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NEWCASTLE DISEASE IN AUSTRIA The Delegate declares part of the country free from this disease

Text of a fax received on 12 March 1999 from Dr Peter Weber, Chief Veterinary Officer, Ministry of Health, Sports and Consumer Protection, Vienna:

End of this report period: 9 March 1999.

Newcastle disease in Austria only occurs in the Federal Districts of Lower Austria (see *Disease Information*, **11** [21], 78, dated 29 May 1998) and Upper Austria (see *Bulletin*, **110** [5], 430).

All the other Federal Districts (Burgenland, Kärnten, Steiermark, Salzburg, Tirol, Vorarlberg and Vienna) are free from Newcastle disease.

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FOOT AND MOUTH DISEASE IN MOROCCO Follow-up report

FOLLOW-UP REPORT NO. 2

Translation of extracts from a fax received on 15 March 1999 from Dr Abdelhaq Tber, Director of Animal Production and Veterinary Services, Ministry of Agriculture, Rural Development and Sea Fisheries, Rabat:

End of previous report period: 8 March 1999 (see *Disease Information*, **12** [9], 25, dated 12 March 1999).

End of this report period: 15 March 1999.

New outbreaks:

Location	No. of outbreaks
Oujda (in the eastern part of the country)	1

Description of affected population in the new outbreak: beef cattle herd. The affected animals are young bulls aged 18 to 24 months.

Total number of animals in the new outbreak:

<i>species</i>	<i>susceptible</i>	<i>cases</i>	<i>deaths</i>	<i>destroyed</i>	<i>slaughtered</i>
bov	6	2	0	2	4

Disease situation on 15 March 1999

Translation of extracts from an e-mail message received on 16 March 1999 from Dr Abdelhaq Tber:

Total number of outbreaks since the appearance of the disease: eight outbreaks have been reported in eight cowsheds totalling 113 cattle, 14 of which showed clinical signs of foot and mouth disease (FMD).

Description of the animals infected in these outbreaks: only cattle were affected; animals of other susceptible species did not show any characteristic clinical signs of the disease. All of the infected animals were young bulls aged between 12 and 24 months (with the exception of one cow and one heifer), were of Black Pied breed and were otherwise in good condition.

Diagnosis:

- A. Laboratory where diagnosis was made:** the causal virus was isolated by the national laboratory for biological production (Biopharma) in ulcers taken from suspect animals. Confirmation was also provided by the OIE World Reference Laboratory for FMD (Pirbright, United Kingdom).
- B. Diagnostic tests used:** the virus was isolated on cell cultures and a cytopathogenic effect typical of the FMD virus was demonstrated. Serotyping was carried out using the seroneutralisation technique.
- C. Causal agent:** FMD virus type O. Subtyping investigations are in progress.

Epidemiology:

- A. Source of agent / origin of infection:** smuggling of infected animals.
- B. Mode of spread:**

The first cases were reported on 25 February 1999 in the province of Oujda, in the centre of the city, on the premises of a wholesale butcher one kilometre from the municipal abattoir.

On 27 February, two further outbreaks occurred in cowsheds belonging to wholesale butchers also situated in the centre of Oujda.

The disease is currently restricted to the centre of Oujda, where five other outbreaks have been reported. The most recent outbreak was detected on 11 March 1999.

The situation remains under control.

Control measures: a national committee and provincial committees for FMD surveillance have been set up to closely monitor developments in the health situation and implement appropriate control measures. Measures provided for under the FMD emergency intervention plan have been implemented and remain in force.

A. Sanitary measures:

- Definition of the boundary of the infected area by government decree.
- Restrictions on animal movements within the infected area, closure of cattle markets and a ban on the rounding up of susceptible animals since 1 March 1999.
- Destruction of affected animals and slaughter of in-contact cattle, with disinfection of the cowsheds concerned and incineration of manure.
- Immediate slaughter and on-site burial of any susceptible animals intercepted near the borders that might have been illegally imported. The total number of animals intercepted and destroyed since 25 February 1999 is 110 (all of which were sheep).

B. Medical measures:

Given the fact that the cattle were subject to annual vaccination against FMD type O from 1992 until December 1997 and have a satisfactory level of immunity, and that the Directorate responsible for livestock production has a standby stock (vaccine of serotype O Manisa), a vaccination campaign was immediately launched in the provinces bordering Algeria (Oujda, Berkane, Figuig, Jerrada, Er Rachidia and Ouarzazate). This vaccination programme was also extended to the buffer zone consisting of the provinces adjoining those mentioned above (Taza, Taounate, Fès, Al Hoceima, Boulemane and Nador).

