Conclusions and recommendations
4/2/04

Current situation

1. The current epidemic is considered to be evolving, and it is anticipated to continue to expand both in geographical distribution and incidence.
2. Adequate epidemiological assessment is urgently required.
3. The epidemic(s) are not considered to be under control, and therefore require a concerted emergency response.
4. Without the implementation of appropriate methods of disease control, the risk of epidemic spread to further countries including those in distant regions is likely to remain high, and that disease may persist as a result of infection becoming endemic in the domestic poultry population.
5. There will be a continuing threat to human health as long as the infection is present in the poultry production systems in Asia.

Origins of the epidemic

6. The sources of infection for each country are not yet clear, but the working hypotheses that require investigation include entry of infection from wild or domestic bird reservoirs, and spread as a consequence of failure of surveillance, early warning, and control of movement of infection between domestic poultry.
7. The lack of timely reporting of infection to the national competent authorities, OIE and other international bodies has contributed to the scale of the problem.

Control and Eradication Strategies

1. Disease awareness, early detection and notification, are pre-requisites of effective control programs aimed at eradication of the infection in poultry. Biosecurity is an essential part of the control of avian influenza and must be given due importance in planning of control measures. Cooperation with the national stakeholders in poultry production will be important, as will efficient implementation and effective monitoring through the veterinary services.
2. Stamping out is the preferred control option for an outbreak of HPAI and should be used on all flocks exhibiting clinical disease. It has been highly effective in controlling confined outbreaks of HPAI where there is limited spread and low risk of re-introduction. The issue of adequate and timely compensation must be addressed in planning programs involving stamping-out. There is no justification to recommend the systematic elimination of wildlife or swine for the management of HPAI outbreaks.
3. Recognising that it may not be either desirable or feasible to proceed with massive culling in some situations, vaccination is considered a suitable option. The rationale behind this is that vaccination reduces susceptibility to infection and shedding (both in duration and in titre) and is therefore an appropriate tool to reduce the incidence of new cases and viral load in the environment, and thus is expected to contribute to other measures to reduce the potential for spread to humans.
4. The use of vaccination must be seen as a tool to maximise biosecurity, be coupled to surveillance to promptly detect any change in virus properties (antigenic change), and must be carried out with appropriate products manufactured and quality controlled to ensure compliance with international standards as referred in the OIE Manual of Standards.
5. Vaccination can be used either as a tool to support eradication or as a tool to control the disease and reduce the viral load in the environment. Controlling the disease through vaccination may be a prelude to eradication. The appropriate management of a vaccination campaign under the control of the veterinary administration is compatible with international trade, if it is in compliance with the OIE Terrestrial Animal Health Code.
vaccination are not mutually exclusive, and the mix or sequence of measures may differ between production systems and stages of a control program. Vaccination should be used in a strategic manner, with careful consideration to choice of target groups and areas based on the outcome decided by the national authorities.

6. The requirements for implementing emergency vaccination and the subsequent monitoring of impact should be quickly established and feasibility assessed. Vaccine manufacturers have the capability to respond to the emergency once an estimation of the requirements is available.

7. The “Differentiation of infected from vaccinated animals” (DIVA) approach is recommended either through an appropriate diagnostic test and/or with the use of sentinel birds. Only inactivated heterologous or homologous vaccines are the candidates for emergency use.

Human Health issues including Food Safety

1. Awareness needs to be raised of the need for immediate application of precautions to prevent human infection for persons working with poultry in infected areas.

2. Availability, training, and proper use of PPE should be ensured for the protection of persons working in suspect and infected premises, and involved in mass slaughter of animals, and the health of exposed persons should be monitored, in line with the WHO recommendations.

3. Poultry from infected flocks should be disposed of by environmentally sound methods and should not be processed for animal and human food consumption.

4. Processed poultry products and eggs in or arriving from areas currently experiencing outbreaks of H5N1 in poultry do not pose a risk to public health. Good hygienic practices during handling, including hand washing, prevention of cross contamination & thorough cooking of poultry products are emphasised as a general precautionary measure.

5. All countries affected by H5 infection should on a timely basis provide adequate numbers of representative isolates from animals to the OIE/FAO Reference Laboratories and from animals and humans to the WHO influenza surveillance system.

6. Poultry cullers should be have received influenza vaccination to reduce risk of dual infection and reassortment.

Rehabilitation, re-stocking and reorganisation of the sector

1. Templates for country control measures that will assist recovery of markets should be created through a joint organizational process.

2. For restoration of export opportunities the credibility of the veterinary administration and of veterinary services is a prerequisite.

3. Zoning and the compartmentalisation concept may assist recovery of marketing opportunities.

4. Restocking of farms will require protection measures for poultry, and appropriate surveillance.

5. Restructuring of the production sector may be necessary.

The meeting recommends that:

1. Animal and human health and rural livelihoods be taken into consideration when developing control and restructuring programmes.

2. Public education and veterinary training, and national and regional capacity building be an important part of the development of long term surveillance and control of HPAI and other priority diseases.

3. Control programs be immediately intensified and monitored.

4. Each country establish a co-ordination centre such as a national avian influenza task force, to which medical and veterinary authorities report and discuss surveillance and control information.

5. Measures including stamping-out, elevated biosecurity, vaccination and monitoring are important tools in control and eradication of infection in poultry.

6. Improvement of surveillance and transparent and timely reporting of infection by the Veterinary Administration be required at national, regional and international levels.

7. Extensive international coordination should be established for short and long term control of influenza viruses of human and animal health significance.

8. Donor support be urgently requested for control programmes that include relevant technical and institutional capacity building.

FAO/OIE/WHO Technical Consultation on the Control of Avian Influenza
9. A Regional Emergency Meeting in the Asian Region be convened to support uptake and implementation of the recommendations, with FAO taking a lead role in co-ordination of field programmes, and in co-operation with OIE and WHO.

10. Collaborative research efforts, with interdisciplinary, international partnerships be supported to address the gaps in knowledge and tools required in the control of human and animal infection with avian influenza viruses, particularly in the area of vaccines, diagnostic tests, and epidemiology, particularly the role of domestic and wild animal hosts.