Herpesvirus outbreaks type 1 (HVE1)

Press release - 03/03/2021

The RESPE crisis unit * met on March 1 in the context of type 1 herpesvirus outbreaks (HVE1 - rhinopneumonia) confirmed in Spain in Valence, on the site of the Valencia Spring Jumping Tour and in several departments in France in epidemiological link with the Spanish outbreak.

This meeting made it possible to take stock of the situation, to reference the actions to be implemented and to establish communication and the dissemination of preventive health measures to prevent the spread of the virus in our territory, particularly in the context of recovery. local, national and international competitions.

Assessment of the situation

In Spain, the Valencia site hosted several hundred horses for an international competition. Some equines have returned home, but 150 are still on site, blocked by the Spanish authorities for health reasons. According to the information disseminated, about half of equines present or have presented clinical signs: mainly hyperthermia, cough, throwing. A few have also triggered neurological symptoms and to date several horses have had to be hospitalized and 4 horses have died.

Sanitary measures have been taken by the organizers and the Spanish Ministry which also decided to suspend all future competitions.

In France, several outbreaks have been confirmed in stables of horses returning from Valence, in the departments of Calvados, Haute Savoie, Hérault and Seine et Marne, others are being investigated in other departments.

Equines mostly show respiratory symptoms, or only hyperthermia . A few animals have developed neurological signs, **but no deaths have been reported so far in the area.**

To date, the homes of which RESPE is aware have implemented strict sanitary measures, but the information is not known for all the structures welcoming equines returning from Spain.

In addition, with the exception of horses with an epidemiological link with the Valence outbreak, the number of cases of type 1 herpesvirus remains, for the moment, within the values usually observed at this time of the year.

Beyond France, cases of HVE1 linked to Valence have also been confirmed **in Belgium, Germany and Switzerland.**

Even if the situation could seem under control, **many equines are still present in Valencia and other sites in Spain, and will return** :

- **for French horses** , in their own stables where other horses may be present,

- **for foreign horses** , via transit structures in France, during stops to their country of origin.

Transport (trucks, vans, equipment, people, etc.) is a proven element of the risk of aggravating the spread of the virus and the appearance of new outbreaks . Particular **attention** should therefore be **paid to the conditions in which these movements will take place, as should be the case for any movement of equine animals.**

A proactive strategy for equestrian events

In this context, the **FFE and SHF have jointly decided to suspend from [1] March to Sunday, 28 March 2021 included, all national and international equestrian competitions, horses and gatherings they organize internships or placed under their aegis** . **The FEI, for its part, acted on March 02, the suspension of all competitions over the same period, in 10 continental European countries** including France, Spain, Italy, Portugal, Belgium, Germany and the Netherlands (at the except for competitions on several dates that have started which may continue without welcoming new horses).

Several veterinarians have already been dispatched by the FEI to the Valence site to help manage the outbreak. **On the decision of the FFE, the coordinating veterinarian of the 2014 World Equestrian Games, Professor Anne Couroucé, joined them on Tuesday in order in particular to collect epidemiological elements, coordinate actions and accelerate as much as possible the return of the horses, French first and foremost.**

Regardless of these decisions and in general, **the crisis unit agreed that the preventive health measures in the appendix remain valid and must apply to the entire sector** , more particularly to equestrian gatherings not falling under the FFE

and SHF. **The situation of the very numerous Warm'ups since the confinement linked to COVID 19, sales and fairs are a point of extreme vigilance** ; the **crisis unit recommends postponing them or applying strict precautionary measures** , possibly the same as those put in place during the herpesvirus epizootic of 2018. The same goes **for the Livestock sector** , the season of beginner riding, **the introduction / return of horses to a workforce must be accompanied by these same health measures, a fortiori for structures with a mixed Breeding / Sport activity and multi-sector reproduction centers (Sport / Races).** Vaccination protocols for breeding centers must be strictly observed.

Regarding screening tests , the crisis unit reminds that it is advisable to use tests that have been the subject of rigorous validation (field sensitivity - specificity) and **appropriately in the course of the disease in an equine achieved.** In fact, for vaccinated horses, the **quantity of virus found at the "tip of the nose" is less, in particular at the beginning and at the end of symptoms** . This observation is **all the more true for the neurological form** for which the viral loads detected are frequently very low.

