Original: English February 2016

REPORT OF THE MEETING OF THE OIE SCIENTIFIC COMMISSION FOR ANIMAL DISEASES

Paris, 8-12 February 2016

A meeting of the OIE Scientific Commission for Animal Diseases (the Commission) was held at the OIE Headquarters in Paris, France from 8 to 12 February 2016.

Dr Monique Eloit, Director General of the OIE, welcomed the Commission, and informed its members about the roadmap developed for the implementation of the 6th Strategic Plan and how the OIE organigram would be adapted to this roadmap. The OIE website would also be amended to increase accessibility to the *ad hoc* Group reports.

Dr Eloit indicated that, after the 84th General Session, the secretariats of the Specialist Commissions would be integrated into a single department devoted to OIE Standards. This would contribute to a better coordination and harmonisation of the procedures related to the different Commissions.

Dr Eloit also informed the Commission that a department dedicated to science and new technologies would be created to strengthen the relationship with the OIE Reference Centres and to reinforce the scientific excellence of the OIE. The new department would contribute to the OIE visibility by participating in scientific platforms, research consortiums and would promote the publication of scientific articles in international peer-review journals.

The existing procedure for disease status recognition would also be strengthened by creating a department which would also include the self-declaration process, the equine disease free zone (EDFZ) and the task related to the Global Strategies for FMD and PPR.

Dr Eloit mentioned that a new procedure will be developed for the selection of the members of the Specialist Commissions, to ensure that the most suitable candidates would be selected and then elected by the World Assembly of Delegates (the Assembly).

The President of the Commission supported the presented roadmap for the implementation of the 6th Strategic Plan and highlighted the importance of the objectivity of the decisions taken by the Commission. He emphasised the need for external experts to support the increasing number of country missions deployed to ensure compliance of Member Countries with the requirements for official status recognition. However, he reiterated that the presence of a member from the Commission would ensure consistency between the missions, transfer of experience and would act as a link between the mission team and the Commission.

Dr Brian Evans, Deputy Director General, informed the Commission on the way forward for the Handbook for the Management of High Health, High Performance Horses (HHP). He stressed that the HHP concept was the application of the already adopted concept of compartmentalisation applied to a specific horse population. He clarified that the Handbook acted as guidelines for the correct implementation of the HHP concept. The Handbook was available on the OIE website and open to further improvement based on the experience of Member Countries during the implementation of the concept.

Adoption of the agenda and appointment of rapporteur

The draft agenda was adopted by the Commission. The meeting was chaired by Dr Gideon Brückner and the OIE secretariat acted as rapporteur. The agenda and list of participants are attached as <u>Annexes 1 and 2</u>, respectively.

2. Issues from the last meeting of the Commission

2.1. Member Country comments received by January 2016 for consideration of the Commission

a) Handbook for the Management of High Health, High Performance (HHP) Horses (Handbook)

The Commission extensively discussed the way forward to improve the Handbook according to Member Countries' feedback received since its publication in the OIE website after the Commission meeting in September 2015.

The Commission acknowledged the request of Member Countries to have more detailed biosecurity guidelines. It was confirmed that it was not the mandate of the OIE to provide it but that it was the responsibility of the horse industry (FEI and IFHA) to develop such detailed operational biosecurity manuals to be implemented in the context of the HHP concept.

The Commission reiterated that the HHP certificate was a key element for the implementation of the concept. The inclusion of the certificate in the Handbook would encourage Member Countries to use it and to provide their feedback to the OIE based on their own experience. The certificate would be regularly amended and improved to ensure it fits for the purpose.

The Handbook, including the certificate, would be available on the OIE website and Member Countries were invited to contact the Scientific and Technical Department of the OIE (scientific.dept@oie.int) to provide feedback and to contribute to the improvement of the document for the implementation of the HHP concept.

The Commission acknowledged the quality of the work done by the experts, by the horse industry and by the OIE in developing the HHP concept while recognising it would need time for its full implementation by Member Countries. The Commission would remain available to provide scientific support to ensure the scientific integrity of the concept and to regularly follow up on the implementation of the concept envisaging an eventual incorporation of the certificate into the *Terrestrial Animal Health Code (Terrestrial Code)* as an OIE International Standard.

b) Glossary

The Commission considered the comments received from Member Countries on the definitions of "Standards" and "Guidelines" and noted that an effort should be made throughout the *Terrestrial Code* and *Terrestrial Manual*, to ensure consistency with these two definitions.

<u>Standards</u>: The Commission agreed with a Member Country's comment to make reference to Articles 50 to 52 of the OIE General Rules but considered that standards should not only be limited to the texts published in the OIE *Codes* and *Manuals* but should also include Resolutions adopted by the World Assembly of Delegates (the Assembly).

The Commission agreed that the purpose of standards is both to improve and to maintain animal health, veterinary public health and animal welfare worldwide. The impact on safe trade was considered implicit in this definition.

<u>Guidelines</u>: The Commission agreed that the improvement but also the maintenance of the animal health status, veterinary public health and animal welfare worldwide should be part of the definition.

The Commission considered the amended definitions proposed by the Terrestrial Animal Health Standard Commission (Code Commission) on "zone/region", "infected zone", "free zone", "containment zone", "protection zone" and made some modifications.

Zone/region: the Commission suggested to remove the word "region" as it is usually not used in the context of disease status neither should it be used as synonym for a zone. In addition, it could be confused with the "continental" region.

<u>Free zone</u>: the Commission suggested removing the last part of the amended definition related to surveillance and biosecurity measures as they were already detailed in the disease-specific *Terrestrial Code* chapters.

<u>Containment zone</u>: the Commission clarified that both suspected and infected epidemiological units should be considered when creating a containment zone and therefore should be included in the definition. The Commission emphasised that the implementation of control measures should be an on-going process.

The proposed amendments to the definitions were forward to the Code Commission for consideration.

c) Chapter 15.1. Infection with African swine fever virus

A revised version of Chapter 15.1. was circulated to Member Countries for a first round of comments in September 2015. The Commission considered specific questions on the chapter provided by the Code Commission based on the comments made by some Member Countries. The Commission sought external expert advice to address some of the comments.

Article 15.1.1. General provisions.

The Commission reviewed the case definition provided in the chapter and agreed that in point 2 of the article, the confirmation of infection should consider the detection of antigen or nucleic acid specific to African swine fever (ASF) detection in suids showing clinical signs of ASF. The text was modified accordingly. The Commission also recommended modifying the case definition on Chapter 15.2. on classical swine fever accordingly.

The detailed rationale for the Commission's proposed amendments is attached as Annex 3.

The detailed response to the questions was forwarded to the Code Commission for consideration.

d) Chapter 12.10. Infection with Burkholderia mallei (Glanders)

A revised version of Chapter 12.10. was circulated for a second round of comments in September 2015. The Commission was informed that two experts from OIE Reference Laboratories agreed to draft a specific article on surveillance for glanders as requested by several Member Countries. The article on surveillance would be available for the Commission's consideration in September 2016.

The Commission addressed specific questions on the chapter provided by the Code Commission based on the comments made by some Member Countries. The detailed response to the questions was forwarded to the Code Commission for consideration.

The detailed rationale for the Commission's proposed amendments is attached as Annex 4.

e) Chapter 8.X. Infection with Mycobacterium tuberculosis complex

A revised version of Chapter 8.X. was circulated for a first round of comments in September 2015. The Commission addressed specific questions on the chapter provided by the Code Commission based on the comments made by some Member Countries.

The detailed rationale for the Commission's proposed amendments is attached as Annex 5.

The detailed response to the questions was forwarded to the Code Commission for consideration.

f) Chapter 8.8. Infection with foot and mouth disease virus

The modified chapter was adopted in 2015 and then circulated for a first round of comments in September 2015 after a revision made by the Code Commission based on the discussion during the 2015 General Session.

The Commission considered the comments made by some Member Countries and the modifications proposed by the *ad hoc* Group during its December 2015 meeting.

The Commission extensively discussed the pending issues that were only partially addressed by the *ad hoc* Group during its December meeting due the lack of time. The Commission reiterated the need of re-convening the *ad hoc* Group with the specific Terms of Reference to consider these pending issues based on the latest scientific evidences and to propose modification of Chapter 8.8. when appropriate.

The detailed rationale for the Commission's proposed amendments is attached as Annex 6.

The amended chapter addressing Member Country comments was forwarded to the Code Commission for consideration.

2.2. Member Country comments received by January 2016 for SCAD information

a) Chapter 8.3. Infection with bluetongue virus

The Commission reviewed the comments received from Member Countries on the *Terrestrial Code* Chapter 8.3. on infection with bluetongue virus and the option of seasonal zonal or country freedom. The Commission was particularly concerned on the fact that vectors had been detected during winter time when vector activity was not expected and there were also examples of the presence of infectious animals during the coldest months of the year. These evidences question the scientific justification for maintaining the concept of seasonal freedom within the relevant chapters on vector-borne diseases within the *Terrestrial Code*.

The Commission further discussed and concluded that evidence of natural transmission with a vaccine strain should be considered as an infection with bluetongue virus.

3. Ad hoc and Working Groups

3.1. Meeting reports for endorsement

a) Wildlife Working Group, 29 September – 2 October 2015

The Commission reviewed and endorsed the report of the Wildlife Working Group.

The Commission concurred with the opinion of the Working Group to recommend that the notification of infection with Newcastle disease virus in wild birds and of infection with equine influenza viruses in wild equidae should be included in reporting through WAHIS-Wild.

The Commission supported the proposal to include a brief summary of the activities of the Wildlife Working Group in the presentation of the President of the Commission during the General Session. It also acknowledged that the global reporting of one of the non OIE-listed wildlife diseases be presented during the report of the World Animal Health Information and Analysis Department during the General Session.

The Commission took note of the information on the emerging and noteworthy wildlife disease occurrences worldwide during the last year.

The Commission, considering all possible hypothesis of the apparent recrudescence of FMD in southern Africa in 2015, noted that the outbreak areas were all in close proximity to the Kavango - Zambezi (KAZA) Transfrontier Conservation Area (TFCA) and wondered whether changes were recently reported on the buffalo population and movement patterns in the KAZA TFCA. The Working Group was consulted on this issue and the Commission took note of the low probability that the change in FMD situation around the KAZA TFCA be due to the establishment of the TFCA. However it could not be excluded. The above-mentioned risk factors should be considered and, together with cattle-to-cattle transmission, may facilitate the maintenance of FMD in the region. The Commission recommended maintaining all efforts to reduce the risks of cattle-to-cattle virus transmission in the region.

The Commission endorsed the work programme and priority setting suggested for 2015/2016 by the Working Group.

The report of the Working Group was endorsed (84 SG/13 GT).

b) *Ad hoc* Group on the Evaluation of FMD Status of Member Countries, 6–8 October and 30 November–3 December 2015

The Commission reviewed the recommendations of the *ad hoc* Group that met twice to evaluate Member Countries' applications for FMD status recognition and for the endorsement of official control programmes. The *ad hoc* Group had also been tasked to revise the FMD questionnaires of Chapter 1.6. of the *Terrestrial Code* and to address the pending issues on the recently adopted Chapter 8.8. on infection with foot and mouth disease virus.

• Evaluation of a request from a Member Country for the status recognition of a new FMD free zone where vaccination is not practised

The Commission had a physical meeting with a delegation from Russia that provided clarification on the remaining uncertainties with regard to the recognition of a FMD free zone where vaccination is not practiced. The delegation explained that cattle movements from the protection zone to the proposed free zone were only allowed for direct slaughter under the provisions of the OIE *Terrestrial Code*. The apparent non-compliance of the dossier with the requirements of Articles 8.8.8. and 8.8.12. was due to translation mistakes.

To ensure full compliance with the requirements of points 2 b) et 4 e) of Article 8.8.2. of the *Terrestrial Code*, the Commission also requested Russia to provide an official declaration that no vaccination has been carried out since January 2015 and that no vaccinated animal has been introduced (except in accordance with Chapter 8.8.). Written text to this effect was provided to the Commission on 12 February 2016.

Based on the *ad hoc* Group's conclusion and the information provided by the Russian delegation further supplemented by written submissions, the Commission recommended that the Assembly recognise the zone in Russia, as described by the Delegate of Russia in documents addressed to the Director General in August 2015 and in March 2016, as a FMD free zone where vaccination is not practised.

The Commission discussed the importance of ensuring the maintenance of the status and recommended that an expert mission be deployed at an appropriate time to monitor the methods applied for the maintenance of status.

• Evaluation of requests from Member Countries for the status recognition of new FMD free zones where vaccination is practised

The Commission considered the recommendation of the *ad hoc* Group regarding the application of two other Member Countries and concluded that these Member Countries did not meet the requirements to have recognised FMD free zones where vaccination is practised. The dossiers were referred back to the corresponding Member Countries.

 Evaluation of requests from Member Countries for the endorsement of official control programmes for FMD

The Commission reviewed and endorsed the recommendations of the *ad hoc* Group on the applications of two Member Countries for the endorsement of their official control programme for FMD. The Commission recommended that the Assembly endorse the official control programmes for FMD of <u>Thailand and Mongolia</u>.

Further to a meeting with a delegation from Kazakhstan, the Commission, with the support of the FMD *ad hoc* Group, electronically reviewed the additional information provided and agreed to recommend that the Assembly endorse an official control programme for FMD of Kazakhstan.

The detailed report of the assessment is in <u>Annex 7</u>.

 Evaluation of the information provided by a Member Country having an endorsed national official control programme for FMD

The Commission noted with thanks the efforts made by the *ad hoc* Group in evaluating the information provided by Algeria. The Commission considered the recommendations of the *ad hoc* Group and shared its concerns on the level of disease control achieved after FMD incursion and the disease management demonstrated by the Algerian Veterinary Services. Based on the available information, the Commission unanimously concluded that Algeria no longer fulfil the requirements of the *Terrestrial Code* for an endorsed official control programme for FMD and decided to withdraw the endorsement in accordance with point 7 of Article 8.8.39. of the *Terrestrial Code* with effect from 12 February 2016.

The endorsed ad hoc Group reports are attached as Annex 8 and 9.

c) Ad hoc Group on the Evaluation of CBPP Status of Member Countries, 26-29 October 2015

The Commission reviewed and endorsed the report of the *ad hoc* Group on the evaluation of the applications from Member Countries for the recognition of CBBP status that was also tasked with the revision of Chapter 11.7. and the CBPP questionnaires of Chapter 1.6. of the *Terrestrial Code*.

The Commission agreed with the conclusions of the *ad hoc* Group and recommended that the Assembly recognise New Caledonia, Mexico and Swaziland as CBPP free countries. The Commission also recommended the recognition of a zone in Namibia, south to the Veterinary Cordon Fence, as described by the Delegate of Namibia in a document addressed to the Director General in October 2015, as a CBPP free zone.

The Commission concurred with the conclusions of the *ad hoc* Group on the applications submitted by a Member Country which did not meet the requirements of the *Terrestrial Code*. The dossier was referred back to the applicant Member Country providing the rationale for the Commission's position and suggestions on actions to be taken to comply with the requirements of the *Terrestrial Code*.

The Commission reviewed and further amended the Terrestrial Code Chapter 11.7. on CBPP.

The detailed rationale for the Commission's proposed amendments is attached as Annex 10.

The endorsed report of the ad hoc Group is attached as Annex 11.

The revised draft chapter and the endorsed *ad hoc* Group report were forwarded to the Code Commission for further consideration.

d) Ad hoc Group on the Evaluation of CSF Status of Member Countries, 3-5 November 2015

The Commission reviewed and endorsed the report of the *ad hoc* Group on the evaluation of the applications from Member Countries for the recognition of CSF status.

The Commission agreed with the conclusions of the *ad hoc* Group and recommended that the Assembly recognise the Czech Republic, Denmark, Germany, Italy, New Caledonia, New Zealand and Poland as CSF free countries.

In accordance with the established procedures, the Commission member from Italy withdrew from the meeting during the discussions on Italy's dossier by the Commission.

The Commission also recommended the recognition of <u>a zone of Brazil</u>, as described by the Delegate of Brazil in a document addressed to the Director General in September 2015, as a CSF free zone. The Commission stressed that strict movement control between the free and infected zones must remain in place and appropriately documented in the annual reconfirmation.

In addition the Commission discussed the application from Colombia and provisionally concluded that the zone proposed by Colombia fulfilled the requirements of the *Terrestrial Code*. However, the Commission recommended to the Director General to mandate a mission to the country, before any final decision, to verify compliance with the provisions of the *Terrestrial Code* for the control of CSF. Pending the outcome of the mission, the tentative decision of the Scientific Commission would be confirmed and Colombia would be proposed for official recognition at 84th General Session in May 2016.

The Commission considered the opinion of the *ad hoc* Group with regard to an update of the *Terrestrial Code* chapter on CSF and to align it with concepts already incorporated in the chapter on ASF. The Commission concluded that updating the chapter should be a priority for its working plan.

The endorsed report of the *ad hoc* Group is attached as Annex 12.

e) Ad hoc Group on the Evaluation of BSE Risk Status of Member Countries, 24–26 November 2015

The Commission reviewed and endorsed the report of the *ad hoc* Group on the evaluation of the applications from eight Member Countries for the recognition of their BSE risk status.

The Commission agreed with the conclusions of the *ad hoc* Group and recommended that the Assembly recognise the following Member Countries as having a negligible BSE risk: <u>Costa Rica, Germany, Lithuania, Mexico, Namibia and Spain.</u>

The Commission also considered the recommendation of the *ad hoc* Group regarding the application of two other Member Countries and concluded that these Member Countries did not meet the requirements of the *Terrestrial Code* for a BSE negligible risk status. The dossiers were referred back to the applicant Member Countries explaining the rationale of the Commission's position and suggestions on actions to be taken to comply with the requirements of the *Terrestrial Code*.

The Commission also confirmed the decision that was taken by electronic consultation in December 2015, to re-instate Romania previously recognised "negligible BSE risk status".

Finally, the Commission considered the opinion of the *ad hoc* Group with regard to the *Terrestrial Code* chapter on BSE and concluded that the update of this chapter, especially as it relates to surveillance criteria, classical and atypical BSE, was a priority.

The endorsed report of the ad hoc Group is attached as Annex 13.

f) Ad hoc Group on the Evaluation of PPR Status of Member Countries, 15-16 December 2015

The Commission reviewed and endorsed the report of the *ad hoc* Group on the evaluation of the applications from two Member Countries for the recognition of PPR status.

The Commission agreed with the conclusions of the *ad hoc* Group and recommended that the Assembly recognise <u>Latvia</u> as a PPR free country.

The Commission also considered the recommendation of the *ad hoc* Group regarding the application submitted by another Member Country which did not meet the requirements of the *Terrestrial Code*. The dossier was referred back to the applicant Member Country explaining the rationale of the Commission's position and suggestions on actions to be taken to comply with the requirements of the *Terrestrial Code*.

The Commission took note of the remark made by the *ad hoc* Group with reference to the definition of eradication *versus* elimination and suggested to request the Code Commission to consider whether or not a modification in the *Glossary* of the *Terrestrial Code* would be appropriate.

The endorsed report of the ad hoc Group is attached as Annex 14.

g) Ad hoc Group on vaccination, 17-19 November 2015

The Commission reviewed and took note of the report of the *ad hoc* Group tasked with drafting a *Terrestrial Code* chapter on vaccination to provide guidance to Member Countries to successfully implement vaccination in support of disease control programmes.

The Commission acknowledged the difficulties of the task and thanked the Director General of the OIE for re-convening the Group in March 2016 for the finalisation of the draft chapter.

The Commission reviewed the outline articles for a new chapter proposed by the *ad hoc* Group and recommended that appropriate cross-references with other horizontal chapters of the *Terrestrial Code*, and especially with the chapters of the *Terrestrial Manual* devoted to vaccines, be maintained.

The Commission suggested that the *ad hoc* Group also consider providing recommendation for the demarcation of the area to be included in a vaccination programme.

h) Ad hoc Group on Lumpy skin disease (caused by group III virus, type Neethling) to update Chapter 11.11. of the Terrestrial Code, 12–14 January 2016

The Commission reviewed and endorsed the report of the *ad hoc* Group tasked with the revision of the *Terrestrial Code* Chapter on lumpy skin disease.

The Commission concurred with the conclusion of the *ad hoc* Group on the difficulties to substantiate absence of infection with LSD virus in a vaccinated population with the existing disease control and diagnostic tools.

The Commission discussed the application of the compartmentalisation concept for LSD and, considering the role that vectors play in the transmission of the disease, concluded that it should not be recommended. However, Member Countries could use the provision of Chapters 4.3. and 4.4. to establish a containment zone in the event of limited outbreaks of LSD within an otherwise free country or zone for the purpose of minimizing the impact on the entire country or zone.

The endorsed report of the ad hoc Group is attached as Annex 15.

The revised draft chapter and the endorsed *ad hoc* Group report were forwarded to the Code Commission for further consideration.

i) Ad hoc Group on the Evaluation of AHS Status of Member Countries, 19-20 January 2016

The Commission reviewed and endorsed the report of the *ad hoc* Group on the evaluation of the applications from Member Countries for the recognition of AHS free status.

The Commission agreed with the conclusions of the *ad hoc* Group and recommended that the Assembly recognise <u>Kazakhstan and the Philippines</u> as AHS free countries.

The Commission also considered the recommendation of the *ad hoc* Group regarding the application submitted by another Member Country and the information provided by a Delegation from this country. The Commission concluded that the application did not meet the requirements of the *Terrestrial Code*. The dossier was referred back to the applicant Member Country explaining the rationale of the Commission's position and suggestions on actions to be taken to comply with the requirements of the *Terrestrial Code*.

The endorsed report of the ad hoc Group is attached as Annex 16.

j) Ad hoc Group on Antimicrobial Resistance, 19-22 January 2016

The Commission considered the report of the *ad hoc* Group and took note of the progress made on the reporting of the use of antimicrobials by the Member Countries that would be presented during the 2016 General Session.

The Commission was also informed on the work done by the OIE and upcoming activities on the antimicrobial resistance in the framework of the Tripartite (FAO, OIE and WHO) agreement and also on the upcoming seminars for National Focal Points on veterinary products.

The Commission also reviewed the modification made on Chapter 6.7. of the *Terrestrial Code* regarding selection of veterinary pathogens for surveillance of antimicrobial resistance following requests from Member Countries.

The amended chapter and the endorsed *ad hoc* Group report were forwarded to the Code Commission for further consideration.

The endorsed report of the ad hoc Group is attached as Annex 17.

3.2. Planned ad hoc Groups

- a) Ad hoc Group on vaccination: 29-31 March 2016 (follow up)
- b) Ad hoc Group on antimicrobial resistance: Tentative dates: 21-23 June 2016
- c) Ad hoc Group to revise CSF chapter: 5-7 July 2016
- d) Ad hoc Group to update Chapter 11.12. on Theileriosis: 20-22 September 2016
- e) Ad hoc Group on FMD: 14-16 June and 17-20 October 2016
- f) Ad hoc Group on BSE: 19-21 July and 22-24 November 2016
- g) Ad hoc Group on AHS: 29 November-1 December 2016
- h) Ad hoc Group on equine trypanosomosis Surra and Dourine (To be decided)

3.3. Programme and priorities

The Commission reviewed the working programme for the year, identified the priorities and scheduled the dates for the various *ad hoc* Group meetings which would be accessible to Member Countries on the OIE website. The programme and priorities of the Commission were also shared with the Code Commission during a joint meeting of the two respective Commissions.

4. Official disease status

4.1. Expert missions conducted by the Commission to Member Countries

a) Status quo of planned missions related to official status recognition or maintenance of granted status

The Commission discussed the logistical arrangements of the mission planned to Bolivia and Paraguay in April 2016 to assess the maintenance of their FMD zonal status overtime.

The Commission acknowledged that the mission requested for the CSF evaluation of Colombia's status could be conducted back-to-back to a mission, planned to Mexico, for maintenance of CSF status.

The Commission decided to postpone the discussions related to the other missions for maintenance to its September meeting.

b) Decision criteria to conduct a Member Country disease status mission

The Commission reviewed and endorsed with some revisions the text provided by the OIE Scientific and Technical Department reflecting the criteria to be considered when planning an expert mission in the context of the official disease status recognition or the maintenance of disease status.

4.2. Status quo of play of annual reconfirmations for 2015-2016

The Commission commended the development of the online system that was already fully functional for the annual reconfirmations of this year. It was used by more than 80% of the reporting Member Countries.

The Commission reiterated that Member Countries with official status recognition should respect the November deadline and continue to use the online system for submitting their annual reconfirmation. The Commission emphasised that Member Countries should also provide all relevant information to substantiate the maintenance of their official status or of the endorsement of their official control programme, which is obligated in the *Terrestrial Code*.

The Commission noticed with appreciation the progress made by the OIE Scientific and Technical Department to strengthen and further formalise the procedures for annual reconfirmation that would be considered by the OIE Council during its September/October meeting.

4.3. Countries with specific situations

The Commission had requested Morocco to provide detailed information to justify the maintenance of the endorsement of its official control programme in support of its annual reconfirmation in view of the FMD situation in Northern Africa. The Commission specifically requested the final results of the serological surveys conducted in Morocco during October 2015 that would be evaluated during the Commission September meeting.

The Commission was aware of the efforts made by some Member Countries to obtain the sufficient surveillance points for BSE risk status and the difficulties to achieve the minimum requirements due to the reduced number of livestock compliant with the surveillance streams providing higher surveillance points. The Commission referred this issue for further discussion by the *ad hoc* Group on BSE.

The Commission reviewed the annual reconfirmation sent by Member Countries and for which the Scientific and Technical Department required their scientific advice.

The Commission emphasised that Member Countries with endorsed control programme must demonstrate progress and should clearly indicate their working plan towards disease control or eradication.

4.4. Revision of the questionnaires

The Commission was provided with a compilation of the revisions of the questionnaires conducted by the relevant *ad hoc* Groups responsible for the evaluation of disease status. The members of the Commission undertook to provide feedback to the OIE by the end of July 2016 for the Disease Status Team to finalise the amendment of the questionnaires for review by the Commission during its September meeting.

5. FMD and PPR control strategies

5.1. Peste de Petits Ruminants - Global Control Strategy

The Commission was updated on the development of the PPR Global Control and Eradication Strategy that was endorsed at the International Conference in Abidjan, Cote d'Ivoire in April 2015 in which 76 countries participated.

Since the endorsement of the Global Strategy in Abidjan, three PPR regional Roadmap meetings were conducted for the regions of Central Africa, East Africa and the Middle East while other regional meetings would follow in 2016. The GF-TADs PPR Working Group would be replaced by a PPR Global Secretariat that was set up in FAO headquarters in January 2016. Its main task would be to implement a PPR control and eradication programme on the basis of the Global Strategy. The Commission was also informed of the upcoming pledging conference on PPR with the aim of engaging donors in funding the Global Control and Eradication Programme.

5.2. Foot and Mouth Disease Global Control Strategy

The Commission was updated on the progress made by the GF-TADs FMD Working Group in the implementation of the Global Strategy for FMD control. A Roadmap meeting was conducted for the Middle East Region in December in Doha (Qatar). This meeting was organised back to back with the PPR Roadmap and was attended by 60 participants from 9 different countries. The FMD Roadmap meeting for West-Eurasia is scheduled to take place in April 2016 in Kyrgyzstan.

The Commission was also informed that the OIE-FAO post-vaccination monitoring guide was in the latest stage of the publication process. The development of socio-economic guidelines related to FMD was also work in progress.

6. OIE Collaborating Centres

6.1. Follow up on the proposal for an OIE Collaborating Centre for the training of official veterinarians, the diagnosis of infectious animal diseases and zoonoses and the control of veterinary drugs in West and Central Africa, Dakar, Senegal

The Commission considered the response sent by the candidate Collaborating Centre applicant to the Director General addressing the issues identified by the Commission at its last meeting.

The applicant had agreed to the amended title proposed by the Commission: OIE Collaborating Centre for the training of official veterinarians, the diagnosis of infectious animal diseases and zoonoses and for the control of veterinary drugs in West and Central Africa.

Reviewing the supplementary information submitted, the Commission felt that there was a lack of evidence of how the activities of the laboratory for the control of veterinary drugs would in integrated into the existing Collaborating Centre and how both entities would be merged. The Commission requested that the applicant provide a detailed description of the activities and services provided to all African Member Countries as an OIE Collaborating Centre and also how the different components of the proposed new Collaborating Centre will be integrated and inter-operational.

A letter reflecting the discussion and requesting further clarification would be sent to the applicant Collaborating Centre.

In the meantime, the application will be presented for approval by the OIE Regional Commission for Africa at its next meeting, which will be held during the 84th General Session in May 2016.

7. Liaison with other Specialist Commissions

7.1. Terrestrial Animal Heath Standard Commission

Please refer to the joint meeting between the two Commissions attached as Annex 18

7.2. Biological Standards Commission

a) FMD serum provision to calibrate diagnostic test

The Commission was informed that the proposal made during its September meeting was accepted by the Biological Standards Commission and the *Terrestrial Manual* will be amended accordingly.

b) Revision of the BSE chapter of the *Terrestrial Manual* to include available test to discriminate atypical from classical BSE

The Commission was informed that OIE Reference Laboratory experts had been asked to update the chapter to include information on suitable tests to be used to discriminate atypical from classical BSE. The chapter had been circulated to Member Countries for a first-round of comments with the intention to be proposed for adoption in May 2016.

c) Proposal for international standardisation of bovine tuberculin

The Commission was informed on the conclusion of the *ad hoc* Group on a proposed procedure for producing the Replacement International Standard Bovine Tuberculin. The Commission requested to be duly informed of the progress on this issue.

d) Feedback on the outline chapter on Vaccination

The Commission was informed the Biological Standard Commission agreed with the outline proposed by the *ad hoc* Group with minor modifications for further attention of the *ad hoc* Group.

e) Feedback on the update of the Terrestrial Manual chapter on lumpy skin disease

The Commission was informed that the *Terrestrial Manual* chapter was revised by the Biological Standard Commission during its February meeting and it is now in the review cycle. The amended *Terrestrial Manual* chapter was also provided to the *ad hoc* Group who amended the *Terrestrial Code* chapter to verify that the amendments they recommended had been correctly addressed. The chapter would be modified accordingly envisaging obtaining a final version that would be proposed for adoption in May 2016.

7.3. Common issues related to several Specialist Commissions

The Commission was informed on the activities of the World Animal Health Information and Analysis Department with impact on the work of the Commission.

The Commission was updated on the work done by the OIE Taskforce for the revision of the OIE Notification Procedures, and on the launch of the World Animal Health Application on line, to replace the previous paper publication. The Commission was informed on the development of a smart phone application for alert messages related to immediate notifications and follow-up reports and on the preparation of e-learning modules for disease notification. The OIE website interfaces related to disease notification are being harmonised with the aim of having only one portal for the three current platforms: WAHIS, WAHIS interface and WAHIS-wild.

The Commission suggested to the Department to seek the support of the Wildlife Working Group to report on a selected disease affecting wildlife in the 2016 General Session presentation. The Commission encouraged Member Countries to continue reporting non-OIE listed wildlife diseases to the OIE.

8. Conferences, workshops, meetings

The Commission was updated on the main conclusion of some of the Conferences and meeting that the OIE was involved in since last September meeting.

8.1. Global conference "Global elimination of dog-mediated human rabies. The time is now", Geneva, 10-11 December 2015

The Commission commended the organisation of the Global Conference that involved both the veterinary and human health sectors following the One-Health approach. The Conference main objective was to illustrate that dog-mediated rabies elimination is feasible with current available tools.

The Commission took note of the Framework for Global Rabies elimination that was developed as an outcome of the Conference with the vision of achieving zero human rabies death by 2030. The Commission encouraged Member Countries to use the Framework for Global Rabies elimination as a reference to adapt their national and regional rabies elimination programmes.

8.2. Understanding Ebola virus at the human-animal interface. Rome, 19-20 January 2016

The meeting was organized by FAO to better understand the disease dynamics at the interface between animals and humans and identify factors that potentiate the emergence, transmission and spread of this virus. The objective was to share information on ongoing research projects and studies on the role of livestock and wildlife in the epidemiology of Ebola virus disease and to identify and prioritise knowledge gaps in disease dynamics at the human-wildlife-animal interface. Complementarities and synergies between programs and projects implemented by various partners were also explored for collaboration and partnerships.

The resulting background information on diagnostic tests and vaccines in domestic animals were also shared with the Biological Standard Commission.

9. Disease specific issues

9.1. Inactivation of avian influenza in eggs. Safety of pasteurised pure egg yokes

The Commission took note of a scientific publication on the inactivation of avian influenza in eggs. The OIE informed the Commission on the upcoming meeting with an OIE expert in this topic. The Commission would be subsequently informed on the outcome of this meeting.

9.2. Crisis Management Centre - Animal Health (CMC-AH): mission to Angola

The Commission was briefed on the main conclusion of the CMC-AH mission conducted in Angola on foot and mouth disease control in November 2015. The mission report would be shared with the Commission during the September meeting.

9.3. Update on the Foot and Mouth Disease Reference Laboratories Network and disease worldwide situation

The Commission was updated by Dr Donald King (Pirbright) on the most significant events related to FMD that occurred globally in the last 12 months and that would be included in the 2015 annual report and on the activities of the OIE/FAO FMD network. The Commission acknowledged the importance of sharing FMD virus information and commended the FMD Laboratories Network for their efforts in supporting the FMD Global Control Strategy. The Commission urged Member Countries to remain vigilant to the dynamic of FMD virus strains considered exotic in their regions and to adjust their vaccination strategies to ensure appropriate protection against newly emerging FMD virus.

9.4. Update on MERS-CoV

The Commission was updated on the outcome of the consultative meeting organised by WHO in December 2015 in Geneva in which the OIE participated and contributed with WHO efforts to develop a roadmap for global MERS-CoV research and product development.

The OIE also assisted WHO in a high level mission to Riyadh, Saudi Arabia, that took place in January 2016 with the aim of following-up on the previous recommendations and progress made by the Ministry of Health and Ministry of Agriculture in the prevention and control of MERS-CoV.

The Commission was informed on the OIE collaboration with FAO to explore the creation of a scientific network for MERS-CoV based on the model of the OFFLU network.

The Commission acknowledged the fact that there was sufficient evidence to confirm the role of dromedary camels as the main animal reservoir. This finding may request an update of the case definition for reporting positive MERS-CoV in camels to the OIE as emerging disease.

The Commission suggested consulting the *ad hoc* Group on Camelid diseases for their support in reviewing the case definition.

9.5. Rinderpest post-eradication activities

a) Web-based questionnaire for RPV material

The Commission was informed that the OIE was in the process of accumulating data for the annual report from returns submitted by Member Countries on the existence of rinderpest virus containing material (RVCM) through the web-based questionnaire. The results would be reported on during the 84th General Session.

This year one more Member Country reported to have RVCM. Thus, the total number of Member Countries reporting having RVCM was 25. Three Member Countries informed the OIE that they had destroyed their rinderpest virus materials, one had transferred it to one of the OIE/FAO approved facilities and another one had requested information to transfer its rinderpest virus material.

b) 8th Joint Advisory Committee, Paris, 4-5 November 2015

The Commission was informed that five research projects were recommended for approval at the Joint Advisory Committee (JAC); three for the sequencing and posterior destruction of the virus and two for the development of diagnosis method based on RT-PCR for rinderpest diagnosis. The Commission emphasised that the institutions responsible for the project on sequencing should make a formal commitment for the destruction of the virus after the end of the research project.

The Commission was informed that there were five FAO-OIE approved holding facilities. A sixth candidate facility was already prepared to receive an on-site inspection as part of the approval process. The Commission acknowledged the importance of the site-inspection and emphasised that the approved facilities should be available for inspection at any time.

The Commission was also informed that several Member Countries had express their intention to submit an application to have recognised rinderpest holding facilities and some other were querying on the protocol for transferring the RVCM. The Commission advised to maintain regular contact with those Member Countries to ensure appropriate virus sequestration.

c) International meeting on Maintaining Global Freedom from Rinderpest, Rome, 20-22 January 2016

The meeting was organised with the purpose of sharing information on the current situation of rinderpest virus and to review the progress made by the countries towards their obligation to destroy or safely relocate their stock of rinderpest virus in an FAO-OIE approved rinderpest holding facilities. It is planned to organise a follow-up meeting in April 2016.

10. For the Commission information

10.1. Naming disease desk-top simulation exercise on WHO best practices for the naming of new human infectious disease

The Commission was informed on the participation of the OIE and FAO in the WHO "naming of diseases" desk-top simulation exercise that was conducted in November 2015 by teleconference. The aim of this simulation exercise was to put in practice the identified best procedures for the naming of new human diseases with the aim to minimize the possible unnecessary negative impact of diseases names on trade, travel, tourism or animal welfare.

The simulation exercise helped with the validation of internal WHO best practise implementation material and to confirm the role and responsibilities of WHO, FAO and OIE in this matter.

11. Adoption of the report

The Commission agreed to circulate the draft report electronically for comments before adoption.

The next meeting of the Scientific Commission is scheduled for 5-9 September 2016.

.../Annexes

MEETING OF THE OIE SCIENTIFIC COMMISSION FOR ANIMAL DISEASES

Paris, 8-12 February 2016

Agenda

1. Adoption of the agenda and appointment of rapporteur

2. Issues from the last meeting of the Commission

2.1. Member Country comments received by January 2016 for consideration of the Commission

- a) Handbook for the Management of High Health, High Performance (HHP) Horses (handbook)
- b) Glossary
- c) Chapter 15.1. Infection with African swine fever
- d) Chapter 12.10. Infection with Burkholderia mallei (Glanders)
- e) Chapter 8.X. Infection with Mycobacterium tuberculosis complex
- f) Chapter 8.8. Infection with foot and mouth disease virus

2.2. Member Country comments received by January 2015 for SCAD information

a) Chapter 8.3. Infection with bluetongue virus

3. Ad hoc and Working Groups

3.1. Meeting reports for endorsement

- a) Wildlife Working Group, 29 September 2 October 2015
- b) Ad hoc Group on the Evaluation of FMD Status of Member Countries, 6-8 October and 30 November-3 December 2015
- c) Ad hoc Group on the Evaluation of CBPP Status of Member Countries, 26–29 October 2015
- d) Ad hoc Group on the Evaluation of CSF Status of Member Countries, 3–5 November 2015
- e) Ad hoc Group on the Evaluation of BSE Risk Status of Member Countries, 24–26 November 2015
- f) Ad hoc Group on the Evaluation of PPR Status of Member Countries, 15–16 December 2015
- g) Ad hoc Group on vaccination, 17-19 November 2015
- h) Ad hoc Group on Lumpy skin disease (caused by group III virus, type Neethling) to update Chapter 11.11. of the Terrestrial Code, 12–14 January 2016
- i) Ad hoc Group on the Evaluation of AHS Status of Member Countries, 19–20 January 2016
- j) Ad hoc Group on Antimicrobial Resistance, 19–22 January 2016

3.2. Planned ad hoc Groups

3.3. Programme and priorities

Official disease status

4.1. Expert missions by the Commission to Member Countries

- a) Status quo of planned missions related to official status recognition or maintenance
- b) Decision criteria to conduct a Member Country disease status mission
- c) Status quo of play of annual reconfirmations for 2015-2016
- d) Countries with specific situations
- e) Revision of the questionnaires

5. FMD and PPR control strategies

- 5.1. Peste de Petits Ruminants Global Control Strategy
- 5.2. Foot and Mouth Disease Global Control Strategy

6. OIE Collaborating Centres

6.1. Follow up of the proposal for OIE Collaborating Centre for the training of official veterinarians, for the diagnosis of infectious animal diseases and zoonoses and for control veterinary drugs in West and Central Africa, Dakar, Senegal

7. Liaison with other Specialist Commissions

- 7.1. Terrestrial Animal Heath Standard Commission
- 7.2. Biological Standards Commission
 - a) FMD serum provision to calibrate diagnostic test
 - b) Revision of the BSE chapter of the *Terrestrial Manual* to include available test to discriminate atypical from classical BSE
 - c) Proposal for international standardisation of bovine tuberculin
 - d) Feedback on the outline chapter on Vaccination
 - e) Feedback on the update of the Terrestrial Manual chapter on lumpy skin disease
- 7.3. Common issues related to several Specialist Commissions
- 8. Conferences, workshops, meetings
 - 8.1. Global conference "Global elimination of dog-mediated human rabies. The time is now", Geneva, 10-11 December 2015
 - 8.2. Understanding Ebola virus at the human-animal interface. Rome, 19-20 January 2016
- 9. Disease specific issues
 - 9.1. Inactivation of avian influenza in eggs. Safety of pasteurised pure egg yokes
 - 9.2. Crisis Management Centre -Animal Health (CMC-AH): mission to Angola
 - 9.3. Update on the Foot and Mouth Disease Reference Laboratories Network and disease worldwide situation
 - 9.4. Update on MERS-CoV
 - 9.5. Rinderpest post-eradication activities
 - a) Web-based questionnaire for RPV material
 - b) 8th Joint Advisory Committee, Paris, 4-5 November 2015
 - c) International meeting on Maintaining Global Freedom from Rinderpest, Rome, 20-22 January 2016
- 10. For the Commission information
 - 10.1. Naming disease desk-top simulation exercise on WHO best practices for the naming of new human infectious disease
- 11. Adoption of the report

MEETING OF THE OIE SCIENTIFIC COMMISSION FOR ANIMAL DISEASES Paris, 8-12 February 2016

List of Participants

MEMBERS

Dr Gideon Brückner (President)

30 Schoongezicht 1 Scholtz Street Somerset West 7130 SOUTH AFRICA gkbruckner@gmail.com

Dr Kris De Clercq (Vice-President)

Centre d'Etudes et de Recherches Vétérinaires et Agrochimiques Department of Virology Section Epizootic Diseases CODA-CERVA-VAR Groeselenberg 99 B-1180 Ukkel BELGIUM Kris.De.Clercq@coda-cerva.be Dr Jef Hammond (Vice-President)

Director Centre for Animal & Plant Biosecurity (EMAI)

NSW Department of Primary Industries Elizabeth Macarthur Agricultural

Institute Private Bag 4008 Narellan NSW 2567 AUSTRALIA jeffrey.hammond@dpi.nsw.gov.au

jemey....gov.a

Dr Baptiste Dungu (*Member*) 26 Dalrymple Crescent Edinburgh EH9 2NX

Scotland

UNITED KINGDOM b.dungu@mci-santeanimale.co

Dr. Juan Antonio Montaño Hirose

(Member). Invited but could not attend Director del Centro Nacional des Servicios de Diagnostico en Salud Animal

Servicio Nacional de Sanidad, Inocuidad y Calidad Agroalimentaria Km. 37.5 de la Carretera México-Pachuca

Tecamac, Edo. de México MEXICO

juan.montano@senasica.gob.mx

Dr Silvia Bellini (Member)

Istituto Zooprofilattico Sperimentale della Lombardia e dell'Emilia Romagna "Bruno Ubertini" Via Bianchi 9 25124 Brescia

ITALY

Silvia.bellini@izsler.it

OIE HEADQUARTERS

Dr Monique Eloit

Director General 12 rue de Prony 75017 Paris FRANCE

Tel: 33 - (0)1 44 15 18 88 Fax: 33 - (0)1 42 67 09 87

oie@oie.int

Dr Brian Evans

Deputy Director General, Head of Scientific and Technical Department b.evans@oie.int Dr Elisabeth Erlacher-Vindel

Deputy Head of the Scientific and Technical Department e.erlacher-vindel@oie.int

Dr Laure Weber-Vintzel

Officer in charge of the recognition of countries' animal disease status
Scientific and Technical Department

l.weber-vintzel@oie.int

Dr Gregorio Torres

Chargé de mission

Scientific and Technical Department g.torres@oie.int

CHAPTER 15.1. INFECTION WITH AFRICAN SWINE FEVER VIRUS provided by the Scientific Commission

Article 15.1.3. ASF freedom

The Commission acknowledged that ASF and CSF shared similar risk factors for the virus incursion with spreading of infection being the main difference through the involvement of ticks in the epidemiology of ASF. It was also emphasised that although ticks play a role in the maintenance of the disease in an infected area, they are not responsible for long-distance spread ¹. The Commission consulted scientific literature ² and did not support a comment by a Member Country referring to the direct role of wildlife and ticks in the current outbreaks of ASF in domestic pigs in Eastern Europe and confirmed that it could be possible for countries or zones to be free from ASF while having the disease in wild pigs providing that an effective separation of the populations exists.

