KAP Study in Brucellosis among Personnel in Direct Contact with Animals in Fayoum Governorate

Thesis submitted
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For partial fulfillment of Master Degree

IN Public Health

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Abstract

Brucellosis is still an endemic serious disease among domestic animals and human, constituting a public health problem in Fayoum Governorate; hence this descriptive study was carried out to expose the existing knowledge, attitude and practices of the available direct animal contacts towards brucellosis in Fayoum governorate. A total of 300 persons of direct animal contacts were interviewed by using questionnaire form. The findings from the study revealed that, the general awareness about brucellosis was low (about 49.7% of the participants not heard about brucellosis) most of them were animal breeders and abattoir workers. There was significant difference between the 3 groups regarding knowledge (p value=0.000) with higher mean score among animal examinators. The attitude toward preventive measures of brucellosis was positive. Good knowledge and positive attitude especially from veterinary doctors not always translated into sound practices, mainly due to lack of supplies (masks, gloves, coat and vaccines). The general practices of animal breeders regarding, cleaning, disposal of animal waste and vaccination of animals was bad.

Key words: brucellosis, knowledge, practice, contact with animals, animal breeders, brucella species.

Acknowledgement

Firstly, I am extremely grateful and thankful to **Allah** who gave me the ability and power to finish this work.

I am really happy to grasp this opportunity to express my sincere appreciation and deep gratitude to **Prof. Dr. Sahar Ibrahim Yassin,** Assistant Professor of Public Health, Faculty of Medicine, Cairo University for her faithful guidance and supervision during the course of this work. It is a pleasure to record my thanks to her for her continuous help and encouragement throughout this research.

My sincere thanks and gratitude to **Dr.Nargis Albert,** Professor and the head of Public Health, Faculty of Medicine, Cairo University for helping and supporting me.

My sincere thanks and gratitude to **Dr. Ghada Mohamed Nasr El-Din,** Lecturer of Public Health, Faculty of Medicine, Cairo University, for her supervision, valuable advises and scientific help.

- Thanks to **Dr. Naglaa El sherbiny**, Lecturer of Public Health, Fayoum University for her participation in this work.
- Thanks to **Dr**. **Wafaa Yousif**, Assistant Lecturer of Public Health, and Fayoum University for guiding me during preparation of this work.
- Also great thanks to my husband Dr. Sultan Farag, for helping me in the practical work and data collection.

Finally, I wish to thank every body who helped me through out this work.

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List of abbreviation

AFI	Acute Febrile Illness
B. abortus	Brucella abortus
B.C	Before century
B.suis	Brucella suis
b.w	Body weight
BacT/Alert,	Automated blood culture systems seem to shorten the
BACTEC 9000	time needed to detect organisms from blood and other
series, VITAl,	body fluids
ESP	
BAPA	Buffered acidified plate antigen
CFT	Complement fixation test
DFRA	Department for Environment, Food & Rural Affairs.
DNA	Deoxyribonucleic acid
EC	European commission
EDTA	Ethylenediamine tetra-acetic acid.
ELISA	Enzyme linked immunosorbent assay
ESUE	Epidemiologic and Surveillance Unit of Egypt
EU	the European Union
FAO	Food and Agriculture Organization
iELISAs	indirect Enzyme linked Immunosorbent Assays
IgG	Immunoglobulin G
IgM	Immunoglobulin M
M. melitensis	Micrococcus melitensis
MERC project	Middle East Regional Cooperation project
MMHED	Mexican Ministry of Health's epidemiology directorate
MZCP	Mediterranean Zoonoses Control Programme
NASPHV	National Association of State Public Health
	Veterinarians
OIE	Office International des Epizooties
PCR	polymerase chain reaction
PCR	Polymerase Chain Reaction
PHAC	Public Health Agency of Canada
PIMC	Primary Industries Ministerial Council

RBT	Rose Bengal plate test
SAT	Serum agglutination test
SAT	Standard Agglutination Test
S-LPS	Smooth-lipopolysaccharide
TAHRP	Tri-national Animal Health research Project
TMP/SMZ	Trimethoprim-Sulfamethoxazole
US	Union of Soviet
USA	United States of America
USDA	United States Department of Agriculture
WHO	World Health Organization

Introduction

Brucellosis has been an emerging disease since the discovery of *Brucella melitensis* by Sir David Bruce in 1887. The disease was found to affect British armed forces and the local population of Malta. Brucellosis has many synonyms derived from the geographical regions in which disease occurs e.g., Mediterranean fever, Malta fever, Gibraltar fever, Cyprus fever; from the remittent character of the fever e.g., undulant fever; or from its resemblance to malaria and typhoid e.g., typhomalarial fever or intermittent typhoid (Manture et al.,2007).

