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COMMISSION STAFF WORKING DOCUMENT

technical details on the outcome of the EU co-financed programmes for the eradication, control and monitoring of animal diseases and zoonosis over the period of 2005-2011

{COM(2014) 115 final}

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1. CHAPTER I - LIST OF ACRONYMS

AD: Aujeszky's disease

ADNS: Animal Disease Notification System

AI: Avian influenza

ASF: African swine fever

BSE: Bovine Spongiform Encephalopathy

BTV: Bluetongue virus

CJD: Creutzfeldt Jakob Disease

CSF: Classical swine fever

DG: Directorate General

DG SANCO: DG for Health and Consumers

EBL: Enzootic bovine leucosis

EC: European Commission

ECDC: European Centre for Disease Prevention and Control

EFSA: European Food Safety Authority

EU: European Union

FVO: Food and Veterinary Office

GDP: Gross Domestic Product

HP: Highly pathogenic

HPAI: Highly pathogenic avian influenza

LPAI: Low pathogenic avian influenza

MFF: Multiannual Financial Framework

MS: Member State

OBF: Officially free of bovine brucellosis

ObmF: Officially free of brucellosis melitensis

OIE: World Organisation for Animal Health (Office International des Epizooties)

OTF: Officially tuberculosis free

OV: Oral vaccination

SCoFCAH: Standing Committee on the Food Chain and Animal Health

SRM: Specified risk material

SVD: Swine vesicular disease

TB: Tuberculosis

TF: Task Force

TSE: Transmissible Spongiform Encephalopathies

UK: United Kingdom

vCJD: Variant Creutzfeldt Jakob Disease

WHO: World Health Organisation

WTO – SPS: World Trade Organisation – Sanitary and Phytosanitary Agreement

2. CHAPTER II – GLOSSARY

Co-funding

Co-funding is the financial contribution of the Commission to EU Member States for control and eradication of certain animal diseases and zoonosis.

Competent authority

A domestic government body made responsible under that country's national law for the control or regulation of a particular area of legislation.

Compensation

Compensation means the financial contribution from the Competent authority to the owner of the animals that have been culled in the course of controlling or eradication of a particular disease.

Control programme

Programme to obtain or maintain the prevalence of an animal disease or zoonosis below a sanitary acceptable level.

Culling

Culling means the killing and destruction or slaughter of animals as one of the measures in the course of controlling or eradication of a particular disease under the authority of the Competent Authority.

Disease case

A case is a defined confirmation of infection in a particular animal or individual.

Disease status

Sanitary status of a defined animal population in a country or region, defining the level of the burden of disease.

Eradication programme

Programme to result in biological extinction of an animal disease or zoonosis and-or to obtain the free or officially free-status of the territory according to EU legislation, where such possibility exists.

Herd

An animal or group of animals kept on a holding as an epidemiological unit.

Incidence

The incidence of a disease is the disease occurrence in new cases in a defined population over a designated time period.

Monitoring programme

Programme to investigate an animal population or subpopulation, and/or its environment (including wild reservoir and vectors), to detect changes in the occurrence and infection patterns of an animal disease or zoonosis.

Outbreak

An outbreak is an occurrence of a disease in an animal or animal population, attributed to the same source of infection.

Prevalence

The prevalence of a disease is the disease presence in a defined population (at animals or herd level) in a designated time.

Region

Part of a Member State's territory with a regional governing structure and that is subject to inspection by the competent authorities.

Reservoir

The reservoir is the animal where the infectious pathogen normally resides, and therefore is the common source of infection to other animals or humans.

Surveillance

Surveillance refers to activities to collect and record data on specific diseases in defined populations over a period of time, in order to assess the epidemiological evolution of the diseases and the ability to take targeted measures for control and eradication.

Third country

Country that is not a EU Member State.

Vector

A vector is a source, mostly an insect or tick, that can transmits certain infectious pathogens from one animal or human to the other.

Zoonosis

An infectious disease that is transmissible under natural conditions from animals to humans.

3. CHAPTER III - EU PAYMENTS FOR VETERINARY PROGRAMMES (2005-2011)[1]

Table 1 Evolution of payments per MSs (2005-2011)

MSs	2005	2006	2007	2008	2009	2010	2011	2005-2011	%
AUSTRIA	€ 1.909.529,50	€ 1.884.684,71	€ 1.720.868,89	€ 2.305.146,41	€ 4.845.490,46	€ 2.753.691,35	€ 2.596.076,38	€ 18.015.487,70	1,5342%
BELGIUM	€ 3.061.957,41	€ 2.601.884,61	€ 2.738.294,23	€ 3.225.503,01	€ 6.266.048,51	€ 6.572.786,73	€ 2.222.690,97	€ 26.689.165,47	2,2729%
BULGARIA	€ -	€ -	€ 206.164,17	€ 509.233,32	€ 1.430.278,82	€ 1.106.940,17	€ 706.000,14	€ 3.958.616,62	0,3371%
CYPRUS	€ 2.531.365,42	€ 2.585.493,86	€ 1.545.993,05	€ 1.666.704,92	€ 2.224.697,47	€ 2.684.052,01	€ 1.517.774,70	€ 14.756.081,43	1,2566%
CZECH REPUBLIC	€ 2.122.417,97	€ 1.829.723,80	€ 2.076.423,70	€ 2.424.989,18	€ 4.597.493,60	€ 3.763.889,01	€ 2.170.150,41	€ 18.985.087,67	1,6168%
DENMARK	€ 2.114.660,00	€ 1.995.777,66	€ 2.709.384,70	€ 1.474.360,14	€ 1.204.852,33	€ 1.970.016,42	€ 1.074.862,08	€ 12.543.913,33	1,0682%
ESTONIA	€ 271.561,10	€ 1.283.057,53	€ 1.099.852,82	€ 1.066.078,76	€ 1.080.286,78	€ 1.534.595,48	€ 503.860,78	€ 6.839.293,25	0,5824%
FINLAND	€ 1.055.306,94	€ 993.968,68	€ 865.539,84	€ 658.101,85	€ 522.210,10	€ 782.751,01	€ 717.865,38	€ 5.595.743,80	0,4765%
FRANCE	€ 26.862.566,57	€ 30.709.490,04	€ 30.563.850,93	€ 21.520.291,52	€ 37.157.385,35	€ 49.367.686,33	€ 14.625.777,54	€ 210.807.048,28	17,9524%
GERMANY	€ 16.930.109,41	€ 14.835.203,78	€ 11.721.190,37	€ 11.472.491,40	€ 17.157.960,72	€ 10.319.593,52	€ 8.439.440,67	€ 90.875.989,87	7,7390%
GREECE	€ 421.213,30	€ 832.714,04	€ 1.049.517,79	€ 1.757.209,41	€ 1.590.381,08	€ 1.726.160,34	€ 2.331.460,29	€ 9.708.656,25	0,8268%
HUNGARY	€ 876.260,20	€ 811.371,79	€ 1.814.611,28	€ 3.026.014,38	€ 3.703.624,60	€ 3.388.429,61	€ 3.504.050,28	€ 17.124.362,14	1,4583%
IRELAND	€ 12.982.834,56	€ 10.365.261,35	€ 8.106.621,87	€ 6.315.538,57	€ 21.844.092,91	€ 11.742.296,47	€ 18.898.394,44	€ 90.255.040,16	7,6862%
ITALY	€ 15.803.827,42	€ 12.755.690,97	€ 15.422.914,18	€ 16.765.174,17	€ 16.370.726,43	€ 16.311.685,10	€ 17.756.305,08	€ 111.186.323,34	9,4687%
LATVIA	€ 75.911,04	€ 855.712,44	€ 1.160.246,77	€ 583.529,52	€ 1.109.689,13	€ 1.794.836,25	€ 2.608.624,54	€ 8.188.549,69	0,6973%
LITHUANIA	€ 779.887,74	€ 711.167,65	€ 1.045.576,42	€ 911.515,47	€ 863.145,32	€ 1.207.362,51	€ 2.642.056,62	€ 8.160.711,73	0,6950%
LUXEMBOURG	€ 141.059,25	€ 143.643,30	€ 135.579,85	€ 130.386,79	€ 284.245,72	€ 91.291,45	€ 73.335,41	€ 999.541,77	0,0851%
MALTA	€ 26.540,00	€ 33.870,80	€ 17.797,44	€ 11.815,00	€ 424.937,88	€ 575.402,59	€ 21.773,79	€ 1.112.137,50	0,0947%
NETHERLANDS	€ 5.888.305,40	€ 5.893.075,59	€ 4.555.312,12	€ 5.633.250,69	€ 5.083.611,51	€ 5.270.472,41	€ 3.747.772,60	€ 36.071.800,32	3,0719%
POLAND	€ 1.498.236,26	€ 4.621.311,75	€ 8.857.962,56	€ 12.339.999,52	€ 10.359.228,99	€ 10.302.197,17	€ 6.887.247,05	€ 54.866.183,30	4,6724%
PORTUGAL	€ 4.807.266,24	€ 6.202.361,75	€ 6.354.831,12	€ 5.931.779,26	€ 5.548.677,94	€ 5.399.153,57	€ 5.856.671,51	€ 40.100.741,39	3,4150%
ROMANIA	€ -	€ -	€ 6.202.741,21	€ 1.030.335,18	€ 2.813.037,24	€ 559.425,65	€ 1.413.753,66	€ 12.019.292,94	1,0236%
SLOVAKIA	€ 853.165,99	€ 867.806,23	€ 1.552.235,52	€ 1.397.645,30	€ 1.439.752,85	€ 1.661.617,35	€ 1.499.949,75	€ 9.272.172,99	0,7896%
SLOVENIA	€ 760.058,27	€ 691.336,94	€ 607.395,79	€ 796.445,88	€ 855.358,09	€ 1.087.361,19	€ 963.327,31	€ 5.761.283,47	0,4906%
SPAIN	€ 25.599.151,23	€ 32.313.607,90	€ 29.478.043,76	€ 25.167.759,81	€ 40.106.476,12	€ 39.598.894,41	€ 40.772.849,59	€ 233.036.782,82	19,8455%
SWEDEN	€ 316.552,00	€ 1.109.806,00	€ 1.543.821,84	€ 1.197.741,96	€ 2.230.872,42	€ 1.847.198,00	€ 759.096,73	€ 9.005.088,95	0,7669%
UNITED KINGDOM	€ 16.288.396,94	€ 15.315.493,29	€ 8.854.618,15	€ 8.767.942,09	€ 5.545.391,21	€ 34.405.758,10	€ 29.140.573,50	€ 118.318.173,28	10,0760%
TOTAL	€ 143.978.140,16	€ 152.243.516,46	€ 152.007.390,37	€ 138.086.983,50	€ 196.659.953,58	€ 217.825.544,20	€ 173.451.741,20	€ 1.174.253.269,46	100%

Source: DG Health and Consumers

Table 2 Evolution of payments per diseases (2005-2011)

