

**STAKEHOLDER COMMENTS RECEIVED ON THE DRAFT POLICY
REVIEW OF CAMELID EMBRYOS FROM THE USA**

BIOSECURITY AUSTRALIA POLICY MEMORANDUM 2006/19

STAKEHOLDER	COMMENT	BIOSECURITY AUSTRALIA RESPONSE
Tasmanian Department of Primary Industries and Water	No comment	Nil
CSIRO, Australian Animal Health Laboratory (AAHL)	No comment	Nil
NSW Department of Primary Industry	No objections	Nil
Crispin Bennett, International Horse Transport	No comment	Nil
Rick Webster, Queensland Department of Primary Industries and Fisheries	<p>Could you please explain the meaning of the Johne's disease condition:</p> <p style="padding-left: 40px;">The donors were clearly identified as, either:</p> <p style="padding-left: 40px;">originating from a herd which, prior to export, met the regulatory requirements of the Johne's disease zone of destination as defined in the Australian Johne's Disease Market Assurance Program for Alpaca.</p> <p style="text-align: center;">or</p> <p style="padding-left: 40px;">not subject to measures for Johne's disease.</p> <p>Johne's disease zones are not part of the MAP program for alpaca, MAP is an individual property issue. Of potentially greater significance is when would the donors be 'not subject to requirements for Johne's disease.'?</p>	<p>The wording in the draft certificate was based on the requirements in the condition for live camelids from the USA. The intent of the requirement was to determine if the imported animal was assessed for Johne's disease or not. However, as there are no such Johne's disease restrictions on the domestic trade in embryos or semen in Australia (see David Kennedy's comments below), this requirement is not considered necessary and has been deleted from the final requirements. Certification that the donors showed no clinical signs of Johne's disease during collection is required.</p>
David Kennedy, Ausvet	<p>There would be very little data on the risk of transmission of Johne's disease by artificial breeding in camelids. But taking into account what we know from sheep and cattle, it appears to be extremely low because of the low probability of transmission by the vaginal or intrauterine route. The Australian Standard Definitions and Rules for bovine Johne's disease have no requirements for artificial breeding and the Australian Market Assurance Programs for Johne's disease do not restrict entry of embryos and semen into MAP herds.</p> <p>Embryos treated to international standards from clinically healthy donors are unlikely to be contaminated with</p>	<p>As there are no Johne's disease restrictions on the domestic trade in bovine and ovine semen and embryos in Australia, inclusion of restrictions in the import conditions cannot be justified. Tests for Johne's disease are not sensitive enough to be used in individual animals except when showing clinical signs. Dr Kennedy advises that it is only in advanced infection that <i>Mycobacteria paratuberculosis</i> is likely to be shed into the uterus or semen. Thus the risk can be managed by preventing the collection of embryos from donors showing clinical signs of Johne's disease. As with current import</p>

	<p><i>Mycobacteria paratuberculosis</i>. If it was felt that added risk management is needed, this could be provided by requiring a negative test on the donor. This is one of the few occasions where individual animal testing is useful for Johne's disease; the negative predictive value would be quite high as the tests would have a reasonable sensitivity in an animal with advanced infection that may be shedding <i>Mycobacteria paratuberculosis</i> into the uterus or semen.</p>	<p>requirements for bovine semen, certification is included that the donors showed no clinical signs of Johne's disease during the collection period.</p>
<p>Paul Taylor, Bozeman, Montana</p>	<p>Superovulation is not used when collecting embryos from camelids and mostly only a single embryo is flushed. Thus embryos may be collected from the same donors numerous times over weeks or months to make up a consignment. The tuberculosis requirements include a test within 14 days but more than 90 days after a preceding test. Difficulties arise with this requirement if collections are spread over a period longer than 14 days.</p> <p>A similar problem arises with bluetongue testing which could require repetitive testing if collection took place over a long period of time.</p> <p>There is no reference to the specifics of the pre-export quarantine period (PEQ).</p>	<p>These concerns have been addressed by requiring that the tuberculosis test be done prior to the collection period for the consignment. Concerns with the bluetongue testing have been overcome by requiring that the test be done within 14 days prior to the collection period for the consignment. The same amendment has been made to the epizootic haemorrhagic disease requirement. PEQ was addressed by requiring donors be isolated from other animals not of equivalent animal health status for 30 days prior to and during the collection period.</p>