



ZOONOTIC DISEASES AND ONE HEALTH

SOUTH & SOUTHEAST ASIA

PATHOGEN GENOMICS PRIORITIZATION & IMPLEMENTATION WORKSHOP

September 9-13, 2024 Bangkok, Thailand

WORKSHOP PARTNERS







Sydney Infectious Diseases Institute
Centre for Infectious Diseases & Microbiology
WHO Southeast Asia Regional Office (SEARO)
WHO Western Pacific Regional Office (WPRO)
WHO International Pathogen Surveillance Network (IPSN)

Opening thoughts...

Lower historic investment in animal disease systems means pathogens are often less well characterized

Foundational surveillance systems may not be robust

Value of genomics use case can be less clear

- When is it worth the investment to develop effective, genomics-informed interventions?
- What needs to be built/improved before genomics is added?

Balancing food security, agricultural economic impact, and human health priorities is a big challenge

One Health is hard!



One Health and Zoonotic Diseases





One Health and Zoonotic Diseases

Challenges

Many unknowns

Less funding for animal health

Lack of collaboration

'Less relevant'

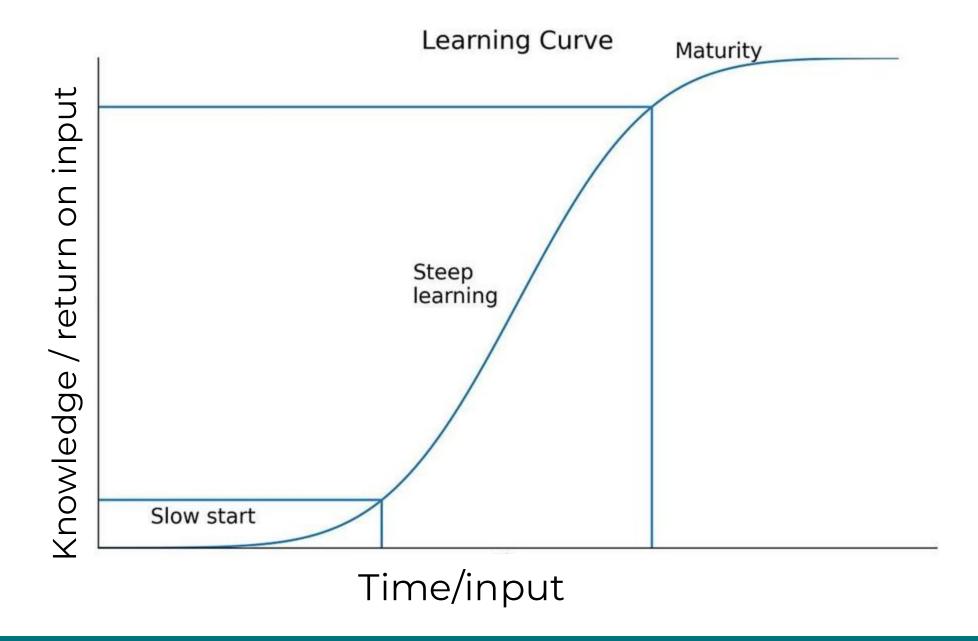
Zoonotic and novel pathogens



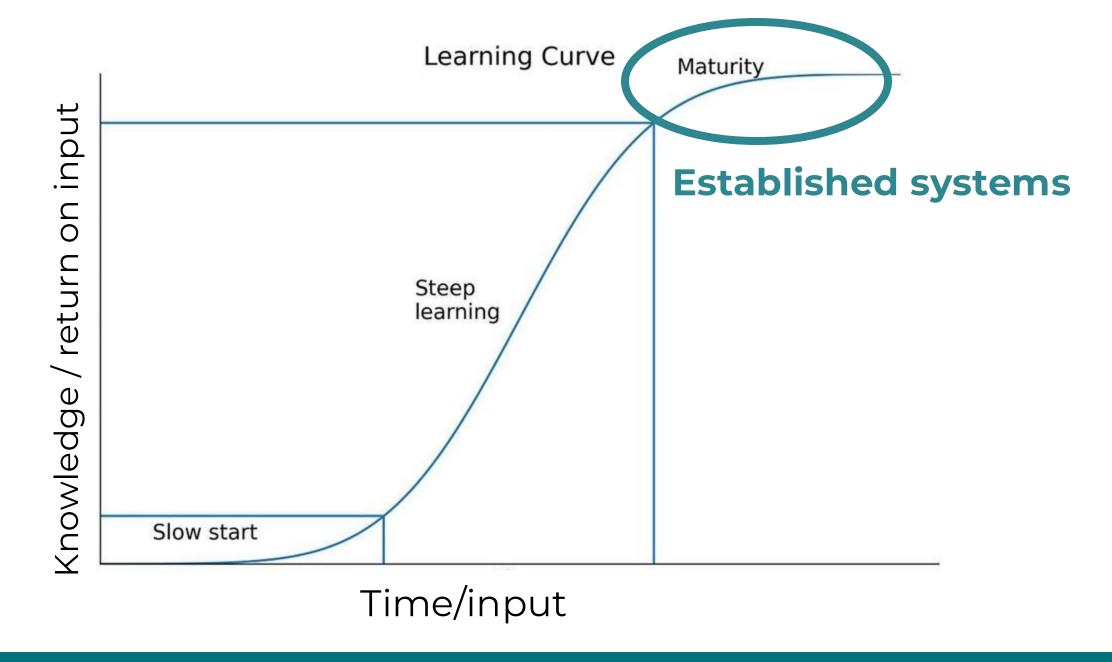
One Health and Zoonotic Diseases

Challenges	Opportunities	
Many unknowns	Steep learning curve*	
Less funding for animal health	Collaboration/shared resources	
Lack of collaboration	Coordination/shared knowledge	
'Less relevant'	Animal health = Human health	
Zoonotic and novel pathogens	Animals as sentinels	

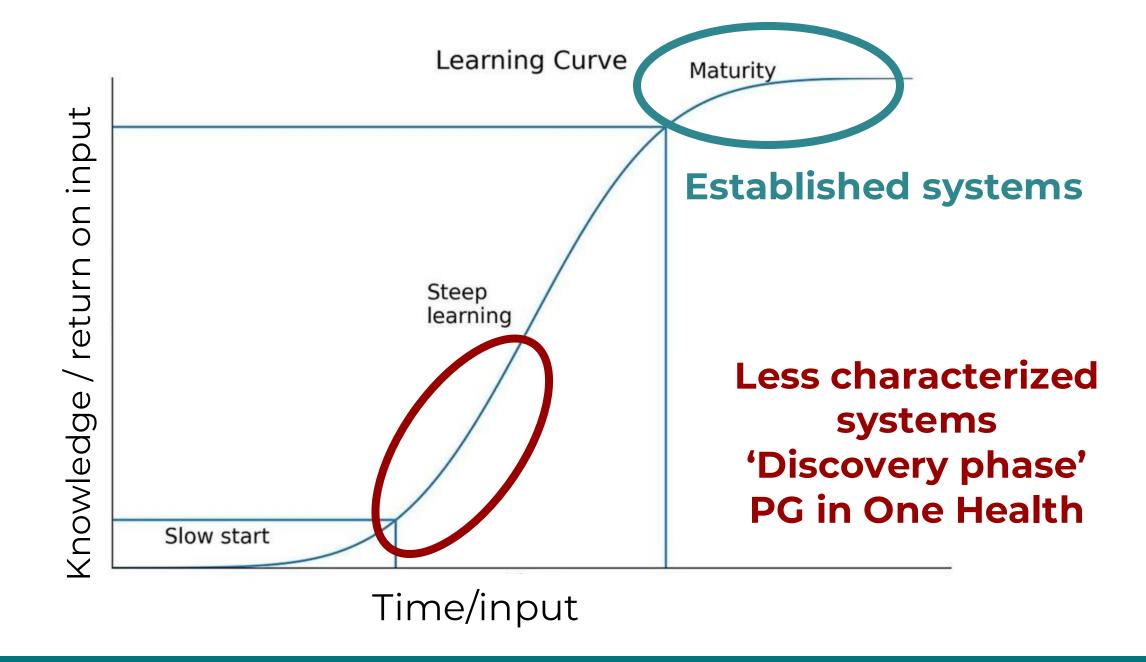














Zoonotic disease/one health resources

Tools to improve capacities and coordination across human and animal sectors































Zoonotic disease/one health workshops



International Health Regulation -Performance of Veterinary Services: collaboration for improved prevention, detection, response



