

Foot and Mouth Disease (FMD) Situation Report 1

This report provides an update on the FMD situation as of 18 April 2025, according to information shared with WOA.

This report provides an update of the Foot and Mouth Disease (FMD) situation at both the global and European levels, according to the information submitted by countries through the [World Animal Health Information System \(WAHIS\)](#). This information is further integrated with other relevant data sources.

Summary of the situation and key messages including risk management measures

- **Global FMD distribution (2022–2025):** 68 countries and territories have reported FMD presence since 2022.
- **FMD in Europe (2025):** after more 35 years of being FMD-free, Germany reported an FMD type O outbreak in January 2025 but regained its FMD-free status by April. Hungary and Slovakia have reported 11 FMD type O outbreaks since March 2025 (different from the strain identified in Germany).
- **Outbreak statistics:** Hungary reported 5 outbreaks (1064 cases, 1,372 susceptible); Slovakia 6 outbreaks (45 cases, 7,440 susceptible).
- **Control measures:** the three countries have implemented biosecurity measures including stamping out, movement control, disinfection, and surveillance. Slovakia applied emergency suppressive vaccination; Hungary has not.
- **EU-level response:** includes EUVET deployment, regionalisation measures, immediate culling, emergency vaccination, and movement restrictions based on EU regulations.
- **Livestock density context:** outbreaks occurred in areas of moderate cattle density — Hungary (14 cattle/km²) and Slovakia (19 cattle/km²).
- **Media and public attention:** Media coverage peaked on 7 April; increased again after 17 April following new outbreaks. Misleading media reports have contributed to public concern, in particular rumors of a man-made virus and human infection risks are circulating



- **Risk management measures taken from WOA:**
 - Suspension of FMD free status of infected countries
 - Situational awareness maintained through coordination with DG SANTE
 - Webinar on FMD organised under the GF-TADs framework
 - Public messaging about FMD shared through WOA's social media channels around a recently published Q&A [Foot and Mouth Disease \(FMD\) cases in Europe - WOA – Europe](#) shared through WOA's social media channels. Messages include:
 - Early detection and rapid response are critical to contain any outbreak. WOA is fully committed to supporting its Members to prevent and rapidly respond to the risk associated with FMD along with its partners and network of reference laboratories.
 - While FMD poses a significant economic threat to the livestock industry, its zoonotic potential is not significant.
 - Coordination with INTERPOL to develop key messages for Law Enforcement in supporting the local FMD responses

Background information

Introduction to the disease

FMD is a highly contagious viral disease affecting cloven-hoofed animals such as cattle, pigs, sheep, and goats. It is caused by the Foot-and-Mouth Disease Virus (FMDV), Picornaviridae family and Aphthovirus genus. The virus has seven serotypes (O, A, C, SAT1, SAT2, SAT3, and Asia1), which do not confer cross-immunity. FMDV spreads through direct contact, aerosolized virus, contaminated feed, and fomites. It primarily affects epithelial tissues, leading to vesicular lesions on the tongue, hooves, and udder, causing severe economic losses due to decreased productivity and trade restrictions. FMD is commonly reported in parts of Africa, Asia, and the Middle East but has been eradicated in most high-income countries. The virus spreads rapidly through animal movement and airborne transmission. Outbreak control is managed via vaccination, culling, and application of biosecurity measures. While mortality is low in adult animals, economic impacts are significant due to production losses and trade restrictions. African buffalo are known reservoirs of FMD virus in sub-Saharan Africa, while other species like deer and wild boar are susceptible in Europe (Niedbalski et al., 2023; Vosloo et al., 2005). Wildlife can serve as indicators, victims, bridge hosts, or maintenance hosts for these diseases (Gortázar et al., 2021).

FMD global distribution (2022 – 2025)

The geographical distribution of FMD according to information reported to WOAH since 2022 is shown in figure 1. Red areas represent countries and zones where the disease was reported as present, yellow areas represent countries and zones where the disease was reported as suspected, while green areas represent countries and zones where the disease was reported as absent during the period. Since 2022, 68 countries and territories have reported the presence of the disease at least once.

