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California: During the period May 23, to June 25, 1973, there were no positive or exposed cases of exotic Newcastle disease in the continental United States. The Epidemiological Necropsy Surveillance Program (ENSP) which involves the collection and submission of dead birds from poultry flocks to the diagnostic laboratory continues to be an excellent method of surveillance. During this period, over 95 percent of the commercial flocks in Orange, Los Angeles, Riverside, San Bernardino, San Diego, and Ventura Counties were covered. Since the declaration of the national emergency on March 14, 1972, and until June 23, 1973, 367 flocks consisting of 10,571,450 birds were determined to be infected, and 914 flocks consisting of 949,581 birds were determined to have been exposed. The above reflects a change of 4 flocks consisting of 274 birds from the exposed to the infected category. This change was necessitated when birds from exposed flocks were submitted to the laboratory and the virus of exotic Newcastle disease was subsequently isolated and characterized. Since the declaration of the national emergency, 11.5 million birds have been destroyed due to infection with or exposure to exotic Newcastle disease. These birds were appraised at $21.5 million. Another $2.6 million has been obligated to date for supplemental indemnity which represents a further indemnification for layers as egg producers for a 26-week period, the time required to raise a bird to an egg-producing age. Approximately 10.8 million birds which have been depopulated were layers. Records indicate approximately 54 percent of these birds have been restocked and are in production or will soon be producing.

On June 4 and 5, 1973, a Work Conference on exotic Newcastle disease was held in Riverside, Calif. At that time, a project for Veterinary Services personnel was initiated to review preventive measures against the introduction and dissemination of exotic Newcastle disease to breeding flocks. An orientation meeting for the State and Regional Poultry Disease Epidemiologists was held in Riverside, Calif. The project concerning disease security management of poultry breeding flocks was requested by the Poultry Breeders of America. Initial contact with the poultry breeders has begun.
The Epidemiological Disease Prevention Section of the exotic Newcastle disease task force continues to play a major role in flock security and in the prevention of the spread of exotic Newcastle disease in southern California. This section of the task force is involved in studies with the industry in finding ways to prevent the spread of exotic Newcastle disease and other poultry diseases. This section has been active in developing methods for washing and disinfecting egg flats, egg carts, feed trucks, and other equipment which go on and off poultry ranches. It has also developed and disseminated information to the poultry industry advising them on procedures which should be taken to prevent disease spread when servicing poultry flocks. The Exotic Newcastle Disease Task Force has recently presented the first award to an Ontario poultry organization that provides specialized labor services for their efforts in preventing the spread of poultry diseases.

Puerto Rico: In May, an outbreak of exotic Newcastle disease occurred in a flock of 72,200 pullets in Aibonito Municipio which is considered the hub of the poultry industry in Puerto Rico. Approximately 14,000 birds have died. The entire Commonwealth of Puerto Rico is under quarantine for exotic Newcastle disease.

Regulation Changes and Quarantine Actions ... On June 15, 1973, another 200 square miles in southern California were released from quarantine for exotic Newcastle disease in poultry and other birds. The action leaves only about 200 square miles still under the quarantine restrictions imposed on poultry and egg movements in March of 1972 to stop the exotic Newcastle disease from spreading to the rest of the Nation. All of the 200 square mile area released from quarantine was in Riverside County. Only about 75 square miles in the Calimesa, Cherry Valley, and Beaumont areas of Riverside County remain under quarantine. The area under quarantine in San Bernardino County remains unchanged.

HOG CHOLERA FISCAL YEAR (FY) 1973
SUMMARY REPORT

1. There have been 163 positive and 263 exposed cases during FY-73, compared to 76 positive and 288 exposed cases during FY-72.

2. Positive and exposed animals depopulated 76,379 in FY-73, compared with 32,163 in FY-72.

3. Seventy-six Counties in 18 States and Puerto Rico reported hog cholera in FY-73, compared with 39 Counties in 11 States and Puerto Rico in FY-72.

