



Organisation
Mondiale
de la Santé
Animale

World
Organisation
for Animal
Health

Organización
Mundial
de Sanidad
Animal

23rd Conference of the
OIE Regional Commission for Europe
Vilnius (Lithuania), 16-19 September 2008

FINAL REPORT

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List of Abbreviations

| | |
|----------|--|
| AI | Avian Influenza |
| ASF | African swine fever |
| BSE | Bovine spongiform encephalopathy |
| BT | Bluetongue |
| BTV | Bluetongue Virus |
| BTWC | Biological and Toxin Weapons Convention |
| BTSF | Better training for safer food |
| CCHF | Crimean Congo haemorrhagic fever |
| CSF | Classical swine fever |
| CVO | Chief Veterinary Officer |
| DEFRA | Department for Environment, Food and Rural Affairs |
| DG SANCO | Directorate General for 'Health and Consumers' |
| EAAP | European Association for Animal Production |
| EC | European Commission |
| ECO | Economic Cooperation Organisation |
| EFSA | European Food Safety Authority |
| EMA | European Medicine Agency |
| EU | European Union |
| EUFMD | European Commission for the Control of Foot and Mouth Disease |
| FAO | Food and Agriculture Organization of the United Nations |
| FESASS | European Federation for Animal Health and Sanitary Security |
| FMD | Foot and mouth disease |
| FVE | Federation of Veterinarians of Europe |
| GF-TADs | Global Framework for the Progressive Control of Transboundary Animal Diseases |
| GLEWS | Global Early Warning System |
| HPAI | Highly Pathogenic Avian Influenza |
| IATA | Air Transport Association |
| ICLAS | International Council for Laboratory Animal Science |
| JRC | Joint Research Centre |
| MLV | Modified live vaccines |
| NATO | North Atlantic Treaty Organization |
| OIE | World Organisation for Animal Health |
| OWOH | One World-One Health |
| PVS | Performance of Veterinary Services |
| RVF | Rift Valley fever |
| SCAD | Scientific Commission for Animal Diseases |
| SPS | Agreement on the Application of Sanitary and Phytosanitary Measures of the WTO |

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| SRR | Sub-Regional Representation |
| STDF | Standards and Trade Development Facility |
| TADs | Transboundary Animal Diseases |
| TAIEX | Technical Assistance and Information Exchange Instrument |
| UNICEF | United Nations Children's Fund |
| WHO | World Health Organization |
| WTO | World Trade Organization |
| WAHID | World Animal Health Information Database |
| WAHIS | World Animal Health Information System |
| WG | Working Group |
| VHS | Viral haemorrhagic septicaemia |
| VICH | International Cooperation on Harmonisation of Technical Requirements for Registration of Veterinary Medicinal Products |
| VS | Veterinary Services |

Introduction

1. Following the kind invitation of the Government of Lithuania, the 23rd Conference of the OIE Regional Commission for Europe was held in Vilnius from 16 to 19 September 2008.
2. A total of 173 participants, comprising OIE Delegates and/or nominees of 44 Members and 2 Observer Countries and senior officers from 5 regional and international organisations attended the conference. In addition, representatives of the private sector as well as private veterinary organisations from the region and from the host country were present. Dr Barry O'Neil, President of the OIE International Committee; Dr Bernard Vallat, OIE Director General; Dr Prof Nikola Belev, President of the OIE Regional Commission for Europe and OIE Regional Representative for Eastern Europe; Dr Caroline Planté, OIE Sub-regional Representative for Europe; Dr Gastón Funes, Head of the OIE Regional Activities Department; and Dr Francesco Berlingieri, Deputy Head of the Animal Health Information Department also participated to the Conference. The speakers presenting Technical Items I and II, namely, Dr Alex Thiermann, President of the Terrestrial Animal Health Code Commission and Prof Vincenzo Caporale, Director of the Istituto Zooprofilattico Sperimentale dell'Abruzzo e del Molise "G. Caporale", Teramo, Italy and President of the OIE Scientific Commission for Animal Diseases, honoured the Conference by their presence.

Tuesday 16 September 2008

Opening Ceremony

3. Dr Prof Nikola Belev, President of the OIE Regional Commission for Europe and OIE Regional Representative for Eastern Europe, expressed his pleasure at welcoming the participants at the 23rd Regional Conference in Vilnius. He extended his sincere gratitude, on behalf of the OIE Regional Commission, to the Government of Lithuania and colleagues for their generosity in hosting and preparing this important Conference. He expressed his appreciation for the warm welcome received in Vilnius. He stressed the importance of the meeting for the region as there are currently many challenges regarding animal disease control, good governance and capacity building for Veterinary Services.
4. Prof Belev underlined the fact that the Prime Minister of Lithuania, Mr Gediminas Kirkilas was present at the conference and that being the Prime Minister he has had a great contribution to the development and consolidation of Veterinary Services. He thanked also the previous President of Lithuania, Mr Brazauskas, for honoring to participants with his presence.
5. Dr Prof Belev opened the ceremony inviting the Prime Minister to give his address.
6. Mr Gediminas Kirkilas, Prime Minister of the Republic of Lithuania, stressed his gladness at hosting the 23rd Conference of the OIE Regional Commission for Europe in Lithuania.
7. The Prime Minister commented that the attention shown by the OIE reflects the significant contribution of the Lithuanian State Food and Veterinary Service to the activities of the World Organisation for Animal Health, which is a high-level organisation on the international scene.
8. He gave details on the role of the OIE in ensuring high standards in the international trade of animals and animal origin products, the sanitary standards governing international trade, and the control methods for animal diseases, and in assisting the veterinary services of members to meet the standards, directives and recommendations of the Organisation and apply the measures of the Sanitary and Phytosanitary Agreement (SPS). He also mentioned the collaboration between the OIE and the World Trade Organisation (WTO) on that issue.
9. The Prime Minister also pointed out the close collaboration of the OIE and the State Food and Veterinary Service of Lithuania since the reestablishment of the independence of Lithuania 18 years ago. A collaboration that has resulted in a favourable animal disease situation in Lithuania and the provision of a beneficial environment for export of Lithuanian foodstuffs into different countries of the world.

10. He commented on the EU animal health strategy for the years 2007–2013, which is based on the principle "prevention is better than cure" and on the standards and guidelines of the OIE. This strategy will allow for the modification of existing systems for the protection of animals with regard to ethical, social and economic factors.
11. He suggested that when looking for a successful modernisation of the available systems for the protection of animals, it was important to strengthen and intensify the current cooperation between the EU and other countries and to continue the work and agreements with the OIE.
12. Mr Gediminas Kirkilas, Prime Minister of Lithuania, finished by saying that he hoped that the Conference would serve as a tool for strengthening cooperation between the veterinary services of different countries, for agreeing on the practical application of the standards and for the design of a common international policy in the sectors of animal health and food safety.
13. He declared the Conference open and wished participants productive discussions and an enjoyable time in Vilnius.
14. Dr Prof Kazimira Danutė Prunskienė, Minister of Agriculture of Lithuania, expressed her pleasure in welcoming all honourable participants to the 23rd Conference of the OIE Regional Commission for Europe. She also said that she was delighted that her country was hosting this Conference as it is an "agricultural country, with the livestock industry being one of the priority goals of the agricultural policy, thus a significant role is attached to the assurance of animal health and the supply of healthy and safe food to the market".
15. The Minister made reference to the 59th international conference of the European Association for Animal Production (EAAP) held in Vilnius some time ago. She pointed out that "Lithuanian livestock specialists have been provided exceptional chances for establishing close contacts, for presenting Lithuania and the science of stockbreeding, and for drawing the attention of the scientists, experts and the politicians".
16. She spoke of the exceptional importance of animal health and highlighted the new Animal Health Strategy of the European Union for the years 2007-2013. This strategy is based on the principle "prevention is better than cure", and the main goals pursued are to ensure a high level of public health and food safety, and to improve animal health through a lowered incidence of diseases and in doing so to support farms and the rural economy, to encourage good farming practices and the welfare of animals, thus limiting health-related hazards. The concept of animal health and food safety "from stable to table" and even the broader concept "from field to fork" call for the implementation of specific measures on animal health at all stages of the food chain: provision of healthy foodstuffs, rearing of healthy animals, primary production, and supply to the final consumer.
17. Prof Kazimira Danutė Prunskienė recalled an important historical issue regarding Lithuania's membership of the OIE. The next year the OIE will be marking its 85th anniversary and that Lithuania became a member of the OIE in 1932, however, after the Second World War, when Lithuania was annexed to the Soviet Union its membership of the OIE was suspended. After regaining independence the Government of the Republic of Lithuania submitted an application to the OIE in 1992 on the re-institution of its membership, which was readily granted, and today we have been enjoying the 16th year of the membership.
18. She reiterated the importance of the OIE activities regarding the drawing up and application of uniform veterinary principles and requirements in all Member Countries and Territories.
19. She concluded by wishing that through joint efforts and constant cooperation we will be able to ensure public health and animal welfare, will breed healthy animals and supply the markets with safe and high quality foodstuffs.
20. Dr Algirdas Seselgis, Vice-Minister of Health of Lithuania, welcomed all participants and thanked them for the opportunity to take part in the event. He pointed out that the State Food and Veterinary Service of Lithuania has a major role in the activities of the OIE Regional Commission for Europe and that it has been actively engaged in the harmonisation of veterinary and food safety standards and in implementing the legislation governing the sectors.

21. He remarked that the OIE has an important role in the global movement of foodstuffs and animals and in the assurance of animal health and food safety. That is why *“the implementation of the adopted decisions is as important as the decisions adopted”*
22. Dr Algirdas Seselgis commented that this Conference will contribute to the effectiveness and pragmatism of the decisions of the OIE Regional Commission for Europe.
23. He explained that the Ministry of Health of the Republic of Lithuania works closely with the State Food and Veterinary Service and the proof of this close collaboration is evident in the good animal health situation of the country.
24. He concluded by stressing the he was sure that this conference was an important step forward in developing joint actions in fighting not only animal diseases but also the diseases that are common to both animals and humans.
25. Finally, the Vice-Minister wished participants an enjoyable stay in Lithuania and hoped that their time at the Conference would be very productive.
26. Dr Barry O’Neil, President of the OIE International Committee addressed to participants expressing how special it was for him to participate in regional meetings. He welcomed all participants to the 23rd Regional meeting.
27. Dr O’Neil recalled his message at the 22nd conference in Lyon where he emphasized that Europe is a very important region for OIE not only for historical reasons but also because Europe has always been a strong leader in the field of animal health and in supporting the work of the OIE.
28. He mentioned current challenges and highlighted that it was necessary to do everyday more and more to address these challenges. He gave an example regarding the enormous changes in the world and how nowadays things have changed. “10 years ago we wouldn’t believe that Germany or Sweden would have cases of bluetongue but now it is moving further Northern in Europe every year”. He pointed out that, these challenges are requiring greater efforts to reduce the risks faced for many Members, both from developing and developed countries.
29. Dr O’Neil underlined how the world is absolutely connected regarding economic, social or cultural aspects. It can be showed not only with many new emerging diseases and their rapid movement through countries and regions, but also with more “traditional” animal health and food safety events resulting from the large amounts and rapid movement of animals and animal products, along with increasing numbers of passenger movements.
30. Dr O’Neil welcomed the Animal welfare congress in Cairo, next month, which is looking specifically how to achieve greater compliance with OIE animal welfare standards.
31. Dr O’Neil also commented that it can be easy to accept the concept of “One World One Health”, even when there are many cases where efforts are still not aligned between food safety and public health related programmes and animal health programmes. Besides that other important component of total animal health system such as aquaculture, wildlife, and bee expertise are neither well unified if at all nor linked to such public health programmes.
32. He also expressed his pleasure of attending the World Veterinary Congress held recently in Vancouver, Canada, and participating in many excellent discussions around the theme of the conference which was “One World One Health”.
33. He spoke about the support of the OIE to members in facing the challenging environment of the moment He manifested his pleasure on how the organisation has responded to many of the issues faced, most of which were identified and are being addressed by the OIE 4th strategic plan that was adopted unanimously by the members.
34. Dr O’Neil emphasized the work of the Director General, who continues making a huge contribution not only leading the OIE, but also committing himself absolutely to improve the situation of Veterinary Services of our members. He informed that the Administrative Commission is beginning the work of developing the 5th strategic plan for its meeting in Paris next week, which is a very important issue as it will set the direction of the OIE for a further 5 years from 2010.

35. Finally Dr O'Neil thanked the Lithuanian Government for hosting this conference and the Prime Minister, the former President, the Minister of Agriculture and the Vice minister of Health for their support and for being present at the opening ceremony. He wished to all participants a productive week, and hoped that participants would also have time to see some of Lithuania and the very beautiful city of Vilnius.
36. Dr Lukauskas started his speech making some references to trends and customs of European consumers which have been enjoying rich variety and supply of food and their concerns regarding the stable prices for products and services, but paying little attention to the growing globalisation, the movement scope of goods and services and the spread of contagious animal diseases.
37. He stated that animal diseases and veterinary problems, considering that such crises do not respect boundaries between countries or regions or farms, result in huge material losses and in a poor image of the food industry. He stressed that there is no region totally free from risks and which have not experienced veterinary problems or food and feed crises.
38. Dr Lukauskas referred to the OIE Members unified standard setting process which helped Members to strive for common goals, such saving consumers worldwide from unsafe food, preventing spread of contagious diseases, and blocking the emergence of new diseases in the world.
39. He mentioned that countries which do not comply with the requirements of international veterinary legislation can not assure a favourable animal health situation within the country and also posing at risk other countries. He stressed that the goal of the 23rd Conference of the OIE Regional Commission for Europe is aligned with the vision of the OIE, remarking that considerations on the OIE standards for compartmentalisation as well as the strategy for the control of bluetongue would be discussed.
40. He expressed his gladness for addressing the participants of the Conference as well the OIE Director General, Dr Bernard Vallat, the President of the OIE Regional Commission for Europe, Dr Nicola Belev and representatives of Member Countries and Regional and International Organisations, and he finally welcomed all of them to Lithuania, wishing them constructive and fruitful discussions, to improve the veterinary legislation and to contribute to a better health and welfare of consumers worldwide.
41. Dr Bernard Vallat, Director General of the OIE, started by thanking the Lithuanian government for hosting this conference and congratulated the OIE Delegate of Lithuania, Dr Kasimieras Lukauskas for having received the OIE Meritorious Award at the 76th General Session.
42. He stated that today the risk of disease spread is greater than ever on account of globalisation and climate change and that the OIE is highlighting its historic role of prevent the spread of epizootic diseases in the world. He cited specific examples on the European continent such highly pathogenic avian influenza, classical swine fever, African swine fever, rabies, foot and mouth disease and Bluetongue.
43. He stressed that inefficient Veterinary Services governance is responsible for many of the world's problems, and he referred to countries where Veterinary Services were practically disappeared. The resulting introduction and spread of animal diseases on their territory caused economic losses and public health risks.
44. Dr Vallat commented on the OIE worldwide programme to strengthen Veterinary Services, using its PVS tool for the evaluation of Performance of Veterinary Services, based on OIE quality standards. Outcomes of the PVS evaluations are used to analyse shortcomings and gaps to prepare priority investment projects, for which the OIE works with its partners (especially FAO) and with major international donors, such as the World Bank and the European Commission.
45. He also commented that the current OIE good governance programme extends beyond AI, and the OIE is working with the WHO, UNICEF, the World Bank and FAO on the 'One World - One Health' concept for which the OIE strongly recommends better cooperation between Veterinary Services and public health services in certain fields, but is opposed to any radical institutional reorganisation that would result in Veterinary Services being governed by public health services.

46. He stated that Veterinary Services are a 'global public good', and that Veterinarians must play a key role in controlling the main animal diseases, especially those transmissible to humans, as well as in ensuring that pathogenic agents and toxins of animal origin that could enter the food chain are properly controlled upstream of the consumer. On the challenges facing world agriculture Veterinarians have a valuable role to play, not only in disease control, but also in using new scientific advances to increase animal production. It should be borne constantly in mind that ensuring access to animal protein is a global public health problem to be resolved, in which veterinarians will play a key role as part of the global public good concept.
47. He commented the work of the OIE on food safety and informed that an OIE permanent working group on animal production food safety was set up in 2002 including high-level experts from FAO, WHO and the Codex Alimentarius Commission which has been given the task of drafting standards on animal production food safety and of clarifying the key role of Veterinary Services in this area.
48. Dr Vallat informed on the international conference on animal identification and traceability, to be held in March 2009 in Buenos Aires (Argentina), under the aegis of the OIE stressing that Europe has been a pioneer in this field.
49. He also announced the global conference on foot and mouth disease to be held in Paraguay in June 2009 as part of the Global Framework for the Progressive control of Transboundary Diseases (GF-TADs) which is being organised jointly with the FAO for launching a joint initiative to control foot and mouth disease, with the ambitious objective to control foot and mouth disease worldwide in the medium term.
50. Dr Vallat recalled the leading role that the OIE is playing in animal welfare as well as the work that the OIE is carried out in close collaboration with national Delegates, supporting its Members in implementing OIE standards, including joint meetings, such as that organised by the Council of Europe, the European Commission and the OIE in Strasbourg in November 2006.
51. He informed that the OIE has taken the initiative of organising a second global conference on animal welfare, to be held in Cairo (Egypt) from 20 to 22 October 2008, to review the application of its animal welfare standards and to develop tools to help countries, especially developing ones, to achieve these objectives, and reported that the European Commission and several EU Member Countries has supported the OIE in organising these two major conferences.
52. Dr Vallat also mentioned another important issue that will be discussed at the conference in Vilnius, namely the practical implementation of the compartmentalisation concept, hoping that discussions will identify the best way forward for the application of OIE standards in this area, with the joint aim of controlling animal diseases and of facilitating safe trade and mutual recognition by trading partners.
53. He thanked the European Commission, the Technical Assistance Information Exchange Unit (TAIEX) and the Directorate General for Health and Consumer Protection (DG SANCO) for their support with many OIE initiatives, including the national seminars held in Eastern European countries on matters of concern to the OIE and on legislation and Veterinary Service organisation issues.
54. Dr Vallat highlighted the point that the European Commission provides crucial support for several OIE programmes and activities, not only within the Europe region, but also in developing countries in other regions of the world for helping these countries to control and eradicate animal diseases while reducing the risk of their spread to Europe.
55. Dr Vallat was glad to note that, under the aegis of the current French presidency of the European Union, discussions have begun between EU Member States to provide the OIE with positions for the preparation of the OIE 5th strategic plan 2010-2015, on which the OIE has already started work.
56. He finally thanked all participants and wished them fruitful discussions.
57. The texts of the above speeches were made available to all the participants.

Election of the Conference Committee

58. The Conference Committee was elected as follows:

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|---------------------|------------------------------------|
| Chairperson: | Dr Kazimieras Lukauskas, Lithuania |
| Vice-Chairperson: | Dr Nikolay Vlasov, Russia |
| Rapporteur General: | Dr Dr Milan Malena, Czech Republic |

59. Dr Lukauskas thanks again as chairman and presented Mme Lina Guziene, President of the Organizing Committee and invited her to address the audience.

60. Mme Guziene addressed some words to participants giving them a detailed description of the development of the Conference and how the four days will be distributed between work and cultural visits of Lithuania places.

Adoption of the Provisional Agenda and Timetable

61. The Provisional Agenda and Timetable were adopted.

Designation of Session Chairpersons and Rapporteurs

62. Chairpersons and Rapporteurs were designated for the technical items as follows:

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| Item I: | Dr , Monique Eloit, France (Chairman) Dr, Karen Bar-Yaacov (Rapporteur) |
| Item II: | Dr Moshe Chaimovitz, Israel (Chairman) Dr Leif Denneberg , Sweden (Rapporteur) |
| Animal health situation: | Prof Dr Werner Zwingmann, Germany (Chairman) Dr. Ankica Labrovič, Croatia (Rapporteur) |

Update on OIE policies, good veterinary governance, strengthening of Veterinary Services and preparation of a new OIE Strategic Plan

63. The Session Chairman, Dr Lukauskas, invited Dr Bernard Vallat, OIE Director General, to present an Update on OIE policies, good veterinary governance, strengthening of Veterinary Services and preparation of a new OIE Strategic Plan.

64. Dr Vallat initiated the presentations with a talk regarding how the OIE is starting the preparation of the 5th Strategic Plan, the new tools of the OIE as well as the strengthening of current priority activities, most of them aimed to the Good Governance of Veterinary Services.

65. He referred to the Global public goods concept explaining that means goods whose benefits extend to all countries, people and generations. He highlighted that under this definition Animal Health Systems are Global Public Goods, referring to the broad national and international benefits that control and eradication of animal infectious diseases, including zoonoses imply.

66. Dr Vallat stressed that under this view each and all countries play a key role, depending on each other. Inadequate action by a single country can jeopardize others, making the system fail, not only within the country, but also at regional and at global level.

