



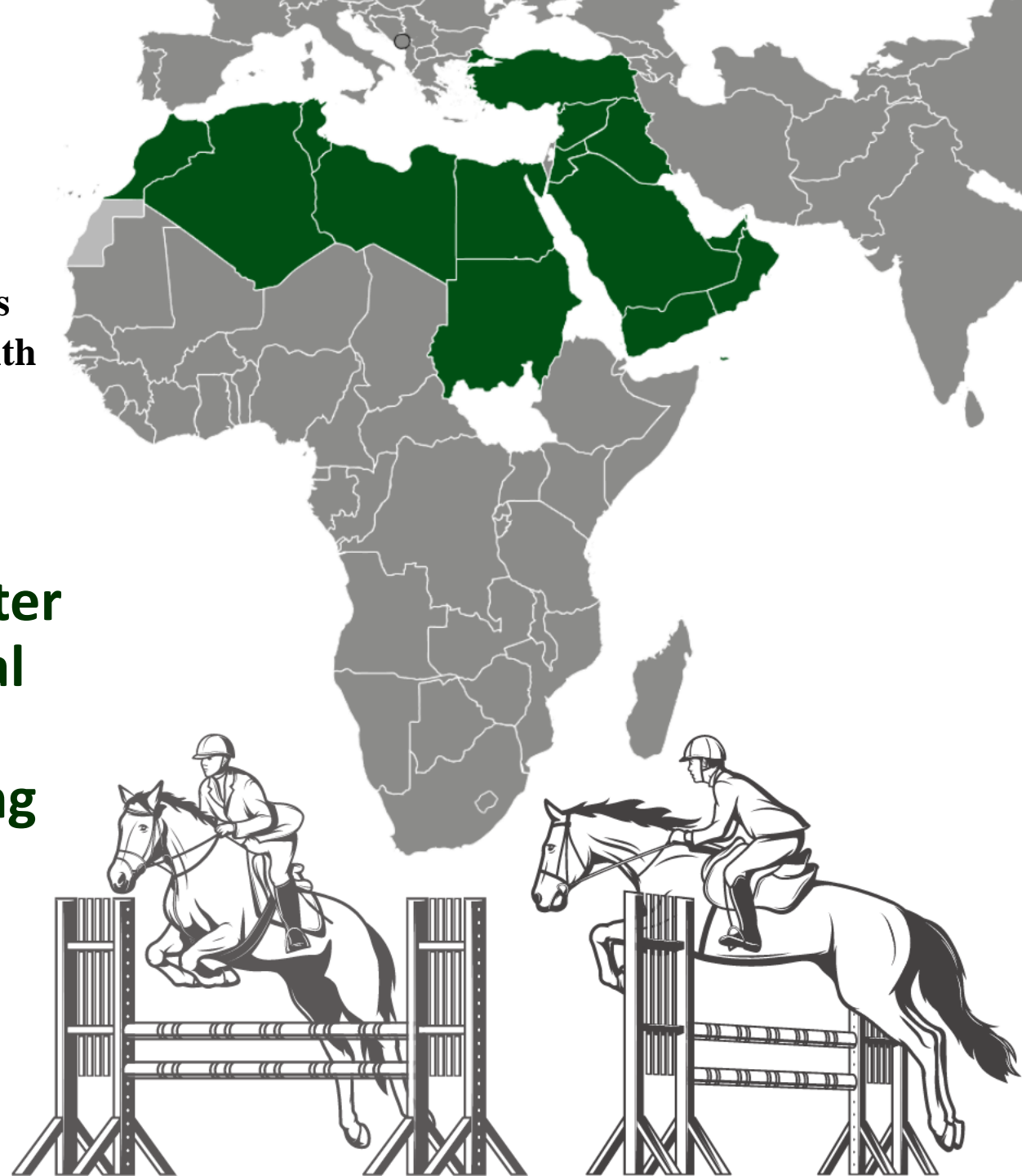
WORLD ORGANISATION FOR ANIMAL HEALTH
Protecting animals, preserving our future