The Commission reiterated that the provisions of the three-year period without clinical cases, in the case event of ticks being present, or 12 months if ticks were not present would be enough to demonstrate freedom of disease, providing that the other required preventative measures are in place and adequately documented.

Article 15.1.3. bis ASF Compartment

In addition to the general requirements for a compartment described in Chapter 4.3. and 4.4. the Commission recommended that an embedded double outside fence be erected around the compartment to ensure there would be no contact with the external pig population. Acknowledging that *Ornithodoros* ticks would not move for long distance and therefore not playing an active role in the geographical spread of the virus³, the Commission considered these measures would also prevent the virus transmission by infected ticks.

Article 15.1.4. Recovery of free status

The Commission considered the experience of Member Countries who successfully eradicated ASF even in the presence of ticks. The short recovery period (three months) favors the use of sentinel pigs to demonstrate the absence of the virus in the establishment either due to a non-appropriate cleansing and disinfection or because of the presence of ticks.

Article 15.1.9. Recommendations for importation from countries or zones not free from ASF – for semen of domestic and captive wild pigs

The Commission acknowledged the limited scientific information available related to the shedding of the <u>ASF</u> virus in semen. The only scientific evidence, the Commission was aware off, referred to an experimental infection in which one boar shed the virus in semen during the acute phase of the disease⁴. Thus, the infection would be detected through the current surveillance requirements and it would not be necessary to test the semen before importation. The Commission supported that the text be kept as initially proposed and did not request further testing, as the current article already provide sufficient risk mitigation measures.

Oleaga, A., R. Perez-Sanchez, & A. Encinas-Grandes (1990). Relationships between the defensive systems of Iberian-breed swine and the European vector of African swine fever, *Ornithodoros erraticus*. *J. Parasitol.*, **76**: 874–880.

² EFSA Journal 2015; **13**(7):4163

³ EFSA Journal 2010; **8**(8):170.

M. Dominiek, Van Soom, & Appe R. (2016) Porcine semen as a vector for transmission of viral pathogens. *Theriogenology*, 85(2016), 27–38

CHAPTER 12.10. INFECTION WITH BURKHOLDERIA MALLEI (GLANDERS) provided by the Scientific Commission

Article 12.10.2. Free country or zone

The Commission agreed with comments by some Member Countries requesting the recognition of historical disease freedom. The Commission concluded that the provisions of Chapter 1.4. would be sufficient.

Article 12.10.3. Recovery of status

The Commission acknowledged that this article was related to countries or zones that were previously free and that now experienced outbreaks. The Commission considered that obtaining freedom could be technically more challenging when attempting it for the first time, than for recovering of the previous free status. The Commission suggested that the original text be maintained, without any reference to required time periods as they were considered sufficient to mitigate the risk.

Comparmentalisation

The *ad hoc* Group had initially reviewed Chapter 12.10. with the view that glanders would be included in the list of diseases for which official recognition could be granted. At that time, the *ad hoc* Group was advised not to draft such an article. However, the Commission could not see any scientific justification not to propose an article to establish a compartment free from glanders, as long as the appropriate biosecurity measures are applied.

The Commission discussed the application of a containment zone to limit the impact of an outbreak and suggested that the article initially proposed by the *ad hoc* Group in this regard, be reconsidered.

CHAPTER 8.X. INFECTION WITH MYCOBACTEIUM TUBERCULOSIS COMPLEX provided by the Scientific Commission

Article 8.X.1. General provisions

The Commission reviewed the scientific literature suggested by some Member Countries including the OIE's publication 'Camelid Infectious Disorders' by Wernery U., Kinne J., Schuster R.K. (2014) and the paper by Alvarez J. et al. (2012) Diagnosis of Tuberculosis in Camelids: Old Problems, Current Solutions and Future Challenges. Transboundary and Emerging Diseases, 59; 1-10. The Commission could not find sufficient scientific evidence to justify the inclusion of the species meant by New World Camelids as susceptible species for the purpose of the chapter due to the lack of a reliable test to diagnose the disease in the live animal. The Commission advised to leave it "under study" until robust scientific evidence becomes available.

Article 8.X.4. Free country or zone

The Commission highlighted the difference in sensitivity in the surveillance based on the intradermal tuberculin test and the post-mortem inspection. The Commission considered that the alternative proposal made by a Member Country for gaining freedom was not equivalent. The Commission suggested maintaining the original text.

The Commission also considered the proposal of introducing the concept of "negligible risk". This new concept would create a burden on the surveillance and diagnostic test strategy. The concept of freedom from disease was based on the specific surveillance provisions described in the chapter Therefore, if this new concept would be accepted in this chapter, it may also need to be considered for other diseases with similar diagnostic and surveillance challenges

Article 8.X.6. Free herd

The Commission considered that the alternative proposal from a Member Country to maintain herd free status was not equivalent to the two options included in the article. The Commission acknowledged that the provisions of point b of Article 8.X.6. have been extensively used in practice and were considered sufficient. In addition, the Commission reiterated that surveillance at the slaughterhouse was not equivalent to surveillance at herd level (Article 8.X.4. point 1c).

Article 8.X.7. Recommendations for the importation of bovids and cervids for breeding and rearing

The Commission acknowledged that the question whether the requirements of point 2.c) would be sufficient to mitigate the risk was also shared with the Biological Standard Commission. The Commission was of the opinion that it would not be necessary to extend the isolation period to 6 months and supported the recommendation of a 90-day isolation period.

CHAPTER 8.8. INFECTION WITH FOOT AND MOUTH DISEASE VIRUS provided by the Scientific Commission

Compartmentalisation with vaccination

The Commission concurred with the scientific justification cited by the *ad hoc* Group to allow vaccination in a compartment. The Commission was of the opinion that the establishment of such compartments would support bilateral trade agreements and would allow access to international markets. The Commission suggested proposing the possibility of vaccination in a compartment to Member Countries to provide them the opportunity to indicate whether this new approach would be acceptable or not. The Commission therefore supported the insertion of an article for a compartment free from FMD where vaccination is practiced as drafted by the *ad hoc* Group.

Article 8.8.7. Recovery of free status

The Commission extensively discussed the role of carriers in the epidemiology of the disease and stressed that scientific information confirms that only African buffalo had demonstrated clearly to act as carriers. However, the Commission highlighted the importance of sub-clinical FMD virus circulation in domestic animals in endemic areas that justified the current recovery periods after an outbreak. The Commission concluded that the recovery period may be subject to discussion based on current scientific evidence however, it would not be appropriate to modify the chapter until consultation with the *ad hoc* Group.

Article 8.8.15. Recommendations for importation from countries or zones free from FMD where vaccination is practised

The Commission considered a request by Member Countries to define an upper limit for testing semen to be imported from countries or a zone free from FMD where vaccination is practised. The Commission considered it was not necessary to define an upper limit as long as the importation was done in accordance with the provisions of Article 8.8.15.

Article 8.8.22. Recommendations for importation from countries or zones infected with FMDV, where an official control programme exists

In response to some Member Countries' comments, the Commission amended the text in point 1c of Article 8.8.22. to clarify that the provision to request a 10-kilometer radius of which FMD had not occurred, only applies to an establishment and not to a quarantine station.

Article 8.8.40. General principles of surveillance

The Commission disagreed with a suggestion by a Member Country on Article 8.8.40. to conduct population immunity studies to a specific target subpopulation as the Commission was of the opinion that this could bias the final results and therefore it was not recommended.

EVALUATION OF A REQUEST FROM A MEMBER COUNTRY FOR THE ENDORSEMENT OF ITS NATIONAL OFFICIAL CONTROL PROGRAMME FOR FMD

Kazakhstan

Kazakhstan was recognised as having a zone free from FMD where vaccination is not practised in May 2015.

Further to an application from Kazakhstan and a meeting with a delegation from this country, the Commission, with the support of the FMD *ad hoc* Group, electronically reviewed the additional information and clarification provided after the meeting with the Delegation, to complete the assessment done during the Commission physical meeting.

In accordance with the established procedures, an expert of the FMD *ad hoc* Group who had provided consultancy services to Kazakhstan expressed a possible conflict of interest and withdrew from all discussions on Kazakhstan's dossier.

i. Capacity of the Veterinary Services to control FMD

The Group was informed that a PVS was first conducted in Kazakhstan in 2007 and - with Follow-up in 2011 - and Gap Analysis missions conducted in 2011.

The Group and the Commission noted the substantial resources and the legislation in place to implement the proposed programme. The Commission also commended the efforts and progress made by Kazakhstan with regard to FMD control as well as the performance of the Veterinary Services of Kazakhstan.

ii. Applicability of the official control programme for FMD to the entire territory

Considering that the northern area of Kazakhstan was recognised as a zone free from FMD where vaccination is not practised in May 2015, the official control strategy focused on the remaining territory in the south and east of Kazakhstan with the aim of achieving freedom from FMD in the remaining territory

iii. Animal disease reporting

The Group discussed the outbreaks reported in 2012 and whether or not all the outbreaks were reported. In addition the Group also considered the investigations conducted after a FMD suspicion in the FMD free zone without vaccination in June 2015 and concluded that reporting to the OIE appeared satisfactory.

The Group considered that Kazakhstan had a record of regular and prompt animal disease reporting.

iv. Epidemiology of FMD in the country

The Group also noted that the last FMD outbreaks occurred in 2012 in Almaty Province and the zone consisting of Zhambyl, Kyzylorda and South Kazakhstan Regions; and in 2013 in East Kazakhstan Province

Concerning the identification system, Kazakhstan provided the Group with the description of the practical implementation of movement controls, including statistics showing the numbers and categories of animals moving between the different zones that Kazakhstan plans to establish in the remaining territory for future recognition as FMD free zones. This information was further complemented during the meeting with the delegation from Kazakhstan clearly explaining the electronic animal identification already in use as well as the data capturing system reflecting the data down to herd level.

Upon the Group's request, Kazakhstan confirmed that the border to China was fully equipped with a physical barrier over 1,783 kilometres, and that natural barriers such as mountains, rivers, plains, deserts would not allow smuggling and uncontrolled movement of animals and their products. Furthermore, periodic surveys were performed to control illegal movements at borders with neighbouring countries.

The Group expressed its concern that live cattle were regularly imported from a neighbouring country that had not been officially recognised free from FMD. From the additional information provided by Kazakhstan, the Commission agreed that these rules were compliant with the *Terrestrial Code* requirement.

v. The detailed plan of the programme to control and eventually eradicate FMD in the country or zone

The Group noted that Kazakhstan's strategy was to establish three different zones in the remaining territory for future recognition as FMD free zones with vaccination, and recalled that it is key for countries applying for multiple zones to give evidence of the effective separation of the susceptible animal population resident in each of the zones having a same or different status, and in particular on the controls on movements of such animals and their products between the zones.

The Group considered that the description of the three separate zones, as indicated in Kazakhstan's strategy, was clear. The main reason for having three different zones was said to be based on the difference in the types and subtypes of the FMD virus which were recorded during the period of 2011 to 2013. Whilst the Group considered that this reasoning was not sufficiently documented as Article 4.3.3. of the *Terrestrial Code* states one of the principles of zoning "the extent of a *zone* and its geographical limits should be established by the *Veterinary Authority* on the basis of natural, artificial and/or legal boundaries, and made public through official channels". The Group nevertheless agreed that natural barriers between the three zones existed to substantiate the separation of zones: the southern slopes of the mountains Tarbagatai to the south-east coast of Lake Alakol including its north-west coast separate East Kazakhstan and Almaty regions; Muyunkum and Taukum deserts separate Almaty and Zhambyl Regions.

The Commission recommended to have a breakdown and associated key performance indicators and timelines to monitor the progress (i.e. annually or at regular time intervals).

vi. FMD surveillance

With regard to the criteria for clinical suspicion, Kazakhstan explained that "mass illness", as mentioned in the dossiers, means the presence of clinical signs typical of FMD in animals. The presence of these signs would be considered a suspicious case and appropriate measures would be taken to eliminate suspicion and establish a differential diagnosis.

NSP serological surveys have also been conducted in the past years. Positive findings were ruled out by follow-up probang testing. In addition, the Group acknowledged that the sero-prevalence had reduced over time but while being low, was not negligible in 2014 and wondered whether or not this could be ascribed to NSP specificity problems rather than FMD infection. From the additional information provided by Kazakhstan, the Group noted some discrepancy between the data presented in the table and the maps (for example, the table for East Kazakhstan region for 2015 showed 67 positive reactors and the map shows only 15 points) and further acknowledged that the maps displayed the herds in which at least one animal was seropositive. The Group concluded that the herds may have had several reactors.

The Group also observed a significant increase of NSP positive reactors in comparing the sero-surveillance data presented in different tables for 2015 in the same region. Kazakhstan further clarified that this apparent increase was linked to the design of the survey and the use of penside tests. In addition, all the positively reacting samples were followed up and reconfirmed as negative results. The Group noted that in 2014 fewer sheep were sampled compared to previous years and goats and pigs were excluded from the survey. The Group recommended that a more representative number of samples should be taken in all susceptible species present in Kazakhstan (e.g. sheep, goats, pigs) for sero-surveillance.

However the Commission emphasised the importance of first designing the surveillance to be conducted, and that the number of herds to be sampled and the samples to be collected per herd should be based on the level of confidence, the design prevalence, the size of the herd and the sensitivity and specificity of the test used.

The Commission recommended that a detailed plan regarding the design of the surveillance to be performed and the plan to follow-up seropositive results should be clearly defined, while taking into the account the number of susceptible species, in particular with regard to sheep present in the area.

The Group commended that surveillance was conducted in wildlife in 2012 and 2013 in Zhambyl, South Kazakhstan and Kyzylorda.

vii. Diagnostic capability and procedure

The Group noted that Kazakhstan participated in a proficiency test organised by the OIE Reference Laboratory for FMD, All Russian Research Institute of Animal Health (ARRIAH), Vladimir with good results and that the Kazakh Republican Veterinary Laboratory organises annual proficiency tests for all the regional laboratories in the country that conduct FMD NSP serology.

viii. Vaccination

The Group noted that the requirements for the choice of the vaccine had evolved further to the recommendations of the 5th West Eurasia Roadmap meeting for FMD control. The inactivated trivalent vaccine (type O, A and Asia-1 Shamir) that was used since 2013 had been subjected to third party evaluation and, together with the serological results from the field, appeared as satisfactory. Further to the Group's request, Kazakhstan provided the supporting documents that the vaccine was also meeting 6 PD₅₀. Kazakhstan explained that potential vaccine providers were obliged to have quality control certificates proving that the vaccine matches the requirements of technical specifications of the product and complies with international standards. Kazakhstan further mentioned that vaccination of pigs has been applied since 2015 and indicated a goal to vaccinate higher number of pigs for preventive purposes.

The Group acknowledged that serological post-vaccination monitoring was conducted in Kazakhstan. Based on the additional information received on the population immunity survey design, the Group noted that the numbers of samples tested for measuring population immunity seemed very high and probably more than necessary, except in 2015. Kazakhstan further clarified that the survey for 2015 was not completed and all results of the surveys carried out in 2015 would be presented at the end of the year or the beginning of 2016. During the meeting with the delegation from Kazakhstan, additional information on the survey was also provided.

ix. Emergency preparedness and response plan

The Group noted that the emergency plan was provided as an annex to the application. Further to the Group's request, Kazakhstan explained that a FMD emergency plan was in place accounting for the different zones and vaccination status. The Group commended that annual simulation exercises were planned under the Ministry of Emergency Situations and the Ministry of Agriculture.

The Group acknowledged that the legislation and contingency plan for early detection, prevention and control of FMD were in place.

x. Compliance with the questionnaire in Article 1.6.11.

The Group agreed that the dossier was generally compliant with the questionnaire in Article 1.6.11.

Conclusion

Considering the information submitted in the dossier, answers to the questions raised by the FMD *ad hoc* Group, and the additional information and clarification provided by Kazakhstan by written and further to a meeting with a delegation from Kazakhstan, the Commission considered that the application was compliant with the requirements of Article 8.8.39. and with the questionnaire in Article 1.6.11 of the *Terrestrial Code*. The Commission therefore recommended that Kazakhstan's national official control programme for FMD be proposed for endorsement.

Original: English
October 2015

MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION OF FOOT AND MOUTH DISEASE STATUS OF MEMBER COUNTRIES Paris, 6-8 October 2015

A meeting of the OIE *ad hoc* Group on the Evaluation of Foot and Mouth Disease (FMD) Status of Member Countries (hereafter the Group) was held at the OIE Headquarters from 6 to 8 October 2015.

1. Opening

On behalf of Dr Bernard Vallat, Director General of the OIE, Dr Brian Evans, the OIE Deputy Director General and Head of Scientific and Technical Department, welcomed and thanked the Group for its commitment and the extensive support towards the OIE in fulfilling the mandates given by Member Countries.

Dr Evans first updated the Group with the recent elections of the OIE Specialist Commissions and the plan to strengthen coordination and synergy between the Specialist Commissions to better respond to Member Countries' requests. He also mentioned that, once endorsed by the relevant Specialist Commission, the *ad hoc* Group reports would not only be annexed to the Specialist Commission reports but also individually available on the OIE website to ease the access to the reports and the rationale regarding the *Terrestrial Animal Health Code* (*Terrestrial Code*) Chapter revisions.

Dr Evans mentioned the importance of transparency and procedural fairness. He reminded the Group that submitted dossiers were considered the property of the applicant Member Countries and sharing of dossiers between countries could be done, when requested, through bilateral negotiation between both countries. Nevertheless, he pointed out that a recent amendment in the Standard Operating Procedures for official recognition of disease status or risk status of bovine spongiform encephalopathy and for the endorsement of national official control programmes of Member Countries clarifies that Member Countries requested to provide the whole or part of its dossier during the 60-day comment period prior to the General Session should comply with the request within maximum of 10 days.

Dr Evans highlighted the sensitivity and confidentiality of the dossiers received for official recognition and thanked the experts for having signed the confidentiality undertakings. He also mentioned that if any member of the Group has conflict of interest in the evaluation of a dossier (i.e. involved in consulting or working with a Member Country that have submitted an application), the expert should not take part in the discussions and decision making of the particular application.

The Group and the OIE welcomed Drs Sergio Duffy and Alejandro Rivera as new members in the Group and thanked the two previous experts for their contribution to the Group. Finally the Group regretted the absence of the two additional invited experts that could not attend the meeting.

Dr Laure Weber-Vintzel, officer in charge of the recognition of countries' animal disease status, introduced Dr Maria Luisa Danzetta, who recently joined the Scientific and Technical Department to work on the activities related to official disease status recognition.

2. Adoption of the agenda and appointment of chairperson and rapporteur

The Group was chaired by Dr Wilna Vosloo. Dr David Paton acted as rapporteur, with the support of the OIE Secretariat. The Group endorsed the proposed agenda.

The agenda and list of participants are presented as Appendices I and II, respectively.

3. Evaluation of the information provided by a Member Country with regard to the endorsement of its national official control programme for FMD

Algeria

Acknowledging the information submitted by Algeria, the Group concurred with the Scientific Commission's position to finalise the assessment at its next meeting in December 2015, by which time, Algeria should have completed the serological survey provided data showing clearly the adequacy of vaccination and the extent of undisclosed infection by locality. The Group would also expect that Algeria would respond to the points requested in the report of the November 2014 meeting of the Group.

4. Evaluation of a request from a Member Country for the status recognition of a new FMD free zone where vaccination is not practised

The Group requested additional information from the applicant Member Country for further assessment to be finalised at its next meeting in December 2015. The conclusion of this assessment will therefore be presented in the report of next *ad hoc* Group meeting.

5. Evaluation of a request from a Member Country for the status recognition of new FMD free zones where vaccination is practised

The Group requested additional information from the applicant Member Country for further assessment to be finalised at its next meeting in December 2015. The conclusion of this assessment will therefore be presented in the report of next *ad hoc* Group meeting.

6. Evaluation of a request from a Member Country for the endorsement of its national official control programme for FMD

The Group requested additional information from the applicant Member Country for further assessment to be finalised at its next meeting in December 2015. The conclusion of this assessment will therefore be presented in the report of next *ad hoc* Group meeting.

7. Other matters

The Group prepared its next meeting scheduled from 30 November to 3 December 2015 and compiled a preliminary list of topics for discussion on the *Terrestrial Code* Chapter.

8. Adoption of report

The Group reviewed the draft report provided by the rapporteur and agreed to circulate the draft report electronically for comments before the final adoption.

.../Appendices

Appendix I

MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION OF FOOT AND MOUTH DISEASE (FMD) STATUS OF MEMBER COUNTRIES Paris, 6-8 October 2015

Agenda

- 1. Opening
- 2. Adoption of the agenda and appointment of chairperson and rapporteur
- 3. Evaluation of the information submitted by a Member Country having an endorsed official control programme
 - Algeria
- 4. Evaluation of a request from a Member Country for the status recognition of a new FMD free zone where vaccination is not practised
- 5. Evaluation of a request from a Member Country for the status recognition of new FMD free zones where vaccination is practised
- 6. Evaluation of a request from a Member Country for endorsement of its official control programme for FMD
- 7. Other matters
- 8. Adoption of report

Appendix II

MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION OF FOOT AND MOUTH DISEASE STATUS OF MEMBER COUNTRIES Paris, 6-8 October 2015

List of participants

MEMBERS

Dr Sergio Duffy

Centro de Estudios Cuantitativos en Sanidad Animal Facultad de Ciencias Veterinarias Universidad Nacional de Rosario (UNR) Arenales 2303 - 5 piso 1124 Ciudad Autónoma de Buenos Aires ARGENTINA sergio.duffy@yahoo.com

Dr Alf-Eckbert Füssel

(Invited but could not attend)
Deputy Head of Unit, DG SANTE/D1
Rue Froissart 101-3/67 - B-1040 Brussels
BELGIUM
Tel: (32) 2 295 08 70

Fax: (32) 2 295 3144

alf-eckbert.fuessel@ec.europa.eu

Dr David Paton

The Pirbright Institute
Ash Road, Woking
Surrey GU20 0NF
UNITED KINGDOM
david.paton@pirbright.ac.uk

Dr Alejandro Rivera

arivera@paho.org

FMD Center/PAHO-WHO
Centro Panamericano de Fiebre Aftosa
Caixa Postal 589 - 20001-970
Rio de Janeiro
BRAZIL
Tel: (55-21) 3661 9000
Fax: (55-21) 3661 9001

Dr Kobedi Segale

(Invited but could not attend)
Epidemiologist
Ministry of Agriculture
Private Bag 0032
Gaborone, BOTSWANA
Tel: (267) 744 04187
Tel: (267) 231 90158
ksegale@gov.bw

Dr Wilna Vosloo

Research Team Leader CSIRO Livestock Industries Australian Animal Health Laboratory Private Bag 24 Geelong, VIC 3220 AUSTRALIA Tel: (61) 3 5227 5015

Fax: (61) 3 5227 5555 wilna.vosloo@csiro.au

SCIENTIFIC COMMISSION REPRESENTATIVE

Dr Kris de Clercq

CODA/CERVA/VAR
Centre d'Etudes et de Recherches
Vétérinaires et Agrochimiques Department of Virology
Section Epizootic Diseases Groeselenberg 99 - B-1180 Ukkel
BELGIUM

Tel.: (32-2) 379.05.12 Fax: (32-2) 379.06.66 krdec@coda-cerva.be

OIE HEADQUARTERS

Dr Bernard Vallat

Director General 12 rue de Prony 75017 Paris FRANCE Tel: (33) 1 44 15 18 88 Fax: (33) 1 42 67 09 87

oie@oie.int

Dr Brian Evans

Deputy Director General and Head Scientific and Technical Department b.evans@oie.int

Dr Laure Weber-Vintzel

Officer in charge of the recognition of countries' animal disease status Scientific and Technical Department I.weber-vintzel@oie.int

Dr Min Kyung Park

Chargé de mission Scientific and Technical Department m.park@oie.int

Original: English
December 2015

MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION OF FOOT AND MOUTH DISEASE STATUS OF MEMBER COUNTRIES

Paris, 30 November - 3 December 2015

A meeting of the OIE *ad hoc* Group on the Evaluation of Foot and Mouth Disease (FMD) Status of Member Countries (hereafter the Group) was held at the OIE Headquarters from 30 November to 3 December 2015.

1. Opening, adoption of the agenda and appointment of chairperson and rapporteur

The Group was chaired by Dr Wilna Vosloo. Dr David Paton acted as rapporteur, with the support of the OIE Secretariat. The Group endorsed the proposed agenda.

The agenda and list of participants are presented as <u>Appendices I</u> and <u>II</u>, respectively.

2. Evaluation of the information provided by a Member Country with regard to the endorsement of its national official control programme for FMD

Algeria

The Group assessed the second set of information provided by Algeria with regard to the endorsement of its national official control programme for FMD, following the first set of information already assessed at its October 2015 meeting. Acknowledging that the results of the serological survey conducted in October 2015 would be available at the end of December 2015, the Group agreed to finalise its assessment electronically in January 2016, in order to provide the Scientific Commission for Animal Diseases (Scientific Commission) with the most informed analysis and recommendation. The Group took the opportunity of this waiting period to request clarification to Algeria regarding the expected timeline for the implementation of the measures mentioned. The Group's position reached electronically after the meeting is presented in Appendix III.

3. Evaluation of a request from a Member Country for the status recognition of a new FMD free zone where vaccination is not practised

Russia

In August 2015, Russia submitted an application to the OIE for the recognition of a zone free from FMD where vaccination is not practised; the proposed free zone covers most of the country. In addition, the Russian dossier described a "surveillance zone" where vaccination is practised and two "infected zones", all composing a southern strip that borders neighbouring countries.

The assessment of the application began at the October 2015 meeting of the Group and was finalised at its December 2015 meeting. As part of the evaluation, the Group had short face-to-face meetings with delegations from Russia. The Group received additional information and clarification to the raised questions, which were further provided in writing. The delegation of Russia also invited the experts of the Group and the members of the Scientific Commission to visit Russia to evaluate FMD situation and control measures in place.

i. Animal disease reporting

The Group considered that Russia had a record of regular and prompt animal disease reporting.

ii. Situation of FMD in the past 12 months

The Group noted that the last outbreak in the proposed free zone was in Moscow Oblast in 1995 and that FMD had never been reported large parts of the proposed free zone.

iii. Absence of vaccination and entry of vaccinated animals in the past 12 months

In most of the zone, vaccination has never been conducted or had ceased in 1988 and 1991. However, three oblasts, namely Moscow, Vladimir and Irkutsk Oblasts, had ceased vaccination in January 2015.

The Group agreed that these three oblasts, as part of the proposed free zone, would meet the provisions of Article 8.8.2. in May 2016 when the final decision would be made by the World Assembly, provided that Russia certifies and provides documented evidence that during the past 12 months "no vaccination against FMD has been carried out" and "no vaccinated animal has been introduced except in accordance with Articles 8.8.8. and 8.8.9." (Article 8.8.2. Points 2b and 4e). This documentation should be provided by the end of January 2016 for consideration by the Scientific Commission at its February 2016 meeting.

The Group took note of the additional information provided that vaccinated animals may be moved from the protection zone to the proposed FMD free zone under the recommendations of Article 8.8.11. of the *Terrestrial Code*. However, the Group emphasised that as Russia applied to be officially recognised for a zone free from FMD without vaccination, Russia should be in absolute compliance with Article 8.8.2. of the *Terrestrial Code* and therefore ensure that vaccinated animals are not introduced into the proposed free zone. Russia further provided written confirmation that ruminants in the protection zone were vaccinated according to the 'Integrated plan of diagnostic tests, veterinary-prevention and antiepidemic measures' to be implemented in Russia in 2015. While it was not clear whether or not all ruminants of the protection zone were vaccinated, additional details were provided about vaccination numbers (Annex 1). According to these data, on 4.2 million cattle, between 1.8 and 3.4 million were vaccinated quarterly; In addition on 5.6 million sheep and goats, between 1.8 and 5.2 million were vaccinated quarterly. Therefore, it would appear that mass vaccination was widely applied. The prohibition on the movement of vaccinated animals from the protection zone to the free zone was indicated to be legislated under the rules on trade between Custom Union Member States, but it was not absolutely clear to the Group if this would apply to the movement between two zones within a single state.

iv. Surveillance for FMD and FMDV infection in accordance with Articles 8.8.40. to 8.8.42.

The Group noted that regular sero-surveillance was performed in the proposed free zone with structural protein and non-structural protein (NSP) tests and virus neutralisation test (VNT), and follow-up activities were done when needed. However, the Group requested information on the design of NSP sero-surveys conducted to demonstrate freedom from infection, especially in the three oblasts where vaccination had only recently ceased. The Group noted that sero-surveillance was focused on cattle and that testing had not been strengthened to compensate for the difficulty of clinical surveillance in vaccinated animals.

Considering that Kaliningrad is non-contiguous to the rest of the proposed free zone, the Group requested that Russia provide evidence that it was free from FMDV infection.

The Group acknowledged that Russia participated in inter-laboratory proficiency testing for FMD laboratory diagnosis in 2013. In addition the Group appreciated that Russia - provided satisfactory results for the inter-laboratory proficiency testing in 2014 and 2015.

v. Regulatory measures for the early detection, prevention and control of FMD

Upon the Group's request on animal identification, Russia clarified that ear tags were used to individually identify animals depending on their oblast of origin.

The Group understood from the delegation that the Veterinary Authorities were working together with the police and armed forces in preventing any illegal movements and entry of any animals and commodities susceptible to FMD.

The Group also noted some discrepancies in the information provided related to the regulatory measures for movement of animals and commodities. The delegation clarified that these discrepancies resulted from the translation of the original dossier to English and provided the corrected document regarding the movement restrictions between the proposed free zone and the protection zone, as well as the supporting data summarising the movements performed in particular situations.

With regard to the Group's request to provide more information on the movement of animals and products between the territories included in the proposed free zone but non-contiguous (Kaliningrad Oblast), Russia provided the certificates issued in relation to animal imports into Kaliningrad.

vi. Description of the boundaries of the proposed free zone

The Group appreciated the clarity of the design and description of the proposed free zone without vaccination and acknowledged that the borders of the proposed free zone coincide with administrative divisions. Whilst taking note of the non-contiguous area, namely Kaliningrad Oblast, the Group emphasised that an outbreak in any part of the proposed free zone would cause the whole zone to lose its status.

vii. Description of the boundaries and measures of a protection zone

Upon the Group's request, the delegation clarified that the zone described in the dossier as a "surveillance zone" was to be considered as a protection zone as defined in the *Terrestrial Code* to protect the status of the proposed free zone. In addition, the Group highlighted that the so-called infected and surveillance zones were excluded from the proposed free zone and should be considered as infected, in accordance with the *Terrestrial Code*.

viii. Description of the system for preventing the entry of the virus (into the proposed FMD free zone)

The Group emphasised the importance of effective separation and control on movements of animals and their products between the zones of different animal health and vaccination status. The Group noted that the regulations described in the dossier gave details about the movement controls of animals and animal products between zones and from third countries; sensible regulations were in place to prevent movements from the area with vaccination to the proposed free zone, but there was not enough evidence on how this was conducted in practise.

Upon the Group's request, Russia provided a clear table for 2015 showing animal and animal product movements by location of origin and destination, including quantities moved, that were subjected to FMD inspection and number of illegal movements. The Group noted from the table that the only live animals moved from the protection zone to the free zone in 2015 were pigs for slaughter. Various animal commodities were moved from the protection zone to the free zone, including milk and dairy products, pork, beef and mutton. While the Group noted that the amount of imported mutton was small, as currently there is no provision in the *Terrestrial Code* to move mutton from an infected to a free zone, compliance with the *Terrestrial Code* would require processing to destroy FMDV.

The Group was concerned that the description given in the dossier for movement for slaughter from the protection zone to the proposed free zone without vaccination did not fully comply with the requirements under Article 8.8.8. of the *Terrestrial Code*. Despite the answers received from Russia, it still seemed as if the following were not part of the movement requirements for ruminants: i) a 10-kilometre radius around the place of origin without FMD; ii) a slaughterhouse not approved for export at the time of handling animals from the protection zone; iii) deboning and maturation of meat (only applied to meat from animals from the infected areas and not to meat from animals coming from the protection zone). Nevertheless, the Group noted that Russia described a requirement for all animals moved for slaughter to be tested NSP negative in quarantine, which seemed to be an additional safeguard compared to the requirements of Article 8.8.8.

Russia further clarified that two 30-day quarantines were done, one at the establishment of origin and one at the establishment of destination, with a total quarantine period of 60 days. Whilst the Group appreciated that two serological tests were performed during the whole quarantine period, the Group acknowledged that the current protocol, if used to move animals for other purposes than direct slaughter, was not fully compliant with Article 8.8.12. of the *Terrestrial Code* and should be adjusted to ensure in particular that animals should be "subjected to diagnostic virological and serological tests for evidence of FMDV with negative results on samples collected at least 28 days after the start of isolation period" at the establishment of origin.

The Russian delegation mentioned the presence, in the surveillance zone, of pig compartments free from FMD where vaccination is not practised and that strict measures were in place to control the movements from these compartments to the proposed free zone. The delegation explained that the only live animals and fresh meat introduced from the protection zone into the proposed free zone was from those pig compartments and provided the documents describing the regulations. The Group emphasised that Articles 8.8.10. and 8.8.20. of the *Terrestrial Code* must be complied with for introduction of live pigs and fresh pork from the protection zone to the proposed free zone without vaccination, and further requested that Russia provide evidence that the compartment system in operation was in compliance with Article 8.8.4. Russia claimed compliance with Article 8.8.4. and information was given to confirm that pigs were unvaccinated and that they were considered as being in compartments under Russian legislation. The Group concluded that the requirements for movements of live pigs from the protection zone to the free zone exceeded those of the relevant article in the *Terrestrial Code* (Article 8.8.10.) and included several measures compatible with the requirements of Article 8.8.4. for establishing a free compartment, including serological testing. However, these appeared to only apply if animals were to be moved into the proposed free zone.

Further to the Group's request, the Russian delegation confirmed that all ruminants in the protection zone were vaccinated and provided the legislation that it was prohibited to move the vaccinated ruminants to the proposed free zone, and that only unvaccinated pigs from free compartment in the protection zone were moved to the proposed free zone.

The Group finally considered the vaccination situation in the surveillance and infected zone as an assurance to the long-term maintenance of freedom from FMD in the proposed free zone and agreed that the extent of vaccination may be varied according to changing risks in different regions.

ix. Compliance with the questionnaire in Article 1.6.6.

The Group reiterated that information should be provided as relevant for the zone that Russia was applying for (proposed free zone and infected zone) and not only by Oblast. However, the Group agreed that the dossier was generally compliant with the questionnaire in Article 1.6.6.

Conclusion

Considering the above-mentioned points and Russia's answers to the questions raised, the Group could not conclude that the application was fully compliant with the requirements of Chapter 8.8. of the *Terrestrial Code*. However, also considering the long period during which the zone has remained free from FMD, the Group agreed to provisionally recommend the recognition of the proposed zone as free without vaccination, provided a mission be first conducted to confirm that the actual movements of animals and commodities comply with the requirements of the *Terrestrial Code*.

4. Evaluation of requests from Member Countries for the status recognition of new FMD free zones where vaccination is practised

The Group assessed requests of two Member Countries for the recognition of zones free from FMD where vaccination is practised and considered that the dossiers did not meet the requirements of the *Terrestrial Code*. The dossiers were referred back to the corresponding Member Countries.

5. Evaluation of a request from a Member Country for the endorsement of its national official control programme for FMD

a) Thailand

In August 2015, Thailand submitted an application to the OIE for the endorsement of its national official control programme for FMD.

The Group requested additional information and received clarification from Thailand.

i. Capacity of the Veterinary Services to control FMD

The Group was informed that a PVS mission and a Gap Analysis mission were conducted in Thailand respectively in March 2012 and January 2015.

The Group noted the substantial resources and the legislation in place to implement the proposed programme and that Thailand had increased the number of veterinarians and para-veterinarians based on the weaknesses identified in the PVS mission performed in March 2012.

ii. Applicability of the official control programme for FMD to the entire territory

The dossier provided evidence that the official control programme was considering the whole territory of Thailand while following a progressive zonal approach for FMD control.

iii. Animal disease reporting

The Group considered that Thailand had a record of regular and prompt animal disease reporting.

iv. Epidemiology of FMD in the country

While the original dossier did not detail the breakdown of prevalence and progress by regions, Thailand further provided this information, including a map displaying the outbreaks in the last two years.

The Group was aware that extensive work was being done in the OIE Reference Laboratory of Thailand related to characterisation of the virus with phylogenetic trees and vaccine matching to improve understanding of the epidemiology of FMD in the country and control measures. Thailand further clarified that the collected information had been used in the selection of vaccine strains and in vaccine matching and on how it lead to the change of the serotype A vaccine strain in 2013.

The Group agreed that the Thai Veterinary Services had good knowledge of the epidemiology of FMD in its country.

v. The detailed plan of the programme to control and eventually eradicate FMD in the country or zone

The Group took note that the FMD control programme of 2008-2015 was annexed to the application; however, there was no document related to the analysis of the accomplishments or incapacities of this programme as well as no description on how it was reflected in the FMD control programme of 2016-2023. Upon the Group's request, Thailand clarified that the full draft of the FMD strategic plan for 2016-2023 was written in Thai language by the Department of Livestock Development (DLD) and was approved at the Department level. Thailand indicated that the full plan was soon to be published but Annex V of the application provided a summarised English version of it.

With regard to the analysis of the accomplishments/incapacities of the programme of 2008-2015, Thailand stated that all indicators were regularly assessed and the most important performance indicators for FMD control were vaccination and disease investigation and control.

In the 2016-2023 programme, some timelines and performance indicators to reach disease freedom were described, but not clearly linked with the strategy and action plan.

