

5th Annual West Eurasia Roadmap Meeting, Astana, Kazakhstan, 23-24 April, 2014

FMD In Afghanistan

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THE PCP-FMD CONTROL ACTIVITIES PERFORMED IN AFGHANISTAN IN 2013

- FMD clinical, epidemiological and laboratory case definition were provided and
 - A total 332 contracted VFUs, PVEOs, PVLOs and PVOs were trained on
 - FMD clinical case definition,
 - FMD epidemiological case definition and
 - FMD laboratory case definition
 - FMD sampling and sample shipment
- FMD sampling, FMD sample shipment and FMD testing SOPs were provided

THE PCP-FMD CONTROL ACTIVITIES PERFORMED IN AFGHANISTAN IN 2013

- CVDRL staff were trained on performing molecular diagnosis (PCR and real time PCR)
- FMD database management system was designed and established in DAH (CED)
- FMD serological (Elisa) and Molecular diagnosis (PCR and real Time PCR) network was established and is functional since 2013
- GIS was designed and established in DAH and all FMD results are entered and analyzed systematically in GIS since 2013
- FMD GIS maps were provided (GIS version was improved from GIS version 9 to GIS 10)

THE PCP-FMD CONTROL ACTIVITIES PERFORMED IN AFGHANISTAN IN 2013

- Risk based FMD vaccination implementation program was provided and implemented
 - FMD vaccination implementation program was conducted in high risk areas
 - more than 4000,000 Sheep, Goats and Cattle were vaccinated in 2013,
 - The FMD imported vaccines are purified vaccines
 - All information related to FMD vaccination implementation program are entered in CED database

IMPORTED PURIFIED FMD VACCINE CERTIFICATE

Federal Service for Veterinary and Phytosanitary Surveillance



Federal Governmental Institution

FEDERAL CENTRE FOR ANIMAL HEALTH (FGI ARRIAH)

OIE Collaborating Centre for Diagnosis and Control of Animal Diseases for the Countries
of Eastern Europe, Central Asia and Transcaucasia
OIE Regional Reference Laboratory for Foot and Mouth Disease

CERTIFICATE OF ANALYSIS

Designation of a biopreparation according to QCR: Sorbed polyvalent foot-and-mouth disease vaccine (from virus grown in BHK-21 cells)

Disease: foot-and-mouth disease

Production strain: of A Iran-05, O Panasia-2, Asia-1 types

Batch: 74

Volume: 753 liters

Packaging: 105 cm³

Date of production: 19.05.2010.

Characteristics of raw materials: purified suspension of FMDV grown in BHK-21 cells

Vaccine technology: in accordance with the Instructions and QCR 9384-007-00495527-00

Manufacturer: Laboratory for FMD vaccines, FGI "ARRIAH"

Head of the manufacture department: signature V.V. Mikhailishin

Qualitative Indices in Accordance with QCR 9384-007-00495527-00

Registration control number: 74

Index	Characteristics and norms	Test result
Appearance	Transparent liquid of pink or light-yellow color with friable white or light-gray sediment, formed at storage, which easily breaks up at shaking	corresponds
Presence of extraneous admixtures, mold, bottle cracks	Inadmissible	none
Concentration of hydrogen ions (pH)	7.2 - 7.8	7.55
Sterility	In vaccine seeding on nutrient media there should not be any growth of microflora	sterile
Avirulence	Should be avirulent	avirulent
Innocence for cattle in a dose 10 cm ³	Should be innocuous	innocuous
Immunogenic activity	Should be immunogenic	immunogenic

CONCLUSION

The above mentioned preparation of batch 74 manufactured 19.05.2010 is in conformity with QCR 9384-007-00495527-00. Inoculating dose for cattle is 3 cm³, sheep and goats – 1 cm³.

Head, Biological Quality Control:

signature

V.I.Diev

Realization of the biopreparation is allowed
Director of FGI "ARRIAH"



E.V. Belik

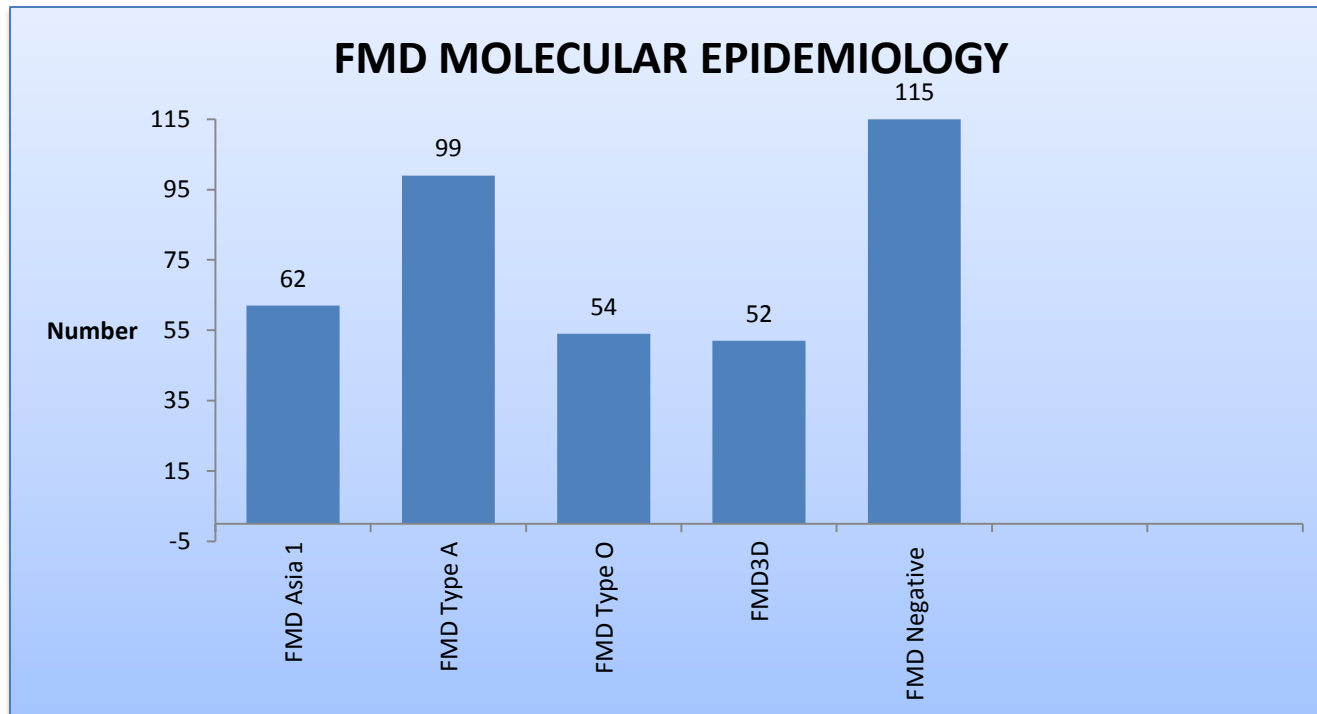
FMD NSP ACTIVE SURVEILLANCE

- FMD active surveillance was designed and implemented in 34 Provinces of Afghanistan in 2013
 - Randomly selected susceptible animals (Cattle) samples from 190 Epidemiological units of 34 provinces of Afghanistan were collected and tested
 - Individual FMD NSP Sero prevalence was estimated 50.07%

ESTABLISHMENT OF FMD OUTBREAK TEAM

- National FMD outbreak investigation team was created in 2013
- Total 26 veterinary officers from 14 provinces were trained on performing FMD outbreak investigation
 - Three FMD suspected outbreak investigation were performed by the team
 - Serological and molecular tested were performed
 - FMD circulating viruses were identified
 - For advanced tests the samples were shipped to OIE/FAO lab reference (UK)

FMD MOLECULAR EPIDEMIOLOGY RESULT FROM 382 SAMPLE IN 19 PROVINCE PERFORMED IN 2013



FMDV MATCHING WITH USED FMD VACCINES

- In 2013 FMDV matching with used FMD vaccines was performed,
 - confirmed FMD molecular samples were sent to OIE FAO Lab reference for this issue

JUSTIFICATION ON PCP STAGE ASSESSMENT IN AFGHANISTAN:

- An evidence-based, transparent assessment procedure should be applied on a yearly basis to determine country's status within the PCP.

PROPOSE ACTIVITIES FOR A NATIONAL FMD CONTROL PLAN

- Implementation of Harmonized risk-based FMD vaccination program in high risk areas of Afghanistan .
- Performing Active sentinel surveillance
- Performing circulating FMD circulating viruses matching with the imported used FMD vaccines
- Strengthen and extend FMD passive surveillance coverage
- Twinning of CVDRL on FMD diagnosis with an OIE/FAO reference laboratory

THANKS FOR YOUR ATTENTION

ТАДЖИКИСТАН

5-я ежегодная дорожная карта Евразия, Астана, Казахстан, 23-24 апреля 2014

Холназар Одинаев, заместитель начальника Службы государственного
ветеринарного надзора МСХ РТ,

Абдурахмон Махмадшоев, Генеральный директор Национального центра
ветеринарной диагностики.





Общее описание Республики Таджикистан

Tajikistan Country Profile



Государство, расположенное в Средней Азии. На юге граничит с Афганистаном (длина границы 1 206 км), на севере и западе - с Узбекистаном (1 161 км), на севере - с Кыргызстаном (870 км), на востоке - с Китаем (414 км). Общая протяженность границы 3 651 км.

Tajikistan is located in Central Asia. In the South the country borders Afghanistan (borderline length is 1 206 km), in the North-West - Uzbekistan (1 161 km), in the North - with Kyrgyzstan (870 km), in the East - with China (414 km). Total border length of the country is 3 651 km.

Поголовье животных в Республике Таджикистан

Animal population in Tajikistan



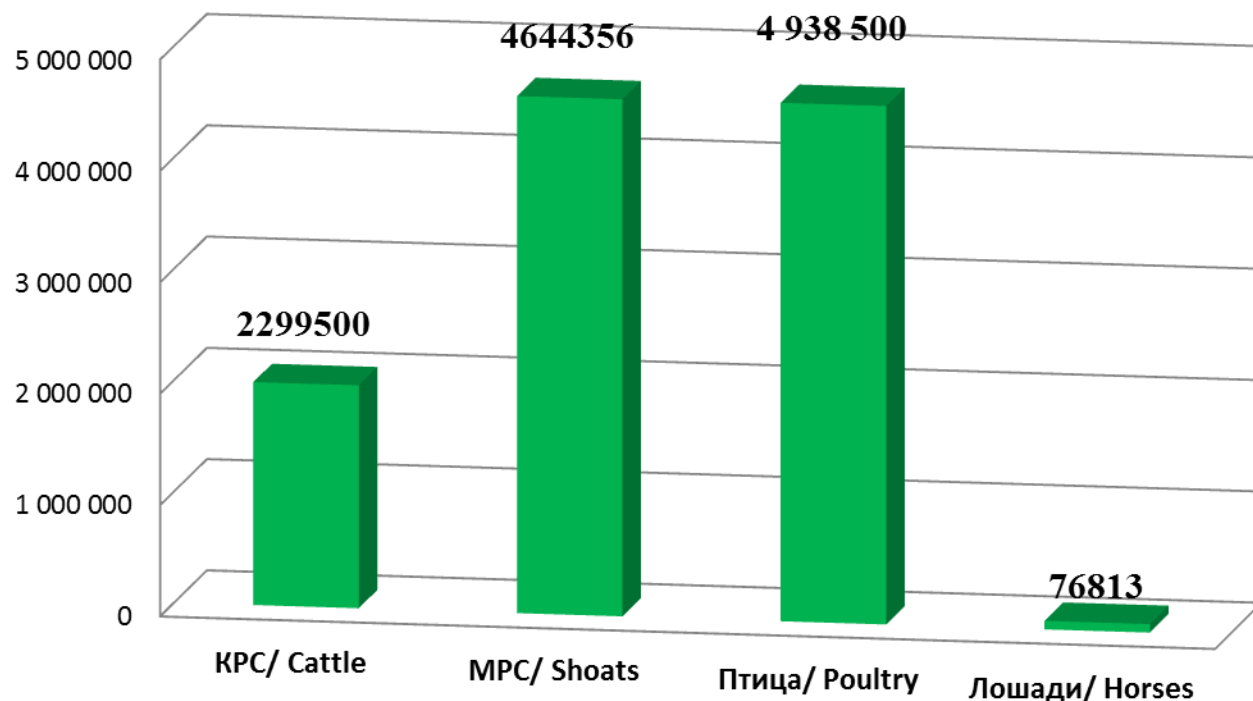
Гиссарская порода



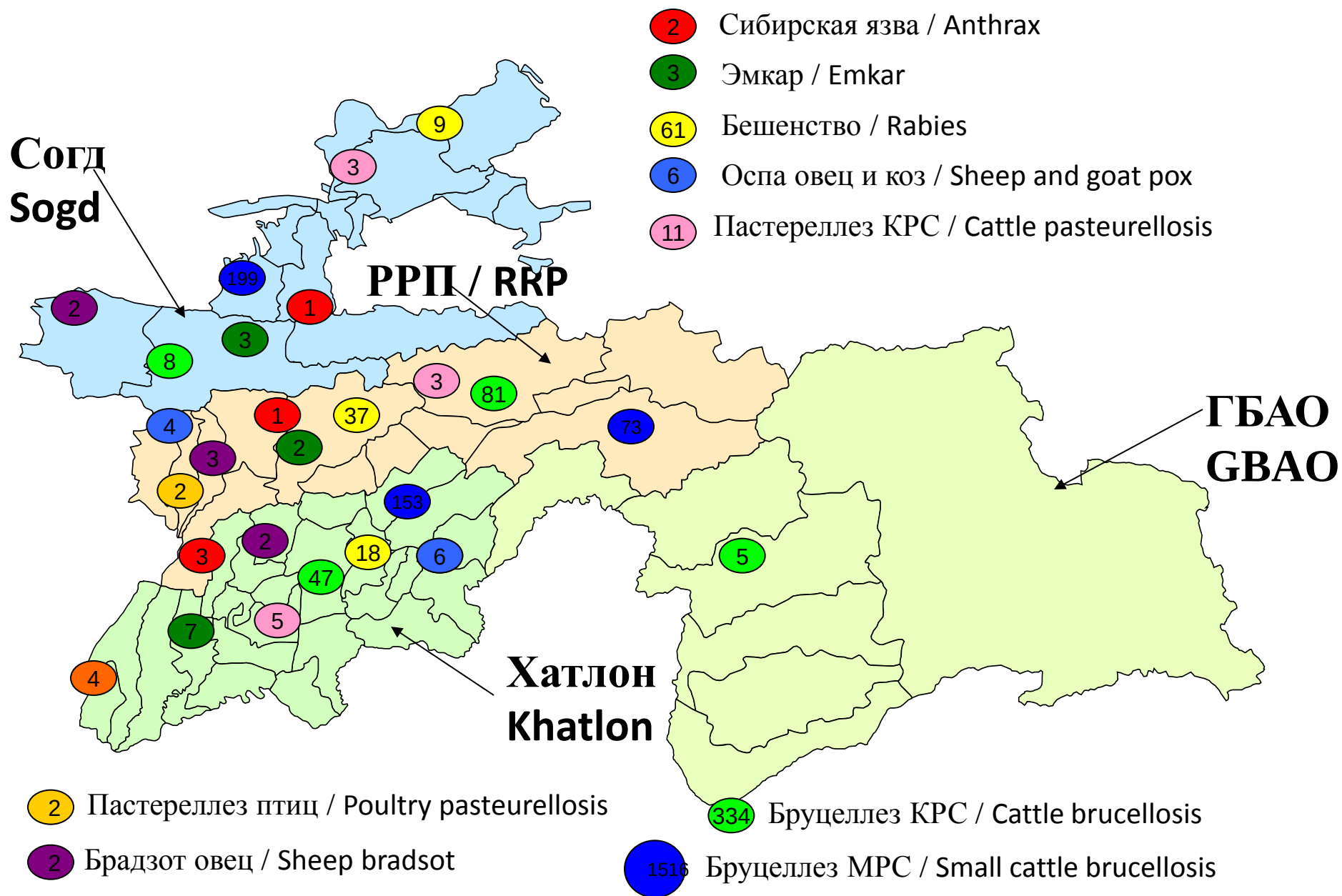
Таджикская порода



Таджикская порода



Эпизоотическая ситуация в Республике Таджикистан -2013



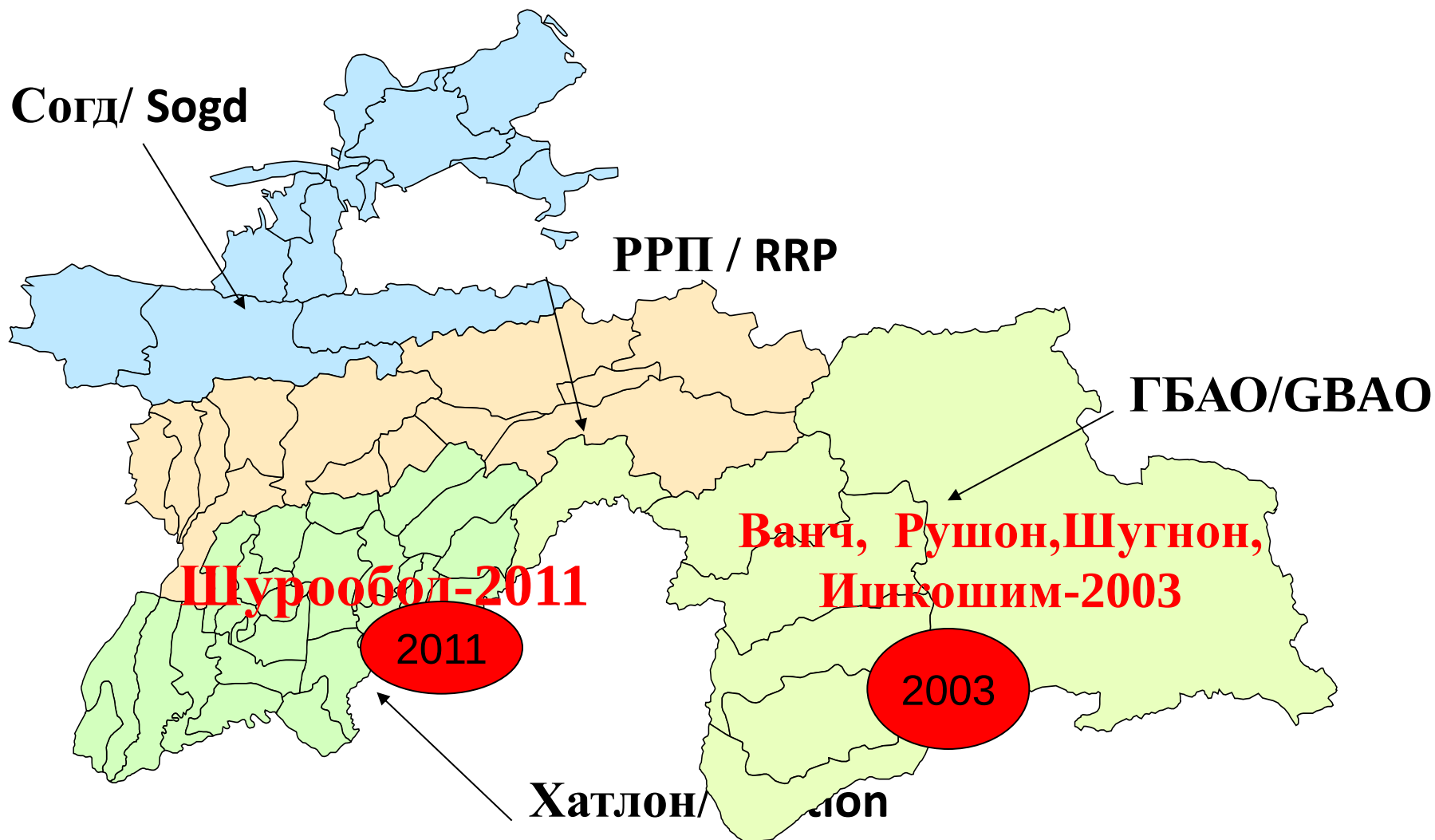
В республике в основном применяются вакцины:

1. Двухвалентная вакцина российского производства ВНИИЗЖ, типа АО и трехвалентная вакцина российского производства ВНИИЗЖ, г. Владимир типа А, О, Азия 1;
2. Двухвалентная вакцина типа АО и трехвалентная вакцина российского производства сорбированная типа А,О,Азия-1, Щелковского биокомбината;
3. Двухвалентная А,О и трехвалентная вакцина индийского производства тип А, О, Азия 1 из штамма Ракша. Хайдарабадский иммунобиологический центр Индия;
4. Трехвалентная вакцина тип А,О, Азия 1 производства Исламской республики Иран из штамма RAZI VACINA, фирма Рози.

Сведение о поставке вакцин и вакцинации ящуром по Республике Таджикистан за 2011-2013 гг.

Регионы	Поголовье скота всего условных голов	Обеспечено вакцина за счет Госбюджета, доза	Закуплено вакцина за счет владельцев животных, доза	Всего вакцинировано условных голов	%-обеспечения вакциной за счет бюджета	% обеспечения вакциной за счет бюджета и частных фермеров
Хатлон	1 374 480	227 400	590 949	818 349	16,5	59,5
Согд	1 179 846	120 900	478 902	599 802	10,2	50,8
РРП	949 961	126 600	154 901	281 501	13,3	29,6
ГБАО	290 551	25 100	30 055	55 155	8,6	19,0
По республике 2011	3 794 838	500 000	1 254 807	1 754 807	13,2	46,2
Хатлон	1 531 751	131 600	459 661	591 261	8,6	38,6
Согд	1 183 122	100 000	280 504	380 504	8,5	32,2
РРП	979 891	78 400	170 722	249 122	8,0	25,4
ГБАО	271 209	40 000	1 951	41 951	14,7	15,5
По республике 2012	3 965 973	350 000	912 838	1 262 838	8,8	31,8
Хатлон	1 845 565	161 050	466 858	627 908	8,7	34,0
Согд	1 234 920	104 450	115 521	219 971	8,5	17,8
РРП	1 077 555	94 500	202 580	297 080	8,8	27,6
ГБАО	271 475	40 000	14 468	54 468	14,7	20,1
По республике 2013	4 429 515	400 000	799 427	1 199 427	9,0	27,1

Эпизоотическая ситуация в республике по ящуру/FMD



Ящур – Foot and mouth disease



Слюнотечение



Поражения слизистой языка



Поражения конечности

Дендрограмма, отражающая положение изолята **О** /Таджикистан/Т-52/2011 на фелигенетическом древе вируса ящура типа **О**

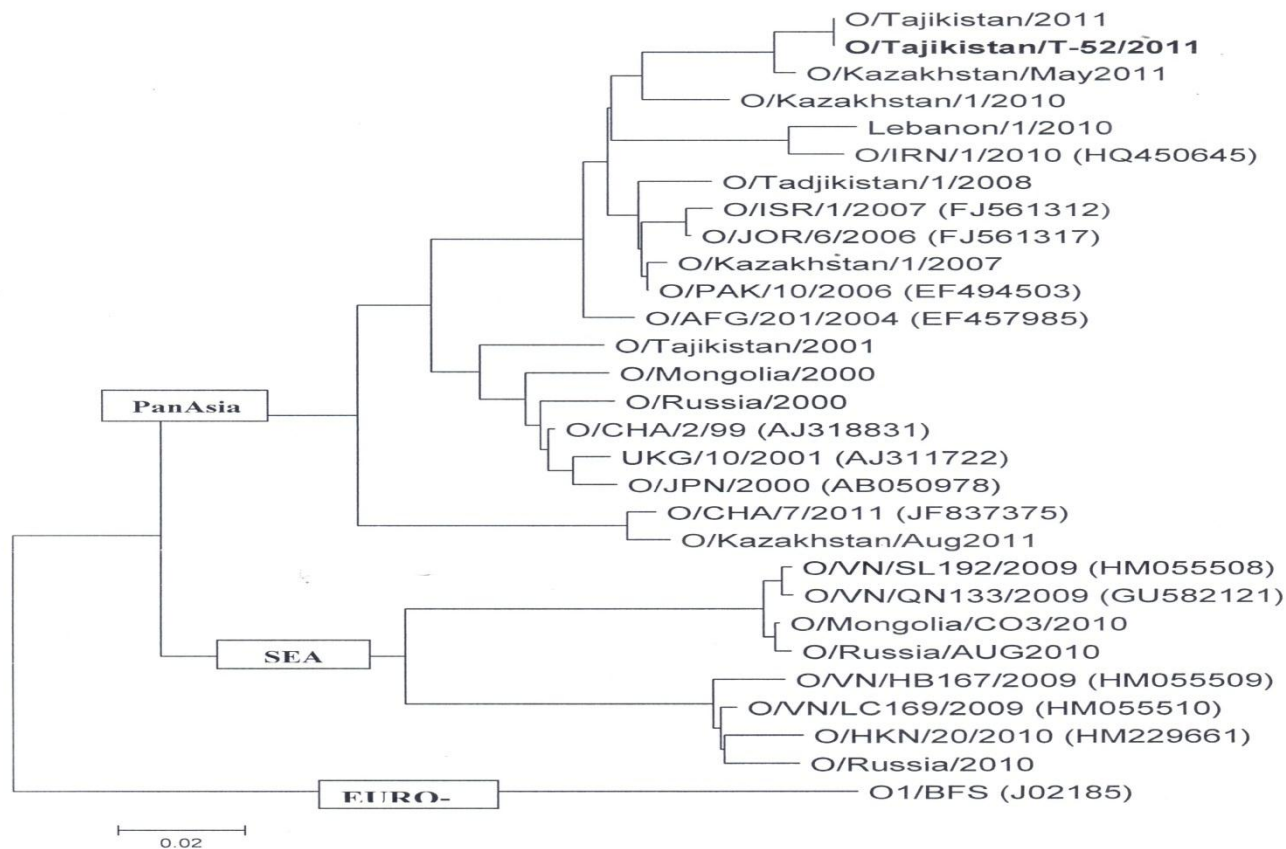
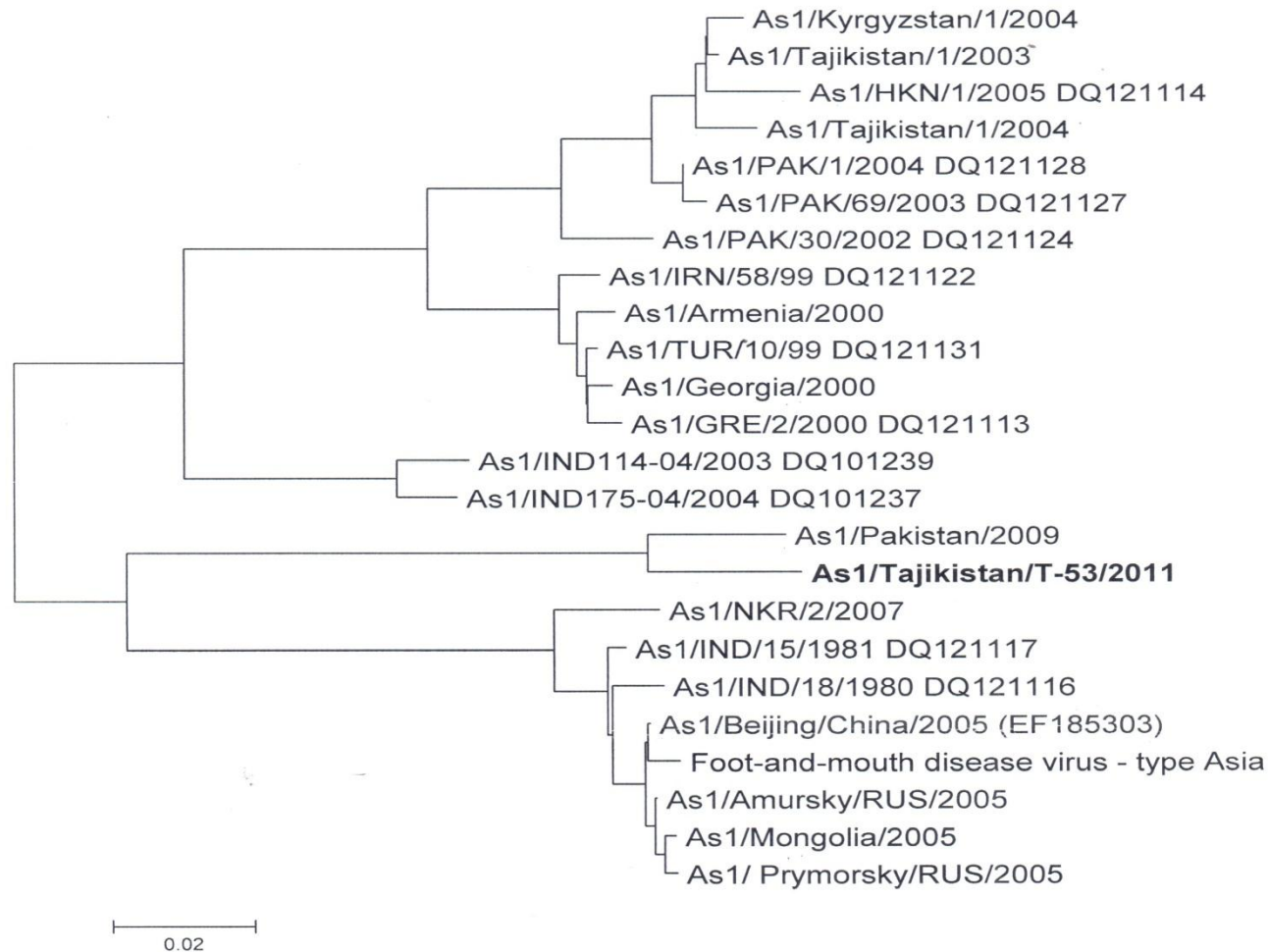


Рис.1. Дендрограмма, отражающая положение изолята **О/Таджикистан/Т-52/2011** на филогенетическом древе вируса ящура типа **О**

Дендрограмма, отражающая положение изолята **Азия-1/Таджикистан/Т-53/2011** на фелигенетическом древе вируса ящура типа **Азия-1**



ис.1. Дендрограмма, отражающая положение изолята **Азия-1/Таджикистан/Т-53/2011** на филогенетическом древе вируса ящура типа **Азия-1**

Мониторинг, оценка и анализ состояния заболеваемости ящуром в республике Таджикистан

- В 2013 году было обследовано **10%** территории от общего количества вакцинированных территорий на наличие формирования иммунитета.
- Произвести охват по всей территории республики **не можем** из-за нехватки средств на эти мероприятия.

Описание стратегии контроля ящура

1. Мониторинг, оценка и анализ состояния заболеваемости ящуром;
2. Эпидемиологический надзор за рисками ящура и угрозой здоровья животных в рамках защиты животных и работников занятых в животноводческой отрасли;
3. Разработка планов мероприятий по участию общественности в мероприятиях направленных контролю и профилактики ящуром.

Описание стратегии контроля ящура

4. Разработка путей регулирования и обеспечение привлечения законодательных актов в вопросах охраны от ящура, разработка новых национальных стандартов и протоколов по диагностике, лечению и профилактики ящура.

5. Разработка и проведения конкретных мероприятий, работ по созданию материальной базы для успешного выполнения мероприятий направленных по борьбе с ящуром.

Критическая оценка стратегии по достижению цели

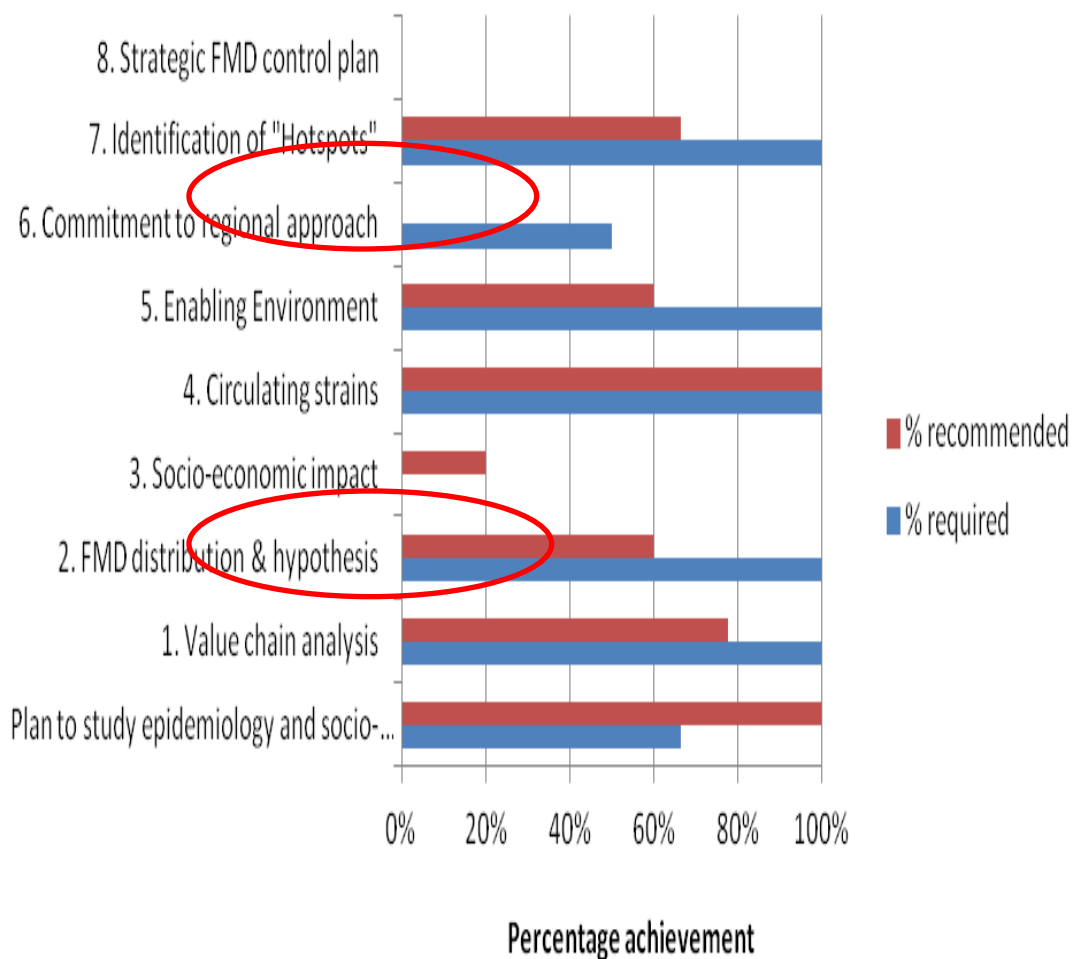
Исходя из того что в Республике в 2013 году не было регистрации ящура все меры были направлены на профилактические работы.

Благодаря организации своевременных ветеринарно - санитарных мероприятий, проведение необходимых вакцинаций в **буферных зонах**, правильным распределением вакцин достигнута определённый успех в борьбе с болезнью и создана определенная благополучия в Республике.

Краткосрочные и Долгосрочные Планы надзора и контроля ящура

- Служба государственного ветеринарного надзора согласно существующей инструкции проводит ежегодные планирования по вакцинации ящура сельскохозяйственных животных.
- Проводиться определенная исследовательская работа по изучении эпизоотологии, диагностики и меры борьбы со стороны Государственное учреждение Институт проблем биологической безопасности (ТАСХИ) Национального центра ветеринарной диагностики СГВН.

Пробелы, выявленные во время ВСТРЕЧИ ДОРОЖНОЙ КАРТЫ в 2012



На 2013 год согласно Плана противоэпизоотических мероприятий по Республике было запланировано вакцинировать против ящура:

Запланировано	Фактически вакцинировано	Процент
4 429 515	1 199 427	27

Благодаря правильным проведению ветеринарно-санитарных мероприятий по борьбе с ящуром в Республике было достигнута сравнительно благополучная эпизоотическая ситуация, ящур не представил никаких особых угроз.

Сотрудничество

НЦВД сотрудничает с нижеследующими местными и международными организациями и за оказываемую помощь и поддержку благодарит своих партнеров:

- МЭБ;
- ФАО ООН;
- ВОЗ;
- ФГБУ «ВНИИЗЖ» -региональная референт лаборатория МЭБ г. Владимир;
- Ассоциация биобезопасности Центральной Азии и Кавказ;
- Ассоциация ветеринаров республики Таджикистан;

Проблемы:

1. Бюджет и финансирование;
2. Нехватка диагностикумов, реактивов и китов и диагностического оборудования;
3. Повышение квалификации специалистов на уровне международных стандартов;
4. Проблема доставки паталогического материала в референт лаборатории;

Благодарю за внимание!
Thank you for Attention!





ARMENIA



5th Annual West Eurasia Roadmap Meeting

FMD CONTROL AND PREVENTION IN ARMENIA

Satenik Kharatyan

EU/FMD/FAO NC

Hovhannes Mkrtchyan

*Head of veterinary department of
SFSS*

23-24 April 2014

Astana, Kazakhstan

**REPUBLIC OF ARMENIA
AND REPUBLIC OF MOUNTAINOUS KARABAGH**

LEGEND

Populated places

Yerevan Capital
Gyumri
Vanadzor
Stepanakert
Martuni
Shusha
Berdzok
Lachin
Hadrut
Kapan
Meghri

Boundaries

Classical
Administrative

Automobile roads

Highway
Side road

Hotels

Ordinary Guest House
Soviet Union's Guest House
Soviet Union's Guest House

Scale

1 : 1 250 000

Map of Armenia and the Republic of Mountainous Karabagh

The map shows the Republic of Armenia and the Republic of Mountainous Karabagh. Major cities and towns are marked, including Yerevan, Vanadzor, Stepanakert, Martuni, Shusha, Berdizor, Lachin, Hadrut, Kapan, and Meghri. The map also shows the borders of Armenia with Georgia, Azerbaijan, and Turkey. The map includes a legend for boundaries, roads, and populated places, as well as a scale bar and a compass rose.

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Activities to address gaps identified in 2013 Roadmap meeting

- Unable to attend previous west Eurasia Roadmap meetings
- FMD Control Strategy was updated according to PCP
- Perform risk analysis
- Improve FMD epidemiological and veterinary disease surveillance system
- Risk based Mass Vaccination using higher potency vaccines (≥ 6 PD50) are expected to provide better protection.
- Monitoring and evaluation of vaccine coverage: (assess sero-conversion and duration of immunity)



Activities to address gaps identified in 2013

Roadmap meeting

- Evaluation of cool chain during vaccination campaign (distribution, transportation, storage, using) was conducted
- Data sharing within the region using of the EMPRES-i database to assist prioritizing laboratory activities, risk management and early threat detection.
- Contribute the reduction of virus circulation, / NSP the rate of 30% to 5-10% /
- Introduce the rapid response tools and developed capabilities
- Strengthen laboratory capacity
- Participation in WRL proficiency tests 2009-2013
- Updated and reviewed SOPs for laboratory and field works



Activities to address gaps identified in 2013

Roadmap meeting

- Implementation of animal (LR) identification and registration process
- Improvement of control on animal movement, including control on animal health in seasonal pastures and veterinary-sanitary measures for slaughtering (new construction slaughtering houses will be exploited)
- National FMD Task Forces (Nat. risk assessments, planning and implementation of FMD control and monitoring)
- Improve public awareness, communication activities and cooperation with public and private sector
- Regional and international cooperation programs (EMPRES-i)
- Value chain analysis, plan to study socio-economic impact

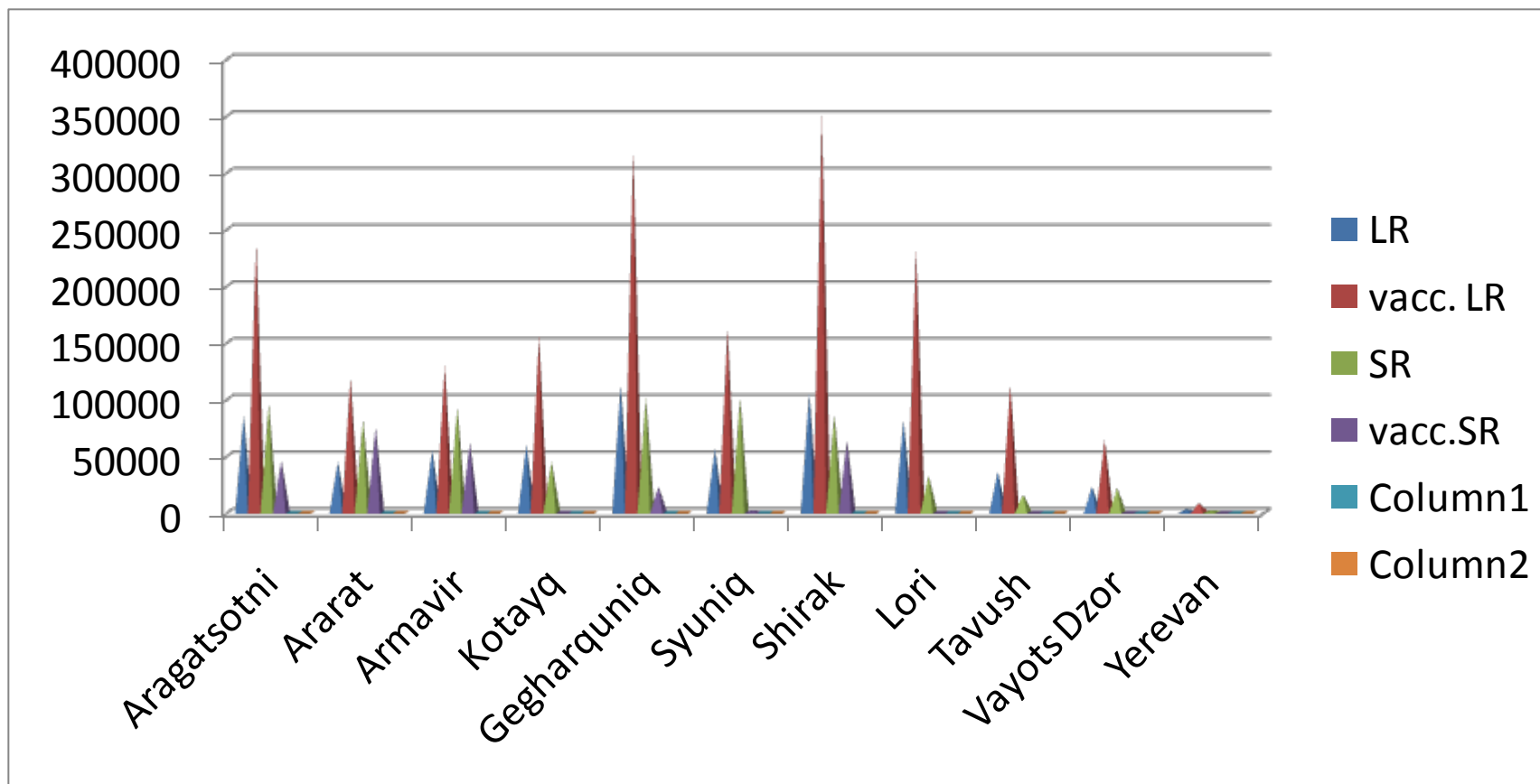


Description of 2012-2013-2014 FMD surveillance results

		LR			SR		
	Doses of FMD vaccine	population	Vaccinated	%	population	vaccinated	%
2012	1721148	599243	1782938 (2*599243 +approx.3* 226679)	100%	590214	264229	45%
	EU FMD 250000						
2013	2163480	661003	1896698	100%	674731	268748	39,8%
	EU FMD 50000						



Description of vaccination and booster vaccination in 2013





National FMD Control Strategy Plan

Seromonitoring campaign

- Very good contacts have been established between laboratory and epidemiological department for the struggle against infectious diseases, including FMD
- Since 2004 national serosurvey campaign was implementation (After vaccination campaign to assess the degree of immunity in FMD susceptible animals (large & small ruminants), checking the quality of vaccination activities)
- The design of seromonitorings 2010-11-12 were developed within the project, discussed and approved by veterinary service of the country. Samples have been selected from all country, with focus on zones of high risk. All necessary diagnostic kits for NSP and SP testing were providing by EUFMD



Serological Survey 2012

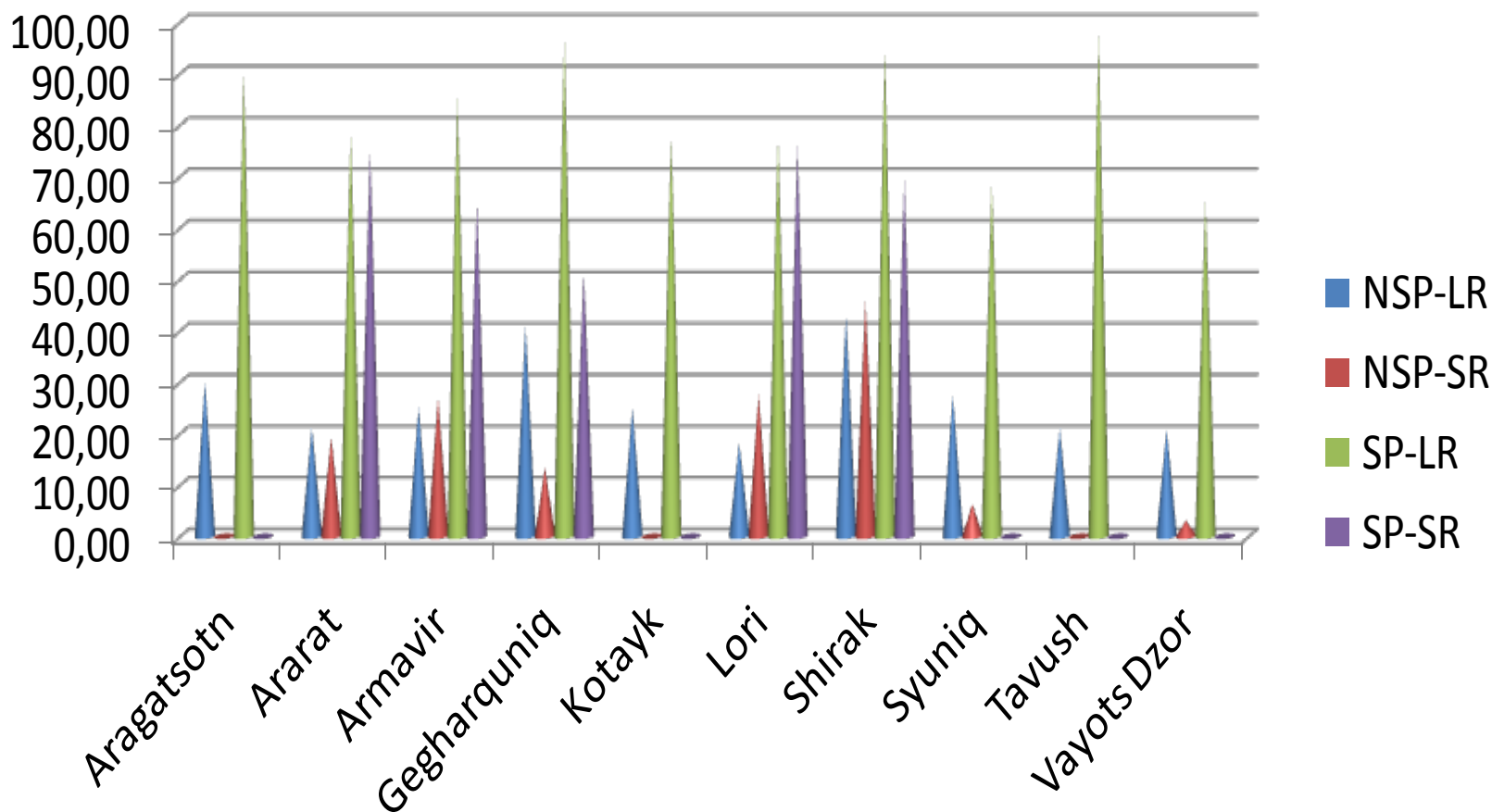
- ***Main objectives of seromonitoring campaign-spring:***
- SP structural antibody surveys to estimate FMD population immunity in LR and SR
- Monitoring the FMDV circulation in the LR and SR populations (NSP investigation);
- Estimation the FMDv circulation in a subpopulation in which National FMD control measures has priority.

Total sample size (according to design/RA+NK/, random selection): LR – 2200 serum;
SR - 487 serum.

- ***Follow-up investigation - Main objectives of autumn survey:***
- Follow-up investigation (2 clusters with high NSP %); A cluster consisted 2 villages with NSP Ab prevalence in the upper quartile of the respective species;
- Total sample size (according to design, random selection):
- _LR – 300 serum; SR - 300 serum.
- Mouth/nasal swabs: from each NSP Ab positive animal traced back from the spring survey.



Distribution of % SP and NSP antibodies (Region level), 2012





Follow-up investigation 2012

		NSP-LR			NSP-SR		
		Sera tested	Pos.	%	Sera tested	Pos.	%
Shirak	Bavra	20	3	15	0	0	0
	Tavshut	12	2	17	0	0	0
	Saragyugh	50	7	14	50	16	32
	Sizavet	50	2	4	50	1	2
Gegharquniq	Akunq	50	3		50	1	2
	Shatvan	50	7	14	50	6	12
	Lusakunq	50	0	0	50	0	0
	Satgreq	50	7	14	50	2	4
Total		332	31	9	300	26	9

✓ Virology samples (nasal/mouth swab and probangs) from four cluster villages has been collected, tested during FMD PCR training in Tbilisi (February 2013). All samples were negative.



Description of FMD control plan

- Armenia Strategy plan is based three Components of FMD Global Strategy too:
- (i) Improving global FMD control,
- (ii) Strengthening Veterinary Services and
- (iii) Improving the prevention and control of other major diseases of livestock.
- Headway to the FMD Progressive Control Pathway (PCP-FMD 2-3) is the major tool
- The purpose of a national strategy plan of FMD implementation of complex measures to combat the disease by stakeholders.



Strategy goals of national plan

- Improve the implementation of control measures for FMD
- Perform risk analysis
- Improve FMD epidemiological and veterinary disease surveillance system
- Contribute the reduction of virus circulation, / NSP the rate of 30% to 5-10% /
- Introduce the rapid response tools and developed capabilities
- Strengthen laboratory capacity
- Improve public awareness, communication activities and cooperation with public and private sector
- Regional and international cooperation programs



Description of FMD control plan

National and International projects that feed directly or indirectly to FMD control:

In 2013, the zoning of some of animal diseases and the results of a report submitted to the OIE and the WTO.

From 2012 to 2013 risk analyses methods were developed and approved by SSFS and risk analysis reports on brucellosis and anthrax was prepared submitting to the international organizations (OIE and WTO).

The country with the purpose of identification of animals in 2012 was implemented pilot program in one Marz (Vayots Dzor). **“Anipas”** program has been introduced as a result and above 23000 LR were numbered.



International projects that feed directly or indirectly to FMD control:

- In the recent years, a number of project financed by different donors have been contributing to the development and strengthening of the animal health, animal origin food and feed safety control in the RA.
- EU financed activities; Word Bank, OIE, FAO, OSCE, USDA, CARD, DTRA
- Te Avian Influenza Prepardness Project; EUFMD/FAO, “Support for Abattoir Development in Armenia” project, National Brucellosis Control Program, Twinning Project Fiche “Strengthening of animal origin food and feed safety control in Armenia”, CARD “Animal Health project's”, GTZ , Swiss Cooperation office Sout Caucasus and



International project

- All international projects proposed are consist of the following components:
- Development of the legislation basis
- Targeted technology transfer and animal health improvement activities
- Community Pasture/livestock Management System, Strengthening Institutions and Support services
- Development of inspection structure and training
- Food Safety and Supply Chain Enhancement activities
- Technical support and provided necessary equipments
- Advice and guidance
- Raising Awareness



Description of vaccination plans

- **Vaccination of LR – all population twice per year (spring and autumn),**
- **Booster vaccination for calves - 3 time every 3 months**
- **SR once per year – all population, if the vaccine insufficient, choosen risk zones (borders, around live animal markets and migration ways)**
- **•Trivalent vaccine for LR& SR: The strain of vaccine should be A/Iran 2005, O/PanAsia 2, Asia-1/Georgia2001) , $\geq 6\text{Pd}50$,**
- **Purchased 2072400 doses by RA +50000 doses of Emergancy vaccine provided by EUFMD**



Plans related to FMD surveillance and control in the short and long term.

Short term plans:

- Vaccination of LR – all population twice per year (spring and autumn) and revaccination of calves each 3 months.
- Vaccination of SR – all population in risk zones (borders, around live animal markets and migration ways), and in case of enough funds – all SR population in country at least once per year (in spring).
- Improvement of animal movement control and strengthening control in the pastures
- Strengthening quarantine measures on borders
- Carrying out serosurveys, including markets
- FMD risk assessment and analyses
- LR registration and identification
- Finalize the membership of EuFMD.



Plans related to FMD surveillance and control in the short and long term.

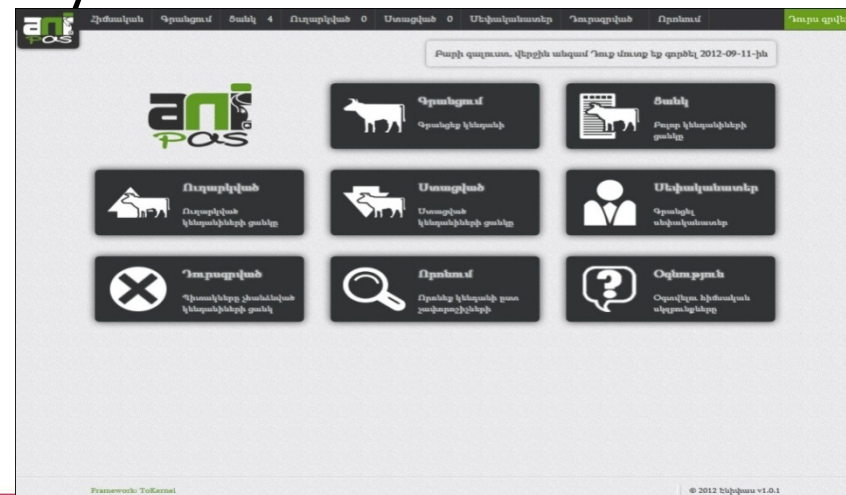
Long term plans:

- Renovation improvement and harmonization of legislation and technical-logistical support of FMD activities in process
- Updating of legislation regarding compensation, penalty
- Improvement of a level of biosecurity and biosafety in the farm and field, strengthening of quarantine measures.
- Implementation of animal identification and registration system (ear-tag system will be replaced with national electronically system for LR & SR);
- Analysis of socio-economical impact (international supporting)
- Trainings



Detail on other control measures

- Conducted registration and identification system
- “ANIPAS” national animal registration electronically system was developed by SSFS .Government approved the found for organizing registration program.
- “ENIPAS” program capabilities are: a)The extensive detail and information input; b)Editing; c) More field search system and results withdrawal of a computer system





Control measures the slaughtering procedure and meat produced

There are 8-10 slaughterhouse, which operates in order “Support for Abattoir Development in Armenia”, (GCP/ARM/004/GRE) project is one of the areas in agricultural development with modern equipment slaughterhouse.

The project immediate objectives include a set up of 5 model slaughterhouses, support to develop the capacity of national institutions and service providers to undertake activities related to sustainable meat sector development and institutionalize the skills, capacities and procedures used in all aspects of meat sector development.



Location of five abattoirs



**"Arzni meat
product " (OJSC)**



Khasik Titanyan PE

"ZOR" (LLC)

**"ARALER TOT"
(CJSC)**





Expected results and current assessment of the control plan achievements

- Are control measures reducing FMD impact?*

Sero surveillance results indicated that where control measures has been applied better, the NSP result decreased (virus circulation has been reduced)

	2010-2011		2012	
	NSP%-LR	NSP%-SR	NSP%-LR	NSP%-SR
Ararat	27,32	32,26	21,13	19,35
Syuniq	31,91	39,44	27,5	6,25
Vayots Dzor	4,92	46,67	20,83	3,13



Expected results and current assessment of the control plan achievements

The action plan will have the opportunity to prevent the spread of disease and outbreaks and solve the following problems.

- Preventive vaccination helps to have immunized animal population, reducing and preventing virus circulation and spreading
- Apply specific policy with farmers for providing obligatory immunization all susceptible animals.
- Develop efficiency control measures in the farms and during animal movement to combat the disease.
-



- Increase the food safety of animal origin produced and biosecurity awareness of FMD risks.
- Active co-operation between the stakeholders.
- Veterinary service should apply modern diagnosis, prevention and control methods.
- Cooperation with neighboring countries veterinary services, providing and obtaining information on the epidemiological situation and control measures should promote the national strategy of control FMD
- Moving the stage of PCP 3.



Research plans

- Socio-economic impact (planning)
- Big FMD virus museum in “Scientific center of risk assessment and analyses in the food area “ and periodically perform quality control of vaccination update and analyses serosurvey

Summary

On the basis of these activities, Armenia is in PCP Stage 2, based on a self-assessment; completed Stage 1&2 and are ready to move to Stage 3 .



Thanks for your attention !



МИНИСТЕРСТВО СЕЛЬСКОГО ХОЗЯЙСТВА АЗЕРБАЙДЖАНСКОЙ РЕСПУБЛИКИ
ГОСУДАРСТВЕННАЯ ВЕТЕРИНАРНАЯ СЛУЖБА

Дорожная Карта

Прогрессивного контроля по ящуру

5-ая ежегодная встреча западно-европейского региона

Эпидемиологический надзор и профилактика ящура
в Азербайджанской Республике

*Тамилла Алиева,
Национальный консультант*

23-24 апреля 2014,
Астана, Казахстан



Действия, направленные на профилактику и борьбу с ящуром

- 1. Указом Президента Азербайджанской Республики утверждена Концепция Развития Азербайджана до 2020 года**
- 2. Издан Указ Президента об институциональном развитии сельского хозяйства, проведении реформ, направленных на соответствие всем современным международным требованиям, усовершенствовании структуры и деятельности Министерства Сельского Хозяйства**
- 3. Принята Государственная Программа по развитию регионов на 2014 – 2018 гг.**
- 4. Принят Комплекс совместных мер государств-участников СНГ по профилактике и борьбе с ящуром на период до 2020 года**
- 5. Проводятся изменения в Ветеринарном Законодательстве**
- 6. Разработана Национальная Стратегия по профилактике и ликвидации ящура**
- 7. Разработана Национальная Стратегия по развитию животноводства**



Действия, направленные на профилактику и борьбу с ящуром

- 8. Деятельность рабочей группы по ящуру продолжается**
- 9. Процесс регистрации хозяйств и идентификации животных продолжается (регистрация животных и хозяйств, содержащих лошадей и племенной скот, закончена)**
- 10. Национальные информационные системы отчетности (AzVET и EIDSS) охватывают все районные ветеринарные управления и лаборатории (координируются эпидемиологическим отделом ГВС)**
- 11. Осуществляются мероприятия по приданию Апшеронскому полуострову статуса зоны, свободной от болезней лошадей (компартиментализация), в том числе осуществляется строительство контрольно-пропускных пунктов на въездах в этот район (контроль за передвижением животных)**
- 12. Усилена материально-техническая база районных ветуправлений, зональных лабораторий.**
- 13. Проводятся постоянные тренинги эпизоотологов и лабораторных специалистов**



Действия, направленные на профилактику и борьбу с ящуром

14. В рамках Государственной Программы по безопасности продуктов питания осуществляется строительство убойных цехов, отвечающих всем международным стандартам. Построено 30 убойных цехов, из них 8 – в Баку, остальные – по районам, наиболее крупные убойные цеха промышленного производства построены в Баку, Сумгаите, Агджабеди, Дашкесане, Гяндже (самый большой на Кавказе).

15. Усилен контроль на базарах – закуплено и установлено лабораторное оборудование на 2,5 млн манат

16. 1,3 млн манат было выделено на усовершенствование «холодной цепи» доставки ветпрепаратов (закуплены и распределены по районам холодильные камеры объемом 10м³, рефрижераторы, бытовые холодильники для ветеринарных участков)



Действия, направленные на профилактику и борьбу с ящуром

17. На улучшение материально-технического состояния ветеринарной службы в районах выделено и уже освоено 2, 35 млн манат на приобретение ветеринарных препаратов, наборов первой ветеринарной помощи, дезинфекционного оборудования (ДУКи), мотоциклы

18. Осуществляются ежедневные мониторинги по контролю за мясом и мясными продуктами

19. Постепенная реструктуризация ветеринарной службы: ликвидация диагностических кабинетов, строительство еще одной зональной лаборатории, приватизация ветеринарных участков (развитие частной ветеринарной службы)

20. РВЛ находится на последнем этапе международной аккредитации (ожидается в сентябре), осуществляется строительство референс-лаборатории (совместно с МЗ).



НАЦИОНАЛЬНАЯ СИСТЕМА КОНТРОЛЯ И ПРОФИЛАКТИКИ ЯЩУРА

Система контроля основана на анализе риска, определении критических контрольных пунктов, активного и пассивного эпидемиологического надзора, вакцинации, серомониторинга после вакцинации с целью продвижения по пути прогрессивного контроля

АНАЛИЗ РИСКА

- ▶ Оценка международной эпизоотической ситуации, наличие вспышек в соседних странах
- ▶ Интенсивная торговля и экономические отношения с неблагополучными по ящуре картами, нелегальная торговля животными
- ▶ Сезонные передвижения животных (зима-лето)
- ▶ Передвижения животных во время религиозных праздников
- ▶ Схема работы рынков живых животных в различных районах страны
- ▶ Система идентификации животных и регистрации хозяйств
- Отсутствие иммунитета у части восприимчивого поголовья животных (МРС)



Специфические мероприятия по контролю за ящуром

ВАКЦИНАЦИЯ

Увеличен бюджет на приобретение вакцин против ящура, сибирской язвы и оспы овец на 2 млн. манат

В 2013 году против ящура вакцинировано :

Крупный рогатый скот: 5 111 901 голов (101%)

Ревакцинация молодняка – 731 600 голов

Мелкий рогатый скот: 3161521 (36%)



Специфические мероприятия по контролю за ящуром СЕРОМОНИТОРИНГ

- В рамках эпидемиологического надзора за бруцеллезом было отобрано более 1,1 млн проб сывороток крови КРС и около 250 тыс. проб крови МРС
- Из них 620 проб крови КРС и 330 проб крови МРС были проверены на наличие структурных и неструктурных антител к ящуру



Результаты серомониторинга (SP) 2013

Вид животных	Количество проб	A	O	Asia-1
Cattle	620	89,6	85,5	80,7
Sheep	330	91, 4	93,5	



Результаты серомониторинга (NSP) 2013

Вид животных	Количество проб	Положительные по NSP	%
Cattle	620	14	2, 3
Sheep	330	9	2,7



Специфические мероприятия по контролю за ящуром

Контроль за передвижением животных

- Усиление контроля за передвижением животных (постоянные рейды)
- Контроль на базарах (постоянный мониторинг)
- Контроль на границах (сотрудничество и координация с таможенными органами) под пристальным вниманием органов власти



Специфические мероприятия по контролю за ящуром

Меры по усилению биобезопасности

- **Работа с фермерами (на примерах хорошо организованных хозяйств)**
- **Мероприятия во время религиозных праздников (строгий контроль осуществляется со стороны ветеринарной службы)**



Специфические мероприятия по контролю за ящуром

Повышение информированности фермеров

- **Принятие закона о кооперации**
- **Еженедельные встречи министра сельского хозяйства и других ответственных лиц (в том числе главы Ветеринарной Службы) с фермерами в районах (интерактивное общение и оперативное решение проблем)**



Краткосрочные планы:

- **Обновление Национальной Стратегии по ящуру (необходима помощь международных экспертов)**
- **Вакцинация и ревакцинация всего восприимчивого поголовья крупного и мелкого рогатого скота**
- **Внедрение практики организованного и контролируемого убоя животных**
- **Ежегодные компании серомониторингов**
- **Контроль на границах, на базарах и во время религиозных праздников**
- **Повышение информированности населения**
- **Тренинги специалистов (эпидемиологи и лаборатория)**
- **Разработка системы оценки проведенных мероприятий по контролю за ящуром**
- **Участие в межлабораторном тестировании**



Долгосрочные планы:

- **Реструктуризация Министерства Сельского Хозяйства и все подотчетных ему подразделений (в том числе ГВС) с целью рационального использования человеческих и материальных ресурсов и усовершенствования деятельности**
- **Завершение процесса регистрации и идентификации животных и хозяйств**
- **Повышение уровня ветеринарного образования и создание системы постоянного обучения и повышения квалификации ветеринарных специалистов**
- **Установленный контроль на границах, базарах, во время религиозных праздников**
- **Гармонизация Ветеринарного Законодательства в соответствии с международными требованиями**
- **Дальнейшее усиление материально-технической базы ГВС**



Долгосрочные планы:

- **Улучшение системы эпидемиологического надзора за болезнями с целью защиты здоровья людей и безопасностью продуктов питания**
- **Создание системы регулируемого и контролируемого убоя животных**
- **Международная аккредитация всех ветеринарных лабораторий страны**
- **Развитие частной ветеринарной практики**



СПАСИБО ЗА ВНИМАНИЕ!



