

VIENNA, AUSTRIA 27-28TH SEPTEMBER 2010



Report

80TH SESSION OF THE EXECUTIVE COMMITTEE OF THE EuFMD COMMISSION

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80th SESSION
of the
EXECUTIVE COMMITTEE
of the
European Commission for the Control of Foot-and-Mouth Disease
(EuFMD)

Vienna, Austria

27-28 September 2010



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Summary of Agreements and Recommendations

On the state of preparedness for FMD and training of veterinarians for recognition and response to suspected outbreaks

1. **Re-affirms** the commitment of the Executive Committee to continue the program of 'real-time FMD training courses' for the Member States (MS), and to the preparation of FMD simulation exercises to provide guidance for veterinary services.

On the contract for FMD reference laboratories services provided by the Institute for Animal Health Pirbright (World Reference Laboratory for FMD)

2. **Recommends** that the contract with the WRL for the upcoming three year period (2011-13), including the international PTS managed by WRL for EuFMD/FAO, is reviewed and a paper presenting options for the future is presented to the next Session. This review should include the support provided to the OIE/FAO FMD Laboratory Network, and the potential of decentralising services through greater support to leading laboratories in each virological region to contribute FMDV typing information.

On the international risk situation

3. **Recommends** MS take note of the situation in West Eurasia, with the upsurge in FMD cases in Turkey in 2010;
4. **Recommends** that serious effort is made to understand the circumstances that gave rise to the type O epidemic affecting Iran and Turkey in 2010, to better understand the possibility of prediction and early detection of new epidemics, possible improved control procedures in the animal marketing and movement across the West Eurasian region, and to understanding how vaccination programs could be further optimized to reduce risk of spread. The Secretariat is requested to organize this review and report to the 2011 General Session, with a preliminary Report in February;
5. **Recommends** MS to make use of the information in the annual FMDV surveillance report for 2009 from the WRL in their risk assessments, and take note to the unprecedented level of FMDV submissions to the WRL in 2010, particularly from the European neighbourhood;
6. **Urges** MS to note the WRL recommendations on priority FMDV antigens to be kept for emergency situations, and **reconsider their holdings** in relation to the high risk of A Iran 05 and type O PanAsia II in the region;
7. **Recommends** the Research Group and WRL continue the effort to improve the priority setting procedure, and bring their recommendations on the revised procedure to the General Session in 2011.

Relating to the Global Initiative

9. **Re-affirms** the recommendation of the 78th Session to FAO and OIE, to put into place the GF-TADS FMD working group to follow-up the recommendations of the Paraguay conference, as agreed at the GfTADS Global Steering Committee, and to include the EuFMD Commission and a representative for the West Eurasia Roadmap in this group as regional representatives;
10. **Takes note** of the preparations being made by FAO, and the full consultation with OIE, for a Global Conference on FMD to be held mid- 2012, and agrees that the Secretariat play a role in preparations to ensure the Conference is relevant to the EuFMD and the West Eurasian FMD Roadmap, and accessible for European participants;
11. **Takes note** of the development of guidelines and support documentation underpinning the Progressive Control Pathway (PCP) for FMD, and **recommends** that a special session on the PCP be given at the EuFMD General Session in 2011;

12. **Recommends** that the Secretariat provide a summary of international projects and co-ordinated control efforts, and a summary of research projects on FMD, at least once per year (Recommendation #17 in linked to this).

Relating to the Long Term Strategy for FMD Control in West Eurasia

13. **Agrees** that the Secretariat proceed with the organization of a 2nd progress review meeting for the West Eurasia FMD Roadmap, in late 2010, where possible back to back with the WELNET-FMD lab network meeting.

Relating to co-operation to improve monitoring and surveillance of FMD in the south and east Mediterranean countries

14. **Re-affirms** the importance of co-operation in FMD control and **agrees** to the support of the proposed initial meeting of veterinary services that share borders with Israel.

On the continuation of monitoring for FMD threats from the African proximity

15. **Endorses** the report of the Sub-Committee on African Proximity Surveillance and supports their recommendation to provide funding for activities to promote better networking of experts in FMD surveillance in Eastern and West/Central Africa in 2010-11, and using, where possible the FAO network actions such as EARLN and RESOLAB in these regions.

On the program of the Standing technical Committee

16. **Recommends** that a study to compare methods of estimating FMD prevalence in endemic regions be carried out, utilizing sero-monitoring data from EuFMD and other projects in comparison to estimates from disease reports, in order to better estimate values to use in risk assessment and priority setting procedures for the antigen banks;
17. **Approves** support for the concept note which had been reviewed by the subcommittee, with the provision that the amendments or clarifications required by the Committee are addressed when the contracts are prepared with the recipient organisations;
18. **Recommends** that a one day symposium be organized during the Budapest Session in February 2011, on the economics and resource implications of managing FMD outbreaks in free countries, in order to guide the Commission and Member States on the utility of tools for contingency planning.
19. **Recommends** attention is given by the Secretariat to identify how the EuFMD research group should network with international expertise on monitoring, and surveillance for FMD in relation to needs for risk assessment and PCP requirements. The outcome of the Open Session in Vienna, and recommendations on the above that require budget or other support, should be an item of the next Executive Session.

Meeting report

The Executive Committee of the European Commission for the Control of Foot-and-Mouth Disease (EuFMD) held its **Eightieth Session** in Vienna, Austria, on the 26th and 27th of September 2010, hosted by the Government of Austria.

The Session was opened by Dr Herzog, President of the Executive Committee, who welcomed the participants to Vienna.

Members of the **Executive Committee** present were: Dr Ulrich Herzog (UH, Austria Chairman), Dr Nigel Gibbens (NG, United Kingdom, Vice-Chairman), Dr Bengt Larsson (BL, Sweden, representing Dr Denneberg CVO), Dr Georgi Georgiev (GG, Bulgaria, representing Dr Voynov CVO), Dr Hondrokouki (HH, Greece, representing Dr Doudounakis CVO), Dr Antonio Fonseca (AF, Portugal, representing Dr Pinheiro CVO), Dr Muzaffer Aydemir, (MA, Turkey), and Dr Nenad Petrovic (NP, Serbia, representing Dr Mikovic, CVO).

Other participants were Dr Aldo Dekker (AD, the Netherlands), Chairman of the Research Group, and Dr Jef Hammond, (JH, Head of the OIE Reference Laboratory on FMD/FAO World Reference Laboratory for FMD. In addition, Dr Naci Bulut, attended as advisor to Mr Aydemir. Dr Joseph Domenech, attended as Observer, on behalf of Dr Angot, CVO of France following Invitation from the Chairman and in line with decisions of the 38th General Session of the EuFMD, Dr Emilio Garcia Muro (EGM, Spain, representing Dr C. Goñi)

Observers from the international organizations were Dr Alf-Eckbert Fuëssel (AEF Head of Sector, DG-SANCO, Brussels), Dr Nikola Belev (NB, Regional representative of the OIE for Europe), Dr Lea Knopf (LK, Scientific and Technical Department of the OIE, Paris), and Dr Juan Lubroth (JL, Chief of the Animal Health Service, FAO). The Secretariat for the 80th Session comprised Dr Keith Sumption (KS), Dr Adel Ben Youssef (ABY, officer seconded to EuFMD by France), Dr Melissa McLaws (EuFMD consultant), Dr Carsten Potzsch (EuFMD consultant) and Ms Nadia Rumich. The list of participants is given in **Appendix 1**.

The Session considered the current risk situation and recent events in FMD epidemiology in the region, reviewed the progress of actions that are ongoing or under development following the decisions of the 79th Session.

ITEM 1. Adoption of the Agenda and Follow-up to the 79th session

The agenda (**Appendix 2**) was adopted without change.

The follow-up to the recommendations of the 79th Executive Committee Session were summarized (**Appendix 3**). Of the 26 recommendations, significant progress was lacking in only three (R#1, on a Handbook on Simulation Exercises, #3 on review of the WRL contract, #7 to FAO and OIE to organize a meeting of the Steering Committee of the FAO/OIE Ref Lab Network). The first and second remained to be followed-up before the 81st Session, and the third remained for FAO and OIE to consider after the Annual Meeting of the FMD Lab Network scheduled one week after the 80th Session.

Conclusion

Follow-up remains necessary on the 3 items, particularly on the Handbook and the WRL Contract Review.

ITEM 2. Review of the contract with the World Reference Laboratory for FMD (Contract period 2008-10)

The Item was introduced by the Secretary, who presented a summary (**Appendix 4**) of the current support provided to the World Reference laboratory for FMD (WRL). The current 3 year contract is due to be completed in December 2010, and one-off additional funding was provided in 2010 following the request at the previous Session for further support for Proficiency Testing Services for EuFMD member states. There is therefore a need to review the current level of support and to bring a proposal to the 81st Session for the services expected to be provided and the budget that could be justified, in the period 2011-13.

In discussion it was concluded that the services remain vital, and that the contract provides an important part of the co-ordination and support arrangements of the OIE/FAO Ref Lab Network, resulting in useful quarterly and Annual Reporting on FMD, all of which provide important information for risk assessment. Given that both FAO and EuFMD contribute to the annual contract, and also that the FAO Contract for Morbillivirus services is requiring review, there is a need to review needs and arrangements for the coming 3 years for both FMD and Morbillivirus contracts. Given the escalating level of submissions to the WRL, there is also need to consider if a pre-screening or selection of isolates could be done at national reference labs/regional service providers, for example through building up key laboratories in West Eurasia and Africa which contribute the bulk of the samples.

Conclusion

The Committee agreed with the proposal for a Review Team of two persons representing FAO (and familiar with needs for RP and FMD services) and EuFMD (familiar with member states needs for Ref Lab Services) , to be supported through the EuFMD Secretariat and which should complete its work for the 81st Session.

ITEM 3. Vaccine and antigen banks

a-Priority Setting Process - Report of First Expert Panel Meeting to assess FMD risk to Europe from different source regions

Improving the priority setting process for recommendations of antigens stored in vaccine banks is an objective (agreed at the 38th Session) of the EuFMD research group. The actions undertaken follow the recommended process agreed at the last Closed Session of the EuFMD Research Group (Slovenia, 2009), involving a two stage process, with Step 1 being a assessment of the risk of entry from each virus pool and the second being the identification of suitable antigens/vaccines for the highest risk serotypes within each region. A possible final scoring system might be needed as some antigens have utility against FMDV present in multiple pools (e.g. O Manisa). The progress to develop an assessment methodology for step 1, risk of importing FMD into Europe from the 7 virus pools was presented by Dr McLaws (EuFMD Consultant). She presented the framework and assessment methods, and reported on the expert meeting held 3rd September involving experts from 4 member states and EFSA, to review the proposed process, methods and provisional findings (**Appendix 5**).

The basis of the proposed model is that the risk of each source region is proportional to the FMD prevalence in the region multiplied by the volume of FMDV susceptible animals or products imported to Europe from the region. The risk posed by legal imports is considered minimal because of the regulations and therefore the model focuses on estimating risk from illegal imports. Dr. McLaws explained the challenges in the process and the uncertainties over 1) incidence in source regions, 2) selection of indicators for illegal animal and animal product trade, given the paucity or lack of data on seizures at borders. Nevertheless, the expert meeting had concluded that the methodology was sound but that attention be given to improve the model, with best/better data for:

- Illegal trade (options would be identified by follow up discussion among the experts present);
- FMD prevalence, mostly based on 2008 data (comparing use of sero-monitoring data, vs recent OIE reports, vs use of conjectured prevalence as per EFSA study in 2005);
- Illegal live animal imports represented by “proximity scoring” that reflects the likelihood of movement across EU frontiers of animals from infected zones (land borders, ships, other).

The Expert meeting also recommended that where parameters with high uncertainty affect priority setting that this is made clear; and that the model be peer reviewed. The aim remained to make progress before the April EuFMD General Session, and as far as possible discuss findings and implications for antigen banks –and surveillance - at the Session.

Regarding Step 2, Dr. Hammond provided a paper summarizing the process (**Appendix 6**). In future the summary of Step 1 and 2 could be presented in place of the current report to the Executive given below (Report of the WRL , below).

Discussion

The first paper led to a good discussion on the issues of estimating illegal activities and the risks of FMDV entry into a free country (release) and exposure (resultant animal infection). The model being proposed only models release, and the Executive considered that exposure assessments should be left to the member states. The use of legal trade data to estimate illegal trade (false declarations, etc) needs to be carefully communicated to avoid the impression that significant risks are associated with legal trade in animal or animal products. It was also re-iterated that the model output is step 1 of a 2 step process for antigen recommendations, and should be interpreted with

the information about the nature of the viruses circulating in each pool. Dr Gibbens indicated that the UK would be interested in evaluating the model to assist the priority setting for FMD vaccines alongside the current practices.

Conclusions

1. Further work is supported to update the incidence/prevalence data used in the model, to compare use of proxies for illegal trade, and to follow up the recommendations of the 3rd September meeting;
2. There is a need to evaluate the model at country level, in comparison to other priority setting procedures used by member states for antigen selection;
3. The model might be applicable to other free regions of the world which are interested to improve priority setting for vaccine banks; the research group should take steps to identify how this is achieved in other regions;
4. The work should be continued with priority, and progress report to the February Executive Committee meeting, and a paper to the General Session meeting of the EuFMD (April 2011) should be produced.

b-Report on of the WRL-FMD on the risk situation and current priorities for national/EC banks

The report on the risk situation was provided by Dr Jef Hammond (**Appendix 7**). He highlighted that:

- Sample submission rates had increased to record levels in 2010, with > 1000 samples received by August, already exceeding the number received in the whole of 2009;
- Around 600 positive samples received, and 350 sequences generated by report date in 2010, predominantly the type O –PanAsia2 lineage but also A Iran-05;
- Samples received from all virus pool regions in the world, including in 2010 for the first time ever, from South America (Ecuador, as result of an FAO project).

The most significant events in 2010 have been

- the type O epidemic in West Eurasia (large scale epidemics in Iran and Turkey);
- the continued presence and evolution of A Iran-05 in Turkey;
- the events associated with type O in China and its neighbours, with incursions into South Korea (PR of Korea) , Japan and Mongolia (check) in April 2010 of type O, leading to difficulties to control in normally free areas and non-vaccinated populations. The FMDV involved in parts of China, South Korea and Japan were found to be highly related, whereas the FMDV type O from Mongolia was a separate lineage that includes recent Thailand/Malaysian isolates from 2009. This series of incursions into free countries is highly similar to the events of 2000-1 prior to the introduction into the United Kingdom, and both the WRL and EuFMD had issued a warning soon after the incursion into Japan was identified.

In South Asia, the O-Ind-2001 lineage continues to circulate in epidemic form, and was detected in Bhutan, and Bangladesh and Nepal, following reports of its predominance in India in 2009.

In endemic zones of Africa, samples had been received only from two countries in West Africa, four in East Africa, and none from Southern Africa in 2010 although SAT2 had been reported in Zimbabwe. The OIE Ref Lab in Botswana had received samples from SADC region but results were not presented.

In South America, for the first time, samples had been received, via FAO project; the situation there now resembles two islands of remaining infection, in the northern and southern Andean regions. Of importance is that most vaccines in use have been selected and optimized for infections in the former endemic parts and the match to those the current endemic areas needs to be studied.

Vaccine recommendations:

Vaccine recommendations of the WRL remain unchanged, with two (Manisa and O BFS or Campos, three A (Iran-05, A24 Cruzeiro and A22 Iraq), and one Asia-1 and SAT 2 (Saudi Arabia) in the high priority list. The continued presence of some of these in the high priority listing is called into question by the work of the Priority Setting Study, but he indicated that A22 Iraq for example had been proven to protect against the type A in Egypt and remained an important option. This listing may change in format and content as the priority setting study reaches conclusions.

Proficiency Testing 2010:

In 2009, 45 labs participated, representing 26 of the EU member states and 19 non-EU countries. In 2010, 66 were invited and 53 are participating; this has been assisted by the additional EuFMD support since the last Executive Committee but the work remains intensive and affected by staffing issues. The intention to utilize the SAP Institute to act as a regional depot and “relay” the PTS panels to WELNET countries has not been possible in 2010 because of the UK restriction on allowing re-export of the panels from countries such as Turkey. Results of the 2010 PTS will be provided in the Annual NRL meeting for FMD and SVD laboratories at the end of 2010.

c- Vaccine Market Authorization

The situation was summarized by Dr Hammond. For FMD vaccines only two products with full MA in the EU are *Merial's Aftopur DOE* and *Aftopur Alsap*, authorized in the UK and Germany by Mutual Recognition; this recognition allows use by other Member States, which forms the basis of antigen bank holdings by most MS. *Cedivac FMD DOE* is now a MERIAL product, and is registered in the NL under an old National Authorization and could potentially be used by other MS. The situation with authorization of *Intervet's Decivac DOE* was stated as unclear (Action Point).

Conclusions

1. The FMD situation in East Asia requires to be monitored carefully given the unprecedented number of FMD incursions within one year into previously free countries in the region. The working group on antigen priority setting should continue work on the risk from this region, in order to better guide MS and the Commission.
2. The regional epidemic of type O in West Eurasia in 2010 is of great concern given the scale of investment in FMD control in the region, and requires to be intensively studied.
3. The improved participation in the PTS from non-EU member states in Europe is noted and the efforts of EuFMD/WRL to achieve this were appreciated. The WRL, with WELNET, should address how the PTS can be extended more efficiently to neighbouring regions.

ITEM 4. West Eurasia – situation, status/progress of FMD control programs

a-Report on the FMD situation in Turkey

The Report (**Appendix 8**) was given by Dr Bulut on behalf of Dr Aydemir, GDPC. He informed the Committee of the serious upsurge in outbreaks in 2010, starting from January, rising steadily through the spring and reaching a peak of about 180 outbreaks per month in June and August. Almost all of Anatolia had been affected, but Thrace region remained free. The epidemic involved mainly type O, but over 100 type A outbreaks had also been confirmed. The factors behind the upsurge were considered to be a incursion of pathogenic exotic FMDV as a result of illegal trade in animals following the high meat prices in Turkey; the epidemic occurred despite unprecedented levels of vaccination, suggesting that there remains significant gaps in level of protection that allow transmission and spread, and he attributed this to a fade out of natural immunity 3-4 years after the

previous type O and A epidemics, plus a lack of booster immunizations creating a gap in immunity in young animals.

Two exotic type O sublineages were detected in the past months, adding to the two already circulating; within serotype A, an additional sublineage (A AFG07) was detected in addition to the two known to be circulating. The SAP Institute could now follow the spread of infection through rapid sequencing of a high proportion of isolates. The first detection of the most recent 3 type O sublineage introductions were close to the Syrian border, and close to Iran/Armenia. For type A (EZC-09 and AFG- 07 sublineages), the index cases are less clear as infection was found in the several locations in central and eastern Anatolia at about the same time.

He stressed the importance of early detection of these exotic viruses in neighbouring countries and drew attention to the 8 month delay between outbreaks in Iran and submission/sequencing and reporting by WRL of the O ANT-10 sublineage. [In response Dr Sumption indicated that early warning capacity was the main focus of the new project with Iran, with the aim of achieving serotype conformation within 7 days of an outbreak in Iran through equipping 5 subnational laboratories in Iran to type FMD through rapid tests, so that local epidemics could be typed and trigger rapid follow up investigations.]

Regarding vaccine matching, Turkey had replaced A22 Iraq with A Tur 2006 in July 2008, and would replace O Manisa with a homologous (recently circulating) field virus as low r values had been found in some isolates, in Turkey and among the WRL results for West Eurasia.

Relating to control program, the main achievement had been to reach OIE recognized freedom from FMD for Thrace region in May 2010; this follows years of effort by Turkey, assisted by the EuFMD/EC. The EuropeAid Project TR603.02 will finish in November 2010, and new Phase agreed for 2011-; the current policy is twice a year vaccination of large ruminants and once per year in SR; and had achieved >75% coverage in LR in almost all Provinces in spring, but lower success in SR, with gaps with < 50% coverage in a belt of Provinces in the east. Nevertheless, these achievements were far higher than in previous years in sheep.

The serosurveillance scheme was presented, with circa 67,000 sera collected (33,000 sera each from LR and SR); three regions of the 7 regions had > 10% positives in LR, with the highest (circa 24%) in South-East and East Anatolia. Sheep had consistently higher sero positivity in all regions except Marmara. These results do not lead to a conclusion on the role of SR in maintaining FMDV or spread to cattle, but do indicate wide exposure and together with their higher numbers than cattle, probable higher importance than previously appreciated. Further analysis of the data is needed.

The Chairman congratulated Turkey on the achievement of official freedom for Thrace region; this had long been a vision for the EuFMD and would further reduce the risk of spread into the neighboring EU countries. He expressed concern however at the scale of the reported outbreaks in 2010, and on the number of new incursions of FMDV detected which had appeared to spread extensively despite the unprecedented level of use of vaccination. This situation deserved to be intensively studied to better understand the factors that led to success or failure in vaccination programs, and whether the epidemics could have been predicted, or detected sufficiently early in one or more West Eurasian country to enable response. The situation was discussed and better understanding of the animal movement patterns, and options to reduce movement of infected animals, were agreed as important.

Dr Füssel drew attention to the finding of the spread of FMDV strains from Pakistan/Afghanistan into Turkey in the past year, and therefore that our region is connected epidemiologically to distant parts of West Eurasia, and should be concerned to ensure surveillance information from those parts are more readily available across the region.

Conclusions

1. A thorough review of the type O epidemic in West Eurasia in 2010 is required, to understand better the circumstances that gave rise to the rapid spread of strains across the region, and to identify practical measures to reduce the risk of recurrence.
2. FMDV strain emergence from any part of the West Eurasia region is of concern to Turkey/ EuFMD/Europe as movements of FMDV strains to the west have occurred with serious consequences in 2010; the above review should come up with options to improve the performance of threat detection and communication.

b-Report of the West Eurasia FMD Lab network (WELNET) on virus circulation and epidemic threat

The WELNET was established as a mechanism to raise capacity of the national laboratories in the 14 West Eurasian countries to undertake the lab services needed to support national monitoring and surveillance efforts under the West Eurasia Roadmap process. A Workplan was agreed following the Istanbul 2009 Roadmap meeting and supported by the EC through EuFMD Commission. Dr Bulut was elected Representative at the Istanbul meeting, and presented a report on progress (**Appendix 9**). Progress had been made in Training (1st WELNET Training Course 12-23rd July 2010 at the SAP Institute, for 9 Trainees from TransCaucasus and Iran) and in regular teleconferences with European RLs, Iran and Pakistan. The plan to assist the WRL to establish a PTS for the region could not take place (see 3b). There is a need to progress the communications between NRLs in the region (Newsletter, Web pages), provide further training (Iraq, Syria, others), and in particular to address the issues common to the region (harmonization of SP tests, NSP induction by vaccines, rapid serotype and strain typing).

c- Status/plan of new programs under negotiation or implemented (Iran, TransCaucasus)

Since the 79th Executive Committee, project documents have been finalized for a support projects (summarized in **Appendix 10**) and to assist Georgia, Armenia and Azerbaijan (TransCaucasus Country program –TCC)), Iran (Phase III of the Iran surveillance centre project), and Egypt. At time of report, Armenia has signed the Memorandum of Understanding (MoU) with FAO and signature is expected from Georgia and Azerbaijan; Iran signed the MOU for Phase III in mid September, and for Egypt, this is anticipated before mid-October.

A summary of the situation in Iran is given in **Appendix 11**. The situation has also been extremely serious in 2010, as Turkey, with spring epidemic of type O with > 400 cattle with almost a thousand outbreaks reported in April, and > 1600 in May, which was the peak, followed by sharp decrease after main vaccination campaign in May. In response to request for urgent assistance, the EC delivered O BFS Monovalent vaccine (2 million doses) after the WRL had confirmed a good match between the O BFS in the EU bank and recent Iranian type O isolates. Two shipments of FMDV isolates from Iran (>180 epithelia) in spring 2010 enabled vaccine matching and also a detailed molecular picture of the emergence and dominance of sublineages to be assembled. The timetable of epidemic requires clarification but at first sight there appears only a limited time between appearance of strains in Iran and their subsequent appearance in Turkey, therefore early warning requires the time between sample collection and sublineage reporting to be closer to 1-2 weeks than the several months as currently occurs. The Phase III of the Iran project will focus on establishing rapid typing of FMD outbreaks, with the aim to achieve this by the end of 2011.

The Egypt support project (150,000 USD for 9 months) will begin mid October and run until mid 2011; re-establishing the SMS based FMD reporting system is a priority, together with strengthening the laboratory capacity for rapid and reliable FMDV confirmation and to support a national sero-survey.

