



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

Paris, 12-16 February 2018

A meeting of the OIE Scientific Commission for Animal Diseases (the Commission) was held at the OIE Headquarters in Paris, France, from 12 to 16 February 2018.

Dr Monique Eloit, Director General of the OIE, welcomed and thanked the Commission for its work during the past three years and its continuous support to the OIE activities.

Dr Eloit informed the Commission on the progress made on the procedure for the election of the members of the Specialist Commissions, in line with Resolution No.11 adopted in 2015. At its forthcoming meeting during the last week of February 2018, the OIE Council will consider the findings of the evaluation team and will identify the suitable candidates to be presented for election during the OIE General Session in May 2018.

Dr Eloit updated the Commission on the OIE Observatory project aiming at collecting information on the most frequent problems encountered by Members or stakeholders when implementing OIE standards. The outcome of the project would help the OIE to better structure and design the capacity building programmes (*e.g.* focal point training) and to improve the implementation of OIE standards. The Commission noted that one of the technical items at the General Session would be dedicated to the OIE standards and their implementation.

Dr Eloit informed the Commission on the ongoing work to define the next OIE Strategic Plan which would include activities to better define OIE standards and guidelines. The next Strategic Plan would also consider the availability of resources, including OIE staff, OIE experts and Specialist Commission members.

Dr Brückner, president of the Commission, welcomed the other members of the Commission and acknowledged with appreciation the support received from the OIE for the work of the Commission. He commended the OIE initiatives toward promoting a better implementation of standards, as a key element to ensure safe trade of animals and animal products.

Dr Brückner highlighted that the number of *Terrestrial Code* chapters to be assessed increase at each Commission meeting, and proposed that, when Members request for elaborating a new *Terrestrial Code* chapter or for amending an existing chapter, a joint meeting of the Scientific Commission and of the Code Commission should be held to consider the rationale, need and priority to either amend or develop a chapter. He summarised the most critical aspects in the proposed agenda and outlined the priority issues and the work plan for the week.

1. Adoption of the agenda and appointment of rapporteur

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

2. Terrestrial Animal Health Code

2.1. Member Country comments received for consideration by the Commission

a) Glossary

The Commission considered the proposal from a Member to add to the glossary definitions for semen collection, embryo collection (*in vivo*), oocyte collection (individual), and oocyte collection (batch), and agreed on the proposal since it would provide more clarity to the *Terrestrial Code*.

The Commission considered the comments received from Members on the definitions of “Disease”, “Compartment”, “Infected zone”, “Vaccination”, and “Early warning”, as follows:

Disease: The Commission agreed with a Member comment to maintain the definition of “Disease” albeit in an amended version proposed by the Member. The Commission considered that retaining the definition would facilitate the distinction between animals infected and showing clinical signs and those infected without showing clinical signs, thus avoiding ambiguities in the interpretation of the standards.

Compartment: The Commission disagreed with a Member proposal to amend the definition. The Commission clarified that the separation of a population with a specific animal health status was one of the basic principles of the concept of compartmentalisation and it should be mentioned in the definition.

Infected zone: The Commission noted that, when necessary, disease-specific chapters provided the definition of infected zone for a particular disease. The proposed definition would apply to those chapters where an infected zone is not defined.

Vaccination: The Commission disagreed with some Member comments to refer to “appropriate” vaccine in the definition, since the definition already referred to the purpose of vaccination and to compliance with the *Terrestrial Manual*.

Early warning: The Commission disagreed with some Member comment on the definition for “Early Warning System” proposed by the *ad hoc* Group on Surveillance. The Commission considered that the concept of characterisation was already included in the concept of identification. Similarly, the reference to reporting also implied communication with stakeholders, the general public as well as with the Veterinary Authority.

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

b) Chapter 1.4 Animal health surveillance

The Commission discussed the Member comments on the amended chapter that was circulated for the second time after the September 2017 Specialist Commission meetings with the intention to be presented for adoption at the General Session in May 2018.

The Commission acknowledged that many comments were received on this chapter, some of which proposed a slightly different structure and terminology, based on Hoinville *et al.* (2013).¹

The Commission also consulted the chair of the *ad hoc* Group on the Members comments concerning both the structure and the content of the chapter. Following his feedback, the Commission agreed that the chapter could be restructured according to one Member suggestion, as this would improve the clarity of the chapter.

¹ L.J. Hoinville, L. Alban, J.A. Drewe, J.C. Gibbens, L. Gustafson, B. Häslar, C. Saegerman, M. Salman, K.D.C. Stärk (2013). *Prev Vet Med.*, **112**(1-2): 1–12.

The Commission pointed out that the presence of disease in wildlife does not necessarily imply infection in the domestic population. Nevertheless, the Veterinary Authority should have current knowledge of, and authority over, all susceptible wildlife species in the country or zone and current knowledge of the distribution, habitat, and indication of disease occurrence through passive surveillance. Therefore, intensive resource-demanding active surveillance is not always indicated.

The Commission recognised that surveillance aiming at detecting disease or disease pathogen transmission in a vaccinated population may present challenges that would require tailored surveillance activities. However, the technical difficulties should not preclude Members to obtain the expected outputs if the surveillance system is designed and implemented according to the recommendations of the amended chapter.

The detailed rationale for the Commission's proposed amendments is attached as [Annex 3](#).

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

c) **Chapter 4.3. Zoning and compartmentalisation**

The Commission extensively discussed and addressed Member comments received on the amended chapter that was circulated for the second time after the Specialist Commissions meetings in September 2017 with the intention to be proposed for adoption at the 86th General Session in May 2018.

The Commission discussed extensively the newly proposed concept of a Temporary Protection Zone (TPZ) in response to an increased risk of disease incursion. The Commission acknowledged that the TPZ proposal circulated for Member comments largely differed from the original concept of Temporary Preventive Zone proposed by the FMD *ad hoc* Group (*cf* Report of the meeting of the Scientific Commission for Animal Diseases, September 2016, Annex 9) and supported by the Commission. The Commission highlighted that the original proposal included a comprehensive description and rationale on the development of such concept that, when considered, would address the majority of the concerns expressed by Members. The Commission noted that most of the Members' comments, while requesting further elaboration of the concept, supported its introduction in Chapter 4.3. The Commission also stressed that the concept was initially drafted in response to several Members' requests. The Commission considered the importance of presenting the amended *Terrestrial Code* Chapter 4.3. for adoption during the next General Session and concluded that the inclusion of the concept of TPZ should not preclude the presentation of the amended chapter for adoption. The Commission, therefore, supported that Chapter 4.3. be presented for adoption while the TPZ concept would be kept under study, and recommended that the initial draft concept and rationale be circulated for Member comments.

The Commission confirmed its previous position on the agreement for a country to implement more than one containment zones, when it is justified from the epidemiological, geographical or the disease management point of view.

The Commission disagreed with one Member comment asking to add an explanatory diagram to better guide Members in the implementation of zoning and compartmentalisation. The Commission noted that it was a consensus decision with other Specialist Commissions to remove explanatory diagrams from the *Terrestrial Code*.

The Commission considered some Member comments on the need to refer to legal boundaries when implementing regionalisation. The Commission, while stressing the responsibility of Members to enforce and demonstrate the efficacy of the control measures in the defined zone, concluded that it would not be always necessary or possible to refer to legal boundaries.

The detailed rationale for the Commission's proposed amendments is attached as [Annex 4](#).

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

d) Draft Chapter 4.X. Vaccination

The drafting of Chapter 4.X. was initiated in 2015. The Commission reviewed the Member comments on the draft chapter that was circulated for the third time after its September 2017 meeting with the intention to be proposed for adoption at the 86th General Session in May 2018.

The detailed rationale for the Commission's proposed amendments is attached as [Annex 5](#).

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

e) Draft Chapter 4.Y. Management of outbreaks of listed diseases

The Commission addressed the Member comments received on the amended chapter that was circulated for the second time after the Specialist Commissions meetings in September 2017.

The Commission noted that the title of the draft chapter was modified during the September 2017 meeting of the Code Commission. Despite some amendments introduced in the content, the Commission noted that it did not fully reflect the title, and was still focused on disease eradication and outbreak management. Therefore, some of the recommendations may be considered too prescriptive in certain circumstances when the aim of the programme is not eradication but control.

The Commission recommended that some of the sections be reviewed to ensure appropriate recommendations are provided to Members on the implementation of official control of emerging and listed diseases.

The detailed rationale for the Commission's proposed amendments is attached as [Annex 6](#).

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

f) Chapter 8.3. Infection with bluetongue virus

The Commission addressed the Member comments received on the amended chapter that was circulated for the second time after the Specialist Commissions meetings in September 2017 with the intention to be proposed for adoption at the 86th General Session in May 2018.

The Commission agreed with the principle expressed by one Member concerning the need for a better definition for the collection of semen, oocyte and embryo, and referred to the Commission proposal to add appropriate definitions in the Glossary. If this modification would be accepted, this chapter and other disease specific chapters should be modified accordingly.

The Commission discussed the concerns expressed by some Members on the sustainability and scientific justification for the criteria used to determine the cut-off points for the commencement and ending of a seasonally free period. While agreeing that vectors might be present during winter, the Commission highlighted that this did not necessarily imply that they were capable of replicating and transmitting the virus. The Commission encouraged further scientific investigation on the matter, as to provide evidence supporting the decision whether or not to amend the chapter. The Commission proposed that the OIE perform a literature review, and use it as a basis for consultation with the OIE Reference Laboratories on the matter. Should evidence suggest that a seasonal freedom period be no longer considered, such changes might apply to this and other vector-borne disease *Terrestrial Code* chapters.

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

g) Draft Chapter 8.X. Infection with *Trypanosoma evansi* (non equine surra) and Chapter 12.3. Infection with Trypanozoon in equids

The Commission addressed the Member comments received on the amended chapters that were circulated after the Specialist Commissions meetings in September 2017.

The Commission noted some Members were not in agreement with the suggested scope and approach of the *Terrestrial Code* Trypanosomoses-related chapters. The Commission consulted with the Code Commission on how best to address the Trypanosomoses disease complex in the *Terrestrial Code*. Both Commissions agreed to conduct a revision of the approach of the Trypanosomoses-related chapters following the recommendations of the subject-matter experts.

The Commission noted that a new *ad hoc* Group would be convened in March 2018 on animal African Trypanosomoses (see section 3.2.a.). The Commission suggested putting the modification of the *Terrestrial Code* draft Chapter 8.X. and Chapter 12.3. on hold and to ask the experts to re-evaluate the best approach forward to address diseases of the Trypanosomoses disease complex in the *Terrestrial Code*.

The Commission would consider the Member comments on the *Terrestrial Code* Chapter 8.X and 12.3. at its September meeting, after receiving the opinion of the *ad hoc* Group on animal African Trypanosomoses and following discussions with the Code Commission on the way forward.

h) Chapter 8.15.2. Infection with rinderpest virus (Article 8.15.2.)

The Commission addressed the Member comments received on the amended article that was circulated for second time after the Specialist Commissions meetings in September 2017 with the intention to be proposed for adoption at the 86th General Session in May 2018.

A Member proposed including pathological material from infected animals in the definition of rinderpest virus (RPV) containing material. The Commission, following a proposal by the Biological Standards Commission, agreed that pathological material should not be considered RPV-containing material until a diagnostic test confirms that it is positive for RPV. The Commission proposed that the word 'pathological material' should not be in italics in the text, since the amendment would make it differ from the definition of pathological material included in the Glossary.

The Commission suggested amending the questionnaire that Rinderpest Holding Facilities have to submit annually to the OIE accordingly.

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

i) Chapter 11.12. on infection with *Theileria annulata*, *T. orientalis* and *T. parva* and Chapter 14.X. Infection with *Theileria lestoquardi*, *T. luwenshuni* and *T. uilenbergi*

The Commission addressed the Member comments received on the new chapters that were circulated for the first time after the Specialist Commissions meetings in September 2017.

The Commission noted the comments received from two Members, who questioned the inclusion of *T. orientalis* in the chapter, stating that several criteria in Article 1.2.2 were not met. The Members presented data supporting this position, which added to the scientific information provided by one of these Members when requested the OIE to convene the *ad hoc* Group on Theileriosis. The Commission during its meeting in September 2017, supported the conclusions of the assessment conducted by the experts of the *ad hoc* Group, proposing to add *T. orientalis Ikeda* and *T. orientalis Chitose* in Chapter 11.12.

The Commission disagreed with the suggestions from one Member to consider *T. orientalis*, without specifying the genotypes, as only *T. orientalis Ikeda* and *T. orientalis Chitose* satisfied the listing criteria according to the rationale provided by the *ad hoc* Group.

Some Members questioned also whether *Theileria lestoquardi*, *T. luwenshuni* and *T. uilenbergi* infection of small ruminants meet the criteria for the inclusion in the OIE list. The Commission, referred to the outcomes of the *ad hoc* Group on theileriosis, where it was indicated that these pathogens were positively assessed against the criteria of Article 1.2., and should be listed. The Commission also noted that the rationale for drafting a specific *Terrestrial Code* chapter for these three pathogens was provided in the Code Commission report of September 2017. The Commission supported the request of a Member not to develop a specific chapter for these pathogens as they were not yet included in the *Terrestrial Code* Chapter 1.3.

In response to some Member comments about the difficulties in demonstrating the total absence of ticks in a country or zone for a period of two years, the Commission confirmed that only the absence of a “competent” tick vector should be considered. Reference was made to the bluetongue *Terrestrial Code* chapter, where a similar wording was used. The Commission proposed adding the word “competent”, as is the case in the bluetongue chapter.

The Commission disagreed with one Member comment about removing Articles 11.12.6. and 11.12.7., and to consider hides, skins and trophies as safe commodities. The Commission noted that for other tick-borne diseases (heartwater, bovine anaplasmosis, and bovine babesiosis) no special requirement for the trade of these commodities were provided, neither considered as safe commodities when those chapters were adopted. The Commission concluded that treated skins and hides might qualify as safe commodities, but that would not be the case in untreated commodities as they might still contain infected ticks and pose a risk.

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

j) Chapter 12.10. Infection with *Burkholderia mallei* (Glanders)

The Commission addressed the Member comments received on the new chapter that was circulated after the Specialist Commissions meetings in September 2017 with the intention to be proposed for adoption at the 86th General Session in May 2018.

The detailed rationale for the Commission’s proposed amendments is attached as [Annex 7](#).

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

k) Chapter 15.1. Infection with African swine fever (ASF) virus

The Commission addressed the Member comments received on the revised chapter that was circulated for the first time after the Specialist Commissions meetings in September 2017 with the intention to be proposed for adoption at the 86th General Session in May 2018.

The Commission discussed the Member comments received on safe commodities, criteria for the determination of the ASF status of a country, zone or compartment, and inactivation of ASFV virus in swill and meat.

The Commission agreed with Members that were opposed to the deletion of the provision of Article 15.1.2. indicating that commodities of domestic or captive wild pigs could be traded safely from countries notifying infection with ASFV in wild or feral pigs or African wild suids, provided that the Members would be in compliance with Point 7 of Article 15.1.2. The Commission was of the opinion that the provision clarified the scope of the chapter, and should be kept. However, it was agreed that it could be moved to a different article. The same rationale should be applied to the revision of the *Terrestrial Code* Chapter 15.2. on classical swine fever.

The detailed rationale for the Commission's proposed amendments is attached as [Annex 8](#).

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

2.2. Other considerations

a) Update on Members' comments on status recognition/endorsement of control programmes questionnaires and introductory articles in Chapter 1.6.

The Commission considered the amendments proposed by the OIE Headquarters to Chapter 1.6. of the *Terrestrial Code* Articles to clarify and differentiate the two services proposed by the OIE: i) the publication of self-declaration of disease freedom and ii) the official recognition of disease status and endorsement of official control programmes.

The Commission was informed that the questionnaires that were currently part of Chapter 1.6. of the *Terrestrial Code* chapter were further improved by the OIE Headquarters in collaboration with the Code Commission and would be proposed as subsequent chapters to Chapter 1.6. for possible adoption at forthcoming General Session in May 2018 (*cf* Report of the Joint meeting, Annex 20).

The Commission proposed some modifications and forwarded Chapter 1.6. to the Code Commission for its consideration.

3. Ad hoc and Working Groups

3.1. Meeting reports for endorsement

a) Ad hoc Group on the evaluation of AHS status: 17 October 2017 (electronic consultation)

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

The Commission considered the recommendation of the *ad hoc* Group regarding the application submitted by a Member and concluded that the application did not meet the requirements of the *Terrestrial Code*. The dossier was referred back to the applicant Member.

The endorsed report of the *ad hoc* Group is attached as [Annex 9](#).

b) Ad hoc Group on the evaluation of BSE risk status: 27 October and 24 November 2017 (electronic consultation)

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

The Commission agreed with the conclusions of the *ad hoc* Group and recommended that the Assembly recognise [Nicaragua](#) as having a negligible BSE risk.

The Commission also considered the recommendation of the *ad hoc* Group regarding the application of another Member and concluded that this Member did not meet the requirements of the *Terrestrial Code* for a BSE negligible or controlled risk status. The dossier was referred back to the applicant Member.

The endorsed report of the *ad hoc* Group is attached as [Annex 10](#).

c) Ad hoc Group on the evaluation of FMD status: 6-9 November 2017

The Commission reviewed the report of the *ad hoc* Group on the evaluation of applications from Members for the recognition of FMD status recognition.

- *Evaluation of requests from Members for the status recognition of a FMD free country where vaccination is not practised*

The Commission agreed with the conclusions of the *ad hoc* Group and recommended that the Assembly recognise Peru and Suriname as FMD free countries where vaccination is not practised.

The Commission commended the efforts made by Peru in taking into consideration the recommendations made by the OIE missions in 2012 and 2014.

- *Evaluation of requests from Members for the status recognition of FMD free zones where vaccination is practised*

The Commission agreed with the conclusions of the *ad hoc* Group and recommended that the Assembly recognise an extended zone of Brazil as a FMD free zone where vaccination is practised. This extended zone includes the State of Amapá and Roraima and parts of the State of Pará and Amazonas (that were not previously recognised as free from FMD), merged with two zones already officially recognised as free from FMD where vaccination is practised, as described in the *ad hoc* Group report.

The Commission also agreed with the conclusions of the *ad hoc* Group and recommended that the Assembly recognise a new zone of Chinese Taipei consisting of Kinmen County, as a FMD free zone where vaccination is practised.

The Commission considered the recommendation of the *ad hoc* Group regarding another application for a zone of a Member and concluded that it did not meet the requirements to have a recognised FMD free zone where vaccination is practised. The dossier was referred back to the applicant Member.

The Commission took the opportunity to emphasise the importance of maintaining movement control between zones of different status as well as of same status as long as they remain officially recognised as separate zones.

- *Evaluation of a request from Member for the endorsement of its national official control programme for FMD*

The Commission agreed with the conclusion of the *ad hoc* Group on the application submitted by a Member which did not meet the requirements of the *Terrestrial Code* for the endorsement of its official control programme. The dossier was referred back to the applicant Member indicating the main aspects that should be improved in order to comply with the requirements of the *Terrestrial Code* before resubmitting its dossier.

- *Review of the report of the ad hoc Group on Alternatives for surveillance for demonstration of freedom from FMD and recovery periods and consideration of the options document*

During its September 2017 meeting, the Commission decided to consult the *ad hoc* Group on the evaluation of FMD status regarding the conclusions of the *ad hoc* Group in charge of the alternatives for surveillance for demonstration of freedom from FMD and recovery periods and the option document that presented the pros and cons of the different options related to: i) the provisions on the waiting time requirements; ii) the provisions for the level of confidence; and iii) the method to be used for the assessment of the level of the confidence.

The Commission was informed that the two *ad hoc* Groups were in agreement with their preferred options and also agreed that first a qualitative approach should be developed through a separate questionnaire in the recovery section of the FMD questionnaire. This questionnaire (or checklist) should describe in detail the additional measures that could be implemented by Members in order to provide a high level of confidence in demonstrating freedom from FMD

in a short period, along with the procedure for monitoring and evaluating the implementation of these measures. The Commission suggested that an *ad hoc* Group be convened to begin the progress by drafting such questionnaire that could be further developed later on into a more quantitative assessment tool.

The endorsed *ad hoc* Group report is attached as [Annex 11](#).

d) *Ad hoc* Group on the evaluation of CSF status: 22-23 November 2017

The Commission reviewed the report of the *ad hoc* Group on the evaluation of the applications from Members for the recognition of CSF status.

The Commission agreed with the conclusions of the *ad hoc* Group to recommend that the Assembly recognise [Argentina](#) and [Costa Rica](#) as CSF free countries.

The Commission concurred with the conclusions of the *ad hoc* Group on another application submitted by a Member which did not meet the requirements of the *Terrestrial Code*. The dossier was referred back to the applicant Member.

The Commission also took note of the opinion of the Group related to the proposed provisions on “historical freedom” and “freedom in all pigs” in Article 15.2.3. of the *Terrestrial Code*.

The Commission concurred with the rationale provided by the *ad hoc* Group, and furthermore underlined the huge potential impact on the official recognition of CSF free status (including the impact on already officially recognised CSF free countries and zones) linked with the proposed provisions in Article 15.2.3. In addition, as the work on the harmonisation of the requirements for disease free status recognition and maintenance of the disease-specific chapters was ongoing, the Commission proposed this proposal be further considered and that the possible relevant amendments be included in the harmonised chapter prior to its further circulation for Members’ comments.

The endorsed report of the *ad hoc* Group is attached as [Annex 12](#).

e) *Ad hoc* Group on the evaluation of PPR status: 7-8 December 2017

The Commission reviewed and endorsed the report of the *ad hoc* Group on the evaluation of the applications from four Members; three for PPR free status recognition and one for the endorsement of an official control programme.

The Commission agreed with the conclusions of the *ad hoc* Group and recommended that the Assembly recognise [Madagascar](#), [Peru](#) and [Uruguay](#) as PPR free countries.

The Commission also considered the recommendation of the *ad hoc* Group regarding the application submitted by the other Member which did not meet the requirements of the *Terrestrial Code* for the endorsement of its official control programme for PPR. The dossier was referred back to the applicant Member explaining the rationale of the Commission’s position and suggestions on actions to be taken to comply with the requirements of the *Terrestrial Code*.

The endorsed report of the *ad hoc* Group is attached as [Annex 13](#).

f) *Ad hoc* Group on rabies: 21-23 November 2017

The Commission considered and endorsed the *ad hoc* Group report and the reviewed *Terrestrial Code* Chapter 8.14. infection with rabies virus. The Commission commended the work of the *ad hoc* Group to align the chapter to the Global Strategic Plan to Prevent Human Deaths from Dog-Transmitted Rabies by 2030 that was drafted by the OIE in partnership with FAO, WHO, and the Global Alliance for Rabies Control and that was launched in September 2017.

The Commission noted the proposal made by the *ad hoc* Group to establish a procedure for the endorsement by the OIE of Members official control programme for dog-mediated rabies. The Commission strongly supported this proposal as it recognises the key role that dogs play in the epidemiology of the disease in humans. The creation of a formal procedure for endorsement of the official rabies control programme would enhance and facilitate the implementation of the Global dog-mediated rabies strategy. The Commission agreed with the *ad hoc* Group's opinion and considered that the creation of a procedure for the official endorsement of the rabies national control programme would support Members to sustainably reduce human death losses due to rabies and would contribute to eventually breaking the cycle of transmission from dogs to humans.

The Commission was of the opinion that the procedure for the endorsement of the dog-mediated rabies control programme should follow an approach similar to other diseases (*e.g.* FMD, CBPP, PPR), so as to ensure the quality of the programme and the transparency of the evaluation. However the Commission acknowledged that the inclusion of dog-mediated rabies in the list of diseases for which the OIE endorses the official control programme should answer to Members' requests; the Commission therefore agreed to seek Members' feedback on this specific question. Should this proposal be accepted by the Members, the Commission recommended the OIE to ensure adequate resources (*e.g.* personnel and financial) be dedicated to this activity.

The Commission took note of a proposal made by the *ad hoc* Group and acknowledged that, in some regions where dog-mediated rabies was well under control, hematophagous bat or wild carnivores were considered a major source of rabies infection, posing risk to human and livestock. It was agreed that in these scenarios, official national control programmes should remain in place to control the disease. The Commission proposed an amendment to add this concept to the text.

The amended *Terrestrial Code* chapter 8.14. and the *ad hoc* Group report were forwarded to the Code Commission for its consideration.

The endorsed *ad hoc* Group report is attached as [Annex 14](#).

g) *Ad hoc* Group on biological threat reduction in relation to specific methodologies for veterinary services, pertaining to the investigation of suspicious biological events: 28 – 30 November 2017

The Commission was informed about the work of the OIE *ad hoc* Group on Biological Threat Reduction in relation to specific methodologies for Veterinary Services, pertaining to the investigation of suspicious biological events. The *ad hoc* Group was convened following a recommendation of the 1st OIE Global Conference on Biological Threat Reduction in 2015. Its main task was to develop guidelines for the identification of biological events that are of confirmed deliberate origin or are suspected to be of deliberate origin along with the issues related to the investigation of such events, as they were not yet specifically addressed in OIE Standards or guidelines. The first meeting of the *ad hoc* Group was convened 4-6 July 2017; the second and final meeting was convened 28-30 November 2017. The Commission was informed that draft guidelines were under final review and would be available on the OIE website in March 2018. The guidelines would be open for comments until 16 April 2018

Member should submit their comment by e-mail to biothreat-reduction@oie.int.

The Commission was informed that, as a continuation of the work on the guidelines an international workshop on 'Bridging Epidemiology and Forensics' would be held in Paris, 13-15 March.

The endorsed *ad hoc* Group report is attached as [Annex 15](#).

h) *Ad hoc* Group on antimicrobial resistance: 22-24 January 2018

The Commission considered and endorsed the *ad hoc* Group report.

The Commission was informed that the meeting was conducted in three parts, one part dealing with the OIE database on the use of antimicrobial agents in animals, a second part on the replies to the comments of the Members on *Terrestrial Code* chapters 6.7. on harmonisation of national antimicrobial resistance surveillance and monitoring programmes and 6.8. on monitoring of the quantities and usage patterns of antimicrobial agents used in food-producing animals and finally a third part on the update of the OIE List of antimicrobial agents of veterinary importance.

The Commission reviewed the replies of the *ad hoc* Group to the Member comments on the *Terrestrial Code* Chapter 6.7. and 6.8.

The amended chapters 6.7 and 6.8 and the *ad hoc* Group report were forwarded to the Code Commission for further consideration.

The Commission discussed the List of Antimicrobial Agents of Veterinary Importance, which was updated during the *ad hoc* Group meeting. It was recalled that the List was developed to serve as a global reference for the use of antimicrobial agents in animals.

Acknowledging that the WHO List of Critically Important Antibiotics was recently updated, the Group proposed to include a strong statement in the OIE List recommending phasing out the classes included in the WHO category of Highest Priority Critically Important Antimicrobials for use as growth promoters. The Commission acknowledged that the misuse of antimicrobials for growth promotion could pose serious risks for development and spread of antimicrobial resistance.

The Commission commended the *ad hoc* Group and the OIE for their ongoing work on antimicrobial resistance and for the publication of the Second Annual Report on the Data Collection on Antimicrobial Agents Intended for Use in Animals.

The endorsed *ad hoc* Group report, including the list of critically important antibiotics of veterinary importance to be proposed for adoption during the 86th General Session, is attached as [Annex 16](#).

i) Working Group on Wildlife: 12-15 December 2017

The Commission reviewed the draft report of the Wildlife Working Group.

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

Regarding the paper developed by the Working Group on “Vaccination of Animals of High Conservation Value”, see item 9.3.

The draft report of the Working Group was endorsed (86 SG/13 GT).

3.2. Planned *ad hoc* Groups

- a) *Ad hoc* Group on tsetse-transmitted trypanosomosis: 6-8 March 2018
- b) *Ad hoc* Group on prioritisation of diseases for which vaccines could reduce antimicrobial use in cattle, sheep and goats: 7-9 May 2018
- c) *Ad hoc* Group on Antimicrobial Resistance: 29–31 August 2018
- d) *Ad hoc* Group on alternatives for surveillance for demonstration of freedom from FMD and recovery periods (to be confirmed)
- e) *Ad hoc* Group on the evaluation of CBPP status: 26–28 September 2018 (to be confirmed)
- f) *Ad hoc* Group on the evaluation of AHS status: 17–19 October 2018 (to be confirmed)
- g) *Ad hoc* Group on the evaluation of BSE risk status: 24–26 October 2018 (to be confirmed)

- h) *Ad hoc* Group on the evaluation of FMD status: 7–9 November 2018 (to be confirmed)
- i) *Ad hoc* Group on the evaluation of CSF status: 21–23 November 2018 (to be confirmed)
- j) *Ad hoc* Group on the evaluation of PPR status: 6–8 December 2018 (to be confirmed)
- k) *Ad hoc* Group on BSE: (to be confirmed)
- l) Working Group on Wildlife: 4-7 December 2018

4. Official disease status

4.1. Expert missions to Members requested by the Commission

a) State of play and prioritisation

The Commission reviewed and prioritised the missions to Members for official recognition or for maintenance of disease status. With regard to the missions planned to be performed before the next meeting of the Commission in September 2018, the Commission endorsed the terms of reference for those missions.

b) Follow-up of past missions

The Commission considered the mission reports of countries that hosted an OIE expert mission since the last meeting of the Commission in September 2017. It also reviewed the progress reports submitted by countries on the implementation of the recommendations from previous missions and appreciated the ongoing efforts made by these countries.

- *Bulgaria (CSF)*

Bulgaria applied for the recognition of its CSF free status in September 2016. At its February 2017 meeting, the Commission considered the recommendations of the *ad hoc* Group on the evaluation of the applications from Members for the recognition of their CSF free status and concluded that a mission should be deployed in Bulgaria for the Commission to take an informed decision on Bulgaria's compliance with the requirements of the *Terrestrial Code*. The mission took place from 25 to 29 September 2017 and assessed compliance of the country with the *Terrestrial Code* for official recognition of its CSF free status.

The Commission considered the detailed report of the CSF mission in Bulgaria and advised that Bulgaria submit an action plan in response to the recommendations made by the mission and that a follow-up mission take place within one year to monitor the implementation of recommendations in the field. While encouraging that Bulgaria continue its efforts, the Commission recommended that the Assembly recognise Bulgaria as a CSF free country.

The detailed report of the assessment is in Annex 17.

- *Romania (CSF)*

Following the CSF mission conducted in May 2017 to assess compliance of the country with the *Terrestrial Code*, Romania provided the OIE with an action plan to ensure the implementation of the recommendations. At the September 2017 meeting, the Commission suggested adding and broadening the recommendations of the previous mission to include strengthening the biosecurity in the backyard holdings, considering the recent outbreaks of African swine fever in domestic pigs.

Whilst noting the progress made and regulations established in following up with the recommendations, the Commission recommended a further mission to monitor the implementation of these measures in the field.

- *Kazakhstan (FMD)*

Following the FMD mission conducted in May 2017 to assess compliance of the southern zones with the *Terrestrial Code*, Kazakhstan provided the OIE with an action plan to ensure the implementation of the recommendations. At the September 2017 meeting, the Commission suggested that the action plan be slightly amended to describe in more details the activities to be conducted and the linked responsibilities.

The Commission reviewed the progress made with the action plan and regretted that the level of advancement of the activities that were still in progress were not reported. The Commission advised that, in the future, Kazakhstan should report on the level of advancement of all activities, including those that have been initiated, but not yet completed.

- *Madagascar (FMD)*

Following the FMD mission conducted in April 2017 to assess compliance with the requirements of the *Terrestrial Code* for maintenance of the recognised FMD free status, Madagascar provided the OIE with an action plan to ensure the implementation of the recommendations. At the September 2017 meeting, the Commission suggested that the action plan be slightly amended and budgeted to ease the careful consideration of the priorities.

The Commission appreciated the activities already initiated and the numerous documents developed (procedures, directives, etc.). The Commission recommended that the practical implementation of these actions, particularly related to surveillance and animal movement control, be monitored at the next meeting of the Commission in September 2018.

- *Myanmar (PPR)*

Following the assessment of Myanmar's annual reconfirmation for its PPR free status, the Commission had requested that a mission be deployed in the country to assess the maintenance of its compliance with the requirements of the *Terrestrial Code*. This mission took place from 21 to 27 August 2017.

The Commission was informed that, based on its review of the mission report via electronic consultation, the PPR status had been suspended with effect from 18 December 2017.

- *Other mission*

The Commission was updated on the main outcomes of a recent OIE mission that took place in November 2017 to assess a Member's compliance with the requirements of the *Terrestrial Code* for AHS free status, following an application assessed in February 2017 regarding. The Commission would make its recommendations via electronic consultation upon receipt of the final mission report.

4.2. Specific update on official disease status

a) Update on situation of countries/zone with suspended disease status

- *Colombia: FMD containment zone*

The Commission was reminded that following outbreaks of FMD in the zone of Colombia previously recognised as free from FMD with vaccination that were reported to the OIE on 24 June 2017, the status of the zone free with vaccination had been suspended. On 21 November 2017, Colombia submitted documentation requesting the evaluation of the establishment of a containment zone composed of the Department of Arauca and parts of Boyacá, Casanare and Cundinamarca Departments.

The Commission, by electronic correspondence amongst its members, considered the information provided by the Delegate of Colombia. Based on the documentation submitted and in accordance with Resolution No. 15 of the 83rd General Session "Procedures for Member Countries for the official recognition and maintenance of disease status of certain animal diseases or risk status of bovine spongiform encephalopathy and for the endorsement of national official control programmes", the Commission concluded that Colombia was compliant with the provisions of Article 8.8.6. of the *Terrestrial Code* on the establishment of a containment zone. The "FMD free zone where vaccination is practised" status for the zone of Colombia, as recognised by the OIE World Assembly of Delegates in terms of Resolution No. 22 in May 2017, was re-instated with effect from 11 December 2017, with the exception of the territory of the containment zone.

The Commission acknowledged the updated information provided by Colombia with regard to the serological surveillance performed in the remaining parts of the FMD free zone outside of the containment zone and to the animal identification system within the containment zone.

4.3. Annual reconfirmations and other official status related issues

a) Comprehensive review of annual reconfirmations (for pre-selected status and all OIE endorsed national official control programmes)

The Commission comprehensively reviewed the annual reconfirmations of the Members that were pre-selected at its last meeting in September 2017.

The Commission underlined the importance of timely submissions (by the end of November each year) of the annual reconfirmations for maintenance of official status and of endorsement of official control programme. The Commission reiterated that lack of submission or finalisation of the annual reconfirmation by end of January of the following year could lead to the suspension of the official status or to the withdrawal of the endorsement of the official control programme of Members.

b) Report of the annual reconfirmation assessments by the Status Department

The Commission reviewed and endorsed the report prepared by the OIE Status Department on the remaining annual reconfirmations (that were not selected for comprehensive review). The Commission also reviewed the annual reconfirmations for which the Status Department required the Commission's scientific advice.

The Commission concluded that the annual reconfirmations were compliant with the relevant requirements of relevant Chapter of the *Terrestrial Code* for the maintenance of the officially recognised status and made recommendations to some Members regarding their annual reconfirmations for maintenance of disease.

The report of all annual reconfirmations, including those comprehensively reviewed by the Commission and those reviewed by the OIE Status Department and reported to the Commission, is attached as [Annex 18](#).

4.4. Standards related to official status recognition

a) Harmonisation of the requirements for disease free status recognition and maintenance of the disease-specific chapters

Following its confirmation of the need to harmonise and update the requirements for recognition and maintenance of status, at its February 2017 meeting, the Commission reviewed the documents prepared by the OIE Status Department on the harmonisation and update of the requirements for recognition and maintenance of status and the endorsement of official control programmes.

The Commission agreed on harmonised requirements for the official recognition of AHS, CBPP, CSF, FMD with and without vaccination, and PPR free status as well as for the endorsement and maintenance of official control programmes for FMD, CBPP and PPR. Based on the discussions of the Commission, the harmonised requirements together with the rationale would be finalised electronically between the Commission and the OIE Status Department and forwarded to the Code Commission for its consideration in September 2018.

b) Follow-up on alternatives for surveillance for demonstration of freedom from FMD and recovery periods and option document

The discussions of the Commission is captured under Section **3.1.c)** of the report.

c) Update on the procedures for self-declaration

The Commission commended the OIE on the good progress made with the Standard Operating Procedures for self-declaration to improve clarity and better guide Members wishing to self-declare their countries, zone(s) or compartment(s) free from any disease, except those for which the OIE has a specific procedure for official recognition of disease status.

The Commission endorsed the Procedure and noted that they it would be soon available on the dedicated page of the OIE website, as would the archives of all the self-declarations published by the OIE since 2000.

d) Clarification of the official status of non-contiguous territories

The Commission discussed the situation of non-contiguous territories of Members already having an officially recognised disease status or endorsement of their official control programmes. Following a Member's proposal, the OIE requested certain Members to clarify the situation of the non-contiguous territories vis-à-vis official status. Considering the willingness of some Members to include non-contiguous territories that were not specified in the initial application for disease status recognition, the OIE drafted a procedure to transparently state the way to proceed to have these non-contiguous territories included.

The Commission highlighted that Members with non-contiguous territories should carefully consider the inclusion of these territories as part of the officially recognised disease status; in the case of an outbreak in a non-contiguous territory(ies), this would lead to suspension of the official status of the whole territory being recognised. The Commission also discussed the possible options if an outbreak should occur, and concluded that the establishment of a containment zone could be a workable option.

The Commission noted that the clarified situation of non-contiguous territories in terms of official status recognition would be specified in the Resolutions to be proposed for adoption by the Assembly starting from May 2019.

The endorsed procedure is attached as [Annex 19](#).

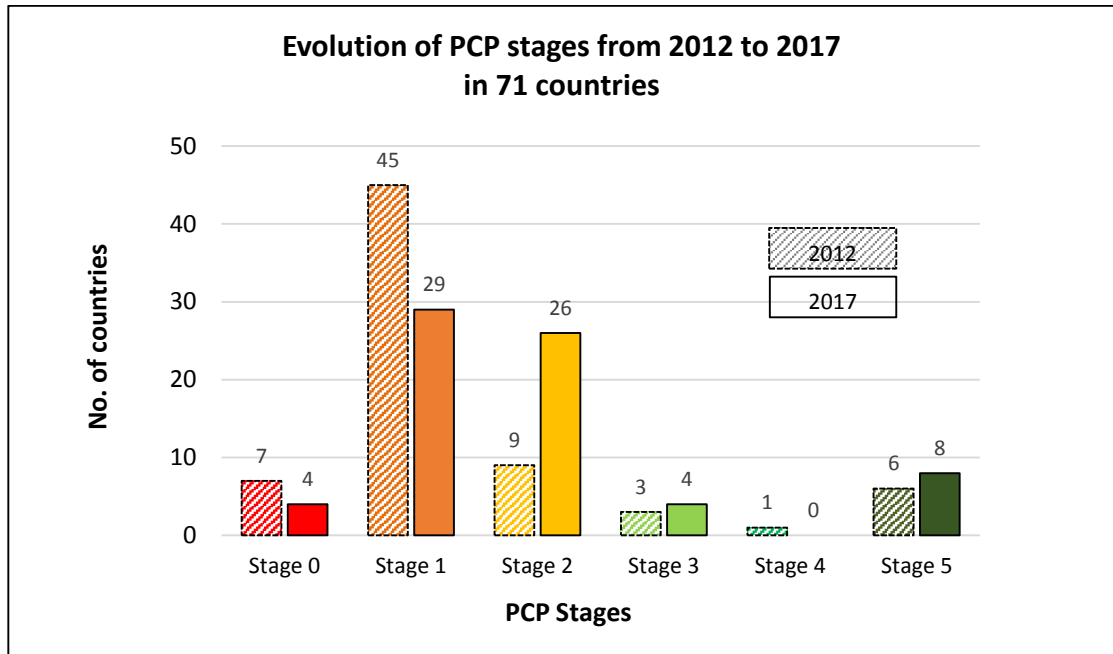
5. FMD and PPR control strategies

5.1. Foot and Mouth Disease Global Control Strategy

The Commission was updated on the activities that had been conducted since its previous meeting in the framework of the Global FMD Control Strategy and under the umbrella of the Global Framework for the progressive control of Transboundary Animal Diseases (GF-TADs).

Three regional meetings were conducted: Tanzania hosted the 2nd Roadmap meeting in Southern Africa in September 2017. Jordan welcomed the 4th FMD roadmap meeting in Middle East in October 2017, jointly organised with the End PPR roadmap meeting. This joint meeting allowed the participants to easily identify the possible synergies between the two Global Strategies and their national programmes to control the two diseases. In addition, the 1st Epidemiology and Laboratory Networks meeting for West Eurasia was held in Georgia in September 2017. The West Eurasian networks nominated their leaders and co-leaders and developed their respective action plans.

These regular regional meetings support the national and regional implementation of the FMD Global Strategy and the monitoring of the progress made and the Commission was presented a comparative map as well as a graph (below) which displays the evolution along the Progressive Control Pathway (FMD-PCP) of the 71 countries involved between 2012 and 2017.



The Commission was also informed that the GF-TADs Management Committee acknowledged the strong involvement of European Commission for the Control of Foot-and-Mouth Disease (EuFMD) in the implementation of the Global FMD control Strategy and thus opened a 7th seat within the FMD Working Group. The FMD Working Group is now composed of three persons from the OIE, three from the FAO, and one from EuFMD.

Finally, the Commission acknowledged with appreciation that the GF-TADs FMD Working Group learned from experience and revised the FMD-PCP tool (in finalisation phase). The revised tool clarifies the PCP-approach and the acceptance process of the PCP stages at regional level and proposes an integrated path from Stage 0 of the PCP to the OIE recognition of FMD freedom without vaccination.

Finally, the Commission was made aware of the main activities planned for 2018, in accordance with the 2017-2018 Action plan, provided budget is identified to run them.

5.2. Peste des Petits Ruminants. Global Control and Eradication Strategy

The Commission was updated on the current status of the PPR Global Control and Eradication Strategy. The Commission was reminded that in 2017 the first round of PPR Regional Roadmap meetings was finalised and in parallel the second round was launched with the organisation of meetings for four regions, namely East Asia, Central Asia, Middle East and Central Africa. In addition to the roadmap meetings, two workshops on PPR vaccines were held in Casablanca, Morocco and in Rome, Italy, in April and December 2017, respectively. In November 2017, a workshop was also carried out in Ulaanbaatar in Mongolia to review the national PPR situation in domestic small ruminants and wildlife.

The Commission was also informed of the progress achieved along the Action Plan developed by the OIE to support the PPR Global Eradication Programme.

The main actions planned for 2018, in addition to the continuation of the aforementioned activities, would focus on the launch of the PPR Global Research and Expertise Network in Vienna in April 2018 and the organisation of the PPR Pledging Conference in Brussels in 2018. This will be hosted by the European Commission and will benefit from the FAO-OIE Resource Mobilisation and Marketing Strategy endorsed in 2017.

Finally, the Commission took note of the first case of PPR reported in Burundi at the beginning of 2018. The Commission was informed that a joint FAO-OIE emergency response mission was about to be deployed to provide support to the country.

6. OIE Collaborating Centres

6.1. Risk analysis and modelling Collaborating Centre application (RVC-APHA)

At the previous meeting in September 2017, the Commission recommended acceptance of the application for a new OIE Collaborating Centre for Risk analysis and modelling in the United Kingdom, and had asked the applicant institutions to provide a joint statement describing the specific services they will provide to the OIE and OIE Member Countries once designated. The Commission reviewed and was satisfied with the statement submitted, believing it would be a useful document to refer to in the future when evaluating the Centre's activities.

The Collaborating Centre application would now be presented for endorsement by the OIE Regional Commission for Europe and the Council before being proposed for adoption by the Assembly at the General Session in May this year.

6.2. Proposed list of main focus areas and specialties for OIE Collaborating Centres

At the last meeting in September 2017, the Biological Standards Commission had considered ways to better engage the network of OIE Collaborating Centres in the goals of the OIE. As a first step, the Commission had identified six focus areas, each with a number of specialties, for OIE Collaborating Centre activities for future applicants (see Annex 3 of the report of the September 2017 meeting of the OIE Biological Standards Commission). The aim is to better categorise and standardise topics of interest to OIE and to improve both clarity and opportunities for networking, which is also an integral part of the OIE Sixth Strategic Plan.

