



## Preparation of a strong LSD contingency plan

Session 1: Contingency planning, risk management and communication

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We do not want to see  
this anymore!



## Contingency plan

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- **“Contingency plan”** = to take account of a possible future event or circumstance
- **“Contingency planning”** = is to model probable emergency disease situations and on the basis of this to plan and rehearse the optimal response mechanisms to the emergency that will allow the disease to be controlled and eradicated in the most rapid and cost-effective way

## Contingency planning

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### **Objectives include to:**

- Protect animal and human health
- Minimize economic loss e.g. culling of animals, movement restrictions
- Minimize the disruption of the food supply chain
- Minimize damage to environment

## How tricky is CP for LSD

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- Countries are classified as “infected”, following an outbreak or use of any vaccine against CaPV
- After eradication, three years are required to regain the disease-free status
- Only live vaccines are available
- Vector transmitted disease

## Are we ready?

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Contingency planning should cover:



- During an epidemic disease eradication is often not a technical challenge
- The challenge in CP relates in particular to decision making in the pre-epidemic period.

## Main challenges

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- Stop the spread
- Control and eradicate the disease
- Save the trade
- Win the farmers
- Bureaucracy
- Reinstatement of the LSD free status?
- Reporting?



## Structure of CP

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- **a resource plan**
  - **a specific disease contingency plan**
  - **an operational manual**
- ✓ *CP should clear and not too long*
- ✓ *Should provide veterinary authorities with sufficient information to decide which policy to use for control and eradication of the disease enforced by the law*



## National Disease Control Center



## Local Disease Control Center

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### ***Establishment of LDCC***

- *Tasks and duties*
- *Equipment*
- *Communication*

### ***Local operational plans***

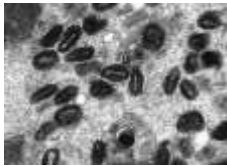
- *Animal and holding census*
- *List of contacts (staff, veterinary organizations, fire brigades, police, ....)*
- *List of equipment*
- *List of locations for burial or burning of carcasses, disinfection posts, ...*

## Risk assessment center

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- ✓ Opinion on “Yes” or “No” for vaccination
- ✓ Request for EFSA’s opinion

## The three pillars



**Etiology**  
**Epidemiology**  
 Susceptible species  
 Incubation period  
 Virus resistance  
 Virus transmission

**Clinical signs**  
**Pathology**  
**Laboratory diagnosis**  
 ✓ **Types of samples and collection**  
 ✓ **Sending of samples**  
 ✓ **Laboratory tests**  
 ✓ **Laboratory preparedness**  
**Differential diagnosis**

**In case of suspicion**  
**In case of confirmation**  
 ✓ **Measures at the infected holding**  
 ✓ **Measures at slaughterhouse or means of transport**  
 ✓ **Restriction zones**  
 - Protection zones  
 - Surveillance zones  
 - Others (if necessary) – Vaccination area, Surveillance area around the vaccination area etc.

- Culling
- Disposal of carcasses
- Disinfection
- Vector control
- Vaccination

### I. About LSD

### II. Diagnosis

### III. Measures

- Competent staff - disease experts and supporting laboratory staff
- Equipment (including back-up equipment)
- Sufficient sample testing capacity
- Sample transport and management system
- Testing protocol (selection of appropriate tests)
- Supplies and storage of diagnostic kits, reagents, materials
- Appropriate laboratory QA system

## LSD suspicion

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- Measures pursuant to Article 4 of Council Directive 92/119/EEC.
- Laboratory diagnosis is essential to rule out or confirm the disease.
- Epidemiological investigation.
- The measures shall not be withdrawn until the suspicion of the presence of the disease has been ruled out by the official veterinarian



## LSD or not LSD?

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## LSD or not LSD?

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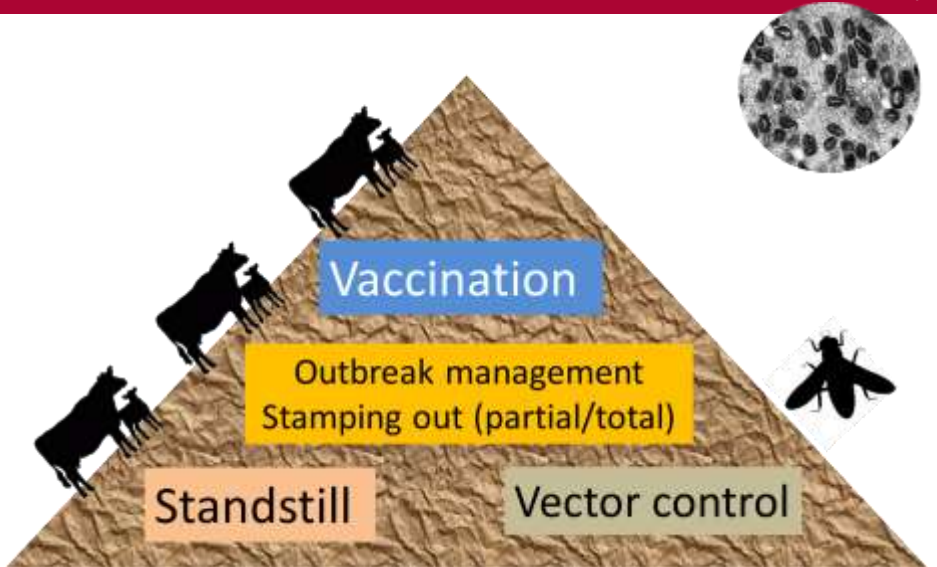


