28th Conference of the OIE Regional Commission for Asia, the Far East and Oceania
Cebu, Philippines, 18-22 November 2013

FINAL REPORT
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List of Abbreviations

AHNS: Acute hepatopancreatic necrosis syndrome
APHCA: Animal Production and Health Commission for Asia and the Pacific
ASEAN: Association of South-East Asian Nations
AusAID: Australian Agency for International Development
BAI: Bureau of Animal Industry
CC: Coordination Committee
CSF: Classical Swine Fever
CVO: Chief Veterinary Officer
DAFF: Australian Department of Agriculture, Fisheries and Forestry
EC: European Commission
EU: European Union
EUFMD: European Commission for the Control of Foot-and-Mouth Disease
FAO: Food and Agriculture Organization of the United Nations
FAO-RAP: FAO Regional Office for Asia and the Pacific
FEI: Fédération Equestre Internationale
FMD: Foot and mouth disease
GF-TADs: Global Framework for the Progressive Control of Transboundary Animal Diseases
HHP: High health, high performance (horses)
HPAI: Highly Pathogenic Avian Influenza
HPED: Highly Pathogenic and Emerging and Re-Emerging Diseases
HP-PRRS: Highly pathogenic PRRS
HQ: Headquarters
IAEA: International Atomic Energy Agency
IAWP: Improved Animal Welfare Program
IAWP: Improved Animal Welfare Programme
IFHA: International Federation of Horse Racing Authorities
IPPC: International Plant Protection Convention
JTF: Japan Trust Fund
LBVD: Livestock Breeding and Veterinary Department
LGU: Local government unit
LPAI: Low pathogenic avian influenza
LSU: Livestock units
NACA: Network of Aquaculture Centres in Asia-Pacific
NCPs: National Contact Persons
NGOs: Non-governmental organisations
<table>
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<th>Abbreviation</th>
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<td>NIPPP:</td>
<td>National Influenza Pandemic Preparedness Plan</td>
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<td>NSP:</td>
<td>Non-structural Protein</td>
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<td>OIE:</td>
<td>World Organisation for Animal health</td>
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<td>PCP:</td>
<td>Progressive Control Pathway</td>
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<td>PCR:</td>
<td>Polymerase Chain Reaction</td>
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<td>PHFS:</td>
<td>Porcine high fever syndrome</td>
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<td>PPR:</td>
<td>Peste des petits ruminants</td>
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<td>PRRS:</td>
<td>Porcine Reproductive and Respiratory Syndrome</td>
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<td>PSVS:</td>
<td>OIE/AusAID Programme on Strengthening Veterinary Services</td>
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<td>PVS:</td>
<td>OIE Tool for the Evaluation of Performance of Veterinary Services</td>
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<td>QAAD:</td>
<td>Quarterly Aquatic Animal Disease</td>
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<td>RAWS CG:</td>
<td>Regional Animal Welfare Strategy Coordination Group</td>
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<td>RAWS:</td>
<td>Regional Animal Welfare Strategy</td>
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<tr>
<td>RR-AP:</td>
<td>Regional Representation for Asia and the Pacific</td>
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<td>SAARC:</td>
<td>South Asian Association for Regional Co-Operation</td>
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<td>SAR-PRC:</td>
<td>Special Administrative Region People's Republic of China</td>
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<td>SEACFMD:</td>
<td>South-East Asia and China Foot and Mouth Disease Campaign</td>
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<td>SGFs:</td>
<td>Small grant facilities</td>
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<td>SOPs:</td>
<td>Standard operating procedures</td>
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<td>SPC:</td>
<td>Secretariat of the Pacific Community</td>
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<td>SPS:</td>
<td>Sanitary and Phytosanitary Measures</td>
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<td>SRR-SEA:</td>
<td>Sub-Regional Representative for South-East Asia</td>
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<td>STANDZ:</td>
<td>Stop Transboundary Animal Diseases and Zoonoses</td>
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<td>STRIVES:</td>
<td>Strengthening Initiative for Veterinary Services in South East Asia</td>
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<td>USA:</td>
<td>United States of America</td>
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<td>USAID:</td>
<td>United States Agency for International Development</td>
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<td>USD:</td>
<td>United States Dollar</td>
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<td>WAHID:</td>
<td>World Animal Health Information Database of the OIE</td>
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<td>WAHIS:</td>
<td>World Animal Health Information System of the OIE</td>
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<td>WAHWF:</td>
<td>OIE World Animal Health and Welfare Fund</td>
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<td>WHO:</td>
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<td>WHO-SEARO:</td>
<td>WHO Regional Office for South-East Asia</td>
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<td>WHO-WPRO:</td>
<td>WHO Western Pacific Region</td>
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<td>WSPA:</td>
<td>World Society for the Protection of Animals</td>
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<td>WTO:</td>
<td>World Trade Organisation</td>
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Introduction

1. Following the invitation of the Government of the Philippines, the 28th Conference of the OIE Regional Commission for Asia, the Far East and Oceania was held in Cebu from 18 to 22 November, 2013.

2. A total of 105 participants, comprising OIE Delegates and/or nominees of 22 Member Countries and senior officers from 5 international organisations attended all the conference. In addition, 1 representative of the private sector was present. His Excellency Mr Proceso Jaraza Alcala, Secretary of Agriculture of Philippines, represented by Mrs Bernadette Fatima Romulo-Puyat, Undersecretary of Agriculture, Mr Hilario Davide III, Governor of Cebu, represented by Ms Agnes A. Magpale, Vice Governor of Cebu. Mr Michael Lopez Rama, Mayor of Cebu City, Dr Karin Schwabenbauer, President of the OIE World Assembly of Delegates, Dr Bernard Vallat, OIE Director General, Dr Davinio Catbagan, OIE Delegate of the host country and Vice-President of the OIE Regional Commission for Asia, the Far East and Oceania, Dr Zhang Zhongqiu, President of the OIE Regional Commission for Asia, the Far East and Oceania and Delegate of People's Republic of China, Prof. Stuart MacDiarmid, Member of the Terrestrial Animal Health Standards Commission, Dr François Caya, Head of the OIE Regional Activities Department, Dr Hirofumi Kugita, OIE Regional Representative for Asia and the Pacific, Dr Ronello Abila, OIE Sub Regional Representative for South East Asia, Dr Karim Ben Jehara, Head of the OIE Animal Health Information Department and Dr Susanne Münstermann, Project Officer, OIE Scientific and Technical Department also participated in the Conference. The speakers of Technical Items I and II, namely Prof. Tim E. Carpenter, Professor and Director of the Centre EpiCentre of the Institute of Veterinary, Animal and Biomedical Sciences of the College of Science of the Massey University in New Zealand and Dr Tung Nguyen, Vice Director of the National Centre for Veterinary Diagnostics from Vietnam, honoured the Conference by their presence.

TUESDAY 19 NOVEMBER 2013

Opening Ceremony

3. The opening ceremony was chaired by Dr Davinio Catbagan, OIE Delegate of Philippines, accompanied by the following personalities:

   - Mr Michael Lopez Rama, Mayor of Cebu City;
   - Mr Hilario Davide III, Governor of Cebu, represented by Ms Agnes A. Magpale, Vice Governor of Cebu;
   - Dr Zhang Zhongqiu, President of the OIE Regional Commission for Asia, the Far East and Oceania;
   - Dr Karin Schwabenbauer, President of the OIE World Assembly of Delegates;
   - Dr Bernard Vallat, OIE Director General;
   - Mr Proceso Jaraza Alcala, Secretary of Agriculture of Philippines, represented by Mrs Bernadette Fatima Romulo-Puyat, Undersecretary of Agriculture.

4. Speeches are annexed at the end of the report.

Election of the Conference Committee

5. The Conference Committee was elected by participants as follows:

   Chairperson: Dr Davinio Catbagan (Philippines)
   Vice-Chairperson: Dr Zhang Zhongqiu (China (Peoples Rep. of))
   Rapporteur General: Dr Mark Schipp (Australia)
Election of Session Chairpersons and Rapporteurs for Technical Items and Animal Health Situation

6. The Conference Committee was elected as follows:

   Technical Item I: Dr Toshiro Kawashima (Japan), Chairperson
                     Dr Tomasi Niuvotu Tunabuna (Fiji), Rapporteur

   Technical Item II: Dr Sen Sovann (Cambodia), Chairperson
                     Dr Nime Kapo (Papua New Guinea), Rapporteur

   Animal health situation: Dr Matthew Stone (New Zealand), Chairperson
                            Dr Tritsadee Chaosuancharoen (Thailand), Rapporteur

Adoption of the Agenda and Timetable

7. The Provisional Agenda and Timetable were adopted.

OIE Activities and Vision for the 21st Century

8. The Session Chairperson, Dr Davinio Catbagan, invited Dr Bernard Vallat, Director General of the OIE, to present an update on OIE Activities and Vision for the 21st Century.

9. Dr Vallat began his presentation by thanking warmly the government of the Philippines for its decision to maintain the Conference despite the terrible challenges faced by the Country.

10. He then provided a brief overview of the OIE with its 178 Member Countries throughout the world. He reminded participants of the objectives of the Organisation, outlined its financial structure and highlighted the importance of OIE Regional and Sub Regional Commissions in addressing issues specific to the Members of a region.

11. The Director General then commented on the OIE's current policies, highlighting key concepts, such as 'Global Public Good', 'One Health' and 'Good Veterinary Governance' and the global, regional and national animal health strategies and disease control and eradication programmes.

12. He stated that all these concepts are relevant when it comes to improving animal health worldwide while ensuring animal welfare, food security, food safety and alleviation of poverty.

13. Dr Vallat also recalled the OIE's reference role as the international standard-setting organisation for animal health issues including its relation to the World Trade Organization (WTO) Agreement on the Application of Sanitary and Phytosanitary Measures (SPS Agreement).

14. He pointed out that the OIE's role in the scientific management of animal welfare had grown to the point where the OIE was now recognised as the pre-eminent source of standards, guidelines, information and advice on animal welfare worldwide.

15. Dr Vallat reminded Delegates that another key element of the OIE's policies was the strengthening of good governance of Veterinary Services, which could be achieved by supporting Members' compliance with OIE international standards on the quality of Veterinary Services including legislation and continuously building the capacity of Member Countries’ Veterinary Services. Good governance includes appropriate legislation, appropriate veterinary education programmes, human and financial resources allocated to Veterinary and Livestock Services, and, finally, relevant public-private partnerships applicable to the entire veterinary domain.
16. He also highlighted the importance of veterinary statutory bodies, which, while not being part of the Veterinary Authority, are nonetheless important in supporting the good governance of Veterinary Services as a whole.

17. Referring to the current global context, the Director General started by presenting the trends in global demand for food as well as the drivers of consumption and future trends, indicating that the worldwide consumption would increase by more than 50% in the near future, mainly in developing and transition countries.

18. He emphasised that the risk of diseases spreading around the world was increasing, due to factors such as globalisation, the unprecedented increase in movements of people, animals and animal products, changes in farming systems and climate change.

19. Dr Vallat noted the growing importance of veterinary public health given the zoonotic potential of animal pathogens, and stated that 60% of human pathogens and 75% of emerging diseases are zoonotic, and that 80% of potential bioterrorism agents are zoonotic pathogens.

20. Dr Vallat emphasised that veterinarians are also in the front line where protecting human health is concerned as they play an important role in stabilising society by supporting a healthy and productive agricultural sector, which in turn leads to a safe food supply. Veterinarians also make a significant contribution to protection of biodiversity and the environment.

21. Weaknesses in the Veterinary Services of one country can threaten neighbouring countries, regions and, potentially, the whole international community.

22. In discussing the new concepts to be used for promoting the protection of countries and regions from current and emerging threats to animals and humans, Dr Vallat began by highlighting the ‘global public good’ concept. Global public goods are those whose benefits extend to all countries, people and generations. Animal health systems are global public goods because controlling and eradicating infectious animal diseases, including zoonoses, bring broad national, international and inter-generational benefits.

23. He reminded the participants that a major part of Veterinary Services activities are a Global Public Good, and bringing them into line with international standards must therefore be considered a national priority. Consequently, one of the OIE’s commitments is to support the improvement of the legal framework and resource allocations of national Veterinary Services around the world.

24. He also discussed the outcomes of the Ministerial Declaration of the Meeting of G20 Agriculture Ministers, held in June 2011, highlighting the importance of early disease detection and of relevant international standards, areas where the OIE, the Food and Agriculture Organization of the United Nations (FAO), the World Health Organization (WHO), the Codex Alimentarius Commission, the International Plant Protection Convention (IPPC) and the WTO were encouraged to continue their efforts towards enhancing inter-agency cooperation.

25. In this connection, the Director General commented on the Tripartite Concept Note prepared by the OIE, FAO and WHO to strengthen collaboration between the three organisations in sharing responsibilities and coordinating global activities to address health risks at the animal-human-ecosystems interfaces.
26. Dr Vallat also summarised the outcomes of the High Level Technical Meeting to address Health Risks at the Human-Animal-Ecosystems Interfaces, held in Mexico City in November 2011, which, among other things, encouraged: the establishment of strong governance structures and aligned legal frameworks; the use of inter-sectoral approaches to risk assessment and risk mitigation for health issues at the human-animal-ecosystems interfaces; and joint training, simulation exercises, coordinated evaluation and gap analysis of national human and animal health systems.

27. He stressed the three priority topics adopted by the three organisations: rabies, zoonotic influenza and antimicrobial resistance.

28. The Director General went on to describe recent OIE achievements, highlighting the successful outcome of the highly pathogenic avian influenza (HPAI) H5N1 crisis, as well as the unprecedented efforts by the veterinary community that had led to official recognition for 198 countries worldwide as rinderpest free, as declared by the World Assembly of Delegates at the 79th General Session of the OIE.

29. Dr Vallat pointed out that the global rinderpest eradication programme had demonstrated that eradication relied on: a long-term vision; the commitment of governments; support from the international community and regional organisations; and dedicated international platforms for coordination, together with efficient tools for control and eradication and key involvement of national Veterinary Services. He highlighted the importance of continuing the joint efforts in the post-eradication phase.

30. Regarding the future challenges, Dr Vallat referred to the emergence and re-emergence of new diseases, in the context of climate change and changing ecosystems; the new risks arising at the wildlife–human–animal interface; the globalisation of trade and tourism bringing new risks; the constant threat of bioterrorism; societal demand for more proteins; human health risk alleviation; animal welfare; and environment preservation.

31. Dr Vallat went on to affirm that disease control at source was key to enhancing animal health, improving food security and mitigating poverty, in particular through: surveillance, early warning, reporting and effective response; commitment to public–private partnerships; investment in Veterinary Services and disease control programmes as global public goods; and good governance of the public and private components of Veterinary Services and compliance with OIE standards.

32. He added that animal health crises, causing considerable economic losses, might be prevented at a reasonable cost through the appropriate implementation of OIE standards on good governance by all those concerned.

33. On the subject of OIE support for good governance, Dr Vallat highlighted the following: strengthening Veterinary Services through capacity building, such as regular seminars for newly assigned OIE Delegates; establishment of topic-specific National Focal Points in each OIE Member Country and organisation of regular seminars for all these Focal Points; the network of OIE Reference Laboratories and Collaborating Centres; the laboratory twinning initiative; the OIE’s scientific and normative publications; and the OIE PVS Pathway, which is a continuous process aimed at improving Veterinary Services’ compliance with international standards in a sustainable manner.
34. He also commented on important OIE initiatives, including: support with implementing the recommendations of the recent FAO/OIE Global Conference on Foot and Mouth Disease Control; development of OIE programmes for the global control of other diseases, such as rabies and peste des petits ruminants (PPR); promotion of government and donor consensus; support to OIE programmes from international donors, including foundations; new twinning projects for veterinary education establishments and veterinary statutory bodies; and OIE policy on disease surveillance and notification, including in wildlife, in the context of freedom status and national control programmes official recognition of disease status, in preparation for the inclusion of PPR and classical swine fever (CSF) in the list of such diseases.

35. Dr Vallat then made reference to the preparation of the OIE’s Sixth Strategic Plan. He explained that a draft was being prepared by the Council with the support of a consultant. This draft will be submitted for consultation to the Regional and Specialised Commissions in order to be ready for final adoption in May 2015 by the World Assembly of Delegates.

36. A presentation of a preliminary draft will be made during the Conference.

37. The OIE Director General concluded his presentation by affirming that the OIE would continue supporting its Members by: setting internationally recognised standards and guidelines on animal health, veterinary public health, including food safety, and animal welfare; disseminating scientific and animal health information particularly on diseases control methods; recognising the disease-free status of countries/zones for selected diseases; contributing to the global control of foot and mouth disease (FMD), rabies in dogs and PPR; providing technical and political support for good governance and Veterinary Services using the PVS Pathway and other capacity-building activities; supporting veterinary education; supporting a better quality, more organised veterinary profession including public/private partnerships; and influencing governments to secure greater recognition of the key role of veterinarians in society.

Activities of the OIE Regional Commission for Asia, the Far East and Oceania

38. Dr Zhang Zhongqiu, President of the OIE Regional Commission for Asia, the Far East and Oceania and Delegate of the People’s Republic of China, gave a brief review regarding the OIE Regional Commission’s activities. He explained that it consists of 36 Members, of which four are also Members of other Regional Commissions. The new Bureau, elected in May 2012, is headed by Dr Zhang Zhongqiu (P.R. China) as President, supported by Drs Davino Catbagan (Philippines) and Sen Sovann (Cambodia) as Vice-Presidents and Dr Matthew Stone (New Zealand) as Secretary General.

39. Dr Zhang Zhongqiu stated that, in accordance with the Regional Work Plan Framework 2011-2015 adopted by the Regional Commission at its 27th Conference in 2012, the Bureau had endeavoured to improve communications among regional Members, with the aim of promoting the development of a common regional vision.

40. He then added that, based on the ideas that came out of the meeting of the Core Group established pursuant to a recommendation in the Work Plan and on the discussion at the Regional Commission meeting during the 81st General Session, the following activities had been implemented since May 2013: 1) nominating appropriate national experts to participate in OIE scientific work and to share relevant information among Regional Members, 2) sharing comments on the reports of the OIE Specialist Commissions, and 3) holding a Regional Seminar for OIE Delegates on activities of Specialist Commissions. It was noted that continuing efforts needed be made on items 1) and 2). Regarding item 3), Dr Zhang Zhongqiu indicated that details of the successful seminar would be reported separately by Prof. Stuart MacDiarmid.
41. He then stated that, as President of the Regional Commission, he had attended the 7th Meeting of the FAO/OIE GF-TADs Regional Steering Committee for Asia and the Pacific, held in Tokyo, Japan, on 17 and 18 July 2013. The main outcomes of the meeting were the nomination of a new Chairman of the Regional Steering Committee, Dr Zhang Zhongqiu, P.R. China, the presentation of the approved 5-year Action Plan and the updating of the Regional Steering Committee’s terms of reference. Presentations on emerging disease trends in the region included influenza H7N9, rabies and bee diseases. The meeting emphasised the importance of promoting the One Health approach, recommended regular updating of the 5-year Action Plan and encouraged Members to participate in the OIE PVS Pathway and to use its outcomes for strengthening the Veterinary Services.

42. Finally he mentioned that, as Chairman of the GF-TADs Regional Steering Committee, he had been invited to participate in the 6th Meeting of the GF-TADs Global Steering Committee, held in Rome, Italy, on 29 and 30 October 2013, where he provided an update on the activities of the Regional Steering Committee for Asia and the Pacific. In addition to a review of the global status of priority TADs, most of which (such as foot and mouth disease [FMD], avian influenza [AI], peste des petits ruminants [PPR], rabies and African swine fever [ASF]) are relevant to the region, reports on cross-cutting issues such as wildlife and laboratories were also presented. Also discussed were proposals from the Global Secretariat, including “a sequential approach to identifying and prioritising of new TADs on a regional basis under GF-TADs” and “cost-effectiveness of investments in prevention of TADs”.

Activities of the OIE Regional Representation for Asia and the Pacific

43. Dr Hirofumi Kugita, OIE Regional Representative for Asia and the Pacific, began his presentation by stating that the OIE Regional Representation for Asia and the Pacific (OIE RR-AP) had continued to work to improve animal health, including with regard to zoonoses, for Members in the Region and with other partners, including the OIE Sub-Regional Representation, FAO-RAP, APHCA, WHO-WPRO, WHO-SEARO, ASEAN, SAARC, SPC, NACA and universities. He also said that the RR-AP had devoted its efforts to regional activities, in line with the OIE 5th Strategic Plan for 2011-2015 and the Regional Work Plan Framework 2011–2015.

44. Regarding the activities carried out in 2013, Dr Kugita highlighted the activities relating to capacity building, GF-TADs, FMD, zoonoses and One Health.

45. On the subject of capacity building, Dr Kugita commented that two regional seminars for OIE National Focal Points had been organised, one in Beijing on Communication and the other in Seoul on Animal Welfare. Both seminars were attended by most regional Members and were useful in, among others, enhancing regional members’ understanding of the responsibility and function of OIE National Focal Points.

46. He also mentioned that, in terms of collaborative activities with OIE Collaborating Centres, the RR-AP had co-organised short-term training sessions on veterinary products with the National Veterinary Drug Assessment Laboratory in October 2013 in Japan. Another training session, on feed safety, would be organised with the Food and Agricultural Materials Inspection Centre in Japan in December 2013.

47. With reference to GF-TADs, he stated that, in its capacity as the Permanent Secretariat of the GF-TADs Regional Steering Committee, the RR-AP had organised the 7th Meeting of the Regional Steering Committee, in Tokyo in July 2013. Several important issues dealt with at the meeting included, the revised 5-year Action Plan for the Regional GF-TADs for Asia and the Pacific, progress with the terms of reference for the Regional Steering Committee, the conclusions of the Second FAO/OIE Sub-Regional Meeting on GF-TADs for SPC, and the recommendations of the Fourth Meeting of the HPED Steering Committee.
Concerning FMD, the Regional Representative underlined the fact that, under the OIE/JTF Project on FMD Control in Asia, the 2nd Coordination Committee Meeting, held back to back with the 2nd National Contact Person Meeting and the 1st FMD Scientific Meeting, was held in Mongolia in October 2013, to which targeted Members in East Asia had been invited. The Coordination Committee Meeting adopted the Roadmap for FMD Control in East Asia and recommended that the attached information, such as country profiles, be annually reviewed and updated. Training and field work relating to FMD control were also conducted or were currently in progress in response to requests from Members.

With respect to Zoonoses and One Health, Dr Kugita announced that the OIE/JTF Project for Strengthening HPAI Control in Asia (2008-2012) had been completed, and that the new OIE/JTF Project for Controlling Zoonoses in Asia, taking into account the One Health concept, would be launched in December 2013 at an Inception Meeting of the Project to which selected countries, sub-regional organisations and experts would be invited. This Project tentatively comprises three components, namely: assessment of HPAI control measures, zoonotic influenza preparedness and strengthening of rabies control.

Dr Kugita then referred to other topics concerning the RR-AP, pointing out the strong concerns raised by influenza A (H7N9) since the Government of P.R. China’s report of the first human case in March 2013. He said that the RR-AP had been working closely with its tripartite partners, namely FAO-RAP, WHO-WPRO and WHO-SEARO, to better understand the situation and to address any possible developments. Antimicrobial resistance was also an issue of great interest in the region. Joint APHCA/OIE Regional workshops on Zoonoses, Food-Borne Diseases and Antimicrobial Resistance were conducted in September 2013. With regard to aquatic animal diseases, the OIE was continuing to work closely with NACA.

He also announced the launch of the new regional OIE website (http://www.rr-asia.oie.int/) in March 2013.

To conclude, Dr Kugita referred to the Work Plan for 2014, highlighting that the RR-AP would:

1. organise four seminars for OIE Focal Points, namely those for Wildlife, Animal Welfare, Aquatic Animals and Veterinary Products, as well as a Regional Seminar for New Delegates;

2. continue to support countries/territories in progressively achieving OIE official recognition for freedom from FMD with or without vaccination, based on the Roadmap for controlling FMD in East Asia, under the OIE/JTF Project for FMD Control in Asia. The Project will also address strengthening Members’ capacity for FMD control at the national and regional level;

3. implement various capacity-building actions as well as coordination activities, such as regional workshops, short-term training sessions and field studies, under the OIE/JTF Project for Controlling Zoonoses in Asia in line with the One Health concept;

4. continue its collaboration with relevant OIE Reference Centres and with FAO-AHPHA, NACA and other regional and sub-regional organisations to respond to the needs in the region. RR-AP will also seek ways to facilitate laboratory twinning and education twinning as well as implementation of the OIE PVS Pathway in the region.

Activities of the OIE Sub-Regional Representation for South-East Asia

Dr Ronello Abila, OIE Sub-Regional Representative for South-East Asia, started his presentation by reminding participants that the Sub-Regional Representation for South-East Asia (SRR-SEA) based in Bangkok, Thailand, covered the ten countries of South-East Asia, but that the FMD programme also included P. R. China, which had joined the SEACFMD Campaign in 2010.
He gave a brief account of the three major programmes covered by the SRR-SEA, funded by donors, namely: Stop Transboundary Animal Diseases and Zoonoses (STANDZ) which put together into one umbrella programme all existing programmes funded by AusAID, such as SEACFMD and PSVS, renamed as STRIVES, plus another component on One Health/Zoonoses focusing on rabies; the EU-funded Regional Cooperation Programme HPED, and the USAID-funded IDENTIFY programme.

