

# Requirements of the Terrestrial Code for FMD surveillance



**WORLD ORGANISATION FOR ANIMAL HEALTH**  
*Protecting animals, preserving our future*

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## Surveillance

Close observation

## Origin of the word:

Early 19th century: from French, from sur- ‘over’ + veiller ‘watch’ (from Latin vigilare ‘keep watch’).

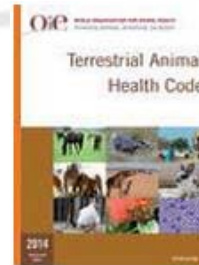


## *Principal requirements*

- *Demonstrating freedom from FMD, FMDV infection and/or FMDV transmission*
- *Early detection and investigation of cases*
- *Demonstrating the effectiveness of vaccination, if practised*

# OIE Standards for FMD surveillance

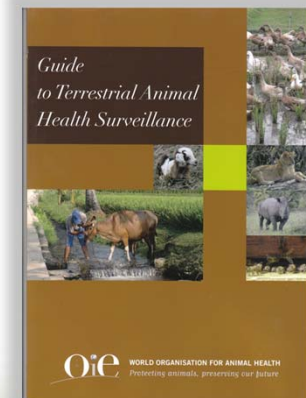
## FMD Code Chapter



Article 8.8.40.	General principles of surveillance
Articles 8.8.41.	Methods of surveillance
Articles 8.8.42.	The use and interpretation of serological tests

## Other standards relevant, not only FMD Code Chapter

Surveillance chapter (1.4.) in Code  
Manual of diagnostic tests and vaccines  
New guide on post vaccination monitoring



## Guideline on Animal Health Surveillance

# Article 8.8.40. General Principles of Surveillance



- Early detection
- Demonstration of freedom
- OIE endorsed official control programme
- Surveillance strategies
- Interpreting results and follow-up of suspicious findings
- Demonstration of vaccination effectiveness

# Article 8.8.41.

## Methods of surveillance (1)

### Clinical surveillance

- Across whole livestock chain
- Legal basis of notification
- Awareness and compensation
- Inspect enough animals often enough
- Document investigations
- Corroborate lab/epidemiological findings
- Limitations
  - Lack of opportunity for inspection
  - Livestock species showing mild signs of disease
  - Vaccination masks disease
  - Insufficient time for disease to be disclosed



# Article 8.8.41.

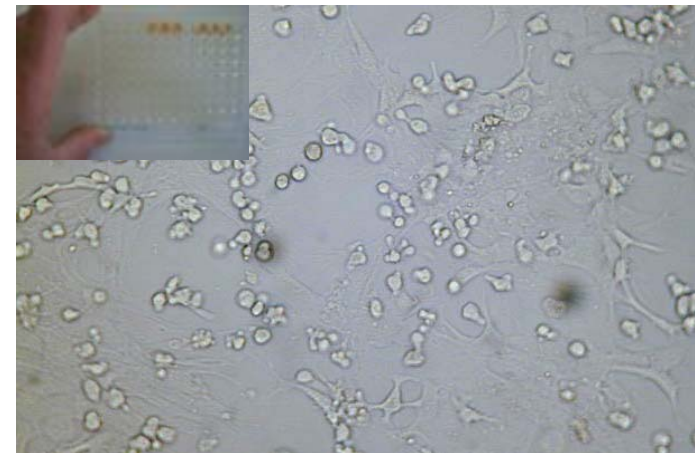
## Methods of surveillance (2)

### Virological surveillance

- Confirm clinically and serologically identified suspect cases
- Characterise isolates for epidemiological studies, vaccine matching and other biological properties
- Monitor populations at risk for the presence and transmission of the virus



