



Zoonoses Near and Far

Foreign Animal and Emerging Disease (FAED) Awareness Course

June 10, 2013

Benjamin Anderson, MPH

M. Salah Uddin Khan, DVM, MPH

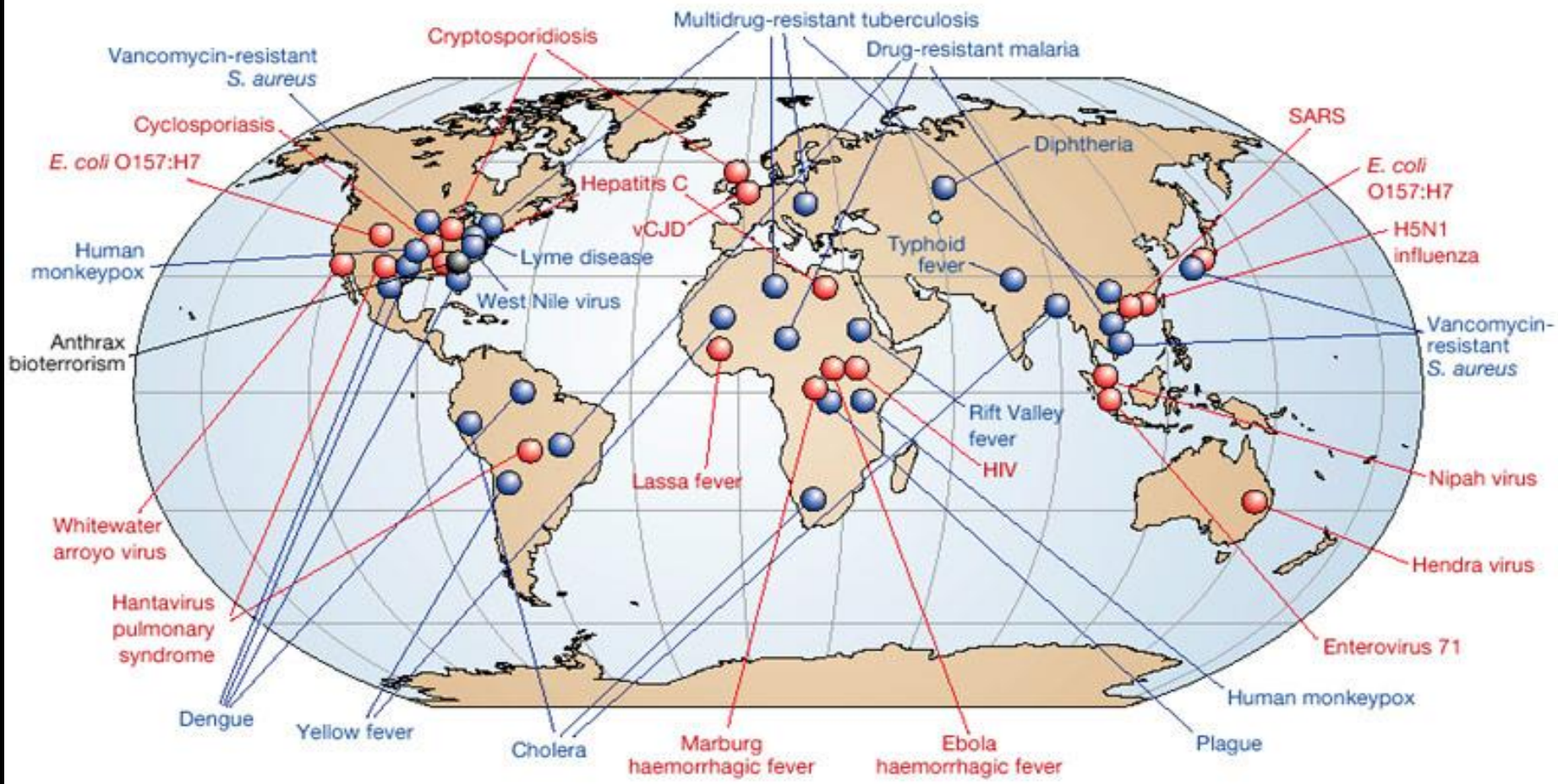
Lecture Outline

- **Zoonotic disease concepts and factors of Emergence**
- **Zoonotic Disease Examples**
- **One Health Approach**

Key Terms

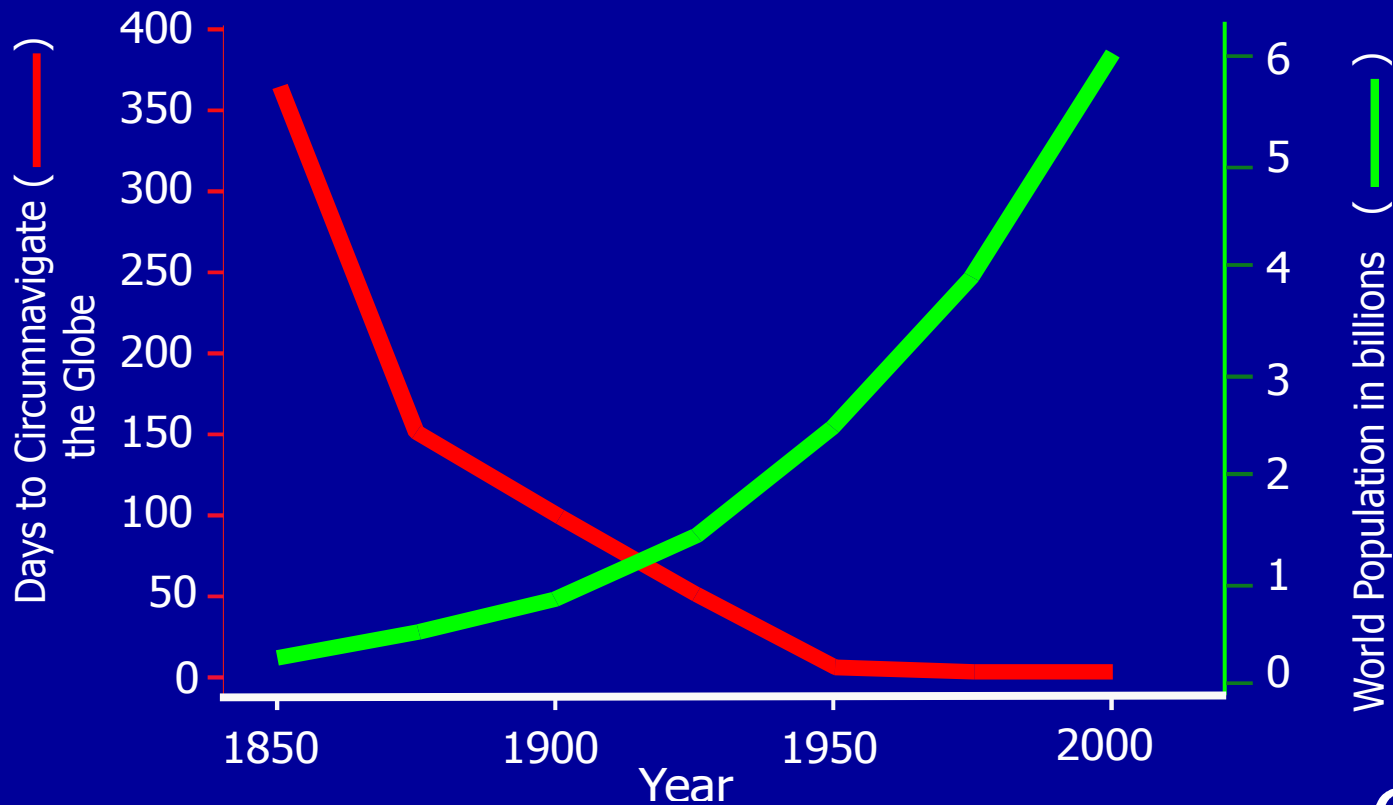
- **Zoonoses** – infectious diseases transmissible from animals to humans and vice versa
- **Zooanthroponoses** - A zoonosis normally maintained by humans but that can be transmitted to other vertebrates (amebiasis to dogs)
- **Anthropozoonoses** - A zoonosis maintained in nature by animals and transmissible to humans; (rabies, brucellosis)
- **Saprozoonoses** – diseases that do not require a vertebrate reservoir because of their occurrence in water, in soil, on plants, or in food or fodder, whence they are transmitted to vertebrates (including man)

- Emerging infectious diseases infectious diseases whose incidence in humans has increased in the past 2 decades or threatens to increase in the near future. They include:
 - New infections resulting from changes or evolution of existing organisms
 - Known infections spreading to new geographic areas or populations
 - Previously unrecognized infections appearing in areas undergoing ecologic transformation
 - Old infections reemerging as a result of antimicrobial resistance in known agents or breakdowns in public health measures



Red represents newly emerging diseases; blue, re-emerging / resurging diseases; black, a 'deliberately emerging' disease from *Nature* 430, 242-249(8 July 2004)

Speed of Global Travel in Relation to World Population Growth



From: Murphy and Nathanson. Semin. Virol. 5, 87, 1994

SARS OUTBREAK, 2003: Rapid spread worldwide by movement of people



Factors Influencing Spread of Infectious Diseases

- | | |
|-------------------------------------|---------------------------------------|
| • Microbial adaptation and change | • Technology and industry |
| • Human susceptibility to infection | • Breakdown of public health measures |
| • Climate and weather | • Poverty and social inequality |
| • Changing ecosystems | • War and famine |
| • Human demographics and behavior | • Lack of political will |
| • Economic development and land use | • Intent to harm |
| • International travel and commerce | |

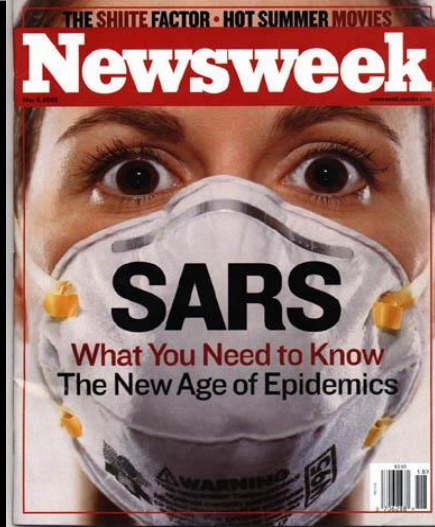
Group I—Pathogens Newly Recognized in the Past Two Decades

Acanthamebiasis
Australian bat lyssavirus
Babesia, atypical
Bartonella henselae
Ehrlichiosis
Encephalitozoon cuniculi
Encephalitozoon hellem
Enterocytozoon bieneusi
Helicobacter pylori
Henipah viruses
Hepatitis C
Hepatitis E
Human herpesvirus 8
Human herpesvirus 6
Lyme borreliosis
Parvovirus B19

List of NIAID Emerging & Re-emerging Diseases

Group II—Re-emerging Pathogens

Enterovirus 71
Clostridium difficile
Mumps virus
Streptococcus, Group A
Staphylococcus aureus



SARS



Swine influenza



Monkeypox



Hendra virus



Nipah virus



Ebola virus

It has been estimated that **75%** of emerging infectious diseases in humans are due to zoonotic pathogens and that zoonotic pathogens are **twice as likely** to be associated with emerging diseases than are non-zoonotic pathogens



[comments on this story](#)

Stories by subject

- [Lab life](#)
- [Microbiology](#)
- [Health and medicine](#)

Stories by keywords

- [Viruses](#)
- [Monkeys](#)
- [Zoonotic](#)
- [Adenovirus](#)

This article elsewhere



[Blogs linking to this article](#)



[Add to Connotea](#)



[Add to Diigo](#)



[Add to Facebook](#)



[Add to Newsvine](#)



[Add to Del.icio.us](#)

Published online 14 July 2011 | Nature | doi:10.1038/news.2011.416

News

Respiratory virus jumps from monkeys to humans

Adenovirus remained infectious after crossing species barrier.

Zoe Cormier

A class of virus has for the first time been shown to jump from animals to humans — and then to infect other humans.

The virus is described in *PLoS Pathogens* today¹. The team that discovered it might also have found the first human to be infected: the primary carer for a colony of titi monkeys (*Callicebus cupreus*) that suffered an outbreak.

The culprit is an adenovirus, one of a class of viruses that cause a range of illnesses in humans, including

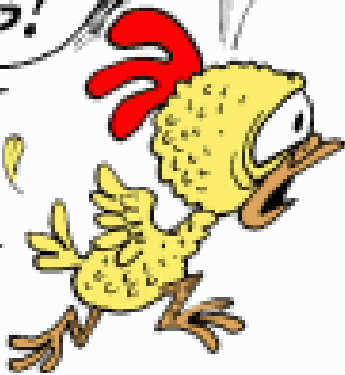


A novel adenovirus, named TMAdV (titi monkey adenovirus), infected both a titi monkey colony and a human scientist and her family.

Photograph courtesy of Kathy West

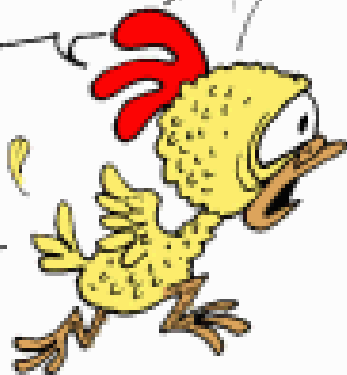
1960s

THERE'S AN
ICE AGE
COMING!



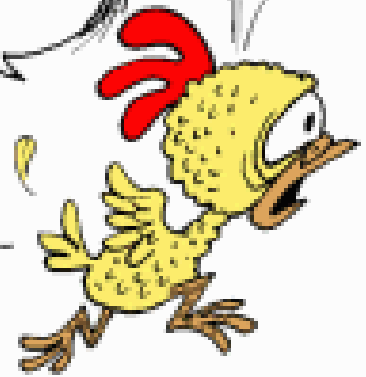
1970s

WE'RE GOING
TO BE HIT BY
AN ASTEROID!



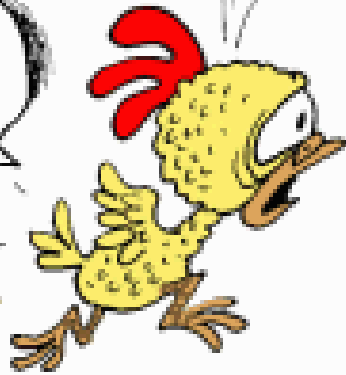
1980s

GLOBAL
WARMING!



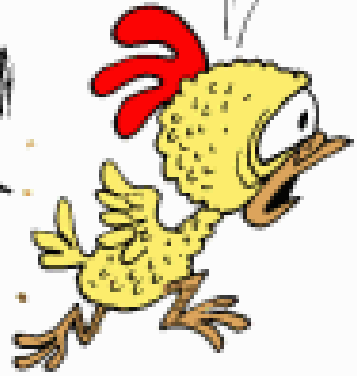
1990s

Y2K!



2000s

BIRD
(COUGH!)
FLU!





I'M HAVING
TROUBLE TAKING
THE NEW GUY
SERIOUSLY...

