Risk assessment for Bluetongue Virus (BTV-8): risk assessment of entry into the United Kingdom

Qualitative Risk Assessment

February 2016
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Authors:

Helen Roberts, Ruth Moir (both APHA Veterinary & Science Policy Advice), Clemens Matt and Marcus Spray (both Defra Economics Advisors) Lisa Boden and Paul Bessell, (both EPIC, Scotland)


Summary

Bluetongue virus serotype 8 (BTV-8) has recently re-emerged in Central France, despite being undetected in mainland EU for at least five years. To date, France has reported 173 outbreaks, relatively concentrated in the centre of the country and mainly affecting cattle, albeit with mild or no clinical signs and very low prevalence.

This document is a risk assessment of the likely incursion of BTV-8 into the UK in 2016. It looks at the likely introduction of disease into the UK over the next few months from infected midges primarily as live animal trade is generally carefully controlled. To assess this, modelling work from three different institutes has been used, looking at different times and points of incursion and the likely spread with or without movement controls being applied. In addition a low level of population immunity (at 25%) has also been modelled, to account for residual immunity in the UK livestock population from the previous outbreak and vaccination campaign in 2007/8.

On the risk of incursion via infected midges, it is difficult to predict at this stage, as it is highly dependent upon the level of disease on the Continent, the proximity to the UK and the climate. As an approximation and with a high level of uncertainty, we consider the risk of an incursion in a cool spring (ie with average temperatures of less than 12-15°C) to be between 5 and 10%; later in the summer at between 33 and 60% and by the end of the summer at 60-80%. This is based purely on expert opinion (including work from several workshops carried out at Defra in 2014) and relies on successful re-emergence and spread in France in 2016. These levels will change (giving lower uncertainty) once the winter season comes to a close and is
highly dependent on the ability of the French authorities to control disease over the low vector activity period. The modelling work does however suggest that only in a hot year (for example, as seen in 2006) will an incursion lead to an outbreak as early as May, and that a June date is more likely the earliest date in an average year. Not every incursion will lead to an outbreak as a single infected midge arriving at the UK coast will not necessarily go on to bite and infect an animal and lead to viral circulation.

Modelling results, expert opinion and using peer-reviewed literature suggests that a pre-emptive vaccination level of 80, 50% or even 25% in bovine and ovine species carried out and giving full protection by May 1st 2016 will have a significant impact on the rate of spread of disease that year when used as the only control measure but the impact varies according to where and when the first incursion happens. In an average year, when daily temperatures are lower and vectors less active, movement controls will have an impact on slowing down the spread from an incursion early in the season. However, using movement controls alone in an unusually hot year may not significantly slow down the spread during the vector season, as there would be greater vector activity but they may reduce the country-wide impact.

Although the conclusions reached were to a certain extent as expected, there were also some recommendations which emerged which are insightful, such as movement controls alone are not effective to prevent spread if it is an unusually hot year and that even a low level of residual herd immunity may reduce the level of spread.

While there is some evidence of significant impacts of BTV-8 in individual sheep flocks on the Continent in the second year of disease circulation during the epizootic of 2006/8, it is difficult to assess whether the same would occur in the UK. It is likely in the absence of vaccination that the clinical outcome of infection in the majority of naïve British sheep would be similar to those seen previously in Northern Europe 2006-2008. The often quoted high case fatality rate in sheep in the second year was frequently in small flocks and therefore was skewed and it should be noted that prevalence was still low even in countries such as Germany where for sheep, it was estimated at ~6% in both 2006 and 2007 and in cattle at 2% in both years even though there was a significantly higher number of animals infected. This risk assessment will remain a living document and will be updated as and when more information becomes available.

Introduction

Bluetongue (BT) is a notifiable disease of ruminants, most commonly associated with clinical disease in sheep but also occasionally and less severely in cattle. It is caused by infection with the bluetongue virus (BTV), an orbivirus of the Reoviridae
There are currently at least 26 known serotypes (2-4) and viruses are usually transmitted in Europe via the bites of infected *Culicoides* midges.