4. Seventy one percent of the 1973 hog cholera cases were reported in five States:
   Indiana - (45)
   Kentucky - (12)
   New Jersey - (15)
   North Carolina - (25)
   Ohio - (18)
5. **Two** States advanced to hog cholera "Free" status in FY-73:

Mississippi - 7/2/72  
Rhode Island - 7/23/72

6. **Seven** States lost "Free" status in FY-73:

Nebraska - 8/21/72  
Kentucky - 9/8/72  
Indiana - 9/14/72  
Ohio - 9/14/72  
Tennessee - 10/2/72  
Georgia - 10/18/72  
Virginia - 1/10/73

7. **One** State lost Phase IV status in FY-73:

New Jersey - 12/1/72

8. **Six** States returned to "Free" status in FY-73:

Kentucky - 3/24/73  
Nebraska - 2/4/73  
Georgia - 6/2/73  
Ohio - 5/10/73  
South Carolina - 5/4/73  
Tennessee - 5/2/73

9. **Four** States returned to Phase IV status in FY-73:

North Carolina - 4/17/73  
New Jersey - 5/18/73  
Indiana - 6/15/73  
Virginia - 5/7/73

10. From 1/1/72 to 6/30/72, 58 positive cases. From 1/1/73 to 6/30/73, 16 positive cases, a 72 percent reduction.

11. Federal quarantines were issued in 172 Counties in 17 States and Puerto Rico during FY-73.

12. For the first time the hog cholera eradication program quarantined two entire States; New Jersey 12/1/72, and Pennsylvania 12/6/72.

### POSITIVE AND EXPOSED HOG CHOLERA CASES FY-1973

<table>
<thead>
<tr>
<th>Month</th>
<th>Positive</th>
<th>Exposed</th>
</tr>
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<tbody>
<tr>
<td>July</td>
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</tr>
<tr>
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<td>April</td>
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<td>June</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>163</td>
<td>263</td>
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</table>
HOUSE FLY TRANSMISSION OF HOG CHOLERA VIRUS

The role of the common house fly (Musca domestica) in the mechanical transmission of hog cholera virus was first investigated by USDA scientists as early as 1919. Since that time, additional studies have been periodically conducted which have suggested that house flies may contribute to the area spread of hog cholera virus. However, due to conflicting results and faulty experimental design in some instances, not all scientists have agreed with the hypothesis that house flies may serve as mechanical vectors of the virus.

In order to confirm or clarify earlier reports, critically controlled transmission studies are being conducted at the Veterinary Services Diagnostic Laboratory, APHIS, Ames, Iowa in cooperation with the Chemical and Biophysical Control Laboratory, ARS, Beltsville, Maryland. Preliminary results of these studies have indicated that house flies exposed to viremic hogs for 3 hours and then held in isolation for a period of 24 hours, can transmit hog cholera virus to susceptible hogs. These results clearly indicate the need to initiate fly suppression measures in support of the hog cholera eradication effort, when fly population densities are high on infected or exposed premises.
FOOT AND MOUTH DISEASE CONTINUES TO HARRASS EASTERN AUSTRIA

When foot and mouth disease first appeared in Austria in January of 1973, reportedly introduced then by a group of visiting Hungarians, local health authorities acted at once to localize the outbreak. Mass vaccinations of ruminants, the killing of all susceptible livestock on contaminated farms, traffic restrictions in exposed areas and the placing of disinfecting mats on access roads were effective in preventing the disease from getting out of hand. The disease then indentified was of the virus type "C", which appeared primarily among cattle.

However, just when it appeared that the situation was well under control, the epizootic began to attack swine on a large scale. The virus responsible for this sudden turn for the worse was of the "O" type.

