15th Conference of the OIE Regional Commission for the Americas
Cartagena (Colombia), 7-11 March 2000

FINAL REPORT
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<tr>
<td>ARS</td>
<td>Agriculture Research Service</td>
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<td>BSE</td>
<td>Bovine spongiform encephalopathy</td>
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<td>CMAEGBG</td>
<td>Mexico-American Commission for the Eradication of Screwworm</td>
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<tr>
<td>COPEG</td>
<td>Panama/United States Committee for the Eradication and Prevention of Screwworm</td>
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<td>CSF</td>
<td>Classical swine fever</td>
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<td>FAO</td>
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<td>ICA</td>
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<td>IICA</td>
<td>Interamerican Institute for Cooperation on Agriculture</td>
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<tr>
<td>IICAB</td>
<td>Institute for International Cooperation in Animal Biologics</td>
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<td>INPPAZ</td>
<td>Pan American Institute for Food Protection and Zoonoses</td>
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<td>ISO</td>
<td>International Organization for Standardization</td>
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<td>OIE</td>
<td>Office International des Epizooties</td>
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<tr>
<td>OIRSA</td>
<td>International Regional Organization for Plant Protection and Animal Health</td>
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<td>PAHO</td>
<td>Pan American Health Organization</td>
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<td>PANAFITOSA</td>
<td>Pan American Foot-and-Mouth-Disease Center</td>
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<tr>
<td>SPS</td>
<td>Agreement on Sanitary and Phytosanitary Measures</td>
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<td>USDA</td>
<td>United States Department of Agriculture</td>
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<tr>
<td>VICH</td>
<td>Veterinary International Consultation on the Harmonisation of Veterinary Medicinal Products</td>
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<td>WTO</td>
<td>World Trade Organization</td>
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Introduction

1. On the invitation of the Government of Colombia, the 15th Conference of the OIE Regional Commission for the Americas was held in Cartagena from 7 to 10 March 2000.

2. Eighty-two Delegates and Observers from fifteen Member Countries of the Commission and five non member countries, as well as seven international or regional organisations, participated in the Conference. The Speakers for Technical Items I, II and III were, respectively, Dr Klaus Nielsen, Researcher with the Animal Diseases Research Institute, Canadian Food Inspection Agency; Dr Alejandro López Inzaurralde, from the Panamerican Foot-and-Mouth-Disease Center; Dr José Dimas Espinosa, Director-General (Panama) of the Panama-United States Committee for the Eradication and Prevention of Screwworm, Dr Javier García Manrique, Director of the Mexico-American Commission for the Eradication of Screwworm and Dr John Wyss, Regional Director of the Screwworm Program for Central America.

Tuesday 7 March 2000

Opening Ceremony

3. The various Speakers and guests of honour participating in the Opening Ceremony were introduced and the Colombian national anthem was played.

4. Dr Luz Alba Cruz de Urbina, Deputy Director of Prevention and Control, Instituto Colombiano Agropecuaria (ICA - Livestock Institute of Colombia) and permanent Delegate from Colombia to the OIE, welcomed participants to the Conference and showed her appreciation in seeing so many representatives of both OIE Member Countries in the Americas and international organisations coming together to meet in Cartagena.

5. Dr Cruz de Urbina expressed her conviction that the active participation of countries in the Working Plan of the OIE Regional Representation for the Americas is a key factor in facilitating international trade by harmonising regulations within the framework of the Sanitary and Phytosanitary Agreement (SPS) of the World Trade Organization (WTO). Furthermore, active participation in the Working Plan will favour training and cooperation amongst the countries in the region.

6. The Delegate from Colombia then discussed the important challenge facing the countries of the Americas: the modernisation of Veterinary Services within the perspective of a quality management system for the food production chain that integrates the various official sectors, producers, the livestock industry, private veterinarians, universities and the veterinary medicinal products industry. Dr Cruz de Urbina concluded her speech by wishing all participants an enjoyable stay in Cartagena.

7. Dr Eduardo Correa Melo, Vice-President of the OIE Regional Commission for the Americas, explained that the President of the Regional Commission, Dr Emerio F. Serrano Ramírez, was unable to attend the first day of this Conference. On behalf of the President, he thanked the host country for its warm and hearty welcome to the beautiful city of Cartagena de Indias. He praised the relevancy of the various scientific subjects to be discussed and the other administrative issues to be looked at, including the preparation of the Regional Commission in view of the considerable number of elections to be held in May in Paris.

8. Dr Jean Blancou, Director General of the OIE, expressed his gratitude to the Colombian authorities for having organised the 15th Conference of the OIE Regional Commission for the Americas so efficiently. The Director General briefly summarised the very timely subjects to be treated during the Conference and expressed his appreciation for the great interest shown in the items by the Member Countries, observers and international organisations attending the meeting. He then underlined the remarkable accomplishments of Colombia in the control of foot and mouth disease. The Director General concluded his speech by wishing great success to all participants for the meeting and thanking, in the name of all of the participants, the Colombian authorities, and most particularly Dr Alvaro José Abisambra Abisambra and his colleagues, for their warm welcome.

9. Dr Rodrigo Villalba Mosquera, Minister of Agriculture and Rural Development, gave a warm welcome to participants on behalf of the Government of his country. He stressed the agricultural vocation of Colombia and the priority which the government accords to this sector.
10. Dr Villalba Mosquera continued by summarising the work of ICA, which has carried out activities in the agricultural sector for the last 38 years in close collaboration with producers, private enterprise and other State agencies, as well as international organisations involved in the field of livestock production development and the control and limitation of health, biological and chemical risks affecting both production and humans. The Honourable Minister emphasised the success of this institution and described the important progress made within the framework of the 'National Plan for the Eradication of Foot and Mouth Disease in Colombia'.

11. Dr Villalba Mosquera then declared the 15th Conference of the OIE Regional Commission for the Americas officially open and wished much success for the Conference and a pleasant stay in Colombia to all participants.

12. The texts of the above speeches were distributed to the Delegates.

**Election of the Conference Committee**

13. Participants elected the following Conference Committee:

- **Chair:** Dr Luz Alba Cruz de Urbina (Colombia)
- **Vice-Chair:** Dr Eduardo Correa Melo (Chile)
- **Rapporteur General:** Dr Alejandro B. Thiermann (United States of America)

**Adoption of the Agenda and Timetable**

14. The Agenda and Timetable were adopted with some small modifications.

**Designation of Session Chairs and Rapporteurs**

15. Chairs and Rapporteurs were designated for the Technical Item sessions as follows:

- **Item I:**
  - Chair: Dr Alfonso Torres (United States of America)
  - Rapporteur: Dr Brian Evans (Canada)

- **Item II:**
  - Chair: Dr Hamilton Ricardo Farias (Brazil)
  - Rapporteur: Dr Alberto Pecker (Argentina)

- **Item III:**
  - Chair: Dr Angel Omar Flores Hernández (Mexico)
  - Rapporteur: Dr José David Bolañas (El Salvador)

- **Animal health status:**
  - Chair: Dr Norman G. Willis (Canada)
  - Rapporteur: Dr Miryam Luz Gallejo (Colombia)

**Animal health status in the Americas in 1999**

16. Dr Willis, Chair of the Session, discussed the progress made in the region in disease control. He then invited Delegates of Member Countries to report on any changes that had taken place recently regarding the animal health status of their countries.

17. The most significant epidemiological events reported in the Americas region in 1999 were summarised. The following report is based on information sent to the Central Bureau by both OIE Member Countries and non member countries, as well as information received during the Conference.
List A diseases

Foot and mouth disease

18. The countries of North America and Central America, the West Indies, the Guyanas, Chile, Uruguay and the north-west region of the department of Choco in Colombia remained free from foot and mouth disease (FMD) without vaccination.

19. No outbreaks have been reported in Argentina and Paraguay, which were classed among the 'FMD-free countries where vaccination is practised' in May 1997. Argentina stopped vaccination in April 1999 in the hope of being recognised as FMD-free without vaccination during the General Session in May 2000. The representative from Argentina informed participants that both a compensation fund and a vaccine bank exist in his country. Paraguay ceased vaccination in July 1999 and hopes to be recognised as FMD-free without vaccination by May 2001. In this country as well, compensation funds and a vaccine bank have been set up.