PROGRAMMES	2005	2006	2007	2008	2009	2010	2011	2005-2011	%
AUJESZKY	€ 891.589,22	€ 360.000,00	€ 695.265,00	€ 1.750.423,18	€ 2.162.890,76	€ 1.430.330,85	€ -	€ 7.290.499,01	0,6209%
AVIAN INFLUENZA	€ -	€ -	€ 2.852.301,55	€ 3.267.145,85	€ 4.047.613,96	€ 4.007.452,21	€ 2.579.494,13	€ 16.754.007,70	1,4268%
BLUE TONGUE	€ 1.645.000,00	€ 4.589.529,24	€ 6.772.476,50	€ 9.553.665,53	€ 66.897.255,19	€ 67.618.033,53	€ 9.793.029,67	€ 166.868.989,66	14,2106%
BOVINE BRUCELLOSIS	€ 15.358.244,20	€ 12.142.352,83	€ 10.670.084,17	€ 9.634.899,42	€ 8.401.841,45	€ 6.892.981,29	€ 7.728.388,78	€ 70.828.792,13	6,0318%
BOVINE TUBERCULOSIS	€ 7.828.382,59	€ 9.992.819,44	€ 10.572.042,83	€ 12.755.642,08	€ 29.968.275,50	€ 48.724.125,15	€ 61.741.007,16	€ 181.582.294,74	15,4636%
CLASSICAL SWINE FEVER	€ 1.354.606,31	€ 2.017.646,43	€ 7.101.646,40	€ 2.125.400,17	€ 4.864.981,08	€ 2.749.990,29	€ 2.444.929,53	€ 22.659.200,21	1,9297%
ENZOOTIC BOVINE LEUCOSIS	€ 760.314,48	€ 639.608,46	€ 4.609.420,82	€ 2.506.671,52	€ 2.340.362,02	€ 1.943.695,86	€ -	€ 12.800.073,16	1,0901%
OVINE & CAPRINE BRUCELLOSIS	€ 8.485.246,26	€ 8.853.643,97	€ 7.842.454,42	€ 6.425.211,56	€ 5.749.064,66	€ 4.961.287,70	€ 12.424.482,58	€ 54.741.391,15	4,6618%
POSEIDOM	€ 150.000,00	€ 100.000,00	€ 50.000,00	€ -	€ -	€ -	€ -	€ 300.000,00	0,0255%
RABIES	€ 2.902.895,68	€ 6.849.019,39	€ 8.908.639,87	€ 7.757.947,60	€ 10.222.058,00	€ 13.640.427,29	€ 14.266.515,85	€ 64.547.503,68	5,4969%
SALMONELLA	€ 984.427,49	€ 1.116.884,46	€ 3.349.147,03	€ 13.260.205,45	€ 13.534.730,72	€ 9.677.747,47	€ 8.759.726,29	€ 50.682.868,91	4,3162%
SWINE VESICULAR DISEASE	€ 197.702,83	€ -	€ 350.000,00	€ 300.000,00	€ 308.988,04	€ 217.417,62	€ 566.264,71	€ 1.940.373,20	0,1652%
TSE / BSE / SCRAPIE	€ 103.419.731,10	€ 105.582.012,24	€ 88.233.911,78	€ 68.749.771,15	€ 48.161.892,20	€ 55.962.054,94	€ 53.147.902,50	€ 523.257.275,91	44,5609%
TOTAL	€ 143.978.140,16	€ 152.243.516,46	€ 152.007.390,37	€ 138.086.983,50	€ 196.659.953,58	€ 217.825.544,20	€ 173.451.741,20	€ 1.174.253.269,46	100%

Source: DG Health and Consumers

[1] Some payments for 2011 programmes are still to be completed, therefore figures for 2011 are slightly underestimated.

4. CHAPTER IV - COST-BENEFIT ANALYSIS OF VETERINARY PROGRAMMES OVER THE PERIOD 2005-2011

1. Transmissible Spongiform Encephalopathies (TSEs)

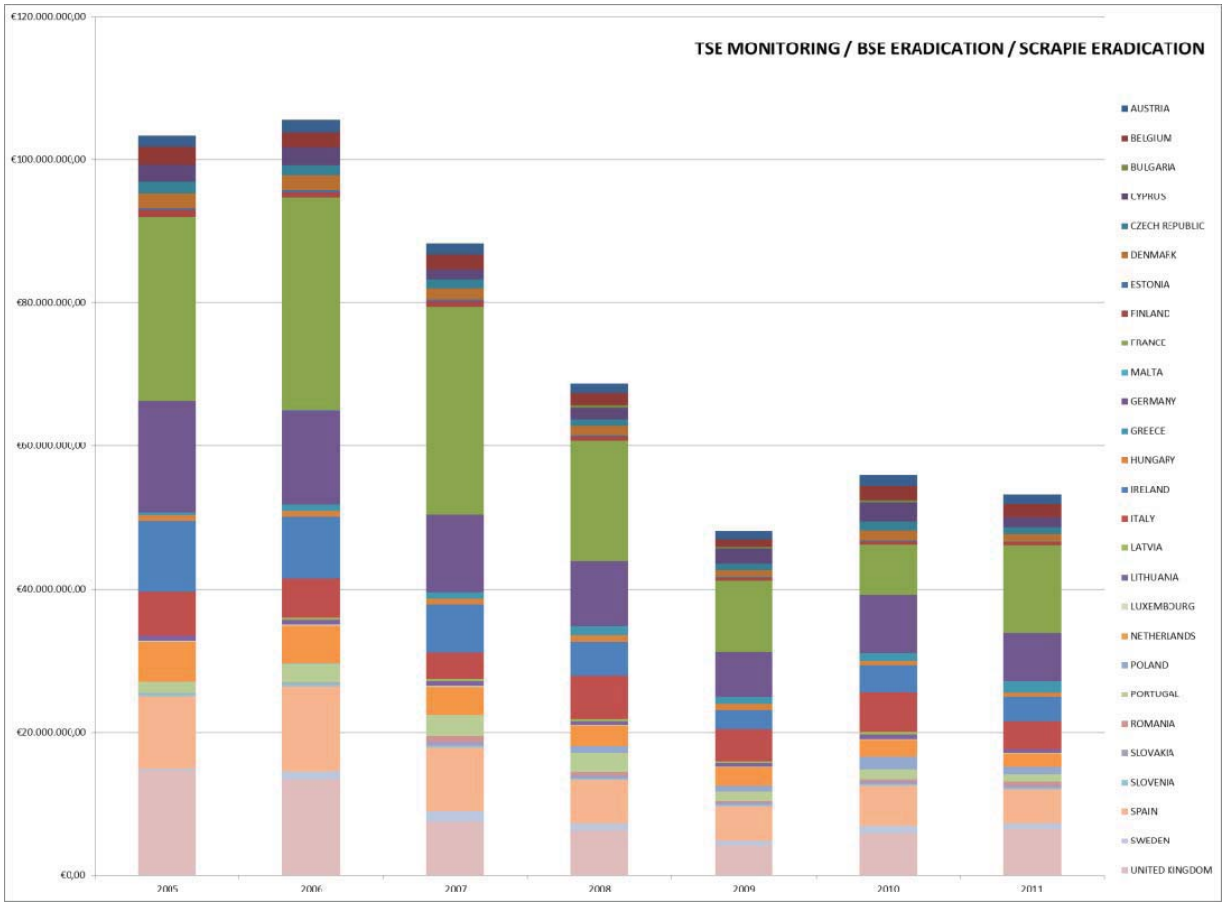


Figure 1 Evolution of funding for TSE, BSE and SCRAPIE

EU co-financing (2005-2011): *€ 523.257.275,91*

MS(s) co-financed: *EU 27 (compulsory programmes)*

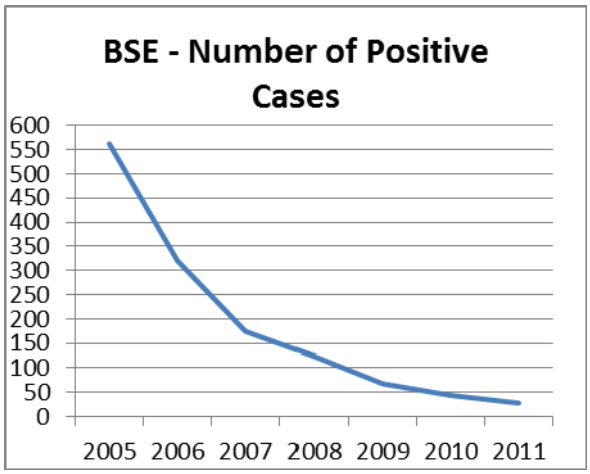
(Maximum) co-financing rate *(up to a ceiling)**:*** *100% (testing), 50% (animals culled; genotyping)*

The TSE's family includes diseases that can occur in humans[2] as well as in animals[3] caused by an agent called prion (PrPres). Although the major concern is the impact on public health - , BSE in cattle causes serious direct and indirect losses, mainly through consumers mistrust and trade restrictions

Over 80% of funding was provided for TSE monitoring, a necessary measure to ensure that the disease continues to decline: as a consequence of the very substantial reduction in new BSE cases, financial requests for BSE eradication dropped for most of the MSs.

Over the same period, the herd prevalence in bovines also fell by over 90%.

Figure 2 Number of BSE positive cases (2005-2011)



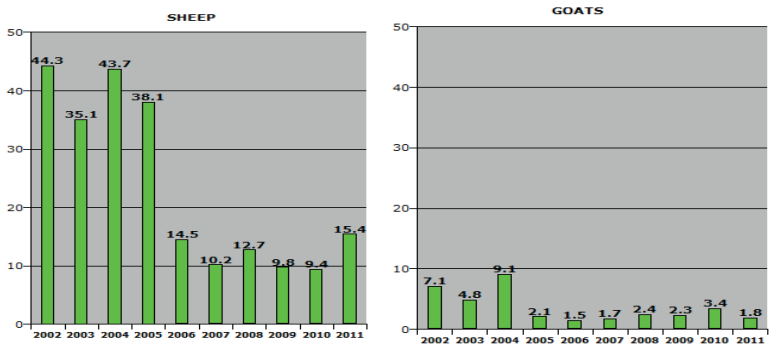
Overall, EU funding for TSE decreased by 50% over the period, while the number of BSE positive cases decreased by more than 95% (Figure 7): in 2011 only 28 positive cases were found.

There is no clear trend with regard to the evolution of the overall prevalence of scrapie at the EU level. However, a refined analysis shows that it differs widely from one MSs to the other, and that positive evolutions can be observed in some MSs.

[2] *Creutzfeldt Jakob's Disease* (CJD)

[3] *Bovine Spongiform Encephalopathy* (BSE) in cattle, scrapie in small ruminants (sheep and goats)

Figure 3 Evolution of overall prevalence of Scrapie in small ruminants in the EU (2001-2011)



Source: Report on the monitoring of ruminants for the presence of Transmissible Spongiform Encephalopathies (TSEs) in the EU in 2011

