A comprehensive evaluation of the National Control Programme (NCP) for equine viral arteritis (EVA) was possible following the adoption in 2004 of a centralised information system (CIS).

Several critical points relative to the sequence of activities and procedures, encompassed by the NCP are presented.

The primary focus of the NCP is to control only stallions to be approved for breeding (around 2,700 stallions/year), therefore, excluding other categories of horses at risk. In addition, authorized stallions are tested only once, i.e. at the beginning of each breeding season, at the risk of missing the early diagnosis of new cases that may occur during the rest of the breeding period.

Once semen shedders (carriers) are identified, field information would indicate that there are objective difficulties in verification of the appropriate containment measures, further complicated by lack of compliance, also at this level, with the Equine National Registry.

Other factors contributing to maintenance of EAV infection could be the lack of a passive surveillance system, the possible co-existence of breeding centres together with reproductive farms and uncontrolled movements of animals and, finally, the omission from the NCP of an undetermined fraction of the sexually active population. These last critical points often imply a lack of awareness of the risk of virus transmission. To overcome the aforementioned issues, for the control of EVA, continuous monitoring and surveillance inclusive of all categories of the equine population is needed.

These problems compromise the completeness, appropriateness and promptness of information that is processed by the CIS, impacting on the immediate application of control measures and on the quality of data analysis and final evaluation of the NCP.

Also relevant to the critical analysis is laboratory proficiency and efficiency of the national diagnostic network in providing results predictive of
the true status of the animals. This should extend to all laboratories involved in the authorisation of animal movement.

In analysing these points, one of the main objectives to achieve, remains the harmonization of the sanitary procedures for the control of EVA, both within the EU as well as among third countries.

Should we continue to believe that EVA control is an unilateral problem and is it still hypothetically feasible to prevent new cases without resorting to vaccination?