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PRINCIPAL(S)/PRINCIPAUX: Guy Gravelle, Manager of Media Relations, Canadian Food Inspection Agency;
Dr. Con Kiley, Director of the National Aquatic Animal Health Program, Canadian Food Inspection Agency;
Stephen Stephen, Director of Biotechnology and Aquatic Animal Health Science, Fisheries and Oceans Canada;
Dr. Peter Wright, National Manager, Research and Diagnostic Laboratory System, Fisheries and Oceans Canada;
Dr. Paul Kitching, Chief Veterinarian Officer for British Columbia, B.C. Ministry of Agriculture.

SUBJECT/SUJET: The Canadian Food Inspection Agency, Fisheries and Oceans Canada and the Province of British Columbia Hold a News Conference on the Suspected Infectious Salmon Anaemia Investigation in B.C.

Operator: Good afternoon, ladies and gentlemen. Welcome to the media technical briefing suspected ISA investigation in British Columbia. There will be a question and answer period. At that time, if you have a question, please press star 1. To cancel will be the pound sign. Please limit yourself to one question and one follow-up. I would now like to turn the meeting over to Mr. Guy Gravelle. Please go ahead. Mr. Gravelle.

Bonjour, mesdames et messieurs. Bienvenue à l'appel conférence sur les séances d'information à propos de l'enquête sur les cas suspects d'anémie infectieuse du saumon en Colombie-Britannique. Veuillez noter qu'il y aura une période de questions-réponses. À ce moment-là, si vous avez une question, appuyez sur étoile 1. Si vous voulez annuler votre question, appuyez sur le dièse. Veuillez vous limiter à une question et d'une sous question. Je voudrais maintenant céder la parole à M. Guy Gravelle. La parole est à vous, M. Gravelle.

Guy Gravelle: Merci et bonjour à tous pour être ici pour notre conférence de presse téléphonique aujourd'hui. Je suis Guy Gravelle, gestionnaire des Relations avec les médias de l'Agence canadienne d'inspection des aliments et je suis aussi votre animateur pour la séance d'aujourd'hui.

Good morning. Sorry, good afternoon. And thank you for joining us today. My name is Guy Gravelle. I'm the Manager of Media Relations here at the Canadian Food Inspection Agency and I will also be the moderator for today's event.

Nous avons aujourd'hui avec nous des représentants de l'Agence canadienne d'inspection des aliments, le ministère des Pêcheries et des Océans Canada ainsi que la province de la Colombie-Britannique.

Today, we have representatives from the Canadian Food Inspection Agency, Fisheries and Oceans Canada as well as the province of British Columbia with us today. We are here to discuss the investigation on suspected infectious salmon anaemia and the latest samples testing results.

Nous sommes ici aujourd'hui pour discuter de l'enquête des suspects d'anémie infectieuse du saumon et des résultats des analyses d'échantillons du saumon.

With us today, we have Dr. Con Kiley from the Canadian Food Inspection Agency, Director of the National Aquatic Animal Health Program. We have also Stephen Stephen, Director of Biotechnology and Aquatic Animal Health Science from DFO as well as from DFO Dr. Peter Wright, National Manager, Research and Diagnostic Laboratory System. And from the B.C. Ministry of Agriculture, Dr. Paul Kitching, Chief Veterinarian Officer for British Columbia.

Une période de questions et réponses suivra l'annonce de nos représentants.

A brief question and answer period will follow the announcement by our experts.

Je passe maintenant la parole au Dr Con Kiley de l'ACIA et Stephen Stephen des Pêches et Océans Canada.

I will ask Dr. Con Kiley from the CFIA as well as Stephen Stephen from DFO to provide brief statements. Dr. Kiley.

Dr. Con Kiley: Yes, hi. Good afternoon, everyone. The Government of Canada in collaboration with the province of British Columbia has completed testing all samples related to the suspected infectious salmon anaemia investigation in B.C. Based on the final results, there are no confirmed cases of the disease in wild or farmed salmon in B.C.

Historically, surveillance for infectious salmon anaemia in B.C. has been jointly managed by the aquaculture industry, Fisheries and Oceans Canada and the province of B.C. Under the National Aquatic Animal Health Program, the Canadian Food Inspection Agency now works in collaboration with those organizations and groups to carry out surveillance activities.

The Canadian Food Inspection Agency is currently leading the development of a surveillance plan to complement current surveillance efforts for salmon species in British Columbia. The plan includes surveillance of both wild and farmed species. Details will be released when finalized.

