NZVA
New Zealand Veterinary Association
Te Pae Kīrehe

Bovine germplasm IHS consultation, Animals and Animal Products Import Standards
Ministry for Primary Industries
PO Box 2526
Wellington 6140
New Zealand

15th March 2025

By Email

Submission on behalf of the New Zealand Veterinary Association Te Pae Kīrehe regarding draft Import Health Standard: Bovine Germplasm

The New Zealand Veterinary Association Te Pae Kīrehe (NZVA) is the largest membership organisation representing veterinarians in Aotearoa New Zealand. We support members through leadership, education, guidance and support.

We appreciate the opportunity to comment on the draft Import Health Standard (IHS): Bovine Germplasm and its associated documents, including the Risk Management Proposal (RMP) and Guidance Document.

We recognise the importance of maintaining Aotearoa New Zealand's biosecurity while facilitating trade in bovine germplasm. After reviewing the proposed changes, we have several concerns and recommendations regarding the justification for certain amendments and omissions, particularly those relating to leptospirosis treatment, Q fever donor history, Mycoplasma bovis protocols, and bluetongue virus (BTV) risk management. Specific feedback on these issues can be found on the following pages.

Summary of recommendations

- Provide scientific rationale for the preferred leptospirosis antibiotic change, and confirm whether this change aligns with a broader AMR strategy.
- Publish risk assessment and clarify risk management for the removal of Q fever donor history.
- Ongoing monitoring of emerging science regarding potential new treatment protocols for Mycoplasma bovis in germplasm.
- Reinstate testing for bluetongue virus, and consider climate risk and trade impacts.
- Publish all risk assessments for changed disease measures.
- Embed climate risk assessment for all vector-borne diseases.
- Specify reasonable transition period for exporting countries.

We appreciate the opportunity to comment on these proposed amendments and look forward to further engagement with MPI to ensure New Zealand's biosecurity remains robust, while maintaining strong trade relationships. We welcome the opportunity for further consultation or clarification if required.

Nāku iti noa, nā,

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Specific feedback on draft Import Health Standard: Bovine Germplasm

1. Change in preferred antibiotic for leptospirosis treatment

The draft IHS proposes replacing streptomycin with oxytetracycline as the preferred antibiotic for treating leptospirosis-positive donors. However, no explanation or supporting evidence has been provided for this change. Given the significance of antibiotic selection in disease control, antimicrobial resistance (AMR) management, and trade compliance, it is essential that such modifications are based on robust scientific justification.

Recommendation:

NZVA recommends MPI provides the scientific rationale and risk assessment underpinning this change, specifically:

- scientific evidence supporting the switch from streptomycin to oxytetracycline, including any data on efficacy, renal clearance and duration of bacterial shedding in germplasm donors
- whether this change reflects emerging evidence of reduced efficacy of streptomycin in treating leptospirosis or if it aligns with a broader AMR strategy
- whether international standards (eg World Organisation for Animal Health recommendations) have changed to support this shift and how New Zealand's risk profile aligns with global best practices.
- whether New Zealand-based veterinary and epidemiological expertise has been consulted to assess the suitability of oxytetracycline for local livestock species and serovars relevant to our biosecurity framework.

2. Removal of requirement that donors must never have tested positive for Q fever

The previous requirement for donors to never have returned a positive test for Coxiella burnetii (Q-fever) has been removed. No risk analysis or justification for this removal is provided in the RMP.

Recommendation:

NZVA recommends MPI:

- provides the risk assessment that supports the removal of this requirement
- clarify how ongoing risk from Q fever will be managed if donors with historic positive tests are now eligible to contribute germplasm
- clarify whether a testing program is in place for all imports to determine Q fever status.

3. Removal of antibiotic treatment protocol for Mycoplasma bovis in semen

We note the removal of the optional antibiotic treatment protocol for Mycoplasma bovis (M. bovis) from the draft IHS. This change is justified, as the existing protocol was scientifically weak and has not been used in practice.

Recommendation:

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NZVA supports this change and recommends that MPI continues to monitor emerging science regarding potential new treatment protocols for M. bovis in germplasm.

4. Removal of bluetongue virus (BTV) testing requirement for semen

NZVA strongly disagrees with the continued exclusion of BTV testing requirements for semen. While we acknowledge that New Zealand currently lacks competent Culicoides vectors, this rationale fails to account for:

- climate change and vector shift risks (as seen in the 2008 BTV-8 outbreak in northwestern Europe and the recent BVT serotype 3 outbreak in Europe)
- direct economic and trade risks, including reproductive losses, diagnostic confusion with foot and mouth disease (FMD), and disruption to New Zealand's annual disease surveillance schemes.

Recommendation:

NZVA strongly recommends reinstating BTV testing requirements for semen imports. This aligns with a precautionary approach and considers evolving climate risks, economic and diagnostic impacts, and the need to protect New Zealand's reputation.

5. Transparency of risk assessments

Several changes in the draft IHS lack clear accompanying risk assessments, including the removal of the Q fever donor history requirement and the switch from streptomycin to oxytetracycline for leptospirosis treatment. The scientific basis for these decisions is not provided in the RMP, leaving stakeholders without important context.

Recommendation:

NZVA recommends MPI publishes or summarises all relevant risk assessments for any changes to disease measures. This will help ensure transparency, maintain scientific credibility, and support informed consultation.

6. Climate change and vector-borne disease risk

While the removal of bluetongue measures is based on the current absence of Culicoides vectors in New Zealand, the broader risk from climate change and vector spread is not adequately considered across other vector-borne diseases (such as Rift Valley fever and lumpy skin disease).

Recommendation:

NZVA recommends that MPI explicitly incorporates climate change risk assessments across all vector-borne diseases in future IHS reviews, rather than limiting consideration to bluetongue alone. This would provide a more future-proofed biosecurity approach.

7. Transition period for exporting country compliance

The draft IHS does not specify any transition period to allow exporting countries to update their veterinary certificates and ensure compliance with the new requirements.

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This creates a risk of temporary trade disruptions for countries that need time to negotiate updates to their certification systems.

Recommendation:

We recommend that MPI provides a clear and reasonable transition period to give exporting countries enough time to update systems and renegotiate veterinary certificates.

Conclusion

The NZVA appreciates the opportunity to provide feedback on the draft Import Health Standard (IHS) for Bovine Germplasm and recognises the importance of balancing biosecurity, trade facilitation, and scientific best practice. While we acknowledge the intent behind the proposed changes, we have identified critical gaps in risk assessment transparency, disease management protocols, and climate change considerations that require further scrutiny.

To maintain New Zealand's strong biosecurity framework, we urge MPI to provide the scientific rationale for changes to disease control measures, particularly for leptospirosis treatment, Q fever donor eligibility, and bluetongue virus testing. Additionally, we emphasise the need for clear risk assessments, a future-focused approach to vector-borne disease risk, and a reasonable transition period for exporting countries to comply with new requirements.

We look forward to continued engagement with MPI to ensure that New Zealand's biosecurity remains robust, evidence-based, and adaptable to emerging challenges. The NZVA remains available for further consultation and is committed to supporting policies that protect animal health, public health, and trade integrity while upholding global best practices in veterinary science.

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