As the activities of OIE Collaborating Centres include topics of relevance to the mandate of other OIE Specialist Commissions, the Biological Standards Commission wanted to consult all four Commissions before finalising the list and making it available on line.

The Commission questioned the terminology of the specialty "vaccines, diagnostics (kits) and drugs". This terminology is derived from Resolution No. 25 on Veterinary Products, adopted by the Assembly in May 2009, which refers to "vaccines and veterinary drugs, including antimicrobials".

The Commission supported the list of main focus areas and specialties for OIE Collaborating Centres.

6.3. Proposed Procedures for designation of OIE Collaborating Centres

The Biological Standards Commission had drafted a document entitled *Procedures for designation of OIE Collaborating Centres*. The purpose of the document is to have clear criteria and procedures for designation and de-listing OIE Collaborating Centres. The document outlines the steps that need to be followed by applicants for OIE Collaborating Centre status, the roles of the Specialist and Regional Commissions, the Council and the Assembly.

The Commission concluded that the document was clear and useful, and will, therefore, greatly help Members to understand the procedures that apply to OIE Collaborating Centres. The Commission noted that although the selection process for OIE Collaborating Centres has a regional basis, Centres are required to provide their services globally.

The Commission supported the document (see Annex 4 of the report of the February 2018 meeting of the Biological Standards Commission), which would be presented by the Biological Standards Commission for adoption at the General Session in May this year.

7. Liaison with other Specialist Commissions

7.1. Terrestrial Animal Health Standard Commission

Please refer to the joint meeting between the two Commissions attached as [Annex 20](#).

7.2. Biological Standards Commission

a) Assess the need to draft a *Terrestrial Manual* Chapter on MERS-CoV

The Commission agreed with the terms of reference that were presented to develop a *Terrestrial Manual* Chapter. The Commission re-iterated that it was not expected to draft a *Terrestrial Code* chapter on MERS-CoV. The first step should be re-assessing MERS-CoV against the listing criteria described in the *Terrestrial Code* chapter 1.2.

8. Conferences, workshops, meetings

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

8.1. 5th meeting of the Standing Group of Experts on Lumpy Skin Disease in South-East Europe SGE LSD5. 19-20 October 2017. Budva (Montenegro)

The Commission was informed of the outcome of the 5th LSD Standing Expert Group (SEG5) meeting (under the umbrella of the GF-TADs for Europe) where the use of preventive vaccination was extensively discussed.

The Commission acknowledged that, while no updates on new DIVA vaccines were presented, a PCR test to discriminate infected from vaccinated animals is currently available. Research is being performed toward the development of inactivated vaccines.

The Commission noted that the current *Terrestrial Code* chapter requires that, if vaccination is performed, the Member be considered as non-free. Some Members started applying trading facilitating measures allowing the distinction between Member being free with, or without, vaccination. The Commission was of the opinion that should this measure be scientifically sound and feasible it may justify a revision of the *Terrestrial Code* Chapter 11.9. Infection with lumpy skin disease virus.

8.2. 2nd OIE Global Conference on Biological Threat Reduction. 31 Oct-2 Nov 2017. Ottawa, Canada

The Commission was informed about the 2nd OIE Global Conference on Biological Threat Reduction, held in Ottawa 31 October to 2 November 2017. Over 300 participants from 70 countries attended the conference. The conference had four themes: Current developments in non-proliferation instruments and global security initiatives; global conversations on the use of technologies; assessing systems, investing in collaboration to foster preparedness and future of biological threat reduction.

The final report on the conference, 12 recommendations that were adopted by the participants as well as the presentations are posted on the website:

http://www.oie.int/eng/BIOTHREAT2017/presentation_poster_recom.htm

8.3. FAO Ad hoc meeting on the Progressive Control Pathway for African animal trypanosomoses (PCP-AAT). 11-13 December 2017. Rome

The Commission was informed on the outcomes of the meeting that was organised by FAO as part of the activities under the framework of the Programme against African trypanosomoses in support of the Pan African Tsetse and Trypanosomoses Eradication.

The objective of the meeting was to further elaborate the principles of the Progressive Control Pathway tool for animal African trypanosomoses (AAT) that was published by Dial *et al.* in 2017. The tool aims at providing affected countries and stakeholders with a rational approach to plan and implement AAT control strategies following a stepwise approach.

The Commission acknowledged the different initiatives to support endemic countries toward the control and elimination of the disease, and recommended the alignment of this tool with the provisions of the upcoming *Terrestrial Code* Chapter on AAT.

8.4. Training Course on the surveillance of wildlife Disease. The role of hunters. 18-19 December 2017 Pravets, Bulgaria

The Commission was informed on the outcomes and recommendations made during the training course organised by the International Council for Game and Wildlife Conservation (CIC) and with the Federation of Associations for Hunting and Conservation of the EU (FACE) in collaboration with the OIE.

The aim of the training course was to enhance the network among hunters and Veterinary Services in order to actively integrate hunters in the surveillance and management of wildlife diseases.

The Commission commended the initiative and highlighted the key role hunters play in wildlife disease surveillance. The Commission recommended that efforts be made to enhance communication and collaboration between hunter associations and Veterinary Services.

9. Disease specific issues

9.1. Update on the foot-and-mouth disease reference laboratory network and disease global situation

The Commission was updated by Dr Donald King (Pirbright) on the most significant events related to FMD that occurred globally in the last 12 months and that were included in the 2017 annual report and on the activities of the OIE/FAO FMD reference laboratory network.

The Commission acknowledged the problems and knowledge gaps related to the quality control of vaccines for FMDV in Africa, and commended the proposal to develop an OIE twinning project between Pirbright and PANVAC to target quality control for vaccines.

The Commission recognised the lack of surveillance in some regions, and emphasised the importance of timely reporting outbreaks to the OIE. The Commission acknowledged the importance of sharing FMD virus information and commended the FMD Laboratories Network for their efforts in supporting the FMD Global Control Strategy.

The Commission acknowledged the role of the OIE/FAO FMD reference laboratory network in supporting Members in the implementation of the recommendations included in the Resolution N. 30 on foot and mouth disease Serotype C that was adopted at the 2017 General Session.

9.2. Rapid screening of bovine carcasses to determine the absence of FMDv (PCR test on lymph nodes)

The Commission acknowledged reception of an expert opinion proposing a rapid screening method for bovine carcasses to determine the absence of FMDV. The Commission considered that the methodology could facilitate safe international trade.

The Commission suggested requesting the opinion of the *ad hoc* Group on FMD before deciding whether or not the *Terrestrial Code* Chapter 8.8 Infection with foot and mouth disease virus needs to be amended.

9.3. Vaccination of animals of high conservation value

The Commission discussed the paper drafted by the Working Group on Wildlife proposing that, for protecting animals of high conservation value against TADs, vaccination could be performed without affecting the disease status of the country.

The Commission concluded that the paper addressed identified needs, but it did not take into consideration the possible consequences of the proposed strategy measured against the requirements of the Terrestrial Code for specific diseases where wildlife is involved.

The Commission recommended that the Working Group considered the Commission's comments and suggested resubmitting for the Commission's consideration before its publication.

9.4. *Mycoplasma bovis*

The Commission considered the rapid risk assessment for the transmission of *Mycoplasma bovis* via semen that was provided to the OIE by an independent expert. The Commission acknowledged that *Mycoplasma bovis* was not an OIE listed disease. The Commission was of the opinion that *Mycoplasma bovis* should not be considered as a priority for the OIE at this stage. However, should Members propose including *Mycoplasma bovis* in the Commission's work plan, the first step would be to assess if it matches with the listing criteria described in the *Terrestrial Code* Chapter 1.2.

9.5. Porcine Epidemic diarrhoea (PED): inclusion on the OIE list of diseases

The Commission took note of a document received from one Member requesting the OIE to reconsider the inclusion of PED in the OIE list of diseases. The Commission acknowledged that this disease is a priority for some Members from the OIE Asia–Pacific Region. The Commission noted that the *ad hoc* Group on PED convened in 2014 concluded that the disease did not fulfil the listing criteria of the *Terrestrial Code* Chapter 1.2.

The Commission referred to the discussion with the Code Commission during the joint meeting and the need to reconsider the procedure for listing diseases. The Commission highlighted that in addition to objective listing criteria, the expert groups tasked with the evaluation of diseases for listing, should have broad expertise, including epidemiology, and also include members from the Specialist Commissions, to ensure an even, objective and comprehensive assessment.

9.6. Resistance to antiparasitics

The Commission acknowledged the reception of a paper elaborated by OIE Headquarters outlined the problem statement and some suggestion on how to possibly address the challenge of resistance to antiparasitics. The Commission agreed on the value of considering convening an electronic *ad hoc* Group ensuring geographical balance of the experts and including the relevant OIE Collaborating Centers such as the Food and Drug Administration (FDA) to initiate the discussion. Physical meetings could be organised if needed to describe more concrete actions.

The Commission welcomed the suggestion to initiate the consultation aiming at drafting a technical document for internal discussion and subsequent publication after being endorsed by the Commission.

10. For the Commission information

10.1. Update on rinderpest

An update on rinderpest post-eradication activities since the last meeting was provided. The first *Regional Rinderpest Tabletop Exercise* took place in Nairobi, Kenya, from 21 to 23 November 2017 and targeted African countries. It was organised by FAO in cooperation with AU-IBAR and the OIE to test the operability of the Global Rinderpest Action Plan (GRAP), including the Operational Framework for the Rinderpest Vaccine Reserve and gather inputs for its improvement. A second *Regional Rinderpest Tabletop Exercise* will take place in Colombo, Sri Lanka, from 13 to 16 March 2018, and will target Asian countries.

The output of the *Technical Expert Meeting on Criteria for Rinderpest Vaccine Manufacturers*, which was held at the OIE Headquarters on 18-19 December 2017, was presented to the Commission for their information. These Criteria were presented to the Biological Standards Commission for comment and it was recommended that the criteria should not be so stringent that they could create an impediment to responses in case of a rinderpest outbreak emergency.

The Commission was updated on the outcomes of the 12th meeting of the FAO-OIE Joint Advisory Committee for Rinderpest (JAC), which was held on 19-20 December 2017 at the OIE Headquarters. The JAC discussed pending applications for Rinderpest Holding Facilities – an onsite inspection was expected to take place in March 2018 for a possible Category A and B facility, while an update on the implementation of actions required for designation of another facility is expected. A resolution for the clarification of the procedures for renewal of the mandate of the five Rinderpest Holding Facilities approved in 2015 along with the possible approval of the two aforementioned institutes would be presented for adoption at the 86th General Session. The Commission was informed that the implications of the publication of genetic sequences of rinderpest virus as well as recommendations for the implementation of the GRAP and accompanying Operational Framework for the management and Deployment of the Rinderpest Vaccine Reserve were also discussed.

10.2. Project update: replacement International Standard Bovine Tuberculin

The Commission was updated on the replacement of the International Standard Bovine Tuberculin (ISBT) project. The OIE *ad hoc* Group on ISBT is coordinating a project to develop and validate a new ISBT. The Group met by teleconference on 6 December 2017 to review the current status of the ISBT replacement project, confirm some aspects of the experimental design and analysis, and plan the upcoming Preliminary Evaluation and International Collaborative Study.

The National Institute for Biological Standardisation and Control (NIBSC) has prepared lyophilized samples of two candidate tuberculins which had been selected for laboratory evaluation. The Preliminary Evaluation is scheduled to be conducted from February 2018 to June 2018 in two OIE Reference Laboratories for Bovine Tuberculosis (France and Argentina). The International Collaborative Study (ISC) is scheduled to be conducted from July 2018 to June 2019, in approximately 10 locations.

If the testing can be completed as anticipated and the data is satisfactory, the results would be analysed and reported to the Biological Standards Commission for endorsement at the February 2020 meeting and subsequently presented to the OIE Delegates for endorsement and adoption of the new ISBT at the OIE General Session in May 2020. The data would be submitted for publication in a peer reviewed journal, and the new ISBT would be available from the NIBSC by December 2020.

10.3. Update on the Secretariat for the STAR-IDAZ International Research Consortium on Animal Health

The Commission was updated on the recent activities performed by the STAR-IDAZ International Research Consortium on Animal Health (IRC), which is a forum of public and private R&D programme owners/managers aiming to coordinate research on animal health at the international level and to improve the control tools for a list of priority diseases/issues. The consortium has 22 partners, which includes national funding bodies as well as industry, international research organisations, and donors.

The STAR-IDAZ established regional networks in Europe, the Americas, Asia & Australasia, and Africa & the Middle East. Periodic meetings are organised as to update information about research activities and priorities, as well as to increase research coordination, in the different regions.

The STAR-IDAZ IRC is governed by an Executive Committee, composed by one representative from each partner, including the OIE, which works under the guidance of a Scientific Committee, consisting of independent experts. A Secretariat, funded by the European Commission, was established in 2016 for supporting the IRC activities, and is co-hosted by the OIE.

Every year, the Executive Committee selects priority diseases to target activities for the upcoming year. Priority disease are diseases having a relevant impact at a global level and still needing research to develop adequate control tools. In 2017, the selected priority diseases/horizontal issues were: African swine fever, bovine tuberculosis, brucellosis, helminths, porcine reproductive and respiratory syndrome (PRRS), and vaccinology. Geographically balanced working groups of experts are being established to perform gap analyses and draw research roadmaps on the selected diseases/issues. The next meeting of the Executive Committee will be held in March 2018, to revise the list. In particular, discussion would regard some topics that were selected as secondary priorities last year (*i.e.* coronavirus, FMD, vector-borne diseases, and innovative anti-infective approaches).

10.4. Rabies elimination business plan

The Commission was updated on the latest development of the Global Strategic Plan to end human death from dog-mediated rabies by 2030 that was launched in September 2017 during the World Rabies Day².

The Commission commended the OIE and its partners (FAO, WHO and GARC) for the progress made. It was noted that the Global Strategy responded to the request made by the participants during the 2015 Global Rabies Conference and the recommendations of Resolution No. 26 on rabies adopted during the 84th General Session.

The Commission stressed the importance of dog vaccination in the rabies elimination strategies. It was also highlighted the need for progress in the modifications of the OIE standards on rabies in support to Members' efforts to eliminate dog-mediated rabies.

10.5. OIE Global Conference on AMR. October 2018

The Commission was informed that the OIE is organising the *Second OIE Global Conference on Antimicrobial Resistance and Prudent Use of Antimicrobial Agents in Animals; "Putting Standards into Practice"*, which will be held in Marrakesh (Morocco), from 29 to 31 October 2018. The conference will bring together OIE Delegates and OIE National Focal Points for Veterinary Products, as well as experts, professionals, policy makers, international organisations and donors across the animal and human health sectors.

² <http://www.oie.int/en/animal-health-in-the-world/rabies-portal/international-mobilization/>

The main objectives of the conference include informing partners and stakeholders on ongoing initiatives of the Tripartite and the OIE respectively to control antimicrobial resistance, supporting the continued development of comprehensive surveillance and monitoring systems for antimicrobial use and resistance, and encouraging practical implementation of OIE standards and guidelines on the responsible and prudent use of veterinary antimicrobials in the field. The conference will provide a forum to examine how to best support Member Countries in fulfilment of the objectives of the OIE Strategy on Antimicrobial Resistance and the Prudent Use of Antimicrobials, and the Global Action Plan Action Plan on Antimicrobial Resistance.

11. Resolutions for the General Sessions

The Commission identified the Resolutions that would be presented to the Member Countries during the 86th General Session.

11.1. Resolutions related to disease status recognition

The Commission took note of the draft Resolutions on disease status recognition that would be presented at the forthcoming General Session.

11.2. OIE list of antimicrobial agents of veterinary importance

The Commission endorsed the draft Resolution including the list of antimicrobial agents of veterinary importance to be presented at the upcoming General Session.

11.3. Designation of facilities as approved for holding rinderpest virus containing material

The Commission took note of the draft Resolution on designation of facilities as approved for holding rinderpest virus containing material that would be presented at the forthcoming General Session.

12. Programme and priorities

12.1. Review, update and prioritisation of the work plan

The Commission updated the working programme for the year, identified the priorities and scheduled the dates for the various *ad hoc* Group meetings which would be accessible to Member Countries on the OIE website.

The updated working programme is attached at [Annex 21](#).

13. Adoption of the report

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

14. Date of next meeting

The next meeting of the Scientific Commission is scheduled for 10-14 September 2018.

.../Annexes

**REPORT OF THE MEETING
OF THE OIE SCIENTIFIC COMMISSION FOR ANIMAL DISEASES
Paris, 12-16 February 2018**

Agenda

Opening

1. Adoption of the agenda and appointment of rapporteur

2. Terrestrial Animal Health Code

2.1. Member Country comments received for SCAD consideration

- a) Glossary
- b) Chapter 1.4 Animal health surveillance
- c) Chapter 4.3. Zoning and compartmentalisation
- d) Draft Chapter 4.X. Vaccination
- e) Draft Chapter 4.Y. Management of outbreaks of listed diseases
- f) Chapter 8.3. Infection with bluetongue virus
- g) Draft Chapter 8.X. Infection with *Trypanosoma evansi* (non equine surra) and Chapter 12.3. Infection with Trypanozoon in equids
- h) Chapter 8.15.2. Infection with rinderpest virus (Article 8.15.2.)
- i) Chapter 11.12. on infection with *Theileria annulata*, *T. orientalis* and *T. parva* and Draft Chapter 14.X. Infection with *Theileria lestoquardi*, *T. luwenshuni* and *T. uilenbergi*
- j) Chapter 12.10. Infection with *Burkholderia mallei* (Glanders)
- k) Chapter 15.1. Infection with African swine fever virus

2.2. Other considerations

- a) Update on Member Countries' comments on status recognition/endorsement of control programmes questionnaires and introductory articles in Chapter 1.6.

3. Ad hoc and Working Groups

3.1. Meeting reports for endorsement

- a) *Ad hoc* Group on the evaluation of AHS status: 17 October 2017 (electronic consultation)
- b) *Ad hoc* Group on the evaluation of BSE risk status: 27 October and 24 November 2017 (electronic consultation)
- c) *Ad hoc* Group on the evaluation of FMD status: 6-9 November 2017
- d) *Ad hoc* Group on the evaluation of CSF status: 22-23 November 2017
- e) *Ad hoc* Group on the evaluation of PPR status: 7-8 December 2017
- f) *Ad hoc* Group on Rabies: 21-23 November 2017
- g) *Ad hoc* Group on biological threat reduction in relation to specific methodologies for veterinary services, pertaining to the investigation of suspicious biological events: 28 – 30 November 2017
- h) *Ad hoc* Group on antimicrobial resistance: 22-24 January 2018
- i) Working Group on Wildlife: 12-15 December 2017

3.2. Planned *ad hoc* Groups and confirmation of proposed agendas.

- a) *Ad hoc* Group on tsetse-transmitted trypanosomosis: 6-8 March 2018
- b) *Ad hoc* Group on prioritisation of diseases for which vaccines could reduce antimicrobial use in cattle, sheep and goats: 7-9 May 2018
- c) *Ad hoc* Group on Antimicrobial Resistance: 29–31 August 2018
- d) *Ad hoc* Group on alternatives for surveillance for demonstration of freedom from FMD and recovery periods (to be confirmed)

- e) *Ad hoc* Group on the evaluation of CBPP status: 26–28 September 2018 (to be confirmed)
- f) *Ad hoc* Group on the evaluation of AHS status: 17–19 October 2018 (to be confirmed)
- g) *Ad hoc* Group on the evaluation of BSE risk status: 24–26 October 2018 (to be confirmed)
- h) *Ad hoc* Group on the evaluation of FMD status: 7–9 November 2018 (to be confirmed)
- i) *Ad hoc* Group on the evaluation of CSF status: 21–23 November 2018 (to be confirmed)
- j) *Ad hoc* Group on the evaluation of PPR status: 6–8 December 2018 (to be confirmed)
- k) *Ad hoc* Group on BSE: (to be confirmed)
- l) Working Group on Wildlife: December 2018

4. Official disease status

- 4.1. Expert missions to Member Countries requested by the Commission
 - a) State of play and prioritisation
 - b) Follow-up of past missions
- 4.2. Specific update on official disease status
 - a) Update on situation of countries/zone with suspended disease status
Colombia: FMD containment zone
- 4.3. Annual reconfirmations and other official status related issues
 - a) Comprehensive review of annual reconfirmations (for pre-selected status and all OIE endorsed national official control programmes)
 - b) Report of the annual reconfirmation assessments by the Status Department
- 4.4. Standards related to official status recognition
 - a) Harmonisation of the requirements for disease free status recognition and maintenance of the disease-specific chapters
 - b) Follow-up on alternatives for surveillance for demonstration of freedom from FMD and recovery periods and option document
 - c) Update on the procedures for self-declaration
 - d) Clarification of the official status of non-contiguous territories

5. FMD and PPR control strategies

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

6. OIE Collaborating Centres

- 6.1. Risk analysis and modelling Collaborating Centre application (RVC-APHA)
- 6.2. Proposed list of main focus areas and specialties for OIE Collaborating Centres
- 6.3. Proposed Procedures for designation of OIE collaborating Centres

7. Liaison with other Commissions and Departments

- 7.1. Terrestrial Animal Health Standard Commission (see the joint meeting agenda)
- 7.2. Biological Standards Commission
 - a) Assess the need to draft a *Terrestrial Manual* Chapter on MERS-CoV

8. Conferences, workshops, meetings, missions

- 8.1. 5th meeting of the Standing Group of Experts on Lumpy Skin Disease in South-East Europe SGE LSD5. 19-20 October 2017. Budva, Montenegro
- 8.2. 2nd OIE Global Conference on Biological Threat Reduction. 31 Oct-2 Nov 2017. Ottawa, Canada
- 8.3. FAO Ad hoc meeting on the Progressive Control Pathway for African animal trypanosomoses (PCP-AAT). 11-13 December 2017. Rome
- 8.4. Training Course on the surveillance of wildlife Disease. The role of hunters. 18-19 December 2017 Pravets, Bulgaria.

9. Disease control specific issues

- 9.1. Update on the foot-and-mouth disease reference laboratory network and disease global situation
- 9.2. Rapid screening of bovine carcasses to determine the absence of FMDv (PCR test on lymph nodes)
- 9.3. Vaccination of animals of high conservation value
- 9.4. Mycoplasma bovis
- 9.5. Porcine Epidemic diarrhoea: inclusion on the OIE list of diseases
- 9.6. Resistance to antiparasitic

10. For the Commission information

- 10.1. Update on rinderpest
- 10.2. Project update: replacement International Standard Bovine Tuberculin
- 10.3. Update on the SIRCAH STAR-IDAZ International Research Consortium
- 10.4. Rabies elimination business plan
- 10.5. OIE Global Conference on AMR. October 2018

11. Resolutions for the General Sessions

- 11.1. Resolutions related to disease status recognition
- 11.2. OIE List of veterinary importance antimicrobial agents
- 11.3. Designation of Facilities as Approved for Holding Rinderpest Virus Containing Material

12. Programme and priorities

- 12.1. Review, update and prioritisation of the work plan

13. Adoption of the report

14. Date of next meeting

MEETING OF THE OIE SCIENTIFIC COMMISSION FOR ANIMAL DISEASES

Paris, 12-16 February 2018

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Rationale for the amendments to:

**CHAPTER 1.4 ANIMAL HEALTH SURVEILLANCE
provided by the Scientific Commission**

Article 1.4.3. Surveillance systems

The Commission agreed with a Member proposal on the need to consider the degree to which the subpopulation is representative of the target population when conducting a sampling rather than a census.

The Commission disagreed with a Member proposal to refer to laboratory examinations, as the proposed text was not encompassing all types of laboratory examinations to be used for surveillance purposes (*e.g.* microscopy for infestations).

Concerning a Member proposal to add other factors to the timing and temporal validity of surveillance data, the Commission noted that, while the additions would be valid, the list was not meant to be exhaustive, and disagreed with further additions to the list.

The Commission disagreed with a Member proposal to add a new point on availability of resources, as this was already covered under the quality of Veterinary Services, which was already mentioned in Article 1.4.1.

The Commission disagreed with a Member proposal to change the title ‘quality assurance’ with ‘surveillance evaluation’, as quality assurance is a broader and more encompassing concept.

Article 1.4.4. Surveillance methods

The Commission considered a Member proposal to further clarify the concept of ‘risk-based surveillance’. While agreeing on the principle, the Commission disagreed with the proposed wording, as the alternative text posed too much emphasis on cost. The existing text was already clear on the efficiency of risk-based surveillance for disease detection. The Commission also noted that this article was not meant to be a comprehensive definition of risk-based surveillance.

The Commission agreed with a Member comment to recognise the role of the Veterinary Authority to oversee and supervise *ante-mortem* and *post-mortem* inspections, but disagreed with the proposal to delete the reference to the independence of the inspection staff.

The Commission agreed with some Member proposals to include reference to systems that can track the record of an establishment of origin related to the general hygiene provisions for primary production. The Commission considered that the amendments on point 4c addressed this concern.

The Commission disagreed with a Member proposal to add a point on expert opinion elicitation data as point 10d), as the list was not meant to be exhaustive.

Article 1.4.5. Considerations in survey design

Concerning a Member comment, the Commission remarked that risk-based surveillance can be a probability-based sampling method. However, the Commission disagreed with the proposed addition as this did not increase the clarity of the text.

The Commission agreed with one Member proposal to indicate that the objective of a non-probability sampling should be to maximise the detection of the infection or infestation.

The Commission agreed with one Member proposal to add text on the use of risk-based sampling to estimate general population status if risk factors are adequately weighted.

The Commission agreed with a Member proposal to consider clustering effect when calculating the sample size.

The Commission agreed with a Member proposal to specify that the sampling stratification could be based on population characteristics or risk.

Article 1.4.6. Surveillance to demonstrate freedom from an infection or infestation

The Commission disagreed with a Member comment on a possible inconsistency in the approach between Chapters 1.4. and 4.3. on zoning and compartmentalisation.

In response to two Member comments, the Commission proposed a modification to align the text with the new definition of free zone in Chapter 4.3.

The Commission disagreed with a Member proposal to replace 'structured' with 'traditional' when referring to surveys, as 'structured' had been used in the chapter while it was not clear what was meant by 'traditional'.

The Commission disagreed with a Member proposal to allow the use of a vaccine under certain conditions in a free country, except if otherwise specified in the disease-specific chapter.

The Commission disagreed with a Member proposal to move point v) to the historical freedom section because of the presence of wildlife reservoir. References were made to the rationale provided, by the *ad hoc* Group (*cf* Report of the meeting of the Scientific Commission for Animal Diseases, September 2017, Annex 14).

The Commission considered a Member opinion about epidemiological investigations be systematically applied for all suspected cases or events. The Commission agreed with the principle, but suggested aligning the wording with other disease-specific chapters.

The Commission emphasised that the quality of the Veterinary Services was a prerequisite for the implementation of surveillance (Article 1.4.1.). It was not considered necessary to further specify it in this article.

The Commission disagreed with some Member comments on Article 1.4.6.2. point a) about the time requirement of 10 years, and referred to the rationale provided by the *ad hoc* Group. The Commission clarified that if freedom based on historical grounds could not be achieved, the time length for the implementation of the provisions listed in Article 1.4.6.2. would need to be scientifically justified by Members, if not specified in the disease-specific *Terrestrial Code* chapters.

The Commission disagreed with a Member proposal to add new requirements on the maintenance of freedom for a compartment. The Commission noted that specific surveillance is needed in a compartment, and made references to the *Terrestrial Code* Chapter 4.4.

Article 1.4.7. Surveillance considerations in support of disease control programmes

The Commission disagreed with a Member request to retain the section on self-declaration of freedom and official recognition of disease status. The Commission noted that the text removed was about the procedure that was now proposed in draft *Terrestrial Code* chapter 1.6.

Article 1.4.8. Early warning systems

The Commission disagreed with a Member proposal to add a new point on the role of Veterinary Services in evaluating animal health incident reports, as this was already covered under point 4) of this article.

The Commission disagreed with some Member proposals to provide examples of relevant stakeholders, as the Members themselves would decide who the specific stakeholders are.

Rationale for the amendments to:

**CHAPTER 4.3. ZONING AND COMPARTMENTALISATION
provided by the Scientific Commission for Animal Diseases**

Article 4.3.1. Introduction

The Commission discussed a Member request to add clarity on compartmentalisation in relation to wildlife. The Commission highlighted that a compartment is based on the disease status of all susceptible populations, as defined in the *Terrestrial Code* disease-specific chapters. Hence, the disease status of susceptible wildlife within the compartment should be considered, when appropriate.

Article 4.3.2. General consideration

The Commission disagreed with some Members requests to consider several other aspects such as animal movement, in addition to epidemiology, when establishing and maintaining a zone or compartment. The Commission was of the opinion that the proposed additions were already included in the current definition, under biosecurity and sanitary measures.

The Commission disagreed with some Members opinion that required a minimum size to define a zone, since it might vary depending on many factors, such as the disease, the area, and the management of the disease.

The Commission discussed some Member proposals to add reference to ‘animal products’, which would include straw, manure etc., to be subjected to appropriate sanitary and biosecurity measures. The Commission agreed on the principle of the proposal, but was uncertain about the clarity of the term ‘animal products’. The Commission suggested Code Commission to consider the proposal and to identify a better term to avoid ambiguities in the interpretation.

The Commission discussed some Member comments on the Veterinary Authority responsibility to verify the disease preventive measures implemented by the industry in the context of the compartment. The Commission noted that the *Terrestrial Code* Chapter 4.4. on application of compartmentalisation already described the obligation of the Veterinary Authorities to supervise the implementation and maintenance of the compartment, and should not be further described in this chapter. The Commission agreed that certification of vaccination would not always be necessary and proposed a modification of the wording for clarification.

Article 4.3.3. Principles for defining and establishing a zone or compartment

The Commission discussed some Member comments about the meaning of “epidemiological separation”. The Commission noted it should be understood as being the contrary to “epidemiological link” and should thus not be modified.

The Commission discussed one Member request to add additional points, such as husbandry practices, input sources, details of investigations and corrective actions, to the description of the biosecurity plan. The Commission suggested only the word “husbandry” to be added, as the others were already implied in the current definition of a biosecurity plan.

Article 4.3.4. Free zone

The Commission disagreed about some Member comments to specifically mention demographics of the animal population as part of surveillance. The Commission considered factors, such as population size or geographical and age distribution, were covered in the concept of epidemiological situation already mentioned in the text.

The Commission discussed one Member proposal to refer to the disease status of all susceptible populations (*i.e.* both domestic and wildlife). The Commission noted that in some *Terrestrial Code* disease-specific chapters (*e.g.* PPR, CSF, AI), a free status in domestic animals could be granted whether or not the disease is present in the susceptible wildlife population. The Commission proposed to modify the sentence to make clear that free status should be applied to all susceptible species, except otherwise specified in the disease-specific chapters.

Article 4.3.6. Protection zone

The Commission, in agreement with some Member comments, proposed to add the word “disinsection”, when relevant. The Commission noted the definition of disinfestation in the glossary but also that the word “disinsection” is defined in the Oxford dictionary. The Commission suggested to the Code Commission to evaluate whether or not it would be necessary to add a definition of “disinsection” in the Glossary.

The Commission agreed with the proposal from some Members to better clarify the status of a protection zone outside the free zone. The Commission confirmed that, in the case of occurrence of infection in the protection zone, the impact on the status of the country or zone would vary depending on whether or not the protection zone is included in the free country or zone.

Article 4.3.7. Containment zone

The Commission considered a Member comment on the new concept of containment zone where outbreaks still occur. The Commission confirmed that the protection zone is part of the containment zone to ensure that disease control measures including movement restrictions, would apply to the entire containment zone (including both the area where outbreaks may still occur and the protection zone). The Commission agreed with the Member opinion and with the original proposal of the *ad hoc* Group that developed the concept. In this sense, should a case occur in the protection zone, the whole country would lose its status. The Commission suggested amending the text accordingly. It also reiterated that, should a case occur in an approved containment zone (option a) or b) of the current draft article), the rest of the country should lose the status and be considered as infected.

Rationale for the amendments to:

**CHAPTER 4.X. VACCINATION
provided by the Scientific Commission for Animal Diseases**

Article 4.X.1. Introduction and objectives

The Commission agreed with a Member comment requesting to enlarge the scope of the chapter, so it would not be limited to vaccination as part of an official control programme. The Commission suggested amending the text to refer to Veterinary Services rather than to Veterinary Authority, to be clear that the chapter is also applicable to non-official control programmes. This change should be applied through the whole chapter, where relevant.

Article 4.X.2. Definitions

The Commission disagreed with a Member proposal to add the concept of “strategic vaccination”, as this concept was already covered in the chapter.

Article 4.X.3. Vaccination programmes

The Commission agreed with a Member proposal to add vaccines against infestations. Since the Commission previously proposed to keep the definition of “disease” in the glossary, it suggested to refer to “diseases” (which includes both infection and infestation) for vaccination.

Article 4.X.4. Launching a vaccination programme

Then Commission disagreed with some Member proposals to add a new point on the existence of a vaccine, as it is already covered under point 8.

The Commission disagreed with a Member proposal to include incidence and reproductive number to be considered in the epidemiology of the disease as this was inherent to the definition of epidemiology.

The Commission noted that considerations on the health status of the animal to be vaccinated and whether or not the vaccination allows for differentiating vaccinated animals from infected animals using a laboratory diagnostic technique were already covered in Articles 4.X.7. and 4.X.6.2b. respectively.

The Commission disagreed with some Member proposals to add references to biological marker systems for wildlife vaccines, because it was considered too prescriptive as it is not always applicable when vaccinating wildlife.

The Commission disagreed with two Member proposals to add an aspect of the possible interference of vaccination, since it is already covered in Article 4.X.9.

Article 4.X.6. Choice of vaccine

The Commission disagreed with some Member proposals to include a new sentence on the benefit/risk analysis of vaccination, since these aspects are already covered in point 7 and 9 of Article 4.X.3.

The Commission disagreed with a Member proposal to add an additional point on target species, as these are already covered under target population (Article 4.X.7. point 2).

The Commission agreed with some Member comments that unintended transmission of live vaccine strains should be considered as a side effect.

Article 4.X.7. Other critical elements of a vaccination programme

The Commission agreed with some Member comments on the need for a legal basis for mandatory reporting of vaccine adverse effects and suggested a modification of the text.

The Commission agreed with a Member comment with regard to compensation in the event of adverse reactions occurring in vaccinated animals. The Commission noted that the details of potential adverse reactions should be well described by the vaccine manufacturer and should be considered in the process of the registration of the vaccine by the Competent Authority.

The Commission disagreed with a Member proposal to re-emphasise the importance of population immunity as it is already covered in the current text.

Article 4.X.8. Logistics of vaccination

The Commission agreed with some Member proposals to include enhanced biosecurity among the animal health related activities.

Article 4.X.9. Evaluation and monitoring of a vaccination programme

The Commission agreed with a Member proposal to add age as a factor to be considered during the monitoring of the vaccination.

Article 4.X.10. Exit strategy of a vaccination programme

The Commission disagreed with a Member proposal to include specific references to vaccine supply failure or insufficient vaccine availability as part of the exit strategy of a vaccination programme since these were included already in section 4.

Rationale for the amendments to:

**CHAPTER 4.Y. MANAGEMENT OF OUTBREAKS OF LISTED DISEASE
provided by the Scientific Commission for Animal Diseases**

Article 4.Y.2. Legal framework and regulatory environment

The Commission disagreed with a Member proposal to not mention risk assessment for the purpose of prioritisation at the national level, since risk assessment should be considered as an integral part of the decision-making process.

The Commission, in accordance with one Member proposal, agreed convened that surveillance and the traceability of animal movements and their products were two critical components of disease outbreak management and should be added to the text.

The Commission agreed with a Member proposal to include products and materials, such as animal feed, farm equipment, vehicles etc., in a separate point. The Commission noted that a similar comment was made on the revision of Chapter 4.3. and suggested that the Code Commission consider to define a specific term to include these types of materials.

The Commission noted that disease outbreaks generate large amounts of data and that it would be advantageous to plan for its effective use. The Commission agreed with one Member opinion to consider these activities as integral to outcomes of an outbreak response.

Article 4.Y.3. Preparedness

Regarding one Member proposal to add text on risk communication strategies, while agreeing with the rationale, the Commission highlighted that risk analysis already encompasses risk communication.

The Commission discussed a Member proposal to add a point on prevention plan. The Commission was unclear if prevention should not be considered being part of the preparedness. This comment was send back to the Code Commission for consideration.

Article 4.Y.6. Culling and disposal of dead animals and animal products

The Commission disagreed with some Member questions about the waiting period for the recovery of the free status. The Commission reminded that in the disease-specific *Terrestrial Code* chapters recovery procedures, including the waiting period for recovery, are clearly described.

Article 4.Y.7. Movement control

The Commission considered a Member proposal to recommend the development of Secure Food Supply Plans as part of the contingency plan. The Commission agreed to add the reference to continuity of food supply in the planning phase of the preparedness plan (Article 4.Y.3, point 2d).

Article 4.Y.8. Biosecurity

The Commission agreed with some Member proposals that protection of premises should also include protection against pests and birds, as well as domestic and wild animals.

Article 4.Y.10. Zoning

The Commission agreed with some Member proposals to indicate that regionalisation could be used with the aim of eradication.

The Commission agreed with the opinion of some Members on the need for zoning to be periodically evaluated and to adapt the zones considering the evolution of the disease. The Commission noted that the current text already covers this recommendation.

Rationale for the amendments to:

**CHAPTER 12.10 INFECTION WITH BURKHOLDERIA MALLEI (GLANDERS)
provided by the Scientific Commission for Animal Diseases**

Article 12.10.1. General provisions

The Commission agreed with some Member suggestions of using the term “case” instead of “outbreak” in the chapter, since a single animal could be considered an epidemiological unit. A similar approach was proposed by the *ad hoc* Group on rabies. The Commission also agreed that the Code Commission could consider to revise the definition of ‘epidemiological unit’, taking into consideration the possibility that a single animal may be considered an epidemiological unit.

Article 12.10.8. General principles of surveillance

The Commission disagreed with the proposal to include all three purposes when designing a surveillance system, since some of these points are mutually exclusive.

The Commission agreed with a Member proposal to improve the wording of the paragraph with regard to the implementation and planning of clinical inspections and target serological surveys.

Article 12.10.9. Surveillance strategies

The Commission agreed with a Member comment about the need to consider the expected prevalence of the disease when designing sampling strategies.

In response to a Member comment, the Commission clarified that not all animals with clinical signs would need to be tested for agent identification. However, the provision should give the possibility to test for agent identification even if only serologically positive animals were found.

Rationale for the amendments to:

**CHAPTER 15.1. INFECTION WITH AFRICAN SWINE FEVER VIRUS
provided by the Scientific Commission for Animal Diseases**

Article 15.1.1bis. Safe commodities

The Commission discussed some Member comments about the referral to canned meat and gelatine as safe commodities, without specifications concerning their production methods, as these might vary significantly. The Commission considered that only canned meat produced in accordance with the procedures described in Article 15.1.22. or other standard procedures, such as those recommended by *Codex Alimentarius*, if available, be considered as safe commodities. The same principle should apply to gelatine.

Article 15.1.18. Procedures for the inactivation of ASFV in swill

Concerning a Member question about the scientific rationale for the current inactivation parameters for swill, the Commission referred to the rationale provided by the Code Commission in the report of its meeting in September 2017.

Article 15.1.22. Procedures for the inactivation of ASFV in meat

The Commission considered a Member concerns about the inactivation procedure for dry cured pig meat, the Commission noted that there is scientific evidence demonstrating that drying inactivates ASF virus in meat. However, it indicated that the meat should be completely dried to the core of the meat¹.

¹ McKercher P.D., Yedloutschnig R.J., Callis J.J., Murphy R., Panina G.F., Civardi A., Bugnetti M., Foni E., Laddomada A., Scarano C., Scatozza F. (1987) Survival of Virus in 'Prosciutto di Parma' (Parma Ham). *Food Science Technology*, (20) 267, 272
Mebus C., Arias M., Pineda J.M., Tapiador J., House C., Sanchez-Vizcaino J.M., (1997). Survival of several porcine viruses in different Spanish dry-cured meat products. *Food Chemistry*, (59) 555-559

**ELECTRONIC CONSULTATION OF THE OIE *AD HOC* GROUP ON THE EVALUATION
OF AFRICAN HORSE SICKNESS STATUS OF MEMBERS**

17 October 2017

The OIE *ad hoc* Group on the Evaluation of the African horse sickness (AHS) status of Members (hereafter the Group) was consulted electronically on 17 October 2017.

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

The Group was chaired by Dr Beverley Parker and Dr James MacLachlan acted as rapporteur with the support of the OIE Secretariat. The Group adopted the proposed agenda.

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

2. Evaluation of an application for the official recognition of AHS free status

The Group assessed one request from a Member for the recognition of AHS free country status. The Group concluded that this Member did not meet the requirements of the *Terrestrial Code* and the dossier was referred back to the corresponding Member.

3. Adoption of the report

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

**ELECTRONIC CONSULTATION OF THE OIE *AD HOC* GROUP ON THE EVALUATION
OF AFRICAN HORSE SICKNESS STATUS OF MEMBERS**

17 October 2017

Agenda

1. Adoption of the agenda and appointment of chairperson and rapporteur
2. Evaluation of an application from for the official recognition of AHS free status
3. Adoption of report

Appendix II

**ELECTRONIC CONSULTATION OF THE OIE AD HOC GROUP ON THE EVALUATION
OF AFRICAN HORSE SICKNESS STATUS OF MEMBERS**

17 October 2017

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**ELECTRONIC CONSULTATION OF THE OIE AD HOC GROUP
ON BOVINE SPONGIFORM ENCEPHALOPATHY RISK STATUS EVALUATION
OF MEMBERS**

Paris, 27 October and 24 November 2017

The OIE *ad hoc* Group on Bovine Spongiform Encephalopathy (BSE) Risk Status Evaluation of Members (hereafter the Group) was consulted electronically on 27 October and on 24 November 2017.

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

Dr Noel Murray was appointed Chair and Dr Lucie Carrouée-Pook acted as rapporteur with the support of the OIE Secretariat. The Group endorsed the proposed agenda.

The terms of reference, agenda and list of participants are provided as Appendices I, II and III respectively.

2. Evaluation of applications from Members for the official recognition of their negligible BSE risk status

2.1. Nicaragua

Nicaragua was recognised as having a controlled risk status for BSE in May 2012.

In May 2017, Nicaragua submitted a dossier seeking its recognition as a country presenting a negligible BSE risk status.

The Group requested additional information and received clarification from Nicaragua. Points specifically discussed by the Group are summarised below:

a) Section 1: Risk Assessment — Article 11.4.2. point 1

▪ *Risk assessment for entry of the BSE agent*

The Group noted that regulations were in place to prohibit importations of meat-and-bone meal (MBM) or greaves intended to be used for feeding to ruminants from countries affected by transmissible spongiform encephalopathies (TSEs). While imports of MBM or greaves from TSE affected countries for other purposes were not specifically prohibited by regulations, based on the subsequent clarification provided by Nicaragua, the Group acknowledged that MBM or greaves of ruminant origin had not been imported into Nicaragua within the past eight years for any purpose.

With regard to importations of feedstuff containing MBM or greaves, the Group noted that only pre-packed, retail ready pet food containing MBM was imported into Nicaragua from countries with a negligible or controlled BSE risk status as well as from three countries with an undetermined BSE risk status. The Group noted that under a Ministerial Agreement from 2004, “feed could be imported provided it was either for use by animals not susceptible to BSE or if it was certified that it was not made using ruminant proteins”. In 2011, a further Ministerial Agreement stated that import requirements for animal feedstuffs were to be based on the OIE standards according to the BSE risk status of the exporting country and that it was only permitted to import feed containing MBM if it was intended to be used for feeding mono-gastric animals. Finally, from the additional information provided, the Group noted that since this year imports of feed for mono-gastric animals are prohibited from countries with an undetermined BSE risk status.