Cam OTTAWA CITIZEN
Cartoonists.com
http://cartoonists.com

SWINE
FLU

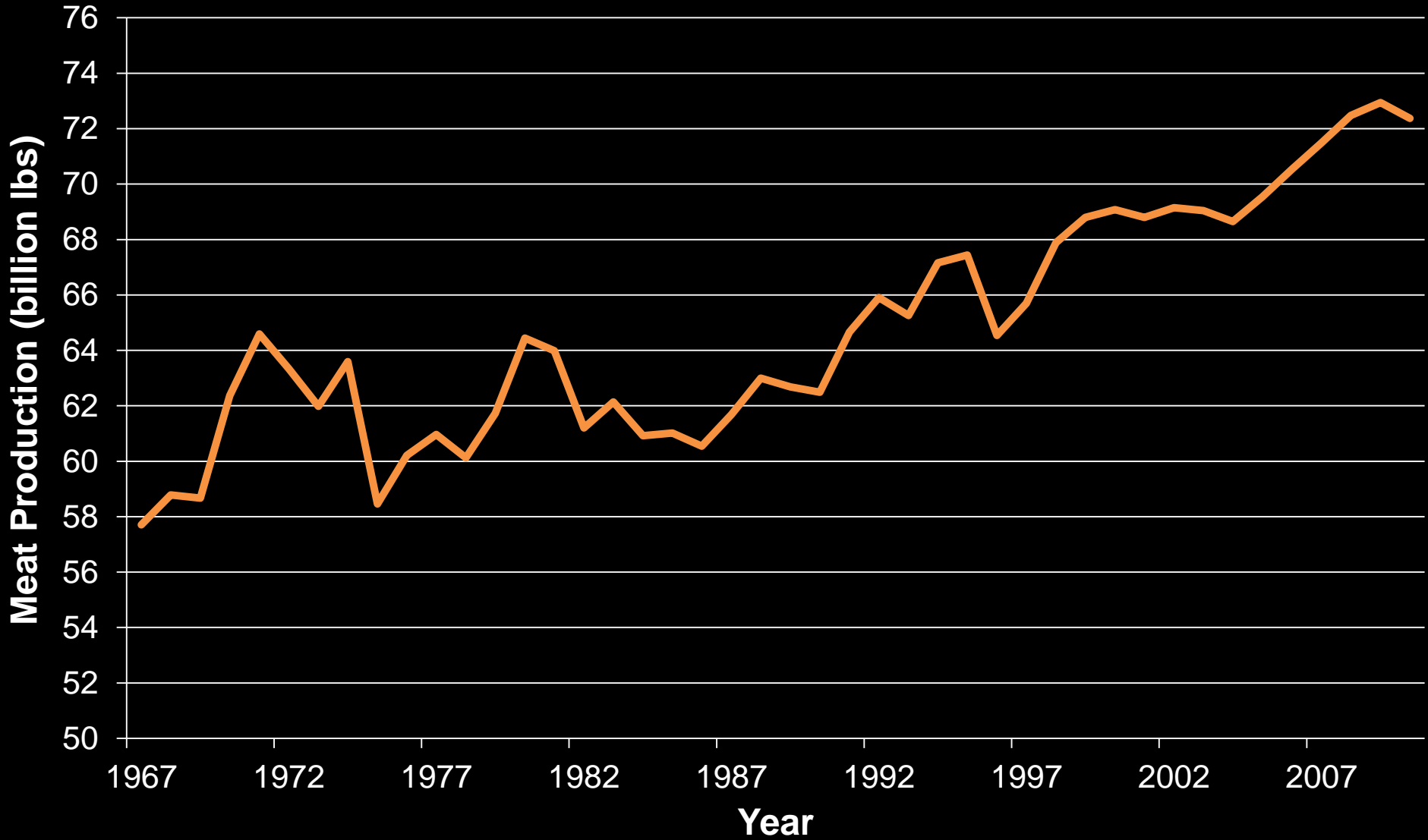
NEWLY ARRIVED
TOURIST
FROM....



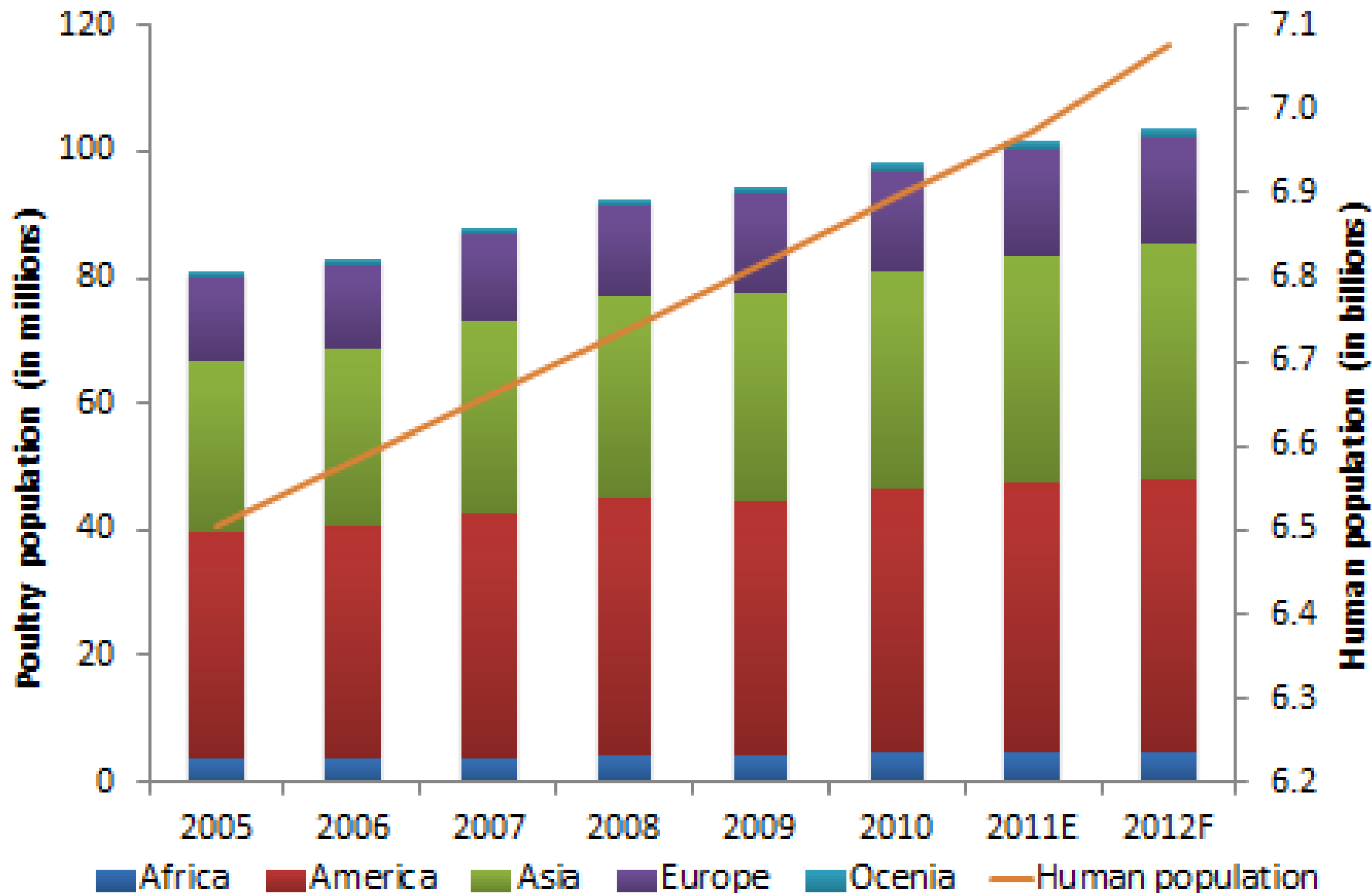
WISIN 09
MONTRE OL
THE GORITE

Meat Animal Production in the United States

(Cattle/Calves, Hogs/Pigs, Sheep/Lambs)



Global poultry meat production by regions



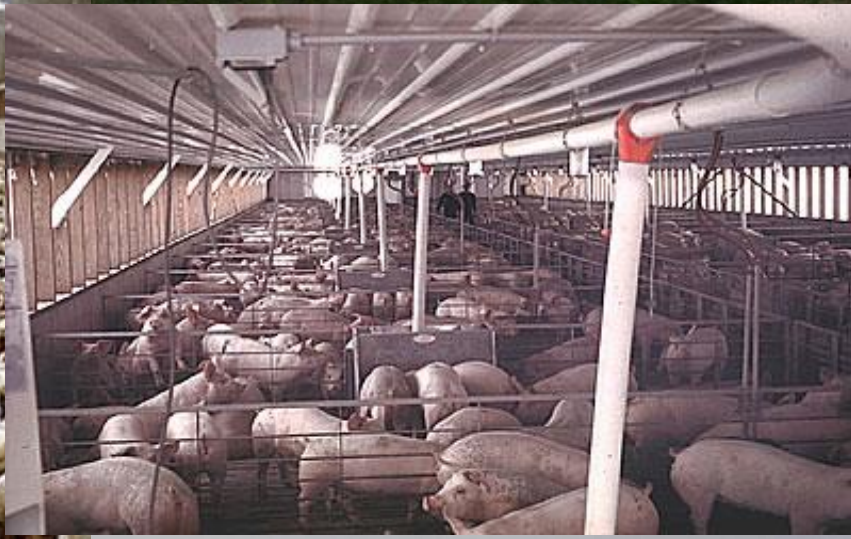
E=Estimated, F=Forecast

[Source: FAO]¹²

Family Farm



Industrial Farming

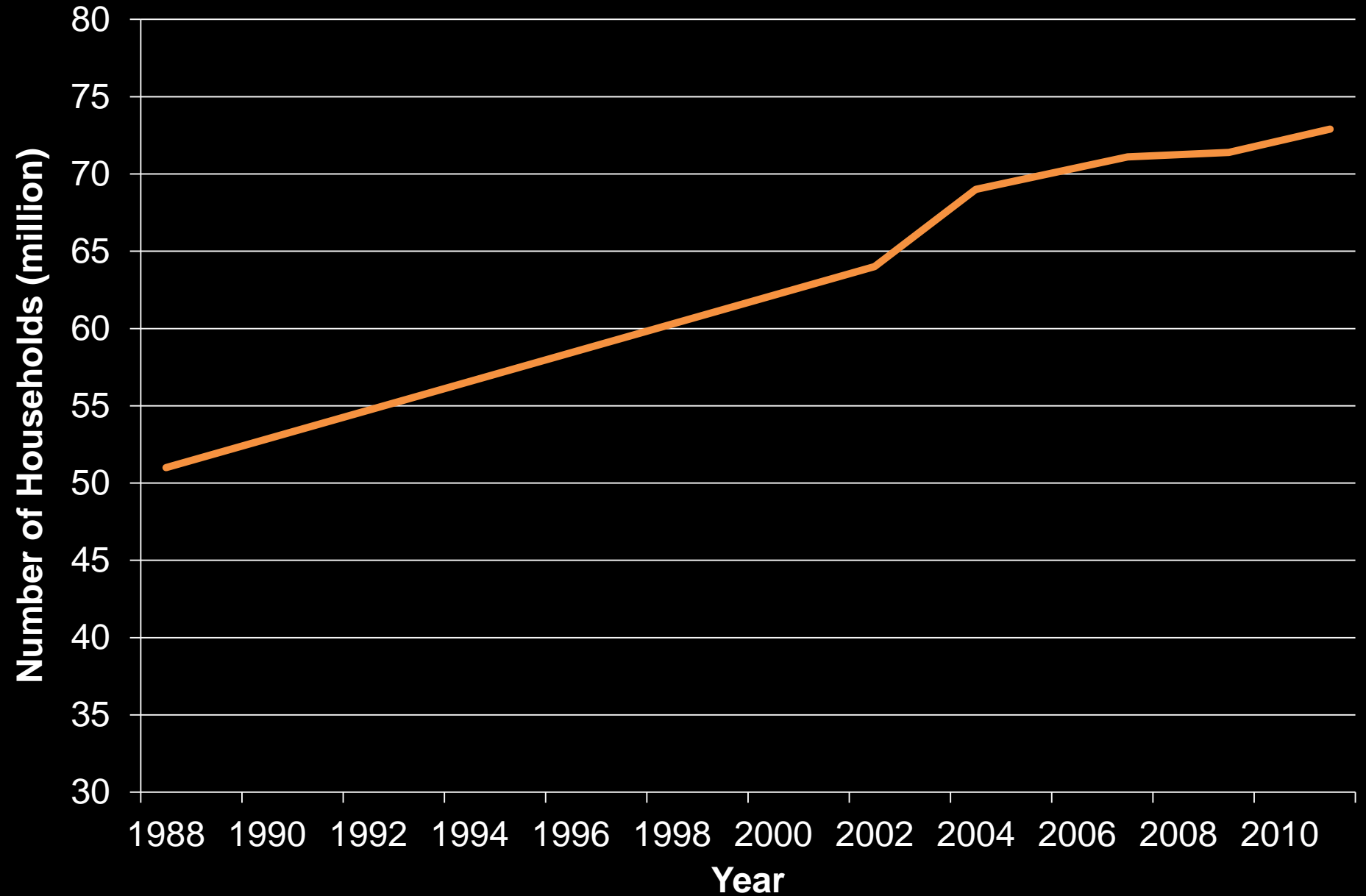


US Animal Worker Projections

| Occupational Title | SOC Code | 2010 | 2020 |
|--|--------------|----------------|------------------|
| Butchers and other meat, poultry, and fish processing workers | 51-3020 | 397,100 | 413,900 |
| Animal care and service workers | 39-2000 | 220,400 | 265,900 |
| Veterinary technologists and technicians | 29-2056 | 75,000 | 108,100 |
| Veterinary assistants and laboratory animal caretakers | 31-9096 | 75,200 | 90,240 |
| Veterinarians | 29-1131 | 59,700 | 79,400 |
| Farmworkers, Farm, Ranch, and Aquacultural Animals | 45-2093 | 31,880 | 31,880 |
| Zoologists and wildlife biologists | 19-1023 | 17,440 | 20,928 |
| Zoologists and wildlife biologists | 19-1023 | 17,440 | 20,928 |
| Animal Control Workers | 33-9011 | 15,500 | 17,300 |
| | Total | 909,660 | 1,048,576 |

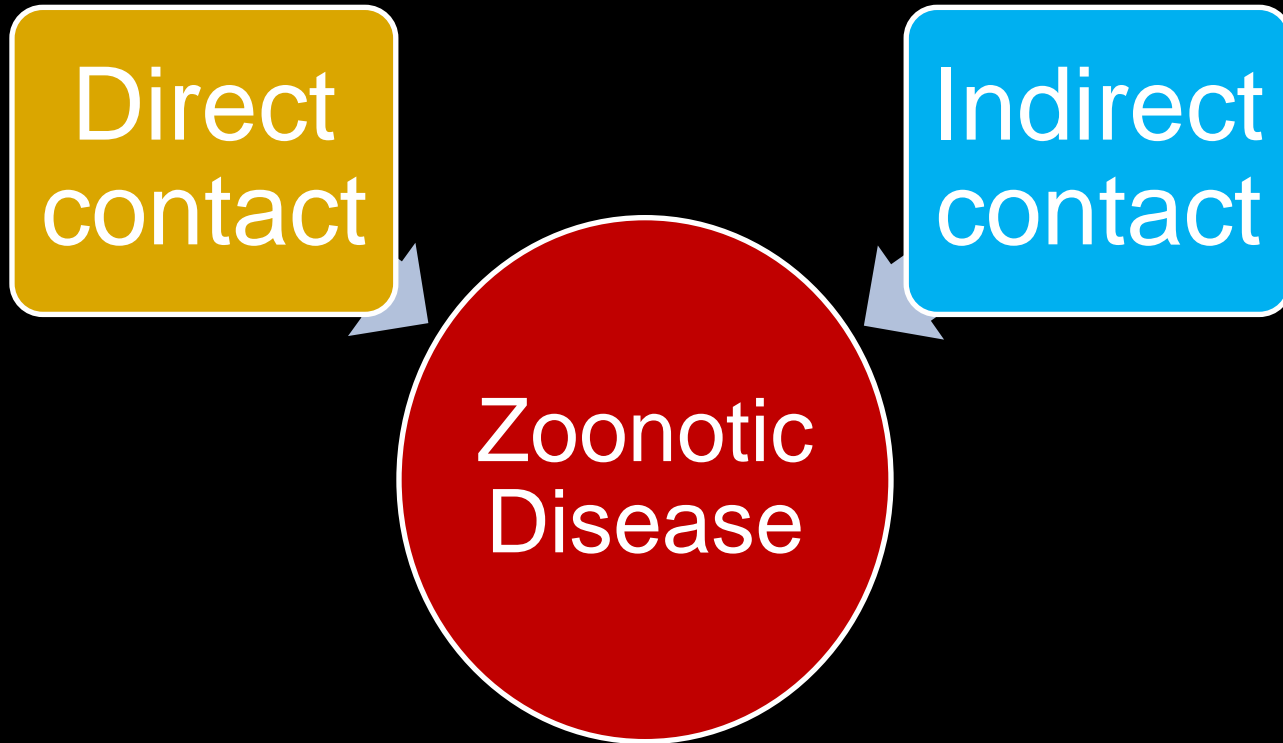
Adapted from Bureau of Labor Statistics and O*NET OnLine March 10, 2012

Number of US households owning at least one pet



Source: American Pet Products Association (APPA) National Pet Owners Survey

Zoonotic Pathogen Transmission



The Well-Traveled Salad



LETTUCE

Canada, Chile, Dominican Republic, Mexico, Peru, USA



CUCUMBERS

Canada, Honduras, India, Mexico, Spain, USA



FETA CHEESE

Canada, Denmark, Egypt, Germany, Greece, Israel, Italy, Turkey, UK, USA



VINAIGRETTE

Argentina, Brazil, Canada, Chile, China, France, Germany, Greece, India, Indonesia, Italy, Mexico, Morocco, Peru, Portugal, Spain, Thailand, Tunisia, Turkey, USA, Vietnam



OLIVES

Greece, Israel, Mexico, Spain, USA



SPROUTS

Argentina, Australia, Bangladesh, Canada, China, Egypt, France, India, Morocco, Nepal, Pakistan, South Africa, Spain, Turkey, USA



MANDARIN ORANGES

Israel, Mexico, Morocco, South Africa, Spain



CROUTONS

Argentina, Australia, Brazil, Canada, China, France, India, Mexico, Netherlands, Poland, Russia, Switzerland, Uruguay, USA, Vietnam



TOMATOES

Canada, Dominican Republic, Holland, Israel, Italy, Mexico, USA



ONIONS

Canada, China, Germany, India, USA



The Well-Traveled Salad. Do You Know Where Your Food Has Been?

