
PROPOSED DECISION TO STOP BSE TESTING OF HEALTHY CATTLE SLAUGHTERED FOR HUMAN CONSUMPTION

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1 SUMMARY

- 1.1 The current system for monitoring Bovine Spongiform Encephalopathy (BSE) in cattle includes BSE testing of all healthy cattle aged over 72 months slaughtered for human consumption. The European Commission is proposing to allow qualifying Member States (MS), including the UK, to decide to stop testing these cattle.
- 1.2 The Board is recommended to **agree** to advise Ministers that
- it would be acceptable on grounds of negligible risk to consumers and proportionality to stop BSE testing of all healthy cattle aged over 72 months slaughtered for human consumption in the UK.

2 INTRODUCTION

- 2.1 Two main BSE controls work together to eradicate BSE in cattle and protect consumers:
- the ban on feeding animal protein to farmed animals prevents the spread of BSE to animals through feed;
 - removing specified risk material (SRM) – the most risky parts of animals – at slaughter protects consumers from risk from food;
- these controls remain in force.
- 2.2 The main purpose of BSE testing is to monitor the level of BSE in cattle over time and thereby check on the continued effectiveness of BSE controls. Currently EU legislation requires 25 MS (EU-25), i.e. all except Romania and Bulgaria, to BSE test all “risk cattle”¹ aged over 48 months and all healthy cattle slaughtered for human consumption aged over 72 months (although they may opt to test younger cattle). The relevant legislation² also states that, from 1 January 2013, these EU-25 MS may decide to test only a minimum annual sample of healthy cattle slaughtered for human consumption aged over 72 months (O72M). The current UK monitoring programme is summarised at Annexe A.

¹ i.e. cattle sent for emergency slaughter or with observations at ante mortem inspection or cattle that have died or been killed other than for human consumption (fallen stock)

² Commission Decision 2009/719/EC

- 2.3 The main protection of consumers from exposure to BSE is provided by the SRM controls, which are estimated to remove almost all of the infectivity from an infected animal. In addition, cattle born or reared in the UK before the reinforced feed ban came into force in August 1996 remain permanently excluded from the food supply.
- 2.4 In 1992, at the peak of the UK BSE epidemic, some 37,000 BSE cases were identified in UK cattle. The numbers of UK cases in 2011 and up to the beginning of November in 2012 were 7 and 2, all identified by testing of fallen stock.
- 2.5 Policy, budgetary and operational responsibility for BSE monitoring in the UK is held by the Department for Environment, Food and Rural Affairs (Defra) and the rural affairs departments in the devolved administrations. The FSA Board has been consulted previously on whether the UK should implement a lifting of the age threshold for BSE testing of healthy cattle slaughtered for human consumption. At its meeting of May 2011, the Board agreed that it would be acceptable to raise this age from 48 months to 72 months from July 2011, and that it would be acceptable in principle to move to testing these O72M cattle on a sample basis from January 2013³.

3 STRATEGIC AIMS

- 3.1 The consideration of whether to reduce the current level of BSE testing should take account of the positive contribution this would make towards enabling resources to be deployed where the risk is highest and, as such, to the Agency's strategic outcome of risk-based and proportionate regulation. As the main food safety controls for BSE will remain in place, there is no impact on the strategic outcome that foods produced or sold in the UK are safe to eat.

4 EVIDENCE

EFSA Report on minimum sample size to test

- 4.1 In October 2012, the European Food Safety Authority (EFSA) published a scientific report⁴ to assist consideration of the minimum sample size for BSE testing O72M cattle. A summary of the Report is at Annexe B.
- 4.2 The Report provides estimates of the size of the minimum annual sample in healthy slaughtered O72M cattle that would allow the detection of at least 1 BSE case per 100,000 in the adult (i.e. older than 24 months of age) cattle population of MS with 95% confidence. This level of sensitivity meets the international

³ The Board had previously agreed in December 2008 to raising the age threshold for BSE testing of healthy cattle slaughtered in the UK from 30 months to 48 months.