In view of the fact that prophylactic inoculation of swine usually fails to produce immunity, official control activities have now been focussed on reducing traffic between centers of infection and non-contaminated areas to a minimum. However, restrictions on travel from and to stricken areas, and on social gatherings and cultural activities apparently were not enforced strictly enough. Fresh instances of the disease have been discovered almost daily in swine population of the country's eastermost provinces, i.e., Lower Austria and Burgenland.

An official bulletin just published highlights the seriousness of this year's outbreak of foot and mouth disease: Since the first case of infection was registered on January 25, altogether 858 farms have been hit by the epizootic, and some 3,000 cattle and 35,000 hogs have been killed pursuant to a provision calling for the destruction of all susceptible livestock on contaminated farms. Reportedly many farmers have sold all hogs on their premises. They do not want their cattle killed in the event that any of their hogs should develop the symptoms of foot and mouth disease.

Animal health experts are not venturing any guesses as to when the epidemic will stop. Some of them believe that a spell of really hot weather may help because the virus apparently thrives only in low and moderate temperatures.

The economic implications of the present disease situation are quite serious. Although farmers are indemnified at current market value for their livestock losses, they will be without the accustomed day-to-day cash earnings from sales of milk and slaughter animals until such time as their barns can be restocked.

To reduce the drain of Federal funds from which indemnifications are paid, the meat of animals slaughtered by official order is not destroyed. It is held in storage plants for at least 48 hours at a temperature of 5 degrees centigrade and treated externally with a lactic acid spray. This treatment is said to render the meat perfectly safe for human consumption.
Last week the Austrian Ministry of Health issued a decree stopping for an indefinite period all shipments of live cloven-hoofed animals and meat of such animals from eastern Austria to those parts of the country that have hitherto remained free of foot and mouth disease. This creates a major storage problem in the eastern provinces where warehouses are filled to capacity with carcasses that cannot be moved to western Austrian storage plants.

Perhaps the most critical aspect of the current foot and mouth disease outbreak is the fact that Italian and Bavarian health authorities closed the borders of their respective countries to Austrian livestock and meat shipments. If this ban is maintained for any length of time, it will inflict serious damage on the domestic livestock industry. To appreciate the magnitude of the problem we must visualize that in calendar year 1972 Austria shipped to Italy and Germany cattle and beef in a total value of $85.7 million (based on last year's parity of $1.00 = AS 23.30). This is no less than 40 percent of the country's total 1972 farm exports. The loss of these export markets, even if for a short period only, could trigger a price slump in domestic livestock markets.

The influential Austrian Farmers League has also asked the government to urge Italy to lift the embargo at least for those Austrian provinces that are free of foot and mouth disease; a pertinent formal request has meanwhile been submitted to the Italian authorities. The Farmers League, greatly concerned over farm price prospects and the meat storage situation, also has urged immediate discontinuation of meat imports from abroad for the duration of the present emergency. This confronts the government with a difficult decision, as foreign meat shippers are bound by contract through June 30, 1973, to deliver to Austria specific tonnages of meat at the relatively low prices previously agreed upon. On the other hand, it appears physically impossible to store sizeable quantities of imported meat in addition to the carcasses already occupying most of the available storage space.

(Adapted from FAS telegram from Vienna, Austria, dated May 23, 1973).

TRAINING COURSES IN FOREIGN ANIMAL DISEASES

During May 8-25, 1973, a Foreign Animal Disease Diagnostic Course was held at the National Animal Disease Laboratory, Ames, Iowa, and the Plum Island Animal Disease Research Center. Thirteen State, Federal, and military veterinarians participated in this training. The objective of the course was to train regulatory veterinarians in the recognition and diagnosis of foreign animal diseases and to review the basic principles in hematology and pathology. The program was designed to: (1) provide knowledge of the clinical symptoms and gross pathology commonly observed with the disease in question, (2) provide knowledge of laboratory diagnostic tests, specimens and procedures required for confirmation of the disease in question, (3) provide information on research being conducted or planned, and (4) stimulate interest in technical literature pertaining to foreign animal diseases. In addition, the course was designed to increase professional technical capabilities in the specific diagnostic area, to review and update the participants' knowledge in the basic sciences, to provide program activity orientation, to improve the participants' abilities to communicate with other scientists and with the livestock industry, and to provide the participants'
with the impetus and fundamentals for continuing education following the completion of the course. The objectives of the course were achieved.