67. Dr Vallat commented the concept of “One World – One Health” (OWOH) which refers to a global strategy for managing risks at the animal-human interface and explained the engagement of the OIE at global level in this concept, which is broader and beyond to only Avian Influenza, but including other important zoonoses, in coordination with its partners, namely FAO, WHO, UNICEF and the World Bank, whenever they recognize the key role of Veterinary Services, which are the front line for tackling animal diseases at their source.
68. The growing importance of Veterinary Public health due to the Zoonotic potential of animal pathogens was remarked by the Director General, who showed some statistics indicating that 60% of human pathogens are zoonotic, 75% of emerging diseases are zoonotic and 80% of agents having a potential bioterrorist use are zoonotic pathogens.
69. He also made some references to the growth of the population worldwide and commented on projections toward 2020 which indicate that the demand for animal protein will increase by 50%, especially in developing countries. Taking into account this trend food security is a key public health concern that should be seriously considered in view of the need for supply of safe food.
70. He remarked that in this context Veterinarians have a valuable role to play, not only in disease control, but also in using new scientific advances to increase production, helping to ensure access to animal protein. Healthy animals ensure food security and food safety, and also being animal health a key component of animal welfare. **“The Veterinary Services must play a key role in protecting the society”** stated the Director General.
71. Dr Vallat referred to the strategic engagement of the OIE in and animal welfare, which has been identified as a strategic priority for the OIE since 2001, under the mandate granted by all Members. The OIE is recognised globally as the leader in setting international animal welfare standards.
72. He mentioned the Guiding Principles of the OIE on animal welfare standards, such as Animal health is a key component of animal welfare, any OIE standards are science-based and democratically adopted, and VS play a key role in the implementation of such standards.
73. He also referred to the role that the OIE is currently developing on promoting Veterinary education worldwide and the necessity to have respect for Veterinary diploma for which the OIE is working with the Veterinary Universities seeking discussions regarding the inclusion within their curricula of key issues related to Veterinary Services. Among other activities he commented on the OIE global Deans Conference which will be held in Paris in October 2009.
74. The Director General explained the Good Governance concept of Veterinary Services, mentioning the minimal requirements that should be reached by all countries. He stressed the need for appropriate legislation and implementation through national animal health systems providing for appropriate surveillance, early detection, Transparency, Notification, Rapid response to animal disease outbreaks, Biosecurity, Compensation (which encourage farmers for timely notification of diseases), as well as vaccination when appropriate.
75. He detailed some key elements of the Good Governance of VS, as follows:
- Appropriate Veterinary legislation
 - Building and maintaining efficient epidemiosurveillance networks and territorial meshing in the entire national territory, potentially for all terrestrial and aquatic animal diseases...
 - Responsibility of Governments, for which deeply awareness of policy makers on the objectives and importance of VS is crucial.
 - Alliances between public and private sectors, considering that sometimes human and financial public resources are not enough. Strict protocols should be followed under the monitoring of the Veterinary Authority which is the final responsible, including issuing of official certificates.
 - Concept of ‘Quality of Services’ adopted by all OIE Members as included in Chapters 1.3.3. and 1.3.4. of the OIE Terrestrial Code.
 - Use of the global OIE-Tool for the evaluation of Performance of Veterinary Services (OIE-PVS Tool)
 - Initial and continuous veterinary education, including the criteria for recruiting Veterinarians as well as continuing training programmes of the VS.

76. Dr Vallat reminded the main benefits linked with Veterinary Activities, in relation to contributions from the control of animal diseases, such the improvement of Public Health by reducing the risks of zoonoses, by ensuring food safety and food security, under the “OWOH” concept. He also explained that complying with OIE standards Veterinary Services are able to reach Market Access at local, regional and international level. And he stressed the issue that Veterinary Services’ functions help countries to the Poverty Alleviation by securing assets (capital, animal) and increasing productivity.
77. In relation to the new tools to be used by the OIE Dr Vallat first referred to the current OIE World Animal Health Information System (WAHIS) and the web linked database WAHID. He reminded countries their obligation to timely notify the occurrence of animal diseases using this new system, for the immediate notification and follow up report during outbreaks that allow to know the animal health situation worldwide in real time, as well as the six monthly report.
78. Regarding the OIE Tool for the evaluation of Veterinary Services Dr Vallat made an introduction and indicated that the OIE is currently carrying out a global programme of strengthening VS using such a Tool for helping countries reaching compliance with OIE standards on quality as well as strengthening the OIE influence on global, regional and national policies regarding governance on animal health.
79. He also explained the Legal and financial basis of the PVS programme, which includes all criteria established within the OIE Terrestrial Animal Health Code in relation to quality of Veterinary Services, namely Chapter 1.3.3. on Evaluation of Veterinary Services both public and private components, and Chapter 1.3.4. on Guidelines for the Evaluation of Veterinary Services. He commented that the programme is funded by the OI World Animal Health and Welfare Fund which in financed by several donors and was created to help support OIE in implementing the PVS and regional capacity building.
80. He mentioned all steps and procedures of the OIE PVS process, for which the OIE has carried out 4 training session for PVS expert assessors, which are certified by the OIE and recognized by donors. He mentioned that the International Committee of the OIE strongly supports the PVS evaluations. The procedure of such evaluations has been standardised, including the training of experts, looking also for a geographical balance of experts. The Tool as well as the process itself was progressively improved with the feed back from experts’ experience in the field.
81. PVS Missions are carried out by such experts under OIE auspices and upon official request from countries. A draft final report is sent to the country, after a peer review made by the OIE, and the OIE release the report to partners and donors after agreement on the final version from the country as well as after authorization of release its confidential status from the same country authorities.
82. Dr Vallat explained that the PVS evaluation is followed by the Gap Analysis process, for which the OIE is working with its partners (mainly with FAO in developing countries) and donors for the preparation of priority investment projects which could be financed through national Governements or international donors.
83. The Director General presented the status of the OIE PVS Programme, both globally as well as at regional level. The OIE has received to date 84 requests from Member Countries, out of which 66 missions were already completed, and 10 countries have requested the OIE the Gap Analysis process. Specifically for the European region the OIE received 9 requests, from which 8 PVS evaluation missions have finished and two countries have already requested the Gap Analysis.
84. Dr Vallat referred to the important work that the OIE National specialist focal points play by assisting the OIE Delegate in specific issues, mainly regarding appropriate application of OIE standards on animal disease surveillance and notification to the OIE when relevant. He made reference to a recent letter send to all OIE Delegates regarding the permanent up-dating and information to the OIE on the nomination of such Focal Points, namely: Aquatic animal diseases; Wildlife; Animal health information system; Veterinary medicinal products; Animal welfare; and Animal production food safety.
85. He also reminded one of the objectives of the 4th Strategic Plan which will be continued in the 5th Plan if Member Countries agree; regarding the reinforcement of the Regional Representations in order to better assist Member Countries through capacity building activities.

86. He explained wish mechanisms will be used for the preparation of the 5th Strategic Plan to be adopted in May 2010 for 5 years and he detailed some concepts which could be considered as priority concept, such as good governance, one health concept, capacity building, mediation and veterinary education. The OIE will ask the opinion of all regional commission Member countries.
87. Dr Vallat referred to the new policies Reference Laboratories & Collaborating Centres aimed to assist countries and regions in order to have a broad and more balanced availability of expertise worldwide that allows and helps developing countries to better participate in the standard setting process as well as to comply with such standards. Dr Vallat explained the process of twinning between OIE Reference Laboratories and selected national laboratories and the necessity to establish regional surveillance networks that help countries to have early warning systems and rapid responses when outbreaks occurred.
88. Dr Vallat reminded the OIE Mediation mechanism that the OIE offers to Members for helping them to resolve differences on a particular technical issue: He encouraged Members to request such a mechanism as a faster way to facilitate trade between countries, and explained that this mediation is science-based and not legal-based, which could be applied only on a voluntary request from both disputing countries. Outcomes of such an OIE Mediation are not binding, unless it is agreed between trading partners from the beginning of the process.
89. Dr Vallat concluded by encouraging Members to work on the preparation of the OIE V Strategic Plan, reminding the current broad general objective of the OIE aimed to improve animal health all over the world. He stressed that the new strategic Plan will continue on the basis of three fundamental missions, as
- To ensure transparency in the global animal disease situation,
 - Publishing scientific based standards, especially with reference to the WTO, and
 - Publishing guidelines for the prevention, control and eradication of animal diseases, including zoonosis and acknowledgement of Members health status.
90. Dr Lukauskas thanks Dr Vallat for the very comprehensive presentation and stressed that strong Veterinary Services are essential to improve animal health situation and the quality of production of products of animal origin. He also stressed that the information provided should serve as guidance during the conference.

Activities of the OIE Regional Representation for Eastern Europe and the OIE Regional Commission for Europe

91. The Session Chairman, Dr Lukauskas, invited Dr Prof Nikola Belev, OIE Regional Representative for Eastern Europe to give a presentation on the Activities of the OIE Regional representation.
92. Prof Belev informed participant about the principal activities accomplished by the OIE Regional Representation for Eastern Europe during the first semester of 2008.
93. He explained that the activities were planned in accordance with the implementation of the OIE 4th Strategic Plan 2006-2010. Among the most important activities there were the successful accomplishment of the OIE Programme for Europe regarding the “Dialogue and common activities between the OIE Member–Countries of the EU and the other OIE Member Countries of the Regional Commission for Europe” and the Launching of the Capacity Building Programme for strengthening the Veterinary Services’ capacities of the OIE Member Countries of the region.
94. Prof Belev also mentioned the success of OIE PVS Seminar organized for the region on January and which main goal was to inform representatives of Member Countries about the PVS tool and the strengthen of Veterinary Services.
95. He also gave a brief review of all Seminars in which the Regional Representation has participated and cooperated as, the WAHIS Seminar at the OIE Headquarters to improve the quality of sanitary information by training Member Countries in the use of WAHIS web application; the Workshop on surveillance Networks in the Mediterranean and Balkan Countries held in Teramo, Italy, devoted to discuss all issues related to animal diseases surveillance; the Seminar on Veterinary Statutory Bodies, private veterinarians and paraprofessionals in the Veterinary Services held in Sofia, Bulgaria with the purpose of explaining the importance of the involvement of private sector with Veterinary Services and finally the Seminar on Veterinary Services and Border Control held in Sofia, Bulgaria which main objective was to provide assistance in the improvement of veterinary borders control.

96. He emphasised how much the OIE Regional Commission for Europe and the Regional Representation for Eastern Europe maintains permanent contacts with representatives of Governments and Parliaments of all European countries.
97. Prof Belev finished his presentation by commenting that there has been extensive media coverage for all Seminars, international meetings and animal diseases situation in the region. The role of the OIE in animal diseases and zoonoses control has also been promoted by mass media.

Activities of the OIE Sub-Regional Representation in Brussels

98. The Session Chairman, Dr Lukauskas, invited Dr Caroline Planté, OIE Sub-regional Representative for Europe, to describe the Activities of the OIE Sub-Regional Representation.
99. Dr Plante gave details on the Sub-regional office, which was opened on 1 January 2007 in Brussels following a decision taken by the International Committee during the General Session in May 2006. Its location, close to the European Commission offices, gives an opportunity to the OIE to facilitate exchanges with these institutions and other public and private organisations as well as Member Country embassies based in Brussels. In May 2007, the Resolution XVIII adopted by the International Committee officialised the creation of this office as Sub-Regional office of the Regional Representation for Eastern Europe. The development of regional and sub regional activities is an important element of the OIE's 4th Strategic Plan 2006-2010. This office is currently composed of one veterinarian. Activities conducted by the Sub-Regional Representation (SRR) since its creation is summarized as follows.
100. The SRR provides support to the development and implementation of the Regional Representation activities, discusses priority needs for the region and provides speakers for the different seminars organised. In addition, in order to increase the visibility of the work accomplished or planned, to help Members of the region search for relevant information and to make available all documents translated into Russian, an OIE Regional Website for Europe has been designed with the support of the Central Bureau and is regularly updated by the SRR (www.rr-europe.oie.int).
101. The SRR is also involved in various seminars and meetings held in Europe or concerning Members of the OIE Regional Commission for Europe. In these meetings, information on the OIE, its organisation, policies, activities and projects are provided. This work helps to strengthen the OIE's influence at national, regional and global level and explain OIE standards in detail. SRR participated in the seminars and workshop of International Organisations and professional organisations, e.g. FAO Sub-Regional Office in Ankara (training in epidemiology, TADs control project in Central Asia), FAO/Spain meeting on a Maghreb network for disease surveillance and bluetongue, NATO/Romania workshop on bioterrorism and biopreparedness, the Netherlands/WHO/FAO/ international seminar on food safety, OIE Reference Laboratory /Apimondia symposium on bee diseases, ECO Ministerial meeting, IFAP World Congress. In addition, technical support was provided through EC/FAO/OIE joint missions to assess the epidemiological situation regarding ASF in Caucasus countries after two countries declared a first occurrence of the disease.
102. The location of the SRR in Brussels also helps strengthen exchanges and cooperation between the OIE and the European institutions professional organisations and embassies. The organisation of OIE/EC national seminars was facilitated through the contacts with the EuropAid Cooperation Office, and a continuous informal communication is maintained with relevant persons of different DGs. Particular attention was also paid to involve those working in animal health in various seminars organised by the Regional Representation. SRR also participated in technical meetings of the EC and in EFSA task force meetings. The SRR, together with the Central Bureau, follows and provides comments on policy documents developed by the EC, in particular DG Sanco's new Community Animal Health Strategy, and the Green Paper on Biopreparedness. Support to the development of projects elaborated by the EC and involving the OIE (in particular with DG Development and DG Sanco) is also provided (e.g. BTSF programme). The SRR attended other meetings organised by the Council of the EU, e.g. in support of the BTWC (Biological and Toxin Weapons Convention), and by professional organisations (Copa-Cogeca on Bluetongue, FESASS General Assembly, FVE on MRSA).

103. The experience gained from the participation in national seminars jointly organised by the OIE and the EC was used, on request of OIE Headquarters, in Asian countries (China, Thailand). In addition, the SRR, as well as other regional representations, has been involved in OIE activities on PVS (mission, peer-reviews and improvement of the OIE-PVS Tool).

Discussions

104. The Delegate of France commended the speakers for the contents of their presentations and appreciated the intensity and quality of information provided in recent months. Speaking on behalf of countries of the EU she congratulated the OIE Sub-Regional Representation in Brussels, managed by Dr Planté, for its work which allows to better share the work. She also underlined that this office allowed to improve the relations between the OIE and the European Commission.
105. The Delegation from Estonia took the floor to thank the organisers for the warm welcome received at this 23rd Conference of the Regional Commission for Europe.
106. The President of the OIE, Dr Barry O'Neil, encouraged the present Delegates to provide suggestions for the way forward that the OIE should take in the future. These points would then be addressed by the OIE Administrative Commission at its upcoming meeting in Paris when drafting the 5th OIE Strategic Plan for 2010-2015. He considered the contribution from Delegates to the preparation of the Strategic Plan to be especially important at this stage. He also underlined that any further new work would need to be sustained by appropriate resources.
107. The Delegate of Italy thanked the Government of Lithuania for the excellent organisation of this meeting and he supported the points raised earlier by the Delegate of France. He supported the point raised by the OIE Director General on the role that national Veterinary Services have to play. He emphasised the fact that the PVS tool allows to create a stronger link between the OIE standards and the work actually done by national Veterinary Services. This tool becomes then important to advocate for the role of Veterinary Services in front of national Governments. He also raised the fact there is a need for a debate on the role of OIE standards and the role on national legislation and he recognised this as a challenge for Veterinary Services on how these regulations are applied. Finally he echoed the point raised by the OIE Director General on the need for Veterinary Services to enlarge their scope from food safety and to include as well food security. He suggested these points be considered in the preparation of the 5th OIE Strategic Plan.
108. A representative of the Delegation of Poland thanked the Government of Lithuania for the excellent preparation of this 23rd Regional Conference and he highlighted the fact that presence of the Prime Minister and the Former President and Prime Minister of Lithuania at this meeting testified for the importance given to veterinary activities in this country. He also mentioned the upcoming meeting of the EU Association of Veterinary Diagnostic Laboratories which would hold its 1st meeting in Amsterdam in October 2008.
109. The representative of Ukraine thanked the speakers for such good presentations. He expressed his gladness to see the OIE moving forward to have more power and influence in front of Governments by encouraging them to strengthen their VS. He stressed the importance of the issue related to trans-boundary illegal trade which is currently being tackled by VS, and he also recalled that it is necessary to include under the mandate of VS food safety and food security issues.
110. The representative of Finland thanked the organizers of the Conference. She highlighted the work of the OIE and its standards in supporting Members to reach market access. She referred to the OIE electronic notification system (WAHIS) and OIE standards, stating that they should be linked and adapted to the national legislation.

111. The Delegate of Israel thanked Lithuania and reminded last time he visited Lithuania 14 years ago stressing that he remembers Lithuanian as friendly and beautiful people. He thanked Dr Vallat, Dr Belev and Dr Lukauskas and stressed the power and the work of the OIE. He raised the issue regarding the lack of independence of some Veterinary Services due to political pressures. He also mentioned that some politicians are willing to make payments to industry and favors in order to be re-elected. He stated that sometimes there are several interests mainly related to illegal trade, including false certification, of meat and fish coming from countries with weak Veterinary Services. He fully agreed with the policy of the OIE to give more influence to the Veterinary Services but commented that the process is still embryonic. The smuggling issues should be further discussed and solved.
112. A representative of the Federation of Veterinarians of Europe (FVE) supported comments made by the Director General on the importance of Veterinary Education. He highlighted that this issue should be addressed not only in developing countries, but also in developed countries, considering that the standard level should be improved and reached by all countries. He also commented on the work that the FVE is doing for allowing European veterinarians free movements through all European countries as it was done for other professionals.
113. The Delegate of Cyprus also stressed the importance of veterinary education and its improvement in the Universities, including training of veterinarians on food safety issues. He reminded that European Legislation gives relevance and power to the veterinarian profession. He stated that all animal origin products, not only meat, should be under the authority of Veterinary Services.
114. A representative of the Lithuanian Veterinary Academy noted that continuing education is a very important area which should be given more attention, including food safety issues and that it is already the case of Lithuania.
115. The Delegate of UK thanked and congratulated Lithuania for the conference. He stated that new global challenges should be addressed properly by developing capacities that allow countries to be prepared to respond to emerging threats such challenges. He recommended that the OIE be placed at the center of responses to such challenges due to its unique skills. He also remarked that sanitary regional situation is important and should be taking into consideration when establishing preventive measures.
116. Dr Domenech, Chief Veterinary Officer of FAO, thanked the OIE for the invitation to the conference. He noted that Europe should be protected from introduction of new pathogens, stating that FAO supports the strategy that the region is presenting. He also commented on the "One World - One Health" concept for which the OIE and FAO are trying to finally convince the World Bank to support such a mechanism as discussed. He stressed that such a strategy will change the projection of the future scenario globally.
117. Dr Bernard Vallat made some clarification to the questions and comments made. He informed that the OIE WAHIS System is currently not being used by a few number of Member Countries. He commented that the OIE together with FAO and WHO developed through the GLEWs Agreement tracking systems for unofficial information on occurrence of animal diseases. He stressed that the OIE is working more and more through communication with media, for encouraging Governments to be more transparent in regard to their animal health situation.
118. Dr Vallat remarked that the EU notification system should be linked to and aligned with WAHIS, and commented on a regional approach that the OIE has developed for the WAHIS to harmonise regional notification systems. He noted that agreements have been signed by the OIE with some other regional organisations for the implementation of the Regional WAHIS, as Asia and Central America.

119. The Director General complemented the comments made by the Delegate of Israel regarding the lack of independence of Veterinary Services in some countries. He stressed the importance of independence of Veterinary Services mainly in reference to the official certification which makes the credibility of Veterinary Services. He reminded that the OIE has developed standards on quality of Veterinary Services which were adopted by OIE Members, including matters related to independence and ethics. Such OIE standards and guidelines are including both in the OIE Code as well as in the OIE-PVS Tool which can be used to be presented to politicians.
120. Regarding training, Dr Vallat suggested that this item should be considered as a topic to be further developed and continued by the OIE for the long term. The OIE will influence universities in order to include general issues such epidemiosurveillance and animal welfare in the curricula of Veterinary Schools for issuing the Veterinarian Diploma, and expressed that Governments should support this initiative. As a long term objective he identified the possibility to establish a global list of universities which respect a list of minimum standards for veterinary training.
121. He also referred to the food safety issue that some Universities do not include in their Curricula, and for which the OIE will try to influence them. He commented that during the last General Session the International Committee adopted a document prepared by the OIE regarding the role of Veterinary Services on food safety, which was prepared in collaboration with Codex Alimentarius, FAO and WHO. This document is useful for all Veterinary Services and it is available on the OIE Website.
122. Dr Vallat also answered the issue raised by UK regarding the response capacity in new sanitary crisis, commenting that the OIE has established the World Animal Health and Welfare Fund for supporting developing countries when some epizootic diseases occur, in collaboration with partners as FAO and EC and several major donors. Dr Vallat expressed his confidence on the proper functioning of such supporting mechanisms if crisis arise.

Technical Item I

“Practical application of OIE standards and guidelines on compartmentalisation”

123. The Session Chairman, Dr Monique Eloit, OIE Delegate of France, briefly introduced the speaker for this Technical Item, Dr Alex Thiermann, President of the OIE Terrestrial Animal Health Code Commission.
124. Dr Thiermann introduced his presentation recalling that one of the main objectives of the OIE has been to develop international standards for the prevention and control of animal diseases, including zoonoses, as well as to the facilitation of international safe trade. He stated that historically, the main emphasis of these standards has been on the determination of country freedom of disease and on how to regain such freedom, when lost, in order to facilitate trade.
125. He noted that the OIE encourages that this disease freedom concept be considered beyond national borders and be extended at a regional level.
126. Dr Thiermann said that while the ultimate goal is the global eradication of diseases, the OIE addresses the management of risk at all levels and seeks the most updated scientific information in order to develop commodity specific recommendations. Even in non free countries or zones, risk mitigating measures recommended by the OIE can be applied in order to guarantee that the disease does not occur in a certain animal sub-population and that the commodity to be traded can be rendered safe, based on adequate biosecurity measures and intense surveillance, to demonstrate the disease freedom in a selected and well isolated sub-population.
127. He recalled that the OIE has further elaborated this biosecurity approach into what today is known as the concept of ‘compartmentalisation’, which with its principles and guidelines has been incorporated into the Code.

