

059229 WM
EUROPEAN COMMISSION FOR THE CONTROL OF FOOT-AND-MOUTH DISEASE

59229 OF THE Standing Technical Committee

Minutes

↓ of the Meeting held in Rome on 14 March 1960

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A meeting of the Commission's Standing Technical Committee was held in Rome on 14 March 1960. The following members were present: Drs. van den Born, Ritchie, Altara, Galloway, Ubertini and Michelsen. There were also present Drs. França e Silva and Willems from the Office international des épizooties, Drs. van Bakkum and Boldrini and Sir T. Dalling and Dr. E. Fogedby of the Secretariat.

Dr. van den Born was appointed Chairman of the Meeting.

The agenda, as circulated was adopted.

Reports of Meetings of the Research Members of the Committee

Summaries of the meetings held in Lindholm on 7-9 July 1959 and in Brescia on 10-11 March 1960 were given by the respective chairmen of the meetings.

A considerable amount of discussion centred round the statement that the general impression at the meeting in Brescia was that vaccines in use today in European countries are less efficient immunizing agents than vaccines used soon after vaccination was introduced. It was emphasized that the position in Belgium, Switzerland, Italy and Denmark was more than an impression. The evidence lay in the longer time for satisfactory immunity to develop and its shorter duration in vaccinated young cattle. Field observations in Holland, however, did not support these observations in so far as that country is concerned. Among the probable causes, emphasized were variations which may have occurred in the strains of virus causing the outbreaks over the years.

The Committee agreed that the subject should be placed on the agenda of the next meeting of the research group and that members should furnish available data.

It was also pointed out that the non-specific deaths in injected mice was not found in all the laboratories in which they are used for testing purposes.

Prevention of the Introduction of Exotic Strains of the Virus into European Countries

At the request of the Chairman, Dr. Galloway reported on the most recent results of examination of samples from different parts of Asia and Africa. The Asia I and the SAT I, II, and III types of the virus had been so named because of their first recognition in specimens received from Asia and Africa, respectively. None of these

types had yet been diagnosed in Europe. The Asian type was recognised by the Pirbright Institute first in 1954 in specimens from Pakistan and soon after from Thailand. Since its discovery it had been found by the Pirbright Institute in specimens from Burma, Vietnam, India, Pakistan, Afghanistan, Iran, Israel, Lebanon and Syria. It was pointed out that the finding of the Asian type virus in those countries did not necessarily imply that the virus had suddenly appeared in them or that it had recently been imported to them. The more samples that are examined the more is a type of virus in a country likely to be recognised and the more does the picture of the disease change in an area. This was clearly shown in Africa. African types of the virus have now been recognised in Egypt, Sudan and the Belgian Congo as well as in the southern and eastern parts of the continent.

Attention was directed to the meeting in Paris on 21-22 January 1960 between representatives of the Commission and the Office international des épizooties and the conclusions by the meeting which were distributed. It was noted that "the wish was expressed that OIE would confirm the appointment of the Animal Virus Research Institute, Pirbright, as the World Foot-and-Mouth Disease Reference Laboratory already appointed as such by FAO". Dr. Willems stated that he would do everything possible at the meeting of the OIE Commission on Foot-and-Mouth Disease in Paris in May 1960 to ensure that this was brought into being and to encourage OIE member countries in Asia and Africa to send samples from all outbreaks to the Pirbright Institute for diagnosis of the type of the infecting virus. He pointed out that many difficulties would arise if more than one laboratory handled specimens from those parts of the world for identification of types of virus. Professor Altara supported the view that the Pirbright Institute should be accepted as the World Foot-and-Mouth Disease Reference Laboratory.

Mr. Ritchie felt that the results of the meeting in Paris were very useful but thought that the danger of importing animals and some kinds of products of animal origin into European countries should be stressed. He also commented on the great danger which might follow the handling of exotic viruses in European laboratories and referred to the recent escape of virus type SAT II from the Pirbright Institute. Because of the rapid reporting of the outbreak, and the application of the full slaughter policy as practised in Great Britain, no spread took place and the infection was eradicated actually before the type of the infecting virus was known. It was, however, only because of the application of the strict control measures that no spread took place. Mr. Ritchie was congratulated on the results of the work and on the action he took in making the occurrence known throughout the world.