As consumers, many of us fail to recognize that even our domestic and local food supplies are part of a global network. The daily activity of consuming food directly links our health as humans to the health of crops and produce, food animals, and the environments in which they are produced.



A "One Health" approach to food safety—bringing together expertise and resources from the clinical, veterinary, wildlife health, and ecology communities—has the potential to reveal the sources, pathways, and factors driving the outbreaks of foodborne illness and possibly prevent them from occurring in the first place.

NOTE: Countries are listed in alphabetical order and not by volume of export.

Foodborne Outbreaks in U.S.

Table 3. Top five pathogens causing domestically acquired foodborne illnesses resulting in hospitalization

| Pathogen | Estimated annual number of hospitalizations | 90% Credible Interval | % |
|----------------------------------|---|-----------------------|----|
| <i>Salmonella</i> , nontyphoidal | 19,336 | 8,545–37,490 | 35 |
| Norovirus | 14,663 | 8,097–23,323 | 26 |
| <i>Campylobacter</i> spp. | 8,463 | 4,300–15,227 | 15 |
| <i>Toxoplasma gondii</i> | 4,428 | 3,060–7,146 | 8 |
| <i>E. coli</i> (STEC) O157 | 2,138 | 549–4,614 | 4 |
| Subtotal | | | 88 |

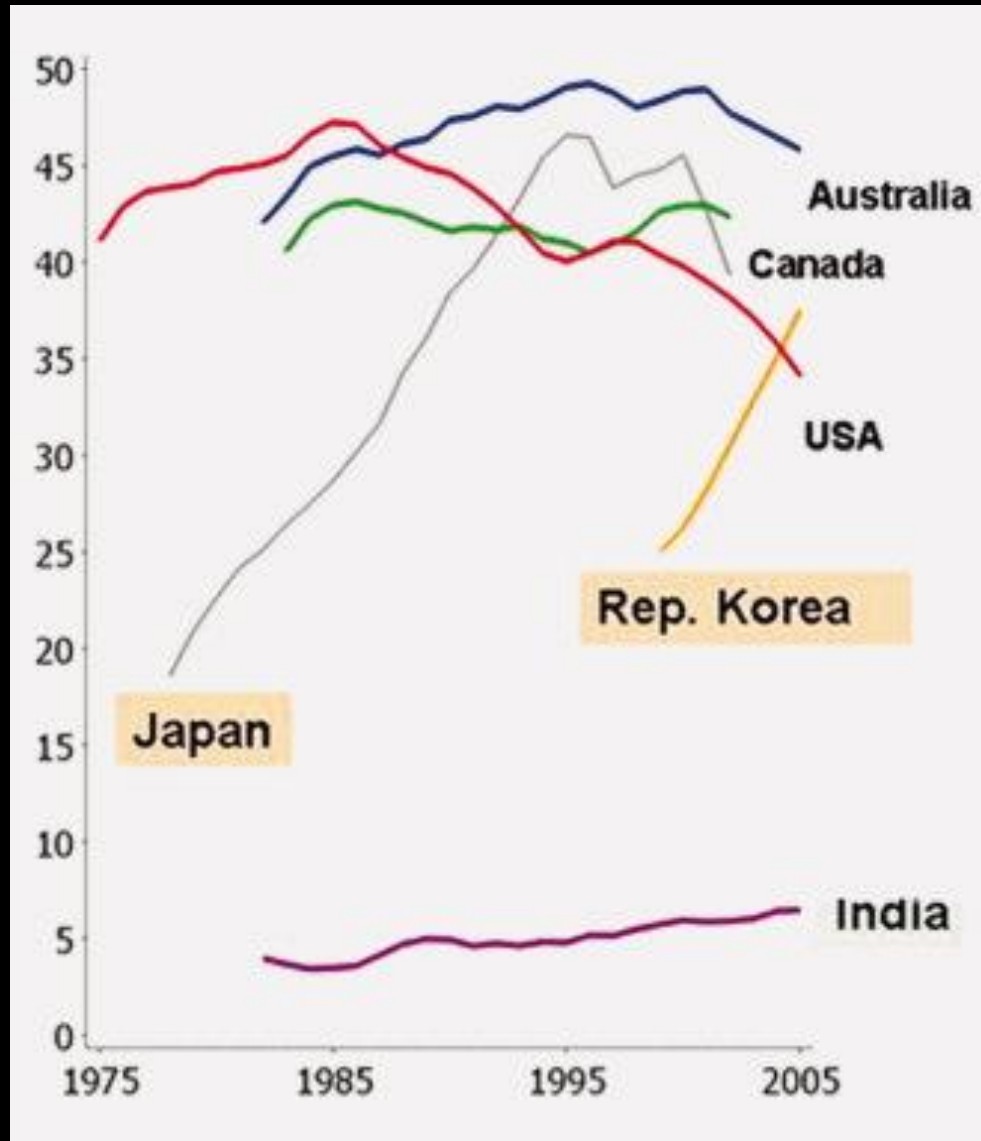
Red meat consumption and cancer: reasons to suspect involvement of bovine infectious factors in colorectal cancer

Harald zur Hausen

Deutsches Krebsforschungszentrum, Im Neuenheimer Feld 280, 69120 Heidelberg, Germany

An increased risk for colorectal cancer has been consistently reported for long-time consumption of cooked and processed red meat. This has frequently been attributed to chemical carcinogens arising during the cooking process of meat. Long-time fish or poultry consumption apparently does not increase the risk, although similar or higher concentrations of chemical carcinogens were recorded in their preparation for consumption. The geographic epidemiology of colorectal cancer seems to correspond to regions with a high rate of beef consumption. Countries with a virtual absence of beef in the diet (India) or where preferably lamb or goat meat is consumed (several Arabic countries) reveal low rates of colorectal cancer. In China, pork consumption has a long tradition, with an intermediate colorectal cancer rate. In Japan and Korea, large scale beef and pork imports started after World War II or after the Korean War. A steep rise in colorectal cancer incidence was noted after 1970 in Japan and 1990 in Korea. The consumption of undercooked beef (*e.g.*, shabu-shabu, Korean yukhoe and Japanese yukke) became very popular in both countries. The available data are compatible with the interpretation that a specific beef factor, suspected to be one or more thermoresistant potentially oncogenic bovine viruses (*e.g.*, polyoma-, papilloma- or possibly single-stranded DNA viruses) may contaminate beef preparations and lead to latent infections in the colorectal tract. Preceding, concomitant or subsequent exposure to chemical carcinogens arising during cooking procedures should result in increased risk for colorectal cancer synergistic with these infections.

Infectious Disease and Cancer?



Reverse Zoonoses (anthropozoonoses)

- 1990 – *Giardia duodenalis* & sheep
- 1999 – MRSA & horses
- 2004 – Human enteric parasites & pet macaques
- 2004 - Human waterborne parasites & zebra mussels
- 2007 - *Cryptosporidium parvum* & cattle
- 2008 - *Candida albicans* & nonmigratory wildlife
- 2009 - *Giardia duodenalis* & colobus monkeys
- 2010 - Pandemic H1N1 & pigs
- 2010 – Pandemic H1N1 & turkeys
- 2010 – Paramyxovirus & primates
- 2012 - *Escherichia coli* clone O25:H4-ST131 & dogs
- 2012- *Pseudomonas aeruginosa* & a cat

Examples of Zoonoses

- Influenza virus

| | |
|----------|---------------|
| Domestic | International |
|----------|---------------|
- Henipa viruses

| | |
|--|---------------|
| | International |
|--|---------------|
- Lyme disease

| | |
|--|----------|
| | Domestic |
|--|----------|

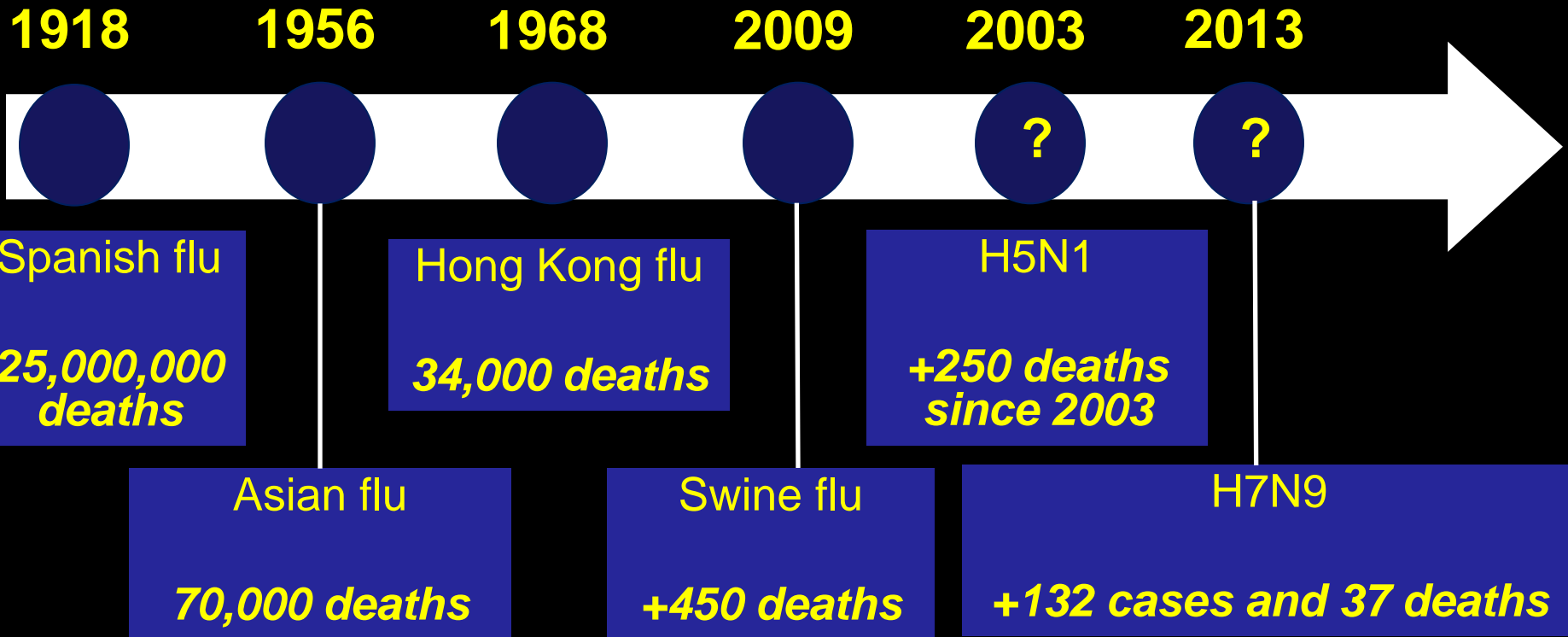
Examples of Zoonoses

- Influenza virus

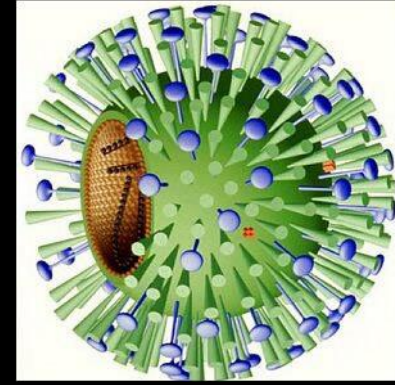
Domestic

International

Pandemic influenza timeline



Influenza Transmission



- Influenza is highly infectious and easily transmitted.
- The virus spreads via
 - ✓ Direct contact with secretions
 - ✓ Large respiratory droplets (coughing, sneezing, talking, 6 feet radius)
 - ✓ Small respiratory droplets (aerosol transmission)*
 - ✓ Indirect contact (fomites)
- Incubation is from 1-4 days

*Aerosol transmission is subject of much current debate

<http://pandemicflu.gov/plan/maskguidancehc.html#airborne>

Influenza Transmission Among Humans



- Adults typically are infectious from the day before symptoms begin through approximately 5 days after illness onset.
- Children can be infectious for >10 days, and young children can shed virus for ≤6 days before their illness onset.
- Severely immunocompromised persons can shed virus for weeks or months.
- Virus can live on non-porous surfaces for 24-48 hrs

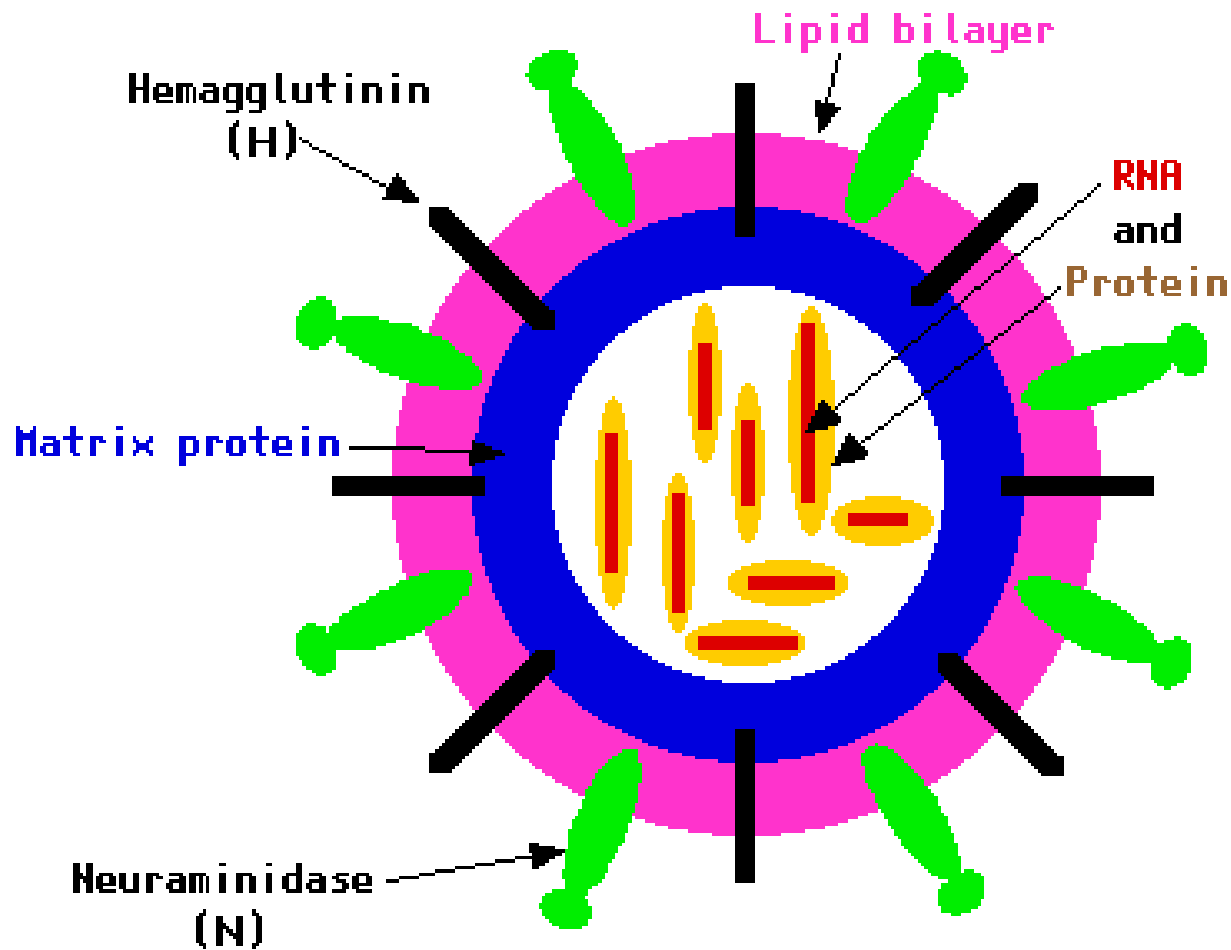
Influenza Transmission Among Birds



- **Birds that survive avian influenza virus (AIV) infections excrete viruses for up to 10 days after infection**
(www.who.int/mediacentre/factsheets/avian_influenza/en/)
- **Rodents, insects (including flies) and wild birds (like sparrows) may act as vectors for AIV**
(www.aphis.usda.gov/lpa/pubs/fsheet_faq_notice/faq_ahai.html)
- **AIV has been cultured from water for up to 100 days**
(Avian Dis. 1990 Apr-Jun;34(2):412-8)
- **AIV can survive in manure for up to 105 days.**
(www.vetmed.ucdavis.edu/vetext/INF-PO_AI.html)
- **AIV have been cultured from poultry houses for up to 100 days after depopulation.**
(www.nwhc.usgs.gov/pub_metadata/field_manual/chapter_22.pdf)