20. In May 1998, the OIE recognised the States of Rio Grande do Sul and Santa Catarina, in Brazil, as disease-free zones where vaccination is practised. In the following States the disease has not been reported since the date indicated in brackets: Federal District (May 1993), Paraná (May 1995), Goias (August 1995), Mato Grosso (January 1996), Sao Paulo (March 1996), Espirito Santo (April 1996) and Minas Gerais (May 1996). In other States in the country, 37 outbreaks of the disease were reported in 1999 compared to 35 reported in 1998. Virus serotypes 'O' and 'A' were isolated. In January 1999, FMD occurred in two neighbouring farms in the State of Mato Grosso do Sul. The 'O' serotype was isolated. All the cattle, sheep and pigs present on the two farms were slaughtered and their carcasses destroyed. A survey carried out within a 25-km radius did not detect any other outbreaks.

21. Colombia pursued its regulatory efforts to have part of the departments of the Atlantic coast, the department of Antioquia and a part of the department of Caldas recognised as an 'FMD-free zone where vaccination is practised' by the year 2002. Five outbreaks of FMD were reported in 1999, due to 'O' and 'A' virus serotypes, in other zones of the country.

22. In Peru, where the virus serotype 'A' had not been isolated since 1996, six outbreaks due to this serotype occurred in the departments of Ayacucho (1), Lima (4) and Piura (1). Modified stamping-out and vaccination were implemented to control the outbreaks.

23. Venezuela reported that thanks to coordination with producers, the country should soon attain a vaccination coverage of 80%. Disease-free status with vaccination for the State of Bolivar is hoped for by 2002, for the eastern part of the country by 2003, and for the rest of the country by 2006.

24. The disease was also reported in Bolivia, Ecuador and Venezuela.

Vesicular stomatitis

25. No outbreaks of vesicular stomatitis have been reported in the United States of America since June 1999.

26. The highest occurrence of the disease in 1999 was once again in Colombia (461 outbreaks). In El Salvador, 129 outbreaks of vesicular stomatitis were reported in 1999, 56 in Panama (19 cases due to the ‘Indiana’ strain and 37 due to the ‘New Jersey’ strain), 30 in Costa Rica (from June to November), where the disease is considered endemic, 27 in Peru, 25 in Brazil, 21 in Guatemala, 130 in Venezuela (the majority caused by the ‘New Jersey’ strain), 16 in Honduras (from January to March), 6 in Ecuador (between June and July) and 2 in Mexico (up to April).

Classical swine fever

27. Classical swine fever was reported in 1999 in Argentina, Brazil, Colombia, the Dominican Republic, El Salvador (where a decrease of 69% in the number of outbreaks was reported), Guatemala, Honduras, Panama, Peru and Venezuela (where one case was reported in February 2000, from a contraband source originating outside Venezuela, after two years of absence of the disease).
28. The disease was also reported in Mexico, where disease-free areas exist in thirteen States and in several States vaccination is used to prevent re-infection. A total of 4 500 000 pigs have been vaccinated. This led to a decrease in the number of outbreaks from 150 in 1997 to 44 in 1999. In the last four months, no outbreaks have been reported and the disease is therefore expected to be eradicated in the near future.

29. Eradication programmes are underway in Argentina, Brazil, Colombia and Paraguay.

30. In Uruguay, where vaccination was stopped in 1995, a total of 1 099 samples taken from animals intended for export and 850 from other animals were analysed, with negative results.

31. The following countries informed the Conference that they are newly free of the disease: Canada, Chile, Costa Rica and Uruguay.

**Highly pathogenic avian influenza**

32. Mexico reported having eradicated this disease in 1995 but has maintained a control programme for the low pathogenic strain. Of the 470 farms originally quarantined for the disease, only four remain under quarantine.

**Newcastle disease**

33. In Argentina, Newcastle disease affected pigeons in the province of Buenos Aires, in an urban area with no commercial poultry farms. The representative from Argentina informed participants that his country had been recognised by the European Union as being a region free from Newcastle disease.

34. In Brazil, a pathogenic strain of the disease was isolated from passeriforms imported and placed under official quarantine in August 1999, in Paraná State. All the birds were slaughtered and destroyed. In the same month, birds on a non-commercial property were affected by the disease in the State of Rio de Janeiro. Stamping-out was implemented and the carcasses were incinerated and buried in situ.

35. In Canada, Newcastle disease was diagnosed in August 1999 in a cormorant specimen in the province of Alberta. As in past years, the disease was not found in domestic poultry.

36. In Venezuela, the disease occurred on a commercial broiler farm in April 1999. Chickens that were still healthy at the age of six weeks were sent for slaughter.

37. The disease continues to be reported in Colombia, the Dominican Republic, Guatemala and Mexico.

38. Eradication programmes are being carried out in Colombia (for the velogenic form of the disease) and in Mexico (where a large part of the country is free of the disease, but where 20 cases of the velogenic form were reported in 1999). Paraguay reported that within the framework of its eradication campaign, mesogenic strains were no longer used among the vaccines produced by the national industry.

**List B diseases**

**Aujeszky's disease**

39. The Delegate from the United States of America informed participants that an accelerated eradication programme began in 1999; approximately 800 000 pigs have been slaughtered.

**Leptospirosis**

40. Venezuela reported that the disease was present in the country and that between 55 and 65% of the samples sent to laboratories showed positive results.
**Rabies**

41. Canada reported that the racoon strain of the disease had been confirmed in several feral racoons (*Procyon lotor*), in the province of Ontario, in close proximity to the border with the United States of America. A wildlife bait programme is in effect and the programme of area depopulation, perimeter trapping and vaccination has proved to be effective.

42. Costa Rica informed participants that bovine paralytic rabies was still present but not in urban areas. In Paraguay, the disease remains present in both rural and urban areas, but incidence of the disease seems to be diminishing.

43. In Panama, vampire bat rabies subsisted in the western and central parts of the country but with low incidence and in the province of Panama a high incidence of the disease has been noted. A prevention programme is underway with massive vaccination, capture of vampire bats and use of anticoagulants.

44. In Venezuela, 37 cases tested showed positive results for the disease. During 2000, the cycle of vaccination in cattle was synchronised with that of foot and mouth disease. Epidemiological surveillance and control of vampire bats continues.

45. In French Guyana, bat rabies is endemic. All cattle aged over nine months are vaccinated against this disease.

**New World Screwworm**

46. Panama reported only 32 positive cases in January 2000. No further positive cases are expected in 2000.

**Bovine brucellosis**

47. Argentina is currently implementing a national eradication programme. Brazil reported on the implementation of a programme to control this disease and to aid producers. Costa Rica has implemented an eradication programme involving private veterinarians. Uruguay also mentioned the existence of an eradication programme. Colombia informed participants that during 1999 a brucellosis eradication programme, based on a free zone and farm strategy, had been implemented.

48. Canada reported that its domestic cattle population remains free of the disease. Since the last General Session, the country's serological surveillance programme for the domestic cattle population has confirmed no evidence of brucellosis, bluetongue and anaplasmosis.

49. Chile reported that it is currently working on eradication of this disease and is planning to establish a brucellosis-free zone in the south of the country. The disease is expected to be eradicated by the end of 2000 in the 12th Region.

50. El Salvador reported that 99 farms are free from the disease.

51. In Panama, of a total of 11 outbreaks reported, six cases were new and the others are in the final phase of eradication. Monitoring in abattoirs is practised, and herd prevalence has been evaluated at 0.3%; little change was registered between 1998 and 1999. Movement of cattle within the country is controlled, official serological tests are used and health certificates are issued only when test results are negative.

52. A prevalence of 3.1% has been registered in Paraguay, where all animals showing positive results are slaughtered.

53. Venezuela reported a positive rate of infection of approximately 20%. Official testing for the disease is mandatory. Vaccination with S-19 and R-51 strains continues, especially in dairy cattle. However, the availability of brucellosis vaccines has proven difficult, leading to lower coverage for the last year than in previous years.

54. The Delegate from the United States of America reported that his country had hoped to finish 1999 with no infected herds, but that in January four herds remained infected. He mentioned that wild bison in Yellowstone Park were also affected by the disease.

**Bovine tuberculosis**

55. Brazil, Costa Rica and Uruguay gave details on the implementation of programmes to eradicate this disease.
Colombia reported that its bovine brucellosis situation is stable and that eradication is continuing in the country.

El Salvador stated that in the eastern part of country over 19,000 cattle on 232 farms had tested free from bovine tuberculosis.

The last recorded case of the disease in Panama was in 1982. In 1997, the disease was detected and the country is in the process of eradication. A surveillance programme, associated with the New World Screwworm system, is in place.

Paraguay reported an incidence rate of 0.4% in dairy cattle and added that all infected animals are eliminated.

