

Requirements of the *Terrestrial*Code for PPR surveillance

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GCES

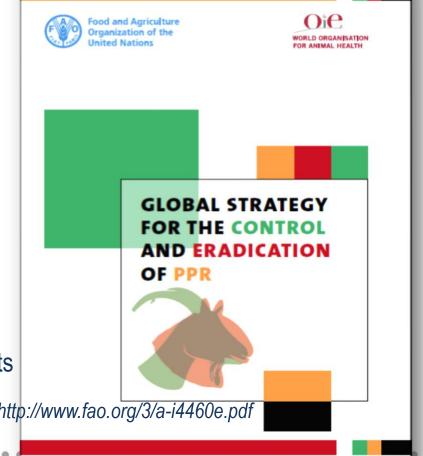
The PPR Global Control and Eradication Strategy (GCES)

Adopted during the FAO/OIE International

Conference, Abidjan, April 2015

Specific Objectives:

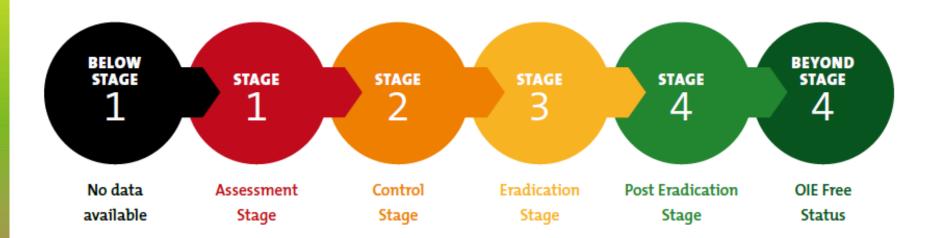
- The eradication of PPR by 2030
- Reinforcing Veterinary Services
- Improving animal health globally by reducing the impact of other major infectious diseases of small ruminants
- Details in the GCES OIE and FAO booklet: http://www.fao.org/3/a-i4460e.pdf





GCES step-wise

Step-wise approach of GCES to eradication at national level:



The Stages correspond to a combination of decreasing levels of epidemiological risks and increasing levels of prevention and control



GCES step-wise

Step-wise approach of GCES to eradication at national level:

Details in the GCES OIE and FAO

booklet: http://www.fao.org/3/a-i4460e.pdf



- Below stage 1: No data available
- Stage 1: Assessment stage. Duration 1 3 years:
- Stage 2: Control stage. Duration 2 5 years
- Stage 3: Eradication stage. Duration 2 5 years
- Stage 4: Post eradication stage. Duration 1- 3 years
- Beyond stage 4: OIE free status

Each stage will be assessed by a technical plan

- National assessment plan
- Control plan
- Eradication plan
- Dossier showing :
 - -vaccination is stopped,
 - evidence no virus circulation
 - ready to apply for official OIE



PPR-free status recognition

A surveillance strategy in place in support to an OIE endorsed official control program for PPR:

Principles and guide for surveillance in: Chapters and articles of the OIE Terrestrial Code to follow by member countries – OIE Manual



- Establishing and then strengthening surveillance for PPR will be an absolute priority to achieve the step-wise approach of the official control program to attain free status for PPR
 - Allowing the early detection of the disease through clinical surveillance suggestive of PPR, recorded and quantified
 - Laboratory diagnosis to complete clinical symptoms observed
 - Control measures to which the animals are subject as soon as there is confirmation (prophylactic measures, quarantines, sanitary cordon etc..)



A surveillance strategy in place in support to an OIE endorsed official control program for PPR:

Horizontal as well as disease specific Chapters and articles of the OIE Terrestrial Code to follow by member countries – OIE Manual

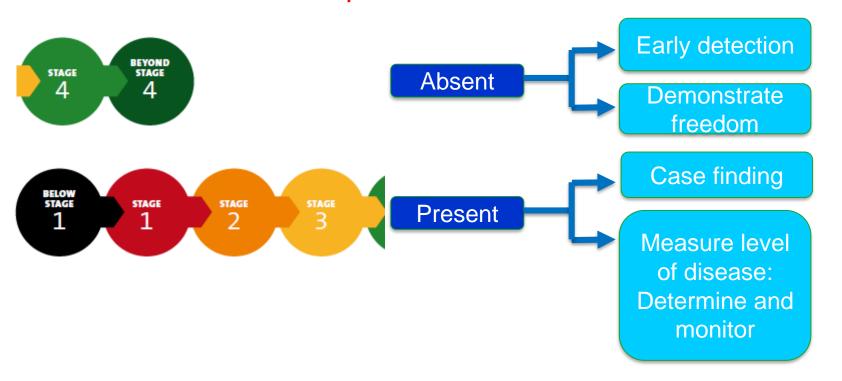


Countries should submit dossiers to the OIE addressing concisely how PPR surveillance system is in place in compliance with the Terrestrial Code:

