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Introduction

Parasiticide products are commonly used in small animal medicine to prevent and treat for various parasites, including fleas, ticks and worms. As well as preventing animal health and welfare problems, human health risks from associated zoonotic threats have to be considered.

Recently, concerns have been raised that some of these medicines are contaminating the environment. Parasiticides could be reaching rivers through wastewater from homes or other premises where animals are kept, or from animals entering rivers. Parasiticides may also be excreted in urine and faeces, and therefore deposited in gardens and open spaces, and absorbed into soil. As parasiticides are harmful to a wide range of invertebrates, this could be highly detrimental to wildlife and ecosystems. This in turn could impact on public health.

In the farm animal and equine sectors, there are concerns over high levels of resistance to parasiticide products as a result of misuse and overuse. Whilst this is not currently an evidenced threat in small animal medicine, maintaining the efficacy of these products in the future is important.

Parasiticide products come in various forms, including oral, topical, or injection treatments, and are used to treat a wide range of animals, including livestock, equines, and wildlife. The way in which the medicines are used, and the relevant risk factors, differ with each host species, and most of the available data referenced in this position relates to cats and dogs. However, many of the recommendations will also be relevant for the treatment of rabbits and other small mammals. Whilst comparisons are made with the farm animal and equine sector, the risk of zoonoses for the small animal sector carries a distinct difference given the nature of companionship and the close proximity resulting from owners sharing living spaces with their pets, along with shared public spaces and parks. In addition, the zoonotic impact will be different for ectoparasites and endoparasites.

Veterinary professionals should always take a risk-based approach to prescribing medicines, including parasiticides. However, there are many knowledge gaps in relation to parasites and the use of parasiticide products, making that risk analysis difficult. Our position highlights these gaps and calls for more research to be undertaken. It is also designed to promote greater discussion of the concerns associated with the current use of these products and encourage responsible evidence-based approaches to prescribing them.

This statement will explore the background to the potential conflict that exists between the needs of animal health, human health and the health of the wider ecosystem. It is a true One-Health problem of immense complexity, and our understanding and position will develop as the evidence base grows. Given the unknown but potentially severe environmental impacts, there should be a more considered approach to the use of small animal parasiticides.

Parasite threats

Parasites are common on cats, dogs and other small companion animals, and are frequently categorised as:

- external or ectoparasites, including fleas, ticks, and mites
- internal or endoparasites, including tapeworms, roundworms, and protozoa
These parasites can cause direct animal health and welfare issues, including clinical disease, as well as acting as disease vectors. They can also spread to humans – a zoonotic risk.

**Animal and human health risks**

Some parasites can pose a potential threat to human health in terms of their zoonotic potential, particularly for very young, elderly, and immunosuppressed individuals. Zoonotic risks are increased by the fact that owners are often in very close contact with companion animals and share the same living areas. Fortunately, whilst some parasites such as ticks and fleas and their resulting diseases are common, prevalence of zoonoses appears to be rare. However, as most of these diseases and zoonoses are not notifiable and the symptoms in humans are sometimes vague, they are often not tested for, so the true prevalence is difficult to ascertain. It is also important to remember humans can be directly infected by the parasites from environmental sources, so prophylactic treatment of pets may not greatly reduce the incidence of some diseases in humans. Current estimates and further research are needed to develop our understanding of the risks to human health.

**Ectoparasites**

Ectoparasites can:

- cause skin lesions, which may lead to secondary infections
- induce immune responses, which may lead to potentially severe or debilitating allergic reactions
- act as a vector for the transmission of pathogens, which may cause diseases
- cause a nuisance to the animal, such as itching and scratching, directly affecting their welfare
- cause anaemia due to blood-feeding from intense burdens, especially in young or debilitated animals
- in the absence of effective treatment, on rare occasions lead to death of the animal.

**Fleas**

Fleas (*Ctenocephalides spp.*) are common throughout Europe and are significant vectors of various infections. Their bites cause physical irritation, and can lead to flea allergic dermatitis, which is a serious concern for animal health and welfare.

Fleas produce minor skin irritation in humans and also act as vectors for zoonotic diseases, including *Bartonella henselae* and *Rickettsia felis*. Some species of *Bartonella* can lead to serious human health conditions such as fever, skin lesions, haemolytic anaemia, immunosuppression, lymph node enlargement, and encephalopathy, particularly for those who are immunocompromised. *R. felis* is also known to have negative impacts on human health, inducing fever, rash and neurological signs, though its full impacts are not well understood. The tapeworm *Dipylidium caninum*, which is involved in the life cycle of the flea, is also zoonotic. Non-zoonotic diseases spread by fleas, such as *Mycoplasma haemofelis*, are also of relevance for pets. Although cases of diseases caused by *Bartonella* and *Rickettsia* appear to be rare, neither are notifiable nor routinely tested for, so it is possible that the prevalence is higher than currently thought. Further studies should be undertaken to understand the true prevalence of these diseases in both the animal and human population.

Once established, flea populations can be difficult to eradicate from a household, with some evidence suggesting it can take up to three months to do so, during which time the zoonotic risk remains present. The exact prevalence of fleas on cats and dogs in the UK is unclear but significant, with

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1. https://www.esccap.org/parasites/Ectoparasites+Insects/2/

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populations varying considerably from year to year. There are consistent seasonal differences, with a tendency to increase from spring to autumn, but fleas are present and continue to pose a risk even in colder months.