The Canadian Food Inspection Agency has also conducted a preliminary review of an industry-led testing program for farmed species. The review found that there has not been a significant amount – sorry, the review found that there has been a significant amount of testing for viral diseases, including infectious salmon anaemia in farmed fish over the last 10 years. None have ever tested positive for this virus.

Thank you.

Guy Gravelle: Thank you, Dr. Kiley. Steve Stephens (sic), please.

Stephen Stephen: Yes, thank you, Mr. Gravelle. As the Director of Biotechnology and Aquatic Animal Health, I just want to reiterate our role within the National Aquatic Animal Health Program and in particular on our role in this investigation. The CFIA led the investigation into the alleged findings of ISA in fish from B.C. Our laboratory, our National Reference Laboratory in Moncton conducted all tests on all available samples and we did not find any positive fish in any of the samples we tested. Our National Reference Laboratory is part of a network of laboratories we have across the country that are specifically designed and operate to do diagnostic testing on behalf of the National Aquatic Animal Health Program as well as develop and validate diagnostic tests specific to the diseases regulated under the NAAHP.

Thank you.

Guy Gravelle: Merci, M. Stephen. Thank you, Mr. Stephen. On ouvre maintenant la session de questions et réponses aux médias. Un rappel que chaque journaliste aura droit à une question et une question de suivi.

We will now open up the question and answer session. Each reporter is reminded that we are asking you to have one question and one follow-up question only so that we can have as many questions asked and responded to today. Operator, please go ahead.

Operator: Thank you. Merci. Please press star 1 at this time if you have a question. S'il-vous-plaît appuyez sur étoile 1 maintenant pour poser une question. There will be a brief pause while the participants register for questions. Il y aura un court délai vous permettant de vous enregistrer dans la file d'attente pour la période de questions. Thank you for your patience. Merci de patienter. Our first question is from Kurt Petrovic from CBC National News. Please go ahead. La parole est à vous.

Question: Hi. In sort of plain language that you can use, how do you account for the fact that the world expert in this disease, Dr. Kibenge, found evidence that the virus existed in two of 48 samples that he looked at? How is this possible?

Dr. Con Kiley: I'll begin the question – answering that question. Dr. Kiley here. And then I'll pass it on to Stephen Stephen and the people at DFO. Laboratories are independent institutions if they do not exist as part of the Government

of Canada framework in testing for aquatic animal diseases. Let people first appreciate that.

There are three main tests that are associated with this particular virus and I'll allow Peter Wright to speak about it. Based upon the work that the Agency has done and the OIE Reference Lab has shared material with the Agency around this particular investigation, we have been unable to corroborate the results coming out of the OIE Reference Laboratory in the Atlantic Veterinary College.

Recognizing that, we have presently – we are presently carrying out an assessment of the two laboratories involved in this investigation and this assessment will form part of the final investigative report. And at that time, we'll be able to make more definitive statements around testing methodologies, how they should be interpreted and what all of this means vis-à-vis the presence or not of ASIV (ph) virus in Canada. And the testing that is being done is part of the Noles (ph) Laboratory network as part of the Government of Canada network structure states that there is no virus present in the material that we have tested.

Guy Gravelle: Dr. Wright, would you be able to provide additional information on that?

Dr. Peter Wright: Sure. The only thing I would like to say is the tests that were reported out by Dr. Kibenge's lab were real time PCR results and these are considered to be screening tests. So anything that's positive in these tests is considered a presumptive positive which means it would have to go on for confirmatory testing. And that confirmatory testing would require either isolation in cell culture or it would require that the material in that sample be amplified and sequenced in order to identify the virus that's in there. Now neither of those have occurred and even Dr. Kibenge himself has said this has to happen and more testing is required. Dr. Nylund's lab in Norway said the same thing. We have found these to be negative and on our presumptive tests and right now, until there's any evidence of confirmation, it just remains that: presumptive.

Question: So excuse me, can I ask a follow-up then just for clarification purposes? So are you telling me that nobody has done the definitive tests, that Dr. Kibenge and the CFIA have only done these preliminary tests to detect whether or not there's a presumptive positive but the further tests you'd need to establish concretely one way or the other have not been done?

Dr. Peter Wright: Well, what happens – well, cell culture has been attempted. We've done it. Dr. Kibenge's done it and they've been negative. Nobody has been able – well, we haven't been able to amplify a product because we haven't found one. Neither Dr. Kibenge's lab nor Dr. Nylund's lab have been able to amplify the material in there and demonstrate any sequencing. It's been attempted but it's been unsuccessful.