Vaccination, an effective preventive measure

Vaccination against herpesviruses remains limited in the equine sector and is not compulsory for international competitions. The heterogeneous vaccination status vis-à-vis the HVE1 virus of the horses present in Valence may perhaps explain the large number of sick horses and the rapid circulation of the virus within the workforce. **Even if properly vaccinated horses may have shown clinical signs, particularly neurological signs, vaccination remains an effective collective disease control measure.** For **the vaccinated animal** , it makes it possible to limit the symptoms, mainly for the respiratory and abortive forms, and especially the quantity of virus excreted. For **the entire equine population** , vaccination therefore limits the spread of the disease and its circulation within groups.

The following recommendations apply to the entire industry, all activities combined (trotting, galloping, sport, breeding, breeding center, work, leisure, etc.):

- It is advisable **for horses already vaccinated** , in good health, **not having been in contact with known or suspected outbreaks** , whose vaccination booster goes back more than 6 months, to proceed with a booster.
- For **unvaccinated and unexposed horses** (not having been in contact with confirmed or suspected outbreaks or horses), vaccination may also be considered, but will have little effect in the midst of an epizootic. As the primary vaccination requires at least ** 2 injections 1 month apart, protection will begin to be effective during the second injection, ie 4 to 6 weeks after the first injection.
- **For exposed horses** which may be in the incubation phase, vaccination is not recommended and would have little effect; on a sick horse, the first injection

may not induce any immune response, or even trigger the disease more quickly.

*** the vaccination protocol varies according to the brand of vaccine used.*

**** The RESPE crisis unit***

Launched on March 01, it brought together the French Equine Veterinary Association, the Federation of Breeders of Galop, the French Equestrian Federation, the National Federation of the Horse, France Galop, the French Institute of Horse and Equitation, LABEO Frank Duncombe, the Société Hippique Française, the Trot, the General Directorate of Food and the RESPE.

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ANNEX

Preventive health measures

Horse gatherings (races, competitions, sales, fairs, etc.) are places conducive to the circulation of contagious diseases whatever the current epidemiological situation. The risks are all the more important when the disease is known to circulate (alerts from RESPE on horses confirmed positive in the laboratory, sick horses, etc.). Basic sanitary measures must then be adopted (see below).

The more horses in a gathering, the greater the risk, especially if the horses come from different backgrounds with different health and vaccine status.

It is therefore important to communicate when an outbreak occurs at home and especially to put in place quarantine measures. This makes it possible to limit the risks, but also to sensitize the rest of the sector on the good management of the outbreak and on the possible consequences of the epizootic.

HVE is not a regulated disease, the state services and in particular the DD (CS) PP or the prefecture cannot impose any specific management measure. It is therefore everyone's responsibility to assess the risks to their horse (s).

As a reminder, according to article L228-3 of the Rural Code, "The fact of causing or voluntarily contributing to the spread of an epizootic in domestic vertebrates [...] is

punishable by imprisonment for five years and a fine of € 75,000. The attempt is punished like the consummated crime.

The fact, by non-observance of the regulations, of involuntarily causing or contributing to the spread of an epizootic in a species belonging to one of the groups defined in the preceding paragraph is punishable by a fine of € 15,000 and imprisonment. two years. "

Detailed prevention measures:

In the field, two categories of horses constitute an epidemiological risk:

- **Horses from confirmed outbreaks** : equines, vaccinated or not, ***sick*** , presenting cough, throwing and fever. These animals are carriers of a large quantity of virus and spread it widely through respiratory secretions (droplets projected during coughing, throwing).

They remain virus shedders for about 3 weeks, so they must remain isolated during this time.

- **Vaccinated horses having been in contact with the virus but which do not show any symptoms** : they can **carry the virus "at the end of the nose".** The quantities emitted are reduced and the animals are contagious over a shorter period. However, these clinically healthy animals can be an important vector of disease through direct contact in epizootics such as today's. Precautionary measures must also be applied to them.

Equipment in general (care, work, food, watering, etc.), transport vehicles and personnel (hands, clothing, etc.) can also indirectly transport the virus and contribute significantly to the spread of the disease. .

For confirmed outbreaks:

¤ Isolate positive animals
¤ Stop the movements of horses in and out of the structure
¤ Monitor the temperature of these animals for at least 1 week (incubation period)
¤ Disinfect the equipment or use disposable equipment; set up footbaths in front of infected areas; the usual virucidal disinfectants are active against the virus
¤ Disinfect the premises and carry out a crawl space before any reintroduction of animals into an "infected" premises
¤ Disinfect vans and transport trucks, before and after each trip
¤ Limit contact of infected horses only to staff responsible for care
¤ Set up a care circuit (start care with batches of healthy animals to end with suspect and affected horses)
¤ Use different equipment for each batch of animals
¤ Carry out the care between the different batches by different staff or failing this by following the care circuit, change the outfit between the different batches if single staff

¤ Regular samples can be set up to follow the excretion of the virus (and therefore contagiousness) within a workforce

These preventive measures must continue to be applied at least 21 days after the last symptom of rhinopneumonia has been observed.

