

Recommendations

**of
Conferences of OIE Regional Commissions
organised since 1st June 2003**

**Endorsed by the International Committee
of the OIE on 27 May 2004**

**7th Conference
of the
OIE Regional Commission for the Middle East
Istanbul (Turkey), 23-26 September 2003**

- Recommendation No. 1: Emergency preparedness: formulation and implementation of animal health contingency plans in the Middle East
- Recommendation No. 2: Transmissible encephalopathies of animals with reference to public health and trade in the Middle East
- Recommendation No. 3: The global rinderpest eradication programme

Recommendation No. 1

Emergency preparedness: formulation and implementation of animal health contingency plans in the Middle East

CONSIDERING THAT

Transboundary animal diseases (TADs) and other priority diseases are of significant economic, social and food security importance,

TADs and other priority diseases can spread very rapidly and their control requires advance planning,

Their eradication can be extremely difficult and costly,

Animal disease emergency preparedness and particularly contingency planning should be regarded as an essential tool for the control of emergency diseases,

Due to its geographical location, the Middle East is under continuous risk of high priority animal diseases from neighbouring regions,

THE OIE REGIONAL COMMISSION FOR THE MIDDLE EAST

RECOMMENDS THAT

1. Each Member Country in the Regional Commission for the Middle East prepare its contingency plans according to the real situation and capabilities and renew them upon the results of specific risk analysis.
2. The OIE, mainly through the Regional Representation for the Middle East and in cooperation with the FAO and other relevant international and regional organisations, develop training courses for designing contingency plans, provide technical support and coordination to Member Countries of the OIE Regional Commission for the Middle East in this field of activities.
3. Contingency plan models be discussed, in particular by the Regional Emergency Veterinary Committee (REVC), and disseminated for consideration to Member Countries.
4. Member Countries update their legislations to facilitate the execution of contingency plans and cooperate with other interested authorities in the country.

(Adopted by the OIE Regional Commission for the Middle East on 26 September 2003 and endorsed by the International Committee of the OIE on 27 May 2004)

Recommendation No. 2

**Transmissible encephalopathies of animals with reference to public health
and trade in the Middle East**

CONSIDERING THAT

Transmissible spongiform encephalopathies (TSEs) of animals are an international issue of concern due to their public and animal health importance,

Bovines, bovine products and by-products potentially carrying the bovine spongiform encephalopathy (BSE) agent have been traded world-wide, giving this risk a global dimension,

BSE has caused panic amongst the consumers and severe disruption of international trade in animals and animal products,

The original source and movement of animals and animal products, including meat and bone meal (MBM), can be masked by international trading patterns, which often include the processing and re-exportation of products,

The World Organisation for Animal Health (OIE), World Health Organization (WHO) and the Food and Agriculture Organization of the United Nations (FAO) encourage all countries to evaluate their potential exposure to TSEs through systematic assessment of trade data and possible other risk factors to protect public health and prevent further national and international dissemination of infection amongst susceptible species,

The OIE has developed standards and guidelines to help Member Countries to assess and evaluate the BSE status of countries and zones, and to avoid introduction of infected sources through international trade.

THE OIE REGIONAL COMMISSION FOR THE MIDDLE EAST

RECOMMENDS THAT

1. Additional resources be made available to the Veterinary Services of Member Countries to assess in depth their potential exposure to BSE risk according to the OIE standards and guidelines.
2. Member Countries consolidate their efforts to develop a regional programme for the surveillance and control of TSEs.
3. The proposed regional programme include the following items:
 - a) The establishment of a Reference Laboratory for the diagnosis of BSE and other TSEs.
 - b) Training of national veterinary laboratory personnel of Member Countries on the diagnostic techniques of TSEs and detection of animal proteins in feedstuffs.

