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President: OIE Scientific Commission for Animal Diseases

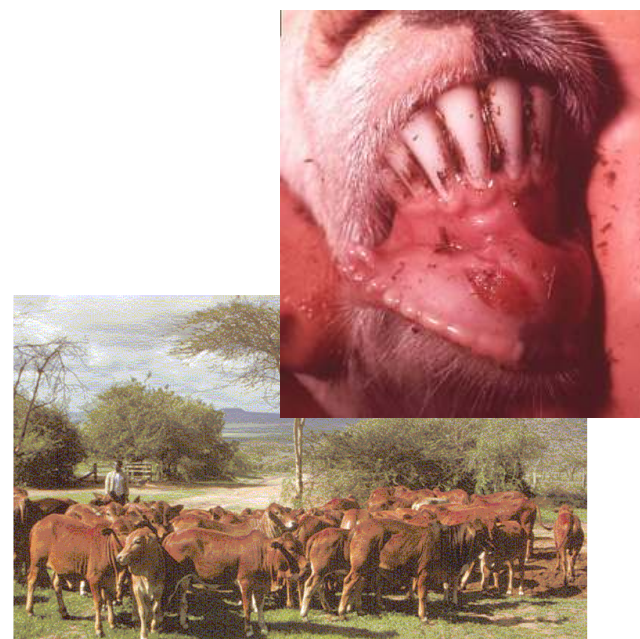


# The OIE/FAO Global FMD Strategy – the rationale and perspectives

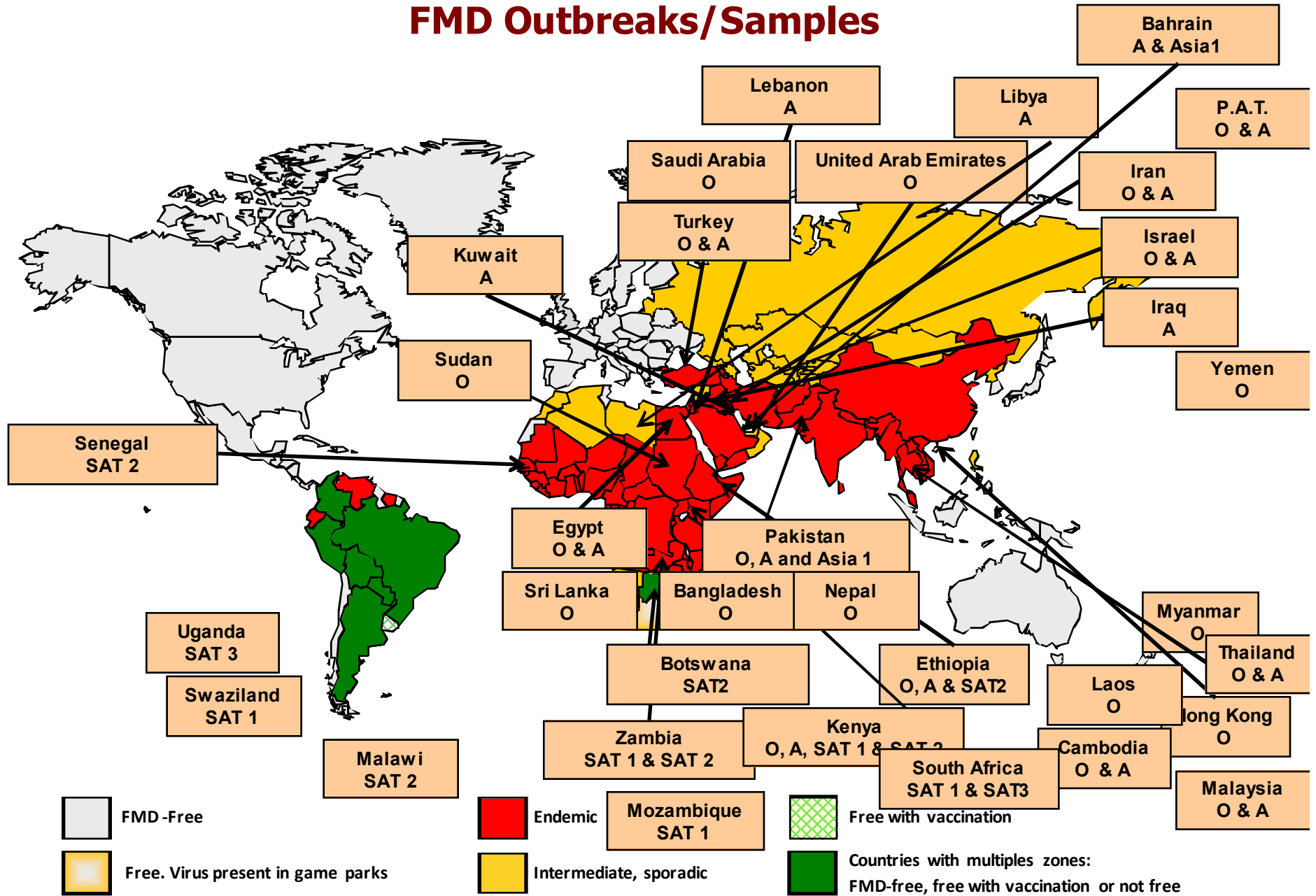
Cosalfa meeting: Asunción: 10 May 2012

## Foot and mouth disease: general global overview

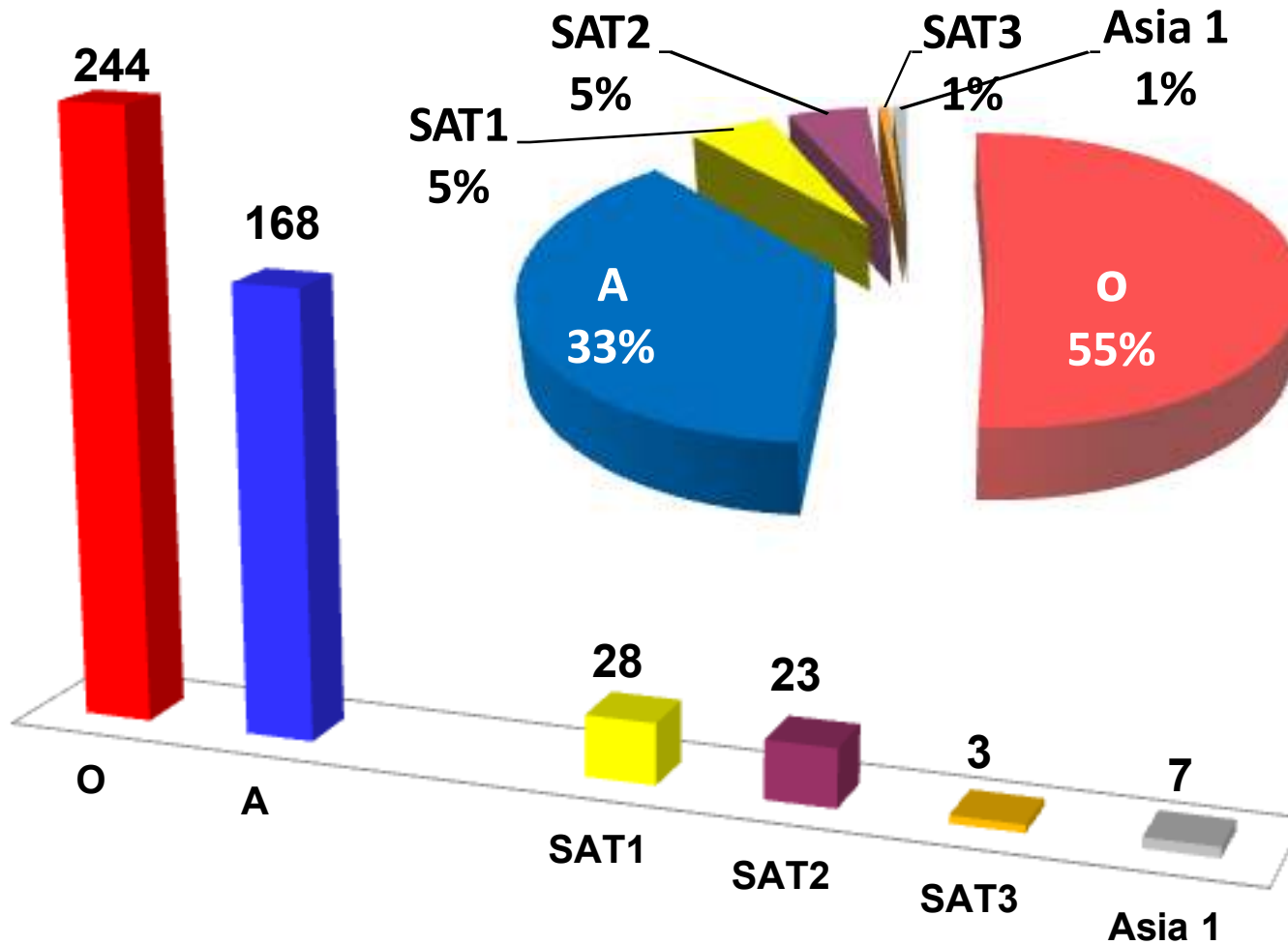
- Unique nature of FMD virus and disease epidemiology – difficult , if not impossible to eradicate where wildlife is involved
- Not a blueprint of rinderpest global eradication strategy
- More than 100 of 178 OIE Members still not FMD free
- Most infectious and trade-sensitive OIE listed disease – impact on global food security
- Resolution adopted at OIE/FAO Global FMD Conference, Asunción, Paraguay, June 2009
- Mandate given to OIE and FAO
- OIE 79<sup>th</sup> General Session – adoption of principle