In the United States of America, only two States remain affected by the disease (Michigan and Texas). The rest of the country is free.

In Venezuela, the prevalence of the disease is less than 1% in milk herds and in herds used for both meat and milk.

Two outbreaks of this disease were reported on the French island of Martinique and infected herds were slaughtered.

Scrapie

In Canada, the number of cases of scrapie has decreased from 78 to 6 over the last twelve months. As part of the overall Transmissible Spongiform Encephalopathy Surveillance Plan in the country, sheep brains are examined both at slaughter and from all animals demonstrating neurological signs.

Epidemiological surveillance continues for this disease in the United States of America, where 10,000 ovine brains will be examined. An eradication programme for scrapie should begin next year.

Equine encephalomyelitis (Eastern and Western)

A surveillance system for this disease is in place in Colombia, Costa Rica and Venezuela. Colombia reported that there is an official prevention and control programme with official vaccination of all equids in the risk zones.

Glanders

In Brazil, glanders was diagnosed in working equids in the States of Pernambuco and Alagoas, in December 1999. The affected properties were placed under quarantine.

Venezuelan equine encephalomyelitis

Venezuelan equine encephalitis remained a concern in Colombia, where a mass vaccination programme is currently underway.

Venezuela reported the absence of outbreaks during 1999. Vaccine coverage was between 80 and 90%.

White spot disease

Seventy-one cases were reported in Panama and a control programme is being implemented according to OIE recommendations.

Other diseases

West Nile fever

In the United States of America, West Nile virus circulated in a limited area distributed in the States of Connecticut, Maryland, New Jersey and New York. Clinical illness in humans and horses occurred from early August through late October 1999 and coincided with deaths of crows (Corvus sp.) and other wild birds. Prior to 15 December 1999, 23 cases of West Nile virus had been identified in horses, all in Suffolk and Nassau Counties.
on Long Island, New York. The causal virus was isolated in humans, horses, wild birds and mosquitoes. Its genetic sequencing showed strong similarities to isolates from the eastern Mediterranean region. The epidemics ended because of various factors, including climate and vector control activities.

**Amblyoma variegatum infestation**

71. Barbados reported the presence of the bont tick and added that its fight against this tick was part of a Regional Eradication Programme supported by both United Nations Food and Agriculture Organization (FAO) and the Inter-American Institute for Cooperation on Agriculture (IICA). Of the two diseases associated with this tick, namely dermatophilosis and heartwater, only dermatophilosis is recognised.

72. The Delegate from France spoke of a campaign against this tick in Martinique and Guadeloupe but informed participants that the campaign was hindered by the existence of wild vectors (birds and stray dogs, for example).

**Infectious salmon anaemia**

73. Seventy cases of this disease were reported on the east coast of Canada.

**Sheep mange**

74. Chile gave information on the re-eradication of this disease in the 12th Region of the country.

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**Bovine spongiform encephalopathy: reports from Member Countries**

75. The following countries informed participants that national surveillance systems were in place: Argentina, Brazil, Canada, Chile, Colombia, Costa Rica, El Salvador, Panama, Paraguay, the United States of America and Uruguay. The country representatives described the various methods used to prevent introduction of the disease into their countries; these methods include import regulations for feed, animals and animal meat products, according to the specifications contained in the OIE International Animal Health Code (the Code).

76. The following countries stated that training was provided for officials working in the field of bovine spongiform encephalopathy (BSE): Canada (for all personnel involved in sampling), Colombia (for all workers in diagnostic and field work), Costa Rica (for government and private veterinarians), and El Salvador.

77. The Delegate from Canada informed participants that harmonisation of import policies for trade in animals and animal products from third countries is underway with Mexico and the United States of America.

78. The Delegate from Barbados informed participants that no specific work was being carried out in this area except for prohibiting the inclusion of certain specified bovine offals in feed for livestock.

79. The Delegate from Brazil raised the question of the import of genetic material and wondered if the authorisation of these imports was sufficiently based on concepts of risk analysis.

80. Several countries, including Costa Rica, El Salvador and Panama, noted the relatively low level of production and import of goats and sheep in their countries, which reduces the risk of transmissible spongiform encephalopathy. They requested that the number of samples to be tested according to the requirements by the OIE International Animal Health Code be reduced for countries that are not considered at high risk.

81. The Delegate from Mexico underlined the importance of BSE in animal health and its great impact on trade. He agreed that the conditions established for BSE testing are not fair for many countries in the Americas and considered that many of these conditions should be changed. He felt that it was not just to include in the same categorisation (‘provisionally free’ from BSE) on the one hand, countries that had never had a confirmed case of the disease, and on the other hand, those where the disease has been present in the past. He requested that a recommendation be formulated on this subject to adopt a more equitable practice regarding this categorisation.

82. He added that both active and passive surveillance for the disease is conducted in his country but that the disease is considered exotic. As from 1991, import restrictions for certain products are in place.

83. Paraguay supported the suggestions made by Brazil and Mexico and called on the OIE to develop clear and less restrictive rules for those countries that have never had cases of BSE.
84. The Delegate from Uruguay felt that the region of the Americas has suffered punishment due to the absence of distinction between countries where the disease is indigenous and where it is exotic and has never been detected. He recognised the important work accomplished by the OIE Code Commission and the Ad hoc Group on BSE, but expressed his lack of satisfaction with the draft chapter on BSE to be presented to the OIE General Session in May 2000.

85. He lamented the fact that Uruguay's comments on this subject did not reach the Code Commission for their consideration. He added that there should also be a distinction made between countries where no cases have been recorded but where surveillance systems exist and those countries where no surveillance is carried out. He reminded participants that New Zealand had proposed different sampling methods for countries without the classical risk factors and where no cases have been registered and regretted that this proposal had not been further pursued by the Code Commission.

86. Finally, the Delegate from Uruguay stated that he shared the concerns of most of his colleagues in the region concerning new issues, such as importation of genetic material, and proposed that a group be formed to establish clear rules on different classifications of freedom from BSE.

87. The Delegate from the United States of America expressed some concern that the OIE is the agency declaring disease-free status from certain diseases, insofar as the legislation in his country does not allow for a national decision to be made strictly on the basis of an international organisation's declaration of disease-free status. He added that only through bilateral information exchanges and negotiations was it possible for his country to trade on the basis of recognition of health status.

88. Dr Alejandro Thiermann, Vice-President of the OIE Code Commission, informed participants that many of the suggestions given today have already been studied and included in the text sent by the Commission to Member Countries for adoption at the upcoming OIE General Session. He implored Delegates to make known their comments on BSE to the Code Commission more frequently, mentioning that while 155 countries were members of the OIE, only some 20 countries had sent comments on this subject. He added that the subject of surveillance and monitoring systems for countries showing lower risk factors and low incidence of chronic neurological disease was being addressed by the Code Commission by means of a new Ad hoc Group.

89. Dr Thiermann explained that cooperation with the OIE Standards Commission has continued to examine new methods of diagnosis. He stated that an Ad hoc Group on scrapie would meet between now and the next General Session and that the Code Commission would report their findings to the International Committee. He agreed with the doubts expressed by the Delegate of the United States of America as to whether the OIE is the appropriate organisation to determine and accredit disease-free status.

90. It was proposed to establish a group to draft a recommendation on this subject; the group consisted of Dr Thiermann and the Delegates of Costa Rica, Mexico, Panama, Paraguay and Uruguay.

Evaluation of the implementation of the OIE Strategic Plan for the Americas

91. Prof. Emilio Gimeno, Coordinator of the OIE Regional Representation for the Americas, outlined the development of the Strategic Plan for the Americas. During 1998, a group composed of Dr Emerio Serrano Ramirez, Dr Joan Arnoldi, Dr Correa Melo and Dr Cristóbal Zepeda Sein, with the support of Dr Robert Werge, in coordination with interested countries, drafted a strategic plan for the Americas. The plan contains three major objectives: 1) strengthening of Veterinary Services; 2) information, including risk analysis; and 3) diagnostic standards and harmonisation of veterinary medicinal products throughout the region.

92. Various tactics have been identified to achieve these objectives. Seminars on animal identification, quality assurance systems for Veterinary Services and integration of the private and public sectors have been held in Buenos Aires (Argentina). Reports on these two seminars were distributed to all Member Countries.