128. He also noted that efficient and credible Veterinary Services with an adequate surveillance system remain the essential elements in the establishment and maintenance of these health conditions for a defined subpopulation.
129. Dr Thiermann stressed that compartmentalisation, for it to be effective and credible, requires a strong partnership between the private and public sector, being the industry responsible to carry out some activities established jointly with and delegated by the Veterinary Authority, and under its control and monitoring, including the Biosecurity Plan, which should be made public through official channels.
130. He commented that the OIE has developed a set of guidelines for the application of compartmentalization, as well as a 'check list' to be used by the Veterinary Service and the industry when first establishing a compartment, including surveillance, risk assessment, traceability, diagnostic capability, rapid response and the development of the biosecurity plan. The Veterinary Authority must be able to demonstrate that these factors have all been addressed, while also identifying who is the responsible sector of conducting each activity.
131. Regarding the practical application of compartmentalisation by Member Countries, Dr Thiermann stated that while the concept has been clearly described through principles and guidelines, and adopted and published in the Code, it has been difficult to date to fully implement compartments in the field and to achieve formal recognition of such a concept by trading partners.
132. He said that one of the difficulties relies on the necessity of a credible public-private partnership as several measures should be implemented by the industry rather than the Veterinary Service, which role has shifted from actual implementers to auditors and certifiers. The need for trusting relationships is also critical between the Veterinary Authorities of trading partners. The Veterinary Service needs to demonstrate that it is fully aware and confident of the information provided by the industry, when signing the relevant veterinary certificates. Therefore, the demonstration of reliable and credible veterinary governance is essential.
133. He commented that there are several efforts underway to establish compartments mainly within the poultry and pig sector, specially for genetics sector. More ambitious initiatives are being undertaken by countries with a strong poultry industry and with a robust export market.
134. Dr Thiermann highlighted that the OIE is providing technical assistance to countries in their efforts to implement compartmentalization and in the preparation of a proposal that would help fund major pilot projects between these governments and their poultry industry.
135. With the sound application of these modern procedures, safe trade should be expanded and the production further protected, while significant diseases are being controlled while not always totally eradicated.
136. He informed that the OIE has prepared a questionnaire for Member Countries of the OIE Regional Commission for Europe to analyze the state of implementation of Compartmentalisation in the region. From 52 Member Countries of the OIE Regional Commission for Europe, the OIE has received answers from 16 individual countries (non EU Members) and a common answer from the European Commission which consolidated all answers from EU Member Countries, bringing this to a total of 43 responses.
137. Dr Thiermann briefly commented on the answers received, stressing that most of European countries are considering the implementation of Compartmentalisation being currently in the early states of such implementation, mainly referred to discussions with different stakeholders. The poultry sector is the most developed.
138. Even when some countries consider compartmentalization both for animal disease control and trade, most of them prioritize trade issues, including the common answer from the EU states. Most of them answered neither to recognize compartments nor to be recognized when trying to apply the concept between trading partners.
139. Dr Thiermann commented that under the consideration that Good Governance of Veterinary Services is a key factor when implementing Compartmentalisation, besides the 9 European countries which have been already evaluated, some others expressed their interest to be evaluated with the OIE-PVS Tool very soon.

140. Dr Thiermann concluded by commenting that countries of the Regional Commission for Europe expressed that they are following OIE standards on the implementation of compartments. All Countries considered it necessary that the OIE continue its work on developing standards and guidelines for the application of compartmentalisation, both as for prevention and control of diseases, as well as for safe trade. They requested assistance from the OIE in the practical application of the concept, as well as on the harmonization and mutual recognition between trading partners.

Discussions

141. Dr Eloit thanked Dr Thiermann for his presentation. She pointed out that different countries are not at the same level of implementation of the compartmentalisation principles and that important work still needs to be done on this topic. She underlined the importance of the criteria of trust between private and public partners, the necessity to define responsibilities in this partnership, the need for regular controls and for the good communication in peace time. She invited the participants to contribute to the discussions on this interesting topic so to provide a good basis for the recommendations that will be elaborated.
142. The representative of The Netherlands highlighted that credibility is very important not only related to Veterinary Services, but also in relation to the private sector. Biosecurity should be maintained permanently being the industry the main responsible. He stressed that high level of biosecurity is necessary in order to give enough guarantees. He also wondered whether it is appropriate or not to relate both zoning and compartment concept, as presented by Dr Thiermann, considering that they are different concepts.
143. The Delegate of Portugal thanked Dr Thiermann for his presentation. He considered the difficulty to manage the concept of compartment when several countries are still struggling to implement zones in their territories. He underlined that the capacity to setup compartment is related to the capabilities of Veterinary Services; if these are weak then private companies can challenge them. He sought comments from the speaker on the link between compartments, Veterinary Services and PVS evaluations.
144. The Delegate of Italy stated that the concept of compartment serves two different kinds of countries: countries that don't have market access because they can't eradicate relevant diseases and countries that apply the concept of compartment to control some specific diseases that might arise; in both cases the concept of compartmentalisation can assist. He stated that the same strategy from both public and private sector is needed, as well as guidelines to be respected equally by all countries. However he underlined that compartmentalisation cannot be used in substitution of disease eradication plans. Finally he sought clarification on the possibility to use compartmentalisation not only in poultry, but also in the pig sector.
145. The Delegation of the United Kingdom commended Dr Thiermann for his presentation. He referred to the issue of bilateral recognition between trading partners. He sought clarification if independent bodies (service providers) could assist the Veterinary Services in assessing the effectiveness of a compartment. This would be very important for countries that don't have the necessary technical capabilities to perform such task.
146. Dr Thiermann replied that very often the private industry understands biosecurity issues and is able to apply them but the difficulty is to have a credible partnership with the government which will be always responsible for the certification. He stressed the fact that the credibility of Veterinary Services is the key point in setting up a compartment and that the PVS takes this issue into consideration since a specific section addresses the capability of a country to setup compartments; PVS evaluations can be shared with trading partners in order to demonstrate national capabilities. He clarified that the application of zones and compartments in the same country are possible since they do not exclude each other. He then expressed his agreement with the fact that compartmentalisation can facilitate market access when reaching freedom from a diseases at national level is not achievable. If a country has not enough structure and skills the worst is trying to implement compartments. He was also in agreement with the fact that compartmentalisation is only a tool to reach the final goal of disease eradication. He stated that compartmentalisation can be applied to several diseases and is not only limited to the poultry sector. He encouraged countries wishing to trade with each other using compartments to recognise them while no disease outbreak is taking place (so called peace time).

147. A representative of Denmark supported the concerns presented by the Netherlands and asked for clarification on the status of all compartments when one out of three compartments, which have been approved under the same biosecurity plan, would be affected meaning that the biosecurity measures have been breached.
148. The Delegate of Ireland stated that credibility and trust of Veterinary Services, as well as their relationship with the private sector are key factors for setting up a successful compartment. He noted that while the approval of a compartment is under the responsibility of Veterinary Services, the day to day management relies upon the private company; he noted that the technical capabilities to perform such management would require qualified staff to be available for the private sector and those professional figures might not always be available.
149. A representative of Lithuania thanked Dr Thiermann for his useful presentation and noted that compartmentalisation could stimulate trade. It also considered that more details on the sharing of competences and responsibilities for the management of compartment between public and private sector would be welcome. He recognised that PVS evaluations would help in assessing the national capabilities for setting up compartments. He stressed that, since practical examples of application of compartments are still scarce, implementation of compartments should be done in a gradual way and in confined areas.
150. The President of the OIE thanked Dr Thiermann for his assistance in explaining this concept. He considered that the current discussions seemed to exaggerate the complexity of the compartmentalisation concept. He noted that a free country or zone surrounded by infected areas has to undergo a similar process for being recognised free as a compartment has to undergo a procedure to be recognised as free when it is located in an infected area. He concluded stating that countries don't have to determine compartments in all circumstances, sometimes defining a free zone might be more profitable.
151. The representative of Sweden thanked and congratulated Dr Thiermann for his presentation. She asked whether the Code Commission is working or discussing issues regarding Compartmentalisation for vector borne diseases. Nevertheless she agreed that the general matter of practical implementation of compartmentalization is a very important first step before discussing other issues. In this sense she noted that it would be good to know what other countries are doing on this, considering that practical examples (whenever existing) would be the best way to go ahead.
152. The representative of Germany stressed the importance of compartmentalization mainly for market access, and asked what has been done in relation to certification for compartmentalization.
153. The representative of Turkey asked whether is necessary to audit the implementation of Compartmentalisation, and who should do it.
154. A representative of the European Union considered the discussion very important, and informed that the EU is trying to define specific legislation on compartmentalization, and requested whether practical experiences could be provided by the OIE which would help internal discussion in the EU.
155. The Delegate of Russia commented that 10 years ago also the concept of regionalization was not easy to grasp and implement. He noted that today many countries are already applying the concept of compartmentalization based on biosecurity measures, and referred to the OIE Code which includes both zoning and compartmentalization concepts. He stated that in some countries such concepts could be applied together. He recalled that transparency and competence of VS are necessary for applying compartments. He stressed also that dissemination of the concept as established in the OIE Code is crucial for the acceptance of Governments. He gave the example of Russia which has a formal agreement with United States of Americas (USA) for importing poultry products, indicating that in case of occurrence of low pathogenic avian influenza in any state, USA can continue exports to Russia from these states only from specific companies already approved by Russia.

156. Dr Vallat congratulated Dr Thiermann for his presentation which clarified many concepts. He recalled that Compartmentalisation is not really a new concept and provided as an example when EU in 1996 negotiated import of ostrich's meat from South Africa on the basis of biosecurity measures approach. He also gave the example of tuberculosis (TB) and brucellosis free herds which apply same management and biosecurity measures as stated for compartments.
157. The Director General reminded how the OIE Members started to discuss this concept in when NCD outbreaks occur in some developed countries that needed to find out some mechanism to isolate industry poultry production mainly from wildlife.
158. He mentioned that the OIE developed guidelines on compartmentalization and introduced the concept in the Code, and indicated that only a few countries have started the official implementation.
159. Dr Vallat expressed that judgment on acceptance of compartments will come from importing countries, but remarking that there are some tools that could be very useful while making such an evaluation, including the OIE-PVS Tool as well as specific audits from importing countries.
160. He suggested some criteria which could be followed while verifying guarantees from compartments, including the quality of VS, technical quality of the biosecurity plan, and the legal security of the effective implementation of the agreements between public and private sectors, including power of the justice to apply penalties when such agreements are not respected. If more importing countries accept the concept a booster effect would be produced and other countries will follow, so compartments will be apply and recognized worldwide.
161. Dr Vallat finally indicated that, for the time being, the OIE has not sufficient resources in order to recognize officially compartments' sanitary status of Member Countries.
162. Dr Thiermann referred to the comments made by The Netherlands and Denmark and clarified that if one compartment out of 3 connected compartments gets infected, the two remaining ones can still be considered free only if pre-planned control measures (firewall) were activated. He agreed on the need to increase the technical expertise (epidemiology, laboratory diagnostic) for professionals assisting Veterinary Services and private companies in setting up and managing compartments. Regarding the involvement of independent bodies for assisting Veterinary Services in defining compartments, he did not see any contraindications but he stressed the fact that the act of signing health certificates for exported commodities would clearly remain under the responsibility of the Veterinary Services. Finally he agreed with Dr O'Neil that compartmentalisation implies a transfer of some responsibility (e.g. surveillance and testing) from the Veterinary Services to the private sector. He concluded by recommending countries wishing to implement compartments, to first start with compartments for national purposes only and after this phase, pass to setup compartments intended for export purposes.
163. Dr Eloit concluded the session by inviting Delegates from Lithuania, the Netherlands and Russia to work with Dr Thierman in order to prepare the recommendations related to this technical item.
164. The chairman, Dr Lukauskas invited the guest of honour his Excellency Mr. Jemin Gjana, Minister of Agriculture Food and Consumer Protection of the Republic of Albania to address to the participants.
165. Mr. Jemin Gjana, Minister of Agriculture Food and Consumer Protection of the Republic of Albania highlighted the efforts of the OIE in protecting live animals all over the world and in promoting the cooperation between Member Countries of the region.
166. He stressed that the OIE needs to be supported by governments and international donors for the successfully accomplishment of his objectives.
167. Finally, the Minister informed on some reforms of the Veterinary Services of Albania mainly address to the improvement of its Veterinary legislation.

GF-TADs Activities

168. The Session Chairman, Dr Lukauskas, invited Dr Bernard Van Goethem, Director, Animal Health and Welfare Zootechnics Health and Consumer Protection of the European Commission (DG SANCO), to give details of the GF-TADs Activities.
169. Dr Van Goethem explained that the GF-TADs must be a tool for a better coordination between the veterinary administrations of member countries, the international organisations such as the OIE and FAO, but also the various donors and actors for the support to veterinary services of the region.
170. He pointed out that common actions are necessary in terms of administrative and technical support to the countries that need it, following the recommendations issued in the last meeting of GF-TADs Steering Committee for Europe. Some of these recommendations can be linked to concrete actions.. He named the recommendations as follow:

1. Veterinary Services (VS) be reinforced preferably after an evaluation using the OIE Tool for the evaluation of Performance of Veterinary Services (OIE - PVS Tool);

To date, a majority of countries of the Eastern part of Europe outside the EU have been assessed. Some of these audits will be used as a basis for an EC project for strengthening the capacity of the veterinary services in the Caucasus. In parallel, the EC and the OIE organised in 2008 a last wave of joint conferences in the Central Asia countries, in order to disseminate the international standards related to the veterinary services and good veterinary governance. These conferences, like those organised in 2006 and 2007 (making a total of 21), were a success and the attendance was of high profile. It should lead to better account being taken of the PVS audits and their results, including a deeper governmental implication. Some of the key points and difficulties noted were laboratory capabilities, improvement of veterinary services, border controls and control and eradication of diseases in particular, FMD, TB, Brucellosis and rabies, as well as swine fevers. The follow up to these seminars should focus on these areas and will help to enhance the veterinary services of the region.

2. Veterinary schools and other veterinary training institutions review their curriculum;

This recommendation has been followed by evaluations at the national level, but European countries still need more practical actions to be implemented at the regional level, such as rankings, twinning, follow-up of corrective actions, etc.

3. International organisations pursue and reinforce their support;

Financial aid to the Western Balkan countries by the EC via its instrument for pre-accession assistance (called "IPA") is in its preparatory legislative phase. It is aimed at building competence by assisting eradication programmes for classical swine fever and rabies in all Western Balkan countries. The programme has been subdivided into one regional programme and seven national programmes to the extent of 25 million euros over 3 years. As for the Caucasus, after participation of EU Emergency Veterinary Team to the emergency missions with the OIE and FAO Crisis Management team in answer to outbreaks of African swine fever, a preliminary overall assessment mission will be organised as soon as the situation allows, and a 250 000 € budget has already been voted for an EC-OIE support programme against ASF, linked with the FAO Technical Cooperation Programmes (called "TCPs") that have already begun. These FAO and EC programmes are meant to be a first answer to the situation but should be followed by more comprehensive projects.

4. Reference Laboratories of the region engage in twinning arrangements;

Twinning and other cooperative actions have begun between EU Reference Laboratories and other laboratories in various fields, such as epidemiology, surveillance and specific diseases control. A good example is that of twinning between an EU and a Russian laboratory on AI.

5. The OIE and FAO and their Member Countries in the region continue their advocacy role;

A follow up Conference on Avian Influenza is scheduled for 25-26 October 2008 in Sharm El Sheikh, Egypt, which has full support of the EC. It will be an excellent opportunity to review the actual risk posed by H5N1 and the efficiency of measures put in place, as well as to widen the scope of the discussion to the broader concept of "One World, One Health".

6. The EUFMD participate fully in the forthcoming international conference on FMD in 2008;

The coordination of the fight against FMD in the European region through the EUFMD is effective and completely answers to this point, by means of sharing of information and coordinated actions.

This means not only meeting and discussions, but concrete field campaigns of surveillance and vaccination, with good results as the threat for incursion of FMD was rejected.

Furthermore, the European Commission fully supports the long term goal of the OIE and FAO to eventually globally eradicate FMD and will play its role in this ambitious objective.

7. Conference on bluetongue vaccination organised by the EC;

This Conference was a success and numerous countries were represented. Wide consensus was reached on the efficacy of vaccination, if well implemented. It has now been shown clearly by the first field epidemiological satisfactory results. Special attention should be paid to assess the results of this campaign, so that lessons can be learnt by all GF-TADs members.

8. Member Countries review the system of veterinary border control;

Trainings have been organised by the EC throughout the year in order to strengthen EU and non EU countries capacity in the field of border inspection. These trainings were realised in the framework of the EC "Better training for safer food" programme (called "BTSF"), now not any more focused on EU member states, but enlarged to neighbouring countries, as well as third countries exporting to the EU. This BTSF programme is becoming a major tool of DG SANCO's external policy, and it will continue and enhance its actions in the third countries

171. Dr Van Goethem stated that Europe should look to its southern neighbours, and work more actively with them in order to improve information exchange and coordinate their actions. This is actively done by the EU through regional and bilateral programmes, especially under a renewed Mediterranean approach. The CVO of that region of the Mediterranean basin should be invited to some of EU regional meetings to discuss concerted methods of disease surveillance and control. The diseases, to which a particular attention should be given apart from AI and FMD, are: Bluetongue and PPR (recent outbreaks in Morocco), but also West Nile and Rift Valley fever, as well as Brucellosis Tuberculosis and Rabies. New challenges and threats will continue to emerge, especially in zones where different types of material difficulties could have a negative impact on animal health. It is necessary to pay special attention and to support ad hoc activities in such cases.
172. In conclusion he mentioned that the role of GF-TADs is key: it is the best framework to promote effective and coordinated actions to control animal diseases on a regional basis. On addressing the recommendations it has proved its value and effectiveness. But in a dynamic and challenging world, Europe should not neglect risk factors which are not under its control, such as climate change. There is a need for the full commitment of all involved authorities and stakeholders.

GLEWS Activities

173. The Session Chairman, Dr Lukauskas, invited Dr Joseph Domenech, Chief, Animal Health Service/CVO of the FAO, to provide details about GLEWS Activities.
174. Dr Domenech began his presentation by informing participants that to fulfil their respective mandates, FAO, OIE and WHO recognise the importance of early warning in improving member countries' abilities to take preventive action. Each organisation has developed an early notification (alert) or warning system that would systematically collect, verify and analyse information from a variety of sources, including official networks and unofficial media reports and informal networks but GLEWS will allow to better share, analyse, predict and inform on main diseases.

175. He explained that the three organisations first discussed the idea of GLEWS in 2002 and that it was launched in February 2007, GLEWS has been growing in its capacity and ability to provide Global Early Warning of animal disease events, including zoonotic events.
176. He also stated that:
- ◆ Different Working Groups (WG) have been established to guide the development of GLEWS.
 - ◆ The frequency of communication within GLEWS fluctuates depending on the occurrence of disease;
 - ◆ The web-based GLEWS electronic platform will be available by December 2008.
177. Finally, Dr Domenech underlined that GLEWS is a very ambitious project, and implementation is progressing as adjustments are made in line with experience. He stressed that the main issues to be discussed and solved remain confidentiality and transparency.

Update on developments in aquatic animal health

178. The Session Chairman, Dr Lukauskas, invited Dr Franck Berthe, Member of the OIE Aquatic Animal Health Standards Commission, to present an update on developments in aquatic animal health.
179. Dr Berthe gave details of a number of recommendations, focussing on the roles and responsibilities of Member Countries in aquatic animal health that were adopted in May 2004 by the International Committee at the 72nd General Session.
180. He explained that since then, the OIE Regional Commissions are regularly provided with updates on actions taken by the OIE and its Aquatic Animal Health Standards Commission to implement the recommendations.
181. He provided an overview of current developments in the activities of the OIE in aquatic animal health and of amendments to the Aquatic Animal Health Code adopted during the 76th General Session in 2008.
182. Dr Berthe specified that the development of international aquatic animal health standards has progressed immensely recently. However, further challenges are ahead, for example the on-going “catch-up” situation with emerging aquatic animal diseases in newly farmed species.
183. He commented on consumer concerns about animal welfare, food safety, trade rules and environmental protection.
184. Finally, he questioned whether countries are prepared to implement OIE standards and how the OIE could be of further assistance.

**Technical Item II:
Strategy for controlling bluetongue, including the application of vaccines**

185. In the preamble, the Russian Delegate stated that vaccination campaigns had started in his country and that the import of vaccines is authorised. He specified that a letter would be sent to other countries to inform them on the import animal health control measures that Russia will apply in regard to bluetongue.
186. The Session Chairman, Dr Moshe Chaimovitz, Delegate of Israel, briefly introduced the speaker for this Technical Item, Prof Vincenzo Caporale, Director Istituto Zooprofilattico Sperimentale dell'Abruzzo e del Molise "G. Caporale" and President of the OIE Scientific Commission for Animal Diseases.
187. Prof Vincenzo Caporale briefly introduced the subject stating that Bluetongue (BT) was first reported over 125 years ago in Africa. Since then, BT virus (BTV) strains have been identified in many tropical and temperate areas of the world.
188. He explained that in the countries historically affected by BT, the control strategy was based on the vaccination of exposed sheep and on clinical and serological surveillance.
189. He referred to the change in the international situation in 1998 when the Mediterranean epistystem changed dramatically and the largest BT epidemic ever recorded occurred. This changed the perspectives of BT control worldwide, including changes on the OIE standards on BT and a new chapter on BT surveillance was introduced.
190. The eastern Mediterranean Basin became endemic during the first half of the 20 century, but In December 1999, a completely new epistystem developed in the Mediterranean Basin. The main route of entry and spreading of the virus in several countries of this region was never certainly proven but it has been hypothesised that passive windborne transport of infected vectors from BTV infected regions of North Africa could be the most probable entry-via to southern Europe (in Sardinia).
191. After several epidemic periods, at the end of 2006 the 'Euromediterranean BT epistystem' was created as result of merging the western epistystem of African origin and the eastern epistystem of Asian. In 2007, BTV-8 eventually entered this epistystem in The Netherlands.
192. Prof Caporale reminded that the original strategy of BT control in the European Union essentially based on stamping-out (as had been the case for most other former OIE List A diseases), being at that time the vaccination considered just as a complementary measure. The situation changed in 2000 once it was obvious that slaughter of all susceptible animals in the entire infected and at-risk areas was not appropriate for a vector-borne disease such as BT.
193. Control strategy was based on strict movement controls of the susceptible animals from zones considered infected and vaccination was limited to sheep that were exposed in the protection zones. Restriction Zones included three levels of zones: a 20-km radius zone; a protection zone that included the infected zone and with a radius of at least 100 km around the infected holding in accordance with the OIE *Terrestrial Animal Health Code* standard; a surveillance zone with a radius of at least 50 km that extended beyond the limits of the protection zone. Different surveillance strategies were defined by each restricted zone, as well as different control measures, including vaccination inside the protection zone under scientifically justifiable strategies.
194. Prof Caporale commented that the application of some control measures over a long period of time became unsustainable at that time from the economic, social and political points of view.

