Introduction

1. The 62nd General Session of the OIE International Committee was held at OIE headquarters, 12 rue de Prony, 75017 Paris (France) from 16 to 20 May 1994 under the chairmanship of Dr A.S. Sidibé (Mali) until the Second Administrative Session on 20 May 1994, when Dr Ahmad Mustaffa b. Hj. Babjee (Malaysia) was elected President of the Committee and took over the chairmanship. Dr Babjee also chaired the second plenary session, and Dr C.A. Correa Messuti (Uruguay) chaired the third plenary session.

2. Delegations from 103 Member Countries participated in the proceedings of the General Session.

3. Observers from five countries and fifteen intergovernmental and non-governamental organisations were in attendance.

4. Le Directeur général, le docteur J. Blancou, a assisté, avec voix consultative, aux séances et a assumé la fonction de secrétaire général à toutes les séances.

5. Prof. J. Nicolet (Switzerland) and Dr J.J. Callis (USA), the Rapporteurs for the Technical Items, also participated in the General Session.

6. The Presidents of the OIE Specialist Commissions also attended the plenary sessions, as did the representatives of Working Groups and Ad hoc groups.

7. Dr R.W. Gee and Prof. F. Walla, Honorary Presidents of the OIE, and Drs R. Vittoz and L. Blajan, Honorary Directors General of the OIE, were also present.

Monday 16 May 1994

Inaugural Session

8. The President welcomed participants and thanked the Honourable Mr P. Saravia Fratti, Minister of Husbandry, Agriculture and Fisheries of Uruguay; Mr E. Ancev, Minister of Agriculture, Forestry and Water Economy of the Former Yugoslav Republic of Macedonia; Mr V. Abramian, Deputy Minister of Agriculture of Armenia; Mr C. Guerra de Macedo, Director of the Pan American Health Organisation (PAHO); and Mr P. de Guénin, technical adviser and representative of the Minister of Agriculture and Fisheries of the Republic of France, for honouring the 62nd General Session with their presence at the Inaugural Session.

The President's opening address is included in Appendix I.

9. Following the President's address, the Honourable Mr P. Saravia Fratti, Mr E. Ancev and Mr P. de Guénin took the floor. The texts of their speeches are presented in Appendices II, III and IV.

Presentation of the OIE honorary awards

10. Dr Sidibé reminded the participants that in 1985 the Committee decided to grant honorary awards to members of the veterinary community for outstanding service to veterinary science and to the OIE. He then presented the candidates selected by the Administrative Commission to
receive the awards: Dr W.H.G. Rees (United Kingdom) for the gold medal, and Prof. L. Bellani (Italy) and Dr Ali A.M. Moussa (Egypt) for the meritorious service awards.

11. The gold medal was presented to Dr Rees and the meritorious service awards were presented to Prof. Bellani and Dr Moussa by Dr Sidibé.

12. Following the award presentation, Dr Sidibé declared the 62nd General Session of the OIE open.

**FIRST PLENARY SESSION**

13. The President welcomed the Delegates from Bahrain, Belarus, Comoros, Costa Rica, Czech Republic, the Former Yugoslav Republic of Macedonia, Honduras, Kazakhstan, Qatar, Singapore, Slovak Republic and Ukraine, who recently joined the OIE, as well as the representatives from observer countries who participated in the General Session.

**Adoption of the Agenda and Timetable**

14. The Committee adopted the provisional Agenda and Timetable of the Session.

**Nomination of the Sub-Commission for the Agenda of the 64th and 65th General Sessions**

15. The Committee appointed a Sub-Commission to prepare the Agenda of the 64th and 65th General Sessions. The Sub-Commission was composed of the Presidents of the Regional Commissions and chaired by Dr N.T. Belev (Bulgaria).

**Credentials Committee**

16. The Committee appointed Prof. U. Kihm (Switzerland) and Dr P. Ackah Angniman (Côte-d'Ivoire) to prepare the list of Delegates accredited by their Governments and whose Countries were up-to-date with their contribution payments.

**Report of the Director General on the activities of the OIE in 1993**

17. The Director General reviewed the highlights of the past year. He reported staff changes and emphasised the importance of the investment made to improve equipment at the Central Bureau (especially computer facilities), renovate the library and the offices of the Information Department, instal signboards in the building, and conduct a feasibility study on expanding the capacity of the René Vittoz Room.

18. He presented two tables which listed actions carried out from 1991 to 1993 by the Central Bureau as a follow-up to five recommendations made by the Strategic Planning Group in 1990. These recommendations were made so that the four activities which the Committee considered were priorities for the years 1990-1999, could be put into effect.
19. He reviewed the epidemiological information received during the year and mentioned the initiatives taken by the Central Bureau to improve the quantity and quality of this information, in particular during two meetings held in Annecy (France) and Teramo (Italy).

20. He informed the International Committee that the format of *World Animal Health* had been modified in order to improve the presentation of information and reduce the cost. A start has also been made in transferring data from the central database of the OIE concerning the world animal health situation, to the HandiSTATUS programme.

21. He described actions carried out by the Central Bureau to improve international trade in animals and animal products (the updating and completing of Code texts), and to meet the increasing number of requests for general information which are received by the OIE from visitors, by post or by telephone.

22. The Director General mentioned that efforts to improve the quality and promotion of publications had been successful, with an increase in sales of 13% relative to 1992 and 43% relative to 1990.

23. He summarised the activities of the four Specialist Commissions, three Working Groups and the Ad hoc Groups (on the evaluation of Veterinary Services, wildlife diseases, animal health information systems, non-tsetse transmitted animal trypanosomoses, and equine viral arteritis). He described nine meetings organised in collaboration with certain OIE Member Countries and other international organisations. The Director General also mentioned the activities of the three OIE Collaborating Centres and 107 Reference Laboratories, and of consultants who had undertaken work for the Office in 1993.

24. He reported on the actions taken with respect to the Resolutions of the 61st General Session and those of the Regional Conferences, referring in particular to:

- a Cooperation Agreement with the Pan American Health Organisation/World Health Organisation (PAHO/WHO), which was signed on 18 June 1993;

- a draft Agreement on Participation in OIE activities, which had been prepared for submission to various regional organisations for economic integration;

- a request to OIE Member Countries for voluntary contributions;

- the preparation of a document on the FAO/WHO/OIE campaign against brucellosis in the Middle East;

- the establishment of a model passport for horses that are moved between countries;

- the signing on 26 November 1993 of a cooperation agreement which recognises the Onderstepoort Veterinary Research Institute as an OIE Regional Collaborating Centre.
25. The Director General reminded participants that the appointment of Dr Y. Ozawa as the OIE Representative for Asia and the Pacific had enabled the OIE to increase its activities in the region considerably. Several very important meetings had been organised during the year thanks to the support of the Japanese Government. During these meetings the OIE gave particular attention to the actions taken against FMD. The OIE Representative also continues to distribute regular bulletins on the animal health situation in the region.

26. At the request of the Director General, Dr Ozawa presented the activities of the OIE/Japan Trust Fund Programme undertaken in 1993-1994. The following three sub-regional meetings were held:

- the OIE/SPC Regional Meeting of Heads of Veterinary Services of the South Pacific Commission (Noumea, New Caledonia, November 1993);
- the Third Meeting of the Coordinating Group for the Control of Foot and Mouth Disease in South-East Asia (Ipoh, Malaysia, February 1994); and
- the OIE/APHCA (Regional Animal Production and Health Commission for Asia, the Far East and the South-West Pacific, FAO) Second Meeting of the South Asia Association for Regional Cooperation (SAARC) Group on Animal Disease Information Systems (Lahore, Pakistan, March 1994).

Reports of these meetings have been or will soon be circulated.

27. Dr Ozawa described the Quarterly Epidemiology Reports and the Regional Epidemiology Yearbook published and circulated by the OIE Representation in Tokyo.

In addition to these, his activities included the formulation of a proposed 'Plan for the Control/Eradication of FMD in South-East Asia' which was reviewed at the meeting held in Ipoh, Malaysia and the FAO's participation in the meetings for planning the campaign against rinderpest in South Asia.

28. The Director General concluded his address with a brief report on the OIE Regional Conferences held in Member Countries: Windhoek (Namibia), Damascus (Syria) and Auckland (New Zealand). He also referred to meetings in which the OIE participated in 1993, and relations between the OIE and other international organisations.

29. In reply to a question from the Delegate of Norway on present and future relations to the General Agreement on Tariffs and Trade (GATT), the Director General stated that the legal aspects of this question would be discussed later by Prof. D. Bardonnet. In view of its long-standing relations with GATT, the OIE was named as a reference organisation in the Agreement on Sanitary and Phytosanitary Measures approved at the close of the Uruguay Round. An exchange of letters between the Directors General of the OIE and the future World Trade Organisation has been proposed to render collaboration official. The content of these letters will of course first be submitted to the International Committee. At present, it is impossible to form a clear idea of the amount of work which will be required of the OIE in the context of this cooperation.

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30. The President requested that Africa too be taken into account in developing technical agreements with regional organisations. He expressed hopes that an agreement could be developed between the OIE and the Organisation of African Unity/Interafrican Bureau for Animal Resources (OAU/IBAR).

31. The Committee noted the report of the Director General.

SECOND PLENARY SESSION

TECHNICAL ITEM I

Mycoplasma infections in cattle, sheep and goats: methods for diagnosis and prophylaxis

(Doc. 62 SG/9)

32. Prof. J. Nicolet (Switzerland) presented his report on methods for diagnosis and prophylaxis of mycoplasma infections in cattle, sheep and goats. The report was based on contributions from 48 OIE Member Countries.

33. Certain countries of Africa, Asia, the Middle East and the Mediterranean Basin regard the mycoplasmoses entered in OIE Lists A and B (contagious bovine pleuropneumonia, contagious caprine pleuropneumonia and contagious agalactia) as the most important. Another important type of mycoplasmosis is ulcerative balanoposthitis/vulvovaginitis of sheep, caused by *Mycoplasma mycoides* subsp. *mycoides* LC. Mastitis caused by *M. bovis* is a problem in some countries of Europe and the Americas.

34. There is wide variation in diagnostic procedures, depending in general on economic conditions in each country. New technical developments, such as the use of DNA probes, the polymerase chain reaction and monoclonal antibodies, have been reported by some countries, and should improve diagnosis, particularly of infections with the *mycoides* group of mycoplasmas. Most countries apply control measures against the mycoplasmoses of Lists A and B, as recommended by the OIE.

35. Recommendations for improving the situation were proposed.

Discussion on Technical Item I

36. Dr Babjee, along with a number of other Delegates, congratulated the Rapporteur on his fine presentation.

37. The Delegate of Chile asked whether it was possible to designate herds as free of contagious agalactia. In his reply, Prof. Nicolet referred to the experience of Switzerland where repeated serological testing of blood and especially milk made it possible to detect and eliminate infected animals, and gradually to develop a disease-free herd without recourse to vaccination.

38. The Delegate of Italy fully supported Prof. Nicolet's idea that a reference laboratory should exist in every country. Efforts should also be made in matters of differential diagnosis and in setting up an
effective detection network in every country, so that there is a solid basis for a country's declaration as disease-free. For Prof. Nicolet, it is indispensable to have one laboratory in each country which is responsible for mycoplasmas at the national level and to which laboratories throughout the country can submit strains obtained from infected animals. The epidemiological importance of each type of mycoplasma could then be determined. Epidemiological surveillance networks are essential as well, in order to provide methodical surveillance of mycoplasmoses. Relations among husbandry establishments, abattoirs, laboratories and the veterinary administration should be organised so that the surveillance system works optimally.

39. The Delegate of Israel raised two questions. Does susceptibility vary by breed? What prognosis can be expected from treatment? Regarding the first question, Prof. Nicolet referred to the adhesion properties of mycoplasmas onto cells, and said he thought there must be different levels of susceptibility depending on breed. However, information on this subject is very rare. As for the second question, antibiotics improve the clinical picture of infected animals but do not eliminate the infection. In chronic cases, the pathogen present in lesions cannot be treated with antibodies. Furthermore, antibiotics prevent the isolation of mycoplasmas and so it is important not to employ them in conjunction with other control methods.

40. The representative of Iran stated that in his country, where contagious agalactia is enzootic, an inactivated vaccine is used. What risks are involved in using live vaccines obtained from attenuated mycoplasmas? Prof. Nicolet acknowledged that attenuated mycoplasma vaccines would be more effective but he considered that there are still problems in attenuating their pathogenicity. For epidemiological reasons, such vaccines cannot be recommended.