Response Preparedness Program:

Multi-sectoral outbreak response framework

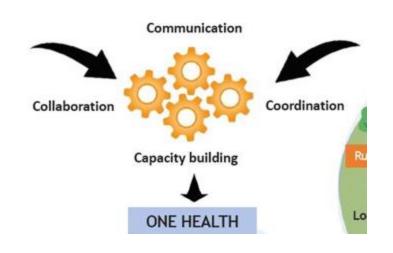
RePrep workshop

https://www.who.int/activities/bridging-human-and-animal-health-sectors https://www.who.int/initiatives/tripartite-zoonosis-guide/response-preparedness



Zoonotic disease/one health resources

Tools to improve capacities and coordination across human and animal sectors









Context









Joint Risk Assessment





Risk Communication









Perspective from Pakistan...

Dr. Ayesha Farooq Senior Scientific Officer/In Charge Microbiology Laboratory National Institutes of Health Pakistan

ONE HEALTH ZOONOTIC DISEASE PRIORITIZATION PROCESS



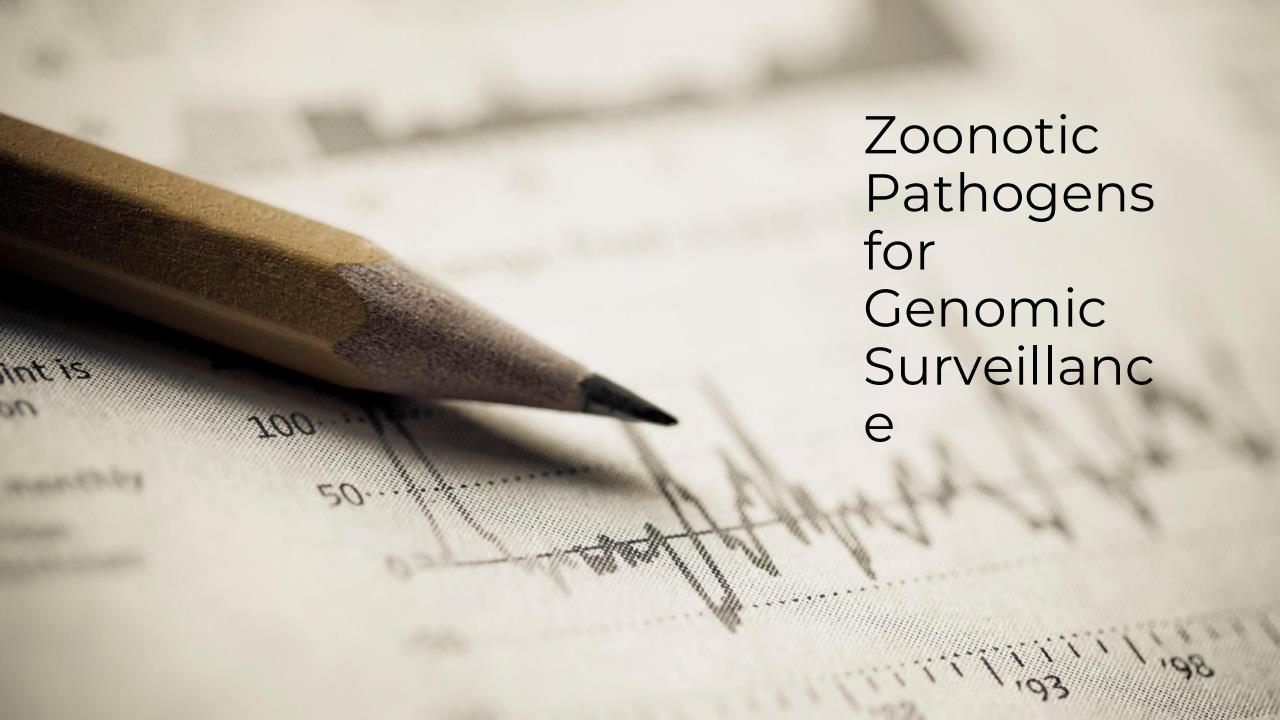
One Health recognizes the connection between human, animal, and environmental health.

The One Health Zoonotic Disease Prioritization (OHZDP) process brings together representatives from human, animal, and environmental health sectors, as well as other relevant partners, to prioritize zoonotic diseases of greatest concern for multisectoral, One Health collaboration in a country, region, or other area. This process uses a transparent approach and incorporates equal input from all represented One Health sectors working at the human-animal-environment interface.

Goals of the OHZDP Process

- To use a multisectoral, One Health approach to
 - 1. Prioritize zoonotic diseases of greatest concern
 - Develop next steps and action plans to address the priority zoonotic diseases in collaboration with One Health partners





Zoonotic Priority Pathogens

- Zoonotic Influenza virus
- Rabies
- CCHF
- Anthrax
- Brucellosis
- Salmonellosis





Priority Zoonotic Pathogens

- Zoonotic Avian Influenza
- Emerging Corona Viruses (COVID -19, SARS, MERS)
- Nipah virus encephalitis
- Rabies
- Ebola





Priority Zoonotic Pathogens

Zoonotic Influenza

Rabies

Nipah virus encephalitis

Anthrax

Brucellosis

Zoonotic Tuberculosis (M. bovis)





Indonesia (Zoonotic priority Pathogens)

- Zoonotic Avian Influenza
- COVID 19
- Zoonotic Swine Influenza
- Anthrax



Country Specific Priority Zoonotic Diseases (OHZDP workhop)

BANGLADESH	THAILAND	INDONESIA	PAKISTAN
Zoonotic Influenza Rabies Nipah virus encephalitis	Zoonotic Avian Influenza Emerging Corona Viruses (COVID-19, SARS, MERS) Nipah virus infection Rabies Ebola	Zoonotic Avian Influenza Covid-19 Anthrax Zoonotic Swine Influenza	Zoonotic Influenza virus Rabies CCHF
Anthrax Brucellosis Zoonotic Tuberculosis			Anthrax Brucellosis Salmonellosis