The Group noted that Nicaragua conducted a risk analysis and on-site visits to assess the compliance of the exporting countries with an undetermined risk status with the requirements of Chapter 11.4 of the *Terrestrial Code* in view of the importations of pet food containing MBM. In light of Chapter 5.3 of the *Terrestrial Code* describing the principle of equivalence to the measures described in disease-specific chapters, the Group determined that this approach was acceptable.

With respect to importations of live cattle, the Group noted that imports into Nicaragua from three neighbouring undetermined BSE risk countries were recorded until 2015. Further imports from such countries were subsequently banned from 2016, in accordance with a new Ministerial Agreement. The Group examined the sanitary requirements applicable since November 2011 and concluded that they were compliant with the requirements of Article 11.4.9. of the *Terrestrial Code*. However the Group determined that they had been enforced for less than seven years.

With regard to imports of products of bovine origin, the Group noted that various meat and meat products of bovine origin (including viscera, offal, tallow) which are not listed as safe commodities in Article 11.4.1. of the *Terrestrial Code*, were imported from countries having a negligible, controlled or undetermined risk status for BSE. The dossier indicated that for imports from undetermined BSE-risk countries, Nicaragua conducted a risk analysis and on-site visits to assess compliance of the exporting countries with the requirements of Chapter 11.4. of the *Terrestrial Code*. The Group reiterated that in light of Chapter 5.3. of the *Terrestrial Code*, this approach was acceptable. However, the Group noted that the actual sanitary requirements applicable to these importations as well as a more precise description of the products of bovine origin imported (e.g. nature of the viscera and bones) were not provided.

Overall, the Group considered that the conclusion of the entry assessment was that the risk that the BSE agent could have entered Nicaragua during the interval covered by the assessment, although very low, could not be considered negligible.

- *Risk of recycling and amplification of the BSE agent*

The Group noted that, since 2004, the list of tissues defined as specified risk material (SRM) consisted of the tonsils and the distal ileum of cattle of any age, together with the brain, eyes, spinal cord, and dorsal root ganglia of cattle older than 30 months old, as well as the skull and vertebral column from slaughtered cattle older than 30 months. The Group noted that this definition of SRM, which is consistent with Article 11.4.14. of the *Terrestrial Code*, was further extended by an Administrative Resolution in 2016 to include fallen stock and non-ambulatory animals in abattoirs. The Group acknowledged that the extended list exceeded the material listed in Article 11.4.14. of the *Terrestrial Code*.

The Group noted that about 80% of the cattle were slaughtered in six industrial slaughterhouses and the remaining 20% were slaughtered in municipal slaughterhouses.

The Group acknowledged that in industrial slaughterhouses, protocols for the removal, segregation, identification and destruction of SRM through incineration have been implemented and supervised by government inspectors from the Official Meat Inspection Service (IPSA) since 2004. The Group also took note that offal from municipal slaughterhouses may be used for local human consumption. The Group acknowledged that other wastes from municipal slaughterhouses, as clarified in response to a follow-up question, is disposed of in a municipal dump. Animals that die on farm are either burnt or buried. All non-ambulatory and condemned animals that arise in industrial abattoirs are incinerated on-site with the ash subsequently buried.

Based on the information provided, the Group also noted that live cattle imported for slaughter were processed in one of the six industrial scale slaughterhouses. Cattle imported for breeding may have been subsequently slaughtered in one of these facilities where their SRM would have been removed segregated and destroyed as previously outlined. An unspecified number of breeding cattle would also have been slaughtered in municipal abattoirs with any waste being consumed by the low income population or disposed of in municipal dumps.

Overall, the Group determined that SRM from all industrial abattoirs as well as all waste not intended for human consumption from municipal abattoirs, including fallen stock, non-ambulatory and condemned animals were excluded from materials sent for rendering and that oversight verifying the exclusion of these materials was provided by the Official Meat Inspection Service (IPSA).

The Group acknowledged that since 2001, non-SRM ruminant waste materials, which are rendered, have been processed under high temperature and pressure (133°C, for at least 20 minutes with a minimum absolute pressure of 3 bars). This is in compliance with the procedures for the reduction of BSE infectivity in MBM as outlined in Article 11.4.19. of the *Terrestrial Code*. In addition, the Group noted that no rendering plants processed materials or waste from external sources, but only materials or waste from industrial slaughterhouses, which all destroy SRM by incineration.

The Group acknowledged that legislation prohibiting the feeding of cattle with feed of bovine origin has been in force since 2001, followed by an enhanced ruminant-to-ruminant feed ban in 2011. This legislation was subsequently amended in 2016 to a cattle-to-ruminant ban. However, in the additional information provided, Nicaragua clarified that by-products of other ruminants than cattle were not processed in Nicaragua, and the ban had still the same practical effect as a ruminant-to-ruminant feed ban.

Overall, regarding the exposure assessment, the Group concluded that the risk of recycling and amplification of the BSE agent if it was present in Nicaragua's cattle population during the interval covered by the assessment has been negligible.

- *Appropriate level of control and audit of the feed ban*

The Group reviewed the information provided by Nicaragua on inspection oversight conducted by government inspectors in rendering plants processing ruminant material or mixed species containing ruminant material and in ruminant feed mills within the past eight years (2009-2016).

The Group noted that microscopy is used to detect bone fragments as a check for cross-contamination in feed mills. The Group pointed out that microscopy could only differentiate between materials derived from terrestrial animals and that originating from aquatic animals. While Nicaragua's feed ban prohibits cattle MBM from being fed to all ruminants, based on the information provided for the preceding eight years and considering that alternative tests such as PCR are not used to distinguish between species, in practice, and although not supported by a specific regulatory framework, the corrective actions that have been implemented as a result of

any positive microscopic findings in samples of feed for livestock are consistent with those taken under a more extensive terrestrial animals to ruminants feed ban. The establishment of separate production lines and the establishment of single conveyors for the application of MBM in the mixer were implemented from 2011, less than eight years ago. Where separate production lines could not be established, the use of MBM in the feed mill was suspended or the authorisation of the feed mill withdrawn.

Considering that correctives actions were implemented as a result of the presence of any positive microscopic findings, the Group concluded, that a de facto ban on feeding ruminants with terrestrial animal proteins has been implemented in Nicaragua for the preceding eight years.

The Group noted that the use of PCR as an alternative or additional test for checking for potential cross-contamination of cattle feed with MBM of ruminant origin may be advisable as it would increase the specificity of the diagnostic process. However, the Group was of the opinion that a de facto terrestrial animals to ruminant feed ban, if consistently implemented, provided sufficient guarantees of appropriate level of control and audit of the feed ban. Nevertheless, the Group noted a potential issue concerning the sustainability of this approach (implementation of a de facto terrestrial animals to ruminant feed ban) as the lack of legal basis exposed the administration to possible litigations and enforcement difficulties.

The Group assessed in detail the fact that the legislation to separate production lines of ruminant and monogastric feed in feed mills has only been in force since 2011 (i.e. less than 8 years) and the sustainability of a de facto terrestrial animals to ruminant feed ban in the absence of supporting legal regulations. However, the Group ultimately concluded that Nicaragua provided convincing evidence that the various layers of mitigating measures had been implemented for more than 8 years, in light of Article 5.3.2. of the *Terrestrial Code* which defines the principle of “equivalence of sanitary measures”, according to which “significantly different systems and measures may achieve equivalent animal and human health protection”. Overall, the Group concluded that an appropriate level of control and audit of the proper implementation of the feed ban had been in force for at least eight years (cf section f).

b) Surveillance according to Articles 11.4.20. - 11.4.22.

The Group noted that the surveillance undertaken over the seven year period from 2010 to 2016 exceeded the minimum requirements of type B surveillance according to Article 11.5.22. on surveillance for BSE in the *Terrestrial Code*. Based on the information provided in the dossier, 470,362 surveillance points were collected, compared to a minimal requirement of 150,000 for an adult cattle population of 2,400,000 over two years of age.

The Group acknowledged that Nicaragua’s surveillance programme for BSE targeted all surveillance streams, however, it was noted that clinical suspects was the most represented stream. Overall, clinical suspects contributed 99.8% of the surveillance points collected over the period 2010-2016. This high number of clinical suspects was justified by Nicaragua by the occurrence of "derrenge" in cattle in the dry season, a condition due to toxic plants producing alkaloids (pyramid flower: *melochia pyramidata*, *Lantana camara*). The Group pointed out that, both official and private veterinarians should be aware of the clinical symptoms caused by this common intoxication and should therefore try to distinguish them from any eventuality that could give rise to a suspected BSE case.

Importantly, the Group recommended that Nicaragua should consider increasing the number of samples collected through other surveillance streams.

c) **Other requirements — Article 11.4.2. points 2–4**▪ *Awareness programme*

The Group noted that an awareness program on BSE was initiated in 1996 and was formalised throughout the country in 2004. The Group appreciated that this programme appeared to be both comprehensive and broad in scope, covering all relevant sectors, and acknowledged that it was supported by a range of materials including presentations, newsletters, murals, calendars, and leaflets. The Group concluded that this awareness programme met the requirements of the *Terrestrial Code*.

▪ *Compulsory notification and investigation*

The Group noted that BSE has been declared to be a notifiable disease under relevant legislation since 1998. The Group appreciated that the compulsory notification of cattle displaying clinical symptoms suggestive of BSE was supported by training and awareness programmes, a 24-hour free hotline, financial compensation (although details were not provided) and sanctions under the law for failing to report. The Group therefore concluded that the system for compulsory notification and investigation met the requirements of the *Terrestrial Code*.

▪ *Laboratory examination*

The Group noted that within the last seven years BSE diagnosis was conducted in the Central Veterinary Diagnostics and Food Microbiology Laboratory (LCDVM) based on histopathology and immunohistochemistry. Immunohistochemistry was performed on suspicious samples arising from histopathology and on a random selection of non-suspicious histopathological samples. The Group pointed out that according to Chapter 2.4.5. of the *Terrestrial Manual*, histopathology was no longer a diagnostic method of choice for the investigation of clinical suspects or the screening of healthy populations but could “be used in some situations”.

The Group recommended that Nicaragua undertake all tests for BSE using methods recommended by the *Terrestrial Manual*: i.e. immunohistochemistry (or rapid tests for the active surveillance streams).

The Group acknowledged that the LCDVM operated under ISO17025. However, the Group pointed out that immunohistochemistry as performed at the LCDVM has not been validated to date and that the LCDVM has not been accredited for the diagnosis of BSE, although a request for accreditation for BSE diagnosis is planned to be made in 2018.

Overall, and consistent with previous positive evaluations of the negligible BSE risk status of countries using histopathology, the Group concluded that the laboratory examination for BSE carried out in Nicaragua could be considered to be compliant with the *Terrestrial Manual* for at least the preceding seven years.

The Group suggested that the Biological Standards Commission review Chapter 2.4.5 of the *Terrestrial Manual* and clarify whether testing by histopathology, a method known to be of limited sensitivity, was acceptable and, if so, under what circumstances. Should histopathology be no longer considered to be acceptable for the purpose of surveillance by the Biological Standards Commission, the Scientific Commission for Animal Diseases may need to ensure, through the review of the annual reconfirmations for BSE, that all countries currently recognised as having negligible risk status transition to performing BSE testing with methods recommended by the *Terrestrial Manual*.

d) BSE history in the country

The Group acknowledged that BSE had never been reported in Nicaragua.

e) Compliance with the questionnaire in Article 1.6.5.

The Group agreed that the dossier submitted was mostly compliant with the format of the questionnaire of Article 1.6.5. of the *Terrestrial Code* for Member Countries. However, the Group pointed out that the extensive number of appendixes (42) led to significant challenges in undertaking an evaluation of this application. Furthermore, it is noteworthy that the answers provided for a number of questions in the original dossier seeking recognition of negligible BSE risk status were inadequate. This resulted in additional questions being raised with Nicaragua on several occasions seeking a more detailed explanation together with appropriate supporting evidence.

f) Conclusions

It has to be noted that whilst the majority of the Group was confident that an appropriate level of control and audit of the proper implementation of the feed ban had been in force for at least eight years, two experts expressed concerns over the fact that the legislation to separate production lines of ruminant and monogastric feed in feed mills has only been in force since 2011 (i.e. less than 8 years) and one expert expressed concerns over the sustainability of a *de facto* terrestrial animals to ruminant feed ban in the absence of supporting legal regulations. However, the Group ultimately concluded that Nicaragua provided convincing evidence that the various layers of mitigating measures had been implemented for more than 8 years, in light of Article 5.3.2. of the *Terrestrial Code* which defines the principle of “equivalence of sanitary measures”. A consensus was reached and the Group determined that an appropriate level of control and audit of the proper implementation of the feed ban had been in force for at least eight years. Importantly, in order to ensure the continuous implementation of appropriate mitigating measures, the Group recommended that future submissions for annual reconfirmation of Nicaragua’s negligible BSE risk status should be comprehensively reviewed by the Scientific Commission for Animal Diseases (see section Recommended status).

- *Recommended status*

Considering the information submitted in the dossier and Nicaragua’s answers to the questions raised, the Group concluded that the application was compliant with the requirements of Article 11.4.3. and with the questionnaire in Article 1.6.5. of the *Terrestrial Code*. The Group therefore recommended that Nicaragua be recognised as a ‘negligible BSE risk’ country.

However, the Group advised that Nicaragua should:

- continue to remove and exclude SRM, including fallen stock, condemned and non-ambulatory animals from raw waste material that is rendered for the production of MBM;
- continue to ensure that all non-SRM ruminant waste materials that are rendered are processed under high temperature and pressure (133°C, for at least 20 minutes with a minimum absolute pressure of 3 bars);
- consider using an alternative or additional method to check for potential cross contamination in feedstuffs such as PCR that is more specific than microscopy as it enables taxonomic identification to be undertaken, unless Nicaragua decides to align its legal basis with the current *de facto* terrestrial animals to ruminants feed ban;
- increase the number of samples collected through surveillance streams other than clinical suspects;
- perform all testing for BSE using methods recommended by the *Terrestrial Manual* (i.e. immunohistochemistry -or rapid tests-);
- consider obtaining accreditation and establishing a quality assurance system for the diagnostic methods used to detect BSE infected animals.

In order to assess the progress made along these recommendations, as well as to monitor the continuous implementation of the feed ban and subsequent corrective actions, and to check the continuous removal of SRM, the Group recommended that future annual reconfirmations of Nicaragua's negligible risk status should provide the above-mentioned information and be comprehensively reviewed by the Scientific Commission for Animal Diseases.

2.2. Other Member request

The Group assessed another request from a Member for the recognition of its BSE negligible risk status. The Group concluded that this Member did not meet the requirements of the *Terrestrial Code* and the dossier was referred back to the corresponding Member.

3. Finalisation and adoption of the draft report

The Group reviewed and amended the draft report. The Group agreed that the report reflected the discussions.

.../Appendices

Appendix I

**Terms of Reference and working procedure
for evaluating dossiers for official recognition of BSE risk status
2017 – Electronic consultation**

1. Prerequisites

All experts should:

- a) Sign off the OIE Undertaking on Confidentiality of information, if not done previously;
- b) Complete the Declaration of Interests Form and forward it to the OIE at their earliest convenience, and at least two weeks before the teleconference.

2. To prepare the BSE *ad hoc* Group teleconference

Upon reception of an application from a Member Country, the Status Department (SD) conducts a preliminary screening to check the conformity of the dossier (structure of the dossier in accordance with the SOP and with the relevant questionnaire, main sections of the questionnaire, regular notification to the OIE, payment of the fee, PVS report, etc.). If an information gap is identified, the SD requests additional information to the country. When needed, the SD undertakes translation into English of the dossier or main parts of it.

The SD sends the working documents to the experts of the *ad hoc* Group (AHG), including the dossiers received from applicant countries **at least 1 month before the AHG meeting**. Translations may be forwarded later.

The SD suggests the nomination of a chair and rapporteur, for the Group's consideration. The chair will lead the electronic discussion and the rapporteur will ensure that the report reflects the discussion and captures the detailed assessment of the dossier.

All experts should:

- a) Evaluate and study in detail the dossiers provided by the OIE;
- b) Take into account any other information available in the public domain that is considered pertinent for the evaluation of the dossiers;
- c) Summarise the dossiers according to the *Terrestrial Animal Health Code (Terrestrial Code)* requirements, using the form provided by SD (Appendix A);
- d) Draft the questions, whenever the analysis of the dossiers raises questions which need to be clarified or "completed" by the applicant Member Countries.
- e) Send the completed form for each dossier and the possible questions to the SD, **10 days before the teleconference**.
- f) The SD compiles the forms and the questions to be forwarded to the applicant Member Countries before the teleconference.

The experts can request support from the SD at any time.

The SD will consider the available PVS report and share with the experts any concern. As they are bound by the OIE rules on confidentiality of information, the experts may request the OIE PVS reports if not obsolete or confidential. They may also take into account any other information available in the public domain that is considered pertinent for the evaluation of dossiers.

3. During the BSE *ad hoc* Group teleconference

During the teleconference, the Chair is requested to lead the discussion. All experts should:

- a) Mention any potential conflict of interest and if relevant, withdraw him/herself from the discussion;
- b) Contribute to the discussion.

The Group may determine that additional information should be requested to the applicant countries before an informed conclusion can be drawn.

4. After the BSE *ad hoc* Group teleconference

If the Group decides during the teleconference that additional information should be requested to the applicant countries, via the SD, the responses are sent by email to the Group by the SD. The Chair is responsible for coordinating the finalisation of the assessment and for ensuring that the views of all Group members on the additional information received are taken into consideration.

The SD with the support of the rapporteur provides a draft report no more than seven days after the teleconference (no later than 31 October 2017) and circulates it to the AHG. The AHG finalises the report within the following week (indicative deadline: 7 November 2017).

The Chair may determine that a second teleconference is needed for the Group to further discuss before finalising the report.

It is recommended that the report follows a structure based on the list of requirements of the *Terrestrial Code* followed by a discussion, the conclusion and the recommendation(s) to the Scientific Commission (Appendix B). The report should state clearly the conclusions of the AHG and its recommendations to the Scientific Commission for Animal Diseases (Scientific Commission). The rationale of each observation and recommendation should be described to facilitate understanding by the Scientific Commission and communication between the OIE and the applicant Member Country.

The SD circulates the final version of the report to the Group once endorsed by the Scientific Commission.

Appendix II

**ELECTRONIC CONSULTATION OF THE OIE *AD HOC* GROUP
ON BOVINE SPONGIFORM ENCEPHALOPATHY RISK STATUS EVALUATION
OF MEMBERS
Paris, 27 October and 24 November 2017**

Agenda

1. Adoption of the agenda and appointment of chairperson and rapporteur
 2. Evaluation of applications from Member Countries for official recognition of BSE negligible risk status
 - 2.1. Nicaragua
 - 2.2. Other Member Country request
 3. Finalisation and adoption of report
-

Appendix III

**ELECTRONIC CONSULTATION OF THE OIE AD HOC GROUP
ON BOVINE SPONGIFORM ENCEPHALOPATHY RISK STATUS EVALUATION
OF MEMBERS**

Paris, 27 October and 24 November 2017

List of participants

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**MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION
OF FOOT AND MOUTH DISEASE STATUS OF MEMBERS**

Paris, 6 – 9 November 2017

A meeting of the OIE *ad hoc* Group on the Evaluation of Foot and Mouth Disease (FMD) Status of Members (hereafter the Group) was held at the OIE Headquarters from 6 to 9 November 2017.

1. Opening

Dr Monique Eloit, Director General of the OIE, welcomed and thanked the Group for its commitment and its extensive support towards the OIE in fulfilling the mandates given by Members. She extended her appreciation to the institutions that kindly allowed the experts to participate in the meeting.

Dr Eloit acknowledged the work and efforts required in reviewing the applications, and made a remark on the recently published procedures for assessing the OIE official status recognition with a vision to increase the transparency and international acceptance of the evaluation process. The OIE was working, in collaboration with the World Trade Organization (WTO), to ensure that the procedure for official status recognition granted by the World Assembly of Delegates to eligible Members was considered an international standard. Dr Eloit also mentioned the ongoing work on the development of similar documented procedures for the publication of self-declarations of freedom from OIE-listed diseases, which excludes the six diseases that are part of the OIE official status recognition procedure.

Dr Eloit reminded the Group on the sensitivity and confidentiality of the dossiers received for official recognition and thanked the experts for having signed the forms for undertaking of confidentiality and also mentioned that if any members of the Group had any conflict of interest in the evaluation of a dossier, the expert(s) should withdraw from the discussions and decision making of the particular application.

Dr Eloit encouraged the Group to continue providing detailed feedback to all countries, and highlighted the importance of the quality of the public report to be scrutinised by Members before adopting the proposed list of countries and zones free from FMD and of countries having an endorsed official control programmes for FMD by the OIE.

Dr Min-Kyung Park, Chargée de mission of the Status Department, introduced Dr Hernán Oliver Daza, who joined the Status Department to work on the activities related to official disease status recognition.

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

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

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

3. Evaluation of requests from Members for the status recognition of FMD free countries where vaccination is not practised

3.1 Peru

Peru was recognised as having two separate zones free from FMD, officially recognised by the OIE and covering its entire territory, since May 2013. One zone consists of three merged zones, as designated by the Delegate of Peru in the documents addressed to the Director General in December 2004, in January 2007 and in August 2012, where vaccination is not practised. The other zone consists of the regions of Tumbes and parts of Piura and Cajamarca regions where vaccination is practised as designated by the Delegate of Peru in a document addressed to the Director General in August 2012 (hereafter, the north-western zone).

In January 2017, the Delegate of Peru informed the OIE of the cessation of vaccination in the north-western zone, as of 1 January 2017, in accordance with the provisions of Article 8.8.3. of the Terrestrial Animal Health Code (Terrestrial Code).

In September 2017, Peru submitted an application to change the current FMD free status of the north-western zone where vaccination is practised to a FMD free zone where vaccination is not practised, as well as to merge this zone with the current FMD free zone where vaccination is not practised, implying a request for Peru to be officially recognised as a country free from FMD where vaccination is not practised. The Delegate of Peru confirmed the application as such.

The Group requested additional information and received clarification from Peru.

i. Animal disease reporting

The Group acknowledged that Peru had a record of regular and prompt animal disease reporting.

ii. Veterinary Services

The Group agreed that the Veterinary Authority had current knowledge of and authority over FMD susceptible animals in the country. The Group was informed of the OIE FMD missions in Peru with regard to FMD that took place in 2012 and in 2014. The dossier indicated the collaborative efforts of Peru in recent years with a bordering country in improving the control of the movement of animals and the animal health situation. The Group encouraged the continuation of these efforts.

iii. Situation of FMD in the past 12 months

The Group noted that the last FMD outbreak in the north-western zone was in 1999 in Piura. The last FMD outbreak in the country was reported in 2004 in the district of Lurin, situated in the other zone.

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

The Group noted that in the north-western zone, which represents 1.64% of Peru's territory and 2.4% of the national cattle population, systematic vaccination had ceased in January 2017. The intended cessation of vaccination in this zone was communicated to the OIE in Peru's 2016 annual reconfirmation of its FMD free zone status and this cessation was confirmed in a letter of the Delegate of Peru to the OIE Director General in January 2017.

The Group noted that, by the time the application is assessed by the Scientific Commission for Animal Diseases (Scientific Commission), it would be 12 months since vaccination had ceased and Peru would therefore comply with Article 8.8.2. (point 2b). Since the cessation of vaccination, introduction of vaccinated animals has not been allowed into the north-western zone.

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

The Group was informed that active and passive surveillance were in place in the entire country, with the participation of private veterinarians who are legally bound to report any suspicions of vesicular diseases. The Group received details on the design of the non-structural protein (NSP) serological survey and on population immunity in the north-western zone performed during July and August 2017. The Group noted that population immunity levels were low. However, this was no longer of concern to the Group as vaccination had ceased. Surveillance in slaughterhouses was registered and supervised by the veterinary authority of Peru.

Peru stated that, since small ruminants are not vaccinated, clinical signs should be obvious. The Group would draw the attention of Peru to the fact that subclinical FMD infection in these species is common.

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

The Group received sufficient assurance of regulatory measures described in the dossier for the early detection, prevention and control of FMD in the north-western zone. The additional information submitted by Peru also clarified the use of diagnostic tests, procedures on sampling and management of results.

The Group strongly encouraged Peru for continuous training of laboratory staff for maintenance of laboratory capacity and recommended a PCR be established and added to the available suite of tests for FMD diagnosis.

vii. *Description of the boundaries and measures of a protection zone, if applicable*

Not applicable.

viii. *Description of the system for preventing the entry of the virus*

The Group noted that official procedures were in place for the control of movements. Peru's current legislation indicates that animals should be identified by branding, and ear tags should be used to identify cattle from intensive cattle breeding establishments. Since 2012, progress had been made on an individual animal identification and traceability system, as a key method for animal movement control in the north-western zone.

The additional information submitted by Peru also described the quarantine procedures and border control with confiscation of illegally introduced animals, animal products and veterinary medicinal products.

The Group strongly reminded Peru that the import of vaccinated animals would not be allowed, in accordance with Article 8.8.2. of the *Terrestrial Code*, and noted the availability of an animal identification system supporting the early detection of illegal introduction of live animals.

ix. *Compliance with the questionnaire in Article 1.6.6.*

The Group agreed that the format of the dossier was compliant with the questionnaire in Article 1.6.6.

Conclusion

Considering the information submitted in the dossier and the answers from Peru to the questions raised, the Group considered that the application was compliant with the requirements of Chapter 8.8. and with the questionnaire in Article 1.6.6. of the *Terrestrial Code*. The Group therefore recommended that Peru be recognised as a FMD free country where vaccination is not practised.

The Group underlined that, having a FMD free country status where vaccination is not practised, introduction of vaccinated animals or incursion of FMD into Peru would now lead to the suspension of the official FMD free status of the entire country.

Finally, the Group emphasised that movement control between the two separate officially recognised zones should be maintained until the FMD free country status is officially recognised by the World Assembly.

3.2 Suriname

In September 2017, the Delegate of Suriname submitted an application to the OIE to be officially recognised as a country free from FMD where vaccination is not practised.

The Group took note of the favourable location of Suriname as it borders officially recognised FMD free countries or zones with the exception of a 50-km border with the State of Amapá of Brazil, which is in a densely forested and sparsely populated area. In addition, FMD had never been reported in Suriname.

In accordance with the established procedures, the participating expert working in Brazil expressed a possible conflict of interest and withdrew from the decision process on Suriname's dossier.

The Group requested additional information and received clarification from Suriname.

i. Animal disease reporting

The Group acknowledged that FMD is a notifiable disease in the country as per legislation since 1954. Whilst FMD was never reported in Suriname, occurrence of other major diseases listed under the legislation had been reported to the OIE. The Group considered that Suriname had a system of regular and prompt animal disease reporting. The Group encouraged Suriname to keep systematic records of information on the investigations and outcome of events giving rise to suspicion of FMD or other vesicular diseases.

ii. Veterinary Services

The dossier provided a description of the organisation of the Veterinary Services of Suriname including the small number of veterinarians and veterinary paraprofessionals of the country. It was reported that Suriname's official Veterinary Services is under the Ministry of Agriculture Animal Husbandry and Fisheries; a department of animal production and health has a technical division responsible for animal disease surveillance and food safety in the country.

The Group considered the PVS report of Suriname in 2012. The dossier provided information on the progress made in the past five years, particularly in the important areas for a country having an official recognition of FMD free status.

iii. Situation of FMD in the past 12 months

The Group noted that FMD had never been reported in the country, neither in domestic nor in wild animals. Therefore, Suriname was eligible for historical freedom from FMD as described in Article 1.4.6. of the *Terrestrial Code*.

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

The Group noted that vaccination against FMD had never been carried out in Suriname. The Group also acknowledged that there was no introduction of vaccinated animals into Suriname for at least the last 24 months. The Group strongly recommended that Suriname considers, in its official regulations, preventing importation of vaccinated animals into the country, as introduction of vaccinated animals is not allowed, in accordance with the requirements of Article 8.8.2. of the *Terrestrial Code*.

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

The Group noted that surveillance was based on inspection in slaughterhouses and by field units, veterinary laboratory results, and passive surveillance. Whilst pathogen-specific surveillance was not mandatory according to Article 1.4.6. of the *Terrestrial Code*, the Group commended the efforts of Suriname in conducting active surveillance through a serological survey in 2017 and providing supportive information substantiating the absence of FMDV infection in the country. While the Group noted that the survey design prevalence between herds was rather high, considering the historical FMD situation and unvaccinated population, the Group considered the overall surveillance as satisfactory to substantiate absence of FMDV infection.

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

The Group noted that most of the livestock and people are resident in the northern coastal part of the country. The dossier described investigative and periodic farm visits by the Veterinary Services as part of clinical surveillance activities for the early detection of FMD in the field.

The Group noted that Suriname had no formal legislation on swill feeding, and recommended that regulations be developed according to Article 8.8.31. of the *Terrestrial Code*. Furthermore, considering the fact that Suriname had acquired PCR equipment and had received relevant training, the Group strongly encouraged that RT-PCR be employed for strengthening the FMD diagnostic capacity as part of the early detection system.

In general, the Group considered that sufficient regulatory measures were described in the dossier for the early detection, prevention and control of FMD.

vii. *Description of the boundaries and measures of a protection zone, if applicable*

Not applicable.

viii. *Description of the system for preventing the entry of the virus*

The Group noted that the Port Health Unit was in charge of border control and the Veterinary Services did not have inspectors permanently stationed at every port of entry. Nevertheless, a strong working relationship appeared to be in place between the Customs Services and Police at the ports of entry and internal control posts. Furthermore, from the additional information submitted by Suriname, the Group noted the directions on waste disposal from international traffic as part of the recently updated contingency plan. The Group would strongly recommend that these procedures are fully implemented, and documented evidence be submitted to the OIE.

The Group also took note that the legislation of 1961 for importing products of animal origin had been recently updated and a detailed list of the updated changes were provided.

ix. *Compliance with the questionnaire in Article 1.6.6.*

The Group agreed that the format of the dossier was compliant with the questionnaire in Article 1.6.6.

Conclusion

Considering the information submitted in the dossier and the answers from Suriname to the questions raised, as well on the basis of historical freedom, the Group considered that the application was compliant with the requirements of Chapter 8.8., Article 1.4.6 and with the questionnaire in Article 1.6.6. of the *Terrestrial Code*. The Group therefore recommended that Suriname be recognised as a FMD free country where vaccination is not practised.

The Group recommended that the following information be submitted to the OIE when Suriname reconfirms its FMD status (also detailed in the relevant sections above) in November 2018 and 2019:

- Established official regulations on preventing introduction of vaccinated animals into the country, in accordance with the requirements of Article 8.8.2. of the *Terrestrial Code*;
- Established regulations on swill feeding, according to Article 8.8.31. of the *Terrestrial Code*;
- Compiled comprehensive records of FMD suspicions and follow-up investigations;
- Full implementation of the recently updated measures for disposal of waste from international traffic;
- Evidence on training of laboratory staff and utilisation of RT-PCR for strengthening the FMD diagnostic capacity as part of the early detection system.

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

4.1 Brazil

In September 2017, Brazil submitted an application for the recognition of an extended FMD free zone practising vaccination. This included the states of Amapá, Amazonas, Roraima and two parts in the State of Pará that acted as protection zones. There are two non-contiguous parts to this area, described in the dossier as: one comprising of Amapá and part of the State of Pará (Region 1), and the other comprising Roraima (Region 2), and Amazonas and another part of the State of Pará (Region 3) (hereafter "the proposed FMD free area"; see **Figure 1**).



Figure 1 – Proposed FMD free areas without an OIE official status for FMD (in hash marks), and already officially recognised FMD free zones with and without vaccination (in colours)



Figure 2 – Proposed FMD free areas to be merged with two zones already recognised as FMD free with vaccination for potential recognition in May 2018 (in yellow)

The Group noted that the proposed FMD free area is heavily forested with localised human and livestock populations and large areas that contain few people or domestic animals. Overall, the livestock population is less than 2.5 million, mainly cattle and buffalo representing less than 1% of the Brazilian herds. Buffalo are particularly found in Amapá. There are few small ruminants and pigs. The dossier indicated that the area is a net importer of meat from the rest of Brazil.

Brazil also requested that this new FMD-free area be merged with two zones already officially recognised as free from FMD and practising vaccination: a zone consisting of the states of Rondônia and Acre along with two adjacent municipalities of the state of Amazonas and a zone consisting of the states of Espírito Santo, Minas Gerais, Rio de Janeiro, Sergipe, Distrito Federal, Goiás, Mato Grosso, Paraná, São Paulo, Bahia, Tocantins, Alagoas, Ceará, Maranhão, Paraíba, Pernambuco, Piauí, Rio Grande do Norte, and parts of Pará and Mato Grosso do Sul. The Group noted that the new merged zone comprises most of Brazil, apart from State of Rio Grande de Sul and the former high surveillance zone covering part of Mato Grosso do Sul (FMD free zones where vaccination is practised) and the State of Santa Catarina (FMD free zone where vaccination is not practised) (see **Figure 2**).

The Group also noted that with the submitted application of an extended FMD free zone, the entire territory of Brazil would have an OIE recognised FMD free status, with or without vaccination.

In accordance with the established procedures, the participating expert working in Brazil expressed a possible conflict of interest and withdrew from the decision making on Brazil's dossier.

The Group requested additional information and received clarification from Brazil.

i. Animal disease reporting

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

ii. Veterinary Services

The Group was informed that Brazil had received a PVS follow-up evaluation mission in 2014. The PVS report provided additional guarantee that the Veterinary Services were compliant with the requirements for a country having FMD free zones. Furthermore, according to the dossier, in the last five years, Brazil had received at least 19 missions in the animal health field, during which the official veterinary services was evaluated, often leading to adjustments in further strengthening the capacity of the Veterinary Services.

iii. Situation of FMD in the past 2 years

The last FMD outbreaks in the proposed FMD free area, previously not having a FMD free status, were in 2004 (Amazonas, serotype C), 2001 (Roraima, serotype A) and 1999 (Amapá, serotype A).

iv. Routine vaccination and vaccines

The dossier mentioned that cattle and buffalo should be vaccinated against FMD.

The Group noted that the characteristics of the vaccine and the standards for producing it are laid down by the Ministry of Agriculture, Livestock and Food Supply (MAPA), following OIE recommendations given in its *Manual of Diagnostic Tests and Vaccines for Terrestrial Animals (Terrestrial Manual)*. The vaccine authorised for use in Brazil is inactivated and trivalent, with an oil adjuvant and containing viral strains A24 Cruzeiro, O1 Campos and C3 Indaial. These vaccine strains were selected on the basis of analyses performed by the Pan-American Center for Foot-and-Mouth Disease (PANAFTOSA), in order to provide suitable immunological correspondence with field strains prevalent in South America. Most recently, an assessment had been made of the suitability of O1 Campos for use against the serotype O viruses obtained from Colombia in 2017; an expectancy of protection value of 76% was obtained, which was above the 75%-threshold for acceptance.

As mentioned in the dossier, a recent study by PANAFTOSA concluded that there was negligible risk of circulation of FMDV serotype C in the region, and during the meeting of COSALFA 44, held this year, the countries signed a Resolution IV, recommending suspension of vaccination for that serotype. The Group took note that in Brazil, removal of strain C3 Indaial from the vaccine will be coordinated by MAPA, following a schedule yet to be defined.

The Group noted that in the proposed FMD free area there is a strategy of twice yearly herd vaccination of cattle and buffalo, except for Region 1, where vaccination is annual, since the predominant climate characteristics enable cattle handling only for a limited period in the year. Vaccine coverage rates were estimated from farmer reports backed up by veterinary spot-checks. The average percentage of holdings with vaccination records was 91% (standard deviation = 9%), and the percentage of cattle and buffalo notified as vaccinated was 96% (standard deviation = 3%). A population immunity survey was conducted using a subset of the sera collected in 2015 for a NSP sero-survey. Sampling was mostly carried out within a couple of months of vaccination, irrespective of vaccination status. This showed immunity levels of between 33% and 69% in 6-12 month old animals, rising to 58% to 90% in 18-24 months old animals.

v. Surveillance for FMD and FMDV transmission in accordance with Articles 8.8.40. to 8.8.42.

The Group was given details of the active and passive surveillance that were in place. For example, substantial numbers of suspect vesicular cases were investigated in the last two years, and the targeting of clinical patrols to high risk holdings and the inspections at slaughterhouses were described in the dossier. NSP sero-surveys to detect FMDV transmission were carried out in 2014/15 and 2017. The 2014/15 survey was a large randomised one with a design prevalence of 1% at the between herd level and 5-10% at the within herd level. In total, 34,693 animals were sampled.

The survey and its findings were reported in detail in the dossier and follow-up clarifications provided to the Group. Differences in the overall low seroprevalence rates between the three Regions (ranging from 0%, in Region 1, to 0.41% in the Rio Solimões subpopulation within Region 3) of the proposed FMD free area remain unexplained, but it was concluded that there was no virus circulation, after follow-up of the NSP sero-reactor animals including a possible clustering effect. The 2017 survey was a smaller and risk-based study in which 3,982 animals were sampled, in which no evidence of FMDV transmission was found.

Considering the great costs and effort required to undertake large scale sero-surveys to detect FMDV transmission and infection (or demonstrate the absence of such), the Group encouraged Brazil to continue investigating all positive findings, and where necessary, further holdings and animals linked by proximity or other connections should be examined and sampled.

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

The Group noted sufficient regulatory measures in place described in the dossier for the early detection, prevention and control of FMD, as implemented in other zones already officially recognised as free from FMD.

vii. Description of the boundaries of the proposed free zone

The proposed extended zone includes the states of Amapá, Amazonas, Roraima and parts of the state of Pará and the two zones already officially recognised as free from FMD: a zone consisting of State of Rondônia, State of Acre along with two adjacent municipalities of State of Amazonas and a zone consisting of States of Espírito Santo, Minas Gerais, Rio de Janeiro, Sergipe, Distrito Federal, Goiás, Mato Grosso, Paraná, São Paulo, Bahia, Tocantins, Alagoas, Ceará, Maranhão, Paraíba, Pernambuco, Piauí, Rio Grande do Norte, and parts of Pará and Mato Grosso do Sul.

Three neighbouring countries to the north were not recognised free from FMD at the time when the application was assessed. The Group noted that the FMD outbreaks recently reported in Colombia in June/July 2017 were more than 500-km from the border to Brazil (Amazonas). Most border areas were considered low risk due to jungles and rivers and few livestock and people.

viii. Description of the boundaries and measures of a protection zone, if applicable

In the dossier, Brazil explained the need to establish a small protection zone at Pacaraima within Region 2, where there is a town and a main road crossing the border with a neighbouring country without an official FMD free status. The dossier provided its boundaries, which consisted of a 32-km strip of approximately 1-km width on the Brazilian side of the border. This protection zone was to be included as part of the extended FMD free zone, but Brazil described in the additional information that the separation of the protection zone could be achieved based on natural barriers in case of eventual disease introduction. This would facilitate the establishment of a containment zone in case of incursion of FMD in the protection zone. The Group noted from the dossier that within the protection zone the Veterinary Services take specific actions, the most important of which were stated as:

- long-term individual identification of all cattle, buffalo and small ruminants on holdings and in indigenous communities along the international border;
- supply of vaccine and performing official vaccination in herds on the international border;
- keeping mobile surveillance teams in the region to act in strategic locations and with a frequency established on the basis of local know-how and local risk estimates;
- specific controls of animal movements, demanding prior authorisation for movements of animals both inwards and outwards from the protection zone, with a description of the travel route, for which passage by fixed inspection posts is mandatory.

ix. *Description of the system for preventing the entry of the virus*

The proposed FMD free area was bordering three countries not recognised free from FMD.

The Group noted that specific surveillance actions were taken by Brazil's Veterinary Services at the border with a neighbouring country without an OIE officially recognised FMD status. The government authorities of both countries had set up inspection and control posts. The dossier described that a MAPA inspection post was in place, at the point of entry, along a single highway into Brazil, as well as specific army, federal police and customs posts. In addition, there was a State Veterinary Service inspection post at the point of exit from the municipality of Pacaraima to boost this inspection system for the ingress and flow of animals and animal products potentially posing risk for introduction of FMD.

The Group acknowledged that Brazil had sufficient measures for preventing the entry of FMDV with the implementation of fixed inspection posts and the establishment of a protection zone, in accordance with Point 2 of Article 4.3.3. of the *Terrestrial Code*, in a part of the border of the municipality of Pacaraima.

Regarding international trade, there were no entries of FMD-susceptible animals into the proposed FMD free area. The Group acknowledged that international imports of animal products were only from countries or zones recognised by the OIE as free from FMD.

x. *Compliance with the questionnaire in Article 1.6.6.*

The Group agreed that the format of the dossier was compliant with the questionnaire in Article 1.6.6.

Conclusion

Considering the information submitted in the dossier and the answers from Brazil to the questions raised, the Group considered that the application was compliant with the requirements of Chapter 8.8. and with the questionnaire in Article 1.6.6. of the *Terrestrial Code*. The Group therefore recommended that the extended zone of Brazil, including the states of Amapá, Amazonas, Roraima and parts of the state of Pará and merged with the two zones already officially recognised as free from FMD, be recognised as a single FMD free zone where vaccination is practised.

While noting that the new proposed FMD free area was to be merged with the two zones already officially recognised free from FMD with vaccination to create a single large zone, the Group underlined that, any introduction of FMD into the newly delineated free zone would now lead to the suspension of the official FMD free status of the entire extended free zone.

The Group recommended that Brazil take into consideration the following points when presenting information on sero-surveys in future dossiers or annual reconfirmations for FMD status:

- Information on vaccine coverage and population immunity should be maintained and available at municipal level and stratified by age;
- Since immunity wanes between vaccination campaigns, it should be clear when samples were taken in the vaccination cycle for estimating population immunity and whether or not the sampled animals include both vaccinated and unvaccinated animals.

4.2 Chinese Taipei

Chinese Taipei was recognised as having a zone free from FMD where vaccination is practised in May 2017; this zone covers Taiwan, Penghu and Matsu areas, which refers to the entire Province of Taiwan and Matsu County, but excludes Kinmen County.

In September 2017, Chinese Taipei submitted an application for the recognition of a separate zone free from FMD where vaccination is practised which consists of Kinmen County. The county includes 14 islands, of which only Kinmen Island, Lieyu Island and Wuqiu Township have FMD susceptible animals.

The Group requested additional information and received clarification from Chinese Taipei.

i. Animal disease reporting

The Group considered that Chinese Taipei had a record of regular and prompt animal disease reporting. The Group acknowledged that Chinese Taipei had reported to the OIE outbreaks detected through NSP serological surveys in the absence of clinical disease.

ii. Veterinary Services

The Group acknowledged that the Veterinary Authority had current knowledge of and authority over FMD susceptible animals in the zone. A statute for Prevention and Control of Infectious Animal Disease was in place to prevent the occurrence and spread of infectious animal diseases by giving veterinary services the mandate for animal disease control and quarantine in the entire country.

iii. Situation of FMD in the past 2 years

The last outbreak (caused by serotype A) in the proposed zone was in June 2015. There had been no case of FMD in the past 2 years and no evidence of virus transmission in the last 12 months.

iv. Routine vaccination and vaccines

The FMD vaccines used in Kinmen contained O/Taiwan/98 since 2000 and either O/Taiwan/98 or O/Campos from 2013. The Group acknowledged that no FMD vaccine was manufactured in Chinese Taipei and that vaccines were imported. The Group commended the Animal Health Research Institute (AHRI) for testing the vaccine batches for potency by serology and noted that vaccine matching results from the OIE Reference Laboratory for FMD (the Pirbright Institute, United Kingdom) were used to decide on vaccine strains.

It was noted from the dossier that all cloven-hoofed animals in Kinmen were vaccinated against FMD; pigs were vaccinated once between 12 and 14 weeks of age; cattle, goats and deer were vaccinated twice at 4 and 12 months of age, respectively. Thereafter, pigs, cattle and goats were boosted every 6 months and deer annually. Vaccination was performed by the veterinary services or under the supervision of these services and was free of charge. Official FMD vaccination records were maintained.

