Cooperating in Veterinary Public Health

To chart the course of technical cooperation in veterinary public health—of vital importance to the Region because of its enormous social and economic consequences—the Organization brings together representatives at the highest political level to address matters of common concern to the countries' health and agriculture sectors. paho has been convening these inter-ministerial meetings, now known as RIMSA for their Spanish acronym, since 1968. In the beginning, the meetings dealt primarily with animal health; today they convene Ministers of Agriculture and Health to discuss much broader issues of common concern.

In 2001, Brazil hosted RIMSA, and the President of Brazil, the Honorable Fernando Henrique Cardoso, addressed the representatives, stressing the importance of cooperation among the countries of the Americas, trade as an instrument of peace, and hemispheric solidarity.

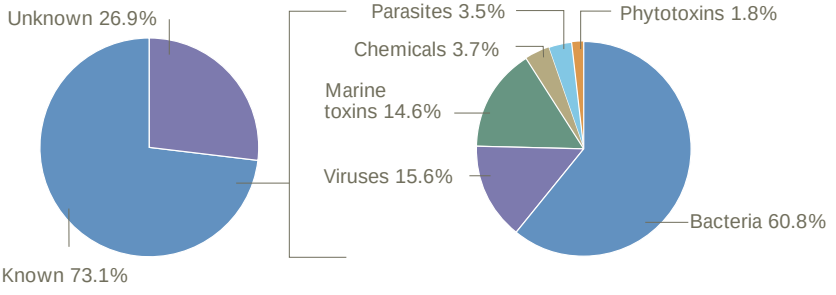
Protecting Food, Safeguarding the Public's Health

Food-borne diseases constitute a major public health problem and lead to decreased economic productivity as a result of diarrhea, cholera, salmonellosis, listeriosis, infections from enterohemorrhagic *Escherichia coli*, and chronic poisoning caused by chemical contaminants. In addition to the suffering they cause, food-borne diseases impose a substantial economic toll on those affected and their families, as well as on industry—especially tourism and trade, and health care systems.

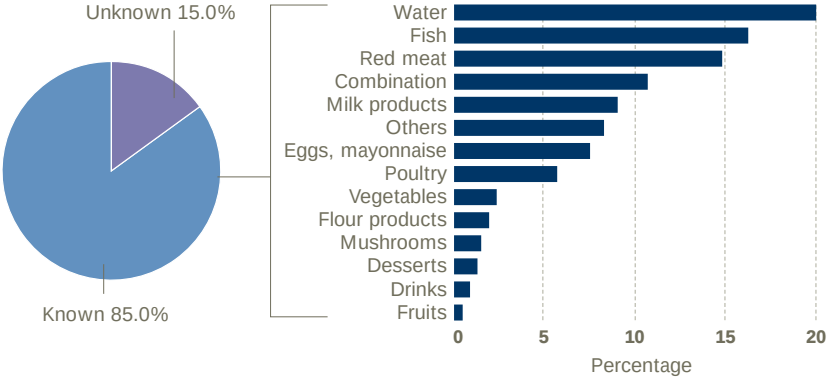
One of the principal components of paho's veterinary public health program is food safety. The aim of work in this area is twofold: to reduce the risks to humans of food-borne diseases and to facilitate world food trade. In 2000, the Organization's Directing Council approved a strategic plan for food protection and assigned responsibility for overseeing its regional implementation to paho and its Institute for Food Protection (inppaz). The following year, rimsa set up the Pan American Commission for Food Safety to advocate establishment of national food safety programs and promote intercountry and intersectoral collaboration across the entire food production chain.

To facilitate the exchange of information about food-borne outbreaks, INPPAZ coordinates a regional information system for food-borne disease surveillance, SIRVETA, in which 21 countries actively take part. It provides information about food-borne outbreaks—what causes them, the foods implicated, and where those foods are consumed.

