



EUVET mission to Croatia on Peste des petits ruminants (PPR)

(19 - 22 January 2026)

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Terms of References

Providing
on-the-spot
assistance

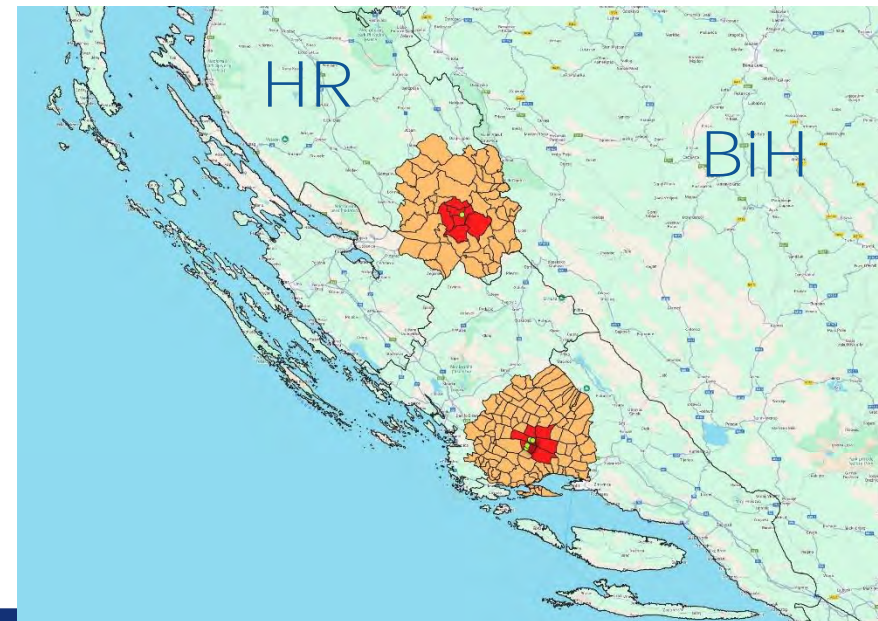
- On technical, managerial and practical PPR aspects.
- On the refinement of the most suitable control and eradication measures for PPR.
- On preparedness and surveillance activities in ovine and caprine.

Epidemiological situation of PPR in Kosovo (as of January 22, 2026)

ADIS	Confirmation date	Sheep	Sheep tested	PCR positive sheep	ELISA positive sheep	Goats	Goats tested	PCR positive goats	ELISA positive goats
2025/1	13.12.2025.	26	26	17	26 (100 %)	/	/	/	/
2025/2	19.12.2025.	41	19	4	18 (95 %)	/	/	/	/
2025/3	24.12.2025.	66	22	1	20 (91 %)	6	6	1	6 (100 %)
2026/1	5.1.2026.	12	5	0	5 (100 %)	18	16	3	16 (100 %)
2026/2	16.1.2026.	19	16	1	7 (44 %)	16	16	0	1

Measures according to the EU legislation.

- Culling of infected flocks
- Standstill measures, 5 km protection zone, 20 km surveillance zone
- Clinical examination and sampling for lab examinations
- Epidemiological tracing



Concrete questions

1. What is the **epidemiological situation** of PPR in Croatia?
2. **When and how** did the PPR virus reached Croatia?
3. Are the **surveillance methods** used sufficient and efficient to reliably and quickly detect PPR infected farms?
4. Are the **control measures** implemented adequate to stop the spread of PPR and which measures should be applied in future to eradicate the disease?



