



CgFARAD™ NEWSLETTER

DECEMBER 2025

CgFARAD™ Stakeholder Update

We have held a stakeholder meeting every second year since 2015. Since 2021, these have been virtual meetings. The intent of these meetings is to connect with financial supporters and provide transparency regarding activities and finances. This newsletter summarizes the information shared during the November 26, 2025, stakeholder meeting. In addition to the regular updates, the two research students at the University of Guelph working on CgFARAD™ funded projects gave presentations on their work.

CgFARAD™ Role and Mandate – Dr. Jonas Goring, CgFARAD™ Advisory Board Chair

CgFARAD™ protects the Canadian food supply from unsafe or violative drug and chemical residues by providing expert advice to veterinarians on withdrawal times. Veterinarians are legally permitted to prescribe drugs in an extra label manner (i.e. for disease indications, or doses or duration of treatments that are different than the approved drug labelling) but must use new withdrawal guidelines. CgFARAD™ provides veterinarians with unbiased expertise on the medicinal withdrawal interval required before animals or animal products can enter the food chain both from a food safety and a residue detection perspective.

A CgFARAD™ recommendation must be obtained when drugs are used extra-label for all processed poultry and eggs. All other CgFARAD™ requests are submitted on a voluntary basis by veterinarians on behalf of their producer clients or feed companies.

CgFARAD™ personnel also assist:

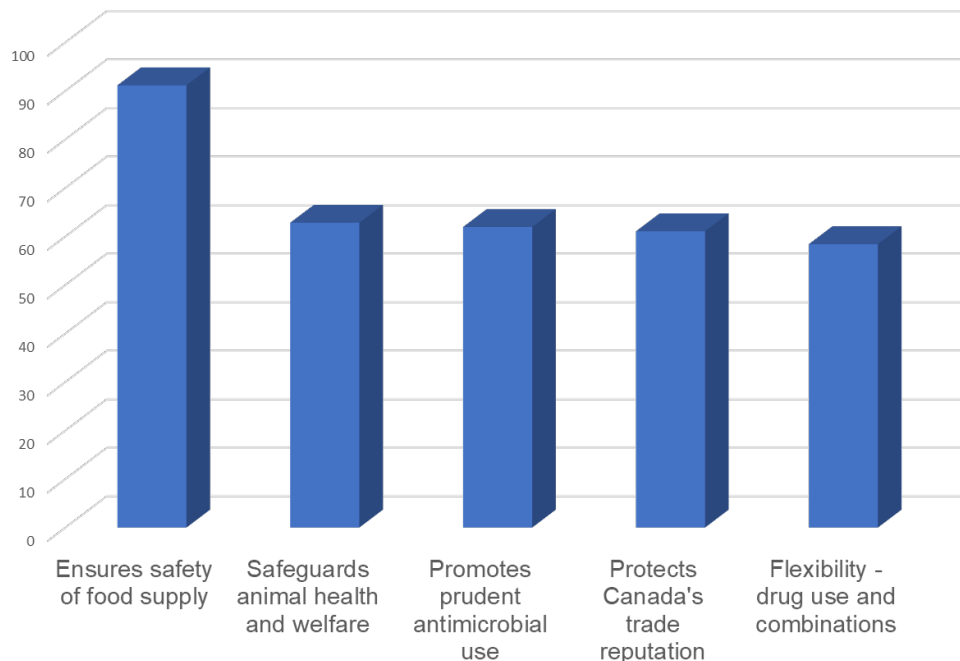
- veterinarians in determining safe withdrawal intervals when animals are accidentally exposed to pesticides, heavy metals or other chemicals;
- feed mills and processors when accidental contamination of feeds occur; and,
- regulatory agencies seeking clinical pharmacological expertise regarding drug residues.

In 2021, CgFARAD™ surveyed our financial supporters and asked them to identify the benefits provided by the service. Stakeholders' rankings are listed below with 1 being the top priority.

1. Ensures the safety of Canada's food system
2. Safeguards animal health and welfare
3. Promotes prudent antimicrobial use
4. Protects Canada's reputation nationally and with international trading partners and export markets
5. Provides flexibility to use certain drug combinations that would otherwise not be available
6. Helps mitigate the limitation in number of licensed/registered veterinary pharmaceuticals in Canada
7. Facilitates knowledge transfer to veterinarians, commodity groups and other stakeholders through dissemination of research and educational materials

8. Conducts critical research related to drug use in food producing animals
9. In some situations, there is a regulatory requirement to obtain CgFARAD™ recommendation
10. Contributes to the competitiveness of Canada's agricultural sector

Top Five Benefits of CgFARAD™ from 2021 Survey



During the Stakeholder Update it was discussed that we should redo the survey since it has been four years since the last one. Staff will launch a survey in 2026 and report the results in the newsletter as the next stakeholder meeting will not be for two years.