41. The Delegate of Sudan expressed satisfaction that the OIE had again taken up the subject of mycoplasmoses. He described the problems encountered in isolating and growing *Mycoplasma mycoides*, especially biotype F38. The Delegate also recalled how the African countries concerned by mycoplasmoses had decided to avoid treatment and vaccinate instead. Unfortunately, the vaccine is fragile and confers only short-lived immunity (six months). The Delegate was hopeful that a new system for vaccine preparation using a fermenter would provide better results.

42. The Delegate of Morocco raised the issue of mycoplasmas present in frozen semen. In his reply, Prof. Nicolet explained that a wide range of contaminant mycoplasmas can be found in semen but, in general, pneumopathic mycoplasmas are absent. There is thus no real risk of contagious bovine pleuropneumonia, contagious caprine pleuropneumonia or contagious agalactia. If the antibiotics included in the semen dilutant are changed, the contaminant mycoplasmas will be eliminated since certain combinations are perfectly efficacious.

43. The Delegate of Hungary inquired about possible transmission to humans of some animal mycoplasmoses. Prof. Nicolet declared that, in general, mycoplasmas are highly specific to a host.
44. Prof. M. Truszczynski called the attention of participants to the OIE Standards Commission report of February 1994, which provides a full list with addresses of OIE Reference Laboratories for List A and B diseases due to mycoplasmas.

45. In response to a remark by the Delegate of Indonesia concerning the import of live animals, Prof. Nicolet observed that there is little knowledge available on airborne transmission of mycoplasmas over long distances. With more precise information on this subject, minimum distances could be set between quarantine stations and infected herds.

46. The Delegate of Austria considered that high-quality antigens for serological tests are absolutely necessary. At present, such tests are geared especially towards herds and are not very useful for individual animals. The Delegate hoped that progress would be made by the research currently undertaken by the FAO/IAEA. Prof. Nicolet emphasised the need for detailed standardisation of all serological tests as well as the difficulties of antigen production. But Prof. Caporale, referring to the situation of contagious bovine pleuropneumonia in Europe, expressed his opinion that even if much work in standardisation remained to be done, great progress had been made in recent years. Prof. Caporale suggested that the problem involves sensitivity rather than specificity, especially for the complement fixation test. Prof. Nicolet replied by pointing out that a high level of specificity could be obtained only with monoclonal antibodies. However, with the competitive enzyme-linked immunosorbent assay (C-ELISA), the question arises as to how to make monoclonal antibodies available to all laboratories.

47. Prof. Caporale endorsed the common wish that declarations of disease-free status would be based on active surveillance, but he asked that the temporal requirements not be greater than necessary. In a country practising effective surveillance, a waiting period of five years after the last case of contagious pleuropneumonia seemed superfluous. Prof. Nicolet asked Prof. Caporale to raise this point again when the FMD and Other Epizootics Commission presented its work on contagious bovine pleuropneumonia.

48. The President concluded the discussion by emphasising the importance of the knowledge which has been gained regarding mycoplasmoses even as many areas remain to be understood.

49. Along with Prof. Nicolet, a group consisting of Prof. M.S.M.A. Harbi (Sudan), Dr F. Santini (Italy), Dr F. Garrido Abellán (Spain), Dr J.-L. Martel (France) and Dr Y. Tamimi (United Arab Emirates) was asked to formulate a draft Resolution on Technical Item I.
Tuesday 17 May 1994

THIRD PLENARY SESSION

TECHNICAL ITEM II

Vaccine banks: present status and future developments
(Doc. 62 SG/10)

50. Dr J. Callis (USA) presented his report on vaccine banks. The report was based on information received from OIE Member Countries and international organisations as well as other sources.

51. Most FMD free countries and regions are committed to eradication by the traditional stamping out method, if the disease were to be introduced. The realisation that this could be immensely expensive, possibly fail, or require vaccination for interim control has led to the establishment of vaccine banks during the last twenty years. For FMD there are three international banks: one for North America, one for some European and Pacific countries, and another for the European Union. For technical and practical reasons, pretested antigen concentrates of a spectrum of virus types and subtypes are stored for rapid formulation into vaccines in the event of an FMD emergency. Some individual countries also maintain vaccine banks, for FMD and other particularly serious animal diseases. Only one vaccine bank is organised by an international organisation: that for rinderpest by the Organisation for African Unity, for the Pan African Rinderpest Campaign.

52. Member countries have expressed interest in expanding FMD vaccines banks to include other diseases, and in joining international banks in which they are not participants. International vaccine banks enable countries to share the high costs of maintaining them.

Discussion on Technical Item II

53. The representative of the European Union said that they plan to store all seven FMD types in their bank. The bank will be brought up to the full planned number of doses soon. There will be a tender for three additional vaccine antigens in the near future.

54. The Delegate from Ukraine asked the rapporteur's opinion of when a country should be considered free of a disease. Dr Callis responded that this would occur when the country no longer has the disease and stops vaccination for it, leading to the absence of antibodies in animal populations.

55. Regarding a report that Greece was considering upgrading FMD vaccine production facilities, the Delegate of that country said that intention had been discarded following European Community agreements.

56. The Delegate of Japan said that since 1975 his country has stocked 300,000 doses of vaccine of three types for the event of an emergency.
57. The Delegate of Hungary said that his country has stopped FMD vaccination and closed production facilities in line with the EC policies on the subject.

58. The Delegate of New Caledonia enquired about the operating costs per dose to maintain FMD vaccine banks.

59. The Delegate of the United Kingdom answered that, regarding the International Vaccine Bank at Pirbright, costs vary according to the inclusion of new antigens. There are increased costs for each new antigen for challenge tests, licensing, and insurance. He added that, even though expensive, FMD countries considered banks a good investment and new countries are interested in participating.

The representative of the European Union said that calculating costs was complicated. Storing antigen is approximately 1/10 the cost of storing FMD vaccine. The cost of checking stored antigens, including some related research, amounts to approximately 700,000 European Currency Units annually. The cost of maintenance of 4 EC banks is about 600,000 ECUs annually. He explained that, although more costly, maintaining 4 separate bank sites was done for security reasons.

60. The representative of the Pan American FMD Centre said that the Centre maintains a small production facility with a capacity of 4 to 4.5 million doses/year. Part of its purpose is for emergencies, and they maintain a continuous stock of vaccine.

61. The Delegate of the Sudan noted that some vaccines such as those for contagious bovine pleuropneumonia have a short storage life and enquired whether there were any criteria for banking short-lived vaccines.

62. Dr Callis responded that he was aware of no such criteria, except possibly geographic proximity.

63. The Delegate of Indonesia remarked that when his country became FMD free and stopped vaccination he was advised to maintain antigens outside his country in a commercial facility. He was concerned that the right vaccine subtypes may not be available if needed.

64. Dr Callis said that this pointed out one of the major problems with vaccine banks, that of the unpredictable source and kind of an emergency disease. Another associated problem was the persistence of some FMD subtypes as a cause of disease, and the apparently transient occurrence of others.

65. The representative of the World Reference Laboratory for FMD at Pirbright, United Kingdom, drew attention to the need for continuous study of vaccine strain cross protection. He emphasised that it was critical for countries to promptly report and submit samples to the regional OIE FMD laboratories and the World Reference Centre in order to know what new FMD strains were threatening an area.

66. The Delegate of Belgium reported that since abandoning FMD vaccine production his country maintains an emergency stock of 1.2 million doses of antigens of four different types. These are stored in a commercial facility in a country within the European Union.
67. The Delegate of Australia said it was the poultry industry in his country which maintains Newcastle disease vaccine banks. Their use in an emergency would be under government control. He also said that the emergency use of vaccine in a disease free country not practising vaccination and the delayed stamping out of vaccinated animals should be addressed in the *International Animal Health Code* because this would have relevance to country classification. It was proposed that the Code Commission would examine this issue.

68. Prof. Kihm, President of the Foot and Mouth Disease and Other Epizootics Commission, agreed that this was an important issue to consider in the future.

69. The Delegate of Brazil said that her country has an official FMD vaccine bank.

70. The Delegate of South Africa said that in addition to those diseases Dr Callis had listed which Member Countries had considered for vaccine banks, recent experience has shown that a vaccine for lumpy skin disease should also be considered.

71. The Delegate of Chad observed that vaccine production was costly and that international vaccine banks should consider access by other countries.

72. Dr Callis responded that since national and international banks were maintained by countries and regions free of certain diseases, there was therefore no ready solution for the significant problem described by the Delegate from Chad.

73. The Delegate of New Caledonia enquired about the statutes of international banks regarding access to these by non-members in an emergency.

The Delegate of the United Kingdom said that the International Vaccine Bank (IVB) had been considering applications for associate membership. The present members were understandably concerned that the Bank's facilities should not become over-extended by too much expansion. The IVB had been designed to supply FMD vaccine for use in an emergency in Member Countries where an outbreak was unlikely to occur. The concept was not really applicable to countries where FMD was endemic or vaccination was routinely practised: under these circumstances commercial sources, if available, would provide vaccine more cheaply.

The representative of the European Union said that there was a legal mechanism for provision of FMD vaccine to non-members in neighbouring countries in which, if the disease occurs, there is a direct threat to EU members.

74. Along with Dr Callis, a group consisting of Dr A.I. Donaldson (World FMD Reference Laboratory), Dr V. Astudillo (Pan American FMD Centre) and Dr Ahmad Mustaffa b. Hj. Babjee (Malaysia) was asked to formulate a draft Resolution on Technical Item II.
International Animal Health Code Commission

75. Dr W.H.G. Rees, President of the Commission, reported that a meeting of the Bureau of the Commission was held at the OIE headquarters from 20 to 24 September 1993 to prepare new chapters and revisions to existing chapters in the Code, which were submitted to Member Countries for comment. Suggestions received from Member Countries and advice from experts and other OIE Specialist Commissions were considered by the Code Commission at a meeting from 17 to 21 January 1994, and a final report was prepared for presentation to the International Committee at the 62nd General Session (Doc. 62 SG/12/CS 1).

76. The conclusion of the Uruguay Round of Multilateral Trade Negotiations by the approval of the Final Act on 15 December 1993 had focused attention in the animal health field on the importance of import risk analysis and the integrity of veterinary health certificates accompanying consignments of animals and animal products in international trade. The Commission therefore considered that the completion of the Section on import risk analysis by the addition of a chapter on surveillance and monitoring and a revision of the Section on veterinary ethics and certification should receive high priority.

77. The report of the Commission also proposed revisions or additions to existing chapters on enzootic bovine leukemia, caprine and ovine brucellosis and equine viral arteritis, and amendments to appendices on collection and processing of bovine embryos/ova and in vitro fertilised bovine embryos. A revised model certificate for dogs and cats originating from rabies-infected countries in line with the revised chapter adopted at the 61st General Session, and an amendment of the guidelines on the separation of live animals and radioactive material during air transport, were also presented.

78. Details of subjects presented for consideration and comment by Member Countries and an outline of future activities of the Commission were also given in the report. The sixth edition of the Code has been printed in the three official languages of the OIE and distributed to Member Countries. The papers on risk analysis and the evaluation of Veterinary Services were published in Vol. 12, no. 4 of the OIE Scientific and Technical Review.

79. The Commission has been able to continue to respond to suggestions from Member Countries for additions and revisions to the Code largely due to the excellent support they received from the staff of the Central Bureau, which it acknowledges with thanks.

80. Before going into detail on Doc. 62 SG/12/CS 1, Dr Rees reminded the Committee that in past years additions and modifications made to the Code by the International Committee during a General Session had not been the object of specific Resolutions; these decisions were merely mentioned in the final report of each Session. The Final Act which covers the results of the multilateral trade negotiations of the Uruguay Round includes an Agreement concerning the application of
sanitary and phytosanitary measures. This Agreement envisages that members of the future World Trade Organisation will base animal health measures which could affect international trade, on standards, guidelines and recommendations drawn up by the OIE. The authority of the Code will be strengthened as a consequence of this decision. Dr Rees therefore suggested that a proposal by Prof. D. Bardonnet, Legal Adviser to the OIE, should be put into effect. According to this proposal, the Committee should make future decisions on the contents of the Code by means of Resolutions, which would make the adoption procedure more formal and explicit.

81. The Committee approved this proposal and requested that henceforth it should receive, before the end of each General Session, a draft Resolution noting the decisions which it had taken following discussion of the texts presented by the Code Commission for adoption.

82. Dr Rees submitted the following texts to the Committee for their approval:

83. **Section 1.3.: Veterinary ethics and certification for international trade**

The existing section in the Code had been reviewed and the presentation changed to reflect the responsibilities of the administrations and the veterinarians involved in certification for international trade. Recommendations produced by other international agencies were also studied and additions made to the section as appropriate.

No comments were forthcoming regarding the various draft chapters comprising Section 1.3.