Robotic sample preparation for rRT-PCR



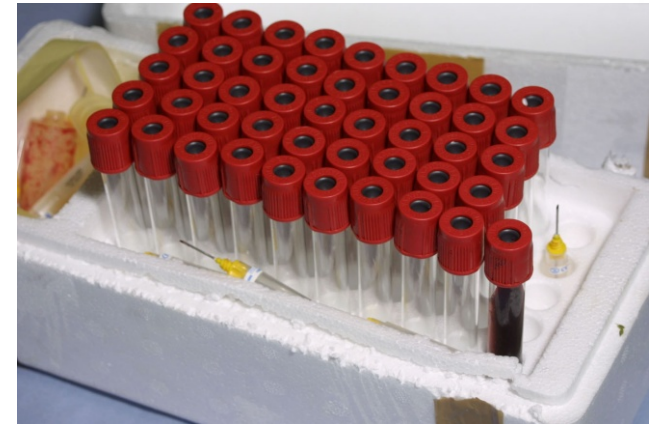
Virus isolation confirmed by Ag ELISA

# Article 8.8.41.

## Methods of surveillance (3)

### Serological surveillance

- Estimate prevalence or substantiate freedom from infection / transmission
- Substantiating freedom should be risk-based
  - When clinical surveillance is unreliable
  - Target high risk populations
    - ✓ Close to borders with infected zones or countries
    - ✓ Enterprises that buy in animals from many/distant sources
    - ✓ Enterprises with shared grazing or transhumance
- Monitor population immunity after vaccination





## The pillars of surveillance

The pillars of the surveillance system of a country wishing to be confident of being and be recognized free from FMD

- Targeted (risk based) ongoing surveillance
- Early detection system
- Disease reporting/notification system
- Monitoring of vaccination



# Early Detection

- Surveillance system under official veterinary control
- Reporting of suspected *cases*
- Expertise in FMD diagnosis and control
- Sampling, submission and testing procedure

# Demonstration of freedom



- Continuing programme required
- Approach tailored to local circumstances
- Risk-based and proportionate

## To substantiate FMD freedom:

Where vaccination is not practised	Demonstrate absence of infection
Where vaccination is practised	Demonstrate absence of transmission
For a compartment	Identify the prevalence, distribution and characteristics of FMD outside the compartment

# OIE endorsed official control programme



- Surveillance should demonstrate the effectiveness of any *vaccination* and of the ability to rapidly detect all FMD *outbreaks*
- Need to establish that the whole territory or part of it is free from FMDV *infection* and transmission and to understand the epidemiology of FMD

# Surveillance strategies

- Randomised / targeted clinical investigation or sampling
- Risk-based approaches
  - Appropriate design prevalence and frequency
  - High versus low risk sub-populations
  - Clinical versus serological surveillance
  - Justification