⁴ [Scientific and technical assistance on the minimum sample size to test should an annual BSE statistical testing regime be authorised in healthy slaughtered cattle](#)

standard for BSE monitoring systems established by the World Organisation for Animal Health (OIE). The modelling estimates indicate that, for the EU-25 MS considered as a whole, if no healthy slaughtered animals are tested, the EU would still comfortably meet the OIE standard through testing of risk cattle alone.

Previous advice from the Spongiform Encephalopathy Advisory Committee (SEAC)

- 4.3 The EFSA Report does not provide any assessment of the risk associated with reducing the BSE testing of healthy slaughtered cattle. However, previous advice from SEAC of March 2011, in relation to the raising of the age threshold for BSE testing of healthy cattle from 48 to 72 months, remains relevant. SEAC advised that in the short-term an insignificant additional risk to human health would result from raising the age for testing healthy cattle from 48 to 72 months or equally from stopping testing of these cattle altogether.
- 4.4 SEAC noted, however, that this conclusion is valid only if the prevalence of BSE in the UK cattle population remains at or below its current level and therefore that its future validity depends critically on the ability of BSE surveillance to ensure early detection of any re-emerging epidemic. SEAC also noted that any change in the incidence of BSE is most likely to be detected in fallen stock and casualty animals (i.e. risk cattle) and concluded that, provided that surveillance of these animals is sufficient to provide the necessary information about disease incidence and prevalence, the additional risk to consumers from reducing testing of healthy cattle will remain small.
- 4.5 The full text of the SEAC advice is at Annexe C.

5 THE COMMISSION'S PROPOSAL

- 5.1 Following the EFSA Report, the Commission is now proposing to allow the EU-25 MS to decide to stop testing O72M healthy slaughtered cattle entirely. The monitoring requirements for risk cattle will remain unchanged (see table at Annexe D).
- 5.2 The justification for this step provided in the Commission's draft proposal is the decreasing trend of BSE in the EU and the confirmation from EFSA that in the EU-25 MS the testing of risk cattle only would enable the BSE monitoring system easily to meet the international standard.
- 5.3 The first EU TSE Working Group discussion of the proposal was held on 21 November 2012. It emerged then that, for legal procedural reasons, the earliest date the proposed change could be adopted is 1 March 2013.

6 DISCUSSION

Sensitivity of the BSE monitoring system

- 6.1 The main purpose of BSE testing is to monitor the “classical” feed-borne BSE epidemic. There has been a constant decline in the number of detected BSE cases throughout EU-25 because of the implementation of the BSE control measures. Any re-emergence of Classical BSE would be unexpected while effective feed controls remain in place. However it is important that the monitoring system is sufficiently sensitive to enable any unexpected change in the level of BSE in cattle to be identified so that any breakdown in the BSE controls can be identified and corrected without undue delay.
- 6.2 The EFSA Report concludes that stopping the testing of healthy O72M slaughtered cattle would lower the sensitivity of the monitoring system to detect any re-emergence of Classical BSE. A key question in considering the proposed change is therefore whether this reduction in sensitivity would impact in any significant way on the ability of the monitoring system to detect any change in the level of Classical BSE.
- 6.3 In practice, in the UK, data on BSE prevalence from the Animal Health and Veterinary Laboratories Agency (AHVLA)’s Great Britain-specific BSE model are kept under scrutiny. AHVLA advise that they run the model annually to ensure that the ongoing decline in Classical BSE is continuing within model estimates. Such estimates do not rely on an annual accumulation model breaching a statistically significant threshold (for example, that presented in the EFSA Report). AHVLA consider that this approach can be effectively applied solely to the testing of risk cattle for future estimates of Classical BSE prevalence.

Impact on consumer protection

- 6.4 EU rules require all parts of any bovine animal slaughtered for human consumption that tests positive for BSE to be destroyed. A total of only 12 healthy animals slaughtered for human consumption have tested positive for BSE in the whole of the UK since November 2005⁵ out of some 3.3 million cattle tested (see Annexe E). Furthermore, no healthy bovine slaughtered for human consumption has tested positive for BSE in GB since November 2008 (or since November 2009 in Northern Ireland (NI)). The added protection to consumers provided by testing of healthy cattle, if any, is therefore negligible.

