GF-TADs Africa

GLOBAL FRAMEWORK FOR THE
PROGRESSIVE CONTROL OF
TRANSBOUNDARY ANIMAL DISEASES

Food and Agriculture
Organization of the
United Nations

World Organisation
for Animal Health
Founded as OIE

African
Union

RSC 12

Highly Pathogenic Avian Influenza (HPAI)

- Dr. Anna Rose Ademun
- Uganda

RSC 12

Introduction – Location of Uganda in Africa

Fig 1: Map of Africa showing Uganda's location

RSC 12

Background

- Over 4.8 Million households in Uganda keep poultry (UBOS 2021)
- Increased human population and reduced land holding is forcing a gradual shift of Commercial exotic poultry production from Urban and Peri-urban areas to the rural areas
- Highly Pathogenic Avian Influenza (HPAI) potentially threatens the poultry industry and public health.

Uganda's Poultry population [UBOS, 2021].

Species	Population
Chicken	57.8 Million
Ducks	3.3 Million
Turkeys	737,000
Geese	67,000
Guinea fowls	156,000

RSC 12

Background – Migratory bird flyways

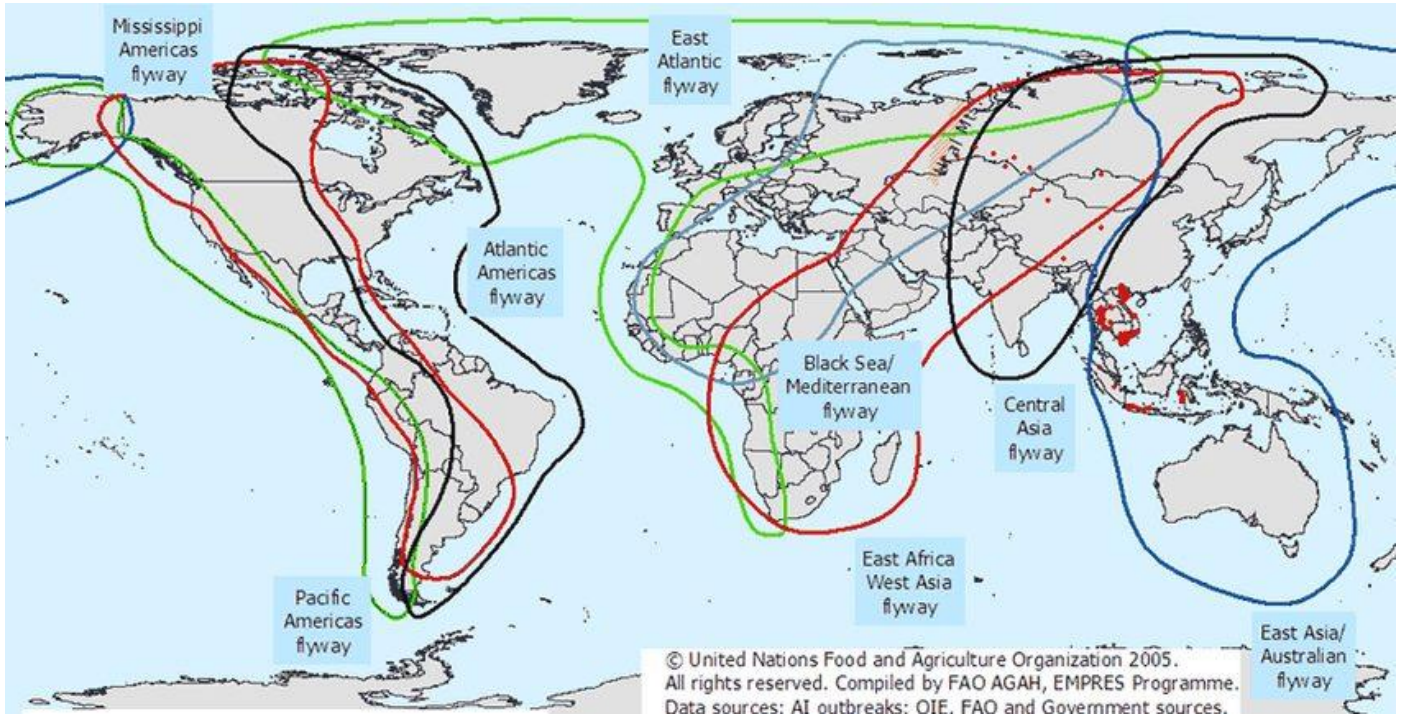

Fig 2: Migrtory bird flyways

- Uganda is located in two migratory bird flyways: the East Africa-West Asia and the Black Sea/Mediterranean flyways
- Seasonal migratory birds usually come to Uganda between Oct- April
- HPAI outbreak in 2017 was introduced by migratory birds