84. **Chapter 1.4.5.: Surveillance and monitoring of animal health**

Dr Rees explained that the proposed chapter laid down the basic principles to be considered in carrying out the procedure. The practical application of these principles to individual diseases would form part of the future programme of the Foot and Mouth Disease and Other Epizootics Commission.

Dr Rees suggested that the title of Article 1.4.5.4. be replaced by the expression 'Assessment of Environmental Factors' and the first paragraph of the article open with 'Data on environmental factors include...'

No comments were forthcoming regarding Chapter 1.4.5. or the modifications proposed by Dr Rees.

85. **Chapter 3.1.5.: Rabies: Model certificate No. 1**

Dr Rees stated that the model certificate had been drafted following the Committee's adoption of a new chapter on rabies at the 61st General Session. To take into consideration the possibility of identifying animals by means of electronic microchips, a sentence should be added to point 1 of the Nota found at the end of the certificate: 'when electronic identification is used, the type of microchip and the manufacturer should be specified'.
In response to a question from the Delegate of Belgium, Dr Rees explained that the provisions of the certificate could also apply to dogs and cats from a rabies-free country which have been introduced into an infected country and then are to return to the country of origin.

86. **Chapter 3.2.4.: Enzootic bovine leukosis**

The Delegate of the United Kingdom proposed that a distinction be made in point 3) of Article 3.2.4.2. between cases where a number of animals react positively to a diagnostic test for EBL and those cases where only one such animal is found. Although the Delegate would not oppose the adoption of the text on these grounds, he encouraged the Code Commission to reconsider this matter at a later date in light of the provisions made within the European Union.

Dr Rees indicated to the Delegate of New Zealand that the serological survey mentioned in point 2) of Article 3.2.4.2. can be conducted on milk samples in accordance with the protocols in the Manual.

87. **Chapter 3.3.2.: Caprine and ovine brucellosis**

No comments were forthcoming regarding this draft chapter.

88. **Chapter 3.4.10.: Equine viral arteritis**

Dr Rees explained that the background paper prepared by an Ad hoc Group of experts and on which the draft chapter had been produced, had been circulated with the report of the Code Commission; this summarised the latest scientific information on the disease.

In light of concern expressed by the Delegate of the United Kingdom, Dr Rees agreed to add a new opening paragraph to Article 3.4.10.4, as follows: [the donors] 'were kept for the 30 days prior to semen collection in an establishment where no equine has shown any clinical sign of EVA during that period,'

The subsequent points must then be renumbered, with this addition at the end of the new point 3): ', and had not been used for natural breeding from the time of the taking of the blood sample to the time of semen collection'.

While stating that he would not oppose the adoption of the Chapter, the Delegate of the United States of America asked whether the following scenario would be acceptable in international trade: an animal which had previously been found serologically negative is vaccinated and given appropriate certification. Dr Rees promised that the Code Commission would explore this possibility by the next General Session.

Regarding points b) at the end of Articles 3.4.10.4 and 3.4.10.5., Dr Rees advised the Delegate of New Zealand that the Code Commission considered that a maximum time period of one year [since the last attempt at virus isolation in semen] was appropriate, since the advice from experts was that a positive reactor cannot be superinfected.
Appendix 4.2.3.1.: Collection and processing - bovine embryos/ova
Appendix 4.2.3.4.: Collection and processing - in vitro fertilised bovine embryos

Following comments by the Delegate of the United Kingdom, Dr Rees admitted his uncertainty about how to replace the phrase 'donor animals should be... inspected... and confirmed to be free of contagious and infectious disease...' in point B.3.a. of Appendix 4.2.3.1. An alternative wording will be explored by the Commission.

Following a suggestion by the Delegate of the United Kingdom that embryos should not be collected in zones affected by FMD, the representative of the International Embryo Transfer Society pointed out that if the embryo washing technique is performed correctly, it provides full security even if the donor is in an acute phase of the disease. Responding to a question from the Delegate of Indonesia, he added that the embryo washing technique is very effective against the causal agent of rinderpest, even if that disease has not yet been placed in Category One due to the insufficient number of experiments conducted in cattle. As the zona pellucida of buffalo embryos reacts like that of cattle embryos, the transfer of buffalo embryos should offer a similar degree of security.

A remark by the Delegate of Argentina on the use of the term 'negligible' in the first footnote at the end of Appendix 4.2.3.1. gave rise to a discussion. It was pointed out by several speakers that a zero risk level does not exist. The Committee decided to leave the note in its current form.

Appendix 4.4.1.1.: Air transport - General recommendations - Selected mammalian species

No comments were forthcoming regarding this draft appendix.

The Committee unanimously adopted Draft Resolution No. VIII, which records the results of the discussions on the texts submitted by the Code Commission for adoption.

Texts submitted for consideration

Draft chapters on infectious bovine rhinotracheitis and on zoonoses transmissible from non-human primates, as well as new articles for Chapter 2.1.1. on FMD, modifications to Appendices 4.3.2.1. and 4.3.2.2. and a new Appendix 4.2.2.2. (artificial insemination centres - accreditation for export - small ruminant semen) were presented to the Committee for observations and commentary.

Dr Rees explained that the new articles to be included in Chapter 2.1.1. (foot and mouth disease) are intended to complete but not to modify what had already been adopted by the Committee at the 61st General Session.
Dr Rees asked Delegates to submit suggestions and comments on all of these subjects to the Central Bureau by 31 August 1994. A questionnaire on animal protection will soon be despatched to Delegates of Member Countries, and these should be returned by the same date.

92. Future work programme

Dr Rees reported that, as requested by the Committee, an Ad hoc group had been set up to identify the problems involved in the protection of animals during transport and to suggest solutions. The Group has held its first meeting and its report will be considered at the meeting of the Code Commission in September 1994.

The Ad hoc Group on the categorisation of OIE Lists A and B diseases is continuing its work. A report will be submitted to the Committee at the 63rd General Session.

Dr Rees summarised other subjects on the future work programme of the Commission, concerning laboratory animals (gametes and embryo transfer), animal pathogens and disinfection procedures.

93. Other matters

Dr Rees drew attention to the new horse passport which had been produced by the International Equestrian Federation and expressed the hope that Member Countries would encourage its wider use to facilitate international movement of competition horses.

In regard to the drafts of new articles and appendices concerning FMD, the Delegate of Denmark requested that casings be included in the list of animal products. The Delegate of Argentina asked that the Code Commission and the FMD and Other Epizootics Commission together consider the possibility of establishing free zones with vaccination.

The representative of the European Union alluded to the Code provisions on piroplasmosis and suggested that less restrictive measures be applied to horses imported on a temporary basis which react positively to a serological test.

The Delegate of Australia announced that a document would soon be despatched to the Code Commission on problems encountered by countries with large extensively-farmed herds, and propositions would be put forth on this subject.

The representative of Mali suggested that the Central Bureau's role in furnishing information should be defined more exactly, so as to avoid commentaries outside its sphere of responsibility.

94. The Committee noted the report of the Code Commission.
Presentations by International Organisations

Food and Agriculture Organisation of the United Nations

95. The activities of the Animal Health Department of the Food and Agriculture Organisation (FAO) of the United Nations were presented. It was emphasised that there had been coordination of FAO, OIE and World Health Organisation (WHO) activities and an increased participation in joint activities. Pending approval by the FAO Council, the Organisation's ability to respond to emergency situations should be significantly improved by the creation of a system for preventing unforeseen cross-border animal disease emergencies (Emergency Prevention System: EMPRES).

Inter-American Institute for Cooperation on Agriculture

96. The activities of the Inter-American Institute for Cooperation on Agriculture (IICA) with respect to animal health were summarised. In particular, details concerning the HandiSTATUS (Help with World Animal Disease Status) system were provided. In 1992 the OIE Working Group on Animal Health Information Systems recommended adoption of HandiSTATUS as the computerised system to exchange animal health information. IICA and several Canadian agencies (Canadian International Development Agency, Agriculture Canada and the University of Guelph) supported initial development of the programme.

97. The Animal and Plant Health Inspection Service of the USDA and the OIE have committed financing towards the further development of the programme. HandiSTATUS will operate in English, French or Spanish and is in use in over 100 countries. It features textual information and mapped displays of the global distribution of OIE listed diseases, risk identification for import/export decisions, the OIE International Animal Health Code, lists of Reference Laboratories and information on disease transmission. In future there will be a copy updated daily with reports of new outbreaks, with regular distribution of updated data by diskette or through electronic mail.

World Health Organisation

98. Significant progress has been made on oral rabies vaccines for dogs with the elaboration of safety requirements to reduce the risk associated with contact between candidate vaccines and human beings. With regard to oral vaccination of foxes, WHO contributed to strengthening cross-border cooperation.

Guidelines were prepared in collaboration with FAO and OIE for the control of brucellosis in a huge area of the Middle East where the disease is showing signs of increase. Various aspects of Salmonella control and research were reviewed during WHO workshops and consultations on Salmonella infections in animals and human. A WHO consultation on bovine spongiform encephalopathy in the United Kingdom concluded that there was no indication that the list of the specified offals currently under ban should be extended.

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A plan of work for the global surveillance of emerging animal diseases and zoonoses was prepared. Two meetings on surveillance and control of zoonoses were conducted for Asian and European states of the Commonwealth of Independent States. WHO-coordinated working groups dealt with eight major zoonoses and three related areas. There are in all 37 groups and sub-groups comprising 229 experts from 34 Member States located throughout the world.

**Pan American Health Organisation**

99. In the field of veterinary public health and animal health, the countries of the Americas are currently undertaking the following regional programmes with technical cooperation from the Pan American Health Organisation (PAHO): elimination of urban rabies, eradication of FMD, eradication of bovine tuberculosis, and a technical cooperation programme for the hygienic control of foods. These programmes, which arise from political/technical discussions and agreements undertaken during the Inter-American Meetings at the Ministerial Level on Animal Health (RIMSA), have been integrated into the orientations and priorities of PAHO by its governing bodies.

Technical cooperation with countries comprises the organisation and carrying out of programmes; emphasis is placed on planning, epidemiosurveillance, reference laboratories for diagnostic tests and the quality control of vaccines, the tactical and operational aspects of campaigns, and the training of personnel. The involvement of the producers in the coordination and execution of the programmes is one of the fundamental rules. In order to support countries, the Veterinary Public Health Programme has regional and national consultants and two specialised centres, the Pan-American Centre for FMD and the Pan-American Institute for the Protection of Foods and Zoonoses.

**Other international organisations**

100. The President asked the representatives of the European Economic Community (EEC), the Interaficrican Bureau for Animal Resources (IBAR) and the International Laboratory for Research on Animal Diseases (ILRAD/ILCA) to present brief accounts of their organisations' activities in relation to the OIE.

101. Dr B. Marchant (EEC) alluded to animal health problems encountered in Europe over the past year as well as to the prospects arising from the Internal Market and from veterinary agreements signed with certain other countries. He expressed optimism regarding the proposed agreement for EEC participation in OIE activities, as it will reinforce cooperation. Dr W.N. Masiga (IBAR) described the reduced outbreaks of rinderpest and the reorganisation of Veterinary Services in Africa. Dr M. Touré (ILRAD/ILCA) informed the Committee that ILRAD and ILCA would soon merge to form a new agency, the ILRI (International Livestock Research Institute).
FIFTH PLENARY SESSION

Report on Disease Status Worldwide in 1993 and the start of 1994

102. The Head of the OIE Information and International Trade Department presented a review of the most important epidemiological events which took place in the world during 1993 (Doc. 62 SG/2) and the first months of 1994.

List A diseases

103. In North Africa, only Egypt reported outbreaks of foot and mouth disease, caused by type O virus, in 1993. The World Reference Laboratory (Institute of Animal Health at Pirbright, UK) identified the same type of virus in samples from sheep in Libya, taken in January 1994. In Argentina, Rio Negro province and the southern part of Buenos Aires province experienced an episode of FMD after more than two years of freedom from the disease. A similar event took place in Brazil, in the States of Parana, Santa Catarina and Rio Grande do Sul, where FMD was spread by the transport of batches of pigs. In the Malaysian peninsula, the FMD epizootic caused by type Asia 1 virus, which broke out in Perlis State in 1992, was overcome by January 1993. However, type O virus circulated throughout the year in Kelantan State. Tajikistan experienced three outbreaks caused by type O virus in April 1994. FMD was introduced into Italy in February 1993 following the import of cattle of obscure origin; there were 55 outbreaks during 4 months before the disease was eradicated by a policy of total slaughter, without recourse to vaccination. A single outbreak of FMD was reported by Bulgaria in May 1993, and in Russia in June.

104. Among the American countries affected by vesicular stomatitis, Colombia had the most reports of the disease.

105. During recent months, swine vesicular disease occurred only in certain European countries: Belgium (one outbreak was detected by serology), Spain (three outbreaks arising from importations), Italy and the Netherlands. In the last-named country, where no case had been diagnosed since October 1992, three linked outbreaks occurred in January-March 1994.

