



## Standing Group of Experts on LSD in South-East Europe under the GF-TADs umbrella

### Eleventh meeting (SGE LSD11) 2<sup>nd</sup> March 2023

**Teleconference**

**DRAFT REPORT**

#### Summary

Due to budgetary restrictions on travel, the twelfth meeting of the standing group of experts on lumpy skin disease (SGE LSD12) took place as a teleconference on 2<sup>nd</sup> March 2023. This was the third meeting for which the functions of the Secretariat of the SGE LSD were transferred to the OIE Sub-Regional Representation in Astana.

Chaired by the President of the regional GF TADs for Europe, the meeting started with informing the participating countries about the LSD epidemiological situation in Europe, Asia, and Africa in 2021, and more detailed information on the LSD epidemiological situation in Europe and neighbouring areas, occurrence and vaccination, active and passive surveillance, and the detection of possibly recombinant strains in the region were presented by DG SANTE and the EURL. Participating countries presented their national epidemiological situation regarding LSD, an update on the last outbreak occurrence, the type of vaccination in place, the post-vaccination surveillance, and the disease preparedness, as well as plans for 2023 regarding vaccination and surveillance. Members were presented with a set of recommendations and invited to provide comments.

#### Participants

Countries	Name and surname of person attending
<b>SGE member countries</b>	
Albania	<i>Ali Lilo</i>
Armenia	<i>Satenik Kharatyan</i>
Azerbaijan	<i>Natig Javadov</i> <i>Mirvugar Huseynov</i>

	<i>Jeyhun Aliyyev</i>
Bosnia and Herzegovina	<i>Aleksandar Nemet</i>
Bulgaria	<i>A. Zdravkova</i>
Croatia	<i>Zaklin Acinger Rogic</i>
Georgia	<i>Tengiz Chaligava</i> <i>Irakli Tsikhelashvili</i>
Greece	<i>Sofia Boutsini</i>
Israel	<i>Michel Bellaiche</i>
Kosovo*	<i>Bafti Murati</i>
Montenegro	<i>Vladimir Djakovic</i>
North Macedonia	<i>Vanja Kondratenko</i>
Russia	<i>Alekander Sprygin</i> <i>Nikita Lebedev</i> <i>Sadi Şahverdiyev</i> <i>Pavel Prutnikov</i>
Serbia	<i>Boban Djuric</i> <i>Tatjana Labus</i>
Turkey	<i>Visal Kayacik</i> <i>Sendar Uzar</i>
Austria	<i>Simon Stockreiter</i>
Cyprus	<i>Savvas Savva</i> <i>Vasiliki Christodoulou</i>
Hungary	<i>Zsuzsanna Irhazi</i> <i>Lajos Bogнар</i> <i>Anikó Schmidt</i>
Kazakhstan	<i>Azim Tegzhanov</i>
Kyrgyzstan	<i>Adilet Sotovaldiev</i>
Romania	<i>Florentina Dudu</i>
Slovenia	<i>B. Hrovatin</i>
Tajikistan	<i>Ismoil Andamov</i>
Turkmenistan	<i>Arslan Soltanmyradov</i>
Uzbekistan	<i>Khabibulo Khandamov</i>
<b>Other participants</b>	
Presidency of the GF-TADs for Europe	<i>Bernard Van Goethem</i>
E.Commission /DG SANTE	<i>Moritz Klemm</i> <i>Dimitrios Dilaveris</i>
WOAH - Secretariat of the GF-TADs for Europe	<i>Mereke Taitubayev</i> <i>Aigerim Zhorgabayeva</i> <i>Noemie Glet</i> <i>Dmitry Morozov</i> <i>Peter Melens</i> <i>Marina Sokolova</i> <i>Jean Perchet</i>
FAO Europe	<i>Eran Raizman</i> <i>Mark Hovari</i>
EURL	<i>Kris De Clercq (DEFEND project)</i>

\* References to Kosovo shall be understood to be in the context of Security Council resolution 1244 (1999)

	<i>Nick De Regge</i>
EFSA	<i>Alessandro Broglia</i>
WOAH – GF-TADs	<i>Alexandre Fediaevsky</i>
AFSA	<i>Zenfira Kazimova</i>
	<i>Laurent Mery</i>

25 member countries of the SGE LSD and Kosovo\*as well as the representatives of FAO, European Commission (DG SANTE), EFSA, and the EU Reference Laboratory for Capripox Viruses attended the meeting for a total of 55 participants.

