

# AVA Vaccinations

## Frequently asked questions

<http://www.ava.com.au/node/1049>

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### **What are the 'core vaccines'?**

The core vaccines described in the *WSAVA Guidelines for the vaccination of dogs and cats* are those appropriate for dogs and cats regardless of where in the world they live.

In Australia, core vaccines for dogs are for canine distemper virus, canine adenovirus and canine parvovirus. For cats, they are for feline parvovirus, feline calicivirus and feline herpesvirus.

There are non-core vaccines for other diseases. Some of these will vary depending on location. When making a decision about vaccination you should consider each animal on a case-by-case basis, the disease status in the area and other factors such as breed, nutrition and age. Lifestyle risks for the individual will also play a part.

### **Why was the change necessary?**

While adverse reactions to vaccines are not widespread, there is a consensus in the scientific community that veterinarians should aim to reduce the vaccine load on individual animals to minimise any risks of adverse reactions, if this can be done without compromising the animal's immunity to disease.

The scientific sources quoted in the AVA position statement outline the available evidence that supports extended duration of immunity for the core vaccines. In summary, improvements to vaccines have increased their effectiveness, and new studies have indicated that immunity lasts longer than previously thought.

In making the change to triennial core vaccinations, Australia follows the veterinary profession in other developed countries. Most universities have been teaching veterinary students triennial core vaccination for several years. The American Animal Hospital Association, the American Veterinary Medical Association, the American Association of Feline Practitioners, the New Zealand Veterinary Association, the British Veterinary Association and the Canadian Veterinary Medical Association (among others) have all moved away from standard annual protocols in favour of a tailored approach that takes individual factors into consideration.

### **Won't we see an increase in diseases such as parvovirus in less vaccinated populations?**

This does not appear to have happened in other countries when vaccination protocols have been changed. In its messages to the public, the AVA is emphasising the need for more puppies and kittens to be vaccinated to make sure that as many adult animals as possible are protected.

### **How am I going to obtain 'informed consent'?**

To obtain 'informed consent' you will need to explain to your client that current scientific consensus is that core vaccines generally only need to be given every three years or less.

This will be especially important if you recommend using a particular vaccine 'off label'. You should explain the reasons why you want to use the vaccine differently to the product recommendations, and if the owner consents, record the consent on the case history.

## **How am I going to promote regular health checks without annual vaccinations?**

There has been concern that without vaccination, annual or more frequent health visits or check ups may not be taken up by owners who think their pet is healthy.

Explaining some of the key benefits of regular health checks to your clients will help you get your message across. These include:

- If you want to keep your pet healthy and happy, you should visit your vet at least once a year.
- Regular health checks will help you to find out early if there's a health problem, and get good advice about all aspects of your pet's health and welfare.
- Pets age differently to humans. An annual check up is like us going to the doctor and dentist every 5–7 years!
- Just like humans, pets usually need more health care as they get older.

The AVA has provided some resources for the information of clients that emphasise the need for regular health checks.

## **What's my legal liability if I use vaccines registered for annual use every three years instead?**

The current science on triennial core vaccination provides strong support for this 'off label' usage. For a short list of the scientific literature and details of recommendations on triennial vaccination refer to the AVA position statement *Vaccination of dogs and cats*.

For 'off label' usage, you simply need informed consent from the owner. You should explain the reasons why you want to use the vaccine differently to the product recommendations, and if the owner consents, record the consent on the case history.

## **How can I recommend a triennial core vaccine for cats when all available products are registered for annual use?**

The AVA has communicated with the Australian Pesticides and Veterinary Medicines Authority about reconciling the position statement's recommendations and registration status of available vaccines.

There is sufficient support for 'off label' use in the current science on triennial core vaccination. For a short list of the scientific literature and details of recommendations on triennial vaccination refer to the AVA position statement *Vaccination of dogs and cats*.

The scientific evidence for triennial use of core vaccines in cats is not as strong as for dogs. You may decide that cats in high risk situations such as catteries should receive an annual vaccination, particularly for feline herpesvirus. The evidence shows that inside cats that live in stable, small groups are covered for at least three years.

## **How do we deal with boarding kennels and catteries and their vaccination requirements?**

The scientific evidence is strong that adult dogs will be protected against disease for three years with core vaccines. The evidence for cats continuing to be protected is somewhat less strong, particularly in relation to feline herpesvirus. You may decide that cats in high risk situations such as catteries should receive an annual booster.

Canine cough is not a core vaccine, and annual boosters should be given. In certain situations, for example, when boarding your dog, the risk can increase and more frequent vaccination should be considered.

Each boarding establishment should have a written policy on vaccinations, with a copy given to every client. This should include the vaccination requirements for admission of animals to the facility and the reasons for the requirements. It should also include information about how the establishment will respond to a disease outbreak.

## **What role does titre testing play, if any?**

Serum antibody titres can be used to check immunity to see whether boosters are required for some agents – distemper and parvovirus in dogs and parvovirus in cats. For various reasons, testing is of limited use for herpesvirus and calicivirus in cats and there is currently no test available in Australia that has been validated to detect canine adenovirus (hepatitis) in dogs.

Immunofluorescent Antibody (IFA), tests detect serum antibodies to the canine parvovirus and distemper, feline calicivirus, herpes and parvovirus. The laboratory can give the titre (level of antibody) detected and whether it is above the level considered to be protective.

A large number of laboratories in the eastern states do accept samples to for IFA testing. Some state laboratories also send samples overseas for testing and this involves a 'turn around' time of 10 to 14 days.

Testing antibody levels is only one method of indicating whether vaccination may be necessary, but it will not indicate the level of cell mediated immunity (CMI) against disease. CMI can enable animals with antibody titres below protective levels to respond to a challenge but there is no ready measure of CMI.

### **How was the dog and cat vaccination position statement created?**

The AVA position statement *Vaccination of dogs and cats* was developed by the same process as all AVA policies and position statements. A draft was prepared by a working group, in this case led by the ASAVA Policy Advisory Council representative. After discussion and amendment of the draft by Policy Advisory Council, a second draft was circulated to AVA members for comment through the *Australian Veterinary Journal* and eLine electronic newsletter.

Member comments came from all areas of the veterinary industry, including practitioners, industry vets and leading academics who are experts in the field. The comments were extensively debated by the Policy Advisory Council, and the final draft arrived at by majority vote. The AVA Board reviewed the final draft, and ratified the policy in June. The policy development process started around 12 months before the final policy was ratified. The policy was re-ratified as a position statement in July 2011.

While the draft policy was open for member comment, the AVA began communicating with AVA members that the existing policy was under review in February 2009, and suggested members refer to the 2007 WSAVA *Guidelines for the vaccination of dogs and cats* as an introduction to the concepts being considered for inclusion in the policy.

Once the policy was finalised, we conducted a survey with members of the ASAVA about their current practices and asked for information about the best way to communicate with them about important changes like this one. The survey responses were then incorporated into the AVA's communication strategy about the new policy.