GEORGIA



Dr. Mikheil Sokhadze

*CVO;
Deputy Head of National
Food Agency of Georgia*

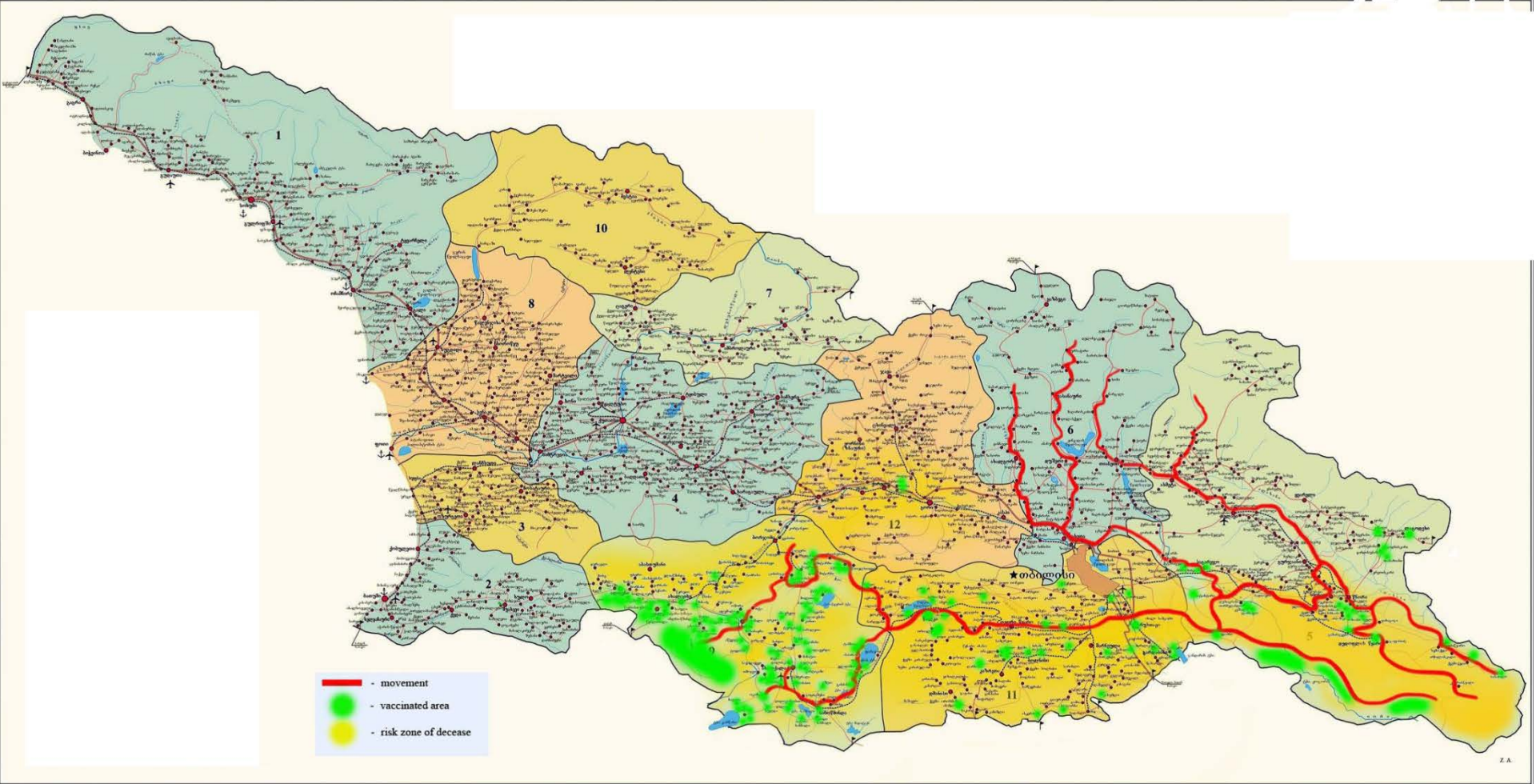


Description of work done to address gaps identified

- Creating FMD Risk Based Strategy Plan (RBSP);
- New Strategic FMD Control Plan;
- FMD-related risk identified in Georgia (Borders, common grazing, internal migration, live animal markets, lack of reporting, low public awareness, communication, lack trainings and capacity of vets ...);
- Mass Vaccination whole LR & SR population;
- Implementation of LR Identification & Registration;
- Baseline serosurvey (SP and NSP ab) and Follow-up investigation including probangs and swab sampling; (in 2012 and planned in 2014)
- Established FMD vaccination and serosurvey organization-coordination group;
- Epidemiology – reporting, risk assessments, data work;
- Slaughterhouses (more than 80);
- Rehabilitation of animal migration routes and improving animal migration control; (2013-2014)



Migration routes





Description of work done to address gaps identified

- Purchasing more than **2.500.000** doses of high potency (6PD50) FMD vaccines;
- Increase of NFA budget and staff (state and private);
- Simulation exercises (2009 and 2012);
- PEP-c trainings;
- RT training, e-learning;
- RT-PCR Lab training, SP & NSP ab ELISA training for lab staff;
- Strengthening of vaccination monitoring and cool chain;
- Improved collaboration with LMA (contract), proficiency testing (2010, 2011, 2012, 2013);
- EuFMD membership (2013)



FMD outbreaks 2013-2014

- No FMD clinical cases;
- No suspected reports;
- Last outbreak in 2002 (Samtskhe-Javakheti Region)



Current measures employed against FMD in Georgia:

- Vaccination: this is the most important FMD-specific measure. In 2013 and 2014, blanket vaccination of all large and small ruminants twice annually is planned.
 - Weaknesses : high cost, resource intensive, some animals not included in campaigns (those too young, migrating), lack census data (so cannot calculate coverage accurately), No booster vaccination.
- Border check points: controlled by Finance ministry, some vets are employed;
- Control of migrating animals: there is a date set for the migration, and before the start temporary checkpoints are set up for 6 weeks. There is a plan to upgrade migration roads and checkpoints
- Awareness campaigns – vets, farmers, booklets for small farmers, TV clips about FMD clinical signs & vaccination;
- Updating of FMD Contingency Plan;
- Harmonization of legislation (normative act) with EU norms



Main objectives of spring survey - 2012

- Monitoring the background FMDV circulation in the LR and SR populations (NSP investigation);
- Estimation the FMDV circulation in a subpopulation in which National FMD control measures has priority.
- Total sample size:

LR – 32 sera x 73 villages = 2336 sera; SR - 16 sera x 35 villages = 560 sera.

Main objectives of autumn survey:

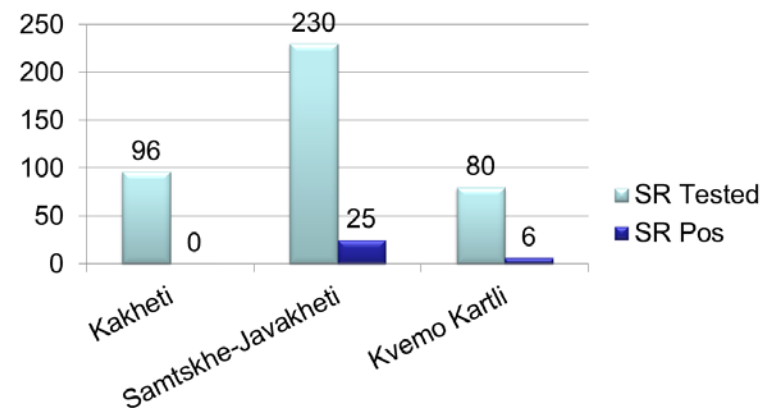
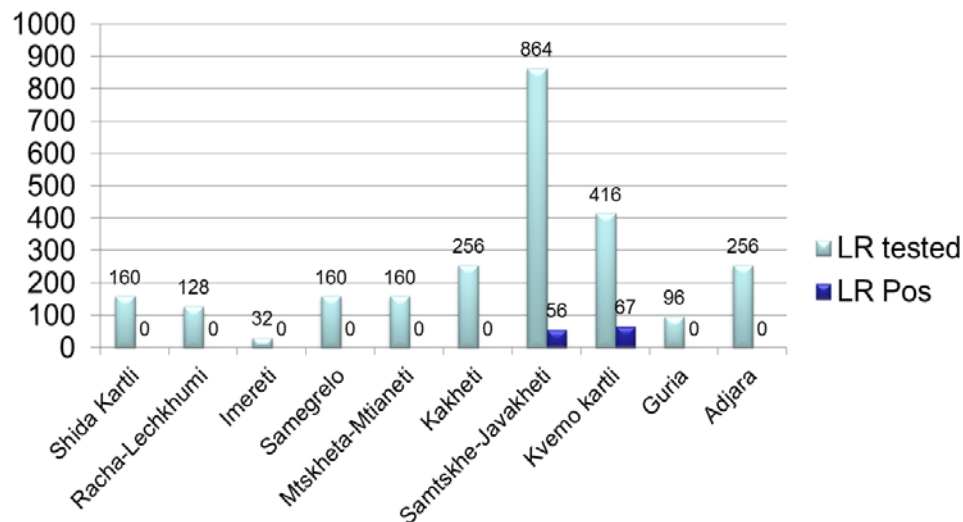
- To estimate population immunity after the spring 2012 FMD vaccination in high risk zones (areas of project vaccine used) by assessing levels of antibodies against structural proteins (SP);
- Monitoring the quality of the National FMD vaccination campaign/SP Ab levels.
- Total sample size:
- 50 sera/village * 6 villages = 300 sera/country

Results of Serological Survey 2012

- According to serosurvey design the serum samples have collected and tested in the LMA from following regions & districts:



- In 2012 in **Samtskhe-Javakheti Region** were tested **864 cattle from 27 villages** (32 serums from each village). NSP Pos villages 12 and NSP Negative 13. Totally in the Region positive cattle number – 56. Which amounted 6.5% of the total tested cattle.
- Regarding SR survey – **In the same region** were tested **230 SR from 10 villages** and 1 live animal market. (16 serums from each village + Akhaltsikhe live animal market -70 SR). NSP Pos villages - 8, and NSP Negative -3. Totally in the Region positive SR number – 25. Which amounted 10.9 % of the total tested SR.
- In 2012 in **Kvemo Kartli** Region were tested 416 **cattle from 13 villages** (32 serums from each village). NSP Pos villages 11 and NSP Negative 2. Totally in the Region positive SR number – 6, which amounted 16.1 % of the total tested cattle.
- Regarding SR survey – In Kvemo Kartli region were tested **80 SR from 5 villages** (16 serums from each village). NSP Pos villages - 3, and NSP Negative -2. Totally in the Region positive SR number – 6, which amounted 7.5 % of the total tested SR.

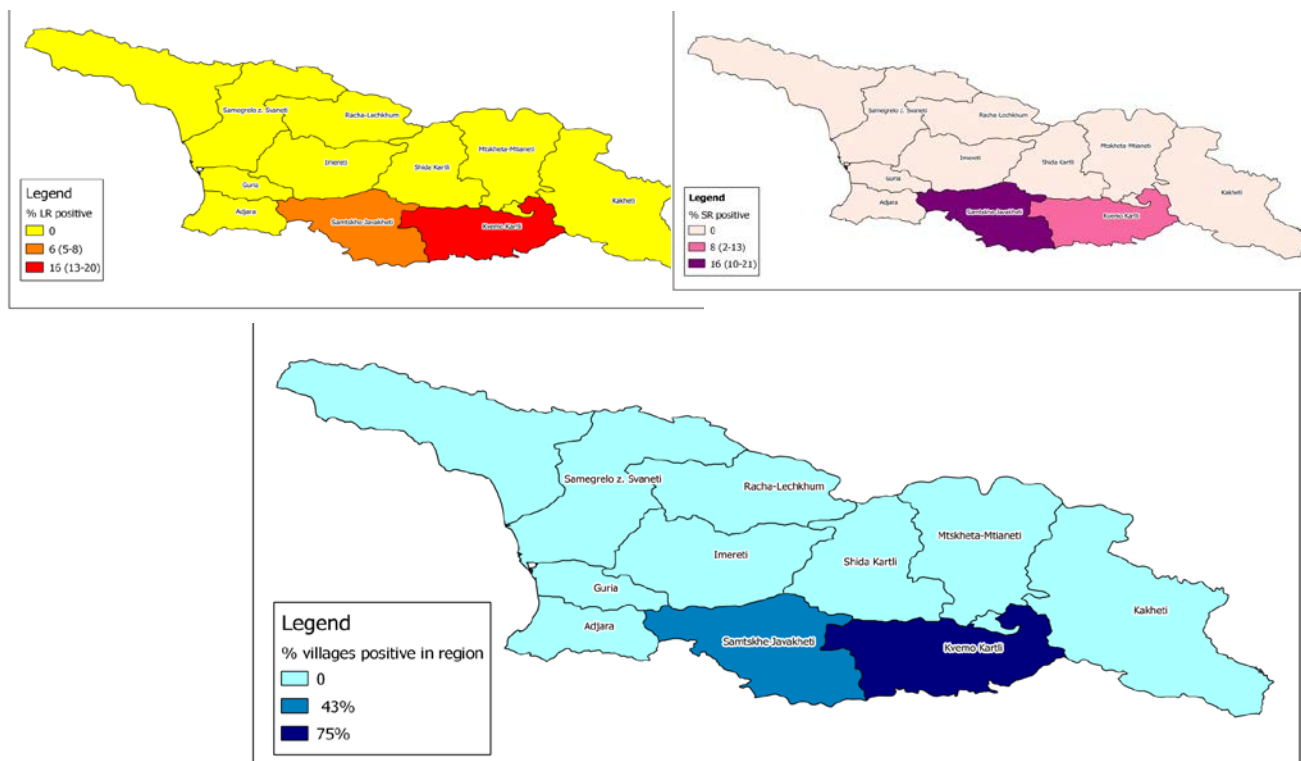


In total taken and tested:

- ✓ LR serum samples – 2538, from 79 villages; (123 pos)
- ✓ SR serum samples – 406, from 21 villages; (31 pos)
- ✓ naive animals serum samples (10 calves in 0, 21, 42 and 90 days)
- Electronic data entry has been done.



2012 Georgia NSP Serosurvey





Follow-up investigation 2012

- Accordance to EuFMD project design has been selected 2 clusters with high NSP antibody levels.
- The first cluster was selected –KvemoKartli Region (Tsalka district, villages Santa and Imera) and the second cluster Samtskhe-Javakheti Region (Akhalkalaki district, villages Sulda and Diliska);
- LMA have completed testing of 800 sera (400 SR & 400 LR) collecting from high level cluster villages;
- Collection of all planned virology samples (nasal/mouth swab and probangs) from four cluster villages was done and has been tested in the LMA during RT-PCR laboratory training in Tbilisi.



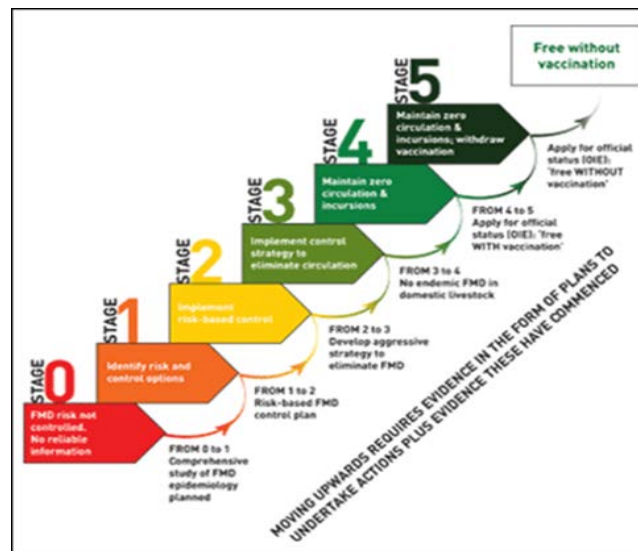
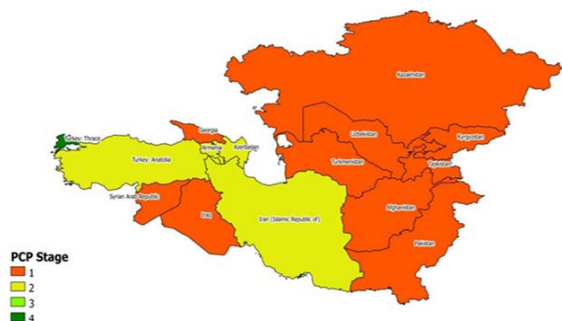
Region	District	Species	Villages	NSP ab		
				Sera tested	Pos.	%
Kvemo Kartli	Tsalka	LR	Santa	50	14	28
			Imera	50	18	36
			Beshtasheni	50	11	22
			Bareti	50	13	26
		SR	Santa	50	3	6
			Imera	50	7	14
			Beshtasheni	50	2	4
			Bareti	50	3	6
Samtskhe-Javakheti	Akhalkalaki	LR	Sulda	50	10	20
			Diliska	50	8	16
			Vachiani	50	4	8
			Dadeshi	50	7	14
		SR	Sulda	50	4	8
			Diliska	50	7	14
			Vachiani	50	4	8
			Dadeshi	50	4	8
Total:				800	119	15



Description of FMD surveillance results and any control measures implemented, specifically for Stage 2:

Georgia is currently on PCP Stage-1;

Preliminary Assessment of country PCP Stage following 2012 W. Eurasia Roadmap meeting



- FMD high risk zones have been defined: areas near border of Armenia, Azerbaijan, Turkey and the occupied regions; areas near animal migration routes and livestock markets. Georgia is at risk of FMD introduction from other countries, and FMD may spread within Georgia through animal movements associated with markets and seasonal migrations. FMD Control Strategy is based on Risk assessment, surveillance, movement restrictions and mass vaccination (whole amount of LR & SR population, 2 times at list 3 years).



- Migrated animals - Animals migrate between winter and summer pastures. Their routes are identified and the possible amount of population is estimated. The relevant district bodies of NFA carry out monitoring on migrating animals. Mobile points are established for health control on passing roads. Migrating animals pass many settled points and they get in contact with the local animal population that increases the risk of disease spreading;
- Common pastures - animal contact takes place at the borders of bordering countries and are used common pastures that include a high risk of transmission;



- There are large scale national and cross-border ruminant movements due to official and informal International trade;
- Large scale outbreaks continue to occur in neighboring Iran and Turkey. The serotypes involved are FMD A, FMD O and FMD Asia 1. Most cases appear in areas adjacent to the TCC: eastern and NE Anatolia and NW Iran;
- FMD O Panasia-2 outbreaks were reported from South Ossetia in August 2011;
- Wild animals - risk factor is also the fact that there is a large amount of wild animals in Georgia.



Georgia is currently recognized in PCP-FMD Stage 1. The development of a risk-based strategic plan is required to move into PCP-FMD Stage 2.

- Developing the plan ensures:
 - Analysis of risks
 - Consideration of best use of limited resources to mitigate the risks
- Once written, the plan is a valuable communication tool:
 - Within the Veterinary Services
 - Private stakeholders
 - Regional and international communities
 - Donors for technical assistance
- During implementation, monitoring and Evaluation :
 - continuous improvement in efficiency of use of resources
 - Demonstrate achievements



Description of FMD control plan

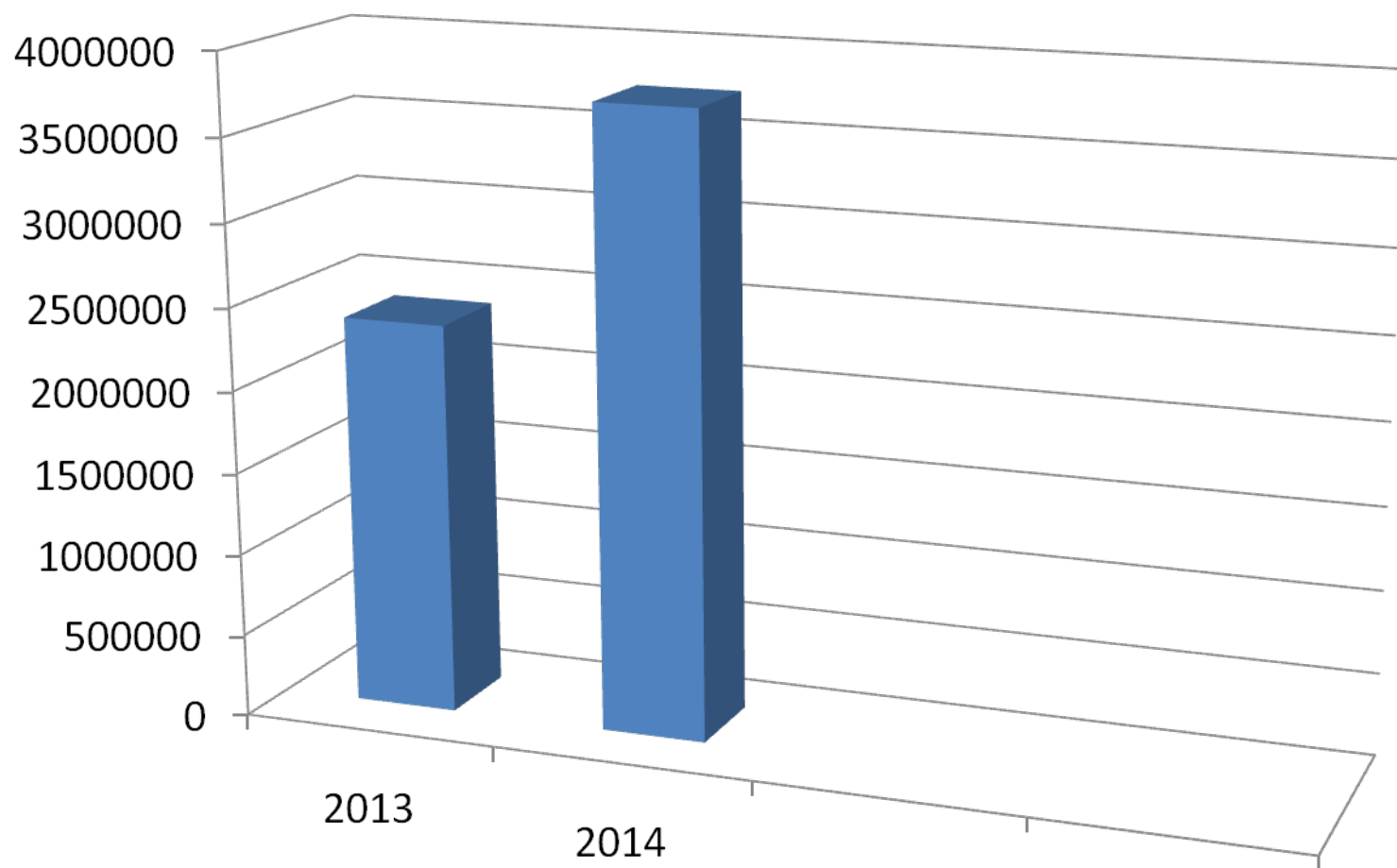
- Information on national or international projects that feed directly or indirectly to FMD control (CIB, USDA, DTRA, SAB-G, FAO);
- Information on ongoing activities related to strengthening veterinary service (component 2 of the global FMD control strategy) to benefit FMD control;
- Information on dual/synergistic benefits to control major diseases of livestock (component 3 of the global FMD control strategy) arising from FMD control activities.



Vaccination against FMD

2013-2014

- **2013-** was vaccinated 2 376 969 animals (1 513 364 Cattle, 863 605 small ruminants).
- **2014-** planned to vaccinate 3 750 000 animals (2 250 000 cattle and 1 500 000 small ruminants)





Workforce for veterinary activities in Georgia

State Veterinarians	Existed/Planed
133	1 January 2014
33	Were added upto now
19	Is pending
185	Will be in total

Contracted for 2014	Existed/Planed
264	Veterinarian
206	Para Vet
23	Assistance
493	Contracted in total

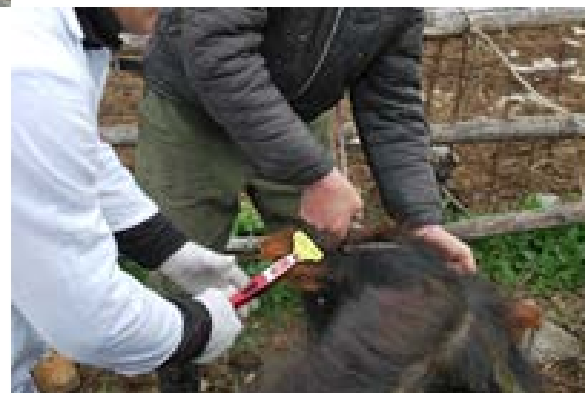


Update of Veterinary activities – Spring 2014



FMD	Large Ruminants	293,644
	Small Ruminants	224,745
Anthrax	Large Ruminants	57,663
	Small Ruminants	19,934
	Horse	326

Ear Tagged	Large Ruminants	293,644
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Defining a long term goal and strategic objective for FMD control

- Georgia has recently developed a National Animal Health Program (2013-2018), in which a vision and long-term objectives are defined. These are:
- **Vision:** *According to the Government's policy to achieve a continuous and lasting improvement in the health and welfare of animals which meets the needs of stakeholders, enables safe production of food, improves health of the public, sustains the rural economy and enables trade'.*

Long term objectives of the NAHP are to:

- Support production of food from healthy animals;
- Enable increased trade;
- Limit the levels of infections, diseases and related risks;
- Channel donor and government investments into sustainable projects consistent with the NAHP



Goal and Strategic Objective

- ***Goal :*** *Achieve a continuous and lasting improvement in the productivity, health and welfare of animals which meets the needs of stakeholders, sustains the rural economy and enables trade’.*
- ***Strategic objective*** *Enter PCP Stage 2 in 2014 (involves the implementation of the RBSP to reduce FMD impact) AND enter PCP Stage 3 in 2016 (involves the implementation of an aggressive RBSP to eliminate FMD virus circulation*

Defining component objectives (CO)

- long term goal (5-15 years) and a medium term strategic objective (SO) for FMD control in Georgia, coherent with the National Animal Health Program.
- Component objectives are more specific objectives related to mitigating the risks and improving FMD management.



Component Objectives

(Identified by participants at workshop on developing a Risk Based Strategic Plan for FMD control)

- Establish risk-based strategic plan;
- Improve control on migration roads;
- Reduce risk from grazing at borders;
- Reduce risk of FMDV introduction into live animal markets;
- Ensure early detection and response;
- Improve monitoring system;
- Improve advocacy to support FMD control.



Thank you for attention



Государственная инспекция по ветеринарной и фитосанитарной безопасности при Правительстве Кыргызской Республики



- Кыргызстан - высокогорная страна. Почти 90% территории республики находится выше 1500 м, средняя высота 2750 м, наибольшая — 7439 м (пик Победы), самая низкая 401 м (Лейлекский р-н). Климат континентальный. Большинство рек входят в систему Сыр-Дарьи, которая отличается богатством водной энергии, используемой для орошения полей, пополнение озёр, среди них самое большое — Ыссык-Куль (площадь 6236 км²).
- Площадь Кыргызстана 198,5 тыс. кв.км. Население 5,9 млн. чел. (по данным переписи населения 2013г.).



Создана Государственная инспекция

- Постановление Правительства Кыргызской Республики от 12 января 2012г. №12.

Передано функции

- Постановление Правительства Кыргызской Республики от 10 февраля 2012г. №87

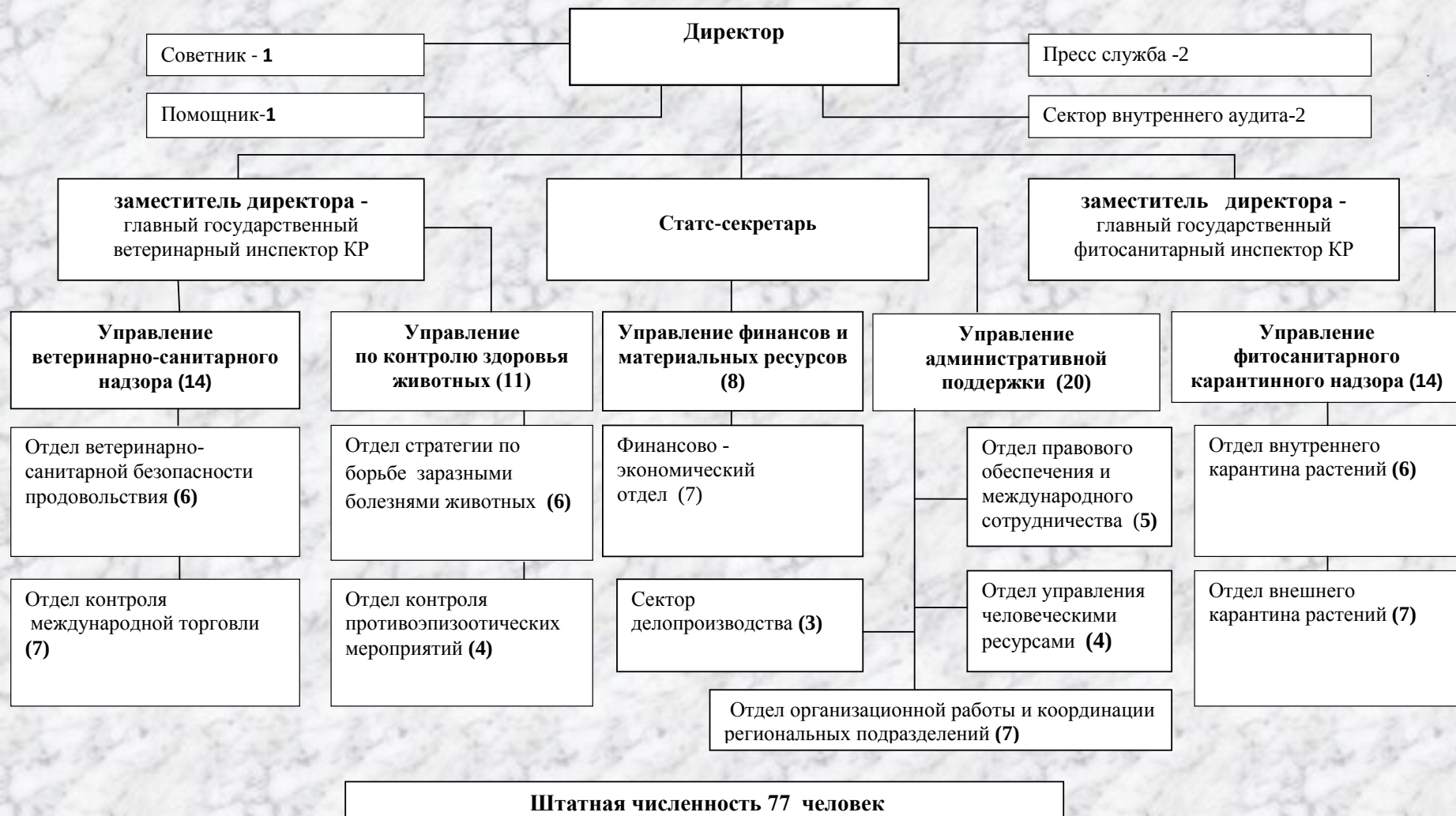
Передан ДГВ в состав Госинспекции

- Постановление Правительства Кыргызской Республики от 02 июня 2012г. №367

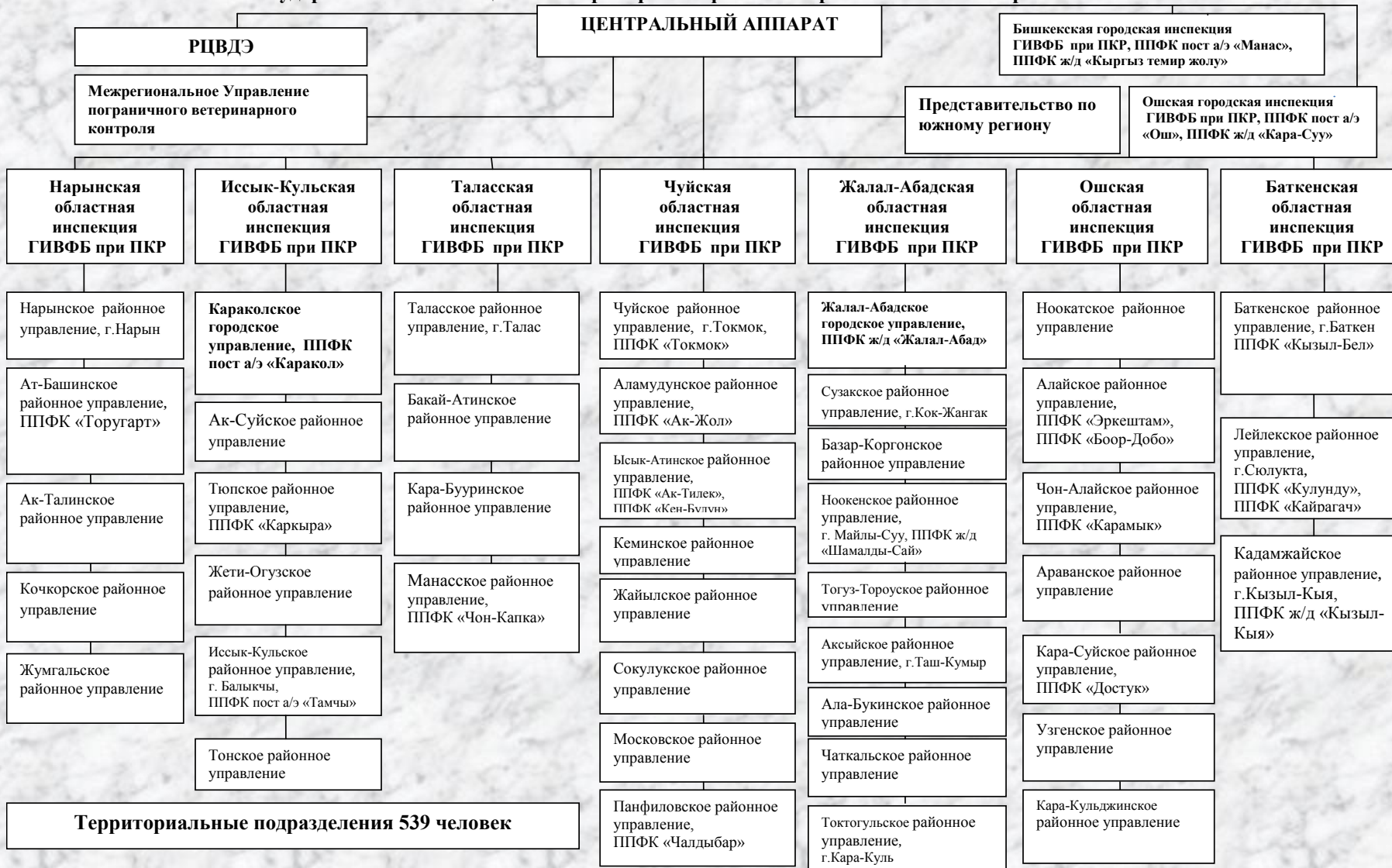
Утверждено положение и структура

- Постановление Правительства Кыргызской Республики от 5 мая 2013г. №256

Структура центрального аппарата Государственной инспекции по ветеринарной и фитосанитарной безопасности при ПКР



**Структура региональных подразделений
Государственной инспекции по ветеринарной и фитосанитарной безопасности при ПКР**



Ожидаемые результаты

- **Сокращения контролирующих органов**
- **Сокращения количества инспекторов**
- **Устранение дублирования**
- **Улучшение взаимодействия с субъектами предпринимательства**
- **Улучшение взаимодействия с министерствами, ведомствами и СМИ**
- **Электронный документооборот по программе ГП «Единое окно»**
- **Экономия бюджета**

Ожидаемые результаты 1

Сокращение контролирующих органов:

- Из двух контрольно-надзорных органов создан один орган – Государственной инспекции по ветеринарной и фитосанитарной безопасности при ПКР

Ожидаемые результаты 2

Уменьшено количество инспекторов:

Ветеринарной службы

Всего сотрудников – 1044 в том числе инспекторов – 391 -
Уходит в Госинспекцию – 155 специалистов

Постановлением ПКР №367 от 02.06.2012г. Остальная часть ДГВ
МСХ и МКР с количеством 681 специалистов переданы в ГИ

Фитосанитарной службы

- Всего – 150 в том числе инспекторов – 83
- Уходит в Госинспекцию – 57 специалистов

Всего уменьшено количество надзирающих инспекторов из трех
органов на 584 человек

Ожидаемые результаты 3

Улучшение взаимодействия с субъектами предпринимательства:

- Сокращение проверок
- Получение информации и разрешительных документов из одного источника ГИ
- Создание информационной базы для субъектов предпринимательства

Численность скота и домашней птицы по республике с 2005 по 2014 гг.

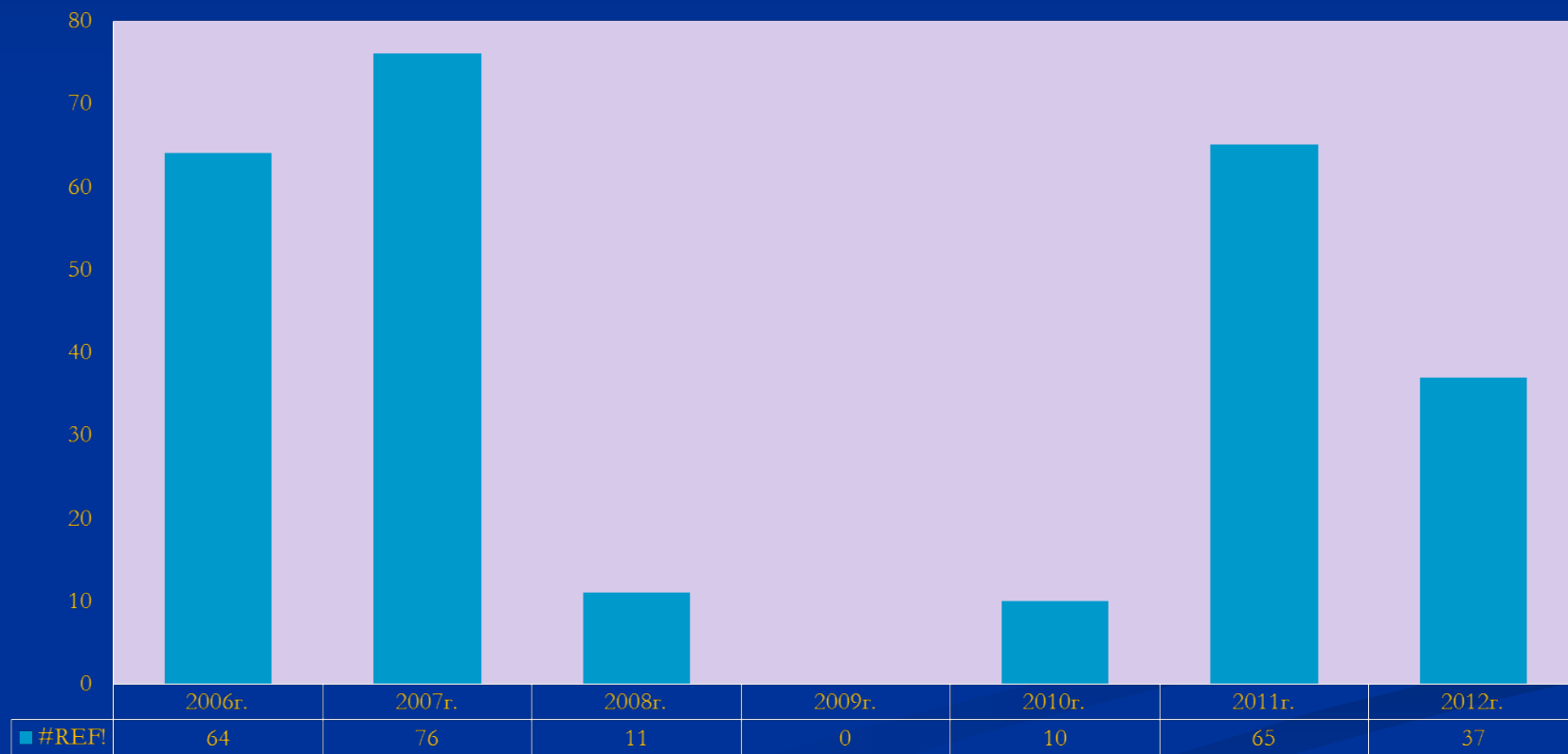
№	Вид скота и дом.птицы	Ед.изм.	Годы		В 2014 к 2005г.	
			2005	2014	%	(+,-)
1	КРС	тыс.гол.	1034,9	1404,1	135,7	369,3
2	МРС	тыс.гол.	3773,6	5641,2	149,6	1873,6
3	Свиньи	тыс.гол.	82,7	51,8	62,6	-30,9
4	Лошади	тыс.гол.	347,2	407,4	117,3	60,2
5	Домашняя птица	тыс.гол.	4510,9	5385,7	119,4	874,8

Ящур

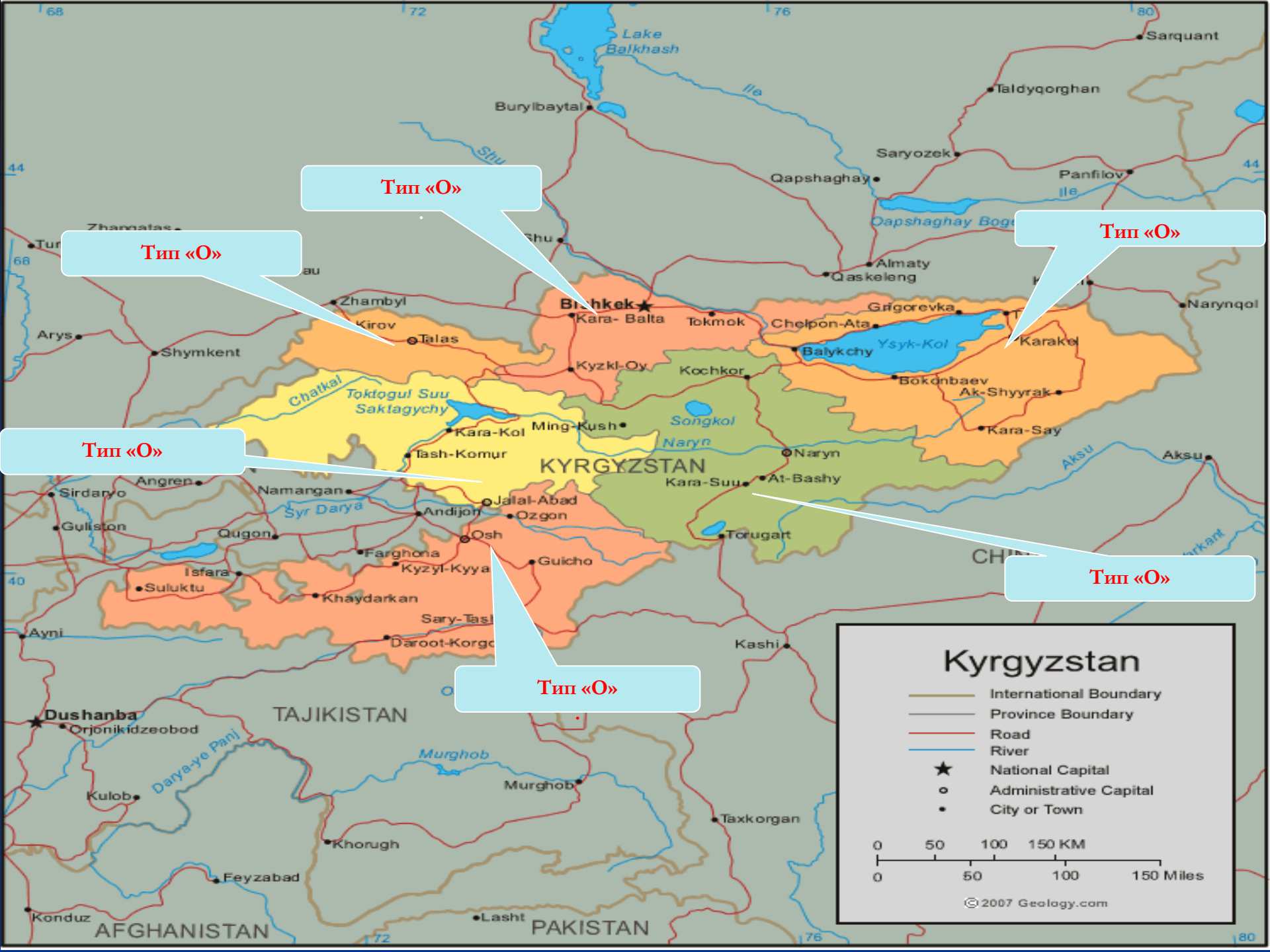
- По республике за 2012 год вакцинировано против ящура крупно рогатого скота – 1317,2 тыс.голов;
- За отчетный период 2012 года всего зарегистрировано 37 неблагополучных пунктов, при этом заболело 889 голов крупного рогатого скота и 200 голов мелкого рогатого скота.
- За 2013 года вакцинировано против ящура крупного рогатого скота – 1330,9 тыс. голов, а за 1 квартал 2014 года 425,0 тыс голов.
- С 2013 - 1 квартал 2014 годы неблагополучных пунктов по ящуре нет.

Вспышки ящура за последние 7 лет по Кыргызской Республике

Неблагополучные пункты по ящуру в Кыргызской Республики
2006-2012гг.



- Основной причиной вспышек ящура на территории Кыргызской Республики - это занос вируса из сопредельных неблагополучных стран, в первую очередь, в связи с нелегальным завозом животных, продуктов животноводства, кормов и контактами животных на общих пастбищах и водопоях.
- Анализ данных о течении ящура в Кыргызстане за 2005-2012 годы показали, что ящур остается одним из наиболее распространенных и опасных заболеваний сельскохозяйственных животных.
- В течении последних 3х лет использовано 3х валентная вакцина против ящура А/О/Азия-1 производства Индии фирмы (RAKSHA OVAC) и (Футвак»).
- Экспертизой № 115 от. 13.04.2012г, в двойном непрямом сендвич- варианте ИФА и методом ОТ-ПЦР установлен вирус ящура типа «О», Пан-Азия -2.
- 7- октября 2011 года в Центр МЭБ по сотрудничеству в области диагностики и контроля болезней животных для стран Восточной Европы, Центральной Азии и Закавказья в Региональную референтную лабораторию по ящуру Российской федерации г. Владимир направлено 7 проб пат материала от больных КРС.
- При исследовании (эксп № 141 от. 27.04.2012г) установлен вирус ящура типа «О». изоляты относятся к генетической линии Пан-Азия -2.
- Государственная ветеринарная служба на 2012 год закупили вакцину трёхвалентную типов А-Iran-05, «О» Пан-Азия-2, Азия-1-Shamir согласно технической спецификации, производитель ФГБУ «ВНИИЗЖ» г. Владимир.



- В республике подготовлена программа в соответствии с Решением Межправительственного совета по сотрудничеству в области ветеринарии СНГ от 17 апреля 2002 г.
- Основная цель программы направлена на недопущение возникновения и распространения на территории Кыргызской Республики эпизоотии ящура, сведение к минимуму ущерба от возможных вспышек благодаря быстрой локализации и ликвидации эпизоотических очагов с осуществлением поголовной вакцинации и карантинных мер.
- В соответствии с разработанной моделью потенциального заноса ящура, по степени риска его заноса, возникновения и распространения всю территорию Кыргызской Республики можно разделить на две зоны:
 - * **Высокой степени;**
 - * **Средней степени.**
- **В зону высокой степени риска заноса и возникновения ящура включены; 4 района Ошской области, 6 районов Джалалабадской области, 2 района Таласской области, 1 район Нарынской области, и все районы Чуйской областей, которые граничат с Республиками Таджикистан, Узбекистан, Казахстан и КНР.**
- **2. К зоне средней степени риска заноса и возникновения ящура отнесены; Иссык-Кульская, Нарынская и Баткенская области.**

Об идентификации животных

- Принять Закон Кыргызской Республики «Об идентификации животных» от 6 июня 2013 года за № 91.
- Настоящий Закон регулирует отношения, связанные с идентификацией животных, достоверным учетом и ведением государственной отчетности о движении идентифицированных животных, определяет организационные, правовые и финансовые основы идентификации животных и устанавливает основные принципы организации и проведения этой работы на территории Кыргызской Республики.
- Реализация данного Закона будет реализовываться на II квартале 2014года.

Вирусологический отдел РГЦВД занимается диагностикой ящура сельскохозяйственных животных, а также о их дифференциацией.

- Определение напряженности иммунитета Ящура КРС, от вакцинированных животных всего в 2012 году поступило-5 383 сыворотки крови.
- Определение неструктурных белков, поступило-4164 проб крови.
- Выявлением антигена, пат. материалов (типизация)
- Для осуществление программы по мониторингу ящура диагностические тест-киты закуплены через ФАО.

Государственная ветеринарная служба проводит мероприятия по мониторингу при выявлении ящура.

- Диагностика неструктурных белков вируса ящура (вирусоносительство).
- Определение типа вируса ящура (типизация).
- Определение антител ящура до вакцинации.
- Определение напряженности иммунитета (антитела) ящура после вакцинации через 21 дней.

Уважаемые коллеги, спасибо за внимание!

- ОФИЦИАЛЬНЫЙ САЙТ ГОСУДАРСТВЕННОЙ
ИНСПЕКЦИИ ПО ВЕТЕРИНАРНОЙ И
ФИТОСАНИТАРНОЙ БЕЗОПАСНОСТИ ПРИ
ПРАВИТЕЛЬСТВЕ КЫРГЫЗСКОЙ РЕСПУБЛИКИ
WWW.VET.ORG.KG
- E-mail: depvet01@mail.ru

Progressive Control of Foot and Mouth Disease in PAKISTAN

Muhammad Afzal¹, Manzoor Hussain² and R. H. Usmani³

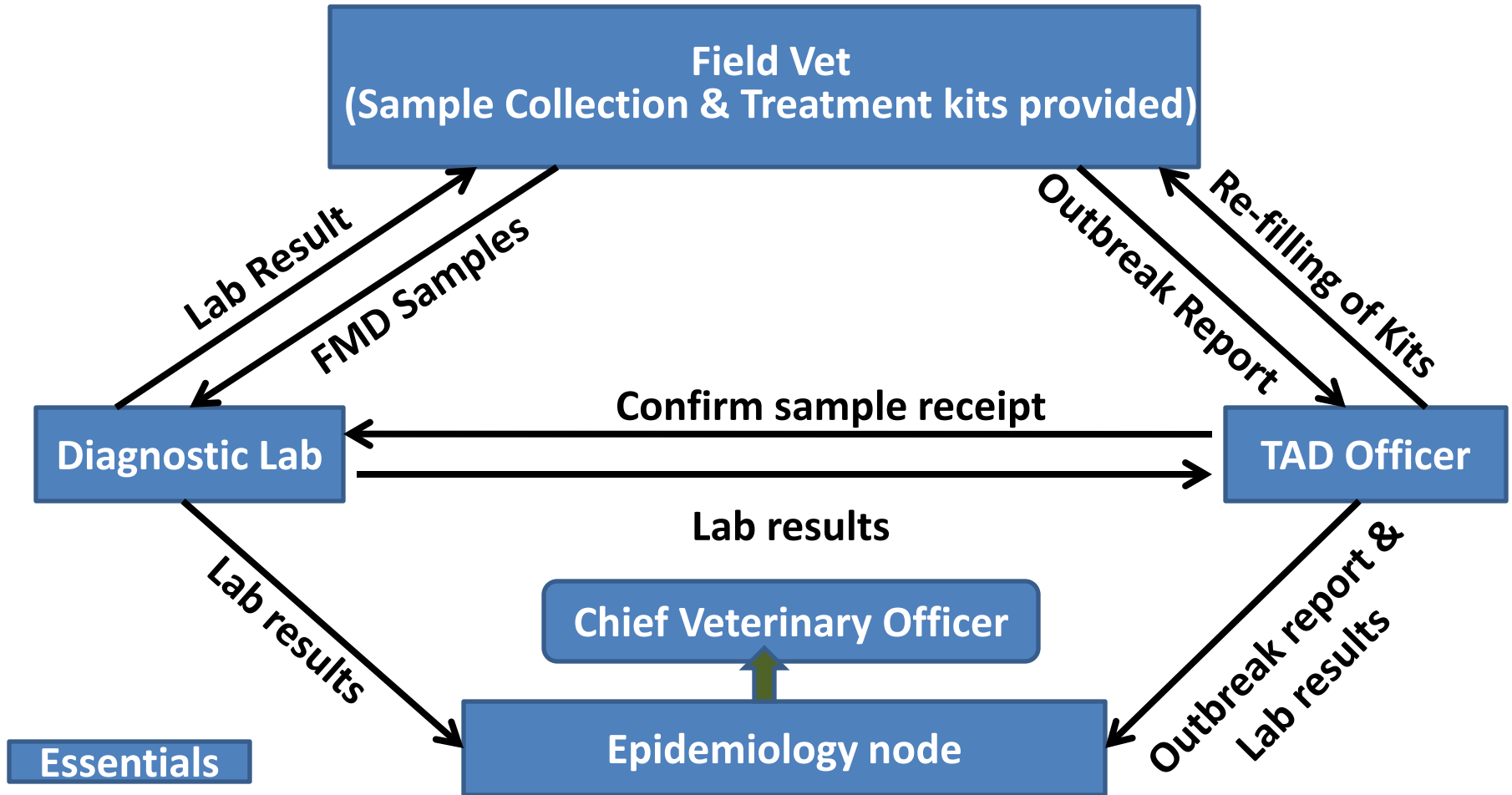
**¹Project Coordinator, ²National Project Director,
GCP/PAK/123/USA, FAO Pakistan Office, Islamabad and**

**³Animal Husbandry Commissioner (Chief Veterinary Officer),
Ministry of National Food Security and Research,
Government of Pakistan**

Improvement in FMD diagnosis

- **8 labs in Pakistan (Islamabad, Peshawar, Lahore, Tandojam, Karachi, Quetta, Gilgit, Mirpur) fully functional for FMD virus serotyping by ELISA**
- **Molecular diagnostics (PCR – conventional and real time) and virus isolation working at NVL**
- **NVL participating in proficiency testing program of World Reference Lab, Pirbright**
- **Development of an harmonized (central and provincial) Laboratory Information Management System**

Surveillance for FMD

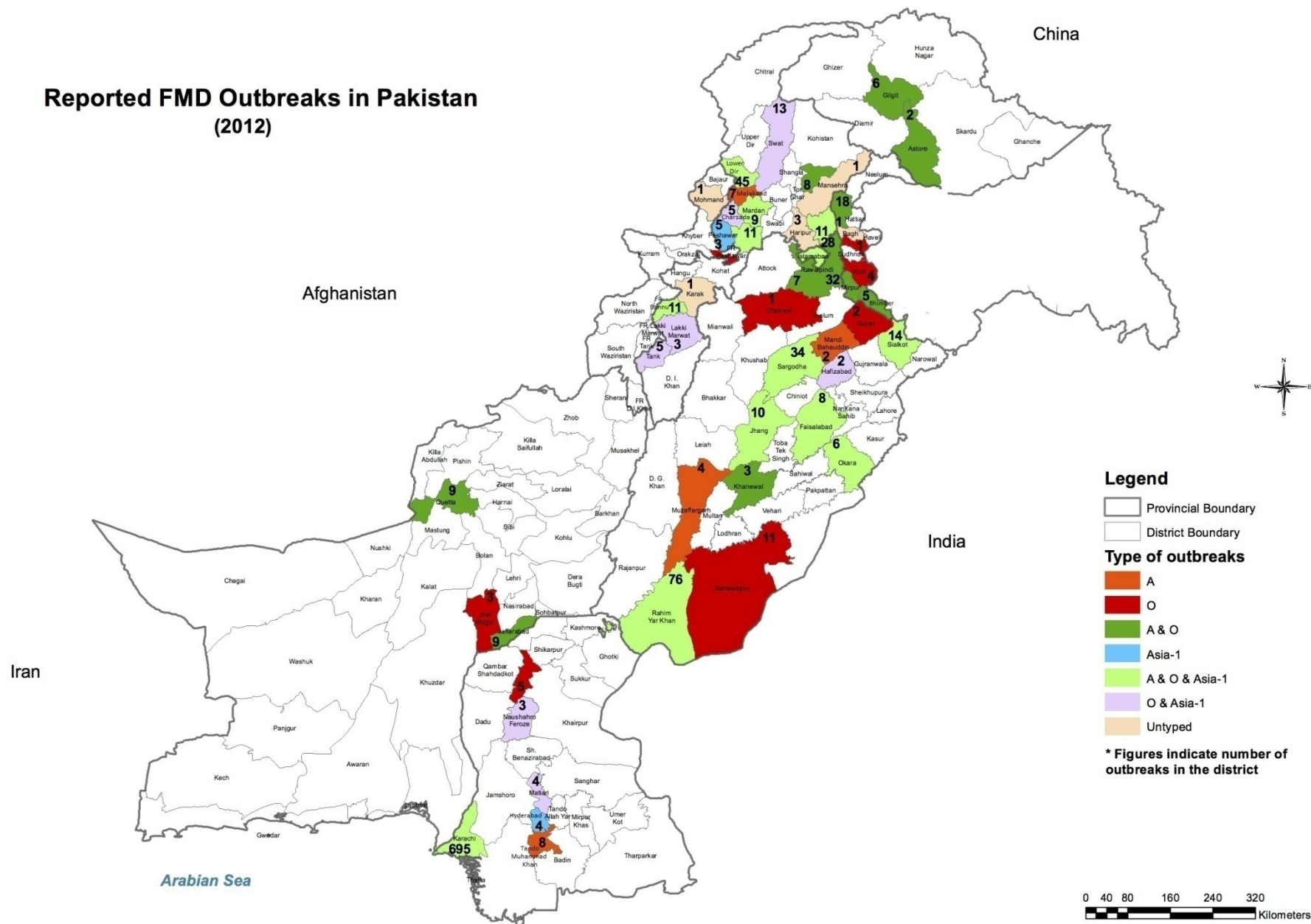


Awareness of field staff and dairy farmers	Training of veterinary staff
Provision of sample collection and dispatch material	Cover expenditure of sample collection and dispatch
Respond back with outbreak handling	Report back to field staff on lab findings

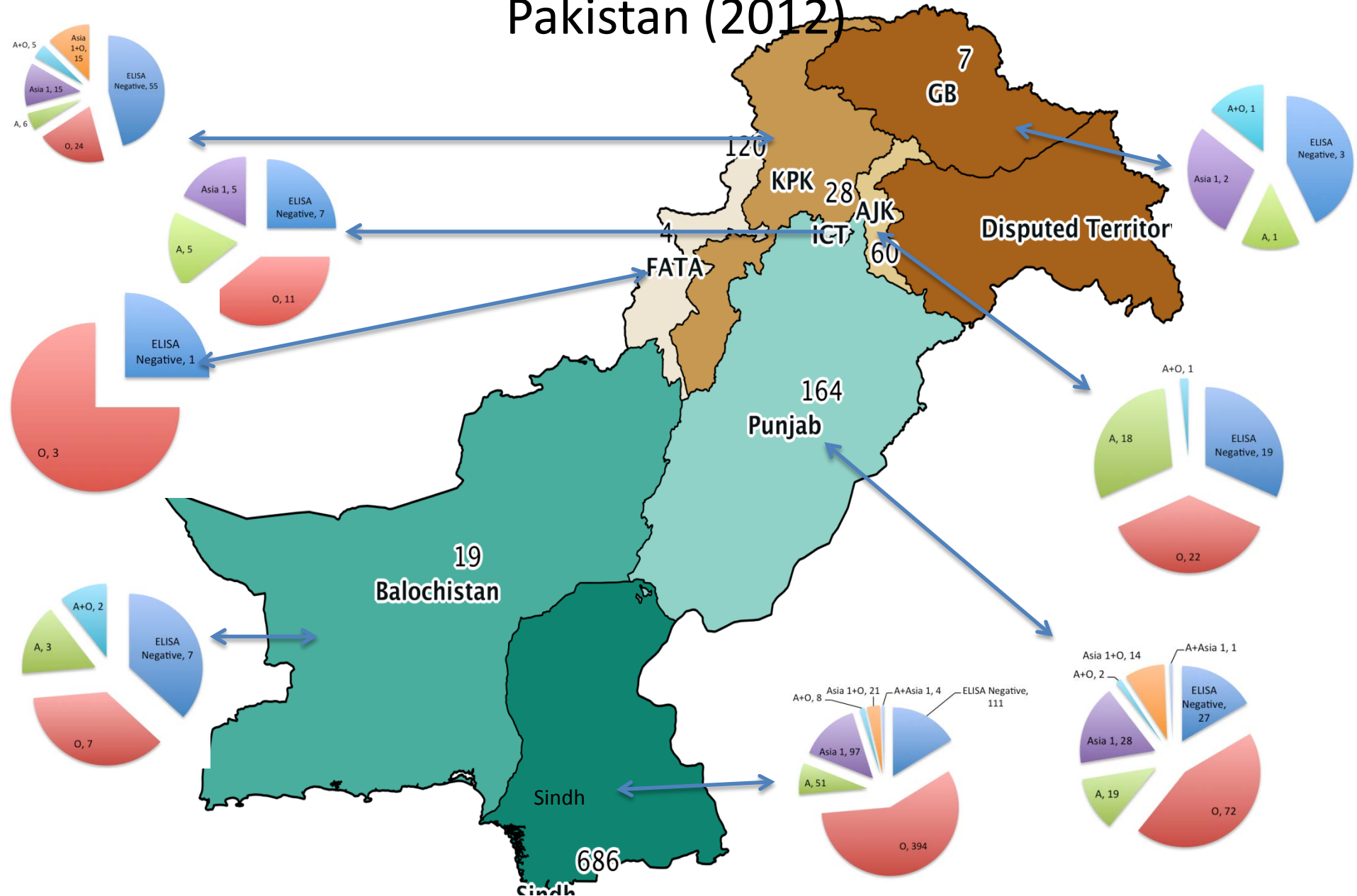
FMD Virus Serotypes (Jan - Dec 2012)

