

OIE WORKSHOP ON AVIAN INFLUENZA EMERGENCY CONTROL MANAGEMENT IN COLLABORATION WITH FAO 6-8 May 2007 DOHA – QATAR

Report

1. Opening ceremony

The workshop was inaugurated by H E Sheikh Abdul Rahman bin Khalifa Al Thani, Minster of Municipal Affairs and Agriculture and Sheikh Faleh bin Nasser Al Thani Director of Research and Agricultural Development. Inauguration ceremony was held at the premises of the Ministry of Municipal Affairs and Agriculture. The minister welcomed the participants and representatives of the international organizations and mentioned that Qatar decided to host this workshop to contribute to the regional and international efforts to achieve better control of the spread of the avian influenza in the Middle East. He added that Qatar was one of the countries who realized the importance of joining the world Organization for Animal Health (OIE) as the country was aware of its unique role in supporting animal health and controlling epidemics which affect animal resources.

Sheikh Faleh bin Nasser Al Thani, Director of Research and Agricultural Development, said that avian influenza poses a threat to food security in different parts of the world and the Middle East and that in this workshop, we will discuss the latest methods to control the disease as well as precautionary measures to be taken. We will also discuss intensifying awareness campaigns through the media and means of enhancing the role of monitoring agencies.

Dr Ghazi Yehia, the OIE Regional Representative for the Middle East, thanked H. H. the Prince, the Government and the people of the State of Qatar for the extraordinary hospitality and organization. He stated that the OIE, the FAO and WHO, had developed an international strategy to combat avian influenza back in 2005. He mentioned that originally they had focused on east and Southeast Asia since the disease started spreading in its countries leading to human and economic losses. He added that the OIE intends to increase cooperation and coordination between countries and to achieve safeguarding of the international trade in animals and animal products. He emphasized the importance of early detection of diseases as the best way to control them especially avian influenza and, in the same time, should also fight illegal trade in animals as one of the important sources of the disease spread.

2. Participating countries

Participating countries included Bahrain, Cyprus, Egypt, Iran, Iraq, Kuwait, Lebanon, Qatar, Oman, Saudi Arabia, Syria, Sudan, Turkey, UAE and Yemen.

International organizations included the Food and Agriculture Organization (FAO), the World Health Organization (WHO), the United States Department of Agriculture, Animal and Plant Health Inspection Services (USDA APHIS) and Erasmus Medical Centre, Rotterdam.

3. Avian influenza general situation (Dr Dewan Sibartie)

Dr Dewan Sibartie (OIE Central Bureau) presented the international situation of avian influenza since the beginning of the occurrence of H5N1 in the world. He pointed out that the situation worldwide varies in countries or regions. The disease is enzootic in some countries (Nigeria, Egypt, and Indonesia), some countries eradicated the disease (European countries) and some countries present a reoccurrence of the disease after declaring them free (Korea, Vietnam, Thailand, Turkey, Japan). Most infected countries have adopted stamping out as a control measure without vaccination. He mentioned that 65 countries have been infected since 2003 and reoccurrence occurs in 32 of them. Therefore countries should be careful to declare the disease eradicated. However, these countries are now more prepared in case of reoccurrence.

In the discussion, Dr. Sibartie emphasized the role of the OIE in combating the disease worldwide, added the scientific and direct assistance the organisation has been providing to the affected countries and at risk one's worldwide.

4. Countries presentations

Egypt, Turkey, Qatar, Sudan, Iran, Iraq, Oman, UAE, Lebanon, Cyprus have made an oral presentation while Bahrain has given a written report. Saudi Arabia made an overview on the current status just to explain the situation regarding the occurrence of their first outbreak.

Summary of the countries' reports:

The situation regarding H5N1 infection is different from one country to another. Some countries are free (Qatar, UAE, Lebanon, Cyprus), others have been affected by the virus but they were able to control it (Turkey, with reoccurrence in 2007, Iran, Iraq), and one (Egypt) where the virus still endemic. In this country, 3 epidemiological phases have been described since the first case in February 2006: epizootic, persistence and re-emergence in January 2007.

All countries have taken into consideration the threat of avian influenza spread and have developed national contingency plans.