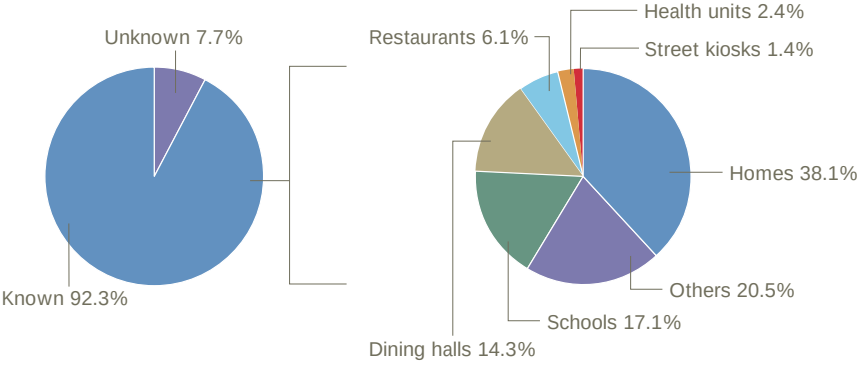
Causes of 2,575 outbreaks of food-borne diseases in the Americas, 1998-2001



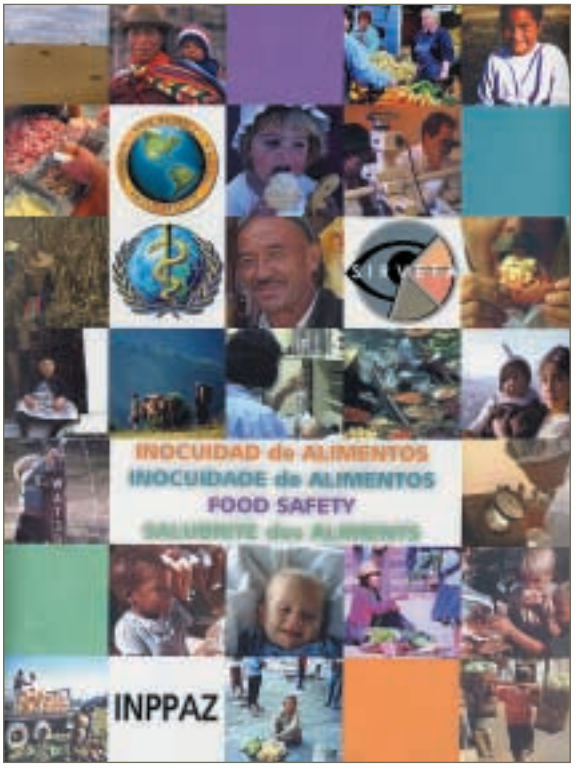
Foods implicated in 2,575 outbreaks of food-borne diseases in the Americas, 1998-2001



Places where food implicated in 2,575 food-borne outbreaks was consumed in the Americas, 1998-2001



The effectiveness of SIRVETA has been widely recognized as a unique tool for developing food-borne disease prevention and control programs. With the expectation that it be replicated in other regions, WHO invited INPPAZ staff to make a presentation on SIRVETA, as part of a consultation to develop a strategy for global surveillance and risk analysis of food-borne diseases. CDC and INPPAZ have recently launched a hemisphere-wide epidemiological network to improve surveillance of food-borne diseases throughout the Americas.



inppaz served as the prime mover in establishing an inter-American network of food analysis laboratories—in which 55 laboratories in 25 countries currently participate—to promote food safety, prevent food-borne diseases, protect consumers' health, and facilitate trade. The network pursues those aims by serving as a forum for the exchange of information on common methodologies, quality-assurance systems, and technical and scientific cooperation among countries.

A regional system of information on food legislation, created by inppaz, promotes the updating and standardization of national legislation, in accordance with international standards, as a means of improving countries' competitiveness in international markets. Currently, 10 countries participate in the system. In agreement with the National Agency of Sanitary Surveillance of the Ministry of Health of Brazil, a food legislation project is under development in that country. Project activities include training in modern inspection systems. inppaz has already trained some 210 public service workers in quality management methodology. The goal is to strengthen sanitary surveillance of foods through more compatible food safety programs throughout the Americas by implementing equivalence, transparency, and standardization of food regulation and legislation.

As part of the organization of national food safety programs, inppaz promotes activities related to the Codex Alimentarius—a collection of uniformly presented food standards that have been adopted internationally. Its purpose is to improve the quality of foods for national consumption, facilitate international commerce, and guarantee equitable trade practices. inppaz and the Coordinating Committee of the Codex Alimentarius for Latin America have developed an Internet chat room to enable broad-based discussion of food protection issues.