195. He stated that on the necessity to find a new strategy an intensive surveillance and research effort had been launched since 2000 in the individual affected EU member states to identify vector presence, abundance and dynamics as well as establish BTV epidemiology in the European context. It was demonstrated that movement of animals from infected zones could infect new areas when inappropriate risk mitigating measures were applied.
196. Regarding vaccination, several studies were performed to assess the level of protection against disease and infection in susceptible species, which results encouraged the development of a new BT control strategy.
197. Prof Caporale explained that the new strategy had to fulfil two mandatory objectives, namely to limit virus circulation in the environment to reduce the extent of the protection and surveillance zone; as well as to ensure the immunisation of susceptible animals.
198. He stressed that the objectives could be met through a control strategy based on the vaccination of the entire susceptible domestic ruminant population that induce sufficient population immunity levels.
199. Different vaccination strategies were analysed by researchers, and also some models were developed in order to assess virus spread in relation to immunity levels.
200. He mentioned that vaccination reduces both direct economic losses and virus circulation. To achieve a significant reduction in virus circulation, at least 80% of the BTV-susceptible populations had to be immunised to reduce the secondary cases to less than 1% expected to occur in the absence of vaccination.
201. Prof Caporale commented that the EU approved a strategy proposed by Italy, associating mass vaccination of all susceptible species with intensive serology, virology and entomology surveillance. Even when strict movement controls of susceptible animals were maintained the restriction zones were reduced from three to one of 20 Km of radius. Such a strategy resulted in a decrease of clinical outbreak occurrence and reduction in BTV circulation, leading to a safer animal trade and movements.
202. He recalled that amendments in EC legislation always considered the vaccination of both animals to be moved, their population of origin as well as a specific risk assessment, as conditions for derogation from the Directive's no-movement provisions from restricted zones.
203. Regarding adverse events observed in the use of live virus attenuated vaccines, Prof Caporale mentioned that it was only demonstrated a transient 30% decrease in production that lasted for about a week after vaccination with bivalent BTV-2 and BTV-9 vaccine to sheep, but no negative effects were observed in cattle during field trials. He also mentioned the possibility that the vaccine virus crosses the placental barrier causing infection of the foetus and consequent abortion, stillbirth or neonatal mortality. Nevertheless he commented that no adverse effects on reproduction were observed in cattle immunised with the monovalent BTV-2 vaccine, or bivalent BTV-2 and BTV-9 vaccine. He also stated that reversion to virulence of the vaccine viruses and reassortment between vaccine and field strains of the virus remain hypothetical for the time being and are not supported by factual scientific data Prof Caporale commented that in light of the evolution of BT in the Mediterranean during the 1999-2002 epidemic led to changes in the OIE standards in 2003, including the northern extension of the limit of the infected zone.
204. Regarding the Incursion of bluetongue virus serotype 8 into northern Europe in 2006 Prof Caporale recalled that was initially detected in the Netherlands, reaching later neighbouring countries, such Belgium, Germany, Northern France and Luxemburg, spreading further northern during 2007 and 2008 to Europe, reaching also the Czech Republic, Switzerland, Denmark, the United Kingdom, Spain, Italy, Sweden and Hungary affecting in one year a larger area (including 11 countries) than the sum of all areas infected during 8 years by other BTV serotypes in four European countries. Sequence analyses indicated that the virus originated in a western lineage from sub-Saharan Africa but was distinct from the BTV-8 vaccine strain.

205. Prof Caporale indicated that a passive 'wait and see' approach was adopted during the first BTV-8 epidemic by the countries affected. And when the second BTV-8 epidemic commenced in 2007, no effective structured surveillance network was in place in northern Europe to detect BTV infection, and countries also failed mainly on the surveillance, control and restriction of movements of animals, and on the lack of vaccination strategy, facilitating the spread of the infection. The adoption of single restriction zones in many member states affected by BTV-8 was automatic without implementation of effective surveillance systems and the mass vaccination of susceptible species. Also the idea that simply the use of insecticides/repellents associated with individual animal testing for virus could be sufficient to certify animals from restricted areas as safe for trade, complicated matters further.
206. Regarding immunisation policy, Prof Caporale commented that after the BTV-8 epidemic commenced in 2006, no vaccination was performed during the first two epidemics up until the end of 2007.
207. He mentioned that in January 2008, during a conference on BT vaccination, it was recognised that the use of any of both types of vaccine (inactivated or MLV) was better than experiencing the disease and it would be hard to justify adopting the 2007 approach when controlling the disease in 2008, given the availability of vaccines, and emergency vaccination should be performed within the existing EU legal framework.
208. He also indicated that at present, all EU member states infected by BTV use vaccination as a control tool, under several vaccination schemes. The EU vaccination strategy allows vaccination only in restricted zones.
209. In relation to the epidemio-surveillance, Prof Caporale commented that when BT was limited to the Mediterranean countries of Europe, the origin of the incursions in EU member states was generally beyond the EU. He also stated that regarding intra-European transboundary spread, after BTV-8 spread to northern Europe, the European Commission decided to establish a mandatory Web-based surveillance network in 2007, to collect, store and analyse BT surveillance data, including supra-national as well as national components. In addition, information collected from the OIE World Animal Health Information System (WAHIS) is the basis of the information for the rest of the European continent and Mediterranean Basin. Data on the serological and entomological surveillance as well as on vaccination in EU member states are entered by each competent authority of the member states.
210. Prof Caporale remarked some lessons learnt from the recent experiences as, namely the fact that BT did not cause often symptoms in cattle and some serotypes did not cause severe disease in sheep difficult the acceptance from farmers and veterinarians of the control strategy; the attitude to avoid vaccination prevailed in many areas; difficulty of having good quality vaccines in the quantities required and in sufficient time to perform vaccination during the seasons in which wild virus did not circulate; underrated assessment on the need for an effective communication campaign on the strategy chosen; possibility of a new incursion of BTV from other episystems is an ever present threat.
211. Although at first sight, the control strategy and the legislation in force appear to be the same Prof Caporale briefly explained the differences between the implementation of the strategy in Southern and Northern Europe: movement control in northern Europe was less effective than southern Europe; false assumption overrating the efficacy of insecticides for *Culicoides* to guarantee safe movements; in the case of the BTV-8 epidemic no vaccination was applied during two entire epidemic seasons.
212. Prof Caporale presented his conclusions stating that:
- ◆ BT epidemic is the first example of continental spread of d BTV in large naive populations, which density of susceptible species helps to explain the speed and the extent of spread of the infection;
 - ◆ New *Culicoides* spp. (such as *C. dewulfi*) never previously considered as competent vectors of BTV, have been able to sustain BTV infection cycles, and that transport of infected vectors by the wind was also demonstrated to be a significant factor in the spread of BTV over long distances.

- ◆ Animal movements that were always considered of no importance for BTV spread has also been demonstrated to contribute to the spread the infection over long distances.
- ◆ The basic innovations that were introduced in the new strategy were the use of mass vaccination in all domestic ruminant species to limit the spread of BTV and the use of active surveillance to limit, as far as possible, the zone in which movement restrictions should be applied.
- ◆ The similarity of the ecology of the two hemispheres is often underrated as is as the fact that there are a number of diseases agents, for instance in southern Africa, that could spread rapidly in Europe by finding naive susceptible animal populations.
- ◆ The Mediterranean Basin represents a unique epidemiological entity of animal diseases, which implies the need for regional surveillance networks that include all countries that border the Mediterranean Sea, which will allow a more efficient disease management, including components such risk assessment, early warning, contingency planning, and the organisation and management of vaccine banks.

213. Prof Caporale finished his presentation remarking the need to organise vaccine antigen banks for the various BTV serotypes that are not yet reported in Europe, as well as to further study and monitor the frequency of BTV-8 transplacental transmission to verify its relevance in relation to BTV spread.
214. The Chairperson thanked Prof. Caporale for his excellent presentation and introduced a second speaker, Prof Thomas C. Mettenleiter from the German delegation. He invited him to make his presentation.
215. Prof Mettenleiter first presented the general activities of the Friedrich-Loeffler Institut, Federal Research Institute for Animal Health (FLI) and those specifically related to bluetongue. He reviewed the situation that lead to the arrival of BT in Germany clarifying that the BTV-8 serotype was detected for the first time in August 2006.
216. He detailed the approach used by his country in respect to the use of BT vaccines. He mentioned the regulatory constraints for the use of non approved vaccines and the studies that have been performed on vaccines to gather scientific data on their efficacy and their safety.
217. He considered the necessity to perform vaccination campaigns, to produce safe vaccines that would eventually protect against all serotypes.
218. He concluded by underlining the need for further research work and funding to reach these objectives. He referred to the building of new premises for animal research in the FLI that will be completed by 2010.
219. Dr Lukauskas pointed out that the presentation of the speaker from the FLI was not included in the agenda and that the information presented reflected the position of the speaker.

Discussions

220. The chairperson opened the discussions on the technical item II.
221. Dr Vallat noted that a common vision on BT for all European countries is necessary, considering that the Regional Commission for Europe includes 52 Member Countries from which 27 are EU Member States.
222. He clarified that the presentation from Prof Caporale is fully in line wit the OIE position in relation to OIE standards including the use of vaccination.
223. Dr Vallat reminded that the Regional Commission for Europe has to adopt recommendations on BT Control Strategy during the present Conference which will be presented to the International Committee for its endorsement in May 2009 during the General Session.

224. He expressed that would be good and necessary to know which is the opinion of non infected countries, mainly from non EU Member Countries.
225. The Delegate of The Netherlands requested the speaker more details and information on modified live vaccines (MLV). Whether there are other serotypes included different than BTV-8 as well as how such vaccines are produced.
226. Prof Caporale clarified that the MLV vaccines used in Europe originated from South Africa, and stated that the serotype 1 used in Sardinia was not produced in South Africa.
227. He commented that Italy provided BTV-8 MLV vaccines to France for joint research studies.
228. Prof Caporale noted that when any country has an emergency, rather than letting the virus spread, it would be better to use available vaccines, being this, the unique way to stop the spread of the virus, even when these vaccines would be not fully in line with the EU pharmacopeia.
229. He stated that it is important to study and analyze other subtypes which are still not included in vaccines. He stressed that timely availability of vaccines is a key point to avoid the spread of BT into Europe.
230. Considering the risk of entry of other virus serotypes from Africa Prof Caporale stated that it is very important to know the current level of immunity of the susceptible population in several countries.
231. The Delegate of Italy pointed out that vaccination is the only solution for Bluetongue in Europe. He asked information on the average time required for approval of new vaccines. He also wondered why since vaccination is the best option, the EU legislation imposes trade restrictions for vaccinated animals and their products (e.g. semen). He raised the issue of whether the OIE and EU regulations could be verified in light of movement of vaccinated animals.
232. Prof Caporale clarified that current OIE standards allow free movements and trade of vaccinated animals as well as their products, so that there is no need to change such standards in relation to trade. Prof Caporale expressed the necessity to have further discussions on this issue, considering that there is a lack of consensus on vaccination and considered that reaching the free status for all territory is a better strategy.
233. Dr Vallat explained that the OIE ensures the secretariat of the Scientific Commission for Animal Diseases (SCAD) and the Code Commission, and that comments from all Member Countries are taken into account in order to establish new standards or modify current ones during the General Session. He noted that from now there is enough time for countries to prepare proposals on this issue, and encouraged them to do so, soon if necessary, which will be addressed to the SCAD and to the Code Commission for discussion.
234. In relation to the use of vaccines in general the Director General stressed that the OIE is promoting vaccination in general worldwide whenever relevant since 8 years ago, and he gave the specific example of FMD for which the OIE has promoted trade from countries where vaccination is applied by establishing standards which were adopted by its Member Countries. He also reminded the Global Conference on Vaccination organized by the OIE in 2004 in Buenos Aires, Argentina which conclusions showed the benefits of vaccination in trade. He stressed the fact that vaccination as disease control strategy avoids mass culling and losses of animals as well as benefiting animal welfare.
235. Dr Vallat stated that Bluetongue is one of the chapters where standards related to the use of vaccination were recently included and suggested again Members to make recommendations and comments to such a chapter if they consider it necessary.

236. The Delegate of the United Kingdom remarked the influence of climatic changes in relation to Bluetongue occurrence and stated that countries should be prepared to face such threats. He also remarked that the relation between climatic changes and BT needs to be supported by scientific grounds. He also noted that even when there is a clear understanding of available tools, including vaccines, any control strategy should consider a cost/benefit analysis. He stressed the necessity to develop regional strategies considering different situations. Strategies should be flexible enough for allowing different approaches considering different regional characteristics. He remarked that considering that there are several serotypes of virus and epidemiological conditions there is not a single solution to the problem.
237. Prof Caporale agreed with the United Kingdom speaker on the necessity to tailor the strategy to the needs of the local industry but he stated that first there should be agreement on an overall strategy for BT. He underlined that the only way to prevent the introduction of BT into a country was to accept only vaccinated animals.
238. The Delegate of Cyprus stated that in the past 30 years there were no clinical signs of bluetongue in his country although there are seropositive animals for BTV-16. He informed that although there are infections of different serotypes in surrounding countries, Cyprus will not vaccinate because it does not see any advantage in it. He commented on the importation of animals to Cyprus, which totalize yearly 500 animals for reproduction and 5000 for fattening, the last remaining three months before are sent to slaughter. He asked Professor Caporale whether such animals should be vaccinated against BTV absent in his country before entering Cyprus in order to reduce risks of introduction of the disease.
239. Prof Caporale answered by stating that regarding importation of animals from infected areas the only effective prevention measure is to allow only vaccinated animals.
240. A representative of Swedish Delegation asked Prof Caporale which would be the best strategy in general to apply in Europe under the current situation.
241. Prof Caporale responded that it is up to the EU to decide on the best strategy to be applied. This strategy should be decided collectively and aimed to avoid problems in trade. European countries have to decide: a) Europe does not want to control the disease (no vaccination) and accepts it becomes endemic, or b) Europe wants to stop the spread of infection and therefore decides to vaccinate. He stated that it also depends on the situation of each country, nevertheless he recalled that if neighboring countries are infected and they do not apply the same strategy the risk of introduction to free countries or zones will be always present and introduction of the virus would occur frequently, taking into account that the virus will spread with *Culicoides* distribution.
242. He stressed that it is necessary to be very strict on movement control, surveillance and vaccination, but such restriction measures are difficult to maintain for a long time whenever farmers are not properly informed and convinced of their role.
243. The representative of Belgium referred to climatic changes in relation to disease occurrence and informed that his country will organize in October 17th a conference on emerging diseases which will be supported by the OIE and by EFSA.
244. Prof Caporale noted that the main problem regarding Bluetongue is not related to climatic changes but animal movements are risky for spreading any disease as never before. He provided examples of many viruses that can move quickly from Southern Africa to Northern Africa, and then find suitable environment for further spread in Europe. He referred to examples of RVF, African Horse Sickness and PPR. Prof Caporale stressed that strong and efficient regional network surveillance systems will allow early detection and response to outbreaks.
245. The Delegate of Portugal reminded that his country has eradicated African Horse Sickness by applying vaccination. He stressed that Bluetongue should be addressed with a regional approach. Related the vaccination strategy he noted that the timely vaccination should be considered when controlling Bluetongue.

246. He also commented his concern regarding vaccination with BTV-8 which would prevent trade of animals in some areas according to the OIE Code for which he suggested that changes should be made.
247. Prof Caporale repeated that the OIE Code allows since 2004 movement of animals with BT antibodies. He explained that current OIE standards prevent movements of non vaccinated animals to infected zones. He insisted that regarding trade rather the OIE is the EU which should change its legislation in order to facilitate movements of animals.
248. The Delegate of Russia stated that they have an experience of the control of this disease in 1997 where they successfully eradicated few outbreaks.
249. He indicated that regarding inactivated vaccines, as per Russian experience, it can take 3 months to produce 1 million doses. He stated that the "wait and see" policy at the beginning of the epidemic of BTV-8 was wrong, and that in Russia seropositive animals were not allowed to be moved.
250. The Chairman concluded by stating that the efforts in the region need to be coordinated because vector and animal movements know no borders. He invited the Delegates of Germany, Russia, Croatia, Sweden, UK and Bulgaria to take part in the drafting working group for preparing Recommendations on this item.

Animal health situation in Europe in the first half of 2008

251. The Session Chairman, Prof Werner Zwingmann, Delegate of Germany, invited Dr Francesco Berlingieri, Deputy Head of the OIE Animal Health Information Department, to give details on the animal health situation of OIE Members in the region in the first half of 2008.
252. This report is based on information obtained from specific national reports provided by OIE Members of the Regional Commission for Europe in preparation for the Regional Conference. Where necessary, this has been supplemented by relevant information extracted from immediate notifications and follow-up reports submitted by countries and other official data gathered as part of the OIE World Animal Health Information System (WAHIS).
253. In preparation for the 23rd Conference of the OIE Regional Commission for Europe, the OIE requested Members to submit a Report on the Animal Health Situation for 2008. The following 28 countries provided a report: Albania, Armenia, Austria, Azerbaijan, Belgium, Bosnia and Herzegovina, Bulgaria, Cyprus, Czech Republic, Denmark, Estonia, Finland, Germany, Iceland, Ireland, Italy, Liechtenstein, Latvia, Lithuania, Former Yugoslav Republic of Macedonia, Moldavia, Netherlands, Norway, Portugal, Romania, Slovenia, Spain, and Switzerland. and the United Kingdom

Livestock population in Europe

| Country | Cattle | Sheep & goats | Swine | Equines | Poultry |
|----------------------------------|------------|---------------|------------|-----------|-------------|
| ALBANIA | 577 000 | 2 729 000 | 147 000 | 122 000 | 7 135 000 |
| ANDORRA | 1 434 | 3 033 | 59 | 859 | 4 510 |
| ARMENIA* | 629 146 | 639 000 | 86 710 | 11 776 | 4 102 701 |
| AUSTRIA* | 1 998 129 | 411 800 | 3 286 292 | ... | ... |
| AZERBAIJAN | 2 511 776 | 8 109 898 | 18 676 | 71 892 | 20 753 986 |
| BELARUS* | 4 006 700 | 124 300 | 3 598 400 | 146 400 | 29 475 800 |
| BELGIUM | 2 649 392 | 179 402 | 6 255 404 | 35 371 | 32 751 842 |
| BOSNIA AND HERZEGOVINA | 438 000 | 780 249 | 415 655 | 16 466 | 2 009 891 |
| BULGARIA* | 582 594 | 2 557 944 | 876 723 | 187 299 | 17 747 153 |
| CROATIA* | 398 037 | 954 217 | 1 726 895 | 11 114 | 10 641 000 |
| CYPRUS | 57 127 | 608 001 | 498 324 | ... | 4 628 000 |
| CZECH REPUBLIC | 1 401 607 | 200 245 | 2 432 984 | 61 000 | 170 000 000 |
| DENMARK | 1 600 000 | 197 000 | 14 300 000 | 52 702 | 29 600 000 |
| ESTONIA* | 242 462 | 64 415 | 277 469 | 5 810 | 2 405 000 |
| FINLAND | 926 694 | 125 433 | 1 448 041 | 68 000 | 9 791 071 |
| FRANCE* | 19 480 088 | 10 124 326 | 14 917 893 | 402 149 | 280 688 896 |
| GEORGIA* | 1 200 800 | 865 800 | 525 000 | 100 000 | 8 247 900 |
| GERMANY | 12 687 000 | 2 707 791 | 27 125 000 | 541 890 | 128 463 000 |
| GREECE* | 880 110 | 5 239 328 | 1 994 648 | 47 825 | 57 683 191 |
| HUNGARY | ... | ... | ... | ... | ... |
| ICELAND* | 68 000 | 452 500 | 41 000 | 55 000 | 390 000 |
| IRELAND | 6 162 266 | 3 530 500 | 574 600 | ... | 15 716 996 |
| ISRAEL* | 330 000 | 520 000 | 180 000 | 30 000 | 45 000 000 |
| ITALY | 6 432 423 | 8 481 492 | 8 870 869 | ... | 184 637 696 |
| KAZAKHSTAN* | 5 853 000 | 16 151 700 | 1 387 900 | 1 289 600 | 29 850 200 |
| KYRGYZSTAN* | 1 168 026 | 4 251 813 | 74 918 | ... | 4 589 190 |
| LATVIA | 407 606 | 90 212 | 283 687 | 13 300 | 3 885 000 |
| LIECHTENSTEIN* | 6 037 | 4 002 | 1 735 | 441 | ... |
| LITHUANIA | 853 000 | 61 477 | 1 010 000 | 63 600 | 8 419 400 |
| LUXEMBOURG* | 183 640 | 11 701 | 84 151 | 4 228 | ... |
| MACEDONIA (FORMER YUG. REP. OF)* | 267 713 | 35 000 | 277 110 | 52 639 | 2 543 146 |
| MALTA | ... | ... | ... | ... | ... |
| MOLDAVIA | 192 055 | 535 006 | 105 584 | 32 283 | ... |
| MONTENEGRO | ... | ... | ... | ... | ... |
| NETHERLANDS | 3 762 784 | 1 693 357 | 11 662 654 | 133 524 | 92 762 740 |
| NORWAY | 923 610 | 1 155 545 | 829 940 | ... | 16 850 000 |
| POLAND* | 6 111 007 | 333 520 | 17 621 200 | 330 000 | 134 256 300 |
| PORTUGAL* | 1 312 000 | 278 100 | 2 812 000 | ... | 230 263 000 |
| ROMANIA* | 2 581 390 | 10 566 576 | 5 108 796 | 807 019 | 64 711 486 |
| RUSSIA | ... | ... | ... | ... | ... |
| SERBIA* | 1 735 248 | 2 136 172 | 4 000 000 | 20 000 | 30 000 000 |
| SLOVAKIA* | 524 247 | 331 829 | 921 723 | 11 500 | 18 000 000 |

| | | | | | |
|--|--------------------|--------------------|--------------------|------------------|----------------------|
| SLOVENIA | 475 112 | 170 343 | 476 141 | 19 249 | 3 056 662 |
| SPAIN | 6 653 087 | 25 505 240 | 24 894 956 | 247 975 | 168 086 903 |
| SWEDEN* | 1 590 409 | 505 466 | 1 680 535 | 300 000 | 6 170 320 |
| SWITZERLAND | 1 600 000 | 490 000 | 1 600 000 | 52 000 | 8 000 000 |
| TAJIKISTAN* | 1 303 286 | 2 816 563 | 1 102 | | 2 368 243 |
| TURKEY* | 10 411 226 | 29 173 106 | ... | 547 259 | 677 500 000 |
| TURKMENISTAN | ... | ... | ... | ... | ... |
| UKRAINE* | 6 333 100 | 1 663 000 | 7 687 900 | ... | 160 394 500 |
| UNITED KINGDOM* | 10 303 982 | 15 516 703 | 4 834 375 | 383 733 | 290 304 197 |
| UZBEKISTAN* | 9 884 700 | 10 883 100 | 82 700 | ... | 27 801 200 |
| Total | 139 697 050 | 173 965 205 | 178 036 749 | 6 275 903 | 3 041 686 120 |
| (*) Data completed with WAHIS reports from 2006 and 2007. (...) No data available. | | | | | |

254. The above table gives an overview of the current livestock population in Europe. Compared to the figures presented at the OIE Regional Conference in 2006, animal numbers remained stable in 2007.
255. Figure 1 presents the total number of new outbreaks of specified diseases reported to the OIE in 2005, 2006 and 2007. Data for 2008 have not been included. The Figure includes the 8 diseases with the highest number of new outbreaks over the three years, namely bluetongue, bovine tuberculosis, rabies, varroosis of honey bees, enzootic bovine leukosis, brucellosis due to *Brucella abortus*, brucellosis due to *B. melitensis* and bovine viral diarrhoea.
256. Figure 2 shows the number of new outbreaks of highly pathogenic avian influenza (HPAI). Whereas 930 new outbreaks of HPAI were reported in Europe in 2006, only 71 were reported in 2007 and 13 during the first half of 2008.
257. It should be noted that 4 of the 8 diseases with the most outbreaks are zoonoses. This underlines the important role that the Veterinary Services have to play, not only in animal health but also in public health.
258. It should also be noted that the only disease in Figure 1 where the trend was for a constant increase in the number of outbreaks year after year was varroosis of honey bees. Moreover, this disease was the fourth highest in terms of the total number of new outbreaks.