Infected countries have implemented, in first intention, stamping out measures to control the disease. Vaccination has also been adopted by some countries: Sudan has preventive measures to protect some identified and previously tested farms, Egypt, which starts with a targeted vaccination, and then considering the uncontrolled spread of the virus, implements a ring vaccination to finish with mass vaccination (actually done). Vaccines used vary from H5N1 (Egypt) to H5N2 (Egypt, Sudan). Sudan also implements a DIVA strategy. Compensation has been used in all infected countries.

All countries have reinforced the border protection and biosecurity measures, with bans and embargos on at risk products from infected countries. Iran and Iraq implement depopulation at their borders. Cyprus, Qatar, UAE have also organised simulation exercises.

Surveillance (active and passive) is implemented by all countries both in domestics and wild birds and all countries have organised awareness campaigns and training, mainly in cooperation with the poultry producers. Qatar and Sudan implement the use of mobile equipped teams.

5. Technical presentations

5.1. The Management and surveillance of HPAI emergencies in the ME (Dr. Stephano Marangon).

Dr. Stephano Marangon (Istituto Zooprofilattico Sperimentale Delle Venezie – Italy), highlighted the fact that there is no single and universal option to control the disease. Each national emergency plan has to be adapted to local conditions and should be developed in time of peace. Contingency plan is just a basic document; it has to be developed in manuals, describing specific operational procedures (SOP). Different scenarios have to be envisaged in each national plan, to be prepared as much as possible.

Implementation of early detection has also to be a priority. Surveillance programmes should be implemented according to the national and the regional situation, sustainable and regularly evaluated.

Dr Maragon recommended the use of RT-PCR for diagnostic, and précised that serologic surveillance is not as useful as early detection.

He insisted that recording data (animal population, lab results...) is the base for monitoring efficiently programs for control and survey the disease.

Vaccination, implemented with a strict protocol and appropriately monitored, maximize the biosecurity measures. A cost benefit analysis has to be conducted before implementing a vaccination strategy.

Answering question regarding the best way to kill poultry and the recommended distance betweens farms, he précised that the OIE Terrestrial Animal Health Code give a description of culling procedures. Concerning the recommended distance, there is no generic answer, but high density of farms is a factor of HPAI rapid spread.

5.2. Avian Influenza national management system (Dr. Joseph Annelli)

Before starting, Dr Joseph Annelli (USDA APHIS) mentioned that no country among participants presented the procedures of collaboration with the Public Health sector. For him, the current situation of Avian Influenza is a great chance to demonstrate the importance of Vet Services in the control of diseases.

He highlighted the intersectorial collaboration describing it as indispensable to control such infectious disease. He took as examples the organisation which has been implemented in USA to control LPAI in Virginia in 2002 and ND in California in 2003.

He also highlighted that each situation is different and has to be adapted to local specificities.

The National Incident Management System is a coordination tool, which can help any country to harmonize the collaboration between all the actors concerned by the implementation of emergency response.

Such system implement a common language and lean on a basic knowledge understandable by all participants (from participating agencies) involved in the application of the emergency plans (most of them have no skill in veterinary science).

After the presentation, Prof. Hassan Aidaros (FAO) commented on the importance of such system of organisation to operate efficiently in case of emergency. He mentioned that the subject developed by Dr. Annelli is very new in such workshop but essential to plan efficient disease control strategies.

5.3. Monitoring H5N1 in wildlife (Dr. Vincent Munster)

Dr. Vincent Munster (Erasmus Medical Centre, Rotterdam) present the activity of his lab in the surveillance of avian influenza in Netherlands.

He insisted that such surveillance should be based on an efficient collaboration between the ornithologist, the epidemiologist and the virologist.

This surveillance should also be adapted to the specificities of each country in terms of geographic and local birds' ecology.

Specific attention has to be put on the storage of samples especially regarding the difficulties in wild birds sampling.

According to his own experience, the active surveillance of wild birds is not adapted to identify HPAI virus circulation. This is done by passive surveillance on sick and dead birds.

Nevertheless, active surveillance on wild birds gives an overview of LPAI virus circulation.

This kind of surveillance could also take into account other diseases of importance to the local conditions of the country (West Nile, ND...).