To assist countries' efforts to update food inspection and control systems and adopt modern, universally accepted inspection methods, inppaz conducts training programs for application of the hazard analysis critical control points methodology, good manufacturing practices, and standard sanitary operation procedures.

Eradicating Foot-and-Mouth Disease

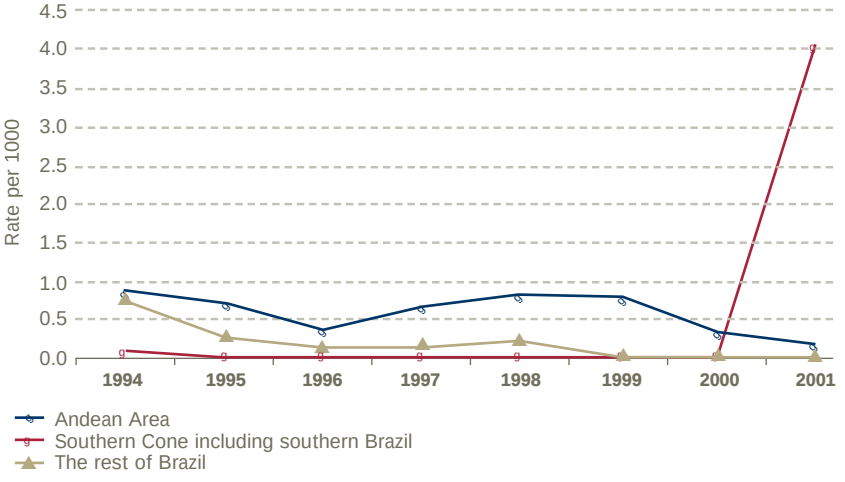
The countries and the Pan American Center for Foot-and-Mouth Disease (panaftosa) have joined forces to eradicate that disease throughout the hemisphere. Up until mid-2000, the disease-free zone included the Southern Cone subregion—Argentina, Chile, Paraguay, Uruguay, and the states comprising the cattle-producing zones of southern, central-western, and eastern Brazil—covering approximately 6.2 million square kilometers and some 140 million cattle. Argentina, Chile, and Uruguay had achieved international recognition for being foot-and-mouth disease free without vaccination, and Paraguay and Brazil as free with vaccination. This situation represented an important economic benefit for the Southern Cone countries, which eliminated losses occasioned by the disease, saved the cost of vaccination and treatment, initiated exports of meat to North America, and expanded trade with Europe and the Orient.

This situation deteriorated, however, in the second semester of 2000 with the appearance of outbreaks in Brazil and Uruguay—outbreaks that were rapidly eradicated. Unfortunately, a serious epidemic appeared in Argentina in February of the following year and spread throughout the country (except Patagonia) to Uruguay and southern Brazil. Export losses in Argentina and Uruguay are estimated at US$400 million and US$300 million, respectively. Chile, Paraguay, and the rest of Brazil remained free of the disease.

PANAFTOSA
CENTRO PANAMERICANO DE FIEBRE AFTOSA

The Pan American Center, PANAFTOSA, is responsible for helping the countries of the Americas eradicate foot-and-mouth disease and prevent and control zoonoses.

Herds affected with foot-and-mouth disease in South America



Until mid-2000 foot-and-mouth disease was either eradicated or on the decline in Latin America and the Caribbean

Today, with PANAFTOSA's cooperation and experience acquired over many years, the affected countries are advancing rapidly towards eradication. At those countries' request, PANAFTOSA is providing close, ongoing supervision of national programs. Brazil has made important progress, where—as a result of the Amazon Basin Project—16 of the federal units are now recognized as disease free, as is Guyana. In the Andean area, Colombia obtained international recognition as being free of foot-and-mouth disease with vaccination in a zone that includes the Atlantic Coast Project, with an estimated 7 million cattle. Peru, too, has made good progress in its eradication program. And PANAFTOSA is working with the Andean Pact to enable programs to achieve eradication of foot-and-mouth disease throughout South America by 2009. Countries in Central America, North America, and the Caribbean have maintained their disease-free status.