106. The only African countries reporting rinderpest on their territory during 1993 were Ethiopia and Uganda. In Asia during the same year it occurred in India (in four southern States), Pakistan, Sri Lanka and many countries of the Arabian peninsula. Iran reported an outbreak in March 1994, following illicit import of animals.

107. During 1993, five countries reported for the first time the presence of peste des petits ruminants on their territory: Saudi Arabia, Bangladesh, India, Israel and Jordan.

108. Contagious bovine pleuropneumonia affected almost every African country south of the Sahara. In Europe, there was a considerable fall in its incidence in Italy in 1993.
109. Introduction of lumpy skin disease into Bahrain by imported cattle was the only notable event during 1993 concerning this disease.

110. After an epidemiological silence lasting for over 12 years, Rift Valley fever reappeared in Egypt in June 1993. It was confined to Aswan Governate, where it was responsible for some cases of abortion among cows, buffaloes and ewes. A vaccination campaign was undertaken, involving over 4 million ruminants.

111. While the only outbreak of bluetongue observed in Israel in 1992 was caused by type 2 virus, all the outbreaks reported in 1993 were caused by type 16 virus, which had not been isolated since 1975.

112. The world distribution of sheep pox in 1993 was almost identical to that of the preceding year.

113. No particular epidemiological event was reported to the OIE during 1993 with respect to African horse sickness.

114. In South Africa there were two isolated outbreaks of African swine fever in autumn 1993 within a zone of surveillance for the disease in Transvaal Province. In Zambia three outbreaks were reported in Lusaka Province in February 1993. The incidence of ASF in Spain diminished considerably; however, it did occur in Grenada Province, where it had been absent since May 1986. In Portugal the disease reappeared in August 1993 in Evora and Serpa Provinces.

115. An outbreak of classical swine fever occurred in Cuba. Commencing in October 1993, its spread was favoured by a shortage of vaccine. In Mexico the incidence of the disease diminished considerably; the State of Baja California del Sur was declared free from the disease by the national authorities in 1992, but a new outbreak occurred in May 1993, and was rapidly contained. The disease was introduced into Costa Rica in February 1994 through illegally imported pigs. In Europe, 17 continental countries reported outbreaks of CSF within their borders. Among them was Switzerland, which had had no outbreak since 1975. In Germany the number of outbreaks increased almost 8 times between 1992 and 1993 (13 against 100 outbreaks), and this epizootic persisted during the first few months of 1994. In Belgium the disease was introduced with imported piglets, and almost 25,000 pigs had to be slaughtered before the end of 1993. Many European countries continue to experience CSF among wild boar populations.


117. For the first time in 1993, Newcastle disease virus was isolated from samples taken from ostriches in South Africa and Botswana. In the same year, Zimbabwe experienced an epizootic of ND for the first time since 1986, but it remained confined to family flocks. In Europe the disease occurred sporadically in many countries, being most pronounced in
Germany, Belgium and Malta (having been introduced into Malta by imports of ornamental and cage birds). On many occasions the birds affected were in family flocks or those kept by amateurs. France declared a regained status of freedom from the disease on 29 June 1993. Reports received since January 1994 show that ND virus continues to circulate in many European countries.

**List B diseases**

118. The incidence of **rabies** in France declined by 80% between 1992 and 1993. No case of fox rabies was diagnosed in Belgium and Luxemburg during 1993. These good results are attributed to repeated campaigns for the oral vaccination of foxes against rabies. However, despite this action, rabies has been on the increase in north-west Switzerland since 1991. Poland commenced oral vaccination of foxes in 1993.

119. There were 61 cases of **screwworm infestation** (*Cochliomyia hominivorax*) in Mexico in 1992, but only 5 cases were reported in 1993, the last one on 17 June 1993.

120. The number of cases of **bovine spongiform encephalopathy** confirmed during 1993 in the United Kingdom exceeded 37,000. However, various facts of an epidemiological nature demonstrate that the situation is improving in that country, among them the pronounced decrease in incidence among cattle under 5 years old. France, Ireland and Switzerland reported, respectively, 1, 16 and 29 cases. Canada and Portugal each experienced a case in imported cattle, while Germany confirmed two such cases.

121. In October 1993 **scrapie** was observed for the first time in Israel.

122. An outbreak of **Venezuelan equine encephalomyelitis** occurred in Mexico during 1993. An emergency vaccination campaign succeeded in controlling it.

123. In January 1993, Mexico declared that it had eradicated **viral haemorrhagic disease of rabbits**, introduced into its territory in 1989. This disease appeared among farm-reared rabbits in Cuba in May 1993, but precautions were taken, and no further outbreak has been reported since September of that year. In Europe, the disease appeared for the first time in Sweden and Lithuania.

**TECHNICAL ITEM III**

**Animal Health Status in Member Countries**

(Doc. 62 SG/17)

124. The salient points of the reports presented by Member Countries are summarised below:
Africa

125. The last outbreak of rinderpest in Uganda was reported in March 1993. Vaccinations continue within the framework of the Pan African Rinderpest Campaign (PARC).

126. African swine fever was observed for the first time south of the 22nd parallel in Mozambique.

127. Morbidity remained low following the outbreak of Newcastle disease on seven ostrich farms in South Africa, affecting young ostriches in particular. The virus was not detected in meat and no cases of transmission to other birds were reported. The disease was recently reported among indigenous poultry in the Manzini region of Swaziland.

Americas

128. The number of outbreaks of FMD in Argentina has declined considerably (350 outbreaks in 1992, 196 in 1993). This positive trend has continued in 1994 as a result of active surveillance and vaccination campaigns set up with cattle producers. Brazil hopes that by the end of 1994, there will be no more outbreaks in the southern part of the country. In Paraguay, an eradication programme has been underway since 1992. The north-western part of the country is now FMD-free without vaccination whereas farther south, a free zone with vaccination was established in 1994. Uruguay has decided to continue its FMD eradication programme; it is envisaged that vaccination of bovines will cease, given the favourable regional context. Vaccination of swine has never been practised, and ovines have not been vaccinated since 1988.

129. An eradication programme against hog cholera is underway in southern Brazil, where vaccination is no longer practised. The programme is based on serological controls.

130. Brazil is also conducting an eradication programme against Newcastle disease, which is present on small farms but not in industrial poultry establishments.

131. Thanks to appropriate policies, bovine brucellosis and tuberculosis decreased by 0.2% and 0.15% respectively in Uruguay. In view of this success, eradication schemes for these two diseases have been planned.

132. Canada reported that cattle exported by air transport recently died as a result of technical problems. This occurrence suggests that the relevant provisions of the International Animal Health Code should be reinforced.

Asia, Far East and Oceania

133. Only one outbreak of FMD occurred in Israel in 1993. Four outbreaks due to type O virus were reported in border zones of Tajikistan in April 1994. Quarantine measures concerning these zones should be lifted on 25 May 1994.
134. In India, rinderpest is present only in several districts of the four southern states considered infected. The rest of the territory is free of the disease. Iran is at risk because it is surrounded by infected countries; as recent events have shown, outbreaks may occur as a result of illegal imports of animals.

135. The recent introduction into Israel of peste des petits ruminants shows the importance of cooperation between countries in the Middle East Region. In this respect, a veterinary agreement intended to promote coordinated control efforts against animal diseases was recently signed in Paris (29 April 1994) and included in the framework of the Gaza-Jericho Agreement signed in Cairo (Egypt) on 4 May 1994 between Israeli and Palestinian authorities.

136. Iran is necessarily free of hog cholera since there are no pigs in the country.

137. Anthrax was confirmed in Western Australia for the first time. Notification of anthrax is compulsory and special control measures have been imposed.

138. Infectious bursal disease was identified for the first time in New Zealand late in 1993. The virus continued to be of extremely low virulence, and vaccination is not currently being practised.

139. A virus belonging to the Retroviridae family is the cause of Jembrana disease in Bali cattle (Bos sondaicus) in Indonesia, present since 1964. A cell-culture vaccine from spleen is used to control the disease.

140. In New Caledonia, egg-drop phenomena were attributed to the virus of avian encephalomyelitis.

Europe

141. As a result of one outbreak of FMD in Bulgaria in May 1993, only 2050 cattle were vaccinated, in the outbreak area. Of these, nearly 80% were slaughtered in local abattoirs. The country is once again FMD-free. Serological surveys were carried out in every province of Italy in 1993, and the country now fulfils OIE conditions for being FMD-free.

142. Following an outbreak of rinderpest in far eastern parts of Turkey, vaccinations were performed in threatened provinces. Animal movements are strictly controlled.

143. In Belgium swine vesicular disease was detected during a serological survey undertaken in premises which had imported pigs from an infected country. However, the virus could not be isolated and no clinical signs of the disease were observed. All the pigs on these premises were nevertheless destroyed. Three outbreaks of swine vesicular disease were diagnosed in Spain in 1993 and resulted from importations (one in the province of Lerida, two in the province of Huesca). All of the pigs in the premises concerned were sacrificed. Since then, two million serological tests have been done and have shown that there is
no circulation of the virus in Spain. Import control measures against the disease were undertaken in Italy, because most outbreaks were linked directly or indirectly with importations.

144. The incidence of contagious bovine pleuropneumonia has dropped markedly in Portugal.

145. The CEC declared Spain free of African horse sickness as of 1 December 1993.

146. In recent months the campaign against African swine fever has had very positive results in Spain. No new outbreaks have been reported for three months. The CEC reconfirmed Portugal as disease-free after several outbreaks there in 1993 were totally brought under control. An eradication programme against African swine fever is successfully underway on the Italian island of Sardinia.

147. In view of the threat of hog cholera, Albania is conducting vaccinations in transit and border zones. In Germany, more than 65,000 animals in herds infected with this disease were slaughtered and destroyed. In addition, 800,000 pigs were slaughtered in the province of Lower Saxony, in accordance with market-stabilising measures. Strict slaughter measures have been enforced upon outbreaks of hog cholera in Switzerland, and particular attention is now given to the sterilisation of swill. Serological surveillance in Switzerland has shown that the causal virus is no longer in circulation. A favourable trend in the disease situation has been observed in the Ukraine.

148. The last outbreak of Newcastle disease in Malta dates from 6 May 1993. All of the restrictions imposed were therefore lifted six months later, but the importation and sale of exotic birds are still prohibited.

149. The rabies situation in France has evolved favourably, and there have been no cases in canine species. Rabies has become a problem in Georgia and Uzbekistan. Rabies incidence has increased among both domestic animals and wildlife in Uzbekistan.

150. Two outbreaks of bovine tuberculosis in southern Hungary have now been eradicated.

151. There was a 20% decline in the real incidence of bovine spongiform encephalopathy in 1994 compared with the same period in 1993 in the United Kingdom. This is a direct result of the prohibition on using ruminant proteins in cattle feed. A considerable reduction occurred in the number of cases among animals less than five years of age, and no case of maternal transmission has been demonstrated to date.

152. Greece has undertaken a new control programme against caprine and ovine brucellosis.

153. Infectious bursal disease has been introduced in Uzbekistan over the last years, due to increased imports of eggs and chicks of diverse origins.

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154. The President proposed a vote on Resolution No. I calling for the Committee's adoption of the Director General's report and the report on the evolution of epizootics in 1993. This resolution was adopted unanimously.

Activities of the Specialist Commissions (continued)

Standards Commission

155. Prof. M. Truszczynski, President of the Commission, presented the report on the meetings held from 21 to 24 September 1993 (Doc. 62 SG/12/CS 2A) and from 8 to 10 February 1994 (Doc. 62 SG/12/CS 2B).

156. The Commission reviewed the activity on standardisation of diagnostic tests for foot and mouth disease, rinderpest, peste des petits ruminants, contagious bovine pleuropneumonia, bluetongue, African horse sickness, hog cholera (classical swine fever), Aujeszky's disease, rabies, paratuberculosis, brucellosis, equine infectious anaemia, infectious bovine rhinotracheitis, enzootic bovine leukosis and equine viral arteritis. Progress was noticed especially in the cases of foot and mouth disease (a diagnostic ELISA kit is available from the OIE Reference Laboratory, Pirbright, United Kingdom); peste des petits ruminants (the candidate reference serum is in the final stage of evaluation); and brucellosis (results indicate that the ELISA is of similar sensitivity and specificity to the best of the present assays).

157. It was noted that funds available from the OIE budget to support international standardisation programmes are limited. A number of helpful comments had been received on the guidelines for production of standard sera, which have been incorporated into the revised text. Work was initiated on the preparation of guidelines for the validation of diagnostic tests for infectious diseases.