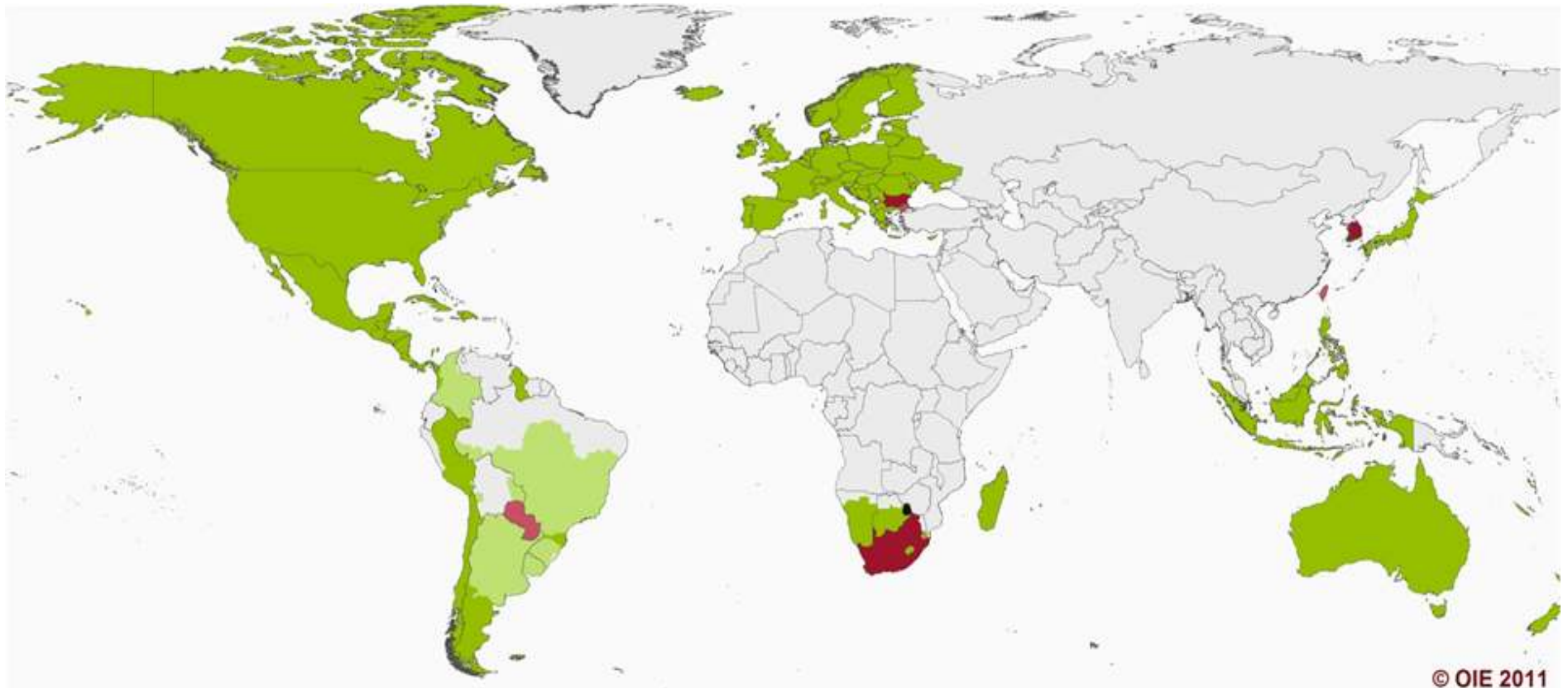
# FMD Outbreaks/Samples





# Positive samples received by WRL-FMD







# OIE Member Countries free from FMD



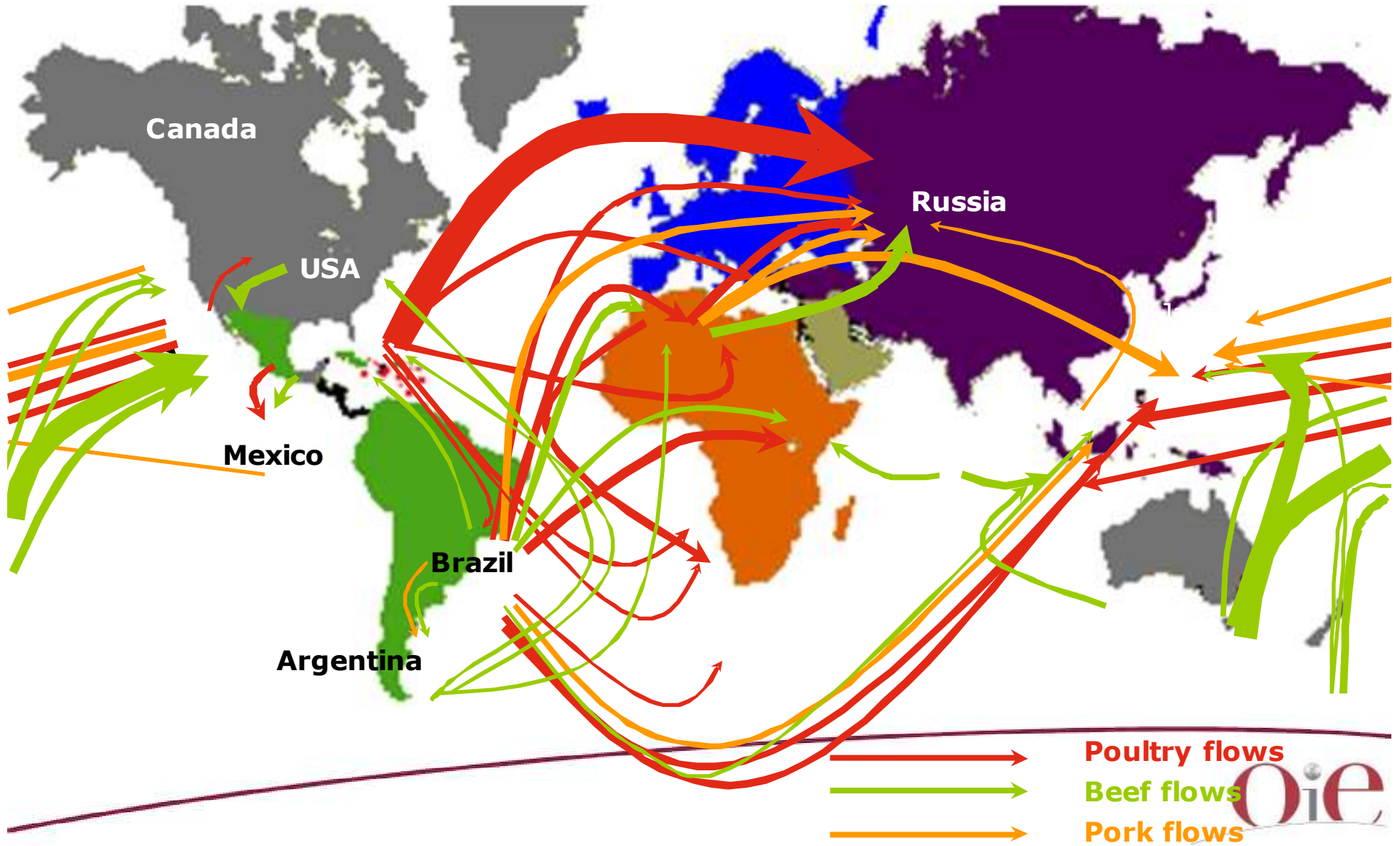
## Official FMD status of Member Countries - Whole country or zone(s)

 Country/zone free without vaccination  
 Country/zone free with vaccination

 Suspension of the status free without vaccination  
