

Dr Rachid BOUGUEDOUR

OIE Sub-regional Representation for North Africa

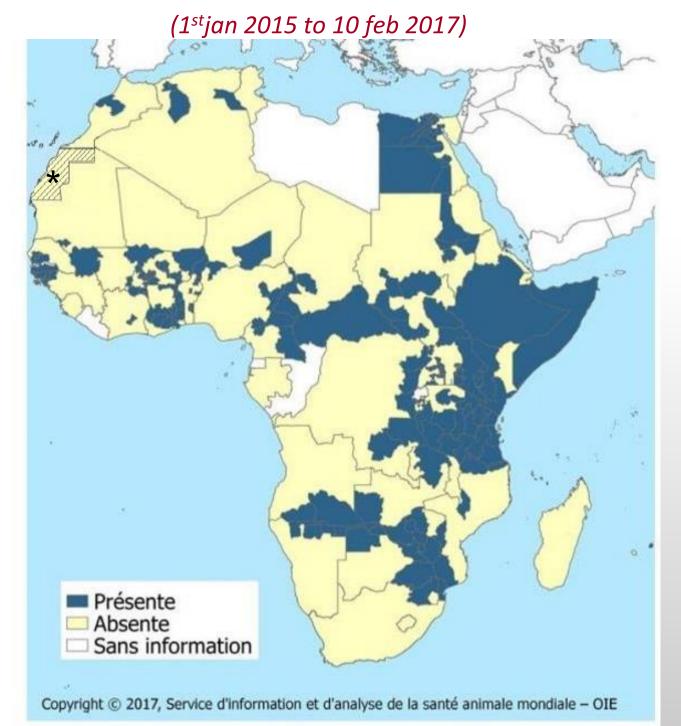
Regional Strategy and Road maps for Foot-and-Mouth-Disease in North Africa

Regional training workshop on the OIE procedures for the endorsement of national official control programmes with regard to foot-and-mouth diseases (FMD) and peste des petits ruminants (PPR)

Kigali (Rwanda) – 18-20 July 2017



Recente distribution of FMD in North Africa



^{*} Data source:
Morocoo

FMD serotypes circulating in the North African region since the 1960s

Country	Year	FMD serotype
	1966, 1990, 1999	0
Algeria	1977- <mark>2017</mark>	А
	2014	0
Libyro	1959, 1960, 1962, 1967, 1968, 1972, 1981, 1982, 1983, 1988, 1989, 1994	O
Libya	1979, 2009	A
	2003	SAT2
	2009, 2013	A-O-SAT2
	1975, 1976	SAT2
Mauritania	1997	А
	2000	0
	1991, 1992, 1999	0
Morocco	1977, 1983	А
	2015	0
	1965, 1967, 1969	С
Tunisia	1970, 1975, 1989, 1990, 1994, 1999	0
	1979, 1982, <mark>2017</mark>	A
	2014	0

- ☐ The strain (O/ME-SA/Ind-2001 serotype O) circulated in 2014 in Tunisia and Algeria was introduced into Libya in 2013 new serotype in the Maghreb Region coming from Middle East
- ☐ The sequencing of this new strain showed that it is distant in the phylogenetic tree from the strain (also serotype O) circulated in Libya in the recent past (2010 2012)
- □ SAT 2 was notified by Mauritania. The last notification of FMD in Mauritania was in 2006

Major key elements

FMD epidemic 2014/2015: the phylogenetic analysis of the viral isolates identified that:
D Thorowas a unique introduction in North Africa since all
☐ There was a unique introduction in North Africa since all
Libyan isolates share a common ancestor (Jul 2013);
☐ There was a unique introduction from Libya into the so-
called "Little Maghreb" (common ancestor beginning
2014);
☐ Tunisian field viruses evolved on different branches;
☐ Two different introductions into Algeria between the
epidemics occurred in 2014 and 2015



Potential pathway of the introduction of FMD strain O/ME-SA/Ind-2001 in Libya in 2013 from the Indian Continent based on the epidemiological investigation carried out by the Libyan Veterinary Authority and subsequent spreading to Tunisia, Algeria and Morocco