- c) Training of veterinarians from Member Countries in conducting risk analysis, assessment and management.
 - d) Formulation and implementation of a Regional Surveillance Plan and preparation of contingency plans for Member Countries to deal with any BSE risk problem that may arise.
 - e) Developing more effective education programmes on TSEs for veterinarians, and paraprofessionals.
 - f) Supporting regional research related to TSEs and BSE in particular.
 - g) Establishment of a regional network for TSEs data and importation records.
 - h) Development of a harmonised veterinary certificate for regional exchanges of relevant animals and animal products in compliance with international guidelines.
4. Member Countries effectively work for the establishment of a 'Regionally-orientated Animal Identification System' that is appropriate to the specific husbandry systems common in the region and economically feasible.
 5. Regional consensus be reached on dealing with the rendering industry, mainly for labelling requirements and monitoring their use for non-ruminant animals.
 6. Member Countries promote intersectoral collaboration between veterinary authorities and public health services. This collaboration will include the strict application of BSE control measures for food safety.
 7. The OIE convince the international community, the relevant international organisations and donors to take the necessary steps to strengthen research programmes in clarifying and resolving issues associated with BSE, in particular the nature of the causative agent, the way and mechanism of transmission and the pathological effect in animals.
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(Adopted by the OIE Regional Commission for the Middle East on 26 September 2003 and endorsed by the International Committee of the OIE on 27 May 2004)

Recommendation No. 3

The global rinderpest eradication programme

CONSIDERING THAT

Until recently, rinderpest seriously affected the lives of livestock farmers in the region and its legacy continues to disrupt trade in animals,

Very significant progress has been made in eradication of rinderpest through the concerted efforts of Member Countries,

Despite almost certainly being free from rinderpest many countries of the region have not entered on the OIE pathway by which accreditation of rinderpest freedom will be achieved,

THE OIE REGIONAL COMMISSION FOR THE MIDDLE EAST

RECOMMENDS THAT

1. Member Countries renew their commitment to the global eradication of rinderpest by the year 2010.
2. Each country enter into, and follow the OIE Pathway to achieve accreditation of rinderpest freedom as quickly as possible.
3. Member Countries view the persistence of a residual focus of rinderpest in Africa as a matter of grave concern and seize every opportunity to press for its final eradication.
4. The OIE in relation with FAO/GREP consider the review of the Animal Health Code Chapter for rinderpest to ensure that its conditions fully take into account the special case of mild rinderpest as currently experienced.

(Adopted by the OIE Regional Commission for the Middle East on 26 September 2003 and endorsed by the International Committee of the OIE on 27 May 2004)

**23rd Conference
of the
OIE Regional Commission for Asia, the Far East and Oceania
Noumea (New Caledonia), 25-28 November 2003**

- Recommendation No. 1: Animal carcass disposal methods (including rendering) in animal disease outbreaks
- Recommendation No. 2: Update on developments in aquatic animal diseases
- Recommendation No. 3: Rabies control and prevention in Asia and the Pacific

Recommendation No. 1

Animal carcass disposal methods (including rendering) in animal disease outbreaks

CONSIDERING THAT

Stamping-out is a frequently used method of animal disease eradication,

Animal disposal is an integral part of the stamping-out process to stop the spread of disease,

Animal carcass disposal technologies vary in their effectiveness of pathogen inactivation and in their potential impact on the environment,

There is a growing trend of negative public reaction to mass animal slaughter and to some methods of carcass disposal, and towards demanding alternatives,

Animal production is increasingly producing greater numbers of livestock on small geographic areas, potentially producing large numbers of carcasses for disposal in a disease outbreak,

Most methods of animal carcass disposal create a massive waste of animal protein,

THE OIE REGIONAL COMMISSION FOR ASIA, THE FAR EAST AND OCEANIA

RECOMMENDS THAT

1. Veterinary administrations evaluate the parameters of animal disposal options in preparation for making a decision on the most suitable technology for their circumstances.
2. Veterinary administrations pay special attention to the appropriateness of specific technologies for the disposal of prion infected carcasses.
3. Veterinary administrations place more emphasis on developing alternative approaches for animal carcass disposal.
4. Veterinary administrations consider the logistical requirements for the rapid disposal of large numbers of carcasses and focus attention on high density livestock production areas within their own countries.
5. Veterinary administrations review and resolve any complexities and conflicts in jurisdiction and regulations.

