



FAO/OIE  
**GF-TADs**  
GLOBAL FRAMEWORK FOR THE  
PROGRESSIVE CONTROL OF  
TRANSBOUNDARY ANIMAL DISEASES

**GF-TADS for Europe**  
**Fourth Meeting of the Regional Steering Committee (RSC4)**

AFSCA, Brussels January 26-27 2012

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Recommendation No. 2  
Final Version

**Enhancing prevention and control of priority diseases in Europe**

CONSIDERING

1. The list of priority diseases established by the Committee for Europe in 2005 and the epidemiological situation that prevails in Europe in 2012 and its evolution since the RSC3 (February 2010); in particular, brucellosis became a growing concern in Central Asia / Caucasus both in animal and human populations;
2. The specific recommendations adopted during the three previous meetings of the GF-TADs for Europe Steering Committee on the priority diseases, and their implementation;
3. The Global eradication of Rinderpest declared in 2011;
4. The OIE Global Conference on Rabies which took place in Seoul, (Rep. of Korea) in September 2011, and its recommendations;
5. The FAO-OIE Global Conference on the control of FMD to be held in Bangkok, (Thailand) in June 2012, and the draft FAO-OIE Global Strategy for the Control of FMD;
6. The 25<sup>th</sup> Conference of the OIE Regional Commission for Europe to be held in Fleesensee, (Germany) in September 2012;
7. The GF-TADs for Europe 5-year Action Plan (preliminarily) endorsed during the RSC4 (see REC4 / Recommendation #1 on Governance);
8. The respective portfolio of stakeholders implemented in the region over the past 2 years with regards to the prevention and control of TADs and the reinforcement of Veterinary Services through the OIE PVS Pathway;
9. The need for continuous intra- and inter-regional and cross-border collaboration and concerted action for preventing and controlling diseases having a major social, economical and public health impact and posing a threat to European countries;

## THE GF-TADs FOR EUROPE STEERING COMMITTEE DECIDES THAT

1. The list of priority diseases for Europe be revised to include Brucellosis<sup>1</sup>.

## THE GF-TADs FOR EUROPE STEERING COMMITTEE RECOMMENDS THAT THE GF-TADS 5-YEAR ACTION PLAN BE IMPLEMENTED; IN PARTICULAR THAT:

1. FMD – The European countries
  - (i) be urged to participate in the next FAO-OIE Global Conference on FMD;
  - (ii) dedicate funds to implement the Global Strategy on FMD, once adopted;
  - (iii) implement the Global Strategy on FMD; in particular, in countries where the situation is endemic, countries move at least one stage up along the PCP pathway within the next 5 years; engagement into the FMD West Eurasia roadmap under the GF-TADs umbrella will be crucial to achieve this and countries are encouraged to carry out assessment (self or external procedure) of their PCP stage;
  - (iv) being in compliance with FMD PCP stage 3 consider asking for official endorsement of their National FMD Control Programme by the OIE.
2. ASF –
  - (i) The European countries be fully prepared to address ASF should the disease expand in the region. In particular, countries should develop ASF contingency plans and compensation schemes together with the main stakeholders involved (farmers and small holders);
  - (ii) Regional meetings – for at-risk countries in particular - be organized in 2012 under the GF-TADs umbrella to improve information exchange and collaboration among countries and provide technical guidance on point (i); training tools developed within the ASF Risk programme be promoted and used for this purpose;
  - (iii) OIE, FAO and EU continue to closely monitor the epidemiological situation and promote surveys in the Region to improve knowledge on the role of small holders and wildlife in the epidemiology of the disease, as well as of ticks;
  - (iv) OIE, FAO and EC engage with the Russian authorities to assist them if requested, notably through the support of the FAO-OIE CMC-AH and/or the EU Emergency team;
  - (v) The OIE establish an Office in Moscow and that this office be involved in supporting ASF control efforts in Europe.
3. PPR –
  - (i) lessons be learnt from the EC/ PPR project in Turkey, including communication issues, and be used in other countries in the region;
  - (ii) as often as possible, support to PPR prevention and control activities be combined with FMD activities, along the lines of the output 3 of the FAO-OIE FMD Global Strategy;
  - (iii) FAO and OIE establish a GF TADS PPR Working Group as already recommended by the GSC and further explore the need to develop a Global Strategy for the control of PPR to help the control of PPR in the region and worldwide;
  - (iv) PPR be added to the list of diseases with an OIE official disease status recognition pathway.
4. CSF –