Report on FMDV O in Morocco in 2015

Batch: WRLFMD/2015/00030

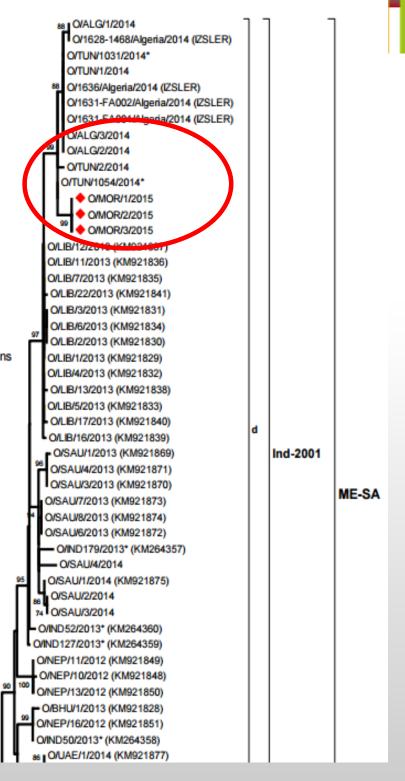


indicates viruses in this batch

Software: MEGA 6.06
Analysis
Analysis Phylogeny Reconstruction
Scope All Selected Taxa
Statistical Method Neighbor-joining
Phylogeny Test
Test of Phylogeny Bootstrap method
No. of Bootstrap Replications 1000
Substitution Model
Substitutions Type Nucleotide
Model/Method Kimura 2-parameter model
Substitutions to Include d: Transitions + Transversion
Rates and Patterns
Rates among Sites Uniform rates
Pattern among Lineages Same (Homogeneous)
Data Subset to Use
Gaps/Missing Data Treatment Pairwise deletion
Codons Included 1st+2nd+3rd+Non-Coding
No. of Sites: 642
No Of Bootstrap Reps = 1000
Only bootstrap values of 70% and above are shown
,
*, not a WRLFMD Ref. No.

N.J. Knowles, J. Wadsworth & K. Bachanek-Bankowska. 20 November 2015

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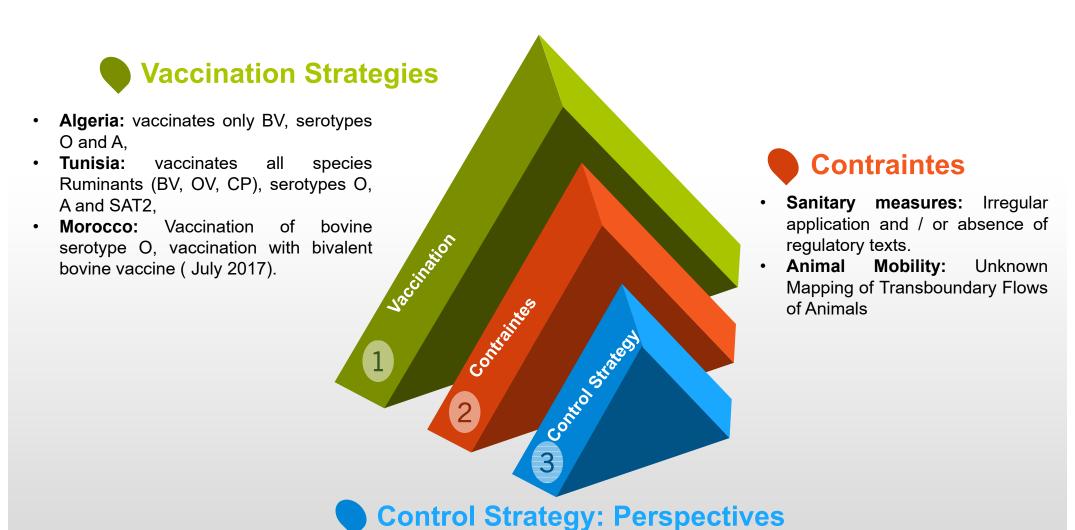
Lessons learnt from the 2014/2015 FMD epidemic

☐ Difficulties were encountered in controlling animal movements between the		
countries and within the countries;		
No financial compensation mechanisms available in Tunisia to implement the		
stamping-out;		
☐ Difficulties were faced when dealing with animal traders;		
lacksquare Difficulties in having immediate availability of appropriate vaccine for some		
countries that were ready to pay for it (e.g. Algeria and Morocco);		
lacksquare Difficulties in implementing regular active surveillance in the affected		
countries which is needed in such cases;		
☐ Challenges related to the political instability in the region		

- Progressive deterioration of the epidemiological situation in North Africa region
- Control in North Africa requires a subregional approach, due to the diversity of coexisting epidemiological situations
- The OIE encourages countries in the Region to share precise data on the disease and its control via WAHIS

Conclusion...

Heterogeneous nature of implementation of the control strategy....



- FMD context in the region generates a complex apprehension of the problem;
- Harmonize the control strategy between the countries of the Maghreb in order to prevent FMD from becoming enzootic.