 Suspension of the status free with vaccination

 Containment zone  
 No recognised status

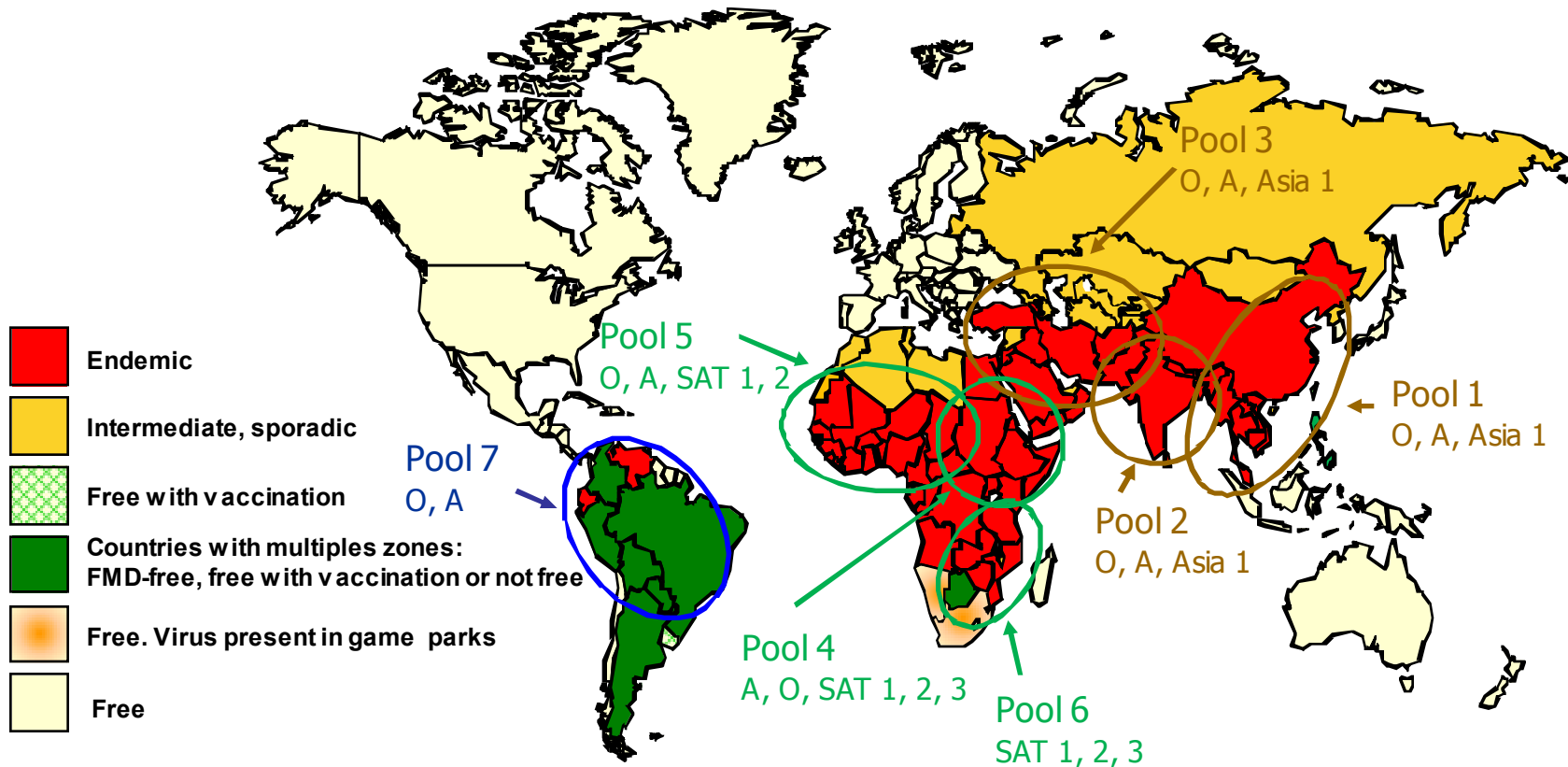
# Trade in animal products





## Global approach to FMD situation

Pool positions are approximate and colours indicate that there are three principal pools, two of which can be subdivided into overlapping areas



