NOTICE FROM EQUINE COMMITTEE CHAIR

Since my first email of August 12, 2014 and Media Release of August 25, 2014, I have been informed of more suspected cases of West Nile infections in horses in BC:

1. Vernon, September/October 2013
   Old horse, unvaccinated, severe ataxia.
   Euthanized, autopsied, WN CONFIRMED in brain tissue by 2 labs, diagnosis confirmed by CDC in 2013 Report.

2. Prince George, August 2014
   13-year-old horse, no vaccination history over the last five years, severe progressive ataxia over four days.
   Euthanized, no autopsy.
   S/N and IgG tests at Cornell showed high titres (no convalescent samples)

3. Okanagan Falls, August 2014
   Similar history to above.
   Euthanized, no autopsy.
   S/N as above.

4. Cache Creek, as reported earlier.
   Two horses still alive.
   S/N tests showed double rise (1536 to 3072), IgG 39.77 rose to 50.95.

The gold standard for WN diagnosis is Virus isolation by PCR from brain or spinal cord at autopsy, required by CDC and AHC (Abbotsford) before calling a positive. Since WN is not a reportable disease in BC (horses are still regarded as “pets” by AHC, and no interest from CFIA), it is difficult in practice to follow up a suspect euthanized case with a full autopsy. Owners may be unwilling to allow (or pay for) a full autopsy on a dead horse (or “pet”), and so it is likely that there are more cases of WN than we are aware of in BC. There has been some suggestion that the S/N test may not be specific for WN; there may be cross reaction to another virus. IgG test may not be specific to WN, IgM capture Elisa may be a better test in acute stage, but falls in 2-to-4 weeks.

It would be very helpful if future cases could be autopsied and neural
tissue sent to AHC for PCR testing to prove that WN is indeed present in ataxic horses in BC.

Our duty to our horse-owning clients is to warn them that WN has been CONFIRMED in one case, and suspected in three others. While WN will never be an epidemic disease due to its method of spread (no horse-to-horse, like Flu or Rhino), it would be prudent to include WN vaccination next year as a “core” vaccine, e.g. Tetanus, E&W Enceph, and West Nile. We should be careful not to over-blow the situation or we may be accused of self-interest in promoting vaccination.

Like Encephalitis, West Nile is here to stay as a sporadic disease affecting horses in BC, and we will have to live with it by advising annual vaccination.

- Dr. John Twidale, Chair, Equine Committee

FALL CE & TRADE SHOW

Tickets are selling now for the Fall CE and Trade Show, held on November 8 & 9, 2014 at the River Rock Casino Resort. To learn more about the Fall CE and Trade Show, please visit the Chapter website and click on ‘Events.’ Please be sure to register soon to ensure you get the CE of your choice.

Also, please let us know if there are particular CE topics you might wish to see in future years. Our planning starts early so your suggestions are welcome.

VETERINARY CE OPPORTUNITIES

**Bravecto Lounge Session** - A new kind of launch meeting to celebrate a game-changing new class of parasiticide. Presented by Merck Animal Health Vancouver – September 16, Point Grey Golf & Country Club Victoria – September 18, Laurel Point Inn Email for details: lezlie.tune@merck.com

**Take It to the Ritz** – Providing Five-Star Customer Service, with Mark Opperman. Presented by Vet Alliance and sponsored by Zoetis. Coquitlam – October 21, Best Western Coquitlam Victoria – October 22, Four Points Victoria Kelowna – October 23, Four Points Airport Email for details: anthonyv.wva@gmail.com or call 780.952.0757.