158. The Commission together with the consultant editor, Dr G.A. Cullen, reviewed comments from Member Countries on the second edition of the OIE Manual. Following detailed discussion each chapter was designated as needing to be updated, revised or rewritten. Authors and reviewers were selected for each chapter. The Commission re-emphasised its awareness of the need to improve the vaccine sections of the Manual.

159. Applications for Reference Laboratories were reviewed and six were recommended for approval. There are currently 97 experts in 107 Reference Laboratories in 20 countries, covering 37 List A or B diseases or groups of closely related diseases. The primary aim of establishing Reference Laboratories, i.e. to create a network of laboratories able to provide advice and assistance to the OIE and its Member Countries, has to a large extent been achieved. However, further designations of Reference Laboratories can still be considered when this will extend the expertise available or the geographic coverage of the network.

160. Reviewing the reports for 1993 prepared by OIE Reference Laboratories, the Commission was impressed with the quality and range of activities reported. On 22 March 1994, 104 out of 107 Reference Laboratories and
3 Collaborating Centres had submitted annual reports for 1993. Of these, the following numbers were involved in international activities: diagnosis/identification - 47 (45%); distribution of reagents - 67 (64%); collaborative research - 73 (70%); training - 69 (66%); technical consultations - 47 (45%); meetings arranged or attended for the OIE - 13 (12%). The reports received from Reference Laboratories will be collated and sent to Delegates and Reference Laboratories. In view of the exceptional importance of the activities carried out for the OIE by the Reference Laboratories and Collaborating Centres during 1993, warm thanks were conveyed to the staff of Reference Laboratories and Collaborating Centres and to the authorities of Member Countries where they are located.

161. Questions from the Animal Health Code Commission concerning the following subjects were answered: equine viral arteritis incubation period and virus isolation techniques for equine arteritis virus in semen; details of recommended diagnostic techniques and vaccination for caprine and ovine brucellosis; use of the polymerase chain reaction for enzootic bovine leukosis; the response to rabies vaccine in immunosuppressed animals; diagnostic tests for use in camels and the risk of developing a carrier state of brucellosis, particularly in camels following Rev-1 vaccination; virus isolation technique for IBR virus in semen; the minimum level of sensitivity and specificity of serological tests for IBR; and the level of sensitivity of sampling procedures for trichinellosis.

162. The Commission noted the recommendations that T1 should be used as standardised vaccine strain against contagious bovine pleuropneumonia and recommended that continued efforts be made to develop specific and sensitive ELISA systems based on monoclonal antibodies. In relation to a resolution of the World Association of Veterinary Laboratory Diagnosticians (WAVLD) it was stated that the OIE has no plans or mandate to be involved in an animal health laboratory accreditation programme. An OIE representative will attend the VIIth International Symposium of Veterinary Laboratory Diagnosticians, Buenos Aires (Argentina), 8-11 November 1994, to provide a link with the activities of the Standards Commission.

163. Other topics discussed included: the report of the OIE Ad hoc Group on Categorisation of Diseases; the Symposium on Risk Assessment for Veterinary Biologicals to be held in Washington DC (USA) on 5-7 December 1994 under the auspices of the OIE; and the planned FAO Manual on the Production and Quality Control of Veterinary Vaccines for use in Developing Countries.

164. Prof. Truszcynski thanked the members and consultants of the Standards Commission, whose mandates expire this year, as well as the OIE Central Bureau, for their excellent collaboration over the last three years.

165. The Delegate from Ukraine asked for clarification of the risk of moving small ruminants vaccinated with Rev-1 vaccine to countries free of infection with Brucella melitensis, and whether the same principles apply for bovine brucellosis.
166. Prof. Truszczynski responded that serological reactions due to vaccination are difficult to distinguish from those caused by infection and Rev-1 vaccinates should therefore not be transported to disease free countries. There are similar considerations for bovine brucellosis.

167. The President of the OIE congratulated the Standards Commission for its fine work, involving internationally renowned experts. He noted that their accomplishments are of great importance to all Member Countries.

168. The Committee noted the report of the Standards Commission.

SIXTH PLENARY SESSION

Activities of the Specialist Commissions (continued)

Foot and Mouth Disease and Other Epizootics Commission

169. Prof. U. Kihm, President of the Commission, presented the conclusions and recommendations of the third meeting of the Coordinating Group for the Control of FMD in South-East Asia, held in Ipoh (Malaysia) from 21-24 February 1994. The Committee took cognisance of these conclusions and recommendations.

170. Prof. U. Kihm next presented the subjects discussed at the meeting held at OIE headquarters from 17-21 January 1994 (Doc. 62 SG/12/CS 3A).

171. As the world situation of FMD had been described in the previous plenary session, Prof. Kihm suggested that no further review was needed. The Delegate of Belgium reported on two outbreaks of swine vesicular disease in his country in November 1992 and February 1993. These outbreaks, detected by serological control, occurred in pigs which had been kept in an experimental station. The virus was never demonstrated in these animals. Dr A.I. Donaldson, Secretary General of the Commission, pointed out that many strains of swine vesicular virus produce an inapparent infection which can only be detected serologically.

172. Prof. Kihm briefly summarised the results of the Scientific Conference on the Control of Foot and Mouth Disease, African Horse Sickness and Contagious Bovine Pleuropneumonia, held in Botswana on 20-23 April 1994. In this context, the Delegate of South Africa proposed that the Code Commission be requested to give attention to the recognition of AHS free zones with vaccination.

173. In compliance with the Committee's request in May 1993, the Central Bureau had asked Member Countries to report on their FMD status using the definitions in the International Animal Health Code. Prof. Kihm reviewed the reports received and then, in keeping with the Commission's wishes, described and proposed for adoption a standardised format and procedure for requesting status as a zone or country free from a given disease. He pointed out that proposed Resolution No. IX explains this procedure in another manner.
174. The procedure then formed the object of a long discussion. The Delegates of certain countries, such as France, Mali and Norway, expressed concern about the considerable task which the OIE would face if this procedure were used for all diseases. The Delegate of Mali, seconded by the Delegate of Chad, wished to limit the role of expert panels, since the cost of their involvement seems prohibitive. Decisions might even be decentralised at the regional level, since a country's situation is best known by its neighbours. The Delegate of Norway nonetheless recognised the merits of the procedure, because epidemiological surveillance data would be added to the information gathered by the OIE's traditional system of disease notification.

175. The Delegate of the United Kingdom did not understand whether expert panels were to be involved frequently or exceptionally, nor was this subject dealt with in the proposed Resolution. In his view, such panels had an important role to play. The Delegates of Argentina and India also spoke in favour of visits by expert panels upon request by a country, for this would promote transparency. The Delegates of New Zealand and Uruguay supported the position of the Delegate of Argentina. They requested that the procedure be established without delay, as it would be useful to many countries and the OIE would then fully assume the scientific and technical role which GATT had assigned to it. If countries were lacking resources, special means would have to be found to assist them. But financial problems should not supply an argument for rejecting the proposal. Prof. Kihm emphasised that there was no comparison between the cost of experts and the cost of a programme for the surveillance and eradication of a disease.

176. Declaring himself in favour of the principle, the Delegate of Australia nonetheless listed some of its difficulties, including equity, the management of the procedure, confidentiality and the legal basis of OIE activities. It was therefore important to proceed, but with caution.

177. The President acknowledged the concern felt by a number of developing countries, for whom the procedure could challenge traditional trade relations which have hitherto functioned without great difficulty. The Delegate of Austria was troubled by the number of international organisations involved in declaring that a country was disease-free. Conflicting decisions might occur in some cases. In his view, the OIE's relation to GATT should be limited to that of standardisation. The Delegate of Mexico observed that, with the Commission's proposal, the OIE's role would change from normative to operational activities. This would be a major policy change for the OIE.

178. The Delegates of Mali thought that it would be impossible to manage the procedure at a world level for all animal diseases. He repeated his suggestion that it should be decentralised to a regional level. In addition, considering the cost of expert missions, they should be organised only when there is opposition to declaring a country free of a disease.
179. The Delegate of Russia considered the procedure as a sign of distrust regarding the declarations of national Veterinary Services. He raised the question as to how outside experts could really know what occurs inside a given country. The Delegate of Ukraine expressed a similar opinion. The Delegate of Russia added that the territory of his country was vast and its health status should be assigned at the level of sub-divisions. Prof. Kihm was totally in agreement with this manner of proceeding, as long as the country concerned can provide the necessary evidence that zones which correspond to the definitions in the International Animal Health Code can be identified.

180. The Delegate of Tunisia believed that a decision should not be taken immediately, but that time should be left for reflection, in view of the serious commercial consequences of this procedure. International trade is changing rapidly, and the GATT Agreement is going to lead to tighter control of trade rather than to liberalisation. The Delegate of Tunisia feared that the establishment of an OIE procedure in this field would penalise a number of developing countries, due to the constraints imposed on them (performance of Veterinary Services, technical conditions, financial means). He also feared that the application of the procedure might lead to the OIE taking sides in conflicts, which would certainly have harmful consequences for its functioning.

181. Prof. Kihm stated that all of these problems had come to the Commission's attention. However, adoption of the procedure would remedy the fact that Delegates can at present declare whatever they wish and the Central Bureau is then obliged to reproduce this declaration. A credibility problem would be resolved. In addition, thanks to the OIE, the refusal of certain countries to import would not be based on strictly commercial reasons but would have to be justified on scientific grounds.

182. In view of the fact that many countries seem to approve of the procedure in principle while still expressing great concern about details of its implementation, the President proposed to postpone the decision on the draft Resolution until next year, when the Commission will have reexamined the question. The Committee adopted this proposal by a majority vote (47 votes in favour; 14 votes against).

183. Notwithstanding this postponement, Prof. Kihm asked that the Committee give a mandate to the Commission so that it could continue the work already undertaken on this subject, especially in regard to FMD. The President asked for a small working group to meet and formulate a much shorter draft resolution. The Delegates of Argentina, Brazil, Mali, Swaziland, Tunisia and Uruguay agreed to be members of this group together with Prof. Kihm.

184. Prof. Kihm presented the document on 'Recommended Standards for Epidemiological Surveillance for Contagious Bovine Pleuropneumonia'. The Delegates of Italy, Spain and Portugal expressed their disagreement with the time periods necessary before a country can declare itself provisionally free of the disease and before the OIE recognises it as disease-free. The prescribed time periods appeared far too long for countries in which active surveillance is carried out in abattoirs and also by means of serological surveys. In addition, the Delegate of Spain asked that the category of 'freedom from infection' be removed.
185. Prof. Kihm was surprised that this opposition stemmed from the countries in which the OIE Reference Laboratories for pleuropneumonia were located. Indeed, two of the countries participated in the expert consultation which had drafted the text.

186. In view of this situation, the President proposed that the text be reexamined by the FMD and Other Epizootics Commission. Countries wishing to improve on the content of the text were asked to forward their proposals to the Central Bureau.

187. Considering the importance of the rinderpest eradication programme conducted under the leadership of FAO, the FMD and Other Epizootics Commission recommended that rinderpest be presented as a special topic at the 63rd General Session.

188. Prof. Kihm expressed his wish that the FMD and Other Epizootics Commission pursue two major activities in the future: formulation of surveillance strategies for specific diseases, and development of 'reference cards' for List A and certain List B diseases.

189. Prof. Kihm briefly summarised the International Programme for Monitoring Emerging Infectious Diseases (ProMED), coordinated by WHO and the Federation of American Scientists. Although the main activities may concern the global monitoring of human infectious diseases, animal diseases are also recognised to be of great importance. Close cooperation with the OIE is strongly recommended.

190. The Committee noted the report of the FMD and Other Epizootics Commission.

Activities of the Regional Commissions
(Doc. 62 SG/11)

Regional Commission for Africa

191. Dr A.M. Touré (Senegal), Vice-President of the Commission, presented the report of the meeting of the Commission held on 16 May 1994 at OIE headquarters (Doc. 62 SG/11B AF).

192. The Committee noted the report.

Regional Commission for the Americas

193. Dr C.A. Correa Messuti, (Uruguay), Vice-President of the Commission, gave a report on the 12th Conference of the Regional Commission for the Americas which was held in Asunción (Paraguay) from 15 to 18 March 1994.

194. He also presented the report of the meeting of the Commission held in Paris on 16 and 17 May 1994 (Doc. 62 SG/11B AM).

195. The Committee noted the report and endorsed the recommendations of the Conference of Asunción.
Regional Commission for Asia, the Far East and Oceania

196. Dr B. O'Neil (New Zealand) gave a report on the 18th Conference of the Regional Commission for Asia, the Far East and Oceania which was held in Auckland (New Zealand) from 9 to 12 November 1993.