There is currently a lack of clear research into other factors which increase or decrease the risk of an animal having fleas, such as geography or lifestyle. This makes it difficult to completely prevent fleas without control measures, including those directed at the environment.

**Ticks**
A variety of tick species exist within the British Isles, primarily *Ixodes ricinus* but also *I. hexagonus* (hedgehog tick) with *Dermacentor reticulatus* present in some areas. Ticks rarely cause significant problems through their physical attachment but are an important vector for a number of diseases of animals and humans. Recent cases of canine Babesiosis have highlighted the risk of vector-borne disease in travelling animals. Human cases of Lyme disease (9) (*Borrelia burgdorferi* and rarely, *Borrelia mayonii* infection), *Babesia canis* and *Ehrlichia spp.* have risen in recent years, although are only occasionally seen in cats and dogs.

Various lifestyle factors and geography are known to influence the risk of tick exposure (11), including passing through long grasses (12). However, data from the Big Tick Project (13) shows that large numbers of animals have incidental ticks and risk factors such as the presence of deer or sheep are implicated. This knowledge helps enable a more risk-based approach to be taken to prevention and treatment, although the seasonal pattern of emergence is changing with associated climate changes.

**Mites**
Mites also commonly cause animal health and welfare concerns, including mange. Most are host specific, though *Sarcoptes scabiei* mites cause sarcoptic mange in dogs and scabies in humans, which is extremely uncomfortable. Other mites include *Demodex* mites, which are host-species specific, and ear mites (eg *Otodectes cynotis*), which can cross-infest other species. *Cheyletiella* mites are common in small rodents and rabbits, can infest dogs and cats, and can bite humans, and Harvest mites (*Trombicula autumnalis*) are parasitic in the larvae stage in certain geographical locations (14, 15).

**Lice**
Various species of lice can occur on all animals. These are host specific and rarely cause or carry disease for small companion animals.

**Recommendation 1:** Existing information regarding risks factors which contribute to common ectoparasite infestations should be collated, and further research undertaken to fill knowledge gaps. Academic institutions and Government have a role to play in this.

**Recommendation 2:** Research should be conducted to identify the impacts of parasite-borne disease such as Bartonellosis, Rickettsioses, and Lyme disease on human health, and to quantify the true prevalence of these in both the animal and human population. This should be carried out with a one health approach in mind, with animal and public health experts involved.

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(1) McGarry J (2019) Update on fleas. Available at: [https://www.liverpool.ac.uk/savsnet/focus-on-disease/focus-on-disease-fleas/](https://www.liverpool.ac.uk/savsnet/focus-on-disease/focus-on-disease-fleas/) Accessed 6/9/21

(2) McGarry J (2019) Update on fleas. Available at: [https://www.liverpool.ac.uk/savsnet/focus-on-disease/focus-on-disease-fleas/](https://www.liverpool.ac.uk/savsnet/focus-on-disease/focus-on-disease-fleas/) Accessed 6/9/21


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Endoparasites

There are various types of helminths (worms) which affect cat and dog species in the UK. Some are not of clinical significance most of the time, but others can result in clinical disease and possibly lead to death. Some are also potentially zoonotic.

The most common types of worms are detailed below.

Roundworms
Intestinal roundworms (Toxacara and Toxascaris spp.), which can infect cats, dogs, humans and other species. In animals these can lead to symptoms such as diarrhoea, vomiting and weight loss, especially in young or debilitated animals. Although there are risk factors that may suggest an animal is more likely to be infected and shedding eggs, eg during pregnancy, and in young puppies and kittens, it is difficult to predict when a cat or dog is likely to be shedding roundworm eggs, and they can be shed intermittently. More quantitative estimates of the relative sources of Toxocara spp. eggs in given localities would help to understand the risks roundworms pose.

In humans, Toxacara infection can, in rare cases, cause symptoms including breathing difficulties, abdominal pain, blurred or cloudy vision and seizures, with young children and the immune-suppressed being most at risk. Cases appear to be rare, however it is possible that many go unnoticed as symptoms are attributed to other causes. Human infection comes from exposure to Toxocara spp. eggs within the environment, so responsible collection and disposal of cat and dog faeces is vital to reduce infection. While this can be achieved with most dogs, it is difficult with cats that have outdoor access. Sensible personal hygiene measures such as hand washing when gardening is an effective control.

Tapeworms
Tapeworms may cause dogs to become itchy around the anus, and may lead to sickness or diarrhoea, but do not usually pose a severe health risk. Tapeworms also do not pose a significant health risk to cats, unless they are debilitated or have other diseases. In both cats and dogs, owners are likely to be worried or repulsed if they see the segments (usually Dipylidium caninum) in faeces, and therefore seek treatment.

Zoonotic concerns arise when humans become the intermediate host for Echinococcus granulosus, which can lead to hydatid disease. This can be serious for livestock and for human health and has been the subject of specific public health programmes in Wales. Fortunately, it is rare in the UK and is only prevalent in certain geographical areas, and further introduction of the disease is limited by the requirement to treat dogs with praziquantel or a similar product prior to entry to the UK. This also prevents introduction of Echinococcus multilocularis, another tapeworm species of zoonotic concern.

