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***Brucella canis*: important information for owners of imported dogs.**

We are writing to explain the potential risks associated with *Brucella canis* (*B. canis*) in imported dogs, and our practice policy for imported dogs that have not been appropriately tested or that receive a positive serology result.

What is *Brucella canis*?

B. canis is a bacterial infection of dogs that can also, although rarely, infect people. Infection has been identified particularly in dogs imported from countries where *B. canis* is more prevalent, including parts of Eastern Europe (Romania and Ukraine). Many infected dogs show no obvious signs of illness but may still carry and transmit the infection.

The greatest concentrations of bacteria are generally associated with reproductive tissues, fluids and birthing material. The organism may also be present in blood and other body fluids. Entire (unneutered) infected dogs, particularly those used for breeding or associated with pregnancy and whelping, therefore present a greater transmission risk.

The overall risk to the general public is considered low. However, some people may be more vulnerable, including young children, pregnant individuals and those with a weakened immune system. Veterinary professionals may also be at increased risk through contact with blood, reproductive material or other potentially infectious body fluids. Following cases involving veterinary personnel, veterinary organisations have recommended appropriate screening of imported dogs and the adoption of protective measures and practice policies to help safeguard veterinary teams, clients and other animals.

Why are we recommending testing?

There has been an increase in *B. canis* cases identified in Great Britain since 2020, with the majority associated with imported dogs. Since 7th October 2025, dogs commercially imported into Great Britain from Romania, including rescue dogs imported for rehoming, are required to have a negative *B. canis* test before importation. This mandatory testing only applies for commercial/rehoming importation only, and does not apply when travelling for personal holidays or trips.

For dogs imported from other countries, or dogs that have had close contact with a confirmed infected dog, testing may still be strongly recommended even where it was not a legal requirement at the time of import.

Where a dog may have been exposed to *B. canis*, antibodies can take up to three months to become detectable. For this reason, where appropriate, we recommend serological screening at least three months after arrival in the United Kingdom or three months after the last potential exposure. Until appropriate testing has been completed, we will record the dog as untested for the purposes of our practice policy.

Access to referral and out-of-hours care for untested imported dogs:

Referral hospitals and out-of-hours emergency providers may operate their own *B. canis* policies and may require evidence of a negative screening result before accepting an imported dog, particularly where hospitalisation or invasive procedures are required. This includes the providers that are used for emergency or continuation of care in our local area.

Consequently, if an imported dog remains untested, we will be unable to arrange transfer for overnight or weekend care, or referral for specialist treatment, at the time it is needed. Having an appropriate negative test result recorded in advance can reduce the risk of delays and also helps protect veterinary staff, other clients and their pets.

Our practice policy for untested imported dogs:

Our policy is intended to reduce avoidable exposure to potentially infectious body fluids while continuing to provide clinically necessary veterinary care.

Routine consultations and emergency assessment can be provided, but additional infection-control measures will be required, including isolation, personal protective equipment and appointment times chosen to minimise contact with other clients and animals.

We will not undertake elective surgery, elective procedures or routine hospitalisation until an appropriate negative screening result is available.

We may decline or modify procedures considered to present an unacceptable exposure risk. We reserve the right to refuse certain high-risk procedures.

Referral or transfer to another provider will remain subject to that provider's own *B. canis* policy. As mentioned above, all out-of-hours emergency providers in our geographical area have taken a policy that prohibits the transfer of care without prior testing.

Testing for *Brucella canis*:

Testing for *B. canis* is performed by a simple blood sample. Samples are submitted to the Government Reference Laboratory at APHA Weybridge.

APHA recommends interpreting the Serum Agglutination Test (SAT) and indirect Enzyme-Linked Immunosorbent Assay (iELISA) together when screening for *B. canis*. These tests look for different types of antibodies produced by the immune system when exposed to *B. canis*. If either test is positive, the dog is considered serologically positive. A positive serology result provides evidence of current or previous infection and should be treated as significant. Unfortunately, serology alone cannot reliably establish whether an individual dog is actively infected and shedding bacteria, chronically infected (a carrier) with potential to shed the bacteria, or has successfully eliminated the infection and now clear.

Our practice policy for dogs with a positive serology result:

We will not provide routine consultations, routine home visits, elective procedures or elective surgery.

Only emergency veterinary care will be provided where it can be undertaken safely, using appropriate isolation and personal protective equipment.

We reserve the right to decline or modify procedures where the risk to staff, other clients or animals is considered unacceptable.

Referral specialist hospitals providers are unlikely to accept the dog under their own infection-control policies.

The emergency out-of-hours providers in this area will not accept the dog under their own infection-control policies.

We are legally prohibited to provide travel services (Animal Health Certificates or Export Health Certificates) for travel outside of the United Kingdom.

A positive laboratory diagnosis of *B. canis* is notifiable in Great Britain and must be reported to the Animal and Plant Health Agency (APHA) for serovigilance purposes.

How is testing performed?

For screening, we send a blood sample to the Government Reference Laboratory at APHA Weybridge. APHA recommends using two serological tests together:

SAT (Serum Agglutination Test) – predominantly detects IgM antibodies, which are more abundant during the earlier stages of active infection.

iELISA (indirect Enzyme-Linked Immunosorbent Assay) – detects IgG antibodies, which are more abundant several months after the early stages of active infection and during chronic infection (memory antibodies).

Laboratory turnaround times can vary, but typically around 21 working days. We therefore recommend arranging screening now in case of any unexpected need for out-of-hours emergency services, referral services or surgical procedures.

If both tests are negative, the sample is considered serologically negative. If either test is positive, the sample is considered serologically positive.

No diagnostic test is perfect. False-positive and false-negative results can occur, and the significance of a result must be considered alongside the dog's history, country of origin, clinical signs and potential exposure (neutering status / breeding prior to export). False-positive results can occur due to cross-reactivity with antibodies from other infectious diseases. In some lower-risk situations, APHA guidance indicates that repeat serology approximately one month after an initial positive result may be considered. Your veterinary surgeon will discuss the appropriate next steps if a positive or unexpected result is received.

Bacterial culture can confirm infection when *B. canis* is successfully grown, but a negative culture does not reliably exclude infection as the bacterium is very challenging to grow. Therefore, this test is not routinely used to determine a negative status. PCR tests that look for the DNA of the bacterium are available from some laboratories; however, APHA does not currently offer PCR tests for screening because validated diagnostic performance data is not currently available.

Boarding and kennels:

Some kennels, boarding establishments, dog day-care providers and other animal-care providers may also request evidence of a negative *B. canis* screening result before accepting an imported dog. Their individual requirements should be checked directly before booking.

What do you need to do?

If your pet has already been tested in the United Kingdom at an appropriate interval after importation or potential exposure, please send us a copy of the laboratory report so that we can update the clinical record.

If testing has not yet been performed, please contact your local Little Hoppers practice to arrange a blood sample. The current cost of our *B. canis* screening test is £90.00 including VAT.

For further information about *B. canis*, including possible signs in dogs and people and how infection can spread, please refer to the GOV.UK guidance: [“Brucella canis: information for the public and dog owners”](#).

If you have concerns about your own health or possible human exposure, please contact your GP or other appropriate healthcare professional.

If you have any questions about our policy or the testing process, please do not hesitate to contact us.

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