The virus is present in Southern Europe, where BTV serotypes 1, 2, 4, 9 and 16 have all been identified in the Mediterranean basin (5), but only BTV serotypes 1, 8 and 25 and three vaccine strains of BTV-6, BTV-11 and BTV-14 had previously been identified in Northern Europe; BTV-8 in particular was circulating in *Culicoides species* during 2006 to 2008 (6, 7). The BTV-8 virus reached the UK during 2007, the second year of the epizootic in Northwest Europe when infection rates were very high (8-10). The disease, if not controlled, has the potential to have a considerable economic impact for the cattle industry in particular, albeit mainly because of the trade restrictions which need to be put in place and the reduced milk yield (3, 6, 43).

A previous risk assessment looked at the possible pathways and likelihood for incursion of BTV-4 into Northern Europe and the UK. (44). This document is looking at BTV-8 which has re-emerged in France in late 2015 and how different vaccination strategies may or may not control spread in the UK should an incursion happen in the coming year. The UK has published a disease control strategy for Bluetongue and this confirms that the most appropriate control will be through vaccination, but that this should be an industry-led voluntary action which farmers should choose in consultation with their vets. This document is therefore to look at the risk of introduction of BTV-8 from France and the best control options which can be government or industry led.

The re-emergence of BTV-8 in France this year has led to concern that an epizootic across North Europe may develop again in the next year or so, leading to significant losses of livestock as seen in 2007/2008 in some areas. Genetic analyses of the virus have shown that it is almost identical to the previous Northern European strain of BTV-8 (2006-2009) and may have been circulating at a low level in the intervening years. As a vector borne disease, vaccination is the best control option. This was not available in the UK or Europe until 2008, by which time many animals had already been infected and were therefore immune. It is likely that immunity is greatly reduced now and that a substantially naïve population is now present in Europe.

**Risk question**

Within this qualitative assessment, we specifically assess the risk of BTV-8 entry to the UK during 2016, via infected midges as the primary route, but also via infected animals. The subsequent economic impact in the absence or presence of different vaccination strategies is being addressed in an additional analysis. As such, the specific risk question is:
What is the risk of BTV-8 being introduced from France in 2016?

Hazard identification

The hazard is identified as BTV-8, which has re-emerged in Central France. To date, over 173 outbreaks have been reported, as a result of pre-export testing, clinical report cases or wide regional surveillance in cattle. The French authorities have tested tens of thousands of animals and the disease has remained relatively restricted to the centre of France, with a slow spread south in recent weeks. Vaccine supplies are limited and therefore France is targeting animals destined for export, animals moving out of the restriction zone or animals in high value genetic breeding programmes. If the same is still the case in the UK in 2016, this will mean some of the model scenarios used will not be truly representative and we would re-assess.

The source of disease is still not fully understood. Possible reasons for re-emergence are:

1. **Silent circulation** since the epizootic in 2006/2008. During those two years, France reported just 6 outbreaks in 2006, over 15,600 outbreaks in 2007 and 38,000 outbreaks in 2008. Mandatory vaccination was carried out in 2008 to 2010 resulting in a high proportion of immune animals (estimates at between 50 and 90%; [47]) and the final outbreak was in June 2010, therefore France was declared free of BTV-8 in

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1 As of 09/02/2016
2012 (46). With the level of surveillance required for disease freedom, it was considered the likelihood of continuing circulation to be unlikely. However, this is currently the most likely reason for re-emergence of disease, as virus sequence shows close but not 100% homology with the virus circulating in 2007 and wildlife were still testing seropositive in 2012.

2. **A new introduction** through imported animals, germplasm or infected midges. However, according to the French Authorities, there had been no recent imports into the first identified affected farm. But if this were not the index case, there may have been import elsewhere into France and resulting virus circulation occurring. It is possible that the clinical signs of BTV-8 have not been reported as they are not as severe as in the previous epizootic and therefore livestock keepers and attending veterinarians have not reported disease (see reference to immune animals in point 4 below).