**Opening, adoption of the agenda and presentation of the objectives of the meeting**

Dr Taitubayev, Secretary of the GFTADs Europe SGE for LSD, welcomed the participants and opened the meeting, while giving the following strategic aspects.

The main objectives of the SGE LSD12 were to provide updates on the epidemiological situation in each member country, the LSD vaccination and surveillance strategies for 2023, as well as the LSD vaccination cessation strategy.

Dr Bernard Van Goethem, President of the GF-TADs Europe welcomed the participants and noted:

- It is important to keep on meeting.
- The improving situation in South East Europe compared to the series of outbreaks in 2015-2018.
- The need to remain vigilant and continue vaccination and surveillance where necessary.
- The opening of a wider geographical scope to include other countries making efforts to fight the disease in our region.

Dr Van Goethem presented the agenda, there were no comments.

The objectives of the meeting are:

- To assess the situation on the ground in member countries.
- To share the latest scientific updates with all members in the region.
- To draw recommendations on future steps to continue successfully fighting against the disease.

He presented lists of countries invited to give presentations and invited experts to provide their presentations.

Dr Raizman was very happy to see such important attendance.

**WAHIS: Notification of animal diseases and LSD epidemiological situation (global, regional)**

Drs P Melens, WOAHIAD TBC gave an outline of the current situation of LSD in the world:

- The disease is spreading on to south and Southeast Asia.
- Indicated the number of countries that have been infected by LSD.
- Gave information about the reporting system and the WOAHI focus on transparency.
- New wahis went live in March 2021. Optimized versions in September 2022 – many improvements.
- Support for members in notifying, possibility to do one to one training for notification focal points.

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- This is used for data extraction as well; a new optimized public interface has been launched.
- There is interconnection with the EC Animal Disease Information System ADIS, for data sharing and data transfer.

Dr Taitubayev thanked for the presentation, there were no questions.

### **FAO activities on LSD**

Dr Raizman gave an overview of FAO activities to help countries fight LSD in the region.

- Conducting technical cooperation programme project defined as an emergency for central Asia.
- Due to rumors of outbreaks, led to a project, to be finished in September 2023.
- Started with assessment missions, training and simulation exercises, cost benefit assessment, laboratory training, and continuous regional coordination. There are difficulties with technical questions such as importing reagents.
- Exercises were both desktop and drills and adapted to each country.
- The outcost tool was used to estimate the cost of outbreaks through the exercises.
- Upcoming activities: training on LSD laboratory diagnostics, Continued contingency planning, Simulation exercise for private vets in Kyrgyzstan, online course in russian through the virtual learning center (150 participants).
- A later phase will focus on regional coordination.
- Publications on FAO's work on LSD are available freely online.

### **EURL activities of importance to the LSD diagnostics**

Dr Nick de Regge gave a presentation of the following points:

- Gave an overview of the strains available up to 2017, with the grouping of strains, south African group on one side (with the Neethling strain) and the 'classic' group.
- In 2017 a new strain appeared that seems to cluster closer to the Neethling type strains but is still a wild type. Since 2017, there seems to be a new cluster and the main driver behind the epidemic in southeast Asia, but not in India.
- Most of the work of the EURL is now on the recombinant strain:
  - o Safety of the live vaccine? Quality control experiments on the Kazakh vaccine showed that it contained Neethling strain, goatpox strains, and some recombinant strains already present in the vaccine. This shows that vaccine control is essential for every batch, since the consequences can be disastrous.
  - o Influence on diagnostics: DIVA capacity lost with the new recombinants. The EURL has developed a new DIVA PCR to detect recombinant wild types.
- Ongoing proficiency testing for capripox viruses showed good results for serologic methods.
- Duration of immunity: an extensive study with live attenuated vaccine with 18, 12 and 6 months before challenge, compared with inactivated vaccination at the same periods, resulted in demonstrating that live attenuated vaccine gave protection to all animals after 18 months, while the inactivated vaccine protected only at the 6 months stage.
- Ongoing work on sheep pox and the outbreak in Spain in 2022.

