Surveillance and control of Lumpy Skin Disease: key messages by EFSA

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www.efsa.europa.eu

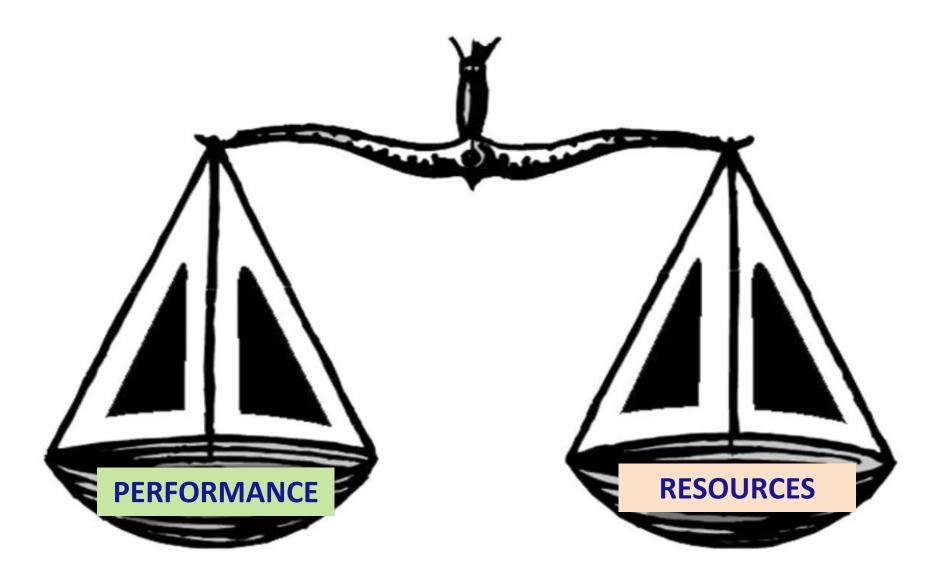


Elements for planning the surveillance

- objective of the surveillance: early detection or proving absence
- type of surveillance active/passive
- possible source of infection
- susceptible target population
- risk areas > buffer at least 60-80 km
- risk period > April-October
- diagnostic tests available: clinical , ELISA
- design prevalence (or threshold of detection)
- how many animals/herds to be checked (sample size)
- how often to check/test (sampling frequency)

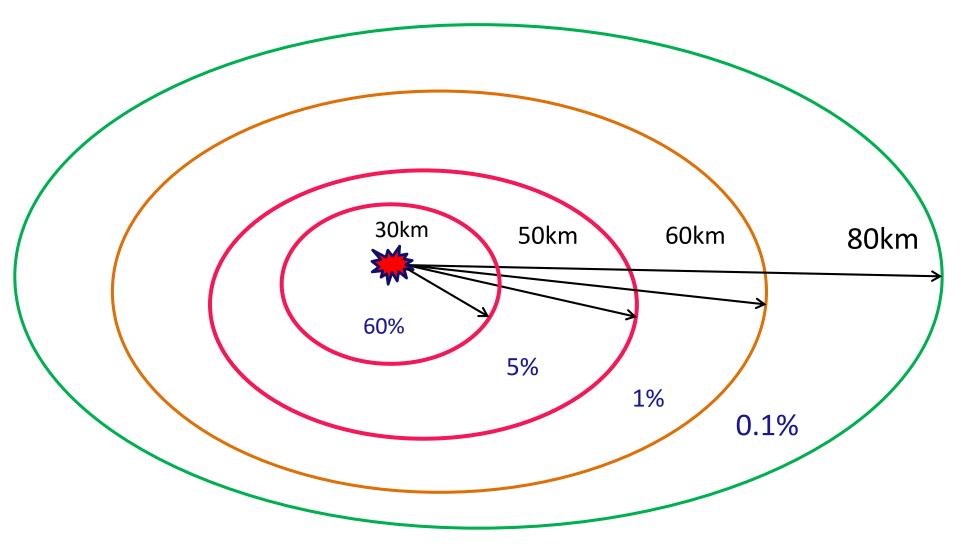


Planning the surveillance





Buffer zone : probability of LSD «escape»





Vaccination duration for LSD elimination

Coverage	VE	2 years	3 years	4 years	5 years)]
50%	65%	PERSIST P=80%	PERSIST P=30%	gone	gone	
70%	80%	PERSIST P: 20%	PERSIST P<5%	gone	gone	
	<mark>95</mark> %	PERSIST P<20%	PERSIST P<5%	gone	gone	
90%	80%	PERSIST P<20%	gone	gone	gone	
	95%	gone	gone	gone	gone	5



Key recommendations

- Monitor vaccination campaign >> <u>vaccination</u> <u>effectiveness</u>
- Passive surveillance: key for <u>early warning</u> for LSD, always in place
- areas bordering endemic regions previously infected
 > <u>active surveillance (clinical and serological)</u>
- Feasibility of <u>surveillance for early detection</u>: to be adapted to different contexts

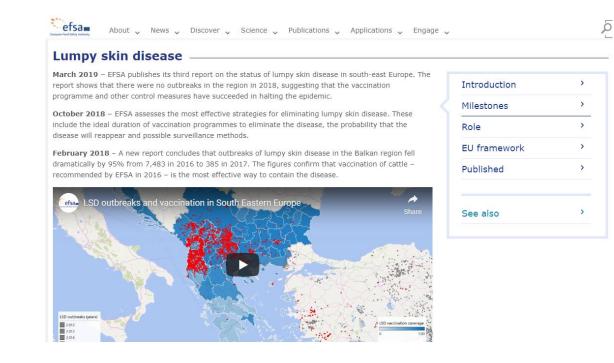
Don't rely on only one test or component: combine!



Thank you for your attention!

EFSA page on LSD:

https://www.efsa.europa.eu/en/topics/topic/lumpy-skin-disease





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