



# Texas Chapter of The Wildlife Society

*"Excellence in Wildlife Stewardship Through Science and Education."*

May 29, 2018

Mr. Kevin Shea

Administrator

USDA Animal and Plant Health Inspection Service (APHIS)

4700 River Rd, Riverdale, MD 20737

The Texas Chapter of The Wildlife Society (TCWS), is pleased to provide the following comments on proposed changes to the Chronic Wasting Disease Herd Certification Program Standards published on March 29, 2018, in the Federal Register (Vol. 83, No. 61, Pages 13469-13470). [Docket No. APHIS-2018-0011]

Deer hunting is the most popular hunting activity in Texas with 800,000 Texans participating annually, contributing more than \$2.2 Billion (U.S. Fish & Wildlife Service) in economic activity, state and local taxes, and Pittman-Robertson excise taxes. Deer hunters play an essential role in the "user pays, public benefits" framework of the North American Model of Wildlife Conservation. Not only do we consider chronic wasting disease (CWD) a serious threat to our nation's wild deer herds and rich hunting heritage, its continued spread places the entirety of state-led wildlife management in peril. As such, we strongly support efforts to control CWD in captive cervids given the risk it poses to free-ranging cervids. This is especially important given that CWD continues to spread in both wild and captive cervid populations, and there is heightened concern about possible human health implications of CWD.

Because of the limitations in diagnosis, treatment and prevention of this nontraditional disease, TCWS agrees that CWD eradication is not likely an attainable goal in free-ranging populations. However, effective disease control and prevention strategies may successfully eradicate the disease in some situations involving captive cervids, and certainly would help reduce the spread of CWD to other captive cervid herds and free-ranging cervid populations. **The primary focus of the CWD program should be on disease control to protect both captive and free-ranging cervid herds rather than assuring business continuity.** A goal in the Herd Certification Program (HCP) should be to prevent any human-facilitated spread of CWD, rather than limiting the focus to the *interstate* spread of CWD. The latter is much less attainable without a goal to prevent the *intrastate* spread of CWD as well, and this should be taken into consideration when determining certification requirements for state CWD programs.

Animal identification is an integral component of disease management. The ability to trace animals would greatly reduce the possible number of facilities involved in an epidemiological investigation and facilitate the rapid location of animals. The options allowed under current identification rules include methods that are not reliable and some require “hands on” to read. We suggest simplifying the options and utilize the best available technology such as RFID tags or microchip implants in combination with corresponding, standardized, easily visible means of identification, to allow for clear, ease and accurate identification on inspection. We also suggest that these means of identification remain with the animal throughout its life, when released from breeder pens, regardless of ownership of the facilities where animals are transferred.

A major deficiency in the program is the lack of a minimum testing in a facility to move up in the program or to be certified. There is very low probability of detecting disease in herds that report low death loss. A minimum requirement of ante-mortem should be applied to detect the disease if it is present.

Also, TCWS has concerns that the pathway to certification involves only the testing history within the facility and/or the source of animals added, but does not consider the history of the ground on which the facility exists. For example, a new facility located in a CWD endemic area will receive “certified” status if it receives animals only from certified herds. We believe those animals received from those certified herds are at risk of contracting CWD when introduced to this new facility, and should not maintain “certified” status. Likewise, a vacant facility that previously, under different ownership, possessed deer and maintained 1<sup>st</sup>-year status for several years (or was never even enrolled in the HCP under that previous ownership) should not be able to inherit that “certified” status of the herd from which it receives deer when it begins to obtain animals and enrolls in the HCP.

The proposed program standards do not require the testing of “shooter” bucks unless ownership of the animal is maintained and leaves the testing of such animals to the discretion of the approved state officials. Testing should be required for all animals regardless the cause of death. The fate of animals raised for this purpose should be tracked and the animal tested whether it transferred to an enrolled HCP herd or to other facilities until such time the proportion of USDA HCP detections of CWD in cervid facilities declines to the level of other Transmissible Spongiform Encephalopathies in domestic livestock herds. However, in the event that ownership, control or supervision of animals is a determining factor, we request clarification that “ownership” refers to facility or premise ownership rather than animal ownership, since at least some species of captive cervids are not privately owned in some states.

The program standards state, “Surveillance of all animal mortalities is the key to increasing the confidence that HCP certified herds are at low risk for CWD infection. Poor quality and missing samples undermine our ability to assess the CWD status of the herd.” Yet, the standards allow for replacement of a natural mortality with a producer-selected animal on a one-for-one basis. Replacing the more valuable sample with a producer-preferred sample from a seemingly healthy deer is a significant reduction in the quality of the surveillance program thereby reducing the probability of detecting the disease where it exists. Multiple ante-mortem samples may provide an adequate substitution for untested mortalities, but a one-for-one substitution is inadequate. Allowing only two samples from a multiple-mortality event also is inadequate. Animals with CWD are more susceptible to other mortality factors and these are

valuable samples. Using an epidemiological investigation on a case-by-case basis, to determine an adequate number based on past testing history, source herds, and other factors would be more acceptable if less than 100% is allowed. The revisions institute a reduction-in-status penalty for missed or unsuitable samples, but the penalty duration should be longer and require a minimum number of samples for reinstatement.

We applaud the decision to utilize ante-mortem testing in certain situations, and we support the continued efforts to expand the use of this tool. TCWS requests APHIS to consider the tonsil biopsy as an option for ante-mortem testing of white-tailed deer and mule deer since research data indicate that prions accumulate even sooner in tonsil tissue in those species. We also believe that all ante-mortem testing should be performed by licensed, accredited, and trained/certified veterinarians because such surgical procedures are considered to be a practice of veterinary medicine.

We also suggest consideration that ELISA be allowed to be a confirmatory test. Finally, the program standards should clearly state that ante-mortem positive animals be surrendered for postmortem testing and removal from the facility to prevent further shedding and exposure.

The standards should address the effects of receiving genetic material (germplasm) on herd status in the event that scientific evidence obtained in the future indicates CWD can be transmitted via that genetic material. While there currently is no such evidence, further research is necessary to ensure this is not a viable form of transmission. There is scientific evidence that CWD can be detected in uterine tissue. Artificial insemination using laparoscopic technology is a commonly used procedure in deer breeding operations, and in addition to concerns for the unknown risks associated with germplasm, we are concerned with the possibility of transmitting CWD between facilities via contaminated instruments. The standards address biosecurity in some degree but lack caution in this area.

Consideration should be given to aspects of herd plans not covered in this document (e.g., restriction of reproduction if depopulation is not immediately carried out; restrictions on movement of possible CWD-contaminated materials such as antler velvet, antlers, semen, embryos, etc.

**Availability of indemnity should not be the determining factor for depopulation of positive facilities.** There is understandably the desire to encourage participation in HCP, but waiting until the end of the fiscal year to determine status allows the disease to remain on the landscape longer. Allowing a contaminated facility to maintain a herd inventory certainly increases the risks of CWD being introduced to the surrounding free-ranging cervid population.

Respectfully,

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Executive Director

Texas Chapter of The Wildlife Society