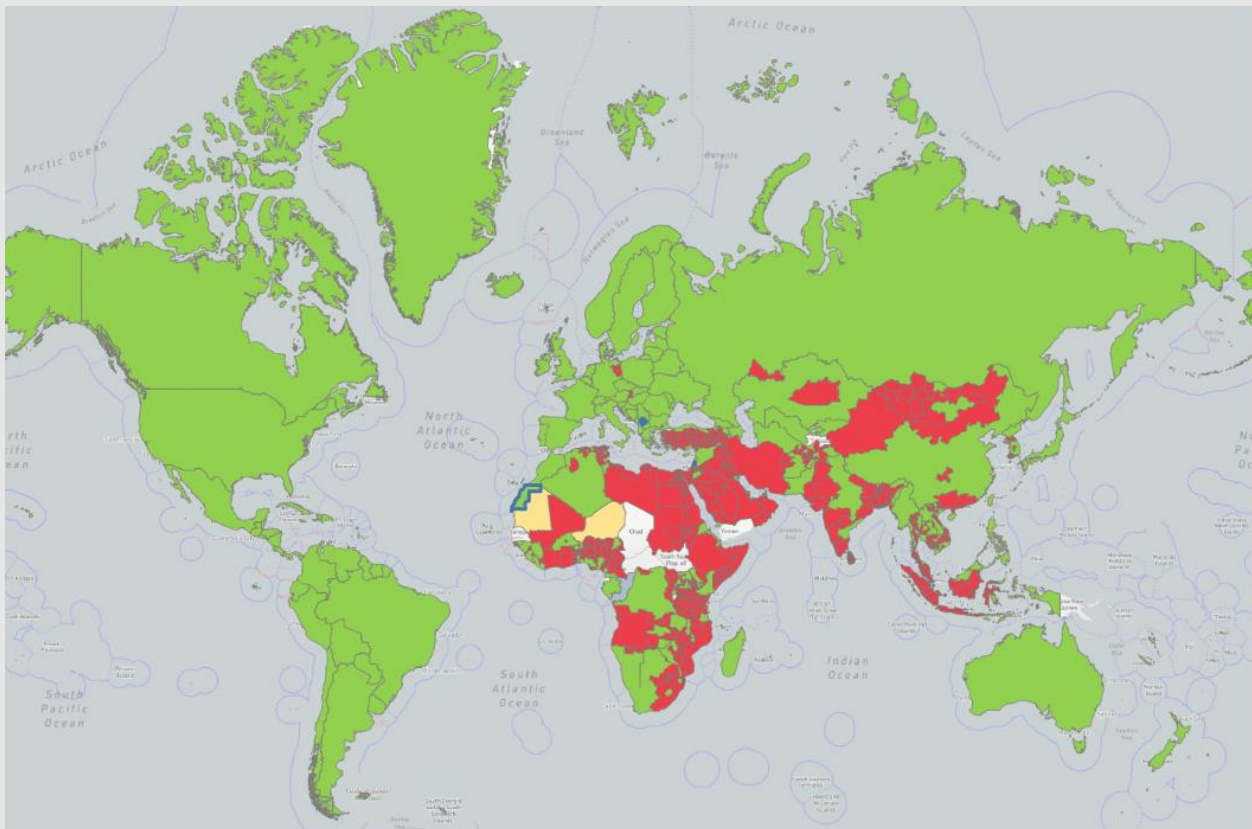


Figure 1. Map of FMD distribution in the period 2022 – 2025 (as of 18 April 2025). Red areas indicate disease present, yellow areas indicate disease suspected and green areas indicate disease absent.