Dr. Goring thanked all our financial supporters in ensuring this valuable service is maintained for the Canadian food supply chain. See pages 9 to 11 for the list of current supporters.

CgFARAD™ Advisory Structure and Administration – Susan Fitzgerald, Administrator

Susan Fitzgerald provided an overview of the structure of CgFARAD™. CgFARAD™ is an unincorporated, not-for-profit organization. The service is managed by two Co-Directors, veterinary clinical pharmacologists Dr. Trisha Dowling and Dr. Ron Johnson with the support of Dr. Saad Enouri, staff clinical pharmacologist. Dr. Ronan Chapuis provides withdrawal recommendations in French when required. The Co-Directors provide pharmacological expertise and administrative oversight. Fitzgerald & Co. looks after office administration, communications and finance.

A Stakeholder Advisory Board provides guidance and strategic advice to the CgFARAD™ co-directors on business and finance matters. The seats on the Advisory Board have been selected to represent the various sectors and stakeholders with an interest in CgFARAD™ activities and services. The membership consists of the following groups:

- CgFARAD™ co-directors (2 seats)
- Commodity association representatives (3 seats)
- Pharmaceutical company representative (1 seat)
- Canadian Animal Health Institute (1 seat)
- Veterinarian association representatives (2 seats)
- Feed and processing industry representative (1 seat)
- Animalytix (1 seat)
- Canadian Food Inspection Agency (1 seat)

Below are the 2025-2026 CgFARAD™ Advisory Board Members:

Name	Organization	Advisory Board Seat
Ron Johnson	CgFARAD™	Co-director
Trisha Dowling	CgFARAD™	Co-director
Catherine Filejski	Canadian Animal Health Institute	Canadian Animal Health Institute
Denis Carrier	Merck	Pharmaceutical company
Skyler Veazey	Canadian Poultry and Egg Processors	Feed and processing
Steve Leech	Chicken Farmers of Canada	Commodity association
Melissa Moggy	Dairy Farmers of Canada	Commodity association
Egan Brockhoff	Canadian Pork Council	Commodity association
Mike Petrik	Veterinarian	Veterinarian association
Jessica Law	Canadian Veterinary Medical Association	Veterinarian association
Jonas Goring - Chair	Animalytix	Pharmaceutical data
Christopher Coulis	Canadian Food Inspection Agency	Government - regulatory

Financial Report

The CgFARAD™ fiscal is May 1 to April 30. The 2024-2025 year-ending financial statement was discussed. Total revenue collected was \$234,233.18. CgFARAD™ is funded by four stakeholder groups: national livestock and poultry associations; pharmaceutical companies; feed and processing associations; and veterinary associations. No contribution was received from CFIA this year. All other annual financial contributions were received as invoiced.

One unbudgeted expense was the cost of moving the CgFARAD™ database and website from the University of Saskatchewan (\$13,900). All other expense items were at or under budget. Total expenses were \$316,969.80 for a loss of \$82,736.62. Current bank balance is \$129,798.58 with \$300,000 invested in GICs as a one-year operating reserve.

