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SOUTH AMERICAN COMMISSION FOR THE RIGHT  
AGAINST FOOT AND MOUTH DISEASE

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**SOUTH AMERICAN COMMISSION FOR THE FIGHT  
AGAINST FOOT-AND-MOUTH DISEASE**

*XXVI Regular Meeting*

Porto Alegre, Rio Grande do Sul, Brazil  
18-19 March 1999

FINAL REPORT

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## SOUTH AMERICAN COMMISSION FOR THE FIGHT AGAINST FOOT-AND-MOUTH DISEASE XXVI REGULAR MEETING

Porto Alegre, Rio Grande do Sul, Brazil, 18-19 March 1999

### **FINAL REPORT**

The XXVI Regular Meeting of the South-American Commission for the Fight Against Foot-and-Mouth Disease (COSALFA) was held in the city of Porto Alegre, Rio Grande do Sul, Brazil, on March 18-19, 1999, in response to the appropriate call to convene. Dr. José Germán Rodríguez Torres, Director of the Pan-American Foot-and-Mouth Disease Center (PANAFTOSA) acted as the secretary ex officio.

Delegates from the official and private sectors of Argentina, Bolivia, Brazil, Colombia, Ecuador, Paraguay, Uruguay and Venezuela, and from the official sectors of Chile, Peru and Guyana, participated in the Meeting.

Also attending as observers were delegates from: Canada, United States, Great Britain, Panama and Suriname, as well as from the Pan-American Health Organization (PAHO/WHO), the Inter-American Institute for Cooperation in Agriculture (IICA), International Office of Epizootics (OIE), the United States Department of Agriculture/Animal and Plant Health Inspection Service (USDA/APHIS), Andean Union, professional, industrial and trade entities related to the livestock sector and universities from the various countries.

At the opening ceremony, the meeting was chaired by Dr. Carlos Rivaci Sperotto, President of the Federation of Agriculture of the State of Rio Grande do Sul (FARSUL) and Vice-President of Brazil's National Confederation of Agriculture (CNA). He was joined by the following dignitaries: Dr. João Carlos de Souza Meirelles, Secretary of Agriculture of the State of São Paulo; Dr. Aluisio Berbert Sathler, Director of the Animal Defense Department of Brazil's Ministry of Agriculture and Supplies (DDA/MAA); Dr. José Germán Rodríguez Torres, Director of PANAFTOSA; Sr. José Armando Amado, President of the Livestock Federation of Mato Grosso do Sul (FAMASUL); Dr. Primo Arámbulo III, Head of the Public Veterinary Health Program of the PAHO/WHO; and Dr. Jaime Estupiñán, Director of the Pan-American Institute of Food Protection and Zoonosis (INPPAZ), all of whom welcomed the participants and wished them a successful Meeting.

The Meeting then proceeded in accordance with the approved agenda, under the direction of Dr. Aluisio Berbert Sathler, and included the reading of the Report of the ex officio Secretary. The Report was approved and is attached hereto. Next, a proposal was made to revise and complement the Continental Vesicular Disease Surveillance and Information System, the Situation of the Regional Foot-and-Mouth Disease Eradication Projects, and the proposal of a Cooperation Agreement for the Andean Area.

The Meeting agenda also included the conference on the System of Ensuring the Quality of the Veterinary Services, a presentation on the progress observed in the startup of a prevention program in Guyana, with the purpose of obtaining OIE recognition of that country as free of the foot-and-mouth disease, as well as other matters that will be discussed hereinbelow.

## **REPORT OF THE SECRETARY**

### **1. BACKGROUND**

The XXVI Regular Meeting of the South-American Commission for the Fight Against Foot-and-Mouth Disease (COSALFA) is a benchmark event in the history of the fight against foot-and-mouth disease on the South American Continent. It signals the crystallization of a favorable health situation attained by Argentina and Paraguay, which have completed two years with the absence of the disease, and by the states of Santa Catarina and Rio Grande do Sul in Brazil, which have also completed a year with no reports of the disease. Moreover, periodical serological surveys have indicated the absence of residual viral activity in the afore-mentioned region.

Like Uruguay and Chile, Argentina developed an internal exotic-disease prevention and emergency control system as part of the process of preparing to change its classification to that of a country free of the disease without vaccination. Paraguay conducted a risk analysis workshop to establish a prevention system and strengthened its prevention structure. Brazil set up an International Agriculture and Livestock Surveillance Program comprising services and coordinated control posts that broaden the Program's involvement in prevention at ports, airports and borders.

During the year in review, foot-and-mouth disease outbreaks were reported in the state of Mato Grosso do Sul, in Brazil's western region, after almost 36 months with no report of the disease. The appropriate emergency action was taken, together with Paraguay, which was unaffected, and the disease did not spread. The outbreak was quickly eradicated. The state of Roraima and the State of Bolívar in Venezuela also recorded occurrences on the border with Guyana, but without endangering that country.

Shared management developed by the official national agencies and the livestock-producing sector, which jointly conduct the control programs, has taken root as the most widely utilized form. Argentina has set up 374 local committees, Colombia has 74, Ecuador 134, Paraguay 277, Peru 352, Uruguay 19, and Venezuela 91. In Brazil, the state of Mato Grosso has set up 130 local committees whereas Santa Catarina has 128.

The countries of Central America, North America and the Caribbean, as well as Chile, Guyana, French Guiana, Suriname and Uruguay, have maintained their condition as countries free of foot-and-mouth disease.

## **2. ANALYSIS OF THE COSALFA XXV RESOLUTIONS**

### **2.1. River Plate Basin Subregional Project (PCP)**

The situation of foot-and-mouth disease absence in Argentina and Paraguay led them to set up emergency and prevention systems. Following the progress of their sanitary policies, Argentina has requested that the OIE recognize it as a disease-free country without vaccination as of the year 2000. Paraguay will follow suit shortly.

Argentina set up a working group composed of epidemiologists and outside consultants, to carry out an analysis of the risk of the introduction of the disease into the country. It conducted five emergency workshops and a simulation within the activities of the prevention program. The biosafety standards of the vaccine-producing and diagnostic laboratories were also reaffirmed.

In support of the decision to suspend vaccination, PANAFTOSA cooperated in the sero-epidemiological monitoring of the two countries through direct technical assistance and supply of reagents. Furthermore, the process was continued of transferring the EITB and ELISA diagnostic tests based on non-structural antigens to the laboratories of the National Service of Health and Food & Agriculture Quality (SENASA), in Argentina, of the National Animal Health Service (SENACSA) of Paraguay, and of the Animal Reference Laboratory (LARA), Porto Alegre, Brazil.

PANAFTOSA formed a group of consultants who, with professionals from the Ministry of Agriculture, Livestock and Rural Development (MAGDR), Bolivia, and financial support from the Financial Fund for the Plate River Basin (FONPLATA), jointly drafted the National Foot-and-Mouth Disease Eradication Project to be submitted to the appreciation of international funding agencies. PANAFTOSA, in cooperation with the USDA, supported the MAGDR in preparing the Beni-Pando subproject for its funding under USAID PL480.