Referring to the activities of 2013, Dr Abila highlighted the SEACFMD Sub-Commission Meeting in Singapore, the recommendations of which mainly related to: the Members’ applications for OIE endorsement of national control programmes, examination of cost recovery options for vaccination programmes, presentation of the documents namely “Operationalizing SEACFMD Control Strategies”; “Comprehensive Approach to FMD Vaccination in SEACFMD Countries” and “SEACFMD Research Directions”. The National Coordinators meeting in August discussed the preparations for the upcoming impact evaluation of SEACFMD by AusAID. Recent trends in the epidemiology of FMD, in particular the changes in the vaccine reaction to circulating serotype A and the increasing outbreaks in Cambodia, were highlighted.

Dr Abila also reported on national consultation meetings on FMD control held in Cambodia, Laos and Myanmar, to align these national plans with the SEACFMD 2020 Roadmap and the Global FMD strategy. These documents, in addition to providing technical guidance for FMD control, will be used to help convince governments and donors to allocate more resources to FMD control in these countries.

Dr Abila then added that the SRR had conducted in-country meetings with OIE Focal Points in Cambodia, Laos and Myanmar.

From January to October 2013, the EU-funded HPED project provided FMD vaccines from the OIE regional vaccine banks to Myanmar, Cambodia and Laos, and rabies vaccines to the Philippines, Laos, Sri Lanka, Bangladesh, Indonesia, Bhutan and Myanmar.

Dr Abila indicated that two OIE-approved small grant facilities (SGFs) for Laos and Myanmar on vaccination campaigns had been completed in the first quarter of 2013, two SGFs on FMD-related research in Vietnam had been completed in October 2013 and three SGFs on FMD vaccination were still ongoing in Laos, Myanmar and Cambodia.

He then stated that since the first reports of the outbreak of H7N9 in China, SRR-SEA had been in close coordination with the Regional Representation and the OIE Headquarters, as well as with the FAO-OIE-WHO tripartite regional partners for updates, consultations and exchange of information.

Finally, Dr Abila detailed the proposed work programme for 2014, emphasising that the SRR-SEA would continue to implement activities in accordance with the strategic objectives of the OIE Fifth Strategic Plan (2011-2015).

Discussion

Dr Davinio Cathagan, Delegate of Philippines and Chairperson of the Conference thanked Dr Abila for the comprehensive presentation on the activities of the OIE Sub-Regional Representation for South East Asia. Making reference to the FMD Vaccine Bank, he asked clarifications regarding the accessibility of the bank for FMD free countries especially when it comes to the application process and the delay for delivery.

Dr Vallat, OIE Director General, confirmed that FMD free countries have indeed access to the bank and vaccines may be delivered as quickly as within a week.
Technical Item I
The use of cost-benefit analysis in animal disease control, including practical examples from the region

64. Prof. Tim E. Carpenter, Director of the EpiCentre, Institute of Veterinary, Animal and Biomedical Sciences, College of Science, Massey University, New Zealand, started his presentation by explaining that Technical Item I had been prepared based on the Delegates’ answers to an on-line questionnaire that had been made available to the 36 OIE Members in the Asia, the Far East and Oceania region.

65. He stated that a total of 27 (75%) countries had completed the questionnaire and highlighted the fact that the respondents identified a total of 30 diseases as being among the five most important diseases in their country. Of these diseases, the six most important were FMD, HPAI, rabies, Newcastle disease, classical swine fever and brucellosis.

66. Prof. Carpenter also explained that 26 (96%) of the responding countries reported that they had a surveillance programme for at least one of their top five diseases and most of the countries had a surveillance programme for all five of the diseases they considered the most important. Eighty nine per cent (24/27) of the respondents said wildlife was important with respect to the five most important diseases in their country.

67. He then added that, although economic analyses of animal disease control programmes were considered important by the OIE Member Countries in the region, a total of only 25 such analyses had been performed in the reporting countries.

68. He explained that the level of sophistication varied from country to country and even within countries, ranging from enumerating disease losses to conducting a general equilibrium analysis.

69. Prof. Carpenter commented that most responding countries indicated that they either had or were able to collect data on what was believed to be necessary when conducting a benefit-cost analysis of an animal disease control programme. Virtually all (26/27) of the respondents reported that cost-benefit analysis was either very or somewhat important in informing an animal disease control programme. Similarly, 89% (24/27) reported that animal disease control programmes should be based either absolutely or mainly on socio-economic criteria.

70. He remarked that strong interest was shown in how the application of economics to decision-making in animal disease control could be carried out in the region with the support of the OIE. Virtually all the respondents believed delivering regional workshops and producing guidelines for socio-economic analysis of animal disease impact were good ideas.

71. Finally Prof. Carpenter mentioned that the majority also felt that maintaining an indexed register of analyses undertaken by Member Countries and providing a list of relevant experts were good ideas.

72. Dr Carpenter took also the opportunity to provide the Regional Commission with a short lecture on how to do a cost benefit analysis in ten easy steps.

Discussion

73. Dr Kawashima, OIE Delegate of Japan and Chairperson for the Technical Item I, thanked Prof Carpenter for his most comprehensive presentation that he summarised before opening the floor to questions.
74. A member of the Delegation of the P.R. of China, after having expressed his appreciation of the presentation, explained the challenges faced in responding to the questionnaire on the Technical Item I drafted by Prof. Carpenter. He explained that they consulted some agricultural economists and got very important information regarding the application of the economic analysis on animal disease control. They found that lack of communication between experts of economic analysis and the officers of veterinary administration commonly exists. According to him, China (People’s Rep. of) defines decision makers as the officers from financial departments. Finally, he said that, when it comes to make the budget for animal disease control programmes the officers from the Veterinary Authorities need to bridge the communication between the economists and the decision makers.

75. He considered that Veterinary Services can play an important role in advocating for economic analysis supporting disease control. He also stressed on the importance of making research in the field of economic analysis.

76. Prof Carpenter agreed with the representative of the P.R. of China and confirmed that indeed it takes time to improve relationship between Veterinary Services and decision makers.

77. The Delegate of New Zealand, Dr Stone, supported the previous comments made and reminded the Conference the FMD outbreak face by the United Kingdom where simulation models were used without having an optimal understanding of the needs of all interested parties. He used this example to reiterate the importance of involving Veterinary Services with decision makers and policy makers. To strengthen the relationship between the latters, he went on proposing simple approaches such as workshops.

78. Making reference to the answers to the questionnaire, he completed his intervention by stressing the need for a better communication of economic analysis results not only within the country but also with other countries.

79. Prof Carpenter confirmed not only the last comment of Dr Stone on the importance of communicating on economic analysis but also explained how powerful such analysis can be when they are well communicated.

80. Dr Catbagan, Delegate of the host country, expressed his concerns regarding the use of cost benefit analysis for zoonoses considering that it would be difficult to cost a human life.

81. Prof Carpenter agreed with Dr Catbagan on the fact that it was difficult to define the cost of a human life. However, he explained that, by providing estimate on the number of live being saved, different alternative health programmes could be compared.

82. Dr Susanne Münstermann, Project Officer of the OIE Scientific and Technical Department, wondered why the questionnaire did not address the drivers for countries to carry out economic analysis.

83. Prof Carpenter agreed that it would certainly be an interesting aspect to be targeted in a more in depth investigation.

84. Dr Sen Sovann, Delegate of Cambodia, concluded the discussion by highlighting the importance to ensure proper communication at all levels so to facilitate the ownership of the use of economic analysis.
Update on the Improved Animal Welfare Programme (IAWP) and on the Regional Animal Welfare Strategy

85. Dr Gardner Murray, OIE Special Adviser, introduced his presentation by commenting that, following the agreement between the Australian Department of Agriculture, Fisheries and Forestry (DAFF) and the OIE, technical and developmental assistance could be provided to eligible countries through the IWAP.

86. He explained that, the IWAP was aimed at supporting in-country capacity building by facilitating the adoption and implementation of OIE standards during transport on land and slaughter of livestock. This is done through a high-level Training of Trainers programme supported by workshops for academics to promote teaching of animal welfare to undergraduates on IWAP. The Training of Trainers course lasts 10 weeks and comprises visits and practical sessions, distance learning, and presentations by trainers to the academic community, governmental officers and other interested parties on pre-slaughter and slaughter welfare. The training syllabus covers knowledge values and skills.

87. Dr Murray added that, following a Pilot Programme in Indonesia in 2011/12, training had been completed in Indonesia, the Philippines and Turkey, was progressing in Vietnam and was planned for Jordan. Delegates were asked to note and endorse the IWAP, the rollout of training and evaluations in the countries supported by IWAP. He indicated that the Australian Government had in train additional plans to support the uptake of OIE animal welfare programmes in collaboration with the OIE.

88. Dr Murray stated that the 2nd Edition of the RAWS (2013-2015) had been endorsed by the Regional Commission at its meeting in Paris on 27th May 2013. It had now been published in six languages and could be accessed at: http://www.daff.gov.au/animal-plant-health/welfare/regional_animal_welfare_strategy_for_asia_the_far_east_and_oceania

89. He also stated that the RAWS Coordination Group (RAWS CG) had held its 6th Meeting on 26th August 2013 in association with the OIE Seminar for National Animal Welfare Focal Points for Animal Welfare, held in in Seoul, Republic of Korea. Key conclusions were that good progress on animal welfare was being made in a number of countries, though animal welfare implementation remains a work in progress.

90. He also added that the RAWS Action Plan had been refined for Regional Commission endorsement and noted that the Regional Commission and OIE Delegates had key roles in driving this forward including reporting on developments for inclusion in the RAWS Newsletter. Several Projects had been endorsed, including the development of a web-based animal welfare information system for the Region; the joint management of an OIE/WSPA Workshop on Animals in Emergencies; and exploring the feasibility of constructing a searchable database for animal welfare and training.

91. Finally, Dr Murray indicated that the RAWS CG was due to hold its 7th meeting in March 2014 in association with an EU training course on animal welfare in Bangkok, Thailand, followed by its 8th Meeting, with OIE Animal Welfare Focal Points, in Australia in late 2014.

92. To conclude, Dr Murray mentioned that the RAWS CG was being funded until December 2015 under a Deed of Agreement between DAFF and the OIE. In addition, and at its own expense, Australia would continue to provide the Secretariat for the RAWS CG until December 2014. The Regional Commission was invited to endorse the RAWS Action Plan and the proposed projects, and discuss key issues arising from the Report of the 6th RAWS CG.
Discussion

93. The Chairperson of the Conference, Dr Catbagan, thanked Dr Murray for the excellent presentation and opened the floor to discussions.

94. A representative of the Philippines took the opportunity to express the gratitude of her country to the support provided by the OIE Improved Animal Welfare Programme. She explained that, thanks to this programme, a group of five veterinarians benefitted of a three month training in Australia. She extended her thanks, on behalf of the Philippines, to the Government of Australia.

95. The President of the OIE World Assembly of Delegates, Dr Karin Schwabenbauer, expressed her admiration of the way the Region deals with animal welfare issues through the Regional Animal Welfare Strategy. Making reference to the early stage of a strategy in her Region, she commented that Europe would be the beneficiary of the lessons learned through this strategy so to implement the same principles in Europe, if applicable.

96. After the proposal of Dr Stone, the Regional Commission for Asia, the Far East and Oceania endorsed at unanimity the recommendations provide by Dr Murray as follows;

1. **Note** the recommendations of the report of the sixth RAWS CG meeting in August 2013.

2. **Endorse** the nature of the revised RAWS Action Plan and **note** the key role of OIE Delegates in progressing the RAWS Action Plan, including reporting on developments for inclusion in the RAWS newsletter.

3. **Endorse** the RAWS communications strategy.

4. **Endorse** the agreed role and functions of the RAWS CG secretariat.

5. **Note** the proposed RAWS CG projects: development of a dedicated RAWS website; a joint OIE/WSPA workshop on disaster animal management; and initial scoping of a stocktake and searchable database of animal welfare education and training courses in the region.

6. **Note** the publication and distribution of RAWS (Edition 2) in regional languages.

7. **Note** the seventh RAWS CG meeting planned for March 2014 in Bangkok, and the eight RAWS CG meeting planned for Australia in November 2014.

8. **Consider** issues relating to the RAWS CG and future secretariat activities.

9. **Note** the rollout of Improved Animal Welfare Program (IAWP) training and evaluations in the countries supported by IAWP.

**OIE Terrestrial Animal Health Standards Commission – Issues of interest to the Region – Challenges and proposals**

97. The Session Chairperson invited Prof. Stuart MacDiarmid, Member of the Terrestrial Animal Health Standards Commission, to present issues of interest to the Region and challenges and proposals regarding the activities of this Specialist Commission.

98. Prof. MacDiarmid outlined a number of the issues that were discussed by the Code Commission at its September 2013 meeting, the report of which had recently been published on the OIE website. Prof. MacDiarmid strongly urged all Member Countries to review this report carefully and offer critical comment for the Commission’s February 2014 meeting. Among the more important topics for the Region, he discussed the proposed revised definition for ‘emerging disease’ and the clarifications made to notification requirements for emerging diseases. The revised definition and notification requirements also required a clarification of the criteria for listing diseases as notifiable to the OIE.

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Some animal welfare issues were also covered in Prof. MacDiarmid’s presentation. He mentioned that tables and figures proposed for deletion from Chapters 7.5. and 7.6. of the Terrestrial Animal Health Code had been restored in response to comments from Member Countries. He described how the Commission had responded to comments from Member Countries in the Region to address the issue of electrical stunning of poultry with direct current and how the new draft chapter on animal welfare in dairy cattle production systems had received many comments from Member Countries. Regrettably, many suggestions on this chapter from Member Countries were not supported by a rationale and so the Commission was not able to accept them.

Prof. MacDiarmid reported that some 300 comments on the revised Code chapter on foot and mouth disease had been received from Member Countries. The Commission had worked through these comments, separating those on structural or editorial matters from those for which expert scientific advice was required. He stated that once that scientific advice had been received, the Commission would produce a further revised chapter for Member Countries to comment on.

Among the other issues dealt with by the Commission at its February meeting, Prof. MacDiarmid mentioned a revised Code chapter on Rift Valley fever with a novel approach to managing the trade risks in infected countries. He also referred to a new draft chapter on the international movement of competition horses of superior health status and urged Member Countries in the Region to offer critical comment on this new chapter. He also advised that a new chapter on porcine reproductive and respiratory syndrome (PRRS) had been drafted but would not be available for Member Countries to comment on until after the February 2014 meeting of the Commission.

Member Countries had asked the Commission to include reptiles in the Terrestrial Animal Health Code. Prof. MacDiarmid stated that the Commission considered that sanitary issues around trade in reptiles and their products are significant, and there are calls for guidance on the welfare aspects of killing reptiles. However, a decision to include reptiles would have wide ramifications for the work of the Specialist Commissions and needed to be considered carefully and taken by the OIE as a whole, not just by the Terrestrial Animal Health Standards Commission.

Finally, Prof. MacDiarmid advised the Member Countries on the best way to offer critical comment after the Commission’s September and February meetings and urged all Member Countries in the Region to take a more active part in the development of international standards, which are so important for safe trade in animals and animal products while, at the same time, protecting and improving animal health and welfare in the Region.

Discussion

Dr Catbagan, Chairperson of the Conference, thanked Prof MacDiarmid for his excellent presentation and opened the floor to discussion.

Dr Schipp, Delegate of Australia and Member of the OIE Council, questioned the fact that Trichinellosis was a listed disease even if recent meeting of the ad hoc group concluded that it was impossible to develop globally applicable criteria for all species of Trichinella.

Prof. MacDiarmid responded that indeed, it may seem in contradiction with one of the criteria for listed disease related to the possibility for a country to be free from all species of Trichinella. He then went on explaining that a country could declare freedom from a single species using the current criteria of Chapter 1.4.

The Delegate of New Zealand, making reference to a change in the definition of “emerging disease”, requested clarifications regarding the triggers for notifying the OIE so to ensure a harmonised approach, among Member Countries, to this kind of diseases.
108. Prof. MacDiarmid indicated that the signification of the definition of “emerging disease” remained basically the same. He highlighted the responsibility of Members regarding the notification of emerging diseases as the information provided by the Member Countries would support the OIE in the decision to include or not a disease on the OIE list.

109. The Delegate of Indonesia asked for clarifications regarding the standards on the movement of horses. Prof. MacDiarmid invited him to carefully read the current report of the OIE Terrestrial Animal Health Standards Commissions and proposed that detailed information on that important topic be provided by Dr Munstermann from the OIE Headquarters on a presentation to come.

Animal health situation of Member Countries in the region during the first semester of 2013

110. The Session Chairperson, Dr Matthew Stone, Delegate of New Zealand, invited Dr Karim Ben Jebara, Head of the OIE Animal Health Information Department to present the animal health situation of Member Countries in the region during the first semester of 2013.

111. This report is based on selected information extracted from national reports submitted by Member Countries of the OIE Regional Commission for Asia, the Far East and Oceania in preparation for the Regional Conference, relevant information from immediate notifications and follow-up reports received in 2013 up to 31 October and official data contained in the World Animal Health Information Database (WAHID).

112. In preparation for the Conference, the OIE requested Member Countries of the Regional Commission to provide a report on their animal health situation and the activities of their Veterinary Services in 2013. The following 20 OIE Members provided a report: Australia, Bhutan, Brunei, China (People’s Rep. of), Chinese Taipei, India, Iraq, Japan, Korea (Rep. of), Mongolia, Myanmar, Nepal, New Caledonia, New Zealand, Papua New Guinea, Philippines, Russia, Singapore, Sri Lanka and Vietnam.

113. This report will begin with a review of exceptional events reported to the OIE by countries in the region in 2012 and up to 31 October 2013. Trends in the submission of six-monthly and annual reports between 2005 and 2012 will be described. The report will then review the recent animal disease situation in Asia, the Far East and Oceania for selected OIE-Listed diseases, five terrestrial animal diseases, namely sheep and goat pox, highly pathogenic avian influenza due to H5N1 (HPAI H5N1), low pathogenic avian influenza (LPAI), classical swine fever (CSF) and foot and mouth disease (FMD), and one aquatic animal disease, namely infection with Perkinsus olseni. The report will end with a short review of a non-OIE-Listed disease namely Bovine anaemia caused by Theileria orientalis ikeda, spotted in the report on the animal health situation of New Zealand in preparation for the Regional Conference.

I. Exceptional epidemiological events and diseases

114. Figure 1 shows the exceptional epidemiological events notified by OIE Members in Asia, the Far East and Oceania between January 2012 and 31 October 2013.
115. During this period, a total of 61 immediate notifications were submitted. The years 2012 and 2013 were clearly marked by reoccurrences of FMD in OIE Members of the region (14 notifications), the occurrence of new FMD serotypes (5 notifications), as well as exceptional events involving HPAI, with 20 notifications, and LPAI, with seven notifications. Exceptional events involving other terrestrial and aquatic animal diseases were also identified and notified.

II. Six-monthly reports

116. As of 31 October 2013, 55 terrestrial or aquatic six-monthly reports from OIE Members in Asia, the Far East and Oceania had been submitted to the OIE for the second semester of 2012, and 35 reports for the first half of 2013. For the second semester of 2012, 32 OIE Members (91%) had submitted their terrestrial six-monthly report and 23 countries (66%) had submitted their aquatic six-monthly report. For the first semester of 2013, 22 (63%) had submitted their terrestrial six-monthly report and 13 (37%) had submitted their aquatic six-monthly report (Table 1).
Table 1: Second six-monthly reports for 2012 and first six-monthly reports for 2013, by type of report (aquatic or terrestrial), submitted to the OIE (as of 31 October 2013) by OIE Members in Asia, the Far East and Oceania

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<tr>
<td>27 Papua New Guinea</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>28 Philippines</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>29 Russia</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>30 Singapore</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>31 Sri Lanka</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>32 Thailand</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>33 Timor-Leste</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>34 Vanuatu</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>35 Vietnam</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

117. In Asia, the Far East and Oceania, in addition to reporting disease absence and presence for OIE listed terrestrial animal diseases, a high proportion of OIE Members regularly submit information for aquatic animal diseases, given the importance of fisheries and aquaculture in this region. This is a very positive contribution to ensuring transparency in the regional animal disease situation. Some countries do not report information to the OIE on a regular basis, such as Papua New Guinea, which has not yet sent its six-monthly reports for 2012 and 2013. Timor-Leste, a new Member Country, has not yet started to submit reports but has given an undertaking to provide them very shortly.
III. Transparency of the world animal health situation: trends in animal disease reporting to the OIE by OIE Members of the Asia, the Far East and Oceania region, compared to the worldwide situation, between 2005 and first semester 2013

118. Figure 2 shows the number of OIE Members in Asia, the Far East and Oceania that submitted completed six-monthly reports for terrestrial and/or aquatic animal diseases for the period from 2005 to the first semester of 2013.

Figure 2: Number of OIE Members in Asia, the Far East and Oceania having submitted six-monthly reports for terrestrial and/or aquatic animal diseases, for the period 2005 to first semester 2013 (as of 31 October 2013)

119. As shown in Figure 2, there was an increase in the number of reporting OIE Members in the region between 2006 and 2008, a period during which some countries not previously reporting regularly to the OIE started to submit six-monthly reports on a regular basis. This was the case with Bangladesh, Fiji, Iraq, Korea (Dem. People’s Rep. of), Maldives, Micronesia (Fed. States of), Pakistan and Papua New Guinea (as a new Member Country). Since 2007, the number of reporting OIE Members has been quite stable, at around 34 (i.e. almost all the OIE Members of the region). However, lower numbers have been observed for 2013, due to a delay in the submission of six-monthly reports by some OIE Members. In the case of aquatic animal reports, the number of countries providing information increased until 2009. Between 2006 and 2009, in addition to some of the countries listed above, Afghanistan, Malaysia, Myanmar, Philippines and Russia started to submit aquatic six-monthly reports on a regular basis. Cambodia, Micronesia (Fed. States of) and Pakistan have never provided any reports on aquatic animal diseases.

IV. Evaluation of submission times of 2012 reports by OIE Members in the region

For the OIE Early Warning System

120. To improve the scope and efficiency of the OIE’s early warning system, events of epidemiological significance should immediately be notified to the OIE Headquarters. The various reasons justifying an immediate notification are described in the Terrestrial Animal Health Code\(^1\) and the Aquatic Animal Health Code\(^2\) (Chapter 1.1., Article 1.1.3.).

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1. [http://www.oie.int/en/international-standard-setting/terrestrial-code/access-online/?htmfile=chapitre_1.1.1.htm](http://www.oie.int/en/international-standard-setting/terrestrial-code/access-online/?htmfile=chapitre_1.1.1.htm)
2. [http://www.oie.int/index.php?id=171&L=0&htmfile=chapitre_1.1.1.htm](http://www.oie.int/index.php?id=171&L=0&htmfile=chapitre_1.1.1.htm)
121. Table 2 presents the time observed between the confirmation of exceptional events and submission of the corresponding immediate notifications to the OIE, for OIE Members in Asia, the Far East and Oceania between January 2012 and 31 October 2013.

122. Eight OIE Members submitted a report within 24 hours of confirmation of the event (in line with OIE requirements). Ten OIE Members submitted immediate notifications within 2 to 7 days of confirmation of the event. Six OIE Members submitted immediate notifications between one week and one month after confirmation of the event. Lastly, four countries submitted immediate notifications more than one month after confirmation of the event.

123. The results observed in the region in 2012 and 2013 could be improved upon, since many countries did not follow OIE requirements and, as indicated above, they notified the OIE of the events more than 24 hours after their confirmation. It is essential for countries to react rapidly and notify exceptional epidemiological events quickly so that other countries can be informed of exceptional animal disease events in a timely fashion and take the necessary preventive measures to avoid the spread of pathogens.