197. He also presented the report of the meeting of the Commission held on 16 May 1994 at OIE headquarters (Doc. 62 SG/11B AS).

198. The Committee noted the report and endorsed the recommendations of the Conference of Auckland.

Regional Commission for Europe

199. Dr N.T. Belev (Bulgaria), President of the Commission, presented the report of the meeting of the Commission held on 17 May 1994 at OIE headquarters (Doc. 62 SG/11B EU).

200. The Committee noted the report.

Regional Commission for the Middle East

201. Dr M.S.M.A. Harbi (Sudan), Vice-President of the Commission, presented the report of the meeting of the Commission held on 17 May 1994 at OIE headquarters (Doc. 62 SG/11B ME).

202. The Committee noted the report, and the President requested that the Central Bureau explore the possibility of including the Arabic language in OIE activities, as the Regional Commission had proposed.

Thursday 19 May 1994

SEVENTH PLENARY SESSION

Activities of the Specialist Commissions (continued)

Foot and Mouth Disease and Other Epizootics Commission (continued)

Gumboro disease

203. Dr G.A. Cullen presented a review of infectious bursal disease (IBD; Gumboro disease), a viral infection of poultry. His review emphasised factors influencing disease susceptibility, the recent world-wide trends in disease evolution, and methods for prevention and control of this important disease.

204. The Delegate of Greece enquired about the degree of immunity transferred through the yolk. Dr Cullen said that the level of yolk immunity was good and that one-day-old chicks had about the same immunity as parents. The half-life of antibody is 2.8 days, with protection up to 35 days.

205. The Delegate of Sudan noted that Gumboro disease was very important in the Middle Eastern region, and would be a topic of the next OIE Conference for the region.

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206. The Delegate of Malaysia enquired about the survival of virus on poultry carcasses. Dr Cullen responded that, to his knowledge, no specific data existed but that he would expect it to be a long time, as virus survived up to 60 days in chicken litter, a more hostile environment than frozen carcasses in particular.

207. The Delegate from Indonesia said that strains isolated in his country had been used to prepare vaccines, but these vaccines had not been very effective in recent outbreaks. Dr Cullen thought that this could be due either to virulence of the strains present or the appearance of new serological variants.

208. The Delegate of Bahrain asked Dr Cullen why in his opinion the disease had become more virulent world-wide and if an even worse evolution could be expected. Dr Cullen answered that he did not know why the disease had evolved in this way, except that there must have been a small genetic change in the virus. It was unlikely that the disease would become even worse, given its present severity. It is hard to imagine an IBD virus more virulent than some of the strains now present.

209. The Delegate of the United Kingdom asked why fumigation of hatching eggs had been stipulated, and whether there was evidence of egg transmission. Dr Cullen said he believed that egg transmission was a possibility in most infectious diseases of poultry, including IBD. This was difficult to prove due to low transmission rate. Fumigation of eggs was also useful to prevent mechanical transmission of infection on the shell surface.

210. The Delegate of Brazil observed that a rapid transition to new animal husbandry systems often carried risks, as shown by the appearance of Gumboro disease which arose, it appeared, from the use of fish meal in the feeding of poultry. The appearance of BSE was a similar phenomenon, linked to the introduction of proteins of ovine origin into cattle feed. Ascitic syndrome of poultry was also the consequence of genetic and nutritional changes to the production system. All of this should lead us to analyse technological changes that are introduced regardless of ethology and animal biology and that have important health consequences, such as the appearance of Gumboro disease or BSE.

211. The Delegate of New Zealand gave more information on the disease in his country. To date, it had not been necessary to vaccinate flocks.

212. The Delegate of New Caledonia asked if birds such as turkeys and ducks could be carriers of IBD, spreading disease to chickens, and what was the role of wild birds. Dr Cullen said that these birds could only act as mechanical carriers of infection. They would not cause multiplication of the serotype I virus.
213. Countries and zones that may be considered as free from FMD

A new draft of Resolution No. IX, entitled 'Countries and zones that may be considered as free from FMD', was distributed during this session. At the invitation of the President, the Delegate of Tunisia indicated that the new text was an accurate reflection of the compromise reached in the working group that had been formed at the President's request to consider this subject. The new draft of Resolution No IX was submitted to a vote and was adopted unanimously by the Committee. The text appears as Resolution No. IX at the end of this report.

Fish Diseases Commission

214. The activities of this Commission, which met from 29 November to 1 December 1993, were presented by Prof. T. Håstein, President of the Commission (Doc. 62 SG/12/CS 4).

215. The disease problems associated with farming of and international trade in aquatic animals seem to continue to increase, and new disease conditions have been described.

216. Information on diseases affecting aquatic animals

The pathogens listed in the Code continue to have a serious impact on fish, mollusc and crustacean farming. The most significant observations during 1993 were as follows:

217. Regarding viral haemorrhagic septicaemia (VHS), there seems to be no significant change in the situation in the European Union (EU) compared with previous years and the disease is still absent from most other OIE Member Countries. Great Britain, Northern Ireland, Ireland and the northern part of Jutland (Denmark) have been given the status of 'approved zone' by the EU. New isolations of VHSV have been made from several Pacific herring stocks of Alaska and Washington State, USA, and off the coast of British Columbia, Canada. The presence of VHSV in herring may account for the virus isolations in Pacific cod and Pacific salmon which predate those in herring.

218. Infectious haematopoietic necrosis (IHN) has not spread further within the EU countries, where there has been only a slight increase in the number of infected farms. On the same basis as for VHS, Great Britain, Northern Ireland, Ireland and Denmark have been given the status of 'approved zone' for IHN. In British Columbia, IHNV has been isolated from 11% of examined sockeye salmon in seawater some 15 km from their spawning rivers, indicating either a latent carrier state or a marine reservoir.

219. Channel catfish virus (CCV), Onchorhyncus masou virus (OMV) and epizootic haematopoietic necrosis virus (EHNV) are still absent from Europe.

There seem to be no changes in the epidemiological status of Bonamia and Martellia in molluscs, but three cases of a herpesvirus infection in Pacific oyster have been reported from France.
220. The new viral disease, called viral nervous necrosis (VNN) or encephalitis, has been demonstrated to be caused by an RNA virus belonging to the family Nodaviridae and the virus is related to 'picorna like' viruses observed in seabass, nile perch and groupers. Bohle iridovirus (BIV) has been demonstrated to be closely related to EHNV.

Plasmacytoid leukaemia (marine anaemia) and erythrocytic inclusion body syndrome (EIBS) continue to produce some losses in Pacific salmon in North America. New evidence has shown that marine anaemia is caused by a retrovirus, salmon leukopaenia virus (SLV). Infectious salmon anaemia (ISA) is still reported only from Norway, but the disease now seems to be under control. Epizootic ulcerative syndrome continues to spread throughout South and South-East Asia, causing severe losses in fish production. A non-occluded baculovirus infection in tiger shrimps has recently been identified and appears to be the most virulent virus known in shrimp so far. The condition is called yellowhead disease.

221. The disease situation regarding the bacteria listed in the Code remains largely unchanged, although an increase in the number of infected farms in Great Britain has been reported. Edwardsiella ictaluri remains the most significant health problem in channel catfish farming in USA.

222. Infection with Piscirickettsia salmonis has now been confirmed in British Columbia, Canada and Ireland. Mycobacterial infections have caused significant problems in the hybrid striped bass industry in the USA among others due to the potential human health concern. Infection with Vibrio salmonicida ('Hitra disease') has been reported to be a problem in Atlantic salmon in New Brunswick (Canada), and in Maine (USA) as well as in the county of Finmark (Norway). Brown ring disease in Manilla clams was reported from Spain in 1993 for the first time.

223. The dipstick ELISA reported on last year for rapid diagnosis of VHS has been subjected to field trials in affected farms in France and Denmark and proved highly successful. The commercially available ELISA kits for detection of bacterial kidney disease (BKD) are now being widely used in broodfish testing in several countries. Immunohistochemical methods for the detection of several serious fish diseases have been established in Norway.

224. In accordance with a suggestion from the OIE Animal Health Code Commission, the Fish Diseases Commission has decided to rename List B diseases of fish, molluscs and crustaceans as 'Diseases notifiable to the OIE' if this is accepted by the General Session. A second list with diseases of lesser importance, of limited geographical distribution, or too recently defined to be well understood, has been created under the name of 'Other significant diseases'.

No new diseases became candidates for listing as notifiable diseases in the Code. However, it has been suggested that the notifiable channel catfish virus disease (CCVD) as well as BKD and edwardsiellosis (infection with Edwardsiella ictaluri) be transferred to the list of 'other significant diseases'. The following diseases
are also candidates for this second list: ISA, infectious pancreatic necrosis (IPN), piscirickettsiosis, encephalitis virus disease and epizootic ulcerative syndrome; as well as the crustacean diseases monodon baculovirus infection, yellowhead monodon virus infection, baculovirus penaei, baculoviral midgut gland necrosis virus infection, infectious hepatopancreatic and haematopoietic necrosis virus and crayfish plague. No new molluscan diseases have become candidates for either of the lists in the Code.

225. The new version of the US Title 50 (50 CFR Part 16) came into force in December 1993 which now only applies to live fish, eggs and dead ungutted salmonids. The regulations have been amended to include technical requirements for examinations. Fish must be examined for four viral diseases, all listed in the OIE International Animal Health Code for Fish, Mollusc and Crustacean Diseases (IHN, VHS, OMV and IPN) and found free from them for health certificates to be issued. No coordinated disease control policy for trade in aquatic animals seems to have been established between Asian countries, although quarantine systems have been established in several countries such as Japan, Singapore, Taiwan, Malaysia, Indonesia and Thailand.

226. **Review of the activities of the Fish Diseases Commission**

The brochure introducing the OIE and its Fish Diseases Commission was presented to the OIE General Session in May 1993 and subsequently to the international community of fish pathologists at the European Association of Fish Pathologists International Conference in Brest, France in September 1993.

227. The draft of the *International Aquatic Animal Health Code and Diagnostic Manual* was intensively discussed and reviewed and will be circulated to Chief Veterinary Officers of the OIE Member Countries for comments during 1994. Hopefully, the Code will be finalised for approval by the International Committee during 1995.

228. In accordance with the resolution adopted by the OIE General Session last year, the FDC have now through the established Organising Committee led by Dr B. Hill, the Vice-President of the FDC, agreed on a provisional programme for an international conference on 'Problems in control of diseases of aquatic animals, due to international trade'. The conference will be held in June 1995.

229. The Delegate of Australia declared that there had not been mass mortality among *Penaeus monodon* crustaceans in his country. He asked that paragraph 1.3. of the Commission report be changed accordingly.

230. In response to two questions from the Delegate of Indonesia, Prof. Hästein stated that, to his knowledge, no international organisation has set out recommendations like those contained in the *International Aquatic Animal Health Code*; he then described the practical procedures which had been implemented in his country for vaccinating fish against furunculosis.
231. The Delegate of Côte-d'Ivoire, seconded by the Delegate of France, expressed dismay that channel catfish virus disease had been transferred from the list of notifiable diseases to the list of 'other significant diseases'. Prof. Hästein replied that a majority of Commission members had pronounced in favour of this transfer because of the very limited distribution of the disease. However, importing countries would be encouraged in general to request health guarantees whenever they had concerns regarding diseases in the list of 'other significant diseases'.

232. The Delegate of Malaysia announced that an international congress devoted in part to aquatic animal diseases would be held in his country in November 1994.

233. Noting that warm waters hold the greatest development potential for world aquaculture, the Delegate of France suggested that the pathology of warm-water fish should not be neglected.

234. The Delegate of Zimbabwe expressed satisfaction that the Commission had shown an interest in crocodile diseases.

235. The Committee noted the report of the Fish Diseases Commission.

**Reports on the Meetings of the OIE Ad hoc Groups**

**Ad hoc Group on Non Tsetse-Transmitted Animal Trypanosomoses** (Doc. 62 SG/14)

236. Dr L. Touratier reported on the work done by this Group in 1993 and 1994 and summarised its 15th annual meeting which was held at the OIE headquarters on 18 May 1994 under the chairmanship of Dr W.N. Masiga, Director OAU/IBAR.

237. The immunosuppression induced by trypanosomoses was considered at a practical level. The overall results of the Pan African Rinderpest Eradication Campaign (PARC) were considered with great satisfaction. However, further vaccination campaigns could consider the possible state of *Trypanosoma evansi* chronic infection and some lack of immune responses.

238. Basic research currently underway includes studies on the glucose transporter protein with an aim to synthesising trypanocidal molecules which can enter the trypanosomes through this transporter system. In Central Africa studies are underway to identify actual vectors of *T. vivax* and *T. congolense* in tsetse free areas. Other studies are similarly being conducted on *T. vivax* vectors in the Guyanas.

