



21ST CONFERENCE OF THE OIE REGIONAL COMMISSION FOR AFRICA

RABAT, MOROCCO, 17 – 20 FEBRUARY 2015

**OIE TERRESTRIAL ANIMAL HEALTH STANDARDS COMMISSION AND THE
SCIENTIFIC COMMISSION FOR ANIMAL DISEASES
ISSUES OF INTEREST TO THE REGION – CHALLENGES AND
PROPOSALS**

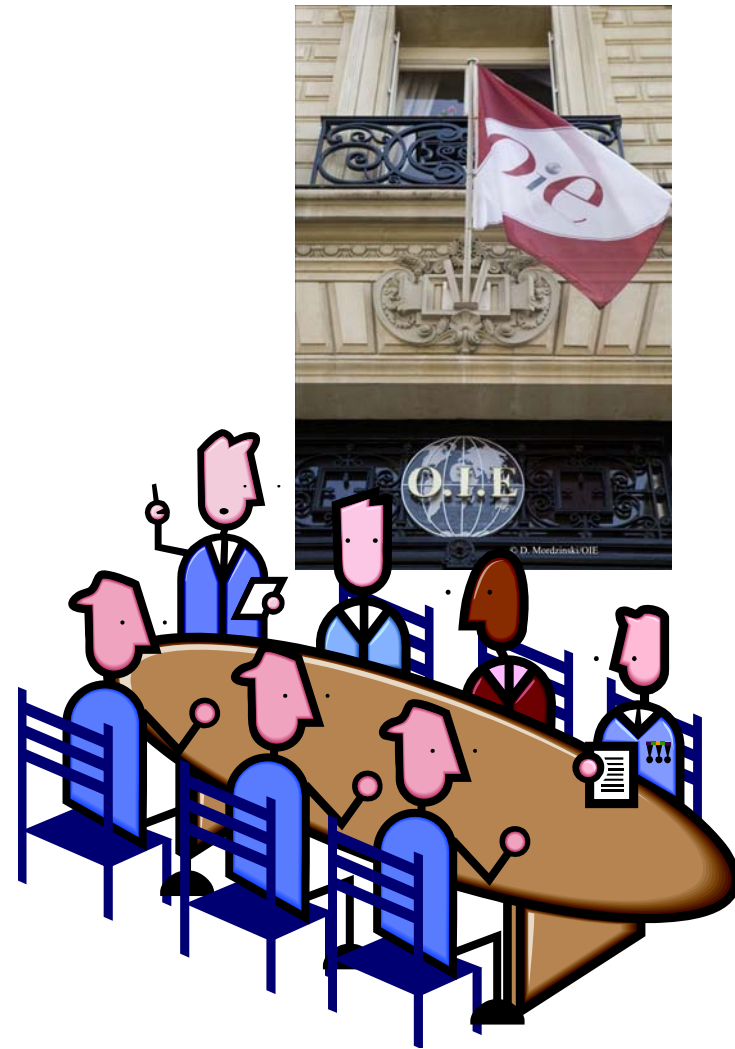
Gideon Brückner

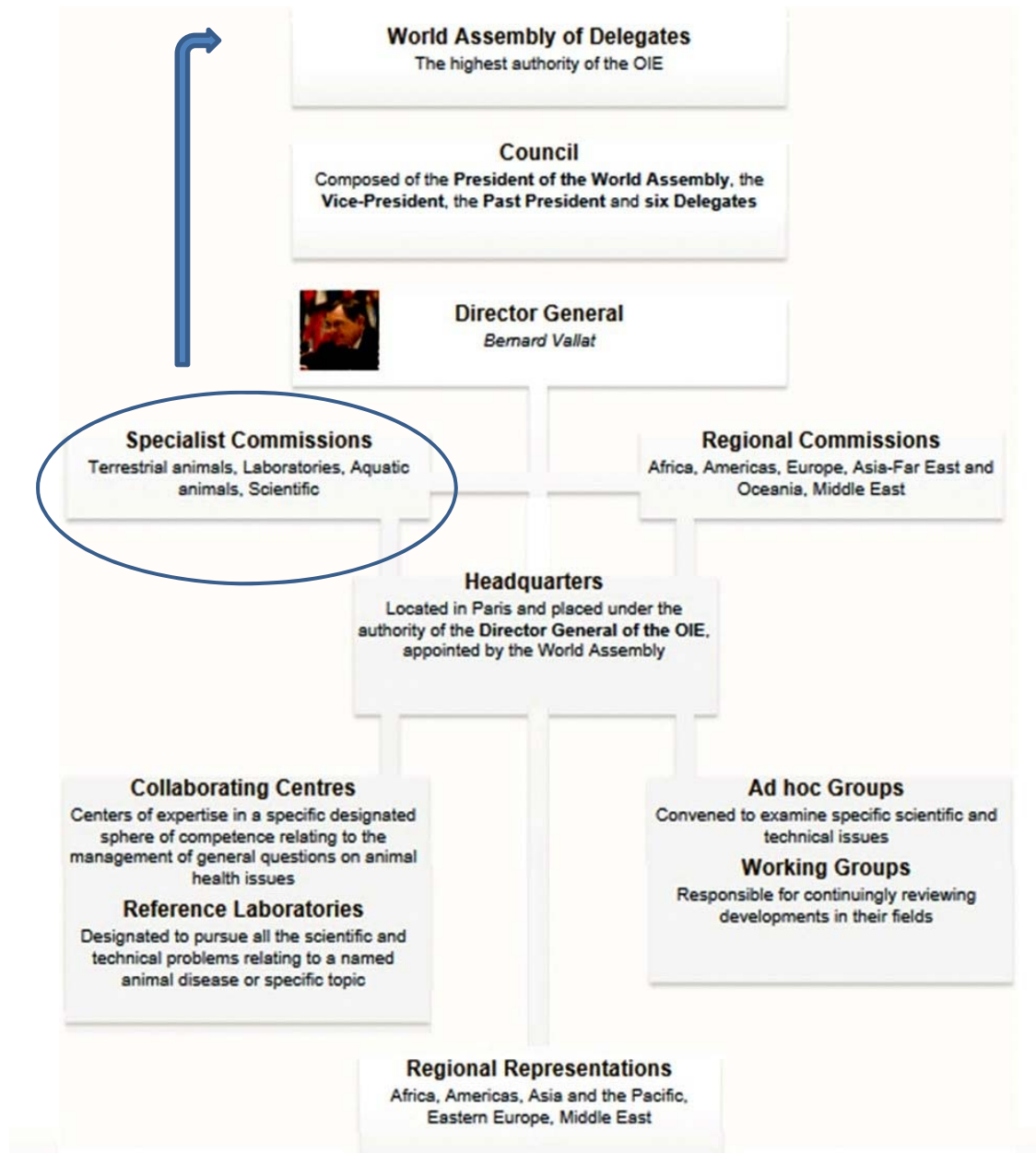
President OIE Scientific Commission for Animal Diseases



