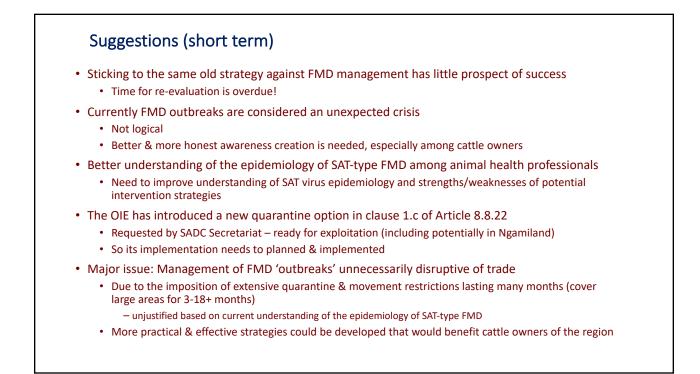


Some realities

- In situations like Ngamiland, FMD cannot with existing technology be eradicated; explanation published (Thomson, Fosgate & Penrith, 2017 – Transboundary & Emerging Diseases)
 not only because of wildlife involvement, i.e. includes other unique features of SAT serotype FMD
- So, if correct, southern Africa will have to learn to live with FMD, i.e. minimise both its direct & indirect impacts
- CBT is a mechanism designed to address the major indirect impact of contagious animal diseases, i.e. the trade effects of commodities not produced within disease-free areas
- For a number of reasons CBT cannot flourish if background control of FMD is inadequate CBT benefits from improved FMD control generally
- So FMD control & CBT application need to be complementary (or, at least, not incompatible)
- The question is therefor: How can (1) more effective control of FMD & (2) complementarity between CBT & FMD control be achieved?



Suggestions (longer term)

- Prophylactic vaccination strategies need to be reassessed & more carefully audited
- International standards & recommendations do not cater for the SAT-type/wildlife problem
 - International organisations need to be persuaded that this issue needs to be urgently addressed (they know about it)
 - · 'Progressive Control Pathway for FMD' does not even mention the SAT/wildlife problem
 - SADC was doing a good job in advancing the regional cause until recently but impetus seems lost; rejuvenation needed

Location	Prerequisites and critical control points (CCP – bold)	Food safety CCP	Animal disease CCP
Field	 Animal ID, associated data base & cattle traceability system Control of cattle movement Grazing & kraaling strategies that avoid contact with buffalo as far a possible Compliance with vaccination programmes aimed at control of TADs (FMD, anthrax, CBPP) Avoidance of undesirable feeding practices (e.g. use of MBM), observance of treatment recommendations for control of parasites & infectious diseases (including observance of withdrawal periods for medicinal treatments) Monitoring of compliance at farm level (MP) 		
Transportation	 Motorised transportation to QS & abattoir (i.e. avoidance of trekking) Observance of good practice guidelines provided by Mentorship Programme (avoidance of overcrowding & use of unsuitable vehicles) Decontamination of transport vehicles between batches of animals 		
Quarantine station	 Modification of management practices that do not comply with international norms plus development of corrective strategy Revaccination against FMD on entry to the quarantine facility Health inspection of all animals at start & end of quarantine period 		:
Abattoir	Documented traceability system Washing down of animals on arrival at abattoir Cleanliness of the holding areas Ante- & post-mortem health inspection (including carcass inspection) HACCP & GHP implementation supported by independent certification Temperature control of carcasses and harvested cuts Prescribed carcass maturation over 24 hour period, including pH determination Thorough deboning & removal of lymph nodes Microbiological monitoring Residue monitoring Screening of sera & lymph nodes to certify achievement of standards set for FMD control (experimental) 21 day 'quarantine of meat' (post-slaughter)		:
Processing and packaging	GHP HACCP certification Refrigeration control Metal detection	:	

Action	Food safety CCP	FMD CCP
Documented traceability system		
Washing down of animals on arrival at abattoir		
Cleanliness of the holding areas		
Ante- & post-mortem health inspection (including carcass inspection)	V	V
HACCP & GHP implementation supported by independent certification		
Temperature control of carcasses and harvested cuts	V	V
Prescribed carcass maturation over 24 hour period, including pH determination		٧
Thorough deboning & removal of lymph nodes		V
Microbiological monitoring	V	
Residue monitoring		
Screening of sera & lymph nodes to certify achievement of standards set for FMD control (experimental)		
21 day 'quarantine of meat' (post-slaughter)		V

Conclusion

- The management of FMD in the SADC Region has regressed in the last 15-20 years; that trend therefore needs to be turned around
 - Trying to do more of the same but better is unlikely to be the answer in fact there are technical reasons why that is a recipe for failure!
- There is an array of potential improvements that could be instituted to improve FMD control & facilitate trade in livestock commodities in FMD-endemic areas like Ngamiland
- However, this is a complex field & selection of the best approach requires informed consideration (no magic bullet)
- Proposed initial steps:
 - 1. Reassessment of outbreak management strategy
 - 2. Investigate ways to align routine FMD management & the commodity-based trade approach