Brief discussion followed. Dr Domenech confirmed the importance of the support to Egypt since the EU Twinning Project with Egypt had noted the value of the Short Message Service (SMS) reporting

system and the sero-surveillance support in 2009, and urged early resumption of the activities. The new Phase of co-operation with Iran was noted, and it was agreed this needed a major effort to improve early warning given the spread of type A and O epidemics through Iran to Turkey in past two years.

d- 2nd West Eurasian Roadmap Progress meeting (following Istanbul 2009)

These meetings have a high importance given the epidemic situation in Iran and Turkey in 2010 and the uncertain extent of spread and impact of this wave of infection on neighbouring –or possibly source – countries in West Eurasia. The 2nd Progress (6-9th December) meeting should review progress of national programs using the Progressive Control Pathway (PCP) as a tool to assess if countries have progressed or regressed. In addition to the meeting will consider how and why the regional epidemic occurred, and the WELNET and West Eurasian Epidemiology and Informatics Working Group meetings will develop work plans for 2011 that will be reviewed by the meeting of CVOs on the 8th December.

The PCP Stages are themselves under review at the FAO Consultative Group meeting (CG) on the **Progressive Control Pathway** planned for the first week in October, and subsequently, EuFMD will send a questionnaire to the 14 countries to request evidence in support of their PCP Stage, by the end of October, giving one month for responses to be summarized for the 8th December.

Conclusions

1. The epidemic events in 2010 confirm the importance of the Phase III of the Iran Surveillance project and justify continued support for the WELNET in 2011, but more attention should be given to addressing the reasons for lack of early detection of new sublineages, and weaknesses in communications after events/new strains are detected;
2. A thorough review of the epidemic events across West Eurasia in 2010 is needed, in particular to identify the risk factors or triggers for the sudden explosive spread, to identify critical points for surveillance or control of spread, and to identify if the Workplan of the Phase III of the Iran project is likely to deliver improved early warning of the type O and A epidemics;
3. The Annual WELNET meeting should identify a Workplan for 2011 and make clear to the EuFMD where it is constrained by financial or human resources from carrying out the planned actions;
4. A solution is needed for involving the 14 countries in the PTS and the Annual WELNET meeting should identify how PTS can be made available in 2011, without greater burden upon the WRL.

ITEM 5. Balkan/South East Europe Region

a- EuFMD Meeting for National Reference laboratories in the Balkan Region

A first meeting for FMD NRLs in the Balkan region was planned for the 28th September (Vienna, in the context of the FMD Week 2010), with the participation of 11 NRLs from all states of the former Yugoslavia, plus Greece, Bulgaria, Romania, Moldova and Austria, and organized by the EuFMD. Agenda Items include improving communication (contact difficulties) and improving participation in the Proficiency Test Scheme operated by WRL, and the identification of training needs. Dr Georgiev presented an Evaluation report based on questionnaire survey conducted to prepare for the meeting (**Appendix 12**).

Of note is that NONE of these NRLs can currently are high containment facilities and licensed to perform virus isolation, and given that only 5 of the 11 can perform RT-PCR, 6 states lack a sensitive

diagnostic method for confirming FMD. The test stated by most (10 of the 11) is NSP ELISA, but this can only detect FMD at least a week after infection.

This gap in capacity requires serious attention and the meeting will identify options to address, including training/introduction of PCR for FMD. Five countries had also not participated in the annual PT, but on the positive side, participation has been increasing over the past couple years.

The Committee thanked Dr Georgiev for his efforts and requested a Report and clear recommendations for follow-up.

Conclusions and Recommendations

Feedback was provided to the Chairman of the EuFMD Committee following the meeting on the 28th; this meeting of Balkan National Ref Laboratories concluded that there was a major issue with lack of capacity to confirm FMD in 6 states and a lack of national commitment to maintain accredited test status in the NRLs for services that may be required for FMD. The meeting produced 10 recommendations (Appendix 12 b) for follow-up by the Executive in Budapest Executive and Balkan Forum.

b-Plan for the Budapest 2011 Meetings (81st Executive Committee EuFMD, FMD Economics Symposium and Balkan Animal Health Forum)

Given the need for an Executive Committee meeting ahead of the April 2011 General Session of the EuFMD, the Mini-Executive held in July 2010 agreed that the 81st Executive Committee Session should be held in February, as part of a Combined Event in Budapest during the Hungarian Presidency of the EU. The idea presented was to have the three meetings mentioned above within a 3 day period. A short Executive (half day) would be followed by a 1 day FMD Symposium of the Economics/Impacts of FMD in free Countries, and in parallel a 1st Balkan Region Animal health Forum held under the auspices of GfTADS and supported by FAO. Keith Sumption illustrated (**Appendix 13**) that the series of meetings could be held with partial overlap of meetings given that the FMD Impact Symposium would involve different persons from the Balkan Regional Forum.

The Hotel and organizational details were presented and approved, with FAO to take the lead in invitations for the Balkan Regional Forum.

Conclusion

The Committee approved the proposal as presented.

ITEM 6. Balkan/South East Europe Region Economic impacts of FMD - plan for symposium February 2011

The Mini-Executive meeting in July 2010 had agreed to postpone the Symposium from September until February, given the CVO meeting in Brussels and to avoid placing further strain on the organization of the Vienna meetings (FMDWeek2010). Melissa McLaws (EuFMD) presented a plan for the symposium (**Appendix 14**) and the objectives of the meeting were discussed and agreed.

The Committee upheld the importance of holding such a Symposium. In discussion, it became apparent that there are many areas of high relevance around this general topic, such as communication with politicians, the private sector and civil society, and the interaction between economic impacts and other impacts such as sociological and welfare impacts. However, the Committee emphasized the focus the meeting should be on projecting and minimizing economic impacts, and optimal use of resources. Of interest is how 'FMD Preparedness' can be valued in this time of economic cutbacks. There should be sufficient time allotted to discussion in the symposium to allow CVO's and policy makers from the different countries to interact in a meaningful way. The

option of inviting industry representatives was discussed, but it was decided that to encourage frank discussion this first session should only include CVO's, deputy CVO's and policy makers. Depending on the outcome of this symposium, follow-on sessions/activities could involve industry.

ITEM 7. Global Initiative

a- Report of the GfTADS Working Group on FMD, and preparation of the next FAO/OIE Global Conference on FMD Control

Dr Lubroth, Chief of the Animal Health Service, FAO, reported on the progress to establish a working group under GfTADS on FMD. FAO and OIE were working closely, with focal points (Peter de Leeuw, FAO and Joseph Domenech, OIE) in each organization, to agree Terms of Reference, reporting lines, and ensure continual dialog in planning events including the Global Conference. The two candidates for the latter were India and China (Hong Kong) ; offer from the former had been received, and from the latter was expected. The Global Conference will be organized by FAO, with OIE, with expected dates in period February to June 2012, therefore a decision would be made before February 2011. The Working Group would develop at the Global Strategy, which is expected to utilize the PCP as the framework, following the Consultative group (expert) Meeting (called by FAO) on the PCP in the first week of October. The report of the CG Meeting should set the Working Principles and Guidelines for the EuFMD and others in applying the PCP in West Eurasia and elsewhere in 2011.

Dr Knopf, OIE, indicated their full agreement with the position stated.

Conclusions

1. The Committee requested a progress report to be given at the next Executive Committee and urged a decision on the Global Conference made before the next meeting.
2. The EuFMD Open Session of the research group in 2012 should be kept to the current cycle and planned for autumn 2012, given that it is a Technical rather than political meeting, and should not be affected by the delay in decision making by FAO /OIE .

b-Status/Adoption of guidelines relating to the Progressive Control Pathway (PCP)

The Committee took note of the FAO Expert Meeting planned for the following week to review the basic texts describing the Stages of the Progressive Control Pathway (PCP) for FMD, given the experience of application over the past 2 years, and given the interest of the OIE to develop a common approach in which the PCP assists countries to work toward and achieve freedom from FMD. The meeting (**Appendix 15**) is expected to revise the PCP texts and agree a set of Stage descriptions and processes for assessment that can be applied in Regional and National support programs.

The Committee supported this development and encouraged the FAO and OIE to continue working closely to reach agreement on PCP Stages and Processes, and to apply these in regional initiatives including the West Eurasian FMD Control Roadmap.

c- Report on the (Global) review of international projects supporting improved FMD control

Following the request of the Chairman at the previous Executive, a report summarizing the status of international projects which have improved FMD control as a major component was prepared and presented by Dr BenYoussef, EuFMD (**Appendix 16**). **Research projects were excluded from this review.** Significant gaps in support for FMD control were noted in South Asia and West/Central

Africa, emphasizing the issue raised in previous Sessions of the importance of surveillance support in areas without co-ordinated control programs.

Dr Emilio Garcia Muño presented a report on international projects relating to FMD and other transboundary diseases that are supported by **Spain (Appendix 17)**.

In discussion, it was agreed that these reviews were extremely useful. Several questions that followed were related to research projects and it was agreed that in some regions surveillance and epidemiology research projects appeared to be the majority (Africa) and some knowledge of these was necessary. Several real gaps were identified, where it was clear that some regions did not appear to receive significant support to FMD control, and that most international support was in the form of capacity building rather than in paying for vaccination campaigns. Dr Lubroth drew attention to the efforts and support from Spain for improving co-operation in the Southern Mediterranean and on FMD control in the Andean region of South America.

ITEM 8. South & East Mediterranean

a-Update on new programs under negotiation or implemented (Egypt)

The Secretary updated the Committee on developments; as agreed at the 79th Executive, a limited program (150,000 and 9 months duration) of support to Egypt had been finalized and implementation expected to begin in early October 2010. This program should assist Egypt to undertake FMD monitoring in line with PCP Stage 1 and to extend the SMS reporting system for FMD to most of the livestock producing regions. National control strategy is under review through a separate EU funded Twinning program.

The Committee noted the development and requested a update of support and the outlook, at the General Session in 2011.

b-Co-ordination meeting – Israel and neighbouring countries

The Committee agreed to support the request of Israel for assistance to organize a meeting on FMD control with its neighbouring territories, under the auspices of the EuFMD Commission. The Secretary mentioned the few options for meeting venues included Cyprus, where all parties willing to meet could travel by short flight. Such cross-border harmonization meetings for animal health services were held until 2002 but had lapsed, and very significant FMD control issues had arisen in most of the past 5 years.

Conclusion

The Committee approved the proposal to support the initial meeting but urged caution as to expectations of what could be achieved.

ITEM 9. African proximity surveillance

Report on decisions made by the subcommittee

The Chairman summarized the decisions reached at the meeting (President and Vice Presidents, Dr Fuëssel for the EC, EuFMD Secretary and WRL representative) held in Brussels in July to identify which proposals for support to African countries to improve FMD surveillance could be eligible for support. The Report of the Meeting had been previously circulated (**Appendix 18**). The main decision reached were that EuFMD support in 2010-11 should be through SubRegional Networks (Eastern, and West/Central Africa) rather than through specific country support projects, even though the

latter had been the mechanism used in 2007-9 with good success. Regional networks were seen as natural partners to the EuFMD research group, and should develop in similar ways, to address regional diagnostic needs, including where feasible, a greater role in providing surveillance information and thereby reducing the demand upon WRL services. The meeting had agreed to a support package of up to 50,000 USD per year in 2010-11 for each of the two regional networks. It was also agreed that applied research to improve vaccine selection against SATs remained a high priority and that collaborations with the Southern African FMD lab network should be continued with the EuFMD research group, given the relative less cost and competitive advantage of Southern African partners, and the need to continue reviewed by the EuFMD Research group in 2011.

Conclusions

The Report of the Subcommittee on African proximity surveillance was noted and their recommendations endorsed. The Secretariat should implement the program of support and progress should be reviewed in 12 months (at the 1st Executive after the General Session).

ITEM 10. Standing Technical Committee

a- Progress report on priority issues (those referred to the Committee by 38th Session in 2009)

The Report (**Appendix 19**) was provided by Dr Aldo Dekker, Chairman of the Standing Technical Committee. Of the 6 objectives set for the Research group at the 39th Session, the 4 of most immediate importance for EuFMD activities were progressing well (Full genome sequencing of West Eurasian FMDV for epidemiology, Vaccine/Antigen Banks priority setting procedures, work on PCP monitoring and surveillance guidelines, validation /guidance on penside and other diagnostics tests). Two other objectives were being addressed mainly through the Disconvac and EPIZONE workpackages involving several Research group members. Regarding Concept Notes agreed in the March meeting, both projects had started and would be reported at the Closed Session of the Research group; both involved development of antisera and should be completed by the end of 2010.

The Open Session of the Committee, part of the FMD Week, had again attracted high participation with over 220 registered to attend from across the world. He applauded the Secretariat and Austrian hosts for their management of the Event, which remains the biggest scientific event regularly held on FMD in the world.

The Chairman thanked Dr Dekker for the report.

b-Report on decisions of the Concept Note subcommittee

Dr Dekker presented a Concept Note (**Appendix 20**) prepared by Kris de Clercq on behalf of those members of the Research group who are members of the Global Foot and Mouth Disease Research Alliance (GFRA). The Concept Note is aimed at addressing the issue identified at the 79th Executive, and earlier Committees, that greater clarity on which laboratories and research institutions are working on FMD, their focus, field work activities, and capacity to undertake animal infections, undertake challenge tests, or field work in infected and/or vaccinated populations, could assist when both EuFMD, NRLs in Europe and provide better understanding of the current thrusts of research collaborations.

The Concept Note proposed to catalog FMD research activities and funding, and circulate the information at least twice per year, to EuFMD and other sessions, to support communication on

actions/meetings/plans, to produce annual progress report on the state of FMD research, and organize joint meeting relevant to EuFMD res group and GFRA members.

The Committee debated the proposal and agreed that a Summary of the State of FMD Research would be very useful, filling a current gap affecting understanding of progress and gaps.

Conclusion

The Committee agreed that the activities would address a gap in the information available to coordinate research studies and connect and communicate progress, and should be supported. A one year trial period was agreed. The link or involvement of a member of the Research group should be ensured in the contract, should the most cost effective solution be to contract the work to a non-European party.

ITEM 11. Financial situation

a-Financial position and budget preparation for 39th General Session

As the decision on Budgets for 2012-13 had been postponed to the February Executive Committee meeting, the Committee considered –and approved –the Statement of Accounts for the three Trust Funds operated by the Commission (**Appendix 21**). Regarding the EC Trust Fund (MTF/INT/003/EEC), he explained that with the signing of the new agreement with EC in 2009, FAO had advised to operate the Trust Fund starting with the new agreement and to “financially close the previous (2005-9) project Phase”. For this reason, two statements are provided, one indicating a balance of minus US\$153,999 being the balance of expenditure after the 2005-9 project. This does not mean this Phase overspent, in fact there were considerable savings as the EC did not provide all the funding agreed under the previous Phase. A final Statement of this Phase will be produced once one company (Smiths Detection, UK) repays circa 100,000 US\$ owed for non-delivery of the two Robotic Field FMD detection devices which did not perform as required and the company agreed to repay. The final balance is expected to be minus US\$60,000 and the EC will be asked for permission to “settle” this balance from the current balance in this Fund. The balance of the EC TF at 31st August was US\$689,315; the FAO procedure with the EC based on the signed agreement is to request funds when >70% of the first tranche of funds is spent and as this was almost the case, a call for the second payment would be made shortly. Expenditure in 2011 will be higher than 2010 as the TransCaucasus, Iran, Egypt and Training Programs will be implemented.

The Committee took note of the situation and the Chairman thanked the EC for their continued support. Dr Füssel asked for clarification on the procedures, and requested in future that breakdown of expenditure by project be provided; it was explained that the new system enabled this to be identified as each subproject were now set up as “baby projects”.

b- Report on staffing and Uptake of Intern positions

The Secretary reported that Enrique Anton had been recruited as an Administrative Clerk (G3 level) to support implementation of the EC funded projects, this position having been agreed in the EC/FAO Agreement for 2009-12. He had previously assisted EuFMD as a temporary assistant and provided an outstanding service.

Regarding the “intern positions”, MS had not taken up the opportunity to send officers for training attachments but that 5 persons who had attended the FMD real-time Training Program had expressed interest, and two from Balkan Region, two from UK and one from Finland. The Committee agreed that the Secretariat could proceed to offer places in line with the procedure previously agreed.

List of Appendices

1. List of Participants
2. Agenda
3. Follow-up to the recommendations of the 79th ExCom (KS)
4. Review of the support to WRL provided by EuFMD and FAO(KS)
5. Assessing the Threat to Europe from Global FMD Viral Pools: A tool to inform Antigen Priorities for Vaccine Bank Stores (MM)
6. Vaccine bank priority setting (JH)
7. IAH Pirbright WRLFMD Report (JH)
8. FMD Situation in Turkey (NB)
9. West Eurasia FMD lab network(NB)
10. Status/plan of new programs (KS) \
11. Situation in Iran
12. Evaluation report-Balkan region (GG)
13. Budapest Meetings - February 2011 (KS)
14. Economic impacts of FMD - plan for symposium February 2011
15. Consultative Group meeting on the FMD – Progressive Control Pathway (PCP)
16. Internationally supported FMD projects in the World – regional and interregional activities (ABY)
17. Spanish cooperation projects with third countries in the framework of FMD (EGM)
18. Report Mini-Executive Committee EuFMD Commission - 20th July 2010, Perm Rep Austria, Brussels (KS)
19. Research group progress 2009 – 2010 (AD)
20. Concept note-GFRA (AD)
21. Statement of accounts

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for the Control of Foot-and-Mouth Disease
Vienna– Austria
27-28 September 2010**

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Appendix II

Item	Notes	Papers (if none mentioned, assume verbal report)
1. Adoption of the Agenda	<i>Training Program– Agenda Item needed?</i>	
2. Review of the WRL contract 2008-10 , and proposal for 2011-13 (<i>proposal: Agree process, Report of review to be given at 81st Executive</i>)	Keith Sumption	Summary (ToR) of current contract
3. Vaccine and antigen banks:		
a. FMD risk to Europe from different source regions– report of first experts meeting	Melissa McLaws, EuFMD	Report 1 st meeting 2 nd Sept
b. Report on risk situation and current priorities for national/EC banks (WRL)	Jef Hammond, WRL	Quarterly Reports WRL +ppt (10 slide max)
c. Market authorization procedures and outlook for European vaccine bank management.	Jef Hammond	None–or Vaccine bank network paper
4. West Eurasia – situation, status/progress of FMD control programs:		
a. Report on the FMD situation in Turkey	GDPC, Turkey	Advance – distribution map, 2010 and last 2 months. Summary typing results 2010
b. Report of the West Eurasia FMD Lab network (WELNET) on virus circulation and epidemic threat	Naci Bulut, Turkey	Report – inc Training
c. Status/plan of new programs under negotiation or implemented (Iran, TransCaucasus)	Keith Sumption	Summary sheet of status of agreements
d. 2 nd West Eurasian Roadmap Progress meeting (following Istanbul 2009).	Keith Sumption/Giancarlo Ferrari	Agenda
5. Balkan/South East Europe Region		
a. Meetings planned - FMD Lab capacity (28 th September), Tripartite (?)	Georgi Georgiev, Bulgaria	Agenda/list of participants
b. Budapest 2011 meetings.	Chairman	Agenda
6. Economic impacts of FMD - plan for symposium February 2011		Agenda/plan
7. Global Initiative		
a. Report of the GfTADS Working Group on FMD (if occurred);	Peter de Leeuw, FAO; OIE	Ppt
b. Status/Adoption of guidelines relating to the Progressive Control Pathway (PCP);	Keith Sumption	
c. Report on the (Global) review of international projects supporting improved FMD control	Adel BenYoussef, EuFMD	Summary paper
d. Preparation of the FAO/OIE Global FMD Scientific Conference, 2011	Peter de Leeuw OIE to add	
8. South & East Mediterranean		
a. Update on new programs under negotiation or implemented (Egypt);	Keith Sumption	Summary
b. Co-ordination meeting – Israel and neighbouring countries (potentially hosted by Cyprus).	TBD	

9. African proximity surveillance		
a. Report on decisions made by the subcommittee.	Chairman	Report of July meeting (circulated)
10. Standing Technical Committee		
a. Progress report on priority issues (those referred to the Committee by 38th Session in 2009)	Aldo Dekker	Summary Paper
b. Report on decisions of the Concept Note subcommittee.	Aldo Dekker	Concept Notes
11. Financial situation		
a. Note about budget preparation for 39th General Session in 2011;	Keith Sumption	
b. Report on staffing and Uptake of Intern positions.	Keith Sumption	

Follow up to the 79th Session – Implementation of Recommendations

Recommendations	Follow-up Status
<i>On the state of preparedness for FMD and training of veterinarians for recognition and response to suspected outbreaks</i>	
1. Recommends that a handbook on the preparation of FMD simulation exercises be developed by the Commission, to provide guidance for veterinary services	To be done
2. agrees with the proposal to provide an additional 75,000 US\$ in support for the WRL in 2010 in order to manage the increased complexity of international shipments and to safeguard the provision of the Proficiency Testing Service (PTS-Phase XXIII) to all EuFMD Member States and neighbouring countries	Contract signed - LoA
3. recommends that the contract with the WRL for the upcoming 3 year period (2011-13), including the international PTS managed by WRL for EuFMD/FAO, is reviewed and a paper presenting options for the future is presented to the next Session	To be done
<i>On the international risk situation</i>	
4. Recommends Member States (MS) take note of the situation in West Eurasia, with the upsurge in FMD cases in Turkey in 2010, the movement of South Asian FMDV into the region with the first detection of the O Ind 2001 genotype into Iran, and the detection of an Asia-1 strain apparently not covered by vaccination with the Shamir antigen	
5. recommends -considering the risk relating to FMD in West Eurasia- that future sessions should receive a report from the representative of the West Eurasia FMD lab network on the virological surveillance and epidemic events relevant for risk assessment	Agenda -80 th
6. recommends MS to make use of the information in the annual FMDV surveillance report for 2009 from the WRL in their risk assessments, and take note to the unprecedented level of FMDV submissions to the WRL in 2009, particularly from the European neighbourhood	
7. calls upon FAO -given the current contract and financial contribution of the EuFMD and FAO to the WRL- to organize a meeting of the Steering Committee of the FAO and OIE FMD Lab Network in order to develop a common vision and clarify the commitments of the parties for the period 2011-13	To be done
8. urges Member States (MS) to note the WRL recommendations on priority FMDV antigens to be kept for emergency situations, and reconsider their holdings in relation to the high risk of A Iran 05 and type O PanAsia II in the region	


9. recommends that the procedure proposed by the Research Group for identification of priority antigens should be further developed, with greater emphasis on 1) developing consensus on the risk from each virus pool to EuFMD states, 2) clear recommendations following an improved peer concluded before each Session and 3) transparent process that could be adapted or developed by MS	Part 1 underway, expert meeting held 2 nd September at Pirbright with 4 MS experts.
10. re-affirms that actions to improve the submission of FMDV from the areas of concern in the African proximity should be continued, and recommends the Research Group further develop protocols and guidance on replacement of live virus shipments with inactivated (RNA) based methods	Continued submission support. Guidance paper still to be done.
<i>Relating to the Global Initiative</i>	
11. Re-affirms the recommendation of the 78th Session to FAO and OIE, to put into place the working group to follow-up the recommendations of the Paraguay conference, as agreed at the GfTADS Global Steering Committee, and to include the EuFMD Commission and a representative for the West Eurasia Roadmap in this group as regional representatives	Working group - Partial progress
12. takes note of the preparations being made by FAO, and the full consultation with OIE, for a Global Scientific Conference on FMD to be held at the end of 2011/start of 2012, and agrees that the Secretariat play a role in preparations to ensure the Conference is relevant to the EuFMD and the West Eurasian FMD Roadmap, and accessible for European participants	Offer received India. , final decision not yet made by FAO and OIE.
13. takes note of the development of guidelines and support documentation underpinning the Progressive Control Pathway (PCP) for FMD, and recommends a greater involvement of the Research Group in technical development and/or clearance procedures, before presentation at the Open Session in Vienna	Major theme of the Open Session. RG highly involved in the upcoming FAO Technical Consultation
14. recommends that papers summarizing 1) the status of PCP documentation, and 2) the global status of internationally supported programmes/actions which are principally aimed at improving FMD control, be tabled for the 80th Session [under the Agenda point on the Global Initiative]	On the Agenda.
<i>Relating to the Long Term Strategy for FMD Control in West Eurasia</i>	
15. Agrees that the proposal presented by the representative of the West EurAsia FMD Lab Network for actions in 2010 be given support and a request to fund the proposed actions be made to the EC, in order to achieve an earlier detection and communication of FMDV threats from this region	Contract signed (LoA).
16. agrees that the Secretariat proceed with the organization of a 2nd progress review meeting for the West Eurasia FMD Roadmap, in late 2010, where possible back to back with the WELNET-FMD lab network meeting	Scheduled second week December, Istanbul.