Brucellosis caused by six pathogenic species: *B. melitensis*, *B. abortus*, *B. suis*, *B.ovis*, *B.canis* and *B. neotomae*. (Moreno et al., 2002), however Human disease is caused mainly by four species, *B. melitensis* (found in sheep and goats), *B. abortus* (found in cattle), *B. suis* (found in swine) and B. canis (found in dogs). Disease from marine species has also emerged (McDonald et al., 2006).

Brucellosis can involve any organ of the body system, as it is a systemic disease. The symptoms of brucellosis are nonspecific. The majority of patients complain of fever, sweats, malaise, anorexia, headache, arthralgia, and back-ache. Human brucellosis is known for complications. Complications can be very diverse depending on the specific site of infection. Osteoarticular, genitourinary, gastrointestinal, nervous, cardiovascular, skin and mucous membranes and respiratory complications are observed. Bone and joint involvement is the most frequent complication of brucellosis and occurs in up to 40% of cases in some series (Mantur et al., 2007).

So brucellosis is considered the most important Zoonosis of social and economic impacts, despite the control measures undertaken by national authorities in many developing countries (**Acha and Szyfres, 2001**).

The epidemiology of human brucellosis has drastically changed over the past decade, several areas traditionally considered to be endemic—e.g., France, Israel, and most of Latin America—have achieved control of the disease. On the other hand, new foci of human brucellosis have emerged (**Pappas et al., 2006**), especially in the Eastern Mediterranean region, brucellosis is considered the main zoonotic disease in this region (**Oraby et al., 2007**).

The world Health Organization reported that, half million new human cases are reported annually worldwide and these numbers are greatly underestimate the true incidence of human disease as the actual number of cases is estimated to be at least 10 times the figures officially announced(WHO,1997 and Semenis,2002).

In Egypt, brucellosis has been reported and recorded as early as 1939, however, attention was directed to the diseases during the 1960s with the importation of Friesian cows the incidence of brucellosis in the cattle on some farms become very high. The disease was reported also in buffaloes, sheep, goats, swine, camels, horses, donkeys, dogs and rats (**Refai, 2003**). And until now, brucellosis is still endemic serious disease among domestic animals and human in Egypt; inspite the attempts that were implanted in the country to control the disease (**Hussein et al., 2005**).

Results from the Egyptian infectious disease hospital surveillance program suggest that brucellosis is a widespread and significant health problem in Egypt, since there is a substantial increase in the number of patients with brucellosis recorded in recent years, from 204 registered cases in 1995 to 3659 registered cases in 2004 (**E S U E**, 2004).

The apparent high burden of disease, coupled with data implicating consumption of dairy products as a risk factor for disease, indicate a need to evaluate the effectiveness of *Brucella* control programs in Egypt. Prior to laboratory and diagnostic upgrades, brucellosis was infrequently diagnosed; with most AFI patients being classified and treated as typhoid fever, which resulted in inappropriate antimicrobial therapy. The high frequency of brucellosis as a cause of AFI, coupled with the significant overlap of symptoms among patients with brucellosis and typhoid fever, emphasize the importance of laboratory-based diagnosis of patients with AFI (Affifi et al., 2005).

In Egypt, brucellosis caused mainly by *B. melitensis and B. abortus* (Young, 1995). But the most common brucella species recorded in Egypt is *B.melitensis* particularly biovar 3 (Refai, 2002).

The main sources of Brucella are infected animals or their products, such as milk, cream, butter, fresh cheese, ice cream, urine, blood, carcasses, and abortion products. Routes .of transmission of the infection to humans include direct contact with infected animals and their secretions through cuts and abrasions in the skin, by way of infected aerosols inhaled or

inoculated into the conjunctival sac of the eyes, or via the ingestion of unpasturized dairy products.

(Memish, 2001).

In Egypt, animal exposure occurs in all regions. In addition, unpasturized dairy products are widely available throughout the country, and this resulted in the wide scale distribution of disease throughout the country (Affifi et al., 2005).

Aim of work

Goal of study.

"Aiming in the future to create a health education program to help in reduction of the prevalence of brucellosis among animal contacts"

Objectives.

- 1-To identify knowledge, attitude and practices of persons in contact with animals regarding modes of transmission and risk factors of brucellosis.
- 2- To help in development of health education messages to help enhancement behavioral change concerning brucellosis.