239. The Ad hoc Group recommends the initiation of a camel genome project. This project would also yield a considerable spin-off at the training level. It is recommended that further evaluation of ELISAs for the diagnosis of dourine should be done, with a view to replacing the complement fixation test eventually. Is is difficult to distinguish between *T. equiperdum* and *T. evansi* at the molecular and species level, and the Group recommends additional research on their intrinsic biochemical and genetic differences. For diagnosing other trypanosomoses ELISAs are being actively developed, in particular in Asia.
240. Emphasis should be put on obtaining basic epidemiological information in various environments. Governments and donor agencies should be aware that one of the main problems is often a lack of local availability of the few effective drugs.

241. The Committee noted the report of the Ad hoc Group on Non Tsetse-Transmitted Animal Trypanosomoses.

Ad hoc Group on Wildlife Diseases

242. Dr M. Artois reported on the activities of the Group, which met from 2 to 4 February 1994 under the chairmanship of Dr M. Woodford (President of the Veterinary Group of the Species Survival Commission of the International Union for the Conservation of Nature and Natural Resources) (Doc. 62 SG/15).

243. The Group examined the situation with respect to List A and B diseases which affected wildlife in 1993 and preceding years. With respect to List A diseases, FMD, hog cholera and Newcastle disease continue to be a major cause of concern, as do twelve diseases from List B and sixteen other diseases which were identified and named in a specific list.

244. The Group studied methods for the reporting and notification of different wildlife diseases which are important for veterinary public health. In particular, it was suggested that the Director General designate regional coordinators who would have the responsibility of notifying Delegates and the OIE Central Bureau of these diseases. On the same subject, the Group recommended that countries which report List A or B diseases in wildlife should not be penalised with respect to their exports, when domestic animals are kept free from these diseases.

245. The Group emphasised that difficulties are sometimes encountered with respect to diagnostic or serological tests on wildlife for Lists A and B diseases, in the context of international trade or local movement of fauna. Finally, the Group noted work carried out in collaboration with WHO, firstly on notification procedures for newly emerging diseases, and secondly on the subject of vaccines for and vaccination of wildlife.

246. The Committee noted the report of the Ad hoc Group on Wildlife Diseases and following a presentation by the Director General, unanimously approved his proposal to transform the Ad hoc group into an OIE Working Group.

Activities of the Working Groups

Working Group on Biotechnology

247. Dr C. Bostock reported on the work conducted at the meeting held from 15-16 November 1993, chaired by Dr J. Gorham (Doc. 62 SG/13/GT 1).
248. The Group reviewed the OIE Veterinary Biotechnology Newsletter and, recognising that computerisation would play an increasing part in the collection, collation and dissemination of information, recommended that in future the Newsletter should be available in 'hard-copy' and 'computer diskette' versions. There was an ongoing need to ensure that participating laboratories contribute new information each year and that additional laboratories working on animal pathogens continue to be identified and added to the list. The questionnaire was modified slightly to avoid possible ambiguities in transferring responses to the computerised database.

249. Individual members of the Group presented and discussed their personal selection of new techniques or products, based on biotechnology, which have recently been put to practical use.

250. The Group recommended a programme and identified possible speakers whose participation would be sought by the OIE for the Joint OIE/WAVLD Session on Biotechnology to be held in Buenos Aires, Argentina, 8-11 November 1994.

251. The Group recommended that its Chairman, Dr Gorham, prepare a draft introductory chapter on the practical aspects of biotechnology in the diagnosis of infectious disease for the third edition of the OIE Manual, to be circulated to all members of the Group for comment and amendment. Individual members of the Group were identified and assigned to each List A and B disease for assessment and comment on biotechnology aspects of chapters after the chapters have been peer reviewed by disease experts.

252. The Group recognised that transgenic animals would, in the future, become increasingly important in the activities of the OIE and that expertise within this area should be represented on the newly appointed Biotechnology Working Group for the years 1994-1997.

253. The Committee noted the report of the Working Group on Biotechnology.

EIGHTH PLENARY SESSION

Activities of the Working Groups (continued)

Working Group on Veterinary Drug Registration

254. Prof. E. Gimeno reported on the work of the 9th meeting of the Group, which he chaired on 3 to 4 November 1993 (Doc. 62 SG/13/GT 2). During 1993-1994 the Working Group examined the following topics:

255. Training programme

In 1993 the OIE organised three training seminars:

- Veterinary drug legislation, Rabat (Morocco), 14-18 June 1993: seminar for Northern African countries, attended by 25 participants.
- Harmonisation of veterinary drug legislation, Bogota (Colombia), 4-5 October 1993. Fifteen Latin American countries participated in this seminar.


The OIE participated in an international course on the improvement of veterinary drugs, organised in Bogor (Indonesia) in November 1993 by Indonesia and the Japanese International Cooperation Agency, and in the annual assembly of the Singapore Veterinary Association.

256. **Veterinary Drug Registration Newsletter**

The two issues published in 1993 were devoted to international harmonisation of technical procedures and distribution of veterinary drugs respectively.

257. **OIE Reference Laboratories for testing pharmaceutical quality and residues of veterinary drugs in food**

The Working Group examined requests from various laboratories to be recognised as OIE Reference Laboratories. Having done so, the Group asked Mr Boisseau to prepare a report defining the criteria for such recognition.

258. Prof. Gimeno reviewed projects for harmonising the rules for veterinary drug registration. The initiative for co-ordinating this at a world level could rest with the OIE. He presented to the Committee Resolution No. X on this subject.

259. The Committee noted the report of the Working Group on Veterinary Drug Registration. Proposed Resolution No. X was adopted unanimously by the Committee. The text appears as Resolution No. X at the end of this report.

### Activities of the Working Group on Animal Health Information Systems

260. Dr L.J. King presented the activities and summarised the Working Group's deliberations and projects; the Group met from 15 to 17 November 1993. (Doc. 62 SG/13/GT 3)

261. The Group reviewed the OIE Strategic Plan and concluded that most present and future OIE activities are closely tied to information. Acquiring, analysing, sharing, and distributing information is the essence of the OIE mission. Thus, the Group focused its actions on developing and implementing systems and processes to enable the OIE to better achieve its mission, and on reviewing new technologies that could be adopted by the OIE to make its information function more efficient and effective.

262. The Working Group strongly endorsed the concept and need for the OIE to develop and follow an information systems planning strategy. It also recommended that the OIE obtain access to INTERNET and evaluate
its use for the flow of global information to and from the organisation. The Group encouraged the OIE to also function as a clearinghouse for information and computer systems so that all Member Countries could better take advantage of the experiences and applications of other countries.

263. The Working Group discussed and reviewed the actions of its three subgroups. The Disease Surveillance Subgroup is reviewing various country and regional surveillance systems. The Disease Information System Subgroup reported on INTERNET and the progress being made to finalise HandiSTATUS. The Risk Analysis Subgroup stressed the need for establishing a central database for collecting and analysing data to ensure more accurate risk analyses, especially regarding data of food-animal products involved in trade such as meat, milk, fibre, and eggs.

264. The Working Group also discussed the need for training opportunities in basic epidemiology, sampling, and data analysis for the purpose of improving OIE data and reporting. The Group reviewed a new global effort, called ProMED, to collect human and animal disease information. Finally, the Working Group made plans to hold its next meeting in October 1994 at the USDA's Centre for Epidemiology and Animal Health in Colorado.

265. In response to a question from the Delegate of Colombia, Dr King explained that the Working Group had recommended that training programmes be set up in collaboration with other organisations and, insofar as possible, within the framework of Regional Commissions.

266. The Delegate of Austria stated that he was in favour of developing computerised SR-1, SR-2 and SR-3 report forms for the OIE disease notification system.

267. The Committee noted the report of the Working Group on Animal Health Information Systems.

**Date of the 63rd General Session**

268. The Committee decided that the 63rd General Session will be held from 15 to 19 May 1995.

**Technical Items of the 63rd General Session (May 1995)**

269. The Committee confirmed the decision taken in May 1993 concerning the following items:

- Monitoring and surveillance systems for animal diseases, taking as models the following diseases: mycobacterial infections in animals, Newcastle disease, foot and mouth disease, and rabies.

- Progress in the diagnosis and control of serious poultry diseases: salmonellosis and Gumboro disease.
Technical Items of the 64th General Session (May 1996)

270. The Committee selected the following technical items from those proposed by the Sub-Commission:

- Biotechnology in animal production: benefits and problems
- Blood parasitic diseases and specific immune response

271. The Delegate of New Zealand suggested that recombinant vaccines should also be dealt with under Technical Item I (Biotechnology).

Intervention on the GATT

272. Prof. D. Bardonnet, Legal Adviser to the OIE, analysed the Agreement on the Application of Sanitary and Phytosanitary Measures included in the Final Act Embodying the Results of the Uruguay Round of Multilateral Negotiations, which was approved on 15 December 1993 in Geneva (Switzerland) and signed by 120 countries on 15 April 1994 in Marrakech (Morocco). The text of Prof. Bardonnet's report is presented in Appendix V.

273. The President then gave the floor to Mr J. Magalhaes, representative of GATT. Mr Magalhaes indicated that the World Trade Organisation (WTO), the establishment of which is called for in the Final Act, should come into being on 1 January 1995. A preparatory sub-committee has already been formed for sanitary and phytosanitary measures. An initial informal meeting, in June 1994, will be devoted to procedural questions and to the identification of working themes to be commenced at once. This sub-committee, which will become the Committee on Sanitary and Phytosanitary (SPS) Measures upon the creation of the WTO, will also decide on the international organisations which will be invited to participate in its affairs as observers. The OIE will certainly figure among these.

274. Mr Magalhaes emphasised that the procedures for settling disputes had been reinforced, so that a consensus would henceforth be necessary to overrule the verdict of a special panel. Nevertheless, an appeals process will exist, but only in regard to legal issues and not on the substance of the questions addressed. The WTO will thus become an international trade court.

275. Mr Magalhaes confirmed the Director General's account of the excellent relations existing between the Central Bureau and the GATT Secretariat. He likewise considered that the best means of formalising this cooperation, at present, would be through an exchange of letters.

276. Mr Magalhaes stated that it would not be the intention of the WTO to create standards. It was the role of governments to anticipate possible conflicts by dealing with sanitary problems at the OIE level. Questions which cannot be resolved at this level will be treated individually by special WTO panels. The SPS Committee will examine the functioning and implementation of the Agreement on the Application of SPS Measures, and will be able to suggest amendments to the text bearing in mind the experience acquired during the course of this implementation.
277. Mr Magalhaes concluded by explaining that the aim of the WTO is to encourage international trade. Even if some developing countries are likely to be confronted with technical and financial problems as they adapt to the new context of world trade, these countries will be better protected from unilateral measures by virtue of the system of multilateral rules presented in the Final Act.

278. Recalling the active role which their countries had played in the Uruguay Round negotiations, the Delegates of Argentina and Uruguay expressed their satisfaction with the content of the Agreement on sanitary and phytosanitary measures. The Agreement offered a fine means of lowering protectionist barriers. The Delegates also called the Committee's attention to the specific provisions in the Agreement for developing countries, and especially for least-developed countries, so that they will have time to adapt.

279. The Delegate of the United States of America considered the Agreement as a challenge for the OIE but also as an obligation to establish a greater number of standards, to issue technical recommendations and to supply experts. In contrast, the OIE will not be required to arbitrate disputes.

280. The Delegate of Colombia considered that the application of the Agreement will result in greater equality among countries, and for this reason the OIE should participate in the undertaking.

PROPOSED RESOLUTIONS

Mycoplasma infections in cattle, sheep and goats: methods for diagnosis and prophylaxis

281. Proposed Resolution No. XI was adopted unanimously by the Committee after amendment. The text appears as Resolution No. XI at the end of this report.

Vaccine banks: present status and future developments

282. Proposed Resolution No. XII was adopted unanimously by the Committee after amendment. The text appears as Resolution No. XII at the end of this report.

Friday 20 May 1994

FIRST ADMINISTRATIVE SESSION

283. The roll call of Delegates showed that ninety-three countries were represented at the first Administrative Session, representing a quorum.

Report of the Director General on the Management Activities and Administrative Work of the OIE in 1993

(Doc. 62 SG/3)

284. The Director General informed the Committee that eight countries joined the OIE in 1993: Bahrain, Costa Rica, Czech Republic, the Former Yugoslav Republic of Macedonia, Honduras, Kazakhstan, Singapore.
and Slovak Republic. The number of Member Countries was therefore 134 on 31 December 1993. As of May 1994, the number of Member Countries is 138, as Belarus, the Comores, Honduras and Qatar have joined. He also mentioned the names of new Delegates to the OIE and the changes which occurred in 1993 in the composition of certain Commissions and Working Groups.

