

**Bovine tuberculosis in Ethiopian local cattle and wildlife:
Epidemiology, economics and ecosystems**

INAUGURALDISSERTATION

zur

Erlangung der Würde eines Doktors der Philosophie

vorgelegt der

Philosophisch-Naturwissenschaftlichen Fakultät der
Universität Basel

von

Rea Tschopp

aus

Leukerbad (VS)

Basel, 2010

Genehmigt von der Philosophisch-Naturwissenschaftlichen Fakultät der Universität Basel
auf Antrag von Herrn Prof. Dr. M. Tanner, Herrn PD Dr. J. Zinsstag und Herrn Prof. Dr.
D. Young

Basel, den 9. Dezember 2008

Prof. Dr. Eberhard Parlow
Dekan der Philosophisch-Naturwissenschaftlichen Fakultät



To my parents

Table of contents

1. Acknowledgments.....	5
2. Summary.....	9
3. Zusammenfassung.....	13
4. Résumé.....	17
5. Summary in Amharic.....	21
6. Abbreviations.....	25
7. Introduction.....	27
7.1. Bovine tuberculosis.....	28
7.1.1. Aetiology.....	28
7.1.2. Host species.....	29
7.1.3. Transmission of <i>M. bovis</i>	29
7.1.4. Clinical features and pathology.....	30
7.1.5. The tuberculin skin test.....	32
7.1.6. Clinical signs.....	32
7.2. Epidemiology of BTB.....	34
7.2.1. Overview.....	34
7.2.2. BTB prevalence in Sub-Saharan Africa.....	35
7.3. Current situation in Ethiopia.....	38
7.3.1. Country overview.....	38
7.3.2. Poverty reduction.....	38
7.3.3. BTB in humans.....	39
7.3.4. BTB in Ethiopian cattle.....	40
7.4. Economic and social impact of BTB.....	41
7.5. Rationale and research framework.....	41
8. Goals and objectives.....	55
8.1. Goal.....	55
8.2. Objectives.....	55
9. Study sites.....	57
10. Repeated cross-sectional skin testing for bovine tuberculosis in cattle in traditional husbandry system in Ethiopia.....	61
11. Risk factors of Bovine Tuberculosis in cattle in rural livestock production systems of Ethiopia.....	85
12. Mycobacterium species in Ethiopian wildlife.....	107
13. L’interface faune sauvage – élevage – homme de la tuberculose bovine en Afrique.....	127

14. Farmer’s perception towards agriculture, livestock and natural resources in rural Ethiopian Highlands	141
15. Livestock productivity studies	165
15.1. Baseline productivity analysis of Ethiopian cattle.....	166
15.2. Herd structure of cattle in Ethiopia.....	168
15.3. Impact of BTB on animal weight in abattoirs.....	169
15.4. Market analysis	170
16. Approach to assess the economical impact of bovine tuberculosis in Ethiopia.	171
17. Setting bovine TB in the animal health context in Ethiopia: Animal health and husbandry practices.....	181
17.1. Major threats to the health of livestock and wildlife in Ethiopia.....	182
17.2. Impact of bovine TB on animal health in Ethiopia.....	183
17.3. Cost effective control of BTB in the context of developing countries	184
17.4. Building capacity	184
17.5. Conclusions & recommendations	185
18. General discussion and conclusions	187
18.1. Epidemiology of BTB in Ethiopia	188
18.1.1. Multi-disciplinary approach.....	188
18.1.2. Prevalence of BTB in cattle	188
18.1.3. The case of Boran cattle.....	192
18.1.4. The case of Holstein cattle.....	193
18.1.5. Cut off used for skin test result evaluation	193
18.1.6. Wildlife-livestock-human interface	194
18.1.7. Zoonotic transmission.....	195
18.1.8. Impact of the disease on animal traction.....	197
18.1.9. Increasing awareness of the disease.....	198
18.2. Economical impact of BTB	199
18.3. National intervention strategies to control BTB	201
18.4. Messages and recommendations of this thesis.....	201
19. Appendix 1: Photos illustrating the different ecological zones of the study areas and field work performed during this PhD	209
20. Appendix 2: Environmental change and the impact of wildlife on diseases	213
20.1. Introduction.....	214
20.2. The wildlife-livestock-human interface.....	215
20.2.1. Definitions.....	215
20.2.2. Implications and consequences of an interface.....	215
20.3. Diseases at the interface.....	216
20.3.1. Disease transmission.....	216
20.3.2. Wildlife and livestock diseases.....	218
20.3.3. Wildlife and classical and emerging zoonoses	221
20.4. Wildlife reservoir and control strategies.....	222

20.5. Conclusion	224
21. Appendix 3: Ethiopian wildlife species listed in the IUCN-Red List of Threatened species.	229
22. Appendix 4: Worldwide <i>M. bovis</i> isolation in free-ranging wildlife	231
23. Appendix 5: Domestic livestock market routes in Ethiopia	237
24. Appendix 6: Drugs used during the various field works	238
25. Curriculum vitae	239

1. Acknowledgments

This thesis is a bit like a ship that went on a long unknown journey and whose sails were blown by many nice breezes always bringing it smoothly a bit further but also braving some storms, and never really knowing if she would ever arrive at destination. And yet she reached safe shores but this only thanks to a crew of researchers, friends and family who gave me all possible scientific, logistic, financial and emotional support.

Scientific and field work would not have been possible without the extraordinary international collaboration between so many people working in different fields, from different institutions, being from different nationalities, culture and, which definitely made this work a daily adventure and personal enrichment.

I am deeply grateful to PD Dr. Jakob Zinsstag from the Department of Public Health and Epidemiology at STI for having motivated me into starting a PhD, for being my main supervisor and for guiding me into the exciting world of field epidemiology and to Dr. Esther Schelling (STI) for her help and support during the entire PhD as a friend and as a scientific advisor. I am very grateful to Prof. Douglas Young and Dr. Abraham Aseffa for always finding time to listen to me, being always my first “lightning rods” during times of crisis, guiding me professionally and privately, motivating me during difficult moments and teaching me a great deal of wisdom and humility. I wish to express my sincere thanks to Prof. Mitchell Weiss, Head of Department of Public Health and Epidemiology and to Prof. Marcel Tanner, Director of the Swiss Tropical Institute, whose talks about hunting and African bush were a common beloved topic but most of all who was always supporting me silently from STI and who always fully trusted me in my endeavors and decisions.

I am very thankful to the entire Wellcome Trust consortium team for giving me the opportunity of being part of this adventure, for their help, support, enthusiasm and sharing of scientific data and ideas during our monthly teleconferences, but also during meetings, visits and through E-mails and phones, for their constructive comments and fruitful discussions. All these people gave me insights into the world of science and labs,

molecular and genetic technologies, data management, statistics, medicine, politics and social science. I would like to name Prof. Douglas Young and Dr. Brian Robertson (Imperial College, London); Dr. Martin Vordermeier, Prof. Glyn Hewinson, Dr. Steve Gordon and Dr. Stefan Berg (VLA, Weybridge); Dr. Ruth Freeman, Yonas Kassahun Hirutu and Prof. Dan Bradley (Trinity College, Dublin); Aaron Rae (Imperial College) who chose once to take his holidays in Ethiopia to help me during field work in Woldia (North Wollo); Dr. Abraham Aseffa, Dr. Howard Engers, and Dr. Lawrence Yamuah (AHRI/ALERT, Addis Abeba); Dr. Richard Bishop, Mboya Burudi and Evans Teracha (ILRI, Nairobi). And not to forget Anne-Marie Fish (Imperial College) who unfortunately I never managed to meet in person during the PhD but who was always such a wonderful help from London.

I would like also to thank the ALERT management, the Ministry of Agriculture and the Ministry of Health in Addis Abeba, the Addis Abeba University, the Veterinary Faculty of Debre Zeit, the Ethiopian Wildlife Conservation Authority (EWCA) and the NCCR, especially Bassirou Bonfoh and Berhanu Debele.

I am extremely grateful to all the staff of AHRI who welcomed me so warmly during these three years, who assisted me during my stay in Addis Abeba but also during field work and who also introduced me into the wonderful Ethiopian culture and traditions. It was an immense pleasure to work at AHRI. The list of people to thank is so long that it is unfortunately impossible to name everybody in these pages. Among many, I would like to thank Meseret Habtamu and Endalamaw Gadissa for their help in the lab and teaching me how to do cell cultures, Dr. Araya Mengistu and Rebuma Firdessa for helping in the coordination and organization of my field studies; Etetu Gudeta, Haki Tekele Haimanot, Emnet Fissiha, Beshah Mulugeta for administrative matters, the data management team and Negussie Tariku from IT, Kidist Bobosha for the exciting collaboration in a new study in Butajira, Ato Hailu Zewge, Dr. Abraham Aseffa and Dr. Howard Engers who were always a support in scientific and logistic matters and finally Woizero Tsehay. A good part of the PhD work was done in the field, in remote areas under sometimes very difficult conditions and it would not have been possible without the help and support of people who were ready to leave daily luxury and safety behind and confront these challenges with me and share bruises, tears, laughs and work: Alemayehu Kifle (senior

laboratory technologist), Bamlaku Tilahun and Solomon Gebrie were far more than official drivers, they became hard field workers, translators, conflict solvers and good friends. In these adventures we were also accompanied by DVM students and field technicians who I would like to thank warmly and with whom we shared many unforgettable moments from the wuthering Sanetti plateau at 4000 m to the remote Hamer tribes in South Omo: Nesredin Hussein, Mohamed Sanni, Habtamu Tadelle, Tesfaye Erenso, Mesgebu Asmro and Gebrehiwot Chegen.

Of course all the field work could not have been done without the willingness and collaboration of over 2000 farmers and Woreda officials in all study sites. A warm thank you to all of them. I would also like to thank here all the staff involved in the abattoir study of Jinka, Woldia, Addis Abeba, Butajira, Gondar, Ghimbi and Ato Habtamu Mamo from Luna export abattoir in Modjo.

I am grateful to two wonderful people, Marta Gabre-Tsadick and Demeke Tekle-Wold who allowed me to start a long term productivity study in their farm of Project Mercy (Butajira).

In Ethiopia still, I am deeply grateful to all the people involved directly and indirectly in the wildlife study from Ethiopia itself but also from abroad, who believed in me, supported and helped me throughout the study with logistics, taking samples, sharing samples and ideas and their wonderful friendships: Dr. Kifle Argaw (EWCA) and all the staff from EWCA, Dr. Yirmed Demeke (WSD), Dr. Michael Kock, Dr. James Malcom (Ethiopian Wolf Conservation), Hermann Mossbrugger, Dr. Keith Leggett and Diets Okhuysen. Special thoughts to two wonderful colleagues and friends who passed away tragically in 2008 and in whom I am very much indebted: Prof. Jeheskel (Hezy) Shoshani, elephant specialist who was victim of a car bomb in Addis Abeba in May 2008 and Dr. Zahoor Kashmiri, wildlife veterinarian, killed by an elephant during common field work in Babilie in September 2008 (Ethiopia). You will always have a very special place in my heart.

I would also like to thank Jason and Nassos Roussos (PH) for their logistic support during the sampling of wildlife specimens and especially Jason for your tireless commitment for our common study and hard work in the field.

Back in Switzerland at STI, I wish to thank all the members from HAH and GWE. I enjoyed the company of many friends during each of my visits at STI, sharing coffee breaks, discussions and updates and who helped me in so many ways even while I was away in Addis Abeba. Among them Mahamat Bechir, Salomé Dürr, Lena Fiebig, Balako Gumi, Jan Hattendorf, Markus Hilti, Stephanie Knopp, Sabrina Locatelli, Richard Ngandolo, Borna Müller, Bianca Plüss, Amanda Ross, Jennifer Saurina, Peter Steinmann, Daniel Weibel, and Monica Wymann. A warm thank you goes to Margrith Slaoui and Christine Walliser for their secretarial support, Heidi Immler and her staff in the library and to Dominique Forster and his IT team.

This work would have been very difficult to realize without the constant support of many dear friends in Ethiopia, in Switzerland and around the world, who helped me in so many different ways. Among them Abraham Aseffa, Etsegenet, Tsion and Aleph who became my second family in Ethiopia, Dawn Ashby, Derek Armstrong, Tom Bailey, Mark Broomfield, Geneviève Butler, Christopher Franz, Brian Greenough, Shawn Hayes, Markus Ischer, Nick Jacobsen, Alanda Lennox, James and Anne Malcom, Aron Mujumdar, Corrie Peaglow, Daniel and Dorothee Roth, Bernard Semadeni, Serena Sofiantini, Yves Stranger, and staff from the Swiss Embassy in Addis Abeba: Peter Rheinhardt, Nathalie Croce, Christine Liechti and Sonja Eichenberger. Special thanks go to Paul Evangelista in Colorado for giving me strength and motivation to always pursue my PhD, to Jessica Fortin, Anne Roberts, Wiebke Foerch, Brian Robertson and Stefan Berg for reading my manuscripts and finally to Alessandro Lancia for always being here as a listener, a trustful friend and constant support in facilitating the wildlife study.

I am very grateful to the Wellcome Trust in the UK who funded entirely this study and to the University of Basel for covering the printing cost of this thesis.

Finally I would like to thank my parents and family in Switzerland who gave me constant support, encouragement and always believed in me.

2. Summary

Ethiopia has recently been focusing on intensive dairy cattle farming in order to supply the growing demand for milk. For this purpose Holstein Frisians have been imported, bred and distributed in farms especially around Addis Ababa. However, Holstein (*Bos taurus*) although giving more milk than traditional zebu (*Bos indicus*) seem to be more susceptible to bovine TB (BTB). Ethiopia ranks worldwide 8th in the number of newly diagnosed TB cases, and the incidence of extra pulmonary TB was shown to be high. Therefore, the following research questions have been raised: What is the prevalence of BTB in cattle? What is the contribution of *M. bovis* in the national TB prevalence? Which strains of *M. bovis* are present in cattle and humans? A consortium funded by the Wellcome Trust (UK) and involving institutions from the UK, Switzerland, Ethiopia, Ireland and Kenya was established in 2005 study BTB in Ethiopia and to address these questions. The overall ultimate goal of the project is to measure the cost of BTB by assessing its impact on the livestock and public health sector and to suggest the most profitable intervention strategies. This thesis contributes to the overall BTB project by providing baseline epidemiological and economical data needed for the development of a SIR animal-human transmission model, and for the estimation of the economical impact of BTB in the livestock sector in Ethiopia.

We assessed field prevalence of BTB using the comparative intradermal test (CIDT) in 6194 cattle in 5 different Woredas (districts) from Amhara, Oromia, and SNNPR regions. Four of our study sites were located in the Ethiopian Highlands and were characterized by extensive mixed crop-livestock farming with predominantly local zebu breeds, whereas the last study site was a pastoralist area in the lowlands of south Omo (SNNPR). We performed a repeated cross-sectional study in cattle in 3 of the Woredas, over 3 years. In comparison to Central Ethiopia, which is characterized by the presence of a higher number of exotic breeds and more intensive farming practice, apparent prevalence of BTB in our study sites was very low (when using the official OIE definition for positive reaction), with a minimum of 0% in the Bale Mountains and a maximum of 1.3% in

Bako-Gazer and South Omo. We discussed the use of different cut-offs for the interpretation of the skin test results.

In addition we interviewed in those study sites 450 farmers whose cattle were tested for BTB in order to assess the risk for skin test positivity in cattle and TB diagnosis in humans. Purchase of cattle and the presence of livestock other than cattle were a significant risk factor for skin positivity in cattle. None of the classical risk factors such as consumption of raw animal products, and close contact with animals were significantly linked to the presence of human TB cases in households.

Since wildlife has been shown to be a potential reservoir for BTB in other countries we started the first BTB survey in Ethiopian wildlife, in close collaboration with the Ethiopian Wildlife Department and professional and recreational hunters. We sampled specimens from 133 animals and performed serology in order to try to validate the rapid test (RT), as well as culture (gold standard) followed by molecular typing of lymph node samples. So far, no *M. bovis* were isolated from the 28 mammal species sampled (but molecular analysis is still pending for a number of samples). However, 23% of the tested animals, including flagship endemic rare species were sero-positive. Since we also sero-tested live animals, culture could not be performed nor diagnosis confirmed in these animals. Nearly half of the culture of samples yielded environmental Mycobacteria, their role has still to be assessed.

In an additional investigation, 684 farmers were included in two independent surveys in our study sites. This investigation highlighted the delicate balance between livestock, cereal cropping and natural resources, the trend towards unsustainable use of natural resources, fuelling a decrease in grazing land, human conflicts, and encroachments on wildlife habitats and the need of a more holistic approach to secure future sustainability of natural resources. Herd structure analysis showed that 52% of the total animals were males, among them $\frac{1}{4}$ were oxen. Since oxen are intricately associated with agriculture (e.g. ploughing, harvesting, threshing), farmers need to maintain a minimum herd size in order to secure at least 2 draft animals, at all times. A disease such as BTB is therefore likely to have a major impact on draft animals rather than on milk production in rural

areas. Diseased draft animals are very likely to work less in the fields, leading to decreased cropping yields, thus contributing to poverty and famine.

Some studies assessing the economical impact of BTB on the livestock sector were started during this PhD but will go beyond the timeframe of the thesis. Economical analysis of the impact of BTB to the society is not part of this thesis but the approach will be discussed. We assessed the baseline productivity of cattle kept under traditional extensive husbandry practice by following 21 farms (700 animals) over a period of four years and keeping for each farm a herd book on productivity parameters (weight, milk, fertility, entry, exit). In addition a long term study was started in collaboration with other members of the consortium, to assess the impact of *M. bovis* on live animal and carcass weight in six abattoirs.

Finally the data collected during the thesis suggest that the final analysis of BTB (economical impact, transmission model, and intervention strategies) should be performed on two distinct levels: 1) the urban and peri-urban level characterized by intensive dairy farms, high numbers of exotic breeds and their cross breeds, high milk production but also high BTB prevalence and 2) the rural level characterized by extensive farming, local zebu breeds, low BTB prevalence and probable impact of the disease on draft power rather than on milk.



3. Zusammenfassung

Äthiopien hat sich seit einiger Zeit auf intensive Milchkuhhaltung konzentriert, um der steigenden Nachfrage nach Milch gerecht zu werden. Es wurden Holsteinrinder importiert, gezüchtet und an Bauernhöfe verteilt, vor allem in der Umgebung von Addis Ababa. Die Hosteinkühe (*Bos taurus*) geben zwar mehr Milch als traditionellen Zebu Rassen (*Bos indicus*), scheinen aber empfänglicher für Rindertuberkulose zu sein. Äthiopien kommt weltweit an achter Stelle bezüglich neu diagnostizierten Tuberkulosefällen (TB) und die Inzidenz von extrapulmonärer TB ist sehr hoch. Aus diesem Grund wurden folgende wissenschaftliche Fragen gestellt: wie hoch ist die Prävalenz von Rindertuberkulose beim Rindvieh? Welcher Anteil hat und welche Rolle spielt *Mycobacterium bovis* in der Nationalen TB Prävalenz? Welche *M. bovis* Stämme existieren beim Rindvieh und beim Mensch? Ein Konsortium von Institutionen aus der Schweiz, UK, Äthiopien, Irland und Kenia, finanziert vom Wellcome Trust (UK), wurde 2005 aufgestellt mit dem Ziel die Rindertuberkulose in Äthiopien zu untersuchen und obige Forschungsfragen zu beantworten. Das Projekt hat das Ziel, die Kosten, die durch die Rindertuberkulose verursacht werden zu erfassen, indem man die Bedeutung der Krankheit sowohl im Nutztiersektor als auch im Gesundheitswesen berechnet, um schliesslich kostengünstige Interventionsstrategien vorschlagen zu können. Diese Dissertation trägt zum gesamten Projekt bei, indem sie epidemiologische und wirtschaftliche Daten generiert, die nötig sind um nachfolgend ein Tier-Menschkrankheits-Übertragungsmodell zu entwickeln, und um die wirtschaftliche Auswirkung von Rindertuberkulose im Nutztiersektor in Äthiopien zu beurteilen.

Die Prävalenz von Rindertuberkulose wurde bei 6194 Rindern mit dem komparativen intradermalen Tuberkulintest (CIT) getestet. Die Rinder stammten aus 5 verschiedenen Woredas (Distrikte) in der Amhara, Oromia und Southern Nations, Nationalities, and People's Region (SNNPR) Regionen. Vier unserer Studienorte befanden sich im Äthiopischen Hochland, wo Bauern sowohl extensive Rindviehhaltung als auch Ackerbau betrieben und wo vor allem lokale Zebu Rassen gehalten wurden. Unser letzter

Studien Ort befand sich im südlichen Omo (SNNPR), ein Gebiet, das vor allem durch pastorale Hamar und Karo Völker bewohnt war.

In 3 der Woredas wurde eine Querschnittstudie mit dem CIT über 3 Jahre durchgeführt. Verglichen mit Zentraläthiopien, wo sich eine hohe Anzahl an exotischen Rindvieh Rassen befand, die oft intensiv gehalten werden, haben wir in unserer Studie eine sehr niedrige apparente Rindertuberkulose Prävalenz gefunden, mit einem Minimum von 0% in den Bale Bergen und einem Maximum von 1.3% in Bako-Gazer und Süd Omo (Benutzung der offiziellen OIE Definition für Positivität). Die Interpretation der Resultate bei verschiedenen cut-offs wird auch diskutiert.

Zusätzlich wurden 450 Bauern interviewet, deren Tiere für Rindertuberkulose getestet worden sind, um die Risikofaktoren zu erfassen, die zu einem positiven CIT beim Rind und zu TB Diagnose beim Mensch führen. Der Zukauf von Rindern und die Präsenz von anderen Nutztieren waren signifikante Risikofaktoren für einen positiven CIT beim Rindvieh. Es wurde kein statischer Zusammenhang gefunden zwischen den möglichen Risikofaktoren wie beispielsweise das Einnehmen von rohen tierischen Produkten und dem Vorkommen von TB bei den Leuten.

Auch in anderen Ländern ist beschrieben worden, dass Wildtiere als Reservoir für Rindertuberkulose agieren. Wir haben die erste TB Studie in Äthiopischen Wildtieren durchgeführt in enger Zusammenarbeit mit dem Äthiopischen Wildtier Departement, sowie beruflichen und Hobbyjägern. Es wurden Proben von 133 Wildtieren gesammelt. Wir haben den serologischen „Rapid Test“ validiert und Bakterienkulturen von Lymphknoten (Goldstandard) gemacht, welche dann weiter mit Molekularmethoden untersucht worden sind. Bis jetzt wurden aus den 28 Säugetier Proben keine *M. bovis* isoliert, aber die Analysen sind noch am laufen. Hingegen, waren 23% der serologisch getesteten Tiere positiv, davon auch seltene endemische Tierarten. Da auch lebende Tiere serologisch getestet worden sind, konnte für Diese keine Kulturen angesetzt werden, und somit die endgültige Diagnose nicht gestellt werden. Wir isolierten Umweltmykobakterien in fast der Hälfte der Kulturen, und deren Rolle ist noch weitgehend unbekannt.

In einer weiteren Studie wurden 684 Bauern aus unseren Studiengebieten in zwei unabhängigen Befragungsrunden eingeschlossen. Diese Studie zeigte das sensible Zusammenspiel zwischen Viehhaltung, Ackerbau und natürlichen Ressourcen. Es zeigte die unvermeidbare Intensivierung an der Schnittstelle Mensch-Vieh-Wildtier, dass zu unnachhaltiger Nutzung von natürlichen Ressourcen führt, zu weiterer Verminderung von Weiden, zu Konflikten und zu Übergriffen auf Wildtierhabitats. Eine Herdenstrukturanalyse hat aufgezeigt, dass 52% der Herden aus männlichen Tieren bestanden davon ein Viertel Ochsen. Ochsen sind eng mit der Landwirtschaft verbunden (Pflügen, Dreschen, Ernten, Transport). Die Bauern müssen eine Mindestzahl an Rindern halten um ständig mindestens 2 Ochsen zu haben. Eine Krankheit wie die Rindertuberkulose kann demzufolge schwere Folgen auf die tierische Zugkraft haben in ländlichen Gebieten. Kranke Tiere vermögen nicht mehr die Felder zu bearbeiten, was zu einer verminderten Ernte, Armut und Hungersnot führen kann.

Zwei andere Studien haben die wirtschaftliche Auswirkung von Rindertuberkulose auf das Nutzvieh studiert. Diese Studien sind noch nicht abgeschlossen wegen der benötigten langen Datensammelzeit, werden aber während dem Jahr nach der Dissertation vollständig abgeschlossen. Der Ansatz und Methode für wirtschaftliche Analysen werden beschrieben. Wir haben die Grundlage Produktivität von Rindvieh die unter traditionellem extensivem Systeme gehalten werden untersucht, indem wir 21 Bauernhöfe mit 700 Tieren über 4 Jahren verfolgten. Auf jedem Hof wurde ein Herdenbuch betrieben, in dem Produktivitätsparameter aufgeschrieben wurden (Gewicht, Fertilität, Milch, Neuerwerbungen und Abgänge). Zusätzlich wurde eine Langzeitstudie in 6 Schlachthöfen, in Zusammenarbeit mit einer anderen Gruppe des Konsortiums gestartet, um die Auswirkung von *M. bovis* auf das Schlacht- und Lebendgewicht zu untersuchen.

Abschliessend können die Schlussfolgerungen der Dissertation folgendermassen zusammengefasst werden. Die endgültigen Analysen über Rindertuberkulose in Äthiopien (wirtschaftliche Auswirkung, Übertragungsmodell und Interventionsstrategien) müssen auf zwei Ebenen untersucht werden: 1) Stadt und Umgebung mit einer intensivierten Milchviehhaltung mit hohen Anzahlen von exotischen Rassen und deren Kreuzungen. Diese Tiere haben eine höhere Rindertuberkuloseprävalenz als traditionelle Zeburassen, 2) ländliche Gebiete, wo man fast ausschliesslich traditionelle Zebu Rassen

extensiv gehalten werden, und niedrige Rindertuberkuloseprävalenzen aufweisen, aber die Auswirkung der Krankheit auf die tierische Arbeitskraft grosse Auswirkungen haben kann.

4. Résumé

L’Ethiopie s’est récemment embarquée dans un programme d’élevage intensif de bovins afin de répondre aux demandes grandissantes des villes en lait. Du bétail de race Holstein a été importé, élevé puis distribué dans les fermes notamment dans les environs d’Addis Abeba. Les vaches Holstein (*Bos taurus*), bien que fournissant plus de lait que les zébus traditionnels (*Bos indicus*) semblent par contre être plus susceptibles à la tuberculose bovine. L’Ethiopie termine au 8ème rang mondial dans le classement des cas de TB nouvellement diagnostiqués et l’incidence de la tuberculose extra-pulmonaire y est élevée. Cette situation a soulevé de nombreuses questions, notamment quelle est la prévalence de la tuberculose bovine dans le bétail? Quel rôle joue *M. bovis* dans la prévalence nationale de la tuberculose? Quelles souches de *M. bovis* trouve-t-on chez le bovin et chez l’homme? Un consortium financé par le Wellcome Trust (UK) a été mis sur pied en 2005 pour répondre à ces questions et pour étudier la tuberculose bovine en Ethiopie. Celui-ci comprend des institutions du Royaume-Uni, de la Suisse, de l’Ethiopie, de l’Irlande et du Kenya. Le but final du projet est de calculer le coût de la tuberculose bovine pour la société éthiopienne par l’évaluation de son impact sur le bétail ainsi que sur le service de santé public, afin de pouvoir proposer par la suite les stratégies d’intervention les plus profitables. Cette thèse contribue au projet car elle fournit des données épidémiologiques et économiques de base, nécessaires ultérieurement d’une part au développement d’un modèle de transmission entre les animaux et les hommes et d’autre part à l’estimation de l’impact économique de la tuberculose bovine sur l’élevage en Ethiopie.

Nous avons fait une étude transversale de tuberculinisation intradermale comparative, afin d’évaluer la prévalence de la tuberculose bovine chez 6194 bovins provenant de 5 Worédas (districts) différents se trouvant dans les régions Amhara, Oromia et Southern Nations, Nationalities, and People's Region (SNNPR). Quatre de ces régions étaient situées dans les Highlands Ethiopiens, caractérisés par une détention extensive du bétail comprenant principalement des races bovines locales) et d’une agriculture céréalière. La dernière était une région pastoraliste dans le sud de l’Omo (SNNPR). Nous avons répété l’étude sur 3 ans dans 3 de ces 5 régions. Nous y avons observé une prévalence faible

avec un minimum de 0% dans les montagnes Balé et un maximum de 1.3% à Bako-Gazer et Omo (en utilisant la définition du cut-off officiel de l'OIE), contrairement aux résultats trouvés en Ethiopie centrale, où l'on trouve un plus grand nombre de races exotiques (Holstein) tenues de manière plus intensive. Nous avons également discuté de l'interprétation du résultat du test intradermal en utilisant différent cut-off.

Nous avons interviewé dans ces sites 450 paysans dont les animaux ont été testés. Ceci afin d'évaluer les facteurs de risques expliquant une positivité du test intradermal chez le bovin et/ou une tuberculose confirmée chez les hommes. L'achat de bétail ainsi que la présence d'animaux d'élevage autres que le bétail ont été des facteurs statistiquement important menant à un test intradermal positif. La présence de cas de tuberculose humaine n'a pu être lié à aucun des facteurs à risque traditionnels connus, comme par exemple l'ingestion de produits animaliers crus ou encore un contact proche avec les animaux.

Le fait que les animaux sauvages puissent être un réservoir pour la tuberculose bovine, nous a incité à lancer la première étude sur la faune sauvage en Ethiopie, en collaboration avec l'"Ethiopian Wildlife Department" et des chasseurs. Nous avons échantillonné 133 animaux, fait une sérologie afin de valider le test rapide et avons également fait une culture cellulaire (standard or) suivi par un typage moléculaire des échantillons des ganglions. Aucune souche *M. bovis* n'a été isolé dans les échantillons provenant des 28 espèces de mammifères testés à ce jour (analyse moléculaire en cours). 23% des animaux testés sérologiquement ont été positifs, incluant également des espèces endémiques rares. Vu que nous avons aussi testé sérologiquement des animaux vivants, le diagnostique n'a pas toujours pu être confirmé par culture chez ces animaux. Des mycobactéries environnementales ont été isolées dans presque la moitié des cultures. Leur rôle doit encore être élucidé.

Dans une étude supplémentaire, 684 paysans ont été inclus dans deux rondes indépendantes d'interviews. Cette étude a montré l'équilibre délicat existant entre l'élevage, l'agriculture et les ressources naturelles ainsi qu'une tendance vers une utilisation non pérenne des ressources naturelles menant à une diminution des pâturages, des conflits ainsi qu'à une utilisation des habitats à faune sauvage. Une approche plus

globale est nécessaire, afin de sécuriser la pérennité des ressources naturelles. Le pourcentage de mâles dans le cheptel est élevé (52%), dont ¼ sont des boeufs. Vu que ces derniers sont étroitement liés à l'agriculture (labourage, moisson, battage), les paysans doivent garder un certain nombre d'animaux afin de d'assurer en permanence un minimum de 2 boeufs. Une maladie comme la tuberculose aurait, dans ces milieux ruraux, un plus grand impact sur ces animaux à traction que sur la production laitière. Ces animaux ne seraient plus capables de travailler dans les champs comme des animaux en bonne santé, ce qui diminuerait la production céréalière contribuant ainsi à la pauvreté et aux famines.

Certaines études visant à évaluer l'impact économique de la tuberculose ont commencé pendant ce PhD mais ne sont pas encore terminées. L'analyse économique de l'impact de la tuberculose ne fait pas partie de cette thèse mais l'approche analytique y est discutée. Nous avons évalué la productivité de base du bétail en détention extensive traditionnelle en faisant des visites bimensuelles dans 21 fermes (700 animaux) sur une période de 4 ans. Pour chaque ferme et animal, les paramètres de productivité ont été notés dans un "herd book". De plus, une étude à long terme a débuté en collaboration avec un autre groupe du consortium afin d'évaluer l'impact de *M. bovis* sur le poids des animaux vivants et le poids des carcasses dans 6 abattoirs.

En conclusion, les données collectées pendant cette thèse permettent de suggérer que l'analyse finale de la tuberculose bovine (impact économique, model de transmission et interventions) devrait se faire à deux niveaux différents: 1) le niveau urbain et périurbain caractérisé par une détention plus intensive de races exotiques, une production laitière plus élevée mais aussi une plus haute prévalence de la maladie et 2) le niveau rural caractérisé par une détention extensive de zébus locaux, une prévalence basse de tuberculose bovine et un impact probable de la maladie sur les animaux à tractions plutôt que sur la production laitière.



5. Summary in Amharic

ማጠቃለያ

ከቅርብ ጊዜ ወዲህ፣ ኢትዮጵያ ስያሪን የሚሄደውን የወተት ፍላጎት ለማሟላት፣ የወተት ከብቶች የተጠናከረ ስርዓታዊ ልማት ላይ ስያተኮረች ትገኛለች። ለዚህም ተግባር ስንዲውሉ ሆልዲንግን ፍሪሲያን ላሞች ወደሀገር ገብተው ለግብርና፣ በተለይም በአዲስ አበባ ዙሪያ ተሰራጭተዋል። ነገር ግን ሆልዲንግ (ቦስ ቶሪስ) ከነገሮቹ ዚቡ (ቦስ ኢንዲክስ) የበለጠ ወተት ቢሰጡም ለከብት ቲቢ ግን የበለጠ ተጠቂ ናቸው። ኢትዮጵያ ባለም የቲቢ ህመም አዲስ የሚገኝባቸው ሰዎች ቁጥር 8ኛ ደረጃ ላይ ስትሆን ከላንግ ውጪ የሚገኝ ቲቢ ቁጥርም በከፍተኛ መጠን ይታያል። ከዚህ በመነሳት የሚከተሉት የምርምር ጥያቄዎች ተነስተዋል፤ የከብት ቲቢ ስርጭት መጠን ምን ያህል ነው? በአገሪቷ ውስጥ ካለው ቲቢ ከከብት የሚተላለፍ ቲቢ ድርሻ ምን ያህል ነው? በሰውና ከብት ውስጥ የሚገኙት የማይኮኮካቲርያም ቦቪስ ዝርያዎች ምን ዓይነት ናቸው? ከዚህን ጥያቄዎች ለመመለስ በ2005 ዓ.ም ሌሌ የፍይትድ ኪንግደም፣ ስውዘርላንድ፣ ኢትዮጵያ፣ አየርላንድ ስና ኬንያ የምርምር ተቋሞች በዌልካም ትሪስት (ፍይትድ ኪንግደም) የሚደገፍ ለንድ ቡድን (ኮንሰርቲየም) አቋቋሙ። የዚህ ፕሮጀክት አጠቃላይ ግብ የከብት ቲቢ በጎንደርና በሀብረተሰቡ ጤና ላይ የሚያደርሰውን ኪሳራ መጠን ለመገምገምና ይህን ለማድረግ የሚችሉ አትራፊ ስትራቴጂያዊ ተግባሮችን ለይቶ ተመራጭ የመፍትሄ ጎሳቦችን ለማቅረብ ነው። ይህ ቲቢ መሠረታዊ የኤፒዳሚዮሎጂና የኢኮኖሚ መረጃዎችን መነሻ ያደረገ የከብትና ሰው መሃል የበሽታ መተላለፍ ኤስ አይ አር ሞዴል ተመርኩዞ በጎንደር ሀብት ዘርፍ ላይ የከብት ቲቢ የሚያደርሰውን የኢኮኖሚ ጉዳት መጠን ግምት በማውጣት ለአጠቃላይ የከብት ቲቢ ፕሮጀክት የበኩሉን አስተዋጽኦ ያደርጋል።

በ5 የተለያዩ የአማራ ፣ አሮሞና ደቡብ ክልል ወረዳዎች የሚገኙ 6194 ከብቶች ላይ የቆዳ መርፌ ምርምራ (ኮምፓራቲቭ ኢንትራደርማል ቲስት) በማድረግ የከብት ቲቢን የስርጭት መጠን መርምረናል ፣ አራቱ ያጠናቀቀው ቦታዎች በኢትዮጵያ ደጋማ ክልሎች የሚገኙ የከብቶች ስርሻ ቅልቅል ሰፊ የአዘመራ ቦታዎችና የዜቡ ዝርያ ከብቶች የሚገኙባቸው ሲሆኑ ለምስተኛው ቦታ በደቡብ አሞ (ደቡብ ክልል) የሚገኝ ቆላማ የአርብቶ አደር ቦታ ነው።

በ3ቱ ወረዳዎች ተመላላሽን 3 ክርስ ሴክሽናል ጥናት ለ3 ዓመት አካሄደናል። በዛ ያለ የውጭ ዝርያ ካለበትና የከብት ልማት ባለፈው ከሚካሄድበት ከመሃል ኢትዮጵያ በተለየ በነዚህ ጥናት ባደረግንባቸው ቦታዎች (በአ አይ ኢ የቆዳ መርፌ ምርመራ አወሳሰን መሠረት ያለው የከብት ቲቢ ስርጭት መጠን በጣም ዝቅተኛ ሆኖ አግኝተነዋል። ዝቅተኛው መጠንም በባሌ ተራራዎች 0% ሲሆን ከፍተኛው በባኮ ጋዘርና በደቡብ አም ራስክ 1.3% ብቻ ነበር። በቆዳ መርፌው ምርምራ ውጤት አንባብ ላይ የተለያዩ የበሽታውን መኖርና አለመኖር መለያ ወሳኞች በበሽታው ስርጭት መጠን ላይ የሚያሳድሩትን የአተረጓጎም ሁኔታዎች ተንትነናል። በተጨማሪም ፣ በጥናቱ ቦታ የከብቶች ባለንብረት የሆኑ 450 ገበሬዎች ጋር ሰው ላይ ስለሚከሰተው ቲቢና በከብቶች የቆዳ ምርምራ ስለሚገኘው የከብት ቲቢ መነሻ ምክንያት ላይ ውይይት አድርገናል። አዲስ ከብት ገዝቶ መጨመርና ከከብት ጋር ሌሎች የቤት ርንጎት መኖር ለመርፌ ቆዳ ምርመራው የከብት ቲቢ መገኘት ዋነኛ ተጠርጣሪ ምክንያት መሆናቸውን አውቀናል። ፍሮ ከሚባወቁት ተጠርጣሪ ምክንያቶች መሃል ለምሳሌ ጥሬ የግንጎት ውጤቶች መመገብ ፣ ከግንጎት ጋር በቅርብ መኖር ለሰው ቲቢ መገኘት ተጠርጣሪ ሆነው አልተገኙም።

የፍሮ አራዊት ለከብት ቲቢ መነሻ መሆናቸው በሌሎች አገሮች ስለተረጋገጠ ፣ በኢትዮጵያም ከኢትዮጵያ የፍሮ ግንጎት ክፍልና ከባለሙያና የመዘናኛት አዳኞች ጋር በመተባበር የመጀመሪያውን የፍሮ አራዊት የከብት ቲቢ ስርጭት ጥናት አካሄድን። ከ113 ግንጎት ደም ወስደን ራፒድ ቲስትን ለመፈተሽ ፣ የጠጠር ፍሙና የተውሳክ ማሳደግ ጥናት (ካልቸርና) የሰርሱጂ ምርመራና የጠጠር ፍሙና ሞለኪዩላር ምርመራ አካሄድን። ስካላሁን ከ28 የአጥቢ ግንጎት ዘር (ማማል ስፒሽኬስ) ዓይነቶች መሀል አንድም ኤም ቮቪስ አልተገኘም። (የሞለኪዩላር ምርመራው ግን ግንደቀጠለ ነው።) ነገር ግን ፣ በሰርሱጂ ምርመራ ለመጥፋት የተቃረኑ ብርቅጭ ግንጎት ዝርያዎችን ጨምሮ በ23% የተመረመሩ አራዊት ውስጥ የበሽታው ምልክት ተገኝቶአል። ደም የተወለደላቸው አራዊት በሀይወት ያሉም ጭምር ስለነበሩ የሥጋ ምርመራ በማድረግ ተውሳክ አሳድጎ ማረጋገጥ አልተቻለም። ካልቸር ከተደረጉት ውስጥ ግማሽ ያህሉ

የአካባቢ ማይኮባክቴሪያ አሳድገዋል። ይህም ምን ማለት ስንደሆነ ገና መረጋገጥ ይኖርበታል። በመቀጠል፣ በሁለት የተለያዩ ቦታዎች 684 ገበሬዎችን ያካተቱ ሁለት ጥናቶች ተካሂደዋል። ከዚህ የተገኘው ውጤት የገለጸው ነገር ቢኖር በከብት ስርዓት፣ በአዘርዕት ስርዓት በተፈጥሮ ሁኔታ መሀካል ያለውን ስነ ሚዛን ና የተፈጥሮ ሃብት መመናመን የሚያስከትለውን የግጦሽ መሬት ማግኘት፣ የሰው ግጭት፣ የዱር ስንሳት ክልል ላይ የደረሰ ያለውን ጥበት ና የከብት ሁሉ ችግሮች መፍትሄ ና ለወደፊት የአካባቢ ልማት ለዘላቂነቱ በአንድ ወጥ ችግር መመራት ያለበት መሆኑን ነው።

የከብት አያያዝ ጥናት ስንዳየው ከባለንብረቶች ከብቶች መሃል 52% ወንዶች ሲሆኑ 1/4 ኛው በሬዎች ናቸው። በሬዎች ከስርዓት ጋር ጅምር የተጣመሩ በመሆናቸው ስርዓት ምርት ና ስህል መውቃት) አርሶ አደሮች በማናቸውም ጊዜ ቢያንስ አንድ ጥማድ ስንዲኖራቸው ያስፈልጋል። ስንደቲቢ አይነቱ ህመም ከወተት ምርት ይልቁን በገጠር የስርዓት አቅም ላይ የበለጠ ጉዳት ያመጣል። የባህሪ የስርዓት በሬዎች ማሳ ውስጥ ጠንክረው ለመሥራት ስለማይችሉ ስርዓት ምርት ማግኘት ለድህነትና ረሃብ የበኩላቸውን አስተዋጽኦ ያደርጋሉ።

በዚህ የፕሮጀክት ዲ ሥራ የተጀመሩ የከብት ቲቢ በከብት ልማት ዘርፍ ላይ የሚያስደረገውን የኢኮኖሚ ተጽእኖ የሚመለከቱ አንዳንድ የምርምር ሥራዎች ከዚህ ቲቢ በኋላም ይቀጥላሉ። የከብት ቲቢ በህብረተሰቡ ላይ የሚያሳድረው የኢኮኖሚ ዘርዘር ንፅፅር የዚህ ቲቢ አካል ባይሆንም የጥናቱን አቅጣጫ ስንብራራለን።

በልማታዊ የከብት አያያዝ ዘዴዎች ሥር የተያዙ 21 ስርዓቶች (700 ስንሳት) ላይ ለስንዳንዱ ባለንብረት የምርት መጠን (ክብደት፣ ወተት፣ ስርዓት፣ ግዢ፣ ሽያጭ) በመመዘን ለአራት ዓመት ክትትል ስያደረግን ነው። ከምርምር በድኑ ሌሎች አባላት ጋር በመተባበር በፊት ገቢዎች የባረዱ ከብቶችን ክብደት በመውሰድ ቲቢ በፊት ስንሳት ላይ የሚያደርሰውን ክፍት ለማጥፋት የረጅም ጊዜ ምርምር የተካሄደ ነው።

ለማጠቃለል ፣ ለዚህ ቴሌቪዥን በተደረገው ጥናት የተሰበሰቡ መረጃዎች የሚጠቁሙት የክብት ቴቢ ጉዳይ (የኢኮኖሚ ጉዳት፣ የስርጭት ሞዴል ፣ የመፍትሄ ስትራቴጂ) በሁለት ደረጃዎች መታየት ገንዘብነት ነው።

1. በከተማና ከተማ ዙሪያ የተሰበሰበ የወተት ክብት ልማት ፣ የውጭ ገቢ ገርያና ክልል ክብቶች በብዛት መኖር፣ ከፍተኛ የወተት ምርት ፣ ና ነገር ግን ከፍተኛ የክብት ቴቢ ስርጭት
2. በገጠር - የተበታተነ የክብት ልማት፣ የሀገር ውስጥ የክብት ገርያዎች፣ ዝቅተኛ የክብት ቴቢ ስርጭትና ምናልባትም ከወተት ጎብት ይልቅ በፍጥነት ለቅም ላይ ጉዳት የሚያደርስ ችግር ናቸው።

6. Abbreviations

AFB	Acid Fast Bacilli
AHRI	Armauer Hansen Research Institute
AIDS	Acquired Immune Deficiency Syndrome
ALERT	All Africa Leprosy, Tuberculosis and Rehabilitation Training Centre
BCG	Bacillus Calmette-Guèrin
BTB	Bovine Tuberculosis
BVDV	Bovine Virus Diarrhoea Virus
CDC	Center for Disease Control
CIDT	Comparative intradermal test
CMI	Cell Mediated Immunity
DA	Development agent
DOTS	Direct Observed Treatment Strategy
DTH	Delayed Typed Hypersensitivity
DNA	Deoxyribonucleic Acid
EPTB	Extra pulmonary tuberculosis
FAO	Food and Agriculture Organization
FIV	Feline Immunodeficiency Virus
GEE	Generalized Estimating Equation
GDP	Gross Domestic Product
HIV	Human Immunodeficiency Virus
IDP	Internally displaced people
ILRI	International Livestock Research Institute
IUCN	International Union for Conservation of Nature
MTC	Mycobacteria Tuberculosis Complex
NGO	Non Governmental Organization
NTM	Non Tuberculous Mycobacteria
OIE	Office international des Epizooties
PCR	Polymerase Chain Reaction

List of abbreviations

PPD	— Purified Protein Derivate
rRNA	Ribosomal Ribonucleic Acid
RT	Rapid Test
SIV	Simian Immunodeficiency Virus
SNNPR	Southern Nations, Nationalities, and People's Region
STI	Swiss Tropical Institute
TB	Tuberculosis
TBLN	Tuberculosis lymphadenitis
TLU	Tropical Livestock Unit
TVET	Technical and Vocational Education Training
VLA	Veterinary laboratories Agency
WCS	Wildlife Conservation Society
WHO	World health organization
WTO	World Trade Organization
ZN	Ziehl Neelson

7. Introduction

7.1. Bovine tuberculosis

7.1.1. Aetiology

Bovine TB is an infectious disease caused by *Mycobacterium bovis*, a member of the *Mycobacterium tuberculosis* complex (MTC), a closely related group of Mycobacteria including *M. tuberculosis*, *M. africanum*, *M. bovis*, *M. bovis* bacilli Calmette-Guérin (BCG), *M. canettii* and *M. caprae comb. nov.* (Fig 1) [121, 4, 84]. MTC bacteria are 99.9% similar in regard of their DNA, with identical 16S rRNA sequences [17]. However, there are distinct differences in phenotype, host ranges and pathogenicity [7]. *M. bovis* is a very resistant pathogen; it has been reported to survive in cow faeces for more than 5 months and in soil for up to 2 years depending on weather conditions [81, 58, 132, 31]. In developing countries manure fertilization of arable land is a common practice, which might represent a potential source of infection for animals and humans through contaminated pastures and vegetables [7].

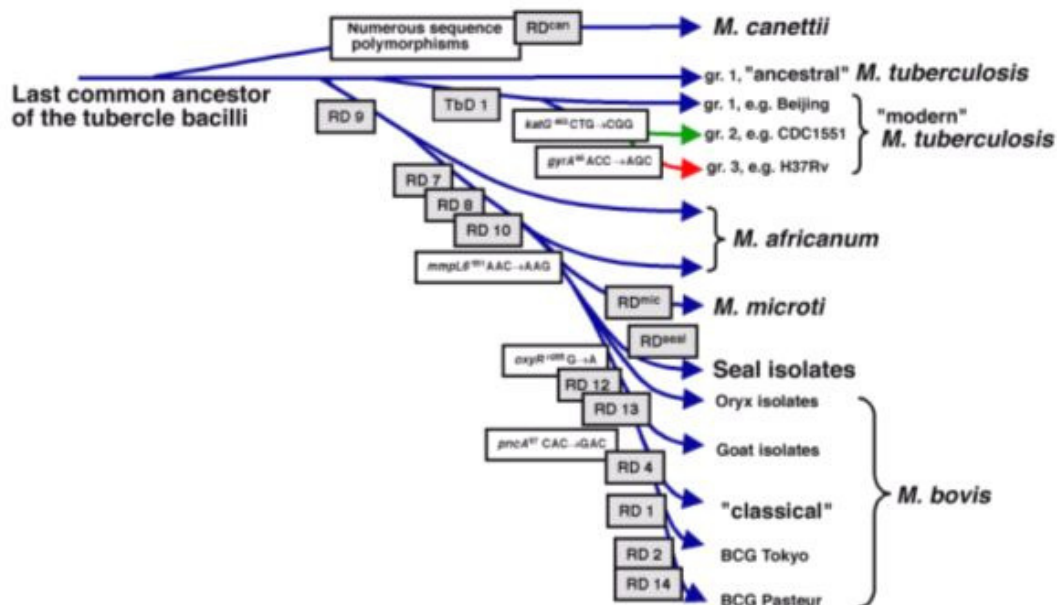


Fig. 1. Evolutionary scheme of the members of the *M. tuberculosis* complex
(Source: Brosh et al; Natl Acad Sci. 2002, 99:3684-9)

7.1.2. Host species

Cattle are considered to be the main hosts of *M. bovis*. However, most mammalian species are susceptible to various degrees to BTB and the disease has been reported in human beings, domesticated animals and various free-ranging and captive wildlife species [39]. The list of reports is long (appendix 4). The pathogen was isolated from, among others, ovidae [74], suidae [130, 99, 86], camelidae [120], bovidae [9, 66, 42, 106], caprinae [54], cervidae [118, 91, 59, 72, 90], mustelidae [41, 21], rodents [37, 75], primates [108, 65], marsupials [41], lagomorphs [27], perrissodactyls [111], procyonidae [98], canidae [55, 19], felidae [69, 16], ursidae [19] and elephant [71].

7.1.3. Transmission of *M. bovis*

Main transmission pathways

The respiratory and the alimentary routes are the main transmission pathways of BTB. Less described modes of disease transmission are vertical and genital transmission [88]. Percutaneous transmission was described in kudu and large predators resulting in granulomatous skin or muscle infections [104].

Animal to animal transmission

Infectious animals shed *M. bovis* in a number of ways: in feces, milk, discharging lesions, saliva and urine [100, 89, 60]. Animal age and behavior, environment, climate and farming practice can modulate the infection [101, 100]. Aerosol exposure is considered to be the most important route of infection of cattle. Neill et al (1991) stated that the inhalation of one single *M. bovis* bacillus in an aerosol droplet would be enough to infect an animal. More recently, Dean et al (2005) found experimentally that 1 CFU (6-10 bacilli) could induce tuberculosis immuno- pathology. Close contact between animals (e.g. intensive farming practice, water points, salt licks, market places, transports, auctions) contributes therefore to the effective spread of *M. bovis*. Ingestion of contaminated products (e.g. carcasses/prey, pastures and water) is considered as a secondary way to spread the disease in cattle [77], however it is an important pathway in

wildlife [104]. Congenital infections, vertical and genital transmission are very rarely observed in cattle [88].

Animal to human transmission

M. bovis is a zoonotic pathogen. Humans get infected either by inhalation of dust-particles and bacteria-containing aerosols shed by infected animals (close contact between humans and animals) or by ingestion of contaminated animal products (e.g. raw milk, raw milk product, and raw meat) [30, 35, 53, 124, 110, 50, 49]. Ingestion of raw wildlife products or aerosol exposure with infected wildlife have also been described as a source for *M. bovis* infection in humans [70, 125, 129].

Other transmission

Human patients with genitourinary BTB can be a source of infection for cattle when they urinate in cowsheds or on pastures [52]. However, this transmission route has been rarely described in the literature. *M. bovis* seems to be less virulent in humans than *M. tuberculosis* [122] and transmission between humans is rare but has been reported in immunosuppressed HIV patients [15, 121, 51, 50].

7.1.4. Clinical features and pathology

Forms of BTB

Pulmonary TB due to *M. bovis* is the most prevalent form of BTB in cattle and is the result of inhalation of bacteria containing aerosols shed by infected animals. In contrast, pulmonary TB due to *M. bovis* is rare in man and more commonly seen in developed countries as an occupational hazard in abattoir and farm workers [30]. Lesion distribution and pathology show predominant involvement of the upper and lower respiratory tract and associated lymph nodes [88, 127]. On the other hand, extra pulmonary BTB is the result of ingestion of tuberculous contaminated products. This is the most common form in man resulting from the ingestion of contaminated milk and milk products. Extra pulmonary TB involves predominantly cervical lymph nodes [63, 54] but also intestines,

liver, spleen, kidneys, pleura and peritoneum together with their associated lymph nodes [88].

Pathogenesis and immunology

Mycobacterial infection triggers a Th1-induced cell-mediated immune response (CMI) which leads to release of cytokines such as tumour necrosis factor- α , Interleukin- 12 (IL-12) and Interferon gamma (IFN- γ). This pathway is essential to activate macrophages [97]. Depending on the balance of cytokines involved, three outcomes are possible: 1) macrophages kill and eliminate the bacteria 2) the bacteria lies dormant (latency), 3) the bacteria can not be contained by the immune system and the disease develops to active TB [126].

Containment of the bacteria results in the formation of nonvascular nodular granulomas known as “tubercles”. Lesions show typically a centre of caseous necrosis with some degree of calcification surrounded by a cell wall of epitheloid cells, lymphocytes and neutrophils [46]; Unlike in man, these primary lesions are rarely contained by the immune system in cattle and bacilli spread by lymphatic and haematogenous routes, resulting in tubercles in other organs [119, 88].

The initial cell-mediated immune response (CMI) response is followed later in time by a humoral antibody response, which is caused by a shift of Th1 to Th2 cell activation [44]. A state of anergy may occur in advanced stages of the disease and a CMI response is no more detected. Initial pathological changes are associated with the onset of CMI response [30] (Fig.2.). CMI response can be affected by the animal’s nutritional state (e.g. deficiency in energy, protein and micronutrients) [101], by stress [45, 18] or concurrent diseases, which lead to a reduction of the host resistance, caused for instance by the classical immunodeficiency viruses such as HIV in man [135], Bovine Virus Diarrhoea Virus (BVDV) in calves [83], feline immunodeficiency virus (FIV) in cats, Simian immunodeficiency virus (SIV) in primates [104].