OIE 3rd Regional Webinar on:

OIE international standards and tools to facilitate international movement of (competition) horses, procedures supporting the publication of self-declarations of animal health status and the official recognition of African horse sickness (AHS) free status

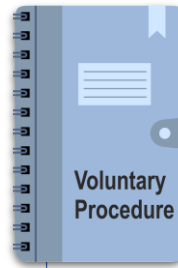
General Requirements of the AHS Chapter of the *Terrestrial Code*, SOPs for official recognition of AHS Free Status and common shortcomings identified during the evaluation of applications

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OIE Status Department

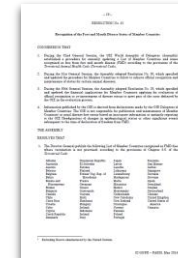




Procedure for official recognition of a disease-free status



A voluntary procedure developed on Member Countries' request to facilitate trade



Resolutions adopted by the World Assembly



SOPs and rules & guidelines



Updated when relevant



Available on line at the OIE website



Status for FMD, CBPP, AHS, PPR, CSF and BSE risk

Control programme for FMD, CBPP, PPR and dog-mediated rabies

Official Disease Status

disease.status@oie.int



Submission of an application

The dossier:

- Compliance with the *Terrestrial Code*
- Complete the questionnaire – Article 1.7 (AHS) to 1.12.
- 50 pages + appendices (properly cross-referenced) + executive summary
- Digitalised map if relevant (zoning approach)
- Proof of payment
- Contact details of technical staff

[*Terrestrial Animal Health Code*](#)



Voluntary applications - OIE Member Countries

OIE Headquarters



Preliminary screening

OIE ad hoc Groups



Reports formulating recommendations for the Scientific Commission

OIE Scientific Commission for Animal Diseases



Assessment of the dossier, final conclusion and recommendations (including the need for a mission)

OIE Director General

Communication of the outcome to the applicant Member



Commur



Posit



Assess
the Scie



Maintenance...

as important as recognition !!!



The AHS questionnaire

Chapter 12.1.

“AHS Code Chapter”

Set the requirements for an AHS free status



Chapter 1.7.

“AHS questionnaire”

To document compliance with the requirements of Chapter 12.1.

All applications for an AHS free status must follow the « AHS questionnaire »

[Terrestrial Animal Health Code](#)



The role of the questionnaire

- Questionnaire to provides guidance for Members and experts
- To give more transparency to the evaluation process
- To standardise the evaluation among countries
- Evidence to demonstrate compliance with the requirements a country or a zone free from of Chapter 12.1. of the *Terrestrial Code*
- Standard Operating procedure to handle this process in an objective and transparent manner

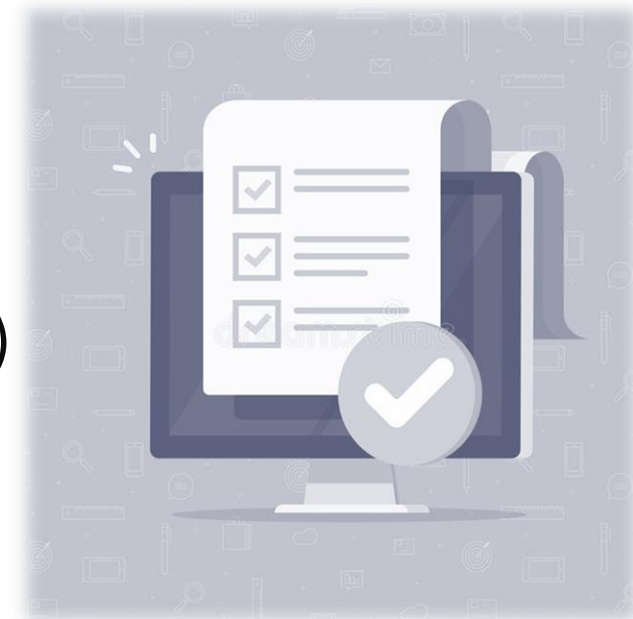




AHS questionnaire layout

1. Introduction

- Geographical factors
 - Relevant to AHS introduction and spread
 - Countries sharing common borders, boundaries of country/zone, protection zone if clearly applied
 - Digitalised, geo-referenced map (**MUST** for zonal freedom approach!!)
- Population of domestic equids
 - Distribution
 - All Equine sectors (Competition horses and also **Working equids!**)
- Wild equids