- Meant to achieve?
- How?
- By whom? Etc...
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Surveillance strategies employed in support to an OIE endorsed official control program for PPR:

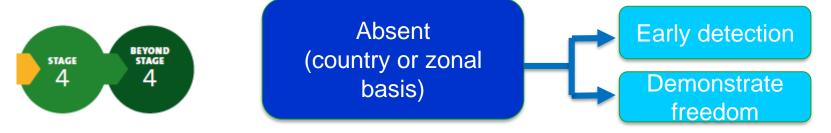
✓ Meant to?:Code,Chapter1.4/1.12/Article 14.7.27— 14.7.34





Context of official free status recognition

✓ Meant to?: Code Article 1.4.6, 1.12.1&2,14.7.28 - 14.7.33

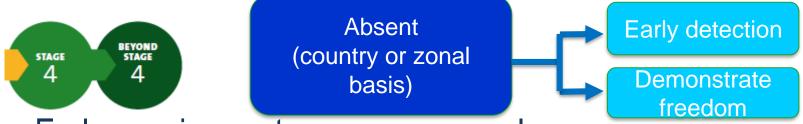


- Demonstrate freedom:
 - Surveillance system in place showing that the disease is not present (with a specified probability). History.
 - Vet services have to have a good understanding of risk factors that influence the disease.
 - It is possible to design risk-based surveillance, in which high-risk populations and areas are included in the surveillance



Context of official free status recognition

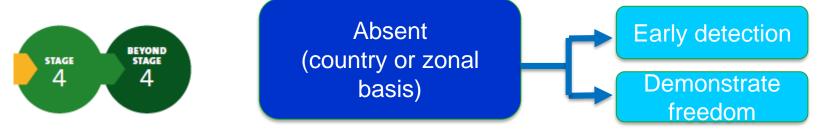
✓ Meant to?: Code Article 1.4.6, 1.12.1&2,14.7.28 - 14.7.33



- Early warning system, some examples:
 - Early capacity to detect, sample, and confirm;
 - Early recognition of a disease incursion throughout the entire production, marketing and processing chain etc..
 - Communication SOPs for early warnings
 - Early detection = Early response. The cost and effectiveness of control of a disease is normally directly related to the delay in detection
- ofrthe outbreak.

Context of official free status recognition

✓ Meant to?: Code Article 1.4.6, 1.12.1&2,14.7.28 - 14.7.33



- Early warning system, some examples:
 - Procedures for the rapid collection and transport of samples to a laboratory for PPR diagnosis; Sampling and diagnosis kits and other equipment available
 - Trained Field, Veterinary and Laboratory personnel.



In support to an OIE endorsed official control program for PPR:



- Measure level of disease.
- Monitoring program effectiveness
- Efficient case finding.
- Based on selective and clear priority settings



In support to an OIE endorsed official control program for PPR:



- Priority settings, some examples:
 - Implement surveillance to measure the level of disease
 - Epidemiological situation (country, zones and risk from neighboring countries). Provide maps of disease distribution, animal density, movements.
 - Highlight the current knowledge and gaps.



In support to an OIE endorsed official control program for PPR:



- Describe and assess effectiveness of vaccination program,
 - population immunity before and after vaccination;
 - Impact of the program on the reduction in number of outbreaks and their distribution
- Procedures in place to prevent the introduction of PPR



In support to an OIE endorsed official control program for PPR:



- Efficient case finding activities:
 - To remove all infected animals from the population
 - Appropriate case definition for evidence of infection or immune status
 - Effectiveness of case finding surveillance depends on a range of factors from field examination to laboratory testing
 - Performance: sensitivity, specificity and predictive values will have an impact on the conclusions from surveillance.



- ✓ How?: Article 1.4.3, 1.12.1-3, 14.7.29; OIE Manual, Chapter 2.7.10. Peste des petits ruminants
- Surveillance based on different data sources and ways:
- Most commonly used : clinical/virological/serological surveillance
 - Clinical surveillance supported by all necessary epidemiological information and also
 - Virological and serological (vaccine/infection) surveillance to confirm or rule out field investigations.



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Procedure for specimen collection: Article 1.4.5, 14.7.29; OIE

Manual, Chapter 2.7.10. – Peste des petits ruminants

Uninfected/unvaccinated Infected Recovered/vaccinated **Status** Post-mortem Samples Serum LN and affected Serum Conjunctival, buccal to collect sections of the cavity, nasal and alimentary tract rectal swabs, whole omasum, duodenum, blood in EDTA ileum, caecum, lung, spleen* Tests to Antibody Gene and Antigen Antibody Isolation perform **ELISA VNT** RT-PCR, ICE, field test, ELISA VNT VFRO-SI AM **Immunostaining Test NFGATIVE** POSITIVE by **POSITIVE** results One or several tests Absence of Presence of

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- ✓ How?: Chapter1.4., 1.12.
 - Surveillance strategy (<u>active</u>/versus passive),
 - Based on systematic/<u>targeted</u>/randomized sampling
 - Active surveillance normally takes the form of a structured survey, designed to collect specific information to answer a specific question.
 - Measuring the level of disease
 - Identify changes in the disease over time
 - Detect differences in disease between regions, etc...