PANAFTOSA also lent support to the Veterinary Diagnostic and Research Laboratory (LIDIVET), in establishing cell culture procedures and implementing the ELISA antibody technique for infectious bovine rhinotracheitis, as well as the ELISA-VIA technique, as part of the process of strengthening the differential diagnostic capacity for foot-and-mouth disease.

SENASA has offered to provide support to Bolivian authorities in creating a buffer zone in the Tarija region. That support included supplying 500,000 doses of foot-and-mouth disease vaccine, of which 100,000 have already been delivered.

The support discussed indicates a further example of PANAFTOSA's strong determination to join with the technical coordination of the PCP and of the countries that comprise it, in establishing a health program that protects the free area of the Southern Cone from the introduction of sources of infection from Bolivia, and thus improving the health situation more and more with respect to foot-and-mouth disease in this country.

## **2.2. Andean Subregional Project for eradication of foot-and-mouth disease**

The resolution related to the Andean Area centered on the revitalization of the Border Health Agreements which, as agreed at the Meeting of the Ministers of Agriculture of the Andean countries held in Bogotá in June, 1997, would transform those Agreements into Integrated Strategic Animal Health Plans. The resulting Plans would emphasize the prevention, control and eradication of foot-and-mouth disease and the creation of an Andean Foot-and-Mouth Disease Eradication Project similar to the one implemented in the Plate River Basin.

With the exception of the former Colombian-Venezuelan Animal Health Agreement, that established a coordinated program on both sides of the border and utilizes the evaluation model proposed by PANAFTOSA, the other agreements have not implemented what was agreed upon.

PANAFTOSA developed a proposal for an agreement that was submitted for the consideration of the subregion's national authorities; its objective is to establish the technical, administrative and financial bases for carrying out the proposal.

At the III Andean Phyto and Animal-Health Forum held on Margarita Island, Venezuela, from 24 to 26 September, the Directors of the National Animal Health Organizations of the Andean Community voiced, in principle, their favor of the PANAFTOSA proposal. However, they maintained that the proposal needed to be studied more closely.

The countries that sent in comments were Colombia, Peru and Venezuela. Their suggestions were taken into consideration in the drafting of the new proposal which, in turn, was submitted to the Andean countries' delegates at this current meeting for further analysis and comments.

PANAFTOSA has continued to support the epidemiological surveillance systems of the countries of the subregion, strengthening the diagnostic capacity, establishing and monitoring foot-and-mouth disease diagnostic tests based on non-structural antigens, vaccine control methodology, and ELISA differential tests for vesicular stomatitis, blue tongue, infectious bovine rhinotracheitis and bovine viral diarrhea.

## **2.3. Subregional Amazonian and non-Amazonian Brazil Project**

Unfortunately various events during the year in review affected the health situation of the region in some of its areas that had not recorded any presence of the disease for more than two years. This was the case of Porto Murtinho in Mato Grosso do Sul, of Roraima in the Amazon region of Brazil, and of the state of Bolivar, in Venezuela. Therefore, the possibility of requesting that the region comprising the states of Roraima and Bolivar be

recognized as free with vaccination, acting as a buffer zone for Guyana, had to be postponed, even though the sero-epidemiological survey conducted in the state of Bolívar prior to the occurrence and in Rupununi, revealed no viral activity.

Despite the strengthening of the activities of preventing the introduction of the viral agent on the borders endangered by the afore-mentioned outbreaks, the meetings of the binational agreements in the region were not held, although they would have been of great value in consolidating the presentative actions.

PANAFTOSA supported Guyana in the proposal of creating a national prevention program, as agreed in Resolution III of COSALFA XXV. Nevertheless, PANAFTOSA has not received from the country the basic information needed to support the preparation of the program.

On the other hand, PANAFTOSA lent support to the DDA/MAA in designing the sero-epidemiological sampling of Brazil's Central West Livestock Circuit. Likewise, it cooperated in creating a proposal for a national epidemiological surveillance and information system for Suriname.

#### **2.4. Training of human resources**

PANAFTOSA organized and participated in both in-house and outside service courses and training programs to train professional personnel in epidemiology, surveillance and information systems, action in emergencies, risk analysis and prevention. During the period, technical staff from Argentina, Bolivia, Peru and Brazil were trained in ELISA techniques for diagnosis of foot-and-mouth disease and diseases that could be confused with foot-and-mouth disease.

As a consequence of Brazil's laws prohibiting the handling of foot-and-mouth disease virus in the region where the PANAFTOSA is located, starting in January 1998 and with support from the DDA, diagnosis and vaccine-control routines were implemented at the Animal Support Laboratory (LAPA/Belém). The transfer of know-how was used to update the human resources assigned to that unit of Brazil's Ministry of Agriculture and Supplies.

#### **2.5. Epidemiological Surveillance System**

The change observed in the foot-and-mouth disease epidemiological situation is reflected in the absence of reports of clinical disease for long periods in certain regions of South America, as well as the absence of viral activity certified by various studies. That situation thus requires greater surveillance action focusing on the strains active in the field, based on epidemiological studies at the molecular level.



In this sense, PANAFTOSA is developing sequencing studies of the field strains with support from the Animal Support Laboratory (LAPA/Belém) and from the Oswaldo Cruz Foundation (FIOCRUZ) of the Brazilian Ministry of Health, until our facilities are able to comply with the appropriate biosafety standards. We have had the support of the World Reference Laboratory (WRL) in the studies of sequencing, and we cooperated with FAO/SENASA/INTA in preparing a protocol for the study of some strains of epidemiological interest. Because the first version of that proposal was oriented more toward academic research, it is currently undergoing revision to orient it to support the prevention programs in free areas.

Due to the changes observed in the occurrence of foot-and-mouth disease, PANAFTOSA is reconsidering its Continental Vesicular Diseases Surveillance and Information System. The objective is to adapt it to the information needs of the prevention programs. The new version was presented during this Meeting and will subsequently be delivered to the national services with the program for installing it. It is directed toward improving the flow of information, avoiding several errors presently committed and facilitating the integration of the information into the Web homepage that PANAFTOSA will soon put on the Internet.

It is important to stress that the proposal improves only the use of the information generated by the countries and forwarded to PANAFTOSA for the assessment of the epidemiological situations observed.

In the attempt to standardize laboratory procedures, PANAFTOSA has described 14 techniques for diagnosing foot-and-mouth disease, vesicular stomatitis and diseases that can be confused with them. The techniques were submitted and approved at technical seminars with the participation of professional staff from the subregion's national laboratories.

Additionally, in the light of its new responsibilities, PANAFTOSA is drafting a new information system for rabies, brucellosis, tuberculosis and equine encephalitis. The system for rabies was already submitted to the National Directors of the Rabies Control Programs during the 7<sup>th</sup> REDIPRA, held in December, 1998, at Puerto Vallarta, Mexico.

Ecuador and Venezuela have developed projects for the creation of surveillance and information systems based on community participation, with a view to the broad participation of the livestock-producing sector in the local committees and plans. Bolivia set up a national surveillance and information network within the framework of the National Eradication Plan; the network initially covered the department of Santa Cruz de la Sierra. The system receives support from MAGDR, the British Mission, non-governmental organizations, the livestock producers and the civil authorities of the various departments.