Operator: Thank you. Merci. Our next question is from Judy Lavoie from Times Columnist. Please go ahead. La parole est à vous.

Question: Yes, could somebody tell me exactly which samples were tested and whether the quality of the samples was good enough to get results from?

Dr. Con Kiley: Stephen, you're probably in the best position to answer that.

Stephen Stephen: Yes. We did get tissue — and I'll pass it on to Peter for further clarification, thank you — but we did receive tissues through CFIA's investigation of tissue from kidneys from the 48 fish that were originally implicated in Dr. Kibenge's first reported findings. We did all tests on those 48 fish and got all negative results on the kidney tissues. Peter, if you want to add any more than that?

Dr. Peter Wright: Yeah. We also managed to obtain the carcasses from those original 48 and you have to remember these are very small fish; they're just smolts. Of these 48, of course the hearts had gone to Dr. Kibenge. The gills had gone to Dr. Nylund. What we received were RNA extracts from the kidney that had been extracted at our lab out in Nanaimo and basically the kidney extracts, although they were degraded and no doubt the degradation occurred between the sampling and by the time it hit the lab for necropsy, there was — there was material in there and, as Stephen Stephen said, we have found it negative. We did test — we managed to salvage as much of the gills as we could from these fish and, again, all those 48 were negative. In addition, we had tested 299 other smolts that were collected from the same area at the same time and we found — we did the necropsy on those ones and in testing the hearts from all 299, they were negative. We tested over half of the gills from those fish. They were all negative. But when we ran our quality tests on the RNA on these samples, they were again either partially or fully degraded. And then on top of that, there were 10 or 11 more fish, actually, where the gills and the hearts had been submitted to Dr. Kibenge directly and we received samples from those. He had reported two gills and one heart as being positive. Our testing on those indicated that they were all negative. There were 20 samples in total. We had put those on cell culture. Approximately half of them are what's called cytotoxic and killed the cells immediately which has nothing to do with virus. The others went the full 28 days of incubation. We're now finished that testing and they are also negative. So there was no viable virus in any of these samples. But, again, they were either partially or fully degraded.

Guy Gravelle: Thank you, Dr. Wright.

Question: Does this actually mean that you can say categorically that ISA does not exist in B.C. salmon? How definite is this?

Dr. Con Kiley: Dr. Kiley here. One of the cornerstones of diagnostic testing — and this is true the world over through many, many decades of testing for all kinds of viruses, bacteria, etc. — is that tests are repeatable, that if you get a result, you should

be able to repeat that result when you're using all of the same material to do the testing. That's the cornerstone of diagnostic testing. That did not occur here in any of the laboratories that reported out positive findings. And that cornerstone is crucial here and it's vital.

To answer your question more globally, this is what the surveillance effort that is being proposed will hope to answer going forward. We know that ISAV virus based upon the many, many samples that have been collected through the years in British Columbia in the aquaculture industry are negative. Nevertheless, we are doing an assessment to make sure that all of that sampling does in fact meet the requirements of the CFIA around our broader surveillance goals. When it comes to farmed salmon, that is the reason we are doing that.

Now when it comes to wild salmon, we are and continue to work on designing a comprehensive surveillance plan that will help to assist everyone in concluding whether there is virus or not in that part of British Columbia. It hasn't been found to date. The surveillance will add further evidence if that's the case.

Guy Gravelle: Thank you, Dr. Kiley.

Operator: Thank you. Merci. Once again, please press star 1 on your telephone keypad if you have a question. De nouveau, n'hésitez pas à appuyer sur étoile 1 pour toute question. Our next question is from Greg Wells (ph) from the Seattle (ph) Times. Please go ahead. La parole est à vous.

Question: I actually would love to hear a little more explanation about what you think -- how you think the discrepancy -- what you think the discrepancy is between the initial test results and what you're finding. Is it as simple as just the PSR is only presumptive positive or is there something else that you would think might be going on here?

Dr. Con Kiley: Well, Dr. Kiley answering here, and one of the things that a thorough investigation ensures happens is that we do not speculate on what may be occurring. We gather all of the information, look at all of the test methodologies, make sure that any concerns around cross contamination or cross reaction have all been addressed and based upon that comprehensive analysis then make some determinations as to what occurred in this particular circumstance. We may never be able to say definitively one way or the other as to what occurred but that is what the lab assessment is about and that is what our investigation is about.