Table 2: Time observed between confirmation of an exceptional event and submission of the corresponding immediate notification to the OIE for OIE Members in Asia, the Far East and Oceania between January 2012 and 31 October 2013

<table>
<thead>
<tr>
<th>Time between confirmation and submission</th>
<th>Country/territory</th>
<th>Reason for notification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Within 24 hours after confirmation (time limit required by the OIE)</td>
<td>Australia</td>
<td>F.O. LPAI</td>
</tr>
<tr>
<td></td>
<td></td>
<td>R. HPAI x2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>R. LPAI</td>
</tr>
<tr>
<td></td>
<td>China (People’s Rep. of)</td>
<td>N.S. FMD x2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>N.S. LPAI</td>
</tr>
<tr>
<td></td>
<td></td>
<td>R. FMD x4</td>
</tr>
<tr>
<td></td>
<td></td>
<td>R. HPAI x2</td>
</tr>
<tr>
<td></td>
<td>Chinese Taipei</td>
<td>F.O. HPAI</td>
</tr>
<tr>
<td></td>
<td></td>
<td>N.S. FMD</td>
</tr>
<tr>
<td></td>
<td></td>
<td>R. HPAI</td>
</tr>
<tr>
<td></td>
<td></td>
<td>R. LPAI x2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>R. Rabies</td>
</tr>
<tr>
<td></td>
<td>India</td>
<td>F.O. HPAI</td>
</tr>
<tr>
<td></td>
<td>Japan</td>
<td>N.H. Viral haemorrhagic septicaemia</td>
</tr>
<tr>
<td></td>
<td>Russia</td>
<td>N.S. FMD</td>
</tr>
<tr>
<td></td>
<td>Sri Lanka</td>
<td>F.O. LPAI</td>
</tr>
<tr>
<td></td>
<td>Vietnam</td>
<td>R. HPAI</td>
</tr>
<tr>
<td>Between 2 and 7 days</td>
<td>Bhutan</td>
<td>R. HPAI</td>
</tr>
<tr>
<td></td>
<td>Cambodia</td>
<td>R. HPAI x3</td>
</tr>
<tr>
<td></td>
<td>China (People’s Rep. of)</td>
<td>N.S. FMD</td>
</tr>
<tr>
<td></td>
<td>Chinese Taipei</td>
<td>R. FMD x4</td>
</tr>
<tr>
<td></td>
<td>India</td>
<td>F.O. HPAI x2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>F.O. PRRS</td>
</tr>
<tr>
<td></td>
<td></td>
<td>R. HPAI x2</td>
</tr>
<tr>
<td></td>
<td>Korea (Dem. People’s Rep. of)</td>
<td>N.S. HPAI</td>
</tr>
<tr>
<td></td>
<td>Mongolia</td>
<td>R. FMD x2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>R. sheep pox and goat pox</td>
</tr>
<tr>
<td></td>
<td>Myanmar</td>
<td>R. HPAI</td>
</tr>
<tr>
<td></td>
<td>New Zealand</td>
<td>N.H. Infection with Perkinsus olseni</td>
</tr>
<tr>
<td></td>
<td>Russia</td>
<td>R. CSF</td>
</tr>
<tr>
<td></td>
<td></td>
<td>R. FMD x2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>R. sheep pox and goat pox</td>
</tr>
</tbody>
</table>

3 “Confirmation” is defined as the date of laboratory confirmation tests reported in the immediate notifications or as the date of clinical confirmation.
<table>
<thead>
<tr>
<th>Between one week and one month</th>
<th>Chinese Taipei</th>
<th>F.O. HPAI</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>N.S. LPAI</td>
</tr>
<tr>
<td></td>
<td></td>
<td>R. FMD x2</td>
</tr>
<tr>
<td>Iraq</td>
<td>R.O. old w. screwworm (C. bezziana)</td>
<td></td>
</tr>
<tr>
<td>Japan</td>
<td>F.O. Maedi-visna</td>
<td></td>
</tr>
<tr>
<td>Nepal</td>
<td>R. HPAI</td>
<td></td>
</tr>
<tr>
<td>Papua New Guinea</td>
<td>R. Newcastle disease</td>
<td></td>
</tr>
<tr>
<td>Singapore</td>
<td>F.O. Avian chlamydiosis</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>R.: reoccurrence</td>
</tr>
<tr>
<td></td>
<td></td>
<td>F.O.: first occurrence</td>
</tr>
<tr>
<td></td>
<td></td>
<td>N.S.: identification of new strain</td>
</tr>
<tr>
<td></td>
<td></td>
<td>N.H.: identification of new host</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>More than one month</th>
<th>Brunei</th>
<th>R. white spot disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mongolia</td>
<td>R. classical swine fever</td>
<td></td>
</tr>
<tr>
<td>Russia</td>
<td>R. sheep and goat pox</td>
<td></td>
</tr>
<tr>
<td>Singapore</td>
<td>F.O. leishmaniosis</td>
<td></td>
</tr>
</tbody>
</table>

For the OIE Monitoring System

124. The OIE recommends a submission time not exceeding one month after the end of the semester for six-monthly reports and 45 days after the end of the year for annual reports. This is to enable the information to be published rapidly after each time period in order to make it available to the public and stakeholders.

125. Figure 3 uses boxplots to show the distribution of submission times of OIE Members in Asia, the Far East and Oceania for six-monthly and annual reports between 2009 and 2012. These submission times are compared to the submission times for all OIE Members reporting to the OIE. This delay reflects the time needed for OIE Members to collect the information after the end of a given semester or year. The time required to collect information on OIE-listed diseases can vary from one country to another, depending on the Veterinary Services, the size of the country, its animal health situation and its livestock population.

126. Overall, between 2009 and 2012 there was an improvement in submission times at the global level, shown by a decrease in the number of days taken to submit reports year after year. As shown in Figure 3, OIE Members in Asia, the Far East and Oceania followed the general trend for six-monthly and annual reports. In 2012, the median submission time of countries in Asia, the Far East and Oceania submitting the first and the second six-monthly reports was circa 76 days. For the annual report, the trend was for a decrease at both the global and the regional level between 2009 and 2011. However, in 2012, the global median was higher than the previous year with 119 days, as was also the regional median, with 123 days.

127. Countries of the region should pursue their efforts to submit information in a timely manner; the OIE Animal Health Information Department is dedicated to supporting countries to maintain the trend for improvement.
Figure 3: Submission time of six-monthly and annual reports from OIE Members in Asia, the Far East and Oceania, and from all countries reporting to the OIE, between 2009 and 2012

Table 3 gives a summary of six-monthly and annual report submission times for OIE Members in Asia, the Far East and Oceania for 2012. Eight OIE Members met the OIE’s recommendations in terms of submission time. A considerable number of reports were submitted between one month (or one and a half months in the case of annual reports) and three months after the end of the semester/year, which remains acceptable especially for countries with a large livestock population. As shown in the table, 17 countries submitted reports more than three months after the end of the semester/year, 10 countries submitted reports more than six months after the end of the semester/year and four countries have not yet submitted some of their reports. These results are unsatisfactory and the countries concerned should make further efforts to improve their report submission times.
Table 3: Submission times of terrestrial and aquatic six-monthly and annual reports from OIE Members in Asia, the Far East and Oceania, for 2012

<table>
<thead>
<tr>
<th>SUBMISSION TIME CATEGORY</th>
<th>NUMBER OF OIE MEMBERS IN THE CATEGORY</th>
<th>COUNTRY/TERRITORY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submission time within one month (for six-monthly reports) or one and a half months (for annual reports) after the end of the semester/year</td>
<td>8</td>
<td>Bangladesh (Annual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Bhutan (1st / 2nd sem. &amp; Annual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Cambodia (2nd sem.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Iraq (1st sem. &amp; Annual)</td>
</tr>
<tr>
<td>Submission time between one month (for six-monthly reports) or one and a half months (for annual reports) and 3 months after the end of the semester/year</td>
<td>22</td>
<td>Afghanistan (2nd sem.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Australia (1st sem.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Bangladesh (2nd sem.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Brunei (2nd sem.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Cambodia (1st sem. &amp; Annual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>China (People's Rep. of) (1st sem. &amp; Annual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Chinese Taipei (1st / 2nd sem. &amp; Annual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Fiji (1st sem.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>India (1st / 2nd sem.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Iraq (2nd sem.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Korea (Rep. of) (2nd sem.)</td>
</tr>
<tr>
<td>Submission time between 3 and 6 months after the end of the semester/year</td>
<td>17</td>
<td>Afghanistan (1st sem. &amp; Annual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Australia (2nd sem. &amp; Annual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Brunei (1st sem. &amp; Annual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>China (People's Rep. of) (2nd sem.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>India (Annual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Indonesia (1st / 2nd sem. &amp; Annual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Iran (2nd sem. &amp; Annual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Japan (1st / 2nd sem. &amp; Annual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Korea (Rep. of) (Annual)</td>
</tr>
<tr>
<td>Submission time exceeding 6 months after the end of the semester/year</td>
<td>10</td>
<td>Bangladesh (1st sem.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Fiji (2nd sem. &amp; Annual)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Korea (Dem. People's Rep. of) (1st / 2nd sem.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Korea (Rep. of) (1st sem.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Laos (1st sem.)</td>
</tr>
</tbody>
</table>

Report not yet submitted (as of 31 October 2013)


- 21 -
SITUATION IN THE REGION FOR SELECTED OIE-LISTED DISEASES

Sheep and goat pox

129. Sheep pox and goat pox (capripox) are known to be endemic in central and North Africa, the Middle East and some parts of South-East Asia. Capripox is caused by strains of capripoxvirus and produces a characteristic clinical disease in fully susceptible breeds of sheep and goats and would usually be difficult to confuse with any other disease. In indigenous animals, generalised disease and mortality are less common, although they are seen where disease has been absent from an area for a period of time, when intensive husbandry methods are introduced, or in association with other disease agents, such as peste des petits ruminants virus or foot and mouth disease virus. Capripox is a major constraint to the introduction of exotic breeds of sheep and goats, and to the development of intensive livestock production.

130. In the region, 31 OIE Members reported information on sheep and goat pox to the OIE for 2012 and 2013 (up to 31 October): 11 OIE Members\(^4\) (35%) notified that the disease had never been reported and nine OIE Members\(^5\) (29%) notified that the disease had been absent during this period. Eleven OIE Members\(^6\) (36%) declared the disease present. A total of 1119 outbreaks were notified in 2012 and first semester 2013. As of 31 October 2013, Cambodia, Indonesia, Papua New Guinea and Timor-Leste had not provided information for this period. Figure 4 shows the percentage of reporting OIE Members that were affected between 2005 and 2012. The percentage was stable during this eight-year period, with around 35% of reporting OIE Members affected in Asia, the Far East and Oceania.

Figure 4: Percentage of reporting OIE Members affected by sheep and goat pox in Asia, the Far East and Oceania, by semester, between 2005 and 2012

131. In some countries of the region, sheep and goat pox has been present for more than eight years. Indeed, Afghanistan, China (People’s Rep. of), India, Iran and Pakistan have reported sheep and goat pox present in domestic animals continuously since 2005.

\(^4\) Australia, Brunei, Fiji, Maldives, Micronesia (Fed. States of), New Caledonia, New Zealand, Philippines, Singapore, Thailand, Vanuatu

\(^5\) Bhutan, Japan, Korea (Dem. People’s Rep. of), Korea (Rep. of), Laos, Malaysia, Myanmar, Nepal, Sri Lanka

\(^6\) Afghanistan, Bangladesh, China (People’s Rep. of), Chinese Taipei, India, Iran, Iraq, Mongolia, Pakistan, Russia, Vietnam
Iraq provided information for 2007, 2008, and for the period 2010 to first semester 2013, in each case indicating that the disease was present.

Some other OIE Members initially reported the disease present but subsequently reported it absent. In Bangladesh, sheep and goat pox was present between 2007 and the first semester of 2012 and was then reported absent in the second semester of 2012. In Korea (Rep. of), it was reported present in 2007 and has been reported absent since 2008. In Laos, sheep and goat pox was suspected between 2009 and 2011 and was reported absent in 2012. In Nepal, the disease was present between 2005 and 2011 and was then reported absent in 2012. In Vietnam, the disease was present between 2005 and 2012 and was then reported absent in the first semester of 2013. In Chinese Taipei, sheep and goat pox was reported present in 2008 and between 2010 and the first semester of 2012, and was then reported absent in the second semester of 2012. Also, according to Chinese Taipei’s report on its animal health situation in 2013 in preparation for this Conference, no case was observed or detected in the first half of 2013.

Russia reported sheep and goat pox absent between 2005 and 2007, and then reported the disease present in the zones of Khabarovskiy Kray, Primorskiy Kray and Zabaykal’Skij Kray, located in the eastern part of the country, in 2008 and 2010 to 2012. In September 2012 and October 2013, reoccurrences of the disease in the area of Zabaykal’Skij Kray were notified to the OIE through immediate notifications. The last event was resolved in October 2013. In Mongolia, the disease was present between 2006 and 2009 and was then reported absent from 2010 onwards. In January 2013, Mongolia submitted an immediate notification to inform the OIE of a reoccurrence of the disease in the area of Dornogovi. The event was resolved in February 2013.

Finally, in some other countries, such as Malaysia and Sri Lanka, the disease has been reported absent for at least the period from 2005 to 2013. Some countries have only provided information for certain years, indicating the absence of the disease; these include Bhutan (2009 to first semester 2013), Indonesia (2005, 2006 and 2008), Korea (Dem. People’s Rep. of) (2007 to first semester 2013) and Myanmar (2005, 2006 and the second semester of 2012). In Australia, Brunei, Fiji, Maldives, Micronesia (Fed. States of), New Caledonia, New Zealand, Philippines, Singapore, Thailand and Vanuatu, sheep and goat pox has never been reported.

Cambodia, Papua New Guinea and Timor-Leste have not provided any information for sheep and goat pox since at least 2005.

Figure 5 summarises the evolution of sheep and goat pox in Asia, the Far East and Oceania between 2005 and 31 October 2013 and indicates what vaccination programmes were applied in 2012 and the first half of 2013.
Figure 5: Evolution of sheep and goat pox in Asia, the Far East and Oceania between 2005 and 31 October 2013, and vaccination strategies applied in 2012 and the first half of 2013

Table 4 shows the number of sheep and goats vaccinated in routine vaccination programmes in 2012, according to information contained in the six-monthly reports. It also shows the percentage of the total sheep and goat population⁷ that these numbers represent. This percentage gives an idea of the vaccination coverage in the countries. **Chinese Taipei**, Iran and Iraq routinely vaccinated a high proportion of their national sheep and goat population (over 65%). On the other hand, **Pakistan** routinely vaccinated 0.5% of its national sheep and goat population. The calculation has not been done for **Russia** since the presence of the disease was limited to a zone composed of Primorskiy Kray and Zabaykal`Skij Krayin in the eastern part of the country, and Russia did not provide small ruminant population figures by first administrative division, needed to determine the number of small ruminants in the zone where the presence of the disease was notified, but instead provided data on animal populations for the whole country. **Afghanistan, Bangladesh, China (People's Rep. of), India** and **Mongolia** did not provide any figures for routine vaccination.

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⁷ According to the information provided in the OIE annual reports for 2012.
Table 4: Sheep and goats vaccinated in a routine programme in 2012 in OIE Members in Asia, the Far East and Oceania

<table>
<thead>
<tr>
<th>Country/territory</th>
<th>Number of sheep and goats vaccinated in a routine programme in 2012 (percentage of total sheep and goat population)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Afghanistan</td>
<td>No information</td>
</tr>
<tr>
<td>Bangladesh</td>
<td>No information</td>
</tr>
<tr>
<td>China (People’s Rep. of)</td>
<td>No information</td>
</tr>
<tr>
<td>Chinese Taipei</td>
<td>149 422 (89%)</td>
</tr>
<tr>
<td>India</td>
<td>No information</td>
</tr>
<tr>
<td>Iran</td>
<td>51 716 299 (66%)</td>
</tr>
<tr>
<td>Iraq</td>
<td>7 497 354 (83%)</td>
</tr>
<tr>
<td>Mongolia</td>
<td>No information</td>
</tr>
<tr>
<td>Pakistan</td>
<td>491 075 (0.5%)</td>
</tr>
<tr>
<td>Russia</td>
<td>532 507 (Not calculated)</td>
</tr>
</tbody>
</table>

139. In addition to the routine vaccination programmes shown on the map and in the table above, several activities implemented by Veterinary Services for surveillance and control of sheep and goat pox have been reported in OIE Members’ reports on their animal health situation in 2013 in preparation for this Conference. In Chinese Taipei, clinical surveillance is routinely practised, while in Russia, 9500 samples are due to be tested this year within the framework of an annual national surveillance programme.

140. As indicated in this section, sheep and goat pox has been present in Asia for decades. The disease has caused production losses and the number of affected countries has been relatively stable in the past eight years (period of the analysis). A number of countries in Asia have implemented control programmes, notably involving the use of routine vaccination. Additional efforts are necessary to better control and eradicate the disease in affected countries, and to prevent its spread to countries where the disease has never been identified, such as every country in Oceania.

**Highly pathogenic avian influenza due to H5N1 (HPAI H5N1)**

141. Avian influenza is caused by infection with viruses of the family Orthomyxoviridae and placed in the genus influenza virus A. To date, naturally occurring highly virulent influenza A viruses that produce acute clinical disease in chickens, turkeys and other birds of economic importance have been associated only with the H5 and H7 subtypes. HPAI disease may vary from sudden death with little or no overt clinical signs to a more characteristic disease with variable clinical presentations including respiratory signs, nervous signs and diarrhoea. Typically, high morbidity is accompanied by high and rapidly escalating unexplained mortality. However, none of these signs can be considered pathognomonic and confirmatory diagnosis of the disease therefore depends on the isolation or detection of the causal virus.

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8 OIE Manual of Diagnostic Tests and Vaccines for Terrestrial Animals 2013, Chapter 2.3.4., http://www.oie.int/fileadmin/Home/eng/Health_standards/tahm/2.03.04_AI.pdf
142. HPAI H5N1 was first reported in 1997 in Hong Kong (SAR-PRC), and affected a human\(^9\). In late 2003 and in 2004, HPAI H5N1 was restricted to South-East Asia, but in 2005 it spread to Central Asia, Russia and Eastern Europe. In 2006, it reached the African continent and the Middle East for the first time and spread to Western Europe, mainly affecting wild birds. Sixteen OIE Members in Asia, the Far East and Oceania notified the OIE of the presence of the disease in 2006, which marked the peak of the epidemics. In 2008, 15 countries/territories in the region notified the reoccurrence of HPAI H5N1 following its previous eradication or reported its presence as an entrenched disease, thus indicating that the virus was continuing to circulate. These countries/territories were as follows: Bangladesh, Cambodia, China (People’s Rep. of), Hong Kong (SAR-PRC), India, Indonesia (endemic), Iran, Japan, Korea (Rep. of), Laos, Myanmar, Pakistan, Russia, Thailand and Vietnam. The number of countries that reported the presence of the disease to the OIE then slowly decreased up to 2010, when 13 countries were still affected by HPAI H5N1. In 2011, the following countries/territories in the region reported the reoccurrence of the disease: Bhutan, Cambodia, China (People’s Rep. of), Hong Kong (SAR-PRC), India, Iran, Japan, Korea (Rep. of), Mongolia (wild birds), Myanmar and Nepal. The following countries had on-going outbreaks: Bangladesh and Vietnam, as well as Indonesia where the disease was endemic. Since its emergence, this virus has been associated with continuing sporadic cases and small clusters, and a high case-fatality proportion of 59% in humans\(^10\). During 2012, 32 human infections with H5N1 influenza were reported to the World Health Organization (WHO) from Bangladesh, Cambodia, China (People’s Rep. of), Egypt, Indonesia and Vietnam, and 20 (62.5%) of these cases were fatal\(^11\). Although influenza H5N1 remains poorly transmissible among humans, recently published research highlights the potential for mutations that would yield greater transmissibility among mammals\(^12,13\). During 2012 and 2013, outbreaks of HPAI H5N1 have continued to be reported in poultry in 15 countries/territories in Asia, the Far East and Oceania.

143. In Asia, the Far East and Oceania, 34 countries/territories reported information on HPAI H5N1 to the OIE for 2012 and 2013 (up to 31 October): nine countries/territories\(^14\) (26%) notified that the disease had never been reported and 10 countries\(^15\) (29%) notified that the disease had been absent during this period. Fifteen countries/territories (45%) declared the disease present in animals and five of them also reported human H5N1 cases to WHO\(^11\). These countries/territories were as follows: Bangladesh (4 human cases), Bhutan, Cambodia (23 human cases), China (People’s Rep. of) (4 human cases), Chinese Taipei, Hong Kong (SAR-PRC), India, Indonesia (11 human cases), Iran, Korea (Dem. People’s Rep. of), Mongolia, Myanmar, Nepal, Russia and Vietnam (6 human cases).


\(^11\) Cumulative number of confirmed human cases for avian influenza A(H5N1) reported to WHO, 2003-2013, Source: WHO/GIP, data in HQ as of 08 October 2013; http://www.who.int/influenza/human_animal_interface/EN_GIP_20131008CumulativeNumberH5N1cases.pdf

\(^12\) Airborne Transmission of Influenza A/H5N1 Virus Between Ferrets, Sander Herfst et al., Science 336, 1534 (2012); http://www.sciencemag.org/content/336/6088/1534.full.pdf

\(^13\) Experimental adaptation of an influenza H5 HA confers respiratory droplet transmission to a reassortant H5 HA/H1N1 virus in ferrets, Masaki Imai & Al., Nature 486, 420–428 (21 June 2012), http://www.nature.com/nature/journal/v486/n7403/full/nature10831.html

\(^14\) Fiji, Maldives, Micronesia (Fed. States of), New Caledonia, New Zealand, Philippines, Singapore, Sri Lanka, Vanuatu

\(^15\) Afghanistan, Australia, Brunei, Iraq, Japan, Korea (Rep. of), Laos, Malaysia, Pakistan, Thailand
144. **Papua New Guinea** and **Timor-Leste** have not provided information on HPAI for this period.

145. Figure 6 shows the percentage of reporting OIE Members that were affected by HPAI H5N1 between 2005 and 2012 in the region. There was a peak of reporting countries affected in 2006 (i.e. up to 52%), and then a continuous and progressive decrease in the number of reporting countries affected was observed until the end of 2010. In 2011 and 2012, the percentage of reporting countries affected by the disease in the region remained relatively stable, at around 30%.

**Figure 6: Percentage of reporting OIE Members affected by HPAI H5N1 in Asia, the Far East and Oceania, by semester, between 2005 and 2012**

146. HPAI H5N1 has been present for more than eight years in **China (People’s Rep. of), Indonesia** and **Vietnam**, which have reported HPAI H5N1 present every year since 2005. Also, **Cambodia** reported HPAI H5N1 continuously present between 2005 and first semester 2012. The disease was reported absent in the second semester of 2012; however, two recurrences of HPAI H5N1 were notified to the OIE through immediate notifications, in January 2013 (event resolved in February) and in August 2013 (event resolved the same month). **India** has reported HPAI H5N1 present every year since 2006. **Bangladesh** and **Hong Kong (SAR-PRC)** started to provide information on HPAI in WAHIS (World Animal Health Information System) in 2007 and, since then, H5N1 has continuously been reported present.

147. For two countries that reported HPAI H5N1 present in 2012/2013, the disease had been reported absent for several years, with recent recurrences. **Iran** was affected between 2006 and 2008 and a recurrence was notified in 2011 in nearly 1800 poultry in the region of Mazandaran. The event was resolved in January 2012. In **Myanmar**, the disease was present between 2006 and 2008 and a recurrence was notified in 2010. In 2012, the disease was still present in poultry in the region of Baigo Saigaing, whereas it has not been reported in wild birds since 2010.
Four countries reporting HPAI H5N1 present in 2012/2013 were affected later than the OIE Members mentioned above. Bhutan had never reported HPAI until 2010, when outbreaks occurred near the southern border; the disease was then reported present in 2011, 2012 and 2013 in the region of Chhukha. The last HPAI H5N1 event in Chhukha in this region was closed in April 2013. Chinese Taipei had never reported HPAI H5N1 until 2012. An immediate notification was submitted to the OIE in July 2012 to notify the first occurrence of HPAI H5N1, which was due to illegal movement of pet birds that were intercepted at the International Airport. In accordance with the provisions of the OIE Terrestrial Animal Health Code, this event did not affect Chinese Taipei’s H5N1 HPAI-free status. Korea (Dem. People’s Rep. of) provided information for 2007 to 2012, indicating that the disease was absent; however, the country submitted an immediate notification in May 2013, notifying one outbreak in Pyongyang-Si, in a duck farm. All ducks in the infected cages were culled and 500,000 birds were vaccinated in all 12 provinces. The event was closed in May 2013. Nepal started to provide regular information for HPAI through WAHIS in 2009, and H5N1 has been reported present since then.

In Mongolia, the last occurrence of HPAI H5N1 was in 2010 in poultry, but the disease was still reported present in wild birds in 2012. Mongolia reported HPAI absent in both domestic and wild birds in first semester 2013.

In Russia, the last occurrence of HPAI H5N1 was in 2008 in poultry, but the disease was still reported present in wild birds in 2012.

In the following countries, the date of last occurrence of the disease was in 2007 or 2008, after the pandemic crisis: Afghanistan (2007, although the disease was later suspected in 2009), Malaysia (2007), Pakistan (2008) and Thailand (2008). Iraq sent six-monthly reports for only 2007, 2008 and the period 2010 to first semester 2013, and in each case reported HPAI absent; the last HPAI H5N1 outbreaks notified to the OIE were in 2006 through immediate notifications and follow-up reports. The following three countries were affected for a longer period (year of last occurrence shown in parentheses): Japan (2011), Korea (Rep. of) (2011) and Laos (2010).

In Australia, HPAI H5N1 has never been reported but HPAI due to serotypes H7N7 and H7N2 was reported present in 2012 and 2013. Fiji, Maldives, Micronesia (Fed. States of), New Caledonia, New Zealand, Philippines, Singapore, Sri Lanka and Vanuatu have never reported HPAI. Papua New Guinea provided its last information in 2011 and indicated that the disease had never been reported. Brunei provided information for only 2005, 2006, and the period 2009 to 2012, in each case indicating that the disease was absent.

Timor-Leste has not yet provided any six-monthly reports for the period 2005 to 2013.

Figure 7 summarises the evolution of HPAI H5N1 in Asia, the Far East and Oceania between 2005 and 31 October 2013, and indicates the cumulative number of poultry losses (dead or destroyed) during this period. As shown on the map, the losses due to HPAI H5N1 in Asia were considerable between 2005 and 2013. Altogether, more than 100 million poultry died or were destroyed because of the disease in the region. Between 2003 and March 2012, HPAI H5N1 caused an estimated USD 20 billion in economic damage across the globe and, since the disease first occurred, Asia is the continent that has reported the highest number of outbreaks.

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Figure 7: Evolution of HPAI H5N1 in Asia, the Far East and Oceania between 2005 and 31 October 2013, and cumulative number of poultry losses (dead or destroyed) during this period.