PANAFTOSA has proceeded to develop the version of the SIVESA implemented in Mato Grosso do Sul, Brasil, covering a total of 75 local offices. The pilot project in Colombia was set up in two localities of the Atlantic Coast and one close to Bogotá.

## **2.6. International Seminar on Actions to Prevent the Introduction of Foot-and-Mouth Disease and other Exotic Diseases**

In compliance with this Resolution, PANAFTOSA organized and carried out the envisioned seminar with presentations on the four basic topics: primary prevention and risk analysis; health emergency systems; infrastructure of the veterinary attention services; and regionalization in the prevention of the introduction of foot-and-mouth disease. Working groups were set up to discuss the experiences submitted and to make suggestions about their applicability to the national realities. The following are some of the conclusions reached: the need to change epidemiological thinking from a vision of control and eradication to measures of prevention in those countries that have attained a favorable health situation, as well as the need to restructure the veterinary attention services to cope with that change of situation. Fortunately –as could be observed in the International Seminar on Aspects of Epidemiological Surveillance applied to Health Management in Areas with Different States of Foot-and-Mouth Disease, with and without Vaccination, presented prior to this COSALFA– the desirable changes are already underway.

## **2.7. Director Emeritus**

According to information obtained from the Directors of PANAFTOSA, in a note dated June 26, 1998 and sent directly to the Delegates, we directed to the Director of PAHO the Recommendation made at the XXV COSALFA about naming Dr. Vicente Astudillo as Director Emeritus of PANAFTOSA. After consulting the pertinent authorities, the Director of PAHO regretted being unable to act on the request because of the fact that no such type of recognition exists in the organization. But he nevertheless thanked the COSALFA Delegates for their interest in recognizing the work performed by one of the PAHO's staff.

## **3. BORDER MEETINGS**

In general, the calendar of border meetings was not fully met. These meetings are of special importance, given the potential risk of foot-and-mouth disease introduction that international trade relations can represent.

Because of the great importance for the Hemispheric Plan for Foot-and-Mouth Disease Eradication (PHEFA), we strongly encourage the representatives of the subregion to foster the implementation of the border agreements which, in the Andean subregion, should be transformed into Strategic Plans for Foot-and-Mouth Disease Eradication, as agreed by the Ministers of Agriculture at the afore-mentioned Meeting in Bogotá, Colombia.

The authorities in Ecuador and Peru drafted a proposal covering activities for the prevention and control of communicable diseases at the border level.

During the year in review the following meetings of the border agreements were held:

- **IV Regular Meeting of the Animal Health Border Agreement among the Republics of Bolivia, Chile, Peru and the PAHO/WHO, and Technical Meeting of the Local Committee of the Animal Health Border Agreement among the Republics of Bolivia, Chile, Peru and the PAHO/WHO.**
- **Colombian-Venezuelan Agreement**

The evaluation model proposed by PANAFTOSA was used. Other topics related to the health situation of the agreement area, especially equine encephalitis, were also discussed. Of special importance was the discussion of a joint program focusing on foot-and-mouth disease epidemiological surveillance in the border area with the identification of sentinel and high-risk farms.

- **Colombian-Ecuadorian Agreement**

The Regular Meeting of the Binational Technical Committee was not held. However, working meetings of the two countries' Health Authorities were held to coordinate activities involving animal quarantine in the border area.

#### **4. NEW FUNCTIONS FOR PANAFTOSA**

The Director of PAHO decided to transfer to PANAFTOSA the responsibility of providing the countries with the technical cooperation for the control and final goal of eradicating the following zoonoses: rabies, brucellosis, tuberculosis and equine encephalitis. PANAFTOSA will take charge of: the aspects related to the epidemiological surveillance and information systems, risk analysis, designing and evaluating programs and; support of the diagnostic activities, which includes the production and quality control and distribution of biological products and reagents; reference diagnosis and personnel training in those areas. The PAHO Veterinary Public Health Program and PANAFTOSA will jointly draft agreements for cooperation with national laboratories having high technical capabilities in order to provide the cooperation that the countries require.

#### **5. REPRESENTATION AT INTERNATIONAL MEETINGS**

As the continental reference center for foot-and-mouth disease or as ex officio Secretariat of the COSALFA, PANAFTOSA was represented at important scientific, technical, political and institutional meetings called by international or national cooperation agencies such as: FAO, OIE, APHIS/USDA, IICA, and USAHA. PANAFTOSA staff delivered various technical papers at national, subregional and continental veterinary medicine congresses, and at seminars on epidemiology, diagnosis of diseases and program management.

## 6. RESEARCH PROJECTS

PANAFTOSA's line of research is conditioned to the needs of the member countries, in their objective of eradicating the disease according to the strategies laid out by the PHEFA. Some of the research projects are listed below:

- Detection of antibodies against non-structural FMD-virus proteins, based on EITB and ELISA 3ABC tests. The project includes the process of securing OIE validation of those tests, which is developed in coordination with the national laboratories of the region and of Italy, WRL Pirbright, and the Botswana Regional Reference Laboratory.
- Detection and characterization of foot-and-mouth disease, which includes studies of foot-and-mouth disease virus during its replication in persistently infected hosts
- Panel characterization of epidemiologically important viruses in South America, in coordination with FAO/WRL/SENASA/ INTA.
- Establishment of the direct PCR technique and sequencing to establish the foot-and-mouth disease virus sequences bank in South America.
- Harmonization of 14 laboratory technique protocols, with the participation of five countries.
- Standardization of the seroneutralization technique for bovine viral diarrhoea.
- Mapping of epitopes recognized by a panel of monoclonal antibodies utilized in the control of vaccines.
- Standardization of the solid phase competition ELISA technique for serology of infectious bovine rhinotracheitis.

Lic. José Antonio Mendes da Silva and Engineer Lauro Loureiro Baptista, from PANAFTOSA, then submitted the proposal of the new Continental Vesicular Diseases Epidemiological Information and Surveillance System. Developed in response to a resolution of COSALFA XXV, the new system seeks to meet the need for information for prevention, in the light of the advances observed in the eradication of the disease —principally in the Southern Cone area— and places special attention on the differential diagnoses of reported suspicions, making the system more agile and effective.

Examples of the new proposed reports were presented and suggestions were collected for the immediate modification of the present system and to speed up the process of implementing the new routine in the countries' official services. The suggestions led to the drafting of a resolution.

The representative from Uruguay made a motion for standardization in the use of certain terms in the process of regionalization, like free zone or region. The motion was accepted by the Chairman.

Dr. Victor Saraiva, Foot-and-Mouth Disease Coordinator at PANAFTOSA, then took the floor to discuss the situation of vesicular diseases during the year in review in South America. He put special emphasis on the Subregional Amazon and non-Amazonian Brazil Project. Despite the decline in the number of outbreaks reported, he pointed out that foot-and-mouth disease had been reported again in the Brazilian state of Roraima and in Venezuela's state of Bolívar. This occurrence, happening after almost four years of absence, served to postpone the recognition of the zone as free with vaccination, together with the reclassification of Guyana, which currently seeks recognition as free without vaccination. Dr Saraiva mentioned that outbreaks of virus type C had not been reported on the subcontinent for more than four years.