285. He specified that the Central Bureau had been notified of one change of contributive category: Finland had decided to increase its contributions.

286. He then presented the personnel situation and gave details of equipment purchases, renovations and repairs carried out on the OIE headquarters building.

287. The Committee adopted proposed Resolution No. II approving the report of the Director General unanimously.

This text appears as Resolution No. II at the end of this Report.

OIE Financial report for the 67th Financial Year
(1 January - 31 December 1993)
(Doc. 62 SG/4)

288. The Head of the Administrative and Financial Department presented a report on the Regular Budget, the Works and Equipment Account, the Special Information Development Account, the Special Account for Operational Activities, the Reserve Fund and the OIE-Japan Account.

289. The 1993 Regular Budget, which was balanced in terms of income and expenses to an amount of FRF 15,520,000, showed a surplus of FRF 180,126.60. Total expenses (operating expenses and allocation to the Works and Equipment account), amounted to FRF 15,478,752.75, representing about 99.7% of budgeted expenses.

Income amounted to FRF 15,658,879.35, exceeding the budget by FRF 138,879.35. Income from contributions amounted to FRF 13,914,849.48, 1.3% below the budgeted amount. An increase in other income was recorded from the sale of publications, which totalled FRF 664,993.75 and by investment income, which totalled FRF 934,338.41.

Allocation of the surplus is as follows: FRF 180,126.60 for the Special Account for Operational Activities.

290. The balance of the Works and Equipment Account was FRF 533,567.04 at 1 January and FRF 228,076.35 at 31 December 1993. Income (FRF 1,254,200) consisted mainly of a voluntary contribution (FRF 1,000,000), the allocation from the Regular Budget (FRF 250,000), and miscellaneous income (FRF 4,200).

Expenses involved various works (FRF 950,365.19) and equipment (FRF 609,325.50) giving a total of FRF 1,559,690.69.

291. The balance of the Special Information Development Account at 1 January 1993 was FRF 51,690.94. In 1993, it was increased by FRF 349,500 and expenditure amounted to FRF 284,881.08. The balance at 31 December 1993 was FRF 116,309.86.
The special account for operational activities amounted to FRF 903,229.07 at the beginning of the Financial Year and FRF 459,465.06 on 31 December 1993.

292. The Reserve Fund increased from FRF 8,895,420.47 as of 1 January to FRF 9,798,194.25 as of 31 December 1993.

293. The Committee unanimously adopted proposed Resolution No. III, approving the Financial Report for the 67th Financial year, with one abstention (Greece).

This text is given as Resolution No. III at the end of this report.

Acknowledgments to the governments of Member Countries which made voluntary contributions to the OIE
(France, Italy, Japan and Taipei China)

294. Proposed Resolution No. VII was unanimously adopted by the Committee. The text appears as Resolution No. VII at the end of this report.


295. The Report of the Auditors was unanimously approved.

The Committee noted the report of the External Auditor.

Renewal of appointment of the External Auditor

296. The President proposed that the renewal of the appointment of Mr Jacques Berthe as the OIE External Auditor for a period of one year. Proposed Resolution No. VI was unanimously adopted.

The text is given as Resolution No. VI at the end of this report.

1994 Budget
(Doc. 62 SG/5)

297. The Head of the Administrative and Financial Department pointed out that the Regular Budget for 1994 was adopted during the last General Session and that it was balanced in terms of income and expenses to an amount of FRF 17,070,000. The contributions scale enabling this budget to be met was also fixed in 1993.

298. Estimated expenses in the Works and Equipment Account total FRF 260,000 for works, notably improvements to the premises and security measures, and FRF 720,000 for equipment, giving a total of FRF 980,000. Estimated income totals FRF 760,000 of which 260,000 is from a Regular Budget allocation and 500,000 is from a voluntary contribution. The balance of this Account will therefore decrease from FRF 228,076.35 as of 1 January to FRF 8,076.35 as of 31 December 1994.
299. The Director General presented the project for altering the conference hall and proposed modalities for financing it (Appendices to Docs. 62 SG/5 and 62 SG/6). The Committee approved this special operation with nine votes against (Australia, Austria, Croatia, Iran, Japan, Norway, Saudi Arabia, the United States of America and Uruguay) and four abstentions (Côte-d'Ivoire, Gabon, Mali and Russia).

1995 Budget Estimates and Proposed Contribution Scale for 1995
(Doc. 62 SG/6)

300. The Head of the Administrative and Financial Department presented the proposed working programme and the income and expense estimates for 1995.

The proposed working programme concerns the continuation of programmes in progress in 1994, and the development of activities recommended by the Committee. The expense estimates are based on the working programme and on a forecasted 3.5% annual increase in the cost of living.

301. The proposed Regular Budget for 1995 (69th Financial Year) is balanced in terms of income and expenses to an amount of FRF 17,870,000. Income consists mainly of contributions (FRF 15,870,000). Other income totals FRF 2,000,000 (sale of publications, investment income, etc.). Operating expenses total FRF 17,600,000 and the allocation to the Works and Equipment Account amounts to FRF 270,000.

302. The 1995 contributions scale has been increased by 2.7% compared to 1994, with the contribution unit increasing from FRF 18,600 to FRF 19,100.

303. Proposed Resolution No. IV: 'OIE Budgetary Income and Expenses for the 69th Financial Year, 1 January - 31 December 1995' was adopted by a majority vote, with one vote against (Germany) and two abstentions (Italy and Ukraine).

304. Proposed Resolution No. V: 'Financial Contributions from OIE Member Countries for 1995' was adopted by a majority vote, with one vote against (Germany) and one abstention (Italy).

The texts are given as Resolutions Nos. IV and V, respectively, at the end of this report.

SECOND ADMINISTRATIVE SESSION

305. In accordance with the Statutes, the President verified the number of participants. Ninety-seven Delegates were present, exceeding the quorum required for the vote. The vote took place on the proposals of the Presidents of the Regional Commissions for the election of the Members of the Bureaux, and by a show of hands for the Members of the Specialist Commissions.

306. The President officially notified the Committee that Dr J. Blancou has decided to seek the renewal of his mandate at the 63rd General Session.

62nd GS PARIS/May 1994
Election of the Members of the Regional Commissions

307. The President invited the Presidents of each Regional Commission to make proposals concerning the composition of the new Bureaux. The Committee unanimously adopted the proposals for the following five Commissions.

**Regional Commission for Africa**

President : Dr A.M. Touré (Senegal)
Vice-President : Dr P.P. Bosman (South Africa)
Vice-President : Dr A. Bourghida (Tunisia)
Secretary General : Dr P.G. Sinyangwe (Zambia)

**Regional Commission for the Americas**

President : Dr B. Cané (Argentina)
Vice-President : Dr E.F. Serrano Ramírez (Cuba)
Vice-President : Dr C. Valdovinos Jeldes (Chile)
Secretary General : Dr S. Garay Román (Paraguay)

**Regional Commission for Asia, the Far East and Oceania**

President : Dr Dr B. O'Neil (New Zealand)
Vice-President : Dr Abbas Ali Motallebi (Iran)
Vice-President : Dr W. Chaisrisongkram (Thailand)
Secretary General : Dr D. Carton (New Caledonia)

**Regional Commission for Europe**

President : Dr N.T. Belev (Bulgaria)
Vice-President : Dr G. Bakken (Norway)
Vice-President : Dr R. Marabelli (Italy)
Secretary General : Prof. U. Kihm (Switzerland)

**Regional Commission for the Middle East**

President : Prof. Ali A.M. Moussa (Egypt)
Vice-President : Dr M. Fathi Kilani (Jordan)
Vice-President : Dr R.B.M. Al Sulaimani (Oman)
Secretary General : Prof. M.S.M.A. Harbi (Sudan)

Election of the Members of the Specialist Commissions

308. The President stated that, according to the Rules of the Specialist Commissions, Members' mandates were renewable, and that voting was normally by show of hands, candidates being nominated by the Administrative Commission or by Members of the Committee. The Committee appointed the following as Members of the Commissions:

**International Animal Health Code Commission**

President : Dr W.H.G. Rees (United Kingdom)
Vice-President : Dr A. Thiermann (USA)
Secretary General : Dr J. Thomson (Zimbabwe)
Members

Dr K. Doyle (Australia)
Dr R. Benaissa (Algeria)
Dr A.N. Panin (Russia)

Foot and Mouth Disease and Other Epizootics Commission

President  : Dr W.G. Sterritt (Canada)
Vice-President : Dr G. Thomson (South Africa)
Secretary General : Dr A.I. Donaldson (United Kingdom)

Following a debate, the Committee resolved to maintain the composition of the Commission as established in 1988. The Director General will call upon two American experts to be associated with activities of the Commission: Drs J. Baltar (Uruguay) and V. Astudillo (Brazil).

Standards Commission

President  : Prof. M. Truszczynski (Poland)
Vice-President : Dr J.E. Pearson (USA)
Secretary General : Dr S. Edwards (United Kingdom)

Fish Diseases Commission

President  : Prof. T. Håstein (Norway)
Vice-President : Dr B.J. Hill (United Kingdom)
Secretary General : Dr C. Michel (France)

In May 1988 the International Committee agreed that two additional specialists would participate in the work of the Commission: Prof. S.-N. Chen (Taipei China) and Dr J. Winton (USA).

In the course of the 62nd General Session it was decided that Dr Inés Montalva (Chile) could also be invited by the President to attend the Commission as an observer.

Election of the President of the Committee of the OIE

309. Dr M.S.M.A. Harbi (Sudan) and Dr P.P. Dostoyevskiy (Ukraine) were appointed as scrutineers for the secret ballot for the election of the President, the Vice-President and the Members of the Administrative Commission.

310. The results of the vote were as follows:

First ballot

Number of votes cast : 94
Spoilt ballots : 1
Number of valid votes : 93

As follows:

Dr Ahmad Mustaffa b. Hj. Babjee (Malaysia): 93 votes

311. After the first ballot, Dr Sidibé declared that Dr Ahmad Mustaffa b. Hj. Babjee (Malaysia) had been elected President of the Committee of the OIE.
312. In a short speech, Dr Ahmad Mustaffa b. Hj. Babjee (Malaysia) thanked the Committee for the confidence that they had shown in him by electing him as President and guaranteed his commitment to the OIE. He paid tribute to the past President, praising the energy with which he had performed his duties. He expressed his determination to unite all the forces in the OIE, in the pursuit of harmony, and to further the OIE's services to Member Countries and to all veterinarians.

**Election of the Administrative Commission**

313. The election of the Members of the Administrative Commission was presided by Dr Babjee and was conducted on the same basis as the election of the President.

**Election of the Vice-President**

<table>
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<tr>
<td>Spoilt ballots</td>
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</tr>
<tr>
<td>Number of valid votes</td>
<td>90</td>
</tr>
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</table>

As follows:

Dr N.G. Willis (Canada): 90 votes

314. The President declared that Dr N.G. Willis (Canada) had been elected as Vice-President of the Committee.

**Election of the four Members of the Administrative Commission**

<table>
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<tr>
<td>Number of valid votes</td>
<td>89</td>
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</tbody>
</table>

As follows:

Dr P. Ackah Angusman (Côte-d'Ivoire): 74 votes
Dr G. Murray (Australia): 62 votes
Dr R. Marabelli (Italy): 53 votes
Dr N.T. Belev (Bulgaria): 52 votes
Dr K.C. Meldrum (United Kingdom): 50 votes
Prof. Ali A.M. Moussa (Egypt): 50 votes

315. The President declared that Drs Ackah, Belev, Marabelli and Murray had been elected as Members of the Administrative Commission.

**Election of the Auditors**

| Number of votes cast | 74 |

As follows:

Dr C. Correa Messuti (Uruguay): 60 votes
Prof. Ali A.M. Moussa (Egypt): 42 votes
Dr K.C. Meldrum (United Kingdom): 38 votes

316. The President declared that Dr Correa Messuti and Prof. Moussa had been elected Auditors of the OIE.
NINTH PLENARY SESSION

Adoption of Resolutions and presentation of the draft Final Report

317. The President read out the list of twelve Resolutions adopted by the Committee.

318. The Committee then discussed the draft report, which was amended to take account of a certain number of suggestions made by participants. The Final Report will be produced on 15 June 1994, once any other amendments proposed by Member Countries have been received by the Director General.

Closing Ceremony

319. In his closing speech, the text of which is given in Appendix VI, the President thanked the Committee, the Director General and his staff, the Specialist Commissions, the Rapporteurs for the technical items, and the interpreters. He affirmed his determination to fulfil his mandate as President with loyalty and in the best interests of the OIE.

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Resolutions/Recommendations/Appendices