Projected Revenue - Stakeholder Contributions	2024-2025 Year-end	2024-2025 Budget	2025-2026 Budget
National Producer Organizations	\$112,483.00	\$112,486.00	\$116,982.00
Veterinarian Associations	\$17,189.00	\$17,186.00	\$17,878.00
Pharmaceutical Industry	\$57,367.00	\$57,366.00	\$59,668.00
Processing and Feed Associations	\$20,247.00	\$20,245.00	\$21,060.00
CFIA Stakeholder Support		\$160,000.00	
HST Collected	\$26,947.18		
HST Refund			
Total	\$234,233.18	\$367,283.00	\$215,588.00
Annual Operating Expenses			
Consulting Fees Clinical Pharmacologists	\$86,528.00	\$86,528.00	\$89,992.00
Salaries and Benefits Veterinarian	\$102,657.95	\$104,000.00	\$108,300.00
Francophone translation/response support	\$300.00	\$2,500.00	\$2,500.00
Administration - Susan	\$13,401.50	\$20,000.00	\$20,000.00
Research	\$25,000.00	\$50,000.00	
Graduate student	\$20,000.00	\$20,000.00	\$20,000.00
KTT activities		\$2,500.00	
Translation - stakeholder communications	\$390.00	\$2,000.00	\$1,000.00
University office space and overhead	\$15,398.69	\$15,600.00	\$16,224.00
Database	\$13,900.00		\$4,000.00
Office expenses/computer/equipment	\$2,639.92	\$8,000.00	\$4,000.00
Conf./Educ./Mileage/Parking/Travel		\$2,000.00	
Year-end Financial Review	\$1,500.00	\$1,400.00	\$1,500.00
Insurance	\$1,000.00	\$1,000.00	\$1,000.00
Bank Fees	\$109.20	\$100.00	\$110.00
HST Paid	\$10,597.43		
HST Remitted	\$23,547.11		
Total Expenses	\$316,969.80	\$315,628.00	\$268,626.00
Excess of revenues over expenses (expenses over revenues)	-\$82,736.62	\$51,655.00	-\$53,038.00
Opening bank balance	\$212,535.20		
Current bank balance	\$129,798.58		
Investments	\$300,000.00		
Total Assets	\$429,798.58		

The budget for 2025-2026 presumes no loss of stakeholders and includes an increase of 4% for annual stakeholder contributions. The 4% annual increase is consistent with the five-year budget plan which goes to 2026-2027 ending April 30, 2027. The 2025-2026 budget does not include a contribution from CFIA. A two-year commitment of \$20,000 per year for a research graduate student began last year and will continue in 2025-2026.

This was an item included in our five-year budget plan but will be discontinued once the current commitment is complete. No research contribution is planned this year. The resulting budget projects a loss of \$53,038 for 2025-2026. Fortunately, there are sufficient reserves to sustain CgFARAD™ while the Board explores options to balance future years' budgets.

There is the possibility that CFIA will resume contributions in the future. The need for and value of CgFARAD™ should be articulated to CFIA and other government agencies by the stakeholders. There is an opportunity to link funding for CgFARAD™ to advocacy work on access to veterinary pharmaceuticals. Over the last eight years, there has been a dramatic 42.3% decrease in the availability of licensed veterinary drugs. With the problem of few new food animal drug approvals and the continuing loss of drugs from the market, we expect that veterinarians will be forced to increase their extra label drug use to protect animal health.

Stakeholders can also make a connection between CgFARAD™'s work and the goals of the Pan-Canadian Action Plan on Antimicrobial Use on prudent drug use. The CgFARAD™ personnel provide withdrawal guidance as our major mandate but are playing an increasing role in the promotion of antimicrobial stewardship.

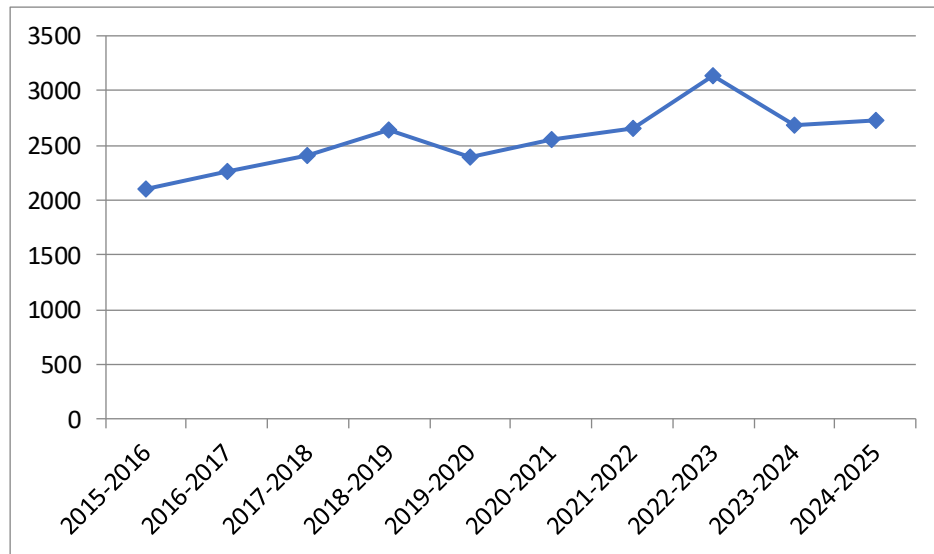
There was a request from stakeholders for a financial update and budget status in spring. Susan indicated she would include a summary in the spring Board report (May 2026).