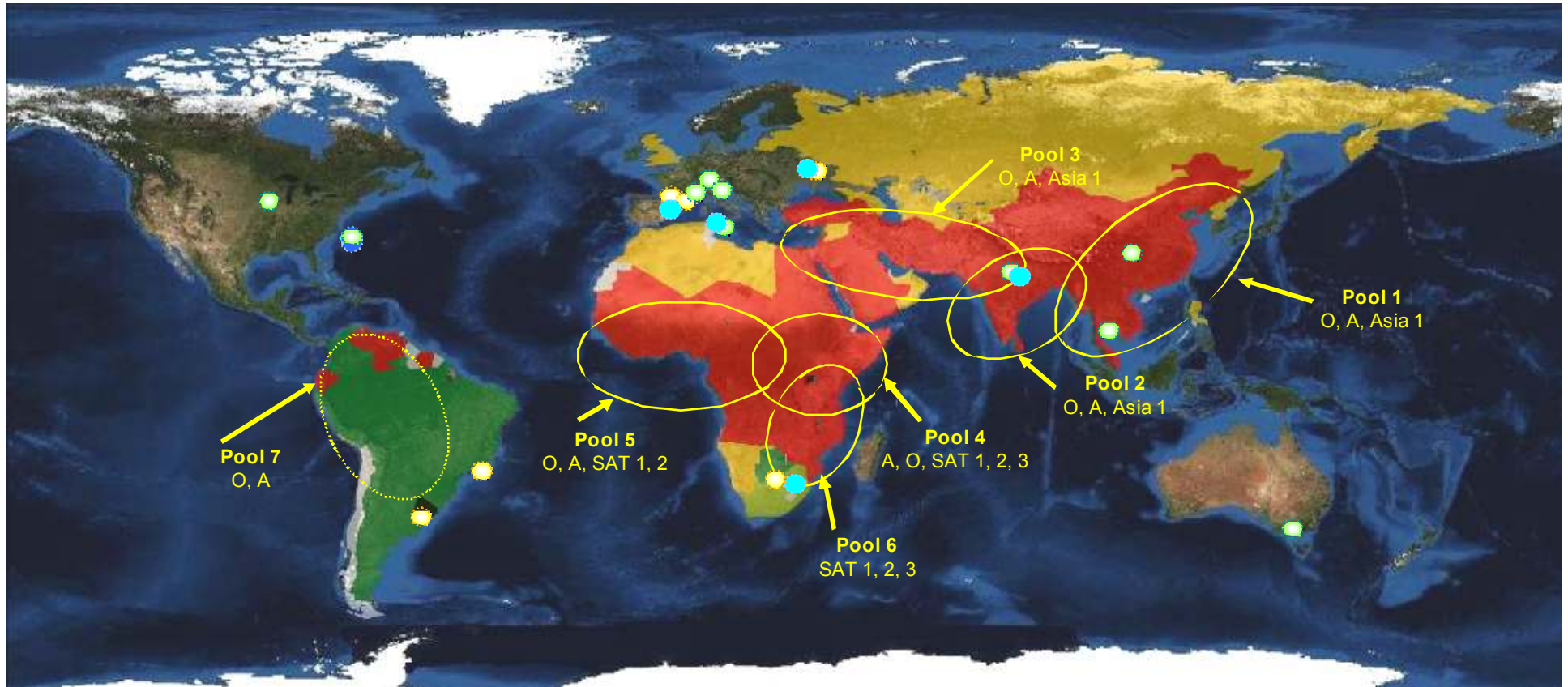
# FMD: 7 regional virus pools

 **OIE Reference Laboratories and Collaborating Centres**



**Reference Centres**  
(UK, Belgium, Italy, South Africa, India, Russian Fed – at 3/09)

 **Regional/National Reference Centres**



- |   |  |   |                                       |
|---|--|---|---------------------------------------|
|  | <b>FMD - Free</b>                        |  | <b>Endemic</b>                        |
|  | <b>Free. Virus present in game parks</b> |  | <b>Free with vaccination</b>          |
|  | <b>Intermediate, sporadic</b>            |  | <b>Countries with multiples zones</b> |

Source: Annual OIE/FAO FMD Reference Laboratory Network Report, 2007



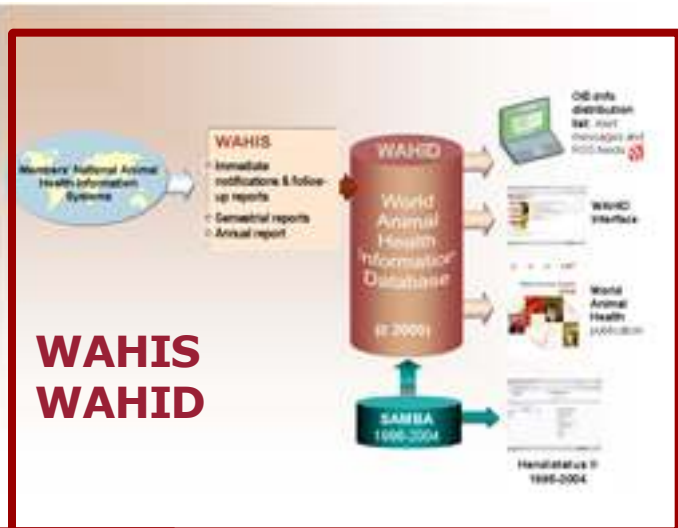
# Available tools

OIE standards  
Country/zonal freedom  
Endorsed control programs

Regional  
programs

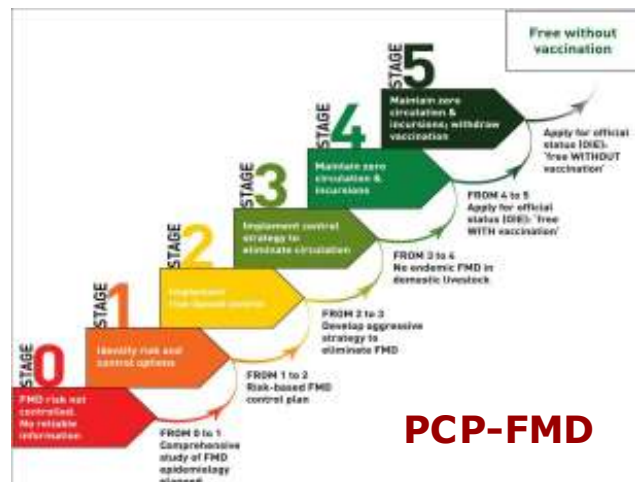
Laboratories

# Surveillance systems



WAHIS  
WAHID

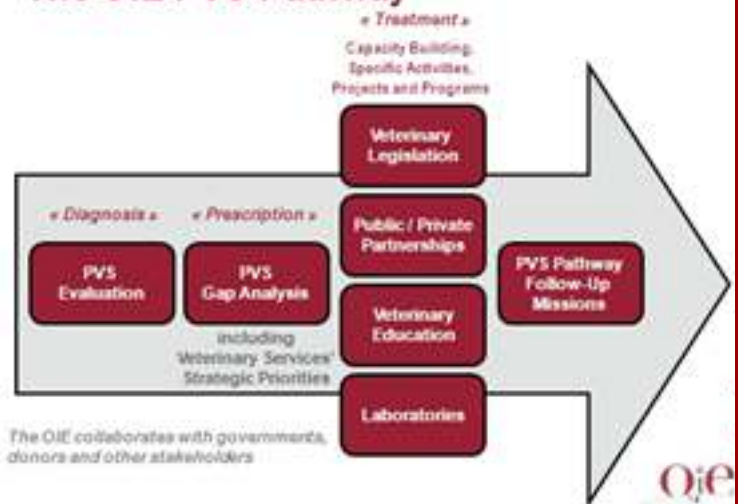
# Vaccines



PCP-FMD

The Progressive Control  
Pathway  
for Foot and Mouth Disease

# The OIE PVS Pathway



# **Outline of the Global Foot and Mouth Disease Control Strategy**

## ***Rationale for FMD control***

- **In developing countries food security and increased income generation through raising animal production and better market opportunities (FMD damage gravely underestimated - overview of related socio-economic studies)**
- **In developed countries reduced risk for FMD virus introduction**
- **Spin-off effects:**
  - **improved animal health systems (output 2)**
  - **better control of other TADs (output 3)**