Indicators of vaccination efficiency such as vaccination coverage and population immunity were not clearly presented in the dossier. Follow-up actions were in place when low immunity levels were detected. The vaccination coverage was calculated from the total doses of vaccine used divided by the total number of susceptible animals that should be vaccinated. The Group noted that this may result in percentages over 100%, and despite the explanation provided, it was difficult to interpret whether or not this was sufficient and compatible with the estimated population immunity of 96%. The Group would recommend that the vaccination coverage be calculated to determine the proportion of animals vaccinated at a given time, in order to identify how many animals were not being vaccinated at the prescribed time. For population immunity, the Group recommended stratification according to age.

Following the Group's request, Chinese Taipei clarified that serotypes A and O were the main threats for introduction and provided as rationale for not vaccinating against serotype A: the cost-benefit analysis and plan to progress to FMD free status without vaccination. The dossier also described existence of a vaccine reserve and bank, which included serotypes A, O and Asia 1, that could be readily available in case of emergency.

Nevertheless, the Group would encourage Chinese Taipei to consider including a serotype A strain in the vaccine, particularly for Kinmen, based on risk analysis considering the circulating viruses in the region and the fact that the last incursion was caused by FMDV serotype A.

v. *Surveillance for FMD and FMDV transmission in accordance with Articles 8.8.40. to 8.8.42.*

The Group was informed that active and passive surveillance were in place, and performed in general schemes as well as in several targeted approaches. The dossier mentioned that there had been no clinical suspicions of FMD for the past two years in Kinmen County. The Lieyu Island was included in the regular surveys and no FMD infection had ever been detected. The Group noted sufficient regulatory measures in place for the early detection, prevention and control of FMD, as implemented in the other zone already officially recognised as free from FMD.

The Group noted that there was not a specific NSP survey design for the zone of Kinmen, but it was included as part of the nationwide general surveillance strategy. NSP sero-surveys to detect virus transmission had been designed for the whole of Chinese Taipei using 95% confidence and 1% between herd prevalence and a within herd prevalence of 20%. The dossier provided additional targeted approaches for surveillance in Kinmen, where samples were additionally obtained from: i) 'outlying island surveillance for pigs' where three pig farms are randomly selected every three months and 15 pigs from each farm are sampled for NSP antibody testing; ii) surveillance for cattle and pig farms intending to ship products to Taiwan ('Taiwan oriented farms'), and iii) surveillance for cattle and pigs entering slaughterhouses for local consumption in Kinmen.

The Group emphasised that a 20% within herd prevalence was too high in vaccinated animals, particularly in ruminants, when designing a sero-survey. The Group strongly recommended that Chinese Taipei consider this for any future design of serological surveys in demonstrating absence of virus transmission, as well as the fact that the design should be specific for each zone.

NSP sero-survey results were provided for 2015-2017. The Group noted that several NSP sero-reactors were reported each year, and were followed-up according to a specific protocol called, 'Standard operating procedure for confirmation of FMD NSP antibody positive reaction and infection case of cloven-hoofed animals,' where the reactors were bled again as well as several in-contact animals in addition to clinical investigations. Furthermore, probangs (cattle) and swabs (pigs) would also be taken for virological investigations using PCR and virus isolation. A large proportion of these sero-positive animals remained positive on follow-up, but with no positive virological results and were slaughtered. The additional information provided by Chinese Taipei showed that most of the animals were old and had received many doses of vaccines.

The design of the general (random) NSP sero-survey, which was not applied to Kinmen specifically but for the whole country, made it harder for the Group to judge whether or not the overall surveillance was adequate. Nevertheless, with the additional components of targeted surveillance over the last two years, the Group was of the opinion that the information provided was sufficient to demonstrate absence of FMDV transmission.

The Group suggested that Chinese Taipei could consider testing for structural protein for antibodies to other serotypes – than serotype O that is included in the vaccine strain – to rule out FMDV infection by other serotypes. However, animals vaccinated against serotype O several times may cross-react to other serotypes, and therefore only young animals should be tested. This testing would not rule out infection with serotype O, but could be considered as an additional tool for investigation of NSP reactors. Chinese Taipei indicated that it was not allowed to work with live FMDV serotype A, which would prevent virus neutralisation tests being performed. The Group suggested that Chinese Taipei consider implementing an ELISA that is based on inactivated reagents.

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

The Group noted sufficient regulatory measures described in the dossier for the early detection, prevention and control of FMD, as implemented in the other zone already officially recognised as free from FMD with vaccination.

vii. *Description of the boundaries of the proposed free zones*

The Group noted that the proposed free zone covers Kinmen County. Chinese Taipei clarified that Kinmen County was comprised with 14 islands varying in size, including the main Kinmen Island, Lieyu Island (also known as lesser Kinmen) and Wuqiu Township, which were the only ones that had FMD susceptible animals. No cloven-hoofed animals were raised on other small islands forming part of Kinmen.

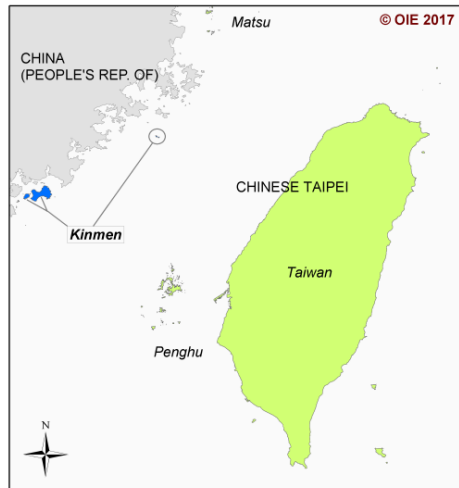


Figure 3. Kinmen County with the three islands – having FMD susceptible animals – of main Kinmen Island, Lieyu Island and Wuqiu Township.

viii. *Description of the boundaries and measures of a protection zone, if applicable*

Not applicable.

ix. *Description of the system for preventing the entry of the virus*

The Group noted that Kinmen County is composed of islands, sharing no land borders with other countries. Importation of susceptible animals and products thereof from FMD infected countries or zones were prohibited, except for dry animal products, which have been heat-treated or sterilised by other methods.

The dossier mentioned that the three international seaports had inspection stations, managed by the Bureau of Animal and Plant Health Inspection and Quarantine with close collaboration with the Coast Guard Administration and the Customs Administration, to detect illegal movement of animals and animal products. Passenger luggage and cargo were checked with regulations in place for confiscation and destruction or return of illegal imports. The Group took note that there was no international airport in Kinmen.

The dossier and additional information described the protocol when animals were moved from Chinese Taipei into Kinmen and the quarantine procedures applied. The Group strongly reminded Chinese Taipei that, as the proposed zone was requested as a separate zone from the zone already officially recognised as free from FMD since May 2017, all movement of FMD susceptible animals and their products between the two zones should continuously comply with Articles 8.8.11., 8.8.15., 8.8.19., 8.8.21., 8.8.24. and 8.8.29. of the *Terrestrial Code*; Chinese Taipei should control such movements between the two zones of the same status in accordance with Chapter 4.3. and Article 8.8.3. of the *Terrestrial Code*, as long as the two zones are kept separated.

x. *Compliance with the questionnaire in Article 1.6.6.*

The Group agreed that the format of the dossier was compliant with the questionnaire in Article 1.6.6.

Conclusion

Considering the information submitted in the dossier and the answers from Chinese Taipei to the questions raised, the Group considered that the application was compliant with the requirements of Chapter 8.8. and with the questionnaire in Article 1.6.6. of the *Terrestrial Code*. The Group therefore recommended that the proposed zone of Chinese Taipei be recognised as a FMD free zone where vaccination is practised.

4.3 Other request

The Group assessed the request of another Member for the recognition of a zone free from FMD where vaccination is practised and considered that the dossier did not meet the requirements of the *Terrestrial Code*. The dossier was referred back to the applicant Member.

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

The Group assessed the request of a Member for the endorsement of its national official control programme for FMD and considered that the dossier did not meet the requirements of the *Terrestrial Code*. The dossier was referred back to the applicant Member.

6. Review of the report of the *ad hoc* Group on Alternatives for surveillance for demonstration of freedom from FMD and recovery periods and consideration of the option document

The Group considered the report of the *ad hoc* Group on alternatives for surveillance for demonstration of freedom from FMD and recovery periods (hereafter the Group on FMD surveillance), as well as an option document linking the conclusion of the *ad hoc* Group meeting and its impact on the FMD Chapter of the *Terrestrial Code*.

The Group explored and discussed the pros and cons of the different options related to: i) the provisions on the waiting time requirements; ii) the provisions for the level of confidence; and iii) the method to be used for the assessment of the level of the confidence. The Group also consulted the chair of the Group on FMD surveillance by teleconference.

The Group agreed with the preferred options indicated by the Group on FMD surveillance: To maintain the current timing requirements of Article 8.8.7. but to add a sentence at the end of the article, clarifying that the waiting period should be respected unless there is evidence that the appropriate level of confidence has been reached earlier by implementing additional surveillance or other measures (T1, with reference to the option document in Annex IV); to provide qualitative guidance on the methods to assess the level of confidence (M2); to reach a qualitatively appropriate level of confidence (C1) (*cf* Report of the meeting of the Scientific Commission for Animal Diseases, September 2017). Furthermore, the Group discussed some examples of the “enhanced” surveillance that would be needed for shortening of the recovery period.

- Post-vaccination monitoring system
- Census surveys
- Risk-based surveillance

With reference to “Table 4. Requirements for a possible shorter recovery period” in the report of the Group on FMD surveillance, the Group proposed additional measures of “enhanced” surveillance as below (in bold text).

Status of animal population	Current Terrestrial Code requirements Article 8.8.7. Point 1.c)	Objective	Additional measures	Benefit
Vaccinated population in the control area*	Demonstration of absence of infection through serological surveillance in vaccinated population in accordance with Articles 8.8.40. to 8.8.42.	Demonstration of absence of virus transmission through serological surveillance in vaccinated population in accordance with Articles 8.8.40. to 8.8.42.	<ul style="list-style-type: none"> - Census surveys (all herds in the area and all animals within those herds) - Herd census surveys (all herds in the area and a sample of animals within those herds) - Risk-based census survey (all herds in the stratum of higher risk and a sample of animals within those herds) - Risk-based survey (a sample of herds in the stratum of higher risk and a sample of animals within those herds) - Assessment of immunity of the vaccinated population in accordance with Article 8.8.40. Point 6. This is based on the level of target immunity and the precision with which it is estimated. It can be based on good records of vaccination coverage combined with serosurveillance of vaccinated animals. - Heterologous potency tests may be useful to demonstrate the effectiveness of the vaccine and to calculate immune protection with precision. - Active clinical surveillance 	<ul style="list-style-type: none"> - Census surveys increase the confidence in demonstrating absence of virus transmission - Risk-based surveillance could enhance survey sensitivity - Population immunity above a defined threshold will increase the confidence of the absence of virus transmission - Increase detection of clinical cases
Unvaccinated population in control area*	Demonstration of absence of infection in the sub-population through serological surveillance in accordance with Articles 8.8.40. to 8.8.42.		<ul style="list-style-type: none"> - Enhanced abattoir surveillance - Active clinical surveillance - Both abattoir and clinical surveillance should be quantified (number of animals and herds inspected, and the sensitivity of the system estimated) with good records of detected suspicions - Serological surveillance in species where subclinical infection is common 	Increase detection of clinical cases and infection
Remaining area where vaccination is not applied	Demonstration of absence of infection in the area through serological surveillance in accordance with Articles 8.8.40. to 8.8.42.		<ul style="list-style-type: none"> - Enhanced passive surveillance - If already in place, syndromic surveillance could contribute to the confidence of demonstrating freedom 	Increase detection of clinical cases

* Control area: area designated by the Veterinary Authority in response to the occurrence of FMD outbreaks, in order to control and prevent its spread to uninfected areas. These measures may include, but are not limited to, vaccination, movement control and an intensified degree of surveillance. The control area could be comprised of two separate areas where movement control is in place and in which measures of different intensity are conducted.

In addition to surveillance activities, the Group also considered the possible contribution of monitoring other control measures (efficiency of tracing and response, movement restrictions, etc.) for reaching the appropriate level of confidence for demonstrating freedom. Finally, the Group considered that differences between outbreaks (such as density of animals and types of production systems, capacity of Veterinary Services) influencing the levels of residual risk for continuing FMDV transmission, should be taken into account for reaching the appropriate level of confidence. However, the Group noted the difficulties to consider and quantify all these parameters.

In conclusion, the Group was in favour of developing a qualitative approach, to describe in detail the additional measures needed to provide a high level of confidence in a short period, along with the procedure for monitoring and evaluating the implementation of these measures. This could be created through a separate questionnaire or a checklist in the recovery section of the FMD questionnaire in Article 1.6.6. of the *Terrestrial Code*.

This framework could then be used for developing more quantitative assessment approaches. In the first instance, a semi-quantitative methodology might be developed by the two *ad hoc* Groups in consultation. Later on, if considered relevant, the possibility of a fully integrated model could be the subject for a future research project.

7. Update on Chapter 8.8. on FMD of the *Terrestrial Animal Health Code*

The Group was informed that comments received from Members on the amended chapter, that included new concepts related to FMD control, were addressed by the Scientific Commission in September 2017. These new concepts included i) a broader concept of containment zone, ii) compartmentalisation with vaccination and iii) implementation of emergency preventive vaccination in response to an increased risk of FMDV incursion. The Group was informed that some of the new concepts were considered in the discussions of the horizontal chapter (Chapter 4.3.) on zoning and compartmentalisation of the *Terrestrial Code*, which was circulated in October 2017 for Members' comments, prior to further application in the FMD Chapter.

The Group was also informed of the state of play of the revision of the questionnaires – for the official recognition of disease status and for the endorsement of national official control programmes – primarily aimed at the scientific relevance of each questionnaire and harmonising the questionnaires between the different diseases.

8. Adoption of report

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

.../Appendices

Appendix I

**MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION
OF FOOT AND MOUTH DISEASE STATUS OF MEMBERS**

Paris, 6 – 9 November 2017

Terms of Reference

The OIE *ad hoc* group on foot and mouth disease (FMD) status of Members (the Group) is expected to evaluate the applications for official recognition of FMD free status and for endorsement of control official programme of FMD received from five Members.

This implies that the experts, members of this Group are expected to:

1. Sign off the OIE Undertaking on Confidentiality of information, if not done before.
2. Complete the Declaration of Interests Form in advance of the meeting of the Group and forward it to the OIE at the earliest convenience and at least two weeks before the meeting.
3. Evaluate the applications from Members for official recognition of FMD free status
 - a) Before the meeting:
 - read and study in detail all dossiers provided by the OIE;
 - take into account any other information available in the public domain that is considered pertinent for the evaluation of dossiers;
 - summarise the dossiers according to the *Terrestrial Animal Health Code* requirements, using the form provided by the OIE;
 - draft the questions whenever the analysis of the dossier raises questions which need to be clarified or completed with additional details by the applicant Member;
 - send the completed form and the possible questions to the OIE, at least one week before the meeting.
 - b) During the meeting:
 - contribute to the discussion with their expertise;
 - withdraw from the discussions and decision making when possible conflict of interest;
 - provide a detailed report in order to recommend, to the Scientific Commission for Animal Diseases, the country(ies) or zone(s) to be recognised (or not) as FMD free and to indicate any information gaps or specific areas that should be addressed in the future by the applicant Member.
 - c) After the meeting:
 - contribute electronically to the finalisation of the report if not achieved during the meeting.

In addition at this meeting, the experts, members of this Group are expected to:

4. Review the report of the *ad hoc* Group on alternatives for surveillance for demonstration of freedom from FMD and recovery periods, consider the option document and discuss them during the meeting. Based on their experience in the evaluation of applications, provide an opinion on the different options presented and propose, if relevant, potential amendments in the FMD Chapter of the *Terrestrial Code*.
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Appendix II

**MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION
OF FOOT AND MOUTH DISEASE (FMD) STATUS OF MEMBERS**

Paris, 6 – 9 November 2017

Agenda

1. Opening
2. Adoption of the agenda and appointment of chairperson and rapporteur
3. Evaluation of requests from Members for the status recognition of FMD free countries where vaccination is not practised
 - Peru
 - Suriname
4. Evaluation of requests from Members for the status recognition of FMD free zones where vaccination is practised
 - Brazil
 - Chinese Taipei
5. Evaluation of a request from a Member for the endorsement of its official control programme for FMD
6. Review of the report of the *ad hoc* Group on *Alternatives for surveillance for demonstration of freedom from FMD and recovery periods* and consideration of the option document
7. Update on Chapter 8.8. on FMD of the *Terrestrial Animal Health Code*
8. Adoption of report

Appendix III

**MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION
OF FOOT AND MOUTH DISEASE STATUS OF MEMBERS**

Paris, 6 – 9 November 2017

List of participants

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OPTION DOCUMENT
MEETING OF THE OIE AD HOC GROUP ON
ALTERNATIVES FOR SURVEILLANCE FOR DEMONSTRATION OF FREEDOM
FROM FOOT AND MOUTH DISEASE (FMD) AND RECOVERY PERIODS
LINKING THE CONCLUSION OF THE AD HOC GROUP MEETING AND
ITS IMPACT ON THE FMD CHAPTER OF THE *TERRESTRIAL CODE*

1. Objective of the surveillance

In Article 8.8.7. Point 1.c) the Group recommended modifying the surveillance objective, for recovery of FMD free status in a country or zone where vaccination is not practised, to reflect the surveillance objectives to demonstrate the absence of infection in the unvaccinated population and the absence of transmission of FMDV in the vaccinated population.

It would be amended as follows: “*six-months after the disposal of the last animal killed or the last vaccination whichever occurred last, where a stamping-out policy, emergency vaccination not followed by the slaughtering of all vaccinated animals, surveillance in accordance with Articles 8.8.40. to 8.8.42, are applied. However, this requires a serological survey based on the detection of antibodies to nonstructural proteins of FMDV to demonstrate no evidence of ~~infection~~ transmission in the remaining vaccinated population.*”

2. Timing requirements

There are 3 options to consider the recommendation of the Group:

Option T1: The current timing requirements of Article 8.8.7. are maintained AND a sentence is added at the end of the article clarifying that the waiting period should be respected unless there is evidence that the appropriate level of confidence has been reached earlier by implementing additional surveillance or other measures.

NB: for the ‘appropriate’ level of confidence, please see sections 3 and 4 of this document.

Pros:

- This option would enable countries which have the means to achieve the appropriate level of confidence in demonstrating freedom from FMD earlier than 6 months to recover their status quicker.
- This does not pose an impediment for countries with less resource. Countries not capable of implementing additional surveillance and other measures to reach this level in a shorter time could still regain their status after 6 months by respecting the current requirements of Article 8.8.7.

Cons: Even if the recovery period can be shortened when additional surveillance measures are applied, documenting the effectiveness of surveillance remains tricky. There might be a need for an objective method of assessment of the supplementary surveillance measures applied to substantiate a shorter recovery period. In that case, a measureable/quantitative approach (e.g. scenario tree model) for the analysis and evaluation of surveillance system components could be considered as suggested by the Group. Should an objective method be needed, another technical *ad hoc* Group may be required to come up with suitable approach to be used (see point 4 below).

Option T2: The current timing for recovery of FMD freedom without vaccination after emergency vaccination to live (Point 1c) of Article 8.8.7.) is adjusted to 3 months with a description of a supplementary set of measures to be implemented.

In this case, Point 1c) of Article 8.8.7. would be amended as follows: “~~six~~ three months after the disposal of the last animal killed or the last vaccination whichever occurred last, where a stamping-out policy, emergency vaccination not followed by the slaughtering of all vaccinated animals, surveillance in accordance with Articles 8.8.40. to 8.8.42, and additional surveillance and other measures in accordance with....are applied. ~~However,~~ This requires a serological survey based on the detection of antibodies to nonstructural proteins of FMDV to demonstrate no evidence of ~~infection-transmission~~ in the remaining vaccinated population.”

Pros: Countries capable of implementing additional measures to demonstrate freedom from FMD would have the opportunity to regain their free status earlier than 6 months.

Cons:

- Same as for T1
- The countries that could demonstrate freedom from FMD even earlier than the specified period would still be limited by the waiting period.
- For countries with limited resources, the implementation of a supplementary set of measures might not be feasible and only proposing this option (3 months with additional measures) could become an unjustified trade barrier.
- The *Code* would have to provide guidance on the expected “additional surveillance and other measures” and make sure that it is feasible to all Members.

Option T3: The time requirements for the recovery periods all along Article 8.8.7. are removed and replaced by a requirement to achieve a certain level of confidence.

NB: for the ‘certain’ level of confidence, please see sections 3 and 4 of this document.

Pros: As suggested by Members, in this case the recovery period would be completely detached from time requirements and would only be based on the quality and intensity of the surveillance conducted. Countries could regain their free status once they have reached the specified level of confidence without having to wait for a specific time period to elapse.

Cons:

- Same as for T1
- This would most likely require that the expected level of confidence be quantified (see point 3 below).
- Members may need some guidance to evaluate the reached level of confidence of freedom (see point 4).

The ad hoc Group’s preference:

The Group was of the opinion that a country’s assessment to regain its status should be based on the quality of surveillance, not the time that has elapsed since the last case, although the time elapse could also contribute as one of the factors in increasing the confidence of demonstrating freedom from FMD. As a consequence, the Group was not in favour of specifying the recovery period. Among the 3 options for time requirements, the Group was mostly in favour of T1.

3. Qualitative or quantitative requirement for the level of confidence

Option C1: We only ask that a ‘high’ level of confidence is achieved.

Pros:

- ‘High’ level of confidence would provide more assurance in the credibility of a countries’ recovered free status.
- Flexibility

Cons:

- Not fully objective.

Option C2: We quantify the requested level of confidence.

Pros: Transparency, clarity

Cons:

- Scientific rationale should be given to justify the selected level of confidence.
- It wouldn't leave any flexibility to the countries.

The ad hoc Group's preference:

The Group expressed its preference for option C1.

4. Method for the assessment of the level of the confidence

Option M1: We just indicate the required level of confidence, without providing any additional guidance on the way to evaluate it.

Pros:

- Simple, easy, flexible and not prescriptive
- Most of the countries able to shorten the recovery period would have the capacity to evaluate the level of confidence reached thanks to the surveillance and control measures in place.

Cons:

- Some countries may want some more guidance

Option M2: We provide qualitative guidance on the methods to assess the level of confidence.

Pros:

- Same as for M1
- Can be developed in the horizontal chapter (Chapter 1.4. on surveillance)

Cons:

- Some countries may want some more guidance.
- This may require another technical ad hoc Group to come up with suitable approach to be used.

Option M3: We develop a model.

Pros:

- Improvement of the transparency and objectivity in the evaluation of the surveillance information in applications for recovery of free status.
- Harmonisation and simplification of the assessment.

Cons:

- This could be a significant impediment for some countries which may encounter difficulties not only implementing but even interpreting such a model (the BSE example and the current exit-strategy should be considered).
- This would also require another technical ad hoc Group to come up with suitable approach to be used.
- In addition, FMD has a complex epidemiology that varies significantly depending on the serotypes, among different geographical regions and evolves through time. Therefore, a model may not be globally applicable or adapted to different situations to reflect these differences.

The ad hoc Group's preference:

The Group expressed its preference either for option M1 or M2. Although the Group was of the opinion that the possibility of a model could be explored, it stressed that quantitative models, while useful, can be misleading if they are not appropriately carried out with good quality data.

**MEETING OF THE OIE *AD HOC* GROUP ON THE EVALUATION
OF CLASSICAL SWINE FEVER STATUS OF MEMBERS
Paris, 22 – 23 November 2017**

A meeting of the OIE *ad hoc* Group on the Evaluation of Classical Swine Fever (CSF) Status of Members (hereafter the Group) was held at the OIE Headquarters from 22 to 23 November 2017.

1. Opening

On behalf of Dr Monique Eloit, Director General of the OIE, Dr Matthew Stone, the OIE Deputy Director General for International Standards and Sciences, welcomed the experts of the Group. Dr Stone acknowledged the huge work and efforts required in reviewing the dossiers and thanked the experts of the Group for having submitted their individual assessments in preparation of the meeting.

Dr Stone indicated that the OIE worked on a strengthened procedure for the selection of members of the Specialist Commissions and on the updated Standard Operating Procedures (SOP) for official recognition of disease status, which considers the procedure for the selection of the experts of the *ad hoc* groups.

Dr Stone highlighted the sensitivity and confidentiality of the dossiers received for official recognition and acknowledged that the experts had signed the forms for undertaking of confidentiality. He also mentioned that if any members of the Group had any conflict of interest in the evaluation of a dossier, the expert(s) should withdraw from the discussions and decision making of the particular application.

Dr Stone emphasised the importance of the quality of the public report to be scrutinised by Members before adopting the proposed list of countries free from CSF. He also encouraged the Group to continue providing detailed feedback to countries with a negative outcome to support them in identifying the main gaps and points for improvement, as well as providing informative recommendations to those countries with positive outcomes for further improvement in maintenance of their CSF free status.

The Group and the OIE welcomed Drs Mary-Louise Penrith and Young S. Lyoo as new members of the Group and thanked the two previous experts for their contribution to the Group.

Dr Min-Kyung Park, Chargée de mission of the Status Department, introduced Drs Anna-Maria Baka and Marija Popovic, who joined the Status Department to work on the activities related to official disease status recognition.

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

The Group was chaired by Dr Mary-Louise Penrith. Dr Trevor Drew acted as rapporteur, with the support of the OIE Secretariat. The Group endorsed the proposed agenda.

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

3. Evaluation of applications from Members for the official recognition of a CSF free status

3.1 Argentina

In September 2017, Argentina submitted a dossier for the official recognition of its CSF free status.

The Group requested additional information and received clarification from Argentina.

i. Animal disease reporting

The Group acknowledged that Argentina had a record of regular and prompt animal disease reporting and that CSF was a notifiable disease in the country *as per* legislation. The Group noted the arrangements in place for training of official veterinarians as well as the presence of the veterinary authority at sector congresses and workshops which were also attended by pig industry producers. The Group appreciated that a variety of printed and on-line communication tools, such as television, radio, newsletters, manuals and brochures, were used to raise awareness amongst all relevant stakeholders. However, considering the low numbers of the CSF suspect cases reported, the Group recommended that more active awareness campaigns should be conducted among pig producers and hunters, including on clinical signs and lesions of CSF to improve the sensitivity of the passive surveillance.

ii. Veterinary Services

The Group noted that primary pig production in Argentina comprised genetic producer establishments (reproducers and semen), commercial farms (full cycle or integrated sites for meat production) and medium and small pig producers (backyard) and appreciated the information on demographics and distribution of pig population presented in tables and maps by farm density and province. The Group acknowledged that, as well as regular meetings with major producers associations, Servicio Nacional de Sanidad y Calidad Agroalimentaria (SENASA) had established locally-based programmes to promote coordination with small producers and improve family farming. From the additional information provided, the Group noted that there were six wild boar breeding establishments in Argentina.

The Group noted that Argentina had received a PVS evaluation mission in 2014. The PVS report provided additional guarantee that the Veterinary Services were compliant with the requirements for a country having CSF free status.

From the information in the dossier, the Group acknowledged that wild pig populations in Argentina comprised European wild boar and feral hogs (*Sus scrofa*) distributed over national parks, reserves and other areas of the country. From the additional information provided, the Group also noted the presence of three species of peccaries in the country distributed in the central and northern zone of Argentina. Although maps with general distribution figures of these populations based on publications from 2003, 2008 and 2009 were provided, the Group agreed that there were some gaps in knowledge of wild pig populations present in the country. The Group appreciated that Argentina had identified and was continuing to work on those gaps in collaboration with research teams, which conducted studies on predictive models of wild boar population distribution. The Group took note that these studies were based on species observation as well as environmental and climatic data, and that the outcomes would be delivered in 2018. Overall, the Group considered that the Veterinary Services had knowledge and authority over domestic pig herds and current knowledge about the population and habitat of wild and feral pigs in the country.

iii. Situation of CSF in the past 12 months

The Group acknowledged that the last CSF outbreak in Argentina was recorded in 1999.

iv. *Absence of vaccination in the past 12 months*

The Group acknowledged that vaccination against CSF had ceased in Argentina in 2004 and was prohibited since then *as per* legislation.

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

The Group acknowledged that active surveillance was in place in Argentina based on serological surveillance which included all types of domestic pig holdings: genetic, commercial farms and backyards. The Group noted that supplementary virological surveillance was conducted targeting populations at risk, such as pigs from fattening centres or from holdings where stamping out was applied for other reasons, and animals slaughtered during trichinosis outbreaks. The dossier provided information on the distribution of samples collected during the past two years in a map. In response to a question raised on surveillance at the borders with countries not recognised free from CSF, Argentina informed the Group that a work protocol had been recently signed in order to implement intensive surveillance actions targeting pig diseases at the border with a neighbouring country not recognised free from CSF. The Group recommended that Argentina put this plan into effect as soon as possible.

Whilst blocking ELISA and RT-PCR used for CSF diagnosis were not formally accredited to ISO 17025, the Group noted from the additional information that a quality management system was implemented by the General Directorate of Laboratories and Technical Control (DILAB), which performed annual audits of the laboratories according to the guidelines of ISO 19011. The Group also took note that the official accreditation of these techniques to ISO 17025 was planned. Argentina provided information on its participation in two ring trials with satisfactory results organised by the European Union Reference Laboratory (EURL) for CSF in Hannover in 2008 and 2011. The Group recommended that Argentina participates more frequently in such inter-laboratory proficiency testing for diagnosis of CSF.

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

The Group noted that pigs were identified on the basis of the holding by ear notch patterns. All pig movements had to be authorised by SENASA and accompanied by the Electronic Transit Document (DT-e), which is a health certificate issued via the Integrated Animal Health Management System. Control of appropriate pig identification and documentation of their movements were conducted at the various fixed and mobile control posts, in conjunction with several law enforcement bodies such as provincial police, gendarmerie, prefecture, etc. under official agreement.

The Group noted that three real-time field simulation exercises were conducted in 2006, 2009 and 2010, covering activities such as field research, planning of containment measures and eradication of CSF. Noting that the last simulation exercise was performed in 2010, the Group recommended that Argentina conducts such activities more frequently.

From the information provided in the dossier, the Group noted that feeding pigs with waste from airports, ports and health care centres was forbidden. Notwithstanding, the Group had some concerns about the legislation referenced by Argentina regulating the treatment of swill. In response to a question on this subject, Argentina provided an assurance that this was covered by legislation 555/2006, which stipulated a treatment regime of 80°C throughout the muscle mass. However, the Group noted that this regime was in reference to Article 11 of the aforementioned legislation, in the context of pig meat not tested for *Trichinella*. While Article 13 prescribed a requirement for treatment of waste food for feeding to pigs to ensure its safety, no treatment parameters were specified. The Group strongly recommended that relevant legislation be formulated to specify the requirements for treatment of swill in accordance with Article 15.2.22. of the *Terrestrial Code*.

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

The Group noted that CSF had never been reported in wild and feral pigs in Argentina.

The Group acknowledged that serological surveillance was conducted since 2001 on samples collected by hunters, owners or managers of hunting grounds, reserves and wildlife researchers. The Group also took note that Argentina had started working on strengthening the epidemiological surveillance on wild populations through cooperation with national parks and the Technical Sub-Committee of Invading Exotic Species of the Argentine Ministry of the Environment and Sustainable Development, with a view to implementing a countrywide wild boar control plan.

The Group noted that all pig premises were subject to containment installations *as per* legislation and apply appropriate biosecurity measures to avoid contact with wild animals.

The Group considered that a sufficient level of separation was in place to prevent domestic pigs from coming in contact with the wild and feral pig population.

viii. *Compliance with the questionnaire in Article 1.6.10.*

The Group noted that Argentina had used the updated format of the questionnaire, which was circulated for Members' comments in March 2017. Whilst the submitted format was not yet adopted by the World Assembly, the Group was of the opinion that the information presented was comprehensive with a logical flow and appreciated the well-structured dossier.

Conclusion

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

The Group recommended that information on the following be submitted to the OIE when Argentina reconfirms its CSF status (also detailed in the relevant sections above):

- More active awareness campaigns among pig producers and hunters, including on clinical signs and lesions of CSF to improve passive surveillance;
- Outcome of the ongoing studies on wild pig population distribution;
- Implementation of intensive surveillance activities at the border with a country without a recognised CSF status;
- More frequent participation in inter-laboratory proficiency testing for diagnosis of CSF;
- Conducting another simulation exercise soon, specifically for CSF, and every 3-5 years thereafter;
- Establishing official regulations and procedures which specify treatment (temperature and time) for inactivation of CSFV in swill in accordance with Article 15.2.22. of the *Terrestrial Code*.

3.2 Costa Rica

In September 2017, Costa Rica submitted a dossier for the official recognition of its CSF free status.

The Group requested additional information and received clarification from Costa Rica.

i. *Animal disease reporting*

The Group considered that Costa Rica had a record of regular and prompt animal disease reporting and acknowledged that CSF was a notifiable disease in the country *as per* legislation since 1994.

The Group also noted that an on-going awareness programme was in place for veterinarians, farm workers, students and people in the pig industry with a particular focus on producers to encourage reporting of all cases suggestive of CSF. The Group acknowledged that this programme appeared to be both comprehensive and broad in scope, covering all relevant sectors. There was participation of various institutions, such as public universities, commercial establishments and associations, using a range of materials including lectures, conferences, epidemiological bulletins, news, videos, manuals, informational visits and simulation exercises.

ii. *Veterinary Services*

The Group appreciated that information was provided on the demographics of the domestic pig population classified by province and farm size. The Group acknowledged that an official system was in place for the registration of holdings and their activities, under the authority and control of Costa Rica's Veterinary Services. This system was subject to periodic reviews by the National Traceability Program to ensure its maintenance up-to-date. However, the Group noted that there were pig establishments not yet registered in this system, which were, nevertheless, included in the active surveillance conducted in 2017. The Group commended Costa Rica's efforts in including subsistence farms in the farm registration system of Farming Establishments Registration System (SIREA), and encouraged Costa Rica to continue its efforts in this regard.

The Group acknowledged that detailed information on population and geographical distribution of captive wild pigs was provided. The Group further noted that *Sus scrofa* and peccaries were present in protected areas of Costa Rica, with the former located only in an isolated island. The Group acknowledged the description of the geographical distribution of wild and feral pigs supported by relevant maps.

The Group was informed that Costa Rica had received a PVS evaluation mission in 2015 and a PVS laboratory mission carried out in 2017, and both reports were provided to the Group by the country. The PVS reports provided additional guarantee that the Veterinary Services were compliant with the requirements for a country having CSF free status.

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

iii. *Situation of CSF in the past 12 months*

The Group acknowledged that the last CSF outbreak in Costa Rica was recorded in 1997.

iv. *Absence of vaccination in the past 12 months*

The Group acknowledged that vaccination against CSF was prohibited by law and had never been conducted in Costa Rica.

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

The Group took note of a risk-based serological surveillance performed in farms and slaughterhouses, and acknowledged the recent surveys demonstrating absence of CSF, which also included backyard farms. The Group also noted the follow-up testing conducted on CSF suspicions and commended Costa Rica for implementing a system to monitor the effectiveness and efficacy of the surveillance. However, the Group expressed its concerns with regard to the design of the conducted serosurveys, in particular the high level of the assumed prevalence, especially in areas where the risk was considered higher. While noting that the sampling frame applied was designed to detect a within-herd prevalence of 30% with 95% confidence and a between herd prevalence of 5%, the Group strongly recommended that the design prevalence be reconsidered, as the current design may not be effective in contributing to early detection of CSF.

Upon receipt of additional information, the Group noted that Costa Rica considered the scenario of a seropositive animal with absence of apparent clinical signs, and where virus was not detectable either in the animal or in the herd as a “non-definitive case”. Whilst the Group acknowledged that such a situation may be rare, the Group highlighted that Costa Rica’s definition of a “non-definitive case” does not comprehensively take into account the potential epidemiological links. The Group therefore strongly recommended that in such circumstances, follow-up inspection in the herd of origin, epidemiological investigation and increased awareness should be carried out to reach a definitive conclusion.

From the information provided in the dossier and the answers from Costa Rica to the question raised, the Group noted that some case investigations involved serology only whereas others involved PCR, and that both tests were only performed simultaneously to investigate highly suspicious cases (e.g. clinically compatible with CSF or events of high morbidity and mortality). The Group recommended that both serology and PCR be routinely used for the investigation of all suspicious cases.

The Group was generally satisfied with the corrective actions taken in response to inter-laboratory proficiency testing results from 2015. However, the Group was concerned about the use of gel-based PCR instead of real-time PCR for CSF diagnosis. While this approach could be considered appropriate as long as the country is free from CSF, in the case of an outbreak, laboratory contamination with PCR product would be highly likely and could, therefore, confound accurate diagnosis of the disease.

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

Costa Rica stated that imports of pigs and their commodities were authorised from countries or zones free from CSF and FMD without vaccination and in compliance with Chapter 15.2. of the *Terrestrial Code*; a list of imported commodities and countries of origin was provided for the past two years.

The Group acknowledged the recent issuance of a Directive for the application of a group mobilisation and traceability system to all farms and slaughterhouses countrywide with documentation on their origin and destination. This mobilisation guide must be requested by the producer at the offices of the National Service of Animal Health; it is a requirement that the farm is registered for the granting of the guides and for the authorisation of any movements. The Group noted that this Directive replaces the previous system where the transport guide was administered by the police checkpoint closest to the farm and the records were managed by the National Service of Animal Health.

The Group noted that a regulation was in place prohibiting feeding pigs with waste from hospitals, clinics, asylums, marine and air terminals, as well as with products in state of putrefaction or any product that could represent a health risk due to its origin. The Group agreed that the described treatment procedure for swill complied with Article 15.2.22. of the *Terrestrial Code*.

The Group acknowledged that simulation exercises on CSF outbreak management were performed in 2009 and on CSF and Avian Influenza in 2016 in collaboration with the United States Department of Agriculture. During the last simulation exercise in 2016, the surveillance protocol, emergency plan and control and eradication measures of CSF were reviewed and points for improvement were updated accordingly. The Group noted that there was no compensation system in place for pigs slaughtered for official disease control purposes, which could have a possible negative impact on voluntary CSF notification by owners.

The Group also expressed some concerns about the sampling regime to be implemented in the event of a CSF outbreak, according to which a randomised sampling frame would be applied to detect the disease at a pre-defined prevalence. The Group would expect that in the case of an outbreak additional sampling would focus on high risk groups.

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

The Group took note that the only feral pig population (*Sus* spp.) present in Costa Rica was confined to the Cocos Island, 550 kilometres to the west of the mainland and that, due to the geographical isolation it was not included in the active surveillance plan for CSF. The Group noted that passive surveillance was performed on this pig population by the two ranger stations, also in charge for monitoring and controlling the entry to the island.

The Group also acknowledged the presence of wild pigs (*Pecari tajacu* and *Tayassu pecari*) in forested areas in Costa Rica, as illustrated in relevant maps, which could potentially have contact with the domestic pig population.

The Group noted that a regulation was in place stipulating that the domestic pig population should be properly confined.

The Group agreed that a sufficient level of separation was in place to prevent domestic pigs from coming in contact with wild and feral pig population.

viii. *Compliance with the questionnaire in Article 1.6.10.*

The Group agreed that the submitted dossier was compliant with the format of the questionnaire in Article 1.6.10. and all the sections were properly completed. The Group appreciated the well-structured dossier provided by Costa Rica and commended the country for the comprehensive answers to the questions raised by the Group.

Conclusion

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

The Group recommended that information on the following be submitted to the OIE when Costa Rica reconfirms its CSF status (also detailed in the relevant sections above):

- Continuous inclusion of all subsistence farms in the animal registration system, SIREA;
- Reconsideration and adjustment of sero-survey design particularly in high risk areas;
- Fine-tuning of the testing regime and follow-up investigation protocol on CSF suspicions;
- Evidence of compensation scheme as part of emergency response to disease outbreak.

3.3 Other request

The Group assessed one additional request from a Member for the recognition of CSF free country status. The Group concluded that the Member did not meet the requirements of the *Terrestrial Code* and the dossier was referred back to the applicant Member.

4. Other matters

Proposals from Members regarding new provisions on “historical freedom” and “freedom in all pigs” in Article 15.2.3. of the *Terrestrial Code*, will be discussed at the next meeting of the Scientific Commission for Animal Diseases in February 2018. In support of this discussion, the Group considered the provisions proposed for consistency with the *Terrestrial Code* Chapter on African swine fever (ASF).

The Group raised concerns related to i) the practicality of demonstrating freedom in wildlife to the level of confidence required, and ii) the appropriateness for official recognition of CSF free status, both in wildlife and domestic populations.

Whilst sampling of wild and feral pigs was considered feasible in theory, the Group underlined that passive surveillance alone would not be sufficient to give the level of confidence of freedom due to the features of the disease and in comparison to ASF. The Group stressed that such surveillance for CSF would likely be more expensive than any benefits arising from trade activities and in some regions, could also present significant challenges, due to geography and terrain. The Group was therefore of the view that it should be up to the concerned Member to demonstrate its freedom from CSF in wild and feral pigs to its trading partners in bilateral agreements, if relevant.

Furthermore, unless the sampled populations were constrained by natural or artificial barriers, they could only be regarded as a meta-population interacting with others (possibly in an un-monitored area), whose composition, density, and distribution could vary over time. Consequently, the results provided through surveillance activities would only be valid for the time of the last sample taken from the wild and feral pigs. Indeed, considering the epidemiology of CSF in wild and feral pig populations, such sampling would be required to be performed on a frequent and ongoing basis to have any validity. The Group also questioned the applicability of an appropriate level of surveillance to constantly demonstrate freedom in a meta-population moving between countries. The Group was concerned about the responsibility that would be placed on the OIE in endorsing the individual surveillance plans in wild and feral pigs, in order to confidently demonstrate freedom. Notwithstanding, the Group pointed out the distribution and epidemiological role and risk of the wild and feral pigs had to be known and mitigated in the current OIE procedure for official recognition of CSF free status in the domestic and captive wild pigs.

The Group also underlined that recommendations already exist to facilitate such trade in wild and feral pigs or their products.

5. Adoption of report

The *ad hoc* Group reviewed and amended the draft report provided by the rapporteur. The Group agreed that the report would be subject to a short period of circulation to the Group for comments and adoption. Upon circulation, the Group agreed that the report captured the discussions.

.../Appendices

Appendix I

**MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION
OF CLASSICAL SWINE FEVER STATUS OF MEMBERS
Paris, 22 – 23 November 2017**

Terms of Reference

The OIE ad hoc group on classical swine fever (CSF) status of Members (the Group) is expected to evaluate the applications for official recognition of CSF free status.

This implies that the experts, members of this Group are expected to:

1. Sign off the OIE Undertaking on Confidentiality of information, if not done before.
 2. Complete the Declaration of Interests Form in advance of the meeting of the Group and forward it to the OIE at the earliest convenience and at least two weeks before the meeting.
 3. Evaluate the applications from Members for official recognition of CSF free status
 - a) Before the meeting:
 - read and study in detail all dossiers provided by the OIE;
 - into account any other information available in the public domain that is considered pertinent for the evaluation of dossiers;
 - summarise the dossiers according to the Terrestrial Animal Health Code requirements, using the form provided by the OIE;
 - draft the questions whenever the analysis of the dossier raises questions which need to be clarified or completed with additional details by the applicant Member;
 - send the completed form and the possible questions to the OIE, at least one week before the meeting.
 - b) During the meeting:
 - contribute to the discussion with their expertise;
 - withdraw from the discussions and decision making when possible conflict of interest;
 - provide a detailed report in order to recommend, to the Scientific Commission for Animal Diseases, the country(ies) or zone(s) to be recognised (or not) as CSF free and to indicate any information gaps or specific areas that should be addressed in the future by the applicant Member.
 - c) After the meeting:
 - contribute electronically to the finalisation of the report if not achieved during the meeting.
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Appendix II

**MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION
OF CLASSICAL SWINE FEVER STATUS OF MEMBERS
Paris, 22 – 23 November 2017**

Agenda

1. Opening
 2. Adoption of the agenda and appointment of chairperson and rapporteur
 3. Evaluation of applications from Members for official recognition of CSF free status
 - Argentina
 - Costa Rica
 4. Other matters
 5. Adoption of report
-

Appendix III

**MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION
OF CLASSICAL SWINE FEVER STATUS OF MEMBERS
Paris, 22 – 23 November 2017**

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List of Participants

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**MEETING OF THE OIE *AD HOC* GROUP ON THE EVALUATION
OF PESTE DES PETITS RUMINANTS STATUS OF MEMBERS
Paris, 7-8 December 2017**

A meeting of the OIE *ad hoc* Group on the Evaluation of the Peste des Petits Ruminants (PPR) Status of Members (hereafter the Group) was held at the OIE Headquarters from 7 to 8 December 2017.