⁵ when cattle aged over 30 months were re-admitted to the food supply subject to BSE testing, following the ending of the previous over thirty months rule

Ability to monitor other forms of BSE in cattle

- 6.5 The current method for BSE testing is designed to maximise the sensitivity of the monitoring for Classical BSE (see Annexe F). In addition to Classical BSE, small numbers of two forms of atypical BSE (H and L types) have also been reported in a number of EU and other countries worldwide, including the UK, almost exclusively in animals aged over 8 years⁶.
- 6.6 The current monitoring results for atypical BSE do not show any trend. However, the EFSA Report indicates that, taking France as an example, if there were any increase in detectable prevalence of atypical BSE, it would take longer to detect it if testing of healthy slaughtered cattle were stopped. All 8 atypical cases identified in the UK so far were in fallen stock, which would continue to be tested even if all testing of healthy cattle were stopped.
- 6.7 The impact of stopping testing of healthy cattle on the ability of the monitoring system to detect the emergence of a hypothetical new type of TSE disease in cattle is unknown. Detection of new TSE disease forms or emerging strains relies on “passive” surveillance, which starts from field clinical recognition of unusual neurological disease followed by post mortem examination. The arrangements for passive surveillance in the UK are not affected by the proposed change to the testing requirements.

7 IMPACT

- 7.1 IN GB the costs of BSE testing healthy cattle are paid for by the abattoir. The annual savings in these costs to the GB abattoir sector that would result from stopping the testing of these cattle is estimated to total some £3.3 million. The costs of supervision of the BSE testing controls in abattoirs by FSA Operations staff in GB are paid for by Defra and the devolved administrations. Stopping the testing would also produce savings to Government in relation to these costs totalling some £780,000 annually.
- 7.2 In NI, the costs of sampling are paid for by the abattoir and the laboratory costs of the test are paid for by the Department of Agriculture and Rural Development (DARD), which also supervises the testing controls in abattoirs. Stopping testing of healthy cattle in NI is estimated to produce annual savings in these costs to the abattoir sector of some £190,000 and to DARD of £520,000.
- 7.3 The proposed change in the EU rules to allow EU-25 MS to cease BSE testing of healthy cattle would not prevent the UK from opting to continue to test these cattle. However, doing so would go beyond the minimum required by the EU rules and therefore be regarded as “gold-plating”. Under the “One-In, Two-Out” system for reducing the regulatory burden on business that will apply from 1

⁶ the origin of these atypical forms of BSE is unknown and may not be feed-related

January 2013, Departments would be required to find compensatory savings to business of twice the costs of continuing the testing.

8 CONSULTATION

- 8.1 A joint Defra, FSA and Welsh Government consultation on the proposal has been issued. Parallel joint Scottish Government/FSA and DARD/FSA consultations are taking place in Scotland and NI. A summary of responses will be made available to the Board at the meeting. Views of UK CMOs are also being sought.

9 RESOURCE IMPLICATIONS

- 9.1 As noted above, stopping testing of healthy cattle would reduce the annual costs of FSA supervision of the BSE testing controls by around £780,000.

10 CONSUMER ENGAGEMENT

- 10.1 In order to explore consumers' views about proposals to reduce BSE testing, a series of ten workshops, each comprising approximately 10 participants, has been held. The workshops were situated in eight locations across the UK selected to include a mix of urban and rural populations.
- 10.2 After discussion and deliberation, there was more concern amongst participants about the UK beef industry being disadvantaged by not accepting the changes, rather than any health risks. The reaction overall was that, as long as consumers had reassurance that the two main controls (i.e. feed and SRM removal) remained firmly intact and that the FSA would act swiftly should BSE show any sign of resurfacing, a decrease in testing was generally acceptable.
- 10.3 A full report of the consumer engagement work will be made available before the Board's meeting.

