

# Do we have enough resources for clinical surveillance in case of a foot-and-mouth disease epidemic in Denmark?

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# **Objective:**

Determine whether there are sufficient resources for clinical surveillance, in case of a foot-and-mouth disease (**FMD**) epidemic in Denmark.

#### **Procedures:**

#### 1- Model, data and disease spread

The Davis Animal Disease Simulation model was adapted to DTU-DADS to simulate the spread of FMD in Denmark. Farm level and animal movements data were used. A herd may obtain infection throughout animal movements, medium and low risk contacts, markets, or local area spread.

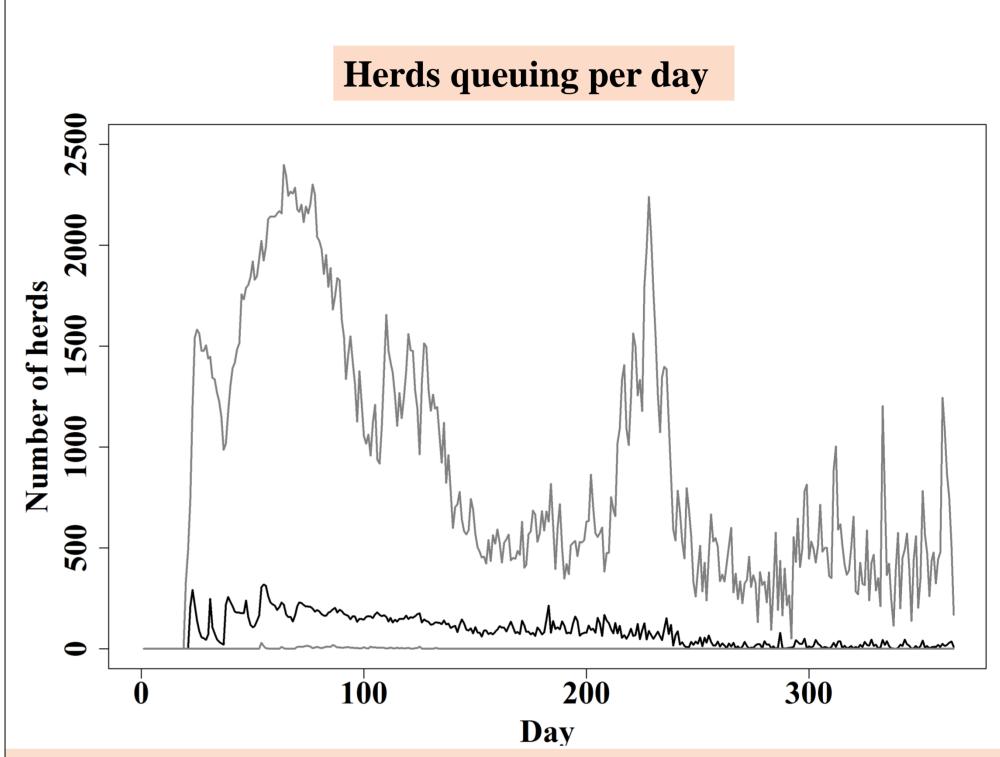
### 2- Surveillance capacity and scenarios

An expert group estimated that in case of an FMD epidemic in Denmark, the daily clinical surveillance capacity will be <u>450</u> herds per day. The model was run with this number representing a default situation and with 3 alternative scenarios, with surveillance capacity of 200, 350, or 600 herds per day.

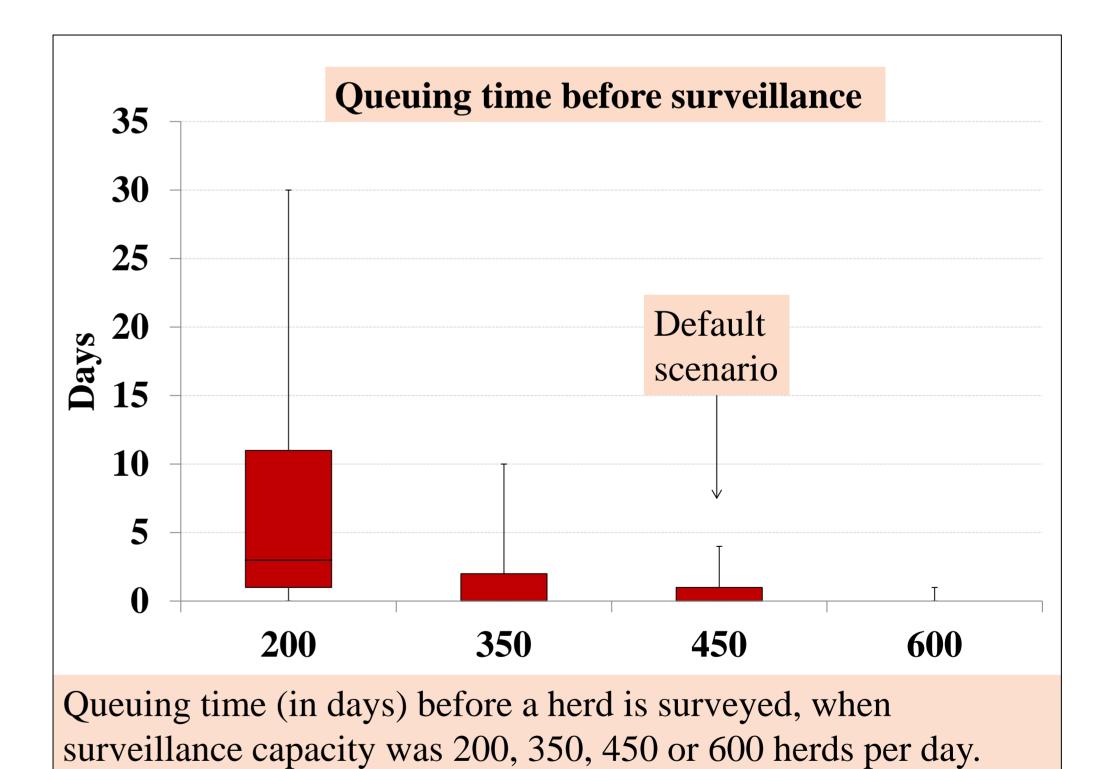
#### **Results:**

Consequences of an FMD outbreak in Denmark using different scenarios for surveillance capacity. Median (5<sup>th</sup> and 95<sup>th</sup> %).

Surveillance capacity (herds/day)		Number of infected herds	Diagnosed herd from surveillance	Total losses (million €)
200	42 (8-116)	39 (4-205)	5 (0-19)	410 (304-817)
350	41 (16-99)	39 (4-191)	5 (0-24)	409 (303-684)
450	42 (8-117)	39 (4-188)	5 (0-26)	409 (303-673)
600	41 (4-184)	39 (4-184)	5 (0-26)	410 (303-670)



Median (Black), 5<sup>th</sup> and 95<sup>th</sup> percentiles (gray) number of herds queuing for surveillance, in the default scenario, where surveillance capacity was 450 herds per day.





# **Conclusions:**

- > There are sufficient resources to survey herds on time.
  - > Fewer resources might result in larger and costlier epidemics in the extreme situations.