**How is zoonotic transmission
associated?**

17 H types – types 1, 2, and 3 established in man

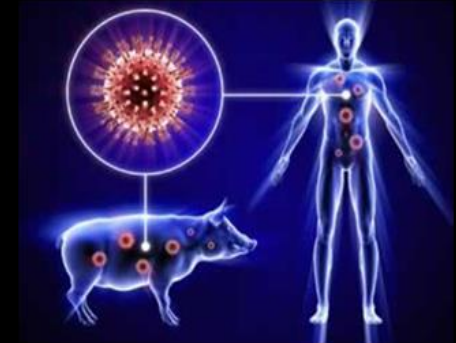


9 N types – types 1 & 2 found in man

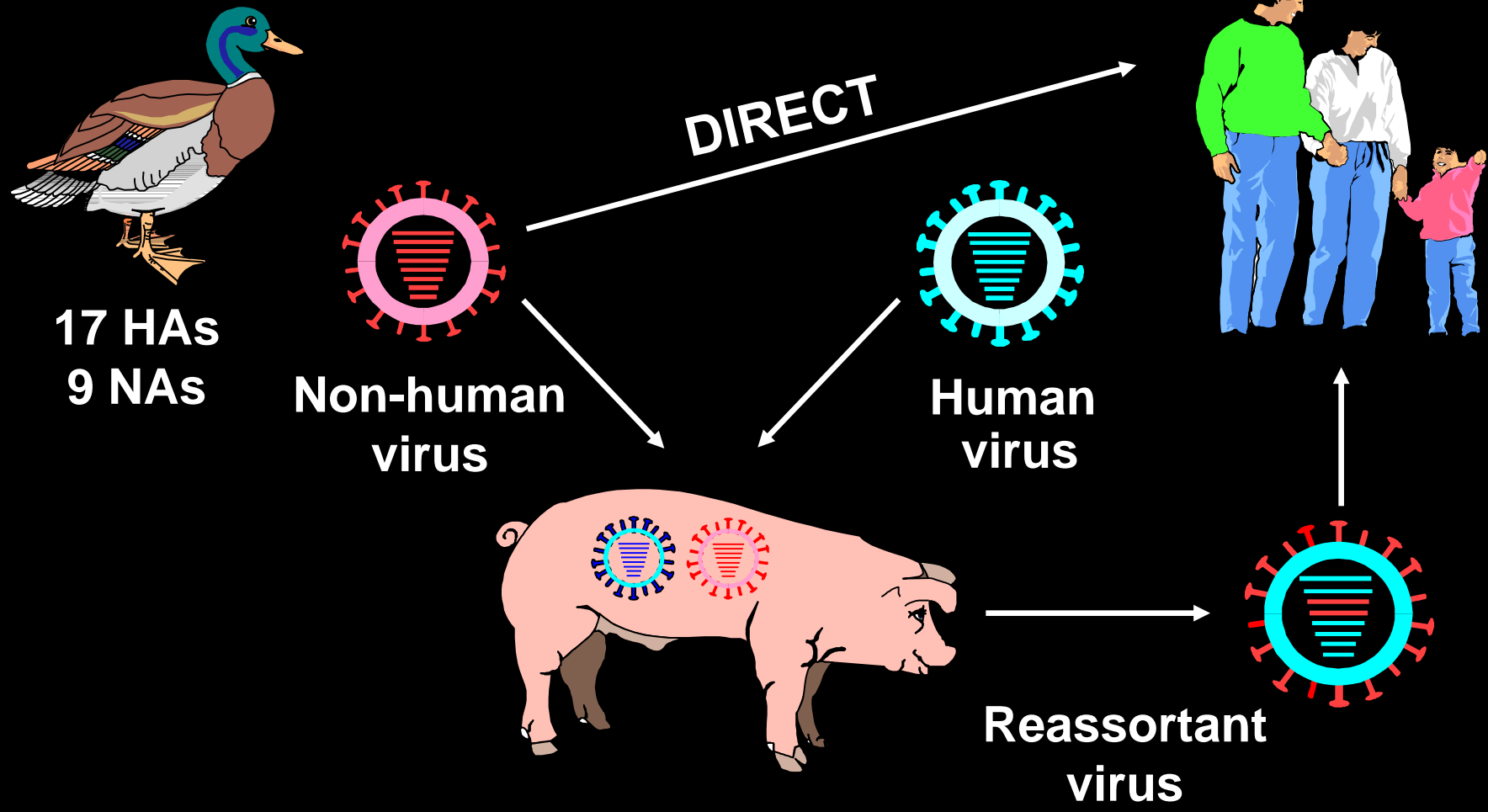
Subtype Origin



| Subtype | Waterfowl | Humans | Swine | Equines | Other mammals |
|------------------|-----------|--------|-------|---------|---------------|
| H subtype | | | | | |
| H1 | Yes | Yes | Yes | No | No |
| H2 | Yes | Yes | No | No | No |
| H3 | Yes | Yes | Yes | Yes | No |
| H4 | Yes | No | No | No | Yes (seal) |
| H5 | Yes | Yes | No | No | No |
| H6 | Yes | No | No | No | No |
| H7 | Yes | Yes | No | Yes | Yes (seal) |
| H8 | Yes | No | No | No | No |
| H9 | Yes | Yes | No | No | No |
| H10 | Yes | No | No | No | Yes (mink) |
| H11 | Yes | No | No | No | No |
| H12 | Yes | No | No | | |
| H13 | Yes | No | No | No | Yes (whale) |
| H14 | Yes | No | No | No | No |
| H15 | Yes | No | No | No | No |
| N subtype | | | | | |
| N1 | Yes | Yes | Yes | No | No |
| N2 | Yes | Yes | Yes | No | Yes (whale) |
| N3 | Yes | No | No | No | No |
| N4 | Yes | No | No | No | Yes (mink) |
| N5 | Yes | No | No | No | Yes (seal) |
| N6 | Yes | No | No | No | No |
| N7 | Yes | Yes | No | Yes | Yes (seal) |
| N8 | Yes | No | No | Yes | No |
| N9 | Yes | No | No | No | Yes (whale) |



Mechanisms of Influenza Virus Antigenic "Shift"



Influenza A

- Key epidemiology features – Influenza epidemics are due to changes in the HA and NA glycoproteins
- a major change (e.g. change in H type) is termed an antigenic shift (rare event, influenza A only); antigenic shift may lead to pandemics
- a minor change is termed an antigenic drift

Hong Kong H5N1

- In May 1997, investigations revealed 18 (H5N1) human cases (6 deaths) by the end of 1997, all of them in Hong Kong. Exposure to birds the major risk factor

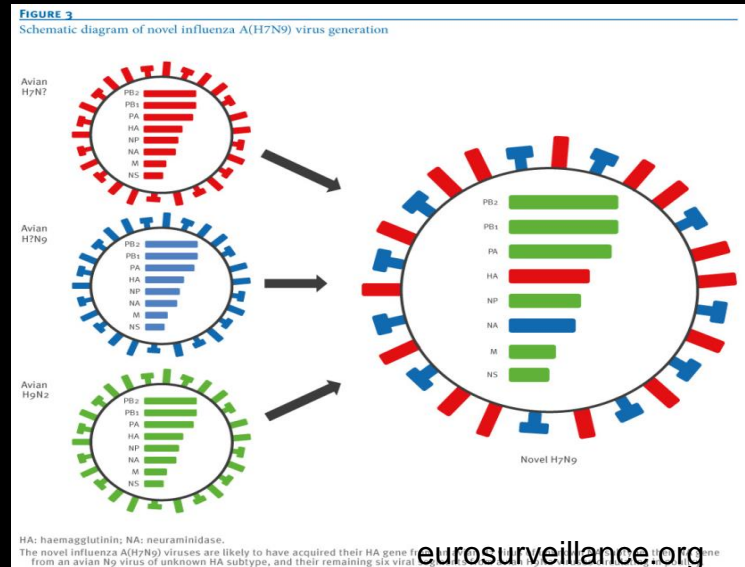
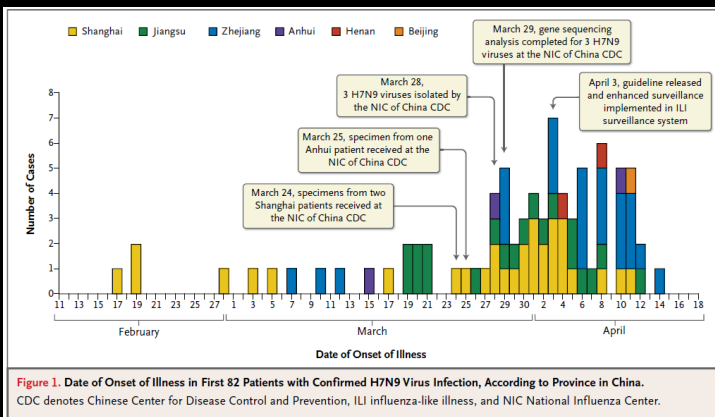
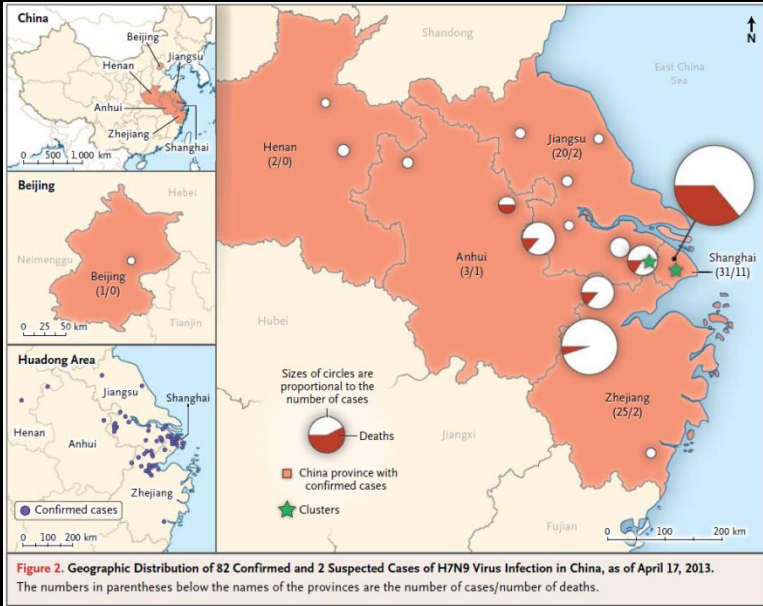
- This led to the culling of 1.2 million birds and cost the government 245 million in Hong Kong dollars in compensation.



Recent Avian Influenza Outbreaks that have Infected Man

| Years | Avian Influenza A | Place of Origin | Number of humans | Number of deaths |
|-------|-------------------|----------------------------|------------------|------------------|
| 1997 | H5N1 | Hong Kong | 18 | 6 |
| 1999 | H9N2 | Hong Kong | 2 | - |
| 2002 | H7N2 | Virginia | 2 | - |
| 2003 | H5N1 | Hong Kong | 2 | 1 |
| 2003 | H7N7 | The Netherlands Belgium | 89 | 1 |
| 2003 | H9N2 | Hong Kong | 1 | - |
| 2003 | H7N2 | New York | 1 | - |
| 2004 | H7N3 | Canada | 1 | - |
| 2004 | H10N7 | Egypt | 2 | - |
| 2004+ | H5N1 | Numerous | Many | >50% |
| 2013 | H7N9 | China | 132+ | 37 |

H7N9: New Pandemic Threat?