2. Bluetongue (BT)

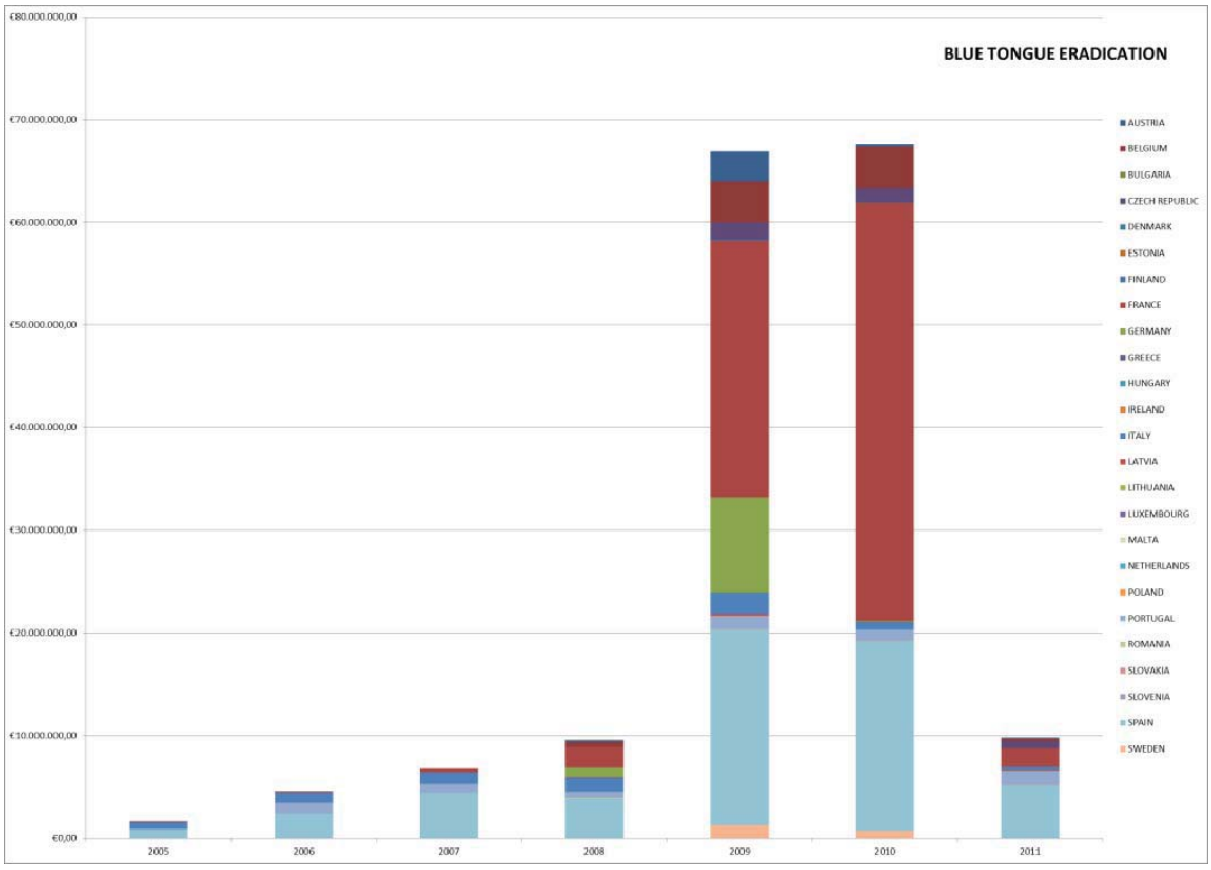


Figure 4 Evolution of funding for Bluetongue

EU co-financing (2005-2011): *€166.868.989,66*

MS(s) co-financed: *25 MSs (EU-27 except Cyprus and UK)*

(Maximum) co-financing rate *(up to a ceiling):50% (monitoring, vaccination)*

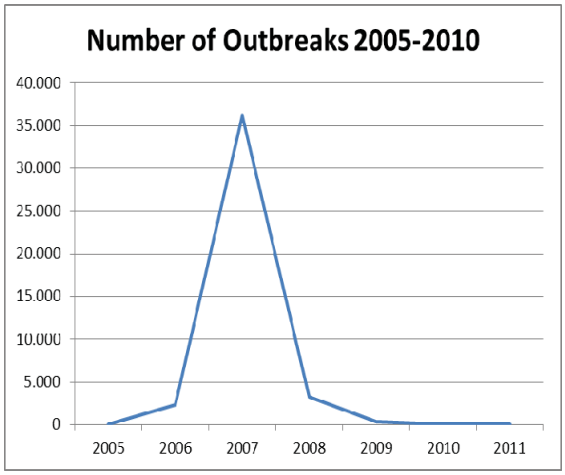


Figure 5 Bluetongue outbreaks in the EU

Bluetongue is a non-contagious vector viral disease that affects sheep, cattle, goats and other ruminants. It does not affect humans. At present, 24 serotypes of the virus are known. The principal, most effective veterinary measure in response to bluetongue is vaccination. The total amount of funding during the period varies greatly between MSs, depending on whether vaccination eligible for EU funding was applied, and depending on the size of the ruminant population in each MS.

In 2009 and 2010 the level of co-funding increased importantly due to the large scale vaccination programme launched in these years against serotypes BTV-8 and BTV-1. Thanks to the proper implementation of these measures co-funded by the EU over these two years, the spread of the disease was limited and a sharp reduction in the number of outbreaks was observed, as illustrated in Figure 10. In 2011, due to the significant improvement of the epidemiological situation, vaccination campaigns became voluntary in most MSs, thus leading to a great reduction of EU financial contribution.

3. Bovine Tuberculosis (TB)

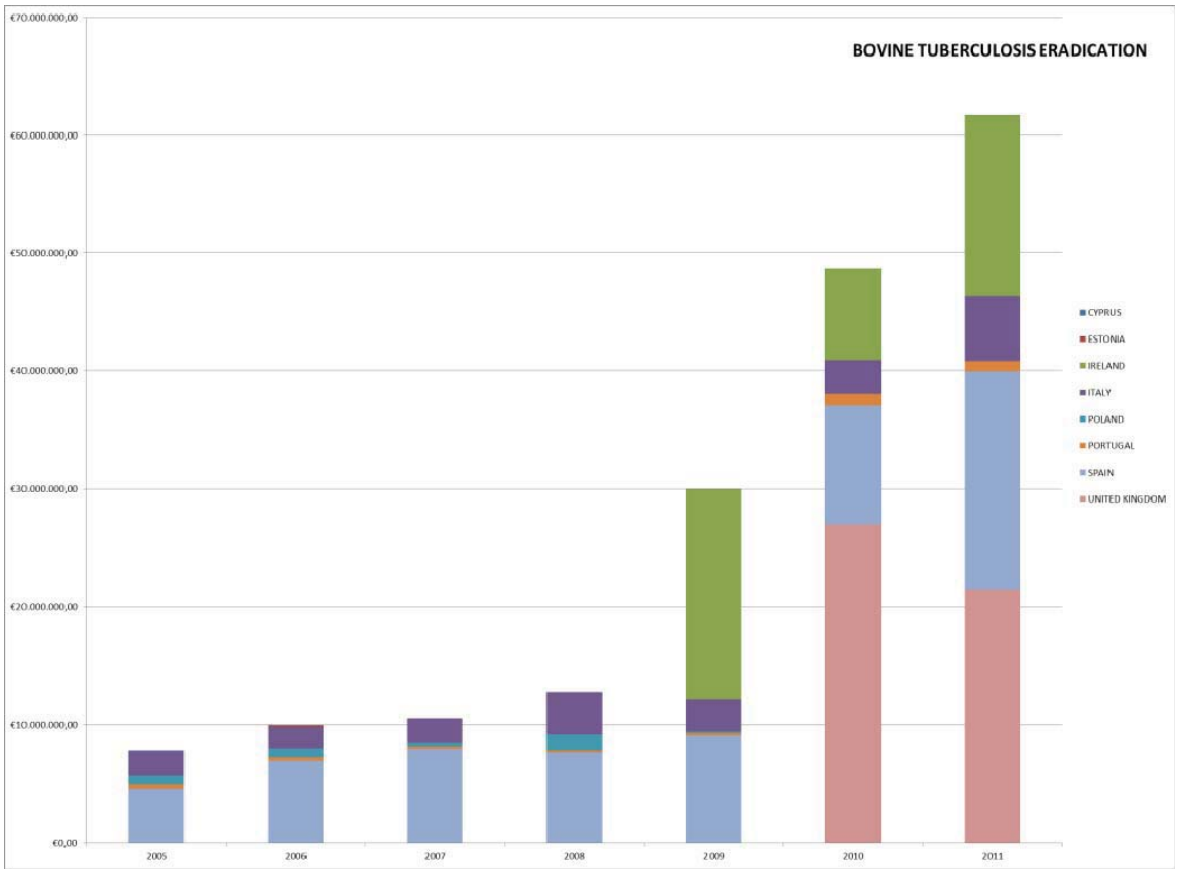


Figure 6 Evolution of funding for Tuberculosis

EU co-financing (2005-2011): *€181.582.294,74*

MS(s)co-financed: *Cyprus (2005), Estonia (2006), Italy, Poland, Portugal, Spain, Ireland (since 2009), UK (since 2010)*

(Maximum) co-financing rate *(up to a ceiling):50%* (testing, slaughtering/culling)

Tuberculosis is a bacterial disease of both humans[4] and animals. The presence of this disease has a serious impact on trade, therefore the achievement of 'officially-free status', is a crucial objective of bovine tuberculosis eradication measures.

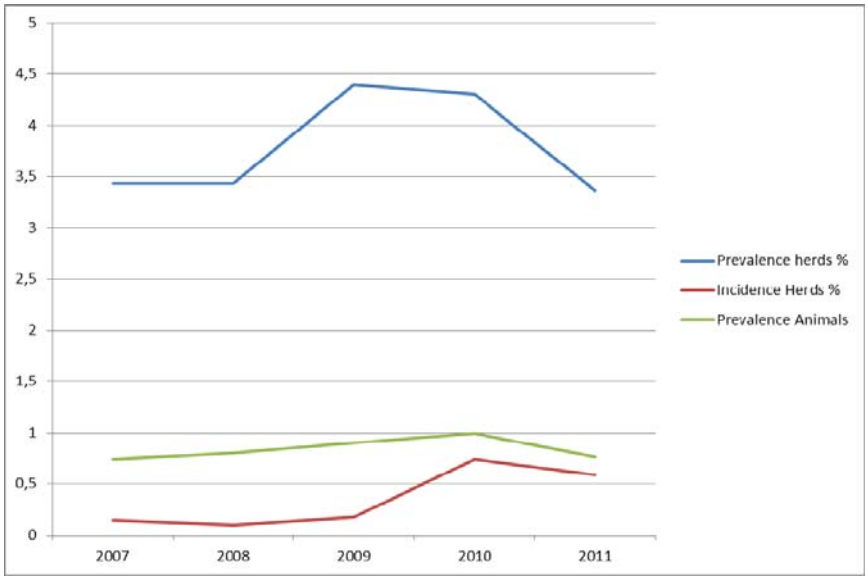
Bovine tuberculosis is slow and difficult to tackle, but there are success stories where clear progress can be demonstrated, also due to EU co-financing (see section 3.3).

Co-financing provided by the Commission significantly increased since 2007. Epidemiological data for co-funded MSs indicate that over the period considered, progress

[4] Humans can be infected mainly through contaminated food (raw non-pasteurized milk and milk products) or through direct contacts with infected animals (farmers and abattoir workers.

have been made in the eradication of the disease with clear decreasing of the prevalence at herd and animal level. Nevertheless a noticeable increase was observed in the period 2008-2009: it can be partly attributed to increase detection *via* a large number of additional gamma-interferon tests[5] carried out and, the strict interpretation of the IDTB test[6](mainly in Spain). This is reflected in the upward trend in co-financing during these years.

Figure 7 Evolution of Prevalence herds, incidence herds and Prevalence animals in Italy, Poland, Portugal and Spain (2007-2011)



From 2009, TB programmes were co-financed also in Ireland and from 2010 in the UK. In both countries the prevalence/incidence of the disease remained still high also possibly due to the presence of the wildlife reservoirs. A slight reduction in herd prevalence has been observed in Ireland, coming down from over 5,27% in 2009 to 4.37% in 2011. Some minor improvements were observed in the UK, where the herd prevalence decreased from 14,4% in 2010 to 13,8% in 2011, but the situation remain quite worrying.

Given the fact that eradication of TB is a long-term process, no conclusion can be drawn from a three/two year co-financing period.

[5] Gamma-interferon test is used in addition to the skin tests to increase sensitivity of the animal testing.

[6] The intradermal tuberculin *(IDTB) test.*

4. Bovine Brucellosis

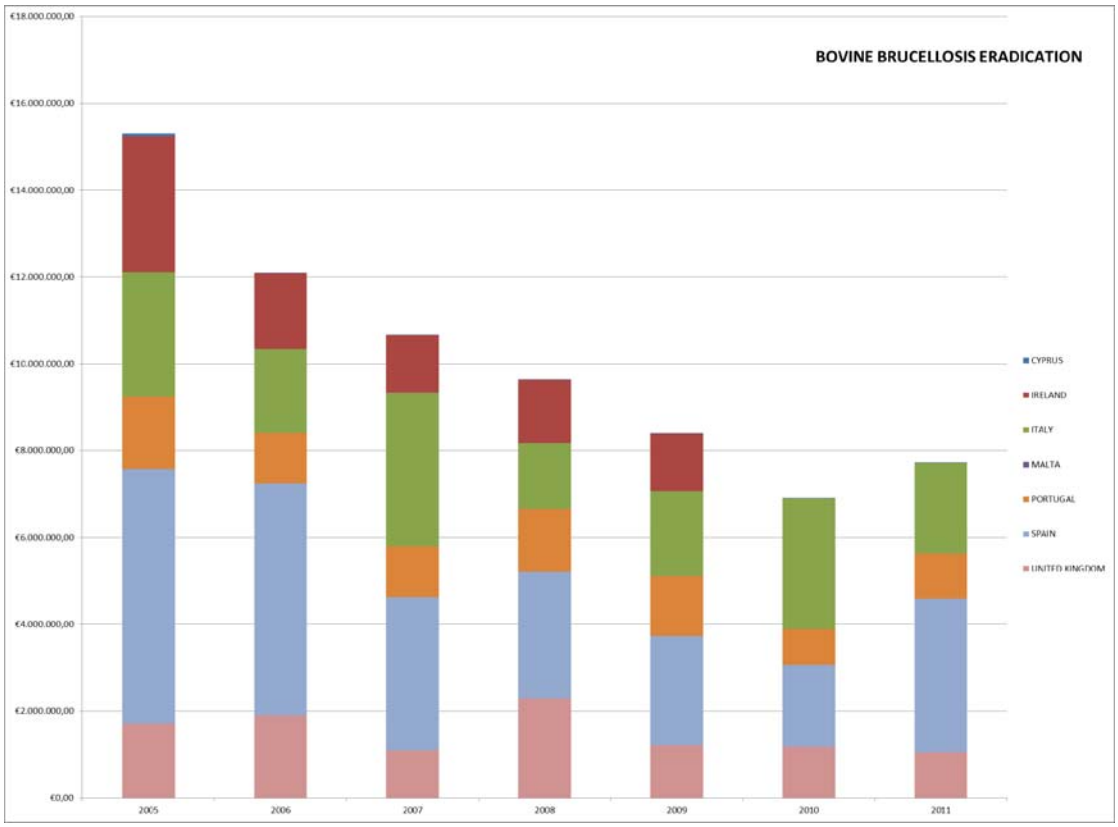


Figure 8 Evolution of funding for Bovine Brucellosis

EU co-financing (2005-2011): *€70.828.792,13*

MS(s) co-financed: *Cyprus, Ireland (until 2009), Italy, Malta (2009-2010), Portugal, Spain, UK*