Epidemiological update in Europe

The EU was free from FMD since 2011, with the last outbreak occurring in Bulgaria (Bulgaria's FMD-free status was reinstated with effect from 31/08/2012). On 10 January 2025, one FMD outbreak was confirmed in Germany in a buffalo farm. Following the immediate notification received from the Delegate of Germany on an outbreak of FMD in Brandenburg, the "FMD-free country where vaccination is not practised" status of Germany as recognised by the World Assembly of Delegates in terms of Resolution No. 19 adopted in May 2024 was suspended with effect from 9 January 2025. A containment zone was established within Brandenburg and Berlin and the "FMD-free country where vaccination is not practised" status of Germany was reinstated with effect from 12 March 2025, with the exception of the territory of the containment zone. The outbreak was well contained and in accordance with Resolution No. 15 of the 2020 Adapted Procedure and the Standard Operating Procedures (SOP), WOAHA approved the dossier for the reinstatement of the FMD-free status of Germany on 14 April 2025, allowing the WOAHA status "FMD-free where vaccination is not practiced" to be recovered for the entire German territory as of 14 April 2025. This event was due to FMD serotype O - O/ME-SA/SA-2018 lineage.

In March 2025, FMD index outbreak and secondary outbreaks started in Hungary, beginning on 03 March in Kisbajcs, confirmed the 06 March and reported to WOAHA the 07 March. Following the immediate notification received from the Delegate of Hungary, the "FMD free country where vaccination is not practised" status of Hungary as recognised by the World Assembly of Delegates in terms of Resolution No. 19 in May 2024, is suspended with effect from 3 March 2025. Initially the outbreaks appeared to be under control, but on 21 March three outbreaks (started 20 March) were reported in Slovakia close to the Hungarian border and on 25 March a fourth outbreak was reported (started 24 March) also close to the Hungarian border. Following the immediate notification received from the Delegate of Slovakia, the "FMD free country where vaccination is not practised" status of Slovakia as recognised by the World Assembly of Delegates in terms of Resolution No. 19 in May 2024, is suspended with effect from 20 March 2025. On 26 March Hungary reported a new outbreak less than 10 km to the Austrian border. On 30 March Slovakia reported a 5th outbreak in Plavecký Štvrtok, marking the spread of the disease 60 km to the north. Another outbreak was reported by Hungary on 02 April, and an additional one on 04 April. On 18 April Hungary reported its fifth outbreak. Currently there are 6 outbreaks reported in Slovakia and 5 outbreaks in Hungary. (map with the current situation below). The event in Hungary and Slovakia is due to FMD serotype O - O/ME-SA/Pan-Asia2/ANT-10 sub-lineage, which is different than the detection in Germany earlier this year.

The number of outbreaks, cases and losses recorded in the reported outbreaks by country are shown in table 1.

Country	Outbreaks	Cases	Susceptible
Hungary	5	1064	1372
Slovakia	6	45	7440

Table 1. Number of outbreaks, cases and losses in Hungary and Slovakia

The timeline of outbreaks occurrence by country is shown in figure 2.

