Proposed changes to AHVLA laboratory network

In September, AHVLA announced plans to reduce the number of locations at which laboratory testing is undertaken in England and Wales. This is essential to reduce the agency’s cost base, and will enable investment to be concentrated across fewer laboratories in order to continue to deliver high quality science to our customers.

This change does not affect the location of post-mortem facilities, the activities currently undertaken by the veterinary investigation officers, or the veterinary surveillance programme. Rather, it recognises the fact that surveillance and laboratory testing need not, in all cases, be collocated on the same site.

Laboratory services are currently delivered by scientists based at 16 sites located across Great Britain. The proposed change would see this reduced to eight sites with work currently undertaken at the following locations transferring to other AHVLA laboratories during two phases:

- Phase 1: Thirsk, Truro and Langford (to complete by 31 March 2012)
- Phase 2: Aberystwyth, Carmarthen, Luddington, Preston, and Winchester (to complete by 31 March 2013)

The laboratory-based work from these sites would be redistributed amongst the regional laboratories at Bury St Edmunds, Lasswade, Newcastle, Penrith, Shrewsbury, Starcross, Sutton Bonington, and Weybridge.

We will ensure that the veterinary profession is informed of any changes in the way samples are to be submitted to AHVLA in future, but at present you should continue to follow current practice.

These proposals continue work that has taken place over the last several years to increase the specialist focus of individual laboratory sites, ensuring that modern equipment and appropriately trained staff can deliver high quality, accredited laboratory test results. This model, where post-mortems are carried out in locations convenient to submitting practices, and the supporting laboratory testing is carried out off site, is already successfully in use in several surveillance centres.

AHVLA’s veterinary surveillance services, including post-mortem examinations, will continue to be provided from all 16 of the current sites. As part of reviewing its operations, AHVLA will be working with the veterinary profession and others to consider any changes to the surveillance model for the future, but this is not affected by the proposed changes to laboratory service delivery.
Using the SAM IT System to Manage TB Testing

AHVLA’s Sam IT System

Previous editions of *Official Veterinarian* have described the changes to the way TB testing will shortly be managed, using AHVLA’s Sam IT system to replace the current VeBus system and paper-based processes.

For those OV practices who have signed up to use the system, the intention is to stagger the roll-out over a period of a few weeks. We anticipated that this would take place in late September and through into October, however this has been delayed by some unexpected IT issues.

It is important to us that we provide OVs with a system that is of the highest possible quality. We are therefore taking a thorough step-by-step approach to the staggered roll-out to ensure that the system is working as intended and that OVs are receiving the right level of service. Based on feedback from the initial practices we have been working with, we are also providing increased support and guidance material, particularly around the registration process. It may take several more weeks before all practices who have signed up are using Sam. OV practices will be contacted directly to check that their revised go-live date is convenient. In the meantime, if there are any changes to scheduled test information we will issue you a BT4 to inform you of the change. If your practice uses VeBus you can continue to use it normally.

Please remember that before using Sam, all intended users must have completed the Government Gateway registration, as detailed in the Official Veterinarian section of our website, [http://animalhealth.defra.gov.uk/about/official-vets/index.htm](http://animalhealth.defra.gov.uk/about/official-vets/index.htm). When registering please ensure you make a note of your Government Gateway user ID (the 16 digit unique number).

Tendering for TB Testing in England

AHVLA held three one-day stakeholder meetings at locations across England during September and October to listen to views on the TB tendering proposals for England. The meetings also presented an opportunity to begin discussions as to what a strategic partnership between the agency and private veterinary practices might look like and how it might be developed.

In addition an online facility was made available to capture input from those unable to attend in person, and some AHVLA regional offices also held complimentary meetings with their local OV practices.

The current proposed approaches to TB tendering in England and partnership working, which was presented at the meetings, is available on the AHVLA website in the form of mirrored presentation material, including indicative information on lots, pricing, quality assurance and training.

This engagement has focussed on practical considerations concerned with procurement and how any new arrangements might be operated. However, all are agreed that control for the disease and support for affected cattle keepers is of paramount importance, and that TB testing must be considered in the wider context of TB control measures and other work done by OVs.

An analysis of the feedback obtained from stakeholders in respect of both attended events and via the online forum is now available on our website.

The outcome of these meetings will help shape future discussions regarding tendering in Wales. There are no immediate plans to tender for TB testing in Scotland.

