



Vaccination of small ruminants to prevent Q fever in humans: evidence from the Dutch context

Mirjam Nielen

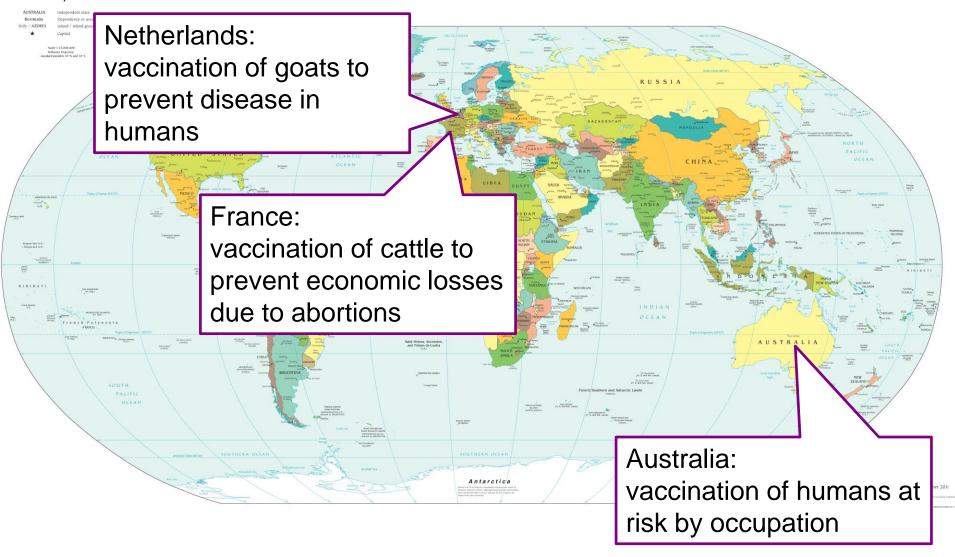
Based on work by Lenny Hogerwerf, Annemarie Bouma, Hendrik-Jan Roest, Piet Vellema





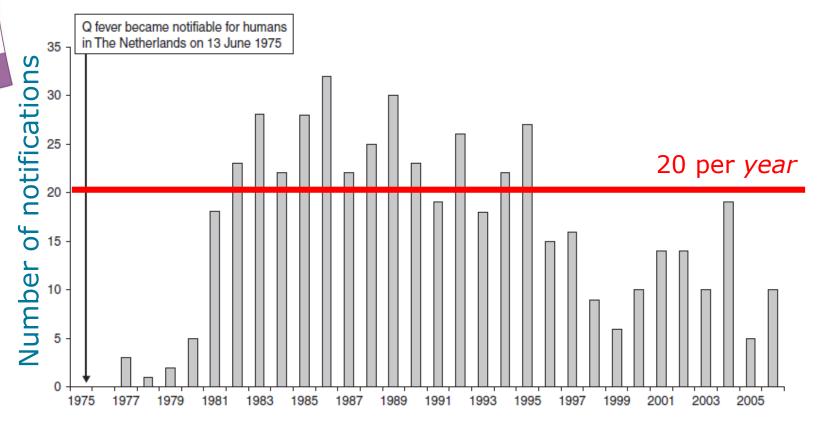
Q fever vaccination worldwide

Political Map of the World



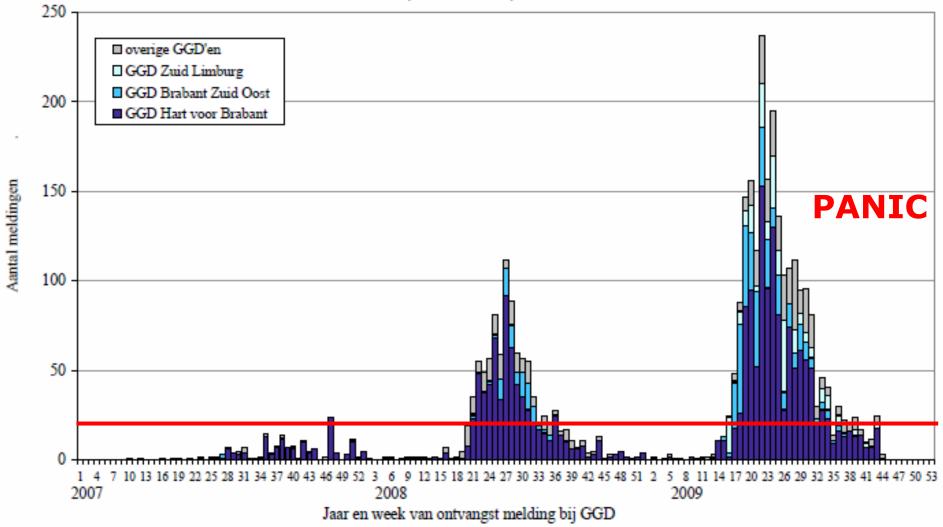
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Human situation 1975-2006 ~20 notifications/yr in The Netherlands, sporadic, often occupational