<i>On the priority vaccine antigens for use in West EurAsia</i>	
<p>17. Takes note that the recommended types and strains for inclusion in vaccination programs in West Eurasia to cover the upcoming 6 month risk period remain serotype O Manisa and Asia-1 Shamir, and type A Iran-05 strain</p> <p>The Secretariat should ensure West Eurasian countries are aware of the recommendation and encourage them to undertake risk assessments before omitting one or more of these strains from the routine program.</p> <p>Countries which utilize routine vaccination should ensure access to vaccines in emergency situation against less frequent FMDV strains, in the medium priority category of the WRL.</p>	
<i>Relating to co-operation to improve monitoring and surveillance of FMD in the south and east Mediterranean countries</i>	
<p>18. Re-affirms the importance of co-operation in FMD control and agrees with the proposed assistance for FMD training in laboratory confirmation procedures and on design of monitoring programs (for infection and vaccination performance), and that a request to EC be made for actions to be concluded in 2010-11</p>	<p>Training programs not yet agreed/done. WELNET program a model, could extend.</p>
<p>19. re-affirms that the Commission, working through the Secretariat, should continue to explore ways of co-operation with the FAO/OIE regional animal health centers in Beirut and Tunis, and encourages REMESA to make use of the technical expertise and opportunities of the Commission in its work program, as recommended by the 38th Session.</p>	<p>Limited co-operation.</p>
<i>On the continuation of monitoring for FMD threats from the African proximity</i>	
<p>20. Recommends that the proposed programme be considered a framework for supporting actions in this region, and be given support, to the limit indicated, with the proviso that a subcommittee be established to review proposed individual country or subregional actions and reach conclusions upon their support; this subcommittee would be delegated responsibility to review the proposed activities, and to establish criteria for evaluation, taking into consideration factors including the risks to the EuFMD and neighbourhood, the contribution to addressing information gaps, and to the decision upon antigen and vaccine selection for at risk countries</p>	<p>Follow up meeting July 20th, Brussels; Agreement to provide limited support to establish two active African FMD lab networks.</p>

<i>On the continuation of support to FMD control in the TransCaucasus (TCC) countries</i>	
21. Endorses the proposed action to support FMD control in the TCC in 2010-12, and recommends a request to the EC for funding should be submitted by the Secretariat	Proposal finalized, EC funding agreed, contracts prepared.
<i>On the continuation of support to FMD monitoring and control in Iran</i>	
22. Re-affirms the importance of continued co-operation in FMD monitoring and control, and takes note of the findings of the review of Phase II and changes recommended in Phase III	Follow-up meetings in Paris (may) -Exec with Iranian vet organization
23. Recommends that the position of the Executive on the 3rd Phase of the program of activities with Iran be reached by the Executive AND a subcommittee of the President and Vice-presidents by the end of May 2010, on the basis of the response of the Iranian authorities to the Phase II review and proposed activities recommended by the mission team for Phase III The secretariat should ensure that phase III is limited to action that can reasonably be delivered within the specified timescale and for which the Iranian authorities have agreed positive and specific support as part of their overall FMD control strategy	Proposal finalized, EC funding agreed, contracts prepared.
<i>On the studies recommended by the Standing technical Committee</i>	
24. Approves support for the two concept notes which had been reviewed by the subcommittee, with the provision that the amendments or clarifications required by the Committee are addressed when the contracts are prepared with the recipient organizations	One CN action started: (SAT serology standardization). 1 st report received.
25. recommends that a one day symposium be organized during the Open Session in Vienna in September, on the economics and resource implications of managing FMD outbreaks in free countries, in order to guide the Commission and Member States on the utility of tools for contingency planning	Planned for Vienna FMD Week but to give more time, postponed to Feb 2nd.
<i>On the financial situation</i>	
26. agrees that support for the proposed “Intern” program be provided from the EuFMD Trust Fund (MTF/INT/011/MUL), for the purpose of enabling longer term training in FMD emergency management and allied disciplines for veterinary staff of the Member States, to a maximum of 50,000 US\$ per annum in 2010 and 2011, making use of the travel budget line and savings in the administrative budget to be achieved in the area of salaries for administrative staff when the position of the EuFMD Clerk is filled	Advertised to CVOs (no response). Advertised to Trainees on the Real-time Training Program (> 5 applicants).

Review of the support to WRL provided by EuFMD and FAO

EuFMD Secretariat




W FMD Week 2010

80ExCom

Review of the support to WRL provided by EuFMD and FAO


EuFMD Secretariat

eofmd
European Commission for the control of foot-and-mouth disease



Background

- WRL – designation by EuFMD in 1957
- Annual contribution since then:
 - Currently: **US\$95,000** (of which EuFMD 75,000) –contribution via a 3 year contract
- Two forms of support: annual contribution (EuFMD - MTF/INT/011/MUL) and Letters of Agreement (LoA) (EC or EuFMD)
- 2010: additional support to proficiency test service (PTS) - Letter of Agreement (99,970 USD - LoA)
- Additional support to specific research or training activities as agreed with ExCom or projects (2009: study for Res Group on Full Genome Sequencing – USD75,686) –via LoA
- Total support in 2010: USD\$270,000



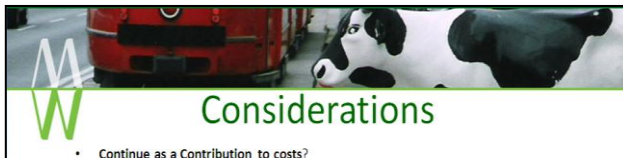
Situation

- 3 year contract – finishes 2010
- Utilizes EuFMD funds – agreed at General Session
- Opportunity now to review arrangements
- Also timely to review FAO contribution (to WRL) on FMD and to future of the annual contribution to the WRL for rinderpest




Annual contribution

- **Supports:**
 - Viral typing
 - May be > 40 samples/country/year
 - Proficiency test service (PTS) - covering inclusion of non EU (EuFMD countries), neighborhood, and FAO Reference and OIE centers (costs ↑↑)
 - EuFMD projects have NOT factored in costs of WRL activities – may exceed annual agreement
 - Ref Lab Network – FAO contribution to ensure annual meeting (pays for FAO lab participation) . But limited – 10k



Considerations

- Continue as a Contribution to costs?
- **Review virus typing services :**
 - threshold – samples/country - over which payment for services?
 - Consider efficiency and alternatives: Regional Service laboratories (RSL) to undertake pre-screening, under the FAO/OIE Lab network
- **PTS:**
 - Review arrangements with EC, FAO and EuFMD support; service is top of international pyramid
 - Role of RSLs to provide PTS services to regional lab networks (WELNET for example) – could reduce burden on WRL.
- **Training:**
 - For regions, best through RSLs - ? WRL provides QC?
- **FAO/OIE Lab Network:**
 - Big potential for increasing viral intelligence gathering and regional support
 - Support arrangements need review
 - Review Governance – OFFLU model? Steering Committee wider than OIE&FAO&WRL?
- **Rinderpest:**
 - Role of WRL-RP in the period of international sequestration of RP viruses
 - Biological archive, diagnostic capacity and potential for vaccine seed supply (emergency)



Possible review process

- Team:
 - FAO consultant (P.Roeder?) –FMD & RP
 - EuFMD - member RG (familiar with OIE/FAO network, value to European NRLs, alternatives)
 - EuFMD Secretary? Or Exec member?
- 2 day visit WRL+ study & writing time
- Consult DEFRA, EC, FAO (OFFLU, Lab networks)
- Period: Nov-Dec
- Draft report circulated for comments, presentation to 81st Exec: Budapest (Budget)

Assessing the threat to Europe from global FMD viral pools: a tool to inform antigen priorities for vaccine bank stores
Summary of Methodology (work in progress)

The risk to the EU posed by each region as the source of an FMD incursion should be proportionate to:

*the volume of imports^a from pool * prevalence of FMD in pool*

(* imports of FMDV- susceptible animals & animal products)

When considering the risk posed by the various regional pools, we focus on illegal imports of animals and animal products because:

- a. there is a higher risk associated with illegal compared to legal imports (EFSA, 2006).
- b. Except for few animal products (such as hides, bones and casings), any legal import leading to an FMD epidemic will come from an recently infected area that is normally FMD-free, and so this is not useful when considering priority of vaccine bank antigens.

However, little or no data are available to represent neither the illegal import volume nor the prevalence of FMD. Conjectured prevalence estimates, based on expert opinion and data from countries considered to have 'representative' levels of FMD, were used to quantify each pool's FMD prevalence (Sumption et al, 2008).

It was assumed that the amount of illegal importation of live animals and animal products from a particular region into Europe is positively associated with: 1) proximity to Europe, 2) weight of legal trade imports and 3) volume of passenger air travel.

Live animal imports (risk due to proximity)

The risk of FMDV introduction associated with live animals from each pool is proportionate to:

*quantity live animal imports from pool * pool FMD prevalence*

The illegal importation of live animals into Europe is likely to occur only from regions proximal to Europe. Therefore, to represent the quantity of illegal imports into Europe, proximity scores were assigned to each viral pool as follows:

- 5= land/sea border (considerable live animal traffic expected)
- 2 = close sea border (some live animal traffic expected)
- 1=distant sea border (little live animal traffic expected)
- 0= very distant sea border (no live animal traffic expected)

FMD prevalence was calculated as the average of the estimated prevalence of countries within each regional pool (Sumption et al, 2008).

Animal products (risk due to legal trade and passenger travel)

The risk of FMDV introduction associated with animal products from each pool is proportionate to:

*quantity imports from pool * pool FMD prevalence*

The quantity of illegal imports is represented by:

- 1) trade volume in 100 kg (2009) of animals and animal product (Eurostat)
- 2) data on air passenger arrivals into EU in 2009 (Eurostat)

The risk posed by the pools due to each of these is calculated by: 1) for each *country*, multiplying i) imports and ii) passenger arrivals by the relative estimated FMD prevalence and 2) summing the results for each country in the viral pool. At this point, results from trade volume and passenger arrivals are reported separately

References

EFSA (2006) “Risk Assessment on Foot and Mouth Disease”. The EFSA Journal 313, 1-34

Sumption et al (2008) “Incidence and Distribution of Foot-and-Mouth Disease in Asia, Africa and South America; Combining Expert Opinion, Official Disease Information and Livestock Populations to Assist Risk Assessment”. Transboundary and Emerging Diseases 55, 5–13.

Priority FMD Vaccine Strains for European Vaccine Banks

Institute for Animal Health, Pirbright, UK, 2 Sept 2010

The **objective** of the meeting was to peer review a proposed methodology for prioritizing the risk posed by the regional FMD pools to Europe, and determine next steps towards its application. This methodology should contribute to the development of recommendations to vaccine banks concerning the storage of antigenic strains.

Key points that emerged were:

1. Because all FMDV strains can cause an epidemic in a naïve population, it was agreed that it made sense to prioritize pools, as opposed to directly prioritizing antigenic strains (due to possible inherent characteristics that could cause the risk, such as higher virulence for example).
2. The methodology presented only addresses risk posed from the viral pools in terms of FMDV introduction into Europe; NOT the risk of actually causing an epidemic (ie it models hazard release, NOT exposure). This could be addressed in future work, and would likely involve consideration of cultural practices (eg: proximity of people to livestock, husbandry practices etc).
3. This model should be used in conjunction with, and not as a replacement for, other information about currently circulating strains and expert knowledge. The final recommendations on antigen strains for vaccine banks could be formulated in 3 steps:
 - i. rank risk posed by regional pools (model assessed in this meeting),
 - ii. vaccine selection module: combining the results of the pool prioritization with information about currently circulating strains, vaccine matching etc
 - iii. an assessment of uncertainty, or the risk posed by 'known unknowns'
4. In the end, the highest risk will be posed by the strains NOT stored in the antigen bank.
5. There are many missing data, and some of the data available are old (much was collected in 2001-2002 as part of the EFSA risk assessment).
6. On the other hand, better data on FMD prevalence may now be available as a result of sero-monitoring studies.

Specific issues to be addressed are prior to adoption of the methodology:

1. Risk associated with live animals versus animal products should be presented separately. This is because they present different risks related to exposure, and also different countries might view the risks differently – for example relating to their border security practices or proximity to FMD endemic countries.
2. More information is needed about the best trade data to use in the model. Results will be compared using different trade data (eg including all trade, trade likely to involve

refrigeration, trade in animals and animal products). The use of price differentials will be considered. An email discussion group will address these issues.

3. Several terms and parameters must be more clearly defined. These include:
 - a. Proximity
 - b. 'score' and 'weight'
4. Research if other data available/useful:
 - a. Ferry crossings
 - b. Incidence data: maybe able to use information from sero-monitoring to improve the conjectured incidence method currently used
 - c. Expert opinion will be systematically used for some parameters (e.g. proximity scores)
5. For each input, uncertainty measures should be included: indicate whether sourced from evidence or expert opinion

Next steps/Actions:

1. Email discussion group(s) will be started (by 13 Sept 2010)
 - a. Which are best data to use to represent illegal trade in 1) animals and 2) animal products?
2. A revised model will be circulated. An 'acceptable' model should be available for February, for review by EuFMD Executive committee (at which time this group may also meet again)
3. Will investigate 'testing' the use of the model by a country (e.g. France)

In attendance:

Name	Affiliation	email
Ana Afonso	EFSA	Ana.AFONSO@efsa.europa.eu
Bernd Haas	Germany	Bernd.Haas@fli.bund.de
Moez Sanaa	France	Moez.SANAA@anses.fr
Clazien de Vos	Netherlands	Clazien.deVos@wur.nl
Marion Wooldridge	UK:	m.wooldridge@vla.defra.gsi.gov.uk
Jeff Hammond	Institute for Animal Health	jef.hammond@bbsrc.ac.uk
Donald King	Institute for Animal Health	donald.king@bbsrc.ac.uk
Nick Knowles	Institute for Animal Health	nick.knowles@bbsrc.ac.uk
Yanmin Li	Institute for Animal Health	yanmin.li@bbsrc.ac.uk
Melissa Mclaws	EuFMD consultant	Melissa.mclaws@fao.org
Keith Sumption	EuFMD secretary	Keith.sumption@fao.org

Attendees from France, Germany, UK and the Netherlands were nominated by the respective governments (CVO's).

IAH Pirbright WRLFMD Report

Jef M. Hammond, Yanmin Li, David J. Paton, Institute for Animal Health, UK

IAH Pirbright WRLFMD Report
EuFMD Executive 27th September 2010



•Jef M. Hammond, Donald P. King, Nick J. Knowles, Jemma Wadsworth, Bob Statham, Yanmin Li, Phil Keel, Jo Stoner, Pip Hamblin, Ginette Wilsden, Geoff H. Hutchings, Katja Ebert, Nigel P. Ferris, Valerie Mioulet, Miki Madi, Faiza Hamid, Elizabeth Wilson and David J. Paton

Institute for Animal Health, Ash Road, Pirbright, Surrey, GU24 0NF,
UNITED KINGDOM



Institute for Animal Health

World Reference Laboratory for FMD- WRLFMD


- 24/7 Diagnostic Service
- Global surveillance
- Strain identification
- Reports
- Test development
- Training
- Advice



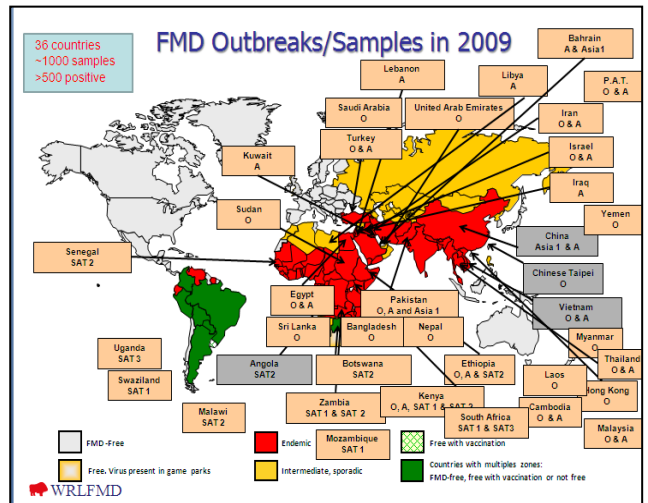

Institute for Animal Health

2009

- ~1000 samples
- ~500 positive (523 in period 2006-2008)
- ~483 sequences (330 in 2008)
- Predominantly O and A serotype
 - A-Iran-05 lineage 30%
 - O-PanAsia 2 44%




Institute for Animal Health



2010

- ~1000 samples upto August from 20 Countries
- ~600 positive
- ~350 sequences
- Predominantly O and A serotype
 - A-Iran-05 lineage
 - O-PanAsia 2



Institute for Animal Health

January-March 2010

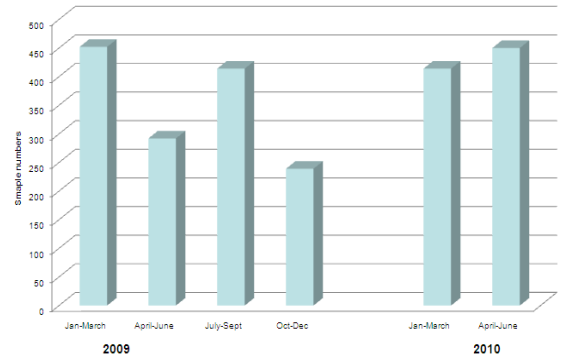
Country	No. of samples	Virus isolation in cell culture/ELISA							RT-PCR for FMD (or SVD)		
		FMD virus serotypes							SVD virus		
		O	A	C	SAT 1	SAT 2	SAT 3	Asia 1	NVD	Positive (where appropriate)	Negative
ERITREA	80	-	7	-	-	-	-	-	82	36	53
ETHIOPIA	32	5	-	-	13	-	-	-	14	27	5
HONG KONG	23	16	-	-	-	-	-	-	7	22	1
IRAN	44	35	3	-	-	-	-	-	6	41	3
LAOS	4	3	1	-	-	-	-	-	-	4	-
MYANMAR	4	4	-	-	-	-	-	-	-	4	-
NIGERIA	50	2	3	-	-	-	-	-	45	17	33
SENEGAL	29	-	-	-	1	-	-	-	28	5	24
TANZANIA	82	3	8	-	1	-	-	-	70	39	43
THAILAND	21	13	7	-	-	-	-	-	1	21	-
TURKEY	20	6	12	-	-	-	-	-	2	20	-
VIETNAM	16	1	15	-	-	-	-	-	-	16	-
TOTAL	414	88	56	-	15	-	-	-	255	252	162

April-June 2010

Country	No. of samples	Virus isolation in cell culture/ELISA FMD virus serotypes						RT-PCR for FMD (or SVD) virus (where appropriate)			
		O	A	C	SAT1	SAT2	SAT3	Asia 1	NVD	NT	
AFGHANISTAN**	95	-	-	-	-	-	-	-	95	85	10
ECUADOR	9	-	-	-	-	-	-	-	-	9	-
IRAN	142	96	8	-	-	-	-	38	-	123	19
KENYA	139	3	-	-	55	1	-	71	9	79	51
MYANMAR	5	5	-	-	-	-	-	-	-	5	-
PAKISTAN	24	18	4	-	-	-	-	2	-	24	-
QATAR	17	-	-	-	-	-	-	17	-	-	17
SOUTH KOREA	4	1	1	-	-	-	-	2	-	4	-
TURKEY***	8	-	-	-	-	-	-	-	8	-	8
UNITED ARAB EMIRATES	7	4	-	-	-	-	-	3	-	4	3
TOTAL	450	136	13	-	55	1	-	133	112	333	100

** all samples from Afghanistan were supplied in RNA later for PCR analysis
 *** 8 type O samples from Turkey were submitted for full length genome sequencing

Samples to WRLFMD 2009-2010



FMD Reports in 2010

ASIA

P.R. China:
 FMDV O was detected in pigs in a number of provinces.
 2 outbreaks of FMDV A occurred in January

Taiwan, POC:
 FMDV O occurred in pigs on Penghu Island.

Hong Kong SAR:
 FMDV O was isolated from pigs. These viruses belonged to the SEA toptype (Mya-98 lineage) which is currently widely circulating in Southeast Asia.



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FMD Reports in 2010

Republic of Korea:

FMDV type A (ASIA toptype) 14 outbreaks occurred in cattle and farmed deer in the Kyonggi-Do region between January and April.
 FMDV type O These viruses belonged to the SEA toptype (Mya-98 lineage)

Bhutan:

The O-Ind-2001 lineage (ME-SA toptype) was detected in Bhutan. This lineage was also recently found in Bangladesh and Nepal.

Afghanistan, Iran & Turkey:

The O-PanAsia-2 and A-Iran-05 lineages continue to dominate in these countries.



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FMD Reports in 2010

Japan: In early April 2010, FMDV type O was reported in Miyazaki Prefecture on the island of Kyūshū. 291 outbreaks have been reported. The virus was identified as Southeast Asia (SEA) toptype (Mya-98 lineage) and found to be closely related to viruses occurring recently in the P.R. China, Hong Kong SAR, Republic of Korea, Myanmar and Thailand. This is the first outbreak of FMD in Japan since 2000. It appears that although disease was first identified on 9th April, FMD was not confirmed by laboratory testing until 20th April.

Mongolia: Outbreaks of FMD type O were reported in cattle. A VP1 sequence submitted to the WRLFMD from ARRIAH showed it to belong to the SEA toptype, Mya-98 lineage; Importantly, it appears to be a different introduction to outbreaks in the P.R. China, Hong Kong SAR, Republic of Korea and Japan, as it is most closely related to viruses from Thailand and Malaysia from 2009.



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FMD Reports in 2010

AFRICA

Eritrea: A

Ethiopia: O and SAT 2

Senegal: FMDV SAT 2

Kenya: O, SAT 1 and SAT 2

Nigeria: O and A

Tanzania: O, A and SAT 2.

