

**Guidelines on the exchange of zoonotic information
of human health significance
between Official Veterinarians* and Public Health Medical
Practitioners**
December 2008**

PREAMBLE

Zoonoses are defined by the World Health Organisation as ‘Diseases and infections which are naturally transmitted between vertebrate animals and man’. Over 200 zoonoses are recognised worldwide. All zoonoses have some impact on human health. Certain zoonotic agents can cause serious disease in humans but have little or no effect on animals (e.g. VTEC O157) whereas others cause serious disease in both humans and animals. Currently notifiable zoonotic diseases in humans are included under the Infectious Diseases (Amendment)(No.3) Regulations 2003 (SI No. 707 of 2003)¹. It is inevitable that new zoonotic diseases, not currently notifiable, will emerge.

The sharing of relevant zoonotic information between veterinary practitioners and public health medical practitioners involved in the investigation and control of zoonoses plays a significant role in the protection of human health. Public Health Medical Practitioners are assisted in such information sharing by the Infectious Disease Regulations 1981 (SI 390 of 1981) [Appendix A]. While the situation may appear less clear for veterinary practitioners, a plethora of relevant legislation exists, and particularly includes the European Communities (Monitoring of Zoonoses) Regulations 2004 (SI 154/2004) [Appendix B].

Both professional groups have codes of professional conduct which, while emphasising confidentiality aspects, clearly recognise the welfare of society² and the public interest³ in relation to information disclosure. Each of the professions recognises their professional duty of care to protect public health.

SCOPE

These guidelines represent a consensus of informed opinion, facilitated by the National Zoonoses Committee, aimed at assisting professional practice in the exchange of zoonotic information of human health significance between state-employed veterinary practitioners and public health medical practitioners. The guidelines should serve to complement existing legislation and to support current structures, reporting arrangements, professional contracts and communication channels. They seek to enable communication and support multidisciplinary working at its best.

The exchange of relevant zoonotic information requires consideration on a case-by-case basis. The guidelines are not a set of rules or a code to be consulted in order to find an answer to every situation. They provide guiding criteria which the professionals involved may apply together with their professional judgement, experience, knowledge and skills.

DEFINITIONS

***Official Veterinarians:**

Those veterinary practitioners employed by the State in the following capacities: Local Authority Veterinary Officer, State Veterinary Laboratory Officer, District Veterinary Inspector and State Veterinary Public Health Officer.

****Public Health Medical Practitioners:**

Those registered medical practitioners employed by the State in the following capacities: Directors of Public Health/Medical Officer of Health, Director of the Health Protection Surveillance Centre and those public health medical practitioners reporting to them, as well as public health medical practitioners in the relevant food safety agencies (FSAI and *safefood*).

The primary concern of these guidelines is the protection of human health. They represent a consensus of informed opinion aimed at assisting professional practice in the exchange of zoonotic information of human health significance between veterinary practitioners and public health medical practitioners (both in state employment).

While it is recognised that private practitioners encounter zoonotic diseases in the course of their work, recommending the extension of these guidelines to private practitioners is outside the remit of the National Zoonoses Committee.

References

1. **Infectious Diseases (Amendment)(No.3) Regulations 2003 (SI No. 707 of 2003).**
Irish Statute Book. <http://www.irishstatutebook.ie/2003/en/si/0707.html>
2. **Code of Professional Conduct. Veterinary Council of Ireland**
<http://www.vci.ie/index.cfm/loc/12> - click on [Code of Professional Conduct](#)
3. **A Guide to Ethical Conduct and Behaviour. The Medical Council. 6th Edition 2004**
http://www.medicalcouncil.ie/_fileupload/standards/Ethical_Guide_6th_Edition.pdf

PROCEDURE

Relevant Information Exchange: WHEN?

Veterinary → Medical

- (1) When there is a clinical suspicion of a zoonotic disease in an animal, or animals, that poses a reasonable risk of disease in humans either directly (contact) or indirectly (via food, water, environment) given the circumstances under which the animal(s) is (are) being kept or has (have) been kept and to the dispersal of the animal(s) or its product into the food chain.
or
- (2) When there is a laboratory finding indicating the presence of a zoonotic agent that poses a reasonable risk of causing disease in humans.
or
- (3) Where a practitioner or laboratory notices an unusual pattern of findings, whether by numbers or geography, that gives rise to a possible increased risk of zoonotic disease in humans.