Finally, he discussed the two outbreaks that occurred in the municipality of Porto Murtinho in Mato Grosso do Sul, Brazil, at the outset of the year. The emergency attention system was activated and culminated in the eradication of the outbreak and the sacrifice of sick and contact animals.

Dr. Francisco Muzio, technical Coordinator of the Plate River Basin Project, discussed the advances observed in the region during the year. He mentioned especially the appearance of Indiana type II vesicular stomatitis in the states of Paraná and Santa Catarina, Brazil, an outbreak which alerted the emergency system in the region. The tracings carried out lead to the belief that the spread was facilitated by vaccination activities and by the transit of milk trucks. The possibility of insect participation in transmission is also under discussion. The epidemiological studies will follow.

With respect to this discussion, Dr. Aníbal Barreto, of SENACSA, said that two years ago the shared management of the program in Paraguay had been decreed. Consequently, the livestock producers now provide 50% of the program's costs, including the indemnification fund for emergency activities. Paraguay will probably follow Argentina in requesting recognition as a country free without vaccination, as soon as the corresponding prevention actions are completed.

Dr. Alberto Pecker, representing Argentina's SENASA, ratified the political decision of suspending vaccination in April, 1999, switching the eradication program's focus to prevention. This will include the creation of a Vaccine Bank, the carrying out of regional risk analyses jointly with Chile and Paraguay, and the setting up of an emergency fund based on an international insurance policy. Argentina will ask the OIE to recognize it as a country free without vaccination in the year 2000.

Dr. Hugo Tamayo, consultant at the Ecuador/PAHO Representation, presented the Andean Area Regional Subproject report. The countries of the subregion accounted for 41% of the vesicular suspicions and 97% of the positive outbreaks of foot-and-mouth disease in the year in review. All of the confirmed outbreaks of New Jersey vesicular stomatitis and 51% of the Indiana virus were identified in that subregion.

The most important outbreak of foot-and-mouth disease occurred on the Colombia-Ecuador border, and caused Colombia to close the border to animal-origin products entering from Ecuador. An occurrence of foot-and-mouth disease was also reported in Sucre, on the Atlantic Coast of Colombia; the emergency system was activated and the outbreak was quickly eradicated.

The relative importance of vesicular stomatitis as the main pathology in the region highlighted the need for the countries, PANAFTOSA and other technical-, scientific- and financial-cooperation agencies to unite their efforts to reduce the prevalence of the disease. Dr. Alvaro Abissambra, General Manager of the Colombian Agricultural and Livestock Institute (ICA), proposed that a seminar be held to discuss the topic; the motion was seconded and approved for inclusion as a Resolution.

Peru recorded no occurrences of foot-and-mouth disease during the year in review. Of the 18 suspicions investigated, 15 were caused by vesicular stomatitis and three were negative. Peru started the process of requesting its recognition as a free country, as Colombia also did, for the Atlantic Coast region.

The delegate from the Venezuelan Autonomous Service of Agriculture and Livestock Health (SASA), Dr. Franz Rivas, emphasized the importance that shared participation has had in the advances observed in the Venezuelan program, such as the increase in vaccine coverage, the setting up of 91 local committees and the institutionalization of 20 emergency tactical units. These advances are periodically evaluated, in accordance with a model developed by PANAFTOSA, and adopted by the country.

Dr. Manuel Heredia, representing the livestock raisers' association of Venezuela (FEDENAGA), stressed the importance of the joint effort, informed about the 30% contribution of funds collected by the association for the FMD program and thanked Dr. Astudillo for his work as consultant to the program.

He finally took up the topic of the anti-stomatitis vaccine and asked that PANAFTOSA undertake a research project to determine that vaccine's impact on control of the disease. The motion was seconded by Dr. Abissambra, who broadened the topic to include other aspects of the epidemiology of vesicular stomatitis, suggesting that a Workshop be organized to identify the lines of research to be undertaken. The proposal was accepted by all those present and made the subject of a Resolution.

Dr. Medardo Lasso, President of CONEFA, Ecuador, said that the changes in the structure of veterinary attention, toward a shared model, had increased the sensitivity of the surveillance system; although official participation had diminished, two thirds of the resources invested in the program are the responsibility of the livestock-producing sector. Also, a drop was noted in the number of outbreaks between 1997 and 1998. There is interest in resuming negotiations with Colombia and Peru for the development of mutual border plans.

Dr. Oscar Dominguez, delegate from the National Agrarian Health Service (SENASA), Peru, discussed the foreign loan from the Inter-American Development Bank (IDB), which covers 60% of the program costs. The country has not had any report of foot-and-mouth disease cases for two years, and steps are being taken to request the OIE's recognition as free with vaccination.

Next the proposal was read for an International Technical Cooperation Agreement between the countries of the Andean Area and PANAFTOSA/PAHO, per the Resolution passed at COSALFA XXV. The present document is the corrected version with the observations made by the countries consulted, and, according to the adopted proposal, should consider the private sector's inclusion from the outset of the Agreement. A separate meeting was proposed among the interested countries to deal with the topic and it was requested that the agreements made be drafted into a Resolution.

The topic: *Ensuring the quality of attention of the veterinary services that include social participation*, presented by Dr. Vicente Astudillo, emphasized the importance of evaluating the degree of health attention of the services in the context of globalization and relaxed trade barriers, in which risk analysis is utilized in place of the concept of zero risk. He explained the differences between the health campaign administration models utilized in the continents and the shared model adopted in many countries of South America, which requires an evaluation to characterize its efficiency. That plays an important role in the qualitative analysis of risk.

The process of qualification of the services began in 1993. The health and phytosanitary measures accepted among the member countries of the World Trade Organization (WTO) includes the possibility that the countries may solicit an evaluation of the veterinary attention system existing in the other country with which negotiations are underway. The OIE created an ad-hoc working group to draft the self-evaluation model to be utilized by the countries.

The delegate from Chile, Dr José Naranjo, said that the Agriculture and Livestock Service (SAG) is undergoing a complex process of modernization of its structure and that the evaluation requests vary from client to client. He asks that the PAHO lead the drafting of a self-evaluation model to be used by the countries of the subcontinent. The proposal was approved and made the subject of a Resolution.

Dr. Steve Surujbally, the delegate from Guyana, requested support from PANAFTOSA and from the other countries in attendance, in favor of the country's objective of being recognized as free without vaccination.

Dr. José Germán Rodríguez Torres, Secretary ex officio of COSALFA, mentioned that PANAFTOSA has been cooperating with Guyana in creating a methodology for reacting to emergencies, in training field personnel, in conducting simulations, and in the seroepidemiological survey of the region bordering Brazil.

Nevertheless, the country should follow the criteria established by the OIE in seeking recognition of its health status, which includes the existence of a veterinary attention system and an epidemiological surveillance system.

Dr. Bill Sterrit, President of the OIE Commission on Foot-and-Mouth Disease and Other Epizootics, said that the international recognition of this situation is only the beginning, insofar as the decisions with respect to the guarantees are to be decided among the countries involved.