Dr Van Goethem expressed concern over the spreading of the recombinant strains of the virus.

## DEFEND Project : Information – update on the LSD component

Dr Kris de Clercq presented the DEFEND project that focuses on ASF and LSD

- Focus on LSD, 33 countries involved.
- Work packages:
  - risk analysis develop a method for risk assessment.
  - phylogenetic reconstruction to understand the evolution from a scientific point of view.
  - links between conflict, migrations, and virus spread (with an objective scientific methodology that has just been accepted).
  - study of transmission, including fly bites, proving that transmission is the same from low exposure and high exposure. They equally demonstrated that the classical strain does not transmit without flies, whereas the Russian experiments prove that the recombinant do transmit without flies.
  - Host determinant genes for resistance and susceptibility, since it appears that there is a genetic background for symptom expression.
  - Development of new vaccines : subunit construct to stimulate LSD immune response.

Dr Taitubayev thanked for the efficient presentations.

## EFSA activities on LSD

Dr Alessandro Broglia gave a brief presentation of the EFSA activities:

- Activity was mostly when the epidemic was active in southeast Europe, first culminating in accumulation of knowledge, defining policy (stamping out VS vaccination) and giving an update on available knowledge on LSD. Over the last 8 years, huge steps forward have been done.
- Worked on spread models to test culling and vaccination options.
- Amazing cooperation among countries and timeliness of control measures were essential in controlling the disease in southeast Europe.
- Vaccination: using field data they showed that in all countries; overall 80% vaccine effectiveness was achieved.
- Setting up risk-based surveillance to set up radiuses for surveillance in the animal health law.
- Core recommendations:
  - Vaccination effectiveness
  - Passive surveillance,
  - Active surveillance,
  - Surveillance for early detection

## Questions and answers for all presentations

Dr Taitubayev invited participants to raise any questions they might have on the presentations made earlier in the meeting.

Dr Raizman enquired about transmission experiments; how is it excluded that there is no virus in the flies.

Dr De Regge explained that the experiments were designed to both know:

- Absence of virus in animals participating in the experiment (-both cattle and vector).
- Absence of replication in the vectors in vitro.

Are some outbreaks due to vaccine strains?

Dr De Regge: the outbreak is linked to one batch of bad vaccine, that was injected in the cattle, and that recombinant virus is now spreading in southeast Asia.

This is likely to have happened in the master seed for the vaccine. Here, we are speaking about 22 recombinations in a double strand DNA vaccine that is very stable. This shows the very high importance of quality control in vaccines.

The recombinant strain causes disease.

#### **LSD SE Europe – a review of the disease occurrence and management to date.**

Dr Dilaveris presented the experience in southeast Europe and the importance of the rapid coordination and consensus around vaccination, along with the rapid support from the EU vaccine bank.

The main conclusions are:

- LSD effectively controlled is South East Europe since 2015 thanks to coordinated vaccination campaigns using effective vaccines (live homologous ones).
- Mass vaccination of bovines in large areas remains the most important control policy against LSD.
- Preparedness should be enhanced for countries at risk.
- Awareness campaigns are very important for early detection of LSD.
- Regional cooperation and coordination between countries is crucial for effective transboundary disease control and prevention.

#### **Country presentations (SGE LSD invited countries) Update on occurrence, vaccination, surveillance after vaccination and general preparedness for LSD in 2021, stocks of vaccine and vaccination plan.**

Dr Morozov invited SGE member countries to present their activities in vaccination and surveillance for Lumpy Skin Disease. Presentations will be made available on the WOAHS SGE LSD website.