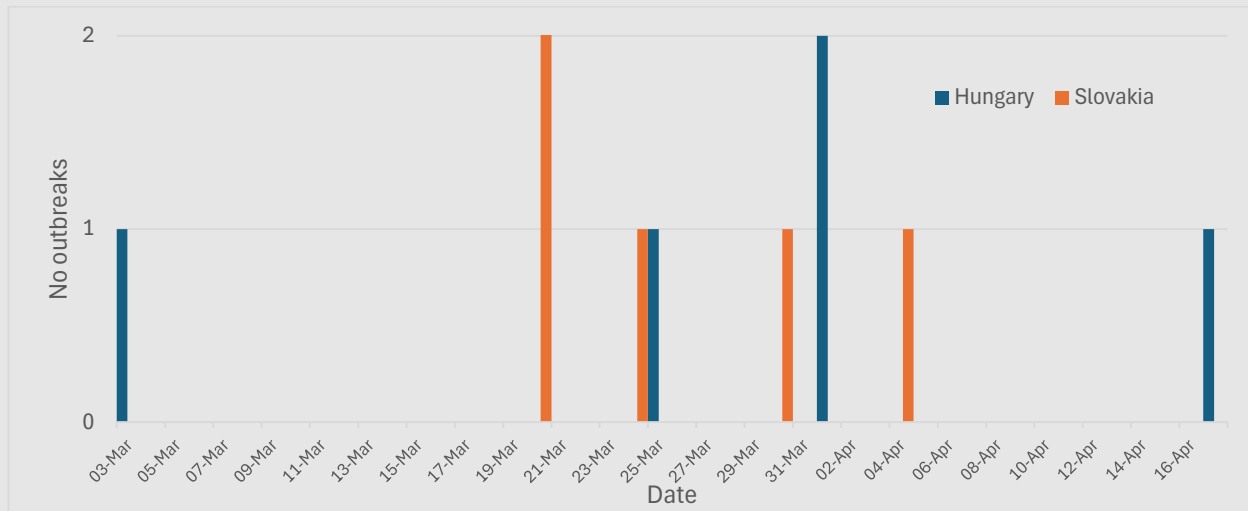


Figure 2. FMD outbreaks dynamics since March 3 and as of 18 April

The detailed map showing the geographical distribution of outbreaks is shown in figure 3.

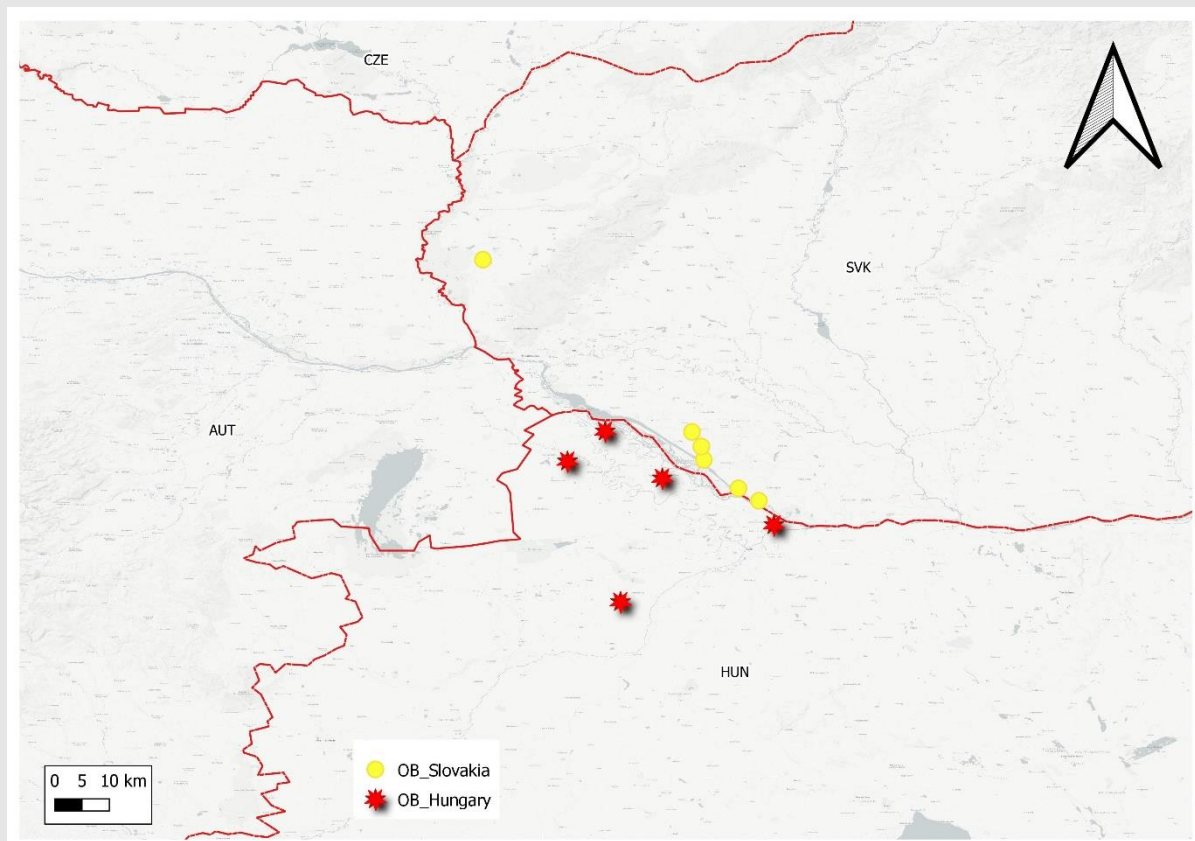


Figure 3. FMD outbreaks distribution in Hungary and Slovakia as of 18 April

The control measures reported by the countries, as per information shared with WOA and as of 18 April are provided in table 2.