## **Activities: the strategy**

### **Underlying principles**

- **The world is a global village**
- **We can do better with existing tools**
- **Prevention for FMD free countries should include support to fighting/eliminating the disease at source**
- **Risk-based approach at country level in FMD endemic countries e.g. can use the FMD-PCP or existing regional strategies**
- **FMD control hand in hand with improvement of veterinary services**

## **Underlying principles**

- **The strategy is tailored according to the national and regional situations**
- **Concept of regional virus pools**
- **Interim benefits along the pathway to control and eradication to be constantly assessed**
- **FMD control is considered to be a global public good**
- **Firm political and economic commitment**

# Regional approach to FMD control

- **SEACFMD program**

- 8 countries
- China, Brunei, Singapore added
- Progressive zoning approach
- 2020 Roadmap under revision



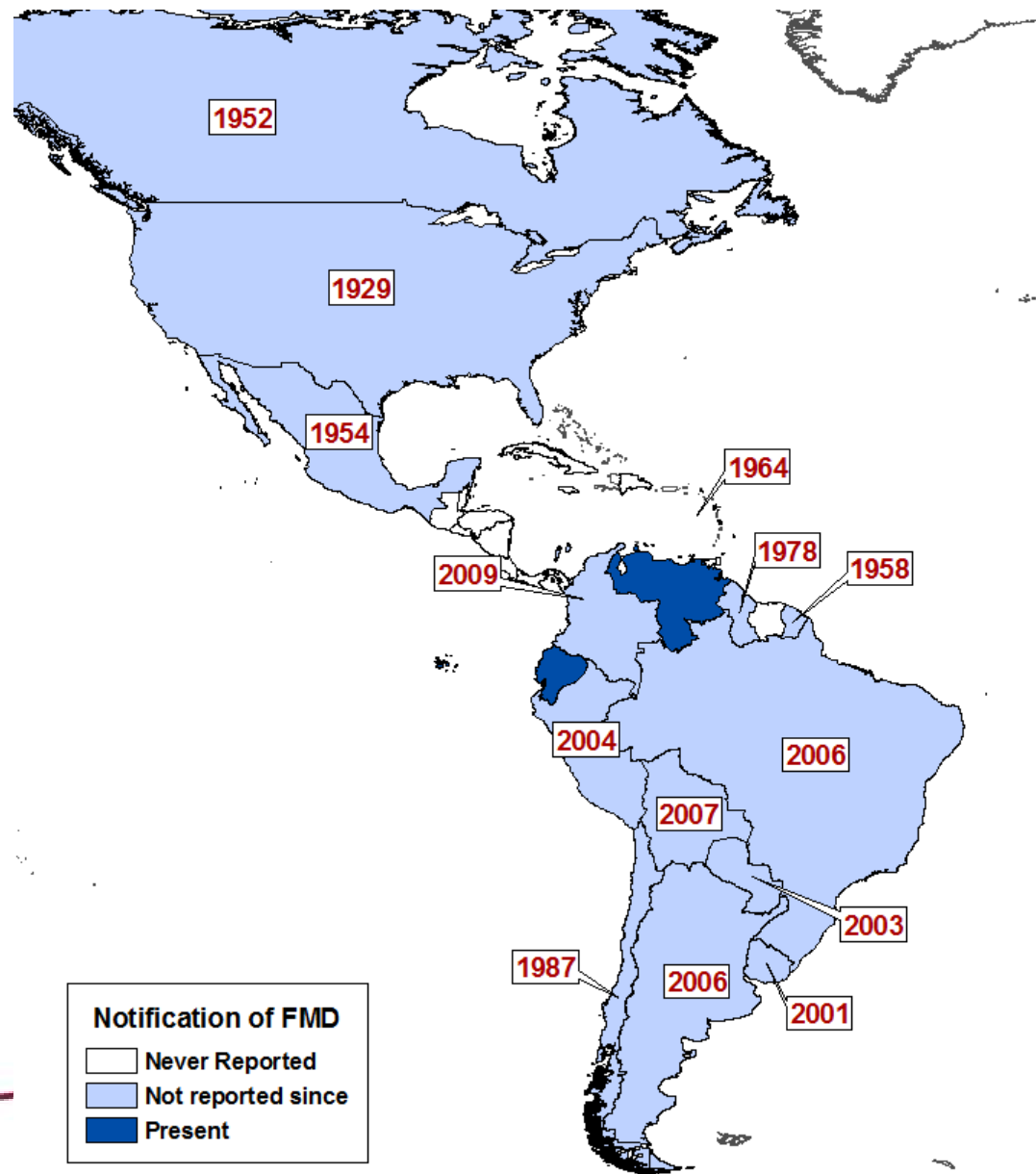
- **South America**

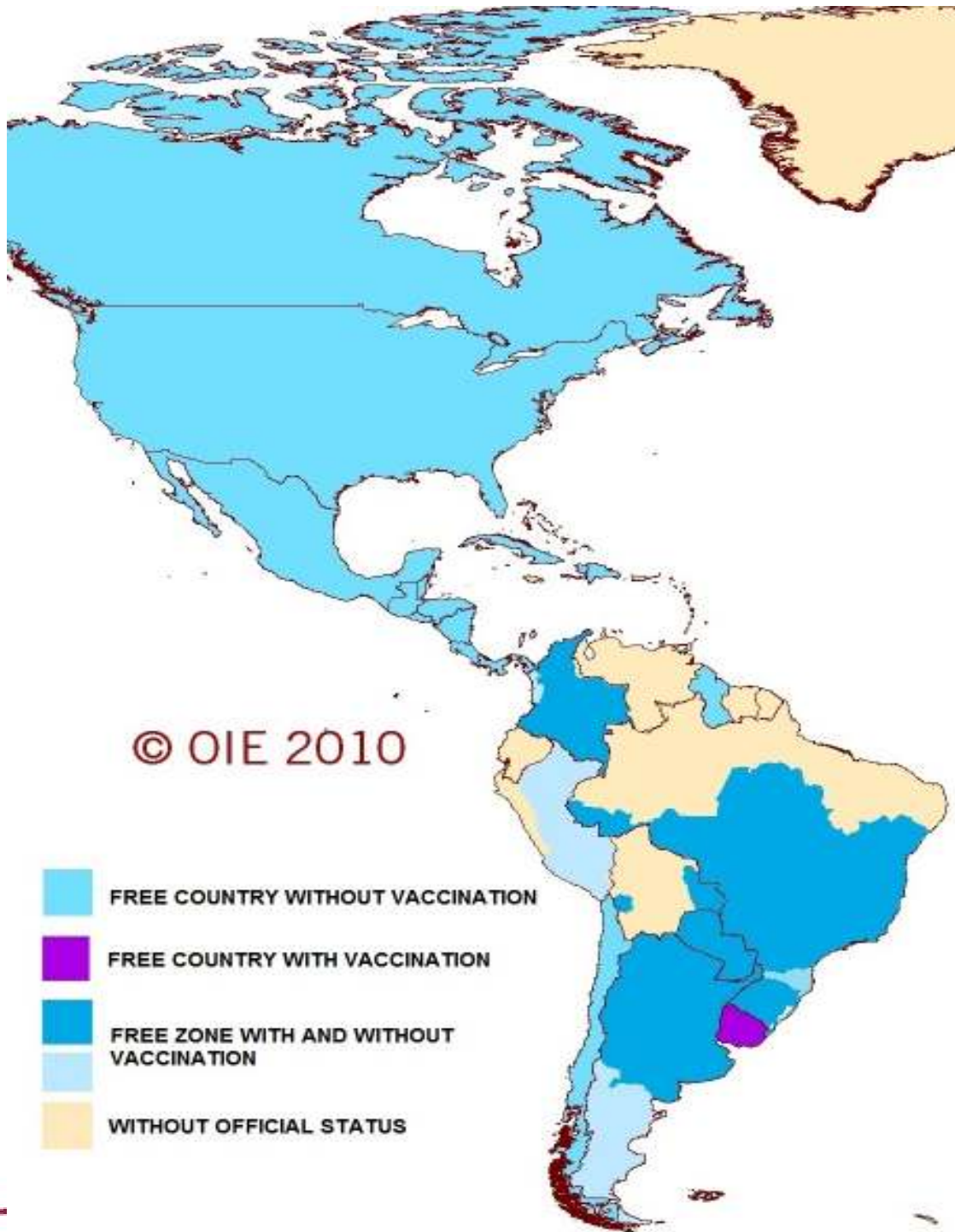
- Example of far advanced progress for rest of the globe
- 1980's – PHEFA
- Progressive zoning and intensive vaccination
- 2009 – 336 million cattle vaccinated - >85% in free zones
- Extension to other remaining infected countries
- CVP/OIE Agreement – 2007 – 4 countries in southern Cone





## FMD distribution in 2010 with dates of last occurrence for countries currently free from the disease





**Members of the Americas Region with an officially recognised FMD free status, by category**

## **Essential drivers for a global control program for FMD**

- **1994 – OIE adopted standards for recognition of country status for disease**
- **Expanded to zonal freedom -> compartments -> safe trade in commodities -> establishment of containment zone**
- **Slow process – more than 100/178 Members still infected**
- **More than 70% of OIE Members developing/transitional status**
- **Lack of political commitment and support**