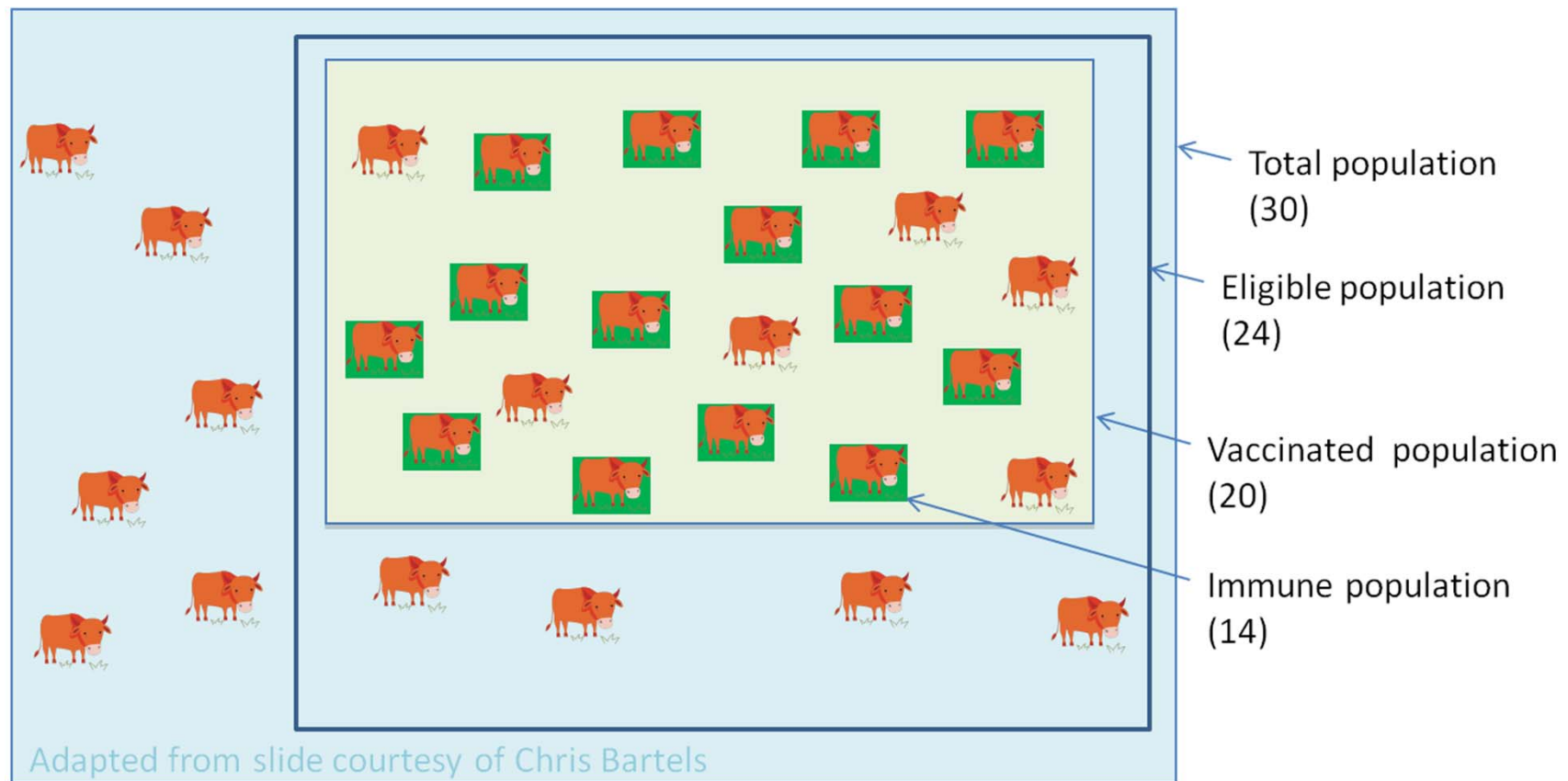
# Interpreting results and follow-up of suspicious findings



- Timely and documented
- Take account of field and laboratory findings
- Take account of test performance characteristics
- Repeat testing and follow-up visits and investigations

# Demonstration of vaccination effectiveness

## *Vaccination coverage and population immunity*



**Vaccine coverage** is 20 out of 24 = 83%

**Vaccinated population** is 20 out of 30 = 67%

**Population immunity amongst vaccinated** is 14 out of 20 = 70%

**Population immunity overall** is 14 out of 30 = 47%\*

\* Ignoring impact of immunity from colostrum, past vaccination or infection

## Article 8.8.42.

### Use & interpretation of serological tests

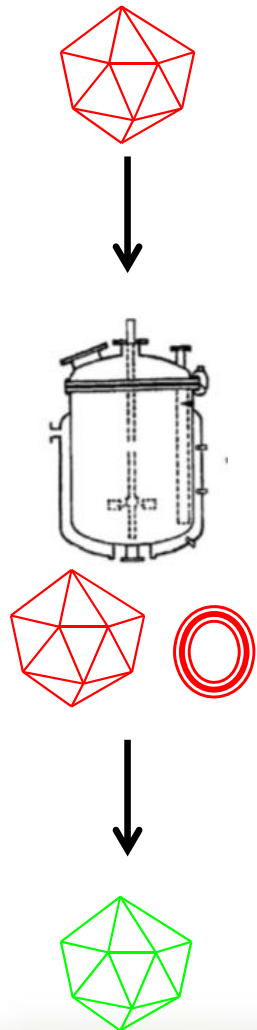


- Tests for antibodies to FMDV structural proteins
- Tests for antibodies to FMDV non-structural proteins
- Causes of positive results
  - Infection
  - Vaccination
  - Maternal antibody
  - Non-specific reactivity
- Follow-up procedures

