DO YOU KNOW WHAT THE JOHNE’S DISEASE PROGRAM IN YOUR STATE (IF YOUR STATE HAS ONE) ENTAILS? AND IF THERE IS NO STATE JOHNE’S PROGRAM, DO YOU KNOW WHAT THE PLANS ARE FOR ONE OR IF THERE IS A STATE JOHNE’S COMMITTEE?

“THE NATIONAL JOHNE’S WORKING GROUP (NJWG) CREATED SOME MODEL PROGRAMS, AND THESE MODELS HAVE GREATLY FACILITATED STATES BEING ABLE TO CREATE THEIR OWN PROGRAMS,” SAYS MIKE COLLINS, DVM, PHD, UNIVERSITY OF WISCONSIN, AND A MEMBER OF THE NATIONAL JOHNE’S WORKING GROUP AND THE INTERNATIONAL DAIRY FEDERATION TASK FORCE ON MYCOBACTERIUM PARATUBERCULOSIS. “IT GAVE STATES A BLUEPRINT AND SOME GUIDELINES SUCH AS HAVING A JOHNE’S ADVISORY COMMITTEE AND BASIC TESTING STRATEGIES FOR CLASSIFYING HERDS. MANY STATES ARE FOLLOWING THIS RELATIVELY STRAIGHTFORWARD BLUEPRINT SO THEY’LL HAVE VERY SIMILAR PROGRAMS.”

THAT’S THE UP SIDE. THE DOWN SIDE?

THERE’S NO FORMAL, NATIONAL PROGRAM BECAUSE THERE’S NO MONEY GOING FROM THE FEDERAL LEVEL TO THE NATIONAL EFFORT AND FLOWING BACK TO THE STATES, SAYS COLLINS. “THAT MEANS EACH STATE HAS TO PICK UP THE TAB, WHICH ALSO MEANS THEY HAVE MORE LATITUDE TO MAKE THEIR PROGRAMS HOWEVER THEY WANT. THERE IS NO MANDATE THAT THEY HAVE TO FOLLOW A NATIONAL STANDARD, SO WE MIGHT HAVE 50 DIFFERENT PROGRAMS.”

DIFFERENT PROGRAMS IN DIFFERENT STATES WOULDN’T MATTER IF CATTLE WEREN’T CROSSING THE BORDERS FROM STATE-TO-STATE. “TRYING TO GET A HARMONIZED NATIONAL PROGRAM HAS YET TO BE FULLFILLED,” SAYS COLLINS. “FOR EXAMPLE, WE’RE NOT GOING TO HAVE A CLEAR UNDERSTANDING OF WHAT IT MEANS TO MOVE A COW OUT OF A WISCONSIN CLASS A HERD AND INTO AN OHIO #1 HERD. WE’LL HAVE A PROBLEM DECIDING WHAT EQUALS WHAT BETWEEN STATE PROGRAMS.”

STATUS VS. CONTROL PROGRAMS

AS YOU LOOK AT THE DIFFERENT STATE PROGRAMS YOU MAY BE DEALING WITH, IT’S IM-
What many dairies need are control programs to help them climb out of their Johne’s problems.

What’s happening in other countries?
The U.S. isn’t the only country working on its Johne’s disease program. Mike Collins, DVM, PhD, says Australia, the Netherlands, the U.S. and probably Sweden are comparable in their efforts to develop Johne’s programs, though Australia would be the front-runner. “Australia launched a very well-organized and well-funded program in 1995,” says Collins. “They have more herds that have been classified and a stronger indemnity and subsidy program to encourage testing. Most other countries are trying to model what the Australians are doing.”

Collins says in Australia, its national program is concentrated in certain states, but the states that don’t have Johne’s disease depend on the program as a means of certifying which cattle they can buy when they need to move cattle between states, therefore it protects non-infected areas as well. The success of the program, says Collins, stems from being well-funded by the government.

Continued on page 6

Johne’s websites
The following are some Johne’s websites where you can find more information on the disease, testing and control strategies:

- www.vetmed.wisc.edu/pbs/johnes
- www.aphis.usda.gov/vs/ceah

Johne’s state programs
This U.S. map from the USDA details which states have Johne’s disease committees and/or programs as of September 2000.

![US Map with states marked as YES, NO, or NO, BUT PLAN TO]
signed for the herd status program, for non-infected herds. "It’s to protect those uninfected herds, certify them and provide sources of non-infected cattle for producers who needed to fix their ‘broken’ herds. That was an important first step.”

Collins says, however, that because now the infection has become so prevalent, probably less than half of the dairy herds qualify or need such a program. “What they need is a control program to help them get out of this problem, but there are not many models for how you operate a control program.”

Collins says one of the reasons it’s difficult to institute a control program is because the program is largely based on education — of producers and veterinarians. “We preach to the choir when we tell veterinarians that Johne’s disease is important, but it’s not uncommon to go to farms and suggest either testing or control strategies and find out that the veterinarian has been telling the producer not to bother with it. It undermines the effort.”