For further information, see AHVLA’s website: [http://animalhealth.defra.gov.uk/about/official-vets/changes-to-procurement/procurement-updates.htm](http://animalhealth.defra.gov.uk/about/official-vets/changes-to-procurement/procurement-updates.htm)
New TB Training Package

A standard bTB training package for newly appointed Panel 1A OVs has been developed. This includes pre-course work that OVs will have to complete prior to attending a classroom training session.

The package was piloted earlier this year with a small number of OVs and received positive feedback.

The training is now being rolled out on a region-by-region basis. The expectation is that all newly appointed Panel 1A OVs will be trained using the new material from early 2012.

We will evaluate and, if necessary, modify the package after a few months of feedback, but we would be interested in any comments OVs may have at this stage.

TB Testing Video

A reminder that a training video detailing TB testing procedures is available on the AHVLA website, and all Panel 1a OVs should familiarise themselves with this:

The video can be found at: http://animalhealth.defra.gov.uk/about/official-vets/video/index.htm

Consultation on Instructions for OVS for TB Testing

AHVLA's Operations Manual Team, responsible for producing the agency’s standard operating procedures (SOPs), are consulting OVs who have volunteered to review the proposed format, layout, navigation and content of the draft TB instructions for OVs.

The consultation will help AHVLA to produce updated, clear and unambiguous instructions, which will be available online from January 2012.

A similar exercise for instructions relating to export work is also in preparation.

Changes to OV Appointment & Training

AHVLA is intending to implement a series of enhancements to current OV appointment and training arrangements. These enhancements will better reflect the changing landscape of private veterinary practices by providing a more agile service to OVs. We hope to introduce these changes without delay, partly as an immediate response to comments made during the recent stakeholder meetings.

The new arrangements will include:

- Removing the obligation to appoint to, and provide training for, panels that prospective OVs will not use.

- Waiving, where appropriate, the requirement for three months in-practice experience before applying to become an OV. Where this exemption is requested, the emphasis will be on the practice to provide assurance in writing that the prospective OV is competent and fit to start the appointment process immediately.

- Changing the requirement for a practice principal to hold all panel appointments for which an OV is nominated, to a named individual within the practice. The role of the ”named individual” in taking responsibility for the professional standards of the panel holders within the practice would remain unchanged.

- A standardised training package for TB testing (detailed above).
Marking TB Reactors with a DNA Tag (England & Wales)

The requirement, in England and Wales, to apply a DNA marking tag to TB reactors at the point of disclosure (TT2) has been in place since 2011. It is now considered part of the TB test procedures and the instructions regarding the application and despatch of tags should be followed at each test.

Overall the application of the DNA marking tags has gone very successfully. However a number of issues with the tagging of cattle, submission of the tag capsules and the quality of information provided have arisen, including:

- Not recording the individual DNA tag numbers on test charts against animal ID.
- Not reading the test using the correct interpretation (i.e. severe rather than standard or vice versa).
- Too little or too much information written on evidence bags.
- Significant delays in returning capsules following application.

The incorrect or missing information could mean that we are unable to reconcile invoices submitted for payment of tags applied, thereby delaying or even preventing payment of all, or part, of an invoice.

In addition there are some other areas of concern and OVs are asked to refer to the instructions above, particularly in the following areas:

- Unable to apply a tag
- Which animals to tag
- Notification of reactors to AHVLA
- Sample transport
- Tag removal.

Please familiarise yourself with the latest instructions on applying tags and submitting invoices (available at: http://animalhealth.defra.gov.uk/about/official-vets/guidance/Instructions-on-tagging-TB-reactors.html).

Further advice is available from AHVLA’s DNA Tagging team:

- Telephone: 0845 6014858
- Fax: 01905 768649
- E-mail: AHspecialistservicecentre@ahvla.gsi.gov.uk

Marking TB Reactors in Scotland

In Scotland TB reactors will be marked with a metal ‘R’ tag at valuation or, when cattle are tested by an AHVLA Veterinary Officer, when the test is read.
Significant changes to the way TB surveillance is undertaken in Scotland were announced by the Scottish Government in October. Under the new arrangements, herds which meet certain risk criteria will now be exempt from four-yearly routine herd testing for bovine TB.

The move to a more risk-based testing programme aims to share the benefits of having OTF status with the industry, and to better target resources in the current economic climate. It is backed by recent research by Glasgow University into long-term options for more effective TB surveillance in Scotland.