The risk factors for tapeworm are clearer, eg having fleas and consuming prey, meaning that not all animals need regular treatment to control these parasites.

Lungworm
Lungworm in the UK (Angiostrongylus caninum) is not zoonotic, but can cause serious problems for dogs, including bleeding and coughing. The main bleeding problems are largely due to impairment of clotting that leads to a wide variety of secondary problems including neurological problems (due to bleeding the brain/spinal cord), haemorrhagic pneumonia, extensive spontaneous subcutaneous bruising, and increased risk of bleeding during surgery (including neutering). Animals can be asymptomatic until seriously ill, which makes testing and treatment difficult. Geographic factors, and

18 NHS overview of Toxocariasis. Available at: https://www.nhs.uk/conditions/toxocariasis/ Accessed 14/06/2021
19 https://www.gov.wales/hydatid-disease-poster
22 Some other Angiostrongylus spp in other countries can cause serious zoonotic illness, particularly Angiostrongylus cantonensis.

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consuming slugs, snails, or their slime on grass and other vegetation can make a significant difference to the risk levels and form the basis for preventative measures.

**Heartworm**

Heartworm (*Dirofilaria immitis*) can also cause serious illness or death in cats and dogs. It is rarely identified in the UK but can be found in imported animals and can be a risk to animals travelling abroad.

**Recommendation 3:** Existing information regarding the risks to animal and human health of common endoparasites should be collated, and further research undertaken to fill knowledge gaps. Academic institutions and Government have a role to play in this, and it should be carried out with a one health approach in mind, with animal and public health experts involved.

**Risks of routine use of parasiticides**

In the UK, both therapeutic and prophylactic treatment is given, with the aim of improving small animal welfare and protecting public health.

To reduce the animal and human health and animal welfare risks associated with parasites, a variety of compounds have been used to treat parasites over many years. Much of which was of doubtful efficacy, until the 1940’s when more effective organochloride and organophosphate products were developed. These were associated with significant environmental toxicity, resulting in many products being banned.

The development of “spot-on” products in the 1990s made applying parasiticides to animals easier, so the use of parasiticides has grown considerably. In part this growth is also associated with comprehensive health-care packages based on routine and regular parasite control. The more recent development of parasiticides with longer duration or combination products, both spot-on and oral, has further fuelled their use.

Given the many health and welfare concerns associated with parasites, routine use of parasiticide treatments is now widespread. However, this does not come without risks, and given the importance of being able to use these products, it is advisable to take note of these concerns now and to use them responsibly, to make sure they continue to remain available and effective in the future, whilst being used in a way that minimises harm to the environment.

**Impact of parasiticides on non-target invertebrates**

While modern parasiticides are more selective for invertebrates than previous ones, they do not discriminate between target and non-target invertebrates, so they are equally capable of killing bees, aquatic insects, and other species that they come into contact with. There is a widely documented fall in wild aquatic and terrestrial invertebrate populations, and clear evidence that use of pesticides from a wide variety of possible sources are contributing. Invertebrates are a vital part of ecosystems, including food webs, as well as providing ecosystem resources for pollination and pest control, so minimising the threats to these species is therefore very important in a local and global context.

Some of the most commonly used parasiticide products that are used in companion animals which are neurotoxic to other species are the pesticides fipronil and imidacloprid, either alone or in

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**References**


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combination with other parasiticides. These products are effective because of their potent toxicity even at low dose rates towards a wide range of invertebrates, their persistence and their water solubility. These same properties also increase the environmental hazards associated with their use. Other parasiticides products are also used frequently and are likely to have similar impacts, but data for these two products is more readily available.

Imidacloprid belongs to a class of insecticides called neonicotinoids, for which the detrimental effects in the environment are well known. Fipronil is not a neonicotinoid, but acts in a similar way, also damaging an insect’s central nervous system to cause paralysis and death. In sub-lethal quantities, these chemicals have also been shown to impair an insect’s ability to navigate, harm the immune system and reduce fecundity, all of which can lead to populations declining. Imidacloprid has an LD50 of just 3.6ng/bee and fipronil 2.5ng/bee, both more than 7,000 times more toxic than DDT, a chemical which became infamous for its environmental impacts and banned in the UK in 1984. This means that one spot on treatment for a medium sized dog contains enough pesticide to kill 60 million bees.

Neonicotinoids were once widely used in agriculture, but in response to growing evidence of the harm they were causing to insect populations, the EU banned their use on flowering crops in 2013, and eventually banned all agricultural uses on outdoor crops in 2018. A recent study found fipronil and imidacloprid in English rivers at levels exceeding their chronic toxicity limits. The study indicated a high environmental risk to aquatic ecosystems from the measured levels of fiproles (fipronil and some of its degradation products), and a moderate risk from the levels of imidacloprid. Similar research is needed to understand the exact source of contamination and toxicity levels of other potentially harmful pesticides used in veterinary medicines.

Furthermore, little is known about the impacts of multiple parasiticides mixing in the natural environment, making evaluating the effects on non-target organisms a major challenge to scientists. In the environment these chemicals can co-occur with other contaminants such as fertilisers, metals and other pharmaceuticals, and products containing multiple chemicals are now commonly used to treat several parasites at once. Research has shown that in aquatic organisms, neonicotinoid mixtures have combined effects that cannot be predicted by simple additivity, and that even once some chemicals degrade, they remain as toxic as the original compound. In the first instance a literature search is required to collate the research carried out to date, and an analysis completed to ascertain the key gaps in information. Dependent on findings, the focus of any further research should be on the knowledge gaps.