155. The control programmes implemented in 2012/2013 in affected countries/territories varied between countries and these are detailed in Table 5. All the countries/territories that reported HPAI H5N1 present in domestic birds during this period have applied stamping out. All the affected countries/territories have applied zoning, with the exception of India, where the disease has been present for 8 years, Indonesia, where the disease is endemic, and Russia, where HPAI H5N1 was reported present only in wild birds. Finally, the majority of the affected countries/territories have reported that vaccination is prohibited. Only China (People's Rep. of), Hong Kong (SAR-PRC), Korea (Dem. People's Rep. of) and Russia have applied mass vaccination in 2012/2013.
Table 5: Control measures for HPAI H5N1 indicated by countries/territories affected in 2012/2013 (source: six-monthly reports, AHS report for the Conference)

<table>
<thead>
<tr>
<th>Country/Territory</th>
<th>Stamping out</th>
<th>Vaccination</th>
<th>Zoning</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>Yes</td>
<td>No (prohibited)</td>
<td>Yes</td>
</tr>
<tr>
<td>Bhutan</td>
<td>Yes</td>
<td>No (prohibited)</td>
<td>Yes</td>
</tr>
<tr>
<td>Cambodia</td>
<td>Yes</td>
<td>No (prohibited)</td>
<td>Yes</td>
</tr>
<tr>
<td>China (People’s Rep. of)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Chinese Taipei</td>
<td>Yes</td>
<td>No (prohibited)</td>
<td>Yes</td>
</tr>
<tr>
<td>Hong Kong (SAR-PRC)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>India</td>
<td>Yes</td>
<td>No (prohibited)</td>
<td>No</td>
</tr>
<tr>
<td>Indonesia</td>
<td>Yes (modified)</td>
<td>No (prohibited)</td>
<td>No</td>
</tr>
<tr>
<td>Iran</td>
<td>Yes</td>
<td>No (prohibited)</td>
<td>Yes</td>
</tr>
<tr>
<td>Korea (Dem. People’s Rep. of)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Mongolia (disease present only in wild birds)</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Myanmar</td>
<td>Yes</td>
<td>No (prohibited)</td>
<td>Yes</td>
</tr>
<tr>
<td>Nepal</td>
<td>Yes</td>
<td>No (prohibited)</td>
<td>Yes</td>
</tr>
<tr>
<td>Russia (disease present only in wild birds)</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Vietnam</td>
<td>Yes (modified)</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>

156. Many activities undertaken by Veterinary Services to control HPAI H5N1 have been reported in affected Members’ reports on their animal health situation in 2013 in preparation for this Conference. For example, Bhutan mentioned the availability of advanced diagnostic facilities for HPAI in its National Centre for Animal Health and indicated that the National Influenza Pandemic Preparedness Plan (NIPPP) and standard operating procedures (SOPs) for response to HPAI outbreaks were revised in 2013. China (People’s Rep. of), Iraq, Myanmar, Nepal and Sri Lanka mentioned the existence of national contingency plans. Korea (Rep. of) and Vietnam highlighted their efforts to raise public awareness. It is also interesting to highlight the fact that Korea (Rep. of) applied a 100% compensation policy for losses. Finally, in 2012 and 2013, Russia and Singapore conducted simulation exercises on HPAI. Regional coordination was also promoted, as the Philippines participated in Association of Southeast Asian Nations (ASEAN) meetings in Indonesia in April 2013 on the subject of HPAI. The Philippines highlighted difficulties encountered in implementing its control programme for avian influenza: lack of technical staff to handle the programme and limited procurement of diagnostic kits and reagents.

157. HPAI H5N1 is a major disease in the region and has caused losses in poultry and some sporadic cases of infection in humans since it was first reported in 2003. Since the peak of the disease in 2006, the number of countries affected has decreased, thanks to early detection and rapid response, and major efforts have been made at national and regional levels during the past few years. However, some countries have experienced difficulties in permanently eradicating the disease, partly because wild birds have played an important role in its dissemination. The number of OIE Members affected by the disease in the region has not decreased since 2011 but has stabilised. Additional efforts will be necessary to prevent the spread of the disease to currently non-affected countries, and to better control and eradicate the disease from affected countries.
Low pathogenic avian influenza (LPAI)

158. On 31 March 2013, the Public Health Authorities of China (People’s Rep. of) notified WHO of three laboratory-confirmed cases of human infection with an influenza A (H7N9) virus not previously reported in humans. As of 27 October 2013, a total of 136 confirmed cases of human infection with avian influenza A (H7N9) virus had been reported to WHO by the China National Health and Family Planning Commission and one case had been reported by the Centers for Disease Control (CDC) of Chinese Taipei. Forty-five of these cases were fatal\(^\text{17}\). LPAI due to virus strain H7N9 should therefore be notified to the OIE when it occurs in poultry and any occurrence of avian influenza due to virus strain H7N9 in animal species other than poultry (i.e. wild birds, swine, etc.) should, in view of its proven zoonotic impact, be notified to the OIE as an emerging disease (new pathogen) as per chapter 1.1. of the Terrestrial Animal Health Code.

159. In Asia, the Far East and Oceania, 25 OIE Members reported information on LPAI to the OIE for 2012 and 2013 (up to 31 October): 14 OIE Members\(^\text{18}\) (56%) notified that the disease had never been reported and five countries\(^\text{19}\) (20%) notified that the disease had been absent during this period. Six OIE Members (24%), Australia, China (People’s Rep. of), Chinese Taipei, Iran, Iraq, Korea (Rep. of), Nepal and Sri Lanka, declared the disease present. Afghanistan, Cambodia, India, Pakistan, Papua New Guinea, Russia, Timor-Leste and Vietnam have not provided any information for this period.

160. Figure 8 shows the percentage of OIE reporting Members in the region that were affected by LPAI between 2005 and the first semester of 2013. The percentage has been relatively stable over the years, with around 20% of the reporting OIE Members affected by LPAI.

Figure 8: Percentage of OIE reporting Members in Asia, the Far East and Oceania affected by LPAI, by semester, between 2005 and the first half of 2013

161. Afghanistan reported LPAI present in 2009, but without indicating the incriminated serotype. The disease was then reported absent in 2010 and 2011. No information was reported for 2006 to 2008 and 2012 to 2013.

\(^{17}\) Number of confirmed human cases of avian influenza A(H7N9) reported to WHO, as of 25 October 2013, http://www.who.int/influenza/human_animal_interface/influenza_h7n9/10u_ReportWebH7N9Number.pdf

\(^{18}\) Bhutan, Brunei, Indonesia, Laos, Maldives, Micronesia (Fed. States of), Mongolia, Myanmar, New Caledonia, New Zealand, Philippines, Singapore, Thailand, Vanuatu

\(^{19}\) Bangladesh, Fiji, Japan, Korea (Dem. People's Rep. of), Malaysia
162. **Australia** reported the first occurrence of LPAI in January 2012. LPAI due to serotype H5N3 was detected during routine surveillance in a duck grower farm and associated breeding facility in the zone of Victoria. The event was resolved in June 2012. A reoccurrence of LPAI H5N3 was notified in March 2013. One duck from a flock of backyard poultry was found to be infected; this was an incidental finding. Laboratory tests have shown that the virus is of Australian lineage. The event was resolved in June 2013.

163. **China (People’s Rep. of)** had not provided any information for LPAI in poultry between 2006 and 2012. Just after the first identification of human cases with an influenza A (H7N9) virus in March 2013, the Ministry of Agriculture of China (People’s Rep. of) instructed all provinces to enhance disease surveillance in animals and to investigate the situation in animals where human cases have been reported. China (People’s Rep. of) notified the OIE of the detection of a new strain of LPAI virus (H7N9) in poultry on 4 April 2013. Samples were taken from birds in a live bird market in Shanghai following the appearance of human cases of influenza A (H7N9) in the area. Seven chickens and a pigeon were found to be positive following laboratory tests undertaken in Harbin Veterinary Research Institute. Control measures were subsequently implemented, in particular stamping out (more than 20 000 animals in the affected market were culled), movement control inside the country and control of wildlife reservoirs. Positive laboratory results continued to be reported, with nine follow-up reports notifying a further 20 outbreaks. The last follow-up report was submitted on 21 May 2013. In total, 53 cases were reported, mainly from live bird markets in nine provinces, namely Anhui, Fujian, Guangdong, Henan, Jiangsu, Jiangxi, Shandong, Shanghai and Zhejiang. Out of the 53 positive samples, 48 samples were from poultry and the environment, one from a wild pigeon and four from domestic pigeons. These 53 samples were the only ones that tested positive out of a total of 2.79 million samples tested. Nearly 111 000 birds were destroyed and the event is still continuing. Up to May 2013, the date of submission of the last follow-up report to the OIE, 132 human cases had been reported to WHO. Additional human cases were subsequently notified, in July (two cases) and more recently in October (2 cases); the OIE has not received any reports of animal cases, even though the Chinese Authorities have implemented surveillance in animals in the regions where the human cases were found. Environmental samples (animal faeces, waste water, etc.) from related live bird markets may also have been tested, but the OIE has not received any report of positive environmental samples. This situation raises questions on the tracing back of human cases to identify a potential animal source and on the methods of monitoring and sampling implemented in animals, as it appeared that live bird markets posed a significant risk of AI virus infecting humans and poultry. The most recent human cases indicate that the virus is still circulating at low level.

164. Surveillance tracing back from human cases is likely to throw up false-negatives in birds because of the time lapse between human exposure and sampling of the birds. The birds to which the human case was exposed are likely to have recovered, moved on, or been consumed by the time the tracing back investigation is performed. These factors should be taken into account, as well as increasing the number of animals sampled during tracing back. It may also be useful to ascertain whether cleansing and disinfection were properly implemented. If they were not, environmental sampling may produce some positive results as the virus can survive outside the host for some time.

165. It is now clear that the closure of live poultry markets linked with human cases is a very efficient measure.

166. **Chinese Taipei** reported LPAI absent in 2006 and 2007. Infection due to H5N2 was then identified in the second semester of 2008. The disease was absent in 2009, before a reoccurrence of serotype H5N2 in 2010. In 2011, serotype H7N3 was also reported. In the second semester of 2012, LPAI due to serotype H5N2 was limited to the zones of Chang-hua, Chia-I, I-Lan, Miao-Li, Peng-Hu and Tai-Chung. In August 2013, an immediate notification was submitted to the OIE for the detection of serotype H5N3 in a duck farm in the zone of Hua-Lien.
167. **Iran** has been reporting LPAI present since 2007. However, the serotypes were not reported.

168. Similarly, **Iraq** reported LPAI present in 2007, 2008 and from 2010 to first semester 2013, but the serotypes were not reported.

169. **Japan** reported LPAI absent in 2006, 2007 and 2008. In 2009, sampling within the framework of the regular monitoring programme for avian influenza detected infection due to serotype H7N6. The disease was then reported absent between 2010 and 2013.

170. **Korea (Rep. of)** has been reporting LPAI present since 2006. Serotype H7N8 was present in 2007, H5N2 in 2008 and H7N2, H7N6 and H7N7 in 2010. The incriminated serotype was not indicated for 2011 and 2012.

171. **Nepal** reported LPAI present in 2006, 2007 and 2008. The disease was then reported absent in 2009 and 2010, before a reoccurrence in 2011 and 2012. The serotypes were not reported.

172. **Papua New Guinea** suspected the presence of LPAI in 2010 and 2011. No further information has been submitted to the OIE. However, Papua New Guinea mentioned in the report on its animal health situation in 2013 in preparation for this Conference that the Institute of Medical Research was working with the Veterinary Services to characterise avian influenza viruses circulating in wild birds, in domestic free-ranging poultry and in commercial poultry in various locations in the country. The preliminary results of this surveillance programme showed no circulating avian influenza viruses in the various poultry populations sampled.

173. **Sri Lanka** reported LPAI continuously absent between 2006 and 2011. In January 2012, LPAI due to H5N2 occurred in two farms in the region of Kurunegala and the event was closed in February 2012 after the two affected farms had been depopulated and disinfected. In the following semesters, LPAI was reported absent.

174. **Bhutan, Brunei, Indonesia, Laos, Maldives, Micronesia (Fed. States of), Mongolia, Myanmar, New Caledonia, New Zealand, Philippines, Singapore, Thailand** and **Vanuatu** have never reported LPAI. It is worth pointing out that the identification of LPAI virus needs an active surveillance programme to sample birds and ascertain whether or not they are infected with the virus. In the absence of an active control programme to sample poultry farms or wild birds, it is impossible to detect the presence of the virus. **Bangladesh** reported LPAI absent between 2007 and 2012. **Fiji** reported LPAI absent between 2008 and 2012. **Korea (Dem. People’s Rep. of)** reported LPAI absent in 2007, 2012 and first semester 2013; no information was provided on LPAI for 2006 and for 2008 to 2011. **Malaysia** reported LPAI absent between 2006 and 2013. **Pakistan** reported LPAI absent in 2009; no information was provided on LPAI for 2006 to 2008 or for 2010 to 2013.

175. **Cambodia, India, Russia** and **Vietnam** have not provided any information on LPAI between 2006 and 2013. **Timor-Leste**, as a new Member Country, has not yet submitted any report to the OIE.

176. **Bhutan, Myanmar, Singapore** and **Vietnam** mentioned in their report on their animal health situation in 2013 in preparation for this Conference that, following the outbreak of avian influenza H7N9 in China (People’s Rep. of) in April 2013, they had strengthened their surveillance and control and prevention measures for avian influenza.

177. Figure 9 summarises the evolution of LPAI in Asia, the Far East and Oceania between 2005 and 31 October 2013, and the serotypes identified during this period.
The control programmes implemented in 2012/2013 in affected OIE Members varied and these are detailed in Table 6. Four countries applied stamping out, especially Australia and China (People’s Rep. of) and Sri Lanka, which experienced exceptional LPAI events in 2012/2013. Australia, Chinese Taipei, Nepal and Sri Lanka reported that vaccination was prohibited, whereas Iran and Iraq, countries where LPAI has been reported present for more than six years, applied mass vaccination in 2012/2013. Australia, China (People’s Rep. of) and Chinese Taipei have applied zoning to control LPAI.
Table 6: Control measures for LPAI indicated by OIE Members affected in 2012/2013 (as of 31 October 2013) (source: immediate notifications, six-monthly reports, AHS report for the Conference)

<table>
<thead>
<tr>
<th>Country/Territory</th>
<th>Stamping out</th>
<th>Vaccination</th>
<th>Zoning</th>
</tr>
</thead>
<tbody>
<tr>
<td>Australia</td>
<td>Yes</td>
<td>No (prohibited)</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>(24 500 birds destroyed in 2012)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>China (People’s Rep. of)</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>(110 742 birds destroyed in 2013)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chinese Taipei</td>
<td>No</td>
<td>No (prohibited)</td>
<td>Yes</td>
</tr>
<tr>
<td>Iran</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(393 844 500 birds vaccinated in 2012)</td>
<td></td>
</tr>
<tr>
<td>Iraq</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(1 188 400 birds vaccinated in 2012)</td>
<td></td>
</tr>
<tr>
<td>Korea (Rep. of)</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Nepal</td>
<td>No</td>
<td>No (prohibited)</td>
<td>No</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>Yes</td>
<td>No (prohibited)</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>(14 500 birds destroyed in 2012)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

179. LPAI has been present in many countries of the region for years. Eight different serotypes of H5 and H7 viruses in the region have been reported to the OIE since 2006, date of the start of notification of the disease to the OIE. Most viruses of the H5 and H7 subtype isolated from birds have been of low virulence for poultry, but there is always a risk of their becoming virulent by mutation. Some of these viruses may also have considerable zoonotic potential, and the H7N9 event that occurred this year, which, as of 25 October 2013, had caused the death of 45 people among 137 human cases, is a clear example of this. Several points are still partly unclear, especially the source of the avian influenza H7N9 virus isolated in the affected human cases and the route of transmission. In order to know more about the epidemiology of these viruses, it is essential for all countries to apply proper surveillance programmes, including active surveillance programmes, and report their findings in a timely manner and with maximum transparency. Border control is also important.

**Classical swine fever (CSF)**

180. Classical swine fever (CSF) is a highly contagious viral disease of pigs. The supposed first record of a disease in pigs corresponding to CSF was in 1833 in Ohio, United States of America. The causative virus of CSF is a member of the family Flaviviridae, genus *Pestivirus*. The disease may develop an acute, sub-acute, chronic, late onset or inapparent course, depending on a variety of viral and host factors, of which the age of the animal, the virulence of the virus and the time of infection (pre- or post-natal) are of greatest importance. Transmission between pigs occurs mainly by the oral or oronasal routes, via direct or indirect contact. CSF is often spread by feeding uncooked contaminated swill. The presence of CSF in pig herds can have a severe economic impact on the meat production industry as a result of widespread animal deaths due to the disease as well as trade restrictions on meat exports. The disease has the potential to cause devastating epidemics, particularly in previously free countries. The highly variable clinical picture of CSF often precludes a diagnosis on clinical and pathological grounds alone. Laboratory methods are therefore essential for an unambiguous diagnosis.

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20 Classical swine fever: the global situation, S. Edwards & Al., *Veterinary Microbiology* 73 (2000) 103-119
181. In Asia, the Far East and Oceania, 31 OIE Members reported information on CSF to the OIE for 2012 and 2013 (up to 31 October): nine OIE Members\(^{21}\) (29%) notified that the disease had never been reported and nine countries\(^{22}\) (29%) notified that the disease had been absent during this period. The following 13 OIE Members (42%) declared the disease present: Bhutan, Cambodia, China (People’s Rep. of), India, Indonesia, Laos, Mongolia, Nepal, Philippines, Russia, Singapore, Thailand and Vietnam. Iraq, Pakistan and Papua New Guinea have not provided any information for CSF. Timor-Leste as a new Member country has not yet provided the OIE with any information.

182. Figure 10 shows the percentage of reporting OIE Members in the region that were affected by CSF between 2005 and the first semester of 2013. A slightly decreasing trend can be observed, with around 30% of reporting countries in the region affected by CSF in 2012/2013.

![Figure 10: Percentage of reporting OIE Members affected by CSF in Asia, the Far East and Oceania, by semester, between 2005 and the first half of 2013](image)

183. In nine countries of the region, CSF has been present for more than eight years. China (People’s Rep. of), India, Indonesia, Laos, Nepal, Philippines, Russia, Thailand and Vietnam have reported CSF present or suspected every year since 2005. Russia immediately notified the OIE of the reoccurrence of CSF in the region of Amurskaya Oblast in September 2013, in the Asian part of the country. This event was mentioned as resolved in October 2013.

184. In its report on the animal health situation in 2013 in preparation for this Conference, the Philippines highlighted the national CSF control programme that has existed since 2002. The original objective of this programme was to reduce CSF prevalence by 50% by 2017. However, the country is currently suffering from a shortage of technical staff to handle the programme and is working on its revision to adapt it to the ASEAN Regional Framework for the Control and Eradication of CSF in South East Asia.

185. Four other countries reported the presence of the disease in 2012/2013. In Bhutan and Cambodia, CSF has been reported present in domestic animals since 2010. In Mongolia, CSF had been absent since 2005 before a reoccurrence in September 2012 in a village in the region of Darkhan-Uul. The event was resolved in October 2012. Singapore had reported CSF absent between 2005 and 2011, but in the first semester of 2012 the infection was detected in wild animals. During the following two semesters, CSF was reported absent.

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\(^{21}\) Afghanistan, Bangladesh, Brunei, Fiji, Iran, Maldives, Micronesia (Fed. States of), New Caledonia, Vanuatu

\(^{22}\) Australia, Chinese Taipei, Japan, Korea (Rep. of), Korea (Dem. People's Rep. of), Malaysia, Myanmar, New Zealand, Sri Lanka

187. The date of last occurrence was earlier in **Australia** (1962), **Japan** (1992) and **New Zealand** (1953) and these three countries have reported CSF absent continuously since these dates.

188. **Japan** mentioned in its report on its animal health situation in 2013, in preparation for this Conference, that the guidelines for control of CSF were amended in June 2013. In particular, PCR testing at prefectural Veterinary Service centres is now regarded as the diagnostic method to enable prompt diagnosis in affected/suspected animals. It is also clearly stated that the use of preventive vaccines should be prohibited in ‘peace time’.

189. **Afghanistan, Bangladesh, Brunei, Fiji, Iran, Maldives, Micronesia (Fed. States of), New Caledonia** and **Vanuatu** have never reported the disease. **Iraq** last provided information on CSF in 2008, when it indicated that the disease had never been reported. **Papua New Guinea** last provided reports in 2011, when it indicated that CSF had never been reported in the country.

190. Neither **Pakistan**, nor **Timor-Leste** provided any information on CSF.

191. Figure 11 summarises the evolution of CSF in Asia, the Far East and Oceania between 2005 and 31 October 2013, and indicates what vaccination programmes were applied in 2012/2013. In countries where CSF is endemic, vaccines may be used to protect animals from clinical disease. Vaccines can also be used to reduce the prevalence of infection during an eradication programme.

**Figure 11: Evolution of CSF in Asia, the Far East and Oceania between 2005 and 31 October 2013, and vaccination strategies applied in 2012 and 2013**
192. Out of 12 countries having reported routine vaccination programmes in 2012, only two countries provided the number of pigs vaccinated in their six-monthly reports: Bhutan (240 pigs, equivalent to 1% of the national pig population\(^{23}\)) and Thailand (about 53 000 pigs, equivalent to 0.5% of the national pig population\(^{25}\)). This percentage gives an idea of the vaccination coverage in these countries.

193. In many OIE Members of the region, CSF is enzootic. However, in these areas, good control can be achieved through vaccination, although this implies a substantial cost as well as restrictions on trade with CSF-free areas. Fourteen OIE Members of the region provided information on the number of dead, slaughtered or destroyed animals due to the disease between 2005 and 2013. Altogether, more than 240 000 pigs were lost, with the highest losses having been reported by **China (People’s Rep of)**, **Vietnam** and **India** over the last nine years. Countries may encounter difficulties in progressing towards effective control and eradication, often determined by economic and social factors and technical difficulties. Also, dealing with the presence of infection among wild boar, acting as reservoirs, complicates the control of the disease. However, in some other regions of the world CSF has been successfully eradicated, and it is possible to maintain CSF freedom. In other countries of the region, CSF has never been reported or has been absent for decades. In such countries, strict controls on imports of pigs and pig products, together with regulation of swill feeding are necessary to prevent the introduction of the disease.

194. The OIE Members decided to put CSF in the list of diseases with OIE official recognition pathway starting on 2014.

**Foot and mouth disease (FMD)**

195. Foot and mouth disease (FMD) is caused by a virus of the family Picornaviridae, genus *Aphthovirus*. The relevance of FMD mainly lies in trade disruption in countries or zones officially recognised as FMD free, resulting from the animal disease status of trading partners. FMD also has serious repercussions for livestock due to a reduced growth rate and to morbidity and mortality in young stock.

196. Under the terms of Resolution No. 17 adopted by the 81st World Assembly of Delegates of the OIE in May 2013, and in accordance with the provisions of Chapter 8.5. of the *Terrestrial Animal Health Code*, 10 Member Countries in the Asia, the Far East and Oceania region have an OIE-recognised FMD status, as shown in Table 7.

\(^{23}\) According to the information provided in the OIE annual reports for 2012.
Table 7: Member Countries in the Asia, the Far East and Oceania region with an OIE-recognised FMD status (country or zone) in 2013

<table>
<thead>
<tr>
<th>FMD free where vaccination is not practised</th>
<th>FMD free zone where vaccination is not practised</th>
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<tbody>
<tr>
<td>Australia</td>
<td>Malaysia</td>
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<tr>
<td>Brunei</td>
<td>Philippines</td>
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<td>Indonesia</td>
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<td>Singapore</td>
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<td>Vanuatu</td>
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197. Of the seven FMD serotypes, four (A, Asia 1, O and SAT 2) were identified in the region between 2005 and first semester 2013. To allow a proper epidemiological analysis of FMD progression over time, it is essential for Member Countries to inform the OIE of the serotypes involved in their outbreaks.

198. A semester-by-semester analysis between 2005 and first semester 2013 reveals that 23 among 35 Member Countries in the Asia, the Far East and Oceania region reported the presence of FMD. During this period, 11 Members that reported the disease present at least once, reported the serotype each time. On the other hand, 11 countries reported the serotype but not on a regular basis and Bangladesh never reported the serotype or quantitative data. It is important to note that in 2009, all countries, with the exception of Bangladesh, reported the serotype of FMD and therefore diagnostic capability exists in the region. Mongolia reported the disease as suspected in wild species in 2009. FMD has never been reported in Fiji, Maldives, Micronesia (Fed. States of), New Caledonia, New Zealand, Papua New Guinea and Vanuatu. Four countries reported the absence of the disease continuously: Australia, Brunei, Indonesia and Singapore between 2005 and 2013 (Figure 12).

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24 One zone covering the provinces of Sabah and Sarawak as designated by the Delegate of Malaysia in a document addressed to the Director General in December 2003.

25 - One zone on the islands of Mindanao designated by the Delegate of the Philippines in a document addressed to the Director General in August 2000;
- One zone consisting of the islands of Visayas and the provinces of Palawan and Masbate, as designated by the Delegate of the Philippines in a document addressed to the Director General in August 2000 and December 2001;
- Three separate zones located on the island of Luzon as designated by the Delegate of the Philippines in a document addressed to the Director General in December 2009 and November 2010.