Introduction: Common shortcomings

/!\ Equids ≠ horses:

- Lack of information on working equids (donkeys, mules, etc.)
- Lack on information on wildlife (zebras, captive wild, feral)



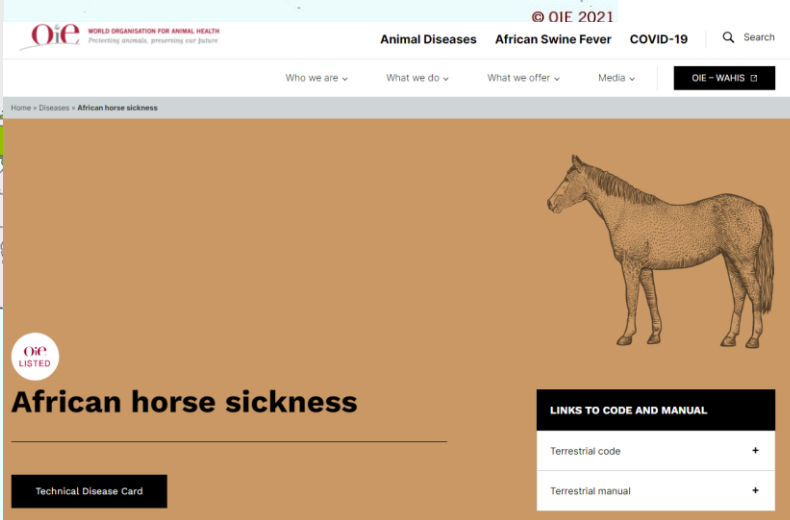


Introduction: Common shortcomings

- Unclear statement/ interpretation of the status of neighbouring countries

OIE Members' official African horse sickness status map

Last update November 2021



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Animal Diseases African Swine Fever COVID-19 Search

Who we are What we do What we offer Media OIE - WAHIS

Home Diseases African horse sickness

African horse sickness

Technical Disease Card

LINKS TO CODE AND MANUAL

Terrestrial code	+
Terrestrial manual	+

The [OIE dedicated webpage for official disease status](#) displays a map and a list of Members with AHS free status officially recognised by the OIE (in green) according to Article 12.1.2. of the *Terrestrial Code*

The countries/territories in grey have not been officially recognised as free from AHS, thus, they are considered as with an AHS undetermined status.



2. Veterinary system

- Legislation
 - In relation to AHS (notifiability, AHS vaccination prohibition, implementation of eradication campaigns)
- *Veterinary Services*
 - Capability (provisions of Ch. 3.1. and 3.2. of *Terrestrial Code*)
 - How to supervise and control all AHS-related activities
 - Early warning system to rapidly detect any incursion of AHS virus
- Role of different categories of stakeholders
 - **AHS surveillance** and control
 - Training and awareness programmes on AHS
- Animal identification system, movement control, traceability (of all equids!)





Veterinary System: Common shortcomings

- Lack of clarity: provide a concise summary of the important points on legislation, **relevant for an AHS free status**, with cross-reference to Annexes
- Lack of specific information on AHS awareness activities (target groups, material, frequency)
- Lack of sensitisation programmes for prompt recognition and reporting of AHS suspected cases
- Lack of description on identification system and traceability for all equids (i.e. only voluntary or only for competition horses; only proportion of holdings registered; threshold for registration)





3. AHS Eradication

Never occurred / not occurred within the past 25 years:

- Application based on **historical freedom?**

Last occurrence within the past 25 years:

