

# Therapeutic deficiencies in the pig sector

## Meeting of 18/11/2022

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### Changes in deficiencies since the last meeting in November 2020:

#### Favorable trend for:

- Post-weaning colibacillosis, a major gap that has become more minor.
- Neonatal diarrhea due to E.coli or Clostridium, major gaps now being resolved, thanks to auto-vaccines or recent vaccines.
- The gap on the post-partum of sows, currently being resolved, thanks to import authorisations then ATU of HEMOGEN.
- The resolution of gaps on ileitis and leptospirosis, thanks to recent vaccines

#### Less favorable trend for:

- Enterococci or rotavirus neonatal diarrhoeas, due to the absence of effective or available vaccines
- Unsatisfactory local anesthetics for castration

	Meeting of 27/11/20	Meeting of 18/11/22
<b>MAJOR priorities</b>	<ol style="list-style-type: none"> <li>1. Post-weaning colibacillosis</li> <li>2. Influenza</li> <li>3. <i>Streptococcus suis</i></li> </ol> <ul style="list-style-type: none"> <li>• Brachyspira</li> <li>• Neonatal diarrhoeas: E.coli, Clostridium, enterococci, rotavirus</li> </ul>	<ol style="list-style-type: none"> <li>1. Enterococci or rotavirus neonatal diarrhoeas</li> <li>2. Influenza</li> <li>3. Anesthetics for castration</li> <li>4. <i>Streptococcus suis</i></li> <li>5. Brachyspira</li> </ol>
<b>Minor priorities</b>	<ul style="list-style-type: none"> <li>• <i>Haemophilus parasuis</i></li> <li>• Post-partum sows</li> <li>• Sows genital infections</li> <li>• Anesthesia</li> </ul>	<ul style="list-style-type: none"> <li>• Post-weaning colibacillosis</li> <li>• Neonatal diarrhoeas due to E. coli</li> <li>• <i>Glaesserella (Haemophilus) parasuis</i></li> <li>• Sows genital infections</li> </ul>
<b>Resolution in progress</b>	<ul style="list-style-type: none"> <li>➤ Ileitis (thanks to new vaccine – MA 2019)</li> <li>➤ Actinobacillosis (thanks to auto-vaccines)</li> <li>➤ Leptospirosis (thanks to a vaccine – MA 2016)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Post-partum sows</li> <li>➤ Actinobacillosis (thanks to auto-vaccines)</li> <li>➤ Clostridium neonatal diarrhoeas (thanks to recent vaccines)</li> </ul>
<b>Existing solution</b>		<ul style="list-style-type: none"> <li>☑ Ileitis (thanks to new vaccines – MA 2020 &amp; 2019)</li> <li>☑ Leptospirosis (thanks to a vaccine – MA in 2016, marketed in 2019)</li> </ul>