Actions already engaged to control classical swine fever in Europe, in particular by the EU in the Western Balkans and the Black Sea sub-regions and also throughout Europe concerning wild boars, be continued in the light of their success and be extended to other countries.
5. Rabies –
  - (i) The European countries commit to implement actions as recommended by the OIE Global Conference on Rabies in Korea (Republic of), September 2011; in particular, rabies should be made a notifiable disease both in domestic and wildlife populations in all European countries;

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<sup>1</sup> RSC4 Recommendations on Brucellosis (see point 7) are particularly developed as a result of this new inclusion.

- (ii) Intersectoral collaboration between animal and human health authorities be reinforced, using rabies as a flag ship disease to implement the One Health agenda;
  - (iii) Management of stray dog population be implemented in accordance with the OIE standard on stray dog population management (chapter 7.7 of the OIE Terrestrial Animal Health Code).
6. HPAI –  
European countries remain fully committed to the prevention and control of HPAI despite the absence of outbreaks in 2011 (with the exception of one outbreak in Israel), given that the situation remains of great concern in Asia and nearby Egypt.
7. Brucellosis -  
  - (i) The precise brucellosis sanitary situation of all European countries be assessed based on WAHIS;
  - (ii) Countries in the region, where the precise situation with respect to Brucellosis in cattle and small ruminants is not precisely known, be encouraged and assisted to conduct surveys to determine the prevalence of brucellosis in their livestock;
  - (iii) Critical control points for brucellosis control, in particular to stop further spread in the animal population and to limit risks to animal caretakers and consumers, be assessed;
  - (iv) Veterinary Services be supported to initiate or intensify their brucellosis control and veterinary public health related activities including the initiation of further development of indispensable support systems, in particular animal identification and registration systems;
  - (v) Quality of vaccines and sub-regional harmonisation of vaccination policies be carefully considered;
  - (vi) Cooperation between national laboratories and FAO and OIE Reference Laboratories be increased and national laboratories be supported to develop their capabilities regarding brucellosis diagnostics and serology by using, among others, the Laboratory Twinning programme of the OIE;
  - (vii) Intersectoral collaboration between animal health and human health authorities be reinforced under the One Health agenda.
8. Rinderpest -  
  - (i) All European countries respond to the FAO-OIE questionnaire on Rinderpest virus sequestration;
  - (ii) FAO and OIE analyse the responses to the questionnaire and propose appropriate activities.
9. Reinforcement of VS -  
  - (i) Countries that have not yet requested an OIE PVS evaluation and/or a Gap Analysis mission consider doing so, on a voluntary basis;
  - (ii) In accordance with the results of previously conducted OIE PVS evaluation and/or Gap Analysis missions, countries consider to engage into the 'treatment phase' of the OIE PVS Pathway, by requesting legislation missions and twinning programme (laboratories, Veterinary Statutory Bodies, veterinary education establishments) to the OIE, on a voluntary basis;
  - (iii) the reinforcement of VS in the region be supported through the OIE PVS Follow Up missions, upon countries request, on a voluntary basis;
  - (iv) Donors and technical agencies be asked to finance programmes to implement the activities resulting from the OIE PVS Pathway outcomes.
10. Others -  
  - (i) All stakeholders in the region consider implementing relevant activities under the GF-TADs umbrella and therefore ask the RSC for their "labelling" via the regional secretariat;
  - (ii) The GF-TADs Steering Committee for Europe maintain close relations with the GF-TADs Steering Committees for the Middle-East and Africa in particular, and collaborate as appropriate with Regional Specialised Organisations (RSOs) and Regional Support Units (RSUs) of those regions to prevent and control priority diseases for Europe present in neighbouring regions;
  - (iii) In the context of the current epidemiological knowledge regarding infection with Schmallenberg virus in Europe, trade restrictions not be imposed to countries notifying the disease, and monitoring of the infection be continued and enhanced, as well as research and cooperation;
  - (iv) European countries ensure a close cooperation and exchange of information between the relevant competent authorities involved in border controls, including customs services, in order to reduce illegal movement of animals and animal products.