Province	Total FMD outbreaks	Outbreak (#) due to serotype				ELISA Negative Outbreaks
		O	A	Asia-I	Mixed	
Punjab	164	72	19	28	17	28
Sindh	686	394	51	97	33	111
Khyber Pakhtunkhwa	120	24	6	15	20	55
Balochistan	19	7	3	-	2	7
Gilgit-Baltistan	7	-	1	2	1	3
FATA	4	3	-	-	-	1
AJK	60	22	18	-	1	19
Islamabad	28	11	5	5	-	7
Total	1088	533	103	147	74	231

Reported FMD Outbreaks in Pakistan (2012)



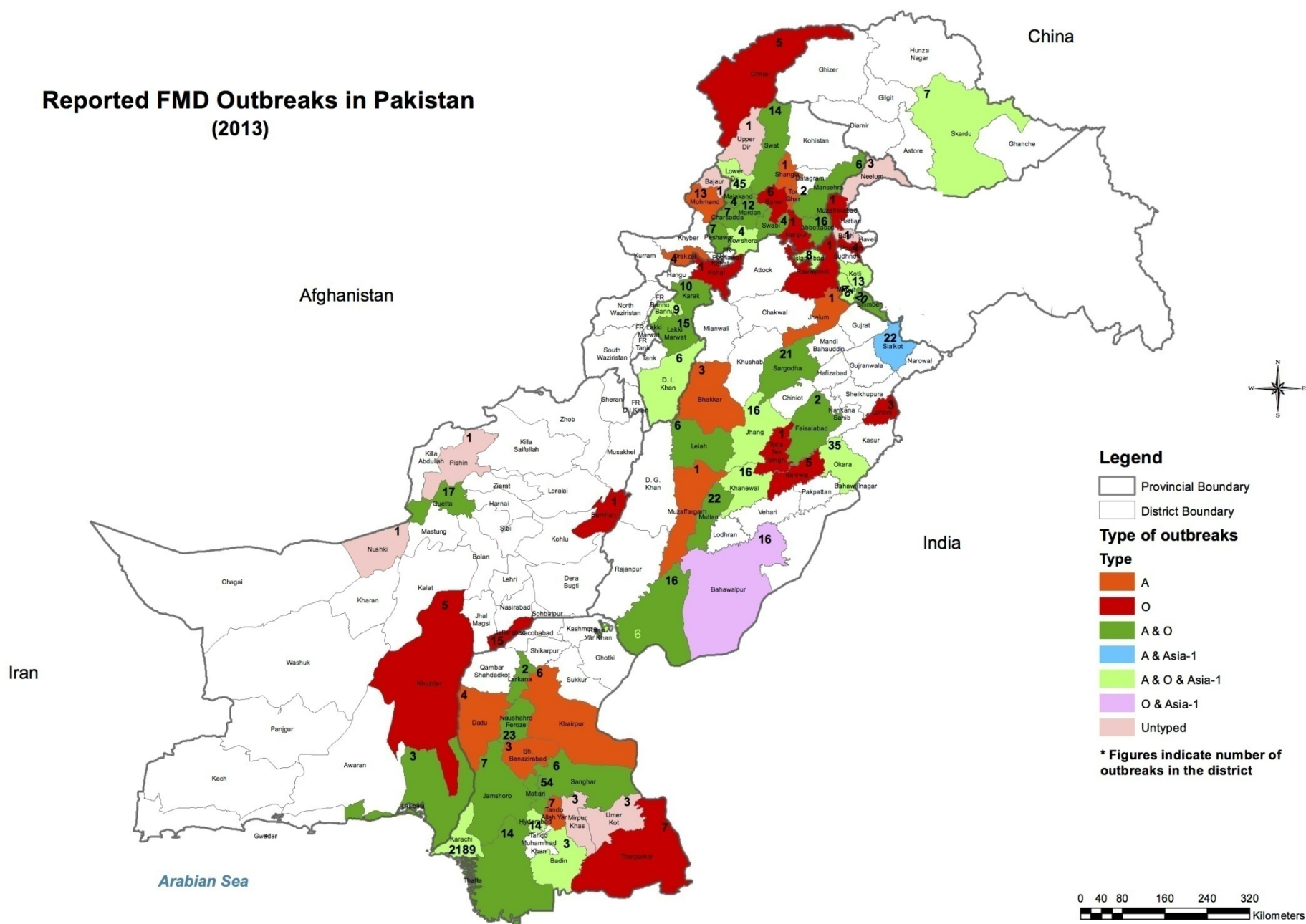
Regional/Provincial Distribution of FMD outbreaks in Pakistan (2012)



FMD Virus Serotypes (January-December 2013)

Province	Total FMD outbreaks	Outbreaks (#) due to serotype				ELISA Negative Outbreaks
		O	A	Asia-I	Mixed	
Punjab	177	65	47	21	3	41
Sindh	2364	991	959	80	22	312
Khyber Pakhtunkhwa	171	61	44	2	17	47
Balochistan	42	15	3	-	1	23
Gilgit-Baltistan	7	2	-	-	5	-
FATA	18	-	11	-	-	7
AJK	89	31	25	5	-	28
Islamabad	6	1	2	2	-	1
Total	2874	1166	1091	110	48	459

Reported FMD Outbreaks in Pakistan (2013)



Genotypes of FMD virus (2012-13)

Serotype	Genotype	Reporting Lab
O	PanAsia-2 ^{ANT-10} Unnamed	WRL, Pirbright PIADRC, New York
A	Iran-05 ^{FAR-11} Iran-05 ^{SIS-12}	WRL, Pirbright PIADRC, New York
Asia-1	Sindh 08	WRL, Pirbright PIADRC, New York

FMD Virus Serotypes (January-March 2014)

Province	Total FMD outbreaks	Outbreaks (#) due to serotype				ELISA Negative Outbreaks	Not Yet Tested
		O	A	Asia-I	Mixed		
Punjab	188	142	7	1	10	26	2
Sindh	486	136	13	6	2	37	292
Khyber Pakhtunkhwa	166	85	10	4	-	67	-
Balochistan	129	32	18	-	-	23	56
Gilgit-Baltistan	2	2	-	-	-	-	-
FATA	19	13	-	-	-	6	-
AJK	363	119	-	-	1	69	174
Islamabad	24	15	3	1	2	3	-
Total	1377	544	51	12	15	231	524

Awareness raising of livestock farmers

Province / Area	Seminars #	Farmers trained #
Punjab	23	766
Sindh	11	605
Khyber Pakhtunkhwa	21	1149
Balochistan	8	192
FATA	6	215
Gilgit-Baltistan	2	52
Azad Jammu & Kashmir	24	787
Islamabad	1	47
Total	97	3813

January 2012 – March 2014

Capacity building of field and laboratory staff

Province / Area	Workshops #	Vets trained #	Kits provide #
Punjab	16	446	295
Sindh	10	317	259
Khyber Pakhtunkhwa	5	162	116
Balochistan	5	147	123
FATA	3	77	70
Gilgit-Baltistan	1	20	16
Azad Jammu & Kashmir	3	100	66
Islamabad	1	29	20
Total	40	1298	965

January 2012 – March 2014

Vaccine used in Pakistan

Vaccine 2012

- Serotype O - PanAsia-2
- Serotype A – Iran 05
- Serotype Asia-1 – Shamir
- Concentration of all strains in the vaccine > 6 PD_{50}

Vaccine 2013 – 2014

- Serotype O - PanAsia-2
- Serotype A - Turkey 06
- Serotype Asia-1 - Sind 08
- Concentration of all strains in the vaccine > 6 PD_{50}

Vaccination in dairy colonies

Dairy Colony	Farms #	Animals #		
		Initial	New	Total
Khalsa area Peshawar	330	10000	2382	12382
Landhi, Karachi	27	6761	8730	15491
Nagori Society, Karachi	28	4839	6113	10952
Rakh Chandra Rai Lahore	183	7014	2686	9700
Eastern bypass, Quetta	16	3927	307	4234
Quary Road, Quetta	33	7567	4396	11963
Livestock farms, Mirpur	30	945	-	945
Suhan & Tarlai Islamabad	278	6529	-	6529
Total	925	47582	24614	72196

No evidence of clinical disease in vaccinated animals

Vaccination in Smallholders Rural Production System

District	Villages #	Farmers #	Animals #		
			Initial	New	Total
Rahim Yar Khan	5	810	7014	612	7626
Jhang	4	704	4189	250	4439
Attock	3	910	5000	-	5000
Nausheroferoz	24	722	3314	-	3314
Tando Allahyar	12	689	2341	-	2341
Thatta	8	210	3650	-	3650
Matiari	5	543	5590	-	5590
Abbottabad	5	1199	4702	60	4762
DI Khan	5	618	4990	52	5042
Nowshera	5	590	4195	820	5015
Pishin	4	295	3207	960	4167
Lasbella	4	346	2818	-	2818
Bolan	6	290	3230	-	3230

Vaccination in Smallholders Rural Production System

District	Villages #	Farmers #	Animals #		
			Initial	New	Total
Muzaffarabad	6	2288	3480	2070	5550
Mirpur	14	1002	3451	49	3500
Rawalakot	11	2768	3874	426	4300
Ghizer	4	910	7000	-	7000
Gilgit	4	750	5177	-	5177
Skardu	4	1012	2928	-	2928
Mohmand Agency	5	664	3816	123	3939
Bajur Agency	5	1628	4517	102	4619
FR DI Khan	2	195	2500	-	2500
Total	145	19143	91956		96507

No evidence of clinical disease in vaccinated animals

Vaccination at rural livestock breeding farms

Province	Farms #	Animal #
Punjab	18	8890
Sindh	5	1064
Khyber Pakhtunkhwa	5	735
Balochistan	-	-
Total	28	10689

No case of FMD recorded in vaccinated animals in last 8 months in Punjab

Expanding Vaccination Program

- **Farmers' demand to expand vaccination program**
- **Cost sharing approach introduced recently**
- **Animals included in the program = 6845**
- **Tagging, primary vaccination, booster dose and six monthly vaccination**
- **Clinical and serological monitoring**

FMD Outbreak Control Policy

- **Movement control advice**
- **Treatment of sick animals**
- **Zoo-sanitary measures**
- **Ring vaccination**

Sero-monitoring of FMD virus circulation

Dairy Production System	Samples Tested (#)	NSP Antibodies	
		Positive (#)	% Positive
Mirpur- Dairy Farms	323	160	49.5
Mirpur-Smallholder Rural Production	309	73	23.6
Muzzafarabad-Smallholder Rural Production	254	9	3.5
Rawalakot- Smallholder Rural Production	270	23	8.5

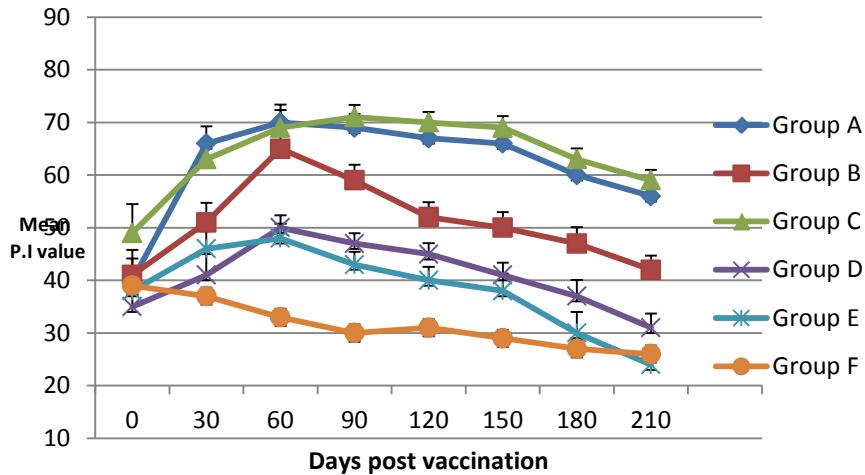
FMD Vaccination in Desert Cattle Farming

- Sero-monitoring showed wide spread FMD virus circulation

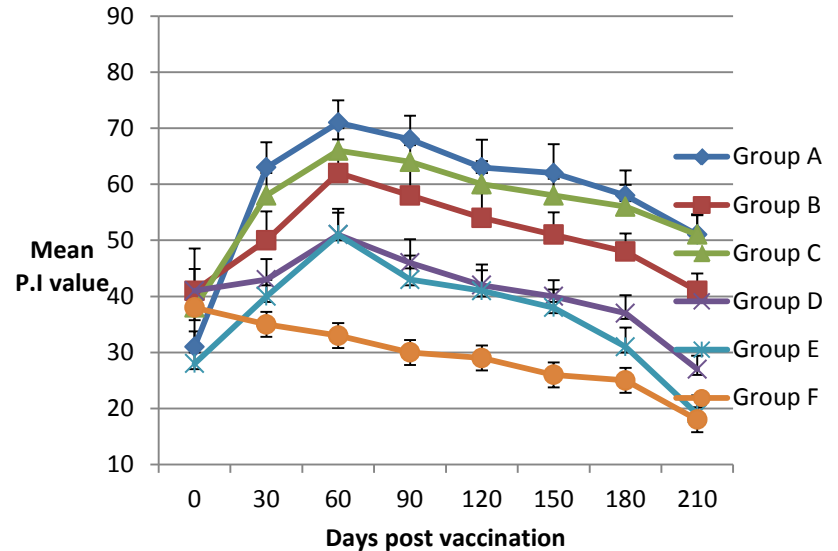
Area	Toba #	Blood samples #	NSP antibody positive #	% Positive
Greater Cholistan	5	102	74	72.5
Lesser Clolistan	7	305	199	65.2
Total	12	407	273	67.1

- Demonstration of FMD control through vaccination in animals of selected farmers in Greater and Lesser Cholistan
- 7500 animals, ear tagged, given primary and booster vaccination
- Clinical and sero-monitoring of vaccinated herds

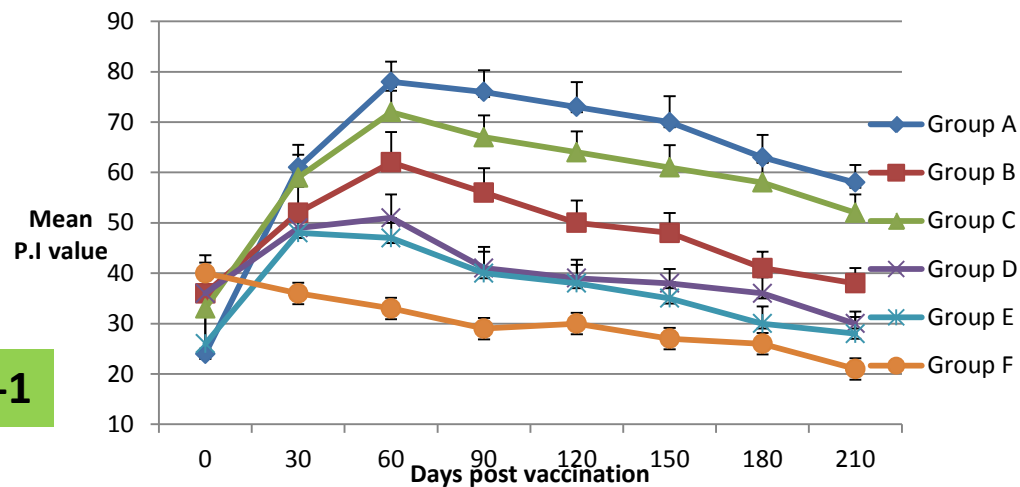
Immune response of buffaloes to FMD vaccines



Serotype A



Serotype O



Serotype Asia-1

FMD Vaccination in Yak

- Trial started in Ghizer district (9 villages). Total Yak population of these villages is 3417
- Vaccination was done in 2193 yaks while 1224 yaks acted as unvaccinated control
- Yaks were ear tagged, given primary and booster dose and six monthly vaccination
- Blood samples taken from yak for sero-surveillance (day 0) - 66 out of 136 i.e. 48.5% were positive for FMD-NSP antibodies before vaccination
- Vaccine response and outbreak data being recorded
- Yaks gave higher ELISA titres following FMD vaccination, titres continued to decline and were still better than pre-vaccination titres at six months following booster vaccination
- No clinical outbreak recorded in vaccinated animals while one FMD outbreak (approx 2000 yaks affected with serotype A) recorded in July 2013 in Nala Khukhush in district Ghizer

Risk-based FMD Control Program for Pakistan

- **Strategic objective**

To progressively reduce the burden of clinical FMD in the dairy sector in Pakistan

- **Overall strategic approach**

At first stage address FMD control in sectors having high incidence and are candidates for virus maintenance i.e. Dairy Colonies and dairy animal breeding areas

- **Components of Control Program**

- Component objective 1: To sustain and further strengthen the diagnostic laboratory capacity at central and peripheral level
- Component objective 2: Sustain and strengthen the surveillance system for FMD and create a national FMD information centre
- Component objective 3: To promote a progressive and more extensive use of good quality vaccine against FMD
- Component objective 4: Improving the legal framework for FMD control
- Component objective 5: Promote a more intensive involvement of stakeholders for FMD control

Acknowledgements



FAS for Financial Assistance, ARS (Dr Luis Rodriguez, Dr. Zaheer Ahmed and Dr. Anna Ludi) for research Collaboration



Animal Health Programme, PARC for research (Dr Khalid Naeem, Dr. Umer Farooq, Dr Naila Siddique)



Animal Husbandry Commissioner Office, National Veterinary Labs, Provincial / Regional Livestock Departments, Public and Private vets and Livestock farmers



Team of GCP/PAK/123/USA Project Progressive Control of FMD in Pakistan (Dr. M. Afzal, Dr. Manzoor Hussain, Dr. Ehtisham Khan, Dr. Javed Arshad, Dr. Nasrullah Panhwer and Dr. Aftab Ahmad)

Thanks



Country name

Uzbekistan

Name of the Speaker

Okkiev Sunnat Saidovich

*The chief of Republican
expedition with epizootic by
groups*



Структура ветеринарной службы

- областных ветеринарных управлений и г. Ташкента;
- ветеринарных лабораторий;
- районных и городских ветеринарных отделов;
- ветеринарных участков и ветеринарных пунктов;
- лаборатории ветсанэкспертизы на рынках;
- погранично-транспортных ветеринарных пунктов.



Основополагающие нормативно-правовые акты Республики Узбекистан

- Закон «О ветеринарии» Республики Узбекистан от 3 сентября 1993 года.
- Закон «О качестве и безопасности пищевой продукции» Республики Узбекистан от 30 августа 1997 года
- «Санитарный Кодекс наземных животных» Международного Эпизоотического Бюро (ежегодное издание)

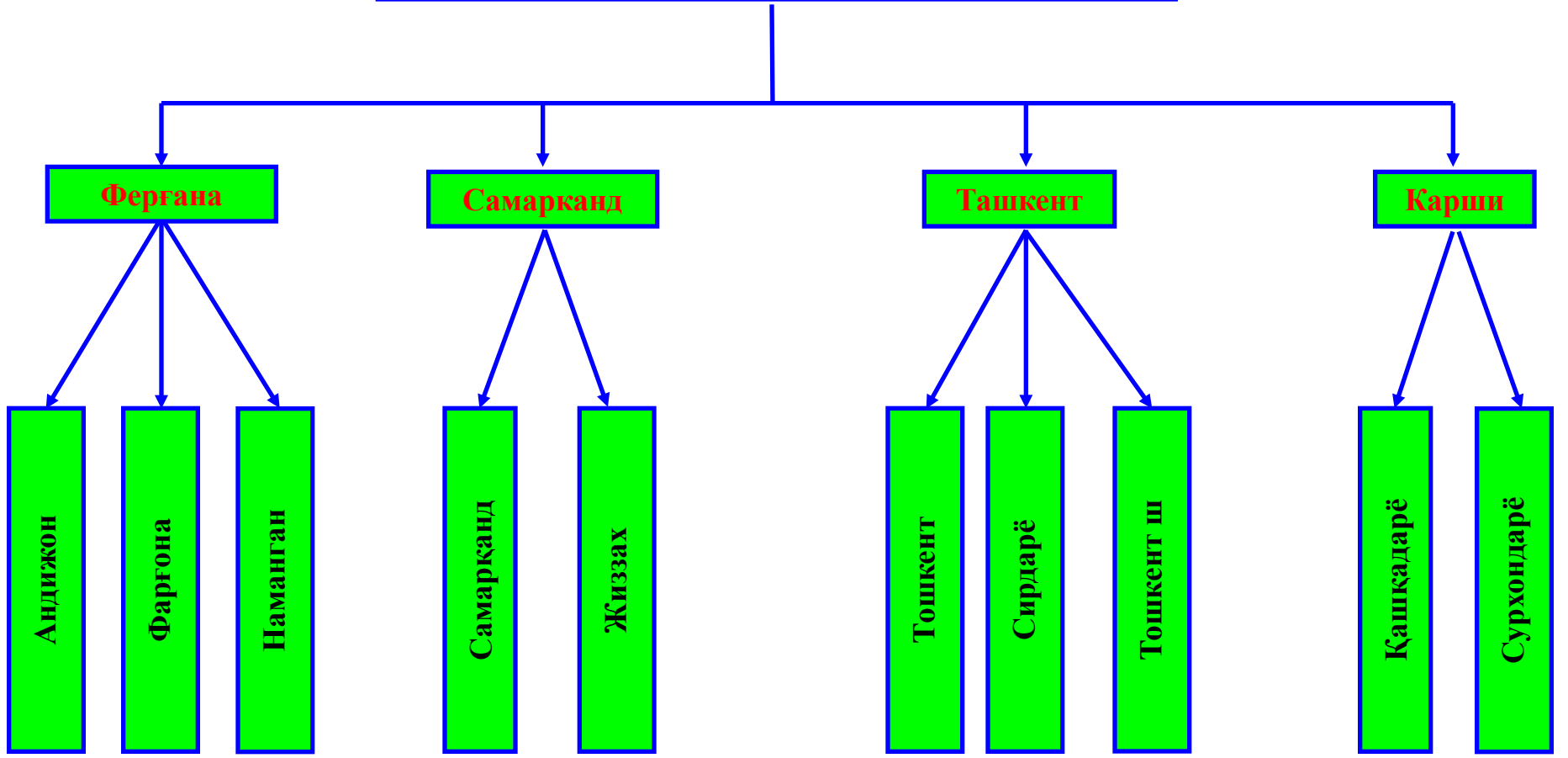


Задача государственной ветеринарной службы являются:

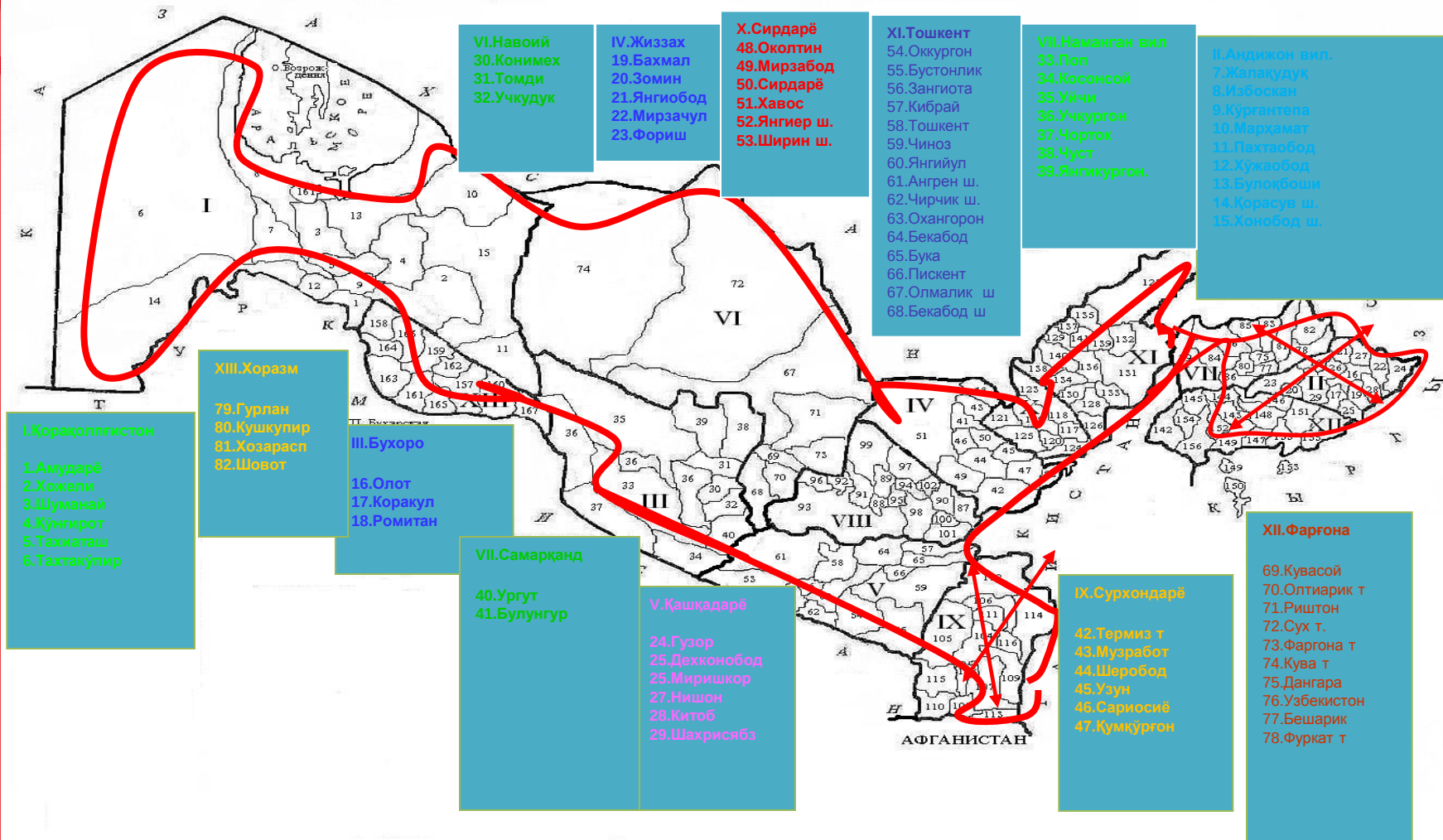
- предупреждение и ликвидация заразных и массовых незаразных болезней животных;
- обеспечение безопасности продуктов животноводства в ветеринарно-санитарном отношении;
- защита населения от болезней, общих для человека и животных;
- охрана территории Республики Узбекистан от заноса заразных болезней животных из иностранных государств.



**Региональные диагностические
лаборатории (РДЛ)**



Буферная зона

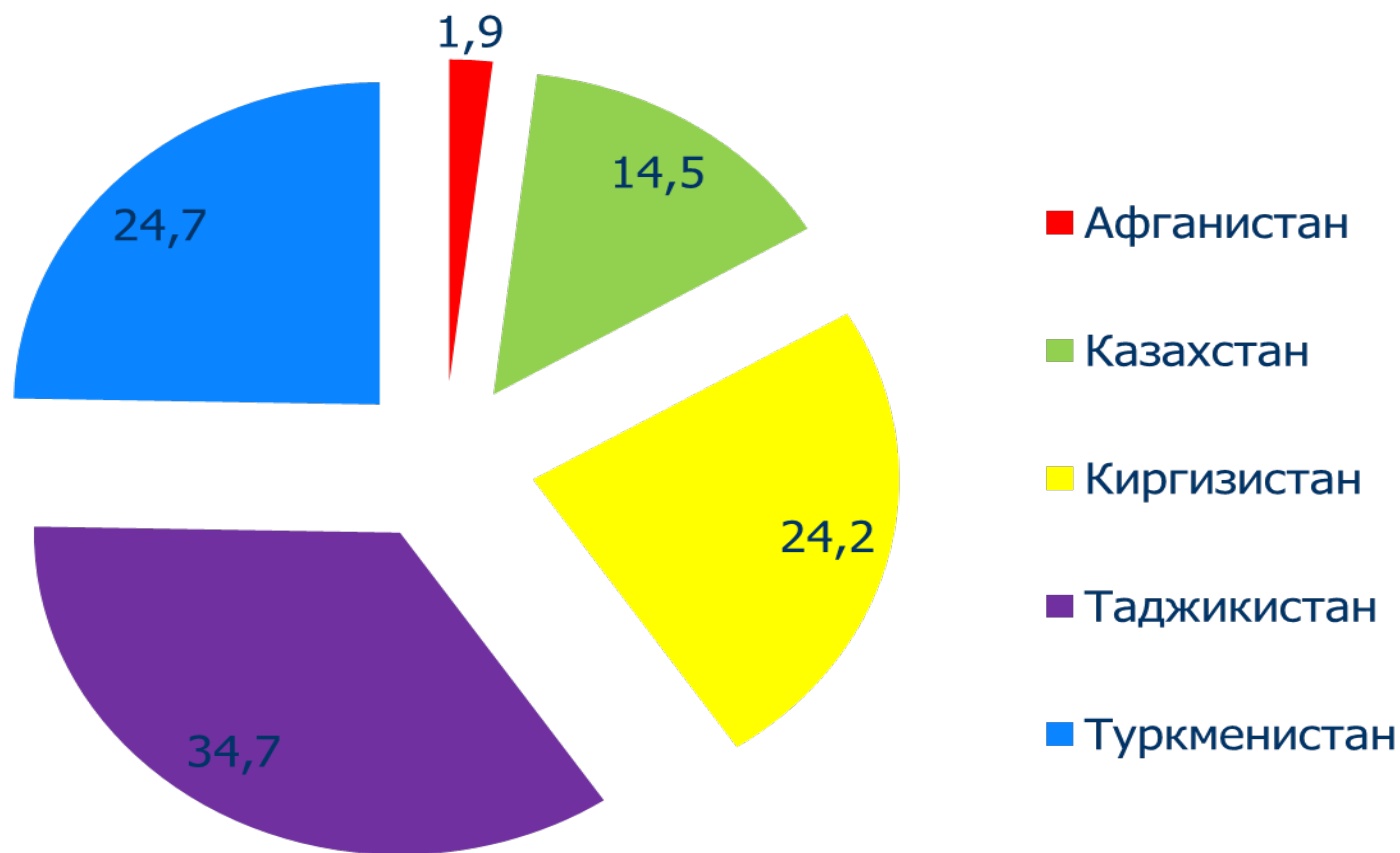


Общее длина государственной границы 6221 км.

с Республики Казахстан 2203 км. с Республики Туркменистан 1621 км. с Республики Таджикистан 1161 км. с Республики Кыргызией 1099 км. с Республики Афганистан 37 км.



Доля сельскохозяйственных животных в буферной зоне (%)



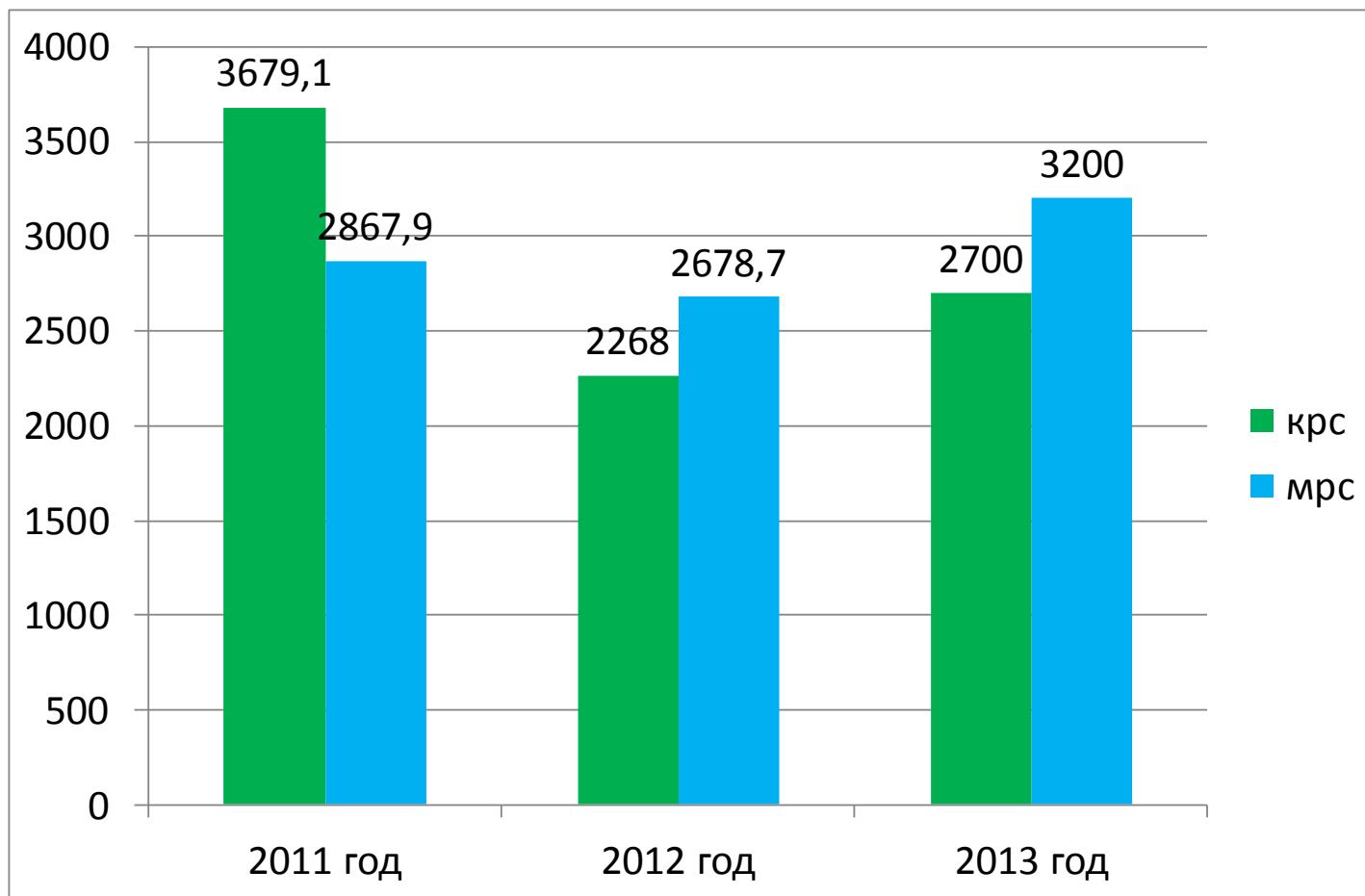


Противоэпизоотический мероприятия

- Ежегодно главным государственным управлением ветеринарии утверждается противоэпизоотический план профилактических мероприятий на ящур.
- В Республике применяется профилактическая вакцинация животных вакциной сорбированная моно и поливалентная жидкая (типы А,О, Азия-1), иммунизируют ярок как в общественном секторе, так в индивидуальном.
- Кроме того, просветительная работа по разъяснению среди населения о профилактики особо-опасных инфекционных заболеваний, в том числе и по ящуру



Профилактическая вакцинация





Пограничный контрольный ветеринарный пункты



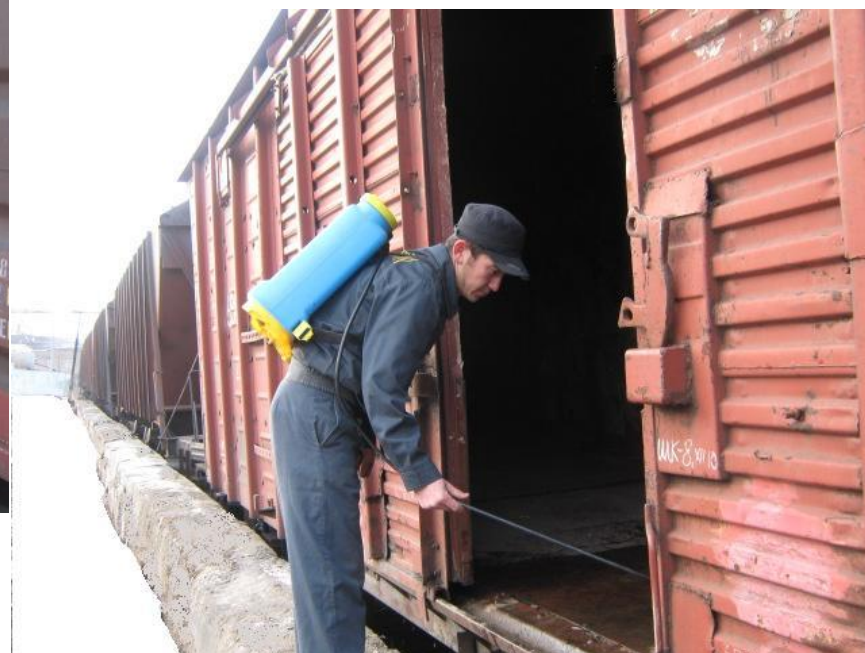


Ветсанобработка автотранспортных средств





Ветсанобработка железнодорожных вагонов





Благодарю за внимание!
Thank you!



Submission to the OIE for official recognition of FMD country status and endorsement of official control programme

L. Weber-Vintzel & J. Domenech
OIE, Paris
GF-TADs FMD Working Group Members



What are the OIE official recognition of FMD status and the endorsement of control programme?

What are their legal requirements?

What are the technical links between the OIE procedures and the PCP pathway?

What are the procedures to follow?



1. What are the OIE official recognition of FMD status and the endorsement of control programme?

OIE official recognition of disease status

- a procedure developed on Member Countries' request to facilitate trade
- Fully in line with OIE's historical mandates
- Resolutions adopted by the World Assembly



OIE's Mandate under the WTO, SPS Agreement

- Avoid arbitrary levels of protection
- Accept “equivalence”
- Recognize disease - and pest-free areas
- Transparency
- Technical assistance



Achieved through the principle of

- Science-based provisions
 - Risk assessments
 - Use of international standards
- Transparent procedures
- Endorsement by all Members



Officially recognised FMD status

Endorsed official control programme

- | | |
|----------------|---------------------|
| • Country free | without vaccination |
| • Zone free | without vaccination |
| • Country free | with vaccination |
| • Zone free | with vaccination |



+ Endorsement of the **national** official control programme

Outline of the procedure today

- Voluntary procedure
- Procedure under the responsibility of the Scientific Commission
- Adoption by all OIE Members
- Costs for evaluation covered by applicant Member Country
- Based on OIE standards: the OIE *Terrestrial Animal Health Code*



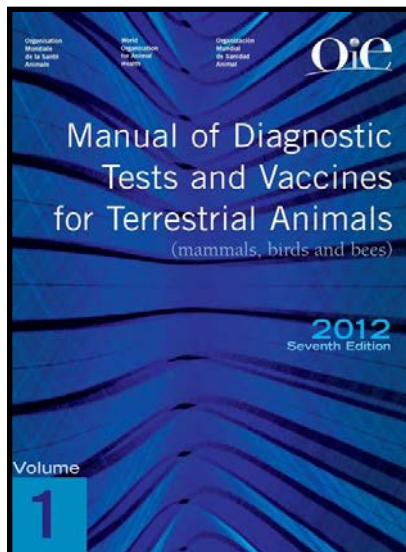
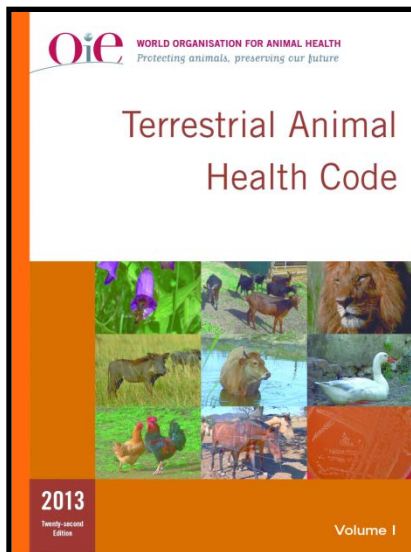
2. What are the legal requirements to be granted an official status?

OIE standard setting process

- Specialised Commissions
- *Ad hoc* Groups and Working Groups

Proposed Standards sent to all OIE Delegates

- Comments from all OIE Delegates
- Consultation of major partners
- Two rounds of discussions with Commissions



Adoption by all OIE Delegates:

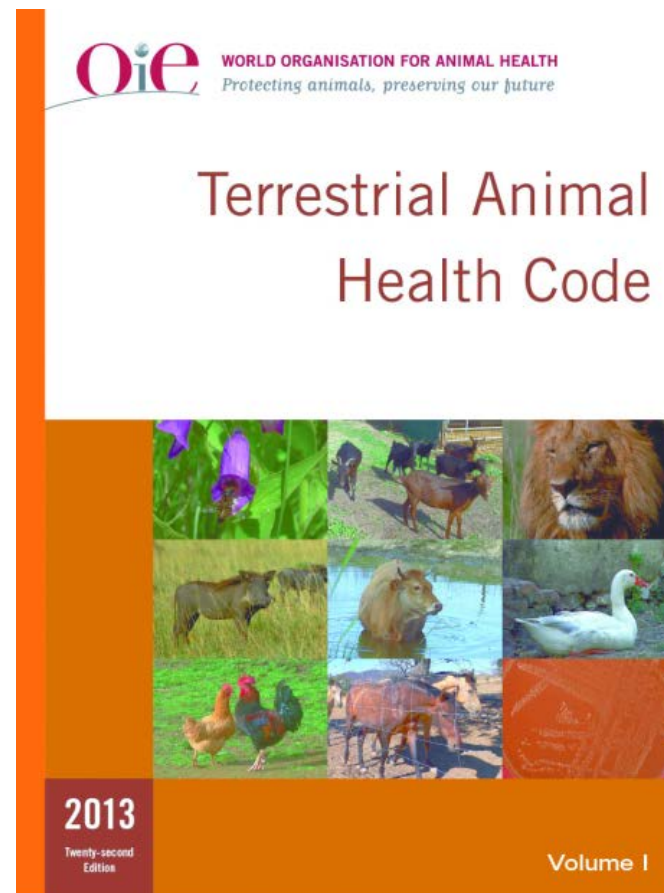
vote of all Delegates during their World Assembly at the General Session in May

Horizontal Chapters

- Diseases notification (1.1)
- Disease Surveillance (1.4)
- Evaluation of Veterinary Services (3.2)
- Veterinary legislation (3.4)
- Import risk analysis (2.1)
- Import/export procedures (5)
- Obligations related to certification (5.1)

Disease Specific Chapters (vertical)

- General provisions, case definition
- Safe commodities, if any
- Criteria for disease status: country, zone or compartment
- Provisions for import of commodities
- Pathogen inactivation
- Specific disease surveillance



OIE *Terrestrial Code* Chapter on FMD

Article 8.6.1.	General provisions, including case definition
Articles 8.6.2. to 8.6.9.	Articles related to status country/zone/containment zone/ compartment/ recovery
Articles 8.6.10. to 8.6.33.	Recommendations for importing commodities
Articles 8.6.34 to 8.6.41.	Virus inactivation
Articles 8.6.42 to 8.6.44.	Surveillance: introduction, principles, methods, strategies
Articles 8.6.45. to 8.6.47.	Specific surveillance related to status
Article 8.6.48.	Endorsement of the official control programme
Article 8.6.49.	Interpretation of diagnostic test results

OIE *Terrestrial Code* Chapter on FMD

Article 8.6.2. FMD free country where vaccination is not practised

To qualify for inclusion in the existing list of FMD free countries where vaccination is not practised, a Member should:

- 1. have a record of regular and prompt **animal disease reporting**;*
- 2. send a declaration to the OIE stating that:*
 - a) there has been **no outbreak of FMD** during the past 12 months;*
 - b) **no evidence of FMDV infection** has been found during the past 12 months;*
 - c) **no vaccination** against FMD has been carried out during the past 12 months;*
 - d) **no vaccinated animal** has been introduced since the cessation of vaccination;*

3. *supply documented evidence that:*

- a) **surveillance** for FMD and FMDV infection in accordance with Articles 8.6.42. to 8.6.47. and Article 8.6.49. is in operation;
- b) **regulatory measures for the early detection, prevention and control** of FMD have been implemented;

4. *describe in detail the boundaries and measures of a **protection zone**, if applicable.*

The Member will be included in the list only after the submitted evidence has been accepted by the OIE.

Retention on the list requires that the information in points 2, 3 and 4 above be re-submitted annually and changes in the epidemiological situation or other significant events including those relevant to points 3b) and 4 should be reported to the OIE according to the requirements in Chapter 1.1

A questionnaire specific to a disease and a status

To assist OIE Members:

- Transparent evaluation
- Completeness of information required
- In accordance with the requirements of the *Terrestrial Code*
- Adopted by the World Assembly

Article 1.6.5.

**4 questionnaires on FMD
for OIE recognition of
FMD Country Status**

**country vs zone FMD free
without vs with vaccination**

Key elements for OIE endorsed official control programmes for FMD

- Evidence of capacity of VS (PVS assessment)
- Plan applicable to entire country
- Evidence of disease reporting
- Information on epidemiology of disease in country
- Control measures to prevent PPR introduction
- Surveillance in accordance with the *Code*
- Detailed plan on future timeline and intended milestones/performance indicators
- Diagnostic access/capabilities
- Vaccination program
- Emergency plan

Article 1.6.10.

Questionnaire for the endorsement by the OIE of an official control programme for FMD



Incentives to have an endorsed control programme

- ✓ Motivation to progress towards FMD eradication
- ✓ Advocacy for Veterinary Services towards their Government
- ✓ Trade negotiation incentive
- ✓ Access to funding
- ✓ Political support
- ✓ Training for the preparation of free status recognition
- ✓ Reinforcement of the regional approach



This procedure for official recognition is

- A strong tool,
 - Which all the steps are adopted by the World Assembly of the OIE Delegates,
 - In constant evolution.
-
- FMD chapter and questionnaires are currently under revision.

Basic requirements for all applicants (1)

■ Veterinary Services, general requirements

- ✓ Compliance with Chapter 3.1. of the *Terrestrial Code* on the quality and evaluation of the Veterinary Services;
- ✓ Appropriate legislation
- ❖ long term and major effort
- ❖ zoning and control movement
- ❖ vaccination strategy
- ❖ high quality surveillance approaches including appropriate laboratory diagnosis

Basic requirements for all applicants (2)

- **Notification obligations** in accordance with Chapter 1.1. (Art. 1.1.2.) of the *Terrestrial Code*.
 - ✓ 6-monthly and annual animal health reports via WAHIS
 - ✓ Reporting of exceptional events (immediate notification)



- **Payment of annual OIE Member contributions**



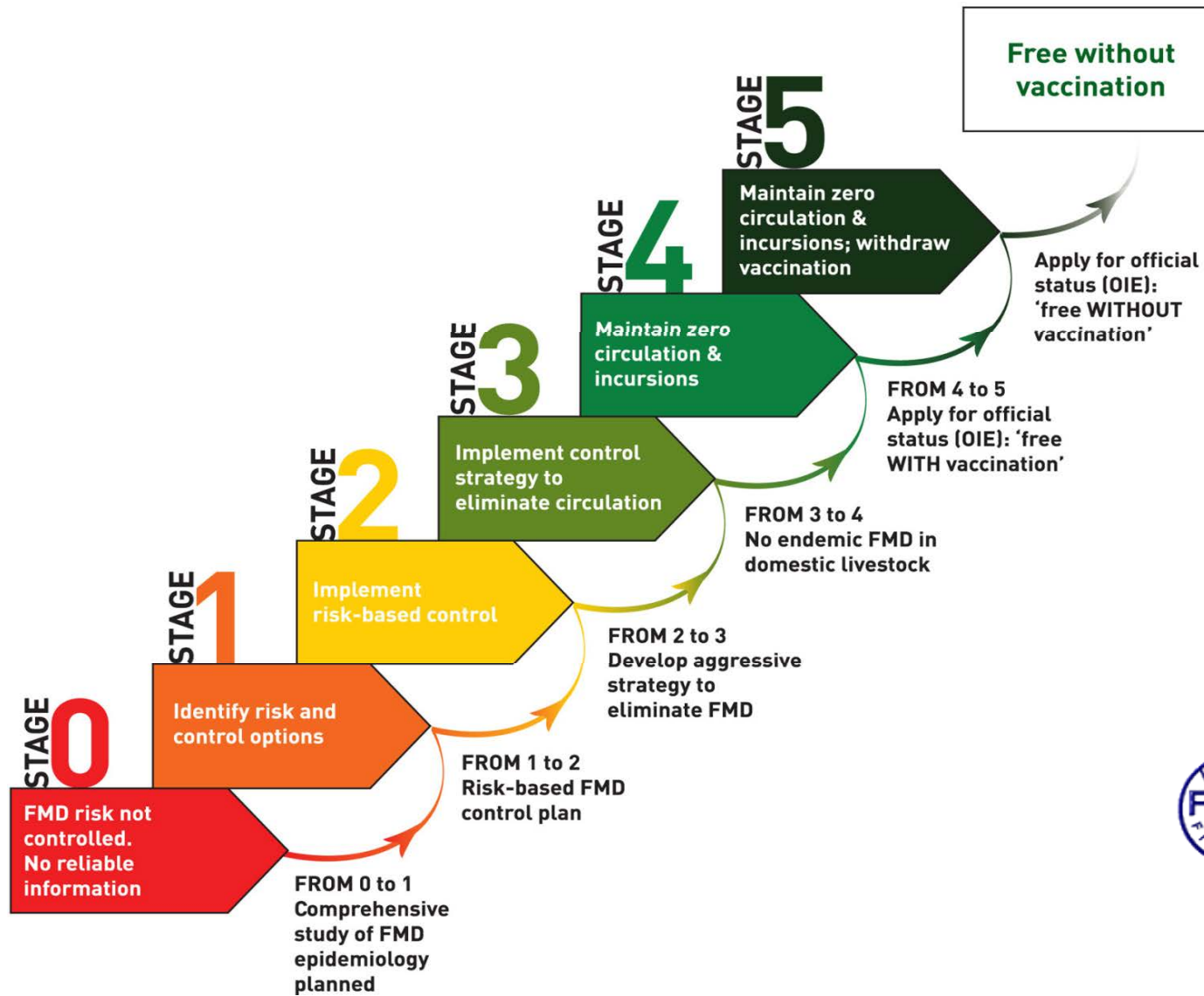
3. What are the technical links between the OIE procedures and the PCP pathway?



Links between the OIE official recognition and PCP

- OIE status: for countries that are already at a very advanced stage in eradicating FMD. Not directed at infected countries, which come under PCP stage 4.
- PCP: tool to address the non-FMD-free country situations and for helping them to progress to successive stages in FMD control and ultimate eradication.
- New Articles 8.5.48 and 1.6.10 on OIE endorsed FMD official control programmes: provide standards specifically addressing the stages prior to country FMD freedom.

The FMF Progressive Control Pathway (PCP)





Links between the OIE PVS tool and PCP

Importance of the performance of the Veterinary Services:

- to apply for the endorsement of a control programme or for the recognition of FMD-free status,
- To progress along the PCP Pathway.

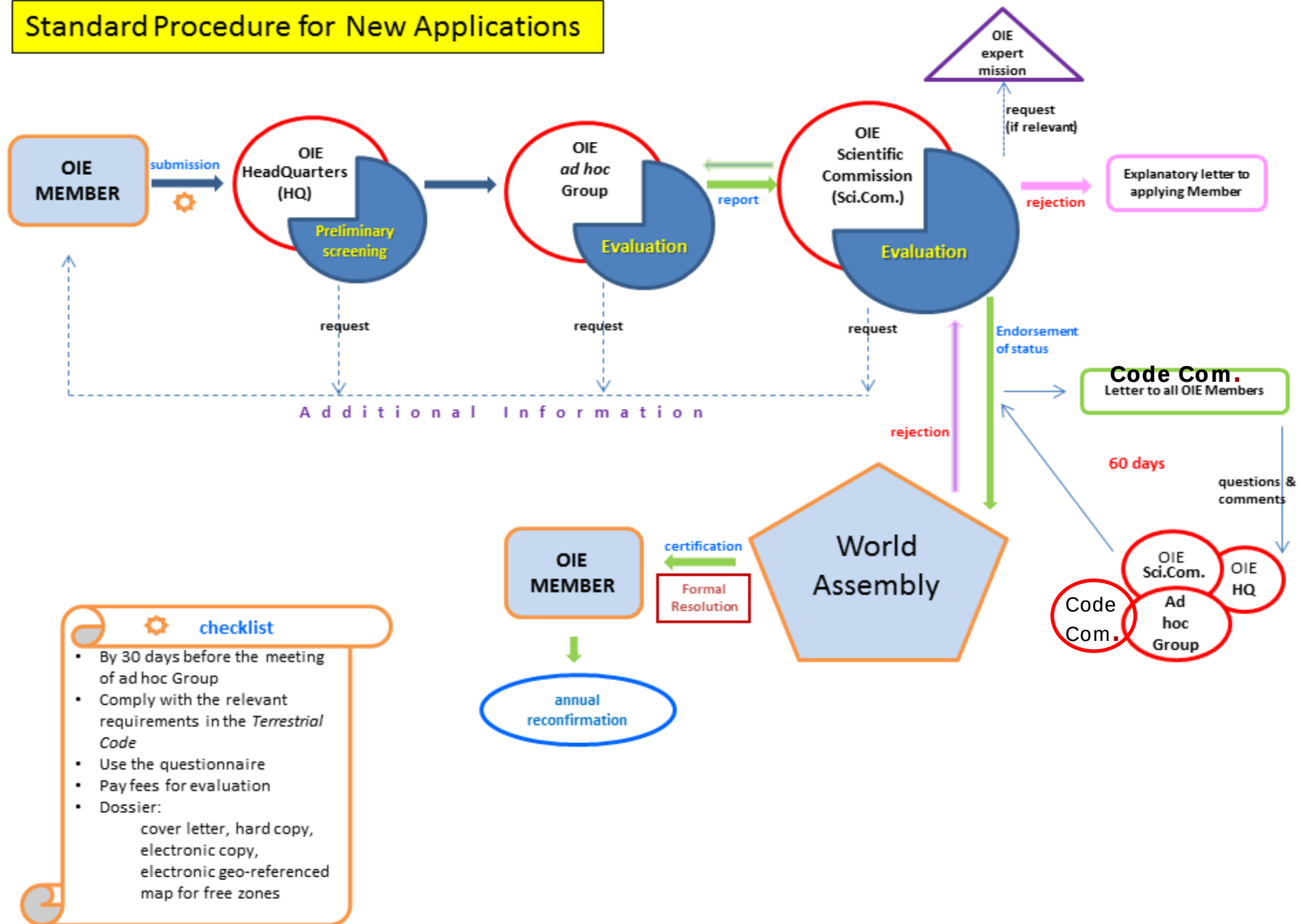
Developement of assessment tools for situation monitoring:

PCP and PVS pathway, which consider not only specific FMD control methods but also the contexts in which Veterinary Services operate



4. What are the OIE Procedures for your country to follow?

Standard Procedure for New Applications



Letter from the Director General to all Delegates after each General Session



Voluntary applications from OIE Member Countries (and payment of fees)



OIE Headquarters

Pre-screening, acknowledgement of receipt, request of clarification/additional information when relevant, translations



OIE ad hoc Groups

Possible questions to applicants, possible delegation, recommendations to Scientific Commission.



OIE Scientific Commission for Animal Diseases

Evaluation, possible questions to applicants or to ad hoc Groups, possible delegation, recommendations to the OIE World Assembly of Delegates



OIE Director General

Letters to all applicants. And to all Delegates to list the Member Countries that will be proposed for official recognition- 60 days before the General Session.



OIE World Assembly of Delegates

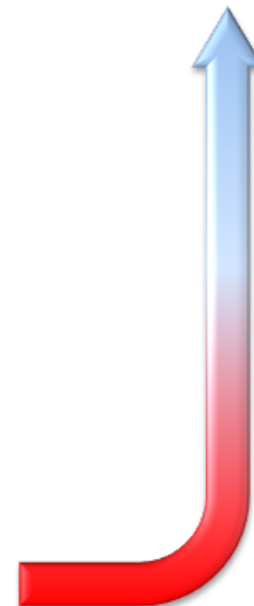
Adoption by resolution



Member Country officially recognised



Pending to a mission



**In case of negative outcome:
Letter to the applicant Member
Country, kept CONFIDENTIAL.**

Exchanges between the OIE and the applicant Member Country

- **Receive clear questions** reflecting the possible concerns of the experts, prior and during the ad hoc Group meeting, and during the SCAD meeting
The OIE will ensure that the applicant Member Country would be given sufficient time to respond to the questions to facilitate finalisation of the evaluation of the dossier.
- **Request a physical meeting** between the AHG and representatives of an applicant Member Country which can **exceptionally** be scheduled in agreement with the Director General and in accordance with the Standard Operating Procedures for official recognition of disease status

Report of the *ad hoc* Group's evaluation

Confidential until SCAD endorsement

Once endorsed by SCAD,

- **if the outcome of SCAD evaluation is positive, the section of the report will be made public (annexed to SCAD report)**
- **If the outcome is negative, the analysis (and application) will be kept confidential, but shared with the applicant Member Country**
The report keeps the structure of the *Terrestrial Code* to clearly indicate which requirement(s) the applicant does not comply with and the gaps to be filled.

Some recommendations after the assessment of around 60 dossiers



To prepare the application:

- Enough resources (dedicated team, time and funds)
- Involvement of all services and stakeholders: wildlife, private sector...
- All standards to be considered, not only FMD Chapter (notification, surveillance, veterinary services, identification and traceability of animals)
- Insure that all documents are translated in an OIE official language (EN, FR, ES)
- Indicate a technical contact person to be contacted if necessary during the process of the evaluation by the AHGs or the Scientific Commission)

To draft the dossier:

- Be concise and clear (no ambiguous interpretations)
- Clear description of established procedures (surveillance, decision command chain for decisions on animal health, inter ministerial collaboration, private-public partnerships...)

**Efforts related to status recognition
and control plans endorsement do not stop
when the evaluation is finished**

**MAINTENANCE of these
recognitions / endorsements
need substantial and continuous efforts**



**Thank you for your
attention**

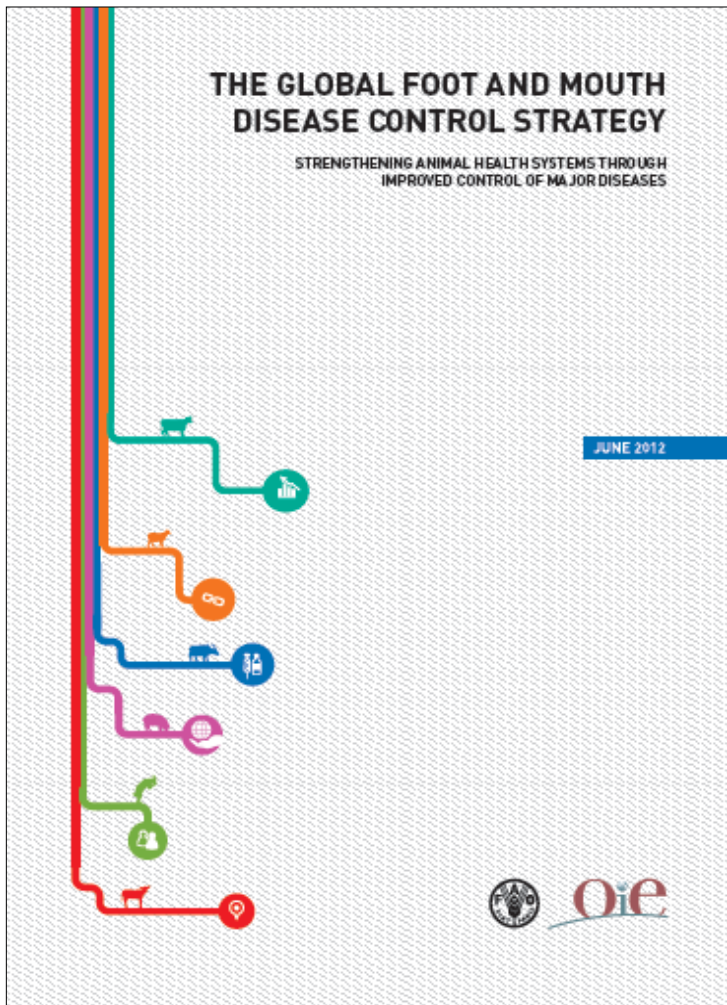


Preparing financing project proposals national control plans and officials submissions to the OIE

**J. Domenech, G. Ferrari
M. McLaws, K. Sumption, L. Weber-Vintzel**

**FAO-OIE GF TADs Working Group
and EUFMD**

The national FMD control strategies need to keep coherence with the Global FMD Control Strategy and its 3 components



- Component 1: Global FMD Control
Specific FMD control activities

- Component 2 : Strengthening Veterinary Services (VS)

Progressive FMD control in developing countries will go hand in hand with improvement of VS

- Component 3: Prevention and control of other major diseases of livestock

Improvement of VS will create better possibilities to control other major diseases of livestock



GF-TADs
GLOBAL FRAMEWORK FOR THE
PROGRESSIVE CONTROL OF
TRANSBOUNDARY ANIMAL DISEASES



Preparing a financial project proposal

The Logical Framework Approach

- **A tool for planning a logical set of interventions**
- **A toll for appraising a Programme document**
- **A concise summary of the Programme**
- **A tool for monitoring progress made with regard to delivery of outputs and activities**
- **A tool for evaluating impact of Programme outputs 'e.g. progress in achieving purpose and goal**

**Key features: Stakeholder consultation
Indicators for Monitoring and Evaluation
Operational plan including management structure
and governance, timetable and budget**

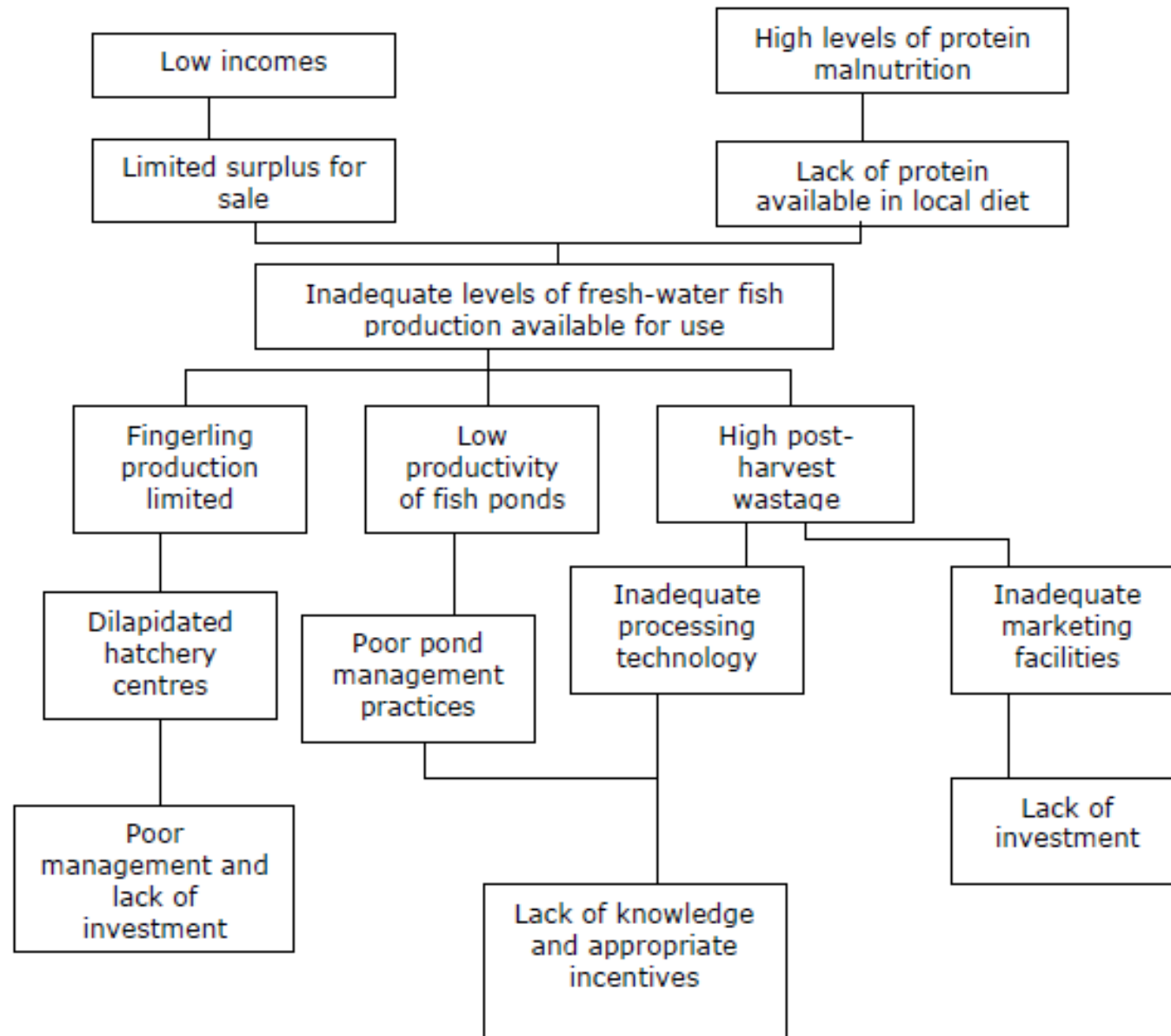


Analysis of the situation through Participatory workshops

Stakeholder analysis to identify problems and solutions/objectives, establish their “root causes” and effects.