Figure 1. Total number of new outbreaks reported to the OIE by disease between 2005 and 2007

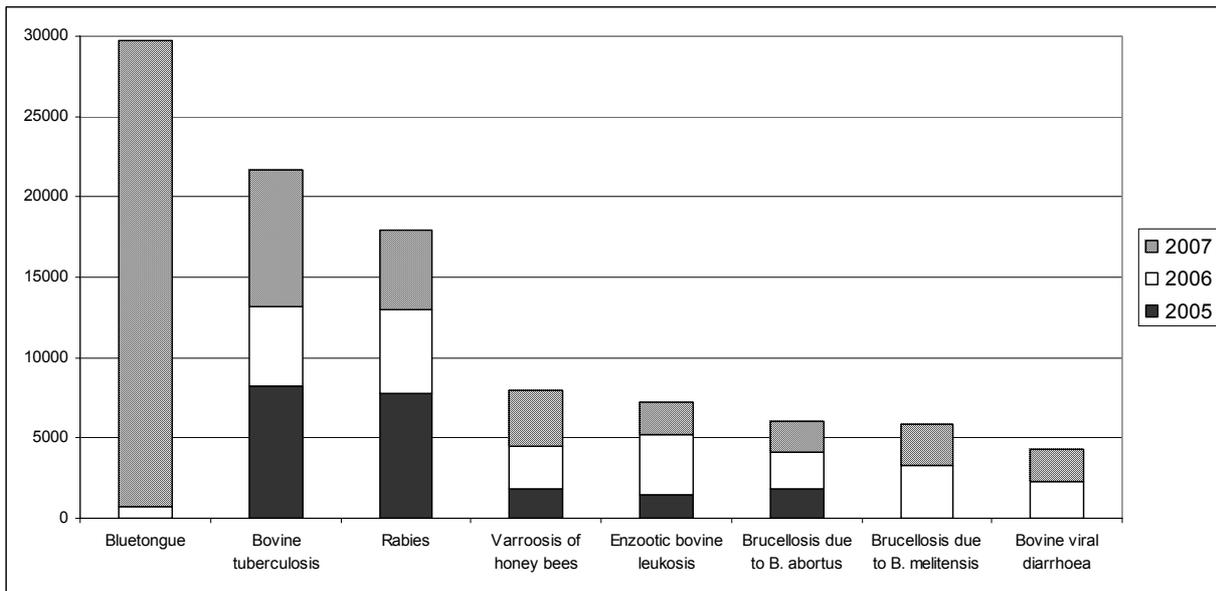
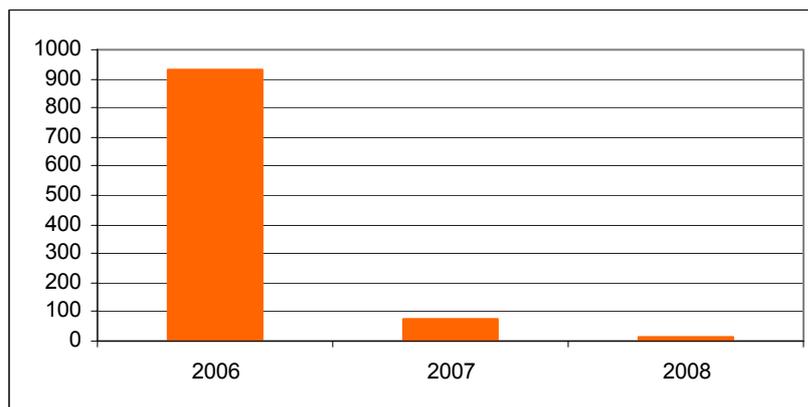


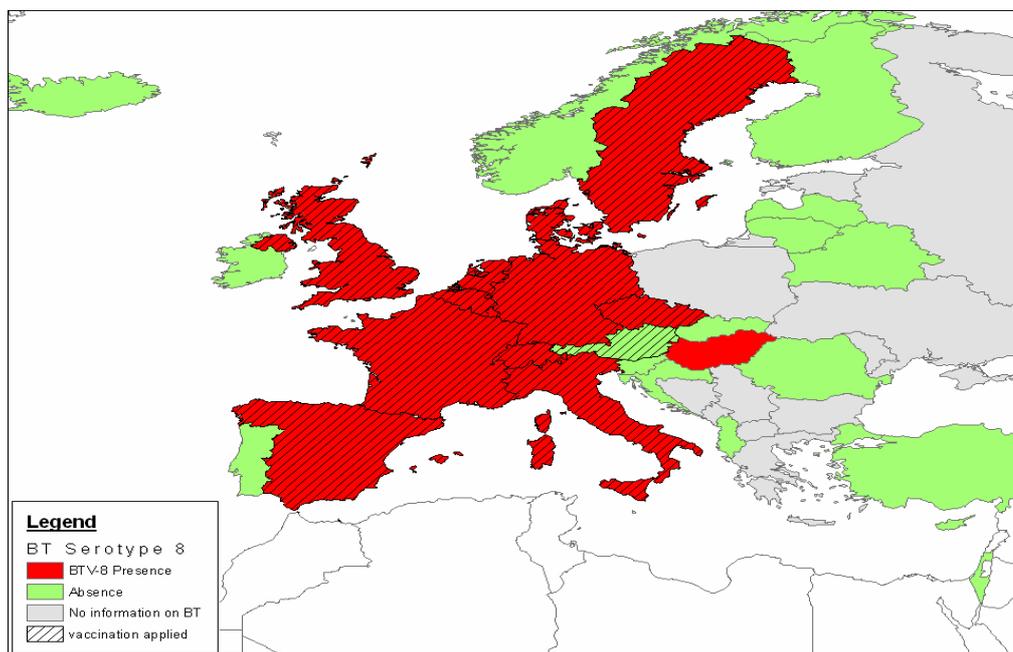
Figure 2. Highly pathogenic avian influenza new outbreaks: Total number of new outbreaks of HPAI reported to the OIE between 2006 and 2008.



Bluetongue

259. Bluetongue virus (BTV) infection appeared in previously free areas in Europe due to climate change and global warming. There are currently two ongoing epizootics of bluetongue, due to two different virus serotypes. One, due to BTV-8, has already spread widely; the other, due to BTV-1, is currently starting to spread northwards from the south. Although no new outbreaks have been reported, serotypes BTV-2 and BTV-4 have also been reported in 2008: in Italy (serotypes 2 and 4), Portugal (serotype 4) and Spain (serotype 4).
260. Serotype BTV-8, following its first occurrence in August 2006 in the Netherlands, in Kerkrade, province of Limburg, also affected Belgium, Germany, France and Luxembourg. This was the first occurrence of bluetongue in northern Europe and the first occurrence of this serotype in the whole of the continent. In 2007, BTV-8 reappeared in these countries and the epizootic continued to spread. To the north-west, outbreaks appeared in England, United Kingdom, in September 2007. In October 2007, an outbreak was reported in Denmark in the region of Storstrøms (resolved in November 2007) and a new outbreak appeared on 26 August 2008 in the South region (serotyping in progress). In France, the disease, which had been restricted to the north of the country in 2006, started to spread southwards. In October 2007, Switzerland reported its first ever occurrence of the disease (starting in the Basel region) which continued in 2008 with 2 new outbreaks in the regions of Valais and Jura. BTV-8 continued to spread further south and affected Italy (in the Veneto region) in March 2008, with a total of 5 new outbreaks. Following a recent risk analysis, Italy identified Veneto and Piemonte regions as being at high risk, due to the density of animals introduced from other European Union (EU) countries. In January 2008, an outbreak was reported in Spain in the Cantabria region. The disease spread eastwards in Germany and in the first semester of 2008, 2 082 cases were reported, mainly in Lower Saxony and North Rhine-Westphalia. In November 2007, BTV-8 reached the Czech Republic, where the first outbreak was detected in the Karlovarský region; this event is still ongoing.
261. In Europe, more than 35 000 outbreaks of bluetongue due to BTV-8 were reported to the OIE for the period from January 2007 to June 2008. However, most of these outbreaks occurred in 2007, while at the beginning of 2008 there were fewer new outbreaks. Countries' reports indicate that some of the new outbreaks reported in 2008 might actually be related to infections that had remained undetected in 2007.
262. This decrease in the BTV-8 incidence in the first semester of 2008 is related partly to the seasonality of the disease but mainly to the start of the vaccination campaign. The delay in the start of vaccination was due to the time needed to prepare the vaccine and the large number of doses required. The following European countries recently started a vaccination campaign against BTV-8: Austria, Belgium, Czech Republic, Denmark, France, Germany, Italy, Liechtenstein, Spain and Switzerland and the United Kingdom. Figure 3 shows the distribution of BTV-8 in Europe at the beginning of 2008; countries that have initiated a vaccination campaign are also indicated.

Figure 3. Distribution of BTV-8 in Europe between 1 January and 15 September 2008 and countries that have started vaccination against serotype 8.



263. Two new outbreaks of BTV-8 have been reported northern to the 56° parallel: one in Denmark on 5th September in the North region and one in Sweden on 6 September in Hallands Län. This pushes further north the limit of BTV-8 outbreaks.
264. The most eastern notified outbreak in Europe in 2008 took place in Hungary in the Borsod-Abaúj-Zemplén region on 25 August. It must be noted that up to today confirmation for the serotype is still pending.
265. The other bluetongue epizootic in Europe, which is currently spreading northwards, is due to BTV-1. It started with a series of outbreaks in the Andalusia region of Spain in July 2007. This epizootic in the southern part of the country crossed the border into Portugal in September 2007. In October 2007, an outbreak was reported in northern Spain in the País Vasco region. This region shares a border with the Pyrénées-Atlantiques region of France, where an outbreak due to BTV-1 was reported in November 2007. From there the epizootic moved northwards into the south-eastern departments of France; the latest reported outbreaks were in May 2008. Italy reported the persistence of serotype 1 but no new outbreaks were reported in 2008.
266. Some areas of Italy, Portugal and Spain are affected by BTV-4 but no outbreaks have been reported in 2008 since these countries are currently vaccinating against this serotype. Italy also reported the presence of serotypes 2, 9 and 16, although no new outbreaks related to these serotypes were identified in 2008.
267. Although winter periods with no vector activity were observed in the affected countries, new outbreaks occurred when the vectors became active again both in 2007 and 2008. The mechanism for the overwintering ability of BTV is still being discussed. Many hypotheses have been put forward to try to explain the persistence of the virus. These include persistence within surviving adult vectors themselves and/or transovarial transmission through the vector, or a persistent infection in vertebrate hosts and/or transplacental transmission from infected cows to their calves. According to the June 2008 Scientific Opinion of the Panel on Animal Health and Welfare of the European Food Safety Authority (EFSA), no single mechanism has been demonstrated to be responsible for the overwintering capabilities of BTV in northern Europe. Year-round presence of infected *Culicoides* remains the most likely mechanism, although transplacental transmission cannot be excluded.

268. *Culicoides imicola*, the main bluetongue vector in Africa and the Mediterranean Basin, has never been detected in the areas affected by BTV-8 in northern Europe and those affected by BTV-1 in northern Spain and mainland France. Entomological surveillance activities are in place in the areas affected by these two BTV serotypes and *Culicoides* species belonging to the *C. obsoletus* complex, including *C. dewulfi* and *C. chiopterus*, two species breeding exclusively in cattle and horse dung, are strongly suspected of being the vectors of infection. It is important to identify the main vectors and study their biology and behaviour in order to be able to devise effective control measures and define standards relating to the movement of animals, especially concerning the possibility of determining, if relevant, a seasonally vector-free period.

Bovine tuberculosis

269. Tuberculosis is still a major concern in many European countries.
270. In Albania, the disease is mainly concentrated in the central and northern part of the country (18 outbreaks) with a low prevalence (0.19%). The control strategy is test and slaughter of positive animals. In 2008, 35 940 animals have been tested, 19 of which were positive. Human cases have also been reported.
271. Azerbaijan reported that out of 507 699 cattle tested, tuberculosis was detected in six animals using the intradermal tuberculin test.
272. Two outbreaks were reported in Belgium (in the Antwerp region), involving 16 cattle.
273. Bosnia and Herzegovina reported one outbreak in 2008, involving two cases.
274. Bulgaria reported two new outbreaks in cattle in 2008.
275. Croatia reported 14 new outbreaks in cattle during the first semester of 2008.
276. In Cyprus, a national tuberculin test campaign, which started in 2004, is continuing. Up to now, all tested animals have reacted negatively to the tuberculin test. Out of a total of 323 bovine herds, 204 have been officially recognised as tuberculosis free by the national authorities.
277. In Germany, 17 new outbreaks in cattle were reported between February and May 2008.
278. Ireland reported that its situation has not altered significantly in 2008, with 2772 new outbreaks. These involved 12 488 positive bovines with a herd incidence slightly above 5%. Efforts to eradicate tuberculosis include additional blood testing (IFN- γ assay) in certain circumstances; removal of badgers where they are implicated in a tuberculosis breakdown, movement control inside the country and elimination of positive animals
279. In the period under study, Italy reported 1222 cases in cattle and buffaloes in several regions.
280. Former Yugoslav Republic of Macedonia recently introduced a control/eradication programme for tuberculosis in cattle. In the first semester of 2008, 360 cattle tested positive, indicating a prevalence of 0.25%.
281. In the period under study, Portugal reported 70 cases in farmed cervidae, wild animals and sheep.
282. Spain is implementing an eradication programme. During the first semester of 2008, a total of 46 629 herds were inspected (36.9% of all the herds included in the programme), which involved sampling and testing 2 080 767 animals. The prevalence was found to be 0.65%.
283. Although no data on tuberculosis for 2008 were received yet from the United Kingdom, the 4133 outbreaks reported throughout all 2007 let us assume the disease is still present in the country

Rabies

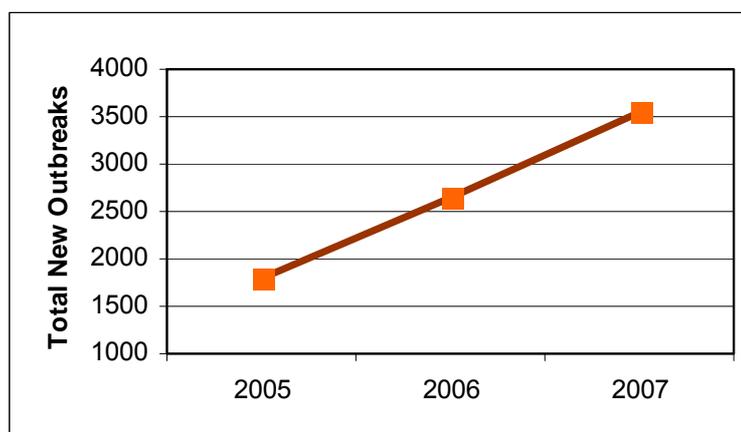
284. Rabies is a serious zoonotic disease in the European region: in the first semester of 2008, more than 1400 new outbreaks in animals were reported. In 2007, six European countries reported human cases of rabies: Finland (the source of infection was of Asian origin), Georgia, Germany, the Netherlands, Russia and Turkey. While several countries have managed to eradicate the disease, the risk of importing infected animals cannot be excluded.
285. Azerbaijan reported 11 outbreaks of rabies involving both domestic and wild animals in 2008. In almost all the regions of the country, outbreaks are regularly reported in both rural and urban areas. Lack of resources to implement measures to control populations of wild animals, the main carriers of the pathogen, and poor control of stray dogs, have reduced the effectiveness of measures to combat rabies. During the period under review, a total of 157 035 dogs were vaccinated, as well as cattle, sheep and goats in zones where they constantly come into contact with wild fauna.
286. In October 2007, Belgium reported its first rabies outbreak since 1999. The event was related to a four-week-old pet dog imported by air from Morocco on 8 July 2007 by private owners. The animal was euthanized on 20 October 2007 and the body was sent for testing. On 24 October 2007, rabies virus was isolated on cell culture. In April 2008, the event was declared resolved. In relation to another epidemiological event, the Belgian Veterinary Services notified that despite the transit through Belgian territory of a dog that was the index case for an outbreak in France that occurred on 24 April 2008 (see below), no new cases had been identified in Belgium since the case in 2007.
287. Bosnia and Herzegovina reported 56 outbreaks in 2008, involving 57 cases.
288. Bulgaria reported 21 new outbreaks in 2008, involving 4 dogs, 4 cats and 18 wild animals.
289. Croatia reported 601 new outbreaks during the first semester of 2008, involving dogs, cats, livestock and wild animals.
290. The spread of sylvatic rabies continues to be a problem in Estonia. In 2005, the country launched a programme to eradicate rabies. Since 2006, vaccination campaigns have been conducted throughout the territory of Estonia twice a year, in spring (April-May) and autumn (September-October). The vaccination programme includes oral vaccination of wild animals, such as red foxes and raccoon dogs, using vaccine baits.
291. France reported 2 unrelated cases of canine rabies. The first was in Seine-et-Marne department, where a female with clinical signs was euthanized on 19 February 2008. This dog had been in contact with another dog born in France (euthanized on 5 January 2008 and not tested for rabies), which had in turn been in contact with a dog illegally imported from Morocco (euthanized on 12 November 2007 and not tested for rabies). Thus, this illegally imported dog was the index case. The event has been declared resolved since six months have elapsed since the rabid dog was euthanized and no secondary cases of rabies have been detected. The second case of canine rabies in France was reported in the Var department, involving a female dog imported from Gambia via Belgium. After transiting through Belgium, the dog arrived in the Var department on 13 April 2008. The dog was examined in three veterinary clinics in the Var department until the suspicion of rabies (nervous signs) was established in the third clinic. The dog died on 21 April 2008 (it was not euthanized). Laboratory confirmation of rabies was obtained by virus isolation on cell culture.
292. Georgia reported 41 new rabies outbreaks involving dogs and cattle during the first half of 2008.
293. In Latvia, 50 new outbreaks of rabies were reported in the first half of 2008, involving dogs, cats, cattle and wild animals.

294. Rabies is endemic in Lithuania. A total of 30 cases of rabies were registered in the country in the first half of 2008: 10 in domestic animals and 20 in wildlife. The State Food and Veterinary Service of the Republic of Lithuania has prepared a long-term strategy to eradicate rabies from the country. Vaccination of cats and dogs against rabies is compulsory and all other domestic animals are vaccinated after exposure to an infected or suspected infected animal, or in areas where rabies outbreaks have occurred. Oral vaccination of wild animals against rabies has been implemented in Lithuania since 2006.
295. In Moldavia, 16 of the 70 samples (animal species unspecified) tested for rabies were positive.
296. In Slovenia, 35 new outbreaks of rabies were reported in the first semester of 2008. Rabies was diagnosed in 33 foxes, one badger and one unvaccinated dog. Due to the increased number of positive cases (only 3 foxes were positive in 2007), thought to be connected to the deteriorating situation across the border (increased fox population and incidence of rabies), additional measures have been applied.
297. In 2008, Israel reported 3 new outbreaks in the region of Hazafon (involving domestic animals) and an outbreak in the region of Jehuda & Samaria due to a case in a wild animal.
298. This description of the rabies situation shows that there are two main problems facing the effective control of rabies in Europe, namely the persistence of wildlife reservoirs in some countries and the introduction of potentially infected animals in a country previously free from the disease. Efforts are needed to assist other Europe's neighbours in other regions to improve the effectiveness of their rabies control programmes. Active surveillance over the entire territory, the capability to plan and implement vaccination campaigns (oral and parenteral vaccinations) as well as the preparedness of the national Veterinary Services are essential in order to control the spread of the disease.

Varroosis of honey bees

299. Varroosis is a disease of the honey bee (*Apis mellifera*), which is caused by the mite *Varroa destructor*. The mite is an ectoparasite of adults and brood of *Apis mellifera*. Early signs of infection normally go unnoticed, and only when infection is heavy does it become apparent. The infection spreads by direct contact from adult bee to adult bee, and by the movement of infested bees and bee brood. The mite can also act as a vector for viruses of the honey bee.

Figure 4. Varroosis of honey bees in Europe: Number of new reported outbreaks of varroosis of honey bees in Europe 2005-2008



300. The number of new reported outbreaks of varroosis of honey bees has been constantly increasing over the past 3 years and several European countries are affected by it. In Europe, 133 new outbreaks were reported in the first half of 2008 (current year's data still to be completed). As shown in Figure 4, the number of reported outbreaks in Europe almost doubled between 2005 and 2007.

301. Albania has reported 3 new outbreaks of varroosis of honey bees.
302. Bosnia and Herzegovina have reported 30 outbreaks in 2008, involving 103 cases.
303. Bulgaria has reported 1 new outbreak in 2008 involving 1 case and 292 susceptible hives.
304. Croatia reported 10 new outbreaks during the first semester of 2008.
305. The Czech Republic reported 1 new outbreak in 2008, bringing the total number of outbreaks reported in the country to 75; 85 773 hives were involved in this event.
306. Georgia reported 10 new varroosis outbreaks during the first semester of 2008, bringing the total number of ongoing outbreaks to 250.
307. Ireland reported 25 new outbreaks during the first semester of 2008.
308. Italy reported 46 new outbreaks, mainly in the Friuli-Venezia Giulia region; 1 new outbreak was also reported in Sardinia region.
309. Portugal reported 130 cases during the first semester of 2008.
310. Slovenia reported 7 new outbreaks, involving 89 infected hives.