There is abundant evidence that the virus of foot-and-mouth disease may be present in meat imported from infected countries. Reference was made to outbreaks in Great Britain attributed to meat imported from South America and to the possibility of outbreaks which could occur in any European country due to exotic virus types in meat from some regions and countries in Africa and Asia. The need for the adoption and practice of the strictest precautions to prevent such occurrences was stressed, especially in view of the likelihood of pressure being exerted to begin or increase imports of meat into Europe from these continents. Some discussion

took place on preventive measures such as importing only from known free areas, control of movement of animals to slaughterhouses, selection of slaughterhouses for dealing with animals for meat export and the adoption of satisfactory quarantine of animals intended for slaughter. In some exporting countries the adoption of such precautions would, however, present difficulties especially concerning cattle, the property of native populations. The disease may exist in such a mild form that little notice is taken of its presence and it is only when cattle are collected for any purpose e.g. dipping, and careful examinations are made that the infection is diagnosed. Of course, frank and acute outbreaks also take place when diagnosis is simple.

Reference was made to the possibility of limiting imports to boned meat with a view to reducing the risk of importing the virus. It was pointed out, however, that although virus may remain in bone-marrow of infected animals for long periods, it is also present in lymph nodes and in residual blood. In addition, consumers would probably be unwilling to purchase boned meat, preferring meat in the form of joints. Until recently, some 80,000,000 pounds of boned salted meat in relatively small pieces were imported from South America in barrels into the U.S.A. for manufacturing purposes. This import has now ceased following research work on Plum Island which confirmed the work at the Pirbright Institute on the persistence of the virus in lymph glands and residual blood of infected animals.

The meeting fully agreed that foot-and-mouth disease virus can enter a country through imported meat of infected animals, that precautions can be taken to reduce the risk attached to such imported meat, that the importation of boned meat would reduce the risk and that, although veterinary supervision would not solve the problem, every effort should be made to prevent the introduction of infection through imported meat. It was also agreed that, because of the importance of the subject, a meeting of representatives of the European Commission and of the OIE Commission should meet to discuss the whole problem and make recommendations. The meeting could probably take place in Paris in May 1960.

Supplies of Antisera against Exotic Strains

The Chairman drew attention to the discussion on this subject at the Sixth Session of the Commission and to the statement in the report of the joint meeting in Paris in January 1960 that "the wish was also expressed that the Pirbright Institute would make available specific antisera of exotic types of the virus to European laboratories so that the diagnosis of such types could be made without delay".

The discussion included the use of antisera produced in guinea-pigs and in cattle and the value of these antisera in tests for identifying types of virus e.g. complement fixation, neutralization in mice, neutralization of virus in tissue culture, complement fixation tests with virus in tissue cultures.

Dr. Galloway undertook to supply small amounts of the respective antisera produced in guinea pigs from exotic virus types to European laboratories. The Secretariat of the Commission was requested to consider to which laboratories antisera should be sent and the amounts which would be required. It was understood that a charge would be made by the Pirbright Institute for the antisera.

It was also clearly understood that the antisera would be used only for tests in which the classical antisera did not give a positive results and that samples of the virus in which there were indications of positive results with the exotic antisera would be sent to the Pirbright Institute where any further work on them would be carried out. The great danger of European laboratories, other than the Pirbright Institute, handling or even maintaining exotic types of the virus was stressed.

Production of Vaccine against Exotic Strains of the Virus

In introducing this item, the Chairman referred to the meeting in Paris in January 1960 and to the conclusion that "there should be available reserve stocks of specific vaccines against exotic types, in order to meet the immediate needs of an emergency", and that the European Commission had undertaken "to look for places where such vaccines might be prepared". It was explained that the Secretariat had written to Dr. Galloway on the subject.

Dr. Galloway explained that he and his colleagues had given consideration to the preparation of such inactivated vaccines and had already done some work. The work has been stopped in the meantime because of alterations in progress at the Institute but would commence again in June of this year. He will then be able to prepare small quantities of the vaccines, which can be held for emergency use. He was also prepared, in the event of an outbreak of the disease caused by an exotic type of the virus to send to the infected country a sample of the appropriate virus from which the country could prepare further supplies of vaccine.

Details of supplies required and other relevant points were left for discussion between Dr. Galloway and the Secretariat.

Supplies of Vaccine to Member Countries when Required

This subject had been discussed at several meetings of the Session. While most vaccine-producing countries have adequate supplies of vaccine to meet their needs, some member countries would increase their vaccination programs if a supply of vaccine at a reasonably cheap price could be made available.

At former meetings, representatives of some member countries expressed their agreement to a scheme for the Commission arranging such supplies. No action has, however, yet been taken. It was felt that the time had now arrived to take action and the Secretariat was instructed to take up the question in its various aspects.

A suggestion was made that some 10 per cent of vaccine produced should be reserved for other countries. This was felt to be an excessive amount.