11 SUSTAINABILITY ISSUES

- 11.1 Stopping BSE testing of healthy cattle would provide an economic benefit to the meat industry, in terms of a reduction in the costs of producing meat, which could potentially result in a small increase in the price producers receive for their animals or profit to processors (a reduction in the price of meat to consumers would be unlikely). There would also be a saving in the physical and energy resource costs of the biochemical testing that would no longer be needed.

12 CONCLUSIONS AND RECOMMENDATION

- 12.1 The current BSE testing system is designed to monitor Classical BSE. At the current level of risk, there is no need to test healthy cattle as testing of risk cattle provides sufficient data for this purpose.

- 12.2 Should there be a re-emergence of Classical BSE, then stopping the testing of healthy cattle would reduce the sensitivity of the monitoring system to detect it. However, a re-emergence of BSE, which has been in continuous steep decline since the peak of the epidemic and is now at very low levels, is not expected while effective BSE controls (feed ban and SRM removal) remain in force. Moreover, the continued testing of risk cattle only would maintain effective monitoring of the sub-population of cattle in which BSE-positive animals are most likely to occur. Should there be any indication from the results of monitoring of risk cattle that prevalence of BSE may have increased, then testing of healthy cattle could be resumed.
- 12.3 The food supply is protected by SRM controls and testing of healthy cattle provides no or negligible additional risk reduction.
- 12.4 While BSE testing has enabled small numbers of atypical forms of BSE to be reported, so far all in fallen stock which will continue to be tested, reporting of atypical BSE is currently not statutorily required and the performance of the current monitoring system in detecting of animals affected by atypical BSE is unknown. The ability to detect the emergence of a hypothetical new type of TSE disease in cattle depends on the general surveillance of field cases rather than the current testing system.
- 12.5 A risk management decision is required as to whether the cost of continuing to test healthy cattle is justified by the possible potential benefit of earlier detection of a re-emergence of Classical BSE, should that occur. On balance, given that effective BSE controls will remain in place, it is considered that the costs of continued BSE testing of healthy cattle outweigh the benefits. This conclusion would however need to be reviewed should changes to the current BSE controls, and in particular to the feed ban, be made.
- 12.6 The Board is therefore recommended to **agree** to advise Ministers that
- it would be acceptable on grounds of negligible risk to consumers and proportionality to stop BSE testing of all healthy cattle aged over 72 months slaughtered for human consumption in the UK.

BSE Testing in the UK in 2011

The following table summarises the current testing programme in the UK.

Category	Age threshold	Number tested in 2011	Number BSE-positive in 2011
Cattle suspected of being affected with BSE	None	9	0
BSE culling (feed cohorts, offspring)	None	36	0
Fallen cattle which died or were killed other than for human consumption	Over 48 months	157,235	7
Emergency slaughtered cattle for human consumption	Over 48 months	3,062	0
Cattle with observations at ante-mortem inspection slaughtered for human consumption	Over 48 months	1,170	0
Healthy slaughtered cattle	Over 48 months (over 72 months from 4 July)	484,371	0
Home kills	Over 48 months (over 72 months from 4 July)	17	0
Healthy slaughtered cattle non-EU 17 ⁷ (non-EU 25 from July 2011)	Over 30 months	52	0
Fallen stock non-EU 17 (non-EU 25 from July 2011)	Over 24 months	17	0
Total		645,969	7

⁷ Belgium, Denmark, Germany, Ireland, Greece, Spain, France, Italy, Cyprus, Luxembourg, Netherlands, Austria, Portugal, Slovenia, Finland, Sweden, United Kingdom

Annexe B

Note on the EFSA Report on the minimum sample size to test should an annual BSE statistical regime be authorised in healthy slaughtered cattle

1. EFSA were asked to:

- (i) propose a minimum annual sample size in healthy slaughtered cattle above 72 months of age that would allow the detection of BSE with a yearly design prevalence of at least 1 case per 100,000 in the adult population (i.e. older than 24 months of age) of the member states (MS), with 95% confidence;
- (ii) advise on the added value of this minimum sample to the overall surveillance programme in terms of monitoring the trend of (a) Classical BSE, (b) Atypical BSE and (c) the emergence of a hypothetical new type of cattle TSE.