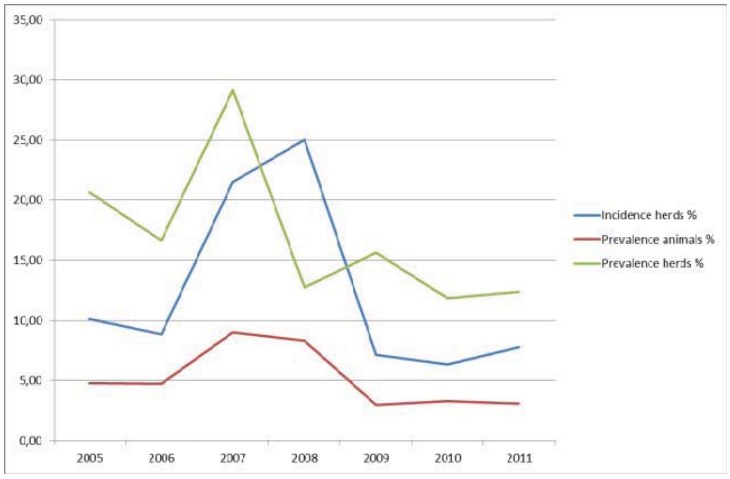
(Maximum) co-financing rate *(up to a ceiling):50% (testing, vaccination, slaughtering/culling)*

Bovine Brucellosis is a bacterial disease of cattle that can also affect human. It is mainly concentrated in the South of Europe: Italy, Portugal, Spain, Cyprus as well as in Ireland and the UK (Northern Ireland). Vaccination is one of the main tool to eradicate the disease. To be noticed that in the Azores the implementation of the vaccination programme yielded excellent results with herd prevalence dropping from over 3% in 2006 to just over 1% in 2011.

During the years 2005-2011, the major beneficiaries of EU co-financing were countries with higher prevalence of the disease and higher volume of cattle production. The amount invested by the EU to the MSs under consideration decreased over the period considered, in line with

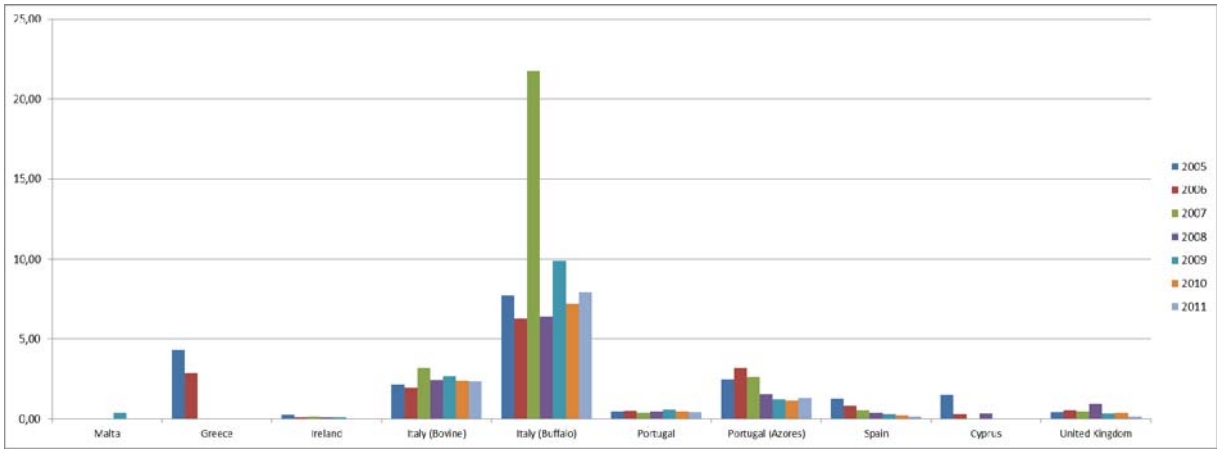
the decreasing (or at least low level) of the prevalence at herd and animal levels in most countries (Cyprus, North-Central Italy, Ireland[7], Spain, and UK).

Figure 9 Evolution of Bovine Brucellosis Herd Prevalence Rate, Animal Prevalence Rate and Herd incidence Rate (2005-2011)



The high herd and animal prevalence observed in Italy in 2007 and 2008 is mainly due to the intensive testing regime implemented to tackle the disease in the Southern regions of Italy, especially in Campania.

Figure 15 Evolution of Bovine and Buffalo[8] Brucellosis Herd Prevalence Rate (%) in MSs with Co-Funded Programmes 2005-2011



[7] Officially free since 2009
[8] In Italy only

5. Rabies

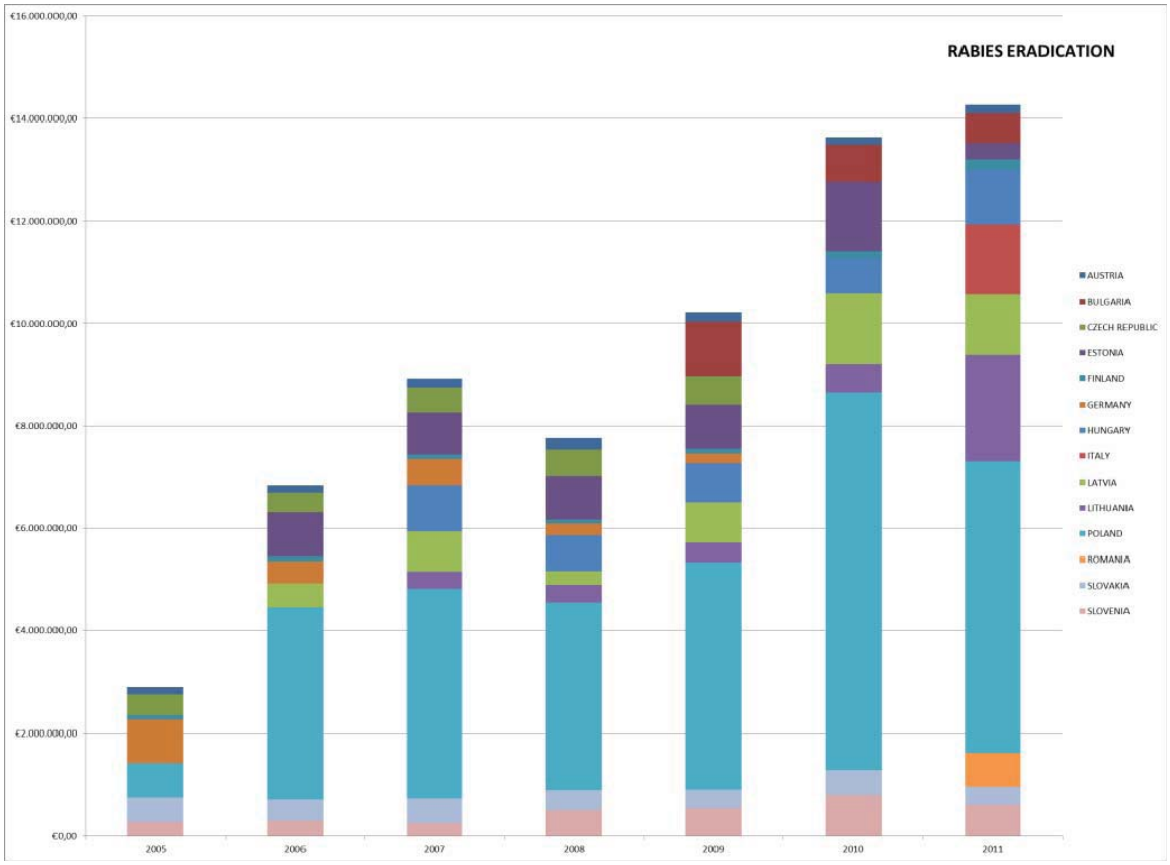


Figure 16 Evolution of funding Rabies

EU co-financing (2005-2011): *€ 64.547.503,68*

MS(s) co-financed: *Austria, Bulgaria (since 2009), Czech Republic (until 2009), Estonia, Finland, Germany (until 2009), Hungary (since 2007), Italy (2011), Latvia (since 2006), Lithuania (since 2007), Poland, Romania (2011), Slovakia, Slovenia*

(Maximum) co-financing rate *(up to a ceiling)**: 50% (purchase and distribution of vaccines, laboratory tests); 75% from 2010.***

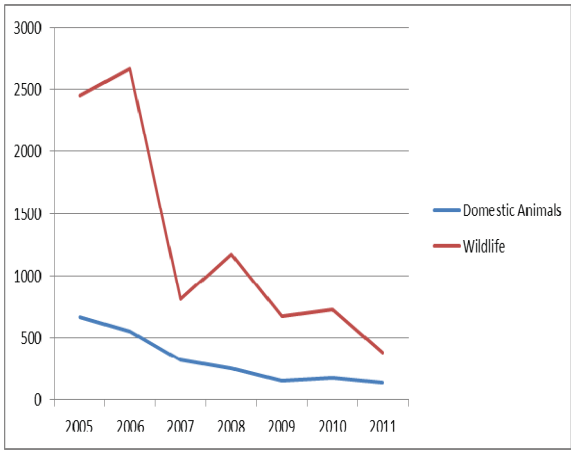
Rabies is a viral fatal disease that can affect both animals and humans and was previously much present across Europe. In the EU, human cases are nowadays rare due to the disappearance of urban rabies, the improvement of the situation in wildlife and the systematic application of post-exposure treatment in cases of contact of humans with suspect animals.

A consistent upward trend in funding can be observed over the period 2005-2011. This increase can be attributed to the extension of the annual wildlife vaccination coverage area in co-funded MS and the increase co-financing rate (75%) from 2010.

The total amount of funding during the period varies between MSs, according to the size of the area covered by the vaccination programme in each MS. Poland, the recipient of the largest amount of funding, has carried out vaccination covering the whole territory of the

country (around 282,000 km^2), while Finland, which received relatively small amounts, has regularly implemented oral vaccination programmes in a focused area of 4000 Km^2 area along the Finnish-Russian south east border.

Figure 17 Number of Rabies Outbreaks in the EU



Source: WHO Bulletin Rabies, EU

Thus, the EU co-financing cost are- limited compared to the overall benefits of the eradication of a serious and nearly always fatal zoonosis. Apart from the prevented human deaths, a significant saving for a rabies-free country is the reduced need for post-exposure treatment for humans being bitten by animals, which is extremely expensive.

Between 2008 and 2009, five cases of rabies in humans were reported by four EU MSs, and of these three were indigenous (this is the first time since the year 2000 that an indigenous case of human rabies has occurred in the EU mainland territory and appears to be related to the fact that rabies is still prevalent in wildlife in Romania (EFSA-ECDC, 2011). Despite the low number of human cases, the continued incidence in Europe indicates the need for maintaining the effort to monitor the disease.

The observed reductions are therefore the direct result of these successful oral vaccination campaigns.