6. The OIE Regional Representation for Asia and the Pacific consider guiding assistance to specific Member Countries for training in technical and financial preparedness for mass animal disposal.
 7. Veterinary administrations establish an animal disease crisis management framework that includes key government and industry organisations in advance of a disease outbreak.
 8. Veterinary administrations establish communication linkages with the public and the media in advance of a disease outbreak.
 9. Veterinary administrations consider developing capability in more environmentally responsible carcass disposal technology and if possible technology that is mobile.
 10. The OIE Regional Representation consider aiding Member Countries in the development and implementation of emergency plans and simulation exercises to test technical and logistical preparedness for animal carcass disposal.
 11. The OIE investigate whether animal carcass disposal at sea is a legitimate option taking into consideration international laws and conventions of the sea.
 12. Veterinary administrations consider when appropriate predictive and prevention policies, as well as treatment or vaccination alternatives to stamping out.
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(Adopted by the OIE Regional Commission for Asia, the Far East and Oceania on 28 November 2003
and endorsed by the International Committee of the OIE on 27 May 2004)

Recommendation No. 2

Update on developments in aquatic animal diseases

CONSIDERING THAT

Aquaculture has been growing rapidly in many countries in the region and is predicted to continue to grow in all Member Countries,

There has not been a matching expansion of a supporting aquatic animal health infrastructure, and the aquatic animal sector in the region is currently not as well provided with diagnostic and professional health services as the livestock sector. Member Countries see an increasing role for health professionals (veterinarians and others) in their country,

In some Member Countries, fisheries authorities have either the sole responsibility for aquatic animal health or share it with the Veterinary Services. In these countries, fisheries authorities would take the lead in mounting an emergency response to an aquatic animal disease outbreak, and the Veterinary Services are usually well experienced in managing terrestrial animal emergency disease outbreaks, but there is infrequent contact between the two,

In many Member Countries, draft texts for the *Aquatic Code* and the *Aquatic Manual* reach aquatic animal health experts either too late or not at all, resulting in few official comments. This means that Member Countries do not sufficiently use the opportunity to influence the setting of international standards that underpin international trade,

Fundamental changes to the *Aquatic Code* and *Aquatic Manual* have been adopted in 2003. These include the listing of aquatic animal diseases and the requirements for reporting on the status of listed diseases. It is important that Member Countries fully understand these new arrangements and accept and fulfil their obligations on disease reporting,

Most Member Countries provide annual and quarterly aquatic animal disease reports, but there are numerous reporting errors such as the use of inappropriate symbols; the provision of conflicting information to the OIE's Tokyo Office and to the Central Bureau; and not reporting new disease occurrences that would be of major epidemiological significance to other countries in the region,

The OIE continues to engage in regional aquatic animal health initiatives, together with the FAO and NACA, but enhanced involvement of both veterinary and fisheries authorities within Member Countries is required to achieve the desired outcomes in areas such as improving Member Countries' knowledge of OIE standard-setting activities in the field of aquatic animal health and the transparency of epidemiological reporting.

THE REGIONAL COMMISSION FOR ASIA, THE FAR EAST AND OCEANIA

RECOMMENDS:

A) THAT THE OIE:

1. Reinforce to Delegates their responsibility to the OIE for terrestrial as well as aquatic animals.
2. Encourage Member Countries to strengthen veterinary and other tertiary education in aquatic animal health.
3. Request Member Countries to clarify the roles and responsibilities for aquatic animal health assigned to veterinary and other authorities in their country.
4. Provide opportunities to assist cooperation between veterinary and other authorities responsible for aquatic animal health in Member Countries, for example, by inviting other authorities to attend OIE-sponsored conferences/workshops that have an aquatic theme.
5. Direct efforts at increasing general awareness with national Delegates world-wide about, for example, the provisions of the *Aquatic Code* and *Aquatic Manual*.
6. Request the Aquatic Animal Commission to provide regular updates of the *Aquatic Code* and *Aquatic Manual* at Regional Commission Conferences or other suitable venues.
7. Direct efforts at obtaining more comments on draft texts for the Aquatic Code and Aquatic Manual from a larger number of national Delegates, for example, consider from the Delegates of Member Countries the nomination of an 'aquatic national focal point' as a parallel recipient of Aquatic Animal Commission reports on behalf of national Delegates.
8. Provide Member Countries with the necessary assistance and guidance on accurate, timely and effective aquatic animal disease reporting.
9. Continue to cooperate with relevant international and regional organisations to increase awareness about aquatic animal health in the region, to improve disease reporting and to foster cooperation between veterinary and fisheries authorities within countries.