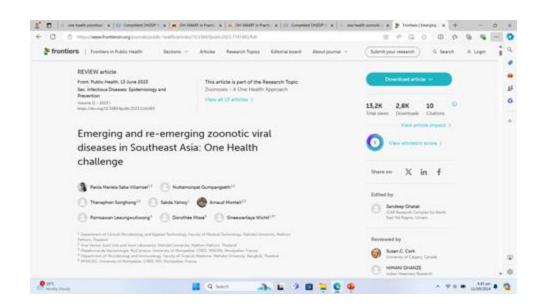


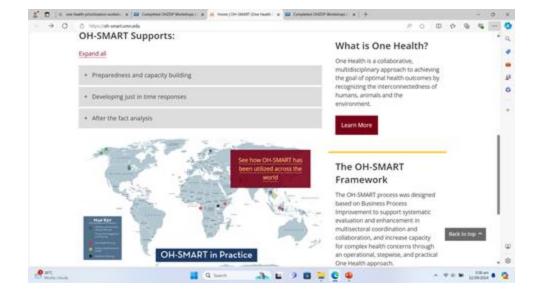
One Health Prioritization workshop

- One Health Zoonotic Disease Prioritization (OHZDP) workshop, jointly organized by CDC, USDA, US DOI in Dec, 2017. https://www.cdc.gov/one-health/php/prioritization/index.html
- Country specific priority zoonotic diseases were identified using a mixed methods prioritization process, the One Health Zoonotic Disease Prioritization (OHZDP) tool, developed by CDC. https://www.cdc.gov/one-health/php/prioritization/index.html
- One Health Systems Mapping & Analysis Resource Toolkit OH SMARTTM, co- developed by USDA 7 university of Minnesota, used to review & visualize the One Health system in place to address the priority zoonotic diseases.



OH-SMART Framework







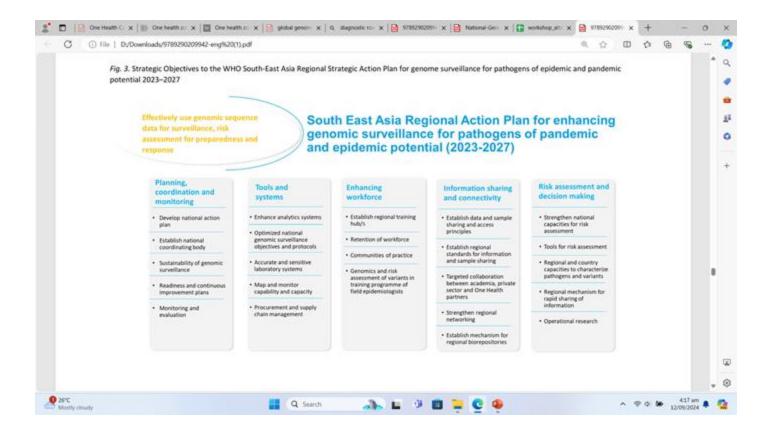
Integrated lab networking & Genomic surveillance







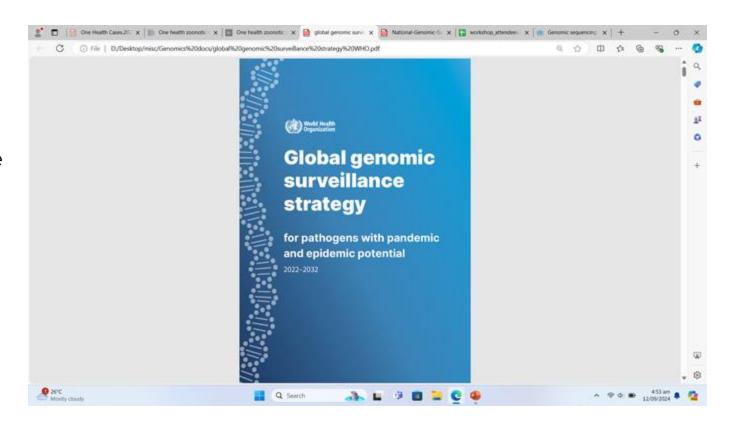
South East Asia regional roadmap for Genomic Surveillance (2023-2027)





Pathogen Selection

Zoonotic pathogens selected by OH- SMART tool can be assessed for potential candidate of Genomic Surveillance for maximum public health impact in specific country context.





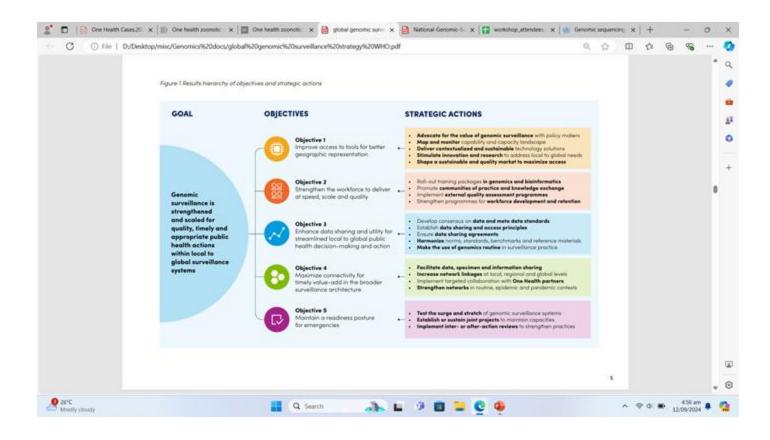
Genomic Surveillance for Country specific Zoonotic pathogens



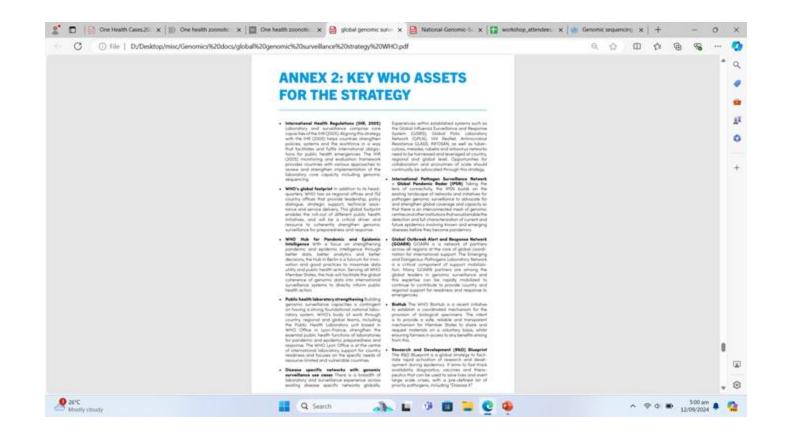




Genomic Surveillance: Objectives & Strategic Actions









- Priority zoonotic diseases are already mapped by most countries according to public health impact.
- Suitable candidate from this list could be selected.
- Consortia could be made with different research and surveillance groups working in different countries



Candidates for Genomic Surveillance

- Case histories can be build around:
- Brucella
- Leptospira
- AMR Bacteria (CRE KP)



Novel Pathogen Genomic Surveillance

- Clinical cases of Malaria
- Negative for all available ICT testing methods
- Could it be



Menti Responses

What One Health efforts are happening in your countries?