RSC 12

HPAI in Uganda

- The first ever outbreak of HPAI (H5N8 strain) in Uganda was confirmed in January 2017
- It involved massive deaths of migratory wild birds particularly the black winged white terns (approx. 10,000) in three sites namely Bukakata in Masaka district, Lutembe beach in Wakiso district and Kalangala district.
- In Kalangala and Masaka, domestic ducks and chicken kept by fishermen were affected
- The HPAI outbreak did not spill over from the 3 sites at the Lake shores to the commercial poultry sector due to location being >50 Km from the shores; and high-level biosecurity.
- Genetic analysis revealed that the virus clusters with 2.3.4.4 group B strains from birds in central and southern Asia, and thus forms part of the 2.3.4.4 group B clade

Fig 3: Map of Uganda showing Bukakata, Bubeke and Lutembe Landing sites in Masaka, Kalangala and Wakiso Districts respectively where initial H5N8 outbreak was reported in both migratory and domestic birds

RSC 12

Response to 2017 HPAI outbreak in Uganda

1. Surveillance and outbreak investigation

- Passive and active surveillance were intensified in affected and neighbouring districts using risk-based surveillance
- A One Health approach was used
- All districts were requested to be on high alert and report any suspicions of birds die offs to MAAIF
- Surveillance targeted both domestic and wild birds
- Heightened surveillance in the high-risk districts until August 2017 during which period, no laboratory confirmed cases of HPAI were detected
- Currently there is no epidemiological evidence suggesting establishment of endemicity of HPAI in Uganda

RSC 12

Response to 2017 HPAI outbreak in Uganda

Fig 4: MAAIF and District teams collecting samples from birds

Fig 5: Communities presenting sick birds to the investigation team

RSC 12

Response to 2017 HPAI outbreak in Uganda

- **2. Movement Control**
- MAAIF cordoned off the affected areas and instituted strict movement control of poultry and poultry products from the affected areas
- Quarantine restrictions were imposed on affected sub-counties in Kalangala, Masaka and Wakiso districts.
- Check points were mounted on all major roads to the outbreak areas to limit movement of poultry and poultry products
- Veterinary Officers were issued with guidelines on movement restrictions

RSC 12

Response to 2017 HPAI outbreak in Uganda

3. Laboratory confirmation

All samples collected were tested at;

- National Animal Disease Diagnostic Centre (NADDEC) of MAAIF for domestic and wildlife samples
- Uganda Virus Research Institute of MOH
- World Reference Laboratory Padova Italy

RSC 12

Response to 2017 HPAI outbreak in Uganda

4. Biosecurity

- Strengthened on-farm biosecurity on all poultry farms especially commercial and breeder farms
- Distributed biosecurity protocols and guidelines to stakeholders
- Disinfection at check points
- Use of PPEs

5. Communication

- Sensitisation of the communities in all affected districts and all neighbouring countries using multi-sectoral teams
- Sensitization through press releases, print media, TV and Radio talk-shows, radio spots
- Alert Desk and hotline

RSC 12

Response to 2017 HPAI outbreak in Uganda

6. Coordination

- Multisectoral National Task Force held meetings daily to coordinate the response actions
- At Local Government Level-District Disaster Management Committees
- National Rapid Response Teams under the One Health Framework and District Rapid Response Teams carried out the outbreak investigation
- Revised the Highly Pathogenic Avian Influenza National Preparedness and Response Plan of 2007 -→ National Avian Influenza Response Plan of 2017
- Resources Mobilisation

RSC 12

Response to 2017 HPAI outbreak in Uganda

7. Declaration of freedom of disease

- In May 2017 the GoU reported to the WOAH (then OIE) and requested to close the outbreak and declare Uganda free of HPAI
- The OIE recommended that since the mandatory 3 months of no cases of HPAI were over, Uganda should undertake bilateral discussions with trade partners to lift trade sanctions

RSC 12

Current activities

- Passive and risk-based active surveillance along the shores of all water bodies in Uganda where Migratory birds are known to rest and along their migratory routes.
- The HPAI risk-based surveillance plan was finalized and awaiting approval.
- Restricted importation of chicks from high-risk countries