Summarize them in a Problem tree and an Objective tree

Problem tree



Effect

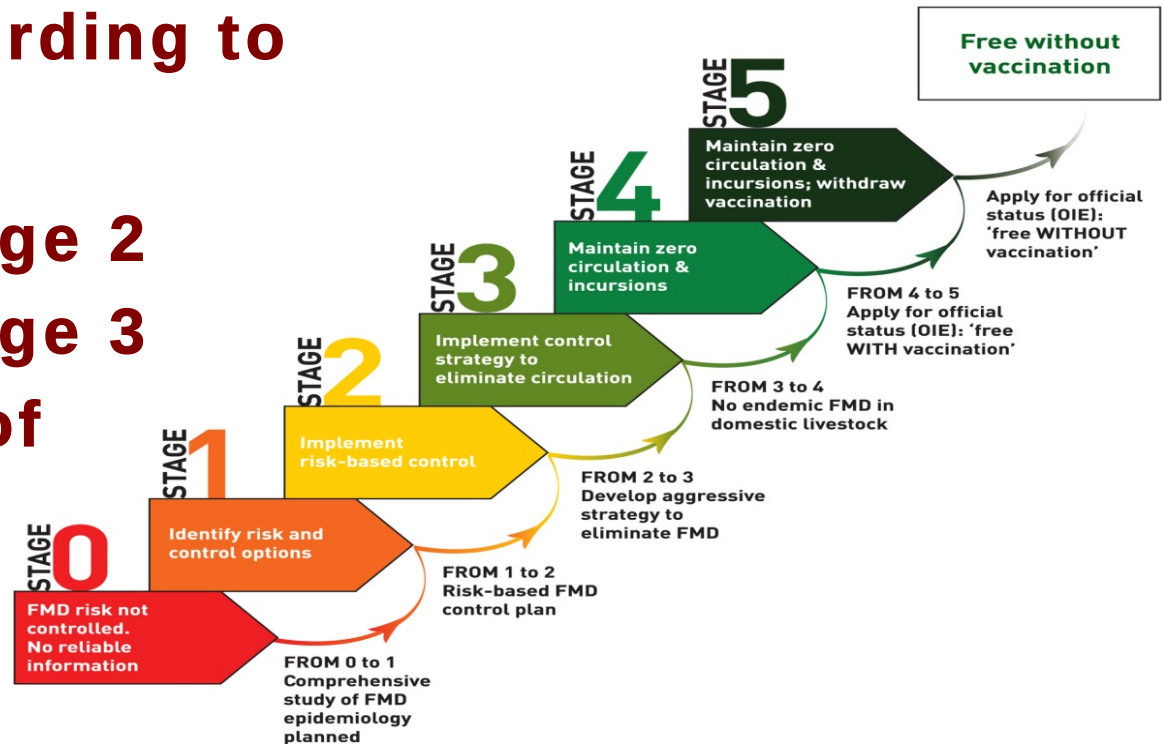
Cause

LOGICAL FRAMEWORK MATRIX

Narrative Summary	Objectively Verifiable Indicators (OVI)	Means of Verification (MOV)	Important Assumptions
<u>GOAL</u> Overall objectives			
<u>PURPOSE</u> Outcomes			
<u>OUTPUTS</u> Expexted Results			
<u>ACTIVITIES</u>	Inputs		

**The National Control Plans (CP)
are designed according to
the PCP stages:**

- CP1 to enter Stage 2
- CP2 to enter Stage 3
- CP3 by the end of Stage 3,
To be
submitted to
OIE for official
endorsement





**The National FMD Control Programme
represents the core part of any project
proposal to Governments and donors**

G. Ferrari, M. McLaws and K. Sumption

Presentation of the

National Control Plan N°1

**A Risk-Based Strategic Plan for the
Control of Foot-and-Mouth Disease**



The possibilities offered by OIE to submit dossiers for official status recognition and endorsement of national control plans are powerful incentives to increase investment in FMD control and eradication

L. Weber-Vintzel, J Domenech

Presentation of submission to the OIE for official recognition of FMD country status and endorsement of official control programme



Post-Vaccination Monitoring

Samia Metwally, DVM, PhD

Senior Animal Health Officer (Virologist)

Animal Production and Health Division
FAO of UN, Rome, Italy
samia.metwally@fao.org





Overview



- Why post-vaccination monitoring (PVM)?
- Objectives of PVM
- PVM Guidelines
- Progress and next steps



Needs:

- Develop PVM guidelines to integrate into:
 - vaccination programs (PCP-FMD)
 - OIE endorsed official control program for FMD
- **Uncertainty:**
 - Country acceptance to implement
 - Transparency!!

• Challenges:

- Vaccine quality, availability and storage at optimum temp
- Animal identification

• Gaps:

- Vaccine quality control centers
- Validated PVM screening tools
- Producers awareness and incentive



Vaccine Efficacy vs. Effectiveness

- Vaccine efficacy: percent reduction in disease incidence in a *vaccinated* group compared to an unvaccinated group under optimal conditions
- Vaccine effectiveness: ability of vaccine to fulfill outcomes of interest in the “real world” = field efficacy



Factors Impacting Vaccination Program Effectiveness

Host factors

- age
- health condition
- prior exposure
- time since vaccination

Vaccine characteristics

- potency
- stability
- shelf life
- purity
- vaccine composition
- adjuvant

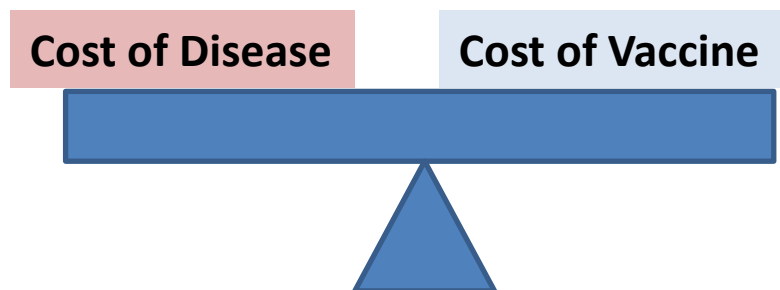
Application

- vaccination strategy
- vaccination campaign
- trained vaccinators
- cold chain

Match to circulating virus



Informing cost effectiveness



- Where the balance rests depends upon understanding the proportion of the disease burden that is vaccine preventable
= VACCINE EFFECTIVENESS
- At any vaccine cost, the greater the burden of disease and the greater the proportion that is vaccine preventable, the more cost effective a program will be



Incentives for post-vaccination monitoring

- **PVM is critical to:**
 - Optimize vaccination programs
 - Optimize use of limited resources
 - Demonstrate impact of vaccination program on disease burden (justify cost)
 - Stimulate production of quality vaccine and/or development of improved vaccines



Objectives of vaccination programs

Categories of Epidemiological setting

- A. Vaccinating to reduce clinical FMD incidence (PCP-FMD stage 2)
- B. Vaccination to eliminate FMD virus circulation (PCP-FMD stage 3)
- C. Vaccination to maintain FMD freedom (PCP-FMD stages 4 & 5)
- D. Vaccination to regain FMD freedom



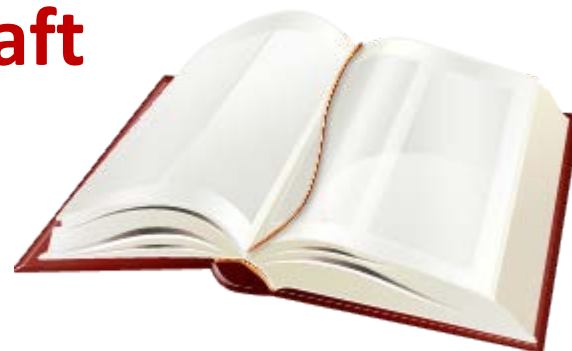
Post vaccination monitoring guidelines

Aims

- Practical guidance on how to evaluate the effectiveness of FMD vaccination program
- Tailored to needs of countries at different stages of FMD control (PCP-FMD stages → freedom ↔ reintroduction)



Structure of the guidelines currently in draft



» Preamble

- Chapter 1. Vaccine attributes
- Chapter 2. Vaccine delivery, schedule and coverage
- Chapter 3. Evaluation of the immune response
- Chapter 4. Monitoring the impact of vaccination and other control measures

» Annexes

» References



Chapter 1. Vaccine attributes

- Vaccine types
- Vaccine matching and selection of vaccine strains
 - Vaccine quality
 - Requirements during manufacturing process
 - Requirements for registration process
- Consideration when purchasing vaccine
 - Vaccine purchase through a tender procedure
 - Information provided by the tenderer
 - Information provided by manufacturers





Chapter 2. Vaccine delivery, Schedule and Coverage

- Vaccine delivery
 - Packaging
 - Cold chain and logistics managements
- Vaccine schedule
 - Booster dose
 - Every six month – till 2 years of age
 - Annual vaccination older than 2 years of age
- Vaccination coverage
 - No. animal vaccinated/No. eligible for vaccination
- Immunization coverage
 - % vaccination coverage X % developed desirable antibody titers





Chapter 3. Evaluation of the immune response

- to reduce clinical FMD incidence
 - Ab level at individual level
 - Ab epi-unit level

- to eliminate FMD virus circulation
 - Ab level at individual level
 - Ab level at herd level

- to maintain FMD freedom
 - Ab level at individual level
 - Ab level at herd level

- to regain FMD freedom
 - Ab level at individual level
 - Ab level at herd level

- For all: **points** of sample collection, suggested values for expected proportion of animals with desirable level of antibodies at a given age group



Field trial for evaluation of vaccine induced immune response

- Objective to evaluate immune response to vaccine batch under local condition and using locally available lab tests, when vaccine quality is uncertain
- Study design:
 - 50 vaccinates and 5 control
 - Monitored for 6 month under good farm biosecurity
 - Determine SP and NSP at 5, 21, 30, 60, 120 and 180 days



Chapter 4. Monitoring the impact of vaccination and other control measures

- Monitoring vaccination program with expected outcomes:
 1. The incidence of disease or FMDV infection is reduced.
 2. The incidence of disease or FMDV infection is below a defined target value.
 3. The incidence of disease or FMDV infection is shown to be absent.
- Monitoring FMD clinical outbreaks
- Monitoring FMD infection



Some challenges to overcome

- Correlation between protection and antibody titers not disclosed for some virus strains
 - Potential solution to request these information from manufacturers and reference sera upon purchasing the vaccines
 - Pilot study protocol included in the document
- Tests for PVM using homologous vaccine strains – currently addressed with Reference Labs



Next Step

- Review draft by expert team then the working group
- Publication (end of 2014)
 - FAO manual
 - OIE publication
 - Peer-reviewed journal
- Revision, if need be, after validation in countries - FAO and EuFMD projects.. any other projects
- Provide training
 - FMD roadmap meetings
 - PCP trainings
 - Others



PVM Expert Team Meeting Consultation

- Samia Metwally, FAO
- Susanne Munstermann, OIE
- Kees van Maanen
- Giancarlo Ferrari
- Kris de Clercq
- Tim Doel
- Alistair King
- Keith Sumption
- Sergio Duffy
- Phaedra Eblé
- Mary Joy Gordoncillo
- Mokganedi Mokopasesto
- David Paton
- Theo Knight-Jones
- Aldo Dekker





Thank you for your attention

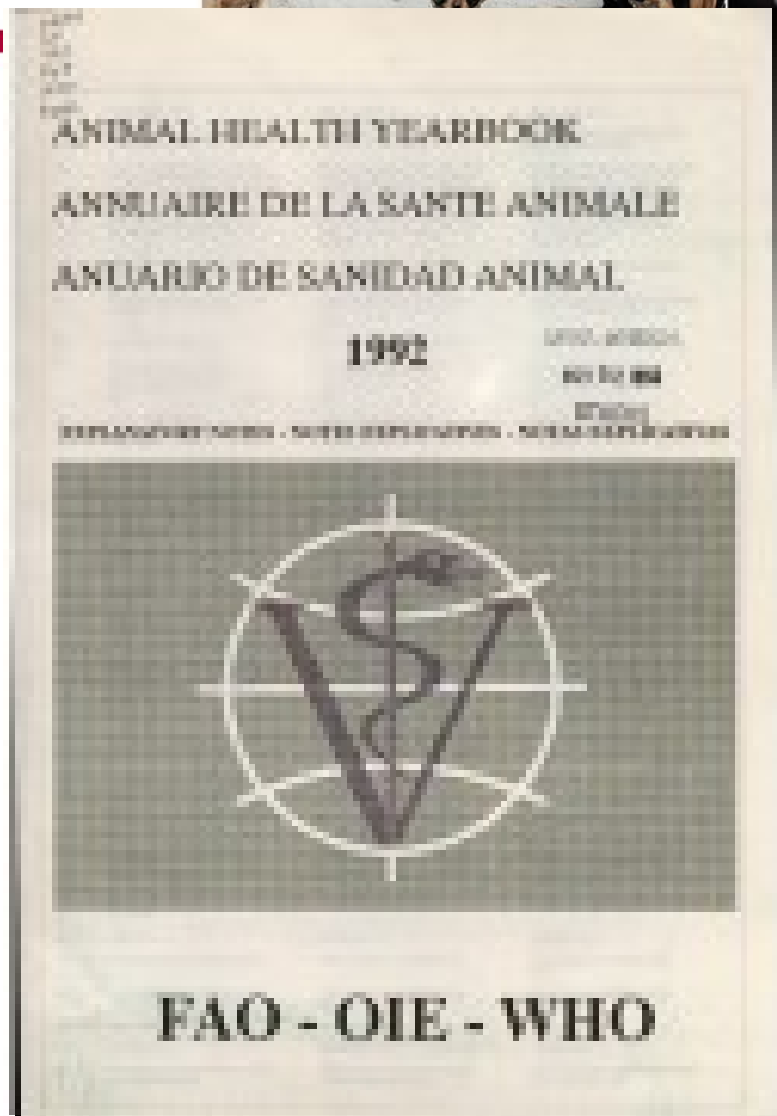


SOCIO-ECONOMIC ANALYSIS AND PCP GUIDELINES

Julio Pinto

Animal Health Officer

FAO



- Since 1959 but discontinued
- Chapter on The Economic Losses Caused by Animal Diseases (support from World Bank)

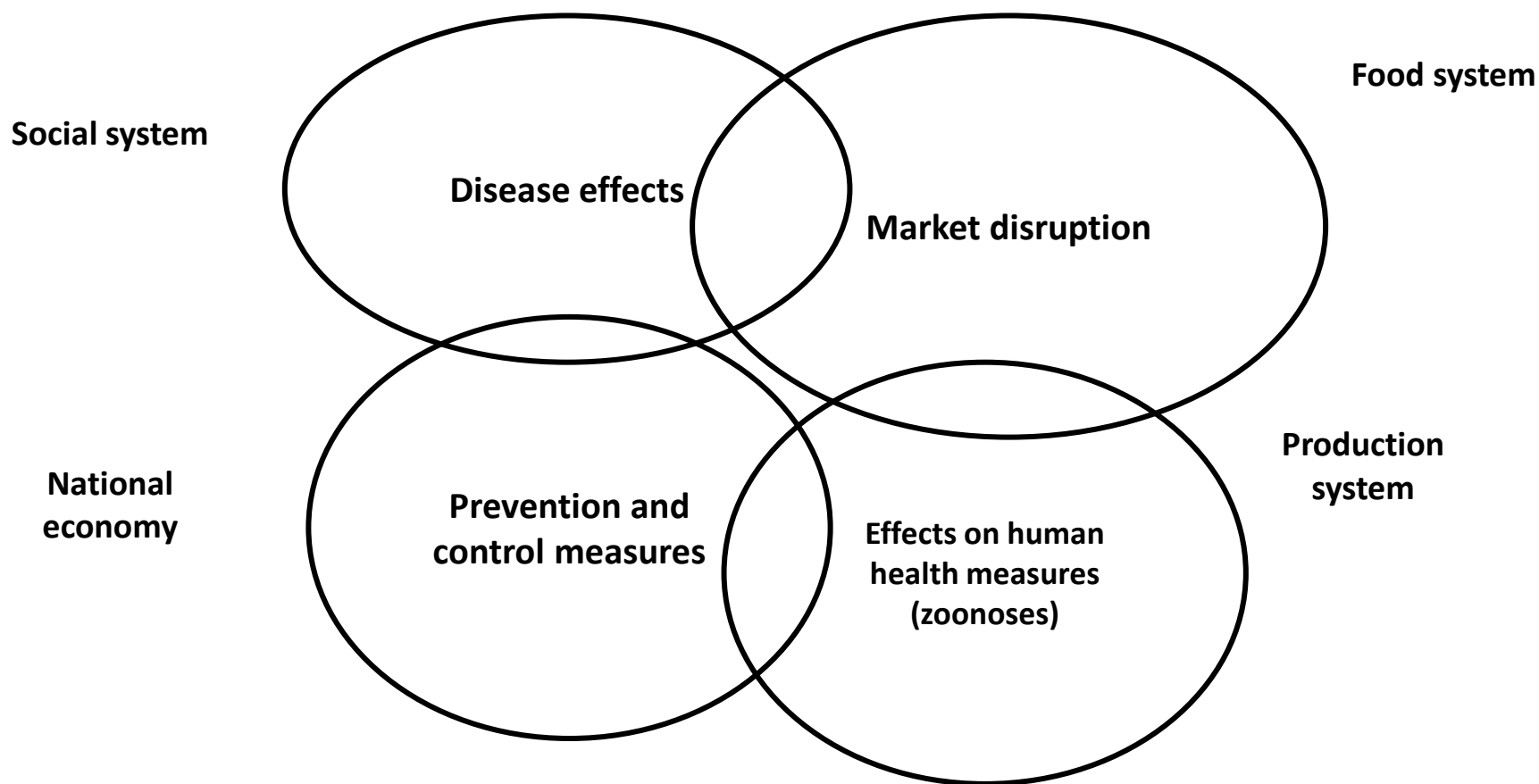


Developing countries and burden of animal diseases

- Most of the TADs including FMD are endemic in many developing countries
- Veterinary services in developing countries lack of resources to conduct adequate prevention, detection and effective response to animal diseases threats or quality control over pharmaceuticals and biologicals.



Impact components and context





Benefits of FMD Control/Eradication

- Avoided disease losses
 - Morbidity (production losses & treatment costs)
 - Mortality (herd dynamics / structure)
- Avoided costs of disease risk management
 - Vaccination (preventive & reactive)
 - Outbreak management (movement control & slaughter, quarantine etc.)
 - Quarantines & import restrictions
- Increased consequential economic activity
 - Sector 'multipliers'
 - International market access



FMD Control v/s eradication

- FMD Global strategy (FAO/OIE/WB)
- Costs for a first phase of five years: \$820 million for 79 FMD endemic countries to move from stage 0 to 2 of the PCP pathway
- Vaccination costs \$694 million (without India and China)
- Additional aspects of the FMD Strategy (Bangkok 2012):
 - Strengthening of veterinary services
 - Addressing other priority/endemic diseases



Economic analysis of animal diseases

- *To assess if a disease have an economic impact.* This can contribute to the justification for giving a particular disease or issue a strong policy focus or for making a large expenditure of public budget or private investments to deal with it.
- *To assess whether a proposed policy or programme to control a disease or mitigate its impact is likely to provide a positive return to public spending, or to compare alternative approaches.*
- *To discover whether a policy or disease mitigation or control programme has been a good public investment.*



Economic analysis of animal diseases

- To prioritize activities included in animal health research programmes.
- To assess the likely (or actual) uptake of technologies and practices to control diseases and the economic or financial impact on those who may adopt (or have adopted) them
- It is used by designers of extension programmes and by extension workers:
- To help in determining which disease management practices and technologies will be most suitable for livestock owners in a particular geographic location or food system.
- As a component of extension advice and training, to help farmers review and understand a new technology or approach to dealing with disease.



IMPACT OF FMD

-FMD causes blisters and erosions on the mouth, teats and feet of ruminants and pigs, reducing appetite, preventing suckling and milking and making animals lame. It can sometimes cause abortion and the death of young animals.

-Farmers most affected by FMD include high yielding dairy farmers, who operate on tight financial margins per lt and per cow. Temporary reduction in milk yield has serious impacts on cash flow. Animals are culled if they become chronically infected or if they abort and lose the following lactation [Rushton et al., 2012].



IMPACT OF FMD

- Pig farmers in South East Asia and China, where pig meat is important in the diet and demand is growing, FMD causes case fatality of 15 to 35 percent, mainly in piglets, and weight loss of up to 5kg per animal [Randolph, Perry, Benigno and Santos, 2002]
- In a pastoralist/transhumance herd during a drought when animals are already stressed from lack of feed and water.
- A partial budget analysis of the financial impact of FMD was carried out in four villages in southern Cambodia after an outbreak of FMD in 2010. This is an area where cattle have multiple uses including draft power. The analysis suggested an annual benefit of vaccination of USD31.80 per animal, but vaccination rates at the time of the study were low. [Young *et al.*, 2012].



Transboundary and Emerging Diseases

Transboundary and Emerging Diseases

ORIGINAL ARTICLE

The average milk yield, estimated to be around 10 l per animal before the onset of FMD, decreased significantly in the 2 months following the onset of acute clinical disease. The loss of milk production in the 60 days following the onset of clinical signs was estimated to be around 220 and 201 l for cattle and buffaloes, respectively. Under the assumption that the administration of a good-quality vaccine matching circulating FMD strains could protect against clinical disease, the benefit/cost ratio for having all animals vaccinated in all 50 farms was estimated to be 5.7.

Keywords:

foot-and-mouth disease; milk production;
economic loss

Correspondence:

L. Tasciotti. Erasmus University of Rotterdam,

Summary

A longitudinal study has been conducted in the provinces of Sindh, Punjab and Islamabad Capital Territory area, Pakistan, to evaluate the impact of foot-and-mouth disease on milk yield in a sample of farmers owning cattle and buffaloes. The sample consisted of 50 farms where the presence of foot-and-mouth disease



Economic techniques / methods

- Methods to assess economic viability all in some way compare “benefits” (positive economic impacts) with “costs” (negative economic impacts). An economically viable initiative is one where the benefits are greater than the costs.
- Partial Budget analysis
- Cost/benefit Analysis
- Cost Effectiveness Analysis
- Risk Analysis (consequences)



Partial analysis of the costs and benefits of different disease control policies.

Project / policy	Costs	Benefits
Do nothing	Unchecked morbidity and mortality.	No downside risk of making matters worse.
Treatment of diagnosed cases	Surveillance, treatment and diagnosis costs.	Reduction in morbidity and mortality.
Control of the disease	Annually recurring cost of a systematic programme depending on the nature of control.	Reduction in morbidity and mortality, plus the costs of the previous programme, if any, that are saved.
Eradication of the disease	Once-and-for-all cost of the programme, which includes survey, diagnosis and followup.	As above, with morbidity and mortality eliminated and costs of a previous programme saved in perpetuity.



Animal Health Economics in the FAO/OIE FMD PPC

Cost of Prevention to keep freedom
(preparedness and contingency planning)

5

Officially free without vaccination
No circulation / containment zones only

4

Officially free with vaccination
No circulation / containment zones only

3

Approaching freedom
Outbreaks < once / year

Cost/Effectiveness
(market access,
trade issues)

2

Critical points addressed
↓ incidence

NCP: Cost/benefit Analysis
(specific sectors or value chains)

1

Critical risk points identified,
strategy being developed

Impact assessment (livestock production,
food security and livelihoods)

0

Risk not controlled
Continuous FMDV circulation



PCP Guidelines for FMD and Socio-Economic Analysis

- Support the implementation of the FMD Global Strategy
- FAO/OIE Experts: to support specific assessment in countries and support project formulation of NCP and socioeconomic analysis
- Design and provide guidelines/tools and training to veterinary services
- Socio-economic assessment/methods in different stages of PCP
- Provide evidence and mechanisms/incentives for funding and supporting FMD activities



I.R.Iran

Dr. Naser Rasouli Beirami

*Head of animal diseases epidemiological studies
department*

Iran veterinary organization, IVO



Epidemiology?

Study of a disease in a population.



- Epidemiology:
- Descriptive Epidemiology
 - Which animal/animals got the disease, Who?
 - In where the animal/animals got the disease, Where?
 - When the animal/animals got disease, when?
- Analytical Epidemiology (Why /how they got the disease)
 - Observational
 - Cohort
 - Case – Control
 - Cross – sectional
 - Experimental, clinical trial, golden study



- About Epinet:
- We use it for descriptive epidemiology
 - We use it to know which animals got sick (how many animals got sick)
 - Where was the disease
 - When the disease occurred?
- And from these information you can calculate the incidence of the disease to evaluate the effectiveness or efficacy of controlling plans.



گزارش مشاهده وقوع بیماری

1389/12/14

تاریخ فرم

3024

شماره فرم

مشخصات نمونه

علائم بیماری

بیماری هاری

مشاهدات کشتارگاهی

مشخصات واحد آلوده

مشخصات عمومی

1389/12/14

تاریخ وقوع بیماری/ واکسیناسیون/ مراقبت

مشخصات واحد دامی

وکیل کندي

نام واحد دامی

32080372

کد واحد دامی

village

نوع واحد

yakil kandi

نام انگلیسی

مشخصات بیماری

نام بیماری

تب برفکی

کد بیماری

010

واکسیناسیون

1389/11/15

تاریخ واکسیناسیون

دارد

ندارد

سابقه واکسیناسیون کل واحد

گزارش دهنده

نام منبع اطلاعاتی

دولتی

کد منبع اطلاعاتی

111

5th West Eurasia Roadmap Meeting • Astana, Kazakhstan • 23-24 April 2014



گزارش مشاهده وقوع بیماری

تاریخ فرم

شماره فرم

مشخصات عمومی
مشخصات واحد آلوده
مشاهدات کشتارگاهی
سماری هاری
علائم سماری
مشخصات نمونه

آمار دام های بیمار

ثبت رپرت

نوع دام

گروه سنی	تعداد کل	تعداد مبتلا	تلف شده	معاینه/مراقبت/واکسینه	کشتار شده	معدوم شده
همه گروههای سنی	325	16	3	37	0	0

در صورتیکه دام بیمار اخیرا وارد شده باشد

منشأ ورود دام

تاریخ ورود دام



FMD Hotspots





Epinet data in Exel file

Province	Farsi_desc	Eng_desc	Code	Type	Nourth	East	Elev	Cattle_popul	Sheep_popul	Horse_popul
14	بجتم دامداري حاجي آباد	mojtame damdari haji abad	14190060	animal complex	28.349628	54.480234	1032.6	10	1500	0
26	مجمع دام شهر	damshahr	26030105	animal complex	34.72512	50.71426	965.3	19000	50000	0
14	سيد فرامرز کشاورز	Keshavarz Seyyed Faramarz	14070762	animal complex	29.66975	52.8979	1607.2	beef farm	70	0
14	همام الدين	Homameddin	14180137	animal complex	29.869241	53.342148	1619.9	28	1950	0
14	علي حاجيوني	Hajivandi Ali	14071085	animal complex	29.482667	52.639633	1479.2	24	250	0
14	ابراهيم كاظمي	Kazemi Ebrahim	14070781	animal complex	29.826519	52.795637	1604	0	300	0
14	شرکت بناب	Sherkat bonab	14180029	animal complex	29.942631	53.266485	1724.3	12	400	0
14	استهبان	estahban	14020052	animal complex	29.133087	54.017042	1680.1	0	0	0
14	جان عادل زاده رضوي	sahraeian adelzadeh razavizadegan	14040122	animal complex	28.497151	53.518664	1074.1	85	0	0
14	پير مرادي	pirmoradi	14030089	animal complex	30.797524	52.529881	2347.6	0	920	0
36	کمريندي برازجان	kamarbandi borazjan	36030031	beef and sheep farm	29.26119	51.17848	37.8	300	1700	0
36	سيد عباس موسوي	seyed akbar mousavi	36070064	beef and sheep farm	29.56309	50.65886	34.4	30	40	0
36	گرمسيري	garmsiri	36030082	beef and sheep farm	29.32315	51.24716	119.2	100	60	0
36	قاسم ابزار	ghasem abzar	36030003	beef and sheep farm	29.23535	51.25183	121.3	25	200	0
35	اسماعيل برچلوئي	Ismail Borchalooi	35020264	beef and sheep farm	34.54781	48.99458	1677	8	140	0
16	منصور عزيزآبادي	mansour azizabadi	16160100	beef and sheep farm	28.940534	58.823435	670.88	30	150	0
26	عباس زند و شرکاء	abbaszand shoraka	26040058	beef and sheep farm	34.418815	50.63678	1267.13	100	800	0
26	مهدي آباد حومه	mehdiabad homeh	26030128	beef and sheep farm	34.676878	50.844584	879	1500	3000	0
26	کيلومتر 25 جاده کاشان	kilometre 25 jadeh kashan	26030165	beef and sheep farm	34.485833	51.060453	928	100	400	0
26	محمد عبيدي	mohammad e abdi	26010005	beef and sheep farm	34.77014	50.4806	1039.4	130	city	0
26	عباسعلي حسن زاده	abasali hassanzadeh	26030166	beef and sheep farm	34.487328	51.046908	936	350	600	0
26	کيلومتر 20 شاه پسندي	kilometre 20 shahpasand	26030164	beef and sheep farm	34.49306	51.039933	936	20	3000	0
26	عين الله زند وکيل	einallah zandvakil	26030188	beef and sheep farm	34.844136	50.768859	901	60	1200	0

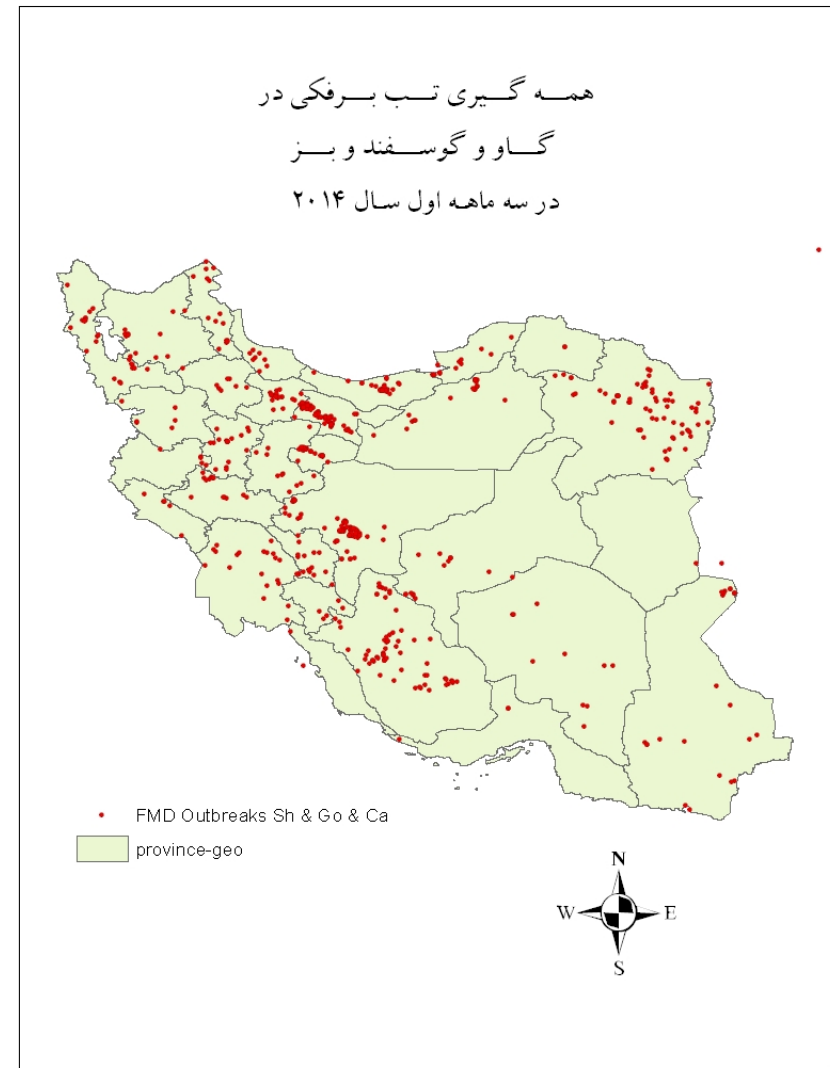


Year	Cattle	Sheep & Goat	Total
2007 -2008 (1386)	591	423	1014
2008 - 2009 (1387)	517	147	664
2009 - 2010 (1388)	1811	883	2694
2010 - 2011 (1389)	2723	2679	5402
2011 - 2012 (1390)	1306	336	1642
2012	985	313	1298
2013	814	335	1149
First 3 months of 2014	508	159	667

No. Outbreaks in recent years

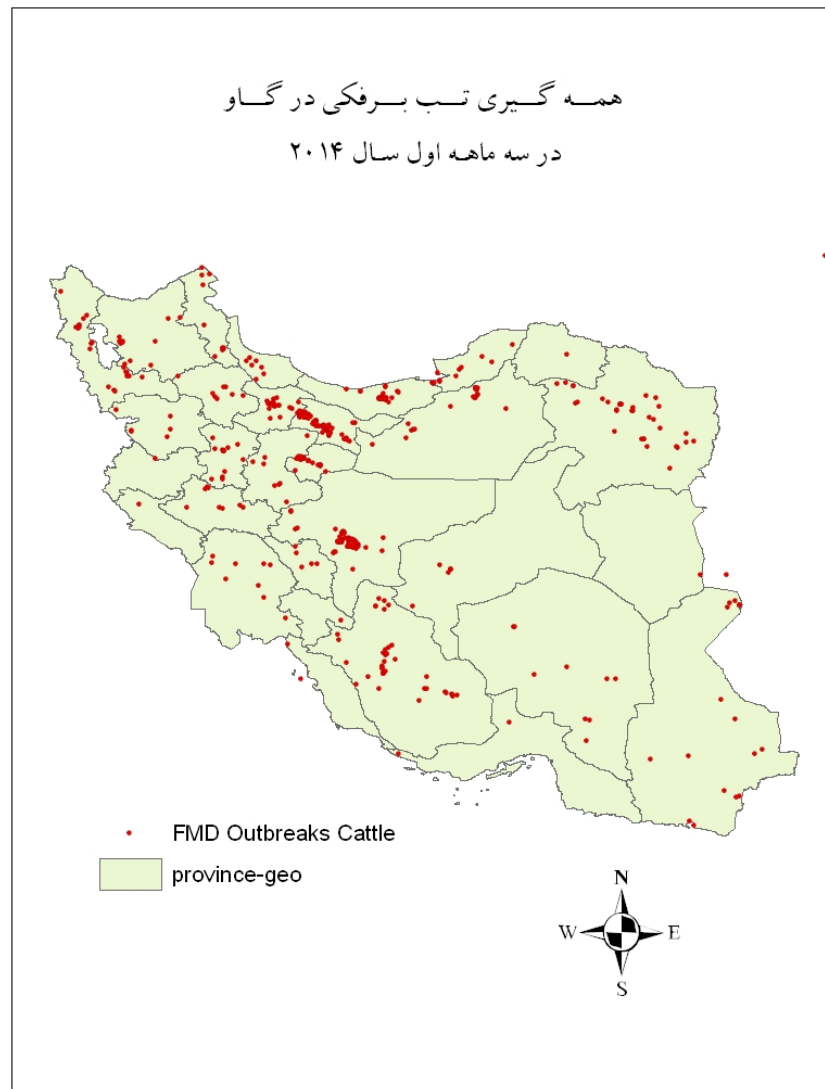


Cattle, Sheep & Goat FMD outbreaks in Jan. – Mar. 2014 667 Reports in 639 epidemiological units



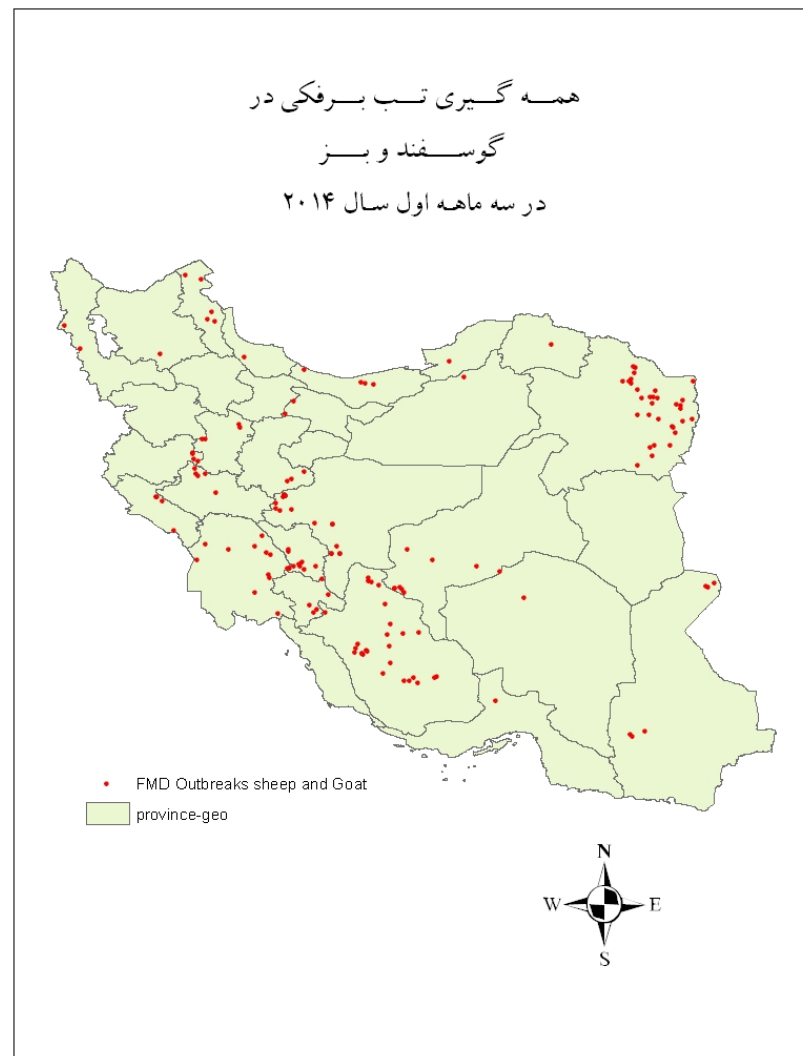


Cattle FMD outbreaks in Jan. – Mar. 2014 508 Reports in 487 epidemiological units



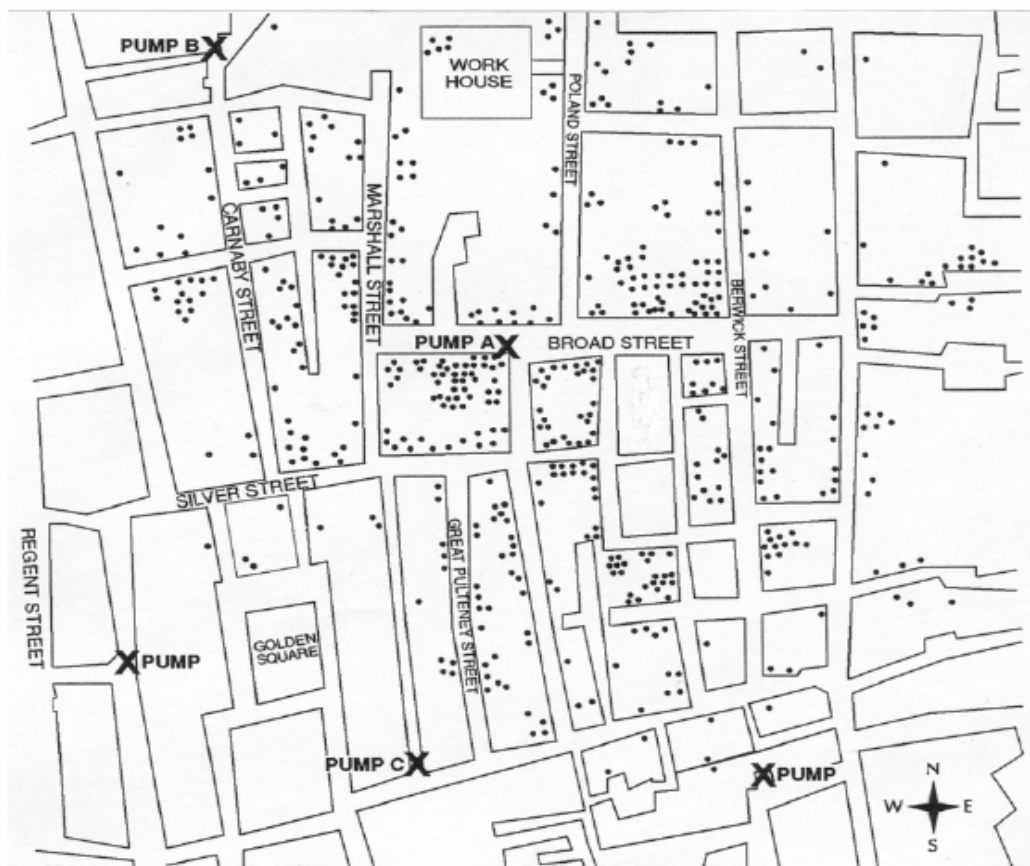


Sheep and Goat FMD outbreaks in Jan. – Mar. 2014 159 Reports in 154 epidemiological units





Spot map of deaths from cholera in Golden Square area, London, 1854





initiative Title :	The strategic control of FMD disease (project operational) based on risk factors	Goal : To improve livestock production and productivity
Project title :	<u>The strategic control of FMD disease based on risk factors</u>	Strategic Objective : To reduce impact of clinical FMD disease
to achieve the strategic objective we dertermine 10 intermediate objectives (as subprojects) on the base of risk factors of FMD and measures are implemented per subproject		
<u>1- to reduce risk of FMD virus transmission caused by animal transportation and animal trading</u>	<u>5- to reduce risk of FMD transmission from high-risk areas and immadiate action against outbreaks</u>	<u>9- To establish sustained private-public partnerships (between IVO and private stakeholders of the following sectors), through which the RBSP on FMD control is effectively supported and implemented</u>
<u>2- to improve the immunity against FMD and biosecurity of calves destined for fattening, at place of origin as well as destination</u>	<u>6- to reduce impact of clinical FMD in commercial dairy sector</u>	<u>10- to sustain risk-based control of FMD through advocacy with government and international agencies</u>
<u>3- to reduce risk of incursion of new strains and serotypes through importation of livestock</u>	<u>7- improvement of FMD vaccine which complies with quality standards and strengthening of IVO FMD laboratory diagnosis network</u>	
<u>4- to reduce the risk of transmission of FMD virus by 'veterinary' professionals (vaccinators, inseminators, practitioners, outbreak investigators and jehad-e-agriculture representatives) through application of sufficient and effective biosecurity measurers</u>	<u>8- To establish an accurate and effective system of monitoring and evaluation of the FMD control strategy</u>	





Summary

- As mentioned in the PCP-FMD epidemiological studies must be the basis of all the measures for controlling the disease and preparing RBSP.
- Epi net is necessary for defining risks
- Epi net is necessary for evaluation of plans.
- Participants are welcomed visiting Iran epi net and using the experiences



Acknowledgments

- Keith Sumption, Melissa Maclaw and Chris Bartles for arranging some epidemiological training courses.
-



- Thank you for your attention





Mobile Technologies: New tools to improve diseases surveillance and reporting

Julio Pinto

Animal Health Officer

FAO



THE CONTEXT

- Lack of sensitivity of surveillance programs
- Lack of timely reporting of disease events
- Underreporting
- Emerging diseases and further spread of endemic
- Proliferation of mobile technologies and access in remote places



SMS Gateway-Bangladesh

- Syndromic surveillance for poultry diseases
- Detection of HPAI in 260/487 subdistricts
- FAO project was funded by USAID
- SMS messages
- Since October 2008, 80% of outbreaks detected through SMS Gateway
- Linked to action : detection to desinfection (4.8 days v/s 1.5 days)



D indicates the
number of birds
reported dead at
the time of the SMS



DLS **T** **4000** **D** **26** **S** **34** **C** ←



Tells the mobile
service provider to
redirect the SMS to
FAO's server



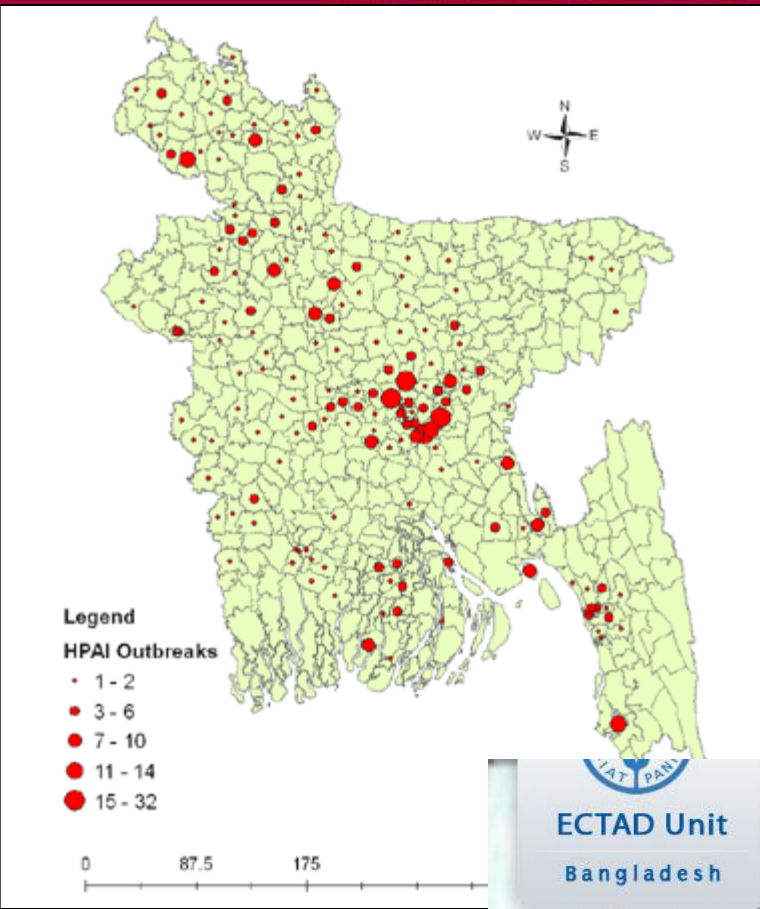
T indicates the
Total number of
birds in the
poultry farm



S indicates
the number
of birds still
sick in the
poultry farm
at the time
of the SMS

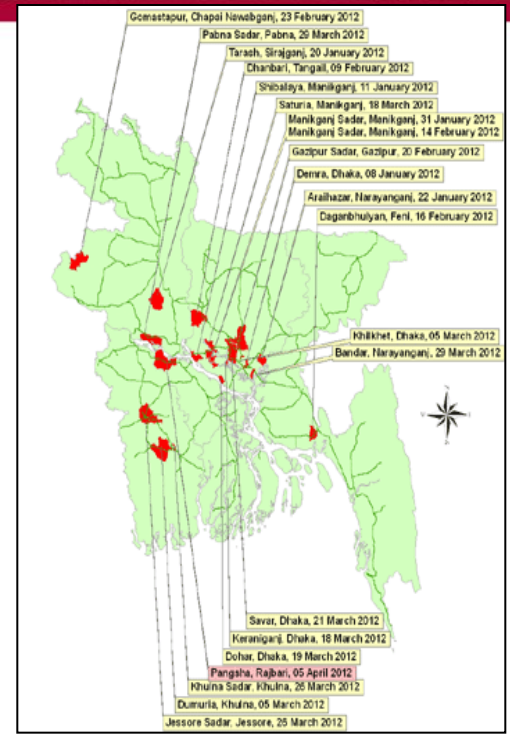
In the first SMS, the
alphabet here
indicates the kind of
farm, with B for
Backyard and C for
Commercial. In the
second SMS, it
would be either N
(No
danger) or S
(Suspicion of H5N1
HPAI)





260 out of 487 sub-districts.

- 780 Community Animal Health Workers (CAHW)
- 88 Veterinary Surgeons
- 260 Upazilla Livestock Officers



ECTAD Unit
Bangladesh





DPT Pilot Studies



- SADC countries
- Namibia, Zambia, Mozambique and Tanzania
- Livestock Committee SADC recommended its application by member states (15)
- Project supported by African Development Bank to implement the technology.





Digital Pen Technology

- 2006 in Southern Africa
- Digital pen that transmitt data through blue tooth technology to a central database .
- A paper form (disease surveillance form) whit a special dot pattern to capture instructions in prescribed areas
- Data is transmitted via GPRS/EDGE/3G
- A server which host the data
- Data quality ckeck (editing, validation and confirmation)
- Priority diseases for SADC/LIMS (FMD, RVF)



FAO's Global Disease Information System (EMPRES-i)

Public website
(English, French, Spanish)



<http://empres-i.fao.org>

Internal website

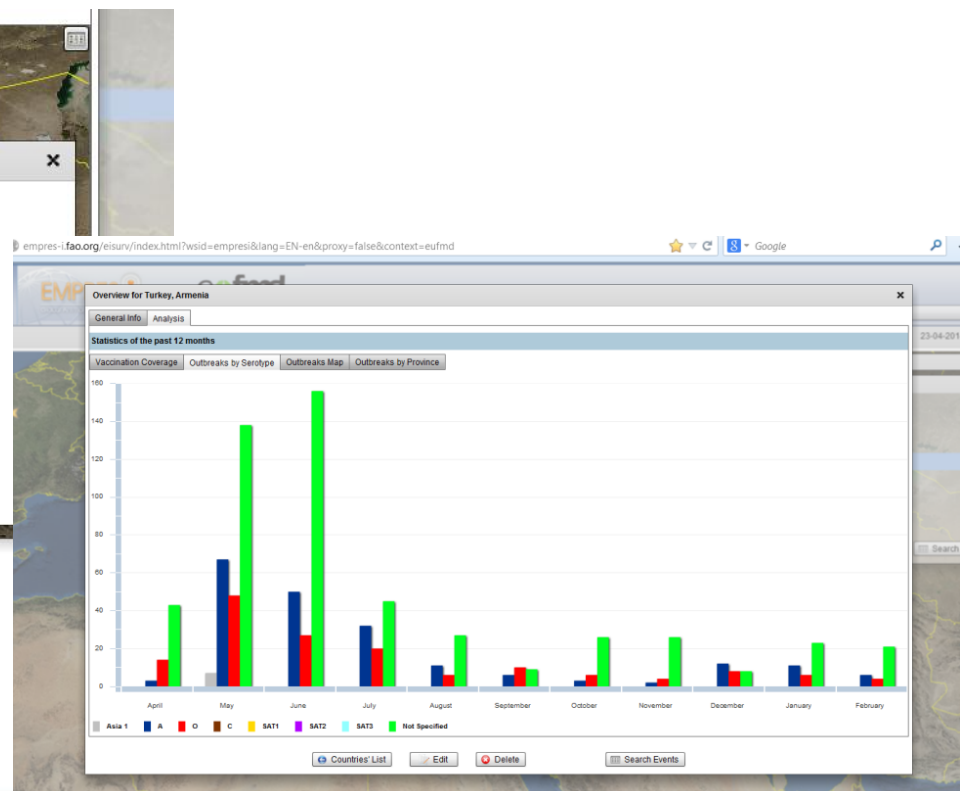
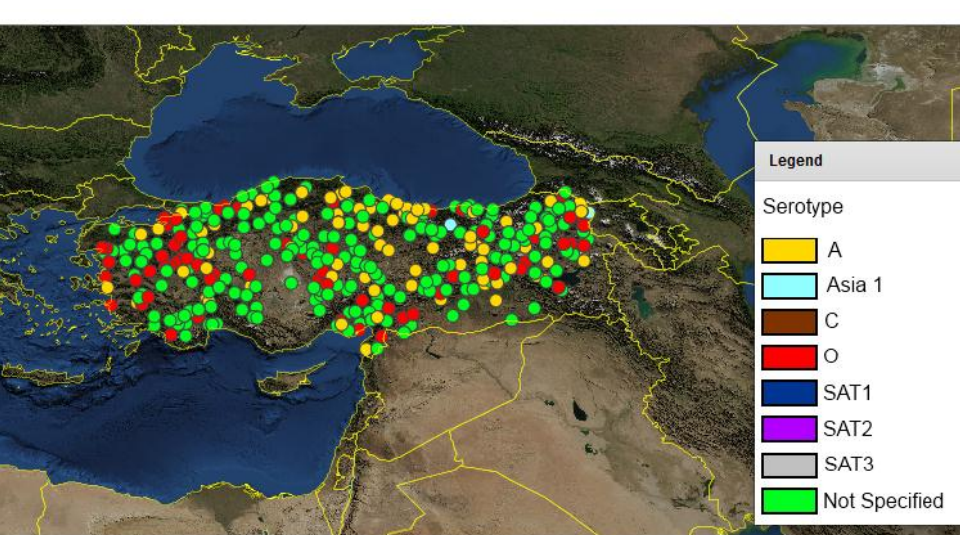


<http://empres-i.fao.org/empres-i3g/>



FMD West Eurasia Database

- Secure website, password protected
- Armenia, Azerbaijan, Georgia, Turkey: outbreak and vaccination data input monthly

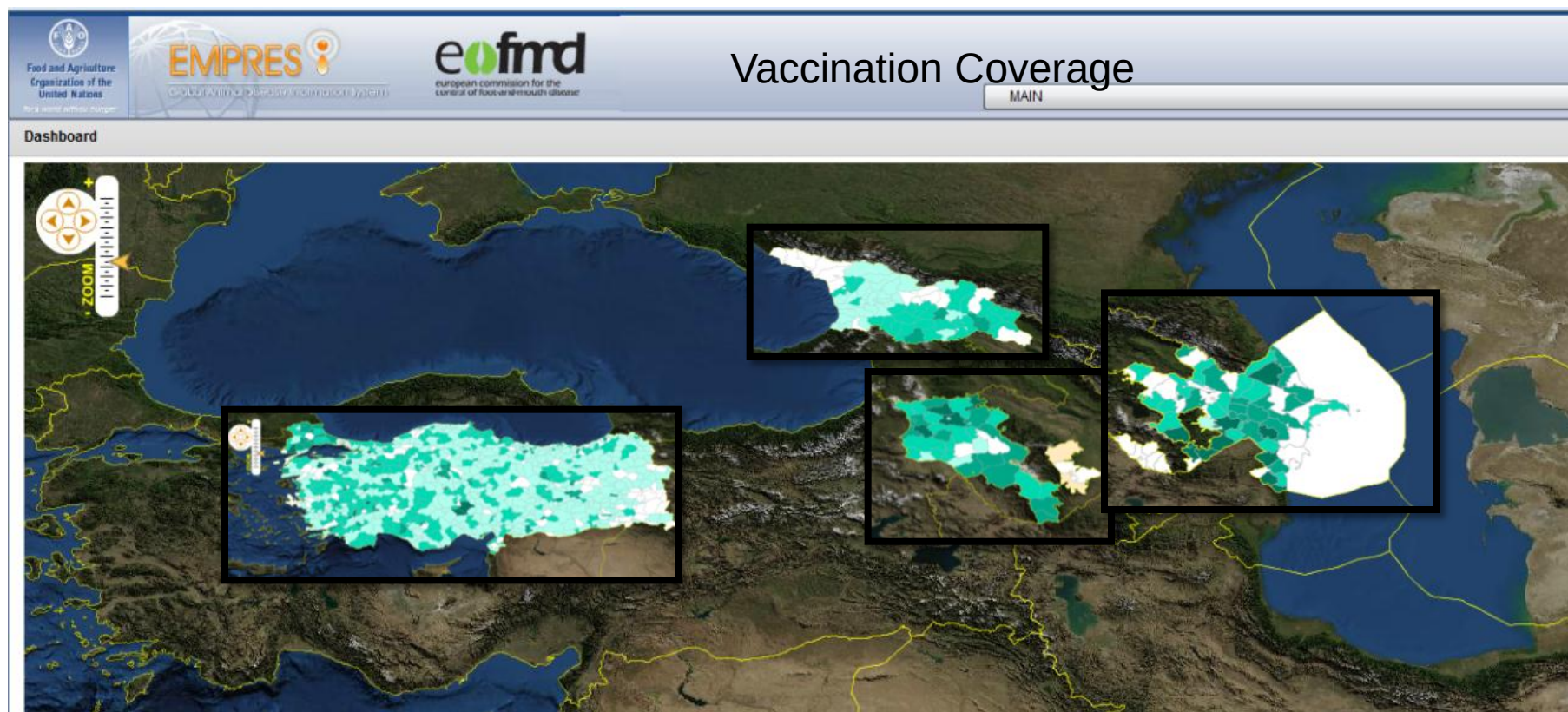




West Eurasia Database



- Automated analysis: charts and maps
- Summarized data can be seen by all countries (maps)





EMPRES-i Event Mobile Application (EMA)

EMPRES-i EMA allows:

- To enter epidemiological data from the field.
- To visualize on a map the location of previous outbreaks available in the EMPRES-i database which occurred close to the geographical location of the user ("Near me").
- To access from the mobile to epidemiological information of an outbreak
- To generate early warning notifications at national/regional level through e-mail notifications.





VALIDATION:
DATA ARE VERIFIED AND
VALIDATED BEFORE BEING
OFFICIALLY PUBLISHED
BY FAO



Food and Agriculture
Organization of the
United Nations

EMPRES
Global Animal Disease Information System

The Center for
Emerging
Zoonotic
Diseases

EMPRES Global Animal Disease Information System (EMPRES) is a web-based application that has been designed to support veterinarians by facilitating the organization and access to regional and global disease information. Timely and relevant disease information, including early warning and response to zoonotic and high impact animal diseases, including emergent zoonoses, and capacity development, is provided management and regulatory approach to control.

EMPRES provides up to date information on the global animal disease distribution and current events at national, regional and global levels. It is now the fastest channel to discover from a world of

DISEASE EVENTS



LATEST EVENTS

- Poli and rabid disease
19/03/2012 - China
- Poli and rabid disease
15/03/2012 - China
- Highly pathogenic avian influenza
15/03/2012 - Israel
- Classics
14/03/2012 - Lebanon
- Classics
14/03/2012 - Lebanon
- Poli and rabid disease
14/03/2012 - Thailand (national)
- Poli and rabid disease
13/03/2012 - Egypt

DIRECTORY

EMPRES provides contact details of the Chief Veterinary Officers (CVOs) for each country.

LABORATORIES

EMPRES provides contact information of ACQUO reference laboratories and Regional Laboratory.

LIBRARY

EMPRES provides access to FAO technical publications such as bulletins, journal, reports.