The exemption criteria which determine whether a herd is ‘low risk’ and is therefore exempt from routine herd testing are as follows:

- Herds of fewer than 20 cattle with no more than one consignment of cattle moved on from a high incidence TB area during the previous four years.
- Herds where 25 per cent or more of the stock is slaughtered annually, and with no more than one consignment of cattle moved on from a high incidence TB area in the previous four years.
- Herds where more than 40 per cent of the stock is slaughtered annually, over a four year period.

Eligibility for exempt status will be reassessed annually, reviewing trading patterns over the last four years on each premises.

The new approach will mean that approximately 35 per cent of Scottish cattle herds will become exempt from routine four-yearly TB testing, with significant savings for both industry and government. Targeted surveillance will be maintained with pre-and post movement testing of cattle coming to Scotland from high incidence TB areas, and full investigations of any new breakdowns, including testing traced animals.

This change will affect herds that are due to have completed a routine herd test on or after January 1 2012 and herd owners and OVs have been notified individually by letter.

Scotland was recognised as being Officially TB Free (OTF) by the European Commission in September 2009, and OTF status provides the flexibility to design a dedicated and original routine TB surveillance programme for the Scottish national herd, rather than being tied to four yearly routine skin testing.
Defra has announced plans to further strengthen the bTB control policy in England. The proposals, which if adopted following consultation, are likely to be introduced during spring 2012. They include:

- Reducing compensation payments for reactor animals from herds where TB tests are more than 60 days overdue.
- Strengthening enforcement of TB surveillance and control requirements.
- Removing some of the exemptions to the requirement to test animals before they move out of herds under annual and two-year routine testing.

The proposal to reduce compensation payments for significantly overdue tests will be applied on a sliding scale:

- Tests overdue for 60-90 days will result in a 25 per cent reduction.
- Tests overdue for 90-180 days will lose 50 per cent.
- Tests overdue for more than 180 days will lose 95 per cent.

Cattle keepers will be able to appeal to AHVLA where they feel delay may be 'justifiable or unavoidable', for example due to the non-availability of vets or serious illness. It would be the responsibility of the cattle keeper to satisfy AHVLA officials that the delay was outside of their control.

Defra is also proposing a number of other changes to the cattle compensation regime, including moves to address anomalies in the tabular valuation system. Other proposals include:

- Reducing compensation payments to farmers who fail to present cattle passports within a specified period.
- Introducing new tabular valuation categories for young pedigree beef animals (0-6 months).
- Splitting the dairy calved categories into under and over seven-year-old bands to reflect the lower value of older animals.
- Moves to prevent compensation for steer cattle being paid at pedigree rates.
- Exclude sales data for non-productive animals when determining compensation rates for the under-three-months dairy calf category.
Presenting Livestock for Slaughter

Clean livestock

Producing clean cattle for slaughter can be a difficult task, due to wet weather, long months of winter housing and the cost and supply of straw-bedding. However, if hides are contaminated with faeces at the time of slaughter there is a real risk of the meat becoming contaminated with harmful bacteria, such as VETC 0157, Campylobacter and Salmonella.

Even the highest standards of abattoir hygiene cannot guarantee to prevent contamination of the carcase and cross contamination of nearby carcases during dressing. Research results have shown that the dirtier the hide, the greater the potential for carcase contamination and the higher the risk to human health. Wet hides may also increase the risk of bacteria being transferred more readily.

At the abattoir animals are checked by the food business operator at the ante-mortem stage for cleanliness and dryness. To prevent the contamination of meat and reduce risks to public health, the operator may reject for slaughter any animal that does not meet the required standard of cleanliness described in the policy.

The criteria for identifying the cleanliness of cattle and sheep are separated into five categories, ranging from clean and dry to filthy and wet. Only livestock in categories one and two (clean and dry/slightly dirty and dry/damp) would normally be allowed to proceed to slaughter for human consumption without further action needing to be taken.

TB reactor cattle

TB reactor cattle sent for slaughter are required to meet the same standards that are applied to all other cattle. The salvage value received for these reactors is used to offset the compensation paid to farmers and helps to underpin the viability of the existing TB compensation arrangements.

It is in the interests of farmers generally that TB reactors are presented for removal and slaughter in a clean and dry condition, so that receipts from this source can be maximised. It is important to remind your clients of the issues covered by this article at the time of reading the TB test.

Medicine withdrawal periods

Similarly, before submitting a TB reactor for slaughter the owner or stock keeper must declare that no medicines have been administered to the animal or that the withdrawal period has been observed. If that declaration cannot be signed because of known treatment, the reactor is humanely destroyed on farm and the carcase processed via the local knacker, denying the possibility of maximising salvage value.

