**COVID-19 and EQUINES**

**FREQUENTLY ASKED QUESTIONS**

Can equines get Coronavirus?

There is currently no evidence that equines can catch COVID-19 or become ill from the virus from any of the countries with active outbreaks. There is also no evidence that equines can catch the virus and shed it into the environment without showing symptoms. There is no indication that this will change however if it does we will issue new advice.

Can I get coronavirus from handling an equine?

As above, there is no evidence that equines can catch and transmit COVID-19. It is however possible that if somebody infected with COVID-19 handled an equine and its equipment they could leave droplets of the virus on the equine or its equipment and stable surfaces which could be passed to the next person who handled the equine, equipment or same areas.

For this reason we advise careful thought about management regimes to ensure contact between people is kept to a minimum and the use of shared equipment and surfaces is minimised. We have created a document giving guidance on the creation of a basic regime which can be found on the RDA website (<https://www.myrda.org.uk/assets/CORONAVIRUS-EMERGENCY-PLANNING-FOR-EQUINES-March-2020-V1-PDF.pdf>). You could consider wearing waterproofs which can be washed down with disinfectant after caring for equines to minimise spread from human-equine-human and wearing gloves.

Should I keep my appointment for the equine’s routine vaccinations or other routine appointments?

Human health must always take priority over routine animal healthcare appointments. Therefore, in line with Government and the British Equine Veterinary Association advice and guidelines, the following must be followed:-

* Vets will mainly be providing a 24-hour emergency service for equine patients requiring urgent attention.
* From the 14th April vets will also be permitted to see conditions that would pose a real, and not nominal, threat to a horse's welfare if it was not addressed within the next two months.
* Vets will have to perform an individual risk assessment to determine whether an examination can be safely performed.
* Routine procedures, including pre-purchase examinations, routine dentistry, routine health checks, poor performance / mild lameness examinations, etc. should be stopped immediately
* Telephone / video consultations should be used when feasible.
* For cases where physical examinations are absolutely necessary (i.e. for ill and injured patients), your vet will make contact prior to any appointment to ask you whether you are currently free of COVID 19 symptoms. Please do not attend the appointment but arrange for an alternative handler if you are experiencing symptoms.
* Social distancing (i.e. at least 2 metres between people) should be practised during vet visits however there may be situations in an emergency where your vet is forced to reduce this distance

Should a vet visit be unavoidable, the following control measures should be in place:-

* No handshake when the vet arrives at your group
* Maintaining a distance of 2 metres between you and the vet where possible
* Handwashing before, during and after the appointment
* Only one handler at the appointment
* The passport may be signed at a later date or with your vet wearing gloves

Vaccination

If your equine is due a 6 monthly booster then you **must** reduce your equine to 12 monthly boosters as per RDA Group Vaccination Policy. There are 3 reasons for this;

1.      Firstly it reduces strain on veterinary services allowing them to focus on urgent and emergency cases

2.      Secondly it reduces your non-essential social contact by not having to have an appointment

3.      Thirdly equines will be moving around much less during the pandemic therefore the risk of contracting equine influenza is reduced

If your equine is due an annual influenza booster (12 monthly) then contact your local vet to discuss this situation. Following a risk assessment, some vets may feel that they can safely vaccinate horses, but some may deem that the risk to human health outweighs the welfare risk of the disease to the horse. In the current “lockdown” period, with no competitions taking place, the risk of equine influenza epidemic is considered to be low. In addition, the heightened vaccination levels carried out in 2019 should have resulted in an elevation of the herd immunity. Symptoms of influenza infection in horses who have gone over the yearly vaccination date but who have been previously been vaccinated will typically be very mild. All other equine vaccines, such as tetanus, equine herpesvirus and rotavirus vaccines, are to be considered by veterinary surgeons on a case-by-case basis.

What should I do about the farrier?

You should maintain routine farriery appointments at the current time to safeguard the immediate and long term welfare of your equines however there may be some variation in the type of farriery your equines receive. Please consult with your own farrier to decide the most appropriate course of action.

* Unshod equines with good feet could have extended shoeing cycles or miss a trim if required
* Equines with poor feet will require ongoing routine farriery to safeguard their welfare
* Shod equines should receive routine farriery to safeguard their immediate and long term welfare
* Removal of shoes can be considered but we would advise you consult your own farrier about each individual equine to ensure this is the best course of action

When your farrier visits you should make sure your equine is tied up with handlers at an appropriate distance with the equine wearing clean equipment.

We have produced additional guidance for farriery which can be found on the MyRDA website.

Should I get my equines teeth done?

Routine dental care is essential for the good welfare of RDA equines. However we would advise that you postpone routine dentistry for your equines at this time. The reason for this is that performing dental procedures on equines necessitates the vet/EDT and the handler standing in close proximity for more than 15 minutes. If your equine is displaying signs of significant oral pain then you should consult your veterinary surgeon who will risk assess the situation and make a decision based on a risk/welfare analysis.

What should I do if there is a veterinary emergency?

You should contact your veterinary surgeon via your usual phone numbers if you have an emergency involving one of your equines. Be prepared for them to ask a few, basic questions about your health before they arrive, this will help ensure that your equine gets the help it needs without putting yourself or the vet in any increased risk of catching COVID-19. Be aware that veterinary surgeons are likely to be making difficult decisions about prioritising cases and that some consumables (disinfectants, equipment, etc.) and drugs may become in short supply. The NHS and human health has to take priority and it is vitally important we maintain the NHS supply chain. Your veterinary practice will have stocks to enable them to continue providing urgent and emergency care but please be understanding whilst human and animal health care works together to care for everybody. None of us want to be in a position where limited supplies compromise animal welfare and veterinary practices are working hard to try and reduce this risk as much as possible.

What should we do if lots of people are self-isolating or infected and can’t get to the centre to look after the equines?

We would recommend the implementation of minimal carers on a basic regime at this point to reduce the risk of large numbers of people having to self-isolate simultaneously. Please refer to our basic regime document for ideas on this which can be found on the RDA website (<https://www.myrda.org.uk/assets/CORONAVIRUS-EMERGENCY-PLANNING-FOR-EQUINES-March-2020-V1-PDF.pdf>).