

AWI OJD Information Forum

The Grace Hotel, Sydney - 15th November 2012

Notes from the Forum

Welcome

Wal Merriman – Chairman AWI

AWI Chairman Wal Merriman welcome to a forum for information and discussion on the pending changes to OJD control. Wal extended apologies to MLA for the clash with their AGM and thanks to WoolProducers Australia and Sheepmeats Council of Australia for hearing the thoughts of the whole of industry.

AWI hasn't done OJD research because with risk based trading with vaccination there was no market failure, however Wal suggested that is now proved to be incorrect and AWI is here to carry out those research requests.

Purpose of the forum to look at where have we been, where are we now, where are we heading and what can AWI do to help.

History of OJD incidence of the disease

Don Lawson - producer

My purpose here today is to tell the truth and I am on public record as stating that the Johne's program is the greatest scientific fraud ever perpetrated on the livestock industry.

So far not one person has challenged this statement of fact.

As a beef industry seed stock producer I am pleased to accept the invitation of AWI to address you today as my genetics in fact go back to the Taylors of Winton and Valleyfield of 1824 – which I believe to be the oldest continuous merino family operation in Australia.

I think we can learn from other industries particularly the dairy industry where Johne's is a management issue and we can thank the South Australian's for that. The SA minister for Agriculture realized the huge potential for dairying and decided for form a committee for dairying and invited the 7 top farmers and all got Johne's so they decided to manage the disease. 70% of the dairy herds in South East Australia would have BJD if everyone tested yet dairy products are the largest export products through the port of Melbourne and Victoria is the largest exporter of rural products in Australia.

Although born in Melbourne, I have always been involved with farming. After school I started doing Ag Science at Melbourne University. I then transferred to Lincoln in NZ where before you could graduate you had to have industry experience. This does not occur in Australia there is not one course where farm experience is compulsory and they have no understanding of what it is to run a farm business, which is one of the reasons the Johne's program has resulted in farmers committing suicide as these vets have little or no empathy with running a farming business.

We started what is now Lawsons Angus in 1969 with 12 heifers on a rabbit infested block. My 2 sons now sell beef genetics to all states of Australia, New Zealand, Falkland Islands, North America, Britain and hopefully soon South America. Russia has become a major client. The Johne's regulations and the failed Market Assurance Program are the biggest threats to our business and they have and continue to cost us a fortune. In beef, only 6% of the 11,000 registered breeders participate in the MAP program. I believe in the sheep it might be 400 and 15% of sheep producers are in the MPA program.

The mentality of those behind the MAP program in my view is bordering on criminal, this is a fraud perpetrated on us farmers.

Johne's disease was first gazetted in Victoria in the 1920's. It remained a manageable disease until 1995 when a small group in Swifts Creek found that Johne's was causing a problem. The area has a very difficult climate capable of causing stress to animals at certain times of the year. The group approached the VFF as they thought they could relatively easily eradicate Johne's. However, the word spread to Minister McNamara's office.

McNamara was holding a meeting one night in his Benalla office about water. At the end of the meeting he informed the farmers who were there that he wanted to close the Benalla, Hamilton and Bairnsdale vet labs down and if they saw that he didn't get grief from the VFF, he would see they got \$1 million to eradicate Johne's. We have an apology from McNamara on an ABC tape but no apology from Government vets and that's not good enough in my view.

Dr Andrew Turner, then Victoria's chief vet had advised McNamara that there was a small window of opportunity to eradicate Johne's and McNamara acted on this advice from his chief vet and so the ill-fated eradication and destocking program started in late 1996 early 1997. 10,000 sheep went out of the Yea district alone in a matter of weeks and the fear of God was put into the farming community.

At that time Professor Andrew Vizard saw McNamara and Turner and told them what they were up to was not on and they should be looking at an exit strategy then and there – so they showed him the door.

Today is about finding an exit strategy from the current flawed programs that rely on flawed science and lines on a map.

We lived in fear particularly as sheep were found to have BJD and cattle OJD. It wasn't until I visited Dr Judith Slocombe at Gribbles Lab in Melbourne and was told we were dealing with the main species, *Mycobacterium avium* subspecies *ovine* and *bovine* could all readily mutate. That's why dairy farmers

are advised to bird-proof their calf-rearing facilities as birds contaminate the calf food and transfer the bacterium.

In reality, the MAP program is a trade restriction without a duty of care to the producers as the maximum financial assistance available if the herd is found to have a positive is an insulting \$11,000. I quote from an email my son Harry sent me last week "from our perspective we (Lawsons Angus) have suffered significant indirect financial loss including being forced to move 1,200 head to WA after the bushfires as a consequence of losing key production and not being able to find any MN3 properties to agist these cattle in NSW or Victoria due to timing and ongoing drought".

Also from Harry Lawson "Lawsons Angus have had several false positives on ELISA tests and were forced to slaughter high value seedstock and run cultures to avoid being shut down and to quash any chance of false rumours destroying the business. The stigma associated with the disease is worse than any clinical effects of the disease itself. The first false positive was announced by a vet nurse on a Friday afternoon with the comment "You have a positive animal. Alistair will be back next week so you can follow up with him." The vet nurse had no idea that she had just told us we had a very good chance of going bankrupt. It proved to be our first false positive.

One positive test would destroy our export business so we have now moved to have cattle in 3 states and it has cost us a fortune.

The mentality of those behind the program is bordering on criminal as there is little or no duty of care towards the farmers caught up in the MAP program, which is not voluntary as vets would suggest as it is forced upon you if you wish to trade within Australia. There is a BJD vaccine that you can only get after your herd is infected. They have absolutely no duty of care towards the farm businesses they have adversely affected. They don't seem to be even aware that vaccines are for preventative purposes.

As a professional Ag Scientist, I believe those behind this scheme should be charged with criminal offences, which has recently occurred with the seismologists in Italy.

As it happened, Judy's husband was a professor in the Melbourne Uni Vet School, who specialized in this area. No one from the DPI had bothered to consult with him either.

Dr Arthur Telford was the first to explain to me that the bacteria has two forms, one when it is an infection and one when a breakdown in the animals immune system that makes it change its shape and it becomes a disease.

Why the Johne's program is fraudulent - to run a health program for animals or humans there are a number of basic principles...

Firstly, you need a reliable test and they started without one and still have not got one.