1. Opening

Dr Monique Eloit, Director General of the OIE, welcomed the experts of the Group. She acknowledged the huge work and efforts required in reviewing the dossiers and thanked the experts for having submitted their individual assessments of the countries' applications in preparation of the meeting.

Dr Eloit reminded the Group that the OIE and the FAO jointly developed the Global Control and Eradication Strategy (PPR-GCES) of PPR under the Global Framework for the progressive control of Transboundary Animal Diseases (GF-TADs), and Dr Jean-Jacques Soula was the OIE Coordinator of the joint PPR Global Secretariat. She finally underlined the Group's contributions to the GCES by providing technical support and sound scientific knowledge and answering to the expectations from the field.

Dr Eloit highlighted the sensitivity and confidentiality of the dossiers received for official recognition and acknowledged that the experts had signed the confidentiality undertakings. She indicated that the information provided within the dossiers belonged to the applicant countries. She also mentioned that if any members of the Group had any conflict of interest in the evaluation of a dossier, the expert(s) should withdraw from the discussions and decision making process of the particular application.

Dr Laure Weber-Vintzel, Head of the Status Department, emphasised the importance of the quality of the public report to be scrutinised by OIE Members before adopting the proposed list of countries free from PPR. She also encouraged the Group to continue providing detailed feedback to support countries receiving a negative outcome in identifying the main gaps and points for improvement, as well as providing informative recommendations to those countries with positive outcomes for further the maintenance of their PPR free status.

The Group and the OIE welcomed Drs Shubh Mahato and Mohamad Hossein Nazem Shirazi as new members of the Group and thanked the four other experts for their contribution to the Group.

Dr Anna-Maria Baka, Chargée de mission of the Status Department, introduced Dr Hernán Oliver Daza, who joined the Status Department to work on the activities related to official disease status recognition.

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

The Group was chaired by Dr Misheck Mulumba. Dr Giancarlo Ferrari acted as rapporteur, with the support of the OIE Secretariat. The Group endorsed the proposed agenda.

The Terms of Reference, the final agenda and the list of participants are presented as Appendix I, II and III.

3. Evaluation of applications from OIE Members for the official recognition of their PPR free status

3.1 Madagascar

In October 2017, Madagascar submitted an application for the official recognition of its PPR free status based on historical grounds. The Group requested additional information and received clarification from Madagascar.

a) *Animal disease reporting*

The Group considered that Madagascar had a record of regular and prompt animal disease reporting to the OIE. The Group also acknowledged that PPR was a notifiable disease in the country *as per* legislation since 1998 and that sanctions were envisaged for failure to report PPR cases. The Group appreciated that in 2016 official and private veterinarians had received a series of training on PPR surveillance, control and diagnostics in the framework of a project implemented in collaboration with international partners. Additionally, activities to raise awareness, funded by internal resources, were implemented during 2017 for veterinarians and meat inspectors. However, the Group noted that these activities did not include all relevant stakeholders such as farmers, traders and slaughterhouse workers.

The Group noted that a PPR suspect case was reported in June 2017, followed by epidemiological investigation and laboratory testing that eventually ruled out the occurrence of PPR.

b) *Veterinary Services*

The Group was informed that an OIE Performance of Veterinary Services (PVS) Gap Analysis mission had been conducted in Madagascar in 2013. The mission report was available to OIE partners and therefore was provided to the Group.

The Group noted, from the information provided in the annexes of the dossier, that in Madagascar the Directorate of Veterinary Services was under the Directorate General of Livestock and that there were 22 Regional Agriculture and Livestock Directorates which comprised five services, among which were the Regional Veterinary Services. The Group pointed out that the structure as articulated could potentially cause delays in the implementation of field operations or disbursement of operational budgets, as highlighted also in the above mentioned PVS Gap Analysis mission report. This concern was also reinforced by the fact that, according to the information provided, management of the funds allocated for livestock was not under the direct responsibility of the Directorate of Veterinary Services. The Group advised that in case of emergencies, Veterinary Services should have quick access to funding, for management of the situation.

The Group noted that Madagascar was in the process of implementing the identification of PPR susceptible animals in a pilot area in the southern part of the country (Anosy Region and Androy Region) in collaboration with an international cooperation project. According to the additional information provided, movement controls would be put into force progressively with the implementation of a small ruminant traceability system. The Group appreciated that Madagascar had acknowledged in its dossier the current inadequate control of animal movements and started working to fill the gaps.

c) *Situation of PPR in the past 24 months*

The Group acknowledged that PPR had never been reported in the country. Therefore, Madagascar was eligible to claim historical freedom from PPR as described in Article 1.4.6. of the *Terrestrial Animal Health Code (Terrestrial Code)*.

d) *Absence of vaccination in the past 24 months and no entry of vaccinated animals*

The Group acknowledged that, while there was no legal framework in place prohibiting the use of PPR vaccines, vaccination against PPR had never been carried out in Madagascar under the country's general principle of not vaccinating against diseases that were absent from the country. The Group noted that no vaccinated animals had entered Madagascar, as imports of live animals were prohibited in the country (*cf* section 3.1 e).

e) *Importation of domestic ruminants and their semen, oocytes or embryos - in accordance with relevant articles of Chapter 14.7.*

The Group acknowledged that legislation had been in force since 2001 prohibiting imports of live animals and products of animal origin in Madagascar. Exceptionally, Madagascar allowed the import of small ruminants twice: in 2007, a total of 400 heads were imported from Australia and 15 heads were imported from France in 2010. Madagascar confirmed that the import of fresh meat was forbidden, and that only processed heat treated products were authorised to be imported.

The Group was informed that an OIE expert mission, with regard to foot and mouth disease (FMD), was carried out in Madagascar in 2017 and that the team members of the mission had the opportunity to visit border control facilities and evaluate the implementation of their activities. The Group acknowledged, from the information provided in the report of the above mentioned mission, that the management of imports was considered satisfactory.

f) *Surveillance for PPR and PPR virus infection in accordance with Articles 14.7.27. to 14.7.33. and with Chapter 1.4.;*

The Group acknowledged, from the information provided in the annexes of the dossier, that passive surveillance relied on the national epidemiosurveillance network which comprised 154 veterinarians. Among them, 35 veterinarians accredited within the Madagascar Surveillance (MadSUR) network were distributed in specific areas of the country and conducted surveillance and epidemio-vigilance activities on a certain number of diseases, including PPR. This network was financially supported by a project implemented in the framework of a regional partnership and produced epidemiological reports on a monthly basis. The Group commended Madagascar for this initiative and encouraged the Veterinary Services to strengthen MadSUR and to undertake similar initiatives to ensure the expansion of surveillance activities to the rest of the country.

Whilst pathogen-specific surveillance was not mandatory according to Article 1.4.6. of the *Terrestrial Code*, the Group commended Madagascar for the serological surveys since 2016.

The Group noted that PPR diagnostic testing, using antigen capture ELISA, was performed in the National Veterinary Laboratory (LNDV), which was not officially accredited. Madagascar informed the Group that two scientists from LNDV were trained on PPR diagnosis at an OIE Reference Laboratory for PPR in November 2017. The Group also took note that in case of a positive result, samples would be sent to an OIE Reference Laboratory for PPR, under an international partnership framework.

In response to questions raised on the epidemiological investigation of the suspected PPR case, mentioned in paragraph 3.1 a) of this report, Madagascar described the follow-up actions taken to rule out PPR. Even if the follow-up was properly conducted, the Group expected that Madagascar would have sent samples to an OIE Reference Laboratory for PPR, for confirmation.

g) *Regulatory measures for the early detection, prevention and control of PPR*

Madagascar developed a PPR National Strategic plan, that was provided as an annex of the dossier. The Group appreciated the development of such a Plan, which included a contingency plan, developed in collaboration with an international partner. The Group also acknowledged that a legal framework was in place regulating imports and designating sentinel sites and entry points. The Group agreed that the regulatory measures for early detection, prevention and emergency control of PPR existed in Madagascar, but noted that, according to the National Strategic Plan, many PPR-related activities in Madagascar would rely on the financial support of regional funds.

h) Compliance with the questionnaire in Article 1.6.9.

The Group noted that Madagascar had provided details and answers to some of the questions in Article 1.6.9. in the format of annexes and not within the core dossier. However, the Group agreed that overall the submitted dossier was compliant with the format of the questionnaire in Article 1.6.9.

Conclusion

Considering the information submitted in the dossier and Madagascar's answers to the Group's questions, the Group concluded that the application was compliant with the requirements of Chapter 14.7. and with the questionnaire under Article 1.6.9. of the *Terrestrial Code*. The Group therefore recommended that Madagascar be recognised as a PPR free country.

Recommendations to Madagascar:

The Group recommended that Madagascar:

- implement the identification, movement control and traceability system of PPR susceptible animals in the whole country;
- organise and maintain awareness and cascade training programmes dedicated to PPR and intended for all stakeholders, including farmers and traders, to increase the sensitivity of the early warning system;
- strengthen laboratory capacity to improve diagnostic capacity;
- establish a legal framework to support the prohibition of vaccination against PPR;
- put in place a system to self-monitor, periodically evaluate and amend, if relevant, the current rapid response mechanism to PPR suspect cases and potential outbreaks.

The Group recommended that information on the above be provided when Madagascar submits its annual reconfirmation in 2018.

3.2 Peru

In October 2017, Peru submitted an application for the official recognition of its PPR free status based on historical grounds. The Group requested additional information and received clarification from Peru.

a) Animal disease reporting

The Group considered that Peru had a record of regular and prompt animal disease reporting and that PPR was included since 2004 in the list of exotic diseases for which notification was compulsory *as per* legislation. The Group also noted that pecuniary penalties were foreseen in case of failure to report suspect cases of notifiable diseases, including PPR.

The Group acknowledged that the National Agrarian Health Service (SENASA) had been implementing a series of annual training sessions targeting all relevant stakeholders. The Group took note that in 2016 a total of 6,885 persons including veterinarians, agricultural technicians, producers, slaughterhouse workers and the general public had received relevant training.

b) Veterinary Services

From the additional clarification, the Group noted that PPR susceptible animals were identified at herd level (lots) and that a Health Certificate for Internal Transit (CSTI), where the number of lot(s) was indicated, was required for their movements. The Group acknowledged that information present in CSTI as well as information on the small ruminant population were registered in the Integrated Animal Health Management System (SIGSA). The Group also appreciated the summary table generated from SIGSA including data on goats provided by Peru for 2017.

The Group agreed that a small ruminant traceability system was in place in Peru and therefore concluded that the Veterinary Services had the knowledge and authority over domestic sheep and goats in the country.

c) *Situation of PPR in the past 24 months*

The Group acknowledged that PPR had never been reported in the country. Therefore, Peru was eligible to claim historical freedom from PPR as described in Article 1.4.6. of the *Terrestrial Code*. In addition, the Group noted that all Peru's neighbouring countries were officially recognised by the OIE as having a PPR free status and that PPR had never been reported in the whole region of the Americas .

d) *Absence of vaccination in the past 24 months and no entry of vaccinated animals*

While there was no specific regulation in place prohibiting vaccination against PPR, the Group took note that the introduction of any exotic pathogens in Peru was prohibited *as per* legislation. Furthermore, importation of infectious agents or strains for the elaboration of biological products should be authorised by the Competent National Authority exclusively for the purposes determined in the research and experimental design, following a risk analysis. The Group acknowledged that vaccination had never been carried out in Peru.

e) *Importation of domestic ruminants and their semen, oocytes or embryos - in accordance with relevant articles of Chapter 14.7.*

The Group took note of the import requirements for sheep and goats and their products, according to which importations from specific countries were allowed, following an evaluation of their sanitary status. The Group acknowledged that these countries were officially recognised as free from PPR and noted that no small ruminants had been imported in Peru in 2017. The Group concluded that the import requirements were in line with the provisions of Chapter 14.7. of the *Terrestrial Code*.

f) *Surveillance for PPR and PPR virus infection in accordance with Articles 14.7.27. to 14.7.33. and with Chapter 1.4.*

PPR had never been reported in Peru. In accordance with Article 1.4.6. of the *Terrestrial Code*, and as Peru had complied with the requirements 1.a.iii to 1.a.vi) of this article for a period of ten years, Peru was eligible to demonstrate freedom from PPR without an agent-specific surveillance. The Group acknowledged that a broad section of stakeholders were involved in the surveillance of animal diseases including PPR, and that a free telephone line was available for reporting suspect cases.

The Group agreed that the surveillance system in place for at least ten years would be able to detect clinical signs in a naïve population, in case of a PPR incursion in the country.

g) *Regulatory measures for the early detection, prevention and control of PPR*

The Group took note of the existence and functions of the "Directorate of Animal Health" through the "Sub-Directorates of Risk Analysis and Epidemiological Surveillance, Animal Quarantine, Disease Control and Eradication" as well as the "Centre for Animal Health Diagnosis" to ensure early detection, prevention and control of exotic diseases. Moreover, the Group took note of a "Quarantine Control System" in place, which was intended to prevent the entry of exotic diseases in import shipments or in international transit as well as to ensure the safety of animal products and by-products in export shipments.

The Group agreed that the necessary measures for early detection, prevention and control of PPR were in place in Peru.

h) Compliance with the questionnaire in Article 1.6.9.

The Group commended the well-structured dossier provided by Peru and agreed that the submitted dossier was compliant with the format of the questionnaire in Article 1.6.9.

Conclusion

Considering the information submitted in the dossier and Peru's answers to the Group's questions, the Group concluded that the application was compliant with the requirements of Chapter 14.7. and with the questionnaire under Article 1.6.9. of the *Terrestrial Code*. The Group therefore recommended that Peru be recognised as a PPR free country.

Recommendations to Peru:

The Group recommended that Peru maintain awareness activities dedicated to PPR and intended for all stakeholders.

3.2 Uruguay

In October 2017, Uruguay submitted an application for the official recognition of its PPR free status based on historical grounds. The Group requested additional information and received clarification from Uruguay.

a) Animal disease reporting

The Group considered that Uruguay had a record of regular and prompt animal disease reporting and that PPR was included in the list of notifiable diseases *as per* legislation since 1994. The Group took note that the suspected presence of the disease should be notified and agreed that the procedures described in the dossier would lead to a clinical follow-up investigation of suspected cases. The Group acknowledged that penalties were foreseen for failure to report PPR cases. From the additional information provided, the Group appreciated that training programmes and awareness raising campaigns had been implemented both at national and regional level and included all relevant stakeholders, such as official and private veterinarians, veterinary paraprofessionals and producers.

b) Veterinary Services

The Group acknowledged that a legal framework was in place since 1973 regulating the traceability of livestock in Uruguay at herd level, according to which identification of all animals was compulsory. While small ruminants were currently identified at herd level, the Group appreciated that Uruguay planned to integrate them into an individual electronic identification system that would identify the premises, their origin and their movements. The Group appreciated the information on demographics and distribution of sheep and goat holdings as presented in the dossier.

The Group noted from the information provided in the dossier that a PVS follow-up mission had been conducted in Uruguay in 2014 and that the report was made available by the country. The PVS report provided additional guarantees that the Veterinary Services were compliant with the requirements for a country having a PPR free status.

The Group agreed that the Veterinary Services had knowledge and authority over all domestic sheep and goats throughout the country and noted that the legislation regulating the establishment of a Veterinary Statutory Body was pending.

c) Situation of PPR in the past 24 months

The Group acknowledged that PPR had never been reported in the country. Therefore, Uruguay was eligible to claim historical freedom from PPR as described in Article 1.4.6. of the *Terrestrial Code*.

d) *Absence of vaccination in the past 24 months and no entry of vaccinated animals*

In response to a question, Uruguay informed the Group that legislation was in place prohibiting the possession and manipulation of causative agents of diseases that had never been reported in the country. The Group therefore acknowledged that production and importation of vaccines against PPR were not allowed and that vaccination had never been carried out in Uruguay.

e) *Importation of domestic ruminants and their semen, oocytes or embryos - in accordance with relevant articles of Chapter 14.7.*

The Group noted that imports of live animals or their products were only allowed from countries with an official PPR free status. Some illegal imports of products and by-products of animals susceptible to PPR had been detected and these commodities were destroyed. Furthermore, Uruguay clarified that the countries of origin of these imports were officially recognised as free from PPR and transparently provided a detailed description of the follow-up actions on detection of such imports. No illegal imports of live animals susceptible to PPR had been detected during the past two years.

The Group took note of: i) the 19 fixed official check-points at the main points of entry into Uruguay; ii) the quarantine stations, operating under the control of livestock and agriculture services to control imports.

From the dossier and the additional information provided, the Group concluded that import control procedures for animals and animal products in Uruguay were in accordance with the requirements of the *Terrestrial Code*.

f) *Surveillance for PPR and PPR virus infection in accordance with Articles 14.7.27. to 14.7.33. and with Chapter 1.4.*

PPR had never been reported in Uruguay. In accordance with Article 1.4.6. of the *Terrestrial Code*, and as Uruguay had complied with the requirements 1.a.iii to 1.a.vi) of this article for a period of at least ten years, Uruguay was eligible to demonstrate freedom from PPR without an agent-specific surveillance.

The Group agreed that the surveillance system in place for at least ten years would be able to detect clinical signs in a naïve population, in case of a PPR incursion in the country.

The Group acknowledged that, as also indicated in the PVS follow-up report, the Veterinary Services had access to and make use of the network of OIE Reference Laboratories for PPR to get a confirmatory diagnosis. The Group commended Uruguay for providing detailed information of the sample shipping procedures to the Reference Laboratories.

g) *Regulatory measures for the early detection, prevention and control of PPR*

The Group appreciated that Uruguay had been participating in joint regional actions, as a member of the Permanent Veterinary Committee of the Southern Cone (CVP). The CVP ensures that trade requirements are respected within the region and common interests are protected. The Committee's links with international organisations, such as the OIE, the FAO and their joint Global Framework for Progressive Control of Transboundary Animal Diseases (GF-TADs), were acknowledged by the Group.

From the additional information, the Group noted that, in support of the Veterinary Services, Uruguay had established the "National Health Emergency System", a technical organisation integrating all ministries, bodies and institutions related to animal health to quickly respond to exotic disease outbreaks and effectively implement control and eradication activities. Uruguay provided a summary of the activities to be implemented in case of a PPR outbreak, which were included in the PPR action plan.

The Group agreed that the necessary regulatory measures for early detection, prevention and control of PPR were in place in Uruguay.

h) Compliance with the questionnaire in Article 1.6.9.

The Group appreciated the well-structured and comprehensive dossier provided by Uruguay and agreed that the submitted dossier was compliant with the format of the questionnaire in Article 1.6.9.

Conclusion

Considering the information submitted in the dossier and Uruguay's answers to the Group's questions, the Group concluded that the application was compliant with the requirements of Chapter 14.7. and with the questionnaire under Article 1.6.9. of the *Terrestrial Code*. The Group therefore recommended that Uruguay be recognised as a PPR free country.

Recommendations to Uruguay:

The Group recommended that:

- Uruguay maintains awareness activities dedicated to PPR and intended for all stakeholders, using appropriate communication tools;
- Veterinary Services explore mechanisms to accelerate the enactment of the necessary legislation to facilitate the establishment and operation of a Veterinary Statutory Body.

4. Evaluation of an application from an OIE Member for the endorsement of its official control programme for PPR

The Group assessed the request of an OIE Member for the endorsement of its national official control programme for PPR. The Group concluded that the Member had not met the requirements of the *Terrestrial Code* and the dossier was referred back to the corresponding Member.

5. Information on the implementation of the PPR Global Control and Eradication Strategy

Dr Jean-Jacques Soula, OIE Coordinator of the FAO-OIE joint PPR Secretariat, updated the Group on the implementation of the PPR Global Control and Eradication Strategy¹ (PPR-GCES). He indicated that PPR eradication was directly linked to the global major challenges and to the Sustainable Development Goals of the United Nations (UN SDGs), with the same timeframe (Achievement by 2030), in particular SDG 1 ("No Poverty"), 2 ("Zero Hunger"), 5 ("Gender Equality") and 8 ("Decent Work and Economic Growth").

Dr Soula projected the newly developed PPR-GCES communication video, available on the FAO and OIE² websites, and a map showing the current distribution of PPR in the world. He also described in detail the four components of the PPR-GEP.

He summarised the main steps achieved in 2016, as already detailed in the PPR ad hoc Group report annexed to the Scientific Commission report of February 2017³ regarding the implementation of the PPR-GCES, and mentioned the main steps achieved in 2017 regarding the implementation of the PPR-GCES, including:

- Finalisation of the first round of PPR regional roadmap meetings (in the nine regions covered by the PPR-GCES) and start of the second round (Central Asia, Middle East and Central Africa);

¹ <http://www.oie.int/eng/ppr2015/doc/PPR-Global-Strategy-2015-03-28.pdf>

² <http://www.oie.int/en/animal-health-in-the-world/ppr-portal/>

³ http://www.oie.int/fileadmin/Home/eng/International_Standard_Setting/docs/pdf/SCAD/A_SCAD_Feb2017.pdf

- Drafting and endorsement of an FAO-OIE Joint Resource Mobilisation and Marketing Strategy to support the implementation of the PPR-GEP (total cost estimated to be \$996 million for the period 2017-2021), through advocacy and fund raising, in order to fill the gaps in PPR eradication projects implemented at country level, and in supporting global and regional coordination;
- Establishment, in June 2017, of the PPR Advisory Committee;
- Editorial support to the PPR National Strategic Plans (PPR-NSP) and Regional strategies drafting processes;
- Second PPR vaccine producers meeting, in Morocco in April 2017;
- Special support to Mongolia (more than 50 million small ruminants), where PPR appeared for the first time in 2016 with spill over into wildlife;

Dr Soula also mentioned the main activities of the OIE on PPR, coordinated by the OIE-PPR Internal Coordination Group:

- OIE-conducted PVS-PPR pilot missions in two countries,
- Support on-going projects with a PPR component (“PRAPS⁴”, covering six countries in the Sahel region in Africa) and
- Activities related to the OIE procedure for the endorsement of national official control programmes for PPR and the official recognition of PPR free status.

The main activities scheduled by the PPR Secretariat in the near future were the following:

- Continuation of the activities (Regional roadmap meetings, vaccine producer workshops, support to countries to draft their PPR-NSP, in conducting socio-economic studies on PPR impact and to apply for the OIE free status);
- Launch of the PPR Global Research and Expertise Network (PPR-GREN) in April 2018 in Vienna

Finally, Dr Soula informed the participants about the organisation of a PPR Ministerial Pledging Conference in Brussels (hosted by the European Commission) during the first semester of 2018. The preparation process for this conference would benefit from the FAO-OIE Resource Mobilization and Marketing Strategy endorsed in 2017 and would use the available communications tools.

The Group discussed the engagement of stakeholders at field level (farmers, producers etc) as critical to the success of the PPR-GEP and encouraged the PPR Secretariat to actively involve farmers representatives in future activities.

6. Other matters

Notification of PPR in wildlife

Following internal OIE discussion, the Group was requested to provide an opinion on whether Chapter 14.7. of the *Terrestrial Code* should be revised to encourage notification of the occurrence of PPR cases in wild animals.

The Group discussed the challenges relative to the available information on the PPR epidemiological situation in wildlife worldwide and expressed its concerns about the possible implications on official status recognition and on trade in case of notification of PPR cases in wild animals. Therefore, the Group expressed the opinion that Chapter 14.7. of the *Terrestrial Code* could include notification of PPR cases in wildlife but that the occurrence of PPR in wildlife should not impact OIE Members’ officially recognised PPR status and requirements for trade.

⁴ PRAPS: Projet régional d’appui au pastoralisme au Sahel

The Group suggested that the OIE encourage the validation in wild animals of the tests used for the serological surveillance of PPR in domestic animals.

7. Adoption of the report

The Group reviewed and amended the draft report provided by the rapporteur. The Group agreed that the report would be subject to a short period of circulation to the Group for comments and adoption. Upon circulation, the Group agreed that the report captured the discussions.

.../Appendices

Appendix I

**MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION
OF PESTE DES PETITS RUMINANTS STATUS OF MEMBERS
Paris, 7-8 December 2017**

Terms of Reference

The OIE *ad hoc* group on peste des petits ruminants (PPR) status of Member (the Group) is expected to evaluate the applications for official recognition of PPR free status received from three Members and for endorsement of control official programme for PPR received from one Member.

This implies that the experts, members of this Group are expected to:

1. Sign off the OIE Undertaking on Confidentiality of information, if not done before.
 2. Complete the Declaration of Interests Form in advance of the meeting of the Group and forward it to the OIE as their earliest convenience and at least two weeks before the meeting.
 3. Evaluate the applications from Members for official recognition of PPR free status and for the endorsement of official control programme for PPR
 - a) Before the meeting:
 - read and study in detail all dossiers provided by the OIE;
 - take into account any other information available in the public domain that is considered pertinent for the evaluation of dossiers;
 - summarise the dossiers according to the *Terrestrial Animal Health Code* requirements, using the form provided by the OIE;
 - draft the questions whenever the analysis of the dossier raises questions which need to be clarified or completed with additional details by the applicant Member;
 - send the completed form and the possible questions to the OIE, at least one week before the meeting.
 - b) During the meeting:
 - contribute to the discussion with their expertise;
 - withdraw from the discussions and decision making when possible conflict of interest;
 - provide a detailed report in order to recommend, to the Scientific Commission for Animal Diseases, the country(ies) or zone(s) to be recognised (or not) as PPR free and to endorse (or not) an official control programme;
 - indicate any information gaps or specific areas that should be addressed in the future by the applicant Member.
 - c) After the meeting:
 - contribute electronically to the finalisation of the report if not achieved during the meeting.
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Appendix II

**MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION
OF PESTE DES PETITS RUMINANTS STATUS OF MEMBERS
Paris, 7-8 December 2017**

Agenda

1. Opening
 2. Adoption of the agenda and appointment of chairperson and rapporteur
 3. Evaluation of applications from OIE Members for the official recognition of their peste des petits ruminants (PPR) free status
 - a. Madagascar
 - b. Uruguay
 - c. Peru
 4. Evaluation of an application from an OIE Member for the endorsement of its official control programme for PPR
 5. Information on the implementation of the PPR Global Control and Eradication Strategy
 6. Other matters
 7. Adoption of the report
-

Appendix III

**MEETING OF THE OIE AD HOC GROUP ON THE EVALUATION
OF PESTE DES PETITS RUMINANTS STATUS OF MEMBERS
Paris, 7-8 December 2017**

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MEETING OF THE OIE *AD HOC* GROUP ON RABIES

Paris, 21 – 23 November 2017

A meeting of the OIE *ad hoc* Group on rabies (hereinafter referred to as the Group) was held at the OIE Headquarters in Paris from 21 to 23 November 2017.

1. Opening and adoption of agenda and appointment of a chair and rapporteur

Dr Matthew Stone, Deputy Director General for International Standards and Science of the OIE, welcomed the Group members and the representatives from the Scientific Commission for Animal Diseases (Scientific Commission) and the Terrestrial Animal Health Standards Commission (Code Commission).

Dr Stone remarked that the large majority of human rabies cases were dog-mediated. All those cases were preventable by acting at the animal source and by ensuring adequate post-exposure prophylaxis. Dr. Stone made reference to the ambitious goal of the Global initiative [Zero by 30: The Global Strategic Plan to End Human Deaths from Dog-transmitted Rabies by 2030](#), which was launched by the WHO, OIE, FAO and the Global Alliance for Rabies Control at 2017 World Rabies Day.

Dr Stone also commented on the ongoing work to update the *Manual of Diagnostic Tests and Vaccines for Terrestrial Animals (Terrestrial Manual)* chapter on rabies. He highlighted the important task of the Group to review and align the *Terrestrial Animal Health Code (Terrestrial Code)* chapter on rabies, to relevant international guidelines, such as the draft report of the 3rd WHO Expert Consultation on Rabies and WHO Technical Report Series (3rd WHO TRS on Rabies) to support OIE Member Countries in their efforts to reach the global elimination goal.

Dr Stone noted that rabies is not a disease for which the OIE officially recognises freedom status. However, he emphasised the work to strengthen and increase the transparency and visibility of the OIE procedure for the self-declaration of freedom from diseases. He highlighted that Members need to comply with OIE international standards should they want to self-declare free from rabies.

Dr Gideon Brückner, President of the Scientific Commission, welcomed the experts, and remarked that the expected outcome of the Group should be an in-depth review of the chapter. He recalled that this review was recommended at the last [Rabies Global Conference](#) (Geneva, 2015), and endorsed by the OIE Members at the 84th OIE General Session (Paris, 2016). He also stressed that the modifications should not duplicate but integrate and complement, when appropriate, the WHO's rabies guidelines. Prof Salah Hammami, member of the Code Commission, reminded the Group of the need to support all proposed changes by a well described scientific rationale or by published scientific references.

The meeting was chaired by Dr Thomas Mueller, and Dr Ryan Wallace was appointed as rapporteur. The draft agenda was adopted by the Group.

The Agenda and list of participants are presented as [Appendices I](#) and [II](#), respectively.

2. Summary of the follow up actions after the 2015 Global Conference including the work to update international standards and guidelines

The Group was updated on the actions taken after the last Global Conference on Rabies, and the progress made in developing and implementing the Global Strategic Plan. The representative from WHO informed the Group on the foreseen modifications of the 3rd WHO TRS on Rabies (which was still in draft version the time of the meeting). The Group acknowledged that crucial aspects of the 3rd WHO TRS on Rabies should be taken into account in the revised version of the chapter.

The Group was informed of the outcomes of the *ad hoc* Group meeting that was convened to review the *Terrestrial Manual* chapter on rabies. It was noted that, for the first time, molecular techniques such as rt-PCR were proposed as a recommended confirmatory test. It was further noted that dog oral rabies vaccination was also considered as a complementary control measure to parenteral mass vaccination of dogs. Although nerve tissue animal vaccines were still produced in certain countries, their use was not recommended by the OIE.

3. Overview of the current OIE procedure for self-declaration of disease freedom

The Group was updated on the OIE self-declaration procedure through which a country or a zone could self-declare freedom from an OIE-listed disease (excluding the six diseases under official disease status recognition). It was pointed out that a self-declaration does not reflect the official position or endorsement by the OIE regarding the disease status in the country.

The Group was informed on the efforts made by the OIE to strengthen and increase the transparency and visibility of the OIE procedure for country self-declaration of freedom from disease. The Group expressed nevertheless, concerns about the self-declaration freedom from rabies, given the potential animal and human health implications of erroneously declared status.

The Group noted that the rabies self-declaration aimed at an objective similar to the ‘verification’ procedure that was being discussed within WHO (i.e. 3rd WHO TRS on Rabies). It recommended that OIE and WHO coordinate their initiatives to avoid duplication of procedures and to ensure that the information that is required to support country rabies freedom status claims is harmonised between WHO and OIE. However, it was also acknowledged that the current procedure for self-declaration of freedom from an OIE listed disease would need to meet the requirements outlined in the disease-specific chapter of the *Terrestrial Code*, before being proposed for publication by the OIE.

4. Review the OIE Terrestrial Code Chapter 8.14. Infection with rabies virus

Article 8.14.1. General provisions

The Group recognised that the current use of the term “rabies” throughout the chapter could be misleading as it interchangeably refers to the disease and the pathogen. The Group decided to add an introductory paragraph to clarify that rabies is a disease that is caused by the infection of any species of the genus *Lyssavirus* (Fooks et al., 2014).

The Group noted that the current internationally accepted taxonomic name that refers to the former classical rabies virus, genotype 1, is “*Rabies lyssavirus*” (ICTV, 2015). The Group also emphasised the role of *Rabies lyssavirus* as responsible for the vast majority animal and human rabies cases. The Group pointed out that *lyssavirus* species other than *Rabies lyssavirus* may also cause the disease, but have more restricted geographical distribution and host range, and that public health consequences are limited.

The Group consulted an expert from the International Committee on Taxonomy of Viruses, and concluded that the common name of the pathogenic agent, formerly named as “classical rabies virus, genotype 1”, should be maintained as “rabies virus” throughout the chapter.

The Group discussed the need to include other *Lyssavirus* species in the case definition. The public and animal health impact of other *Lyssavirus* species and the notification implications were discussed. The conclusion was that for the purposes of the *Terrestrial Code*, a rabies case should remain as any animal infected with rabies virus only.

The experts pointed out that the glossary definition of ‘animals’ implicitly includes bats. Therefore, an infection in bats with rabies virus should be considered as a case and therefore, it should be notified to the OIE.

The Group discussed the issue around the difference between a rabies case and an outbreak, in particular regard to notification and enumeration of cases, and noted the definitions of these terms in the Glossary. Because the epidemiologic unit of concern is normally the individual rabies infected animal, it was decided to make references to ‘cases’ and not to ‘outbreaks’ throughout the chapter.

The Group noted that the incubation and infectivity periods for rabies virus were unknown in certain animal species. However, adequate studies had been conducted to characterise these periods in dogs, cats and ferrets that may justify the inclusion of specific time references into the chapter (Tepsumethanon et al., 2004). In the absence of new scientific evidence, the Group decided to retain the currently adopted incubation period of six months for the purpose of the *Terrestrial Code*.

The current version of the *Terrestrial Code* Chapter on rabies chapter does not provide a list of safe commodities, which differs from the approach that has been adopted for other diseases. The Group took note of the limited scientific evidence currently available on the matter, and recommended not to include an article on safe commodities.

To support the Global Strategic Plan, and for the purpose of the *Terrestrial Code*, the Group decided to add a definition of dog-mediated rabies. This was defined as an infection with rabies virus that is **maintained** in the dog population regardless of the source of infection. Therefore, this would require that the rabies virus be transmitted from infected dogs to other dogs or to other susceptible species. The term “mediated” was preferred over “transmitted” as the former is more commonly used by the international scientific community.

Article 8.14.2. Control of rabies in dogs

In light of the newly added articles (i.e. draft Article 8.14.3bis.) on dog-mediated rabies free country or zone, Article 8.14.8.ter on OIE endorsed official control programme for dog-mediated rabies, draft Article 8.14.9.bis on Surveillance), the Group decided to delete Article 8.14.2. as the content of this article was considered in the new draft articles.

Article 8.14.3. Rabies free country

The adopted chapter only provided provisions to self-declare the whole country free from rabies. The Group discussed the merit and feasibility of declaring a zone free from rabies virus to support Members to progress towards rabies elimination. It was mentioned that several OIE Members were already implementing regionalisation as part of their national control rabies elimination strategies. The Group took note of the definition of zone in the Glossary of the *Terrestrial Code* and discussed the challenges of implementing a zoning approach according to the provisions of the *Terrestrial Code* Chapter 4.3. on zoning and compartmentalization (e.g. the control of dog movement between zones). The Group agreed that this approach could provide benefits to some OIE Members and decided to include the possibility of declaring zones free from rabies in the article. The title of the article was changed accordingly.

The Group discussed the need to include the concept of “terrestrial rabies”. In the most recent scientific literature, this term was defined as the infection of rabies virus in the terrestrial mammals, including bats. Based on the case definition of Article 8.14.1. on general provisions, the Group pointed out that for the purpose of the *Terrestrial Code*, the term infection with rabies virus should be considered as equivalent to “terrestrial rabies”.

The Group decided to add provisions specifying that all susceptible animals showing clinical signs suggestive of rabies should be properly investigated to support the claim of freedom (Tepsumethanon et al. 2005; Wallace et al., 2015).

The Group considered the requirements of Article 1.4.6. on surveillance to demonstrate freedom from disease or infection, according to which a country or a zone free from infection should not have carried out vaccination against the disease. The Group decided to specify that preventive vaccination, which is recommended for rabies elimination and for preventing re-introduction, did not preclude the rabies free status.

The Group remarked that an imported case of rabies in the Order Carnivora or Chiroptera which occurred outside a quarantine station should not jeopardize the rabies free status, provided that an epidemiological investigation according to OIE standards was carried out to demonstrate that the country had not had any indigenous transmission events (Sinclair et al., 2015). Therefore, the Group suggested deleting point 5.

The Group noted the two-year waiting period to claim freedom from disease. The Group discussed the possibility to include a shortcut recovery mechanism as per other diseases, and the public health implications (Charlton et al., 1997). The Group concluded that a shortcut recovery mechanism was not warranted, as rabies maintenance below the level of detection after an introduction was possible with important public health consequences.

Article 8.14.3.bis Rabies infected country or zone

The Group drafted this article to clarify that a country that did not fulfil the requirements of freedom should be considered infected.

Article 8.14.3ter. Dog-mediated rabies free country or zone

The Group agreed to draft a new article on dog-mediated rabies free country or zone to emphasise the public health importance of dogs as the main source of human rabies and to be in line with the Global Strategic Plan.

The article was drafted following the updated Article 8.14.3. taking into account the specifics of dog-mediated rabies control. The Group agreed that either preventive vaccination or the presence of rabies virus in wildlife should not preclude the dog-mediated rabies free status.

Finally, the Group discussed the current capacity to differentiate rabies virus adapted to dogs from other rabies virus adapted to susceptible animal species other than dogs. The Group concluded that, with the current molecular diagnostic techniques, such differentiation is not always feasible.

The Group considered the OIE self-declaration procedure and recommended that the OIE elaborate a questionnaire to provide guidance for countries to follow for self-declaration of freedom from dog-mediated rabies. The Group noted that existing networks, such as REDIPRA (Reunión de Directores de los Programas de Rabia de las Américas) or PARACON (Pan-African Rabies Control Network), had already developed questionnaires that could be adapted for this purpose.

Article 8.14.6. Recommendations for importation of dogs, cats and ferrets from countries considered infected with rabies

The Group discussed the current three month minimum period of vaccination prior to shipment of dogs, cats or ferrets. In light of multiple reports in the scientific literature (Rupprecht et al., 1990; Aubert, 1992; Shimazaki et al., 2003; Muirhead et al., 2008; Brown et al., 2011; Wallace et al., 2017), the Group decided to reduce the time to one month and to maintain the minimum antibody concentration of 0.5 UI/ml as this limit has been broadly accepted by the Veterinary Authorities.

Article 8.14.7. Recommendations for importation of domestic ruminants, equids, camelids and suids from countries considered infected with rabies

The Group noted that countries frequently require that wild animals (e.g. carnivores) be vaccinated for rabies prior to importation (Wallace et al. 2016). The Group, therefore, decided to extend the scope of this article to include all animals, except dogs, cats, ferrets and laboratory animals. The title was amended accordingly. The Group recommended the deletion of Article 8.14.9.

The wording was amended to take into account the differences between the provisions for animal identification of domestic and wild animals.

Article 8.14.8. Recommendations for importation from countries considered infected with rabies (For rodents and lagomorphs)

The Group noted that the provisions of this article referred to laboratory animals born and reared in a biosecure facility and that the terms “rodents and lagomorphs” was misleading. For clarity, the text was amended and the term “rodents and lagomorphs” was replaced by “laboratory animals”. The title was also amended accordingly.

References to the *Terrestrial Manual* chapter 1.1.1 were included to clarify the term biosecure.

Article 8.14.8bis. OIE endorsed official control programme for dog-mediated rabies

The Group extensively discussed the importance of a rigorous rabies elimination programme in dogs as part of the national rabies control strategy to sustainably eliminate rabies human deaths and eventually break the cycle of transmission between dogs and humans. The Group discussed the conclusions of the last WHO Expert Consultation on Rabies (April 2017) which highlighted the need to create a ‘validation procedure’ to demonstrate absence of dog-mediated human rabies deaths and a ‘verification procedure’ to demonstrate absence of dog-mediated rabies cases was agreed. The Group also considered the request of some countries to have an international recognition of their progress towards the 2030 goal.

While acknowledging that rabies was not included in the list for which the OIE recognised an official disease status, the Group noted the mandate of the OIE to endorse national control programmes for FMD or PPR to support the global control and eradication strategies for these diseases. The Group, therefore, concluded that creating a mechanism to endorse national rabies elimination programmes in dogs would strongly support and contribute to the Global Strategic Plan for Dog-mediated Human Rabies Elimination. Members may wish to request an endorsement by the OIE to progressively improve their dog-mediated rabies situation and eventually be able to declare themselves free from dog-mediated rabies.

The endorsement of the dog rabies national control programme would also be a strong supporting evidence for countries wanting to validate their zero dog-mediated human rabies deaths status following the WHO procedure. Hence, the Group recommends to the OIE to explore the development of a mechanism to endorse the national control programmes for dog-mediated rabies elimination as a cornerstone of their national rabies elimination strategies.

The Group considered the *Terrestrial Code* Chapter 1.6. and Article 8.14.2. and proposed a draft article to describe the provisions for the endorsement of official national control programmes for dog-mediated rabies.

Article 8.14.9. Recommendations for importation of wildlife from countries considered infected with rabies

This article was deleted and the provisions included in Article 8.14.7.

Article 8.14.9.bis Surveillance

The Group discussed that, for the purpose of the *Terrestrial Code*, the main objective of rabies surveillance should be the detection of infection with rabies virus in all animals, and the collection of epidemiological information to support the maintenance of freedom. The Group noted that the provisions included in *Terrestrial Code* Chapter 1.4. either did not sufficiently cover the needs for rabies surveillance (e.g. such as public awareness, sampling methods), or were inappropriate (e.g. serological surveillance).

The Group took note of the structure and content of surveillance articles of disease-specific chapters of the *Terrestrial Code* as well as other relevant sources of information such as the [OIE Guide to Terrestrial Animal Health Surveillance](#), the 3rd WHO TRS on Rabies, and the [Blueprint for Rabies Prevention and Control](#).

The Group listed the critical surveillance components to be considered when designing and implementing a rabies surveillance programme that were not sufficiently addressed in the *Terrestrial Code* Chapter 1.4. These components included, public awareness, enhanced clinical surveillance to identify suspected animals, adequate epidemiological investigation, effective sampling strategy and cooperation with other competent authorities.

Regarding clinical surveillance, the Group stressed the importance of investigating suspected cases for the detection of rabies cases (Etheart et al., 2017). The Group noted that the draft chapter referred several times to surveillance and actions in response to suspected rabies virus cases. Therefore, the Group considered it necessary to include a definition of suspected cases for the purpose of the chapter.

Regarding the sampling strategies described in *Terrestrial Code* Chapter 1.4., the Group considered that active surveillance based on probability sampling methods applied to healthy animal populations not involved in human exposure was not recommended as it rarely provides valuable surveillance data (Chang et al., 2016). The Group recommended including specific provisions to clarify that surveillance should target suspected cases.

5. Any other issues

The Group noted that in some regions, such as in the Americas, wild carnivorous or haematophagous bats were the main rabies virus reservoirs posing a very high risk for livestock. Even in the absence of dog-mediated rabies, official national control programme to control the disease and reduce the economic and public health burden of the disease should be encourage and promoted by the OIE.

The Group requested the Scientific Commission to consider this recommendation and to decide whether or not it should be specifically mentioned in the draft chapter.

6. Finalisation and adoption of the draft report

The Group reviewed and amended the preliminary draft report provided by the rapporteur. The Group agreed that the report and revised chapters would be subject to a short period of circulation in the Group for minor comments and final adoption.

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.../Appendices

Appendix I

MEETING OF THE OIE *AD HOC* GROUP ON RABIES

Paris, 21 – 23 November 2017

Agenda

1. Summary of the follow up actions after the 2015 Global Conference including the work to update international standards and guidelines
 2. Overview of the current OIE procedure for self-declaration of disease freedom
 3. Review the OIE Terrestrial Code Chapter 8.14. Infection with rabies virus
 4. Any other issues
 5. Finalisation and adoption of the draft report
 6. References
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Appendix II

MEETING OF THE OIE AD HOC GROUP ON RABIES

Paris, 21 – 23 November 2017

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**REPORT OF THE MEETING OF THE OIE *AD HOC* GROUP
ON BIOLOGICAL THREAT REDUCTION IN RELATION TO SPECIFIC METHODOLOGIES
FOR VETERINARY SERVICES, PERTAINING TO THE INVESTIGATION
OF SUSPICIOUS BIOLOGICAL EVENTS**

Paris, 28 – 30 November 2017

The second meeting of the *ad hoc* Group on Biological Threat Reduction in Relation to Specific Methodologies for Veterinary Services, Pertaining to the Investigation of Suspicious Biological Events (hereafter the Group) was held at the OIE Headquarters from 28 to 30 November 2017.