Examples of Zoonoses

- Influenza virus

Domestic

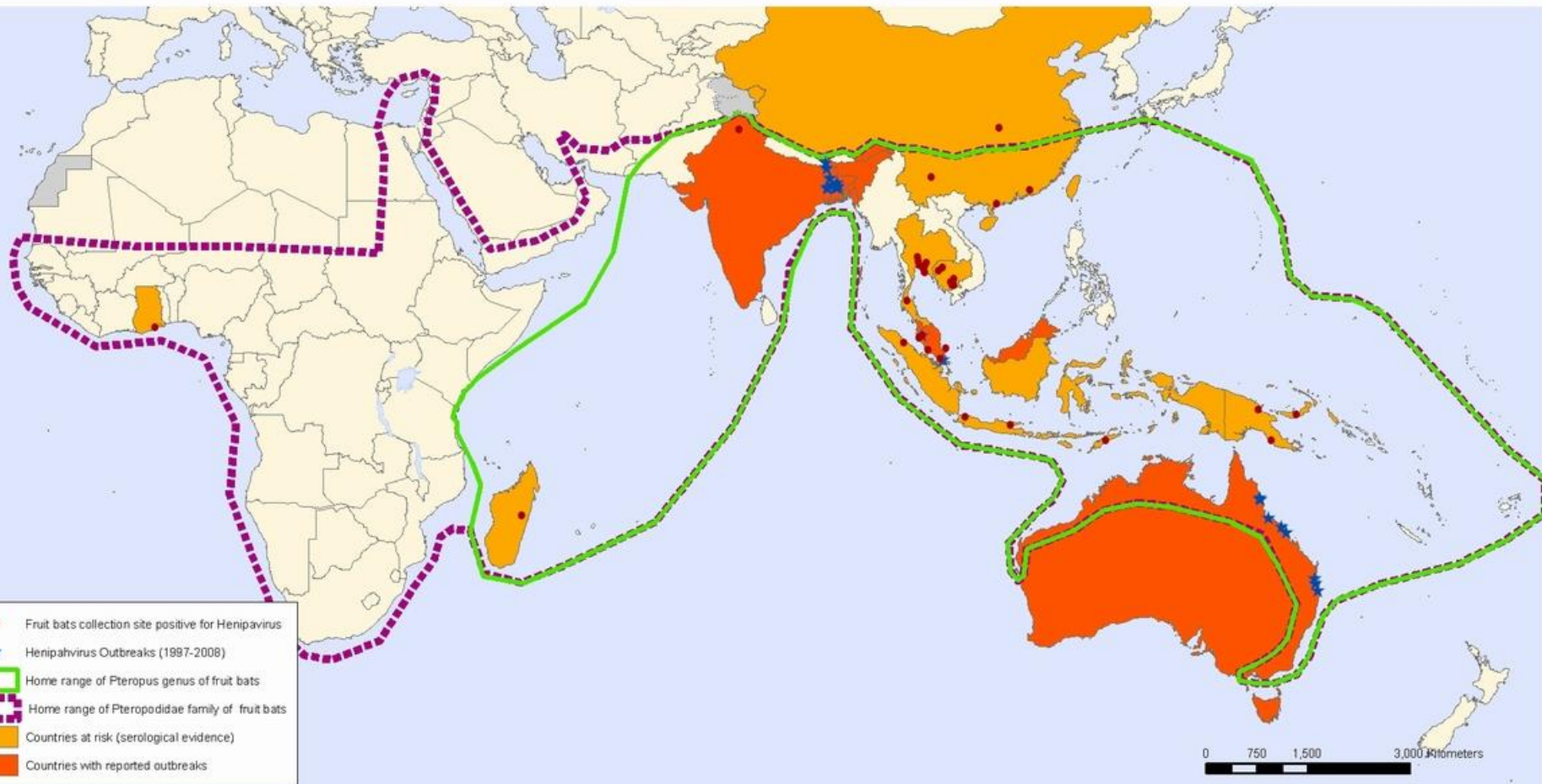
International

- Henipa viruses

International

Henipa viruses distribution

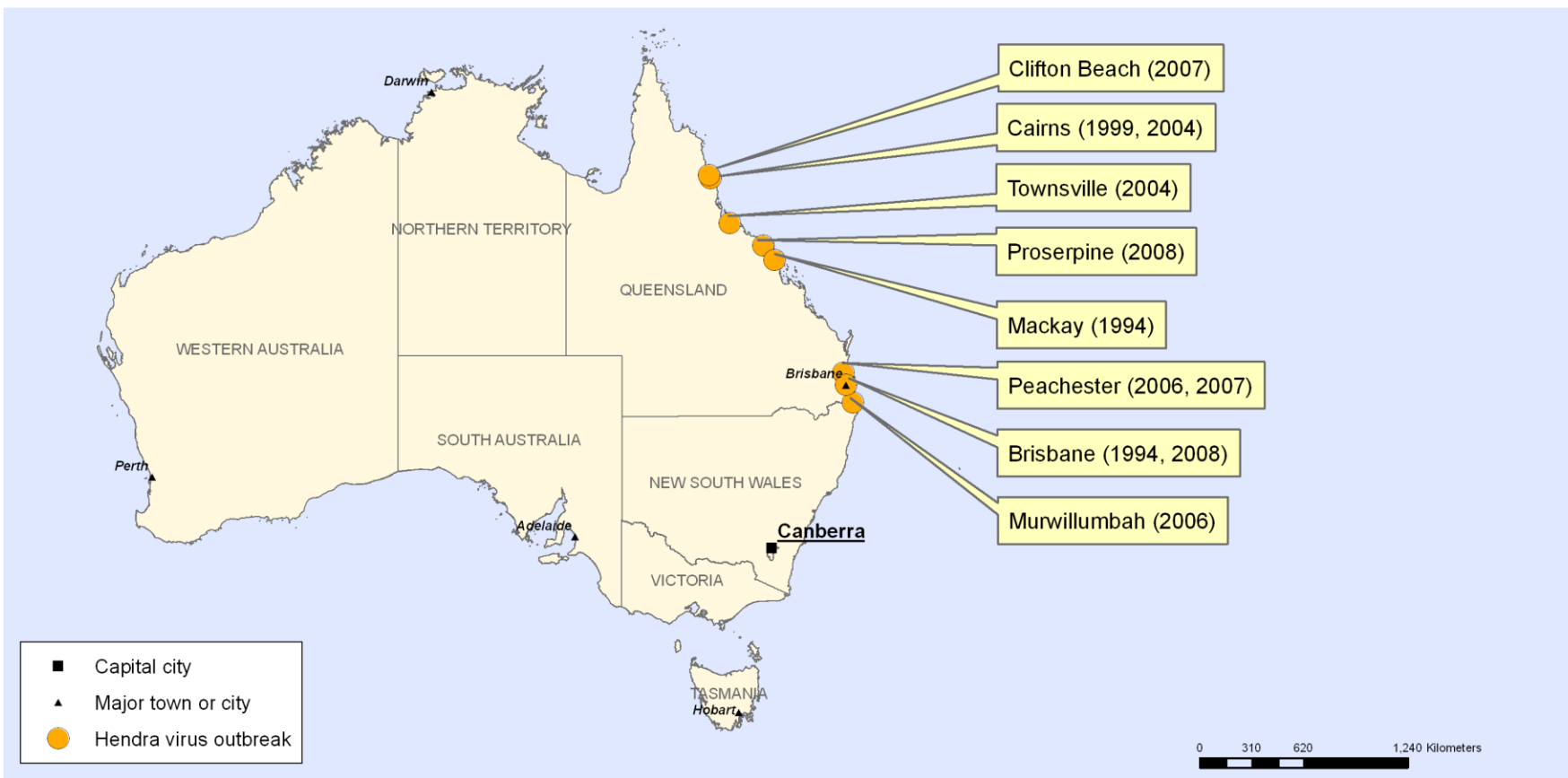
Geographic distribution of Henipavirus outbreaks and fruit bats of Pteropodidae Family



Source: www.who.int

Hendra virus timeline

Geographic distribution of Hendra virus outbreaks in Australia from 1994 to July 2008



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

Data Source: World Health Organization
Map Production: Public Health Information
and Geographic Information Systems (GIS)
World Health Organization



© WHO 2008. All rights reserved

Prevention or control?

NEWS

BIOSECURITY

Hendra vaccine success announced

Successful trials of a horse vaccine against the Hendra virus were announced by Deborah Middleton at May's AVA Annual Conference in Adelaide.

The vaccine

The Hendra virus attaches to host cells via the attachment glycoprotein G. The experimental horse vaccine generates

Australian Veterinary Journal Volume 89, No 7, July 2011

Nipah virus

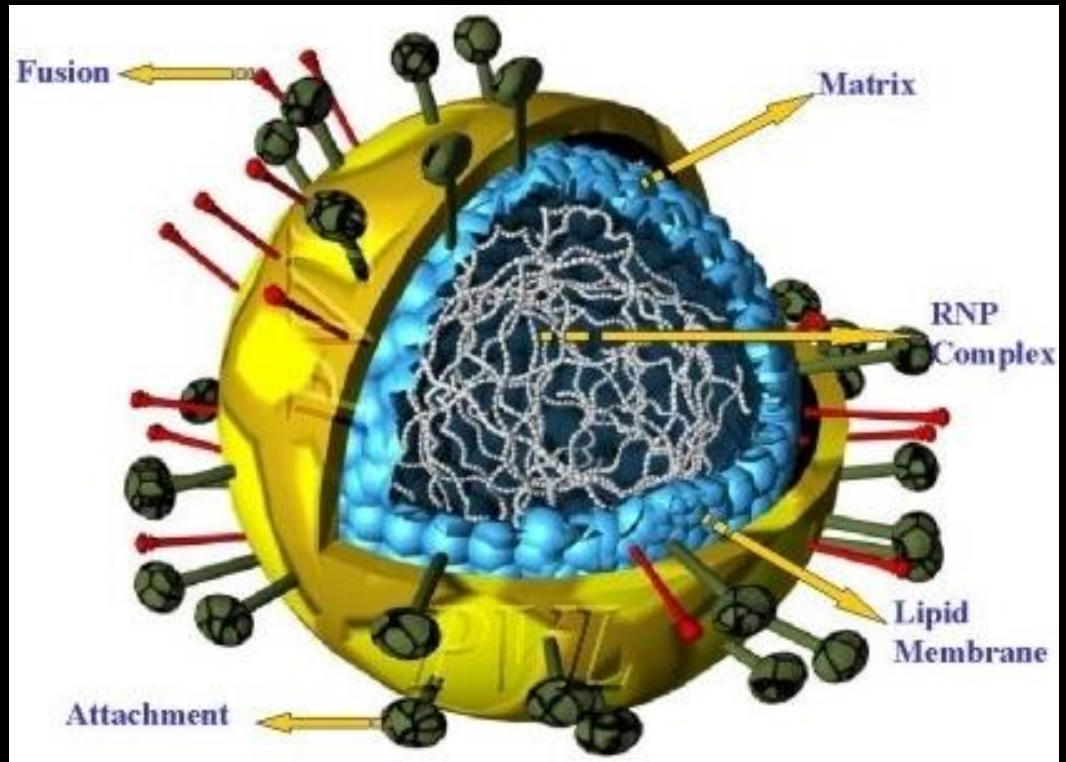


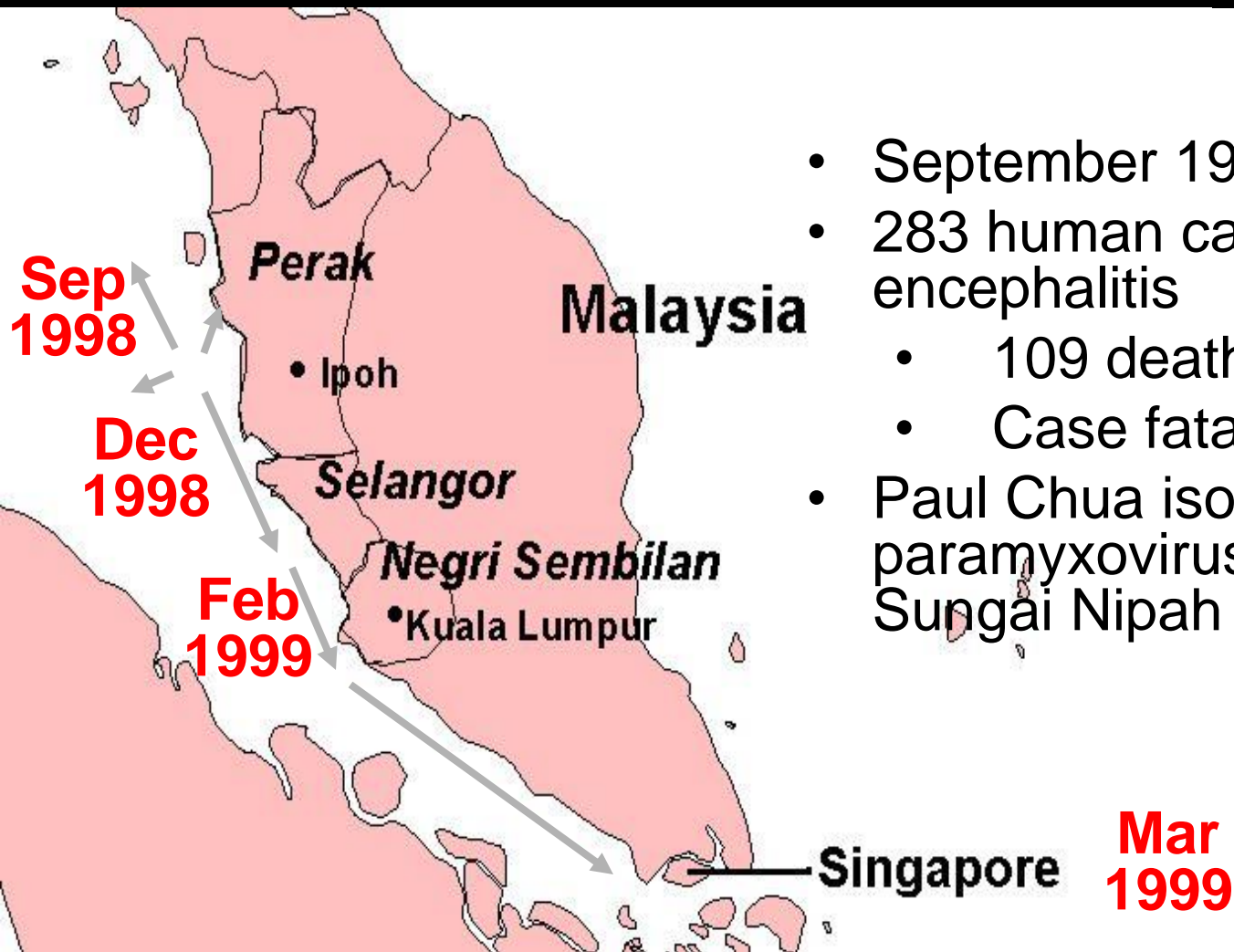
Image source: doctorexclusive.com

- Member of Paramyxoviridae

- Enveloped spherical virus
- Single strand negative sense RNA
- Related to Hendra and Measles virus

Nipah Virus in Malaysia

Malaysia Nipah Outbreak



- September 1998 – May 1999
- 283 human cases of acute encephalitis
 - 109 deaths
 - Case fatality rate 39%
- Paul Chua isolated a novel paramyxovirus from a patient in Sungai Nipah village

Nipah Clinical Features

Symptoms:

Moderate

high fever
headache
myalgia
vomiting
drowsiness
dizziness

Severe

encephalitis including
disorientation
hallucinations
seizures/convulsions
coma

Respiratory symptoms:

- 14% non-productive cough
- 6% of chest radiographs mild focal abnormalities

How did people contract Nipah Virus in Malaysia?

- The outbreak was concentrated among pig farmers
 - 92% of cases reported contact with pigs
- Compared to controls, persons with Nipah encephalitis were
 - 5.6 times more likely to have close contact with pigs.
 - 3.7 times more likely to have contact with sick pigs



How did Nipah transmit between pigs?

- Pig respiratory secretions contained Nipah virus
- 2.4 million pigs in peninsular Malaysia
- Active pig trade
 - Distributed infected but asymptomatic pigs throughout the country
- As the PRES epidemic spread
 - “fire sale” of sick pigs markedly increased mixing of sick and well pigs



http://www.xanga.com/c_lar_a

From where did the pigs get Nipah?

Nipah wild animal studies

- Numerous wild animals trapped and tested
- 8 different species of fruit bats sampled
 - 4 of the 8 species had antibodies against Nipah virus
- Nipah virus isolated
 - Urine from *Pteropus hypomelanus* in Malaysia
 - Urine from *Pteropus lylei*
 - In Cambodia
 - In Thailand



Photo source: Ivan Kuzmin

Malaysia Outbreak Control

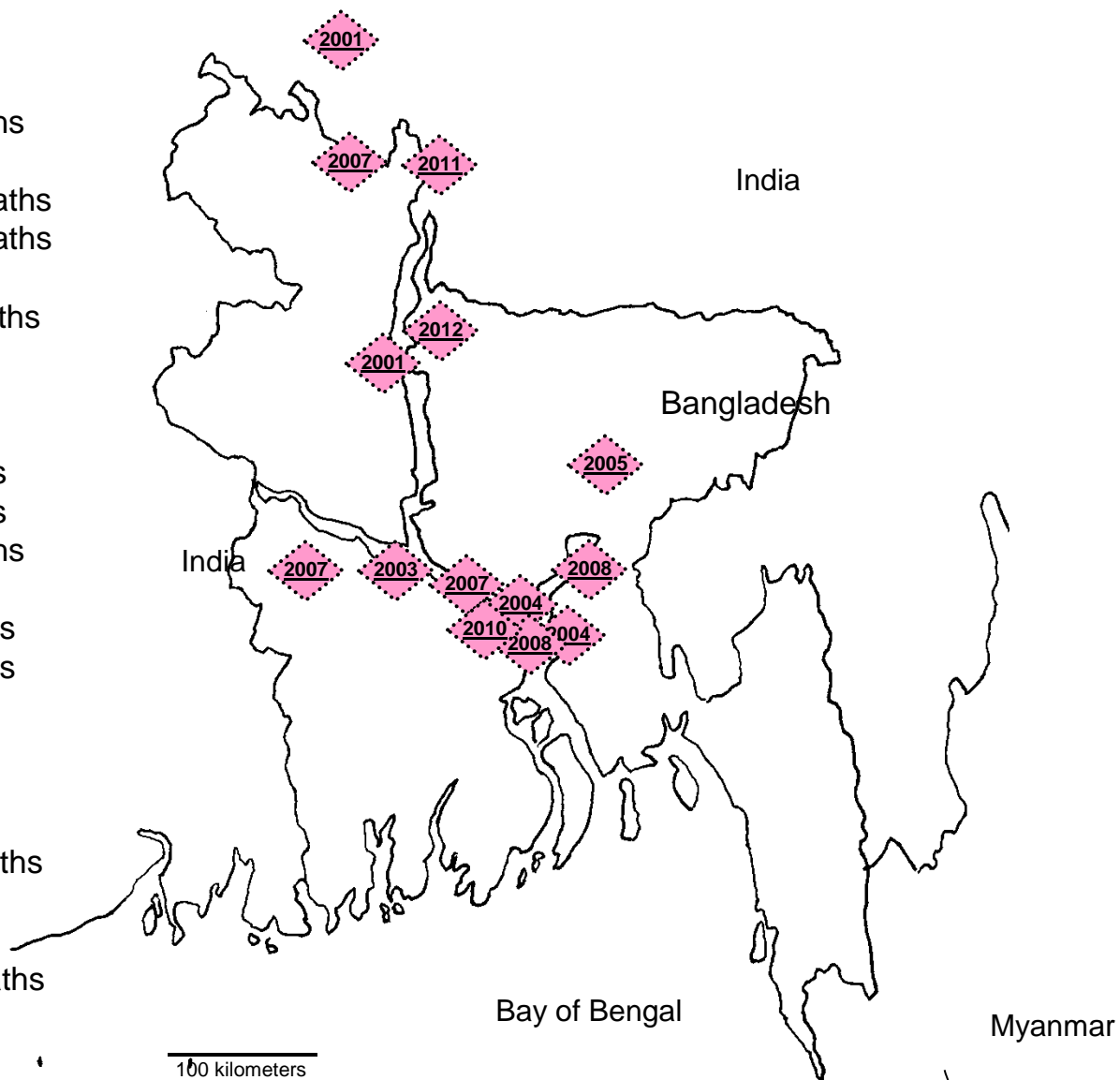
- Outbreak ceased following the culling of over 900,000 pigs
 - Fruit trees no longer permitted above pig pens
 - Pork industry decimated
- No subsequent cases of Nipah recognized in Malaysia from people or animals