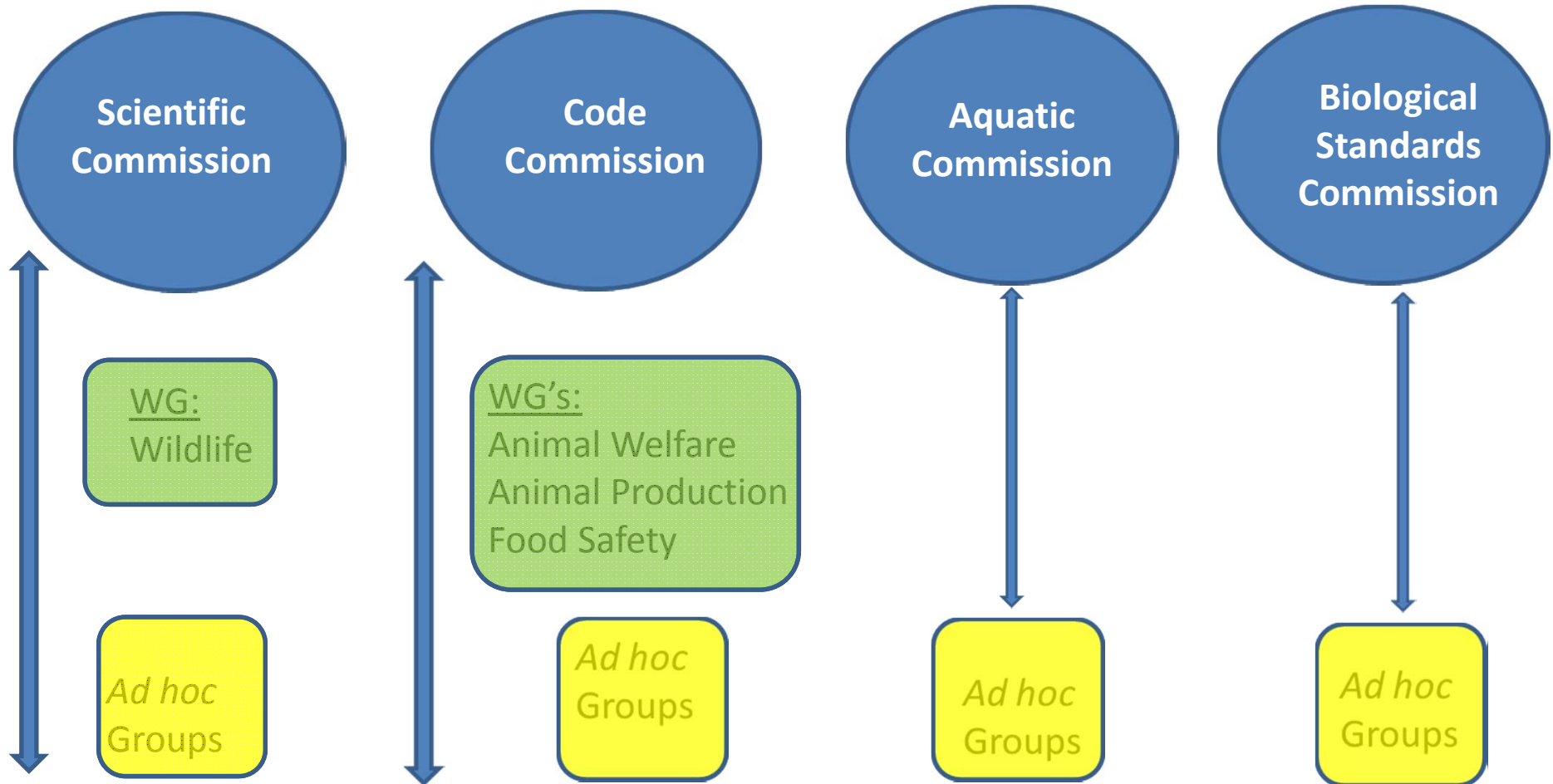
OIE Scientific Commission (SCAD) and the Code Commission

- SCAD established in 1946 and Code Commission in 1960
- SCAD previously known as the “*Foot and mouth disease and other Epizootics Commission*”
- Elected by and responsible to the OIE World Assembly of Delegates (180 Member Countries)
- Both Commissions have 6 members – President, 2 Vice Presidents and 3 members
- Elected for a period of 3 years – can be re-elected





The four specialist commissions



Main responsibilities of the Scientific Commission

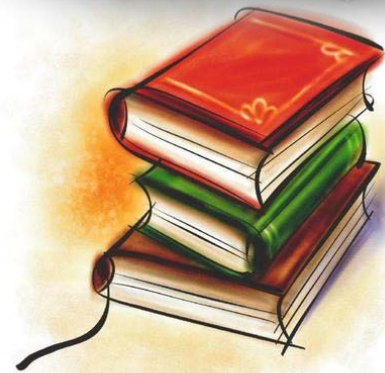
- To provide a scientific rationale for OIE international standards on terrestrial animal health
- To assess compliance of Member Countries for official OIE disease free status (FMD, CBPP, BSE, AHS, CSF, PPR)
- To assess official disease control programs for official OIE endorsement (FMD, PPR and CBPP)
- To conduct missions to Member Countries to assess maintenance of compliance, assist to advance towards freedom
- To recommend allocation of free status or withdrawal of a given free status
- To assess with the Code Commission the possible impact of emerging animal diseases and provide scientific guidance to the OIE
- Facilitation of the global control programs for FMD and PPR

