

APPLICATIONS TO DIE FOR RECOGNITION OF A COUNTRY OR ZONE FREE FROM RINDERPEST



GREP GUIDELINES 1

Introduction - OIE accreditation stages

A country historically free from rinderpest may be accredited as free from rinderpest if it complies with conditions outlined in Chapter 3.8.1 of the OIE Terrestrial Animal Health Code which include absence of the disease for at least 25 years.

In the case of 10 years having passed without rinderpest having been detected and without recourse to rinderpest vaccination, a country may apply for recognition of *Freedom from Infection* provided that it can present a convincing case that rinderpest virus has been absent from its territory for at least 10 years.

In the case of five years having passed without rinderpest having been detected and without recourse to rinderpest vaccination, a country may apply for recognition of *Freedom from Disease* provided that it can present a convincing case that rinderpest disease has been absent from its territory for at least five years.

After two years without detection of rinderpest and with assurance that rinderpest vaccine will no longer be applied to livestock, a country is entitled to write to OIE making a *Declaration of Provisional Freedom from Rinderpest*.

Provisionally Free and Disease free zones must be surrounded by unvaccinated surveillance zones separating them from Infected zones. Due account must be taken of the rinderpest status of neighbouring countries.

The timing of applications is an important consideration if opportunities are not to be missed. Declarations of Provisional Freedom can be made at any time and will be published quickly. Dossiers submitted for recognition of *Freedom from Disease* and *Freedom from Infection* need to be received by OIE before September in any year for consideration by an *Ad Hoc* Rinderpest Group. The considerations of the *Ad Hoc* Group are then passed to the Scientific Commission. Successful applications are then circulated to countries (the International Committee) for comments before announcement at the OIE General Assembly in May each year.

Applications should be compiled into single document dossiers presented in hard copy and on compact disc, ideally in the form of a pdf file. Applications by electronic mail and facsimile transmission can also be made.

Once accreditation of *Freedom from Infection* is granted countries need to reaffirm to OIE yearly that they remain free from rinderpest or the status will lapse.

Lists of countries of differing status are published annually at the General Assembly and are available from the OIE web site.

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¹ These guidelines are based on experience in interpreting the requirements of the OIE; they do not constitute official OIE guidance nor can they be taken as a definitive guide.

Declarations, Applications and Dossier Preparation

In compliance with chapter 2.3.14 of the *Terrestrial Animal Health Code*:

1. A country or zone previously infected with rinderpest in the recent past may declare itself to be *Provisionally Free from Rinderpest* if it has not detected clinical evidence of rinderpest for at least two years and can present convincing evidence for the absence of rinderpest virus circulation, provided that the country has operated and continues to maintain an adequate animal disease surveillance system.

The National Veterinary Authority of the country should confirm the following.

Essential:

- The National Veterinary Authority has ensured that the distribution and use of rinderpest vaccine in livestock is effectively prohibited.
- The National Veterinary Authority has recalled and ensured the destruction or safe storage of rinderpest vaccine already issued.
- The National Veterinary Authority has issued orders restricting the importation of rinderpest vaccine into, or the further manufacture of rinderpest vaccine within, the territory under its jurisdiction.
- Rinderpest is a notifiable disease in the country.
- There is a disease surveillance system in place which would be capable of detecting rinderpest were it to be present; ideally there should be a record of regular and prompt animal disease reporting demonstrating that the rinderpest situation throughout the country has been constantly monitored.
- All outbreaks of disease with a clinical resemblance to rinderpest have been thoroughly investigated and subjected to appropriate laboratory testing (Refer to the OIE Terrestrial Manual of Diagnostic Tests and Vaccines).
- There has been no disease outbreak confirmed as rinderpest within the previous two years

Desirable but not essential:

- The country has formulated and applies a national animal disease emergency preparedness plan (contingency plan).
- Countries are encouraged to send samples of rinderpest virus isolates to an OIE Reference Laboratory for Rinderpest for characterisation to assist with genetic and biological characterisation of rinderpest virus populations.
- 2. Subsequently, after three years of being able to affirm that the conditions continue to apply (inter alia no rinderpest and no vaccination), an application may be made to OIE for recognition of a status of Freedom from Disease (on a zonal or national basis). The application in the form of a dossier of relevant information should indicate clearly that rinderpest disease has not occurred in the relevant zone or country since at least two years prior to the Declaration of Provisional Freedom.
- 3. The final stage in the accreditation process consists of an application to OIE for recognition of the status of *Freedom from Infection* (only applicable on a national basis). The dossier of information submitted in support of the application should indicate clearly that rinderpest has not occurred in the relevant country or zone since at least two years prior to the Declaration of Provisional Freedom and that circulation of rinderpest virus has ceased. The application requires two years of randomised serosurveillance to have been conducted according to the published OIE Guidelines (Appendix 3.8.2 of the Code).

Credible supporting evidence must accompany the country's application dossiers.

The country will be included in the list of rinderpest free countries only after the submitted evidence has been evaluated and approved by the OIE.