Brucellosis due to Brucella abortus

311. Armenia is implementing an animal health programme with the aim of reducing the prevalence of the disease in both animals and humans. Testing started in February 2008 in 8 regions of the country and approximately 16 000 blood samples were taken from cattle, sheep and goats. A total of 192 samples tested positive. Based on the programme data, the prevalence of the disease in Armenia is estimated to be 1.2% in cattle, 1.5% in sheep and 2.7% in goats.
312. Austria reported a case of subclinical infection in one bovine animal in the region of Karnten in March 2008. No other cases have been reported in 2008.
313. Azerbaijan reported 7 new outbreaks with 1376 cases in cattle during the first semester of 2008. The framework of the national brucellosis programme addresses compensation schemes, animal identification, vaccination campaigns and surveillance plans. Blood samples from 855 343 cattle and 143 837 sheep and goats were serologically tested for brucellosis. Brucellosis was detected in 1558 cattle and 796 sheep/goats. Infected animals were destroyed according to instructions.
314. In the period under study, Italy reported 11 221 cases in bovines in several regions. In 2007, 72 human cases of brucellosis were reported.
315. Former Yugoslav Republic of Macedonia has recently adopted a control/eradication programme for brucellosis in cattle. During the first half of 2008, 438 cattle tested positive with a prevalence of 0.3%.
316. Spain is implementing an eradication programme. During the first half of 2008, a total of 54 326 herds were inspected (42.79% of all herds included in the programme), which involved sampling and testing 1 741 803 animals. The prevalence was found to be 0.10%.

Brucellosis due to Brucella melitensis

317. For European countries, brucellosis due to *B. melitensis* is an important zoonosis, especially in Southern Europe, where there are extensive sheep and goat populations.
318. In Albania, *B. melitensis* infection is mainly concentrated in the southern part of the country, where the prevalence of the infection is up to 10%. The infection was previously reported in cattle in southern Albania but during 2007 it spread northwards to central Albania. The control strategy for the disease is based on randomised testing to detect outbreaks; positive cases are eliminated and compensation is paid in accordance with the regulations in force. During 2007, 1100 cattle were sampled, of which 100 tested positive. In 2008, 6209 cattle have been tested, with 19 positive reactors. Human cases have also been reported.

319. Azerbaijan reported 3 new outbreaks during the first semester 2008, involving 1149 sheep.
320. Bosnia and Herzegovina have reported 334 outbreaks in 2008, involving 4688 cases.
321. Since the beginning of 2008, the National Veterinary Services of Bulgaria have identified 2 new outbreaks of *B. melitensis* in farmers' backyards in the village of Vasil Levski, Stara Zagora region, and the village of Bulgarin, Haskovo region. In all, 3 new outbreaks have been identified.
322. Croatia reported a new outbreak in Zagrebacka region in June 2008, involving a subclinical case in a goat. Subsequently, in July and August, 4 more outbreaks were reported in Karlovacka, Zagrebacka and Splitsko-Dalmatinska regions, involving sheep, goats and cattle.
323. In Cyprus, the Veterinary Services are applying a programme for the surveillance and eradication of *B. melitensis* in cattle, goats and sheep. The surveillance programme is applied in herds and flocks that are not infected, whereas the eradication programme is applied in infected herds and flocks.
324. In the period under study, Italy reported 16 858 cases in sheep and goats in several regions.
325. Former Yugoslav Republic of Macedonia has recently adopted a control/eradication programme for brucellosis in sheep and goats. During the first semester of 2008, 740 sheep tested positive (a prevalence of 2.9%) and 9599 goats tested positive (a prevalence of 3.8%).
326. An eradication programme is being implemented in Spain. During the first semester of 2008, a total of 34 639 flocks were inspected (29.8% of all flocks included in the programme), which involved sampling and testing 5 357 781 sheep and goats. The prevalence was found to be 0.18%.
327. In 2008, Israel has reported 13 new outbreaks.

African swine fever (ASF)

328. African swine fever is endemic in several countries in central and southern Africa. No European countries had reported the disease in recent years, with the exception of Italy which has recurrent infections (7 new outbreaks in 2008) in both wild boar and domestic pigs in the island of Sardinia. However, the situation changed in 2007. In Georgia, clinical signs were observed in pigs in April 2007. Due to an initial misdiagnosis, the disease was not confirmed as ASF until June 2007. This was the first occurrence of ASF in Georgia and it resulted in 61 ASF outbreaks being notified to the OIE (most of them have now been resolved). It appears that the virus was introduced via contaminated products of animal origin arriving in the port of Poti on the Black Sea.
329. In August 2007, Armenia reported mass death of pigs in localities in Lorin and Tavush near the border with Georgia. Russian specialists were invited to visit the country to determine the cause of death. By the end of August, the All-Russian Research Institute for Animal Health established a diagnosis of ASF. Emergency assistance for the control of African swine fever was implemented in Armenia in February 2008. No cases of the disease have been reported in 2008.
330. The first cases in Azerbaijan were reported on 17-18 January 2008 in pigs in Nidzh in Qabala. On 22 January 2008, the State Veterinary Service received the first report of mass death of pigs and a team of specialists was dispatched to the area immediately. The disease was first identified in six backyard premises in different localities. Since the premises were quite a long way apart, the disease may have been introduced via infected meat from neighbouring countries. On 23 January 2008, restrictive measures were introduced and by 26 January 2008, all the dead and sick animals suspected of ASF (193 animals) during that period were destroyed and buried. On 28 January 2008, quarantine was introduced and the stamping out procedure began. A total of 4832 animals were destroyed. The last animal was destroyed on 15 February 2008. On completion of the stamping out procedure, all wooden fences and equipment were burned. Then a repeat disinfection of the whole area was conducted. A final disinfection was performed before quarantine was lifted on 28 March 2008. At the current time, the animal health situation with respect to ASF in Azerbaijan is stable. Serological monitoring and epidemiological observation are conducted monthly.

331. Russia reported the reoccurrence of ASF in November 2007, in wild boar along the Argoun and Shatoy-Argoun rivers, in Chechenskaya Respublika. This was the first occurrence of the disease in Russia since 1977. The origin of the introduction of the disease in Russia was attributed to transboundary migration of wild boar from the Chechen Republic and Georgia to the territory of North Ossetia. The wild and domestic swine populations regularly come into contact with each other and crossbreeding between swine and wild boar has been observed. New outbreaks were reported for the first time in domestic pigs in Russia, on 28 June 2008, in Respublika Severnaya Osetiya region. These outbreaks are still active. Feeding with food waste that may have come from Transcaucasia/North Caucasus has also been identified as a possible source of infection. On 10 July 2008, another outbreak was reported, in Orenburgskaya Oblast region (bordering the North of Kazakhstan). This outbreak is located approximately 2500 km north-east of the previous outbreaks.
332. This year, with the first ASF outbreaks in domestic pigs in Russia, the disease is continuing to spread in Eastern Europe. There is a continued risk of ASF becoming endemic in this region. Under these circumstances it is important for early warning systems and sero-surveillance to be put in place in affected countries and neighbouring countries to monitor any changes in the epidemiology of the disease.

Crimean Congo haemorrhagic fever (CCHF)

333. CCHF is a viral haemorrhagic fever of the Nairovirus group. It is a tick-borne zoonosis which often is subclinical in animals but, according to the World Health Organization, in humans the mortality rate is approximately 30%, with death occurring in the second week of illness.
334. No countries in the world reported the presence of the disease in animals in 2007. Kazakhstan and Russia were the only countries that reported suspicion of CCHF. However, in the same year, Bulgaria reported 2 human cases (one of which was fatal) and Turkey reported 717 human cases (33 of which were fatal); this data was submitted through the WAHIS annual report.
335. According to unofficial sources, the Greek health authorities have placed hospitals in north-eastern Greece on alert after a woman died of a form of insect-carried fever. The Health Ministry statement says that tests showed that the Greek woman was infected with CCHF after being bitten by a tick while working in the fields. She died on 25 June 2008 in a hospital in Alexandroupoli, say hospital officials. No confirmation of this case has yet appeared on the WHO Web site.
336. Unofficial sources have mentioned the occurrence of 61 new human cases in Russia and 688 new human cases in Turkey. Already in 2006, the WHO was reporting an increase in disease activity in Turkey. The OIE contacted both the Greek and Turkish authorities to enquire about the animal health situation. Both countries informed the OIE that as soon as the surveillance data in animals is available they will inform the OIE.
337. CCHF is an OIE-listed disease which requires notification to the OIE according to the requirements on notification of diseases presented in Chapter 1.1.2. of the OIE Terrestrial Animal Health Code. The relevance of this disease is not related to the consequences of a spread in the animal population, but to the risk posed by its zoonotic potential. Better monitoring of CCHF in animals is an essential step to avoid human fatalities, and this falls within the dual mandate of the Veterinary Services to safeguard both animal health and public health.

Viral haemorrhagic septicaemia (VHS)

338. Viral haemorrhagic septicaemia is a disease of farmed rainbow trout, farmed turbot, farmed Japanese flounder as well as several wild marine species, and is caused by the VHS virus (also known as Egved virus). The disease has been reported in Europe, the Middle East, North America and Japan.
339. Austria reported an outbreak in the region of Steiermark in April 2008 and two other separate outbreaks in June 2008 in the regions of Oberosterreich and Tirol.

340. In Belgium, whereas the 2007 VHS outbreaks were resolved, 3 new outbreaks appeared in the regions of Liege and Hainault.
341. Bulgaria reported that the outbreak that occurred on 8 October 2007 in the Smoljan region was resolved on 30 June 2008.
342. The Czech Republic has reported 2 new outbreaks in 2008.
343. Since 1970, Denmark has conducted an official surveillance and eradication programme for VHS, enabling the disease to be eradicated in most of the country's freshwater fish farms. However, in the report period for 2008, 5 outbreaks of VHS were recorded outside the VHS-free zone.
344. In Finland, the epidemic of VHS that started in some areas of the country in 2000 continued in Åland Islands. In the first half of 2008, samples from two fish farms in Åland Islands tested positive. VHS has not been found in other two restriction zones, since spring 2001 (Pyhtää) and spring 2003 (Uusikaupunki-Pyhäranta-Rauma), respectively. The restriction measures in the latter coastal area (Uusikaupunki-Pyhäranta-Rauma) are being maintained, however. The other coastal restriction area (Pyhtää) achieved VHS freedom in June 2008.
345. France reported a new outbreak in the Pas-de-Calais department in March 2008, which was resolved within the same month.
346. In Germany, 20 new outbreaks of VHS were reported during the first semester of 2008.
347. Italy reported 15 new outbreaks, mainly in the Friuli-Venezia Giulia region; 1 outbreak was also reported in the Piemonte region.
348. The first case of VHS in Norway since 1974 was confirmed in farmed rainbow trout in November 2007. It occurred in a fjord system in the county of Sogn and Fjordane. Since then, 3 further new outbreaks in the same region (More Og Romsdal) have been reported in 2008. Tracing forward, tracing back and eradication have been ongoing this year.
349. Slovakia reported an outbreak in the region of Zilina during the first semester of 2008.
350. In Slovenia, where VHS infection had not been reported since 1996, the disease was clinically diagnosed in a small fish farm in Primorska region in April 2008. The presence of the virus was subsequently confirmed in the laboratory. The affected fish farm rears fish only for human consumption. The farm has been placed under official control and the farmer is only allowed to sell dead fish on ice.
351. In Switzerland, 4 new outbreaks were reported between March and May 2008, in four different regions. All the outbreaks have now been resolved.
352. In 2006 the United Kingdom reported an outbreak in North Yorkshire which involved rainbow trout. This outbreak is still unresolved.

Contingency plans and simulation exercises for animal diseases

353. Albania reported that a new regulation on avian influenza is being prepared and that a contingency plan for HPAI in line with the latest EU directive will be also developed. The new regulation on CSF has been approved and is now in force and a contingency plan for the disease is currently being developed.
354. In Armenia, as part of the Avian Influenza Preparedness Project, the World Bank organised a simulation exercise in Tegum, Tavush region, on 5 and 6 June 2008.
355. In 2008, Austria has updated its contingency plans for bluetongue. New contingency plans are being prepared for the following diseases: vesicular stomatitis, viral haemorrhagic septicaemia and infectious haematopoietic necrosis.

356. The State Veterinary office of Bosnia and Herzegovina is working on an update of the contingency plan for HPAI. Once the plan has been drafted, it will be tested by means of a simulation exercise. After the plan has been reviewed, it will serve as a model to prepare other contingency plans for former OIE List A diseases.
357. Bulgaria has contingency plans for CSF, foot and mouth disease (FMD), avian influenza and Newcastle disease, which have been approved by the European Commission. In addition to these, Bulgaria has national contingency plans for sheep and goat pox, transmissible spongiform encephalopathies, bluetongue and VHS.
358. The Veterinary Services in Cyprus have prepared contingency plans for FMD, CSF, Newcastle disease and avian influenza. All of them have been approved by the European Commission. The Veterinary Services have also prepared contingency plans for scrapie, bovine spongiform encephalopathy and bluetongue.
359. In the Czech Republic contingency plans and manuals for the following diseases have been updated: FMD, CSF, HPAI, Newcastle disease, bluetongue, transmissible spongiform encephalopathies and trichinellosis. In April 2008, an HPAI simulation exercise was carried out; in June 2008, simulation exercises were conducted for FMD, CSF and HPAI.
360. In addition to the bluetongue simulation exercise mentioned in the table below, the Danish authorities conducted a national CSF exercise and therefore initiated the exercise a day earlier, on 13 May. During the exercise, both the contingency plans for bluetongue and CSF as well as the overall plan for strategy and resources were tested. Denmark has also drawn up contingency plans for several other important animal diseases, including FMD, ASF, Newcastle disease, avian influenza, infectious salmon anaemia and other exotic diseases.
361. Estonia has prepared a horizontal contingency plan which includes legal provisions, compensation for losses arising from epidemics, principles and the chain of command for cooperation between different institutions, establishment of commissions and expert groups essential for disease control, plus all rights and obligations, and the list of staff and required facilities, extraordinary vaccination, study programmes and measures to increase awareness of the different diseases. This plan is supported by disease control guidelines for the following diseases: African horse sickness, sheep and goat pox, bluetongue, avian influenza, Newcastle disease, lumpy skin disease, AFS, CSF, swine vesicular disease, FMD, rinderpest, vesicular stomatitis, peste des petits ruminants and transmissible spongiform encephalopathies.
362. Finland has a contingency plan for bluetongue. The manual of operations drawn up for veterinarians has been updated with new instructions concerning disease control and vector monitoring.
363. In Iceland, contingency plans already exist for all the major exotic diseases, but recent work has mostly focused on contingency plans for HPAI. Good cooperation exists among Nordic countries for the development and implementation of contingency plans, notably for HPAI and FMD, and more recently also for bluetongue. Officials from Iceland played an active part in a Nordic – Baltic Simulation Exercise for bluetongue.
364. The general part of the contingency plan elaborated by Latvia includes the following chapters: legal justification; financial justification; national and territorial disease control centre; communication between the persons and institutions involved; expert team; resources; order of quarantine; vaccination; destruction of dead/killed animals; laboratory diagnostics; training; communication to the public; killing of animals. The specific parts of the contingency plan include instructions on the following: contingency plan for FMD; contingency plan for CSF; manual of CSF diagnosis; contingency plan for avian influenza; contingency plan for Newcastle disease; contingency plan for bluetongue; contingency plan for African horse sickness; contingency plan for swine vesicular disease; contingency plan for transmissible spongiform encephalopathies; instruction on disinfection; instruction on notification of highly dangerous infectious diseases.
365. Lithuania's State Food and Veterinary Service has prepared contingency plans in coordination with the European Commission. Contingency plans address the following diseases: FMD, CSF, ASF, swine vesicular disease, Newcastle disease, rinderpest, peste des petit ruminants, vesicular stomatitis, bluetongue, African horse sickness, chronic wasting disease, avian influenza, sheep and goat pox, lumpy skin disease, Rift Valley fever, and bovine spongiform encephalopathy. These plans include provisions for legal responsibilities, budgetary resources, chain of command, appropriate human and technical resources, emergency vaccination and staff training.

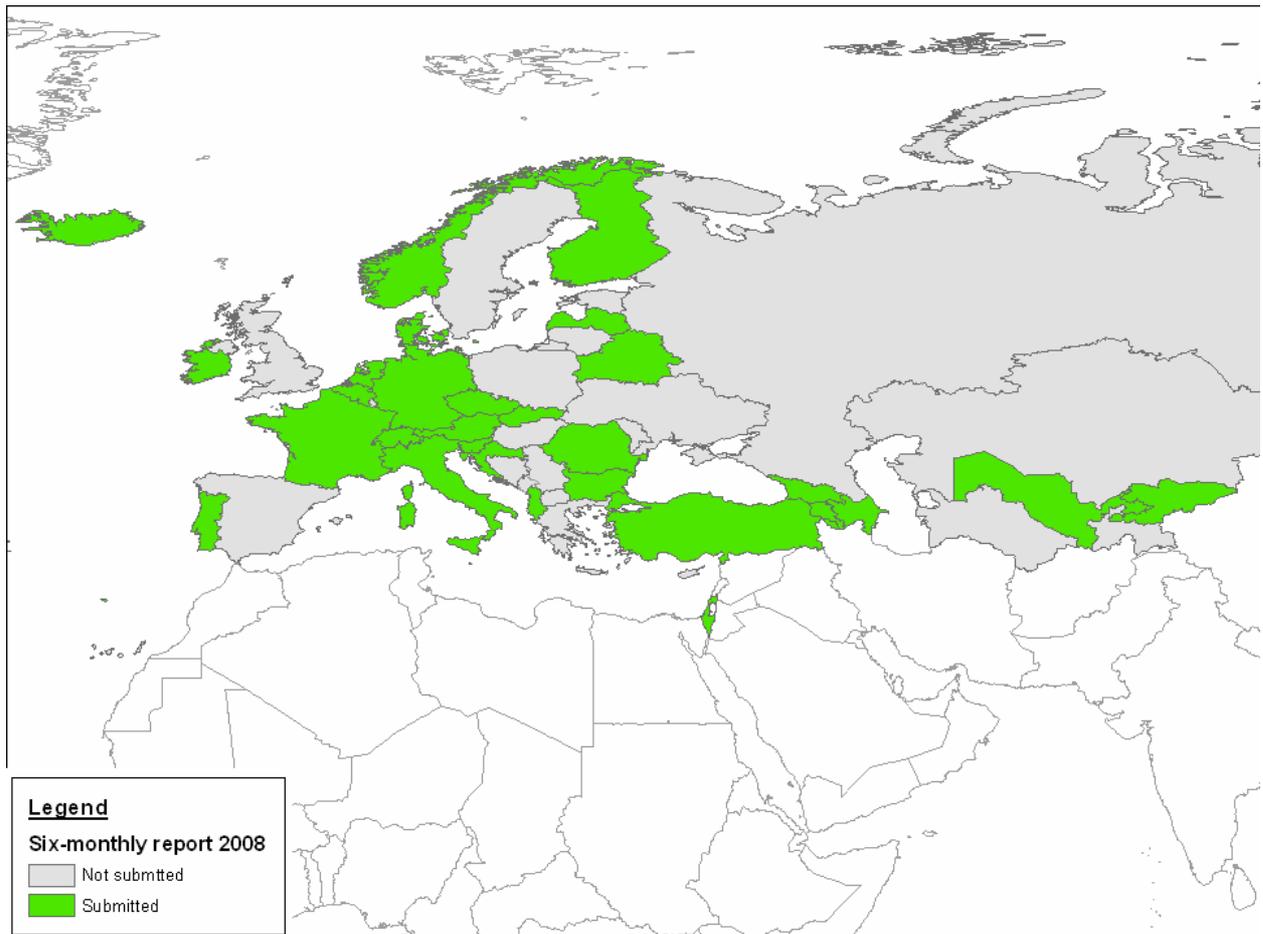
366. Under the terms of new legislation in Former Yugoslav Republic of Macedonia, contingency plans need to be prepared for the former OIE List A diseases. Currently, besides the general contingency plan, the following specific contingency plans have been prepared: avian influenza, bluetongue and FMD.
367. Moldavia has developed contingency plans for FMD, Newcastle disease, and CSF. These contingency plans include disease eradication measures, establishment of the command chain and disease control centres, establishment of financial provisions in the event of an outbreak; measures to be applied in the protection and surveillance zone, and establishment of a vaccination plan.
368. The Norwegian Food Safety Authority places a high priority on contingency planning and bio-preparedness. A contingency coordination group, consisting of both regional and head office representatives, meets bimonthly to discuss new plans and recent experiences. All contingency documentation for animal, plant, feed and food contingencies has been entered into a common shared database and a common contingency log is in use. An evaluation team has been set up to routinely evaluate handling of ongoing contingencies.
369. The Netherlands has contingency plans for: avian influenza, bovine spongiform encephalopathy, brucellosis, CSF, leukosis, FMD, Newcastle disease, scrapie, swine vesicular disease and bovine tuberculosis, as well as for aquatic animal diseases.
370. Portugal has regularly updated contingency plans for avian influenza, Newcastle disease, bluetongue, FMD, swine vesicular disease, CSF and ASF.
371. After updating the contingency plan for FMD, Romania notified that a simulation exercise for the disease is planned for April 2009. Romania has also prepared contingency plans for CSF, avian influenza, Newcastle disease and bluetongue. These plans have been approved by the European Commission and will be regularly updated.
372. Slovenia's Veterinary Administration has updated the country's contingency plan for avian influenza.
373. Spain has a number of contingency plans, including a general plan that lays down a protocol for dealing with any health alert in the country. In addition to the general protocol, there are practical manuals on how to deal with a suspicion or occurrence of specific diseases. Some of these manuals were updated during the first semester of 2008, including those on FMD, swine vesicular disease, CSF, ASF, avian influenza and bluetongue. In addition, the Official Veterinary Services of the Autonomous Communities have developed their own alert manuals based on these plans, which they have adapted to the distinctive characteristics of their region and their administrative organisation.
374. A series of virtual simulation exercises were conducted via a web-based system, simulating health alerts in various regions of Spain. These exercises were performed to simulate suspected outbreaks of bluetongue, avian influenza, CSF, West Nile fever and FMD.
375. During the first semester of 2008, five regional simulation exercises were organised in Switzerland. The focus was on potential outbreaks of avian influenza in commercial poultry holdings. Confinement, culling/destruction and cleaning/disinfection procedures were practised in accordance with the contingency plan.
376. For several years, Switzerland has had an Internet-based contingency planning system for highly contagious diseases and technical amendments are regularly made. All official veterinarians have access to this information and undergo regular training. The system includes national and regional requirements and can be used interactively. Contingency planning is divided into diseases that are absent from the national territory (exotic diseases) and specifications of control programmes for diseases that are present. Sections of the contingency planning system have recently been updated.
377. The table below lists simulation exercises conducted in Europe between 2006 and 2008 in Europe details of which were distributed via the OIE mailing list. Apart from the Nordic-Baltic Veterinary Contingency Group, which performed a joint simulation exercise on bluetongue, all the other simulation exercises related to FMD, CSF or avian influenza.

