



**Standing Group of Experts on Lumpy Skin Disease (SGE LSD)
for South-East Europe
under the GF-TADs umbrella**

**Seventh meeting (SGE LSD7)
Ohrid, the former Yugoslav Republic of Macedonia, 18-19 October 2018**

Recommendations

Considering that:

- The coordinated vaccination policy of 2016 and 2017 in South-East Europe continued successfully for a third year in a row, in 2018;
- There is a constant reduction of LSD outbreaks in the region of South-East Europe from 2016 to 2017 and further into 2018;
- The steady improvement of the LSD epidemiological situation in South-East Europe, thanks to the combined efforts of all the countries involved, and the support of the European Union, has reaffirmed once more the importance of a regional approach for LSD control and the effectiveness of mass vaccinations with homologous vaccines aiming at a high vaccine coverage;
- Outbreaks linked to a virus strain belonging to the genetic group of the Neethling vaccine strains have been reported to the OIE;
- In the light of the current favourable epidemiological situation and in line with the recommendations of the SGE LSD5, the time is ripe for a discussion on a possible regional LSD vaccination exit strategy;
- Additional work on LSD has been accomplished and continues in the EURL and EFSA to support the SGE LSD;
- All recommendations of SGE LSD5 remain fully valid/applicable.

Recommendations on LSD vaccination and surveillance in 2019

1. The long term strategic objective of an LSD vaccination exit strategy in the South-East Europe should be to restore the LSD free status situation as it was before the occurrence of the LSD outbreaks and the implementation of LSD vaccination in the region; the ultimate goal being the total elimination of LSD accompanied by cessation of vaccination in the region, while addressing the risk of disease recurrence;