It is emphasised that superfluous detail does not enhance the prospects for favourable evaluation of application dossiers.

Suggested Layout of the Applications (Dossiers)

It is suggested that the following general approach be adopted in the dossier to accompany the **Application Letter**:

1. Title

The title of the dossier should indicate clearly the name of the country concerned and whether the application is for recognition of *Freedom from Disease* or *Freedom from Infection* and in the former case whether it applies to the whole country or to specific zone(s) within the country. In the case where a is making re-application for recognition of freedom that was lost as a result of an *outbreak*, that fact should also be indicated in the title.

2. Summary of the application

This should be brief and present the major points and issues contained in the body of the application in a concise manner. Data irrelevant to the major issues should be avoided in the summary.

3. Basic geography and social organisation

A brief description of topography and administrative sub-divisions accompanied by maps.

4. Livestock production systems in the country/zone, including management of livestock movement

This section need not be detailed but should place rinderpest control in the context of livestock production in the country concerned. Livestock movement and its management, especially where traditional cross-border transhumance occurs, should be adequately explained. Coping with the risk of re-incursion of rinderpest through transboundary movement of livestock or wildlife is an important issue and should be specifically addressed.

5. Organization and functioning of the *Veterinary Administration*

An overview of how the public and private veterinary services of the country operate and are integrated should be provided, including the role of paraveterinary professionals and other ancillary workers. Compliance with the provisions for Evaluation of Veterinary Services (Chapter 1.3.3 of the OIE Terrestrial Animal Health Code) should be indicated.

6. Animal disease reporting

Reporting/notification by the *Veterinary Administration* to the OIE should be described. This needs to provide evidence of accurate and prompt reporting to the OIE in accordance with all provisions of chapter 1.1.2 of the OIE Terrestrial Animal Health Code.

7. History of rinderpest and its eradication in the country

3.1 History

This is best provided by a chronological outline of major events such as timing and incidence of former outbreaks and control/eradication milestones, e.g. start and end of former outbreaks, outlines of control strategies and especially when, for how long and to how many animals vaccine was administered. When vaccination ceased needs to be clearly described. Epidemiological analysis of historical data would provide useful support for the application.

3.2 Present strategy against rinderpest with an emphasis on surveillance strategy

The dossier needs to outline the present strategy employed against rinderpest in the country, supported ideally by official policy. For applications for zonal freedom the situation with regard to rinderpest in the whole of that country's territory should be covered. Ideally, documentary support for such strategy and policy should be provided in an appendix. How this approach fits into the regional context of rinderpest control/eradication also needs to be explained.

Convincing evidence that the strategy/policy in place has resulted in cessation of the circulation of rinderpest virus for at least two years is an essential requirement of any application. Furthermore, the surveillance strategy needs to be shown to be sensitive enough to have detected rinderpest disease or infection were it to have been present.

8. Evidence for freedom of the country or zone(s)

Surveillance data can accrue from a portfolio of surveillance methods, including:

- (a) a routine national animal disease detection and reporting system supported by evidence of follow-up activities where rinderpest or suspect rinderpest cases have been identified.
- (b) an emergency disease reporting system
- (c) active searching for and thorough investigation of epidemiologically significant events (e.g. 'stomatitis-enteritis syndrome') raising suspicion of rinderpest (which may include participatory disease searching, combined with follow-up and investigation)
- (d) risk-focussed serosurveillance to examine samples from areas determined to be at high risk of rinderpest occurrence to detect serological evidence of possible virus transmission
- (e) randomised serosurveys to examine statistically selected samples from relevant strata within the susceptible populations to detect serological evidence of possible virus transmission
- (f) wildlife surveillance where significant populations of susceptible wildlife species exist

Ideally, random serosurveillance needs to show that if infection had occurred in more than 1% of herds or sampling units, infection would have been detected if, within those sampling units, 20% or more of individuals became infected. Confidence levels of 95% should be achieved.

In cases where a targeted (focussed) approach has been employed, the surveillance must be shown to have attained a comparable level of sensitivity. If more than one strategy for surveillance has been employed that needs to be explained in detail.

It is vital to prove that the surveillance conducted has identified cases of syndromes, including stomatitis-enteritis, that require to be differentiated from rinderpest and that such cases/outbreaks have been followed up promptly and adequately, including laboratory examination of appropriate diagnostic material. These cases are an important part of demonstrating that rinderpest has not occurred in the applicant country or zone for the requisite period.

This collective data needs to convey convincing evidence for freedom from rinderpest disease/infection.

Other aspects that need to be addressed are:

- Emergency preparedness plans including arrangements for emergency vaccine supply should rinderpest re-appear (the plan, or a summary of its provisions, should ideally be submitted as an appendix);
- Provisions and mechanisms to ensure that rinderpest vaccines have been withdrawn from general use in the field and that any remaining stocks are under the control of the National Veterinary Authority.
- Legal provisions for the control of rinderpest (these should be submitted as an appendix).

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