Photo: www.fao.org

Nipah virus in Bangladesh

| | | |
|--------------|--------------------------------|-----------------------------|
| 2001 | Siliguri | 66 cases 49 deaths |
| | Meherpur | 13 cases 9 deaths |
| 2002 | No cases | |
| 2003 | Naogaon | 12 cases 8 deaths |
| 2004 | Rajbari | 31 cases 23 deaths |
| | Faridpur | 36 cases 27 deaths |
| 2005 | Tangail | 12 cases 11 deaths |
| 2006 | No cases | |
| 2007 | Thakurgaon | 7 cases 3 deaths |
| | Kushtia | 8 cases 5 deaths |
| | Nadia | 5 cases 5 deaths |
| 2008 | Manikgonj | 4 cases 4 deaths |
| | Rajbari | 6 cases 5 deaths |
| 2009 | Rangpur , Gaibandha, | 4 cases 1death |
| | Rajbari, Niphamari | |
| 2010 | Faridpur, Rajbairi, | 17 cases 15 deaths |
| | Gopalgonj ,Kurigram | |
| 2011 | Lalmonirhat, Dinajpur, | 28 cases 28 deaths |
| | Comilla, Nilpahmari, Faridpur, | |
| | Rajbari | |
| 2012 | Joypurhat, Rajshahi | 13 cases 10 deaths |
| Total | | 266 cases 204 deaths |



Pteropus giganteus in Bangladesh

| | 2004 | 2006 | 2007 |
|-------------|------|------|------|
| Bats Tested | 92 | 81 | 218 |
| Nipah IgG+ | 48 | 15 | 107 |
| % positive | 52% | 19% | 49% |



How does Nipah virus transmit from wildlife to humans in Bangladesh?

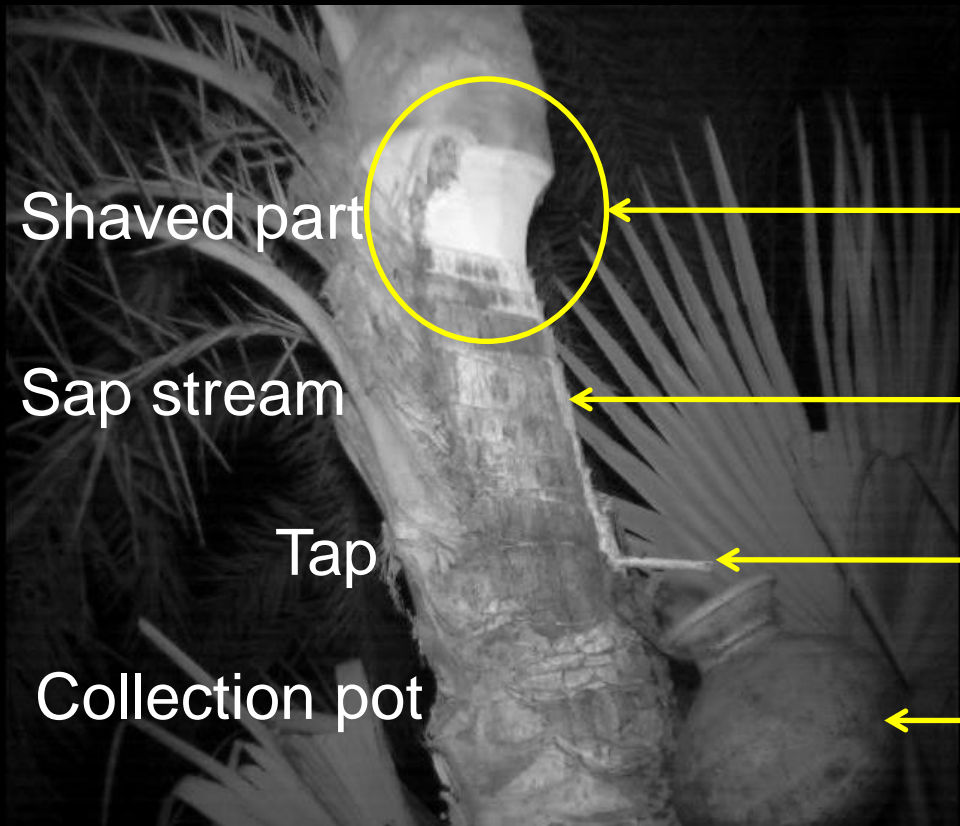
Pathways for transmission

- Zoonotic
- Human-to-human

Outbreak investigations

| Risk factor | No. and % of cases with this risk factor | No. and % of controls with this risk factor | Odds Ratio | 95% confidence limit | p-value |
|------------------------------------|--|---|------------|----------------------|-------------|
| Physical contact with sick animal | 5 (42) | 5 (14) | 4.4 | 0.9,20.4 | 0.09 |
| Physical contact with sick chicken | 3(25) | 3(8) | 3.7 | 0.5,24 | 0.16 |
| Killed a sick animal | 1(8) | 2(6) | 1.6 | 0.05,22 | 1.00 |
| Ate any sick animal | 1(8) | 2(6) | 1.6 | 0.05,22 | 1.00 |
| Seen fruit bats during daytime | 3(25) | 5(14) | 2.1 | 0.34,11 | 0.39 |
| Seen fruit bats during nighttime | 8(67) | 13(36) | 3.5 | 0.9,15.4 | 0.06 |
| Drank raw date palm sap | 7(58) | 6(17) | 7.0 | 1.6,31 | 0.01 |

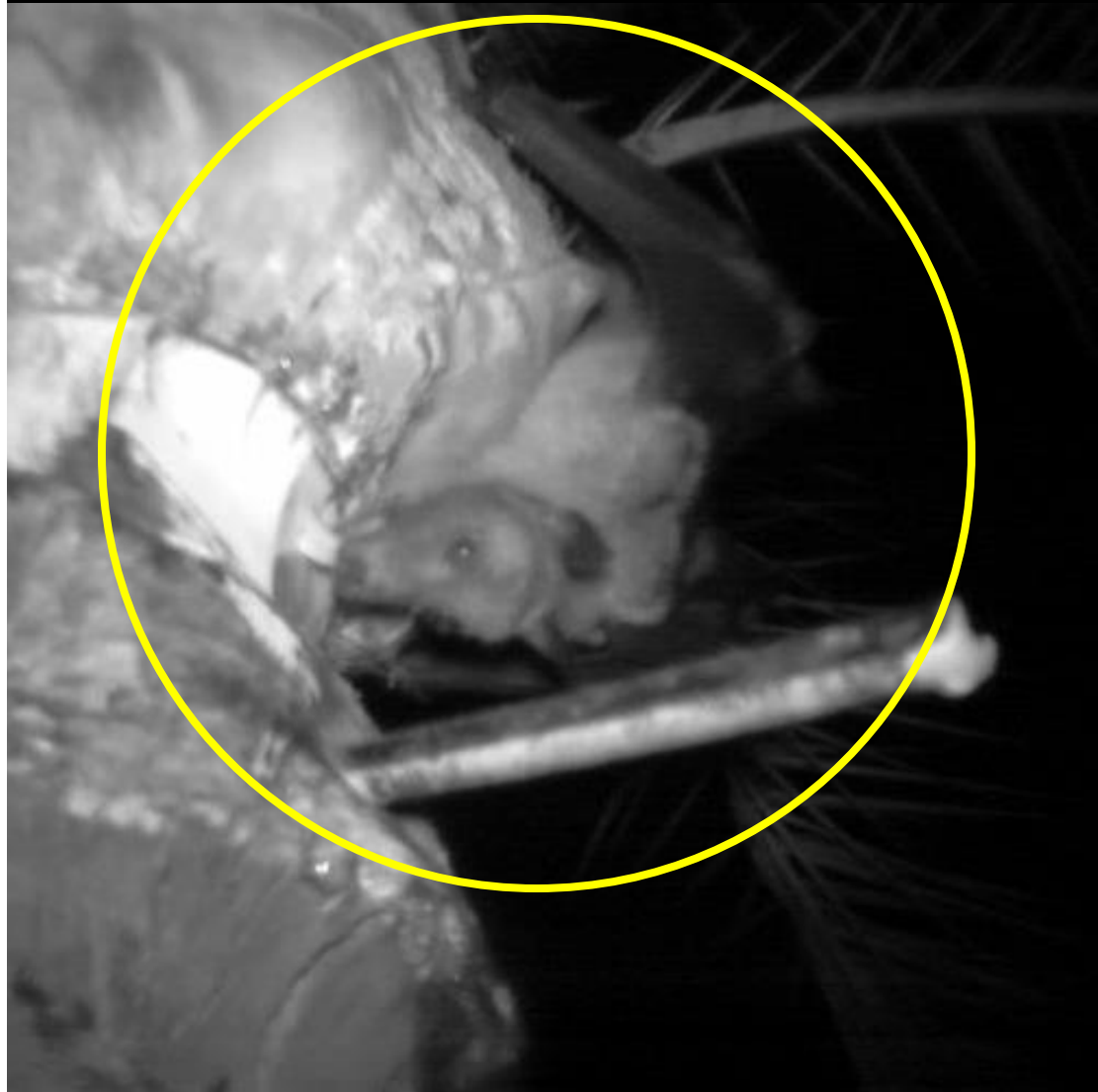
Date Palm Sap Collection



- Late November through March/April
 - Sap harvesters cut a tap is cut into the tree
 - In the evening they place a clay pot under the tap
 - Each morning the pot is removed
 - Most sap is made into molasses
 - Some sold fresh early in the morning
 - A local delicacy

Manikgonj Outbreak 2008

- 7 trees where implicated date palm sap was collected
- 7 nights of observation
- Mean 15 bat visits per night
- Bats licked the sap mean 8.4 times per night
- 49% of bats were *Pteropus sp.*

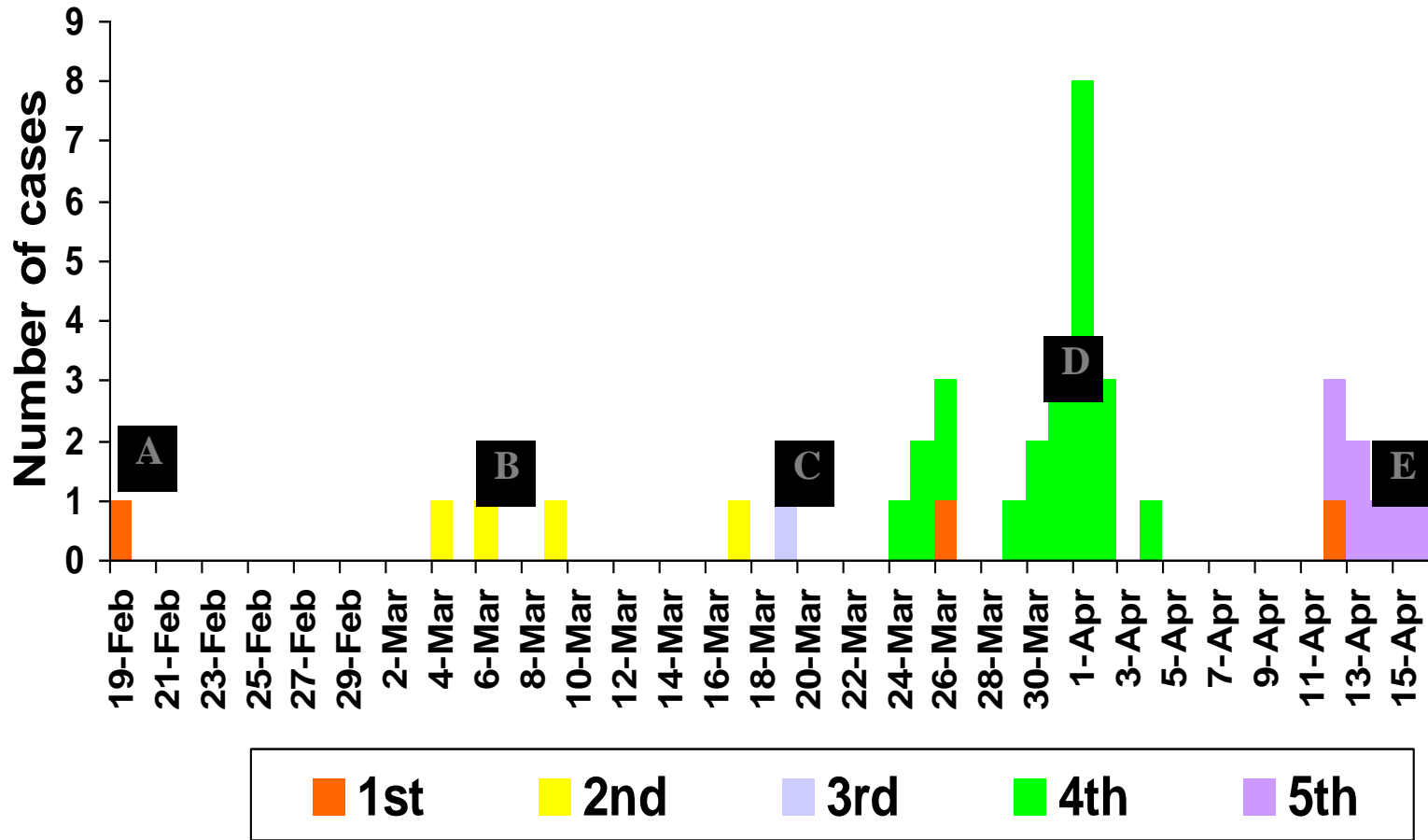


Date palm sap transmission of NIV

Epidemiological Evidence

| Year | Location | Cases Exposed (%) | Controls Exposed (%) | Odds Ratio | 95% Confidence Limit |
|------|-------------|-------------------|----------------------|------------|----------------------|
| 2005 | Tangail | 58 | 17 | 7.0 | 1.6, 31 |
| 2008 | Manikgonj | 100 | 25 | 18 | 2.2, inf |
| 2010 | Faridpur | 69 | 30 | 5.2 | 1.2, 26 |
| 2011 | Lalmonirhat | 68 | 11 | 17 | 4.0 , 70 |

Dates of illness onset from Faridpur outbreak coded by transmission generation (N=36)



What contact was associated with Nipah transmission?

Faridpur Cohort Study

- Touching a Nipah patient who later died (RR 15.0, 95% CI 4.0, 65)
- Touching an unconscious patient (RR 4.5, 95% CI 1.7, 12)
- Touching a patient with respiratory symptoms (RR 5.0, 95% CI 2.0, 14)
- Washing hands after contact with Patient F (RR 0.20, 95% CI 0.03, 0.90)



Jute



Doincha



Bamboo



Polyethylene

Bat Visits

| | Bamboo | Dhoincha | Jute | Poly ethylene | Control |
|---------------------------------|--------|----------|------|---------------|---------|
| Bat visits on and around tree | 176 | 45 | 125 | 112 | 4630 |
| % landed on the tree | 20 | 18 | 43 | 11 | 78 |
| Number contacting date palm sap | 0 | 0 | 11 | 0 | 3556 |
| % contacting sap | 0 | 0 | 9 | 0 | 76 |

Community acceptance and uptake of the intervention?