In planning, in progress, completed







CASE STUDY#6: ZOONOTIC DISEASE HYPOTHETICAL BACTERIAL PATHOGEN INFECTING LIVESTOCK AND HUMANS

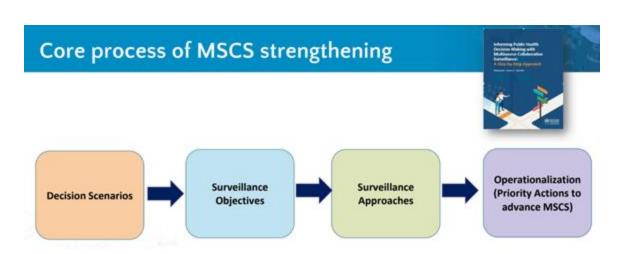
WORKSHOP PARTNERS

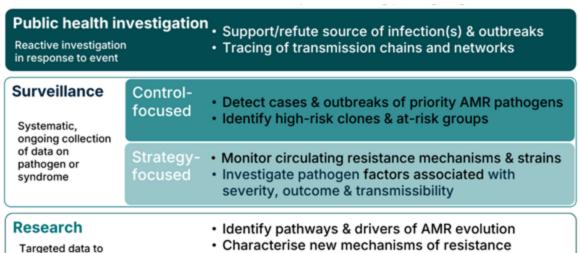






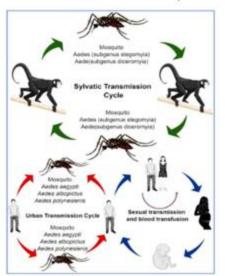
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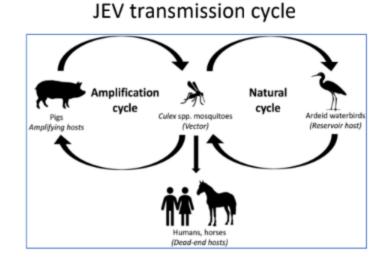




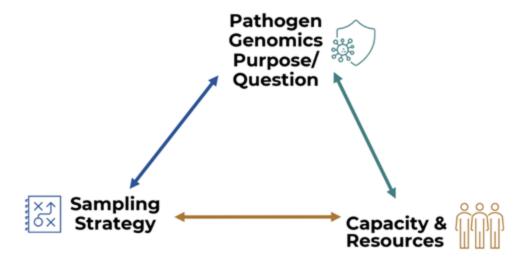
· Develop point of care tests

ZIKA transmission cycle





drive knowledge





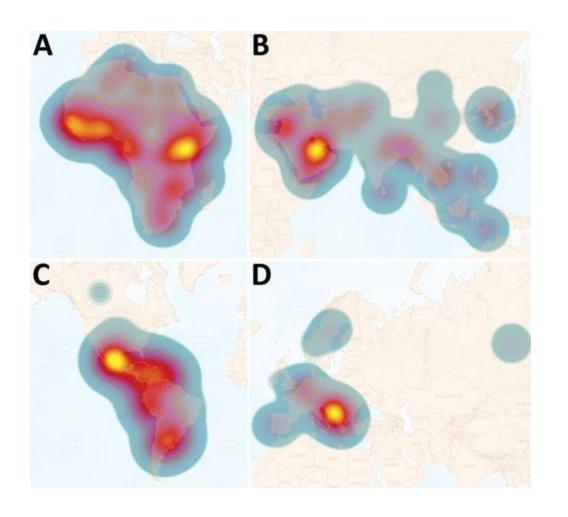
Background – 'Bruntellosis'



- Livestock are important for human health and economics
- Many of Asia's ecosystems & agriculture conducive to zoonotic diseases
- **Bruntellosis**: A significant threat affecting livestock and human health
- Critical food safety/security issue



Background – 'Bruntellosis'



Heatmaps of annual incidence of human bruntellosis estimated per 1 million population at risk.

In Asia the average risk is ~500 cases per million population with a high of ≥4000.

Incidence has been increasing rapidly across the region

https://wwwnc.cdc.gov/eid/article/29/9/23-0052_article



Bruntella pathogen

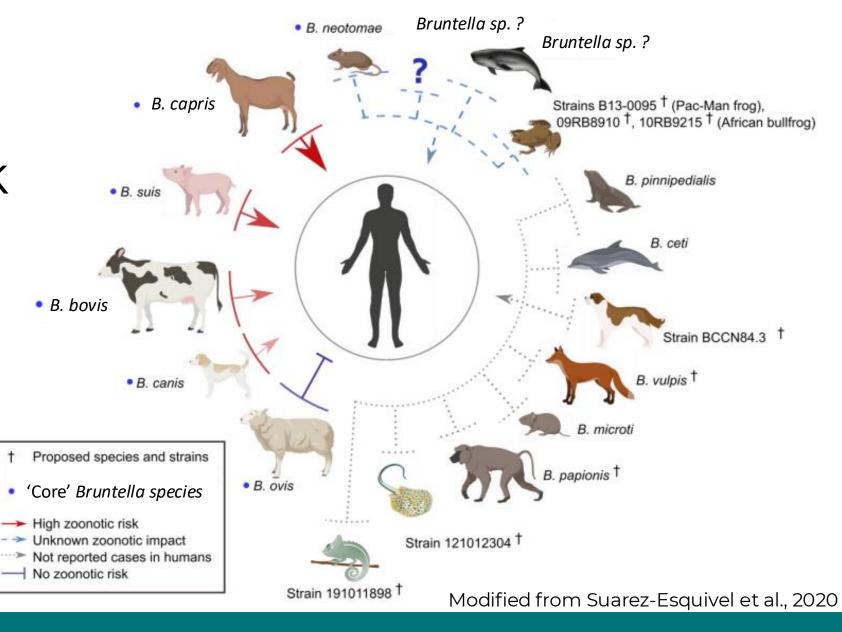
- Many species/strains in Bruntella genus
- Gram negative coccobacilli bacteria
 - Small, non-motile, facultative intracellular
- Mutates slowly
- Stable in environment for prolonged periods
- Virulence factors known to vary across species/strains
- Antimicrobial resistance is common...
 - ...genetic markers for AMR poorly characterized