ANALYSIS TOOL:
DATA IS PRESENTED IN TABLES, CHARTS OR GRAPHS AND CAN EASILY BE DOWNLOADED IN CSV OR XLS FORMAT FOR FURTHER ANALYSIS

[illegible]

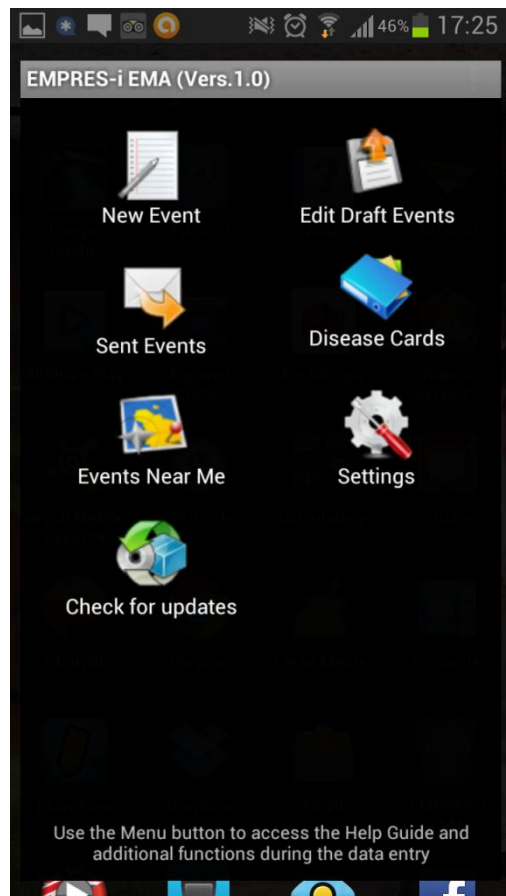
Number of publications per year

Year

Neuroimaging, Genetic research, Brain health, Brain disease, Brain development, Brain plasticity, Brain function



EMA-i for Android



EMPRES-i EMA - New Event

General Species Diagnosis Lab. Tes.. Other

Confidential ☒ No ☐ Yes

Locality Name

Latitude

41.881835

Longitude

12.487858

Get GPS coordinates

Report Date (dd/mm/yyyy)

05/07/2013

Observation Date (dd/mm/yyyy)

Surveillance Type

EMPRES-i EMA - New Event

General Species Diagnosis Lab. Tes.. Other

Photos Add a Photo +

Treatments Add a Treatment +

Control Measures Add a C.Measure +



EMA-i for Android

EMPRES-i EMA - Edit Draft Event

General Species **Diagnosis** Lab.Tes.. Other

Diagnosis Date (dd/mm/yyyy)
05/07/2013

Diagnosis Status
Suspected

Disease
Influenza - Avian

Disease Subtypes
H5N1 HPAI

Diagnosis Source
National authorities

EMPRES-i Mobile - New Outbreak

Disease

Foot and mouth disease

Glanders

Highly pathogenic avian influenza

Infectious bovine rhinotracheitis

Influenza A (H3N2)

EMPRES-i Mobile - New Outbreak

Select Disease Subtypes

H3N1

H4N1

H5

H5N1

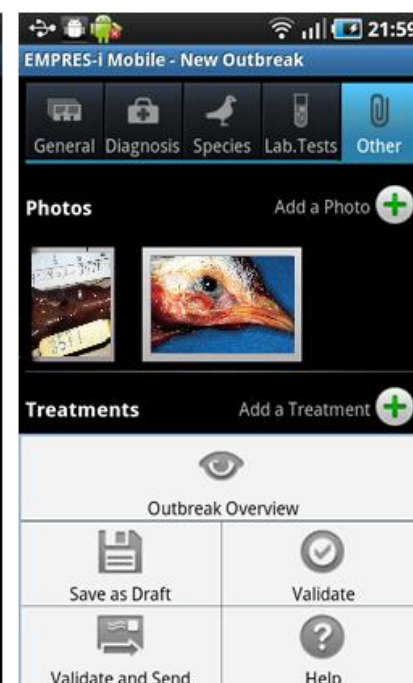
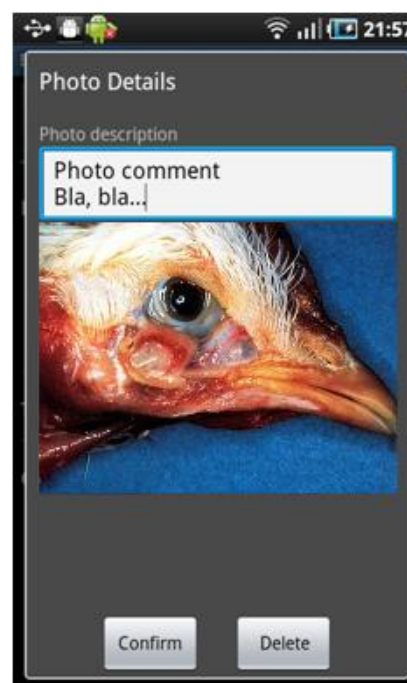
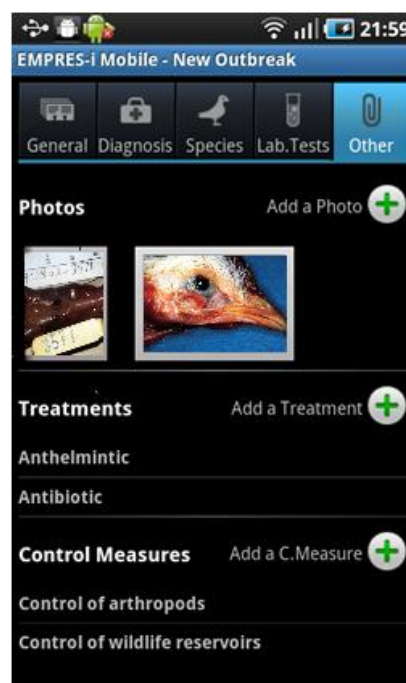
H5N2

Done Cancel



EMA-i for Android

To attach one or more photos (clinical signs, lesions etc..), when collecting and sending information for an outbreak.



Additional information and Photos



EMA-i - Event Near Me function

- To visualize on a Map geo referenced data (*markers*) of outbreaks available in the database
- Selection criteria: time, distance, disease
- Details of an outbreak are also available under a “Report Format”

The screenshot displays the EMA-i application interface. On the left, a 'Set search parameters' dialog box is shown with the following fields:

- Number of months: All
- Max Distance (Km): 300
- Disease: (No selection)
- Search button

In the center, a map of Uganda is displayed with numerous red and yellow location markers indicating outbreak events. The map shows major cities like Kampala, Jinja, and Mbarara, and is labeled 'Uganda'.

On the right, an 'Event Overview' table provides details for a specific event:

Data Entry Information	
Last Saved On	n/a
Sent On	n/a
Sent through	n/a
General Information	
Locality Name	Umbria (at 124.911 Km)
Latitude	43.0
Longitude	12.5
Reporting Date	19 feb, 2006
Observation Date	19 feb, 2006
Surveillance Type	Not specified
Infection Source	Not specified
General Comments	n/a
Diagnosis Information	



How to pilot EMPRES-i – EMA

▪ Essential requirements:

- ✓ Assessment of national needs for disease surveillance and reporting;
- ✓ Agreement on data property between national authorities and FAO;
- ✓ Set-up a workflow;
- ✓ Equipment: Smartphones, Computers;
- ✓ Internet: Operator;
- ✓ Training
- ✓ User guidelines;
- ✓ Standard Operational Procedures (SOPs);
- ✓ FAO assistance at national level (procurement, logistic...);



EMPRES-i – EMA: a pilot activity in Uganda One Health Project (OSRO/GLO/104/IRE)

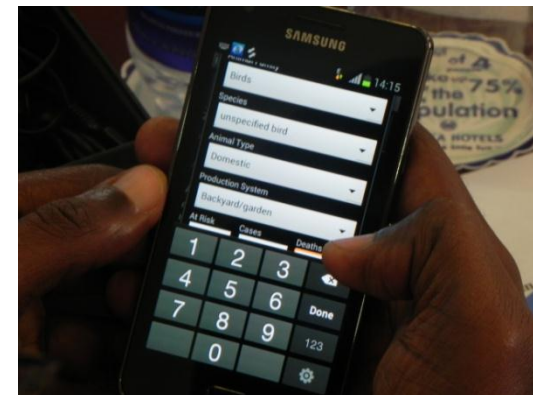
Background:

- Follow-up activity of the national workshop on information systems and innovative tools for disease surveillance and reporting held in Entebbe on 25 January 2013.

- Part of the Disease intelligence component of the One Health Project (OSRO/GLO/104/IRE) which consist in developing tools to improve disease surveillance, reporting and risk management at the human/animal/ecosystem interface.

Objective:

To strengthen the existing disease reporting system in Uganda





EMA-i pilot in Uganda

- **Time period:**

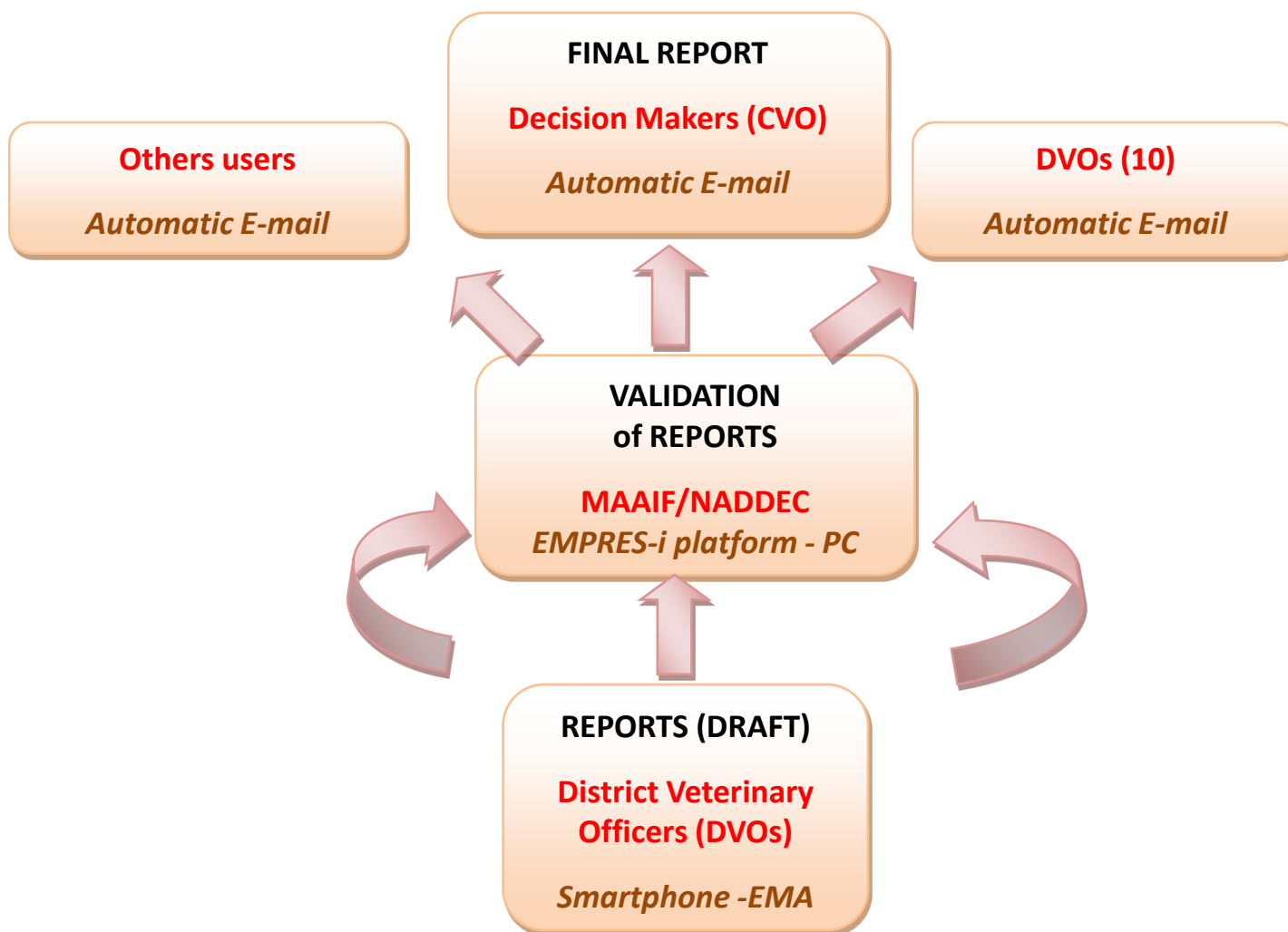
- January 2013 - July 2013: Preparation of the pilot (Districts, Guidelines, SOPs, Procurement, Training material...)
- July 2013 –December 2013: Implementation of the pilot in Uganda (Delivery of equipment, Training)

- **Key players:**

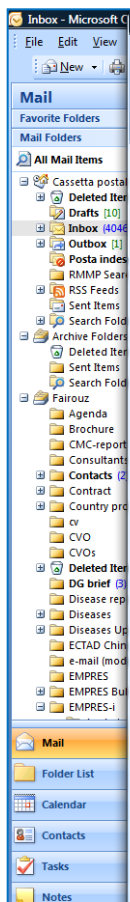
- National Animal Disease Diagnostics and Epidemiology Center (NADDEC) (5) .
- District Veterinary Officers (10)
- Chief Veterinary Officers



Workflow



EMPRES-i FMA – E-mail notifications/Report



Message Adobe PDF

From: EMPRES-i Mobile Control Panel [no-reply@fao.org]
To: Ms. Kiggundu, Gladys; Dr. Mwebe, Rob
Cc: Disease Report Submitted - 2013/10/
Subject: sanje(Rakai)

Dear NADDEC "Acceptance" Team,

A disease report was submitted b platform and you can proceed in

Click from your computer at the <http://empres-i.fao.org/empres-i>
Domain: Empres-i
And type your username and passw
Then go into Disease Event/EMA M

The EMPRES-i Team.

General Information:

Originator: George .H. Were ([geo](#))

Observation date: 2013/07/14
Reporting date: 2013/07/12
Locality name: MBALE (Mbale)
(Lat/Long: 1.06953/34.181751)

Outbreak Details:

Disease: Newcastle disease (Susp

Species:

chicken
Cases: 100
Deaths: 200
At Risk: 500
Destroyed: 20
Slaughtered: 0
Vaccinated: 500

Humans: No

Clinical Signs:

Torticollis (scw neck) - chicke

Lesions:

Message Adobe PDF

Nyamarwa village, Nyamarwa subcounty, Kibaale district(Mubende)/Coccidiosis//Suspected/Domestic/#CONFIDENTIAL#/validated/EMPRES-i - Message (Plain Text)

From: EMPRES-i Notifier [no-reply@fao.org]
To: Dr. Ademun, Rose Okurut; Dr. Amanya, Moses; Dr. Ayebazibwe, Chris; Dr. Baraza, Patrick; Dr. Eswagu, Sam; Dr. Kasozi, Bruhan; Dr. Kauta, Nicholas; Dr. Kimbugwe, Kiwanuka; Dr. Kiryabwire, David; Dr. Mayega, Lawrence; Dr. Okori, Dr. Rutebarika, Chris. S.; Dr. Ssekawojwa, Edward; Dr. Were, George .H.; Mr. Mayanja, Frank; Dr. Nantima, Noelina; Dr. Ndumu, Deo; Dr. Sserugga, Joseph
Cc: Nyamarwa village, Nyamarwa subcounty, Kibaale district(Mubende)/Coccidiosis//Suspected/Domestic/#CONFIDENTIAL#/validated/EMPRES-i
Subject: A disease report was submitted to NADDEC. A summary of the report is available below.

Thank you,
NADDEC Team

Action: VALIDATED

=====

Disease: Coccidiosis
Locality: Nyamarwa village, Nyamarwa subcounty, Kibaale district (Mubende)
Observation Date: 30-10-2013

=====

Diagnosis information
Disease: Suspected
Disease: Coccidiosis
Serotype:
Source: National authorities

=====

Epidemiological information
Species affected: Domestic, chicken
Humans affected: No

=====

Geographical location
Locality: Nyamarwa village, Nyamarwa subcounty, Kibaale district
Latitude: 0.615347
Longitude: 31.390003
Admin2: Buwekula
Admin1: Mubende
Country: Uganda
Region: Africa

=====

Outbreak ID: 181660
Confidential: Yes
Workspace: EMPRES-i
URL: <http://empres-i.fao.org/empres-i3g/>

=====

Inserted: Wed 30-10-2013 17:06:31
Inserted by: Amanya, Moses
Last modified: Fri 01-11-2013 11:53:48
Last modified by: Sserugga, Joseph
Validated by: Sserugga, Joseph
Validation date: Fri 01-11-2013 0:00:00

➤ E-mail with disease event report generated from EMPRES-i



EMPRES-i EMA – Mapping/Near me



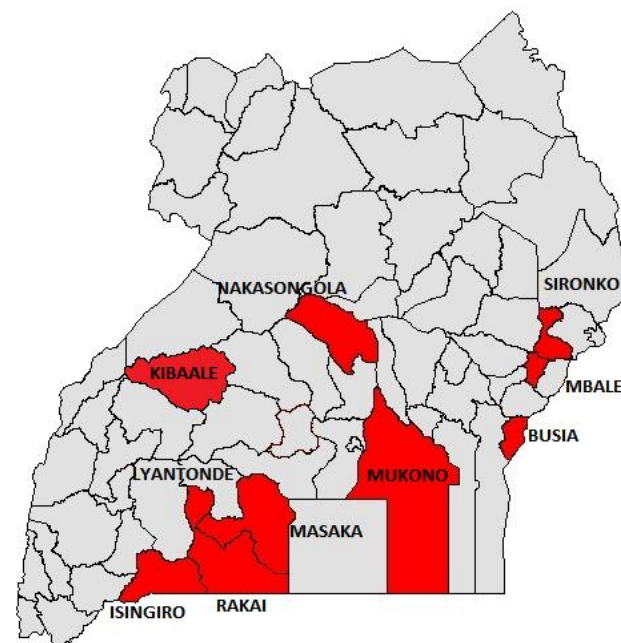
Event Overview	
Data Entry Information	
Last Saved On	n/a
Sent On	n/a
Sent through	n/a
General Information	
Locality Name	Umbria (at 124.911 Km)
Latitude	43.0
Longitude	12.5
Reporting Date	19 feb, 2006
Observation Date	19 feb, 2006
Surveillance Type	Not specified
Infection Source	Not specified
General Comments	n/a
Dianosis Information	



EMA-i: a pilot activity in Uganda

EMPRES-i EMA pilot in 10/112 districts:

Nakasongola, Mbale, Rakai, Sironko, Busia, Lyantonde, Isingiro, Masaka, Mukono, Mityana, Kibaale.





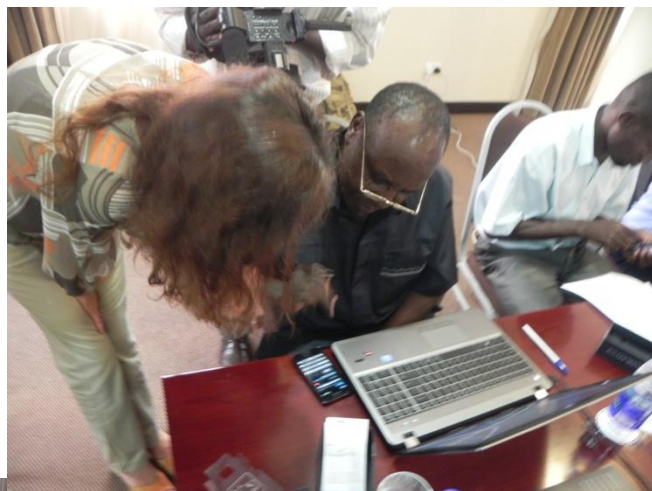
Training

➤ In Kampala:

- NADDEC
- DVOs
- CVO

➤ In Entebbe:

- NADDEC





Diseases to be reported from the field ...it is a country selection, the list is flexible!!

- ✓ Foot and Mouth Disease
- ✓ African Swine Fever
- ✓ Contagious Bovine Pleura Pneumonia
- ✓ Peste des Petits Ruminants (PPR)
- ✓ Lumpy Skin Disease
- ✓ New Castle Disease
- ✓ Anthrax
- ✓ Rabies
- ✓ Brucellosis
- ✓ East Coast Fever
- ✓ Anaplasmosis
- ✓ Babesiosis
- ✓ Heartwater
- ✓ Gumboro
- ✓ Trypanosomiasis
- ✓ Black quarter

Other ...



Challenges

- Assessment of the tool
- Ownership of data, validation and use of the data to support official reporting to regional systems/OIE
- Sustainability/investment
- Purposes/quality of data collected
- Linkages with action (Lab.diagnosis) and disease control
- Structured v/s unstructured data collection
- Analysis of data and epidemiological understanding of disease emergence and spread for action
- Incentives for reporting



**The National FMD Control Programme
represents the core part of any project
proposal to Government and donors.**

Giancarlo Ferrari, Melissa McLaws and Keith Sumption

**Presentation of the
National Control Plan N°1**

**A Risk-Based Strategic Plan for the
Control of Foot-and-Mouth Disease**



Tool for developing a risk-based strategic plan for FMD control

1. Situation analysis

2. Benefits of FMD Control

3. Goal, objectives, tactics and activities

4. Monitoring and evaluation

5. Operational plan

6. Technical assistance



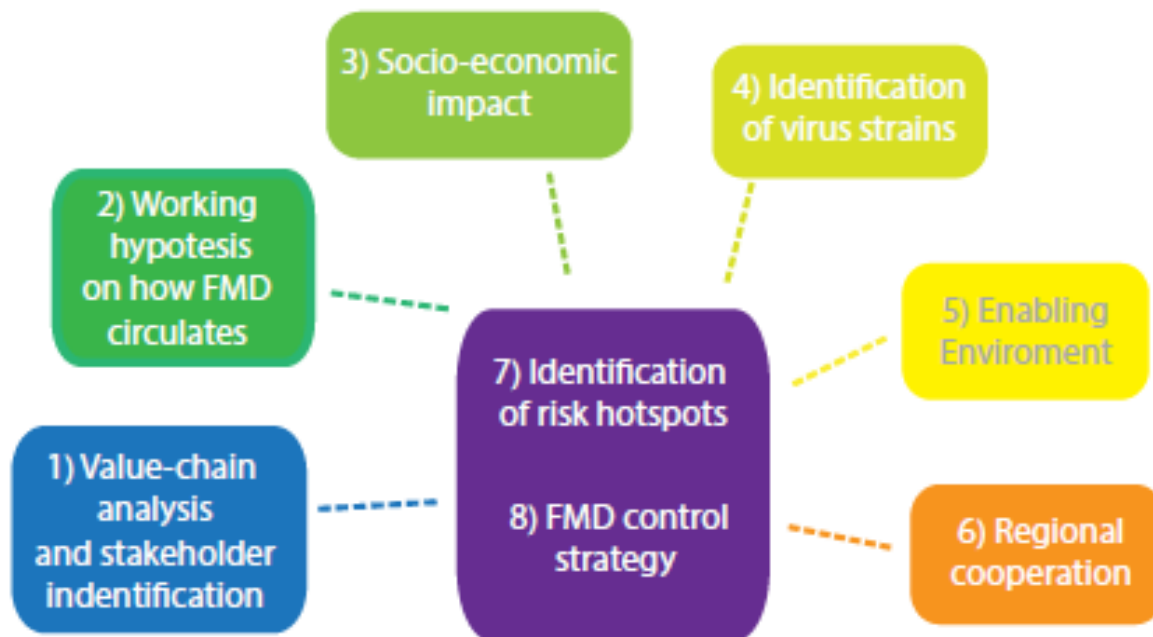
Melissa McLaws (Consultant EuFMD)



PCP-FMD is maximizing limited resources

1. Understanding epidemiology and the impact of FMD (PCP Stage 1)
2. Developing risk-based strategic plan to mitigate the risks
3. Ongoing monitoring to demonstrate effectiveness and adjust to improve or address new risks (all PCP Stages)

“It is rather complex to collate all that information into one overall plan”

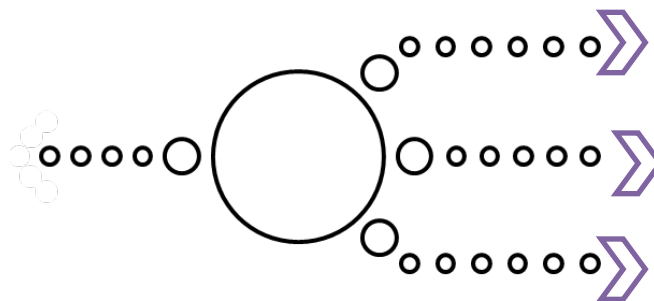




Develop framework for risk-based strategic plan

Move from:

Action focused



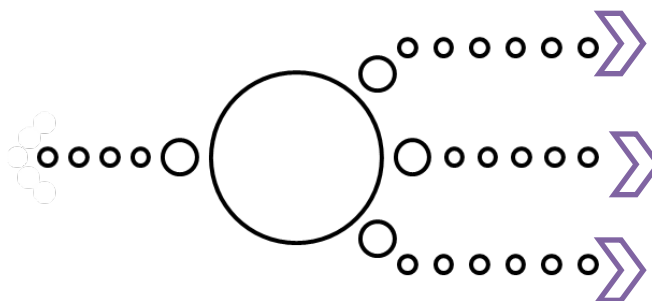
to



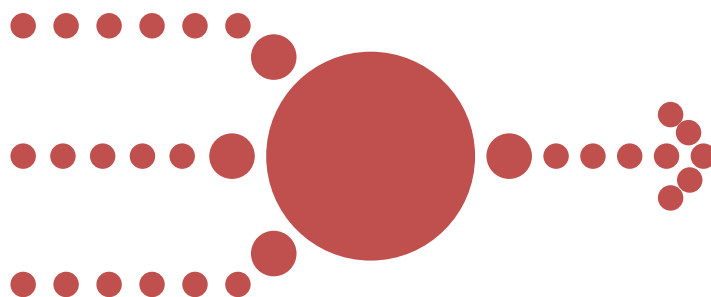
Develop framework for risk-based strategic plan

Move from:

Action focused



to

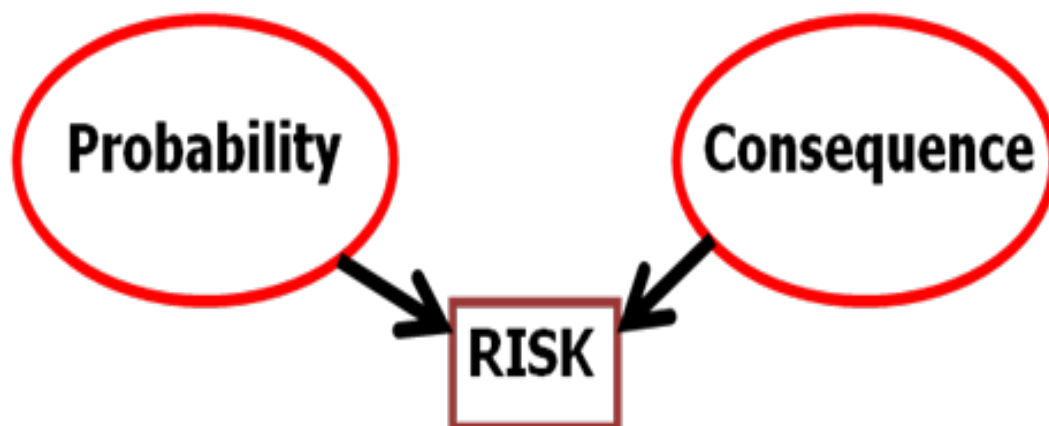


Result oriented



Risk: 2 aspects to consider

- The chances unfavourable outcome will happen
= **probability, likelihood**
- The outcome if it happens = **consequences**



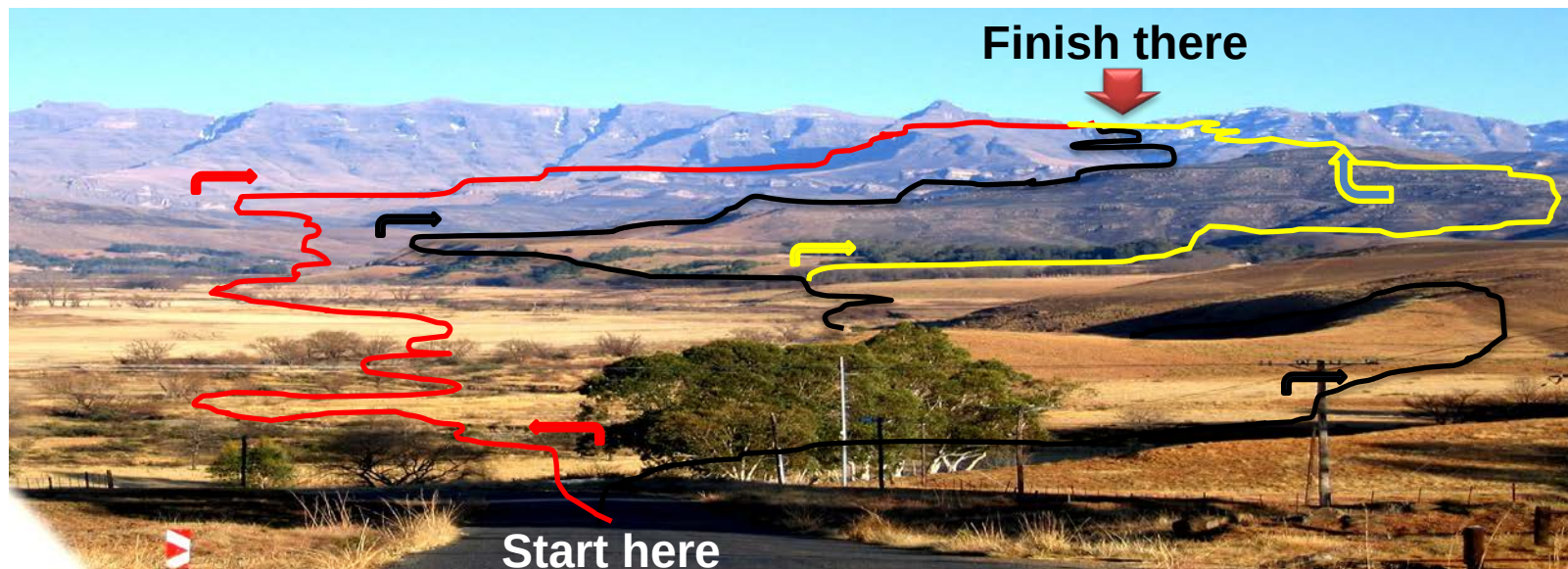
Example: Premises/husbandry practises may be considered **High Risk** if

- They are associated with a high incidence of FMD (**high probability**)
- OR
- They are located in an area usually FMD free (**high consequences**)



Results-based management

- | | |
|--------------------------------|-----------------------------|
| • Decide destination | Objective and goal |
| • Choose route | Strategy-tactics-activities |
| • Check progress against map | M&E |
| • Make adjustments as required | Decision making |





Template: Risk-Based Strategic Plan for FMD Control

Six chapters

- **Already used** by EuFMD in member states (Turkey, Iran, Georgia)
 - very positive response,
 - RBSP for FMD now being fully developed by national VS
- Provide a **framework** for evidence-based policy-making (Palestine, Libya)
 - addressing risks and enabling evaluation of outcomes
- Includes all relevant issues in one document to ensure an **integrated approach** (socio-econ, risk hotspots, monitoring etc)

1. Situation analysis

2. Benefits of FMD Control

3. Goal, objectives, tactics and activities

4. Monitoring and evaluation

5. Operational plan

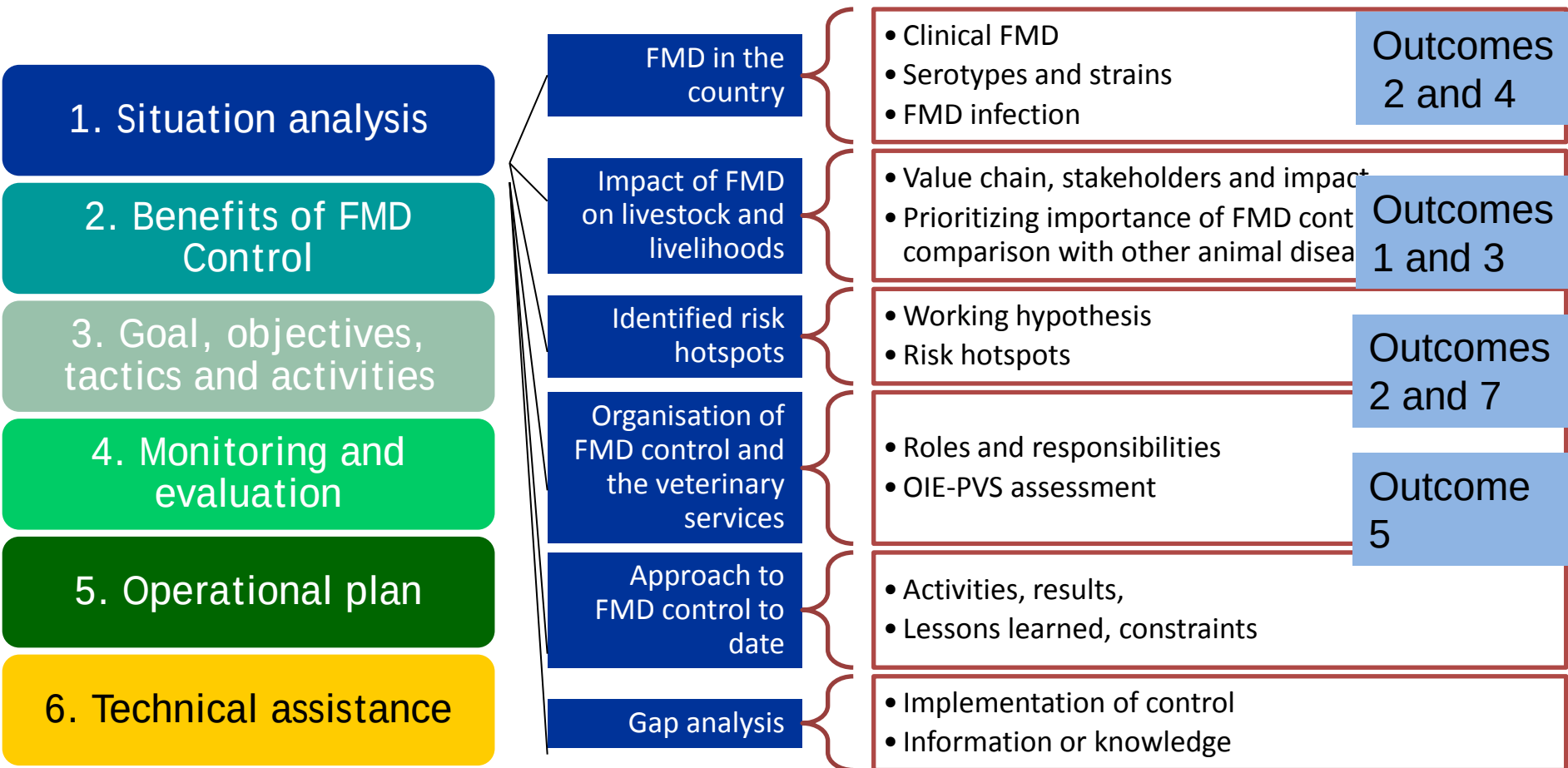
6. Technical assistance

Risk-Based Strategic Plan

Chapter 1: Situation Analysis

PCP Stage 1

- setting the scene for Stage 1 PCP





Chapter 2: Benefits of FMD Control

- Advocacy in support of plan, nationally and internationally

1. Situation analysis

2. Benefits of FMD Control

3. Goal, objectives, tactics and activities

4. Monitoring and evaluation

5. Operational plan

6. Technical assistance

Livelihoods and food security

Private stakeholders

Public sector

Trade

Regional and international

Other

• **Who** will benefit

• **How** will they benefit?

• **What** is the expected benefit?

• **When** will the benefit be realised?



Chapter 3: The Strategy

PCP stage 1:
Outcome 8

1. Situation analysis

2. Benefits of FMD Control

3. Goal, objectives, tactics and activities

4. Monitoring and evaluation

5. Operational plan

6. Technical assistance

Goal

Strategic objective

Component objectives

Tactics

Activities

- 5-15 years horizon
- National policy on livestock and livelihoods
- 3-5 years horizon
- Progress in FMD control
- 1-3 years horizon
- **Related to identified risks and improving FMD management**
- 1-3 years
- Related to each component objective
- Actions needed under each of the strategies



Strategic Objective

Achieving
Stage 3 in 2015



Example

Component Objectives

1. reduce FMD transmission at the time of seasonal migration from X to Y in the spring of each year

2. . reduce FMD transmission to new areas through the largest markets

3. . establish monitoring system for FMDV incidence

**Direct relation between
Risks identified and
Objectives, tactics and Activities
defined**



Strategic Objective

Achieving
Stage 3 in
2015



Example

Component Objectives

1. reduce FMD transmission at
the time of seasonal migration
from X to Y in the spring of each
year

2. . reduce FMD
transmission to
new areas through
the largest markets

3. . establish
monitoring
system for
FMDV incidence

1.1 Compulsory Vx of 100% of
young stock that will migrate ,
including booster dose

1.2 awareness campaign
to owners in the areas of
how to minimize the risk

1.3 strengthen the VS
capacity in Stakeholder
consultation

Tactics

Component Objectives

1. reduce FMD transmission at the time of seasonal migration from X to Y in the spring of each year
2. . reduce FMD transmission to new areas through the largest markets
3. . establish monitoring system for FMDV incidence

Tactics

- 1.1 Compulsory Vx of 100% of young stock that will migrate , including booster dose
- 1.2 awareness campaign to owners in the areas of how to minimize the risk
- 1.3 strengthen the VS capacity in Stakeholder consultation

Activities

Activity 1.1.1: Identification of all locations with which have young stock that will migrate on this route 4 months prior to migration (by Nov each year), and estimate number of head

Activity 1.1.2: Distribution of sufficient vaccines to local vet office by December

Activity 1.1.3: vet to administer vaccine in Jan and Feb

Activity 1.2.1: identification of producers involved in the migration

Activity 1.2.2: hold workshop to identify key messages for awareness campaign

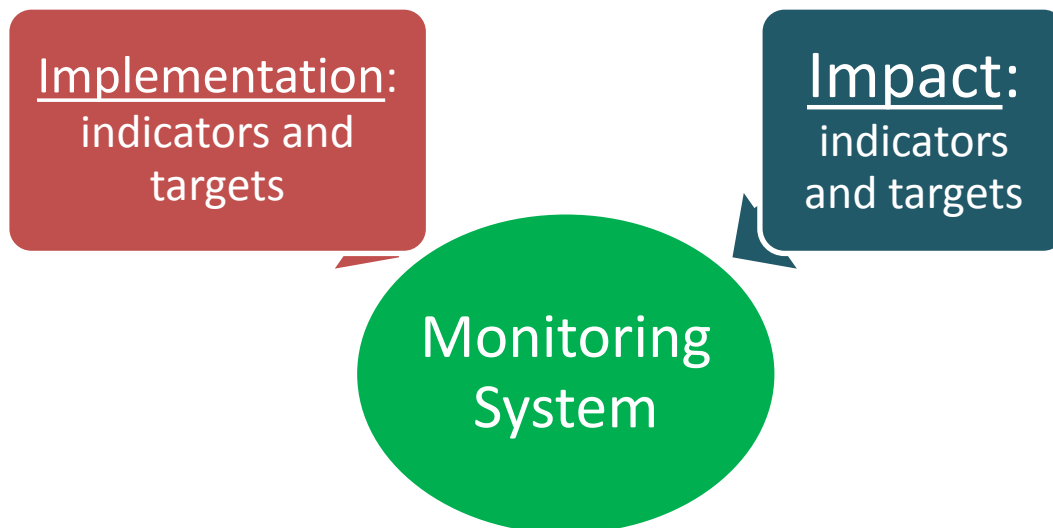
Activity 1.2.3: produce and distribute communication tools

Activity 1.3.1



Monitoring: ongoing data collection

- Are activities being implemented as planned?
 - *“Implementation”*
- What are the results of the activities?
 - *“Impact”*





PCP-FMD
Stage 2.1
Stage 3.1

Chapter 4: Monitoring and Evaluation

1. Situation analysis

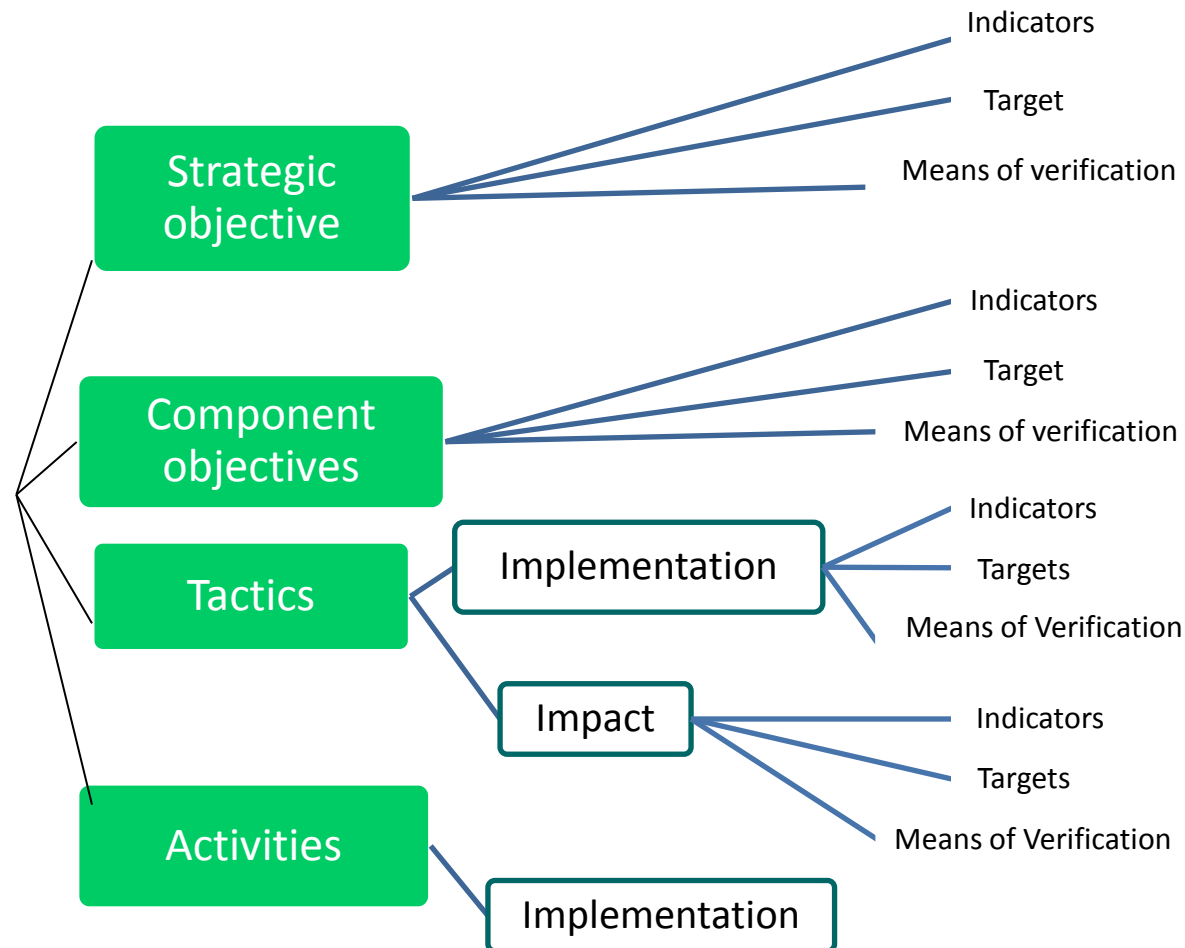
2. Benefits of FMD Control

3. Goal, objectives, tactics and activities

4. Monitoring and evaluation

5. Operational plan

6. Technical assistance





Chapter 5: Operational Plan

1. Situation analysis

2. Benefits of FMD Control

3. Goal, objectives, tactics and activities

4. Monitoring and evaluation

5. Operational plan

6. Technical assistance

Organisation of FMD control

- Levels of operation
- Roles and responsibilities

Implementation table

- Quarterly plan (3 months)
- Consistent with Ch 3
- who, what, where, when, how, how much

Budget

- 1-year budget
- Consistent with objectives, strategies and activities

Reference to Standard Operating Procedures and technical documents

- Related to activities on the ground



Chapter 6: Technical Assistance Plan

1. Situation analysis

2. Benefits of FMD Control

3. Goal, objectives, tactics and activities

4. Monitoring and evaluation

5. Operational plan

6. Technical assistance

Approach

- Organization
- Procedures (setting priorities, engaging with donors)

Summary table

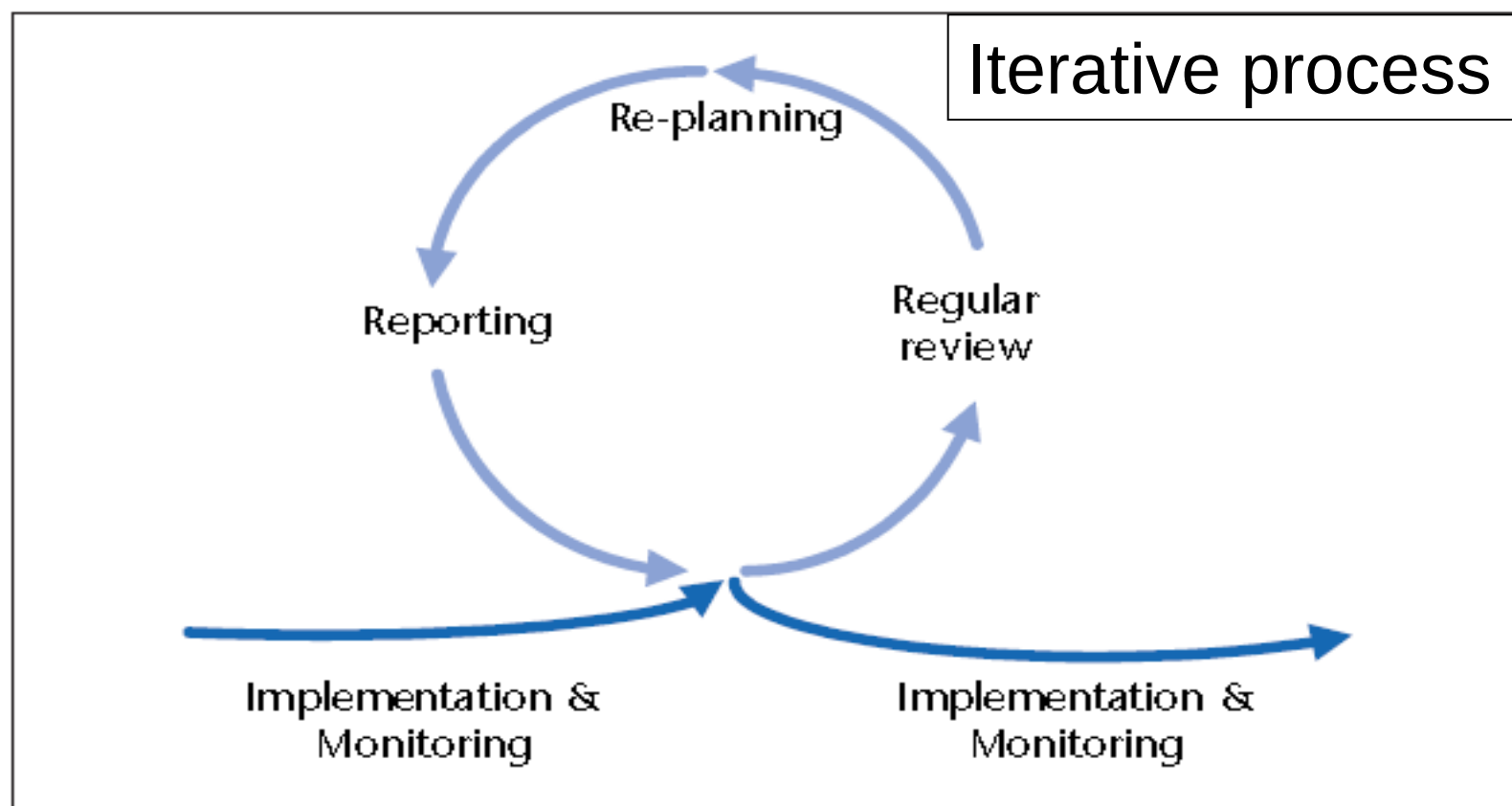
- Which activities?
- Funding gap
- Status

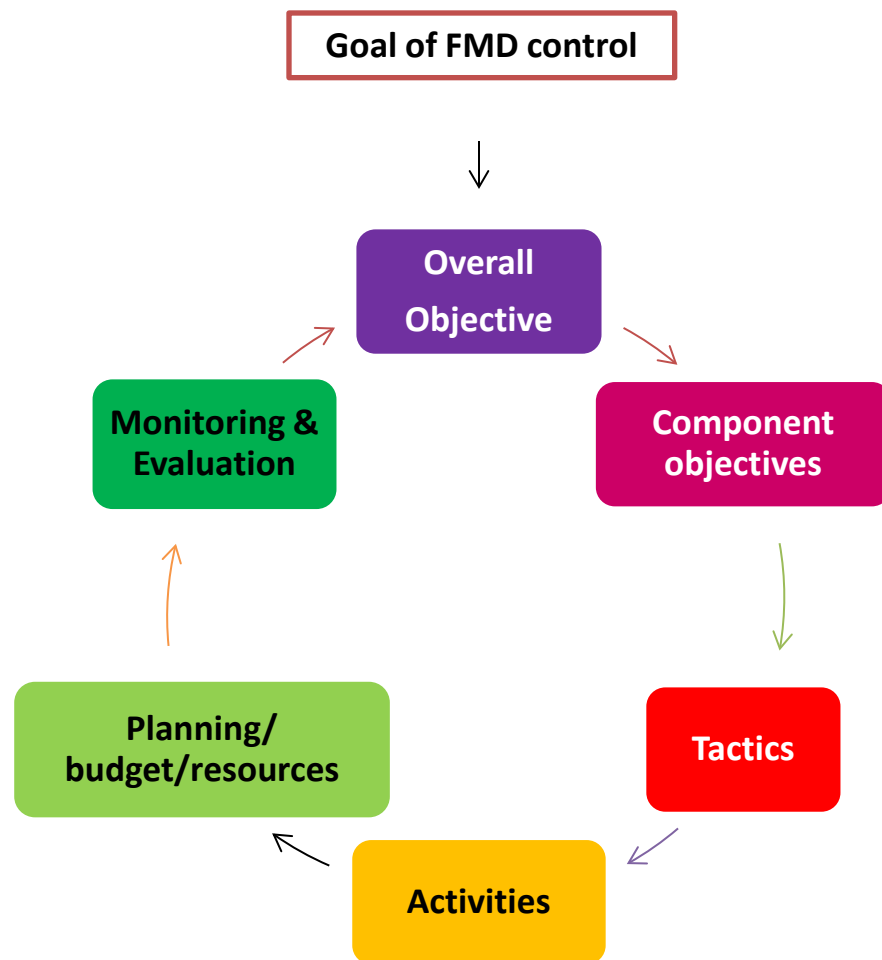
Reference to Terms of Reference and Proposals

- Related to activities



It is more important to get started then to get it right the first time







1. Situation analysis

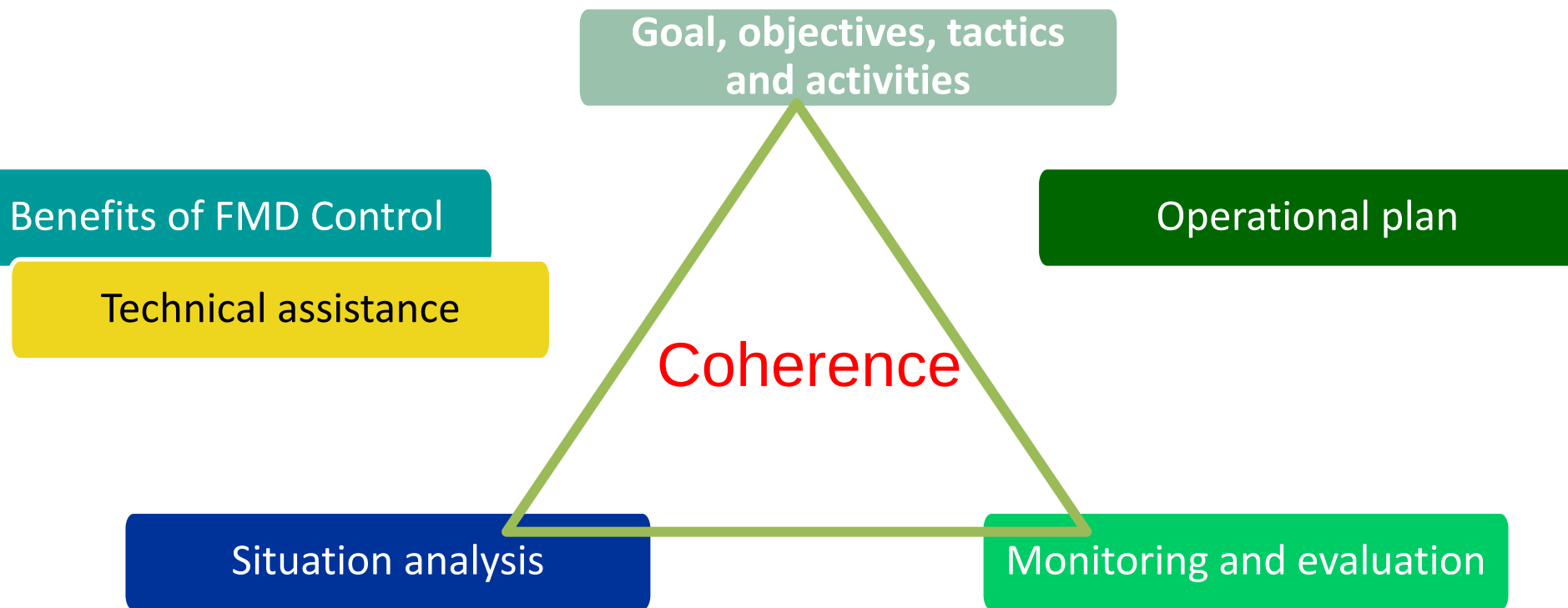
2. Benefits of FMD Control

3. Goal, objectives, tactics and activities

4. Monitoring and evaluation

5. Operational plan

6. Technical assistance





Why will a Strategic Plan improve FMD control ?

- **Developing** the plan ensures:
 - Analysis of risks
 - Consideration of best use of limited resources to mitigate risks
- **Once written**, the plan is a valuable communication tool:
 - Within the Veterinary Services
 - Private stakeholders
 - Regional and international communities
 - Donors for technical assistance
- **Monitoring and Evaluation** during implementation:
 - Continuous improvement in efficiency of resource use
 - Demonstrate achievements





Role of EuFMD in this region



- Improve readiness for FMD crisis management by Members
- Reduce risk to Members from the FMD situation in the European neighbourhood (Progressive Control in neighbouring regions)
- Greater implementation of the Global Strategy for the control of FMD

Some examples





Risk based strategic plans

- Have been drafted in Turkey and Iran
- Under development in Georgia

Turkey: **Strategic objective (2013-2018)**

- Maintain disease freedom with vaccination in Thrace
- Complete PCP Stage 2 in Marmara, Aegean and Black Sea regions and prepare to enter PCP Stage 3 by 2018
- Reduce the impact of FMD through progression in PCP Stage 2 in the rest of the country

Iran: **Strategic Objective:** *To reduce the impact of clinical FMD*

COMMON Component Objectives

1. Reduce risk of **incursion** of new FMDV strains
2. Reduce risk related to **movements**
3. Establish **organisational structure** to manage strategy implementation
4. Improve **monitoring and evaluation** system

IRAN

1. Reduce risk of transmission by **animal health professionals**
2. Reduce the impact of clinical FMD in the **commercial dairy sector**
3. Use FMD vaccine that complies with **quality standards**
4. Sustain risk-based control through **advocacy** with government and international agencies

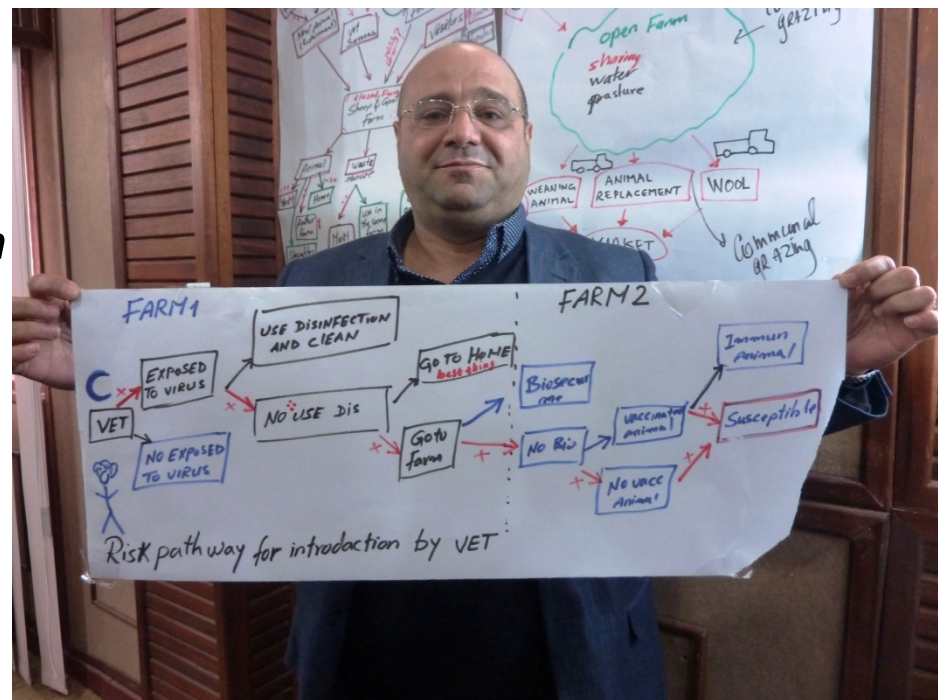
TURKEY

1. To substantiate **freedom** in Thrace
2. Reduce risk of introduction to Thrace
3. Reduce risk during **Kurban** movements
4. Reduce the risk of circulation **within provinces**
5. Reduce the prevalence in Anatolia and maintain high level of **immunity** in Thrace



Current work in Libya, Palestine and Israel

- *Understanding of*
 - Value-chain analysis
 - Stakeholders
 - Routes of FMD virus transmission
- *Risk assessment*
 - Identification
 - risk pathways
 - risk ranking
- *Risk management*
 - Conversion of risks hotspots (problem definition) to component objectives (approach to risk-based strategy)





- An useful tool?! – guidelines and template available through FMD-WG, EuFMD
- EuFMD is developing training materials and workshop formats for developing RBSP
- As with Georgia, Iran, Turkey we are ready to collaborate with you



ТАДЖИКИСТАН

5-я ежегодная дорожная карта Евразия, Астана, Казахстан, 23-24 апреля 2014

Холназар Одинаев, заместитель начальника Службы государственного
ветеринарного надзора МСХ РТ,

Абдурахмон Махмадшоев, Генеральный директор Национального центра
ветеринарной диагностики.





Общее описание Республики Таджикистан

Tajikistan Country Profile

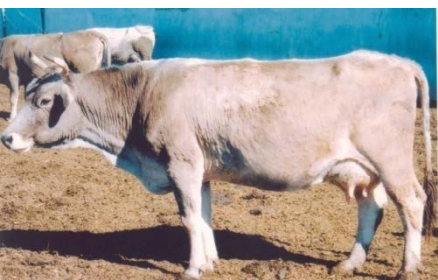


Государство, расположенное в Средней Азии. На юге граничит с Афганистаном (длина границы 1 206 км), на севере и западе - с Узбекистаном (1 161 км), на севере - с Кыргызстаном (870 км), на востоке - с Китаем (414 км). Общая протяженность границы 3 651 км.

Tajikistan is located in Central Asia. In the South the country borders Afghanistan (borderline length is 1 206 km), in the North-West - Uzbekistan (1 161 km), in the North - with Kyrgyzstan (870 km), in the East - with China (414 km). Total border length of the country is 3 651 km.