3. **Wildlife reservoirs.** Wildlife were not vaccinated and therefore could have acted as reservoirs for disease in the intervening years. In Spain, red deer were tested positive (PCR) for BTV in areas where there were no clinical cases in livestock. However, this is not thought to be a major factor in disease transmission, as viral RNA can still be present many months after infection. In North America, bluetongue cycles every one to three years in deer populations in endemic areas and every eight to ten years in epidemic areas, but outbreaks in livestock would be expected given the co-habiting ranges of the animals in Europe (45).

4. **Undetected infection in vaccinated animals.** The vaccination programme in France was mandatory between 2008 and 2010 and then became voluntary in 2010, but there is no information on how many farmers continued with it. It is therefore possible that animals' herd immunity has significantly waned and they are at risk from exposure. However, given the immune response is understood to last as long as 4.5 years (Expert opinion), that the majority of animals in this area are beef cattle and are replaced less frequently than dairy animals, there may be animals present which were vaccinated in the original programme. New infection with BTV-8 will therefore act as a “booster” so mild clinical signs could be missed when infection re-emerged or was re-introduced. Natural immunity is believed to be life-long.

5. **Transplacental spread.** BTV-8 is capable of being transmitted transplacentally. It is not thought likely that vaccinated animals were capable of harbouring the virus in lymph nodes to then be transmitted to the foetus causing new outbreaks. If the disease were still circulating in livestock and transplacental transmission occurred, not all calves born to viraemic dams would survive and not all would be virus positive.

6. The source for the original BTV-8 outbreaks in Northern Europe in 2006 was never discovered. The virus is related to strains from sub-Saharan Africa, but it is uncertain
how it originally arrived in Northern Europe. Therefore, it is not possible to rule out a similar event occurred in Central France this year given the uncertainty and that similar incursion events are possible in years to come. This presumes the source of disease is different to that in option 1.

7. Vaccine strains have been reported in the EU in the past (BTV-6, BTV-11 and BTV-14) possibly due to illegal use of an attenuated live vaccine. Sequence information has ruled out the possibility that the current outbreak strain could be derived from a live attenuated vaccine strain, showing that apart from a few nucleotide changes, the entire genome of the current strain is the same as that of the previous Northern European Strain of BTV-8.

In the previous epizootic of 2006/2008, there were distinct patterns of population dynamics which could be drawn from the epidemiology of disease (50). Five phases can be seen: firstly, in a naïve population, the disease may not be detected as there are so few infected animals. In phase 2 the prevalence rises rapidly until phase 3 when prevalence plateaus. In phase 4, which can last several years, endemicity is reached or disease prevalence may drop again and phase 5 is where there is disease freedom, but still a history of disease can be found and again, is dependent on the surveillance system sensitivity. Given BTV is also a seasonal disease, the apparent increase in the second year of infection is not surprising. See the figure below. The duration of the phases depends on the circulation of the virus and therefore in winter, phase 4 may start but as there are still naïve animals present, phase 5 is not reached, and the increase continues in the following year.
Risk assessment

This risk assessment was conducted following the OIE framework (14). The following risk levels are used:

<table>
<thead>
<tr>
<th>Risk Level</th>
<th>Qualitative statement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Negligible</td>
<td>Event is so rare that it does not merit to be considered.</td>
</tr>
<tr>
<td>Very low</td>
<td>Event is rare but cannot be excluded.</td>
</tr>
<tr>
<td>Low</td>
<td>Event is rare but does occur.</td>
</tr>
<tr>
<td>Medium</td>
<td>Event occurs regularly.</td>
</tr>
<tr>
<td>High</td>
<td>Event occurs very often.</td>
</tr>
</tbody>
</table>

It should also be noted that a recent expert elicitation for the incursion of BTV in 2014 (and causing an impact) was given as 20% with a lower and upper bound of between 10% and 70%. A similar piece of work by Gosling et al, 2012 also gave similar levels of likely incursions (49), but in both cases this was carried out at a time when the threat to the UK was lower as there were no outbreaks in NW Europe. The risk levels provided in this document therefore correspond to these results, but with the uncertainty around the time of year and disease situation in France applied.

