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4 **VICH GL14 Efficacy of anthelmintics: specific**
5 **recommendations for caprines (Revision 1)**
6 **Draft**

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International Cooperation on Harmonisation of Technical Requirements
for Registration of Veterinary Medicinal Products

VICH GL14 (ANTHELMINTICS CAPRINES)
May 2022
Revision at Step 9
For consultation at Step 4

EFFICACY OF ANTHELMINTICS: SPECIFIC RECOMMENDATIONS FOR CAPRINES (REVISION 1)



Revision at Step 9
Recommended for Consultation at Step 4 of the VICH Process
in May 2022
by the VICH Steering Committee

This Guideline has been developed by the appropriate VICH Expert Working Group will be subject to consultation by the parties, in accordance with the VICH Process. At Step 7 of the Process the final draft is recommended for adoption to the regulatory bodies of the European Union, Japan and USA.

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54 **EFFICACY OF ANTHELMINTICS:**
55 **SPECIFIC RECOMMENDATIONS FOR CAPRINES**

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57
58 **INTRODUCTION**

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60 These guidelines for caprines were developed by the Working Group established by the
61 Veterinary International Cooperation on Harmonization (VICH), Anthelmintic Guidelines and
62 subsequently revised in 2022. They should be read in conjunction with the VICH Efficacy of
63 Anthelmintics: General requirements (VICH GL7) which should be referred to for discussion of
64 broad aspects for providing pivotal data to demonstrate product anthelmintic effectiveness.
65 The present document is structured similarly to VICH GL7 with the aim of simplicity for readers
66 comparing both documents.

67
68 The aim of the guidelines for caprines is (1) to be more specific for certain specific issues for
69 caprines not discussed in VICH GL7; (2) to highlight differences with VICH GL7 on efficacy
70 data requirements and (3) to give explanations for disparities with VICH GL7.

71
72 It is also important to note that technical procedures to be followed in the studies are not the
73 aim of this guideline. We recommend to the sponsors to refer to the pertinent procedures
74 described in detail in other published documents e.g. WAAVP Second Edition of Guidelines
75 for Evaluating the Efficacy of Anthelmintics in Ruminants (Bovine, Ovine, Caprine) Veterinary
76 Parasitology 58: 181-213, 1995, and updated versions as they are published.

77
78 The cost of a full development programme may preclude the development of products for this
79 species, and since the helminth species of caprines are identical to those of ovines, it is
80 recommended that consideration be given to an abbreviated schedule of studies to obtain
81 approval.

82
83 **A. General Elements**

84
85
86 **1 - The Evaluation of Effectiveness Data**

87
88 Only controlled tests based on parasite counts of adults/larvae are acceptable both for the dose
89 determination and dose confirmation studies, since critical tests generally are not considered
90 to be reliable for ruminants. Egg counts/larval identification is the preferred method to evaluate
91 the effectiveness in field studies. Long-acting or sustained-release products should be
92 subjected to the same evaluation procedures as other therapeutic anthelmintics. Adequate
93 parasite infection should be defined in the protocol according to regional prevalence or
94 historical data and/or statistical analysis.

95
96 **2 - Use of Natural or Induced Infections**

97
98 Dose determination studies generally should be conducted using induced infections with either
99 laboratory strains or recent field isolates. If no infection model exists for a parasite species
100 (*Protostrongylidae*, cestodes, *Dicrocoelium* spp.), the use of natural infections instead of
101 induced infections is justified.

102
103 Dose confirmation studies should be conducted using naturally infected animals, however,
104 induced infections or superimposed induced infections can also be used. This procedure will
105 allow a wide range of parasites to be present. For claims against 4th stage larvae, induced
106 infections must be used. For claims against hypobiotic larvae, only natural infections can be
107 considered. Sponsors should aim for a maximum period of accumulation of hypobiotic larvae
108 for the particular parasite species being targeted in trial animals. This will be area or regionally
109 dependent. Specific details on area or regional situations should be obtained from experts on a

110 case by case basis, if needed. In all cases, animals need to be housed (to preclude reinfection)
111 for a minimum of 2 weeks before treatment.

112
113 Persistent efficacy studies should be conducted using induced infections with recent field
114 isolates. The history of the parasites used in the induced infection studies should be included
115 in the final report.
116

117 **3 - Number of Infective Parasitic Forms Recommended for Induced Infections.**

118
119 The number to be used is approximate and will depend on the isolate that is used. The final
120 number of larvae used in the infection should be included in the final report. Table 1 shows the
121 range of numbers recommended for parasites with existing infection models.
122

123 **Table 1 - Number of Infective Stages Used to Produce Adequate Infections in Goats for**
124 **Anthelmintic Evaluation**
125