1. Opening

The meeting was opened by the Chair of the *ad hoc* Group, Dr Gary Vroegindewey, who led the Group through a roundtable introduction.

On behalf of Dr Monique Eloit, Director General of the OIE, Dr Matthew Stone, the OIE Deputy Director General for International Standards and Science, welcomed and thanked the Group for its commitment and the extensive support towards the OIE mandate. Dr Stone provided context on the OIE methodology for expert groups and the steps that the Guidelines went through in the OIE process for endorsing recommendations since the last meeting. This address was followed by an introduction from the Head of OIE Programmes Department, Ms Tianna Brand, concerning the usefulness of the Guidelines for future activities such as workshops involving the animal health and law enforcement sectors.

2. Adoption of the agenda and Terms of Reference (ToR)

The agenda and terms of reference for the Group were reviewed and agreed on without modifications.

The terms of reference, agenda and the list of participants are provided as Appendices I, II and III respectively.

3. Discussion

3.1. Comments to the Guidelines

After the last meeting, the draft Guidelines were presented to the OIE Biological Standards and Scientific Commissions during their meetings, in September 2017. The Commissions commended the work done by the Group and showed interest in being updated on the evolution of the document.

3.2. Review of the Guidelines

During the morning of the first day, there was a preliminary review of the draft guidelines with the intention to find gaps and weaknesses to be addressed. Considerations for improvement of the Guidelines included reference to pertinent policy documents issued by other organizations and conventions and could help to broaden the impact of the Guidelines to different sectors, as well as the need to having each country using the guidelines as a complement to their national legislation. Also, it was deemed that the

level of detail in the document should be adjusted, especially in what relates to the sections on laboratory work, for example: additional consideration should be given to biosecurity and biosafety in the investigation of a suspicious event. Consideration should also be given to how to integrate biological threat reduction and investigation of suspicious events in the OIE Performance of Veterinary Services in terms of core/competencies for emergency management.

An example of a form to track the chain of custody will be attached to the Guidelines. A reference for this document is missing, as this should refer to an open source document that can be accessed by all people who wish to do so. Having a template form that can be adapted to each country's existing forms would be better suited. It was also highlighted that not only select agents are potential causes for a suspicious event; it could be caused by any agent. That being said, the scale of the event in terms of number of people and animals affected, environmental, economic and financial consequences will dictate whether this is an event of concern or not and whether these Guidelines are applicable. Hence, recommendations to the National Veterinary Services concerning surge response capability should also be considered.

3.3. Breakout Groups

The participants were divided in working groups to further develop assigned sections of the guidelines. Significant additions and changes were made to the contents of the document. Dr Alexander Hamilton, from UN Interregional Crime and Justice Research Institute (UNICRI), joined the Group for 30 minutes in the afternoon. After revision of the various sections, the Group was asked to try to find gaps in the document and to review related OIE documents that are useful references for the purposes of the Guidelines, namely OIE *Code* Chapter 3.3 on Communications and the OIE Day-One Competencies for Graduating Veterinarians.

3.4. Applicability in low resource environments

On the second day of the meeting, the Group started the discussion by talking over the challenges that National Veterinary Services from lower-resource countries would face while trying to implement these guidelines, due to lack of resources, insufficient training, shortage of staff, and difficulties related to ensuring sustainability of donor-funded projects, equipment and facilities.

3.5. Training requirements

The Group highlighted that in order for the Guidelines to be operational and to facilitate its implementation in Member Countries, the OIE would benefit from bringing together and training a group of experts who could not only take this subject from the veterinary arena into the public health and environmental fields, as well as to brief other organizations, National Veterinary Services and relevant stakeholders through 1-day training courses. Some of the target audiences would be OIE Focal Points (namely for Disease Notification and for Laboratories) and OIE Regional and Sub-Regional Representatives.

3.6. Considerations on the OIE Global Conferences on Biological Threat Reduction

The Group was updated on the outcomes of the 2nd OIE Global Conference on Biological Threat Reduction, held in Ottawa, Canada, from 31 October to 2 November 2017, including the presentation of a scientific poster on the draft Guidelines, previously approved by the Group. A set of recommendations was issued from the Conference; the Group was invited to provide comments on them. With regard to Recommendation 3, one of the Group members mentioned that it would be important to emphasise how communication and cooperation should be articulated, in order to guarantee that the "competition for publishing findings of scientific studies" does not translate into publishing information that may fall into the worrisome side of dual use.

Also, the Chair mentioned that it would be important to follow up on Recommendations 9 and 10, related to the incorporation of biothreat reduction in the joint activities of the Tripartite, the support in the implementation of the Bangkok Principles for the health aspects of the Sendai Framework, and the sustainable implementation of the International Health Regulations (WHO, 2005) and OIE Performance of Veterinary Services Pathway recommendations, respectively. As capacity for implementation of these activities and recommendations is poor in many countries, strategies tailored for each one must be applied.

It was discussed whether having a third edition of the OIE Global Conference on Biological Threat Reduction would be pertinent, and feedback from the Group members and their acquaintances who attended the conference was received.

Having in consideration that a great number of events and conferences pertaining to biological threat reduction has been taking place every year, the target audience for the OIE Conferences must be held in consideration when deliberating on this subject; the events organized by the OIE thus far were aimed at updating the OIE Network on a specific topic while bringing together relevant players from that field. Even though such events are not able to keep up with the forefront of scientific innovation, they are pertinent in terms of updating a specific audience on relevant advances and future directions on relevant fields.

That being said, the majority of the Group members agreed that a 3rd OIE Global Conference on Biological Threat Reduction would be of significant value in terms of increasing biothreat awareness, sharing information, and providing networking opportunities. However, it was recommended that the next conference should take place three to four years after the 2nd Global Conference.

3.7. Discussion with OIE management

On the morning of the last day of the meeting, Dr Matthew Stone and Ms Tianna Brand, Head of OIE Programmes Department, joined the meeting to receive a brief on the current status of development of the Guidelines, its scope, applicability and concerns related to the feasibility of their implementation. It was explained that the edits made to the Guidelines cut down long lists and focused on making the directions operational.

Dr Stone emphasized the importance of making it clear from the beginning that inter-sectoral cooperation built on the establishment of proactive institutional relationships is crucial for adequate preparedness, prevention, and eventual response to biological threats, and should be highlighted in the Guidelines. Also, Dr Stone mentioned that it would be important that the text gave clear direction in terms of communication, strategies for bringing parties together and releasing information to the public in the best way, as well as safeguarding the chain of custody throughout the investigation process. Even though these Guidelines are considered to be aspirational, giving the best directions we have to Member Countries is a priority. The OIE would be pleased to assist Member Countries reaching out for support in case they find struggles when trying to integrate the strategies given in their national plans of action.

Ms Tianna Brand, pointed out that reference to relevant OIE publications should be made whenever possible, as the OIE *Code*, OIE Manual and Guidelines for Disaster Risk Reduction are referenced where relevant for the purposes of the present Guidelines. Also, it was noted that the publication of the Guidelines will effectively implement some of the recommendations from the 1st Global Conference and with the momentum gained from the 2nd OIE Global Conference on Biological Threat Reduction, this presents an opportunity for these Guidelines to be referenced in upcoming workshops and trainings organized by the OIE.

3.8. Review of the Guidelines

In the afternoon of the third day, the Chair guided the Group for the final review of the document, having in consideration the additions made by the Group members during the previous afternoon and overnight.

4. Further work programme items identified by the *ad hoc* Group

As invited through the terms of reference, following the review of the Guidelines the Group took the opportunity to consider further work that could be undertaken to continue the progress made and support effective implementation of the guidelines.

4.1. For consideration by the OIE

- a) Incorporate biothreat preparedness, prevention and mitigation into the OIE Performance of the Veterinary Services Pathway

b) Communication:

- i) Develop model communications strategies, pre-scripted messages, templates for risk communications with consideration to release authorities

c) Training and education:

- i) Promote joint and inter-sectoral trainings/exercises
 - ii) Incorporation into OIE Day-One and Advanced Competencies
 - iii) Senior leadership training
 - iv) Online and hard copy training materials
 - v) Biothreat laboratory training
 - vi) Sampling for Biothreat
 - vii) Biothreat Reduction *guidelines training course - Laboratory and Disease Notification focal points*
- d) With regard to ToR 2 d), the Group recommends the OIE to develop guidelines for biothreat risk assessment to be used for appropriate agent decontamination, carcass disposition, environmental impact, personnel safety including training and education in these areas.
- e) OIE and appropriate partners to assess biothreat potential in the livestock food chain and wildlife
- f) OIE to establish a mechanism to assess the biothreat potential of notified incidents, in order to identify any international trend that may be an indicator of a deliberate coordinated event.
- g) Develop biothreat reduction and Disaster Risk Management Chapters for the OIE *Terrestrial Code*
- h) Continue the OIE Global Conferences on Biological Threat Reduction with a 3rd edition in 3 to 4 years' time
- i) OIE to gather a roster of speakers to present at international venues other than veterinary medical meetings on biothreat reduction and to liaise with relevant partners on this subject.

4.2. For consideration by OIE Member Countries

- a) Utilize these Guidelines to evaluate countries' biothreat reduction legal frameworks and capabilities.

5. Adoption of the draft report

The Group reviewed and amended the draft report provided by the rapporteur. The Group agreed that the report reflected the discussions.

.../Appendices

**MEETING OF THE OIE AD HOC GROUP
ON BIOLOGICAL THREAT REDUCTION IN RELATION TO SPECIFIC METHODOLOGIES
FOR VETERINARY SERVICES, PERTAINING TO THE INVESTIGATION
OF SUSPICIOUS BIOLOGICAL EVENTS**

Paris, 28 – 30 November 2017

Terms of Reference

Background

The OIE supports its Member Countries and helps them strengthen and improve the structure of their national animal health systems. The OIE also collects, analyses, and makes available the latest scientific information on prevention and control of animal diseases. This includes information on response to disease outbreaks.

The response to an outbreak will be the same, regardless of the origin, be it natural, accidental or deliberate. However, determining if the outbreak was of natural or deliberate origin requires a different mind-set and additional skills. In the event of a deliberate release of a pathogen it would then also become important to attribute the release to someone or to a Group, first and foremost to prevent further events but of course also to allow prosecution. Therefore, all parts of the investigation including analysis of evidence have to be done in a way that holds up in a court of law. To date there are no overarching recommendations for the identification and investigation of suspicious biological events related to animal health. In order to address this gap, also in line with recommendations from the first OIE Global Conference on Biological Threat Reduction in 2015, the OIE decided to convene an *ad hoc* Group in relation to Specific Methodologies for Veterinary Services, pertaining to the Investigation of Suspicious Biological Events.

I. Terms of Reference

The *ad hoc* Group will be asked to:

1. Review existing guidance documents which pertain to this topic, among these are the OIE Glossary, the EU CBRNE Glossary, Appendices III, IV, V, IV, V, VII, IX, and A of the United Nations General's Mechanism for the Investigation of Alleged Use of Chemical or Biological Weapons, the World Health Organization's (WHO) Laboratory biosafety manual, WHO Guidance Document on Responsible Life Science Research for Global Health Security, the Laboratory Biorisk Management Standard of the European Commission for Standardization, the International Criminal Police Commission (INTERPOL) INTERPOL bioterrorism incident pre-planning & response guide, the Emergencies ToolKit published by Infection Prevention and Control Canada, the Criminal Investigation Handbook published by the Food and Drug Administration and the United States Department for Agriculture, the Joint Criminal and Epidemiological Investigations Handbook published by the US Federal Bureau of Investigation and the Centers for Disease Control and Prevention, as well as Chapters 1.1.1 to 1.1.7 of the *OIE Manual of Diagnostic Tests and Vaccines for Terrestrial Animals*.
2. To develop a holistic and comprehensive methodology for Veterinary Services for the identification and investigation of suspicious biological events affecting terrestrial animals, which may include:
 - a) Criteria for the identification of suspicious biological events that warrant further investigation.
 - b) Defining technical differences or additional skills and capabilities required for investigating outbreaks that are proven or suspected to be of non-natural origin, including but not limited to: strategic consideration of leadership in such an investigation, responsibilities and liabilities; interview and observational skills.

- c) Defining criteria to positively distinguish between naturally occurring, accidentally or intentionally caused outbreaks, including identifying potential limitations.
- d) To develop recommendations for adapted risk assessment in order to account for potentially enhanced properties of weaponized or otherwise altered biological agents that could entail increased harm.
- e) To identify further issues that require in-depth review and propose, to the DG, the composition and terms of reference for Groups of experts convened specifically to study such issues, and if necessary, to participate in the work of these Groups.

II. Ground Rules

- Open Source Material ONLY
 - Chatham House Rule applies: Participants are free to use the information received, but neither the identity nor the affiliation of the speaker(s), nor that of any other participant, may be revealed.
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Appendix II

**MEETING OF THE OIE AD HOC GROUP
ON BIOLOGICAL THREAT REDUCTION IN RELATION TO SPECIFIC METHODOLOGIES
FOR VETERINARY SERVICES, PERTAINING TO THE INVESTIGATION
OF SUSPICIOUS BIOLOGICAL EVENTS**

Paris, 28 – 30 November 2017

Agenda

1. Opening
2. Adoption of the agenda and Terms of Reference (ToR)
3. Discussion
 - 3.1. Comments to the Guidelines
 - 3.2. Review of the Guidelines
 - 3.3. Breakout Groups
 - 3.4. Applicability in low resource environments
 - 3.5. Training requirements
 - 3.6. Considerations on the OIE Global Conferences on Biological Threat Reduction
 - 3.7. Discussion with OIE management
 - 3.8. Review of the Guidelines
4. Further work programme items identified by the *ad hoc* Group
 - 4.1. For consideration by the OIE
 - 4.2. For consideration by OIE Member Countries
5. Adoption of the draft report

Appendix III

**MEETING OF THE OIE AD HOC GROUP
ON BIOLOGICAL THREAT REDUCTION IN RELATION TO SPECIFIC METHODOLOGIES
FOR VETERINARY SERVICES, PERTAINING TO THE INVESTIGATION
OF SUSPICIOUS BIOLOGICAL EVENTS**

Paris, 28- 30 November 2017

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REPORT OF THE MEETING OF THE OIE AD HOC GROUP ON ANTIMICROBIAL RESISTANCE
Paris, 22-24 January 2018

1. Opening

The OIE *ad hoc* Group on Antimicrobial Resistance (hereafter referred to as ‘the Group’) met from 22 to 24 January 2018 at the OIE Headquarters in Paris, France.

Dr Matthew Stone, Deputy Director General, thanked the participants for their continued support and indicated that there is much international activity ongoing on this topic. He commented on consumer demand for antibiotic free products and reaffirmed the OIE position that antimicrobials are essential tools for protecting and maintaining animal health when used responsibly and prudently. Dr Stone addressed the progress of the Second OIE Annual Report on Antimicrobial Agents Intended for Use in Animals, while also advising caution for the use of quantitative data presented in the report for development of indicator thresholds for antibiotic use. He stressed the continued progress of countries in development of their data collection.

Dr Stone discussed the ongoing coordination and work of the Tripartite, including work on the programme on global stewardship and surveillance. Later in February, the work program and future direction will be considered at the Tripartite Executive Meeting that will take place from 21 to 22 February 2018 at the OIE Headquarters. The 4th meeting of the Inter-Agency Coordination Group on Antimicrobial Resistance (AMR) was also hosted by OIE in October 2017. During this meeting, six subgroups were created, of which Subgroup five addresses global governance mechanisms. Following the World Health Organization’s recently published guidelines on use of medically important antimicrobials in food-producing animals, Dr Stone emphasised the role of the OIE in representing the critical perspective of animal health and welfare in this issue, and the importance of the planned update to the recommendations of the OIE List of Antimicrobial Agents of Veterinary Importance.

Dr Stone also addressed the significance of the Group’s finalisation of definitions and consolidation of country comments on relevant chapters of the *Code*, with the goal of endorsement at the upcoming General Assembly.

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

The adopted Agenda and List of Participants are presented in Appendices I and II of this report, respectively. The Group elected Dr Herbert Schneider as the chair, and Drs Chris Teale and Carolee Carson as rapporteurs.

3. Roundtable from the participants on any new issues of interest for the Group

Information was shared within the Group on antimicrobial use and antimicrobial resistance, including a summary from Dr Carson regarding a systematic review of ionophore use in animals.

4. Presentation of the second OIE Annual Report on Antimicrobial Agents Intended for Use in Animals: Better Understanding of the Global Situation

The Second OIE Annual Report, published at the end of December 2017, was presented to the Group. There were substantial improvements in the number of participating countries and the option of reporting between the two phases of the report. For example, the number of country responses to the request for data increased (130 to 146 respondents) and the number of countries reporting quantitative data increased (89 countries in the first year to 107 countries in the second year). If a country did not report quantitative data to the OIE, they were asked to provide a reason why they were unable to do so at this time. Most of these countries reported a lack of regulatory framework for veterinary antimicrobials.

The report newly included a quantitative analysis adjusted for animal biomass focusing on 2014. Bovines represented the majority of the animal biomass for the 60 countries reporting quantitative data. Currently, the OIE estimated that 47% of the animal biomass in the 4 OIE Regions was included in the data presented. There was substantial regional disparity between the biomass represented by the data with relatively high coverage in the Americas and Europe and only 6% coverage in the Asia and the Pacific region. The global indicator of antimicrobial quantities intended for use in animals was estimated to be between 98-134 mg antimicrobial/kg animal biomass, with the upper level adjusted for country estimates of data coverage. It was nevertheless recognised that data coverage estimates are made subjectively by each country.

The Group strongly supported the OIE efforts to support Member Countries and to strengthen awareness, by providing feedback and where requested, analysis of their own country's data.

5. Overview of the preliminary results of the third phase of the collection of data on antimicrobial agents intended for use in animals

The preliminary results of the third phase of data collection were presented. The current deadline for Member Countries to provide data to the OIE is January 31, 2018. Seventy-eight Member Countries have responded already. One non-OIE Member Country has also responded. Most countries that have responded have provided quantitative data.

Regarding legislation for growth promotion, countries may be reporting whether legislation/regulation of growth promoters exists at the time of data submission (i.e., in 2018), though this legislation/regulation may not have existed or been applicable for the year the data on antimicrobial agents was being requested for (i.e., 2015).

For the third phase of data reporting, the OIE compared preliminary results for antimicrobial growth promoters with respect to legislation vs. use. Some countries indicated they will create or modify their regulatory framework for growth promotion during 2018.

In terms of other preliminary findings, the data sources and animal species covered by the data are similar to previous years. The OIE and Group noted that the availability of more recent population data may have implications for the calculation of the biomass denominator for 2015.

The Group discussed the need to develop a plan for next steps for reporting of the third phase of data collection, which will be on the agenda of the next meeting of the Group when the data collection will be complete.

6. Review comments from the OIE Member Countries on the proposed updated version of the Chapter 6.7 on "Harmonisation of national antimicrobial resistance surveillance and monitoring programmes"

6.1. General comments

The Group noted that a wide range of comments were provided for Chapter 6.7. by Member Countries regarding the environment. The Group recognised that in addition to animals, food, and humans, the environment is also important for AMR surveillance and should be identified as such within Chapter 6.7. Thus, the Group harmonised language about the environment throughout Chapter 6.7, ensuring that the environment should be taken into consideration in accordance with national priorities.

Taking into account opposing comments by Member Countries about the environment, the Group noted that ‘environment’ in this Chapter could be related to animals’ immediate environments (e.g. pen floor) or wider environments (e.g. surface waters such as rivers and lagoons).

The Group noted several comments by Member Countries requesting different text additions stating that aspects of surveillance and monitoring of AMR should take into account national priorities, and one or more of: risk assessment, risk management, resources, new scientific knowledge and/or surveillance objectives. Suggestions for these text additions were primarily, though not solely, provided by Member Countries for aspects of the Chapter 6.7 related to animal feed and the environment. The Group was of the opinion that ‘national priorities’ is an overarching term which encompasses risk and available resources, and that national priorities should be based on science. Hence, the Group felt that ‘national priorities’ was sufficient to address the concepts raised. With that in mind, the Group proposed to add text about national priorities to a general overview statement in one area (see later in report) and only added it specifically to areas addressing feed and the environment.

6.2. Detailed comments:

- Regarding proposed changes to Article 6.7.3.1 (General Aspects)

The Group noted opposing comments on the initial sentence with respect to animal feed and the environment; with some Member Countries wanting a reduced priority for surveillance in these areas and other Member Countries wanting an increased priority. The Group was of the opinion not to change ‘should’ to ‘may’, as animal feed and the environment should be considered according to national priorities. The Group was of the opinion that this provided a good balance between opposing Member Country comments on the importance of animal feed and the environment.

One Member Country suggested adding text to indicate that surveillance would ‘provide data on potential public health exposure’; the Group did not agree to make this change because this concept is already covered in 6.7.2.

- Regarding proposed changes to Article 6.7.4

One Member Country suggested adding ‘representativeness/appropriateness of the sample (e.g. does caeca sample represent farm, consumer exposure, etc.)’ under *Sampling Strategies*. The Group agreed that text was needed to indicate that collected samples should meet the objectives of surveillance. As such, the Group proposed to modify Article 6.7.4, Sampling strategies under bullet a) to include that ‘the sample is representative of the population of interest and meets the objectives of surveillance.’

- Regarding proposed changes to Table 1

The Group took note of a Member Country proposal to add text to the first column as follows ‘expected prevalence of antimicrobial resistance’. The Group did not support this addition because the table was designed to provide sample size estimates for either antimicrobial resistance or for the prevalence of bacteria in the animal population. The Group also noted that this concept is already addressed in paragraph 2 of Article 6.7.4.2 (*Sample size*).

The Group agreed to include the lower expected prevalence levels in Table 1 as per Member Country comments. The Group agreed to update Table 1 (under the lead of Drs Chris Teale and Carolee Carson) for these lower expected prevalences, ensuring consistency with the rest of the table. This updated table would be shared electronically with the Group for consultation in the coming weeks.

- Article 6.7.4.3 Section a) *Food-producing animals*

The Group proposed to modify Article 6.7.4.3 Section *Food-producing animals* as per Member Country comments to add flexibility to the text with regarding the approach to guiding resource allocation. The new proposed text would be ‘Resource allocation should be guided by criteria such as production volume...’

- Article 6.7.4.3. Section b) Food

A Member Country provided comments regarding adding ‘taking a risk-based approach’ to considering food products for inclusion in surveillance. The Group noted that more information would become available through the Codex Task Force discussions about application of a ‘risk-based approach’ to AMR surveillance in the coming years. Hence, the Group suggested not to add the proposed text addition at this time. The Group proposed to not make the suggested deletion of ‘...produced locally or imported’ in this section, as no rationale was provided for this suggested deletion. The Group did not suggest adding ‘although the extent of this is still unknown’, at this stage, because this is a new comment on text already agreed upon during this round of Chapter revision; hence this was considered a new topic. This proposal was noted by the OIE Headquarters and will be kept on hold for future revisions of the Chapter.

- Article 6.7.4.4. Section c) Animal Feed

The Group acknowledged the comments provided by Member Countries about animal feed. The Group agreed with the Member Country comment with the inclusion of ‘national priorities’ for animal feed. The Group suggested to keep ‘should’ and not change it to ‘may’ because the decision will be based on national priorities. National priorities should inherently take into consideration available resources and species; hence ‘available resources’ and ‘species’ are not needed in the sentence.

The Group considered a Member Country comment to delete ‘and should be linked to pathogen surveillance programs’ and decided that the sentence should be changed to ‘and should be linked to a pathogen surveillance program if available’ to provide the flexibility for Member Countries to make this linkage should this pathogen surveillance program exist.

- Article 6.7.4.4 Section d) Environment (New)

The Group considered comments to add specific information regarding the inclusion of the environment under 6.7.4.4, as this addition provides consistency with the text in Article 6.7.3.1. The Group proposed additional modifications for consistency and clarity. The Group was of the opinion that by highlighting the need to take into account national priorities, the differing positions of Member Countries could all be accommodated. The proposed revised text is as follows:

‘Member Countries should consider including the environment (the animal-immediate-environment or the animal-wider-environment), in surveillance and monitoring programmes based on national priorities, as the environment of animals can be an important route for transfer or persistence of antimicrobial resistance’.

- Table 2

One Member Country suggested to add ‘prior to any antimicrobial intervention’ to the section on Table 2 addressing outputs from carcass sampling. The Group thought that this addition was too detailed, given the more general nature of the other examples in the Table. The Group did not agree with this text addition.

As the environment was added to Article 6.7.4.4, the Group agreed with the proposal of a Member Country for text additions of examples of sampling sources for the animal-immediate-environment to Table 2. This addition would become a new row at the bottom of Table 2, as follows:

Column 1 ‘various origins’, Column 2 ‘environment’, and Column 3 ‘occurrence of resistant bacteria originating from the animal-immediate-environment’.

- Article 6.7.5.1. Animal bacterial pathogens relevant to the countries priorities

One Member Country suggested softening the language in 6.7.5.1.c to use ‘may’ instead of ‘should’ and to add ‘one or more of the following criteria’. The Group proposed to keep ‘should’ and add ‘one or more’ to indicate the importance of surveillance of animal bacterial pathogens and at the same time including necessary flexibility for decision making, but still contributing to harmonization of the approach for selection of animal bacterial pathogens.

- Table 3

A Member Country suggested including zoonotic and commensal bacteria in Table 3. The Group decided not to include commensals and zoonotic bacteria, as the intent of this table was only to include examples of animal bacterial pathogens. The Group indicated that zoonotic and commensal bacteria are covered later in the Chapter (Articles 6.7.5.2 and 6.7.5.3).

- Article 6.7.5.2.a) Salmonella

Regarding zoonotic bacteria and *Salmonella*, the Group proposed changes and additional text, based on a Member Country comment, to allow flexibility for the design of the surveillance and monitoring program in accordance with national priorities. The proposal of the Member Country also included issues regarding the inclusion of animal feed. The Group suggested an amendment of the text accordingly and with consistency to previous amendments as follows:

‘*Salmonella* should be sampled from food-producing animals and animal-derived food products. For the purpose of consistency and harmonization, animal samples should preferably be taken at the slaughterhouse/abattoir from healthy animals. When resources are adequate and animal feed samples are considered a national priority, *Salmonella* from animal feed should be sampled.’

Another Member Country requested the addition of the environment to this section. As such and to ensure consistency with other amendments to the text, the Group proposes to add a statement about the environment as follows:

‘Surveillance and monitoring programmes may also include sampling of the environment at places where animals are kept or housed’.

The Group did not agree with the suggestion proposed by one Member Country to add that *Salmonella* isolates should be ‘phagetyped’. The Group’s proposal was in accordance with previous in-depth discussions about this method and the views received by other Member Countries.

- Article 6.7.5.2.b) Campylobacter

The Group considered one Member Country’s suggestion to alter the text about *Campylobacter* to add ‘based on national priorities and the surveillance system objectives’. The Group noted that the proposed addition could be made for each bacterial species listed in the Chapter. For simplicity, the Group agreed to make this addition at the beginning of Article 6.7.5 as follows:

‘The following categories of bacteria may be included in surveillance and monitoring programs as determined by national priorities’

- Article 6.7.5.3. Commensal bacteria

The Group accepted a Member Country’s suggestion for adding sampling of the environment under Commensal bacteria for consistency with earlier changes to the document. The new text is as follows ‘...may be sampled from animal feed, food-producing animals, their environment, and products of ...’

Regarding a Member Country’s suggestion to add ‘meat’ to the document with respect to where samples are collected for commensal *E. coli*, the Group noted that this was a proposal on text already agreed upon during this round of Chapter revision; hence this was considered a new topic. This proposal was noted by the OIE Headquarters and it was proposed to keep it on hold for future revisions of the Chapter.

- Article 6.7.7.

One Member Country proposed the following two deletions: ‘...not only qualitatively (susceptible or resistant), but also...’ and ‘or inhibition zone diameters’). The Group did not accept this suggestion for three reasons: not all surveillance systems can provide quantitative data at this point in time, not all audiences can correctly interpret quantitative data, and the quantitative data can be misinterpreted. Therefore the Group decided to keep the original text; maintaining the emphasis on both qualitative and quantitative data.

- Article 6.7.8.

One Member Country suggested adding clinical breakpoints in addition to microbiological breakpoints under bullet number 9. The Member Country also suggested deleting the last sentence in this paragraph.

The Group noted that there are not always clinical breakpoints available for all antimicrobial/bacterial species combinations and that clinical breakpoints might differ between countries. The Group noted that the microbiological breakpoints do not differ between the countries. Human AMR surveillance is based on the microbiological breakpoint and hence if a desire for the surveillance program is to compare with human AMR, then the microbiological breakpoint would be preferable. The Group agreed that both types of breakpoints can provide useful information.

As a result of this discussion, the Group agreed to maintain the original text and add the concept of clinical breakpoints as a new sentence to maintain the original intent of the paragraph, yet add the new information. The new sentence at the end was added as follows: ‘Clinical breakpoints (where available) should also be reported’. The group did not delete the last sentence of the paragraph because no rationale was provided by the Member Country for the deletion. The Group did not accept the change to ‘microbiological cut off’ because the standard terminology is “microbiological breakpoint” or “epidemiological cut-off value” based on EUCAST¹ and CLSI².

One Member Country suggested a modification on bullet number 10 which addresses collecting data at the individual isolate level and including data on uses of antimicrobials. The Member Country’s suggestion was to replace ‘along with’ with ‘may’. The Group agreed with this change to allow for greater flexibility in reporting, as not all countries will be able to collect data on antimicrobial use or management practices.

7. Review comments from the OIE Member Countries on the proposed updated version of the Chapter 6.8 on “Monitoring of the quantities and usage patterns of antimicrobial agents used in food-producing animals” (definitions)

7.1. Definitions

- Therapeutic Use

One Member Country suggested replacing ‘therapeutic’ with ‘infectious disease-related’ and ‘nontherapeutic’ with ‘not related to infectious diseases’. The Group discussed retaining the original language of ‘therapeutic use’ and ‘non-therapeutic use’ because this is the language used in the data capture template for the global database on antimicrobial agents intended for use in animals.

However, the Group did recall their previously agreed upon language in the Figure submitted in the last Group meeting report. In this Figure, there was reference to therapeutic being related to ‘disease’ vs. non-therapeutic being related to ‘production’. In addition, the Group highlighted that therapeutic use is under veterinary supervision. As a compromise between the proposal by the Member Country,

1 The European Committee on Antimicrobial Susceptibility Testing

2 The Clinical & Laboratory Standards Institute

the original text, and previous Group's comments, the Group proposed adding to the second paragraph of 6.8.1 the following '...type of use [therapeutic (to treat, control or prevent infection or disease) or nontherapeutic (production use including growth promotion)]'.

One Member Country suggested adding 'according to a country's resources and priorities' to the second paragraph about 'evaluating antimicrobial exposure in food-producing animals'. The Group noted that implementation of OIE standards is always in accordance with a country's resources and priorities and therefore, this text addition was not considered necessary.

One Member Country suggested harmonisation between the G7 CVO Forum definitions and the OIE definitions for treatment, control/metaphylaxis, preventive use/prophylaxis, and growth promotion. The Group noted that the G7 and the OIE processes are different and that the representation of the two groups is very different. As part of the review of the two sets of definitions, the Group recalled that at their previous meeting (and documented in the meeting report), that 'control' had the same meaning as 'metaphylaxis' and that 'preventive' had the same meaning as 'prophylaxis'. The Code Commission took note of the Group's meeting report and decided to adopt the most well understood terms of 'control' and 'preventive use' for inclusion in the Chapter. The Group also noted that in human medicine, 'metaphylaxis' is not well understood worldwide and hence 'metaphylaxis' is not the preferred word for the OIE. With all this in mind, the Group recommended keeping the OIE definitions.

- Control

One Member Country noted concern with the OIE definition of control; in which a herd has a mixture of sick and healthy animals in which there would be animals that need to be treated (sick) and those that need antimicrobials for control (healthy). This concept is different than applying antimicrobials to the entire group for control.

The Group recognized that the sick animals in the group could be classified as receiving treatment; however it is the treatment of a group of animals that contain healthy individuals that is the defining feature of control. An outbreak is dynamic and categorising healthy, infected, incubating and sick animals is difficult in field conditions. The Group recalled that the terms 'control' and 'metaphylaxis' were understood to have the same meaning and this was documented in the last meeting report. Therefore, the Group was of the opinion that the current OIE definition of control should not be changed.

- Prevention

One Member Country referred to the WHO guidelines, and wanted to have the phrase 'that have not yet been clinical diagnosed' added to the definition to guide interpretation of the WHO guidelines. The Group was of the opinion that this proposal was outside the Group's agenda for this meeting.

One Member Country provided a comment indicating that specific aspects of the definition for prevention ('using an appropriate dose and for a limited, defined duration') was not for the purpose of surveillance, but rather more appropriate for conditions of responsible and prudent use. They were of the opinion that this would be better placed in Chapter 6.9. The Group noted that indeed, this aspect of the definition (the principles) should be further discussed when Chapter 6.9 is under revision. However, the Group was of the opinion that the full definition also needed to be included in Chapter 6.8 to meet the intent of the Chapter.

One Member Country asked for a revision to the prevention definition to change the word 'developing' to 'acquiring'. The Group agreed to replace the word 'developing' with 'acquiring', as these animals are healthy and should not be developing an infection; hence the suggested revision is more correct than the original text.

One Member Country noted that 'prophylaxis' is a synonym for 'prevention'. The Group noted that in the last meeting report 'For the purpose of these definitions, prevention is understood to have the same meaning as prophylaxis and preventative use', and that 'prevention' was the preferred term. As such, the Group made no suggestions for text revisions based on this Member Country comment.

The Group considered a suggestion by a Member Country to delete ‘using an appropriate dose and for a limited, defined duration’. As per the response by the Group at the last meeting to a similar comment, this phrase needs to be retained to distinguish preventive use from growth promotion; hence the Group did not agree with the proposal to delete this phrase.

- Growth Promotion

The Group noted that in the instructions for the global database data collection template, the full Codex definition for growth promotion was referenced. The Group previously agreed with a Member Country’s proposal of adding ‘in feed or water’ and ‘efficiency of feed’ to the Codex definition. The Group discussed the need to have international harmonisation of definitions, and that in the future, Codex may take note of the OIE definition. The Group therefore proposed to use the Codex definition for the purposes of alignment between international organisations and the proposed definition would be:

‘Growth promotion means the use of antimicrobial agents to increase the rate of weight gain or the efficiency of feed utilisation in animals by other than purely nutritional means.’

The Group also suggested that the second sentence of the Codex definition needed to be added because there was an important concept regarding incidental growth that was missing. This sentence is as follows:

‘The term does not apply to the use of antimicrobials for the specific purpose of treating, controlling, or preventing infectious diseases, even when an incidental growth response may be obtained.’

One Member Country suggested to remove the words ‘in the feed or water’ from the OIE growth promotion definition. This comment was addressed by the proposal of the Group to adopt the Codex definition for growth promotion (in which this phrase is not included).

- Antibiotic vs. antimicrobial agent/antimicrobials

One Member Country suggested that the Group consider clarifying the definition of ‘antibiotic’ vs. ‘antimicrobial agents/antimicrobials’. The Group noted that ‘antimicrobial agents’ is a term harmonized with Codex and ‘antimicrobial agents’ is the term used in the OIE’s global database. The Group noted that the term ‘antibiotic’ is not used in OIE *Terrestrial Animal Health Code*; hence the Group did not make any further distinctions of these terms.

One Member Country provided comments about the definition of ‘antimicrobial agent’ and whether further exclusions should be provided in the definition regarding chlorine and organic acids. The Group took note that the current definition of antimicrobial agent in the OIE glossary excludes disinfectants and antiseptics. The Group requests clarity around this proposal from the Member Country and additionally requested a proposal for amendments to the text if needed. The definition of ‘antimicrobial agent’ was currently outside the scope of current discussions and further refinements of this definition could happen in future discussions when appropriate.

8. Revision of the OIE List of antimicrobial agents of veterinary importance in animals

The Group noted that an in depth review of the published literature on ionophores was being conducted in Canada and the USA; this was expected to provide further useful information and the Group would await the outcome. Accordingly, the Group also considered that the categorisation of ionophores in the OIE List of antimicrobial agents of veterinary importance should remain unchanged.

The Group agreed that there was a clear rationale for focusing on colistin taking account of the Global Action Plan (which refers to phasing out of use of antibiotics for animal growth promotion in the absence of risk analysis), Resolution N° 38 adopted by the OIE World Assembly of Delegates in May 2013 and the WHO list of Critically Important Antimicrobials for Human Medicine (5th Revision, updated in 2016) and in particular the change of category of polymyxins (including colistin) to the highest priority critically important antimicrobials. The Group also noted the latest responses received from OIE Member Countries when compiling the OIE Annual report on antimicrobial agents intended for use in animals (2nd Report, Figure 5, page 30), where some OIE Member Countries reported use of colistin for growth promotion purposes while no OIE Member Countries reported used of polymyxin B for growth promotion. The Group added

recommendations to the OIE List of antimicrobials of veterinary importance extending the recommendations for fluoroquinolones and third and fourth generation cephalosporins to colistin. The Group addressed the use of highest priority critically important antimicrobials in human medicine for growth promotion in animals, and added a specific comment that any use of cephalosporins, fluoroquinolones or colistin for growth promotion purposes should be urgently ceased.

The Group took note of the WHO List and noted the categorisation of highest priority antimicrobials in particular the classification of macrolides in this category. The class has numerous indications in veterinary medicine and is classified in the OIE List as veterinary critically important antimicrobials. The Group further noted that the macrolides are sub-categorised in the OIE List according to their chemical structure but are currently not sub-categorised in the WHO List. The Group proposed that the sub-categories of macrolides be reviewed in the OIE List at its next meeting.

In addition to the macrolides, the Group took note of the other classes of antimicrobial agents in the WHO category of Highest Priority Critically Important Antimicrobials. The Group recommended that all these classes should be the highest priorities for countries in phasing out use of antimicrobials as growth promoters and added this recommendation to the OIE List.

The Group proposed that a small review team, with members selected from the Group and including WHO and FAO experts, will review the OIE List within a short time-frame, and prepare feedback on their findings for consideration by the full Group. Review of the List will take account of recent developments, including those relating to macrolides and colistin mentioned above, as well as comments which may be received from the upcoming OIE General Session.

The updated OIE List is in [Appendix III](#).

9. Second OIE Global Conference on Antimicrobial Resistance and Prudent Use of Antimicrobial Agents in Animals

The 2nd OIE Global Conference on Antimicrobial Resistance and Prudent Use of Antimicrobial Agents in Animals will be held in Marrakech, Morocco from 29 to 31 October 2018. The conference programme will focus on issues relevant to OIE Delegates and OIE National Focal Points for Veterinary Products and will be developed to ensure continuity with OIE initiatives on antimicrobial resistance. The Group agreed to provide support to the conference by acting as the scientific committee. Posters will be invited from OIE Member Countries on national developments and the Group will act as the scientific scrutineers for posters and abstracts.

The Group discussed a broad range of relevant topics for inclusion in the meeting which will be considered by the OIE.

10. Any other business

The Group proposed the following dates for the next meeting: from 3 to 5 July 2018, back to back with a meeting of the small team reviewing the OIE List.

11. Adoption of report

The Group adopted the report.

.../Appendices

MEETING OF THE OIE AD HOC GROUP ON ANTIMICROBIAL RESISTANCE
Paris, 22 – 24 January 2018

Agenda

1. Opening
2. Adoption of agenda and appointment of chairperson and rapporteur
3. Roundtable from the participants on new issues of interest for the Group
4. Presentation of the second OIE Annual Report on Antimicrobial Agents Intended for Use in Animals: Better Understanding of the Global Situation
5. Overview of the preliminary results of the third phase of the collection of data on antimicrobial agents intended for use animals
6. Review comments from the OIE Member Countries on the proposed updated version of the Chapter 6.7. on “Harmonisation of national antimicrobial resistance surveillance and monitoring programmes”
7. Review comments from the OIE Member Countries on the proposed updated version of the Chapter 6.8. on “Monitoring of the quantities and usage patterns of antimicrobial agents used in food-producing animals” (definitions)
8. Revision of the OIE List of antimicrobial agents of veterinary importance in animals
9. Second OIE Global Conference on Antimicrobial Resistance and Prudent Use of Antimicrobial Agents in Animals
10. Any other business
11. Adoption of report

Appendix II

MEETING OF THE OIE AD HOC GROUP ON ANTIMICROBIAL RESISTANCE

Paris, 22-24 January 2018

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OIE LIST OF ANTIMICROBIAL AGENTS OF VETERINARY IMPORTANCE

The OIE³ International Committee unanimously adopted the List of Antimicrobial Agents of Veterinary Importance at its 75th General Session in May 2007 ([Resolution No. XXVIII](#)).

Background

Antimicrobial agents are essential drugs for human and animal health and welfare. Antimicrobial resistance is a global public and animal health concern that is influenced by both human and non-human antimicrobial usage. The human, animal and plant sectors have a shared responsibility to prevent or minimise antimicrobial resistance selection pressures on both human and non-human pathogens.

The FAO⁴/OIE/WHO⁵ Expert Workshop on Non-Human Antimicrobial Usage and Antimicrobial Resistance held in Geneva, Switzerland, in December 2003 (Scientific Assessment) and in Oslo, Norway, in March 2004 (Management Options) recommended that the OIE should develop a list of critically important antimicrobial agents in veterinary medicine and that WHO should also develop such a list of critically important antimicrobial agents in human medicine.

Conclusion No. 5 of the Oslo Workshop is as follows:

5. The concept of “critically important” classes of antimicrobials for humans should be pursued by WHO. The Workshop concluded that antimicrobials that are critically important in veterinary medicine should be identified, to complement the identification of such antimicrobials used in human medicine. Criteria for identification of these antimicrobials of critical importance in animals should be established and listed by OIE. The overlap of critical lists for human and veterinary medicine can provide further information, allowing an appropriate balance to be struck between animal health needs and public health considerations.

Responding to this recommendation, the OIE decided to address this task through its existing *ad hoc* Group on antimicrobial resistance. The terms of reference, aim of the list and methodology were discussed by the *ad hoc* Group since November 2004 and were subsequently endorsed by the Biological Standards Commission in its January 2005 meeting and adopted by the International Committee in May 2005. Thus, the work was officially undertaken by the OIE.

Preparation of the draft list

The Director General of the OIE sent a questionnaire prepared by the *ad hoc* Group accompanied by a letter explaining the importance of the task to OIE Delegates of all Member Countries and international organisations having signed a Co-operation Agreement with the OIE in August 2005.

Sixty-six replies were received. This response rate highlights the importance given by OIE Member Countries from all regions to this issue. These replies were analysed first by the OIE Collaborating Centre for Veterinary Drugs, then discussed by the *ad hoc* Group at its meeting in February 2006. A list of proposed antimicrobial agents of veterinary importance was compiled together with an executive summary. This list was endorsed by the Biological Standards Commission and circulated among Member Countries aiming for adoption by the OIE International Committee during the General Session in May 2006.

³ OIE: World Organisation for Animal Health

⁴ FAO: Food and Agriculture Organization of the United Nations

⁵ WHO: World Health Organization

Discussion at the 74th International Committee in May 2006

The list was submitted to the 74th International Committee where active discussion was made among Member Countries. Concerns raised by Member Countries include: 1) the list includes substances that are banned in some countries; 2) some of the substances on the list are not considered “critical”; 3) nature of the list – is this mandatory for Member Countries?; and 4) the use of antimicrobial agents as growth promotor is included. While many Member Countries appreciated the work, it was considered appropriate to continue refinement of the list. The list was adopted as a preliminary list by [Resolution No. XXXIII](#).