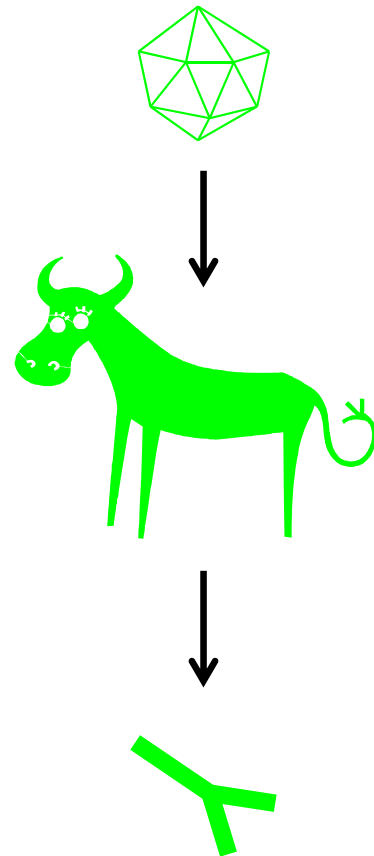


# NSP / SP Serology

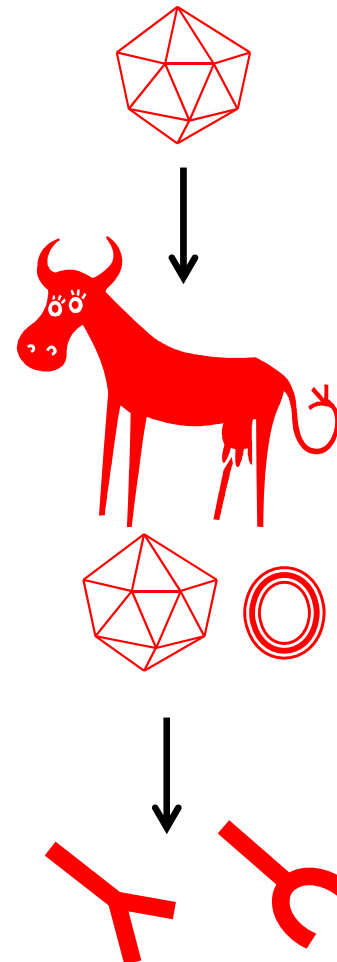
Growth of vaccine virus



Vaccination with purified vaccine



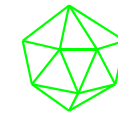
Infection with replicating virus



## KEY TO FIGURE



Live virus



Inactivated purified virus (structural proteins)