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	<p>SC injection (infiltration) of PROCAMIDOR or PRONESTESIC (procaine + epinephrine) is also possible (MA for pigs), but procaine is almost not used in the field as it is not validated by the IFIP protocols.</p> <p>Any other off-label prescription exposes the responsibility of the veterinarian.</p> <p><b>No practical anesthetics, fast and safe</b>, e.g. ointment.</p> <p>Practical difficulty related to the speed of processing action, synchronisation of the operation and users' safety during processing.</p> <p><b>Problem of farms practising castration</b> and not IMPROVAC = majority of French pigs, including outdoors, particularly when late slaughter is imposed by the specifications.</p> <p><i>Reminder:</i> Live castration without anaesthesia (legally possible until the end of 2021) is prohibited since January 2022.</p>		<ul style="list-style-type: none"> <li>- Improvac: possible alternative but which poses difficulties downstream (re-organisation of slaughtering chains, installation of "noses" on slaughtering chains, etc.)</li> <li>- Breeding of whole males = desired by the majority of French veterinarians.</li> </ul>	
<b>Streptococcus suis</b>	<p><b>No commercial vaccine.</b></p> <p>Autovaccines ± satisfactory.</p>	<b>0 VMP (vaccine)</b>	<p><b>Autovaccines</b> (<i>S. suis</i> = the most frequent request) ± satisfactory</p> <p><b>Antibiotics:</b> βLactamines (Cephalosporins)</p> <p>EcoAntibio project on immunisation by the mother</p>	<b>MAJOR NO. 4</b>
<b>Brachyspira</b>	<p><b>No commercial vaccine</b> (complex development - no possible isolation - PCR identification)</p> <p>The susceptibility of brachyspira strains must be monitored (strains less pathogenic in France than in other countries such as DE, NL, DK, SP where highly pathogenic strains and development of resistance) =&gt; remain very vigilant, particularly on the situation in Belgium.</p>	<b>0 VMP (vaccine)</b>	<p><b>Macrolides</b></p> <p><b>Limited use of auto-vaccines</b> (no strains to be proposed in France as the bacteria is too difficult to isolate). Autovaccines a priori used in Spain.</p> <p>New <b>Brachy RB Pigs ATU (Ceva-Biovac)</b> signed on 20/06/2022 for <a href="#">this auto-vaccine</a>.</p>	<b>MAJOR NO. 5</b>
<b>Post-weaning colibacillosis</b>	<p><b>Slightly less frequent problem</b> =&gt; priority changed from Major no. 1 to minor.</p> <p><i>Reminder:</i></p> <p>Commercial vaccines (according to the SPC) are used on sows to prevent neonatal diarrhoea and are <b>without action on post-weaning colibacillosis diarrhoea</b>.</p> <p>COLIPROTEC F4/F18 vaccine, but for pigs of at least 18 days: risk of infection between the end of immunity transmitted by the mother and that induced by vaccination after 18 days of age (weaning at 21 days and diarrhoea possible from the following days). Results not systematic. Problem particularly for acute diarrhoea linked to enterotoxigenic E coli F4 positive. F4/F18 correspond to 60-70% of isolations =&gt; problem for the other 30%.</p>	<b>PhV</b>	<p><b>Antibiotics</b></p> <p><b>COLIPROTEC F4/F18 vaccine</b> but for pigs of at least 18 days (see opposite).</p> <p>Zinc oxide (but soon stopped)</p>	<b>minor</b>

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<p><b>Colibacillosis neonatal diarrhoea</b></p>	<p><b>Commercial vaccines</b> rarely cross with strains isolated from the field and are <b>weakly effective</b>.  <b>Recent vaccines:</b> SUISENG COLI /C (MA dated 07/2020) and SUIGEN Rota Coli (MA dated 06/2022) only cover a small proportion of neonatal diarrhoea because they contain strains against which sows are already vaccinated.</p> <p>Multifactorial etiology of diarrhoea (virus + bacteria) complex to identify.  <b>Lack of diagnostic tools on the virulence of strains.</b></p> <p>Problem of updating therapeutic regimens (amoxicillin LA, for example, depending on the physiological stage) and oral treatments for diarrhoea under the mother.  <b>Risk</b> with regard to <b>antibiotic resistance</b> given the high consumption of antibiotics (and orally) for these indications.  <b>Inadequate treatment regimen</b> (Amoxi LA)</p>	<p><b>PhV</b></p>	<p><b>Autovaccines</b> regularly requested for lack of efficacy (but difficulties in identifying pathogenic strains).  <a href="#">11 requests recorded at the ANMV in 2022.</a>          Field use of retro-contamination.</p> <p><b>Antibiotics</b> (see risks - column opposite).  <b>Vaccines - recent MA:</b> SUISENG COLI /C and SUIGEN Rota Coli (see comments opposite).</p>	<p><b>minor</b></p>
<p><b><i>Glaesserella*</i> parasuis</b></p> <p><b>*ex. Haemophilus</b></p>	<p><b>Commercial vaccines ± effective</b> (PORCILIS GLASSER - Intervet MA dated 2004 and SUVAXYN M HYO PARASUIS - Zoetis MA dated 2008) and not always available. SUVAXYN shortage since 2018.          Uncommon, sporadic disease.          The issue of strain typing remains problematic. No cross-protection between different serotypes. <b>Strains typing problem</b> because the laboratories do not seem to use the same techniques, hence difficulties in validating the lack of interest of commercial vaccines (type 4 for one of them or type 4 and type 5 for the second, which also includes mycoplasma valence).</p>	<p><b>PhV</b> <b>Disp</b></p>	<p><b>Import of SUVAXYN Respifend</b> (MA in US) but little used because of complex supply flows (import) and disease that is not very recurrent.  <a href="#">3 requests recorded at the ANMV since 2018.</a>          Supply possible directly from Zoétis: <a href="#">in 2021, import by Zoétis, storage and distribution by Serviphar.</a>  <b>Autovaccines</b></p>	<p><b>minor</b></p>
<p><b>Genital infections of sows</b></p>	<p><b>Off label local administration of injectable or intramammary ATB treatments</b> for which no adapted dosage regimen is available.</p>	<p><b>0 VMP</b></p>	<p><b>ATB injectables (amoxicillin, colistin, ampicillin) or intramammary (MASTIJET) used locally.</b>          Work in progress at the CSMV on these local uses.</p>	<p><b>minor</b></p>