Поголовье животных в Республике Таджикистан

Animal population in Tajikistan



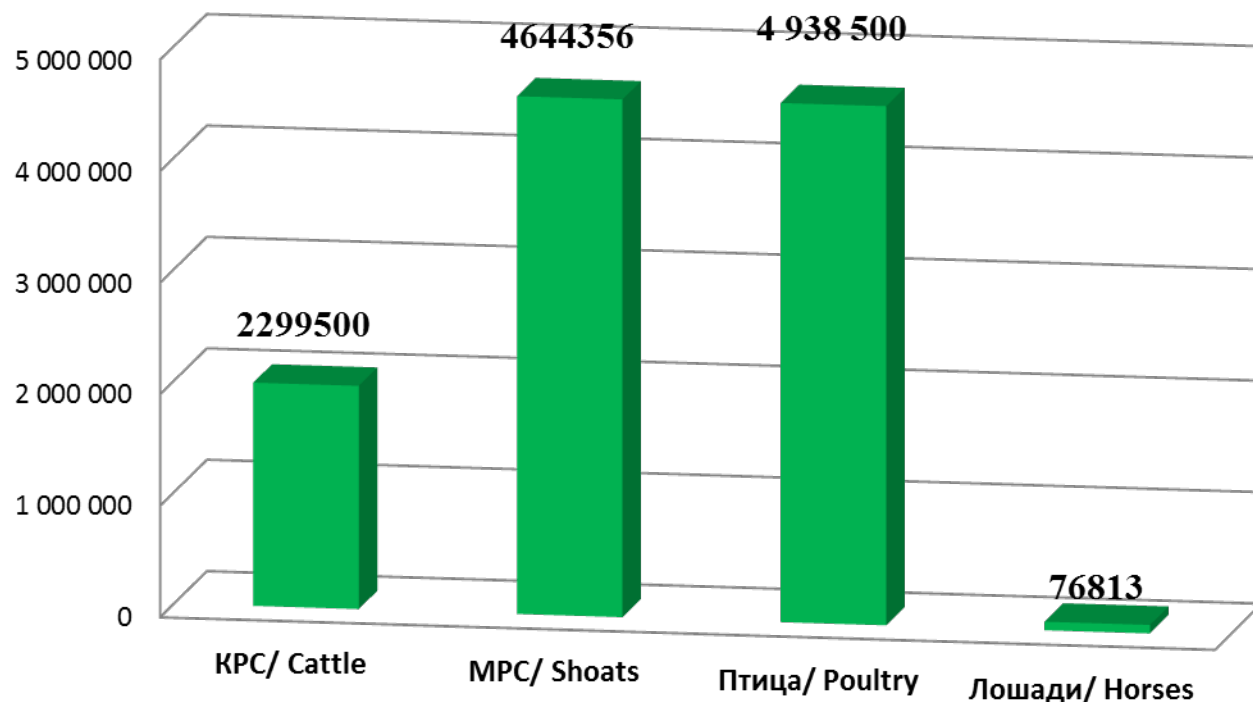
Гиссарская порода



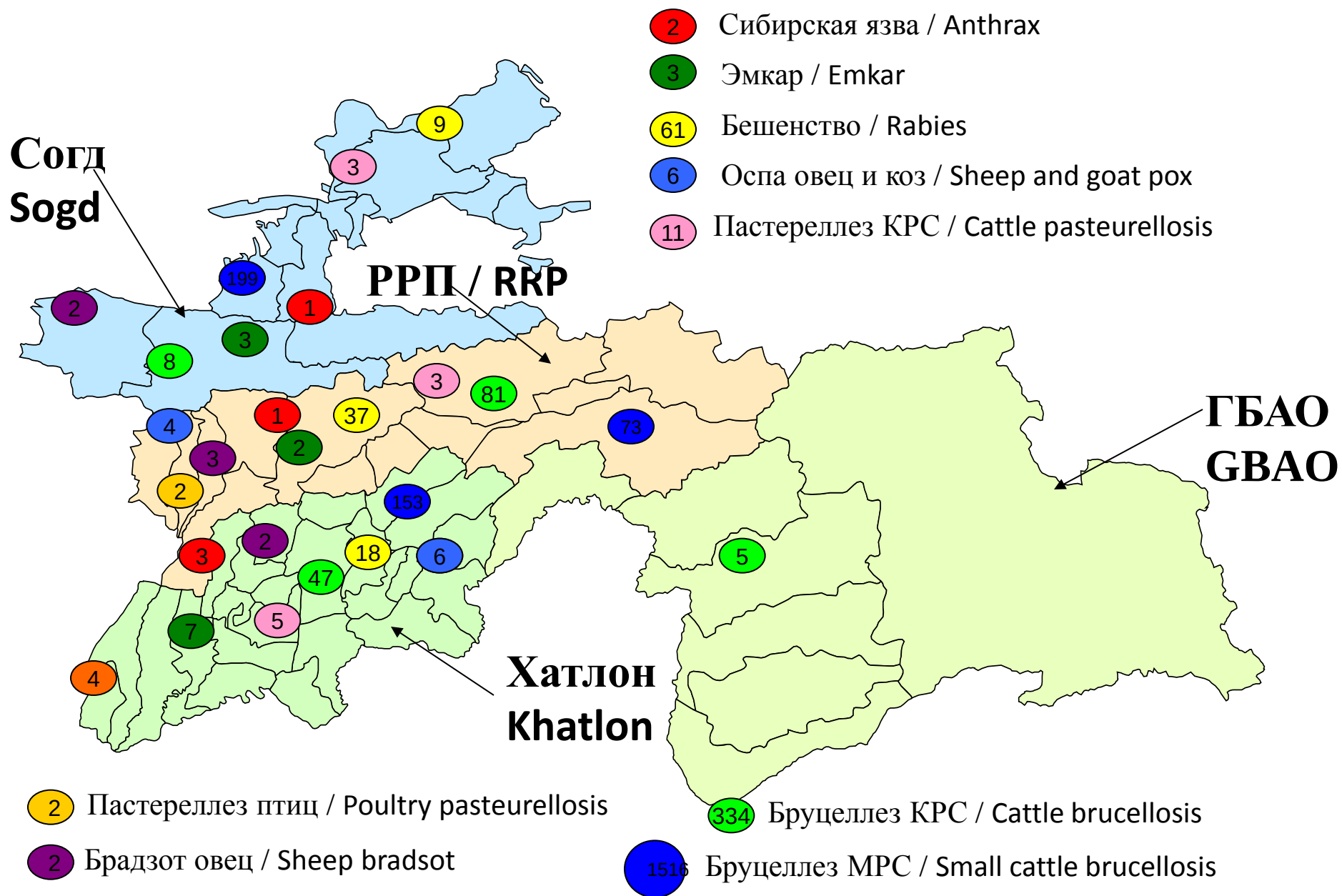
Таджикская порода



Таджикская порода



Эпизоотическая ситуация в Республике Таджикистан -2013



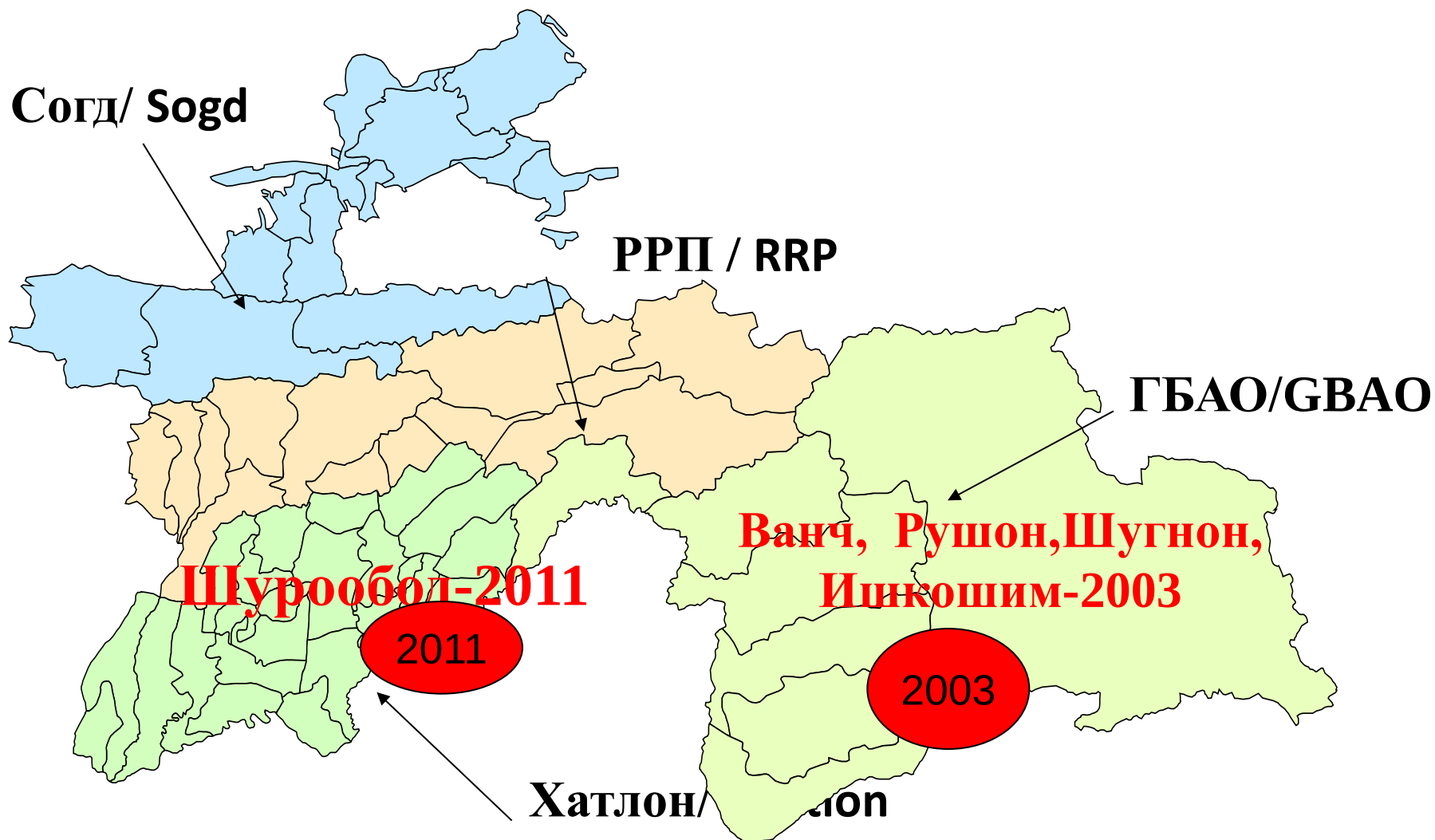
В республике в основном применяются вакцины:

1. Двухвалентная вакцина российского производства ВНИИЗЖ, типа АО и трехвалентная вакцина российского производства ВНИИЗЖ, г. Владимир типа А, О, Азия 1;
2. Двухвалентная вакцина типа АО и трехвалентная вакцина российского производства сорбированная типа А,О,Азия-1, Щелковского биокомбината;
3. Двухвалентная А,О и трехвалентная вакцина индийского производства тип А, О, Азия 1 из штамма Ракша. Хайдарабадский иммунобиологический центр Индия;
4. Трехвалентная вакцина тип А,О, Азия 1 производства Исламской республики Иран из штамма RAZI VACINA, фирма Рози.

Сведение о поставке вакцин и вакцинации ящуром по Республике Таджикистан за 2011-2013 гг.

Регионы	Поголовье скота всего условных голов	Обеспечено вакцина за счет Госбюджета, доза	Закуплено вакцина за счет владельцев животных, доза	Всего вакцинировано условных голов	%-обеспечения вакциной за счет бюджета	% обеспечения вакциной за счет бюджета и частных фермеров
Хатлон	1 374 480	227 400	590 949	818 349	16,5	59,5
Согд	1 179 846	120 900	478 902	599 802	10,2	50,8
РРП	949 961	126 600	154 901	281 501	13,3	29,6
ГБАО	290 551	25 100	30 055	55 155	8,6	19,0
По республике 2011	3 794 838	500 000	1 254 807	1 754 807	13,2	46,2
Хатлон	1 531 751	131 600	459 661	591 261	8,6	38,6
Согд	1 183 122	100 000	280 504	380 504	8,5	32,2
РРП	979 891	78 400	170 722	249 122	8,0	25,4
ГБАО	271 209	40 000	1 951	41 951	14,7	15,5
По республике 2012	3 965 973	350 000	912 838	1 262 838	8,8	31,8
Хатлон	1 845 565	161 050	466 858	627 908	8,7	34,0
Согд	1 234 920	104 450	115 521	219 971	8,5	17,8
РРП	1 077 555	94 500	202 580	297 080	8,8	27,6
ГБАО	271 475	40 000	14 468	54 468	14,7	20,1
По республике 2013	4 429 515	400 000	799 427	1 199 427	9,0	27,1

Эпизоотическая ситуация в республике по ящуру/FMD



Ящур – Foot and mouth disease



Слюнотечение



Поражения слизистой языка



Поражения конечности

Дендрограмма, отражающая положение изолята **О** /Таджикистан/Т-52/2011 на фелигенетическом древе вируса ящура типа **О**

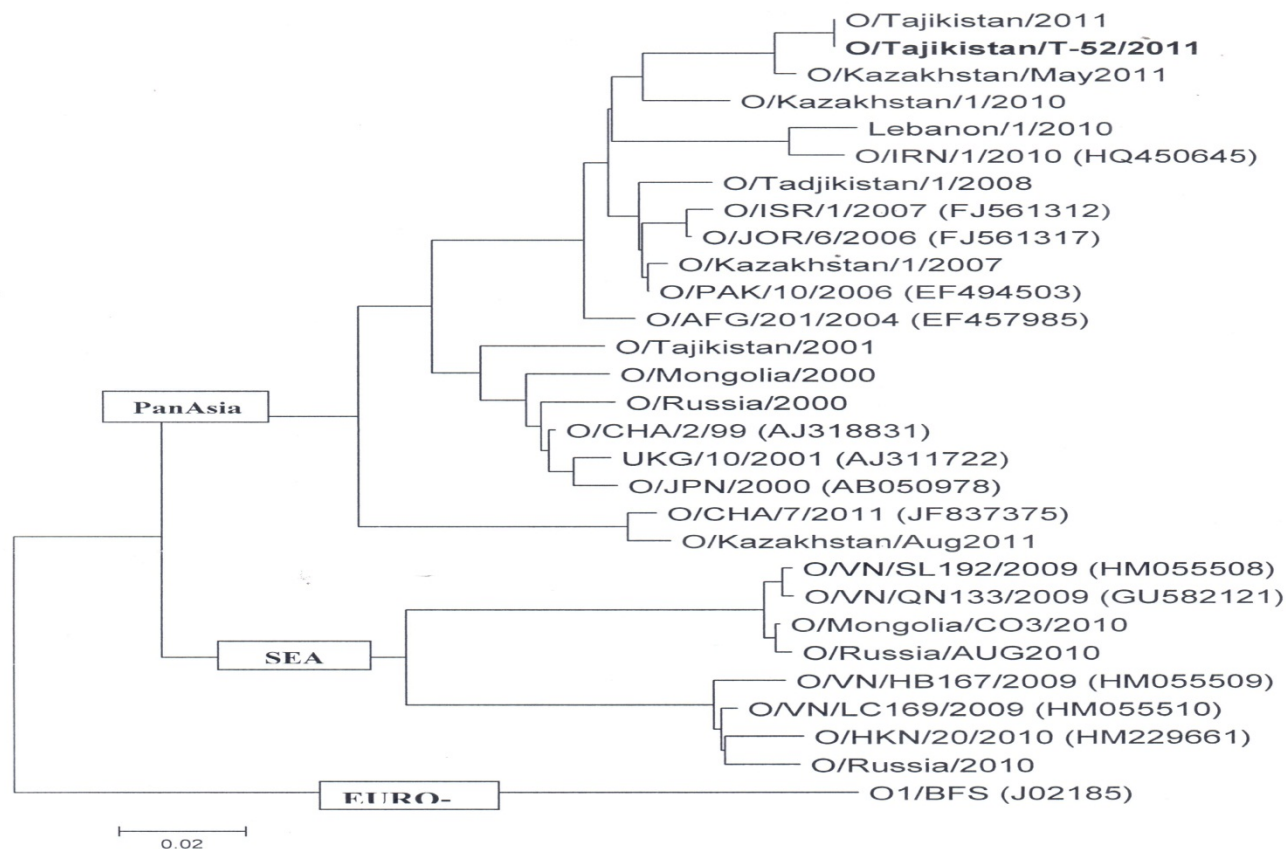
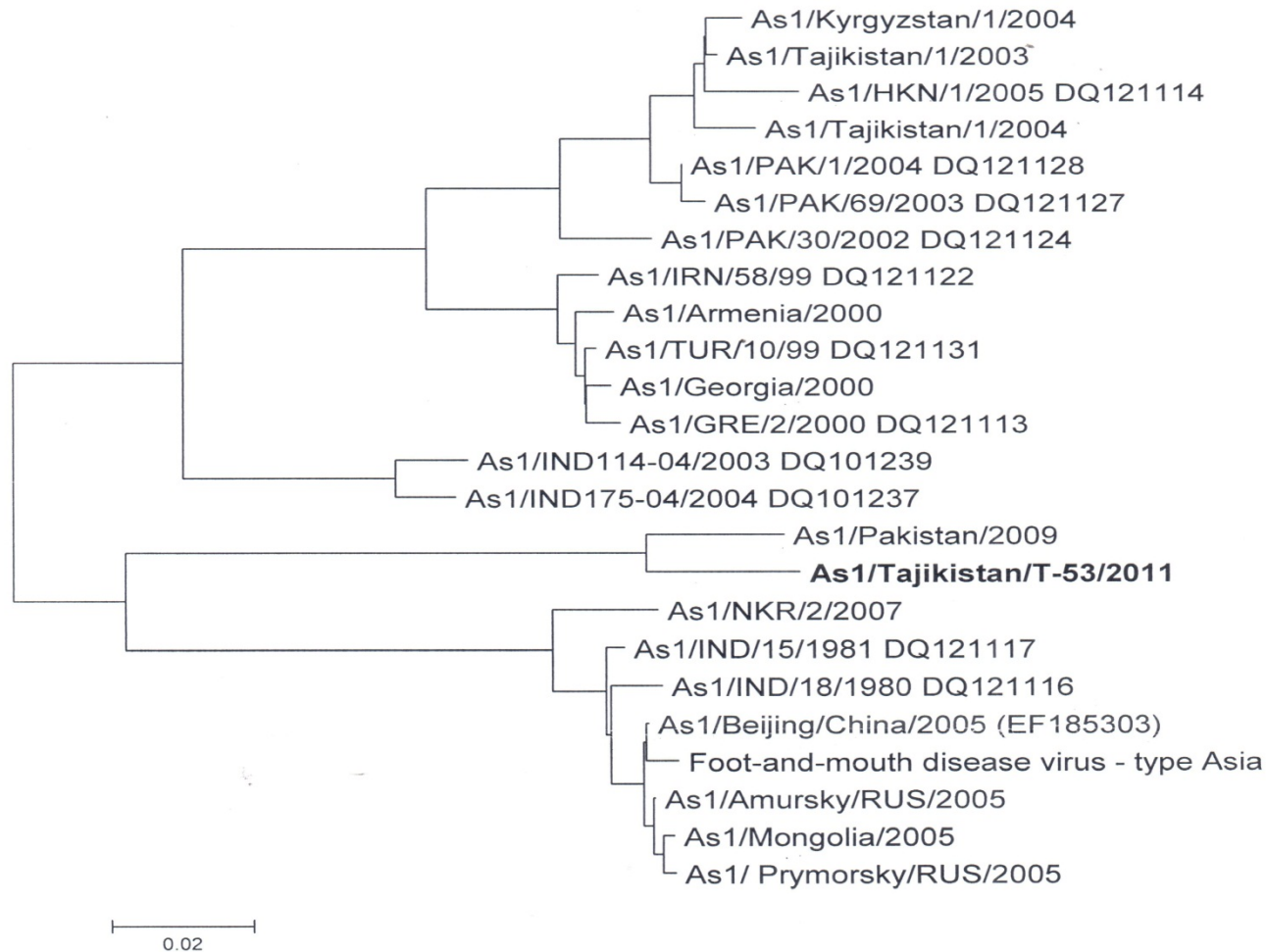


Рис.1. Дендрограмма, отражающая положение изолята **О/Таджикистан/Т-52/2011** на филогенетическом древе вируса ящура типа **О**

Дендрограмма, отражающая положение изолята **Азия-1/Таджикистан/Т-53/2011** на фелигенетическом древе вируса ящура типа **Азия-1**



ис.1. Дендрограмма, отражающая положение изолята **Азия-1/Таджикистан/Т-53/2011** на филогенетическом древе вируса ящура типа **Азия-1**

Мониторинг, оценка и анализ состояния заболеваемости ящуром в республике Таджикистан

- В 2013 году было обследовано **10%** территории от общего количества вакцинированных территорий на наличие формирования иммунитета.
- Произвести охват по всей территории республики **не можем** из-за нехватки средств на эти мероприятия.

Описание стратегии контроля ящура

1. Мониторинг, оценка и анализ состояния заболеваемости ящуром;
2. Эпидемиологический надзор за рисками ящура и угрозой здоровья животных в рамках защиты животных и работников занятых в животноводческой отрасли;
3. Разработка планов мероприятий по участию общественности в мероприятиях направленных контролю и профилактики ящуром.

Описание стратегии контроля ящура

4. Разработка путей регулирования и обеспечение привлечения законодательных актов в вопросах охраны от ящура, разработка новых национальных стандартов и протоколов по диагностике, лечению и профилактики ящура.

5. Разработка и проведения конкретных мероприятий, работ по созданию материальной базы для успешного выполнения мероприятий направленных по борьбе с ящуром.

Критическая оценка стратегии по достижению цели

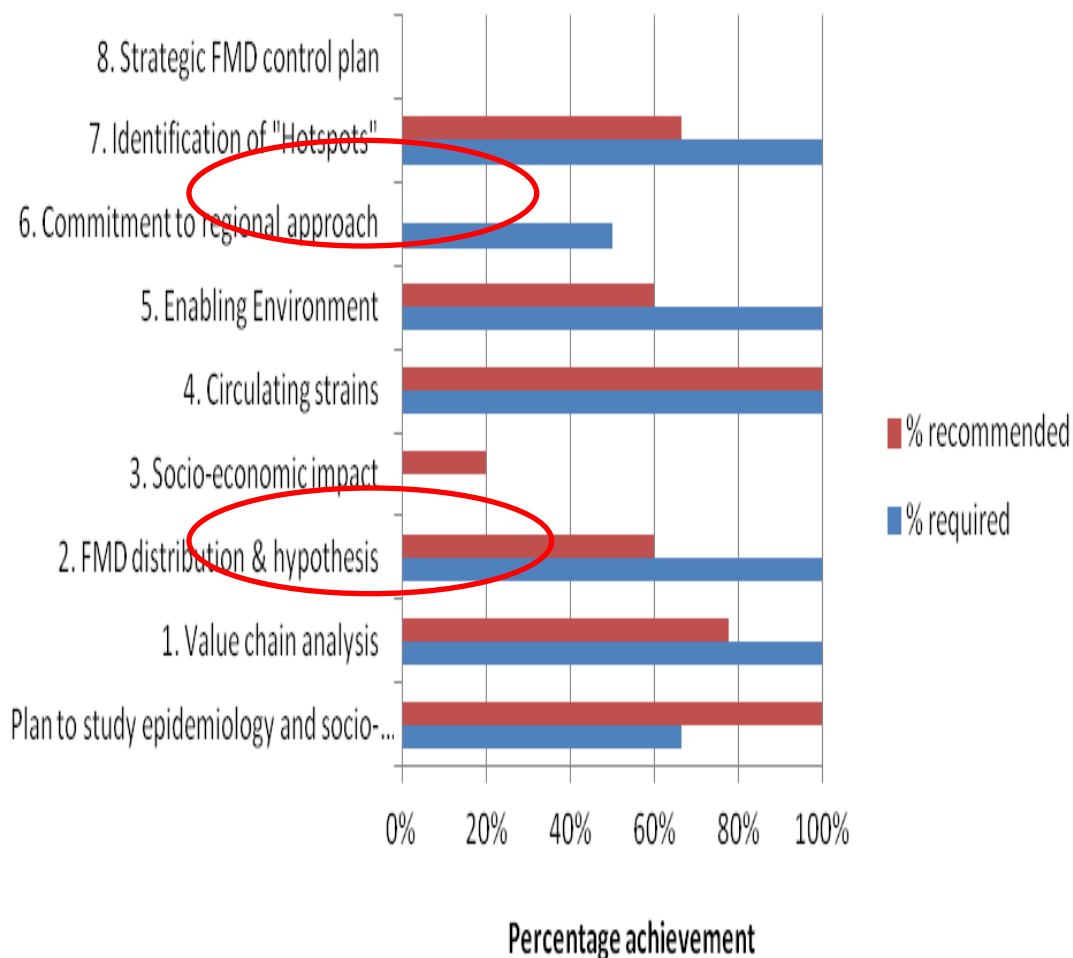
Исходя из того что в Республике в 2013 году не было регистрации ящура все меры были направлены на профилактические работы.

Благодаря организации своевременных ветеринарно - санитарных мероприятий, проведение необходимых вакцинаций в **буферных зонах**, правильным распределением вакцин достигнута определённый успех в борьбе с болезнью и создана определенная благополучия в Республике.

Краткосрочные и Долгосрочные Планы надзора и контроля ящура

- Служба государственного ветеринарного надзора согласно существующей инструкции проводит ежегодные планирования по вакцинации ящура сельскохозяйственных животных.
- Проводиться определенная исследовательская работа по изучении эпизоотологии, диагностики и меры борьбы со стороны Государственное учреждение Институт проблем биологической безопасности (ТАСХИ) Национального центра ветеринарной диагностики СГВН.

Пробелы, выявленные во время ВСТРЕЧИ ДОРОЖНОЙ КАРТЫ в 2012



На 2013 год согласно Плана противоэпизоотических мероприятий по Республике было запланировано вакцинировать против ящура:

Запланировано	Фактически вакцинировано	Процент
4 429 515	1 199 427	27

Благодаря правильным проведению ветеринарно-санитарных мероприятий по борьбе с ящуром в Республике было достигнута сравнительно благополучная эпизоотическая ситуация, ящур не представил никаких особых угроз.

Сотрудничество

НЦВД сотрудничает с нижеследующими местными и международными организациями и за оказываемую помощь и поддержку благодарит своих партнеров:

- МЭБ;
- ФАО ООН;
- ВОЗ;
- ФГБУ «ВНИИЗЖ» -региональная референт лаборатория МЭБ г. Владимир;
- Ассоциация биобезопасности Центральной Азии и Кавказ;
- Ассоциация ветеринаров республики Таджикистан;

Проблемы:

1. Бюджет и финансирование;
2. Нехватка диагностикумов, реактивов и китов и диагностического оборудования;
3. Повышение квалификации специалистов на уровне международных стандартов;
4. Проблема доставки паталогического материала в референт лаборатории;

Благодарю за внимание!
Thank you for Attention!





Provisional Roadmap based on self-assessment questionnaires

Presenters: Joseph Domenech (OIE)
Giancarlo Ferrari (FAO)



Baku (Azerbaijan) 2013

	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Kazakhstan	1	1	1		1	1*	2	2	3	3	4	4	5	5	5	5	5	5
Kyrgyzstan	1	0	0		1	1	2	3	3	3	4	4	4	4	4	4	4	4
Tajikistan	0	1	1		1	1	2	2	2	3	3	3	3	3	3	3	3	3
Turkmenistan	0	0	0		1	1	2	2	3	3	3	3	3	3	3	3	3	3
Uzbekistan	0	1	0		1	1	2	2	3	3	3	3	3	3	3	3	3	3
Afghanistan	0	1	1		1	1	2	2	3	3	3	3	4	4	4	4	4	4
IR of Iran	2	2	2		2	2	2	2	3	3	3	3	4	4	4	4	4	4
Pakistan	0	1	1		1	1	2	2	3	3	3	3	4	4	4	4	4	4
Turkey Anatolia	1	2	2		2	2**	2	2	2	2	3	3	3	3	3	4	4	4
Syria	3	1	1		1	1*	2	3	3	3	4	4	4	5	5	5	5	5
Iraq	1	1	1		1	1*	2	3	3	3	3	3	4	4	4	4	4	4
Armenia	2	2	2		2	2**	3	3	3	4	4	4	4	4	4	4	4	4
Azerbaijan	2	2	2		2	2**	2	2	3	3	3	3	4	4	4	4	4	5
Georgia	2	1	1		1	1*	2	2	3	3	3	4	4	4	4	5	5	5

*To move to stage 2 pending receipt of Control Strategy

**Will be changed to stage 1 unless copy of control strategy received by end May 2013

No roadmap meeting held in 2011



PCP self-assessment 2014

- 4 countries qualified in stage 1 in 2013 have not submitted their questionnaires (those countries are provisionally qualified at the same stage as in 2013);
- 3 countries qualified in stage 1 in 2013 and claiming for stage 2 in 2014 but that have not submitted their risk-based strategic plan (provisionally qualified at the same stage as 2013);



PCP self-assessment 2014

- 3 countries qualified in stage 1 in 2013 and claiming for stage 2 in 2014 that have submitted their control programs (provisionally qualified in stage 2);
- 2 countries in stage 2 in 2013 (claiming to remain in stage 2 in 2014) have provided questionnaires and additional information on implementation of their National Control Programs;
- 1 country in stage 2 in 2013 (claiming to remain in stage 2 without evidence of a risk-based strategic plan). Provisionally maintained in stage 2;
- 1 country in stage 2 in 2013 claiming stage 3 for 2014 but indicating that stage 3 will be achieved in the period 2013-2018



Based on documentation submitted to be reviewed during the meeting

	2008	2009	2010	2011	2012	2013	2014		
Kazakhstan	1	1	1		1	1	1**		
Kyrgyzstan	1	0	0		1	1	1*		
Tajikistan	0	1	1		1	1	1**		
Turkmenistan	0	0	0		1	1	1*		
Uzbekistan	0	1	0		1	1	1*		
Afghanistan	0	1	1		1	1	1*		
IR of Iran	2	2	2		2	2	2		
Pakistan	0	1	1		1	1	1**		
Turkey Anatolia	1	2	2		2	2	2		
Syria	3	1	1		1	1	2		
Iraq	1	1	1		1	1	2		
Armenia	2	2	2		2	2	2***		
Azerbaijan	2	2	2		2	2	2**		
Georgia	2	1	1		1	1	2		
*Countries that have not submitted their questionnaires									
**Countries that have not submitted their control programs									
***The control plan indicates achievement of stage 3 in the period 2013-2018									



Updates on recent GF TADs Regional and Global Steering Committees and on WAHIS

**J Domenech and Laure Weber
OIE Paris**

Part 1 GF TADs Steering Committees

Region	Priority TADs <i>(update Jul 2013)</i> <i>based on GF-TADs Regional 5 year Action Plans</i>							Main focus on:
EUROPE	FMD	HPAI	PPR	Rabies	Brucellosis	CSF	ASF	FMD, Rabies, ASF
MID- EAST	FMD	HPAI	PPR	Rabies	RVF Sheep & Goat Pox	Brucellosis	BT Glanders	FMD, Brucellosis, RVF
AFRICA	FMD	ND	PPR	Rabies	RVF	CBPP	ASF	PPR, FMD, CBPP, RVF, Rabies
AMERICAS	FMD	HPAI		Rabies	CSF	BSE	NWS	FMD, CSF, Rabies, NWS, BSE
ASIA								
SAARC	FMD	HPAI	PPR					
ASEAN +3	FMD	HPAI		Rabies		CSF		
SPC	Preventive activities against TADs							
GLOBAL	FMD	HPAI	PPR	Rabies	RVF	RP	ASF	

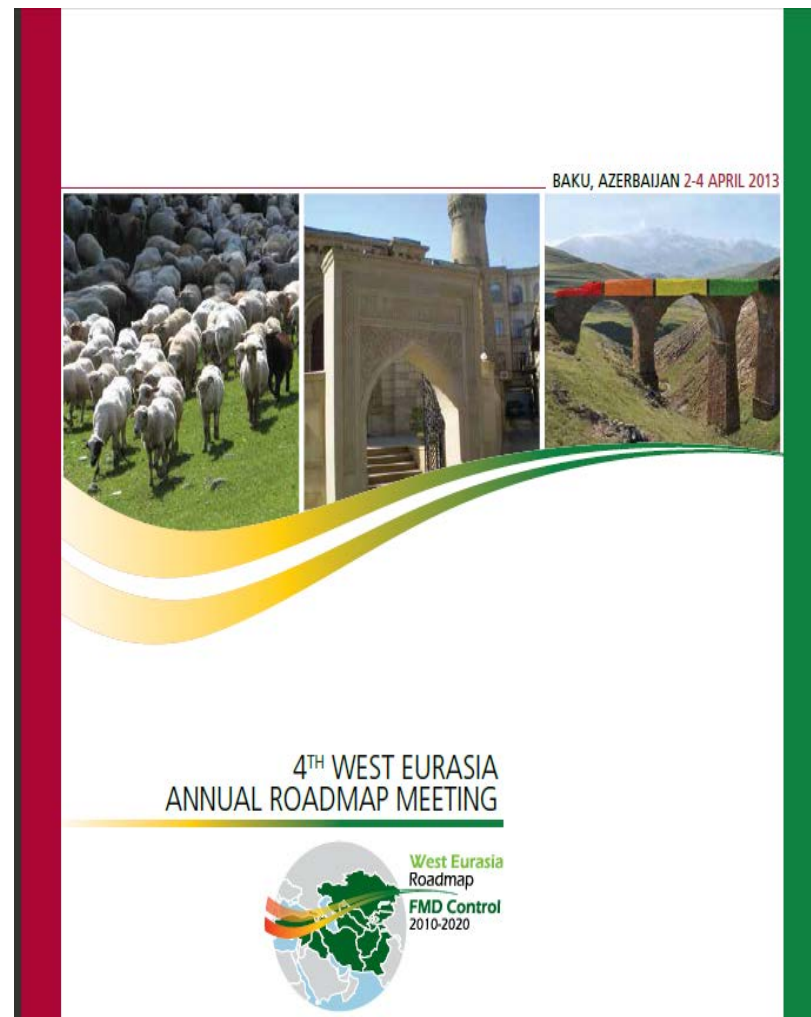


GF TADs Steering Committee Meetings since Baku, 2013

Global: Rome, Oct 2013

Regional:

- Africa: Accra
June 2013 (and July 2014)**
- Middle East: Amman
September 2013**
- Europe: Brussels
Oct 2013**
- Americas: Panamá
June 2011**
- Asia: 2012 (and July 2014)**



6th meeting of the GF-TADs Global Steering Committee (GSC6)

29-30 October 2013
Rome, Italy



GF-TADs

GLOBAL FRAMEWORK FOR THE
PROGRESSIVE CONTROL OF
TRANSBOUNDARY ANIMAL DISEASES



Activities

Meetings
organized by
the Global
Secretariat

- MC 6 [Rome, March 28, 2013]
- MC 7 [Paris, September 12, 2013]
- GSC6 [Rome, October 29-30, 2013]

GF-TADs
meetings
attended by
the Global
Secretariat

- RSC for Africa [Accra, 17-18 June 2013]
- RSC for Asia-Pacific [Tokyo, 17-18 July 2013]
- RSC for Mid-East [Amman, 22 Sep 2013]
- RSC for Europe [Brussels, 8-9 Oct 2103]

Activities (2)

Meetings under
GF-TADs flag or
contributed to

- Developing a Step-wise approach for **Rabies** prevention and control
[*Rome, November 6-8, 2012*]
- Inter-Regional Conference on **RVF** challenge, prevention and control
[*Mombasa, November 13-15, 2012*]
- 4th West Eurasia Annual **FMD** Roadmap Meeting [*Baku, April 2-4, 2013*]

Regional 5-year
Action Plans

Template and guidelines provided to set objectives and key progress indicators, to determine the disease control priorities and find sensible and cost-effective combinations of activities (ongoing)

Foot-and-Mouth Disease

Samia Metwally and Joseph Domenech

On behalf of

GF-TADs FMD Working Group

OIE

J. Domenech
N. Leboucq
V. Saraiva

FAO

S. Metwally
G. Ferrari
J. Pinto





African swine fever

29 October 2013

Daniel Beltran-Alcrudo
AGAH, FAO

6th meeting of the GF-TADs Global Steering Committee 111 Rome, Italy (29-30 October 2013)



Rinderpest Post Eradication

Samia Metwally
FAO Rinderpest co-Secretariat

Animal Health Service, AGA
FAO of UN, Rome, Italy

On behalf of
FAO-OIE Rinderpest Joint Secretariat

6th meeting of the GF-TADs Global Steering Committee 111 Rome, Italy (29-30 October 2013)



Sequential Approach to Identifying and Prioritizing of New Trans-boundary Animal Diseases (TADs) on a Regional/Sub-regional Basis under the GF-TADs

6th meeting of the GF-TADs Global Steering Committee 111 Rome, Italy (29-30 October 2013)

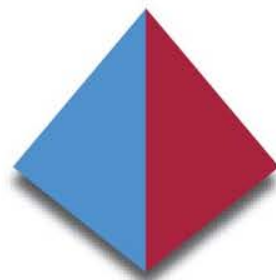


15 Recommendations on

- Collaboration, communication**
- Advocacy, joint approach to donors for resource mobilization**
- Alive partnership in Africa**
- 5 years Action Plan**
- Prioritizing process for TADs**
- Share of samples between Ref Laboratories**
- ASF Platform as GF TADs**
- PPR Global Strategy development**
- Wildlife and RVF be special issues at next GSC**

8th meeting of the GF-TADs Regional Steering Committee for Africa (SC8)

17-18 June 2013
Accra, Ghana



GF-TADs
GLOBAL FRAMEWORK FOR THE
PROGRESSIVE CONTROL OF
TRANSBOUNDARY ANIMAL DISEASES



**About 40 participants attended the meeting:
CVOs from African countries, international and
regional organizations, private sector and invited
experts**

Objectives of the meeting

**To present the regional situation for priority
diseases and themes:**

- FMD, PPR, RVF, ASF, CBPP, HPAI, Rabies,
trypanosomiasis,**
- GLEWS, OFFLU, CMC-AH, RAHCs**
- Alive, Vet Governance**

**To discuss major problems in preventing and
controlling diseases, governance aspects, 5 years
Action Plan, Vet Services.**

GF-TADs Financing state of play

Fulvio Biancifiori
Coordinator,
GF-TADs Global Secretariat



The Global FMD Control Strategy State of play after the Bangkok Conference

J Domenech
On behalf of the joint
FAO/OIE FMD Working Group



8th meeting of the GF-TADs Regional Steering Committee for Africa :: Accra, Ghana (17-18 June 2013)

Update regarding the PPR control strategy in Africa

J Domenech and Vincent Martin
On behalf of the joint FAO/OIE
GF TADs PPR Working Group



8th meeting of the GF-TADs Regional Steering Committee for Africa :: Accra, Ghana (17-18 June 2013)

CBPP , initiative and advocacy for a Conference

Concept note for a Regional Consultation
“Development of a Regionally Coordinated Strategy
for prevention and control of
Contagious Bovine Pleuropneumonia
in Africa”

Venue to be determined, last quarter 2013

Cheikh LY
FAO, RAF

Regional Networks and Programmes

Neo Mapitse
Sub Regional Representative for
Southern Africa

8th meeting of the GF-TADs Regional Steering Committee for Africa :: Accra, Ghana (17-18 June 2013)

22 recommendations on:

- **Rinderpest post eradication programme and resource mobilisation**
- **Advocacy the highest authority (Ministers / policy makers) to promote ownership of the GF TADs for Africa mechanism and its 5 year Action Plan**
- **Promotion of PCP and PVS Pathways**
- **Economic impacts of TADs**
- **Support to PPR Global Control Strategy preparation**
- **PANVAC and QC veterinary vaccines**
- **CBPP Control Pathway and ASF Control Strategy**
- **Rabies and RVF**
- **PVS Pathway and support through donors round tables to Veterinary Services**
- **Support of GF TADS from RECs and Alive**



6th meeting of the GF TADs Regional Steering Committee for the Middle East

**September 22nd 2013
Amman, Jordan**

**About 20 participants attended the meeting:
CVOs from the Middle East, international
and regional organizations, private sector
and invited experts**

Objectives of the meeting

**To present the regional situation for priority
diseases and other emerging diseases:
FMD, PPR, Glanders, Brucellosis, LSD,
MERS-CO**

**To discuss major problems in preventing and
controlling diseases, governance aspects,
5 years Action Plan, Vet Services.**



Emerging zoonoses in the region: Brucellosis in the Middle East

Juan Lubroth, Markos Tibbo, Ahmed
Elldrissi, Nacif Rihani & Fulvio Bianciffiori

*Food and Agriculture Organization of the
United Nations*

6th meeting of the GF-TADs Regional Steering Committee for the Middle East :: Amman, Jordan (22 September 2013)

Update on Foot and mouth disease Including Regional Road Maps

Joseph Domenech, OIE
on behalf of the joint FAO/OIE
GF TADs PPR Working Group

**6th meeting of the GF TADs Regional Steering
Committee for the Middle East**
September 22nd 2013, Amman, Jordan

Update on Peste des Petits Ruminants

Joseph Domenech, OIE

on behalf of the joint FAO/OIE
GF TADs PPR Working Group

**6th meeting of the GF TADs Regional Steering
Committee for the Middle East**
September 22nd 2013, Amman, Jordan

Emerging zoonoses in the region: Respiratory Syndrome Coronavirus (MERS-CoV) in the Middle East

Juan Lubroth, Markos Tibbo, Ahmed
Elldrissi, Nacif Rihani & Fulvio Bianciffiori

*Food and Agriculture Organization of the
United Nations*

6th meeting of the GF-TADs Regional Steering Committee for the Middle East :: Amman, Jordan (22 September 2013)



Recommendations on:

- Governance of the GF TADs for the Middle East
- 5 Years Action Plan
- Support to strengthening Veterinary Services
- Prevention and control of priority diseases in the Middle East:
FMD, PPR, RVF, Brucellosis, LSD, MERS-CoV
- Possible addition of Rabies in the list of priority diseases



GF-TADs

GLOBAL FRAMEWORK FOR THE
PROGRESSIVE CONTROL OF
TRANSBOUNDARY ANIMAL DISEASES



Oie



5 th meeting of the GF TADs Regional Steering Committee for Europe

October 8th-9th 2013

Brussels, Belgium

**About 20 participants attended the meeting:
CVOs and representatives from European
countries, European Commission, international
and regional organizations, private sector
and invited experts**

Objectives of the meeting

**To present the regional situation for priority
diseases and emerging diseases:**

**FMD, ASF, Rabies, PPR, CSF, HPAI
Schmallenberg emergence, Brucellosis**

**To discuss governance aspects, 5 years Action
Plan, Vet Services reinforcement.**

GF-TADs for Europe

Fifth Steering Committee meeting (RSC5)

Terms of Reference of the GF-TADs for Europe bodies

AFSCA - Brussels – October 8 – 9 2013

N. Leboucq

OIE sub-regional Representative in Brussels
GF-TADs for Europe Secretariat



5th meeting of the GF-TADs Regional Steering Committee for Europe in Brussels, Belgium (8-9 October 2013)

Fifth GF-TADs for Europe Steering Committee meeting (RSC5)

FAO assistance to prevent and control
African Swine Fever(ASF)

Andriy Rozstalnyy

FAO Regional Office for Europe and Central Asia



Veterinary Emergency Intervention

Tool for disease control

GF-TADs for Europe
Brussels 8-9 October 2013

Alberto Laddomada
Head of Unit G2 – Animal Health
Directorate-General for Health and Consumers
European Commission, Brussels

This presentation does not necessarily represent the views of the European Commission

GF-TADs for Europe Fifth Steering Committee meeting (RSC5)

Report on the OIE PVS Pathway

AFSCA, Brussels – October 8-9 2013

Dr Monique Eloit
Deputy Director General of the OIE



GF-TADs

GLOBAL FRAMEWORK FOR THE
PROGRESSIVE CONTROL OF
TRANSBOUNDARY ANIMAL DISEASES



Oie

GF-TADs for Europe

Fifth Steering Committee meeting (RSC5)

New OIE Chapter on Classical Swine Fever

AFSCA, Brussels – October 8-9 2013

Dr Mara GONZALEZ

Deputy Head of the Regional Activities Department, OIE



GF-TADs

GLOBAL FRAMEWORK FOR THE
PROGRESSIVE CONTROL OF
TRANSBOUNDARY ANIMAL DISEASES



Oie



The FAO/OIE FMD Global Control Strategy

**Joseph Domenech, OIE
on behalf of the joint FAO/OIE
GF TADs PPR Working Group**

**5 th meeting of the GF TADs Regional Steering
Committee for Europe**

October 8th-9th 2013, Brussels, Belgium



TAIEX



EU2013.LT



GF-TADs

GLOBAL FRAMEWORK FOR THE
PROGRESSIVE CONTROL OF
TRANSBOUNDARY ANIMAL DISEASES



Oie

TAIEX Seminar on Strengthening and Adaptation of the Preventive Measures to the Existing Risk of ASF and CSF introduction into the EU

Žilvinas Ilevičius,

Veterinary attaché

Permanent Representation of Lithuania to the EU

Vilnius, Lithuania

3-4 September 2013



EU2013.LT



Recommendations on:

- Governance Mechanisms of GF-TADs for Europe**
- Strengthening Veterinary Services**
- Enhancing prevention and control of priority diseases in Europe: FMD, ASF, PPR, CSF, Rabies, HPAI, Brucellosis, Rinderpest**
- Roles of the CMC-AH and the EU Veterinary Emergency Team mission**



GF-TADs

GLOBAL FRAMEWORK FOR THE
PROGRESSIVE CONTROL OF
TRANSBOUNDARY ANIMAL DISEASES



**Thank you for
your attention**

Photos: credit Iran Vet. Assoc.

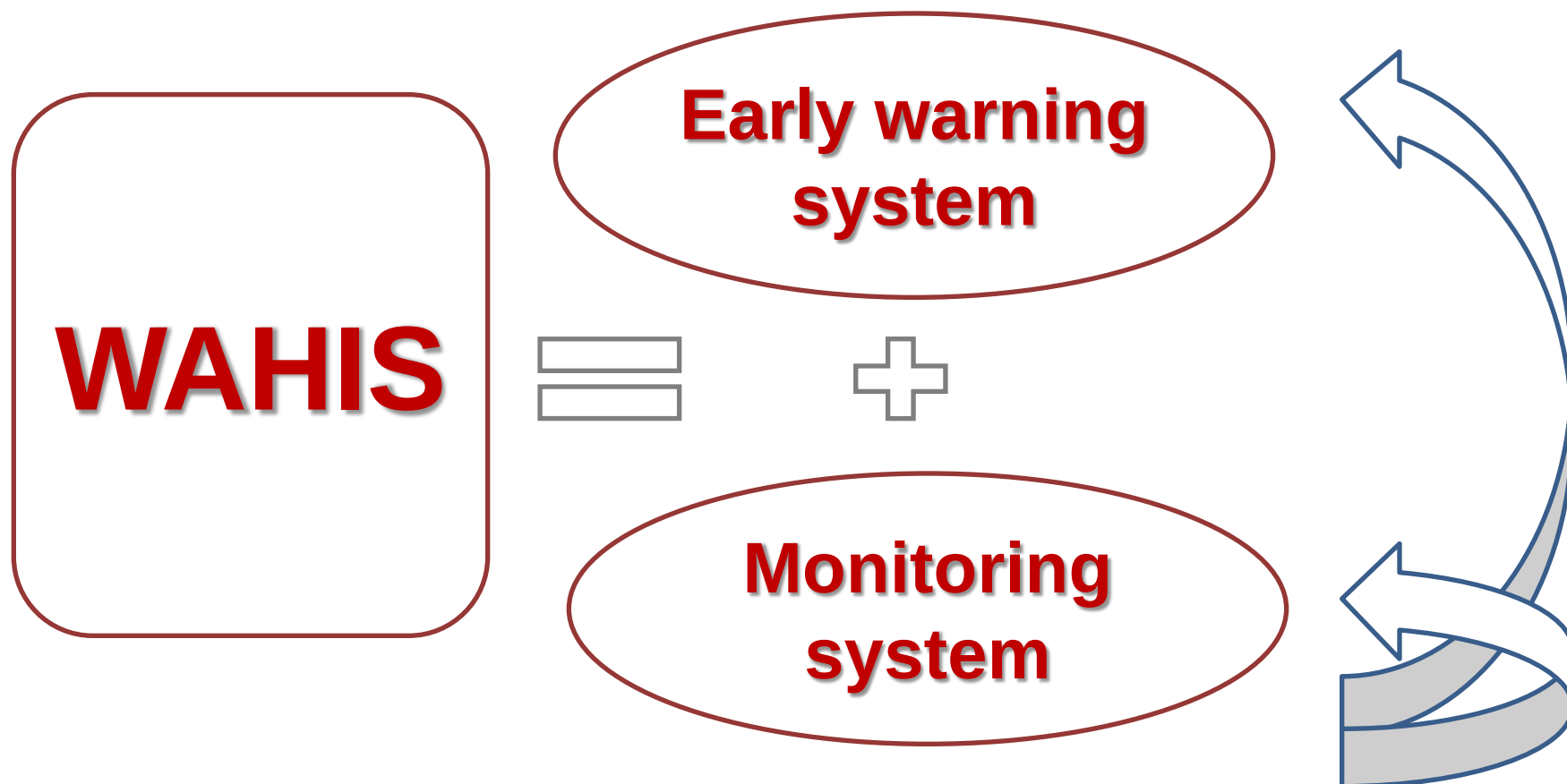


Part 2: Updates on the World Animal Health Information System (WAHIS)

Legal obligation of notification
Article 1.1.3. of the
Terrestrial Animal Health Code

**OIE Listed diseases and
emerging diseases**

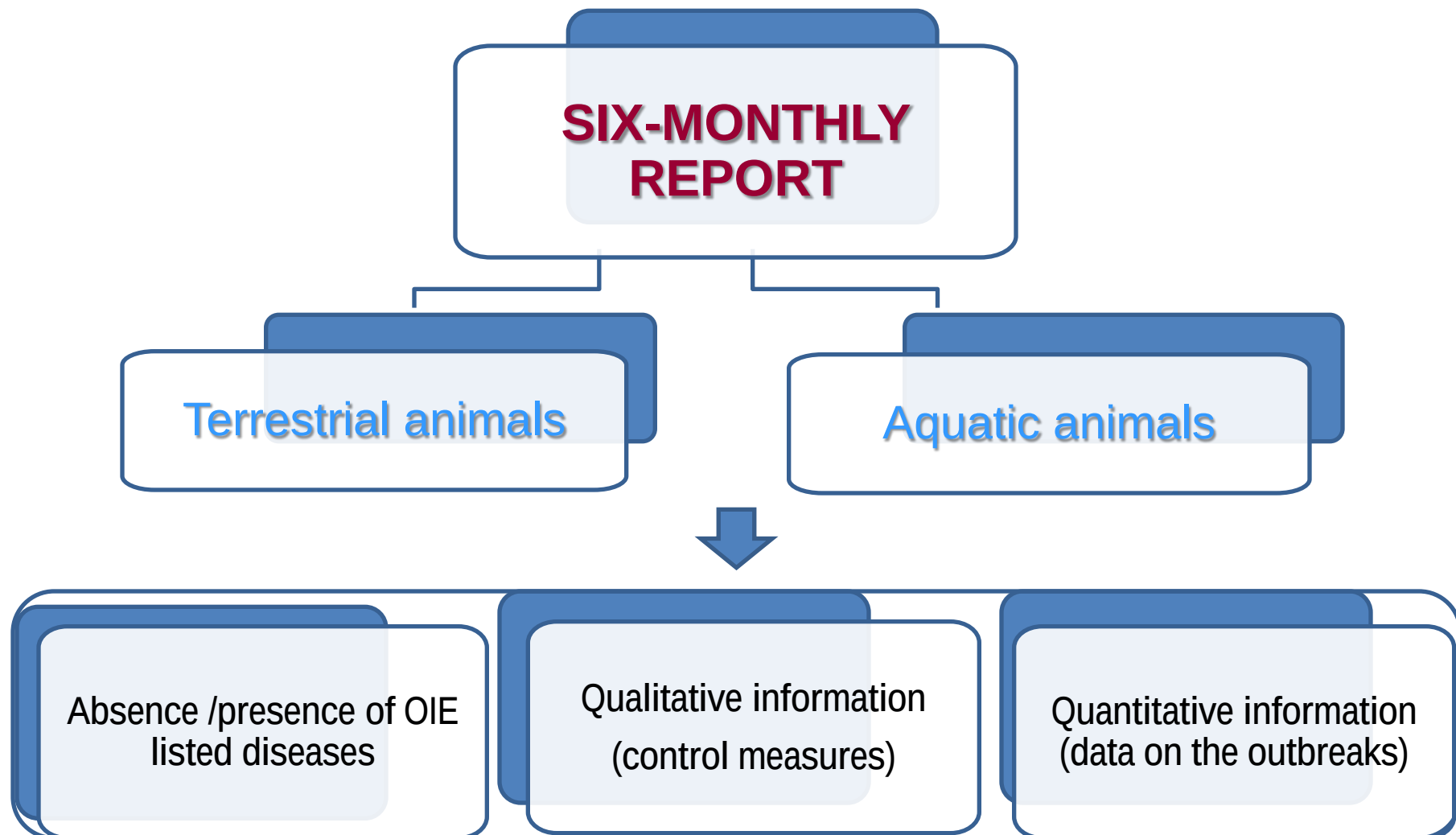
WORLD ANIMAL HEALTH INFORMATION SYSTEM



OIE's monitoring system

**To monitor OIE Listed diseases
(presence or absence) over time**

- **Six-monthly report**
- **Annual report**



OIE's early warning system

International alert messages

Rapid response

- **Immediate notification**
of disease, infection or unusual epidemiological events
- **Weekly reports**
Follow-ups to the immediate notification
- **Final report**
 - if the outbreaks have ended
 - if the situation becomes endemic

WAHIS II - New version, new functions

✓ More flexibility

- ✓ Two **separate reports** for terrestrial and aquatic animal diseases
- ✓ Notify **monthly information** on selected present diseases during an on-going semester

✓ More accuracy

- ✓ Possibility to identify affected wild species by **family, Latin and common names**, in replacement of the generic “Fauna”
- ✓ Two new **occurrence codes** have been introduced to better consider the distribution of the disease (Zones)
- ✓ Verification and update of WAHIS countries/territories first administrative divisions **maps**

✓ More user friendly

- ✓ Possibility to notify **clusters of outbreaks**
- ✓ An **upload** function was added to facilitate quantitative data reporting (all report types)
- ✓ **Control measures filtered and specific to each disease** on the reporting forms

WAHIS II

Differentiation of the occurrence codes (domestic & wild when relevant)

Codes indicating disease presence

- +** *Confirmed clinical disease*
- +()** *Confirmed clinical disease limited to one or more zones of the country*

Codes indicating the presence of the infection/infestation

- +?** *Confirmed infection/infestation but no clinical disease*
- +?()** *Confirmed infection/infestation limited to one or more zones of the country, but no clinical disease (NEW)*

Code indicating disease absence

- *Disease not reported during this period*
- 0000** *Disease never reported*

Other codes

- ?** *Presence of the disease suspected but not confirmed*
- ? ()** *Suspicion in a zone (NEW)*
- ...** *No information available*



OIE Wildlife Disease Monitoring System



Historical Background

- Since 1993, the OIE has starting collecting data on wildlife using an annual questionnaire
- Since 2008, the questionnaire and disease names have been harmonized with WAHIS using an annual template divided in two six-month periods
- In August 2012 the Excel Questionnaire has been replaced by a new application for notification of specific diseases in wild animals

Wild annual report: *WAHIS-Wild*

Divided in two sections:

– **OIE-listed diseases in wild species**

- Already entered in the six-monthly reports and automatically transferred into the draft annual wildlife report
- Checked, corrected and completed if needed by the focal point for wildlife
- Changes have to be agreed by Delegate
- Data displayed on WAHID www.oie.int/wahid

Obligatory

– **Non OIE-listed wildlife diseases**

- To be processed by the focal point for wildlife
- Data will be displayed on *WAHIS-Wild* Interface www.oie.int/wahiswild

Voluntary

Transparency:
the OIE historical
mandate

Notification:
Member Country's
obligation

WAHIS/WAHID

The Tool to
collect and
release the
information

Continuous improvements to consider the need / request of the users



WORLD ORGANISATION FOR ANIMAL HEALTH
Protecting animals, preserving our future

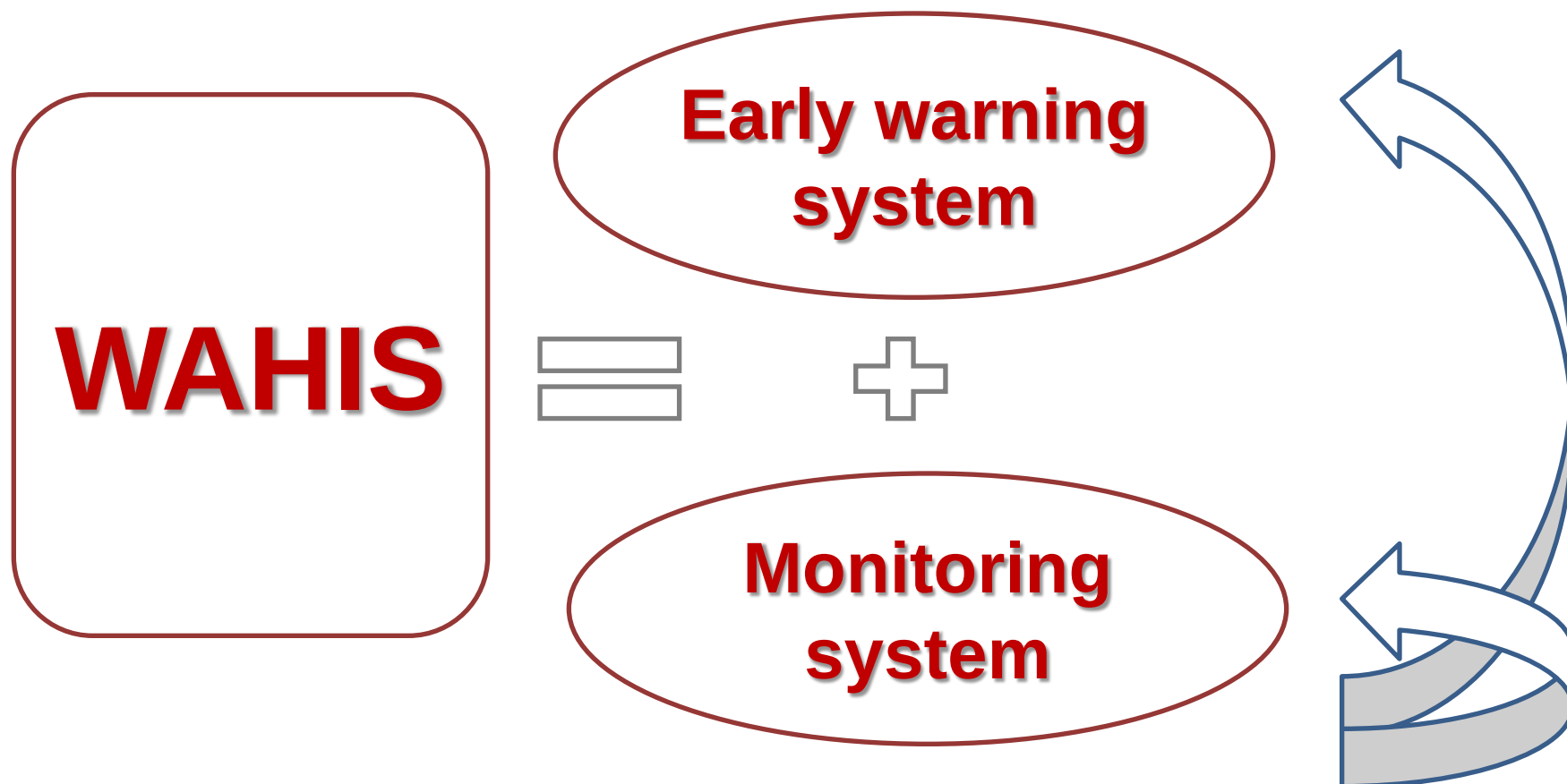


Part 2: Updates on the World Animal Health Information System (WAHIS)

Legal obligation of notification
Article 1.1.3. of the
Terrestrial Animal Health Code

**OIE Listed diseases and
emerging diseases**

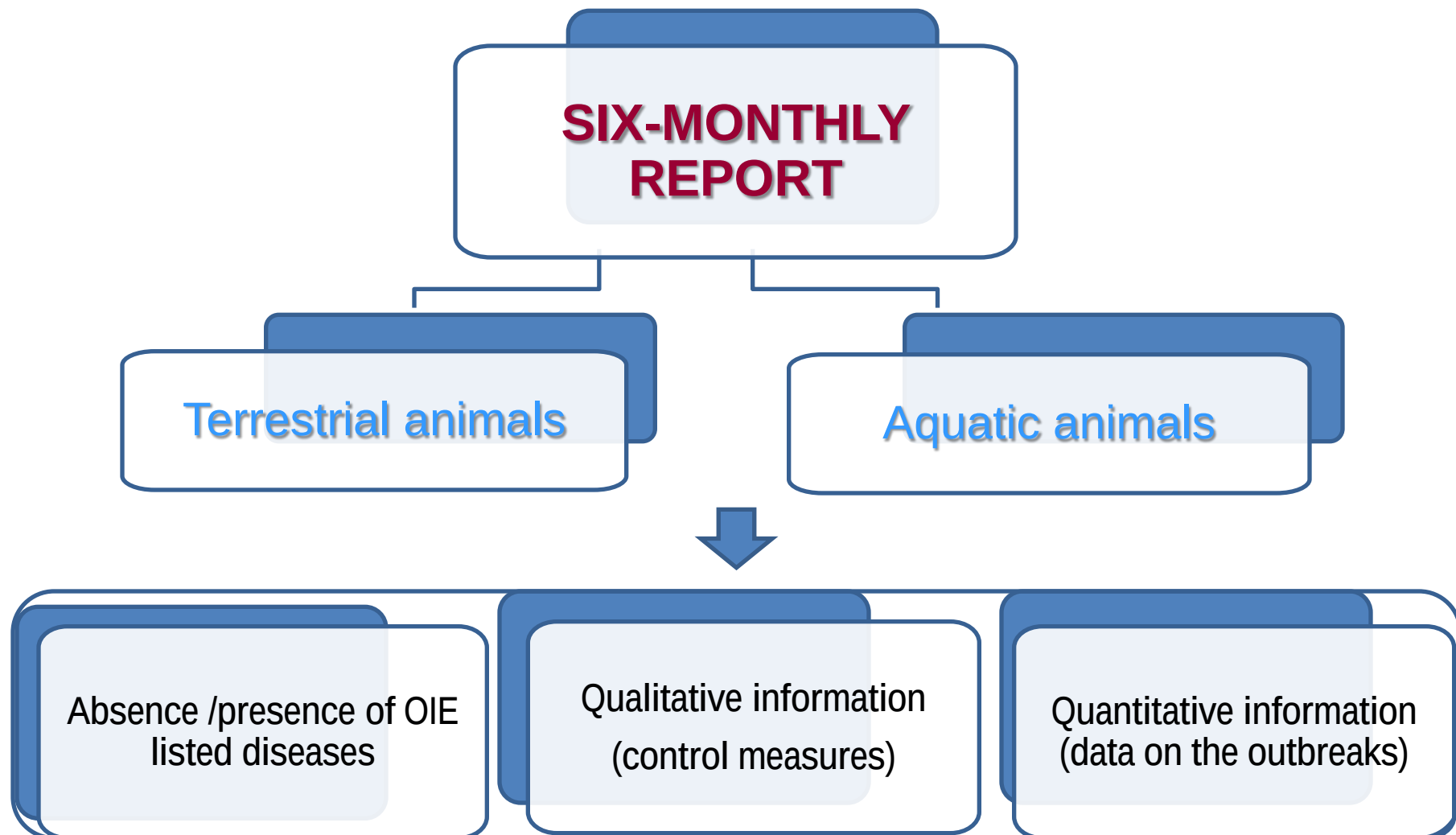
WORLD ANIMAL HEALTH INFORMATION SYSTEM



OIE's monitoring system

**To monitor OIE Listed diseases
(presence or absence) over time**

- **Six-monthly report**
- **Annual report**



OIE's early warning system

International alert messages

Rapid response

- **Immediate notification**
of disease, infection or unusual epidemiological events
- **Weekly reports**
Follow-ups to the immediate notification
- **Final report**
 - if the outbreaks have ended
 - if the situation becomes endemic

WAHIS II - New version, new functions

✓ More flexibility

- ✓ Two **separate reports** for terrestrial and aquatic animal diseases
- ✓ Notify **monthly information** on selected present diseases during an on-going semester

✓ More accuracy

- ✓ Possibility to identify affected wild species by **family, Latin** and **common names**, in replacement of the generic “Fauna”
- ✓ Two new **occurrence codes** have been introduced to better consider the distribution of the disease (Zones)
- ✓ Verification and update of WAHIS countries/territories first administrative divisions **maps**

✓ More user friendly

- ✓ Possibility to notify **clusters of outbreaks**
- ✓ An **upload** function was added to facilitate quantitative data reporting (all report types)
- ✓ **Control measures filtered and specific to each disease** on the reporting forms

WAHIS II

Differentiation of the occurrence codes (domestic & wild when relevant)

Codes indicating disease presence

- +** *Confirmed clinical disease*
- +()** *Confirmed clinical disease limited to one or more zones of the country*

Codes indicating the presence of the infection/infestation

- +?** *Confirmed infection/infestation but no clinical disease*
- +?()** *Confirmed infection/infestation limited to one or more zones of the country, but no clinical disease (NEW)*

Code indicating disease absence

- *Disease not reported during this period*
- 0000** *Disease never reported*

Other codes

- ?** *Presence of the disease suspected but not confirmed*
- ? ()** *Suspicion in a zone (NEW)*
- ...** *No information available*



OIE Wildlife Disease Monitoring System



Historical Background

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Vaccination questionnaire results

West Eurasia Roadmap meeting

Astana

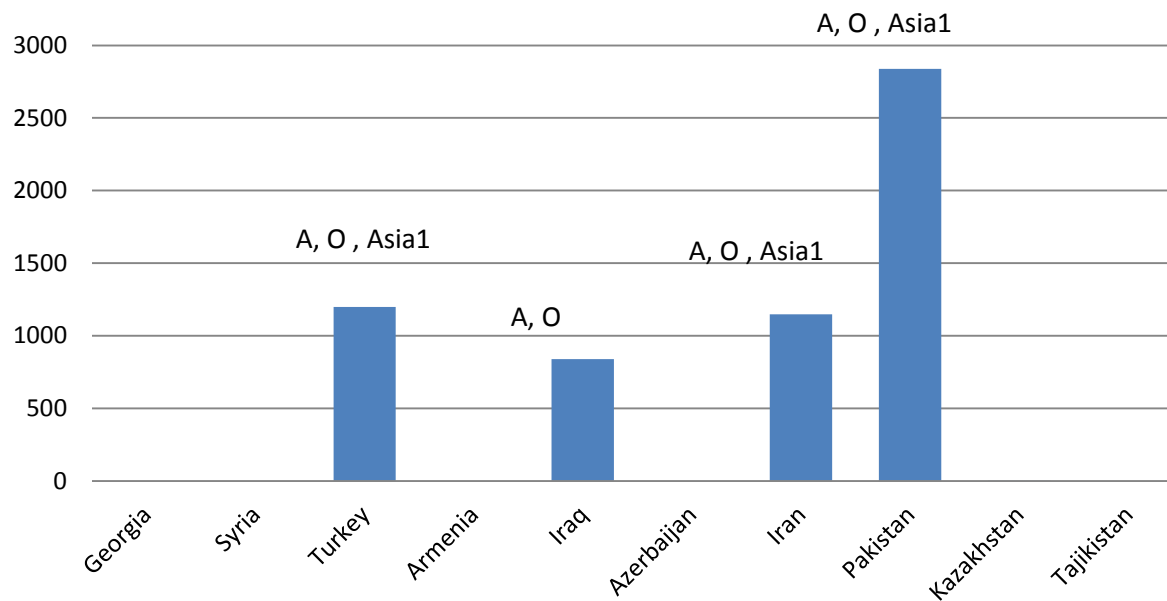
23-24 February 2014



Context

- Responses from 10 countries

FMD cases reported in 2013

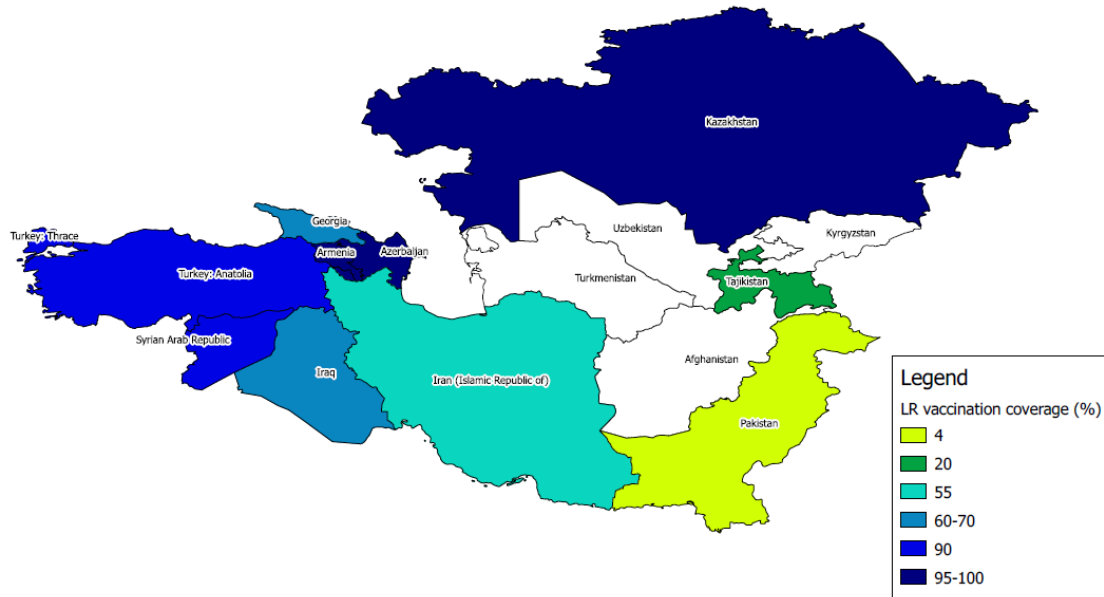




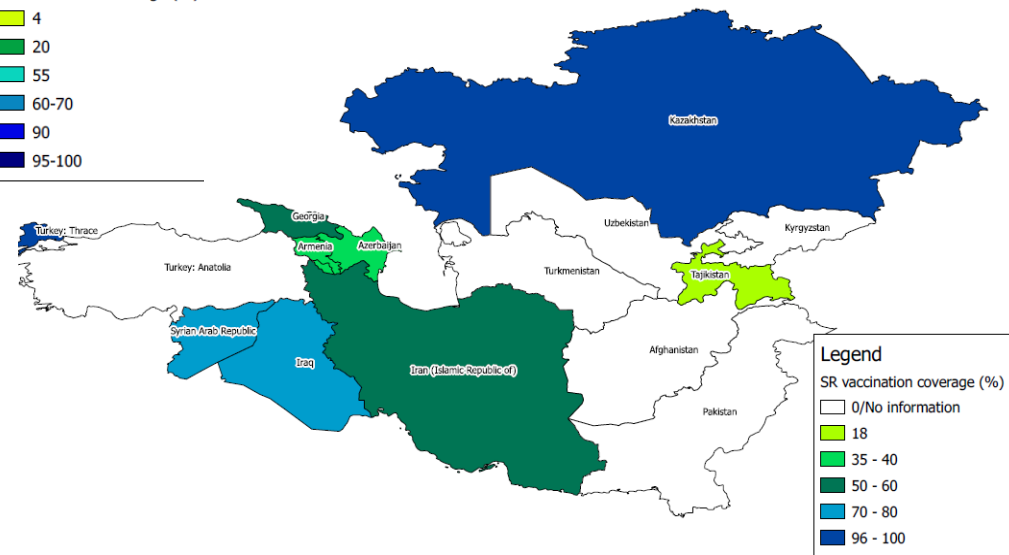
- Vaccination compulsory:
 - 8/10 countries for cattle
 - 7/10 countries for small ruminants
- Mass vaccination campaigns:
 - 7/10 countries for LR, mostly twice per year
 - 6/10 countries for SR, 1-2 times per year
- Ring vaccination around outbreaks
 - 7/10 countries for LR and SR

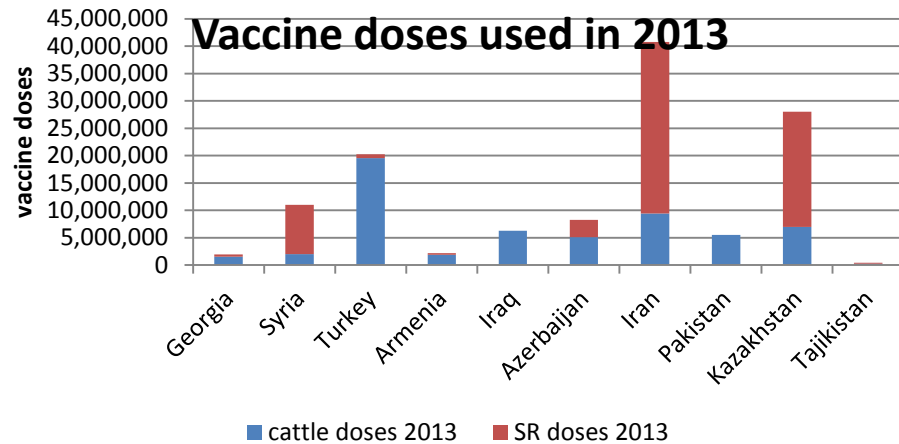


Reported Large Ruminant Vaccination Coverage 2013



Reported small ruminant vaccination coverage (2013)





	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan
Kazakhstan													
Kyrgyzstan													
Tajikistan													
Turkmen													
Uzbekistan													
Afghanistan													
IR of Iran													
Pakistan	On Farmer demand												
Turkey													
Syria													
Iraq													
Armenia													
Azerbaijan													
Georgia													



- Methods reported for monitoring vaccination were:
 - serological surveys (6 countries),
 - telephone (2 countries),
 - records (2 countries),
 - random farm visits (2 countries)
 - outbreak investigation (1 country),
 - clinical surveillance (1 country)
- 4/10 countries report having vaccine matching results from circulating field strains



- Vaccines used
 - 13 different suppliers
 - Merial, MSD Intervet, Russia, Czech Republic, India, national (Turkey, Iran, Kazakhstan, Pakistan)

Serotype 0	Serotype A	Serotype Asia1
O PanAsia2 (O Tur07)	A Iran05 (A Tur06)	Sindh08
O PanAsia2 (O Tur05 2009)	A TUR20 2006	Shamir
O1 Manisa, O-3039	A Iran 05	Georgia2001



Baku Meeting recommendation:

“... the most appropriate vaccines for current risk in the region and recommended for use in 2013 are: for **type O, PanAsia2 or O Manisa in combination with O 4625/O 3039**; for type A, **A Tur 06, A Iran 05, A22 Iraq**; for Asia 1, **Tur11 or Shamir at a PD50 of 6 or greater.....”**



WEST EURASIA LABORATORY NETWORK FOR FMD WELNET-FMD

A. Naci BULUT

Şap Institute, Ankara

Leader of WELNET FMD



VISION OF WEST EURASIA ROADMAP FOR CONTROL OF FMD

«Regional cooperation among West Eurasian countries for the progressive control of FMD through public and private partnerships leading towards freedom of clinical disease by the year 2020 for regional economic development, food security, and property alleviation.»