Preventing and Controlling Zoonoses

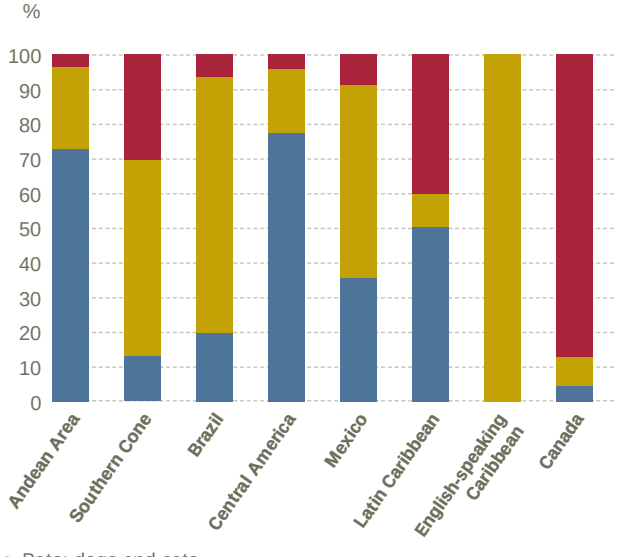
■ **As part of a weekly supplement, "Vida," appearing in the newspaper *La República*, the PAHO/WHO Office in Peru produced cartoons promoting health including this one, part of a series intended to educate the community about preventing rabies.**

Following the recommendation of an external advisory group in 1996, panaftosa assumed responsibility for the Organization's technical cooperation in the area of zoonoses, while inppaz directed its efforts exclusively to food safety.

In relation to **RABIES**, panaftosa targeted strengthening national programs, coordinating a regional epidemiological surveillance system, assuring medical attention for exposed individuals, supervising the use of biologicals of recognized quality and safety, promoting the creation of diagnostic laboratory networks coordinated by who/paho Collaborating Centers, and carrying out massive vaccination campaigns. The frequency of cases of human rabies transmitted by dogs continues to trend downward. From an annual average of 293 cases in the decade from 1980 to 1989, the annual average for the decade from 1990 to 1999 dropped to 168 cases; 64 and 42 cases were recorded in 2000 and 2001, respectively—roughly half of which represented rabies transmission by dogs. Human rabies of canine origin has virtually disappeared in the major cities of Latin America.

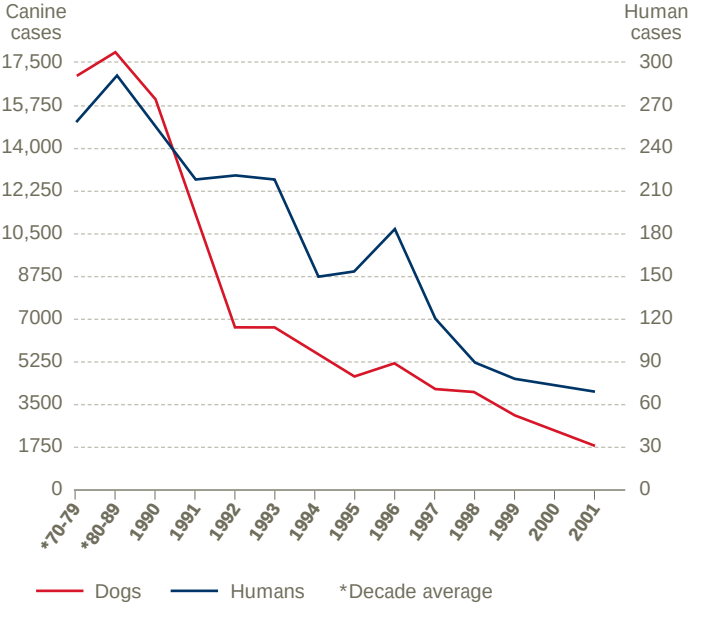
The same downward trend is observed in canine rabies. The annual average of 17,600 cases in the decade 1980-1989 dropped to 6,600 in 1990-1999; 2,086 and 801 cases were registered in 2000 and 2001, respectively. This reduction has had a direct impact on the occurrence of human rabies. Among the countries that have remained free of human rabies transmitted by dogs are Argentina, Canada, Chile, Costa Rica, Panama, the United States, Uruguay, the English-speaking Caribbean countries, and the Brazilian states of São Paulo, Rio de Janeiro, and the Federal District. As has occurred in other parts of the

Proportional distribution of rabies cases in animals in the Americas, 2001



- Pets: dogs and cats
- Farm animals: cows, sheep, goats, etc.
- Wild animals: bats, skunks, opossums, etc.