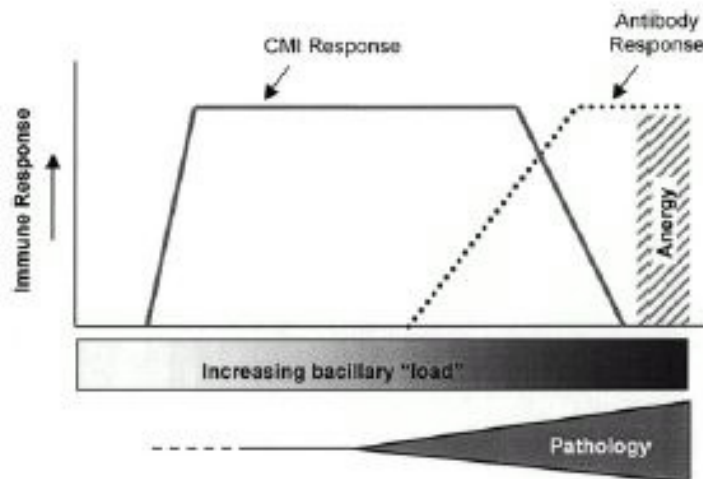


Fig.2. Temporal spectrum of immune responses in cattle following infection of *M. bovis*
(Source: Pollock and Neill. *The Vet. J.* 2002. 163:115-127)

7.1.5. The tuberculin skin test

The above mentioned CMI is used in the diagnosis of tuberculosis, when performing the skin test. The test is based on the fact that infection with *Mycobacteria* produces a delayed type hypersensitivity (DTH) skin reaction mediated by Th1. T cells sensitized prior by an infection are recruited in the skin after a PPD injection, where they release lymphokines, inducing at the site of injection induration and edema through local vasodilation within 48-72 hours [126, 82].

7.1.6. Clinical signs

In humans, TB due to *M. bovis* is indistinguishable from that due to *M. tuberculosis* in terms of clinical signs, radiological and pathological features [7]. BTB is a chronic debilitating disease. Often, the disease remains asymptomatic until advanced stages with disseminated lesions [77]. Pulmonary TB may result in cough, dyspnoea and respiratory distress. Extra pulmonary TB may lead to various clinical signs, depending on which organs are affected. Enlarged lymph nodes may obstruct air passages, the alimentary tract or blood vessels. Cervical lymphadenitis (scrofula) is typically found in milk-borne TB infection in humans and is characterized by visually enlarged lymph nodes of the head

and neck, which can sometimes rupture and drain (Fig 3) [35, 54]. In developing countries, tuberculous lymphadenitis is one of the most frequent causes of lymphadenopathy and the most common form of extra pulmonary TB [68]. In terminal stages of BTB, extreme emaciation and weakness may occur (Fig 4, 5).

Some wildlife species show very typical signs such as the greater kudu (*Tragelaphus strepsiceros*), which develop characteristic swollen head and neck lymph nodes with draining sinus tracts visible from a distance as well as blindness (Fig 6) [10, 104].

Carnivores often show limb swellings and lameness [104].



Fig 3



Fig 4



Fig 5



Fig 6

Fig. 3-6. Clinical signs of bovine tuberculosis

Fig.3. Cervical lymphadenitis in an Ethiopian patient (Photo: R. Tschopp)

Fig.4. Emaciated Holstein cow with BTB, Ethiopia (Photo: R. Tschopp)

Fig.5. Emaciated lion (*Panthera leo*) that died of BTB, RSA (Photo: D. Cooper)

Fig.6. Swollen neck lymph node in a kudu (*Tragelaphus strepsiceros*), RSA (Photo: D. Cooper)

7.2. Epidemiology of BTB

7.2.1. Overview

Tuberculosis is responsible for the death of more people each year than any other infectious disease [47]. The World Health Organization (WHO) reported 9.2 million new cases and 1.7 million deaths in 2006 [128], with Sub-Saharan Africa having the highest annual risk of infection with tuberculosis. WHO estimates that 70% of humans co-infected with TB and HIV live in Sub-Saharan Africa [30].

Global prevalence of human TB due to *M. bovis* has been estimated at 3.1% of all human TB cases accounting for 2.1% of pulmonary and 9.4% of extra pulmonary TB cases [30]. A recent UK study showed that *M. bovis* accounted for 0.5-1.5% of all culture confirmed TB cases [38].

Although the epidemiology of *M. bovis* is well documented in developed countries and control and elimination strategies implemented for many decades in those nations by a policy based on systematic slaughter of infected animals, meat inspection in abattoirs and milk pasteurization, BTB is still widely distributed and largely uncontrolled in developing countries, which are unable to support the costs of test-and slaughter policies and where BTB is often neglected and viewed as secondary to the huge problem posed by the more readily transmissible human disease caused by *M. tuberculosis* [30]. Political factors also often account for the failure to control and eradicate BTB: political instability, wars, both resulting in displacement of large human and animal populations; insufficient collaboration with bordering countries (lack of quarantine, smuggling of live animals) and lack of veterinary expertise [7]. Only seven nations in Africa consider BTB as a notifiable disease and therefore apply control measures [30]. The isolation of *M. bovis* and thus the differentiation between infections caused by *M. tuberculosis* and *M. bovis* in diagnostic laboratories is poor to non-existent and the epidemiology of BTB in most part of Sub-Saharan Africa is still largely unknown.

7.2.2. BTB prevalence in Sub-Saharan Africa

Nearly 2 million TB cases occur each year in Sub-Saharan Africa, fuelled by the HIV epidemic. The role played by cattle-derived *M. bovis* in this increasing epidemic is unknown [33]. BTB is prevalent in 33 (80%) of 43 African member countries of the OIE [34]. However, none of the national reports submitted to the OIE and the WHO by African member states mention the importance of BTB in human cases [7], and there is very little systematic data on the extent of BTB either as a veterinary or as a human health problem in the developing world [30]. The proportion of *M. bovis* infections causing human TB is not well known and very likely to be underreported, since only a few laboratories are capable of differentiating *M. bovis* from *M. tuberculosis* and other members of the MTC group [28]. Approximately 85% of the cattle and 82% of the human population in Africa live in areas where BTB is either only partly controlled or not controlled at all, and large communities are exposed to direct contact with animals and consume unpasteurized milk and milk products [85, 30]. Only very few reports mention isolation of *M. bovis* from both humans and animals in the same area [105, 29, 26]. Thus the assessment of risk factors of disease transmission among animals and between animals and humans, as well as the potential role of *M. bovis* as a zoonosis, is still largely unknown in sub-Saharan Africa.

BTB prevalence in man

Pulmonary and extra pulmonary BTB in humans was confirmed in several African countries [30]. In Egypt, *M. bovis* was found in 0.4-5.4% of sputum of positive TB patients [48]. In Nigeria, Idigbe et al (1987) found *M. bovis* in 4% of patients with lower respiratory tract symptoms. *M. bovis* seems to play a minor role in human TB in Burundi, despite the high prevalence of both HIV in humans and BTB in livestock [105]. Rasolofo et al (1999) observed in Madagascar *M. bovis* in 1.25% of pulmonary and 1.30% of extra pulmonary TB patients. In Tanzania, Daborn et al (1997) isolated *M. bovis* in 4 lymph nodes out of 19 lymph node biopsies from suspected extra pulmonary TB lesions. Recent studies in Tanzania showed a prevalence of 10.8% of *M. bovis* from adenitis biopsies [78]. In Uganda, Oloya et al (2007) isolated *M. bovis* from 3 out of 43 biopsies (7%).

BTB prevalence in African livestock

M. bovis was isolated in numerous African countries and there seem to be an endemic state of bovine tuberculosis in some of these nations. In Burundi, Rigouts et al (1996) isolated *M. bovis* in 38% of clinically suspected bovines. A large scale skin test study in Uganda showed a BTB prevalence of 6% in cattle [11]. Furthermore, 19 out of 61 abattoir lesions (31%) were confirmed as being *M. bovis* [93]. Diagbouga et al (1999) described prevalence of BTB in slaughtered cattle in Burkina Fasso to vary between 0.2-13%. Vekemans et al (1999) found 13% positive reactors to intradermal PPD injection in the area of Bobo Dioulasso.

Schelling et al. (2000) found a 17% prevalence of BTB in Chadian livestock using the PPD tuberculin test. In Ghana, an individual animal skin test prevalence of 13.8% was described by Bonsu et al (2000). Omer et al., (2001) found, in a cross-sectional study of BTB in dairy farms in Asmara (Eritrea), that 14.5% of the PPD tested animals reacted positive. In Tanzania, low prevalence was found in cattle: Jiwa et al (1997) reported a 0.2% prevalence of BTB in the Lake Victoria area of Tanzania. Cleaveland et al (2007) reported individual cattle prevalence using skin test of 0.9%. However, *M. bovis* was also isolated in 2 out of 805 (0.2%) milk samples in the Southern Highlands of Tanzania [62]. In Sudan, 39.9% of abattoir lesions were confirmed as *M. bovis* [112].

M. bovis was also isolated in livestock other than cattle. BTB was reported in sheep in Sudan [114], and camels (*Camelus dromedarius*) in Mauritania [22].

However, accurate livestock prevalence of BTB is still unknown in many African countries.

BTB prevalence in African wildlife

Wildlife maintenance hosts have been described in many parts of the world and are known to hamper costly national control and eradication programs in developed countries since they represent a persistent source of infection for livestock. These maintenance hosts are for example as already described earlier, the brushtail possum (*Trichosurus vulpus*) in New Zealand, the wild boar (*Sus scrofa*) in Spain, the white-tailed deer (*Odocoileus virginianus*) in the US, and the European badger (*Meles meles*) in the UK.

In Africa, BTB has been described in many wildlife species and the number of reports is increasing [104]. However, most exhaustive studies are from southern Africa, whereas existence of BTB in wildlife is still lacking in most African countries.

The African buffalo (*Syncerus caffer*) is generally recognized as being the classical maintenance host [130, 64, 79]. However, other species such as the Kafue Lechwe (*Kobus Leche*) or the greater Kudu (*Tragelaphus strepsiceros*) are also potential reservoirs for the disease, whereas most other wildlife species are thought to be spill-over or dead-end hosts.

Already in 1978, Clancey reported 33% of wild lechwe (*Kobus leche*) to be infected with *M. bovis*. Twenty years later, Zieger et al (1998) also isolated *M. bovis* in Lechwe in Zambia. Woodford (1982) confirmed *M. bovis* infection in warthog (*Phacochoerus aethiopicus*) in the Ruwenzoni National Park in Uganda. Tarara et al (1985) and Sapolsky & Else (1987) reported *M. bovis* in baboons (*Papio spp.*) in Kenya. BTB in baboons was also described by Keet et al (1996), in Krueger National Park, RSA. Recent studies in Tanzania isolated *M. bovis* from 11.1% of migratory wildebeest carcasses (*Connochaetes taurinus*), and 11.1% of topi (*Damaliscus lunatus*). In addition, 4% of lions tested (*Panthera leo*) were sero-positive for BTB, as well as 6% of buffaloes tested [25].

However, most reports of BTB in wildlife are coming from South Africa, where reports of BTB were first made in 1928 in greater kudu in the Eastern Cape Province [104]. Extensive studies have been done in the last decades, for example in Krueger National Park and Hluhluwe-Umfolozi National Park, where buffaloes play a major role in maintaining BTB in the ecosystem. They are therefore a major threat for other wildlife species, not only herbivores grazing on contaminated pastures but also carnivores consuming infected prey. BTB has been diagnosed in lions (*Panthera leo*), whose main prey are buffaloes; this has led to a massive decline in the lion population in Krueger. Leopards (*Panthera pardus*), cheetahs (*Acinonyx jubatus*) and hyenas (*Crocuta crocuta*) have also been described as being infected with *M. bovis* [79, 80].

From a conservation point of view, BTB may pose a serious threat to endangered wildlife species. On the other hand, BTB infected wildlife may represent a source of infection for predators, for livestock and for the whole environment. The role played by the different wildlife species in the epidemiology of BTB at the human-livestock-wildlife interface is still largely unknown.

7.3. Current situation in Ethiopia

7.3.1. Country overview

Ethiopia, land locked in the Horn of Africa, is the third most populated country in Sub-Saharan Africa with a population of 78 million in 2008 for a territory of 1,127,127 km² and an annual growth rate of 2.2 % [23, 32]. The country has a mosaic of people with over 80 different ethnic groups, the major one being Oromo (32%), followed by Amhara and Tigraway (36%). Culture, tradition and religion differ from region to region. Muslims (33%) and Ethiopian orthodox (50%) are the two main religions found in Ethiopia [23]. Ethiopia has good resource potential for development (different ecological zones, agriculture, biodiversity, water resources, minerals etc.). However, the country is faced with complex poverty, which is broad, deep and structural; it is one of the poorest countries in the world with 50% of its population in 2004 living below the poverty line (World Bank). Economy is based on agriculture, which accounts for 45% of GDP, 90% of exports and 85% of total employment [20]. The agriculture sector suffers from recurrent droughts and poor traditional cultivation practices resulting in massive land degradation [116, 12] and famine [56]. Furthermore, the country has been undermined by civil war, a war with Eritrea (1998-2000) a war with Somalia (2007) and clashes along the borders, resulting in hundreds of thousands of refugees from Eritrea, Sudan and Somalia, as well as 200 000 internally displaced persons (IDPs) [23].

7.3.2. Poverty reduction

In some countries, economic growth is a primary national policy goal. However, the core objective of the Ethiopian government is poverty reduction rather than economic growth (World Bank). Government strategy focused in the last decade on crop intensification

[20]. In addition, an intensive cattle breeding program was started around the capital city of Addis Ababa, which increased the number of productive exotic breeds (e.g. Holstein), and consequently milk yields, in order to satisfy the rapidly increasing urban milk demand.

Publications have highlighted that exotic breeds (*Bos taurus*), though producing more milk, are also more susceptible to bovine tuberculosis than zebu cattle (*Bos indicus*) [1, 3]. Therefore, the strategy to increase milk yields by increasing the Holstein population may lead to increased problems with bovine tuberculosis (BTB) in Ethiopia.

7.3.3. BTB in humans

In common with other African countries, TB case notifications in Ethiopia have increased from 97 per 100 000 of the population in 1997 to 151/100 000 in 2006 [128]. This increase can be attributed both to improved case findings under DOTS and to the spread of HIV/AIDS (adult HIV/AIDS prevalence is estimated to be between 2.8% and 6.7%) [128]. A very high prevalence of extra pulmonary TB is found in Ethiopia: 35% of the cases notified under the Ethiopian DOTS program in 2002 had extra pulmonary TB, exceeding all other forms of TB (WHO). The reason for this unusually high prevalence is unknown and HIV may contribute to it. However, Kidane et al. (2002) found that among 35 PCR positive cases of TBLN from Southern Ethiopia, 29 (82.9%) were caused by *M. tuberculosis* and 6 (17.1%) by *M. bovis*, and described TBLA in 90% of HIV positive and in 86% HIV negative patients thus suggesting that factors other than HIV might be more likely to be responsible for the high prevalence of TB Lymphadenitis (TBLA) in Ethiopia.

The country has, with 43 million cattle the biggest herd in Africa [32]. The habit of consuming raw milk and milk products, and raw meat (e.g. *kitfo*) is a very common feature in Ethiopian society. Ameni et al (2003) showed that in Central Ethiopia, only 3% of the interviewed people boiled milk, and only 1% consumed cooked meat. Therefore, it was speculated that bovine tuberculosis caused by *M. bovis* might be the reason for these high EPTB rates.

7.3.4. BTB in Ethiopian cattle

Tadelle (1988) found that in Eastern Shoa (central Ethiopia) local breeds had much lower prevalence rate (5.6%) than exotic breeds (Holstein, 86.4%). Ameni et al (2003) found an individual animal prevalence of 7.9% using CIDT in the Wuchale district (Central Ethiopia). A recent large scale study involving 5424 cattle carried out in Central Ethiopia showed that the overall prevalence in cattle was 13.5%, with higher prevalence found in Holstein (22.2%) compared to local zebus (11.6%) [3]. In high density herds maintained under intensive farming conditions, BTB prevalence was found as high as 50% of Holstein cattle at the Holetta National Insemination Centre.

M. bovis was also isolated during abattoir surveys. Asseged et al (2004) found 1.5% of 1350 examined cattle in Addis Ababa abattoir displaying tuberculous lesions; *M. bovis* was isolated from 50% of these lesions. *M. bovis* was also isolated in an abattoir survey from Hossana (Central Ethiopia) where 4.5% of the animals showed tuberculous lesions [117]. These studies also showed that the efficiency of routine abattoir inspection was very low. In Asseged's study only 55% of the tuberculous cattle could be detected by meat inspection, whereas Teklul noticed that only 29.4% of the carcasses with lesions could be detected during routine meat inspection.

BTB is endemic in cattle in Ethiopia; the disease has been reported from different field and abattoir studies [5, 2, 3]. However, the prevalence of the disease is not well established in livestock and most studies focused mainly on Central Ethiopia, whereas large areas in the country remain un-investigated.

Furthermore, no studies have so far been carried out to investigate BTB prevalence in wildlife species at the livestock-wildlife interface, and thus the possible existence of a wildlife reservoir for the disease.

7.4. Economic and social impact of BTB

As described above, BTB represents a serious health threat for livestock, wildlife and humans. But the disease is also an important economical and financial burden to society, linked with economic losses: loss of productivity of infected animals (e.g. reduced milk yields and meat production, reduced fertility), animal market restrictions, control and eradication programs, human health costs, loss from tourism sector etc. [13, 76].

In Argentina, the annual loss due to BTB is approximately US\$63 million [30]. The socio-economic impact of BTB to the agriculture and health sector in Turkey has been estimated between 15 and 59 million US\$ per year [8]. Even in some industrialized countries, where BTB has been eradicated by expensive schemes for control, eradication and compensation for farmers, the disease still has a major economic impact, mainly due to the existence of a permanent wildlife reservoir that reduces the efficiency of control strategies. In the UK, where badger and other wildlife such as deer remain an important source of infection for livestock, approximately £100 million is spent annually in efforts to control the disease [75].

In Africa, the economic losses associated with livestock infected with BTB have not been examined sufficiently, or have not been studied at all [7]. For the public health sector, WHO estimates total TB control costs in Ethiopia of US\$14.2 million per year and US\$129 per patient [128].

7.5. Rationale and research framework

In order to embark in a future national BTB control program, the epidemiology of the disease has to be assessed in terms of prevalence in animals and humans, and in terms of risk factors for disease transmission. Elaboration of a transmission model is therefore a prerequisite for any further economical assessment of the most profitable intervention in Ethiopia. Not taking into consideration a potential wildlife reservoir can lead to difficulties in realizing the economic benefits of control strategies, and ideally should be included in transmission models. Tests-and slaughter programs, such as conducted in industrialized countries, are likely not to be feasible in developing countries for technical

and economical reasons. Alternative approaches would be increased disease surveillance in abattoirs, and tracing of BTB animals back to the herds of origin with subsequent sequestration. Vaccination of cattle is another option to reduce disease transmission [30], however, the commonly used BCG vaccine proved to have a suboptimal efficacy [96, 73].

The introduction of a control and eradication program for many zoonoses is based on analysis of the profitability of control efforts (cost-benefit analysis of interventions). Interventions on the animal side are very likely to affect the disease in humans, in diseases with dual impact on animal and public health [107], and control can therefore lead to dual benefit. Economic analysis of possible interventions to control BTB should include the impact on human health costs and the impact on livestock production [134]. Baseline data on bovine TB in Ethiopia are lacking, with a few reports existing on prevalence in cattle in Central Ethiopia, however, no data of cattle prevalence exist from most other regions. The contribution of *M. bovis* to total human TB is unknown. The different TB strains involved have not been investigated; data on risk factors of disease transmission are sparse, studies on prevalence in wildlife are non-existent, and the social impact of the disease largely unknown.

The Wellcome Trust program to study BTB in developing countries therefore started a consortium in Ethiopia, involving different complementary work packages (WP) led by the following institutions : Imperial College (London, UK), Veterinary Laboratories Agency (VLA, Weybridge, UK, WP3/5/7), Trinity College (Dublin, Ireland, WP4), Armauer Hansen Research Institute (AHRI/ALERT, Addis Abeba, Ethiopia, WP1/2), Swiss Tropical Institute (STI, Basel, Switzerland, WP6), and the International Livestock Research Institute (ILRI, Nairobi, Kenya, WP7). The consortium plans to address the above epidemiological, immunological and social questions within the framework of an economical evaluation of the impact of the disease.

This thesis, funded by the Wellcome Trust (UK) is part of the consortium research work.

References

1. Acha P.N. & Szyfres B. 1987. Zoonotic tuberculosis. In: Zoonosis and communicable diseases common to man and animals. 2nd edition. Washington: Pan American Health Organization/World Health Organization; Scientific Publication No.503.
2. Ameni G., Amenu K., Tibbo M., 2003. Bovine tuberculosis: prevalence and risk factor assessment in cattle and cattle owners in Wuchale-Jida district, Central Ethiopia. *The International Journal of Applied Research in Veterinary Medicine*. 1 (1): 1-13
3. Ameni G., Aseffa A., Engers H., Young D., Gordon S., Hewinson G., Vordermeier M., 2007. High prevalence and increased severity of pathology of bovine tuberculosis in Holsteins compared to zebu breeds under field cattle husbandry in Central Ethiopia. *Clin.Vaccine Immunol*. 14(10): 1356-1361
4. Aranaz A., deJuan L., Montero N., Sanchez C., Galka M., Delso C., Alvarez J., Romero B., Bezos J., Vela A., Briones V., Mateos A. & Dominguez L. 2004. Bovine tuberculosis (*Mycobacterium bovis*) in wildlife in Spain. *Journal of Clinical Microbiology*, June: 2602-2608.
5. Asseged B., Lübke-Becker A., Lemma E., Taddele K. & Britton S. 2000. Bovine TB: a cross-sectional and epidemiological study in and around Addis Ababa. *Bull Anim health Prod in Africa.*, 48: 71-80.
6. Asseged B., Woldesenbet Z., Yimer E. & Lemma E. 2004. Evaluation of Abattoir Inspection for the diagnosis of *Mycobacterium bovis* infection in cattle at Addis Ababa abattoir. *Trop Anim. Health Prod*. 36: 537-546
7. Ayele W.Y., Neill S.D., Zinsstag J., Weiss M.G. & Pavlik I. 2004. Bovine tuberculosis, an old disease but new threat to Africa. *Int.J.Tuberc.Lung Dis*. 8(8): 924-937.
8. Barwinek F. & Taylor N.M. 1996. Assessment of the socio-economic importance of bovine tuberculosis in Turkey and possible strategies for control and eradication. Bakanliklar, Ankara, Turkey: Turkish-German Animal Health Information Project, General Directorate of Protection And Control.
9. Bengis R.G., Kriek N.P., Keet D.F., Raath J.P., de V., V, Huchzermeyer H.F. 1996; An outbreak of bovine tuberculosis in a free-living African buffalo (*Syncerus caffer-sparrman*) population in the Kruger National Park: a preliminary report. *Onderstepoort J.vet.Res*. 63: 15-18.
10. Bengis R.G., Keet D.F., Michel A.L., Kriek N.P., 2001. Tuberculosis caused by *Mycobacterium bovis*, in a kudu (*Tragelaphus streliceros*) from a commercial game farm in the Malelane area of the Mpumalanga Province, South Africa. *Onderstepoort J Vet Res*, 68(3): 239-41.

11. Bernard F., Vincent C., Matthieu L., David R., James D. 2005. Tuberculosis and brucellosis prevalence survey on dairy cattle in Mbarara milk basin (Uganda). *Preventive Veterinary Medicine* 67: 267–281
12. Bishaw B., 2001. Deforestation and land degradation in the Ethiopian Highlands: a strategy for physical recovery. *Northeast African Studies*, 8(1): 7-26
13. Blancou J. & Cheneau Y. 1974. Influence de la tuberculose sur le gain de poids de zebus à l'engrais. *Rev Elev Med Vet Pays Trop.* 27: 75-80.
14. Bonsu O.A., Laing E., Akanmori B.D. 2000. Prevalence of tuberculosis in cattle in the Dangme-West district of Ghana, public health implications. *Acta Tropica* 76: 9–14
15. Bouvet E., Casalino E., Mendoza-Sassi G., Lariven S., Vallee E., Pernet M et al. 1993. A nosocomial outbreak of multi-drug resistance *Mycobacterium bovis* among HIV infected patients. A case-control study. *AIDS*, 7: 1453-60.
16. Briones V., de Juan L., Sánchez C., Vela A.I., Galka M., Montero N., Goyache J., Aranaz A., Mateos A., Domínguez L. 2000. Bovine Tuberculosis and the Endangered Iberian Lynx. *Emerging Infectious Diseases*. 6(2): 189-191
17. Brosch R., Gordon S.V., Marmiesse M. et al. 2002; A new evolutionary scenario for the *Mycobacterium tuberculosis* complex. *Proc.Natl.Acad.Sci.U.S.A* 99: 3684-3689.
18. Brown D.H., Lafuse T.J. & Zwillig B.S 1998. Host resistance to mycobacteria is compromised by activation of the hypothalamic-pituitary-adrenal axis. *Annal of New York Academy of Science* 840: 773-86.
19. Bruning-Fann C.S., Schmitt S.M., Fitzgerald S.D., Fierke J.S., Friedrich P.D., Kaneene J.B., Clarke K.A., Butler K.L., Payeur J.B., Whipple D.L., Cooley T.M., Miller J.M., Muzo D.P. 2001. Bovine tuberculosis in free-ranging carnivores from Michigan. *Journal of Wildlife Diseases*, 37(1): 58-64.
20. Byerlee D., 2007. Policies to promote cereal intensification in Ethiopia: a review of evidence and experience. Ed: International Food Policy Research Institute, Washington, USA
21. Caley P., Hone J. 2004. Disease transmission between and within species, and the implication for disease control. *Journal of applied ecology*, 41(1): 94-104.
22. Chartier F., Chartier C., Thorel M.F. & Crespeau F. 1991. A new case of *Mycobacterium bovis* pulmonary tuberculosis in the dromedary (*Camelus dromedarius*) in MAuretania. *Rev.Elev.Med.Vet.Pays Trop.*, 44(1): 43-7.
23. CIA- The World Factbook: <http://www.cia.gov/cia/publications/factbook/geos/et.html>

- 24.** Clancey J.K. 1977. The incidence of tuberculosis in Lechwe (marsh antelope). *Tubercle*, 58(3): 151-6.
- 25.** Cleaveland S., Mlengeya T., Kazwala R.R., Michel A., Kaare M.T., Jones S.L., Eblate E., Shirima G.M., Packer C. 2005. Tuberculosis in Tanzanian wildlife. *Journal of Wildlife Diseases* 41(2): 446-453.
- 26.** Cleaveland S., Shaw D.J., Mfinanga S.G., Shirima G., Kazwala R.R., Eblate E., Sharp M., 2007. *Mycobacterium bovis* in rural Tanzania: risk factors for infection in human and cattle populations. *Tuberculosis*. 87(1): 30-43
- 27.** Coleman J.D., Cooke M.M. 2001. *Mycobacterium bovis* infection in wildlife in New Zealand. *Tuberculosis* (Edinb.), 81(3): 191-202.
- 28.** Collins C.H. & Grange J.M. 1993. A review. The bovine tubercle bacillus. *J Appl Bacteriol.* 55: 13-29.
- 29.** Cook A.J.C., Tuchili L.M., Buve A. et al. 1996; Human and bovine tuberculosis in the monze district of Zambia - A cross-sectional study. *Br.Vet.J.* 152: 37-46.
- 30.** Cosivi O., Grange J.M. Daborn C.J. et al., 1998; Zoonotic tuberculosis due to *Mycobacterium bovis* in developing countries. *Emerg.Infect.Dis.* 4: 59-70.
- 31.** Courtenay O., Reilly L.A., Sweeney F.P., Hibberd V., Bryan S., Ul-Hassan A., Newman C., Macdonald D.W., Delahay R.j., Wilson G.J., Wellington E.M.H. 2006. Is *Mycobacterium bovis* in the environment important for the persistence of bovine tuberculosis? *Biol. Lett.* 2: 460–462
- 32.** CSA - Central Statistical Agency. 2007. Agricultural sample survey 2006/07, Vol II: Report on livestock and livestock characteristics. Statistical bulletin 388, Addis Abeba, Ethiopia
- 33.** Daborn C.J. 1992. Bovine tuberculosis in the Tropics- a call to arms. Proceedings of the VII. International Conference of the Institutions of Tropical Veterinary Medicine, Yamoussoukro, Cote d'Ivoire. 1: 359-368.
- 34.** Daborn C.J., & Grange J.M. 1993. HIV/AIDS and its implications for the control of animal tuberculosis. *British Veterinary Journal* 149: 405-417.
- 35.** Dankner M., and Davis C.E., 2000. *Mycobacterium bovis* as a significant cause of tuberculosis in children residing along the United-States-Mexico border in the Baja California region. *Pediatrics*, 105(6)
- 36.** Dean G.S., Rhodes S.G., Coad M., Whelan A.O., Cockle P.J., Clifford D.J., Hewinson R.G., Vordermeier H.M. 2005. Minimum Infective Dose of *Mycobacterium bovis* in Cattle. *Infection and Immunity*, 73(10): 6467-6471

- 37.** Delahay R.J., de Leeuw A.N.S., Barlow A.M., Clifton-Hadley R.S., Cheeseman C.L. 2002. The status of *Mycobacterium bovis* infection in UK wild mammals: a review. *The Veterinary Journal*, 164: 90-105.
- 38.** De La Rua D.R., Goodchild A. T. , Vordermeier H. M. ; Hewinson R. G. ; Christiansen K. H. ; Clifton-Hadley R. S. 2006; Ante mortem diagnosis of tuberculosis in cattle : A review of the tuberculin tests, γ -interferon assay and other ancillary diagnostic techniques. *Research in Veterinary Science*, 81(2): 190-210
- 39.** De Lisle G.W., Mackintosh C.G., Bengis R.G. 2001. *Mycobacterium bovis* in free-living and captive wildlife, including farmed deer. *Rev Sci Tech*, 20(1): 86-111.
- 40.** De Lisle G.W, Bengis R. G., Schmitt S.M. & O'Brien D.J. 2002; Tuberculosis in free-ranging wildlife: detection, diagnosis and management. *Rev.Sci.tech.Off.int.Epiz.*, 21(2): 317-334.
- 41.** De Lisle G.W., Kawakami R.P., Yates G.F., Collins D.M. 2008. Isolation of *Mycobacterium bovis* and other mycobacterial species from ferrets and stoats. *Veterinary Microbiology* (In press)
- 42.** De Vos V., Bengis R.G., Kriek N.P., Michel A., Keet D.F., Raath J.P., Huchzermeyer H.F., 2001. The epidemiology of tuberculosis in free-ranging African buffalo (*Syncerus caffer*) in the Kruger National Park, South Africa. *Onderstepoort J Vet Res*, 68(2): 119-30.
- 43.** Diagbouga S., Cartoux M., Auregan G.,& Van de Perre Ph. 1999. La tuberculose bovine au Burkina Fasso entre 1960 et 1980. Manuscrit
- 44.** Dlugovitzky D., Bay M.L., Rateni L., Fiorenza G., Vietti L., Farroni M.A., Bottasso O.A. 2000. Influence of disease severity on nitrite and cytokine production by peripheral blood mononuclear cells (PBMC) from patients with pulmonary tuberculosis (TB). *Clin Exp Immunol*; 122: 343-9.
- 45.** Doherty M.L., Monaghan M.L., Basset H.F., & Quinn P.J. 1995. Effect of a recent injection of purified protein derivate on diagnostic tests for tuberculosis in cattle infected with *Mycobacterium bovis*. *Res.Vet.Sci.* 58: 217-221.
- 46.** Doherty M.L., Basset H.F., Quinn P.J., Davis W.C., Kelly A.P., Monaghan M.L. 1996. A sequential study of the bovine tuberculin reaction. *Immunology.* 87: 9-14
- 47.** Dye C., Scheele S., Dolin P., Pathania V. & Raviglione M.C. 1999. Consensus statement. Global burden of tuberculosis: estimated incidence, prevalence and mortality by country. WHO Global Surveillance and Monitoring Project. *JAMA* 282: 677-86.
- 48.** Elsabban M.S., Lofty O., Awad W.M., Soufi H.S., Mikhail D.G, Hamman H.M. et al. 1992. Bovine tuberculosis and its extent of spread as a source of infection to man and

animals in Arab Republic of Egypt. In: Proceedings of the International Union Against Tuberculosis and Lung Disease Conference on Animal Tuberculosis in Africa and the Middle East. Apr 28-30; Cairo, Egypt. Paris: The Union. Pp198-211.

- 49.** Esteban J., Robles P., Soledad Jimé'nez M., Ferná'ndez Guerrero M.L. 2005. Pleuropulmonary infections caused by *Mycobacterium bovis*: a re-emerging disease. *Clinical Microbiology and Infection*. 11(10): 840-843
- 50.** Gibson A.L., Hewinson G., Goodchild T., Watt B., Story A., Inwald J., Drobniowski F.A. 2004. Molecular epidemiology of disease due to *Mycobacterium bovis* in humans in the United Kingdom. *Journal of Clinical Microbiology*, 42(1): 431-434.
- 51.** Grange J.M., & Yates M.D., 1994. Zoonotic aspects of *M. bovis* infection. *Vet.Microbiol.* 40: 137-151.
- 52.** Grange J.M. 2001. *Mycobacterium bovis* infection in human beings. *Tuberculosis (edinb.)*, 81(1-2): 71-7.
- 53.** Guerrero A., Cobo J., Fortün J., Navas E., Quereda C., Asensio A., et al. 2000. Nosocomial transmission of *Mycobacterium bovis* resistant to 11 drugs in people with advanced HIV infection. *The Lancet*, Vol.350; issue 9093, Dec: 1738-1742.
- 54.** Gutierrez M., Samper S., Gavigan J.A., Garcia Marin J.F., Martin C. 1995. Differentiation by Molecular Typing of *Mycobacterium bovis* Strains Causing Tuberculosis in Cattle and Goats. *Journal of Clinical Microbiology*. 33(11): 2953-2956.
- 55.** Himes E.M., Luchsinger D.W., Jarnagin J.L., Thoen C.O., Hood H.B., Ferrin D.A. 1980. Tuberculosis in fennec foxes. *J Am Vet Med Assoc.* 177(9): 825-6.
- 56.** Hurni H., 1988. Degradation and Conservation of the Resources in the Ethiopian Highlands. *Mountain Research and Development* 8: 101-9.
- 57.** Idigbe E.O., Anyiwo C.E. & Onwujekwe D.I. 1986. Human pulmonary infections with bovine and atypical mycobacteria in Lagos, Nigeria. *J.Trop.Med.Hyg*, 89,143-148.
- 58.** Jackson R., Cooke M.M., Coleman J.D., Morris R.S., De Lisle G.W. & Yates G.F. 1995. Naturally occurring tuberculosis caused by *Mycobacterium bovis* in brushtail possums (*Trichosurus vulpecula*):III. Routes of infection and excretion. *New Zealand Veterinary Journal*, 43: 322-327.
- 59.** Jacques C.N., Jenks J.A., Jenny A.L. Griffin S.L. 2003. Prevalence of chronic wasting disease and bovine tuberculosis in free-ranging deer and elk in South Dakota. *Journal of Wildlife Diseases*, 39(1): 29-34

- 60.** Jha V.C., Monta Y., Dhakal M., Besnet B., Sato T., Nagai A., Kato M., Kozawa K., Yamamoto S., Kimura H., 2007. Isolation of *Mycobacterium* spp. In milking buffaloes and cattle in Nepal. *J.Vet.Med.Sci.* 69(8): 819-825
- 61.** Jiwa S.F., Kazwala R.R., Aboud A.A., Kalaye W.J. 1997; Bovine tuberculosis in the Lake Victoria zone of Tanzania and its possible consequences for human health in the HIV/AIDS era. *Vet.Res.Commun.* 21: 533-539.
- 62.** Kazwala R.R., Daborn C.J., Kusiluka L.J., Jiwa S.F., Sharp J.M. & Kambarage D.M. 1998. Isolation of *Mycobacterium* species from raw milk of pastoral cattle of the Southern Highlands of Tanzania. *Trop.Anim.Health Prod.* Aug;30(4): 233-9.
- 63.** Kazwala R.R., Daborn C.J., Sharp J.M., Kambarage D.M., Jiwa S.F., Mbembati N.A. 2001. Isolation of *Mycobacterium bovis* from human cases of cervical adenitis in Tanzania: a cause for concern? *Int J Tuberc Lung Dis.* 5(1):87-91
- 64.** Keet D.F., Kriek N.P.J., Penrith M-L. et al. 1996. Tuberculosis in buffaloes (*Syncerus caffer*) in the Kruger National Park: spread of the disease to other species. *Onderstepoort J.Vet.Res.* 63(3): 239-244.
- 65.** Keet D.F., Kriek N.P., Bengis R.G., Grobler D.G., Michel A. 2000. The rise and fall of tuberculosis in a free-ranging chacma baboon troop in the Krueger National Park. *Onderstepoort J Vet Res* 67(2): 115-22.
- 66.** Keet D.F., Kriek N.P., Bengis R.G., Michel A.L., 2001. Tuberculosis in kudus (*Tragelaphus strepsiceros*) in the Krueger National Park. *Onderstepoort J Vet Res*, 68(3): 225-30.
- 67.** Kidane D., Olobo J.O., Habte A., Negesse Y., Aseffa A., Abate G., Yassin M.A. Bereda K. & Harboe M. 2002. Identification of the causative organism of tuberculous lymphadenitis in Ethiopia by PCR. *J. Clin. Microbiol.* Nov: 4230-4234.
- 68.** Krishnaswami H. Koshi G., Kulkarni K.G. & Job C.K. 1972. Tuberculous lymphadenitis in South India, a histological and bacteriological study. *Tubercle* 53: 215-220.
- 69.** Lantos A., Niemann S., László Mezösi L., Sós E., Erdélyi K., Dávid S., Parsons L.M., Kubica T., Rüsç-Gerdes S., Somoskövi A. 2003. Pulmonary tuberculosis due to *Mycobacterium bovis subsp. Caprae* in captive Siberian tiger. *Emerging Infectious Diseases*, 9(11): 1462-64.
- 70.** Liss G.M., Wong L., Kittle D.C., Simor A., Naus M., Martiquet P., Misener C.R. 1994. Occupational exposure to *Mycobacterium bovis* infection in deer and elk in Ontario. *Can J Public Health.* 85(5): 326-9.

- 71.** Lyashchenko K.P., Greenwald R., Esfandiari J., Olsen J.H., Ball R., Dumonceaux G., Dunker F., Buckley C., Richard M., Murray S., Payeur J.B., Andersen P., Pollock J.M., Mikota S., Miller M., Sofranko D., Waters W.R. 2006. Tuberculosis in Elephants: Antibody Responses to Defined Antigens of *Mycobacterium tuberculosis*, Potential for Early Diagnosis, and Monitoring of Treatment. *Clinical and vaccine immunology*. 13(7): 722-732.
- 72.** Mackintosh C.G., de Lisle G.W., Collins D.M., Griffin J.F. 2004. Mycobacterial diseases of deer. *N Z Vet J*. 52(4): 163-74
- 73.** Malin A.S & Young D.B. 1996. Designing a vaccine for tuberculosis. Unraveling the tuberculosis genome-can we build a better BCG? *Br Med J*. 312: 1495.
- 74.** Malone, F.E., Wilson, E.C., Pollock, J.M., Skuce, R.A., 2003. Investigations into an outbreak of tuberculosis in a flock of sheep in contact with tuberculous cattle. *J.Vet.Med.B Infect.Dis.Vet.Public Heath*. 50(10): 500-504
- 75.** Matthews F., Macdonald D.W., Taylor G.M., Gelling M., Norman R.A., Honess P.E., Foster R., Gower C.M., Varley S., Harris A., Palmer S., Hewinson G., Webster J.P. 2006. Bovine tuberculosis (*Mycobacterium bovis*) in British farmland wildlife: the importance to agriculture. *Proc Biol Sci* 273(1584): 357-65.
- 76.** Meisinger G. 1969. Untersuchungen über die Oekonomische Auswirkung der Rindertuberkulose auf die Produktivität der Rinderbestände. *Monatsh. Veterinarmed*. 25(1):7-13.
- 77.** Menzies F.D. & Neill S.D. 2000. Cattle to cattle transmission of bovine tuberculosis. *Vet.J*. 160: 92-106.
- 78.** Mfinanga S.G., Morkve O., Kazwala R.R., Cleaveland S., Sharp M.J., Kunda J., Nilsen R., 2004. Mycobacterial adenitis: role of *Mycobacterium bovis*, non-tuberculous mycobacteria, HIV infection, and risk factors in Arusha, Tanzania. *East Afr.Med.J*. 81(4): 171-178
- 79.** Michel A.L. 2002. Implications of tuberculosis in African wildlife and livestock. *Ann.N.Y.Acad.Sci*. 969: 251-55
- 80.** Michel A.L., Bengis R.G., Keet D.F., Hofmeyr M., de Klerk L.M., Cross P.C., Jolles A.E., Cooper D., Whyte I.J., Buss P., Godfroid J. 2006. Wildlife tuberculosis in South African conservation areas: Implications and challenges. *Veterinary Microbiology* 112: 91-100
- 81.** Mitterlich E. & Marth E.H. 1984. *Microbial Survival in the Environment*. Springer, Berlin.

- 82.** Monaghan M.L., Doherty M.L., Collins J.D., Kazda J.F., Quinn P.J. 1994. The tuberculin test. *Vet Microbiol.* 40(1-2): 111-24.
- 83.** Monies R.J. & Head J.C.S. 1999. Bovine tuberculosis in housed calve (letter). *Vet Rec* 145: 743.
- 84.** Mostowy S., Inwald J., Gordon S., Martin C., Warren R., Kremer K., Cousins D., Behr M.A. 2005. Revisiting the Evolution of *Mycobacterium bovis*. *Journal of Bacteriology*, 187(18): 6386-6395
- 85.** Mposhy M., Binemo-Madi C. & Mudakikwa B. 1983. Incidence de la tuberculose bovine sur la santé des populations du Nord-Kivu (Zaire). *Rev.Elev.méd.vet.Pays trop.* 36(1): 15-18.
- 86.** Naranjo V., Gortazar C., Vicente J., de la Fuente J. 2008. Evidence of the role of European wild boar as a reservoir of *Mycobacterium tuberculosis* complex: a review. *Vet Microbiol*, 127: 1-9.
- 87.** Neill S.D., O'Brien J.J., & Hanna J. 1991. A mathematical model for *Mycobacterium bovis* excretion from tuberculous cattle. *Veterinary microbiology.* 28: 103-9.
- 88.** Neill S.D., Pollock J.M., Bryson D.B. & Hanna J. 1994. Pathogenesis of *Mycobacterium bovis* infection in cattle. *Vet.Microbiol.* 40: 41-52.
- 89.** Neill S.D., Skuce R.A., Pollock J.M., 2005. Tuberculosis-new light from an old window. *Journal of Applied Microbiology.* 98(6): 1261-1269
- 90.** Nishi J.S., Shury T., Elkin B.T. 2006. Wildlife reservoirs for bovine tuberculosis (*Mycobacterium bovis*) in Canada: strategies for management and research. *Veterinary microbiology* 112: 325-338
- 91.** O'Brien D.J., Schmitt S.M., Berry D.E., Fitzgerald S.D., Vanneste J.R., Lyon T.J., Magsig D., Fierke J.S., Cooley T.M., Zwick L.S., Thomsen B.V., 2004. Estimating the true prevalence of *Mycobacterium bovis* in hunter-harvested white-tailed deer in Michigan. *J Wildl Dis* 40(1): 42-52.
- 92.** OIE (Office International des Epizooties)-Manual of Diagnostic Tests and Vaccines for terrestrial animals. 5th Edition. 2004
http://www.oie.int/eng/normes/mmanual/A_00054.htm
- 93.** Oloya J., Muma J.B., Opuda-Asibo J., Djonne B., Kazwala R., Skjerve E., 2007. Risk factors for herd-level bovine seropositivity in transhumant cattle in Uganda. *Prev.Vet.Med.* 80(4): 318-329

- 94.** Oloya J., Opuda-Asibo J., Kazwala R., Demelash A.B., Skjerve E., Lund A., Johansen T.B., Djonje B. 2008. Mycobacteria causing human cervical lymphadenitis in pastoral communities in the Karamoja region of Uganda. *Epidemiol. Infect.* 136(5): 636-43
- 95.** Omer M.K., Skjerve E., Woldehiwet Z., & Holstad G. 2001. A cross-sectional study of bovine tuberculosis in dairy farms in Asmara, Eritrea. *Trop. Anim. Health Prod.* 33(4): 295-303.
- 96.** O'Reilly L.M. & Daborn C.J. 1995; The epidemiology of *Mycobacterium bovis* infections in animals and man, a review. *Tubercle and Lung Disease* 76: 1-16.
- 97.** Orme I.M., Cooper A.M. 1999. Cytokine chemokine cascades in immunity to tuberculosis. *Immunol Today*; 20: 307-12
- 98.** Palmer M.V., Waters W.R., Whipple D.L. 2002. Susceptibility of raccoons (*Procyon lotor*) to infection with *Mycobacterium bovis*. *Journal of Wildlife Diseases*, 38(2): 266-274.
- 99.** Parra A., Fernandez-Llario P., Tato A., Larrasa J., Garcia A., Alonso J.M., Hermoso de Mendoza M., Hermoso de Mendoza J. 2003. Epidemiology of *Mycobacterium bovis* infections of pigs and wild boars using a molecular approach. *Vet Microbiol*, 97(1-2): 123-33.
- 100.** Phillips C.J.C, Foster C.R.W, Morris P.A. & Teverson R. 2003. Review: the transmission of *Mycobacterium bovis* infection to cattle. *Research in Veterinary Science* 74: 1-15.
- 101.** Pollock J.M., Rowan T.G., Dixon J.B., Carter S.D., Spiller D., & Warendus H. 1993. Alteration of cellular immune responses by nutrition and weaning in calves. *Research in Veterinary Science*. 55: 298-305.
- 102.** Pollock J.M., and Neill S.D. 2002. *Mycobacterium bovis* infection and tuberculosis in cattle. *The Veterinary Journal* 163: 115-127.
- 103.** Rasolofo-Razanamparany V., Menard D., Rasolonavalona T., et al 1999. Prevalence of *Mycobacterium bovis* in human pulmonary and extra-pulmonary tuberculosis in Madagascar. *Int J Tuberc Lung Dis.* 3(7): 632-634.
- 104.** Renwick A.R., White P.C.L., Bengis R.G. 2007. Bovine tuberculosis in southern African wildlife: a multi-species host-pathogen system. A review. *Epidemiol. Infect.* 135: 529-540.
- 105.** Rigouts L., Maregeya B., Traore H., Collart J.P., Fissette K., Portaels F. 1996; Use of DNA restriction fragment typing in the differentiation of *Mycobacterium tuberculosis* complex isolates from animals and humans in Burundi. *Tuber. Lung Dis.* 77: 264-268.

- 106.** Rodwell T.C., Kriek N.P., Bengis R.G., Whyte I.J., Viljoen P.C., de Vos V., Boyce W.M. 2001. Prevalence of bovine tuberculosis in African buffalo at Krueger National Park. *Journal of Wildlife Diseases*, 37(2): 258–264
- 107.** Roth F., Zinsstag J., Orkhon D., Chimed-Ochir G., Hutton G., Cosivi O., Carrin G. & Otte J. 2003. Humans health benefits from livestock vaccination for brucellosis: case study. *Bull. World Health Organ.*, 81: 867-876.
- 108.** Sapolsky R.M. & Else J.G. 1987. Bovine tuberculosis in a wild baboon population: epidemiological aspects. *J. Med. Primatol.* 16(4): 229-35.
- 109.** Schelling E., Diguimbaye C., Daoud S., Daugla D.M., Bidjeh K., Tanner M. & Zinsstag J. 2000. Zoonosis in nomadic populations of Chad- Preliminary results obtained in humans and livestock. Proceedings of the 9th Conference of the international society of veterinary epidemiology and economics. Abstract Nr 396.
- 110.** Smith R.M.M., Drobniowski F., Gibson A., Montague J.D.E., Logan M.N., Hunt D., Hewinson G., Salmon R.L., O'Neill B. 2004. *Mycobacterium bovis* Infection, United Kingdom. *Emerging Infectious Diseases*, 10(3): 539-541
- 111.** Stetter M.D., Mikota S.K., Gutter A.F., Monterroso E.R., Dalovisio J.R., Degraw C., Farley T. 1995. Epizootic of *Mycobacterium bovis* in a zoologic park. *J Am Vet Med Assoc.* 207(12): 1618-21
- 112.** Sulieman M.S., Hamid M.E. 2002. Identification of Acid Fast Bacteria From Caseous Lesions in Cattle in Sudan. *J. Vet. Med.* B 49: 415–418
- 113.** Taddele K. 1988. Epidemiology and zoonotic importance of bovine tuberculosis in selected sites of Eastern Shoa, Ethiopia. Master's thesis, Freie Universitaet Berlin and Addis Ababa University, Debre-Zeit.
- 114.** Tag el Din M.H. & el Nour Gamaan. 1982. Tuberculosis in sheep in the Sudan. *Trop Anim Health Prod.* 14(1): 26.
- 115.** Tarara R., Suleman M.A., Sapolsky R., Wabomba J.J. & Else J.G. 1985. Tuberculosis in wild olive baboons, *Papio Cynocephalus anubis* in Kenya. *J. Wildl. Dis.*, 21: 137-140.
- 116.** Teketay D., 2001. Deforestation, wood famine, and environmental degradation in Ethiopia's Highland ecosystems: urgent need for action. *Northeast African Studies.* 8(1): 53-76
- 117.** Teklul A., Asseged B., Yimer E., Gebeyehu M., Woldesenbet Z., 2004. Tuberculous lesions not detected by routine abattoir inspection: the experience of the Hossana municipal abattoir, Southern Ethiopia. *Rev. Sci. Tech.* 23(3): 957-964

- 118.** Thoen C.O., Quinn W.J., Miller L.D., Stackhouse L.L., Newcomb B.F., Ferrell J.M. 1992. *Mycobacterium bovis* infection in North American elk (*Cervus elaphus*). *J Vet Diagn Invest*, 4(4): 423-7.
- 119.** Thoen C.O., Huchzermeyer H. & Himies E.M. 1995. Laboratory diagnosis of bovine tuberculosis. In: C.O. Thoen & J.H. Steel (eds), *M.bovis* infection in animals and humans: Iowa State University Press, Ames, IA, 63-72.
- 120.** Twomey D.F., Crawshaw T.R., Anscombe J.E., Farrant L., Evans L.J., McElligott W.S., Higgins R.J., Dean G., Vordermeier M., Jahans K., de la Rua-Domenech R. 2007. TB in llamas caused by *Mycobacterium bovis*. *Vet Rec*. 160(5): 170
- 121.** Van Soolingen D., de Haas P.E., Haagma J., Eger T., Hermans P:W:, Ritacco V., Alito A. & van Embden J.D. 1994; Use of various genetic markers in differentiation of *Mycobacterium bovis* strains from animals and humans and for studying epidemiology of bovine tuberculosis. *J.Clin.Microbiol*. 32: 2425-2433.
- 122.** Van Soolingen D. 2001. Molecular epidemiology of tuberculosis and other mycobacterial infections: main methodologies and achievements. *J.Intern.Med*. 249: 1-26.
- 123.** Vekemans M., Cartoux M., Diagbouga S., Dembélé M., Koné B., Delafosse A., Der A. & Van de Perre Ph. 1999. Potential source of human exposure to *Mycobacterium bovis* in Burkina Faso, in the context of the HIV epidemic. *Clinical microbiology and Infection*, 5(10): 617-621.
- 124.** Wedlock D.N., Skinner M.A., de Lisle G.W., Buddle B.M., 2002. Control of *Mycobacterium bovis* infections and the risk to human populations. *Microbes and Infection*. 4(4): 471-480
- 125.** Wei C.Y., Hsu Y.H., Chou W.J., Lee C.P., Tsao W.L. 2004. Molecular and histopathologic evidence for systemic infection by *Mycobacterium bovis* in a patient with tuberculous enteritis, peritonitis, and meningitis: a case report. *Kaohsiung J Med Sci*. 20(6): 302-7
- 126.** Welsh M.D., Cunningham R.T., Corbett D.M., Girvin R.M., McNair J., Skuce R.A., Bryson D.G., Pollock J.M. 2005. Influence of pathological progression on the balance between cellular and humoral immune responses in bovine tuberculosis. *Immunology*, 114: 101–111
- 127.** Whipple D.L., Bolin C.A. & Miller J.M. 1996; Distribution of lesions in cattle infected with *Mycobacterium bovis*. *J. Vet. Diagn. Invest.*, 8(3): 351-4.
- 128.** WHO (2004) Global Tuberculosis Control. Surveillance, Planning, Financing. http://www.who.int/tb/publications/global_report/2004/en/annex1.pdf, 71-74.

- 129.** Wilkins M.J., Meyerson J., Bartlett P.C., Spieldenner S.L., Berry D.E., Mosher L.B., Kaneene J.B., Robinson-Dunn B., Stobierski M.G., Boulton M.L. 2008; Human *Mycobacterium bovis* Infection and Bovine Tuberculosis Outbreak, Michigan, 1994–2007. *Emerging Infectious Diseases* 14 (4): 657-660.
- 130.** Woodford M.H. 1982; Tuberculosis in wildlife in the Ruwenzori National Park, Uganda. *Trop.Anim.Hlth.Prod.*, 14:155-160.
- 131.** Yellin G.L., Fennelly J. 2004. *Mycobacterium bovis* versus *Mycobacterium tuberculosis* as a cause of acute cervical lymphadenitis without pulmonary disease. *The Pediatric Infectious Disease Journal*, 23(6): 590-591
- 132.** Young J.S., Gormley E., Wellington E.M.H. 2005. Molecular Detection of *Mycobacterium bovis* and *Mycobacterium bovis* BCG (Pasteur) in Soil. *Applied and Environmental Microbiology*. 71(4):1946-1952
- 133.** Zieger U., Pandey G.S., Kriek N.P., Cauldwell A.E., 1998. Tuberculosis in Kafue Lechwe (*Kobus leche kafuensis*) and in a bushbuck (*Tragelaphus scriptus*) on a game ranch in central province, Zambia. *J S Afr Vet Assoc.*, 69(3):98-101.
- 134.** Zinsstag J., Roth F., Orkhon D., Chimed-Ochir G., Nansalma M., Kolar J. & Vounatsou P. 2005. A model of animal-human brucellosis transmission in Mongolia. *Prev.Vet.Med.* 10;69:77-95.
- 135.** Zumla A., Malon P., Henderson J., & Grange J.M. 2000. Impact of HIV infection on tuberculosis. *Postgrad Med J.* 76:259-268.

8. Goals and objectives

8.1. Goal

To collect large-scale and long-term epidemiological field data on BTB in cattle kept under traditional husbandry systems and in wildlife in Ethiopia. The data will be used ultimately to develop a transmission model between animals and humans, to estimate the economical impact of the disease to the Ethiopian society and to assess the most profitable intervention strategies for the country. The latter will be achieved beyond the framework of this PhD. This work thus contributes to the overall Wellcome Trust project on BTB.