Zimbabwe: SAT 2



Institute for Animal Health

FMD situation in Turkey

A. Naci Bulut, Head of Diagnosis Department Sap Institute, Ankara, Turkey

FMD SITUATION IN TURKEY

A. Naci BULUT
Head of Diagnosis Department
Sap Institute, Ankara, Turkey

Behalf of;
Assoc. Prof. Muzaffer Aydemir
General Director
General Directorate of Control and Protection, GDGP
Ankara, Turkey

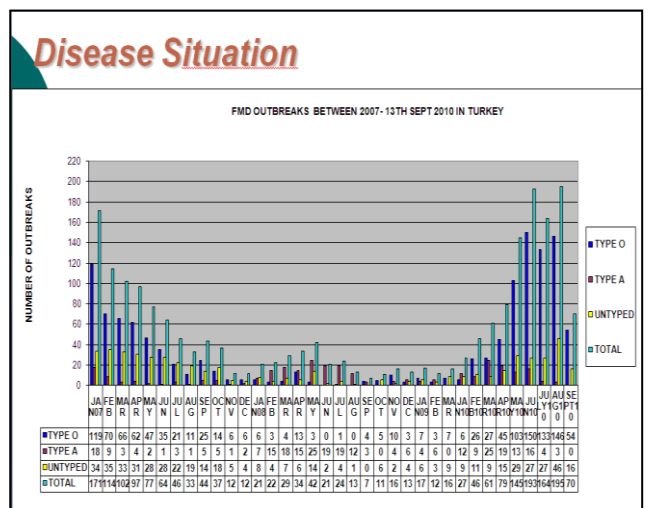
Outlook

- Progress disease situation
- Molecular Epidemiological Analysis results
- Vaccine sufficiency
- Control Policy
- Vaccination coverage
- Serosurveillance results

Introduction

- Anatolia region of Turkey has been endemic with FMD (Type O and A)
- FMD field strains in Turkey
 - A Iran 2005
 - Endemic in Anatolia since November 2005
 - New variant of type O PanAsia
 - Endemic in Anatolia since October 2006
- Asia 1
 - No case since 2002

FMD IS FREE WITH VACCINATION IN THRACE REGION

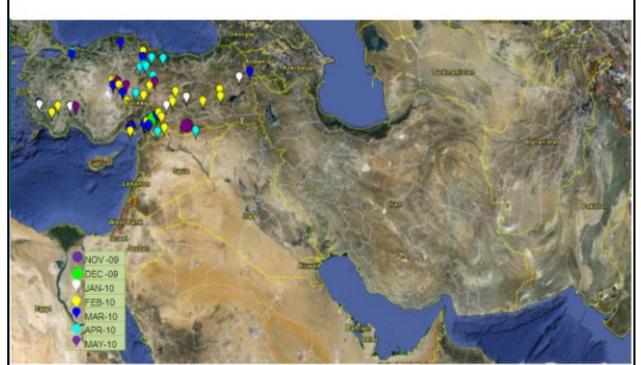


Genetic Diversities

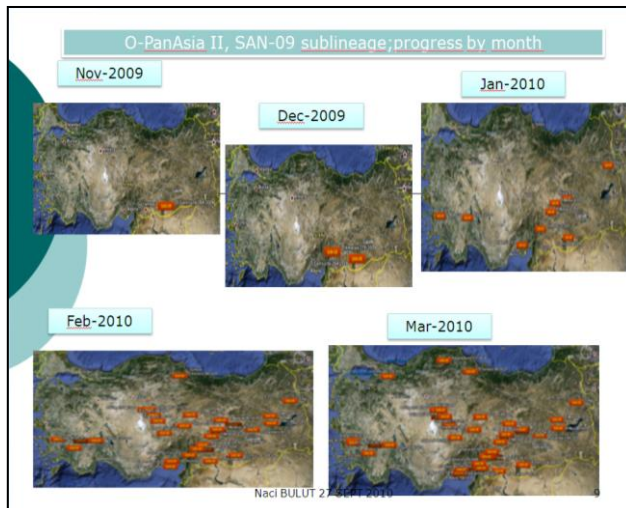
- **Type O :**
 - New O Pan-Asia sub-strain (Group IIA)
 - Detected 4 sublineages in Turkey in 2010 (Observed 4-6% difference):
 - O SAN-09,
 - O TER-08,
 - O FAR-09 (exotic),
 - O ANT-10 (exotic).
- **Type A05 Iran :**
 - With 6-7% differences, genetic lineage take places due to the type A in 2010:
 - A ARD/ERC-09,
 - A ARD/NEV-09,
 - A AFG-07 (exotic)

Naci BULUT 12 July 2010

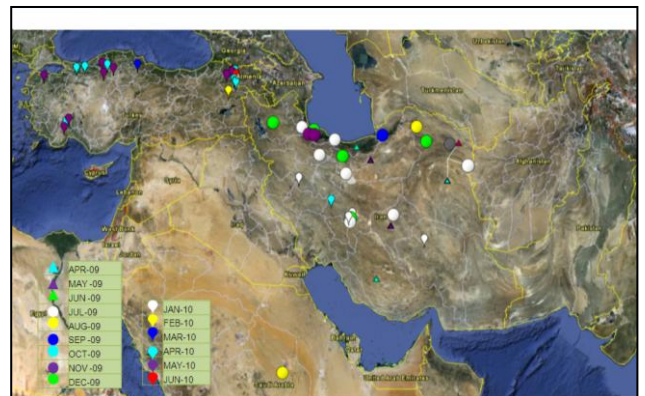
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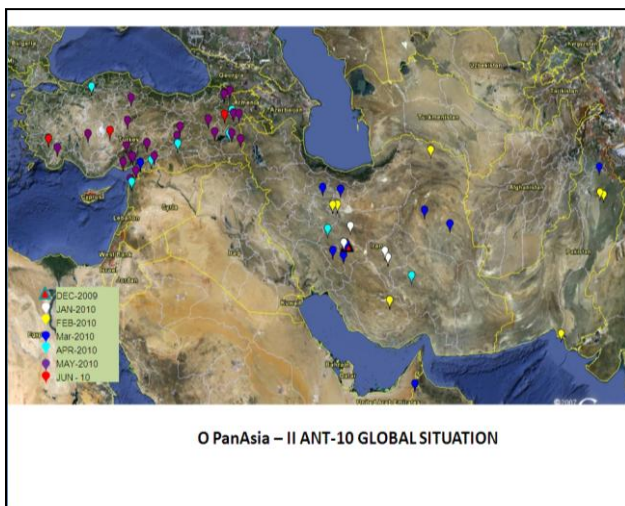
O PanAsia – II SAN-09 CURRENT SITUATION



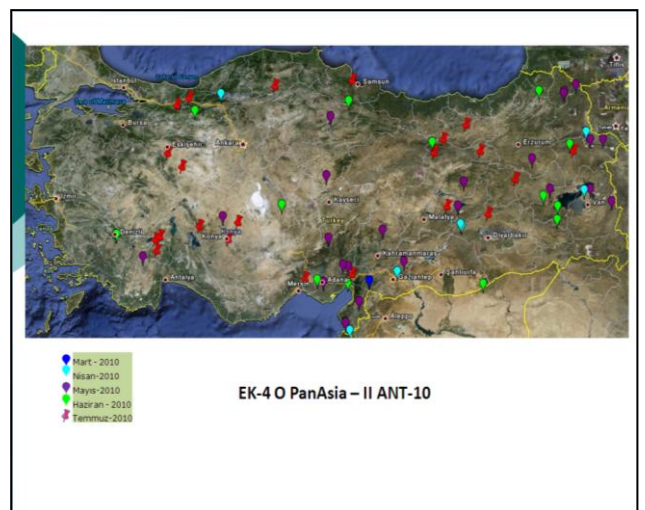
Naci BULUT 27 April 2010



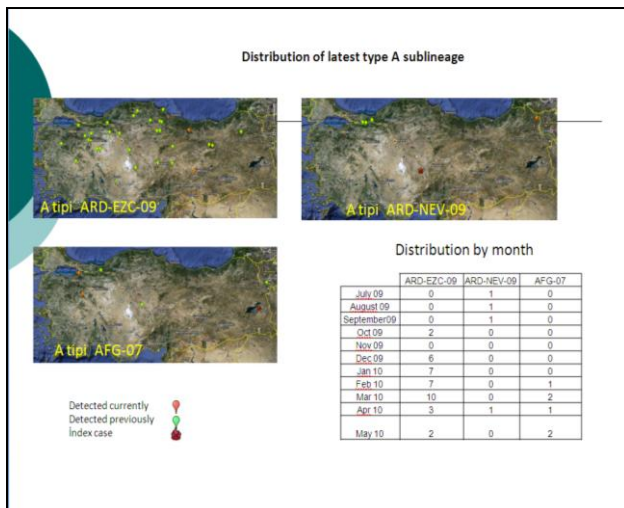
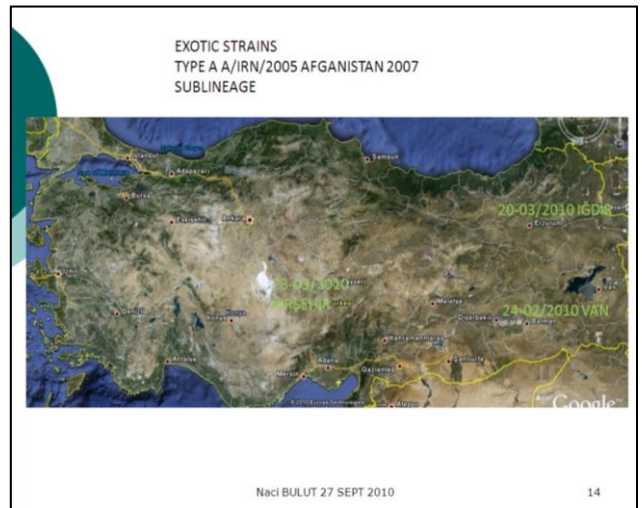
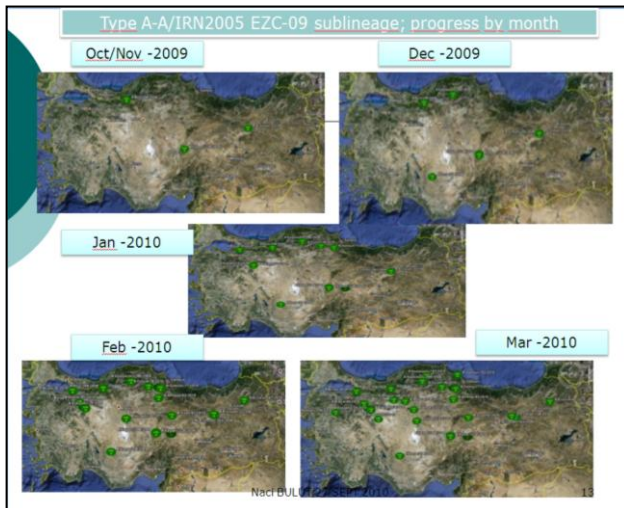
O PanAsia – II FAR-09 GLOBAL SITUATION



O PanAsia – II ANT-10 GLOBAL SITUATION



EK-4 O PanAsia – II ANT-10



Importance of early detection of entrance new exotic viruses!

- Risk for entrance exotic virus is very high any time, depend on occurrence animal movement.
- It is not possible to estimate as possible earlier, unless sample sent to WRL in time or carried out the molecular analysis in place.
- To eliminate this high risk in current situation, it needs to implement proper and sufficient control measures in order to stop the virus circulation in first detected place.

Vaccine Sufficiency

- Type A05 Iran:
 - Vaccine strain: A Tur 2006 replaced with A22 Iraq on July 2008; seems there is good sufficiency
- Type O:
 - Vaccine strain: O1 Manisa covers current field isolates antigenically; although it was detected low r value from some isolates and complaining some vaccine failure in some area of the West Eurasia.

However, it was decided changing the current strain with a homolog of circulated field virus.

To overcome:

- Stability problem regarding to O1 Manisa vacc.strain (report in Cloosed Session, 2007)
- Achievement more suitable protection

Naci BULUT 27 SEPT 2010 17

RISK ASSESSMENT

- the new virus incursion /vaccine failure case in the some country in the west Eurasia region
- Hard and long winter condition
- current socio-economic structure and animal husbandry system in the eastern region
- Animal movement and trade pattern
- Poor disease awareness and notification in the east and southeast Anatolia regions
- The trade pattern resulting in animal movement is the main element for the dynamics of disease spread

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CURRENT CONTROL POLICY

An Europaid project, TR0603.02, has been implemented in Turkey in order to control of FMD.

OBJECTIVES

- to get under control endemic disease situation in order to stop spread of virus and
 - to be ready to implement individual case study which each new outbreak can be investigated and potential source identified.
- The project will be finished on November 2010.
 - It has been agreed to put into action a new phase of the project starting to next year

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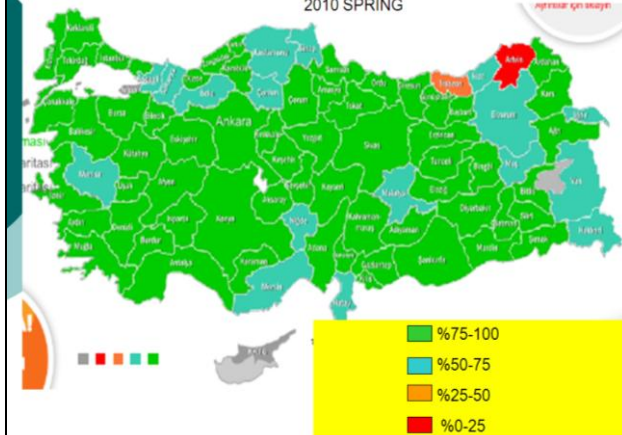
CURRENT CONTROL POLICY

- Mass vaccination,**
- Control of animal movements,**
- Epidemiological Investigation; active and passive surveillance, outbreak investigation and follow-up,**
- **-Routine control measures in case of outbreak; quarantine, disinfection, ring vaccination and diagnosis**
- **Vaccination Policy:**
- Mass vaccination policy is the main element of the control program against FMD.
- Objective of the vaccination is reach to 100% coverage of whole ruminant population. However, because of shortage of the vaccine supply, small ruminants were vaccinated partially (60% of the population)
- **Vaccination strategy**
 - *Large Ruminant:*
 - Application of routine mass vaccination **twice a year** all large ruminants
 - *Small Ruminant:*
 - Application of routine mass vaccination **once a year** all small ruminants
-

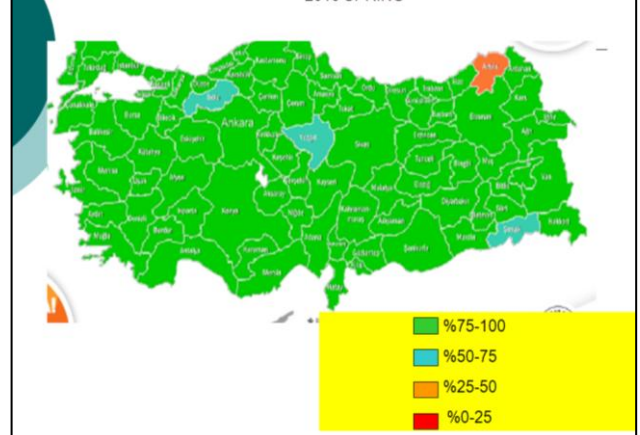
Naci BULUT 27 SEPT 2010

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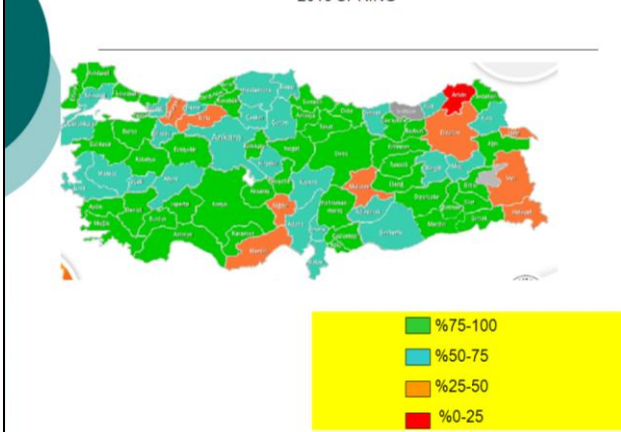
VACCINATION COVERAGE OF TURKEY (GENERAL DISTRIBUTION-LR/SR)
2010 SPRING



VACCINATION COVERAGE OF TURKEY (LARGE RUMINANTS)
2010 SPRING



VACCINATION COVERAGE OF TURKEY (SMALL RUMINANTS)
2010 SPRING



2010 Anatolian Serosurveillance Results

Design of serosurveillance:

- A two stage sampling strategy was used
 - Primary sampling unit: Village
 - Secondary sampling unit: Animal within the village
- Expected prevalence was based on 2009 results
- According to village number of each region, it was estimated number of village to be sampled within the each province
- Taking 10% minimum expected prevalence with 95% level of confidence and considering ELISA test performance, it was estimated number of sample for LR and SR
- Age was clustered between 04-24 and 04-18 month for LR and SR respectively
- It was planned collecting 67725 sera in total (33325 for LR/31 from per village and 33400/32 from per village)

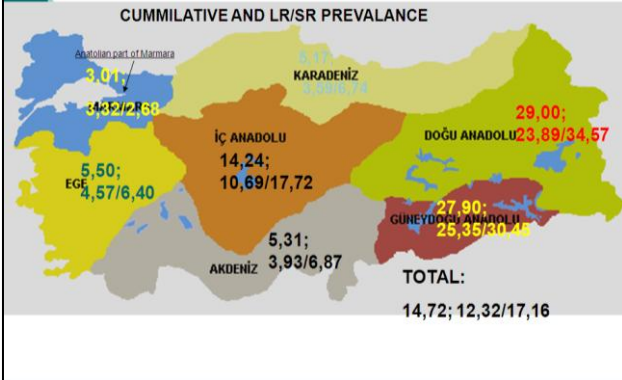
Naci BULUT 27 SEPT 2010

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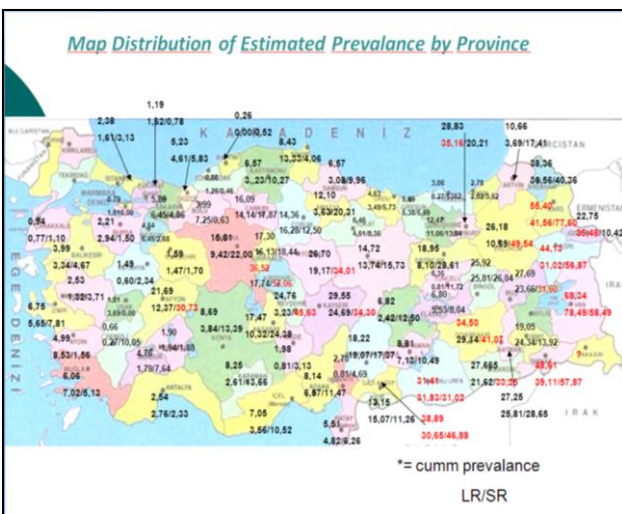
ESTIMATED PREVALANCE BY REGION

2010, SPRING ANATOLIAN SEROSURVEILLANCE

CUMMILATIVE AND LR/SR PREVALANCE



Map Distribution of Estimated Prevalance by Province



Distribution of Estimated Prevalance by Age

distribution of prevalence by age for general ,LR/SR

AGE GROUP	NEG	POS	TOTAL	%	
12-18		39122	3596	22718	15,83
18-24		5074	1036	6110	16,96
4-12		29035	4465	33500	13,33
TOTAL		54046	9332	63378	14,72

FOR LR					for SR				
AGE GROUP	NEG	POS	TOTAL	%	AGE GROUP	NEG	POS	TOTAL	%
12-18	7392	847	8239	10,28	12-18	11730	274	14479	18,99
18-24	3810	635	4445	14,29	18-24	1264	461	1665	24,08
4-12	16616	243	19048	12,77	4-12	12415	293	14452	14,07
TOTAL	28059	395	32009	12,34	TOTAL	25987	538	31369	17,16

First Training on Laboratory Diagnosis of FMD, 12-23 July 2010, Turkey

A. Naci Bulut, Head of Diagnosis Department Sap Institute, Ankara, Turkey

FMD SITUATION IN TURKEY

WEST EURASIA FMD LAB NETWORK-WELNET FMD
1st TRAINING ON LABORATORY DIAGNOSIS OF FMD
12-23 July 2010

A. Naci BULUT
Head of Diagnosis Department
Sap Institute, Ankara, Turkey




Introduction

- Anatolia region of Turkey has been endemic with FMD (Type O and A)
- FMD field strains in Turkey
 - A Iran 2005
 - Endemic in Anatolia since November 2005
 - New variant of type O PanAsia
 - Endemic in Anatolia since October 2006
- Asia 1
 - No case since 2002

FMD IS FREE WITH VACCINATION IN THRACE REGION

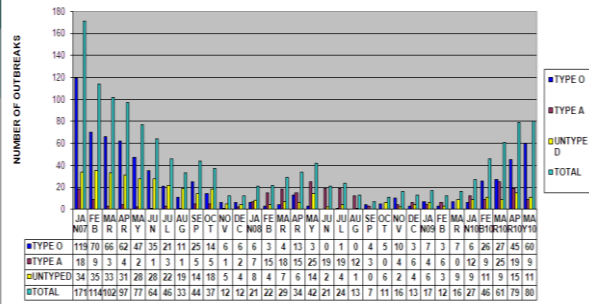


DISEASE FREEDOM IN THRACE

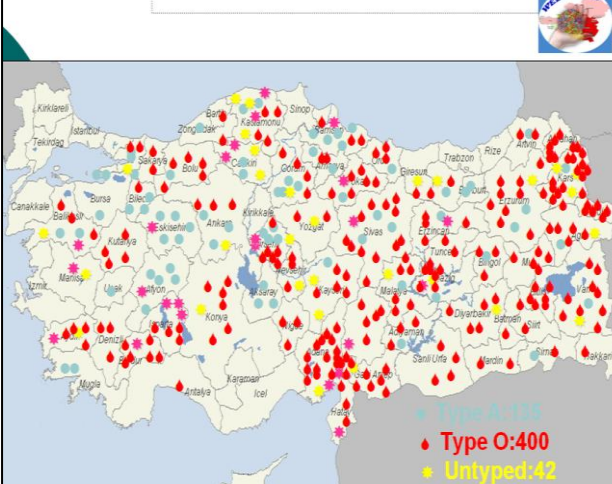
- Occurred sporadic disease since September 2010
- Afterward this date, not occurred disease clinically
- To substantiate no virus circulation, it has been carried out serosurveillance and active survey during the 2008/2009 according to OIE standards
- Prepared a dossier to apply OIE for gaining free status of FMD with vaccination on November 2009
- Application was approved on May 2010 by OIE definition of free status with vaccination

Disease Situation

FMD OUTBREAKS BETWEEN 07-MAY 2010 IN TURKEY




Month	Type O	Type A	Untyped	Total
JA	119	70	66	255
FE	18	9	3	30
MA	3	4	2	9
AP	2	1	3	6
MA	1	3	1	5
JU	5	1	2	8
JU	1	2	7	10
SE	1	15	18	34
OC	1	15	15	31
NO	6	6	6	18
DE	6	3	4	13
JA	3	0	1	4
FE	4	5	10	19
MA	3	7	3	13
AP	7	6	6	19
MA	4	6	4	14
JU	6	6	0	12
JU	2	9	25	36
SE	6	26	27	59
OC	3	7	6	16
NO	3	7	6	16
DE	4	6	3	13
JA	6	3	9	18
FE	9	9	11	29
MA	9	11	9	29
AP	26	27	45	98
MA	60	61	79	200

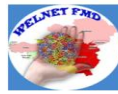


Outbreaks increase! Why?

- Although a good vaccination coverage achieved, because of lack of boost vaccination for primovaccinated animals; virus circulation can be maintained within such a young population
- Increasing animal movement originated from outside of the country
- Increasing incursion of lots of pathogenic exotic viruses
- Insufficient epidemiological investigation on early detection
- Insufficient quarantine and biosecurity measures
- Fade away PI antibody from two major endemics (2006 Type A and 2006 type O) in the population



Genetic and antigenic diversities



- Type O :
 - Vaccine strain: O1 Manisa. Strain covers current field isolates antigenically ; although it was detected low r value from some isolates
 - Genetic :new O Pan-Asia sub-strain (Group IIA)
 - Observed 4% difference genetically within the fours
 - O SAN-09, O FAR-09 (exotic), O ANT-10 (exotic)
- Type A05 Iran :
 - Vaccine strain: A Tur 2006 replaced with A22 Iraq on July 2008
 - Genetic lineage take places several groups -with 6-7% differences;
 - A ARD/ERC-09, A ARD/NEV-09, A AFG-07 (exotic)

Next slide 17-18 July 2010

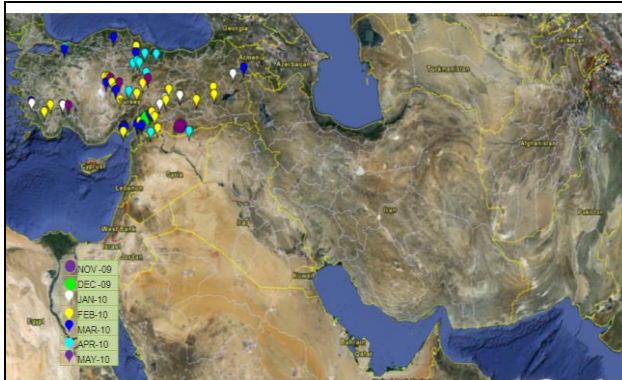
Monitoring disease spread by Molecular Epidemiological methods



Molecular epidemiology:

- Provides detection on genetic drift of FMDV in time,
- Provides the important information on dynamic of disease spread,
- Provides information on determination of new vaccine strain.

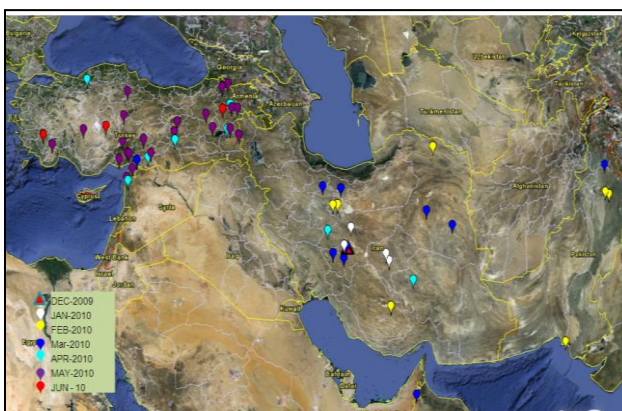
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O PanAsia – II SAN-09 CURRENT SITUATION

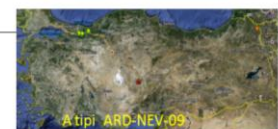


O PanAsia – II FAR-09 GLOBAL SITUATION



O PanAsia – II ANT-10 GLOBAL SITUATION

Distribution of latest type A sublineage



Detected currently
Detected previously
Index case

Distribution by month

	ARD-EZC-09	ARD-NEV-09	AFG-07
July 09	0	1	0
August 09	0	1	0
September 09	0	1	0
Oct 09	2	0	0
Nov 09	0	0	0
Dec 09	6	0	0
Jan 10	7	0	0
Feb 10	7	0	1
Mar 10	19	0	2
Apr 10	3	1	1
May 10	2	0	2

Importance of early detection of entrance new exotic viruses!