Entry Assessment

The presence in the UK of a BTV-8 infected animal may result from:
• an infectious vector reaching the UK and thus infecting an animal;
• entry via animal import; or
• use of infected germplasm.

Spread will depend upon the presence of vectors when the animal arrives or becomes infected and whether the animal is or becomes viraemic. Not every midge arriving from France will be infectious; not every infected vector will lead to an infected animal and; it is possible more than one animal is infected when many midges arrive in a single period.

The risk pathway for the entry of BTV-8 into the UK is shown in Figure 1. The pathway highlights the two key routes of entry; namely, the importation of infected animals, or the windborne spread of infected midges. Germplasm is not included in the pathway as it is considered lower risk, due to the statutory requirements for production of germplasm in AI centres in the EU.

It is also important to note that we define disease entry as “the presence of a BTV positive animal in the UK,” as opposed to the presence of an infectious vector. This is based on the assumption that a cloud of vectors arriving from an affected area to the UK is likely to include infectious individuals but not all will be infectious or lead to transmission. The 2 main routes for disease incursion end at one of several end points. Disease will be declared if there is onward transmission to UK susceptible animals. The likelihood of circulation of virus in the midge population depends upon the time of year and the likelihood of transmission via midges to other livestock depends on their immune status. Occurrence of indigenous cases in animals will be evidence for disease circulation leading to disease confirmation, although cases may be detected through laboratory testing and not necessarily as clinical cases per se.
Figure 1: Risk pathway for entry of BTV-8 into the UK. Note: 1.5 weeks may be extended during cooler weather, however midges would not survive 1.5 weeks once in UK; 10 d is the longest period between blood meals. Declaration previously has only occurred after the discovery of several clinical cases indicating that it is very likely that indigenous transmission has occurred (this is what happened in 2007). Serosurveillance may play a part in this. We do not monitor virus in Culicoides on the basis of the Met Office models – really it should be guiding an increase awareness during clinical investigations of that area. Having said that the vector surveillance would be relevant for the winter period.

Overwintering of bluetongue virus

The cycle of bluetongue transmission has been well documented, with transmission occurring during peak vector activity periods, ceasing during the winter before re-
emerging at the start of the next vector period (16). In Northern Europe, transmission is therefore temperature dependent.

Under cool temperatures (<15°C), both midge activity and virus replication cease (16), though the longevity of midges may increase (17). A mild winter, however, could increase the duration of suitable conditions for vector activity and virus replication. The exact time at which the disease may reappear can vary, however, this was estimated to be between April and May during the 2007/2008 outbreak, when the first new infections were detected in animals, but this will depend upon winter and spring temperatures in Northern Europe (18).

At temperatures below 12-15°C virus replication ceases, but the virus may persist in both the host and vector populations, and recrudesce should temperature increase (18, 20). It has been suggested that adverse (cold) weather conditions of 100+ days, could minimise BTV survival (3), but it should be noted this is for experimental data and BTV-8 in C. obsoletus is not fully understood. A strong El Nino was present at the end of 2015 and it is expected to peak in early 2016. This phenomenon affects weather patterns worldwide and along with other factors is the cause of the unusually warm, wet conditions experienced in recent months in north-west Europe.

A number of theories on how BTV overwinters exist, whereby BTV persistence could be due to the vector population or the host (cattle and sheep) population. Both horizontal and vertical transmission within the animal population have been suggested as mechanisms for BTV persistence (16); however the exact mechanisms of overwintering remain largely unknown. BTV-8 is known to cause transplacental transmission in pregnant heifers (40, 41). Overwintering of vectors in livestock accommodation is a possible mechanism for maintaining disease transmission from year to year.