8.2. Objectives

- Assess the field prevalence of BTB in cattle kept under traditional husbandry system in Ethiopia using the comparative intradermal skin test (CIDT).
- Assess BTB prevalence in Ethiopian wildlife.
- Assess possible risk factors of disease transmission between animals and between animals and humans.
- Assess the baseline productivity of Ethiopian cattle.
- Assess the herd structure of cattle in Ethiopia.
- Assess the impact of BTB on animal live and carcass weight in abattoirs.



9. Study sites

Study sites

The field work involved during this PhD was carried out in different regions of Ethiopia. Photos illustrating the different study sites and work performed are shown in appendix 1. The study sites covered various ecosystems, with different vegetation and climate, and with altitude ranging from 400 m (Hamer) to 4200 m (Bale Mountains). All sites were part of the Ethiopian Highlands or Middle Lands, characterized by sedentary mixed livestock-crop farming systems, with the exception of the Hamer site, located in the lowlands of Southern Omo and which is inhabited by semi-nomadic pastoralists, in our study site by Karo and Hamer tribes.

Cross-sectional PPD surveys in cattle were carried out in Meskan Mareko (Rift Valley, SNNPR), Woldia (Amhara), Bako-Gazer (SNNPR), Hamer, South Omo (SNNPR), and the Bale Mountains (Oromia). Study sites in the Bale Mountains regrouped 4 Woredas: Dinsho, Robe, Goba and Goro.

Measurements on live animal and carcass weight were performed in the municipal abattoirs of Gondar (Amhara), Woldia (Amhara), Ghimbi (Oromia), Addis Abeba, Butajira (SNNPR), and Jinka – Bako Gazer (SNNPR). In these abattoirs, lymph node samples were collected as well for the molecular typing study of work package 1.

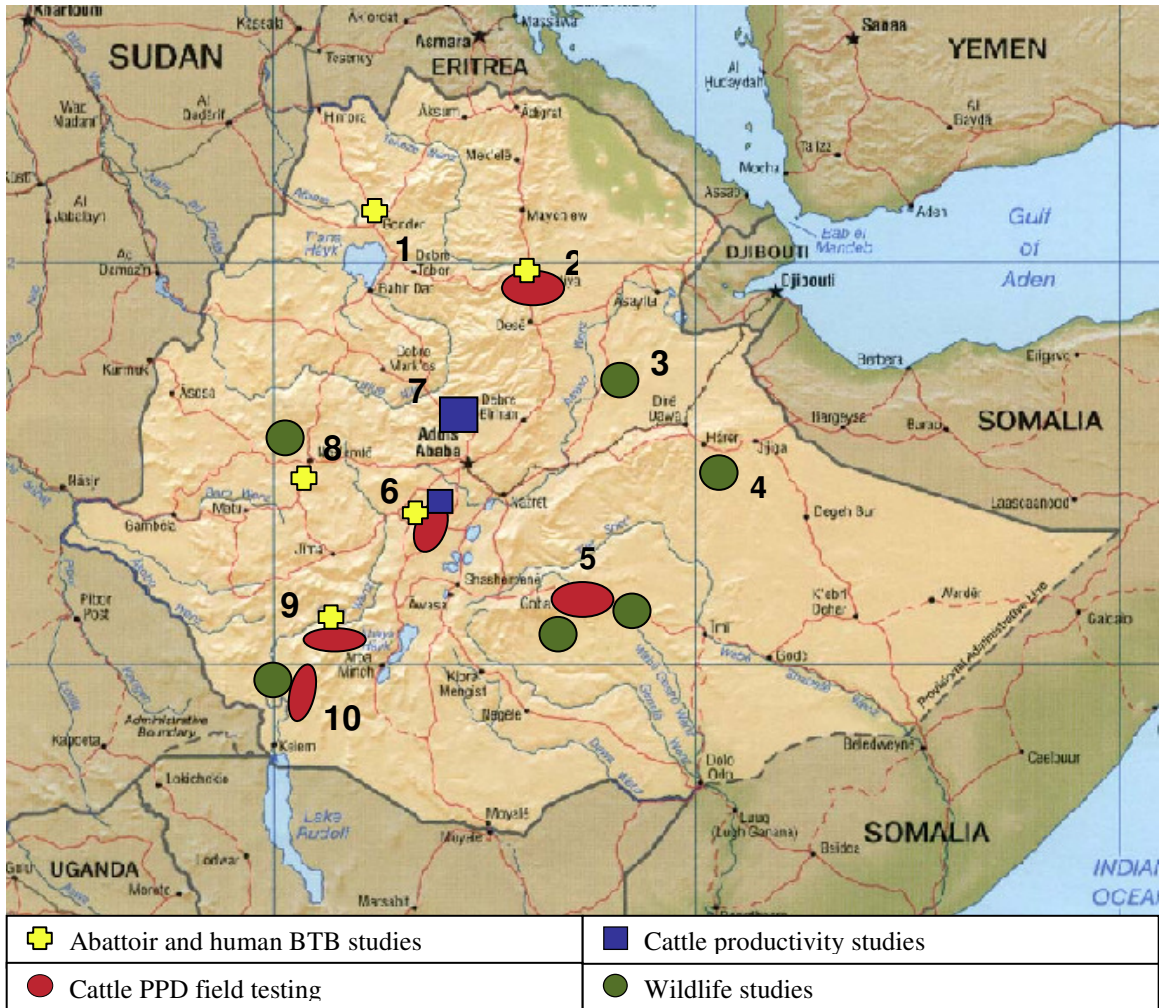
The productivity survey in cattle was carried out in 20 farms in Sellale (Shoa, Oromia) and 1 farm in Butajira (Rift Valley, SNNPR).

Collection of market prices was done in the same sites as the cross-sectional surveys of PPD in cattle and abattoir surveys.

Wildlife samples were collected in South Omo (SNNPR), Bale Mountains (Oromia), Babilie elephant sanctuary (Oromia), Afar, and Wellega (Oromia).

All farmer interviews were done in the sites where PPD in cattle was carried out, see above

Fig 1: Map of Ethiopia showing all study sites of this PhD



Legend of the different study sites:

1. Gondar (Amhara)
2. Woldia (Amhara)
3. Afar
4. Babile (Oromia)
5. Bale Mountains (Oromia)
6. Butajira (Gurage-SNNPR)
7. Sellale (Shoa-Oromia)
8. Ghimbi/Welega (Oromia)
9. Bako-Gazer (SNNPR)
10. South Omo (Hamer-SNNPR)



10. Repeated cross-sectional skin testing for bovine tuberculosis in cattle in traditional husbandry system in Ethiopia

Rea Tschopp^{1,2*}, Esther Schelling¹, Jan Hattendorf¹, Douglas Young³, Abraham Aseffa²,
Jakob Zinsstag¹

¹ Swiss Tropical Institute, PO Box, CH-4002, Basel, Switzerland

² Armauer Hansen Research Institute (AHRI/ALERT), PO Box 1005, Addis Abeba,
Ethiopia

³ Department of Microbiology, Imperial College London, South Kensington Campus London, SW7 2AZ,
United Kingdom

[* Corresponding author: rea.tschopp@unibas.ch]

*Paper published
The Veterinary Record*

Abstract

Representative repeated cross-sectional skin testing for BTB was conducted over a period of three years in a total of 5377 cattle in three randomly selected Woredas in Ethiopia (Meskan, Woldia and Bako-Gazer), that were never previously tested for BTB. The animals included were 99% local zebus kept in traditional husbandry systems. The comparative intradermal testing and two diagnostic thresholds were used to define positive test results, one according to the OIE recommended cut-off of >4 mm and the other with a cut-off of >2 mm. Data analysis was performed using a logistic regression model with a random effect at the village level. Applying the OIE definition, the overall representative apparent prevalence of BTB skin test positive local zebus was 0.9% (CI 95% 0.6-1.3 %). Using a cut-off > 2 mm the overall representative prevalence increased to 4% (CI 95% 2.4-4.8%). Due to low apparent prevalence, true prevalence could only be calculated in Meskan (4.5%) and Bako-Gazer (2.4%) for >2 mm cut-off. With the exception of Meskan, prevalence by Woreda was not statistically significantly changing over the years. *M. avium* reactors were found in all study sites but with significant geographical variation. Overall, bulls and oxen were more at risk for being a positive reactor (OR 1.6, CI 95%: 1.1-2.3; OR 2, CI 95%: 1.4-2.6), as well as animals in good body condition (OR: 2, CI 95%: 1.5-2.9). Similar results were found at Woreda level with the exception of Woldia, where none of the analyzed variables were associated significantly with a positive test result.

In conclusion, this study shows a very low apparent BTB prevalence in cattle in rural traditional husbandry systems, but with regional variations.

Key words: Ethiopia, bovine tuberculosis, comparative intradermal tuberculin test, repeated cross-sectional study, zebu breeds

Introduction

Bovine tuberculosis (BTB) is a chronic debilitating disease caused by *Mycobacterium bovis*. The causative agent belongs to the *Mycobacterium tuberculosis* complex (MTC), which comprises the phylogenetically closely related *M. tuberculosis*, *M. africanum*, *M. microti*, *M. bovis* bacilli Calmette-Guérin (BCG), and *M. canetti* (Mostowy and others 2005).

Eradicated or at least controlled in most parts of the developed world, BTB remains prevalent in many sub-Saharan countries. The disease causes not only a potential zoonotic threat through the consumption of contaminated raw animal products and/or close contact with infected animals, but is also an economic burden to the livestock sector and thus to the society, although these have not been quantified yet in Africa (Zinsstag and others 2006). The exact epidemiology of BTB in Africa is still largely unknown and national control strategies in livestock are rare or inexistent.

In developed countries, tuberculin skin testing is universally recognized for BTB diagnosis in live cattle and is the basis for national test-and-slaughter programs (Ayele and others 2004). The use of a cut-off point for the comparative intradermal tuberculin test (CIDT) of >4 mm, as recommended by the Office International des Epizooties (OIE), is used worldwide as standard skin test result interpretation. However, this standard cut-off is more and more questioned since it might not be adapted to the African context, where cattle breeds, prevailing prevalence, epidemiology of disease and diverging official goals of disease control differ from industrialized countries. In a recent study in Central Ethiopia, Ameni and others (2008) suggested the use of a > 2 mm cut-off meaning a difference of skin thickness between bovine and avium reaction greater than 2 mm as being more adapted for skin testing cattle in Central Ethiopia since it increased sensitivity of the test without affecting its specificity. Similarly, a recent study in Chad showed a better performance of the single intradermal comparative cervical test for a cut-off value of >2 mm (Bongo and others 2009).

BTB has been shown to be endemic in Ethiopian cattle with prevalence ranging between 7.9 % and 34%. However most field and abattoir prevalence studies focused on Central Ethiopia, which is characterized by urban and peri-urban management settings and/or herds with exotic cattle breeds or their cross breeds, which are more productive than traditional zebu breeds (Ameni and others 2003, Asseged and others 2004, Teklul and others 2004, Ameni and others 2007). The Central highlands are also the major area of milk supply for Addis Abeba, a fast growing capital city of 3.1 million people (CSA 2008). This region is subject to more research regarding the burden of bovine TB than other parts of Ethiopia. However, over 80% of the Ethiopian population is rural and directly dependent on livestock for their daily livelihood. In these more remote rural areas, Ethiopian farmers keep mainly zebu breeds, under traditional management system, for crop farming, where animals are used for draft power. BTB prevalence in these areas was up to this study largely unknown.

In this article the authors present a repeated cross sectional study of skin testing in cattle over three years in three rural regions in Ethiopia that were never tested previously for BTB: from the Northern Highlands, across the Rift Valley and down to the Southern part of the country. The primary goal was to assess representative tuberculin positivity prevalence in traditional husbandry system and to follow trends over time in view of a future cost study of disease. The use of the different CIDT cut-offs is discussed as well as the role of *M. avium* in the testing procedure.

Material and methods

Study areas

The authors carried out a repeated cross-sectional study from 2005 to 2008 in two regional zones of Ethiopia (Amhara, and Southern Nations, Nationalities and People Region (SNNPR) between the latitudes of 5.1°N and 11.5°N and the longitudes of 36.1°E and 40.1°E. Within these regions, three Woredas (districts) were randomly selected (see below) according to the further requirements of a larger programme on BTB in Ethiopia (e.g. presence of abattoirs and hospitals in the same areas), namely Woldia (Northern

highlands), Meskan Mareko (Rift Valley), and Bako-Gazer (Southern middle lands). Altitude of the study sites ranged from 1300 m to 3500 m above sea level. The Woldia site had two distinct ecological zones, the lowlands (<2000 m) and the highlands (>2000 m). All farmers were sedentary small holders with mixed livestock-crop farming system and cattle husbandry practice.

Study design

Cattle were selected by a stratified cluster sampling proportional to the size of the cattle population, and considered villages as clusters based on calculated intra-class correlation coefficients. Cattle from individual owners in the study areas were kept communally during the day; therefore herds belonging to individual owners were taken into consideration but animals of all owners were regrouped into one single “village” herd for each village.

Lists of Kebeles (administrative units within the Woredas) and villages within the Kebeles were obtained from each Woreda agricultural office. Kebeles within the Woreda were selected randomly using random numbers generated in Microsoft Excel®; Villages were selected randomly and proportionally to their number within a particular Kebele. Approximately thirty animals were selected per village. Cattle younger than 6 months of age, late stage pregnant cows and clinically sick animals were not included in the study.

The selected cattle from a village were gathered together for testing and reading. If animals were not present on the reading day, house to house visit was conducted. As compensation and incentive for farmer’s participation, all tested cattle were dewormed on the reading day with Albendazol boli (Ashialben 2500, Ashish Life Science PVT, Mumbai, India).

The cross-sectional study was repeated three times on a yearly basis in the same villages for all three Woredas, whereby animals were newly selected at each visit. To avoid seasonal impact on test results (e.g. drought, rainy season), cattle were tested in each Woreda in the same month over the years.

The calculation of sample size was done using formulas of Bennet and others (1991) as described in Tschopp and others (2009). We took the intra-class correlation coefficient ρ as 0.2 and obtained a design effect D of 6.8. Choosing 30 animals (b) per cluster (c), with a disease prevalence of 5% and 17 clusters (total sample size per Woreda = 510 animals) gave us an estimate of the standard error or precision of 0.025. The total sample size n is the product of the number of clusters (c) times the number of samples per cluster (b) [$n=b*c$], thus equaling 510 animals per Woreda, which totaled a number of required animals of 2040.

Skin testing of cattle

Skin testing was carried out by the same person to avoid technical bias related to testing method. We applied the comparative intradermal tuberculin test (CIDT) in all cattle using both avian and bovine purified protein derivates (PPD) supplied by the Veterinary Laboratories Agency, Weybridge, UK. Intradermal injections of 0.1 ml (2,500 IU/ml) bovine PPD and 0.1 ml (2,500 IU/ml) avian PPD were made in two shaved sites, 12 cm apart from each other in the middle neck region, after having recorded skin thickness with a caliper. Skin thickness was measured again at both injection sites after 72 hours. The reaction at each site was derived as the difference of the skin thickness after 72 hours minus before injection. The data was analyzed using two different diagnostic thresholds to define positive test results: 1) an animal was considered positive if the bovine minus the *M. avium* reaction was greater than 2 mm (Ameni and others 2008, Bongo and others 2009) and 2) an animal was considered positive if the bovine minus the *M. avium* reaction was greater than 4 mm (OIE definition). A village-herd was considered positive if at least one positive reactor was present.

To assess the prevalence of *M. avium*, we defined arbitrarily MAC positive reactors by assessing the skin reaction on the avium site alone as the difference between the initial avium PPD injection and the 72-hour reaction being greater than 4 mm.

Cattle data

In addition to the CIDT, information was collected for each tested animal: sex, breed, age, and body condition score. Animals were categorized into four age groups: calves

younger than one year, juveniles between one and three years, reproductive animals between three and ten years and animals older than ten years. Body condition score of the animals was done using a 1 to 5 scale as described in Msangi and others (1999), but were regrouped into three categories that better reflected the assessment in the field, namely emaciated to thin, normal and muscular to fat. Cattle were differentiated in three different types, traditional zebu, cross-breeds and exotic breeds. Within the traditional zebu breeds, animals were, if possible, further categorized on phenotypical characteristics in three breeds, the Kola/Danakil breed which belongs to the Sanga group and which is found in the North Eastern part of the country, the Ethiopian Boran and a breed found in Bako-Gazer called traditionally Male. Farmers were asked on the testing day in order to avoid recall bias, about the work stamina of their ox and if they had noticed any changes such as weakness, and reluctance to work in the field during the last year.

Statistical analysis

Data were double entered in Access, validated with EpiInfo (version 3.3.2) and analyzed with the software package STATA 10.1 (StataCorp, Texas, USA). A variance component analysis was performed for the different levels of the multicluster sampling (Woreda, Kebele and village) using Generalized Linear Mixed Models with binary outcome and logit link function (GLLAMM add-on). The analysis indicated that most variance was associated with village and Woreda. Village was therefore included as random effect in the logistic regression model.

Data on prevalence and cattle characteristics were analyzed using a logistic regression with random effect on village. Prevalence was calculated as overall prevalence, as prevalence stratified by Woreda and by year as well as an overall prevalence by Woreda combining all 3 years. Apparent prevalence was calculated using both the official >4 mm and a >2 mm cut off. Estimation of the true prevalence and their 95% CI were obtained using the Rogan-Gladen estimator as described by Greiner and Gardner (2000) based on the proportion of test positive cattle (apparent prevalence) and a sensitivity and specificity of the test of 69% and 97%, respectively, as described by Ameni and others (2008). Univariable and multivariable analysis of risk factors inherent to the animal (age,

breed, sex, and body condition) and altitude were performed with the >2 mm cut-off only and using, as mentioned above logistic regression models. The results were expressed in odds ratio, 95% confidence interval for the odds ratio and p-values.

Results

BTB prevalence in cattle

Individual prevalence stratified by Woreda and year are shown in table 1. Overall, a total of 5377 cattle were tested with the CIDT in the 3 Woredas over a period of 3 years. Each Woreda had a unique temporal pattern of prevalence over the years, but prevalence by Woreda was not statistically significantly changing over the years, with the exception of the second year in Meskan, where the peak prevalence of 7.9% (cut off >2 mm) differed significantly from the two other years with lower prevalences ($p = 0.13$).

The lowest prevalence was found in Woldia (0.3 % and 2.2% when using >4 and >2 mm cut-off respectively). Prevalence with the >2 mm cut-off was 3.3 times higher than with the >4 mm cut-off in Bako-Gazer and 7.3 times higher in Woldia. Prevalence in the lowlands of Woldia was lower (1.7%) than in the highland zone (2.9%) but the results were not statistically significant (OR: 0.6; CI:0.1;3.1; cut-off >2 mm). True prevalence could be estimated only when using a >2 mm cut-off for Meskan and Bako-Gazer which had an overall prevalence of 4.5% (CI: 2.9%-6.1%) and 2.4% (CI: 0.9%-3.9%) respectively. It could not be estimated for Woldia due to low apparent prevalence and low sensitivity of the tuberculin test (65%).

Herd prevalence was, when using the 4 mm cut-off, the lowest in Woldia (6 positive herds out of 22, 27.3%) and the highest in Bako-Gazer with 13 positive herds out of 19 (68.4%). In Meskan, 14 herds out of 21 were positive (66.7%). When using the 2 mm cut-off, herd prevalence reached 100% in Meskan and Bako-Gazer, whereas 20 villages out of 22 were positive (91%) in Woldia.

Risk factors for positive CIDT

Since only three Borans and three Holstein were tested that were negative for the CIDT, these animals were excluded from the univariable and multivariable analysis. The results

of the univariable analysis are shown in table 2. Sex was significant in the univariable analysis including all three Woredas with bulls and oxen showing an OR of 1.6 (OR 95%: 1.1-2.3) and 2 (OR 95%: 1.4-2.6), respectively, when compared to females. Animals with good (musculous to fat) body condition were more at risk for a positive CIDT (OR: 2; OR 95%: 1.5-2.9) than animals with a normal body condition form. Juvenile cattle aged 1-2 years had an OR smaller than 1 for BTB positivity (overall OR: 0.5, OR 95%: 0.3-0.8) when compared to adult breeding cattle (\Rightarrow 3 – 10 years). Oxen accounted for 32.8% (N=1268) of the tested cattle; they were older than 5 years, which is the earliest castration age and 97.4% of the animals were in good body condition.

The analysis of the different breed categories had to be conducted separately for each Woreda since Male cattle were only found in Bako-Gazer and Kola only in Woldia. In Woldia, 36.2% of the tested cattle were Kola. The proportion of positive animals in Woldia was 1.6% in Kola compared to 3.2% in unclassified zebus (OR: 0.5; CI: 0.2; 1.0). The proportion of adults (animals older than three years) was higher in Kola (91%) than in unclassified zebus (75.3%). The sex composition was similar in the Kola as in the unclassified zebu group. Male, in Bako-Gazer accounted for 4.8% of the tested cattle. The proportion of positive cattle was higher in the Male cattle (5/78) than in the unclassified zebus (72/1528), but this effect was statistically not significant. The proportion of adult animals was higher in Male (97.3%) than in unclassified zebus, with animals older than four years accounting for 51.3% of the Male animals. Male cattle had a higher proportion of females (74.4%) than unclassified zebus (50.3%). Cross-breeds were present in all Woredas but in such low numbers (overall N = 58; 1.1%) that no analysis has been performed.

The multivariable analysis confirmed in general the findings of the univariable analyses. The results are shown in table 3. Overall, oxen and animals in good body condition were significantly associated with positive BTB reactors. This was also the case in Meskan. In contrast, none of the variables were significantly associated with positive CIDT in Woldia and only the oxen in Bako-Gazer alone were associated with positive reactors.

***M. avium* reaction**

M. avium positive reactions were found in all 3 Woredas (overall N=188), but statistically differed by regions. No *M. avium* reaction was found in calves younger than 1 year. In Woldia the *M. avium* prevalence was nearly 3 times lower than in Meskan (data not shown). The highest prevalence was found in Meskan (4.7%, CI: 3.4; 6.3%), followed by Bako-Gazer (3.6%; CI: 2.8; 4.8%) and Woldia (1.7%; CI: 1.1; 2.6%).

The univariable analysis showed that year, sex, age and breed were not significantly associated with positive *M. avium* reaction. However, body condition was shown to influence positivity with animals in good condition having an OR=1.6 (CI: 1.0; 2.3) when compared to normal body condition as was the case with *M. bovis* tuberculin positivity. In the multivariable analysis, only animals older than 10 years were significantly associated with *M. avium* positivity (OR: 0.4; CI OR: 0.2; 0.7) rather than younger animals.

Mixed PPD reactions

Hundred and nine animals (2%) showed swellings greater than four millimeter at the avian as well as at the bovine PPD injection sites. Out of these animals, five were classified as positive BTB reactors when OIE definition applied.

Draft animals

Overall, 60% (34/57) of all BTB positive (4 mm cut-off) and 38% (72/188) of all MAC positive animals were oxen, thus draft animals.

Thirty-three animals, all oxen, were classified as draft animals and additional interview information on their stamina was available. Twenty two were BTB positive (67%) using the 2 mm cut-off. Half of these animals (n=11) were said to be weaker and less able to do field work during the last year. In the contrary, only 1 out of the 11 PPD negative oxen (9%) was said to be weak. Statistical difference was found when tabulating PPD results and animal stamina ($p = 0.02$).

Discussion

In order to embark in an efficient national BTB control and/or elimination program, infected cattle need to be identified accurately and in early stages of the disease. Failure to do so will lead to continued transmission of the disease. The detection of BTB in live animals using the comparative intra-dermal tuberculin test is recognized as official test in most countries. The test uses purified protein derivatives (PPD), a cocktail of mycobacterial antigens with suboptimal specificity. In Ethiopia, Ameni and others (2008) re-evaluated the OIE cut-off recommendation of > 4 mm and suggested the > 2 mm cut-off as more appropriate for Ethiopia. In this study, the authors found an overall prevalence of less than 1% when using the >4 mm cut-off, which is much lower than what was found in previous studies from Central Ethiopia, where prevalence in zebus between 7.9% and 11.6% were described when using the same cut-off. Those latter studies, however, were carried out in an urban/peri-urban region having higher numbers of exotic breeds (Holstein cows and their cross breeds), more intensive livestock keeping systems and higher burden of BTB. In the region of Addis Abeba, BTB prevalence was shown to be between 22 % and 34% in exotics (Ameni and others 2007, Tsegaye and others in press). In contrast, our present study included only rural areas characterized by local zebu breeds and traditional smallholder mixed farming practice. Rural versus peri-urban as well as breed differences of *M. bovis* prevalence in Africa are not new and have already been described in the first half of the twentieth century (Von Ostertag and Kulenkampff 1941).

Considering the absence of effective control in most of the sub-Saharan countries of Africa, these observations show the extraordinary persistence of low level transmission of bovine tuberculosis from animal to animal in rural areas despite the wide distribution of the disease in the Woredas (high herd-village prevalence). Abattoir studies were carried out in the same study areas and confirmed our low prevalence: out of 37 000 inspected cattle only 4% showed tuberculous-like lesions with *M. bovis* isolated from 58 out of 171 acid-fast cultures (Berg and others in press). With the given data the authors could not detect a significant temporal trend, although variations over the years were observed. Within a Woreda, always the same villages were tested during the same month of each year to avoid seasonal bias and the same person performed all the tests to avoid bias

related to the testing method. The PPD reagents were all from the same manufacturer but from different batches. Batches could have been influenced by transport, temperature, and storing. Also, the variations could have simply been explained by sampling variations. However, seasonality could have influenced variation between the three different Woredas to some extent since each Woreda was tested during different time in the year.

Our observations indicate endemic stable transmission at a comparatively low prevalence, similarly to the observations made by Cleaveland and others (2007) in Tanzania. Other authors, however, have found high prevalence in zebu cattle in other African countries (Bongo and others 2009). The authors observed in Meskan Woreda over the years a general increase of Holstein cattle, originating from Addis Abeba and vicinity, thus highlighting the danger of potential spread of the disease from urban areas characterized by high BTB prevalence into low BTB prevalence rural areas either by movement of live exotic breeds or potentially through their semen (artificial insemination) (Niyaz and others 1999).

The apparent small variation in BTB prevalence over the years in Bako-Gazer, although showed to be statistically not significant could be explained by various factors varying over the years and acting on an already low existing BTB prevalence, such as elimination of positive animals, and/or presence of immunosuppressive factors such as disease epidemics, heavy parasitism, nutritional factors and involvement of MAC agents [*Mycobacterium avium* complex] (Lepper and others 1977, Doherty and others 1996, Dunn and others 2006,). However, although there is a geographical pattern of *M. avium* positivity, data suggested that *M. avium* reaction did not vary significantly during the time of the study; therefore it was unlikely to have influenced the variation in BTB prevalence over the years. Studies have shown that co-infection with paratuberculosis compromises skin test results by drastically decreasing sensitivity of the test (Walravens and others 2002, Aranaz and others 2006, Alvarez and others 2008). Similarly, Amadori and others (2002) showed in a trial that cattle sensitized by mycobacteria of the avium and intracellulare group, concealed *M. bovis* for a certain period of time. The CIDT can

fail to diagnose *M. bovis* infection because *M. avium* was shown to provide a certain degree of immunity against *M. bovis* (Hope and others 2005). No studies have been done so far on the prevalence of paratuberculosis (Johne's disease) in Ethiopian cattle and it is not known to what extent such a disease could compromise the detection of BTB in rural Ethiopia using the CIDT and thus leading to false negative animals. It is likely that also other co-infections like *Fasciola* spp. may affect CIDT response (Flynn and others 2006). More research is needed to assess CIDT response in relation to co-infections in Ethiopian cattle before coming to definitive conclusions regarding BTB prevalence. Co-infection and poor animal health could be a major source of false negative results indicating the need to interpret survey results with caution.

Animals in good body condition showed more CIDT positive responses than normal and thin animals (OR: 2; CI:1.5;2.9) – a finding many other authors also have shown (Delafosse and others 1995). This suggests that animals in poor body condition may have a compromised immune response in response to PPD injections. Positive *M. avium* reaction was significantly associated with positive *M. bovis* reactor ($p=0.006$). Mixed *M. avium* and *M. bovis* skin reactions greater than 4 mm each were found overall in 104 of the 5371 tested animals but these were classified as BTB negative animals according to the author's definition of positivity since both sites reacted equally strong. The question arises whether this phenomenon reflects a true mixed infection of both agents, thus classifying the animals as BTB positive or whether the animals have a generally sensitized unspecific immune reaction unrelated to any mycobacterial infection. Strain isolation from animals showing mixed skin reactions is warranted to answer this question.

Using a 2 mm cut-off increased the apparent prevalence 3 to 7 fold depending on the region. Reducing the cut-off increases the number of positive animals. If removed from the herd and in the absence of any compensation model in resource poor countries, the losses are to the farmer. The question remains in these countries: who should pay for a control scheme involving culling of positive animals, a strategy that has been shown to be very effective in industrialized countries where large financial means have been invested for a compensation approach? The cost of false negative diagnosis however, very likely

outweighs the cost of false positive diagnosis as undetected sick animals would contribute to the spread of the disease (Bongo and others 2009). Furthermore, the accuracy of a 2 mm skin result difference is questioned. Bias might be related to the reading of skin thickness using a cut-off as small as 2 mm, e.g. cuts caused by shaving the injection sites might lead to minor skin inflammation and thus increase skin thickness, animals are not standing still during reading, pressure on the caliper by the person reading the skin thickness

The authors observed that overall oxen were at higher risk for being positive reactors (OR: 2; CI: 1.4; 2.6). Farmers usually took extra care of their oxen by feeding them well compared to the other sex classes because oxen are essential workforce for ploughing, threshing and harvesting. This study could not explain why these risk factors varied by Woredas, for instance why neither oxen nor body condition score influenced CIDT results in Woldia. There may be an environmental or husbandry explanatory component. If oxen are more at risk for BTB, the whole agriculture, particularly crop farming, could be affected by reduced work force. It is therefore important to assess the impact of the disease on the daily working capacity of draft animals. In the current study, BTB appeared to significantly affect the stamina of oxen who are central to crop farming in Ethiopia and thus to the national economy. However the chosen sample size was too small to draw final conclusions and further research is needed in that particular field.

The authors assessed the effect of altitude on BTB prevalence in Woldia, where cattle in the highlands (> 2000 m) were more frequently tuberculin positive than in cattle from regions in lower altitude (<2000 m) but the difference was not significant statistically. For human TB, it is evidenced knowledge that TB is less prevalent in high altitude (Saito and others 2006). Though known to be linked with changes in alveolar oxygen pressure, the exact mechanism behind the effect of higher altitude on tuberculosis is not fully established yet (Saito and others 2006). Most extra-pulmonary TB cases recorded in the DOTS in the hospital of Woldia were coming from the lowlands (unpublished data). More research should be undertaken to assess the impact of altitude on BTB in cattle and

assess whether the same mechanism would apply for BTB as for TB (while considering cattle keeping practices, which can sometimes vary between lowlands and highlands).

Knowing the individual and herd/village prevalence of BTB in rural areas can contribute to the choice of a future control program of BTB in Ethiopia. In light of our results, the question arises if the CIDT alone is accurate enough to detect infected animals in rural areas which seem to be characterized by very low BTB prevalence, high herd/village prevalence and high burden of other infectious diseases and parasitism and which cut-off would be more suitable in such a situation. Should the standard skin testing be coupled with blood tests such as the IFN- γ test to increase sensitivity of detection of positive animals? Ethiopia has with 43 million heads the biggest cattle herd in Africa (CSA 2008). Therefore a mass vaccination as it was done for instance in Malawi (Ellwood and Waddington 1972) or a test and slaughter program of all herds is not feasible financially and logistically, as long as the State will not be able to compensate farmers for culled animals. However, a test and slaughter program might be economically feasible in some regions with very low BTB prevalence. It is therefore essential to know the BTB status in each region. Furthermore, “zoning” could help keeping low BTB prevalence in regions that are at low risk. A future challenge will be to avoid the spread of the disease into low prevalent rural areas, by the distribution of Holsteins or Holstein semen in order to improve milk cattle, coming from Central Ethiopia with its high BTB prevalence, in case no other measures are in place in the highlands.

M. tuberculosis was isolated in cattle from abattoir samples, thus indicating a human-animal transmission (Berg and others in press). Considering the high prevalence of human TB in Ethiopia (WHO 2008), and the shown transmission to cattle, the question arises to what extent a *M. tuberculosis* infection in cattle would affect the CIDT. This question needs further research and attention, especially when considering the zoonotic potential of both *M. bovis* and *M. tuberculosis*.

In conclusion, this study showed a very low apparent prevalence of BTB in cattle of rural Ethiopia in contrast to Central Ethiopia. The CIDT results were likely to be influenced by

many factors such as the testing method, pre-sensitization with non-tuberculous mycobacteria and other infectious diseases. Interpretation of results should therefore be done with caution. Inconsistency of results regarding risk factors for positive reactors inherent to animals by regions highlighted the danger to generalize statements and that results should be rather interpreted regionally within Ethiopia. Finally, this study suggests a possible role of MAC agents in the general tuberculosis epidemiology, which should be further investigated.

Acknowledgments

We are very grateful to the Wellcome Trust (UK) for funding this study. We thank AHRI/ALERT (Addis Abeba) for the logistic support. We also thank Nesredin Hussein, Mohamed Sanni, Habtamu Tadelle, Tesfaye Erenso, Mesgebu Asmro, Bamlaku Tilahun and Alemayehu Kifle for their valuable help and support during field work and Dr. Brian Robertson for commenting on the manuscript.

References

- ALVAREZ, J., de JUAN, L., BEZOS, J., ROMERO, B., SA´EZ, J.L., REVIRIEGO, GORDEJO F.J., BRIONES V., MORENO, M.A., MATEOS, A., DOMINGUEZ, L. & ARANAZ, A. (2008). Interference of paratuberculosis with the diagnosis of tuberculosis in a goat flock with a natural mixed infection. *Veterinary Microbiology* 128: 72–80
- AMADORI, M., TAGLIABUE, S., LAUZI, S., FINAZZI, G., LOMBARDI, G., TELOA, P., PACCIARINI, L. & BONIZZI, L. (2002). Diagnosis of *Mycobacterium bovis* infection in calves sensitized by Mycobacteria of the avium/intracellulare group. *Journal of Veterinary Medicine* B49: 89-96.
- AMENI, G., AMENU, K. & TIBBO, M. (2003). Bovine tuberculosis: prevalence and risk factor assessment in cattle and cattle owners in Wuchale-Jida district, Central Ethiopia. *The International Journal of Applied Research in Veterinary Medicine*. 1: 1-13
- AMENI, G., ASEFFA, A., ENGERS, H., YOUNG, D., GORDON, S., HEWINSON, G. & VORDERMEIER, M. (2007). High prevalence and increased severity of pathology of bovine tuberculosis in Holsteins compared to zebu breeds under field cattle husbandry in Central Ethiopia. *Clinical and Vaccine Immunology*. 14(10): 1356-1361
- AMENI, G., HEWINSON, G., ASEFFA, A., YOUNG, D. & VORDERMEIER, M. (2008). Appraisal of interpretation criteria for the comparative intradermal tuberculin test for the diagnosis of bovine tuberculosis in Central Ethiopia. *Clinical and Vaccine Immunology*. 15(8): 1272-1276
- ARANAZ, A., De JUAN, L., BEZOS, J., ´LVAREZ, J., ROMERO, B., LOZANO, F., PARAMIO, J.L., LOPEZ-SANCHEZ, J., MATEOS, A. & DOMINGUEZ L. (2006). Assessment of diagnostic tools for eradication of bovine tuberculosis in cattle co-infected with *Mycobacterium bovis* and *M. avium subsp. Paratuberculosis*. *Veterinary Research* 37: 593–606.
- ASSEGED, B., WOLDESENBET, Z., YIMER, E. & LEMMA E. (2004). Evaluation of Abattoir Inspection for the diagnosis of *Mycobacterium bovis* infection in cattle at Addis Ababa abattoir. *Tropical Animal Health and Production*. 36: 537-546
- AYELE, W.Y., NEILL, S.D., ZINSSTAG, J., WEISS, M.G. & PAVLIK, I. (2004). Bovine tuberculosis, an old disease but new threat to Africa. *International Journal of Tuberculosis and Lung Disease*. 8(8): 924-937.
- BENNET, S., WOODS, T., LIYANAGE, W.M. & SMITH, D.L. (1991). A simplified general method for cluster-sample surveys of health in developing countries. *Rapport trimestriel de statistiques sanitaires mondiales*. 44: 98-106

BERG, S., FIRDESSA, R., HABTAMU, M., GADISSA, E., MENGISTU, A., YAMUAH, L., AMENI, G., VORDERMEIER, M., ROBERTSON, B., SMITH, N.H., ENGERS, H., YOUNG, D., HEWINSON, R.G., ASEFFA, A. & GORDON, S.V. The burden of mycobacterial disease in Ethiopian cattle: implications for public health. *PLoS One*. In press

BONGO, N. R. N., MUELLER, B., DIGUIMBAYE-DJAIBE, C., SCHILLER, I., MARG-HAUFE, B., CAGIOLA, M., JOLLEY, M., SURUJBALLI, O., AKAKPO, A. J., OESCH, B. & ZINSSTAG, J. (2009) Comparative assessment of Fluorescence Polarisation and tuberculin skin testing for the diagnosis of bovine tuberculosis in Chadian cattle. *Preventive Veterinary Medicine*, in press.

CENTRAL STATISTICAL AGENCY (CSA 2008), Agricultural sample survey 2006/07, Vol II: Report on livestock and livestock characteristics. Statistical bulletin 388, Addis Abeba, Ethiopia

CLEAVELAND, S., SHAW, D.J., MFINANGA, S.G., SHIRIMA, G., KAZWALA, R.R., EBLATE, E. & SHARP, M. (2007). *Mycobacterium bovis* in rural Tanzania: risk factors for infection in human and cattle populations. *Tuberculosis*. 87(1): 30-43

DELAFOSSÉ, A., TRAORE, A. & KONE, B. (1995). Isolation of pathogenic *Mycobacterium* strains in cattle slaughtered in the abattoir of Bobo-Dioulasso, Burkina Faso. *Revue d'élevage et de médecine vétérinaire des pays tropicaux*. 48(4): 301-306

DOHERTY, M.L., MONAGHAN, M.L., BASSET, H.F., QUINN, P.J., WILLIAMS, C. & DAVIS, W.C. (1996). Effect of dietary restriction on cell-mediated immune responses in cattle infected with *Mycobacterium bovis*. *Veterinary Immunology and Immunopathology*. 49: 307-320

DUNN, J.R., KANEENE, J.B., GROOMS, D.L., BOLIN, S.R., BOLIN, C.A. & BRUNING-FANN, C.S. (2005). Effects of positive results for *Mycobacterium avium subsp paratuberculosis* as determined by microbial culture of feces or antibody ELISA on results of caudal fold tuberculin test and interferon-gamma assay for tuberculosis in cattle. *Journal of the American Veterinary Medical Association*. 1; 226(3): 429-35.

ELLWOOD, D.C. & WADDINGTON, F.G. (1972). A second experiment to challenge the resistance to tuberculosis in B.C.G. vaccinated cattle in Malawi. *British Veterinary Journal*. 128(12): 619-26

FLYNN, R. J., MANNION, C., GOLDEN, O., HACARIZ, O. & MULCAHY, G. (2006). Experimental *Fasciola hepatica* infection alters responses to tests used for diagnosis of bovine tuberculosis. *Infection and Immunity*. IAI. 01445-06.

GREINER, M. & GARDNER, I.A. (2000). Application of diagnostic tests in veterinary epidemiologic studies. *Preventive Veterinary Medicine* 45: 43-59

- HOPE, J.C., THOM, M.L., VILLARREAL-RAMOS, B., VORDERMEIER, H.M., HEWINSON, R.G. & HOWARD, C.J. (2005). Exposure to *Mycobacterium avium* induces low-level protection from *Mycobacterium bovis* infection but compromises diagnosis of disease in cattle. *Clinical and Experimental Immunology*. 141: 432-439
- LEPPER, A. W. P., PEARSON, C. W. & CORNER, L.A. (1977). Anergy to tuberculin in beef cattle. *Australian Veterinary Journal* 53: 214–216
- MOSTOWY, S., INWALD, J., GORDON, S., MARTIN, C., WARREN, R., KREMER, K., COUSINS, D. & BEHR, M.A. (2005). Revisiting the Evolution of *Mycobacterium bovis*. *Journal of Bacteriology*, 187(18): 6386-6395
- MSANGI, B.S.J., BRYANT, M.J., KAVANA, P.Y., MSANGA, Y.N. & KIZIMA, J.B. (1999). Body measurements as a management tool for crossbred dairy cattle at a farm Smallholder condition. In Proceedings of the meeting in The Tanzanian Society of Animal Production. 26th Scientific Conference. Arusha, Tanzania.
- NIYAZ AHMED, A.S., KHAN, J.R. & GANAI, N.A. (1999). DNA amplification assay for rapid detection of bovine tubercle bacilli in semen. *Animal Reproduction Science*. 57(1-2): 15-21.
- SAITO, M., PAN, W.K., GILMAN, R.H., BAUSTITA, C.T., BAMRAH, S., MARTIN, C.A., TSIOURIS, S.J., ARGUELLO, D.F. & MARTINEZ-CARRASCO, G. (2006). Comparison of altitude effect on *Mycobacterium tuberculosis* infection between rural and urban communities in Peru. *American Journal of Tropical Medicine and Hygiene*. 75(1): 49-54
- TEKLUL, A., ASSEGED, B., YIMER, E., GEBEYU, M. & WOLDESENBET, Z. (2004). Tuberculous lesions not detected by routine abattoir inspection: the experience of the Hossana municipal abattoir, Southern Ethiopia. *Revue Scientifique Technique*. 23(3) : 957-964
- TSCHOPP, R., SCHELLING, E., HATTENDORF, J., ASEFFA, A. & ZINSSTAG, J. (2009). Risk factors of bovine tuberculosis in cattle in rural livestock production systems of Ethiopia. *Preventive Veterinary Medicine*, 89: 205-211.
- TSEGAYE, W., ASEFFA, A., MACHE, A., MENGISTU, Y., BERG, S. & AMENI, G. Epidemiological study of bovine tuberculosis in dairy farms of Addis Abeba, using conventional and molecular methods. (To be submitted)
- VON OSTERTAG, R. & KULENKAMPFF, G. (1941). Tierseuchen und Herdenkrankheiten in Afrika. Ed. Walter de Gruyter, Walter de Gruyter.
- WALRAVENS, K., MARCHE, S., ROSSEELS, V., WELLEMANS, V., BOELAERT, F., HUYGEN, K. & GODFROID, J. (2002). IFN- γ diagnostic tests in the context of

bovine mycobacterial infections in Belgium. *Veterinary Immunology and Immunopathology*. 87:401-406.

WORLD HEALTH ORGANIZATION. (2008). Global tuberculosis control. WHO report. Pp 105-108.

ZINSSTAG, J., SCHELLING, E., ROTH, F. & KAZWALA, R. (2006). Economics of bovine tuberculosis. In: *Mycobacterium bovis*, infection in animals and humans. Eds Thoen C.O., Steele J. H., Gilsdorf M.J. Blackwell Publishing, IOWA USA; 68-83

Table 1: Prevalence of BTB in the selected study sites using 4 and 2 mm cut off (calculated using a logistic regression model with a random effect on villages)

Study sites		all years	Year 1	Year 2	Year 3	
All Woredas	Number animal	5377	1736	1761	1880	
	Number BTB reactors	4 mm cut-off	57	15	26	16
		2 mm cut-off	238	79	85	74
	Prevalence (LCL-UCL) in %	4 mm cut-off	0.9 (0.6;1.3)	0.7 (0.3;1.8)	1 (0.5;2)	0.8 (0.5;1.4)
		2 mm cut-off	4 (3.4;4.8)	4.1 (3.1;5.5)	4.2 (3.1;5.7)	3.7 (2.7;4.9)
Meskan	Number animal	1838	624	590	624	
	Number BTB reactors	4 mm cut-off	27	4	14	9
		2 mm cut-off	111	28	47	36
	Prevalence (LCL-UCL) in %	4 mm cut-off	1.3 (0.7;2.1)	0.3 (0.02;3.3)	2 (1.0;4.4)	1.44 (0.7;2.7)
		2 mm cut-off	6 (4.9;7.3)	3.9 (2.3;6.5)	7.9 (6; 10.4)	5.7 (4.1;7.9)
Woldia	Number animal	1923	620	629	674	
	Number BTB reactors	4 mm cut-off	8	2	4	2
		2 mm cut-off	49	22	13	14
	Prevalence (LCL-UCL) in %	4 mm cut-off	0.3 (0.1;1.1)	0.3 (0.08;1.3)	0.6 (0.2;1.7)	0.2 (0.07; 1.2)
		2 mm cut-off	2.2 (1.5;3.3)	3.2 (1.8; 5.5)	1.4 (0.5;3.8)	2 (1.2;3.4)
Bako-Gazer	Number animal	1616	492	542	582	
	Number BTB reactors	4 mm cut-off	22	9	8	5
		2 mm cut-off	78	29	25	24
	Prevalence (LCL-UCL) in %	4 mm cut-off	1.4 (0.9;2)	1.8 (0.9;3.5)	0.7 (0.2;3.3)	0.9 (0.3;2)
		2 mm cut-off	4.6 (3.5;6)	5.8 (4;8.4)	4.3 (2.6;7)	3.5 (1.9;6.3)

Table 2: Univariable analysis of cattle variables in the study sites combining all years (logistic regression with random effect on village)

Variable		Overall			Meskan			Woldia			Bako-Gazer		
		Number (%) animals	p-value	OR (95% CI)	Number (%) animals	p-value	OR (95% CI)	Number (%) animals	p-value	OR (95% CI)	Number (%) animals	p-value	OR (95% CI)
Sex	Female	2507 (46.6)			783 (42.6)			889 (46.3)			835 (51.7)		
	Bull	1106 (20.6)	0.013	1.6 (1.1; 2.3)	784 (42.6)	0.8	1.1 (0.6; 2.0)	293 (15.2)	0.6	1.3 (0.5; 3.0)	480 (29.7)	0.005	2.2 (1.3; 3.9)
	Ox	1764 (32.8)	0.0001	2 (1.4; 2.6)	785 (42.6)	0.003	1.9 (1.2; 3.0)	741 (38.5)	0.2	1.4 (0.8; 2.7)	301 (18.6)	0.001	2.6 (1.4; 4.8)
Age	Calves (<1 yr)	257 (4.8)	0.2	0.6 (0.3; 1.3)	65 (3.5)	0.9	0.9 (0.3; 2.6)	123 (6.4)	0.6	0.7 (0.1; 2.9)	69 (4.3)	0.2	0.3 (0.04; 2.0)
	Juvenile (1-2 yr)	752 (14)	0.007	0.5 (0.3; 0.8)	290 (15.8)	0.017	0.4 (0.2; 0.8)	244 (12.7)	0.3	0.6 (0.2; 1.7)	218 (13.5)	0.2	0.6 (0.3; 1.3)
	Breeder (=>3-10 yr)	3371 (62.7)			1175 (63.9)			1268 (66)			928 (57.4)		
	Old (>10 yr)	997 (18.5)	0.6	1.1 (0.8; 1.5)	308 (16.8)	0.7	1.1 (0.7; 1.8)	288 (15)	0.3	1.5 (0.7; 3.0)	401 (24.8)	0.7	0.9 (0.5; 1.6)
Body condition	Normal	2269 (61.3)			657 (54.1)			993 (74.5)			619 (53.7)		
	Emaciated to thin	335 (9.1)	0.7	0.9 (0.4; 1.7)	73 (6)	0.4	0.5 (0.1; 2.3)	168 (12.6)	0.8	0.9 (0.2; 3.0)	94 (8.2)	0.5	1.4 (0.5; 3.8)
	Musculous to fat	1095 (29.6)	0.004	2 (1.5; 2.9)	484 (39.9)	0.002	2 (1.3; 3.3)	172 (12.9)	0.5	1.4 (0.5; 3.9)	439 (38.1)	0.1	1.5 (0.8; 2.8)
Altitude	Continuous	5377	0.35										

Table 3: Multivariable analysis (calculated using the 2 mm cut-off and logistic regression with random effect on village)

Variable		Overall			Meskan			Woldia			Bako-Gazer		
		Number (%) animals	p- value	OR (95% CI)	Number (%) animals	p- value	OR (95% CI)	Number (%) animals	p- value	OR (95% CI)	Number (%) animals	p- value	OR (95% CI)
Sex	Female	2507 (46.6)			783 (42.6)			889 (46.3)			835 (51.7)		
	Bull	1106 (20.6)	0.5	1.2 (0.7;2.0)	784 (42.6)	0.4	1.3 (0.6;2.9)	293 (15.2)	0.7	0.7 (0.1;3.5)	480 (29.7)	0.4	1.4 (0.6;3.1)
	Ox	1764 (32.8)	0.001	2.0 (1.3;3.0)	785 (42.6)	0.02	2.0 (1.1;3.7)	741 (38.5)	0.7	1.2 (0.5;3.1)	301 (18.6)	0	3.1 (1.4;7.0)
Age	Calves	257 (4.8)			65 (3.5)			123 (6.4)			69 (4.3)		
	Juvenile	752 (14)	0.7	0.8 (0.3;2.0)	290 (15.8)	0.1	2.6 (0.8;8.5)	244 (12.7)	0.5	0.5 (0.06;4.3)	218 (13.5)	0.3	0.3 (0.04;2.7)
	Breeder	3371 (62.7)	0.056	0.5 (0.2;1.0)	1175 (63.9)	0.2	0.5 (0.2;1.5)	1268 (66)	0.6	0.6 (0.1;3.0)	928 (57.4)	0.2	0.4 (0.1;1.5)
	Old	997 (18.5)	0.7	0.9 (0.6;1.4)	308 (16.8)	0.6	1.2 (0.6;2.1)	288 (15)	0.7	1.8 (0.7;4.2)	401 (24.8)	0.1	0.6 (0.3;1.2)
Body condition	Normal	2269 (61.3)			657 (54.1)			993 (74.5)			619 (53.7)		
	Emaciated to thin	335 (9.1)	0.9	1.0 (0.5;2.0)	73 (6)	0.3	0.4 (0.09;2.0)	168 (12.6)	0.9	1.0 (0.3;3.8)	94 (8.2)	0.4	1.6 (0.5;4.7)
	Musculous to fat	1095 (29.6)	0.013	1.6 (1.1;2.2)	484 (39.9)	0.05	1.6 (1.0;2.7)	172 (12.9)	0.7	1.2 (0.4;3.5)	439 (38.1)	0.6	1.2 (0.6;2.2)

Table 4: Univariable analysis of MAC results in all study sites combining all years (logistic regression with random effect on village)

Variable		Overall			Meskan			Woldia			Bako-Gazer		
		Number (%) animals	p- value	OR (95% CI)	Number (%) animals	p- value	OR (95% CI)	Number (%) animals	p- value	OR (95% CI)	Number (%) animals	p- value	OR (95% CI)
Sex	Female	2507 (46.6)			783 (42.6)			889 (46.3)			835 (51.7)		
	Bull	1106 (20.6)	0.8	0.9 (0.6;1.4)	784 (42.6)	0.051	0.4 (0.2;0.9)	293 (15.2)	0.8	0.9 (0.3;2.4)	480 (29.7)	0.2	1.5 (0.8;2.6)
	Ox	1764 (32.8)	0.1	1.3 (0.9;1.8)	785 (42.6)	0.055	1.5 (0.9;2.4)	741 (38.5)	0.6	0.8 (0.4;1.8)	301 (18.6)	0.9	1 (0.4;2.2)
Age	Calves (<1 yr)	257 (4.8)			65 (3.5)			123 (6.4)			69 (4.3)		
	Juvenile (1-2 yr)	752 (14)	0.9	0	290 (15.8)	1	0	244 (12.7)	1	0	218 (13.5)	1	0
	Breeder (=>3-10 yr)	3371 (62.7)	0.1	0.7 (0.4;1.1)	1175 (63.9)	0.02	0.3 (0.2;0.8)	1268 (66)	0.3	0.5 (0.2;1.8)	928 (57.4)	0.3	1.4 (0.7;2.8)
	Old (=>10 yr)	997 (18.5)	0.1	0.7 (0.5;1)	308 (16.8)	0.3	0.7 (0.4;1.4)	288 (15)	0.2	0.5 (0.1;1.5)	401 (24.8)	0.4	0.8 (0.4;1.5)
Body condition	Normal	2269 (61.3)			657 (54.1)			993 (74.5)			619 (53.7)		
	Emaciated to thin	335 (9.1)	0.8	0.9 (0.4;1.8)	73 (6)	0.3	0.3 (0.5;2.7)	168 (12.6)	0.2	1.9 (0.7;4.8)	94 (8.2)	0.4	0.6 (0.1;2.4)
	Musculous to fat	1095 (29.6)	0.015	1.6 (1.1;2.3)	484 (39.9)	0.07	1.7 (0.9;2.9)	172 (12.9)	0.9	0.9 (0.3;3.1)	439 (38.1)	0.7	1.1 (0.6;2.0)
Altitude	Continuous	5377	0.16										

11. Risk factors of Bovine Tuberculosis in cattle in rural livestock production systems of Ethiopia

Rea Tschopp*^{1,2}, Esther Schelling¹, Jan Hattendorf¹, Abraham Aseffa², Jakob Zinsstag¹

¹ Swiss Tropical Institute, PO Box, CH-4002, Basel, Switzerland

² Armauer Hansen Research Institute (AHRI/ALERT), PO Box 1005, Addis Abeba, Ethiopia

[* Corresponding author: E-mail: rea.tschopp@unibas.ch]

Abstract

This study shows a representative stratified cluster sample survey of comparative intradermal tuberculin test apparent prevalence in cattle, using a cut off for positivity of 2 mm, from four regions in Ethiopia and assesses possible risk factors for tuberculin positive reaction in cattle. Seventy-three villages in 24 Kebeles (administrative units) were randomly selected, within which 2216 cattle from 780 owners were tested. In addition, 450 of these cattle owners were interviewed for risk factor assessment. Ninety-nine percent of the tested cattle in this rural livestock production system were traditional zebus. The individual overall cattle BTB prevalence was 3%, with the highest prevalence found in Meskan Mareko, in Central Ethiopia (7.9%) and the lowest in Woldia, in the North East edge of the Rift Valley (1.2%). Generalized Linear Mixed Models (GLMM) with random effect on Kebeles was used to analyze risk factors of cattle reactors and human tuberculosis infection. Purchase of cattle and presence of other livestock in the herd were statistically significant, with OR: 1.7, p-values of 0.03 and OR: 2, p = 0.05, respectively. Family members diagnosed with TB or showing clinical signs of extra pulmonary TB (EPTB) were reported in 86 households (19%). None of the assessed potential risk factors of disease transmission between cattle and human (food consumption, livestock husbandry, presence of BTB positive cattle) were statistically significant.