In the event of suspicion, observation of respiratory symptoms, and / or possible contact during a gathering that has hosted equines from the homes concerned:

¤ Isolate, as much as possible, suspect horses
¤ Limit movements of horses in and out of the structure
¤ Isolate horses from infected or suspect sites for quarantine
¤ Monitor the temperature of these animals for at least 1 week (incubation period)
¤ Contact your veterinarian to examine suspicious horses, in particular those with hyperthermia, discharge, edema of the limbs and take samples (nasopharyngeal swab) if necessary, to search for the virus

For riders (and keeper in general):

¤ **Do not take a suspicious or sick horse or one that has been in contact with a sick or suspect horse in a show, race or in any other type of gathering**
¤ **Do not go to a gathering when a household has been confirmed in this place**
¤ **Make sure the boxes are** clean (cleaning and disinfection before your horse enters, then between the horses).
¤ Take and use only **unique equipment for each horse** .
¤ Use a **single bucket per equine for watering** at the meeting place (fill the buckets with water directly at the taps); do not use collective drinkers.
¤ Limit contact with other equines as much as possible, especially equines from other populations.
¤ **Isolate as much as possible the equines as soon as they return to their original structure** , monitor their general condition and monitor the temperature over the following days (at least one week)
¤ Clean and disinfect equipment (including vans and means of transport)
¤ **Check the vaccine booster dates for your equines** and consider with your veterinarian whether or not they need to be renewed or to set up a vaccination protocol if the equines are not currently vaccinated
¤ Regularly disinfect your hands, do not touch other equines than your own
¤ Prevent people other than those in your stable from touching the equines so as not to create indirect contamination

For rally organizers:

¤ Ensure the good health of equines arriving at the meeting place; it **is strongly recommended to set up a sanitary protocol** with a veterinarian to carry out a control of the equines on their arrival at the place of assembly

¤ Make sure that no equine from a proven home goes to the meeting place
¤ Clean and disinfect the **boxes before, between, and after each passage of equines**
¤ Provide water points so that riders can **collect water individually.**
¤ **Communicate widely and require participants, as well as the public in particular children, to** respect preventive practices **to limit direct and indirect contact between equines** , in particular via the hands, equipment, boots, etc.
¤ **Do not maintain the organization of a gathering in the event of a sick or suspect equine within the establishment hosting the gathering.**

For equine transporters:

¤ Ensure the good health of equines before transport; a health protocol can be put in place
¤ **Do not transport a suspect, sick or equine that has been in contact with a sick or suspect equine in competitions, races or in any other type of gathering**
¤ Clean and disinfect **vehicles before and after each passage of equines**
¤ **Avoid transporting equines from different stables**
¤ Avoid transporting equines with different vaccination status
¤ Regularly disinfect your hands, in particular after handling equines and between each equine from a different batch

Specific preventive measure: vaccination

Vaccination is one of the pillars of prevention against contagious diseases. It makes it possible to protect the vaccinated equine on an individual basis by reducing the risk of infection and / or by reducing the severity and duration of clinical signs. Vaccination also reduces the excretion of the pathogen by the sick equine, limiting the transmission of the disease to other equines. It is also a collective protection: the greater the number of equines vaccinated against a disease, the less the spread of the pathogen and, in fact, the lower the risk of an epidemic.

In the event of a strong circulation of virus or during an epizootic, it may be recommended for healthy numbers and healthy animals, to vaccinate those which are not and for those already vaccinated, to renew the reminders if they are dated. over 6 months.

While vaccination is strongly recommended, it does not replace other precautionary measures; moreover, the protection conferred by the vaccine takes several weeks to set in, and must be maintained by regular boosters.

For more information on the disease:

- HVE1: RESPE **sickness form** / **IFCE sickness form**
- **What to do when an equine disease is confirmed in your structure?**
- **How to organize a treatment circuit?**

- **FFE / SHF press release**
- **FEI press releases of 02/27/21**
- **FEI press releases of 03/01/21**
- **FEI press releases of 03/01/21 - Update**