Examples of Zoonoses

- Influenza virus

Domestic

International

- Nipah virus

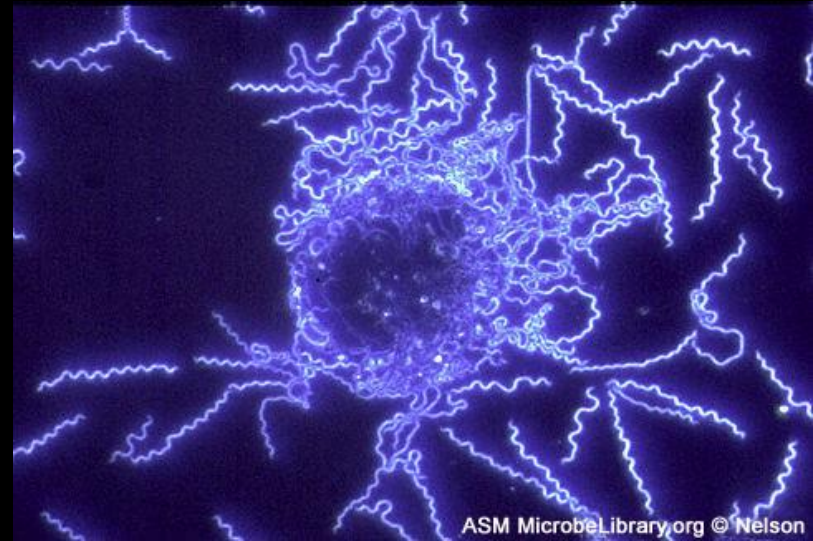
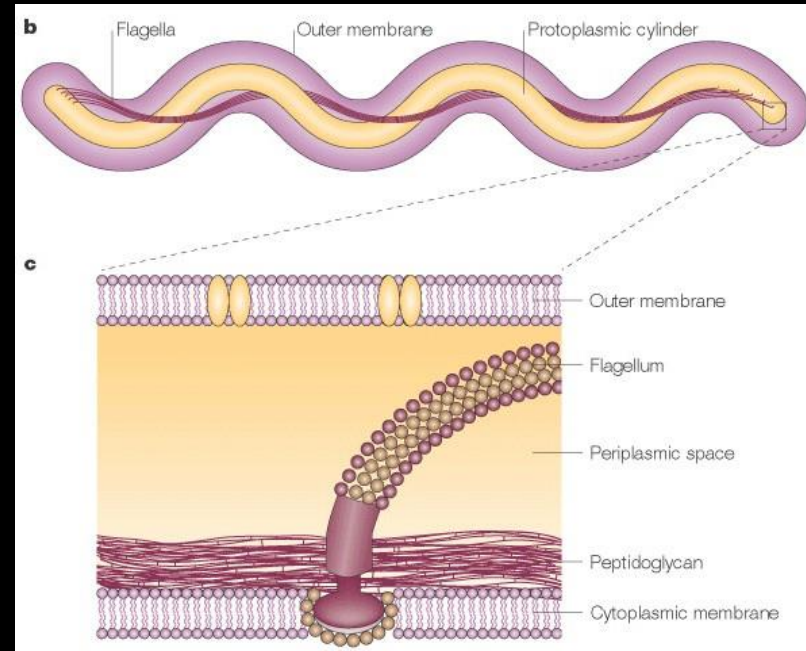
International

- Lyme disease

Domestic

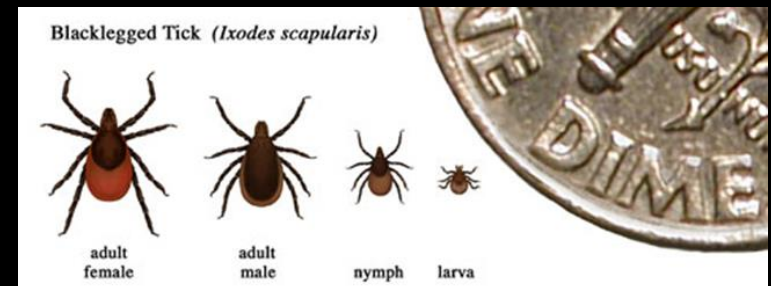
Lyme Disease

- The most common tick-borne infection in both North America and Europe
- First cases in 1975
 - Lyme and Old Lyme, CT
 - 50 cases pediatric arthritis
 - EIS investigation
- *Borrelia burgdorferi*
 - Gram (-) spirochete
 - Discovered 1982



Background

- *Ixodes spp.*
 - *I. scapularis* (Eastern, North-Central US)
 - *I. pacificus* (Pacific Coast)
- Common Names
 - Black-legged tick
 - Deer tick
- Ecology
 - Floor of deciduous forests
 - Brush
 - High humidity
- Life-Cycle
 - Complex
 - Egg → Larva → Nymph → Adult



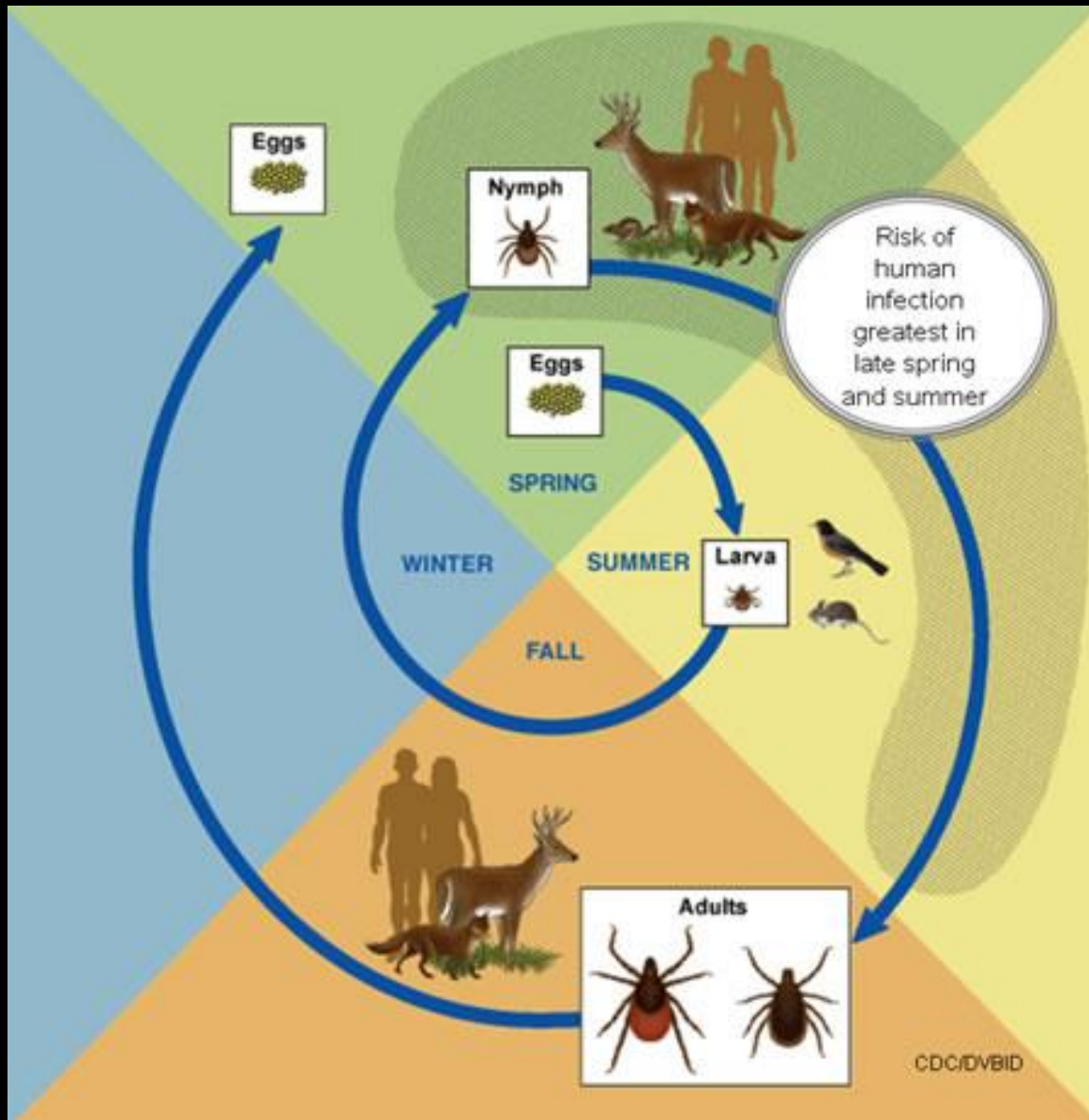
Signs and Symptoms

3 Stages

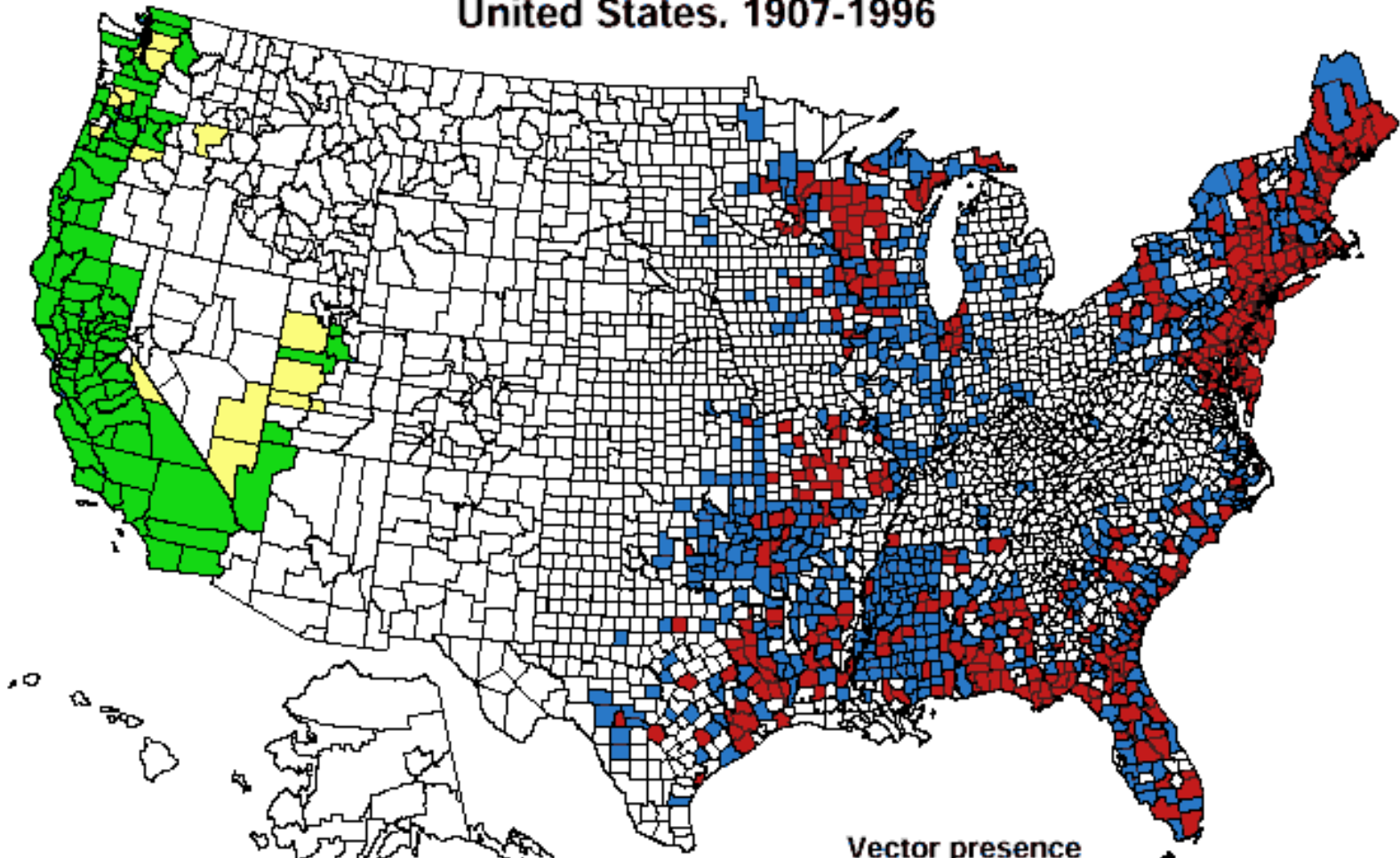
- **Early Localized Stage (3-30 days P.I.)**
 - Rash called erythema migrans (EM)
 - Distinct Bull's Eye appearance
 - Fatigue, chills, fever, headache, muscle and joint aches, and swollen lymph nodes
- **Early Disseminated Stage (days-weeks P.I.)**
 - Facial or Bell's palsy
 - Severe headaches/neck stiffness
 - Joint pain/swelling
 - Heart irregularities
- **Late disseminated stage (months-years P.I.)**
 - Chronic arthritis (60%)
 - Neurological abnormalities (5%)



Vector Life-cycle



Established* and reported distribution of the Lyme disease vectors
Ixodes scapularis (*I. dammini*) and *Ixodes pacificus*, by county,
United States. 1907-1996**



Vector presence

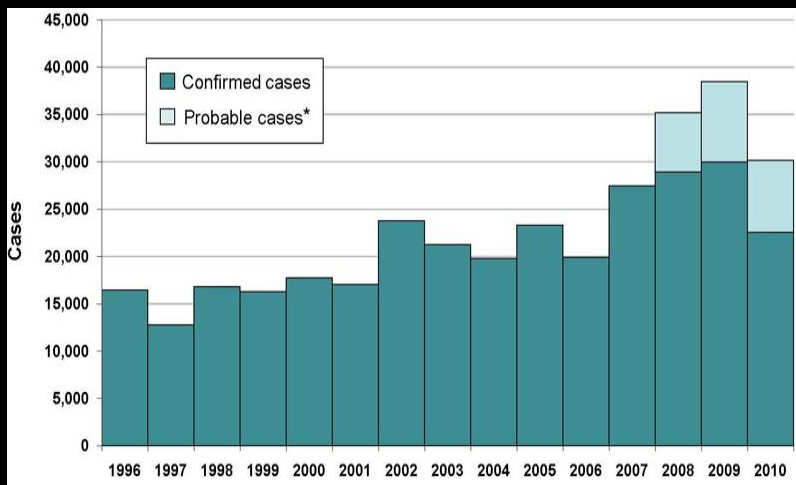
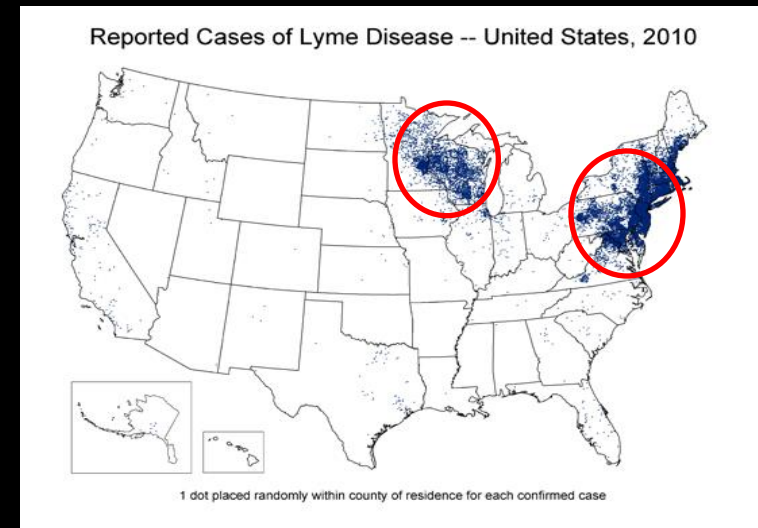
- Established *Ixodes scapularis*
- Reported *Ixodes scapularis*
- Established *Ixodes pacificus*
- Reported *Ixodes pacificus*



*at least 6 ticks or 2 life stages (larvae, nymphs, adults) identified.
**at least 1 tick identified.