Control measures at event level	Hungary		Slovakia	
	Domestic animals	Wild animals	Domestic animals	Wild animals
Control of wildlife reservoirs			Applied	Applied
Disinfection	Applied		Applied	
Movement control	Applied		Applied	Applied
Official destruction of animal products	Applied		Applied	
Official disposal of carcasses, by-products and waste	Applied		Applied	To be applied
Quarantine			Applied	
Stamping out	Applied		Applied	
Surveillance outside the restricted zone	Applied	Applied		
Surveillance within the restricted zone			Applied	
Surveillance within the restricted zone	Applied	Applied		
Traceability	Applied		Applied	
Vaccination in response to the outbreak (s)			Applied	
Zoning			Applied	

Table 2. Control measures applied and to be applied in domestic animals and wildlife in Hungary and Slovakia

In addition to the information reported by the countries to WOA, please find below additional information at the EU level ¹:

- EU Coordination/support through EU Veterinary Emergency Team (EUVET) dispatched on the spot and EU Reference Laboratory activated
- EU Regionalization/zoning: since Monday 11 March 2025, the Commission adopted 5 Commission Implementing Decisions with emergency measures demarcating regionalization at EU level: a) restricted zones in Hungary, Slovakia and Austria; b) protection (3km) and surveillance (10km) zones with severe restrictions; c) 3 sufficiently large “further restricted zones” with moderate restrictions that confer protection to the rest of the EU
- Measures taken in Hungary, Slovakia based on Regulation (EU) 2016/429 and Delegated Regulation (EU) 2020/687 include:
 - immediate on-the-spot killing and safe disposal of all animals of susceptible species kept in the affected establishment (coupled with pre-emptive slaughter/killing determined by the national authorities)
 - emergency suppressive vaccination in some outbreaks
 - cleaning and disinfection of the premises
 - prohibitions of movements (3-10km) of susceptible animals and their products
 - intensive surveillance in the 3 and 10 km zones
 - the prohibition to move animals and products from the further restricted zone (some derogations can be granted by authorities after risk assessment and risk mitigation measures applied like heat treatment of products)
 - Austria did not experience any outbreak but applied preventively some movement control measures and surveillance in restricted area close to the borders.
- EU vaccination strategies for FMD
 - Emergency suppressive vaccination is applied
 - Protective vaccination is not applied
- Biosecurity remains the cornerstone of preventive measures in Europe
 - Stamping out is still always a compulsory measure in all establishments where FMD

¹ https://food.ec.europa.eu/document/download/d44d5193-7a51-4beb-92a9-0f141d0c50e3_en?filename=comm_ahac_20250407_pres06.pdf

is detected

Finally, to highlight the impact of the spread of the disease on livestock holdings, livestock density is plotted against the outbreak distribution in the background (figure 4). Livestock distribution (in shades of blue) is considered according to FAO data sources: FAO GLW 4: gridded livestock density (as of 2020). Outbreaks in Hungary are in areas with a cattle density of 14 cattle/sq km, while in Slovakia the average cattle density in affected areas is 19 cattle/sq km.