Detected first time by Sap Institute on 19th March 2010
ISLAHIYE, ANTEP

Detected by pirbright on June 2010 lately

Index case found as November 2009

- Risk for entrance exotic virus is very high everytime, depend on occurrence animal movement.
- It is not possible to estimate as possible earlier, unless it is sent sample to WRL in time or carried out the molecular analysis in place.
- To eliminate this high risk in current situation, it needs to implement proper and sufficient control measures in order to stop the virus circulation in first detected place.

O-PanAsia II, SAN-09 sublineage; progress by month

Nov-2009

Dec-2009

Jan-2010

Feb-2010

Mar-2010

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O FAR-09 STRAIN ENDEMIC IN IRAN

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EXOTIC STRAIN O TYPE ANTEP STRAIN 19/03/2010 (ANT10) IRAN ORIGINE

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Type A-A/IRN2005 EZC-09 sublineage; progress by month

Oct/Nov -2009

Dec -2009

Jan -2010

Feb -2010

Mar -2010

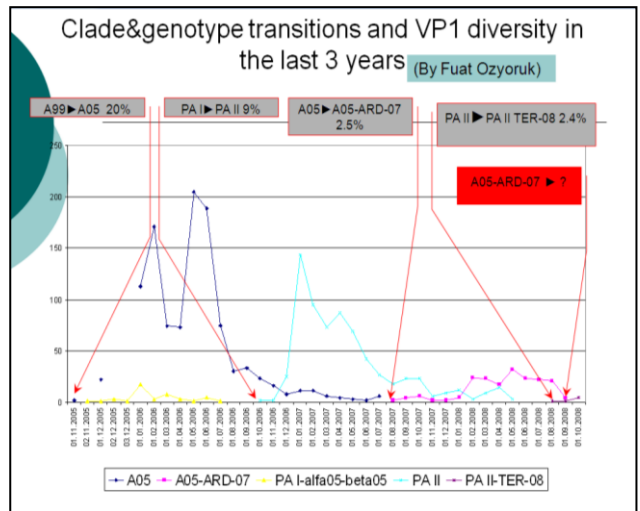
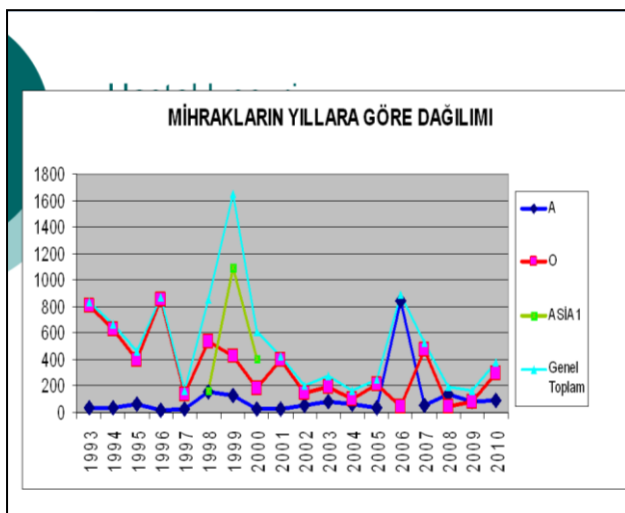
EXOTIC STRAINS TYPE A A/IRN/2005 AFGANISTAN 2007 SUBLINEAGE

HASTALIĞIN DURUMU CURRENT DISEASE SITUATION BY TYPING DATA ANALYSIS

PROVINCE	NO OF OUTBREAKS	SUSPECTED POP. SIZE		AFFECTED POP. SIZE / INCIDENCE%		MORTALITY RATE %00	VACC. COVERAGE (AVERAGE: LR=69,4 SR=49,2)		
		LR	SR	LR	SR		LR	LR	SR
ADANA	22	8366	4624	275/3,2	3/00,6	-	5844/69,8	2460/53	
AFYON	22	6205	-	1963/31,6	-	54/8,7	5582/89,9	-	
AKSARAY	4	3657	-	18/0,5	-	-	2235/61	-	
ARDAHAN	10	15723	11650	399/2,5	-	-	15248/97	11650/100	
AYDIN	6	8840	650	109/1,2	-	2/0,02	6183/70	470/72	
B.KESİR	6	8021	5475	32/0,4	-	3/3,6	4429/55,2	77/1,4	
ÇANKIRI	9	3343	500	118/3,5	-	-	2468/73,7	-	
ÇORUM	18	1281	112	165/12,9	2/1,8	8/6,2	1250/97	-	
DENİZLİ	13	1679	730	16/0,9	25/3,4	1/0,6	1394/83	530/72	
D.BAKIR	6	1921	1120	36/1,8	-	1/0,05	1245/64	847/75	
İĞDIR	9	4043	8270	235/5,8	291/3,5	8/0,2	812/20	850/10	
ERZURUM	19	10175	4420	1404/13,7	70/15,8	4/0,04	6564/61	1126/25	
K.MARAŞ	16	4820	7556	71/1,4	32/4,2	-	2330/48	1075/14	

CURRENT DISEASE SITUATION BY TYPING DATA ANALYSIS(2)

PROVINCE	NO OF OUTBREAKS	SUSPECTED POP. SIZE		AFFECTED POP. SIZE / INCIDENCE%		MORTALITY RATE %00	VACC. COVERAGE (AVERAGE: LR=69,4 SR=49,2)		
		LR	SR	LR	SR		LR	LR	SR
KARS	34	43388	25878	1838/4,2	64/00,2	58/1,3	26991/62	6900/26	
KIRŞEHİR	16	13081	2730	1011/7,7	15/0,5	35/2,6	10584/81	745/27	
KÜTAHYA	8	2821	350	83/2,9	-	-	1788/63,4	-	
NEVŞEHİR	5	2639	1100	19/0,7	-	1/0,3	1683/63,8	1000/91	
SAKARYA	3	45	-	16/35,5	-	-	6/13,3	-	
OSMANIYE	22	631	1083	45/7	50/4,6	-	113/17,9	518/47	
VAN	20	4515	22445	167/3,6	827/3,6	6/1,3	1947/43	16463/73	
SIVAS	16	3203	1616	144/4,5	50/3,1	4/1,2	2970/92,7	416/25	
TOKAT	16	2286	2258	288/12,5	88/3,9	26/11,3	1352/59	770/34	
BİNGÖL	4	36	-	14/38,8	-	-	15/41	-	
MUŞ	16	3497	950	100/2,8	7/2	30/3,1	1959/56	720/75	



RISK ASSESSMENT

- the new virus incursion /vaccine failure case in the some country in the west Eurasia region
- Hard and long winter condition
- current socio-economic structure and animal husbandry system in the eastern region
- Animal movement and trade pattern
- Poor disease awareness and notification in the east and southeast Anatolia regions
- The trade pattern resulting in animal movement is the main element for the dynamics of disease spread

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RISK ASSESSMENT

Risk of the new virus incursion

- New virus incursion is still a high risk for Turkey, particularly from virus pool 3 region.
- Since high rate incidence and uncertainty on the diversity of the type O and A viruses have been still existing in the far east region and being probability exposures of those sources by dynamic animal movement pattern from the area, it considered that the risk is high

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RISK ASSESSMENT



- **Animal husbandry system**


HUSBANDRY SYSTEM IS MAINLY FAMILY TYPE; MEAN POPULATION SIZE (WITHIN THE PREMISES): 7

- THIS SYSTEM HAS NEGATIVE EFFECT ON VETERINARY SERVICE AND CONTROL OF THE INFECTIOUS DISEASE
- West of the country has farmer organization and mainly well productive dairy premises
- Fattening premises generally are located in Inner Anatolia
- East and South East Anatolia uses extensive husbandry with domestic cattle with low productive;
- Grazing their animal in a short period and sell to fattening premises located inner Anatolia.
- GRAZZING AND YAYLA(HIGH LAND) SYSTEM HAS HIGH RISK FOR SPREAD OF THE VIRUS


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RISK ASSESSMENT

ANIMAL MOVEMENT SITUATION



Movement pattern within the country




Incursions of FMDV to western Europe and neighborhood from East

Type O, Type A, Type A/Asia

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RISK ASSESSMENT



- **Lack of the disease awarness**
- **Poor notification in East and South East Regions**
- **Poor disease awareness in the same regions**

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CURRENT CONTROL POLICY

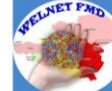


OBJECTIVES

- to get under control endemic disease situation in order to stop spread of virus and
- to be ready to implement individual case study which each new outbreak can be investigated and potential source identified.

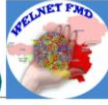
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ELEMENTS OF CONTROL MEASURES



1. Surveillance for borderline:
2. Active and passive surveillance
3. Diagnosis activities and research:
 - AT FMD (Sap) Institute, National Reference Laboratory. ;
 - Diagnosis :
 - Typing: by Multiplex PCR, Aq detection ELISA/cell culture isolation;
 - Antibody detection: by LPBE and SPCE and VNT
 - Molecular (genetic) analysis: PCR and Nucleotit sequencing
 - Antigenic characterization for vaccine matching: r value ELISA/VNT
 - Epidemiological investigation for support identification of disease pattern
 - 4. Serosurveillance activities:
 - Two main serosurveillance have been implemented:
 - **Thrace Serosurveillance**
 - Objective: To gain free state of FMD in the region, it has been conducted a three years serosurveillance program (2008-2010). Afterward it will be carried out for substation of freedom.
 - **Anatolia Serosurveillance**
 - Objectives: To provide an estimate of the proportion of seropositivity to non-structural FMD proteins in cattle/SR Anatolia and to assess vaccine efficacy in selected provinces by measuring antibody levels to structural FMD proteins at day 30 post-vaccination in cattle

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ELEMENTS OF CONTROL MEASURES(2)

5. Vaccination:

Mass vaccination policy is the main element of the control program against FMD, by framework of the European Aid Project (to be described in further chapter) in three years periods, 2008-2010.

- Objective of the vaccination is reach to 100% coverage of whole ruminant population. However, because of shortage of the vaccine supply, small ruminants were vaccinated partially
- **Vaccination strategy**
 - Large Ruminant:
 - Application of routine mass vaccination **twice a year** all large ruminants
 - Small Ruminant:
 - Application of routine mass vaccination **once a year** all small ruminants
 -



ELEMENTS OF CONTROL MEASURES(3)

6. Control of Animal Movements

7. Outbreak Investigation and case study:

- restriction of animal and animal products movements to stop the virus circulation;
- quarantine
- ring vaccination
- sampling for type identification and molecular and antigenic characterization
- data collection and reporting

Notification of the disease:

- It is compulsory by:
 - owner of farm
 - Head of the village; muhtar
 - State veterinarian
 - Private veterinarian

Status of Country FMD Control Project Agreements

Funded through FAO/EC Agreement on the support to EuFMD

Project Document	Country	Type of contractual agreement with beneficiary	Status	Implementation
TransCaucasus FMD control				
	Georgia	Memorandum of Understanding (MOU)	Geo response - request minor changes to project document background statements	Started: Planned vaccine delivery Autumn
	Armenia	MOU	Signed	Started: Planned vaccine delivery Autumn
	Azerbaijan	MOU	Awaiting Gov signature	Started: Planned vaccine delivery Autumn
Iran Phase III	Iran	MOU	Signed Sept 21st	Inception mission/workshops November 6th
Egypt - surveillance	Egypt	FAO – Emergency project signed with GoE	Awaiting FAO DG memo (transmission to Government). Implementation expected 15 th October.	October 15 th , mission K. van Maanen

EuFMD Secretariat

Summary of Upcoming meetings/missions

These meetings each involve Secretariat actions to arrange travel of staff, consultants or country experts, except where marked* indicating purely technical input.

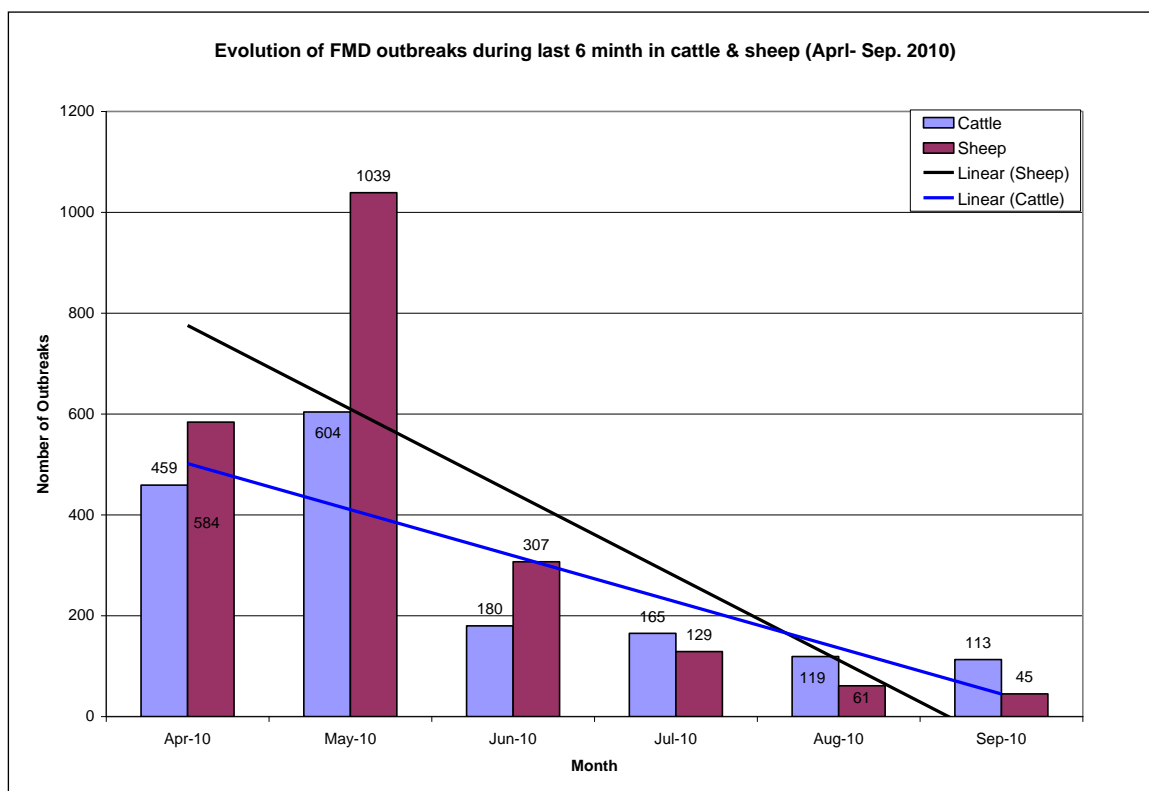
Event	Organiser	Where	When
PCP consultative group	FAO	Pirbright	4-6 October
OIE/FAO Reference lab meetings	WRL	Pirbright	4-6 October
EUFMD Egypt PROJECT (Osro)	EUFMD project	Cairo	15/22 Oct
ETC9	EuFMD Training	Erzurum	18-22 Oct
Lab Training	EUFMD project	Izslar (Brescia)	2-12 Nov
Workshop	EUFMD project	Iran	7-19 Nov
Roadmap2 (welnet plus roadmap)	EuFMD >FS	Istanbul	6-9 Dec
IAEA (Research Coordinated Meeting (RCM) of the FMD Coordinated Research Project (CRP))	FAO/IAEA	Rome	10-14 Jan*
African FMD Roadmaps – Nairobi II	FAO/OIE/AU	Nairobi	January (to be confirmed)*
81 st Executive	EuFMD	Budapest	2 nd Feb
Economic Impact symposium	EuFMD	Budapest	2-3 Feb
Balkan Forum	FAO/...	Budapest	3-4th
IMED		Vienna	4-7 Feb2011*
Mission to Egypt (Osro)	EUFMD project	Cairo	
GFRA		Buenos Aires	March/April*
39 th General Session	EUFMD	Rome	27-29 April

Summary of FMD situation in Iran - past 6 months

Report Date: 24th September 2010

Prepared by: IVO Epidemiology Unit

Six month evolution of FMD cases:

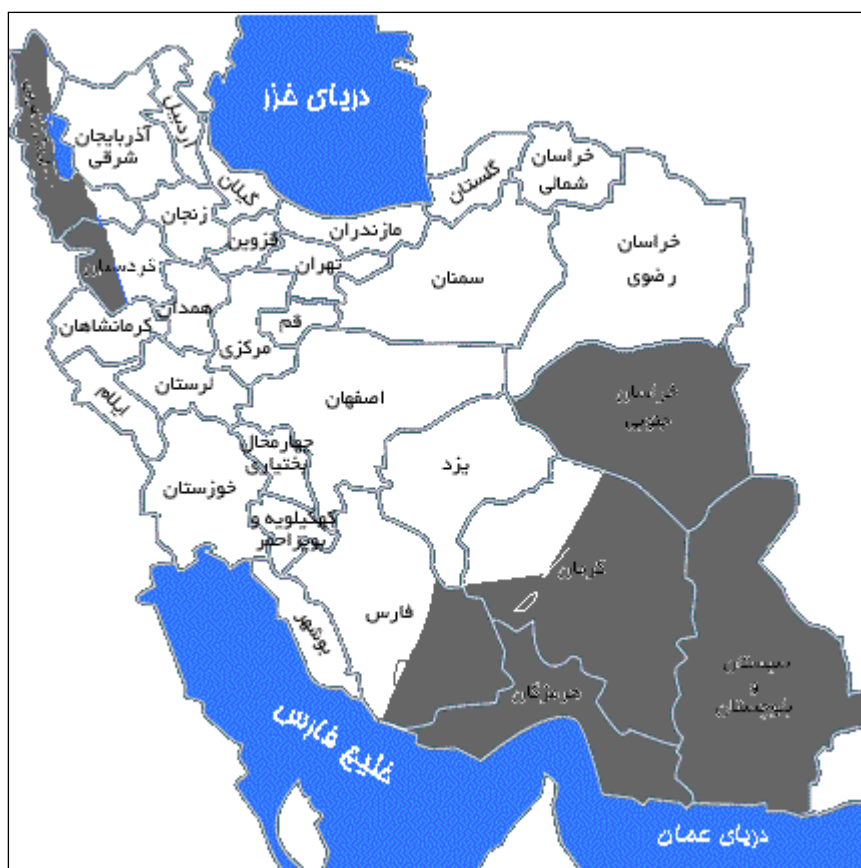


Vaccination program in past 6 months

The number of outbreaks started to decrease after the main vaccination campaign in May 2010 when 4.5 million cattle and 20 million sheep & goat were vaccinated (With Razi Monovalent local O vaccine, . Razi Tetraivalent vaccine and Merial tetraivalent vaccine).

Planned use of Monovalent O BFS vaccine provided as Emergency response:

As the EU delivered O BFS Monovalent vaccine (through Merial) to Iran after the peak of the outbreaks, it was decided to use it during the next phase of vaccination programme (in August/Sept. 2010) in the western and eastern border provinces, as show below:



	Province	Doses of vaccine
Western border	West Azerbaijan	500000
	Kordestan	120000
Eastern border/ central Provinces	Sistan va baluchistan	300000
	South khorasan	300000
	Hormozgan	250000
	Kerman	150000
	Jiroft	100000
	Southern part of Fars	350000
	Animal market in Qom	50000
Total (EU bank vaccine)		2070000

Results of serotyping

During the last 6 months, > 600 epithelial samples have been delivered to diagnostic laboratories (WRL, RAZI & CVL). The CVL & RAZI results (for 597 samples) are shown as follows.

1) CVL (NRL of Iran for FMD)

Province	FMD Samples Resultes April - Sep. 2010 in CVL				
	A	Bad	Neg	O	Total
EAST AZERBAIJAN	1		13	10	24
WEST AZERBAIJAN	1	3	13	7	24
ARDEBIL			10	3	13
ESFAHAN	1	1	10	14	26
ILAM		1		1	2
TEHRAN			4	7	11
CHAHARMAHAL		1	11	2	14
KHORASAN SOUTH			4	3	7
KHORASAN RAZAVI (Central)		9	6	12	27
KHORASAN NORTH	2	4	14	1	21
KHOUZESTAN			3		3
ZANJAN		1	12	9	22
SEMNAN			2	1	3
SISTAN BALOUSHISTAN	1			4	5
FARS		5	18	19	42
QAZVIN		3	12	9	24
QOM			5	5	10
KORDESTAN		1	16	8	25
KERMAN		3	6	2	11
KERMANSHAH		5	1	10	16
KOHKILOUYEH			1		1
GOLESTAN			2		2
LORESTAN		1	6	6	13
MAZANDARAN		3	3		6
MARKAZY		17	40	54	111
HAMEDAN		4	8		12
HORMOZGAN		1	3		4
YAZD			1	2	3
	6	63	223	189	482

2) Razi Institute (FMD vaccine producer)

Province	FMD Samples Resultes April - Sep. 2010 in Razi Institute			
	Bad	Neg	O	Total
EAST AZERBAIJAN			1	1
WEST AZERBAIJAN		3	1	4
ARDEBIL	1			1
ESFAHAN		2	13	15
ILAM			2	2
BOUSHER	1			1
TEHRAN		1	3	4
GIROFT KAHNOOJ			1	1
CHAHARMAHAL	1	3		4
KHORASAN RAZAVI (Central)	4	11	6	21
KHOUZESTAN			2	2
SEMNAN		2	1	3
SISTAN BALOUSHISTAN	1			1
FARS	1	6	9	16
QAZVIN			6	6
QOM		3	12	15
KERMAN	1			1
KOHKILOUYEH	1			1
GOLESTAN		2	2	4
MAZANDARAN	1		1	2
MARKAZY			1	1
HAMEDAN	2	1	6	9
Total	14	34	67	115

Evaluation Report for FMD Laboratories of the Balkan Countries

Prof. Dr. Georgi Georgiev, DVSci, Bulgaria




EVALUATION REPORT
for NRL FMD laboratories of
Balkan countries
Prof. Dr. Georgi Georgiev, DVSci
BULGARIA

Session of Exc. Com. of EU
FMD Commission, Vienna, 2010




professor Dr. Georgi Georgiev
BULGARIA
80-th Session
of Exc. Com. of EU FMD
Commission, 28-th September,
2010, Vienna

Session of Exc. Com. of EU
FMD Commission, Vienna, 2010

The aim:

To summarize the progress of FMD NRLs of the Balkanic countries in their diagnostic capacity (scope and range of analytical diagnostic methods, needs for diagnostic tools, training, knowledge and experience, accreditation level and participation in ring tests)

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FMD Commission, Vienna, 2010

The goals is :

1. To evaluate the diagnostic capacity and identify the needs for training and other forms of support
2. To find the gaps and weaknesses of different countries/NRLs and submit the proposal to the EC for improving the situation with FMD surveillance in these countries through the EU FMD Commission mechanism

Session of Exc. Com. of EU
FMD Commission, Vienna, 2010

Background:

- The previous survey was conducted in 2006 (Closed Session of the FMD RG on meeting in Greifswald, Germany).
- The surveyed countries were: the FYR of Macedonia, Albania, Bosnia and Herzegovina, Serbia and Montenegro, Croatia and the Former Soviet Union Countries: Ukraine, Moldova, Belarusia and the Transcaucasus countries - Georgia, Armenia, Azerbaijan.