93. Prof. Ulrich Kihm (Switzerland), President of the OIE Ad hoc Group for the Quality and Evaluation of Veterinary Services, was asked to discuss evaluation problems in terms of Veterinary Services and international trade. Prof. Kihm spoke of quality in Veterinary Services, for which ethical, organisational and technical aspects are the three fundamental principles. Compliance with these three principles by all Veterinary Services is essential.
He noted that the Regional Commission for the Americas has already endorsed these principles and has gone ahead with their implementation.

94. Prof. Kihm then introduced a system for developing a quality system for Veterinary Services. This system consists of five steps:

- principles of Veterinary Services and a description of the livestock industry;
- inspection by experts of trade partners;
- certification (describing all relevant activities in a comparable manner);
- inspection by international experts;
- accreditation by an international organisation such as the OIE.

This approach can only be achieved through a step-by-step process, which will take a certain period of time to complete.

95. Prof. Gimeno went on to discuss the reinforcement of Veterinary Services and spoke of a proposed model and of the experience of several countries in this field. Globalisation and budgetary constraints throughout the world, but perhaps notably in Latin America, have led to the need for constructing small but highly efficient Veterinary Services. He stressed the need for the public sector to play a regulatory role, while the private sector handles execution of programmes. He then called on Dr Vicente Astudillo (Brazil) to discuss possible methods of bringing about such change within Veterinary Services.

96. Dr Astudillo referred to the results of the Seminar on the integration of the private and public sectors in terms of planning, executing and developing animal health programmes. He stressed how important this type of model had been in the success of a number of programmes (eradication of foot and mouth disease in the Southern Cone and in the central regions of Brazil). He explained the benefits of taking all segments of the animal production chain into consideration in health programmes, including consumer representatives, in order to achieve greater social involvement in the various countries. He also underlined the importance of considering the participation of private sector veterinarians, universities and other institutions. Dr. Astudillo placed special emphasis on the impact that this type of model was sure to have in strengthening Veterinary Services in the future, especially in view of the shrinking role of the State in providing services (tax adjustments). This participation had resulted in the mobilisation of resources of every type (including political).

97. Prof. Gimeno called upon Dr José Dimas Espinosa (Panama) to briefly discuss an upcoming seminar, destined for the countries of Central and North America, to be held in Panama on the subject of the integration of public and private sectors for the development of animal health programmes.

98. Prof. Gimeno then introduced Dr Cristóbal Zepeda Sein, observer from the United States of America. Dr Zepeda gave a brief description of the set-up of the Centers for Epidemiology and Animal Health, located in Fort Collins (United States of America). As the OIE Collaborating Centre for Animal Disease Surveillance Systems and Risk Analysis, the Centers have three main responsibilities: the improvement of surveillance systems, the development of risk analysis methodologies and training. The different programmes carried out by the Centers were then outlined, with special emphasis given to the Ad hoc Group on Risk Analysis, whose major objective is to harmonise risk analysis methods, develop a training strategy and establish a network of risks analysis experts in the Americas. Specific objectives include examining the OIE International Animal Health Code chapter on risk analysis, drafting a harmonising document, harmonising concepts and options and creating a database with examples of ‘good practices’.

99. Prof. Gimeno promised participants a draft recommendation outlining the creation of a regional system for risk analysis for the Americas.

100. The Coordinator of the OIE Regional Representation for the Americas then called on Dr Bernard Vallat, President of the OIE International Animal Health Code Commission, who spoke of the current situation in the European Union with respect to consumer demands for food safety and traceability. Dr Vallat mentioned several major differences between Europe and the Americas in terms of traceability; for example, the existence of BSE in European countries has put much pressure on governments to establish clear and firm rules for identifying the origin of animals.
Item I

Brucellosis in the Americas: prospects for diagnosis and control using new vaccines

101. Dr Alfonso Torres, Chair of the Session, briefly introduced the Speaker for this item, Dr Klaus Nielsen.

102. Dr Nielsen began his presentation by stating that brucellosis is a disease of nearly all domestic mammals and man. It is caused by members of the genus *Brucella* and is highly contagious. Therefore, a substantial effort has gone into its control and eradication. A number of regions are free from this disease but the majority are not, including the Americas. Furthermore, there are extremely large populations of susceptible animals in the countries of the region.

103. Eleven OIE Member Countries in the Americas responded to a survey on the epidemiology, laboratory diagnosis, control and management of brucellosis within their jurisdictions.

104. The Speaker recalled that major gains were made by the widespread use of vaccine in the early stages of control campaigns. However, up until a few years ago, the use of vaccine caused considerable diagnostic problems because of cross reactivity.

105. Dr Nielsen indicated that this problem was solved in two ways: by the recent development of a non-interfering vaccine and the development of serological tests that distinguish vaccinal and other cross-reacting antibodies from that induced by pathogenic *Brucella*. A comparison of the available confirmatory test methods in support of an eradication effort would suggest that the fluorescent polarisation assay compares favourably with the competitive ELISA in terms of sensitivity, specificity and ability to differentiate between field strain infected animals and vaccinates. Similarly, it compares very favourably with the buffered plate antigen test in terms of test time and cost. Therefore, it becomes possible to decrease the susceptible population of animals without needless economic loss.

106. The Speaker concluded his presentation stating that future focus should be on national and international control of animal movement, incentive programmes such as compensation to encourage owners to eliminate the disease and a global effort towards the standardisation of test procedures, including standardised reagents and methods, training, accreditation and continuous quality control.

Discussion

107. The Chair thanked Dr Nielsen and opened discussion on the presentation.

108. The Chair then called upon Dr Richard Hill, Director of the United States (US) Center for Veterinary Biologicals, to comment on the US experience in brucellosis vaccination programmes. Dr Hill confirmed that both low dose strain 19 and RB51 are currently in use. The latter remains conditionally licensed pending review of the recently received efficacy data.

109. The Delegate from Mexico questioned whether there had been any work published on the use of RB51 in goats but neither the Speaker nor Dr Hill were aware of any such information.

110. The Delegate from Argentina indicated that RB51 was authorised for use in his country by prescription but was not compulsory under their eradication campaign. Strain 19 is also available.

111. A representative from Colombia requested information as to the efficiency, efficacy and safety of RB51 use in adult cattle. The Delegate from the United States of America responded that the vaccine has been widely used with minimal negative consequence being identified. It is not recommended for use in pregnant animals as it may cause abortion and the possibility of human infection exists.

112. The Delegate from Chile reported that, after a detailed study, RB51 has been approved for use in his country. He added that a seminar/workshop on the use of vaccines in official programmes, sponsored by the Pan American Health Organization (PAHO), had been held in 1999 and that its conclusions would be published soon.
113. A participant from Colombia asked whether it was possible for RB51 to be manufactured outside of the United States of America. Dr Hill indicated that the US Department of Agriculture (USDA) does not control the quantity of vaccine produced nor does it impose export conditions. As it is a commercially produced vaccine, the patent rights and licensing provisions belong to 'Colorado Serum'. Dr Flores Hernández (Mexico) indicated that RB51 has been manufactured in his country under a licensing agreement with the company involved.

114. The Chair once again thanked Dr Nielsen and suggested that a group be formed to prepare a draft recommendation on brucellosis in the Americas. This group was composed of the Speaker, Dr Nielsen, and members of the Delegations of Canada, Mexico and Venezuela.

Wednesday 8 March 2000

Continental Plan for the Eradication of Classical Swine Fever in the Americas

115. Dr Moisés Vargas Terán, Animal Health Official of the FAO, presented the Continental Plan for the Eradication of Classical Swine Fever (CSF) in the Americas, which will be coordinated by the FAO in close collaboration with national and other international agencies.

116. The FAO Representative stated that CSF is a highly contagious disease of domestic and wild swine and constitutes a major constraint to international trade and animal production. The control and eradication of this disease have been defined as a highest priority.

117. The Continental Plan is based on the experience in foot and mouth disease and New World Screwworm control in the region.

118. Its objectives are the following: a) CSF eradication from the Americas; b) strengthening national CSF eradication programmes; c) creation of a transboundary swine disease epidemiological network; d) reinforcement of safe international trade in animals and swine products; and e) increase in animal production. The goal is to achieve CSF eradication by 2020.

119. The major activities of the Plan will be to define, at the regional level, CSF epidemiology; increase the number of officially disease-free territories; coordinate both national and sub-regional programmes; encourage the active involvement of the private sector in financing and Plan implementation; design specific CSF eradication strategies to control sub-regional epidemiological situations; and improve public awareness regarding the importance of CSF.