VISION OF WELNET FMD

- In the 1st Regional Workshop (Istanbul, October 2009):
 - it was recommended to establish a laboratory network under the West Eurasia Roadmap Organization.
- Objective:
 - promote better communication, improvement early detection, diagnostic capacity and performance of laboratories and also implementing a system for proficiency testing



ACTIVITIES ACHIEVED

- The West Eurasia Roadmap has made good progress along the four years:
- -better awareness of the FMD risks
- -progress in many countries
- -identifying "new epidemic events" at an earlier point
- -countries increasingly use PCP as tool in identification of gaps and for FMD control
- -training for capacity building for diagnosis and epidemiology skill to understand the disease
- -many project and support carried out by EUFMD
- -developing the Guidelines for assessment of Stages in the

PCP



Activities achieved by WELNET

- Training on Diagnosis of FMDV in 2010
 - Armenia, Azerbaijan, Georgia and Iran
- Teleconference meeting
 - Between Iran, Turkey, Pakistan and FAO-EuFMD-International Institutes
- Practical Epidemiology for Progressive Control(PEPC) training
 - Iran, Azerbaijan, Armenia, Georgia, Egypt and Turkey in 2012
- Early Detection Activity: One unique example
 - samples were received from Iraq on November 2012
 - Results for serotyping and sequencing including detail report were provided a few days by Şap Institute
 - This is a good example to speed up early detection; allowing CVOs valuable and in time information so that they learn upcoming risk and act in time and; needs extent all the region and regular base



GAPS IDENTIFIED IN PREVIOUS YEAR

- ***EARLY DETECTION***
- ***BETTER COMMUNICATION & SHARING INFORMATION***
- ***PERFORMANCE OF LABORATORY, and TEST METHODS***
- ***HARMONIZATION TEST METHODS***
- ***INSUFFICIENT VACCINE MATCHING TESTING***



PROPOSAL LEAD TO OUR DISCUSSION

- TO PROMOTE BETTER COMMUNICATION
 - WEBINAR
- TO ESTABLISH EARLY DETECTION SYSTEM
 - Agreement between endemic countries –sending regular samples from outbreaks in time to regional laboratory
 - To maintain a system providing serotyping, genetic analysis and vaccine matching results in time and regular base
- To enhance capacity on diagnosis and disease investigation:
Real Time Training Course- already planned to be held on June in Erzurum
- TO MONITOR LABORATORY CAPACITY-
- TO MONITOR LABORATORY TESTING PERFORMANCE
- AND ELSE....??

– ***Open discussion to create a better system***



Feedbacks group work for WELNET FMD



- **WEBINAR**

- Discussed

- format and manner
 - Context

Format

- Agreed on two options

1. Selecting one topic each month and reviewed and reported end of month
2. On an identified topic, in a fixed day managing seminar like teleconference

Context

Lots of topics:

- vaccine and vaccination, vaccination monitoring movement, anm market, early detection
- formulation to evaluate current epidemiological event:

Requirement: need a MoU for agreement for sharing information and data



Early detection system

- Agreement on sending isolates for serotyping, molecular analysis and vacc. Matching in each month
- Requirement:
 - need preparation a SOP on documentation, shipment and packaging
 - Simplify Import licence issue
 - Establish a system for customs clearance and transportation
 - Budget for transportation



Survey on market price meat and live animal

- To follow-up and evaluate animal movement direction and pattern:
 - Need a survey system at least each month
 - Live animal price on big city market
 - Live animal price in rural area market
 - Meat price in big cities
 - Meat price in rural area
 - differences between regions



NSP residue in vaccine used in the region

Rised topic to discuss

- NSP prevalence is one of important indicator for monitoring the control policy
- Vaccine producer should be ensured that their vaccine is clean for residue of NSP of FMDV

Discussion points

- since some countries still are stage 1, this is not crucial priority
- this is critical issue for cridebility of surveillance results, it needs a standard and limitation

Proposal: helding a workshop on residue of NSP



Other topics discussed

1. Real time training course

- Agreement on support for implementation the training course

2. Definition of data and information for vaccine on market

- All producer should submit potency data and strains contained the vaccine

Recommendation

Preparation a template for tender technical specification to describe which data and information needs for marketing vaccine



Focal point

- Creating a focal point for each country
 - a better communication



Emma Fishbourne

WRLFMD Team: Donald King, David Paton, Valerie Mioulet, Nick Knowles, Anna Ludi, Ginette Wilsden, Bryony Armson, Pip Hamblin, Kasia Bachanek-Bankowska, Kelly Adams, Jemma Wadsworth, Begoña Valdazo-González, Britta Wood, Barsha Thapa, Alison Rand, Ashley Gray, Bob Statham, Abid Bin-Tarif, Trish Ryder, Sarah Belgrave



Department
for Environment
Food & Rural Affairs



FMD and SVD
Reference Laboratories

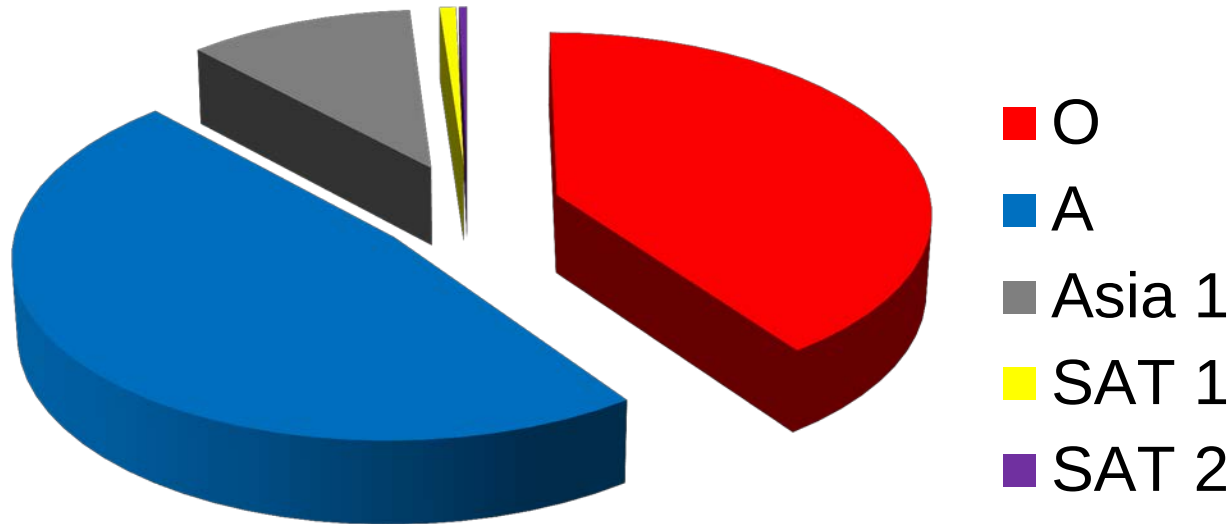


The Pirbright Institute receives strategic funding from BBSRC.

www.pirbright.ac.uk

Recent Submissions

- Jan – Dec 2013: 401 samples
- 259 isolates
- Represent 5 FMDV serotypes:

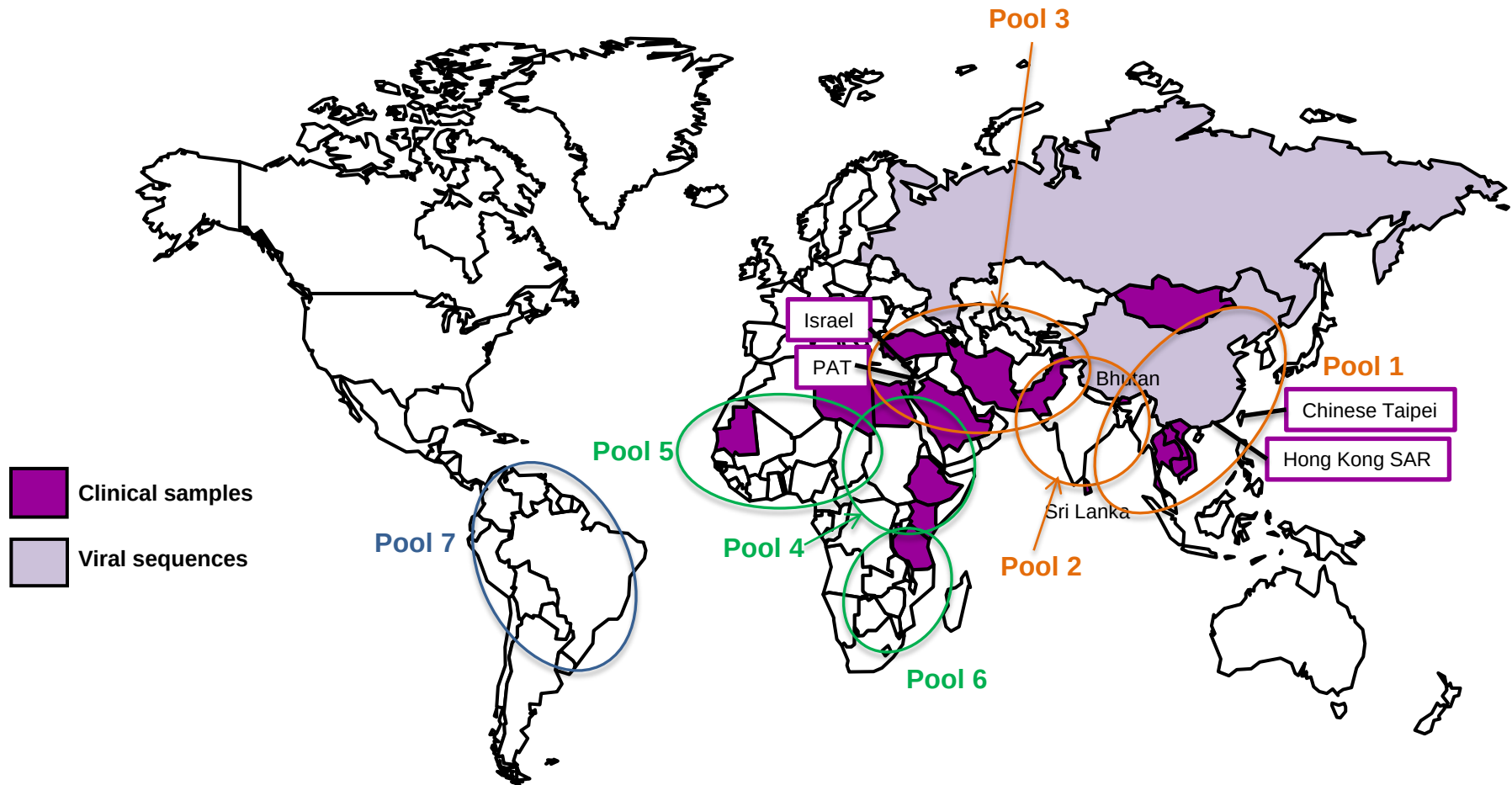


- No virus isolated 32.4% of samples
- RT-PCR negative in 17.7% samples
- No serotype C since 2004

Global Sampling: 2013

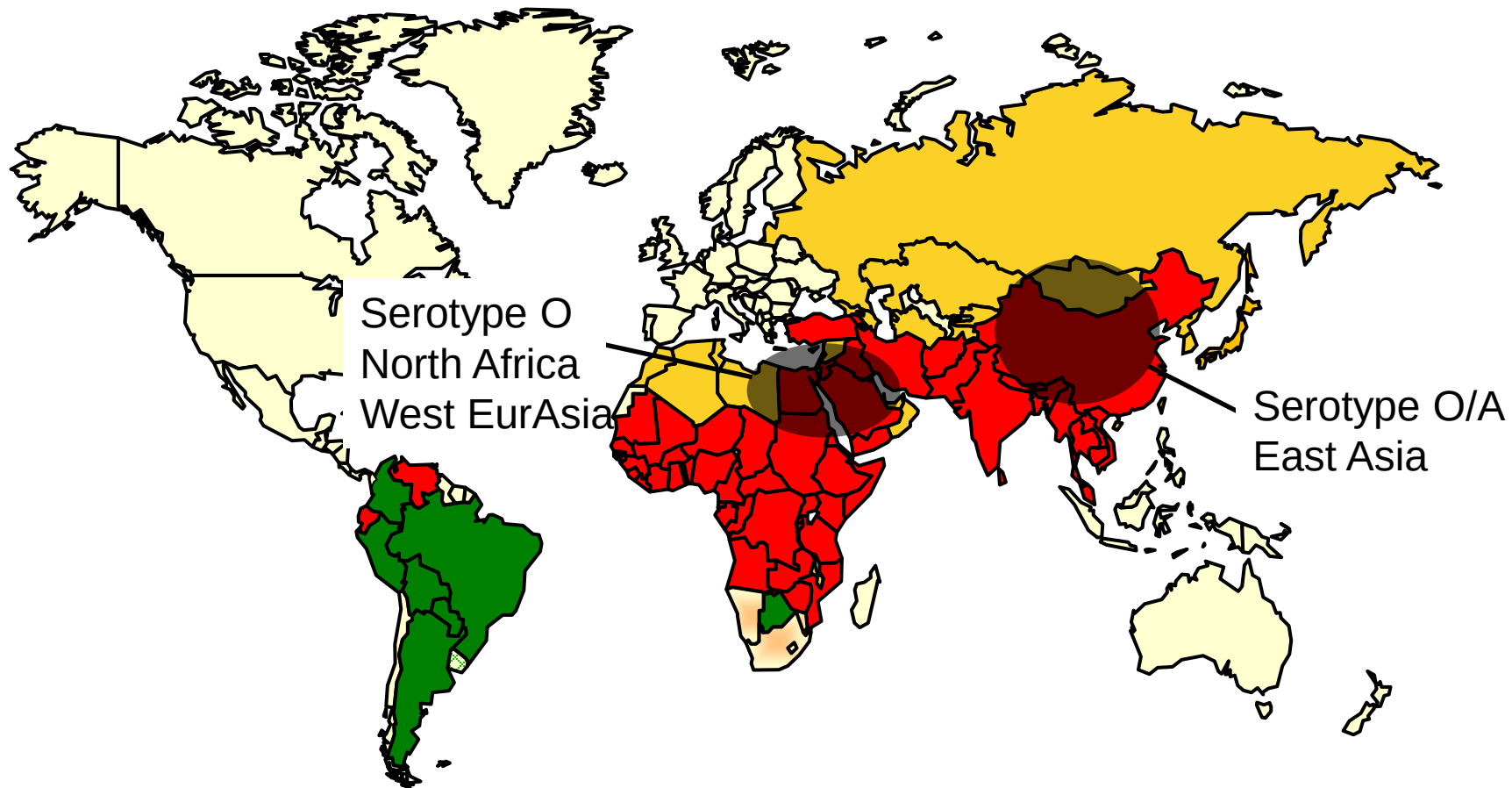
Countries Sending Samples to FMD Reference Laboratory

January 2013 - December 2013



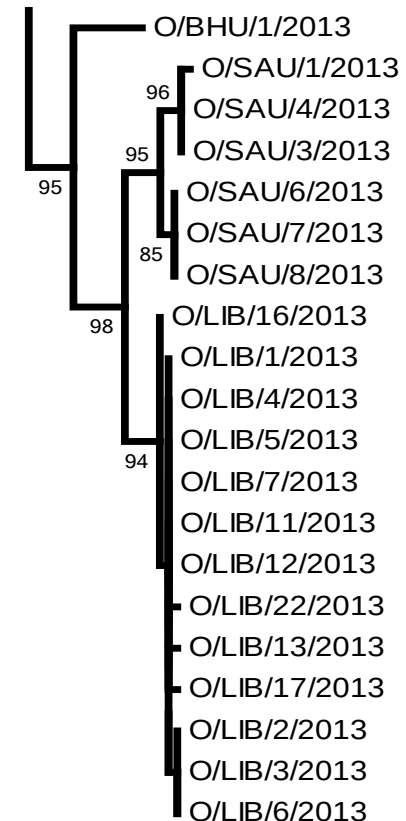
Reports for these samples can be found at www.wrlfmd.org

2013-2014: Changing patterns and threats



Changing global patterns: Serotype O from Indian sub-continent in Libya and Saudi Arabia

- Recent reports
 - Samples collected in Libya in Sept/Oct 2013
 - Samples collected in Saudi Arabia in Aug/Nov 2013
 - Samples from UAE received during Jan 2014
 - Samples from Nepal in 2014
- O/ME-SA/Ind-2001 lineage most closely related to viruses from Bhutan, Nepal and India
- O/ME-SA/Ind-2001 lineage normally restricted to the Indian sub-continent



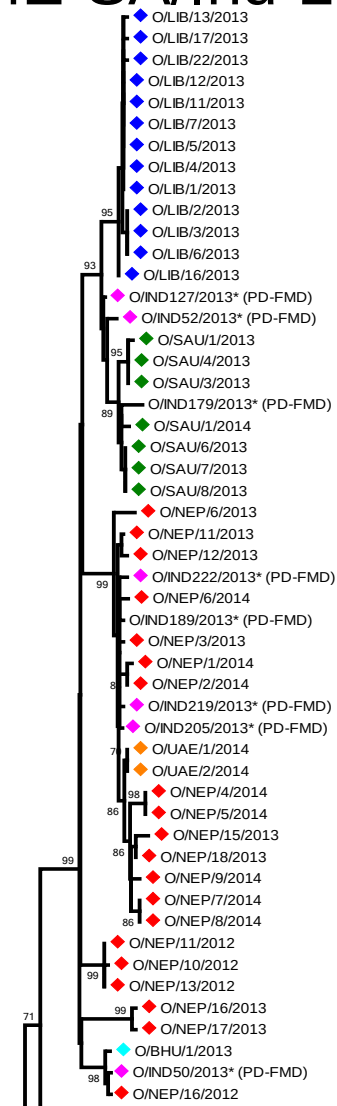
Dr Ibrahim Eldaghayes



OIE/FAO FMD Lab Network in action:

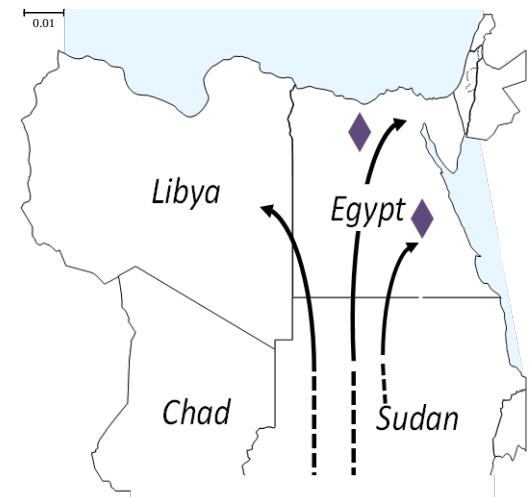
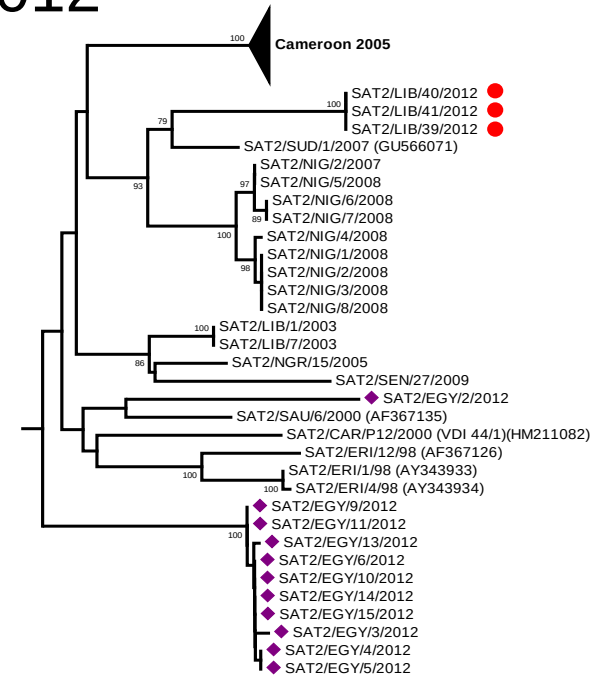
Sharing samples and sequence data - O/ME-SA/Ind-2001

- Involved PD-FMD (Mukteswar), IZSLER (Brescia) and Pirbright
- Indicates multiple independent introductions of this lineage from the Indian sub-continent
- Reports provided to OIE, FAO and local authorities (can be found at: www.wrlfmd.org)



Pool 3: Changing global patterns: serotype SAT 2 in North Africa during 2012

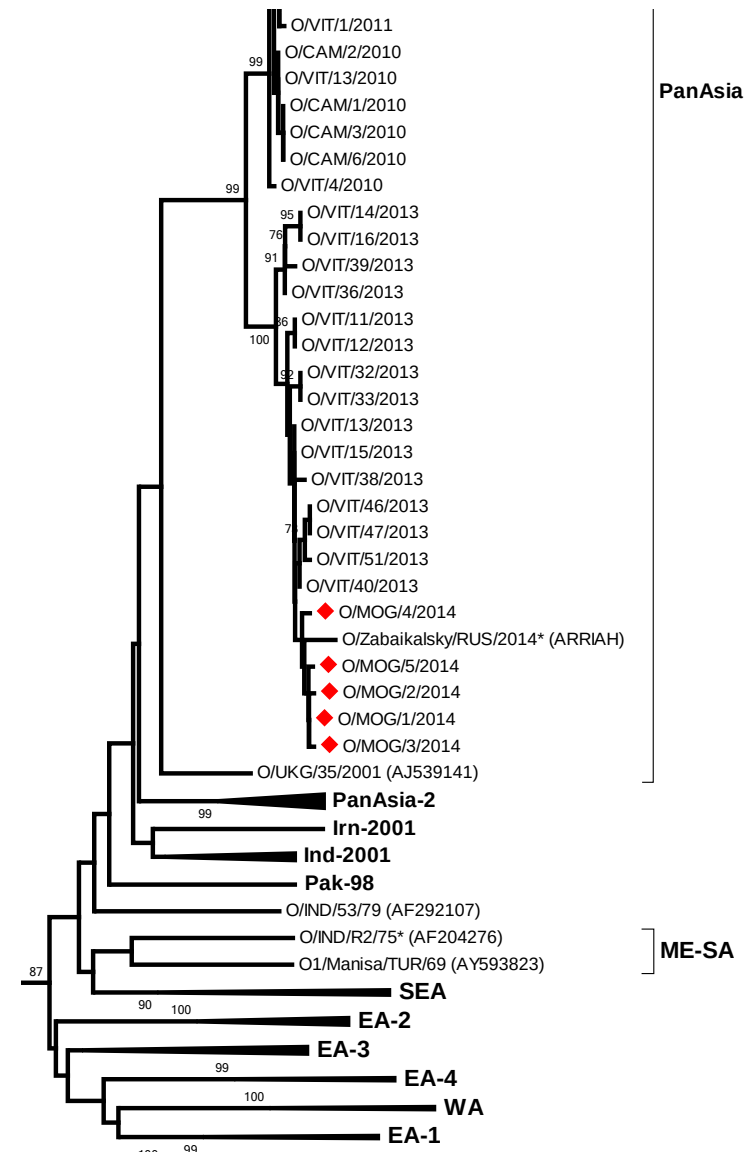
- First FMD cases in Egypt due to serotype SAT 2 since 1950
- Sequence data supported at least two introductions of SAT 2 FMDV into Egypt
Within SAT 2 topotype VII
- Distinct from other contemporary SAT 2 lineages in the Middle East and North Africa
 - topotype VII from Libya
 - topotype IV from Bahrain



Pool 1: O/ME-SA/PanAsia

Recent detection in the Russia Federation and Mongolia

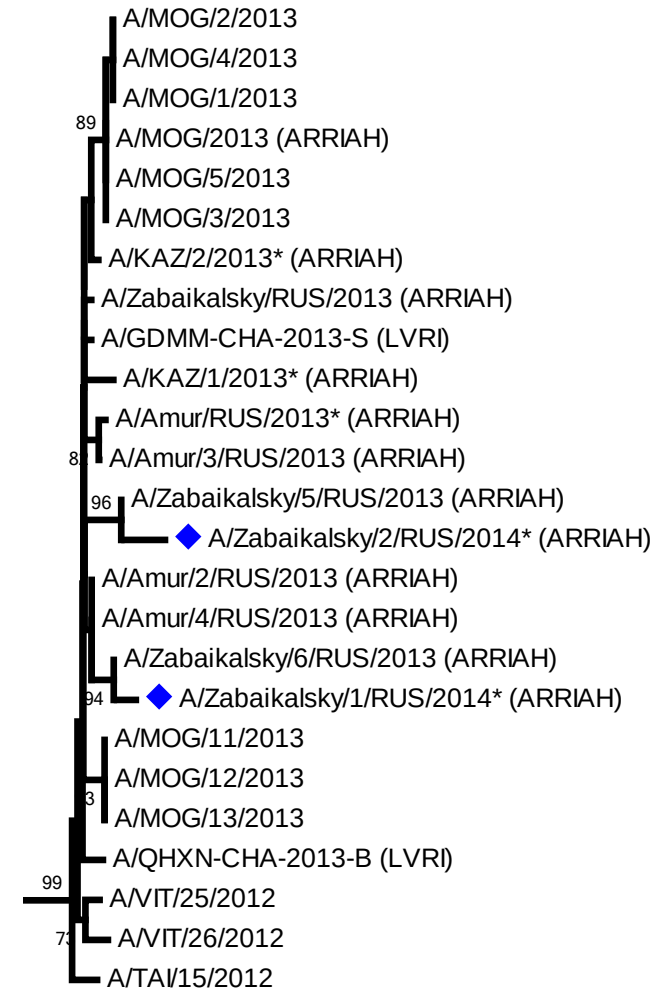
- Recent samples from Mongolia
- Sequences from ARRIAH
 - Outbreaks during 2014 in Eastern Russia (Zabaikalsky)
- O/ME-SA/PanAsia
not O/SEA/Mya-98
- Appear to be separate from sequences sent from China in 2011



Pool 1: A/ASIA/Sea-97

Recent detection in the Russia Federation

- Sequences provided from ARRIAH
 - Outbreaks during 2014 in Eastern Russia (Zabaikalsky)
- Outbreaks in Eastern Russia
 - O/SEA/Mya-98
 - O/ME-SA/PanAsia
 - A/ASIA/Sea-97
- Outbreaks in Black Sea region
 - A/ASIA/Iran-05



Regional Threats



O/ME-SA/PanAsia-2

A/ASIA/Iran-05

Asia-1 (Sindh-08 lineage)

O/ME-SA/PanAsia (Pool 1)

O/SEA/Mya-98 (Pool 1)

A/ASIA/Sea-97 (Pool 1)

O/ME-SA/Ind2001 (Pool 2)

SAT 2 (Pool 4)

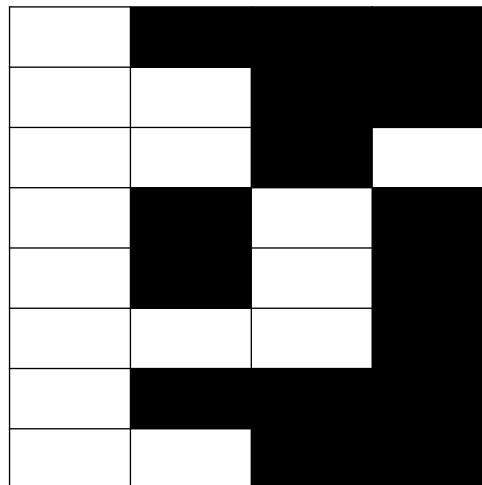
O/ME-SA/PanAsia-2

Sub-lineage nomenclature used to define different viral genotypes

• ANT-10

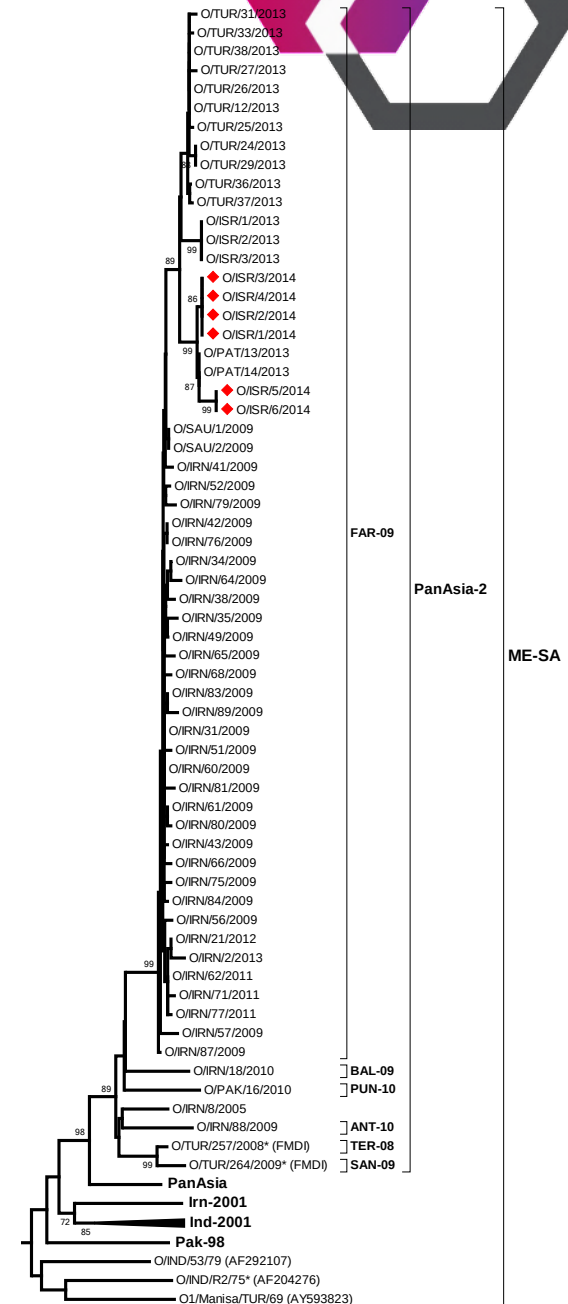
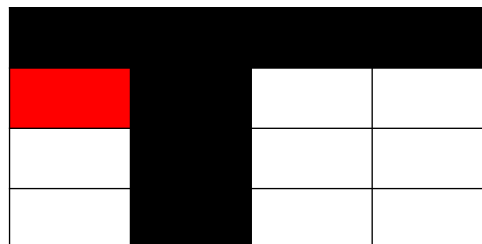
Iran
Israel
Saudi Arabia
Turkey
UAE
Afghanistan
Pakistan
Libya

2014 2013 2012 2011



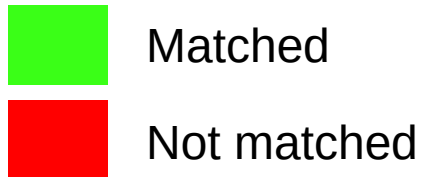
• FAR-09

Iran
Israel
PAT
Turkey



Vaccine matching data (2013)

Serotype O (all O/ME-SA/PanAsia-2 lineages)



Vaccine strain

Field isolate	O/RUSSE					O/TUR
	O-3039	O-4625	O/Manisa	A/2000	TAW/98	5/2009
Iran 2012		Matched				Matched
Iran 2013		Matched				Matched
Pakistan 2012		Matched	Not matched		Matched	Matched
Pakistan 2013	Matched *		Not matched		Matched	Matched
Palestinian AT 2013	Matched		Not matched		Matched	Matched
UAE 2013		Matched	Not matched			Not matched
Turkey 2013	Matched *	Matched	Not matched	Matched	Matched	Matched

* Single values have yielded borderline matches

2014 2013 2012 2011

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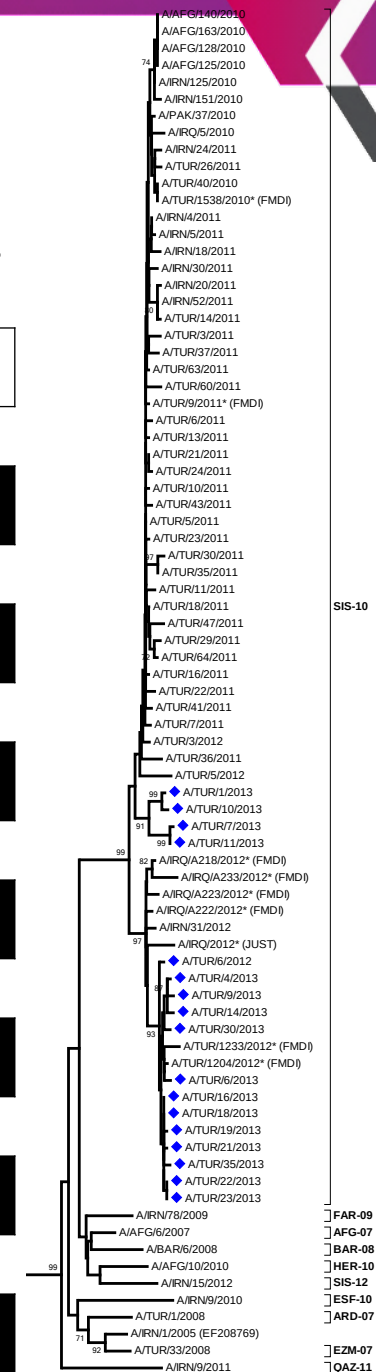
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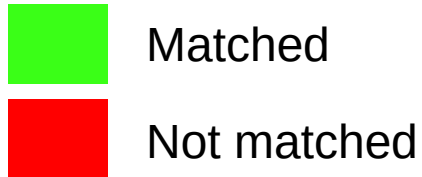
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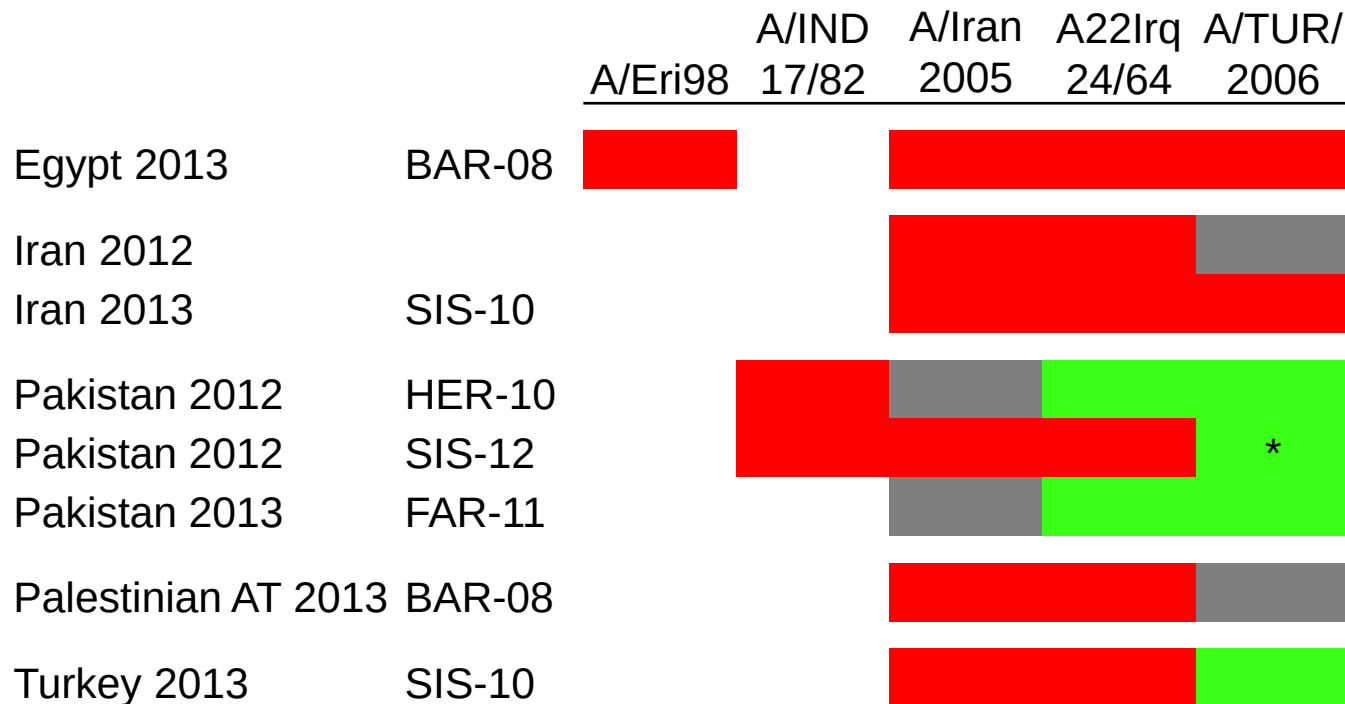


Vaccine matching data (2013)

Serotype A (A/ASIA/Iran-05)



Vaccine strain



* Single values have yielded borderline matches

Challenges / Limitations



- Not all reagents are available at WRL
- In-vitro vaccine matching is only a conservative proxy for in-vivo protection (high potency vaccination will often compensate for poor match)

Vaccine Studies



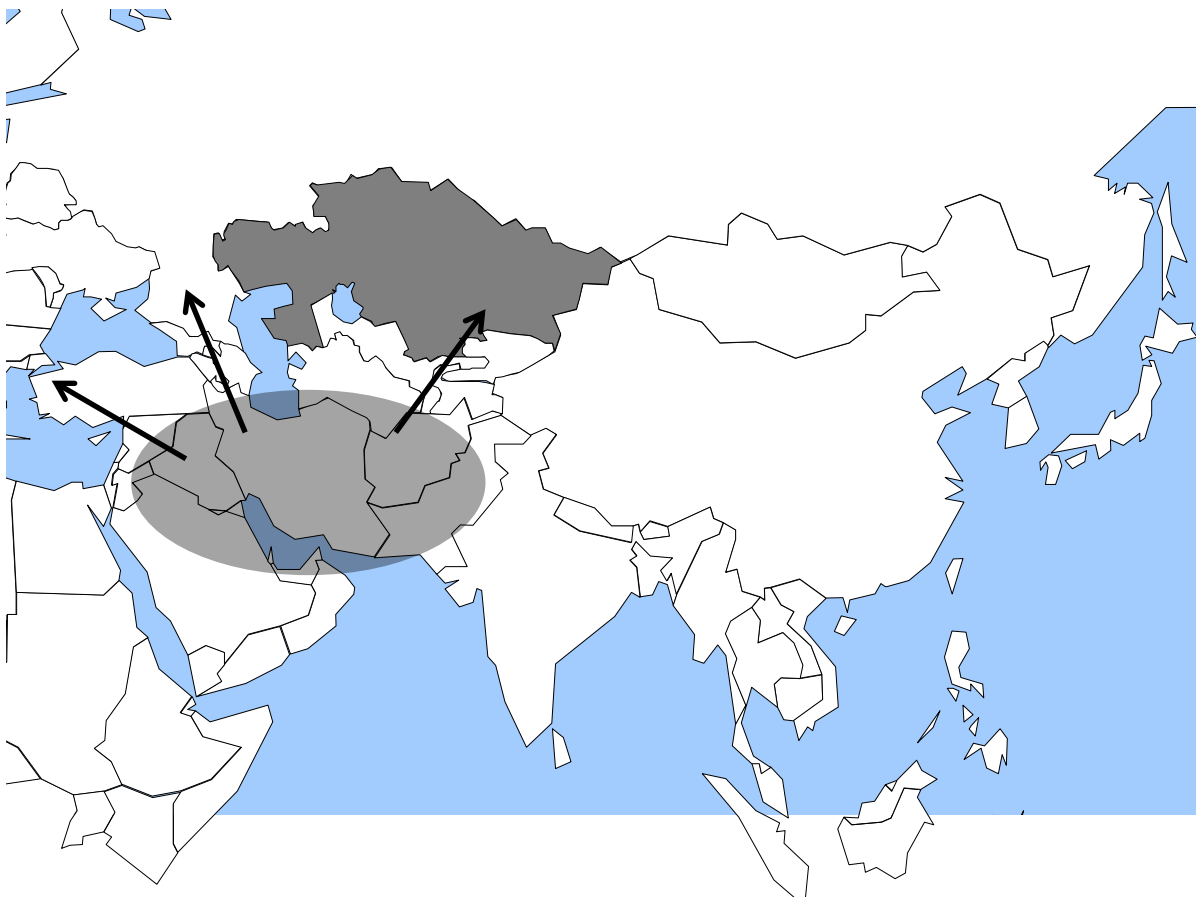
Vaccine Studies





Any questions?

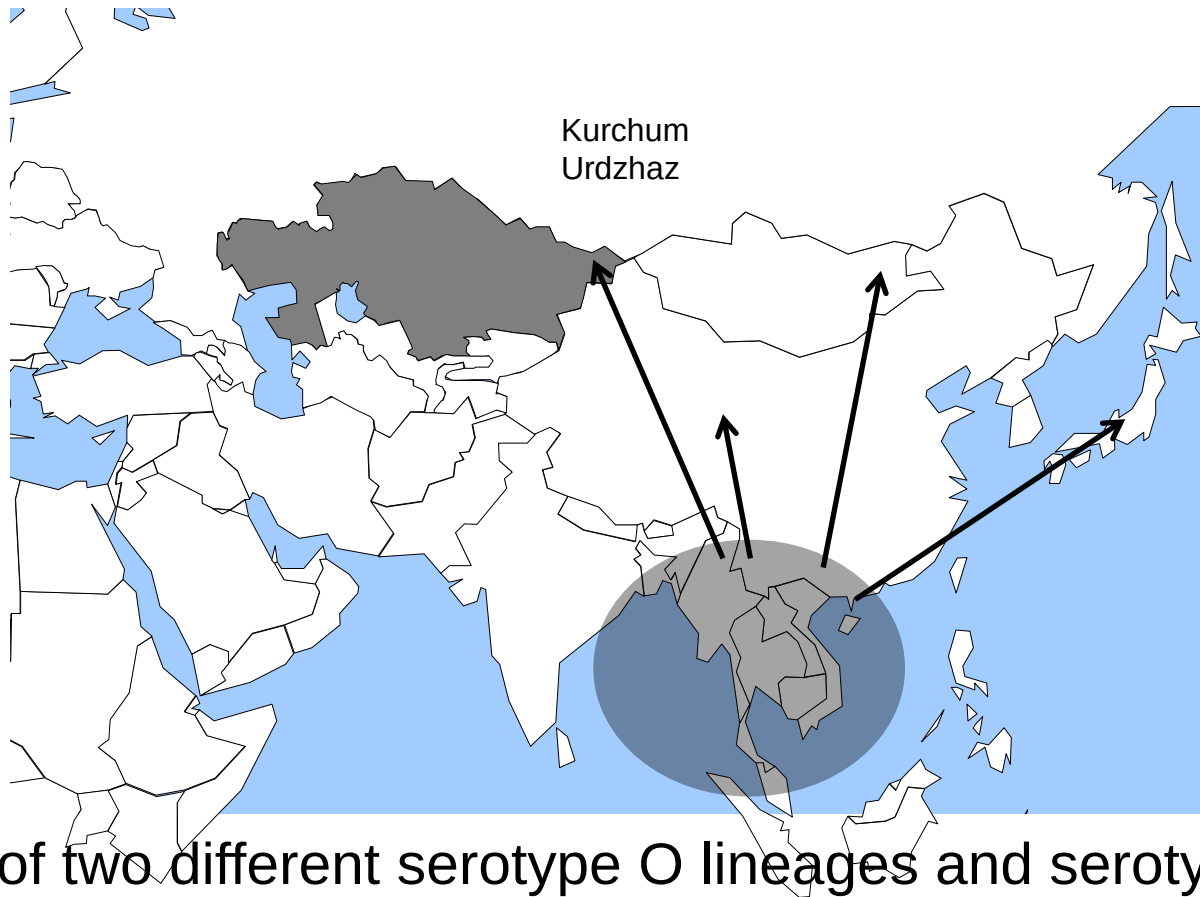
Kazakhstan: FMD Threats



Spread of two different serotypes from South Asia/Middle East

- O/ME-SA/PanAsia-2 - in **Kazakhstan** (2010-2012)
- A/ASIA/Iran-05 - in **Kazakhstan** (2012) also recent incursions into Russia
- Threat from serotype Asia-1 (Sindh-08)?

FMD Threats (South East Asia)



Spread of two different serotype O lineages and serotype A

- O/ME-SA/PanAsia – **Kazakhstan** (2010) – also reported in China
- O/SEA/Mya-98 – a number of outbreaks in China, Russia, Mongolia, N&S. Korea, Japan
- A/ASIA/Sea-97 – **Kazakhstan** (2013) – also reported in China and South Korea

A photograph of a sunflower with bright yellow petals and a dark green leaf in the foreground, set against a background of a vast field of golden-brown grain under a clear sky.

**Актуальные вопросы борьбы с ящуром
сельскохозяйственных животных в Казахстане**

Программа Агробизнес

- В целом 3,2 трлн тенге или 13 млрд. евро
- На животноводство – 602 млрд тенге или 2,4 млрд.евро
- На развитие государственных систем обеспечения ветеринарной и фитосанитарной безопасности – 409 млрд.тенге или 1,6 млрд.евро

Портал www.iszh.kam.kz

iszh.kam.kz

Идентификация сельскохозяйственных животных

Идентификация

- Поиск животного по ИНЖ
- Подача заявок владельцев животных
- Законодательство
- Полезная информация
- Контакты, обратная связь

РК
Виды животных

Наименование региона	КРС	МРС	Свины	Лошади	Верблюды
АКМОЛИНСКАЯ ОБЛАСТЬ	387521	415122	83919	33919	117
АКТЮБИНСКАЯ ОБЛАСТЬ	398267	1048645	33191	52315	15000
АЛМАТИНСКАЯ ОБЛАСТЬ	621909	3030108	94842	158108	4443
АТЫРАУСКАЯ ОБЛАСТЬ	136368	502136	327	1	17270
ЗАПАДНО-КАЗАХСТАНСКАЯ ОБЛАСТЬ	447240	1055017	17930	27164	2533
ЖАМБЫЛСКАЯ ОБЛАСТЬ	296065	1560815	18227	56216	4406
КАРАГАНДИНСКАЯ ОБЛАСТЬ	466787	1114118	78137	19870	1251
КОСТАНАЙСКАЯ ОБЛАСТЬ	402774	306505	123468	36726	186
КЫЗЫЛОРДИНСКАЯ ОБЛАСТЬ	257118	575455	1876	34171	31707
МАНГИСТАУСКАЯ ОБЛАСТЬ	13408	299039	567	3119	26279
ЮЖНО-КАЗАХСТАНСКАЯ ОБЛАСТЬ	742481	2198216	7213	146611	17984
ПАВЛОДАРСКАЯ ОБЛАСТЬ	301525	413606	43992	52509	136
СЕВЕРО-КАЗАХСТАНСКАЯ ОБЛАСТЬ	318730	283396	122167	51944	42
ВОСТОЧНО-КАЗАХСТАНСКАЯ ОБЛАСТЬ	839708	2102803	52682	6705	566
АСТАНА Г.А.	999	1070	46	452	10
АЛМАТЫ Г.А.	672	547	164	203	0
	5631572	14906598	678748	680033	121930

Экспорт XLS

Ветеринар на селе

- Создано более 2500 государственных ветеринарных организаций (ветстанции и ветпункты)
- Материально-техническое оснащение – 10 млрд тенге или 40 млн евро
- Каждому ветеринарному врачу – специализированная машина, раскол, инсенираторы, набор инструментов

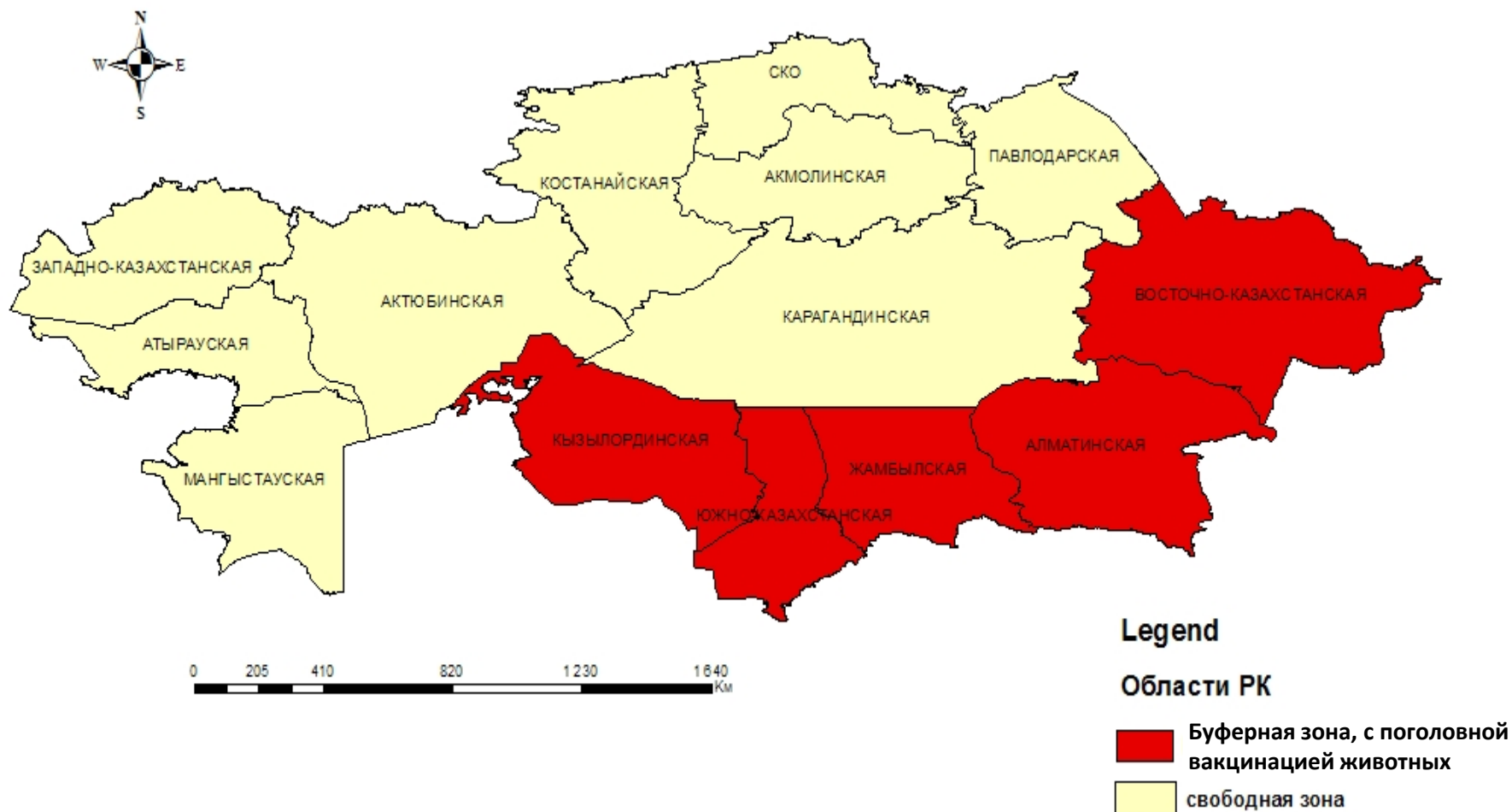
Диагностика ящура

- Завершается строительство ветеринарных лабораторий
- Всего построено 126 областных и районных ветлабораторий
- Сумма строительства 70 млн евро
- Материально техническое оснащение около 30 млн евро
- Акцент - диагностика бруцеллеза и ящура

Вакцинация согласно требованиям МЭБ

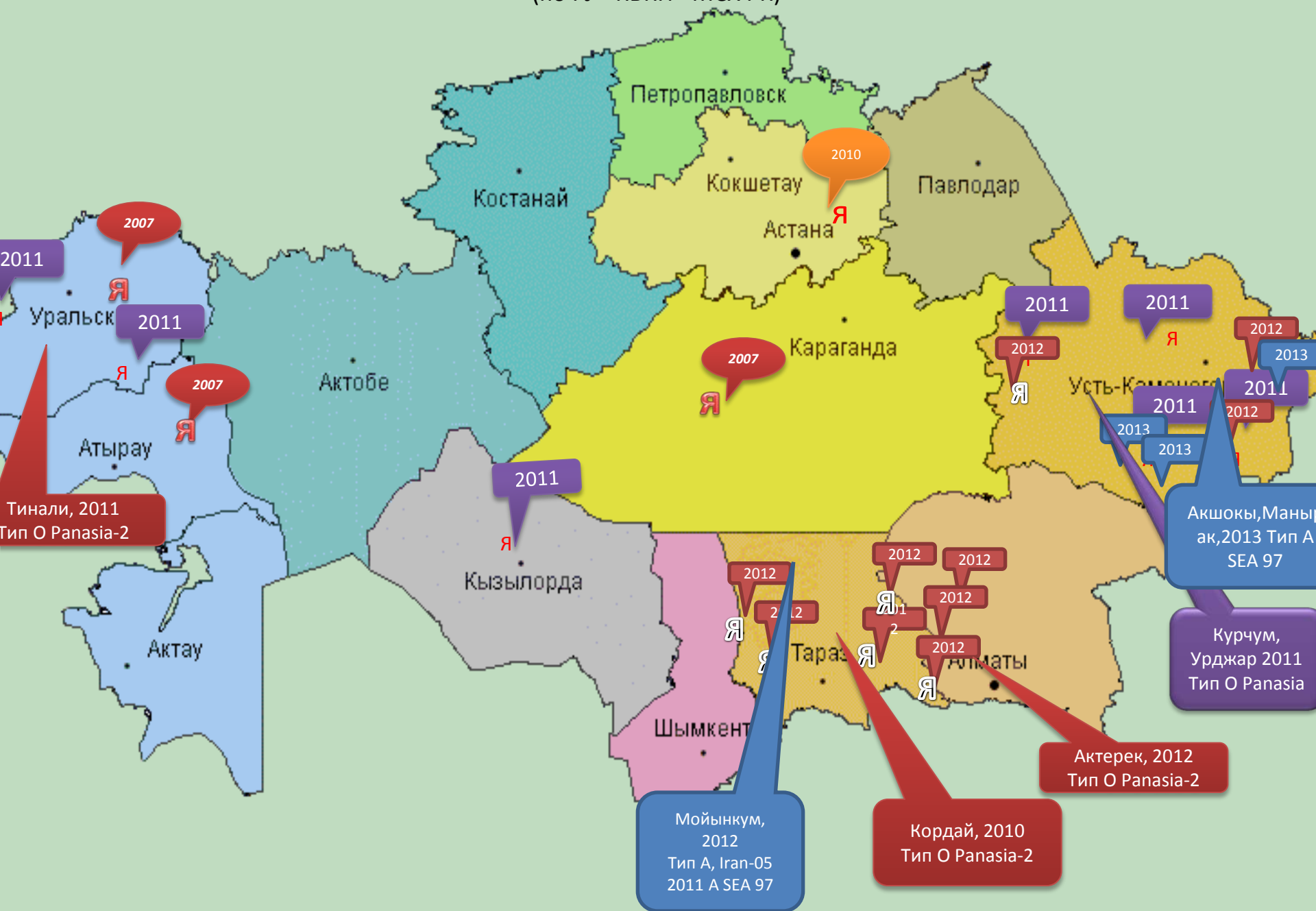
- Вакцина по новым требованиям
- Выделяется ежегодно 4,5 млрд тенге или 18 млн евро на вакцину против ящура
- Также выделяются 9 млрд тенге или 36 млн евро ГВО на проведение профилактических мероприятий
- Уничтожение больных животных 3,6 млн евро по рыночной цене в 2013 г

Буферная зона вакцинации КРС и МРС против ящура в Республики Казахстан



Слайд 1 - Вспышки ящра на территории Казахстана в период 2007-2013 г.г.