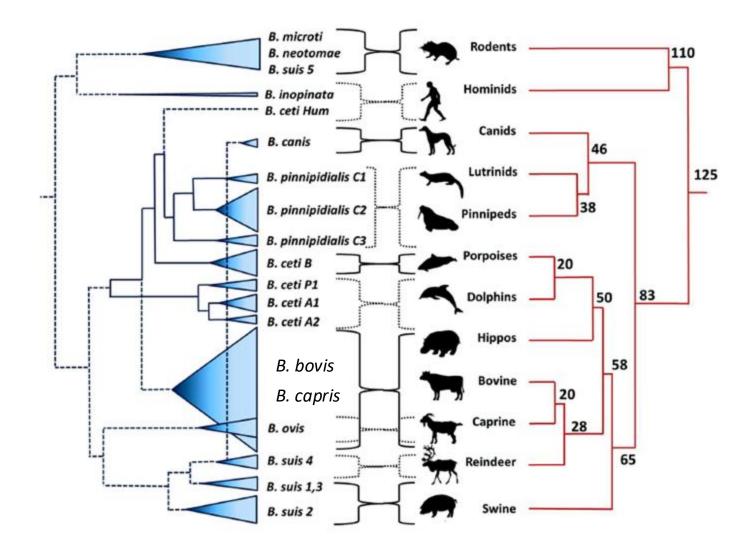


Diversity and Zoonotic Risk





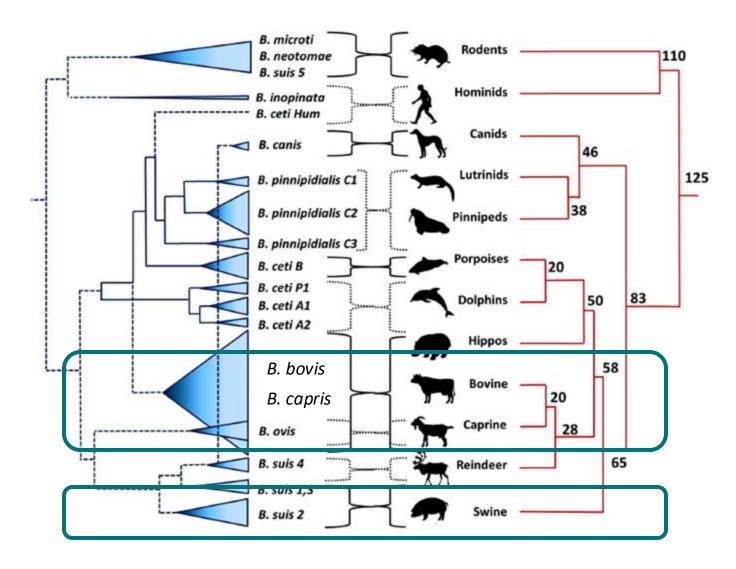
Bacteria/Host Relationships







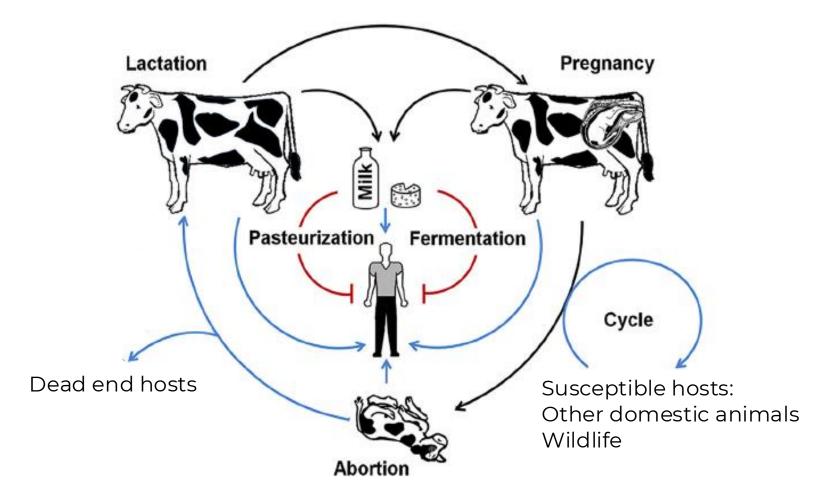
Bacteria/Host Relationships





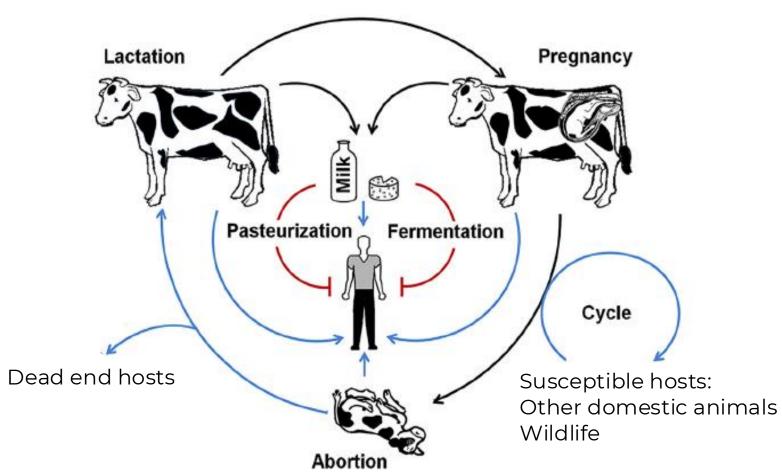


Transmission of B. bovis





Transmission of B. bovis



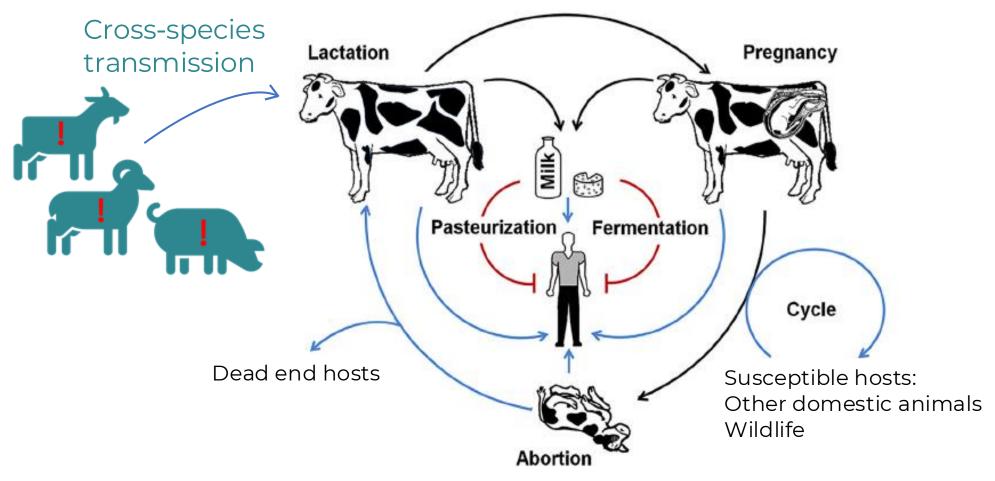
High risk populations

20% of people have regular contact with livestock

30% of people routinely consume unpasteurized foods

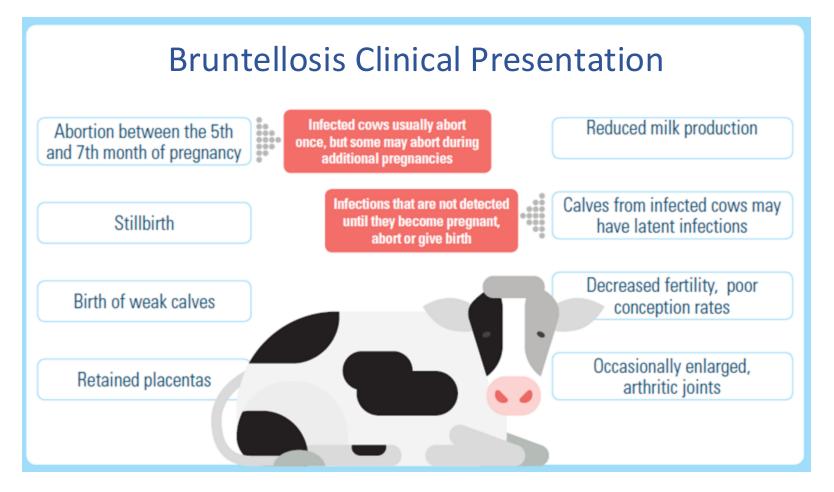


Transmission B. bovis





Disease in animals





Number of Bruntellosis patients 200 400 1200 Fever Weakness Malaise Headache Anorexia Pain Constipation Rigors Splenomegaly Cough Sore throat Arthralgia Abdominal tenderness Rash **Epistaxis** Abdominal pain Hepatomegaly Vomiting Diarrhoea Visual problems Adenitis Depression Insomnia **Arthritis** Softness over gall bladder Loss weight **Bronchitis Buccal ulcers** Melaena Irritability Somnolence Photophobia Orchitis Haemoptysis

Human Disease

Non-specific clinical presentation

Mild to severe* 2% case fatality rate

Not prioritized for testing

Underdiagnosed

Moreno, 2014



Bruntella Detection

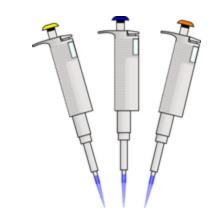
 Laboratory tests available for detecting bacteria (PCR) & antibodies (ELISA)

Do not differentiate species (genus only)

Clinicians rarely order tests

 Species identification requires extensive microbiological characterization or specialized molecular assays (rarely performed)

• Whole genome sequencing is only way to <u>characterize</u> strains









Genetic diversity

No information about the genetic diversity of Bruntella is known in your country...