- **Easier to convince politicians where trade concerns are important**
- **Lack of recognition of maintenance costs for sustainability**
- **OIE involvement only in stage when applying for country/zonal freedom**
- **Lack of recognition/support for attempts to control before reaching OIE application stage**
- **79<sup>th</sup> OIE General Session – adoption of endorsement of Official Control Programs for FMD**

## Objectives of a global FMD control strategy

- Maintain the status in FMD free countries and zones without or with vaccination
- Achieve country freedom in countries that have FMD free zones
- Improve control in FMD infected countries
- OIE endorsement of national strategies for FMD control
- Progressive movements towards freedom – with or without vaccination

# Approaches for a global strategy

- **Regional strategies**
  - Integration of regional approaches – must not compromise countries in region already free
  - No “fit-for-all” – unique regional differences, production systems and needs
- **Global, regional and country coordination**
  - **Country** level – involve producers, subsistence farmers, veterinary services, private sector
  - **Regional** level – harmonised approaches, coordination with neighbouring regions
  - **Global** level – to identify areas of potential concern and possible solutions



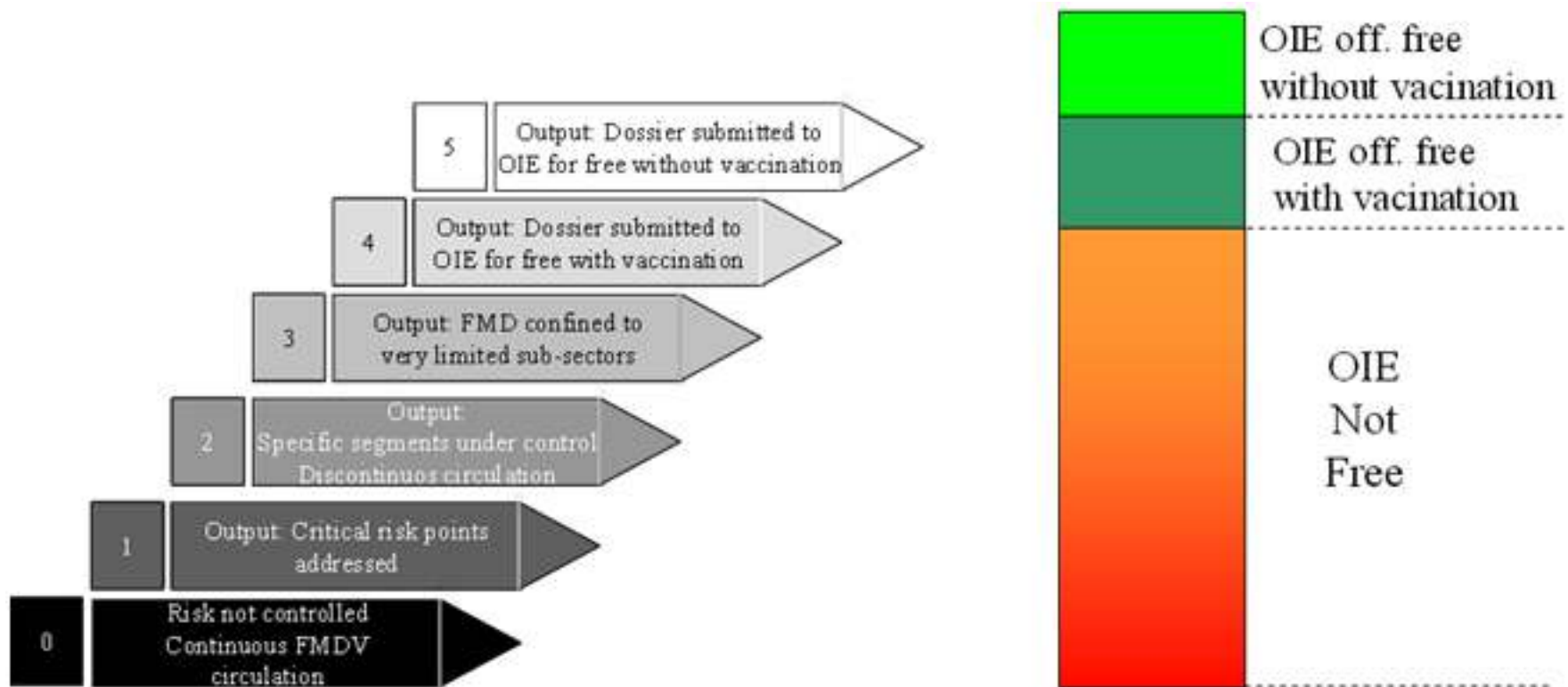
## Proposed strategies

- **FMD free countries/zones without vaccination**
  - Prevention of virus introduction as prescribed in *Code*
  - Early detection of possible threats – surveillance, disease awareness, diagnostics
  - Emergency response – national contingency plans
  - Vaccination – with or without stamping-out – compensation
- **FMD free countries/zones with vaccination**
  - Same as above
  - Move towards no vaccination – if risk is not compromised
  - Surveillance for undetected pockets of infection/virus circulation
  - Remain sensitised on susceptibility of naïve population when vaccination stopped