- ✓ How?: Chapter1.4., 1.12.
 - Surveys: Quick guide
 - 1. Identify the purpose of the survey and the question that is being asked.
 - 2. Identify the population of interest. Determine the first stage sampling unit (epidemiological unit).
 - 3. Obtain or generate a sampling frame. This is a list of all the villages or farms for the population of interest.
 - 4. Choose the right survey design for calculating the appropriate sample size, (one or two – stage sampling).



A surveillance strategy in place:

- ✓ How?: Chapter1.4., 1.12.
 - Surveys: Quick guide
 - 5. Calculate the best sample size. Large enough to detect infection. Factors influencing the sample size calculation :
 - The confidence level (By convention, a confidence level of 95% is used most of the time);
 - The estimated prevalence (the lower the prevalence, the larger the sample size)
 - The desired precision : example ±5%, a survey resulting in a prevalence estimate of 50% would have a confidence interval of 45–55%;
 - The variance in the population (how different individuals are from each other); and



Test Performance is expressed in terms of sensitivity and specificity

- ✓ How?: Chapter1.4., 1.12.
 - Surveys: Quick guide
 - 5. Results
 - Tabulated results:
 - Break-down in EpUn/An present/sampled/dates visit/date results
 - Break-down in of results by age group/positive or negative
 - Maps showing location of EpUn/An sampled/positive
 - Details of the control measures
 - Results of the epidemiological enquiry of the survey
 - Conclusion in compliance with the OIE Terrestrial Code



- ✓ By whom?: Horizontal Chapters 3.1. Veterinary Services and 3.2. Evaluation of Veterinary Services,
 - Veterinary Services have responsibility, competency for ensuring or supervising the implementation of animal health and welfare measures
 - Thus, supervising, control, enforce and monitor all PPR-related activities.



- ✓ By whom?: Horizontal Chapters 3.1. Veterinary Services and 3.2. Evaluation of Veterinary Services,
 - Should be under the responsibility of the Veterinary Authority comprising:
 - Veterinarians, whether public or private sector
 - Other professionals and paraprofessionals, including community animal health workers



- ✓ For which population? Article 14.7.29-31,:
 - Domestic population (sheep and goat) throughout the production, marketing and processing chain
 - Population of a susceptible wildlife species may act as sentinels indicating the spill over of PPRV from domestic sheep and goats
 - High-risk groups of animals

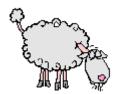


A surveillance strategy in place :

✓ When?: Article 14.7.27-31

- Surveillance for PPR detection should be in the form of a continuing program (designed in whole country or zone). History: 10 years.
- In the context of applications for freedom, surveillance should demonstrate absence of infection during the last 24 months.
- With the need to provide details of the occurrence of suspected cases and how they were investigated and dealt with.











Terrestrial Animal Health Code and Manual:

- ✓ Horizontal Chapters
 - ✓ Animal health surveillance (1.4.)
 - ✓ Veterinary Services (3.1.) and Evaluation of Veterinary Services (3.2,)
- ✓ PPR Specific Chapters.
 - ✓ Application for official recognition by the OIE of free status for peste des petits ruminants (1,12)
 - ✓Infection with peste des petits ruminants virus (14.7.)
 - ✓OIE Manual, Chapter 2.7.10. Peste des petits ruminants

Terrestrial Animal Health Code and Manual:

✓ Surveillance

- ✓ Animal health surveillance (1.4.)
- ✓ Application for official recognition by the OIE of free status for peste des petits ruminanst (1.12.)
- ✓ Introduction to surveillance of PPR (14.7.27.)
- ✓ General conditions and methods for surveillance (14.7.28.)
- ✓ Surveillance strategies (14.7.29.)
- ✓ Surveillance in wildlife (14.7.30.)
- ✓ Applying for OIE recognition of PPR free status (14.7.31.)
- ✓ For recovery of free status (14.7.32)
- ✓ The use and interpretation of serological tests for serosurveillance of PPR (14.7.33)

Terrestrial Animal Health Code and Manual:

- ✓ Surveillance in the context of official free status recognition
 - ✓ Surveillance to demonstrate freedom from disease or infection (1.4.6)
 - ✓ Country free from infection with peste des petits ruminants virus (1.12.1)
 - ✓Zone free from infection with peste des petits ruminants virus (1.12.2)
 - ✓ And PPR specific articles (14.7.28 14.7.33)



Terrestrial Animal Health Code and Manual:

- ✓ Surveillance to support to an OIE endorsed official control program for PPR
 - ✓Introduction, objectives and principles (1.4.1-14.5.)
 - ✓ Application for endorsement by the OIE of an official control programme for peste des petits ruminants (1.12.3.)
 - ✓OIE endorsed official control programme for PPR (14.7.34)