Epidemiology

- Cases are geographically clustered
 - North Central US
 - North Eastern US



- Incidence
 - Aprox. 22,000 new cases 2010
 - Steady increase
 - Most infections occur during summer months

Interventions

- Prevention

- Protective clothing
- Repellants (DEET, Pyrethrin)
- Environmental management
 - Controlled burns
 - Landscaping



- Acaricides

- Broad-application
- Reservoir targeted

- Vaccines

- “LYMErix” (2002) pulled

- Therapy

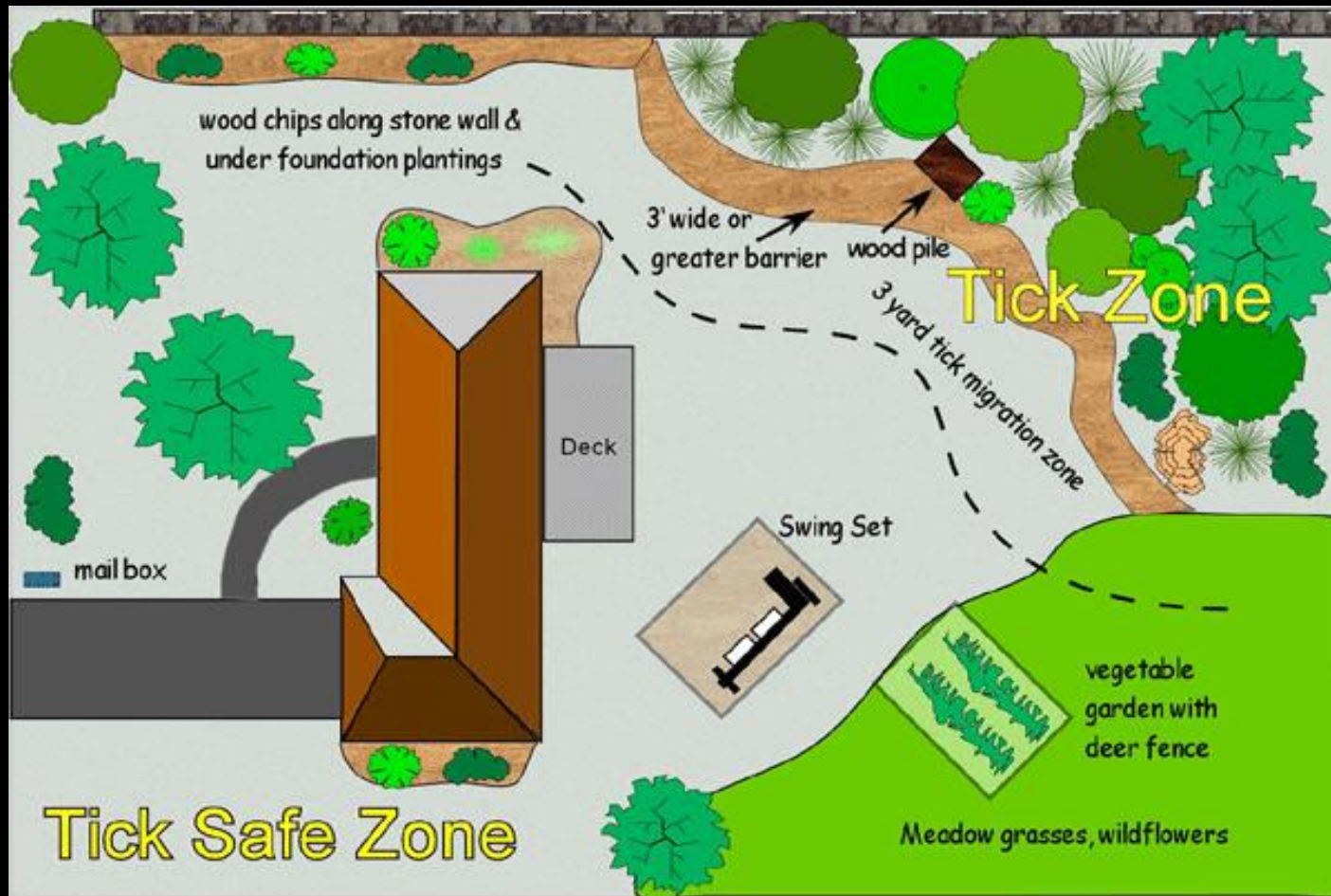
- doxycycline, amoxicillin, or cefuroxime axetil for 2-3 weeks



Protective Clothing



Environmental Management



Contraversies

- Some groups argue that the prevalence is much greater than reported
- Conspiracy theorists suggest Lyme disease is clandestinely connected with biological warfare
- Clinical diagnostic criteria and laboratory testing methods are a focus of criticism



UNDEROURSKIN

OFFICIAL SELECTION
TRIBECA
FILM FESTIVAL

OFFICIAL SELECTION
SILVERDOCS
FILM FESTIVAL

WINNER
BEST DOCUMENTARY
CAMDEN INT'L
FILM FESTIVAL

WINNER
BEST DOCUMENTARY
DURANGO IND.
FILM FESTIVAL

WINNER
BEST DOCUMENTARY
SONOMA INT'L
FILM FESTIVAL

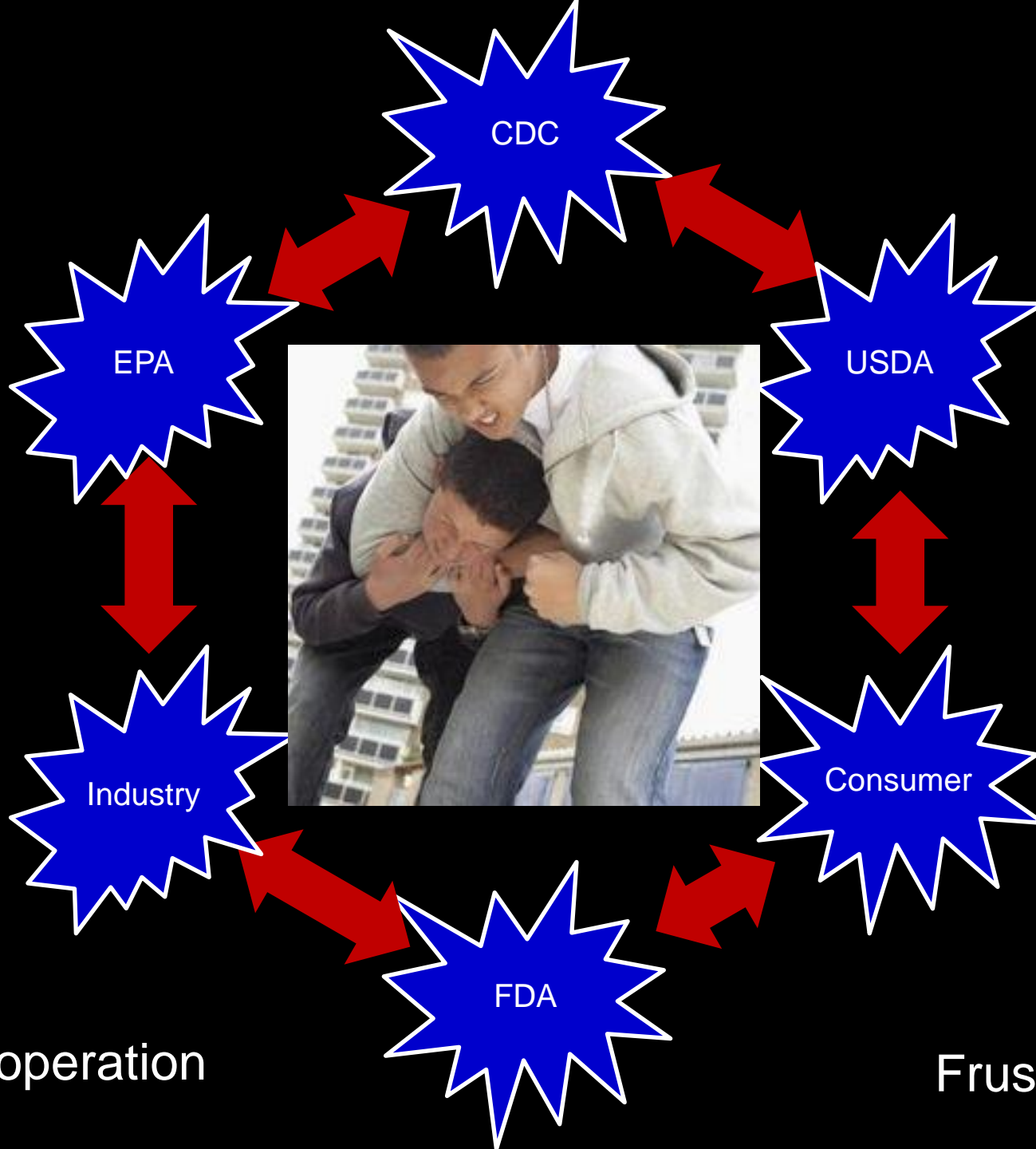
WINNER
BEST DOCUMENTARY
HOUSTON INT'L
FILM FESTIVAL

http://www.underourskin.com/emvideo/modal/3021/853/510/field_video/youtube/z5u73ME4sVU

Understanding and controlling zoonotic diseases can be vastly complicated.

The Problem

- No one discipline is trained to engage such complex one health problems
- No one agency or organization can control such problems



Poor cooperation

Frustration



One Health initiative



[Home page](#)

[About One Health](#)

[Mission Statement](#)

[Advisory Board \(Hon.\)](#)

[One Health News](#)

[AVMA Task Force Report](#)

[One Health Newsletter](#)

[Publications](#)

[ProMED Outbreak Reports](#)

[Supporters](#)

[Supporter Endorsements](#)

[Upcoming Events](#)

[Follow Us on Twitter](#)

[Contact Us](#)

[Reciprocal Links](#)

About the One Health Initiative

The One Health concept is a worldwide strategy for expanding interdisciplinary collaborations and communications in all aspects of health care for humans, animals and the environment. The synergism achieved will advance health care for the 21st century and beyond by accelerating biomedical research discoveries, enhancing public health efficacy, expeditiously expanding the scientific knowledge base, and improving medical education and clinical care. When properly implemented, it will help protect and save untold millions of lives in our present and future generations.



*"May there never develop in me the notion that my education is complete but give me the strength and leisure and zeal continually to enlarge my knowledge."
- Maimonides -*

One World-One Medicine-One Health

****Addressing the connections between health and the environment—Accelerated biomedical research discoveries—Enhanced public health efficacy—Expanded scientific knowledge base—Improved medical education and clinical care****

-- ADVANCING HEALTH CARE for the 21st century --
Humans & Animals
Collaborative-Synergistic-Enlightening



Another One Health Website?

No. This is a webportal which intends to:

- unify via a single user-driven entry point;
- bring together the wealth of information scattered across multiple websites;
- facilitate access to OH initiatives, promote & interconnect them;
- promote balanced involvement of all regions of the world;
- encourage interaction & discussion.

It does not seek ownership or to replace any existing initiative - but on the contrary proposes to all One Health stakeholders that they join the collaborative.

Latest Updates: EcoHealth 2012



Forums

Join the One Health Discussions and become part of the community.

[+ learn more](#)

Meetings

Collaboration begins when we bring people together. Collaborative meetings are an essential part of the One Health Movement.

[+ learn more](#)

Resources

One Health Case Studies, advocacy materials, key publications and much more. All content is available for reuse.

[+ learn more](#)



American Veterinary Medical Association

One Health : A New Professional Imperative



ONE HEALTH

One Health is the collaborative effort of multiple disciplines to attain optimal health for people, animals, and our environment.

OBJECTIVE

MISSION

RATIONALE

GOALS

CASE STUDIES

LEADERSHIP

NEWS

SUMMIT

CONTACT

COMMUNITY EXCHANGE

ONE HEALTH COMMISSION

The **convergence of people, animals, and our environment** has created a new dynamic in which the health of each group is inextricably **interconnected**. The challenges associated with this dynamic are demanding, profound, and unprecedented.

Despite spectacular achievements in microbial genetics and genomics, we know relatively little about how such **zoonotic agents** are maintained in nature or how they respond to environmental (often anthropogenic) changes. Improvements are needed in our ability to detect and respond to emerging zoonotic agents, particularly those that appear suddenly and are capable of spreading over large areas. In order to more effectively prevent or control zoonotic diseases, it will be necessary to better understand the ecology of their respective **etiologic agents**.

The *One Health Commission* is a **call to action** for collaboration and cooperation among health science professions, academic institutions, governmental agencies, non-governmental organizations, and industries towards improved assessment, treatment, and prevention of **cross-species disease transmission** and mutually prevalent, but non-transmitted, human and animal diseases and medical conditions. A changing environment populated by interconnected animal and human contact creates significant challenges. These challenges require **integrated solutions** and call for collaborative leadership.

One Health Newsletter

A quarterly newsletter highlighting the interconnectedness of animal and human health



Summer 2008

Volume 1, Issue 3

In This Issue

Articles:

Efficacious "One Health" Implementation.....page 1

This newsletter was created to lend support to the One Health Initiative and is dedicated to enhancing the integration of animal, human, and environmental health for the benefit of all.

Efficacious "One Health" implementation

Bruce Kaplan, DVM

Which human, animal, and environmental risk factors predict disease?



Table 1. Organizations that have endorsed the *One Health* Initiative as of July 2011

| | |
|---|---|
| American Association of Veterinary Laboratory Diagnosticians | Immuno Valley Consortium in The Netherlands |
| American Association of Wildlife Veterinarians | Indian Veterinary Public Health Association |
| American College of Veterinary Microbiologists | Institute for Preventive Veterinary Medicine and Food Safety Lazio and Tuscany Regions [Italy] |
| American College of Veterinary Pathologists | Institute of Tropical Medicine, Department of Animal Health, Antwerp, Belgium |
| American College of Veterinary Preventive Medicine | International Zoonosis Research Institute - Islamabad, Pakistan |
| American Medical Association | Italian Society of Preventive Medicine |
| American Nurses Association | National Association of State Public Health Veterinarians |
| American Physiological Society | National Environmental Health Association (NEHA) |
| American Phytopathological Society | National Park Service (USA) |
| American Society for Microbiology | New Zealand Centre for Conservation Medicine |
| American Society of Tropical Medicine and Hygiene | Nigerian Biomedical and Life Scientists |
| American Veterinary Medical Association | Nigerian Veterinary Medical Association |
| Association of Academic Health Centers | Praecipio International |
| Association of American Medical Colleges | SAPUVET III Project |
| Association of American Veterinary Medical Colleges | Society for Tropical Veterinary Medicine |
| Association of Schools of Public Health | State Environmental Health Directors |
| Conservation through Public Health | United States Animal Health Association (USAHA) |
| Corporation Red SPVet, Bogota-Columbia | Veterinarians without Borders/ Vétérinaires sans Frontières - Canada |
| Council of State and Territorial Epidemiologists | World Association of Veterinary Laboratory Diagnosticians Zoonotic and Emerging Diseases, Edinburgh, UK |
| Croatian Society for Infectious Diseases | |
| Delta Society | |
| Department of Molecular and Comparative Pathobiology, Johns Hopkins University School of Medicine | |
| Exuberant Animal | |
| Federation of Veterinarians of Europe (FVE) | |
| Global Alliance for Rabies Control | |

from <http://www.onehealthinitiative.com/supporters.php>

One Health Training Elements (Tools)



- Environmental health
- Modern laboratory techniques
- Epidemiology
- Biostatistics
- Food safety
- Animal science
- Meat science
- Soil and water engineering
- Modern animal production
- Human and animal ecological studies
- Agriculture engineering
- Climate change
- Geographical information systems
- Zoonotic infections
- Toxicology

Our One Health Vision

- To train professionals to conduct “one health” investigative and experimental research
- Certificate, Master’s, & PhD programs
- To attract outstanding US and international researchers to such a training program



Department of Environmental & Global Health

College of Public Health and Health Professions

PHHP Home



Research ▾

News and Events ▾

Academic Programs ▾

Photos

People ▾

Resources ▾

Home

Academic Programs

Doctoral Programs

- PHD in Environmental & Global Health

Masters Programs

- MPH in Environmental Health

Certificate Programs

- Certificate in Emerging Infectious Disease Research

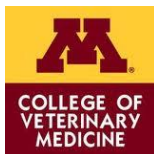
Academic Programs



<http://egh.php.ufl.edu>



Global Pathogens Laboratory
<http://gpl.php.ufl.edu>



Thank You