B) THAT THE MEMBER COUNTRIES:

1. Direct efforts at improving the coverage of the aquatic sectors with health services and strengthen veterinary and other tertiary education in aquatic animal health.
2. Clarify the roles and responsibilities for aquatic animal health assigned to veterinary and other authorities in their country.
3. Request their Veterinary Services to improve the communication and cooperation with fishery authorities, especially regarding disease reporting and disease emergency responses.

4. Where primary responsibility for aquatic animal health rests with an authority other than the Veterinary Services, nominate an 'aquatic national focal point' from the other authority, so that the OIE may circulate Aquatic Animal Commission reports to the 'aquatic national focal point' at the same time as when circulating to national Delegates (providing comments back to the OIE must take place through, and with the endorsement of, the national Delegate to the OIE).
 5. Significantly enhance circulation of draft texts for the *Aquatic Code* and *Aquatic Manual* amongst experts, and provide comments through the national Delegate to the OIE.
 6. Significantly improve the quality of aquatic animal disease reports, and request the OIE's assistance where clarification is needed.
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(Adopted by the OIE Regional Commission for Asia, the Far East and Oceania on 28 November 2003
and endorsed by the International Committee of the OIE on 27 May 2004)

Recommendation No. 3

Rabies control and prevention in Asia and the Pacific

CONSIDERING

That rabies is a re-emerging disease globally, and that over half the estimated global number of human rabies deaths occur in Asia (36,000 deaths of which 50% are children),

The importance of animal rabies, particularly dog rabies, is a constant risk to human health and a potential threat to all rabies free countries of the region,

That canine rabies has been spreading to areas in the region particularly islands that were historically free from rabies,

The most cost-effective means of eradicating rabies requires the control of dogs and dog vaccination,

The necessity of intersectorial collaboration between public health and veterinary sectors in order to develop integrated strategies for effective prevention and control of animal and human rabies infection,

The agreement of WHO authorities to develop joint recommendations with the OIE in the field of rabies,

THE OIE REGIONAL COMMISSION FOR ASIA, THE FAR EAST AND OCEANIA

RECOMMENDS THAT

1. A joint international conference be organised by the OIE and WHO to establish the technical basis for the eventual official recognition and maintenance of rabies freedom (including provisional freedom) in countries or zones.
2. All countries/zones in the region ensure they have adequate controls to minimize the risk of introducing rabies, particularly canine rabies.
3. The Veterinary Services of rabies infected countries of the region initiate or enhance activities for the control and elimination of rabies, particularly canine rabies, and liaise with counterparts in the Ministry of Health to assist them to better target the application of human rabies post-exposure treatments because of its limited supply and high cost.
4. Member Countries enhance collaboration with the OIE, WHO and other international organisations to develop effective integrated strategies for the control and eventual elimination of rabies in the region.

5. Member Countries collaborate in their efforts to mobilise financial and human resources to strengthen national and regional systems for surveillance, organized mass dog vaccination and dog population control and increased public awareness to ensure effective control and prevention measures.
 6. The OIE and WHO provide technical support to enhance national, regional and international animal and human surveillance and public health interventions, and update and standardise guidelines for the control of animal and human rabies and ensure maintenance of rabies-free countries and zones in the region.
 7. The OIE and WHO mobilise and sustain international efforts and funding to control and, where possible, eradicate rabies.
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(Adopted by the OIE Regional Commission for Asia, the Far East and Oceania on 28 November 2003
and endorsed by the International Committee of the OIE on 27 May 2004)