Next, the ex officio secretary read the conclusions of the Seminar, thanked Dr Daniel Schettino, temporary consultant of PANAFTOSA, for his work in coordinating the event, and opened discussion on the topics for the next seminar. Among the most popular topics in the evaluation of the Seminar, the one selected was Social Communication as Tool for Strengthening the Sensing Mechanisms of the Epidemiological Surveillance and Information Systems.

The following are some of the major topics discussed:

The Ministry of Agricultural and Livestock Development (MIDA), Panama, through Dr. Franklin Clavel, thanked the organizers for the opportunity of participating as an observer and spoke of Panama's importance in the surveillance of the vesicular diseases for Central America and North America. He spoke about the modernization of the legal basis, the setting up of an emergency fund and the joint efforts with other countries of the subregion in vesicular stomatitis.

Dr. Juan Lubroth, Head of the Exotic Diseases Diagnosis Service of Plum Island, USA, said that the countries of the subregion have asked that institution to continue offering the course on exotic diseases in Spanish, and which was cancelled due to budgetary restrictions. The various comments from the plenary were considered for drafting into a Resolution.

Dr. Primo Arámbulo III spoke of the COHEFA VI, scheduled for 12 April, and RIMSA XI, scheduled for 13-15 April. According to Dr Arámbulo, the fact that the agenda of the second meeting will, for the first time in its history, include topics relating to food protection, reflects the world-wide interest in the subject.

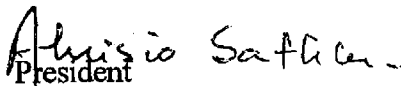
The Chairman remarked that the absence of topics related to the zoonoses might discourage the Ministers of Agriculture from attending RIMSA.


In closing, the Secretary ex officio read the Minutes and the Resolutions that were approved, with slight corrections, and which are attached hereto.



IN WITNESS WHEREOF, the Chairman of the Meeting, Dr. Aluisio Berbert Sathler, Director of the Department of Animal Defense of the Ministry of Agriculture and Food Supplies of Brazil, the Director of the Pan-American Foot-and-Mouth Disease Center (PANAFTOSA), Secretary ex-officio of COSALFA and the Delegates of the official and livestock Sectors of the member countries, have sign the present Final Report in Spanish and English languages, both texts being equally authentic.

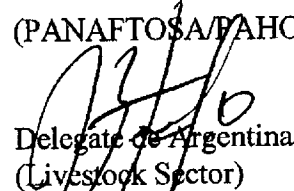
Done in the city of Porto Alegre, Rio Grande do Sul, Brazil, on the 19<sup>th</sup> day of March of nineteen hundred and ninety-nine.

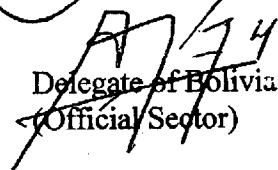
  
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Animal Health - MAA

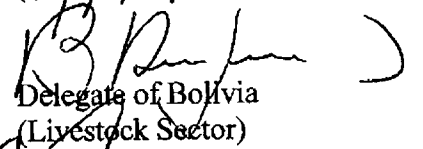
  
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Director of the Pan American  
Foot-and-Mouth Disease Center

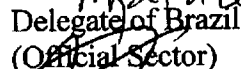
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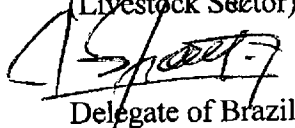
  
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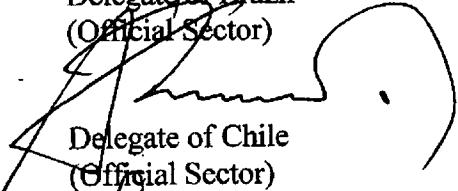
  
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Delegate of Bolivia  
(Official Sector)

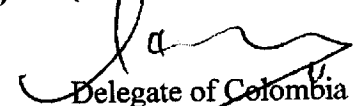
  
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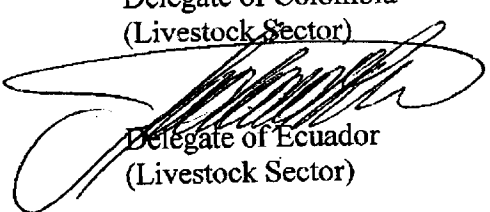
  
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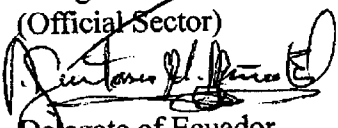
  
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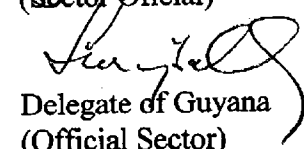
  
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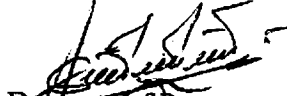
  
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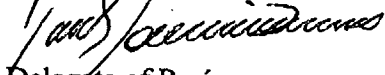
  
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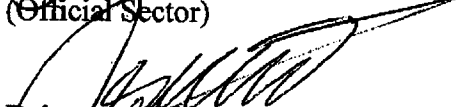
  
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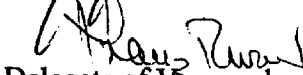
  
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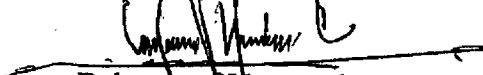
  
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(Official Sector)

  
Delegate of Uruguay  
(Official Sector)

  
Delegate of Venezuela  
(Official Sector)

  
Delegate of Paraguay  
(Livestock Sector)

  
Delegate of Uruguay  
(Livestock Sector)

  
Delegate of Venezuela  
(Livestock Sector)

*RESOLUTIONS*

**RESOLUTION I**  
*River Plate Basin Subregional Project*

THE XXVI REGULAR MEETING OF COSALFA,

Considering:

The excellent sanitary situation attained by the Project for Control and Eradication of Foot-and-Mouth Disease in the River Plate Basin means that practically all of the territory of the Southern Cone is free of the disease;

That the outlook for 1999 foresees a large expansion of the disease-free area without vaccination in the subregion, the scenario thus requires a strengthening of the prevention programs, with a strong commitment from the epidemiological surveillance systems, the analysis of the risks of reintroduction of the agent, the full functioning of the animal health emergency systems and development of social communication and health education plans for free areas, all in a coordinated fashion in the Plate Basin Project, and

That it is of strategic importance for the entire subregion to develop joint actions in the border zones having areas with distinct epidemiological conditions,

**RESOLVES:**

1. To congratulate the countries of the Agreement of International Technical Cooperation for the Control and Eradication of Foot-and-Mouth Disease in the River Plate Basin, for the excellent results achieved.
  
2. To exhort the member countries to continue their support of the development of the Project, in order to consolidate the mechanisms for preventing the reintroduction of foot-and-mouth disease and to promote and intensify joint actions with the participation of all the community actors in the region's border zones.
  
3. To exhort the Government of Bolivia to persevere in its efforts to implement in the short term its National Project of Foot-and-Mouth Disease Control and Eradication.