The Group understood from the dossier that Thailand was following a zoning approach for FMD control and that the programme proposed for endorsement was targeting the recognition of the Eastern Zone (Zone 2) as a zone free from FMD with vaccination in 2016 and progressing to other regions. The Group took note of the apparent positive progress in FMD control in the Eastern Region.

The Group was also informed that the animal identification system was progressively being implemented and acknowledged the timeline objectives and key performance index (KPI) for full implementation in the entire territory by 2020. The Group also noted that ear tags could also be used in pigs on a voluntary basis, except in Good Agriculture Practice (GAP) Pig farms that have an individual identification system for breeding pigs and lot identification for fattening pigs.

The Group emphasised that the implementation of the national programme would largely depend on preventing introduction of FMDV which mainly relies on border control between infected neighbouring countries, as introduction of the disease could lead to major outbreaks, particularly in case of limited vaccination.

The Group was particularly concerned about animals moving into and through Thailand from Myanmar because of price differentials. A procedure was described for checks and quarantine but the original dossier did not provide sufficient confidence that those measures were implemented and would effectively prevent incursions. The Group suggested that performance indicators could be defined to measure the improvement in border control.

The Group considered that a clear timeline of the progression to be expected each year was lacking.

vi. FMD surveillance

The Group acknowledged that several surveillance activities were in place, such as livestock farm visits, a reporting system and outbreak investigation for any situations matching to the criteria for a suspicion of FMD, vaccination campaign and sero-monitoring, epidemiological, clinical and serological surveillance, slaughter surveillance and movement control and tracing as well as wildlife surveillance. The Group also noted that these activities were enhanced in the Eastern zone.

Thailand further clarified how the FMD outbreaks were detected, confirmed and reported. Details were also provided on the design of the serological surveys, with a specific mention of the Eastern Zone for which the serological survey is aimed to prove the absence of FMD virus circulation at an acceptable level of confidence.

vii. Diagnostic capability and procedure

The Group acknowledged that Thailand had an OIE Reference Laboratory for FMD in Pakchong as well as regional laboratories that were capable of performing diagnostics for FMD. The infrastructure, capacities, quality assurance of the laboratory and its involvement in the proficiency testing were also acknowledged by the Group.

viii. Vaccination

From the additional information provided, it appeared that a compulsory vaccination programme in cattle, buffaloes, goats and sheep had been conducted for several years and was planned through 2023 except in the southern part. Indeed, the southern part, namely FMD Zone 4, was planned to progressively become a FMD free zone without vaccination. Further to the Group's request, Thailand also confirmed that in 2014 and 2015, all ruminants in identified risk areas were targeted for FMD vaccination but in 2016, all ruminants (except in the southern region) were planned for mass FMD vaccination. Thailand made note that vaccination of pigs was not compulsory but that the Good Agriculture Practice (GAP) and FMD free farms certified by the Department of Livestock Development (DLD-certified farms) must be vaccinated.

Further to the Group's request, Thailand provided a table of the potency tests conducted from 2010 to 2015 for cattle and pigs.

ix. Emergency preparedness and response plan

The emergency plan was provided as an annex to the application in addition to the control and eradication procedures in the event of a FMD outbreak described in the main dossier.

The Group noted that the financial compensation of 75 percent of local market price was rather low and this could be an impediment to disease reporting.

x. Compliance with the questionnaire in Article 1.6.11.

The Group agreed that the dossier was compliant with the questionnaire in Article 1.6.11.

Conclusion

Considering the information submitted in the dossier and Thailand's answers to the questions raised, the Group considered that the application was compliant with the requirements of Chapter 8.8. and with the questionnaire in Article 1.6.11 of the *Terrestrial Code*. The Group therefore recommended that Thailand's national official control programme for FMD be proposed for endorsement.

However, The Group requested that a clear timeline be submitted before the meeting of Scientific Commission which would include some key points (such as the animal identification, movement controls and records, vaccination, vaccination monitoring and risk-based surveillance) that clearly show what was expected to be done each year.

In addition, the Group recommended that, in any future applications for official status recognition, Thailand better present its serological surveillance data by the relevant region.

b) Mongolia

In October 2015, Mongolia submitted an application to the OIE for the endorsement of its national official control programme for FMD.

The Group requested additional information and received some clarification from Mongolia.

i. Capacity of the Veterinary Services to control FMD

The Group was informed that two PVS missions and a Gap Analysis mission were conducted in Mongolia respectively in 2007, 2010 and 2012.

The Group acknowledged the rather complex structure of the Veterinary Services: the authority of the National Veterinary Services being shared between the Department of Veterinary and Animal Breeding (DVAB) of the Ministry of Industry and Agriculture and the General Agency for Specialised Inspection (GASI) under the Deputy Prime Minister. Should an emergency situation of confirmed FMD or another transboundary animal disease takes place, the National Emergency Management (NEMA) would be responsible for overall management and inter-sectoral coordination of the rapid response for control and prevention measures. The Group noted that the dossier stated "vertical chain of command from the Chief Veterinary Officer (CVO) does not exist". Upon the Group's request, Mongolia clarified that as a FMD outbreak would be considered as an emergency situation, various partners would be involved on a national level and the CVO would be directly informed, as well as GASI and NEMA, to coordinate response and control measures for FMD.

The Group wondered whether the number of veterinarians was adequate compared to the size of the country. The Group regretted that no further clarification was given on additional questions asked.

The Group also noted a draft law on Animal Health was approved in October 2015.

ii. Applicability of the official control programme for FMD to the entire territory

The dossier provided evidence that the official control programme was considering the whole territory of Mongolia while following a progressive zonal approach for FMD control. However, the Group could not find control measures on how Mongolia plans to separate and control the subpopulations in the three different zones – Western, Central and Eastern Regions.

iii. Animal disease reporting

The Group considered that Mongolia had a record of regular and prompt animal disease reporting. Further to the Group's request, Mongolia provided a map showing the locations of outbreaks in the last 15 years by year and serotype. The duration of the outbreaks following each incursion was less than three months.

iv. Epidemiology of FMD in the country

The Group noted the three epidemiologically distinct zones – Western Region, Central Region and Eastern Region – mentioned in the dossier where the risks of FMD outbreaks were dissimilar and required policies to implement specific activities.

The Group understood and supported that Mongolia was planning to take a zonal approach to reach a progressive zonal free status of the territory. The Group strongly recommended that clear separation of the subpopulations from the different zones and control of animal movements between the zones should be in place.

According to Mongolia, gazelles may have played a role in some incursions; however no further details were included about the different routes, patterns and methods of FMDV introduction into the country in the past.

Further to the Group's request, Mongolia provided information on a study to evaluate the risks for FMD introduction. The Group noted and commended the fact that Mongolia was aware that the double fencing at the border with a neighbouring country may not prevent animal movements. Mongolia explained that tripartite collaboration of the Veterinary Services of Mongolia, China and Russia was established to jointly control FMD and other transboundary diseases. However, the Group regretted that no supporting evidence was given on a risk-based surveillance.

Given the high risk of incursions, the Group indicated that the implementation of a *protection zone* could be beneficial to protect the areas adjacent to neighbouring countries in the Eastern and Western zones.

The Group also appreciated that recommendations made at previous missions were taken into account regarding the visible separation of the boundaries between an infected zone and a FMD free zone, with visible sign posts installed on the roads to indicate check points.

v. The detailed plan of the programme to control and eventually eradicate FMD in the country or zone

The Group noted that FMD control activities and finances were described in the dossier but could not find information on the current situation and a detailed protocol on how these activities would be implemented. Although the dossier mentioned that government funds for FMD control were doubled in the past years, the Group was concerned whether or not the funds were secured for the next years to adequately address the costs of emergency situations. Mongolia clarified that separate funds were available for emergency situations.

A timeline was provided in the main dossier and in Annexes 1 and 11 for the overall strategy with specific activities. The Group noted that Mongolia planned to apply for the recognition of the Western zone as FMD free without vaccination in 2018.

The Group acknowledged that control of animal movements between areas of different animal health status was covered under the "Procedure of control on combating animal diseases and regulation of animal movement Decree A/49, 2000, by Minister of Food and Agriculture", and described in Annexes 2 and 3. However, from the additional information provided by Mongolia, it appeared that only four border posts were in place and not located in the junctions of the different zones. Furthermore, detailed information about the numbers of animals moving between the zones was not provided despite further request. The Group was also concerned that the animal identification system was planned to be fully implemented only in 2021.

Although Mongolia described a broad timeline of the control plan, the Group recommended to have a breakdown and associated key performance indicators to monitor the progress (i.e. annually or at regular time intervals). Furthermore, as Mongolia planned to take a progressive zonal approach for FMD control, and taking into consideration that livestock farming is extensive with seasonal movements, more details should be provided on the steps to be taken to implement the measures to separate and control the subpopulations of the three different zones.

Mongolia had signed a protocol for livestock and animal products with nine countries, some of them being endemically infected by FMDV. The Group made note that the recommendations of the *Terrestrial Code* for imports should be respected.

vi. FMD surveillance

The Group noted (from Table 12 of the dossier) that the number of samples taken was higher in the Western Region than in the Central and Eastern Regions although the animal population was similar in the three Regions. The Group speculated that this was based on the locations of the FMD outbreaks. Mongolia further explained that the more recent designs of the surveys were based on the advice from various external experts.

The Group recommended that Mongolia should improve the surveillance and the design of the serological surveys by increasing the sample size and intensifying at high risk areas based on animal movement patterns. The Group also pointed out the importance of surveys in the areas where vaccination was practised to assure absence of FMDV transmission.

The Group made note that design prevalences for sero-surveillance showed an improving understanding of the FMD situation, but the focus should be more targeted and risk-based, for example on detecting infection within the vaccination zone in the East and within the Western zone at border regions where incursions had occurred. The Group acknowledged that the sero-surveillance was more balanced among the three zones in 2015 compared to previous years.

Further to the Group's request, Mongolia explained the follow-up testing and investigation procedures for the sero-positive results. However, some NSP positive findings that appeared to show evidence of clustering did not seem to have been followed up. No RT-PCR testing had been done, although this is listed as the relevant follow-up procedure.

The Group pointed out that Mongolia should not ignore the false-positive results even if they fall within the normal range of test specificity and recommended that all positive results be followed up with further testing and investigation in order to rule out FMD.

vii. Diagnostic capability and procedure

The Group mentioned that any programme or future applications should include a clear indication of the different tests and the step-by-step follow-up, including cluster analysis, to reach a final diagnosis.

The Group strongly recommended that Mongolia participate in inter-laboratory proficiency testing in the future.

viii. Vaccination

The Group noted that FMD vaccines registered in Mongolia were manufactured in India, Russia, China and France. The Group also understood that vaccines including serotype SAT2 were no longer used.

With respect to FMD vaccine quality control, the Group acknowledged that the State Laboratory for Testing and Certification of Veterinary Drugs performed tests for sterility but not immunogenicity due to a shortage of bio-secure facilities.

The Group requested additional information on the design of the serological survey to estimate population immunity; the expected minimum sample size for determining protection levels and the proportion that could be sampled. Further to the Group's request, Mongolia described the different susceptible species being vaccinated and the schedule for vaccination. Mongolia indicated that the immunity levels were not long lasting in the young animals (less than two years of age). Change of the vaccination strategy was under discussion and pilot vaccinations were underway.

ix. Emergency preparedness and response plan

The Group acknowledged that the National FMD contingency plan was adopted on 21 March 2011 by the A/31 Decree of the Minister of Food, Agriculture and Light Industry. It sets out the measures and lines of communication that have to be followed during a FMD outbreak. Whilst acknowledging the guidelines provided in Annex 10, the Group regretted that the actual contingency plan was not provided in the dossier.

x. Compliance with the questionnaire in Article 1.6.11.

The Group agreed that the dossier was generally compliant with the questionnaire in Article 1.6.11. However, the Group noted that a lot of information was presented in the annexes without clear cross-references in the main dossier which made it difficult for the Group's evaluation.

Conclusion

Considering the information submitted in the dossier and Mongolia's answers to the questions raised, the Group considered that the application was compliant with the requirements of Chapter 8.8. and with the questionnaire in Article 1.6.11 of the *Terrestrial Code*. The Group therefore recommended that Mongolia's national official control programme for FMD be proposed for endorsement.

However, the Group requested that a clear timeline be submitted before the meeting of Scientific Commission which would include some key points (such as, the animal identification, movement controls and records, vaccination, vaccination monitoring and risk-based surveillance) that clearly show what was expected to be done each year.

6. Revision of the questionnaires of the *Terrestrial Animal Health Code* Chapter 1.6. on FMD (Articles 1.6.6. and 1.6.11.)

As part of the Scientific Commission's work plan to revise all questionnaires related to official recognition of disease status, the Group also proposed modifications to the FMD questionnaires in Chapter 1.6. (Articles 1.6.6. and 1.6.11.).

The Group supported the idea to develop an on-line form for applications with designated boxes for text input to allow applicant Member Countries to comprehensively and concisely answer all questions of the questionnaire and welcomed the fact that the OIE already began using an on-line system for annual reconfirmation of Member Countries' officially recognised status and endorsed programmes.

The Group discussed the possibility of merging the questionnaires for zonal freedom with country freedom relevant to the vaccination status but finally decided to keep a separate questionnaire for each situation country/zone free with/without vaccination to ease applicant Member Countries' understanding. The Group proposed minor changes to eliminate redundancy and to improve clarity. More important changes are detailed below:

FMD FREE ZONE WHERE VACCINATION IS NOT PRACTISED

1. Introduction

Point b) Livestock industry

The Group replaced this point by Point c) of Section 5 – Surveillance: Livestock demographics and economics with few amendments. The Group also moved the descriptions of wildlife demographics and slaughterhouse that were previously under Section 5.

2. Veterinary system

Point a) Legislation

To ensure a more concise and to-the-point information, the group requested that this information be presented in the format of a table.

Point b) Veterinary Services

The Group added a reference to Chapter 1.1. on Notification of diseases, infections and infestations, and provision of epidemiological information The Group also requested that applicant Member Countries that had received a PVS mission, provide some information in their application.

Point c) and d)

The Group merged the two points and expanded the description of training and awareness programmes on FMD be also provided for the private veterinary profession.

3. FMD eradication

Point a) History

The Group clarified the questions and requested that tables and maps be provided to clarify the subquestions.

Point c) Vaccines and vaccination

The Group made a breakdown with a list of questions under i) and ii) to better guide applicant Member Countries and added two sub-questions requiring the date when the last *vaccination* was carried out and whether or not legislation prohibits *vaccination*.

Point e) Animal identification and movement control

As evidence of the effectiveness of animal identification and movement controls, the Group requested that a table describing the number, species, origin and destination of animals and their products moved between the zones in the last two years be provided.

4. FMD diagnosis

Point a)

The Group amended the question to allow applicant Member Countries to provide a better overview of the different FMD tests carried out in the country while linking the approved laboratory(ies) inside the country to those in other country(ies).

5. FMD surveillance

The Group agreed to move up Points c), d) and e) to section 1. Introduction, and only keep Points a) Clinical suspicion and b) Serological *surveillance* under this section.

Point b) Serological surveillance

The Group added that information on virological surveys, if conducted, should also be provided by applicant Member Countries.

7. Contingency planning and outbreak response programmes

Point a)

The Group added that the contingency plan be attached as an annex and if not available in the three official languages of the OIE (English, French or Spanish) that a brief summary of what is covered should be provided.

The Group requested that information on any simulation exercise(s) for FMD that was conducted in the country in the last five years be provided.

FMD FREE ZONE WHERE VACCINATION IS PRACTISED

The Group agreed that the modifications made in the questionnaire for FMD free zone where vaccination is not practised should globally apply for the questionnaire for FMD free zone where vaccination is practised. Another specific amendment related to the use of vaccination is detailed below:

3. FMD eradication

Point c) Vaccines and vaccination

Here also, the Group made a breakdown of the questions related to vaccination and population immunity to better guide applicant Member Countries.

FMD FREE COUNTRY WHERE VACCINATION IS /IS NOT PRACTISED

The Group agreed that the modifications made in the questionnaire for FMD free zones where vaccination is or is not practised should globally apply for the questionnaire for FMD free countries where vaccination is or is not practised.

COUNTRY WITH AN OIE ENDORSED OFFICIAL CONTROL PROGRAMME FOR FMD

The Group was informed of the proposal made by the *ad hoc* Group on the Evaluation of Contagious Bovine Pleuropneumonia (CBPP) Status of Member Countries to change the structure of the questionnaire for countries applying for the endorsement of their official control programme for CBPP in order to provide a template for the control programme itself. The Group supported the idea but decided to wait for the Scientific Commission's endorsement before following this new structure. The Group decided to review the questionnaire and that the modifications made in the four above-mentioned questionnaires should apply for all sections of this questionnaire as relevant. The specific amendments related to the endorsement of the official control programme are detailed below:

4. FMD laboratory diagnosis

The Group agreed that this section should precede the section on FMD surveillance.

5. FMD surveillance

Point b) an additional question requesting whether serological and virological surveys are conducted was added.

Point c) The Group further elaborated on the information to be provided with regard to the follow-up actions to be taken on suspicious and positive results.

7. Control measures and emergency response

Point c) The Group included a question on the access to antigen and vaccine banks.

8. Official control programme for FMD submitted for OIE endorsement

The Group clarified that the detailed plan and measures should be provided for at least the following five years.

Points a) and b)

The Group combined the two points on the objectives and expected status to be achieved.

Points c), d) and f)

The Group combined the three points and elaborated on the expected information related to performance indicators and how it should be incorporated and set out in a timeline.

Recovery of official endorsement of the national FMD control programme

The Group agreed to delete this section as a recovery procedure for an endorsed control programme does not exist. Indeed, it would rather be a re-application, after withdrawal of the endorsement of the control programme.

7. Review of the comments received from Member Countries on Chapter 8.8. on foot and mouth disease of the *Terrestrial Animal Health Code*

The Group reviewed the technical comments received from Member Countries as follows:

a. establishment of a FMD free compartment where vaccination is practised

Upon reviewing Member Countries' comments, the Group felt that there was a need to include provisions for a compartment where vaccination is practised given that stricter provisions for surveillance and biosecurity measures would be in place to ensure early detection of infection and absence of undetected infection. The Group highlighted that the establishment of such compartments would support bilateral trade agreements and allow access to regional/international markets. The Group drafted a specific draft article (Article 8.8.4. bis) to propose the concept of compartment free with vaccination.

b. possible revision of the containment zone concept for FMD

With regard to Article 8.8.6., the Group reiterated its position from last year with regard to some Member Countries' suggestion to revise the concept of the containment zone. The Group supported the new concept that would allow the establishment of a 'larger containment zone' in a shorter time. This 'larger containment zone' would contain within and along its perimeters a surrounding protection zone. While outbreaks may still occur within the central parts of the 'larger containment zone', only the occurrence of such outbreaks within the protection zone would lead to the withdrawal of the 'larger containment zone' and the loss of status for the rest of the country or zone. Whilst emphasising the importance of animal identification and traceability for safeguarding such a system, the Group felt that this concept was more practical than the one already existing.

c. recovery of a previously recognised FMD free status without vaccination, after 3 months and vaccination-to-live

With regard to Article 8.8.7., the Group discussed the scientific principles and the practicality of this concept without considering at this time the OIE cycle/adoption by the World Assembly for official disease status recognition. When reviewing the chapter previously, the Group had proposed recovery periods of 3 or 6 months, according to whether census or representative sero-surveillance could be completed with negative results. Strong evidence also needed to be provided on the effectiveness of the vaccine and vaccination programme that had been adopted. This viewpoint was subsequently published in the journal "Vaccine". The Code Commission had removed the Group's proposals in response to comments from Member States, some of whom wished to be able to adopt a 3 month waiting period without census sero-surveillance. Nevertheless, the Group considered that their proposals would provide a useful way forward for rapid status recovery after limited outbreaks. Larger outbreaks might be dealt with using the modified containment zone principle, as discussed above. The Group made also reference to the paper written by some members of the AHG reflecting their view on this and published in 2014: Paton DJ, Füssel AE, Vosloo W, Dekker A, De Clercq K. (2014). The use of serosurveys following emergency vaccination, to recover the status of "foot-and-mouth disease free where vaccination is not practised". Vaccine 32(52):7050-6. doi: 10.1016/j.vaccine.2014.10.064.

Further review of Article 8.8.7. was therefore proposed.

d. wildlife-livestock interface

The Group noted few editorial changes answering to a Member Country's comment in Article 8.8.22. and maintained its position to support a proposal to have a scientifically valid alternative for those countries concerned by the threat posed by infected African buffalo. The Group agreed that, where the presence of infected African buffaloes could not be excluded and to mitigate that risk, animals for exports should be kept in a quarantine station for 30 days rather than in an establishment. The Group amended the current text to improve clarity of Article 8.8.22. Point 1c. of the *Terrestrial Code*.

8. Considerations regarding different concepts of *Terrestrial Animal Health Code* Chapter 8.8. on FMD

a. <u>Impact of emergency vaccination in response to a threat (in the absence of outbreaks in an FMD free</u> country or zone without vaccination)

The Group considered the case of a FMD free country or zone without vaccination facing a threat posed by an upsurge of infection in a neighbouring country and discussed whether a protection zone with vaccination could be established to protect the rest of the country or zone before the occurrence of an outbreak.

The Group concluded that opportunity should be offered to Member Countries to establish such a protection zone while preserving freedom without vaccination for the rest of the country or zone and that this should be considered in the *Terrestrial Code*. The modalities should include the temporary suspension of the status within the protection zone until continued freedom can be shown there, in accordance with the requirements of Article 8.8.7.

b. FMD free country or zone without vaccination willing to conduct routine vaccination and revert to a status free with vaccination

The Group discussed the situation of a FMD free country or zone without vaccination facing an increased threat and deciding to introduce prophylactic vaccination before the occurrence of FMD outbreaks and to become FMD free with vaccination. The Group acknowledged the relevance of the issue but highlighted that such a country would not be able to demonstrate effectiveness of its vaccination programme immediately.

Considering that it takes time to decide, design and implement a vaccination strategy, the Group suggested requiring a 'notice period' during which details for plans for vaccination could already be provided to and evaluated by the OIE. However, the Group could not conclude whether or not an interim period without status would be necessary whilst gathering evidence of vaccination effectiveness and the duration of this period (for example 6 months).

Due to time constraints, the Group' considerations on the points above were provisional and the other points of the agenda were not discussed. More time would be needed to come up with fully worked proposals for new text within the *Terrestrial Code*.

9. Adoption of report

The Group reviewed the draft report provided by the rapporteur and agreed to circulate the draft report electronically for comments before the final adoption. Upon circulation, the Group agreed that the report captured the discussions.

.../Appendices

Appendix I

MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION OF FOOT AND MOUTH DISEASE STATUS OF MEMBER COUNTRIES Paris, 30 November-3 December 2015

Agenda

- 1. Opening and adoption of the agenda and appointment of chairperson and rapporteur
- 2. Evaluation of the information provided by a Member Country with regard to the endorsement of its national official control programme for FMD
 - Algeria
- 3. Evaluation of a request from a Member Country for the status recognition of a new FMD free zone where vaccination is not practised
 - Russia
- 4. Evaluation of requests from Member Countries for the status recognition of new FMD free zones where vaccination is practised
- 5. Evaluation of requests from Member Countries for the endorsement of official control programmes for FMD
 - Thailand
 - Mongolia
- 6. Revision of the questionnaires of the Terrestrial Animal Health Code Chapter 1.6. on FMD (Articles 1.6.6. and 1.6.11.)
- 7. Review of the comments received from Member Countries on Chapter 8.8. on foot and mouth disease of the *Terrestrial Animal Health Code*
- 8. Considerations regarding different concepts of Terrestrial Animal Health Code Chapter 8.8. on FMD
 - a. impact emergency vaccination in response to a threat (without outbreak), should have on an FMD free country or zone without vaccination
 - b. FMD free country or zone without vaccination willing to conduct routine vaccination and revert to a status free with vaccination
 - c. possible revision of the containment zone concept for FMD
 - d. establishment of an FMD free compartment where vaccination is practised
 - e. reason why vaccinated animals cannot be introduced in an FMD free country or zone without vaccination, including for direct slaughter
 - f. recovery of a previously recognised FMD free status without vaccination, after 3 months and vaccination-to-live
 - g. wildlife-livestock interface
 - h. difference in terminology of a zone between the Glossary and its application for FMD zonal status (zones differentiating sub-population of different health status)

9.	Adoption of report		

Appendix II

MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION OF FOOT AND MOUTH DISEASE STATUS OF MEMBER COUNTRIES

Paris, 30 November-3 December 2015

List of participants

MEMBERS

Dr Sergio Duffy

Centro de Estudios Cuantitativos en Sanidad Animal Facultad de Ciencias Veterinarias Universidad Nacional de Rosario (UNR) Arenales 2303 - 5 piso 1124 Ciudad Autónoma de Buenos Aires ARGENTINA sergio.duffy@yahoo.com

Dr Moritz Klemm

DG SANTE/D1 Rue Froissart 101-3/67 - B-1040 Brussels BELGIUM Tel: (32) 2 295 08 70

Tel: (32) 2 295 08 70 Fax: (32) 2 295 3144 moritz.klemm@ec.europa.eu

Dr David Paton

The Pirbright Institute
Ash Road, Woking
Surrey GU20 0NF
UNITED KINGDOM
david.paton@pirbright.ac.uk

Dr Alejandro Rivera

FMD Center/PAHO-WHO Centro Panamericano de Fiebre Aftosa Caixa Postal 589 - 20001-970 Rio de Janeiro BRAZIL

Tel: (55-21) 3661 9000 Fax: (55-21) 3661 9001 arivera@paho.org

Dr Kobedi Segale

Epidemiologist Ministry of Agriculture Private Bag 0032 Gaborone, BOTSWANA Tel: (267) 744 04187 Tel: (267) 231 90158 ksegale@gov.bw

Dr Wilna Vosloo

Research Team Leader CSIRO Livestock Industries Australian Animal Health Laboratory Private Bag 24 Geelong, VIC 3220 AUSTRALIA

Tel: (61) 3 5227 5015 Fax: (61) 3 5227 5555 wilna.vosloo@csiro.au

SCIENTIFIC COMMISSION REPRESENTATIVE

Dr Kris de Clercq

CODA/CERVA/VAR
Centre d'Etudes et de Recherches
Vétérinaires et Agrochimiques Department of Virology
Section Epizootic Diseases Groeselenberg 99 - B-1180 Ukkel
BELGIUM

Tel.: (32-2) 379.05.12 Fax: (32-2) 379.06.66 krdec@coda-cerva.be

OIE HEADQUARTERS

Dr Laure Weber-Vintzel

Officer in charge of the recognition of countries' animal disease status Scientific and Technical Department I.weber-vintzel@oie.int

Dr Min Kyung Park

Chargé de mission Scientific and Technical Department m.park@oie.int

Appendix III

Evaluation of the information provided by a Member Country with regard to the endorsement of its national official control programme for FMD

Algeria

Serological survey aimed at assessing FMDV prevalence:

The Group acknowledged that the results of the serological surveys conducted in March/April 2015 were all negative. However, no information was provided on the design of the surveys and therefore the Group could not comment on the validity of the results. The Group thought that a map indicating the regions where the surveys were performed, as well as information on the species targeted and detailed results would have been very useful for a thorough assessment.

In contrast with all these negative results in March/April 2015, the survey results for the serological survey conducted in October 2015 indicated that 250 out of 878 farms resulted as positive, 129 of them were small ruminant farms, indicating that the disease had been present in small stock, despite the absence of clinical signs. The data provided indicated a preliminary prevalence rate of 28%; the Group assumed that at least one animal was positive in each positive farm. Unfortunately, there was no information on how many positive animals were detected per farm, what the animal species and their age were and how the results were followed-up. The Group considered that this data suggested that a number of farms were infected but not clinically detected and that FMDV was still circulating in the country.

In any future communication with the OIE, the Group suggested that Algeria should describe the design of the serological surveys, as well as the detailed data, including the number of samples first tested positive that were followed-up and ruled-out.

Vaccination and vaccination coverage

The Group noted that vaccination was limited to cattle only, and small ruminants were only subject to ring vaccination. Considering that the serological survey indicated that small ruminants had also been infected, Algeria might reconsider its vaccination strategy.

Although Algeria had conducted protective immunity surveys, Algeria only presented information on vaccination coverage (number of animals vaccinated), which raised concerns of the Group due to the low vaccination coverage in the country.

Revision of the contingency plan:

The Group appreciated that Algeria provided a revised contingency plan, as well as a list of changes made since the outbreaks. The Group trusted that these changes would assist Algeria in the future to ensure outbreak control in a rapid and efficient way.

However, the Group regretted that Algeria did not provide specific timelines for implementation of some actions mentioned in the contingency plan, especially for conducting additional surveys, for the participation in interlaboratory proficiency tests and for continuous monitoring.

Conclusion

Considering the above-mentioned points, the Group could hardly reach a conclusion. The Group presumed that Algeria's recent priority had been focused on the implementation of appropriate and immediate actions to ensure successful control of FMD and that these adjustments were reflected in their contingency plan. However, the vaccination campaign focused on cattle only, while the serological survey demonstrated that small ruminants had also been infected. The timelines for actions and generally the data provided were insufficient for the Group to be confident that the authorities were fulfilling the requirements of the OIE for maintaining the endorsement of Algeria's official control programme for FMD.

While some of the experts considered that they did not have enough grounds for withdrawal and suggested to give one more year to Algeria, the majority of experts agreed that such lack of data, nine months after the last notified outbreak, demonstrated significant problems in the management and the control of the situation by the Veterinary Services, which is one of the reasons to withdraw a previous endorsement of an official control programme (Point 7 of Article 8.8.39. of the *Terrestrial Code*).

The Group finally followed the majority view and recommended the withdrawal of the endorsement of Algeria's official control programme for FMD.

Rationale for the amendments to:

Chapter 11.7. INFECTION WITH MYCOPLASMA MYCOIDES SUBSP. MYCOIDES SC (CONTAGIOUS BOVINE PLEUROPNEUMONIA) provided by the Scientific Commission

Article 11.7.1.

The Commission confirmed that for the purpose of the *Terrestrial Code*, the incubation period should be six months which was also aligned with the provision of the CBBP Chapter of the *Terrestrial Manual*.

Article 11.7.4.

Whilst agreeing that conducting an epidemiological investigation to establish that the source of an outbreak should be an essential part of the requirements for the recovery of the free status, the Commission decided to delete this requirement from the article and to refer to Articles 11.7.14. and 11.7.15. on surveillance. Points 1 and 2 of this article were also amended to clarify the different recovery processes whether or not emergency vaccination was implemented.

Article 11.7.6.

The Commission agreed with the proposal to further elaborate on the provisions for the establishment of a free compartment. The Commission also pointed out the need to include an article for the establishment of a containment zone. The Commission drafted an article for this purpose.

Article 11.7.13.

The Commission modified the text to include only the specific elements relevant for CBPP that were not already included in Chapter 1.4. of the *Terrestrial Code* on surveillance.

The Commission agreed with the *ad hoc* Group on the importance of fully characterising and sharing isolates with OIE Reference Laboratories in the event of a first introduction or reintroduction of CBPP in a country. However, the Commission considered that this requirement should rather be included as a general recommendation in the *Terrestrial Manual*. The Commission decided to seek the opinion of the Biological Standards Commission.

Article 11.7.18

The Commission commended the *ad hoc* Group for the approach used when reviewing the article for an OIE endorsed official control programme for CBPP. The Commission further amended the text to ensure consistency with other chapters.

Scientific Commission/February 2016

Original: English
October 2015

REPORT OF THE MEETING OF THE OIE *AD HOC* GROUP ON THE EVALUATION OF CONTAGIOUS BOVINE PLEUROPNEUMONIA STATUS OF MEMBER COUNTRIES

Paris, 26-29 October 2015

A meeting of the *ad hoc* Group on the evaluation of contagious bovine pleuropneumonia (CBPP) status of Member Countries (hereafter the Group) was held at the OIE Headquarters from 26 to 29 October 2015.

1. Opening

On behalf of Dr Bernard Vallat, Director General of the OIE, Dr Brian Evans, OIE Deputy Director General and Head of the Scientific and Technical Department, welcomed the Group and commended the fact that a physical meeting took place this year. He thanked the experts for their commitment towards the OIE and for their personal and professional time invested to evaluate the dossiers.

Dr Evans informed the Group about the OIE process for granting official disease status and emphasised the importance of transparency and procedural fairness. He also pointed out that submitted dossiers were considered the property of the applicant Member Country and sharing of dossiers between countries could only be done through bilateral negotiation between both countries, when requested. Nevertheless, he pointed out that a recent amendment in the Standard Operating Procedures for official recognition of disease status or risk status of bovine spongiform encephalopathy and for the endorsement of national official control programmes of Member Countries clarifies that Member Countries requested by other countries, to provide the whole or part of their dossier during the 60-day comment period prior to the General Session, should comply with the request within a maximum of 10 days.

Dr Evans reminded the Group that it should produce a detailed report in order to give clear understanding to the Scientific Commission for Animal Diseases (Scientific Commission) and to the applicant Member Countries on the procedural process and on possible information gaps or specific areas that should be addressed in the future. He also mentioned that, once endorsed by the relevant Specialist Commission, the *ad hoc* Group reports would not only be annexed to the Specialist Commission reports but also individually available on the OIE website to facilitate the access to the reports and to the rationale regarding the *Terrestrial Animal Health Code* (*Terrestrial Code*) Chapter revisions.

Dr Evans highlighted the sensitivity and confidentiality of the dossiers received for official recognition and thanked the experts for having signed the confidentiality undertakings. He also mentioned that if any member of the Group has conflict of interest in the evaluation of the dossiers (i.e. involved in consulting or working with a Member Country that has submitted an application), the expert should withdraw from the discussions and decision making of the particular application.

Dr Evans finally introduced Dr Maria Luisa Danzetta, who joined the Scientific and Technical Department to work on the activities related to official disease status recognition.

2. Adoption of the agenda and appointment of chairperson and rapporteur

The Group was chaired by Dr François Thiaucourt. Dr William Amanfu acted as rapporteur, with the support of the OIE Secretariat. The Group endorsed the proposed agenda and suggested the addition of one item.

The final agenda and the list of participants are presented as Appendices I and II, respectively.

3. Evaluation of requests from Member Countries for CBPP free status

3.1. New Caledonia

In October 2015, New Caledonia submitted a dossier to the OIE seeking the recognition of CBPP free country status based on historical grounds. The Group agreed that the submission conformed to the guidelines provided to Member Countries wishing to make a formal evaluation of their disease status according to the requirements of the *Terrestrial Code*. The Group requested additional information and received clarifications from New Caledonia.

a) Animal disease reporting

The Group noted that CBPP was declared a notifiable disease in New Caledonia, under relevant legislation, since 2005 and considered that New Caledonia had a record of regular and prompt animal disease reporting having regularly submitted the requested reports to the OIE.

b) Veterinary Services

The Group agreed that the Veterinary Services had current knowledge of and authority over, all the livestock population in the country. The Group also appreciated that a strong network between public and private veterinarians was implemented to manage surveillance activities both on the farms and at the slaughterhouses. The Group concluded that the Veterinary Services had the capability to prevent and control CBPP.

c) Situation of CBPP in the past 24 months

The Group noted that CBPP has never been reported in the country. To substantiate the absence of the disease in the whole territory, investigation of outbreaks of mortality in bovines, the presence of an extensive veterinary network and abattoir inspection of carcasses have been implemented as part of its surveillance activities.

d) Absence of vaccination and entry of vaccinated animals

The Group acknowledged that CBPP vaccination was prohibited and had never been conducted in New Caledonia.

e) Surveillance

The Group agreed that New Caledonia complied with the requirements of a historically free country as defined in Article 1.4.6. of the *Terrestrial Code* and concluded that the surveillance described in the dossier was adequate and appropriate, given the epidemiological situation. In 1984, serological surveillance for CBPP was carried out in slaughterhouses with negative results. No active surveillance for CBPP has been in operation since then but the absence of the disease has been demonstrated by the investigation of mortality in bovines, the presence of an extensive veterinary network and abattoir inspection.

f) Regulatory measures for the early detection, prevention and control

The Group considered that the information provided in the dossier gave enough evidence to demonstrate that an early detection system and measures to prevent the introduction of CBPP have been in operation in New Caledonia for the past ten years as required by the *Terrestrial Code*. The

Group agreed that prevention of CBPP introduction in the country was based on reinforced controls at borders with implementation of strict controls on imports, quarantine and laboratory testing. The Group acknowledged that the importation of cattle and of genetic material was permitted only from CBPP free countries and that systematic controls at slaughterhouses within the country were under the supervision of the Veterinary Services.

Finally the Group considered that regulatory measures to be applied in case of incursion of CBPP were covered under a contingency plan for contagious foreign animal diseases, even though there was no specific contingency plan for CBPP.

g) Compliance with the questionnaire in Article 1.6.7.

The Group agreed that the submitted dossier was compliant with the format of the questionnaire in Article 1.6.7.

h) Conclusions

Considering the information submitted in the dossier and the country's answers to the questions raised, the Group concluded that the application was compliant with the requirements of Chapter 11.7. and with the questionnaire in Article 1.6.7. of the *Terrestrial Code*. The Group therefore recommended that New Caledonia be recognised as a CBPP free country.

Recommendations to New Caledonia

The Group recalled the existence of molecular diagnostic techniques to detect CBPP etiological agent in case of incursion in the country and encouraged New Caledonia to be ready to rapidly get those diagnostic tools in order to be able to detect by PCR the etiological agent within the country in a reasonable frame time, if needed.

The Group acknowledged and congratulated New Caledonia for the strategy of financing private veterinarians for their activities in the field to implement surveillance activities.

3.2. Mexico

In October 2015, Mexico submitted a dossier to the OIE seeking the recognition of CBPP free country status based on historical grounds. The Group agreed that the submission conformed to the guidelines provided to Member Countries wishing to make a formal evaluation of their disease status according to the requirements of the *Terrestrial Code*. The Group requested additional information and received clarification from Mexico.

a) Animal disease reporting

The Group noted that CBPP was declared a notifiable disease in Mexico under relevant legislation in 1994 and considered that Mexico had a record of regular and prompt animal disease reporting having regularly submitted the requested reports to the OIE.

b) Veterinary Services

The Group agreed that the Veterinary Services had current knowledge of and authority over, all the livestock population in the country. The Group also concluded that the Veterinary Services had the capability to prevent and control CBPP.

c) Situation of CBPP in the past 24 months

The Group acknowledged that the CBPP has never been detected in the country and reported to the OIF

d) Absence of vaccination and entry of vaccinated animals

The Group noted that vaccination against CBPP has never been carried out in Mexico.

e) Surveillance

The Group acknowledged that CBPP has been included in the list of exotic diseases established by Mexico (annex 13 of Mexico's dossier) and also the existence of the "Mexico-United States Commission for Prevention of Foot and Mouth Disease and Other Exotic Animal Diseases" ratified with an agreement in 1988. This Commission was responsible for surveillance, prevention, control and/or eradication of exotic diseases and was promoting timely reporting, diagnosis and investigation on suspected cases of exotic diseases. It was also conducting training of veterinarians, animal health workers, technicians and other practitioners, on animal health contingency plans and programmes.

The Group also noted that the Ministry of Health was responsible for surveillance in municipal slaughterhouses and that when a suspected case of bovine respiratory disease or bovine tuberculosis was encountered it was notified immediately. Suspicions were registered and monitored and the presence of exotic or endemic diseases that might have occurred in any state, zone, region or compartment of Mexico was investigated.

The Group determined that passive surveillance on respiratory diseases, including CBPP, was carried out in Mexico for the past ten years in compliance with Article 1.4.6 of the *Terrestrial Code*. The Group noted that suspected respiratory lesions at slaughterhouses were investigated with CBPP negative results.

f) Regulatory measures for the early detection, prevention and control

The Group also noted that the personnel responsible for carrying out inspections on imported farm products and for movement across Mexico was a team of veterinarians, animal technologists, agronomists and bio-medically engineers.

The Group considered that the information provided in the dossier gave enough evidence to demonstrate that an early detection system and measures to prevent the introduction of CBPP have been in operation in Mexico for the past ten years as required by Article 1.4.6. of the *Terrestrial Code*.

g) Compliance with the questionnaire in Article 1.6.7.

The Group agreed that the submitted dossier was compliant with the format of the questionnaire in Article 1.6.7.

Conclusions

Considering the information included in the dossier and Mexico's answers to the questions raised, the Group concluded that the application was compliant with the requirements of Chapter 11.7. and with the questionnaire in Article 1.6.7. of the *Terrestrial Code*. The Group therefore recommended that Mexico be recognised as a CBPP free country.

3.3. Swaziland

In October 2015, Swaziland submitted a dossier to the OIE seeking CBPP free country status. The Group agreed that the submission conformed to the guidelines provided to Member Countries wishing to make a formal evaluation of their disease status according to the requirements of the *Terrestrial Code*.