Overview of Service Requests – Dr. Trisha Dowling, Co-Director

Dr. Dowling explained that CgFARAD™ really only has two missions. First and foremost, we focus on doing our part to keep the human food supply safe. And, secondly, ensure there are no violative detections of veterinary products at processing. So, in evaluating drug use and developing withdrawal recommendations, we always consider human safety first. Then, because of the capabilities of modern analytical chemistry, we often find ourselves making recommendations that are longer than what is needed for human safety but are required because of the very low limits of detection by the Canadian Food Inspection Agency.

With the retirement of Dr Trisha Dowling from the Western College of Veterinary Medicine at the University of Saskatchewan, it was necessary to move the CgFARAD™ database from the UofS servers. Our database is now hosted by FIXRS in Quebec at cgfarad.ca. There were also some security and functionality upgrades required which were addressed by the migration. Requests can be submitted at <https://cgfarad.ca/request-withdrawal-information/>. Dr. Dowling continues to work as co-director of the CgFARAD™ so there are no changes to the request for withdrawal information service.

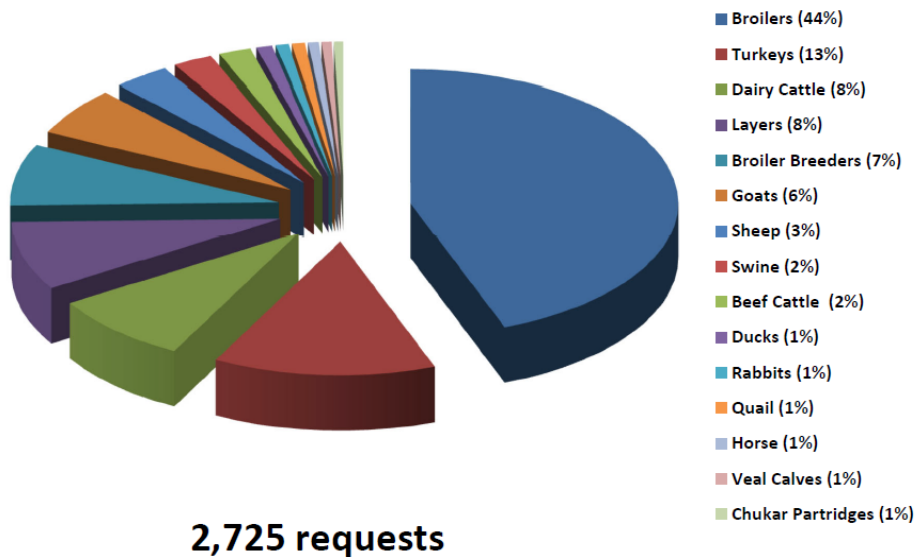
The total number of requests in 2024-2025 increased slightly over 2023-2024 reflecting the general upward trend seen since 2015. A spike in 2022-2023, of 493 additional requests, was the highest number of annual requests received. In the chart on the following page, you can see the number of requests has been increasing by approximately 200 per year.



CgFARAD™ responded to 2,725 requests in 2024-2025 covering 24 different species. This was up slightly as compared to 2023-2024 (2,687). The poultry sector is the largest user of the service followed by dairy cattle.

CgFARAD™ Requests by Commodity Group

May 1, 2024 to April 30, 2025



CgFARAD™ and Food Safety Related Research – Dr. Ron Johnson, Co-Director

CgFARAD™ has received numerous requests for withdrawal advice in lactating dairy cattle and beef cattle for both on label and extra-label use of injectable dexamethasone. The most common uses are for analgesia and anti-inflammatory activity (mainly associated with calving trauma), followed by adjunct treatment of atypical interstitial pneumonia and other respiratory conditions, induction of abortion, and treatment of ketosis (dairy cattle). CgFARAD™ has provided conservative withdrawal recommendations of 10 days for meat and 96 hours for milk for most on label uses of injectable dexamethasone, with extended extra-label withdrawal recommendations depending on dosage regimens used and the condition being treated.

With support from the Dairy Farmers of Ontario, Beef Farmers of Ontario, and the Ontario Ministry of Agriculture, Food, and Agribusiness (OMAFRA), the CgFARAD™ personnel in conjunction with researchers from the Western College of Veterinary Medicine and the Ontario Veterinary College conducted residue depletion studies.