Given the past history of BTV-8 in Europe, there is little to suggest that the disease will fail to overwinter. Instead, one concern is whether the disease will spread in France during the winter and in 2016 or remain geographically restricted, which could depend on whether the virus persists in the animal and/or the vector populations, which in turn will likely depend on the vaccination campaign in France.
Figure 2 Basic reproduction number \((R_0)\) for BTV as a function of temperature. The black line shows the mean for the uncertainty analysis used to calculate \(R_0\) (i.e. allowing for uncertainty in the underlying epidemiological parameters), while the red dotted line indicates the threshold at \(R_0=1\). (courtesy of Simon Gubbins)

Figure 2 shows the basic reproduction number \((R_0)\) for bluetongue as a function of temperature. The plot was generated using the uncertainty analysis presented in Gubbins et al. (2007, 2012), but using updated distributions for the underlying epidemiological parameters. From the plot, \(R_0\) exceeds one between around 15 °C and 33 °C, with a peak \(R_0=3.3\) at 22 °C.

**BTV-8 incursion via infected midges**

The main route of BTV transmission is believed to be via infected midges (2), notably *C. obsoletus* for the UK (5). In order for infected midges to reach the UK, a number of events must occur, such as successful overwintering of the virus and initial travel of infected midges over land to Northern Europe, culminating in travel over the channel; such long distance travel is usually done on the wind (22).

When France first reported BTV-8 in 2015, the Met Office carried out modelling of the likely wind borne distribution of midges from the area of the outbreak in the days leading up to reporting. The following figure describes the average wind direction and speed between late June and early August. Individual wind plumes were overlaid on a map of Europe and showed that the risk of wind borne transmission during this period was very unlikely. In the event of disease overwintering in France
successfully, the risk of incursion from windborne vector movement will be predicted using such modelling. At present, we cannot predict the risk of incursion as the average daily temperature and wind direction cannot be determined so far in advance. Therefore this will be kept under review on a month-by-month basis. The likelihood that temperature and rainfall conditions will be above or below average can be predicted up to three months in advance. Using the dispersion models must still be done only for real-time use and is not suitable for broad predictions. Nevertheless, if disease re-emerges in Central France in 2016, BTV spread models (as used for spread within the UK) can be applied to the situation in France and used to predict the time from emergence to reaching the North Coast.

The risk of a windborne midge incursion will increase during the vector activity season – as the season progresses. During an outbreak, the number of infected (and therefore viraemic) hosts increases exponentially and, as a consequence, the number of infected midges also increases exponentially and similarly the likelihood that one will be carried by the wind as they will be close enough to the coast. It will also depend on there being present a high density of susceptible (naïve) animals.
Figure Y Hourly wind direction and speed at Louroux de Bouble (direction shown is where winds come from). Bars show the percentage of time in each direction and colours indicate the speed. The number in the centre describes the percentage of time where winds were calm (<1m/s).

Speed of vector movement

Movements of midges on the wind follow a different pattern over land compared to over water, whereby distances of 700km in a single movement could occur over water, but not over land (25). Vector movement over land has been shown to intermittently stop and cause local disease spread at distances up to 10km / week, rather than long distance spread, which is unlikely to occur, despite suitable wind conditions (25). Meteorological data during 2006-2008 suggested that we could expect between 2.7 - 12 wind events per month suitable for Culicoides movement to the UK from northern France, but that midges will not fly in strong wind or heavy rain (28). Previous studies, looking at various sources, showed the south and south east coast of the UK to be more exposed to wind patterns that would be sufficient for vector movement (29).

Initial location of an infectious vector

It is important to note that while BTV-8 was able to reach the UK during the 2007/2008 outbreak, the foci of the originating outbreak was in the Netherlands and
the point of entry was Suffolk / Essex (although it is likely that there were at least two separate incursions) (31). On the other hand, when we looked at the likely incursion of Schmallenburg virus into the UK using similar modelling and given the disease distribution across France, Belgium and Netherlands in 2010 (42) the whole South Coast of England was at risk.