Stephen Stephen: It's Stephen Stephen here. I just want to reiterate what was said a little bit earlier that Dr. Kibenge himself also noted that he had concerns and his preliminary results have stated that further testing is required.

Question: Sure, sure. But I guess what I'm trying to ask is the same thing that I would imagine everybody wants to know is I don't get a sense of what level of confidence you have at this point that there -- there is no ISA virus on the west coast.

Dr. Con Kiley: Dr. Kiley here again. I don't necessarily want to repeat myself but we have made the statement here that based upon the final results that have been completed, there are no confirmed cases of the disease ISAV virus in wild or farmed salmon in British Columbia. The surveillance will add more information on that particular piece that I've just described.

You used the word I guess. That's not a word that is in the Agency's vocabulary. We do investigations and we base it upon science and we let science be our guiding principle. So at the end of the day, we'll be making statements but they will have nothing to do with the word guess.

Guy Gravelle: Thank you. Dr. Kiley.

Operator: Thank you. Merci. We do have a follow-up question from Kurt Petrovic from CBC National News. Please go ahead. La parole est à vous.

Question: I just want to clarify. So essentially, you looked at the same, the actual same samples in terms of the fish, the 48 fish that Dr. Kibenge looked at except he looked at heart tissue, I understand and you, because those samples were exhausted, you looked at other things — extracts of liver, gills, etc. But then you also looked at another 299 fish, if I have that number correct, that were collected at the same time.

So my question is is it possible that this virus or the — there's a potential for the virus to be carried in certain organs of the body like the heart that you weren't able to examine? Is there something that perhaps is unknown or unclear about this virus and how it may act in wild salmon that is perhaps a possible explanation for what it was detected at some level by one expert but not by others who looked at different samples?

Dr. Peter Wright: Well, it's Peter here. Just to try and answer you on that one, on the original 48, you're right, the amount of sample was very small. Dr. Kibenge did test the hearts. We tested the kidney, the RNA extracts from the kidney and this is an RNA virus. And we did test the same gill material because there was sufficient amount there that Dr. Nylund tested. I mean you are right in that certain viruses have certain predilection for certain tissues. For ISA as it is known to occur, the kidney, the heart are two of the target organs for this virus and the gill as well except the problem with the gill is there can be environmental contaminants there, of course because it's on the outside of the body. When we went back into those 299 that had been previously untouched, we did harvest heart, kidney and gill from those. The tissues that would have the highest probability of detection would have been the heart and gill and that's what we tested. We didn't — because they were all negative, we hadn't gone on to the kidney.

But, as I say, we did test the kidney extracts from the 48. We did manage to test the very same tissue samples that Dr. Kibenge tested from those 11 fish that he received in

a separate submission. We received those as tissue homogenates in cell culture fluid, or medium, rather. So in that case we did test the very same material he did on those 20 samples from those 11 fish. And they were all negative and negative by cell culture as well.

Guy Gravelle: Thank you, Dr. Wright.

Operator: Thank you. Merci. We have a question from Rod Link from Terrace Standard. Please go ahead. La parole est à vous.

Question: Yes. Apparently there are still some independent samples that are being taken on the west coast and sent to Dr. Kibenge's lab and Dr. Nylund's lab in Norway and these are independent of the samples that the CFIA are currently looking at. And those samples are still registering positives for ISAV. I'm just wondering why these other labs are still finding the signature for this virus and the CFIA cannot.

And, as a related question, there was in the U.S. media recently reports that – a report that was prepared or a paper prepared in 2004 about finding infectious salmon anaemia virus in 117 samples in the Pacific Ocean in 2002 and 2003 which seems to be – both these things seem to be inconsistent with what we're hearing today. I was just wondering if somebody could elaborate on that.

Dr. Con Kiley: Dr. Kiley here. Let me confirm again that the testing that has been done as part of the National Aquatic Animal Health Network Laboratories, the testing that has been performed has been negative. And we would consider the results that have been reported by Dr. Nylund's lab where he was unable to repeat tests and that is part of his report, the Canadian Food Inspection Agency considers those tests to be negative also. And diagnostic technicians and diagnostic specialists who would look at that type of work would consider the more appropriate result coming out there should inform the submitter that the tests are negative.

This is why the Agency carried out this investigation and this is why the Agency is following through on doing the lab assessment on the two laboratories where we have control within the broader Canadian context and that is the OIE Reference Laboratory in the Atlantic Veterinary College and the DFO Laboratory in Moncton.