Session of Exc. Com. of EU
FMD Commission, Vienna, 2010

The previous conclusions indicated that:

- Most FMD NRLs can perform the basic serological tests for FMD Ab ELISA determination.
- 7 out of 11 of the NRL declared that they can perform FMD Ag ELISA.
- 1 out of 11 of the NRL declared that it has accreditation ISO-17025.
- The principal request of the NRLs was for diagnostic kits.
- No NRL requests for training of the staff.
- No NRL requests for equipment support.
- All NRL requested participation in ring tests for structural and NS antibody ELISA evaluation.
- All NRL requested assistance on developing accreditation strategy and EQ&A

Session of Exc. Com. of EU
FMD Commission, Vienna, 2010

The surveyed countries 2010 were:

- Albania – UN/FAO, EU FMD
- Serbia – UN/FAO, EU FMD, negotiated with EU
- Montenegro – UN/FAO
- Macedonia UN/FAO
- Bosnia & Herzegovina – UN/FAO
- Croatia - UN/FAO, negotiated with EU
- Bulgaria – UN/FAO, EU FMD, member of EU
- Romania – UN/FAO, EU FMD member of EU
- Kosovo – special status UN
- Moldova – UN/FAO
- Slovenia - UN/FAO, EU FMD, member of EU

Session of Exc. Commity of EU
FMD Commission, Vienna, 2010

First set of questions:

- **Methods for FMD antigen and antibody detection used routinely in your NRL**
- **Development of Standard Operating Procedures (SOPs) and using standard (reference) materials**
- **Organization/participation of proficiency tests (PT)**
- **Developing accreditation strategy regarding the ISO 17025 standard, level of accreditation and EQ&A**

Session of Exc. Commity of EU
FMD Commission, Vienna, 2010

Second set of questions:

- **Organization of workshops/training courses/ simulating exercises**
- **Ad hoc (real time) trainings delivered by the WRL/EU-RL or other institutions (i.e. trainings provided to your NRL/ONL in addition to / or organized in connection with the annual workshops)**
- **Other activities carried out by the FMD WRL/EU-RL (not mentioned in this questionnaire) able to assist FMD NRL over the last 5 years**
- **Sharing the information and communication of NRLs with FMD WRL/EU-RL or other institutions**

Session of Exc. Commity of EU
FMD Commission, Vienna, 2010

eofmd
european commission for the
control of foot-and-mouth disease



RESULTS:

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FMD Commission, Vienna, 2010



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european commission for the
control of foot-and-mouth disease



FMD NRL of Albania

Contact person –
Dr. Aldin LIKA,
Head of Animal Health Department
Food Safety and Veterinary Institute,
Tirana, Albania

Session of Exc. Commity of EU
FMD Commission, Vienna, 2010

What methods for FMD antigen and antibody detection are used routinely?

Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	no	no	no	no	SOPs
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	SOPs
	no	no	no	yes	Not clear

Session of Exc. Com. of EU FMD Commission, Vienna, 2010

Development of Standard Operating Procedures (SOPs)/standard (reference) materials

Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	no	no	no	no	Reference FMD Ags no
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	Reference FMD Abs
	no	no	no	no	no

Session of Exc. Com. of EU FMD Commission, Vienna, 2010



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FMD NRL of Romania

Contact person –
Dr. Mihail Claudiu DIACONU, head of NRL for FMD
Institute for Diagnosis and Animal Health,
Bucharest, ROMANIA

Session of Exc. Com. of EU FMD Commission, Vienna, 2010

What methods for FMD antigen and antibody detection are used routinely?

Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	yes	yes	no	no	SOPs yes
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	SOPs
	yes	no	no	yes	yes

Session of Exc. Com. of EU FMD Commission, Vienna, 2010

Development of Standard Operating Procedures (SOPs)/standard (reference) materials

Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	yes	yes	no	no	Reference FMD Ags yes
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	Reference FMD Abs
	yes	no	no	yes	yes

Session of Exc. Com. of EU FMD Commission, Vienna, 2010



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FMD NRL of Moldova

Contact person –
Dr. Coadă Elena, veterinary virologist
Republican Veterinary Diagnostic Center
Republic of Moldova, Chisinau

Session of Exc. Com. of EU
FMD Commission, Vienna, 2010

What methods for FMD antigen and antibody detection are used routinely?

Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	no	no	no	no	SOPs no
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	SOPs
	no	no	no	yes?	Used only in 2007

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FMD Commission, Vienna, 2010

Development of Standard Operating Procedures (SOPs)/standard (reference) materials

Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	no	no	no	no	Reference FMD Ags no
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	Reference FMD Abs
	no	no	no	no	no

Session of Exc. Com. of EU
FMD Commission, Vienna, 2010




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FMD NRL of Bulgaria

Contact person –
Dr. Lily Polihronova, Head NRL,
Department of "Exotic and emerging diseases" at
National Diagnostic and Research Veterinary Medical Institute,
Sofia, Bulgaria

Session of Exc. Com. of EU
FMD Commission, Vienna, 2010

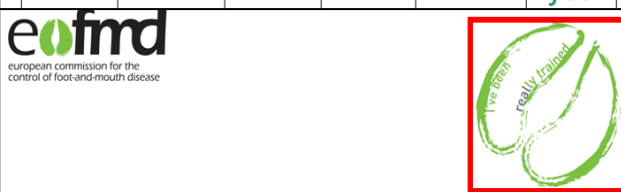
What methods for FMD antigen and antibody detection are used routinely?					
Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	yes	yes	no	yes Up to 2010	SOPs yes



What methods for FMD antigen and antibody detection are used routinely?					
Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	no	no	no	no	SOPs no
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	SOPs
	no	no	no	no	No

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Development of Standard Operating Procedures (SOPs)/standard (reference) materials					
Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	yes	yes	no	yes	Reference FMD Ags yes



FMD NRL of Kosovo

Development of Standard Operating Procedures (SOPs)/standard (reference) materials					
Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	no	no	no	no	Reference FMD Ags no
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	Reference FMD Abs
	no	no	no	no	no

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FMD NRL of Slovenia

Contact person –
Dr. Peter Hostnik, head of NRL,
National veterinary institute
Gerbičeva 60
1000 Ljubljana

Session of Exc. Com. of EU
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What methods for FMD antigen and antibody detection are used routinely?

Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	yes	yes	no	no	SOPs yes
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	SOPs
	yes	yes	no	yes	yes

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Development of Standard Operating Procedures (SOPs)/standard (reference) materials

Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	yes	yes	no	no	Reference FMD Ags yes
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	Reference FMD Abs
	yes	no	no	yes	yes

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FMD Commission, Vienna, 2010



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FMD NRL of Montenegro

Contact person –
Dejan Lausevic, MSc, DVM
Director
Diagnostic Veterinary Laboratory
Podgorica, Montenegro

Session of Exc. Com. of EU
FMD Commission, Vienna, 2010

What methods for FMD antigen and antibody detection are used routinely?

Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	no	no	no	no	Not SOPs
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	Not SOPs
	no	no	no	yes	Only for NS

Session of Exc. Com. of EU FMD Commission, Vienna, 2010

Development of Standard Operating Procedures (SOPs)/standard (reference) materials

Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	no	no	no	no	Reference FMD Ags no
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	Reference FMD Abs
	no	no	no	no	no

Session of Exc. Com. of EU FMD Commission, Vienna, 2010






FMD NRL of Serbia

Contact person –
Vesna Milicevic, DVM,
Head of Virology Department
Institute of Veterinary Medicine, Serbia

Session of Exc. Com. of EU FMD Commission, Vienna, 2010

What methods for FMD antigen and antibody detection are used routinely?

Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	no	yes	no	no	Not SOPs
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	Not SOPs
	no	no	no	yes	Only for NS

Session of Exc. Com. of EU FMD Commission, Vienna, 2010

Development of Standard Operating Procedures (SOPs)/standard (reference) materials

Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	no	yes	no	no	Reference FMD Ags no
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	Reference FMD Abs
	no	no	no	yes	yes

Session of Exc. Com. of EU FMD Commission, Vienna, 2010



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FMD NRL of Croatia

Contact person -
Dr. Besi Roic DVM, PhD, Department for virology
Head of Serology laboratory for viral diseases
CROATIA

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FMD Commission, Vienna, 2010

What methods for FMD antigen and antibody detection are used routinely?

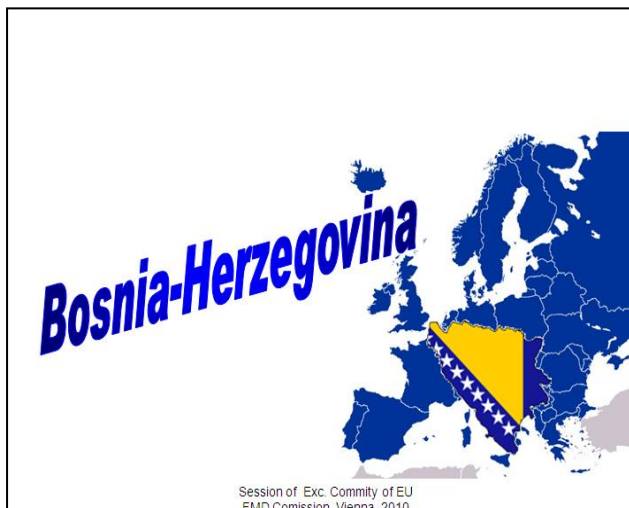
Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	no	no	no	no	Not SOPs
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	Not SOPs
	no	no	no	yes	

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FMD Commission, Vienna, 2010

Development of Standard Operating Procedures (SOPs)/standard (reference) materials

Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	no	no	no	no	Reference FMD Ags no
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	Reference FMD Abs
	no	no	no	no	yes

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FMD NRL of Bosnia and Herzegovina

Contact person –
Mr DRAGAN KASAGIC DVM
Veterinary Institute Of Republic of Serpska " Dr Vaso Butozan"
Banja Luka

Session of Exc. Com. of EU
FMD Commission, Vienna, 2010

What methods for FMD antigen and antibody detection are used routinely?

Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	no	no	no	no	Not SOPs
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	Not SOPs
	no	no	no	yes	

Session of Exc. Com. of EU FMD Commission, Vienna, 2010

Development of Standard Operating Procedures (SOPs)/standard (reference) materials

Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	no	no	no	no	Reference FMD Ags no
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	Reference FMD Abs
	no	no	no	no	Not clear

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FMD NRL of Macedonia

Contact person –
 Doc., Dr. Ivancho Naletvoski (PhD) -
 Head of Veterinary Institute, Faculty of Veterinary Medicine,
 University St. "Ciril and Methodius" – Skopje, Macedonia

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What methods for FMD antigen and antibody detection are used routinely?

Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	yes WRL protocol	yes Riems protocol	no	no	Not SOPs
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	Not SOPs
	yes	yes	no	yes	

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Development of Standard Operating Procedures (SOPs)/standard (reference) materials

Tests for Ag	Ag ELISA	RT-PCR	VNT	Isolation	remarks
	no	no	no	no	Reference FMD Ags no
Tests for Ab	LPBL ELISA	SPCE ELISA	VNT	NSP ELISA	Reference FMD Abs
	no	no	no	no	no

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Other activities carried out by the FMD WRL/EU-RL

- TAIEX office AGR24492 Workshop On The Design And Interpretation Of Post FMD-Vaccination Serosurveillance By NSP Tests, Brussels, Belgium
- FAO Regional Project TCP/RER/066 „Emergency Control of Transboundary Diseases of Livestock in Southern and Eastern Europe“; Ankara; Turkey.

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FMD Commission, Vienna, 2010

Other activities carried out by the FMD WRL/EU-RL

- Annual meetings of NRL for FMD, Brussels, Belgium
- FMD/SVD and CSF National Reference Laboratories Meeting, VAR-CODA-CERVA, Tervuren, Belgium
- PHARE Multi country Veterinary Diagnostics and Control Programme 1998/1999

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FMD Commission, Vienna, 2010

Other activities carried out by the FMD WRL/EU-RL

- EU FP6 project 043653: Upgrading and Introduction of Sustainable Diagnostic Tools for the Major Transboundary Diseases of Animals for Macedonia
- Regional FAO Workshop on the Diagnostic of FMD and Blue Tongue; Sofia, Bulgaria, 2001
- **IAEA-TC Project BUL/5/012 Developing and Validating Molecular Nuclear Technologies for Rapid Diagnostics of Foot and Mouth Disease and Genotyping of Indigenous Cattle Breeds**

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Sharing the information of with FMD WRL/EU-RL or other institutions

- WRL/EU FMD RL Pirbright, UK
- FLI, Riems, Germany
- INIA Valdeolmos, Spain,
- CIDC Lelystad, Holland,
- OIE, Paris
- FAO, Rome, General Session of EU FMD Commission
- IAEA/FAO Joint reserch center, Vienna, Austria,
- ARIAH, Vladimir, Russia

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Conclusions:

- 1. 10/11 of 11 FMD diagnostic laboratories are determined as FMD NRLs of countries in the region**
- 2. 9 of 11 FMD NRLs declare that WRL in Pirbright UK is their Reference laboratory**
- 3. 4 of 11 can perform routinely FMD Ag ELISA**
- 4. 4 of 11 can perform routinely FMD LPBL Ag ELISA**

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FMD Commission, Vienna, 2010

Conclusions:

- 5. 4 of 11 can perform routinely FMD SPCE Ab ELISA**
- 6. 10 of 11 can perform routinely FMD NSP ELISA**
- 7. 5 of 11 can perform routinely RT-PCR (real or conventional)**
- 8. 1 of 11 can perform routinely FMD VI (but unfortunately up to 2010)**
- 9. No one can perform routinely VNT**

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Conclusions:

10. Most of the NRLs are used developed and validated Standard Operating Procedures (SOPs) for methods routinely performed at the lab. but few of them used standard (reference) materials distributed by WRL,UK

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FMD Commission, Vienna, 2010

Conclusions:

11. There are remarkable improvement for attempt to participate in a different levels of PT organized by WRL/EU FMD RL, UK

11.1. Five countries (Alb, Kos, Mol, B&H and Mon) are not participated in PT organized by WRL/EU FMD RL, Pirbright, UK

11.2. Other 6 countries (Cro, Ser, Mac, Rom, Slov, BG) in last 5 years try to cover different panel 1-4 levels of PT with inactivated and live virus materials

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Developing accreditation strategy regarding the ISO 17025 standard, level of accreditation and EQ&A:

12. Some of institutions that FMD NRLs belongs has accreditation of methods under ISO 17025 but for FMD – not! The reason is small number of samples received for testing

13. Only few FMD NRLs (BG, Rom, Ser) declared accreditation of methods for FMD Ag and Ab detection covering the ISO-17025 standard

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workshops/training courses in last 5 years:

Most of the countries participated:

- In workshop organized by **TAIEX-AGR24492** on the **design and Interpretation of post FMD-vaccination serum surveillance by NSP ELISA tests**, Brussels, Tervuren, Belgium, 2007 (BG, Mac, Alb, Ro, Mol, Cro, Kos, Slov)
- In common FMD/SVD and CSF NRL meeting, **VAR-CODA-CERVA**, Tervuren, Brussels, Belgium 2007 (Mont, Mac, BG, Cro)

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FMD Commission, Vienna, 2010

workshops/training courses in last 5 years

- Simulating exercises for FMD at national level (Ro, Slov)
- Trainings at WRL/EU RL – Pirbright (Ro, BG, Slov, Mac)
- Annual EU FMD NRLs Workshops (BG, Ro, Mac)
- Real time (ad hoc) trainings Erzurum, Turkey (BG)

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FMD Commission, Vienna, 2010



Budapest Meetings February 2011 - Venue and provisional plan

Keith Sumption, Secretary of EuFMD



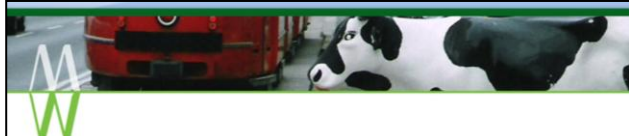
W FMD Week 2010
Budapest Meetings
February 2011

Venue and provisional plan

VIENNA, AUSTRIA • 27th SEPTEMBER - 1st OCTOBER



eofmd
European Commission for the control of foot and mouth disease

FAO
World Health Organization




W

Radisson Blu Hotel, Budapest (**)**

FAO Office for Central and Eastern Europe



slide title (1/20)

VIENNA, AUSTRIA • 27th SEPTEMBER - 1st OCTOBER



W **Facilities:**
247 bedrooms, 7 function rooms

- accommodation circa 90€/night, B&B
- seven flexible function rooms spread over 710 square metres, this accommodation provides unique conference facilities in Budapest.
- Three meeting rooms come decorated with early 19th century frescoes and can be joined to seat up to 220 delegates.
- The new, ground floor Orfeum conference room seats up to 220 guests and can be divided into three rooms using movable walls.

Key features:

- Business centre services include photocopying, translation and faxing
- Customised menus from the hotel's expert chefs
- Eight breakout rooms
- Free high-speed, wireless Internet access
- High-quality audiovisual equipment
- On-hand Meetings & Events coordinator and staff
- Seven meeting rooms spread over 710 m²
- Video conferencing capabilities

slide title (1/20)



W **Provisional plan for 2nd-4th Feb**

	February	Meeting	FMD Symposium	Balkan Forum
Wednes	2nd	AM 81st ExCom		
		PM	FMD Symposium	
Thurs	3rd	AM	FMD Symposium	Balkan Forum
		PM	FMD Symposium	Balkan Forum
Friday	4th	AM		Balkan Forum
		PM		
Number invited		Exec +Obs	All 36 MS	15 countries
Expected		20	50?	35
Invitations by		EuFMD	EuFMD	FAO on behalf G7TADS (?)
Funding participants		MS funds	MS funds	FAO (Bud.) - for NON-EU

slide title (1/20)

VIENNA, AUSTRIA • 27th SEPTEMBER - 1st OCTOBER

Economic impacts of FMD - plan for symposium February 2011

Questions for 80th Executive committee:

1. Please confirm Symposium's objective and target audience
2. Please narrow areas of focus, if appropriate
 - a. E.g. Limit to economic impacts? Or include social, environmental?
3. Comments on suggested agenda:
 - a. How much do we use real-life examples and simulation exercises in the program?

"79th Executive recommends that a one day symposium be organized on the economics and resource implications of managing FMD outbreaks in free countries, in order to guide the Commission and Member States on the utility of tools for contingency planning."

Objective: To guide the Commission and Member States on issues surrounding the **impact of an FMD outbreak**, including tools that can be used in contingency planning to estimate the potential scale (epidemiological and economic) and associated resource requirements.

Target audience: CVO's, deputy CVO's, policy makers

Proposed areas of focus:

- **Why is contingency planning important?**
 - What would be the impact of an FMD outbreak?
 - a. Impact: economic, social, environmental
 - b. How can the impact be predicted? What factors are associated with impact?
Size of export market, size of outbreak
- **What tools are available to inform contingency planning?**
 1. Models
 2. Simulation exercises
- **How can the impact be minimized?**
 1. Availability of resources: before and during outbreak
 2. Control measures chosen (vaccinate or not)/ effectiveness
 3. Effectiveness of surveillance – early detection
 4. "peace-time" measures to reduce spread of incursion (eg x d movement restriction after moving to a new holding– UK)

4. Draft agenda/presentations:

	WHAT	TOPIC	PRESENTER(S) (tentative!)
1 hr	Presentation	FMD: recent experiences and lessons learned	UK Japan
1 hr	Panel discussion (to get different perspectives)	What would be the impacts of an FMD outbreak in Europe?	Economists, sociologists, UK, Netherlands, Greece/Eastern Europe, environmentalist (moderator: ??)
1 hr	Presentation	Maximise effectiveness of contingency planning: use of simulations and models	J. M. Westergaard (Denmark)?? (? Plus Modeller to give overview?)
1 hr	Presentation	<u>Before</u> outbreak: how can impact be minimised? and associated resources required ?: -surveillance -policy (eg husbandry/ movement practices) -training (vets/farmers, recognition, biosecurity)	Wageningen ?
1 hr	Presentation	<u>During</u> outbreak: how can impact be minimised? and associated resources? -control measures -info system	UK- Exodis
1.5 hr	Panel discussion	Feedback on above presentations, resource considerations, next steps	CVO's, tech experts

Consultative Group meeting on the FMD – Progressive Control Pathway (PCP)

Institute for Animal Health, Pirbright, October 4-6th

Objectives

1. Review the definitions and criteria of the FMD-PCP Stages 1,2 and 3
2. Consider how the PCP and related Roadmap processes could be better aligned for regions where there are existing regional co-ordinated efforts, such as SE Asia and South America
3. Make recommendations on appropriate procedures to assess and internationally accept/endorse national and regional PCP progress

Outcomes expected

- Clear set of definitions/criteria for PCP Stages that can be applied in an objective, transparent, rapid and simple assessment of national PCP Stages.
- Recommendations for alignment or actions in relation to PCP application and existing regional coordination programs
- Report from meeting, supported by reference texts (FAO standards and guidance papers)

Agenda

Monday 4 October 2010		
10.00-10.15	David Paton/Mike Johnson	Welcome to IAH Pirbright (Plenary: OIE/FAO lab meeting +CG)
10.15-10.30	Jef Hammond (Lab network) Keith Sumption (CG Meeting)	Aims and objectives for the two meetings (Plenary)
10.30-11.00	Jef Hammond	Overview of world situation in 2010 and WRLFMD vaccine recommendations (Plenary)
11.00-11.30	FAO	Progressive control of FMD: Stages, tools and training (Plenary)
11.30-12:15	FAO/EuFMD	<ol style="list-style-type: none"> 1. Further background on PCP as needed: <ul style="list-style-type: none"> ○ Overview of components envisioned within each stage ○ Feedback from EuFMD Open Session ○ Experiences thus far 2. Quality management principles 3. Introduce group work
12:15-14:30	(incl lunch)	Group work
14:30-15:30		Group feedback
15:30-17:00	(incl tea)	Group work
17.00-18.00		Group feedback
19.00	DINNER	
Tuesday 5 October 2010		
0900-11.00		Group work
11-13.00		Group feedback
13.00 – 14.00	LUNCH	
1400		Excursion
		Facilitators prepare report (conclusions and recommendations)
19.00	DINNER	
Wednesday 6 October 2010		
0900-9.40	Facilitators and group leaders	Presentation draft report to Plenary –feedback from all
09.40-10.45		Discussion
10.45-11	TEA	
11-13.00		Discussion
13.00-14.00	LUNCH	
14.00-14:30		Discussion
14:30-15.00		The way ahead – joint feedback <ol style="list-style-type: none"> 1) OIE/FAO lab network 2) Progressive Control pathway (Plenary)
		CLOSURE

Internationally supported FMD projects in the World

Regional and interregional activities

Adel BenYoussef- Eufmd Secretariat

Summary:

There are at list three regional coordinated programs for the progressive control of FMD: SEA-FMD in South-East Asia, It benefits from the support of the governments of Australia and France and from the European Union. Many national projects are ongoing, mainly supported by the Australian cooperation.

The second region is the South America where an Hemispheric Plan for the Eradication of Foot-and-Mouth Disease (PHEFA) was established in 1988. The roadmap 1988-2009 aimed to eradicate FMD by the year 2009. Amongst the ongoing projects in the region, two supported ones benefit the funding of the governments of Italy and Spain respectively.

The third region is the SADC which benefits the support of the European Union to carry out a mass vaccination campaign and to establish a Regional Strategy for the progressive control and effective prevention of FMD.

Two major FMD endemic regions in the world, namely South Asia and West/Central Africa do not benefit from international support for disease control. The South Asian region is a source of regular incursion to the west Eurasia and Middle-East genotyping reports of the WRL-IAH Pirbright often demonstrate this. West African countries have been in the past the origin of introduction in North Africa. East African countries need also a support for the disease control, since this region is also endemic and is a source of spread to the North (Egypt) and neighbouring countries, mainly Gulf countries. However, this region has an expanding livestock sector, and high opportunities of livestock export.

1/ Budget dedicated to the EuFMD activities:

Region Name (UNDP) Project Symbol	Country Name	Project Title	Proposed EOD Proposed NTE	Total Budget (FPMIS)
Interregional (UNDP) MTF /INT/003/E EC	Inter Regional	EC Funded Activities (2009-2013) carried out by the FAO European Commission for the Control of Foot-and-Mouth Disease (EUFMD) - (Follow up Phase MTF /INT/003/EEC)	2009-09 2013-09	\$11,510,792

2/ IAEA activities:

- A five years applied research project: “Development of Molecular and Nuclear Technologies for the Control of Foot-and-Mouth Disease (FMD)” March 2010 to March 2015. The objective of this Coordinated Research Project (CRP) is to develop guidelines and protocols for the more effective quality control of FMD vaccines and their application in

endemic countries as part of the FAO program for the global progressive control and eventual eradication of FMD in domesticated animal reservoirs. Funding limits per year towards a CRP research contract is about 8,000 Euro.