OVs are asked to remind keepers not to administer medicines on the first day of the TB test, and only do so when the animal has passed the test on the reading day. It is implicit that the interpretation of the test is known to avoid problems e.g. should an IR be reclassified as a reactor. OVs are asked to advise their clients accordingly.

This advice does not of course override the need for treatment to avoid welfare problems and when long term treatments, such as multi-dose wormers for summer outliers, are required.
Pet Travel Scheme

Update on Changes to Pet Travel Scheme

Following the announcement of changes to the Pet Travel Scheme detailed in the previous edition of Official Veterinarian, a series of questions have been received from veterinary professionals. Responses have been published on the AHVLA website at: http://animalhealth.defra.gov.uk/about/official-vets/guidance/q&a-pet-travel-scheme.htm.

The set of questions detailed below have been received via the BVA and are published here for information and advice.

By way of reminder, the key changes to the Pet Travel Scheme rules, which come into effect on 1 January 2012, are set out below:

### Entry rules for pets entering the UK from the EU and listed third countries

<table>
<thead>
<tr>
<th>What has to be done</th>
<th>Until 31 December 2011</th>
<th>From 1 January 2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Microchip</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Rabies vaccination</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Blood test</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Pre-entry waiting period</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Length of waiting period</td>
<td>Six months from date sample taken for blood test</td>
<td>21 days after primary vaccination against rabies [N.B. the 21 day wait is not applicable if an unbroken chain of vaccines has been maintained].</td>
</tr>
<tr>
<td>Tapeworm treatment</td>
<td>Yes [24-48 hours before embarkation to UK]</td>
<td>Dogs will have to be treated with praziquantel* within a period of not more than 120 hours and not less than 24 hours before the time of their scheduled entry into the UK. No treatment will be required for dogs travelling directly from Malta, Finland or Ireland. (*Other medicinal products that are effective against Echinococcus multilocularis and have a market authorisation in the country where the product is applied, can also be used.)</td>
</tr>
</tbody>
</table>

### Entry rules for pets entering the UK from unlisted third countries

<table>
<thead>
<tr>
<th>What has to be done</th>
<th>Until 31 December 2011</th>
<th>From 1 January 2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Microchip</td>
<td>All pets from unlisted third countries are licensed into quarantine for six months and vaccinated against rabies on arrival</td>
<td>Yes</td>
</tr>
<tr>
<td>Rabies vaccination</td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>Blood test</td>
<td>Blood sample must be taken at least 30 days after vaccination</td>
<td>Yes</td>
</tr>
<tr>
<td>Pre-entry waiting period</td>
<td></td>
<td>Three months from date of blood sample</td>
</tr>
<tr>
<td>Length of waiting period</td>
<td></td>
<td>Dogs will have to be treated with praziquantel* within a period of not more than 120 hours and not less than 24 hours before the time of their scheduled entry into the UK. No treatment will be required for dogs travelling directly from Malta, Finland or Ireland. (*Other medicinal products that are effective against Echinococcus multilocularis and have a market authorisation in the country where the product is applied, can also be used.)</td>
</tr>
<tr>
<td>Tapeworm treatment</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
What are the risks for animals going to places in the EU where rabies is present in the wildlife population?

Vaccination programmes across several EU Member States has led to a significant reduction in rabies cases across the EU over the last ten to 20 years. Italy, for example, no longer has a problem in wildlife since they have vaccinated so thoroughly. There may always be small waves of infection in wildlife, when vaccination stops and levels of immunity drop, but these increases only rarely lead to spill-over cases in domestic pets. Pets travelling to the EU will need to be vaccinated and therefore should be protected against any low level risk of infection.

Should multiple vaccinations or blood tests be given to ensure protection?

If vaccination is done too soon before travel, the pet is not protected. Multiple vaccinations will not make any difference, but boosting is necessary. Single vaccination should be followed up with a booster, not only after the initial immunisation, but also annually or as per manufacturer’s instructions.

There are studies which suggest the blood test failure rate for vaccines varies according to the vaccine manufacturer, age and size of animal and the time between boosters. The blood test will not, of course, prevent an unvaccinated animal travelling under a fraudulent certificate, but robust checks will remain in place to ensure that any such cases are detected.

How effective is vaccination?

Whilst no vaccine can ever be 100 percent effective, all vaccines used in the UK will have been tested for efficacy and efficiency and approved by the Veterinary Medicines Directorate, and we have confidence that similar assurances will be provided by the veterinary medicines services of other Member States and listed countries.

