

SHMP UPDATE

PEDv Incidence

Our PED incidence remains above the epidemic threshold – unfortunately, this is not going away. Working for us is warmer weather now and on the horizon. However, summer months did not prevent the virus from spreading in 2013. We also have more knowledge and experience. Re-visit your biosecurity and look for opportunities to improve.

Questions from our participants

April 10, 2015

Does the classification SHMP scheme define how shedding (or viremia) is to be determined for PRRSv?

We base our PRRS status guidelines on the SHAP paper that was a committee-led effort several years ago - attached. It's really a great piece of work and the definition of "stability" has led to similar efforts in PED, and more recently M hyo and flu. To define "stable", we define our goal for a sow herd for each pathogen and then establish a monitoring program to determine whether we are "stable" or not. In the case of PRRS, "stable" means that there is no detectable PRRSv in weaned pigs. But what does "detectable" mean? For PRRS, we encourage the definition of stability from the paper which is 4 consecutive samples of at least 30 pigs at weaning that are PCR negative on serum for PRRSv. But this is just guideline, not a requirement. And, there may be circumstances where monitoring can be applied even better with a higher level of confidence. For example, we have some that test 60 repeatedly before calling the herd stable. And if pig flow allows it, one could test in the nursery (like I believe you do) and increase the sensitivity. And then, we have some that test at processing (tail docking) - that will have lower sensitivity (because some spread occurs during lactation). And then, we have one system that calls a herd stable at 20 weeks after the break - we discourage this one.

What are the expectations of the SHMP for the following situations...

- o **Once a farm experiences a PRRS outbreak thus moving to class 1, the farm is to remain class 1 until shedding ceases despite the absence of clinical signs (e.g. repro failure)?**

Yes - the definition that we encourage for "stable" for PRRSv does not mean clinically quiet. It is defined above as PCR negative pigs at weaning. Lately, we have been discussing what "stable" means for M hyo and for this pathogen, we tend to think of it as being clinically quiet in the downstream pigs. This requires more definition.

- o **Is a farm that is 2v with no clinical signs of repro failure that has a positive PRRS test at any time to be moved to class 1?**

Great question. And this is where veterinary interpretation and some flexibility in the guidelines are called for. If the field virus was detected in pigs, it is no longer stable by definition. So it reverts to stage I. But what if it is NOT detected in pigs? We had a case about 10 days ago where the vet detected virus in an aborted sow and weaned pigs remained negative. Clearly there is field virus in the farm but pigs remained negative. I recommended we leave the farm as "stable". Remember, when we call a farm "stable", we know there are farms that are weaning a trickle of virus through but below the detection level. A stable farm is not necessarily negative. Some vets would argue that such a farm is "known infected" and therefore is stage I. We offer guidelines, and in this voluntary program, we go with the vet's decision. If a situation like this was common and jeopardizing our program, I would recommend we convene a working group of participants and develop a guideline.

And a slight extension of that question is whether we think the farm had a new infection? In other words, the farm was testing "stable" and then had a field virus detected. Is this a new infection or a virus that was resident and going undetected? Again, veterinary interpretation is required. If it was thought to be resident, then we would NOT add it to the incidence chart that week as a new infection. If the sequence was similar to one being administered to the gilts in acclimation, then it is a new infection to the sow herd, but one where source is known. We record these as NEW infections, but they really are fundamentally different from most herd infections where source is more speculative.

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