



Are You Ready?

Understanding the new Veterinary Feed Directive can help cattlemen prepare for the new antibiotics in feed rule.

by Heather Smith Thomas

Beef producers must comply with the new Veterinary Feed Directive (VFD) regarding use of antibiotics in feed as of Jan. 1, 2017. This rule is aimed at improving management of certain antibiotics considered medically important to humans — putting them under more veterinary supervision. It is part of a larger movement to minimize development of antibiotic-resistant bacteria.

What is a VFD?

The Food and Drug Administration (FDA) has taken steps to change how these antibiotics can be legally used in livestock production through adding antibiotics to feed to enhance growth. The VFD is a written statement from a licensed veterinarian authorizing the producer to

purchase certain antimicrobial drugs and to use them in livestock feed. It does not apply to antimicrobial drugs injected into individual animals for treatment of disease or to medications added to drinking water.

Extension veterinarian and professor at South Dakota State University Russ Daly says to best understand the way the new VFD works is to think of it in terms of a prescription.

“For instance, if a person needs medication and goes to a doctor, you get a form filled out by the doctor and you take that to the pharmacy to have the prescription filled,” Daly explains. “In this instance, you take the form from your veterinarian to the feed store or supplier and they sell you the medication for your cattle.”

In order for producers to obtain a VFD, they will need to establish a veterinarian-client-patient relationship (VCPR). This is similar to a relationship a patient has with his/her doctor; the veterinarian understands what and why they are treating, all with knowledge of the cattle.

The VFD is designed to give veterinarians more overview of how certain medications are used in livestock feed. “FDA’s intent is to add checks and balances regarding certain feed additives. It is important for beef producers to know that it doesn’t affect every feed additive. Mainly we are looking at the tetracyclines — things like chlortetracycline (CTC crumbles), and oxytetracycline,” Daly says.

There are many medications that are not affected, such as those

to control bloat and parasites. “If people are only using ionophores like lasalocid (Bovatec) or monensin (Rumensin) or melengestrol (MGA) and other things that are not on the list, the new directive won’t affect them. When combinations of these products are used with drugs on the VFD list, however, the VFD would be required,” Daly says.

Follow the label

Producers should talk with their veterinarians ahead of time to discuss the feed-grade medications they are currently using, to find out which ones will be affected and to discuss the medications being used and the ones they might plan to use.

“Producers need to understand that VFDs can only be written for what’s on the label of the medication. This includes feeding rate, length of time it will be fed and uses of the drug,” Daly says.

“It always has been, and continues to be, illegal to use any medication in a manner that is not on the label. In the past, because these drugs were available over-the-counter, there was no way to make sure these rules were being followed. Now that a veterinarian is involved, and has to fill out the form, there won’t be any leeway regarding going off-label in a different dosage rate, or using the drug for a disease that is not on the label,” Daly explains.

Therefore, everyone is assured that these medications are being used in the manner for which they were designed. “Most producers and veterinarians want to show the public that the industry is using and always has used these medications in a responsible and appropriate manner,” Daly says. “It is frustrating dealing with some of the new regulations because there is not a lot of hard science behind them regarding how this actually is going to affect antibiotic resistance in humans. At the same time, we want to be able to keep using these drugs, and have these still be available for us to provide treatment.”

By Jan. 1, the drug manufacturers will have labels up-to-date reflecting the FDA requirements. Anyone wishing to use those antibiotics after Jan. 1 will need to have a VFD in hand.

“This also includes drugs purchased before Jan. 1 and ones producers still have on hand and want to use,” Daly says. “The VFD is considered an authorization to feed that medication.”

How to get a VFD

In order for a producer to obtain a VFD, the veterinarian fills out the VFD, giving a copy to the producer, who can then take it to a supplier. “This can be done in paper form, or electronically through online services,” Daly says. Producers should talk with their veterinarians to understand the logistics of how this process will happen with their own operations.

“The rules did leave flexibility in how these can be written,” Daly adds. “Antibiotic companies will be coming out with their own forms, specific to their product, and in some cases this will be helpful.”

Along with changes in authorization needed for use of medically important food-grade drugs, there will be changes in medically important drinking water medications, which will now be classified as prescription drugs.

“It will be similar to how producers currently go to the veterinarian to get a prescription for antibiotic treatment of respiratory disease in a certain animal,” Daly says. “This includes water formulations of tetracyclines and sulfas. Being a prescription drug means there is some flexibility in their use. Veterinarians could authorize extra-label use for these if they think it is necessary, on a case-by-case basis — keeping records and noting withdrawal times.”

In some cases with diseases, Daly says water medication is more feasible for a certain group of animals than feed-grade medications because there may be more options available. “Your

veterinarian will be aware of the possibilities for treating your animals in the best and most appropriate manner.”

Daly says many producers use feed-grade medications out of habit. “These additives may not be based on real need,” he says. “This could be a chance to discuss their feed program with the veterinarian and maybe simplify and reduce some costs. Their veterinarian could work with them on different ways to prevent and treat diseases besides what’s traditionally used in the feed.” **HW**

“Most producers and veterinarians want to show the public that the industry is using and always has used these medications in a responsible and appropriate manner.”

— Russ Daly

