Sick Bird?
Call **Sick Bird Hotline**
866-922-2473

Virulent Newcastle Disease

Q&A for Veterinary Practitioners and Shelter Veterinarians

1. What types of birds are affected by Virulent Newcastle Disease (vND)?
The following is the definition of poultry as used on the California Department of Food and Agriculture (CDFA) quarantine: Poultry, especially chickens, are most susceptible to the disease. However, all exposed birds can become infected. They can also become carriers and transmit the disease to other birds, or acutely die. Poultry species are defined as: chickens, turkeys, turkins, pheasants, peafowl, guinea fowl, quail, ducks, geese, swan, gallinules, doves, pigeons, grouse, partridges, francolin, tinamou, ostriches, other ratites (emu, rhea, cassowary), and include hatching or embryonated eggs.

2. What may I tell bird owners about the vND regional quarantine in Southern California?
On the CDFA website bird owners will find the regional quarantine order, a regional quarantine map, testing and biosecurity information, and the most recent updates regarding vND: www.cdfa.ca.gov/ahfss/Animal_Health/Newcastle_Disease_Info
The regional quarantine was ordered to cease movement of all poultry and poultry products in Los Angeles County and large parts of San Bernardino and Riverside counties. Transmission of the virus can occur when people move their birds to other cities or counties. Therefore, movement of poultry species, psittacines and other birds that are comingled with poultry, or hatching eggs into or out of the regional quarantine is prohibited.

3. How do I perform vND testing on a client's bird?
Swabs of the oropharynx and/or cloaca are necessary in sick birds for testing of vND. Please **do not** obtain blood samples from these birds. **I**f you have a sick bird, please call the Sick Bird Hotline at 866-922-2473. The CDFA incident taskforce can set you up with a test kit through the UC Davis Laboratory with instructions on mailing samples. Please do not contact UC Davis Laboratory directly. For additional information please refer to: https://www.cdfa.ca.gov/AHFSS/Animal_Health/pdfs/VNDSampleCollection.pdf

4. May I test birds for vND if they do not exhibit signs?
It is not common practice to test healthy birds. In addition, poultry are very sensitive to vND and are likely to exhibit signs if exposed. Keep in mind that one negative test result does not guarantee that a bird is vND free indefinitely. The same bird may become exposed and test positive at any given time. Therefore, it is only recommended to test clinical birds. Please ensure that owners have strong biosecurity practices in place and encourage reporting of these clinical birds to the sick bird hotline shown above.

5. I have clients with pet birds or poultry within the regional quarantine zone. What do I tell them about keeping their birds protected from vND?
Do not move any birds, including seemingly healthy birds. Please inform owners to **not** visit the homes of anyone who owns birds and to **not** allow visitors who own birds onto

their property. Owners should have dedicated clothing which can be laundered daily and dedicated shoes which can be disinfected after each use. Hand sanitizer should be used before and after handling each bird. It is also advised to disinfect the tires and undercarriage of their vehicles when both leaving and returning to their property. Please direct clients to the CDFA Avian Health Website for more details: https://www.cdfa.ca.gov/AHFSS/Animal_Health/Avian_Health_Program.html

6. May I continue to examine and treat birds in my practice?
As the practitioner, after assessing **individual risk,** this is your decision. With strong biosecurity protocols and use of proper PPE, you should consider examining birds in the owner's vehicle or in the clinic's parking lot before bringing them into the clinic. Once you decide that it is safe to bring the bird inside the clinic for treatment, you do so at your own risk. Please also note that if a client is seeking medical attention for their sick bird, a permit is not required for this movement.

7. What biosecurity practices may I have in place at my own hospital?
If you decide to continue examining and treating birds in your facility, you should set up hand sanitizers and footbaths for both staff and the public at all entryways. Footbaths must also be set up leading into isolation rooms and treatment rooms. Please collaborate with your administration and staff to plan proper biosecurity and PPE measures for your individual clinic. A limited number of experienced staff should be assigned to handle birds on a regular basis. Staff handling birds should not own birds either to limit disease transmission. Dedicated clothing or disposable outwear must be used and properly sanitized or disposed of accordingly. Gloves and protective eyewear should also be used when handling sick birds. Pet birds should be separated in a different room from poultry in regards to any treatment or isolation areas. Staff must handle pet birds before poultry or have dedicated staff to handle **only** the poultry if possible.

For more information on disinfectants approved for vND, please refer to: https://www.aphis.usda.gov/animal_health/emergency_management/downloads/potential-disinfectants-to-use-against-vnd.pdf

8. May I vaccinate my avian patients against vND?
While there are vaccines available, they do not necessarily prevent infection. Vaccines reduce the severity of disease and therefore reduce the symptoms, but it is not recommended to vaccinate during a vND outbreak since birds already infected with vND can have their symptoms masked.

Should you decide to vaccinate, note that there are two types of vaccines available. One is a live attenuated vaccine which is given through a dropper onto the eye of the bird. The other vaccine is a "killed" vaccine which is injectable. Both vaccine types require administration with regular and frequent boosters. Vaccines should be given according to manufacturer recommendations. Vaccines alone are not as effective as strong biosecurity **with** vaccination use. The use of vaccines should **not** replace strong biosecurity practices.