The Australian Johne's Alliance was set up in September 2001 to protect farmers from the quasi-terrorist vets who set up the Johne's program who came knocking on farmers' doors with a view to destroying their livestock and thus their life's work in many cases.

The ELIZA test for BJD is still unreliable from our point of view as it can give false results and destroy your business. The faecal culture test is it can take up to 6 months to put a business on hold for six months is not on.

Secondly, there is no cure for Johne's and destocked properties were re-infected. Vaccination on the other hand, is a management tool used by sheep farmers to contain shedding of the bacterium.

Cattle producers do not have access to the proven, preventative vaccine that other countries have. You can only have the vaccine and vaccinate them if your herd has BJD – well by then you are bankrupted.

Thirdly, the authorities launched into devastating destocking programs without undertaking any soundly based surveys to see what they were dealing with and where Johne's was present. Western Australia had no Johne's remember – it now has 41 infected flocks.

Fourthly, with animals you need to undertake a cost benefit study. I am unable to find any cost benefit analysis looking at the regulatory cost versus benefits to the industry. It should show the social costs to the farming community but it appears that farmers are expendable items to government vets. A cost benefit study of the costs and benefits of the vaccine was conducted by the University of Sydney Vet School and others and it shows vaccination to be very viable and profitable method of minimizing the shedding.

Today we need to find a way out of this mess.

The Johne's program has moved from an eradication mentality to control, which is flawed in every respect. It is endemic in livestock around the world and is found in about 160 species from deer (which are now everywhere in the high country) down to the humble earthworm.

The Johne's Alliance policy has always been that Johne's should be a management issue for farmers, just like leptospirosis and most other economically significant livestock health problems (including lice and drench resistance in sheep).

Where is the exit strategy to hand the management of the disease back to the farmers and give them the tools to manage the issue for high rainfall, intensive livestock farmers. This is how leptospirosis is managed and it has serious and proven health issues for both farmers and animals. Johne's disease itself has no effect on humans.

The dairy cattle with Johne's all go through the food chain the dairy milk go through the food chain and the sheep with Johne's go through Fletcher's abattoir into the food chain, what are we talking about.

The Johne's Alliance had about 10,000 members and raised about \$100,000 to back people with courage such as Peter Reilly and Peter Westblade and sheep breeders owe them a great debt. There were 5000 people at rallies. There was the infamous rally at Corowa demanding an end to the Johne's witchcraft.

Eventually we had 3 parliamentary enquiries but no one has been prosecuted. There is a cost benefit study by Hassles on the disease costs through abattoir surveillance. Liver fluke \$38M, arthritis \$24M, grass seeds \$17M, nephritis \$13M, pleurisy/pneumonia \$6M, cheesy gland \$4M and OJD \$4M.

The draconian Johnne's regulations put in place to ensure jobs for the boys in the vet profession. Even Dr Bill Gee wrote in the Land "we have eradicated TB, we have eradicated Brucellosis, this is a great job we will keep all the boys busy and eradicate Johnne's". The vets have are causing serious issues that are having devastating economic and emotional impact – too many farmers have suicide and have ongoing health problems as a direct result. The vets promoting the program put the fear of God into the rural community by trying to create a link to Chrono's disease. The farming community has been conned by those vets who saw this as a money making opportunity and put the fear of God into an untrained and largely uneducated farming sector. The Victorian Chief Vet controls the registration of vets so they live in fear of their livelihoods if they speak up they will lose their registration.

The saga relies on State and or shire boundaries, so all government funding for Johnne's programs except for research into better testing and vaccines. The MAP program is nothing but a restraint of trade.

Finally, who is responsible for this program as it seems there are that many people hiding behind shoulders. The science is appalling – I am all for a management program and let's get on with our lives.

State Positions

Kristian Holz - NSW DPI

Kristian gave his apologies on behalf of the NSW Minister for Primary Industries and the NSW CVO and declared he was here to take notes and provide a position statement.

If industry still supports the sheep health statement remaining mandatory then DPI will support that request.

In relation to OJD areas, DPI will no longer approve or revoke proposed protected areas as it did for Exclusion Areas and they will not be gazette as the approval process will be managed by the national sheep industry. Any movement requirements into a protected area will not be backed by regulation thus the regulatory burden will not increase, a review of the MAP is planned for later 2013 and the industry will drive the area classification through producer surveys for protected area status by region in accordance with the national requirements. If prevalence of disease exceeds 1% then the protected area will be dissolved. In the national context regarding Qld and SA positions, they intend to apply for protected area status and they have the capacity to impose movement restrictions on NSW control areas.

For the full NSW DPI position see the attachment tabled by Kristian

Peter Nosworthy - PIRSA

Peter manages the program in SA and whatever the industry wants is what PIRSA does.

Peter outlined the SA position. SA has a rigorous control program funded by industry and they have runs on the board with the control of the disease. Since the first case in 1997 there have been 60 incursions on the mainland and 107 on Kangaroo Island and currently there are 17 on Kangaroo Island and 30 on the mainland. SA has a rigid regulatory program where properties are quarantined and provided subsidized vaccine to infected or suspect properties and a significant number have come out the end of the program. SA recommends a full vaccination program plus ongoing of young sheep and any imported sheep and all neighbours are tested if at risk and have access to subsidized vaccine. Particularly on Kangaroo Island this has worked where there has been whole of island testing and vaccination has diminished the disease significantly. SA believes they want to keep the disease at low levels. The MAP program review may assist moving the program forward. SA will present a regional biosecurity plan for the whole of SA.

Question: Can a comment be provided on the acid portion and alkaline portion of Kangaroo Island?

Answer: *No comment*

Question: How much is the vaccine and testing subsidized?

Answer: *There is 100% vaccine to infected properties and at risk neighbours receive 100% subsidy in the first year and 50% after that. Testing is 100% subsidized.*

Question: Is there an independent auditor for the biosecurity program in the future?

Answer: *There is a need for an independent person to audit the future program but no one is appointed yet.*

Question: How many other properties vaccinate in SA apart from infected and at risk properties?

Answer: *Those figures are available and can be provided to the meeting.*

Question: Is it correct that vaccination an essential tool for infected flocks to get them through the infection and back into a normal trading situation so why won't you let producers in other States have the same opportunity to have that process and trade into SA?

Answer: *The vaccine is used to clear disease from property but there is a reliance on testing as well. No comment on the interstate trade component.*

Question: How long between infection and detection given it may be reasonable to detect disease between 5 to 20 years after the disease enters the farm?