...Neighboring countries that have done genomic surveillance typically characterize 3 - 6 genetically distinct strains per species



Bruntella Control





	Human	Animal
Vaccine	Does not exist	 2 vaccines available for animals targeting <i>B. bovis</i> or <i>B. capris</i> BUT <u>not</u> currently in use in your country Vaccine effectiveness 40% - 70% (reported)*



Bruntella Control





	Human	Animal
Vaccine	Does not exist	 2 vaccines available for animals targeting <i>B. bovis</i> or <i>B. capris</i> BUT <u>not</u> currently in use in your country Vaccine effectiveness 40% - 70% (reported)*
Treatment	 45-day course of antibiotics Reported: 80% cure/20% relapse (but unknown in your country) Resistance markers unknown 	Cull/removal from heard



Scenario

- The nation-wide prevalence of Bruntellosis has been increasing in animals and people
- Most human cases can be epidemiologically linked to cattle (B. bovis suspected but B. suis and B. capris also circulate)
- Only large-scale agricultural operations (> 500 animals) are included in current test/cull surveillance (~60% of total livestock)
- Primary transmission routes among animals/herds unknown
- Test and cull of positive animals is only current control strategy



Your task

You are assigned to be part of a team tasked with recommending a public health response that will lead to a decrease in the incidence of bruntellosis among people (and animals).



Given your background, they ask you to investigate if genomic sequencing can help inform the planning, monitoring, and evaluation of new control efforts.

Assume your country has medium capacity for human health and low capacity for animal health. <u>Please draw on and compare experiences</u> <u>from your home country throughout the discussion.</u>



Menti response

Intervention

List as many possible pharmaceutical and non-pharmaceutical interventions as you can that could be considered to reduce human cases of bruntellosis.



Questions for discussion



- 1. What are some questions for which genomic data could add actionable information about this disease system?
 - For each question you generate, describe a public health intervention that could be designed, refined, or improved using the genomic surveillance data
- 1. Why might it be important to understand if/how cross-species transmission among different livestock (cattle, sheep, goats, pigs) is occurring?
- 2. What are some sampling strategies and metadata would you need to inform the use of pathogen genomics for the following? Be specific:)
 - Table 2 Differences in animal vaccine effectiveness across bacterial species/strains
 - Table 3 Potential impact of genotype on disease outcomes and AMR
 - Table 4 Identifying key transmission pathways among animals within the country
 - Table 5 Determining if import of new cases from neighboring countries is a major factor in the epidemiology
- 4. What stakeholders should be involved in your genomic surveillance and control program and what roles would they play in the surveillance/control efforts you are planning?
- 5. What components of this system are unique because the focal pathogen is zoonotic?



Menti responses

Characterization

Currently your country is only identifying Bruntella bacteria at the genus level...

Why is accurate identification of bacterial **species and strains** important in when planning/monitoring control efforts?



Parting thoughts...

Balancing food security, economic impact, and human health is a big challenge

Lower historic investment means animal disease systems are often less well characterized

- Foundational surveillance systems may not be robust
 Value of genomics use case can be less clear/immediate

Would the country be better off with more effective Bruntella control? YFS!

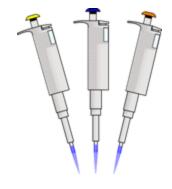
Is it worth the investment to develop effective, genomics-informed interventions to get there???

One Health is hard!



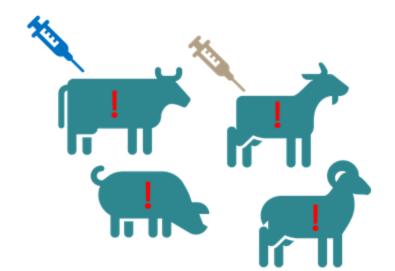
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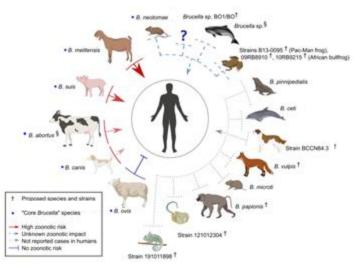














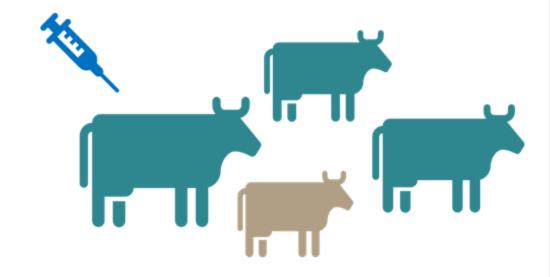
Pathogen prioritisation tool



Implement and monitor control program

Of the many control efforts you plan to use, we will focus on...

Start a vaccination campaign among cattle





Monitor:

- incidence in humans & cattle
- genetic diversity of Bruntella over time





You convene the stakeholders...

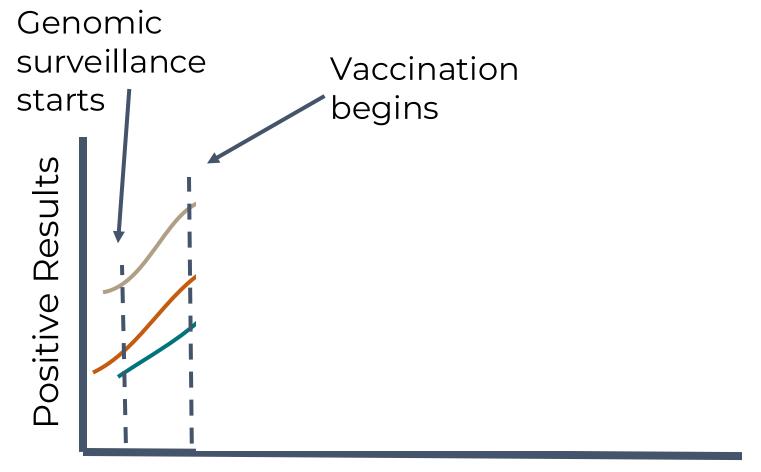
Cross-sector collaboration is difficult!

It takes 18 months to develop a surveillance strategy and start to implement the testing and sequencing plans.

In the meantime...cases continue to rise



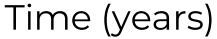
Monitoring interventions



— PCR (cattle)

PCR (human)

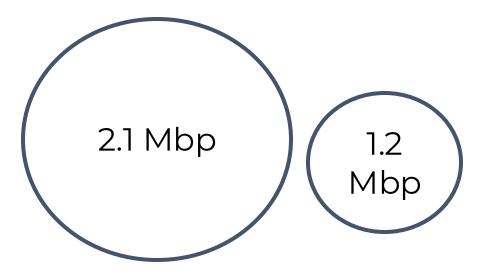
— Serology (human)



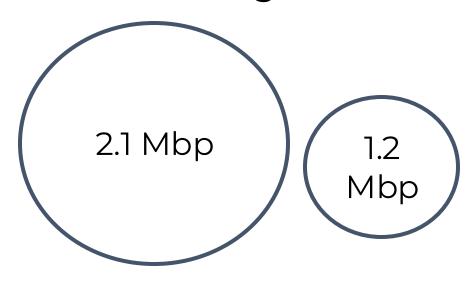


Preliminary results...

