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Addressing Vectorborne Diseases

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FOCUSING on the recent cases of canine babesiosis in Essex, your Comment 'Ticking the wrong boxes' (VR, March 26, 2016, vol 178, p 302) reviews long-standing concerns about the potential introduction and establishment of exotic tickborne diseases in the UK, concluding with the need for diligent surveillance and education. *Babesia canis* infections have been demonstrated in dogs without previous history of travel outside the UK and the parasite has been detected in the local Essex *Dermacentor reticulatus* tick population (Phipps and others 2016). *B. canis* is transmitted through generations of ticks via their eggs and, now that the natural transmission requirements for the parasite are evident, the logical expectation is that this pathogen is not only here to stay, but will also spread across the UK as ticks increase in geographic range. As the Comment indicates, it is debatable whether retention of the compulsory treatment for ticks before entry into the UK under the Pet Travel Scheme (PETS) would necessarily have prevented the current situation. Indeed, there are recorded cases of both *D. reticulatus* and *Rhipicephalus sanguineus* entering the UK both before and after compulsory tick treatment requirements were removed (Jameson and Medlock 2011, Hansford and others 2015). Future focus must, therefore, be on promoting the prevention of travel-associated diseases in pets by giving essential, accurate advice. This is vital not only to prevent exotic ticks and tickborne pathogens from entering this country, but also to guard against myriad other potential infectious disease

threats that were never covered under the scheme, such as the insectborne nematodes *Dirofilaria repens*, *Dirofilaria immitis* and *Thelazia callipaeda*.

Veterinarians have a duty to engage with, and act upon, continuing professional development. An effective approach to vectorborne disease control can only be fully appreciated and implemented if the biology of vectors and associated pathogen transmission timeframes are fully explained and understood. We wish to highlight the role of the European Scientific Counsel for Companion Animal Parasites (ESCCAP) UK & Ireland, a not-for-profit organisation and body of experts that has been 'ticking the right boxes' well before, and since, the PETS rule change on compulsory tick treatment in January 2012. In striving to influence veterinarians and the public on threats from imported vectorborne diseases, our organisation delivers quality information and advice through its regularly updated website (www.esccapuk.org.uk), with sections for both professionals and pet owners. We host free CPD events and produce educational publications which have repeatedly addressed the risks associated with the liberalisation of pet travel and how they might be managed (Barber and others 2005, Abbott and others 2011, Elsheikha and others 2012, McGarry and Fisher 2012, Wright 2013, 2014, Stokes and Wright 2015, Morgan 2016).

Since February, ESCCAP has been inundated with inquiries from concerned veterinarians and pet owners regarding the recent cases of canine babesiosis. While lobbying for changes in legislation is the right of concerned professionals, ESCCAP members believe that blaming European involvement for relaxation of PETS tick legislation, or calling belatedly for the retrieval of lost regulation, will not prevent further vectorborne disease outbreaks in the UK. Rather, veterinarians, government, the animal health industry and academic institutions must work together to increase public education and awareness about disease risks while travelling abroad, improve surveillance for rapid identification of vectors and vectorborne pathogens entering the country and map the geographical location of endemic vectors that might spread disease.

ESCCAP UK & Ireland will continue to do its part in providing the most up-to-date educational materials and expert advice, intensifying efforts to promote and provide education to pet animal health stakeholders and the general public alike. Recent events reinforce the fact that, for travelling pets, the primary role of the veterinary surgeon has moved rapidly from certification to provider of proactive advice to protect pets from parasites while abroad, and in that way to manage the risks of further incursions of exotic species. We urge veterinary practices to embrace this shift in focus and fully utilise the assistance we aim to provide.

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