Main responsibilities of the Terrestrial Code Commission

- Responsible for updating the *Terrestrial Animal Health Code* annually
- Proposes new standards for adoption by the World Assembly of Delegates
- Responsible for ensuring that the Code reflects current scientific information
- To assess with the Scientific Commission the possible impact of emerging animal diseases and provide scientific guidance to the OIE

Important administrative issues related to Scientific and Code Commissions

- Meet in February and September each year
- Comments on Code Commission reports August and January and then verbal at GS
- Scientific Commission do not send out draft/amended Code Chapters
- Must read Code Commission report with Scientific Commission report and *ad hoc* Group reports with rationale for proposed changes



Important issues relevant for Africa attended to by both Commissions in 2014/2015

- Amended chapter on FMD
- Review of criteria for listing diseases
- Review of the BSE chapter in view of cases of atypical BSE
- Further refinement of the HHS (High Health Status horse populations) & model health certificate
- New chapter on PRRS
- Amended chapter on Glanders
- Animal welfare (Dairy production systems)
- Need for Code chapter on vaccination

Important issues relevant for Africa attended to by both Commissions in 2014/2015

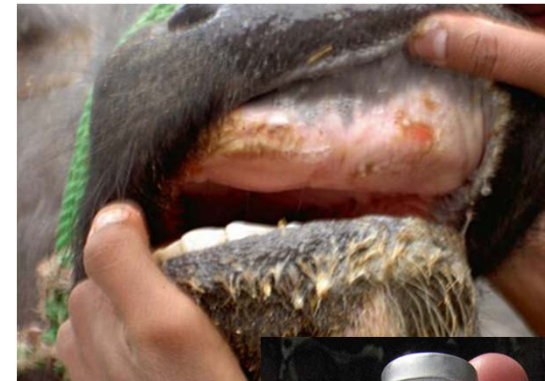
- New and amended definitions for the *glossary*
 - *Biosecurity*
 - *Stamping-out policy*
 - *Safe commodities*
- Proposed new chapter on the welfare of working equids

Response of Africa Delegates for 2015 General Session

- Reports of the two Commissions will be available within the next 2 to 3 weeks in preparation for GS
- Meeting of Technical Committee to assist in preparing interventions for GS (April)
- Meeting of OIE Delegates to formulate common position for GS (early May)

Foot and mouth disease

- Urgent need to be presented for adoption in May 2015 – support of Africa
- February 2015 – finally reviewed comments – special meeting AHG and both Commissions – minor amendments
- Time limit for containment zone and recovery of status
- Cattle coming from African buffalo environment – quarantine
- Confusion OIE endorsed program and official control program
- Final amended chapter will be circulated with February report of the Code Commission



BSE

- *Ad hoc* Group requested to review Code chapter to differentiate between classical and atypical BSE
- Now more clear that current chapter only refers to classical BSE
- Already problems in Member Countries (3) that had negligible BSE risk now lost their status – time period of 11 years
- Still need to consider public health concerns
- Cannot now change surveillance guidelines – will affect risk status of some Member Countries
- Urgency in getting changes adopted (1 year cycle?)
- Already discussed between the two Commissions



Criteria for listing diseases

- Request at 82nd GS by Member Countries
- DG convened *ad hoc* Group
- *Ad hoc* Group (representing 3 Commissions) reviewed current criteria
- Harmonisation between Terrestrial Code and Aquatic Code
- Listed diseases in a separate chapter
- No changes in listing criteria
- No new diseases will be considered for delisting until new criteria adopted at GS

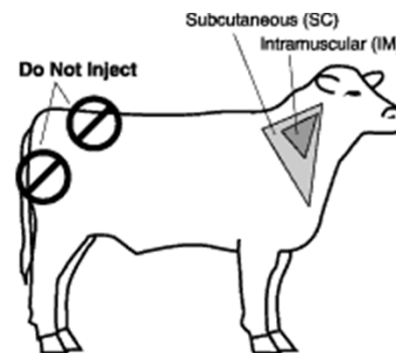
High health status (HHS) horses

- Several Member Country comments
- Chapter adopted at 82nd GS only to introduce concept – not detail
- Commitment by OIE to propagate and advance this concept – Olympic Games
- Biosecurity, management and other guidelines to be developed
- Recognise concerns of Delegates to be “dictated by private sector”
- Both Commissions considered comments
- Also reviewed model health certificate
- Provision has been made to accommodate horses from AHS infected countries (request from Africa)