6. Ovine and Caprine Brucellosis

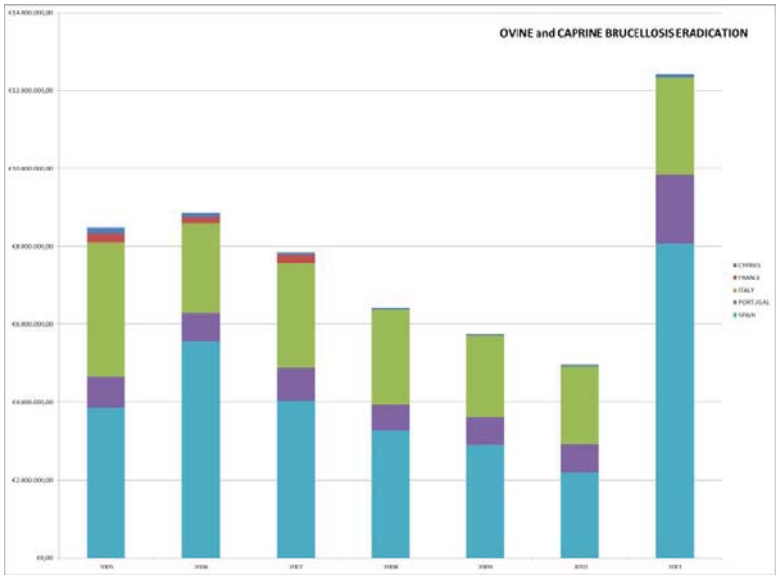


Figure 18 Evolution of funding for Ovine and Caprine Brucellosis

EU co-financing (2005-2011): *€ 54.741.391,15*

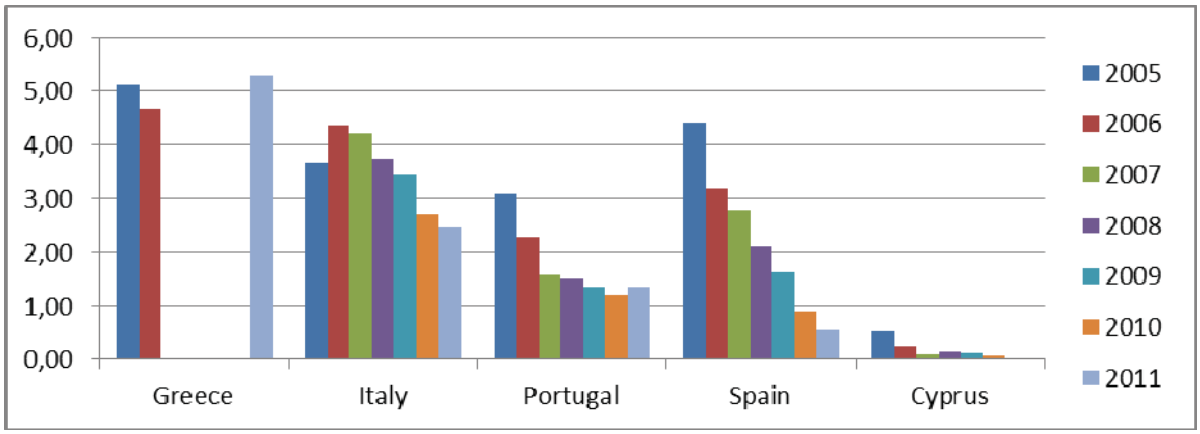
MS(s) co-financed: *Cyprus, France (until 2007), Greece, Italy, Portugal, Spain*

(Maximum) co-financing rate *(up to a ceiling): 50% (testing, vaccination, slaughtering / culling)*

Brucellosis in ovine and caprine, is a bacterial disease of small ruminants that can also affect human. It is mainly concentrated in the South of Europe. The EU funding decreased steadily over the period in line with the decreasing prevalence of the disease, while the increase in funding in 2011 is due to the new co-funding rules to increase financial support to the MSs concerned.

Between 2005 and 2011, the implementation of the eradication programmes in Northern and Central Italy, Spain and Cyprus made good progress in eradicating the disease, with the exception of Greece and Southern Italy, where the herd prevalence levels remained significantly high throughout the period (figure 19).

Figure 19 Evolution of Ovine and Caprine Brucellosis herd prevalence in MSs with co-funded programmes, 2005-2011



Source: DG SANCO

In the case of Greece, the Commission approved programmes during the period 2005- 2007 and in 2009 (in 2008 and 2010 Greece did not submit a brucellosis eradication programme for sheep and goats) but no payments were made due to the poor implementation of the programme. Measures applied to tackle ovine and caprine brucellosis, were not satisfactory in southern Italy either, where particular implementation issues of the programmes, specially very limited vaccination coverage, adversely affected their performance. As a consequence, the Commission imposed financial reduction of the approved budget for the region of Sicily for the years since 2007.

7. Salmonella

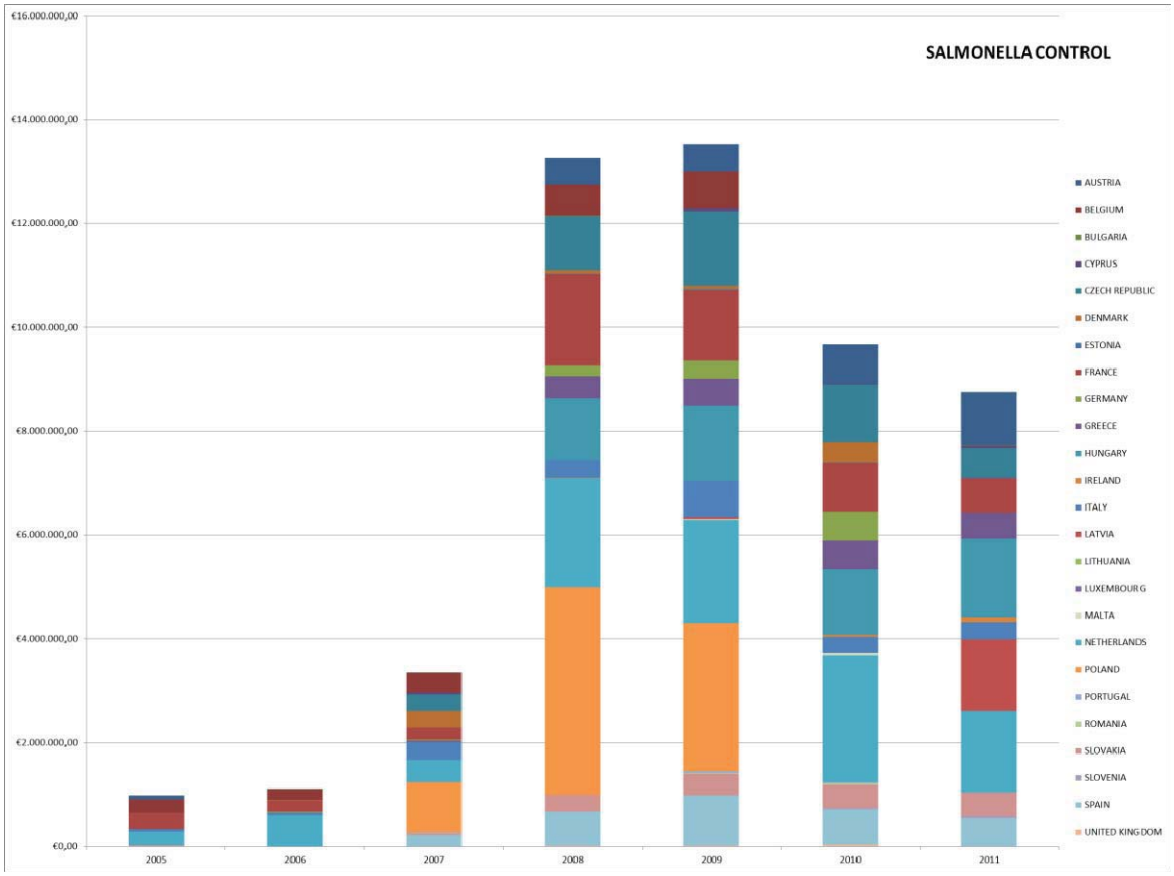


Figure 20 Evolution of payments for Salmonella

EU co-financing (2005-2011): *€50.682.868,91*

MS(s) co-financed: *25 MSs (EU-27 except Finland and Sweden)*

(Maximum) co-financing rate *(up to a ceiling): 50%*

Salmonellosis is an important zoonosis which can cause regular outbreaks with significant morbidity and mortality.

Salmonella programmes cover four different categories: breeders, laying hens, broilers and turkeys. The programme data available across the different flock types varies in extent and comprehensiveness.

The EU co-financing for salmonellosis control has noticeably increased since 2007, when the implementation of control programmes became (gradually, for the different categories) mandatory including harmonised testing scheme with intensified monitoring.

When comparing funding between EU MSs, there are significant differences. MSs with an intensive poultry industry have generally more programmes for the four categories under salmonella control.

Figure 21 Evolution of prevalence of five targeted serovars in breeding flocks during the production period in the EU 2007-2011

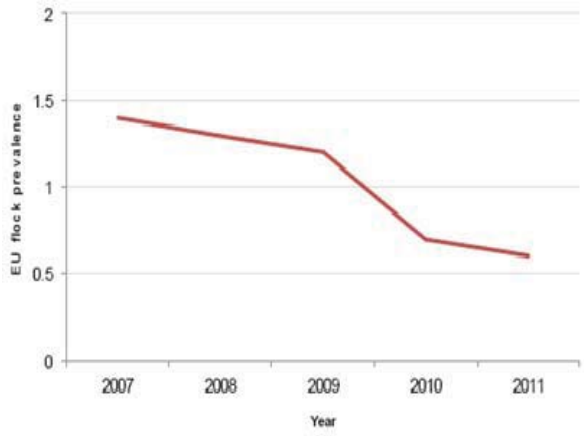
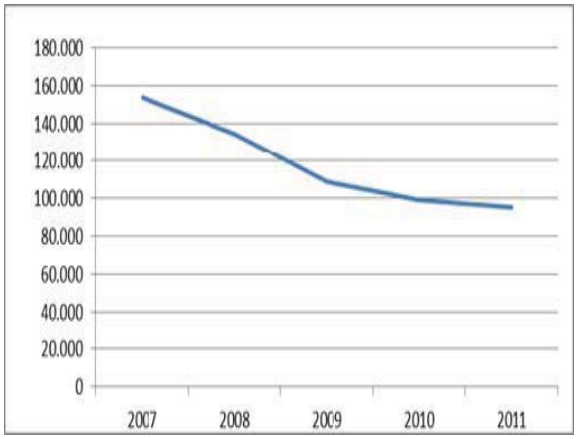


Figure 22 Number of Reported Confirmed Cases of Human Salmonella in the EU



Source: EFSA and ECDC -The EU Summary Report on Trends and Sources of Zoonoses, Zoonotic Agents and Food-borne Outbreaks in 2010

Data from EFSA also indicate continuous progress made in combating the *S. Enteritidis* and *S. Typhimurium*, which are the most important serovars also affecting humans: prevalence had declined in most MSs over the period.

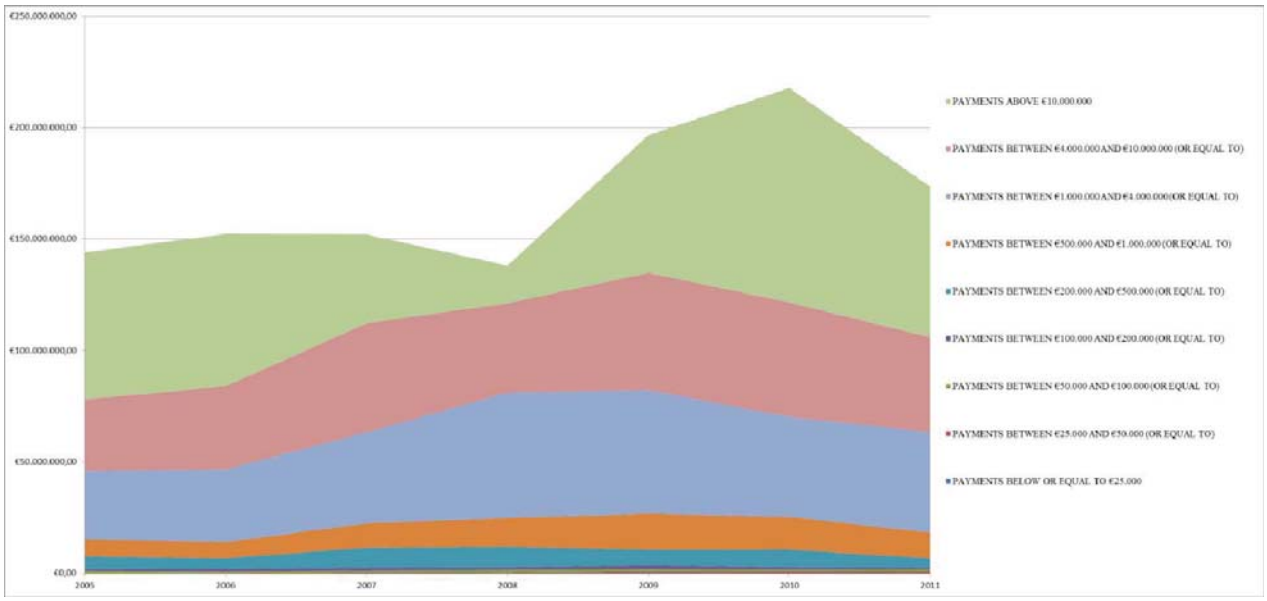
Epidemiological data since 2004 clearly show that there has been a substantial and steady decline in the reported cases in humans across all 27 MSs. The drop is approximately 49% between 2004 and 2011, from 196,000 cases to 99,020.