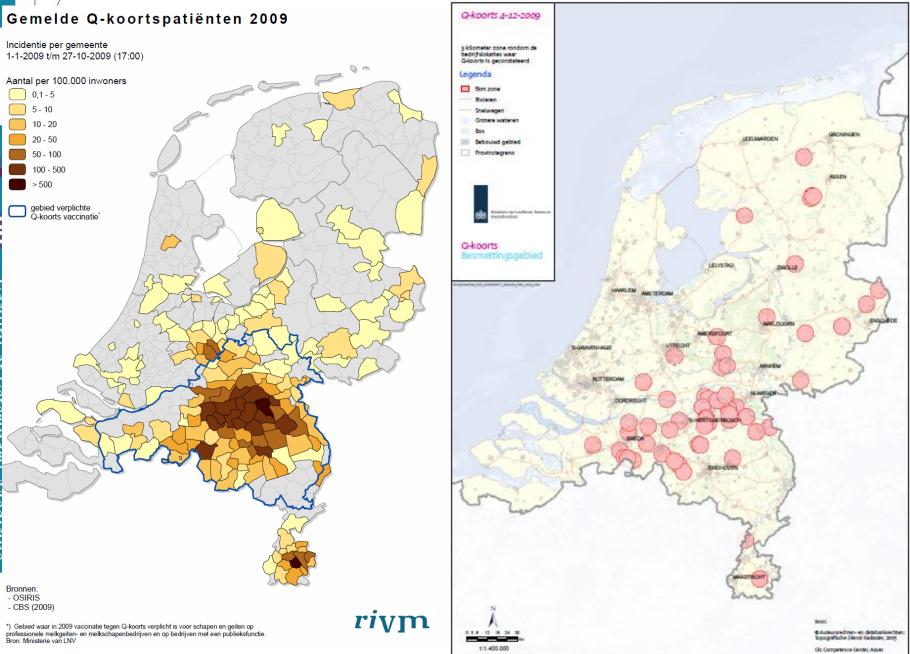
Year

Aantal gemelde patienten met Q-koorts naar week van ontvangst melding bij de GGD, periode 01-01-2007 t/m 28-10-2009. 2007: N=168, 2008: N=1000, 2009: N=2236

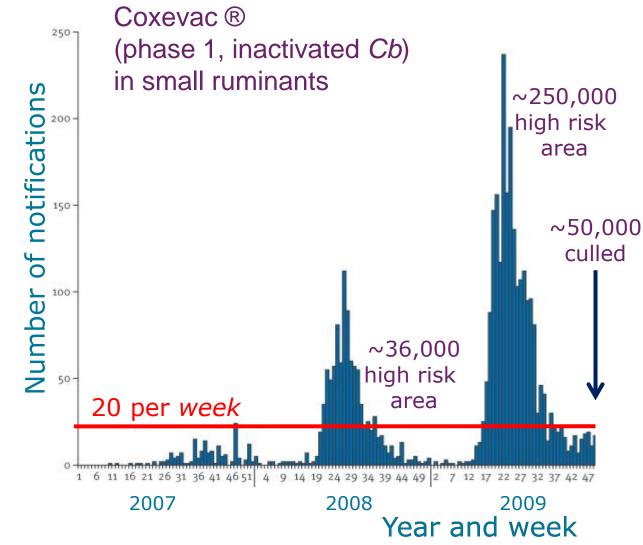


Q-fever damage control end 2009, for dairy goats/sheep

- Vaccination zone (before breeding)
 - Coxevac (phase 1, inactivated Cb)
- Bulk milk tank surveillance (Oct.)
 - PCR, twice monthly
 - positive and negative herds
- Movement control & breeding ban
- Culling of all pregnant animals (Dec.)
 - From PCR bulk milk positive herds



Q-fever vaccination campaign



(Figure: van der Hoek et al, 2012)

uu ~ Faculty of Veterinary Medicine

Q-fever vaccination effect ? In small ruminants (in 2009)

Effect on clinical disease ~ control

- Less abortion (Arricau et al, 2005)

Effect on infection process ~ transmission

- Less susceptibility (Cattle: Guatteo et al, 2008)
- Less infectivity (shedding) (Rousset et al, 2009)

Impossible to study in spring 2010: culling...