Parasite Anatomical Location Genus Species	Range of eggs/larvae
Abomasum	
<i>Haemonchus contortus</i>	400 – 4,000
<i>Teladorsagia circumcincta</i>	6,000 – 10,000
<i>Trichostrongylus axei</i>	3,000 – 6,000
Intestines	
<i>Cooperia curticei</i>	3,000 – 6,000
<i>T. colubriformis</i> & <i>T. vitrinus</i>	3,000 – 6,000
<i>Nematodirus</i> spp.	3,000 – 6,000
<i>Oesophagostomum</i> spp.	500 – 1,000
<i>Chabertia ovina</i>	800 – 1,000
<i>Bunostomum trigonocephalum</i>	500 – 1,000
<i>Strongyloides papillosus</i>	80,000
<i>Gaigeria pachyscelis</i>	400
<i>Trichuris</i> spp.	1,000
Lungs	
<i>Dictyocaulus filaria</i>	1,000 – 2,000
Liver	
<i>Fasciola hepatica</i> (metacercaria)	100 - 200 (chronic) 1,000 – 1,500 (acute)

126

127 **4 - Recommendations for the Calculation of Effectiveness**

128 **4.1 Criteria to Grant a Claim**

129 To be granted a claim the following pivotal data should be included:
130

- 131 a) Two dose confirmation studies conducted with a minimum of 6 adequately infected
132 non-medicated animals (control group) in each study. The infection of the animals in
133 the study will be deemed adequate based on historical, parasitological and/or
134 statistical criteria.
- 135 b) The differences in parasite counts between treated and control animals should be
136 statistically significant ($p \leq 0.05$).
- 137 c) Percent efficacy should be 90% or higher and calculated and interpreted using the
138 procedures described in Section 4.2 of VICH GL7.

139 **4.2 Number of Animals (Dose Determination, Dose Confirmation and Persistency Trials)**

140
141 The minimum number of animals required per experimental group is a critical point. Although
142 the number of animals will depend on the possibility to process the data statistically according
143
144
145
146
147

148 to adequate statistical analysis, it has been recommended, to achieve harmonization, that the
149 inclusion of at least 6 animals in each experimental group is a minimum.
150

151 In cases where there are several studies none of which have 6 adequately infected animals in
152 the control group (for example, important rare parasites), the results obtained could be pooled
153 to accumulate 12 animals in the studies; and statistical significance calculated. If the difference
154 is significant ($p < 0.05$), effectiveness may be calculated and if the infection is deemed adequate,
155 the claim may be granted. Sampling techniques and estimation of worm burden should be
156 similar among laboratories involved in the studies to allow adequate and meaningful
157 extrapolation of the results to the population.
158
159

160 **4.3 Adequacy of Infection**

161 The minimum adequate number of helminths in individual control animals should be defined in
162 the protocol. However, final conclusions regarding adequacy of infection will be made as part
163 of the final report based on statistical analysis, historical data, literature review, or expert
164 testimony. The range of caprine helminths (adults) that has been considered adequate to grant
165 a claim will vary according to the species. Generally, a minimum of 100 nematodes in individual
166 control animals is considered an adequate infection. Lower counts are to be expected with
167 *Bunostomum* spp, *Oesophagostomum* spp., *Trichuris* spp., *Gaigeria pachyscelis* and
168 *Dictyocaulus filaria*. For *Fasciola* spp., minimum counts of 20 adults are considered adequate.
169

170 **4.4 Label Claims**

171
172 For adult claims as a general rule the treatment should not be administered earlier than 21 to
173 25 days after infection; optimum for most species is 28 to 32 days. Major exceptions are
174 *Oesophagostomum* spp. (34 to 49 days), *C. ovina* (49 days), *Bunostomum* spp. (52 to 56 days),
175 *Strongyloides papillosus* (14 to 16 days) and *Fasciola* spp. (8 to 12 weeks).
176

177 For L4 claims, treatments should be given on the following days after infection: 3 to 4 days for
178 *Strongyloides papillosus*, 5 to 6 days for *Haemonchus* spp., *Trichostrongylus* spp., and
179 *Cooperia* spp., 7 days for *T. (O.) circumcinca*, 8 to 10 days for *Nematodirus* spp. and *D. filaria*
180 and 15 to 17 days for *Oesophagostomum* spp. The term immature on the labelling is not
181 acceptable for these claims.
182

183 For early immature *Fasciola* spp., treatments should be given 1 to 4 weeks after infection and
184 for late immatures at 6 to 8 weeks.
185

186 **5 - Treatment Procedures**

187
188 The method of administration (oral, parenteral, topical, slow-release etc.), formulation and
189 extent of activity of a product will influence the protocol design. It is advisable to consider the
190 weather and animal relationship with regard to effectiveness of topical formulations. Slow-
191 release products should be tested over the entire proposed effective time unless additional
192 information suggests that this is unnecessary, e.g. blood levels demonstrate steady state at all
193 points of the proposed therapeutic period.
194

195 When the drug is to be administered in the water or in a medicated feed, it should be done as
196 much as possible following the labelling recommendations. Palatability studies may be required
197 for medicated feed. Samples of medicated water or medicated feed should be collected to
198 confirm drug concentration. The amount of medicated product provided to each animal should
199 be recorded to ensure that the treatment satisfies the label recommendations. For products
200 used topically, the impact of weather (e.g. rainfall, UV light), and coat length should be included
201 in the evaluation of the effectiveness of the product.
202