B. bovis Reference genome

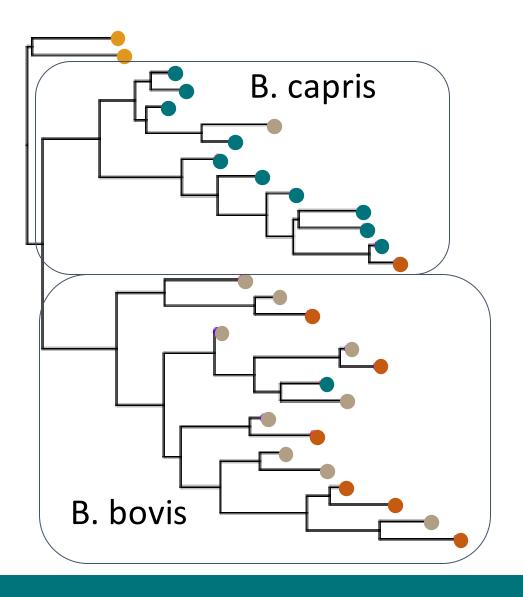


Assemble genomes





Bruntella WGS Phylogeny



Specimen Source







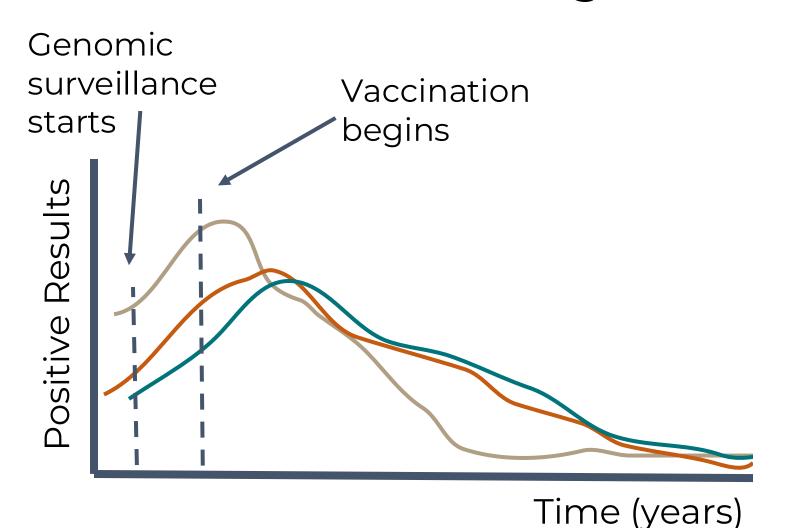


What preliminary conclusions can be drawn from these results?

Is this what we expected?



Monitoring interventions



— PCR (cattle)

PCR (human)

— Serology (human)



Success! Layered interventions work!

Prevalence in both cattle and humans decreases!!!

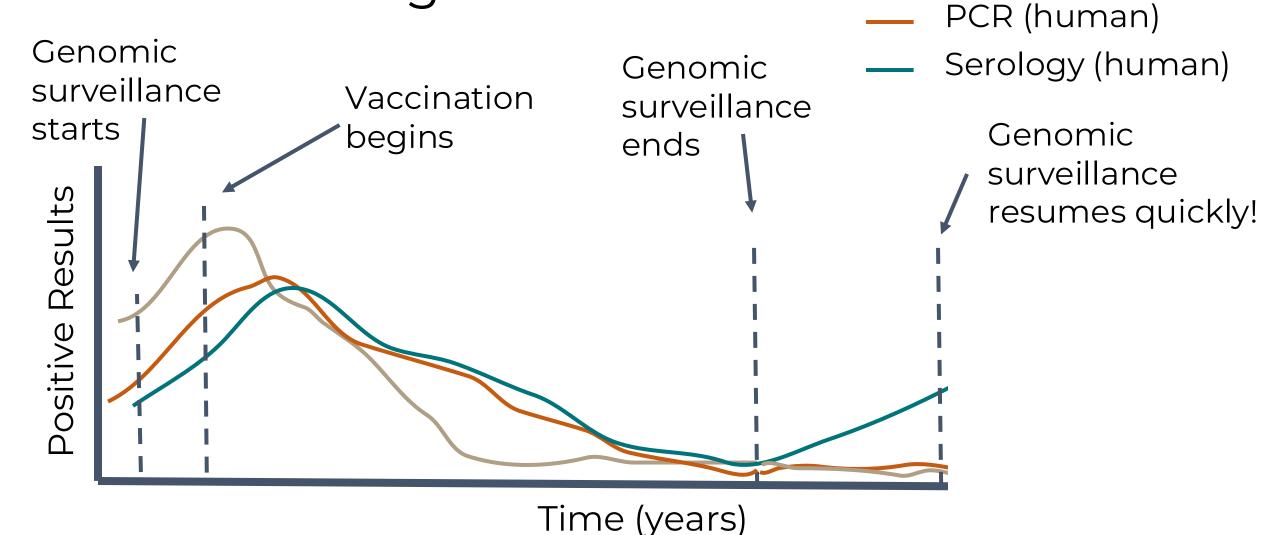
You've saved lives and the agricultural industry of your country...

Genomic surveillance is ended to move resources to higher priority diseases.

Surveillance returns to PCR and serologic assays only:(



Monitoring interventions





PCR (cattle)

Preliminary results...

Reference genome



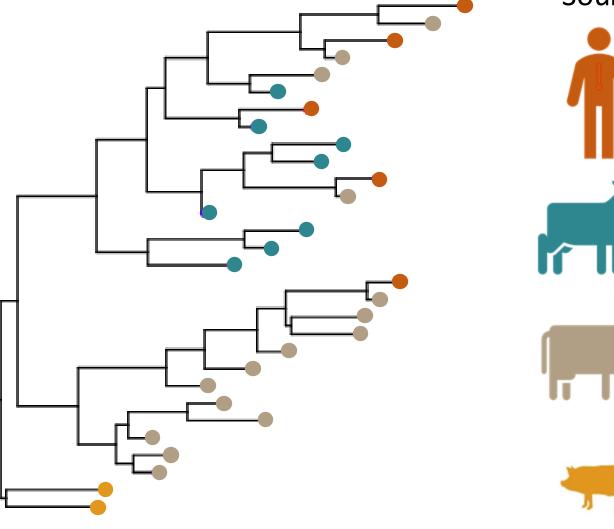
Assemble genomes



Notable deletion in one bacterial chromosome



Bruntella WGS Phylogeny



Specimen Source







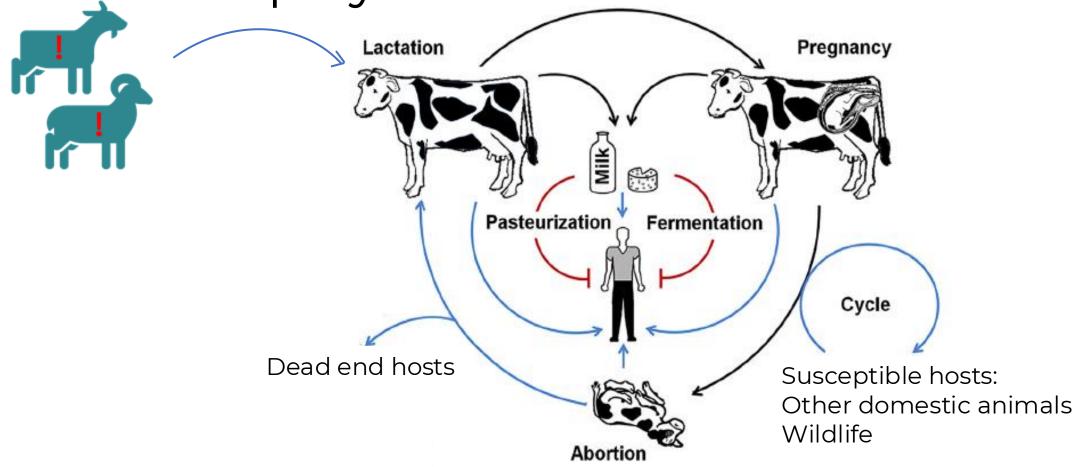


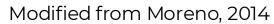
What preliminary conclusions can be drawn from these results?