| European countries that informed the OIE of their simulation exercises undertaken between 2006 and 2008, details of which were disseminated by the OIE | | |
|---|-----------------|---------------|
| OIE Member | Disease | Date |
| Spain | FMD | June 2008 |
| Denmark, Estonia, Finland, Iceland, Latvia, Lithuania, Norway and Sweden | Bluetongue | May 2008 |
| Denmark | CSF | May 2008 |
| Luxembourg | FMD | March 2008 |
| Albania | HPAI | January 2008 |
| Slovenia | CSF | December 2007 |
| Latvia | CSF | November 2007 |
| Turkey | Avian influenza | October 2007 |
| Albania | Avian influenza | December 2006 |
| Lithuania | CSF | December 2006 |
| Cyprus | Avian influenza | October 2006 |
| Italy | Avian influenza | July 2006 |
| Slovenia | FMD | June 2006 |
| Poland | CSF | June 2006 |

Transparency of the animal health situation in the Region

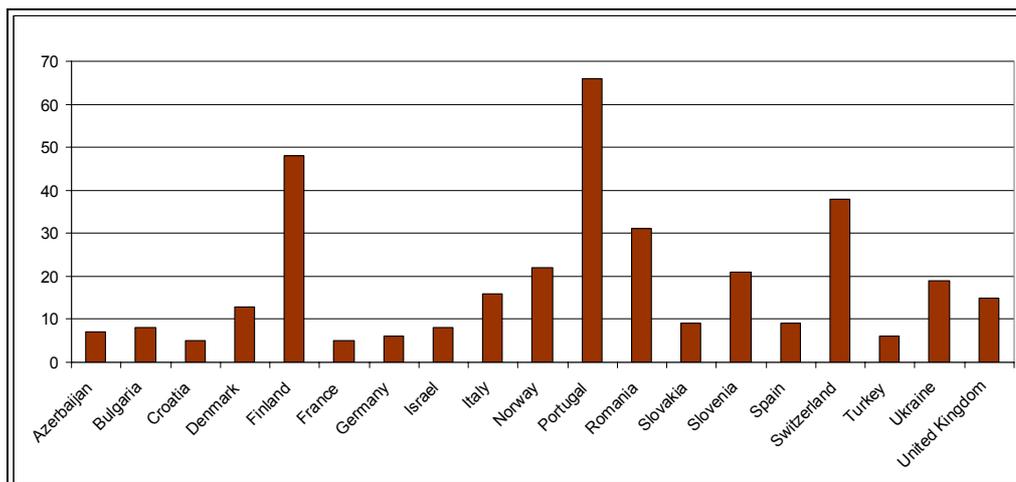
378. One of the main missions of the OIE is to provide information on the global animal health situation. In order to fulfil its mandate in this respect, the OIE manages WAHIS, based on the commitment of OIE Members to notify the OIE of the main animal diseases, including zoonoses. By adopting Chapter 1.1.2. of the Terrestrial Animal Health Code and Chapter 1.2.1. of the Aquatic Animal Health Code, OIE Members recognised their obligation to notify the OIE of their animal health situation in a timely manner.
379. OIE Members are required to provide the OIE with immediate notifications, six-monthly reports and annual reports documenting the evolution of their sanitary status. The map and the chart below summarise the submission of data by OIE Members relating to the first six-monthly report for 2008 (Figure 5) and with regard to the timeliness of their submission of immediate notifications in 2008 (Figure 6).

Figure 5. Submission of January – June 2008 Reports: Countries of the OIE Regional Commission for Europe that submitted a six-monthly report for January-June 2008 to the OIE (updated on 10 September 2008)



380. Figure 6 indicates the timeliness of submission of immediate notifications by Members of the Regional Commission. It shows the average number of days between the start of an event and the date that the report is actually submitted to OIE (and therefore becomes available to other Members). It should be noted that this period includes the necessary time for detection, the start of the investigation and any time needed to obtain laboratory results related to the event. Only the immediate notifications submitted in 2008 have been taken into consideration in compiling the chart.

Figure 6. Average time (in days) between the beginning of the event and the first notification to the OIE. Period covered: 1 January to 18 August 2008.



Discussions

381. The Session Chairman congratulated Dr Francesco Berlingieri on his clear and informative presentation and invited comments from the floor.
382. The Delegate of France considered the use of maps in the presentation interesting but she noted that they could be improved for example by displaying a different status for countries, like France, that only reported 2 outbreaks of rabies from imported animals illegally in a different manner so to allow for differentiation from countries that reported endemic situation. She also suggested that maps that report “confirmed clinical diseases limited to some zones” would allow to specify for sub-clinical disease as well; this would reflect the real situation of the disease.
383. The Delegate of Belgium clarified that the rabies outbreak that occurred in 2007 in its country had been resolved in April 2008 and that no new cases were reported since. He also reiterated that the French rabies case (identified in the Var region), related to the dog which transited through Belgium, did not provide any consequences in the Belgian territory.
384. The Delegation of the Czech Republic clarified that vaccination against BTV-8 was going on in the country.
385. The Delegate of Finland clarified that the human case of rabies reported in 2007 was related to a person that contracted the infection in Asia. She stated that this clarification was important since the value of an indigenous case had not the same value as a case imported from abroad.
386. The Delegate of Portugal sought clarifications on the method used to calculate the chart on the timeliness of notification.
387. The Delegate from the Former Yugoslav Republic of Macedonia clarified that no outbreaks of rabies have been recorded in the country since the year 2000.
388. The Delegate of Ireland recognised that the use of maps can be a good and quick reference to display the animal health situation in a region. However he pointed out that sometimes it could be misleading when picturing an entire country as infected even if only a minor part of it is affected. He gave the example of presence of BTV-8 in England which comported the entire United Kingdom to be marked as positive thus giving the wrong impression that the disease is also present in Northern Ireland.
389. The Delegate of Russia, referring to the chart on the timeliness of notification by OIE Members, pointed out that several factors were involved in the delay between the start of an outbreak and the moment this event was notified to the OIE, e.g. time for shipping the samples to the diagnostic laboratories, time for performing the necessary testing. He stated therefore that such factors might not always be under the control of the Veterinary Services.
390. The Delegate of Greece stated that no human cases of rabies were reported in the country in 2007. He asked to correct this information.

391. Dr Berlingieri acknowledged that the use of maps, although being very useful tools, have some limits related to the choice of the kind of information that is intended to be transmitted and sometimes certain aspects might not be fully reflected. Re the chart on the timeliness of notification he clarified that the time displayed encompassed the necessary time for detection, the start of the investigation and any time needed to obtain laboratory results related to the event; regarding the Immediate notifications used for calculating the Portuguese value, he indicated that the those related to scrapie notifications which were received by the OIE long time after the beginning of the event. He took note of requested changes in the animal health status of the region.

Update on the activities of the OIE Terrestrial Animal Health Standards Commission

392. The Session Chairman, Dr Lukauskas, invited Dr Alex Thiermann, President of the OIE Terrestrial Animal Health Code Commission, to present an Update on the activities of the OIE Terrestrial Animal Health Standards Commission
393. Dr. Thiermann presented an update on the current work programme of the Terrestrial Animal Health Code Commission. He thanked the Members of the European region, and in particular the European Commission for their continuous contribution of comments and suggestions for the improvement of the OIE standards. He also reminded Members of the critical importance of providing comments to the OIE within the established deadlines, in order for the Code Commission to be able to consider and incorporate Member's comments in their reports.
394. The next meeting of the Code Commission will take place during the first two weeks in October 2008. So far the OIE has received many Members' comments, which are being integrated into the draft texts for consideration by the Code Commission. While the agenda of the next Code Commission will include 42 different subjects for discussion, Dr. Thiermann limited his intervention to discussions on the most salient topics for the region. Among the disease chapter he talked about: salmonella, bluetongue, rabies, foot and mouth disease, avian influenza, newcastle disease, BSE, bovine tuberculosis, scrapie, classical swine fever and swine vesicular disease.
395. He also talked about important work on horizontal subject, such as the evaluation of veterinary services, the recent work of the Ad Hoc Groups on communication, one on wildlife and one on trade in animal products. He also reported on progress being made on a document describing the OIE mediation process. The Code Commission is also providing a revised and consolidated chapter on semen and embryos, combining the recommendations on all species into one chapter.
396. Dr Thiermann also provided an update on progress in the area of guidelines for the control of hazards in feed and on surveillance on arthropod vectors. On animal welfare he highlighted the work on animal production systems and on stray dog population control.

European Union Animal Health Strategy: Integration of OIE Standards and expected outcomes

397. The Session Chairman, Dr Lukauskas, invited Dr Bernard Van Goethem, Director, Animal Health and Welfare Zootechnics Health and Consumer Protection of the European Commission (DG SANCO), to present details of the European Union Animal Health Strategy
398. Dr Van Goethem started his presentation by mentioning that whereas the EU managed to tackle major animal health problems, new challenges have arisen, or will arise in the future: new diseases emerge, old diseases re-emerge, the climate is changing, facilitating the expansion of vector borne diseases. In order to better assess and manage all these elements at the global EU level, the EC adopted a new EU's animal health strategy for the years 2007-2013, and after a coordination work by DG SANCO involving all the stakeholders, from the breeders and veterinarians associations to the Member States CVOs, adopted an Action Plan for the implementation of this strategy.
399. He explained that the common underlying principle of the strategy is partnership and communication. Communication material shall be developed, such as websites, checklists, manuals and a forum for Q&A, and material for the "Veterinary Week". This first big communication action, from 10 to 14 November, is organized with numerous partners, from the Commission and the Member States to the European veterinary association and the breeders associations, as well as the OIE director General. The communication will be focused on biosecurity at farm level, and at the borders. Important events will be organized in different parts of the EU during the week, such as press events, training seminars, stands in agricultural fairs, in airports, ports or border crossings and a video to be shown on flights, in airports and on TV. The Action Plan itself contains the key actions and their indicative timetable. (More information can be found at the website: http://ec.europa.eu/food/animal/diseases/strategy/pillars/action_en.htm)
400. He explained that these actions are structured around four pillars, as follows:
- ◆ The first pillar is the "Prioritisation of EU intervention". The Commission will develop profiling and categorisation of animal disease risks by 2010 which will provide the basis to prioritise actions in order to ensure that interventions and resources can be focused on diseases of high relevance. In order to get the broadest picture possible, the EC asked the OIE to realise a study at global level. This study, of which the terms of reference are being drafted, should give its results in the second semester of 2009.
 - ◆ The second pillar "EU Animal Health framework" provides for a proposal for an EU Animal Health Law by 2010 to replace the current series of policy areas with a single regulatory framework. This framework would be inspired by the international standards developed by the OIE. In the same time, the EU strategy is to promote its legislative work in order that some of its ideas, principles and methods are taken on board the OIE standard setting framework. This means an enhanced collaborative work and closer contacts, including possible membership of the EU to the OIE. A legislative proposal concerning a harmonised EU framework for responsibility and cost-sharing in detecting and eradicating diseases is planned by 2011. This work will of course gain from previous and current collaboration with the OIE.
 - ◆ In terms of "Prevention, surveillance and preparedness", the third pillar, the Action Plan focuses on an overall reinforcement of biosecurity measures. It explores the scope to make the fullest use possible of Community funds when addressing actions which will have a positive impact on animal health. As for disease surveillance, it will be stepped up and traceability will be strengthened by 2011. A legislative proposal for better border biosecurity will be adopted by 2010. All these actions will follow the principles promoted by the OIE standards and recommendations.

- ◆ Finally, the fourth pillar "Science, innovation and research" will provide for enhanced cooperation between key players such as the European Food Safety Authority (EFSA), European Medicines Agency (EMA) and Joint Research Centre (JRC). The best would be taken of EU highly performing scientific community if it's working as a network. The Community Reference Laboratories, of which a majority are OIE Reference Laboratories of Collaborating Centres, will also be a key element of this policy.

401. He concluded mentioning that, the Commission has laid the basis for a robust, dynamic and effective animal health policy, capable of rising to any challenge that presents itself over the next 6 years. The success of the new strategy relies on cross-sector support and cooperation at all levels, and the EU counts on the OIE to be a major partner in this great process

Activities of the OIE Animal Welfare Working Group

402. The Session Chairman, Dr Lukauskas, invited Dr Andrea Gavinelli, Acting Head of Unit of the Directorate General for Health and Consumers of the European Commission, to present details of the Activities of the OIE Animal Welfare Working Group on behalf of his chairman Dr David Bayvel.
403. Dr Gavinelli started his presentation commenting on the multi faceted issues of animal welfare which includes different expertises and scientific inputs from different disciplines
404. He stressed how animal health and animal welfare are strongly linked.
405. He also informed on the mission and strategy of the working group which aims to assist the Terrestrial Code Commission on providing international leadership on animal welfare through the development of science based standards and guideline, the provision of expert advice and the promotion of relevant education and research.
406. He commented the programme activities and priorities of the group, including decision on aquatic animal welfare, technical series publication, educational activities, definition on animal welfare, stray dog control and laboratory animal welfare.
407. He highlighted the relationship with the international stakeholders such EFSA, VICH, ICLAS and IATA as well as OIE animal welfare collaborating centers.
408. Dr Gavinelli also commented on the resolution adopted during the last General Session which refers to the Member countries engagement, the role of regional commissions and the commitment of the Working Group and the OIE Central Bureau on communication and consultation activities.
409. He also referred to future challenges among which he remarked the realistic expectations versus available resources, the necessary broad bases support, the importance of the OIE Animal Health and Welfare Fund as well as strategic resources provisions and the maintenance of the progress made so far stressing the key point of the engagement of Member Countries.
410. Finally, he gave information on the organisation of the OIE Global Conference on Animal Welfare which will be held in October in Cairo, and he highlighted the high quality of the current chairman of the Working Group .

Animal Welfare: European Union perspectives and expectations

411. The Session Chairman, Dr Lukauskas, invited Dr Andrea Gavinelli, Acting Head of Unit of the Directorate General for Health and Consumers of the European Commission, to provide information on EU perspectives and expectations regarding animal welfare
412. Dr Gavinelli started his presentation by remarking that the results of several sociological investigations and market analysis carried out in the European Union since 2005 confirm that the farming of animals is no longer viewed by European consumers simply as a mean of food production. Instead it is seen as fundamental to other key social goals such as food safety and quality, safeguarding environmental protection, sustainability, and enhancing the quality of life while ensuring that animals are properly treated.

413. He pointed out that consumers have increasing concerns about the quality of the welfare of farmed animals. EU citizens are today more and more anxious to secure the protection of wildlife and to control the way that products derived from wild animals are obtained (e.g. seals furs). They would like to see a reduction in the number of the animals used in experiments or the replacement of these experiments with alternative methods and even a ban on the marketing of specific products not acceptable for their cultural and ethical background, e.g. furs obtained from cats and dogs. These different concerns frequently become very urgent demands for action to the European Institutions and to Member States` governments to intervene with specific policies.
414. Dr Gavinelli explained that in the EU the development of EU animal welfare policies is founded upon long-standing legislation based on clear scientific principles, public concerns, stakeholder input and socio-economic implications.
415. He commented on the new developments in farming animals that are under scientific assessment thanks to European-wide research projects that introduce innovative thinking, e.g. the "Welfare Quality", "Cloning in Public" or "Quality Low Input Food" projects. All these scientific works are looking at the health and welfare of animals from different angles in order to assess the best available options to ensure the competitiveness of European agriculture.
416. Scientific advice provided by the European Food Safety Authority and innovative research under the 6th and 7th research framework programmes of the Commission ensure that the formulation of policies on animal welfare is transparent and based on solid science.
417. Dr Gavinelli gave an account of the present policy agenda, informing conference participants that:
- ◆ The first Community Action Plan on the Protection and Welfare of Animals adopted in 2006 is built upon these concerns as well as the increasing globalisation of animal production and trade.
 - ◆ In addition, the Community Action Plan foresees specific initiatives in the areas of the protection of animals used in experiments and the protection of circus and zoo animals.
 - ◆ The Action Plan defines the direction of Community policies and related activities for the coming years in order to continue to promote high animal welfare standards in the EU and at international level. Animal welfare can be considered as a concrete business opportunity for international markets while respecting the global ethical and cultural dimensions of the issue.
418. He concluded by commenting that the OIE work on animal welfare, with its global impact, represents an excellent opportunity for the EU to contribute to the establishment of minimum global standards and to contribute to the raising of awareness of the importance of animal welfare globally.

Discussions

419. The Delegate of Italy referred to the Animal Health strategy of the EU and asked whether the impact of both Animal Health and Animal Welfare strategies on the final goal to put enough food on the table for the whole world population has been considered. He wondered how to link such strategies to the production of food, mainly in other regions outside Europe such Asia and part of America.
420. The Delegate of Cyprus raised the issue of non indigenous animals, such as deers, lamas and koalas, which are moved between different countries and to hard environments for which they are not adapted, and whether the OIE intends to address this matter.
421. The Delegate of Ireland mentioned that animal welfare sometimes comes after commercial interests, which are not always science based. He also questioned how religious slaughter practices can fit with science based animal welfare principles.
422. Dr Gavinelli mentioned that the integration of Animal Welfare with the EU Animal Health strategy is very important. As stated by the OIE this relationship between animal welfare and animal health is a good starting point. There is also a challenge to combine these aspects and food production matters. He recalled that marketing strategy is not the purpose of the European Commission in reference to animal welfare, but concentrate of implementation of regulation and improvement of life of animals. Dr Gavinelli commented on the necessity to be transparent to the consumer, and therefore adopt clear position towards industry so that the market be establish in a sustainable manner.

423. Dr Vallat reminded the reasons for which the OIE started to adopt international standards on animal welfare, considering that it is important to have a global body leading this issue as well as to have the Veterinary Services involved in the implementation of animal welfare policies.
424. He stated that animal health is a key component of animal welfare. OIE Member Countries are pleased that the OIE develop and lead such a concept, including currently also developing countries which were at the beginning doubtful to accept it.
425. Dr Vallat stressed that OIE standards on animal welfare are based on science and understood by everybody.
426. Regarding religious slaughter issues the Director General commented that representatives from different sectors are invited to participate in relevant Ad Hoc Groups in order to reach consensus on common general standards which have been accepted by different religions that will be presented for adoption. Nevertheless he noted that extremist positions are not taken into consideration in the field of Animal Welfare. Standards on slaughter of animals for consumption have been adopted after consultation of different religions.
427. He stressed that negotiations at global level aimed to have a common position from main bodies is a critical point.
428. In relation to the adaptation of non indigenous animal species into inappropriate environment Dr Vallat commented that the Convention of Biodiversity is requesting for building standards on this matter. He remarked that for the moment the OIE has no specific resources for this issue, but if Member Countries request the OIE to be involved it could be considered. Some countries have already asked the OIE to develop standards for culling of non appropriate animal species to different environments or for harvesting wildlife.
429. Dr Vallat also referred to the link between animal welfare and trade by stating that the OIE is working to ensure compliance between trade and animal welfare by having started standards of animal welfare in conditions of transports of live animals. The OIE considers trade as an important source of wealth.
430. The Director General referred to some studies that link some environmental risks related to animal production and he strongly remarked that the OIE does not support some recent studies and considers that the vegetarian model can not work at global level to feed all humans.
431. Finally Dr Vallat also expressed that the OIE does not support the study of FAO in relation to environment and animal production, indicating that further research, work and discussions are necessary which should take into consideration different characteristics and particularities of different regions.

Presentation by International and Regional Organisations

Federation of Veterinarians of Europe (FVE)

432. Jan Vaarten, Director of the Federation of Veterinarians of Europe, explained the goals and objectives of the Federation: representing the veterinary profession in order to promote veterinary medicine and to support veterinarians in delivering their tasks and responsibilities towards our societies.
433. He pointed out that veterinarians should be positioned in the middle of the triangle formed by the interests of the animals, their owners and keepers and the society at large. Such a position cannot just be claimed, it has to be justified by the work veterinarians do. Although being well educated and responsible veterinarians is essential to achieve these goals, it will not be sufficient. Veterinarians also have to communicate about what they do, and about how and under which conditions this can be done. To be sure that the profession does get the support of politicians, stakeholders and the general public one needs to be visible and clear about its positions.

434. He concluded informing that the FVE is very pleased to have the opportunity to work together with the European Commission, DG SANCO on a joint communication project called the “EU Veterinary Week” The slogan for this event is “Where prevention is better than cure”. It focuses on biosecurity, both on farms and at the borders. Several communications tools, like a web site, leaflets, posters, etc. are developed. During the Veterinary Week there will be large international events, which will be followed by other events at national level. Every one is cordially invited to participate in the project to make it a success. The Director General of the OIE will attend some events of this Veterinary week.