Key words: Ethiopia, bovine tuberculosis, *Mycobacterium bovis*, prevalence, cattle, risk factors

Introduction

Bovine tuberculosis (BTB) is an infectious disease caused by *Mycobacterium bovis*, a member of the *Mycobacterium tuberculosis* complex (MTC), which also comprises the closely related *M. tuberculosis*, the major causative agent of human tuberculosis (TB). (Van Soolingen et al., 1994). Around 9 million new cases of human tuberculosis and 2 million deaths are reported annually worldwide (CDC 2007), with sub-Saharan Africa displaying the highest annual risk of infection with tuberculosis probably catalyzed by the HIV/AIDS pandemic (Corbett et al. 2003). It has been estimated that *M. bovis* accounts globally for 3.1% of all human TB cases (2.1% of all pulmonary and 9.4% of all extra pulmonary TB cases) (Cosivi et al., 1998). However, the extent of *M. bovis* involvement in the global TB burden in Africa is still largely unknown. This can be partly explained by the fact that in humans, TB due to *M. bovis* is indistinguishable from that due to *M. tuberculosis* in terms of clinical signs, radiological and pathological features (Grange 2001). In addition, most laboratories in sub-Saharan Africa have not the capacity to differentiate *M. bovis* from *M. tuberculosis* (Ayele et al. 2004).

The epidemiology of *M. bovis* was described by numerous authors in extensive detailed reviews, however they tend to focus mainly on experiences from industrialized countries, where control and/or eradication programs have been implemented since a long time (O'Reilly and Daborn 1995, Cosivi et al., 1998, Pollock and Neill 2002, Wedlock et al., 2002, Phillips et al., 2003, Neill et al., 2005). Although cattle are considered to be the main hosts of *M. bovis*, the disease has been reported in many other species, including humans, other domesticated animals and wildlife (De Lisle et al., 2002). Infectious animal shed *M. bovis* via milk, saliva, feces/urine and discharging lesions (Phillips et al., 2003). It is generally accepted that human beings get infected either by inhalation of bacteria-containing dust-particles and aerosols shed by infected animals or by ingestion of contaminated animal products (e.g. raw milk) (Cosivi et al. 1998). The main route of infection in cattle is through aerosol exposure, facilitated by close contact between animals (Neill et al. 1991). In cattle, ingestion of contaminated products (e.g. pasture, water) is generally considered to be rather a secondary less important route of transmission (Menzies and Neill 2000). A high prevalence of *M. bovis* were found in a

recent abattoir survey in Chad in culture positive mammary glands and in young tuberculin positive animals (Müller B. personal communication). Jha et al (2007) isolated *M. bovis* in milk and feces from milking buffaloes and cattle in Nepal. This indicates that transmission to young animals by milk should not be neglected. Recent publications from Africa also suggest that ingestion of *M. bovis* might be an important mode of disease transmission in cattle, since mesenteric lymph nodes were shown to be more affected than mediastinal lymph nodes (Cleaveland et al. 2007, Ameni et al. 2007). Therefore, also contaminated environment might play a bigger role in the epidemiology of BTB than assumed until now, thus showing that our understanding of the epidemiology of *M. bovis* in sub-Saharan Africa is still limited.

Indeed, also little information on risk factors of disease transmission to cattle, between cattle and from cattle to humans is available from the African context and most information is extrapolated from experiences in the industrialized world. For Africa, the most comprehensive epidemiological studies have been done so far in Tanzania (Kazwala et al. 2001, Cleaveland et al. 2007, Mfinanga et al. 2004) and Uganda (Oloya et al. 2007). However, despite the paucity of information, it is generally accepted that besides causing major economic losses, BTB poses also a serious zoonotic threat in Africa (Ayele et al. 2004).

Bovine TB has been shown to be endemic in cattle from Ethiopia. However, most published data were obtained from central Ethiopia (Ameni et al. 2003, Asseged et al. 2004, Teklul et al. 2004, Ameni et al. 2007).

In this paper, we mainly attempt to assess possible risk factors for bovine tuberculosis in cattle and humans in rural Ethiopia. We also present briefly the results of a representative multi-stage cluster sample survey on BTB prevalence in cattle from four regions of Ethiopia for better understanding of the context.

Material and methods

Study sites

The cross-sectional study was carried out between November 2006 and May 2007 in the frame of a North-South BTB research collaboration, in 3 out of the 7 regional zones of Ethiopia (Oromia, Amhara, and Southern Nations, Nationalities and People Region (SNNPR)) between the latitudes of 5.1°N and 11.5°N and the longitudes of 36.1°E and 40.1°E. Within these regions, six Woredas (districts) were selected according to the further requirements of the study as a whole (e.g. presence of abattoirs, hospitals, wildlife), namely Woldia (Northern highlands), Meskanena Mareko (Rift Valley), Bako Gazer (Southern middle lands), Dinsho, Robe and Goro. The latter three Woredas were combined into one study area, the Bale Mountains, which is a highland area adjacent to a national park. Altitude of the study sites varied between 1300 m and 4200 m above sea level. Although belonging to different ethnic groups with different culture and religion, all farmers were sedentary small holders with similar mixed livestock-crop farming system.

Tuberculin survey in cattle

Sampling of cattle

Cattle herds were selected by a stratified cluster sampling proportional to the size of the cattle population, in which the unit village was considered as a cluster. Sample size was calculated using the formula described by Bennet et al (1991).

The standard error $s.e._x$ which measures the precision of our estimate is given by (1):

$$(1) \quad s.e._x = \sqrt{\frac{pqD}{n}} = \sqrt{\frac{pqD}{cb}}$$

Roh (ρ), which describes the rate of homogeneity, thus the variability is given by (2):

$$(2) \quad \rho = \frac{(\text{WithinHerdVariation})}{(\text{TotalVariation})}$$

$$(3) \quad D = 1 + (b - 1)\rho$$

We take ρ as 0.2, and using formula we obtain a design effect D of 6.8 (3). Choosing 30 animals per cluster, with a disease prevalence of 5% and 17 clusters (total sample size per Woreda = 510 animals) gives us an estimate of the standard error (1) or precision of 0.025. The total sample size per Woreda is given by $n=b*c$, thus 510 animals, which gives us a total number of required animals of 2040 for all 4 Woredas. A complete list of Kebeles and villages within the Kebeles was obtained from each Woreda agricultural office. Kebeles within the Woreda were selected randomly using random numbers generated in Microsoft Excel®; villages were selected randomly and proportionally to their number within a particular Kebele. Since cattle of all villagers are kept together, at least during the day on grazing areas and for drinking, each village was considered as one big cattle herd for assessment of tuberculin reactivity status. Thirty animals were selected from a minimum of five and a maximum of 15 owners per village. In general, not all animals per owner were tested since as many owners as possible per village were included in the study either randomly from a list of all owners (where owner number higher than 15) or including the total number of owners gathered at the place where the tuberculin testing was performed (where owner number was less than 15). Animals younger than 6 months, late stage pregnant cows and clinically sick animals were excluded from the testing. Possible sampling bias was introduced by the process that the owner himself decided which animals fulfilling the inclusion criteria were tested. Farmers were asked to gather their animals at a certain point in or in the proximity of the village (e.g. communal pasture, water point, middle of the village) for testing and reading. If animals were not at the meeting point during the reading day, house to house visit was conducted. As compensation and incentive for farmer's participation, all tested cattle were dewormed on the reading day with Albendazol boli (Ashialben 2500, Ashish Life Science PVT, Mumbai, India).

Tuberculin testing of cattle

Always the same person conducted the tuberculin testing and reading of the result to avoid bias related to injection and reading technique. The comparative intradermal tuberculin test was conducted in all cattle using both avian and bovine purified protein derivates (PPD) supplied by the Veterinary Laboratories Agency, Weybridge, UK. Intradermal injections of 0.1 ml (2,500 IU/ml) bovine PPD and 0.1 ml (2,500 IU/ml)

avian PPD were made in two shaved sites, 12 cm apart from each other in the middle neck region, after having recorded skin thickness with a caliper. Skin thickness was measured again at both injection sites after 72 hours. The reaction at each site was derived as the difference of the skin thickness after 72 hours minus the thickness before injection. An animal was considered positive if the bovine minus the avium reaction was greater than 2 mm (Ameni et al. 2008). A village herd was considered positive if it had at least one positive tuberculin reactor.

Interview of cattle owners

Cattle owners were interviewed according to their willingness to participate and given verbal consent, on the same day their cattle were tested for BTB. Interviews were made in all sites in Amharic by a trained interviewee. Questionnaires included closed and open questions on livestock husbandry/management and household characteristics, such as herd size and structure, presence of other livestock, vaccination /deworming of cattle, mixing of cattle and other livestock at night, cattle housing at night, watering and grazing system, reproduction, cattle contact with other cattle herds, purchasing of animals. Furthermore, questions were asked related to human consumption habit, contact between humans and cattle, TB knowledge and known TB status in the household. A household was considered positive for TB if at least one member in the last five years had been diagnosed with pulmonary TB or showed clinical signs of extra pulmonary TB (EPTB) (e.g. cervical lymphadenitis). In addition, focus group discussions were conducted in the villages.

Geographic coordinates and altitude were registered at the central point of each village by Global Positioning System (GPS).

Statistical analysis

Data were double entered in Access, validated with EpiInfo (version 3.3.2) and analyzed with the software package STATA/IC 10.1 (StataCorp, Texas, USA). Analysis of potential risk factors for cattle being positive for BTB and variance component estimation, were performed using Generalized Linear Mixed Models with binary outcome and logit link function (GLLAMM add-on). The exploration of the different variance components of each stage of the multistage cluster sampling indicated that the random

effect variances were mainly associated with Woreda and Kebele. In contrast, the variance components of owner and village level were <0.0001 . Therefore, we included in all models Kebele as random and Woreda as fixed effect.

Results

Prevalence of tuberculin positive cattle

Seventy-three villages in 24 Kebeles in the 4 Woredas were selected, of which a total of 2216 cattle from 780 cattle owners were tested for BTB. Ninety-nine percent of the tested animals were traditional zebu, 1% accounted for exotic Holstein breed and cross breeds (Holstein x zebu). The overall apparent individual animal prevalence of tuberculin reactors was 3.1% (95%CI: 2; 4.8) but varied significantly between the Woredas with the highest prevalence in Meskan Mareko and the lowest in Woldia (table 1). Forty-nine out of 73 tested village herds had at least 1 positive tuberculin reactor, giving an overall herd prevalence of 67%.

Descriptive epidemiology

Four hundred and fifty farmers were interviewed. Fifty-six owners (12.4%) had PPD positive cattle, and among these farmers 24% reported tuberculosis cases in their household. Cattle fodder consisted of 90% pasturing and crop residues after harvest. Fifty-four percent and 31% of the farmers vaccinated their cattle against blackleg and/or pasteurellosis and dewormed on a regular basis.

Livestock other than cattle were kept in mixed herding systems in 70% of the interviewed farms interviewed (31% goats, 45% sheep, 25% donkey, 9% horses and 2% camels). Sixty-two percent of the cattle herds grazed on communal pasture either full time or part time, 81% were watered at the river and 99% of the herds had year long close contact with other cattle herds during communal grazing and/or watering, veterinary campaigns, communal harvesting-ploughing and/or threshing. Overall, nearly half of the farmers (46%) kept cattle inside the living housing at night. Natural service for cow fertilization was used in 92% of the farms with 54% of the farmers using a bull from a neighboring farm for reproduction. Encounters between wildlife and cattle were overall rare (observed and reported by 19% of interviewees with the exception of the Bale mountains national park, where 59% of farmers stated that wildlife share common habitat with cattle.

Herding was mainly done by children (37%) or children and men combined (50%). Twelve percent of the herds were looked after by adult men, whereas women were rarely involved in herding (0.4%). Herds were not looked after at all in 0.7% of the interviewed households. In contrast, milking of cows was mainly carried out by women (45.5%) or adult men and women combined (44.5%). In 9.5% of the interviewed households adult men were milking cows. Children were rarely involved in milking tasks (0.5%). Eighty-one percent of the farmers did not boil the drinking milk and 74% ate raw meat. Farmer's knowledge of clinical signs of TB either in humans or in cattle was in general high (70%). However, we noticed during focus group discussions that farmers often did not know that the disease could be transmitted from cattle to humans.

Risk factors for positive PPD in cattle

We assessed 23 potential risk factors for BTB positivity in cattle. Variables with more than 10% missing values and variables, which are assumed to be redundant, were excluded from the analysis to ensure sufficient power and to avoid co-linearity in the multivariable model. In case of co-linearity, we included the biologically more plausible variable in the multivariable model. The significant variables resulting from the univariable analysis were purchase of cattle (OR: 1.7, CI OR: 1; 2.9, $p=0.04$) and the presence of other stock (OR: 2, CI OR: 1; 4, $p=0.05$) (table 2).

We excluded the variable "presence of sheep" for the multivariable model due to co-linearity with the variable "presence of other stock". We included following variables in the multivariable analysis according to the criteria mentioned above: presence of other stock, purchase of cattle, not dewormed cattle and communal grazing. All these variables showed a higher risk for having positive cattle reactor, although none of them were statistically significant (table 3).

Potential risk to people

Tuberculosis (confirmed clinical diagnosis, clinical signs of cervical lymphadenitis) was reported in 86 households (19%). At least 20% of the reported cases were EPTB (cervical lymphadenitis). None of the assessed 8 variables was statistically significant in the univariable model for having a TB case in a household (table 4).

Discussion

Our study reports a representative estimate of BTB prevalence in rural Ethiopia. The overall prevalence found in our study is consistent with the results found in some African countries. In Tanzania, Shirima et al. (2003) and Cleaveland et al. (2007) found individual cattle prevalence of 1.3% and 0.9%, respectively. We present apparent prevalence using a cut off for skin test reaction of 2 mm as suggested by Ameni et al (2008) who stated that maximum sensitivity can be achieved in central Ethiopia using a 2 mm cut off without affecting specificity. However, our prevalence is still low compared to previous results published from central Ethiopia, where prevalences between 7.9% and 11.6% were observed in local zebus, using a 4 mm cut-off (Ameni et al., 2003, Ameni et al., 2007). This suggests that BTB epidemiology in rural extensive systems very likely differs from peri-urban livestock-production systems (central Ethiopia) in the country. This could be explained by different husbandry practices and a higher number of cross breeds and exotic breeds (considered to be more susceptible to BTB) found in peri-urban settings. Bovine TB seems to be endemic and widespread in rural Ethiopia, with 67 % of the tested village-herds having at least one positive reactor. Regions located in higher altitude seem to have a lower prevalence (table 1), however, there was no statistical association in our study. Still, the role of altitude seems worth pursuing in further research, since it has been shown that human tuberculosis, altitude was negatively correlated with tuberculosis prevalences (Vargas et al., 2004, Saito et al., 2006). Although the situation in the sampled villages is favorable for BTB transmission between animals, such as very close contact throughout the year in poor ventilated houses, communal grazing/ploughing/threshing/watering, overcrowded pastures, only few animals per herd were found positive with an overall individual prevalence of 3%. This indicates a low transmission in the investigated livestock systems, which are characterized by small herd size, mostly communal grazing with some crop residue supplementation, if housing, then only at night but not during the day and cattle that are often kept together with small ruminants. In contrast to Cleaveland et al. (2007) and Ameni et al. (2003), herd size did not play a significant role as risk factor for tuberculin reactivity. This could be explained by the high proportion (81%) of small herds with less than 10 animals in our study, making a comparison of different herd size difficult.

There seem to be very little transmission during extensive communal grazing, even on crowded pasture. Similarly, Francis (1947) observed that if young stock grazes with heavily infected older stock, the infection rate would remain low until they are brought back into stabling. This could also indicate that among others, transmission might be maintained by a few cows shedding mycobacteria in their milk, early infection of young animals of which a low proportion become themselves infectious in later stage. Our result suggests that spread of disease may not necessarily be linked with the daily gathering of many animals from different herds at one site as often suggested in the literature and definitely needs further investigation, including also other ways of gathering such as watering of animals. We could not do a proper statistical analysis of the effect of different watering sources since only 3% of the animals were not watered at communal sources. Cattle that were not regularly dewormed were nearly twice at risk for being a reactor, but the result was not statistically significant (OR: 1.9, $p = 0.1$). However, this result suggests that high parasitic loads may decrease the animal resistance and make it more susceptible to BTB.

In our study, and in contrast of recent findings in Tanzania with similar settings (Cleaveland et al., 2007), keeping cattle inside at night, although increasing the risk for having reactors, was not statistically significant for BTB positivity in cattle (OR: 1.9, $p=0.2$), despite prevailing poor ventilation and very close animal contact. This could be explained by the low number of animals kept indoors. We did not investigate any direct environmental risk factors. However, recent studies in Tanzania (Cleaveland et al. 2007) and Uganda (Oloya et al., 2007) suggested that flooding may play an important role in disease transmission. Environmental source of infections should be more thoroughly investigated in future research since their importance in the epidemiology of BTB transmission remains elusive.

Animals older than 10 years were at higher risk of infection (OR:1.9), which is in line with findings by Cleaveland et al, (2007) from Tanzania. Phillips et al. (2002) also suggested that older animals were more susceptible for *M. bovis* infection. However, in our case, the result was not statistically significant ($p = 0.3$). This might have been due to the low number of old animals in our study (N= 35; 7%). These findings suggest nevertheless, that removing old animals from a herd and avoiding purchasing old animals from markets might help decreasing within herd prevalence and risk of introduction of

infectious animals, respectively. Purchase of animals were significantly associated with BTB positivity (OR: 1.7; $p = 0.046$), suggesting that the disease is likely to be spread regionally by animals movements.

Having other livestock than cattle in the herd increased the risk of positive tuberculin reaction in cattle (OR: 2 $p = 0.05$). Keeping sheep in the farm although not being statistical increased the risk of finding positive PPD cattle ($p = 0.07$; OR: 1.7). Nearly half the farmers having other stock than cattle, owned sheep, which are kept in mixed herding with cattle. Bovine TB in sheep is rare but has been nevertheless described in Europe (Malone et al., 2003) and Sudan (Tag el Din and Gamaan, 1982) and should be further investigated considering the large sheep population in Ethiopia.

Reported human tuberculosis in our study would comprise all forms of TB and no differentiation was made between *M. tuberculosis* and *M. bovis*. Considering the high percentage of extra pulmonary cervical lymphadenitis recorded (at least 20% of all reported TB cases in households), it is plausible that *M. bovis* might play a role. Farmer consumption habits (raw milk, raw meat) did not show any statistical significance, in the opposite of previous findings in Ethiopia (Ameni et al., 2003). In contrast to Regassa et al. (2007) and Ameni et al. (2007), we did not find any correlation between having PPD positive cattle and having a human case of TB in the household, even though people and cattle often shared the same house. However, statements on the zoonotic potential of BTB require confirmed *M. bovis* cases to address their risk factors specifically. Vice-versa, having confirmed TB cases in a household was not associated with cattle reactors (OR: 1.1; $p = 0.7$).

Such high household interview numbers (450) as conducted in our study have rarely been done in the past. However, considering the very low prevalence of the disease in the country, the power of the study should be further increased in future research. Because of the clustered distribution of livestock, random effects models are more appropriate and risk factor assessments are more conservative. Further studies on risk factors of BTB in humans require case-control studies with confirmed *M. bovis* infection. “Classical” risk factors have been investigated to a certain extend in small studies in the Ethiopian Highlands, showing sometimes diverging results. However, in order to embark in a

national BTB control program, thorough knowledge of possible risk factors is an essential prerequisite and should therefore also include risk factors associated with environment and milk, as well as the role of co-infection in cattle with diseases highly prevalent in some areas (e.g. trypanosomiasis, fasciolosis, Chronic Contagious BronchoPneumonia), nutritional challenges and the genetic role of different cattle breeds to BTB susceptibility. It appears that the epidemiology of BTB varies between different African countries but also between different regions in Ethiopia depending on livestock systems (extensive, intensive), breeds (local, exotic, cross-breed) but also ecological and geographic factors. Further research is needed to better understand BTB transmission in extensive livestock systems of Ethiopia as well as the true potential of zoonotic risk of transmission and finally to address the potential of control options.

Acknowledgments

We are very grateful to the Wellcome Trust (UK) for funding this study. We thank AHRI/ALERT (Addis Abeba) for the logistic support. We also thank Nesredin Hussein, Mohamed Sanni, Habtamu Tadelle, Tesfaye Erenso, Mesgebu Asmro, Bamlaku Tilahun and Alemayehu Kifle for their valuable help and support during field work.

References

- Ameni, G., Amenu, K., Tibbo, M., 2003. Bovine tuberculosis: prevalence and risk factor assessment in cattle and cattle owners in Wuchale-Jida district, Central Ethiopia. *The International Journal of Applied Research in Veterinary Medicine*. 1 (1), 1-13
- Ameni, G., Aseffa, A., Engers, H., Young, D., Gordon, S., Hewinson, G., Vordermeier, M., 2007. High prevalence and increased severity of pathology of bovine tuberculosis in Holsteins compared to zebu breeds under field cattle husbandry in Central Ethiopia. *Clin.Vaccine Immunol*. 14(10), 1356-1361
- Ameni G., Erkihun A., 2007. Bovine tuberculosis on small-scale dairy farms in Adama town, central Ethiopia, and farmer awareness of the disease. *Rev. sci.tech.Off.int.Epiz*. 26(3):711-719
- Ameni G., Hewinson G., Aseffa A., Young D., Vordermeier M., 2008. Appraisal of interpretation criteria for the comparative intradermal tuberculin test for the diagnosis of bovine tuberculosis in Central Ethiopia. *Clin.Vaccine Immunol*. 15(8):1272-1276
- Asseged, B., Woldeesenbet, Z., Yimer, E., Lemma, E., 2004. Evaluation of abattoir inspection for the diagnosis of *Mycobacterium bovis* infection in cattle at Addis Ababa abattoir. *Trop.Anim.Health Prod*. 36 (6), 537-546
- Ayele,W.Y., Neill, S.D., Zinsstag, J., Weiss,M.G., Pavlik,I., 2004. Bovine tuberculosis: an old disease but a new threat to Africa. *Int.J.Tuberc.Lung Dis*.8, 924-937.
- Bennett S., Woods T., Liyanage W.M., Smith D.L., 1991. A simplified general method for cluster-sample surveys of health in developing countries. *Rapp. trimest. statist. sanit. mond*. (44) 98-106
- Center for Disease Control (CDC): A global perspective on tuberculosis.
http://www.cdc.gov/tb/WorldTBDay/resources_global.htm
- Cleaveland, S., Shaw,D.J., Mfinanga,S.G., Shirima, G., Kazwala,R.R., Eblate,E; Sharp,M., 2007. *Mycobacterium bovis* in rural Tanzania: risk factors for infection in human and cattle populations. *Tuberculosis*. 87(1), 30-43
- Corbett, E.L., Watt, C.J., Walker, N., Maher, D., Williams, B.G., Raviglione, M.C., Dye, C. 2003. The Growing Burden of Tuberculosis- Global Trends and Interactions With the HIV Epidemic. *Arch Intern Med*.163:1009-1021
- Cosivi,O., Grange, J.M., Daborn,C.J., Raviglione,M.C., Fujikura,T., Cousins,D., Robinson,R.A., Huchzermeyer,H.F., de Kantor,I., Meslin,F.X., 1998. Zoonotic tuberculosis due to *Mycobacterium bovis* in developing countries. *Emerg.Infect.Dis*. 4(1), 59-70

De Lisle,G.W., Bengis,R.G., Schmitt,S.M., O'Brien, D.J., 2002. Tuberculosis in free-ranging wildlife: detection, diagnosis and management. *Rev.Sci.Tech.* 21(2), 317-334

Francis,J., 1947. Bovine tuberculosis including a contrast with human tuberculosis. London: Staples Press Ltd, p.220.

Grange,J.M., 2001. *Mycobacterium bovis* infection in human beings. *Tuberculosis.* 81(1-2), 71-77

Jha, V.C., Monta,Y., Dhakal,M., Besnet,B., Sato,T., Nagai,A., Kato,M., Kozawa,K., Yamamoto,S., Kimura,H., 2007. Isolation of *Mycobacterium* spp. In milking buffaloes and cattle in Nepal. *J.Vet.Med.Sci.* 69(8), 819-825

Kazwala,R.R., Kambarage,D.M., Daborn,C.J., Nyange,J., Jiwa,S.F., Sharp,J.M., 2001. Risk factors associated with the occurrence of bovine tuberculosis in cattle in the Southern Highlands of Tanzania. *Vet.Res.Comm.* 25(8), 609-614

Malone,F.E., Wilson,E.C., Pollock,J.M., Skuce,R.A., 2003. Investigations into an outbreak of tuberculosis in a flock of sheep in contact with tuberculous cattle. *J.Vet.Med.B Infect.Dis.Vet.Public Health.* 50(10), 500-504

Menzies,F.D., Neill,S.D., 2000. Cattle-to-cattle transmission of bovine tuberculosis. *Vet.J.* 160(2), 92-106

Mfinanga,S.G., Morkve,O., Kazwala,R.R., Cleaveland,S., Sharp,M.J., Kunda,J., Nilsen,R., 2004. Mycobacterial adenitis: role of *Mycobacterium bovis*, non-tuberculous mycobacteria, HIV infection, and risk factors in Arusha, Tanzania. *East Afr.Med.J.* 81(4), 171-178

Neill,S.D., O'Brien,J.J., Hanna,J., 1991. A mathematical model for *Mycobacterium bovis* excretion from tuberculous cattle. *Vet.Microbiol.* 28(1), 103-109

Neill,S.D., Skuce,R.A., Pollock,J.M., 2005. Tuberculosis-new light from an old window. *Journal of Applied Microbiology.* 98(6), 1261-1269

Oloya,J., Muma,J.B., Opuda-Asibo,J., Djonne,B., Kazwala,R., Skjerve,E., 2007. Risk factors for herd-level bovine seropositivity in transhumant cattle in Uganda. *Prev.Vet.Med.* 80(4), 318-329

O'Reilly,L.M., Daborn,C.J., 1995. The epidemiology of *Mycobacterium bovis* infections in animals and man, a review. *Tubercle and Lung Disease.* 76 (1), 1-16

Phillips C.J.C., Foster C.R.W., Morris P.A., Teverson R., 2002. Genetic and management factors that influence the susceptibility of cattle to *Mycobacterium bovis* infection. *Animal Health Research Reviews* 3(1):3-13

Phillips,C.J.C., Foster,C.R.W., Morris,P.A., Teverson,R., 2003. Review: the transmission of *Mycobacterium bovis* infection to cattle. *Research in Veterinary Science.* 74, 1-15

Pollock,J.M., Neill,S.D., 2002. *Mycobacterium bovis* infection and tuberculosis in cattle. Vet.J. 163(2), 115-127

Regassa,A., Medhin,G., Ameni,G., (In press). Bovine tuberculosis is more prevalent in cattle owned by farmers with active tuberculosis in central Ethiopia. Vet.J.

Saito,M., Pan,W.K., Gilman,R.H., Bautista,C.T., Bamrah,S., Martin,C.A., Tsiouris,S.J., Argüello,D.F., Martinez-Carrasco,G., 2006. Comparison of altitude effect on *Mycobacterium tuberculosis* infection between rural and urban communities in Peru. Am.J.Trop.Med.Hyg. 75(1), 49-54

Shirima,G.M., Kazwala,R.R.,Kambarage,D.M., 2003. Prevalence of bovine tuberculosis in cattle in different farming systems in the Eastern zone of Tanzania. Prev.Vet.Med. 57(3), 167-172

Tag el Din, M.H., el Nour Gamaan, I., 1982. Tuberculosis in sheep in the Sudan. Trop.Anim.Health Prod. 14(1), 26

Teklul, A., Asseged,B., Yimer,E., Gebeyehu,M., Woldesenbet,Z., 2004. Tuberculous lesions not detected by routine abattoir inspection: the experience of the Hossana municipal abattoir, Southern Ethiopia. Rev.Sci.Tech. 23(3), 957-964

Vargas, M.H., Furuya,M.E., Oérez-Guzman,C., 2004. Effect of altitude on the frequency of pulmonary tuberculosis. Int.J.Tuberc.Lung Dis. 8(11), 1321-4

Van Soolingen,D., de Haas,P.E., Haagsma,J., Eger,T., Hermans,P.W., Ritacco,V., Alito,A., van Embden,J.D., 1994. Use of various genetic markers in differentiation of *Mycobacterium bovis* strains from animals and humans and for studying epidemiology of bovine tuberculosis. J.Clin.Microbiol. 32(10), 2425-2433

Wedlock,D.N., Skinner,M.A., de Lisle,G.W., Buddle,B.M., 2002. Control of *Mycobacterium bovis* infections and the risk to human populations. Microbes and Infection. 4(4), 471-480

Table 1. PPD prevalence in cattle in the four different Woredas using a cut-off of 2 mm (calculated using a logistic regression model with a random effect on Kebele)

Woreda	Number Kebele	Altitude range (meter)	Number village	Number positive village*	Total tested animal	PPD positive reactors	Percentage of reactor animals (prevalence)	95%CI
Meskanena								
Mareko	5	1800-2170	21	20	590	47	7.9	5.8-10.5
Woldia	6	1460-3500	22	8	629	13	1.2	0.3-3.9
Bako Gazer	7	1330-1640	19	14	542	25	4.3	2.3-7.7
Bale Mountains	5	2120-3500	11	7	455	9	2.0	1.0-3.8
Total	23		73	49	2216	94	3.1	2.0-4.8

* A village is positive if it has at least 1 positive reactor

Table 2: Univariate analysis of risk factors for cattle tuberculin reactor using GLLAMM model with random effect on Kebele

Risk factor	Proportion %(Nb/Total)	OR	95% CI for OR	p-value	
Presence of other stock	70 (313/450)	2	1; 4	0.05	
Presence of sheep	45.3 (204/450)	1.7	1; 3	0.07	
Purchase of cattle	38 (172/450)	1.7	1; 2.9	0.04	
Communal grazing	62 (265/428)	1.5	0.9; 2.6	0.1	
Not dewormed cattle	24.3 (109/449)	1.8	0.9; 3.8	0.1	
Presence of old animals (> 10 yrs)	7 (35/450)	1.5	0.7; 3.3	0.3	
Cattle housing night	base: free-roaming				
	outside shed	11 (48/449)	1.4	0.6; 3.4	0.4
	indoor with people	46 (209/449)	1.9	0.7; 5.2	0.2
Herd size	base: <5 cattle				
	<10 cattle	39 (176/450)	1.5	0.8; 2.9	0.2
	>10 cattle	22 (99/450)	1.5	0.6; 3.2	0.3
Presence of donkeys	25 (112/450)	1.3	0.7; 2.3	0.4	
Presence of oxen	80 (357/450)	0.8	0.4; 1.7	0.6	
Presence of camels	2 (10/450)	1.7	0.2; 14.7	0.6	
Not vaccinated cattle	20.4 (92/450)	1.2	0.6; 2.5	0.6	

Risk factors of bovine tuberculosis in cattle

Contact with wildlife	19 (86/450)	0.9	0.4; 1.8	0.7
Not own bull for reproduction	54 (216/400)	1.1	0.6; 2.2	0.7
Human TB cases	19 (86/449)	1.1	0.6; 2	0.7
Presence of horses	9.3 (42/450)	1.3	0.4; 4.3	0.7
Presence of adult breeders (<10 yrs)	90.4 (407/450)	1.1	0.4; 2.9	0.8
Presence of calves (<1yr)	59.5 (268/450)	1	0.6; 1.8	0.9
Presence of juveniles (1-3 yrs)	61 (274/450)	1	0.5; 1.7	0.9
Presence of goats	31 (141/450)	1	0.6; 1.8	0.9

Table 3: Multivariable analysis of potential risk factors for positive cattle reactors using GLMM with Kebele as random effect

Variable	OR	95%CI OR	p-value
Purchase	1.5	0.9; 2.7	0.1
Deworming	1.8	0.8; 3.9	0.1
Communal grazing	1.3	0.7; 2.3	0.4
Other stock	1.7	0.8; 3.5	0.1

Table 4: Univariable analysis for risk factors for perceived TB cases in humans using GLMM with Kebele as random effect

Risk factor		Proportion %(Nb/Total)	OR	95% CI for OR	p-value
Cattle housing at night	base: free-roaming				
	outside shed	11 (48/449)	1.7	0.7; 3.9	0.4
	indoor with people	46 (209/449)	1	0.4; 2.6	0.2
Raw milk consumption		68.5 (307/448)	0.3	0.5; 1.8	0.7
Raw meat consumption		74.4 (334/449)	1.1	0.6; 2	0.6
Keeping other livestock		70 (313/449)	1	0.6; 1.8	0.8
Cattle herd size	base: <5 animals				0.2
	<10 animals	33.6 (151/449)	1.4	0.8; 2.5	
	<20 animals	13.6 (61/449)	1.5	0.7; 3.3	
	>20 animals	2.9 (13/449)	0.3	0.03; 2.8	
Number of cattle reactors	base: none				0.8
	1	11.5 (52/450)	1.2	0.6; 2.4	
	2	0.9 (4/450)	1.4	7.2; 14.9	
Shepherding	base: mixed shepherding				
	children	36.3 (94/259)	0.7	0.3; 1.7	0.4
	adult	13 (33/259)	1.7	0.6; 4.4	0.3
Continuous altitude					0.3



12. Bovine tuberculosis in Ethiopian wildlife

R. Tschopp,^{1,2,6} S. Berg,³ K. Argaw,⁴ E. Gadisa,² M. Habtamu,² E. Schelling,¹ D. Young,⁵
A. Aseffa,² and J. Zinsstag¹

¹ Swiss Tropical Institute, PO Box, CH-4002, Basel, Switzerland

² Armauer Hansen Research Institute (AHRI/ALERT), PO Box 1005, Addis Ababa, Ethiopia

³ TB research group, Veterinary Laboratories Agency, New Haw, Addlestone, Surrey KT15
3NB, United Kingdom

⁴ Ethiopian Wildlife Conservation Authority, Addis Ababa, Ethiopia

⁵ Department of Infectious Diseases and Microbiology, Imperial College, South Kensington
Campus London, SW7 2AZ, United Kingdom

⁶ Corresponding author (e-mail: rea.tschopp@unibas.ch)

Abstract

Bovine tuberculosis (BTB) is known to be endemic in Ethiopian cattle. However, the status of the disease in wildlife populations, that often share same habitat as livestock, is unknown. This study screened for bovine TB in wildlife in five regions in Ethiopia. Blood and tissue samples from 133 animals that belonged to 28 mammal species were collected from 2006 to 2008. We used a rapid serology test (RT), based on lateral flow technology, and performed culture of lymph node specimens inoculated on Lowenstein-Jensen and Middlebrook 7H11 media. Acid-fast colonies were further analyzed using molecular typing methods. Twenty out of eighty-seven serologically tested animals (23%) were positive for BTB using the RT, and acid-fast bacilli were cultured from 29 out of 89 animals (32.5%). None of the positive cultures yielded mycobacteria from the *Mycobacterium tuberculosis* complex while many environmental mycobacteria were isolated. Among the latter, *M. terrae* was the most common agent. In conclusion, this study highlighted the high prevalence of environmental mycobacteria in wildlife, which role is still unknown and suggested that flagship endemic rare species such as the Mountain Nyala and the Ethiopian wolf might be at risk for BTB. It also assessed the RT for field purpose in an attempt to validate this serology test.

Key words: Bovine tuberculosis, *Mycobacterium bovis*, Mycobacteria spp, Ethiopia, wildlife

INTRODUCTION

Bovine tuberculosis (BTB) is a multi-host disease caused by *Mycobacterium bovis*. This pathogen belongs to the *Mycobacterium tuberculosis* complex, a group of genetically closely related mycobacteria, which also includes the human pathogen *M. tuberculosis* (Brosch et al., 2002; Mostowy et al., 2005). Cattle are considered to be the main host for *M. bovis* and the disease has thus considerable economical impacts on the agricultural and trade sector (Zinsstag et al., 2006). BTB is a potential zoonotic threat to human beings who can get infected by consuming raw meat and milk products, derived from BTB positive cattle (Grange, 2001; Neill et al., 2005). Wildlife is also increasingly described as a source for BTB in humans in close contact with infected animals, such as hunters (in North America) and game farmers (Liss et al., 1994; Wei et al., 2004; Baker et al., 2006; Wilkins et al., 2008).

The list of wildlife species around the world in which *M. bovis* has been isolated is long and reports in the literature of new susceptible species have been increasing in recent years.

Some wildlife species have been known since a long time to be maintenance hosts. The classical examples are the brushtail possums (*Trichosurus vulpecula*) in New-Zealand (Coleman et al., 2006), the white-tailed deer (*Odocoileus virginianus*) in the United States (O'Brien et al., 2002), the Eurasian badger (*Meles meles*) in the UK and Ireland (Griffin et al., 2005), the African buffalo (*Syncerus caffer*) in South-Africa (de Vos et al., 2001; Rodwell et al., 2001), and described more recently, the wild boar (*Sus scrofa*) in Spain (Naranjo et al., 2008) and Wood bison (*Bison bison*) in Canada (Nishi et al., 2006). These wildlife species can maintain the disease in the absence of infected cattle. They are therefore a source of infection for livestock, thus hampering costly national control and eradication programs in developed countries. For instance, the incidence of BTB in the UK is increasing by 18% per year and the existing of an uncontrolled BTB wildlife reservoir is a strong contributing factor to this rising figure. Control of the disease in livestock cost the British government as much as 74 million GBP per year (Mathews et al., 2006).

These maintenance species are also a source of infection for other wildlife species sharing same ecosystems, thus having the potential to threaten the status of valuable or

endangered species. This has been shown recently in the Krueger National Park where lions preyed on BTB infected buffaloes, which lead to a severe mortality in the park's lion population (Keet et al., 2000; De Vos et al., 2001). Wildlife species other than maintenance species are known as spill-over hosts or dead-end host. They cannot sustain the disease in the absence of an infectious source. However, their role in the complex epidemiology of BTB is unknown as more and more species are detected with BTB, and new interactions and new maintenance hosts are described (Renwick et al., 2007).

In Sub-Saharan Africa, most detailed data on BTB in wildlife has been collected in Southern Africa (Bengis et al., 1996; Keet et al., 2001; Michel et al., 2006; Michel et al., 2009), Kenya (Tarara et al., 1985; Sapolsky and Else 1987), Uganda (Woodford, 1982) and Tanzania (Cleaveland et al., 2005).

To this date, no data has been collected from Ethiopian wildlife. Ethiopia is a country known for its rich bio-diversity and various ecosystems and is home to two-hundred-fifty-five different mammals, of which thirty-one are endemic and thirty-eight are listed in the International Union for Conservation of Nature- Red List of Threatened species (IUCN, 2008). However, the rapid intensification of the human-livestock-wildlife interface in Ethiopia, which is mainly fuelled by the rapid population growth, massive land degradation and recurrent draught, is a potential risk of disease transmission at the interface.

This study was done in close collaboration with the Ethiopian Wildlife Conservation Authority, which approved and supported the research. The study aimed primarily at screening wildlife species from different parts of Ethiopia for BTB by means of serology, strain isolation by culture and molecular typing, in order to assess disease prevalence in wildlife and survey which animal species and ecosystems are affected. The second aim of the study was to assess a rapid serological test to attempt to validate it for field purpose.

MATERIALS AND METHODS

Study sites

The study was carried out in the following five regions in Ethiopia: Welega (Oromia), Awash (Afar), Babilie (Harari), Bale Mountains (Oromia), and South Omo (SNNPR) (Fig 1), between the latitudes of 5°-11.5° N and the longitudes of 35°-43° E, thus

covering different ecological zones, with altitudes ranging between 400 m and 3800 m above sea level. The majority of the samples were collected in hunting controlled areas (74%), followed by the Bale Mountains National Park (19.5%) and the Babilie elephant sanctuary (6.5%).

Sample collection

All wildlife samples of this study were collected between 2006 and 2008. Animal tissues were obtained from two sources, including harvests from licensed hunters and opportunistically from fresh carcasses (e.g. road kill). No animals were killed for the purpose of the study.

Animals were examined and body condition assessed. Mediastinal, mesenteric and submandibular lymph nodes were collected from the animals, as well as suspect tuberculous lesions from any organ, if present, and tonsils from carnivores. All sample specimens were collected using disposable sterile surgical instruments (forceps, scalpel blades – a different set for each animal) and then kept in universal tubes containing sterile phosphate buffer saline (pH 7.2).

Blood was collected either from fresh carcasses (animals killed by licensed hunters, road kills) or from anaesthetized live animals (captured/anaesthetized and released in the frame of other projects for other purposes). In the case of live animals, blood was drawn by veno-puncture (choice of vein and syringe/needle size was species dependent). In the case of a carcass, veno-puncture was often not feasible due to the rapid clotting of blood. Blood was drawn after opening the carcass, either by heart puncture or by severing a big vessel (e.g. vena cava) and collecting the blood directly in a sterile collecting tube. Blood tubes were stored upright for 6-12 hours; sera were then pipetted from the tubes and transferred into 1 ml cryo-tubes.

All tissue and serum samples were kept at 4°C from the collection sites and during transport to the AHRI laboratory in Addis Abeba, where they were stored at -20°C until further processing.

Sample analysis

Serology for specific antibody detection was performed using the rapid test (RT) developed by Chembio Diagnostic Systems, Inc., which is a colored latex-based lateral

flow technology using a cocktail of selected *M. bovis* antigens including ESAT-6, CFP10, and MPB83 (Lyashenko et al., 2008). Results were read 20 minutes after adding the rapid test buffer solution to the serum. Animals were considered positive if any visible line appeared in the test area of the RT in addition to the control line. Results were negative if no band was visible in the test area in addition to the visible control band.

Submandibular and mediastinal lymph nodes were pooled together, whereas mesenteric lymph nodes were processed and cultured separately. After homogenization and neutralization according to standard methods (Roberts and Koneman, 1991), sediments were inoculated on three different media slants: Lowenstein-Jensen media supplemented with glycerol or pyruvate, and Middlebrook 7H11 medium supplemented as previously described (Gallagher and Horwill, 1977). The slants were incubated horizontally at 37°C for one week then vertically for an additional five weeks. Cultures were considered negative if no visible growth was seen after six weeks of incubation. Positive culture were stained according to the Ziehl-Neelsen method and examined under the microscope for detection of Acid-Fast Bacilli (AFB).

Molecular typing

Heat killed AFB positive samples were investigated by multiplex PCR, including primers specific for the *Mycobacterium* genus and the *M. tuberculosis* complex (Wilton and Cousins, 1992). Strains were investigated for the *M. tuberculosis* complex by PCR using protocols for RD4 typing (Gordon et al., 1999) and RD9 typing (Berg et al., 2009). Isolates that did not belong to the *M. tuberculosis* complex but tested positive for the genus were sequenced over the 16S rRNA locus (Han et al., 2002). Analysis of the sequences was performed by BLAST search (Altschul et al., 1997) of databases at NCBI and RIDOM (<http://rdna.ridom.de>)(Harmsen et al., 2002); particularly, the sequences of the variable Region A and Region B (Kirschner et al., 1993) were considered when determining the *Mycobacterium* species.

Data analysis

Data were double entered in an Access database and validated using Epi Info (version 3.3.2). All statistical descriptive analysis was done using software package STATA 10.1

(StataCorp, Texas, USA). Molecular typing results of the isolated strains were used as basis for estimating disease prevalence in wildlife.

RESULTS

Samples from a total of a hundred-thirty-three animals belonging to twenty-eight different mammal species were investigated during the study. The majority were male (n=116; 87%) and adult animals (n=128; 96%). Body condition was good in a hundred-twenty-four animals (93%), whereas eight animals (6%) were found to be thin and one (1%) was emaciated.

Serology

The rapid test (RT) was performed on serum collected from eighty-seven animals (thirteen live animals and seventy-four fresh carcasses). Results of the species involved are shown in table 1. Twenty of these animals (23%), belonging to ten different species, were sero-positive on RT. The lymph nodes of forty-seven of these animals were further processed and cultured (see below).

Clinical examination and gross visible lesions

Out of a hundred-thirty-three animals sampled, six showed various clinical signs: one Grant's gazelle was lame due to an old injury and five animals (Gerenuk, warthog, Grant's gazelle and Hartebeest) had enlarged head lymph nodes. Upon carcass examination, gross visible nodules varying between pea-size to 5 cm diameter were seen in five animals. Nodules in the lung were seen in Menelik bushbuck and Hartebeest. Multiple nodules were observed on the liver in a warthog and on the mesenteries in a Grant's gazelle.

Culturing and molecular typing

Lymph nodes from eighty-nine animals (67%) were subjected to culture. Forty slants representing twenty-nine animals (32.5%) showed colony growth. AFB positive samples were further analyzed by *Mycobacterium* genus and deletion typing (Table 1). None of the samples were characterized as belonging to the *M. tuberculosis* complex. However, seventeen strains were identified as non-tuberculous mycobacteria (NTM) with *M. terrae*

complex being the most prevalent agent (N = 19; 65.5%) followed by non tuberculous mycobacteria strains other than *M.terrae* complex and MAC (N = 9; 31%). Strains from the *Mycobacterium avium* complex (MAC) were isolated from two Grants' gazelles, and one isolate from a gerenuk (*Litocranius walleri*) was typed as *Nocardia* spp. The above mentioned species showing nodules on post-mortem examination were all culture negative. Among the forty-seven animals that were examined with serology and tissue culture, fifteen were AFB positive and sixteen were serology positive. However, only five of these animals were positive with both serology and culture.

DISCUSSION

This study provides the first piece of information on tuberculosis in Ethiopian free-ranging wildlife.

In this study, no *M. bovis* was isolated from wildlife; in contrast to the neighboring East African countries where the pathogen was reported in buffaloes in Uganda (Woodford, 1982) and in baboons in Kenya (Tarara et al., 1985; Sapolsky and Else, 1987). Recent studies in Tanzania also showed that BTB was prevalent in the Serengeti-Ngorongoro ecosystem, affecting buffaloes, lions and wildebeest (Cleaveland et al., 2005).

Wildlife habitats in Ethiopia are not fenced. This allows an intensive interaction between a fast growing human population, its livestock and wildlife competing over scarce grazing land. Livestock are also grazed in various protected habitats especially during times of fodder shortage (Stephens et al., 2001; Jacobs and Schloeder, 2001). In our study areas, wildlife remained geographically localized with no major migration patterns.

Bovine TB is endemic in the Ethiopian cattle population with prevalence ranging between 0.8% and 13.5 % in the rural areas (Ameni et al., 2007; Tschopp et al., 2009; Berg et al., 2009). Wildlife, and in particular herbivores sharing same pastures as cattle, might therefore be at risk for BTB transmission.

The “classical” African species described in the literature as being reservoirs for BTB such as buffaloes in the Republic of South Africa (RSA), Uganda and Tanzania (Woodford, 1982, Cleaveland et al., 2005, Michel et al., 2007), or potential reservoirs

such as kudu (Bengis et al., 2001), exist in large numbers in our study sites. *M. bovis* was not isolated from any of these species suggesting that they may not be major reservoirs for the disease in Ethiopia. However, a definitive conclusion is difficult to be drawn due to the small number of animals examined in this study.

The concern regarding potential disease transmission from livestock to some high profile species such as the Mountain Nyala (*Tragelaphus buxtoni*) and the Ethiopian wolves (*Canis simensis*) is high. Both species are listed in the IUCN Red List of endangered species and often share same habitat as humans and their livestock. Furthermore, Mountain Nyalas belong to the Tragelaphus family, like the kudu, which was shown to be a susceptible and potential maintenance species for BTB (Bengis et al., 2001; Keet et al., 2001). In our study, forty percent (2/5) of the Mountain Nyalas were sero-positive on the rapid test. However, only a very few number of animals were tested and further surveillance is warranted. Twenty rat species from the Web Valley (Bale Mountains national Park) were examined for BTB and one grass rat (*Arvicanthis blicki*) was sero-positive; unfortunately no strain isolation by culturing was performed because of logistic constraint (e.g. remoteness, cold chain availability) to confirm the serological finding. But this result is however worrisome from a conservation point of view, since Ethiopian wolves mainly prey on afro-alpine rodents (Sillero-Zubiri and Gottelli, 1995). Various rodents have been shown to host BTB in the UK (Delahay et al., 2007; Matthews et al, 2006). Furthermore, as seen in the Krueger National Park (RSA), carnivores might be at high risk for contracting BTB if the disease is present in their preys (Michel et al., 2006).

In a country such as Ethiopia, characterized by often small wildlife populations, a high number of endemic rare species, and remoteness and/or inaccessibility of wildlife areas, the rapid test would be a valuable and important tool to screen live animals in a practical, easy and cheap way that is not constraint by difficult logistics seen during the collection of animal lymph nodes. However, the sensitivity of serology tests is in general poor (Cleaveland et al., 2005). Lyashenko et al (2008) found an overall sensitivity of the RT of 77%, which increased to 97% in deer. However, their study only included four species: deer, wild boar, possum and badger. The test was so far not used for most African species. We initially aimed in our study at validating the rapid test kit for the wildlife

species; unfortunately the number of animals sampled was too little to get conclusive results. Lyashenko et al (2008) found that sensitivity increases manifold with the presence of gross lesions. In our study, very few “tuberculosis-like” gross lesions were observed in the lymph nodes of tested animals, which could also partly explain the low sensitivity of the RT. The performance of the test seems also to vary depending on the species tested. We used the RT in twenty-two different species and nine species reacted positive to the test. Twenty of the tested animals (23%) were reactive on the rapid serology test. The highest positive rates were found in Guenther’s Dik-Diks (33%), Lesser Kudus (60%), Bushbucks (25%), Buffaloes (33%) and Mountain Nyalas (40%). Two out of eight elephants tested (25%) were RT positive, which is worrying since the test has been validated for this species (Lyashenko et al., 2006). However, no elephants were post-mortem examined in this study. BTB has been shown to be an increasing problem in domestic elephants in the Indian subcontinent (Sreekumar et al., 2007). In Ethiopia, only a small population of elephant remains in the wild, and it can not be ruled out that BTB is not prevalent in this endangered population.

Large numbers of atypical mycobacteria were isolated by culture. It is possible that some of these isolates have given rise to cross-reaction with the antigens contained in the RT, thus generating false positive results, which could explain the high prevalence of BTB sero-positivity. However, experimental infection with *M. paratuberculosis*, *M. avium* and other non-tuberculous mycobacteria carried out in the study by Lyashenko et al (2008) did not show any reaction in the rapid test, thus suggesting that our positive serology results may be consistent with infection of species from the *M. tuberculosis* complex. No strains of the *M. tuberculosis* complex were isolated from any of the samples that were processed for culture. Unfortunately, only forty-seven of the samples that underwent serology were matched with the gold standard method of culturing. It is therefore possible that some serologically positive animals, for which no culture was done, were indeed positive for BTB. Furthermore, we may have failed to detect some infected animals, which could have been in the early stage of infection with no visible lesions or if lesions were present in tissues that were not examined. This could explain the high serology positivity while cultures were negative. Serology was performed on a large number of species but only on a few animals per species. Sensitivity and specificity of the RT for a particular species could therefore not be evaluated. More sensitive and

specific tests are needed to screen African wildlife and future research on test validation should probably focus on possible maintenance species or highly endangered species for the Ethiopian context.

The isolation of seventeen different strains of non-tuberculous mycobacteria (NTM) is a major result of this study. *M. terrae* was one of the most frequently isolated species in this current study. It was also isolated in wildlife in Tanzania (Cleaveland et al., 2005) and in RSA (Michel et al., 2007). These reports suggest that *M. terrae* may be a ubiquitous NTN across Africa. In the opposite of other NTM strains that may be more region-specific: in South Africa, reports show the presence in wildlife of *M. vaccae* and *M. engbaeckii* (Michel et al., 2007) and *M. goodii* (Van Helden et al., 2008); while in Tanzania, *M. phlei* and MAC were the NTM isolated besides *M.terrae* (Cleaveland et al., 2005). None of these NTM-with the exception of *M.vaccae* were isolated in our study. While in the published reports mentioned above, only a few numbers of NTMs were isolated in wildlife, a wide range of different strains of NTM were isolated in our study. Some of these NTMs have been described in captive wildlife before, such as *M.asiaticum* in a red-handed tamarin (*Saguinus midas*) (Siegal-Willott et al., 2006), and *M.gordonae* and MAC in captive pumas (*Felis concolor*) (Traversa et al., 2009). In our study, *M.asiaticum* was isolated in free-ranging Grants gazelle (*Nanger granti*). This NTM is also known to be a human lung pathogen (Taylor et al., 1990). In Tanzania and Ethiopia, *M.terrae* was shown to be a pathogen, associated with granulomatous lesions in cattle and in humans (Kazwala et al 2002-cited in Cleaveland et al., 2005; Berg et al., 2009). Most of the atypical mycobacteria in our study were isolated from the mesenteric lymph nodes suggesting environmental exposure via fodder or water. However, they were also isolated from lungs in half of the animals (N=16), suggesting a possible direct animal-to-animal aerosol transmission, possibly associated with species behavior. To this date, it is unclear what the transmission pathway of NTMs is between domestic livestock, humans and wildlife.

In conclusion, this is the first study that investigated the prevalence of tuberculosis in Ethiopian wildlife and the results suggest that BTB may not be endemic. However, the current study can not rule out that BTB does not occur in wildlife in Ethiopia since the

serology test, despite possible false positive results suggested that BTB may be prevalent in wildlife. The study therefore highlights at this stage the need for complementary testing diagnostics, especially if tissue culture as gold standard cannot be performed (e.g. on live animals). It also highlights the need for further research to increase sensitivity and specificity of serological tests and to validate such a rapid test for individual African wildlife species.

The high number of non-tuberculous mycobacteria found in the tissue samples needs further investigation regarding their pathogenicity, their role and possible interaction with the pathogenic *M. bovis* and their effect on the animal's immune system.

ACKNOWLEDGMENTS

The study was funded by the Wellcome Trust (UK) as part of the Animal Health in The Developing World initiative. We are grateful to AHRI/ALERT (Addis Ababa) and Rift Valley Safaris for the logistic support and Borna Müller for valuable laboratory work. Special thanks to Jason Roussos for the collection of wildlife samples in the field. Many thanks to Yirmed Demeke (Wildlife for Sustainable Development) for sharing elephant samples and to the Ethiopian Wolf Conservation Organization (EWCO), especially James Malcom and Daryn Knobel for sharing Ethiopian wolf samples. We also thank Konstantin Lyashenko (Chembio Diagnostics) for donating the rapid serology tests. A special thank to Alessandro Lancia for his valuable help in Addis Ababa.