Answer: *PIRSA won't test animals that haven't been on property for 2 years because need to attribute disease back to original property.*

Current Vaccine Features

Matt Playford - Pfizer

Gudair is a killed vaccine mixed with a strong mineral oil adjuvant (carrier) which causes a bad reaction to self-injection. It is in a one milliliter dose.

Trials were only done on lambs 4-16 weeks of age so that is the recommendation for its use.

90% of deaths are removed so if 10% sheep of sheep die due to Johne's that will reduced deaths to 1%.

It delays deaths, so animals dying at 2-3 years old will be pushed back to dying at 3-4 years of age.

Some vaccinated sheep still shed bacteria so flock vaccination will cause a 66 - 76% reduction in the number of sheep shedding so if 20% of flock is shedding before vaccination then 5% will be shedding bacteria after vaccination therefore you cannot claim that vaccination will eradicate disease or prevent introduction. The label claim prevents mortalities and reduces shedding so it is part of a management plan including fencing and pasture management.

The injection needs to be given under the skin. If it is given into the muscle or adjacent the spinal cord it causes problems. Most sheep produce a nodule a firm swelling due to the adjuvant which induces a prolonged and strong immune response.

To decrease self-injection Pfizer has produced various guns – the current Sekurus gun has a locking mechanism and it is recommended lambs are restrained through a cradle or sheep through a sheep handler. If self-injection occurs, medical treatment is required because delayed treatment can lead to serious complications.

In summary, Gudair prevents 90% of mortalities in the trials that were done, it delays mortalities between 12 and 17 months, it decreases the number of sheep shedding bacteria by 76% in the trials, it delays shedding of bacteria of about 12 months, it doesn't cause subclinical disease because it is killed and it doesn't cause positive pooled faecal culture or abattoir tests, it will cause a positive blood test for export live test to countries requiring an OJD and TB test due to the immune response.

Question: How long before the vaccine is off patent and can it be mixed with other vaccines?

Answer: *It is the only vaccine available in Australia and one of the few around the world but I don't have that information on the patent. It would not be compatible to mix with other vaccines.*

Question: Would you suggest vaccinating after the disease or before the disease?

Answer: *A complex question requires specialist advice but as a general rule if you are at risk vaccinate beforehand.*

Question: We need an education program if people using vaccine have never used it before and general practitioners and hospital staff also need educating.

Answer: *Pfizer has this type of program to address training of farmers and contractors and each of the 20 Pfizer sales reps are trained to conduct vaccine use and use of the Sekurus vaccinator training and also information annually to country GPs is a Pfizer program.*

Question: As the vaccine will be used more widely can the cost be reduced?

Answer: *No comment as price is set by retailers and the cost of goods.*

Independent Veterinary Advice

David Hucker - Vet

45% infection prevalence in western Victoria. In a case study in 22mth old wethers, 75% had lesions on abattoir surveillance. There were 640 wethers in the mob in February when purchased and 560 in July the same year when went to slaughter.

Management is a challenge particularly when the mortality rate is high in young sheep so flock replacements are insufficient.

Biosecurity such as maintaining good fences and introductions and checking the history of sheep is difficult eg with watercourses.

Diagnosis is by pooled faecal culture (PFC) with increased sensitivity but up to 20 weeks for a result but a direct Polymerase Chain Reaction (PCR) test is coming which will cut the timeframe down enormously. The autopsy is the gold standard following any of the other tests, to prove a positive.

Abattoir surveillance has been in various abattoirs over the years and provides some historical survey information and provides many producers with first hint of OJD potential on property.

However with Abattoir surveillance, if producer gets a letter of an abattoir detection and there may be OJD on the property, it is complicated by the fact that there are often boxed lines so it must be proven by an autopsy on the property. Similarly a negative abattoir surveillance test is not a flock status because again there are boxed lines. However there is a case study where the DPI Victoria has sent letters to a known infected property on two lines of sheep testing at abattoir, one a positive letter and one a negative letter saying the letter could be used as evidence in the Assurance Based Credit system score.

Vaccine is the most important farm measure available to us as it reduces mortalities to pre-clinical levels and alleviates animal welfare problems, economically advantageous when losses due to OJD exceed 1.4%, vaccination started before infection eliminates economic losses associated with 4-5 years of high mortality.

Vaccine is 90% effective, but better than others we have such as 5 in 1 which is more like 50%. It is advisable to keep vaccinating continuously to avoid losses returning. Evan Sergeant's modeling said after 17 years it may be possible to stop although that hasn't been recommended. If the vaccine nodule formation is larger than broad bean size then there is likely to be something wrong with vaccination technique.

Advice given by a client now using the vaccine is that the time to start vaccinating is two years before you think you need to.

David Rendell - Vet

Johne's spreads unless you vaccinate. A case study of a MAP property closed flock since 1905, imported 20 sires in last 50 years from flocks in MAP programs, last lice incursion was 1960, double boundary fencing, nil footrot for 90 years and no water entry points and joined sheep MAP in 1997, was not vaccinating for OJD, tested positive in 2007 on PFC and post mortem on one skinny sheep. Boundary fencing couldn't keep out OJD from this case study and boundary fence between SA and Victoria won't stop SA getting OJD.

Abattoir surveillance is insensitive and out of date. However, it does bring to the attention the disease to those who are not aware of the slow creeping increasing in losses. A case study sold 3000 sheep and 1428 had documented evidence of negative on abattoir surveillance however OJD was found on post mortem from selection of cases on the property. Therefore a program cannot be based on abattoir surveillance.

David describes his vaccine training with Vitamin B12. 20 percent of people mis-inject. There has been no mention within vaccine trials of an audit of how they injected, the needle length or syringe used. Thus the reasons for vaccine not working may be how it was used.

Keep the program status quo because it is working and vaccinate.

Adrian Veitch - Vet

A case study of a stud in WA testing since 2005, 3 negative abattoir monitor, one 350 PFC negative, 100 PFC maintenance test was positive and 24 PFC pools of 50 sheep negative. One other positive when samples were duplicated (one to WA and one to NSW and the WA was positive but the NSW was negative). No clinical disease can be found or on post mortem. However there is no appeal to the testing process.

More people should test so we can realize how prevalent it is and then more people would vaccinate.