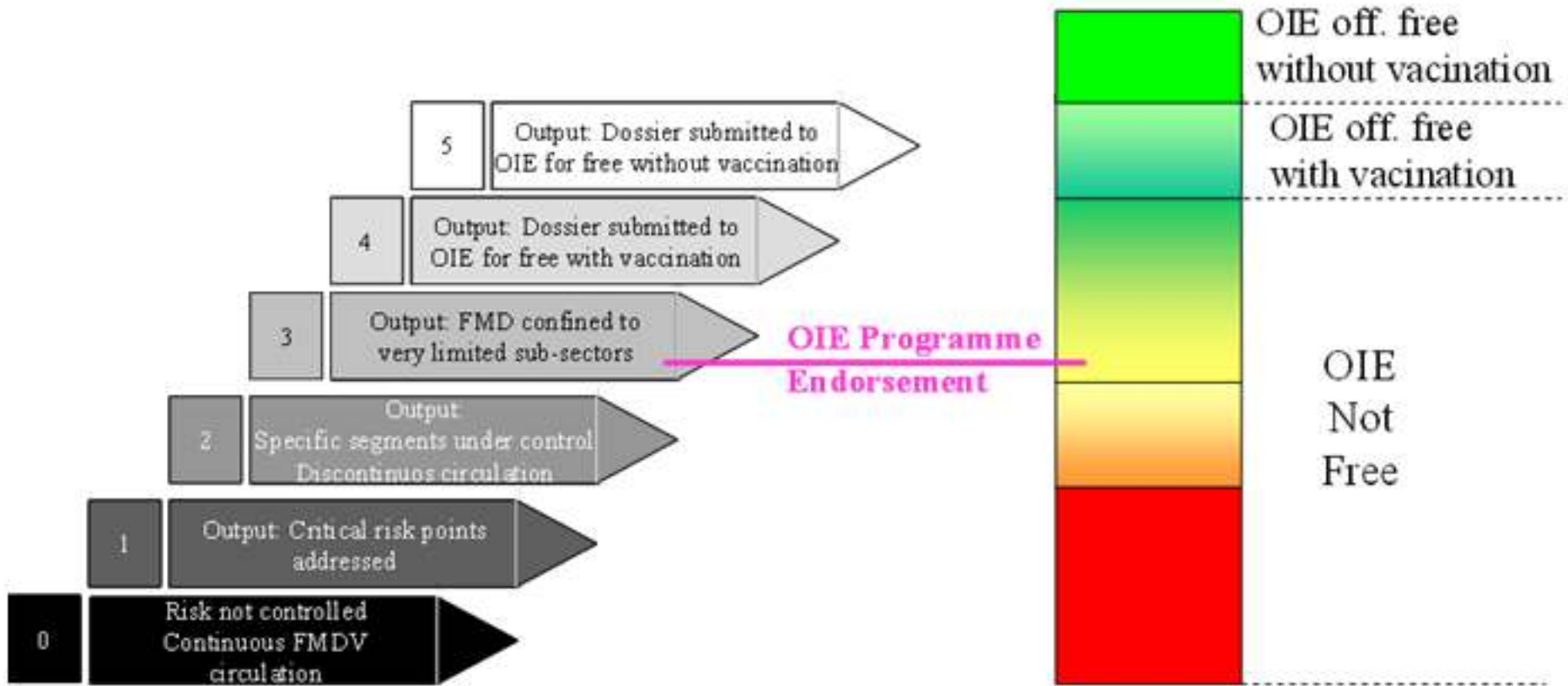
## **Advancement options – infected countries**

- **FMD- PCP identifies 5 stages from infected with no action (stage 0) to free without vaccination (stage 6)**
- **OIE Code provides for:**
  - Not free from FMD (stages 0 to 3)
  - FMD free countries/zones applying vaccination (stage 4)
  - FMD free countries/zones without vaccination (stage 5)
- **Eventual ideal is country freedom but progressive zoning would be for most countries an essential intermediate step**
- **Freedom option chosen by a country is a risk-based decision – not always possible/advisable to go for freedom without vaccination**
- **OIE Code does not discriminate against with/without vaccination**

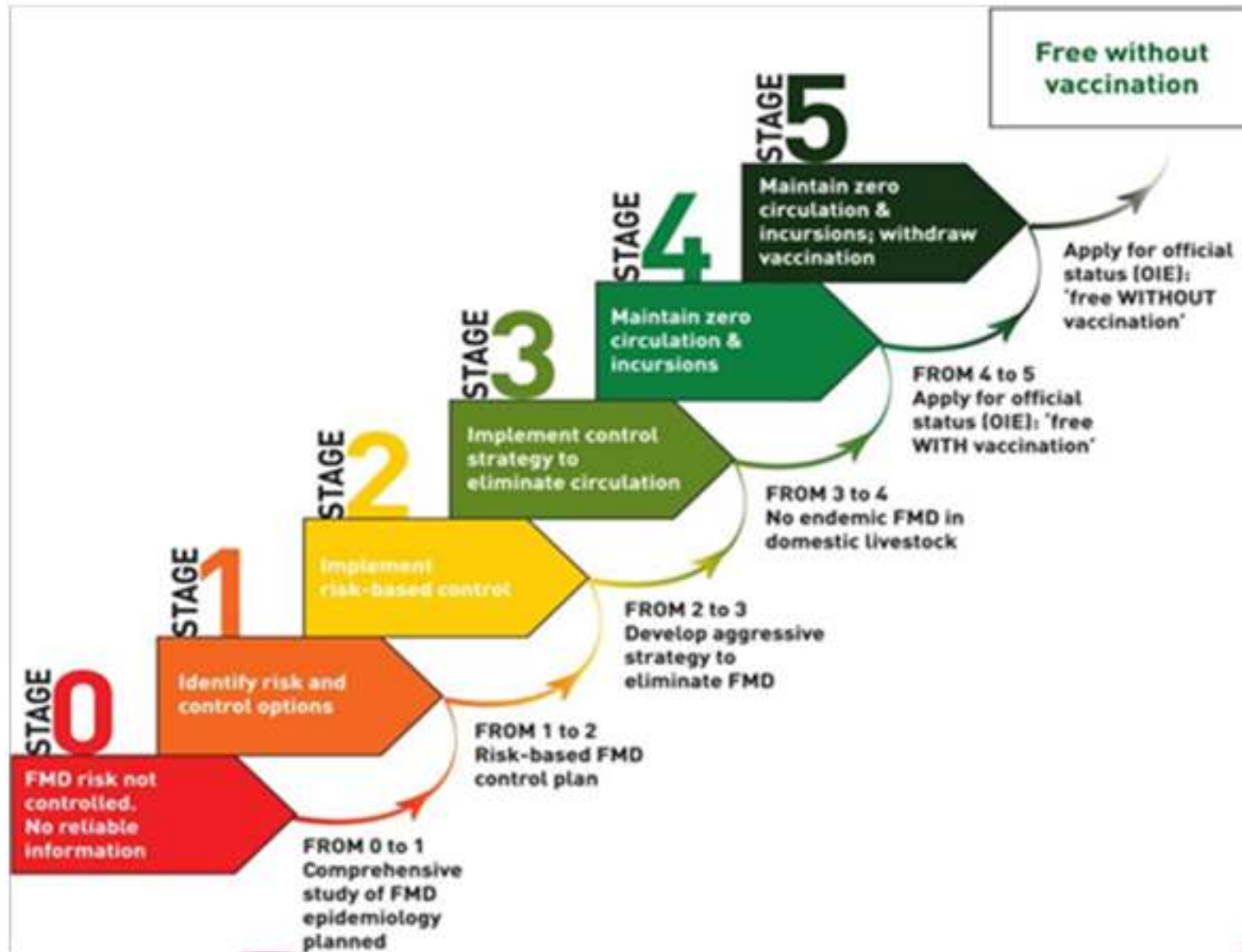
# Progressive control pathway in relation to OIE status recognition



