Location: Hotel Lycium**** Meeting room (ground floor), Debrecen, Hungary

GA Agenda 10:30- 3.00 pm

10:30 Welcome & introduction of new members

Josh Slater welcomed all to Debrecen, Hungary. He especially welcomes the American guests which had to travel far, the WEVA delegates who attended the meeting for the first time, the UEVP President Zsolt Pinter and the organiser Orsolya Kutasi, Eros Katalin and Nancy De Briyne.

Zsolt Pinter, President of UEVP (Union of European Veterinary Practitioners – 1 of the 4 Sections of FVE) thanked FEEVA for the invitation. He remarked that many items he sees on the agenda today are also discussed within UEVP. He emphasized the importance of joining experiences and outcomes and for the veterinary profession – which is a rather small profession - speaking with one voice.

10:45 Roundtable presentations from FEEVA delegates and discussion

Denmark by Steen Bo Larssen

Most issues the Danish Association are facing are around the welfare of horses; namely regarding the ban on hot branding, providing Continuous Professional Development and a discussion on the organisation of a rodeo in Copenhagen.

Netherlands by Erik Gostelie

Major issues in NEVA are the
- Continuing education by NEVA. Some CPD is compulsory to become an equine accredited vet, other parts of the CPD is voluntary.
- Certification of the equine pre-purchase
- Monitoring of endemic and exotic equine diseases – NEVA initiated a motoring system with the support of the Horse Industry Association and the Dutch Health Organisation.
- Guidelines for evidence based procedures (colic, lameness, reproductive procedures, pulmonary problems, newborn foals, sperm, ... ). The guidelines are published on the website and distributed in hard copies. These guidelines can be used in court.

In the Netherlands a good cooperation exists between the horse industry association and NEVA.

Hungary by Orsolya Kutasi

The Hungarian Veterinary Association hot topics are the implementation of the Regulation on horse identification. It is not yet sure how it will be implemented; which method of identification will be allowed and who will be authorised to do the identification.
Another hot topic is the monitoring of exotic diseases. Some discussion followed the transport of horses. As the Regulation on horse identification is not yet implemented in Hungary, most horses are microchipped and receive a passport just before being transported to a slaughterhouse. Little control is made on withdrawal times and passports are seldom returned.

**Austria** by Christine Hinterhofer

Hot topics in Austria are the:

- Veterinary presence at equine competitions. Currently veterinary presence is obligatory but receives no legal and financial support. The VOK wants an obligatory attendance with a regulated payment.
- NADA National Anti Doping Agency: Positive is that vets take samples in accordance with the Equine National Federation and that further legal consequences are carried out by NADA. Negative is the NADA tries to put the same rules on equines as on humans.
- Current education (not enough practical knowledge, university wants to delegate practical education of students to the practitioners, too few large animal vets) and high percentage of female students.

Josh Slater asked if rules of NADA are similar than FEI. This seems to be the case but the problem is that NADA has little animal experience.

Feminisation is occurring in most of Europe and North-America countries. This leads to changes in how practices are run; but generally it is agreed it is more a generational issue than a female issue. In the USA they try to solve the problem by providing courses on business management.

In some universities, they try to complement the practical training in the school with stages students have to follow in practices of private practitioners. Tim Greet remarked that he sees value in expanding university out-clinic equine practical teaching, but is worried about leaving it completely to private practitioners which they just started in some universities.

**USA** by President AAEP

Hot issues are:

- Welfare: mainly about closing of all slaughterhouses in the USA, which means all horses going for slaughter were transported to slaughterhouses in Mexico. Now some states started allowing again to open slaughter
- Sporting was under scrutiny.
- Wild horse issue (>60 000): under federal mandate, problems with management
- Abuse and neglect of horses
- Medicines: some VMP’s are used off-label, treating horses in competition,...
- Education: increased number of scholarships, start support research projects, established specific extra student courses, CPD such as on business education ...
- Lay persons doing equine vet work such as dentistry

Sweden by Lena Malmgren & Ulrika Lagerquist

A hot issue in Sweden is the implementation of a European Directive on Consumer Protection; which does not make a difference between products and live animals. This directive reverses the burden of proof, the seller has to proof the horse has been in the same status for 6 months. This makes that vets have to testify in Court.