If you start looking hard enough you will find OJD.

Roger Mieschke - Vet

You are being offered a marketing proposal that you are going to fund and an animal health program that is supposed to mix with your business decisions and the two don't work. The MAP accredited vets are also provided by the program and in case the meltdown happens the government agents are also provided.

The accredited vet has entered into agreements and has to administer requirements according to his agreement. The transparency of what he has agreed to do which is reporting your business affairs to the State is guarded by a password so if you want to look at what he has agreed to do on the Animal health Australia website, it is blocked.

The tests are dodgy at best, they will come up positive eventually. A case study where the PFC come up positive when it is not positive and that destroyed that producer.

Joan Lloyd's review of the program was brilliant.

With experience with the Australian Pesticides and Veterinary Medicines Authority, 90% reduction in mortality and 76% reduction in shedding is dreadful for a good vaccine and you will not eradicate the disease but if you assume you are infected use the vaccine. Invest in better vaccines but don't waste energy on other activities.

Producers will pay for this because governments won't invest because it is not a good investment proposition.

Don't dismiss the past because the Senate Inquiry records people who were devastated have told the truth – we have not advanced, the disease has increased we are all infected and let us accept it – the idea that we can put a line on a map and vary it year to year according to abattoir surveillance or some other magic mystical method by someone in Canberra is a nonsense and divides the community and causes massive arguments at the fringe of wherever the line has moved to from last year to this year.

Move on and vaccinate.

Changes to the current National Management Plan

Geoff Power - Wool Producers Australia

WPA and SCA have been working on revised plan for the past 18mths in a partnership approach between the two councils.

WPA and SCA are here to the explain process on how the revised plan has evolved and to listen to your concerns.

The current OJD management plan 2007-2012 will cease this year. As part of the program a review had to be conducted on the effectiveness of the plan, so WPA and SCA commenced the review early 2011 to identify strengths and weaknesses of the current plan and the possibility of continuing a national approach to OJD.

The review had 3 components: a bio-economic analysis of the impact of the current program, a farm biosecurity attitudes and practices survey of 300 agents and 870 individuals and impacts on the objectives of the program, and the review of the National OJD Management Plan 07-12 by Joan Lloyd where 73 people from 33 organisations were interviewed.

A number of recommendations were made within Joan's report and based on these the peak bodies in consultation with AHA developed a Discussion Paper put out for public consultation. Four options were put forward: revised current management plan, a two area model (control and protected), nationally coordinated OJD risk management based on Sheep Health Statement (SHS), ceasing national management in favour of State departments to operate to their own standards. – respondents were asked if it did or not meet needs.

An online public survey was conducted 2/9/11 to 21/10/11 and hard copies available on request. Media releases by SCA and WPA and used different meetings and rural media to encourage participation. State Farming Organisations issued media releases utilized publications and many sent emails to members.

The public consultation survey returned 311 responses and 244 were considered which is 1% of sheep and wool producers based on ABARES figures 2010. 63% were commercial, 19% studs, 6% vets, 5% agents, 4% government representatives and 3% industry representatives. 7 written submissions from State Farming Organisations.

WCA and SCA, with advice from AHA and the National Technical Advisor, announced 9th January 2012 a hybridized version of the second and third options ie. the two area model with risk assessment based on use of the Sheep Health Statement (SHS). This comprises existing high, medium and low prevalence areas would be streamlined into control and protected areas; control areas where disease is well established and continues to spread. A review of the SHS and assurance based credit (ABC) scheme undertaken and abattoir surveillance continue. Promotion of grazing management , vaccination and on farm biosecurity will continue. Implementation 1/1/2013.

The national industry set guidelines for implementation but as for all disease management plans individual states will implement as they see fit. These national principals are the 2 area model with protected area prevalence at <1%, reducing regulation by putting the onus on producers to prove their OJD status instead of arbitrary lines on map. These lines would be self-determined by proving freedom from disease through testing. Uniform entry requirements for protected areas regardless of State, revise current SHS and ABC scheme, mandate the revised SHS in all States and review the sheep MAP to make it more relevant to participants.

Animal Health Committee [<http://www.daff.gov.au/animal-plant-health/animal/committees/ahc>] did not agree to mandate the SHS. They did agree to provide consultants to the SHS Working Group (which includes the jurisdictions and industry).

In February March 2012, WPA and SCA met with all State Farming Organisations and State OJD Management Committees. In April 2012 WPA met with ASMBA.

80 emails went to sheep and wool organizations and they were asked to send on through their own networks.

Ian McColl - Sheepmeats Council Australia

Whilst vaccination is one of the best tools we have, we also talk to those who don't want to vaccinate or who want provisos in place to minimize having to vaccinate.

Lack of recognition of vaccination is controversial. WPA and SCA strongly encourages vaccination to reduce on farm mortalities but research has proved that vaccinates can still shed after 5 years of vaccination.

The decision not to recognize vaccinated animals was made by the technical subcommittee of SHS Working Group because the shedding that occurs poses too greater risk to the proposed protected areas. The technical subcommittee consisted of States who are underpinning protected areas by regulatory or other measures (SA, Qld and NSW) and the National Technical Advisor. The regulators consulted with their industry counterparts. Whilst NSW will not be regulating protected areas, the Exclusion Areas will likely become protected areas therefore because uniform entry requirements into protected areas is an objective, NSW is part of the committee.

Double vaccinates [second generation vaccinates] are causing greater concern which is being progressed by further research on the risk they pose, but at this time regulators of SA and QLD will not accept vaccination alone as a measure to stop spread.

The ABC scheme is also causing concern. 30.5% of 870 respondents to the public attitude survey accurately knew their ABC score and there was an overreliance on points based on their location status and vaccination to trade rather than managing the disease which had contributed to spread of the disease. The ABC scheme was not being used properly so was contributing to spread of disease. Producers may have been making up figures as producers had 30 points.

The use of 4 points [second generation approved vaccinate flock] coming from low, med, high prevalence areas cannot indicate if the sheep are infected or not.

The MAP program will be reviewed next year with industry input to make it more user-friendly.

There have been calls for continuation of status quo; however, the issue is the current program has not met its first aim to minimize risk to properties that currently appear disease free and actively managing incursions.

NSW high prevalence areas trends show vaccination has caused a reduction but still a high level of incidence. Victorian figures based on abattoir and PFC testing (the best tools we have). SA is less than one percent, Tasmania has had a major increase in the last few years from near 0 in 2001 to 20%.