During June 12-14, 1973, a Foreign Animal Disease Diagnostic Seminar was held at the National Animal Disease Laboratory, Ames, Iowa. The primary objective of the seminar was to acquaint the foreign animal disease diagnosticians with the organization of Emergency Programs, to update their knowledge on selected disease problems, and to revise sections of the Emergency Animal Disease Eradication Organization Guide (EADEO). The participants also received information on the role of vectors and wildlife in foreign animal diseases. In addition, they were instructed on the possible use of procedures such as epidemiology and remote sensing in disease surveillance, control, and eradication. Work sessions were held to develop a Regional Emergency Animal Disease Eradication Organization including duties and responsibilities of each section of this organization. Sixty-five foreign animal disease diagnosticians attended. Each of the participants and the work groups made substantial and significant contributions to planning, development, and maintenance of a Regional Emergency Animal Disease Eradication Organization, the revision of the EADEO Guide, and the activities and functions of National Field Operations and Emergency Programs. The input of each participant will be very valuable in conducting activities of Emergency Programs.

USDA SELECTS FIELD OFFICIALS FOR APHIS VETERINARY SERVICES

Veterinary Services announced the selection of veterinary officials to head up the five regions and 19 area offices established under the recent realignment of its field structure.

Officials pointed out that under the realignment the present four animal health field regions and one centralized veterinary biologies operation will be replaced with five field regions—with the activities of veterinary biologies integrated with those of animal health. The current 47 Veterinary Services field offices—one in each State, for the most part—will be replaced with 19 area offices, each covering two or more States. The changeover will take place this summer.

The purpose of the realignment is to provide for better use of manpower and thereby increase efficiency of Veterinary Services animal health, veterinary biologies and animal care programs. This new structure will be particularly helpful in combatting outbreaks of serious animal diseases.

The selection of regional directors is as follows:

Northern region (Areas 1-6), Dr. H. C. King; assistant Dr. S. T. Wilson
Southeast region (Areas 7-10), Dr. M. J. Tillery; assistant Dr. E. G. Ongert
South Central region (Areas 11-13), Dr. Paul Becton; assistant Dr. J. H. Wommack
North Central region (Areas 14-17), Dr. G. V. Peacock; assistant Dr. R. Morgan
Western region (Areas 18-19), Dr. G. E. Blake; assistant Dr. M. L. Johnson
Selection of the 19 area federal veterinarians in charge is as follows:

Area 1, covering Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont, with offices in Waltham, Mass., Dr. A. E. Decoteau; Area 2, covering New Jersey, New York and Pennsylvania, with offices in Albany, N.Y., Dr. W. W. Thomas; Area 3 covering Delaware, Maryland, Virginia and West Virginia, with offices in Hyattsville, Md., Dr. Paul Kramer; Area 4, covering Michigan and Ohio, with offices in the Reynoldsburg, Ohio, locality, Dr. Douglas Stauffer; Area 5, covering Illinois and Indiana, with offices in the Indianapolis, Ind., locality, Dr. H. D. White; Area 6, covering Minnesota and Wisconsin, with offices in the St. Paul, Minn., locality, Dr. E. M. Joneschild.

Area 7, covering Kentucky and Tennessee, with offices in Nashville, Tenn., Dr. W. E. Ivey; Area 8, covering Alabama and Mississippi, with offices in Jackson, Miss., Dr. Claude Nelson; Area 9, covering Georgia, North Carolina and South Carolina, with offices in Columbia, S.C., Dr. O. L. Kelsey; Area 10, covering Florida, Puerto Rico, and the Virgin Islands with offices in the Miami, Fla., locality, Dr. Wiley Bird.