120. Dr Vargas Terán explained that to facilitate and coordinate national and sub-regional programmes to achieve the Plan’s objectives, the countries will form a 'Steering Committee' (SC), which will act as the normative executive authority. Its President will be elected from among the country representatives. The SC's normative technical decisions will be followed up by the FAO Technical Secretariat and the 'International Technical Council' (ITC) will support and advise the SC. The governmental Veterinary Services representatives, international organisations, Panvet and financing organisations will form the ITC.

121. The expenses of participants attending the SC meetings will be covered by their institutions. The SC programme activities will be financed by the regular budgets of the participating organisations and with extra-budgetary resources identified and approved by SC.

Discussion

122. The Delegate from Brazil congratulated the Speaker and the authors of the Continental Plan for the Eradication of Classical Swine Fever in the Americas. He expressed concern, however, that Brazil may be considered as a unique zone when there are, in fact, three distinct zones (north, north-east and central south). Fifty percent of the pigs in Brazil are located in one of these zones. All of these data should have been more fully taken into account and the Brazilian Ministry of Agriculture is ready to furnish said data so as to revise the Plan accordingly.
A member of the Colombian Delegation expressed worry over the variety of existing vaccines and requested that harmonisation be undertaken in this field. Dr Vargas reassured participants that this harmonisation has been planned for within the framework of the Continental Plan and that even the harmonisation of CSF diagnostic methods has been foreseen.

The Delegate from the United States of America also congratulated the Speaker and asked who would bear the cost of CSF diagnostic reagent distribution and the cost linked to harmonisation.

Dr Vargas admitted that cost constituted one of the essential points for the success of the Plan and that the support of the private sector and the assistance of specialised national laboratories (for example, in Cuba) would be requested.

The Delegate from Mexico expressed his satisfaction with the existence of a comprehensive plan which will limit risk for all countries in the region. However, he felt that for this limitation to be effective, all of the countries would have to begin their eradication programmes simultaneously, and not in stages, as was suggested in the Plan, for example, for the Andean region.

The Delegate from Colombia expressed approval for the Plan and indicated that Colombia was ready to assist in its implementation, notably by proposing the support of its laboratories.

The Delegate from Chile also agreed with the idea of a comprehensive plan but stressed that the Plan should be revised in light of the critical comments made by the interested countries.

The Speaker said that he would be happy to receive all of these comments insofar as they be sent before 1 May 2000.

**Item II**

*Vesicular stomatitis: surveillance, diagnosis and control systems*

The Chair of the Session introduced Dr Alejandro López Inzaurrealde, Speaker for this Item, and called upon him to present his comprehensive report.

Dr López Inzaurrealde pointed out that even though a system for providing periodic information about vesicular diseases has been in place in South America since 1961, it has always clearly been aimed at recording foot and mouth disease, with vesicular stomatitis only being considered as a part of the process of differential diagnosis for foot and mouth disease. It is therefore possible to confirm that no specific vesicular stomatitis information system capable of consolidating all of the information required to carry out full epidemiological surveillance of the disease exists at the continental level.

The Speaker then explained that the epidemiological surveillance of vesicular stomatitis involves integrating information from both the field and the laboratory. The establishment of any epidemiological surveillance system must take into consideration that knowledge of the environmental structures that allow the maintenance and circulation of the disease agents is incomplete and that the existence of a large number of infections with no clinical manifestations has been confirmed.

Dr López Inzaurrealde also remarked that the structure of any such system should include components that permit an active search for the agents' activity in domestic animals, whether apparent or otherwise, as well as in wildlife and insect populations. The establishment of programmes to control the disease depends on this information being available to guide control measures.

**Discussion**

The Chair of the Session congratulated Dr López Inzaurrealde for the quality of his presentation and opened the floor for discussion.

A participant from Colombia spoke of the disease situation in his country. He asked for clarification on the Speaker's statement that vesicular stomatitis should be handled separately from foot and mouth disease (FMD). He insisted that it was necessary to first determine which disease was present in a given case.
136. The Speaker responded that any vesicular disease outbreak should be initially treated as an FMD outbreak and differential diagnosis be carried out. He added, though, that after confirmation of the presence of vesicular stomatitis by laboratory analysis, further study on this disease should be undertaken rather than abandoning all actions in the absence of FMD.

137. The Delegate from the United States of America brought up the subject of other viruses that cause vesicular stomatitis in experimentally vaccinated animals and that could be harmful to humans. He expressed the view that these viruses should be included in any surveillance programme.

138. The Speaker spoke of other viruses that have been isolated and confirmed that further research had to be carried out on these viruses. He added that no statistics existed on human cases, due to inadequate recording of the causes of disease in some countries.

139. The Delegate from Costa Rica described the process followed in his country. He explained that differential diagnosis was carried out but that insofar as certain countries in the Southern Cone have been partially or fully declared FMD-free, surveillance has diminished; this could pose a risk for the region on a long-term basis. He reported that 30 cases of disease in humans had been recorded in his country, but that the actual number of cases was certainly much higher. He called for the creation of a surveillance programme for this disease.

140. Dr Abisambra Abisambra (Colombia) said that a workshop has been planned on the subject of vesicular stomatitis surveillance, and that all participants present would be invited to attend. The meeting will be held in May 2000 in Bogota (Colombia).

141. A participant from Colombia explained that much research on stomatitis is carried out in his country. He emphasised the necessity of determining the epidemiology of this disease, which is very different from that of FMD, in order to successfully combat it. Risk analysis has been carried out and it has shown that female animals around the age of two years were the most susceptible to the disease, perhaps because antibody levels were low in these animals. Work on vaccines continues to be carried out but certain problems persist, such as a lack of knowledge concerning the duration of immunity.

142. The Delegate from Mexico informed participants that in his country the 'New Jersey' virus strain was present. He was under the impression that one vaccine was available in the United States of America and stated that research on vaccine production in his country had been begun. The Delegate from the United States of America said that one vaccine had been used during outbreaks in 1997 but that it was not commercially available.

143. The Delegate from Uruguay wished to evoke once again the categorisation of the animal diseases on the OIE Lists. He informed participants of a concern which had been raised during the last meeting of the OIE Administrative Commission. He stated that since the meeting of the OIE Ad hoc Group on categorisation of disease five years ago, certain new scientific information was available on the topic and that perhaps a new group could be convened and a strong recommendation on this issue be made by the Conference.

144. The Delegate from Costa Rica informed participants of a suggestion made by the OIE Working Group on Epidemiology and Informatics, which stated in the report of its last meeting that there were certain problems with disease categorisation.

145. The Delegate from Panama stated that the request to name a Reference Laboratory in his country had been refused. He insisted that the designation of such a laboratory was essential.

146. The Delegate from Mexico proposed that vesicular stomatitis be moved from List A to List B.

147. Dr Thiermann, Vice-President of the OIE Code Commission, reminded participants that it was necessary to see the question of categorisation in a historical context. The creation of List A came about as a result of a desire to place emphasis on the urgent character of certain diseases, not to indicate that a disease on List A was more important than one belonging to List B. He recommended that discussion be focussed on why diseases were placed in different categories from the point of view of urgency in the transmission of the information.

148. The Delegate from Canada agreed with the statements made by Dr Thiermann. He said that the OIE had to continue focussing on solely scientific issues and not deal in politics. The important factor was the necessity of providing information on disease outbreaks as quickly as possible.
149. The Delegate from Venezuela expressed his agreement with these comments insofar as the priority was to first examine those diseases that spread quickly.

150. The Delegate from Mexico noted that the question of compulsory notification also had to be addressed, because notification depends on disease categorisation.

151. Several Delegates insisted on the necessity of preparing a firm recommendation on this subject. A group composed of Dr Alejandro López Inzaurralde, Dr Thiermann and members of the Delegations of Canada, Chile, Mexico, Panama and the United States of America was designated to draft a recommendation on this Technical Item and on the categorisation of animal diseases.

**Item III**

**Screwworm: advances in its eradication, risks of infestation and its prevention in the Americas**

152. The Chair of the Session, Dr Angel Omar Flores Hernández, introduced Dr John Wyss, one of the Speakers for this Item, and called upon him to present his report.

153. Dr Wyss recalled that although screwworm had long been recognised as a severe pest of animals in the south-western United States of America, it was not until 1933, when screwworm first became established east of the Mississippi River in the United States of America, that they were recognised as having a tremendous economic impact on livestock production. At that time, the research community became interested in control and eradication measures for this economic pest, which led to the development of the sterile insect technique (SIT) by the USDA, Agriculture Research Service (ARS). This research culminated in the eradication of screwworm from the island of Curaçao in 1954.