Medical → Veterinary

- (1) When zoonotic diseases in humans, either suspected or confirmed, indicates that veterinary awareness of such information may lead to the prevention of further spread of such disease. This may apply to sporadic cases, outbreaks or changes in pattern of zoonotic disease in humans.

Relevant Information Exchange: BETWEEN WHO?

Veterinary → Medical

Following a risk assessment, and consultation with appropriate colleagues as deemed necessary, the relevant public health medical practitioner (*i.e.* Medical Officer of Health (Director of Public Health) or designate) should be informed.

Medical → Veterinary

Following a risk assessment, and consultation with appropriate colleagues as deemed necessary, the relevant official veterinarian (*i.e.* Local Authority Veterinary Officer, State Veterinary Laboratory Officer, District Veterinary Inspector or State Veterinary Public Health Officer) should be informed.

Relevant Information Exchange: PRINCIPLES
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Confidentiality

Veterinary Practitioners should refer to the Veterinary Council of Ireland's 'Code of Professional Conduct' (Chap. 5: The Veterinary Practitioner and Clients Interests: Professional Confidentiality p.24 / *Date of issue 09/09/98*)².

Medical Practitioners should refer to the Medical Council of Ireland's 'A Guide to Ethical Conduct and Behaviour' 6th Ed 2004 (Section E: Confidentiality & Consent p.29)³.

Inform Patient / Case / Client / Customer

The patient / case / client / customer concerned should be informed that such information needs to be shared in the interests of public health and their agreement sought.

Need to Know

The 'need to know' principle should be strictly observed in relation to patients/cases and to clients/customers. Patient privacy should be safeguarded. Relevant patient information should be shared on a confidential basis between professional colleagues. The principle similarly applies to client/customer information. The nature of the food /animal sectors is that they are very vulnerable to misleading media reports. Whilst protecting human health is of paramount importance, collateral damage to businesses and livelihoods should be avoided.

Timeliness

All information to be shared should be timely having due regard to the level of urgency involved.

APPENDIX A: Relevant Legislation

Note: Most recent relevant legislation at time of Guideline production

Infectious Diseases Regulations 1981 (S.I. No. 390 of 1981)

Link: <http://www.irishstatutebook.ie/1981/en/si/0390.html> Irish Statute Book

11. On becoming aware, whether from a notification or intimation under these Regulations or otherwise, of a case or a suspected case of an infectious disease or of a probable source of infection with such disease, a medical officer of health, or a health officer on the advice of a medical officer of health, shall make such enquiries and take such steps as are necessary or desirable for investigating the nature and source of such infection, for preventing the spread of such infection and for removing conditions favourable to such infection.

APPENDIX B: Relevant Legislation

Note: Most recent relevant legislation at time of Guideline production

European Communities (Monitoring of Zoonoses) Regulations 2004 (S.I. 154/2004)

Link: <http://www.irishstatutebook.ie/2004/en/si/0154.html> Irish Statute Book

- The purpose of these regulations is to implement Directive 2003/99/EC on the monitoring of zoonoses and zoonotic agents. The regulations also provide for the authorisation of officers to investigate foodborne outbreaks of illness and for the approval of laboratories to conduct tests.
- “Minister” means the Minister for Agriculture and Food
- “Isolate” means a zoonotic agent
- “Competent Authority” means an organisation designated by the Minister under Article 3.2 of the Directive
- “Authorised Officer” means
 - (a) a person who is appointed under Regulation 4 (S.I.154/2004)
 - (b) an authorised officer appointed under Section 17(a) of the Disease of Animals Act 1966 to 2001
 - (c) an official appointed under Section 49 of FSAI Act 1998

Paragraph 3.3 (S.I. 154/2004) Preservation of results, foodstuffs and samples.

A competent authority may determine the format in which results referred to in paragraph (1) must be kept and communicated or the manner in which the isolates and samples referred to in paragraph (1) and (2) must be preserved, delivered or provided.