Other issues they currently deal with are:
- The development of more sensitive method to detect corticosteroids.
- Equine dentists who are no longer allowed to sedate horses.
- MRSA in the University clinic
- ...

On the issue of feminisation, in Sweden they tried to give priority to certain students coming from minorities (male and black) but some other students started a lawsuit which they won and the university had to pay a lot of money.

Portugal by Nuno Bernandes

The hot issues in Portugal are similar as the ones mentioned already:

- Proper Veterinary Act legislation
- VMP’s
- Education: too many schools, equine is not seen as a priority species ...
- Continuing education

Switzerland by Vincent Gerber

In Switzerland we have similar problems as the ones mentioned already by other participants, such as:

- Education: by university alone or also by private practitioners
- Identity of the equine vet, feminisation, etc
- Veterinary acts – dentistry, sedation

Spain by Llorca Miguel C

In Spain the following issues are being discussed:
- Education: too many schools, too many graduates, too few horse training, More CPD will be needed in the future. Illegal supply of drugs

**Latvia** by Juris Tolpeznikovs

In Latvia the main issue discussed is the availability of medicines. Since accession to the European Union the number of equine medicines has been cut in 3 and the price has increased enormously. Legal import is an administrative burden and very expensive.

In Latvia they opened a veterinary homeopathic school, so they use a lot more homeopathic drugs.

**UK** by Josh Slater and Chris House

Issues discussed are:

- Membership of BEVA especially in this time of recession – making sure BEVA adds benefit
- CPD
- Horse identification and registration – especially removing dead horses can be problematic
- Medicines availability and use
- Transport welfare (horses not declared for slaughter but going for slaughter)
- Equine dental technicians and welfare standards
- Importation of equine biological such as semen
- Disease surveillance and preparedness

**Ireland** by Karen Dunne & Vivienne Duggan

Main issue is the horse identification:

- Owner/keeper detail
- Responsible ownership
- Infectious disease controls
- Abandoned/unwanted animals
- Food chain status
- Correct use/availability of medicines

Josh Slater thanked everybody for these interesting presentations. It is clear that many issues are similar so sharing experiences and good practices is of utmost importance.

12:00 Coffee

12:15 Presentation Peter Clegg, Liverpool University, on the responsible use of antimicrobials. Followed by Questions & Answers
Peter Clegg, Liverpool University, held a presentation on antimicrobial resistance in Straphylococcus Aureus and E. Coli in Horses in the UK: Prevalence and risk factors.

Antimicrobial resistance is recognised as an important and increasing problem in human and veterinary medicine. Practitioners are confronted by this, while the media and politics are quite keen to hype the topic.

In the UK they had a number of studies looking at different bugs and their resistance. From all studies a clear difference the hospital and a community situation can be seen.

**E. Coli**

*Study 1:* “Prevalence of antimicrobial resistant E. Coli in the faeces of horses in the UK and to identify the risk factors associated with the prevalence”.

**Results:** Higher prevalence as expected of the 402 horses, 68.7% some antimicrobial resistance to 1 or 2 classes of antimicrobials, 36% had high level of resistance (resistance to 3 or more antibiotic classes). ESBL resistant E. Coli clustered geographical in Central-East area of the UK (why?).

**Risk factors:** antibiotic treatment within previous 7 days, recently hospitalized, in contact with other horse on antibiotics, ...

*Study 2:* Antimicrobial resistance in equine faecal E. Cole isolates from NW-England

Full study can be found on [http://www.ann-clinmicrob.com/content/9/1/12](http://www.ann-clinmicrob.com/content/9/1/12)

*Study 3:* “Prevalence of antimicrobial resistance E. Coli in the faeces of horses in an equine hospital and identify risk factors”. The samples were collected from the Equine hospital in Liverpool University.

**Results:** High prevalence much higher than in the community of resistant T. Coli 67.7% and ESBL mediated resistant E. Coli (28.7%). Similar pattern for all antimicrobials with increasing prevalence of resistance from day 0 to 4 and slight decrease from day 6.