(Approved at the plenary session  
on 19 March 1999)

**RESOLUTION II***Andean Subregional Project for Foot-and-Mouth Disease Eradication*

## THE XXVI REGULAR MEETING OF COSALFA,

## Considering:

The significant advances in the Andean Subregion, as shown by the absence of clinical cases of foot-and-mouth disease in the subprojects that encompass Peru in all its territorial extension and in the major part of the Atlantic Coast zone of the Republic of Colombia;

The perspective that Peru and Colombia may, in the short term, achieve international recognition as country and zone free of foot-and-mouth disease with vaccination, and

The commitment and responsibility of the countries that compose the Andean Project for Eradication of Foot-and-Mouth Disease, to contribute to the maintenance and expansion of the epidemiological situation reached by Peru and Colombia,

**RESOLVES:**

1. To congratulate both governments for having achieved the absence of clinical cases of foot-and-mouth disease: Peru, throughout its territorial extension; and Colombia, in most of the Atlantic Coastal zone;
2. To encourage the countries in the Andean Union to unite their efforts to foster the maintenance of the health status attained by Peru and Colombia and, through their health services, to persist in their objective of expanding this epidemiological condition in the Subregion.
3. To encourage the countries' animal-health services to execute, within the framework of the Andean project for foot-and-mouth disease eradication, the integrated animal-health plans formulated for the border areas.

(Approved at the plenary session  
on 19 March 1999)

**RESOLUTION III**  
*Amazonian Area and non-Amazonian Brazil*

THE XXVI REGULAR MEETING OF COSALFA,

Considering:

The occurrence of foot-and-mouth disease in the state of Roraima, Brazil, and in the state of Bolívar, Venezuela, where the disease had not been recorded for at least four years, as well as the reappearance of the disease in the state of Mato Grosso do Sul, Brazil;

The need to continue expanding the area free of foot-and-mouth disease within the scope of this project, as established in the Hemispheric Plan for Eradication of Foot-and-Mouth Disease (PHEFA) and in the corresponding national plans;

The need for those countries that already have areas included in this project to take action to increase epidemiological surveillance in the risk areas, and

That Guyana is seeking its recognition from the International Office of Epizootics as a country free of foot-and-mouth disease,

**RESOLVES:**

1. To request that the countries, with support from the Pan-American Foot-and-Mouth Disease Center (PANAFTOSA), develop systems to prevent the viral agent's reintroduction into the region, and to increase their actions in epidemiological surveillance, with the participation of all the social actors in the effort to expand the area free of foot-and-mouth disease.
2. To ask PANAFTOSA to support Guyana in the process of structuring its veterinary attention service and in the development of action required so that Guyana may solicit international recognition as a country free of foot-and-mouth disease.

(Approved at the plenary session  
on 19 march 1999)

**RESOLUTION IV**  
*Continental Epidemiological Surveillance and Information System*

THE XXVI REGULAR MEETING OF COSALFA,

Considering:

The great progress observed in the national programs of foot-and-mouth disease eradication in South America, as characterized by the consolidation and expansion of the disease-free spaces, and

That the modifications in the continental information system presented by the Pan-American Foot-and-Mouth Disease Center (PANAFTOSA), meet this new epidemiological scenario,

**RESOLVES:**

1. To request that PANAFTOSA take the measures required to incorporate the modifications into the system as quickly as possible.
2. To ask PANAFTOSA to organize and conduct Seminars and Workshops in order to support the countries in implementing the system's modifications.

(Approved at the plenary session  
on 19 March 1999)

**RESOLUTION V**  
*Andean Area Agreement*

THE XXVI REGULAR MEETING OF COSALFA,

Considering:

The Andean countries' political willingness to consolidate the actions they have been taking to eradicate foot-and-mouth disease in the subregion;

That zonal subprojects exist within the framework of the Hemispheric Plan for the Eradication of Foot-and-Mouth Disease (PHEFA), able to support the coordination of activities in the countries' border areas, and

The need to increase horizontal technical cooperation among countries and the homogenization of technical norms and procedures,

**RESOLVES:**

To encourage the countries to review —within the scope of the agricultural and livestock health services— the proposal for an agreement prepared by the Pan-American Foot-and-Mouth Disease Center (PANAFTOSA) and to forward their comments no later than 30 days from the date hereof, to the Secretary of COSALFA, for the final document to be drawn up and submitted to the proper legal levels.

(Approved at the plenary session  
on 19 March 1999)

**RESOLUTION VI**  
*International Seminar*

THE XXVI REGULAR MEETING OF COSALFA,

Considering:

The results of the International Seminar on Aspects of Surveillance Applied to Health Management in Areas having Different Statuses of Foot-and-Mouth Disease, with and without Vaccination, which evidenced the need to consolidate epidemiological surveillance and information systems adapted to the new health situations, and

The demand for training and upgrading human resources in the new methodologies of work, and the necessity of establishing health-education programs that enable the sensing capability of the epidemiological surveillance and information systems to be increased,

**RESOLVES:**

To organize an International Seminar on Social Communication as a Tool for Strengthening the Sensing Mechanisms of the Epidemiological Surveillance and Information Systems, which will be held prior to the COSALFA XXVII.

(Approved at the plenary session  
on 19 March 1999)



**RESOLUTION VII**  
*Seminar on Vesicular Stomatitis*

THE XXVI REGULAR MEETING OF COSALFA,

Considering:

The results of the evaluation of the situation of foot-and-mouth disease in South America, in 1998;

The frequency of vesicular stomatitis recorded in the area of the Andean subregion in recent years and its recent occurrence in the southern cone subregion, and

That there are some uncertainties about the pathogeny, epidemiological behavior and development of immunity with regard to vesicular stomatitis,

**RESOLVES:**

1. To request that the Pan-American Foot-and-Mouth Disease Center (PANAFTOSA) schedule and execute a Seminar dealing with the identification of lines of action and research that will address the characterization of epidemiological behavior in the affected areas, including the study of vectors and the role and utility of vaccine in the control programs.
2. To accept the Colombian Delegation's kind offer to assume the organization of the aforesaid seminar.

(Approved at the plenary session  
on 19 March 1999)

**RESOLUTION VIII**  
*Assurance of Quality of Veterinary Services*

THE XXVI REGULAR MEETING OF COSALFA,

Considering:

That there is an increasingly more evident need to impart credibility and trust to the evaluations of health risk in the context of foreign trade in animals and products of animal origin;

That it is necessary to ensure, and internationally validate, the competence and reliability of the countries' veterinary services with respect to their sanitary inspections and certifications, and

That the OIE has been cooperating with the member countries by providing methodological input that enables them to adapt to the new health requirements and procedures that the free-trade strategy implies,

**RESOLVES:**

1. To request that the Pan-American Health Organization (PAHO) promote, among other international agencies and entities, the utilization and application of the quality assurance methodology to sanitary inspections and certifications.
2. That, in order to facilitate those activities, the PAHO, with the support of other international agencies and entities, cooperate with the countries by preparing manuals on quality control and operating procedures applied to the delivery of health services, including pertinent personnel training.

(Approved at the plenary session  
on 19 March 1999)

**RESOLUTION IX**  
*Course on Exotic Diseases*

**THE XXVI REGULAR MEETING OF COSALFA,**

Considering the offer made by the United States Department of Agriculture/Animal and Plant Health Inspection Service(USDA/APHIS), via the Plum Island Exotic Diseases Diagnostic Laboratory, to offer the exotic diseases course in Spanish,

**RESOLVES:**

1. To thank the USDA/APHIS for offering this type of training.
2. That the countries interested should seek funding for the participation of their representatives.
3. To request that the Pan-American Foot-and-Mnouth Disease Center (PANAFTOSA) coordinate the preparation and conducting of the course with the USDA-APHIS-Plum Island.