Continuation of the status quo was identified early in the review process as not an option. OJD continues to spread into areas where it has not previously existed and the reliance on ABC points as a measure of assurance was not working in many cases. Current prevalence areas (low med high) will not remain the same.

In summary, under the current system OJD is still spreading, the ABC system is poorly understood by producers, 90% of producers that were surveyed and responded wanted a national plan, many areas of Australia with no disease or low prevalence (some would disagree with this however that is the best available information) want a national approach because Qld and SA have the ultimate power to decide what will be allowed in so we are looking for a framework that works with the States so we can continue a level of trading with them. This will be difficult and costly for some people.

Question: With a protected area how much testing has to occur to maintain status and how often do they have to test?

Answer: *Protected areas will be audited annually to provide evidence that they haven't got over 1% OJD and the onus of proof will be on the areas and that will be rigorous and independently audited and the people in those regions pay for those plans and the independent auditor, the abattoir surveillance is industry funded.*

Question: What is the response to Joan Lloyd's review which showed 81% of sheep and 79% of producers come from NSW, Vic and WA and they want a market based program?

Answer: *If producers wish or see advantages by trading to Qld, SA or a protected area then they would decide to go to MAP program or join with producers to form a Protected Area.*

Question: Why can't NSW prevalence areas be taken by area not the whole state as SA is doing because those not eligible to vote within a protected area are being disadvantaged by the line on the map therefore the whole of NSW should be one prevalence area?

Answer: *The existing NSW Exclusion Areas operate on changes to NSW legislation as of May 2012 which required that the area survey every 2 years to maintain their Exclusion Area status. The lack of survey responses (50% voting and 50% of those voting to maintain the Area) led to the removal of Exclusion Areas for two areas and these changes were nothing to do with the national program changes.*

Question: The national approach seems to be promoting a zero risk approach to spread from potential shedders who were vaccinated but there is leakage in other areas of the program. The ABC system was a safety net for infected flocks so they can reclaim some credibility in the industry but now there is no option for infected flocks to retain trading options so what do you say to those in the control area that are diagnosed?

Answer: *There are a number of people who vaccinated for trade which was abiding by the old system but also people should know that these sheep still have a level of risk albeit a reduced risk so if purchasers are happy to take that risk then that is their choice but as an industry there is a responsibility that people have the knowledge to make an informed decision on stock they were buying. The industry wanted mandatory SHS but the state regulators couldn't all agree to mandate.*

Question: How is spread of bacteria going to be controlled in control areas when testing protocols are inaccurate?

Answer: *Vaccination is the answer but its value as seen by various producers depends on the individual's situation and some don't want the disease and don't want to vaccinate.*

Practicalities of implementation for trading livestock

Rick Power - Landmark

It is not common knowledge but sheep are being traded in all areas and we use the word laundered.

In the Tablelands NSW OJD vaccination is a priority when buying or selling livestock more-so than bloodline. In Deniliquin and Narromine Gudair vaccination isn't really an issue.

The status quo is working for the management of OJD. Another change in the industry is not required; restriction of genetics, LHPA mergers, electronic tagging of commercial livestock will lead to a loss of confidence.

Vaccinate and trade.

Chris Cummins - Elders

Awareness of the industry dynamics – the commercial reality is that the sheep trade is a national business.

Breeders are the foundation and unless they maintain confidence within the industry, supply will decrease. Meat and wool are a unified product these days. Traders drive the price and provide the prime stock through seasonal shortage to ensure continuity of supply to abattoir.

Between all agents 1.6 m sheep travelled from WA to the East during the WA drought.

The biggest issue is animal welfare and chain of responsibility which means that animals can only travel a legislated set distance before a rest. If they accept the sheep, at the end of the chain of responsibility, it is all impacting.

Saleyards management is impacted with increasing compliance requirements and this takes away the workforce for animal welfare and we are finding it hard to find people to work in saleyards. Price impacts all the way through.

Every time something like lice, OJD or weeds bobs up, small communities are torn up because some have it and others don't.

Is the system going to cost more than the impact of the disease and only the sheep producers can determine that.

It is hard to find money to finance sheep and cattle because the bankers don't understand the industry.

The decision has to be national, workable and commercially viable because all of us will be commercially impacted.

Question: We use agents to access to markets we don't know, for surety of payment and for a guarantee for what we buy is what we requested. However you don't see SHS displayed in saleyards. At studs you can get a SHS, so what good is it if we all start vaccinating if we don't have the SHS telling us that the sheep are vaccinated. For those in the Protected Areas, we have to think very hard before we vaccinate and trade and put that vaccination impost on all sheep producers and traders.

Answer: SHS are available for viewing in the office but not put in the pens. For Auctions Plus you are going to be able to view them on-line. In SA, PIRSA police the SHS.

Practicalities of implementation for the supply chain

Roger Fletcher – Fletchers Abattoir

We have never seen a report on how OJD is managed overseas. Eradication failed, tax collection through sheep slaughter levy, lines on maps showed limit of OJD, we were told vaccines didn't work and wasted several years, no one stopped the WA sheep moving to SA, abattoir surveillance is not accurate, there are delays in reporting abattoir surveillance up to 6 months, the ABC point system is now not working and States cannot get together to make the ABC system work and there is a poor record of bureaucrats looking after farmers after an OJD diagnosis.

The industry has far worse problems to solve than OJD. Have there been any results from the program?

We stopped abattoir surveillance because of the heartache for producers and it is not accurate. Over last 17 years we had 3500 AQIS inspectors and now down to 5.

Managing droughts needs to have stock move across zones making use of our great transport today.

The way forward is that each person manage farm the best they can and use buyer beware, no meddling of bureaucrats, vaccinate in some regions if you need to.

The biggest cost to us is sheep measles. The cost of abscess from incorrect vaccination is the cost of employing an extra person for a whole day to trim rather than the cost of the lost meat. If they are not vaccinated correctly then you might as well not vaccinate.

Question: As a major stakeholder in the sheep industry how much input did you have into the plan?

Answer: *We didn't receive any voting information and no phone calls from Mr Jackson.*

Jim MacDonald – District Vet, Yass

I wouldn't recommend any regulation program as we had going back several years. However, while we have States we will probably have regulation.

