



## Springtime in your bee colonies - Lay a solid foundation for a healthy season!

As the days are getting longer, and we are all looking forward to those extra rays of sunshine, you are not alone in the desire to stretch your legs and get fit for the warm season. Your bees are “stretching their antennae” too - so to speak - to prepare for a new colony buildup. Eggs are already being laid, and as soon as the first flowering sets in and pollen and nectar become available, forager bees are beginning to fly out to collect much-needed nutrition for the colony.

Although varroa may not be your very first thought when you check upon your bees after the long winter months, this time of the year offers you an opportunity that will not return until the next winter treatment is due at the end of the year. Many of us begin the New Year with new resolutions, considering what we would like to implement change, clean-up, renew, or improve things in our lives, our homes, or about ourselves. As beekeepers, hive management, bee health and nutrition, and economic goals for the upcoming season are likely to represent some of the themes of our New Year resolutions.

One way to realize those well intended resolutions and improve honey bee health early in the season, is to start considering varroa treatments as soon as you plan the first visit to your hives. We know that the amount of bee brood in our colonies will increase in the upcoming weeks and months.<sup>1</sup> We also know that the development of the varroa population is somewhat lagging behind bee brood development, which makes perfect sense, as varroa mites need the

presence of bee brood to be able to reproduce at all.<sup>1</sup> This sheer fact in addition to seasonally low monitoring numbers can lead beekeepers to think: Out of sight, out of mind. Meaning, as long as there is no significant varroa infestation present in the hives yet, why think of varroa treatments?

While it is certainly not time- or cost-effective to treat against varroa mites too often or with a mite load of (almost) zero (Psssst! It's never really "zero" ...), early spring treatment offers you the opportunity to reduce varroa mite and viral pressure in your colonies early on. Beekeepers often focus on the late summer or fall treatment, and for good reason. Varroa mite counts after the honey harvest are high<sup>1</sup>, treatment thresholds have constantly decreased over the last years, and treatment timing has become a matter of colony survival after the summer. However, it is precisely the lack of bee brood that provides opportunity for a quicker and more effective treatment in early spring, before the first honey flow.

Most miticides, including amitraz, the active ingredient of Apivar, target varroa mites when they are attached to their adult bee hosts and thus openly exposed to any potential treatment. Mites in the capped brood cannot be reached until they emerge from the brood cell. Thus, it will not come as a surprise to you that treatments are more effective, the less mites are "hiding out" in bee brood cells. The ideal example of this is the winter treatment with oxalic acid in completely brood-free colonies, a few weeks after the first frost.

Although the bee brood already begins to grow in spring, the total amount of brood present in the hives before the first honey flow is low enough to ensure ideal conditions for an efficient and thorough clean-up<sup>1</sup>, reducing the mite load before the honey season significantly. The six to ten-weeks Apivar treatment, applied in time before setting up your honey supers for the first time in spring, provides a reliable long-term efficient treatment. As a contact miticide that is independent of ambient temperatures, there are no concerns about cool temperatures during the Apivar spring treatment either, since they do not affect efficacy.<sup>2</sup> Your colonies will thank you for reduced mite numbers throughout the season and some added benefits for colony health.

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**References:**

1 – Alexis L. Beaufrepaire, Klemens J. Krieger and Robin F.A. Moritz - Seasonal cycle of inbreeding and recombination of the parasitic mite *Varroa destructor* in honeybee colonies and its implications for the selection of acaricide resistance - 2017

2 - There is no temperature constraint to use Apivar, though Apivar should be stored below 30°C. Activity in the hive may be reduced with a lower temperature, resulting in less contact with the strips.

**Legal notices:**

**APIVAR® 500 mg Amitraz Bee-hive strips for honey bees. Indication(s) for use:** Treatment of varroosis due to *Varroa destructor* sensitive to amitraz in honey bees. **Contraindication(s):** Do not use in case of known resistance to amitraz. **Withdrawal period(s):** Honey: zero days. Do not use during honey flow. Do not extract honey from the brood chamber. Do not harvest honey when the treatment is in place. Amitraz can accumulate in wax; Brood combs should be replaced with new foundation at last every three years. Do not recycle brood frames as honey frames. **Read carefully the instructions on the product booklet label before use. Special precautions to be taken by the person administering the veterinary medicinal product to animal:** This veterinary medicinal product contains amitraz which can lead to neurological side-effects in humans. Take particular care in case of concomitant treatment with monoamine oxidase inhibitors, hypotensive treatment or if you have

diabetes. Amitraz may cause skin sensitization. Avoid contact with skin. In case of contact, wash thoroughly with soap and water. Avoid contact with eyes. In case of contact, rinse with plenty of water immediately. Usual beekeeping protective clothes including impervious gloves should be worn when handling the product.

Do not eat, drink or smoke whilst handling the product. Keep children away during application of the product. Wash hands after use. Do not inhale or ingest. If side effects are noted, seek immediate medical assistance and show the label to the physician. v0921

**Apivar is a veterinary medicinal product. Please ask advice to your veterinarian, pharmacist or sanitary organization. In case of persistence of clinical signs, consult with your veterinarian.**

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