- Armenia,

Satenik Kharatyan presented the situation in Armenia. Last outbreak was in 2015. Vaccination as carried out in risk zones. Heterologous Russian Pox LSD vaccine is used. Active LSD surveillance in place. Seromonitoring studies have been conducted to detect LSD antibodies. Goal for 2023 is to vaccinate 60% of animals.

- Azerbaijan,

Natig Javadov presented the vaccination and outbreaks situation, they are now using the Turkish vaccine and they aim to cover 80% of the cattle in the country. They have passive surveillance. They have not had an outbreak since 2014.

- Bulgaria,

Dr Zdravkova gave the country update for Bulgaria. The last occurrence was in August 2016. They have been implementing blanket vaccination in cattle since 2016 and have passive laboratory surveillance on suspect cases and active clinical surveillance in the southern bordering regions of Bulgaria.

In 2022 there was a blanket vaccination with 75% coverage. They aim to phase out vaccination and now focus on vaccination of young non vaccinated animals, importing animals and for possible outbreaks.

- Georgia,

Tengiz Chaligava presented the situation in Georgia. First outbreak in 2016 in Svaneti region. Outbreak management actions: vaccination campaign, spraying of insecticides, banned movement of animals in that district but no culling. Work on outbreak management, vaccination, and awareness. A second outbreak happened in 2018. Use of homologous vaccine was mentioned. Passive surveillance is in place. In 2023 there is no prophylactic vaccination planned. 100k doses are in stock to be used in an emergency, or on request by farmers.

- Greece,

No outbreak reported since 2017. 2022: 450k animals vaccinated (56%). Active and passive surveillance are ongoing, vaccination will be ongoing in 2023, and staff is specifically employed to maintain control.

- Israel,

Michel Bellaiche gave a presentation of the history of LSD present in Israel since 1989, with a major event in 2012-2013. In 2023, one case was reported in a quarantine station in the south of the country; imported from Australia with disseminated, mature lesions on a ship coming directly on a ship coming from Australia. The case was notified to avoid further spread. Immediate vaccination was carried out in the surroundings of the quarantine station. Passive surveillance is ongoing. No vaccination planned for 2023.

- Kazakhstan,

Azim explained that about 8 million animals were vaccinated in Kazakhstan. Active and passive surveillance are ongoing. Vaccination is carried out in the entire country. For 2023 it is planned to vaccinate 6.7 million cattle.

- North Macedonia,

Dr Kondratenko explained that active and passive surveillance had been ongoing since vaccination of all cattle older than six months, using live attenuated vaccines, has been stopped in 2019. Active surveillances, clinical and serological, are in place. Four clinical visits, with minimum 5 weeks between each, will be carried out in 1149 selected farms.

- Turkiye.

Dr Uzar (Serdar) presented the update for Turkiye activities on LSD. In 2022 there were no outbreaks detected in Turkiye. 13 million cattle were vaccinated in 2022. Surveillance is ongoing. Vaccination will continue on a risk base in 49 provinces and PenPox-M SPPV will be used. Visal added that following the

earthquake, a small amount of vaccine has been lost. They have already have ordered the necessary quantities of vaccines, and they do not see issues with control.

After the presentation the E. Commission pointed out that, if needed, the EU may donate at least 300k doses of homologous vaccine for preferential use in the Thrace region, from the EU vaccine bank, in the near future.

- Kyrgyzstan

Dr Adilet Sotovaldiev They started practising preventive vaccination since 2019 in border regions and have been using the VNIZZH vaccine. They aim at 100% vaccination in border areas.

- Uzbekistan

Dr Khabibulo Khamdamom gave a presentation on the situation in Uzbekistan. The disease was never was detected in Uzbekistan, but they have decided to carry out vaccination since 2018n and are not carrying out surveillance. They carry out vaccination of 92% of the cattle every year, using heterologous pox vaccine. They carry on clinical inspection.

