

**JOINT MEETING ANIMAL DISEASE SURVEILLANCE AND PREPAREDNESS  
FOCUS ON AVIAN INFLUENZA (AI) IN THE CARIBBEAN**

**AVIAN INFLUENZA WORKING GROUPS**

**GROUP 1: SURVEILLANCE AND DIAGNOSTIC**

**RECOMMENDATIONS**

**Methodology:**

Passive surveillance: Mechanism to be established at national level to implement passive surveillance and to submit weekly and monthly report. Report to be submitted through focal point which may be CVO.

Active surveillance: It is targeted, risk dependent, systematic. Two types: sentinel and routine; cross-section (initial/first stages or to establish disease free status.

Target species: commercial, backyard, feral, migratory, caged, captive, game bird (fighting cocks), messenger pigeons

**Monitoring and surveillance**

1. CaribVET to circulate surveillance protocols
2. Simulation of effectiveness of entire cycle of sample collection, transport and diagnostic testing.
3. Development of common performance indicators to evaluate surveillance system and disease status:
4. Implementation: countries to establish necessary legislation and institutional infrastructure.
5. Guarantee of provisions of field kit, protective gear

**Risk Assessment**

1. that every country should have competence to conduct qualitative Risk analysis.
2. that each country share their completed qualitative risk analysis with network. There are many examples in USA that can download. For WNV one has been done for Guadeloupe.
3. Collaboration with international organisations
4. Regional focus group to be identified and trained, if necessary, as emergency response team.

**Diagnosis:**

1. Clinical diagnostic skills to be developed: flock diagnosis, bird.
2. Laboratory tests recommend:
  - a. Serological: ELISA, AGID, HI
  - b. Virological: Virus isolation
  - c. Molecular: RT-PCR and real time PCR. Sequencing and genetic typification.

**Laboratory Recommendations**

1. Update information of countries' laboratory capabilities and biosafety conditions.
2. Harmonised protocols (SSOPS, sample collection and submission)
3. Proficiency testing and quality assurance
4. Identification of experts in Caribbean (by summer 2006).
5. Mechanism for collaboration: identification of laboratories and procedures. Identify which countries can send what samples. Legislation to receive samples, packaging, sample numbers,
6. Cost sharing initiative between collaborating countries.
7. Mobilization of regional experts to affected country.
8. Simulation exercises to determine gaps.

**Training: Regional training to be conducted**

1. Clinical and pathological diagnosis
2. Laboratory diagnostic techniques
3. Qualitative risk analysis
4. Epidemiology