We cannot confirm the presence of the virus. We cannot confirm any positives. And we are moving forward with a surveillance plan that will further describe what may be occurring in fish off the coast of British Columbia. And that surveillance will add to the knowledge base around diseases and viruses in fish and fish health in B.C.

Question: I'm sorry, but I don't think you answered my question. I was relating to other samples that have been taken since. You keep going back to these samples that were additionally tested by Dr. Nylund and by Dr. Kibenge and you say you cannot confirm their findings and, yes, they had some problems. I'm referring to

other samples that have been taken since then that have since been sent to those laboratories and they're still showing positives for ISAV. And the other thing —

Dr. Con Kiley: Let me draw back – let me draw back —

Question: --- the study – the study that was looked at in 2002, 2003 was done at the Pacific Biological Station which is a CFIA laboratory. I was wondering what was the follow-up, the follow-up from that information.

Dr. Peter Wright: It's Peter. Can I answer the first part of your question? The original 48 were tested – different tissues were tested by Dr. Nylund, Dr. Kibenge and ourselves. And Dr. Nylund indicated in his first report, and there's only two reports that I'm aware of now, in that first report on those original 48, he had prior knowledge of what the results were from Dr. Kibenge's lab and he did multiple, multiple, multiple tests on the equivalent gill that matched the heart. And, again, he only came up with one positive and he said he could not repeat it. It was tested multiple times. Now we've tested those same gills. We've found them negative. He only got one reaction out of multiple testing on those gills. The other gill was totally negative. So we have tested the same thing and he said himself this is not repeatable.

And then on his second set, we did not receive those samples. But, again, he did multiple testing on them, up to five times, and he found two very weak positives and he's basically said, and I'll quote, I've got the report in front of me, "This fact raises the question what are we testing (ph) in his ISAV 7, segment 7 assay. Based on my experience with both assays, which includes a segment 8 assay, a reasonable answer to this question is that we are not detecting any known ISA viruses from Europe or from Eastern North America. A more exact answer requires that we be able to sequence the RNA that is the target of his ISAV 7 assay." And he hasn't been able to do it because it's not repeatable.

Does that answer your question?

Question: It does in relation to the initial samples.

Stephen Stephen: It's Stephen Stephen. With respect to your second part of your question —

Question: I keep saying that there are more samples being tested at their laboratories.

Dr. Peter Wright: What I've just referred to in this second report are those other samples. There's only two reports out there.

Dr. Con Kiley: The Agency has received what we call three (ph) notifications of a positive and a positive finding and we have to consider, as we have described already today, the use of the word finding. The Agency, the CFIA under law,

under Canadian law, under the Health of Animals Act, if somebody suspects the presence or tests indicate that ISAV virus could be present, they are legally bound to notify the CFIA of that particular occurrence. We have three (ph) notifications. Two we've spoken to a little bit already. We had a third which involved a sample that went in that included some heart tissue which Dr. Kibenge also reported out there could be some positives there. And, again, we were unable to repeat that in our own Noles (ph) Reference Laboratory in DFO.

So the positives you're talking about are information that's in the public realm. All the testing that has been done through prescribed laboratory networks in Canada for these diseases have come up with negative results.

Stephen Stephen: Mr. Link, it's Stephen Stephen from Fisheries and Oceans. I'll just, if you give me a moment, reply to your second question. I want to clarify a couple points though. You mentioned that the Pacific Biological Station is a CFIA facility and in fact it is a Fisheries and Oceans facility. The paper you're alluding to that's appeared in the press most recently is actually a draft research paper. It was done – the lead author is Dr. Molly Kibenge who was a postdoctoral student at – researcher at the Station at the time. And at that time when she found presumptive positives of the results of potential ISA in B.C., we did thorough investigation into her findings. We sent her samples to our laboratory in Moncton and they did multiple tests, replicates of the test to try and find the ISA virus that she had reported on and she – we were unable to find – reproduce any of her results. So, based on that, our scientists concluded that there is no presence of ISA in her samples.

Guy Gravelle: Thank you, Mr. Stephen. We'll move on to the next question now.

Operator: Thank you. Our next question is from Mark Hume from the Globe and Mail. Please go ahead. La parole est à vous.

Question: Thank you. Dr. Kiley, can you tell me, it's confusing for us because you have labs getting positives and then you're unable to repeat it. But the CFIA has, I'm sure, dealt with this virus before on the east coast. Is this kind of a typical problem? Is this a virus that's very difficult to detect or when it's there do you get a strong – strong signals that are repeated over and over again in your tests?

