# Brucellosis at livestock/wildife/human interface in Uganda



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## 1. OBJECTIVES

- EXEMPLIFY THE IMPACT THAT A NTD (NEGLECTED DISEASE) CAN GENERATE.
- EVALUATE THE EFFECTS ON POPULATIONS' LIFE QUALITY IN ENDEMIC AREAS OF BRUCELLOSIS.
- DEFINE THE CURRENT SITUATION ABOUT BRUCELLOSIS IN UGANDA.

## 3. BRUCELLOSIS IN AFRICA

LACK OF PROPER DIAGNOSIS

SOCIOECONOMICAL ENVIRONMENT

MORBIDITY

**URBAN AREA** 

**RURAL COMMUNITY** 

INTENSIFICATION DENSITIES

EXTENSIFICATION MOVEMENTS

# 2. NEGLECTED DISEASES AND BRUCELLOSIS

*B. abortus* → cattle

B. melitensis -> small ruminants

HUMAN BRUCELLOSIS OFTEN IGNORED AND UNDERREPORTED → **DEBILITATING AND NONSPECIFIC CLINICAL SIGNS** 

WILDLIFE AS RESERVOIRS

AFFECTS **DEVEOPING COUNTRIES** → + RAW MILK CONSUMPTION & + CLOSE CONTACT TO ANIMALS

#### 4-4.1 DISEASE IN UGANDA

- -CHALLENGE OF DIASEASE CONTROL:
  - -ELIMINATE INFECTED ANIMALS
  - -VACCINATE ANIMALS AT RISK
  - -AVOID CONSUMPTION OF RAW MILK
- -HIGH PREVALENCES IN LIVESTOCK
- -NO RELIABLE EPIDEMIOLOGY OF HUMAN BRUCELLOSIS IN UGANDA
- MOST OF **MILK** IS **MARKETERED INFORMALLY**
- INCREASED **CONSCIOUSNESS** IN THE RECENT YEARS?

# 4.2 DIAGNOSIS OF BRUCELLOSIS IN UGANDA

- NO PATOGNOMONIC SYMPTHOMS
- FREQUENT CONFUSION WITH OTHER FEBRILE CONDITIONS
- SINGLE FBAT NOT SHOWING A REAL RESULT
- RBT MOST RELIABLE AND AFFORDABLE BUT LACKS SENSITIVTY
- BRUCELLA TESTS **NOT ROUTINELY PERFORMED**. ONLY IF MALARIA IS NEGATIVE.

#### 4.3. MEDICAL ASSISTANCE IN UGANDA

- -WEAK HEALTHCARE FACILITIES AND ASSISTANCE
  - -WAITING TIMES
  - -DIAGNOSIS
  - -TREATMENT
- -PRIVATE CENTRES NOT AFFORDABLE FOR MOST PEOPLE
- UGANDA'S GUIDELINES CONSIST IN TWO SUSCEPTIBLE AGENTS

## 4.4 WILDLIFE

- DESCRIBED OUTBREAKS WHERE CATTLE AND **WILDLIFE ABORTIONS** HAPPENED
- OTHER SPECIES INFECTIONS SEEMS TO NEED THE **PREFERENTIAL**
- ■AFRICAN BUFFALO, HYENA, LEOPARD, LION
- **URBANIZATION** CAN BECOME THE NEW HABITAT FOR SOME VECTOR AND RESERVOIRS



## 5. CONCLUSIONS

- -BRUCELLOSIS : NTD AFFECTING COUNTRIES WITH LIMITED RESOURCES
- EPIDEMIOLOGY AS A KEY TO SUSTAINABLE MANGEMENT MEASURES FOR THESE DISEASES
- HIGH PREVALENCES IN UGANDA AND FREQUENT RISK SITUATIONS
- -LACK OF QUALITY HEALTHCARE ASSISTANCE AND POOR SOCIOECONOMIC FACTORS IN COUNTRY
- -EPIDEMIOLOGICAL INVESTIGATIONS IN THE WILD / LIVESTOCK INTERFACE TO GUIDE THE DEVELOPMENT OF EFFECTIVE CONTROL STRATEGIES