Note: Under the World Organisation for Animal Health (OIE) Terrestrial Code, which sets out standards for safe international trade in terrestrial animals and their products, a country must, among other requirements, carry out *Type A surveillance* to be classed as “controlled risk” for BSE. Type A surveillance will allow the detection of BSE around a design prevalence of at least one case per 100,000 in the adult cattle population, at a confidence level of 95%.

2. EFSA used a model to evaluate the design prevalence and sensitivity of different systems for monitoring BSE.

3. On the first part of the mandate, EFSA concluded that, for the EU-25 as a whole:

- the current BSE monitoring regime enables the detection of one BSE case in 7,177,596 adult cattle with 95% confidence (1 in 678,075 in UK) (note: this is prevalence of infected animals detectable by the BSE test, which is assumed to be only after 97% of the incubation period);
- if no testing of healthy slaughter cattle took place, the BSE monitoring regime (i.e. testing of risk cattle) would enable detection of one BSE case in 5,355,627 adult cattle with 95% confidence;
- therefore, no healthy slaughtered animals need to be tested in order to meet a design prevalence of 1 detectable case in 100 000 adult cattle.

When looking at individual MS, EFSA found that:

- in eight MS (including UK) no healthy slaughter cattle need to be tested in order to detect 1 BSE case in 100 000 adult cattle with 95% confidence (no estimates are given of the design prevalence of surveillance in these MS if testing of cattle were stopped);

- in five MS the testing of a fraction of healthy slaughtered cattle aged over 72 months would be sufficient to meet a 1 in 100 000 design prevalence with 95% confidence;
- in twelve MS the number of tested animals in 2011 (i.e. including all the healthy slaughtered cattle aged over 72 months) was insufficient to meet a 1 in 100 000 design prevalence with 95% confidence.

4. Predicted numbers of BSE cases missed should testing of healthy slaughter cattle cease were 7.2 [95% confidence interval (CI) 3.7, 10.67] for EU25 and for UK 5.2 [1.5, 109.89]. (Note that for the UK the predicted numbers of test positives in healthy slaughter cattle are higher than those actually observed – see paragraph 9 below and paragraph 6.5 of the main paper.)

5. For the second part of the mandate, for both the current testing regime and for scenarios of no and reduced testing of healthy slaughter cattle, the estimated times to detect a hypothetical annual 10% increase in BSE were predicted, given a re-emergence starting in 2011. It was assumed that detection would occur when the number of predicted cases exceeds the upper confidence interval of the predicted cases for 2011.

6. The outcome indicates that, for classical BSE, stopping or reducing the testing of healthy slaughtered cattle would somewhat reduce the sensitivity of the surveillance system to detect a re-emergence (i.e. the supposed annual 10% increase):

- for EU25 as a whole, if testing of healthy cattle were stopped, the time taken to detect a re-emergence of BSE would increase from 6 to 9 years
- in those MS where no healthy slaughter cattle need be tested in order to meet a 1 in 100 000 design prevalence, if no healthy slaughter cattle were tested, the time taken to detect a re-emergence of BSE would increase compared to the current regime by between 1 and 8 extra years depending on the MS (the increase in UK would be from 9 to 17 years)
- in those MS where testing of healthy slaughter cattle could be reduced to meet the proposed design prevalence, if only the number of healthy cattle needed to meet the design prevalence were tested, the time taken to detect a re-emergence of BSE would increase compared to the current regime by between 1 and 11 extra years depending on the MS
- in those MS where the number of tested animals was insufficient to meet the proposed design prevalence, if no healthy slaughter cattle were tested, the time taken to detect a re-emergence of BSE would increase compared to the current regime by between 2 and 25 extra years depending on the MS.

7. The Report concludes that, in the event of a re-emergence of Classical BSE, stopping the testing of healthy slaughtered cattle would lower the sensitivity of its detection by the monitoring system.