# OIE official recognition of national strategic plan for FMD control



# Stages towards FMD freedom

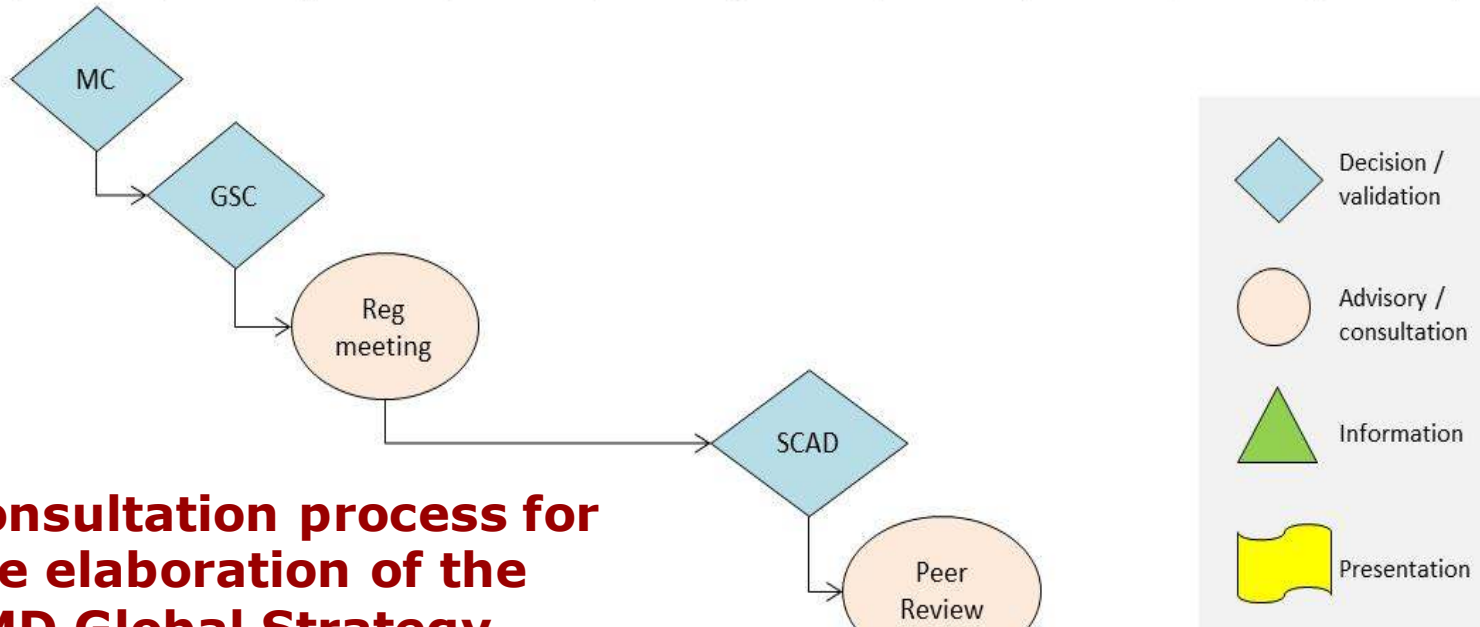




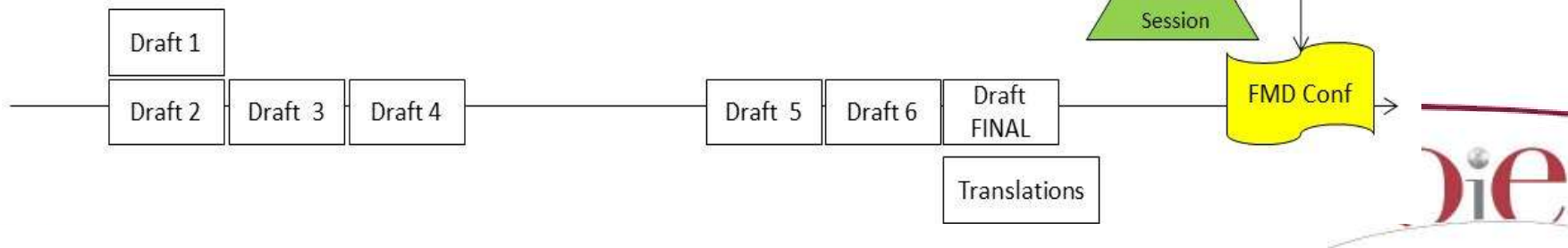
## How does this apply to South America?

- Already far advanced to achieve total freedom
- Strong and goal orientated regional programs (e.g. PHEFA)
- Most countries in SA do not need official endorsed programs
- Ideal would be for countries not yet free (e.g. Ecuador, Venezuela) to have official FMD control programs endorsed
- Who assess if a country can apply?
- Who assess progressive improvement – movement towards country freedom?
- Must be careful not to confuse or favour desk/on paper evaluations of the progress in a country with what is really being done to achieve success – remain practical/rational!
- Decision to apply for endorsement remains the prerogative of the country – assessment by OIE SCAD using criteria of Code/questionnaire
- Input of regional organisations/expertise/GF-TAD's?

August 2011	September 2011	October 2011	November 2011	December 2011	January 2012	February 2012	March 2012	April 2012	May 2012	June 2012
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**Consultation process for the elaboration of the FMD Global Strategy Workshop 2-4 November 2011, Paris, Presentation of the Draft Strategy**



## Key elements for recognition of strategic plan

- Efficient veterinary service (PVS, GAP analysis)
- Disease surveillance
- Diagnostic capability
- Vaccination
- Emergency response
- Regional integration
- Social participation
- Knowledge of livestock systems
- Epidemiological situation
- Outbreak investigation
- Sustainability
- Political commitment and funding

**In conclusion ....**

***The global veterinary profession through national, regional and global coordination and commitment, have eradicated rinderpest***



**We could take on the same challenge for  
FMD**

A photograph of a large herd of cattle, mostly brown and white, gathered in a fenced-in field. The background is filled with lush green palm trees and other tropical vegetation under a cloudy sky.

***Muchas gracias!***

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