Viral non-structural proteins

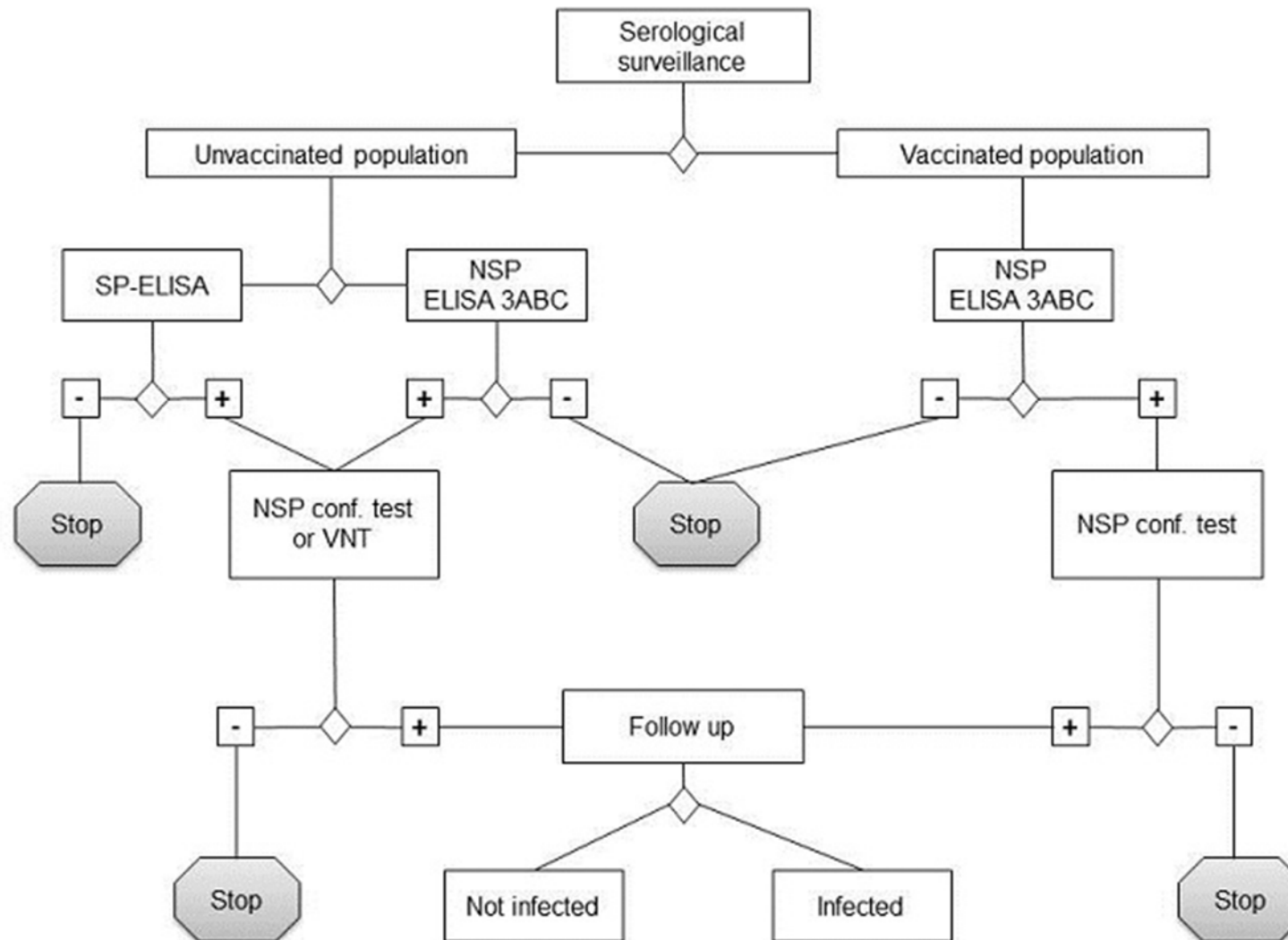


Antibodies to viral structural proteins  
- Serotype-specific  
- Correlate to protection



Antibodies to viral non-structural proteins  
- Pan-serotype reactive  
- Used for DIVA testing

# Lab tests for serological surveys to determine evidence of FMDV infection



# Interpreting NSP seroreactors



- Understand NSP responses to vaccine in use
- Target surveillance to reduce non-specific results
  - Risk based to reduce overall scale of testing
  - Focus on 6-12 month old animals
- Complementary investigations and evidence
  - Disease
  - Epidemiological links
- Number, strength and clustering of sero-reactors
- Repeat testing
- Revisits, re-sampling, retesting, paired tests, virological tests

