspect horses remain the cornerstones of prevention regardless of vaccination status.

Vaccination of animals known or suspected to have recently been in contact with EHV-1 is not recommended.

Although vaccination will reduce the risk for the horse population as a whole, there is some evidence from previous outbreaks that recent vaccination is a risk factor for development of neurological signs in individuals thus advice for this group of horses is less definitive.

As it is currently unclear how long the current outbreak will remain active in Europe, we are not currently recommending vaccination for horses which are scheduled to travel to Europe in the next few weeks.

EHV is an endemic disease in Europe therefore it will continue to represent an ongoing threat after the current outbreak is over. Therefore, we advise EHV vaccination for horses travelling to Europe this summer and beyond. For horses to remain protected is important that once the primary course has been given, vaccination should be continued in future with boosters required every six months.



## ONGOING EQUINE DISEASE INFORMATION

For real time Equine disease outbreak information, from around the world, has been obtained and collated by the International Collating Centre ([ICC](#)) for over 30 years and is generously supported by the [International Thoroughbred Breeders' Association](#). National and international equine disease outbreaks are reported on an almost daily basis, through e-mail alerts sent to subscribers. (To sign up for reports, [contact us](#)). A quarterly summary report is also produced and emailed to subscribers four times a year and available in the resources and archive section of this site.

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