- Strategy for control and eradication
- Vaccines and vaccination

Prohibition of vaccination





AHS eradication: Common shortcomings

- Lack of consistency with OIE-WAHIS data (disease situation and control measures)
- Type for freedom for which the country is applying for is not specified
- Poor or unclear system of reporting disease; whether compensation is given or not
- Lack of information on when vaccination has been prohibited and how the prohibition has been enforced and monitored (+ regulatory instrument)



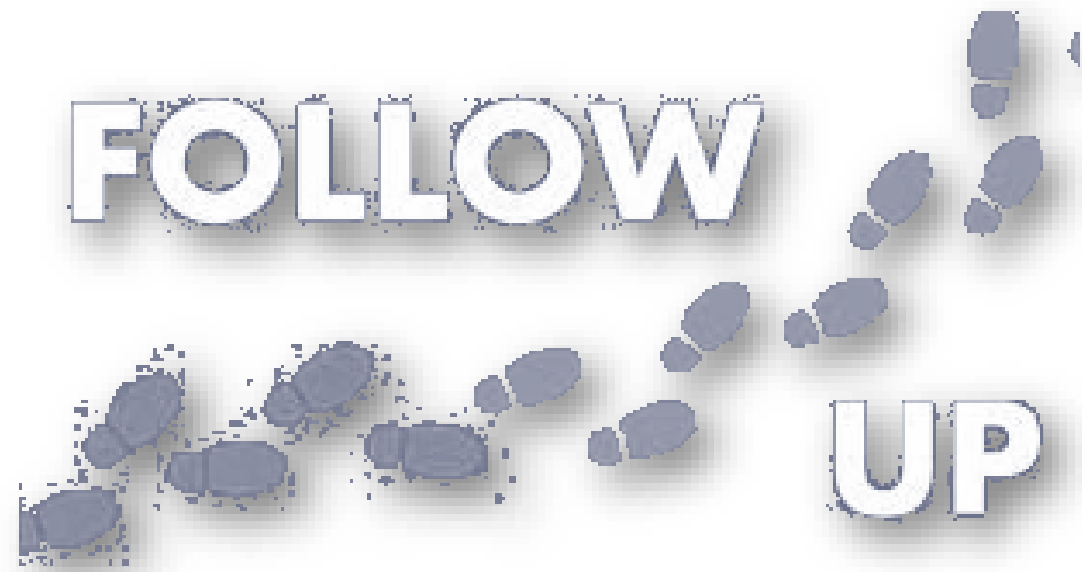
4. AHS Diagnosis

Laboratory diagnosis for AHS in the country

- List of laboratories approved by Competent Authority
- Type of tests undertaken
- Accreditation, quality management systems
- Regular submission of samples?
- Inter-laboratory validations tests (ring trials)

International laboratory diagnosis for AHS

- Name(s)
- Arrangements in place
- Logistics for shipping samples
- Timeframe for reporting results





AHS Diagnosis : Common shortcomings

- Information should focus on **AHS** diagnosis
- Use of tests that are not recommended in the *OIE Terrestrial Manual*
- For AHS laboratory in the country:
 - Lack of information on participation in inter-laboratory proficiency testing and results
- For international AHS laboratory:
 - Lack of information on existing arrangements/agreements with competent laboratory/OIE Reference Laboratory from abroad





5. AHS Surveillance

Clinical surveillance

- Criteria for raising an AHS suspicion
- Procedure to notify (by whom and to whom)
- Penalties for failure of reporting
- Number of suspicions reported, testing methods, differential diagnosis
- Surveillance in working equids and captive wild



Other type of surveillance (serological, virological, sentinel, vector surveillance)

- Official status of neighboring countries
- Justification of the surveillance design (risk areas)
- Detailed results
- Risk assessments



AHS Surveillance : Common shortcomings

- Lack of information demonstrating that the clinical surveillance implemented is sensitive over all the territory (suspicions reported, awareness, trainings)
- Lack of demonstration of an effective detection system for all equids, including wildlife (quantitative data)
- Lack of follow up of AHS clinical suspicions or serological findings
- Lack of consideration of the official AHS status of neighboring countries/zones
- Lack of detail on the surveillance design
 - **Justification of the design chosen: risks identified, vector distribution**
 - Number and type of samples, sample selection, etc



Historical freedom ≠ no surveillance requirements (i.e. passive surveillance, surveillance along the borders with countries with undetermined status, etc.)