**Recommendation 4: Concerns about the possible environmental impacts of small animal parasiticide products should be taken seriously by the veterinary profession, pharmaceutical industries and BVZS policy position on responsible use of parasiticides for cats and dogs**

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34 Toxicity of insecticides is measured as LD50s, the amount required to cause the death of 50% of a group of test animals. LD stands for lethal dose.

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industry, and animal owners. Veterinary organisations, such as BVA, BSAVA and BVZS, have a role to play in proactively promoting discussion and highlighting these challenges.

Recommendation 5: Academic institutions and Government, including the VMD, should carry out a comprehensive literature search to ascertain the research carried out to date and an analysis done to ascertain the key knowledge gaps within the evidence-base.

Recommendation 6: Research should be conducted into any knowledge gaps relating to source, prevalence and impacts of veterinary parasiticide products in the natural environment. This should include all commonly used pesticides, in addition to fipronil and imidacloprid, and consider the impacts of combination products.

Use and spread of products
Parasiticides can be administered orally, topically, or by injection, depending on the product and target parasite. The chemicals in topical products, including spot-on treatments, spread over the surface of the skin\(^41\), where they are absorbed into the superficial epidermis and sebaceous glands, and slowly released via hair follicles\(^42,43\). This means that the pesticides from these products can disperse widely throughout the household environment through pet hair, shedding skin and direct transfer after application\(^44,45\). They can then persist and accumulate in the animal’s environment\(^46\). These products can potentially enter household wastewater when pets or their bedding are washed, as well as other sources such as hand washing after touching the animal’s fur or applying the products. Parasiticide products may also potentially enter the waterways directly if animals swim in them after treatment.

Systemic topical treatments are absorbed through the skin into the body, so are less likely to be washed off, but much of the product is likely to be excreted in the faeces or urine\(^41\), so can still reach the environment and potentially cause significant harm\(^46\). This is also true of systemic products given orally. Hand washing after treatment, the inappropriate disposal of packaging and poor handling of faeces and litter trays could also lead to environmental contamination from these products. All uses of parasiticide products carry potential risks and must therefore be carefully considered.

Potentially significant quantities of chemicals from small animal parasiticide products may be entering waterways via household drains\(^48\). Further research is needed to confirm this or identify an alternative source. In the meantime, given the potential for serious harm to natural invertebrate population, a proportionate and targeted approach to treatment should be taken when using parasiticides.

Some spread of these chemicals can be controlled through correct usage. Current advice on using treatments includes:

- ensuring clients use the correct dosage, can apply a product correctly, and avoid hand contamination and spillage.

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\(^48\) eg http://www2.rspb.org.uk/Images/avermectins_tcm9-133121.pdf


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• refraining from washing an animal or allowing them to swim for a certain number of days after treatment, as per the advice on the data sheet. Products that are administered topically should not be selected if pets frequently swim, are having hydrotherapy, or are bathed frequently.

• disposing of unused products, packaging, faeces and used cat litter trays responsibly.

It is possible that this advice is not strictly followed, especially when animal owners have purchased treatments without professional advice. Many of these products are classified as AVM-GSL, meaning that many are readily available in pet shops, supermarkets and online. Ultimately, subject to confirming a sound evidence-base and situational assessment, we’d like to see these AVM-GSL products reclassified to prescription only. In the meantime, clearer communication from professionals who provide the treatments, and on the product packaging for those on general sale, may help to ensure owners are aware of the advice and the risks associated with not following this. It may also be helpful to employ behavioural science techniques to encourage owners to act responsibly, such as the EAST (Easy, Attractive, Social and Timely) framework developed by the Behavioural Insights Team50.

Little is known about how safely owners use parasiticide products, especially when purchased without professional advice. How the packaging and any unused products are disposed of in homes could also be having an impact, as owners are unlikely to bring the medicines to their vet for safe disposal. Data is also lacking on the number of products being bought over the counter compared with those supplied by a member of a veterinary team. Insights into how these products are being bought and used, and how they or their packaging are disposed of, including any cross-contamination of owners’ clothing, needs to be developed in order to understand how this might impact on the environment and to help focus the advice provided. Any criteria applied to disposal of packaging needs to be consistent whether the product is bought from a veterinary practice, over the counter, or off the shelf.

Recommendation 7: Being mindful of the potential for serious harm to natural invertebrate populations, a proportionate and targeted approach to treatment should be taken when using parasiticides.

Recommendation 8: Further research should be conducted into the sources of parasiticide pollution in the environment.

Recommendation 9: Existing data should be collated and where gaps exist, research should be carried out into how companion animal parasiticide products are bought, used, and disposed of, and evidence on how they may be contaminating the environment should be developed. Academic institutions and Government have a role to play in this.

Recommendation 10: Until products can be re-classified, consumers should be educated on the correct use of parasiticide products. Veterinary professionals, product manufacturers, and suppliers all have a role to play in making sure this information reaches the user.