Refinement of the list

The *ad hoc* Group was convened in September 2006 to review the comments made at the 74th General Session of the OIE International Committee, and Resolution No. XXXIII adopted at the 74th General Session. Based on the further analysis provided by the OIE Collaborating Centre for Veterinary Medicinal Products, the *ad hoc* Group prepared its final recommendations of the list of antimicrobial agents of veterinary importance together with an executive summary. Once again, this was examined and endorsed by the Biological Standards Commission in its January 2007 meeting and circulated among Member Countries.

Adoption of List of antimicrobial agents of Veterinary Importance

The refined list was submitted to the 75th International Committee during the General Session in May 2007 and adopted unanimously by Resolution No. XXVIII.

This list was further updated and adopted in May 2013, ~~and~~ May 2015 ~~and~~ [May 2018](#) by the World Assembly of OIE Delegates.

CRITERIA USED FOR CATEGORISATION OF VETERINARY IMPORTANT ANTIMICROBIAL AGENTS

In developing the list, the *ad hoc* Group agreed that any antimicrobial agent authorised for use in veterinary medicine according to the criteria of quality, safety and efficacy as defined in the *Terrestrial Animal Health Code* (Chapter 6.9. Responsible and prudent use of antimicrobial agents in veterinary medicine) is important. Therefore, based on OIE Member Country contributions, the Group decided to address all antimicrobial agents used in food-producing animals to provide a comprehensive list, divided into critically important, highly important and important antimicrobial agents.

In selecting the criteria to define veterinary important antimicrobial agents, one significant difference between the use of antimicrobial agents in humans and animals has to be accounted for: the many different species that have to be treated in veterinary medicine.

The following criteria were selected to determine the degree of importance for classes of veterinary antimicrobial agents.

Criterion 1. Response rate to the questionnaire regarding Veterinary Important Antimicrobial Agents

This criterion was met when a majority of the respondents (more than 50%) identified the importance of the antimicrobial class in their response to the questionnaire.

Criterion 2. Treatment of serious animal disease and availability of alternative antimicrobial agents

This criterion was met when compounds within the class were identified as essential against specific infections and there was a lack of sufficient therapeutic alternatives.

On the basis of these criteria, the following categories were established:

- Veterinary **Critically Important Antimicrobial Agents (VCIA)**: are those that meet **BOTH** criteria 1 **AND** 2
- Veterinary **Highly Important Antimicrobial Agents (VHIA)**: are those that meet criteria 1 **OR** 2
- Veterinary **Important Antimicrobial Agents (VIA)**: are those that meet **NEITHER** criteria 1 **OR** 2

Revision of the list of antimicrobial agents of Veterinary Importance (July 2012)

The Joint FAO/WHO/OIE Expert Meeting on Critically Important Antimicrobials held in Rome, Italy, in November 2007, recommended that the list of antimicrobial agents of Veterinary Importance should be revised on a regular basis and that the OIE further refine the categorisation of antimicrobial agents with respect to their importance in the treatment of specific animal diseases.

The OIE *ad hoc* Group on Antimicrobial Resistance met in July 2012 to review and update the OIE List of antimicrobial agents of veterinary importance (OIE List) taking into account the top three critically important antimicrobial agents of the WHO list of Critically Important Antimicrobials for Human Medicine.

The OIE *ad hoc* Group on Antimicrobial Resistance met in January 2018 to review and update the OIE List taking into account:

- the Global Action Plan on Antimicrobial Resistance supporting the phasing out of use of antibiotics for animal growth promotion in the absence of risk analysis;
- the Resolution N°38 adopted by the OIE World Assembly of Delegates in May 2017;
- the fifth revision of the WHO list of Critically Important Antimicrobials for Human Medicine (2016) moving Colistin among the Highest Priority Critically Important Antimicrobials; and
- the OIE report on antimicrobial agents intended for use in animals (Second Report), in particular the antimicrobial agents used as growth promotors (english version, page 30, figure 5)

The Group made recommendations for the use of the updated OIE List.

Recommendations

Any use of antimicrobial agents in animals should be in accordance with the OIE Standards on the responsible and prudent use laid down in the Chapter 6.9. of the *Terrestrial Animal Health Code* and in the Chapter 6.3. of the *Aquatic Animal Health Code*.

The responsible and prudent use of antimicrobial agents does not include the use of antimicrobial agents for growth promotion in the absence of risk analysis.

According to the criteria detailed above, antimicrobial agents in the OIE List are classified according to three categories, Veterinary Critically Important Antimicrobial Agents (VCIA), Veterinary Highly Important Antimicrobial Agents (VHIA) and Veterinary Important Antimicrobial Agents (VIA).

However, a specific antimicrobial/class or subclass may be considered as critically important for the treatment of a specific disease in a specific species (See specific comments in the following table of categorisation of veterinary important antimicrobial agents for food-producing animals).

For a number of antimicrobial agents, there are no or few alternatives for the treatment of some specified disease in identified target species as it is indicated in the specific comments in the OIE List. In this context, particular attention should be paid to the use of VCIA and of specific VHIA.

Among the VCIA in the OIE List, some are considered to be critically important both for human and animal health; this is currently the case for Fluoroquinolones and for the third and fourth generation of Cephalosporins. Colistin has been moved in 2016 to the WHO category of Highest Priority Critically Important Antimicrobials. Therefore these two classes and Colistin should be used according to the following recommendations:

- Not to be used as preventive treatment applied by feed or water in the absence of clinical signs in the animal(s) to be treated;
- Not to be used as a first line treatment unless justified, when used as a second line treatment, it should ideally be based on the results of bacteriological tests; and

- Extra-label/off label use should be limited and reserved for instances where no alternatives are available. Such use should be in agreement with the national legislation in force; and
- Urgently prohibit their use as growth promoters.

The classes in the WHO category of Highest Priority Critically Important Antimicrobials should be the highest priorities for countries in phasing out use of antimicrobial agents as growth promoters.

The OIE List of antimicrobial agents of veterinary importance is based on expert scientific opinion and will be regularly updated when new information becomes available.

Antimicrobial classes / sub classes used only in human medicine are not included in this OIE List. Recognising the need to preserve the effectiveness of the antimicrobial agents in human medicine, careful consideration should be given regarding their potential use (including extra-label/off-label use) / authorisation in animals.

Abbreviations:

Animal species in which these antimicrobial agents are used are abbreviated as follows:

AVI: avian	EQU: Equine	VCIA: Veterinary Critically Important Antimicrobial Agents
API: bee	LEP: Rabbit	VHIA: Veterinary Highly Important Antimicrobial Agents
BOV: bovine	OVI: Ovine	VIA: Veterinary Important Antimicrobial Agents
CAP: caprine	PIS: Fish	
CAM: camel	SUI: Swine	

**CATEGORISATION OF VETERINARY IMPORTANT ANTIMICROBIAL AGENTS
FOR FOOD-PRODUCING ANIMALS**

ANTIMICROBIAL AGENTS (CLASS, SUB-CLASS, SUBSTANCE)	SPECIES	Specific comments	VCIA	VHIA	VIA
AMINOCOUMARIN Novobiocin	BOV, CAP, OVI, PIS	Novobiocin is used in the local treatment of mastitis and in septicaemias in fish			X
AMINOGLYCOSIDES					
AMINOCYCLITOL Spectinomycin Streptomycin Dihydrostreptomycin	AVI, BOV, CAP, EQU, LEP, OVI, PIS, SUI API, AVI, BOV, CAP, EQU, LEP, OVI, PIS, SUI AVI, BOV, CAP, EQU, LEP, OVI, SUI	The wide range of applications and the nature of the diseases treated make aminoglycosides extremely important for veterinary medicine.			
AMINOGLYCOSIDES + 2 DEOXYSTREPTAMINE Kanamycin Neomycin Framycetin Paromomycin Apramycin Fortimycin Gentamicin Tobramycin Amikacin	AVI, BOV, EQU, PIS, SUI API, AVI, BOV, CAP, EQU, LEP, OVI, SUI BOV, CAP, OVI AVI, BOV, CAP, OVI, LEP, SUI AVI, BOV, LEP, OVI, SUI AVI, BOV, LEP, OVI, SUI AVI, BOV, CAM, CAP, EQU, LEP, OVI, SUI EQU EQU	Aminoglycosides are of importance in septicaemias; digestive, respiratory and urinary diseases. Gentamicin is indicated for <i>Pseudomonas aeruginosa</i> infections with few alternatives. <u>Apramycin and Fortimycin are currently only used in animals.</u> Few economic alternatives are available.	X		
AMPHENICOLS Florphenicol Thiamphenicol	AVI, BOV, CAP, EQU, LEP, OVI, PIS, SUI AVI, BOV, CAP, OVI, PIS, SUI	The wide range of applications and the nature of the diseases treated make phenicols extremely important for veterinary medicine. This class is of particular importance in treating some fish diseases, in which there are currently no or very few treatment alternatives. This class also represents a useful alternative in respiratory infections of cattle, swine and poultry. This class, in particular florfenicol, is used to treat pasteurellosis in cattle and pigs.	X		
ANSAMYCIN – RIFAMYCINS Rifampicin Rifaximin	EQU BOV, CAP, EQU, LEP, OVI, SUI	This antimicrobial class is authorised only in a few countries and with a very limited number of indications (mastitis) and few alternatives. Rifampicin is essential in the treatment of <i>Rhodococcus equi</i> infections in foals. However it is only available in a few countries, resulting in an overall classification of VHIA.		X	
ARSENICAL Roxarsone Nitarosone	AVI, SUI AVI, SUI	Arsenicals are used to control intestinal parasitic coccidiosis. (<i>Eimeria</i> spp.).			X
BICYCLOMYCIN Bicozamycin	AVI, BOV, PIS, SUI	Bicyclomycin is listed for digestive and respiratory diseases in cattle and septicaemias in fish.			X

ANTIMICROBIAL AGENTS (CLASS, SUB-CLASS, SUBSTANCE)	SPECIES	Specific comments	VCIA	VHIA	VIA
CEPHALOSPORINS					
CEPHALOSPORINS FIRST GENERATION					
Cefacetile	BOV	Cephalosporins are used in the treatment of septicemias, respiratory infections, and mastitis.		X	
Cefalexin	BOV, CAP, EQU, OVI, SUI				
Cefalotin	EQU				
Cefapyrin	BOV				
Cefazolin	BOV, CAP, OVI				
Cefalonium	BOV, CAP, OVI				
CEPHALOSPORINS SECOND GENERATION					
Cefuroxime	BOV				
CEPHALOSPORINS THIRD GENERATION					
Cefoperazone	BOV, CAP, OVI	The wide range of applications and the nature of the diseases treated make cephalosporin third and fourth generation extremely important for veterinary medicine.	X		
Ceftiofur	AVI, BOV, CAP, EQU, LEP, OVI, SUI				
Ceftriaxone	AVI, BOV, OVI, SUI				
CEPHALOSPORINS FOURTH GENERATION					
Cefquinome	BOV, CAP, EQU, LEP, OVI, SUI	Cephalosporins are used in the treatment of septicemias, respiratory infections, and mastitis. Alternatives are limited in efficacy through either inadequate spectrum or presence of antimicrobial resistance.			
FUSIDIC ACID					
Fusidic acid	BOV, EQU	Fusidic acid is used in the treatment of ophthalmic diseases in cattle and horses.			X
IONOPHORES					
Lasalocid	AVI, BOV, LEP, OVI	Ionophores are essential for animal health because they are used to control intestinal parasitic coccidiosis (<i>Eimeria</i> spp.) where there are few or no alternatives available. Ionophores are critically important in poultry. <u>This class is currently only used in animals.</u>		X	
Maduramycin	AVI				
Monensin	API, AVI, BOV, CAP				
Narasin	AVI, BOV				
Salinomycin	AVI, LEP, BOV, SUI				
Semduramicin	AVI				
LINCOSAMIDES					
Pirlimycin	BOV, SUI, AVI	Lincosamides are essential in the treatment of Mycoplasmal pneumonia, infectious arthritis and hemorrhagic enteritis of pigs.		X	
Lincomycin	API, AVI, BOV, CAP, OVI, PIS, SUI				
MACROLIDES (C refers to the chemical structure)					
MACROLIDES C14					
Erythromycin	API, AVI, BOV, CAP, EQU, LEP, OVI, PIS, SUI	The wide range of applications and the nature of the diseases treated make macrolides extremely important for veterinary medicine.			
Oleandomycin	BOV				
MACROLIDES C15					
Gamithromycin	BOV	Macrolides are used to treat Mycoplasma infections in pigs and poultry, haemorrhagic digestive disease in pigs (<i>Lawsonia intracellularis</i>) and liver abscesses (<i>Fusobacterium necrophorum</i>) in cattle, where they have very few alternatives.	X		
Tulathromycin	BOV, SUI				
MACROLIDES C16					
Carbomycin	AVI				
Josamycin	AVI, PIS, SUI	This class is also used for respiratory infections in cattle			
Kitasamycin	AVI, SUI, PIS				
Spiramycin	AVI, BOV, CAP, EQU, LEP, OVI, PIS, SUI				
Tilmicosin	AVI, BOV, CAP, LEP, OVI, SUI				
Tylosin	API, AVI, BOV, CAP, LEP, OVI, SUI				
Mirosamycin	API, AVI, SUI, PIS				

ANTIMICROBIAL AGENTS (CLASS, SUB-CLASS, SUBSTANCE)	SPECIES	Specific comments	VCIA	VHIA	VIA
Terdecamycin Tildipirosin Tylvalosin	AVI, SUI BOV, SUI AVI, SUI				
MACROLIDES C17 Sedecamycin	SUI				
ORTHOSOMYCINS Avilamycin	AVI, LEP	Avilamycin is used for enteric diseases of poultry and rabbit. <u>This class is currently only used in animals.</u>			X
PENICILLINS					
NATURAL PENICILLINS (including esters and salts) Benethamine penicillin Benzylpenicillin Penethamate (hydroiodide) Benzylpenicillin procaine / Benzathine penicillin	BOV AVI, BOV, CAM, CAP, EQU, LEP, OVI, SUI BOV BOV, CAM, CAP, EQU, OVI, SUI	<u>Penethamate (hydroiodide) is currently only used in animals</u>			
AMINOPENICILLINS Mecillinam	BOV, SUI				
AMINOPENICILLINS Amoxicillin Ampicillin Hetacillin	AVI, BOV, CAP, EQU, OVI, PIS, SUI AVI, BOV, CAP, EQU, OVI, PIS, SUI BOV				
AMINOPENICILLIN + BETALACTAMASE INHIBITOR Amoxicillin + Clavulanic Acid Ampicillin + Sulbactam	AVI, BOV, CAP, EQU, OVI, SUI AVI, BOV, SUI	The wide range of applications and the nature of the diseases treated make penicillins extremely important for veterinary medicine. This class is used in the treatment of septicaemias, respiratory and urinary tract infections.	X		
CARBOXPENICILLINS Ticarcillin Tobicillin	EQU PIS	This class is very important in the treatment of many diseases in a broad range of animal species.			
UREIDOPENICILLIN Aspoxicillin	BOV, SUI				
PHENOXPENICILLINS Phenoxymethylpenicillin Phenethicillin	AVI, SUI EQU	Few economical alternatives are available.			
ANTISTAPHYLOCOCCAL PENICILLINS Cloxacillin Dicloxacillin Nafcillin Oxacillin	BOV, CAP, EQU, OVI, SUI BOV, CAP, OVI, AVI, SUI BOV, CAP, OVI BOV, CAP, EQU, OVI, AVI, SUI				
PHOSPHONIC ACID Fosfomycin	AVI, BOV, PIS, SUI	Fosfomycin is essential for the treatment of some fish infections with few alternatives however it is only available in a few countries, resulting in an overall classification of VHIA.		X	

ANTIMICROBIAL AGENTS (CLASS, SUB-CLASS, SUBSTANCE)	SPECIES	Specific comments	VCIA	VHIA	VIA
PLEUROMUTILINS Tiamulin Valnemulin	AVI, CAP, LEP, OVI, SUI AVI, SUI	The class of pleuromutilins is essential against respiratory infections in pigs and poultry. This class is also essential against swine dysentery (<i>Brachyspira hyodysenteriae</i>) however it is only available in a few countries, resulting in an overall classification of VHIA.		X	
POLYPEPTIDES					
Enramycin Gramicidin Bacitracin	AVI, SUI EQU AVI, BOV, LEP, SUI, OVI	Bacitracin is used in the treatment of necrotic enteritis in poultry. This class is used in the treatment of septicaemias, colibacillosis, salmonellosis, and urinary infections.		X	
POLYPEPTIDES CYCLIC Colistin Polymixin	AVI, BOV, CAP, EQU, LEP, OVI, SUI BOV, CAP, EQU, LEP, OVI, AVI	Cyclic polypeptides are widely used against Gram negative enteric infections.			
QUINOLONES					
QUINOLONES FIRST GENERATION Flumequin Miloxacin Nalidixic acid Oxolinic acid	AVI, BOV, CAP, EQU, LEP, OVI, PIS, SUI PIS BOV AVI, BOV, LEP, PIS, SUI, OVI	Quinolones of the 1st generations are used in the treatment of septicaemias and infections such as colibacillosis.		X	
QUINOLONES SECOND GENERATION (FLUOROQUINOLONES) Ciprofloxacin Danofloxacin Difloxacin Enrofloxacin Marbofloxacin Norfloxacin Ofloxacin Orbifloxacin Sarafloxacin	AVI, BOV, SUI AVI, BOV, CAP, LEP, OVI, SUI AVI, BOV, LEP, SUI AVI, BOV, CAP, EQU, LEP, OVI, PIS, SUI AVI, BOV, EQU, LEP, SUI AVI, BOV, CAP, LEP, OVI, SUI AVI, SUI BOV, SUI PIS	The wide range of applications and the nature of the diseases treated make fluoroquinolones extremely important for veterinary medicine. Fluoroquinolones are critically important in the treatment of septicaemias, respiratory and enteric diseases.	X		
QUINOXALINES Carbadox Olaquinox	SUI SUI	Quinoxalines (carbadox) is used for digestive disease of pigs (e.g. swine dysentery). <u>This class is currently only used in animals.</u>			X
SULFONAMIDES Sulfachlorpyridazine Sulfadiazine Sulfadimethoxine Sulfadimidine (Sulfamethazine, Sulfadimerazin) Sulfadoxine Sulfafurazole Sulfaguandine Sulfamerazine Sulfadimethoxazole Sulfamethoxine Sulfamonomethoxine Sulfanilamide	AVI, BOV, SUI AVI, BOV, CAP, OVI, SUI AVI, BOV, CAP, EQU, LEP, OVI, PIS, SUI AVI, BOV, CAP, EQU, LEP, OVI, SUI BOV, EQU, OVI, SUI BOV, PIS AVI, CAP, OVI AVI, BOV, CAP, EQU, LEP, OVI, PIS, SUI AVI, BOV, SUI AVI, PIS, SUI AVI, PIS, SUI AVI, BOV, CAP, OVI	The wide range of applications and the nature of the diseases treated make sulfonamides extremely important for veterinary medicine. These classes alone or in combination are critically important in the treatment of a wide range of diseases (bacterial, coccidial and protozoal infections) in a wide range of animal species.	X		

ANTIMICROBIAL AGENTS (CLASS, SUB-CLASS, SUBSTANCE)	SPECIES	Specific comments	VCIA	VHIA	VIA
Sulfapyridine Phthalylsulfathiazole Sulfaquinoxaline	BOV, SUI SUI AVI, BOV, CAP, LEP, OVI				
SULFONAMIDES+ DIAMINOPYRIMIDINES					
Sulfamethoxyypyridazine Ormetoprim+ Sulfadimethoxine Trimethoprim+ Sulfonamide	AVI, BOV, EQU, SUI PIS AVI, BOV, CAP, EQU, LEP, OVI, PIS, SUI				
DIAMINOPYRIMIDINES					
Baquiloprim Trimethoprim Ormetoprim	BOV, SUI AVI, BOV, CAP, EQU, LEP, OVI, SUI AVI				
STREPTOGRAMINS					
Virginiamycin	AVI, BOV, OVI, SUI	Virginiamycin is an important antimicrobial in the prevention of necrotic enteritis (<i>Clostridium perfringens</i>)			X
TETRACYCLINES					
Chlortetracycline Doxycycline Oxytetracycline Tetracycline	AVI, BOV, CAP, EQU, LEP, OVI, SUI AVI, BOV, CAM, CAP, EQU, LEP, OVI, PIS, SUI API, AVI, BOV, CAM, CAP, EQU, LEP, OVI, PIS, SUI API, AVI, BOV, CAM, CAP, EQU, LEP, OVI, PIS, SUI	The wide range of applications and the nature of the diseases treated make tetracyclines extremely important for veterinary medicine This class is critically important in the treatment of many bacterial and chlamydial diseases in a wide range of animal species. This class is also critically important in the treatment of animals against heartwater (<i>Ehrlichia ruminantium</i>) and anaplasmosis (<i>Anaplasma marginale</i>) due to the lack of antimicrobial alternatives.	X		
THIOSTREPTON					
Nosiheptide	AVI, SUI	This class is currently used in the treatment of some dermatological conditions.			X

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

Paris, 8 – 10 November 2016

Bulgaria

In March 2016, Bulgaria submitted a dossier seeking for a CSF free country status. The dossier was submitted after the meeting of the Group as well as the meeting of the Scientific Commission. Bulgaria was therefore invited and accepted to submit an updated dossier for the Group's evaluation for the next cycle (for the meeting in November 2016).

In September 2016, Bulgaria submitted a dossier for official recognition of its CSF free status.

In accordance with the established procedures, the participating expert working for the European Commission expressed a possible conflict of interest and withdrew from all discussions of the Group on Bulgaria's dossier.

The Group requested additional information and received clarification from Bulgaria.

i. Animal disease reporting

The Group acknowledged that CSF was a notifiable disease in the country as per legislation. The Group also considered that Bulgaria had a record of regular and prompt animal disease reporting having regularly submitted the requested reports to the OIE.

ii. Veterinary Services

Bulgaria described the five types of domestic pig holdings in the country including: industrial, Types A (smaller farms with high biosecurity level) and B (smaller farms with a low biosecurity level) family farms, backyard farms and traditional outdoor holdings of East-Balkan pigs, and further to the Group's request, provided additional information about the number of public and private veterinarians in the country.

The Group was overall satisfied with the information on the veterinary system and the structure of the pig industry provided by Bulgaria.

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

Upon receipt of additional information from Bulgaria regarding the training and awareness programmes with particular emphasis on CSF in backyard and East-Balkan pig sectors, the Group noted that pig farmers were only advised during the inspections implemented by public and private veterinarians in terms of CSF surveillance or control programmes. The Group therefore recommended for Bulgaria to increase engagement with backyard farmers through periodic training and awareness programmes.

iii. Situation of CSF in the past 12 months

The Group noted that the last outbreak of CSF in domestic pigs was in 2008 and in 2009 in wild boar.

iv. Absence of vaccination in the past 12 months

The Group noted that CSF vaccination in domestic pigs was forbidden in Bulgaria since 2005 and that oral vaccination on the western border was ceased in 2015 in wild pigs.

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

For the period from 2015 to 2016, surveillance in backyard farms relied mainly on clinical surveillance, whereas in Type B family farms and East-Balkan pigs a high proportion of pigs were sampled for serology. Based on this information the Group acknowledged that satisfactory levels of surveillance were in place to demonstrate absence of CSFV infection, however the Group expressed concerns regarding biosecurity and management practises for prompt detection and control of spread of CSF particularly in the East-Balkan and backyard pig sectors (*cf.* section *vii.*).

Further to the Group's request, Bulgaria provided detailed information on the origin and reasons of CSF suspicions over the last two years and the follow-up actions to demonstrate the absence of CSF. The Group acknowledged the appropriate investigations on CSF suspicions but pointed out that this information should have been included in the original dossier.

The Group noted that East-Balkan pigs were subject to PCR tests for CSF with negative results during quarantine prior to movement to the two EU-approved slaughterhouses. From the additional information provided by Bulgaria about the virological tests performed on these pigs destined for slaughter, the Group noted that only a small proportion of East-Balkan pigs were slaughtered in one of these slaughterhouses and tested prior to movement. The Group expressed some concern with regard to the slaughter of the remaining of the East-Balkan pigs and with the impact this may have on surveillance.

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

Further to the Group's request, Bulgaria provided a summary table which linked the six CSF diagnostic tests carried out, to each in-country laboratory where they were being performed, also indicating their satisfactory quality accreditation status (ISO 17025) that are renewed annually. Bulgaria also confirmed its participation in the annual EU ring trials. The Group noted that live virus was handled in the National Reference Laboratory but no details of containment or biosecurity levels were provided.

The Group noted that Bulgaria had coordination activities for disease control in place with neighbouring countries, and further suggested to enhance coordination, particularly with neighbouring countries with undetermined CSF status and countries where presence of wild boars at borders were known to exist.

The Group acknowledged that swill feeding was prohibited under legislation.

Whilst the Group was surprised that no illegal imports were detected in the last twelve months, it was noted that provisions under legislation are in place for management of illegal imports.

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

The Group commended the extensive work carried out by Bulgaria in defining the distribution of the wild and feral pig population, eliminating CSF and monitoring of these populations for evidence of CSFV infection. The Group acknowledged the evidence provided by Bulgaria demonstrating current knowledge about the population, habitat and CSF status of wild and feral pigs in the country.

The Group was generally satisfied that a sufficient level of separation was in place to prevent domestic pigs from coming in contact with wild and feral pig populations. However, the free-roaming husbandry practise of East-Balkan pigs was considered a CSF risk. The Group considered that the measures presented in the dossier, such as pig guards and return to shelters at night, to prevent contact between wild pigs and East-Balkan pigs was not sufficient to mitigate the risk of direct or indirect contact between them.

The Group acknowledged that husbandry associated with East-Balkan pig production made it difficult to fully adhere to the requirements of Article 15.2.29. with respect to the separation of free ranging pigs from wild and feral pig population. The Group acknowledged the increased level of serological surveillance in East-Balkan pigs but still expressed some concerns about inspection and supervision at slaughter, management system in place and biosecurity (*cf.* section *v.*).

The Group was concerned about the risk presented by both the backyard farms and East-Balkan pigs for the possible prompt detection and control of spread of CSF.

viii. Compliance with the questionnaire in Article 1.6.10.

The Group considered the initial dossier submitted by Bulgaria, whilst compliant with the format of the questionnaire in Article 1.6.10., provided incomplete information. However, considering the additional responses provided by Bulgaria to the questions raised, the Group agreed that sufficient information was available to assess the application.

Conclusion

While the Group was confident that there had been no outbreak of CSF and no evidence of infection with CSFV in Bulgaria for at least the last twelve months and that effective contingency plans were in place in case of an outbreak, the majority of the Group was concerned about the risk presented by the backyard farms and East-Balkan pigs for the possible prompt detection and control of spread if CSF were to be introduced into these sectors of production. With specific reference to the latter two production sectors, there was insufficient evidence provided to assure the Group that an outbreak could be rapidly detected, traced and contained within a defined area. One of the participating experts of the Group felt that there were sufficient levels of surveillance in the backyard farms and East-Balkan pigs and did not fully agree with this point made by the majority of the Group.

From the information provided in the dossier and Bulgaria's answers to the questions raised, the Group felt that it was not in a position to make a final decision and therefore recommended that a mission be conducted, in order to assess and verify that sufficient measures were in place for biosecurity and management practises (including slaughtering) for prompt detection, containment and control of CSF spread with particular focus on the East-Balkan and backyard pig sectors. Furthermore, the Group also recommended increasing engagement of pig farmers by the implementation of CSF targeted awareness and training programmes.

**REPORT OF THE ANNUAL RECONFIRMATION ASSESSMENTS
FOR MAINTENANCE OF OFFICIAL DISEASE STATUS AND OF THE ENDORSEMENT
OF NATIONAL OFFICIAL CONTROL PROGRAMMES**

The Scientific Commission for Animal Diseases (the Commission) dedicated time during its February 2018 meeting to comprehensively review all annual reconfirmations provided by Members having an OIE endorsed national official control programme on the progress made, as well as a selection (approximately 10%) of the annual reconfirmations for officially recognised status of Members. The Commission pre-selected these annual reconfirmations at its September 2017 meeting based on the list of technical and administrative considerations according to the Standard Operating Procedures (SOP) on reconfirmations:

http://www.oie.int/fileadmin/Home/eng/Animal_Health_in_the_World/docs/pdf/SOP/EN_SOP_Reconfirmation.pdf.

A letter of reminder was sent in October 2017 by the OIE Director General to the Delegates of Members having at least one officially recognised disease status or an endorsed national official control programme. The pre-selected Members were also informed of their official status selected for a comprehensive review.

In accordance with the Standard Operating Procedures governing the official recognition of disease status, all annual reconfirmations were screened by the OIE Status Department, and when necessary, additional information was requested in accordance with the relevant provisions of the *Terrestrial Animal Health Code*. The annual reconfirmations that had not been selected for this comprehensive review by the Commission were further assessed by the OIE Status Department and a report was prepared and provided for the Commission's consideration and endorsement as presented below.

1. Maintenance of the AHS free status

1.1. Annual reconfirmations comprehensively reviewed by the Commission:

The annual reconfirmations for AHS free status of **Algeria, Azerbaijan, Kuwait, Kyrgyzstan, Morocco, Oman** and **Tunisia** were selected for comprehensive review by the Commission. Specific comments made by the Commission with regard to Members' AHS annual reconfirmations are as follows:

Algeria: The Commission noted with appreciation that awareness activities for AHS were conducted in 2017 and encouraged Algeria to continue these efforts to maintain awareness and encourage the notification of any clinical suspicions of AHS.

Azerbaijan: The Commission was informed of the delayed submission of Azerbaijan's AHS status reconfirmation. The Commission re-emphasised that lack of submission by the deadline could lead to the suspension of AHS free status.

Kuwait: The Commission noted with interest that awareness activities on AHS were planned in the near future and encouraged Kuwait to summarise these activities in the annual reconfirmation to be submitted in November 2018.

Kyrgyzstan: The Commission reviewed the information provided by Kyrgyzstan and pointed out the insufficient documentation of the regulatory measures for the early detection, prevention and control of infection with AHS virus. The Commission recommended a field mission to be conducted in Kyrgyzstan to assess compliance with the relevant requirements of Chapter 12.1. of the *Terrestrial Code* for the maintenance of an AHS free status.

Morocco: The Commission requested the results of a serological survey for AHS that were not available during the annual reconfirmation of 2016. The results of this survey were provided with Morocco's 2017 annual reconfirmation for AHS and Morocco also provided detailed supportive information documenting continuous surveillance and awareness for AHS.

Oman: The Commission noted that imported horses were tested for AHS by ELISA or Complementation Fixation Test. The Commission emphasised that AHS testing should be performed using a recommended method as defined in Chapter 2.5.1. of the *Terrestrial Manual*.

Tunisia: The Commission appreciated the detailed information provided by Tunisia in support of the reconfirmation of its AHS free status. The Commission noted with interest that AHS surveillance was being reinforced through the launch of a serological survey, risk-based sentinel surveillance as well as vector surveillance, and encouraged Tunisia to describe the outcomes of these activities in the annual reconfirmation to be submitted in November 2018.

Conclusion: The Commission concluded that the annual reconfirmations of the above-listed Members were compliant with the relevant requirements of Chapter 12.1. of the *Terrestrial Code* for the maintenance of the officially recognised AHS free status.

1.2. Annual reconfirmations screened by the OIE Status Department

The OIE Status Department reviewed the rest of the annual reconfirmations for AHS free status and reported the outcome of its analysis to the Commission as follows:

The annual reconfirmations for the following Members were reviewed:

Andorra	Czech Republic	Kazakhstan	Philippines
Argentina	Denmark	Korea (Rep. of)	Poland
Australia	Ecuador	Latvia	Portugal
Austria	Estonia	Liechtenstein	Qatar
Belgium	Finland	Lithuania	Romania
Bolivia	Former Yug. Rep. of	Luxembourg	Singapore
Bosnia and Herzegovina	Macedonia	Malaysia	Slovakia
Brazil	France	Malta	Slovenia
Bulgaria	Germany	Mexico	Spain
Canada	Greece	Myanmar*	Sweden
Chile	Hungary	Netherlands	Switzerland
China (People's Rep. of)	Iceland	New Caledonia	Thailand
Chinese Taipei	India	New Zealand	Turkey
Colombia	Ireland	Norway	United Arab Emirates
Croatia	Italy	Paraguay	United Kingdom
Cyprus	Japan	Peru	United States of America
			Uruguay

The OIE Status Department informed the Commission that the annual reconfirmations that were received and assessed were compliant with the relevant provisions of Chapter 12.1. of the *Terrestrial Code*. However, the OIE Status Department raised the attention of the Commission to the Member marked with an asterisk (*). Its annual reconfirmation was discussed during the Commission's meeting as follows:

Myanmar: The Commission reviewed the information provided by Myanmar and pointed out that compliance with the relevant requirements of Chapter 12.1. of the *Terrestrial Code* for maintenance of an officially recognised AHS free status was insufficiently documented. In addition, the Commission considered the findings of the OIE mission conducted in August 2017 related to the maintenance of Myanmar's officially free status for PPR which resulted in the suspension of this status. The Commission pointed out that some of the deficiencies identified by this mission may also impact Myanmar's capacities for maintaining its officially recognised AHS free status, particularly related to capacities for ensuring effective early warning. The Commission further noted that Myanmar applied for the official recognition of its AHS free status in 2014, based on a "fast-track" procedure which allowed for the official recognition of an AHS free status based on an official declaration confirming compliance with the provisions of Article 12.1.2. of the *Terrestrial Code*. The Commission therefore concluded that, to allow an informed decision on the maintenance of Myanmar's AHS free status, the Commission would

need a comprehensive dossier based on the AHS questionnaire (Article 1.6.8.) of the *Terrestrial Code*, documenting its compliance with all relevant requirements of the *Terrestrial Code* for the official recognition of an AHS free status. This dossier would be assessed by the OIE *ad hoc* Group on the evaluation of the AHS status of Members during its regular meeting in 2018, and should be provided by Myanmar at least two months before the date of the meeting of this *ad hoc* Group, in accordance with the SOP.

The Commission concluded that the annual reconfirmations of the above-listed Members were compliant with the relevant requirements of Chapter 12.1. of the *Terrestrial Code* for the maintenance of the officially recognised AHS free status.

2. Maintenance of BSE risk status

2.1. Maintenance of the controlled BSE risk status

2.1.1. Annual reconfirmation comprehensively reviewed by the Commission:

No annual reconfirmations for the maintenance of the officially recognised controlled BSE risk status were comprehensively reviewed by the Commission.

2.1.2. Annual reconfirmations screened by the OIE Status Department

The OIE Status Department reviewed all annual reconfirmations for controlled BSE risk status and reported the outcome of its analysis to the Commission as follows:

The annual reconfirmations for the following Members were reviewed:

Canada	Ireland
Chinese Taipei	Nicaragua
France	United Kingdom ¹
Greece*	

The OIE Status Department informed the Commission that the annual reconfirmations that were received and assessed were compliant with the relevant provisions of Chapter 11.4. of the *Terrestrial Code*. However, the OIE Status Department raised the attention of the Commission to the Member marked with an asterisk (*). Its annual reconfirmation was discussed during the Commission's meeting as follows:

Greece: The Commission noted the increased adult cattle population compared to 2016 reported by Greece without proportional increase in its BSE surveillance. As a consequence Greece did not reach anymore the BSE surveillance target points.

The Commission strongly encouraged that Greece increases its level of BSE surveillance and submit supportive evidence when reconfirming its status in November 2018. The Commission concluded that the BSE status of Greece could be maintained with close follow-up of its 2018 annual reconfirmation on the progress made.

The Commission concluded that the annual reconfirmations of the above-listed Members were compliant with the relevant requirements of Chapter 11.4. of the *Terrestrial Code* for the maintenance of the officially recognised controlled BSE risk status.

¹ United Kingdom: a zone consisting of England and Wales as designated by the Delegate of the United Kingdom in documents addressed to the Director General in September and October 2016

2.2. Maintenance of the negligible BSE risk status

2.2.1. Annual reconfirmations comprehensively reviewed by the Commission:

The annual reconfirmations of **Cyprus, New Zealand, Panama, Poland, Slovenia** and the **two zones of the United Kingdom** were comprehensively reviewed by the Commission. Specific comments made by the Commission with regard to Members' annual reconfirmations are as follows:

Cyprus: The Commission noted that in 2016 and 2017, Cyprus took samples from only one subpopulation (fallen stock) and that this was in accordance with the Decision 2013/76/EU. In 2014 and 2015, samples were also taken from routine slaughter, and in previous year, also from casualty slaughter.

New Zealand: In February 2017, the Commission requested that New Zealand submit additional information on the criteria for clinical surveillance stressing that sampling of BSE clinical suspects, when detected should not be stopped, even after the required minimal surveillance target points for are reached. New Zealand explained that clinical suspects were identified under an incentivised passive surveillance scheme and that this programme operates continuously and open-ended. It was also pointed out that there was evident seasonality in the clinical suspect sample submissions as a consequence of the seasonal production system (i.e. overlap with the clinical signs caused by metabolic diseases occurring in the postpartum period).

The Commission appreciated the explanations provided by New Zealand and also took note of certain points raised to be considered during the revision of Chapter 11.4. of the *Terrestrial Code*.

Panama: In February 2017, the Commission noted a significant increase in the adult cattle population compared to the previous year without proportional increase in its BSE surveillance. As a consequence Panama did not reach anymore the BSE surveillance target points. The Commission strongly encouraged that Panama increases its level of BSE surveillance and submit supportive evidence when reconfirming its status this year.

This year, the Commission noted a significant decrease in the adult cattle population which was explained by Panama as due to the improved bovine traceability system and more precise census. Whilst efforts to enhance the surveillance of BSE through strengthened awareness programmes, national rabies surveillance and other differential diagnoses (e.g. babesiosis), Panama does not reach the points needed for maintenance.

Nevertheless, the Commission noted the improvements made since last year including the increase in the BSE surveillance points and strongly encouraged that Panama maintain its efforts and submit supportive evidence on its progress when reconfirming its status in November 2018.

Conclusion: The Commission reviewed the annual reconfirmations of the five above-listed Members and two zones of a Member and concluded that, in general, they were compliant with the relevant requirements of Chapter 11.4. of the *Terrestrial Code* for the maintenance of the officially recognised negligible BSE risk status.

2.2.2. Annual reconfirmations screened by the OIE Status Department

The OIE Status Department reviewed the rest of the annual reconfirmations for negligible BSE risk status and reported the outcome of its analysis to the Commission as follows:

The annual reconfirmations for the following Members were reviewed:

Argentina	Germany	Namibia
Australia	Hungary	Netherlands
Austria	Iceland	Norway
Belgium	India	Paraguay
Brazil	Israel	Peru
Bulgaria	Italy	Portugal
Chile	Japan	Romania
China (People's Rep. of) ²	Korea (Rep. of)	Singapore*
Colombia	Latvia	Slovakia
Costa Rica	Liechtenstein	Spain
Croatia	Lithuania	Sweden
Czech Republic	Luxembourg	Switzerland
Denmark	Malta	United States of America
Estonia	Mexico	Uruguay
Finland		

The OIE Status Department informed the Commission that the annual reconfirmations that were received and assessed were compliant with the relevant provisions of Chapter 11.4. of the *Terrestrial Code*. However, the OIE Status Department raised the attention of the Commission to the Member marked with an asterisk (*). The annual reconfirmation was discussed during the Commission's meeting as follows:

Singapore: The Commission noted that Singapore did not reach the BSE surveillance target points. Singapore took samples from two subpopulations in 2017: fallen stock and casualty slaughter and only from one subpopulation (fallen stock) in some previous years. Considering the small adult cattle population size, the supportive information provided by Singapore substantiating its rigorous BSE surveillance, risk assessment and implemented mitigation measure, the Commission concluded that Singapore should remain on the list of Members having a negligible risk for BSE. The Commission encouraged Singapore to maintain its efforts in terms of awareness and early warning system for BSE.

In addition, several annual reconfirmations have been identified by the Status Department as not fully compliant with Point 4 of Article 11.4.22. of the *Terrestrial Code: Member Countries should sample at least three of the four subpopulations* (routine slaughter, fallen stock, casualty slaughter, clinical suspect). Nevertheless, these identified countries still reached the BSE surveillance target points. Considering the planned update of the OIE standards on BSE (requested by several OIE Members; *cf* Report of the meeting of the Scientific Commission for Animal Diseases, September 2017) including revision of the surveillance provisions applicable for maintenance of controlled and negligible BSE risk status, the Commission concluded to maintain the negligible BSE risk status of these Members and took note of this trend.

The Commission concluded that the annual reconfirmations of the above-listed Members were compliant with the relevant requirements of Chapter 11.4. of the *Terrestrial Code* for the maintenance of the officially recognised negligible BSE risk status.

3. Maintenance of the CBPP free status

3.1. Annual reconfirmations comprehensively reviewed by the Commission:

The annual reconfirmations for CBPP free status of **Brazil** and **South Africa** were comprehensively reviewed by the Commission. Specific comments made by the Commission with regard to Members' CBPP annual reconfirmations are as follows:

Brazil: Brazil was officially recognised as free from CBPP in May 2017. The Commission appreciated the concise supportive information provided by Brazil to reconfirm its CBPP free status.

² China (People's Rep. of): a zone designated by the Delegate of China in a document addressed to the Director General in November 2013, consisting of the People's Republic of China with the exclusion of Hong Kong and Macau

South Africa: South Africa was recognised officially free from CBPP in May 2017. The Commission examined the information provided by South Africa in support of the reconfirmation of its CBPP free status and assessed the progress made along the recommendations of the OIE *ad hoc* Group on the evaluation of CBPP status of Members.

The Commission encouraged South Africa to continue strengthening CBPP awareness by developing further communication material on CBPP specifically designed to raise awareness amongst targeted groups of stakeholders, and further recommended that the awareness activities conducted in 2018 be documented in the annual reconfirmation to be submitted in November 2018.

With regard to CBPP laboratory diagnosis, the Commission regretted the absence of implementation of agent isolation and confirmation using molecular techniques, despite the *ad hoc* Group's recommendation in this respect. The Commission stressed that all recommendations should be addressed.

With regard to active serological surveillance for CBPP, the Commission took note that the surveillance did not reach the expected level prescribed in the surveillance protocol during the second half of 2017 and noted difficulties in achieving trace-back and -forward investigations on CBPP suspicious results. In addition, the Commission noted that all results of CBPP surveillance conducted in 2017 were not available when the reconfirmation was submitted. The Commission recommended that the pending results as well as corrective actions implemented to strengthen compliance with the surveillance protocol and to allow trace-back and -forward investigations be documented in the annual reconfirmation to be submitted in November 2018.

In order to monitor the implementation of the recommendations listed above, the Commission recommended that South Africa's annual reconfirmation of its CBPP free status be included for comprehensive review by the Commission in February 2019.

Conclusion: The Commission concluded that the annual reconfirmations of the above-listed Members were compliant with the relevant requirements of Chapter 11.5. of the *Terrestrial Code* for the maintenance of the officially recognised CBPP free status.

3.2. Annual reconfirmations screened by the OIE Status Department

The OIE Status Department reviewed the rest of the annual reconfirmations for CBPP free status and reported the outcome of its analysis to the Commission as follows:

The annual reconfirmations for the following Members were reviewed:

Argentina	France	Portugal
Australia	India	Singapore
Botswana	Mexico	Swaziland
Canada	Namibia ³	Switzerland
China (People's Rep. of)	New Caledonia	United States of America

The OIE Status Department informed the Commission that the annual reconfirmations were compliant with the relevant provisions of Chapter 11.5. of the *Terrestrial Code*.

The Commission concluded that the annual reconfirmations of the above-listed Members were compliant with the relevant requirements of Chapter 11.5. of the *Terrestrial Code* for the maintenance of the officially recognised CBPP free status.

4. Maintenance of the endorsement of the official control programme for CBPP

The annual reconfirmation of **Namibia** was comprehensively reviewed by the Commission. The Commission commended the efforts of Namibia of the progress made on its endorsed official control programme for CBPP and considered it compliant with the relevant provisions of Chapter 11.5. of the *Terrestrial Code*.

