





The fundamental conundrum

- Management of all diseases, whether plant or animal, is only possible if their characteristic behaviour (epidemiology) is understood
- The behavioural characteristics of SAT & Eurasian type FMD differ significantly see w/s folder
- Other important differences that influence the control of the two forms of FMD also identified

 we have provided evidence that unlike Eurasian FMD, SAT viruses in southern Africa are not eradicable (published)
- · 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 a problem, i.e. trying to
 fit square pegs into round holes!
- Because nowhere else in the world has this problem, we will have to come up with the solution
- Unsurprisingly, management of SAT-type FMD is not proving effective in the SADC Region currently, especially since the advent of 21st Century
- So, clearly, things need to change (ideas on this tomorrow)
- · But first we need to understand the details & implications of the differences between these two viral lineages

Major differences between the two lineages of FMD virus

Factor	SAT-type FMD viruses	Eurasian-type FMD viruses
Relationship with wildlife	Evolved in and maintained naturally by African buffalo populations	Evolved in livestock; not maintained by any wildlife population
Rate of transmission	Commonly slow and inefficient in endemic areas of southern Africa	Commonly rapid and efficient
Severity of disease	Generally a mild or unapparent disease in both wildlife and livestock	Generally a serious disease in cattle & pigs
Vaccine efficacy	 Compromised by exceptional antigenic diversity Lack of clear subtypes → difficulty in matching vaccine and field viruses 	 Less antigenic diversity Favoured by existence of clear subtypes → effective 'matching' of field and vaccine viruses



accompan Diseased animal Summary of FMD 'dise	d or no disease at all			
FMD viral lineage	No of events	Apparent morbidity rate >10%	Average apparent morbidity rate (%)	
urasian (World-wide)	51	30 (58.8%)	35.4	
AT (Southern Africa)	43	3 (7%)	3.3	SAA



Conclusion

- SAT- & Eurasian-type FMD constitute two different forms of the disease; they differ not only in their evolution but also in the way they behave in the field
- Despite the struggle against SAT-type FMD in southern Africa since it was first recognised in 1931, the local realities are still not appreciated and/or understood
- 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?
- Ideas on that tomorrow