Dr. Barbara Kohn  
Senior Staff Veterinarian  
Animal Care, APHIS  
Docket No. APHIS-2011-0079  
Regulatory Analysis and Development,  
PPD, APHIS, Station 3A-03.8  
4700 River Road Unit 118  
Riverdale, MD 20737-1238

Subject: Docket No. APHIS-2011-0079; Guidelines for the Control of Tuberculosis in Elephants

Dear Dr. Kohn and APHIS Department of Animal Care,

The American Association of Zoo Veterinarians (AAZV) is an organization that represents veterinarians involved in all aspects of the veterinary care, health, welfare, and research for captive and free-ranging wildlife. We represent animal health professionals from various disciplines with an expertise in zoo and wildlife species, including elephants. The AAZV supports efforts to improve elephant health and welfare, while safeguarding the health of people who work with or interact with elephants. The AAZV therefore respectfully submits these comments in response to the Notice of Availability published in the Federal Register, 78 FR 69078 (January 4, 2013) regarding the “Guidelines for the Control of Tuberculosis In Elephants 2010”.

The AAZV is the leading organization representing veterinarians involved in elephant health care in the United States, and also has members from many other countries. The AAZV is a participant and supporter of the “Management and Research Priorities of Tuberculosis for Elephants in Human Care Stakeholders Task Force”, (hereafter will refer
to as the “Elephant Care Task Force”) which represents a coalition of all the organizations that are responsible for elephant care in the United States. We share and strongly support the concerns and comments submitted to the USDA by the “Elephant Care Task Force” steering committee (included with this submission).

We additionally have concerns regarding the confusing availability of the 2010 Guidelines, the 2008 Guidelines, and the proposed 2012 Guidelines, without clarification of what Guidelines are in force. This has caused unnecessary miscommunication amongst member veterinarians, elephant managers, as well as federal and state veterinary and public health officials because it has not been clear which Guidelines were in effect. These various guidelines have not been implemented consistently by all concerned parties. Lastly, and most concerning, the ambiguity and lack of clarity in the 2010 Guideline’s recommendations for testing of elephants and interpretations of the results undermine provision of the best possible care for elephants, and constitute an unnecessary and unsubstantiated financial burden for elephant holding institutions. The 2010 Guidelines, compared to the 2008 Guidelines, increased testing requirements and restricted movement of animals without further scientific data to support that these changes are necessary.

Enforcement and implementation of the Guidelines for the last several years has resulted in a large amount of data regarding the serologic and cultural test results and correlations to health by the USDA. However this large database has not been critically and scientifically analyzed or shared by the USDA. Proposal of new Guidelines should be based on a scientific evaluation of the data accumulated over the last several years by the USDA, publication of the data in a peer-reviewed journal, and use of the new information to guide appropriate changes to the existing Guidelines. While tuberculosis in elephants can cause serious health concerns in infected animals, and in rare instances to those who care for them, the infectivity to other elephants and humans is relatively low. Continuing experience has demonstrated that this disease is manageable under the current 2008 Guidelines. From all reviewed data there are clear indications this disease in elephants is slow moving, has a low incidence, and a low prevalence in the current captive elephant population. Please see the “Elephant Care Taskforce” comments in the attached 2010 Guideline review.

Veterinarians in the AAZV have always been at the forefront of research and control of diseases that affect the health and welfare of animals under their care. Currently an epidemiological survey of tuberculosis in captive elephants is underway that is sponsored by the International Elephant Foundation (IEF) and approved by the Association of Zoo and Aquariums-Taxon Advisory Group (AZA-TAG). The leaders of this research effort are AAZV members with diverse backgrounds of elephant veterinary medical experience. This grass roots “Stakeholder” effort, in addition to the analysis of the wealth of data acquired by the USDA elephant testing program, are examples of the science that will further illuminate the epizootiology of tuberculosis in elephants. The AAZV is composed of motivated and passionate individuals that care deeply about zoological and wildlife
species and are actively leading the effort to apply good science and effective recommendations to control this disease. The information from this epidemiological research and the pending data analysis by the USDA will help to further characterize this disease and provide information that will help ensure optimal and humane veterinary care to the elephants in the USA. A concern that we know is shared by the USDA and which we all support.

The AAZV strongly disagrees with the content and requirements outlined in the “Guidelines for the Control of Tuberculosis in Elephants 2010” because it is not based on the best science and information available. Therefore, we do not believe that the 2010 guidelines effectively promote elephant care and welfare. We respectfully suggest the USDA retract the 2010 guidelines and recommend that the USAHA Elephant TB subcommittee revisit the Guidelines using science-based recommendations to develop improved Guidelines that can better improve the health and welfare of elephants.

Sincerely,

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