## Discussion on SGE-LSD management in Europe region

### Next steps

Dr Van Goethem noted that:

- Vaccination has been very efficient in South East Europe.
- We see ongoing evolutions in Asia and Middle East.
- The offer of at least 300 000 doses from the EU to Turkey is renewed.
- Ukraine has not reported LSD in the last year yet EU is read to offering support against the disease if needed (e.g .through the EU LSD vaccine bank).
- Sharing of information is important( e.g. though WAHIS and ADIS)
- Mass vaccination with effective vaccines is the most efficient measure where the disease is present. Surveillance should be ongoing and be part of an exit strategy, along with contingency plans.
- It is important to pursue disengagement of vaccination when it is not needed anymore, and switch to systematic surveillance.
- The EU vaccine bank is ready and has worked efficiently over the last years to help react quickly to outbreaks.
- The work of the EURL is commendable and vaccine quality control is very important.
- In view of the current epidemiological situation consideration should be given to opening the group beyond the geographical limits of South East Europe and actively involve Central Asia countries.
- From now on the LSD situation in South East European countries can be addressed through annual online meetings and focus of the LSD SGE Group may switch to Central Asia
- It is important to maintain and enhance coordination and cooperation between countries.



## Recommendations - presentation, discussion, and adoption

Based on the information collected, participants were submitted with a set of recommendations drafted by the President. If there are any comments, please send them back before the 10<sup>th</sup> of March.

Considering that:

- Since 2017, no lumpy skin disease (LSD) outbreaks were reported in South-Eastern Europe;
- Last LSD outbreak in Türkiye was reported in Anatolia in 2021;
- In the light of the current favorable epidemiological situation, it is appropriate to further advance the discussion on the regional LSD vaccination exit strategy that was launched in 2018;
- Montenegro, North Macedonia and Kosovo\*, which have ceased vaccination in 2020, and Serbia which ceased vaccination in 2022, in addition to passive surveillance, have active surveillance throughout their territory. This surveillance is based on clinical visits and the collection of samples for serological tests on unvaccinated animals and, in the case of Montenegro, North Macedonia and Serbia, also virological tests;
- LSD annual revaccination continued in 2022 in Bulgaria (homologous), Greece (homologous) and Türkiye (homologous in Turkish Thrace and heterologous in Anatolia);
- The epidemiological situation in Eastern Europe and neighboring regions suggests that a certain risk of disease re-introduction or re-emergence in high-risk areas where LSD vaccination has ceased may still be present, especially in the Anatolian region of Türkiye.
- Recombinant strains have been reported in Central Asia.

### Recommendations on LSD vaccination in 2023

1. Mass vaccination with homologous vaccines should be considered in the countries still affected in order to eliminate the virus. Cessation of LSD vaccination should take place in a coordinated manner ensuring the continuation of the sub-regional coordinated policy of the previous years;
2. The quality of vaccine should be aligned with the requirements of the WOAHA Manual of Diagnostic Tests and Vaccines for Terrestrial Animals. Independent quality control of vaccine should be carried out, in collaboration with the EU Reference Laboratory for Capripox Viruses (LSD Reference laboratory), as a supportive tool to Member countries, prior to vaccination campaigns;
3. The decision of the competent authorities of a country/territory to continue or stop LSD vaccination in this country/territory or a zone thereof, in 2023, should be based, among other factors, on the LSD occurrence in the country/territory or zone in the previous years, the vaccination coverage achieved during the past 2 years and the possible risk of disease introduction from neighboring countries/territories;
4. Based on the available epidemiological information to date, the results of LSD surveillance and LSD vaccination in 2022, LSD vaccination in 2023 should at least continue in Türkiye ;