Even if your state doesn’t have a Johne’s committee or control program, there are ways to get information to help educate yourself and your clients on their options for testing, culling or control strategies (see box on Johne’s websites). Collins says veterinarians should visit with their colleagues who are leaders in the profession — progressive practitioners who understand how important Johne’s disease is. “I also think it’s important for practitioners who are successful with Johne’s programs to let other practitioners know how they can charge for this information and advice.”

The diagnostic test confusion
One of the impediments to progress, according to Collins, is the confusion that surrounds diagnostic tests. “There’s even disagreement among the experts about how to use the tests most appropriately,” he says. Not to mention that there are multiple tests available now, and though the tests may generally measure the same thing, they are interpreted differently. "When we only had one test, we only had to explain sensitivity and specificity once, but multiple tests with different values make this harder to deal with.”

Collins says Johne’s disease stands apart from other diseases in that diagnostic tests are always going to be more difficult to interpret because of the biology of the disease. “The complexity of this disease and its test results means it is not something you can turn over into lay hands,” he says. “Veterinarians should embrace that and help producers understand that it’s the veterinarian’s job to inter-

What is APHIS planning?
Mike Carter, DVM, MPH, USDA-APHIS-VS, offers this information on what APHIS is planning for the coming year regarding Johne’s disease. “APHIS and a group of volunteers from the National Johne’s Working Group are going to work on developing program standards for Johne’s disease,” says Carter. “This document is needed because as the different states develop their Johne’s disease programs, APHIS needs a set of ‘standards’ or guidelines which can be used to compare the state programs for equality. And since APHIS deals with the international community, we also need a document specifying how we are dealing with Johne’s disease as a nation. Johne’s disease will continue to become more important in animal and animal product trade issues.”

Congress gave APHIS an additional $1,000,000 to add to the $1,500,000 already allocated in the APHIS budget (the operating budget for Veterinary Services (VS)). “This means that at the producer level, they will see more interaction with VS field personnel as VS works with the states to control Johne’s disease,” says Carter.

Carter says the National Veterinary Services Laboratory is also working toward expanding its diagnostic and validation capabilities for Johne’s and developing a national serum and fecal bank for Johne’s disease serology samples and fecal cultures. It will also be participating in establishing a pilot study to monitor the reliability and laboratory variation of ELISA testing.

“We will also be adding to the Veterinary Services website to include a quarterly update of the State’s activities,” says Carter. “Also, I plan to add a document with a similar format that will compare each state’s herd status programs and an interactive web database to which states may add producer names and contact information for herds within the states’ herd status (test negative) programs. This would act as a national database/advertising for Johne’s negative herds that wish to sell test-negative livestock.”

In addition, the Centers for Epidemiology and Animal Health is going to test for Johne’s disease and ask informational questions related to Johne’s disease in the upcoming Sheep 2001 NAHMS study as well as follow-up questions about Johne’s disease in the next NAHMS Dairy study.
National Cattlemen's Beef Association policy position on Johne's disease

WHEREAS, Johne's disease (*Mycobacterium paratuberculosis*), is a chronic, insidious infectious intestinal disease of cattle and other ruminants that is difficult to diagnose until clinical disease is expressed in later life, and

WHEREAS, spread of infection is most efficiently prevented by early detection in the herd and application of a control strategy combining hygiene, good management practices and surveillance, and

WHEREAS, NCBA is a member of the National Johne's Working Group (NJWG), which has a broader mission to help develop with industry a voluntary Johne's disease management program to protect public and animal health, reduce economic loss and synthesize a consistent approach for the management and certification of herds for Johne's disease,

THEREFORE BE IT RESOLVED, that NCBA encourage education of all industry stakeholders about Johne's disease and the voluntary surveillance and management practices for prevention and elimination of the disease from herds and certification of herds.

BE IT FURTHER RESOLVED that NCBA urge all states to form a working advisory committee to develop a proactive voluntary Johne's disease prevention-management program that encourages producer participation and preserves and enhances marketability of test negative cattle.

BE IT FURTHER RESOLVED, that NCBA support the NJWG to compile the existing relevant and accurate information and make it available to guide education and management programs for states and producers.

For veterinarians working with a laboratory performing Johne's tests, Collins says you need to pick a lab you have confidence in and make sure it's approved by the NVSL. “You also need to stay in touch with the lab so if their protocols change or if they change to a different test, you'll be informed. This way you will be able to change to a different lab if the lab you’re currently using no longer offers the same test you have confidence in.”

States need to find a way to move their programs forward, says Collins. “The program has to incorporate something like the herd status program and something to facilitate control in the infected herd. There is no model for that. Clearly education is number one and states do that in different ways with different degrees of effectiveness.”