# Critical issues of surveillance



- It is of crucial importance to REACH AND MAINTAIN freedom from an infection (but also to build up a strong confidence into trading partners)
- The results of any survey are valid only for the point in time in which the survey was performed
- A system operating CONTINUOUSLY on the basis of clear and sound procedures finalized to early detection - and early reaction in case of infection/disease occurrence - provides a more solid and durable confidence on the level of risk for all stakeholders, including trade partners

# Example flow chart for substantiating FMD freedom with NSP tests

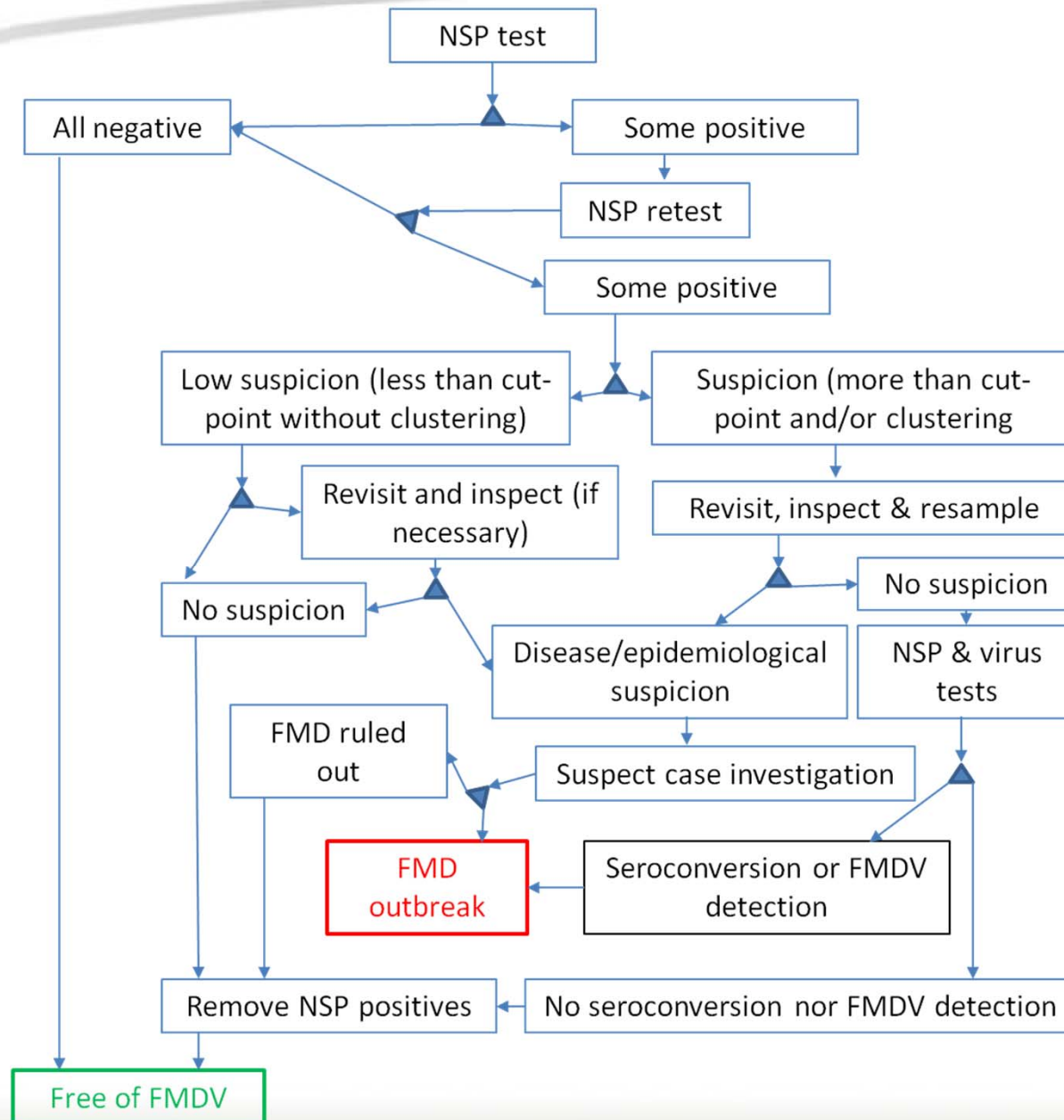


Figure taken from:  
 The use of serosurveys following emergency vaccination, to recover the status of "foot-and-mouth disease free where vaccination is not practised"  
 Paton, Füssel, Vosloo, Dekker, De Clercq (2014) Vaccine, 32: 7050–7056