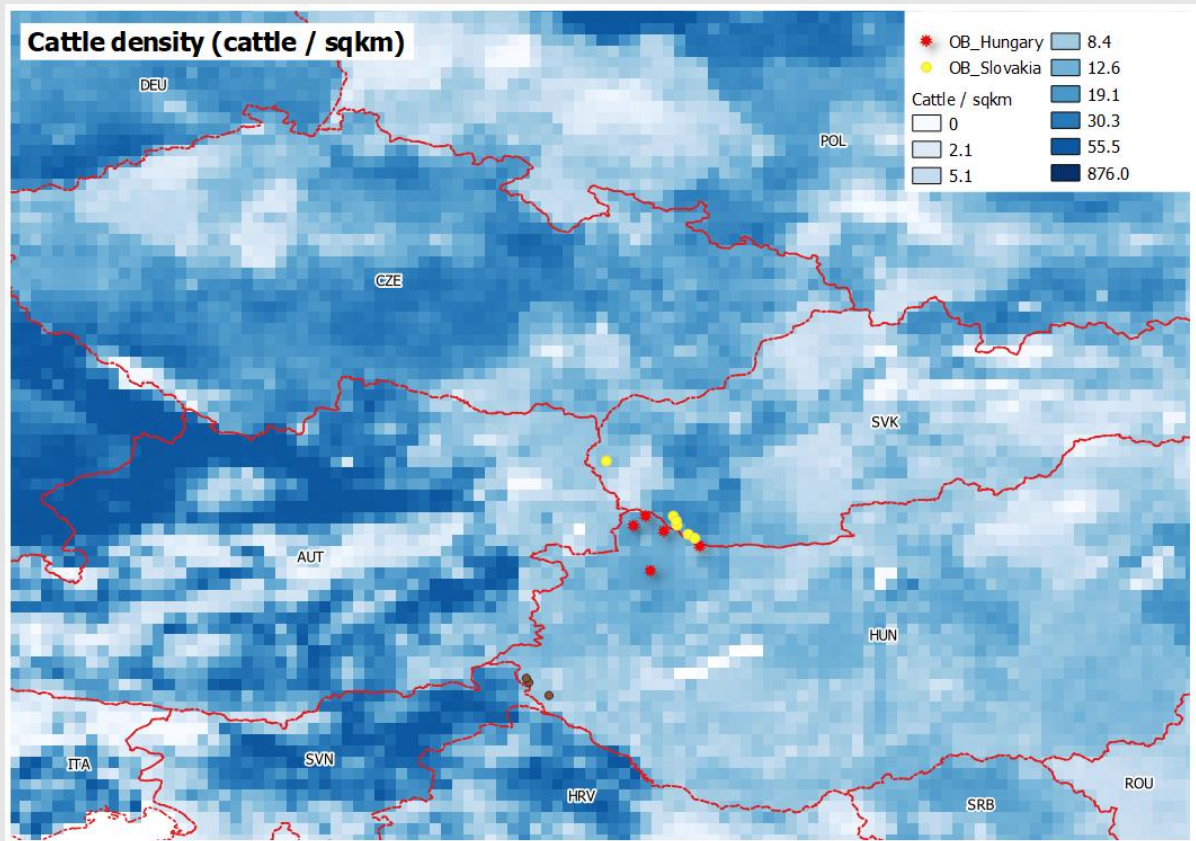


Figure 4. FMD outbreaks distribution in Hungary and Slovakia as of 18 April plotted against livestock density. The density of cattle based on [FAO GLW 4: Gridded Livestock Density](#) (as of 2020) is shown in the background in shades of blue.

Media attention

The dynamics of news (based on news collected by the WOAHP epidemic intelligence activity through the EIOS system²) since the beginning of the FMD event in Hungary is shown in figure 5. After an initial period of decline in the number of news items circulating following the apparent containment of the index outbreak, media coverage has gradually increased since 15 March. A peak was reached on 7 April with 263 news items detected in EIOS. After a decrease in news at the beginning of the week due to the last outbreak detected on 17 April, a new increase in news was observed.

