



## Group working session: Surveillance for priority diseases in the region - FMD



REPIVET–RESEPA workshop: Epidemiology and surveillance of animal diseases  
Tunis 1-2 December 2015



**Objectives:** outbreak investigation (what to do under suspicions and when the outbreak is confirmed), sampling, traceability, *etc.*

**Outcomes:** 1. outbreak investigation protocol  
2. epidemiological questionnaire.

**Facilitators:** English speaking group: C. Pöttsch (lead)  
French speaking group: S. Chedia





# Group work part 1: Outbreak investigation protocol

## Tasks:

**1. Define and prioritise risk hotspots (high risk populations, high risk practices) for:**

- **FMD entry into your country**
- **FMD spread in your country**

**Risk hotspots should be specified**

- (1) Common hotspots for the country cluster**
- (2) Specific hotspots for individual countries if necessary**



# Group work part 1: Outbreak investigation protocol

## Tasks (cont.):

### 2. Outbreak investigation (OI) protocol – see table

- Objectives of OI
- Case definitions in OI
- Triggers for OI – in which situations are OI conducted (e.g. suspicions, confirmed cases)
- Scope, frequency and prioritisation of OI (e.g. in epidemic and endemic situations)
- Institutions which conduct/lead OI
- Methods of OI
- Reporting and use of the results of OI

### 3. Recommendations for improving the current system of OI, incl. regional cooperation



## **Group work part 2: Epidemiological questionnaire**

**1. Identify the main topics to be covered in an epidemiological questionnaire for FMD outbreak investigation (OI)**

**2. Present the outline of the epidemiological questionnaire**

- You can use your national OI forms and the EuFMD template
- Include:
  - timeline template
  - forms on clinical investigation and sampling
  - Risk assessment of possible sources and spread
  - priorities for OI in epidemic and endemic situations if necessary
  - plan on further actions



## Animal examination and sampling form

no	animal ID	species and sex <sup>1</sup>	age <sup>1</sup>	clinical signs						type of lesions							samples taken <sup>5</sup>	vaccination status <sup>1</sup>	estimated age of the oldest lesions		
				lameness	fever <sup>2</sup>	salivation	foot <sup>3</sup>	mouth <sup>4</sup>	teats	intact vesicle	recently ruptured vesicle	raw eroded area	ulcer with fibrinous scab	ulcer with fibrosis	break corneas						
1	12344567	bov / M	7 months	-	NT	-	-	-	-	-	-	-	-	-	-	B - S	not reported				
2	12324567	bov / M	not known	-	NT	-	-	-	-	-	-	-	-	-	-	B - S	not reported				
3	12234567	bov / M	7 months	-	NT	-	-	-	-	-	-	-	-	-	-	B	not reported				
4	12234567	bov / F	1.5 year	-	NT	+	-	LTD	-	-	-	+	+	-	B	not reported	6 to 7 days				
5	12334567	bov / F	1.3 year	+	NT	+	C	G	-	-	-	+	-	-	B	10.2008	5 to 6 days				
6	12344567	bov / F	1.3 year	+	NT	+	I	LG	-	-	+	(I)	-	+	(M)	-	B - E	10.2008	7 days		
7	12345567	bov / F	1.5 year	+	NT	+	-	MLD	-	-	-	-	+	-	-	B - S - E	not reported	5 to 6 days			
8	12345667	bov / F	1.3 year	+	NT	+	I	L	-	-	-	-	-	+	-	B	10.2008	7 days			
9	12345677	bov / F	1.3 year	-	NT	+	-	ML	-	-	-	-	-	+	-	B	10.2008	7 days			
10	12345678	bov / F	1.3 year	+	NT	+	I	LTD	-	-	-	+	(I)	+	(T)	+	(D)	-	B	10.2008	7 days
11	not identified	bov / M	not known	-	NT	-	-	-	-	-	-	-	-	-	+	?	-	B - P	not reported	7 to 10 days	

<sup>1</sup> information retrieved from the livestock information system

<sup>2</sup> NT: not tested (animals did not appear to have fever)

<sup>3</sup> foot: Coronary band – Inter-digital space / <sup>4</sup> mouth: Muzzle - Lips - Gums - Tongue - Dental pad / <sup>5</sup> samples: Blood - Saliva - Vesicle fluid - Epithelium - Probang sample



# Timeline of events - Signs of FMD and diagnostic detection

age of lesions

expected virus excretion

expected fever

detection with PCR on blood

detection with LFD

detection with Ag ELISA

detection with NSP ELISA



Red = most likely time frame of detection

Yellow = likely time frame of detection

Pale yellow = less likely time frame of detection



## Focus of OI in PCP stages 1 - 3

	Stage 1 FOCUS	Stage 2 FOCUS	Stage 3 FOCUS
	Getting an understanding about FMD virus transmission and impact	Implementation risk-based control to reduce impact of clinical FMD	Implementation control targeted at eliminating FMD virus circulation
<b>Sampling for confirmation</b>	Relevant	Relevant	Relevant
<b>Identification of routes of introduction and spread</b>	Gaining a <u>general understanding</u> about routes of introduction and spread	Gaining a <u>progressively better understanding</u> about routes of introduction and spread	Detection of source, and follow-up of onwards routes of spread
<b>Raising awareness and local response</b>	Awareness raising to support local response	Awareness raising to support local response	Response under responsibility of competent authority
<b>Assessing disease and economic impact of FMD</b>	Getting a <u>general understanding</u> of morbidity, mortality, treatment costs	Getting a <u>progressively better understanding</u> of morbidity, mortality, treatment costs	Every outbreak to be fully documented
<b>Getting a deeper understanding – testing assumptions</b>	Optional	Getting a <u>progressively better understanding</u> about risk factors, vaccine effectiveness and infection spread – means of M&E	Every outbreak requires full investigation into risks, spread and vaccination effectiveness





# Outbreak investigations can also help to:

## Identify risk factors for FMD introduction and spread

- comparing cases and non-cases on household or village level (pasture use, common grazing/watering, vaccination, dangerous contacts [markets, dealers], etc.)

## Understand subclinical spread of FMD

- NSP survey



## Improve vaccination programmes

- Sampling: matching vaccine strain with field virus
- Education of animal owners
- Measure vaccination effectiveness
- improve vaccination coverage
- Measure duration of protection after vaccination
- Application of biosafety of vaccinators



## **OI in FMD endemic countries?**

**YES!**

- better **understanding of the epidemiology** of FMD and progressively **improve control** (risk based)
- identify **risk hotspots** (production systems, animal populations, main animal movements, seasons, etc.) - **OI** in systems where priority control is targeted
- identify **risk factors**, estimate effectiveness of **vaccination programs**, FMD morbidity and mortality, cost of vaccination
- **OI** can guide **serological surveys** and vice versa



# EUFMD

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3 PILLARS of  
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# Timeline (from earliest to last event)

- try to identify the oldest lesion in the epidemiological unit;
- the date of entry of infection (up to 14 days previously)
- which events in this 14 day period may explain the entry of infection, e.g. entry of contaminated animals, or vehicles, and the most likely sources identified.
- identify the serotype involved in, on the outbreak (aim - within 24 hours in the national lab or within 5 days by an international lab)
- Measures, e.g. ring vaccination with the involved serotype