26 China (People's Rep. of), Chinese Taipei, Japan, Korea (Rep. of), Korea (Dem. People's Rep. of), Malaysia, Mongolia, Nepal, Philippines, Russia, Thailand

27 Afghanistan, Bhutan, Cambodia, India, Iran, Iraq, Laos, Myanmar, Pakistan, Sri Lanka, Vietnam

28 No information since 2011.
Figure 12: Distribution of FMD status among the OIE Members of the Regional Commission of Asia, the Far East and Oceania between 2005 and the first half of 2013

![Distribution of FMD status](image)

199. Figure 13 shows the evolution of FMD reporting between 2005 and 2013 and the serotype involved. Three countries reported the disease in one year, the Philippines in 2005 with 84 outbreaks and Japan in 2010 with 292 outbreaks. Korea (Rep. of) reported the disease in 2010 and 2011 with 175 outbreaks. Mongolia reported the disease in 2010 with 9 outbreaks and 3 outbreaks in the second semester 2013. The disease was reported by Korea (Dem. People's Rep. of), Chinese Taipei, Bangladesh, Iraq and Russia with a range of three to six years. Fourteen countries reported the presence of the disease continuously.29

![Evolution of FMD and its serotypes in Asia, the Far East and Oceania between 2005 and the first half of 2013](image)

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29 Afghanistan, Bhutan, Cambodia, China (People’s Rep. of), India, Iran, Laos, Malaysia, Myanmar, Nepal, Pakistan, Sri Lanka, Thailand, Vietnam
Due to the presence of FMD in 23 countries between 2005 and first semester 2013, animal losses were reported and their economic impact acknowledged. Figure 14 shows the average annual animal losses in countries affected by FMD in relation with the number of years of presence of the disease between 2005 and 2013. Losses of livestock related to FMD correspond to the total number of animals that died or were destroyed or slaughtered reported in outbreaks during one year. Out of the 23 countries that reported FMD present at least once during the period of the analysis, 15 (65%) countries systematically reported animal losses each year, whereas seven countries (30%), did not report losses regularly (for some years, only the number of cases was reported or no quantitative information was provided). Bangladesh is the only country that reported just the occurrence code of the disease during all this period.

To evaluate the losses in this period for each country, the analysis is based on an estimate of the average number of LSU by year, taking into account years in which losses were reported. All data on numbers of animals were converted into livestock units (LSU\(^{30}\)) to allow comparisons between species. As large parts of the carcass of slaughtered animals may still be usable, 1 LSU lost to slaughter corresponds to 0.4 LSU value losses. The results show that in countries where the disease is endemic, the losses were moderate (average 393 LSU/year) whereas countries where the disease was reported during one or two years across this period the losses were high (average 28 817 LSU/year). Moreover, the impact of FMD in countries where the disease has been absent for long periods of time is to cause great losses in animals due to the implementation of stamping out as a main control measure. The Philippines had not significant losses in 2005 in terms of LSU with only 46 LSU/year of losses. After 2005 the disease was mentioned as absent.

Japan, Mongolia and Korea (Rep. of) had important losses due to the disease. Japan reported 67 392 LSU of losses in 2010 and Korea (Rep. of) reported 40 264 LSU/year of losses between 2010 and 2011. Mongolia reported FMD present in 2010 and in second semester 2013 and had an average of 4 070 LSU/year of losses (Figure 14).

\[\text{Figure 14: Average of FMD losses reported in LSU by year between 2005 and the first half of 2013} \]

Livestock unit (LSU) conversion rates: Buffaloes (0.69) - Cattle (0.73) - Camelidae (0.78) - Cervidae (0.2) – Sheep/goats (0.1) and Swine (0.23)
Figure 15 shows the average FMD losses for the countries that reported the disease as present during a period of at least six years. In this group, **China (People’s Rep. of)**, with 2501 LSU/year, reported the highest losses during this period, which could be explained by the country’s strategy of implementing stamping out since 2005 to tackle sporadic outbreaks. For countries that have been reporting the disease as endemic, fewer LSU losses have occurred due to the absence of a stamping-out or modified-stamping-out strategy. Indeed, the disease itself does not usually cause many losses in terms of LSU, given that only young animals can be seriously affected. In addition, in some countries the disease is underreported and losses are underestimated (no quantitative data is collected).

**Figure 15: Average FMD losses reported, in LSU by year, for Members reporting FMD present for at least six years between 2005 and the first half of 2013**

According to the exceptional epidemiological events involving FMD reported between January 2013 and October 2013, the following four OIE Members notified the disease as an exceptional epidemiological event: **China (People’s Rep. of)**, **Chinese Taipei**, **Mongolia** and **Russia**. Apart from **Chinese Taipei**, all these countries currently have on-going outbreaks. In early 2013, **China (People’s Rep. of)** and **Russia** notified serotype A as new FMD strains and in July 2013, **Mongolia** reported the first occurrence of serotype A in the country.

1. **Strategy for FMD control/eradication programmes indicated in the animal health situation reports submitted for the Regional Conference**

Various activities undertaken by Veterinary Services to prevent, control or eradicate FMD were described by Member Countries in their reports on their animal health situation in 2013 in preparation for this Conference.

**Australia, New Zealand** and **Singapore** reviewed their national contingency plans in order to strengthen their ability to prevent or respond to an outbreak of FMD, to review the economic impact, update manuals and define roles, responsibilities and policies to be followed by all agencies, government and industry members. In April 2013, the New Zealand Minister for Primary Industries and the Australian Minister for Agriculture, Fisheries and Forestry jointly announced a Trans-Tasman Action Plan (final sign off still pending), which outlines a number of areas for collaboration, including sharing of intelligence, joint training and simulations, and the provision of resources by one country to the other in the event of an FMD (or other exotic disease) outbreak.

- 42 -
207. **Japan** annually conducts an FMD simulation exercise at national, prefectural and local levels. Following the 2013 exercise, it was noted that the preparation for allocation of human resources or equipment was not sufficient in some prefectures and that close coordination among prefectures, municipality and related organisations was essential for a prompt initial response and containment at an early stage. Also, **China (People’s Rep. of)** reported the implementation of a national training programme for official veterinarians on prevention and control of FMD and highlighted progress with related activities, such as the official recognition of an FMD free zone.

208. In **Nepal**, in 2013, a workshop for veterinary planners and veterinary officers from district livestock services on the development of an FMD control strategy was organised by FAO in the eastern region of the country.

209. With regard to FMD control, **Chinese Taipei**, **Iraq**, **Korea (Rep. of)**, **Nepal**, the **Philippines** and **Russia** highlighted their respective active surveillance and monitoring programmes. Some countries placed the emphasis on a mass vaccination policy, such as **Chinese Taipei**. **China (People’s Rep. of)** manufactured 1.2 billion doses of FMD vaccine in the first half of 2013. **Korea (Rep. of)** reported a vaccination rate in 2013 of 97.3% in cattle and 80.6% in swine. In **Nepal**, in the first semester 2013, mass vaccination started in the eastern region of the country. In **Vietnam**, a new budget for the FMD control programme (period 2011-2015) was approved, totalling USD 32.5 million, of which USD 19.5 million is intended for vaccines.

210. **Iraq** works together with the international roadmap for controlling FMD under the supervision of the OIE and the European Commission for the Control of Foot-and-Mouth Disease (EUFMD), through isolation and identification of the virus as a first priority for vaccine matching that will be used in livestock vaccination campaigns. The results of sero-surveillance have shown a decrease in the non-structural protein (NSP) percentage.

211. In **Sri Lanka**, a progressive control pathway has been developed to control FMD and aims to achieve eradication by 2020. The country resumed FMD vaccine production in 2012 to meet local requirements for achieving over 90% vaccination coverage, in compliance with the national FMD control programme.

212. In **Myanmar**, FMD vaccine cannot be produced in sufficient quantities due to technical difficulties and the lack of adequate facilities. The Livestock Breeding and Veterinary Department (LBVD) produces monovalent vaccine against FMD serotype O. The capacity of vaccine production is only enough for controlling outbreaks and covering some hot-spot areas and critical control points. LBVD in conjunction with the International Atomic Energy Agency (IAEA) has developed a programme to monitor the effectiveness of locally produced FMD vaccine. The OIE, Japan, and the IAEA contributed to the FMD vaccines for FMD control in hot-spot areas in 2012 and 2013.
Infection with Perkinsus olseni

213. Infection with Perkinsus olseni affects a wide range of mollusc species, especially clams. Transmission of this protozoan is direct from host to host and infections in clam hosts can be lethal depending on environmental conditions: death may occur one or two years after infection. In heavily infected clams, Perkinsus olseni frequently induces the formation of nodules. The massive aggregation of Perkinsus olseni cells and haemocytes forms lesions that may interfere with respiration and reproduction, growth and/or survival and may thus have an impact on fishery productivity. Infection with Perkinsus olseni was described for the first time in the 1980s in the South of Australia and subsequently occurred throughout Asia, the Far East and Oceania. It has also occurred in Europe and in South America.

214. Based on information from 22 countries/territories of the region providing data in their Annual Reports to the OIE, annual production of farmed molluscs was at least 16 400 000 tonnes, with the biggest producers being China (People's Rep. of) and the Philippines.

215. In the region, 19 OIE Members reported information on infection with Perkinsus olseni to the OIE for 2012 and 2013 (up to 31 October): 11 OIE Members (58%) notified that the disease had never been reported and five countries (26%) notified that the disease had been absent during this period. One country, Vietnam, declared the disease present in domestic molluscs only, and two countries, Australia and New Zealand, declared the disease present in wild molluscs only. Sixteen OIE Members, namely Bangladesh, Brunei, Cambodia, Chinese Taipei, Iran, Iraq, Laos, Micronesia (Fed. States of), Mongolia, Myanmar, Nepal, Pakistan, Papua New Guinea, Russia, Timor-Leste and Vanuatu, have not provided information for this period. Apart from Member Countries, Hong Kong (SAR-PRC) has never reported the infection and French Polynesia reported the disease present in both domestic and wild molluscs.

216. Figure 16 shows the trend in the percentage of affected countries between 2005 and 2012 in Asia, the Far East and Oceania. There were four affected OIE Members out of 12 reporting in 2006. This number decreased gradually between 2007 and 2010, before increasing again since 2011, with more OIE Members in the region becoming infected.

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31 European Union Reference Laboratory for mollusc disease, IFREMER, http://www.eurl-mollusc.eu/Main-activities/Tutorials/Perkinsus-olseni
33 Australia, Bhutan, China (People’s Rep. of), Chinese Taipei, Fiji, French Polynesia (France), Hong Kong (SAR-PRC), India, Indonesia, Iran, Korea (Rep. of), Malaysia, Mongolia, Myanmar, New Caledonia, New Zealand, Papua New Guinea, Philippines, Russia, Singapore, Thailand, Vietnam
34 Afghanistan, Bhutan, China (People’s Rep. of), Fiji, India, Indonesia, Malaysia, Maldives, Philippines, Singapore, Thailand
35 Philippines, Russia, Singapore, Thailand, Vietnam
In **Australia**, the presence of the disease was mentioned between 2005 and 2007. The presence of the pathogen was suspected in 2008. Starting from 2009, with the separation of the occurrence codes in WAHIS between domestic and wild species, when relevant, Australia reported the presence of the disease in wild animals between 2009 and 2011. The disease was suspected in 2012, and confirmed in 2013.

In **New Zealand**, the disease had not been identified in farmed molluscs and was only found in wild bivalves, specifically clams, in the north of the North Island between 2005 and the first semester of 2013. In August 2013, an immediate notification was submitted to the OIE for the occurrence of the disease in a new host species. Infection with *Perkinsus olseni* was confirmed in New Zealand paua (*Haliotis iris*) from a single aquaculture facility. This was the first detection of *Perkinsus olseni* in farmed molluscs in New Zealand. No elevated mortality in the affected farm has been observed. The affected farm had a semi-closed land-based system. The event is continuing, trace-forward and trace-back of movements from the farm are being conducted and the risk of transmission to wild populations is currently being assessed.

In **Vietnam**, infection with *Perkinsus olseni* had not been reported until 2011, when the disease was notified as present. In 2012, the disease was notified as present in Thai Binh, Ho Chi Minh and Quang Ninh provinces.

**French Polynesia** mentioned infection with *Perkinsus olseni* as never reported before 2011. In 2011, apparently healthy clams, collected within the framework of a research project, tested positive by PCR, indicating the presence of *Perkinsus olseni* in shellfish beds and farms. The authorities in French Polynesia assumed that the disease had probably been present for several years without being observed. The event was reported closed in December 2012, but in January 2013 the disease reoccurred, indicating the presence of the protozoan in the wild. Wild pearl oysters collected during routine surveillance tested positive by PCR. The samples were collected in the environment, at three different sites. Horizontal spread through water was identified as being the source of the event. The event was reported closed in May 2013.

In **Korea (Rep. of)**, infection with *Perkinsus olseni* was reported present in 2005, 2006 and 2007 and absent thereafter.

In **Japan** and **New Caledonia**, infection with *Perkinsus olseni* has been reported absent since at least 2005. In **Korea (Dem. People's Rep. of)**, infection with *Perkinsus olseni* has been reported absent since at least 2007. **Sri Lanka** informed the OIE of the absence of the infection in 2005 and in its report for the first semester of 2012 only. No information has been given for the other periods up to 2013.
Afghanistan, Bhutan, China (People’s Rep. of), Fiji, India, Indonesia, Malaysia, Maldives, Philippines, Singapore and Thailand have never reported infection with Perkinsus olseni. This is also the case for Hong Kong (SAR–PRC). Some countries provided their most recent information for the disease a few years ago and, at that time, infection with Perkinsus olseni had never been reported. This is the case for Bangladesh (2011), Chinese Taipei (2010), Vanuatu (2010), Mongolia (2009) and Laos (2005).

Brunei, Cambodia, Iran, Iraq, Micronesia (Fed. States of), Myanmar, Nepal, Pakistan, Papua New Guinea, Russia and Timor-Leste did not provide the OIE with any information on the disease between 2005 and 2013. It should, however, be pointed out that some of these countries, through their annual reports, have informed the OIE that they do not have any mollusc farms. In such cases it is preferable for mollusc diseases to be reported as absent or never reported in domestic molluscs in the six-monthly reports, rather than not providing any information.

As shown in this section, infection with Perkinsus olseni has been present in the region of Asia, the Far East and Oceania for several decades. However, because of poor capacities or inexistent surveillance programmes in certain countries, the exact distribution of the disease is not yet known, with many countries not providing the OIE with information. Furthermore, French Polynesia is an example of a territory that detected the pathogen within the context of a research project rather than through a surveillance system, and it is assumed that the disease had been present for years without being detected by the authorities. This example suggests that similar situations may occur elsewhere. Infection with Perkinsus olseni is a threat to mollusc farms and fisheries in the region, especially since a number of OIE Members in the region are important mollusc producers.

**SITUATION IN THE REGION REGARDING A NON-OIE-LISTED DISEASE**

**Bovine anaemia caused by Theileria orientalis ikeda**

New Zealand has provided information on this disease under the ‘other diseases’ section of its animal health report submitted in preparation for the Conference. Because of the importance of providing information on this disease for countries of the region, an overview of the situation in the region is given.

*Theileria* sp. is a protozoan of cattle that is biologically vectored by *Haemaphysalis* spp. of ticks. The clinical symptomatology ranges from no clinical signs to the presence of anaemia, jaundice, depression, abortion and mortality. The severity of the disease will depend on whether cattle are debilitated by another disease. The potential for disease should be considered when naive cattle are brought in from non-endemic to endemic regions.

New Zealand indicated that the first report of a *Theileria* sp. in cattle was in 1982, when the species *Theileria orientalis* was identified. Subsequently, there were a number of other reports in cattle, and the infection was shown to be relatively widespread in cattle from Northland36.

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In August 2012, a new type of *T. orientalis* was identified in New Zealand: *T. orientalis ikeda*. This type had been previously reported in Japan, Korea (Rep. of) and other Asian countries, as well as in Australia where other types have been isolated\(^{37}\). In New Zealand, the first cases of *T. orientalis ikeda* were diagnosed in Northland. Cases have been confirmed in cattle herds in the north and the central part of North Island. One case has been confirmed in the central part of South Island (Canterbury region). A total of 124 farms have been affected. The average prevalence of anaemia ranges from 10% to 88% and the average proportion of deaths in affected herds is 1.6%. For the purpose of the OIE *Terrestrial Animal Health Code*, Chapter 11.1\(^{38}\), theileriosis is defined as a highly fatal disease in cattle and buffaloes caused by *Theileria parva* and *T. annulata*. *T. orientalis* is thus not notifiable to the OIE; however, it will be interesting to follow the evolution of this new type in the region.

**Discussion**

230. Dr. Matthew Stone, Delegate of New Zealand and Chairperson for the Technical Item II, thanked Dr. Ben Jebara for the impressive amount of information provided and his presentation and opened the floor to the discussion.

231. Dr. Song Junxia, member of the delegation of the P.R. of China, referred to the H7N9 low pathogenic avian influenza notifications made by her country earlier this year and expressed concerns regarding the way positive isolates from environmental samples were reported in WAHID. She proposed that there be a clearer distinction in the presentation of findings from the environment and samples from animals.

232. Dr. Song Junxia expressed her wish for a modification on the WAHIS system so to clearly distinguish the findings from environment and animal samples.

233. Dr. Ben Jebara, Head of the OIE Animal Disease Information Department, explained that this situation could be addressed by properly identifying the epidemiological unit when notifying outbreaks through WAHIS. He made reference to live poultry markets where indeed, avian influenza positive samples from the environment indicate that at least one bird was infected with the virus and as such, this finding should be notified.

234. Dr. Mark Schipp, Delegate of Australia, asked for clarification regarding the obligation for Member Countries to report H7N9 low pathogenic avian influenza occurring in wild birds.

235. Dr. Ben Jebara explained that the zoonotic potential observed recently in Asia with low pathogenic strains of H7N9 would justify the notification to the OIE of occurrence of this subtype in wild birds.

236. Dr. Mark Schipp, Delegate of Australia, making reference to the Technical Item I on economic analysis, suggested that sheep and goat pox be considered as a disease for which cost/benefit analysis should be undertaken.

237. The Delegate of Indonesia reiterated the importance of movement control to prevent the spread of avian influenza between countries and wondered how the countries could protect themselves from being infected.

238. Dr. Ben Jebara responded that the standards of the OIE Terrestrial Animal Health Code, when properly applied, can largely prevent the spread of diseases such as avian influenza.


\(^{38}\) OIE *Terrestrial Animal Health Code*, 2013

http://www.oie.int/index.php?id=169&L=0&htmfile=chapitre_1.11.13.htm
Although the closing of some live bird markets in P.R. of China, linked with human infections, has been successful in drastically reducing the spill over to humans, Dr Ben Jebara considered that other control strategy should be developed in order to maintain such an important cultural component of the country. In any case, he stressed on the need to improve the detection and control of zoonotic avian influenza strains in poultry everywhere so to avoid that humans serve as sentinel.

Dr Stone, Delegate of New Zealand, expressed his concerns regarding the low level of attention given to the recent introduction of acute hepatopancreatic necrosis syndrome (AHNS) which has a strong impact on the economy of the Region. He wondered if any Member Countries notified to the OIE AHNS as an “emerging disease”.

WEDNESDAY 20 NOVEMBER 2013

Technical Item II
PRRS control in the Region

Dr Tung Nguyen, Vice Director, National Centre for Veterinary Diagnostics, Vietnam, gave a brief review regarding porcine reproductive and respiratory syndrome (PRRS). He commented that PRRS was recognised as an economically important swine disease worldwide, characterised by either reproductive failure in pregnant sows or respiratory tract distress, particularly in suckling pigs.

Dr Tung indicated that the aim of his presentation was to review currently available information on highly pathogen PRRS (HP-PRRS) to serve as the basis for developing practical and effective control measures against the disease.

Dr Tung explained that the syndrome had first been recognised in the United States of America (USA) in the mid 1980’s and was called “mystery swine disease” or “blue ear disease”. The causative agent, PRRS virus, was first discovered in the USA in 1987, was subsequently found in Europe and was identified in Asia in the early 1990s.

He highlighted the fact that PRRS was the cause of significant economic losses in pig production worldwide, especially in large-scale production systems.

Dr Tung continued his presentation by commenting that, in China (People’s Rep. of), in 2006, a disease called “porcine high fever syndrome (PHFS)” had emerged and spread throughout the country causing very severe disease in pigs. The disease was characterised by high fever (40-42°C) in all age groups, abortions in sows and high mortality in suckling piglets, weaners and growers. Several laboratories in China isolated PRRS viruses from pigs suffering from PHFS. The subsequent genetic and pathogenicity analysis of those viruses indicated that the disease was associated with an atypical highly virulent strain of PRRS virus. The disease caused by this new variant strain is now called HP-PRRS.

He explained that HP-PRRS, which had thus emerged in China in 2006, had spread to South-East Asian countries from 2007 onwards. He said it had caused severe damage to pig production and had become a burden for pig producers in the region. A clear understanding of the characteristics of the disease, the virus and its epidemiology were now needed so that appropriate control measures could be established and applied in order to reduce the economic losses caused by this disease and prevent its spreading to other regions of the world.

Finally, he mentioned that, since 2006, when HP-PRRS was detected for the first time in China, the disease had spread to at least six countries in South-East Asia by 2012. It had become endemic in some of these countries and was continuing to cause severe problems in pig production.
248. Dr Tung remarked that prevention and control of HP-PRRS was currently the highest priority issue for pig producers and animal health authorities in the region. He noted that scientific knowledge on HP-PRRS had increased in recent years, especially in virology, pathology, and molecular epidemiology. However, he considered that there was still not enough knowledge about the disease to be able to establish fully effective measures and a suitable strategy for prevention and control of the disease.

249. Dr Tung concluded by emphasising that more research was needed to understand the virus and the disease, especially with regard to virus pathogenesis, persistence and transmission, and vaccine development. He considered it important to monitor the disease status and the virus evolution in each country and in the region, and to share that information among all stakeholders. Dr Tung considered it necessary to develop a regional strategy for HP-PRRS control and that coordinated implementation of such a strategy in all countries in the region would essential for successful control of the disease. He finally suggested the OIE develop new standards on conditions for trade of pigs and pig products as well as for quality of vaccines.

Discussion

250. Dr Sen Sovann, Delegate of Cambodia and Chairperson for the Technical Item II, thanked Dr Tung for the detailed presentation and opened the floor to discussions.

251. A representative from the P.R of China agreed with the recommendations suggested by Dr Tung at the end of his presentation and proposed that these recommendations address not only highly pathogenic strains of PRRS but all strains. He stressed on the need for more comprehensive research on that disease.

252. Dr Tung, while agreeing with this comment, reiterated the issue of regular PRRS strains which can circulate without being necessarily diagnosed. He agreed as well on the need for more research and indicated that the P.R. of China was a great source of understanding on PRRS due to research undertaken in that country. He urged for more regional cooperation and sharing information so to improve our knowledge on that disease.

253. The Delegate of Philippines, Dr Catbagan, explained that PPRS was a source of concerns for swine producer in his country.

254. He commented that, although management practices were important in reducing the impact of that disease, more emphasis should be given to the development of proper vaccines for all strains.

255. Dr Tung, making reference to the experience of Vietnam, in the use of vaccines for PRRS, explained that the country not always got the expected results. More precisely, he expressed his concern regarding the use of live vaccines for which he suggested a close monitoring due to the possibility of a mutation of the vaccine strains.

256. The Delegate of Indonesia, after having reminded the different factors influencing infection with PRRS, suggested that the OIE develop guidelines on good farming practices and standards on PRRS including quality of vaccines.

257. A representative of the host country delegation, swine practitioner in the Philippines, provided the Conference with her practical field experience. She explained the success she had in eradicating infection with PRRS on five premises using good management practices combined with vaccination. She reiterated the importance of vaccinating not only breeders but also piglets as passive immunity provided by the colostrum was not sufficient to prevent infection.

258. Dr Sen Sovann closed the discussion by reiterating the importance of that disease in the region and urged the OIE to address the concerns of the Regional Commission by developing guidelines and standards on PRRS.
Facilitation of international competition horse movement – A new OIE initiative

259. Dr Susanne Münstermann, Project Officer, OIE Scientific and Technical Department, began her presentation by referring to the significant worldwide growth of the sport horse industry, bringing with it measurable and significant socio-economic benefits, including to national economies and the horse industry.

260. She noted that this growth had been particularly marked during the past decade, during which the number of events organised under the rules of the Fédération Equestre Internationale (FEI) had doubled. While events in the racehorse industry had not increased equally in number, the amount of prize money available had risen.

261. She added that this growth was, however, mainly taking place in the countries and regions of the world with a history of such events, such as the European Union (EU) and North America in the case of FEI events and in the closed circuit of international horse races. This is not only due to the long-standing tradition of equestrian sports in countries such as the United Kingdom, France and Germany, but also due to facilitated movement between countries of the EU and between EU countries and selected, approved third countries. Other parts of the world, not covered by these EU regulations, face a number of challenges that impede the free and safe international movement of competition horses as well as the expansion of the equine industry in these regions. The main obstacles are inconsistent approaches to the application of OIE standards, regulations and biosecurity, leading often to excessive and irregular health requirements for the importation of competition horses.

262. Dr Münstermann then informed participants that the OIE received a significant support from FEI and together with the FEI and the International Federation of Horse Racing Authorities (IFHA) and other experts were currently developing the concept of ‘high health, high performance’ (HHP) horses, based on existing OIE standards. Principles such as compartmentalisation, biosecurity, identification and traceability, all already well described in the OIE’s Terrestrial Animal Health Code, are being adapted for application to a sub-population of high health status horses. This status will be reserved for horses that move internationally for competitions or racing on a temporary import permit.

263. Dr Münstermann also added that the critical importance of the quality of the Veterinary Services and the reliability of their health certification, in accordance with OIE standards, was emphasised in this concept. Furthermore, the concept embraces a public–private partnership approach in which equine industry bodies such as the FEI and IFHA work closely with the Veterinary Services to ensure the maintenance of the high health status of this sub-population.