5.4. OIE standards on Avian Influenza (Dr. Gideon Bruckner)

Dr. Gideon Bruckner (OIE Central Bureau) presented the OIE recommendations and standards concerning avian influenza; definition of the disease, trade recommendation, surveillance, zoning and compartmentalisation.

He specified also the difference between HPAI (Highly Pathogenic Avian Influenza) and NPAI (Notifiable Avian Influenza).

He precised that the reduction of the delay to regain the free status from 6 to 3 months is based on scientific knowledge about the risk transmission of the disease. However, he also insisted on the fact that the absence of outbreaks during such period is not sufficient for a country to declare itself free. It must continue to implement surveillance in accordance with OIE standards.

Answering on the late notification from some countries, he said that OIE encourage s transparency on disease notification. The OIE Information Department's screen reports come from many sources and then the department is able to officially ask the country, which does not report outbreaks, on the current situation within its territories but such situation is less and less frequent.

5.5. Avian Flu as a public health threat (Dr. Darem Tabbaa)

Dr. Darem Tabbaa (Veterinary Medicine Faculty, Hama, Syria) presented the current situation of avian flu, which actually occurs in very particular conditions with close contact between birds and human.

The disease occurs in a country where the affected population ignores the basic hygienic rules to protect itself against this infection.

He underlined the interest of collaboration between public and animal health sectors.

He recommended the use of antiviral for the treatment of people working in an infected poultry farm only if they show flu symptoms and at the very early start of the disease.

The awareness and education has to be strengthened.

5.6. AI vaccination (presentation/discussion)

 ✓ Dr Gideon Bruckner presented the OIE standards and recommendations of avian influenza vaccination and the guidelines developed in collaboration with FAO.
A specific Ad Hoc group has also been created last year to work on this subject.
Guidelines are useful tool, but each situation is different from one country to another and the implementation of a vaccination strategy has to be adapted to each particular situation. The vaccination plan should be part of the contingency plan. He insisted on the importance of the monitoring of the vaccination.

Countries have to be very attentive on the quality of the vaccine they plan to buy. The respect of OIE standards on vaccines production gives them this assurance.

Considering preventive vaccination, countries have to be aware that vaccination protects against a particular strains of HPAI and not against all of them.

✓ Dr. Nicolai Vlassov (Federal Service for Veterinary and Phytosanitary Surveillance, Moscow) presented the situation in Russia where they have implemented vaccination, essentially in backyards and small size farms with an homologous H5N1 vaccine.

He highlighted also the necessity to adapt the vaccination strategy on the local epidemiological situation to establish a good monitoring system and to foreseen the end of the vaccination.

The production of vaccine is very technical and specific. Therefore, it is often better for a country, which does not have such industry, to buy the vaccine.

6. Regional Strategy

Dr. Ghazi Yehia (OIE Regional Representation) presented some particularities of the region regarding avian influenza.

He highlighted the importance of the concept of a regional approach on this question which could help countries to take their own decisions. In this context, FAO and OIE decided to create Regional Animal Health Centre (RAHC). An agreement has already been taken to create such centre for the Middle East region. The official approval will be signed during the 75 th general session of OIE in May 2007 and the centre will effectively start in June. Prof. Hassan Aidaros has been already recruited by FAO to be the regional coordinator of this centre, which will be located at the OIE Regional Representation premises in Beirut.

This regional approach should not replace the national strategies, adapted to local situation and the necessity for each country to implement SOP. It will assist countries in providing experts support.

He also stressed that authorities should not forget the circulation of strains of LPAI in their country and considers it in implementing their surveillance strategy.

Then, Prof. Hassan Aidaros presented the concept of the regional strategy based on countries collaboration to organized sustainable network and common programs. Such collaboration will develop standardization of HPAI diagnosis, surveillance and monitoring protocols, disease reporting, regional trade and HPAI emergency preparedness planning. The RAHC would be the coordinator of such strategy.

He precised also that this project will not provide fund for countries but it will give them assistance to implement their own strategy integrated in a regional cooperation.

7. Laboratory

The morning session of Tuesday 08 May was held at the Qatar National Lab. Dr. Kassem Al- Khatani (Director of Animal Resources Dept.) took the opportunity to present his department. Then Dr. Yusri Radwan presented the specific equipment and material selected for the Qatar AI emergency plan.