LITERATURE CITED

- Ameni, G., A. Aseffa, H. Engers, D. Young, S. Gordon, G. Hewinson, and M. Vordermeier. 2007. High prevalence and increased severity of pathology of bovine tuberculosis in Holsteins compared to zebu breeds under field cattle husbandry in Central Ethiopia. *Clinical and Vaccine Immunology* 14: 1356-1361.
- Altschul, S. F., T.L. Madden, A.A. Schaffer, J. Zhang, Z. Zhang, W. Miller, and D.J. Lipman. 1997. Gapped BLAST and PSI-BLAST: a new generation of protein database search programs. *Nucleic Acids Research* 25: 3389-3402.
- Baker, M.G., L.D. Lopez, M.C. Cannon, G.W. De Lisle, and D.M. Collins. 2006. Continuing *Mycobacterium bovis* transmission from animals to humans in New-Zealand. *Epidemiology and Infection* 134: 1068-73.
- Bengis, R.G., N.P. Kriek, D.F. Keet, J.P. Raath, V. De Vos, and H.F. Huchzermeyer. 1996. An outbreak of bovine tuberculosis in a free-living African buffalo (*Syncerus caffer-sparrman*) population in the Kruger National Park: a preliminary report. *Onderstepoort Journal of Veterinary Research* 63: 15-18.
- Bengis, R.G., D.F. Keet, A.L. Michel, and N.P. Kriek. 2001. Tuberculosis caused by *Mycobacterium bovis*, in a kudu (*Tragelaphus streliceros*) from a commercial game farm in the Malelane area of the Mpumalanga Province, South Africa. *Onderstepoort Journal of Veterinary Research* 68: 239-41.
- Berg, S., R. Firdessa, M. Habtamu, E. Gadissa, A. Mengistu, L. Yamuah, G. Ameni, M. Vordermeier, B.D. Robertson, N.H. Smith, H. Engers, D. Young, R.G. Hewinson, A. Aseffa, and S.V. Gordon. 2009. The Burden of Mycobacterial Disease in Ethiopian Cattle: Implications for Public Health. *PLoS ONE*: 4: e5068
- Brosch, R., S.V. Gordon, M. Marmiesse, P. Brodin, C. Buchrieser, K. Eiglmeier, T. Garnier, C. Gutierrez, G. Hewinson, K. Kremer, L.M. Parsons, A.S. Pym, S. Samper, D. Van Soolingen, and S.T. Cole. 2002. A new evolutionary scenario for the *Mycobacterium tuberculosis* complex. *Proceedings of the National Academy of Sciences* 99: 3684-3689.
- Cleaveland, S., T. Mlengeya, R.R. Kazwala, A. Michel, M.T. Kaare, S.L. Jones, E. Eblate, G.M. Shirima, and C. Packer. 2005. Tuberculosis in Tanzanian wildlife. *Journal of Wildlife Diseases* 41: 446-453.
- Coleman, J.D., and M.M. Cooke. 2001. *Mycobacterium bovis* infection in wildlife in New Zealand. *Tuberculosis (edinb.)* 81: 191-202.
- Delahay, R.J., G.C. Smith, A.M. Barlow, N. Walker, A. Harris, R.S. Clifton-Hadley, and C.L. Cheeseman. 2007. Bovine tuberculosis infection in wild mammals in the South-

West region of England: a survey of prevalence and a semi-quantitative assessment of the relative risks to cattle. *Veterinary Journal* 173: 287-301.

De Vos, V., R.G. Bengis, N.P. Kriek, A. Michel, D.F. Keet, J.P. Raath, and H.F. Huchzermeyer. 2001. The epidemiology of tuberculosis in free-ranging African buffalo (*Syncerus caffer*) in the Kruger National Park, South Africa. *Onderstepoort Journal of Veterinary Research* 68: 119-30.

Gallagher, J., and D.M. Horwill. 1977. A selective oleic acid albumin agar medium for the cultivation of *Mycobacterium bovis*. *The Journal of Hygiene* 79: 155-160.

Gordon, S. V., R. Brosch, A. Billault, T. Garnier, K. Eiglmeier, and S.T. Cole. 1999. Identification of variable regions in the genomes of tubercle bacilli using bacterial artificial chromosome arrays. *Molecular Microbiology* 32: 643-655.

Grange, J.M. 2001. *Mycobacterium bovis* infection in human beings. *Tuberculosis (edinb.)* 81: 71-7.

Griffin, J.M., D.H. Williams, G.E. Kelly, T.A. Clegg, I. O'Boyle, J.D. Collins, and S.J. Morea. 2005. The impact of badger removal on the control of tuberculosis in cattle herds in Ireland. *Preventive Veterinary Medicine* 67: 237-266.

Han, X.Y., A.S. Pham, J.J. Tarrand, P.K. Sood, and R. Luthra. 2002. Rapid and accurate identification of mycobacteria by sequencing hypervariable regions of the 16S ribosomal RNA gene. *American Journal of Clinical Pathology* 118: 796-801.

Harmsen, D., J. Rothganger, M. Frosch, and J. Albert. 2002. RIDOM: Ribosomal Differentiation of Medical Micro-organisms Database. *Nucleic Acids Research* 30: 416-417.

IUCN Red List 2008: <http://www.iucnredlist.org>

Jacobs, M.J., and C.A. Schloeder. 2001. Impacts of conflict on biodiversity and protected areas in Ethiopia. World Wildlife Fund, Inc., Washington, D.C.: Biodiversity Support Program

Keet, D.F., N.P. Kriek, R.G. Bengis, D.G. Grobler, and A. Michel. 2000. The rise and fall of tuberculosis in a free-ranging chacma baboon troop in the Krueger National Park. *Onderstepoort Journal of Veterinary Research* 67: 115-22.

Keet, D.F., N.P. Kriek, R.G. Bengis, and A.L. Michel. 2001. Tuberculosis in kudu (*Tragelaphus strepsiceros*) in the Krueger National Park. *Onderstepoort Journal of Veterinary Research* 68: 225-30.

Kirschner, P., B. Springer, U. Vogel, A. Meier, A. Wrede, M. Kiekenbeck, F.C. Bange, and E.C. Bottger. 1993. Genotypic identification of mycobacteria by nucleic acid

sequence determination: report of a 2-year experience in a clinical laboratory. *Journal of Clinical Microbiology* 31: 2882-2889.

Liss, G.M., L. Wong, D.C. Kittle, A. Simor, M. Naus, P. Martiquet, and C.R. Misener. 1994. Occupational exposure to *Mycobacterium bovis* infection in deer and elk in Ontario. *Canadian Journal of Public Health* 85: 326-9.

Lyashchenko, K.P., R. Greenwald, J. Esfandiari, J.H. Olsen, R. Ball, G. Dumonceaux, F. Dunker, C. Buckley, M. Richard, S. Murray, J.B. Payeur, P. Andersen, J.M. Pollock, S. Mikota, M. Miller, D. Sofranko, and W.R. Waters. 2006. Tuberculosis in Elephants: Antibody Responses to Defined Antigens of *Mycobacterium tuberculosis*, Potential for Early Diagnosis, and Monitoring of Treatment. *Clinical and Vaccine Immunology* 13: 722-732.

Lyashchenko, K.P., R. Greenwald, J. Esfandiari, M.A. Chambers, J. Vicente, C. Gortazar, N. Santos, M. Correia-Neves, B.M. Buddle, R. Jackson, D.J. O'Brien, S. Schmitt, M.V. Palmer, R.J. Delahay, and W.R. Waters. 2008. Animal-side serologic assay for rapid detection of *Mycobacterium bovis* infection in multiple species of free-ranging wildlife. *Veterinary Microbiology* 132: 283-92.

Matthews, F., D.W. MacDonald, G.M. Taylor, M. Gelling, R.A. Norman, P.E. Honess, R. Foster, C.M. Gower, S. Varley, A. Harris, S. Palmer, G. Hewinson, and J.P. Webster. 2006. Bovine tuberculosis (*Mycobacterium bovis*) in British farmland wildlife: the importance to agriculture. *Proceedings Biological Sciences* 273: 357-65.

Michel, A.L., R.G. Bengis, D.F. Keet, M. Hofmeyr, L.M. De Klerk, P.C. Cross, A.E. Jolles, D. Cooper, I.J. Whyte, P. Buss, and J. Godfroid. 2006. Wildlife tuberculosis in South African conservation areas: implications and challenges. *Veterinary Microbiology* 112: 91-100.

Michel, A.L., L.M. De Klerk, N.C.G. Van Pittius, R.M. Warren, and P.D. Van Helden. 2007. Bovine tuberculosis in African buffaloes: observations regarding *Mycobacterium bovis* shedding into water and exposure to environmental mycobacteria. *BMC Veterinary Research* 3: 23.

Michel, A.L., M.L. Coetzee, D.F. Keet, L. Mare, R. Warren, D. Cooper, R.G. Bengis, K. Kremer, and P. Van Helden. 2009. Molecular epidemiology of *Mycobacterium bovis* isolates from free-ranging wildlife in South African game reserves. *Veterinary Microbiology* 133: 335-43.

Mostowy, S., J. Inwald, S. Gordon, C. Martin, R. Warren, K. Kremer, D. Cousins, and M.A. Behr. 2005. Revisiting the Evolution of *Mycobacterium bovis*. *Journal of Bacteriology* 187: 6386- 6395.

Naranjo, V., C. Gortazar, J. Vicente, and J. De La Fuente. 2008. Evidence of the role of European wild boar as a reservoir of *Mycobacterium tuberculosis* complex: a review *Veterinary Microbiology* 127: 1-9.

- Neill, S.D., R.A. Skuce, and J.M. Pollock. 2005. Tuberculosis-new light from an old window. *Journal of Applied Microbiology* 98: 1261-1269.
- Nishi, J.S., T. Shury, and B.T. Elkin. 2006. Wildlife reservoirs for bovine tuberculosis (*Mycobacterium bovis*) in Canada: strategies for management and research. *Veterinary microbiology* 112: 325-338.
- O'Brien, D.J., S.M. Schmitt, J.S. Fierke, S.A. Hogle, S.R. Winterstein, T.M. Cooley, W.E. Moritz, K.L. Diegel, S.D. Fitzgerald, D.E. Berry, and J.B. Kaneene. 2002. Epidemiology of *Mycobacterium bovis* in free-ranging white-tailed deer, Michigan, USA, 1995–2000. *Preventive Veterinary Medicine* 54: 47–63.
- Renwick, A.R., P.C.L. White, and R.G. Bengis. 2007. Bovine tuberculosis in southern African wildlife: a multi-species host-pathogen system. A review. *Epidemiology and Infection* 135: 529-540.
- Roberts, G. D., E.W. Koneman, and Y.K. Kim. 1991. *Mycobacterium*. In *Manual of Clinical Microbiology*, A. Balow (ed.), Washington D. C. pp. 304-339.
- Rodwell, T.C., N.P. Kriek, R.G. Bengis, I.J. Whyte, P.C. Viljoen, V. De Vos, and W.M. Boyce. 2001. Prevalence of bovine tuberculosis in African buffalo at Krueger National Park. *Journal of Wildlife Diseases* 37: 258–264.
- Sapolsky, R.M., and J.G. Else. 1987. Bovine tuberculosis in a wild baboon population: epidemiological aspects. *Journal of Medical Primatology* 16: 229-35.
- Siegal-Willot., J., R. Isaza, C. Fiorello, and M. Reinhard. 2006. *Mycobacterium asiaticum* infection in a red-handed tamarin (*Saguinus midas*). *Journal of Zoo and Wildlife Medicine* 37: 413- 415.
- Sillero-Zubiri C., and D. Gottelli. 1995. Diet and feeding behavior of Ethiopian wolves (*Canis simensis*). *Journal of Mammalogy* 76: 531-541.
- Sreekumar, E., M.B.V. Janki, D.S. Arathy, R. Hariharan, C. Avinash Premraj, and T.J. Rasool. 2007. Molecular characterization and expression of Interferon-g of Asian elephant (*Elephas maximus*). *Veterinary Immunology and Immunopathology* 118: 75–83.
- Stephens, P.A., C.A. D'Sa, C. Sillero-Zubiri, and N. Leader-Williams. 2001. Impact of livestock and settlement on the large mammalian wildlife of Bale Mountains National Park, southern Ethiopia. *Biological Conservation* 100: 307-322.
- Tarara, R., M.A. Suleman, R. Sapolsky, M.J. Wabomba, and J.G. Else. 1985. Tuberculosis in wild olive baboons, *Papio cynocephalus anubis* (Lesson), in Kenya. *Journal of Wildlife Diseases* 21: 137-40.
- Taylor, L.Q., A.J. Williams, and S. Santiago. 1990. Pulmonary disease caused by *Mycobacterium asiaticum*. *Tubercle* 71: 303-305.

Traversa, M.J., I. Etchechoury, M.C. Jorge, D.M. Schettino, A. Bernadelli, M. Zumarraga, F. Paolicchi, A. Cataldi, and S. Canal. 2009. Mycobacterial isolation from *Felis concolor* in captivity. *Brazilian Journal of Veterinary Research and Animal Science* 46: 25-31.

Tschopp, R., E. Schelling, J. Hattendorf, A. Aseffa, and J. Zinsstag. 2009. Risk factors of bovine tuberculosis in cattle in rural livestock production systems of Ethiopia. *Preventive Veterinary Medicine*, 89: 205-211.

Van Helden, P.D., N.C.G. Van Pittius, R.M. Warren, A. Michel, T. Hlohwe, D. Morar, J. Godfroid, E.C. du Plessis, and R. Bengis. 2008. Pulmonary infection due to *Mycobacterium goodii* in a spotted hyena (*Crocuta crocuta*) from South Africa. *Journal of Wildlife Diseases* 44: 151-154.

Wei, C.Y., Y.H. Hsu, W.J. Chou, C.P. Lee, and W.L. Tsao. 2004. Molecular and histopathologic evidence for systemic infection by *Mycobacterium bovis* in a patient with tuberculous enteritis, peritonitis, and meningitis: a case report. *The Kaohsiung Journal of Medical Sciences* 20: 302-7.

Wilkins, M.J., J. Meyerson, P.C. Bartlett, S.L. Spieldenner, D.E. Berry, L.B. Mosher, J.B. Kaneene, B. Robinson-Dunn, M.G. Stobierski, and M.L. Boulton. 2008; Human *Mycobacterium bovis* Infection and Bovine Tuberculosis Outbreak, Michigan, 1994–2007. *Emerging Infectious Diseases* 14: 657-660.

Wilton, S., and D. Cousins. 1992. Detection and identification of multiple mycobacterial pathogens by DNA amplification in a single tube. *PCR Methods and Applications* 1: 269-273.

Woodford, M.H. 1982. Tuberculosis in wildlife in the Ruwenzori National Park Uganda (part I). *Tropical Animal Health Production* 14: 81-8.

Woodford, M.H. 1982. Tuberculosis in wildlife in the Ruwenzori National Park Uganda (part II). *Tropical Animal Health Production* 14: 155-160.

Zinsstag, J., E. Schelling, F. ROTH, and R. Kazwala. 2006. Economics of bovine tuberculosis. In: *Mycobacterium bovis* infection in animals and humans, C.O. Thoen, J.H. Steele and M.J. Gilsdorf (eds). Blackwell Publishing, USA. Pp: 68-84

Fig 1: Map illustrating the sites where wildlife samples were collected (black circles). Hatched areas represent protected wildlife habitat, black lines represent rivers and filled grey areas represent lakes.

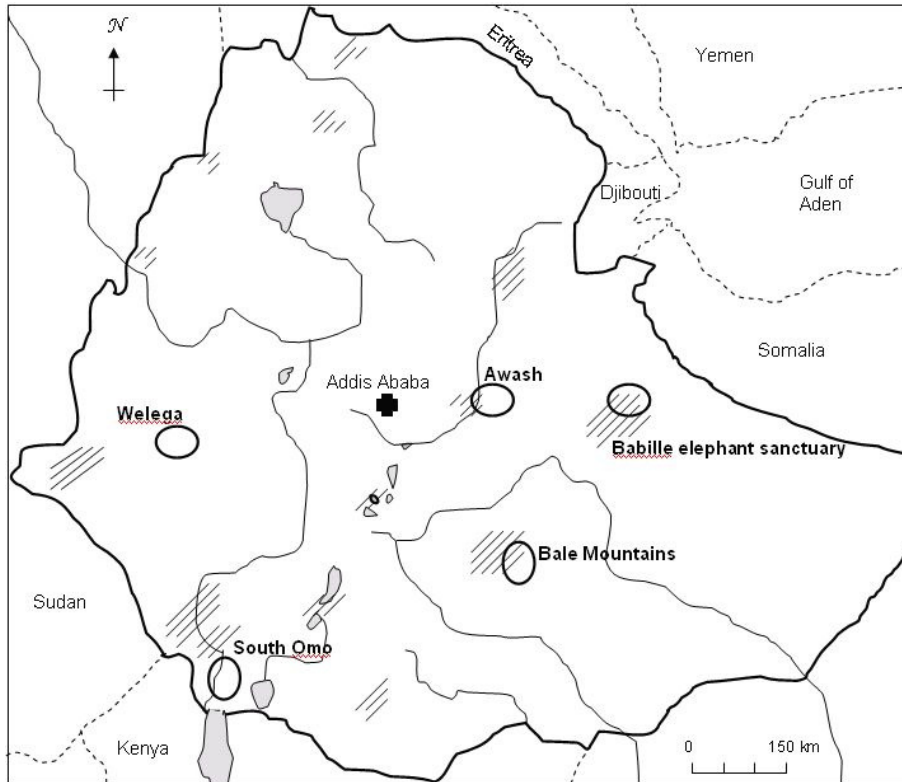


Table 1: Mycobacteria in wildlife in Ethiopia: results of serological, cultural and molecular typing investigations for bovine tuberculosis and other mycobacteria, 2006-2008

Species	Total number of animals examined	Positive serology	AFB + cultures	Molecular typing (16S rDNA gene sequencing)
Bushbuck (<i>Tragelaphus scriptus</i>)	11	1/4 (25%)	2/10 (20%)	MTC*
Soemmering gazelle (<i>Gazella soemmeringi berberana</i>)	1	0/1 (0%)	0/1 (0%)	
Guenther's dik-dik (<i>Madoqua guntheri</i>)	8	1/3 (33%)	3/8 (37%)	MTC, <i>M.moriokaense</i>
Grant's gazelle (<i>Nanger granti</i>)	17	2/12 (17%)	10/17 (59%)	MTC, <i>M.wollinsky</i> , MAC**, <i>M.asiaticum</i> , <i>M.moriokaense</i>
Gerenuk (<i>Litocranius walleri</i>)	5	0/4 (0%)	3/5 (60%)	MTC, <i>Nocardia testacea</i>
Greater kudu (<i>Tragelaphus strepsiceros</i>)	1	NA	0/1 (0%)	
Lesser kudu (<i>Tragelaphus imberbis</i>)	7	3/5 (60%)	3/7 (43%)	MTC, <i>M.flavescens spp</i>
Tiang (<i>Damaliscus lunatus</i>)	4	0/3 (0%)	2/4 (50%)	MTC
Hartebeest (<i>Alcelaphus buselaphus</i>)	4	0/3 (0%)	1/2 (50%)	MTC
Mountain nyala (<i>Tragelaphus buxtoni</i>)	11	2/5 (40%)	1/9 (11%)	<i>M.vaccae</i> , <i>M.vanbaalenii</i>
Buffalo (<i>Syncerus caffer</i>)	5	1/3 (33%)	1/3 (33%)	<i>M.gordonae</i>
Bohor reedbuck (<i>Redunca redunca</i>)	3	0/1 (0%)	1/2 (50%)	<i>M.vaccae</i> , <i>M.vanbaalenii</i>
Waterbuck (<i>Kobus ellipsiprymnus</i>)	2	1/2 (50%)	0/2 (0%)	
Bush duiker (<i>Sylvicapra grimmia</i>)	1	NA	0/1 (0%)	
Warthog (<i>Phacochoerus africanus</i>)	6	0/2 (0%)	0/6 (0%)	
Bushpig (<i>Potamochoerus larvatus</i>)	1	NA	0/1 (0%)	
Giant forest hog (<i>Hylochoerus meinertzhageni</i>)	2	0/2 (0%)	0/2 (0%)	
Elephant (<i>Loxodonta africana</i>)	8	2/8 (25%)	NA	
Rock hyrax (<i>Procavia capensis</i>)	1	0/1 (0%)	0/1 (0%)	
Hippopotamus (<i>Hippopotamus amphibius</i>)	1	0/1 (0%)	0/1 (0%)	
Ethiopian wolf (<i>Canis simensis</i>)	5	0/5 (0%)	NA	
Serval cat (<i>Leptailurus serval</i>)	1	NA	1/1 (100%)	MTC, <i>M.gilvum</i>
Leopard (<i>Panthera pardus</i>)	3	0/1 (0%)	0/2 (0%)	
Black-backed jackal (<i>Canis mesomelas</i>)	1	0/1 (0%)	1/1 (100%)	MTC
Anubis baboon (<i>Papio anubis</i>)	3	NA	0/3 (0%)	
Black-clawed brush-furred rat (<i>Lophuromys melanonyx</i>)	14	0/14 (0%)	NA	
Blick's grass rat (<i>Arvicanthis blicki</i>)	7	1/7 (14%)	NA	
Total	133	20/87 (23%)	29/89 (32.5%)	

MTC*: *Mycobacterium terrae* complex (include: *M.priferiae*, *M.confluentis*, *M.brasiliensis*, *M.senuensis*, *M.terrae*, *M.kumamotoense*, *M.arupense*)

MAC**: *Mycobacterium avium* complex



13. L'interface faune sauvage – élevage – homme de la tuberculose bovine en Afrique

Jakob Zinsstag, Rea Tschopp, Esther Schelling

Institut Tropical Suisse, Boîte Postale, CH-4002 Bâle, Suisse

Book chapter
in
« Ecologie de la santé et Conservation »
Editors : F. Thomas and M. Gauthier-Clerc

Submitted

Importance du complexe *tuberculosis*

Le complexe *tuberculosis* est composé de plusieurs espèces de mycobactéries, dont *Mycobacterium tuberculosis*, l'agent principal de la tuberculose humaine, *M. africanum*, *M. microti*, *M. canetti* et *M. bovis*. Les bovins sont l'hôte principal de *M. bovis*, mais un grand nombre d'autres ruminants et d'autres animaux, notamment de la faune sauvage sont atteints (Ayele et al., 2004). La tuberculose (TB) est responsable de 9.2 millions de nouveaux cas et 1.7 millions de décès en 2006. Plus de 95% des cas de tuberculose sont détectés dans les pays en voie de développement, dont un tiers en Afrique (WHO, 2008). La tuberculose reste la plus importante cause de mortalité chez les personnes infectées par le VIH (Virus de l'immunodéficience humaine), et est responsable de 32% des décès de patients infectés par ce virus en Afrique (Guleria et al., 1996). Environ deux millions des nouveaux cas de tuberculose surviennent chaque année en Afrique sub-saharienne, et nous ne connaissons toujours pas suffisamment le rôle que joue *Mycobacterium bovis*, membre du complexe *tuberculosis* dans l'épidémie de la tuberculose.

La tuberculose bovine causée par *M. bovis* est avant tout une maladie pulmonaire des bovins (figure 1) mais peut se localiser aussi dans d'autres organes, notamment les ganglions mammaires. Elle se transmet par voie aérogène et par le lait à d'autres animaux et à l'homme. Elle est donc une zoonose importante aux plans santé publique et socio-économique car elle peut affecter le commerce international du bétail et des produits animaux. La tuberculose bovine a déjà été observée au début du 20^{ième} siècle en Afrique, indiquant par exemple une prévalence individuelle faible de 1 à 2% en zones rurales et une prévalence entre 10-40% dans les élevages intensifs autour des grandes villes (von Ostertag and Kulenkampff, 1941). La question de la provenance de la tuberculose bovine soit par introduction pendant la période coloniale et/ou sa présence autochtone reste un débat ouvert et fait l'objet d'études d'épidémiologie moléculaire (Cousins et al., 2004b; Muller et al., 2008; Njanpop-Lafourcade et al., 2001). Aujourd'hui, la tuberculose bovine est rapportée dans au moins 33 des 43 pays Africains (Ayele et al., 2004) (Figure 2), mais elle est probablement plus répandue. Vu l'importance soupçonnée de *M. bovis* pour la santé publique, l'Organisation Mondiale de la Santé (OMS) a organisé une réunion en 1993 et en 2005 afin de faire le point sur les connaissances acquises de la transmission animal-homme. Entre-temps plusieurs revues de littérature ont donné une image assez complète de l'épidémiologie de la tuberculose bovine, mais démontrent un important manque de

connaissances de la situation épidémiologique de toutes les espèces concernées (Ayele et al., 2004; Cosivi et al., 1995; Daborn et al., 1996; Zinsstag et al., 2006). Ce chapitre fait état des connaissances de la tuberculose bovine dans l'élevage, en santé publique et dans la faune sauvage ainsi qu'à leurs interfaces.

Elevage

Comme mentionné plus haut, la tuberculose bovine a déjà été détectée en Afrique dans l'élevage bovin au début du 20^{ième} siècle (von Ostertag and Kulenkampff, 1941). Poulton, cité par (von Ostertag and Kulenkampff, 1941) rapportait en 1935 des différences importantes de prévalence entre les races « Longhorn » (34%) et Zébu (2.4%) en Ouganda. Les isolements de mycobactéries d'origine animale faites par Gidel (Gidel et al., 1969) au Burkina Faso sont parmi les premières faites en Afrique. Des essais de vaccination au B.C.G. (Bacille Calmette Guérin) du bétail bovin ont été effectués au Malawi sans succès (Ellwood and Waddington, 1972), mais des nouveaux essais sont prévus en Ethiopie (Hewinson communication personnelle, 2008). *M. bovis* a été détectée dans les eaux usées de l'abattoir de Yaoundé au Cameroun (Wekhe and Berepubo, 1989). La tuberculose a été décrite au Burundi (Rigouts et al., 1996) et dans la zone du lac Victoria en Tanzanie (Jiwa et al., 1997). Des mycobactéries ont été isolés du lait cru de bovins tenus par des éleveurs pastoraux dans les haut plateaux du sud de la Tanzanie (Kazwala et al., 1998). De même au Burkina Faso, des mycobactéries ont été isolés en proportion importante des échantillons de lait (Vekemans M. et al., 1999). Par contre, presque aucun signe de la tuberculose bovine n'a été trouvé dans des études représentatives au Sénégal, en Guinée Conakry, Guinée Bissau et en Gambie (Unger et al., 2003). Les différentes races bovines et les différents systèmes d'élevage influencent fortement la prévalence de *M. bovis* en Ethiopie (Ameni et al., 2006). La tuberculose bovine est fortement présente dans la production laitière périurbaine au Kenya mais les éleveurs ne connaissent pas de mesures pour se protéger (Kang'ethe et al., 2007).

Dans les dernières années les nouveaux outils moléculaires utilisés pour la caractérisation de la tuberculose bovine ont permis de faire de grands progrès dans une meilleure compréhension de l'épidémiologie moléculaire en Afrique (Hilty et al., 2005). Il s'avère donc que par exemple les souches isolées au Nord du Cameroun, Nigeria et au Tchad sont assez homogènes (Cadmus et al., 2006; Diguimbaye-Djaibe et al., 2006a; Njanpop-Lafourcade et al., 2001), ce qui indique à la

fois une transmission intense et une expansion clonale du bacille dans le bétail bovin. Un grand nombre de mycobactéries ne faisant pas partie du complexe *tuberculosis* a été rapporté au Tchad mais leur rôle et interaction potentielle avec la tuberculose bovine n'est pas connu (Diguimbaye-Djaibe et al., 2006b). Les outils moléculaires sont particulièrement importants pour différencier rapidement *M. bovis* de *M. tuberculosis* et pour obtenir des empreintes des souches de mycobactéries. Ainsi, en Tanzanie, des souches similaires de *M. bovis* ont été trouvés aussi bien chez l'homme que chez les bovins (Kazwala et al., 2006). Les auteurs recommandent d'harmoniser les approches de lutte contre la tuberculose entre le secteur de santé publique et de santé animale. Le programme national de lutte contre la tuberculose en Tanzanie, premier pays en Afrique, a adopté cette proposition de collaboration étroite entre les secteurs de santé publique et santé animale. La Tanzanie est le premier pays africain à avoir adopté, dans le cadre du programme national de lutte contre la tuberculose, cette approche d'étroite collaboration entre les secteurs de santé publique et santé animale. La première caractérisation moléculaire de *M. bovis* au Mali fait état de deux groupes de souches (Figure 3), dont l'un (I) est comparable aux souches isolées en Afrique Centrale et l'autre est propre au Mali (II) (Muller et al., 2008). Des observations de *M. bovis* chez le dromadaire ont été faites en Mauritanie et au Tchad (Chartier et al., 1991). Sa présence chez les petits ruminants est encore très mal connue.

En conclusion, la tuberculose bovine est largement présente dans l'élevage bovin africain, mais à des taux très variés selon la race et le système d'élevage existant. La lutte actuelle contre la tuberculose bovine se limite, avec quelques exceptions, qu'à l'inspection de viande dans les abattoirs. Bien que contaminée, une bonne partie du lait est consommée sans pasteurisation. A long terme, une lutte ciblée visant à l'élimination de la tuberculose bovine et à la pasteurisation systématique du lait sera nécessaire en Afrique, afin d'assurer un élevage plus intensif caractérisé par une meilleure production laitière qui puisse répondre à la demande croissante de la population en viande et en produits laitiers (Ayele et al., 2004).

Santé Publique

Des mycobactéries autres que *M. tuberculosis* ont été rapportés à Kinshasa (Congo) (Pattyn et al., 1967). Au Niger, parmi plus de 150 souches isolées du complexe *tuberculosis*, aucune n'était *M. bovis* (Rey et al., 1982). Enfin, à Lagos au Nigeria 4% des souches isolées du complexe *tuberculosis* étaient *M. bovis* et 11% des mycobactéries

atypiques (Idigbe et al., 1986). Des études au Malawi démontrent que des zones de tuberculose bovine ne correspondent pas forcément à une forte prévalence chez l'homme. Cependant il semble que la transmission animal-homme serait importante chez des communautés pastorales (Mposhy et al., 1983). La tuberculose bovine chez l'homme semble être absente à Djibouti (Auregan et al., 1988) et présente à faible échelle en Guinée Bissau (Hoffner et al., 1993) ainsi qu'au Burundi (Rigouts et al., 1996). Une analyse rétrospective des registres de la tuberculose à Bobo Dioulasso (Burkina Faso) indique une corrélation entre la prévalence de la tuberculose et l'exposition au bétail bovin. Le groupe ethnique des Peuls, éleveurs traditionnels, souffraient plus souvent de la tuberculose que les autres groupes ethniques (Vekemans M. et al., 1999). *M. bovis* a été identifié dans des cultures positives de tuberculoses pulmonaires et extrapulmonaires en Tanzanie (Kazwala et al., 2001). Enfin, au Madagascar, 1.25% des patients ayant un crachat positif en microscopie souffraient d'une infection à *M. bovis* (Rasolofo-Razanamparany et al., 1999). Considérant l'association du VIH avec le risque accru d'une tuberculose ouverte, cette association pourrait aussi s'appliquer à *M. bovis*, cependant la plupart des pays manquent la capacité de différencier *M. bovis* des autres agents du complexe tuberculosis (Daborn et al., 1996). La tuberculose a été reconnue comme un problème majeur des éleveurs nomades et de leur bétail au Tchad (Diguimbaye, 2004; Diguimbaye-Djaibe et al., 2006a), cependant dans les premières études, aucune souche à *M. bovis* n'a été détectée chez l'homme (Diguimbaye et al., 2006). D'autres rapports de transmission du bétail à l'homme existent pour l'Ouganda (Oloya et al., 2007) et le Ghana (Addo et al., 2007).

En conclusion, la tuberculose bovine est bien présente chez l'homme et la présence du virus du VIH semble favoriser sa transmission. Vu l'étendu de sa présence chez le bétail et le manque d'infrastructure permettant la pasteurisation du lait, la présence relativement faible de la tuberculose bovine chez l'homme est surprenante parce qu'en Europe, la tuberculose bovine a été répandue chez l'homme avant l'introduction de la pasteurisation du lait à grande échelle. Nous constatons de fortes variations entre pays, avec certains pays ayant une forte prévalence dans l'élevage, mais pratiquement aucun cas décrit chez l'homme dans les pays Sahéliens. Par contre dans les pays subhumides et côtiers, la tuberculose bovine chez l'homme semble être plus accentuée. D'autres conclusions seraient prématurées car les études existantes sont très différentes les unes des autres. Une comparaison approfondie nécessite d'abord un protocole de diagnostic de terrain standardisé, l'établissement de la capacité de diagnostic par culture des

différentes espèces du complexe *tuberculosis* et ensuite une approche concertée d'études ciblées aux personnes à risque dans plusieurs pays.

Faune sauvage

Bien que les bovins sont l'hôte de maintenance principal, *M. bovis* a été isolé dans plusieurs espèces de la faune sauvage, dont le phalanger renard (*Trichosurus vulpecula*) et le daim (*Dama dama*) en Nouvelle Zélande, le blaireau (*Meles meles*) en Angleterre, le bison (*Bison bison*) et le cerf élaphe (*Cervus elaphus*) et le cerf de Virginie (*Odocoileus virginianus*) aux Etats Unis sont également des hôtes de maintenance (Cousins et al., 2004b). En Afrique, *M. bovis* a été trouvé dans le cobe de Lechwe (*Kobus leche*) (Clancey, 1977) et dans le phacochère (*Phacoceros aethiopicus*) dans le parc national du Ruwenzori (Woodford, 1982). Tarara et coll. (Tarara et al., 1985) rapportent *M. bovis* chez le babouin olive (*Papio anubis*) dans la réserve faunique du Masai Mara. En étudiant *M. bovis* dans des babouins au Kenya, Sapolsky et Else (Sapolsky and Else, 1987) ont conclu que l'origine de l'infection provenait de déchets d'abattoirs des villages voisins dont se nourrissaient les babouins. *M. bovis* a été isolé pour la première fois dans le buffle d'Afrique (*Syncerus caffer*) en Afrique du Sud dans le Parc National Krüger (Bengis et al., 1996) et peu de temps après la tuberculose bovine a été détectée dans le guépard (*Acinonyx jubatus*), le lion (*Panthera leo*) et le cynocéphale de Chacma (*Papio ursinus*) dans la même réserve faunique (Keet et al., 1996). Il est supposé que les bovins proches du Parc National Krüger transmettaient la tuberculose bovine à des buffles d'Afrique qui par la suite la transmettaient aux grands carnivores. Des lésions granulomateuses dans les poumons étaient présents chez tous les animaux de la chaîne de transmission. L'établissement permanent de la tuberculose bovine et son augmentation rapide dans la faune sauvage sud-africaine sont très sérieuses car la maladie peut se transmettre parmi les différentes espèces de la faune par transmission directe et ceci tout au long de la chaîne alimentaire. De plus elle pose un danger de par son potentiel de transmission dans d'autres pays. Ceci a été démontré par la détection de la maladie dans la faune sauvage d'un ranch de gibier en Zambie (Zieger et al., 1998). Une étude en Zambie indique un risque de transmission de la faune sauvage au bétail (Munyeme 2008). En l'occurrence les projets transfrontaliers dans le cadre des « Peace Parks » des parcs de la paix, sont menacés par la transmission de la tuberculose bovine par la faune sauvage (Kriek, 2006).

Les premiers rapports de la tuberculose bovine dans la faune sauvage des réserves fauniques du Nord de la Tanzanie ont décrit la maladie entre autres dans le Gnou bleu (*Connochaetes taurinus*) et le topi (*Damaliscus lunatus*) (Cleaveland et al., 2005). Dans la même étude des anticorps contre *M. bovis* ont été trouvés dans 4% des lions et 6% des buffles d'Afrique à Tarangire. Dans des zones où la faune sauvage est infectée par la tuberculose bovine, la recherche scientifique doit viser à caractériser la pathogénicité de la tuberculose bovine pour chaque espèce, ainsi que les mécanismes et taux de transmission entre les différents espèces, afin de pouvoir développer des modèles multi-hôtes pour mieux comprendre son évolution et dispersion (Renwick et al., 2007). Cependant cela s'étend aussi à l'élevage et à l'homme. Des meilleures connaissances épidémiologiques nécessitent donc des approches conjointes de la santé humaine et animale, ainsi que de l'écosystème « une santé unique », afin de connaître l'importance globale de la circulation du bacille (Figure 3) (Zinsstag et al., 2005).

Interfaces faune sauvage – bétail - homme

La faune sauvage et le bétail bovin, se rencontrent et pâturent ensemble de manière régulière surtout dans les alentours de réserves naturelles en Afrique qui ne sont pas pour la plupart clôturées. En ce moment nous avons la preuve d'une transmission de la tuberculose bovine du bétail bovin au buffle d'Afrique et au cobe de Lechwe au sud de l'Afrique. En revanche, la faune sauvage infectée représente un risque croissant de dispersion de la maladie à travers des frontières nationales mais aussi une transmission possible au bétail surtout autour des points d'eau. L'homme peut acquérir la maladie avec le bétail bovin à des taux très variables et ceci aussi bien par voie aérogène qu'alimentaire. Apparemment la localisation pulmonaire chez l'homme est plus courante dans les zones humides que semi-arides. De manière globale, la lutte contre la tuberculose bovine en Afrique doit viser d'abord les bovins et contenir en même temps la maladie dans les réserves de faune agissant comme potentiel réservoir (Cousins et al., 2004a) Des études approfondies et participatives sur les contacts sociaux, routes de transhumance et marchandes, ainsi qu'une analyse moléculaire de pointe sont nécessaires pour identifier les déterminantes de transmission dans un contexte spécifique, ce qui permettra de développer de stratégies de lutte adaptés au contexte environnemental, social et politique (Zinsstag, 2007).

Remerciements

Notre engagement pour la recherche sur la tuberculose bovine n'aurait pas été possible sans le concours d'un grand nombre de personnes. Nous remercions particulièrement Colette Diguimbaye-Djaibe, Bongo Naré Ngandolo Richard, Markus Hilty, Borna Müller, Steve Gordon, Glyn Hewinson, Stefan Berg, Abraham Assefa, Rudovick Kazwala, Bassirou Bonfoh, Franca Baggi, Gaby Pfyffer, Erik Böttger et Marcel Tanner. Ce travail a été appuyé financièrement par le Fonds National Suisse de Recherches Scientifiques, le Pôle de recherches nord-sud (NCCR North-South) et le Wellcome Trust.

Bibliographie

Addo,K, K Owusu-Darko, D Yeboah-Manu, P Caulley, M Minamikawa, F Bonsu, C Leinhardt, P Akpedonu, D Ofori-Adjei, 2007, Mycobacterial species causing pulmonary tuberculosis at the korle bu teaching hospital, accra, ghana: Ghana.Med.J., v. 41, p. 52-57.

Ameni,G, A Aseffa, H Engers, D Young, G Hewinson, M Vordermeier, 2006, Cattle husbandry in ethiopia is a predominant factor affecting the pathology of bovine tuberculosis and gamma interferon responses to mycobacterial antigens: Clin.Vaccine Immunol., v. 13, p. 1030-1036.

Ayele,WY, S D Neill, J Zinsstag, M G Weiss, I Pavlik, 2004, Bovine tuberculosis: an old disease but a new threat to Africa
33: Int.J Tuberc.Lung Dis., v. 8, p. 924-937.

Bengis,RG, N P Kriek, D F Keet, J P Raath, V de, V, H F Huchzermeyer, 1996, An outbreak of bovine tuberculosis in a free-living African buffalo (*Syncerus caffer--sparrman*) population in the Kruger National Park: a preliminary report: The Onderstepoort journal of veterinary research, v. 63, p. 15-18.

Cadmus,S, S Palmer, M Okker, J Dale, K Gover, N Smith, K Jahans, R G Hewinson, S V Gordon, 2006, Molecular analysis of human and bovine tubercle bacilli from a local setting in Nigeria: J.Clin.Microbiol., v. 44, p. 29-34.

Chartier,F, C Chartier, M F Thorel, F Crespeau. Un nouveau cas de tuberculose pulmonaire à *Mycobacterium bovis* chez le dromadaire (*Camelus dromedarius*) en Mauritanie. Revue Elev.Méd.vét.Pays trop. 1[44], 43-47. 1991.
Ref Type: Newspaper

Clancey,JK, 1977, The incidence of tuberculosis in Lechwe (marsh antelope): Tubercle., v. 58, p. 151-156.

Cleaveland,S, T Mlengeya, R R Kazwala, A Michel, M T Kaare, S L Jones, E Eblate, G M Shirima, C Packer, 2005, Tuberculosis in Tanzanian wildlife: J.Wildl.Dis, v. 41, p. 446-453.

Cosivi,O, F X Meslin, C J Daborn, J M Grange, 1995, Epidemiology of *Mycobacterium bovis* infection in animals and humans, with particular reference to Africa: Rev.Sci.Tech., v. 14, p. 733-746.

Cousins,D, H Huchzermeyer, J F T Griffin, G Brückner, I B J van Rensburg, N P Kriek, 2004a, Tuberculosis, in JAW Coetzer and RC Tustin (eds), Infectious Diseases of Livestock: Oxford, UK, Oxford University Press, p. 1973-1993.

Cousins,D, H Huchzermeyer, J F T Griffin, G Brückner, I B J van Rensburg, N P Kriek, 2004b, Tuberculosis, in JAW Coetzer and RC Tustin (eds), Infectious Diseases of Livestock: Oxford, UK, Oxford University Press, p. 1973-1993.

Daborn,CJ, J M Grange, R R Kazwala, 1996, The bovine tuberculosis cycle--an African perspective: Soc.Appl.Bacteriol.Symp.Ser., v. 25, p. 27S-32S.

Diguimbaye,C. La tuberculose humaine et animale au Tchad: Contribution à la mise en évidence et caractérisation des agents causaux et leur implication en santé publique. 1-68. 2004. Philosophisch-Naturwissenschaftlichen Fakultät der Universität Basel.
Ref Type: Thesis/Dissertation

Diguimbaye,C, M Hilty, R Ngandolo, H H Mahamat, G E Pfyffer, F Baggi, M Tanner, E Schelling, J Zinsstag, 2006, Molecular characterization and drug resistance testing of Mycobacterium tuberculosis isolates from Chad: J.Clin.Microbiol., v. 44, p. 1575-1577.

Diguimbaye-Djaibe,C, M Hilty, R Ngandolo, H H Mahamat, G E Pfyffer, F Baggi, G Hewinson, M Tanner, J Zinsstag, E Schelling, 2006a, Mycobacterium bovis isolates from tuberculous lesions in Chadian zebu carcasses: Emerg.Infect Dis, v. 12, p. 769-771.

Diguimbaye-Djaibe,C, V Vincent, E Schelling, M Hilty, R Ngandolo, H H Mahamat, G Pfyffer, F Baggi, M Tanner, J Zinsstag, 2006b, Species identification of non-tuberculous mycobacteria from humans and cattle of Chad: Schweiz.Arch.Tierheilkd., v. 148, p. 251-256.

Ellwood,DC, F G Waddington, 1972, A second experiment to challenge the resistance to tuberculosis in B.C.G. vaccinated cattle in Malawi: Br.Vet.J., v. 128, p. 619-626.

Gidel,R, J P Albert, M Lefevre, M Menard, M Retif, 1969, [Mycobacteria of animal origin isolated by the Muraz Center from 1965 to 1968: technics of isolation and identification; results]: Rev.Elev.Med.Vet.Pays Trop., v. 22, p. 495-508.

Guleria,I, R Teitelbaum, R A McAdam, G Kalpana, W R Jacobs, Jr., B R Bloom, 1996, Auxotrophic vaccines for tuberculosis: Nat.Med., v. 2, p. 334-337.

Hilty,M, C Diguimbaye, E Schelling, F Baggi, M Tanner, J Zinsstag, 2005, Evaluation of the discriminatory power of variable number tandem repeat (VNTR) typing of Mycobacterium bovis strains: Vet.Microbiol..

Jiwa,SF, R R Kazwala, A A Aboud, W J Kalaye, 1997, Bovine tuberculosis in the Lake Victoria zone of Tanzania and its possible consequences for human health in the HIV/AIDS era: Vet.Res.Comm., v. 21, p. 533-539.

Kang'ethe,EK, C E Ekuttan, V N Kimani, 2007, Investigation of the prevalence of bovine tuberculosis and risk factors for human infection with bovine tuberculosis among dairy and non-

dairy farming neighbour households in Dagoretti Division, Nairobi, Kenya: *East afr.med.j.*, v. 84, p. S92-S95.

Kazwala,RR, C J Daborn, L J Kusiluka, S F Jiwa, J M Sharp, D M Kambarage, 1998, Isolation of *Mycobacterium* species from raw milk of pastoral cattle of the Southern Highlands of Tanzania: *Trop.Anim Health Prod.*, v. 30, p. 233-239.

Kazwala,RR, C J Daborn, J M Sharp, D M Kambarage, S F Jiwa, N A Mbembati, 2001, Isolation of *Mycobacterium bovis* from human cases of cervical adenitis in Tanzania: a cause for concern?: *Int.J.Tuberc.Lung Dis.*, v. 5, p. 87-91.

Kazwala,RR, L J M Kusiluka, K Sinclair, J M Sharp, C J Daborn, 2006, The molecular epidemiology of *Mycobacterium bovis* infections in Tanzania: *Veterinary Microbiology 4th International Conference on Mycobacterium bovis*, v. 112, p. 201-210.

Keet,DF, N P Kriek, M L Penrith, A Michel, H Huchzermeyer, 1996, Tuberculosis in buffaloes (*Syncerus caffer*) in the Kruger National Park: spread of the disease to other species: *The Onderstepoort journal of veterinary research*, v. 63, p. 239-244.

Kriek,NP, 2006, Bovine tuberculosis program in South Africa: The impact of *M. bovis*-infected wild species, in CO Thoen, JH Steele, and Gilsdorf M.J. (eds), *Mycobacterium bovis* infection in animals and humans: Ames, Iowa, USA, Blackwell, p. 238-243.

Muller,B, B Steiner, B Bonfoh, A Fane, N H Smith, J Zinsstag, 2008, Molecular characterisation of *Mycobacterium bovis* isolated from cattle slaughtered at the Bamako abattoir in Mali: *BMC.Vet.Res.*, v. 4, p. 26.

Njanpop-Lafourcade,BM, J Inwald, A Ostyn, B Durand, S Hughes, M F Thorel, G Hewinson, N Haddad, 2001, Molecular typing of *Mycobacterium bovis* isolates from Cameroon: *J.Clin.Microbiol.*, v. 39, p. 222-227.

Oloya,J, J Opuda-asibo, R Kazwala, A B Demelash, E Skjerve, A Lund, T B Johansen, B Djonne. *Mycobacteria causing human cervical lymphadenitis in pastoral communities in the Karamoja region of Uganda. Epidemiol.Infect* , 1-8. 2007. Cambridge University Press.
Ref Type: Newspaper

Renwick,AR, P C White, R G Bengis, 2007, Bovine tuberculosis in southern African wildlife: a multi-species host-pathogen system.: *Epidemiology and Infection*, v. 135, p. 529-540.

Rigouts,L, B Maregeya, H Traore, J P Collart, K Fissette, F Portaels, 1996, Use of DNA restriction fragment typing in the differentiation of *Mycobacterium tuberculosis* complex isolates from animals and humans in Burundi: *Tuber.Lung Dis.*, v. 77, p. 264-268.

Sapolsky,RM, J G Else. Bovine tuberculosis in a wild baboon population: epidemiological aspects. *J.Med.Primatol.* 16[4], 229-235. 1987.
Ref Type: Abstract

Tarara,R, M A Suleman, R Sapolsky, M J Wabomba, J G Else, 1985, Tuberculosis in wild olive baboons, *Papio cynocephalus anubis* (Lesson), in Kenya: *J.Wildl.Dis.*, v. 21, p. 137-140.

Unger,F, S Münstermann, A Goumou, C N Apia, M Konte. Risk associated with *Mycobacterium bovis* infections detected in selected study herds and slaughter cattle in 4 countries west Africa. Animal Health Research working Paper No. 1, 1-25. 2003. Banjul, Gambia, International Trypanotolerance Centre.

Ref Type: Newspaper

Vekemans M., Cartoux M., Diagbouga S, Dembélé M, Koné B., A Delafosse, Dera A., Van de Perre Ph. Potential source of human exposure to *Mycobacterium bovis* in Burkina faso, in the context of HIV epidemic. 1999.

Ref Type: Unpublished Work

von Ostertag,R, G Kulenkampff, 1941, Tierseuchen und Herdenkrankheiten in Afrika, Berlin, Walter de Gruyter, p. 1-420.

Wekhe,SN, N A Berepubo, 1989, Prevalence of bovine tuberculosis among trade cattle in southern Nigeria: Trop.Anim Health Prod., v. 21, p. 151-152.

WHO, 2008, Global tuberculosis control: surveillance, planning, financing: WHO report 2008, Geneva, Switzerland, WHO, p. 1-304.

Woodford,MH, 1982, Tuberculosis in wildlife in the Ruwenzori National Park, Uganda (Part II): Trop.Anim Health Prod., v. 14, p. 155-160.

Zieger,U, G S Pandey, N P Kriek, A E Cauldwell, 1998, Tuberculosis in Kafue lechwe (*Kobus leche kafuensis*) and in a bushbuck (*Tragelaphus scriptus*) on a game ranch in central province, Zambia: J.S.Afr.Vet.Assoc., v. 69, p. 98-101.

Zinsstag,J, 2007, Animal health research: Science, v. 315, p. 1193.

Zinsstag,J, R R Kazwala, S Cadmus, L Ayanwale, 2006, *Mycobacterium bovis* in Africa, in CO Thoen, JH Steele, and Gilsdorf M.J. (eds), *Mycobacterium bovis* infection in animals and humans: London, Blackwell Science, p. 199-210.

Zinsstag,J, E Schelling, K Wyss, M B Mahamat, 2005, Potential of cooperation between human and animal health to strengthen health systems: Lancet, v. 366, p. 2142-2145.

Figure 1: Lésions granulomateuses (taches jaunâtres) suspects de tuberculose bovine d'un poumon bovin à l'abattoir de Sarh (Tchad) (Image: Ngandolo Bongo Naré)

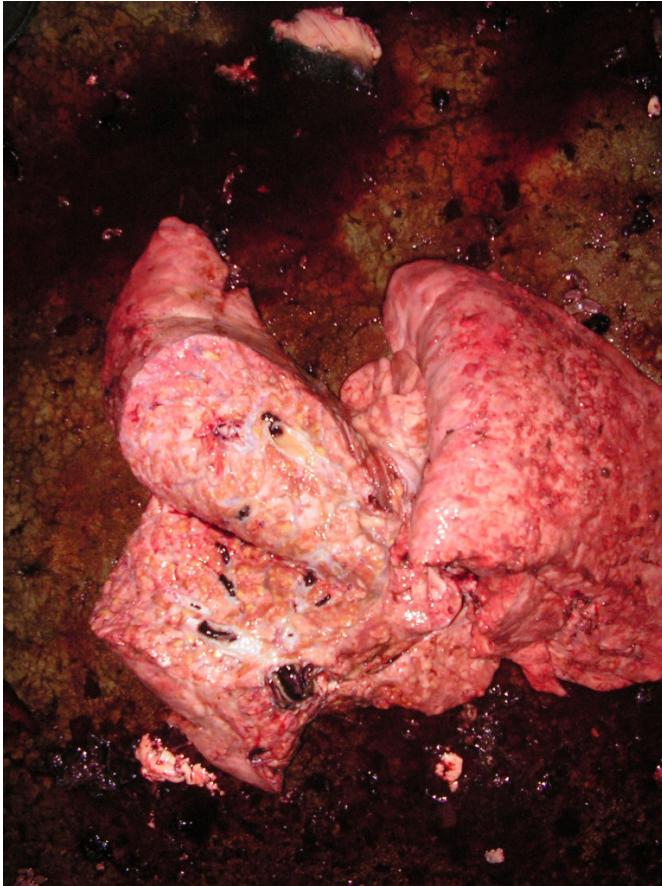
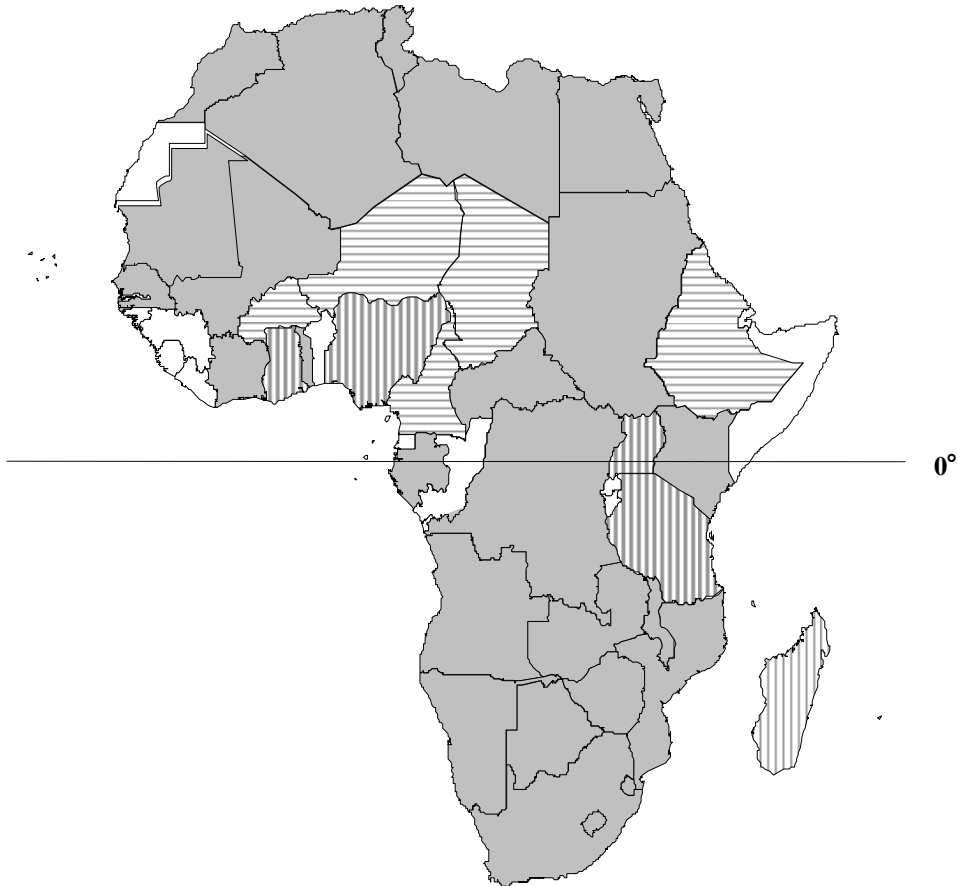


Figure 2. Présence de la tuberculose bovine en Afrique entre 1992-2001: En couleur verte, présence chez le bétail ou faune sauvage. Traits horizontales : présence chez le bétail mais quasiment absent chez l'homme. Traits verticaux : présence chez le bétail et chez l'homme (L'Ethiopie et l'Erytrée sont représentés ensemble). (Ayele et al., 2004)



14. Farmer's perception towards agriculture, livestock and natural resources in rural Ethiopian Highlands

R. Tschopp^{1,2*}, A. Aseffa², E. Schelling¹, J. Zinsstag¹

¹ Swiss Tropical and Public Health Institute, PO Box, CH-4002, Basel, Switzerland

² Armauer Hansen Research Institute (AHRI/ALERT), PO Box 1005, Addis Abeba, Ethiopia

[* Corresponding author: E-mail: rea.tschopp@unibas.ch]

Abstract

Increasing human and livestock population in Ethiopia is leading to increasing demand for feed. Cereal cropping is highly prioritized at the cost of the livestock sub-sector and the environment. Grazing land is decreasing, leading to overstocking and overgrazing of pastures, thus fuelling conflicts over scarce resources and exacerbating further land degradation.