- Test culled animals ?
- Vaccinated versus unvaccinated herds
- Nulliparous versus older animals

Purpose

to quantify the effect of vaccination on prevalence and bacterial load in uterine fluid, vaginal mucus and milk of culled pregnant animals

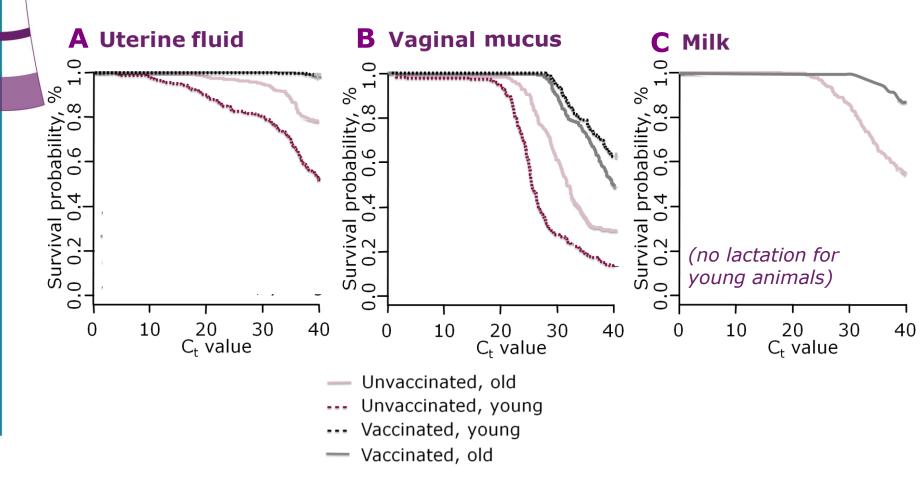
Samples

- ~ 1000 pregnant animals from 13 bulk milk positive herds
- 7 vaccinated and 6 unvaccinated herds
- Old (parous) and young (nulliparous) animals
- Split into 4 analysis groups
 - Unvaccinated young
 - Unvaccinated old
 - Vaccinated young
 - Vaccinated old



Sampling at Rendac

Sampling at rendering plant – Universiteit Utrecht Quantitative PCR results



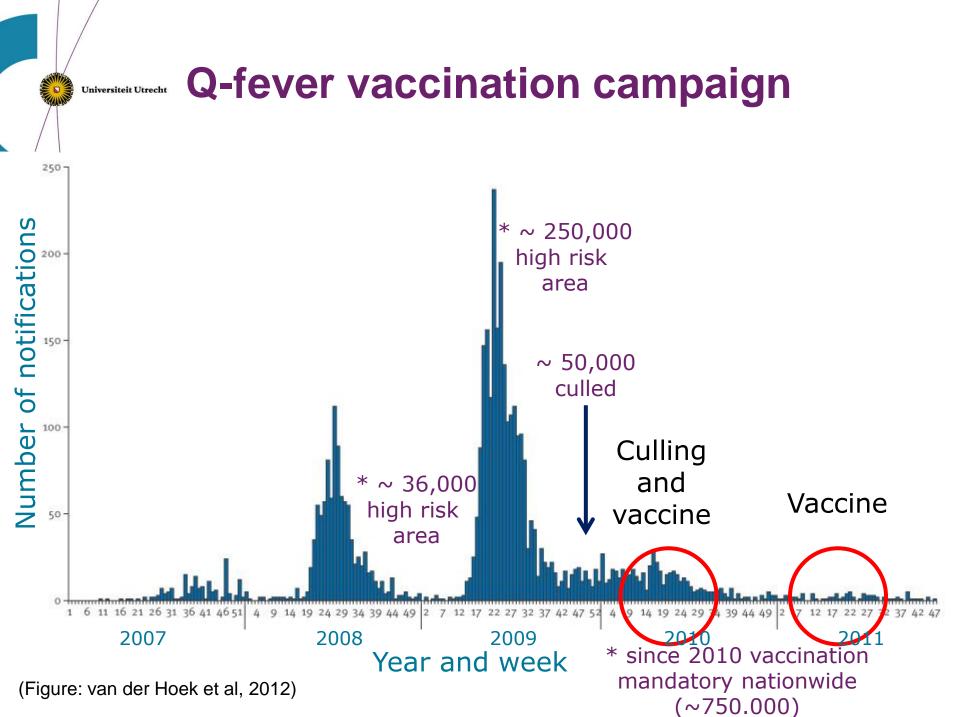
Kaplan-Meier curves for cycle threshold (C_t) values for C. burnetii

Results

- Prevalence and bacterial load reduced in vaccinated animals
- Effects most pronounced in animals during their first pregnancy

Does this imply that this may reduce the load in the environment and human exposure to *Coxiella burnetii?*

- \rightarrow How strong is this evidence ?
- \rightarrow How often/long vaccination of dairy animals ?
- \rightarrow Scale down strategy possible ?