154. The Speaker pointed out that this achievement led to the successful screwworm eradication programme conducted jointly in the south-eastern United States of America by the USDA, the ARS, the Animal Disease Eradication Division and the involved States, from 1957-1959. Livestock producers in the south-western United States of America watched the eradication efforts in the south-east with much interest, and a screwworm eradication programme was begun in the south-western United States of America in 1962. The United States of America was declared screwworm-free in 1966.

155. Due to continued outbreaks in the United States of America from infestation sources in Mexico and the interest showed by Mexican livestock producers in controlling screwworm, it was decided to eradicate screwworm as far as the Isthmus of Tehuantepec in Mexico. An agreement was signed between the United States of America and Mexico, on 28 August 1972, to form the Mexico-United States Commission for the Eradication of Screwworm. This Commission reached its objective in 1984.

156. Dr Wyss concluded his presentation by stating that further studies showed that Panama was a much better site for a biological barrier. Following indications of interest in screwworm eradication from all the Central American countries, a plan was developed to extend the Screwworm Eradication Program through Central America. Mexico was declared screwworm-free on 25 February 1991; Guatemala on 20 May 1994; Belize on 22 May 1994; El Salvador on 19 June 1995; Honduras on 6 August 1996, and Nicaragua on 19 October 1999. Costa Rica’s last screwworm case was collected on 15 June 1999; the latter country should be declared screwworm-free sometime in 2000. Screwworm is well under control in Panama and the programme expects to see the last case before the end of 2000.

157. The next Speaker, Dr Javier García Manrique, was introduced by the Chair.

158. Dr García Manrique briefly outlined the creation of the Mexico-American Commission for the Eradication of Screwworm (CMAEGBG). He mentioned the cases registered during the Eradication Campaign in Mexico, some of the first cases of screwworm recorded in the literature and the establishment of sterile fly barriers as the programmes progressed through North and Central America.

159. The Speaker then spoke of the cost/benefit relation for countries that have been freed from screwworm and those currently undergoing eradication. He explained the current importance of eradicating screwworm from the Caribbean countries (Cuba, Dominican Republic, Haiti, Jamaica and Trinidad and Tobago), which represent the main threat of the pest being re-introduced onto a continent that has been freed from it.
160. Dr García Manrique mentioned the possible creation of a new sterile fly production facility in Panama in order to create a barrier of sterile flies between Central and South America and he briefly reviewed the facilities at the CMAEGBG’s Plant for Producing Sterile Flies in Chiapas. Finally, he underlined the importance of the blood-sucking flies *Haematobia irritans* (or horn fly) and *Stomoxys calcitrans* (or stable fly) and the damage they cause to livestock today.

161. The Speaker concluded his presentation by explaining the reasons for seriously undertaking research into these flies in tropical countries and why the Commission is considering studying and investigating them for a control and/or eradication programme in Mexico and other interested countries once the production of sterile flies is transferred to Panama.

162. Dr Espinosa, the third Speaker for this item, was introduced by the Chair.

163. Dr Espinosa presented the historical background, legal regulations, chronology and development of the Screwworm Eradication Programme in the Republic of Panama between 1994 and 1999. He referred to the preliminary scientific studies which provided the technical and economic evidence that led to implementation of the Programme as an International Mission, involving the public and private sectors in carrying out the technical and administrative activities.

164. The Speaker described the screwworm eradication process in Panama, which, benefiting from the experience gained by programmes in other countries, was swift and effective. He stated that in all likelihood the insect would be eliminated from the entire country even earlier than planned.

165. Dr Espinosa also described the measures taken to build the sterile fly production facility, which will supply domestic demand as well as that of other countries in their fight to eradicate screwworm. The Panama/United States Commission for the Eradication and Prevention of Screwworm (COPEG, or 'the Commission') will therefore work on establishing a permanent biological barrier in the border region between Panama and Colombia, in order to prevent re-infestation of Panama’s screwworm-free areas and thereby protect the entire Central and North American region.

**Discussion**

166. The Chair of the Session congratulated Drs Espinosa, García Manrique and Wyss for the quality of their presentations. He praised the success achieved by the OIE Member Countries in the Americas in combating a disease of such great importance for both animal and human health.

167. A group composed of Dr Wyss and members of the Delegations of Canada, Chile, Colombia, Costa Rica, Mexico, Panama, Uruguay and the United States of America was designated to draft a recommendation on this Technical Item.


168. Prof. Emilio Gimeno, Coordinator of the OIE Regional Representation for the Americas, gave a review of the working plan of the Regional Representation, notably describing the model to be adopted for Veterinary Services that was proposed during a meeting held in Buenos Aires (Argentina) held from 1 to 5 November 1999.

169. Dr Thiermann, Vice-President of the OIE Code Commission, shared his concerns with participants over the reference in this model to the standards of the International Organization for Standardization (ISO).

170. The Delegate from the United States of America agreed with Dr Thiermann in that the ISO standards are too difficult to apply to Veterinary Services.

171. Prof. Gimeno sought to calm Delegates' concerns and indicated that the representative from ISO had been invited to the meeting solely for information purposes. No one had proposed the necessity of using ISO standardising documents, but rather the 'conformity' evaluation techniques applied to Veterinary Services. The goal is to adapt concepts and techniques rather than try to attain ISO levels of certification.
172. The Delegate from Chile, who also participated in the above-mentioned meeting, added that the presentations on quality assurance systems concentrated exclusively on analytical elements. Quality assurance in Veterinary Services is a worthy objective.

173. Dr Thiermann read aloud the report of the meeting from Buenos Aires in order to clarify the ideas proposed. He once again warned against a rapid inclusion of ISO standards, which had been of much concern to many African and Asian countries during the 1999 OIE General Session. Prof. Gimeno attempted to placate these concerns by reading the subsequent parts of the report, which specify that the ISO standards must be adapted by veterinarians before being proposed by the OIE.

174. The Delegate from Colombia suggested that ISO standards should be adopted in the long term by Veterinary Services but that it was necessary to first prepare the countries whose Veterinary Services are still too weak (for example, in the Andean region) so that they attain higher levels of efficiency.

175. The Delegate from Costa Rica agreed with the views expressed by the majority of Delegates present insofar as he felt that the improvement and further harmonisation of animal health services in the region were necessary, in particular in the face of pressure from the private sector. However, he felt that conformity with ISO standards was too high an objective to achieve on a short-term basis, but that Veterinary Services could already begin to carry out a process of self-criticism.

176. The Delegate from Canada added that if ISO standards were to be used, none of the countries in the region would be able to meet them. Standards are nonetheless necessary and countries would need to agree on the standards to be implemented. Veterinary Services in many countries are under pressure from various sources, and being able to refer to a standard would definitely be useful.

177. The Delegate from Chile agreed with Dr Thiermann and added that reference to ISO standards had not been among the objectives of the meeting held in Buenos Aires.

178. The Delegate from Argentina emphasised the need to involve the private sector, taking into account budgetary pressures faced by all countries in the region. He mentioned, for example, that the FMD campaign in his country was 70% financed by the private sector.

179. Dr Correa Melo, President of this session, remarked that there seemed to be a clear consensus appearing as to the model to be adopted for Veterinary Services. The Member Countries should provide advice to the OIE Regional Representation as to the aspects to include in this model and perhaps establish a group to explore different possible models.

180. The Delegate from Canada expressed the view that developing a model on a regional scale was certainly a worthy objective but that an additional step was necessary in the process, namely proposing this model to the OIE Code Commission so that it could be made available to all OIE Member Countries.

181. The Delegate from Colombia expressed her interest in being a part of the group to be established to examine private sector involvement in Veterinary Services. The Delegates from Argentina, Brazil and Chile also hoped to be able to participate in this work.

182. Prof. Gimeno concluded that an ad hoc group would be set up this year to examine models for Veterinary Services and also study possible quality assurance issues for Veterinary Services.

183. The Coordinator of the OIE Regional Representation for the Americas then introduced draft Recommendation No. 5 on risk analysis.

184. Dr Thiermann agreed in principle with this draft Recommendation but wished to bring to the attention of participants possible implementation problems associated with the complexity of the texts and the standards already available for risk analysis.

185. The Delegate from the United States of America asked that certain points in draft Recommendation No. 5 be modified and others added. These changes were taken into account by Prof. Gimeno.