The Group recognised the work done by Swaziland in preparing the dossier and the good quality of the report.

a) Animal disease reporting

The Group acknowledged that Swaziland had a record of regular and prompt animal disease reporting having regularly submitted the requested reports to the OIE. The Group also noted that CBPP has been notifiable in Swaziland since early 1930s when disease control regulations were first legislated.

b) Veterinary Services

The Group agreed that the Veterinary Services had current knowledge of and authority over, all the livestock population in the country. The Group also concluded that the Veterinary Services had the capability to prevent and control CBPP.

c) Situation of CBPP in the past 24 months

The Group noted that CBPP has never been reported to the OIE and considered that Swaziland complied with the requirements of a historically free country. In addition the Group noted that Swaziland's neighbours have not reported any cases of CBPP for over 50 years.

d) Absence of vaccination and entry of vaccinated animals

The Group acknowledged that CBPP vaccination was prohibited and had never been conducted in Swaziland.

e) Surveillance

The Group noted that Swaziland had in place an effective general and passive surveillance programme on animal infectious diseases that was supported by relevant legislation. The Group considered that the National Veterinary Services conducted every year a risk-based targeted serological surveillance in the area considered at higher risk for CBPP (borders with a neighbouring country). In 2015, 286 cattle were sampled from ten diptanks and tested for CBPP at the Onderstepoort Veterinary Institute in South Africa, with negative results.

f) Regulatory measures for the early detection, prevention and control

The Group determined that in Swaziland all the regulatory measures for the early detection, prevention and control of CBPP have been implemented and provide adequate guarantees that potential CBPP cases would be promptly detected and controlled.

g) Compliance with the questionnaire in Article 1.6.7.

The Group agreed that the submitted dossier was compliant with the format of the questionnaire in Article 1.6.7.

Conclusions

Considering the information submitted in the dossier and the answers to the questions raised, the Group concluded that the application was compliant with the requirements of Chapter 11.7. and with the questionnaire in Article 1.6.7. of the *Terrestrial Code*. The Group therefore recommended that Swaziland be recognised as a CBPP free country.

3.4. Other Member Country request

The Group assessed one additional request from a Member Country for the recognition of CBPP free country status based on historical grounds. The Group concluded that the Member Country did not meet the requirements of the *Terrestrial Code* and the dossier was referred back to the corresponding Member Country. In particular the Group noted that the application was not compliant with the provisions of Chapter 1.4.6 of the *Terrestrial Code*.

4. Evaluation of a request from a Member Country for official recognition of new CBPP free zone

4.1. Namibia

In September 2015, Namibia submitted a dossier to the OIE seeking CBPP free zonal status. The proposed CBPP free zone is separated from the infected neighbouring country by a protection zone and from the protection zone by the Veterinary Cordon Fence (VCF), also used for foot and mouth disease (FMD) and peste des petits ruminants (PPR) control. The Group was informed that the proposed CBPP

free zone was already recognised by the OIE as free from FMD and PPR. The Group agreed that the submission conformed to the guidelines provided to Member Countries wishing to make a formal evaluation of their disease status according to the requirements of the *Terrestrial Code*.

The Group also recalled that during the 83rd General Session in May 2015 Namibia was included in the official list of Member Countries with an endorsed official control programme for CBPP.

The Group recognised the work done by Namibia in preparing the dossier and the good quality of the report.

a) Animal disease reporting

The Group considered that Namibia had a record of regular and prompt animal disease reporting to the OIE having regularly submitted the requested reports to the OIE. The Group acknowledged that CBPP was a notifiable disease as supported by specific legislation provided in the annexes of Namibia's dossier.

b) Veterinary Services

The Group agreed that the Veterinary Services had current knowledge of and authority over, all the livestock population in the country. The Group, taking into account the information provided in the dossier, concluded that the Veterinary Services had the capability to prevent and control CBPP.

c) Situation of CBPP in the past 24 months

The Group acknowledged that CBPP was eradicated from the proposed CBPP free zone in 1919. CBPP has occurred sporadically since then but only in the protection zone above the Veterinary Cordon Fence.

d) Absence of vaccination and entry of vaccinated animals

The Group noted that CBPP vaccination was prohibited and had never been conducted in the proposed zone.

e) Surveillance

The Group acknowledged that in Namibia active and passive surveillance were both in place. The Group determined that the surveillance conducted in Namibia complied with the provisions of the *Terrestrial Code* and was appropriate to the epidemiological situation. The Group also noted that the Veterinary Cordon Fence separated the CBPP free area from the CBPP protection/control zone where mass vaccination was applied.

f) Regulatory measures for the early detection, prevention and control

The Group noted that prevention and control measures related to CBPP were reinforced according to the recommendations of an OIE expert mission to southern African countries, in October 2013.

The Group acknowledged that a CBPP Contingency Plan and the Integrated Disease Surveillance Manual provided detailed step-by-step guidelines and response plans for dealing with suspect cases and confirmed outbreaks in the proposed CBPP free zone, should CBPP occur. The Group agreed that the animal health strategies adopted by Namibian Veterinary Services clearly has demonstrated to be successful to prevent the introduction of CBPP in the proposed free zone, southern the Veterinary Cordon Fence. The Group concluded that regulatory measures for the early detection, prevention and control of CBPP were in compliance with the OIE standards.

g) Compliance with the questionnaire in Article 1.6.7.

The Group agreed that the submitted dossier was compliant with the format of the questionnaire in Article 1.6.7.

Conclusions

Considering the information submitted in the dossier, the Group concluded that the application was compliant with the requirements of Chapter 11.7. and with the questionnaire in Article 1.6.7. of the *Terrestrial Code*. The Group therefore recommended that the zone south to the Veterinary Cordon Fence of Namibia be recognised as CBPP free.

5. Revision of Chapter 11.7. of the *Terrestrial Animal Health Code* on the infection with *Mycoplasma mycoides* subsp. *mycoides* SC (Contagious bovine pleuropneumonia)

The Group revised the chapter on CBPP of the *Terrestrial Code*. A different numbering of several articles of the chapter was proposed as a consequence of the revision. The chapter was amended as follows:

Article 11.7.1.: General provisions

The Group amended the sentence on the duration of incubation period to harmonise the chapter of the Terrestrial Code with the chapter of the *Manual of Diagnostic Tests and Vaccines for Terrestrial Animals (Terrestrial Manual)* on CBPP.

The Group updated the current name of the CBPP etiological agent with the current scientifically approved taxonomy. According to the new taxonomy *Mycoplasma mycoides* subsp. *mycoides* Small Colony (SC) was modified as *Mycoplasma mycoides* subsp. *Mycoides* throughout Chapter 11.7 and the questionnaires (Articles 1.6.7. and 1.6.13). The scientific literature reported in the footnote was used for reference by the Group¹.

The Group suggested to add the term "specific" after the term "antibodies" in order to be clear with respect to those antibodies produced specifically against *Mycoplasma mycoides* subsp. *mycoides* and not to those antibodies produced in response to other pathogens responsible of cross reaction responses.

Finally the Group amended the numbering of the article for ease of reference.

Article 11.7.3.: CBPP free country or zone

The Group changed the term "supply" into "provide" for clarity and amended the numbering of the article for ease of reference.

Article 11.7.4.: Recovery of free status.

The Group highlighted the need of an epidemiological investigation as an essential step to plan a strategy for the recovery of the official status after the occurrence of an outbreak.

The Group proposed to change the terms "stamping-out policy" into "slaughter" as the meat of animals infected with CBPP agent is usually not condemned and can enter the food chain.

Finally, the Group suggested adding a paragraph to limit the use of the faster recovery procedure within 24 months after suspension, for consistency with the FMD chapter of the *Terrestrial Code*.

Article 11.7.6.: CBPP free compartment

For consistency with other chapters of the *Terrestrial Code* and in order to meet the requests from some countries, compartmentalisation has been considered by the Group as a concrete option for certain countries, which may not be able to implement a zoning approach. The Group discussed on the conditions that should be met for the establishment of a CBPP free compartment and agreed to improve Article 11.7.6. using as model the correspondent FMD article of the *Terrestrial Code*, adapted to CBPP epidemiology.

_

¹ "Mycoplasma leachii sp. nov. as a new species designation for Mycoplasma sp. bovine group 7 of Leach, and reclassification of Mycoplasma mycoides subsp. mycoides LC as a serovar of Mycoplasma mycoides subsp. capri". Manso-Silván L, Vilei EM, Sachse K, Djordjevic SP, Thiaucourt F, Frey J. Int J Syst Evol Microbiol. 2009 Jun;59 (Pt 6):1353-8. doi: 10.1099/ijs.0.005546-0.

Article 11.7.10.: Recommendations for importation from CBPP infected countries - for bovine semen and Article 11.7.12.: Recommendations for importation from CBPP infected countries - for *in vivo* derived or *in vitro* produced embryos or oocytes of domestic bovids and water buffaloes

The Group suggested modifying the reference to "the complement fixation test" with a more generic "prescribed serological test" to allow countries to choose the prescribed serological test most adapted to their specific situation.

The Group deleted the specification requiring that the establishment "was not situated in a CBPP infected zone", considering that this situation was covered by Article 11.7.11. (Recommendations for importation from CBPP free countries or zones, or from CBPP free compartments). Finally, the Group considered that to guarantee the absence of the CBPP pathogen in the bovine semen collected for exportation from an infected country, the use of serology only was not enough and required an analysis of the semen in addition. The scientific literature reported in the footnote was used for reference by the Group².

Article 11.7.13.: Introduction to surveillance

The Group amended the articles related to surveillance based on the current FMD chapter of the *Terrestrial Code* and followed the same approach while taking into consideration the specificities of CBPP. The Group agreed that the role of qualified national, or other, laboratory (ies), able to undertake the identification of CBPP infection should be emphasised; in particular with reference to the collection and the shipment of samples in countries wishing to substantiate CBPP freedom or in which the disease has been detected for the first time or re-introduced.

The Group was aware of the wide use of antibiotics to treat CBPP infected animals in the field. With regard to OIE policy in terms of anti-microbial resistance, the Group discussed the relevance of mentioning this strategy for CBPP control and whether the *Terrestrial Code* should specify surveillance provisions to investigate antibiotic resistance in isolated *Mycoplasma mycoides subsp. Mycoides* strains. The Group finally agreed to mention a "treatment" in the questionnaire Article 1.6.13. without entering into too much details.

Articles 11.7.16. and 11.7.17.

The Group agreed, for harmonisation and simplification purposes, to delete both articles and integrate their provisions in the newly amended articles related to surveillance.

Article 11.7.18. OIE endorsed official control programme for CBPP

The Group, for consistency with the recently approved FMD chapter of the Terrestrial Code, agreed to move the article on the endorsed control programme on CBPP above the articles on surveillance. The Group had a lengthy discussion on the logical frame of the article provisions and agreed that the current structure presented weak points. The Group adopted a different approach by which countries would have to provide their control programme. The questionnaire (Article 1.6.13.) was also amended (cf Section 6 of this report).

6. Revision of the questionnaires of the Terrestrial Code Chapter 1.6. on CBPP (Articles 1.6.7. and 1.6.13.)

The Group agreed to use *Mycoplasma mycoides* subsp. *mycoides* to replace the previously used *Mycoplasma mycoides* subsp. *mycoides* SC throughout the questionnaires as relevant, to keep it in line with the above proposed modification to the CBPP chapter.

The Group discussed the revisions of the questionnaire in Articles 1.6.7. and 1.6.13. as follows:

_

² "Mycoplasma mycoides subsp. mycoides SC identification by PCR in sperm of seminal vesiculitis-affected bulls". Giuseppe Stradaioli, Lakamy Sylla, Francesco Mazzarelli, Riccardo Zelli, Veterinary Research, BioMed Central, 1999, 30 (5), pp.457-466.

Article 1.6.7.: Questionnaires on contagious bovine pleuropneumonia (CBPP). CBPP FREE COUNTRY

1. Introduction

Point b) Livestock industry. The Group agreed that Member Countries should provide a map on the livestock density, when available. The Group considered that a map could clarify, and better identify, the distribution of livestock population and possible pathways of disease transmission.

2. Veterinary System

Point b) Veterinary Services. The Group noted that a reference to Chapter 1.1. of the *Terrestrial Code* was missing and added it.

Point e) Role of private veterinary profession. The Group emphasised the importance of the public-private partnership in CBPP surveillance and modified the point accordingly.

The Group also added a new point to section 2 of the questionnaire to request Member Countries to provide information on any OIE PVS mission, and related follow-up, if performed in their country.

3. CBPP eradication

Point b) Strategy. The Group agreed to delete the terms "stamping out" and replace it with "slaughter policy" as the meat of animals infected with CBPP agent is usually not condemned and can enter the food chain.

Point c) Vaccine and vaccination. The Group suggested collecting more information on the type of vaccines used and strategies implemented by applicant Member Countries.

Point e) Animal identification and movement control. The Group recalled that illegal movements of animals represents a major risk for the spread of CBPP and agreed to add a sentence asking Member Countries to describe the actions taken when illegal movements occur.

4. CBPP diagnosis

Chapter 1.1.1. and 1.1.4. of the *Terrestrial Manual* have been added into the first paragraph. The Group agreed that the provisions of Chapter 1.1.1., referring to the submission and storage of diagnostic specimens should be addressed by Member Countries in the questionnaire, to provide information and knowledge on countries management of samples after their collection. The provisions of Chapter 1.1.4., referring to the quality management in veterinary laboratories, should be addressed to demonstrate the accuracy of the laboratory results.

5. CBPP surveillance

Point f). The Group considered that a map on slaughterhouses and markets could clarify, and better identify, possible pathways of disease transmission.

Point g). The Group deleted the reference to the strain identification considering that according to the Group's experience, it was difficult or not always possible to have information on which strains circulated in most of the countries.

6. CBPP prevention

Point b). Import control procedures. The Group deleted the terms "or isolation period" duplicating the reference to quarantine measure. A sentence was added at the end of the paragraph, to have effective information on the traceability system that the country has in place.

Point b) ii). The Group replaced "veterinary medical products" with "Mycoplasma mycoides subsp. Mycoides strains including vaccines" as veterinary medical products do not represent a risk for CBPP.

7. Control measures and contingency planning

Point c) iv). The Group deleted the phrase "including any restrictions or restocking" and treated this aspect separately. The Group considered that the term "restocking" already includes the notion of restriction.

Point b) v). The Group improved the paragraph to make clear that there were other forms of compensation in addition to the financial one.

8. Compliance with the Terrestrial Code

The Group suggested modifying the paragraph adding, for consistency with Article 11.7.3., the three statements to be reported in the declaration of the Delegate of the Member Country to demonstrate compliance with the *Terrestrial Code*.

9. Recovery of status

The Group agreed to add point 5.a) related to surveillance, to the list of detailed information that should be provided by a Member Country seeking the recovery of status.

Article 1.6.7.: Questionnaires on contagious bovine pleuropneumonia (CBPP). CBPP FREE ZONE

The Group applied the same modifications of the questionnaire for a CBPP free country to the questionnaire for a CBPP free zone. In addition the Group also specified, where relevant, the provision applicable to a proposed free zone.

Article 1.6.13.: Questionnaire on endorsement of official control programme for contagious bovine pleuropneumonia (CBPP)

The Group, considering the relevant amendments proposed for Chapter 11.7., agreed to follow and apply the same approach to set up the questionnaire on endorsement of official control programme for CBPP.

In addition, the Group improved the structure of the questionnaire and clarified that Member Countries should provide evidence that each provision of the chapter on CBPP has been dealt with. Particularly the Group specified that Member Countries should first comply with specific prerequisites and then address the different sections of the control programme following the proposed logic sequence. The Group suggested that Member Countries be concise in preparing the control plan and be ready to support their statement with annexes, where relevant.

7. Summary of the fifth meeting of the FAO-OIE-AU/IBAR-IAEA consultative group on CBPP, 14-16 October, 2015, Rome

Dr Domenech informed the Group on the outcomes of the fifth meeting of the FAO-OIE-AU/IBAR-IAEA consultative group on CBPP, held in Rome from 14 to 16 October 2015 that was attended by four of the Group experts. The general scope of the meeting included: a description of the global status of CBPP, vaccines, diagnostic tests and CBPP eradication strategies worldwide. The consultative group regretted that after the eradication of rinderpest, which control was combined with CBPP control, CBPP started spreading again. The lack of political commitment of governments, regions, international bodies and funding partners was one of the main weaknesses to be addressed to control CBPP, mainly in African countries.

The consultative group had a lengthy discussion on the existing tools such as vaccination and diagnostic tests. They are considered to be sufficiently effective to control CBPP if implemented appropriately. Nevertheless some of them should be improved in order to eliminate CBPP. More pilot studies should be undertaken as proof of concept to demonstrate that CBPP can be controlled by combination of effective delivery systems of animal health interventions particularly vaccination and surveillance activities (as part of strengthening Veterinary Services). National public Veterinary Services should be responsible for the policy and overall strategy while implementation (or operationalisation) should involve the private sector, local authorities and Non-Governmental Organisations.

The group discussed extensively the use of antibiotics (as alternative to stamping out which was not feasible in many places) but could not reach a consensus regarding a recommendation either to continue to forbid its use or to recognize that, being widely used in the field, the use of antibiotics should be better controlled.

The consultative group agreed that there was a tremendous amount of research on-going notably to improve and develop new tools (vaccines and diagnostics) and socio-economic impact assessment but that there was also an urgent need to validate new tools to incorporate them into updated and more cost-effective strategies.

The conclusion of the meeting on the development of a CBPP global eradication strategy was that a continental (Africa) or a global eradication strategy was not a feasible objective yet and that therefore such a strategy cannot be considered³.

8. Finalisation and adoption of the report

The Group agreed that the report would be circulated for finalisation.

.../Appendices

_

Recommendation and agenda: Contagious bovine pleuropneumonia (CBPP) Fifth consultative group meeting: http://www.fao.org/ag/againfo/programmes/en/empres/documents/agenda_CBPP_Italy_2015.pdf

Appendix I

MEETING OF THE OIE *AD HOC* GROUP ON THE EVALUATION OF CONTAGIOUS BOVINE PLEUROPNEUMONIA STATUS OF MEMBER COUNTRIES Paris, 26–29 October 2015

Agenda

- 1. Opening
- 2. Adoption of the agenda and appointment of chairperson and rapporteur
- 3. Evaluation of applications from Member Countries for official recognition of CBPP free status
- 4. Evaluation of a request from a Member Country for official recognition of new CBPP free zone
- 5. Revision of Chapter 11.7. of the *Terrestrial Animal Health Code* on the infection with *Mycoplasma mycoides* subsp. *mycoides* SC (Contagious bovine pleuropneumonia)
- 6. Revision of the questionnaires of the Terrestrial Code Chapter 1.6. on CBPP (Articles 1.6.7. and 1.6.13.)
- 7. Summary of the fifth meeting of the FAO-OIE-AU/IBAR-IAEA consultative group on CBPP, 14-16 October, 2015, Rome
- 8. Finalisation and adoption of the draft report

Appendix II

MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION OF CONTAGIOUS BOVINE PLEUROPNEUMONIA STATUS OF MEMBER COUNTRIES Paris, 26-29 October 2015

List of participants

MEMBERS

Dr William Amanfu P. O. Box AC 201 Arts Center Accra

GHANA Tel: (233)-243983060 willamanfu74@yahoo.com

Dr Joseph Domenech

La Fabreguerie 12170 Ledergues. **FRANCE** Tel: (33) 565462506 j.domenech@oie.int

Dr Mamadou Niang

Deputy Director & Research Director, Laboratoire Central vétérinaire

BP: 2295 Bamako MALI

Tel: (+223)20243344 / 66714604

Fax: (+223)20249809 mniangm@yahoo.fr

Dr Flavio Sacchini

Istituto Zooprofilattico Sperimentale dell'Abruzzo e del Molise "G. Caporale" Via Campo Boario, 64100 Teramo **ITALY**

Tel: (39 0861) 33 24 32 Fax (39 0861) 33 22 51 f.sacchini@izs.it

Dr François Thiaucourt

UMR15 CIRAD-INRA

Control of exotic and emerging animal diseases

Campus International de Baillarguet, TA A-

15/G

34398 Montpellier cedex 5

FRANCE

Tel: (33) 4 67.59.37.24 Fax: (33) 4 67.59.37.98 francois.thiaucourt@cirad.fr

SCIENTIFIC COMMISSION REPRESENTATIVE

Dr Baptiste Dungu

26 Dalrymple Crescent Edinburgh EH9 2NX

Scotland

UNITED KINGDOM Tel.: +212 523 30 31 32 Fax: +212 523 30 21 30 Fax: (49-38351) 7-151

b.dungu@mci-santeanimale.com

OIE HEADQUARTERS

Dr Bernard Vallat

Director General 12 rue de Prony 75017 Paris **FRANCE** Tel: 33 - (0)1 44 15 18 88

Fax: 33 - (0)1 42 67 09 87

oie@oie.int

Dr Brian Evans

Deputy Director General Head of Scientific and Technical Department

b.evans@oie.int

Dr Simona Forcella

Chargée de mission Scientific and Technical Department s.forcella@oie.int

Dr Maria Luisa Danzetta

Chargée de mission Scientific and Technical Department m.danzetta@oie.int

Dr Laure Weber-Vintzel

Officer in charge of the recognition of disease status Scientific and Technical Department I.weber-vintzel@oie.int

Original: English November 2015

MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION OF CLASSICAL SWINE FEVER STATUS OF MEMBER COUNTRIES

Paris, 3 – 5 **November 2015**

A meeting of the OIE *ad hoc* Group on the Evaluation of Classical Swine Fever (CSF) Status of Member Countries (hereafter the Group) was held at the OIE Headquarters from 3 to 5 November 2015.

1. Opening

On behalf of Dr Bernard Vallat, Director General of the OIE, Dr Brian Evans, the OIE Deputy Director General and Head of Scientific and Technical Department, welcomed the experts of the Group.

Dr Evans updated the Group with the recent elections of the OIE Specialist Commissions and the updated composition of the OIE Council. He mentioned the plan to strengthen coordination between the Specialist Commissions and the Council to better respond to Member Countries' request. He also highlighted the importance of the scientific credibility and the integrity of the official disease status recognition procedures and emphasised the value of a detailed report of the evaluations as it was the main channel to communicate the rationale to the Scientific Commission for Animal Diseases (Scientific Commission) and to Member Countries, especially on possible information gaps or specific areas that should be addressed in the future.

Dr Evans mentioned the importance of transparency and procedural fairness. He reminded the Group that submitted dossiers were considered the property of the applicant Member Country and sharing of dossiers between countries could be done, when requested, through bilateral negotiation between both countries. Nevertheless, he pointed out that a recent amendment in the Standard Operating Procedures for official recognition of disease status or risk status of bovine spongiform encephalopathy and for the endorsement of national official control programmes of Member Countries clarifies that Member Countries requested to provide the whole or part of its dossier during the 60-day comment period prior to the General Session should comply with the request within maximum of 10 days.

Dr Min-Kyung Park, Chargée de mission, introduced Dr Maria Luisa Danzetta, who recently joined the Scientific and Technical Department to work on the activities related to official disease status recognition.

2. Adoption of the agenda and appointment of chairperson and rapporteur

The Group was chaired by Dr Trevor Drew. Dr John Pasick acted as rapporteur, with the support of the OIE Secretariat. The Group endorsed the proposed agenda.

The agenda and list of participants are presented as Appendices I and II, respectively.

3. Evaluation of a request from Member Countries for the status recognition of a CSF free status

1) Czech Republic

The Group noted that Czech Republic is part of the European Union (EU) and as such, subject to its legislation.

The Group requested additional information and received clarification from Czech Republic.

i. Animal disease reporting

The Group considered that Czech Republic had a record of regular and prompt animal disease reporting and acknowledged that CSF was a notifiable disease in the country.

The Group acknowledged that an ongoing awareness programme for veterinary services' personnel was in place to encourage reporting of all cases suggestive of CSF. The Group noted that veterinarians, veterinary supporting personnel and staffs of the Central Veterinary Administration and the State Veterinary Administration (SVA) were given routine trainings.

Further to the Group's request, Czech Republic further substantiated the extensive training and awareness programmes given to different sectors of pig production systems, including farmers, hunters and meat inspectors. Within the SVA, specific meetings and simulation exercises were organised for meat inspectors and official veterinarians of the Regional Veterinary Administrations. Furthermore, SVA provided laws concerning actions to be taken at the farm level and at the slaughterhouses in the case of suspicion.

ii. Veterinary Services

The Group agreed that the Veterinary Services had current knowledge of, and authority over, all domestic and captive wild pig herds in the country and had current knowledge about the population and habitat of wild and feral pigs in the country.

iii. Situation of CSF in the past 12 months

The Group noted that the last outbreak in domestic pigs was confirmed in 1997 and the last virological finding in wild boar was in 1999. The Group acknowledged that no outbreak of CSF in domestic and captive wild pigs occurred during the past 12 months.

iv. Absence of vaccination in the past 12 months

The Group took note that vaccination was prohibited since 1992.

v. Surveillance for CSF and CSFV infection in accordance with Articles 15.2.26. to 15.2.32.

The Group noted that domestic and wild boar were subjected to active and passive surveillance. No positive results were reported since 2012 from the serological surveillance conducted for wild pigs.

Further to the Group's request, Czech Republic provided additional information on the tests used and the procedures used to discard the false-positive serological results; both virological (virus isolation, real-time RT-PCR, RT-PCR, antigen ELISA) and serological (antibody ELISA, virus neutralisation tests (neutralising peroxidase-linked assay (NPLA)) tests were used. Czech Republic clarified that all the tests and procedures were in accordance with the European Commission Decision 2002/106/EC and that suspicious samples were tested with differential neutralisation tests against other pestiviruses such as Bovine viral diarrhoea (BVDV) and Border disease virus (BDV) strains simultaneously in order to detect and to interpret cross reactions.

The Group concluded from further information provided that appropriate tests were in place to follow-up and discard false-positive results on the ELISA screening test.

vi. Regulatory measures for the early detection, prevention and control of CSF

The Group acknowledged that import control procedures for animals, animal products and veterinary medicinal products were in accordance with EU legislation (Commission Regulation No. 206/2010) and with the requirements of the *Terrestrial Code*.

vii. Consideration of wild and feral pigs, if present, in the surveillance programme and biosecurity measure of domestic and captive wild herds

The Group took note of the estimated population of wild boar and the number of heads hunted that was presented in the dossier. The Group also noted that there were only closed pig holdings in Czech Republic and that contact with wild pigs was prevented by fencing the holdings.

viii. Compliance with the questionnaire in Article 1.6.10.

The Group agreed that the submitted dossier was compliant with the format of the questionnaire in Article 1.6.10.

Conclusion

Considering the information submitted in the dossier and Czech Republic's answers to the questions raised, the Group considered that the application was compliant with the requirements of Chapter 15.2. and with the questionnaire in Article 1.6.10. of the *Terrestrial Code*. The Group therefore recommended that Czech Republic be recognised as a CSF free country.

2) Denmark

The Group acknowledged that Denmark's application only covered the mainland and did not include the non-contiguous territories, namely Faroe Islands and Greenland.

The Group noted that Denmark is part of the EU and as such, subject to its legislation.

The Group requested additional information and received clarification from Denmark.

i. Animal disease reporting

The Group considered that Denmark had a record of regular and prompt animal disease reporting and acknowledged that CSF was a notifiable disease in the country. The dossier confirmed that all pigs showing clinical signs suggestive of CSF were subjected to appropriate investigations and that an ongoing awareness programme was in place to encourage reporting of all cases suggestive of CSF.

ii. Veterinary Services

The Group agreed that the Veterinary Services had current knowledge of, and authority over, all domestic and captive wild pig herds in the country and had current knowledge about the population and habitat of wild and feral pigs in the country.

iii. Situation of CSF in the past 12 months

The Group noted that the last outbreak in Denmark was in 1933. Therefore, Denmark was eligible for historical freedom from CSF as described in Article 1.4.6. of the *Terrestrial Code*.

iv. Absence of vaccination in the past 12 months

The Group noted that CSF vaccination was prohibited and had never been conducted in Denmark.

v. Surveillance for CSF and CSFV infection in accordance with Articles 15.2.26. to 15.2.32.

The Group acknowledged from the dossier that serological testing was performed as part of the surveillance activities. In case any wild boars or feral pigs were found dead or shot in Denmark, they were serologically tested for CSF and African swine fever (ASF). Further to the Group's request, Denmark clarified that all non-negative results from serological screening were followed up by a virus neutralisation test against CSF. In case of a non-negative result from the virus

neutralisation test, a differentiating pestivirus neutralisation test (including classical swine fever virus, BVDV and BDV) was performed for clarification of the reaction. If the result of this differentiating neutralisation test was negative the sample was regarded as negative. Otherwise clinical inspection in the herd was performed and samples were collected for additional testing.

The Group was satisfied with the additional information submitted by Denmark on the number of positive reactions on the screening test and the follow-up testing and investigation to discard false-positive results.

The Group agreed that Denmark complied with the requirements of a historically free country as defined in Article 1.4.6. of the *Terrestrial Code* and concluded that the surveillance described in the dossier was adequate and appropriate to the epidemiological situation.

vi. Regulatory measures for the early detection, prevention and control of CSF

The Group acknowledged that swill feeding was forbidden in Denmark. Comprehensive documents covering import control procedures for animals, animal products and veterinary medicinal products were provided and substantiated compliance with the requirements of the *Terrestrial Code*. Further to the Group's request, Denmark clarified that prohibition of swill feeding was enforced by means of the application of penalties foreseen by REGULATION (EC) No. 1069/2009 and control campaigns on biosecurity of small pig farms carried out by the Danish Veterinary and Food Administration, and compliance with the prohibition of swill feeding was controlled in connection with all control visits on the farms.

vii. Consideration of wild and feral pigs, if present, in the surveillance programme and biosecurity measure of domestic and captive wild herds

The Group acknowledged the absence of wild boars in Denmark. Hunting and game management were regulated under the authority of the Danish Nature Agency. The Group also noted that very limited numbers of feral pigs were present and landowners were also obliged to shoot them if found on their premises.

viii. Compliance with the questionnaire in Article 1.6.10.

The Group agreed that the submitted dossier was compliant with the format of the questionnaire in Article 1.6.10.

Conclusion

Considering the information submitted in the dossier and Denmark's answers to the questions raised, the Group considered that the application was compliant with the requirements of Chapter 15.2. and with the questionnaire in Article 1.6.10. of the *Terrestrial Code*. The Group therefore recommended that Denmark be recognised as a CSF free country.

3) Germany

The Group noted that Germany is part of the EU and as such, subject to its legislation.

The Group requested additional information and received clarification from Germany.

i. Animal disease reporting

The Group considered that Germany had a record of regular and prompt animal disease reporting and acknowledged that CSF was a notifiable disease in the country. Any violation of mandatory notification would be fined and in case of a suspected case that was not notified, compensation for killed pigs would be cancelled. The dossier confirmed that all pigs showing clinical signs suggestive of CSF were subjected to appropriate investigations.

The Group acknowledged that an ongoing awareness programme was in place to encourage reporting of all cases suggestive of CSF.

ii. Veterinary Services

The Group agreed that the Veterinary Services had current knowledge of, and authority over, all domestic and captive wild pig herds in the country and had current knowledge about the population and habitat of wild and feral pigs in the country.

iii. Situation of CSF in the past 12 months

The Group noted that the last case occurrence in Germany was in 2006 in domestic pigs and in 2009 in wild pigs. The dossier substantiated absence of CSF infection in the past 12 months.

iv. Absence of vaccination in the past 12 months

The Group acknowledged that Germany declared itself as free from CSF without vaccination in 2006 and emergency vaccination was never used in domestic pigs.

The Group noted that Germany stated in the dossier, "after several campaigns of oral vaccination and intensive surveillance over two years, the last measures were lifted at the beginning of 2012". Further to the Group's request, Germany clarified that the last oral vaccination of wild pigs in Germany took place on 25 March 2012 and the last measures in relation to oral CSF vaccination of wild pigs in Germany were lifted by the Commission Implementing Decision 2012/250/EU of 8 May 2012.

v. Surveillance for CSF and CSFV infection in accordance with Articles 15.2.26. to 15.2.32.

The Group acknowledged that both domestic and wild pigs were part of the surveillance and that in 2014, more than 118,000 samples were tested; sampling was risk-oriented and greater intensity of surveillance was in place at higher risk areas where CSF was eradicated last. Further to the Group's request, Germany provided separate figures of the domestic and wild pigs tested in the national CSF surveillance. The dossier provided substantiating information that any questionable or non-negative results were followed up by additional diagnostic tests and ultimately ruled out CSF in all of them.

The Group agreed that the surveillance in Germany for CSF was compliant and in accordance with Articles 15.2.26. to 15.2.32. and in place for at least 12 months.

vi. Regulatory measures for the early detection, prevention and control of CSF

Concerning emergency vaccination, the Group noted that Germany indicated that a DIVA vaccine was approved in February 2015. The Group pointed out that this was not a subunit vaccine but a live chimeric vaccine.

The Group acknowledged that all regulations on the import of animals and animal products were in accordance with EU legislation and with the requirements of the *Terrestrial Code*.

The Group noted that in all forms of households, appropriate measures were in place to safely protect feed and litter from wild pigs.

vii. Consideration of wild and feral pigs, if present, in the surveillance programme and biosecurity measure of domestic and captive wild herds

The Group appreciated the well-presented distribution of wild pigs in the dossier. The Group acknowledged that aside from few exceptions, domestic pigs were kept in solid closed buildings.

The Group acknowledged that according to Article 15.2.29., the domestic and captive wild pig population are separated from the wild and feral pig population by appropriate measures taking into account the presence of natural and artificial boundaries.

viii. Compliance with the questionnaire in Article 1.6.10.

The Group agreed that the submitted dossier was compliant with the format of the questionnaire in Article 1.6.10.

Conclusion

Considering the information submitted in the dossier and Germany's answers to the questions raised, the Group considered that the application was compliant with the requirements of Chapter 15.2. and with the questionnaire in Article 1.6.10. of the *Terrestrial Code*. The Group therefore recommended that Germany be recognised as a CSF free country.

4) Italy

In accordance with the established procedures, the participating representative of the Scientific Commission and the seconded OIE Headquarter staff supporting the secretariat from Italy withdrew from the meeting during the discussions on Italy's dossier by the Group.

The Group noted that Italy is part of the EU and as such, subject to its legislation.

The Group requested additional information and received clarification from Italy.

Animal disease reporting

The Group acknowledged that CSF was a notifiable disease in the country. The dossier confirmed that all pigs showing clinical signs suggestive of CSF were subjected to appropriate investigations and that an ongoing awareness programme was in place to encourage reporting of all cases suggestive of CSF.

ii. Veterinary Services

The Group agreed that the Veterinary Services had current knowledge of, and authority over, all domestic and captive wild pig herds in the country and had current knowledge about the population and habitat of wild and feral pigs in the country.

iii. Situation of CSF in the past 12 months

The Group noted that Italy had no outbreaks of CSF in domestic and captive wild pigs during the past 12 months. The Group acknowledged that the last outbreak in pigs was in 1997 in the mainland and in 2003 in the Sardinia region.

iv. Absence of vaccination in the past 12 months

The Group took note from the dossier that the vaccination programmes finished in 1990 and that Italy had outbreaks until 2003 that were controlled by a stamping out approach. The Group concluded that CSF vaccines were not used in Italy in the past 12 months.

v. Surveillance for CSF and CSFV infection in accordance with Articles 15.2.26. to 15.2.32.

The Group acknowledged that active and passive surveillance was in place using the epidemiological analysis for swine vesicular disease. Further to the Group's request, Italy provided information on the number of positive reactions on the screening ELISA test and the follow-up testing and investigation to discard any false positive results by region.

The Group concluded that any suspicion of CSF was appropriately followed up by further testing and investigation and to also discard any false positive results by region including Sardinia.

vi. Regulatory measures for the early detection, prevention and control of CSF

Upon the Group's request, Italy provided a comprehensive description of training and awareness programmes to make hunters aware of the clinical signs and lesions of CSF and the actions to be taken if they see such. The Group noted that it was compulsory for hunters to report any wildlife abnormal behaviour or mortality to the competent authorities in accordance with the national hunting legislation and with EU Regulations. In addition, in Sardinia, due to the long persistence of African swine fever (ASF), specific trainings for hunters, addressed to recognise wild boar abnormal behaviours and ASF/CSF pathological lesions and any clinical signs, had been carried out in several occasions and recently refreshed.

The Group acknowledged that import control procedures for animals, animal products and veterinary medicinal products in the whole territory of Italy were in accordance with EU legislation and with the requirements of the *Terrestrial Code*.

Further to the Group's request, Italy provided information on the location and number of ports, airports and land crossings. Italy also mentioned that entry of live animals from EU Member States and third countries were under the EU legislation (Commission Decision 2011/881/EC of 7 December 2001 and Council Directive 91/496/EEC of 15 July 1991). The Group also took note that the communication system between the central authorities and border inspection posts, and between border inspection posts was ensured by the TRACES system.

vii. Consideration of wild and feral pigs, if present, in the surveillance programme and biosecurity measure of domestic and captive wild herds

The Group appreciated the map showing the distribution of wild boars in the whole territory of Italy.

Further to the Group's request, Italy clarified the presence of two competent authorities for the management of wildlife and hunting: Ministry of Environment and its Agency (ISPRA) responsible the management and control of wildlife and the Ministry of Health responsible for animal health, welfare and consumers protection, including CSF control in wild boars.

The Group noted in the dossier, that more than 10,000 wild boars were culled each year outside the hunting season by the local competent authorities. Further to the Group's request, Italy clarified that any suspicion of CSF (based on the presence of pathological lesions in wild pigs) was reported to the local veterinary authority.

viii. Compliance with the questionnaire in Article 1.6.10.

The Group agreed that the submitted dossier was compliant with the format of the questionnaire in Article 1.6.10.

Conclusion

Considering the information submitted in the dossier and Italy's answer to the question raised, the Group considered that the application was compliant with the requirements of Chapter 15.2. and with the questionnaire in Article 1.6.10. of the *Terrestrial Code*. The Group therefore recommended that Italy be recognised as a CSF free country.

5) New Caledonia

The Group requested additional information and received clarification from New Caledonia.

i. Animal disease reporting

The Group considered that New Caledonia had a record of regular and prompt animal disease reporting and acknowledged that CSF was a notifiable disease in the country.

ii. Veterinary Services

The Group agreed that the Veterinary Services had current knowledge of, and authority over, all domestic and captive wild pig herds in the country and had current knowledge about the population and habitat of wild and feral pigs in the country.

iii. Situation of CSF in the past 12 months

The Group acknowledged that CSF had never been reported in the Country. Therefore, New Caledonia was eligible for historical freedom from CSF with regard to Article 1.4.6. of the *Terrestrial Code*.

iv. Absence of vaccination in the past 12 months

The Group acknowledged that vaccination had never been performed and was prohibited in New Caledonia.

v. Surveillance for CSF and CSFV infection in accordance with Articles 15.2.26. to 15.2.32.

Further to the Group's request, the Group acknowledged that a commercial ELISA test was the only diagnostic test New Caledonia used in the event of suspicion of CSF on the basis of clinical signs. The Group's concern was that the ELISA test should not be considered the best assay to make diagnosis of CSF. The Group recommended that the ELISA assay should be complemented with additional diagnostic procedures to demonstrate absence of CSF antigen, such as PCR.

The Group agreed that New Caledonia complied with the requirements of a historically free country as defined in Article 1.4.6. of the *Terrestrial Code* and concluded that the surveillance described in the dossier and in the additional information was adequate and appropriate, given the epidemiological situation. Given the use of ELISA testing for monitoring CSF, the Group recommended that New Caledonia participate in inter-laboratory proficiency testing as part of the accreditation process for these tests.

vi. Regulatory measures for the early detection, prevention and control of CSF

The Group took note that no import of live pigs had taken place since 2000. Import controls were strictly applied at borders and throughout the territory, and any importation was subject to a sanitary certificate issued by the competent authorities of New Caledonia. Only animal genetic material was authorised for importation from mainland France. New Caledonia mentioned that even if importation was not currently authorised for pigs, any live animal imported into the territory as a general rule was subject to pre-export isolation in an approved facility in the exporting country and then to a minimum 15-day isolation on arrival in a quarantine facility of New Caledonia.

The Group acknowledged the information provided in the dossier with respect to the availability of a contingency plan. New Caledonia further clarified by also providing the "délibération modifiée n° 154 du 29/12/1998", that regulatory measures to be applied for contagious foreign animal diseases have been included in a contingency plan in New Caledonia, even though there was no specific contingency plan for CSF.

vii. Consideration of wild and feral pigs, if present, in the surveillance programme and biosecurity measure of domestic and captive wild herds

While the Group recognised that the risk of CSF incursion was negligible according to the dossier, it was noted that there was no robust separation between domestic and wild and feral pigs in New Caledonia. The Group made note that in case of the occurrence of CSFV in the wild population, New Caledonia would need to demonstrate an effective separation between domestic and wild, feral pigs and the continued absence of CSFV in the domestic population in order to maintain its CSF free status.

viii. Compliance with the questionnaire in Article 1.6.10.