Drawbacks of vaccination ?

in small ruminants

Side effects (Vellema and v.d. Brom, oral communication)

- local reaction near to the injected area: common
- clinical signs: (very) mild
- feed intake and milk yield: farmers report problems
- possibly depending on previous exposure/vaccination?

May not be effective in animals that are

- pregnant → not proven effective (Guatteo et al, 2008 (cattle))
- already infected \rightarrow less effective (de Cremoux et al, 2012)

Costs

• In non-infected herds

When to start vaccination?

in small ruminants

Herd health management perspective:

- Common infection in ruminants, usually asymptomatic
- Vaccination in response to disease problem
- Individual strategy per farm by farmer and veterinarian

Public health perspective:

- Outbreak in the general population
- Precautionary principle
- Preventive vaccination in goats
- Vaccination obligatory

Is a vaccinated herd free ?

- Technical problems with
 - Serology: all animals titer
 - Clinical symptoms: very few/no
 - Pathogen detection: bulk milk PCR ?

 \rightarrow Not easy to declare a vaccinated herd free of Q fever

When to stop vaccination?

in small ruminants

Consequences of stopping vaccination

- Infection is still present → increase (Modeling work: Courcoul et al 2011 (cattle))
- Free of Q fever \rightarrow (re-)introduction?
 - if animals are immune \rightarrow little risk
 - if no immunity \rightarrow possible risk of epidemic
- In Netherlands stopping no option
 - Risk for human infection perceived high
 - Political sensitive
 - 'Cheap' solution for human health (van Asseldonk et al 2013)

Risk of (re-)introduction into free, non-vaccinated herd without immunity

Risk of introduction unknown Detection mainly around kidding / abortion → Detection too late to intervene ?

 \rightarrow Contingency plan ?

- Vaccine in pregnant animals ?
- Culling ?
- Antibiotic treatment ?

Switzerland Tessin 2019 movement restriction cull infected animals vaccination ?



Meist tragen die Ziegen das Bakterium in sich, welches das Q-Fieber auslöst. (Archivbild) © KEYSTONE/ALEXANDRA WEY

Im Tessiner Maggiatal sind in den vergangenen Wochen mehrere Fälle von Lungenentzündungen aufgetreten. Die Betroffenen sind mit dem Q-Fieber infiziert worden. Die Lage ist aber gemäss den Gesundheitsbehörden unter Kontrolle.

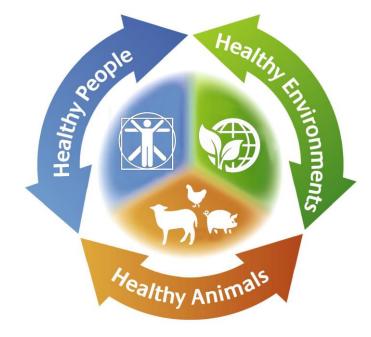
Das Q-Fieber wird von einem Bakterium übertragen, das sich bei den Ziegen findet. Die Tessiner Gesundheitsbehörden haben deshalb die Impfung von exponierten Tieren angeordnet. Zudem wurde der Transport der Tiere von einem Betrieb zum anderen untersagt.

Die Infektion über die Milch der Ziegen wird als sehr wenig wahrscheinlich eingestuft. Auch von Mensch zu Mensch wird die Krankheit nicht übertragen. Das Q-Fieber äussert sich in

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Take Home OH

- Goat system changed
- Pathogen 'multiplied'
- Environmental contamination (de Rooij et al 2018)
- General population exposed & ill
- Culling & Vaccination goats
- Vaccination goats
- General population protected



Thank you!

Picture Piet Vellema

A: Prevalence uterine fluid

Group	OR (95% CI)
Unvaccinated, young	1
Unvaccinated, old	0.44 (0.25–0.78)
Vaccinated, young	0.005 (0.0002–0.12)
Vaccinated, old	0.03 (0.002–0.58)

Multivariate logistic regression of prevalence of C. burnetii in uterine fluid. A random herd effect was included. OR= odds ratio.

A: Bacterial load uterine fluid

Group	HR (95% CI)
Unvaccinated	1
Vaccinated	0.49 (0.39 – 0.70)

Univariate survival analysis of PCR C_t values for Coxiella burnetii in positive uterine fluid samples ($C_t \le 40$). HR = hazard ratio.