For those ‘unlisted’ countries where rabies is still a risk and there is less confidence in domestic veterinary systems, a blood test will still be required and must be carried out by an EU approved laboratory.

Has the UK changed the pet travel scheme rules against OIE advice?

For countries that have an unfavourable rabies situation, the EU rules reflect OIE guidelines.

The situation is slightly different within the EU [and listed third countries] where in the rare cases that the disease has not yet been eradicated, there is a clear and demonstrable eradication and monitoring programme in place.

The EU pet movement system has been highly successful, demonstrated by the fact that, with many hundreds of thousands of pet movements across and into the EU, there has not been a single case of rabies associated with the legal movement of pets under the scheme since the system was introduced in 2004.

Should rabies become a potential diagnosis from 2012?

The risk of a rabid animal entering the UK remains extremely low so it remains an unlikely diagnosis from 2012. Vets should however remain vigilant for all diseases and this advice does not change. On average AHVLA manages a handful of rabies investigations every year.
Illegal Use of Elastrator Rings on Calves Aged Over Seven Days

As part of scanning surveillance, AHVLA regional laboratories regularly undertake diagnostic post-mortem examinations on calves. In addition to producing a report on its findings to the submitting veterinary practitioner and client, and the provision of diagnostic data to VIDA (Veterinary Investigation Diagnosis Analysis), all submissions and accompanying histories are also under constant welfare scrutiny. Any concerns raised at regional laboratories are resolved wherever possible through dialogue with the submitting practitioner.

Unfortunately, as reported in the Veterinary Record (2011, Vol. 169, Issue. 16), recent submissions to AHVLA regional laboratories indicate that the castration of calves by the illegal practice of applying rubber elastrator rings to the scrotum, particularly of purchased, entire calves aged over seven days, is occurring.

The Mutilations (Permitted Procedures) (England) Regulations 2007 (and similar legislation in Wales and Scotland) prohibits the application of a rubber ring or other device to constrict the flow of blood to the scrotum of cattle older than seven days of age. An anaesthetic must be administered for any calf castration performed over two months of age. The Veterinary Surgeons Act (1966) (as amended) allows persons over the age of 18 (17 for supervised animal husbandry students) to carry out castrations on calves less than two months of age only. However the procedure used must minimise the pain and suffering it causes to the animal, be performed in hygienic conditions and be in accordance with good practice.

In addition to the use of rubber elastrator rings being illegal in calves over seven days, it is highly likely that the affected calves would have been subjected to prolonged discomfort, thus their growth rates could have been checked, and the resulting stress would have increased their susceptibility to disease. Castration is a painful procedure whatever the age and procedure used. It is less painful for one-week-old calves than for three-to six-week-old animals, and it is less painful at one-and-a-half months than at older ages. Castration with a rubber ring causes both acute and chronic pain for at least six weeks.

Anyone found to have performed calf castrations illegally risks enforcement action, including prosecution and a penalty reduction for those clients subject to cross-compliance inspections under the Single Payment Scheme and other agri-environment schemes. All OVs are asked to ensure that their practice clients (particularly those purchasing and rearing calves) are made aware of this illegal procedure by direct contact or via practice newsletters, and it is recommended that a castration action plan be a component part of any farm management plan that is in place.
News in Brief

Treatment of Non-Bovine TB Suspects

Changes to legislation in Wales, which came into force in the Spring of this year, make it illegal to treat certain non-bovine species (camelids, goats and deer) where TB (Mycobacterium bovis infection) is suspected, without the written consent of the Welsh Ministers. For further information, please consult The Tuberculosis (Wales) Order 2011.

In England and Scotland, the Tuberculosis (Deer) Order 1989 explicitly forbids the treatment of any deer for TB.

We would like to draw your attention to this legislation and would also remind you that antibiotic treatment for TB of other livestock species not specifically mentioned in the above-mentioned Orders is not advisable.

The antibiotics used to treat human TB are not licensed for use in animals and such off-label use of those drugs poses several risks. Effective treatment of TB in humans is a complex and costly procedure involving a six-month course of a combination of at least three different drugs. Incomplete treatment regimes with drugs that have not been licensed in animals, whilst seemingly capable of resolving the clinical signs of TB, is unlikely to result in a complete microbiological cure, leading to latent infections and development of antimicrobial resistance, with the attendant serious public and animal health risks.

Additionally treatment of animals with anti-TB drugs interferes with the diagnosis and control of TB in infected herds due to the masking of clinical signs and the depressed immunological responses to the ante-mortem tests for TB, which increases the risk of false negative results.

