

Group 3. Identified problems and research proposals for avian and human health.

Priority diseases: Avian Influenza; Newcastle; West Nile Virus

- 1) Lack of knowledge of the interface between domestic and wild birds (interactions between pathogens, hosts and the environment; biological, ecological and pathogenicity aspects of pathogens and hosts)
 - Re-evaluate government selected sites for disease surveillance in wild birds (change or expand sites)
 - Conduct surveillance on wild birds nesting near poultry farms
 - Expand surveillance to include dead and live wild birds.
 - Expand censuses to include wild birds in direct contact or in the periphery of poultry farms.

- 2) Diagnostic capacity. Availability of results in real time, comprehensive epidemiological diagnostics.
 - Expand diagnostic/laboratory network. Create “triage” labs, with collaboration from universities, research institutes, private sector. Final diagnosis in official government labs.

- 3) Surveillance teams (fixed at sites, regional, continued surveillance and monitoring)
 - Identify and reinforce existing groups.

- 4) Standardizing sample collection, census and diagnostic techniques and procedures.

5) Surveillance and monitoring – When, where, how (clinical and serological).

- Focus at sites identified as priority based on GIS map of poultry operations in country.

6) Public health

- Conduct a serological survey for common avian diseases in people living near “risk” areas, as well as those with occupational exposure
- Training and improvement of backyard poultry holders (families, communities)

- 7) Risk communication – how to communicate critical situations/news to the public
- 8) Availability of information and information networks – centralization, availability and information sharing between local insitutions and internationally.
- **compile and communicate information on public health, wild birds, domestic birds/poultry**