

## Horses Eligible for Vaccination in the ACT

Vaccination against EI reduces the risk of horses being infected and, where infection does occur, helps to minimise the duration and severity of clinical signs.

Vaccination has the potential to reduce the spread of infection outside existing restricted areas and to reduce the impact of any new infection on racing and other events.

Vaccination is not a 'quick fix' for the control and eradication of EI. It is simply another tool that may assist in achieving those aims. The focus of the response to the outbreak continues to be control of the disease with a view to eradication.

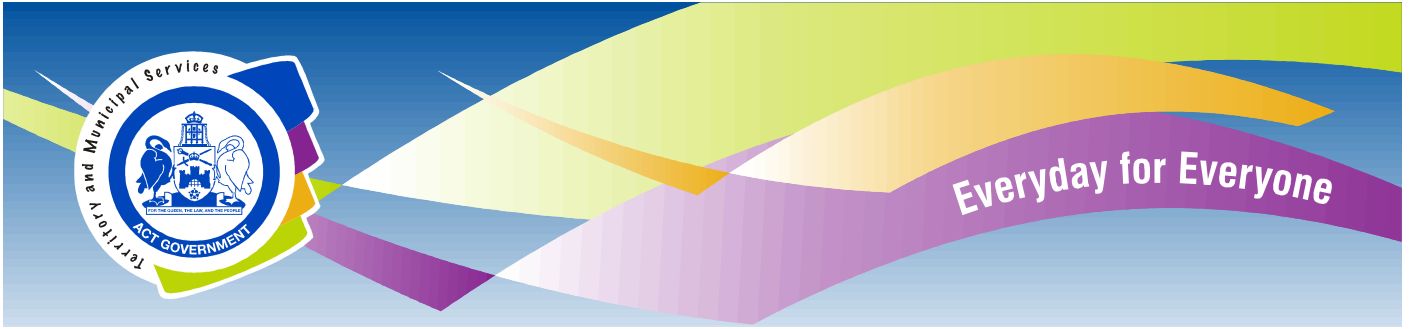
A limited number of doses of the vaccine have been allocated to the ACT. Sufficient additional vaccine will be ordered to cover the full course of vaccination required. Further vaccination requirements and supply will be kept under active review.

Each horse requires two primary doses of the vaccine four to six weeks apart. There is reported to be good immunity 14 days after a single dose, with the follow-up dose designed to extend the period of immunity. A booster dose is given approximately five months later and provides protection for one year.

The ACT Government is not determining which horses get the vaccines. This is being determined by the relevant industry bodies.

The Consultative Committee on Emergency Animal Diseases (CCEAD) and the National Management Group (NMG) have agreed to use EI vaccines in certain limited circumstances.

Community Engagement



"Priority horses", as determined by the Consultative Committee on Emergency Animal Diseases (CCEAD), are:

- thoroughbred racing horses
- harness racing horses
- Olympic and Paralympic level equestrian horses
- equine animals in zoo collections (e.g. zebras)
- police horses

To be eligible for the vaccine horses in the above categories must ordinarily reside in the ACT.

If you believe your horse falls within the priority horse categories you need to call your relevant industry group.

The costs of vaccinations will be the responsibility of the industry, and include administration of the vaccine, implantation of the microchip (if required), and follow-up booster doses.

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