Given the current location of BTV-8 and the level of surveillance being carried out in France, spread within Central and to northern France should act as a warning of increasing likelihood for disease entry to the UK.

Time period of risk

The time at which virus transmission re-occurs in France and then the time at which it spreads north are both likely to play crucial roles in the likelihood of BTV-8 entry to the UK. Cases can usually be expected to re-emerge in France around April to May, depending on the average daily temperature and the population of infected midges and naïve animals, such that the $R_0$ is greater than one (see Figure 2). This would clearly be towards the start of the vector period, but because of the uncertainty around this, three time periods were chosen for modelling – an incursion in May, July and September.

With the likely temperatures, and assuming that disease does spread to Northern France, we would estimate the probability of incursion into the UK via infected midges at 5-10% (Low) in May, 33-60% (Medium) in July and 80% (High) in September, however it should be noted that not all incursions will lead to an outbreak.

Incursion through imported live animals

The trade (from the EU) of live animals (cattle and sheep or goats) is governed by EU Legislation. All animals must be certified as fit to travel and not originating from a premises under control for a notifiable disease. If originating in a restriction zone for BTV, the animals are banned from leaving the zone, unless accompanied by a veterinary health certificate which confirms the animal moves under one of the agreements in Annex III of Directive 1266/2007/EC. The UK currently does not allow animals to travel under Annex III parts 1-4 (on vector protected establishments); however, animals may move if vaccinated against BTV-8 or if naturally immune. Animals originating outside the restriction zone do not require such guarantees but as this is presently an evolving situation, all such consignments are post import tested in the UK for BTV by PCR.
The likelihood of an incursion through movement of an imported animal is considered a low risk at present and is further reduced by the mitigation measures in place.

**Exposure assessment**

To consider the spread of BTV in GB once an incursion occurs (ie, an infected animal is detected) we used the modelling capability at the Pirbright Institute (TPI) with some additional information from models run by Scotland Government’s Centre of Expertise on Animal Disease Outbreaks (EPIC) and at Liverpool University. We considered three incursion points and three incursion times, plus with movement restrictions and a low level of immunity (25%) which may result from prolonged immunity of animals (vaccinated or naturally immune) from the previous epizootic. The model was run for each scenario 100 times. The agreed scenarios were:

- Incursion via infected midges happening in spring (May), summer (July) or autumn (September).

- Incursion via infected midges happening at three locations: Hampshire, Kent and Suffolk, to account for differences in livestock demographics and proximity to Continental Europe.

The following maps (5&6) are livestock demographic maps for sheep and cattle livestock density in 2014.
Note: The maps were created using extracts from the Sheep & Goat Inventory (Jan 2014) and the Cattle Tracing System (July 2013). The density of sheep and cattle in GB was performed using the kernel density function in ArcGIS. The data are classified manually into six bins and the map is suitable only for demonstrating relative density across GB.

Using the Pirbright model, incursion points of Hampshire, Kent and Suffolk and incursion times of May, July and September, were modelled.

No immunity in the livestock population

A baseline scenario with no controls showed that there was a high probability of an incursion taking place in May, July or September and leading to an outbreak developing as a result. Not all incursions will develop into outbreaks and not all outbreaks will lead to secondary spread. The Pirbright model used 2006 data which was an exceptional year with high average temperatures in May. Other models which use average annual temperatures suggest that not all disease incursions in May will lead to outbreaks and spread, but June is generally warm enough to lead to successful disease introduction into livestock. Of course if disease is spreading rapidly in France on the coast, it is likely that conditions are suitable in Southern England for similar spread.

The number of outbreaks which then occur during the year is greatest following incursions taking place in May and July (although not every incursion leads to an outbreak), while unsurprisingly, the opposite occurs in September, when an incursion leads to the least level of spread. This is of course related to the duration of the remaining vector period and the temperature under which BTV can replicate in the vector. There are differences between the incursion points, whereby an incursion in Hampshire leads to more outbreaks than Kent and in turn more than Suffolk – this is related to livestock density.