Need for a Code chapter on vaccination: clarity and understanding of terminology

- Use and quality of vaccines currently described in *Manual* but not vaccination strategies /application
- No consistency between *Code* and *Manual*
- Several terms used in both the *Code* and *Manual* in relation to vaccination strategies but interpreted differently:

- Systemic vaccination
- Emergency vaccination
- Strategic vaccination
- Routine vaccination
- Ring vaccination
- Vaccination to live



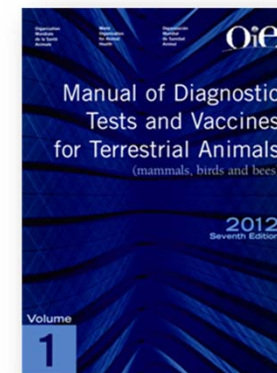
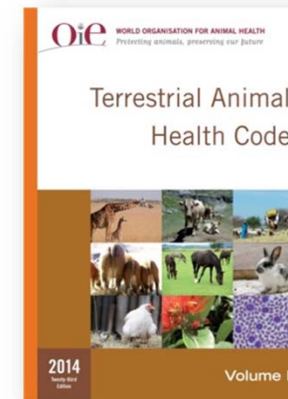
Evaluations of country applications for OIE disease status recognition

- The total number of applications evaluated (55):
 - FMD: **15** (5 Country status, 2 for zonal status, 5 for endorsement of official control programs, 1 for change of zones, 2 for maintenance of control program)
 - CBPP: **2** (1 Country status application, 1 endorsement of program)
 - AHS: **2** (1 Country freedom, 1 for zonal status)
 - BSE: **6** applications for risk status allocation + **2** for lost status
 - PPR: **5** (4 Country status, 1 zonal status)
 - CSF: **25** (24 Country status, 1 zonal status)

Total applications: 55

The OIE Codes and Manuals: Adopted standards for official disease status recognition

- **Terrestrial Animal Health Code**
- **Manual of Diagnostic Tests and Vaccines for Terrestrial Animals**
- **Evolved from recognition of country freedom - > zonal freedom - > compartment**
- **Containment zone**
- **Main thrust is trade facilitation**



The OIE disease status recognition process

- **Two categories of disease status recognition:**
 - Official – endorsed by Resolution at OIE Annual General Assembly – published on OIE website
 - Self-declaration – no official status – published in *Bulletin* of OIE
- **Official disease status recognition:**
 - FMD – 1995
 - Rinderpest – 2000 – Global freedom 2011
 - CBPP – 2003
 - BSE – 2004
 - CSF – 2013
 - AHS – 2012
 - PPR - 2013
- **Self-declaration not applicable to non-listed diseases or diseases listed for official recognition**



Challenges related to status evaluations

- FMD-PCP pathway not a guarantee for endorsement of programs – must abide by criteria in questionnaire and requirements of the Code
- SCAD and Code Commission discussed changing text in Code to reflect that a plan of actions for progressing towards achievement of freedom is clearly understood – do not only want a program of what is currently being done
- Recent letter by DG of OIE to Regional Representations – will be playing an important role in monitoring process for compliance

Critical aspects related to disease status recognition

- Main focus on quality of veterinary service; disease control measures, diagnostic services, disease surveillance
- Obtaining disease freedom recognition – not so difficult
- **Main challenge is maintaining the recognized disease status**
- Where status was lost – main reasons were breakdown in disease surveillance system