Time schedule and places visited during the mission

19 January: Opening meeting at the Regional Veterinary Authority, Split

20 January: Meeting at the Regional Veterinary Authority, Split
Field visit to first notified PPR case and to suspect farm within the control zone

21 January (morning): Field visit to a suspect farm within the restriction zone where one seropositive animal was detected and under investigation

21 January (afternoon): Final discussions and closing of the meeting at the Regional Veterinary Authority, Split



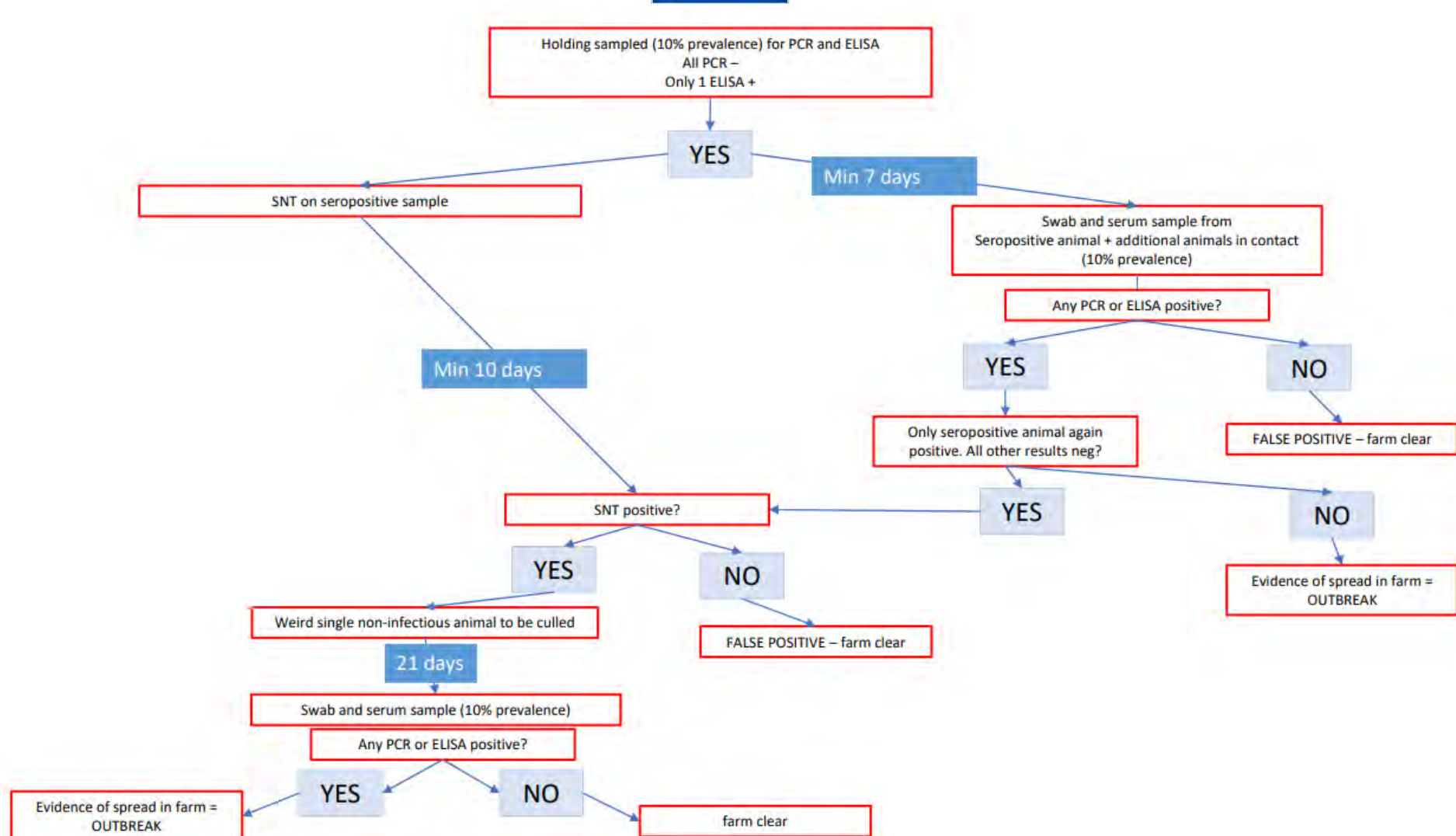
- The infected area is not adjacent to regions where the virus is known to be circulating, nor where there is a known risk of ongoing circulation (e.g., Romania, Albania, Kosovo). Therefore, it can be assumed that the introduction did not occur via spread within the susceptible population (epidemic wave) but rather through (illegal) human activities.
- Illegal animal movements and the illegal trade of animals are primary factors to consider when assessing the causes and routes of PPR spread within the EU. Illegal movements along the border with Bosnia and Herzegovina (BiH) are most likely responsible for the initial case, from which the disease then spread. However, all five positive PPR cases were linked to irregular activities in some way.
- The epidemiological situation of PPR in BiH is currently unknown. This should be clarified as soon as possible in collaboration with the relevant authorities in BiH. An epidemiological link between an infected holding in Croatia and a village in BiH should be prioritized for investigation.
- Based on clinical data, laboratory findings, and case history, it can be assumed that the HRP (high-risk period) was at least 1.5 months, and possibly even longer. The PPR virus was likely already present in southern Croatia by the end of October.
- Regarding the spread of the disease within Croatia, preliminary investigation data suggests that only the two regions currently known to be affected are involved. However, due to poor weather conditions, only about 50% of the sheep and goat flocks in the restricted areas of the northern region (believed to be the first affected) have been inspected. Therefore, further cases of infected flocks cannot be ruled out.