5. CHAPTER V - PAYMENTS' VALUE (2005-2011)

Number of payments and amount of payments (progressive thresholds) made in the period 2005-2011 under EU co-financed veterinary programmes.

	EU 25		EU27						Payments' amount	Nr. of programmes
	2005	2006	2007	2008	2009	2010	2011	2005-2011	%	
PAYMENTS BELOW OR EQUAL TO €25.000	€82.969,20	€89.579,84	€292.693,39	€201.730,82	€277.626,99	€308.405,54	€263.046,34	€1.516.052,12	0,1291%	
NR OF PAYMENTS BELOW OR EQUAL TO €25.000	8	11	26	21	28	33	28	155		18,7879%
PAYMENTS BETWEEN €25.000 AND €50.000 (OR EQUAL TO)	€100.587,12	€166.573,70	€320.152,44	€314.647,31	€560.859,69	€505.391,95	€472.268,72	€2.440.480,93	0,2078%	
NR OF PAYMENTS BETWEEN €25.000 AND €50.000 (OR EQUAL TO)	3	4	8	9	14	14	12	64		7,7576%
PAYMENTS BETWEEN €50.000 AND €100.000 (OR EQUAL TO)	€872.586,92	€570.590,27	€566.858,43	€953.157,20	€838.274,52	€676.257,47	€883.600,57	€5.361.325,38	0,4566%	
NR OF PAYMENTS BETWEEN €50.000 AND €100.000 (OR EQUAL TO)	11	7	7	12	11	10	11	69		8,3636%
PAYMENTS BETWEEN €100.000 AND €200.000 (OR EQUAL TO)	€779.328,60	€978.884,74	€1.360.967,97	€1.268.289,85	€2.088.705,97	€1.267.081,24	€896.753,33	€8.640.011,70	0,7358%	
NR OF PAYMENTS BETWEEN €100.000 AND €200.000 (OR EQUAL TO)	5	7	9	8	13	9	6	57		6,9091%
PAYMENTS BETWEEN €200.000 AND €500.000 (OR EQUAL TO)	€5.801.853,77	€5.025.244,80	€8.999.244,13	€9.326.091,66	€6.821.452,93	€7.898.885,74	€4.287.629,79	€48.160.402,82	4,1014%	
NR OF PAYMENTS BETWEEN €200.000 AND €500.000 (OR EQUAL TO)	18	15	26	28	20	23	13	143		17,3333%
PAYMENTS BETWEEN €500.000 AND €1.000.000 (OR EQUAL TO)	€7.682.567,88	€7.199.832,90	€10.954.723,97	€12.817.553,79	€16.319.577,16	€14.769.420,26	€11.470.365,86	€81.214.041,82	6,9162%	
NR OF PAYMENTS BETWEEN €500.000 AND €1.000.000 (OR EQUAL TO)	10	9	14	18	22	21	17	111		13,4545%
PAYMENTS BETWEEN €1.000.000 AND €4.000.000 (OR EQUAL TO)	€30.709.489,67	€32.671.768,67	€40.818.265,05	€56.319.381,84	€55.435.611,75	€44.841.703,11	€45.182.099,67	€305.978.319,76	26,0573%	
NR OF PAYMENTS BETWEEN €1.000.000 AND €4.000.000 (OR EQUAL TO)	13	17	19	27	29	25	26	156		18,9091%
PAYMENTS BETWEEN €4.000.000 AND €10.000.000 (OR EQUAL TO)	€32.047.632,77	€37.338.555,06	€48.909.688,19	€39.978.716,82	€52.493.719,42	€51.278.120,56	€42.488.702,48	€304.535.135,30	25,9344%	
NR OF PAYMENTS BETWEEN €4.000.000 AND €10.000.000 (OR EQUAL TO)	5	6	8	6	8	8	7	48		5,8182%
PAYMENTS ABOVE €10.000.000	€65.901.124,23	€68.202.486,48	€39.784.796,80	€16.907.414,21	€61.824.125,15	€96.280.278,33	€67.507.274,44	€416.407.499,64	35,4615%	
NR OF PAYMENTS ABOVE €10.000.000	4	4	2	1	3	4	4	22		2,6667%
TOTAL PAYMENTS	€143.978.140,16	€152.243.516,46	€152.007.390,37	€138.086.983,50	€196.659.953,58	€217.825.544,20	€173.451.741,20	€1.174.253.269,46	100%	
TOTAL NR OF PAYMENTS	77	80	119	130	148	147	124	825		100%

Source: DG Health and Consumers



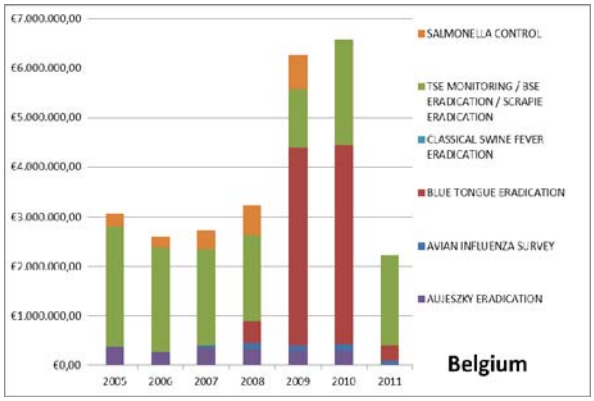
Source: DG Health and Consumers

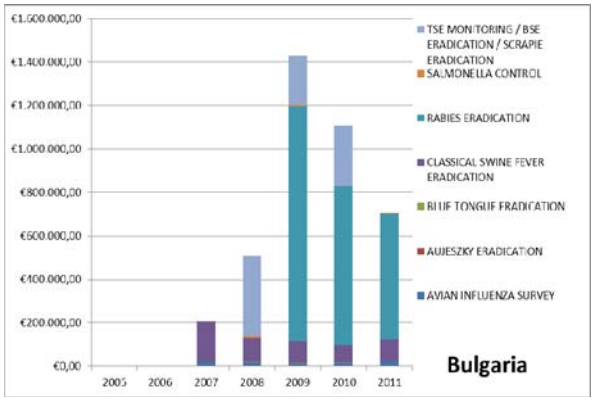
2005-2011	PAYMENTS' AMOUNT	PERCENTILE
PAYMENTS BELOW OR EQUAL TO €25.000	€ 1.516.052,12	0,12911%
PAYMENTS BELOW OR EQUAL TO €50.000	€ 3.956.533,05	0,33694%
PAYMENTS BELOW OR EQUAL TO €100.000	€ 9.317.858,43	0,79351%
PAYMENTS BELOW OR EQUAL TO €200.000	€ 17.957.870,13	1,52930%
PAYMENTS BELOW OR EQUAL TO €500.000	€ 66.118.272,95	5,63067%
PAYMENTS BELOW OR EQUAL TO €1.000.000	€ 147.332.314,77	12,54689%
PAYMENTS BELOW OR EQUAL TO €4.000.000	€ 453.310.634,53	38,60416%
PAYMENTS BELOW OR EQUAL TO €10.000.000	€ 757.845.769,82	64,53853%
TOTAL PAYMENTS	€ 1.174.253.269,46	100%

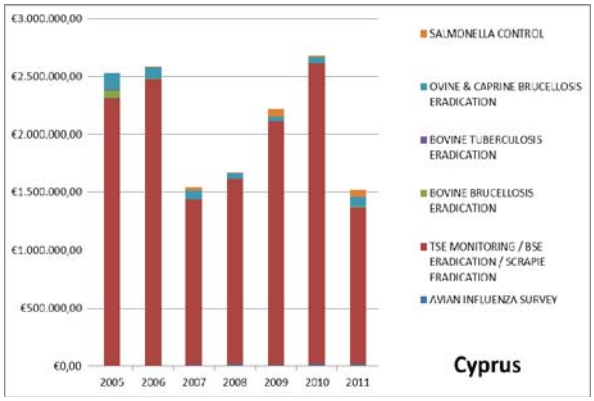
2005-2011	NR OF PAYMENTS	PERCENTILE
NUMBER OF PAYMENTS BELOW OR EQUAL TO €25.000	155	18,78788%
NUMBER OF PAYMENTS BELOW OR EQUAL TO €50.000	219	26,54545%
NUMBER OF PAYMENTS BELOW OR EQUAL TO €100.000	288	34,90909%
NUMBER OF PAYMENTS BELOW OR EQUAL TO €200.000	345	41,81818%
NUMBER OF PAYMENTS BELOW OR EQUAL TO €500.000	488	59,15152%
NUMBER OF PAYMENTS BELOW OR EQUAL TO €1.000.000	599	72,60606%
NUMBER OF PAYMENTS BELOW OR EQUAL TO €4.000.000	755	91,51515%
NUMBER OF PAYMENTS BELOW OR EQUAL TO €10.000.000	803	97,33333%
TOTAL NUMBER OF PAYMENTS	825	100%

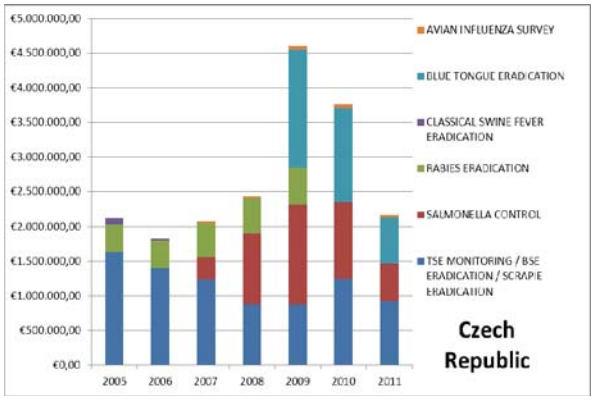
Source: DG Health and Consumers

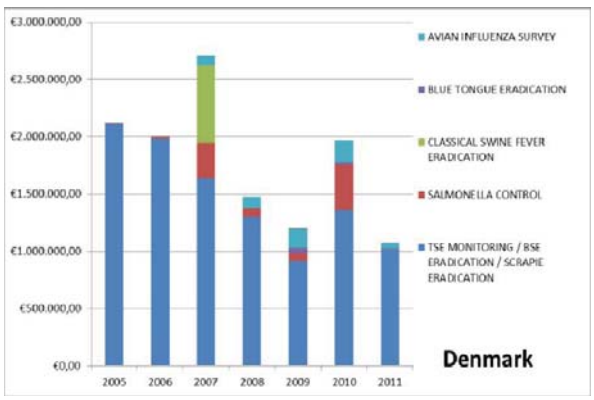
6. CHAPTER VI - EVOLUTION OF FUNDING PER MSS (MINOR RECIPIENTS)