Risk factors indentified were hospitalisation, antimicrobial treatment in previous 7 days, yard on sampling, admission reason, ...

One of the surprising outcomes of all these studies is how quickly the resistance builds up in an equine hospital and even for horses in the community coming in contact with a horse that was hospitalized recently.

**MRSA**

Clinical MRSA shows in Joint/Synovial Infection, bone infection, skin infection and Pleuropneumonia.
DEFRA Supported study: To determine the prevalence and characteristics of nasal meticillin-resistant staphylococcal carriage in the vet visited horse population of the mainland UK

Results: In total, 942 staphylococcal isolates were obtained from the nasal samples of 617 horses (91.1%). The prevalence of meticillin-resistant staphylococci (MRS) was 31.2% (215 horses) and the prevalence of MRSA nasal carriage was 0.6% (4 horses)

Remarkable is that you see a lot of Gentimycin resistance in UK, while you do not see this in the USA (Gentimycin is much more used in the UK than in the USA).

What is the link between animal MRSA and human MRSA?

BEVA swapped 274 delegates in the BEVA conference in 2006, 7.3% were positive and 43/274 had dealt with an MRSA positive case in the previous 3 months. So it seems that people working with horses are more at risk. But is this important for public health?

Conclusions
- A relatively high prevalence of meticillin-resistant staphylococcal carriage amongst horses in the UK community was identified, but MRSA carriage appears rare.
- Most meticillin resistant staphylococci, including MRSA, demonstrated multidrugresistance.
- All MRSA isolates recovered were SCCmec type IV positive, the type which has predominated amongst reported equine isolates, but other SCCmec types were identified amongst the MR-CNS isolates

Prescribing practices in the UK
- Less than 1% of practices have antimicrobial use policy
- 61% never weighted or used weigh tape
- 11% prescriptions for drugs unlicensed in the UK
- 5% of drugs were underdosed, 43% were overdosed
- Fluoroquinolones – 1% of prescriptions
- 3 or 4th generation Cephalosporins - 3% of prescriptions
- Trimethoprim was much more used in a first opinion practice
- Fluoroquinoloses and Cephalosporins are more prescribed in referral practices

Erik Gostelie informed participants that in the Netherlands they have a lot of problems with MRSA. As a result, the government wanted no longer to allow veterinarians to sell antibiotics. As a response the veterinary profession created an authority which will record and monitor all the use of antibiotics.

Peter Clegg answered that in the UK currently it is unknown how much antibiotic is used for which species and for which condition.
In the USA they measured the use of anti-desinfective in clinics. Peter Clegg agreed that this has been a wake-up call to increase hygiene and biosecurity.

13:00 Lunch

14:00 FEEVA News Slot: update on:

**Medicines: the Essentials list, Identification of Equidae, …by Josh Slater**
Followed by Questions & Answers

Josh Slater gave an update on issues around medicines. In 2006 Regulation 1950/2006 established a list of substances essential for the treatment of Equidae (which is a positive list not a negative list!). In 2008, the Regulation on MRLs was adopted which allow the extention of the list of essential products for horses with products which *bring added clinical benefit compared to other treatment options available for Equidae.*

The list was approved by CVMP in December 2009 and is now awaiting public consultation and adoption. Almost all products suggested by FEEVA/FVE were added to the list and more. Unfortunately, they did not want to accept Halothane and Phenylbutazone.

Other issue is the availability of medicines in the different countries, the difficulties importing medicines under the Cascade from other European countries and the discrepancies between national marketing authorisations and European regulations.

Juris Tolpeznikovs distributed two requests he had for FEEVA:

1/ FEEVA to make a list of all equine medicines licensed in the different member states. The list should include the substance name, trade name, countries where it is registered (& distributed) and the legal status (production/non production horses).
2/ DG Sanco consultation on “Better Regulation of veterinary pharmaceuticals”. He explained his ideas on how to answer the consultation. The FEEVA Board will send round the questionnaire in word format, indicating which the most important questions are. Josh Slater invited all to answer as soon as possible as the deadline is 15 June.

Karen Dunne said that in Ireland they had already developed such a list together with ‘how to stay out of jail’ guidelines on using medicines. The EMEA has a list of centrally licensed products. It was decided that FEEVA would try to establish a list covering the different European countries.