(Approved at the plenary session  
on 19 March 1999)

**RESOLUTION X**  
*Designation of the site of COSALFA XXVII*

THE XXVI REGULAR MEETING OF COSALFA,

Considering the offer made by Dr. Alberto Pecker, on behalf of the Government of the Republic of Argentina, to host the next Regular Meeting of COSALFA,

**RESOLVES:**

To designate the city of Buenos Aires, Argentina, as the site of the XXVII Regular Meeting of COSALFA.

(Approved at the plenary session  
on 19 March 1999)

**RESOLUTION XI**  
*Expression of Gratitude*

THE XXVI REGULAR MEETING OF COSALFA,

Considering the excellent conditions provided by the Federation of Agriculture of the State of Rio Grande do Sul (FARSUL) and the National Agriculture Confederation (CNA), in the holding of the XXVI<sup>th</sup> COSALFA and the support received by the Commission that organized it,

**RESOLVES:**

To express its gratitude to FARSUL and CNA, on behalf of Dr. Carlos Rivaci Sperotto and the Organizing Commission of the event, for their effort and dedication in achieving total success.

(Approved at the plenary session  
on 19 March 1999)

***S E M I N A R***

**INTERNATIONAL SEMINAR ON ASPECTS OF  
SURVEILLANCE APPLIED TO ANIMAL HEALTH MANAGEMENT IN AREAS  
HAVING DIFFERENT STATUS OF FOOT-AND-MOUTH DISEASE  
WITH AND WITHOUT VACCINATION**

Porto Alegre, Rio Grande do Sul, Brazil, 15-17 March 1999

The Seminar was attended by 129 professional personnel from the official and private sectors of 14 countries. The topics were divided into four major areas, each of which was moderated by one of the participants who also acted as orienter of the discussions in the working groups:

**Health emergency systems**

Moderator: *Dr. Bob Bokma, USDA/APHIS*

**Primary prevention and risk analysis**

Moderator: *Dr. Mirian Luz Gallego, ICA/Colombia*

**Regionalization in the prevention of foot-and-mouth disease introduction**

Moderator: *Dr. Oscar Dominguez, SENASA/Peru*

**Infrastructure of the veterinary attention services**

Moderator: *Dr. Jamil de Souza, DDA/MAA, Brazil*

The 15 lectures given covered the experiences that are being put into practice by the countries in the process of preparing for the changed condition in their respective epidemiological situation with regard to foot-and-mouth disease. In order to ensure broad participation, the participants were divided into four discussion groups to discuss the topics presented. The following conclusions were gathered from the discussion groups:

- Epidemiological surveillance is an undelegatable role of the State as conductor of the referred process.
- The epidemiological surveillance and information system should contemplate the participation of the private and public sectors, in the utilization of both physical and human resources.
- An interactive data base should be established to analyze and activate in epidemiological surveillance, and maintained on a continuous basis, to enable the animals' origin and final destination to be tracked.

- That each country and/or region should determine the utilization of strategies in the surveillance and information system, according to the interests of the actors involved, using a combination of the proposed methodologies.
- The creation of local epidemiological surveillance units based on principles of social and professional participation of the technical personnel involved.
- The governments should conceive legislation through the sanitary services that contemplate and support the surveillance and information system.
- The data generated by animal movement should be considered and analyzed as input for the epidemiological surveillance and information system.
- It will be necessary to establish in the countries on-going programs to train the professional personnel involved in epidemiological surveillance.
- The universities should train the future graduates in these topics.
- The level of transparency of the different countries is variable with respect to the international information about their sanitary situation, and some do not even know their real situation.
- Basic information should be available to measure the level of credibility and reliability of the veterinary services of the exporting country .

Based on these conclusions, the groups decided to request that PANAFTOSA/PAHO:

1. Update the technical manuals related to the emergency health systems to adapt them to the scenarios of the member countries.
2. Make available a data base that shows the member countries' existing plans.
3. Materialize the collation of multinational teams, to render attention in emergency situations in border areas.
4. Study and develop geographic information systems (SIG) to be rendered regionally compatible by means of a program with standards set by international agencies.
5. Consider that studies may be developed in the countries to determine distinct levels of risk in accordance with norms set by the International Office of Epizootics (OIE), to facilitate the commercialization of products and subproducts.
6. Promote the passing of laws that enable para-fiscal funding to be obtained to enable the private sector to develop and finance activities related to animal health.
7. Offer SIVESA so that the countries may adopt it as a working tool.

PANAFTOSA will issue a technical document about the Seminar with all the talks given.

## APPENDICES

**SOUTH AMERICAN COMMISSION FOR THE FIGHT AGAINST FOOT-AND-MOUTH DISEASE  
XXVI REGULAR MEETING**

Porto Alegre, Rio Grande do Sul, Brazil. 15-17 March 1999

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**SOUTH AMERICAN COMMISSION FOR THE FIGHT AGAINST FOOT-AND-MOUTH DISEASE  
XXVI REGULAR MEETING**

Porto Alegre, Rio Grande do Sul, Brazil, 18-19 March 1999

**AGENDA**

***Thursday, 18 March***

- |       |  |
|-------|--|
| 09:00 | Opening of the Meeting   |
| 09:30 | Report of the Secretary  |
| 10:30 | Discussion of the Report   |
| 11:00 | Coffee break   |
| 11:15 | Continental Vesicular Disease Surveillance and Information System  |
| 12:00 | Discussion   |
| 12:30 | Lunch  |
| 14:00 | Situation of the countries: subregional projects <ul style="list-style-type: none"> <li>• River Plate Basin</li> <li>• Andean Area</li> <li>• Amazonian Area and Brazil</li> </ul> |
| 16:30 | Discussion   |
| 17:00 | Coffee break   |
| 17:30 | Proposal of agreement for Andean Area  |

***Friday, 19 March***

- |       |  |
|-------|--|
| 09:00 | Ensuring quality of attention of veterinary services having social participation |
| 10:00 | Discussion   |
| 10:30 | Coffee break   |
| 11:00 | Proposal for funding of the PCP  |
| 11:30 | Various matters  |
| 12:00 | Lunch  |
| 14:00 | Presentation and discussion of the Resolutions                                   |
| 16:00 | Closing  |

**INTERNATIONAL SEMINAR ON ASPECTS OF  
SURVEILLANCE APPLIED TO ANIMAL HEALTH MANAGEMENT IN AREAS  
HAVING DIFFERENT STATUS OF FOOT-AND-MOUTH DISEASE  
WITH AND WITHOUT VACCINATION**

Porto Alegre, Rio Grande do Sul, Brazil, 15-17 March 1999

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**INTERNATIONAL SEMINAR ON ASPECTS OF  
SURVEILLANCE APPLIED TO ANIMAL HEALTH MANAGEMENT IN AREAS  
HAVING DIFFERENT STATUS OF FOOT-AND-MOUTH DISEASE  
WITH AND WITHOUT VACCINATION**