After, Dr. Nicolai Vlassov presented the organisation of sampling and lab diagnostic in Russia, he highlighted the fact that the avian influenza crisis has permitted to increase and strengthen the capacities of Russian lab, in term of equipment, technique and staff.

After those presentations, a visit to the virology and PCR units was organised. All participants and experts have been impressed by the quality of the lab in terms of organisation, equipment and staff. This was highlighted in the motion of thanks and justified the inclusion of a specific recommendation to encourage countries, which have the same lab capabilities, for establishing twinning with reference labs, according to the OIE standards.

8. Conclusion

- ✓ Participating countries were either infected ones or countries at risk.
- ✓ Most of the participating countries has developed and updated their Emergency Response Plans.
- ✓ More concerns expressed by the Member Countries were related to the application of a vaccination plan, effective surveillance and compensation.
- \checkmark More interest was expressed regarding the application of the international standards.
- ✓ The participation of the international agencies helped removing any confusion on common approaches that countries might have thought it was happening.
- ✓ More interest was noticed concerning the incident command system, simulation exercises and laboratory capabilities.
- ✓ The location and identification as well as the accreditation of a regional reference lab have gained more attention during this workshop.
- ✓ It was noticed that sub-regional approaches have already existed specifically at the Gulf States. Consequently, the development of a regional strategy was easily understandable and approved.
- ✓ Participants were unanimous to congratulate the Qatari administration for their warmfull hospitality and perfect organisation of the workshop. They thanked the personnel of the OIE Regional Representation for the Middle East for their efforts in being always present to support Member Countries in providing assistance and collaboration to achieve planned activities in the region.
- ✓ Special attention was referred to the excellent translation in Arabic / English which facilitate enormously the understanding and the discussion.

9. Recommendations

Cf. annex 1.

10. Programme

Cf. annex 2.

11. List of participants

Cf. annex 3.

Annex 1: Recommendations



OIE WORKSHOP ON AVINA INFLUENZA EMERGENCY CONTROL MANAGEMENT IN COLLABORATION WITH FAO 6-8 May 2007 Doha - QATAR

Original: English

Recommendation

CONSIDERING THAT

- 1. The H5N1 strain of highly pathogenic avian influenza (HPAI) virus has been diagnosed in both poultry and wild birds in many parts of the world including the Middle East region and continues to evolve;
- 2. HPAI has reoccurred in some areas despite considerable investments on the part of national Governments, international organisations and donors;
- 3. Human cases have been reported in some countries where HPAI has occurred and the risk of a human pandemic remains a threat;
- 4. The spread of the disease to other countries in the region remains a risk;
- 5. The transboundary nature of HPAI does not allow any country to effectively combat the disease on its own and that regional/international cooperation is crucial for the control and eventual eradication of the disease;
- 6. The ability of Veterinary Services to work with other Government institutions and the private sector for resources is key to provide a coordinated response;
- 7. There is ample experimental and field evidence that high quality vaccines applied under appropriate conditions can reduce clinical disease, increase resistance to infection, decrease viral excretion rate and transmission dynamics and in so doing, are able to decrease the probability of infection in poultry, other susceptible animal species and humans;
- 8. The sources of infection world-wide come from mostly uncontrolled movements of poultry and/or wild bird migrations;
- 9. The exact role of wild birds in the spread of H5N1 is not yet fully understood and needs to be further studied;