Volume and frequency of usage

Estimates for the number of pets in the UK vary but are in the region of 9.66 million dogs and 10.77 million cats, with around 80% of each receiving flea treatment51. Although the actual frequency of use is unknown, many topical spot-on products are licensed for monthly use, and routine prophylactic parasite treatment is widely recommended by product manufacturers and vets52,53, with many animals receiving year-round treatment as part of their healthcare plans.

Total sales data from the Veterinary Medicines Directorate (VMD) shows that 27,471 kg of fipronil and 33,036 kg of imidacloprid have been sold as flea treatments since the products were first authorised.

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52 ESCCAP (European Scientific Counsel Companion Animal Parasites), 2018, Control of Ectoparasites in dogs and cats. Available at: https://www.esccap.org/uploads/docs/mjy50wev_0720_ESCCAP_Guideline_GL3_v9_1p.pdf

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as veterinary medicines in 1994 and 1997, respectively54,55. VMD sales data in 2017 shows that 4,216kg of imidacloprid and 1,882kg of fipronil was sold in the UK that year56, although accurate annual sales data for these products are not currently available. Additional monitoring from the VMD on sales and usage of parasiticides, in line with that for antimicrobials, would be helpful in understanding the scale of the potential threat to the environment and to measure how usage changes over time. Combined with research on environmental harms, this information could highlight if any compounds should be restricted or phased out.

As part of the licensing process, manufacturers are required to provide detailed information on the environmental impacts of veterinary medicines for use on livestock. Companion animal treatments are exempt from this level of scrutiny, as they are used as individual treatments and usually in much smaller quantities. However, as parasiticides are used for prevention as well as treatment of companion animals, and they are used widely on an increasingly large population, the quantities are significant enough to warrant this additional level of risk assessment.57 It could also be worthwhile surveying owners regarding their use of parasiticides in small animals to ascertain accurate levels of usage as owners may not use parasiticides dispensed to them by vets or bought off the shelf.

Recommendation 11: Data on the annual sales of parasiticide products and actual frequency of use on companion animals should be collected, and sales data published annually, as the VMD does for antimicrobials.

Recommendation 12: The VMD should review the requirements for environmental impact assessment of companion animal parasiticide products.

Resistance

Overuse of parasiticide products can lead to resistance developing in the target parasites, which if not checked could have a serious impact on animal welfare.

In grazing animals, resistance to anthelmintics used to treat endoparasites is serious and increasing. In the UK, resistance is reported mainly in gastrointestinal nematodes58 and, increasingly, in liver fluke. Currently resistance significantly impacts the efficacy of the three older classes of anthelmintics (Group 1 Benzimidazoles, Group 2 Acetylcholine receptor agonists, and Group 3 Macrocyclic lactones) but is a threat against the efficacy of all anthelmintic groups. Anthelmintics must be used judiciously, and BVA currently recommends avoiding unnecessary or blanket treatment of grazing animals59. Resistance has also been demonstrated to treatments for common farm animal ectoparasites. For example, *Psoroptes* mites, which cause Sheep Scab, have developed resistance to parasiticides and become unresponsive to treatment60. This is likely to cause major difficulties in scab management if resistance becomes widely established in the UK.

There is currently a lack of proven cases of treatment failure for modern parasiticides in cats and dogs due to resistance61, with the exception of anthelmintic resistance of Heartworm (*Dirofilaria immitis*) larvae in the USA62. However, there have been reports of treatment failure, especially for fleas63, and anecdotally this is becoming a concern. Historically, resistance has developed to many of the insecticides used to control fleas, including carbamates, organophosphates, and pyrethroids plus

54 VMD (Veterinary Medicines Directorate), 2020. Product information Database. Available at: https://www.vmd.defra.gov.uk/ProductInformationDatabase/Default.aspx
56 FOI request to the VMD, submitted 10 August 2021. Reference A70721

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increased use could increase selection pressures, so this is clearly an issue to be aware of. The slow development of resistance in cats and dogs when compared with equines and ruminants is possibly due to the large natural reservoirs of infection, lower stocking density, large range of available products, often more complex lifestyles of the parasites and potentially limited over-usage of parasiticide compared to levels used for large animals.

Research and guidance should be developed to help prevent or delay resistance in common parasites. Increased use of diagnostic testing and faecal egg counts would help inform the profession on any signs of resistance developing. In the meantime, any cases of suspected resistance should be reported, and medicines used responsibly to limit the risks of resistance developing.

Recommendation 13: Research should be undertaken to identify the extent of the threat posed by resistance to common companion animal parasiticides.

Recommendation 14: Guidance should be developed to help prevent or delay resistance in common parasites and consideration given to more active monitoring for resistance.

Recommendation 15: Vets and owners should report to the VMD any cases of suspected resistance to parasiticides

Recommendation 16: Parasiticides should be used responsibly to limit the risks of resistance developing.

Responsible use

The RCVS code of conduct states that “Veterinary surgeons must seek to ensure the protection of public health and animal health and welfare and must consider the impact of their actions on the environment”. As a health-centred profession, and key players in the One Health Agenda, vets recognise the interconnections between human health, animal health, and the health of the environment.

The BSAVA Scientific position statement on parasite control strongly recommends that companion animals are regularly treated against parasites in the interests of animal health and welfare and to minimise the risk to human health, and that owners should consult their veterinary surgeon to discuss the appropriate prevention and treatment for individual animals. The position also recommends that appropriate hygiene measures are taken (e.g. removal of faeces from the environment and hand washing) in order to reduce the risk of worm infection, and strongly encourages further valid scientific research, and states that a benefit/risk assessment of each individual case should determine the choice of anthelmintic, spectrum of anthelmintic activity and frequency of administration.