How might this change your surveillance & intervention efforts?



What role could cross-species transmission play?

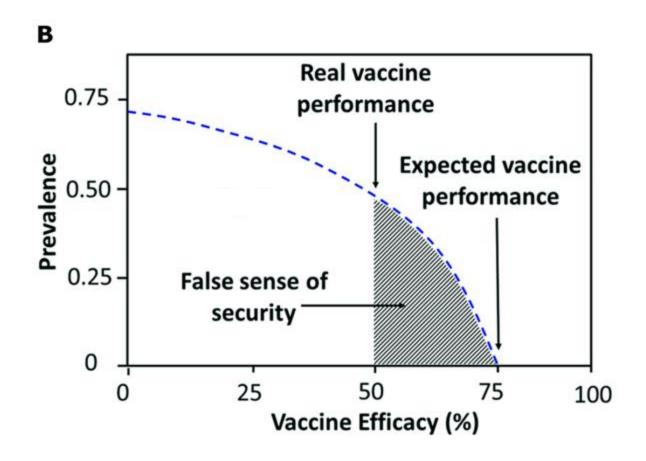


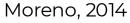




Monitoring Vaccine Effectiveness

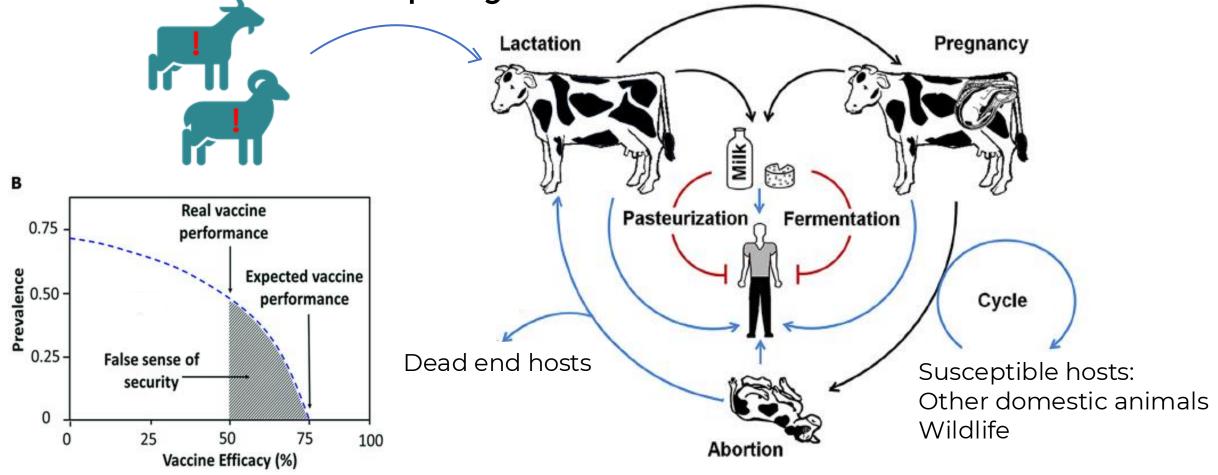
Cattle vaccines are for B. bovis







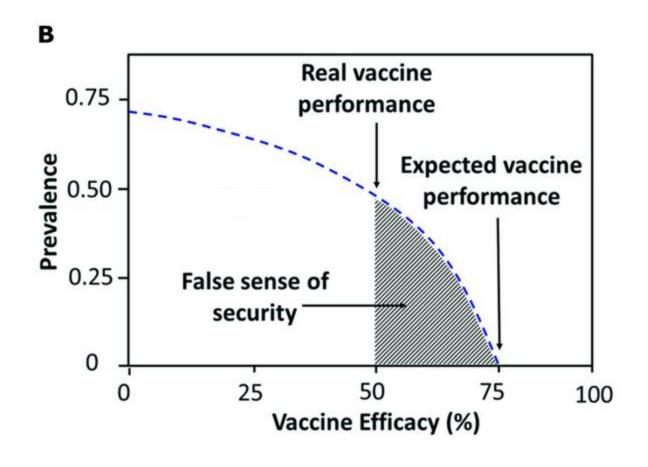
What role could cross-species transmission play?





Monitoring Vaccine Effectiveness

- Is vaccine effectiveness the same in different hosts?
- Does it provide protection against multiple species of *Bruntella*?
- How effective is it against different bacterial strains?
- Which hosts/populations should be vaccinated to have the biggest reduction in to humans transmission?



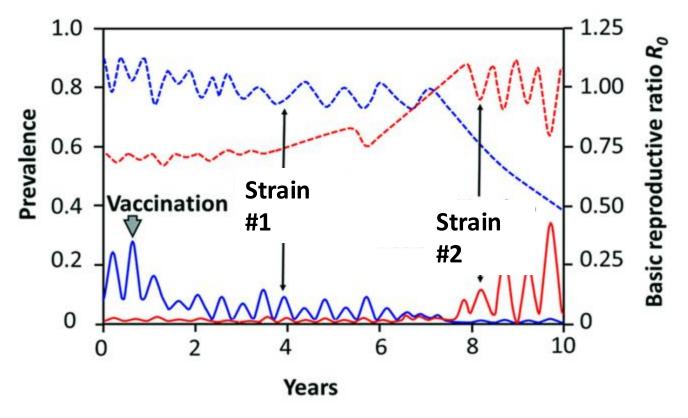


Moreno, 2014

Monitoring Vaccination - Diversity

Vaccine effectiveness

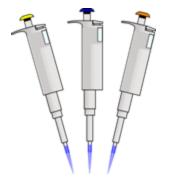
 Changes in strain/species abundance over time

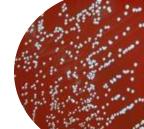


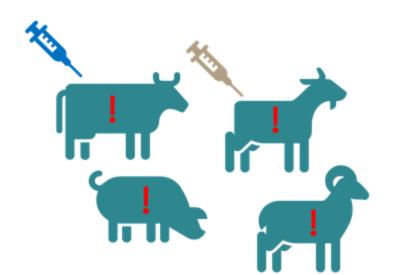


The end 😊





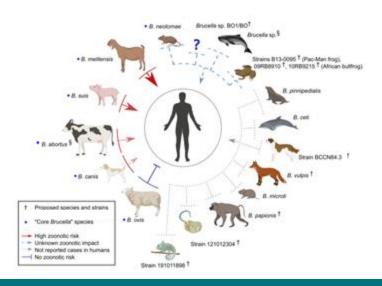


















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