

EQUINE HERPES VIRUS TYPE 1 (EHV-1) MYELOENCEPHALOPATHY

In January 2014, the Ministry for Primary Industries (MPI) confirmed the presence of *Equine Herpes Virus type 1* (*EHV-1*) myeloencephalopathy on a single New Zealand stud farm.

This neurological form of *EHV-1, EHV-1 myeloencephalopathy*, has been known to occur in North America, Europe and Australia. This is the first time it has been confirmed in New Zealand. To date no other properties have been affected.

EHV-1 is a common virus in New Zealand and many horses are infected as foals and show no clinical signs of disease. The virus often sits dormant and can be reactivated later in life. Reactivation is more likely in times of stress, such as giving birth, weaning and long distance transport.

- » EHV-1 cannot transmit to people or other animals, and does not pose a risk to human health.
- » MPI is advising horse owners to be vigilant for signs of disease and to contact their veterinarian if they are concerned.

Signs of EHV-1 myeloencephalopathy include:

- » fever;
- » decreased coordination;
- » urine dribbling;
- » loss of tail tone;
- » hind limb weakness;
- » leaning against a wall or fence to maintain balance;
- » lethargy;
- » inability to rise.

Incubation period for EHV-1 may be as little as 24 hours and up to 12 days, but is typically 4–6 days.

Key risk factors of EHV-1 myeloencephalopathy in horses are:

- » The presence of an infected horse.
- » *EHV-1 myeloencephalopathy* tends to occur in older horses and is rare in horses less than three years of age.

The welfare of animals is important, and horses displaying neurological signs can be unpredictable to handle. Certain exotic diseases can also cause neurological signs in horses.

Please consult your veterinarian for advice.

- » Larger breeds are more commonly affected than ponies and smaller breeds. Mares are more commonly affected than geldings or stallions.
- » Introduction of new horses to a herd.
- » Confinement of animals in an enclosed airspace, such as stables or barns.
- » Giving birth, weaning, mixing, transportation and concurrent infections are all stress factors that may trigger neurological outbreaks.

HOW IS EHV-1 SPREAD?

EHV-1 is spread by direct horse-to-horse contact, by contaminated hands and equipment. Horses may appear to be perfectly healthy yet spread the virus via the secretions from their nostrils.

It is important to note that EHV-1 can also be spread indirectly through contact with physical objects contaminated with infectious virus. Examples of such objects include:

- » tack;
- » grooming equipment;
- » feed and water buckets;
- » people's hands or clothing.

HOW IS THE DISEASE DIAGNOSED?

Diagnostics your veterinarian might perform include:

- » nasal swabs;
- » blood tests.

www.mpi.govt.nz

IS THERE A TREATMENT?

The EHV-1 virus can present as respiratory disease of varying severity, abortion, neonatal death and the rare neurological form.

- » The standard form of care is primarily supportive. Treatments may include intravenous fluids or antiinflammatory drugs. Antibiotics may be used to treat a secondary bacterial infection if one develops; however, antibiotics have no effect on EHV-1 itself.
- » Vaccines for EHV-1 are only protective against the respiratory and abortive forms of EHV-1. Vaccines do not provide protection against the neurological form of EHV-1.

EHV-1 is killed by all commonly used disinfectants when they are used in accordance with manufacturer's instructions.

The welfare of animals is important, and horses displaying neurological signs can be unpredictable to handle. Certain exotic diseases can also cause neurological signs in horses.

Please consult your veterinarian for advice.

WHAT CAN I DO?

It is extremely important that people in contact with potentially affected horses adhere to routine biosecurity measures including, but not limited to:

- » Stop movement of horses on to and off premises where there are affected horses.
- » Do not bring pregnant mares onto premises where active EHV-1 is circulating.
- » Those working with affected horses should not work with healthy horses.
- » Washing hands between handling different horses.
- » Use dedicated clothing and footwear when working with an affected horse.
- » Change out of clothes before leaving isolation area and handling other horses.
- » Use disinfectant to sanitize footwear.
- » Do not share equipment among horses.
- » Disinfect and destroy contaminated bedding.
- » Clean and disinfect premises, equipment and vehicles used for horse transport.

New Zealand Equine Health Association Incorporated



www.mpi.govt.nz

Growing and Protecting New Zealand