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Problems of beekeeping and the increased importance of veterinarians in EU initiatives

FNOVI's efforts towards the recovery of the beekeeping sector, where there is a glaring lack of health inspection, and its consultations with all of the sector's Italian stakeholders have shed light on how these problems should be tackled at the European level.

We request the FVE to present these findings, and have outlined a few aspects below to this end.

A brief overview of the current situation

As we saw in Palermo, apiculture food products are at risk because of the illegal and widely tolerated use of active pharmaceutical ingredients in beekeeping to treat some bee diseases. These include agrochemicals, drugs registered for other animal species, organic acids of uncertain origin, chemical molecules etc.

The beekeeping sector has been left to its own devices as regards diagnosis, prognosis and treatment options. The results are only too evident, and the situation is now reaching a point of no return.

The importance of the sector and responsibilities

Beekeeping undeniably plays an important role in supplying beehive products and in maintaining a balanced ecosystem, environmental health, biodiversity and agricultural productivity.

It is time the European health authorities took steps to introduce a health policy to put things in order in every European country. DG SANCO and not DG AGRI must be the decision-making body for the sector's health problems. Any person in any country who is not a veterinarian, is not part of the official health management system and has no medical expertise must be ousted.

Our observations regarding the text of the "*European Parliament Resolution of 15.11.11 on honeybee health and the challenges of the beekeeping sector*" are as follows.

Section titled *Research and dissemination of scientific knowledge*:

- a) **Point 4**, the setting up of appropriate national surveillance systems, can only be achieved through the involvement of veterinarians, given that they have exclusive competence in the matter.
- b) The identification and registration of beehives, and annual revision and updating, must be carried out by the competent national authorities so as to obtain genuine and official data rather than estimates or unofficial figures.
- c) It is vital that veterinarians be part of the steering committee mentioned in **Point 9** to assist the Commission to establish the work programme of the EU reference laboratory.
- d) It is also essential that veterinarians be consulted on **Point 15** of the "**Research and dissemination of scientific knowledge**" section.

- e) Veterinarians must be an integral part of the project “**Better Training for Safer Food**”, both as students and as teachers.

Section titled *Veterinary products*: Chemicals will not resolve any health problems. Funding must be directed at exploring other avenues in order to obtain effective and safe responses, in that:

- a) Each substance introduced into a hive remains there for a long period of time, and in some cases can no longer be eliminated. The products of the hive are often contaminated by various chemical substances; their accumulation in the wax forces the bees to cohabit with these substances, thereby weakening them, and also selects pathogens resistant to any chemical molecule. The result is an increase in treatments that worsen bee health.
- b) The abovementioned facts could point to beekeeping’s role in **spreading pharmacologically active molecules into the environment as a result of treatments given in high doses because they are inefficient** (3 or more km around the owner’s hive). This should alert the health authorities involved to the need to identify the causes of bacterial resistance to antibiotics.

Considering the industriousness of any given beehive and the high number of beehives in Europe, the use of antimicrobials in beekeeping¹ must be forbidden.

- c) The next step is to draw up a programme to cure bacterial diseases affecting honeybees, particularly American foulbrood. This can only be done with the collaboration of government and designated veterinarians, and by providing access to the EU veterinary fund to pay compensation for diseased and destroyed hives. Zero tolerance for the presence of antibiotics in honey and beehives would be achieved by establishing a Minimum Required Performance Level for antimicrobials in the various matrices and level of action limits, beyond which the food/animals would be seized and destroyed/put down.
- d) **Point 37** must be tackled using the same criterion: for substances that cannot be “authorized”, a Minimum Required Performance Level must be identified, beyond which health measures (Level of Action limits) become effective.
- e) The issue of the accumulation of authorized treatment substances in beehives and food contamination must be examined.
It could be advisable to establish an MRL for all substances authorized by EU Regulation 37/2010 and used in treatment, particularly for biological products.
- f) The issue of how to distinguish between agricultural contaminants and treatment residues in hives² will have to be tackled.

As regards the **contamination of honey** by chemicals in the environment, we put forward the theory that the presence of chemical molecules – including antibiotics – in honey is due not only to treatments, but also to bees sucking contaminated cattle slurry.

If this theory were found to have a scientific basis, we would have to look at the effective healthiness and safety of honey and its derivatives in which we can no longer exclude the

¹ See the *Communication from the Commission to the European Parliament and the Council of 15.11.11. “Action plan against the rising threats from antimicrobial resistance (AMR)”* and the Commission Recommendation of 27.10.11 “The Microbial Challenge – An Emerging Threat to Human Health”.

²(On this subject, we should point out, for example, the inconsistency between Reg. EU 37/2010 and Reg. EC 178/2006: one has no MRL for tau-fluvalinate deriving from medication in honey, while the other establishes an MRL of 0.01mg/kg deriving from agricultural contamination in honey. We believe this specific point needs to be cleared up).

presence of all the drug molecules used in animal husbandry, environmental pollutants, GM pollens and any other substance for which beekeepers are not directly responsible³.

As regards the **phenomenon of bee die-off**, or CCD (Colony Collapse Disorder), endogenous poisoning could be one of the contributing factors. A **recent American study**⁴ has shown that the use of antibiotics on farms using certain pesticides leads to a higher death rate among bees by inhibiting their resistance to toxic substances, resulting in progressive depopulation and death.

Beeswax absorbs medicines, agricultural pesticides and industrial pollutants, thereby revealing the health history of a beehive and the quality of the environment in which the bees are raised.

In the light of the above considerations and the perspective of a revised regulation regarding medication, no exceptions can be granted in beekeeping to the obligation to have veterinarians prescribe medication. Nor can we allow MRLs for antimicrobials in honey, as this would lead to the relative marketing authorisations for their use in beekeeping and, in addition to leading to bee mortality, would pave the way for the entry of contaminated honey from outside Europe.

IL PRESIDENTE
(Dott. Gaetano Penocchio)

A handwritten signature in black ink, appearing to read 'Penocchio', with a large, stylized initial 'P'.

³ If the theory were found to have a scientific basis, beekeepers could report to us a problem of environmental pollution from veterinary medicines that could require us to rethink their use, including conditions of use on other animal species.

⁴ University of Maryland – attached.