

Terrestrial Animal Health Standards
Commission Report

October 2008

CHAPTER 9.1.

ACARAPISOSIS OF HONEY BEES

Article 9.1.1.

General provisions

For the purposes of this Chapter, acarapisosis, acarine disease or tracheal mite infestation is a *disease* of the adult honey bee *Apis mellifera* L., and possibly of other *Apis* species (such as *Apis cerana*). It is caused by the Tarsonemid mite *Acarapis woodi* (Rennie). The mite is an internal obligate parasite of the respiratory system, living and reproducing mainly in the large prothoracic trachea of the bee. Early signs of *infection* normally go unnoticed, and only when *infection* is heavy does it become apparent; this is generally in the early spring. The *infection* spreads by direct contact from adult bee to adult bee, with newly emerged bees under 10 days old being the most susceptible. The mortality rate may range from moderate to high.

Standards for diagnostic tests are described in the *Terrestrial Manual*.

Article 9.1.2.

Determination of the acarapisosis status of a country or zone/compartment

The acarapisosis status of a country or *zone/compartment* (under study) can only be determined after considering the following criteria:

1. a *risk assessment* has been conducted, identifying all potential factors for acarapisosis occurrence and their historic perspective;
2. acarapisosis should be notifiable in the whole country or *zone/compartment* (under study) and all clinical signs suggestive of acarapisosis should be subjected to field and laboratory investigations;
3. an on-going awareness programme should be in place to encourage reporting of all *cases* suggestive of acarapisosis;
4. the *Veterinary Authority* or other *Competent Authority* with responsibility for ~~the health~~ reporting and control of diseases of honey bees should have current knowledge of, and authority over, all domesticated *apiaries* in the whole country.

Article 9.1.3.

Country or zone/compartment (under study) free from acarapisosis1. Historically free status

A country or *zone/compartment* (under study) may be considered free from acarapisosis after conducting a *risk assessment* as referred to in Article 9.1.2. but without formally applying a specific *surveillance* programme if the country or *zone/compartment* (under study) complies with the provisions of Chapter 1.4.

2. Free status as a result of an eradication programme

A country or *zone/compartment* (under study) which does not meet the conditions of point 1 above may be considered free from acarapisosis after conducting a *risk assessment* as referred to in Article 9.1.2. and when:

- a) the *Veterinary Authority* or other *Competent Authority* with responsibility for ~~the health~~ reporting and control of diseases of honey bees has current knowledge of, and authority over, all domesticated *apiaries* existing in the country or *zone/compartment* (under study);
- b) acarapisosis is notifiable in the whole country or *zone/compartment* (under study), and any clinical cases suggestive of acarapisosis are subjected to field and laboratory investigations;
- c) for the 3 years following the last reported *case* of acarapisosis, annual surveys supervised by the *Veterinary Authority*, with negative results, have been carried out on a representative sample of *apiaries* in the country or *zone/compartment* (under study) to provide a confidence level of at least 95% of detecting acarapisosis if at least 1% of the *apiaries* were infected at a within-*apiary* prevalence rate of at least 5% of the hives; such surveys may be targeted towards *apiaries*, areas and seasons with a higher likelihood of *disease*;
- d) to maintain free status, an annual survey supervised by the *Veterinary Authority*, with negative results, is carried out on a representative sample of *apiaries* in the country or *zone/compartment* (under study) to indicate that there has been no new *cases*; such surveys may be targeted towards areas with a higher likelihood of *disease*;
- e) (under study) there is no self-sustaining feral population of *A. mellifera* or other possible host species in the country or *zone/compartment* (under study);
- f) the importation of the *commodities* listed in this Chapter into the country or *zone/compartment* (under study) is carried out in conformity with the recommendations of this Chapter.

Article 9.1.4.

Recommendations on safe commodities

Regardless of the acarapiosis status of the *exporting country*, *Veterinary Authorities* should authorise without restriction the import or transit through their territory of the following *commodities*:

1. honey bee semen and honey bee venom;
2. used equipment associated with beekeeping;
3. honey, beeswax, honey bee-collected pollen, propolis and royal jelly.

Article 9.1.5.

Recommendations for the importation of live queen honey bees, worker bees and drones with or without associated brood combs

Veterinary Authorities of *importing countries* should require the presentation of an *international veterinary certificate* attesting that the bees come from a country or *zone/compartment* (under study) free from acarapiosis.

Article 9.1.6.

Recommendations for the importation of eggs, larvae and pupae of honey bees

Veterinary Authorities of *importing countries* should require the presentation of an *international veterinary certificate* attesting that the products:

1. were sourced from an officially free country or *zone/compartment* (under study); or
2. were examined by an official *laboratory* and declared free of all life stages of *A. woodi*; or
3. have originated from queens in a *quarantine station* and were examined microscopically and found free of all life stages of *A. woodi*.