OIE Endorsement

of national official control programmes with regard to FMD

- -Application forms were done jointly with Tunisia Algeria and Morocco while **respecting the specificities** of the country control programs.
- -Several meetings directed by OIE sub-regional representation were held in Tunisia with the participation of **CVOs of 3 countries** for the preparation of the dossiers.
- -Endorsement of the control program at the general session in **May 2012.**
- -Annual reconfirmation in November for the maintenance of the validation of the program

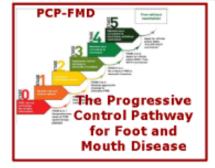
<u>Tools</u>

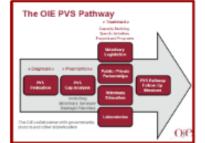
OIE standards new article in the Terr. Code

Surveillance systems



Laboratories



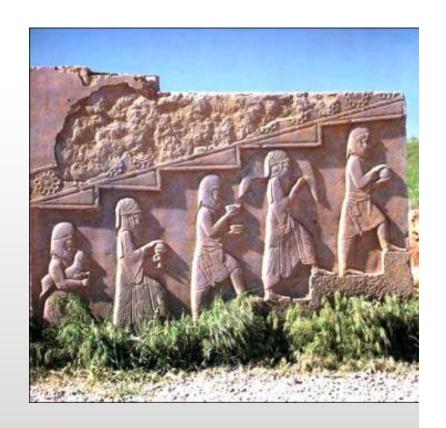


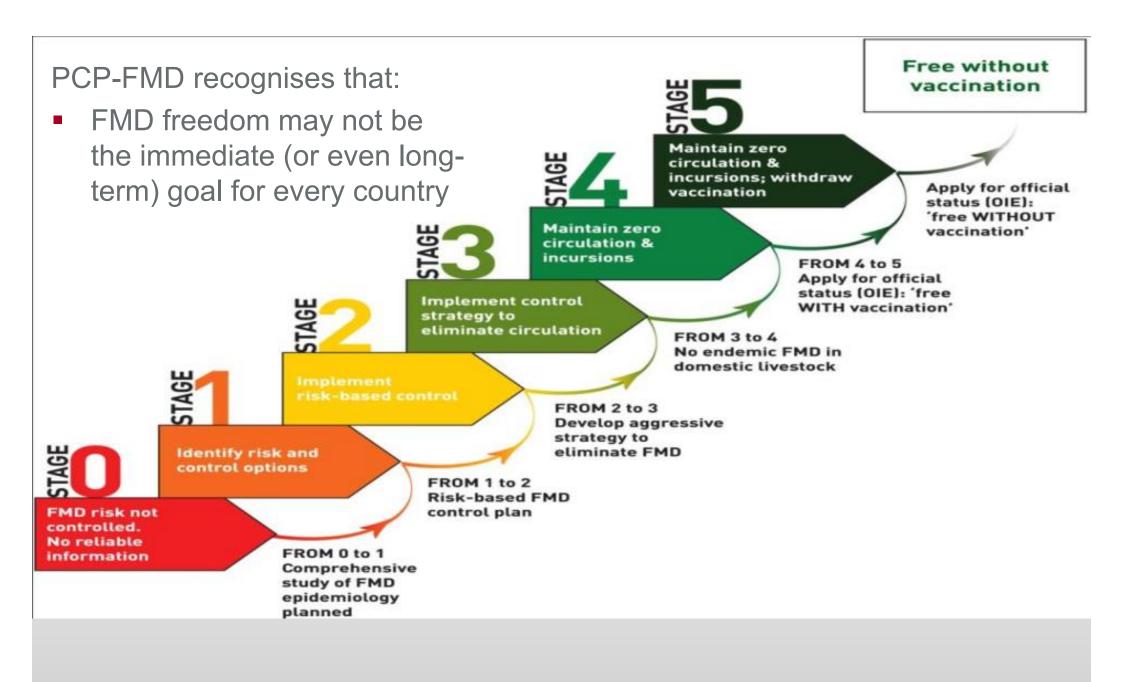
Vaccines



PCP Principles

- Active monitoring for FMD <u>circulation</u> and understanding the <u>epidemiology</u> of FMD
- Appropriate activities in each stage to <u>reduce</u> <u>virus circulation</u> and <u>mitigate disease risk</u>
- Measurable activities and impacts in each stage; generate information and potential benefits to national and international stakeholders
- Optimization of resource use for FMD control





OIE Endorsement

of national official control programmes with regard to FMD

Program performance indicators:

- Clinical surveillance and serological monitoring
- Clinical suspicions cases reported
- Inter-laboratory trials
- Animal identification systems

Significant changes:

- ■In 2014: New incursion of FMD in the region...
- ■In 2015: Re-start of vaccination for Morocco...
- ■Withrawal of the endorsed official control program for Tunisia and Algeria because the incidence of FMD could not be addressed by the program.







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