FAO–OIE Collaboration in Animal Disease Control over the last 2 years

435. Dr Joseph Domenech, Chief Veterinary officer of the FAO, spoke on FAO OIE collaboration which has substantially increased with the worldwide HPAI crises, institutionally and operationally framed respectively by the FAO-OIE general agreement and the GF-TADs initiative, both signed in May 2004. Since then, major recent achievements in reinforcing this collaboration even further have been the establishment of the GF-TADs governance entities at the global level (global Steering Committee, Management Committee and Global Secretariat) as well as the elaboration of the Chart - and companion Vade Mecum - on FAO and OIE competencies and complementarities in the field of animal health, which delineates the agreed responsibilities and synergies for several animal health sub-topics and cross-cutting issues.
436. He mentioned that the Chart was officially endorsed during the 76th OIE General Session and by FAO senior management in May 2008, but remains a living document according to the evolutions of the international context and of the organisation respective mandates. Priority diseases OIE and FAO jointly combat in the GF-TADs for Europe and EU-FMD Commission frameworks are among others highly pathogenic avian influenza, foot and mouth disease, Rinderpest, Rift Valley fever and Classical Swine fever, using common tools such as GLEWS, OFFLU and CMC-AH all being operational since 2006, regional laboratory, epidemiosurveillance and socio-economic networks and newly established regional animal health centers in Africa and Middle East. Most of FAO interventions do not occur in Europe sensu stricto but in neighbouring countries such as Turkey and Caucasian countries (FMD and ASF projects / programs notably), in order to create surveillance and main transboundary diseases free buffer zones. For HPAI, there is no ‘hot spot countries’ in Europe such as Indonesia, Vietnam, Lao in Asia or Egypt and Nigeria in Africa, however the disease remains of huge concern, notably considering the last outbreaks in Nigeria possibly introduced by migratory birds. One major epidemiological event of potential threat for Europe is the current peste des petits ruminants outbreak in Morocco , which will require intensive control programmes including vaccination and regional coordination, the newly established Regional Animal Health Centre of Tunis playing a active role in this regional approach. This event also strongly militates for the under development initiative for a Mediterranean Euro-Maghreb network in Animal Health. Of other paramount important diseases for Europe are the blue tongue and all the insect-borne diseases (such as the Rift Valley fever and chikungunya, only in Africa to date) since globalization of trade and climate change allow vectors (insects mostly) respectively to access and develop in Europe (example of the recent extended distribution of Aedes in South Europe).
437. Finally Dr Domenech commented that while global eradication of an animal disease has proven possible through the example of Rinderpest (targeted for 2010) and while an international initiative is been launched by OIE and FAO for the progressive control of foot and mouth disease (a global strategy is under development, which will be presented during the International Conference to be co organized by OIE and FAO in Paraguay, June 2009), a new transversal strategy promoting the reinforcement of Veterinary services capacities (based on OIE PVS evaluations and gap analyses), holistic approaches to diseases prevention and control and reinforced collaboration amongst key actors are now being envisaged between major International Organizations such as FAO, OIE, WHO, UNICEF, or World Bank targeting major zoonotic infectious emerging and re-emerging animal diseases. This so called One-World-One-Health strategy built on the lessons learnt from the AHI crisis will be presented by these Organizations at the next International Conference on avian influenza to be held in Sharm El Sheikh, Egypt, next October.

Plenary discussions of draft Recommendations Nos 1 and 2

438. Draft Recommendations Nos 1 and 2 on the two technical items of the Conference were presented to the participants and put forward for discussion. Both draft Recommendations were presented for adoption at the Friday session with some minor amendments as per suggestions and discussions from participants.

Date, venue and selection of the technical item for the 24th Conference of the OIE Regional Commission for Europe

439. The president of the Commission asked Delegates present if any of their countries wished to host the 24th Conference of the OIE regional Commission for Europe.
440. The Delegate of Kazakhstan expressed the wish of his country to host the Conference.
441. The proposal of Kazakhstan was supported by Israel, Ukraine, Croatia, Germany, Poland, Latvia, Uzbekistan, and Armenia.
442. This proposal was unanimously accepted.
443. The dates of the Conference will be decided during the Regional Commission meeting to be held during the General Session in 2009. This conference will be fixed during the end of September 2010.
444. As usual, two technical items will be discussed. One technical item will include the response of Members of the OIE Regional Commission for Europe to a questionnaire that will be prepared on the specific subject. This item will be decided during the next meeting of the Regional Commission during OIE General Session in Paris in May 2009. The other technical item will deal with a subject of current interest that will be proposed by the Regional Commission during the meeting of the Region during the General Session preceding the Conference, i.e. in 2010. This item will not include a questionnaire.

Thursday 18 September 2008

Professional and Cultural Visit

445. Participants and their guests highly appreciated the professional and cultural visit organised for the day by the host country. Sincere thanks to the organisers for their kind hospitality were presented.

Adoption of final report and Recommendations

446. Dr Vallat explained the procedures to adopt the report of the Conference and the recommendations. Delegates are allowed to comment or make suggestions which are taken into account on the spot but additional comments on the report, received by 6 October 2008 at the OIE Central Bureau, will also be considered. However, the recommendations need to be adopted during the session and cannot be changed later on.
447. The report was adopted with a few minor amendments.
448. The two recommendations were adopted without any amendment. Few suggestions from the Delegate of Russia regarding the translation of recommendations into Russian language were accepted and adopted.
449. The traditional motion of thanks for the host country was read by the President of the OIE Regional Commission for Europe and OIE Regional Representative for Eastern Europe.

Closing ceremony

450. The President of the Regional Commission for Europe, Dr Nikola Belev, thanked the host country, all participants and the OIE Secretariat for a most fruitful conference. He thought that the Conference agenda was relevant to the region and the social programme most enjoyable. He asked Dr Lukauskas to convey the gratitude of the Commission to the Government of Lithuania for supporting the Conference.
451. Dr Barry O'Neil, President of the OIE International Committee thanked all participants for their active participation. He expressed his sincere appreciation to the Secretariat of the host country and of the OIE for the excellent work carried out to ensure the success of the Conference. He hoped that participants enjoyed the hospitality of the people of Lithuania and that they would carry home with them nice memories of their stay in such a beautiful country as Lithuania.
452. Dr Bernard Vallat, OIE Director General stated that the Conference provided a good opportunity for Members of the region to raise issues of mutual interest but also those of concern. He noted that the technical presentations were of a very high level. He expressed his appreciation to the OIE Secretariat and other OIE staff from the Central Bureau for their active and fruitful participation. He remarked the excellent organisation and coordination of the Conference He invited all participants to be present in Kazakhstan for the next Regional Commission Conference. Dr Vallat thanked Dr Lukauskas and his staff as well as the Government of Lithuania for their contribution in making the Conference a success.
453. Dr Lukauskas, Delegate of Lithuania, thanked all participants including speakers, interpreters and the Secretarial staff of the OIE Representation and the OIE Central Bureau for making the Conference meaningful and interesting
454. Dr Lukauskas officially declared the Conference closed at 11.30 a.m.



23rd Conference of the OIE Regional Commission for Europe
Vilnius, Lithuania, 16-19 September 2008

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voir sous speakers/see under speakers

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Voir sous OIE/see under OIE



**23rd Conference of the OIE Regional Commission for Europe
Vilnius, Lithuania, 16-19 September 2008**

AGENDA

- I. Update on OIE policies, good governance, strengthening of Veterinary Services and preparation of a new OIE Strategic Plan.
- II. Activities of the OIE Regional Representation for Eastern Europe and the OIE Regional Commission for Europe
- III. Activities of the OIE Sub-Regional Representation in Brussels
- IV. Technical Item I: **Practical application of OIE standards and guidelines on compartmentalisation**
- V. GF-TADs Activities in Europe
- VI. GLEWS Activities
- VII. Update on developments in aquatic animal health
- VIII. Technical Item II: **Strategy for controlling bluetongue, including the application of vaccines**
- IX. Animal health situation in Europe in the first half of 2008
- X. Update on the activities of the OIE Terrestrial Animal Health Standards Commission
- XI. European Union Animal Health Strategy: Integration of OIE Standards and expected outcomes
- XII. Activities of the OIE Animal Welfare Working Group
- XIII. Animal Welfare: European Union perspectives and expectations
- XIV. Presentations by international and regional organisations
- XV. Date, venue and selection of the technical item for the 24th Conference of the OIE Regional Commission for Europe



**23rd Conference of the OIE Regional Commission for Europe
Vilnius, Lithuania, 16-19 September 2008**

Timetable

Monday 15 September 2008

- | | |
|----------|---|
| 02.00 pm | Registration and distribution of documents |
| 07.30 pm | Welcome reception (cocktail) hosted by the State Food and Veterinary Service of the Republic of Lithuania |

Tuesday 16 September 2008

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|----------|---|
| 08.30 am | Registration and distribution of documents (cont) |
| 09.00 am | Opening ceremony Opening of the Conference, Prof. Dr Nikola Belev, President of the OIE Regional Commission for Europe and OIE Regional Representative for Europe <ul style="list-style-type: none"> – Mr Gediminas Kirkilas, Prime Minister of the Republic of Lithuania – Prof. Dr Kazimira Danutė Prunskienė, Minister of Agriculture of Lithuania – Dr Algirdas Seselgis, Vice-Minister of Health of Lithuania – Dr Barry O'Neil President of the OIE International Committee – Prof. Dr K. Lukauskas, OIE Delegate of Lithuania – Dr Bernard Vallat, OIE Director General |
| 10.00 am | Break |
| 10.30 am | Election of the Conference Committee (Chairperson, Vice-Chairpersons and Rapporteur General) Adoption of the Agenda and Timetable Election of Session Chairpersons and Rapporteurs for Technical Items and Animal Health Situation |
| 11.00 am | Update on OIE policies, good governance, strengthening of Veterinary Services and preparation of a new OIE Strategic Plan (Dr Bernard Vallat, OIE DG) |
| 12.00 am | Activities of the OIE Regional Representation for Eastern Europe and the OIE Regional Commission for Europe (Dr Prof Nikola Belev) |
| 12.30 am | Activities of the OIE Sub-Regional Representation for Europe in Brussels (Dr Caroline Plante) |
| 01.00 pm | Lunch |
| 02.30 pm | Technical Item I: “Practical application of OIE standards and guidelines on compartmentalisation” (Dr Alex Thiermann) |
| 04.00 pm | Break (Preparation of Recommendation No. 1 by designated small group) |

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| 04.30 pm | GF-TADs Activities (Dr Bernard Van Goethen) |
| 04.50 pm | GLEWS Activities (Dr Joseph Domenech) |
| 05.10 pm | Update on developments in aquatic animal health (Dr Franck Berthe) |
| 07.00pm | Reception (dinner) hosted by the State Food and Veterinary Service of the Republic of Lithuania |

Wednesday 17 September 2008

| | |
|----------|---|
| 09.00 am | Technical Item II: Strategy for controlling bluetongue, including the application of vaccines (Dr Vincenzo Caporale) |
| 10.30 am | Break |
| 11.00 am | Animal health situation in Europe in the first half of 2008 (Dr Francesco Berlingieri) |
| 12.00 am | Update on the activities of the OIE Terrestrial Animal Health Standards Commission (Dr Alex Thiermann) |
| 12.30 am | European Union Animal Health Strategy: Integration of OIE Standards and expected outcomes (Dr Bernard Van Goethen) |
| 01.00 am | Lunch Preparation of Recommendation No. 2 by designated small group |
| 02.20 pm | Activities of the OIE Animal Welfare Working Group (Dr Andrea Gavinelli) |
| 02.40 pm | Animal Welfare: European Union perspectives and expectations (Dr Andrea Gavinelli) |
| 03.10 pm | Presentations by international and regional organisations |
| 04.30 pm | Break |
| 05.00 pm | Discussions of Recommendations Nos 1 and 2 |
| 05.30 pm | Date, venue and selection of the technical item for the 24th Conference of the OIE Regional Commission for Europe |
| 06.00 pm | Press Conference |
| 07.00 pm | Reception (dinner) given by the OIE |

Thursday 18 September 2008

Professional and cultural visit

Friday 19 September 2008

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| 09.00 am | Adoption of the Final Report and Recommendations |
| 10.30 am | Break |
| 11.00 am | Closing ceremony |



**Conference of the OIE Regional Commission for Europe
Vilnius, Lithuania, 15-19 September 2008**

**Recommendations Technical Item I:
Practical application of the concept of Compartmentalisation**

CONSIDERING THAT

1. One of the main objectives of the OIE has been to develop international standards for the prevention and control of significant animal diseases, including zoonoses, as well as to protect countries from spread of pathogens through international trade while avoiding unjustified sanitary barriers.
2. Safe trade can be not just limited to animals and products originated from countries or zones declared free of relevant diseases.
3. Freedom status is sometimes difficult to acquire and maintain due to risks from wildlife.
4. Risk mitigating measures recommended by the OIE can be applied in order to guarantee the health status in a certain animal sub-population
5. It is possible, through adequate strict biosecurity measures and intense surveillance under supervision of Veterinary Services, to demonstrate the disease freedom in a defined and well isolated sub-population.
6. The OIE has elaborated the concept of 'compartmentalisation', which with its principles and guidelines has been incorporated into the Code, allowing the separation of animal sub-populations presenting different health statuses through strict biosecurity and management measures controlled by Veterinary Services.
7. Efficient and credible Veterinary Services with an adequate surveillance system remain the essential elements in the establishment and maintenance of the health conditions of such a sub-population, being able to provide proof of the required surveillance system and the identification and traceability of live animals, as described in the Code.
8. The establishment of compartments should not interfere with the obligations of OIE Members regarding disease notification and implementation of disease prevention and control measures complying with OIE standards in the entire territory.
9. A strong partnership between the private and public sector is also essential for an efficient implementation of compartmentalization. Several activities and responsibilities (such biosecurity measures, surveillance, and traceability) are assumed by the industry under delegation, control and authority of the Veterinary Authority. Therefore, a trusting partnership must be established between both sectors.
10. Even when delegating some activities and responsibilities to the private sector, the final authority for all official certification of processes, animals and products still rests solely in the hands of the Veterinary Authority.
11. Currently, several countries are considering the practical implementation of compartments, and some are establishing compartments among their poultry and/or swine industries.

12. While the concept of compartmentalisation has been clearly described through principles and guidelines, and adopted and published in the Code, it has been difficult to date to fully implement compartments in the field and to achieve formal recognition of such a concept by trading partners.
13. European Countries have expressed their interest for the OIE to assist them on practical implementation of compartmentalisation, including harmonisation of procedures and encouragement of mutual recognition between trading partners.

**The OIE Regional Commission for Europe
Recommends that:**

1. European countries continue their efforts toward drawing up a harmonised regulatory framework for the implementation of compartments, following and applying OIE standards on compartmentalisation, for trading purposes, as well as for disease control where relevant. Compartmentalisation should not replace efforts towards disease eradication.
2. Effective partnerships between the Veterinary Authority and the private sector (livestock industries and all associated relevant stakeholders) be formally established, by developing strict protocols that clearly define responsibilities and functions of each relevant stakeholders, including audit and monitoring procedures of the delegated activities to the private sector from the Veterinary Authority
3. Member countries implement appropriate communication procedures to raise the awareness of all relevant stakeholders on the concept of compartmentalisation and the importance of their involvement in its implementation.
4. A biosecurity plan developed by the private sector and the Veterinary Authority should include an appropriate animal identification and traceability system (individual, group or flock), management and animal health records, up-dated risks assessments identifying potential pathways for the entry and spread of pathogen(s), surveillance system, isolation measures and operational procedures, including certification pathway.
5. Appropriate assistance to Member Countries could be sought, from the OIE in order to have the necessary skills (both at public and private level) for implementing compartments.
6. Member countries are encouraged to mutually recognize compartments between trading partners. The information on established compartments should be shared between Veterinary Authorities in order to seek their approval, preferably during “peace-time”.
7. The OIE continue its efforts to promote good governance of VS, through the application of the OIE-PVS evaluation tool to pave the way for the strengthening of their Veterinary Services, including for critical competencies which are necessary for the implementation of compartmentalisation programmes.
8. The OIE assist Members, through the implementation of pilot projects, on the practical application of compartmentalisation, by harmonizing its implementation between trading partners, and by encouraging mutual recognition of such compartments
9. The OIE continue its work on developing standards, and in particular, guidelines and support to pilot projects for the efficient and practical application of compartmentalisation, for safe global trade, as well as the prevention and control of diseases.



**Conference of the OIE Regional Commission for Europe
Vilnius, Lithuania, 15-19 September 2008**

**Recommendations Technical Item II:
Strategy for Bluetongue control in Europe, including vaccination**

CONSIDERING THAT

1. BTV continues to spread in Europe and there is a constant threat of introduction of new serotypes
2. New *Culicoides* spp, with a greater geographical range, have been shown to be competent vectors for BTV.
3. The spread of the virus and transmission of the infection between different regions can result from movements of infected animals as well as by vector proximity and wind-borne transport of infected vectors.
4. BT epidemics may have a great negative impact on ruminant production and welfare and on trade .
5. As BT is a problem of regional dimension, which affects territories rather than individual animals or farms, appropriate surveillance networks, early warning programmes, and disease control strategies, should be developed at regional level.
6. A continuous and effective epidemiological surveillance, including serology, virology and entomology, would ensure a proper monitoring of the disease in the region.
7. It is necessary to harmonise as much as possible the criteria for defining and notifying BT “cases” and “outbreaks” in compliance with OIE standards, as well as to comply with countries obligation to notify the occurrence of the disease through the OIE WAHIS system.
8. Mass vaccination of all susceptible domestic ruminants, reduces the number of clinical outbreaks, mitigates risks when moving animals, limits virus circulation, and under certain conditions, especially with movement controls and surveillance, can lead to eradication. However there may be difficulties of sustainability of control measures over prolonged periods due to economical, social and political factors.
9. Illegal animal movements may lead to the spread of the disease and countries at risk should reinforce their border controls and establish good communication and coordination strategies with neighbouring countries.
10. There is a need for a good communication strategy, involving farmers, other stakeholders and politicians, on the risks as well as on the disease control strategy chosen.
11. Training and awareness of veterinarians and other animal health staff and farmers are crucial to ensure the successful implementation of the control strategy.

**The OIE Regional Commission for Europe
Recommends that:**

1. European countries develop and establish regional surveillance networks with the support of the OIE and regional and international organisations, working with countries of the Mediterranean basin for coordinating prevention measures as well as serology, virology and entomology studies within the region, following OIE international standards regarding BT surveillance.
2. The EU-BTNET developed under OIE coordination should be the base for information exchange and management as well as communication on bluetongue surveillance and control in the European region.
3. BT infected and at risk countries carry out and permanently up-date BT Risk Analysis studies.
4. BT infected and at risk countries implement appropriate strategies, regionally if possible, to limit BT virus circulation, including animal movement controls and the application of a vaccination strategy.
5. Vaccination strategies should include plans to ensure having good quality vaccines in the quantities required and in sufficient time to perform vaccination.
6. Member Countries should use the OIE criteria for defining and notifying BT “cases” and “outbreaks”.
7. Member Countries should develop a communication strategy for BT including awareness campaigns on the risks and impact of the disease, as well as on the disease control strategy.
8. The establishment of a bluetongue antigen bank for Members of the OIE Regional Commission for Europe, with the support of the OIE, will be further considered as a relevant option.
9. The OIE should review the relevant Code and Manual chapters to ensure that rules for trade correctly address the risks from movements of live animals and their products, vaccination quality and do facilitate the use of vaccination
10. Further specific research and studies be developed with the assistance of OIE Reference Laboratories to better understand the biology of the bluetongue virus and its interaction with the vector and mammalian hosts. This should include BTV trans-placental transmission (particularly BTV8), over-wintering mechanisms and vaccine quality.



**Conference of the OIE Regional Commission for Europe
Vilnius, Lithuania, 15-19 September 2008**

PRESS RELEASE

Vilnius, 19 September 2008 - The 23rd Conference of the Regional Commission for Europe of the World Organisation for Animal Health (OIE), held in Vilnius, Lithuania, from 15 to 19 September 2008, concluded with a strong commitment to move forward with the establishment of regional surveillance networks for early detection and rapid response mechanisms under the strict supervision of Veterinary Services. This needs to be supported by the broad implementation of appropriate vaccination strategies against bluetongue in infected and at-risk countries, using vaccines complying with OIE standards.

Today, bluetongue is one of the most serious animal health issues affecting Europe. Historically confined to some regions of Africa and the Mediterranean Basin, different strains of the virus have been infecting regions as far north as the Balkans since 2000. Moreover, a new serotype (BTV-8) has been active for the first time in northern Europe since 2006, where it continues to spread, causing severe disease among the affected animal population.

Experience gained from controlling the disease has shown that strict movement restrictions and vaccination are the most effective prevention and control tools, as is also the case for other animal diseases.

Referring to the potential economic effects and costs of control measures, Mr Gediminas Kirkilas, Prime Minister of the Republic of Lithuania, stated "Prevention is better than cure", reiterating the motto of the European Union Animal Health Strategy 2007–2013, which fully complies with OIE strategies.

In his intervention on OIE Policies and Good Governance of Veterinary Services, the Director General of the OIE, Dr Bernard Vallat, commented on the status of countries of the OIE Regional Commission for Europe regarding the programme for strengthening Veterinary Services based on OIE standards and guidelines, using the OIE-PVS Tool. He also stressed the importance of continuing the process of improving good governance at a global level using PVS follow-up mechanisms after the diagnosis provided by the initial evaluation.

The Conference also recognised that compartmentalisation – the effective separation of animal subpopulations of different health status through strict biosecurity measures – can offer the possibility of maintaining trade by demonstrating disease freedom in a selected and well-isolated subpopulation, even though the disease may be present in other parts of the country.

Historically, successful eradication programmes for bovine brucellosis and bovine tuberculosis relied heavily on the use of biosecurity measures for the safe separation of herds, even before this became known as compartmentalisation,

A review of outbreaks of transboundary animal diseases and the work of the OIE

Over the past year, countries in the region have had to deal with outbreaks of highly pathogenic avian influenza, foot and mouth disease, classical swine fever, African swine fever, rabies and bluetongue. Participants reiterated the importance of early notification using the new OIE WAHIS system.

The most recent activities of the OIE Terrestrial and Aquatic Code Commissions and the OIE Animal Welfare Working Group were presented during the Conference. OIE partner organisations, such as the FAO and the EC, also presented updates on their activities and policies in Europe in the field of animal health as well as the results of the programmes they carry out jointly with the OIE.

All recommendations adopted by the Conference will be submitted for consideration and final adoption by all OIE Members at the next OIE General Session, in May 2009.

The Conference was kindly hosted by the Government of the Republic of Lithuania. It was chaired by Dr Lukauskas, OIE Delegate of Lithuania, with the support of the OIE Headquarters and the OIE Regional Representation for Eastern Europe.



**Conference of the OIE Regional Commission for Europe
Vilnius, Lithuania, 15-19 September 2008**

MOTION OF THANKS

The President and the Members of the OIE Regional Commission for Europe, the Director General of the OIE, the President of the OIE International Committee, members of delegations, country representatives, representatives of international and regional organisations and observers, wish to express their gratitude to the Government of Lithuania, the Host Country of the 23rd Conference of the OIE Regional Commission, held from 16 to 19 September 2008, for the warm welcome accorded to the participants, for all facilities made available to them during their stay in Vilnius and for the excellent organisation of the conference.