6. AHS Prevention

Coordination with neighboring countries

An OIE Member should not be penalised due to the situation in a neighbouring country...

However,

Risk assessment and implementation of appropriate measures should be in place accordingly



Import control procedures

- Ports, airports and land crossings (map)
- Import requirements from AHS free countries and infected (or with undetermined status) countries
- Regulations (countries from which imports are authorized)
- Actions taken on detection of illegal imports
- Statistics on imports



AHS Prevention: Common shortcomings

- Lack of information on import requirements for **all relevant commodities**: (all equids (not only horses), semen, oocytes, embryos, equine derived (by-)products, veterinary medicinal products in recent years
- Lack of **detailed AHS specific** import requirements to allow assessment of compliance with recommendations of Chapter 12.1.
- Lack of consideration of the AHS **official** status of exporting countries
- Lack of vector-protected facilities if imports from infected countries



7. AHS-Control measures and contingency planning

Procedures regarding suspected or confirmed cases of AHS

- Details of AHS serological findings
- Procedures to follow up AHS suspicions

Steps that would be taken in the event of an AHS outbreak

- Sampling and testing procedures
- Control measures
- Procedures used to confirm successful control
- Compensation





Control measures and Contingency planning: Common shortcomings

- Lack of specific measures for AHS and of contingency plan specifically for AHS
- Lack of supporting documentation (Penalties for non-compliance with control measures)
- Lack of supporting regulatory framework
- Lack of consistency with data reported through the [OIE-WAHIS](#)
- No vector-protection during transport of imported horses and at post-entry quarantine facilities when importing equids from countries not officially recognised by the OIE as free from AHS



Conclusion: Most common shortcomings identified during the analyses of the dossiers

- Lack of supporting documentation or documentation to substantiate the statements made in the dossier
- The dossier is not fully compliant with the format of the questionnaire-No information provided on all items of the questionnaire and information not directly relevant to equids or to AHS
- The requirements of the *Terrestrial Code* are not properly addressed
- Significant discrepancies in OIE-WAHIS data and the information provided in the dossier
- No answers from the countries to the questions raised by the *ad hoc group*
- Critical information essential to the interpretation of the dossier is not translated in one of the OIE official languages
- Insufficient description of the situation regarding neighboring countries or infected zones

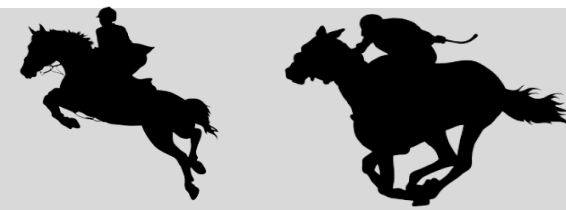


To prepare a robust application for an AHS free status

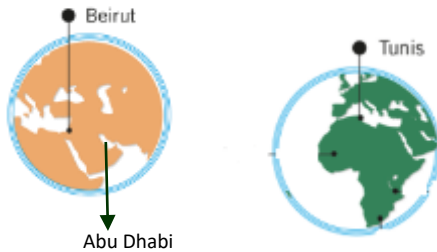


- A dedicated team, time and funds available
- Involve all relevant services & stakeholders
- Put yourself in the experts' shoes
- Provide documented evidence (not only statements)
- Be CLEAR and CONCISE

Provide evidence to substantiate any statement made in an application for official recognition of disease freedom



- OIE Regional Office in Beirut



Dedicated OIE regional workshops on Status recognition

Contact Status Dept
disease.status@oie.int

Your experienced neighbouring countries

You are not alone





Thanks for your attention
Questions?

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