264. The HHP project is supported by an OIE ad hoc group of experts who have to date drafted a OIE Code chapter on this sub-population for consideration by OIE Member states. Furthermore, a global HHP health certificate is being developed, which would facilitate the uptake of the HHP concept by OIE member countries.

265. Dr Münstermann concluded by stating that the ultimate aim of this OIE initiative was to facilitate the international movement of HHP horses at a global level, thus providing an opportunity for regions of the world with an interest in, and the potential for, developing their equine industry to participate more actively in international equestrian events with full participation of Veterinary Services.

Discussion

266. The Chairperson of the Conference thanked Dr Münstermann for having presented to the Regional Commission such an interesting new initiative of the OIE.
267. The Delegate of Indonesia stressed on the importance of this initiative. He asked clarification on the list of diseases to be proposed for inclusion on the global HHP health certificate being developed. He wondered if the other diseases of equines mentioned in the OIE Code should be considered as well.

268. The Delegate of Malaysia strongly supported this initiative. He made reference to the experience of his country where bilateral negotiations related to horse movement were quite demanding. He pointed out that it would ease the movement of HPP Horses to sport events which represent an important economic activity in the region.

269. Dr Münstermann confirmed that this OIE initiative was aiming at trying to address most of the situation related to trade of HPP horses and especially reducing the need for bilateral negotiations.

270. Dr Bernard Vallat, OIE Director General, insisted on the importance of the upcoming Regional Conference to take place in Hong Kong SAR of People's Republic of China in February 2014. He said that this event would be a great opportunity for Members of the Region to exchange their vision on that important topic. In preparation of this Conference, a questionnaire will be circulated to the Members of the region in order to capture the regional concerns.

271. He also explained that another objective of this Conference would be to facilitate dialogue between Veterinary Services and the horse industry. It is crucial for Veterinary Services to understand this growing industry and to be involved in its sanitary aspects.

272. He stressed on the importance to recognise the high quality level of sanitary status of HPP horses and as such, to provide them with targeted standards.

273. He concluded his intervention by expressing his support in moving forward this initiative which will lead to a proposal of standards to be eventually endorsed by the World Assembly of Delegates.

OIE Initiative to establish an alliance of countries with pastoralism activities by nomadic populations

274. Dr Batsukh Zayat, Project Officer, OIE Regional Representation for Asia and the Pacific, started his presentation by stating that it was estimated that population growth would lead to an increase of 1 billion people in the next 35 years. He also mentioned that, at the same time, there was a worldwide shift from poverty to middle-class that would increase the number of daily meals and individual protein intake.

275. Dr Zayat explained that livestock systems currently occupied about 30% of the planet’s ice-free terrestrial surface area and were a significant global asset. He then added that the livestock sector was increasingly organised in long market chains that employed at least 1.3 billion people globally and directly supported the livelihoods of 600 million poor smallholder farmers in the developing world.

276. Dr Zayat remarked that keeping livestock was an important risk reduction strategy for vulnerable communities, and that livestock were important providers of nutrients and were useful in small-scale crop farming systems.

277. Dr Zayat then referred to the different types of livestock production systems, including intensive, extensive, mixed, pastoral, and nomadic systems.
278. He stated that pastoral and nomadic systems were well-adapted to particular natural, political and economic environments. He indicated that the types of livestock kept by pastoralists, including camels, goats, sheep, yaks, horses, llamas, alpacas, reindeer and vicuñas, varied according to the climate, environment, resource availability, and geographical area.

279. Dr Zayat highlighted that, for productive and safe utilisation of livestock-derived protein, effective disease control and risk reduction measures needed to be implemented specifically for each system, including pastoral and nomadic systems.

280. He then indicated that a nomadic or transhumance livestock system existed in approximately 17% of the OIE’s 178 Member Countries.

281. In that context, he provided a summary of the first preparatory meeting of OIE National Delegates on the establishment of an “Alliance of countries with pastoralism activities by nomadic populations” that took place in the margin of the 2013 General Session of the OIE World Assembly of Delegates. The event was decided during the visit of Dr Vallat to the President of the Republic of Mongolia.

282. The meeting was attended by representatives of OIE Member Countries with pastoralism activities by nomadic population as well as by the FAO and OIE. The meeting was presided by Mr Tuvaan Tsevegdoj, Vice Minister of Industry of Mongolia and Dr Bernard Vallat, OIE Director General.

283. The main objective of the meeting was to engage the work on the creation of a network to support and encourage pastoralism activities by nomadic population. The meeting recommended the following:

To OIE Member Countries:
- To allocate a focal point for the establishment of unofficial working group on the establishment of an alliance and enhancement of better coordination of subsequent activities;
- To prepare justifications, develop necessary documentations, and circulate them among countries; and
- To have a Ministerial level meeting of potential Member Countries for such an alliance before next OIE General Session.

To OIE:
- To assist Member Countries and unofficial working group, both technically and financially, if possible; and
- To ensure smoother communication between Member Countries through already established networks.

284. Finally, Dr Zayat stated that this OIE initiative showed the interest of the organisation in recognising pastoralism activities by nomadic populations as a world heritage and highlighted the necessity to engage all involved actors in lobbying to preserve and ensure its survival.

Discussion

285. The Conference Chairperson thanked Dr Zayat for his interesting presentation.

286. Dr Bernard Vallat completed the information provided by Dr Zayat by informing the Regional Commission of the intention of the advisor on food security of the General Secretary of the United Nations, Dr David Nabarro, to encourage this initiative.
Regional initiatives for rabies control

287. Dr Mary Joy Gordoncillo, Science and One Health Coordinator, OIE Sub-Regional Representation for South-East Asia, and Dr Agnès Poirier, HPED Programme Coordinator, OIE Sub-Regional Representation for South-East Asia, presented a joint paper on regional initiatives on rabies control.

288. They started by stating that, in March 2012 the OIE had established a Regional Rabies Vaccine Bank for Asia with funding from EU under the Regional Cooperation Programme HPED. The vaccine bank is a rolling stock of vaccines produced when needed and delivered by the vaccine suppliers (selected through an international call for tender) to eligible countries (ASEAN countries, SAARC countries, PR China, Democratic People’s Republic of Korea, Mongolia) upon official request from their Veterinary Services. This concept guarantees the availability of high quality vaccines, the reduction of purchase cost and delays, and a rapid delivery in case of emergency.

289. Since its inception, the regional vaccine bank has provided around 2 million doses of rabies vaccine to the following countries: Laos (170 000 doses), Vietnam (200 000 doses), the Philippines (500 000 doses), Sri Lanka (300 400 doses), Bangladesh (200 000 doses), Indonesia (200 000 doses), Bhutan (20 000 doses), Myanmar (200 000 doses) and Nepal (200 000 doses). In addition to this, the OIE also carries out communication and awareness activities under the HPED programme. Although the current EU funding is coming to an end, the rabies vaccine bank is open to possible replenishment thanks to additional donors.

290. Drs Gordoncillo and Poirier indicated that rabies control and elimination in dog populations in South-East Asia had also been made a priority for the One Health programme of the OIE SRR SEA under the AuSAID STANDZ initiative. Several such OIE initiatives in the region have been in motion and are constantly being further developed. Firstly, an elimination strategy for canine rabies in South-East Asia has been drafted by the OIE SRR SEA in support of the ASEAN Sectoral Working Group on Livestock (ASWGL) relevant to the 2008 ASEAN Call for Action towards the Elimination of Rabies by 2020 in the ASEAN Member States and the Plus Three Countries (China, Japan and Republic of Korea). Based on the OIE’s international standards relevant to rabies, this document outlines the socio-cultural, technical, organisational and political aspects relevant to rabies control (S.T.O.P. rabies). Recently, this document has been adapted for use as a base reference for the development of an ASEAN-led joint rabies strategy for the human health and animal health sectors, which is currently being finalised.

291. Finally, they stated that another OIE initiative, consistent with the aforementioned strategy, was currently under way. It consists of a pilot three-year rabies control plan for the Philippines that includes implementation of rabies elimination activities in two island provinces. Lastly, while the OIE continues to support operations of selected vaccination campaigns, especially those complementing the vaccine bank operations in the region, it is also planning to provide further capacity-building and funding support to technical operations that will be essential in aligning national strategies with the recently developed rabies elimination strategy.

Discussion

292. The Delegate of Chinese Taipei informed the Regional Commission that, while Chinese Taipei was free of rabies in dogs for many years, rabies has been diagnosed in ferret-badgers last July bringing concern for possible spill over to domestic animals. He indicated that phylogenetic analyses of rabies strains found in ferret-badgers showed that they were different than rabies strains found in China (People’s Rep. of).

293. With this in mind, he stressed on the importance for countries to have knowledge on rabies occurrence in wild animals populations so to better control this disease in domestic animals.
294. The representatives of Mongolia and Republic of Korea also indicated their concerns regarding the presence of rabies in wild animals respectively in fox and raccoons.

295. Dr Kawashima, Delegate of Japan, in the light of the information provided by Chinese Taipei, Mongolia and the Republic of Korea suggested that rabies in wild animals be addressed at the upcoming General Session.

296. The OIE Director General proposed that this suggestion be discussed at the next OIE Council meeting to take place in February 2014.

297. A discussion on the use of rabies oral vaccines, involving the Delegates of Indonesia, Mongolia, Republic of Korea and Philippines, led to the following outcomes:
   - Oral vaccines are currently available on the market for a limited number of wild animal’s species such as fox and raccoons.
   - The behaviour of animals targeted by oral vaccination has to be taken into account.
   - A pilot project, using the OIE Regional Rabies Vaccine Bank, is planned in Thailand and Cambodia in order to try to provide assurance of the efficacy of oral vaccines in feral dogs.

298. Australia expressed its concerns with the movement of rabies through the Indonesian archipelago and the threat posed to Timor Leste. He proposed that support be provided to these countries.

299. Dr Matthew Stone, Delegate of New Zealand, explained that his country has a lot of experience in controlling diseases in wildlife. The experience of his country highlighted the importance of taking into account the ecology and the behaviour of wild animals’ species when addressing disease control in wild populations.

300. Dr Bernard Vallat provided clarifications regarding the presence of rabies in wildlife by explaining that most bats populations of the OIE Member Countries were infected with a very low possibility of transmission to other species. Although vaccination of wildlife animals has been successful in many countries by using oral vaccination, e.g. in foxes, two main problems still remain with such practice in feral dogs in urban areas:
   - The possible spill over to human population because of live virus included in vaccine baits and possible handling by children which currently limit the use of such vaccines to areas with low density of human population.
   - The behaviour of feral dogs where the dominant one limit the access of vaccines to the rest of the herd.

**Strengthening relationship between the Delegate and Focal Points**

301. Dr François Caya, Head of the OIE Regional Activities Department, started his presentation by providing an overview on the concept of the Focal Point, initially developed to assist the Delegates in collecting and submitting information on animal diseases to the OIE and, as well, to ensure a contact point for communication between the country and the OIE Animal Health Information Department. He explained that the success of this experience led to the subsequent creation of seven additional Focal Point categories.

302. Dr Caya then presented the principles underlying the designation of Focal Points, clarifying that Delegates are responsible for appointing a person for each category, and that any information conveyed by Focal Points to the OIE shall be transmitted under the authority of the Delegates.
303. He explained that specific Terms of Reference had been proposed for each Focal Point category with the objective of assigning responsibilities and ensuring the best use of their respective expertise. Dr Caya mentioned that one of most important tasks of Focal Points was to act as a contact point between the country and the relevant OIE Departments, and to support Delegates in complying with their commitments and responsibilities towards the OIE.

304. Dr Caya went on to present the activities currently carried out by the OIE aimed at strengthening the link between Delegates and Focal Points, highlighting, as one of the key initiatives, the Capacity-Building Programme for OIE Focal Points and New Delegates.

305. He also provided details of the objectives of the Capacity-Building Programme, aimed at facilitating harmonisation among OIE Members in assigning Focal Points’ responsibilities, optimising the use of Focal Points’ knowledge in supporting Delegates, and improving the participation of Members in the OIE standard-setting process. Among the other actions carried out by the OIE to encourage active contacts between Delegates and Focal Points, Dr Caya also mentioned the information that the OIE sends to Delegates to keep them updated on capacity-building activities and on the list of national Focal Points recorded in the OIE database. He also mentioned the country missions carried out by OIE staff, which provide an opportunity to meet Delegates and Focal Points together.

306. Within the framework of future initiatives to be realised by the OIE to further strengthen the relationship between Delegates and Focal Points, Dr Caya mentioned the work being done by the OIE Headquarters to ensure that the Capacity-Building Programme for OIE Focal Points and new Delegates evolves to address changing needs. He explained that the OIE was intending to put in place seminars that would bring together different categories of Focal Points, to take full advantage of their respective experiences and encourage their networking. He also briefly explained that the OIE was developing a system for evaluating the impact of the Programme at both the national and global level.

307. Also, in order to stimulate the effective participation of Focal Points in other key OIE events, he informed the Conference that the OIE would waive the registration fees for Focal Points attending the OIE General Session (when the national delegation exceed three persons) and would invite them to the seminars for new Delegates usually organised in conjunction with the Session. He finally stated that the OIE was committed to being more proactive in sharing with Focal Points the reports of the OIE Specialist Commissions and ad hoc Groups, while continuing to make Delegates aware of the significant support that Focal Points could provide them.

308. Dr Caya then issued some recommendations on initiatives that Member Countries could take to enhance the role of Focal Points as contact persons between the Delegates and the OIE. He urged Delegates to ensure that whenever they appoint new Focal Points they: 1) select persons who fulfil the relevant Terms of Reference; 2) ensure the stability of their positions and that they have adequate time to carry out their OIE activities; 3) make sure that knowledge and responsibilities are properly transmitted from the previous Focal Points. He also reminded Delegates of the importance of regularly notifying the OIE of any new appointments or changes concerning Focal Points, since this is crucial to ensure successful communication between them and the OIE.

309. Dr Caya also stressed the importance of the following: including Focal Points on the mailing list for the reports of OIE Specialist Commissions and ad hoc Groups; ensuring that they regularly meet their Delegates and provide them with feedback on the training they have received from the OIE; allowing Focal Points access to the Delegates’ website so that they can monitor any information they need to carry out their duties and support the Delegate.
While reminding the Conference of the important role of Focal Points for the OIE, Dr Caya concluded his presentation by confirming the OIE's commitment to work towards an optimal relationship between Delegates and Focal Points. He invited all Delegates to take maximum advantage of their Focal Points as a means of enhancing their relations with the OIE.

**Discussion**

311. Dr Catbagan, Chairperson of the Conference, thanked Dr Caya for his excellent presentation and proposed the Delegates to comment on this key OIE concept.

312. The representative of Malaysia commented that his country implemented a National OIE Committee involving all Focal Points, regularly meeting at least once a year.

313. With reference to the proposal of waving the Focal Points’ registration fees for encouraging their participation at the OIE General Session, the Delegate of Australia expressed some concerns on the fact that this initiative may bring Delegates to appoint new Focal Points with the only purpose to make them attend this meeting and not on the basis of their compliance with their relevant Terms of Reference.

314. Dr Caya expressed his conviction that, contrary to the perspective of the Delegate of Australia, several countries may rather take advantage of this initiative as a mean to strengthen the relationship between Delegates and Focal Points.

315. The Delegate of Cambodia asked for the possibility to appoint National Focal Points through electronic means. Dr Caya explained that the OIE periodically provides a Focal Point nomination form to Delegates in order for them to communicate to the OIE Headquarters any relevant change on their National Focal Points. He invited therefore Delegates to take the maximum advantage of the Focal Point nomination form by accurately filling and timely transmitting it to the OIE Headquarters, even through electronic means.

316. The President of the OIE World Assembly of Delegates, Dr Karin Schwabenbauer, highlighted that Focal Points’ mandate shall not be necessarily linked to the stability of their position. Also, with the aim to optimise the resources invested by the OIE in Focal Points training, she proposed to evaluate the possibility to also use e-learning platforms.

317. While remarking that the use of e-learning systems was discussed during the last meeting of the OIE Regional and Sub-Regional Representations held in Paris in October 2013, Dr Caya confirmed that this option would be further assessed as possible evolution of the Capacity Building Programme for OIE Focal Points and new Delegates.

318. Dr Catbagan agreed on the fact that Focal Points' mandate shall not be affected by the appointment of a new Delegate, a position often politically driven.

319. A representative of Indonesia observed that, in order to avoid any misunderstanding between Member Countries and the OIE, the Delegate shall always be informed of any correspondence addressed to his/her National Focal Points.

320. Dr Catbagan confirmed that the OIE was always copying Delegates in any Focal Points' related communication and that Delegates may easily verify this by checking their previous correspondence each time they see exchanges between the OIE and their Focal Points.

321. Finally, Dr Vallat reiterated that any data relating to National Focal Points contained in the OIE internal database are modified only upon specific instructions of the Delegate. Instructions have been given to all OIE staff requesting that Delegates be always in copy of all correspondences with Focal Points.
Roadmap for FMD Control in East Asia

322. Dr Hirofumi Kugita, OIE Regional Representative for Asia and the Pacific, began his presentation by stating that the OIE/JTF Project on FMD Control in Asia was an initiative of the OIE and the Japanese government to strengthen FMD control in the Region. He explained that, among others, one major objective of the Project was to develop a Roadmap for FMD Control in East Asia, aiming to provide regional direction, goals and strategies for countries/territories in the region to achieve their targets in obtaining an FMD-free status with or without vaccination, and to assess national and regional progress towards regional FMD freedom in harmony with SEACFMD Campaign.

323. Dr Kugita commented that the Roadmap had been developed through a series of meetings and discussions among National Contact Persons (NCPs) assigned by Chief Veterinary Officers (CVOs) of the respective project members. The relevant OIE and FMD experts were consulted to ensure its scientific validity and consistency with the Global Strategy. The final draft was proposed for endorsement to the Coordination Committee (CC), comprising CVOs and development partners.

324. He then stated that the Roadmap had been developed based on the concept of the Global Strategy. He enumerated, taking the specific and unique regional context and epidemiology of FMD into consideration, the three main strategies contained in the Roadmap, namely:

- **Roadmap Strategy 1:** Encouraging Project members to develop National FMD Control Strategies with the aim of establishing an ‘Official National FMD Control Plan’ for eventual endorsement by the OIE World Assembly;

- **Roadmap Strategy 2:** Improving information sharing and cooperation within the Region for a better understanding of the disease and the implementation of rapid response and contingency plans to effectively address disease outbreaks or epidemiological changes in the disease within the region;

- **Roadmap Strategy 3:** Providing technical and possibly financial support for project members or, where relevant, for other countries in the region.

325. Dr Kugita then explained that five components, with their respective tools and activities, were listed as necessary elements to achieve the overall goal, namely: 1) FMD Control; 2) Strengthening Veterinary Services; 3) Improving the prevention and control of other major diseases of livestock; 4) Regional Cooperation and Coordination; and 5) Funding and Resource arrangements.

326. He added that components 1, 2 and 3 had been directly adopted from the Global Strategy, whereas components 4 and 5 had a regional focus. The various tools to be used for as well as suggested activities were listed under each component.

327. He concluded by saying that the Roadmap appendices, such as Country Profiles, FMD Control Plans and Roadmap timetables, would be reviewed and updated annually.

**Discussion**

328. The OIE Director General, Dr Bernard Vallat, reminded the Regional Commission that countries currently infected with FMD had the opportunity to have their official national control programme being recognised by the World Assembly of Delegates this key step being classified as PCP-FMD phase 3 (Progressive Control Pathway). This important step is crucial for Veterinary Services as it testifies to governments and potential donors the support of all OIE Members Countries.

329. He finally expressed his support to the work undertaken under the Roadmap for FMD control in East Asia presented by Dr Kugita.
Dr Cathagan asked for the endorsement of this document. The Roadmap for FMD control in East Asia was unanimously endorsed by the Regional Commission for Asia, the Far East and Oceania.

The OIE 6th Strategic Plan – Concepts and perspectives

Dr Toshiro Kawashima, Delegate of Japan and Member of the OIE Council, gave a brief presentation to the Conference regarding the preparation of the OIE Sixth Strategic Plan for the years 2016-2020. He informed Delegates that the OIE Council was currently reviewing the Fifth Strategic Plan of the OIE (2011-2015) and deliberating the Sixth Strategic Plan (2016-2020).

He stated that the OIE Council considered that the Sixth Strategic Plan should:
- Contain a revised consolidated statement of the OIE’s strategic vision and goals;
- Take into account global trends and anticipated challenges affecting the OIE’s operating environment;
- Incorporate important cross-cutting issues;
- Be ambitious but not necessarily expansive;
- Be high level, flexible and enabling rather than prescriptive and allow for optional approaches in order to be responsive and facilitate implementation;
- Involve all Members of the OIE in its development.

Dr Kawashima then commented that this topic would be included on the agenda of all OIE Council meetings, Regional Conferences and OIE General Sessions to be held within the next two years.

He indicated that the final text would be circulated among Member Countries for comments in March 2015 and with a view to its being adopted at the 83th General Session in May 2015.

Dr Kawashima explained that, in October 2013, the OIE Council had reviewed the Strategic Objectives and discussed anticipated factors impacting on the operating environment during the period 2016-2020, and also organisational dynamics and institutional arrangements, including the duties and relevance of the current Specialist Commissions and Working Groups, the operation of the Regional Representations and Sub-Regional Offices, and relationships and synergies with other international organisations. He indicated that the OIE Council would also be establishing a five-year strategic human resources plan for the recruitment, retention and development of OIE staff.

Finally, he invited Delegates to provide any reflections and comments they wished to make on the initial framework and directions for the Sixth Strategic Plan.

He emphasised that comments from Members would be most welcome and would be highly valued and stated that inputs could be provided to the OIE Council members representing the Region of Asia, the Far East and Oceania.

Discussion

The Delegate of Australia, Dr Mark Schipp, wondered how the OIE would involve young experts in the Specialists Commissions, Working Groups and Ad hoc Groups.

Dr Bernard Vallat provided the Regional Commission with the factors currently taken into account in selecting the experts participating in the scientific activities of the OIE:
- Scientific excellence
- Experts from OIE Reference Centres
- Geographical balance
- Reference from OIE Specialists Commission’s proposals
Making reference to the use of scientific expertise by other standard setting organisations, Dr Vallat confirmed that the OIE system has been proven to be efficient while being flexible.

Dr Vallat finally encouraged all Members to provide their comments on the Draft Sixth Strategic Plan.

Dr Karin Schwabenbauer, President of the OIE World Assembly of Delegates, reiterated that the development of the Sixth Strategic Plan was an important exercise for the organisation as this plan would lead OIE activities for five years starting on 2015. She strongly emphasised on the importance for the Members to participate in its development so to take full ownership.

She stressed on the importance to constantly renew the pool of people involved in the work of the OIE and make the organisation more accessible to outsiders.

She concluded by saying that, according to her, the recently proposed OIE slogan ‘protecting animals, preserving our future’ can be considered as the ultimate objective of the organisation and that the OIE strategy should serve this objective.

**Proposals for designation of a new OIE Collaborating Centre**

Dr Toshiro Kawashima, Delegate of Japan, and Dr Chua Tze Hoong, Singapore National Focal Point for Laboratories, presented the Commission an application for the OIE to consider a joint OIE Collaborating Centre for Food Safety.

They provided a brief review of the proposed centre, the entities involved, and their activities, and informed that detailed information was available in the Working Document of the Conference.

The Commission approved the proposal from Japan and Singapore at unanimity.

The proposal will be presented for endorsement by the OIE World Assembly of Delegates in May 2014 at the General Session.

**Presentations by International and Regional Organisations**

**European Commission (EC)**

Dr Moritz Klemm from the Animal Health Unit of the Directorate for Veterinary and International affairs of the European Commission (EC) gave an update on collaboration between the European Union (EU) and the OIE.

He began his presentation by stating that the EC enjoys observer status at the OIE. He highlighted that the increasingly close cooperation between the EC and the OIE went back many years, an important step forward having been made at the time of the Global Rinderpest Eradication Programme in the 1970s and 1980s. These special relations between the EC and the OIE were formalised through an exchange of letters in 2004 between the then Commissioner for Health and the Director General of the OIE. Since then, the EC has increasingly collaborated with the OIE, in terms of both technical expertise and financial support.

Dr Klemm noted that, in recent years, the OIE had formally engaged in the promotion of good governance of Veterinary Services, as a component of the OIE PVS Pathway. He stated that these activities, amongst others, were being supported by the EC through the OIE World Animal Health and Welfare Fund (WAHWF), to which the EU – and the EC in particular – was currently the main contributor.
He provided examples of collaboration between the two organisations, such as the co-financing by the EC of OIE global and regional conferences, of workshops for OIE National Focal Points, as well as OIE participation in important regional animal health programmes co-funded by the EC, including the Highly Pathogenic Emerging and Re-emerging Diseases (HPED) project in Asia.

Dr Klemm added that, in order to facilitate these contributions and as a token of their mutual trust, the EC and the OIE had signed in June 2010 a long-term Framework Agreement laying down the administrative and financial arrangements for their cooperation, through which the process of funding OIE activities by the Commission is mainstreamed.

It was found to be beneficial to foster even closer cooperation between the two organisations. A Memorandum of Understanding, which creates a contact point in the Commission for technical and scientific relations with the OIE, was concluded in 2011 and now facilitates the day to day relations between the EC and the OIE.

Dr Klemm concluded by mentioning that, among various positive developments of late, the EC fully participates in the WAHWF and the Regional and Global Steering Committees of the FAO/OIE Global Framework for the Progressive Control of Transboundary Animal Diseases (GF-TADs), and that the OIE, for its part, fully participates in the EU Animal Health Advisory Committee of the Advisory Group on the Food Chain and Animal and Plant Health.