The objectives of this study were to determine the residue depletion profile of dexamethasone after an extra-label dosage regimen in milk of healthy lactating dairy cattle (n = 18) and in edible tissues of healthy beef cattle (n = 16) and to suggest withdrawal intervals. Dexamethasone was administered intramuscularly at 0.05 mg/kg daily for 3 days. Milk samples were collected prior to treatment and every 12 h up to 96 h post-dose. Muscle, liver, kidney, and peri-renal fat tissues were collected from beef cattle at 3, 7, 11, or 15 days post-dose. Dexamethasone analysis was performed by liquid chromatography/mass spectrophotometry. Dexamethasone residues were detected in milk samples up to 36 h. Muscle and fat had no detectable dexamethasone residues while kidney and liver had detectable residues only on day 3 post-dose. A withdrawal interval of 48 h for milk in Canadian dairy cattle and 7 days for meat in Canadian beef cattle are suggested for the dexamethasone treatment regimen most commonly requested to CgFARAD™.

The results of the study are published in the Journal of Veterinary Pharmacology and Therapeutics September, 2023: <https://onlinelibrary.wiley.com/doi/10.1111/jvp.13409>. That article was the most downloaded paper from that journal in 2023.

Use of Needle-Free Injection Device at Processing: Efficacy and Welfare Considerations (Partial funding provided by CgFARAD™)

Presented by: Minh Man Pham, DVM (DVSc. Candidate), Alexis Buzby (MSc. Candidate)

Faculty Advisors: Terri O'Sullivan, Ron Johnson

These studies aimed to evaluate the efficacy of intramuscular meloxicam and iron-dextran administration by needle-free injection device (NFID) compared to conventional needle-syringe (NS) in nursing piglets. The first randomized control trial analyzing the pharmacokinetics of meloxicam found piglets injected by NFID had lower pharmacokinetic values (Cmax, AUC) than piglets injected by NS. This may



have been due to suboptimal NFID configuration and settings. However, we cannot assume that NS is a better route of administration for meloxicam using only plasma concentration, because the efficacy of meloxicam as an NSAID is correlated to the concentration at the site of inflammation. Further research into the clinical response of meloxicam via NFID is suggested. For more information, this paper has been published in the Journal of Veterinary Pharmacology and Therapeutics. Scan the QR code to access the paper.

The second trial explored the efficacy of iron dextran supplementation by NFID compared to NS in preventing iron deficiency anemia (IDA) in piglets at weaning. 76 piglets were randomly assigned to receive intramuscular iron dextran by either NFID or NS. Blood samples and weights were taken before treatment (Day 3) and at weaning (Day 19). Results show both groups achieved normal hemoglobin levels at wean (Highest acceptable cutoff =110 g/L; NFID=114g/L, NS=120g/L), as well as acceptable wean weights (NFID=6.04kg, NS=6.34kg) and normal rates of average daily gain (NFID=255, NS=265), successfully preventing IDA and promoting growth.

The final study evaluated the impact of injection method on behavioural pain response indicators during intramuscular iron dextran supplementation. Total injection time was also recorded as a production indicator for commercial NFID use. 209 litters were randomized into three groups for treatment: (1.) one needle for each piglet (Control), (2.) one needle for the entire litter (Repeated), (3.) NFID for the entire litter (NFID). The first and last piglet in the litter were restrained for treatment and their vocalizations and retreat behaviour were recorded for 10 seconds following injection. A frequency cutoff of 1,000 Hz was used to classify calls of emotional negativity (High Frequency, HF). Results show no significant differences between groups in average call frequency or duration. However, piglets in the NFID group produced the lowest proportion of HF calls compared to NS (NFID=73%, Repeated=85%, Control=81%). Piglets treated by NFID were also more likely to show no reaction after injection compared to piglets treated by NS. Total injection time was faster via NFID compared to conventional NS (Repeated), with an average difference of 5.0 seconds per litter ($p<0.001$). In a commercial setting, this difference will increase as multiple litters are processed at the same time.

In summary, needle-free injection technology is as effective as conventional NS for iron dextran supplementation in piglets. At the time of injection, NFID use improved welfare indicators and reduced total injection time compared to NS. At weaning, NFID use effectively prevented IDA and promoted growth, equivalent to NS. Further research is needed to evaluate the efficacy of NFID for meloxicam administration in piglets.

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