Area 11, covering Arkansas, Louisiana and Oklahoma, with offices in Oklahoma City, Okla., Dr. C. J. Mikel; Area 12, covering New Mexico and Texas, with offices in Austin, Tex., Dr. E. S. Cox; Area 13, covering the screwworm eradication program, with offices in Mission, Tex., Dr. M. E. Meadows.

Area 14, covering Montana, North Dakota and South Dakota, with offices in Bismarck, N.D., Dr. M. B. Huffman; Area 15, covering Colorado, Utah and Wyoming, with offices in Denver, Colo., Dr. D. O. Manley; Area 16, covering Kansas and Nebraska, with offices in Lincoln, Neb., Dr. R. W. Gerding; Area 17, covering Iowa and Missouri, with offices in Des Moines, Iowa, Dr. G. W. Spangler.

Area 18, covering Arizona, California, Hawaii and Nevada, with offices in Sacramento, Calif., Dr. John Healy; Area 19, covering Alaska, Idaho, Oregon and Washington, with offices in the Salem, Oreg., locality, Dr. R. L. Evinger.

The district veterinarians, headquartered in the area offices, will supervise field activities within the areas. Creation of three special border districts along the U.S.-Mexico border--two in Area 12 and one in Area 18--is connected with special responsibilities for surveillance in this area where there is a high risk of foreign animal disease entering the United States.

USDA URGES VACCINATION FOR HORSE SLEEPING SICKNESS

The U.S. Department of Agriculture (USDA) urged all owners of horses, mules, asses and ponies to get their animals vaccinated for the three types of equine encephalitis--horse sleeping sickness--found in North America. The recommendation was made because of high mosquito populations present or emerging in flooded states and many other areas of the country.
Horse owners should see their veterinarians about vaccination to protect against Eastern and Western equine encephalitis (EEE and WEE), as well as Venezuelan equine encephalitis (VEE) that ravaged in southern Texas and Mexico in 1971.

The three diseases are caused by different viruses that are carried by mosquitoes, and can be transmitted to humans. Effective vaccines are available for all three.

Officials warned, however, that vaccines for EEE and WEE do not protect against VEE; likewise, VEE vaccine does not protect against the other two.

Once horses had received the initial EEE-WEE vaccine series, they should receive annual booster shots. VEE vaccine provides ample protection for 18 months and possibly longer. Officials recommended that horses vaccinated for VEE during the 1971 emergency be revaccinated—especially in States bordering Mexico and in areas of heavy mosquito infestation. Also, horses vaccinated for VEE when under six months of age should be revaccinated to help assure protection.

USDA veterinarians are coordinating surveillance efforts in the Southwest and cooperating with Mexican authorities to detect and give warning of possible VEE outbreaks. On a nationwide basis, samples from any equine animal reported with encephalitis symptoms are submitted to USDA's Veterinary Services Diagnostic Laboratory (VSDL) in Ames, Iowa for the analysis needed to confirm a diagnosis of EEE, WEE, or VEE.

**DIAGNOSIS OF EQUINE ENCEPHALITIS**

The following observations can be made, based on data obtained through the functioning of the surveillance system in Americas:

Note should be taken of the fact that the etiological diagnosis, if this term can be so applied, is, in many instances, based on clinical considerations. A definition of the virus responsible for the outbreak occurred in a geographical area close to that where a laboratory diagnosis had been previously made.

There are on the other hand, areas where different viruses causing equine encephalitis can superimpose on each other. In addition, there are zones which can be invaded for a first time or repeatedly by any one of these agents. It would be desirable therefore, if each country were to be able to define whether each etiological agent exists, and an indication were to be given of the geographical limits of its presence.

In view of the fact that the problem for the present is to define the relationships between the viruses mentioned above and the equine populations, it appears advisable to carry out, as a minimum measure, serological surveys in these animals. This will allow a determination of their immune status as far as equine encephalitis is concerned.