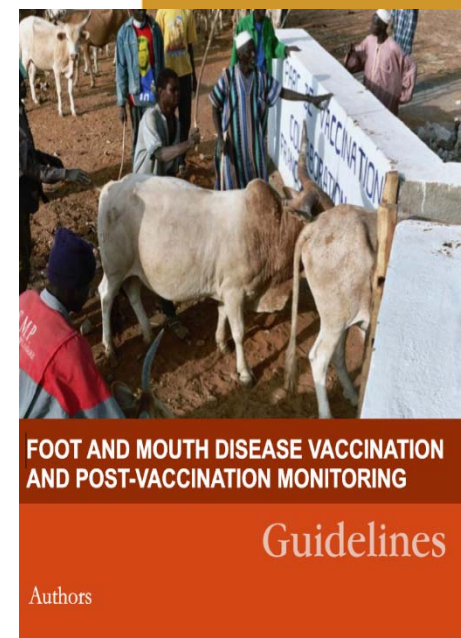
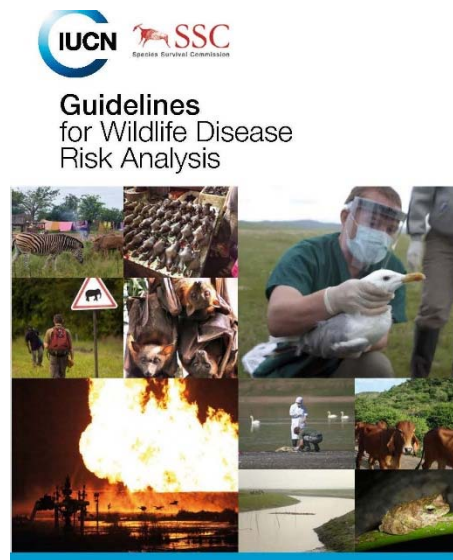
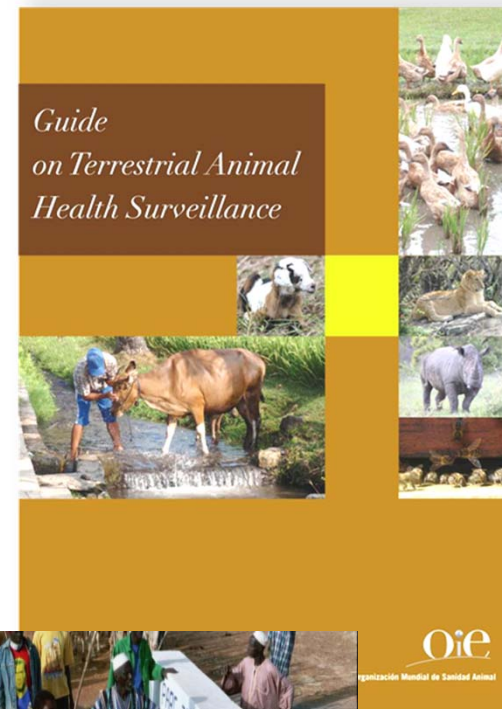


Expert missions to Member countries to assess the maintenance of disease-free status

- Resolution XXV of the 80th General Session provides mandate to SCAD and approval by DG to visit applicant countries and verify maintenance of status
- Need to assess maintenance of free status as reflected in annual confirmations – OIE credibility.
- South Africa and India in 2014/2015. Also Greece (BSE) and South America (FMD) planned
- Positive response in almost all Member Countries visited – established government support for the application of OIE standards for FMD control (e.g. South America, South Africa)



Useful publications for the benefit of Member Countries



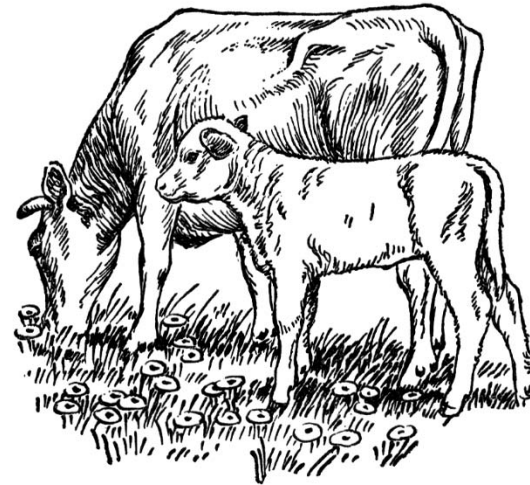
What are the challenges for Africa in the standard setting process?

- Continue to comment on new/amended standards – written comments and interventions at GS
- Not the number but quality of interventions are important
- Identify and contribute on standards addressing needs in Africa (Animal health, zoonosis, animal welfare)



Planned new *ad hoc* Groups (AHG) for 2015

- AHG on Theilerioses
- AHG on Lumpy skin disease
- AHG on Trypanosomiasis
- AHG on Vaccination





Thank you for your attention!