10. The OIE/FAO Regional Animal Health Centre created under the GF-TADS mechanism will soon be functional;

THE WORKSHOP ON AVIAN INFLUENZA EMERGENCY CONTROL MANAGEMENT RECOMMENDS THAT

- 1. All countries follow closely the global evolution of HPAI and reinforce their veterinary early detection and rapid response system.
- 2. Countries update or reinforce their national preparedness plans in line with international standards, guidelines and recommendations of the OIE prepared in collaboration with FAO and ensure their practical and effective implementations. These emergency plans should include updated legislation and regulations, standard operational procedures, a national chain of command and a mechanism to provide incentives for transparency and other support services to poultry owners.
- 3. Consideration should also be given to other notifiable avian influenza viruses circulating in the region to establish any potential relationship with H5N1 occurrence.
- 4. The establishment of an appropriate strategic stock of vaccines against HPAI complying with OIE standards on quality as well as relevant vaccination materials should be implemented.
- 5. Vaccination plans be an integral part of contingency and emergency preparedness plans but be only applied on the basis of a comprehensive analysis including a risk assessment of the country situation. Any vaccination plan should include an exit strategy depending on conditions prevailing at national or regional level. Blanket vaccination may be envisaged in countries or zones where HPAI has become endemic.
- 6. Disease information including viral isolates be sent to the OIE/FAO Reference Laboratories for comparison of viruses and further research work.
- 7. The establishment of an OIE Reference laboratory for Avian Influenza in the region should receive high priority and to this end the twining of applicant laboratories in the region with relevant OIE Reference Laboratory should be encouraged.
- 8. Training the staff of the national veterinary laboratories on diagnostic and surveillance techniques as well as molecular analysis should be strengthened.
- 9. Surveillance and research on the role of wild birds be reinforced through studies on wild birds/poultry interactions, analysis of cloacal and pharyngeal samples collected from sick/dead wild birds and the genetic tracing of H5N1 isolates from poultry and wild birds.
- 10. The scientific principles and actions described in the 'Incident Management System' be considered for adoption throughout the region to ensure a coordinated response.

- 11. The Regional OIE/FAO Animal Health Centre should provide further support to countries in the prevention and control of HPAI and other priority diseases particularly in the elaboration of a regional strategy and its adoption by countries of the region.
- 12. FAO continue its support on HPAI prevention and control in the region through its regular programmes and Trust Fund mechanisms.
- 13. OIE continue and reinforce its animal health governance support and training programmes on capacity building and animal disease management in the region.
- 14. The current recommendation be presented for adoption at the next OIE Regional Meeting for the Middle East as well as to donors that are likely to provide funding for the prevention and control of animal diseases in the region.

Annex 2: List of participants



OIE WORKSHOP ON AVINA INFLUENZA EMERGENCY CONTROL MANAGEMENT 6-8 May 2007 Doha - QATAR

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OIE WORKSHOP ON AVIAN INFLUENZA EMERGENCY CONTROL MANAGEMENT 6-8 May 2007

DOHA - QATAR

Programme

Sunday 6 May 2007

20:00	<u>Dinner</u>
16:00 – 17:00	Forum of discussions
15:30 – 16:00	Avian Influenza National Incident Management System (Dr Annelli)
14:30 – 15:30	The management and surveillance of Highly Pathogenic Avian Influenza Emergencies in the Middle East: (<i>Dr Marangon</i>)
13:00 – 14:30	Lunch
08:00- 09:00 09:00 - 10:00 10:00 - 10:30 10:30- 11:00 11:00 - 13.00	Registration Opening Ceremony (OIE to be represented by Dr Ghazi Yehia) Coffee break Summary of the World situation on HPAI (<i>Dr Dewan Sibartie</i>) Country reports (Selected countries)

Monday 7 May 2007

08:30 - 10:00	Proposal for a regional Middle East strategy for HPAI control <i>(Dr Aidaros / Dr Marangon and Dr Yehia)</i>
10:00 – 10:30	Coffee Break
10:30 – 11:30 11:30 – 12:30 12:30 – 14:00 14:00 – 17:00	Monitoring H5N1 in wildlife <i>(Dr Vincent Munster)</i> International standards on Avian Influenza control <i>(Dr Gideon Bruckner)</i> Lunch Laboratory capabilities: diagnostic, sampling and testing (<i>Dr Nicolai Vlasov /</i> <i>Dr Kusnitsov</i>). <i>(This will take place in the laboratory to be visited)</i>

20:00 Dinner

Tuesday 8 May 2007

8:30 – 9:30	Considerations for implementing vaccination strategies (Dr. Gideon Bruckner)
9:30 – 9:50	Avian influenza as a public health threat (Dr D. Tabaa)
10:50 – 10:10	(FAO)
10:10 – 10:40	Coffee Break
10:40 – 11:40	Conclusions and Recommendations (Dr Dewan Sibartie)
12:00	Lunch