



American Association of Equine Practitioners
4033 Iron Works Pkwy
Lexington, KY 40511
Main Line 859.233.0147
Fax 859.233.1968
aaepoffice@aaep.org

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Dear NASAHO members,

The American Association of Equine Practitioners (AAEP) is the world's largest professional organization dedicated to equine veterinary medicine whose mission is to improve the health and welfare of the horse and provide resources and leadership for the benefit of the equine industry.

Our equine industry acknowledges the enormous threat the spread of New World Screwworm (*Cochliomyia hominivorax*) (NWS) poses to animal agriculture and strongly supports regulatory efforts to control and eradicate this pest once again from the United States. In conjunction with these efforts, AAEP asks that a deliberate and tiered strategy be incorporated to support the safe movement of horses.

Unfortunately, the equine industry is at a disadvantage compared to all other livestock species; as FDA has confirmed, there is absolutely no published data here nor abroad related to equine and preventative or therapeutic products for New World Screwworm. Thus, equine practitioners are challenged with protecting horse welfare and complying with the various state interstate movement requirements for New World Screwworm. Specifically, the treatment calls for an FDA-approved product for screwworm as there is confusion on the interpretation of FDA-approved products.

Dectomax (Dectomectin) injectable has FDA emergency use authorization for the prevention of infestations caused by NWS larvae (myiasis) in horses one year and older. According to FDA, this emergency use authorization for dectomax for horses is based on a pharmacokinetic study in horses which shows equivalent value to that of cattle. Thus, FDA can “reasonably assume” that the product will reach that level with effect. However, unlike cattle with published data demonstrating a 21-day duration, there is no similar study in horses.

In addition to the lack of scientific data of efficacy, practitioners are further concerned about muscle injection site reactions—even the minimal soreness this will cause in a horse moving to compete in 3 days. For these reasons, practitioners are very concerned with state mandates that apply to all horses from an infested area or, in some cases, an infested state. This poses an

ethical dilemma for practitioners trying to meet state mandates while doing what is in the best interest of the horse.

Oral ivermectin is the only alternative treatment, which may not be allowed under state emergency regulations due to the lack of label claim for NWS. According to FDA, a practitioner may consider using this product extra label under AMDUCA. Historically, this product has been used for screwworm prevention and is used in foreign countries, but again there is no published data on efficacy or duration of efficacy.

The use of this product is further complicated by the current increase in parasitic resistance seen in horses. With limited antiparasitic drugs available to practitioners, the horse's health and welfare are at stake with increased use of this product. Given the oral nature of the product, however, this is a safer alternative for treatment just prior to movement.

A review of the data and discussion with USDA reveal that the horse screwworm cases account for 3-5% of the total cases reported in endemic countries as well as the recent Mexican outbreak. The epidemiology indicates close to all these cases are found in young foals (umbilical), recent castrations or surgical cases, and wounds. Recognizing the dectomex label is for horses 1 year and over, this product is not permitted in foals.

Based on the above information, and the fact that AAEP supports the safe movement of horses and the efforts to control and eradicate NWS, the AAEP respectfully requests NASAHO consider the implementation of the following tiered movement strategy for all veterinary-inspected equids from an NWS-infested state.

- Tier 1: No treatment required if there is no evidence of current wound, no evidence of tick infestation area, and no evidence of surgery or wound in the prior 7 days.
- Tier 2: Topical Treatment required if there is evidence of a healing wound or surgical site (not fresh/did not occur within the last 24 hours) that, after extensive examination, has no evidence of NWS larvae.
- Tier 3: Oral or Injectable product required if there is a recent (within 24 hours) wound or surgical site, evidence of draining tract, or in a heavy tick-infested area (as deemed by state).

The above does not apply to horses with active infection.

As the situation evolves, it is recognized that alternative products and published data related to equine therapeutics for NWS may become available. At that time, equine practitioners' welcome further discussions on this topic. Until then, we respectfully urge states to recognize and permit the above tiered approach to equine movement requirements for NWS.

AAEP welcomes further discussion on this topic with NASAHO membership. Please direct any inquiries or questions to Dr. Katie Flynn, chair of the AAEP NWS Task Force, at kflynn@usef.org or 859-225-6991.

Thank you for your efforts in protecting our equine industry. Your time and consideration is greatly appreciated.

Sincerely,

A handwritten signature in black ink that reads "David Foley". The signature is written in a cursive, flowing style with a large initial "D" and a long, sweeping tail on the "y".

David Foley
Executive Director
American Association of Equine Practitioners