Two independent surveys were carried out in four areas in the Ethiopian Highlands, investigating by means of questionnaires livestock husbandry as well as farmer's perception and attitudes regarding the relationship between cropping, livestock and natural resources, in the context of a broader reflection on what can help support Ethiopia's human, animal and environmental needs in a sustainable way. A total of 684 farmers were interviewed in 75 villages. The majority of animals were feeding from natural pasture and crop residue and only 1.3% of the respondents purchased supplementary feed. Overall, crop land has increased in the study area at the cost of grazing land and overstocking of pastures was seen as a major problem. Second main reason for decreased grazing land was considered to be drought in Woldia and increased human population in Gurage. No pasture management system was in place at community level in our study sites. Less than 2% of the respondents perceived and understood land degradation and subsequent decreased land fertility to be a constraint for sustainable feed production.

Strategies of de-stocking cattle herds are discussed. Cattle are intrinsically tied to cereal cropping. The more cropping land the more draft animals are needed and the more pressure is put on grazing land. Male animals account for over half of the cattle herd structure due to the need for draught animals; 80% of households kept draft oxen. Measures and priorities for future livelihoods were perceived differently by farmers from different regions. This study highlighted the lack of understanding amongst the farmers of causes and effects of land degradation and the lack of community based strategies for conservation agriculture.

Key words: Ethiopia, agriculture, livestock, sustainable land use, conflict, biodiversity, natural resources

Introduction

Ethiopia, well known for its recurrent famines, is amongst the poorest countries in the world and receives the most voluminous food aid in the world (Berry 2003).

Agriculture remains the major economic sector in the country, accounting for 43.8% of the national GDP, 90% of exports, and 85% of employments (CIA 2009). Over 90% of the agriculture—characterized by smallholder mixed farming (crop and livestock)—is practiced in the Ethiopian Highlands, which accounts for only 40% of the total territory but carries more than 80% of the human and 70% of the livestock population, making this the most densely inhabited part of the country (Demeke 2006). The Highlands are however, jeopardized by severe land degradation (Gete and Hurni 2001; Tadesse 2001; Daba et al 2003; Nyssen et al 2004; Hurni et al 2005; Nyssen et al 2008). This has direct impact on agricultural productivity, affecting both cultivated and pasture land through loss of soil and decreased soil fertility, thus constituting a major hazard to sustainable agriculture and feed resources (Hurni 1990; Yirdaw 1996; Nyssen et al 2009). The loss of agricultural value for the period 2000-2010 has been estimated at 7 billion USD (Sonneveld and Keyzer 2003).

With an Ethiopian population of over 85 million people growing at 3.2% per year (CIA 2009), the pressure on the agricultural sector is constantly increasing. Landholdings in the Highlands have an average cropland of 1.2 ha/household (CSA 2007), but are predicted to be falling to 0.6 ha/household by 2015 due to population growth (Teketay 2001). Despite an overall increase of cropland (at the cost of grazing land) and cereal production, food availability per capita has decreased in the last decade (Sonneveld and Keyzer 2003; CSA 2007).

In order to secure food availability and alleviate poverty, the Ethiopian government defined cereal intensification as a priority a decade ago (Byerlee et al 2007). But the livestock sub-sector remains, by comparison marginalized in terms of improving animal productivity and animal health and promoting better management of pastures and thus animal feed, thereby doesn't contribute to its full potential to the national economy (Ibrahim 2004; Gebremedhin et al 2004). Ethiopia has the largest livestock population in Africa, with a cattle population of 43 million head (CSA 2007). Animals are kept for milk, meat, draught power, manure and economic security. Importantly, livestock keeping is intimately linked to agriculture. Traditional farming practices in the Highlands depend on draft oxen for ploughing and threshing (Figure 1) (Goe 1987; Gebregziabher et al 2006). Draught power has been shown to be related to poverty

because farmers owning fewer oxen cultivate smaller areas and produce less labor-intensive but cheaper pulses instead of cereals (Astatke and Saleem 1996). The increasing livestock population is forced to graze on decreasing grazing land, which contributes to further land degradation (Gebremedhin et al 2004), to poorly nourished animals characterized by low productivity and to conflicts over natural grazing land (CSA 2002; CSA 2007; Nyssen et al 2009)

The present study explores by means of questionnaire surveys in four study areas in the Ethiopian Highlands, prevailing husbandry practices as well as farmer's perception on the current delicate balance between livestock, cropping and natural resources and how they outline their livelihood objectives.

Material and methods

We conducted two independent farmer household surveys using questionnaires with closed and open questions as part of a larger project assessing bovine tuberculosis in rural Ethiopia. Farmers were randomly selected within the multistage sampling framework of the tuberculosis project, according to their willingness to participate and only after they had given their oral consent. All questionnaires were translated into Amharic and back-translated into English for validation of misunderstandings and mistranslations. Interviews were carried out by a trained enumerator. The researcher was also present during all interviews to verify the accuracy of questionnaire filling. Only farmers who were fluent in Amharic (speaking and understanding) could participate in the interviewing process.

The first survey was conducted between 2006 and 2007 in four Woredas (districts) of three regions: 1) Meskanena Mareko, a Gurage area in the Rift Valley (Southern Nations, Nationalities and People Region, SNNPR) located at 8°10'N and 38°20'E (1800-2170 m a.s.l.), 2) Woldia (Amhara region) located at 11°55'N and 39°35'E (1460-3490 m a.s.l.), 3) Bako Gazer (SNNPR) located at 5°45'N and 36°40'E (1338-1634 m a.s.l.) and 4) the Bale Mountains (Oromia region) a larger geographical area located between 6°50'N and 7°10'N and between 39°40' and 40°20'E (2120-3500 m a.s.l.). In the latter zone, we regrouped three neighboring Woredas, Dinsho, Robe and Goro, in one study site (Figure 2). The study sites covered the two typical agro-ecological zones in the Highlands: "*woina dega*" between 1500-2300 m a.s.l. and "*dega*" above 2300 m a.s.l. The questionnaires for this first survey included general questions on

farm size, livestock husbandry (grazing system, fodder, farm input, keeping of other livestock), herd structure and herd turn over (exit due to death/selling and entry due to birth/purchase/gift), use of manure, and off-farm jobs.

The second survey was conducted between 2007 and 2008 in only two of the Woredas, the Eastern part of Woldia (between 1400 and 2000 m a.s.l.) and Maskanena Mareko (1800-2170 m a.s.l.). This questionnaire focused on questions related to land use, livestock and interaction between livestock and natural resources and their changes over time as perceived by farmers. Farmers were also asked about occurrences of conflicts over natural resources and their objectives regarding livestock and available land for the future.

Although the interviewed farmers in both surveys were from various ethnic, religious and cultural backgrounds, they were all livestock traditional smallholders in the Ethiopian Highlands, involved in both cropping and livestock husbandry with similar farm management.

Additional demographic data were collected from the Central Statistical Agency (CSA), Addis Ababa and Ministry of Agriculture and Rural Development, Addis Ababa. All data were doubled entered in Access and validated for entry errors with the statistical software package Epi Info (version 3.3.2). Analysis was done using the statistical software package STATA 9.1 (StataCorp, Texas, USA) and Microsoft®Excel 2002.

The study received ethical clearance from the institution and national ethical review committees (NERC, Ethiopian Science and Technology Agency).

Results

1. Livestock keeping survey

A total of 536 farmers were interviewed in four Woredas, which included 24 Kebeles (smallest administrative unit) and 75 villages. Fifty-eight percent of farmers grazed their animals on communal land, whereas the other animals grazed on farmer's own land. Animal feed mainly consisted of forage from natural pastures (free and uncontrolled grazing) and crop residues after harvest with purchased feed such as oil-cakes and molasses accounting only for 1.3% of the total feed. Veterinary services were variable, with farmers stating that 56% of their cattle were regularly vaccinated and only 33% regularly dewormed. Seventy percent of farmers were also keeping other livestock in addition to cattle.

Cattle herd structure is shown in Table 1. Adult uncastrated and castrated males (37%) exceeded the number of breeding cows kept by interviewees (30%). Nearly a quarter of the herds

consisted of oxen (22%). Regardless of age, total males accounted for 52% of herds. Considering exclusively breeding animals, there were only twice as many cows (30%) as bulls (15%), thus 1 bull for 2 cows.

Regarding herd turn-over, 38% of farmers purchased at least one animal during the previous year, which was more or less equal to the number of farmers (36%) having sold at least one animal in the same period. Birth was recorded twice as often as death, with 63% of farms having had at least one calving during the previous year and only 29% of farms recording at least one death.

Eighty percent of farmers held oxen as draught animals, accounting for 98% of all oxen (Table 2). The remaining 2% oxen were used for fattening. Twenty-three percent of all breeding males were also used as draught power. Females were rarely used as draught animals (0.4%). Seventy-nine percent of all draft animals were working more than 6 months per year.

Seventy-four percent of respondents valorized manure: 21% used it as fertilizer, but the majority (79%) used it as a source of fuel in the household and sold the remaining unused manure. Overall, 38% of respondents invested in farm improvement. As shown in Table 3, these inputs varied a great deal by region. Veterinary service is overall speaking and with the exception of Bale, viewed by farmers as the most important husbandry input to give: between 62% (Gurage) and 94% (Woldia) were seeking veterinary care, whereas improvement of breed genetics and improvement of feed, both assets contributing in increasing animal productivity were perceived as less important with a maximum of 11% and 34% of respondents being in favor of breed and feed improvement respectively. No husbandry improvements were observed in the Bale Mountains. However, only 40 farmers were interviewed, thus these figures do not necessarily reflect the reality in that region. Only 8% of farmers had alternative off-farm income source.

2. Survey of farmers' perceptions and objectives

This survey included 69 interviews in 16 villages from 5 Kebeles in the Gurage region (Meskan Mareko) and 79 interviews in 22 villages from 6 Kebeles in Woldia (total questionnaires: 148).

Cattle population

Change in herd size over time differed between the two regions: 41% of respondents in Meskan answered that their herd was now larger than in the previous ten years, due to purchase, birth and gifts from NGOs and government. Only 20% of farmers had smaller herds than in the last 10 years. By contrast, 44% of Woldia farmers stated that they had to decrease their herd size over the years due to diseases, drought and severe feed shortage. Only 18% had more cattle when compared to the past years. The majority of farmers in both regions (73% in Woldia, 56% in Meskan) stated that stocking density on communal land was too high, leading to overgrazing and degradation of pastures.

Pastures

No pasture management system was in place in Woldia and Meskan. Figure 3 (A) shows the answers of respondents from both regions concerning the current, past and future availability of pasture forage for their livestock. The majority of farmers in both regions acknowledged a current lack of grazing land, which would dramatically worsen in the future and an overstocking/overgrazing of pastures. The reasons for pasture shortage as perceived by farmers are given in Figure 3 (B). The major reason given by over 60% of respondents from both regions was clearly increased cropping land. All interviewed farmers said that land used for crops was greater in surface than the grazing land they could access. Farmers were not able to provide absolute figures for surfaces and the statements relied on their perception of changes in land use. Most Woldia farmers (91%) mentioned that they had crop land four times and more the size of pastures, while only 62% of Gurage farmers mentioned having this proportion. Only 16% and 3.7% of farmers in Meskan respectively Woldia thought that increased cattle numbers were a limitation to available pastures. In Woldia, drought was an important source of grazing shortage (31.5% of respondents). Decreased land fertility was not seen as a reason for grazing shortage in Woldia and only 1.6% of Gurage respondents observed a decrease in land fertility.

Problems and benefits of communal grazing were assessed with farmers from Meskan only (Figure 4 (A-B)). Shortage of forage and animal emaciation were seen as the main drawbacks of communal grazing by a quarter of the respondents. One third perceived easy herding as a major benefit of communal grazing.

Water resources

Rivers and lakes were the main water sources for all Woldia farmers and 60% of Gurage farmers. Because of the often long walk to watering sources, 57% of herds in Meskan and 75% of herds in Woldia were watered only once a day. Forty-four percent of Gurage farmers complained about regular shortage of water. The main complaint was that water was diverted by richer farmers for field irrigation (37.5% of respondents), followed by seasonal droughts (25% of respondents) and human water consumption (19%). During drought periods, water access for livestock was restricted in 16% of the interviewed households. Problems related to common watering were infestation of cattle with leeches (25% of respondents) during the dry season and long walking distances to water sources (21% of respondents), whereas diseases and injuries through fights were rare (4%).

Conflicts

Twenty-two percent of farmers in Meskan and 44.3% in Woldia declared that communal grazing land was also used by farmers from other villages. Conflicts over grazing land were mentioned by 23% of respondents in Meskan but only by 4% of Woldia farmers. In Meskan half of the conflicts involved fellow farmers from the same or from other villages sharing natural resources, half with Kebele authorities. Farmers reacted by oral complaints. Frictions over water resources were mentioned by 18% of Gurage respondents.

Priorities and measures for the future proposed by farmers

Figure 4-C shows farmers' priorities and objectives for the future that varied between the regions. Less than half of the farmers wished to have more pastures available. In Meskan region, 44% of Gurage farmers considered that additional grazing land should simply be provided by the government. The next two prioritized managerial improvements were improved breeds (17% of respondents) and having access to available and affordable supplementary feed (25%). Decreasing herd size was not seen as a major option by Gurage farmers (only 3% of respondents), whereas this was seen as the major measure to overcome land degradation by half of the Woldia farmers.

Discussion

Ethiopia is a country dependant on its agricultural sector, which is characterized by low productivity. Traditional production systems have lead to severe land degradation resulting in decreased feed resources for both human and livestock. But simultaneously, human and livestock populations are increasing fast, using more resources than in the past and putting increasing pressure on land (Figure 5) (Nyschen et al 2009).

Data from the Central Statistical Agency (CSA) have shown that over the last decade cropping land has increased at the expense of grazing land (CSA 1996; CSA 2000; CSA 2006). Ever decreasing grazing land combined with a fast growing livestock population of over 90 million head (CSA 2007) is likely to lead to massive overstocking and overgrazing of available pastures and increased land degradation. This national situation correlates with data from our study: 41% of interviewed Gurage farmers stated that while their herd size is larger than 10 years ago, their grazing land has decreased massively in favor of cropping land thus further increase stocking rate. All interviewed farmers, regardless of region, stated that they needed to prioritize crop land to feed their growing families.

The majority of the Gurage and Woldia farmers complained about the current situation regarding lack of pastures to accommodate their animals and about overstocking/overgrazing problems. Perception of farmers regarding the other reasons of lack of grazing land and forage in the future - besides increased crop land - differed by region. Woldia farmers considered drought to be a major constraint to both grazing land and herd size. Whereas, Gurage farmers considered the increasing human population to be a major constraint, since linked with increasing livestock and more land needed to build infrastructure.

None of the farmers in neither Gurage nor Woldia perceived land degradation and subsequent decreased land fertility as a problem. Overstocking damages land but kept in optimal numbers, livestock contribute through accumulation of manure to increased biomass production on grazing land (Tadesse et al 2002; Tadesse et al 2003). In our study, manure was collected from the fields as primary source of fuel and/or selling and thus went back only partially into soil fertilization (only 21% of the respondent used it as fertilizer). Less than 2% of the interviewed farmers understood decreased soil fertility of pastures to be one reason for feed shortage. Water shortage was perceived as a much bigger problem than grazing shortage.

Overall, farmers nearly entirely relied on forage from natural pastures to feed their animals with only 1.3% of respondents purchasing feed. Communal grazing was perceived by the interviewees as having more benefits than problems despite the associated lack of forage. Poor nutritional status contributes to low animal productivity. To compensate for low individual productivity, farmers tend to increase their herd size as shown in the Gurage study, which in turn puts more pressure on pastures. Only external factors such as severe drought, as shown in the Woldia case lead to herd depletion through selling and deaths. Such events may in turn force some of the farmers to use communal land for cereal cropping in order to survive, thus further decreasing available grazing land as well as soil fertility due to lack of manure. Farmer's solutions to the overstocking/overgrazing problem differed depending on the region: Woldia farmers stated they wished to have fewer but more productive animals to feed, which would in turn reduce the need for grazing land. On the other hand, Gurage farmers were asking local authorities for more pastures as if land was an expandable commodity. They also considered more productive breeds as priority but without having to reduce their herd size. Agriculture extensification rather than intensification was clearly the focus of these farmers. Finally, they wished to have increased water resources. In common, both Woldia and Gurage farmers saw the need for increased and affordable supplementary feed.

There was no household-level or community-based land use management in the two study areas. Our study also highlighted that interviewed farmers did not fully perceive the limitations of existing natural resources; the complete cause-effect chain and the full extend and implications of overgrazing, land degradation, future availability of feed and sustainability of natural resources. This contrasts with the attitude of rural communities in parts of Ethiopia (e.g. Tigray; pastoralist communities in Afar or Borana), who have a long tradition of restrictive regulations of grazing areas at village level and an understanding of the limitations of existing natural resources and consequently their management (Gebremedhin et al 2004; Edossa et al 2005; Abule et al 2005).

In Tigray, a region with extreme land degradation, agriculture intensification and conservation agriculture has proved to be one solution to the above described agricultural trap, when participatory approaches were used (Astatke et al 2003; Nyssen et al 2009). Conservation agriculture is a relatively new concept, especially in Africa, which combines social and economic benefits from integrating production and protection of the environment (Dumanski et

al 2006). Examples in Tigray include increased field irrigation systems (Nyssen et al 2009), slopes terracing and stone bunds (Nyssen et al 2007), catching and storing run-off water in ponds (Fekadu 2007), rehabilitation of degraded land by exclosures and thus limitation of uncontrolled and free grazing that further damages land (Mekuria et al 2007).

Decreased feed availability on overstocked/degraded communal grazing land as seen in this study are likely to have direct impacts on animal health; this is reflected by animals showing low body condition, decreased productivity and decreased resistance to diseases (Pandey et al 1993; Mishra et al 2001). Communal grazing also directly increase the risk of disease transmission between animals and increase the parasitic load on pastures (Lefèvre et al 2003). A quarter of the interviewed farmers perceived communal grazing to be associated with animal emaciation but only 6% of them saw a possible link with diseases. Increased livestock population also strains the scarce veterinary services available in the country. Official figures show that only 2 million cattle (4.6%) were vaccinated nationwide in 2007 (CSA 2007). In contrast, half of the interviewed farmers in our study stated that they vaccinated regularly their animals. This discrepancy can be explained by the fact that the latter farmers had better access to veterinary care services than farmers from other regions such as pastoralist zones. Their statement may also have only included valuable animals, such as oxen and not their entire herd. The need for increased veterinary care was clearly one the major priorities for husbandry improvement given by most respondents (62% of Gurage and 94% of Woldia farmers).

Friction over scarce natural resources exists in most part of Ethiopia. In some parts the different players manage to reach agreements (Nyssen et al 2009), whereas in other conflict and violent clashes occur, such as in the Awash river basin (Edossa et al 2005) and the Gambella region (Sewonet 2003; Reuter 2008). Verbal frictions were described in 23% of Gurage respondents in our study; half of which involved the relevant Kebele authorities in not taking seriously their need. Farmer's attitude in this study site stresses the lack of collective actions at village level to cooperate in resource management and the fact that farmers rather rely on authorities to improve the situation.

Ethiopia has the largest livestock population in Africa with one head of cattle for less than 2 people. Furthermore, within the cattle population, males account for half of the total herd

structure on national level and in our study (CSA 2007). De-stocking cattle herds seems to be the logic solution to decrease economical and ecological burden to the agriculture sector. In urban areas, farmers have switched to more productive and intensive systems including high productive exotic dairy breeds in order to supply big cities with the increasing demand for milk. However, high productive exotic breeds and their crosses account currently for only 1% of the total cattle population and milk demand is still five times higher than the supply, animal feed remains unaffordable and grazing areas are lacking (Abebe 2007; CSA 2007).

In rural areas, traditional production systems rely entirely on animal power. Increased cropping land will in turn need more draft animals and thus lead to stagnation in the agricultural system and further exacerbation of land pressure/degradation (Figure 5). Taking into account animal losses and the minimum age at which animals can start being used as draught animals, each household realistically needs to maintain a minimum herd size of 8-10 animals to permanently secure at least 2 oxen for ploughing (Sandford 1982). The majority of farmers in our study possessed 2 oxen and 12.5% of the respondents had even 3 and more oxen. Draught animals worked more than 6 months per year (ploughing and threshing), making it difficult to share working animals among farmers, and thereby decrease the number of oxen in a villages. Cows are primarily kept to produce the next male generation for draught power rather than for milk production. Improvement of breed genetic as encouraged in urban/peri-urban areas to increase productivity and thus decrease animal numbers are not a solution for these essentially ox production systems. This is also reflected in the farmer's attitudes in our study. Regardless of fodder availability, only 11% of Gurage and 7% of Woldia farmers said they would like to have improved breeds with better productivity. Moreover, our study showed that overall no efforts were made for livestock housing and feed supplementation as alternatives to natural grazing. However, even in these traditional production systems, research has shown that strategies can be used to decrease necessary oxen population. Astatke et al (2003) showed that modification of the traditional plough reduced tillage and soil erosion. The authors reported 50% less draft animals required compared to the traditional ploughing system.

Finally, increasing the export capacity of live animals and meat may help decrease the livestock surplus. Around 350'000 cattle and 1.2 million small ruminants are exported annually (FAO 2007). However, the export industry is still underdeveloped in Ethiopia and the majority of the

trade is informal (cross-border) from pastoralist areas (Little 2005). These areas are also the main suppliers of animals to export abattoirs and exporters help de-stock their herds during times of crisis (e.g. severe drought).

Conclusions

Livestock is the most important component in a farmer's life for daily survival and economical security. Yet, cereal cropping is highly prioritized at government and farm level at the cost of the livestock sub-sector, the environment and natural resources. The introduction of conservation agriculture and rehabilitation of degraded land in parts of the country has shown benefits in economical and ecological terms compared to the traditional agriculture system. But these strategies work best when community or village driven. This study showed that the perceptions and attitudes of farmers towards agriculture (cropping and livestock) and natural resources in our study sites as well as their priorities for future livelihoods diverged very much depending on the region. It also highlighted the lack of understanding amongst these farmers of causes-consequences of land degradation and subsequent sustainability of future feed sources for both human and livestock and thus, the need for increased community based awareness and participatory trials on conservation agriculture.

Acknowledgments

We are very grateful to the Wellcome Trust (UK) for funding this study, which was done in collaboration with NCCR North-South. We thank AHRI/ALERT (Addis Abeba) for the logistic support. We also thank Lina Gazu, Mesgebu Asmro, Bamlaku Tilahun and Alemayehu Kifle for their valuable help and support during field work. Our thanks also go to all the villagers who were willing to participate in this study. We are grateful to Anne Zimmerman for her help in editing the manuscript.

References

- Abebe D. 2007. Ethiopia: searching for milk in Addis Abeba. *Addis Fortune* 10 September 2007.
- Abule E, Snyman HA, Smit GN 2005. Comparisons of pastoralist's perceptions about rangeland resource utilization in the Middle Awash Valley of Ethiopia. *Journal of environmental Management* 75:21-35.
- Astatke A, Saleem MA. 1996. Draught animal power for land-use intensification in the Ethiopian Highlands. *World Animal Review (FAO)* 86:3-11.
- Astatke A, Jabbar M, Tanner D. 2003. Participatory conservation tillage research: an experience with minimum tillage on an Ethiopian highland vertisol. *Agriculture, Ecosystems and Environment* 95:401-415.
- Berry L. 2003. Land degradation in Ethiopia: its extent and impact. Study commissioned by the Global Mechanism with support from the World Bank examinedlada.virtualcentre.org/eims/download.asp?pub_id=92120; accessed on 25 June 2008.
- Byerlee D, Spielman DJ, Alemu D, Gautam M. 2007. Policies to promote cereal intensification in Ethiopia: a review of evidence and experience. Development Strategy and Governance Division, Discussion Paper 00707, June 2007. International Food Policy Research Institute (IFPRI), Washington, USA.
- CSA [Central Statistical Agency]. 1996. Agricultural sample survey for 1995/96 (CD-ROM), Addis Abeba, Ethiopia: CSA.
- CSA [Central Statistical Agency]. 1996. Report on livestock, poultry and beehives. Population and number by size of holdings 1995/1996. Vol VI. Statistical bulletin 152, Addis Abeba, Ethiopia: CSA.
- CSA [Central Statistical Agency]. 2001. Agricultural sample survey 2000/01, Vol II: Report on livestock and livestock characteristics. Statistical bulletin 245, Addis Abeba, Ethiopia: CSA.
- CSA [Central Statistical Agency]. 2004. Agricultural sample survey for 2003/04 (CD-ROM), Addis Abeba, Ethiopia: CSA.
- CSA [Central Statistical Agency]. 2007. Agricultural sample survey 2006/07, Vol II: Report on livestock and livestock characteristics. Statistical bulletin 388, Addis Abeba, Ethiopia: CSA.
- CSA [Central Statistical Agency]. 2007. Agricultural sample survey 2006/07, Vol IV: Report on land utilization. Statistical bulletin 388, Addis Abeba, Ethiopia: CSA.
- CIA [Central Intelligence Agency]. 2009. CIA factsheet. The World Factbook- Ethiopia. <https://www.cia.gov/library/publications/the-world-factbook/geos/et.html>; accessed on 15 April 2010.

Daba S, Rieger W, Strauss P. 2003. Assessment of gully erosion in eastern Ethiopia using photogrammetric techniques. *Catena* 50(2):273-291.

Demeke S. 2006. Contribution of Jimma University, College of Agriculture and Veterinary Medicine (JUCAVM) to Ethiopian agriculture. Seminar paper. Seminar held between July 8 and August 14 2006 at Nova Scotia Agricultural College (NSAC)
http://www.nsic.ns.ca/international/International_Projects/Current_Projects/Ethiopia/SolomanPa per.pdf; accessed on 20 April 2008.

Dumanski J, Peiretti R, Benetis J, McGarry D, Pieri C. 2006. The paradigm of conservation tillage. *Proceedings of the World Association of Soil and Water Conservation*, P1: 58-64.

Edossa DC, Babel MS, Gupta AD, Awulachew SB. 2005. Indigenous systems of conflict resolution in Oromia, Ethiopia. *Proceedings of international workshop on "African Water Laws: Plural Legislative frameworks for Rural Water Management in Africa"*. Johannesburg, South Africa.

Fekadu Wondumagegnehu, Alemtsehay Tsegay, Dereje Ashebir, Hailemariam Tekie, Addisu Gebre, Mewael Kiros, Geerts S, Raes D, Nyssen J, Deckers J. 2007. Household water harvesting structures in Geba catchment. *Tigray Livelihood Papers No. 5, VLIR – Mekelle University IUC Programme*, p. 28, ISBN 978-90-8826-022-3.

Food and Agriculture Organization (FAO) 2007. FAOSTAT database: <http://faostat.fao.org>; accessed on 20 April 2010.

Gebregziabher S, Mouazen AM, Van Brussel H, Ramin H, Nyssen J, Verplancke H, Behailu M, Deckers J, De Baerdemaeker J. 2006. A review: Animal drawn tillage, the Ethiopian ard plough, maresha. *Soil and Tillage* 89:129-143

Gebremedhin B, Pender J, Tesfay G. 2004. Collective action for grazing land management in crop-livestock mixed systems the Highlands of Northern Ethiopia. *Agricultural Systems* 82:273-290.

Gete Zeleke, Hurni H. 2001. Implications of land use and land use cover dynamics for mountain resource degradation in the Northwestern Ethiopian Highlands. *Mountain Research and Development* 21(2):184-191.

Goe MR. 1987. Animal traction on smallholder farms in the Ethiopian highlands [Ph.D. dissertation]. Department of Animal Science, Cornell University, Ithaca, New York, NY, USA.

Hurni H. 1990. Degradation and conservation of soil resources in the Ethiopian Highlands. *In: Messerli B, Hurni H, editors. African Mountains and Highlands: problems and prospective*. Marceline, Mo: Walsworth Press for the African Mountains Association (AMA), pp 51-63.

Hurni H, Tato K, Zeleke G. 2005. The implications of changes in population, land use, and land management for surface runoff in the Upper Nile Basin area of Ethiopia. *Mountain Research and Development* 25(2):147-154.

Ibrahim M. 2004. Extension experiences in Ethiopia. Paper presented at the “Ministry of Agriculture and Rural Development Planning Workshop,” Addis Ababa, Ethiopia.

Lefèvre PC, Blancou J. 2003. Particularités épidémiologiques des régions chaudes. *In* : Lefèvre PC, Blancou J, Chermette R, editors. *Principales maladies infectieuses et parasitaires du bétail. Europe et régions chaudes. Tome 1. Généralités, Maladies virales*. Paris : Lavoisier, pp 47-54.

Little P. 2005. Unofficial trade when states are weak. The case of cross-border commerce in the Horn of Africa. Research Paper No. 2005/13. EGDI (Expert Group on development issues) and UNU-WIDER (United Nations University – World Institute for Development Economics Research)

Mekuria W, Veldkamp E, Haile M, Nyssen J, Muysd B, Gebrehiwot K. 2007. Effectiveness of exclosures to restore degraded soils as a result of overgrazing in Tigray, Ethiopia. *Journal of Arid Environments* 69:270–284.

Mishra C, Prins HHT, Van Wieren SE. 2001. Overstocking in the trans-Himalayan rangelands of India. *Environmental Conservation* 28(3):279-283.

Nyssen J, Poesen J, Moeyersons J, Deckers J, Mitiku H, Lang A. 2004. Human impact on the environment in the Ethiopian and Eritrean highlands—a state of the art review. *Earth Science Reviews* 64:273–320.

Nyssen J, Poesen J, Gebremichael D, Vancampenhout K, D’aes M, Yihdego G, Govers G, Leirs H, Moeyersons J, Naudts J, Haregeweyn N, Haile M, Deckers J. 2007. Interdisciplinary on-site evaluation of stone bunds to control soil erosion on cropland in Northern Ethiopia. *Soil and Tillage Research* 94:151–163.

Nyssen J, Poesen J, Haregeweyn N, Parsons T. 2008. Environmental change, geomorphic processes and land degradation in tropical highlands. *Catena* 75:1-4.

Nyssen J, Simegn G, Taha N. 2009. An upland farming system under transformation: Proximate causes of land use change in Bela-Welleh catchment (Wag, Northern Ethiopian Highlands). *Soil and Tillage Research* 103:231–238.

Pandey VS, Chitate F, Nyanzunda TM. 1993. Epidemiological observations on gastro-intestinal nematodes in communal land cattle from the highveld of Zimbabwe. *Veterinary Parasitology* 51:99-106.

Reuters 2008. Twenty killed in Western Ethiopia land clashes.
<http://in.reuters.com/article/worldNews/idINIndia-33747520080524>; accessed on 20 May 2008.

Sandford S. 1982. *Livestock in the communal areas of Zimbabwe*. A report prepared for the Ministry of Lands, Resettlement and Rural Development. Overseas Development Institute, London, UK. 169 pp.

Sewonet A. 2003. Ethiopia: breaking the cycle of conflict in Gambella region. United Nations Country Team in Ethiopia (UNCT). <http://www.who.int/disasters/repo/8684.pdf>; accessed on 20 May 2008.

Sonneveld BGJS, and Keyzer MA. 2003. Land under pressure: soil conservation concerns and opportunities for Ethiopia. *Land Degradation Development* 14:5-23.

Tadesse G. 2001. Land degradation: a challenge to Ethiopia. *Environmental Management* 27(6):815-824.

Tadesse G, Saleem M, Abyie A, Wagnew, A. 2002. Impact of grazing on plant species richness, plant biomass, plant attribute and soil physical and hydrological properties of vertisol in East African Highlands. *Environmental management* 29 (2):279-289.

Tadesse G, Peden D, Astatke A, Wagnew, A. 2003. Effect of manure on grazing lands in Ethiopia, East African highlands. *Mountain Research and Development* 23(2):156-160.

Teketay D. 2001. Deforestation, wood famine, and environmental degradation in Ethiopia's Highland ecosystems: urgent need for action. *Northeast African Studies* 8(1):53-76.

Yirdaw E. 1996. Deforestation and forest plantations in Ethiopia. *In: Palo PM, Mery G, editors. Sustainable Forestry Challenges for Developing Countries*. Dordrecht, The Netherlands: Kluwer Academic Publishers, pp 327-42.

Fig 1: Field ploughing in the Ethiopian Highlands using oxen pulling the traditional plough, the *maresha* (photo: Rea Tschopp).



Figure 2: Map of Ethiopia showing the different study sites

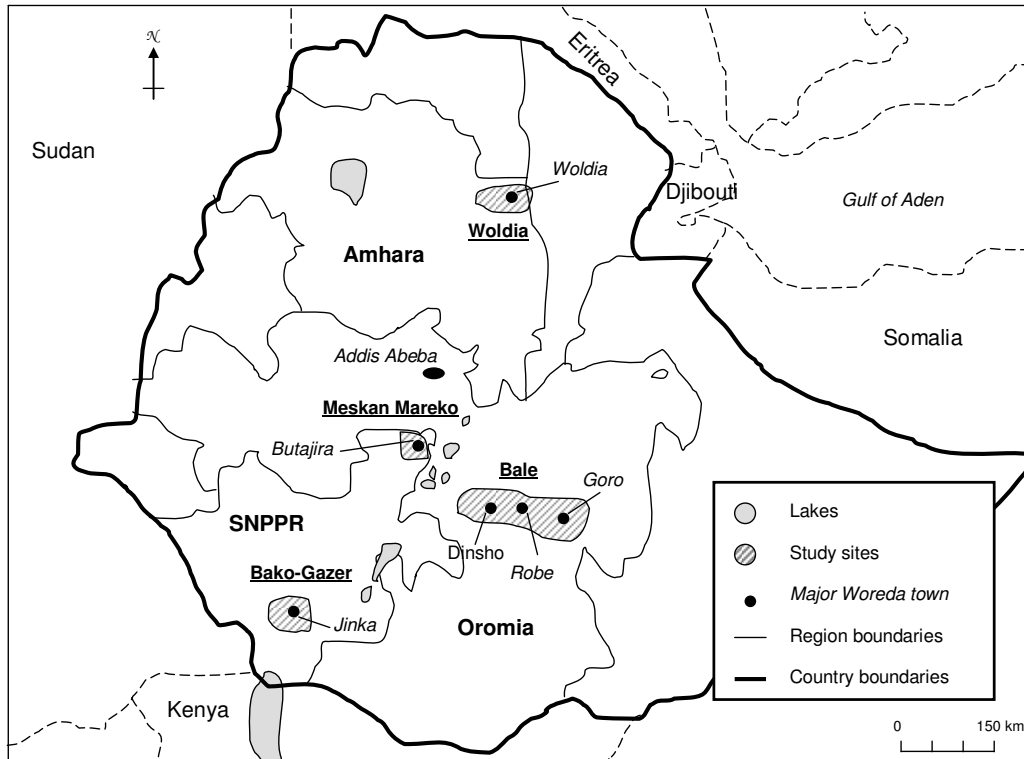


Table 1: Overall herd structure of the interviewed farms

Cattle categories	Number	Percent of total number
Calves (<1 year)	546	14.0
Juveniles (1-3 years)	730	18.7
Breeding cows	1183	30.4
Breeding bulls	581	14.9
Oxen	850	22.0
Total cattle	3890	100

Table 2: Number of oxen kept per household and percentage of households with few to several oxen.

Number of oxen	Number of households keeping oxen	Percent of households keeping oxen
None	113	21
One	148	27
Two	211	39
Three	32	6
Four and more	37	7
Total	536	100

Table 3: Farm input by region in percent of respondents

	Gurage region (n = 172)	Woldia (n = 189)	Bako Gazer (n = 135)	Bale Mountains (n = 40)
Veterinary care	62	94	78	0
Improvement of cattle housing	11	4.6	0	0
Improvement of breeds	11	7	0	0
Improvement of feed	34	6	2	0

Figure 3: Grazing availability for livestock (A) and reasons for grazing shortage (B) as perceived by Gurage and Woldia farmers.

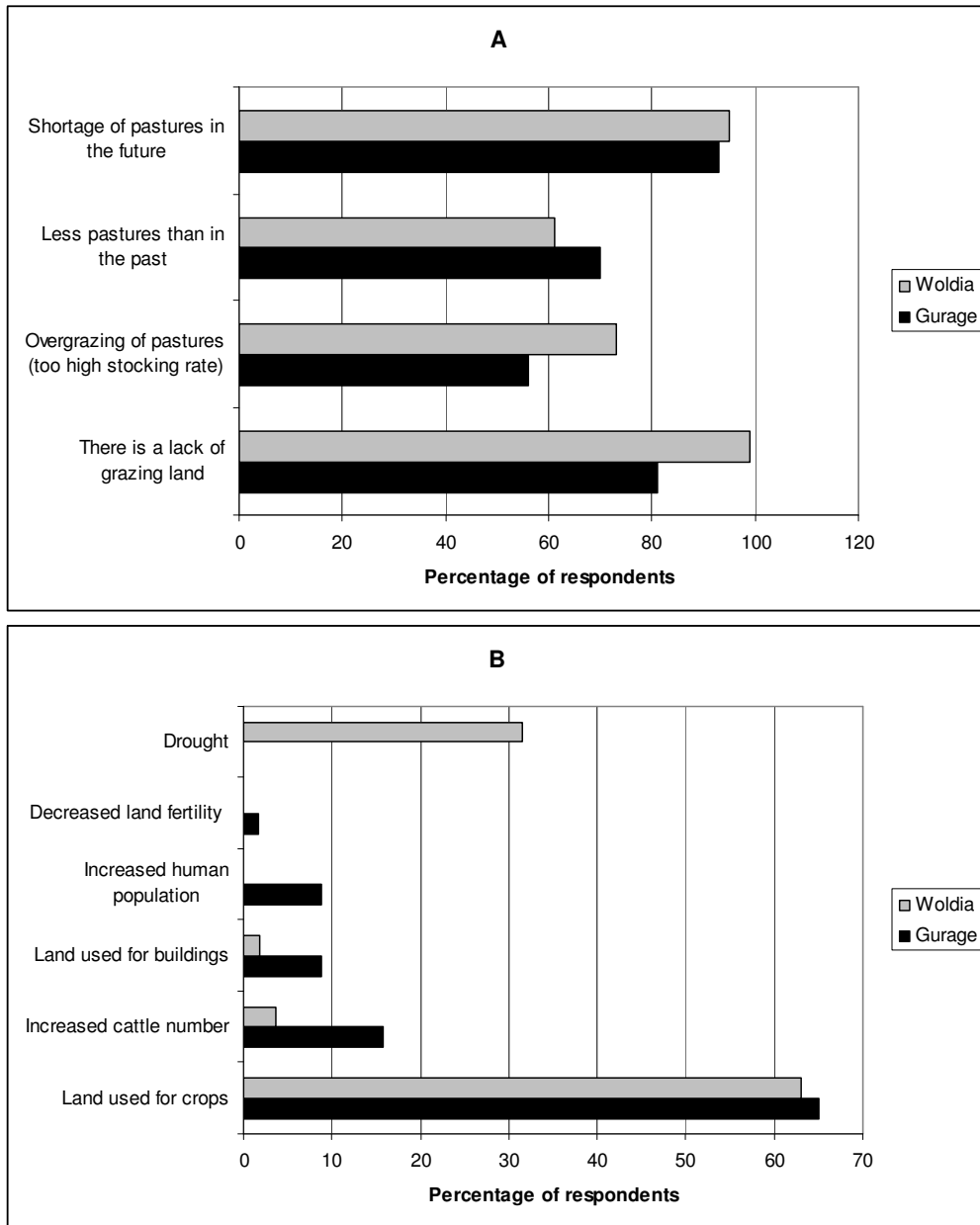


Figure 4: Problems (A) and benefits (B) of communal grazing as perceived by Gurage farmers, and measures (C) proposed by Woldia and Gurage farmers (multiple answers possible).

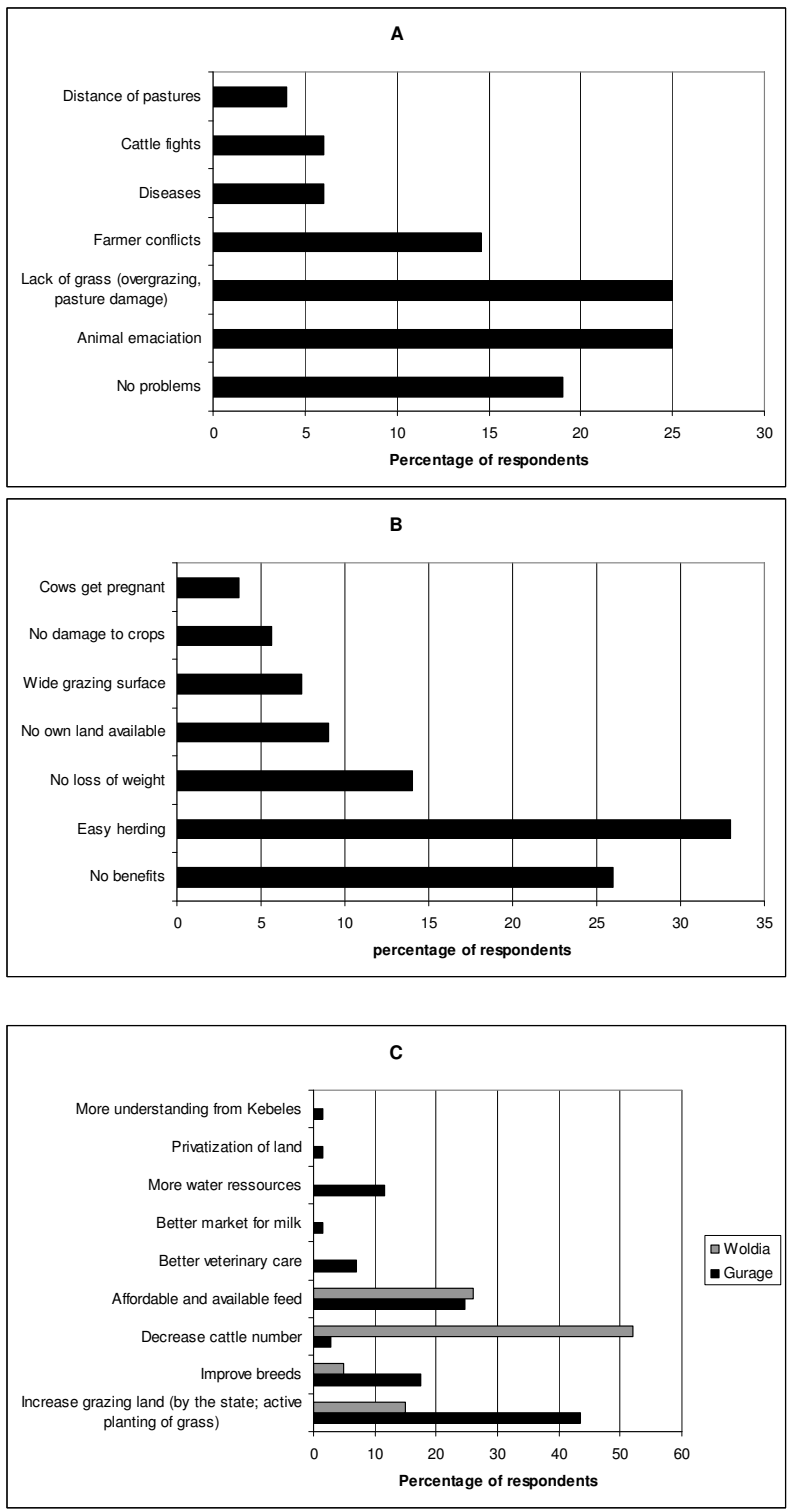
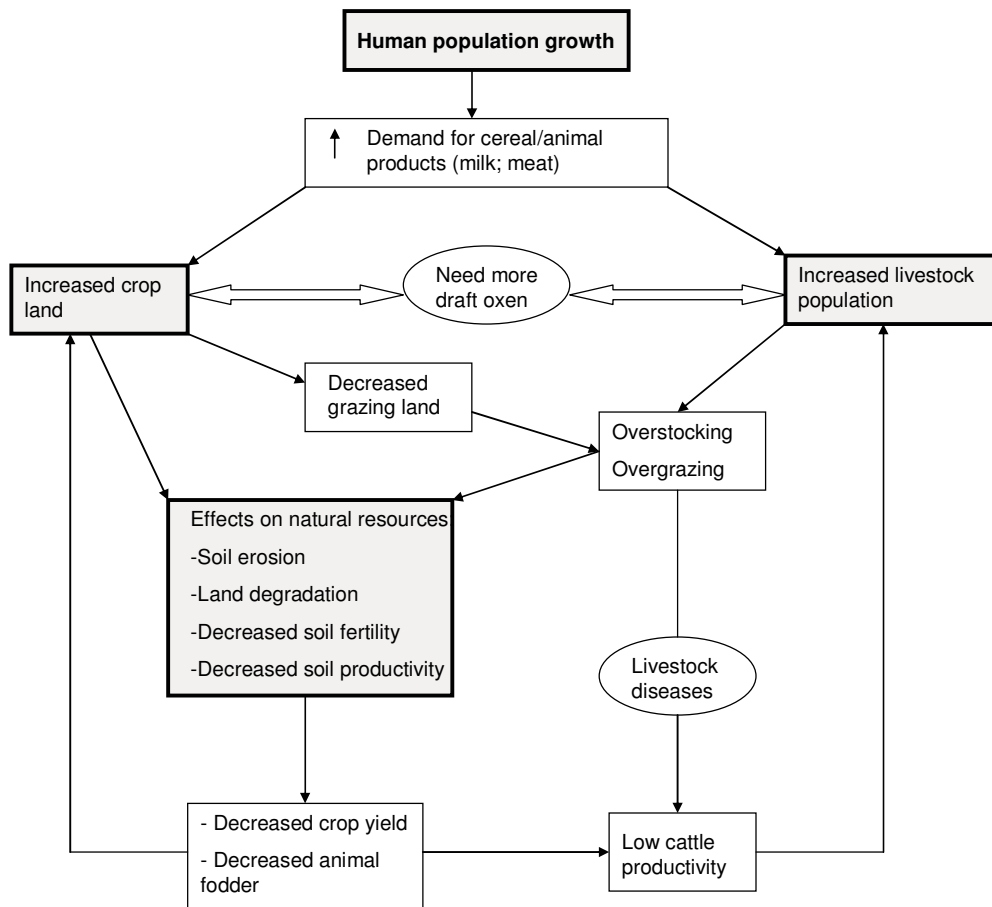


Figure 5: Flow chart summarizing in a simplified way the traditional low intensity crop-livestock system in Ethiopia and its relationship to natural resources





15. Livestock productivity studies

This chapter presents briefly some longitudinal on-going long term studies, started during this PhD but which are not finished at the time of the thesis completion. Therefore, no details on analytical methods and no results are shown at this point of time. However, these studies are essential in order to complete the ultimate goal of the original BTB project research question concerning the economical impact of BTB on livestock and to understand some discussion points in the last chapter of the thesis.

15.1. Baseline productivity analysis of Ethiopian cattle

Baseline productivity parameters are needed in order to assess possible impacts of BTB on livestock productivity. Little information was found in the literature for the Ethiopian setting, except for some intensive peri-urban farms (Mekonen et al., 2005, Gebeyehu et al., 2006, Yilma et al., 2006). However, little to no data has been collected on long term cattle productivity in herds kept under traditional management. We therefore started such a long-term study over a period of 4 years in order to collect field data on cattle productivity.

Study sites

Twenty farms were selected in Sellale (North Shoa), 200 km North of Addis Abeba and one farm in Butajira (Rift Valley), South of the capital city, both sites being located in the Central Highlands of Ethiopia. Sellale has a temperate climate and is one of the main sources for milk supply for Addis Abeba. It is one of the few regions in Ethiopia where farmers are keeping traditional zebus as well as Holstein and their cross-breeds under same traditional husbandry conditions, thus making breed comparison possible.

The study in Mercy farm (Butajira) was started only in 2007, after an initial study involving the governmental farm of Holetta (West of Addis Abeba), which kept Holsteins, failed due to stamping out of TB positive animals included in the study. Project Mercy, is a not-for-profit relief and development agency and owns a dairy farm, which supplies the nearby school and orphanage (all belonging to the project) with fresh milk. The cattle are kept under intensive husbandry and the herd is composed mainly of Boran and Fogera cattle breeds and some of their crosses. These two traditional breeds are known for higher milk production compared to other traditional zebu breeds.

Animals

Since herds undergo a dynamic turn over in time, it is difficult to give here exact static figures. At the beginning of the study in 2005 in Sellale, herd size varied between a minimum of 9 and a maximum of 28 animals. The initial stock was composed of 123 (35%) traditional zebu, 134 (38%) cross-breeds and 94 Holstein (27%). The majority of the animals were females (58%) whereas bulls and oxen made up each for 21 % of the herd composition. Animals were categorized in following age categories: 61 calves (17%), 67 juveniles (19%), 182 adult breeders (3-10 years) (52%) and 41 old breeders (>10 years) (12%).

The initial stock in Mercy farm counted 96 animals. The majority were females (N=78, 81%). The herd was composed of 36 calves (37%), 3 juveniles (3%), 25 adult breeders less than 10 years old (26%) and 32 breeders over 10 years of age (33%). The majority of the cattle were Boran (63%) followed by Fogera (28%). The remaining herd was made of 5 traditional unclassified zebu (5%), 2 cross-breed (2%) and 1 Holstein (1%).

Herd follow up

Each farm in Sellale is visited every two weeks and herd books updated after each visit. The aim of these visits is to assess herd structure, turn over and dynamics (entries and exit of animals), record data on meat gain, milk production and fertility.

Following parameters are recorded during each visit: new born calves, purchasing of animals, selling of animals, death of animals, reason for death, sick animals, and price of sold or purchased animals. New born calves are weighed 3 times with a hanging scale in 2 weeks interval since farm visits often don't coincide with the day of birth. A regression analysis will allow calculating the birth weight. The weight of these calves is then followed up once a month using an animeter during 12 months. In addition, all animals are weighed with the animeter regardless of their age, twice a year, once after the rainy season and once after the dry season in order to have an average animal weight.

Each new animal is identified by sex, age, breed, and parity for cows and a unique ID is given for each animal. Farmers did not allow us to ear-tag their animals, however they know each animal by name and we subsequently gave an ID for each name.

Follow up of milk production is started for each cow giving birth during the study period and milk production is recorded once a month until the animal is dry.

All cattle in the study are regularly dewormed twice a year with Albendazol (appendix 6).

Similar procedure is done in Mercy farm. However visits are conducted only once a month since the logistic is much easier than in the Sellale farms, e.g. all cattle were housed at night under the same roof, calves can be weighed right after birth and less animal turn over exist. In this farm, we ear-tagged all animals (initial stock, new born and purchased animals).

Data analysis

All data is doubled entered in Access table, and validated with Epi-Info. Herd book sheets are updated once a month (e.g. addition of new animal IDs, deletion of animals that left the farm) The final data will be analysed with an FAO spreadsheet called Livestock Development Planning System (LDPS2). The application helps to identify and quantify herd composition and size required for a given demand of milk and meat. It helps to identify and quantify feed and livestock constraints and also to assess various livestock development programs. The results of this study will be incorporated into the human-animal health economic model for the economic analysis of the impact of BTB in Ethiopia, similarly to what was done in a Brucellosis study in Mongolia (Roth et al., 2003).

15.2. Herd structure of cattle in Ethiopia

To complete the above LDPS2 sheet, average Ethiopian cattle herd structure has to be known. We collected the information regarding herd structure in the study described in chapter 15. Considering a herd size of 43 million cattle (CSA 2008) we get the following figures:

	Percent of total	Total numbers of animals in the country
Calves	14	6'020'000
Juveniles	18.7	8'041'000
Breeders females	30.4	13'072'000
Breeders male	14.9	6'407'000
Oxen	22	9'460'000
Total	100	43'000'000

15.3. Impact of BTB on animal weight in abattoirs

To our knowledge, no studies have been done in Africa on the impact of BTB on weight loss in animals. However, knowing the nature of BTB as being a chronic debilitating disease, it is expected that weight loss would be a major symptom and would therefore lead to substantial economical losses for households and abattoirs, including the flowering export abattoir industry.

The only detailed study on this subject based on field data was done by Meisinger in the 60s in East Germany (Meisinger 1969) who conducted a cohort study on 8000 animals over 5 years. His study showed that BTB caused a loss in meat production between 6 and 12 % in positive herds. These herds were defined as herds having at least 80% reactor animals.

In our study, we investigate if BTB caused by *M. bovis* has an impact on animal weight and carcass weight, therefore leading to economical losses for abattoirs. A further loss would include carcass condemnations (total and partial condemnations) due to BTB lesions.

Since abattoirs in Ethiopia lack entirely equipment such as scales and record keeping, we had to launch a two-step study:

In Luna export abattoir in Modjo (200 km South from Addis Abeba in the Rift Valley), which keeps records on animal information, we collect detailed data on live weight of animals using a scale and the animeter. Breed, sex and carcass weight are also recorded as well as TB-like lesions found by meat inspectors during slaughtering.

This export abattoir is buying animals from remote rural areas, feeds them up for two months before slaughtering them. Main breeds are the Danakil breed from the North, especially Tigray and the Boran breed from the South, particularly Borana region.

Once the use of the animeter is validated in the export abattoir, we will use it in the second step of the study, namely in the regional abattoirs, which lack weighing scales. In the following six abattoirs: Gondar, Jinka, Gimbi, Woldia, Butajira and Addis Abeba, lymph node lesions are also

collected in the frame of the project by Work Package 1 and analyzed for *M. bovis* (culture and spoligotyping), thus enabling the link between isolation of *M. bovis* and animal weight.

The study is however, complicated by the fact that animals may have parasites such as fasciola, which has an effect on weight as well. We therefore record presence of fasciola or any other pathological feature for each animal. We also record the season when the animal is being slaughtered, since seasonal variation may lead to seasonal animal weight changes (dry versus rainy season). The study done in Sellale (cf. above paragraph “productivity”) will help estimating the percentage of weight loss due to seasonal variation.

So far 870 animals have been weighed with the animeter in the regional abattoirs and 350 in the export abattoir.

The collection of data will continue for another six months.

15.4. Market analysis

Market data such as the price of live animals, meat, milk and other animal products are being recorded by means of questionnaires since the beginning of the study in September 2005.