RSC 12

Current activities

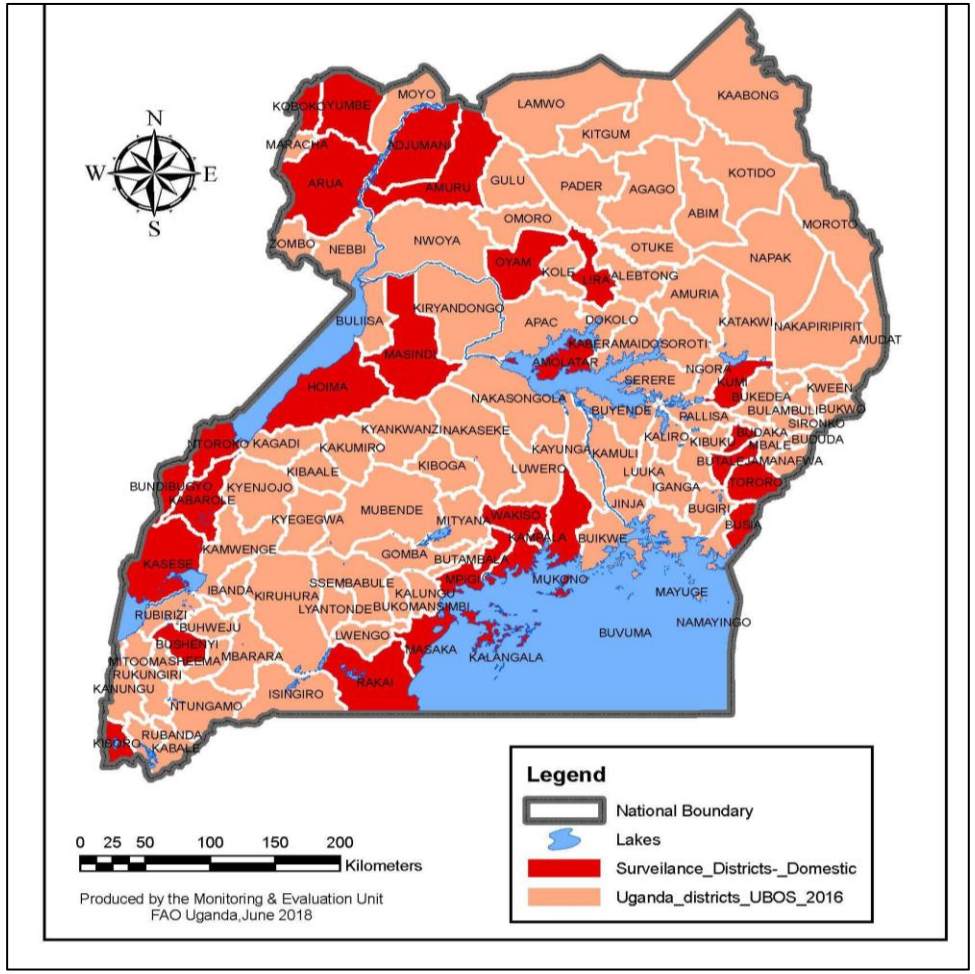

Fig 6: Districts earmarked for active surveillance in the surveillance plan

- Districts near water bodies
- Boarder districts

RSC 12

Conclusion

- Successful control of HPAI requires concerted efforts (Central government, local governments, Development partners, Implementing partners, poultry producers, multisectoral approach)
- There was a high level of collaboration and support from the President, Ministers, local government, regional and international partners and the private sector, particularly the Uganda Poultry Farmers' Association
- HPAI was successfully controlled in Uganda, the last confirmed case of HPAI (H5N8) being on 27th February 2017.
- Sustained surveillance has been going on to date but all specimens collected from both domestic and wild birds have tested negative

RSC 12

Conclusion

- High level of support from international partners, including FAO, USAID; WHO; CDC; the IAEA; the OIE; and the AU-IBAR.
- Collaboration from neighboring countries (i.e. Kenya, Tanzania, South Sudan, Rwanda and the Democratic Republic of the Congo), especially Kenya and South Sudan which sent high-level delegations to Uganda
- The Government of Uganda exhibited a high level of transparency and open communication by publicly announcing the outbreak at a joint press conference given by the MAAIF and the MOH, and reporting it to the OIE and WHO one day after the initial diagnosis

RSC 12

Recommendation

- There is need for a regional project to support the current Country efforts
- Need for finalization, approval and operationalization of Uganda's compensation policy;
- Need for the provision of emergency funds

GF-TADs Africa

GLOBAL FRAMEWORK FOR THE PROGRESSIVE CONTROL OF TRANSBOUNDARY ANIMAL DISEASES

Food and Agriculture Organization of the United Nations

World Organisation for Animal Health
Founded as OIE

African Union