Dr. Con Kiley: Well, Peter can assist a little bit with my answer here. The CFIA became involved when we had legislation that came into force as of January of this year. Prior to that, the responsibility for these particular diseases resided primarily with DFO.

With respect to the difficulty in sampling and testing for this particular virus, I think all of the information provided by the various laboratories here indicates that, yes, it's difficult but there is an array of tests that do allow you to make some statements around presence or not of the virus. And those tests, the definitive tests are sequencing the

virus, being able to describe a major part of its genome so that you can say definitively that that is the virus or actually being able to culture the virus and that is grow it and be able to see it and describe it. And the latter two have not occurred in this particular circumstance that the Agency or DFO is aware of.

Now with respect to the situation in New Brunswick and testing that has previously been done there, Peter.

Dr. Peter Wright: Well, again, this was before my time as well. But, to answer your question, if you have an ISA infection in a fish and it's actually causing disease, then the – as the disease, the incubation course goes, you get a greater and greater and greater amount of virus load in the fish and if by the time disease symptoms appear, the ability to, sorry, to detect it is quite straightforward because there's so much of it there. It's in the early stages where all the tests have a problem where the virus load is very low. There are certain strains of ISA that are nonpathogenic, meaning they don't cause disease. So they occur at a very low level but they are detectable. And the test that we are using here, the test that uses segment 8 of the virus, is considered to be the universal one and that's what's used worldwide for screening and it's – it's able to pick up the nonpathogenic as well as pathogenic forms. But of course the virus —

Stephen Stephen: It's Stephen here. I'd just like to add something —

Dr. Peter Wright: --- (inaudible, speaking at the same time as Mr. Stephen) nonpathogenic ones is very, very low so of course you're not going to get very strong results but they are repeatable results. And that's the key: it has to be repeatable, as Dr. Kiley said.

Question: So just to follow up then, with the new sort of surveillance regime that the CFIA is rolling out here on the west coast, Dr. Kiley, I assume you'll be able at some point to give us a definitive answer as to whether this virus is here or is not here and how long would that take?

Dr. Con Kiley: Our plan right now is to collect the samples to do – to do – we are putting together – we have the comprehensive plan put together but we need to move it out and discuss it with stakeholders, both for individuals that are involved with farmed fish and also where we can collect fish from the wild. Our best opportunity, window of opportunity to collect fish from the wild that'll give us the best representative sample and the best opportunity to pick up this virus and perhaps other viruses would be a timeline between March and November of next year, 2012. And that is how we're proceeding with the plan and that it our hope for implementation.

Guy Gravelle: Thank you, Dr. Kiley.

Stephen Stephen: It's Stephen Stephen here. I'd just like to add one more point. You have to remember based on that question that there has been thousands of

samples, in fact over 5,000 samples tested over the last six to eight years in B.C. and never has the virus been identified, never has the virus been isolated, never has the virus been sequenced in any fish in B.C. And that remains from the – so we have a history already and the surveillance will in the future continue to provide us a level of history but we have much evidence at the moment that the virus is not there, including this current investigation.

Dr. Con Kiley: Yeah, that's why we use the word, Stephen, as you know, to complement current surveillance efforts.

Guy Gravelle: Thank you, everyone. I just wanted to clarify. We have time for approximately two more – two more callers and then we'll have to call it a day. Please, Operator, next call.

Operator: Thank you. Once again, please press star 1 on your telephone keypad if you have a question. De nouveau, n'hésitez pas à appuyer sur étoile 1 pour toute question. There are no further questions registered at this time. I would like to turn the meeting back over to you, Mr. Gravelle. Nous n'avons plus de questions pour le moment. Je vous retourne la parole, M. Gravelle.

Guy Gravelle: Merci à tous nos experts techniques pour les commentaires. Thank you again to all our technical experts today for their comments and their responses. I would like to remind everyone that should you have further questions regarding testing, specific testing and methodology, please contact the Department of Fisheries and Oceans Canada Media Relations line at 613-990-7537. Should you have questions regarding anything else surrounding this issue, please contact the Canadian Food Inspection Agency Media Relations Line at 613-773-6600. Also want to remind everybody on the line that we do have a news release that has gone out for additional information.

Thank you and have yourselves a good day.

Operator: Thank you. The conference has now ended. Please disconnect your lines at this time and we thank you for your participation. La conférence est maintenant terminée. Veuillez s'il-vous-plaît raccrocher votre ligne. Merci à tous les participants qui se sont joints.