Sources of information are: farms where cattle have been tested for BTB, household surveys, local markets, farms included in the productivity study, national statistics and probably later from Delphi panels if some information are missing or are incomplete. So far 836 data points have been collected. In addition a macro-economic analysis will be performed in 2009 (e.g. trade barrier costs, import/export, quarantine costs, inflation rate).

Because of the regional and seasonal variation of the Ethiopian market (e.g. dry versus rainy season, religious holidays), information are collected in all different sites of the project over the total duration of the project and at least twice a year. Due to these fluctuations, it will probably not be possible to calculate an average profitability of an intervention but rather a variation of profitability with minimums and maximums.

16. Approach to assess the economical impact of bovine tuberculosis in Ethiopia

Rea Tschopp^{1,3*}, Melese Getu², Abraham Aseffa³, Jakob Zinsstag¹

¹ Swiss Tropical Institute, Socinsstr. 57, CH-4002 Basel, Switzerland

E-mail rea.tschopp@unibas.ch

² Addis Ababa University, Ethiopia

³ Armauer Hansen Research Institute, PO Box 1005, Addis Ababa, Ethiopia

[* Corresponding author: E-mail: rea.tschopp@unibas.ch]

Abstract

Background: Bovine TB is prevalent in Ethiopian cattle and represents a serious zoonotic risk. However, extensive epidemiological data in the human and livestock sector are lacking

Objectives: Create a dynamic transmission model of disease between animal and human, as a prerequisite of economical analysis of the most profitable intervention in Ethiopia to control BTB.

Approach: Study on-going (2005-2010), epidemiological (prevalence, risk factors) and cost (human and livestock) data are collected in eight sites over a period of four years and fed into a compartmental transsectoral framework that simulates disease transmission. Different intervention scenarios will then be simulated in the model.

Conclusion: The most profitable intervention to control BTB in Ethiopia has to be assessed as well as the cost sharing scheme between public health and agricultural sector. It has been postulated that test and slaughter policy would have a negative economic impact in Ethiopia. Alternatives will be assessed.

Introduction

Tuberculosis is worldwide distributed and is one of the most important public health concerns especially in Sub-Saharan Africa. The disease is responsible for the death of more people each year than any other infectious disease: nearly 8 million new cases and 2 million deaths are reported annually (1). Nearly 2 million TB cases occur each year only in Sub-Saharan Africa, and the role played by cattle-linked *M. bovis* in the raising epidemic of tuberculosis, fostered by HIV in Africa is largely unknown (2).

Cattle are considered to be the main hosts of *M. bovis*. However, the disease has also been reported in many other species, including human beings, domesticated animals and wildlife (3). Although epidemiology of *M. bovis* is well documented in many countries and control and elimination strategies implemented since a long time in the developed world by a policy based on systematic slaughter of infected animals, meat inspection in abattoirs and milk pasteurization, BTB is still widely distributed and largely uncontrolled in developing countries, which are unable to support the costs of test-and slaughter policies and where BTB is often neglected and viewed as secondary to the huge problem posed by the more readily transmissible human disease caused by *M. tuberculosis* (4).

Very little systematic data on the extent of BTB either as a veterinary or as a human health problem are available in Ethiopia. BTB is endemic in cattle in Ethiopia; the disease has been reported from different regions (5, 6). However, the prevalence of the disease is not well established on a national level and omits large pastoralist communities in the country. Over 80 % of the Ethiopian population is rural and live in close contact with cattle in areas where BTB is not controlled at all. These communities are exposed to direct contact with their animals and consume unpasteurized milk and milk products as well as raw meat. In addition of being a zoonotic threat, BTB is also an economical and financial burden to society but its cost has rarely been assessed (10) and is largely unknown for Africa.

The aims of this study are to compile large scale and long term epidemiological field data on BTB to create a dynamic animal-human transmission model, which is a prerequisite to simulate intervention strategies to control the disease in Ethiopia. In addition, the impact of BTB is assessed in terms of public and private costs in both livestock and human health sector. Field

data collection is still ongoing. We present here the approach to estimate the cost of BTB to society and potential benefits of interventions.

Approach

A cattle-human compartmental transmission model will be developed to simulate the transmission of BTB between animals (wildlife & cattle) and humans (fig 1). Differential equations are formulated for each compartment and parameters estimated for each flow with field data. The parameters consist of demographic data (birth and death rates) and disease transmission data (contact rate, risk factors). BTB transmission can then be simulated as well as the effect of different intervention strategies.

Field data are collected over a period of four years from eight different geographical sites in Ethiopia: the Northern highlands (Gondar, Woldia), the Rift Valley (Butajira), the West (Gimbi), the South (Jinka/Hamer), the South-East (Bale Mountains) and Sellale. Following data are collected: field prevalence of BTB in cattle (intradermal PPD testing), abattoir prevalence of BTB, prevalence of BTB in humans, productivity parameters in cattle, cost of animal and animal products (regional, seasonal and annual variation), cost of TB in humans, risk factors of disease transmission and socio-anthropological parameters.

Demographic data (birth and mortality rate) in both humans and cattle are obtained from national statistics. In addition, cattle demographic data are collected from a four year productivity study, which follows 700 cattle in 21 farms as well as from a herd structure analysis carried out in the sites where cattle PPD is performed.

The burden of disease will be assessed for the livestock sector using BTB prevalence found in the field and in the abattoirs as well as from the impact on their productivity. The burden for the public health sector will be assessed in terms of prevalence of disease in humans, cost of the disease and DALY. Data on cost of the disease will be collected directly in hospitals and health centers as well as through a patient based household survey. Data includes out and in-patient costs, therapy costs, loss of income and coping costs.

Benefits of an intervention will be computed for three different sectors:

1. The agricultural sector: the benefit resulting from the avoided losses in animals and animal products.

2. The public health sector: the benefit resulting from the avoided costs to the public health sector.
 3. Private households with patients suffering from TB: the benefit resulting from (i) avoiding payment for treatment, (ii) income loss (= opportunity costs), and (iii) coping costs.
- The sum of all three benefits will be considered as a benefit for the society as a whole

Discussion

The disease has been shown in many countries to be an economical and financial burden to society linked with economic losses: loss of productivity of infected animals (e.g. reduced milk yields and meat production), animal market restrictions, human health costs etc....

In Argentina, the annual loss due to BTB is approximately US\$63 million (4). The socio-economic impact of BTB to the agriculture and health sector in Turkey has been estimated between 15 and 59 million US\$ per year (8). Even in some industrialized countries, where BTB has been eradicated by expensive schemes for control, eradication and compensation for farmers, the disease still has a major economic impact, mainly due to the existence of a permanent wildlife reservoir that reduces the efficiency of control strategies. In the UK, where badger and other wildlife such as deer remain an important source of infection for livestock, approximately £100 million is spent annually in efforts to control the disease. In Africa, the economic losses associated with livestock infected with BTB have not been examined sufficiently or has not been studied at all (9). Since agriculture remains the backbone of many African countries economy, there is an urgent need to control BTB (9). However, before introducing any control and eradication program in a country, profitability of control efforts have to be assessed (cost-benefit analysis of interventions).

Many zoonosis can only be eliminated if the disease is controlled in the animal reservoirs (10). A recent study on brucellosis in Mongolia has shown that mass vaccination of animals to reduce human brucellosis was a profitable intervention for the public health and agricultural sector if the benefits of the livestock sector are added and the costs shared between the public health and the agricultural sector (11). A similar approach will be chosen for the economical analysis of the impact of BTB in Ethiopia. Disease transmission models provide frameworks to simulate change in prevalence and disease transmission with and without interventions such as test and slaughter or vaccination (10). The disease outcome in animals and humans are needed for dynamic socio-

economic assessment of different intervention strategies. Economic analysis of an intervention to control BTB should include the impact on human health costs and the impact on livestock production (12).

BTB presents a serious zoonotic threat, since the disease is prevalent in cattle. Tadelle (1988) found that in Eastern Shoa (central Ethiopia) local breeds had much lower prevalence rate (5.6%) than exotic breeds (Holstein, 86.4%) (7). In high density herds maintained under intensive farming conditions, BTB prevalence was found as high as 50% in Holstein cattle at the Holetta National Insemination Centre (*personal communication 2007*). The disease burden is difficult to assess accurately since the intradermal test prevalence in cattle might not reflect the clinical stage of the disease (e.g. anergy in advanced stage of BTB; false positive and false negative reactions of the test) and might differ from cattle breed to cattle breed (different breed susceptibility of the intradermal test, e.g. Holstein *versus* local zebu) as well as between different management systems. The latter would imply that the burden should be estimated on the one hand for urban/periurban farming systems with intensive management and high milk production rate (urban milk market), and on the other hand for extensive farming system in rural areas of Ethiopia characterized by low milk production but important drought power of cattle for crop production.

An other difficulty faced by the current research is the low rate of *M. bovis* detection in human lymphadenitis cases. The reason of this low detection rate is still largely unknown (e.g. low prevalence of *M. bovis* in humans, sampling and/or laboratory technique) but it might affect the assessment of BTB cost to the public health sector. Alternatively, this cost can be assessed using data collected on patients with *M. tuberculosis* and then extrapolated for the impact of BTB.

Collection of detailed epidemiological data on BTB on a national level in Ethiopia over a large period of time is therefore a prerequisite before starting any control program within the country. The study of BTB requires a transsectoral approach since the disease has a complex epidemiology (animal-human-ecosystem) and affects different sectors of a country (public health, livestock, wildlife, ecology, economy and trade, tourism etc.)

The exact epidemiology of BTB is still largely unknown in Ethiopia, which is a country of extreme diversity (e.g. geography, ecosystem, culture and tradition, cattle breed with probably

different susceptibility to disease) and results from other African countries might not be applicable or replicated here.

Finally, from a cost and logistic point of view, it should also been investigated if the control of BTB in Ethiopia could be linked with those of other zoonosis (e.g. Brucellosis) existing in the country.

Acknowledgments

We would like to thank the Wellcome Trust (UK) for funding this study and the Armauer Hansen Research Institute (AHRI) for the logistical support.

References

1. Dye C, Scheele S, Dolin P, Pathania V and Raviglione MC. Consensus statement. Global burden of tuberculosis: estimated incidence, prevalence and mortality by country. WHO Global Surveillance and Monitoring Project. *JAMA* 1999; 282:677-86.
2. Daborn CJ. Bovine tuberculosis in the Tropics- a call to arms. *Proceedings of the VII. International Conference of the Institutions of Tropical Veterinary Medicine*, Yamoussoukro, Cote d'Ivoire. 1992; 1:359-368.
3. De Lisle GW, Bengis RG, Schmitt SM and O'Brien DJ. Tuberculosis in free-ranging wildlife: detection, diagnosis and management. *Rev.Sci.tech.Off.int.Epiz.*, 2002; **21**(2), 317-334.
4. Cosivi O, Grange JM Daborn CJ et al. Zoonotic tuberculosis due to *Mycobacterium bovis* in developing countries. *Emerg.Infect.Dis.* 1998; **4**:59-70.
5. Ameni G, Miorner H, Roger F & Tibbo M. Comparison between comparative tuberculin and γ -interferon tests for the diagnosis of bovine TB in Ethiopia. *Trop Anim Health Prod*, 1999. 32:267-276.
6. Asseged B, Lübke-Becker A, Lemma E, Taddele K. & Britton S. Bovine TB: a cross-sectional and epidemiological study in and around Addis Ababa. *Bull Anim health Prod in Africa.*, 2000.48,71-80.
7. Taddele K. Epidemiology and zoonotic importance of bovine tuberculosis in selected sites of Eastern Shoa, Ethiopia. 1988; *Master's thesis*, Freie Universitaet Berlin and Addis Ababa University, Debre-Zeit.
8. Barwinek F and Taylor NM. *Assessment of the socio-economic importance of bovine tuberculosis in Turkey and possible strategies for control and eradication*. Bakanliklar, Ankara, Turkey: Turkish-German Animal Health Information Project, General Directorate of Protection And Control. 1996
9. Ayele WY, Neill SD, Zinsstag J, Weiss MG and Pavlik I. Bovine tuberculosis, an old disease but new threat to Africa. *Int.J.Tuberc.Lung Dis.* 2004; **8**(8):924-937.
10. Zinsstag J., Schelling E., Roth F., and Kazwala R. Economics of bovine tuberculosis. In: *Mycobacterium bovis, infection in animals and humans*. Eds Thoen C.O., Steele J. H., Gilsdorf M.J. Blackwell Publishing, IOWA USA. 2006; 68-83
11. Roth F, Zinsstag J, Orkhon D, Chimed-Ochir G, Hutton G, Cosivi O, Carrin G and Otte J. Humans health benefits from livestock vaccination for brucellosis: case study. *Bull. World Health Organ.*, 2003; 81,867-876.
12. Zinsstag J, Roth F, Orkhon D, Chimed-Ochir G, Nansalma M, Kolar J and Vounatsou P. A model of animal-human brucellosis transmission in Mongolia. *Prev.Vet.Med.* 2005; June 10;69:77-95.



17. Setting bovine TB in the animal health context in Ethiopia: Animal health and husbandry practices

Working group report
(Compiled by R. Tschopp)

[* Corresponding author: E-mail: rea.tschopp@unibas.ch]

Published
Ethiopian Journal of Health Development, 2008; 22(special issue)

17.1. Major threats to the health of livestock and wildlife in Ethiopia

Ethiopian livestock is threatened by many infectious diseases, most of them being listed by the OIE (Office International des Epizooties). The list is very exhaustive. To name only some of them: Foot and Mouth disease (FMD), Chronic Bovine Pleuropneumonia (CBPP), Trypanosomiasis, Brucellosis, Anthrax etc. They are summarized into four categories depending on their degree of threat (livestock health/public health) and economic importance on a national and/or international level. Ethiopia has a monthly reporting system according to OIE formats; these reports are delivered to the federal Ministry of animal development. Diseases often do not occur uniformly throughout the country but are more often associated with different agro-ecological zones, e.g. pastoral areas in the lowlands; Highlands.

However, diseases are not the only threat to livestock and wildlife health. Poor husbandry practice, inadequate (qualitative and quantitative) nutrition due to overgrazing, recurrent droughts and lack of feed supplementation, lack of proper breeding system, absence of animal research, poor to inexistent veterinary service, poor market access and legal framework are all major threats to livestock health.

Wildlife in Ethiopia faces other challenges and has other priorities than livestock regarding its health risk. The steady population growth leads to an increased need of grazing land for their cattle (over 80% of the Ethiopian population is rural and linked to livestock). Deforestation and encroaching on habitat lead to habitat loss for wildlife, and forces wildlife to move to other areas. Besides diseases (e.g. rabies, anthrax), also climatic factors are a threat to the health of wildlife (e.g. drought, flooding) as well as lack of legal actions against poachers and, last but not least, the threat of genetic loss (e.g. interbreeding wildlife/domestic animals as described for the Ethiopian wolf).

Table 1: Ranking by the participants of the 5 majors threats to livestock and wildlife by decreased importance

Ranking of threats	Livestock	wildlife
1	Diseases	Human population growth
2	Feed/nutrition	Deforestation/overgrazing
3	Husbandry practices	Poaching
4	Breeds/breeding policy	Diseases
5	Animal health	Interbreeding

17.2. Impact of bovine TB on animal health in Ethiopia

Bovine TB belongs to List B of the OIE and has been frequently reported in Ethiopia in small scale studies. However, the magnitude of the impact of BTB on animal health in Ethiopia is still largely unknown. The disease is known to affect a large host range (cattle, goat, sheep, camel, humans, and wildlife), which makes its assessment difficult. Pathological lesions are seen in abattoirs during meat inspection, and the disease has been described in cattle. Up to 50% of dairy farms in Addis Ababa were shown to be positive. *M. bovis* was also isolated from humans. BTB is present but what is its impact? From the nature of the disease we can assume that it will have an impact on livestock production (weight, milk yield, fertility). BTB is a chronic debilitating disease, therefore affecting directly animal health and indirectly leading to loss of power traction, loss of carcasses and abattoir profits. The presence of BTB in dairy farms suggests that BTB might have an important impact on the dairy product market and development of a dairy milk industry (cross breeding program), not to forget its zoonotic importance.

Comparison of the pattern of BTB with that described in other Sub-Saharan countries

There is a crucial lack of information regarding BTB in Ethiopia. Some studies have been conducted but mostly focusing on the Highlands of Central Ethiopia (dairy farms located in Shoa region). It is therefore difficult to describe an association of BTB with particular geographical areas. Detailed information is missing and a lot of areas especially the pastoral lowland areas are not covered by adequate studies. The situation of BTB on a nationwide level is therefore largely unknown.

Existing Ethiopian publications show similarities with other African countries: in cattle, the individual prevalence of BTB has been shown to be low, whereas herd prevalence is high. BTB is more often found in intensive dairy farming in urban and peri-urban settings (association of BTB with particular farming practice). There is an association with wildlife at the interfaces. One major issue seems to be the laboratory isolation of *M. bovis* in humans, which is consistent with the problem encountered in other African countries. So far, *M. bovis* has been successfully isolated from humans mainly in Tanzania, Uganda and Ethiopia. Considering the prevalence described in cattle and the existence of risk factors of disease transmission to humans, the prevalence in humans should be expected to be much higher. The question arises whether there is a problem of detection in the laboratories.

17.3. Cost effective control of BTB in the context of developing countries

Collection of detailed epidemiological data on BTB in Ethiopia is a prerequisite before starting any large scale control program. In developed countries, BTB has been eradicated by means of costly test and slaughter programs. This approach is unthinkable in developing countries, which should opt for different, country adapted control strategies. An option would be to integrate BTB control with the control of other zoonotic diseases in order to cut costs.

From an animal health perspective, it is most probably not cost effective to launch a control/eradication program at this stage (e.g. cattle vaccination, test and slaughter, farmer compensation). However, measures can be readily taken on the human health sector in the absence of data on animal BTB: pasteurization of milk, strengthening of meat inspection, public health education and strengthening awareness about the transmission of BTB (handling of animals, consumption of raw animal products), and BCG vaccination of people.

17.4. Building capacity

A massive capacity building is needed in Ethiopia (technology, human resources, education). There is not enough research done on BTB and baseline information and knowledge on BTB are lacking (national prevalence, impact on productivity, geographical areas affected etc.).

The country lacks institutional capacity (research facilities), diagnostic capacity, surveillance capacity, and networking in the advocacy. Abattoir surveys and meat inspection should be strengthened. A priority is the education of communities, training of professionals and increase extension services. Existing national structures should be used and linkage between institutions dealing with BTB promoted. Also the animal service should become a single entity and not split under many divisions, which make it difficult to solve efficiently problems.

17.5. Conclusions & recommendations

Bovine TB is prevalent and is probably one of the major zoonotic diseases in Ethiopia; however the magnitude of its impact is largely unknown. Further studies on a national level should be carried out to investigate geographical areas affected, especially in pastoral areas, field prevalence and economical impact of the disease. Baseline epidemiological information is needed in order to assess the most cost effective intervention for Ethiopia. Education, and working capacity has to be strengthened and existing national structures should be used. Tackling a disease like BTB affecting both livestock and humans requires joint activities between the Ministry of Health and Ministry of Agriculture. Only then can a control strategy be developed.

If Ethiopia wants to take part in the international market, it has to make use of its own resources, its man power and great numbers of cattle herds. The husbandry system has to be assessed from a sustainability perspective (ecological sustainability) as well as from an economic perspective (economical profitability). The value and importance of indigenous breeds (part of the Ethiopian heritage) has also to be taken into consideration when compared with imported highly productive exotic breeds.

Human TB caused by *M. tuberculosis* is declared as an emergency by WHO, unlike TB caused by *M. bovis*. If more information is gathered for BTB and its zoonotic implication proved by hard field data, then there would be a possibility to approach the Global Fund for future BTB funding.

18. General discussion and conclusions

18.1. Epidemiology of BTB in Ethiopia

18.1.1. Multi-disciplinary approach

The strength of this study lies without doubt in its multi-disciplinary approach and integration with other studies carried out by different work packages of the project. This allows connecting various disciplines together, such as veterinary and human medicine, social science, economy, genetics, molecular biology, field and molecular epidemiology, ecology, and finally the involvement in control strategies and policy making.

The advantages are also the ability to share logistics and resources and thus to cover numerous study areas. Study areas were chosen depending on the existence of an abattoir and a hospital in the area so to allow the essential epidemiology linking animal and human results.

18.1.2. Prevalence of BTB in cattle

Previous studies have shown that BTB is endemic in Ethiopian cattle with some prevalence variations depending on cattle breeds (Ameni et al., 2003). However, these studies were carried out in central Ethiopia, where there is a high concentration of dairy animals, intensive farming and exotic breeds (Holstein Friesian). Ameni et al. (2007) found individual prevalences reaching 11.6% in zebu grazing with exotic breeds; in the exotics prevalence was as high as 22.2%.

In order to advise on any future control strategies at a national level, it was important to know the situation regarding BTB in cattle in rural areas that are characterized by extensive management of local zebu breeds. Central Ethiopia is important in terms of milk supply for the big cities; however, over 80% of the Ethiopian population is rural and dependent on a daily basis on their livestock for animal traction, meat, hides, manure and milk. It was therefore an important aspect of this study to assess the prevalence of BTB in cattle from these more remote rural areas.

In contrast to previous studies from Central Ethiopia, we found an apparent BTB reactor prevalence of less than 1%. Our results were similar to those found for instance in Tanzania, where Cleaveland et al (2007) found an overall individual prevalence of 0.9%. This is low compared to other African countries such as Ghana, Uganda and Chad, where reactor prevalence was as high as 13.8% , 6% and 17% respectively (Bonsu et al., 2000, Bernard et al 2005,

Schelling 2002). In common with all these countries however, is the high herd prevalence (Ameni et al., 03, Cleaveland et al., 2007, Bonsu et al., 2000, Bernard et al 2005). It is actually surprising that individual prevalence is not higher considering the fact that cattle are kept together during grazing, around water points, and during the night inside the people's houses. In Ethiopia where grazing land is scarce, overcrowding on pastures is great, but still individual animal prevalence is low. Interestingly was also the fact that when considering neighboring villages, some would be negative whereas one would have many positive animals (a so called hot spot village). Although these animals move between villages and use communal pastures, they do not transmit the disease to cattle from other villages. So infection rates between animals seems to be low in rural settings, even when animals are kept in an overcrowded way; this is the opposite of what is found in intensive dairy farm practice. So what makes an animal become positive in these rural areas? And what is the reason for this very low transmission rate between animals? The study described in chapter 11, showed that no risk factors prevailed in our study sites for BTB positivity in cattle, except for the following factors: purchasing of a positive animal and the presence of livestock other than cattle in the herd.

As mentioned earlier, cattle positivity is much higher in Central Ethiopia. The discrepancy in prevalence with the one we found in our study raised some concern that the skin testing conducted may have been flawed (e.g. sampling bias, bias linked with the testing method or with the quality of PPD reagents). However, abattoir prevalence carried out by WP1 in the same areas found similar figures, with an overall abattoir prevalence of 0.8% (unpublished data), thus providing an independent estimate to support our field testing on live animals. Furthermore, in order to minimize the above mentioned bias, the same person performed all CIDT each year for three years in the same villages. This was done during the same season, with PPD reagents coming from the same manufacturer and we found similar results each time.

Nonetheless we observed variation in prevalence in our various study sites as described in chapters 10 and 11.

What are the possible reasons for such differences in skin positivity between regions?

1) Breed and breed susceptibility: Although less than 1% of the total breeds are exotic and cross-breeds (CSA 2008), they are mostly concentrated in Central Ethiopia around large urban areas (e.g. Addis Abeba, Nazareth, Debre-Zeit, Debre Berhan). Ameni et al (2007) found in the WP3 study a statistical difference in BTB prevalence between exotic breeds, their cross-breeds and traditional zebu. In chapter 10, we also tried to assess the impact of breed on CIDT results. Statistical analysis was not robust enough to allow any definitive conclusion, since we tested only an average of 1.1% cross-breeds. However, results suggested that there might be some variation even within the zebu class when differentiating animals by proper breed. Genetic analysis on breed susceptibility carried out by WP4 (Trinity College, Dublin, Ireland) will hopefully also shed more light on this question. Are exotic breeds and their cross-breeds more at risk from BTB, and if so are they a risk factor for disease transmission to other cattle breeds? Is there also a variation in susceptibility amongst the different zebu types found in specific regions in Ethiopia, e.g. Boran breed in the South, the Fogera breed in Gondar area, the Afar/Danakil breed in the North-East, the Arsi breed in Central Ethiopia.

2) Farm management: intensive versus extensive farming

3) Involvement of other Mycobacteria spp. We saw in our study that *M. avium* reaction in cattle showed big variations between regions. How do environmental mycobacteria influence *M. bovis* infection? Presensitization with environmental Mycobacteria was shown to mask *M. bovis* infections and thus lead to false negative skin results (Doherty et al., 1996, Amadori et al., 2002, Walravens et al 2002, Alvarez et al., 2008). Paratuberculosis (Johne's disease), a chronic granulomatous enteritis disease of bovids caused by *M. avium subsp paratuberculosis* is very likely to be prevalent in Ethiopia, unfortunately, no published studies on paratuberculosis are available.

4) Presence of other concomitant diseases highly prevalent in some regions (e.g. trypanosomiasis, contagious bovine pleuropneumonia-CBPP). Diseases, especially the chronic type ones, would impair the animal immunity and affect the skin test reaction. National veterinary statistics on disease prevalence are very scarce especially from remote areas. We know for instance that trypanosomiasis is highly prevalence in some regions of Southern Ethiopia (Miruk et al., 2008), but no studies have been done further South, in South Omo for

instance. However, discussion with local veterinarians and personal observations highlighted the problems of these cattle diseases, which seemed to be highly prevalent in some of our study sites (chapter 13), particularly those areas where veterinary services are poor to non-existent (e.g Hamer or Bako Gazer region).

5) Parasitic load. If access to veterinary services was provided, regular cattle deworming was done by only 1/3 of the farmers (chapter 15). High parasitic load, which in Ethiopia is likely to be aggravated by the fact that livestock are overcrowded on communal pastures, as seen in chapter 15, can lead to severe loss in body weight and is likely to impair immunity in cattle as well. In chapter 11, we observed that cattle that were not regularly dewormed were nearly twice at risk for being a positive reactor, than cattle that were dewormed. Studies on the effect of endoparasites (e.g fasciolosis) on BTB prevalence are lacking. Monagham et al. (1994) stated that malnutrition was leading to false negative skin test results. In contrast, Doherty et al. (1996) showed that malnutrition and severe loss of body weight did not affect sensitivity of the skin test.

6) Different risk factors of disease transmission in different regions were related to culture/tradition, farm management, presence of other livestock than cattle, presence of wildlife, cattle density in the region, and environment (climate, soil type and vegetation).

In conclusion, this thesis suggested that the assessment of BTB prevalence has to be carried out with caution. Many factors are likely to influence CIDT results (e.g. testing methods, bias inherent to the PPD reagents, study regions, concomitant diseases, body condition of animals that can be influenced by seasonal droughts or parasitism, and cattle breeds present in the study areas).

Knowledge of these different regional prevalences is important for future control program implementation. Although final control programs can only be elaborated once the cost of BTB to the traditional livestock sector has been assessed, our study gave some important baseline information for such possible programs. With a cattle population of over 43 million in the Highland alone (CSA 2008), it is evident that no control programs can logistically and financially involve the entire cattle population, regardless of whether the strategy involves test and slaughter, or vaccination of animals. Test and slaughter is the common strategy in most

developed countries, whereas vaccination of cattle has been carried out in Malawi (Ellwood and Waddington 1972). Results gathered during this thesis suggest that two different strategies could be implemented in parallel:

- 1) Test and slaughter program in rural areas with very low prevalence (< 1%)
- 2) Vaccination of dairy cattle in urban and peri-urban settings with higher BTB prevalence

In addition, animal movement should be controlled and/or restricted. There are well known cattle routes from rural areas into peri-urban areas (ILRI 2007; Appendix 5). Care should be taken with movement of animals from a known positive region into a naïve or know negative region. Therefore it is also important to know the prevalence of disease in the different regions of Ethiopia.

18.1.3. The case of Boran cattle

The Boran is a zebu breed maintained by pastoralists in Southern Ethiopia and contiguous areas of Kenya and Somalia. They are known to be well adapted to harsh environments and can withstand water stress. In addition, they have good milk and meat productivity compared to other zebu breeds, which gives them a good balance between productivity and general resistance. During this PhD thesis, we noticed an increase in the number of Boran cattle throughout the country. For instance, farmers in Butajira area received Boran cattle from the Productive Safety Net Programme (PSNP), which was initiated by the government and donors (DFID, World Bank) in 2005 in order to secure the livelihood of rural households in the long term and to break the dependency on food aid (Devereux et al., 2006). To our knowledge no published data exist on the BTB status of Boran cattle. A study has been started in the Borana area as part of this project, and will hopefully give more information on BTB in this cattle breed. Are Boran cattle more or less at risk for BTB? Is there a risk of spreading the disease over the country with such programmes? Due to very small numbers of Boran cattle in our study sites (N=3), we could not assess in chapter 10 the effect of this breed on CIDT positivity.

18.1.4. The case of Holstein cattle

Dairy cattle are increasing in urban and peri-urban areas (CSA 2008) in order to supply the growing demand for milk. There is also an increasing flow of high productive Holstein cattle from urban centers into rural areas, as seen for instance already in Sellale and Meskan. This flow shows a radiating pattern from Addis Abeba over the years. It is possible that the prevalence increase we observed in Meskan is due to the increased number of Holstein and cross-breeds coming from Addis Abeba. WP3 showed a high prevalence of BTB in these exotic breeds, and a future challenge will be the control of the dissemination of the disease by such routes as selling them to rural farmers, or via artificial insemination.

18.1.5. Cut off used for skin test result evaluation

More and more debates about which cut-off should be used in the evaluation of skin test results have been raised these last couple of years. The official standard cut-off defined by the Office International des Epizooties (OIE 2004) is 4 mm, meaning that positive reactors are defined as an animal having a reaction at the bovine site of injection 4 mm bigger than the reaction at the avium site. Doubts in the scientific world rose as whether this cut-off was appropriate in the African context. Recent publications (Ameni et al., 2008, Müller et al. 2008) suggested that in Africa a cut-off of 2 mm would give better sensitivity without loss of specificity. Our study supported the idea that different cut-offs should be used depending on the prevalence prevailing in specific areas, and that flexibility should be allowed as to which cut-off should be used. However, this flexibility may also lead to difficulties in comparing BTB prevalence results between different studies and between different countries. More research is warranted in this field in order to find the best testing option for the African context, and to make the method officially recognized by the OIE.

18.1.6. Wildlife-livestock-human interface

Zoonotic diseases are commonly found at the human-livestock-wildlife interface and wildlife was shown to play an important role both as reservoirs and spreaders of many diseases (appendix 2). An important contribution of this PhD study was the assessment of BTB in wildlife, at the human-livestock-wildlife interface. No studies have been done on this topic in Ethiopia. Our preliminary results suggested that BTB is not prevalent in wildlife; this is based on results from culture, which is generally recognized as the gold standard method. However, so far we only have results from a very small population, and more animals have to be sampled.

More samples are also needed to try to validate the rapid test (RT) for serology. So far, the test has been validated for only a few wildlife species (e.g. red deer, wild boar, badger and possum) and none of them are from Africa (Lyashenko et al., 2008). It is intriguing that the serology prevalence in our study was high (23%), but none of the cultures yielded Mycobacteria from the MTC-complex. However, serology and culture has only been done in parallel in a few animals, and it is possible that some of the sero-positive animals in which no culture was performed, did indeed have BTB. So, on the one hand the statement “no BTB in wildlife” has to be confirmed, and on the other hand the rapid test has still to be validated for African wildlife species. From a conservation point of view, our results showed sero-positive wildlife belonging to rare endemic species such as the Mountain Nyala (*Tragelaphus buxtoni*) and the elephant (*Loxodonta africana*), as well as in the grass-rats which are the prey of the Ethiopian wolves (*Canis simensis*).

Such a quick test is valuable to field wildlife veterinarians and conservation authorities to rapidly, easily and cheaply screen animals without having to kill them for tissue culture. Screening of various mammal species may become important in the future when it comes to translocations of wild animals from one area to another, whether to facilitate the survival of endangered species, or whether to remove so called “problem animals” out of the “problem zone” (e.g. large carnivores/human conflicts often caused by the encroaching of humans and their livestock into wildlife habitat). In such a scenario, knowledge of the prevailing TB status will be essential to prevent the introduction of the disease into previously-negative territories.

18.1.7. Zoonotic transmission

In the literature, BTB caused by *M. bovis* is described as being a potential zoonotic threat through consumption of raw animal products (Cosivi et al., 1998, Ayele et al., 2004). In the developed countries, human cases have drastically decreased with the implementation of national control programs which eradicated or controlled the disease through test and slaughter of cattle, and pasteurization of milk. However, human cases of BTB are more and more frequently reported in those countries in recent years. Apart from elderly people suffering from a reactivation of latent BTB acquired prior the above mentioned control strategies, the disease is also seen in immune compromised people (e.g. HIV/AIDS, diabetes mellitus), people consuming raw milk and milk products, such as cheese imported from countries where BTB is still prevalent and where there is no pasteurization (Bouvet et al., 1993, Dankner et al., 2000, Hancox 2002, Gibson et al., 2004, de la Rúa et al., 2006, Hlavsa et al., 2008).

BTB is widely distributed in sub-Saharan Africa and control of the disease in cattle, as well as pasteurization schemes in rural areas, is poor to non-existent (Ayele et al. 2004). People live in close contact with their livestock and consume raw milk and milk products; it is therefore very likely that they might get infected with the pathogen.

One important aim of this study was to show the transmission of *M. bovis* between animals and humans in close collaboration with Work package 2 of the BTB project. This included the following studies: 1) culturing and typing fine needle aspirates (FNAs) from patients with lymphadenitis, 2) conducting farmer surveys, in which risk factors for disease transmission were assessed on a farm level. These studies were focused in areas where BTB positive cattle had been identified (chapter 11), specifically targeting villages where PPD positive cattle were identified during the thesis work, and taking FNAs from farmers with lymphadenitis directly on-site with a medical research team. The latter study has so far been conducted in Butajira and final results are pending. Out of 750 samples from lymphadenitis patients cultured in AHRI, none yielded *M. bovis* (unpublished data). Furthermore, no *M. bovis* was isolated by the culture of milk from BTB positive cattle from Holetta farm (unpublished data, AHRI). In our study none of the classical risk factors known from the literature for BTB in humans (consumption or raw

animal products, close contact with animals) were significantly associated with TB cases in households.

Are the risks to humans of BTB in Ethiopia really “negligible”? Or is there a problem related to the isolation of *M. bovis* in the laboratory? In Tanzania where similar environmental and farming practices prevail, and where BTB in cattle population is also endemic, *M. bovis* was repeatedly isolated from humans and raw milk, and thus shown as being a risk factor of disease transmission (Kazwala et al., 1998). On the other hand, studies carried out in Chad did not isolate any *M. bovis* from humans, although BTB prevalence in cattle was high and people were consuming raw animal products (Diguimbaye et al., 2004).

What are the possible explanations for failing to isolate *M. bovis* from human patients in Ethiopia?

- 1) Low BTB prevalence in cattle in rural areas, as shown in this thesis.
- 2) Sampling technique: is FNA (fine needle aspiration) a good enough method? Would excision biopsies of lymph nodes be a better method to collect more tissue material for culture? This was done in Uganda, for instance, by Oloya et al (2008).
- 3) Laboratory failure: technical flaws during the culture process, for instance over-decontamination that would kill *M. bovis*.
- 4) *M. bovis* strain virulence for humans
- 5) Genetic make up of some Ethiopian ethnic groups which could lead to decreased susceptibility to infection.
- 6) Other mycobacterium such as environmental Mycobacteria. Our studies carried out in cattle and wildlife suggested a high burden of non-tuberculous Mycobacteria. Not much is known about their composition in Ethiopian patients and how they relate to each other. Environmental Mycobacteria have been isolated from TB and/or adenitis patients (Mfinanga et al., 2004, Diguimbaye et al., 2006, Perez-Martinez et al. 2008) and little is known about their interaction with pathogenic Mycobacteria. Could they have a protective effect against *M. bovis*?

18.1.8. Impact of the disease on animal traction

Due to its chronic debilitating nature BTB causes a direct health impact on cattle, and affects their productivity potential, with reduced milk yield and meat production (Meisinger 1969), which can lead to major economic losses for a country.

Ethiopia has a cattle population of 43 million heads (CSA 08). High productivity exotic (Holstein Friesian) and their cross-breeds only account for 0.07% and 0.58% of the total cattle respectively. The rest (99.3%) is composed of traditional zebu breeds characterized by very low productivity. Dairy farms with exotic and cross-breeds are mainly found around the capital city and other major regional cities, in order to supply the increasing demand for milk in the urban populations. National statistics show that there are around 6 million dairy cows in the country and the milk production for 2007 was 2.63 billion liters. In intensive dairy farms in peri-urban areas, BTB might well have an impact on milk production. This project is planning to investigate the amplitude of this impact in dairy farms around Addis Abeba, and results will be available at the end of 2009.

However, in rural areas, the situation might well be different and the impact of BTB might take another dimension. A peculiarity to this country is its cattle herd structure. The proportion of males in the overall herd structure is very high. Official statistical figures state 44.6% of the total population is made out of males (CSA 08); in our study (chapter 15) we found even a higher percentage, with males accounting for 52% of the total herd. One quarter of the males were oxen (22%). In rural areas of the Highlands, females are therefore kept in order to produce the next male generation rather than for milk production. Males are used for reproduction, and potential oxen.

The reason for keeping so many males is, as explained in chapter 15, intricately linked with the agriculture system in place in the Highlands. All ploughing, harvesting and threshing is done using animal traction. The more animal traction a farmer possesses, the more land he can plough and the more he can harvest. Poverty is therefore also linked with the number of oxen that a farmer has. Over 80% of the land is cropping land (CSA 08) and oxen are mainly used to do all field work and cereal production.

A disease affecting draft animals will therefore have a major impact not only on the animal itself, but on the agriculture sector as a whole and lead to poverty and famine. This has already been illustrated by the Rinder Pest outbreak in the 19th century, which led to severe famines on the continent because fields could not be ploughed or harvested anymore (Schwabe 1984). The question arises as to what extent oxen are affected by BTB infection, and how the disease affects their daily work. Farmers, who were questioned about the working capacity of their oxen and about any changes noticed over the last year, did reply in terms of animal weakness and fatigue. They commented that they had to exchange the animal more frequently with another ox to pull the plough, and that the animal needed to be pushed more since it was reluctant to do the work after a couple of hours in the field (chapter 10). These are all subjective answers and the true daily “loss of traction” is difficult to measure unless these animals are followed over time as they work in the field, which is logistically impossible. Nonetheless, farmers’ answers are a good hint that traction animals are very likely to be affected, if infected with BTB, thus having major consequences on the work they do in the crop fields and finally affecting the crop yields as well. Our results of chapter 10 also showed that oxen are twice at risk for being positive reactors; this result was highly statistically significant.

18.1.9. Increasing awareness of the disease

One achievement of this PhD study was also to promote increased public awareness of BTB on-site at farm and village level, as well as in National Parks. The PPD cattle study included over 2000 farmers in a total of 80 villages in 5 Woredas. The results from Bale and Hamer (South Omo) were not included in chapter 10. The Bale results are shown in chapter 11 and those from Hamer in chapter 13. Interviews, focus group discussions and cattle testing were conducted in the first visit. During the second visit, 72 hrs later, cattle skin reactions were assessed, and deworming tablets (Albendazole) in the Highlands or VeridiumTM (Isometamidium chloride hydrochloride) in South Omo, which is used against trypanosomiasis, distributed to farmers as compensation/incentive (appendix 6). A final discussion took then place with the farmers in each village where, with the help of local translators, we discussed about the disease, the agent, the symptoms of the disease, and the transmission between animals and humans. Each farmer with positive animals was told so and available options discussed (boiling of the milk, animal separation, slaughtering). We also answered questions from farmers regarding BTB, and advised

on seeking medical treatment when farmers showed signs of TB (pulmonary symptomatic or adenitis). Each year, three times in a row for certain villages, we repeated the same discussion. Changes in awareness were observed in certain villages after each yearly visit, which was especially striking at the third visit. A farmer from Butajira told us proudly that now his family and his neighbors were always boiling the milk before consumption. This experience showed us that awareness can be increased on a house-hold level through repeated discussions

We also trained 50 scouts in three National Parks or sanctuaries (Awash, Senkele and Yagundi Rassa) to recognize BTB lesions in the course of a post-mortem. Power-Point lectures on BTB were given on-site (appendix 1).

However, one drawback of increased awareness of the disease, as personally seen in the field, could well be that farmers who know the positive status of their animals would get rid of them as soon as possible, not by slaughtering but by selling them, which could therefore contribute to the spread of the disease.

18.2. Economical impact of BTB

We want to keep this paragraph brief since only the approach of the economical analysis has been described in this thesis (chapter 16, 17). The studies and final analysis will go beyond this PhD thesis

1) Economical impact of BTB on the public health sector

So far the question of the burden of BTB for the public health sector could not be answered, since *M. bovis* was not isolated from human patients. However, studies will continue for another year.

2) Economical impact of BTB on the livestock sector

Knowledge of prevalences of BTB in cattle is essential to help assessing the economical impact of the disease in the livestock sector. In addition, productivity studies started during this thesis work, and carried out in Sellale and Butajira, will give us baseline productivity parameters for

cattle kept under traditional management. In addition the burden of BTB in abattoirs is being assessed in collaboration with WP1. Pooling of these data will help in assessing the impact of BTB on parameters like milk productivity, and weight loss in cattle. Abattoir studies will also help assess the financial losses due to carcass confiscation and decreased exports of meat. The Horn of Africa has a long history of exporting live animals to the Middle East. However, exports dropped abruptly following a ban imposed by Saudi Arabia and other Middle Eastern countries in 1998 after outbreaks of Rift Valley Fever in The Horn of Africa. The loss caused by the ban was estimated to be as high as US\$ 100 million (www.regoverningmarkets.org). The ban was lifted in 2003 and an FAO project assisted in establishing an Export and Certification of Livestock for Export (EXCELEX) in Ethiopia and Somalia (FAO 2005). Live animals, especially small ruminants, are exported via Djibouti for the Gulf market. However, in the meantime the country lost some export markets in the Middle East due to the ban, and had to shift to new markets for meat export such as Egypt and Congo Brazzaville (personal communication from export abattoirs). The animals are slaughtered and packed in export abattoirs based in Nazareth, Debre-Zeit and Modjo.

A disease such as BTB can therefore have a severe effect on exports due to 1) reduced meat production (loss of weight gain in live animals; carcass condemnation due to BTB lesions) and to 2) export bans or restrictions.

In addition, in case of a ban due to disease, the large surplus of animals will lead to overstocking, overgrazing of already scarce grazing land, and further land degradation, which in turn will affect livestock productivity. As seen in chapter 15 of this thesis, Ethiopia is faced with overpopulation of livestock and unsustainable grazing. As described in the chapter, few solutions exist to solve the problem, but increasing export rates of livestock that are not directly involved with cropping and milk production, may help in reducing the pressure of animals on natural resources.

18.3. National intervention strategies to control BTB

Data collected during this PhD thesis will ultimately be fed into the compartments of an animal-human SIR (Susceptible-Infected-Recovered) transmission model. Additional data will flow in from WP2 (data on human BTB) and WP1 (data on abattoir prevalence) to complete this model. Such a model is a basis for assessing different intervention strategies that could apply to Ethiopia. Information gathered from the pending economical analysis, together with the transmission model, should help in assessing the most profitable intervention for the country. Conclusions drawn from this PhD thesis suggest that we will probably have to run two different models, one for the rural setting with low animal prevalence and low risk factors of disease transmission, and one model for the urban setting characterized by high prevalence and probably high economical impact of the disease in the intensive livestock sector. Such mathematical models have already been used, for instance in the UK, to investigate the effect on cattle BTB by culling badgers as intervention strategy (Cox et al., 2005).

18.4. Messages and recommendations of this thesis

- 1) This thesis provided baseline epidemiological and economical information to elaborate ultimately an animal-human transmission model and thus to assess most profitable intervention strategies for the control of BTB in Ethiopia.
- 2) We showed that BTB has a low endemicity in zebu cattle (<1%) in rural areas but with regional variation of prevalences. In addition, prevalence in rural areas was shown to be much lower than in peri-urban and urban areas where exotic breeds had higher BTB prevalence (WP3). Movements of high productive exotic cattle from urban areas into rural areas might therefore be a risk of spreading the disease throughout the country.
- 3) True prevalence of BTB was in some regions impossible to assess since the apparent prevalence was very low. In addition sensitivity and specificity of the skin test has only

- 4) been evaluated for Central Ethiopia characterized by high numbers of Holstein and may not be applicable for zebus in rural areas.
- 5) Results from the comparative skin testing in cattle have to be interpreted with caution since they can be influenced by technical bias linked with the testing method itself, by the quality of the PPD reagents and by factors influencing the immunity of the animals (e.g. parasitism, malnutrition, stress, infectious diseases such as trypanosomiasis or CBPP) or by Mycobacteria other than from the MTC (e.g. paratuberculosis) that can impair the test results for *M. bovis*. Our study highlighted that animals in good body condition were more at risk for being positive reactors because probably their immune system is not impaired, whereas emaciated animals are more likely to be in an anergy state.
- 6) *M. avium* reaction was described in all Woredas but with clear regional variation. Woldia had the lowest prevalence whereas Meskan had the highest prevalence.
- 7) *M. tuberculosis* has been isolated in cattle (WP1). It is therefore possible that in our study also cattle infected with *M. tuberculosis* could have reacted on the skin test.
- 8) Purchasing cattle, presence of livestock other than cattle and older cattle were a risk factor for having BTB positive cattle in a herd. This suggests that avoiding keeping or buying old animals could help controlling the disease. On the other hand, oxen that are kept for cereal cropping are in general older than 10 years. Males are usually castrated when they are between 5-7 years old.
- 9) None of the “classical” risk factors were a significant explanatory variable for BTB positivity in cattle (e.g. herd size, keeping cattle inside housings, communal grazing)
- 10) None of the risk factors associated with possible transmission of disease between BTB positive cattle and humans (e.g. raw milk consumption, close contact with cattle) were a significant explanatory variable for TB occurrence in humans

- 11) This thesis did the first wildlife survey of BTB in Ethiopian wildlife. *M. bovis* was so far not isolated in any wildlife samples, although the cattle-wildlife interface is intensive. However, serology was as high as 23% and could suggest that BTB exists in some wildlife species. Flagship endangered species (e.g. Mountain Nyalas, and Ethiopian wolves) might be at risk for BTB.
- 12) A high proportion of non-tuberculous Mycobacteria were isolated from wildlife. The isolation of some of these agents (e.g. *M. terrae*) also from the mediastinal lymph nodes suggests another route of transmission than by environmental contamination (e.g. fodder, water) and suggests a possible emergence of Mycobacteriosis with agents other than *M. bovis* or *M. tuberculosis*.
- 13) BTB may affect primarily animal traction rather than milking cows in rural areas and therefore have an impact on cropping and cereal yields, which in turn might influence the severity of future famines in the country. Oxen were shown to be twice at risk for being reactors than females.
- 14) Grazing land was shown to be insufficient to support the high livestock population. This will lead to increased conflicts, and encroaching on wildlife habitat, thus intensifying further the human-livestock-wildlife interface
- 15) Herd structure analysis highlighted that half of the Ethiopian herd is composed of males (bull and oxen). Oxen account for 22% of the herd. Farmers need to maintain a minimum herd size in order to secure permanently draft animals to work in the fields. Females are therefore mainly kept to produce oxen and breeding program aiming at increasing animal productivity, thus giving the possibility to reduce the number of animal is therefore not an option. Surplus of animals (e.g. males that are not used in the field) can only be eliminated by increased slaughtering/export. Export bans due to diseases will therefore have a long term ecological impact as well due to overstocking, increased land degradation and loss of biodiversity.

The results of this thesis led to new research questions, among them:

- What are other potential risk factors of disease transmission between animals? The role of the environment has to be assessed more in details as well as the role of Holsteins as risk factors for spreading the disease.
- Is there different cattle breed susceptibility amongst the various traditional zebu cattle (e.g. Boran, Fogera, Kola, Arsi)?
- Why do we observe a high inter-regional variation in BTB prevalence in cattle?
- Does altitude not affect the prevalence of BTB, although this is well described for human TB? We have found no differences in a country which large altitude differences between regions (from sea level to over 4000m),
- What are the risk factors of disease transmission to humans? Is BTB a “negligible” zoonosis in Ethiopia?
- What is the role of environmental Mycobacteria? How do they interact with tuberculous Mycobacteria?
- What is the prevalence of Paratuberculosis in the country? How does the disease interact with the skin test?
- What is the role of small ruminants that are herded with cattle and are also kept inside the owner’s house at night?
- Is the high human burden of *M. tuberculosis* a risk for their cattle. How does this human-animal transmission occur? How do *M. tuberculosis* infected cattle react to the skin test?

References

- Alvarez J., de Juan L., Bezos J., Romero B., Sa´ez J.L., Reviriego Gordejo F.J., Briones V., Moreno M.A., Mateos A., Dominguez L., Aranaz A. 2008. Interference of paratuberculosis with the diagnosis of tuberculosis in a goat flock with a natural mixed infection. *Veterinary Microbiology* 128: 72–80
- Amadori M., Tagliabue S., Lauzi S., Finazzi G., Lombardi G., Teloa P., Pacciarini L., Bonizzi L. 2002. Diagnosis of *Mycobacterium bovis* infection in calves sensitized by Mycobacteria of the avium/intracellulare group. *J. Vet. Med.* B49: 89-96.
- Ameni, G., Amenu, K., Tibbo, M., 2003. Bovine tuberculosis: prevalence and risk factor assessment in cattle and cattle owners in Wuchale-Jida district, Central Ethiopia. *The International Journal of Applied Research in Veterinary Medicine.* 1 (1): 1-13
- Ameni, G., Aseffa, A., Engers, H., Young, D., Gordon, S., Hewinson, G., Vordermeier, M., 2007. High prevalence and increased severity of pathology of bovine tuberculosis in Holsteins compared to zebu breeds under field cattle husbandry in Central Ethiopia. *Clin.Vaccine Immunol.* 14(10): 1356-1361
- Ameni G., Hewinson G., Aseffa A., Young D., Vordermeier M., 2008. Appraisal of interpretation criteria for the comparative intradermal tuberculin test for the diagnosis of bovine tuberculosis in Central Ethiopia. *Clin.Vaccine Immunol.* 15(8): 1272-1276
- Ayele,W.Y., Neill, S.D., Zinsstag, J., Weiss,M.G., Pavlik,I., 2004. Bovine tuberculosis: an old disease but a new threat to Africa. *Int.J.Tuberc.Lung Dis.* 8: 924-937.
- Bernard F., Vincent C., Matthieu L., David R., James D. 2005. Tuberculosis and brucellosis prevalence survey on dairy cattle in Mbarara milk basin (Uganda). *Preventive Veterinary Medicine* 67: 267–281
- Bonsu O.A., Laing E., Akanmori B.D. 2000. Prevalence of tuberculosis in cattle in the Dangme-West district of Ghana, public health implications. *Acta Tropica* 76: 9–14
- Bouvet E., Casalino E., Mendoza-Sassi G., Lariven S., Vallee E., Pernet M et al. 1993. A nosocomial outbreak of multi-drug resistance *Mycobacterium bovis* among HIV infected patients. A case-control study. *AIDS*, 7: 1453-60.
- Cleaveland, S., Shaw,D.J., Mfinanga,S.G., Shirima, G., Kazwala,R.R., Eblate,E; Sharp,M., 2007. *Mycobacterium bovis* in rural Tanzania: risk factors for infection in human and cattle populations. *Tuberculosis.* 87(1): 30-43
- Cosivi,O., Grange, J.M., Daborn,C.J., Raviglione,M.C., Fujikura,T., Cousins,D., Robinson,R.A., Huchzermeyer,H.F., de Kantor,I., Meslin,F.X., 1998. Zoonotic tuberculosis due to *Mycobacterium bovis* in developing countries. *Emerg.Infect.Dis.* 4(1): 59-70

- Cox D.R., Donnelly C.A., Bourne F.J., Gettinby G., McInerney J.P., Morrison W.I., Woddroffe R. 2005. Simple model for tuberculosis in cattle and badgers. *Proc Natl Acad Sci*; 102(49): 17588-93.
- Central Statistical Agency (CSA 2008), Agricultural sample survey 2006/07, Vol II: Report on livestock and livestock characteristics. Statistical bulletin 388, Addis Abeba, Ethiopia
- Dankner M., and Davis C.E., 2000. *Mycobacterium bovis* as a significant cause of tuberculosis in children residing along the United-States-Mexico border in the Baja California region. *Pediatrics*, 105(6)
- De La Rua D.R., Goodchild A. T. , Vordermeier H. M. ; Hewinson R. G. ; Christiansen K. H. ; Clifton-Hadley R. S. 2006; Ante mortem diagnosis of tuberculosis in cattle : A review of the tuberculin tests, γ -interferon assay and other ancillary diagnostic techniques. *Research in Veterinary Science*, 81(2): 190-210
- Doherty M.L., Monaghan M.L., Bassett H.F., Quinn P.J., William C. Davis W.C. 1996. Effect of dietary restriction on cell-mediated immune responses in cattle infected with *Mycobacterium bovis*. *Veterinary Immunology and Immunopathology*. 49: 307-320
- Devereux S., Sabates-Wheeler R., Tefera M., Taye H. 2006. Ethiopia's productive safety net programme (PSNP)-Trends in PSNP transfers within targeted households. Final report. Institute of Development Studies (Sussex, UK) & Indak International (Addis Abeba, Ethiopia).
- Diguimbaye C., Schelling E., Pfyffer G.E., Baggi F., Ngandolo R., Ndoutamia G., Tanner M., Zinsstag J. 2004. First isolation of tuberculous mycobacteria in man and animals in Chad. *Med Trop* 64(5): 482-5.
- Ellwood D.C., Waddington F.G. 1972. A second experiment to challenge the resistance to tuberculosis in B.C.G. vaccinated cattle in Malawi. *Br Vet J*.128(12): 619-26
- Gibson A.L., Hewinson G., Goodchild T., Watt B., Story A., Inwald J., Drobniewski F.A. 2004. Molecular epidemiology of disease due to *Mycobacterium bovis* in humans in the United Kingdom. *Journal of Clinical Microbiology*, 42(1): 431-434.
- Hancox M. 2002. Bovine tuberculosis: milk and meat safety. *The Lancet*; 359 (23): 706-707.
- Hlavsa M.C., Moonan P.K., Cowan L.S., Navin T.R., Kammerer J.S., Morlock G.P., Crawford J.T., LoBue P.A. 2008. Human Tuberculosis due to *Mycobacterium bovis* in the United States, 1995–2005. *Clinical Infectious Diseases*; 47: 168–75
- International Livestock Research Institute (ILRI). 2007. Discussion paper No.2. Improving market opportunities-Geographic distribution of cattle and shoats populations and their market supply sheds in Ethiopia.