The Group noted that the initially submitted dossier was not fully compliant with the format of the questionnaire in Article 1.6.10., as not all questions under each heading of the questionnaire were answered. With the additional information provided by New Caledonia, the Group agreed that the dossier was compliant with the format of the questionnaire.

Conclusion

Considering the information submitted in the dossier and New Caledonia's answers to the questions raised, the Group considered that the application was compliant with the requirements of Chapter 15.2. of the *Terrestrial Code*. The Group therefore recommended that New Caledonia be recognised as a CSF free country.

6) New Zealand

The Group acknowledged that New Zealand's application covered the islands and territories within the Realm of New Zealand and not the self-governing states of Cook Islands, Niue, Tokelau, or the Ross dependency.

The Group requested additional information and received clarification from New Zealand.

i. Animal disease reporting

The Group considered that New Zealand had a record of regular and prompt animal disease reporting and acknowledged that CSF was a notifiable disease in the country. The dossier confirmed that all pigs showing clinical signs suggestive of CSF were subjected to appropriate investigations and that an ongoing awareness programme was in place to encourage reporting of all cases suggestive of CSF.

ii. Veterinary Services

The Group agreed that the Veterinary Services had current knowledge of, and authority over, all domestic and captive wild pig herds in the country and had current knowledge about the population and habitat of wild and feral pigs in the country.

iii. Situation of CSF in the past 12 months

The Group acknowledged that the last outbreak in New Zealand was recorded in 1953. Therefore, New Zealand was eligible for historical freedom from CSF with regard to Article 1.4.6. of the *Terrestrial Code*.

iv. Absence of vaccination in the past 12 months

The Group acknowledged that vaccination was never conducted in New Zealand.

v. Surveillance for CSF and CSFV infection in accordance with Articles 15.2.26. to 15.2.32.

Further to the Group's request, New Zealand provided additional evidence that no cases including the potential differential diagnoses of CSF were reported through the passive surveillance system. The Group agreed that New Zealand complied with the requirements of a historically free country as defined in Article 1.4.6. of the *Terrestrial Code* and concluded that the surveillance described in the dossier and in the additional information was adequate and appropriate, given the epidemiological situation.

With reference to the additional information, the Group noted that not all of the tests listed for CSF were accredited under ISO17025. The Group recommended that these tests, particularly PCR for CSFV detection, be accredited in the future.

vi. Regulatory measures for the early detection, prevention and control of CSF

The Group acknowledged that New Zealand provided generic information on control and biosecurity measures and on the response readiness plan. Furthermore, the Group noted the additional information on location of ports and airports and that the appropriate methods used for the disposal of wastes were in place.

vii. Consideration of wild and feral pigs, if present, in the surveillance programme and biosecurity measure of domestic and captive wild herds

The Group acknowledged that wild and feral pigs were present in some areas of the country and given the rather small scale of New Zealand's pig industry, there were limited opportunities for contact between feral and farmed animals and the biosecurity measures in place were appropriate for New Zealand's level of risk.

viii. Compliance with the questionnaire in Article 1.6.10.

The Group noted that New Zealand's submitted dossier was not fully compliant with the format of the questionnaire in Article 1.6.10. The Group recommended that the dossier should be written in a readily accessible form, answering each question of the questionnaire, and with clear references to annexes when relevant in order to facilitate the assessment by the Group in making an informed recommendation to the Scientific Commission.

Conclusion

Considering the information submitted in the dossier and New Zealand's answers to the questions raised, the Group considered that the application was compliant with the requirements of Chapter 15.2. of the *Terrestrial Code*. The Group therefore recommended that New Zealand be recognised as a CSF free country.

7) Poland

The Group noted that Poland is part of the EU and as such, subject to its legislation.

The Group requested additional information and received clarification from Poland.

i. Animal disease reporting

The Group considered that Poland had a record of regular and prompt animal disease reporting and acknowledged that CSF was a notifiable disease in the country. The information provided in the dossier confirmed that all pigs showing clinical signs suggestive of CSF were subjected to appropriate investigations and that an ongoing awareness programme was in place to encourage reporting of all cases suggestive of CSF. The Group also acknowledged that periodical publications concerning infectious animal diseases and dissemination of information, including the subjects concerning diseases of pigs were provided.

ii. Veterinary Services

The Group agreed that the Veterinary Services had current knowledge of, and authority over, all domestic and captive wild pig herds in the country and had current knowledge about the population and habitat of wild and feral pigs in the country.

iii. Situation of CSF in the past 12 months

The Group noted that the last outbreak in Poland was reported in 1994.

iv. Absence of vaccination in the past 12 months

The Group noted that vaccination was forbidden in Poland since 2004.

v. Surveillance for CSF and CSFV infection in accordance with Articles 15.2.26. to 15.2.32.

The Group acknowledged from the dossier that serological testing was performed as part of the surveillance activities. Upon the Group's request, Poland provided information on the number of positive reactions on the screening test and the follow-up testing and investigation to discard any false positive results.

The Group acknowledged that Poland participated in inter-laboratory testing with the satisfactory outcome.

The Group agreed that surveillance was in accordance with Articles 15.2.26. to 15.2.32. and in place for at least 12 months.

vi. Regulatory measures for the early detection, prevention and control of CSF

The Group acknowledged that swill feeding was prohibited. Further to the Group's request, Poland provided evidence substantiating the effective enforcement for prohibition of swill feeding.

vii. Consideration of wild and feral pigs, if present, in the surveillance programme and biosecurity measure of domestic and captive wild herds

The Group acknowledged that domestic animals were kept secured against access from wild pigs, as Poland further provided additional information on the physical and procedural barriers that are required to apply biosecurity measures in all sectors of pig production.

viii. Compliance with the questionnaire in Article 1.6.10.

The Group agreed that the submitted dossier was compliant with the format of the questionnaire in Article 1.6.10.

Conclusion

Considering the information submitted in the dossier and Poland's answers to the questions raised, the Group considered that the application was compliant with the requirements of Chapter 15.2. and with the questionnaire in Article 1.6.10. of the *Terrestrial Code*. The Group therefore recommended that Poland be recognised as a CSF free country.

4. Evaluation of a request from a Member Country for the recognition of a CSF free zone

1) Brazil

In accordance with the established procedures, the participating expert from Brazil withdrew from the meeting during the discussions on Brazil's dossier by the Group.

In September 2015, Brazil submitted an application to the OIE, for the recognition of a zone free from CSF; the proposed free zone covers the States of Acre, Bahia, Espírito Santo, Goias, Mato Grosso, Mato Grosso do Sul, Minas Gerais, Paraná, Rio de Janeiro, Rondônia, São Paulo, Sergipe and Tocantins, Distrito Federal, and the municipalities of Guajará, Boca do Acre, South of the municipality of Canutama and Southwest of the municipality of Lábrea, in the state of Amazonas.

The Group requested additional information and received clarification from Brazil.

The Group took note that Brazil was recognised as having a zone, composed of both states of Santa Catarina and Rio Grande do Sul, free from CSF in May 2015.

The Group noted the main rationale for applying for a separate zone rather than merging with the already officially recognised CSF free zone was a strategic decision, as the already recognised zone covering the states of Santa Catarina and Rio Grande do Sul were major pork producers and exporters and would be protected in case of an eventual reintroduction of CSFV in the newly proposed zone. The Group acknowledged that the same strategy was used successfully for the eradication of foot and mouth disease in the country.

i. Animal disease reporting

The Group considered that Brazil had a record of regular and prompt animal disease reporting and acknowledged that CSF was a notifiable disease in the country. The dossier confirmed that all pigs showing clinical signs suggestive of CSF were subjected to appropriate investigations and that an ongoing awareness programme was in place to encourage reporting of all cases suggestive of CSF.

ii. Veterinary Services

The Group agreed that the Veterinary Services had current knowledge of, and authority over, all domestic and captive wild pig herds in the country and had current knowledge about the population and habitat of wild and feral pigs in the country.

iii. Situation of CSF in the past 12 months

The Group noted that the last outbreak in the proposed free zone was in 1998, specifically in São Paulo.

iv. Absence of vaccination in the past 12 months

The Group acknowledged that vaccination was prohibited as per law since 1998 in Brazil.

v. Surveillance for CSF and CSFV infection in accordance with Articles 15.2.26. to 15.2.32.

The Group noted that Brazil participated in inter-laboratory tests in 2014 and Brazil additionally provided the satisfactory outcomes of the 2014 inter-laboratory tests for ELISA and CSFV neutralisation.

Further to the Group's request, Brazil clarified that its definition of a CSF case was in line with the definition in the CSF chapter of the *Terrestrial Code*. In addition, Brazil provided supplementary information on the follow-up procedures in case of suspicion of CSF, and indicated that there were no positive PCR results in the proposed CSF free zone.

The Group acknowledged that surveillance was in place in accordance with Articles 15.2.26. to 15.2.32. and in place for at least 12 months.

vi. Regulatory measures for the early detection, prevention and control of CSF

Further to the Group's request, Brazil completed the information provided in the dossier related to compensation of farmers by substantiating the availability of sufficient funds in the event of a CSF outbreak.

Further to the Group's request, Brazil provided information on the contingency plan and response measures in place concerning pigs in subsistence holdings in the event of CSF detection either in these pigs or in wild and feral pigs in the zone. The Group noted that a specific plan was described in the dossier and that the emergency use of vaccination could be authorised through a specific plan as stated in the dossier.

vii. Consideration of wild and feral pigs, if present, in the surveillance programme and biosecurity measure of domestic and captive wild herds

The Group appreciated that the dossier included a map displaying the distribution of wild pigs. Further to the Group's request, Brazil additionally provided quantitative data on wild and feral pig populations and the locations of few captive wild pig farms under the Brazilian Institute of Environment and Renewable Natural Resources (IBAMA) as part of the Ministry of the Environment.

The Group acknowledged that active and passive surveillance were conducted in wild and feral populations. Upon the Group's request, Brazil provided additional information on the tests used and how the samples collected from wild swine were followed up to reach a final CSF negative result.

Further to the Group's request, Brazil provided additional information on biosecurity measures in place to separate domestic pigs from wild pigs by the presence of fences and plant barriers, among others.

viii. Compliance with the questionnaire in Article 1.6.10.

The Group agreed that the submitted dossier was compliant with the format of the questionnaire in Article 1.6.10.

Conclusion

Considering the information submitted in the dossier and Brazil's answers to the questions raised, the Group considered that the application was compliant with the requirements of Chapter 15.2. and with the questionnaire in Article 1.6.10. of the *Terrestrial Code*. The Group therefore recommended that the proposed zone of Brazil be recognised as free from CSF.

2) Colombia

Colombia submitted an application for a single zone named as the "center-west zone" covering the departments of Antioquia (with the exception of the Magdalena Medio, Uraba and Lower Cauca of Antioquia), Caldas (with the exception of the Magdalena Medio in Caldas), Quindio, Risaralda, Valle del Cauca, northern zone of the Cauca, Chocó and the municipality of Cajamarca in the Tolima. The Group noted that this zone was made up with an area of greatest swine production and economic importance at the national level, and concentrated 65% of swine production.

As part of the evaluation, the Group had a short face-to-face meeting with a delegation from Colombia. The Group received additional information and clarification on the questions raised, which were further provided in written form.

i. Animal disease reporting

Whilst information supporting CSF notification was scattered in the dossier and the annexes, the Group agreed that the legal basis for the notification of CSF in the whole territory and all pigs showing clinical signs suggestive of CSF was in place and subjected to appropriate field or laboratory investigation.

From the overall information provided, the Group considered that Colombia had a record of regular and prompt animal disease reporting and acknowledged that CSF was a notifiable disease in the country.

ii. Veterinary Services

The Group agreed that the Veterinary Services had current knowledge of and authority over, all domestic and captive wild pig herds in the country and had current knowledge about the population and habitat of wild and feral pigs in the country. The Group acknowledged that no wild pigs were present in the proposed CSF free zone.

iii. Situation of CSF in the past 12 months

The Group acknowledged that the last outbreak in the proposed CSF free zone was in 2003. The Group took note that, still in 2015, outbreaks occurred near the proposed free zone.

iv. Absence of vaccination in the past 12 months

The Group acknowledged that, further to the positive outcome of an active epidemiological survey conducted in 2010, vaccination in the proposed zone was ceased in June 2010 while in the rest of the country, vaccination was still performed.

Further to the Group's request, Colombia completed the information provided in the dossier on the identification of vaccinated pigs and those of the proposed free zone by indicating that all pigs were identified at 60 days of age in the proposed free zone while in the rest of the country pig identification was performed at the same time as vaccination or at 60 days of age. Regarding traceability, a national database for recording information on the number of farms was structured and in operation.

v. Surveillance for CSF and CSFV infection in accordance with Articles 15.2.26. to 15.2.32.

The Group agreed that the serological survey methodology seemed theoretically correct. However, the sample size appeared to be rather low given the design prevalence used, leading to minimal sample sizes taken in some departments. Further to the Group's request, Colombia clarified that a risk analysis performed in 2009 determined that the main risk factor was the re-entry of trucks into the free zone after transporting animals to the control zone where animals could have been contaminated. For this reason, compulsory disinfection of trucks entering the free zone was carried out at checkpoints. The Group still considered the risk of introduction from swill feed represented one of the main risks of introduction of the disease.

With regard to the surveillance plan, the Group noted that Colombia applied in the past a "conventional" design surveillance programme including large numbers of animals to be tested while the surveillance plan described in the dossier was designed using a "targeted" approach. The Colombian delegation confirmed that a large scale serological survey was carried out in 2011 and the survey results presented in the dossier were part the continuing surveillance strategy. Furthermore, the delegation informed the Group that, in 2015, a large scale survey based on tonsils was initiated and ongoing, and for 2016, an additional serological survey was planned. Based on the information provided by Colombia, while bearing in mind the large percentage of informal slaughter, high rates of still birth and pre-weaning mortality, outbreaks of CSF close to the proposed zone and a significant degree of civil unrest in some areas of the zone, the Group agreed that the risk of unrevealed cases of CSF in backyard farms in the proposed zone was low.

The Group took note that the high risk herds were identified based on criteria such as, swill feeding, proximity to farm markets and slaughterhouses, the use of external reproductive services. From the additional information provided by the Colombian delegation, the Group acknowledged that these high risk farms were subjected to continuous surveillance visits by the Instituto Colombiano Agropecuario (ICA) during which animals and production records were examined and if any suspicion or concerns arose, movement order would be issued and additional epidemiological investigation would be carried out. The Group appreciated the comprehensive data provided on the visits to high risk farms.

vi. Regulatory measures for the early detection, prevention and control of CSF

The Group took note of a legislation provided in the Annexes, describing the procedure on CSFV inactivation in meat and meat products prior to movement into the proposed free zone. The delegation further explained that there was a specific arrangement with a single pig producer, concerning pigs or meat produced within the free zone, processed outside the proposed free zone, and reintroduced into the free zone. Colombia also clarified that a licence was required for each movement and that regular inspections were carried out, but the Group still noted that the described treatment would not inactivate CSFV.

The Group acknowledged from the additional information provided by Colombia that the legislation did not provide a high level of confidence to protect the proposed free zone from any eventual virus incursion. The Group also considered that no movements of pigs, meat or pig products should be allowed to enter into the proposed free zone from the infected zone, except in accordance with the *Terrestrial Code*. The Group had some concerns about the level of biosecurity measures within the backyard farm and considered that the Colombian production system seemed to allow movements of goods and people from the infected area to the proposed free zone. Further to the Group's request, Colombia clarified that trading of fattened pigs in small and backyard pig production systems was conducted through buyers who collected the animals from farms or through municipal cattle markets, while medium and technological producers sold directly to slaughterhouses. In backyard holdings, reproducing boars were lent between farms for reproductive purposes, whereas artificial insemination was commonly used in the other production systems. The Group considered the risks associated with the large backyard production component to be underestimated.

Further to the Group's request Colombia clarified that official quarantine was applied in the case of suspicion and a CSF investigation Plan and additional investigation guidelines were used. However, the Group noted that no legal binding requirements or indication of penalties were defined.

Upon the Group's request, Colombia clarified that waste from ports and airports were controlled by the Health Department and the collection and incineration was done through companies specialised in waste disposal. The food waste of domestic origin was fed to pigs after treatment by boiling for one hour. The Group made note of the potential risks associated with the difficulty of monitoring.

The Group noted that trucks entering the proposed free zone were disinfected. Further to the Group's request, the delegation from Colombia explained how the efficacy of disinfection procedures was verified. Colombia indicated that it was mandatory that any animal movements from outside of the proposed free zone be controlled by the Veterinary Services at the control posts. Legal basis existed on specific instructions for the disinfection of trucks. Colombia further explained that awareness campaigns (i.e. informative talks and handouts) were in place to emphasise the importance of cleaning and disinfection of vehicles before entering the free zone.

Considering backyard system of production, the Group acknowledged that a backyard holding was defined as a premise hosting less than 50 animals and that an identification system was in place by holding and that pigs were also identified by means of ear tagging with different colours distinguishing the area from which the pigs were coming from. Further to the Group's request, Colombia clarified that 69% of pigs from backyard holdings were identified. Whilst acknowledging that even the movement of non-identified pigs was not allowed, the Group thought the number of non-identified backyard pigs was significant.

Further to Colombia's clarifications regarding compensation arrangements, the Group acknowledged that emergency funds were available for outbreaks including compensation for farmers, in which 60% of funding was from government and 40% from Colombian pork producers. The farmer would receive 90% of the value of the animal as compensation.

The Group also requested more details on the contingency plan. The Colombian delegation explained and directed the Group to the specific contingency plan available on the national public website.

vii. Consideration of wild and feral pigs, if present, in the surveillance programme and biosecurity measure of domestic and captive wild herds

The Group acknowledged that Colombia had good knowledge on the risks related to wild and feral pigs present in neighbouring areas of the proposed free zone. Based on the absence of wild and feral pigs in the proposed free zone, Colombia indicated that no surveillance on wild and feral pigs was carried out in the zone proposed but clarified that the surveillance was risk based.

viii. Compliance with the questionnaire in Article 1.6.10.

The Group noted that the initially submitted dossier was not compliant with the format of the questionnaire in Article 1.6.10. while the second dossier submitted was more in line with the format of the questionnaire. However, the Group still made note that some relevant information were only present in the initial dossier which caused difficulty in the process of evaluation.

Conclusion

The Group's main concern was about the ability of the Competent Authority to maintain the integrity of the zone and the consequent effectiveness, in combination with the fact that the existing FMD free zone had different borders. The Group therefore struggled to see how such a complex system could operate effectively, in practical terms.

The Group acknowledged that biosecurity could be a challenge for smallholder farms depending on whether the pigs were moved or used for trade. But given the large proportion of pig production in Colombia, the Group needed more information particularly on this sector and further assurance on how it was controlled and operated. The Group felt a mission was therefore desirable, in order to assess these issues and also to ensure that the risk pathways for introduction and spread were identified and mitigated.

5. Revision of the questionnaire of the *Terrestrial Animal Health Code* Chapter 1.6. on CSF (Article 1.6.10.)

As part of the Scientific Commission's work plan to revise all questionnaires related to official recognition of disease status, the Group also proposed modifications to the CSF questionnaire in Chapter 1.6. (Article 1.6.10.) to clarify information requested from applicant Member Countries. The revisions made were as follows:

The Group emphasised that the terminology defined in the *Terrestrial Code* and *Terrestrial Manual* should be used to concisely address all the following topics under the headings provided in the questionnaire.

1. Introduction

Point a) Geographical factors

The Group recommended that Member Countries with non-contiguous territories should clearly state in their applications whether or not they wish to include them as part of the application for a CSF free status.

Point b) Pig industry

The Group clarified the size and production of the different types of production system and the degree of integration and role of producer organisations, should be requested.

2. Veterinary system

Point b) Veterinary Services

The Group added a reference to Chapter 1.1. on Notification of diseases, infections and infestations, and provision of epidemiological information and agreed to include Section 3 of the *Terrestrial Code* on "Quality of Veterinary Services". The Group removed the reference to the *Terrestrial Manual* as it was an old reference that may have been taken prior to the update of *Terrestrial Manual* chapters.

Point c

The Group changed the wording from continuing training to continuing education as it was a more familiar terminology commonly used.

3. CSF eradication

Point c) Vaccines and vaccination

The Group amended the text to specify the use of vaccines in the country, even when applying for a CSF free zone.

Point d)

The Group clarified that the legislation applicable to the eradication should be provided.

4. CSF diagnosis

The Group amended the title as "CSF laboratory diagnosis" for this section as the questions relate to laboratory diagnosis only. The Group requested Member Countries to provide documentary evidence on the *Terrestrial Manual* Chapters from 1.1.0. to 1.1.5..

Points a) and b)

The Group clarified the points to be addressed depending on whether CSF laboratory diagnosis was carried out in the country or not. If CSF laboratory diagnosis was carried out in the country, the Group agreed that the application should address points i) to vi) in which the results of most recent inter-laboratory validation tests should also be provided under point ii) and the time frame for obtaining results was added as a last point. If CSF laboratory diagnosis was not carried out in the country, the Group agreed to request the details of the laboratory(ies) including the arrangements and logistics for shipment of samples.

5. CSF surveillance

Point a) Clinical suspicion

The Group added that Member Countries provide a timeline of actions to be taken from the detection of clinical suspicion to the completion of testing to confirm or exclude CSF.

Point b) Serological and virological surveillance

Whilst considering the probable cross reactions with other pestiviruses on screening tests, and as the Group identified that it was one of the common questions raised during the evaluation of applications, the Group agreed to request in the questionnaire that Member Countries provide a table with the number of false-positive results obtained on screening tests before describing the follow-up actions taken.

Point e) Slaughterhouses and market

The Group included a question on the proportions of slaughtered pigs subjected to meat inspection in the different production systems.

6. CSF prevention

Point b) Import control procedures

The Group added another point to also describe the regulations, procedures, type and frequency of checks concerning the import and follow-up of other materials at risk of being contaminated with CSFV.

7. Control measures and contingency planning

Point c)

The Group added that the procedures to ensure disinfection of premises should be provided.

Point d) and f)

The Group amended the text to eliminate redundancy and to improve clarity.

Consideration of the query on pig movement for immediate slaughter, as well as of other possible future amendments of the chapter identified by the last ad hoc Group on African swine fever

The Group discussed a query from a Member Country on pig movements for immediate slaughter. The Group agreed that, pig movement for immediate slaughter in a free country/zone should be allowed only by assuring control during transport and procedures inactivating CSFV. The Group drafted an article for future inclusion in the CSF Chapter, describing the provisions for direct transfer of pigs from an infected country/zone for slaughter in a free country/zone, while taking into consideration the already existing article in the FMD Chapter of the *Terrestrial Code*. The Group made note that the *meat* derived from the pigs from an infected zone should be treated in accordance with Article 15.2.23., and other products obtained from the animals and any products coming into contact with infected pigs should be treated in accordance with Articles 15.2.24. and 15.2.25. in order to destroy any CSFV potentially present.

The Group also reviewed the chapter on CSF as part of the mandate given by the Scientific Commission further to the recommendations by the *ad hoc* Group on ASF, and identified possible future amendments. Some of the points discussed by the Group were as follows:

Article 15.2.1. General provisions

The Group considered that the incubation period of 14 days would be appropriate in terms of the purposes of the *Terrestrial Code*.

Article 15.2.5. Establishment of a containment zone within a CSF free country or zone

The Group proposed that, in the event of the recurrence of CSF in the containment zone, the approval of the containment zone would be withdrawn and the CSF status of the whole country or zone would be suspended until the relevant requirements of Article 15.2.6. are fulfilled. This is consistent with the approach followed in the other chapters such as FMD.

Article 15.2.8. Recommendations for importation from countries or zones considered infected with CSFV: For domestic and captive wild pigs

The Group acknowledged that the conditions of import from a CSF free compartment were less stringent than those applying to a quarantine station but agreed that it should not be changed.

Article 15.2.9. Recommendations for the importation of wild and feral pigs

Whilst the Group agreed that importation of *wild* and *feral* pigs was not commonly practised, the Group thought that the provisions under 15.2.9. would still provide the necessary guarantees.

Article 15.2.21. Recommendations for the importation of skins and trophies

The Group was not in the position to agree due to lack of scientific evidence and would consider the point related to treatment using 0.5 % formalin at its next meeting.

Article 15.2.28. Surveillance strategies

The Group agreed that it was sensible to move the last phrase and the four points (a,b,c, and d) of the Article to the end of section 1. Introduction.

The Group noted some redundancy related to Articles 15.2.16. to 15.2.21. and agreed that these articles could be simplified. The Group also noted that there was no article covering the importation of pig meat from domestic and captive wild pigs from infected zones or countries. The Group acknowledged that there were several gaps and areas that would benefit with consolidation and that this would be included in its next meeting.

Finally, the Group made note that the definition of infection with CSFV should be modified to be in line with Chapter 8.8. on FMD. The Group indicated that the past attempt to accommodate the lack of clinical signs had resulted in the weakening of the definition where confirmation could only be made in the presence of an epidemiological link or other means of previous association or contact with CSFV. The Group recommended to clarify the text and allow confirmation of infection following molecular detection in a pig showing clinical signs.

The Group noted the need of modifications to the CSF Chapter in line with the update of the ASF Chapter and recommended the Scientific Commission to consider this in the near future.

7. Finalisation and adoption of report

The *ad hoc* Group reviewed and amended the draft report provided by the rapporteur. The Group agreed that the report would be subject to a short period of circulation to the Group for comments and adoption. Upon circulation, the Group agreed that the report captured the discussions.

.../Appendices

Appendix I

MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION OF CLASSICAL SWINE FEVER (CSF) STATUS OF MEMBER COUNTRIES Paris, 3 – 5 November 2015

Agenda

- 1. Opening
- 2. Adoption of the agenda and appointment of chairperson and rapporteur
- 3. Evaluation of applications from Member Countries for recognition of CSF free status
 - a. Czech Republic
 - b. Denmark
 - c. Germany
 - d. Italy
 - e. New Caledonia
 - f. New Zealand
 - g. Poland
- 4. Evaluation of a request from a Member Country for the recognition of a CSF free zone
 - a. Brazil
 - b. Colombia
- 5. Revision of the questionnaire of the Terrestrial Animal Health Code Chapter 1.6. on CSF (Article 1.6.10.)
- 6. Consideration of the query on pig movement for immediate slaughter, as well as of other possible future amendments of the chapter identified by the last *ad hoc* Group on African seine fever
- 7. Finalisation and adoption of report

Appendix II

MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION OF CLASSICAL SWINE FEVER STATUS OF MEMBER COUNTRIES

Paris, 3 - 5 November 2015

List of Participants

MEMBERS

Dr Janice Reis Ciacci Zanella

Empresa Brasileira de Pesquisa Agropecuária Centro Nacional de Pesquisa de Suinos e Aves

P.O. box 21

89.700-000 Concordia BRAZIL

Tel: +49-344-104-00 Fax: +49-344-104-97 janice.zanella@embrapa.br.

john.pasick@inspection.gc.ca

Dr John Pasick

Canadian Food Inspection Agency National Centre for Foreign Animal Disease 1015 Arlington Street Winnipeg, Manitoba RSE3M4 Tel: +1-204-789-2013 Fax: +1-204-789-2038 CANADA

Dr Trevor W. Drew

Head of Virology Department VLA Weybridge, Woodham Lane, New Haw Addlestone, Surrey KT15 3NB UNITED KINGDOM Tel: +44-1932 35 76 37 Fax: +44-1932 35 72 39

trevor.drew@ahvla.gsi.gov.uk

Dr Sophette Gers

Charles Riber Laboratories Tranent Edinburgh EH33 2NE UNITED KINGDOM Tel: +44-0187 56 18 17 Fax: +44-01875 614555 Sophette.gers@crl.com

Dr Cristóbal Zepeda

Veterinary Attaché USDA-APHIS-IS Mexico Region PO Box 9000, Brownsville, Texas 78520 USA

Tel: +52-55-5028-5410 cristobal.zepeda@aphis.usda.gov Dr Luis-José Romero González

Jefe de Área de Epidemiología Subdireccion General de Sanidad e Higiene Animal y Trazabilidad Ministerio de Agricultura C/ Almagro, 33 Madrid 28071 SPAIN

Tel: +34-91-347-8351 Fax: +34-91-347-8299 ljromero@magrama.es

Dr Takehisa Yamamoto

(Invited but could not attend) National Institute of Animal Health National Agriculture and Food Research Organization

Kannondai 3-1-5, Tsukuba, Ibaraki JAPAN, 305-0856 Tel: +81-29-838-7769

Fax: +81-29-838-7769 mtbook@affrc.go.jp

SCIENTIFIC COMMISSION REPRESENTATIVE

Dr Silvia Bellini

Istituto Zooprofilattico Sperimentale della Lombardia e dell'Emilia Romagna "Bruno Ubertini" Via Bianchi 9 25124 Brescia **ITALY** silvia.bellini@izsler.it

OBSERVER

Dr Francisco Javier Reviriego Gordejo

Head of Sector, Health & Consumers Directorate-General DG SANCO/G2 - European Commission Rue Froissart 101-3/72, 1040 Brussels, BELGIUM

Tel: +32 2 298 47 99 Fax: +32 2 295 31 44

Francisco.Reviriego-Gordejo@ec.europa.eu

OIE HEADQUARTERS

Dr Brian Evans

Deputy Director General and Head Scientific and Technical Department b.evans@oie.int

Dr Min Kyung Park

Chargée de mission Scientific and Technical Department m.park@oie.int

Dr Maria Luisa Danzetta

Chargée de mission Scientific and Technical Department m.danzetta@oie.int

Dr Laure Weber-Vintzel

Officer in charge of the recognition of countries' animal disease status Scientific and Technical Department I.weber-vintzel@oie.int

Original: English November 2015

REPORT OF THE MEETING OF THE OIE *AD HOC* GROUP ON BOVINE SPONGIFORM ENCEPHALOPATHY RISK STATUS EVALUATION OF MEMBER COUNTRIES

Paris, 24-26 November 2015

A meeting of the *ad hoc* Group on bovine spongiform encephalopathy (BSE) risk status evaluation of Member Countries (hereafter the Group) was held at the OIE Headquarters from 24 to 26 November 2015.

1. Opening

On behalf of Dr Bernard Vallat, Director General of the OIE, Dr Brian Evans, the OIE Deputy Director General and Head of Scientific and Technical Department welcomed and thanked the experts for their commitment towards the OIE and for personal and professional time invested to evaluate the dossiers.

Dr Evans highlighted the importance of the scientific credibility and the integrity of the official disease status recognition procedures. He emphasised the value of a detailed report of the evaluations as it was the main channel to communicate the rationale of decisions to the Scientific Commission for Animal Diseases (Scientific Commission) and to Member Countries, especially on possible information gaps or specific areas that should be addressed in the future. He also indicated that the OIE Director General supported the Scientific Commission proposing that more in-country missions be conducted to verify the information provided in the written dossiers.

Dr Evans mentioned the importance of transparency and procedural fairness. He reminded the Group that submitted dossiers were considered the property of the applicant Member Country and sharing of dossiers between countries could be done, when requested, through bilateral negotiation. Nevertheless, he pointed out that a recent amendment in the Standard Operating Procedures for official recognition of disease status or risk status of bovine spongiform encephalopathy and for the endorsement of national official control programmes of Member Countries clarifies that Member Countries requested to provide the whole or part of its dossier during the 60-day comment period prior to the General Session should comply with the request within maximum of 10 days.

Dr Evans also mentioned the current epidemiological situation over the global decline of classical BSE cases and the consequent relative growth of atypical BSE cases, underlining the human health impact of the disease and the cost of surveillance programmes. He informed the Group that two additional Reference Laboratories were recently recognised and he emphasized the importance of continuing to invest in capacity building and in the establishment of global networks. He reminded the Group that during the last General Session in May 2015 a revised version of the BSE Chapter was adopted. While different from the one proposed by the Group and endorsed with minor comments by both the Scientific Commission and the Terrestrial Animal Health Standard Commission, this new version excludes "atypical BSE" for the purpose of official BSE risk status recognition and should be the basis for the evaluation of Member Countries' BSE risk status during the meeting.

Dr Laure Weber-Vintzel, officer in charge of the recognition of countries' animal disease status, finally introduced Dr Maria Luisa Danzetta, who recently joined the Scientific and Technical Department to work on the activities related to official disease status recognition.

2. Adoption of the agenda and appointment of chairperson and rapporteur

Dr Martial Plantady was appointed Chair and Dr Rodolfo Rivero acted as rapporteur with the support of the OIE Secretariat. The Group endorsed the proposed agenda.

The agenda and list of participants are provided as Appendices I and II, respectively.

3. Evaluation of requests from Member Countries for the evaluation of BSE risk status

Preliminary analyses were conducted by two members of the Group for each dossier (as allocated by the OIE Headquarters) prior to the meeting. The expert presented their key findings to the plenary, which proceeded with in-depth discussion, dossier by dossier, on the applicant Member Countries' compliance with the provisions on BSE risk status in the *Terrestrial Code*. Where necessary, messages were sent electronically to the applicants requesting additional information. All Member Countries contacted provided the requested information to the Group on time.

Drs Armando Giovannini and John Kellar could not attend the meeting physically but provided their feedback on the dossiers before the meeting, through electronic correspondence. Furthermore, Dr Giovannini participated via teleconference during the three days.

3.1. Costa Rica

The Group recalled that in 2012 the OIE received a dossier from Costa Rica to evaluate the BSE risk status of its cattle population in accordance with the *Terrestrial Code*. The recommendation of the Group at that time was that Costa Rica should be regarded as having met the requirements for recognition as complying with the BSE Chapter of the *Terrestrial Code* as 'controlled BSE risk'.

In September 2015, Costa Rica submitted a dossier seeking a negligible BSE risk status. The Group agreed that the submission conformed to the questionnaire provided to Member Countries wishing to make a formal evaluation of their BSE risk status according to the requirements of the *Terrestrial Code*.

The Group requested additional information and received clarification from Costa Rica. Points specifically discussed by the Group are summarised below:

a) Section 1: Risk Assessment — Article 11.4.2. point 1

• Risk assessment for entry of the BSE agent

The Group considered that during the past eight years, ruminant meat-and-bone meals (MBM) have only been imported for pet food and poultry feed, from countries having a negligible risk status with regard to BSE. Large amounts of deboned and bone-in meat were also imported from various countries, some having an undetermined BSE risk status. After discussion of the entry assessment the Group concluded that the risk that the BSE agent could have entered Costa Rica during the interval covered by the assessment, although very low, was not negligible.

Risk of recycling and amplification of the BSE agent

The ruminant-to-ruminant feed ban was established in 2001. The Group acknowledged that specific risk materials (SRM) have been removed and buried and that the measures adopted by Costa Rica were commensurate to the risk posed by the entry of the BSE agent. Those measures improved over the past four years.

Regarding the exposure assessment the Group concluded that there was negligible risk of recycling and amplification of the BSE agent if it were present in Costa Rica's cattle population during the interval covered by the assessment.

Appropriate level of control and audit of the feed ban

Multispecies feed mills were only allowed to use MBM of non-ruminant origin to prevent cross-contamination of ruminant feed.

The Group concluded that the appropriate legislation, control and audit of the proper implementation of the feed ban had been in force for at least eight years.

b) Surveillance according to Articles 11.4.20.-11.4.22.

The Group noted that the surveillance undertaken exceeded the minimum requirements of type B surveillance according to Article 11.4.22. on surveillance for BSE in the *Terrestrial Code*. 363,149 surveillance points were collected, compared to a minimal requirement of 71,500 for an adult cattle population of 625,052 over two years of age. The Group noted that the surveillance points were mainly based on clinical suspects but with a fairy representative number of fallen stock and casualty slaughter.

c) Other requirements — Article 11.4.2. points 2-4

Awareness programme

The Group noted that the awareness programme started in 2000 and met the requirements of the *Terrestrial Code*.

Compulsory notification and investigation

The Group noted that BSE was declared a notifiable disease under relevant legislation since 2001 and determined that the system for compulsory notification and investigation met the requirements of the *Terrestrial Code*.

Laboratory examination

The Group determined that the arrangements for laboratory examination met the requirements of the *Manual of Diagnostic Tests and Vaccines for Terrestrial Animals (Terrestrial Manual)*. In addition, the Group acknowledged that in the event of confirmation being required, a cooperation agreement was concluded for the shipment of samples to the OIE Reference Laboratory for BSE.

d) BSE history in the country

No BSE case had ever been recorded in Costa Rica.

e) Compliance with conditions for 'negligible BSE risk' status - Article 11.4.3.

Based on the information provided, the Group recommended that Costa Rica be regarded as having met the requirements for recognition as complying with the BSE Chapter of the *Terrestrial Code* as 'negligible BSE risk'.

f) Conclusions

• Recommended status: 'Negligible BSE risk'.

The Group congratulated Costa Rica for the efforts made in the past years and recommended that the country maintain its level of efforts in terms of control and audit of the feed ban.

3.2. Germany

In accordance with the established procedures, the participating expert from Switzerland having also German citizenship withdrew from the discussions on Germany's dossier by the Group.

The Group recalled that in July 2007 the OIE received a dossier from Germany to evaluate the BSE risk status of its cattle population in accordance with the *Terrestrial Code*. The recommendation of the Group at that time was that Germany should be regarded as having met the requirements for recognition as complying with the BSE Chapter of the *Terrestrial Code* as 'controlled BSE risk'.

In September 2015, Germany submitted a dossier seeking a negligible BSE risk status. The Group agreed that the submission conformed to the questionnaire provided to Member Countries wishing to make a formal evaluation of their BSE risk status according to the requirements of the *Terrestrial Code*.

The Group requested additional information and received clarification from Germany. Points specifically discussed by the Group are summarised below:

a) Section 1: Risk Assessment — Article 11.4.2. point 1

Risk assessment for entry of the BSE agent

After discussion of the entry assessment the Group concluded that the risk that the BSE agent could have entered Germany during the interval covered by the assessment, although very low, was not negligible.

The Group noted that MBM imports were reduced in 2015 in comparison with previous years, with a marginally increased participation from third countries (non-Members of the European Union-EU) and that cattle imports were reduced from all sources.

Risk of recycling and amplification of the BSE agent

Regarding the exposure assessment the Group concluded that there was a negligible risk of recycling and amplification of the BSE agent if it were present in Germany's cattle population during the interval covered by the assessment.

The Group acknowledged that Germany is a Member State of the European Union and follows the EU legislation. As such, SRM were removed from October 2000 and a mammal-to-ruminant feed ban was applied from December 2000.

Appropriate level of control and audit of the feed ban

The Group noted that the appropriate legislation, control and audit of the proper implementation of the feed ban had been in force for at least eight years and has detected infractions that were appropriately followed-up.

However, while Germany provided the information related to feed mill inspections, the data were not submitted in the form requested by the questionnaire (Article 1.6.5. of the *Terrestrial Code*). As a result the Group needed considerable time to assess its dossier.

b) Surveillance according to Articles 11.4.20. - 11.4.22.

The Group noted that the surveillance undertaken exceeded the minimum requirements of type B surveillance according to Article 11.4.22. on surveillance for BSE in the *Terrestrial Code*. 1,474,792 surveillance points were collected, compared to a minimal requirement of 150,000 for an adult cattle population of 5,805,304 over two years of age.

c) Other requirements — Article 11.4.2. points 2-4

Awareness programme

The Group determined that the awareness programme began in 1990 and met the requirements of the *Terrestrial Code*.

Compulsory notification and investigation

The Group noted that BSE was declared a notifiable disease under relevant legislation since 1990 and determined that the system for compulsory notification and investigation met the requirements of the *Terrestrial Code*.

Laboratory examination

The Group determined that the arrangements for laboratory examination met the requirements of the *Terrestrial Manual*.

d) BSE history in the country

The Group noted that Germany had reported 413 cases of classical BSE. The youngest birth cohort reported as affected by classical BSE was born in 2003, meaning that all indigenous cases of classical BSE were born more than 11 years preceding the submission of the dossier. All cattle which were reared with the BSE cases during their first year of life and for which investigation showed that they consumed the same potentially contaminated feed during that period, if alive in the country, were completely destroyed.

e) Compliance with conditions for 'negligible BSE risk' Status - Article 11.4.3.

Based on the information provided, the Group recommended that Germany be regarded as having met the requirements for recognition as complying with the BSE Chapter of the *Terrestrial Code* as 'negligible BSE risk'.

f) Conclusions

• Recommended status: 'Negligible BSE risk'

However the Group would suggest the Scientific Commission to request Germany to send the information on feed mills in accordance with the templates of Section 1, point 5d) to 5g) by mid-March 2016, in order to have a dossier fully compliant with the questionnaire (Article 1.6.5. of the *Terrestrial Code*).

3.3. Lithuania

The Group recalled that in 2007 the OIE received a dossier from Lithuania to evaluate the BSE risk status of its cattle population in accordance with the *Terrestrial Code*. The recommendation of the Group at that time was that Lithuania should be regarded as having met the requirements for recognition as complying with the BSE Chapter of the *Terrestrial Code* as 'controlled BSE risk'.

Lithuania submitted a dossier seeking a negligible BSE risk status in March 2015, and updated information in October 2015. The Group agreed that the submission conformed to the questionnaire provided to Member Countries wishing to make a formal evaluation of their BSE risk status according to the requirements of the *Terrestrial Code*.