8. No comparable conclusion could be drawn for atypical BSE, for which there is insufficient data (i.e. number of detected cases annually) for EU25 as a whole to estimate the impact of the ceasing to test healthy slaughtered animals. However, using France as an example (a country with a large population and sufficient number of detected atypical cases), compared to the current testing regime it would take an extra 13 years to detect an annual 10% increase of detectable prevalence of Atypical BSE in the tested population should testing of healthy slaughtered cattle be stopped.

9. EFSA did not answer the request for advice on the added value of the minimum sample to the overall surveillance programme in terms of monitoring the emergence of a hypothetical new type of cattle TSE, as the the necessary simulation studies could not be carried out in the time available.

Note on the model used by EFSA

9. The model used, C-TSEMM, was purpose-built for EFSA by the AHVLA. AHVLA advise that C-TSEMM was built as a generic model to yield the best-fitting results to observed data for the majority of MS. While the C-TSEMM results for the UK fit the observed UK data well overall, i.e. when the numbers of BSE-positive cattle in all the different “exit streams” in which adult cattle are removed from the population, such as healthy slaughter, fallen stock etc., are combined, the results are not consistent with the observed UK data for the individual exit streams. Notably, C-TSEMM predicts a higher number of test-positives in the healthy slaughter stream for the most recent years than those observed.

POSITION STATEMENT ON THE REQUIREMENTS FOR BSE TESTING OF HEALTHY CATTLE

SEAC was asked by the Food Standards Agency to consider the change in risk to consumers from exposure to BSE that would result if (a) from 2011, the age threshold for BSE testing healthy slaughter cattle was raised from 48 to 72 months and (b) BSE testing of healthy slaughter cattle was to stop altogether.

FSA presented to SEAC an analysis carried out by the Veterinary Laboratories Agency (VLA) assessing the impact of reducing the level of BSE testing of healthy cattle slaughtered for human consumption, using a mathematical model developed at VLA. The model predicts the number of additional infected cattle that would be consumed if monitoring is reduced and estimates the consequent impact on the amount of infectivity entering the food supply.

SEAC advises that in the short-term there is an insignificant additional risk to human health that would result from raising the age for healthy slaughter cattle from 48 to 72 months. The VLA modelling results concur with the low numbers of cattle now being identified with BSE. However, SEAC notes that this conclusion is only valid if the prevalence of BSE in the UK cattle population remains at or decreases from its current value. The current and future validity of this analysis therefore depends critically on the nature and quality of BSE surveillance within the cattle population, and in particular its capacity to ensure the early detection of any re-emerging epidemic. This assessment would equally apply to any proposal to cease altogether the testing of healthy slaughter cattle. SEAC considers that any change in the incidence of BSE is most likely to be detected in fallen stock and casualty animals because of the currently higher likelihood of detecting BSE in these sub-populations. Provided that surveillance of fallen stock and casualty animals is sufficient to provide the necessary information about disease incidence and prevalence, the additional risk to consumers of reducing testing of healthy cattle will remain small.

In addition, SEAC offers the following observations that the FSA and other interested Government Departments might wish to consider:

- (a) Surveillance is the only effective means of monitoring changes in the incidence or prevalence of BSE. It is therefore important that current surveillance protocols are kept under review, to ensure that they are capable of detecting an increase in

BSE prevalence both in an appropriate time frame and at a suitable sensitivity to detect an increase in prevalence that would warrant reintroduction of testing healthy slaughtered cattle.

- (b) It is not clear that testing a sample of healthy slaughter cattle older than 72 months would provide much useful information: this age group might be sub-optimal. The arguments for random testing of healthy slaughter cattle at this age, compared to other ages, should be considered carefully, taking account of the purpose of this sampling, the sample size and test sensitivity (by incubation period) amongst other considerations.
- (c) UK data should continue to be used to demonstrate a decline in the prevalence of BSE in the UK herd, rather than relying on EU-wide figures.
- (d) It is instructive to use the VLA model to examine a range of hypothetical rates of increase in BSE infection and the ability of current surveillance measures to detect the change, and this should be repeated as necessary when significant changes to current practices are envisaged.
- (e) Changing one BSE control measure can have knock-on effects on other control measures and it is important that the possibility of such interactions is fully taken into account when a proposal such as this is considered.