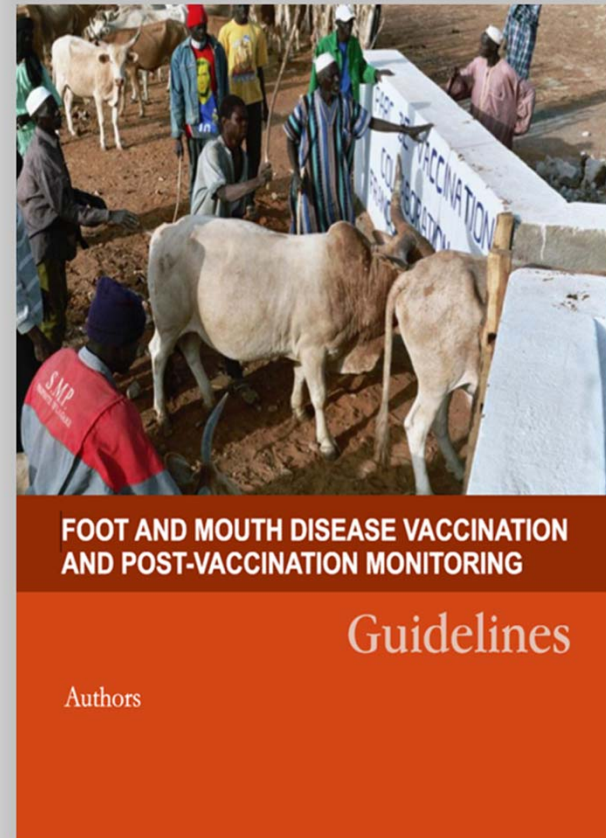
# Evaluating vaccines before and after purchase



- Advice from OIE Reference Laboratories on vaccine selection
- Evidence from vaccine manufacturer – potency and batch release tests
- A pre-purchase study of elicited immunity in a small group of local animals
- A larger study in the field when vaccination is implemented
- Monitoring vaccine coverage and population immunity

# Establishing PVM serology thresholds

- Test for expected response or for protection
- For the former need sera from the vaccine batch produced under controlled conditions
- For the latter - correlate serology with potency test results for homologous protection threshold
- Substitute field virus for vaccine virus in serology test to estimate heterologous protection
- Work closely with the vaccine manufacturer and a reference laboratory



# Conclusions on surveillance

- The main goal of a FMD surveillance system is the management of the control of the disease. The proof of the absence of disease and absence of viral circulation is “consequential
- The use of random surveys as the main mean to prove absence of disease/infection when FMD occurs at very low level of prevalence has severe limitations, in particular in mass vaccinated populations
- Ongoing targeted risk based surveillance is the method of choice in case of low prevalence and clustering as in case of mass vaccinated populations

Acknowledgement: V. Caporale



# Conclusions on surveillance

- When risk based surveillance systems are implemented the use of a proper method to identify risks is mandatory to avoid serious drawbacks
- Surveillance system should involve all stakeholders in an interactive manner
- Field and laboratory veterinarians should operate in an integrated mode and have prompt reciprocal access to data
- No effective surveillance can exist in the absence of a solid veterinary service infrastructure diffusely present in the territory and operating as an integrated system
- Surveillance data should reflect honesty/transparency – also report suspicious findings – not only negatives!

# Thank you for your attention!



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