Movement Controls

Movement controls are laid out in the Directive and require restriction zones of varying sizes (all centred on the infected holding/s, a 20 km Control Zone, a 100 km Protection Zone and a 150 km Surveillance Zone – collectively referred to as the Restricted Zone) to be put in place, from which animals may move from lower to higher risk zone without additional testing requirements but from higher to lower risk only with pre-movement testing (negative) and vector proof transport.

The modelling from Pirbright showed that in an unusually warm year (2006) with high vector activity, where there is a 150 km restriction zone around the incursion point,
movement controls alone will not have a significant impact on preventing spread. As the majority of spread is due to vector-mediated transmission, this is not surprising. The same effect is seen with the modelling from Liverpool for the different years.

Using alternative modelling from EPIC and Liverpool, lower average temperatures and animal population data from 2010/2012, there is some reduction in disease impact with the application of movement controls when an incursion occurs early in the season but the impact of an incursion would still be significant.

Pre-existing immunity

A level of 25% immunity was modelled to see whether this has any impact on preventing disease spread. While there is no information about the level of immunity in the current livestock population in these areas, it is possible that immunity from vaccination may last as long as 4 to 5 years (although vaccine recommendations are for boosters once a year to maintain a high level of immunity). The areas of the south and central England were known to have relatively high levels of vaccination coverage. To explore whether this is a reasonable scenario would require a level of surveillance in the livestock that is not a high priority at present.

The modelling results showed that in year with average temperatures, there is a significant impact of this low level of background immunity. Although it will not entirely prevent an incursion occurring, it will limit the size of the outbreak and therefore the impact.

Summary of key uncertainties

There are several key uncertainties in this assessment that impact on the estimate of the likelihood of disease entry. These uncertainties include:

- The likelihood of overwintering and the rate at which BTV-8 is able to spread in winter and early spring in France, given the level of vaccination which may be used between now and spring.
- The suitability of the climate conditions in UK during 2016. The risk of BTV-8 incursion and spread could increase should climate conditions favour virus replication and high vector activity.
- The models differ in the assumptions they make, especially in the way they describe spread between farms, and in the demographic and climate data used.
Summary of key assumptions

The majority of the modelling was carried out using climate data, livestock demographic data and movement data from 2006. The spring of 2006 was significantly warmer than previous and subsequent years therefore this represents the worst-case scenario. To make sure the model is compatible, all data were for 2006. Although the livestock demographics and movements will have changed considerably since 2006, the main changes are in number of premises (whereby there are now fewer, larger premises for dairy cattle). Hence this report uses an incursion point for Hampshire rather than further West, as restrictions already exist in that area.

Conclusions

At present, BTV-8 is still being reported from France as active cases (PCR positive), although there is a more southerly spread, probably because the average daily temperatures are likely much lower in the North. Nevertheless, this does not preclude spread towards the North happening in 2016, increasing the risk to the UK.

In this report, we have considered a level of vaccination which could equate to a level which may simulate residual immunity in older livestock or a level of compliance for high status livestock (breeding or export animals). Although the model used had temperature data from 2006, this represented a worst case scenario, when average daily temperatures were high in spring time and there were more and smaller livestock holdings.

The model results suggest that even at a low level of immunity of just 25%, this would still have an effect on reducing the level of secondary spread.

It is quite possible that a cold spring and cold summer would mean a significantly lower chance of any spread taking place, even with multiple incursions. Equally, a delayed incursion and spread, later in the year, is possible. Predicting the likely incursion and spread is therefore difficult but there is good evidence to suggest an incursion would be likely in the summer of 2016, and will need to be monitored closely. Certain events will trigger close monitoring such as the first case reported in France to the northern area of the restriction zone, or a case reported near the north coast.
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