Vaccination has turned the district around from losses of 25 + % in some age groups to virtually none and we have trouble finding a case of OJD.

About 6 years ago in our district there were lambs born into drought grazing at 10 days and vaccination at 6 weeks so it is an unfair comparison to say the results were the gold standard on how vaccination works. 1 in 1000 of those sheep would be clinical. My experience is the vaccination works at 99.9% but I have no data on how they shed. AWI should look at how vaccination for 10 years affects clinical cases and shedding. Otherwise in 20 years we may be quoting research done 5 years ago and only getting a barometer of what happened 5 years before that. This research needs to be done with fresh eyes and no baggage in the industry.

Over the years, media articles are trying to put down vaccination by saying that vaccinated sheep have the potential to spread the disease but there are no articles about sheep coming from WA and illegal movements to low prevalence zone to launder sheep. The good thing about the ABC system is that it gives an incentive to vaccination beyond on the farm disease control incentive and it puts the lid on areas that can build up infection quickly so then you are also reducing potential for the disease in the whole industry. It is a dangerous precedent not giving vaccination its due.

The very low or protected prevalence zones at the start were 0.1% are now at 1% so there is creep so when will 1% be too high.

The proposed biosecurity groups model will survive if groups are single minded and have a similar emphasis but the larger groups that are sent a survey and have to respond are more disparate. The survey rules are 50% return the survey and 50% agree which is 25%. 25% want to do the right thing but 75% say no, don't care or are not engaged so I cannot see how it will work or be done on a larger scale especially when Departments have said they are not going to back it with regulation. It would need about 80% survey return and 80% saying yes.

Comment: We are doing low prevalence area voting on a Protected Area and have one case of OJD bought in by an introduction and to say the voting system is not quite right is incorrect because we have one case of OJD.

Response: *And if everyone is single minded you probably will get the 80% return and 80% agreeing.*

Greg McCann – District Vet Dubbo

This is an industry run program and we have no regulatory powers only advisory. Both programs have pluses and minuses. Where both programs fall down is there is no acknowledgment of the difficulties and losses where people's flocks are diagnosed.

When there are more important health issues on farm and yet this disease creates a gathering a group like this then it shows that it is not the disease it is the way the people think about it and this has not been addressed in any of the programs.

Abattoir surveillance is insufficient to protect an area against incursion. We are trying to have a risk based system to advise people when vaccine should be used as a management tool. We are in negotiations with Fletchers Abattoir to give us information for an area prevalence without a name attached so the we can warn the area that there is OJD, because no one will be please if we recommend vaccination over 20 years with no evidence. We need information but we have to be able to do it without pillaring someone if they come up with a positive result.

There are areas where there is no increase in Johne's despite sheep going into that area with the disease and this means there is insufficient information. But there are a lot of people who don't what tor run the gauntlet and they should be given the opportunity to trade and given the tools that allow them to keep doing what they want to do.

Question: If we go to protected and control areas and buy out of a Protected Area, how do you guarantee that those sheep don't have disease?

Answer: *Accreditation schemes only a level of assurance eg brucellosis. We would like to have some support for any advice on the prevalence of the area through surveillance including - abattoir surveillance and some testing for those that want to - but you must not ruin them financially or ruin their mental health if they come up positive.*

Question: OJD has been around for years so why haven't the Department done a test out west where you think there is no OJD after 4 years of sending it there to see if the disease is still there.

Answer: *Greg Curran is doing that work in Broken Hill in survival trials in lamb plots.*

Practicalities of implementation for the Stud Breeders

Phil Tolland – Australian Stud Merino Breeders Association

ASMB have over 1039 stud members around Australia and we have a big influence.

We maintain there is a lack of adequate consultation in this process. People couldn't believe that vaccination wasn't part of an ongoing national program.

The proposed national management program is a restriction of trade and we propose more scientific information be available on the decision to underpin the changes. Points for vaccination must remain a part of any program therefore we support that the status quo remain. It affects trade and our national show arenas, and our charter to improve our Merino will be restricted.

The stigma as a social disease of people will drive young people away from the industry. OJD is not a significant disease where it is managed by vaccination and there are more animal losses due to pulpy kidney, barbers pole and flystrike. OJD shouldn't be a notifiable disease and it would release the State Governments from their compliance obligations. All State Governments have a duty of care to farmers but it appears that the Victorian DPI want producers to take control of decision making to remove any liability for them. It needs all State CVOs coming to the position that it is not working and it is not a significant disease and let's get on with it if you have a problem vaccinate, if you want to trade with no trade restrictions then vaccinate.

The only way you can control is to vaccinate and the only way to be protected is vaccinate and no protected area is free of disease – the terminology is confusing.

1% response to the consultation is poor and we don't accept it.

Peter Myers – President of SA Stud Merino Breeders

The position of the SA SMB is that the status quo remains until revision of the OJD MAP program at the end of 2013.

Graham Gilmore – Poll Dorset Stud breeder

A case study of someone in a low prevalence area was stopped from vaccinating and stopped from testing in the past but tell him now that if he wants to keep selling where he has sold for 36 years that he now has to test but there is no safety net.

We are representative of the industry. No one knows where the funding is coming from to Animal Health Australia (is it from MLA) and is AHA funding WoolProducers and Sheepmeats Council. Who are the advisors from AusVet who advise AHA. These handful of people are affecting people's lives. If you haven't got the disease and don't think you have a problem don't vaccinate if you do then vaccinate.

Adrian Vietch – Dorper Stud breeder

Only 1% of producers consulted is insufficient. Few understand what this program involves and most farmers who do a good job don't belong to committees.

This is going to affect stud breeders who move across country and traders. There is laundering of sheep through different PICs.

Get rid of the stigma first because it destroys the family. 1.6M sheep went out of WA last year and do you think all of them went with a proper SHS, I saw one of them with 10 points who said he had been vaccinating for longer than the vaccine has been out.

Rules can be broken.

In WA you take sheep out into the wheat belt and they don't develop the disease, they get better they didn't even know they had Johne's.

The vaccine research was done when they went for registration in high prevalence areas so animals get the disease before you vaccinate them so in a high prevalence area with scouring ewes the lamb gets inoculated from day one with a contaminated udder so what efficacy does the vaccine have in the western districts.

To a commercial breeder with a cropping rotation running sheep 1 to every 2 acres why would he vaccinate but in a stud situation you need to vaccinate because of the stigma.