Zsolt Pinter pointed at 2 others problem:
- The cascade always gives priority to a licensed veterinary product over a human product; even if the vet product is 3 times as expensive as the same human product
- Under the cascade you are not allowed to import human medicines from another country.

FVE is requesting a real internal market for medicines, just as for animals.

**Horse Identification**

Josh Slater reported on the outcome of the Horse Identification survey.

FEEVA received 14 answers of 12 countries namely from AU (2), DK, FI, GER, IRE, IT, LV, NL (2), NO, SW, UK.

- Has the Identification Regulation been implemented? Yes in 11 countries, in Ireland and Hungary it is ongoing.

- Are “Suitable alternative” ID method other than microchipping allowed? 8 countries replied that they allow only microchipping, 4 countries (Sweden, Germany, Netherlands, Austria) also allow either Hot branding or/and Freeze branding, DNA control, ...

- Who is authorized to identify horses? In all countries the vet is authorized to identify the horses, in addition lay people are allowed in half of the countries (SW, AU, Ger, NL, FI, DK, NO), in Norway and Austria government officials are also allowed and in Austria, Germany, Sweden and Switzerland studbook personnel.

- What type of info on microchip? Mostly UELN

- Central database: 6 countries indicated that they have a central database (Switzerland, UK, Finland, Italy, Denmark, Latvia) ; 3 have no central but have various databases some linked others not

- All but the UK indicated that all horses identified are seen as ‘registered horses ’ according to 90/426/EC (which mean they are derogated from certain parts of the transport Regulation such as on journey times)

- 50% of countries have provision for suspension of passport if disease outbreak

All countries who did not yet replied to the Survey to please do so.

**EPRUMA by Nancy De Briyne**

Nancy De Briyne gave a small update on the EPRUMA initiative. EPRUMA, the responsible use of medicines in Animals is a platform of farmers’ organisations (Copa-Copeco, Fessas), vet organisations (FECAVA, FVE), the feed industry and the animal health industry. The EPRUMA mission is to promote responsible use of medicines in animals by promoting a coordinated approach, involving all stakeholders, to ensure best practice in the responsible use of medicines.

In 2008, EPRUMA produced a first best-practice framework on the use of antimicrobials in food-producing animals using the guiding principle “As little as possible, as much as necessary”. In June this year, the EPRUMA website will be opened (www.epruma.eu) and an EPRUMA poster and
leaflet will be produced. In the long term, other EPRUMA best practices could be produced such as on the use of antimicrobials in companion animals or horses.

**Transport of horses by Erik Gostelie**

Erik Gostelie reported on the meeting of the FVE transport working group on 27 April in Brussels; The main topic of the meeting was the enforcement of the transport Regulation. Other topics on the agenda were the transport of unbroken horses, a checklist at loading and a presentation given by K. Meldrum of World Horse Welfare. Currently EFSA is reviewing all scientific studies in the field of welfare of transport and they aim to finalise their report by end 2010.

On 6 December BEVA and FVE are planning to hold a conference on the “enforcement of legislation in the field of horse transport”. The conference will also be supported by World Horse Welfare, the Belgian Presidency and the European Commission. N. De Briyne explained that the aim of the conference was to identify those areas which would have the most impact on animal welfare during transportation, and then to focus our efforts on making strong recommendations on why those areas are currently a problem and what should be done (in a reasonable timeframe) to correct the problems. The conference will also touch on issues such as lack of sufficient equine slaughterhouses, trade flows, registered versus not registered horses, etc. N. De Briyne invited all FEEVA members to suggest further topics, possible speakers and to promote the conference in their country.

**Update FEEVA Positions by Jesper Moller Neilson**

FEEVA currently has only 2 positions papers, namely on the identification of horses and Hot branding. Both of them need reviewing. The FEEVA Board will review these old positions and investigate the need of new positions such as on disease surveillance, slaughter horses and transport, etc.