The Group requested additional information and received clarification from Lithuania. Points specifically discussed by the Group are summarised below:

a) Section 1: Risk Assessment — Article 11.4.2. point 1

Risk assessment for entry of the BSE agent

The Group acknowledged that Lithuania imported bovine casings from a country having an undetermined BSE risk status. Further to the Group's request, regarding the import rules in place with an undetermined BSE risk country, Lithuania indicated that those casings were originally sourced from negligible risk countries.

After discussion of the entry assessment the Group concluded that the risk that the BSE agent could have entered Lithuania during the interval covered by the assessment, although very low, was not negligible.

• Risk of recycling and amplification of the BSE agent

Specific risk materials (SRM) were removed from 2002 and a mammal-to-ruminant feed ban was applied from 2000.

Further to the Group's request, Lithuania clarified that ruminant and non-ruminant materials were processed in the same rendering plant. However the resulting MBM were not used for feed production of farmed animals.

Regarding the exposure assessment the Group concluded that there was a negligible risk of recycling and amplification of the BSE agent if it were present in Lithuania's cattle population during the interval covered by the assessment.

Appropriate level of control and audit of the feed ban

The Group acknowledged that the appropriate legislation, control and audit of the proper implementation of the feed ban had been in force for at least eight years.

b) Surveillance according to Articles 11.4.20.-11.4.22.

The Group noted that the surveillance undertaken exceeded the minimum requirements of type B surveillance according to Article 11.4.22. on surveillance for BSE in the *Terrestrial Code*. 255,247 surveillance points were collected, compared to a minimal requirement of 35,750 for an adult cattle population of 349,608 over two years of age.

c) Other requirements — Article 11.4.2. points 2-4

Awareness programme

The Group determined that the awareness programme began in 2002 and met the requirements of the *Terrestrial Code*.

• Compulsory notification and investigation

The Group noted that BSE was declared a notifiable disease under relevant legislation since 1992 and determined that the system for compulsory notification and investigation met the requirements of the *Terrestrial Code*.

Laboratory examination

The Group determined that the arrangements for laboratory examination met the requirements of the *Terrestrial Manual*.

d) BSE history in the country

No BSE case had been recorded in Lithuania.

e) Compliance with conditions for 'negligible BSE risk' status - Article 11.4.3.

Based on the information provided, the Group recommended that Lithuania be regarded as having met the requirements for recognition as complying with the BSE Chapter of the *Terrestrial Code* as 'negligible BSE risk'.

f) Conclusions

• Recommended status: 'Negligible BSE risk'.

The Group noted that the surveillance points collected by Lithuania decreased regularly over years and that consequently, Lithuania may not reach anymore sufficient surveillance points by 2018-2019 should its recent performance continue. The Group would recommend Lithuania to maintain a level of surveillance sufficient to ensure continuing compliance with type B surveillance.

3.4. Mexico

The Group recalled that in January 2008 the OIE received a dossier from Mexico to evaluate the BSE risk status of its cattle population in accordance with the *Terrestrial Code*. The recommendation of the Group at that time was that Mexico should be regarded as having met the requirements for recognition as complying with the BSE Chapter of the *Terrestrial Code* as 'controlled BSE risk'. Mexico had been listed as a Member Country having a 'controlled BSE risk' status since May 2008.

In September 2015, Mexico submitted a dossier seeking a negligible BSE risk status. The Group agreed that the submission conformed to the questionnaire provided to Member Countries wishing to make a formal evaluation of their BSE risk status according to the requirements of the *Terrestrial Code*.

Points specifically discussed by the Group are summarised below:

a) Section 1: Risk Assessment — Article 11.4.2. point 1

Risk assessment for entry of the BSE agent

The Group acknowledged that MBM from ruminants have not been imported for more than eight years. The Group noted that animals and products of animal origin from countries having a controlled BSE risk have been imported during the past seven years.

After discussion of the entry assessment the Group concluded that the risk that the BSE agent could have entered Mexico during the interval covered by the assessment, although very low, was not negligible.

• Risk of recycling and amplification of the BSE agent

Regarding the exposure assessment the Group concluded that there was a negligible risk of recycling and amplification of the BSE agent if it were present in Mexico's cattle population during the interval covered by the assessment.

The Group acknowledged that SRM from imported cattle are tested and rendered while SRM from indigenous cattle are removed and consumed by humans as a cultural norm. Ruminant-to-ruminant feed ban was in place since 2001. Ruminant and non-ruminant feed productions are separated.

Appropriate level of control and audit of the feed ban

The Group noted an increase in the sampling throughout the feed chain over time. In addition Mexico could demonstrate the control and audit are carried out in feed mills for 8 years.

The Group noted that the appropriate legislation, control and audit of the proper implementation of the feed ban had been in force for at least eight years.

b) Surveillance according to Articles 11.4.20.-11.4.22.

The Group noted that the surveillance undertaken exceeded seven times the minimum requirements of type B surveillance according to Article 11.4.22. on surveillance for BSE in the *Terrestrial Code*. 1,276,230 surveillance points were collected, compared to a minimal requirement of 150,000 for an adult cattle population of more than 16 million over two years of age.

c) Other requirements — Article 11.4.2. points 2-4

Awareness programme

The Group determined that the awareness and education programs including personnel engaged in the rendering and feed industries, began in 1994 and met the requirements of the *Terrestrial Code*.

• Compulsory notification and investigation

The Group noted that BSE was declared a mandatory notifiable disease under relevant legislation since 1994 and determined that the system for compulsory notification and investigation met the requirements of the *Terrestrial Code*.

Laboratory examination

The Group determined that the arrangements for laboratory examination met the requirements of the *Terrestrial Manual*. The Group agreed that increase of the number of tests performed in the feed mills was described.

d) BSE history in the country

No cases of BSE had ever been recorded in Mexico.

e) Compliance with conditions for 'negligible BSE risk' status - Article 11.4.3.

Based on the information provided, the Group recommended that Mexico be regarded as having met the requirements for recognition as complying with the BSE Chapter of the *Terrestrial Code* as 'negligible BSE risk'.

f) Conclusions

• Recommended status: 'Negligible BSE risk'.

3.5. Namibia

In September 2015, Namibia submitted a dossier seeking a negligible BSE risk status. The Group agreed that the submission conformed to the questionnaire provided to Member Countries wishing to make a formal evaluation of their BSE risk status according to the requirements of the *Terrestrial Code*.

The Group requested additional information and received clarification from Namibia. Points specifically discussed by the Group are summarised below:

a) Section 1: Risk Assessment — Article 11.4.2. point 1

• Risk assessment for entry of the BSE agent

The Group noted that Namibia did not import from any country MBM or greaves, or feedstuff containing either from 1998. However Namibia imports live cattle from undetermined risk countries. These animals were under specific surveillance and tracing system. After discussion of the entry assessment the Group concluded that the risk that the BSE agent could have entered Namibia during the interval covered by the assessment, although very low, was not negligible.

• Risk of recycling and amplification of the BSE agent

The Group acknowledged that all produced MBM are exported and that SRM were removed and incinerated since 2001 and that MBM or greaves had not been fed to livestock animals since 1998. Further to Group request, Namibia provided the protocol describing the parameters to be used in terms of temperature, pressure, duration of the cooking and size of the particles, compliant with the requirements of Article 11.4.19.

The Group agreed that all mitigation measures were commensurate to the level of risk in the release assessment.

Regarding the exposure assessment the Group concluded that there was a negligible risk of recycling and amplification of the BSE agent if it were present in Namibia's cattle population during the interval covered by the assessment.

Appropriate level of control and audit of the feed ban

The Group acknowledged that ruminant to ruminant feed ban was in place since 1998 and noted that the appropriate legislation, control and audit of the proper implementation of the feed ban had been in force for at least eight years.

b) Surveillance according to Articles 11.4.20.-11.4.22.

The Group noted that the surveillance undertaken met the minimum requirements of type B surveillance according to Article 11.4.22. on surveillance for BSE in the *Terrestrial Code*. 198,377 surveillance points were collected, compared to a minimal requirement of 150,000 for an adult cattle population of 2,244,909 over two years of age.

From the dossier it appeared that Namibia relies mainly on clinical suspects and routine slaughter. However Namibia clarified that the other two streams (fallen stock and casualty slaughter) were sampled but not distinguished in the database. The Group recommended Namibia to report separately the surveillance points into the four different subpopulations in the future annual reconfirmations.

c) Other requirements — Article 11.4.2. points 2-4

Awareness programme

The Group determined that the awareness programme began in 1996 and met the requirements of the *Terrestrial Code*.

• Compulsory notification and investigation

Further to the Group's request, Namibia clarified that BSE is notifiable in the legislation through "Foreign animal diseases not previously reported in Namibia". The Group suggested Namibia to specifically include BSE into the list of notifiable diseases.

The Group concluded that the system for compulsory notification and investigation met the requirements of the *Terrestrial Code*.

Laboratory examination

The Group determined that the arrangements for laboratory examination met the requirements of the *Terrestrial Manual*.

d) BSE history in the country

No BSE cases had ever been recorded in Namibia.

e) Compliance with conditions for 'negligible BSE risk' status - Article 11.4.3.

Based on the information provided, the Group recommended that Namibia be regarded as having met the requirements for recognition as complying with the BSE Chapter of the *Terrestrial Code* as 'negligible BSE risk'.

f) Conclusions

• Recommended status: 'Negligible BSE risk'.

3.6. Spain

The Group recalled that in 2007 the OIE received a dossier from Spain to evaluate the BSE risk status of its cattle population in accordance with the *Terrestrial Code*. The recommendation of the Group at that time was that Spain should be regarded as having met the requirements for recognition as complying with the BSE Chapter of the *Terrestrial Code* as 'controlled BSE risk'.

In September 2015, Spain submitted a dossier seeking a negligible BSE risk status. The Group agreed that the submission conformed to the questionnaire provided to Member Countries wishing to make a formal evaluation of their BSE risk status according to the requirements of the *Terrestrial Code*. The exhaustiveness of the dossier was commended; however the Group reminded that the length of the dossier should be limited to 50 pages, according to the standard operating procedures governing the official recognition of disease status.

The Group requested additional information and received clarification from Spain. Points specifically discussed by the Group are summarised below:

a) Section 1: Risk Assessment — Article 11.4.2. point 1

• Risk assessment for entry of the BSE agent

After discussion of the entry assessment the Group concluded that the risk that the BSE agent could have entered Spain during the interval covered by the assessment, although very low, was not negligible. Indeed, the Group acknowledged that Spain imported MBM, including from countries of undetermined BSE risk status, for pet food. However, those imports did not include SRM.

Risk of recycling and amplification of the BSE agent

Regarding the exposure assessment the Group concluded that there was a negligible risk of recycling and amplification of the BSE agent if it were present in Spain's cattle population during the interval covered by the assessment.

The Group acknowledged that Spain is a Member State of the European Union and follows the EU legislation. As such, specific risk materials (SRM) were removed from 2001 and a mammal-to-ruminant feed ban was applied since 2001.

Appropriate level of control and audit of the feed ban

The Group noted that the appropriate legislation, control and audit of the proper implementation of the feed ban had been in force for at least eight years, has detected infractions that were appropriately followed-up.

The Group noted that the number of violations was regularly decreasing in feed mills visual inspections except for 2014 when a peak has been observed. Spain further clarified that this peak was due to an increase of control following the authorisation to use MBM of monogastric origin into aqua feed.

The Group acknowledged that the number of infractions (mainly due to structural problems and E. coli contaminations) was regularly decreasing in the feed mills.

b) Surveillance according to Articles 11.4.20.-11.4.22.

The Group noted that the surveillance undertaken exceeded the minimum requirements of type B surveillance according to Article 11.4.22. on surveillance for BSE in the *Terrestrial Code*. 418,547.11 surveillance points were collected, compared to a minimal requirement of 150,000 for an adult cattle population of more than 3 million over two years of age.

c) Other requirements — Article 11.4.2. points 2–4

Awareness programme

The Group determined that the awareness programme began in 2001 and met the requirements of the *Terrestrial Code*.

Compulsory notification and investigation

The Group noted that BSE was declared a notifiable disease under relevant legislation of 1990 and revised in 2003 and determined that the system for compulsory notification and investigation met the requirements of the *Terrestrial Code*.

Laboratory examination

The Group determined that the arrangements for laboratory examination met the requirements of the *Terrestrial Manual*.

d) BSE history in the country

The Group noted that Spain had reported 812 cases of BSE. As clarified by Spain, the youngest birth cohort reported as affected by classical BSE was born in October 2004 (youngest cases, born in early 2005 were affected by atypical BSE). This means that all indigenous classical BSE cases were born more than 11 years preceding the submission of the dossier. Therefore, Spain had met the provisions of Article 11.4.3. point 3 b). All cattle which were reared with the indigenous BSE cases during their first year of life, and for which investigation showed that they consumed the same potentially contaminated feed during that period, if alive in the country, were completely destroyed.

e) Compliance with conditions for 'negligible BSE risk' status - Article 11.4.3.

Based on the information provided, the Group recommended that Spain be regarded as having met the requirements for recognition as complying with the BSE Chapter of the *Terrestrial Code* as 'negligible BSE risk'.

f) Conclusions

• Recommended status: 'Negligible BSE risk'.

3.7. Other Member Country request

The Group assessed an additional request from a Member Country for the recognition of its BSE risk status that did not meet the requirements of the *Terrestrial Code* and the dossier was referred back to the corresponding Member Country.

4. Finalisation of an application from a Member Country for official recognition of BSE risk status

The Group finalised the assessment of a request from a Member Country for the recognition of its BSE risk status provided in 2014 and completed in 2015. This application did not meet the requirements of the *Terrestrial Code* and the dossier was referred back to the corresponding Member Country.

5. Evaluation of a request from a Member Country for the re-instatement of its BSE risk status

Romania

The Group discussed the BSE risk status of Romania, suspended since 27 June 2014, following the confirmation by the OIE Reference Laboratory of an atypical BSE case, first identified as a six years old cow. Few months later, a second atypical BSE case aged of 6 years was reported.

Further to the adoption in May 2015 of a revised BSE *Terrestrial Code* chapter, and submission of additional information by the Delegate of Romania, the Group re-assessed the situation against the new requirements of the *Terrestrial Code* excluding 'atypical BSE' for the purpose of official BSE risk status recognition.

Consequently, the Group recommended the Scientific Commission to re-instate the previously recognised "negligible BSE risk status" of Romania.

6. Revision of the questionnaire of the *Terrestrial Animal Health Code* Chapter 1.6. on BSE (Article 1.6.5.)

The Group was very pleased to revise the questionnaire of the *Terrestrial Code* Chapter 1.6. on BSE (Article 1.6.5.) and would recommend that it be presented for adoption as soon as possible in order to facilitate the compilation of the information and the subsequent assessment of future dossiers.

GENERAL INTRODUCTION

With reference to the Group's discussion at its 2014 meeting, the Group clarified this section by drafting specific questions related to the capability of the Veterinary Services and the obligation of disease notification, as they are crucial pre-requisites for BSE risk status recognition.

In addition, while considering other questionnaires for official disease recognition, the Group added a question for applicant Member Country to describe their husbandry and slaughtering practises.

SECTION 1: RISK ASSESSMENT

Entry assessment

Point 1: Importation of MBM

The Group clarified the text by using OIE terminology and replaced "countries of high BSE risk" by "undetermined or controlled BSE risk countries" or cross-referencing other articles of the *Terrestrial Code*.

The Group also made more specific changes, as follows:

The Group acknowledged that Article 11.4.24. states that the importation of MBM is irrelevant if they have never been fed to cattle in the past 8 years; however, the Group decided to maintain this question as this data is needed for the general assessment of a dossier.

The Group considered that asking documentation "based on official statistics" would provide more evidence and clarity on the imports.

Exposure assessment

In the absence of a definition in the *Terrestrial Code* chapter that would help applicant Member Countries understanding, the Group defined "rendering process" and "feed mill".

Following years of experience in the assessment of BSE dossiers, the Group structured differently Section 4 and 5 of the questionnaire, compiling all questions related to the rendering process into Section 4 and the questions related to the feed chain into Section 5.

This included a restructuration and clarification of the tables related to the renderers and feed mills inspections, differentiating:

- rendering plants processing ruminant material (including mixed species material) from rendering plants processing only material from non-ruminant origin; and

feed mills producing feed for non-ruminants from feed mills producing feed for ruminants only, and from feed mills producing feed for both.

SECTION 2: OTHER REQUIREMENTS

The Group clarified that a solid legal basis on BSE control and eradication would be needed to ensure an appropriate detection and follow-up of any BSE case.

SECTION 3: BSE SURVEILLANCE AND MONITORING SYSTEMS

The Group deleted the reference to Point 4 of Article 11.4.2 as it was not relevant.

To ensure that Member Countries are aware of the requirement of Article 11.4.22. section 4 – "Determining the point values of samples collected", the Group specified that at least three of the four subpopulations should be included in the BSE surveillance.

The Group deleted Point 4 because it was referring to the previous surveillance system adopted by OIE andit was considered as not relevant anymore.

SECTION 4: BSE HISTORY

While Chapter 11.4. excludes "atypical BSE" for the purpose of official BSE risk status recognition, the Group would appreciate that the number of BSE cases declared by the applicant countries include both the classical and the atypical BSE cases for transparency and full understanding of the situation.

The requirement related to the progeny of female cases was deleted as the past requirement of Chapter 11.4. had been removed.

7. Revision of the form for annual reconfirmation of BSE risk status

The Group revised the form for annual reconfirmation of BSE risk status to reflect the changes proposed in the tables of the questionnaire. The revised form is enclosed in <u>Annex III</u> for the Scientific Commission endorsement.

8. Considerations on Chapter 11.4. of the Terrestrial Code on BSE

The Group acknowledged the adopted version of Chapter 11.4. excluding 'atypical BSE' for the purpose of BSE risk status recognition. However, the Group was concerned that this generic sentence does not address the potential risk posed by atypical BSE cases.

The Group was aware that the *Terrestrial Manual* chapter for BSE was under the Biological Standard Commission's revision, to include test(s) to differentiate atypical from classical BSE that would be the basis for the case definitions.

Therefore the Group considered that there was no reason to delay the submission of the version endorsed by the Scientific Commission at its meeting in February 2015 for the consideration of Member Countries.

In addition, considering the relative growing importance of atypical BSE and the decrease of classical BSE incidence, the Group reiterated the need to revise the BSE surveillance system in order to fit better to the current epidemiological situation.

9. Any other business

The Group noted that many countries have decreased their level of surveillance and alerted those countries that they may not reach sufficient surveillance points within few years, should their current performance continue.

10. Finalisation and adoption of the draft report

The Group reviewed and amended the draft report provided by the rapporteur. The Group agreed that the report reflected the discussions.

.../Appendices

Appendix I

MEETING OF THE OIE *AD HOC* GROUP ON BOVINE SPONGIFORM ENCEPHALOPATHY (BSE) RISK STATUS EVALUATION OF MEMBER COUNTRIES

Paris, 24-26 November 2015

Agenda

- 1. Opening
- 2. Adoption of the agenda and appointment of chairperson and rapporteur
- 3. Evaluation of applications from Member Countries for official recognition of BSE risk status
 - Costa Rica
 - Germany
 - Lithuania
 - Mexico
 - Namibia
 - Spain
- 4. Finalisation of an application from a Member Country for official recognition of BSE risk status
- 5. Evaluation of a request from a Member Country for the re-instatement of its BSE risk status
 - Romania
- 6. Revision of the questionnaire of the *Terrestrial Animal Health Code* Chapter 1.6. on BSE (Article 1.6.5.)
- 7. Revision of the form for annual reconfirmation of BSE risk status
- 8. Considerations on Chapter 11.4. of the Terrestrial Code on BSE
- 9. Any other business
- 10. Finalisation and adoption of the draft report

Appendix II

MEETING OF THE OIE *AD HOC* GROUP ON BOVINE SPONGIFORM ENCEPHALOPATHY (BSE) RISK STATUS EVALUATION OF MEMBER COUNTRIES

Paris, 24-26 November 2015

List of participants

MEMBERS

Dr Armando Giovannini

(Attended via teleconference) Istituto Zooprofilattico Sperimentale dell'Abruzzo e del Molise "G. Caporale" Via Campo Boario, 64100 Teramo ITALY

Tel: (39 0861) 33 24 27 Fax (39 0861) 33 22 51 a.giovannini@izs.it

Dr Dagmar Heim

Vollzugsunterstützung, Lebensmittelhygiene Swiss Federal Food and Veterinary Office Schwarzenburgstrasse 161 PO box 3003 Bern SWITZERLAND Tel: (41-58) 484 99 93 Fax: (41-58) 483 85 94

Prof. Thomas C. Mettenleiter

dagmar.heim@blv.admin.ch

(Invited but could not attend)
Friedrich-Loeffler-Institute, Federal
Research Institute for Animal Health
Südufer 10 , 17493 Greifswald , Insel Riems
GERMANY

Tel.: (49-38) 351 71 02 thomas.mettenleiter@fli.bund.de

Dr John A. Kellar

(Invited but could not attend)
TSE Policy Coordinator
Animal Products Directorate
Canadian Food Inspection Agency
3851 Fallowfield Road
Room C305
Ottawa K2H 8P9
CANADA
Tel: (1.613) 228 66 90 (54 07)

Fax: (1.613) 228 66 75 john.kellar@inspection.gc.ca

Dr Martial Plantady

Legislative officer
European Commission
Health & Consumers
Unit G4: food, alert system and training
B232 03/22
B-1049 Brussels/Belgium
+32 2 298 66 70
martial.plantady@ec.europa.eu

Dr Rodolfo C. Rivero

National Coordinator TSE
Ministry of Livestock, Agriculture and
Fisheries
Director Norwest Regional Laboratory
Veterinary Laboratorios Directorate "Miguel
C. Rubino"
C.C. 57037
C.P. 6000 Paysandù
URUGUAY
Tel (598) 72 25229 or 27871
Fax (598) 72 27614
rrivero@mgap.gub.uy
rodolfo.riverogarcia@gmail.com

Dr Shigeki Yamamoto

Professor,
Tokai University,
School of Marine Science and Technology,
Department of Fisheries, Course of Food
Sc1ence, 3-20-1, Orido, Shimizu-ku,
Shizuoka-city, Shizuoka, 424-8610, Japan
Tel: 81 54 334 0411
Fax: 81 54 337 0239
syamamoto@tokai-u.jp

OIE HEADQUARTERS

Dr Bernard Vallat

oie@oie.int

Director General 12 rue de Prony 75017 Paris FRANCE Tel: 33 - (0)1 44 15 18 88 Fax: 33 - (0)1 42 67 09 87

Dr Brian Evans

Deputy Director General Head - Scientific and Technical Department b.evans@oie.int

Dr Maria Luisa Danzetta

Chargée de mission Scientific and Technical Department m.danzetta@oie.int

Dr Simona Forcella

Chargée de mission Scientific and Technical Department s.forcella@oie.int

Dr Laure Weber-Vintzel

Officer in charge of the recognition of disease status Scientific and Technical Department I.weber-vintzel@oie.int

Appendix III

Form for the annual reconfirmation of the bovine spongiform encephalopathy (BSE) risk status of OIE Member Countries (submit during the month of November each year)

To be filled in, dated, signed by the Delegate and sent back to disease.status@oie.int

YEAR	COUNTRY
------	---------

In accordance with Resolution No. 15 adopted at the 83rd General Session and other relevant Resolutions previously adopted, Member Countries having an officially recognised disease status or BSE risk status should reconfirm every year, during the month of November that their status has remained unchanged.

	QUESTION	YES	NO
1.	Is your country currently on the List of Member Countries officially recognised as having a negligible/controlled BSE risk by the OIE? (please submit this form only if yes)		
2.	Have any modification in the legislation regarding BSE and feed control been made during the past 12 months?		
3.	Does the surveillance programme comply with the guideline in Articles 11.4.20. to 11.4.22. of the <i>Terrestrial Code</i> ?		
4.	Have any changes in the epidemiological situation or other significant events regarding BSE occurred during the past 12 months?		

5. Please complete the 5 following tables

Table 1: Describe bovines and ruminant-derived meat-and-bone meal (MBM) and greaves imports from all countries in this table.

Country of	Commodity and quantity							
origin of	Cattle		MBM & products containing MBM					
import	Number of head	Use	Amount	Type of commodity (+)				

⁽⁺⁾ Specify type and intended use of feedstuff and species composition of ingredients

Table 2: Complete this table on the audit findings in rendering plants (inspections and sampling, if applicable).

Type of renderer	Number of plants	Number of plants in (A) inspected under competent Authority supervision	Number of inspections in (B) in total	Total number of plants in (B) with infractions	Total number of plants in (B) inspected under competent Authority supervision with sampling	Total number of plants in (E) with positive test results	
	(A)	(B)	(C)	(D)	(E)	(F)	
Material of ruminant origin (or mixed species)					Not applicable	Not applicable	
Only material of non-ruminant origin							

Table 3: Complete this table on the audit findings in feed mills producing feed for ruminants (inspections and sampling, if applicable).

Type of feed mills	Number of feed mills	Number of feed mills in (A) inspected	Number of inspections in (B) in total	Total number of feed mills in (B) with infractions	Total number of inspected feed mills in (B) with sampling	Total number of feed mills in (C) with positive test results
	(A)	(B)	(C)	(D)	(E)	(F)
For ruminants						
only						
For non-						
ruminant only						
For both						

Table 4: Complete this table for each plant in Tables 2 and 3 with infractions, specifying the type of infraction and corrective measures.

Type of plant	Plant ID	Nature of infraction	Corrective measures	Follow up
Rendering plant	ID 1			
	ID 2			
	ID 3 etc.			
Feed mill	ID 1			
	ID 2			
	ID 3 etc.			

Table 5: Record surveillance conducted since your last submission or update in this table (cover a period of 12 months).

SUMMARY TABLE FOR BSE SURVEILLANCE								
Surveillance subpopulations								
	Routine slaughter		Fallen stock		Casualty slaughter		Clinical suspect	
	Samples	Points	Samples	Points	Samples	Points	Samples	Points
≥2 and <4 years	0	0,1	0	0,2	0	0,4	0	260
≥4 and <7 years	0	0,2	0	0,9	0	1,6	0	750
≥7 and <9 years	0	0,1	0	0,4	0	0,7	0	220
≥9 years	0	0	0	0,1	0	0,2	0	45
Subtotals	0		0		0		0	
Total points	0		C)	0		0	

I certify that the above are correct.						
Date:	Signature of Delegate:					

[Reference to the relevant article in the BSE chapter of the *Terrestrial Animal Health Code* (2015)]

Article 11.4.3.

Negligible BSE risk

<u>Commodities</u> from the cattle population of a country, <u>zone</u> or <u>compartment</u> pose a negligible risk of transmitting the BSE agent if the following conditions are met:

- 1. a <u>risk assessment</u>, as described in point 1 of Article <u>11.4.2.</u>, has been conducted in order to identify the historical and existing risk factors, and the Member Country has demonstrated that appropriate specific measures have been taken for the relevant period of time defined below to manage each identified risk;
- the Member Country has demonstrated that Type B <u>surveillance</u> in accordance with Articles <u>11.4.20</u>. to <u>11.4.22</u>. is in place and the relevant points target, in accordance with Table 1, has been met;

3. EITHER:

- a. there has been no <u>case</u> of BSE or, if there has been a <u>case</u>, every <u>case</u> of BSE has been demonstrated to have been imported and has been completely destroyed, and
 - i) the criteria in points 2 to 4 of Article 11.4.2. have been complied with for at least seven years; and
 - ii) it has been demonstrated through an appropriate level of control and audit, including that of cross contamination, that for at least eight years neither <u>meat-and-bone meal</u> nor <u>greaves</u> derived from ruminants has been fed to ruminants;

OR

- b. if there has been an indigenous <u>case</u>, every indigenous <u>case</u> was born more than 11 years ago; and
 - i) the criteria in points 2 to 4 of Article 11.4.2. have been complied with for at least seven years; and
 - ii) it has been demonstrated through an appropriate level of control and audit, including that of cross contamination, that for at least eight years neither <u>meat-and-bone meal</u> nor <u>greaves</u> derived from ruminants has been fed to ruminants;

iii) all BSE cases, as well as:

- all cattle which, during their first year of life, were reared with the BSE <u>cases</u> during their first year of life, and which investigation showed consumed the same potentially contaminated feed during that period, or
- if the results of the investigation are inconclusive, all cattle born in the same <u>herd</u> as, and within 12 months of the birth of, the BSE <u>cases</u>,

if alive in the country, <u>zone</u> or <u>compartment</u>, are permanently identified, and their movements controlled, and, when slaughtered or at death, are completely destroyed.

The Member Country or <u>zone</u> will be included in the list of negligible risk only after the submitted evidence has been accepted by the OIE. Retention on the list requires that the information for the previous 12 months on <u>surveillance</u> results and feed controls be re-submitted annually and changes in the epidemiological situation or other significant events should be reported to the OIE according to the requirements in Chapter 1.1.

Article 11.4.4

Controlled BSE risk

<u>Commodities</u> from the cattle population of a country, <u>zone</u> or <u>compartment</u> pose a controlled risk of transmitting the BSE agent if the following conditions are met:

- 1. a <u>risk assessment</u>, as described in point 1 of Article <u>11.4.2.</u>, has been conducted in order to identify the historical and existing risk factors, and the Member Country has demonstrated that appropriate measures are being taken to manage all identified risks, but these measures have not been taken for the relevant period of time;
- the Member Country has demonstrated that Type A <u>surveillance</u> in accordance with Articles <u>11.4.20</u>. to <u>11.4.22</u>. has been carried out and the relevant points target, in accordance with Table 1, has been met; Type B <u>surveillance</u> may replace Type A <u>surveillance</u> once the relevant points target is met;

3. EITHER:

- a. there has been no <u>case</u> of BSE or, if there has been a <u>case</u>, every <u>case</u> of BSE has been demonstrated to have been imported and has been completely destroyed, the criteria in points 2 to 4 of Article <u>11.4.2.</u> are complied with, and it can be demonstrated through an appropriate level of control and audit, including that of cross contamination, that neither <u>meat-and-bone meal</u> nor <u>greaves</u> derived from ruminants has been fed to ruminants, but at least one of the following two conditions applies:
 - i) the criteria in points 2 to 4 of Article 11.4.2. have not been complied with for seven years;
 - ii) it cannot be demonstrated that controls over the feeding of <u>meat-and-bone meal</u> or <u>greaves</u> derived from ruminants to ruminants have been in place for eight years;

OR

b. there has been an indigenous <u>case</u> of BSE, the criteria in points 2 to 4 of Article <u>11.4.2</u>, are complied with, and it can be demonstrated through an appropriate level of control and audit, including that of cross contamination, that neither <u>meat-and-bone meal</u> nor <u>greaves</u> derived from ruminants has been fed to ruminants;

and all BSE cases, as well as:

- all cattle which, during their first year of life, were reared with the BSE <u>cases</u> during their first year of life, and which investigation showed consumed the same potentially contaminated feed during that period, or
- if the results of the investigation are inconclusive, all cattle born in the same <u>herd</u> as, and within 12 months of the birth of, the BSE <u>cases</u>,

if alive in the country, <u>zone</u> or <u>compartment</u>, are permanently identified, and their movements controlled, and, when slaughtered or at death, are completely destroyed.

The Member Country or <u>zone</u> will be included in the list of controlled risk only after the submitted evidence has been accepted by the OIE. Retention on the list requires that the information for the previous 12 months on <u>surveillance</u> results and feed controls be re-submitted annually and changes in the epidemiological situation or other significant events should be reported to the OIE according to the requirements in Chapter 1.1.

Form for the annual reconfirmation of the bovine spongiform encephalopathy (BSE) risk status of OIE Member Countries (submit during the month of November each year)

To be filled in, dated, signed by the Delegate and sent back to disease.status@oie.int

YEAR COUNTRY	ZONE
--------------	------

In accordance with Resolution No. 15 adopted at the 83rd General Session and other relevant Resolutions previously adopted, Member Countries having an officially recognised disease status or BSE risk status should reconfirm every year, during the month of November that their status has remained unchanged.

	QUESTION	YES	NO
1.	Is the zone currently on the List of zones officially recognised as having a		
	negligible/controlled BSE risk by the OIE? (please submit this form only if yes)		
2.	Have any modification in the legislation regarding BSE and feed control been made		
	during the past 12 months?		
3.	Does the surveillance programme comply with the guideline in Articles 11.4.20. to		
	11.4.22. of the Terrestrial Code?		
4.	Have any changes in the epidemiological situation or other significant events regarding		
	BSE occurred during the past 12 months?		

Please complete the 5 following tables

Table 1: Describe bovines and ruminant-derived meat-and-bone meal (MBM) and greaves imports from all countries and introduced from the undetermined zone in this table

Commodity and quantity							
Cattle		MBM & products containing MBM					
Number of head	Use	Amount	Type of commodity (+				
			Cattle MBM & p				

⁽⁺⁾ Specify type and intended use of feedstuff and species composition of ingredients

Table 2: Complete this table on the audit findings in rendering plants (inspections and sampling, if applicable).

Type of renderer	Number of plants	Number of plants in (A) inspected under competent Authority supervision	Number of inspections in (B) in total	Total number of plants in (B) with infractions	Total number of plants in (B) inspected under competent Authority supervision with sampling	Total number of plants in (E) with positive test results
	(A)	(B)	(C)	(D)	(E)	(F)
Material of ruminant origin (or mixed species)					Not applicable	Not applicable
Only material of non-ruminant origin						

Table 3: Complete this table on the audit findings in feed mills producing feed for ruminants (inspections and sampling, if applicable).

Type of feed mills	Number of feed mills	Number of feed mills in (A) inspected	Number of inspections in (B) in total	Total number of feed mills in (B) with infractions	Total number of inspected feed mills in (B) with sampling	Total number of feed mills in (C) with positive test results
	(A)	(B)	(C)	(D)	(E)	(F)
For ruminants only						
For non- ruminant only						
For both						

Table 4: Complete this table for each plant in Tables 2 and 3 with infractions, specifying the type of infraction and corrective measures.

Type of plant	Plant ID	Nature of infraction	Corrective measures	Follow up
Rendering plant	ID 1			
	ID 2			
	ID 3 etc.			
Feed mill	ID 1			
	ID 2			
	ID 3 etc.			

Table 5: Record surveillance conducted since your last submission or update in this table (cover a period of 12 months).

SUMMARY TABLE FOR BSE SURVEILLANCE								
			Surveillance	e subpopulat	ions			
	Routine	slaughter	Faller	stock	Casualty	slaughter	Clinical	suspect
	Samples	Points	Samples	Points	Samples	Points	Samples	Points
≥2 and <4 years	0	0,1	0	0,2	0	0,4	0	260
≥4 and <7 years	0	0,2	0	0,9	0	1,6	0	750
≥7 and <9 years	0	0,1	0	0,4	0	0,7	0	220
≥9 years	0	0	0	0,1	0	0,2	0	45
Subtotals	0		0		0		0	
Total points		0		0		0	()

I certify that the above are correct.	
Date:	Signature of Delegate:

[Reference to the relevant article in the BSE chapter of the *Terrestrial Animal Health Code* (2015)]

Article 11.4.3.

Negligible BSE risk

<u>Commodities</u> from the cattle population of a country, <u>zone</u> or <u>compartment</u> pose a negligible risk of transmitting the BSE agent if the following conditions are met:

- 1. a <u>risk assessment</u>, as described in point 1 of Article <u>11.4.2.</u>, has been conducted in order to identify the historical and existing risk factors, and the Member Country has demonstrated that appropriate specific measures have been taken for the relevant period of time defined below to manage each identified risk;
- 2. the Member Country has demonstrated that Type B <u>surveillance</u> in accordance with Articles <u>11.4.20.</u> to <u>11.4.22.</u> is in place and the relevant points target, in accordance with Table 1, has been met;

3. EITHER:

- a. there has been no <u>case</u> of BSE or, if there has been a <u>case</u>, every <u>case</u> of BSE has been demonstrated to have been imported and has been completely destroyed, and
 - i) the criteria in points 2 to 4 of Article 11.4.2. have been complied with for at least seven years; and
 - ii) it has been demonstrated through an appropriate level of control and audit, including that of cross contamination, that for at least eight years neither <u>meat-and-bone meal</u> nor <u>greaves</u> derived from ruminants has been fed to ruminants;

4. OR

- b. if there has been an indigenous *case*, every indigenous *case* was born more than 11 years ago; and
 - i) the criteria in points 2 to 4 of Article 11.4.2. have been complied with for at least seven years; and
 - ii) it has been demonstrated through an appropriate level of control and audit, including that of cross contamination, that for at least eight years neither <u>meat-and-bone meal</u> nor <u>greaves</u> derived from ruminants has been fed to ruminants;

iii) all BSE <u>cases</u>, as well as:

- all cattle which, during their first year of life, were reared with the BSE <u>cases</u> during their first year of life, and which investigation showed consumed the same potentially contaminated feed during that period, or
- if the results of the investigation are inconclusive, all cattle born in the same <u>herd</u> as, and within 12 months of the birth of, the BSE <u>cases</u>,

if alive in the country, <u>zone</u> or <u>compartment</u>, are permanently identified, and their movements controlled, and, when slaughtered or at death, are completely destroyed.

The Member Country or <u>zone</u> will be included in the list of negligible risk only after the submitted evidence has been accepted by the OIE. Retention on the list requires that the information for the previous 12 months on <u>surveillance</u> results and feed controls be re-submitted annually and changes in the epidemiological situation or other significant events should be reported to the OIE according to the requirements in Chapter <u>1.1.</u>

Article 11.4.4.

Controlled BSE risk

<u>Commodities</u> from the cattle population of a country, <u>zone</u> or <u>compartment</u> pose a controlled risk of transmitting the BSE agent if the following conditions are met:

- 1. a *risk assessment*, as described in point 1 of Article <u>11.4.2.</u>, has been conducted in order to identify the historical and existing risk factors, and the Member Country has demonstrated that appropriate measures are being taken to manage all identified risks, but these measures have not been taken for the relevant period of time;
- the Member Country has demonstrated that Type A <u>surveillance</u> in accordance with Articles <u>11.4.20</u>. to <u>11.4.22</u>. has been carried out and the relevant points target, in accordance with Table 1, has been met; Type B <u>surveillance</u> may replace Type A <u>surveillance</u> once the relevant points target is met;
- 3. EITHER:
 - a. there has been no <u>case</u> of BSE or, if there has been a <u>case</u>, every <u>case</u> of BSE has been demonstrated to have been imported and has been completely destroyed, the criteria in points 2 to 4 of Article <u>11.4.2.</u> are complied with, and it can be demonstrated through an appropriate level of control and audit, including that of cross contamination, that neither <u>meat-and-bone meal</u> nor <u>greaves</u> derived from ruminants has been fed to ruminants, but at least one of the following two conditions applies:
 - i) the criteria in points 2 to 4 of Article 11.4.2. have not been complied with for seven years;
 - ii) it cannot be demonstrated that controls over the feeding of <u>meat-and-bone meal</u> or <u>greaves</u> derived from ruminants to ruminants have been in place for eight years;

OR

b. there has been an indigenous <u>case</u> of BSE, the criteria in points 2 to 4 of Article <u>11.4.2</u>, are complied with, and it can be demonstrated through an appropriate level of control and audit, including that of cross contamination, that neither <u>meat-and-bone meal</u> nor <u>greaves</u> derived from ruminants has been fed to ruminants;

and all BSE cases, as well as:

- all cattle which, during their first year of life, were reared with the BSE <u>cases</u> during their first year of life, and which investigation showed consumed the same potentially contaminated feed during that period, or
- if the results of the investigation are inconclusive, all cattle born in the same <u>herd</u> as, and within 12 months of the birth of, the BSE <u>cases</u>,

if alive in the country, <u>zone</u> or <u>compartment</u>, are permanently identified, and their movements controlled, and, when slaughtered or at death, are completely destroyed.

The Member Country or <u>zone</u> will be included in the list of controlled risk only after the submitted evidence has been accepted by the OIE. Retention on the list requires that the information for the previous 12 months on <u>surveillance</u> results and feed controls be re-submitted annually and changes in the epidemiological situation or other significant events should be reported to the OIE according to the requirements in Chapter <u>1.1.</u>

Original: English
December 2015

MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION OF PESTE DES PETITS RUMINANTS STATUS OF MEMBER COUNTRIES Paris, 15-16 December 2015

A meeting of the OIE *ad hoc* Group on the Evaluation of the Peste des petits ruminants (PPR) Status of Member Countries (hereafter the Group) was held at the OIE Headquarters from 15 to 16 December 2015.

1. Opening

On behalf of Dr Bernard Vallat, Director General of the OIE, Dr Brian Evans, OIE Deputy Director General and Head of the Scientific and Technical Department, welcomed the Group. He thanked the experts for their commitment towards the OIE and for their personal and professional time invested to evaluate the dossiers.