## Therapeutic deficiencies in the pig sector

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Pathology: currently being resolved	Initial problem	Type of problem	Solution / Alternatives Reason for: <b>Resolution in progress</b> / <b>Disappearance of the therapeutic gap</b>	GAP initially <b>Major: M</b> minor: m
with existing solution				
<b>Neonatal diarrhoea due to Clostridium</b>	Recent vaccines marketed late (see opposite) Previous vaccines ± effective Major risk with regard to antibiotic resistance given the high (and orally) consumption of antibiotics for these indications	PhV	<b>Recent authorised and even more recently marketed vaccines:</b> SUISENG DIFF/A (MA dated 12/2021) launched in spring, ENTEROPORC AC (MA dated 12/2020) launched in spring 2022 and SUISENG COLI/C (MA dated 03/2020). <b>Antibiotics</b> (risks - see opposite)	<b>MAJOR</b>
<b>Post-partum sows</b>	Marketing withdrawal of SERGOTONINE in 2020 by the only supplier. Impact +++: piglet stillbirth and milk losses for sows => economic + subsequent fertility damages, need for ATB in case of problems.	Disp	<b>Import (Spain or Poland) of HEMOGEN (ergometrin alone without serotonin). Very satisfactory recourse.</b> Several import requests in 2021. <b>ATU since 07/2022, valid until 07/2023.</b> Need to reassure practitioners about the continuation of the ATU procedure. Increasing use of this VMP (hyperprolificity issue which increases concerns)	minor
<b>Actinobacillus</b>	Commercial vaccine ± effective => autovaccines spontaneously preferred 1 single vaccine (PORCILIS ACTINOPORC – Intervet MA dated 1996). Very limited sales. 16 PhV declarations in 2014, <b>no recent declarations</b> . COGLAPIX (Ceva) has a MA in Eu, but not in Fr.	PhV	<b>Autovaccines (common)</b> 2 requests recorded at the ANMV in 2022, 1 in 2021, 2 in 2020. <b>Satisfactory ATB treatments</b> (tetracyclines, sulphonamides) in the event of a clinical emergency.	minor
<b>Ileitis</b>	<b>A single oral vaccine ± effective</b> (ENTERISOL Ileitis – Boehringer MA dated 2005): rigorous application required (compatibility of drinking water, hygiene) but effective.	PhV	<b>Recent injectable vaccines:</b> PORCILIS Lawsonia ID (MA dated 12/2020) and PORCILIS lawsonia (MA dated 08/2019) <b>with satisfactory efficacy.</b> <b>Effective antibiotics</b> (tylosin, tylvalosin, lincomycin, tiamulin)	<b>MAJOR</b>
<b>Leptospirosis (sows)</b>	<b>1 vaccine</b> marketed by MSD (MA dated 2016): PORCILIS ERY+PARVO+LEPTO <b>Available only since 2019.</b> Diagnosis difficulties. Has led to reduce the use of tetracyclines on sows.		<b>Vaccine available with good efficacy against leptospirosis,</b> more limited against parvovirus (id other parvo vaccines) - potential risks on the control of leptospirosis if this led to a reduction in the use of this vaccine. 86 declarations of lack of efficacy reported to date to the ANMV for PORCILIS ERY+PARVO+LEPTO, 15 of which specifically mention a lack of efficacy with regard to parvovirus. Antibiotics	minor

### General remarks:

- Risk of disappearance of drug premixes**, due to the divestment of medicated feed and premixes manufacturers, in line with the recommendations of the NVR.  
The impact may be critical notably for macrolides and betalactamines
- Compliance with the SPC according to Art. 106 of the 2019/6 NVR** may be problematic, particularly for old antibiotics with inappropriate dosages, especially as the interpretation seems to be different depending on the European countries.