

Japan's comments on the Report of the meeting of the OIE Aquatic Animal Health Standards Commission in February 2021

(Annex4) Model Articles X.X.4 to X.X.8 for disease-specific chapters to address declaration of freedom from [Pathogen X]

Proposed amendments and comments on (Article X.X.5. Country free from infection with [PATHOGEN X])

4) In the meantime, part or all of the country, apart from the infected and protection zones, may be declared a free zone provided that such a part meets the conditions in point 2 of Article X.X.6.

Article X.X.6.

(Comments)

Japan requests the OIE to provide clear explanation why the requirements to declare a disease-free zone are different among this chapter, a horizontal chapter for aquatic diseases, and the other chapters for specific diseases. Japan needs it to reconsider this Article.

The requirement in point 2 of Article X.X.6 is that “there has been no occurrence of infection with [PATHOGEN X] for at least the last [ten] years”. On the other hand, for example, in the chapter of Infection with koi herpesvirus (Chapter 10.7.4), the requirement is that “targeted surveillance ... has been in place, in the zone or compartment, for at least the last two years without detection of KHV”.

Proposed amendments and comments on (Article X.X.7. Compartment free from infection with [PATHOGEN X]) (Insertion)

2)c) targeted surveillance, as described in Chapter 1.4., has been in place for at least the last **[one]** year without detection of [PATHOGEN X]. However, a different period (less than one year) may be stipulated if warranted by the epidemiology of the disease and the criteria described in Article 1.4.10 of chapter 1.4.

(Rationale)

In order to harmonise with the concept of the period for targeted surveillance in Article 1.4.10. of Chapter 1.4., it is necessary to add an exceptional condition stating the period of surveillance may be different from just [one] year.

Article 1.4.10 of Chapter 1.4.” AQUATIC ANIMAL DISEASE SURVEILLANCE” in Annex 3 states, “A different period (more or less than one year) may be stipulated in the disease-specific chapter of the Aquatic Code if warranted by the epidemiology of the disease and the criteria proposed above.”

Since the compartment free certification in this chapter requests to describe the results of the targeted surveillance, Japan proposes applying the same concept to this article.

(2. THE OIE AQUATIC ANIMAL HEALTH CODE - Text for Members' Information)

Proposed comments on 2.2. Consideration of emerging diseases - Infection with carp edema virus (CEV)

The Commission reviewed the latest scientific evidence and agreed that infection with CEV should be considered an emerging disease in accordance with Article 1.1.4 of the Aquatic Code and noted that it will continue to review new scientific evidence.

The references considered for notifying infection with CEV as an emerging disease are provided in Annex 8 for Members' information.

Comments:

Japan expresses our appreciation for providing the list of papers (Annex 8), which are rationales for that the Commission proposes that infection with CEV would be an emerging disease.

However, the papers also indicate that CEV does not meet the OIE's definition* of an emerging disease. Thus Japan reiterates that CEV is not an emerging disease for the following reasons.

* OIE's definition of an emerging disease

means a disease, other than listed diseases, which has a significant impact on aquatic animal or public health resulting from:

- a) a change of known pathogenic agent or its spread to a new geographic area or species; or
- b) a newly recognized or suspected pathogenic agent.

- Japan considers that CEV does not meet the condition a) of an emerging disease. Any notable change of CEV has not been reported. Then, the several articles the OIE provided have reported that the CEV has already detected in several geographic regions. For example, 'Carp edema virus from three genogroups is present in common carp in Hungary (ADAMEK et al. 2018)' says, "The hypothesis of a prolonged presence of CEV in European carp populations and suggest that previous outbreaks of KSD were not recorded or misdiagnosed."
- Japan also considers that CEV does not meet the condition b) of emerging diseases. It is true that the number of publications on CEV detection has increased in recent years; however, this is possibly due to the cascading discovery of CEV by researchers who had been previously unaware of its existence and became interested in the disease.
- In fact, according to scientific articles, CEV like virus was detected from archived samples for spring carp mortality syndrome (SCMS) in England in the late 1990s (Way et al. 2015) and in the Netherlands in the early 2000s (Haenen et al. 2016). In addition, this disease was reported as a viral disease for carp since 1970s in some scientific papers. While CEV is detected in several European countries, CEV is not currently included in the EU listed diseases (EU 2018/1882).

(Reference)

- Way et al (2015) Detection of carp edema-like virus in archive DNA and tissue sampled from disease outbreaks in common carp (*Cyprinus carpio*) in the UK and the Netherlands: a link with spring carp mortality syndrome. EAFP 17th International Conference on disease of fish and shellfish, Las Palmas

de Gran Canaria 7–11 September 2015. Poster P-029, p 253.

- Haenen et al (2016) Novel viral infections threatening cyprinid fish. Bull Eur Assoc Fish Pathol 36: 11–23.
- Official Journal of the European Union (2018) COMMISSION IMPLEMENTING REGULATION (EU) 2018/1882 of 3 December 2018 on the application of certain disease prevention and control rules to categories of listed diseases and establishing a list of species and groups of species posing a considerable risk for the spread of those listed diseases. <https://eur-lex.europa.eu/legal->