186. Prof. Gimeno then introduced draft Recommendation No. 4 on the creation of a Latin American Committee for the harmonisation of registration and control of veterinary drugs.
187. The Delegate from the United States of America made several observations on this draft. He particularly wondered why the project was limited to Latin America when both Canada and the United States of America would be interested in participating. He then remarked that it would be appropriate to accord a more important role to the Institute for International Cooperation in Animal Biologics (IICAB), an OIE Collaborating Centre, and that the initiatives of the Veterinary International Consultation on the Harmonisation of Veterinary Medicinal Products (VICH) should be taken into account.

188. The Delegate from Colombia agreed with these remarks and requested that the proposed Committee be enlarged.

189. The Delegate from Brazil suggested that a modification be made to point 1 of the draft Recommendation.

190. Prof. Gimeno promised to take into consideration all of the remarks made on this draft Recommendation and further suggested that the title of the Recommendation be amended to remove the word 'Latin'. The amended title thus became 'Committee of the Americas for the Harmonisation of Registration and Control of Veterinary Drugs'.

191. The Regional Coordinator continued his presentation on the activity programme of the Regional Representation for 2000 and obtained the approval of Delegates for promoting the set-up of a network of regional veterinary laboratories, based on voluntary membership.

**Date, venue and agenda items for the 16th Conference of the OIE Regional Commission for the Americas**

192. The Delegate of Chile proposed to hold the next Conference of the Regional Commission in his country. He informed participants that the Conference could be held during the month of March 2002 and promised to confirm the exact dates at the Regional Commission meeting in May during the 68th General Session.

193. It was decided that possible topics for discussion at the next Conference of the Regional Commission would be proposed during the May meeting.

**Discussion of Draft Recommendations**

194. Draft Recommendations Nos. 1, 2, 3, 4, 5 and 6 were presented and discussed. Significant modifications to draft Recommendation No. 2 were requested. The others were adopted with minor amendments.

195. It was decided that the new text of draft Recommendation No. 2 and the draft Recommendations Nos 7 and 8 would be examined on Friday morning.

**Presentations by International and Regional Organisations**

**Food and Agriculture Organization of the United Nations**

196. Dr Vargas Terán, Animal Health Official of the FAO, presented the activities of the FAO in the region.

197. In view of their transborder, economic and sanitary importance, FAO has given priority to foot and mouth disease, classical swine fever and screwworm in its efforts to control and eradicate diseases from the American continent. As a result, a technical cooperation project for foot and mouth disease was recently concluded with the Argentine Government, with the technical assistance of the Pan American Foot-and-Mouth-Disease Center (Panaftosa), to establish a molecular epidemiology network for the foot and mouth disease virus using polymerase chain reaction diagnostic techniques, similar to the one established by the FAO’s World Reference Laboratory for Foot and Mouth disease in Europe.

198. A project to control screwworm in Cuba was successfully completed with a document that envisages eradicating screwworm from the country with a preparatory phase to eliminate the disease from the Isla de la Juventud. This two-year phase was initiated jointly with the International Atomic Energy Agency (IAEA) and will be followed by the implementation of a national programme to eliminate the parasitosis from Cuba. A programme to control this cutaneous myiasis has also been initiated in Haiti and the Dominican Republic in the hope that, when it is completed, it will be possible to ascertain its economic impact on the island of Hispaniola, that a draft document concerning its eradication from the island will be available and that potential external donors may be found to finance the programme.
199. A classical swine fever workshop was held in October 1999 jointly with Chile’s Agriculture and Livestock Service, in order to define the continent’s strategy for eradicating the disease. A number of technical documents were drawn up relating to the current epidemiological situation and to the most effective vaccines for controlling the disease, as well as a continental plan for eliminating it. The event concluded with an agreement to submit the plan for the consideration of the OIE Delegates at the 15th Conference of the Regional Commission for the Americas (see page 18). The Cuban Government and FAO also established a technical cooperation agreement in February of this year to step up efforts to prevent, control and eradicate classical swine fever. When the project is complete, it is planned to hold a meeting of donors with the aim of initiating an animal health programme to eliminate classical swine fever from the Caribbean.

200. Furthermore, FAO, together with the IICA, USDA and the European Union, has achieved significant and steady progress in eradicating the *Amblyoma variegatum* tick from the three Caribbean islands infested with the parasite. At present epidemiological surveillance programmes are being pursued in the tick-free countries of the region in order to confirm that they are free from the tick, as well as from the hemoparasites it transmits.

**Pan American Health Organization**

201. Dr Primo Arámbulo III, Program Coordinator, Veterinary Public Health Program (PAHO), described the activities of PAHO in the field of animal health.

202. PAHO’s Veterinary Public Health Programme is comprised of the Programme’s Coordination Committee in Washington DC (United States of America), Panaitosa in Rio de Janeiro (Brazil), the Pan American Institute for Food Protection and Zoonoses in Buenos Aires (Argentina) and national veterinary public health consultants.

203. The Programme provides technical cooperation on zoonoses, foot and mouth disease, food protection, the development of biomedical models and the organisation of veterinary public health services. Technical cooperation is achieved by mobilising resources, developing policies, plans and standards, training, disseminating information, promoting applied research and direct technical consulting.

204. In order to optimise use of the Programme’s resources, measures have been focussed on the following strategic goals: eradication of foot and mouth disease; elimination of rabies in humans transmitted by dogs; food protection; control/eradication of bovine tuberculosis and brucellosis; surveillance and prevention of emerging zoonoses; conservation of primates and biomedical research; and control/eradication of hydatidosis.

205. The Director of PAHO convened the XI Ministerial Inter-American Meeting on Animal Health (RIMSA XI), held in Washington DC from 13 to 15 April 1999. At this meeting two panels were organised on the themes of 'International Cooperation on Food Protection' and 'Food-borne Diseases: Their Impact on Public Health and Trade', and two special presentations on 'The World Bank’s Economic Cooperation on Projects concerning Food Safety and Innocuousness of Foods' and 'The Use of Antibiotics in Animal Production and Antimicrobial Resistance' were made.

**Inter-American Institute for Cooperation on Agriculture**

206. Dr Kevin D. Walker, Director of the Animal Health and Food Safety Department of the IICA, began his presentation by informing participants that the Sixth Edition of *Exotic Animal Diseases*, published by the United States Animal Health Association, has been translated into Spanish and can be purchased through IICA for the sum of USD 20 plus shipping costs.

207. He then explained that IICA focussed on four strategic lines of action. The first area is modernisation of agricultural health services through the active participation of the private sector. This builds on a simplified model containing eight basic characteristics, including communication, technical independence and financial sustainability. In addition, 11 technical functions have been identified: these include diagnosis, risk analysis and surveillance. In collaboration with the USDA and other organisations, efforts are underway to work with both Haiti and the Dominican Republic to institute a project to first upgrade their agricultural health services and then reduce and eliminate classical swine fever.

208. The second area concentrates on more proactively addressing emerging issues. IICA has a limited fund which countries can use to prepare action plans for animal health issues or diseases before they become emergencies or before outbreaks occur.
209. The third area relates to food safety and focuses on the agricultural elements within the food chain. A series of conferences has been held and others are planned with the objective of increasing awareness and building leadership within countries.

210. The fourth area is the application of Sanitary and Phytosanitary (SPS) measures of the World Trade Organization (WTO). Training events, jointly organised with the WTO/SPS committee staff, have been held and more are anticipated. IICA was recently admitted as an ad hoc observer to the SPS Committee.

211. Finally, IICA has reviewed the linkage between the OIE and the WTO and emphasised the involvement at a national as well as a regional level. It has been proposed that issues or diseases common to the Americas be identified and that these then be reviewed in the context of the *International Animal Health Code*. Where the *Code* is considered inadequate, broader regional positions should be developed and carried forward, such as in the case of vesicular stomatitis. IICA is willing to work with the OIE to help facilitate this process in the Americas.

**Regional International Organization for Plant Protection and Animal Health**

212. Dr Luis Alberto Espinoza, Animal Health Technical Director of the Regional International Organization for Plant Protection and Animal Health (OIRSA), described his organisation's activities in the Americas. These activities were designed to modernise agricultural health services in the region, strengthen and support national Veterinary Services and modernise technical cooperation with other international organisations.

213. Between 1996 to 1999, harmonised sanitary requirements for trade in birds, swine, bovines, equines and aquatic animals were established. Regulations for the registration of veterinary medicinal products were also harmonised and an database is being created. Consultants were hired to assess the existing situation in each member country in order to initiate harmonisation of control, inspection and authorisation procedures. This process will be pursued through the drafting of manuals and the organisation of training courses.