Discussion

The Delegate of Australia while understanding the rational for an agreement between the OIE and the European Commission, wondered what was the relation between this agreement with an European organisation and the involvement of EC in Asia, Far East and Oceania region.

Dr Moritz Klemm, after having reminded the role played by EC in OIE activities, explained that the influence of his organisation was not greater in Asia, Far East and Oceania than in any other region.

Dr Bernard Vallat responded to the concern of Dr Schipp by explaining that, any organisation having an official agreement with the OIE has an opportunity to make an intervention during institutional meetings of the OIE, namely the General Session and the Conferences of the OIE Regional Commissions if the Council (for the General Sessions of the World Assembly) and the Regional Commissions (for Conferences of Regional Commissions) endorse the request.

He highlighted that the main rational for the EC to address this Conference was related to the strong support provided by this organisation to key activities of the OIE in the Region such as the FMD and rabies regional vaccines banks.

**World Society for the Protection of Animals (WSPA)**

Dr Ian Dacre, Disaster Management Operations Director for the World Society for the Protection of Animals (WSPA), started his presentation by explaining that his organisation believed in a world where animal welfare matters and animal cruelty ends.
After having explained that WSPA is a global organisation having 17 offices worldwide, Dr Dacre provided further information on the four main campaigns currently carried out by his Organisation: 1) Animals in Communities, aimed at stopping inhumane culling of dogs where this is incorrectly undertaken for the intention of trying to control rabies; 2) Animals in the wild, addressing wide-ranging welfare issues faced by wildlife, from inhumane turtle farming to illegal wildlife trade; 3) Animals in agriculture, aimed at protecting farm animals by encouraging corporations and consumers to support humane farming practices, and 4) Animals in disasters, topic further developed in his presentation.

In observing the increasing recognition of the link between the health and safety of humans in disasters and the fate of their animals, Dr Dacre underlined WSPA’s approach in acknowledging the necessity to recognise the interdependencies between animals and humans in order to improve animals’ lives.

Dr Dacre highlighted the role played by animals in supporting livelihoods and food security, and in providing companionship. He also mentioned the increasing evidence of the fact that people would compromise their own safety in order to protect their animals during disasters.

Dr Dacre highlighted as well that, during disasters, plans in place for animals bring people to be more available to move where emergency services instruct them to go, with an overall reduction of economic losses.

He clarified that WSPA developed a wide range of programmes on Disaster Management to provide tools and capacity to governments, NGOs, veterinarians and communities, so that animals impacted by disasters may be better prepared prior to being affected by a natural disaster, and communities affected by a natural disaster may recover as quickly and painlessly as possible.

Dr Dacre stated that veterinarians may play a key role in supporting both preparedness and ability of communities in responding to natural disasters, on the basis of their experience - gained through undergraduate veterinary training programmes - and of their role as community leaders to the local animal populations’ owners.

Finally he stated that the OIE, as the World Animal Health Organisation, may keep playing a key leadership role in this field, by looking to develop international standards and guidelines for governments, to be used as a reference in their development of disaster management plans, which include animals.

Dr Dacre concluded by mentioning that WSPA, by way of its Memorandum of Understanding with the OIE, and also having a ‘Global Veterinary Engagement Strategy’, shall look to support the OIE in this activity.

**Discussion**

The Delegate of New Zealand made reference to the way welfare was addressed by his government in emergency situations explaining that, when it comes to emergency related to animal diseases, animal welfare was addressed within the framework for overall management of welfare of people affected by such emergency.

Dr Ian Dacre explained that WSPA was basically only tackling animal welfare. However, by addressing animal welfare, WSPA is also addressing human welfare. He mentioned that, when it comes to major disasters, the organisation is definitely linked with other recovering activities having an impact on human welfare.

Making reference to cost-benefit of standard approaches to disasters, Dr Dacre explained that the most effective ways to support animal welfare in disaster situation were destocking animals before the disaster and providing medical care to affected animals.
Dr Dacre then went on asking the Conference if they would support OIE in the development of standards on animal welfare in disaster situations.

Dr Bernard Vallat, as a response to this question, explained that the OIE was already planning the development of such standards through a specific ad hoc group which would first address animal welfare during natural disasters and prevention of epizootics during those events.

Secretariat of the Pacific Community (SPC)

Dr Kenneth Naivaluone B. Cokanasiga, Adviser at the Secretariat of the Pacific Community (SPC), explained that the SPC continued to provide technical advice and capacity building programmes for its member Pacific Island Territories and Countries.

He clarified that these activities were conducted in the areas of preparedness and response for exotic animal health disease incursions, para-veterinary training, WAHIS disease reporting, provision of technical advisory services in animal production, animal waste management, conservation and multiplication of identified locally adapted poultry and pig breeds, facilitation of intra-regional trade development, and assistance to members to undertake import risk assessments for the importation of live animals and livestock products.

Dr Cokanasiga concluded his presentation by mentioning the other areas where the SPC started to work on with its members, including animal welfare, promoting collaboration on One Health issues, and on developing appropriate climate change adaptation interventions for livestock owners.

Network of Aquaculture Centres in Asia-Pacific (NACA) and its Asia Regional Aquatic Animal Health Programme

Mr Eduardo M. Leano, Representative of NACA in Thailand, gave a brief presentation on the Network of Aquaculture Centres in Asia-Pacific (NACA). He explained that it was an intergovernmental organisation of 18 governments in Asia-Pacific, which worked on the principle of cooperation and collaboration.

Mr Leano commented that NACA’s overall mandate was to develop, facilitate and augment aquaculture development and aquatic resources management to enable the rural poor to move towards attaining food security and sustainability, and to contribute to poverty alleviation.

He then added that addressing aquatic animal health was one of the key programme areas of NACA, with the purpose of assisting member governments to “reduce the risks of aquatic animal diseases impacting the livelihoods of aquaculture farmers, national economies, trade, environment, and human health”.

Dr Leano stated that the Asia Regional Aquatic Animal Health Programme was considered as the flagship programme of NACA, and was working closely with national, regional and international organisations in the implementation of important aquatic animal health projects in the region. Significant activities under this programme include the Quarterly Aquatic Animal Disease (QAAD) reporting system and the establishment of the Asia Regional Advisory Group on Aquatic Animal Health, among others.

Discussion

The Delegates of Australia and New Zealand reiterated the importance of aquaculture in the Region and wished that a greater attention be given to ensure that relevant programmes addressing this significant industry be implemented.
Date, venue, and technical item with questionnaire for the 29th Conference of the OIE Regional Commission for Asia, the Far East and Oceania

382. Dr Vallat explained that, as is customary, one of the technical items will include responses by Members of the OIE Regional Commission for Asia, the Far East and Oceania to a questionnaire to be prepared on a specific item. This item will be decided at the next meeting of the OIE Regional Commission to take place during the OIE General Session in May 2014. The other item will be on a topical issue to be proposed by the Regional Commission and approved by the same at the OIE General Session preceding the Conference, that is to say in May 2015.

383. Dr Davinio Catbagan, Chairperson of the Conference, asked for proposal of country for hosting the 29th Conference of the OIE Regional Commission for Asia, the Far East and Oceania.

384. The Representative of Mongolia, Dr Batsukh Zayat, confirmed his honour to propose his country as host of the next Conference.

385. The 29th Conference of the OIE Regional Commission for Asia, the Far East and Oceania will be held in September 2015 in order to ensure a more desirable weather in Mongolia. The precise dates will be defined at the next meeting of the Regional Commission during the OIE General Session in May 2014.

386. The proposal of Mongolia was applauded and adopted unanimously.

Discussions of Recommendations Nos 1 and 2

387. Dr Vallat reminded the Delegates that the recommendations adopted at the Conference will be presented for endorsement during the next meeting of the World Assembly of Delegates in May 2014, making it binding on the OIE to implement these recommendations.

388. Draft Recommendations 1 and 2 on the Conference of two technical items were presented to the participants and put forward for discussion. Some amendments were proposed to both draft recommendations, which will be corrected immediately and presented for final adoption at the Friday session.

THURSDAY 21 NOVEMBER 2013

Professional and guided cultural visit

389. The Government of Philippines organised a professional and cultural visit.

390. Participants found the visit to be of great interest. Sincere thanks to the organisers for their kind hospitality were presented.

FRIDAY 22 NOVEMBER 2013

Adoption of the draft Final Report and Recommendations

391. Dr Bernard Vallat explained the procedures for adopting the report and recommendations of the Conference. Delegates could submit comments or suggestions for consideration during the Conference itself. Further comments on the report received at the OIE Headquarters by 6 December 2013 would also be taken into consideration. However, the recommendations had to be adopted during the current session and could not be changed subsequently.
392. The report was unanimously adopted without comments.

393. The two draft recommendations were also adopted, with minor amendments taking into account participants' suggestions and discussions.

**Closing ceremony**

394. On behalf of the Bureau of the OIE Regional Commission for Asia, the Far East and Oceania, the OIE Headquarters and the Conference participants, Dr Sen Sovann, Vice-President of the OIE Regional Commission for Asia, the Far East and Oceania, read the traditional motion of thanks dedicated to the host country.

395. Dr Davinio Catbagan, OIE Delegate of Philippines, made first a special mention and thanks to his government for having constantly supported the organisation of the Conference despite the difficult situation faced by the country.

396. He then expressed his gratitude, on behalf of his government and on his own, to all the participants, the speakers and the OIE secretariat for the productive Conference. He wished all a safe trip back home and hoped that the stay in Cebu was pleasant.

397. Dr Karin Schwabenbauer, President of the OIE World Assembly of Delegates, reiterated her thanks to the government of Philippines for the great efforts done and the excellent organisation of the Conference.

398. Dr Bernard Vallat, OIE Director General, did a special mention of the Government of Philippines regarding the strong involvement in the organisation of such an important Conference for the Region and for the OIE. Asia having the largest human and animal populations and animal protein resources of all the OIE regions. Dr Vallat invited the region to be more involved in the standard setting process and in all other activities of the OIE.

399. He thanked the Conference organisers for the perfect organisation, warm welcome and hospitality, including the cultural visit appreciated by all participants.

400. Dr Vallat highlighted the excellent coordination at national and provincial level for the organisation of the overall event despite the difficulties faced by the Country. The exceptional organisation and the quality of the staff were major contributors to the excellent working conditions.

401. He was pleased to see the active participation of Member Countries during the week, the quality of the speakers, and the high level of the interventions which led to fruitful discussions.

402. He concluded by thanking the Conference secretariat and staff from OIE Headquarters and the regional offices for their active and valuable participation. He invited all participants to attend the next Conference of the Regional Commission.

403. Dr Davinio Catbagan, OIE Delegate of Philippines, declared the Conference officially ended at 11.30 a.m.
Speeches pronounced during the opening ceremony
Our most honoured and distinguished Guests Dr Karin Schwabenbauer, President of the OIE World Assembly of Delegates; Dr Zhang Zhongqiu, President of the OIE Regional Commission for Asia, the Far East and Oceania; Dr Bernard Vallat, OIE Director General; Engr. Proceso J. Alcala, Secretary of Agriculture of Philippines represented by Mrs. Bernadette Fatima Romulo-Puyat, Undersecretary of Agriculture; Ms. Agnes A. Magpale, Vice-Governor of Cebu; Mr. Michael Lopez Rama, Mayor of Cebu City; OIE Delegates, their Members of Delegation, Participants, Members of the International Organizations, Our Host Country Participants, head of the Department of Agriculture Livestock Agencies: Dr Rubina O. Cresencio, Director of the Bureau of Animal Industry; Dr Minda S. Manantan, Executive Director of the National Meat Inspection Service; Mrs. Grace J. Cenas, Administrator of the National Dairy Authority; Officials of other Departments, Organizing Committee Members, gentlemen and ladies

Good Morning!

As the Philippines’ Delegate to the OIE, the Chief Veterinary Officer (CVO) and the Vice President of the OIE Regional Commission for Asia, the Far East and Oceania, I am very pleased to welcome you to the 28th Conference of the OIE Regional Commission for Asia, the Far East and Oceania here in Cebu City.

First of all I wish to convey our most sincere thanks and gratitude to the World Organization for Animal Health (OIE), to the Director General Dr Bernard Vallat, the OIE Officials, Agents, Delegates of Member Countries, and the entire delegation and all Participants for your solid and collective expression of sincere sympathy and condolences to the Philippines during this extremely difficult and trying times ever yet to happen in the history of natural disasters in this Country.

While we are seated comfortably in this Ball Room of the Marco Polo, a 5 Star Hotel for this Regional Conference, just across 170km/100 miles away, thousands of surviving Filipinos suffer discomfort and shock due to loss of relatives’ lives, loss of properties’ and loss of all that they possess.

Relief and rebuilding operations are in full swing thanks to the outpouring support of all the countries (some of them are represented here today). International Organizations who came and continue coming to our rescue. In fact, all government instrumentalities are focused to post Typhoon Haiyan operations.

The geographical location of the Island Province of Cebu where the City of Cebu is located saved her from the direct hit and impact of the 270-305 kph super Typhoon Haiyan the most powerful typhoon in the history of mankind, and secondly, Cebu was saved because of the answered prayers of the devoted Cebuanos and the prayers of the Members of the Organizing Committee who worked hard for the realization of this Conference.

If we may recall 2 years ago in Teheran, Iran where part of the Agenda of that 27th Conference was to decide where the next Conference referring to this 28th Conference will be held? Our Delegate Colleague from Mongolia had been seriously offering Mongolia as the next Venue. I was inclined to support the Mongolia’s proposal then but only to find out that most of the Delegates in that Teheran Conference had considered coming to Cebu, I was reluctant and did not confirmed the Cebu hosting in that Conference for some reasons. Had we’ve known and predicted 2 years ago that an earthquake of 7.2 magnitude and a super Typhoon of maximum strength of 270-305 kph will come, I could have convinced the 16 Member Countries that attended the 27th Conference that this 28th Conference be held in Mongolia instead.

But here we are today in Cebu for this 28th OIE Regional Commission for Asia, the Far East and Oceania, very much alive and kicking! Thanks God.
We did not regret in offering to host this Conference in fact it is indeed a great honour hosting the 28th OIE Regional Commission for Asia, the Far East and Oceania here in Cebu today. The Secretary of the Department of Agriculture welcomed and approved our hosting of this Conference in Cebu as early as July and that government leadership support and enthusiasm did not diminish from day one.

Our organizing committee with the full support of the Cebu LGU had work hard so far and will continue to do so to ensure the successful conduct of the Conference.

Just to reassure you of your safe and comfortable stay here in Cebu City in the next five days please take note that based on newspaper accounts and information we gather, the release of accumulated underneath pressure that caused the 7.2 magnitude earthquake last October 15, the epicentre of which was in Bohol but Cebu was not spared will take so many years again for that pressure to build up which means that an Earthquake with magnitude 7 will not happen in the next five days.

On Typhoon, on the average, the Philippines is visited by 19-20 tropical cyclones annually: 4 Tropical depressions, 5-6 Tropical storms and 10 Typhoons. Typhoon Haiyan is the 24th typhoon to affect the country which means that for 2013 the quota of tropical cyclones had exceeded. There will be no super typhoon in the next 5 days.

While the Organizing Committee had been preparing and working to ensure the Participants’ stay most comfortable and a memorable one in the best sense of the word so to speak, we do apologize for whatever inconveniences that you may have experienced if there were any from the time you disembarked from your aircraft, in your airport transfer and up to the point when you reached your hotels and Conference Venue.

Finally, thank you again for coming here today to show your solidarity and support. Your presence gives us more strength and determination to be able to rebuild, recover and rise again!

We wish you all a successful 28th Conference of the OIE Regional Commission for Asia, the Far East and Oceania here in Cebu City.

God Bless.
I am aware that you will have much discussion on animal welfare, and the promotion of animal health. We are very happy that you chose Cebu as venue for this international gathering. And the Cebu in particular, will enable us to share your insights on the relationship between man and animal.

Not necessarily a part of this Conference, but merely as an example, a group of horse breeders in Cebu have started experimenting with using horses in the therapy for promoting mental health among disabled children. Those from Europe and the US are probably very much aware of hippotherapy. I am informed that students of occupational therapy in UCLA have included this in their curriculum.

The close relationship developing between man and dogs are also well established.

I am confident that this gathering of experts and the sharing of skills and experiences will greatly improve the skills of our animal health practitioners in Cebu. Your presence here will hopefully provide us with deeper insights into this science.

On behalf of Cebuano's, Welcome

Thank you very much!

Pour nos Amis du bureau central, bonjour et bienvenue à Cebu

Nos Amis plages vous souhaitent la bienvenue

After this conference, of course
Speech by Dr Zhang Zhongqiu, President of the OIE Regional Commission for Asia, the Far
East and Oceania
at the occasion of the
28th Conference of the OIE Regional Commission for Asia, the Far East and Oceania
Cebu, Philippines – 18-22 November 2013

Honorable Undersecretary of Agriculture of Philippines,
Honorable Vice Governor of Cebu,
Honorable Mayor of Cebu City,
Honorable Delegate of Philippines to the OIE,
Honorable Director General of the World Organization for Animal Health (OIE),
Honorable OIE President,
Honorable Representatives of regional and international organizations,
And Fellow members of the OIE Regional Commission for Asia, the Far East and Oceania and distinguished guests,

As President of the OIE Regional Commission, I would like to express my appreciation to all of you attending this conference. It is really my great honour and privilege to make one of the opening speeches here today.

First I thank Dr Davinio Catbagan, OIE Delegate of the Philippines, for hosting the meeting on this beautiful island. I would like to thank Dr Karin Schwabenbauer, President of the World Assembly of Delegates, for attending this conference, and Dr Bernard Vallat and his staff for leading the conference.

I would also express my thankfulness to Dr Hirofumi Kugita, OIE Regional Representative for Asia and the Pacific, for his efforts to support the preparation.

I understand that the regional conference gives us, all Delegates, colleagues and participants, a good and unique opportunity to get together, exchange views, face to face, and share the latest information. In addition, it certainly helps us to renew our friendships.

Many of you may recall our previous conference in 2011 in Teheran where we discussed many topics. As a disease of concern, substantial time was devoted to presentations and discussion about FMD, its epidemiological development, and its control through the application of the progressive control pathway and OIE Official Control Programme endorsement.

In terms of the OIE standards in general, we discussed how to participate in standard setting activities and how to better implement the established standards at the national level. We also reviewed the situation of and need for veterinary legislation and education in our region.

Since that time, we have observed great progress on many of these issues.

In terms of FMD control, the OIE, in collaboration with the FAO, held the Global Conference on FMD Control in Bangkok, Thailand, in June 2012. Recognizing the critical importance of cooperation and coordination at the regional and global levels in order to control this disease, and based on the successful experience of the global eradication of rinderpest, the Global FMD Control Strategy was launched at the Conference, which in turn has been translated into the regional and national contexts in our region.

In order to improve veterinary education and legislation, the Recommendation on the Competencies of Day 1 graduates and the Guidelines for a Model Core Veterinary Curriculum were published in 2012 and 2013 respectively. A Veterinary Education Twinning mechanism has also been developed and I know that one candidate veterinary school in our region is now working on the first such twinning project. With all these efforts, I believe that the Veterinary Services in our region will become more robust in the future, even if it may take one or more decades.
Our Commission has been making substantial effort to promote active participation of regional members in the development of OIE standards. One such effort is the holding of a regional seminar inviting members of all four Specialist Commissions.

Considering the diversity of geography, weather, culture, livestock production systems and animal disease status in our region, it is not necessarily an easy task to harmonies our views in order to develop one voice. In some cases, it may not even be appropriate. However, I believe that regional efforts in finding a common denominator through closely exchanging views will definitely help us to develop the culture of working together. That is a critical element for the control of animal diseases, including zoonoses.

Ladies and Gentleman, it is still true that we are facing many challenges, including unexpected outbreaks of emerging and re-emerging diseases. As all of you know, earlier this year, we had, in China, the first human cases of disease due to the infection with a type A influenza virus of the strain H7N9. Shortly after that, we, the veterinary authority, found infection of poultry with low pathogenic avian influenza virus H7N9, which is very similar to the virus infecting humans. Early detection in the animal sector was very difficult because of the low pathogenicity of this particular virus. Although it caused a substantial number of human fatalities, thanks to the close cross-sector collaboration between the animal health sector and human health sector, we could manage to confine the disease to the Eastern part of China. This is a good example of application of the one-health approach.

Through that event, we also experienced timely support by regional and global partners, notably the OIE, WHO and FAO. This is also a good example of application of a regional and global approach.

That event has not been closed. There was another human case reported recently. We should bear in mind that challenges will come without notice. Thus, we should be prepared, at the country level, regional level and global level. In closing, I express my sincere hope that this regional conference will be successful and fruitful through your active participation.

Thank you very much for your attention.
Honourable Representatives of the Authorities of the Philippines,
Dear Delegate of the Philippines, Dr Davinio Catbagan,
Dear President of the Regional Commission, Dr Zhang Zhongqiu,
Dear Members of the Bureau of the Regional Commission,
Dear Director-General, Dr Bernard Vallat
Dear Delegates,
Honourable Representatives of the International and Regional Organisations,
Distinguished Guests, Dear Friends,

It is a very special moment being here in Cebu this week! We all have seen the disastrous effects of the Typhoon Yolande or Haiyan last week, and not to forget the damages caused by the earthquake last month. These natural disasters have brought endless suffering to this very specific region. And as so often, it has hit again the most vulnerable: the poor, the fishers and the farmers. They have lost everything!

It is just impossible to go back to normal after such an event! But let me remind all of us, that not only people have lost their belongings and live: also animals have been affected, animals that played an important role for the livelihoods of their owners, either as production animals or as pets. It is our task as World Organisation for Animal Health to draw the attention of the General public that it might not be sufficient to give support to civil protection, but that veterinary services have also an important role to play in the actual emergency management! OIE as the unique International Organisation dedicated to animal welfare and animal health has a role to play here! Developing appropriate tools for the veterinary services and mobilise donors through creating awareness.

Although we have to join forces now to address the effects of the typhoon Yolande now, we should not forget that climate change is one of the major causes for these events occurring more frequently and more heavily. In this regard we all have our share in mitigating this evolution. The on-going Conference in Warsaw, Poland, is a good opportunity to take courageous decisions: our political masters there should consider that without robust mitigating measures, the accelerated climate change will cause damages that will be far more expensive for the humanity than all thinkable measures to limit the emissions of CO2 and Green House Gases!

Today, the regional conferences and the work of the Regional Commissions are of major importance. This is where veterinarians from countries across the region meet on a regular basis and where they can get to know each other better and jointly work towards solving problems. In the age of globalisation, climate change and in light of the financial crisis with all the insecurities it entails, this is of particular importance. On top of these global challenges, this particular region is facing particular problems, linked to the huge concentration of different species of livestock, and people, facilitating the emergence of new diseases. We have to be aware, that the threat of HPAI H5N1 is still present in the region, killing people (most often children). This year another Influenza virus emerged in China, H7N9, causing losses of lives and livelihoods for many.

The mission of our World Organisation for Animal Health has been significantly broadened since its foundation: in addition to animal health in the strict sense of the term, it now also covers animal welfare and food safety at the level of primary production. What is more, the Organisation has been working to promote veterinary services across the world for some years now. The PVS is an instrument that facilitates a (self-) assessment of veterinary services. In times of crises it is of utmost importance not to forget the support to Veterinary Services by the international community –and who else than our Organisation is in a position to advocate for this?
This year's topics will once again provide a good platform to exchange expertise. Both Technical Items ―Cost-benefit analyses in animal disease control‖ and ―Control of PRRS‖ are important for getting a better understanding of the implications for the society, enabling us to advocate for support from Governments and Donors for the activities of Veterinary Services.

Movement of competition horses, FMD and Rabies control programmes, Animal Welfare are all important topics for the region and beyond. I very much appreciate that the questions linked to pastoralism activities in the region is brought to the agenda. This thematic is too often neglected!

Allow me to say as the elected President of the World Assembly few words on the future of our Organisation. We have just started in the Council the discussion on the next Strategic Plan. Dr Kawashima will present first concepts and perspectives tomorrow. It is of utmost importance that the regions participate in the debate, ensuring ownership of the Strategic Plan at all levels of our Organisation. In this process the representatives of the Regions in the Council bring in directly their views. And I can report that your representatives are taking part very actively in this process.

In my opinion, the upcoming 6th Strategic Plan should aim at consolidating the OIE, to make sure that we will be able to face the challenges ahead, based on sufficient resources! This means also that we have to convince our political masters of the importance of our work for the society. WE know how important we are, but unfortunately the outside world is not always convinced that we are responsible for a global public good!

Therefore I would like to invite you to consider the following points:

- Further modernisation of the Organisation
- Ensuring transparency of information and procedures
- Solidarity among the regions and the countries
- Promotion of the diversity in our Organisation, including the more active participation of young professionals and women.

I'm convinced that we are on the right way. And the Council has already undertaken some steps in this direction with the support of the Bureau, especially from the Director General.

With respect to the promotion of a more balanced representation in our Organisation, including the active participation of all regions, cultures, women and young people, I started to invite during the Regional Conferences all female participants in the conference for a meeting. I have done this the Regional Conferences in Europe, the Americas, in Africa and in Middle East. And I am very happy that we will meet as well during this Conference tonight at 6 p.m. just after the meeting.

The aim of this special meeting is to give the women participating in this Conference a chance to get to know each other better and to discuss ways to step up involvement in our organisation. I hope for a good turn-out and support from the delegations.