- The region of Croatia south of Lika County, especially the border regions in the south with BiH, should be considered at risk for PPR. This is due to illegal animal movements along the border, the higher density of small ruminants, and the unknown epidemiological situation in BiH.
- None of the five PPR cases were identified due to the observation of typical clinical PPR signs. For the first notified case, Bluetongue (BT) was suspected due to abortions in the flock. However, after BT was excluded, PPR was confirmed through differential diagnosis performed as routine during BT suspicions. The other four outbreaks were detected through epidemiological tracing, compulsory testing within the control zone, or irregularities reported on farms. In all confirmed cases, clinical signs—aside from the abortions—were mild to absent, not raising suspicion of PPR.
- We are dealing with a mild to subclinical course of PPR, which makes the disease particularly difficult to detect. No fatalities were reported in any of the affected herds (other than the abortions).
- Farms where irregularities (e.g., concerning animal numbers, presence of unregistered animals, or animal movements) have been or are detected represent a significant PPR risk in Croatia. These farms should systematically be sampled and tested for PPR not only through clinical examination but also with serological and virological tests, both within and outside of the surveillance zones.
- During large-scale investigations in the surveillance and control zones, individual seropositive animals were found on some farms (singleton reactors). However, there was no indication of a PPR infection, either clinically or epidemiologically.



- In the area considered to be at higher risk (south of Lika County, border area with BiH), an enhanced active surveillance program should be implemented in this region as soon as possible, taking into account the disease's detectability in the Croatian context (sampling done systematically, focusing on farms where clinical or epidemiological suspicion has been raised and on farms where irregularities are noted).
- The protection zones should be adjusted (enlarged) following the detection of new outbreaks.
- The single seropositive reactors must be further investigated using the appropriate procedures, including additional laboratory testing and field sampling as recommended by the EURL-PPR. Laboratory testing includes the seroneutralization test, which could be quickly implemented by the NRL of Croatia with the support of the EURL-PPR, as the NRL has the experience and necessary equipment to do so (decision tree for singleton reactors to be further adapted for use across EU).
- It is recommended that the epidemiological situation of PPR on the other side of the border in BiH be clarified as quickly as possible in cooperation with the BiH authorities, starting with the region where an epidemiological link with PPR outbreaks in Croatia has been identified.





The EU-VET team would like to thank all colleagues from Croatia for their support and help before, during and after the mission

The working atmosphere during the mission was very good. The colleagues gave us all their support and help to make the mission fruitful.