Paragraph 5 (S.I. 154/2004) National Reference Laboratories.

The Minister designates the Central Veterinary Research Laboratory and the Central Meat Control Laboratory of the Department of Agriculture and Food as national reference laboratories for the purposes of these regulations and the directive.

Paragraph 6.1 (S.I. 154/2004) Approval of Laboratories.

The Minister may approve a laboratory for the purposes of these Regulations and attach such conditions as the Minister considers necessary at the time of the approval or at any time subsequently.

(e.g. Cork County Council Veterinary Food Safety Laboratory)

Paragraph 7 (S.I. 154/2004) Information received in the course of an investigation.

Notwithstanding national legislation on the holding and passing of information, a competent authority involved in an investigation under Article 8(2) of the directive may pass information obtained in the course of the said investigation to any person mentioned in Article 8 of the directive and to another competent authority in the State.

Other relevant legislation

Directive 2003/99/EC Paragraph 2

Link: <http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2003:325:0031:0040:EN:PDF>
Official Journal of the European Union

(2) The protection of human health against diseases and infections transmissible directly or indirectly between animals and humans (zoonoses) is of paramount importance.

REGULATION (EC) No 178/2002 of 28 January 2002

Link: http://eur-lex.europa.eu/pri/en/oj/dat/2002/l_031/l_03120020201en00010024.pdf

Official Journal of the European Union

In those specific circumstances where a risk to life or health exists but scientific uncertainty persists, the precautionary principle provides a mechanism for determining risk management measures or other actions in order to ensure the high level of health protection chosen in the Community.

- Competent authorities may only appoint Official Veterinary Surgeons (OVS) with proven competencies as required by **Chapter VI A 1.2. of Reg. (EC) No 854/2004** and in particular in the following disciplines : information and communication technology as related to VPH, diagnostic epidemiology, risk analysis, prevention and control of food borne hazards relevant to human health, monitoring and surveillance systems, population dynamics of infection and intoxication. All of the above imply a statutory requirement for information sharing relevant to the protection of public health.

Link:

[http://europa.eu.int/eur-](http://europa.eu.int/eur-lex/lex/LexUriServ/site/en/oj/2004/l_226/l_22620040625en00220082.pdf)

[lex/lex/LexUriServ/site/en/oj/2004/l_226/l_22620040625en00220082.pdf](http://europa.eu.int/eur-lex/lex/LexUriServ/site/en/oj/2004/l_226/l_22620040625en00220082.pdf)

European Union's portal web site

- **Directive 2003/99/EC paragraph** 20 states that “to ensure that information collected on zoonoses and zoonotic agents can be used effectively; appropriate rules should be laid down concerning the exchange of all relevant information”.

Link:

<http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2003:325:0031:0040:EN:PDF>

Official Journal of the European Union

- **Article 4, 1. of Directive 2003/99/ EC** states that “member states shall collect relevant and comparable data in order to identify and characterize hazards, to assess exposures and to characterize risks related to zoonoses or zoonotic agents”.
- **Article 4, 5.(f) of same Directive** requires detailed rules in relation to “frequency of reporting, including guidelines for reporting between local, regional and central authorities”.
- **Annex 1, Part A, II, 3.(b) of Reg (EC) 852/2004** requires that primary producers are to comply with “measures relating to animal health and welfare and plant health that have implications for human health including programs for the monitoring and control of zoonoses and zoonotic agents”. With reference to the above, **Article 5, 2. (e) of Reg(EC) 882/2004** (on Official Controls) states that “if the results of the controls indicate non-compliance or point to the likelihood of non-compliance, the control body shall immediately inform the competent authority”.

Link:

<http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2004:139:0001:0054:EN:PDF>

http://eur-lex.europa.eu/LexUriServ/site/en/oj/2004/l_191/l_19120040528en00010052.pdf

Official Journal of the European Union

- **Article 3, 3. of Directive 2003/99/ EC** states that “ each Member State shall ensure that effective and continuous cooperation based on free exchange of general information and, where necessary, of specific data is established between the competent authority or authorities designated for the purposes of the Directive”.