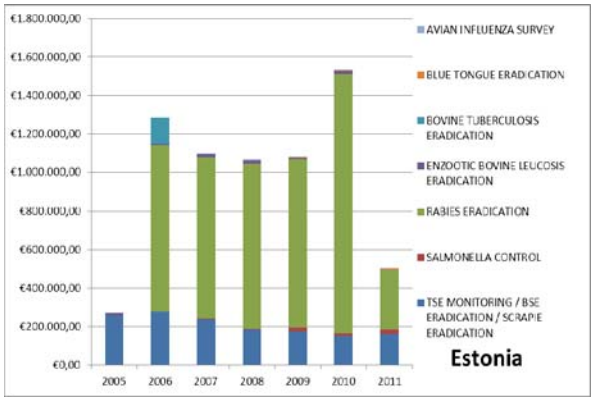


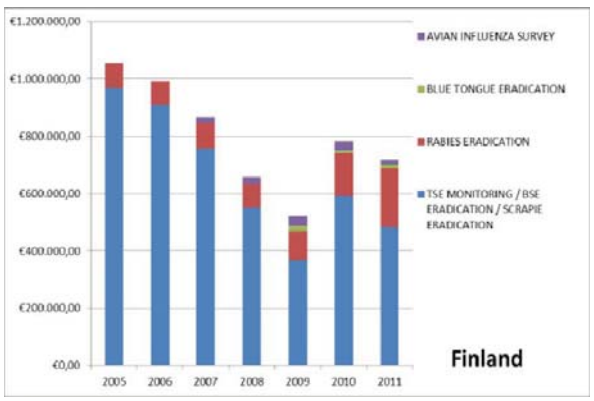


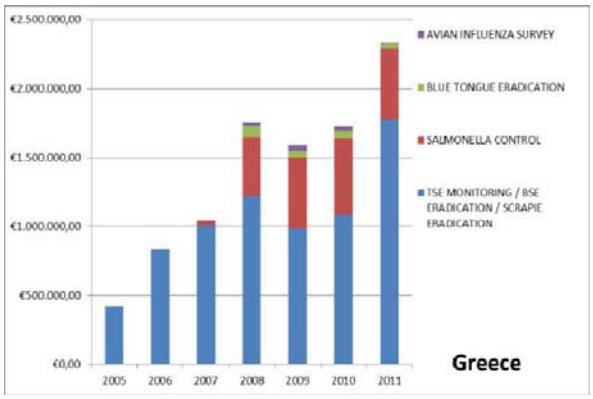








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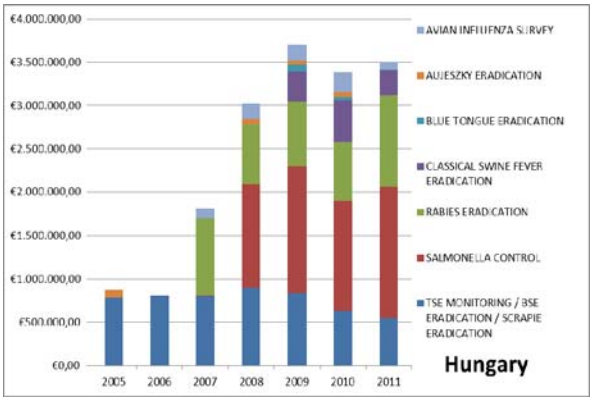
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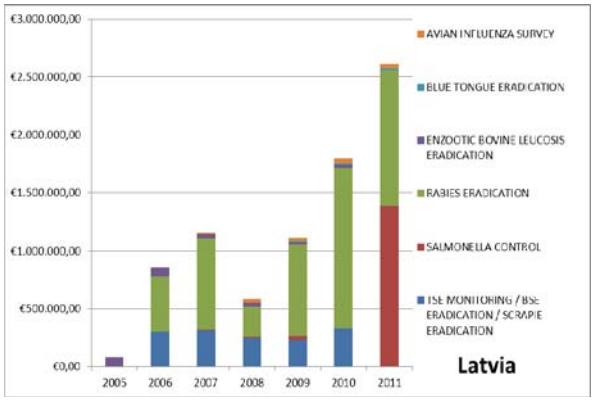
Hungary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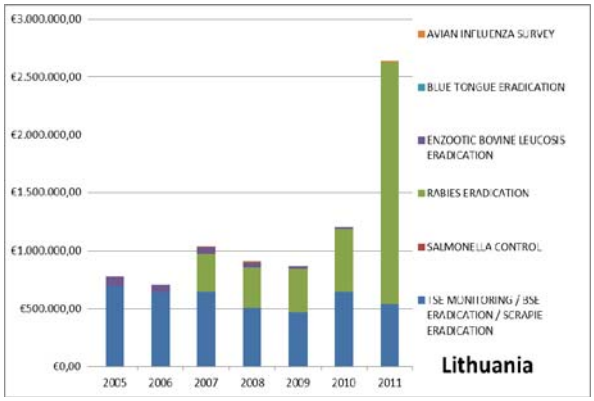
Latvia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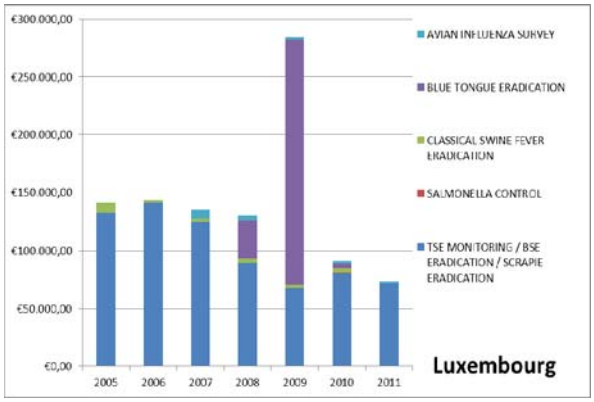
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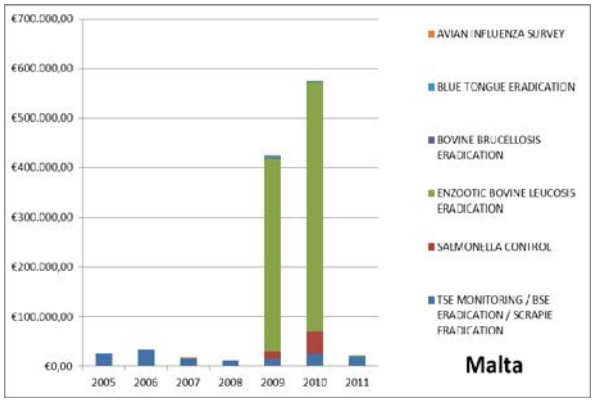
Luxembourg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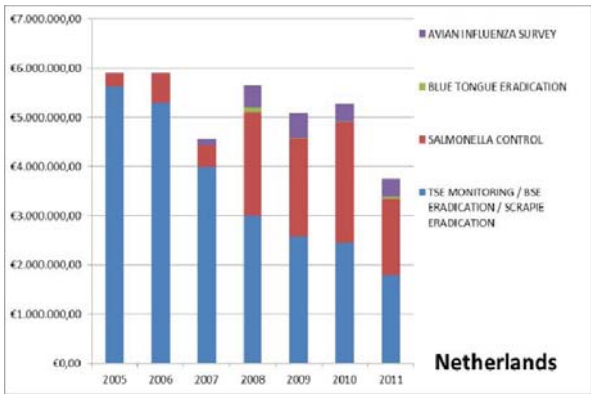
TSE MONITORING / BSE ERADICATION / SCRAPIE ERADICATION
Malta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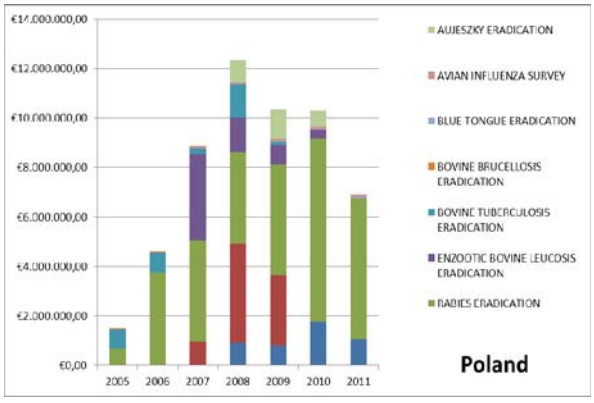
TSE MONITORING / BSE ERADICATION / SCRAPIE ERADICATION
Netherlands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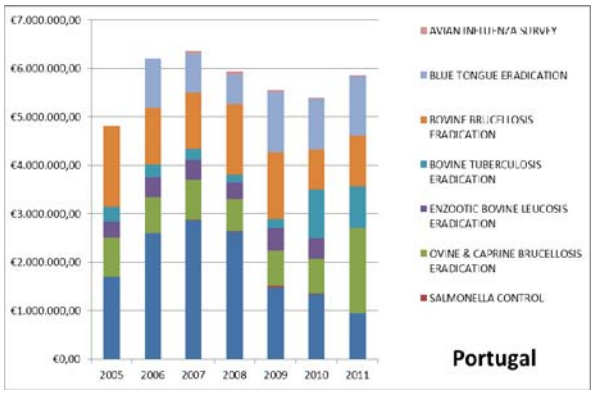
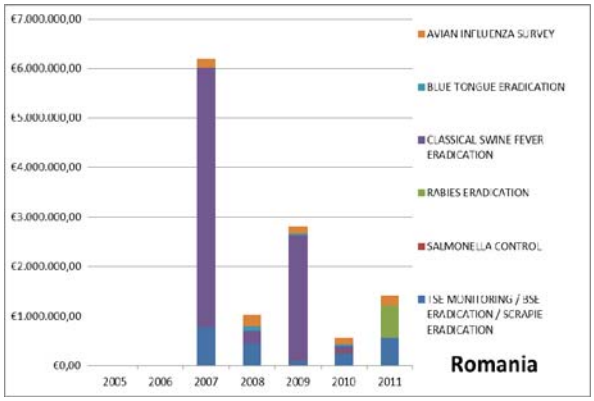
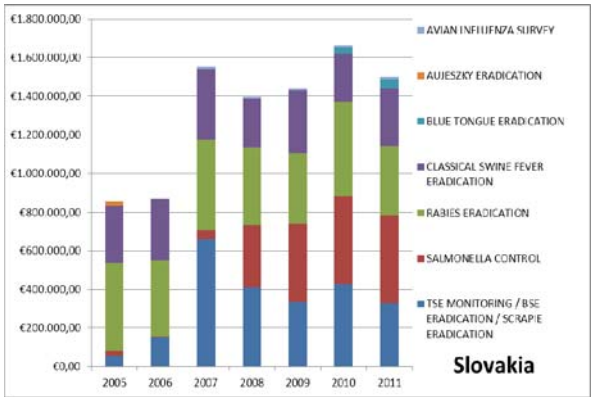
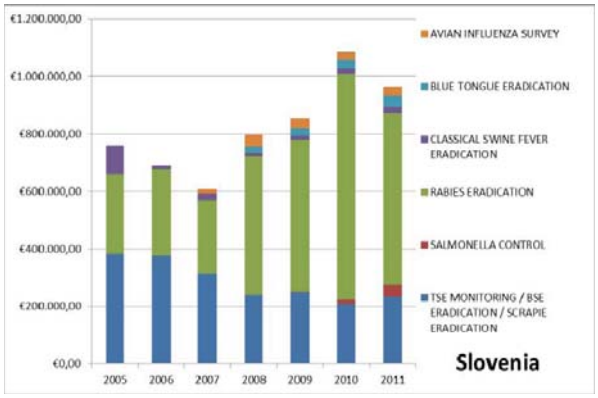
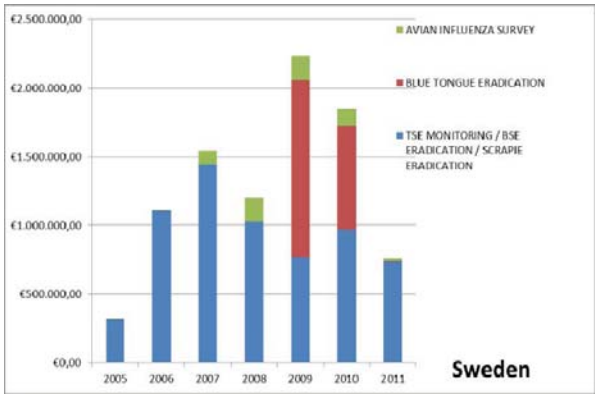
BLUE TONGUE ERADICATION
BOVINE BRUCELLOSIS ERADICATION
BOVINE TUBERCULOSIS ERADICATION
ENZOOTIC BOVINE LEUCOSIS ERADICATION
RABIES ERADICATION
Poland