Vets have a duty to responsibly recommend and prescribe appropriate parasiticides to clients, to protect animal health and welfare and ensure public health is protected from zoonotic parasites. Balancing human and animal health with that of the environment is challenging, especially given the many gaps in the knowledge base outlined throughout this position, but it is important. Being one of the most trusted professions in the UK, vets are also well placed to engage clients in considering the environmental impact of caring for their pet. In addition, vet schools can increase awareness amongst future vets of responsible use and application of tailored as opposed to blanket treatments of parasiticides.

The impact of animal ownership on the environment is coming under increasing scrutiny, and owners have been looking for ways to reduce the harms they cause. As new evidence comes to light, it is therefore important to reconsider routine treatment and take steps to address the environmental concerns associated with parasiticides, as a moral and ethical duty, in addition to preventing the potential reputational damage. Changing messaging to clients has the potential to impact negatively on levels of trust, but well-communicated evidence-based change will demonstrate leadership.

Risk-based prescribing

Like all medicines, parasiticides should be used responsibly, and a risk-based approach to treatment should be taken. When deciding what parasiticides to use to treat an animal, vets should consider the risks from all parasites and come up with a treatment plan tailored to that individual.
Currently year-round prophylactic flea treatment is often recommended for cats and dogs, focussed on preventing the potential risks to animal and human health. This approach aims to achieve, as much as is possible, completely flea and tick-free animals. Regular de-worming, around four times a year, is also recommended to keep parasite levels in the environment low, and monthly worming usually encouraged for higher risk animals. Regular treatment intervals are recommended on most parasiticide product datasheets and supported by bodies such as The European Scientific Counsel for Companion Animal Parasites (ESCAPPP).

However, due to the environmental risks associated with this, members of the profession and the scientific community have suggested less frequent treatment intervals may be more appropriate. There are risks on both sides – not treating animals could lead to an animal or public health concern, but the potential harm to the environment must also be taken very seriously. Veterinary professionals should be challenging the status quo and facilitating informed decision-making on the part of the client.

Guidance to support risk-based decision making is needed, and this should be updated as our understanding of the risks develops. As already highlighted, independent research on the disease risk to animals and humans from parasites is needed, in addition to evidence about the presence and effects of parasiticide drugs in the environment. It would also be beneficial to research:

- the optimal use of parasiticides, with a focus on the required frequency of treatment for effective prevention; and
- the factors which could increase the risks of being infected by parasites, including seasonality, multi-pet households, geography, lifestyle factors and pet factors (eg fur length, size and breed of the animal).

Sufficient data is key to allowing veterinary professionals to make responsible decisions when prescribing, both in terms of when to do so and which products to choose. Risk of environmental contamination must be a key part of this once data is available. In the large animal sector, the National Animal Disease Information Service (NADIS) provides useful information and forecasting on parasite risks in geographical areas. A similar approach would be useful for common small animal parasites, and veterinary associations could play a role in signposting to this information as it becomes available. In the meantime, we have a duty to take a proportionate and targeted approach to treatment and minimise use of these medicines, since losing invertebrate populations could have severe impacts on ecosystems, which in turn could seriously affect human and animal health.

The way in which the parasiticide works may also need to be taken into account when prescribing. Topical treatments stay on the skin, so are more likely to be washed off if an animal gets wet, whereas systemic treatments are absorbed into the body and less likely to be washed off, but much of the product is likely to be excreted in the faeces (or urine). There is some evidence that systemically acting oral products are less likely to be spread into the environment than topical treatments, but these chemicals are still likely to reach the environment through urine and faeces. The consequences of using each type of product need to be understood. In the meantime, prescribing non-topical treatments to animals who regularly swim or are washed and reminding animal owners of the importance of collecting and disposing of faeces could help to reduce environmental contamination. It is also necessary to consider that some pets may have a history of adverse reactions after administration of some types of product, and the owner may feel more able to apply some forms of medication than others, so it will not always be possible to prescribe systemic oral treatments.

Recommendation 17: As part of their responsible prescribing measures, veterinary professionals should avoid blanket treatment and instead risk assess use of parasiticides for individual animals. This should take into account animal, human and environmental health

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risks, in addition to knowledge of the individual’s lifestyle or environment and the results of routine examination to look for parasites eg faecal examinations for worms.

Recommendation 18: Veterinary schools should increase awareness amongst future vets of responsible use and applying tailored, as opposed to blanket, treatments of parasiticides

Recommendation 19: Veterinary businesses should not have blanket treatment policies in place, instead empowering individual vets to have those conversations with their clients.

Recommendation 20: Research on the balance of harms and benefits from current prescribing of all parasiticide compounds should be undertaken to help inform future guidance and recommendations.

Recommendation 21: Clear independent guidance to assist vets making evidence-based decisions should be produced and updated as new research is produced.

Recommendation 22: Independent research into the optimal use of parasiticide products should be conducted, with a focus on the required frequency of administration and application to control parasite risks.