Porto Alegre, Rio Grande do Sul, Brazil. 15-17 March 1999

**AGENDA**

**Monday, 15 March**

- 08:00 Registration  
09:30 Opening of the Seminar

**Health emergency systems**

- 10:00 Emergency actions in Porto Murtinho and Navirai, MS, Brazil  
*Speaker:* Dr. Jamil Gomes de Souza, DDA/MAA  
10:30 Coffee Break  
11:00 System of attention to emergency in Colombia  
*Speaker:* Dr. Luis Fernando Morales, ICA  
11:30 Livestock emergency system in Chile: basis, structure and functioning  
*Speaker:* Dr. José Naranjo, SAG  
12:30 Lunch (at leisure)

**Primary prevention and risk analysis**

- 14:00 Surveillance action in the area of the 3-country Agreement  
Bolivia-Chile-Peru/PAHO-WHO  
*Speaker:* Dr. Hugo Yavar, SAG  
14:30 Phyto-animal health safety zones in Panama  
*Speaker:* Dr. César Maure, MIDA  
15:00 Absence of foot-and-mouth disease endemism: new role for the national and  
regional laboratories  
*Speaker:* Dr. Juan Lubroth, FADDL-APHIS/USDA  
16:00 Concepts of traceability: aspects of implementation  
*Speaker:* Dr. Jorge Dillon, COREPRO  
16:30 Coffee Break

**Regionalization in the prevention of the introduction of foot-and-mouth disease**

- 17:00 Maintaining and utilizing data bases in the prevention of foot-and-mouth  
disease and other diseases. The SIVESA case  
*Speaker:* A. Mendes, PANAFTOSA  
17:30 Epidemiological surveillance systems in absence of foot-and-mouth disease  
vaccination, an organizational proposal  
*Speaker:* H. Sanz, UNCPBA  
18:00 Regionalization and risk analysis for the importation of animals and Animal products  
*Speaker:* Dr. Bob Bokma, APHIS/USDA  
21:00 Welcome Dinner

**Tuesday, 16 March****Infrastructure of the veterinary attention services**

- 08:30 The local infrastructure of the veterinary attention services  
Experience in Tandil, Argentina  
*Speaker:* Dr. Julio Bidonde, FUNTALA
- 09:00 Experience toward the development of the local veterinary attention systems  
in the Salado Basin, Argentina  
*Speaker:* Dr. Jorge Dillon, COREPRO
- 09:30 The epidemiological surveillance network in Bolivia  
*Speaker:* Dr. Jonathan Rushton, UNIVEP
- 10:00 Coffee Break
- 10:30 Local committees in Colombia  
*Speaker:* Dr. Jaime Giraldo, FEDEGAN
- 11:00 Training of animal health agents in Mato Grosso do Sul, Brazil  
*Speaker:* Dr. Alfredo Vera Escalante, SENAR
- 12:00 Lunch at leisure
- 14:00 Working groups commence sessions
- 16:30 Coffee break
- 18:30 End of first day of meetings of working groups

**Wednesday, 17 March**

- 09:00 Continuation: working groups
- 10:30 Coffee break
- 12:30 Submittal of conclusions and collecting of surveys
- 13:00 Lunch at leisure
- 16:00 Closing ceremony

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***DOCUMENTS DISTRIBUTED***

- ASTUDILLO, V. Aseguramiento de la calidad de la atención sanitaria en servicios veterinarios que cuentan con participación social. Rio de Janeiro, PANAFTOSA, 1999.
- CENTRO PANAMERICANO DE FIEBRE AFTOSA. COSALFA. Resumen histórico (1973-1998). Rio de Janeiro, PANAFTOSA, 1998.
- CENTRO PANAMERICANO DE FIEBRE AFTOSA. Enfoques de cooperación técnica de los laboratorios de PANAFTOSA. Rio de Janeiro, RJ, PANAFTOSA, 1999.
- CENTRO PANAMERICANO DE FIEBRE AFTOSA. Informe Final de la XXV Reunión Ordinaria de la Comisión Sudamericana para la Lucha contra la Fiebre Aftosa, Campo Grande, Mato Grosso do Sul, Brasil, 26-27 marzo 1998.
- CENTRO PANAMERICANO DE FIEBRE AFTOSA. Situación de los Programas de Control de la Fiebre Aftosa. América del Sur, 1997. Rio de Janeiro, PANAFTOSA, 1998.
- CENTRO PANAMERICANO DE FIEBRE AFTOSA. Situación de los Programas de Control de la Fiebre Aftosa. América del Sur, 1998. Rio de Janeiro, PANAFTOSA, 1999.
- SILVA, A.J.M. Sistema Continental de Información y Vigilancia Epidemiológica: propuesta de modificaciones . Rio de Janeiro, PANAFTOSA, 1999.

## APPENDIX VI

**INTERNATIONAL SEMINAR HELD PREVIOUS TO  
REGULAR MEETINGS OF COSALFA**

1. **1977** Evaluación de programas de lucha contra la fiebre aftosa
2. **1978** Administración de programas de combate de la fiebre aftosa y salud animal
3. **1979** Estrategias regionales para el combate de la fiebre aftosa
4. **1980** Comunicación y educación en programas de salud animal
5. **1981** Programas de inmunización contra la fiebre aftosa en América del Sur
6. **1982** Creación de áreas libres de fiebre aftosa en América del Sur
7. **1983** Sistemas de información y vigilancia epidemiológica de las enfermedades vesicular
8. **1984** Evaluación del uso de la vacuna con adyuvante oleoso en los programas de la lucha contra la fiebre aftosa
9. **1985** Planificación, ejecución y evaluación de acciones regionales de erradicación de la fiebre aftosa
10. **1986** Aspectos económicos y financieros de los programas de control y erradicación de la fiebre aftosa en América del Sur
11. **1987** Análisis administrativo-institucional de los programas de salud animal en América del Sur
12. **1988** Biotecnología en fiebre aftosa y salud animal
13. **1989** Áreas endémicas primarias: identificación, clasificación y tratamiento
14. **1990** Formas de integración de los sectores sociales involucrados en los programas de control y erradicación de la fiebre aftosa
15. **1991** Sistemas de vigilancia epidemiológica con especial referencia en la prevención de enfermedades exóticas
16. **1992** Planes locales y zonales con movilización de recursos y participación comunitaria para la erradicación de la fiebre aftosa
17. **1993** Erradicación de la fiebre aftosa, sus fundamentos técnico-administrativos y sus consecuencias en el comercio de los animales, productos y subproductos de origen animal
18. **1994** Los sistemas de atención de la salud animal ante los cambios en el papel del estado y de la comunidad
19. **1995** Sistemas de información y vigilancia epidemiológica, bajo la óptica de la erradicación y los nuevos modelos de atención veterinaria)
20. **1996** Análisis de riesgo en relación al comercio internacional de animales y productos de origen animal
21. **1997** Control sanitario total la cadena de producción agropecuaria
22. **1998** Acciones de prevención para evitar la introducción de la fiebre aftosa y otras enfermedades exóticas

Edited by the  
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