## LSD or not LSD?

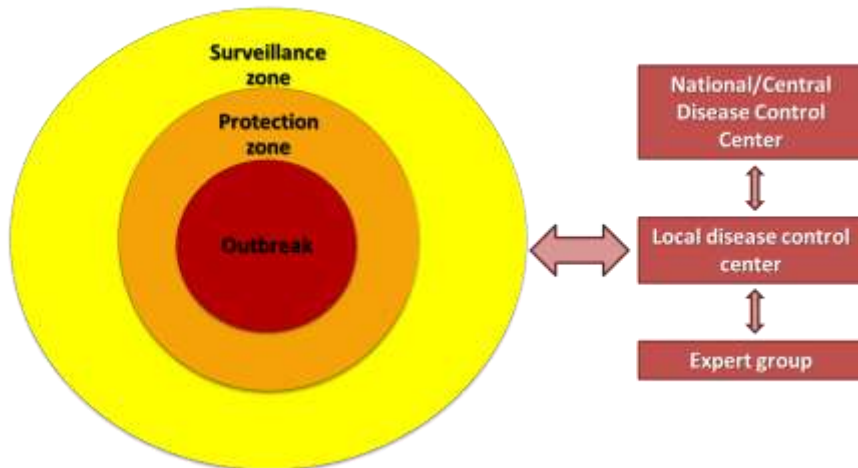
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## LSD confirmation



## Zoning



In case of vaccination: restricted, buffer, free zones

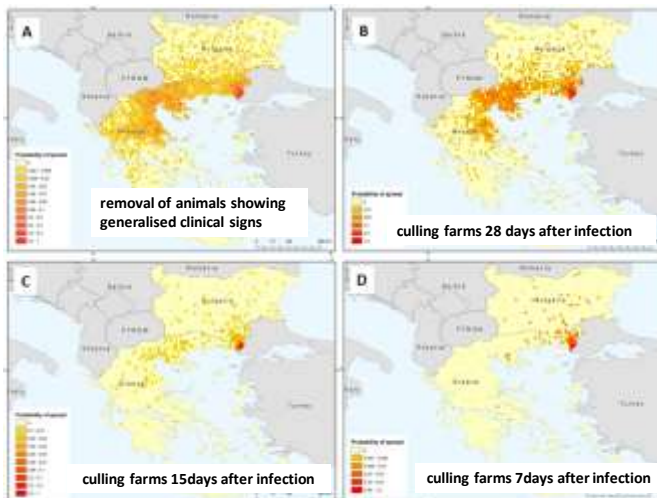
# Animal owners and traders

### Disease awareness

### Legal obligations

- Notification of suspicion
- Biosecurity measures

# Worst case scenario: Plan the worst, hope the best!



Simulated spread of lumpy skin disease (LSD) in Bulgaria and Greece when control is (A) by removal of animals showing generalised clinical signs; (B) by culling farms 28 days after infection; (C) by culling farms 15 days after infection; (D) by culling farms 7 days after infection (6 months run)

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- All staff should be thoroughly trained in their roles, duties and responsibilities in the case of an outbreak
- More intensive training needed for key positions
- Training of back-up staff
- Refresh courses for veterinary staff on the disease diagnosis and control (clinical pictures, pathology, notification, ...)
- Courses on sampling
- Courses for animal owners on notifiable diseases (when to report suspicion, biosecurity...)
- Laboratory staff – NRL, CRL
- Simulation exercises (procedures at NDCC, LDCC, ...)

- Simulation exercise and training programme as a part of CP
- Vital tool for preparing administrative and functional responses to emergencies
- Conducting exercises is an important component of planning processes that ensure that responses to emergency events are effective

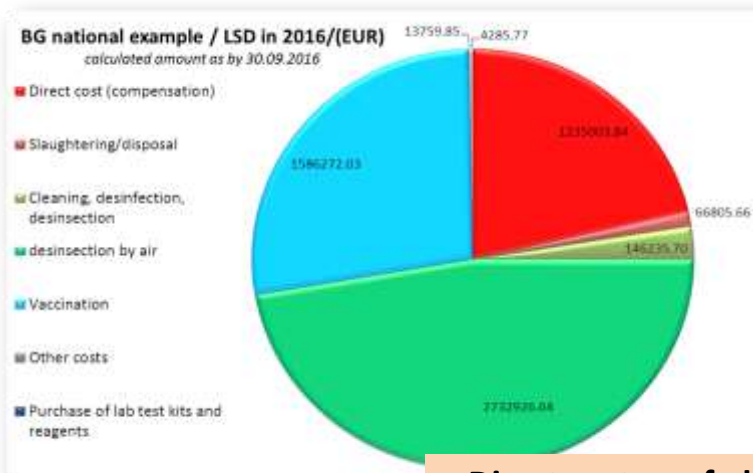
## Main points for strong CP for LSD

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- calculation of all direct and indirect costs for all the different control strategies for different scenarios and the consequences;
- Be ready for many outbreaks at the same time
- Be ready with finalized tender procedure/contract for immediately supply of all vaccine needed;
- Be ready to vaccinate before the disease enters the country (the example of Croatia) or
- to perform emergency vaccination immediately after the first outbreaks

## Economic impact: the example of Bulgaria

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**Direct costs....of about  
€ 5 785 289,49**

*“.....when talking about contingency planning the first words that have to be taken into account are adaptation and flexibility.....”*

## Conclusions

- When prepared, contingency plan should not be treated as a static document
- It should be regularly reviewed and updated
- When reviewing and updating contingency plan the following factors should be taken into account:
  - *changing epidemiological situations, both within the country and externally,*
  - *new disease threats,*
  - *changes in livestock production systems and internal or export trade requirements,*
  - *changes in national legislation or in the structure or capabilities of official veterinary services,*
  - **experiences** *(both within the country and in neighboring countries),*
  - *results from training or simulation exercises and feedback from stakeholders and farmers,*
  - **but also the specificity of the area where it has to be applied.**



# Questions?