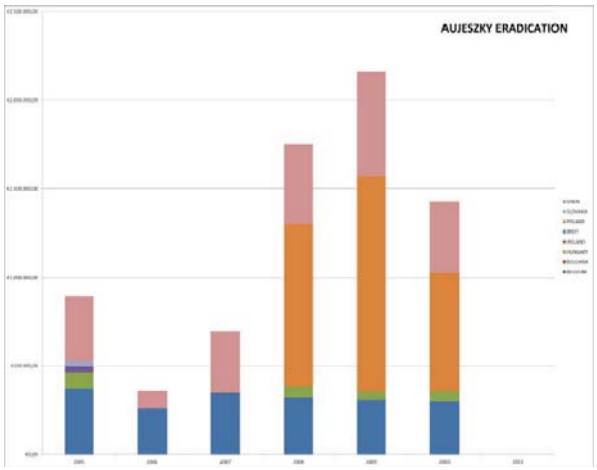


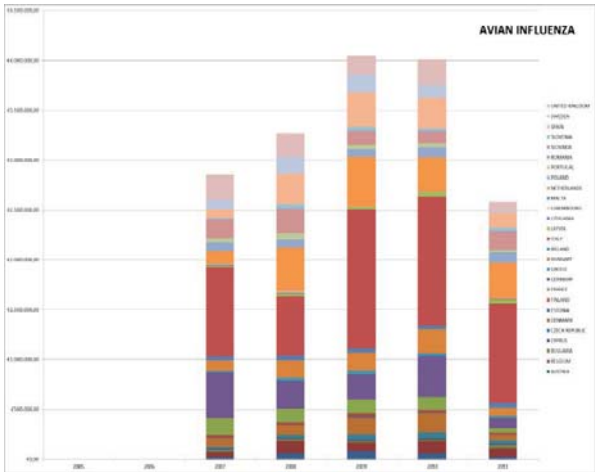


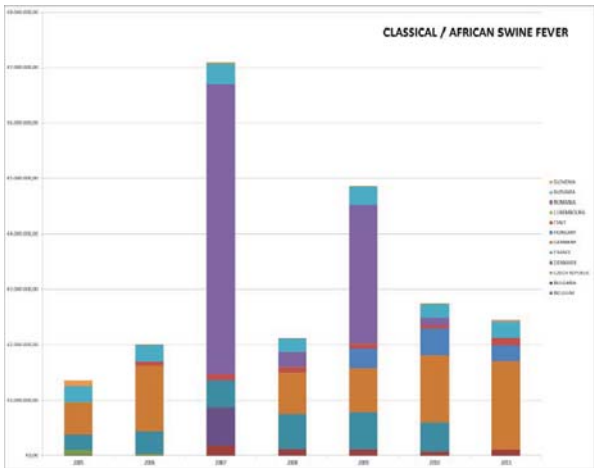


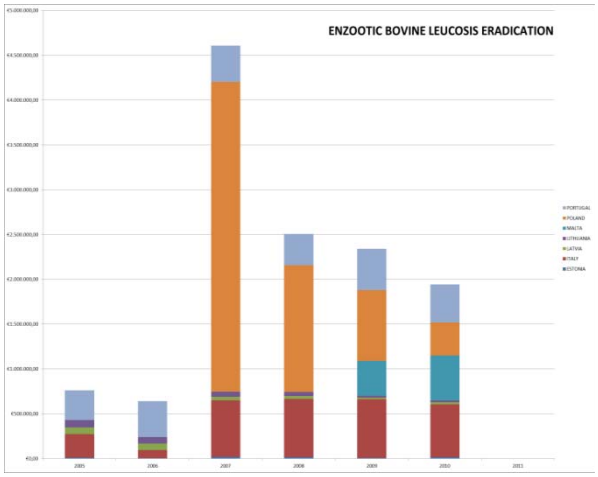
Source: DG Health and Consumers

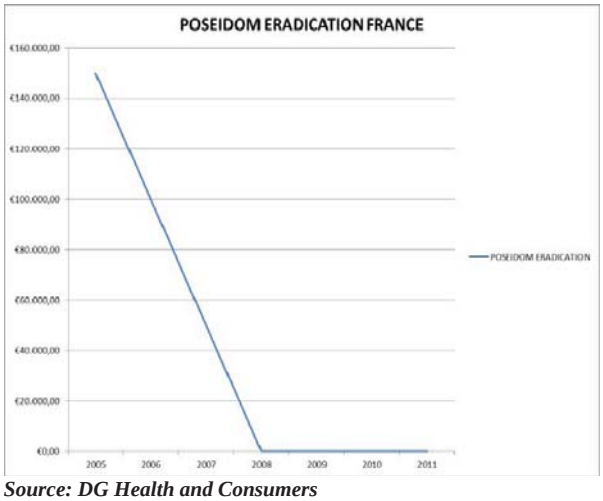
7. CHAPTER VII - EVOLUTION OF FUNDING FOR PROGRAMMES NOT INCLUDED UNDER POINT 4

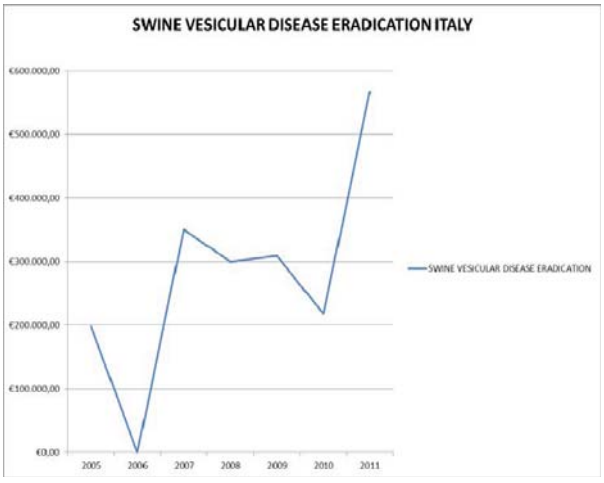












Source: DG Health and Consumers

8. CHAPTER VIII – ECONOMIC FIGURES

Production value (at basic prices) of the four key livestock sector over the years 2005-2011

Cattle

	2005	2006	2007	2008	2009	2010	2011	**2005-2011**
EU-27	29.520,31	29.654,65	30.098,78	30.876,63	28.306,08	28.231,94	31.004,17	**207.692,56**
EU-25	28.904,27	29.099,14						**Millions of euro*

Pigs

	2005	2006	2007	2008	2009	2010	2011	2005-2011
EU-27	29.773,16	31.441,56	29.717,47	32.715,91	31.637,73	30.942,21	34.656,63	220.884,67
EU-25	28.451,90	30.064,33						**Millions of euro*

Sheep and Goats

	2005	2006	2007	2008	2009	2010	2011	2005-2011
EU-27	6.213,83	5.618,07	5.526,06	5.075,37	5.214,73	5.060,90	5.592,07	38.301,03
EU-25	5.940,23	5.359,43						**Millions of euro*

Poultry

	2005	2006	2007	2008	2009	2010	2011	**2005-2011**
EU-27	13.893,83	13.438,45	15.933,97	17.525,11	16.534,99	17.105,30	19.494,26	**113.925,91**
EU-25	13.271,78	12.809,88						**Millions of euro*

Source: Eurostat (Economic accounts for agriculture)

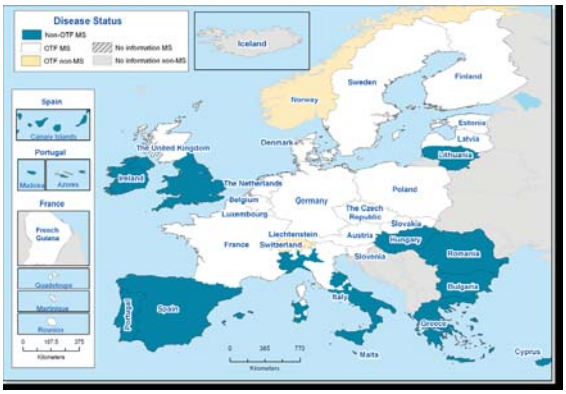
Source: Eurostat

9. CHAPTER IX - STATUS OF EU MSS IN RELATION TO CERTAIN ANIMAL DISEASES AND COUNTRIES OR REGIONS RECOGNISED AS OFFICIALLY FREE FROM CERTAIN ANIMAL DISEASES

Bovine Tuberculosis

Legal basis: CD 2003/467/EC as last by CIDs 2011/277/EU and 2011/675/EU.

Status of countries regarding bovine tuberculosis, 2011

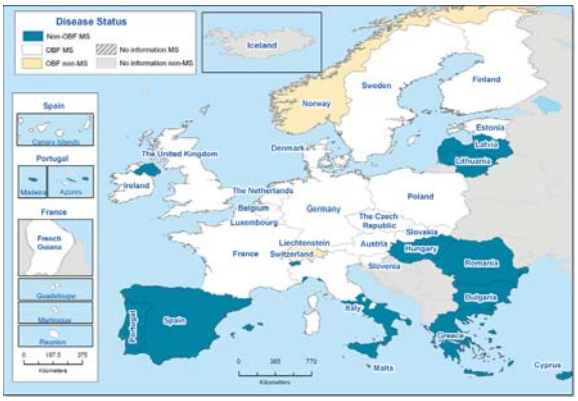


Source: The European Union Summary Report on Trends and Sources of Zoonoses, Zoonotic Agents and Food-borne Outbreaks in 2011 (EFSA and ECDC)

Bovine Brucellosis

Legal basis: CD 2003/467/EC as last amended by CID 2011/277/EU

Status of countries regarding bovine brucellosis, 2011



Source: The European Union Summary Report on Trends and Sources of Zoonoses, Zoonotic Agents and Food-borne Outbreaks in 2011 (EFSA and ECDC)

Ovine and Caprine Brucellosis (*Brucella melitensis*)

Legal basis: CD 93/52/EC as last amended by CID 2011/277/EU.

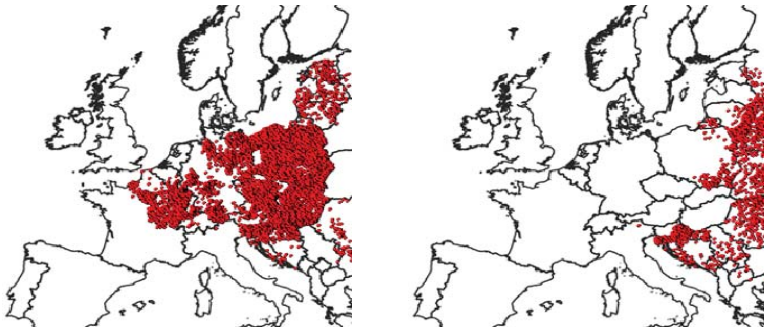
Status of countries regarding ovine and caprine brucellosis, 2011

Source: The European Union Summary Report on Trends and Sources of Zoonoses, Zoonotic Agents and Food-borne Outbreaks in 2011 (EFSA and ECDC)

Rabies

Evolution of rabies cases in wildlife in the EU, 1992 and 2011

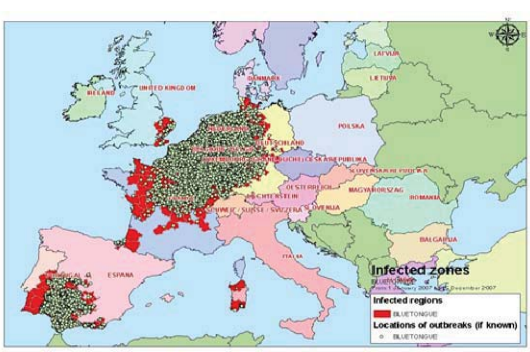
1992 2011



Source: WHO-Rabies Bulletin Europe

Bluetongue

Evolution of Bluetongue outbreaks in the EU, 2007 and 2011



ADNS[9]

[9] ADNS is a reporting system for registration and documentation of a number of individual features on outbreaks of important animal diseases (see Annex II for the list of notifiable animal diseases).

10. CHAPTER X – REFERENCES

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- Food Chain Evaluation Consortium (FCEC), 2011. "Report on the outcome of the EU co-financed animal disease eradication and monitoring programmes in the MS and the EU as a whole: Final Report for DG SANCO";

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- Commission Decision 2009/560/EC approving certain amended programmes for the eradication and monitoring of animal diseases and zoonosis for the year 2009 and amending Decision 2008/897/EC as regards the reallocation of the Community's financial contribution to certain Member States for programmes approved by that Decision and by Decision 2009/560/EC. OJ L 194, 25.7.2009, pp. 56-60.

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Avian Influenza

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- Commission Decision 2007/268/EC of 13 April 2007 on the implementation of surveillance programmes for avian influenza in poultry and wild birds to be carried out in the MS and amending Decision 2004/450/EC. OJ L 115, 3.5.2007, pp. 3–17.

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