203 **6 - Animal Selection, Allocation and Handling**

204

205
206 Test animals should be clinically healthy and representative of the age, sex, and class for which
207 the claim of the test anthelmintic is to be made. In general, the animals should be ruminating,
208 and older than 3 months of age. Randomization to treatment group should be performed using
209 an adequate method that should be described in the protocol and final report. Blocking should
210 only be employed if it is expected to reduce residual error in the study. If blocking is used,
211 blocks should be included as a random effect in the statistical model. Nevertheless, blocking
212 is not always the most appropriate method for reducing residual error. Alternative methods may
213 therefore be considered e.g. a suitably selected covariate.
214

215 For induced infections, the use of helminth naive animals is recommended. Animals not
216 raised in a helminth-free environment should be treated with an approved anthelmintic,
217 chemically not related to the test drug, to remove pre-existing infections followed by faecal
218 examination to determine that the animals are helminth free.
219

220 Animal housing, feeding and care should follow strict requirements of welfare, including
221 vaccination according to local practices. This information should be provided in the final
222 report. A minimum 7-day acclimatisation period is recommended. Housing and feed/water
223 should be adequate according to the geographical location. Animals should be monitored
224 daily to determine adverse reactions.
225

226 **B. Specific Evaluation Studies**

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228

229 **1 - Dose Determination Studies**

230

231 A dose determination trial and/or sheep/goat comparative pharmacokinetic studies where
232 appropriate, should verify if the dose selected is effective in goats.
233

234 **2 - Dose Confirmation Studies**

235

236 Confirmation studies including at least the dose limiting helminth(s) and stages in each study
237 are needed. If efficacy is demonstrated for the test parasites a claim can be supported for all the
238 helminth species claimed for the sheep host.
239

240 **3 - Field Efficacy Studies**

241

242 The field studies should be replicated in different geographic locations and in animal/production
243 class(es) that represent the conditions of use for the indication being pursued. The protocol
244 should state the number of experimental units per treatment group (sample size), describe
245 allocation (proportion) to treatment groups, and include a brief description of how the sample
246 size was determined. The protocol should also describe procedures for random selection of
247 animals (number and percentage) to be sampled (if faecal samples will not be collected from
248 all available animals in the study), as appropriate, and the methods to be used for both faecal
249 collection and examination. Regardless of whether one or multiple parasites are being
250 evaluated within a study, an appropriate sample size calculation or justification is necessary
251 prior to study conduct.
252

253 Effectiveness against adult nematodes can be assessed by the reduction of faecal egg counts
254 and should be performed using samples from the same animal before and after treatment in
255 both study groups (control and treated). Post-treatment counts are generally made 10-14 days
256 after treatment, but the timing of post-treatment counts will depend on the parasite species
257 and class of anthelmintic evaluated. For example, due to the known effects of macrocyclic
258 lactones on nematode egg suppression, post-treatment counts should be delayed until at least
259 14 days or longer. Efficacy should be calculated using post-treatment faecal egg counts from
260 the treated and control (typically placebo or untreated control) groups. Additionally, a
261 calculation of efficacy using pre- and post-treatment faecal egg counts may provide further
262 information on field effectiveness. Furthermore, additional endpoints for evaluating field

263 effectiveness should be considered as they are developed and generally accepted by experts
264 in veterinary parasitology.

265
266 See also Sections 4.1 and 4.2 of VICH GL7.

267
268 **4 - Persistent Efficacy Studies**
269

270 Two basic study designs have been used to pursue persistent efficacy claims: one using a
271 single challenge, another using multiple daily challenges following treatment. For both
272 procedures, no standardised protocols have been developed. When conducting studies,
273 protocols details should include among other things : determination of larval viability throughout
274 the study, rationale for larval challenge and justification of slaughter time. Parasite naive goats
275 are recommended in these studies. A study design is recommended using multiple daily
276 challenges, as this most closely mimics what occurs in nature.

277
278 A minimum requirement for a persistent efficacy claim (for each duration and helminth claim)
279 should include 2 trials (with worm counts) each with a non-treated and one or more treated
280 groups. At least 6 animals in the control group shall be adequately infected. Persistent efficacy
281 claims will only be granted on a species-by-species basis.

282
283 In the protocol using multiple daily challenges, different groups of animals are treated and
284 exposed to a daily natural or induced challenge for 7, 14, 21 or more days after the treatment,
285 then at approximately 3 weeks after the last challenge (or earlier) the animals are examined
286 for parasite burden. The challenge interval and schedule may vary for longer acting products,
287 and should take into consideration the pharmacological properties of the product.

288
289 Persistent efficacy claims should be supported by a minimum 90% efficacy at each time
290 point and calculated and interpreted using the procedures described in Sections 4.1 and 4.2
291 of VICH GL7. Persistent efficacy claims should be granted for the longest period between
292 treatment and the last challenge where effectiveness criteria are met and all preceding time
293 points tested meet the criteria as well.
294