Dr Evans updated the Group on the recent elections of the OIE Specialist Commissions and the new composition of the OIE Council. He mentioned the plan to strengthen coordination between the Specialist Commissions and the Council to better respond to Member Countries' request. He also highlighted the importance of the scientific credibility and the integrity of the official disease status recognition procedures.

Dr Evans mentioned the importance of transparency and procedural fairness. He reminded the Group that submitted dossiers were considered the property of the applicant Member Country and sharing of dossiers between countries could be done, when requested, through bilateral negotiation between both countries. Nevertheless, he pointed out that a recent amendment in the Standard Operating Procedures for official recognition of disease status or risk status of bovine spongiform encephalopathy and for the endorsement of national official control programmes of Member Countries clarifies that a Member Country requested to provide the whole or part of its dossier during the 60-day comment period prior to the General Session should comply with the request within a maximum of 10 days.

Dr Evans reminded the Group that it should produce a detailed report in order to give clear understanding to the Scientific Commission for Animal Diseases (Scientific Commission) and to the applicant Member Countries on the procedural process and on possible information gaps or specific areas that should be addressed in the future. He also mentioned that, once endorsed by the relevant Specialist Commission, the *ad hoc* Group reports would not only be annexed to the Specialist Commission reports but also made individually available on the OIE website to facilitate the access to the reports and to the rationale regarding the *Terrestrial Animal Health Code* (*Terrestrial Code*) Chapter revisions.

2. Adoption of the agenda and appointment of chairperson and rapporteur

The Group was chaired by Dr Adama Diallo. Dr Michael Baron acted as rapporteur, with the support of the OIE Secretariat. The Group endorsed the proposed agenda.

The Agenda and list of participants are presented as Appendices I and II, respectively.

3. Evaluation of applications from Member Countries for official recognition of PPR free status

3.1 Latvia

In October 2015 Latvia submitted a dossier to the OIE seeking the recognition of PPR free status on historical grounds. The Group requested additional information and received clarification from Latvia.

a) Animal disease reporting

The Group considered that Latvia had a record of regular and prompt animal disease reporting having regularly submitted the requested reports to the OIE. The Group acknowledged that PPR was notifiable in the country since 1992.

b) Veterinary Services

The Group acknowledged that the Veterinary Authority had current knowledge of, and authority over, all domestic sheep and goats in the country and appreciated that training was regularly provided to the Veterinary Services.

The Group also appreciated that premises were registered and sheep and goats individually identified, which would allow traceability in case of PPR introduction.

c) Situation of PPR in the past 24 months

The Group noted that PPR has never been reported in Latvia and that therefore Latvia was eligible for historical freedom in accordance with Article 1.4.6. of the *Terrestrial Code*.

d) Absence of vaccination in the past 24 months and no entry of vaccinated animals

The Group acknowledged that vaccination has never been carried out in Latvia and was not part of their response strategy. Further to the Group's request, Latvia clarified that the use of PPR vaccine was actually prohibited and provided legal references. It appeared from the dossier that the entry of vaccinated animals was not allowed.

e) Importation of domestic ruminants and their semen, oocytes or embryos - in accordance with relevant articles of Chapter 14.7.

The Group acknowledged that import control procedures for animals and animal products were in accordance with European Union (EU) legislation and the requirements of the *Terrestrial Code*. Small ruminants or their products had not been imported from countries outside the EU in 2013 and 2014.

f) Surveillance for PPR and PPR virus infection in accordance with Articles 14.7.27. to 14.7.33. and with Chapter 1.4.

The Group agreed that Latvia complied with the requirements of a historically free country as defined in Article 1.4.6. of the *Terrestrial Code* and concluded that the surveillance described in the dossier was appropriate to the epidemiological situation. In addition, serological surveillance for PPR was carried out in 2002 and 2003 with negative results. Due to the historical absence of PPR in the country, specific serological diagnostic tests had not been performed since, but clinical surveillance has been in place.

g) Regulatory measures for the early detection, prevention and control of PPR

The Group agreed that the necessary regulatory measures for early detection, prevention and control of PPR were in place.

The Group noted that Latvia divided infectious animal diseases into three groups and that, in cases of clinical signs suggestive of PPR, the event would fall into the Epizootic Disease category. Livestock keepers and veterinarians were obliged to notify immediately whenever any case of infectious disease was suspected. Relevant legislation was adequately mentioned.

h) Compliance with the questionnaire in Article 1.6.9.

The Group noted that Latvia could have provided more details and better explanations to some of the questions in Article 1.6.9. However the Group agreed that the submitted dossier was compliant with the questionnaire.

Conclusion

Considering the information submitted in the dossier and Latvia's answer to the Group's question, the Group concluded that the application was compliant with the requirements of Chapter 14.7. and with the questionnaire under Article 1.6.9. of the *Terrestrial Code*. The Group therefore recommended that Latvia be recognised as a PPR free country.

3.2. Other request

The Group assessed the request of another Member Country for the recognition of PPR free status based on historical grounds. The Group concluded that the Member Country had not met the requirements of the *Terrestrial Code* and the dossier was referred back to the corresponding Member Country.

4. Revision of the questionnaires of the *Terrestrial Code* Chapter 1.6. on PPR (Articles 1.6.9. and 1.6.12.)

The Group discussed the revisions of the questionnaire in Articles 1.6.9. and 1.6.12. as follows:

Article 1.6.9.: Questionnaires on peste des petits ruminants (PPR) - PPR FREE COUNTRY

The Group first amended the introductive paragraph to prevent applicant countries from only claiming compliance without providing detailed evidence or rationale It was clarified that the dossier should describe the current situation and procedures applied in the country, explaining how these comply with the *Terrestrial Code*.

In addition, the Group proposed minor changes to improve clarity all along the questionnaires. Main changes are detailed below:

1. Introduction

Questions c), d) and e) of the section on surveillance, relating to the description of livestock and wildlife demographics, slaughterhouses and markets, were moved to the restructured introduction.

2. <u>Veterinary System</u>

Point b) Veterinary Services. The Group noted that a reference to Chapters 1.1. and 1.4. of the *Terrestrial Code* should be added, while the reference to an article in the *Manual of Diagnostic Tests and Vaccines for Terrestrial Animals* was removed as it is mentioned in another section of the questionnaire.

Training and awareness programmes – the Group suggested that a description of the training and awareness programmes at all relevant levels of the small ruminant production industry and associated stakeholders should be provided and therefore dedicated a specific question to the topic.

The Group also added a new point to request information on any OIE PVS missions if performed in their country. The Group reiterated that requesting a PVS mission to the OIEwas not a pre-requisite to official status recognition but agreed that this information, if available, would be helpful to an informed evaluation of the dossiers.

Finally the Group suggested that Question 3e), relating to animal movement and identification, be moved to the end of this section.

3. PPR surveillance

PPR surveillance was moved up from Section 5 to become Section 3. While the content was not modified, the wording of this section was clarified.

4. PPR diagnosis

The Group clarified that, for the purpose of PPR freedom recognition, ISO accreditation was not a prerequisite in terms of quality assurance.

While acknowledging that the risk related to a PPR virus escape from an infected sample is very low, the Group felt that it was important to indicate biosecurity measures in place in any laboratory handling live PPR virus. The Group clarified that this information should only be requested for laboratories handling live PPR virus.

5. PPR prevention

Point a) The Group acknowledged that this section excludes trade and import movements and rather refers to regional movements. This would include trans-border transhumance, trans-border movement of animals between communities and trans-frontier parks. The Group modified this section accordingly.

Points b, c, d) The Group breakdown the original question into several individual questions and clarified the need for applicant countries to indicate the procedures in place for assessing the risk linked to imports of small ruminants or their products.

The Group finally added a request regarding the risk management strategy for uncontrolled animal movements related to seasonal migration.

6. PPR eradication

This section was moved from Section 3 to immediately before the section on contingency measures and its title was changed to "PPR situation". The rationale was that its previous position and title were confusing to countries applying for status of freedom on historical grounds. The Group restructured this section to clearly request whether or not Member Countries apply for historical freedom and to include rinderpest vaccine or any other vaccine ever used to protect against PPR in the description of the history of the dossier.

Finally, the Group compared the definition of the word 'eradication' in the *Terrestrial Code*'s glossary with its common use which refers to a global/worldwide elimination of a disease pathogen. The Group suggested that the Scientific Commission consider whether the definition of the Glossary should be revised and whether the use of the word 'elimination' should be explored.

7. Control measures and contingency planning

The Group amended this section to clarify that Member Countries should describe the actions that would be taken in response to an outbreak.

8. Compliance with the *Terrestrial Code*

Based on the experience gained from assessing dossiers submitted by Member Countries, the Group suggested that this section should ensure that the declaration from the Delegate, covering Point 2 b ii) of Article 14.7.3., is included in the application.

9. Recovery of status

The Group agreed that a Member Country that wishes to follow the recovery procedure, following the suspension of its status, should provide a dossier answering to Sections 1 to 7 of the questionnaire. This dossier should highlight the gaps that led to the occurrence of PPR outbreak(s) and indicate the adjustments made to avoid a new introduction in the future.

Article 1.6.9.: Questionnaires on peste des petits ruminants (PPR) - PPR FREE ZONE

The Group applied the proposed modifications of the questionnaire for a PPR free country to the questionnaire for a PPR free zone. In addition the Group also specified, where relevant, the provisions applicable to a proposed free zone.

Article 1.6.12.: Questionnaire on endorsement of an official control programme for peste des petits ruminants (PPR)

The Group insisted on the importance of providing a detailed national control plan. The Secretariat of the OIE informed the Group about the similar concerns of the *ad hoc* Group on contagious bovine pleuropneumonia (CBPP) and the recent changes proposed to the questionnaire on endorsement of an official control programme for CBPP (Article 1.6.13.). The PPR Group supported the approach proposed by the CBPP *ad hoc* Group and adapted it to the questionnaire for official control programme for PPR.

5. Information on the PPR Global Strategy

Dr Susanne Munstermann updated the Group on the development of the PPR Global Control and Eradication Strategy that was endorsed at the International Conference in Abidjan, Cote d'Ivoire in April 2015 in which 76 countries participated. This Strategy, drafted by the Global Framework for the progressive control of Transboundary Animal Diseases (GF-TADs) PPR Working Group, and endorsed by FAO and OIE, has three components: 1. control and eradication of PPR; 2. strenghtening of Veterinary Services; 3. control of other small ruminant diseases.

The Strategy targets 70 countries (considered as infected or at risk) through a regional approach, with the collaboration of Regional Economic Communities. Nine regions have been identified. Since the endorsement of the Global Strategy in Abidjan, three PPR regional roadmap meetings were conducted for the regions of Central Africa, East Africa and the Middle East; other regional meetings would follow in 2016. During these regional meetings the Global Strategy was presented in detail. Countries were requested to self-assess their situation with regards to PPR in 2015 and where they saw themselves over the ensuing years with respect to the Strategy's 15 year time frame. From the three roadmaps considered, some countries planned to eliminate PPR in a shorter time than the 15-year timeframe, and others would complete such elimination within the time frame, mainly depending on available funding.

A governing body headed by three regional CVOs, the Regional Advisory Group, was estabilished in each of the nine regions. The Regional Advisory Group, elected for a period of three years, would oversee the implementation of the Global Strategy.

Dr Munsterman also mentioned the meeting of an Expert Group on the costing of the PPR Global Strategy which took place at FAO, Rome, in October 2015. The overall cost of the Global Strategy was reduced. A new budget will be developed in greater detail and once agreed by OIE and FAO, presented for advocacy to potential donors.

Dr Munstermann indicated that OIE and FAO were preparing guidelines for the formulation of regional or national PPR control and eradication strategies, for use by Regional Economic Communities, FAO National Offices and consultants, to assist in aligning any existing national or regional strategy with the overarching PPR Global Strategy. She finally indicated that a Global Secretariat would be established to implement a PPR-dedicated control and eradication programme and would eventually replace the GF-TADs PPR Working Group.

The Group discussed the link between the OIE/FAO PPR Global Control and Eradication Strategy and the OIE procedure for endorsement of an official control programme and recognition of PPR free status; and encouraged the OIE to ensure consistency between the two approaches.

7. Adoption of the report

The	Group	reviewed	and	amended	the	draft	report	provided	by	the	rapporteur.	The	Group	agreed	that	the
repoi	rt captu	red the di	scuss	ions.												

.../appendices

Appendix I

MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION OF PESTE DES PETITS RUMINANTS (PPR) STATUS OF MEMBER COUNTRIES

Paris, 15-16 December 2015

Agenda

- 1. Opening
- 2. Adoption of the agenda and appointment of chairperson and rapporteur
- 3. Evaluation of applications from Member Countries for official recognition of PPR free status
 - Latvia
- 4. Revision of the questionnaires of the *Terrestrial Animal Health Code* Chapter 1.6. on PPR (Articles 1.6.9. and 1.6.12.)
- 5. Information on the PPR Global Strategy
- 6. Finalisation and adoption of the report

Appendix II

MEETING OF THE OIE AD HOC GROUP ON PESTE DES PETITS RUMINANTS (PPR)

Paris, 15-16 December 2015

List of Participants

MEMBERS

Dr Michael Baron

Institute for Animal Health Ash Road, Pirbright Woking, Surrey, GU24 0NF UNITED KINGDOM Tel: +44-1483 23.24.41 Fax: +44-1483 23.24.48

michael.baron@pirbright.ac.uk

Dr Joseph Domenech

La Fabreguerie 12170 Ledergues. FRANCE Tel: (33) 565462506 j.domenech@oie.int

Dr Adama Diallo

Fax: 33 (0)4 67.59.37 98 adama.diallo@cirad.fr a.diallob@outlook.com

CIRAD-Département Systèmes Biologiques UPR «Contrôle des maladies animales exotiques et emergentes » TA A-15/G Campus international de Baillarguet 34398 Montpellier Cedex 5 FRANCE Tel: 33 (0)4 67.59 37 68

Dr Giancarlo Ferrari

(attended by teleconference) Animal Health Officer Viale delle Terme di Caracalla 00153 Roma ITALY Tel: +39 06 570 54288 Giancarlo.ferrari@fao.org

Dr Geneviève Libeau

CIRAD-Département Systèmes Biologiques UMR «Contrôle des maladies animales exotiques et emergentes » TA A-15/G Campus international de Baillarguet 34398 Montpellier Cedex 5 FRANCE Tel: 33 (0)4 67.59 38 50 ou 37 24

Tel: 33 (0)4 67.59 38 50 ou 37 24 Fax: 33 (0)4 67.59.37 50 genevieve.libeau@cirad.fr

Dr Misheck Mulumba

Agricultural Research Council Private Bag X05 Onderstepoort 0110 Pretoria SOUTH AFRICA Tel: (27-12) 529 9338 Fax: (27-12) 565 46 67 mulumbam@arc.agric.za

Dr Henry Wamwayi

AU-IBAR
P.O. Box 30786 – 00100
Nairobi,
KENYA
Tel: +254-20 3674 000

Tel: +254-20 3674 000 Fax: +254-20 3674 341 henry.wamwayi@au-ibar.org henry.wamwayi@yahoo.com

REPRESENTATIVE OF THE SCIENTIFIC COMMISSION

Dr. Juan Antonio Montaño Hirose

Director del Centro Nacional des Servicios de Diagnostico en Salud Animal Servicio Nacional de Sanidad, Inocuidad y Calidad Agroalimentaria Km. 37.5 de la Carretera México-Pachuca Tecamac, Edo. de México MEXICO juan.montano@senasica.gob.mx juan_montano@virologiahoy.org

OIE HEADQUARTERS

Dr Brian Evans

Deputy Director General Head, Scientific and Technical Department b.evans@oie.int

Dr Simona Forcella

Chargée de mission Scientific and Technical Department s.forcella@oie.int

Dr Laure Weber-Vintzel

Officer in charge of the recognition of countries' animal disease status Scientific and Technical Department l.weber-vintzel@oie.int

Original: English January 2016

REPORT OF THE OIE AD HOC GROUP ON LUMPY SKIN DISEASE

Paris, 12-14 January 2016

A meeting of the OIE *ad hoc* Group on lumpy skin disease (LSD) (hereafter referred to as the Group) was held at

1. Welcome, adoption of the agenda, appointment of chairperson and rapporteur

the OIE Headquarters in Paris from 12 to 14 January 2016.

Dr Monique Eloit, Director General of the OIE, welcomed the Group. She stated that the Group's technical expertise would allow the OIE Specialist Commissions to propose, if relevant, an update of the *Terrestrial Animal Health Code* (*Terrestrial Code*) chapter on lumpy skin disease to the OIE Member Countries.

Dr Eloit introduced Dr Etienne Bonbon, President of the Terrestrial Animal Health Standards Commission (hereafter the Code Commission), and Dr Kris de Clerq, Vice-President of the Scientific Commission for Animal Disease (hereafter the Scientific Commission), representing their respective commission. She further invited the experts of the Group to introduce themselves.

Dr Brian Evans, Deputy Director General, mentioned that, unusually, the meeting had begun with an information session open to OIE staff from the Scientific and Technical Department, the International Trade Department and the World Animal Health Information and Analysis Department. He indicated that it was the OIE's desire to offer continuous professional development to its staff to better understand the epidemiology and the context of relevant diseases or other topics of interest to OIE Member Countries. He thanked the Group members for their presentations that had provided just such an opportunity.

The Group adopted the proposed agenda. The meeting was chaired by Dr Eeva Tuppurainen, and Dr Shawn Babiuk acted as rapporteur with the support of the OIE Secretariat.

The Agenda and List of Participants are presented as Appendices I and II, respectively.

2. Update on the current LSD situation in the world and the latest vaccine developments

The experts from Ethiopia, the United Kingdom and Israel provided updated information on the current global LSD situation. The experts discussed gaps in the knowledge of the disease and current research efforts with special consideration to the development of effective and safe DIVA¹ vaccines. Risk factors for introduction and spread, as well as control and eradication measures implemented in different regions were also discussed.

3. Update *Terrestrial Code* Chapter 11.11 *Lumpy skin disease* (caused by group III virus, type Neethling)

The Group was updated on the most recent changes to the titles proposed for disease-specific chapters in the *Terrestrial Code* and agreed that the title of the chapter on LSD should not specify type of virus (Neethling type). The title of the chapter was updated accordingly.

¹ DIVA: detection of infection in vaccinated animals

The title of some of the articles were also modified to be consistent with other recently adopted chapters in the *Terrestrial Code*.

Article 11.11.1. General provisions

In revising Article 11.11.1, the Group considered the structure followed in recently adopted *Terrestrial Code* chapters.

While referring to susceptible animals, the Group acknowledged that some wild ruminants could be infected with LSD but that they are currently not known to play a significant role in the epidemiology of the disease. However, the Group agreed that, for the purpose of the *Terrestrial Code*, only susceptible domestic animals should be considered, meaning that notification to the OIE of possible cases in wild animals would not be compulsory.

The Group discussed the apparent discrepancies between the duration of the incubation period indicated in the *Terrestrial Code* and in chapter 2.4.14 of the *Manual of Diagnostic Tests and Vaccines for Terrestrial Animals (Terrestrial Manual)*. With reference to the EFSA (European Food Safety Authority) Opinion report (2015)², the incubation period was confirmed as 28 days. Nevertheless, in the absence of scientific data to establish the infective period, the Group agreed not to include any reference to it.

When defining an infection with LSD, the Group considered that a single positive laboratory result would not be sufficient, and thus epidemiological context should always be considered. The Group acknowledged that countries having sheep pox and goat pox may find seropositive cattle, even in the absence of LSD, due to the antigen similarity between these two diseases. The presence of clinical signs or an epidemiological link would therefore be necessary to confirm a case.

Article 11.11.1-bis. Safe commodities

The Group discussed whether or not meat from an infected animal that had passed *ante-* and *post-mortem* inspection in accordance with Chapter 6.2., presents a risk when imported into a free country. With reference to the draft chapter on commodities (annexed to the Code Commission report of September 2015), the Group assessed LSD against the criteria of article 2, in particular evaluating whether virus concentration and natural exposure route would constitute a risk. Considering residual blood and the ecology of flies (house flies are unlikely to land on cattle), the Group agreed that skeletal muscle meat should be considered a safe commodity.

The Group agreed to add the following to the list of safe commodities: gelatine and collagen, as they are produced by heat treatment, tallow, hooves, and horns. After consideration of the risk that may be posed by bone marrow, the Group was not confident that bones should be considered as safe commodities.

The Group proposed mitigation measures for import of other commodities by adding specific articles for their importation.

Article 11.11.2. LSD free country

The Group agreed that free status should not be limited to a country and that the epidemiology of the disease allows free zones to be envisaged.

Considering the existence of countries adjacent to infected countries or of countries about to begin on LSD control programme and acknowledging that vaccinated animals could already be imported according to 11.11.5., the Group discussed the relevance of facilitating trade of vaccinated populations. The Group agreed that, as long as a country or zone can prove absence of infection with LSD virus (LSDV) in a vaccinated population, it could theoretically be considered free from LSD. However, the Group acknowledged that the following points should be considered before taking any decision:

- whether the vaccine recommended by the *Terrestrial Manual* would fit the intended purpose or whether a revision of the *Terrestrial Manual* should be suggested;

² EFSA Journal (2015), **13** (1): 3986

- whether surveillance should be adapted to prove absence of infection in a vaccinated population;
- given the need to have a specific recommendation for import of vaccinated animals, proper identification of the animals and vaccination records should be requested.

The Group discussed surveillance and the laboratory tests that would be necessary to prove freedom. Current polymerase chain reaction (PCR) methods can differentiate vaccine from field strain; however, the Group was concerned about the sensitivity of the PCR test on samples from a subclinically infected animal. In the absence of a DIVA method, the Group concluded that current laboratory tools for serological and virological surveillance would not allow the absence of infection to be demonstrated when vaccination is practised.

Considering the pathognomonic clinical signs of LSD, the Group then discussed whether clinical surveillance could be sufficient to demonstrate freedom in a vaccinated population. The Group acknowledged that a country having good vaccination coverage for at least 3 years, without any clinical signs detected during this period, would be unlikely to have virus circulation. However, in the absence of robust data on the epidemiological role wild ruminants may play, the Group could not conclude that clinical surveillance would be enough to guarantee absence of infection in a vaccinated population.

The Group concluded that with current knowledge and diagnostic tools, freedom from LSDV infection could not be demonstrated in a vaccinated population and therefore agreed that freedom from LSD should require prohibition of vaccination.

With regard to countries adjacent to infected countries or willing to progressively control and eliminate the disease, the Group reiterated that a zoning approach would be a possibility (for example by establishing a protection zone with vaccination – that would be considered as non-free from LSD – in response to a specific threat at the border). The Group further emphasised that a free country or zone introducing vaccinated animals and products from a non-free country or zone would not lose its free status if these commodities are imported under the conditions defined in Articles 11.11.3. to 11.11.13., as relevant.

The Group discussed the different requirements for a country or zone to be free. The Group understood that the 3-year waiting period proposed in the previous chapter was based on clinical surveillance only and suggested a shorter waiting period if appropriate serological surveillance is conducted. The Group therefore clarified that country or zone freedom could be demonstrated:

- Through compliance with historical freedom in accordance with Article 1.4.6. of the *Terrestrial Code*; or
- If 3 years the cessation of vaccination, no cases of LSD have been reported despite active clinical surveillance:
- If 2 years after of the cessation of vaccination, no reported cases of LSD have been reported despite enhanced surveillance. This surveillance would include clinical surveillance and active serological and virological surveillance aimed at detecting infection with LSDV. The rationale for the 2-year waiting period was that as LSD is a vector-borne disease and variable seasonal and transmission patterns cannot be excluded; the Group thus considered that naïve animals should be exposed to the environmental risk factors for at least 1 year. It was therefore necessary to consider a minimum waiting period after vaccination of at least 6 months to ensure new-born animals lost their maternal antibodies. For countries or zones having seasonal calving, the Group concluded that a 2-year period would be necessary.

Articles 11.11.4. and 11.11.6. Recommendations from importation from LSD free/infected countries – for wild cattle.

The Group proposed that these articles be removed as the disease was defined as an infection of domestic cattle and water buffaloes. The Group considered that trading partners could decide by bilateral agreement the best practices for importing wild cattle.

Article 11.11.5. Recommendations for importation from countries considered infected with LSD- for domestic cattle and water buffaloes

The Group acknowledged that vaccinated animals are not necessarily immunised. In addition, the Group noted from its own experience using live vaccines that antigens may be present for longer than 30 days at the injection site and that therefore vaccinated animals should not be moved before 60 days post-vaccination. While the immunity is probably life-long, the scientific information available indicated immunity lasts at least 12 months.

The Group noted that additional guarantees should be given to mitigate the risk of introducing LSD by importing animals from an infected country. It was requested that animals be kept in an epidemiological unit where no case of LSD has occurred in the last 60 days (two incubation periods), including the last 28 days in a quarantine station. Those animals should be vaccinated according to the conditions described above and tested to demonstrate the presence of antibodies, at least 30 days after vaccination.

Acknowledging that no cut-off point for antibodies has been defined for full protection, the Group considered that vaccinated animals giving positive results in a serological test may still present a risk to be mitigated by quarantine. The requirement for quarantine would give additional guarantees that the animals are isolated under supervision of the Veterinary Authority.

Article 11.11.8. Recommendations for importation from countries considered infected with LSD – for semen of cattle and water buffaloes

Acknowledging that experimentally infected semen had caused LSD in a naive cow³, the Group modified the article considering that semen from bulls that are safe for international trade according to draft Article 11.11.5 is also safe. The Group acknowledged that the vaccine strain would not shed in semen and therefore further vaccination of previously vaccinated bulls would not require the 60-day waiting period before semen collection. The rationale for the 60-day waiting period after the first vaccination is related to the limited evidence that live attenuated strains are not shed in semen and knowledge based on a single experiment with a single vaccine strain. The Group recognised that more studies would be necessary to decrease the waiting period.

The Group also considered whether semen from unvaccinated bulls would be safe. The Group agreed that semen from bulls regularly tested to ensure that they have not been infected would be safe, and therefore recommended that the male donors be subjected every 14 days to serological and PCR tests and to a serological test 14 days after the final collection of the consignment for export. In addition, the Group suggested that semen to be exported be subjected to a PCR test.

Article 11.11.9. Recommendations for importation from LSD free countries - for embryos/oocytes of cattle and water buffaloes

The Group improved the clarity of this article by numbering the requirements. The Group proposed a requirement that the animals be kept for at least 28 days in the free country or zone and that fertilisation be achieved with semen meeting the conditions of this chapter (Articles 11.11.7. and 11.11.8.)

Article~11.11.10.~Recommendations~for~importation~from~countries~considered~infected~with~LSD-for~embryos/oocytes~of~cattle~and~water~buffaloes

While requiring that embryos be fertilised with semen collected in compliance with Articles 11.11.7 and 11.11.8., the Group differentiated the mitigation measures for importing embryos from vaccinated and unvaccinated female donors.

For vaccinated female donors, the Group agreed that the embryos collected from animals considered safe for international trade (Article 11.11.5.) would be safe.

³ Annandale C.H., Holm D.E., Ebersohn K. & Venter E.H. (2012). Seminal transmission of lumpy skin disease virus in heifers. *Transboundary and Emerging Diseases*, **61** (2014) 443–448.

For unvaccinated female donors, the Group proposed that serological and PCR tests be performed on the female donor on the day of collection to give sufficient guarantee that the embryo is safe for export. To further ensure that the animal had not been infected on the day of collection, another serological test should also be conducted at least 21 days after collection (as the antibodies can be detected 21 days post infection).

Article 11.11.10-bis. Recommendations for the importation of milk and milk products

Clinically infected animals presenting lesions in the mammary gland may shed LSDV in the milk. The Group was not aware of any study that demonstrated that pasteurisation is enough to inactivate the virus

Considering LSDV is resistant to high temperatures and despite the lack of available studies, the Group made reference to the OIE Disease Card and agreed that virus would be inactivated at 65°C for 30 minutes, which is equivalent to industrial pasteurisation.

The provisions of this draft article indicate that either milk should derive from cattle and water buffaloes from a free country or zone or was subjected to pasteurisation or any combination of control measures with equivalent performance as described in the Codex Alimentarius Code of Hygienic Practice for Milk and Milk Products.

Article 11.11.12-bis. Recommendations for importation from countries or zone free from LSD – for products from cattle and water buffaloes not otherwise described in specific articles

The Group drafted this new article to clarify that products from cattle and water buffaloes that were kept in a free country or zone for at least the past 28 days and that have passed *ante-* and *post-mortem* inspection would be safe.

Article 11.11.12-ter. Recommendations for importation from countries considered infected with LSD — for meal and flour from blood, meat other than skeletal muscle, and bones from cattle and water buffaloes

The Group discussed the mitigation measures that would ensure safe trade in meal and flour from blood, meat other than skeletal muscle and bones from cattle and water buffaloes and agreed that the recommendations related to peste des petits ruminants (PPR) would be appropriate. With reference to the OIE Disease Card, the Group agreed that a minimum internal temperature of 65°C for 30 minutes would be enough to inactivate the virus.

Article 11.11.13. Recommendations for importation from countries considered infected with LSD - for hides of cattle and water buffaloes

While acknowledging that salt would eventually inactivate the virus, the Group did not have scientific evidence of the time needed to reach inactivation. The Group amended the article to indicate that the exported products should have been processed to ensure inactivation of LSDV.

Article 11.11.13-bis. Surveillance

Acknowledging both *Terrestrial Code* Chapter 1.4 *Animal health surveillance* and Chapter 1.5 *Surveillance for arthropod vectors of animal diseases*, the Group nonetheless considered it necessary to draft a specific article on the surveillance to be conducted to prove freedom from LSD. To draft this article, the Group took into consideration several *Terrestrial Code* chapters having specific articles on surveillance, including foot and mouth disease, bluetongue, African horse sickness, Rift Valley fever, and brucellosis.

The Group agreed it was necessary to emphasise the importance of keeping records of the surveillance activities but also to establish a plan to manage and analyse the surveillance data. The Group described specific provisions for early disease detection, clinical surveillance and laboratory surveillance. The Group also considered that countries or zones adjacent to an infected area should establish a 'surveillance area' in which surveillance would be enhanced. Based on the ecology of the vectors and epidemiology of the disease, the proposed size of this surveillance zone was a distance of at least 20 kilometres from the border, except if there is sufficient justification to reduce the distance.

4. Update the LSD disease card

The Group took the opportunity to consider and review the OIE Disease Card in accordance with the changes proposed in the *Terrestrial Code* chapter and current scientific knowledge.

5. Any other issues

The Group identified potential aspects that can influence disease control strategies. In particular it was considered necessary to gain better understanding of:

- Infectivity period of LDSV
- Antibody persistence after natural infection and vaccination
- Development of a DIVA vaccine and appropriate serological tests
- Further vaccine development and evaluation of the efficacy of all the available LDSV vaccines
- Virus inactivation process
- Transmission routes other than vectors
- Role of wild animals
- Shedding of vaccine strains in semen

6. Finalisation and adoption of the draft report

The Group reviewed and finalised the draft report provided by the rapporteurs.	
	

.../Appendices

Appendix I

AD HOC GROUP ON LUMPY SKIN DISEASE Paris, 12–14 January 2016

Agenda

- 1. Welcome, adoption of the agenda, appointment of chairperson and rapporteur
- 2. Update on the current LSD situation in the world and the latest vaccine developments
- 3. Update Terrestrial Code Chapter 11.11 Lumpy skin disease (caused by group III virus, type Neethling)
- 4. Update the LSD disease card
- 5. Any other issues
- 6. Adoption of the report

Appendix II

AD HOC GROUP ON LUMPY SKIN DISEASE

Paris, 12-14 January 2016

List of participants

MEMBERS

Dr Nadav Galon

Director

Veterinary Services and Animal Health Ministry of Agriculture and Rural

Development PO Box 12 Bet Dagan 50250

Israel galonn@moag.gov.il

Dr Francisco Javier Reviriego Gordejo

European Commission, Health & Consumers Directorate-General G2- Animal Health Froissart 101, F-101-03/72 1040 Brussels

Belgium Francisco.Reviriego-Gordejo@ec.europa.eu Dr Eeva Tuppurainen

Consultant 20 Wolseley Road Aldershot GU11 1NE Hampshire United Kingdom tuppurainene@gmail.com

Dr Shawn Babiuk

National Centre for Foreign Animal Disease Canadian Food Inspection Agency 1015 Arlington St R3E 3M4 Winnipeg Manitoba Canada

shawn.babiuk@inspection.gc.ca

Dr Getnet Abie Mekonen

Coordinator for national disease diagnostics and research NAHDIC, Ministry of Agriculture P.O.Box 04, Sebeta, Ethiopia

getnet.abie.mekonnen@gmail.com

Dr Louis Maartens

Deltamune Research Veterinarian, Vaccine Development

P.o.box 14167 - 0140 Lyttelton

South Africa

louism@deltamune.co.za

Representatives of the Specialist Commissions

Dr Kris de Clercq

Vice-President of the Scientific Commission for Animal Diseases

Centre d'Etudes et de Recherches Vétérinaires et

Agrochimiques

Department of Virology CODA-CERVA-VAR Groeselenberg 99

B-1180 Ukkel

Belgium

Kris.De.Clercq@coda-cerva.be

Dr Etienne Bonbon

President of the Terrestrial Animal Health Standards Commission

12, rue de Prony 75017 Paris France

e.bonbon@oie.int

OIE HEADQUARTERS

Dr Monique Eloit

Director General 12 rue de Prony 75017 Paris France oie@oie.int

Dr Brian Evans

Deputy Director General Head, Scientific and Technical Department b.evans@oie.int

Dr Gregorio Torres

Chargé de mission Scientific and Technical Department g.torres@oie.int

Dr Laure Weber-Vintzel

Officer in charge of the recognition of countries' animal disease status Scientific and Technical Department l.weber-vintzel@oie.int

Original: English January 2016

MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION OF AFRICAN HORSE SICKNESS STATUS OF MEMBER COUNTRIES

Paris, 19 - 20 January 2016

A meeting of the OIE *ad hoc* Group on the Evaluation of the African horse sickness (AHS) status of Member Countries (hereafter the Group) was held at the OIE Headquarters from 19 to 20 January 2016.

1. Opening

On behalf of Dr Monique Eloit, Director General of the OIE, Dr Brian Evans, Deputy Director General and Head of the Scientific and Technical Department, welcomed and thanked the Group for all its efforts in evaluating the applications from Member Countries for official recognition of AHS status.

Dr Evans updated the Group with the recent elections of the four OIE Specialist Commissions and the updated composition of the OIE Council. He mentioned the plan to strengthen coordination between the Specialist Commissions and the Council to better respond to Member Countries' requests. He also highlighted the importance of the scientific credibility and the integrity of the official disease status recognition procedures and emphasised the value of a detailed report of the evaluations as it was the main channel to communicate the rationale to the Scientific Commission for Animal Diseases (Scientific Commission) and to Member Countries, especially on possible information gaps or specific areas that should be addressed in the future.

Dr Evans mentioned the importance of transparency and procedural fairness. He reminded the Group that submitted dossiers were considered the property of the applicant Member Country and sharing of dossiers between countries could be done, when requested, through bilateral negotiation between both countries. Nevertheless, he pointed out that a recent amendment in the Standard Operating Procedures for official recognition of disease status or risk status of bovine spongiform encephalopathy and for the endorsement of national official control programmes of Member Countries clarifies that a Member Country may be requested to provide the whole or part of its dossier during the 60-day comment period prior to the General Session and if such a request is made, the Member Country should comply with the request within a maximum of 10 days.

Dr Evans also mentioned that a series of workshops providing training for Member Countries on the procedure to prepare dossiers for official recognition of disease or risk status and endorsement of national control programmes had been conducted last year in three of the OIE Regions and were planned to continue in the other Regions.

Dr Evans informed the Group that, in the context of the OIE public-private partnership with the International Equestrian Federation (FEI) and the International Federation of Horseracing Authorities (IFHA) for the facilitation of international movement of competition horses, research projects related to AHS vaccines and AHS serological diagnostic tests had been initiated.

2. Adoption of the agenda and appointment of chairperson and rapporteur

The Group was chaired by Dr Alf-Eckbert Füssel, and Dr James MacLachlan acted as rapporteur. The Group adopted the proposed agenda.

The Agenda and list of participants are presented as Appendices I and II, respectively.

3. Evaluation of requests from Member Countries for recognition of AHS free status

3.1. Kazakhstan

In December 2015, Kazakhstan submitted an application to the OIE for recognition of its AHS free status based on historical freedom.

The Group requested additional information and received clarification from Kazakhstan.

i. Animal disease reporting

The Group was informed that a PVS mission was first conducted in Kazakhstan in 2007 and then a Follow-up mission and a Gap Analysis mission were conducted in 2011.

Further to the Group's request, Kazakhstan clarified that AHS had been a notifiable disease for the past ten years and officially requested that the data of previous years in OIE World Animal Health Information System (WAHIS) be corrected to reflect this.

The Group considered that Kazakhstan had a record of a prompt and regular national animal disease reporting system that had been maintained for at least the past ten years.

ii. Prohibition of systematic vaccination against AHS

The Group noted that vaccination had never been conducted in the country nor had it been considered a possible remedy in case of outbreak.

iii. Importation of equids and their semen, oocytes or embryos in accordance with Articles 12.1.7. to 12.1.9.

The Group noted in the dossier a detailed description of the import requirements and a link to the agreement under the Customs Union. According to the regulations applicable in the uniform economic space of the Eurasian Economic Union and approved by the Decision of the Commission of the Customs Union, Decision No. 317, importation/movement of equids into Kazakhstan was only allowed in accordance with the recommendations of the OIE. Upon the Group's request, Kazakhstan further clarified that the imported equids should not have been vaccinated against AHS.

The Group took note that most of the imports were from countries officially recognised free from AHS by the OIE. Imports from countries not officially recognised free from AHS by the OIE, had no reported cases of AHS for more than 25 years and measures were in place for quarantine and laboratory testing to ensure safe import into Kazakhstan. Nevertheless, the Group recommended that the import requirements, from those countries currently not having an AHS free status by the OIE, should be strictly in accordance with Chapter 12.1. of the *Terrestrial Animal Health Code (Terrestrial Code*).

The Group concluded that the regulations in place for importation of equids and their products were in general compliance with Chapter 12.1. of the *Terrestrial Code*.

iv. Situation of AHS

The Group acknowledged that AHS had never been reported in the country. Therefore, Kazakhstan was potentially eligible for historical freedom from AHS with regard to Article 1.4.6. of the *Terrestrial Code*.

v. Surveillance if adjacent to an AHS infected country or zone if relevant

The Group noted that Kazakhstan shares borders with two countries currently having an AHS free status and three countries currently not recognised as free from AHS by the OIE. However, the Group acknowledged that AHS had never been reported in countries of that part of the OIE Regional Commission for Europe.

Further to the Group's request on the level of surveillance with neighbouring countries particularly those that were not officially recognised free from AHS by the OIE, Kazakhstan clarified that borders were clearly demarcated with natural and artificial barriers and that surveillance activities along the borders were also carried out to detect any illegal movements.

vi. Surveillance in accordance with Articles 12.1.11. to 12.1.13.

The Group took note that there was no pathogen-specific surveillance for AHS in Kazakhstan, however the dossier explained that clinical surveillance was in place. AHS is a notifiable disease and animal owners must report any sign of infection to the veterinary inspector. The Group took note that in case of an incursion of AHSV in Kazakhstan, clinical signs would be apparent.

Further to the Group's request, Kazakhstan clarified that a national laboratory (Research Institute for Biological Safety Problems) could perform laboratory analysis for AHS and Kazakhstan also had a collaborative agreement with the Pirbright Institute, an OIE Reference Laboratory for AHS to ensure rapid diagnosis in case of suspicion.

vii. Regulatory measures for the early detection, prevention and control of AHS

The Group acknowledged that legislation was in place that included AHS in the list of highly dangerous animal diseases for prevention, diagnosis and elimination.

Further to the Group's request, Kazakhstan further clarified that regulatory measures were in place approved by the order of the Minister of Agriculture of the Republic of Kazakhstan, applicable to the control of highly dangerous diseases, which included control of movements, epidemiological investigation, compensation arrangements, awareness campaigns, and vector control measures.

The Group agreed that Kazakhstan had adequate regulatory measures in place for early detection, prevention and control of AHS.

viii. Compliance with the questionnaire in Article 1.6.8.

The Group agreed that the structure of the dossier was compliant with Article 1.6.8. of the *Terrestrial Code*.

Conclusion

Considering the information submitted in the dossier, and answers from Kazakhstan to the questions raised, the Group concluded that the application was compliant with the requirements of Chapter 12.1. and with the questionnaire in Article 1.6.8. of the *Terrestrial Code*. The Group therefore recommended that Kazakhstan be officially recognised as a country free from AHS.

3.2. The Philippines

In November 2015, the Philippines submitted an application to the OIE for recognition of its AHS free country status based on historical freedom.

The Group requested additional information and received clarification from the Philippines.

i. Animal disease reporting

The Group was informed that a PVS mission was first conducted in the Philippines in 2008 and that a Gap Analysis mission was conducted in 2010.

