









## The fundamental conundrum

- Management of all diseases, whether plant or animal, only possible with good understanding of their epidemiologies and features of the infectious agent concerned
- The epidemiologies of SAT- & Eurasian type FMD differ significantly (Vosloo & Thomson, 2017)
- Unlike Eurasian serotype FMD in livestock, SAT viruses in locations where African buffalo occur, is not eradicable (Thomson, Fosgate & Penrith, 2017)
- Current international standards & recommendations for the control of FMD are based on Eurasian-type FMD
- Consequently, sub-Saharan Africa where SAT-type FMD is endemic is saddled with trying to fit square pegs into round holes!
- Nowhere else in the world has this problem, so we will have to come up with the solution!
- Management of SAT-type FMD has been a major problem in southern Africa, particularly over the last 17-18 years
- Clearly, things need to change

Factor	SAT-type FMD viruses	Eurasian-type FMD viruses
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Relationship with wildlife	Evolved in and maintained naturally by African buffalo populations	Evolved in livestock; not maintained by <u>any</u> wildlife population
Pathogenicity	Generally a mild or unapparent disease in both livestock & wildlife	Generally a serious disease in cattle, pigs & wildlife
Natural rate of transmission	Commonly slow and inefficient in endemic areas of southern Africa	Commonly rapid and efficient
Antigenic variation	<ul> <li>Vaccine efficacy compromised by exceptional antigenic diversity</li> <li>Lack of clear subtypes</li> <li>→ difficulty in matching vaccine and field viruses</li> </ul>	<ul> <li>Less antigenic diversity</li> <li>Favoured by existence of clear subtypes → enables effective 'matching' of field and vaccine viruses</li> </ul>



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## Conclusion

- SAT- & Eurasian-type FMD are two very different forms of the disease; they differ in their evolution, the way they behave in the field and also amenability to control by vaccination
- Despite the struggle against SAT-type FMD in southern Africa for >80 years, local realities still not widely understood (including by vets)
- This situation is complicated by international standards & recommendations being founded almost exclusively on Eurasian-type FMD
- We need to change this state of affairs, but the question is how?