214. Efforts are being made to strengthen epidemiological surveillance through training, financial support for the transportation of samples within and among countries, and recognition of regional diagnostic laboratories. Assistance has been provided to countries for the conception of sampling techniques to determine the absence of Newcastle disease and classical swine fever. A database named Epi-OIRSA has been compiled since 1997 to regroup epidemiological information from the countries. Publication of the *Regional Epidemiological Bulletin* was begun in 1998 and in 1999 a new database functioning under Windows was set up; it will soon be made available to the countries and will be installed on OIRSA's Web site.

215. A programme held ever two years to train civil servants from the region and provide them with the most recent information available is being pursued. A regional directive for risk analysis was drafted and adopted by all member countries of OIRSA. Assistance has been provided to various countries for the establishment of risk analysis. A directive for the declaration of zones free from classical swine fever has been proposed to the countries and will be examined in view of its adoption during the next meeting of the directors of animal health.

216. Funding has been provided for a regional programme for the prevention of classical swine fever in Central America in view of three countries in the region attaining disease-free status at an international level. Pilot projects for the control and eradication for bovine brucellosis and tuberculosis in El Salvador (eastern part of the country) and in Honduras (Atlántida department) were also financed.

217. In the field of animal quarantine, training for officials and advice on requirements have been provided. Furthermore, information on professional ethics and animal health certificates contained in the OIE *International Animal Health Code* has been disseminated.

218. In 1999, the Ministers of Agriculture requested that OIRSA include the subject of food safety in its working programmes. In October of the same year, an office was set up to provide support to countries and currently an assessment of the current situation in all member countries is being carried out. A work plan will be presented with a view to providing assistance to countries in their commercial relations in accordance with international market requirements.

**Andean Community**

219. Dr Terry E. Teodorico, Animal Health Expert, gave a brief description of the bodies forming the Andean Community, a subregional organisation whose members are Bolivia, Colombia, Ecuador, Peru and Venezuela. He
then outlined the activities it carries out in the livestock sector, notably in connection with the organisation’s two major objectives: bettering the standard of living of the rural population and improving food safety.

220. Dr Teodorico informed participants that Decision 92 of the Community created the Andean Animal Health System, which favoured both the harmonisation of the legislation of countries involved in the organisation and the successful implementation of various programmes. The Programme for the Prevention of African Swine Fever contributes to the improvement of human resources in the five countries through courses, simulation exercises, diagnostic laboratory training and strengthening of international animal health inspection and epidemiological surveillance systems. A draft Proposal by the Secretary General has been prepared in view of the adoption of an Andean standard for the registration, control, commercialisation and use of veterinary medicinal products, a project which is being carried out with the collaboration of the OIE and the Pan American Institute for Food Protection and Zoonoses (INPPAZ). Since 1992, the Andean Animal Health System has been adapted to conform to the integration process through the adoption of Commission Decision No. 328.

European Union

221. Dr Ivo Filippini, the representative of the European Union for veterinary issues in South America, described the activities carried out by the regional office, which is located in Montevideo (Uruguay). He promised to visit each of the countries in the region individually to discuss projects to be developed.

Other institutions

222. Dr Espinosa (Panama) briefly spoke of the upcoming meeting of Panvet, which will be held from 11 to 15 September 2000 in his country. The motto will be 'Veterinary Medicine in the New Millennium'.

Functioning of the Code Commission: from the ad hoc group to the draft resolution

223. Dr Vallat, President of the OIE International Health Code Commission, began his presentation by briefly outlining the way in which the Code Commission functions, from the creation of an ad hoc group to the draft Resolution.

224. The President of the Code Commission recalled the increase in importance of the OIE in the field of international trade in animals and animal products, and especially of OIE activities relating to standardisation. He then described the procedures followed regarding draft modifications of International Animal Health Code chapters and the drawing up of draft Resolutions, emphasising the role of the Code Commission itself, ad hoc group(s) and Member Countries. Finally, he presented a list of the different chapters of the Code which have been re-drafted in recent years.

Discussion

225. Dr Thiermann wished to underline that all proposed chapters for the Code can be found on the Web site reserved for OIE Delegates immediately after their completion by the Code Commission. It is therefore not necessary for Delegates to wait for the hard copy of the document to arrive by mail before making their comments. He then suggested that an electronic forum be established to encourage both the dissemination of information on the preparation of Code chapters and the exchange of Delegates’ and other experts’ opinions on proposed chapters. He used the example of the chapter on bluetongue, and namely the question of disease incubation, for which difficulties had arisen due not to scientific factors but rather to political issues.

226. Prof. Gimeno informed participants that the OIE Regional Representation for the Americas maintains weekly contact by electronic mail with all countries in the region, and could easily inform Delegates of the exact dates on which draft chapters would be made available on the OIE Web site.

227. Dr Kevin Walker (IICA) said that his organisation already had much experience in this area and could be of assistance in establishing an electronic forum.

228. The Delegate from Cuba insisted on the necessity of exchanging information regarding proposed Code chapters in order to be aware of the concerns of all of the countries in the region.
Thursday 9 March 2000

Field trip

229. Participants were given a guided tour of the Islas de Rosario national nature reserve, jointly organised by the Colombian Ministries of Agriculture and the Environment. An aquatic animal centre was toured and participants were provided with interesting information on the aquatic animal species present in the region, notably the coral formations.

Friday 10 March 2000

OIE Elections

230. Dr Willis explained to participants that this was a closed session for Delegates and special guests only. He proposed that the elections to the different OIE Commissions that will be held in May be discussed in advance in order to assure adequate regional representation.

Adoption of the draft Final Report and Recommendations

231. The Conference approved Recommendations Nos 1, 2, 3, 5 and 6 and the amended texts of Recommendations Nos 4, 7 and 8. The Draft Final Report was adopted pending certain amendments.

Closing Ceremony

232. Dr Blancou, Director General of the OIE, praised participants on the very enriching discussions held during this 15th Conference of the OIE Regional Commission for the Americas. He thanked the various Speakers for their interesting presentations and highlighted the essential points contained in the eight recommendations that were adopted. He noted the in-depth knowledge of the OIE structures which many members of the Delegations had shown. He thanked Dr Correa Melo for having agreed to host the next Conference of this Regional Commission. Dr Blancou then recalled with pleasure the various Conferences of the Regional Commission that he attended during his term as Director General of the OIE, and expressed a sincere wish that he would be able to see participants again in the future.

233. Dr Serrano Ramírez, President of the OIE Regional Commission for the Americas, expressed satisfaction at the outcome of this Conference. He particularly expressed his gratitude to the Colombian authorities for having assured such a pleasant stay in Cartagena for all. He noted the work accomplished during the technical sessions and the decisions made by the Regional Commission with respect to the upcoming elections in the OIE. He encouraged Delegates to search for new ways to better integrate those countries with financial difficulties that prevent them from fully participating in OIE activities. Dr Serrano Ramírez praised Dr Blancou on the successes of his term of office as Director General and looked forward to seeing him assist Member Countries in the important transitions that will take place in May. Dr Serrano Ramírez then read aloud the motion of thanks to the participants of the Conference. He expressed his gratitude to all of the individuals who had contributed their time and effort in making this Conference a success.

234. Dr Cruz de Urbina expressed her pleasure at having been able to host such an important meeting of her veterinary colleagues in her country. She then gave the floor to Dr Abisambra Abisambra to say a few closing words.

235. Dr Abisambra Abisambra thanked the members of the Regional Commission for the trust they have shown in him and in the Veterinary Services of his Colombia in having allowed this Conference to be held in Cartagena de Indias. He outlined the various initiatives within the Veterinary Services of Colombia, the priority being given to the eradication of foot and mouth disease. He then spoke of the close relationship between his country and the OIE and the importance that Colombia accords to international cooperation in the field of animal health strategies in the Americas.

236. The General Manager of ICA then particularly thanked Dr Blancou for his important contributions and informed him that he would always be seen as a friend of both his family and his country. He finished by thanking all of the other individuals having contributed to the success of the Conference and officially declared the 15th Conference of the OIE Regional Commission for the Americas closed at 12:45 p.m.
MOTION OF THANKS

The OIE Regional Commission for the Americas, the Director General of the OIE, members of Delegations, observers and representatives of countries and international organisations, wish to express their gratitude to the Government of Colombia, the Host Country of the 15th Conference of the Regional Commission, for the excellent welcome accorded to the participants and for all facilities made available to them during their stay in Cartagena from 7 to 10 March 2000.
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