1. The British Veterinary Association (BVA) is the national representative body for the veterinary profession in the United Kingdom and has over 15,000 members. Its primary aim is to protect and promote the interests of the veterinary profession in this country, and it therefore takes a keen interest in all issues affecting the veterinary profession, be they animal health, animal welfare, public health, regulatory issues or employment concerns.

2. In preparing this response, we have consulted with our Veterinary Policy Group, which includes the Pig Veterinary Society, Sheep Veterinary Society, and the Veterinary Deer Society. We have also consulted our specialist division, the Goat Veterinary Society.

3. BVA’s Scottish Branch brings together representatives of the BVA’s territorial and specialist divisions, government, academic institutions and research organisations to foster the interests of the veterinary profession in Scotland and to assist the BVA in its activities by advising on the consensus view of the Scottish members on Scottish and UK issues.

4. We welcome the opportunity to respond to this consultation. We have long argued that no single measure can effectively tackle bovine TB, and our position states that ‘control measures in cattle must be accompanied by simultaneous and co-ordinated measure in badgers and other wildlife and susceptible farmed species including deer and camels...’

5. We are pleased that the Scottish Government is reviewing measures to tackle TB in non-bovine species to maintain low levels of TB and safeguard its officially TB free status. As stated in the consultation document ‘in recent years, the incidence of identified TB in non-bovine animals, particularly camelids, has been rising in some areas of Great Britain’. More work is needed to improve diagnostic tests for TB in non-bovines, and we urge the Scottish Government to work with other UK administrations to develop these tools.

6. We are particularly concerned about the potential risk of disease transmission from South American Camelids to humans due to the extensive and aggressive pathology of the disease in these animals. We accept that in the few cases where there has been camelid to human transmission there has been regular and prolonged contact between the human and the affected animal. However, these cases demonstrate that a clear zoonotic risk exists, whereas in other species the risk of zoonotic transmission and the route by which the disease might be transferred is unclear, e.g. recent instances in England of TB in domestic cats.

7. It should be noted that a proportion of non-bovine species are kept as companion animals, and consideration should be given to the wording of any legislation/guidance to ensure that it is clear to what extent legislation refers to them, and that if it does, the terminology used does not alienate companion animal owners (e.g. euthanasia rather than slaughter). This consideration must take into account animals such as pigs, when kept as companion animals, and be robust enough...
to withstand any legal challenge.

8. Whilst this consultation focuses on farmed deer, consideration should also be given as to how to assess and address TB in wild deer.

1) Are the proposed arrangements for managing and preventing incidents of bovine TB in non-bovine animals appropriate and necessary? If not, please explain why.

9. We support the introduction of statutory powers for the testing and removal of TB reactors alongside statutory compensation. It is important that reactors can be removed quickly to stop disease spread and maintain Scotland's officially TB free status.

10. It is important to note that in wild deer, disease status can only be monitored by effective examination of viscera and carcases. We are aware that DSC1 (Deer Stalking Certificate 1) and DCS2 provide a level of competence in recognising disease to enable certificate holders to sell wild venison for public consumption, and that as a result a large number of wild deer are inspected to a certain level. We also understand that those that are killing deer for food purposes are required to report lesions and have them cultured/tested for *Mycobacterium bovis*. It is important that guidance is provided at all levels to alert stalkers to the signs of bovine TB.

2) Do the proposed arrangements go far enough or should a requirement for pre and post movement testing at the owner’s expense also be considered?

11. Not enough is known about the incidence of bovine TB in camelids, goats, deer and pigs, and the risk of transferring infection from them to cattle; although it is currently believed that the incidence and risk is low. We therefore believe that a routine TB testing regime, including pre-movement testing is not pragmatic at the current time, and resources should focus on the problem in cattle. Instead, we endorse a risk-based approach to testing, supported where appropriate by post-mortem monitoring. This approach should be kept under review to ensure that the Government can respond if circumstances change.

12. In the case of deer, it may be helpful to explore the value of a requirement to pre-movement test animals being moved to Scotland from herds in high risk areas, but for this to be practicable there would need to be a validated (on a statistically sufficient number of animals) and accepted test. It may be that individual-based tests, such as the New Zealand ELISA being developed by SAC or perhaps the Enferplex test, may allow herds to be deemed free from TB. If a reliable test became available then TB accreditation may allow a revival of the Deer Health Scheme, subject to industry acceptance.

13. We note that in England, the camelid industry has developed a voluntary health surveillance scheme including pre and post movement testing and recording of camelid movements. Defra has said that they will continue to monitor options for statutory surveillance if the voluntary scheme does not deliver the desired results.

14. With regard to camelids, we do have concerns about practices surrounding mating, where a male camelid can visit 10-15 farms in one day. This is clearly a disease risk, and should be considered in the risk-based approach to testing, which should include robust biosecurity advice.

15. The Goat Veterinary Society has produced guidance for goatkeepers on keeping disease out.
This includes advice that goats purchased from a high-risk or edge area should be either pre-movement tested or isolated and tested 8 weeks post movement, or ideally both. However, as in cattle there is a lag time of several weeks after initial infection when TB is not detectable by currently available tests. Pre-movement testing alone is therefore not always a guarantee of freedom from bTB.

3) Would these proposed arrangements create unnecessary burdens on keepers of non-bovine animals?

16. We are not in a position to comment on this question.

4) What would be the most appropriate means of identifying individual animals?

17. For deer, identification methods seem disorganised, and there may be some value in regularising this, including EID.

18. Goats tolerate ear tags relatively poorly, particularly those kept outdoors as tags tend to snag and become ripped out of the ears. Boluses are not advisable in goats as the oesophagus of a goat is much more likely to rupture than that of sheep. Pastern tags work well but cannot be applied at the age of 6 months, as specified by the rules, as they would be too slack if room was allowed for growth. It has therefore been suggested that in goats, tattooing of the ear would be the most appropriate means of identification. However, it is noted that the technology of injectable microchips is improving and that suitable chips small enough to be injected at the base of the ear or at the base of the tail would be an ideal solution.

5) What is your view on the proposed compensation figures for non-bovine animals?

19. As a starting point, we note that the European Commission working document (SANCO/10200/2006) stated that “a level of compensation that is perceived by the farmers not to be sufficient to allow them to adjust to their new circumstances following the loss of their stock and the imposition of animal restrictions, along with concern associated with the possible reintroduction of the infection, jeopardizes the progress of the programme by engendering an attitude of non-cooperation.” Therefore, if compensation is either too high or too low, it can damage disease control programmes and result in transgressions.

20. It seems inequitable that compensation for bovines is in line with market value and yet, compensation for non-bovines is not. We are concerned that by keeping payments for compulsorily slaughtered animals at such a level below market value, the risk of keepers concealing animals suspected of infection will be heightened and will not incentivise co-operation with the authorities. We are firmly of the view that a level playing field should be established.

6) Should compensation be paid to the owners of all species covered by the Order that are removed and slaughtered as TB reactors?

21. We believe that if an animal is compulsorily slaughtered, then compensation should be paid.

7) Should the compensation amount be reduced where a keeper has failed to test in accordance with a notice?

22. We agree that compensation should be reduced where there is a lack of compliance on the part
of the keeper. However, in some cases, failure to comply may be justifiable or unavoidable and we believe that there should be an appeals process in place to address this.

8) Are there any other comments you would wish to make about these proposals?

23. We would encourage the Scottish Government to support the development and introduction of better testing methods, including the enhanced ability to identify, at an early stage of the disease, individual infected animals.