

## Bovine TB controls

IT disappoints me greatly that the BVA has not taken a more supportive position in relation to both the pilot badger culls, and also that it does not take a more proactive role in explaining why culling is currently the only proven method to reduce TB in this or any country where a wildlife reservoir exists. We remain one of the only countries in the entire developed world that does not control this disease properly, and this is a major contributing factor to the levels we see in the UK today and to the continuing rise of the disease. It is an absolute tragedy that the scientists and politicians who have been allowed to condemn our nation's badger population to an escalation of disease are not held to account by our profession for the outcomes of their recommendations and decisions. Ever since control of disease in badgers was halted, the radial spread of the disease has continued on. Spoligotyping shows this to be far more likely related to local wildlife vectors than to cattle movements. Of course cattle movements are involved in the small number of long distance translocations of disease, but the main spread and persistent disease is clearly attributable to the lack of removal of incurable infected animals roaming free among our pastures. Those translocated episodes are quickly addressed with cattle measures unless a wildlife reservoir exists.

same study the risk of those same badgers testing positive to TB is increased by 692 per cent where they live with culture-positive badgers. The public are continually misled by so-called independent scientists and it is our job as veterinary scientists to help the public understand all the facts, not just a few carefully handpicked ones.

The pilot culls were designed in such a way that it was always going to be extremely difficult to meet the criteria set out by the independent panel. The definitions used for 'time to death' are not accurate. The population estimates are subject to disruption by protesters, as described in the panel's report. The costs are constantly reported as a total, instead of splitting out the costs of policing, monitoring, training, etc, that go along with a trial of this sort. It is wrong to talk about the 'cost of culling' in this context. The BVA should take a lead on trialing other methods of culling as well, as it is fair to say that free shooting alone will probably not be the best method. There continues to be much expenditure on vaccinations for badgers and cattle. This follows decades of international research on this subject, which has yet to yield any significant success and we do not have the time to wait for these to materialise. Vaccination of cattle, even if successful (which currently it has been shown not to be), would mean we are then destined to live with this harmful bacteria at large in the wildlife of our country. This would put pets, camelids, indeed many other animals and finally people at risk too, as your recent editions have shown us. Our forefathers took difficult decisions to protect future generations. In the UK it is now our time to make those hard choices.

The as yet uninfected badgers of the UK, and the as yet unborn badgers deserve to enter a population where the disease has been dramatically reduced and hopefully in some areas eradicated. Culling remains the only proven method to achieve this where infection resides. I support the use of badger vaccination outside of these infected areas should this prove feasible, as this should improve our progression towards disease freedom in that species and protect those uninfected populations to some degree, as they become the grandparent stock that recolonise the once infected zones. Vaccination of badgers, however, has been shown to have limited to no meaningful effect in studies to date in infected populations.

Tighter cattle controls and biosecurity are the recommendations from those opposed to the cull. These work perfectly well where there is no wildlife reservoir. If cattle controls could do it on their own, none of the rest of the world's TB-free countries would have bothered controlling wildlife that harboured the disease. The truth is that, where TB exists among wildlife, those countries have had to employ some degree of culling.

As a profession we are very silent about

this disease in general. It is understandable because it is difficult to discuss the killing of animals as a component of reducing and eradicating disease. However, we only need to look into our own history, and the example set by the rest of the world, to realise that for certain diseases, and especially TB, culling of incurable, infected animals is going to have to be a part of the control plan. Our small animal vets fear reprisals from their clients, and us large animal vets who speak out become the victims of abuse. But we are professionals and it is our duty to the animals of the UK to make sure we do what is right for them and their future. Vets should read up on the disease and then help the public understand what needs to be done. Vaccinations and other technologies may be part of the future, but for now there is only one proven solution to our country's terrible plague. May I recommend the website [www.bovinetb.info](http://www.bovinetb.info) for those who would like to learn more about the disease and its control? It would be great if more vets were conversant with the facts about this disease and were willing to speak up.

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#### Reference

CARTER, S. P., CHAMBERS, M. A., RUSHTON, S. P., SHIRLEY, M. D. E., SCHUCHERT, P., PIETRAVALLE, S. & OTHERS (2012) BCG vaccination reduces risk of tuberculosis infection in vaccinated badgers and unvaccinated badger cubs. *Plos One* doi: 10.1371/journal.pone.0049833

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#### RCVS

## Restructuring the RCVS fellowship

I WRITE in response to Lloyd Reeve-Johnson's recent letter in *Veterinary Record* (May 10, 2014, vol 174, p 483) about the proposals to restructure the RCVS fellowship. Professor Reeve-Johnson questioned the proposal to close the fellowship by thesis route and rejected the idea that practitioners could engage in novel research by taking a university-based higher degree because they will have neither the time nor resources to do so.

I am a member of the fellowship working party and both my husband and I are practitioners who have gained their fellowship by thesis so I have first-hand experience of the time and resources that are required. Completing a fellowship thesis is as much, or more, demanding than a PhD but, like many other candidates, we were isolated in practice and not affiliated to a university. We had limited access to libraries and little