Regional project for Africa:

Project /program/symbol Budget	Country	Theme	Period EOD-NTE	Funding entity
RAF 5057	Africa	Strengthening Capacities for the Diagnosis and Control of Transboundary Animal Diseases in Africa (AFRA) To strengthen the diagnostic capacity of national veterinary services to monitor and control major transboundary animal diseases, particularly FMD, PPR and CBPP	2009-..	IAEA

Algeria; Angola; Botswana; Burkina Faso; Cameroon; Central African Republic; Cote d'Ivoire; Democratic Rep. of the Congo; Egypt; Eritrea; Ethiopia; Gabon; Ghana; Kenya; Malawi; Mali; Mauritania; Morocco; Namibia; Niger; Senegal; Seychelles; Sierra Leone; South Africa; Sudan; Tunisia; Uganda; United Republic of Tanzania; Zambia; Zimbabwe

- Research programme to develop improved vaccines for FMD:

Project /program/symbol Budget	Country	Theme	Period EOD-NTE	Funding entity
£1.3million (USD 2 056 000) http://www.wellcome.ac.uk/News/2010/News/WTX059080.htm	international collaborative group of research institutions and industry to develop improved vaccines for foot and mouth disease.	To develop genetically modified FMD virus vaccines that can be produced cost-effectively on an industrial scale. The international group brings together researchers from the Institute for Animal Health (UK), the University of Oxford, the Agricultural Research Council-Onderstepoort Veterinary Institute (South Africa), the Agricultural Research Service (USA), the USDA - Foreign Animal Disease Research Unit at Plum Island and Intervet/Schering-	April 2010	Wellcome Trust

		Plough Animal Health (the Netherlands).		
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Pool 1: South East Asia

The Southeast Asia Foot and Mouth Disease Campaign (SEAFMD) involves the coordinated control of Foot and Mouth Disease by eight countries in the ASEAN region. These countries are Cambodia, Indonesia, Lao PDR, Malaysia, Myanmar, the Philippines, Thailand and Vietnam. The campaign is coordinated through a Regional Coordination Unit in Bangkok with the support of the Australian Government's overseas aid program, administered by AusAID.

The SEAFMD 2020 Roadmap, to achieve FMD Freedom with vaccination for Southeast Asia by the Year 2020, provides a long-term strategy applying a progressive zoning approach to control and eradicate FMD in the region. The Roadmap is an integrated mix of policies and actions, involving progressive zoning, surveillance, emergency planning, vaccine supply, diagnostic capacity, traceability, training and community awareness.

Project /program/symbol Budget	Country	Theme	Period/ EOD-NTE	Funding entity
GCP /RAS/233/AS B USD 430 000 Include FMD	Greater Mekong Sub-Region (Cambodia, Lao PDR, Thailand, Viet Nam, PR China)	Transboundary Animal Disease (TAD) Control for Poverty Reduction in the Greater Mekong Sub-Region	Jan 2008- Jan 2011	Asian Development bank ADB
TCP/BHU/33 01 (D) US\$ 256 000	Bhutan	Risk Based strategies for the control of emerging strains of Foot-and-Mouth Disease (FMD) virus in Bhutan	June 2010- September 2011	FAO
MYA5015	Myanmar	Strengthening the National Capacity for the Production of Veterinary Vaccines	2007	FAO/IAEA
AH/2004/020 \$839,408	Indonesia	The development of a national surveillance system for classical swine fever, avian influenza, and foot and mouth disease in Indonesia	Project Extension: 01/01/2010 - 31/05/2010	- Australian centre for international agricultural research ACIAR - Indonesia
AH/2006/156 \$890,511	Indonesia	Livestock movement and managing disease in eastern Indonesia and eastern Australia	01/01/2008 - 31/12/2011	University of Sydney, Australia
AH/2006/166 \$1,547,148	Indonesia	Improving veterinary service delivery in a decentralised	01/02/2008 -	Industry & Investment NSW,

		Indonesia	31/01/2012	Australia Indonesia
AH/2006/025 \$1,287,360	Cambodia, Lao PDR	Understanding livestock movement and the risk of spread of transboundary animal diseases	Project Extension: 01/11/2008 - 31/10/2011	Department of Agriculture and Food, Western Australia, Australia Cambodia, Lao PDR
AH/2005/086 \$764,513	Cambodia	Best practice health and husbandry of cattle, Cambodia	01/06/2007-31/05/2011	University of Sydney, Australia Cambodia
AH/2006/159 \$620,380 Research	Lao PDR	Best practice health and husbandry of cattle and buffalo in Lao PDR	01/06/2008 - 31/05/2012	ACIAR Research Program
SEAFMD phase 3 USD 3M	Lao PDR, Cambodia, Indonesia, Myanmar, Philippines, Malaysia, Thailand, Vietnam.	long term strategic framework to achieve FMD freedom with vaccination by year 2020	2006-2011	Other – ASEAN, AusAID through an OIE Trust Fund
153878 9 Million €	South and SEA /OIE	Strengthening Veterinary Services in Asia; Regional Vaccine Bank and Capacity building for surveillance, early detection and eradication of highly pathogenic emerging and re-emerging animal diseases	2009-2012	EU (78%) France

Pool 2: South Asia

Project /program/symbol Budget	Country	Theme	Period (or first year)	Funding entity
MON5017	Mongolia	Supporting the Sustainable Production and Supply of Vaccines And Diagnostic Kits for Transboundary Animal Diseases	2009	FAO/IAEA

Pool 3: West Eurasia

The West Eurasia Roadmap had been developed during the 4 day workshop in November 2008 in Shiraz, Iran, attended by representatives of 14 countries. The vision, and plan to 2020, used the Progressive Control Pathway (PCP) approach, in which FMD control level of a

country or zone is categorized on the basis of monitoring, control and surveillance actions, moving from basic monitoring for FMDV strains and risk points for infection, to a stage where FMDV circulation in a country has ceased and each new event detected by surveillance is controlled and the absence of further circulation verified; this Stage (3) precedes the official recognition of FMD freedom by the OIE.

The 1st Regional workshop to review the progress of the West Eurasia FMD network was held in Istanbul, Turkey, organized by FAO in consultation with OIE.

Project /program/symbol Budget	Country	Theme	Period	Funds and Funding entity
MTF/INT/003 /EEC USD 1997 640	Armenia / Azerbaijan / Georgia	Strengthening Foot-and-Mouth Disease surveillance and control in the Trans-Caucasian countries to assist progression on the West Eurasia FMD Progressive Control Pathway (MTF/INT/003/EEC)"	June 2010-December 2012	EU/EUFMD
Project ID: P120118 10.1 million USD Include FMD	Kyrgyz Republic	Special Facility Support to Animal Health and Feeding <i>Includes nationwide vaccination and testing program for eight diseases (incl. FMD)</i>	latest document/ 03/18/2010 estimated date of approval 16 April 2010	EU Additional Financing (Eur 2,720,901)
TCP/KYR/330 2 USD 312 000 Include FMD	Kyrgyz Republic	Assistance in controlling trans-boundary animal diseases of livestock in the Kyrgyz Republic	September 2010 - August 2012	FAO
BUL5012	Bulgaria	Developing and Validating Molecular Nuclear Technologies for Rapid Diagnostics of Foot and Mouth Disease and Genotyping of Indigenous Cattle Breeds	2009	FAO/IAEA
GTFS/INT/90 7/ITA USD 5,097,124 Extension USD 1.8 million Include FMD	Afghanistan Kazakhstan Kyrgyzstan Pakistan Tajikistan Turkmenistan Uzbekistan	Controlling Transboundary Animal Diseases in Central Asian Countries	01 Aug 2004 - 01 Sep 2010 Extension 2010-2012	Italy
OSRO/IRQ/70 7/UDG USD 3 million Include FMD	Iraq	Strengthening the capacity of the Iraqi Veterinary Services for control of Zoonotic and Transboundary Animal Diseases	Jan 2009-Oct 2010	United Nations Development Group Office (DGO)

Pools 4-5-6: Africa

A five-day Workshop (26-30th January 2009) was held in Nairobi, Kenya, organized by FAO, jointly by the FAO, OIE, AU-IBAR and the ALive Secretariat/GF-TADs.

A vision statement for the continental control of FMD was developed during this workshop, built upon three sub-regional vision statements, which together with their associated sub-regional roadmaps signal the view of participants that progressive control of FMD in the region could lead to freedom from clinical cases of FMD being achieved by the majority of countries by the year 2020.

The Vision statement agreed at the Final Plenary Session, 30th January was:

'By 2020, there will be sufficient control of FMD in Africa to enable the livestock sector to participate in local, regional, sub-continental, international trade, and contribute to improved food security and livelihoods. In this regard, obtain by 2010 the commitment from the public and private sectors and other relevant role players to enter into the FMD progressive control pathway'.

Pool 4: East Africa

The Vision statement agreed at the Final Plenary Session, 30th January was: An East African region in which FMD will be under control and approaching disease freedom (Stage 3) in the majority of member states by 2020, with zonal or country freedom (Stage 4) being reached in some parts of the sub region.

Project /program/sy mbol Budget	Country	Theme	period	Funding entity
MTF/INT/003 /EEC USD 150.000	Egypt	Strengthening Foot-and-Mouth Disease surveillance and control in Egypt to assist progression on the FMD Progressive Control Pathway	July2010-March 2011	EU/EUFMD
UGA5030	Uganda	Improving Diagnostic Capacity in Animal Diseases (Phase II)	2009	FAO/IAEA
RAF5057	Regional Africa	Strengthening Capacities for the Diagnosis and Control of Transboundary Animal Diseases in Africa (AFRA)	2009	FAO/IAEA
ERI5006	Eritrea	Controlling Major Epizootic Diseases and Other Mycoplasma Infections of Livestock	2009	FAO/IAEA
ETH5014	Ethiopia	Monitoring and Control of Major Animal Diseases	2007	FAO/IAEA
Comparing Foot and Mouth disease in wildlife and livestock	Researchers from the UK and Tanzania	looking at developing effective strategies for controlling FMD in Africa. Sample wildlife, mainly buffalo and livestock - domestic cattle, sheep and goats - to map the genetic diversity of viruses	2010-2013	BBSRC is the UK funding agency for research in the life sciences

Research		across Tanzania.		
IAEA/CRP 8 000 €	Democratic Republic of Congo East part of Congo more concerned.	Support from the (Coordinated Research Project) Some FMD vaccination carried out by Red Cross (Croix Rouge).	a duration of 6 Months	IAEA

Pool 5: West Africa

The Vision statement agreed at the Final Plenary Session, 30th January was:

The objective is that by 2020, all countries in West and Central Africa will be at least at stage 2, and the best advanced countries to have reached stage 4 and the intermediate countries stage 3.

Project /program/symbol Budget	Country	Theme	period	Funding entity
<i>MLI5023</i>	<i>Mali</i>	<i>Improving National Capabilities for Characterization of Serotypes of Major Animal Diseases Using Molecular Biology Techniques</i>	<i>2009</i>	<i>FAO/IAEA</i>
<i>MAU5003</i>	<i>Mauritania</i>	<i>Improving National Capacity in Diagnostics for Animal Diseases (Infection and Parasitic Diseases)</i>	<i>2009</i>	<i>FAO/IAEA</i>

Pool 6: East equatorial Africa / SADC

The SADC Foot and Mouth Disease Project (SFMDP) (€ 12.6 million) has been launched to assist the SADC Member States in decreasing the spread of the disease through a vaccination campaign, the establishment of a SADC FMD epidemiological intelligence and the development of a regional framework for the control of transboundary animal diseases. The project was terminated prematurely in Nov 09 instead of December 2010.

A Regional Strategy¹ for the progressive control and effective prevention of FMD covering the SADC members (Angola, Botswana, Democratic Republic of Congo, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, Tanzania, Seychelles, South Africa, Swaziland, Zambia, Zimbabwe) is in preparation under the SADC project on TADs. It aims to develop a medium to long terms strategy for the progressive control of FMD in the SADC region.

Project /program/symbol Budget	Country	Theme	period	Funding entity
<i>OSRO/RAF/721/EC</i>	<i>SADC</i>	<i>Regional Strategy for the progressive control and effective</i>	<i>January 2008 –</i>	<i>European Union</i>

¹ The SADC TADs project is supposed to prepare the strategy. It might be left to the Southern African Commission for the Control of TADs (SACCT), yet to be established, to do it.

640.825\$		<i>prevention of FMD in the SADC region</i>	<i>November 2009 Terminated</i>	
BOT5005 include FMD	Botswana	Improving Diagnosis of Animal Diseases	2009	FAO/IAEA
<i>The SADC Foot and Mouth Disease Project (SFMDP) FED/2007/01 8-816 \$16 884 000</i>	<i>SADC Member States</i>	<i>assists in decreasing the spread of the disease through a vaccination campaign, the establishment of a SADC FMD epidemiological intelligence and the development of a regional framework for the control of transboundary animal diseases.</i>	<i>12/1/2006 November 2009 Terminated</i>	<i>European Commission</i>
OSRO/RAF/7 20/AFB \$661 944 include FMD	SADC	Strengthening institutions for risk management of TADs in the SADC region.	07-2008/06-2012	African developing Bank (AfDB)
25 Million\$ include FMD	Tanzania	Agricultural Sector Development Program: Livestock Component	1/1/2007 7/31/2014	European Commission, IFAD, Japan International Cooperation Agency JICA ,The World Bank, Ireland, Belgium
Angola, Malawi, Mozambique Tanzania, Zambia USD 22.845 million		Strengthening Institutions for Risk Management of Transboundary Animal Diseases (TADs) in the SADC Region (SADC TADs Project) in Angola, Malawi, Mozambique, Tanzania, Zambia	2007-2012	The AfDB Grant is USD 20.565 million SADC Secretariat USD 0.51 million The participating countries USD 1.77 million

Pool 7: central and south America

In 1951 the Americas Animal Health Authorities decided to establish a Pan-American Foot-and-Mouth Disease Center (PANAFTOSA), initially as a special program within the American States Organization (OAS). The center was later transferred to the Pan-American Health Organization (PAHO).

In the early 1970s PANAFTOSA developed a proposal for a continental surveillance system for vesicular diseases. Using the information gathered during visits to the countries, as well as weekly reports, and by studying the most frequent animal movements within the region,

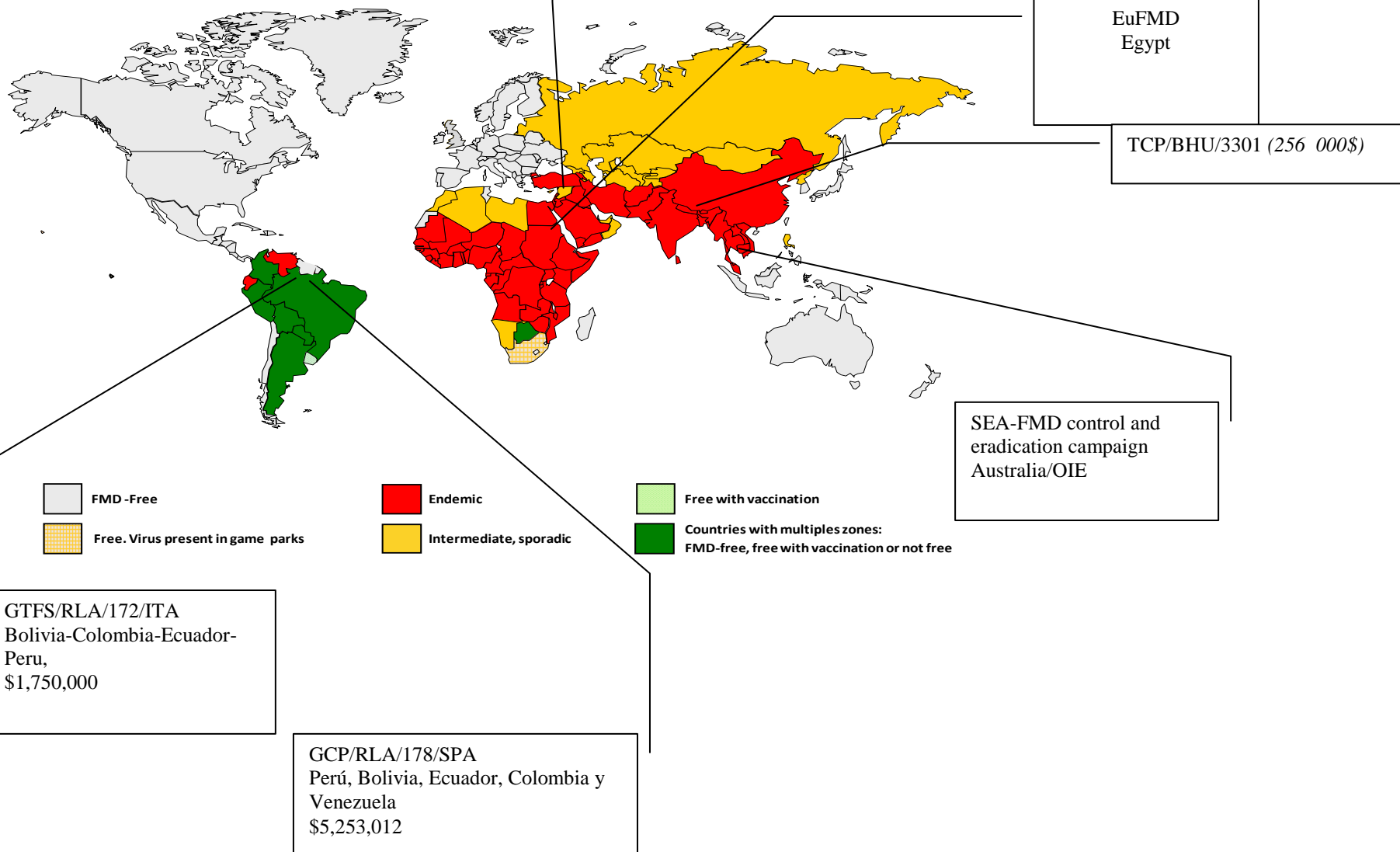
PANAFTOSA developed a proposal for FMD eradication. This plan was approved by the Governments of South America and implemented in cooperation with PANAFTOSA. The Hemispheric Plan for the Eradication of Foot-and-Mouth Disease (PHEFA) was established in 1988. The PHEFA has served as the template for the national programs for control and eradication of FMD in the affected areas. The roadmap 1988-2009: aimed to eradicate FMD by the year 2009. The last specific plan a PHEFA Plan of action for the period 2005-2009 aimed at the total eradication of the disease and of the prevention of FMD entry or reintroduction across the entire continent. The cost of the five-year project is estimated at US\$ 48,323,000. A fund created, based on donations and special sponsorships and also special loans.

On February 2010, the Integrated Regional Project for the Progressive Control of FMD in the countries of the Andean region - Peru, Ecuador, Colombia, Bolivia and Venezuela, was launched. The project is financed by the Spanish Government through the Spanish Agency for International Development and the Cooperazione Italiana.

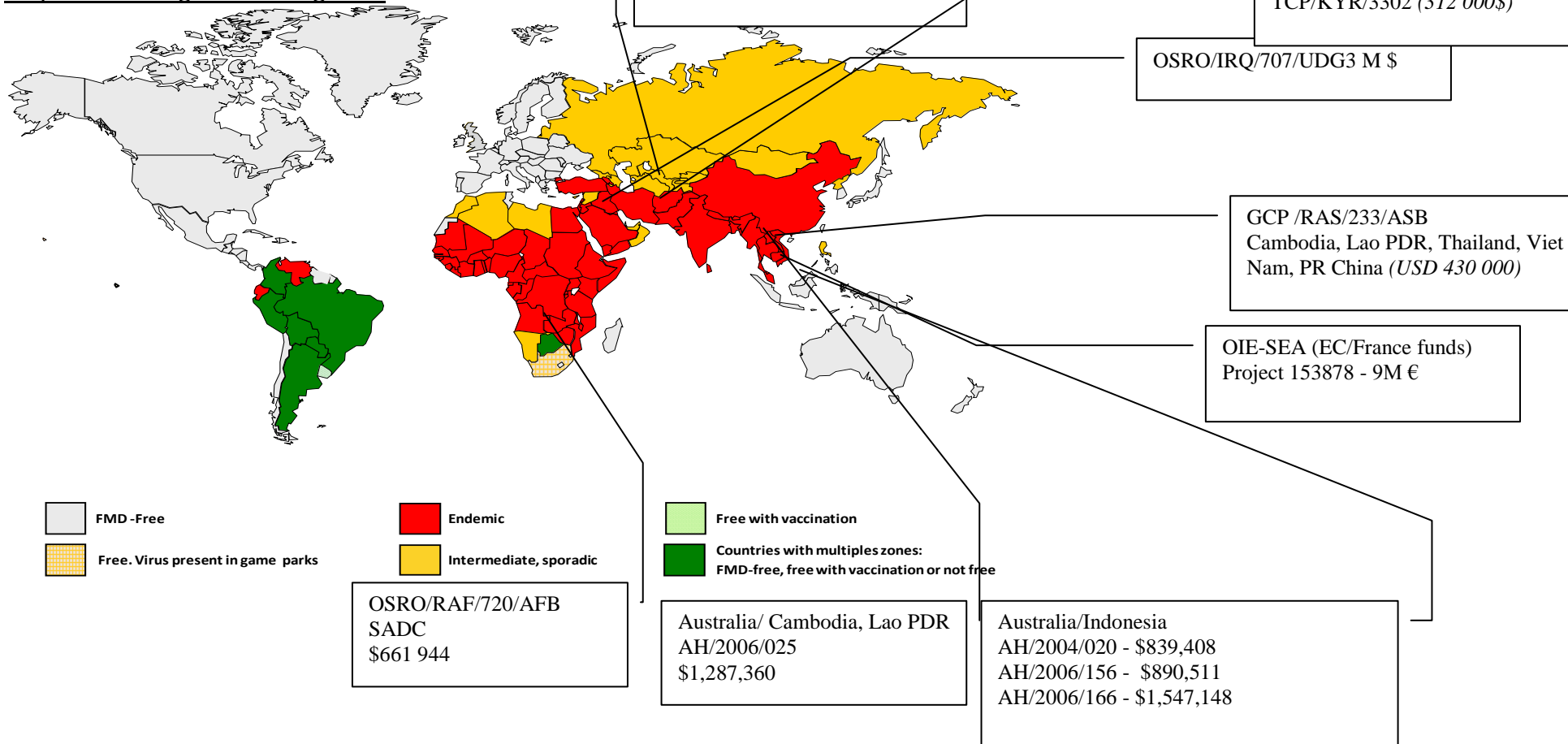
Project /program/symbol Budget	Country	Theme	period	Funding entity
GCP/RLA/178/SPA \$5,253,012	Regional Latin America Perú, Bolivia, Ecuador, Colombia y Venezuela	Fortalecimiento de políticas y estrategias para la prevención, control y erradicación de la Fiebre Aftosa en Perú, Bolivia, Ecuador, Colombia y Venezuela <i>Strengthening policies and strategies for prevention, control and eradication of FMD in Peru, Bolivia, Ecuador, Colombia and Venezuela</i>	2009-09 2012-09	Spain (Spanish Agency for International Development)
GTFS/RLA/172/ITA \$1,750,000	Bolivia Colombia Ecuador Peru, Latin America & the Caribbean (UNDP)	Fortalecimiento de un mecanismo Subregional de apoyo a la erradicación de la fiebre aftosa en los países miembros de la comunidad andina de naciones (CAN) <i>Strengthening Sub-regional mechanism to support the eradication of FMD in the member countries of the Andean Community of Nations (CAN)</i>	2009-07 2011-06	Italy (Cooperazione Italiana)
www.ars.usda.gov/ Research	Argentina	Research: Understanding Local and Systemic Protective Responses Against Foot-and-Mouth Disease Virus Infection in Cattle	May, 2008 to April 2011	ARS.USDA
1940-32000-052-	Argentina	Developing Predictive Tools for Prevention of Foot-and-Mouth	August 2007 July	ARS.USDA

02 / Research		Disease Project Number:	2012	
BOL5019	Bolivia	Implementing Molecular Techniques to Upgrade the Diagnostic Facilities of National Animal Health Programs	2009	FAO/IAEA
BZE/5/004	Belize	Strengthening the Veterinary Diagnostic Laboratory with Capacities in Polymerase Chain Reaction Diagnosis.	2009	FAO/IAEA

