

Recommendations for Horses Exposed to Equine Herpes Virus (EHV-1) or Equine Herpes Virus Myeloencephalopathy (EHM)

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(Source: USDA-APHIS-VS)

Background

Cases of Equine Herpes Virus (EHV-1) and Equine Herpes Virus Myeloencephalopathy (EHM) have been identified in horses that recently attended a cutting horse event in Ogden, Utah held from April 29 to May 8, 2011. The National Cutting Horse Association has notified State Veterinarians of horses from their states that were entered in the event and may have been exposed to the virus. Horses exposed at the event in Utah have since left the event and may now have exposed horses at their home farm or other equine facilities.

Management of Suspect and Confirmed EHV-1 or EHM Cases

Key Points

- *Suspect and confirmed clinical cases need to be strictly isolated from non-clinical horses*
- *Suspect clinical cases should be sampled for laboratory confirmation of EHV-1*
- *Management Option 1: Cases and herd mates isolated for at least 21 days past resolution of clinical signs, then releasing test on all horses on the premises*
- *Management Option 2: Cases and herd mates isolated for at least 28 days past resolution of clinical signs with no releasing test*

Suspect EHV-1 or suspect EHM cases should be immediately isolated from other horses on the premises. The most effective method of isolation is removal of the suspect horse from the general horse housing area in which non-clinical horses are located. The isolation facilities of a local veterinary clinic or a separate barn/building on the affected premises are highly recommended. Some farms have used portable event tents and portable stalls to create an isolation unit on the premises. Febrile and neurologic EHV-1 cases shed large amounts of virus via the respiratory route and sharing airspace or fomites (equipment, buckets, human contact) within a barn may lead to further disease transmission. If physical separation of suspect cases in a different building is not possible, then relocation within the barn to a stall far removed from other horses with strict isolation biosecurity protocols implemented for handling the suspect horse may be an effective method of containment.

Suspect EHV-1 and suspect EHM cases should be sampled by a private practitioner for diagnostic testing.

Management Option 1 (Best)

Confirmed and suspect EHV-1 and EHM cases should remain isolated with no movement of horses in or out of the affected premises for a period of at least 21 days from the resolution of

clinical signs in all horses on the premises. Daily monitoring of rectal temperatures for all horses on the premises should continue through the 21 day period and horses should not be on any non-steroidal anti-inflammatory drugs (NSAIDs) during this time, as NSAIDs will mask a fever. If no new suspect or confirmed cases are identified during the 21 days, then sample all exposed horses on the premises using real-time or nested PCR testing of nasal swabs. If all negative results are obtained, the quarantine can be discontinued.

Management Option 2 (For premises with many horses where Option 1 may be economically impractical)

Confirmed and suspect EHV-1 and EHM cases should remain isolated with no movement of horses in or out of the affected premises for a period of at least 28 days from the resolution of clinical signs in all horses on the premises. Daily monitoring of rectal temperatures for all horses on the premises should continue through the 28 day period and horses should not be on any NSAIDs during this time. If no new suspect or confirmed cases are identified within this 28 day period, then the quarantine can be discontinued with no additional diagnostic testing.

Treatment and Vaccination

Horses with neurological signs will require intensive supportive care that should be administered by an equine private practitioner. Since vaccination and treatment strategies can be highly variable and depend on the specific farm situation, owners should work directly with the private practitioner to develop the appropriate treatment and/or vaccination strategy for premises with suspect or confirmed EHV-1 or EHM cases.

Diagnostic Testing : Testing of non-clinical, exposed horses is not recommended!

Cleaning and Disinfection (C&D) of Confirmed EHV-1 and EHM Case Premises

EHV-1 virus can stay viable in the environment for several weeks or longer. Thorough cleaning and disinfection of all horse trailers and equipment that returned from the event in Ogden, Utah is highly recommended. Cleaning and disinfection of barns, individual stalls, feeders, waterers, buckets, and other equipment should be performed on all confirmed EHV-1 and EHM case premises at the end of the quarantine period and before quarantine is discontinued. See the AAEP biosecurity protocols for detailed guidance on effective C&D procedures:

http://www.aaep.org/pdfs/control_guidelines/Biosecurity_instructions%201.pdf

EHV-1 and EHM Education and Outreach Materials

USDA-APHIS website

EHV information sheets, color brochures, historical information, and a review of disease mitigation strategies are available on the USDA-APHIS website:

<http://www.aphis.usda.gov/vs/nahss/equine/ehv/>

AAEP website:

General EHV resources through the American Association of Equine Practitioners:
http://www.aaep.org/ehv_resources.htm

Neurologic Disease Guidelines:
http://www.aaep.org/pdfs/control_guidelines/Neurologic%20Disease%20Guidelines.pdf

Equine Herpes Virus:
<http://www.aaep.org/images/files/EquineHerpesvirusGuidelines051711.pdf>

Biosecurity Guidelines:
http://www.aaep.org/pdfs/control_guidelines/Biosecurity_instructions%201.pdf

Biosecurity Instructions for Caretakers - English & Spanish:
http://www.aaep.org/pdfs/control_guidelines/Instructions%20to%20grooms.pdf

National Cutting Horse Association (NCHA) website:

For history of the current outbreak and additional outreach materials:

<http://www.nchacutting.com/>

ACVIM Consensus Statement on EHV-1:

<http://onlinelibrary.wiley.com/doi/10.1111/j.1939-1676.2009.0304.x/pdf>