(по ГУ «КВКН» МСХ РК)



Информация по вспышкам ящура

	2011	2012	2013
Очагов ящура	7	10	3
Уничтожено КРС, гол	2349	2193	2295
Уничтожено мрс гол	5616	4610	

**КОМИТЕТ ВЕТЕРИНАРНОГО КОНТРОЛЯ И НАДЗОРА
МИНИСТЕРСТВА СЕЛЬСКОГО ХОЗЯЙСТВА
РЕСПУБЛИКИ КАЗАХСТАН**



**РЕСПУБЛИКАНСКАЯ
ВЕТЕРИНАРНАЯ ЛАБОРАТОРИЯ**



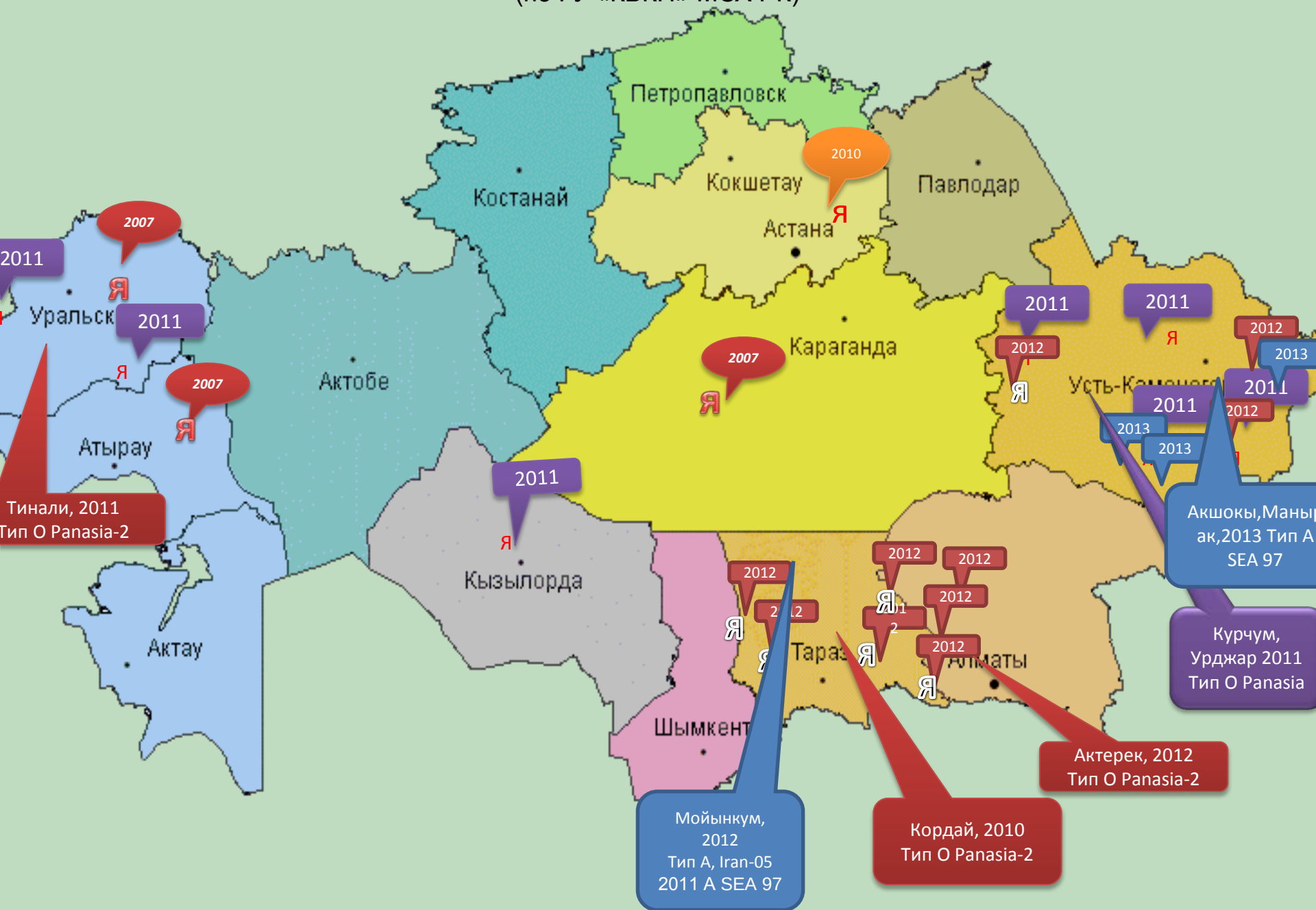


СТРАТЕГИЯ БОРЬБЫ С ЯЩУРОМ ЖИВОТНЫХ В РЕСПУБЛИКЕ КАЗАХСТАН

Астана, 2014 год

Рис. 1 - Вспышки ящура на территории Казахстана в период 2007-2013 г.г.

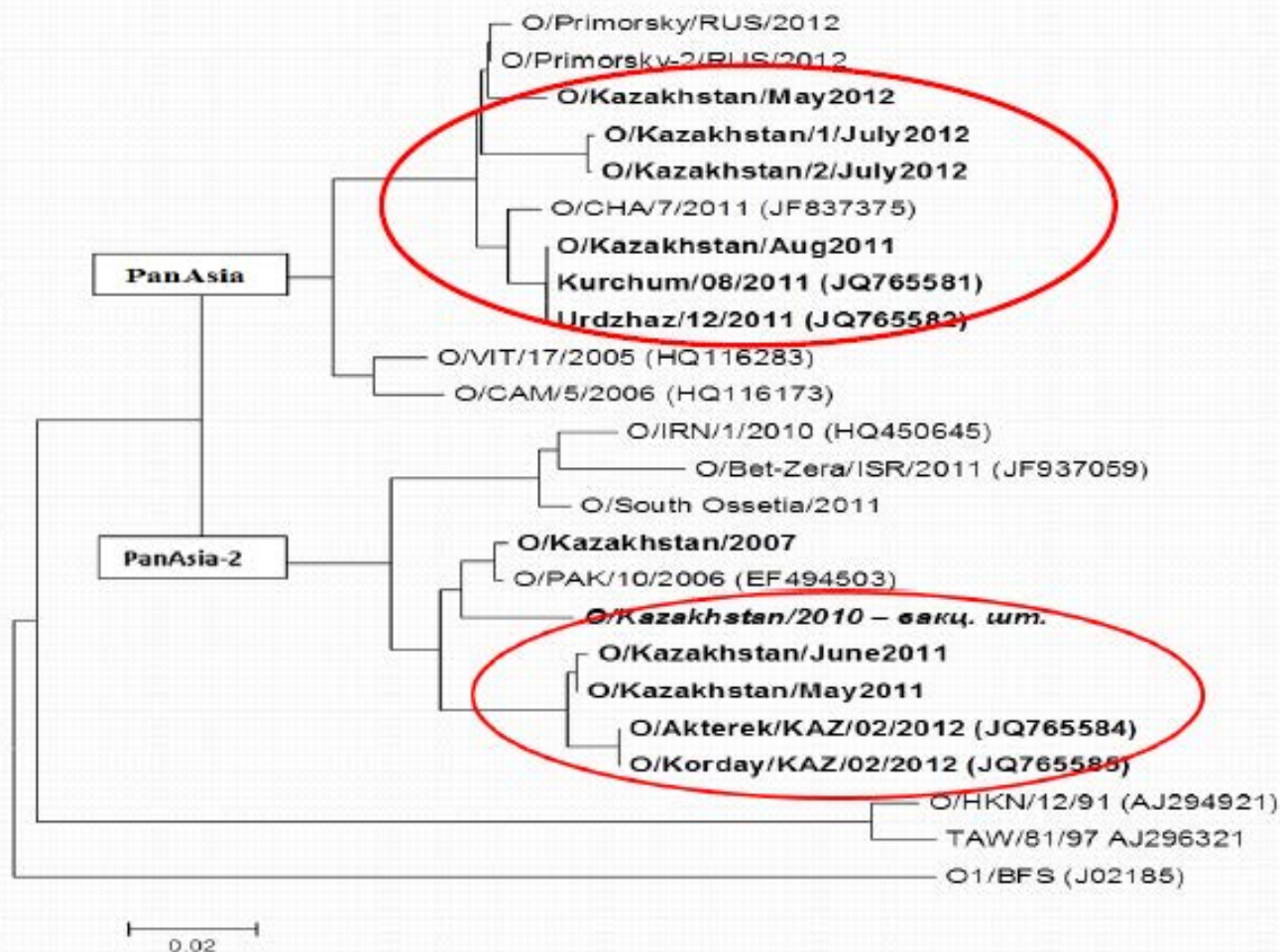
(по ГУ «КВКН» МСХ РК)



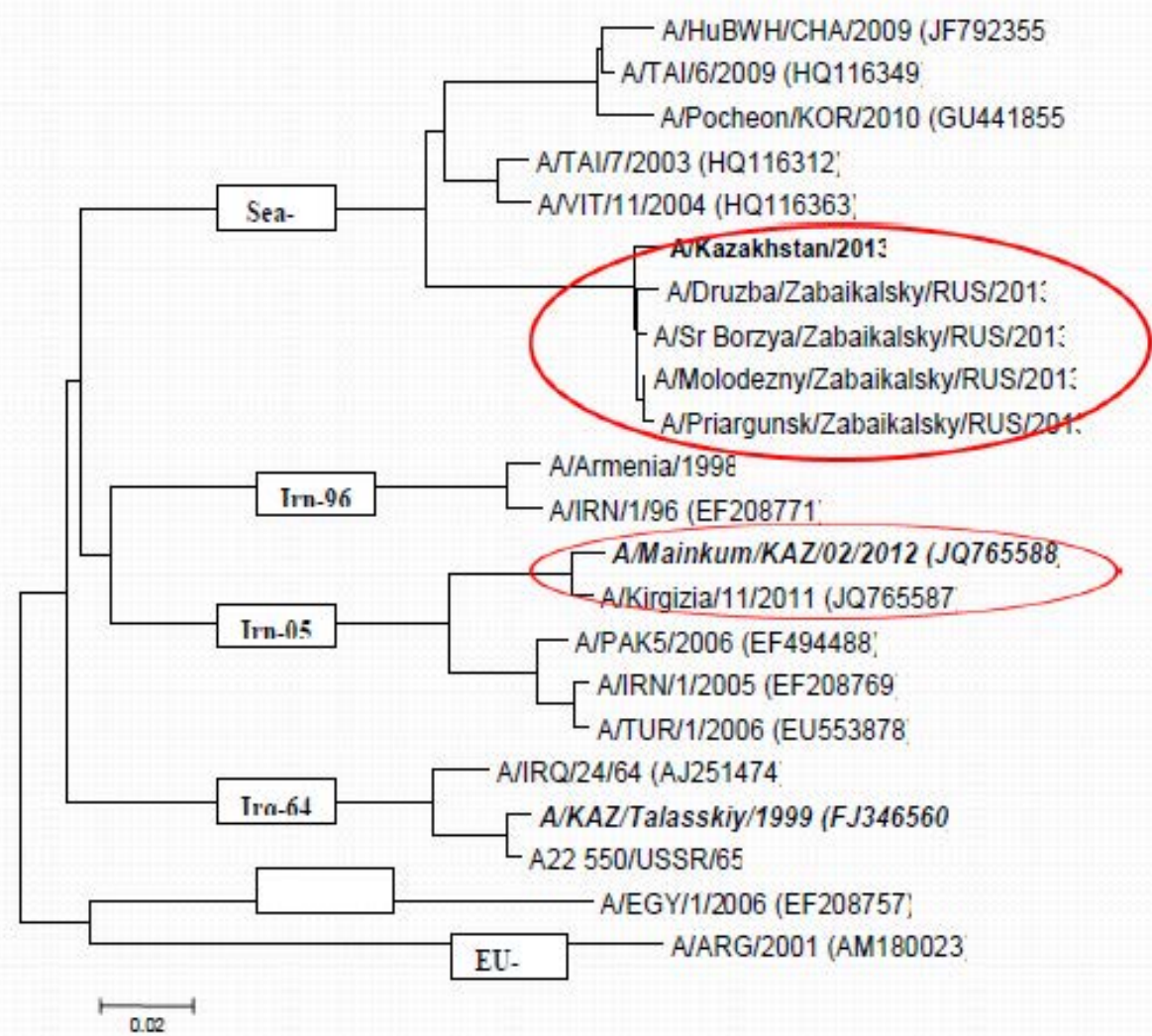
Слайд 2. Генетические характеристики типовых вариантов О и А вируса ящура, выделенных на территории Республики Казахстан в 2010-2013 г.г.
(по данным РГП «НИИПББ» и ФГУП «ВНИИЗЖ»)

Территория выделения вируса, область	Сроки выделения вируса, годы	Тип вируса	Типовой вариант (топотип) вируса
Жамбылская (Кордай)	2010	O	PanAsia-2
	2012	O	PanAsia-2
Алматинская (Актерек)	2012	O	PanAsia-2
Западно-Казахстанская (Тинали)	2011	O	PanAsia-2
Восточно-Казахстанская (Курчум, Уржар)	2011	O	PanAsia
Жамбылская (Кордай/Киргизия)	2011	A	Asia Iran-05 SEA 97
Жамбылская (Мойынкум)	2012	A	Asia Iran-05
Восточно-Казахстанская (Акшоқы, Манырак)	2013	A	SEA 97

Дендрограмма, отражающая положение эпизоотических изолятов О из Республики Казахстан на филогенетическом древе вируса ящура типа О.



Дендрограмма, отражающая положение эпизоотических изолятов А из Республики Казахстан на филогенетическом древе вируса ящера типа А.

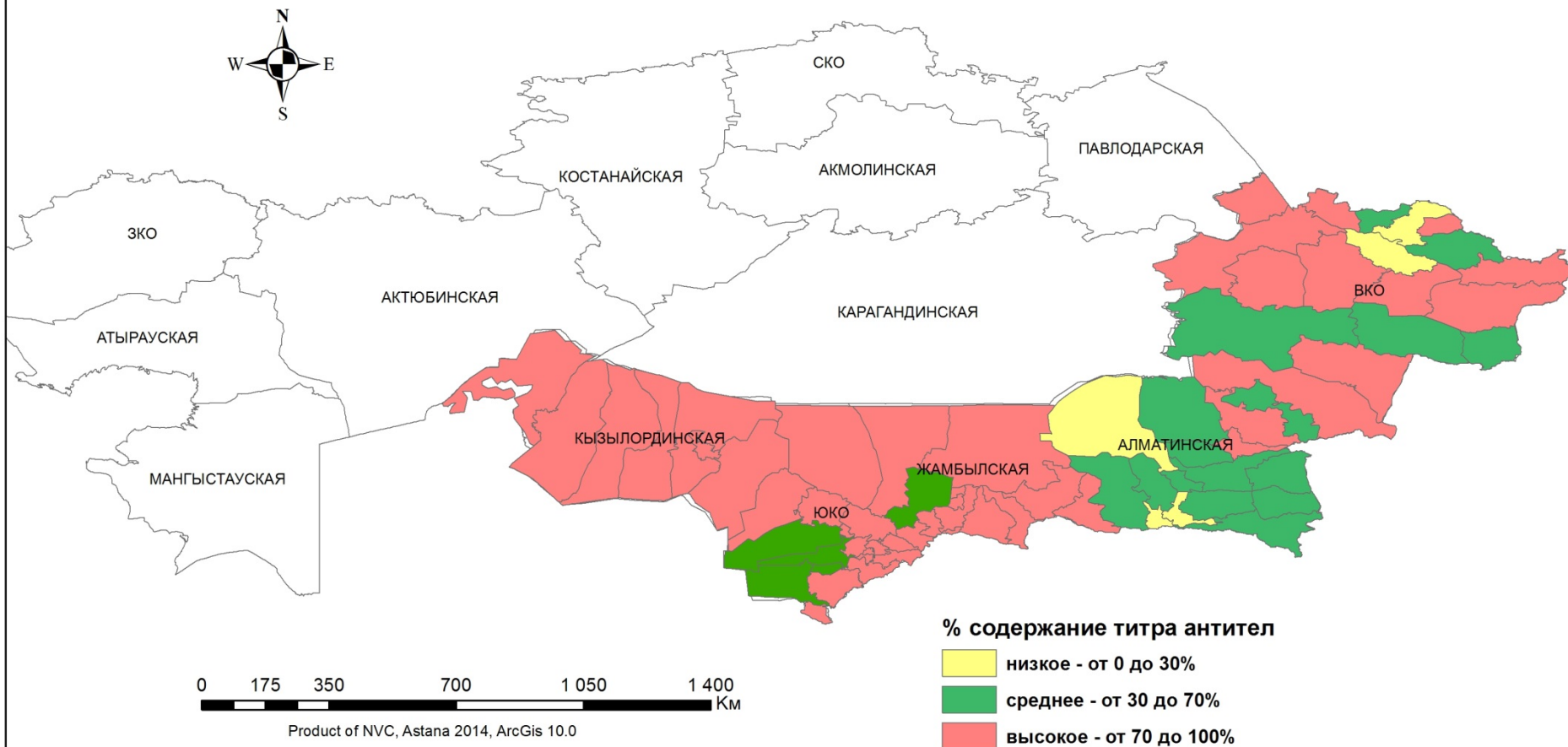


Слайд 5 Показатели выявляемости (%) антител на НСП вируса ящура
(данные НРЦВ и РВЛ МСХ РК)

№№ п/п	Наименование административных областей	Вид иссл-ных животных	Годы исследования			
			2011	2012	2013	
1	Акмолинская	КРС	6,9	1,9	3,59	
		МРС	6,1	1,3	н/и	
2	Актюбинская	КРС	2,9	0,0	н/и	Исследования
		МРС	1,7	1,4	н/и	
3	Атырауская	КРС	0,3	3,9	н/и	будут
		МРС	0,8	2,2	н/и	
4	Западно-Казахстанская	КРС	1,8	0,7	0,00	проведены
		МРС	7,1	6,5	н/и	
5	Карагандинская	КРС	0,2	2,9	0,00	во
		МРС	1,2	4,4	н/и	
6	Костанайская	КРС	0,6	0,2	0,00	второй
		МРС	3,7	0,8	н/и	
7	Мангыстауская	КРС	2,9	1,5	н/и	половине
		МРС	2,0	3,1	н/и	
8	Павлодарская	КРС	0,1	1,2	н/и	года
		МРС	0,5	0,0	н/и	
9	Северо-Казахстанская	КРС	0,7	0,3	0,00	
		МРС	0,9	0,0	н/и	
	З о н а б у ф е р а:					
10	Алматинская	КРС	5,79	84,6	23,5	3,4
		МРС	4,16	н/и	н/и	н/и
11	Вост.-Казахстанская	КРС	5,92	6,47	17,9	31,5
		МРС	8,97	15,3	2,84	6,8
12	Жамбылская	КРС	4,17	60,0	16,3	47,3
		МРС	30,76	8,7	н/и	н/и
13	Кызыл-Ординская	КРС	21,34	н/и	20,0	20,0
		МРС	21,08	н/и	н/и	н/и
14	Южно-Казахстанская	КРС	47,38	н/и	29,3	21,8
		МРС	50,81	н/и	н/и	н/и

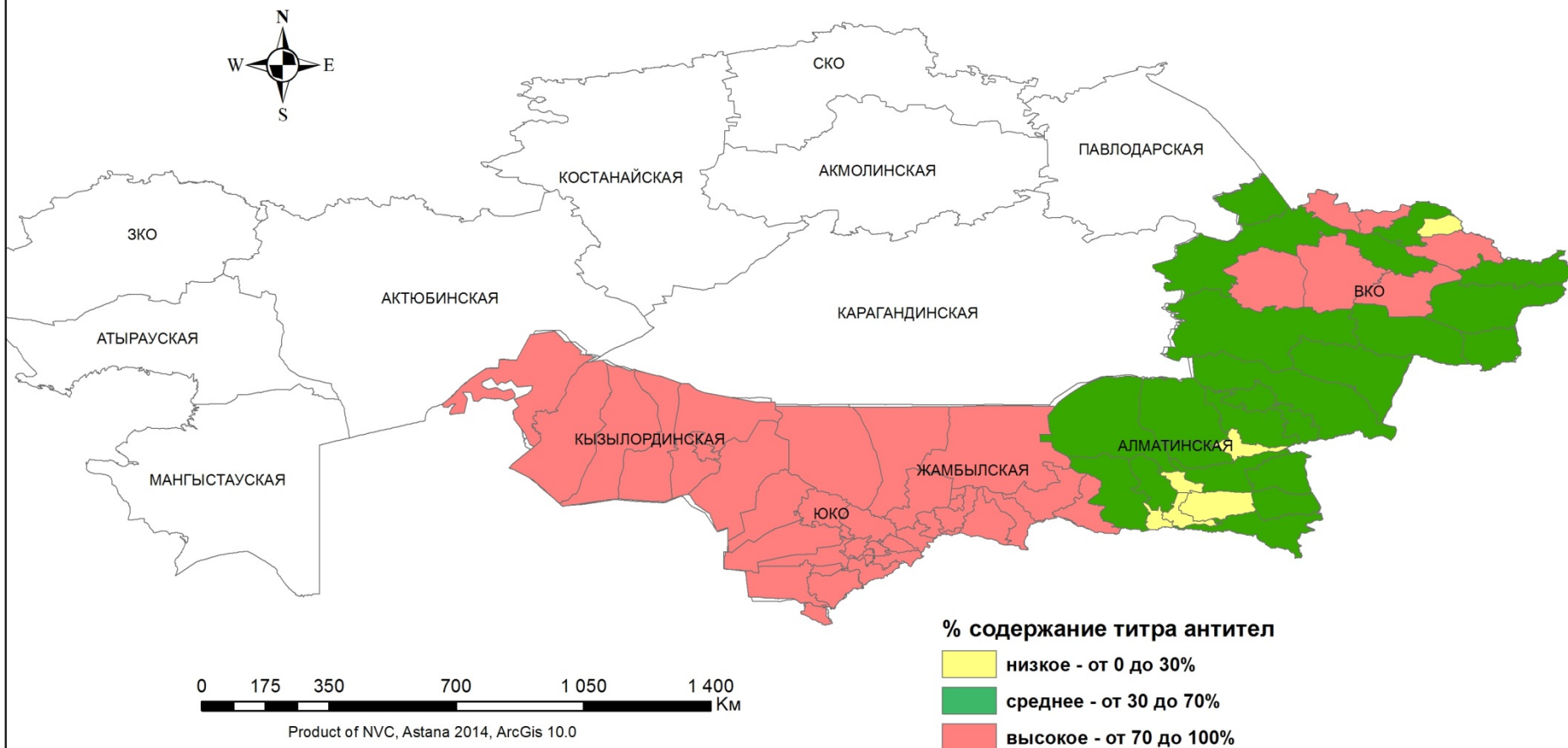
Слайд 6

Напряженность иммунитета против ящура по типу А среди КРС в буферной зоне за 2013 год.



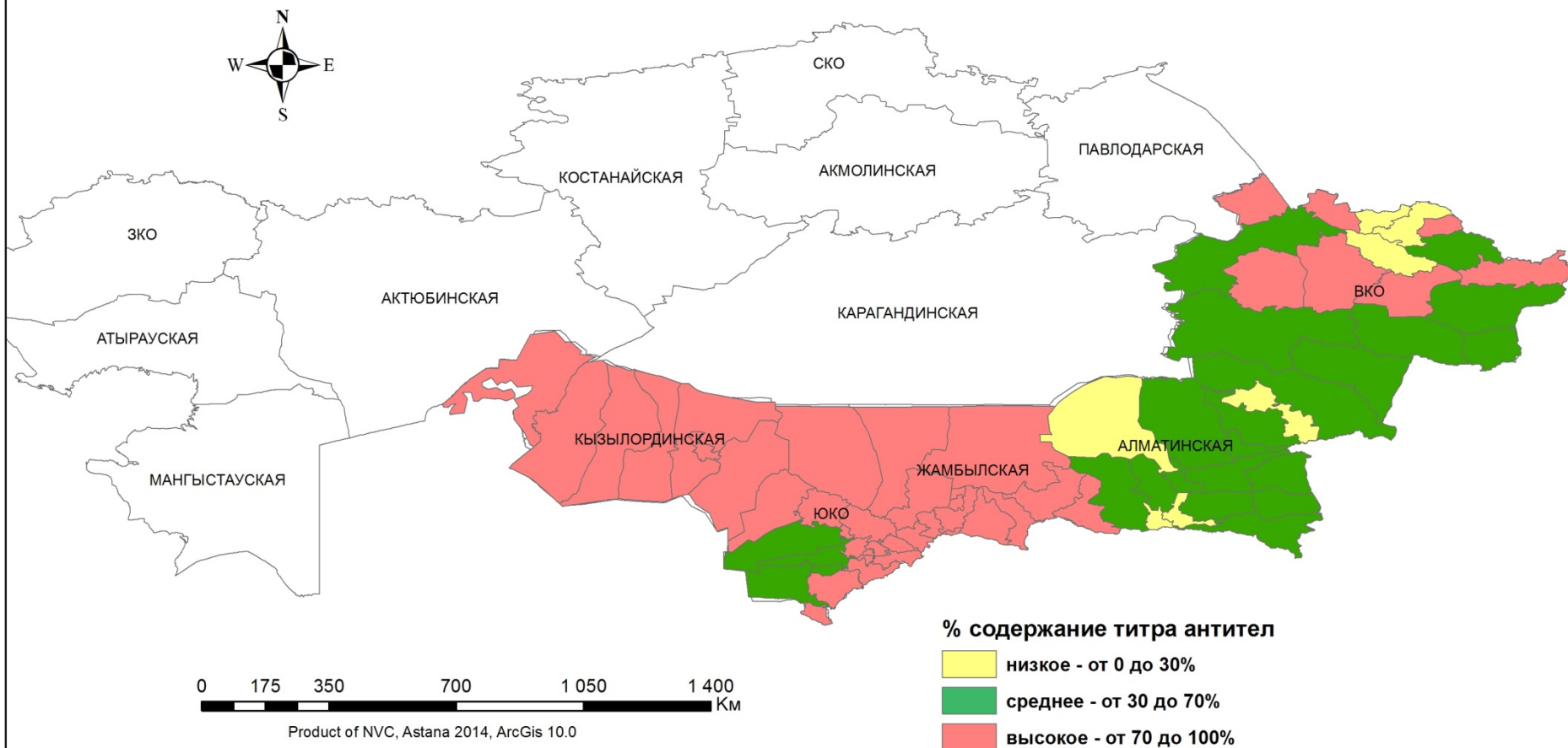
Слайд 7

Напряженность иммунитета против ящура по типу А среди МРС в буферной зоне за 2013 год.



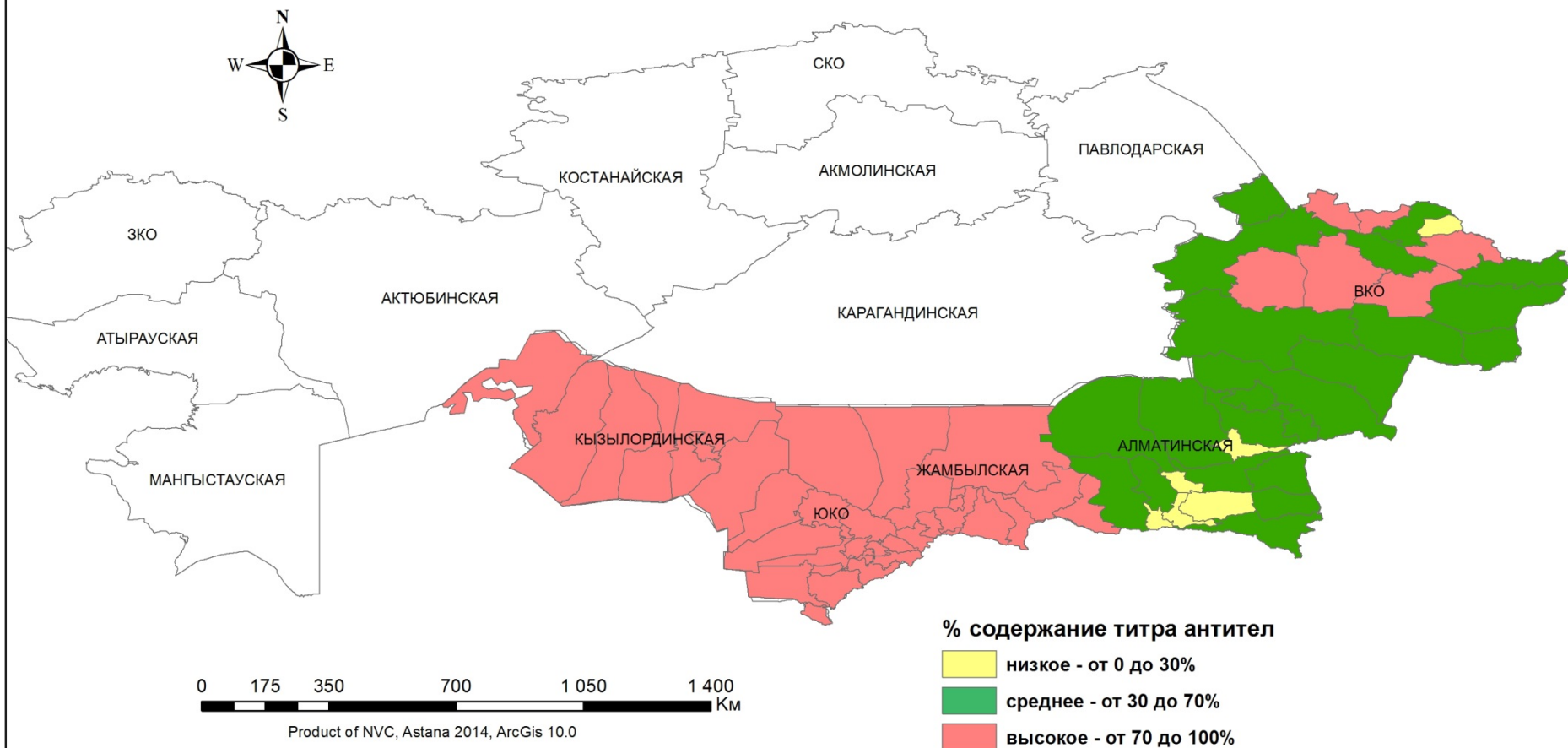
Слайд 8

Напряженность иммунитета против ящура по типу О среди КРС в буферной зоне за 2013 год.



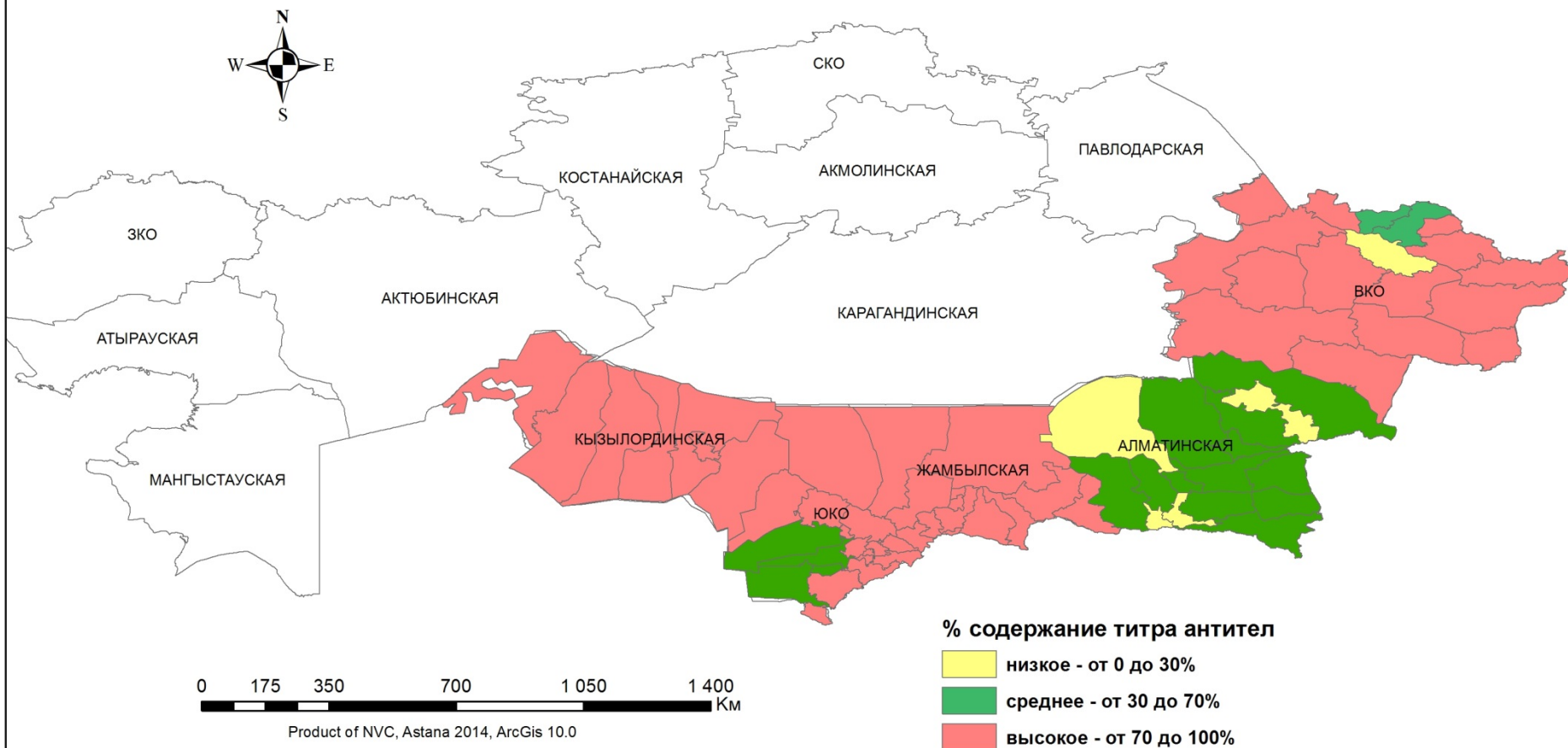
Слайд 9

Напряженность иммунитета против ящура по типу О среди МРС в буферной зоне за 2013 год.



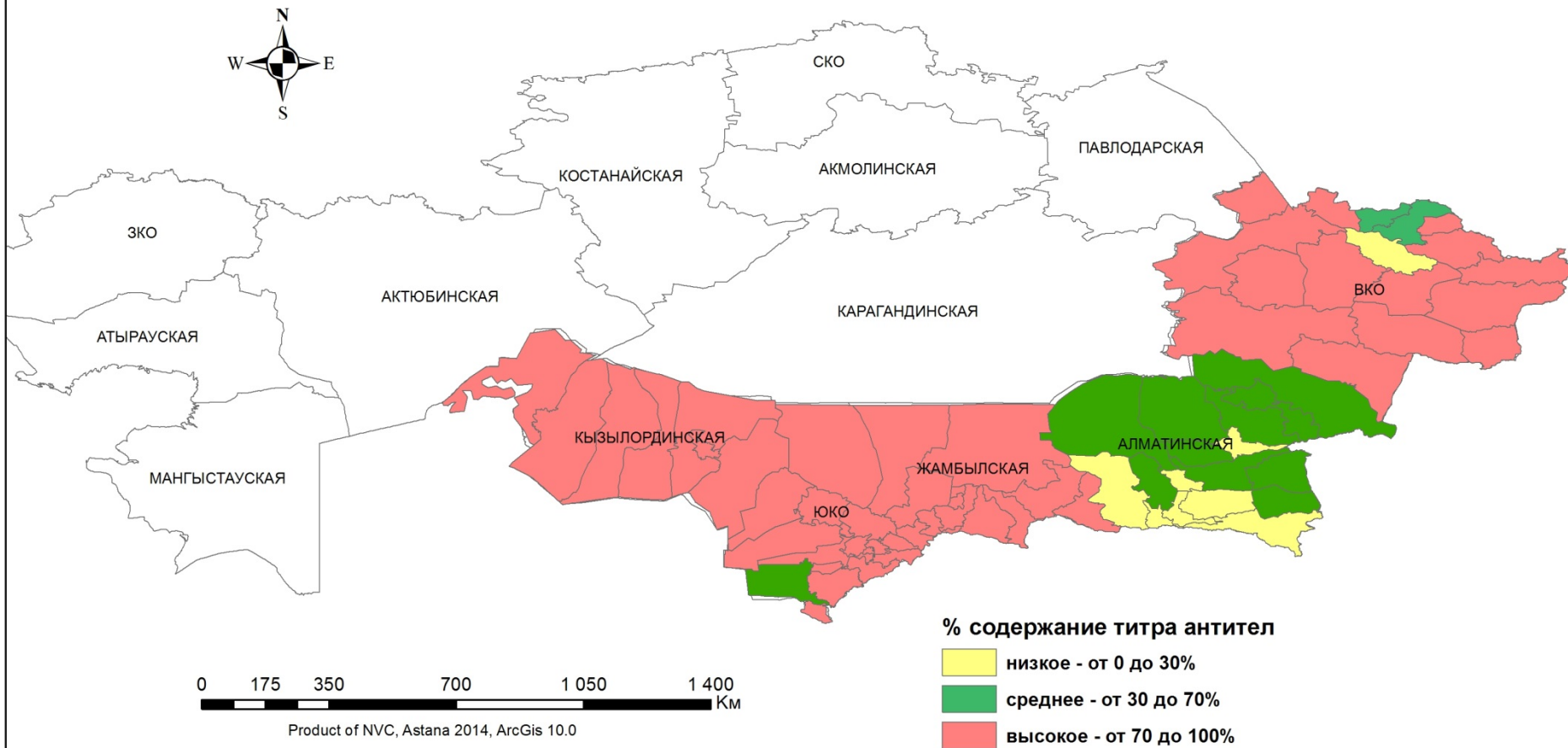
Слайд 10

Напряженность иммунитета против ящура по типу Азия-1 среди КРС в буферной зоне за 2013 год.



Слайд 11

Напряженность иммунитета против ящура
по типу Азия-1 среди МРС в буферной зоне за 2013 год.



Слайд 12 Результаты оценки поствакцинального иммунитета у КРС в буферной зоне в 2013 году

Администра- тивная область	Количество исслед-ных животных, гол	Иммунитет против типа вируса ящура, %			Приме- чание
		О	А	Азия-1	
Восточно- Казахстанская	20 014	76,0	76,5	77,0	удовл.
Алматинская	11 459	40,0	43,1	41,7	не удовл.
Жамбылская	7 412	98,0	98,0	98,0	удовл.
Южно- Казахстанская	3 121	88,2	88,8	89,1	удовл.
Кызыл- Ординская	2840	100	100	100	удовл.

Слайд 13

Факторы, способствующие появлению и распространению ящура в Республике Казахстан.

- 1. Соккрытие владельцами животных случаев заболевания скота ящуром.**
- 2. Распространение вируса ящура с помощью диких животных.**
- 3. Несвоевременное выявление животных, больных ящуром, на территории с высоким риском появления болезни.**
- 4. Отсутствие должного поствакцинального иммунного фона у животных против ящура в отдельных регионах и территориях.**

Резюме.

По результатам мониторинга антител на НСП вируса ящура в 2013 году территория нескольких областей (Северо-Казахстанской, Костанайской, Западно-Казахстанской, Карагандинской) страны являются свободными от ящура.

Эпизоотическая ситуация по ящуру в южных регионах республики остается напряженной, где болезнь принимает эндемический характер. В этом регионе часты случаи несвоевременного информирования владельцами животных ветеринарных специалистов при подозрении на болезнь.

Высока вероятность наличия в данное время не купированных эпизоотических очагов этой болезни в Восточно-Казахстанской, Алматинской, Жамбылской и Южно-Казахстанской областях.

Сведения о поствакцинальном иммунном статусе животных против ящура буферной зоны сомнительны в своей достоверности.

Постоянно существует реальная угроза заноса вируса ящура из сопредельных стран, предотвращение которой часто вне компетенции ветеринарной службы и Министерства сельского хозяйства.

МЕРОПРИЯТИЯ ПО БОРЬБЕ С ЯЩУРОМ

- 1. Подбор вакцины и поддержание иммунного статуса животных против ящура**
- 2. Предварительное зонирование территории**
- 3. Мониторинг серологический** (антител на НСП вируса ящура и поствакцинальных)
- 4. Мониторинг вирусологический** (индикация генетических материалов вируса и выделение репродуктивного вируса)
- 5. Зонирование территории по результатам мониторинга**
- 6. Определение статуса зон**

Слайд 16

Рекомендации по вакцине

Рекомендуется использовать вакцину 3-х валентную по типу вируса (А, О, Азия-1) и имеющую в составе антигенные варианты:

- две валентности по типу О (антигенно родственный с «O/Panasia-2» и «O/Panasia»);
- две валентности по типу А (антигенно родственный с «A/Iran-05» и «A/SEA-97»); ,
- одна валентность по типу Азия-1.

Поддержание иммунного статуса животных против ящура

Поголовная вакцинация животных, восприимчивых к ящуру, в буферной зоне:

- взрослый КРС два раза в год;
- молодняк КРС через каждые 3 месяца до достижения возраста 18 мес.;
- МРС двукратно в год не зависимо от возраста;
- свиней – однократно.

Предварительное зонирование территории

1. **Зона благополучная по ящуру** (территории 9 административных областей, где в последние 3 года не регистрировался ящур).
2. **Зона буферная** (территория 5 административных областей: ВКО, ААО, ЖО, ЮКО и КОО), где регистрировался ящур за последние 3 года и существует реальная угроза заноса болезни из вне.
 - 2.1. **Буферную зону для оптимизации районировать на категории по административному делению и природно-географическим особенностям:**
 - **территорию неблагополучную по ящуру** (территории административных районов в 5 областях, где регистрировался ящур в последнее время и граничат с сопредельными странами: КНР, КР, РУ);
 - **территорию наблюдения** (территории административных районов 5 областей, которые граничат с территорией неблагополучной по ящуру);
 - **территорию благополучную/чистую** (территории административных районов 5 областей, которые граничат с территорией наблюдения).

Мероприятия в благополучной территории

Для подтверждения имеющегося статуса и дальнейшего поддержания благополучия в 9 областях проводить:

1. Клинический мониторинг на благополучие по ящуру с предоставлением актов обследования в КВКН и КазНИВИ по не менее чем 10% поголовья животных;

2. Серологический мониторинг антител на НСП вируса ящура в Западно-Казахстанской и Актыбинской областях проводить двукратно в год (весной и осенью) с выборкой не менее 1% молодняка от 3-х до 12-ти месячного возраста, в оставшихся 7 областях - аналогичные исследования проводить однократно.

По результатам серологического мониторинга:

- в случае отсутствия антител на НСП вируса ящура или обнаружения антител на НСП вируса ящура менее чем 5% от числа исследованных, проводить клинический контроль за состоянием животных.

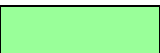
- в случае обнаружения антител на НСП вируса ящура более чем 5% от числа исследованных, проводить вирусологический мониторинг с целью индикации генетических материалов вируса и выделения репродуктивного возбудителя и определения статуса территории в дальнейшем.

**Предварительное районирование буферной зоны
по категориям благополучия**

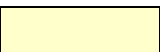
Деление территории Республики Казахстан на зоны по ящуру



Неблагополучная зона



Зона наблюдения



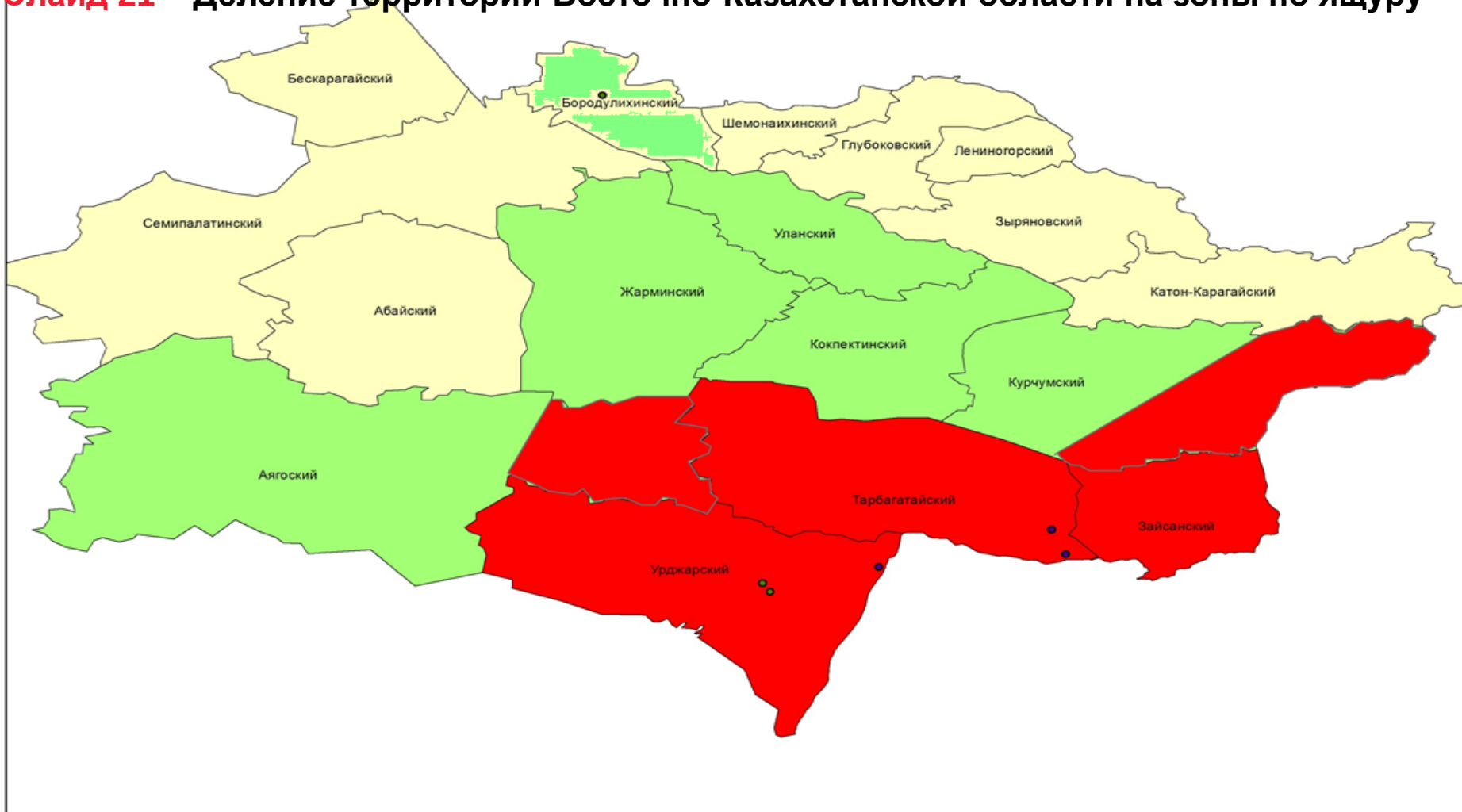
Благополучная/чистая зона

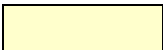
Жамбылской области в 2012 году было зарегистрировано 3 очага ящура в Мойынкумском районе и в Кордайском районе 1 очаг

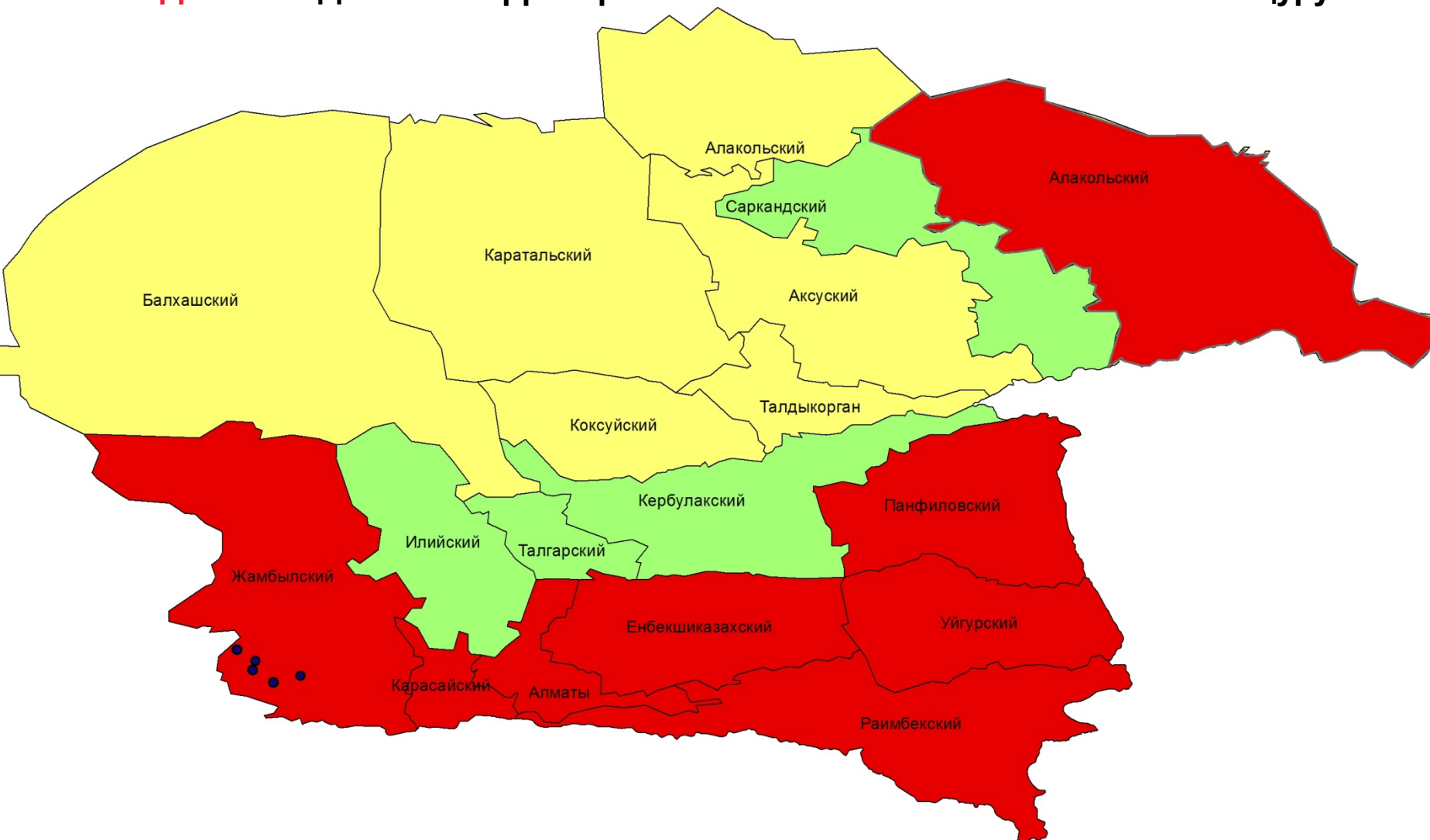
Алматинской области в 2012 году было зарегистрировано 4 очага в Жамбылском районе

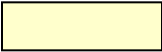
В 2012-2013 годы Восточно-Казахстанской области были зарегистрированы 6 очагов ящура в Урджарском, Тарбагатайском и Бородулихинском районах

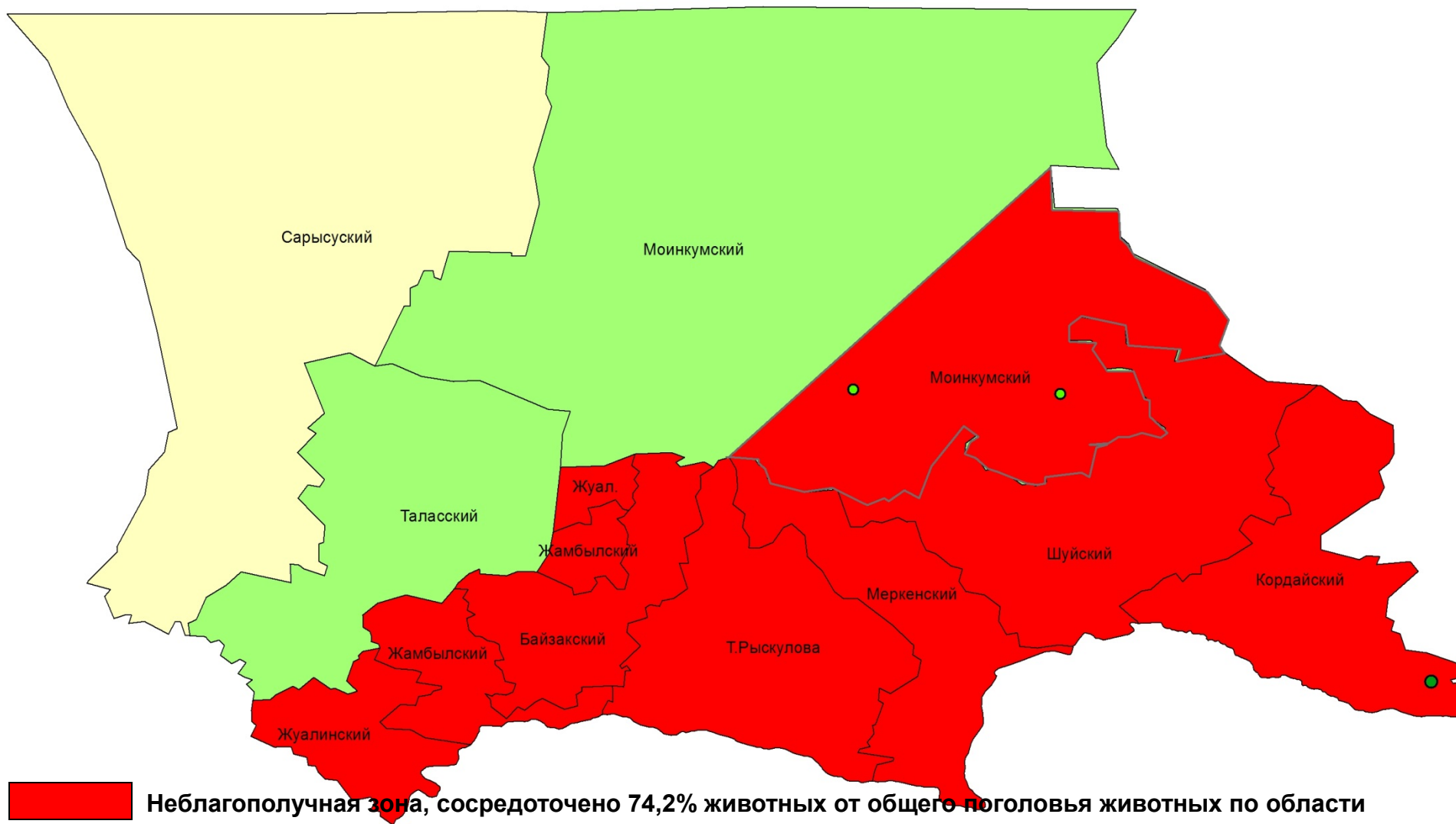
Слайд 21 Деление территории Восточно-Казахстанской области на зоны по ящуру



-  Неблагополучная зона, сосредоточено 39% животных от общего поголовья животных по области
-  Зона наблюдения, сосредоточено 29% животных от общего поголовья животных по области
-  Благополучная/Чистая зона, сосредоточено 32% животных от общего поголовья животных по области



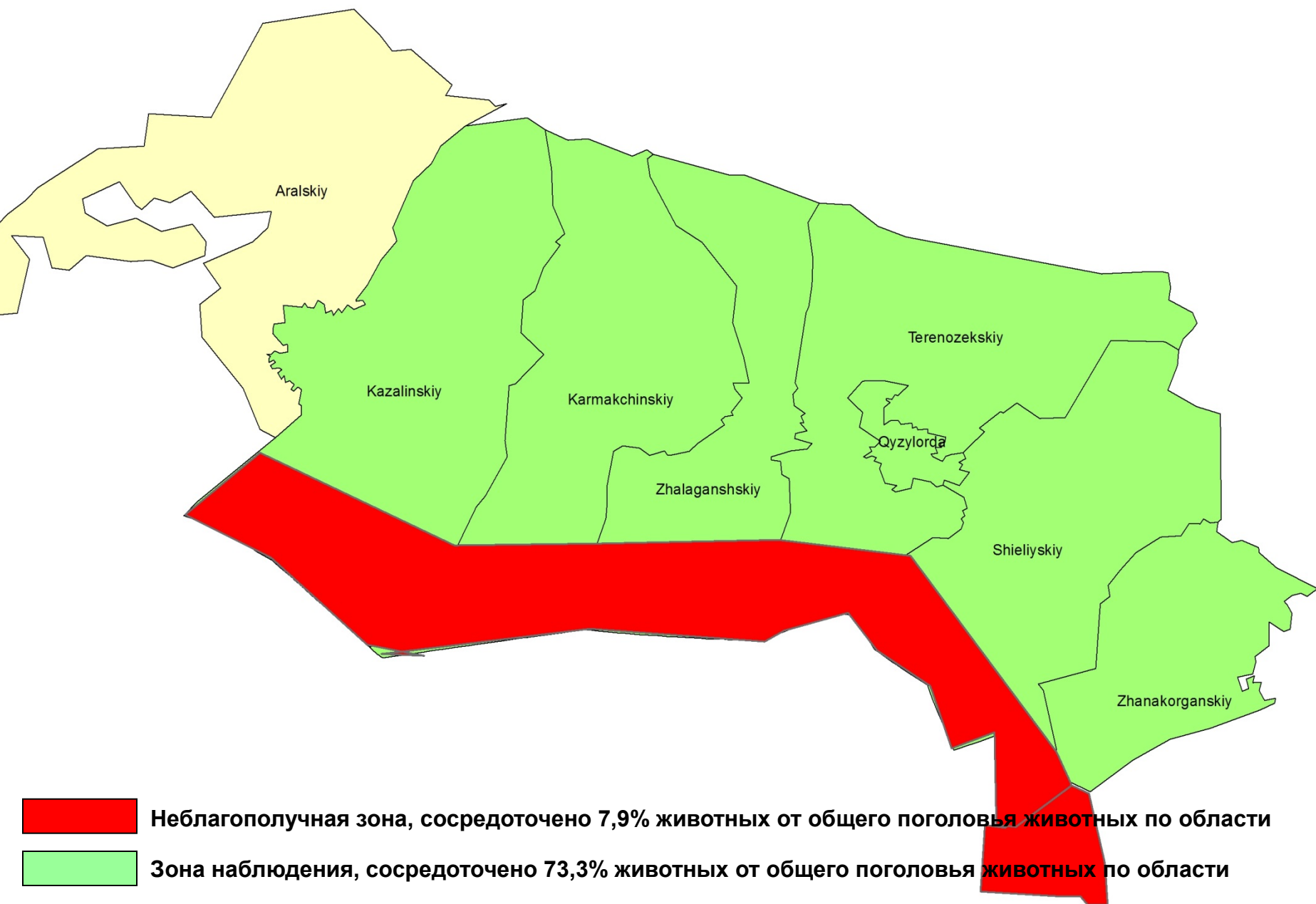
-  Неблагополучная зона, сосредоточено 57% животных от общего поголовья животных по области
-  Зона наблюдения, сосредоточено 19% животных от общего поголовья животных по области
-  Благополучная/Чистая зона, сосредоточено 24% животных от общего поголовья животных по области



Неблагополучная зона, сосредоточено 74,2% животных от общего поголовья животных по области

Зона наблюдения, сосредоточено 16,5% животных от общего поголовья животных по области

Благополучная/Чистая зона, сосредоточено 9,1% животных от общего поголовья животных по области



Неблагополучная зона, сосредоточено 7,9% животных от общего поголовья животных по области

Зона наблюдения, сосредоточено 73,3% животных от общего поголовья животных по области

Благополучная/Чистая зона, сосредоточено 18,7% животных от общего поголовья животных по области

Мероприятия в буферной зоне

В благополучной/чистой зоне/подзоне:

- 1. Клинический мониторинг животных, восприимчивых к ящуру.**
- 2. Мониторинг антител на НСП вируса ящура двукратно в год (весной и осенью).**
- 3. поголовную вакцинацию животных, восприимчивых к ящуру**
(взрослый КРС два раза в год, его молодняк через каждые 3 месяца до достижения возраста 18 месяцев; МРС двукратно в год не зависимо от возраста; свиней - однократно).
- 4. Оценку иммунного статуса животных против ящура типов О, А, Азия-1.**

- в случае отсутствия антител на НСП вируса ящура или обнаружения антител на НСП вируса ящура менее чем 5% от числа исследованных, проводить клинический контроль за состоянием животных;

- в случае получения двукратного отрицательного результата, готовить предложение по переводу статуса территории в категорию свободной от ящура с вакцинацией;

- в случае обнаружения антител на НСП вируса ящура более чем 5% от числа исследованных, проводить вирусологический мониторинг с целью обнаружения генетического материала вируса и выделения репродуктивного возбудителя.

Мероприятия в буферной зоне

В зоне/подзоне наблюдения:

- 1. Клинический мониторинг животных, восприимчивых к ящуру.**
- 2. Мониторинг антител на НСП вируса ящура двукратно в год (весной и осенью).**
- 3. Поголовную вакцинацию животных, восприимчивых к ящуру**
(взрослый КРС два раза в год, его молодняк через каждые 3 месяца до достижения возраста 18 месяцев; МРС двукратно в год не зависимо от возраста; свиней - однократно).
- 4. Оценку иммунного статуса животных против ящура типов О, А, Азия-1.**
 - в случае отсутствия антител на НСП вируса ящура или обнаружения антител на НСП вируса ящура менее чем 5% от числа исследованных, проводить клинический контроль за состоянием животных;
 - в случае получения двукратного отрицательного результата перевести территорию в статус благополучной/чистой зоны;
 - в случае обнаружения антител на НСП вируса ящура более чем 5% от числа исследованных, проводить вирусологический мониторинг с целью обнаружения генетического материала вируса и выделения возбудителя.

Мероприятия в буферной зоне

В неблагополучной зоне/подзоне:

- 1. Клинический мониторинг животных, восприимчивых к ящуру.**
- 2. Мониторинг антител на НСП вируса ящура двукратно в год (весной и осенью).**
- 3. Поголовная вакцинация животных, восприимчивых к ящуру**
(взрослый КРС два раза в год, его молодняк через каждые 3 месяца до достижения возраста 18 месяцев; МРС двукратно в год не зависимо от возраста; свиней - однократно).
- 4. Оценка иммунного статуса животных против ящура типов О, А, Азия-1.**
- 5. Вирусологический мониторинг на присутствие репродуктивного вируса и его генетического материала.**
- 6. По результатам мониторинговых исследований принятие решения о дальнейшем статусе территории (неблагополучная, наблюдения, благополучная/чистая).**

Благодарю за внимание!

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