Recommendation 23: Research should be undertaken to better understand the factors which could increase the risks of pets being infected by parasites, including seasonality, multi-pet households, geography, lifestyle factors and pet factors. Veterinary associations have a role to play in signposting the profession to this information as it develops.

Recommendation 24: Academic institutions or Government should undertake a literature search of the existing evidence base available followed by focussed research on knowledge gaps into the presence and effects of both topical and systemic parasite medications in the environment.
Parasite prevention and testing

Since parasiticide use on cats and dogs is often prophylactic, alternative methods of prevention and diagnosis are important considerations when looking to mitigate potential environmental harms.

Veterinary professionals are well placed to advise owners on lifestyle factors which can reduce the risks of their pet getting parasites, or the impacts of these. For example, picking up dog faeces, avoiding scavenging, raw food and routinely checking for visible ectoparasites. A public awareness campaign on the importance of picking up dog faeces in relation to public health and zoonoses would be especially beneficial for highlighting health risks associated with fouling.

For some ectoparasites, regular checks can help to identify if an animal needs treatment. Regularly checking for fleas, ticks, and those mites which are visible to the naked eye, will increase the chances of spotting these early, helping to provide treatment when it is needed. This may help to reduce the
need for parasiticide treatment, especially during the winter when prevalence of some parasites is likely to be lower.

An increased use of testing by veterinary practices, such as faecal egg counts, could help to identify the presence of endoparasites, meaning only those pets with confirmed presence of parasites may need to be treated. This approach is used widely in the farm and equine sectors due to resistance issues. There is also evidence of a growing demand for testing before treatment within small animal medicine, for example a number of clients now opt for an antibody titre test before deciding whether to have booster vaccinations for their animals. Whilst some basic diagnostics tests for the presence of parasites are very simple to do, they can be time consuming and they can give false negatives or, less frequently, false positives, especially if not done correctly, eg wet paper test for fleas, pooling of samples may mean some parasites such as giardia are missed. In addition, a variety of pre-prepared diagnostic tests for small animal parasites are also available to vets, for in-clinic use and by professional diagnostic laboratories, however industry-wide agreement is needed on best practice for testing and interpretation to ensure consistency. It also needs to be borne in mind that tests are not available for all parasites, and the delay between testing and treatment may not be acceptable to some clients. Some parasites for which pets are routinely prophylactically treated have a low prevalence, which is likely to result in repeated negative test results, that may discourage some clients from continuing with the testing, further exposing their pet to health and welfare risks. Lessons could be learnt from other countries which routinely undertake faecal sampling for small animals.

Unfortunately, the lifecycles of some parasites mean that they may not always be detected, and so infected animals may give false-negative results. Not detecting parasites which are present may increase the risk of household infestation, leading to more parasiticides being needed. This may also increase the associated animal and human health risks, so the testing approach needs to be risk-assessed on a case-by-case basis, considering the human, animal, and environmental risks. If clients are concerned about the health risks to themselves or their pets, this approach might encourage them to obtain medicines elsewhere without professional guidance, which in turn may increase the likelihood of products being used incorrectly, posing a risk to animal health and welfare and potentially furthering environmental contamination. Further research should be conducted into preventive measures which do not involve chemicals both on the animal and in the home environment, eg efficacy of vacuum cleaner types, washing bedding and choice of diet.

Testing is used widely in the farm animal sector before treating livestock for endoparasites. Blanket treatment is avoided as resistance can build up very quickly on a pasture and render medicines ineffective, so farmers need to think very carefully about which animals they treat prophylactically. Taking a risk-based approach means that some worms will escape treatment, which has the benefit of making sure those in refugia are not exclusively resistant specimens. It is important to recognise that medicine use in a flock or herd situation is not directly comparable to use in individual companion animals where allowing a degree of infestation might be less acceptable to the keeper.

In the equine veterinary profession, there has been general recognition of the need to minimise the use of anthelmintics over the past twenty years. This is largely due to serious concerns about resistance, with many parasites now showing ubiquitous resistance to equine medicines. Before treatment of horses, it is widely recommended that risk factors are taken into account, and tests are carried out. Unfortunately, there does not appear to have been a significant reduction in the volume of anthelmintics being used, possibly because testing for parasites may be more expensive than the treatment itself, and medicines are widely available to purchase in stores or online without any professional advice. In Sweden, reclassifying anthelmintics to prescription only has reduced the volume sold by over 50% in a ten-year period, showing this to be an effective way to reduce usage.

The small animal sector should learn from this to make sure their efforts to use parasiticide responsibly can be successful.

Recommendation 25: Clear information on how to prevent animals getting parasites, and how to check for them, should be promoted to the animal owning public.

Recommendation 26: The veterinary profession should work to agree on the best practice for parasite testing protocols

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https://www2.jordbruksverket.se/download/18.7914403215ba2c44596ccde7/1493359271184/ovr404.pdf
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Recommendation 27: Veterinary professionals should consider more frequent use of testing as part of a risk-based approach to prescribing parasiticides.

Recommendation 28: Alternative approaches to parasite control currently in place in other European countries should be explored and considered by UK veterinary practices.

Recommendation 29: Research should be conducted into non-chemical methods of parasite prevention, both on the animal and in the home environment.