VEE IN PERU

This country reported during the first 3 month period of 1973 that the area covered by the epizootic of VEE is made up of the provinces of Trujillo, Pacasmayo, Contumaza, San Miguel, Chiclayo, Lambayeque, Piura, Sullana and Morropon. A total of 3,693 human cases were reported with clinical diagnosis of VEE. Two human cases were laboratory confirmed. Seven deaths were reported. A total of 3,200 cases of VEE in equines were reported. Ten thousand equines were vaccinated using VEE inactivated vaccine.


SWINE VESICULAR DISEASE (SVD) IN GREAT BRITAIN

As of June 4, 1973, there have been 90 cases of SVD in Great Britain since the disease was first recognized there on December 11, 1972.

The origin of these cases was attributed to:

<table>
<thead>
<tr>
<th>Origin of Cases</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary outbreaks</td>
<td>5 Cases</td>
</tr>
<tr>
<td>Secondary spread by movement of pigs to market</td>
<td>13 &quot;</td>
</tr>
<tr>
<td>Direct movement between infected to other premises</td>
<td>7 &quot;</td>
</tr>
<tr>
<td>Market contacts</td>
<td>18 &quot;</td>
</tr>
<tr>
<td>Movement of pigs in contaminated trucks</td>
<td>19 &quot;</td>
</tr>
<tr>
<td>Contact with infected pigs in trucks</td>
<td>2 &quot;</td>
</tr>
<tr>
<td>Local spread (400 yards away)</td>
<td>1 &quot;</td>
</tr>
<tr>
<td>Reoccurrence of infected premises after depopulation</td>
<td>3 &quot;</td>
</tr>
<tr>
<td>Garbage feeding</td>
<td>16 &quot;</td>
</tr>
<tr>
<td>Personnel movement</td>
<td>1 &quot;</td>
</tr>
<tr>
<td>Undetermined causes</td>
<td>5 &quot;</td>
</tr>
</tbody>
</table>

Of the above 90 cases, 40 were feeders of garbage. An additional case was diagnosed on a farm at Stainforth, Doncaster, Yorkshire June 8, 1973. The 245 pigs on the premises have been slaughtered.

DUCK VIRUS ENTERITIS IN SOUTH DAKOTA

A Federal Wildlife Refuge at Lake Andes, South Dakota, experienced a high death loss of Mallard ducks beginning January 19, 1973. At that time, approximately 130,000 Mallards and 8,000 Canadian geese were present in an area about 10 miles square.

South Dakota State University Animal Disease Research and Diagnostic Laboratory examinations of some ducks, revealed lesions typical of duck virus enteritis.

These findings were confirmed by virus isolation and serum neutralization in embryonated duck eggs and cell cultures at the Veterinary Services Diagnostic Laboratory, Ames, Iowa.

The death rate of Mallards continued at about 1,000 birds daily for 30 days.
Approximately 300 Canadian geese were also picked up during this period. Several additional species of ducks were also examined and found positive. These included: Golden Eye, Black duck, Red head, Widgeon, Merganser, Wood duck, and a Pintail-Mallard cross.

This disease had been considered confined to the East Coast flyway and Europe. This is the first reported epornitic in wild migratory fowl. (Adapted from Veterinary Laboratory Diagnosticians and Poultry Disease Conference, June 12-14, 1973, the Kellogg Center for Continuing Education, Michigan State University, East Lansing, Michigan).

**EQUINE ENCEPHALOSIS VIRUS**

A viral disease of horses, mainly subclinical in nature, but characterized by a few peracute cases showing marked signs of nervous disorder, was reported from South Africa in 1967.

The disease picture showed very little similarity to other previously described conditions. Furthermore, the virus isolated from the blood, spleen and other organs of infected horses seemed to be different from other known encephalitogenic viruses of horses. On account of the absence of a true encephalitis, the disease was called equine encephalosis, and the isolated virus was designated equine encephalosis virus (EEV).