³ Namibia: one zone located south to the Veterinary Cordon Fence, designated by the Delegate of Namibia in a document addressed to the Director General in October 2015

5. Maintenance of the CSF free status

5.1. Annual reconfirmations comprehensively reviewed by the Commission:

The annual reconfirmations for CSF free status of **Hungary, Paraguay, Romania** and a **zone of Colombia** were comprehensively reviewed by the Commission. Specific comments made by the Commission with regard to Members' CSF annual reconfirmations are as follows:

Hungary: The Commission appreciated the supportive information provided by Hungary to support the maintenance of its CSF free status. The Commission took note that in December 2017, guidelines had been issued with regard to the management and follow-up protocol for suspicions of African swine fever. Hungary mentioned that this also covers suspicions of CSF as it should always be considered as a differential diagnosis.

Paraguay: Paraguay was officially recognised as free from CSF in May 2017. The Commission appreciated the information provided and the efforts made to implement the recommendations of the CSF *ad hoc* Group, endorsed by the Commission.

Romania: Romania was officially recognised as free from CSF in May 2017 after a mission to assess compliance of the country with the *Terrestrial Code*.

Whilst noting the progresses made and regulations established in following up with the recommendations of the mission, the Commission advised a follow-up mission be conducted within the next two years to monitor the implementation of these measures in the field.

Colombia (one zone designated by the Delegate of Colombia in a document addressed to the Director General in September 2015): The Commission acknowledged the report provided by Colombia describing the progress made to implement the recommendations of the last OIE mission conducted in March 2017. The Commission encouraged that Colombia continues its progress to fully implement the recommendations of the mission and also report on them in the annual reconfirmation to be submitted in November 2018. The Commission also recommended that a follow-up mission be conducted within the next year to monitor the implementation of these measures in the field.

Conclusion: The Commission concluded that the annual reconfirmations of the four above-listed Members were compliant with the relevant requirements of Chapter 15.2. of the *Terrestrial Code* for the maintenance of the officially recognised CSF free status.

5.2. Annual reconfirmations screened by the OIE Status Department

The OIE Status Department reviewed the rest of the annual reconfirmations for CSF free status and reported the outcome of its analysis to the Commission as follows:

The annual reconfirmations for the following Members were reviewed:

Australia	Germany	Poland
Austria	Ireland	Portugal
Belgium	Italy	Slovakia
Brazil ⁴	Japan	Slovenia
Canada	Liechtenstein	Spain
Chile	Luxembourg	Sweden
Czech Republic	Mexico*	Switzerland
Denmark	New Caledonia	The Netherlands
Finland	New Zealand	United Kingdom
France	Norway	United States of America

⁴ Brazil: one zone composed of the States of Rio Grande do Sul and Santa Catarina as designated by the Delegate of Brazil in a document addressed to the Director General in September 2014; one zone covering the States of Acre, Bahia, Espírito Santo, Goiás, Mato Grosso, Mato Grosso do Sul, Minas Gerais, Paraná, Rio de Janeiro, Rondônia, São Paulo, Sergipe and Tocantins, Distrito Federal, and the municipalities of Guajará, Boca do Acre, South of the municipality of Canutama and Southwest of the municipality of Lábrea, in the State of Amazonas as designated by the Delegate of Brazil in a document addressed to the Director General in September 2015

The OIE Status Department informed the Commission that the annual reconfirmations were compliant with the relevant provisions of Chapter 15.2. of the *Terrestrial Code*. The OIE Status Department raised the attention of the Commission to the Members marked with an asterisk (*). Its annual reconfirmation was discussed during the Commission's meeting as follows:

Mexico: The Commission commended the continued efforts made by Mexico in implementing the recommendations of the OIE mission in 2016 and providing a comprehensive report in its reconfirmation of CSF free status.

The Commission concluded that the annual reconfirmations of the above-listed Members were compliant with the relevant requirements of Chapter 15.2. of the *Terrestrial Code* for the maintenance of the officially recognised CSF free status.

6. Maintenance of the FMD free status

6.1. Annual reconfirmation comprehensively reviewed by the Commission

The annual reconfirmations for FMD free status of **Belarus, Haiti, Madagascar, one zone of Botswana, one zone of Chinese Taipei⁵, one zone of Ecuador, two zones of Kazakhstan⁶, one zone of Malaysia** and **one zone of South Africa** were selected for comprehensive review by the Commission. Specific comments made by the Commission with regard to Members' FMD annual reconfirmations are as follows:

Belarus: The Commission was informed of the delayed submission of the information supporting Belarus' FMD status reconfirmation. The Commission re-emphasised that lack of submission by the deadline could lead to the suspension of FMD free status. The Commission requested that detailed information on clinical and serological surveillance including the survey design for sampling be provided in the annual reconfirmation to be submitted in November 2018. The Commission also strongly encouraged that Belarus coordinates with an OIE Reference Laboratory for FMD or with a competent regional laboratory for FMD to participate in inter-laboratory proficiency testing.

Haiti: In February 2017, the Commission noted that, whilst Haiti was historically free and had never reported clinical suspicions to date, it did not have an implemented strategy for FMD diagnosis and confirmatory testing. The Commission requested that Haiti submit evidence on the arrangements in place with an OIE Reference Laboratory or with a competent laboratory for FMD testing, as well as the protocol for collection and shipment of samples and obtaining results, in case of detection of FMD suspicion in the country. Haiti explained that it could not comply with the request this year but was planning to develop a strategy with a neighbouring country in 2018. It was also stated that 256,725 examinations were performed and clinical signs compatible with FMD were detected.

The Commission recommended that Haiti establish arrangements for laboratory diagnosis with an OIE Reference Laboratory or with a competent laboratory for FMD diagnostic tests and evidence be submitted to the OIE by the OIE General Session in May 2018, otherwise Haiti FMD free status would be at risk of suspension.

Madagascar: The Commission examined the information provided in support of the 2017 annual reconfirmation of Madagascar's FMD free status and commended the efforts initiated by Madagascar to strengthen FMD surveillance and awareness. The Commission recommended these efforts be continued to address all recommendations of the OIE FMD mission conducted in 2017.

⁵ **one zone with vaccination** covering Taiwan, Penghu, Matsu areas, as designated by the Delegate of Chinese Taipei in a document addressed to the Director General in August 2016

⁶ **one zone without vaccination** consisting of the regions of Akmola, Aktobe, Atyrau, West Kazakhstan, Karaganda, Kostanay, Mangystau, Pavlodar and North Kazakhstan, as designated by the Delegate of Kazakhstan in a document addressed to the Director General in August 2014 and **one zone with vaccination** including south-eastern part of South Kazakhstan region and southern part of Zhambyl region with vaccination

Botswana (one zone without vaccination covering Zone 3b designated by the Delegate of Botswana in a document addressed to the Director General in August 2016): The Commission noted with appreciation that Botswana intended to develop Standard Operating Procedures to standardise the management of NSP reactors and recommended Botswana to provide this procedure in the annual reconfirmation to be submitted in November 2018.

Ecuador (one zone with vaccination consisting of the continental Ecuador, as designated by the Delegate of Ecuador in a document addressed to the Director General in August 2014): The Commission appreciated the detailed information submitted by Ecuador with regard to its recent serological survey. The Commission commended Ecuador's vigilance and efforts in FMD surveillance and prevention and recommended that they should be continued.

Malaysia (one zone without vaccination covering the provinces of Sabah and Sarawak as designated by the Delegate of Malaysia in a document addressed to the Director General in December 2003): The Commission noted that Malaysia had planned to implement active serological surveillance in Sabah province in 2018 and invited Malaysia that the sampling design and results be submitted in the annual reconfirmation of 2018.

South Africa (one zone without vaccination designated by the Delegate of South Africa in documents addressed to the Director General in May 2005 and January 2014): The Commission appreciated the detailed supporting information provided by South Africa on surveillance and prevention measures in the free zone.

Conclusion: With the exception of Haiti that was requested additional information, the Commission concluded that the annual reconfirmations of the above-listed Members and zones were compliant with the relevant requirements of Chapter 8.8. of the *Terrestrial Code* for the maintenance of the officially recognised FMD free status.

The annual reconfirmation of Haiti would be finalised after receipt of the additional information and electronic consultation by the Commission prior to the forthcoming OIE General Session in May 2018.

6.2. Annual reconfirmations screened by the OIE Status Department

The OIE Status Department reviewed the rest of the annual reconfirmations for FMD free status and reported the outcome of its analysis to the Commission as follows:

The annual reconfirmations for the following Members were reviewed:

Albania	Dominican Republic	Italy	Portugal
Australia	El Salvador	Japan	Romania
Austria	Estonia	Latvia	San Marino
Belarus	Finland	Lesotho	Serbia ⁷
Belgium	Former Yug. Rep. of	Lithuania	Singapore
Belize	Macedonia	Luxembourg	Slovakia
Bosnia and Herzegovina	France	Malta	Slovenia
Brunei*	Germany	Mexico	Spain
Bulgaria	Greece	Montenegro	Swaziland*
Canada	Guatemala	New Caledonia	Sweden
Chile	Guyana	New Zealand	Switzerland
Costa Rica	Haiti	Nicaragua	The Netherlands
Croatia	Honduras	Norway	Ukraine
Cuba	Hungary	Panama	United Kingdom
Cyprus	Iceland	Paraguay	United States of America
Czech Republic	Indonesia	Philippines	Uruguay
Denmark	Ireland	Poland	Vanuatu

⁷ Excluding Kosovo administered by the United Nations

Argentina: Three zones without vaccination

- one zone designated by the Delegate of Argentina in a document addressed to the Director General in January 2007;
- the summer pasture zone in the Province of San Juan as designated by the Delegate of Argentina in a document addressed to the Director General in April 2011;
- Patagonia Norte A as designated by the Delegate of Argentina in a document addressed to the Director General in October 2013;

Two zones with vaccination – two separate zones designated by the Delegate of Argentina in documents addressed to the Director General in March 2007 and October 2013, and in August 2010 and February 2014;

Bolivia: One zone without vaccination in the Macro-region of the Altiplano designated by the Delegate of Bolivia in documents addressed to the Director General in November 2011;

One zone with vaccination consisting of four merged zones covering the regions of Amazonas, Chaco, Chiquitania, Valles and part of Altiplano as designated by the Delegate of Bolivia in documents addressed to the Director General in January 2003 and March 2007, in August 2010, in August 2012 and in October 2013 and February 2014;

Botswana: Four zones without vaccination designated by the Delegate of Botswana in documents addressed to the Director General in August and November 2014 as follows:

- one zone consisting of Zones 3c (Dukwi), 4b, 5, 6a, 8, 9, 10, 11, 12 and 13;
- one zone consisting of Zone 3c (Maitengwe);
- one zone covering Zone 4a;
- one zone covering Zone 6b;

Brazil: One zone without vaccination – State of Santa Catarina designated by the Delegate of Brazil in a document addressed to the Director General in February 2007;

Four separate zones with vaccination designated by the Delegate of Brazil in documents addressed to the Director General as follows:

- one zone covering the territory of State of Rio Grande do Sul (documentation of September 1997);
- one zone consisting of State of Rondônia (documentation of December 2002), State of Acre along with two adjacent municipalities of State of Amazonas (documentation of March 2004) and an extension of this zone into the territory of State of Amazonas (documentation of December 2010);
- one zone consisting of three merged zones: one zone covering the middle southern part of State of Pará (documentation of February 2007), States of Espírito Santo, Minas Gerais, Rio de Janeiro, Sergipe, Distrito Federal, Goiás, Mato Grosso, Paraná, São Paulo, parts of State of Bahia, parts of State of Tocantins (documentation of May 2008), and the zone in State of Mato Grosso do Sul (documentation of July 2008); one zone located in States of Bahia and Tocantins (documentation of December 2010); and one zone covering States of Alagoas, Ceará, Maranhão, Paraíba, Pernambuco, Piauí, Rio Grande do Norte, and the northern region of State of Pará (documentation of October 2013);
- one zone in State of Mato Grosso do Sul (documentation of August 2010);

Colombia: Two zones without vaccination

- one zone designated by the Delegate of Colombia in documents addressed to the Director General in November 1995 and in April 1996 (Area I - Northwest region of Chocó Department);
- one zone designated by the Delegate of Colombia in documents addressed to the Director General in January 2008 (Archipelago de San Andrés and Providencia);

One zone with vaccination

- one zone consisting of five merged zones designated by the Delegate of Colombia in documents addressed to the Director General in January 2003, in December 2004 (two zones), in January 2007 and in January 2009) with the exception of the territory of the containment zone;

Ecuador: **One zone without vaccination** consisting of the insular territory of the Galapagos, as designated by the Delegate of Ecuador in a document addressed to the Director General in August 2014;

One zone with vaccination consisting of the continental Ecuador, as designated by the Delegate of Ecuador in a document addressed to the Director General in August 2014;

Kazakhstan: **Four separate zones with vaccination** designated by the Delegate of Kazakhstan in documents addressed to the Director General in August 2016 as follows:

- one zone consisting of Almaty region;
- one zone consisting of East Kazakhstan region;
- one zone including part of Kyzylorda region, northern part of South Kazakhstan region, northern and central parts of Zhambyl region;
- one zone including southern part of Kyzylarda region and south-western part of South Kazakhstan region;

Moldova: **One zone without vaccination** designated by the Delegate of Moldova in a document addressed to the Director General in July 2008;

Namibia: **One zone without vaccination** designated by the Delegate of Namibia in a document addressed to the Director General in February 1997;

Peru: **One zone without vaccination** consisting of three merged zones as designated by the Delegate of Peru in documents addressed to the Director General in December 2004, in January 2007 and in August 2012;

One zone with vaccination consisting of the regions of Tumbes and parts of Piura and Cajamarca as designated by the Delegate of Peru in a document addressed to the Director General in August 2012;

Turkey: **One zone with vaccination** designated by the Delegate of Turkey in a document addressed to the Director General in November 2009.

The OIE Status Department informed the Commission that the annual reconfirmations that were received and assessed were compliant with the relevant provisions of Chapter 8.8. of the *Terrestrial Code*. However, the OIE Status Department raised the attention of the Commission to the Members marked with an asterisk (*). The annual reconfirmations were discussed during the Commission's meeting as follows:

Brunei: The Commission strongly encouraged Brunei to continue its efforts in FMD surveillance activities by ensuring the availability of FMD test kits according to the established sampling plan. The Commission underlined that the early detection system should not be depended on the availability of kits and recommended Brunei to seek support and collaborate with the OIE Reference Laboratories for FMD in the region. The Commission recommended that Brunei's annual reconfirmation of its FMD free status be included for comprehensive review by the Commission in February 2019.

Swaziland: The annual reconfirmation of Swaziland's FMD free country without vaccination was referred to the Commission for comprehensive review by the Status Department to assess the management of an 'unexpected' importation of buffaloes. Indeed, in September 2017, three buffaloes were imported from a country which is not free from FMD without import permits or health certificates. From Swaziland's report, it was noted that these animals tested

negative for FMD. The Commission also noted that these animals were no longer under the authority of the Veterinary Services and were to be moved from quarantine to a Game Reserve. The Commission expressed its serious concerns over these importations incompliant with the requirements of the *Terrestrial Code* and presenting a risk of introducing FMD in the country. The Commission requested Swaziland to provide detailed information on the measures which will be continuously implemented in the Reserve to mitigate any potential risk of FMD transmission. The Commission will finalise electronically its assessment of the maintenance of Swaziland's FMD free status based on this additional information.

With the exception of Swaziland that was requested for additional information, the Commission concluded that the annual reconfirmations of the above-listed Members were compliant with the relevant requirements of Chapter 8.8. of the *Terrestrial Code* for the maintenance of the officially recognised FMD free status.

The annual reconfirmation of Swaziland would be finalised after receipt of the additional information and electronic consultation by the Commission prior to the forthcoming OIE General Session in May 2018.

7. Maintenance of the endorsement of the official control programme for FMD

The annual reconfirmations of **China (People's Rep. of), India, Mongolia, Morocco, Namibia and Thailand** were comprehensively reviewed by the Commission and were considered compliant with the relevant provisions of Chapter 8.8. of the *Terrestrial Code* for an endorsed official control programme.

China (People's Rep. of): The Commission appreciated the report and contingency plan provided by China. As indicated at the time when China's official control programme for FMD was endorsed (in May 2015), the Commission recommended that an OIE expert mission take place this year to follow-up on the progress made with the implementation of China's official control programme for FMD to ensure the maintenance of its endorsement.

India: The Commission acknowledged India's progresses made according to its timeline and performance indicators of the FMD control programme endorsed by the OIE. To assess the continuous compliance with the relevant provisions of the OIE *Terrestrial Code* for the maintenance and progress of the endorsed official control programme for FMD of India, the Commission recommended deployment of a mission to India.

Mongolia: The Commission was informed of the delayed submission of Mongolia's reconfirmation of its endorsed official control programme for FMD. The Commission strongly reiterated that lack of submission by the deadline could lead to the withdrawal of the programme's endorsement. The information provided by Mongolia indicated increase of incidence of FMD and changes in the vaccination programme for FMD. Whilst Mongolia provided corrective actions taken subsequent to the changes in the FMD situation in the country, the Commission deemed necessary that appropriate adjustments be made to the official control programme particularly on the timeline and performance indicators, according to the current situation. The Commission requested that this updated information be submitted to the OIE, at least two months before meeting of the *ad hoc* Group on the evaluation of the FMD status of Members, for its assessment and in accordance with the SOP. The Commission also advised that the sampling design for post-vaccination monitoring be reconsidered by Mongolia.

Morocco: Following the comprehensive review of Morocco's endorsed official control programme for FMD in 2016, the Commission requested that the results of the NSP serological surveillance (including not only small ruminants but all susceptible species to detect virus circulation) as well as the results of the study on vaccine efficacy conducted in 2016 be provided with the 2017 annual reconfirmation. The Commission examined the information provided in support of the 2017 annual reconfirmation and noted with disappointment that its recommendation was not taken into consideration as the NSP serological surveillance conducted in 2017 targeted, again, only small ruminants. With respect to the study on vaccine efficacy conducted in 2016, the Commission took note that this study was inconclusive and will be repeated in 2017-2018. The Commission firmly reiterated its previous recommendations and requested Morocco provide a revised protocol for NSP serological surveillance as well as timelines for implementation, and an update on the outcomes of the study on vaccine efficacy by the forthcoming OIE General Session in May 2018.

Namibia: The annual reconfirmation of Namibia for its endorsed official control programme for FMD was examined by the Commission. The Commission acknowledged that good progress were made and recommended that Namibia provide the results of the cross-sectional post-vaccination sero-monitoring survey conducted in 2017 in the annual reconfirmation to be submitted in November 2018.

Thailand: The Commission acknowledged Thailand's progresses made according to its timeline and performance indicators of the FMD control programme endorsed by the OIE. To assess the continuous compliance with the relevant provisions of the OIE *Terrestrial Code* for the maintenance and progress of the endorsed official control programme for FMD of Thailand (as well as the maintenance of the officially recognised PPR free country status of Thailand), the Commission recommended deployment of a mission to Thailand.

With the exception of Morocco that was requested for additional information, the Commission considered that the annual reconfirmations of the above-listed Members were compliant with the relevant provisions of Chapter 8.8. of the *Terrestrial Code* for an endorsed official control programme for FMD.

The annual reconfirmation of Morocco would be finalised after receipt of the additional information and electronic consultation by the Commission prior to the forthcoming OIE General Session in May 2018.

8. Maintenance of the PPR free status

8.1. Annual reconfirmations comprehensively reviewed by the Commission:

The annual reconfirmations for PPR free status of **Botswana, Cyprus, Greece, Korea (Rep. of), Spain** and **Thailand** were comprehensively reviewed by the Commission. Specific comments made by the Commission with regard to Members' PPR annual reconfirmations are as follows:

Botswana: Botswana was officially recognised free from PPR in May 2017. The Commission examined the detailed information provided by Botswana in support of the reconfirmation of its PPR free status and assessed the progress made along the recommendations of the OIE *ad hoc* Group on the evaluation of PPR status of Members.

The Commission commended that Botswana finalised its contingency plan for PPR and that awareness activities for PPR were conducted in 2017. The Commission encouraged Botswana to continue raising awareness for PPR and to provide information on further activities conducted in Botswana's 2018 annual reconfirmation.

The Commission took note that Botswana's National Veterinary laboratory was not yet accredited for PPR but acknowledged that this laboratory will participate in international proficiency testing in 2018. The Commission recommended that the corresponding outcomes should be included in Botswana's 2018 annual reconfirmation.

With respect to surveillance for PPR in wildlife, the Commission regretted that no sero-surveillance was conducted despite the *ad hoc* Group's recommendation in this regard.

The Commission stressed that all recommendations of the OIE *ad hoc* Group on the evaluation of PPR status of Members should be addressed and recommended that Botswana's 2018 annual reconfirmation for PPR be included for comprehensive review by the Commission in February 2019.

Cyprus: The Commission stressed the importance of a sensitive early detection system ensured throughout the entire territory and taking into consideration the potential risks associated with the PPR situation in neighbouring Members.

Korea (Rep. of), Spain and Thailand: The Commission encouraged the three Members to maintain good levels of awareness programmes and trainings for early detection of PPR in case of introduction. For **Thailand**, the Commission also recommended a combined field mission to be conducted to assess compliance with the relevant requirements of Chapter 14.7. of the *Terrestrial Code* for the maintenance of a PPR free status as well as to assess the progress made along the endorsed official control programme for FMD.

The Commission concluded that the annual reconfirmations of the six above-listed Members were compliant with the relevant requirements of Chapter 14.7. of the *Terrestrial Code* for the maintenance of the officially recognised PPR free status.

8.2. Annual reconfirmations screened by the OIE Status Department

The OIE Status Department reviewed the rest of the annual reconfirmations for PPR free status and reported the outcome of its analysis to the Commission as follows:

The annual reconfirmations for the following Members were reviewed:

Argentina	France	New Zealand
Australia	Germany	Norway
Austria	Hungary	Paraguay
Belgium	Iceland	Philippines
Bolivia	Ireland	Poland
Bosnia and Herzegovina	Italy	Portugal
Brazil	Latvia	Romania
Canada	Liechtenstein	Singapore
Chile	Lithuania	Slovakia
Chinese Taipei	Luxembourg	Slovenia
Colombia	Malta	South Africa
Czech Republic	Mauritius	Swaziland
Denmark	Mexico	Sweden
Ecuador	Namibia ⁸	Switzerland
Estonia	Netherlands	United Kingdom
Finland	New Caledonia	United States of America

The OIE Status Department informed the Commission that the annual reconfirmations were compliant with the relevant provisions of Chapter 14.7. of the *Terrestrial Code*.

The Commission concluded that the annual reconfirmations of the above-listed Members were compliant with the relevant requirements of Chapter 14.7. of the *Terrestrial Code* for the maintenance of the officially recognised PPR free status.

⁸ Namibia: one zone located south to the Veterinary Cordon Fence, designated by the Delegate of Namibia in a document addressed to the Director General in November 2014

Standard Operating Procedure for official recognition of disease status of non-contiguous territories as part of a country already recognised with an OIE official disease status

CONTEXT

The OIE has developed Standard Operating Procedures (Application_SOPs) to assist Members with the process relating to the official recognition of a specific disease status or the endorsement of a national official control programme. It is available [here](#).

The above-mentioned SOPs highlight the need for applicant countries to specify the territory(ies) covered by the application, including the possible non-contiguous territories (NCT). The decision for this inclusion should be based on administrative and technical aspects, considering that an outbreak in an NCT may have an impact on the status of the mainland.

Following a Member's request and as complement to the above-mentioned SOPs, the OIE developed the present Procedure to clarify how Members should claim that their NCT, that were not initially specified in the application for official status recognition, benefit from the already recognised official status of the mainland. The Procedure should be read in complement to the above-mentioned SOPs.

Description/ Scope: This procedure describes the process for the preparation, assessment and approval of dossiers for the official recognition of disease status of non-contiguous territories as part of a country already recognised with an OIE official disease status.

Related document and process: Procedure and guidelines for official recognition of disease status and for the endorsement of national official control programmes of Members

List of acronyms: Assembly: World Assembly of Delegates
NCT: Non-contiguous territory(ies)
Terrestrial Code: Terrestrial Animal Health Code

A. Application for official disease status recognition of non-contiguous territories

1. CONTENT

A dossier should be submitted and contain:

- A **letter signed** by the OIE Delegate requesting the evaluation of the dossier for official recognition of disease status of NCT as part of a country already recognised with an OIE official disease status.
- A **one-page executive summary**:
 - Identifying the proposed NCT (possibly more than one) for official status recognition;
 - Specifying official status requested (it can be for more than one disease but this option would require careful attention to the OIE calendar, cf. Section A. 1.6 of the Application_SOP);
 - Declaration of compliance with the all applicable requirements defined in the *Terrestrial Code* (cf. Annex 2.b) of the Application_SOP);
 - Providing an overview of the information submitted in the core document.

- A **core document**, of no more than 50 pages, with possible relevant **appendices** and supportive information for each NCT based on the relevant questionnaire for that particular disease published in Chapter 1.6. of the *Terrestrial Code*, and in particular providing details on:
 - Livestock and wildlife demographics in the NCT. Slaughterhouses/abattoirs, markets, and events associated with the congregation of susceptible livestock.
 - Veterinary system. Legislation and Veterinary Services in place in the NCT and/or how it relates to the Veterinary system of the mainland. How the disease-related activities are supervised and controlled, enforced and monitored in the NCT. The role of producers, farmers, industry and private veterinarians in disease surveillance and control in the NCT (include a description of training and awareness programmes).
 - Disease eradication. History, strategy, vaccines and vaccination related to the disease(s) in the NCT.
 - Animal identification, traceability and movement control in the NCT.
 - Diagnosis. Where laboratory diagnosis for the samples taken from the proposed NCT is performed. The arrangements in place with the laboratories where the samples are sent to, the follow-up procedures and the time frame for obtaining results.
 - Surveillance. Documented evidence of:
 - Surveillance for the disease(s) in the proposed NCT complies with the provisions of Article 1.4.6. and the surveillance articles in the relevant disease chapter of the *Terrestrial Code*.
 - Type of surveillance (clinical, virological, serological or a combination of such), the number of suspected cases (if any), and the follow-up testing and/or investigations demonstrating absence of the disease.
 - Disease prevention:
 - Coordination with the mainland and neighbouring countries.
 - Import control procedures (regulations and procedures applicable in the NCT).
 - Contingency planning and outbreak response capacity in the NCT.

Relevant appendices may be attached to the core document where they should be clearly cross-referenced.

If the application covers more than one NCT and more than one disease status, the information should be aggregated first by disease status and then by each NCT.

The **contact details** (name, phone/fax numbers and email address) of technical staff involved in the preparation of the dossier so that any questions arising before or during the meeting of the relevant *ad hoc* Group or during the meeting of the Scientific Commission for Animal Diseases could be referred to the Member without delay.

2. OTHER REQUIREMENTS

Requirements under Section A.1.2. to A.1.6. of the Application_SOP should be followed.

Application fees are not requested for this Procedure -The financial obligation stated in point 2 of Application_SOP does not apply to this process.

B. Assessment process

The assessment of applications follows the same process as a classic application. Sections B to D of the Application_SOP apply.

C. Official recognition and endorsement by the Assembly

The communication around the applications for official recognition of disease status of NCT as part of a country already recognised with an OIE official disease status is managed in a similar way than for classic applications. Section E of the Application_SOP applies, from the individual letters to be sent to the Delegate of the applicant Member to the adoption of the relevant Resolution by the Assembly.

From May 2019, the NCT will be specified in the Resolutions to be proposed for adoption by the Assembly and displayed on the OIE website.

**REPORT OF THE JOINT MEETING BETWEEN
THE OIE SCIENTIFIC COMMISSION FOR ANIMAL DISEASES
AND THE OIE TERRESTRIAL ANIMAL HEALTH STANDARDS COMMISSION**

Paris, 14 February 2018

The Scientific Commission for Animal Diseases (the Scientific Commission) and the Terrestrial Animal Health Standards Commission (the Code Commission) convened a joint meeting chaired by the OIE Director General on 14 February 2018.

Dr Monique Eloit, the Director General of the OIE, welcomed and thanked both Commissions for their important work in setting OIE standards. The Director General also thanked all Commission members on behalf of the Member Countries for their full commitment during the three-year period of their mandate.

The Director General noted that the evaluation of the applications for nomination for election to the Specialist Commissions had been completed in December 2017. The report of the Evaluation Committee including the proposed list of suitable candidates will be considered by the Council before the final list is submitted for consideration by the Member Countries in preparation for the elections at the forthcoming General Session in May.

The key issues discussed during the joint meeting are as follows:

1. Update on each Commission's work programme

Dr Etienne Bonbon, the President of the Code Commission explained that it had recently introduced a new format for its work programme, adding background information such as reasons for new work and current number of rounds for comments. He outlined some of the main issues that needed to be addressed in priority during the coming year, avian influenza (AI), the restructuring of Section 4 of the *Terrestrial Code* on disease prevention and control, including adding new chapters on vaccination and official control of emerging listed diseases and outbreak management, along with the revision of the chapter on animal health surveillance.

Dr Gideon Brückner, the President of the Scientific Commission introduced some of the priority issues to be discussed in the coming year, namely rabies a tripartite (WHO-OIE-FAO) priority, animal African trypanosomoses, foot and mouth disease (FMD), avian influenza (AI) and bovine spongiform encephalopathy (BSE).

The Director General noted that a very significant proportion of the work programme for Specialist Commissions was ongoing and that OIE resources required to support the Commissions and the increased number of *ad hoc* Groups need to be taken into account. She also noted that the Headquarters would review the current two-year cycle of standard development in response to some Member Country concerns regarding the time constraints to effectively organise national consultation on the large volume of work being undertaken by the Commissions.

2. Proposed revised glossary definitions in the *Terrestrial Code*

The Scientific Commission noted that it had reviewed Member Country comments and found some of them would require careful consideration, such as the definitions of 'disease', 'outbreak', 'containment zone' and 'epidemiological unit'.

The Code Commission noted that some of the comments indeed were valid. However, with respect to the definition of 'disease', it clarified that the word 'disease' would not disappear from the *Terrestrial Code*, instead either the terms 'infection', 'infestation' or 'infection and infestation' would replace 'disease', or the term 'disease' would be retained and unitalicised when it was used in the generic meaning of the word.

3. Proposed revised Chapter 1.6. on Procedures for self-declaration and for official recognition by the OIE

The Code Commission advised that as noted in its September 2017 report, with the assistance of the Headquarters, it had finished its thorough revision of all the questionnaires which had been prepared as separate chapters for each disease and would propose them for adoption in May 2018. The Code Commission noted this would include the slightly revised Chapter 1.6. showing the updated reference to the proposed new chapters and the proposed deletion of the remaining articles.

The Director General commended the Commissions and the secretariat for the progress made regarding the revision of the questionnaires including the presentation as separate chapters. Despite the importance of the revision of the questionnaires for Member Countries, she challenged more generally, reasons for including or maintaining procedural guidance in the *Terrestrial Code*. This position was backed by both Commissions' Presidents.

4. Proposed revised Chapter 4.3. on Zoning and compartmentalisation

Both Commissions discussed the requests and concerns raised by some Member Countries regarding the inclusion of new concepts to address multiple containment zones and 'temporary protection zone'. It was agreed to remove the new paragraphs, for the time being, on the 'temporary protection zone' in order to avoid a delay in the adoption of the revised chapter.

The Commissions agreed on the need to continue to discuss how to provide appropriate guidance, including how to further address the concept of 'temporary protection zone', and respond to the Member Country requests.

5. Antimicrobial resistance (AMR)

The Headquarters advised that the *ad hoc* Group on AMR met in January 2018 to consider comments from Member Countries on the proposed definitions for 'therapeutic use', 'nontherapeutic use' and 'growth promotion', including proposals to align the OIE definitions with Codex and other international fora.

The Code Commission noted that it had taken into consideration the comments provided by the Scientific Commission and the *ad hoc* Group on AMR and advised that Chapter 6.7. and Articles 6.8.1. and 6.8.1bis. of Chapter 6.8. would be proposed for adoption in May 2018.

6. Chapter 8.11. Infection with *Mycobacterium tuberculosis* complex

The Headquarters advised that it requested experts from the OIE Reference Laboratories for bovine tuberculosis to evaluate whether the two pathogens (*M. caprae* and *M. tuberculosis*) that are currently not OIE listed diseases, meet the listing criteria of Chapter 1.2. The Headquarters further noted that it would work with the experts to complete the evaluation before the General Session and the Commissions will be informed about the result of the evaluation through electronic communication.

7. Avian influenza (AI) and bovine spongiform encephalopathy (BSE)

Both Commissions commended the OIE Headquarters for its preparatory work and the *ad hoc* Group on AI for the progress made regarding the revision of Chapter 10.4. on AI and expressed their continued support for the new approach of updating the *Terrestrial Code*.

The Headquarters noted that two new *ad hoc* Groups on BSE (risk assessment and surveillance) would be convened in 2018 to review Member Country comments and update the chapter accordingly.

8. Information on upcoming *ad hoc* Group meetings

The OIE Headquarters advised that *ad hoc* Groups on AMR, BSE, AI and animal African trypanosomoses would be convened in 2018 to follow up ongoing work and to update the relevant *Terrestrial Code* chapters. It was recalled that following a discussion between the Scientific Commission and the President of the Code Commission, it was agreed that subsequent consideration of the new chapter on infection with *Trypanosoma evansi* (non-equine surra) and the revised chapter on infection with Trypanozoon in equids (Chapter 12.3.) would be deferred pending the report of the *ad hoc* Group on animal African trypanosomoses.

9. Other issues

As regards other issues identified for consideration, it was suggested that the review procedure governing the decision on listing or delisting of diseases based on the criteria for listing in Chapter 1.2., be established by the Headquarters to ensure coordination among the Specialist Commissions. It was also proposed that the experts tasked with assessing the diseases against the criteria should not all have expertise directly related to the disease in question and be free from potential bias.

10. Dates of next meeting

The Headquarters proposed the possible dates for the next Specialist Commission meetings in September, noting that the scheduling was proposed in order to facilitate planned orientation sessions for newly elected Members of the Specialist Commissions.

WORK PROGRAMME OF THE SCIENTIFIC COMMISSION FOR ANIMAL DISEASES (FEB 2018)

Topics	Progress before Feb 2018 SCAD meeting	Summary of agenda items	SCAD decision Feb 2018	Future action plan	Priority 1 = top priority
Terrestrial Animal Health Code Chapters					
Glossary	Circulated for comments after Sep 2017 meeting	Address Member comments on the amended definitions	Revision of the definition	Follow up	1
Ch. 1.4. Animal Health Surveillance	Circulated for comments after Sep 2017 meeting	Address Member comments after consultation with the chair of the <i>ad hoc</i> Group	Forward to TAHSC	Follow up	1
Ch. 1.6. Procedures for self-declaration and official recognition	An amended draft Chapter 1.6 was proposed by the OIE Headquarters	Review the proposal	Proposed amendments and sent to TAHSC.	Follow up	1
	Questionnaire reviewed by SCAD, TAHSC and OIE	Update on current state of play		Continue the discussion on the relevance of their presence in the <i>Code</i>	1
Ch. 8.15. Rinderpest	An amended draft Article 8.15.2 was circulated	Address Member comments	Proposed amendments and sent to TAHSC	Follow up	3
			A resolution on designation of facilities as approved for holding rinderpest virus containing material would be proposal for adoption.		1
Ch 4.3. zoning and compartmentalisation	Circulated for comments after Sep 2017 meeting	Address Member comments.	Member comments addressed and sent to TAHSC	Follow up	1
		Consideration of multiple containment zones and the use of temporary protection zone in response to a risk	Continue the discussion the concept of temporary protection zone with TAHSC	Follow up	2
Ch 8.X. <i>Trypanosoma evansi</i> (not including surra)	Circulated for comments after Sep 2017 meeting	Review Member comments received	Postpone the discussion after receiving the opinion of the <i>ad hoc</i> Group on animal African trypanosomoses	Follow up	2
Ch 12.3. Dourine	Circulated for comments after Sep 2017 meeting	Review Member comments received		Follow up	2
CH. 8.13. Infection with rabies virus	Draft amended chapter proposed by the <i>ad hoc</i> Group	Review amended draft chapter	Proposed amendments and sent to TAHSC	Follow up	1

Topics	Progress before Feb 2018 SCAD meeting	Summary of agenda items	SCAD decision Feb 2018	Future action plan	Priority 1 = top priority
Ch. 11.12. infection with <i>T. anulata</i>, <i>T. orientalis</i>, <i>T. parva</i>	Circulated for comments after Sep 2017 meeting	Address Member comments	Member comment addressed. Draft amended chapter forwarded to TAHSC	Follow up	2
Ch. 14.X. infection with <i>T. lestoquardi</i>, <i>T. luwenshuni</i>, <i>T. uilenbergi</i>	Circulated for comments after Sep 2017 meeting	Address Member comments	Member comment addressed. Draft amended chapter forwarded to TAHSC	Follow up	2
Ch. 12.10. Glanders	Circulated for comments after Sep 2017 meeting	Review Member Comments.	Member comment addressed. Draft amended chapter forwarded to TAHSC	Follow up	2
Ch. 4.X Vaccination	Circulated for Member comments after Sep 2017	Review Member Comments	Member comments addressed. Draft amended chapter forwarded to TAHSC	Follow up	1
Ch 8.3 Bluetongue	Circulated for Member Comments after Sep 2017	Review Member Comments	Member comments addressed. Draft amended chapter forwarded to TAHSC	Follow up	2
Ch 4.Y. Management of outbreaks of listed diseases	Circulated for Member Comments after Sep 2017	Review Member Comments	Member comments addressed. Draft amended chapter forwarded to TAHSC	Follow up	3
Ch 6.7. Harmonisation of national AMR surveillance and monitoring	Circulated for Member Comments after Sep 2017	Review ad hoc Group opinion on Member Comments	Member comments addressed. Draft amended chapter forwarded to TAHSC	Follow up	1
Ch 6.8. Monitoring of the quantities and usage patterns of antimicrobial agents used in food-producing animals	Circulated for Member Comments after Sep 2017	Review ad hoc Group opinion on Member Comments	Member comments addressed. Draft amended chapter forwarded to TAHSC	Follow up	1
Ch 15.1. African Swine Fever	Circulated for Member Comments after Sep 2017	Review Member comments	Member comments addressed. Draft amended chapter forwarded to TAHSC	Follow up	1
Ch.8.8. foot and mouth disease	Request that the ad hoc Group on evaluation of FMD status consider the recommendation of the AHG in charge of the alternative surveillance and shorter recovery period after an outbreak	Review the ad hoc Group on evaluation of FMD status' opinion	Develop a detailed questionnaire to support countries willing to apply for the recovery of their previously free status	Request a dedicated ad hoc Group meeting	2

Topics	Progress before Feb 2018 SCAD meeting	Summary of agenda items	SCAD decision Feb 2018	Future action plan	Priority 1 = top priority
Non-disease Status <i>Ad hoc</i> Groups (AHG) and Working Group on Wildlife					
AHG on Antimicrobial Resistance	<i>Ad hoc</i> Group convened	Review the <i>ad hoc</i> Group report	Report endorsed and forwarded to TAHSC	Follow up	1
AHG on rabies	<i>Ad hoc</i> Group convened	Review the <i>ad hoc</i> Group report and draft chapter	Report endorsed and forwarded to TAHSC	Follow up	1
AHG on biological threat reduction	<i>Ad hoc</i> Group convened	Review the <i>ad hoc</i> Group report and draft guidelines	Report endorsed. Member Countries invited to comment the draft guidelines	Follow up	2
Working Group on Wildlife	Working Group convened	Consider the report			1
		Consider the paper on "Vaccination of Animals of High Conservation value"	Made recommendations to improve the paper before potential publication	Follow up	3
Official Disease Status Recognition					
Evaluation of Member dossiers	AHGs evaluation and report	Review the AHG reports	Recommend countries and zones to be recognised in May 2018 (GS86)	Follow up	1
Experts missions to Member Countries	<ol style="list-style-type: none"> 1. Field missions conducted in the past 6 months 2. Report on progress along the action plan to implement the recommendation of past field missions 3. List of planned missions 	<ol style="list-style-type: none"> 1. Review the report of the missions conducted recommendation made related to missions in two countries 2. Reviewed the action plans from three countries for the implementation of the recommendations of the missions 3. Assess the needs and prioritise 	<ol style="list-style-type: none"> 1. Final recommendations made related to missions in two countries 2. Recommended amendments and reconsideration of priorities. 3. Needs assessed and priorities established for other in-country missions 	<ol style="list-style-type: none"> 1. Proposal to the World Assembly 2. Follow up via six-monthly report to SCAD. 3. Consider the deployment of other missions 	1
Follow up of Member Countries with official disease status or with suspended status	Ongoing	<p>Review the situation and progress made in countries under specific scrutiny</p> <p>Review updated information on recent establishment of containment zone</p>	Situation in the listed countries revised	Follow up	1
Review of annual reconfirmations	2017 annual reconfirmations reviewed and list of countries and zones adopted at GS85	Comprehensive review of countries' annual reconfirmations identified in Sept. 2017 and further identified by the OIE Status department	Report of the annual reconfirmation assessments	<p>Follow up with some countries that need to provide additional information prior to GS86 and for the 2018 annual reconfirmation</p> <p>Follow up and identify countries' status for comprehensive review of 2018 annual reconfirmations in Sept. 2018</p>	1

Topics	Progress before Feb 2018 SCAD meeting	Summary of agenda items	SCAD decision Feb 2018	Future action plan	Priority 1 = top priority
Harmonisation the requirements in the Terrestrial Code Chapters for official disease freedom (OIE HQ)	Ongoing	Review the harmonised requirements of the disease-specific Chapters and rationale	Harmonised draft articles/requirements forwarded to TAHSC for its consideration in Sept. 2018	Electronic review by SCAD in March 2018 Forward to TAHSC Follow-up	2
Review of the procedures on official status of non-contiguous territories	Compiled document on current situation of non-contiguous territories related to official status		Inform Members on the procedures at the GS86 and in a letter to Delegates of Members concerned	Follow up	1
Procedures on self-declaration	Updated Standard Operating Procedures reviewed by several OIE Departments and by the Aquatic and Scientific Commissions			- To be updated regularly as needed - Revision of Chapter 1.6. (see above)	
Official recognition of BSE risk status	Ongoing	ad hoc Group to be convened for BSE Chapter revision in June/July 2018	Two separate ad hoc Groups to review: "risk assessment" and "surveillance"	Follow up	1
Liaison with other Commissions					
TAHSC		Coordination meeting			1
BSC	Draft list of main focus areas and specialities for the OIE collaborating Centers	Consider the list	List agreed	Follow up	2
	Procedures for Designation of OIE Collaborating Centers	Consider the procedures	Procedures agreed	Follow up	2
		ToR for the ad hoc Group on MERS-CoV	ToR endorsed		1
Global Control/Eradication Strategies					
Global eradication of PPR	Ongoing update	Update of the progress made		Follow up	2
Global control of FMD	Ongoing update	Update of the progress made		Follow up	2
Evaluation of applications for OIE Collaborating Centre status					
Risk analysis and modelling Collaborating Centre	Complementary information to the application received by the OIE	Evaluation of the information	Recommended the acceptance of the application	Follow up	2
Follow up of conferences, meeting, mission with impact in the OIE mandate					
Updated on events relevant to the SCAD mandate	Ongoing update	Follow up the events relevant to the SCAD mandate		Follow up	2

Topics	Progress before Feb 2018 SCAD meeting	Summary of agenda items	SCAD decision Feb 2018	Future action plan	Priority 1 = top priority
Disease/infection specific issues					
Update on FMD Ref lab network		Annual report		Follow up	1
Rapid Screening of bovine carcass to demonstrate absence of FMDv	Paper received by the OIE	Consider the paper	Forward to the <i>ad hoc</i> Group on FMD for its opinion	Follow up	2
<i>Mycoplasma bovis</i>	Rapid risk assessment via semen received by OIE	Consider the paper	Assess the disease against the listing criteria, should it be included in the workplan	Follow up	3
Porcine Epidemic Diarrhoea (PED)	Request by Member to include PED in the OIE List	Consider the scientific rationale provided	Postpone the decision until the listing procedure is updated	Follow up	2
Resistance to antiparasitics	Document elaborated by the OIE	Consider the document	Request an expert consultation	Follow up	3
Rinderpest eradication	Ongoing activities	Update on the elimination of rinderpest virus material activities	Information received	Follow up	2

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