30 MARCH 2011

Annexe D

BSE Testing requirements for cattle slaughtered in the UK by country of birth

Country of birth	Eartag Country codes	Current BSE testing age for Healthy slaughter cattle	If adopted, BSE testing of healthy slaughter cattle from 1 January 2013	Unchanged	
				for Emergency slaughter and "sick at ante mortem" (fit for human consumption)	for Fallen stock (not fit for human consumption)
Austria	AT	Over 72 months	No testing required	Over 48 months	Over 48 months
Belgium	BE				
Cyprus	CY				
Czech Republic	CZ				
Denmark	DK				
Estonia	EE				
Finland	FI				
France	FR				
Germany	DE				
Greece	EL				
Hungary	HU				
Ireland	IE				
Italy	IT				
Latvia	LV				
Lithuania	LT				
Luxemburg	LU				
Malta	MT				
Netherlands	NL				
Poland	PL				
Portugal	PT				
Slovak Republic	SK				
Slovenia	SI				
Spain	ES				
Sweden	SE				
UK	UK				
Channel Islands and Isle of Man	UK				
Bulgaria	BG	Over 30 months	Over 30 months	Over 24 months	Over 24 months
Romania	RO				
All non-EU countries	UK (if not slaughtered within 20 days of being imported)	Over 30 months	Over 30 months	Over 24 months	Over 24 months

Annexe E

BSE test positive results in healthy cattle slaughtered for human consumption in UK since November 2005

By the end of October 2012, around 3.3 million cattle slaughtered for human consumption (2.73 million in Great Britain and 0.55 million in Northern Ireland) had been tested for BSE in the period since November 2005, when BSE testing of cattle slaughtered for human consumption was introduced in the UK. Of these, 12 (10 in GB, 2 in NI) have tested positive for BSE (see below). All were subsequently confirmed as BSE cases.

Great Britain

	Date of birth	Date of death	Age at death (months)
1.	18/02/1997	28/07/2006	113
2.	10/09/1999	01/09/2006	83
3.	12/08/2002	06/09/2006	48
4.	27/07/2000	27/04/2007	81
5.	05/04/1999	28/06/2007	98
6.	21/09/1998	04/09/2007	107
7.	30/09/1997	04/02/2008	124
8.	11/01/2003	03/07/2008	65
9.	24/11/1999	08/07/2008	103
10.	26/09/1996	13/11/2008	145

Northern Ireland

	Date of birth	Date of death	Age at death (months)
1.	unknown	16/01/2007	unknown
2.	08/05/1997	4/11/2009	149

Ability of BSE test to detect different forms of BSE

1. Testing is carried out using approved commercial diagnostic tests for the disease-specific, abnormal form of the prion protein (PrP). A sample of the brainstem of the animal at the level of the obex is required to be used for the test. Studies have established that in Classical BSE abnormal PrP deposition in the brainstem first occurs at the obex level, where a substantial amount of this protein accumulates during the late incubation phase. Consequently, as described in the EFSA Report, targeting the obex for testing is considered to be the most sensitive approach for detecting cases of Classical BSE.
2. In relation to the two forms of atypical BSE (H and L types) that have been reported, the EFSA Report points out that, while these conditions are detectable by the current approved tests, a full evaluation of their performance in detecting atypical BSE cases has not been carried out and the suitability of the obex as the target tissue for early and sensitive detection of these conditions remains largely unknown.
3. The impact of stopping testing of healthy slaughtered cattle on the ability of the monitoring system to detect the emergence of a hypothetical new type of TSE disease in cattle is unknown, since the characteristics of any such new TSE disease and whether the current testing system would detect it are necessarily unknown. By definition, novel TSEs with forms of PrP substantially different from the currently-recognised forms may evade the existing tests.