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5. In all countries/territories, where LSD vaccination was reduced or completely ceased as of 2022, systematic surveillance, active and passive, should continue in 2023. The same applies for all countries / territories where LSD vaccination will be reduced or cease completely as of 2023;
6. All countries/territories in the region of South-East Europe, including those that do not implement vaccination, should make endeavors to maintain the capacity to purchase sufficient vaccine doses, within short time, in case of LSD primary incursion in a previously free country/territory or in case of LSD resurgence or reintroduction in a country/territory or region where vaccination has ceased;
7. To reduce the risk of further spread to South-East Europe, consideration should be given to the use of homologous vaccine in all countries vaccinating , including the remaining part of the territory of Türkiye, i.e. Anatolia, as this will be an important contribution to the overall LSD exit strategy in South-East Europe;
8. Where vaccination is to be still applied, previous recommendations on the preferred type of vaccines (homologous) remain valid. In addition, vaccination should always aim at high vaccination coverage to ensure effectiveness. When heterologous vaccines are used, consideration should be given to the use of a multiple of the sheep dose that has shown to be effective (e.g. 10x), at least in high-risk areas;

### **Recommendations on LSD surveillance in 2023**

9. It is of utmost importance that cessation of LSD vaccination is accompanied by the implementation of appropriate active and passive LSD surveillance, at least for the minimum period indicated by WOAHA standards , to prove the absence of LSD and ensure early detection in case of resurgence or reintroduction from affected areas;
10. Passive surveillance should remain in place, in all countries/territories, throughout the year, with all clinical suspicions subject to lab tests to confirm or rule out LSD. Active surveillance should include at least periodical clinical visits in holdings and serological testing of non-immune animals;
11. Characterization of new strains of the LSD virus should be done, including vaccine-related strains, in close collaboration with LSD Reference laboratories;
12. Further investigations on scientific reports related to field spreading of vaccine-related strain of LSD virus, should be carried out, with support of technical experts, and in close collaboration with LSD Reference laboratories;

### **Recommendations on other activities regarding LSD**

13. All countries/territories in the region should continue to share information on the occurrence of LSD (WAHIS, ADIS, Empres-i) and are encouraged to exchange materials and methods between them and with the EURL. Collection and analysis of data on LSD should also continue, with the support of EFSA;

14. All countries, members of the WOA Regional Commission for Europe, affected or at risk for LSD, should collaborate within the GF-TADs Standing Group of Experts on LSD, and provide information on their decision to continue or stop LSD vaccination in 2023 and subsequent years as well as the LSD surveillance scheme they intend to implement.
15. Given the favorable epidemiological situation in South-East Europe, the Standing Group of Experts on Lumpy Skin Disease will take into account the epidemiological situation in the WOA region of Europe as a whole. To this end the current LSD SGE group is re-designated as “GF-TADs - Standing Group of Experts on Lumpy Skin Disease in Europe”, and remains equally accessible, as a regional coordination/cooperation platform, for both the sub-region of South-East Europe (particularly in case LSD returns), but also for Central Asia countries, as needed;
16. The situation in South-East Europe may be addressed in a yearly online meeting, unless there are major changes in the LSD epidemiological situation in that sub-region (e.g. disease recurrence or increased risk of disease re-introduction).

Since there were no comments during the session, Dr Bernard Van Goethem invited participants to submit their remarks and requests for modifications on the Recommendations by email before the 10<sup>th</sup> of March. The recommendations are available as an annex to this report and are available online.

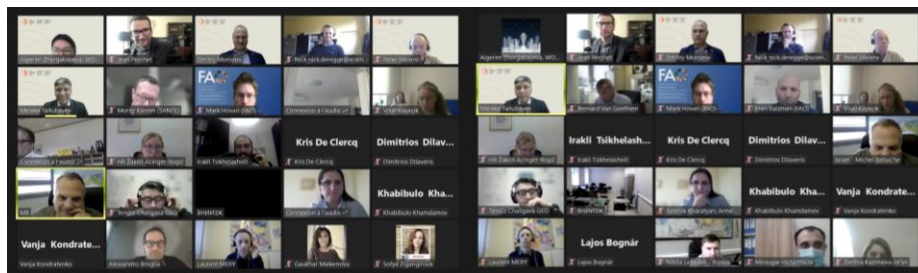
## Conclusions and next meeting

Dr Taitubayev suggested to meet with central Asian countries during an event in the end of March to discuss LSD SGE at the end of March.