Kazwala R.R., Daborn C.J., Kusiluka L.J., Jiwa S.F., Sharp J.M. & Kambarage D.M. 1998. Isolation of *Mycobacterium* species from raw milk of pastoral cattle of the Southern Highlands of Tanzania. *Trop.Anim.Health Prod.* 30(4): 233-9.

Lyashchenko K.P., Greenwald R., Esfandiari J., Chambers M.A., Vicente J., Gortazar C., Santos N., Correia-Neves M., Buddle B.M., Jackson R., O'Brien D.J., Schmitt S., Palmer M.V., Delahay R.J., Waters W.R. 2008. Animal-side serologic assay for rapid detection of *Mycobacterium bovis* infection in multiple species of free-ranging wildlife. *Vet Microbiol.* (In press)

Meisinger G. 1969. Untersuchungen über die Oekonomische Auswirkung der Rindertuberkulose auf die Produktivität der Rinderbestände. *Monatsh. Veterinarmed.* 25(1): 7-13.

Mfinanga, S.G., Morkve, O., Kazwala, R.R., Cleaveland, S., Sharp, M.J., Kunda, J., Nilsen, R., 2004. Mycobacterial adenitis: role of *Mycobacterium bovis*, non-tuberculous mycobacteria, HIV infection, and risk factors in Arusha, Tanzania. *East Afr.Med.J.* 81(4): 171-178

Miruk A., Hagos A., Yacob H.T., Asnake F., Basu A.K. 2008. Prevalence of bovine trypanosomiasis and trypanocidal drug sensitivity studies on *Trypanosoma congolense* in Wolyta and Dawero zones of southern Ethiopia. *Veterinary Parasitology* 152: 141–147

Monaghan M.L., Doherty M.L., Collins J.D., Kazda J.F., Quinn P.J. 1994. The tuberculin test. *Vet Microbiol.* 40(1-2): 111-24.

Müller B., Vounatsou P., Ngandolo B.N.R., Diguimbaye-Djaïbe C., Schiller I., Marg-Haufe B., Oesch B., Schelling E., Zinsstag J. 2008. Bayesian receiver operating characteristic estimation of multiple tests for diagnosis of bovine tuberculosis in Chadian cattle. In *Molecular epidemiology and diagnosis of Mycobacterium bovis infections in African cattle*. PhD thesis (2008).

OIE (Office International des Epizooties)-Manual of Diagnostic Tests and Vaccines for terrestrial animals. 5th Edition. 2004
http://www.oie.int/eng/normes/mmanual/A_00054.htm

Oloya J., Opuda-Asibo J., Kazwala R., Demelash A.B., Skjerve E., Lund A., Johansen T.B., Djonje B. 2008. Mycobacteria causing human cervical lymphadenitis in pastoral communities in the Karamoja region of Uganda. *Epidemiol. Infect.* 136(5): 636-43

Pérez-Martínez I., Ponce-De-León A., Bobadilla M., Villegas-Sepúlveda N., Pérez-García M., Sifuentes-Osornio J., González-y-Merchand J.A., Estrada-García T. 2008. A novel identification scheme for genus *Mycobacterium*, M. tuberculosis complex, and seven mycobacteria species of human clinical impact. *Eur J Clin Microbiol Infect Dis.* 27: 451–459

Schelling E. 2002. Human and animal health in nomadic pastoralist communities of Chad: zoonoses, morbidity and health services. PhD thesis.

Schwabe C.W., 1984 *Veterinary medicine and human health*. Baltimore: Williams & Wilkins.

Tripartite evaluation report. 2005. GCP/INT/811/ITA. Support to livestock exports from the Horn of Africa (EXCELEX) project. On internet:
http://www.fao.org/docs/eims/upload/212289/GCPINT811ITA_20051.doc

Walravens K., Marché S., Rosseels V., Wellemans V., Boelaert F., Huygen K., Godfroid J. 2002. IFN- γ diagnostic tests in the context of bovine mycobacterial infections in Belgium. *Veterinary Immunology and Immunopathology*. 87: 401-406.

**19. Appendix 1: Photos illustrating the different ecological zones of the study areas
and field work performed during this PhD**

(Photo credit: R. Tschopp)

Part 1: Study sites

- Bale Mountains (Web Valley)
- Afar
- Meskan
- Lowlands of Woldia
- Highlands of Woldia (Baba Seat)
- Male (Bako-Gazer)

Part 2: Field work

- Skin testing of cattle
- Training of scouts in Awash National Park and Senkele
- Various work with farmers, DVM students and wildlife

Part 1: Study sites



Bale Mountains



Afar



Meskan



Woldia lowlands



Bako Gazer (Male)

Part 2: field work

Skin testing of cattle



Training



Awash National Park



Senkele

Work with farmers, students and wildlife



Wollo



Appendix 2: Photos



Calving Butajira



Babile



Hamer (South Omo)



Dolo Odo



Bale Mountains (field lab work)

20. Appendix 2: Environmental change and the impact of wildlife on diseases

Part of this chapter was a contribution to:

Bonfoh B., Schwabenbauer K., Wallinga D., Hartung J., Schelling E., Zinsstag J., Meslin F-X., **Tschopp R.**, Akakpo J.A., and M. Tanner. 2010. *Human health hazards associated with livestock production*. In: *Livestock in a changing landscape: drivers, consequences, and responses* (Vol I). Eds: Steinfeld H., Mooney H.A., Schneider F., and Neville L.E. Island Press. Pp 197-221.

20.1. Introduction

In the last decades, the importance of the livestock-wildlife-human interface has increasingly been recognized worldwide and its issues tried to be addressed. Wildlife, people and their livestock interact, share the same land and compete for the same natural resources in increasingly intensified interfaces [22]. There are over 77 million cattle in Africa [18] and around 80% of the sub-Saharan population is rural, co-existing with its animals and depending directly on livestock for their livelihood. The steady population and livestock growth puts an ever increasing pressure on natural resources and ecosystems.

Sixty-two percent of human pathogens are known to be of zoonotic origin (i.e. diseases transmitted from animals to humans), including the so-called emerging diseases in humans [20]. Evidence suggests that wildlife is involved in most of these diseases, thus playing a key role at the interface.

Diseases at the interface involving wildlife hosts or reservoirs can have multiple impacts: they present a major health threat for human populations and/or their livestock; they have an important economical impact at household and national level thus exacerbating rural poverty and hampering national economies, but also threatening global economies [14]. From a conservation point of view, these diseases have the potential to increase the risk of extinction of valuable endangered wildlife species and lead to major losses in biodiversity (e.g rabies outbreak in the Ethiopian wolf population) [31].

The following chapter aims at describing the interface concept, the diseases found at the human-livestock-wildlife interface and the role of wildlife as reservoirs for diseases.

20.2. The wildlife-livestock-human interface

20.2.1. Definitions

Wildlife-livestock-human interfaces are not fixed or defined in a strict sense. They can move temporally and spatially depending on various factors and new interfaces are constantly created [18].

The following factors are physically influencing the creation of an interface:

- Livestock production system prevailing in the region or in the country (e.g. extensive ranching system, pastoralism)
- Social factors, such as steady population growth, population movements, population behaviour, conflicts and political instability.
- Environmental factors, such as land degradation, habitat destruction, de-or reforestation, decrease of natural resources and climatic factors (e.g. drought, rainy season)
- Biological factors such as endemic wildlife species, seasonal migration, breeding and formation of bachelor groups

20.2.2. Implications and consequences of an interface

An increase of disease incidence at the wildlife/livestock interface has been reported over the last decades (e.g. bovine tuberculosis, foot and mouth disease, anthrax, Rinder Pest) [19]. This is most probably related to increased human and livestock population encroaching into wildlife ranges. These diseases are of serious concern for both the agriculture sector and wildlife conservation sector. They affect directly the health status of livestock through mortality (e.g. anthrax) or morbidity (e.g. trypanosomiasis). More subtle, disease will have a medium and long term impact on livestock immunity (e.g. increasing susceptibility to other diseases) and productivity (e.g. decreased milk and/or meat production, reduced fertility), thus exacerbating rural poverty, which is an important constraint to development and environmental conservation in Africa [18].

The interaction between wildlife and livestock is a key issue in livestock economies. The current disease status found at the interface is a major constraint on livestock exports (“Sanitary and Phytosanitary Measures” of the World Trade Organisation, WTO) and thus hampers national and

global economies [19]. FAO declared in 2003, one third of the global meat trade to be embargoed due to livestock disease epidemics, such as avian influenza, foot and mouth disease, bovine spongiform encephalopathy [14]. Forty-four million birds were culled in Vietnam at an estimated cost over US\$ 120 million to stop the spread of avian flu [34]. Following an outbreak of Rift Valley fever in East Africa, a ban imposed by Saudi Arabia in 1998, resulted in the loss of exports of live animals worth an estimated US\$ 100 million [10]. Later, in 2000, Saudi Arabia embargoed Ethiopian livestock exports due to the outbreak of sleeping sickness in East Africa [30]. Since the 1990s, emerging livestock diseases have cost the world's economy US\$ 80 billion [14].

Wildlife plays a key role not only in disease dynamics involving livestock at the interface, but also in the epidemiology of most traditional zoonosis and emerging human diseases as infection source or amplifier (viral diseases: West Nile Virus, SARS: Severe Acute Respiratory Syndrome, Avian Influenza, Hendra/Nipah/Hanta virus, Monkeypox; bacterial diseases, such as Lyme disease (*Borrelia burgdorferi*) and protozoal disease (e.g. *Trypanosoma* spp) [6, 20].

Interfaces are two-way streets. New emerging diseases have also been described in African wildlife, such as canine distemper in free-ranging lions [28], bovine tuberculosis in free-ranging lions [17], and parafilariosis in South African buffaloes [16].

The introduction of novel diseases at the interface can be a serious threat to free-ranging wild animals and a risk of extinction of endangered rare species.

20.3. Diseases at the interface

20.3.1. Disease transmission

Disease transmission occurs either through direct contact between individuals (e.g. rabies), through consumption of contaminated food or water (e.g. bovine tuberculosis), through aerosols (e.g. avian influenza) or through vectors (e.g. trypanosomiasis). Therefore, a large spectrum of

transmission modes of diseases are seen at the interface, considering factors influencing direct contact and/or access to contaminated food/water and those influencing vectors (e.g. number, distribution):

Direct contact between wildlife- livestock and humans

Wildlife usually tends to avoid any contact with cattle and humans whenever possible. For example they tend to use water points at different time as cattle do [19]. Therefore, if the ecosystem and ecology allows it, direct contact between wildlife and livestock (and humans) will be superfluous and indirect disease transmission pattern will prevail, such as through contaminated pasture/water/soil and via vectors/intermediate hosts [9].

However, nowadays this situation is modified due to rapid environmental changes. These changes have natural as well as anthropogenic origins: habitat change (deforestation, land erosion, land over-use), demographic factors (population growth, population movements or sedentarisation of nomadic people), climatic changes (recurrent drought) [8]. For instance, major wildlife/livestock disease epidemics have been observed during drought periods [19]. A possible explanation being that wildlife is forced to share scarce water points and pastures with livestock and thus the rate of direct contact between animals is increased.

The consequences of these changes are an ever increasing encroachment of human population and their livestock into wildlife ranges, thus intensifying interfaces and making direct contact between free ranging wild animals, livestock and humans much easier and sometimes unavoidable. The yellow fever outbreak in Ethiopia between 1960 and 1962 illustrates this concept: Yellow fever, an arthropod borne virus (flavivirus) is transmitted by mosquitoes of the genus *Aedes* (*A. aegypti*) and is characterized by a mosquito-monkey-mosquito sylvatic cycle. The outbreak in Ethiopia caused 300 000 human cases and was the largest outbreak ever reported in Sub-Saharan Africa. It was the result of humans entering the sylvatic setting and becoming part of the yellow fever cycle [1]

Indirect transmission: vectors and access to contaminated food/water

In addition, the above mentioned climatic and ecological factors influence the host/vector and pathogen dynamics in terms of distribution and number [7]. For example, Rift Valley Fever outbreaks are seen after heavy rainfall, which promotes the multiplication of mosquitoes [5].

Reforestation favours transmission of tick-borne diseases (e.g. Lyme disease in humans) through increased tick population and wildlife hosts on whom ticks can feed [7].

Acquiring a disease through contaminated food is best illustrated by bovine Tuberculosis (BTB). BTB caused by *M. bovis* is transmitted either by aerosols/contaminated droplets from the respiratory tract or by ingestion of contaminated animal products (BTB infected preys are a source of infection for wild carnivores; consumption of raw milk or raw meat from infected cattle can lead to the development of extra pulmonary TB lesions in humans (e.g. lymphadenitis); herbivores acquire the disease while grazing on contaminated pastures) [23].

Population immunity

Population immunity at the interface is an important aspect in disease epidemiology and dynamics. Usually, local livestock breeds and endemic wildlife develop a certain degree of immunity against endemic pathogens circulating between wildlife and livestock in a specific region [31]. There is a co-evolution between host and parasites, which will remain in balance in a stable bio-ecological system [19]. Disruption of this stable system such as the introduction of new immunological naive hosts (e.g. import of domestic cattle from Europe and Asia into Sub-Saharan Africa) or of alien pathogens can trigger the onset of an epidemic (e.g. Rinder Pest pandemic on the African continent in the last century) [34].

It is also important to keep in mind that pathogens (especially virus and bacteria) are in constant transformation (evolution, changes, and adaptations), for example through mutations, genetic variation such as shift, genetic drift, and recombination [20]. These transformations impose constant new challenges in disease dynamics.

20.3.2. Wildlife and livestock diseases

Three types of diseases are found at the interface: indigenous, exotic/alien and emerging/re-emerging or truly novel diseases [3]. They have been described and reviewed in detail by many authors [3, 4, 19, 31]. The most important diseases found at the interface are classified under List A by the Office International des Epizooties (OIE); List A groups diseases with potential rapid spread within countries and across borders, with serious socio-economic and/or public health

impact and with major constraints to international trade [24]. In Africa these diseases are: Rinder Pest and Peste des Petits Ruminants (morbillivirus), Rift Valley fever (phlebovirus), foot and mouth disease (aphtovirus), African swine fever (ASV virus), and contagious bovine pleuropneumonia CBPP (*Mycoplasma mycoides mycoides S.c*). Especially highly contagious viral diseases with epizootic potential have devastating impacts on livestock and wildlife economy. Other diseases (trypanosomiasis, cowdriosis, theileriosis.) commonly have a more pronounced impact at household and community levels, thus exacerbating rural poverty through reduced livestock production.

Ungulates and especially the Bovidae family are often involved in outbreaks at wildlife/livestock interfaces. In Africa, wildebeest (*Connochaetes taurinus*) are carrier of malignant catarrhal fever virus, which can be lethal for cattle [13].

The buffalo population (*Syncerus caffer*) is proved to act as reservoir for BTB and as source of infection for other species (domestic cattle and wildlife) [15]. Buffaloes are also involved in the transmission of the virulent form of theileriosis (corridor disease) and are carrier of the SAT (South African Territories) Foot and Mouth Disease virus [31]. However, despite a few key wildlife species involved in major disease outbreaks at the interface, and the fact that free-ranging wild animals play a key role in the epidemiology of most diseases (multi-species and exotic diseases) at the interface, wildlife is usually a poor maintenance host for pathogens in a given endemic area.

Table 1 shows some of the more important wildlife-maintained diseases that are commonly transmitted to domestic livestock in Africa

Disease	Causative pathogen	Transmission pattern	Maintenance host	Affected domestic animal
Foot and Mouth Disease	Aphthovirus	Direct	African buffalo, cattle	Cattle, pigs, sheep and goats
African swine fever	Asfarvirus	Direct <i>Ornithodoros spp</i>	Argasid ticks, warthogs	Domestic pigs
African horse sickness	Orbivirus	Culicoides midges	zebra	Horses and donkeys
Rift valley fever	Phlebovirus	Aedes and culex spp.	Aedes mosquitoes	Sheep, goats, cattle, wild bovidae
Bluetongue	Orbivirus	Culicoides midges	Artiodactyls (uncertain)	Sheep and cattle
Malignant catarrhal fever	Alcelaphine herpesvirus-1	uncertain	Blue and black wildebeest	cattle
Newcastle disease	Paramyxovirus	direct	Wild and exotic pet birds	poultry

20.3.3. Wildlife and classical and emerging zoonoses

Wildlife is involved in the epidemiology of most zoonoses and thus constitutes a major threat for public health throughout the world [20] (table 2).

Table 2: Involvement of wildlife in some zoonoses

Disease	Causative pathogen	Transmission	Main Wildlife reservoir
Lyme borreliosis	<i>Borrelia burgdorferi</i>	Ixodes spp	White tailed deer, wild rodents
BTB	<i>Mycobacteria bovis</i>	aerosols, ingestion	Wild and domestic herbivores
Echinococcosis	<i>Echinococcus multiloculares</i>	ingestion	Canidae (e.g. foxes)
Yellow Fever	Flavivirus	Aedes spp	Monkeys
Hanta	Hantavirus	aerosols	Wild rodents
Rabies	Lyssa virus	bites	Wild and domestic canidae
monkeypox	Pox virus	Direct contact	Monkeys, rodents
SARS	coronavirus	aerosol	Wildlife, unknown
Ebola	Filovirus	Direct contact	Unknown (wildlife probable)
Hendra	Hendra virus	Direct contact	Fruit bats
Menangle	Menangle virus	Direct contact	Fruit bats
Nipah	Nipah virus	Direct contact	Fruit bats
Influenza A	Influenza A virus	Aerosols	Wild waterfowl

Thirty-five new infectious diseases have emerged in humans in the last 25 years [14], most of them having a wildlife component.

As for the diseases at the wildlife/livestock interface, zoonoses with wildlife reservoir show a large spectrum of transmission patterns, including direct contact (e.g. tularemia caused by *Francisella tularensis*) [25], consumption of contaminated animal products (e.g. bovine tuberculosis caused by *M. bovis* acquired through consumption of raw milk/meat [33] and insect vectors (e.g. West Nile Virus, Rift valley fever, yellow fever) [32].

20.4. Wildlife reservoir and control strategies

Seventy-seven percent of pathogens found in livestock are shared by other species [14]. This explains why wildlife is often considered by livestock producers as a danger (e.g. competition for grazing land, transmission of diseases), thus fuelling conflicts between communities and wildlife. Considering the existence and role played by wildlife reservoirs, control strategy and disease management at the interface is crucial (from a health as well as conservation point of view) however, it remains technically, financially and ethically challenging. Vaccination, quarantine, stamping-out, test-and-slaughter strategies, abattoir surveys, and vector control can be achieved to a certain extent in livestock populations, but these approaches are impossible in free ranging wildlife. Oral vaccination of wildlife has been a success in some countries, for example in Switzerland, where rabies has been eradicated since 2000 thanks to oral vaccination of the fox population. However, this approach is not feasible, especially in African countries due to the abundance of different wildlife species, size of the territory and cost-effectiveness of the procedure.

Culling of wildlife is sometimes promoted to stop the spread of diseases (e.g. culling of badgers in the UK and possums in New Zealand to control BTB [7, 12]). However, this method remains controversial and is a source of discussions concerning its successes and ethics. Containment, consisting in physical separation of livestock from wildlife (via fences, cordons, and animal movement control) and zoning seems to be a more appropriate approach [3]. However, these methods will not prevent vector borne diseases and winged hosts such as migratory birds [3]. Some authors state that livestock may better cope with pathogens in the presence of wildlife [2] and the question arises whether actually more harm is done in trying to completely remove a wildlife host from the bio-ecological system.

Although diseases at the interface are known and described, detailed and thorough epidemiological studies are still lacking for most of them, thus weakening control and prevention strategies. Furthermore, the exact role played by wildlife and the species involved in the maintenance and transmission dynamics of diseases are largely unknown especially in new emerging diseases, due to lack of data and wildlife studies. With exceptions, disease surveillance and monitoring is usually poor or non-existent in wildlife populations [7]. There is a crucial lack of knowledge as to which wildlife species act as reservoir hosts. As discussed above, the epidemiology at the wildlife-livestock-human interface is extremely complex and multisectoral (demographic, ecological and anthropogenic factors, factors taking into account wildlife species and their behaviour and finally the pathogen itself and all factors influencing the virulence and distribution of pathogen and /or vectors).

Due to this close interrelation, a holistic approach between human health, animal health and ecosystem health (the latter including all species living within these systems) is essential to address issues at the interface [20]. Efforts are often put into monitoring diseases in the public health and livestock sectors (e.g. post mortem surveys in abattoirs, blood sampling, record of mortalities and morbidities, education etc...) but the other sectors (e.g. ecosystems, wildlife) are only insufficiently considered in control programs. Ideally they should involve experts from public health sectors, veterinarians, ecologists, biologists, and wildlife professionals and wildlife authorities.

Wildlife can act as disease sentinel, i.e. as early warning system for a coming disease outbreak in livestock and/or humans. In Gabon and Republic of Congo, outbreaks of Ebola in wildlife preceded each of the five human Ebola outbreaks between 2001 and 2003 and handling of infected wildlife carcasses was the sources of all human outbreaks [29]. Wildlife Conservation Society (WCS), Centre for Disease Control (CDC) and the local authorities in Gabon and Republic of Congo created an Animal Mortality Monitoring Network for the surveillance of outbreaks in wildlife [29]. Using wildlife (especially key wildlife species) as sentinel is also a tactical approach in the surveillance of Rinder Pest outbreaks in East Africa or as early warning for West Nile Fever outbreaks in the United States for example [11, 6].

20.5. Conclusion

In a world characterized by rapid change, wildlife-livestock-human interfaces are increasingly intensified. Wildlife plays a central role in the epidemiology and dynamic of most diseases at the interface since the sharing of land and other natural resources becomes inevitable. It is essential to understand the role and dynamics of free-ranging wildlife within the ecosystem in order to set efficient disease control programs at the interface. Diseases at the interface including wildlife hosts will have an impact on public and animal health (livestock and wildlife) but also an economic impact, which goes far beyond the loss of productivity and trade constraints. Finally, it is worth highlighting the socio-economic benefits from wildlife: in Africa the wildlife sector is worth US\$ 7 billion, with an annual growth rate of 5% [31], thus playing a crucial role in national economies. Increasing livestock production is one of the key strategies to alleviate poverty in Africa and target the UN Millennium Development Goals [35]. However, as stated by Kock (2003), if wildlife, natural resources and land use options are not taken into account in the equation, in the long-term “one form of poverty will just be replaced by another”.

References

1. Ardois P., Rodhain F., and Hannoun C. 1976. Epidemiological study of arbovirus in the Arba Minch district of Ethiopia. *Trop Geogr Med.* 28, 309-315.
2. Barre N., Bianchi M., and de Garine-Wichatitsky M. 2001. Effects of the association of cattle and Russa deer (*Cervus timorensis russa*) on the maintenance of a viable cattle tick *Boophilus microplus* population. *Proceedings of the International Joint Conference: Society for Tropical Veterinary Medicine and Wildlife Disease Association.* Pilanesberg, South Africa. P 90.
3. Bengis R.G., Kock R.A. and Fischer J. 2002. Infectious animal diseases: the wildlife/livestock interface. *Rev. sci. tech. Off. int. Epiz.* 21(1), 53-65.
4. Bengis R.G., Leighton F.A., Fischer J.R., Artois M., Mörner T. and Tate C.M. 2004. The role of wildlife in emerging and re-emerging zoonoses. *Rev. sci. tech. Off. Int. Epiz.:* 23(2), 497-511.
5. Center for Disease Control (CDC): <http://www.cdc.gov/node.do/id/0900f3ec800074de>
6. Center for disease control (CDC): <http://www.cdc.gov/ncidod/dvbid/westnile/resources/wnv-guidelines-aug-2003.pdf>
7. Cleaveland S., Laurenson K. and Mlengeya T. 2003. *Impacts of wildlife infections on human and livestock health with special reference to Tanzania: implications for protected area management.* In: Conservation and Development Interventions at the Wildlife/Livestock Interface, implication for wildlife, livestock and human health. Ed. S.A. Osofsky. Proceedings of the Southern and East African Experts Panel on Designing Successful Conservation and Development Interventions at the Wildlife/Livestock interface. Implication for wildlife, livestock and human health, AHEAD (Animal Health for the Environment And Development). Forum, IUCN Vth, World Parks Congress, 15th and 15th September 2003, Durban, South Africa. Pp 147-151.
8. Daszak P., Cunningham A.A., Hyatt A.D. 2001. Anthropogenic environmental change and the emergence of infectious diseases in wildlife. Review article. *Acta Tropica* 78, 103–116
9. Fenner F. Transmission cycles and broad patterns of observed epidemiological behavior in human and other animal populations. In: Anderson R.M., May R.M., Anderson R.C (eds). *Population Biology of Infectious Diseases: Dahlem Workshop Reports.* Berlin, Germany: Springer-Verlag; 1982. pp 103-119.
10. Food and Agriculture Organization (FAO). 2001. Rift Valley fever threatens livelihoods in the Horn of Africa. *Empress Transboundary Animal Disease Bulletin.* No.16/1.
11. Food and agriculture Organization (FAO): <http://www.fao.org/ag/AGA/AGAH/EMPRES/Info/rinderp/3.pdf>

12. Griffin J.M., Williams D.H., Kelly G.E., Clegg T.A., O'Boyle I., Collins J.D. and More S.J. 2005. The impact of badger removal on the control of tuberculosis in cattle herds in Ireland. *Preventive Veterinary Medicine*, 67, 237-266.
13. Grottenhuis J.G. 1999. *25 years of wildlife disease research in Kenya*. Nairobi, Kenya: Kenya Agricultural Research Institute.
14. Karesh W.B., Cook R.A., Bennet E.L. and Newcomb J. 2005. Wildlife trade and global disease emergence. *Emerging Infectious Diseases* 11(7), 1000-1002.
15. Keet D.F., Kriek N.P., Penrith M.-L., Michel A. and Huchzermeyer H.F. 1996. Tuberculosis in buffaloes (*Syncerus caffer*) in the Krüger National Park: spread of the disease to other species. *Onderstepoort J. vet. Res.* 63(3), 239-244.
16. Keet D.F., Kriek N.P.J., Boomker J.D.F. and Meltzer D.G.A. 1997. Parafilaria in African buffaloes (*Syncerus caffer*). *Onderstepoort J. vet. Res.* 64, 217-225.
17. African Wildlife Foundation: <http://www.awf.org/news/98>
18. Kock M.D. 2003. *The health paradigm and protected areas: linkages between people and their livelihoods, ecosystems and natural communities, and health and disease*. In: Conservation and Development Interventions at the Wildlife/Livestock Interface, implication for wildlife, livestock and human health. Ed. S.A. Osofsky. Proceedings of the Southern and East African Experts Panel on Designing Successful Conservation and Development Interventions at the Wildlife/Livestock interface. Implication for wildlife, livestock and human health, AHEAD (Animal Health for the Environment And Development). Forum, IUCN Vth, World Parks Congress, 15th and 15th September 2003, Durban, South Africa. Pp 81-88.
19. Kock R.A. 2003. *What is this infamous "wildlife/livestock disease interface?" A review of current knowledge for the African continent*. In: Conservation and Development Interventions at the Wildlife/Livestock Interface, implication for wildlife, livestock and human health. Ed. S.A. Osofsky. Proceedings of the Southern and East African Experts Panel on Designing Successful Conservation and Development Interventions at the Wildlife/Livestock interface. Implication for wildlife, livestock and human health, AHEAD (Animal Health for the Environment And Development). Forum, IUCN Vth, World Parks Congress, 15th and 15th September 2003, Durban, South Africa. Pp 1-13.
20. Kruse H., Kirkemo A.-M. and Handeland K. 2004. Wildlife as source of zoonotic infections. *Emerging Infectious Diseases* 10(12), 2067-2072.
21. Michel A.L. 2003. *Tuberculosis- what makes it a significant player at the wildlife/livestock/human interface?* In: Conservation and Development Interventions at the Wildlife/Livestock Interface, implication for wildlife, livestock and human health. Ed. S.A. Osofsky. Proceedings of the Southern and East African Experts Panel on Designing Successful Conservation and Development Interventions at the Wildlife/Livestock interface. Implication for wildlife, livestock and human health, AHEAD (Animal Health for the Environment And Development). Forum,

IUCN Vth, World Parks Congress, 15th and 15th September 2003, Durban, South Africa. Pp 47-49.

22. Mizutani F., Muthiani E., Kristjanson P. and Recke H. 2003. *Impact and value of wildlife in pastoral livestock production systems in Kenya: possibilities for healthy ecosystem conservation and livestock development for the poor*. In: Conservation and Development Interventions at the Wildlife/Livestock Interface, implication for wildlife, livestock and human health. Ed. S.A. Osofsky. Proceedings of the Southern and East African Experts Panel on Designing Successful Conservation and Development Interventions at the Wildlife/Livestock interface. Implication for wildlife, livestock and human health, AHEAD (Animal Health for the Environment And Development). Forum, IUCN Vth, World Parks Congress, 15th and 15th September 2003, Durban, South Africa. Pp 121-132.

23. Office International des Epizooties (OIE). Bovine Tuberculosis. In : *Manual of Diagnostic tests and vaccines for Terrestrial animals*, 5th. Edition. 2004. pp 1-18.

24. Office International des Epizooties (OIE). http://www.oie.int/eng/info/en_info.htm?e1d5

25. Petersen J.M., Mead P.S., Schriefer M.E. 2008. *F. tularensis*: an arthropod-borne pathogen. *Vet Res.* 40(2), 7.

26. Randall D.A., Williams S.D., Kuzmin I.V., Rupprecht C.E., Tallents L.A., Tefera Z., Argaw K., Shiferaw F., Knobel D.L., Sillero-Zubiri C., Laurenson M.K. 2004. Rabies in Endangered Ethiopian Wolves. *Emerging Infectious Diseases.* 10(12), 2214-2217

27. Roeder P.L., Taylor W.P. 2002. Rinderpest- a review. *Vet Clin North Am Food Anim Pract.* 18(3), 515-47

28. Roelke-Parker M.E., Munson L., Packer C., Kock R., Cleaveland S., Carpenter M., O'Brien S.J., Pospischil A., Hofmann-Lehmann R., Lutz H., Mwamengele M.N., Mgasia G.A., Machange G.A., Summers B.A., and Appel M.J.G. 1996. A canine distemper virus epidemic in Serengeti lions (*Panthera leo*). *Nature* 379 (6564), 441-445.

29. Rouquet P., Froment J-M, Bermejo M., Kilbourn A., Karesh W., Reed P., Kumulungui B., Yaba P., Délicat A., Rollin P.E., Leroy E.M. 2005. Wild animal mortality monitoring and human Ebola outbreaks, Gabon and Republic of Congo, 2001-2003. *Emerging Infectious Diseases* 11 (2).

30. *Saudi Arabia to re-open its market to Ethiopia's livestock export*. Addis Tribune, 21/03/2003.

31. Wambwa E. 2003. *Diseases of importance at the wildlife/livestock interface in Kenya*. In: Conservation and Development Interventions at the Wildlife/Livestock Interface, implication for wildlife, livestock and human health. Ed. S.A. Osofsky. Proceedings of the Southern and East African Experts Panel on Designing Successful Conservation and Development Interventions at the Wildlife/Livestock interface. Implication for wildlife, livestock and human health, AHEAD

(Animal Health for the Environment And Development). Forum, IUCN Vth, World Parks Congress, 15th and 15th September 2003, Durban, South Africa. Pp 21-24.

32. White D.J. 2001. Vector surveillance for West Nile virus. *Ann N Y Acad Sci.* 951, 74-83

33. Wilkins M.J., Meyerson J., Bartlett P.C., Spieldenner S.L., Berry D.E., Mosher L.B., Kaneene J.B., Robinson-Dunn B., Stobierski M.G., Boulton M.L. 2008; Human *Mycobacterium bovis* Infection and Bovine Tuberculosis Outbreak, Michigan, 1994–2007. *Emerging Infectious Diseases* 14 (4), 657-660.

34. The World Bank- Economic impact of avian flu; Global Program for Avian Influenza and Human Pandemic:
<http://web.worldbank.org/WBSITE/EXTERNAL/COUNTRIES/EASTASIAPACIFICE>

35. UN Millenium development Goals: <http://www.un.org/millenniumgoals>

21. Appendix 3: Ethiopian wildlife species listed in the IUCN-Red List of

Threatened species.

Appendix 3: Table showing some of the wildlife species in Ethiopia listed in the IUCN-Red List of threatened species in 2008
(Source: www.iucnredlist.org)

Species	Scientific name	Category	
Walia Ibex	<i>Capra walie</i>	CR C2b	Critically endangered
African wild ass	<i>Equus africanus</i>	CR A1b	Critically endangered
Mountain nyala	<i>Tragelaphus buxtoni</i>	EN C1	Endangered
Ethiopian wolf	<i>Canis simensis</i>	EN C2a(i);D	Endangered
Africa wild dog	<i>Lycaon pictus</i>	EN C2a(i)	Endangered
Swayne's hartebeest	<i>Alcelaphus buselaphus swayeni</i>	EN A1a, C1	Endangered
Gelada baboon	<i>Theropithecus gelada</i>	LR/nt	Low risk, nearly threatened
Bohor Reedbuck	<i>Redunca redunca</i>	LR/cd	Low risk, conservation dependent
Tiang/Tsessebe	<i>Damaliscus lunatus</i>	LR/cd	Low risk, conservation dependent
Menelik Bushbuck	<i>Tragelaphus scriptus menelikii</i>	LR/lc	Low risk, least concern

22. Appendix 4: Worldwide *M. bovis* isolation in free-ranging wildlife

Table 1: Table illustrating the free-ranging wildlife species and location in which *M. bovis* was isolated, worldwide (incomplete list)

Continent	Species	Country	References
Europe	Lynx (<i>Lynx pardina</i>)	Spain	Briones et al.2000
	Red deer (<i>Cervus elaphus</i>)	Spain	Aranaz et al., 2004, Gortazar et al., 2005, Vicente et al, 2006
		Hungary	Pavlik 2006
		France	Zanella et al., 2008
		Ireland	Dodd 1984
		UK	Delahay et al., 2002, Delahay et al., 2006
	Hare (<i>Lepus spp</i>)	Spain	Aranaz et al., 2004
	Fallow deer (<i>Dama dama</i>)	Spain	Aranaz et al., 2004
		UK	Delahay et al., 2002, Delahay et al., 2006
	Wild boar (<i>Sus scrofa</i>)	Spain	Parra et al., 2003, Aranaz et al., 2004, Gortazar et al., 2005, Vicente et al., 2006
		Hungary	Pavlik 2006
		Italy	Serraino et al., 1999
		France	Zanella et al., 2008
	European bison (<i>Bison bonasus</i>)	Poland	Pavlik 2006
	Badger (<i>Meles meles</i>)	Ireland; UK	Delahay et al., 2002, O'Boyle et al., 2003
	Roe deer (<i>Capreolus capreolus</i>)	UK	Delahay et al., 2002, Delahay et al., 2006
	Sika deer (<i>Cervus nippon</i>)	UK	Delahay et al., 2002
	Muntjac (<i>Muntiacus spp</i>)	UK	delahay et al., 2007
	Red fox (<i>Vulpes vulpes</i>)	UK	Delahay et al., 2002, Delahay et al., 2006
	Mink (<i>Mustela vison</i>)	UK	Delahay et al., 2002
Mole (<i>Talpa europaea</i>)	UK	Delahay et al., 2002	
Brown rat (<i>Rattus norvegicus</i>)	UK	Delahay et al., 2002	
Ferret (<i>Mustela furo</i>)	UK	Delahay et al., 2002	
Stoat (<i>Mustela erminea</i>)	UK	Delahay et al., 2007	
Polecat (<i>Mustela putorius</i>)	UK	Delahay et al., 2007	
Common shrew (<i>Sorex araneus</i>)	UK	Delahay et al., 2007	

Appendix 4: Worldwide *M.bovis* isolation in free-ranging wildlife

	Yellow-necked mouse (<i>Apodemus flavicollis</i>)	UK	Delahay et al., 2007
	Wood mouse (<i>Apodemus sylvaticus</i>)	UK	Delahay et al., 2007
	Field vole (<i>Microtus agrestis</i>)	UK	Delahay et al., 2007
	Grey squirrel (<i>Sciurus carolinensis</i>)	UK	Delahay et al., 2007
	Bank vole (<i>Clethrionomys glareolus</i>)	UK	Mathews et al., 2006
America	Coyote (<i>Canis latrans</i>)	United-States	Bruning-Fann et al. 2001, Payeur et al., 2002
	Raccoon (<i>Procyon lotor</i>)	United-States	Bruning-Fann et al. 2001, Payeur et al., 2002
	Red fox (<i>Vulpes vulpes</i>)	United-States	Bruning-Fann et al. 2001, Payeur et al., 2002
	Black bear (<i>Ursus americanus</i>)	United-States	Bruning-Fann et al. 2001, Payeur et al., 2002
	Bobcat (<i>Lynx rufus</i>)	United-States	Payeur et al., 2002
	White-tailed deer (<i>Odocoileus virginianus</i>)	United-States	Payeur et al., 2002, O'Brien et al., 2002, Jacques et al., 2003
	Elk (<i>Cervus canadensis</i>)	United-States	Payeur et al., 2002, Jacques et al., 2003
	Wapiti (<i>Cervus elaphus manitobensis</i>)	Canada	Nishi et al., 2006
	Wood bison (<i>Bison bison athabascae</i>)	Canada	Nishi et al., 2006
Australasia	Stoats (<i>Mustela erminea</i>)	New-Zealand	DeLisle et al., 2008
	Ferret (<i>Mustela furo</i>)	New-Zealand	DeLisle et al., 2008, Coleman et al., 2001, Calley & Hone 2004
	Brush-tail possum (<i>Trichosurus vulpecula</i>)	New-Zealand	Calley & Hone 2004
Africa	Wildebeest (<i>Connochaetes taurinus</i>)	Tanzania	Cleaveland et al., 2005
	Topi (<i>Damaliscus lunatus</i>)	Tanzania	Cleaveland et al., 2005
	Buffalo (<i>Syncerus caffer</i>)	Uganda South Africa	Woodford 1982 Keet et al. 1996, Bengis et al., 1996, de Vos et al., 2001, Rodwell et al 2001, Grobler et al., 2002, Michel et al., 2008
	Warthog (<i>Phacochoerus aethiopicus</i>)	Uganda South Africa	Woodford 1982 Renwick et al., 2006
	Baboon (<i>Papio spp</i>)	Kenya South Africa	Tarara et al., 1985, Sapolsky & Else 1987 Keet et al 2000, Michel et al., 2008

Appendix 4: Worldwide *M.bovis* isolation in free-ranging wildlife

Lechwe (<i>Kobus leche kafuensis</i>)	Zambia	Clancey 1977, Zieger et al., 1998
Bushbuck (<i>Tragelaphus scriptus</i>)	Zambia	Zieger et al., 1998
Kudu (<i>Tragelaphus strepsiceros</i>)	South Africa	Keet et al., 2001, Bengis et al., 2001, Michel et al., 2008
Lion (<i>Panthera leo</i>)	South Africa	Renwick et al., 2006, Michel et al., 2008
Leopard (<i>Panthera pardus</i>)	South Africa	Renwick et al., 2006, Michel et al., 2008
Cheetah (<i>Acinonyx jubatus</i>)	South Africa	Renwick et al., 2006, Michel et al., 2008
Hyena (<i>Crocuta crocuta</i>)	South Africa	Renwick et al., 2006, Michel et al., 2008

References

- Delahay R.J., Smith G.C., Barlow A.M., Walker N., Harris A., Clifton-Hadley R.S., Cheeseman C.L. 2007. Bovine tuberculosis infection in wild mammals in the South-West region of England: a survey of prevalence and a semi-quantitative assessment of the relative risks to cattle. *Vet J*, 173(2):287-301.
- de Lisle G.W., Pamela Kawakami R., Yates G.F., Collins D.M. 2008. Isolation of *Mycobacterium bovis* and other mycobacterial species from ferrets and stoats. *Vet Microbiol.*;132(3-4):402-7.
- Dodd K. 1984. Tuberculosis in free-living deer. *Vet Res*: 115(23):592-3.
- Michel A.L., Coetzee M.L., Keet D.F., Mare´ L., Warren R., Cooper D., Bengis R.G., Kremer K., van Helden P. Molecular epidemiology of *Mycobacterium bovis* isolates from free-ranging wildlife in South African game reserves. *Veterinary Microbiology* (in press)
- Gortazar C., Vicente J., Samper S., Garrido J.M., Fernandez-de-Mera I.G., Gavin P., Juste R.A., Martin C., Acevedo P., De la Puente M., Höfle U. 2005. Molecular characterization of *Mycobacterium tuberculosis* complex isolates from wild ungulates in south-central Spain. *Vet. Res.* 36: 43–52
- Grobler, D.G., Michel, A.L., de Klerk, L.-M., Bengis, R.G., 2002. The gamma interferon test: its usefulness in a bovine tuberculosis survey in African buffaloes (*Syncerus caffer*) in the Kruger National Park. *Onderstepoort J. Vet. Res.* 69, 221–227.
- Jacques C.N., Jenks J.A., Jenny A.L., Griffin S.L. 2003. Prevalence of chronic wasting disease and bovine tuberculosis in free-ranging deer and elk in South Dakota. *Journal of Wildlife Diseases*, 39(1):29–34
- O’Boyle, I., Costello, E., Power, E.P., Kelleher, P.F., Bradley, J., Redahan, E., Quigley, F., Fogarty, U., Higgins, I., 2003. Review of Badger (*Meles meles*) research licenses in 2002. In: *Selected Papers 2002–2003. Veterinary Epidemiology and Tuberculosis Investigation Unit, University College Dublin, Dublin*, pp. 13–18.
- O’Brien D.J., Schmitt S.M., Fierke J.S., Hogle S.A., Winterstein S.R., Cooley T.M., Moritz W.E., Diegel K.L., Fitzgerald S.D., Berry D.E., Kaneene J.B. 2002. Epidemiology of *Mycobacterium bovis* in free-ranging white-tailed deer, Michigan, USA, 1995–2000. *Preventive Veterinary Medicine* 54 (2002) 47–63
- Palmer M.V., Waters W.R., Whipple D.L. 2002. Susceptibility of raccoons (*Procyon lotor*) to infection with *Mycobacterium bovis*. *Journal of Wildlife Diseases*, 38(2): 266–274
- Parra A., Larrasa J., Garcí’a A., Alonso J.M., Hermoso de Mendoza J. 2005. Molecular epidemiology of bovine tuberculosis in wild animals in Spain: A first approach to risk factor analysis. *Veterinary Microbiology* 110: 293–300

Pavlik I. 2006. The experience of new European Union Member States concerning the control of bovine tuberculosis. *Veterinary Microbiology* 112:221–230

Payeur J.B., Church S., Mosher L., Robinson-Dunn B., Schmitt S., Whipple D. 2002. Bovine tuberculosis in Michigan wildlife. *Ann.N.Y.Acad.Sci.* 969:259-261.

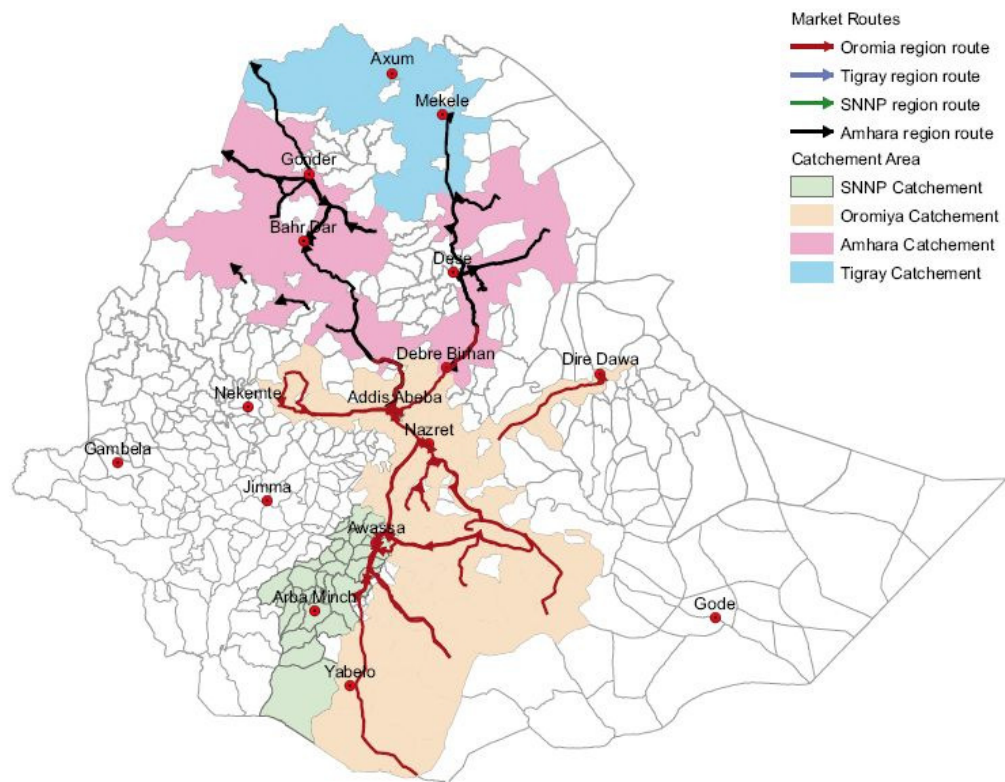
Serraino A., Marcehetti G., Sanguinetti V., Rossi M.C., Zanoni R.G., Catozzi L., Bandera A., Dini W., Mignone W., Franzetti F., Gori A. 1999. Monitoring of Transmission of Tuberculosis between Wild Boars and Cattle: Genotypical Analysis of Strains by Molecular Epidemiology Techniques. *Journal of Clinical Microbiology.* 37(9):2766-2771.

Vicente J., Höfle U., Garrido J.M., Fernández-De-Mera I.G., Juste R., Barral M., Gortazar C. 2006. Wild boar and red deer display high prevalences of tuberculosis-like lesions in Spain. *Vet Res*;37(1):107-19.

Zanella G., Duvauchelle A., Hars J., Moutou F., Boschioli M.L., Durand B. 2008. Patterns of lesions of bovine tuberculosis in wild red deer and wild boar. *The Veterinary Record* 163:43-47

23. Appendix 5: Domestic livestock market routes in Ethiopia

Map illustrating the domestic livestock market routes in Ethiopia (source: ILRI 2007)



24. Appendix 6: Drugs used during the various field works

1. Cattle deworming

Albendazole Bolus 2500 mg, Ashialben 2500, Ashish Life Science PVT.LTD. 213, Laxmi Plaza, New Link Road, Andheri (W), Mumbai- 400053. India

Tetraclozan, 2400mg, Oxyclozanide & Levamisole Hydrochloride, Choong Ang Biotech CO.,LTD. 477, Mokrae-dong, Ansan-city, Kyungki-do, Korea

2. Anti-trypanosomiasis agent

Veridium™ 1 g (Isometamidium chloride hydrochloride) prevention & treatment of trypanosomiasis. CEVA Santé animale, 33501 Libourne- France

3. PPD

Bovine tuberculin PPD, PL 3326/4006

Avian tuberculin PPD, PL 3326/4007

Veterinary Laboratories Agency (Weybridge), New Haw, Addlestone, Surrey KT15 3NB, UK

25. Curriculum vitae

Surname/Name: Tschopp Rea
Date of birth: 11.01.1974
Nationality: Swiss
Languages: Fluent in German, French, English, basic knowledge of Spanish and Amharic
Adress: Im Moos, 7437 Nufenen, Switzerland
Phone number: +41 81 664 14 14
E-Mail: rea.tschopp@unibas.ch

Education

- 2005-2008: PhD in Epidemiology
Swiss Tropical Institute (STI)
Department of Public Health and Epidemiology
PhD thesis: Bovine tuberculosis in Ethiopian local cattle and wildlife: epidemiology, economics and ecosystems as part of the Wellcome Trust project on BTB in Ethiopia, in collaboration with Imperial College, London; VLA, Weybridge; AHRI/ALERT Addis Abeba Ethiopia; ILRI Nairobi, and Trinity College, Dublin.
Supervisors: Prof. Marcel Tanner, PD. Dr. Jakob Zinsstag
- 2002-2003: MSc Wild Animal Health
The Royal Veterinary College, the University of London and the Institute of Zoology
MSc thesis: Infectious keratoconjunctivitis in chamois (*Rupicapra rupicapra*) in Switzerland between 2001-03.
Supervisors: Dr. Marco Giacometti, Dr. Mark Fox, Tony Sainsbury
- 2000-2001: Veterinary doctorate thesis
Veterinary faculty of Bern, Department of Bacteriology
Doctorate thesis: Epidemiological study of risk factors associated with *Mycoplasma bovis* infections in fattening calves
Supervisor: Prof. J. Nicolet
- 1998: Diploma of the veterinary medicine faculty of Bern (Med. Vet)
1993-98: Veterinary Faculty of Bern (Switzerland)
1993: Swiss Matura (Chur- Switzerland)
1992: Baccalauréat D (Brazzaville- Congo)

Meetings and Seminars attended

NCCR meeting, Awash, Ethiopia. December 2007. Oral presentation on BTB epidemiology and economics in Ethiopia

Stakeholder meeting “Bovine tuberculosis in Ethiopia”, June 2007, Addis Abeba, Ethiopia. Oral presentation on the epidemiology of BTB in Ethiopia

Workshop on epidemiology, June 2007, Addis Abeba, Ethiopia

4th Africa and Middle East Wildlife Disease Association Conference, Sept 2006, Kenya. Poster: BTB at the wildlife-livestock interface in Ethiopia.

NCCR meeting Bahar Dar, Ethiopia, 2005. Oral presentation on BTB in Ethiopia

International *M. bovis* conference, August 2005, Dublin, Ireland

3rd Africa and Middle East Wildlife Disease Association Conference, 11th-13th December 2004, Abu Dhabi- United Arab Emirates: Urinalysis in Falconidae (oral presentation).

Annual Research Conference, 29th October 2003, Institute of Zoology, ZSL, London: Infectious keratoconjunctivitis in chamois in Switzerland between 2001-03 (oral presentation).

Work experience

2004-05 Switzerland: Field-expertise on wolf-sheep interactions on alpine pastures.
Research in infectious keratoconjunctivitis in chamois and alpine ibex
Locum in private veterinary practices (large and small animals)

2004 Belize (Central America): Veterinary work for “Lifeline”: rehabilitation and rescue centre for Central American free-ranging wild felidae (puma, jaguar, ocelot, margay); In charge of medical treatment, conservation, education and rehabilitation of wild cats.

2003-04 Nepal: King Mahendra Trust for Nature and Conservation (KMTNC): Veterinary work at the Central Zoo in Kathmandu (medical treatment and education), in Royal Chitwan National Park and Royal Bardia National Park (rhino translocation, tiger camera trapping, community development work in buffer zones, treatment of domestic elephants.

2003 Dubai Falcon hospital (United Arab Emirates): 3 months internship (Oct- Jan). Clinical work with birds of prey and zoo animals. Translocation of Arabian Oryx and sand gazelles.

2002 Veterinary employee, private mixed animal vet practice of Dr. J.P. Gschwind, Mormont, Switzerland.

1999- 01 Veterinary employee, private mixed animal vet practice of Dr. P. Bonnemain, Porrentruy, Switzerland.

1996 Volunteer work (4 months) in South Africa:

- Dr. G. DeCort, Ogies: Large and small animal practice.
- Dr. G.P.Staley, Howick, Kwazulu-Natal: Large animal practice.
- Dr. Dave Cooper, Umfolozi-Hluluwe National Park, Kwazulu-Natal.

Professional societies

Member of the World Association of Wildlife Veterinarians (WAWV)
Member of WDA (Wildlife Disease Association), Africa and Middle East section

Publications

Tschopp R., Bonnemain P., Nicolet J., and A. Burnens (2001). Epidemiological study of risk factors associated with *Mycoplasma bovis* infections in fattening calves (in German). *Schweiz Arch Tierheilk* band 143, Heft 9.

Tschopp R., Zimmermann L., Frey J., and M. Giacometti (2005). Infectious keratoconjunctivitis outbreaks in free-living Caprinae in Switzerland from 2001 to 2003. *Vet Rec* 157(1): 8-13

Tschopp R., Bailey T., DiSomma A., and C. Silvnose (2007). Urinalysis, a possible Non-Invasive Health Screening Procedure in Falconidae. *J Avian Med Surg* 21(1): 8-12

Tschopp R., Getu M., Aseffa A., and J. Zinsstag (2008). Approach to assess the economic impact of bovine tuberculosis in Ethiopia. *Ethiop J Health Dev* 22 (Special Issue)

Tschopp R. (2008). Setting bovine TB in the animal health context in Ethiopia: Animal Health and husbandry. Working group report. *Ethiop J Health Dev* 22 (Special Issue).

Tschopp R., Schelling E., Hattendorf J., Aseffa A., and J. Zinsstag (2009). Risk factors of Bovine Tuberculosis in cattle in rural livestock production systems of Ethiopia. *Prev Med Vet* 89: 205-211

Tschopp R., Schelling E., Hattendorf J., Young D., Aseffa A., and J. Zinsstag (2010). Repeated representative cross-sectional skin testing for bovine tuberculosis in cattle in traditional husbandry system in Ethiopia. *Vet Rec* 167: 250-256

Bonfoh B., Schwabenbauer K., Wallinga D., Hartung J., Schelling E., Zinsstag J., Meslin F-X., **Tschopp R.**, Akakpo J.A., and M. Tanner (2010). *Human health hazards associated with livestock production*. In: *Livestock in a changing landscape: drivers, consequences, and responses (Vol I)*. Eds: Steinfeld H., Mooney H.A., Schneider F., and Neville L.E. Island Press. Pp 197-221

Tschopp R., Berg S., Argaw K. , Gadissa E., Habtamu M., Schelling E., Young D., Aseffa A., and J. Zinsstag (2010). Bovine tuberculosis in Ethiopian wildlife. *J Wildl Dis* 46(3): 753-762

Tschopp R., Aseffa A., Schelling E., Berg S., Hailu E., Gadisa E., Habtamu M., Argaw K., and J. Zinsstag (2010). Bovine tuberculosis at the wildlife-livestock-human interface in Hamer Woreda, South Omo, Southern Ethiopia. *PloSOne* 5(8): e12205.
doi:10.1371/journal.pone.0012205

Tschopp R., Aseffa A., Schelling E., and J. Zinsstag (2010). Perception of farmers towards agriculture, livestock and natural resources in Ethiopia. *Journal of Mountain Research and Development* 30(4):381-390

Zinsstag Z., **Tschopp R.**, and E. Schelling. *L'interface faune sauvage – élevage – homme de la tuberculose bovine en Afrique*. Book chapter in “Écologie de la santé et Conservation”. In Gauthier-Clerc M. and Thomas F. (Eds) *Écologie de la santé et biodiversité*. Group de Boeck SA, Bruxelles. 2010, Partie 2, Chapitre 7. pp 259-270