15:30  Coffee

15:50  AOB
FEEVA AGM:

16:00  EMY Applications for 2011 – 2012

FEEVA EMY 2011

Steen Bo Larsen from Denmark invited FEEVA to Copenhagen in 2011. They will have their Annual Congress November 2011 (usually 120-150 participants) and FEEVA could do it’s FEEVA GA on 3 November 2011. It will be organised by the Danish organisation in collaboration with the Swedish and Norwegian Association.

FEEVA EMY 2012
The Austrian delegation would like to invite FEEVA to their meeting in November 2012. J. Slater thanked them for the invitation and said the timing would be ideal.

Other invitations FEEVA GA’s
N. Bernandes from Portugal said he would also provisionally like to announce that Portugal would apply to host a future meeting.

NDB to follow up the Austrian and Portuguese application.

16:20  Membership application Portugal and Spain

Portugal

The Portuguese Equine Veterinary Association has applied for membership. The Board investigated this membership application and firmly recommends the FEEVA GA to welcome the Portuguese Association as FEEVA members. The Portuguese Equine Veterinary Association has currently around 90 members.

All delegates agreed unanimously to accept the application of Portugal.

Spain

The Equine Veterinary Association of Valencia Spain applied for membership. The Board had a long discussion on the membership application of Spain and acknowledged that the political organisation in Spain is rather different from other countries. There is a strong regional organisation throughout society and this is reflected in the organisation of the equine veterinary profession such that there is no overarching national body. Nevertheless the Board decided to strongly recommend for the FEEVA GA to accept the application.
In Spain there are the following 4 equine vets associations:

1.- Asociación Española de Veterinarios Especialistas en Equidos, in Madrid, it is supposed to be the “Spanish”, but with less members than the ”regional”. About 120 members.
2.- Asociación Andaluza de Veterinarios Especialistas en Equidos, in Sevilla, about 140 members.
3.- Asociación de Veterinarios Especialistas de Equidos de Catalunya, in Barcelona, about 50 members.
4.- Asociación Valenciana de Veterinarios de Caballos, in Valencia, with 50 equine vets.

All delegates agreed unanimously to accept the application of Valencia for Spain. The member fee will be based on the number of equine vets in Valencia.

16:40 President’s report – Josh Slater

Josh Slater noted that with Portugal and Spain having joined, FEEVA covers now 19 countries. J. Slater invites all to invite veterinary equine associations who are not yet FEEVA member to join FEEVA.

Josh Slater reported on what he gathered from this meeting as important points for FEEVA to look into:

- National databases: importance, linkage of horse to location, removal of dead horses from the database
- National licensing and availability of medicines
- Protecting human health- responsible use of medicines, illegal supply, AMR, horse identification (via sanco questionnaire on medicines, revision directive, FVE medicines working group, ...)
- Disposal and unwanted horses: need for slaughter as near as possible to the place of origin
- Enforcement of transport regulations
- Disease surveillance and preparedness (idea to set up a working party which include a representative of each MS to pull this information together) – every association to nominate a person within their association responsible for working on surveillance
- Clinical practice: gender and generational changes, quality of new graduates and training, defining and sharing best practice
- Lay practitioners: dental technicians (BEVA has code of conduct which maybe could be shared)

16:50 Treasurer’s report – Erik Gostelie

Erik Gostelie presented the finances to the participants. In total, FEEVA currently has around 46 250,14 €. Only the subscriptions from Finland are outstanding.
FEEVA currently has a bank account in Germany since Michael Due and Albrecht Fenner were treasurers. In practice, Petra Dörken (GPM- g-p-m@t-online.de) manages the account and pays the invoices. FEEVA so far is not yet officially registered and the Board decided it was time for FEEVA to officially register itself.

In conclusion, FEEVA is financially in good shape and could invest some of its reserve in important projects.

17:00 Final Discussion followed by closure by FEEVA President at 17:00

Josh Slater thanked all participants for the excellent meeting and wished them a nice further stay in Hungary. He really thought the meeting today had been incredible useful and he saw many new tasks awaiting the FEEVA Board, which he will try to lead as good as possible.
Annex I: List of Participants

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<td>GREET, Tim</td>
<td>USA, ED WEVA</td>
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<td>NORWOOD, Gary</td>
<td>USA, WEVA President</td>
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<td>FOLEY, David</td>
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<td>WHITE, Nathaniel</td>
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