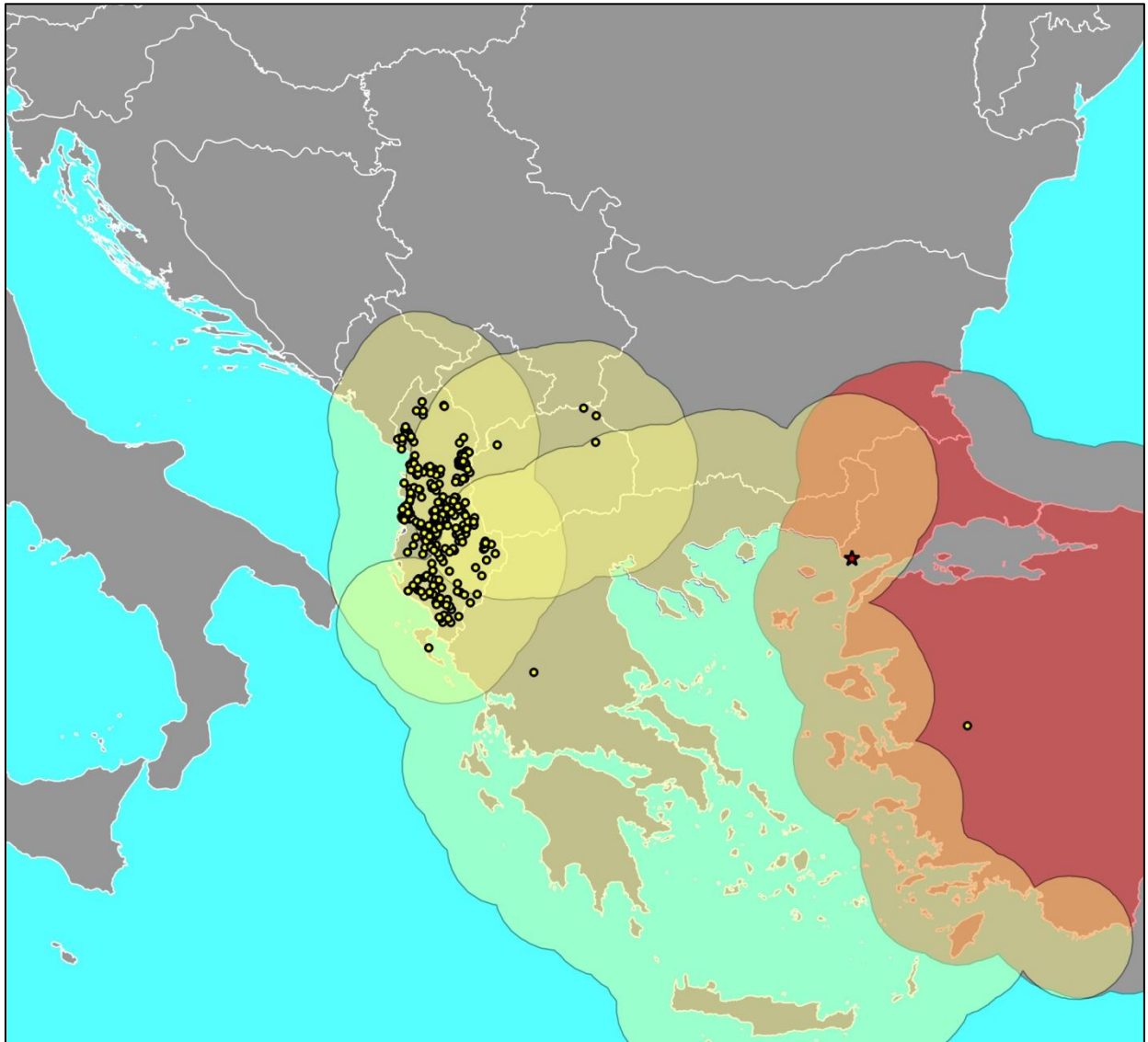
2. Where vaccination is to be still applied, previous recommendations on the preferred types of vaccines to be used remain valid. The circulation of undesired vaccine-like strains should be further substantiated, and the safety, quality and effectiveness of vaccines used should be constantly monitored. If heterologous sheep and goat poxvirus vaccines are to be used the recommended dose is 10 times the dose for small ruminants.
3. Cessation of LSD vaccination should take place in a coordinated manner ensuring the continuation of the regional coordinated policy of the previous years;
4. The decision to continue or stop LSD vaccination in a country or zone in 2019 should be based, among other factors, on the LSD occurrence in the country or zone in the previous years, the vaccination coverage achieved and the epidemiological situation in neighbouring countries or zones (map in annex);
5. It is recommended that previously LSD affected countries or zones consider stopping LSD vaccination only if:
 - a. They have achieved a high vaccine coverage, using effective LSD vaccines, for at least the last 2 consecutive years;
 - b. No outbreak of LSD has occurred during the last 2 years in and within a distance of at least 80 km (preferably 100 km) of the country or zone;
6. Based on the information made available during the meeting in the individual reports of the countries, at least Albania, Bulgaria (all or part of), Kosovo*, Greece, Montenegro, Serbia (all or part of), the former Yugoslav Republic of Macedonia and Turkey should not stop vaccination;
7. Countries and zones implementing vaccination should still aim at sufficiently high vaccine coverage as previously recommended;
8. The cessation of LSD vaccination should be accompanied by the implementation of an appropriate LSD surveillance for a period of at least two years or more to prove the absence of LSD and ensure early detection in case of resurgence or reintroduction from affected areas. This surveillance needs to include periodical clinical visits in holdings as well as serological testing of non-immune animals;
9. Selection of the appropriate surveillance scheme for a country or zone should be based at least on: the continuation or not of LSD vaccination, disease seasonality, the performance of the laboratory tests available, the capacity of the competent authorities as well as the epidemiological situation in neighbouring countries or zones;
10. Passive surveillance should remain in place in all countries in the region, throughout the year; any clinical suspicion should be further investigated with the use of appropriate lab tests (i.e. virological) to confirm or rule LSD out. Trust building, awareness raising and continuous communication with stakeholders, particularly farmers, will ensure timely reporting and rapid response;
11. Exchange of information between the countries in the region and immediate reporting of any LSD outbreak in the region (WAHIS, ADNS) remain crucial elements for the proper coordination of measures as well as allocation of available resources (e.g. vaccines from vaccine banks);
12. Notwithstanding the cessation of LSD vaccination in one or more countries, now or in the future, availability of sufficient quantities of LSD vaccines in case of emergency (e.g. via existing vaccine banks) remains the best preventive strategy for countries at risk.

Recommendations on other activities regarding LSD

13. All countries of South-East Europe, affected or at risk for LSD, should collaborate within the GF-TADs in providing information regarding their decision and the rationale to continue or stop LSD vaccination in 2019 as well as their decision on the LSD surveillance scheme they intend to implement;
14. Systematic and harmonised collection and analysis of data on LSD, including animal population, control measures and surveillance data should continue in the region of South-East Europe, with the support of EFSA;
14. All countries in the region are encouraged to establish close collaboration and exchange of materials and methods between them and with the EURL in view of the development of new diagnostic tests for LSD;
15. A teleconference will be organised in early 2019 to optimise logistics and transparency in LSD vaccines supply for those countries that intend to continue vaccination as well as coordination of surveillance activities across South-East Europe.
The SGE LSD8 will take place in the margins of the 86th OIE General Session (May 2019), in Paris, France.
The SGE LSD9 will be organised in late 2019, in Serbia.

Annex

High risk areas - 80 km zone around borders of countries or regions where LSD outbreaks were notified in 2017 and 2018



● LSD outbreak in 2017

★ LSD outbreak in 2018

80 km zones around countries where the last LSD outbreaks occurred in **2017**

80 km zones around countries where the last LSD outbreaks occurred in **2017** and in **2018**