Testing protocols are ridiculously flawed because there are no retests, no second opinion and no right of appeal. A case study is not being able to prove a case of OJD on the property despite a positive test and I am told it is the best test we have got.

There is no coincidence Johne's is showing up in some areas and not others. They say stocking rates at one to two a hectare don't make a difference but when you are running one sheep to 50 hectares it would. We need research to find out if Johne's is going to happen regardless of what we do. All the research has been done in areas it was going to happen anyway.

Johne's is now only an issue in WA because of the stigma. It puts farmer against farmer. Like we solve with Avenge (\$6.5 over life), drench resistant worms we solve with Zolvix (\$6.50 over life) and Johne's we solve with a \$2 vaccine. If we could subsidise the vaccine for \$1 we might get somewhere.

We have made OJD such a big issue and it is going to be hard to take it away.

Practicalities of implementation for the Producers

Helen Cathles – Australian Superfine Wool Growers Association

There is a huge diversity of opinion when this issue comes up for discussion and we endorse a national approach not the States splitting and making it worse to operate.

In this room people are terribly upset and are way back where we were years ago. We need a common goal – we need to join as a wool industry and to find a solution and move on. If we keep accusing bureaucrats as trying to undermine us or having jobs they don't earn we are not going to make the progress.

We vented our spleen many years ago and didn't make much progress but over time we had the opportunity to move on a bit.

We lack knowledge we all need to learn – vaccine use and the degree of losses - it is a significant disease without the vaccine.

Years ago we were told that until we can prove this disease is not endemic the past program was the way to go and no one stood up to prove the case. So let's find a common goal and do something significant and work as a united industry.

Ross Wells – NSW Riverina region

There is a more endemic disease in our industry than OJD and it is politics. I have been told by the NSW Farmers Sheep Meats Committee about the risk of Chrone's disease and thousands of sheep dying of this disease. In contrast, the VFF have now changed their position and are strongly behind the status quo. In WA, on the Sheepmeats Council agreed OJD was not a problem in WA. Two stud representatives on AgForce had settled for the status quo. In SA, the Chairman of SASAG, supported the status quo.

I would like to know why these positions for the status quo were not on the table at the national OJD planning committee.

We now have two States in Australia that have come up with excessive trade barriers despite the industry wanting the status quo.

The status quo is the best. There were a percentage of people not understanding what the risk based trade was about. Interstate trading was a bit of a problem but it seemed we had all come to accept what was happening.

The sheep industry is not the technical people or regulators or government agencies and government advisors, who are the bureaucrats. Therefore who is going to take responsibility for this program that is going to be put in place? There people here like WPA, SCA, AHA here today. If things go wrong on this program who takes responsibility for the program success or failure.

AHA seems they are not going to take responsibly and government won't take responsibility so it comes back to our representative bodies, WPA and SCA who seem to be pushing this program. Who is going to support those who have trade restrictions and positive test results?

Get the bureaucrats out of our lives – stop running and ruining our lives.

Frank Tobin – Ex Victorian Ministerial OJD Committee

We tried to rebuild a program with producer support after the eradication era. Looking at the regional biosecurity groups guidelines proposed are exactly what was done in Victoria in the 1990's such as destocking options, a management group being responsible for identifying high risk activities. This is like a mob mentality with no regulatory power running Protected Areas with as little as 25% support. What are they going to do for farmers that test positive because they will accept up to a 1% prevalence in the area.

We had an environment of fear and we had to create an environment of cooperation. And the ABC score is one of the most successful thing we did because it gave producers the ability to insulate themselves from a positive or a false positive test or any indication their property may have OJD. We spent years trying to convince the stud industry and commercial restocker properties to vaccinate and we were told by the stud industry that because of the fear of OJD they would like to vaccinate but if they do their clients would think they had something to hide.

Vaccination was pushed onto industry as the silver bullet by governments, AHA by the SCA and WPA and producers went along with this and did what they were told. Now we have SCA and WPA that won't recognize vaccination under an ABC system. Producers will now look at OJD management purely on economic drivers meaning prevalence in Victoria will build up because they don't need to spend \$2000-3000 on vaccine if it is not recognised.

The sheep industry not been given the opportunity to settle on one policy – destocking, prevalence areas and the ABC score and scores changed on prevalence areas. The policy we have now is working because there have not been any arguments in the paper and everyone has learned to get on with it.

If we want to manage the disease, the last thing we want is fear of testing or driving disease underground because safety net of the ABC system is undermined and removed. They could have had a single positive reactor and people buying sheep would be much better off buying from a known infected property vaccinating for several years than buying from a protected area where there is no knowledge on those flocks at all.

The sheep industry is sick and tired of the changes and my recommendation is to say no to changes. We don't want a delay to come up with another proposal we just want the program left alone.

Tony Gooch – WAFF

At the time we were consulted by WPA and SCA we hadn't availed ourselves of the full information that existed and that has been revealed to day.

We don't support the continuation of the current system. We support the quickest transition to individual responsibility of both the grower and purchaser to provide whatever information is necessary to reassure themselves of the status of the sheep.

If the proposal is a transitional one we would support it but if there were some means of moving even quicker to individual responsibility we would support that.

Wal Merriman – Chairman AWI

Thanks to the organisers for getting some 100 people here at short notice.

AWI will provide a full report of the research presented today and proceedings compiled and available to all today and on website to governments and industry bodies as an industry document.

AWI has 40,000 eligible levy payers and there would be more than this in sheep producers. But if there are 25,000 sheep producers 1% submitted their returns to make this proposal decision. 1% is not enough information for people to make a national program on.

Wrap-up/Summary

Scott Williams - Facilitator

We heard from a lot of speakers, we have heard a lot of emotion in the room, we have heard a lot of anecdotes, we have heard a lot of concerns about the new directions that things are going in. There is an argument for going to a new program because the current one is not working and the vaccine is not perfect, data has been presented showing increasing prevalence in areas.

The current program not working because prevalence is increasing and vaccine not protective and SA and Qld want rules and will do it anyway, and there has been a consultation process. SA and Qld are both in favour of something new and they are going to impose restrictions anyway. There is also the argument being made that people were not consulted with but there was quite a process of consulting with the industry and that has been the basis on reaching this new program.