Appointments to the Animal Health and Welfare Board for England

Defra has announced the appointment of the first non-executive members of the Animal Health and Welfare Board (AHWB), which met for the first time on 8 November.

Joining board chairman Michael Seals (a livestock and arable farmer and chair of the National Fallen Stock Company) will be: Stewart Houston, BPEX chairman and AHDB board member; Stuart Roberts, agriculture and livestock director at Anglo Beef Processors; Prof Tim Morris, director of the Department of Equine Science and Welfare at the British Horse Racing Authority; and Mark Tufnell, a chartered accountant and tax adviser who runs a family farm in the Cotswolds.

The creation of AHWB allows individuals with a wealth of knowledge to bring this into the heart of Government to advise on policies which affect their industry and ensure good animal welfare standards.

Changes to Brucellosis Surveillance

A review on Brucella has been carried out on behalf of all four Chief Veterinary Officers in the UK to determine whether or not to recommend the adoption of measures to streamline procedures for surveillance monitoring.

As a result, the requirements for post-import testing of cattle from the Republic of Ireland (ROI) and Northern Ireland have been reviewed. The immediate post-import testing of cattle from both the Republic and Northern Ireland is no longer required unless the importer is considered to pose a risk due to history of non-compliance. The 60 days post-import testing is only required for cattle from the ROI when there is no evidence that the pre-export test has been carried out.

Office documentary checks are carried out for all consignments of Irish cattle and non-compliances are dealt with accordingly.

Post-calving checks and the annual check blood test of eligible herds is being maintained.

OVs are reminded of the need to take appropriate samples at bovine abortion enquiries. The appropriate samples to take are blood, milk and vaginal swab. Every effort must be made to obtain a full range of samples at every investigation and submit them to the laboratory with Form BS7. Full instructions are contained in Chapter 12 of your OV instructions.
News in Brief

New Video to Help Farmers Reduce TB Risks

Farmers can find advice on reducing the risk of their cattle contracting TB from wildlife through a new series of online videos.

The information and advice in the video is drawn from behavioural and observational studies carried out by researchers at the Food and Environment Research Agency (FERA) which provides impartial, independent advice to Government, and who have been involved in the study of badgers and bovine TB since the 1970s.

The videos are available to download on YouTube: http://uk.youtube.com/user/defrauk.

The Illegal Use of Prescription Only Medicines

Livestock keepers risk financial sanction and imprisonment if they use ‘prescription only’ veterinary medicines without a prescription, even if such medicine has been legally purchased ‘over the counter’ in another EU country. OVs may wish to include the following article on this subject in communications to their clients.

In the UK (which includes Northern Ireland) the supply of Veterinary Medicines is governed by the Veterinary Medicines Regulations 2011. These define various categories of Authorised Veterinary Medicinal Product, one of which is ‘Prescription Only Medicine – Veterinarian’ (POM-V). This class includes anaesthetics, antibiotics, steroids and hormones.

A POM-V may only be supplied by a veterinary surgeon (or a pharmacist) and must be used in accordance with a veterinary prescription. A veterinary surgeon prescribing a POM-V must first carry out a clinical assessment of the animal and the animal must be under that veterinary surgeon’s care.

In other countries, including the Republic of Ireland, veterinary medicines are classified differently, and some – most notably some antibiotics, mastitis and dry cow therapies – can be sold without a prescription. It is however illegal in the UK to use medicines classified as POM-Vs without a prescription, even if those medicines were acquired legally ‘over-the-counter’ in another country. Illegal use of POM-Vs in the UK may be punished by a custodial sentence or fine.

A prosecution under the Veterinary Medicine Regulations may also result in a follow up cross compliance inspection (or irregularities may be identified at a routine inspection) which would result in the farmer having breached SMR 18 (Welfare of Farmed Animals) requirements. This is likely to result in a reduction in payments made against the Single Farm Payment (SFP), the Less Favoured Area Support Scheme, the Scottish Beef Calf Scheme, the Land Managers Options Scheme or the Rural Priorities Scheme. Additional, or repeated, breaches will further rapidly reduce the payments keepers are entitled to.

As well as these penalties, breaches will be reported to any quality assurance scheme the farmer is a member of, with the likely implication of being suspended from the scheme.

For information about the correct supply of veterinary medicines, your first source of information should be your own vet. Further to that, more information is available from the Veterinary Medicines Directorate website at: www.vmd.defra.gov.uk.