Canine and human rabies are on the decline in the Americas



world, with the decline in cases of canine-transmitted rabies in the Americas, rabies transmitted by wild animals has become a more serious problem. Of all human cases registered in 2001 for which the source of infection could be identified, 8.8% were transmitted by bats. Of all cases of rabies in other animal species during 2001, the proportion corresponding to wild animals was 87.8% in Canada; the United States has had similar figures in previous years; 8.3% in Mexico; 40% in the Spanish- and French-speaking Caribbean; 3% in Central America; 2.6% in the Andean Area; 5.4% in Brazil; and 29.6% in the Southern Cone.

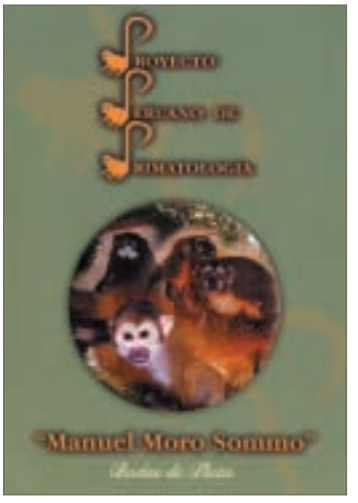
BRUCELLOSIS AND BOVINE TUBERCULOSIS continue to be serious economic and public health problems. panaftosa conducted a situation analysis of programs to combat these diseases in 24 countries. That analysis showed that Canada and the United States are almost free of these diseases; the English-speaking Caribbean and Cuba have very low disease levels; Central and South America continue to be endemic; and control and eradication programs are being strengthened in Mexico and the Southern Cone countries. Brucellosis caused by *Brucella melitensis* continues to be a serious public health problem in Mexico, Peru, and the area bordering Argentina, Bolivia, and Paraguay, but control programs based on mass vaccination of sheep and goats are being developed. All the countries are committed to eradicating these diseases, encouraged by their success in eradicating foot-and-mouth disease.

panaftosa coordinates an **EQUINE ENCEPHALITIS** information and surveillance system that comprises Brazil, Colombia, Ecuador, Honduras, Mexico, Panama, and Venezuela—the countries that, with the exception of Brazil, pose the greatest risk of Venezuelan equine encephalitis outbreaks, which seasonally trigger epidemics. Complementing the surveillance system is laboratory diagnosis to characterize the antigen of the strains involved. This information is then used to advance campaigns for mass vaccination of equines, which helps reduce the risk of human cases.

Sporadic cases of **PLAGUE**, in areas that had cases in the past, were reported in Bolivia, Brazil, Ecuador, Peru, and the United States. No outbreaks of plague occurred, however, during the past several years in Peru or Ecuador, which had had large outbreaks in 1992 and 1997, respectively. Efforts to break the cycle of transmission between rodents and humans, by controlling infestation of rats in silos where corn and other foods are stored and developing a surveillance system with laboratory back-up, appear to have been successful.

In the wake of Hurricane Mitch, Central America and the Caribbean experienced an increase in cases of **LEPTOSPIROSIS**. To strengthen epidemiological surveillance of the disease, panaftosa cooperated with the affected countries by improving their laboratories' diagnostic capacity.

The Americas continues to be free of cases of **BOVINE SPONGIFORM ENCEPHALOPATHY**. To bolster prevention and epidemiological surveillance plans, paho organized a consultation of experts from Europe and the Americas, in which directors of national veterinary services partook, that issued recommendations to avoid introduction of the disease.



■ **The Peruvian Primatology Project celebrated a quarter-century of protecting neoprimate species at risk of extinction by means of controlled harvesting and reproduction in captivity. As part of this scheme, the Project was able to supply samples for development of vaccines such as hepatitis A and B, as well as carry out basic research into malaria, physiology and human nutrition. An estimated 250 specimens of neotropical primates of biomedical interest are transferred yearly to scientific institutions.**