Practical considerations

To shift away from routine parasiticide use, a change in mindset of both veterinary professionals, veterinary business owners and animal owners will be needed. Veterinary professionals wanting to use parasiticides more responsibly may be presented with challenges within their working environment, such as practice protocols, the prescribing behaviours of team members and neighbouring practices, retaining client trust if there is a shift from vets historically promoting blanket or prophylactic parasiticide use to now advising otherwise, and a lack of client understanding. As new evidence develops, the small animal sector as a whole needs to acknowledge the challenges and work together to consider what constitutes responsible use of parasiticides.

Prophylactic treatment for parasites often forms part of veterinary practice health plans for small animals, which provide important income for veterinary practices whilst providing clients with peace of mind that a large proportion of their animal’s healthcare costs are covered in an affordable way. Moving away from blanket treatment will pose challenges to veterinary practices, but health plans can be restructured to ensure costs continue to be spread out and affordable over time, and that customer loyalty is maintained. Greater personalisation of plans and increased testing for parasites will also add to workloads for already stretched veterinary teams, and the additional time needed could have cost implications for clients. However, this is a challenge that has been successfully overcome in the large animal sector, and associations such as BVA, BSAVA and BVZS can support vets by providing resources and advice as they work to incorporate testing and associated costs into health plans. The reduced need for blanket parasiticide treatments may help to ensure affordability, so comparisons between costs-to-client of major parasiticide products, in-clinic risk assessments and laboratory testing would be helpful for practices working to adapt their health plans. RVNs would be well placed to take on a greater role in personalised parasite health plans, which should be considered as practices adapt.

Recommendation 30: The small animal sector as a whole needs to acknowledge the challenges and work together to consider what constitutes responsible use of parasiticides. Associations such as BVA, BSAVA and BVZS have a role to play in engaging small animal vets in this discussion.

Recommendation 31: Comparisons between costs-to-client of major parasiticide products, in-clinic risk assessments and laboratory testing should be produced to help practices adapt their health plans.

Information and regulation

Vets have an important role in educating clients on the One Health considerations associated with use of parasiticides. It is important to provide owners with clear information about the risks, and to have a conversation about whether treatment is necessary on that occasion. Provided the owner is aware of the risks, it may be acceptable not to treat an animal prophylactically, and in some cases even when a small number of low-risk parasites are present. Veterinary professionals providing these treatments should also make sure clients understand how to use the products safely, including advice on washing their pet, handling the medicines and safe disposal.

The data sheets provided with veterinary medicinal products can be very technical and detailed, and it is likely that many owners do not read these. Pharmaceutical companies should look at how they can make sure owners understand the key points, providing clearer and more easily accessible messaging.

Veterinary professionals should make sure they are aware of the risks themselves, in order to effectively communicate this with their clients. As highlighted throughout this position, vets also need BVA, BSAVA and BVZS policy position on responsible use of parasiticides for cats and dogs September 2021

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access to clear, independent information about the products they are using to help make responsible decisions.

There has recently been a tendency for parasiticides to be reclassified from POM-V to NFA-VPS and to AVM-GSL, meaning that many are now readily available in supermarkets and online. There is a risk that those products being purchased without professional advice are more likely to be used incorrectly, potentially reducing efficacy and increasing the amount of product contaminating the environment. Given the concerns outlined above, there is an argument for removing some of the products from general sale (AVM-GSL), so that they are only available where there is professional advice (POM-V and NFA-VPS). This could affect availability in terms of consumer choice, but the environmental impacts may mean that such barriers are justified. This risk can also be mitigated by researching compounds with the lowest environmental harms and only allowing those to remain on the general sales list.

Another concern is the prevalence of combination products and broad-spectrum treatments, designed to treat multiple parasites at once. This could lead to overtreatment and unnecessary treatment, though evidence is lacking to show which products are most harmful in the environment. Wherever possible, veterinary professionals should use targeted and specific treatments unless they assess there is a need to treat for multiple types of parasite. An increased range of individual products will enable more appropriate treatment of each parasite without the need to overuse another medication. This principle is already in use for grazing animals through the Sustainable Control of Parasites in Sheep (SCOPS) and Control Of Worms Sustainably (COWS) initiatives.

Parasiticide products and the risks of not treating pets are increasingly being advertised, both to the veterinary profession and general public, which is likely to increase demand for these products. In the large animal sector, VMD currently restrict the advertising of pharmaceutical products to professional keepers, so controls on advertising of companion animal products may need to be considered as part of any effort to reduce the volume of products being used.

Recommendation 32: Information provided with veterinary medicines should be improved to ensure that key points on safe usage are clearly and simply presented, such that it can be easily understood by the general pet-owning public.

Recommendation 33: Veterinary professionals should ensure they understand the risks associated with parasiticide treatments and be able to advise clients appropriately. Independent information on these medicines should be available to assist in decision making.

Recommendation 34: Wherever possible, veterinary professionals should use targeted and specific treatments rather than combination or broad-spectrum products, unless they assess there is a need to treat for multiple types of parasite, or have evidence that a broad-spectrum product poses a lower environmental risk.

Recommendation 35: An increased range of individual parasiticide products, as opposed to combination products, should be made available, to reduce the need for overtreatment.

Recommendation 36: The VMD should reconsider the classification of parasiticides which are currently AVM-GSL.

Recommendation 37: The VMD should extend the restrictions on the advertising of pharmaceutical products to professional keepers to cover companion animal products.

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