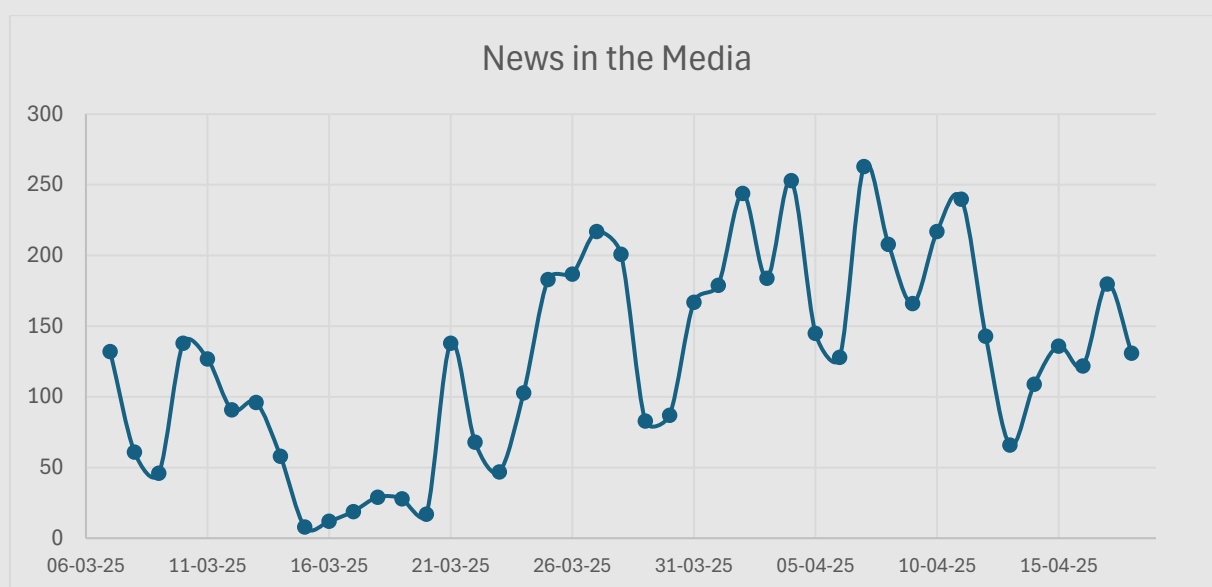


Figure 5. Number of news collected by the WOAHP epidemic intelligence activity through the EIOS system

Combatting mis/disinformation and alarm

Since the beginning of the FMD event in Hungary there is some circulating news which can be classified as either misinformation or disinformation. Other news items in circulation, even if they cannot be classified as mis/disinformation, may cause alarm due to the tone used. In this report, WOAHP captures and summarises some of the those which WOAHP considers should be put in context and clarified to avoid unjustified alarm.

Speculations on artificial origin of virus

While there is no evidence available, some media and political figures have raised the theory of a “biological attack”, claiming the FMD virus might be artificially created. Bioterrorism fears were raised, fueled by unconfirmed reports and speculation that the FMD outbreaks may have been deliberate. A virologist has publicly warned against jumping to conclusions, emphasizing the need for scientific evidence and responsible communication. **WOAHP Clarification: Please note that to date there is no scientific evidence that the FMD event was caused by a terrorist attack, nor that the virus is of non-natural origin. Epidemiological investigations are still ongoing on the transmission pattern. All plausible hypotheses to determine the origin of the outbreaks are considered and assessed, based on the available data and evolving evidence.**

² <https://www.who.int/initiatives/eios>

Public alarm over human transmission

Misleading headlines have stirred concerns about possible human infections, despite scientific consensus that FMD poses minimal risk to people. **WOAH Clarification: While FMD poses a significant economic threat to the livestock industry, its zoonotic potential is not significant. According to scientific data, only a few human cases with very mild clinical signs (blisters on the fingers, palms, soles of the feet or mouth sores) have been reported. Thus, FMD is not considered a public health threat and should not be managed as a zoonosis.**

Recommendations

- WOAHA highlights the importance of implementing strict biosecurity, an early detection and response system, while maintaining a high level of awareness on the disease among all actors involved.
- WOAHA urges its Members to continue to promptly notify the occurrence of FMD and to share the relevant epidemiological information.
- WOAHA reminds the importance to apply international standards and science based policy to ensure necessary and proportionate measures to prevent introduction and spread of FMD through movement of animals and their products

More information and WOAAH resources

- WOAAH FMD page - [Foot and mouth disease - WOAAH - World Organisation for Animal Health](#)
- WOAAH Europe Regional page on [Foot and Mouth Disease \(FMD\) cases in Europe - WOAAH – Europe](#)
- GF-TADs page on [FMD](#)
- WOAAH FMD Reference Laboratories : [Homepage | World Reference Laboratory for Foot-and-Mouth Disease](#)
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For any press inquiry on FMD, e-mail us at media@woah.org.