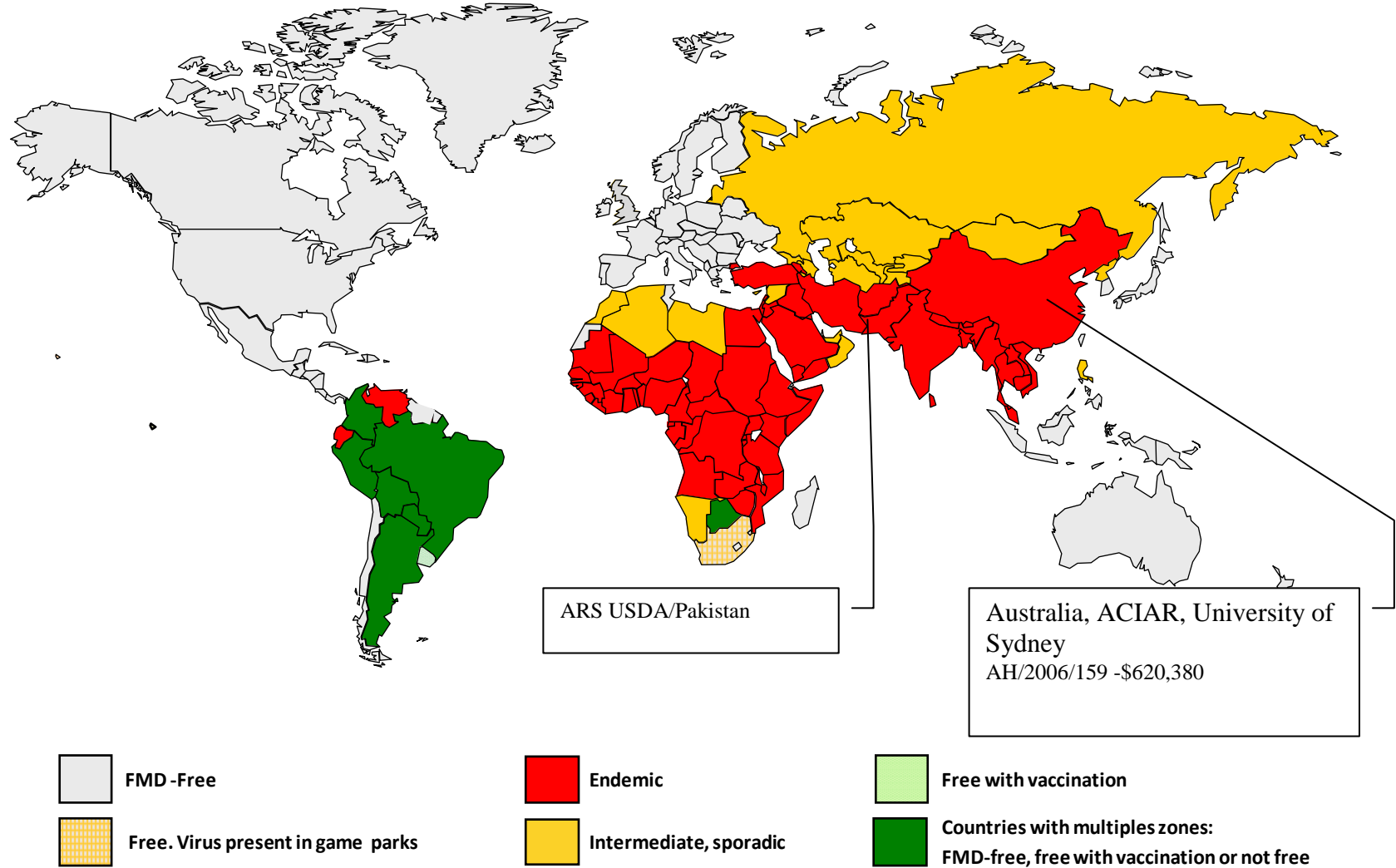
Internationally supported projects specifically dedicated to FMD



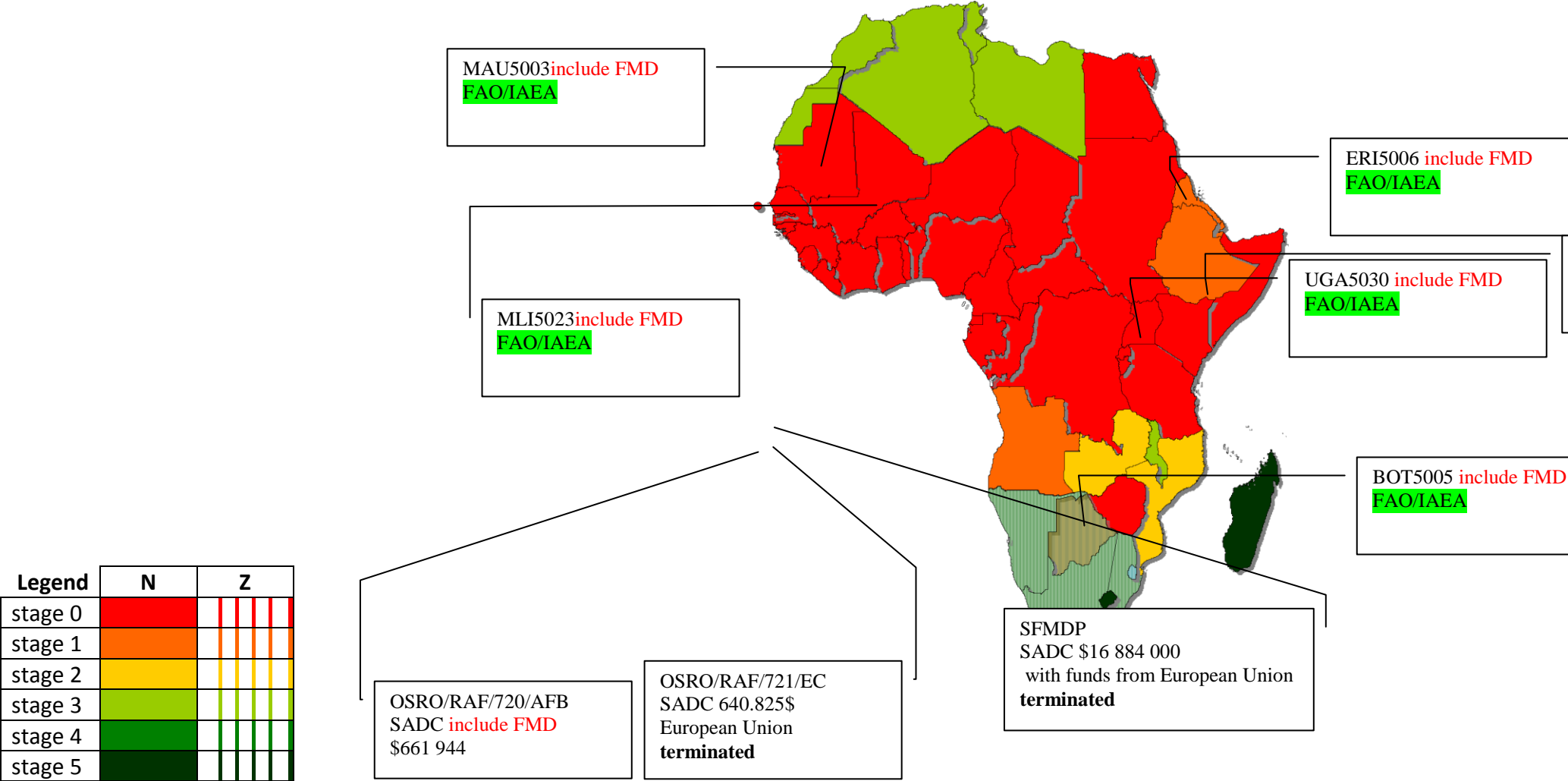
Projects including FMD among TADs



Main research activities supported in developing countries



Projects in Africa totally or partially dedicated to FMD



Legend	N	Z
stage 0	[Red]	[Red vertical stripes]
stage 1	[Orange]	[Orange vertical stripes]
stage 2	[Yellow]	[Yellow vertical stripes]
stage 3	[Light Green]	[Light Green vertical stripes]
stage 4	[Dark Green]	[Dark Green vertical stripes]
stage 5	[Dark Green]	[Dark Green vertical stripes]

Spanish Cooperation projects with third countries in the framework of FMD

Subdirección General de Sanidad de la Producción Primaria

GOBIERNO DE ESPAÑA MINISTERIO DE MEDIO AMBIENTE Y MEDIO RURAL Y MARINO

EUFMD. 80th Session of the Executive Committee
Vienna, 27-28th september

SPANISH COOPERATION PROJECTS WITH THIRD COUNTRIES IN THE FRAMEWORK OF FMD



Subdirección General de Sanidad de la Producción Primaria.
MARM

GOBIERNO DE ESPAÑA MINISTERIO DE MEDIO AMBIENTE Y MEDIO RURAL Y MARINO

Specific Projects in South America

Aquatic animals Health Programmes	South America-OIRSA
Technical Cooperation in Animal Health and Plant Health	South America-OIRSA
Prevention and Control strategies on Foot and Mouth Disease (2008-2011)	South America



GOBIERNO DE ESPAÑA MINISTERIO DE MEDIO AMBIENTE Y MEDIO RURAL Y MARINO

STRENGTHENING STRATEGIES AND POLICY FOR PREVENTION, CONTROL AND ERADICATION OF FOOT AND MOUTH DISEASE

- **Project aim:**
 - Improve capabilities of Veterinarian Services for prevention, control and eradication of FMD outbreaks
 - Reduce the negative impact in production and food security
- **Geographic location:** Perú, Bolivia, Ecuador, Colombia y Venezuela
- **Duration:** 2008-2011

GOBIERNO DE ESPAÑA MINISTERIO DE MEDIO AMBIENTE Y MEDIO RURAL Y MARINO

STRENGTHENING STRATEGIES AND POLICY FOR PREVENTION, CONTROL AND ERADICATION OF FOOT AND MOUTH DISEASE

- **Activities:** Training and awareness Campaigns, Workshops, improve notification and exchange of information
- Spanish funds and FAO is responsible of the development
- Synergy with other projects

GOBIERNO DE ESPAÑA MINISTERIO DE MEDIO AMBIENTE Y MEDIO RURAL Y MARINO

COOPERATION PROJECT IN ANIMAL AND PLANT HEALTH (MARM-OIRSA)

- **Project aim:**
 - Implementing Programmes to improve animal health and strength guaranties of products for exportation
- **Activities:**
 - Twinning Programmes, technical cooperation
 - Exchange and share scientific and technical information
 - **Geographical area:** México, Belice, Guatemala, El Salvador, Honduras, Nicaragua, Costa Rica, Panamá y República Dominicana

GOBIERNO DE ESPAÑA MINISTERIO DE MEDIO AMBIENTE Y MEDIO RURAL Y MARINO

MOROCCAN-SPANISH PROJECT DEVELOPMENT AN EPIDEMIOLOGICAL OBSERVATORY ON ANIMAL EMERGING INFECTIOUS DISEASES

- **Objectives:**
 - Adaptation the Surveillance Systems for detection of some emerging infectious diseases in animals
 - Reinforce capabilities of rapid actuations in the field in a crisis (outbreak).
- **Activities:**
 - Strengthening epidemiological surveillance and notification and information systems
 - Improving a rapid reaction of veterinary services: purchase of vehicles, equipment.
 - Improve laboratorial capability on diagnoses
 - Awareness programmes.
- **Geographic location:** Morocco

GOBIERNO DE ESPAÑA
MINISTERIO DE MEDIO AMBIENTE Y MEDIO RURAL Y MARINO


REMESA: MEDITERRANEAN ANIMAL HEALTH NETWORK (I)

- Objectives:**
 - Improve animal health in the Mediterranean Region, thus contributing to a better food security and public health
 - Build capacities for a better coordination and performance of animal health services in the prevention of transboundary animal diseases (TADs) and zoonoses control
- Activities:**
 - Regional coordination and performance for the diagnosis of TADs and zoonoses improving (RELABSA)
 - Cooperation for epidemiological control and surveillance for TADs and zoonoses (REPIVET)
 - Improve communication networks and information (RECOMSA)
 - Coordination, harmonisation and cooperation for animal health policy on TADs and zoonoses ensured.
 - Socio-economics issues in relation with animal health (RESEPSA)

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REMESA PROJECT: MEDITERRANEAN ANIMAL HEALTH NETWORK (II)

Geographic location and participant countries : Egipto, Mauritania, Marruecos, Túnez, Argelia y Libia. Italia, Francia, Portugal y España



RELABSA
Laboratorios

REPIVET
Epidemiología y Vigilancia

RECOMSA
Red de Comunicación y Información

RESEPSA
Socio-Economía

REMESA
CRSA-NA (FAO/OIE)

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Collaboration with OIE

- ✓ Development a multilingual terminological database in the framework of Animal Health
- ✓ Project for updating in Spanish the *Manual of Standards for Diagnostic Tests and Vaccines*, using the OIE- webpage

GOBIERNO DE ESPAÑA
MINISTERIO DE MEDIO AMBIENTE Y MEDIO RURAL Y MARINO

Thank you for your kind attention

**Report Mini-Executive Committee
EuFMD Commission -20th July 2010, Perm Rep Austria, Brussels**

Present: Ulrich Herzog (President, EuFMD Commission), Nigel Gibbens (Vice-President, EuFMD Commission), Alf-Eckbert Fuëssel (DG-SANCO), Keith Sumption (Secretary, EuFMD Commission), Nadia Rumich (EuFMD), David Paton (IAH Pirbright, by teleconference).

Summary

A meeting of the FMD surveillance projects subcommittee of the EuFMD Executive group met in Brussels to review eligibility of possible mini-projects referred to the Committee by the Secretariat. It was agreed that support for FMD networks which have the aim of improving threat identification in Eastern Africa and in West/Central Africa, were eligible for support and a revised project document was invited. The single country proposal (relating to Mali) was considered ineligible at this stage, as were other country specific proposals in the pipeline. It was considered that other funding sources should be first approached, including FAO, for single country proposals. It was agreed that where significant gaps in viral intelligence exist, the mechanism of supporting specific follow up through the networks should be first evaluated.

It was also agreed 1) that follow-up actions to ensure continuation of the Real-Time Training programme should be taken, recognising the support to the programme provided to date by Turkey, and 2) that the training needs of the Balkan region should be identified at the meeting 28th September in Vienna, and 3) that 2nd West Eurasia FMD Roadmap meeting should be held in Istanbul (December 1-3 2010).

1 African proximity surveillance -project proposals July 2010

Background

The 79th Executive Committee, meeting in Stockholm in March 2010, recommended that a subgroup of the Executive be delegated the task of identifying eligible support projects to address the gap in FMD virus intelligence information from sub-Saharan African countries. The Secretariat, as a result of the success of mini-projects in 2006-9, had received requests from various parties in 2009-2010. An overview (Annex 1) and 2 projects (Annexes 2-3) were presented for review. The WRL, as Secretariat of the Global OIE/FAO FMD Reference laboratories network, had been asked to review the projects against 5 criteria, and results were presented (Annex 4). The President GfTADS Steering committee for Africa had also written to his equivalent for Europe (Dr Van Goethem) requesting consideration of the case for support for improved FMD viral surveillance in Africa.

Discussion

Dr Paton provided a summary of the proposed projects; each addressed a highly significant gap in the coverage of intelligence reports, and linked well to the OIE/FAO ref lab Network and addressed information gaps important for European neighbourhood countries. The Mali proposal, although from a single country, should provide a window onto the entire FMD circulation in West Africa given the position of the country, and sampling points along borders with the sahel zone neighbours. The EuFMD officers considered that supporting intelligence gathering through networks of technical experts was eligible for support, but not, at this stage, specific country proposals. The country specific proposal (Mali) was considered very well prepared, strong technically, addressed a priority gap in intelligence, and on vaccine performance, but should first be addressed to donors /agencies for specific country support. The network support proposal, addressing issues of priority to European

MS, was considered to be within the EuFMD mandate and the Network support proposal links directly to the research group and to the WRL functions, both of which are currently supported by EuFMD. The network approach could at the same time reduce pressure on the WRL while increasing surveillance information, and raise technical capacity in both regions for earlier detection of new threats. The budget was considered modest, and given the importance, it was agreed that the document should be further developed, particularly since there could be a need for some of the additional sampling effort to be supported through activities of the networked labs, that may have otherwise occurred under specific country proposals. Further, the network proposals should give adequate attention to liaison between network leaders and European counterparts, requiring some travel support.

Dr Fuëssel indicated the importance of involving vaccine producers, including BVI Botswana, in future meetings of the networks. This was agreed; Keith Sumption indicated BVI usually self-funds their attendance to international meetings so this is likely to be at no cost.

It was also agreed that since the subgroup had been delegated with responsibility to decide on the programme of support, that there should not be a need to re-open the debate in the Executive Committee but to report to them the decisions and subsequent actions.

Conclusions/Actions

1. Secretariat should revise the FMD Networks support proposal, in the region of 100k per annum, thereafter proceed with formal request to EC for use of the Trust Fund.
2. Secretariat can begin planning of network related activities, presuming agreement will be reached within next couple months on the above proposal.
3. The Surveillance subgroup of the Executive Committee should be maintained in order to follow the progress of the Network approach and to identify if other or additional actions are needed to address significant gaps. This group may also take a role in the review of the WRL contract.
4. The progress of the Southern African FMD lab network (currently co-ordinated by FAO, Regional Animal Health Centre Gaborone) remains of importance, particularly for the work on SAT viruses. The current EuFMD support to this network is on SAT virus vaccine matching and the surveillance subgroup should keep track of progress, which will be reported at the Vienna Open and Closed RG Session.

2. Proposed Agenda for the Vienna EuFMD Executive

This was agreed without change.

Actions

CVO Spain to be invited as Observer to inform on international projects supported by Spain that relate to FMD. CVO Portugal to be invited as usual because of seat of Carlos Pinheiro.

3. Real-time training courses in Turkey after October 2010

The Secretary briefed the meeting on the viewpoint of Dr Askaroglu on ending the Real-time training courses after ETC9 in October 2010. Given the importance of these courses, it was agreed that Dr Herzog would invite Dr Pakdil for discussions on the way forward, before the Vienna Executive. The possibility that the FMD (SAP) Institute, Ankara, and the Erzurum laboratory become recognised as international FMD training centres was discussed. This development could also assist with training of Balkan region labs, as well as the field based training. Further support to the training centres, in the form of professional development of a FMD vet training assistant (Turkish) could be considered. A concept note giving options for training development after October should be prepared (Secretariat).

4. Status Review/continuation: requests to EC re: TransCaucasus, Egypt, Iran

The letter of Dr van Goethem to Dr Herzog (16th July 2010) confirmed the Trust Fund could be used and therefore the Secretariat can proceed to draw up agreements with the Governments concerned, and to implement those actions of critical nature that are essential for disease prevention.

5. Meetings: West Eurasia Roadmap meeting 2010 (Istanbul) -Budapest 2011, General Session

- i. Istanbul was preferred as a venue for the 2nd Roadmap meeting (not Antalya, Turkey); with potential dates of 1-3rd December.
- ii. Budapest meetings (Executive, FMD impacts and Balkan Forum) in first week of Feb 2011.
- iii. EuFMD General Session (Rome): 28-29th April 2011

6. Any Other business. None raised.

Annexes: as circulated 20th July.

Research Group Progress 2009 - 2010

A. Dekker, Senior Scientist, Laboratory Vesicular Diseases, Central Institute for Animal Disease Control, The Netherlands




W FMD Week 2010

Research group progress 2009 - 2010

A. Dekker


VIENNA, AUSTRIA • 27th SEPTEMBER - 1st OCTOBER



W Objectives set by Exec / general

- To continue the FMD genome sequencing and related epidemiology studies in Turkey/Iran
- To develop a procedure for decision on advising new antigens for (European and national) vaccine banks; **and endemic regions**
- To set up guidelines for sero-surveillance to meet objectives of Stages 1,2,3 of the progressive control pathway (PCP)
- To support validation of FMD spread models developed in various member countries to support their contingency plans
- The socio-economic evaluation of FMD control programmes
- Validation/guidance on pen-side and other diagnostic tests for FMD

FMD Week 2010



W Full length sequencing

- Part of the ERL / WRL contract

FMD Week 2010

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W New antigens for vaccine bank

- Meeting in Pibright on risk evaluation model – Mainly based on illegal trade

No simple solution

FMD Week 2010

VIENNA, AUSTRIA • 27th SEPTEMBER - 1st OCTOBER




W FMD surveillance

- Guidelines for stages of PCP finished
- More quantified information on NS prevalence is needed to set guidelines on the size of surveillance programmes

FMD Week 2010

VIENNA, AUSTRIA • 27th SEPTEMBER - 1st OCTOBER



W Validation transmission models

- Part of Disconvac project – First meeting was in Denmark in May
- Within EPIZONE project a workshop on analysis of animal experiments was organised with respect to quantification of transmission parameters
- Papers have been and are prepared within these projects on quantified estimates of transmission

FMD Week 2010

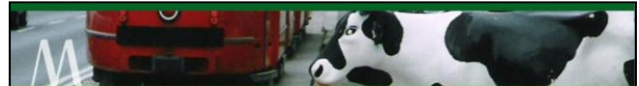
VIENNA, AUSTRIA • 27th SEPTEMBER - 1st OCTOBER



W The socio economic evaluation of FMD control programmes

- Mainly focussed on developed countries
- Evaluation of data from UK and the Netherlands
- Meeting in Bulgaria
- No economic expertise in RG

FMD Week 2010



W Validation of pen-side tests

- Information from real-time trainings has to be evaluated
 - Lesion age (estimated) vs. % pos

FMD Week 2010
VIENNA, AUSTRIA • 27TH SEPTEMBER - 1ST OCTOBER

THE European Commission for the control of Foot-and-Mouth Disease EXECUTIVE COMMITTEE
(ExC₈₀)
CONCEPT NOTE

1. Proposal prepared by: Research group members who are also members of the GFRA Executive
2. Short description of the background to issue or situation

Title of project: Improved co-ordination between EuFMD Research Group and activities of the GFRA (Global FMD Research Alliance).

Background information

Foot-and-mouth disease (FMD) remains a threat to agriculture and human prosperity worldwide. Currently, sophisticated global networks of reference laboratories exist to track the emergence and spread of FMD viruses. Based on this intelligence control measures are tailored to local needs.

Improved control measures for FMD in the future will depend on the development of new tools derived from basic research programmes. The efficient development of product streams to meet the needs of control programmes will require co-ordination of these research efforts to ensure the most important gaps in our control strategies are being addressed and duplication avoided. Considerable effort has been made in recent years by the Global Foot-and-mouth disease Research Alliance (GFRA) to raise the profile of FMD basic research and co-ordinate research programmes. The alliance has grown significantly over the last two years and there are now over 20 partners. The success in attracting funding and raising awareness of the need to coordinate research programmes means a role for a dedicated co-ordinator is needed and can be defined.

This Concept Note arose following the 79th Executive Committee of the EuFMD at which it was agreed that EuFMD should identify activities being undertaken in FMD by international partners, including research activities.

Better co-ordination between the Research group and the GFRA could streamline testing/validation of new tools, reduce the costs of development, and bring earlier access to information that will affect uptake into control programmes.

3. Key bottlenecks/issues addressed

Current gaps, duplications and slow pace of R&D as a result of lack of information, resources, and co-ordination. This affects European NRLs as well as Global Partners. EuFMD/Europe could gain earlier access to new technologies to be validated for use in our region as well as enable their validation in FMD endemic setting.

4. Proposed action

Secretariat and co-ordination support to guarantee following minimum actions:

- Catalogue FMD research activities and current funding and circulate the information, with regular updates (including 1-2 per year to EuFMD Sessions), to various bodies involved in funding research and managing control programmes.
- Communicate opportunities to collaborate on FMD research projects worldwide.
- Support the organization of GFRA meetings, symposia and workshop, and ensure European NRLs are aware and participate.
- The preparation and distribution of the GFRA quarterly newsletter for circulation to the global FMD research community, funding bodies, potential sponsors and lay audience.

- Support the maintenance and development of the GFRA website (to be used as a communication tools for the FMD research community), including a comprehensive list of FMD scientists and experts, their affiliation, and location.
- Yearly GFRA activity report for GFRA Members, EUFMD, EU, FAO, OIE

Duration:

October 2010 to October 2011 with possible extension based on progress report of year 1 and Action Plan for year 2.

5. Budget estimate:

Requirements.

A member of staff for 2 days per week, 40% full time equivalent position.

Office space

Office consumables

Access to a computer, internet and e-mail and international telephone.

Budget Estimate:

Personnel	40.000 US\$
person-months on project	12m on 40% basis
Consumables	1.200 US\$
Travel	3.600 US\$
Equipment	2.400 US\$

6. What to recommend

7. Further information on the matter

Project partners:

GFRA Presidency

GFRA Members of the GFRA Executive

EUFMD Secretariat and RG Members who are also members of the GFRA Executive.