To date, around 70,000 cattle have been vaccinated. Extension of the vaccination programme to the entire cattle population is currently being planned.

C. Epidemiological surveillance:

- Serological survey:
A serological study conducted on a representative sample of cattle following the first outbreaks, using the seroneutralisation technique on cell cultures, revealed that on average 60% of bovines still possessed a sufficient level of antibodies to protect them against infection by the FMD virus (titres > 1.9 log DN₅₀).
In the light of the results, the vaccination campaign was launched in regions where low levels of protective antibodies were detected and it will also cover young animals not previously vaccinated.
- Exploratory investigations and health surveillance of susceptible species:
 - Reinforcement of the epidemiological surveillance system for FMD throughout the country.
 - Exploratory surveys on a large scale in all of the wilayas and provinces in the Kingdom. The number of animals tested to date totals 25% of the national animal population susceptible to FMD.
- Information and public awareness campaigns:
 - Press releases to inform the general public on the situation regarding the epizootic and its development.
 - Raising awareness amongst livestock producers of the economic impact of the disease and the importance of taking part in the FMD vaccination campaign currently being generalised.

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RINDERPEST IN KENYA

The Delegate declares a zone of the country "provisionally free" from this disease

Text of a communication received on 16 March 1999 from Dr R.S. Kimanzi, Director of Veterinary Services, Ministry of Agriculture, Livestock Development and Marketing, Nairobi:

End of this report period: 24 February 1999.

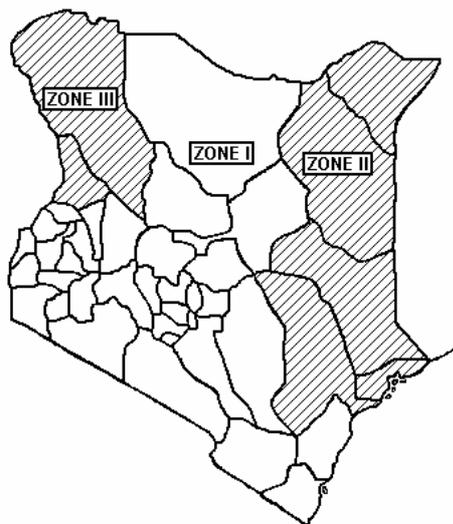
Kenya has experienced two outbreaks of rinderpest in wildlife; the first in Tsavo National Park in 1995 (see *Disease Information*, 8 [3], 10, dated 20 January 1995) and the other in 1996 in Nairobi National Park (see *Disease Information*, 9 [45], 173, dated 29 November 1996). The country received financial assistance from the European Union and the FAO⁽¹⁾ to control the disease and carry out disease surveillance through an emergency programme.

The planned programme included two rounds of mass vaccination in 29 selected districts at risk from rinderpest, followed by seromonitoring after each round of vaccination and mid-term external assessment by consultants recruited by OAU-IBAR⁽²⁾.

We vaccinated 3.5 million head of cattle during the first round of mass vaccination and attained an average herd antibody prevalence of 5.8%. In the second round, 3.7 million head of cattle were vaccinated and attained an average herd antibody prevalence of 65.38%.

After the rinderpest outbreaks in wildlife, disease surveillance was conducted in 11 districts at risk and national parks in the country. Surveillance of stock routes and market inspections were also carried out. However, the disease has not been diagnosed.

After the mass vaccination, the country was divided into three zones according to rinderpest epidemiology. Zone II is adjacent to Somalia while Zone III is adjacent to southern Sudan (see map below).



A system has been put in place for epidemiological surveillance in Zones II and III coupled with vaccination in Zone III to control spread of any rinderpest outbreak from the two zones to Zone I.

In Zone I, rinderpest was last diagnosed in December 1996 in Nairobi National Park. The disease was effectively controlled through emergency ring vaccination of all herds in the southern districts, imposition of quarantine and observance of strict livestock movement control. Systematic epidemiological surveillance has been conducted in the area for the past two years, and rinderpest has not been diagnosed.

Rinderpest has not been diagnosed for more than ten years in any of the other areas of Zone I. The areas of Zone I neighbouring Zones II and III are inhabited by communities who traditionally do not mix in their grazing patterns.

Through epidemiological surveillance, any clinical incursion of rinderpest into Zone II or III will be noted in good time and control measures taken accordingly. Epidemiological surveillance in the southern districts will be done in conjunction with the Tanzanian veterinary authorities, who have declared their country "provisionally free" from rinderpest (see *Disease Information*, 11 [38], 130, dated 25 September 1998).

On the basis of the facts discussed above, the area designated as Zone I (see map above) is hereby declared to be "provisionally free" from rinderpest as from January 1999.