I would now like to wish us all a productive conference, with many interesting discussions and plenty of new findings. But let us also enjoy the more informal part of the conference; I hope that you will find the time to talk to colleagues who you do not see that often! Personally I am happy to meet after some years, colleagues I have met when I was working with the FAO in Laos and Cambodia.
Speech by Dr Bernard Vallat
Director General of the World Organisation for Animal Health (OIE)
at the occasion of the
28th Conference of the OIE Regional Commission for Asia, the Far East and Oceania
Cebu, Philippines – 18-22 November 2013

Honourable Undersecretary of Agriculture of Philippines,
Honourable Vice Governor of Cebu,
Honourable Mayor of Cebu City,
Delegate of Philippines to the OIE,
President of the World Assembly of Delegates,
President of the OIE Regional Commission for Asia, the Far East and Oceania,
Members of the Bureau of the OIE Regional Commission for Asia, the Far East and Oceania,
Delegates of Member Countries of Asia, the Far East and Oceania region,
Representatives of international, regional and national organisations,
OIE Regional Representative for Asia and the Pacific,
OIE Sub-Regional Representative for South-East Asia,
Distinguished guests,

It is an honour and a privilege for me to welcome you all, as OIE Director General, to the 28th Conference of the OIE Regional Commission for Asia, the Far East and Oceania.

At the outset, I would like to express my gratitude, on behalf of the OIE Regional Commission for Asia, the Far East and Oceania, to the Government of Philippines for agreeing to host the 28th Conference, inviting us to Cebu, and confirming the event despite such exceptional conditions linked with the typhoon. Let me express all the solidarity of the OIE staff which decided to collect funds to modestly provide support.

I would also like to express my gratefulness in particular to Mr Proceso Jaraza Alcala, Secretary of Agriculture of Philippines, to Dr Davinio Catbagan, OIE Delegate of the host country and Vice-President of the OIE Regional Commission for Asia, the Far East and Oceania, to the regional and local authorities, to our colleagues from the Bureau of Animal Industry of Philippines and from the Cebu Provincial Veterinary Office, to the OIE staff and to our Regional and Sub Regional Representatives for all the efforts made in preparing this event.

Our world is under permanent threat from biological disasters. An unprecedented increase in the movement of people and commodities worldwide, increasing interactions of humans with the environment, deforestation, climate change, urbanisation, the need of more animal production in response to growing global demands for proteins of animal origin such as milk, eggs and meat, and the international trade and smuggling of exotic pets are just some of the factors that have provided greater opportunity for transmission of pathogens between animal species and between animals and humans.

Veterinary Services play an important role in stabilising society because they support a healthy and productive agricultural sector, which in return leads to a safe food supply. Weaknesses in the Veterinary Services of one country can threaten neighbouring countries, regions and, potentially, the whole international community. They also make a significant contribution worldwide to the protection of biodiversity and the environment.

Unfortunately, today, many national Veterinary Services remain weak due to years of underinvestment and non-appropriate governance. That is why the OIE is constantly reminding decision-makers that Veterinary Services activities are a Global Public Good and bringing them into line with international standards on quality and efficiency must therefore be considered as a priority public investment. Consequently, one of our commitments is to support the improvement of the legal framework and public and private resource allocations to national Veterinary Services around the world.
Global control of animal diseases is impossible without good governance of national Veterinary Services. Good governance includes appropriate legislation, appropriate veterinary education programmes, appropriate human and financial resources allocated to Veterinary and Livestock Services, and, finally, relevant public–private partnerships applicable to the entire veterinary domain.

Global control of animal diseases also requires strong alliances, starting at governmental agencies level: the OIE, the United Nations (represented mainly by the Food and Agriculture Organization [FAO] and WHO), the community of international donors supporting animal health programmes, such as the European Union and the World Bank, some Member Countries, private sector, foundations such as Bill & Melinda Gates Foundation, regional organisations, and all OIE Member Countries.

The OIE Global Programme for strengthening Veterinary Services, namely the OIE PVS Pathway has advanced significantly and is now well beyond the symbolic number of 120 OIE Members involved in the process, all on a voluntary basis. Thus, it is now of paramount importance for countries to take ownership of PVS Pathway outcomes at national, regional and global levels, as reflected in the reports of OIE PVS initial evaluation, follow-up, PVS Gap Analysis and Legislation ‘One Health’ and ‘Laboratory’ missions.

The OIE is also engaged, at global level, including your region, in close cooperation with FAO and WHO, in programmes directed to global eradication of diseases such as PPR, rabies in dogs and FMD, following the recommendations of Seoul (for rabies) and Bangkok (for FMD) Global Conferences.

The official recognition pathway such as for FMD and PPR managed by the OIE is a key tool for global eradication as well as for ensuring safe trade of animals and animal products worldwide for everybody.

The world demand for animal welfare is increasing every day and the OIE is the reference Global Organisation for adopting standards on that issue. It is a very challenging responsibility, but it is very useful for our Member Countries.

Your region is still impacted by epizootic but we are working well together to face that situation. It is crucial for the rest of the world, your region being the most important when it comes to human and animal populations.

It is why we will discuss during this Conference on how to improve the participation of Member Countries of the region to increase their participation and contribution in all OIE standard-setting activities.

As you already know, the OIE work programme is dictated by five-year strategic plans developed in collaboration with OIE Members and partners and adopted by the World Assembly of Delegates. We are currently more than half way through the Fifth Strategic Plan and the implementation of this plan is going well.

The Six Strategic Plan is already under development and Member Countries consultation will start during our Conference.

The support provided from our Regional and Sub Regional Representations will also have an enormous impact on the development of OIE activities and the success of the current and upcoming Strategic Plan in the region.

I would like to thank all donors which contribute to the OIE work within the region, mainly through the OIE Animal Health and Welfare Fund, including those supporting activities related to Global Programmes namely, World Bank, Bill & Melinda Gates Foundation, Australia, Japan, Canada, France, Peoples Republic of China, Switzerland, United Kingdom, USA, European Union and New Zealand.
I would also like to mention the work our organisation is doing, among others, to facilitate the growing international movement of competition horses. A new OIE and FEI initiative is aimed at achieving recognition by Veterinary Services of a “sub-population” of high health, high performance horses (HHP).

Ladies and Gentlemen, National Delegates to the OIE,

The particular interest of the technical items presented during this Conference namely the use of cost-benefit analysis in animal disease control, including practical examples from the region, and PRRS control in the Region will undoubtedly contribute to the success of this important event for Asia, the Far East and Oceania. The recommendations to be adopted by the Members of the Regional Commission and the draft Final Report of the Conference will be discussed during a plenary session and will then be presented to the OIE World Assembly of Delegates in Paris in May 2014 for endorsement.

I am sure that the results of your recommendations will be of great importance for the region as well as for the OIE’s 178 Member Countries.

To conclude, may I once again, on behalf of all participants, express my most sincere gratitude to the Philippines authorities for having invited us to Cebu, and to all our veterinary colleagues in Philippines for the very warm welcome we have received.

I have every confidence that the Twenty-Eight Conference of the OIE Regional Commission for Asia, the Far East and Oceania will be a great success.

Thank you for your kind attention.

Dr Bernard Vallat
Speech by Secretary Proceso Jeraza Alcala
delivered by Usec. Bernadette R. Puyat
at the occasion of the
28th Conference of the OIE Regional Commission for Asia, the Far East and Oceania
Cebu, Philippines – 18-22 November 2013

Dr Bernard Vallat, Director General of the World Organisation for Animal Health (OIE);
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Dr Francois Caya, Head, OIE Regional Activities Department;
Ms Nathaly Monsalve and Ms Margherita Recchia also of the OIE Regional Activities Department;
Ms. Susanne Münstermann, OIE Scientific Department;
Dr Karim Ben Jabara, Head, OIE Animal Health Information Department;
Honored speakers especially to Dr Gardner Murray who has been close to the Philippines;
Representatives of regional and international organizations; Chief Veterinary Officers of Asia, the Far East and Oceania;

Ladies and gentlemen:

Good morning. In Cebuano language, it is: “Maayong buntag sa inyong tanan!” I am deeply honoured and privileged to extend, on behalf of the Philippine government and the Department of Agriculture, my warmest welcome to all of you in the OIE as you hold your 28th regional conference here in Cebu.

We are pleased that everyone has come here to the Philippines despite the daunting aftermath of a supertyphoon – the strongest and most destructive ever recorded in history – that left much of the Central Philippines in ruins. Cebu, the Queen City of the South, was also hit and badly damaged, but not enough to dampen our enthusiasm and determination to push through with this conference. I would like to congratulate first Dr Dave Catbagan, OIC-Regional Executive Director Angel Enriquez of the Department of Agriculture Region 7, and the working committees for having endured the challenges of organizing this event.

Recognizing the leading role of the OIE in controlling animal diseases and facilitating international trade of animals and animal products, we in the Philippines are grateful not only for the honour and privilege of hosting this conference but also for all the support that the OIE has generously provided to the Philippines and the other countries in the region. We are confident that this meeting will further strengthen our unity and increase cooperation in promoting animal health and productivity in Asia, Far East and Oceania.

As the world looks to Asia and its neighbouring islands as the fulcrum of growth in the coming decades, it has become clear that with its huge potentials, the region’s livestock and poultry sector will play a significant role in the region’s progress.

But while there are immense potentials in this region’s animal industry, the constraints are just as enormous. In the Philippines, the livestock and poultry sector is plagued by declining animal population (while human population/demand continues to multiply), shrinking pasture areas, high cost and unstable supply of feeds, the persistence of some animal diseases and high marketing costs due to storage, transport and marketing facilities. I’m sure these problems are shared by many of us in the region. We would therefore appreciate an open exchange of experiences and strategies on these concerns.

Seeing Cebu’s ruins and other reminders of destruction left by super typhoon Yolanda, I empathize with Dr Dave Catbagan and support his eloquent appeal to speed up our discussions, resolutions and actions on climate change.
Animal production systems, climate change and animal health are caught in a complex mesh of inter-action. Animal production can aggravate climate change by emitting greenhouse gases such as methane and nitrous oxide. It has been reported that agricultural activities, including animal production, account for 10–12% of global emissions.

On the other hand, climate change also impacts on agricultural production, affecting nutrition in case of crop losses, access to water in case of drought, and animal health. Animal health could be affected both by extreme events such as typhoons, earthquakes, extremely high and extremely low temperature such as droughts and by the emergence and re-emergence of infectious diseases, some of which are transmitted by climate-dependent carriers.

Cohabitating a massive continent that comprises various land forms, climates and cultures, we can only address the challenge of climate change and other difficulties by learning from each other’s strengths and weaknesses, threshing out common problems and together seeking ways to maximize each other’s potentials.

We in the Philippines feel fortunate to have shared with the OIE a string of successful endeavours that serve as the crowning glory of our long partnership. Among these success stories is the Philippines’ attainment of the Foot and Mouth Disease (FMD) Free status and the Bird Flu or Avian Influenza free status. Thanks to the international standards set by the OIE in its Terrestrial Animal Health Code, the Philippines finally attained freedom from these diseases and is now exporting livestock and poultry products to several countries.

We are also fortunate to be one of the first in Southeast Asia to undergo the OIE Performance of Veterinary Services (PVS) Pathway for strengthening our veterinary services. Guided by OIE experts, and with the Bureau of Animal Industry (BAI) as lead agency, our Veterinary Services have gone through the process of evaluation, gap analysis, and strategic planning. The officials of our concerned livestock agencies and veterinary medicine school, regional and local veterinary officers, and livestock and poultry stakeholders have reaffirmed their commitment to work towards attaining better Veterinary Services.

Appreciating the benefits of the PVS, the Philippines was first in Asia to be evaluated on the “One Health” approach. This was done only last year with the primary objective of encouraging close collaboration between Veterinary Services and public health and other relevant partners on public and animal health issues and to provide guidance on improving the levels of compliance of the Veterinary Services with international standards.

We are also one of the first in Asia to be evaluated under the PVS for aquatic animal health. This was conducted only early this year with the Bureau of Fisheries and Aquatic Resources (BFAR) as lead agency.

We would like to thank Dr Abila for pushing forth the programs and projects of the OIE in Southeast Asia. We also laud his efforts in FMD prevention and control under the Southeast Asia and China Foot and Mouth Disease (SEAC-FMD) Campaign as well as in Rabies control and elimination. The OIE has truly helped our country safeguard animal health and uplift our livestock and poultry industries, and for this, we in the Philippines will always be grateful.

My friends, each of our countries has its own particular set of animal livestock related problems. Each has its own program aimed at addressing these problems. But beyond all the political, economic and cultural differences that exist among OIE member countries, we should be able to come up with common lessons and common solutions. This conference has brought us together so that we can share experiences and expertise with each other, and hopefully achieve consensus and cooperation in addressing our region’s animal health and production concerns. May you have a fruitful and memorable conference here in Cebu City. Mabuhay ang OIE!
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AGENDA

1. OIE Activities and Vision for the 21st Century.

2. Activities of the OIE Regional Commission for Asia, the Far East and Oceania.

3. Activities of the OIE Regional Representation for Asia and the Pacific.

4. Activities of the OIE Sub-Regional Representation for South-East Asia.

5. Technical Item I: The use of cost-benefit analysis in animal disease control, including practical examples from the region.


7. OIE Terrestrial Animal Health Standards Commission – Issues of interest to the Region – Challenges and proposals.

8. Animal health situation of Member Countries in the region during the first semester of 2013.


10. Facilitation of international competition horse movement – A new OIE initiative.

11. OIE Initiative to establish an alliance of countries with pastoralism activities by nomadic populations.

12. Regional initiatives for rabies control.


14. Roadmap for FMD Control in East Asia.

15. The OIE 6th Strategic Plan – Concepts and perspectives.

16. Presentations by International and Regional Organisations.

17. Other matters:

   ✓ Proposal for designation of a new OIE Collaborating Centre.

   ✓ Date, venue and technical item with questionnaire for the 29th Conference of the OIE Regional Commission for Asia, the Far East and Oceania.
28th Conference of the OIE Regional Commission for Asia, the Far East and Oceania  
Cebu, Philippines – 18-22 November 2013

PROGRAMME

MONDAY 18 NOVEMBER 2013

4:00 p.m.  Registration and distribution of documents regarding the Conference

TUESDAY 19 NOVEMBER 2013

8:00 a.m.  Registration and distribution of documents regarding the Conference (cont.)

9.00 a.m.  Opening Ceremony

9.45 a.m.  Group photo

10.00 a.m.  Break

10.30 a.m.  Election of the Conference Committee (Chairperson, Vice-Chairperson and Rapporteur General)

Election of Session Chairpersons and Rapporteurs for Technical Items and Animal Health Situation

Adoption of the Agenda and Timetable

10:45 a.m.  OIE Activities and Vision for the 21st Century  
(Prof. Bernard Vallat, Director General of the OIE)

11:30 a.m.  Activities of the OIE Regional Commission for Asia, the Far East and Oceania  
(Prof. Zhang Zhongqiu, President of the OIE Regional Commission for Asia, the Far East and Oceania and Delegate of the People's Republic of China)

11:45 p.m.  Activities of the OIE Regional Representation for Asia and the Pacific  
(Prof. Hirofumi Kugita, OIE Regional Representative for Asia and the Pacific)

12:00 p.m.  Activities of the OIE Sub-Regional Representation for South-East Asia  
(Prof. Ronello Abila, OIE Sub-Regional Representative for South-East Asia)

12:15 p.m.  Lunch

2:00 p.m.  Technical Item I: The use of cost-benefit analysis in animal disease control, including practical examples from the region  
(Prof. Tim E. Carpenter, Professor and Director of Centre EpiCentre, Institute of Veterinary, Animal and Biomedical Sciences, College of Science, Massey University, New Zealand)

3:00 p.m.  Update on the Improved Animal Welfare Programme (IAWP) and on the Regional Animal Welfare Strategy  
(Prof. Gardner Murray, OIE Special Adviser)

3:30 p.m.  Break  
(Preparation of recommendation on the Technical Item I by a designated small group of Delegates)

4:00 p.m.  OIE Terrestrial Animal Health Standards Commission – Issues of interest to the region – Challenges and proposals  
(Prof. Stuart MacDiarmid, Member of the OIE Terrestrial Animal Health Standards Commission)

4:30 p.m.  Animal health situation of Member Countries in the region during the first semester of 2013  
(Prof. K. Ben Jebara, Head of the OIE Animal Health Information Department)

7:00 p.m.  Reception given by the Government of Philippines
WEDNESDAY 20 NOVEMBER 2013

9:00 a.m. Technical Item II: PRRS control in the Region (Dr Tung Nguyen, Vice Director, National Centre for Veterinary Diagnostics, Vietnam)

10:00 a.m. Facilitation of international competition horse movement – A new OIE initiative (Dr Susanne Münstermann, Project Officer, OIE Scientific and Technical Department)

10:30 a.m. Break

11:00 a.m. OIE Initiative to establish an alliance of countries with pastoralism activities by nomadic populations (Dr Batsukh Zayat, Project Officer, OIE Regional Representation for Asia and the Pacific)

11:30 a.m. Regional initiatives for rabies control (Dr Mary Joy Gordoncillo, Science and One Health Coordinator, OIE Sub-Regional Representation for South-East Asia/ Dr Agnès Poirier, HPED Programme Coordinator, OIE Sub-Regional Representation for South-East Asia)

12:00 a.m. Strengthening relationship between the Delegate and Focal Points (Dr François Caya, Head of the OIE Regional Activities Department)

12:20 p.m. Lunch

2:00 p.m. Roadmap for FMD Control in East Asia (Dr Hirofumi Kugita, OIE Regional Representative for Asia and the Pacific)

2:30 p.m. The OIE 6th Strategic Plan – Concepts and perspectives (Dr Toshiro Kawashima, Delegate of Japan and Member of the OIE Council)

2:50 p.m. Proposal for designation of a new OIE Collaborating Centre

3:10 p.m. Presentations by International and Regional Organisations

4:10 p.m. Break

4:30 p.m. Date, venue and technical item with questionnaire for the 29th Conference of the OIE Regional Commission for Asia, the Far East and Oceania

5:00 p.m. Discussions of Recommendations Nos 1 and 2

7:30 p.m. Reception offered by the OIE

THURSDAY 21 NOVEMBER 2013

7:00 a.m. Professional and guided cultural visit

FRIDAY 22 NOVEMBER 2013

9:00 a.m. Adoption of the draft Final Report and Recommendations

10:00 p.m. Closing ceremony
CONSIDERING THAT:

1. Livestock play a significant role in the economies of the Region;
2. Economics is the science of the efficient allocation of scarce resources;
3. Economic analyses represent a source of information to animal disease control decision makers that will enable them to efficiently allocate monetary and human resources;
4. Diseases may have a significant negative impact on human health, livestock production and trade;
5. Diseases and their pathogens are not limited by geographic boundaries;
6. According to the results of a questionnaire-based survey conducted among Member Countries in the Region, 19 different animal diseases or pathogens were each considered by at least two countries to be among their five most important diseases/pathogens;
7. According to an analysis of data provided in the questionnaire, the proportion of individual countries' five most important diseases that are endemic to that country ranged from 37% to 56%;
8. Human and livestock demographic and epidemiological data are necessary to conduct economic analyses of animal disease control programmes;
9. An objective of the OIE Regional Commission for Asia, the Far East and Oceania Region for 2011-2015 is to take into account the economic impacts of "measures for the prevention, control and eradication of animal diseases including zoonoses";
10. Foot and mouth disease (FMD) was identified by 78% of the questionnaire respondents as being among their five most important animal diseases;
11. According to the analysis of data from the questionnaire, almost all of the respondents felt that cost-benefit analysis was either very or somewhat important in disease control in their country;
12. According to the analysis of data from the questionnaire, almost all of the respondents felt it would be helpful to have access to unpublished reports on the socio-economic animal disease impact from other countries;
13. According to the analysis of data from the questionnaire, almost all of the respondents replied that more socio-economic analyses of the impact of animal disease should be made in their country;
14. According to the analysis of data from the questionnaire, a vast majority of the respondents replied that animal disease control decisions made in their country should be based either absolutely or mainly on socio-economic criteria;
15. According to the analysis of data from the questionnaire, almost all of the respondents replied that the OIE should deliver regional workshops on the use of socio-economic analysis of animal disease impact;
16. According to the analysis of data from the questionnaire, almost all of the respondents replied that the OIE should produce socio-economic guidelines on the use of socio-economic analysis of animal disease impact;

17. According to the analysis of data from the questionnaire, almost all of the respondents replied that the OIE should maintain a register of analyses on the use of socio-economic analysis of animal disease impact; and

18. According to the analysis of data from the questionnaire, almost all of the respondents replied that the OIE should provide a list of experts on the use of socio-economic analysis of animal disease impact.

THE OIE REGIONAL COMMISSION FOR ASIA, THE FAR EAST AND OCEANIA

RECOMMENDS THAT:

1. The Member Countries consider economic analyses in the planning of animal disease control and eradication programmes;

2. The Member Countries identify the sources of demographic and epidemiological data to support economic analyses and consider the means of addressing the gaps in this information;

3. The Member Countries encourage publication and dissemination of economic analysis undertaken in their countries in order to share with one another findings and methodologies used in performing economic analyses of animal disease control;

4. The Member Countries identify economists in their Veterinary Services, universities and other institutions, and establish working relationships between these experts, policy analysts and decision makers, to support the development of capability in economic analysis of disease control and eradication programmes;

5. The OIE continue to advocate, at high level, on the economic benefit of animal disease control;

6. The OIE promote the use of economic analyses of animal disease control and eradication programmes by delivering regional workshops;

7. The OIE support economic analyses of animal disease control programmes by producing a special publication on socio-economic analysis of animal disease impact that could be then translated in relevant national languages, if resources are available;

8. The OIE support economic analyses of animal disease control programmes by maintaining an indexed register of analyses undertaken by Member Countries and providing a list of relevant experts;

9. The OIE promote the establishment of an OIE Collaborating Centre on the use of economic analysis in animal disease control; and

10. The OIE establish an ad hoc Group and publish guidelines on economic analysis in animal health policies including disease control and eradication.
CONSIDERING THAT:

1. The human and animal population of Asia, the Far East and Oceania Region, in 2013, represents the major part of the overall world human and animal population;

2. The consumption of pork in this Region will augment with the constant increase and access of the human population to middle class;

3. HP-PRRS outbreaks have continuously occurred for many years and that infection with this virus now appears to be spreading even more quickly, through, among others, a lack of proper biosecurity and management practices;

4. The increase in cross-boundary movement of people, pigs and pig products represents a high risk of spread of HP-PRRS and other infectious animal diseases;

5. Phylogenetic analysis of HP-PRRS virus isolates in some Member Countries of the Region suggests that HP-PRRS outbreaks are closely linked;

6. There is a lack of understanding regarding the epidemiology and other aspects of infection with PRRS viruses;

7. PPRS is part of OIE listed diseases;

8. In many cases, there are no suitable vaccines available against HP-PRRS viruses; and

9. The OIE has an active ad hoc Group on PRRS reporting to the Code Commission and that soon, a Terrestrial Animal Health Code chapter on infection with PRRS virus, including standards on the conditions for trade of pigs and pig products, will be proposed for adoption by the World Assembly of Delegates.

THE OIE REGIONAL COMMISSION FOR ASIA, THE FAR EAST AND OCEANIA

RECOMMENDS THAT:

1. The OIE Member Countries establish more effective measures to strengthen border controls through mutual collaboration with their neighbouring countries;

2. The OIE Member Countries systematically notify the occurrence of PRRS in a timely manner using the OIE World Animal Health Information System (WAHIS);

3. The OIE Member Countries develop a national disease control strategy for PRRS and other infectious diseases of swine addressing, among others, animal movement management and control to prevent the spread of PRRS virus;

4. The OIE Member Countries conduct risk and impact assessments along the production chains to add to our understanding of PRRS;

5. The OIE Member Countries increase their surveillance for swine diseases as well as their capacities at all levels, including national laboratory networks;

6. The OIE Member Countries encourage the establishment and the improvement of biosecurity measures to limit and prevent the spread of PRRS viruses;
7. The OIE Member Countries promote the appropriate use of safe and efficient vaccines matching circulating strains as a tool to reduce clinical disease;

8. The OIE Member Countries of the Region collaborate and share information, using all appropriate mechanisms, including regional GF-TADs, in order to ensure a harmonised approach to PRRS control strategies;

9. The OIE Member Countries of the Region take better advantage of the expertise available in the OIE Reference Centres;

10. The OIE Members Countries of the region be actively engaged in commenting on the Terrestrial Animal Health Code chapter on infection with PRRS virus to be circulated soon;

11. The OIE support the National Veterinary Services of Member Countries in building capacity in terms of epidemiology, early detection, and appropriate response to PRRS;

12. The OIE promote research activities regarding pathogenicity, immunity, epidemiology, improvement of vaccines, development of a diagnostic marker to accurately predict the virulence of an isolate, and a DIVA method to differentiate vaccine strains and field viruses;

13. The OIE develop, in the Terrestrial Manual, new standards on the quality of vaccines for PRRS; and

14. The OIE, in collaboration with other international and regional organisations, support the development and publication of scientific information on PRRS, including on biosecurity and surveillance.
MOTION OF THANKS

The President and the Members of the OIE Regional Commission for Asia, the Far East and Oceania, the President of the World Assembly of Delegates, the Director General of the OIE, members of delegations, country representatives, representatives of international and regional organisations and observers, wish to express their gratitude to the Government of Philippines, the host country of the Conference, held from 18 to 22 November 2013 and, to the national Delegate to the OIE, for the warm welcome extended to the participants, the excellent organisation and for all facilities made available to participants during their stay in Cebu.