The Group acknowledged that AHS has been a notifiable disease in the Philippines since 1992 and considered that the Philippines had a record of a prompt and regular national animal disease reporting system that had been maintained for at least the past ten years.

ii. Prohibition of systematic vaccination against AHS

The Group noted that vaccination against AHS had never been conducted in the country.

 Importation of equids and their semen, oocytes or embryos in accordance with Articles 12.1.7. to 12.1.9.

The Group took note that the Philippines only imported from countries officially recognised free from AHS by the OIE. The Philippines further substantiated this information by providing the Group with the list of countries that horses were imported from. In addition, the Philippines indicated that a negative test for AHS (either by complement fixation test, ELISA, agent identification (RT-PCR), or virus neutralization test) performed within 30 days prior to arrival during a pre-export quarantine period of at least 30 days were required for importation of live equids. The Group also took note of the regulations in place for importation of semen, oocytes or embryos and agreed that they were in compliance with Chapter 12.1 of the *Terrestrial Code*.

iv. Situation of AHS

The Group noted that AHS had never been reported in the Philippines. The Group considered that the Philippines was potentially eligible for historical freedom of AHS as described in Article 1.4.6. of the *Terrestrial Code*.

v. Surveillance if adjacent to an AHS infected country or zone if relevant

Not applicable.

vi. Surveillance in accordance with Articles 12.1.11. to 12.1.13.

The Group took note that there was no pathogen-specific surveillance for AHS in the Philippines. The dossier explained that passive clinical surveillance was in place, that AHS was a notifiable disease and that veterinarians must report any suspicion to the authorities within 24 hours. The Group also noted that a national on-line system was available to promptly report suspicions of notifiable diseases.

Further to the Group's request, the Philippines indicated that the Veterinary Laboratory Division (VLD) was the national official diagnostic and reference laboratory and that the VLD would link with the OIE Reference Laboratories in any event necessitating laboratory confirmation of suspect cases of AHS. The Group recommended that arrangements be made in advance with an OIE Reference Laboratory for AHS or other competent laboratory for AHS diagnosis to be prepared in case of any suspicion or incursion.

The Group considered that surveillance in place was consistent with the *Terrestrial Code* requirements for countries historically free from AHS.

vii. Regulatory measures for the early detection, prevention and control of AHS

The Group noted from the dossier that a delay or failure of reporting a notifiable disease to the competent authorities by a licensed veterinarian (in the government or in private practice) could result in a suspension of his licence, and that delay or failure of reporting and implementing control measures would subject the government personnel to administrative sanctions. The control measures and contingency plan for dealing with emerging diseases were also described in the dossier.

The Group agreed that the regulatory measures for early detection, prevention and control of AHS were in place.

viii. Compliance with the questionnaire in Article 1.6.8.

The Group agreed that the structure of the dossier was compliant with Article 1.6.8. of the *Terrestrial Code*.

Conclusion

Considering the information submitted in the dossier, and answers from the Philippines to the questions raised, the Group concluded that the application was compliant with the requirements of Chapter 12.1. and with the questionnaire in Article 1.6.8. of the *Terrestrial Code*. The Group therefore recommended that the Philippines be officially recognised as a country free from AHS.

3.3. Other request

The Group assessed the request of another Member Country for the recognition of AHS free status based on historical grounds. The Group concluded that the Member Country had not met the requirements of the *Terrestrial Code* and the dossier was referred back to the corresponding Member Country.

4. Revision of the questionnaire of the *Terrestrial Animal Health Code* Chapter 1.6. on AHS (Article 1.6.8.)

As part of the Scientific Commission's work plan to revise all questionnaires related to official recognition of disease status, the Group also proposed modifications to the AHS questionnaire in Chapter 1.6. (Article 1.6.8.) to clarify information requested from applicant Member Countries.

The Group proposed several changes to eliminate redundancy and to improve clarity. More important revisions made were as follows:

AHS free country

1. Introduction

Point a) Geographical factors

The Group emphasised the importance of providing the necessary maps to illustrate relevant geographical factors in sufficient detail.

Point b) Equine sectors

The Group suggested moving this point to the second section of the questionnaire, 2. 'Description of equine population'.

The Group added that a description of the populations of donkeys, mules and hinnies should be included in the list of sector grouping(s) as from their past experience this critical information was often absent from the dossier.

The Group removed the specific reference to horses for slaughter (*Point iii*) since production equids should not be restricted to only horses for slaughter.

The Group removed the point on *captive wild*, *wild* and *feral* equids (*Point v*) to avoid a repetition as a description of the *wildlife demographics* is also included in the description of equine population (*Section 2*, *Point b*).

2. <u>Description of equine population</u>

The Group included previous Point b of Section 1 'Introduction'.

3. Veterinary system

Point a) Legislation

The Group suggested that a link to veterinary legislation in relation to AHS (*Point a*) be provided when available. The Group clarified that the description of the veterinary legislation in relation to AHS should include disease control measures and the compensation systems.

Point b) Veterinary Services

The Group added a reference to Chapter 1.1. on Notification of diseases, infections and infestations, and provision of epidemiological information.

4. AHS eradication

Point b) Strategy.

The Group amended the description of AHS control and eradication strategy to include a description of identification, movement restriction, and protection of equids against vectors.

The Group noted that the points on animal identification ($Point\ e$), movements of equids ($Point\ f$), leisure and competition movements of equids ($Point\ g$), and market systems for equids ($Point\ h$) should not be related only to AHS eradication. The Group therefore recommended that these points should be added under a new section of the questionnaire to be titled "Animal identification, registration, traceability and movement control" and inserted before the section on AHS eradication.

5. AHS diagnosis

Point b) The Group added that Member Countries describe the testing capability, as well as the number of tests performed in the last two years.

Regarding the question on the participation in inter-laboratory validation tests (*Point b-iii*), the Group amended the text to request further details on corrective measures resulting from the inter-laboratory validation tests (if applicable).

6. AHS surveillance

The Group added a point at the beginning of the section for applicant Member Countries to address the AHS notification procedure. The procedure to notify, the compensation system, and the penalties for failure to report were removed from the point on Clinical suspicion (*former Point a*) and included in this new point (*new Point a*).

Point a) Clinical suspicion

The Group clarified that the follow-up procedures to rule-out or confirm a suspicion of AHS should be described in the dossier.

7. AHS prevention

Point a) Coordination with neighboring countries

The Group amended the text to include the wind currents and possible vector spread in the list of factors to be taken into account for the coordination with neighboring countries for AHS prevention.

Point b) Import control procedures

The Group added AHS vaccines in the list of products for which regulations, procedures, type and frequency of checks at the point of entry into the country or their final destination should be described.

While acknowledging that routine vaccination is prohibited to qualify for inclusion in the list of AHS free countries or zones, the Group added that information should be provided on the action available under legislation related to illegal vaccination.

8. Control measures and contingency planning

The Group amended the point to emphasise that in the case of emergency vaccination, the source and type of vaccines used should be indicated.

9. Compliance with Terrestrial Code

Point b) The Group deleted the term "vaccinated" to emphasise that it should not be restricted to only vaccinated equids, as all equids should be imported in accordance with Chapter 12.1.

10. Recovery of status

No modification was suggested by the Group for Section 10 of the questionnaire.

AHS free zone

The Group agreed that the modifications made in the questionnaire for AHS free country should globally apply for the questionnaire for an AHS free zone.

5. Adoption of the report

The Group reviewed and amended the draft report provided by the rapporteur and agreed to circulate the draft report electronically for comments before the final adoption. The Group agreed that the report captured the discussions.

.../Appendices

Appendix I

MEETING OF THE OIE AD HOC GROUP ON EVALUATION OF AFRICAN HORSE SICKNESS (AHS) STATUS OF MEMBER COUNTRIES

Paris, 19 - 20 January 2016

Terms of Reference

Evaluate the applications from Member Countries for official recognition of AHS free status;

Revise the questionnaire of the *Terrestrial Animal Health Code* Chapter 1.6. on AHS (Article 1.6.8.), including the references to other chapters of the *Terrestrial Code* or the *Manual of Diagnostic Tests and Vaccines for Terrestrial Animals*.

Agenda

- 1. Opening
- 2. Adoption of the agenda and appointment of chairperson and rapporteur
- 3. Evaluation of requests from Member Countries for the status recognition of historical freedom from AHS
 - 1) Kazakhstan
 - 2) Philippines
- 4. Revision of the questionnaire of the *Terrestrial Animal Health Code* Chapter 1.6. on AHS (Article 1.6.8.)
- 5. Other matters
- 6. Adoption of report

Appendix II

MEETING OF THE OIE AD HOC GROUP ON EVALUATION OF AFRICAN HORSE SICKNESS (AHS) STATUS OF MEMBER COUNTRIES

Paris, 19 - 20 January 2016

List of participants

MEMBERS

Dr Mehdi El Harrak

Chef Département Virologie, BP 4569, Avenue Hassan II, km2, Rabat-Akkari MOROCCO

Tel.: (212-37) 69.04.54 Fax: (212-37) 69.36.32 elharrak_m@hotmail.com

Dr Alf-Eckbert Füssel

Acting Head of Unit, DG SANTE/G2 **European Commission** Rue Froissart 101-3/67 - B-1040 Brussels **BELGIUM**

Tel: (32) 2 295 08 70 Fax: (32) 2 295 3144 alf-eckbert.fuessel@ec.europa.eu

Dr Montse Agüero

Ministerio de Agricultura, Alimentación y Medico Ambiente S.G. Sanidad e Higiene Animal y Trazabilidad Technical Director LCV-Algete, Ctra. M-106, PK1,4 28110 Algete (Madrid) **SPAIN** Tel: (34 91)3 47 8312 Fax: (34 91)3473778

Dr Beverley Parker

maguerog@magrama.es

Equine Health Fund, Wits Health Consortium No 8 Blackwood Avenue, Parktown, Johannesburg, 2193 SOUTH AFRICA Tel: (27-82) 578-7044 bevz@agnet.co.za

Dr James MacLachlan

Department of Pathology, Microbiology and Immunology School of Veterinary Medicine University of California Davis, California 95616-8739 USA

Tel: (1.530) 754 8125 Fax: (1.530) 752 3349 njmaclachlan@ucdavis.edu

Dr Stéphan Zientara

ANSES/INRA/ENVA Directeur de l'UMR 1161 23 Avenue du Général de Gaulle 94703 Maisons-Alfort FRANCE

Tel: (33) 1 43 96 72 80 s.zientara@vet-alfort.fr

SCAD representative

Dr Baptiste Dungu

MCI-Sante Animale 26 Dalrymple Crescent Edinburgh EH9 2NX Scotland UNITED KINGDOM

Tel: +212 523 30 31 32 Fax: +212 523 30 21 30

B.DUNGU@mci-santeanimale.com

OIE HEADQUARTERS

Dr Brian Evans

Deputy Director General and Head Scientific and Technical Department b.evans@oie.int

Dr Min-Kyung Park

Chargée de mission Scientific and Technical Department m.park@oie.int

Dr Morgane Dominguez

Project officer Scientific and Technical Department m.dominguez@oie.int

Dr Susanne Münstermann

Project officer Scientific and Technical Department s.munstermann@oie.int

Original: English January 2016

REPORT OF THE MEETING OF THE OIE *AD HOC* GROUP ON ANTIMICROBIAL RESISTANCE Paris, 19 – 21 January 2016

1. Opening and background information

The OIE *ad hoc* Group on Antimicrobial Resistance (further referred to as 'the Group') met from 19 to 21 January 2016 at the OIE Headquarters in Paris, France.

The Director General of the OIE, Dr Monique Eloit, welcomed the participants and reiterated the importance of antimicrobial resistance in the current working programme of the OIE. She thanked the representatives of the World Health Organisation (WHO) and of the Food and Agriculture Organization of the United Nations (FAO) who attended the meeting and highlighted their productive collaboration and the development of joint activities for the reduction of antimicrobial resistance. She informed the Group that a Scientific Conference on alternatives to antimicrobial agents will be organised by the OIE in December 2016 and that the Second Global Conference on the Responsible and Prudent Use of Antimicrobial Agents for Animals will be organised in 2017. She thanked the Group for its continuous support for the OIE's activities related to the use of antimicrobial agents and antimicrobial resistance and stressed the continued need of the Group's expertise and support in this first year of reporting by OIE Member Countries on their use of antimicrobial agents in animals. Dr Eloit mentioned that at the G7 Summit of Ministers of Health held in Berlin, Germany, in October 2015, participants had recognised the need to examine antimicrobial resistance and the use of antimicrobial agents in the human health sector as well as in the animal health sector. Therefore, she stated that the need for collaboration between the animal and human health sectors is still of huge importance for tackling AMR.

Dr Elisabeth Erlacher-Vindel, Deputy Head of the Scientific and Technical Department, explained that the meeting would be organised in two parts. The first part would be dedicated to presenting the data collection to date from the OIE Member Countries on the use of antimicrobial agents in animals, to discuss the denominator, and to discuss the final structure of the presentation on findings of data collection from the OIE Member Countries, on the use of antimicrobial agents in animals at the OIE General Session. The second part would be dedicated to the Chapter 6.7. of the *Terrestrial Animal Health Code (Terrestrial Code)*: "Harmonisation of national antimicrobial resistance surveillance and monitoring programmes", with the aim of defining criteria for selection of animal pathogens for antimicrobial resistance surveillance and drawing up a list of the most important animal pathogens for the different species, applicable worldwide.

2. Appointment of the chairperson and rapporteurs, and adoption of the agenda

The meeting was chaired by Dr Herbert Schneider, Dr Carolee Carson acted as rapporteur for the discussions related to the OIE global database on the use of antimicrobial agents in animals and Dr Chris Teale acted as rapporteur for the discussions related to the *Terrestrial Code*.

The adopted Agenda and List of Participants are presented in Appendices I and II of this report, respectively.

3. Overview of the completed data-collection forms received from OIE Member Countries

An overview of the data collected from OIE Member Countries on their use of antimicrobial agents in animals was provided by Ms Jennifer Lasley and Dr Gerard Moulin. This overview consisted of a presentation of the preliminary results of the first year of annual reporting, followed by a presentation on potential reporting options based on available data.

To date, the preliminary results of the annual reporting showed that approximately one third of OIE Member Countries replied so far. The deadline for submitting annual reports was 29 January 2016, and therefore additional submissions were expected. Progression has been noted on the number of countries providing quantitative data compared to the 2012 survey. The countries that submitted quantitative data did so for a range of different time periods: some provided data from as far back as 2009 right up to 2015, but most supplied information for 2013. Some countries provided only partial data for 2015, so this will require clarification.

The Group suggested that specific descriptive analysis would be conducted for all years provided, but it is the intent in the future to provide trends over time, once the denominators have been determined.

The Group congratulated the OIE on the participation of the OIE Member Countries and it praised the depth and breadth of analysis achieved on data received until 5 January, while recognising that this project will develop and progress over time. The Group noted that all OIE Member Countries can provide useful information using the template irrespective of their current procedure for collection of information on antimicrobial agents for use in animals.

Based on variability of submissions and comments, the Group observed that there were opportunities to refine the Template to make data reporting, collection, importation and analysis faster and easier.

4. Discussion of the denominator

Dr Jordi Torren Edo presented an updated version of the presentation he gave to the Group in July 2014 on "Denominator and slaughtered animals".

The Group recalled its previous discussions about the importance of assessing the quantities of antimicrobial agents used in the context of the size of the animal population. The Group pointed out that the denominator should primarily be based on population size and weights of animals (biomass). The Group considered the possible need to develop regional/sub-regional parameters to calculate the denominator, accounting for regional/sub-regional differences to optimally interpret the available data.

Dr Neo Mapitse, Deputy Head of the World Animal Health Information and Analysis Department (WAHIAD), and Dr Lina Awada, Veterinary Epidemiologist in WAHIAD, presented the animal population data collected annually by the OIE through the World Animal Health Information System (WAHIS). They explained that the aim is that terrestrial animal population figures reported in WAHIS should be based on census data, which provides a measure of the number of live animals at a single point in time, and not the number of terrestrial animals produced within one year. Based on previous input from the Group, WAHIAD has improved and adapted the 'Guidelines to Member Countries' as far as possible at this stage to take into account the needs for reporting quantities of antimicrobial agents intended for use in animals.

The Group recognised that while WAHIS provides the number of terrestrial animals, additional information may be needed in order to construct the denominator. In particular, the total number of terrestrial animals produced in one year is critical for contextualising the total amount of antimicrobial agents used in one year. As such, the Group noted limitations with point in time census data, which predominantly affects animals with production cycles less than one year, such as birds and pigs. Point in time census data will underestimate the number of terrestrial animals produced in a calendar year, which may lead to an apparent increased use of antimicrobial agents.

The Group identified that knowledge on production cycles might enable extrapolation of point in time census data to estimate the total number of terrestrial animals produced in a year. It was also noted that other factors, such as seasonal production factors and import/export of animals, can also influence the numbers of terrestrial animals reported at a given point in time.

Following a presentation by WAHIAD staff, the Group considered OIE Livestock Units as an option, but found difficulties in direct application as a suitable denominator.

The Group concluded that in order to better understand current information provided by Member Countries on the use of antimicrobial agents in terrestrial animals, the OIE needed additional information about the nature of the data provided in WAHIS. To improve the accuracy of the denominator it is essential to know if the WAHIS data is point-in-time census data or data on the number of animals produced in a year This information is important because if it is the former, knowledge of production cycles would enable a calculation to estimate the total number of animals produced in a year.

The Group also concluded that it was too early at this stage in the data collection process to present the findings with metric information (mg antimicrobial/kg biomass) as more reflection and works need to occur on the denominator.

The Group supported three parallel approaches as next steps:

- Seek clarification on production cycles and weights (for a subset of animal species using the
 categories of WAHIS). A select number of countries would be contacted for their input to further
 explore feasibility. These countries would be selected from those who reported information in the
 first year for the global database.
- A regional and sub-regional approach would be employed to seek clarification on production cycles and weights (for a subset of animal species using the categories of WAHIS).
- Members of the Group would prepare a proposal for regional denominators, exploring methodology and using existing data to be presented at the next meeting of the Group.

The final approach taken will depend on available information and on the nature of the data provided in WAHIS. Although the denominator is under development, once a definitive approach to the generation of a suitable denominator has been determined, this can be applied to data collected in previous years.

5. Discussion on the structure of the presentation of the findings of the collection of data

The Group discussed the structure of the presentation on the findings of the first annual submission of data from OIE Member Countries on antimicrobial agents intended for use in animals. Based on preliminary data, the Group discussed several possible reporting options in depth and noted that the clear inclusion of the number of countries and year(s) of data included in each analysis is essential. The Group agreed that at this stage, initial reporting will occur at the global and regional levels rather than country level, as data are not yet comparable and also respecting the confidential nature of the data. Discussion was focused particularly on the possible presentation of the preliminary descriptive analysis to OIE Member Countries and on general content of a written report.

The Group recommended that the presentation follows a general structure:

- o Introduction/Background
 - 2-3 figures accompanied by text referring to the 2012 survey and recommendations of the OIE Global Conference on the responsible and prudent use of antimicrobial agents for animals which was held in Paris, France, from 13 to 15 March 2013;
 - Activities carried out since 2013 leading to annual reporting and development of a global database;
 - Importance of monitoring the use of antimicrobial agents in animals and the development of national action plans
- o Findings, focusing on the first year of the collection of data, from the OIE Member Countries, on the use of antimicrobials agents in animals

Conclusion

• To include messages that encourage all Member Countries to participate at a minimum by reporting baseline information and by providing quantitative data where possible

Next steps

 Continue to build awareness about the issue and use the data collected to inform future OIE plans for addressing the challenges of antimicrobial use

The Group reviewed the presentation of early findings from the global database and made recommendations based on specific findings to be presented to OIE Member Countries. Depending on the findings, the Group suggested that it may be possible to present the cumulative total quantity of antimicrobial agents reported by Member Countries, while data at the regional level would be presented as percentages of total quantity of antimicrobial agents reported by Member Countries in a given year.

The Group further discussed the challenges related to the interpretation of 'growth promoter' in all regions of the world, which led to the recommendation to clarify the data that the OIE has received from Member Countries.

There was also a discussion about which details should be included in the presentation of the data, e.g. reporting option, antimicrobial class, data source, and route of administration.

6. Chapter 6.7. on "Harmonisation of national antimicrobial resistance surveillance and monitoring programmes": Selection of animal pathogens for surveillance

Professor Peter Borriello provided an update on an initiative he has been leading on the surveillance of resistance in animal pathogens at the European level. Dr Christopher Teale and Dr Gérard Moulin gave presentations on the national surveillance programmes for antimicrobial resistance in veterinary pathogens in the United Kingdom and France, respectively.

The Group considered options for development of recommendations for the susceptibility testing of veterinary pathogens following requests from Member Countries for further guidance on veterinary pathogens. The current differentiation of bacteria in Chapter 6.7 into three broad categories for testing, namely zoonotic (Salmonella, Campylobacter), commensal (E. coli, enterococci) and animal pathogens, was helpful, though organisms could belong to more than one category (for example, Salmonella serovars which can cause disease in both humans and animals). Several important needs to conduct resistance surveillance were discussed, such as capacity-building initiatives, quality systems and more harmonised methods. The Group noted that some veterinary pathogens were fastidious and technically difficult to isolate and test. To decide on specific pathogens, food security issues were also noted, because some organisms caused significant economic and production losses, in addition to their burden on animal health and welfare.

Two main options were considered for the development of recommendations – publication in the *Terrestrial Animal Health Code* (*Terrestrial Code*) and provision of web-based guidance. The Group considered approaches to the prioritisation of veterinary pathogens in Europe, comments from Member Countries on chapter 6.7. and the table of veterinary pathogens from the previous meeting; it also discussed the current status of veterinary pathogens in the main target species. The Group noted that there was a high degree of congruence amongst the pathogens identified. Therefore, the Group concluded that there was sufficient basis to develop a harmonised global approach. The Group then proposed a revised text and a new table for article 6 a) of Chapter 6.7. of the *Terrestrial Code*. This could encourage and promote development of global monitoring and the Group agreed that this was the optimal way forward.

The Group discussed the advantages and importance of monitoring antimicrobial resistance in veterinary pathogens. Although the primary purpose was often to guide veterinarians in their treatment decisions, other advantages were also noted. These include detection of emerging resistance that may pose a concern for animal and human health, detection of changes in susceptibility patterns and provision of information for risk analysis. Article 6 a) of Chapter 6.7. of the *Terrestrial Code* was updated to reflect these considerations.

Inclusion of veterinary pathogens which are relevant to public health is in keeping with the One Health approach. The OIE list of antimicrobial agents of veterinary importance should help inform decisions about which antimicrobial agents should be included in the susceptibility testing. The Group recognised that this list is not exhaustive, and it recommended that Member Countries prioritise organisms on the basis of their national situation and implement monitoring programmes accordingly. The Group also recognised the different capabilities of Member Countries to implement such a programme. Therefore, monitoring of veterinary pathogens might be targeted to focus on particular ages or types of production systems where disease is prevalent. The Group agreed that *E. coli* should preferably be targeted.

Although the animal population assessed through veterinary diagnostic laboratory testing may in some circumstances be biased (for example, diseases where animals might only be sampled where they are of high value or sampling previously-treated animals), useful information could still be obtained which could be relevant to the overall picture at national level. Suitable accompanying text was proposed for article 6 a) of Chapter 6.7. of the *Terrestrial Code*.

The Group agreed that veterinary pathogens included in the table should have global or widespread animal health relevance and agreed not to develop regional tables. Food-producing animals were targeted as a starting point for programmes which could be adapted to include other animals according to national requirements. The Group considered that the table was an attempt at prioritisation of relevant veterinary pathogens and suggested additional criteria for inclusion in the *Terrestrial Code* to help OIE Member Countries devise suitable national monitoring programmes. These included:

- Impact on animal health and welfare;
- Implication of antimicrobial resistance in the pathogen for therapeutic options in veterinary practice;
- Impact on food security and on production (economic importance of associated diseases);
- Bacterial diseases responsible for the majority of veterinary antimicrobial usage (stratified by usage of different classes or their importance);
- Existence of validated susceptibility testing methodologies for the pathogen

The Table of suggested veterinary pathogens in article 6 a) of Chapter 6.7. of the *Terrestrial Code* was developed by the Group reflecting the above considerations. Some veterinary pathogens, such as *Brachyspira* spp. and *Histophilus somni* (formerly *Haemophilus somnus*), were not included in the table, even though they are considered important, because they are fastidious and technically difficult to test and there is no internationally agreed standard methodology for testing them. Validation of susceptibility testing methodologies should be encouraged for these veterinary pathogens.

The Group suggested that the bacterial pathogens of fish (*Vibrio* spp. and *Aeromonas* spp.) should be covered separately in the *Aquatic Animal Health Code*.

8. Next meeting

The Group proposed the following dates for the next meeting: 21 to 23 June 2016.

9. Adoption of report

The Group adopted the report.		
		/Appendices

Appendix I

MEETING OF THE OIE *AD HOC* GROUP ON ANTIMICROBIAL RESISTANCE Paris, 19 – 21 January 2016

Agenda

<u> Part 1</u>

- 1. Opening and background information;
- 2. Appointment of the chairperson and rapporteurs, and adoption of the agenda;
- 3. Overview of the completed data-collection forms received from OIE Member Countries;
- 4. Discussion on the denominator;
- 5. Discussion on the structure of the presentation of the findings of the collection of data;

Part 2

- 6. Chapter 6.7. on "Harmonisation of national antimicrobial resistance surveillance and monitoring programmes": Selection of veterinary pathogens for surveillance;
- 7. Adoption of report.

Appendix II

MEETING OF THE OIE AD HOC GROUP ON ANTIMICROBIAL RESISTANCE

Paris, 19 - 21 January 2016

List of Participants

MEMBERS

Dr Carolee Carson

Veterinary Epidemiologist / Risk Assessor Canadian Integrated Program for Antimicrobial Resistance Surveillance Surveillance Division, Centre for Food-borne, Environmental Zoonotic Infectious Diseases, Public Health Agency of Canada, Guelph, Ontario N1G 5B2 - CANADA Tel: (519) 400-3651 carolee.carson@phac-aspc.gc.ca

Dr Jordi Torren Edo

Scientific Administrator Animal and Public Health European Medicines Agency 7 Westferry Circus, Canary Wharf London E14 4HB Tel: (+44 207) 523 7034 Fax: (+44 207) 418 8447 jordi.torren@ema.europa.eu

Dr Gérard Moulin

ANSES - Fougères Agence Nationale du Médicament Vétérinaire B.P. 90203 - La Haute Marche, Javené 35302 Fougères Cedex - FRANCE Tel: 33 - (0) 2 99 94 78 78 Fax: 33 - (0) 2 99 94 78 99 gerard.moulin@anses.fr

Professor Peter Borriello

Chief Executive Officer Veterinary Medicines Directorate Woodham Lane, New Haw, Addlestone, Surrey KT15 3NB UNITED KINGDOM p.borriello@vmd.defra.gsi.gov.uk

Dr Donald Prater

Director, FDA Europe Office Rue Zinner 13 1000 Brussels - BELGIUM Tel: 1.301-210-4187 Fax: 1.301-210-4685 Donald.Prater@fda.hhs.gov

Dr Masumi Sato

(Invited but could not attend) Director Pathology and Pathophysiology Research Division National Institute of Animal Health 3-1-5 Kannondai Tsukuba, Ibaraki 305-0856 .IAPAN Tel: +81-29-838-7772

Dr Herbert Schneider

masumi@affrc.go.jp

Agrivet International Consultants P.O. Box 178 Windhoek - NAMIBIA Tel: (264) 61 22 89 09 Fax: (264) 61 23 06 19 agrivet@africaonline.com.na

Dr Chris Teale

Animal and Plant Health Agency New Haw, Addlestone Surrey KT15 3NB, Weybridge UNITED KINGDOM Tel: (44-1743) 46 76 21 Fax: (44-1743) 44 10 60 Christopher.Teale@apha.gsi.gov.uk

OTHER PARTICIPANTS

Dr Jacques Acar

OIE Senior Expert 22 rue Emeriau, 75015 Paris -FRANCE Tel: +33 (0)1 40 59 42 41 ifacar7@wanadoo.fr

Dr Olivier Espeisse

HealthforAnimals 168 Avenue de Tervueren, Box 8 1150 Brussels **BELGIUM** Tel: +32 (0)2 541-0111 espeisse_olivier@elanco.com

Dr Awa Aidara Kane

Coordinator, Foodborne and Zoonotic Diseases, Department of Food Safety and Zoonoses, WHO -World Health Organization, 20 avenue Appia 1211 Geneva 27 - SWITZERLAND Tel: +41 22 791 34 45 Fax: +41 22 791 48 07 aidarakanea@who.int

Dr Vittorio Fattori

Food Safety and Quality Unit Food and Agriculture Organization of the United Nations Viale delle Terme di Caracalla 00153 Rome - ITALY Tel: +39 06 570 56951 Vittorio.Fattori@fao.org

SCAD REPRESENTATIVE

Dr Baptiste Dungu

Member of the Scientific Commission for Animal Diseases Lot 157, ZI Sud-Ouest P.O. Box 278 Mohammadia 28810 - MOROCCO Tel: +212 5 23 30 31 32 Fax: +212 5 23 30 21 30 B.DUNGU@mci-santeanimale.com

TAHSC REPRESENTATIVE

Dr Gaston Funes

(Invited but could not attend) Vice-President of the Terrestrial Animal Health Code Commission 20 Avenue Ernestine, 1050 Brussels - BELGIUM Tel: +32 (0)2640 3333

Fax: +32 (0)2640 0008 funes@agricola-ue.org

OIE HEADQUARTERS

Dr Monique Eloit

Director General 12 rue de Prony, 75017 Paris **FRANCE** Tel: 33 - (0)1 44 15 18 88

Fax: 33 - (0)1 42 67 09 87 oie@oie.int

Dr Elisabeth Erlacher-Vindel

Deputy Head Scientific and Technical Department e.erlacher-vindel@oie.int

Dr François Diaz

Chargé de mission Scientific and Technical Department f.diaz@oie.int

Dr Maria Szabo

Chargée de mission Scientific and Technical Department m.szabo@oie.int

Ms Jennifer Lasley

Project coordinator Scientific and Technical Department i.laslev@oie.int

Dr Delfy Gochez

Chargée de mission Scientific and Technical Department d.gochez@oie.int

Dr Neo Mapitse

Deputy Head World Animal Health Information and Analysis Department n.mapitse@oie.int

Dr Lina Awada

Epidemiologist World Animal Health Information and Analysis Department I.awada@oie.int

JOINT MEETING BETWEEN THE OIE SCIENTIFIC COMMISSION FOR ANIMAL DISEASES AND THE OIE TERRESTRIAL ANIMAL HEALTH STANDARDS COMMISSION

Paris, 11 February 2016

A joint meeting of the Scientific Commission for Animal Diseases (SCAD) and the Terrestrial Animal Health Standards Commission (TAHSC) was convened at the OIE Headquarters in Paris on 11 February 2016. The meeting was chaired by Dr Brian Evans, Deputy Director General of the OIE.

1. Opening of the meeting

Dr Evans on behalf of the Director General of the OIE welcomed the members of both Commissions, and reiterated the importance of regular exchange of views between the representatives of the Commissions to ensure good coordination. Dr Evans introduced Dr Tomoko Ishibashi who would in future be responsible for the internal coordination of the Commissions' secretariats and Dr Maroussia Clavel, newly appointed Head of the Performance Management Unit.

Dr Evans thanked the secretariats of both Commissions for the preparation of the meeting.

2. Adoption of the agenda

The draft agenda was adopted (Appendix I). The participants are listed in Appendix II).

3. Summary of the discussions

3.1. Work programme presentation

The OIE Headquarters prepared a summary of both Commissions' work programmes. The Commissions shared in detail with each other their actions and priorities.

Dr Evans welcomed the collaboration as a good initiative to improve coordination. Regarding the standards development cycle, he reminded the Commissions of the OIE Council's commitment to maintain the two-year cycle for the presentation of standards for adoption. He also suggested that the secretariat plan ahead for the *ad hoc* Group meetings that will be requested for approval by the Director General for 2016.

The President of the TAHSC announced that the texts to be proposed for adoption at the General Session in May 2017 will be notified to the Member Countries after in its September 2016 meeting report, which would allow Member Countries to be timeously aware and to have more time to formulate comments and suggestions.

3.2. Coordination with the Biological Standards Commission (BSC)

The President of the TAHSC outlined the main outcomes of his meeting with the BSC to discuss both Commissions' work programmes and in particular the progress made by the BSC on the revision of the BSE and scrapie chapters in the *Manual*, envisaging their adoption during the 84th General Session. He also noted that the BSC agreed to develop and share its work programme with the TAHSC and the SCAD. He added that the TAHSC and the BSC were working together to improve the recommendations on testing of embryos, especially in the context of *in vitro* produced embryos.

Dr Evans reiterated the Headquarters' intention to facilitate a joint meeting of the four Specialist Commissions by overlapping their respective meeting periods.

3.3. Glossary

The President of the SCAD expressed his support for the proposed new definitions on zoning with minor modifications. The President of the TAHSC thanked the SCAD for its comments on the proposed text, and noted that the TAHSC would also carefully consider comments from other Commissions and that the amended text will be included in the February 2016 meeting report of the TAHSC.

3.4. Horizontal chapters

a) Convention on naming of diseases

The President of the TAHSC noted that in response to a Member Country's comment, it will clarify the convention for naming diseases used in the *Terrestrial Code*, where the preferred format of the disease name of a chapter is 'infection with [pathogenic agent]'. The President of the SCAD supported the proposal. Further details of the convention will be included in the TAHSC report.

b) Restructuring of Chapter 1.6.

The President of the TAHSC proposed to restructure Chapter 1.6. and highlighted some of the options under consideration. The President of the SCAD took note of the proposal to keep the chapter as 'user friendly' as possible for Member Countries. However, as the SCAD had begun the revision of all the questionnaires under Chapter 1.6., it was agreed that the restructuration will be postponed.

Dr Evans informed the Commissions on the initiative of the OIE to establish a standard protocol for the procedure for self-declaration of disease freedom and an equine disease free zone (EDFZ).

c) Restructuring of Section 4 of the Terrestrial Code

The President of TAHSC described the TAHSC's intention to modify the structure of Section 4 of the *Terrestrial Code*. He added that this initiative was prompted by the planned restructure of Section 4 of the *Aquatic Code* by the Aquatic Animals Commission, and the TAHSC will reflect on how Section 4 of the *Terrestrial Code* may be also restructured for better logical flow and clarity. The other Specialist Commissions would be consulted in due time.

d) Vaccination chapter

Both Commissions reviewed and endorsed the outline of the draft new chapter on vaccination proposed by an *ad hoc* Group on vaccination that would be reconvened in March 2016 to finalise its task.

e) Zoning chapter

The Commissions discussed the requests from several Member Countries to modify the current containment zone concept to allow the occurrence of limited number of outbreaks within the containment zone. The Commissions agreed, in principle, on the modified concept as it would improve disease control and minimise the negative impact on trade. However, they expressed their concerns in the allowed extent of infection, the delimitation of the zone and in the surveillance requirements.

The Commissions agreed that the concept would need to be further developed with the support of external experts.

f) HHP Handbook

Dr Evans recalled that, following the discussion during the last joint meeting in September 2015, it was decided that the HHP Veterinary Certificate would not be included in the *Terrestrial Code*, but instead be placed in part 3 of the HHP Handbook which was available on the OIE website. The Handbook should at this stage not be considered as an OIE standard but rather an OIE guideline, as per draft definitions currently being circulated for Member Countries' comment, to support Member Countries in the implementation of the concept.

The HHP Handbook, including the certificate, would remain available on the OIE website. Member Countries are invited to contact the Scientific and Technical Department (scientific.dept@oie.int) to provide their feedback. The OIE would deal with the comments and would consult, where appropriate, with the relevant OIE Specialist Commissions.

The President of the TAHSC stated that Chapter 4.16. on High health status horse subpopulation will be rearranged within Section 4 of the *Terrestrial Code*.

3.5. Disease-specific chapters

The Commissions recalled the pending issues to be considered for amending Chapter 8.8. on Infection with foot and mouth disease virus, namely:

- A free compartment with vaccination;
- Concept of a containment zone allowing limited outbreaks;
- Emergency vaccination;
- Change of the status from free without vaccination to free with vaccination;
- Movement of vaccinated animals from a zone free with vaccination to a zone free without vaccination

The President of the SCAD acknowledged with thanks the specific questions raised by the TAHSC based on Member Countries' comments on the *Terrestrial Code* chapters on African swine fever, *Mycobacterium tuberculosis* complex and glanders.

The Commissions discussed the state of play of the revision of other *Terrestrial Code* chapters that were in the process of revision or drafting.

3.6. Upcoming ad hoc Groups

Dr Evans informed the Commissions that an *ad hoc* Group to consider all pending issues on Chapter 8.8. on Infection with foot and mouth disease virus would be convened this year. The Commissions agreed to participate in the *ad hoc* Group meeting as observers.

Dr Evans also informed the Commissions that *ad hoc* Groups would be convened in 2016 to update the *Terrestrial Code* chapters on BSE and CSF. It was also planned to convene *ad hoc* Groups on *Theileria* and on equine trypanosomosis.

It was agreed that the Commissions would be informed in advance of the detailed *ad hoc* Group plan for 2016 and a representative of the Commissions would be invited, as observer, to participate in the meetings, when considered appropriate by the Director General.

3.7. Other issues

The Commissions were informed of the progress made by the Headquarters to facilitate access of Member Countries to the *ad hoc* Group reports. The reports would be available on the OIE website once validated by the Specialist Commissions. The proposal would be presented to the next Council meeting for approval.

3.8. Dates of next meetings

The dates of the September 2016 Commission meetings were scheduled as from 5–16 September for the TAHSC and from 5–9 September for the SCAD. The dates of the February 2017 Commission meetings were scheduled as from 13 to 24 February 2017 for the TAHSC and from 13 to 17 February 2017 for the SCAD.

The C	Commissions	agreed to	have the join	t meeting on t	the fourth	day of the	SCAD meetii	ng.
-------	-------------	-----------	---------------	----------------	------------	------------	-------------	-----

.../Appendices

Appendix I

JOINT MEETING BETWEEN THE OIE SCIENTIFIC COMMISSION FOR ANIMAL DISEASES AND THE OIE TERRESTRIAL ANIMAL HEALTH STANDARDS COMMISSION

Paris, 11 February 2016

Agenda

- 1. Opening of the meeting
- 2. Adoption of the agenda
- 3. Summary of the discussions
 - 3.1. Work programme presentation
 - 3.2. Coordination with the Biological Standards Commission (BSC)
 - 3.3. Glossary
 - 3.4. Horizontal chapters
 - a) Convention on naming of diseases
 - b) Restructuring of Chapter 1.6.
 - c) Restructuring of Section 4 of the *Terrestrial Code*
 - d) Vaccination chapter
 - e) Zoning chapter
 - f) HHP Handbook
 - 3.5. Disease-specific chapters
 - 3.6. Upcoming ad hoc Groups
 - 3.7. Other issues
 - 3.8. Dates of next meetings

Appendix II

JOINT MEETING BETWEEN THE OIE SCIENTIFIC COMMISSION FOR ANIMAL DISEASES AND THE OIE TERRESTRIAL ANIMAL HEALTH STANDARDS COMMISSION

Paris, 11 February 2016

List of participants

SCAD:

Dr Gideon Brückner, President of SCAD Dr Kris de Clercq, the 1st Vice-President Dr Jef Hammond, the 2nd Vice-President Dr Silvia Bellini, Member

TAHSC:

Dr Etienne BONBON, President of TAHSC

Pr Stuart MacDiarmid, Vice-President

Dr Gaston Maria Funes, Vice-President

Pr Salah Hammami, Member

Dr Emmanuel Couacy-Hyman, Member

Dr Masatsugu Okita, Member

OIE Headquarters:

Dr Brian Evans, the Deputy Director General of the OIE

Dr Derek Belton, Head of the International Trade Department

Dr Tomoko Ishibashi, Senior Manager, International Trade Department

Dr Gregorio José Torres, Chargé de mission, Scientific and Technical Department

Dr Laure Weber-Vintzel, Officer in charge of the recognition of countries' animal disease status

Dr Jae Myong Lee, Chargé de mission, International Trade Department

Scientific Commission/February 2016

© World Organisation for Animal Health (OIE), 2016 This document has been prepared by specialists convened by the OIE. Pending adoption by the World Assembly of Delegates of the OIE, the views expressed herein can only be construed as those of these specialists. All OIE publications are protected by international copyright law. Extracts may be copied, reproduced, translated, adapted or published in journals, documents, books, electronic media and any other medium destined for the public, for information, educational or commercial purposes, provided prior written permission has been granted by the OIE.

The designations and denominations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the OIE concerning the legal status of any country, territory, city or area or of its

The views expressed in signed articles are solely the responsibility of the authors. The mention of specific companies or products of manufacturers, whether or not these have been patented, does not imply that these have been endorsed or recommended by

authorities, or concerning the delimitation of its frontiers and boundaries.

the OIE in preference to others of a similar nature that are not mentioned.