Dr Raizman stressed the importance of transparency at international level, as a key element of TADs control. Without transparency, there can be no support.

We would like to thank the European Union and WOA for kindly supporting the organization of the SGE LSD 12 teleconference.

All presentations are available on the GFTADs page of the WOA for Europe website, along with the recommendations.



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List of participants:

The image displays three screenshots of a Zoom meeting participant list. Each screenshot shows a search bar at the top with the text "Q. Trouver un participant". Below the search bar is a list of participants, each with a profile picture, name, and role. The participants are listed in three columns.

**Participants (47) - Screenshot 1:**

- Jean Perchet (Co-hôte, moi)
- Aigerim Zhorgabayeva, WOA... (Hôte)
- Peter Melens
- Mereke Taitubayev (Co-hôte)
- Dmitry Morozov (Co-hôte)
- Simon Stockreiter AUSTRIA (Invité)
- Sofya Zigangirova (Interprète, invité)
- A\_Zdravkova (Invité)
- Alessandro Broglia - EFSA (Invité)
- Alexander Sprygin (Invité)
- Ali Lilo (Invité)
- Anikó Schmidt, Hungary (Invité)
- Bernard Van Goethem (Invité)
- Dimitrios Dilaveris (Invité)
- Eran Raizman (FAO) (Invité)
- FP\_Serbia\_Tatjana Labus (Invité)
- Gaukhar Maikenova (Interprète, invité)
- HR\_Žaklin Acinger-Rogić (Invité)
- Irakli Tsikhelashvili (Invité)
- Israel - Michel Bellaiche (Invité)
- Kazakhstan\_Azim (Invité)
- Khabibulo Khamdamov (Invité)

**Participants (47) - Screenshot 2:**

- FP\_Serbia\_Tatjana Labus (Invité)
- Gaukhar Maikenova (Interprète, invité)
- HR\_Žaklin Acinger-Rogić (Invité)
- Irakli Tsikhelashvili (Invité)
- Israel - Michel Bellaiche (Invité)
- Kazakhstan\_Azim (Invité)
- Khabibulo Khamdamov (Invité)
- Kris De Clercq (Invité)
- Lajos Bognár (Invité)
- Laurent MERY (Invité)
- Marina Sokolova
- Mark Hovari (FAO) (Invité)
- Mirvugar HUSEYNOV (Invité)
- Moritz Klemm (SANTE) (Invité)
- Natig Javadov (Invité)
- Nick nick.deregge@sciensano.be (Invité)
- Nikita Lebedev - Russia (Invité)
- Noemie Glet
- Romania-Florentina Dudu (Invité)
- ROOM B232 03 017A (Invité)
- Satenik Kharatyan; Armenia (Invité)
- sboutsini (Invité)

**Participants (50) - Screenshot 3:**

- Mirvugar HUSEYNOV (Invité)
- Moritz Klemm (SANTE) (Invité)
- Natig Javadov (Invité)
- Nick nick.deregge@sciensano.be (Invité)
- Nikita Lebedev - Russia (Invité)
- Noemie Glet
- Romania-Florentina Dudu (Invité)
- ROOM B232 03 017A (Invité)
- Satenik Kharatyan; Armenia (Invité)
- sboutsini (Invité)
- Sadi Şahverdiyev (Invité)
- Serdar Uzar (Invité)
- Tengiz Chaligava GEO (Invité)
- Tomasz Grudnik
- Vanja Kondratenko (Invité)
- Visal Kayack (Invité)
- Zenfira Kazimova-AFSA (Invité)
- ВНИИЗЖ (Invité)
- Кыргызская Республика Ветеринарн... (Invité)
- Pavel Prutnikov (Invité)
- Turkmenistan (Invité)
- Vasiliki Christodoulou, Cyprus (Invité)

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