(1) FAO: Food and Agriculture Organization of the United Nations

(2) OAU: Organization of African Unity - IBAR: Interafrican Bureau for Animal Resources.

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FOOT AND MOUTH DISEASE IN TUNISIA

Translation of extracts from a fax received on 18 March 1999 from Dr Said Bahri, Director General of Animal Health, Ministry of Agriculture, Tunis:

EMERGENCY REPORT (CONTD) (see *Disease Information*, **12** [8], 24, dated 5 March 1999)

Location of the outbreak (reminder):

Location	No. of outbreaks
approx. 3 km from the city of Grombalia (Nabeul governorate)	1 fattening farm

Description of affected population in the outbreak: a farm containing 110 sheep, mainly of the "west slender-tailed" breed (2 rams, 3 ewes and 2 lambs (approx. 2-months old)), and 28 cattle (23 young bulls of Black Pied breed aged between 18 and 24 months, 2 culled cows of local breed and 2 heifers, one of which was a local breed) and a 6-month-old female calf).

Epidemiological data:

A. Tracing back:

- The origin of 26 of the 28 cattle was identified. The most recent introduction of cattle to the farm (18 young bulls for fattening from two large farms) took place on 22 February 1999.
- The batch of 110 sheep was comprised of purchases made on different dates, the most recent being from the Tunis livestock market on 22 February.
- No animals entered the farm after 22 February 1999.
- All of the farms from which the cattle originated were inspected between 2 and 4 March and were placed under surveillance; no clinical signs of foot and mouth disease (FMD) were observed.

B. Tracing forward:

- During the period between 22 February and 1 March 1999, four young bulls from another farm left the cattle sheds for the regional abattoir.

C. Immune status:

- The last FMD vaccination campaign carried out in Grombalia district began on 15 September 1998 and was completed on 14 January 1999. A total of 2,955 cattle (84%), 20,015 sheep (83%) and 2,072 goats (41%) were vaccinated during the campaign.
- The infected young bulls had only been vaccinated once (in December 1997 - January 1998).

Control measures:

- Legal basis: Decree No. 84-1225 of 16 October 1984 concerning diseases legally deemed to be contagious, and a decree issued by the Minister of Agriculture on 21 November 1984, specifically relating to FMD control.
- Enactment of an infection decree by the governor of Nabeul.
- Quarantine of the outbreak, counting, identification and confinement of the animals (1 March 1999).
- Slaughter of all animals conducted in two separate sessions.
- Destruction of litter and manure.
- First cleansing and disinfection were carried out on 9 March 1999.
- Booster ring vaccination (for cattle, sheep and goats): initiated on 3 March 1999.

FOLLOW-UP REPORT No. 1

End of this report period: 13 March 1999.

New outbreaks:

Location	No. of outbreaks
5 km from the border with Algeria, between Ghardimaou and the border post of Jlaiel (Ghardimaou district, Jendouba governorate)	1 stable

Description of affected population in the new outbreak: farm containing sheep of the "west slender-tailed" breed (2 rams, 3 ewes and 2 lambs (approx. 2 months of age)) and 2 cattle (1 crossbred cow and her daughter (a heifer)).

Diagnosis:

- A. Clinical diagnosis:** during an inspection carried out on 11 March 1999, the district veterinarian observed clinical signs and FMD-like lesions in the heifer and the sheep (lameness in the rams and one lamb). Blood samples were taken (from the heifer and the sheep) and epithelial flaps (from the heifer).
- B. Laboratory confirmation:** diagnosis of FMD was confirmed on 12 March by the Veterinary Research Institute of Tunisia. An aliquot of the samples taken (lingual epithelium) will be sent to the OIE World Reference Laboratory for FMD (Pirbright, United Kingdom).
- C. Diagnostic tests conducted:** ELISA.
- D. Causal agent:** FMD virus type O.

Epidemiological data:

- Sedentary livestock production.
- No susceptible animals had been introduced (cattle, sheep or goats) for around a year.
- The livestock had not been vaccinated during the October-December 1998 campaign.
- According to the farmer, signs of lameness began around one week before the date of the first visit by the veterinarian and the death of two two-month-old lambs was also reported during this period.

Control measures:

- Legal basis: Decree No. 84-1225 of 16 October 1984 concerning diseases legally deemed to be contagious, and a decree issued by the Minister of Agriculture on 21 November 1984, specifically relating to FMD control.
- Enactment of an infection decree by the governor of Jendouba.
- Isolation of the outbreak, counting, identification and confinement of the animals (12 March 1999).
- Slaughter of all animals in the outbreak.

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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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