We have also heard a contra argument that we should maintain the status quo and that people aren't convinced the program isn't working and it was Ian who talked about a potential lag in those figures and because of drought we will see those figures start to wash through. Frank said the ABC is a safety net. There has been discussion about how the new zones are going to work and the lack of clarity about how they are going to work. There has also been the argument that consultation was not in fact adequate at 1% of the sheep farmer population and we are getting a much more representative view around the table today. The view has also been put who cares about SA anyway as they are only 10% of the sheep.

So we have a range of arguments and there is another argument on from that from quite a few people that we should deregulate the thing completely and we just heard Tony Gooch say that is WA's preferred position and it comes down to personal responsibility to look after your own business affairs. And people are saying we have much bigger endemic disease to worry about than Johne's disease. Behind all that is the argument whether or not this is linked to Chrono's but no one seems to have pushed that particular argument terribly strongly today.

The background to all of this with Johne's is that there is so much unknown about this disease. There is more know that there was 10 years ago, we have done a lot of research since then but there is still a lot of unknowns such as how much of the shedding does Gudair stop, precisely what is the contribution of environmental conditions to the spread of Johne's disease. None of it is black and white and a lot of it is around assessment and management of risk.

What everyone has agreed on is that we need to have a system that de-stigmatises the whole thing, that at the end of the day this is just a disease and it shouldn't be the reason communities fall apart or that

people fall apart. And there must be a mechanism that allows people to recover from one positive test (that has come up several times). And I think most people would argue that if a test is so unreliable that there needs to be a way to deal with that.

We need a dispassionate debate is needed in this upcoming discussion session as you have an opportunity to send a message to AHA, WPA, SCA and AWI about what they can do to change what you are unhappy with.

Question: How much confidence do you have in the new program and the new Protected Areas given there are only direct lines to abattoir so smaller producers may not have been included and not all abattoirs are involved?

Answer: Ian McColl - *In NSW figures haven't been good although there has been some PFC testing done and in other states there is some good abattoir surveillance. The levels of testing are lower than we would like but trend is an increasing prevalence.*

Question: Why in the summer rainfall zone the expression of OJD doesn't appear to happen?

Answer: David Rendell – *There has been a lot of misinformation about that. Ian Lugton study showed stocking rates had not relationship nor did height of grass but lambing percentage did have an effect. Stocking rates are an inaccurate indicator of nutrition and length of feed doesn't indicate quality. So the study interpretation that nutrition doesn't have any effect was inadequate. That work did show it is likely gross nutrition has an effect but not micronutrition.*

Question: How am I going to trade as a commercial producer (who weren't consider or consulted well) when I am going to miss out on a Protected Area status because we are in a 1.8% prevalence area and I cannot afford to test in order to sell our sheep into a Protected Area because you are taking the vaccination points from us.

Answer: David Rendell - *Remove the line on the map will remove the problem.*

Question: 244 respondents to what to do in the future and this is 1% response from the sheep industry but how many asked for this specific proposed program? Secondly, abattoir surveillance is damaging the control of the spread of disease because the time lag between finding a positive in abattoir to when the bacteria first came onto the farm could be as much as 20 years and so using abattoir surveillance to say where the disease is, is actually saying where it was at least 3 years ago so you are making them think they are safe when they should be saying vaccinate at least 2 years before the disease shows up.

Answer: Ian McColl - *The disease won't go away once tested and yes there is a time lag so the information lag is an issue. Abattoir surveillance gives you a trend and it is used with PFC but it is an imperfect tool which may be an underestimate of prevalence.*

Question: We need funding for research at national level to avoid government stepping in; such as private testing of low prevalence areas (with individual results kept within AWI) and use of live vaccine such as they have in NZ?

Answer: Geoff Power – *A lot of sheep go down to T&R from the pastoral area for abattoir surveillance but I agree more research needs to be done on the pastoral areas and vaccine.*

Question: We have a problem in WA keeping producers in sheep and they don't want to use vaccination if they don't have to, thus more research needs to be done if they need to do vaccination. If the new DNA test arrives then it can help producers decide if they need to vaccinate or not.

Answer: Greg McCann – *The direct PCR has been put in front of SCAHLS and should be available within 6 months and deliver a result in 24 hours of laboratory time.*

Question: People have been forgotten and what is your duty of care to producers who you put out of business because of a positive test (through testing to trade or through buying sheep from a Protected Area or through testing to be part of a Protected Area) because if you don't have any you should abandon the program because legally you are sitting on a knife's edge and I think you need to be taken to court for failing to show duty of care to the farming community.

Answer: Ian McColl – *We all recognize that how those that have been treated on a positive test is appalling and that it needs to be done better in the future. There are also a number of producers that have bought sheep under this system that they felt had been assured were not infected and they now have OJD therefore as an industry there are two sides that are affected.*

Question: Can a clear view of the funding web be provided eg AHA, WPA, SCA?

Answer: Stuart McCullough – *As AWI doesn't fund these organisations it is not for AWI to answer. Mike Bond, AHA – AHA offered to provide that information.*

MOTIONS PUT TO THE MEETING

FIRST MOTION:

Tom Ashby, SA moved the motion, "to defer the new proposed National OJD Management program for 12 months and stay with the status quo until 01/01/2014, post the review of the current OJD MAP program. For the sheep industry to meet and discuss the review of the MAP program and "where to from here" in November 2013 with greater consultation."

Motion defeated 34:16

SECOND MOTION:

Kate Spry, "That the proposed OJD Management program be revoked on the grounds that the program is fundamentally unsound and due diligence has not been given to processes involved for the effective control of OJD; and that the status quo be maintained

Carried 47:7

THIRD MOTION:

Jim McDonald proposed: “The new proposed OJD program be shelved indefinitely and while the current status quo is in place the industry move towards deregulation of OJD management as per the West Australian model. This way there are still management tools but no regulatory imposition”

Carried 49:6

FOURTH MOTION:

A resolution to communicate the motions to Federal and State Agriculture Ministers, State Farming Organisations, Sheepmeat Council and WoolProducers Australia.

Carried unanimously

FIFTH MOTION

Ross Wells, NSW suggested a committee of eight people be formed to progress the recommendations and the motions from the meeting.

Carried 47:2

Members of the committee nominated:

- Frank Tobin (Chair)
- Adrian Vietsch
- Drew Chapman
- Graham Gilmore
- David Rendell
- Kate Spry
- Richard Halliday (not present to accept)
- Sheepmeat Council nominee

Meeting concludes

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