EEV differs from the Eastern, Western and Venezuelan encephalomyelitis viruses by its resistance to the action of lipid solvents such as chloroform. In this respect, as well as in many others such as morphology and cytopathology, it markedly resembles the virus of African horsesickness, a member of the group of doublestranded RNA viruses. Equine encephalosis virus is therefore also provisionally classified as a member of the diplorna-virus group.

There are apparent similarities between equine encephalosis and Nigerian "staggers", but unfortunately the latter virus had not been characterized sufficiently and was not available for comparative studies. However, mice infected with EEV reacted negatively to the "dropping test" described by Porterfield et al. (1956) for the Nigerian virus.

The results of serological investigations indicated a widespread incidence of the disease during the first three months of 1967. Relatively few clinical cases were observed, however, suggesting that the great majority of infections were subclinical in nature. Age seemed to play a role in the pathogenesis of the disease since all the fatal cases occurred in horses older than seven years.

The fact that horses which were stabled at night did not contract the infection indicated that nocturnal biting insects were possibly involved in the transmission of the virus. It could also be concluded that equine encephalosis had not occurred in South Africa during the preceding ten years. Its sudden appearance probably resulted from the fact that ecological conditions for insects and insect-borne diseases were extremely favorable during the early months of 1967. This belief was confirmed by the isolation of a number of hitherto unknown viruses during this period.
Retirement of Dr. Donald E. De Tray

A recent visitor to the Veterinary Scientific Community at Beltsville, Md. was Dr. Donald E. De Tray, formerly Director of Veterinary Services Research Division in Agricultural Research Service (ARS) who has been in Ethiopia for seven years, working under a State Department program (AID) for rinderpest control.

In Beltsville, Md. on April 6, 1973, Dr. De Tray reported the experiences with rinderpest in Africa.

The campaign against rinderpest in Africa has been carried out by the Organization of African Unity or Joint Project 15 (JP 15). Donors to the campaign have been Germany, France, Canada, the United Kingdom, and Italy. The JP 15 is now in the 5th phase with one more phase predicted. The phases are correlated with the various African nations where the campaign has been completed. The big "breakthrough" came in the 1950's and early 1960 with the development of a tissue-culture-attenuated vaccine that gives lifetime immunity. Since 1969, some eight million cattle have been vaccinated in Ethiopia.

Dr. De Tray presented some data on rinderpest post vaccinal immunity testing in Ethiopia in 1972. The tests carried out by the French Veterinary Mission to Ethiopia revealed that following vaccination high percentages of animals were immune to rinderpest. Although the number of tests were small, the results were excellent.

Dr. De Tray considers rinderpest the world's most devastating cattle disease since ancient times which had a major influence on man's food supply. At present, rinderpest is indigenous to many parts of Asia and the Far East. Fortunately, when the disease invaded the Western Hemisphere in Brazil, South America, it was promptly eradicated.

Dr. De Tray spent 10 years, 1951-1961, in ARS research at Kabete and Muguga Veterinary Research Laboratories in Kenya, East Africa, where he developed information on rinderpest and African swine fever. His tour was interrupted briefly in 1953 when he went to Mexico to help fight an outbreak of foot-and-mouth disease. His recently completed tour of Africa began in Nigeria.

Born in Napoleon, Ohio, Dr. De Tray received his D.V.M. degree in 1940 from Ohio State University. He joined the USDA in 1947 after seven years of private veterinary practice in Ohio and service with the British armed forces in North Africa. He conducted brucellosis research at the ARS Animal Disease Laboratory at Beltsville, Md. before his first African tour. He returned from Africa in 1961 to join the Beltsville staff and became an associate director for veterinary research in 1963. Dr. and Mrs. De Tray are now permanently in the United States and will retire at Medford, Oregon.