

Contents

Rift Valley fever in South Africa	11
Rinderpest in Chad: the Delegate declares a zone "provisionally free" from this disease	12
Classical swine fever in Argentina: follow-up report	13

RIFT VALLEY FEVER IN SOUTH AFRICA

(Date of last previously reported outbreak: February 1991).

EMERGENCY REPORT

Text of a fax received on 29 January 1999 from Dr Paul P. Bosman, Chief Director of Veterinary Services and Livestock Improvement, Pretoria:

Nature of diagnosis: clinical, post-mortem and laboratory.

Date of initial detection of animal health incident: 26 January 1999.

Estimated date of first infection: 18 January 1999.

<i>Location</i>	<i>No. of outbreaks</i>
Skukuza, in Kruger National Park (Mpumalanga province) 24° 57' 39" S - 31° 35' 22" E	1

Description of affected population: 30 pregnant buffalo cows being held in 'bomas' (fenced enclosures) for a "disease free calf breeding project".

Diagnosis:

- A. Clinical signs:*** six of the cows had late-term abortions over the past seven days. Foetuses weighed between 24 and 35 kg and had been dead for 12 to 24 hours in utero.
- B. Laboratory where diagnosis was made:*** Department of Pathology, Faculty of Veterinary Science, University of Pretoria, Onderstepoort.
- B. Diagnostic tests used:*** histopathology and immunoperoxidase staining. Post-mortem examination revealed diffuse hepatic necrosis plus varying amounts of sero-sanguinous fluids in all body cavities.

Epidemiology:

- A. Source of agent / origin of infection:*** unknown.
- B. Mode of spread:*** insect-borne and direct contact.

Control measures during reporting period: quarantine of infected properties and vaccination of susceptible domestic stock.

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RINDERPEST IN CHAD

The Delegate declares a zone "provisionally free" from this disease

Translation of a communication received on 25 January 1999 from Dr Said Brahim, Director of Animal Production and Resources, Ministry of Animal Production, NDjamena:

No cases of rinderpest have been recorded in Chad since 1984. However, campaigns for the systematic vaccination of cattle have been carried out annually since 1983. They are still being continued, but in a limited part of the country.

Since the 1993-1994 campaigns, a serological survey has been carried out after each vaccination campaign in order to evaluate the immune status of the animals. The sero-surveillance results have indicated an acceptable level of sero-protection.

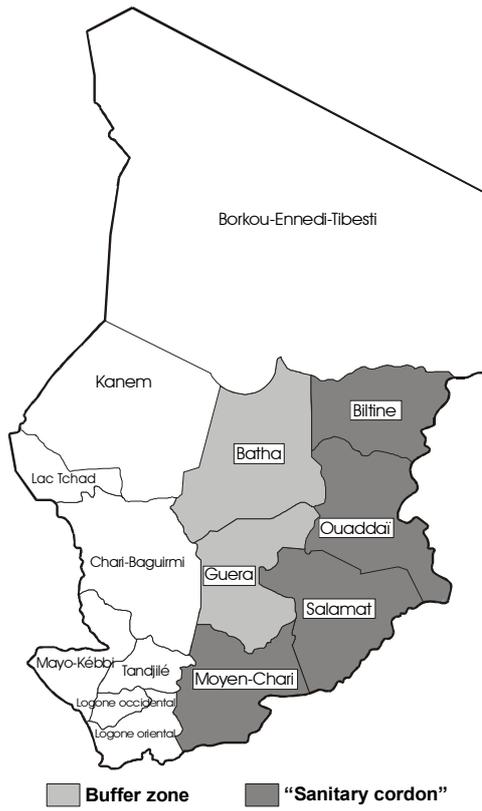
An epidemiosurveillance network has been operating since June 1995. The network, which began with ten observation posts, now has 47 posts suitably equipped for active surveillance of existing diseases as well as diseases that are exotic for Chad. After a (positive) external evaluation by a CNEVA⁽¹⁾ expert, the epidemiosurveillance network is now focussing its activities on surveillance for rinderpest in the country's 143 veterinarian stations.

On the strength of the situation outlined above, namely:

- the absence of any clinical cases of rinderpest for more than a decade,
- a sero-protection level of about 80% in the west of the country,
- a functional and reliable epidemiosurveillance and epidemiovigilance network system,

the Department of Animal Production has made the decision to set up zones within the framework of rinderpest prevention. Chad is thus divided into three zones:

- 1) a "sanitary cordon" in the east, which includes four prefectures (Biltine, Ouaddai, Salamat and Moyen-Chari);
- 2) a "buffer" zone, covering the two prefectures in the centre of the country (Batha and Guéra);
- 3) a zone "outside the cordon" including all the western part of the country and consisting of eight prefectures (Borkou-Ennedi-Tibesti, Kanem, Lac Tchad, Chari-Baguirmi, Mayo-Kébbi, the two Logones and Tandjilé).



In pursuance of order No. 015/ME/98, vaccination against rinderpest was discontinued in the zone outside the cordon on 1 June 1998. Vaccination remains selective in the buffer zone (it only applies to animals less than two years old) and compulsory in the sanitary cordon.

At the border between the vaccinated zone and the non-vaccinated zone, the veterinarian stations, with the support of mobile teams, are responsible for clinical surveillance for rinderpest in order to prevent suspect animals from entering the zone where vaccination is no longer practised.

In accordance with the OIE declaration procedure, and given the geographic and epidemiological position of Chad, it is appropriate for the zoning principle to be applied in this country and the rinderpest situation evaluated in the different zones. We therefore declare the zone outside the cordon "provisionally rinderpest-free".

(1) CNEVA: National Centre for Veterinary and Food Studies, France.

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CLASSICAL SWINE FEVER IN ARGENTINA Follow-up report

FOLLOW-UP REPORT No. 4

Translation of a fax received on 3 February 1999 from Dr Luis Osvaldo Barcos, President of the National Service of Agrifood Health and Quality (SENASA), Ministry of Economy, Public Works and Services, Buenos Aires:

End of previous report period: 13 January 1999 (see *Disease Information*, **12** [1], 2, dated 15 January 1999).

End of this report period: 28 January 1999.

New outbreaks:

Location	No. of outbreaks
Totoras (province of Santa Fe)	1
Valdes (province of Buenos Aires)	1

Description of affected population in the new outbreaks: fattening pigs (weighing more than 40 kg).

Total number of animals in the new outbreaks:

<i>susceptible</i>	<i>cases</i>	<i>deaths</i>	<i>destroyed</i>	<i>slaughtered</i>
1,700	49	29	0	0

Diagnosis:

- A. Clinical signs:** in the outbreak in Totoras, the affected pigs showed respiratory signs and sudden death; in the outbreak in Valdes, they showed signs of general weakness, anorexia and dyspnea.
- B. Laboratory where diagnosis was made:** SENASA Central Directorate of Laboratory.
- C. Diagnostic tests used:** direct and indirect immunofluorescence.
- D. Causal agent:** has not been isolated.

Epidemiology:

- A. Source of agent / origin of infection:** unknown.
- B. Mode of spread:** unknown.

Control measures during reporting period: treatment, vaccination, quarantine of the affected establishments and control programme for the whole country.

The designations employed and the presentation of material in this publication do not imply the expression of any opinion whatsoever by the Central Bureau of the Office International des Epizooties concerning the legal status of any country or territory mentioned, or its authorities, or concerning the delineation of its frontiers or boundaries.

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