Most Common Zoonotic Diseases: Transmitted from Animals to Humans

Aparna Durga

Department of Biotechnology, GIET College, JNTU Kakinada, Andhra Pradesh, India

Review Article

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*For Correspondence

ABSTRACT

Aparna Durga, Department of Biotechnology, GIET College, JNTU Kakinada, Andhra Pradesh, India.

E-mail: durgaaparna007@gmail.com

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An infectious disease that can be transmitted between animals and humans with or without vectors. Main concept of this article is on the most common bacterial zoonotic diseases in the animals. Approximately 1500 pathogens have been identified which are infected to humans and 61% of these cause zoonotic diseases. There are number of microbial agents that cause zoonotic diseases such as bacterium, fungus, virus, parasites and other types of agents.

INTRODUCTION

A disease can be transmitted to humans by vertebrate animals known as zoonotic diseases. Vertebrate animals such as mammals, birds, reptiles, amphibians and fish. All types of disease agents can cause these diseases. It can be classified according to their life cycle. There are different types of zoonotic diseases like Rabies, Blastomyosis, psittacosis, Trichosis, Coccidomyosis and etc. These zoonotic diseases can be transmitted to humans in many ways like animal bites and scratches, food animals, farmers and veterinarians, vectors like mosquitoes, tick, fleas, and lice's [1,2].

It is probably occur due to the closer contact with animals and the one who treated as a family member in houses. These people have higher risk in the contracting these zoonotic diseases and also the immune-suppressed people are especially at high risk for infection with zoonotic bacterial diseases.

Common Zoonotic Diseases in Animals Hookworm

These worms are in round shape and it lives in small intestine of the animals like cats and dogs. This infection is transmitted from food animals to humans. There are two types of hookworms which are commonly infecting to humans such as Ancylostoma duodenale and Necator americanus ^[3-8]. There are no particular signs and symptoms to this hookworm infection but it can give rise to protein deficiency, intestinal inflammation, and etc. If the pregnant lady got affected by this disease, it can cause retarded growth of the fetus, premature birth and a low birth weight (Figure 1).



Figure 1. Hookworms in the animal intestine.

Tapeworm

Cestoda is a category of these tapeworms. All the cestodas live in the digestive tract and vertebrates as adults, and often in the bodies of animals ^[9-15]. The one who eats the undercooked meat like pork, beef, and fish that people got infected by these tapeworm infections. In USA, certain drugs (praziquantel or albendazole) are used to remove these tapeworm infections ^[16-25].

There are no specific symptoms to this tapeworm infection but some people experienced upper abdominal pain, loss of appetite and diarrhea ^[26-38]. Rarely this *T. solium* larva can migrate to the brain. At that time, people suffered with severe headaches and other neurological problems (Figure 2).



Figure 2. Tapeworm Infection.

Toxoplasmosis

This disease caused by the parasite called as *Toxoplasma gondii*. It usually spreads by eating poorly cooked food that having cysts, exposure to infected cat feces. It can occur in the retinas and alveolar lining of the lungs ^[39,40], skeletal muscle, and the central nervous system and also in the brain (Figure 3).

This infection has three stages like acute toxoplasmosis, Latent toxoplasmosis ^[41-47], Cutaneous toxoplasmosis. Diagnosis of this infection in humans made by serological, biological and molecular or histological methods.



Cryptosporidiosis

This parasitic disease is caused by Cryptosporidium with a genus of protozoan parasites. It lives in soil, water and food ^[48-55]. It affects the small intestine and respiratory tract, both immunocompromised and immunocompetent individuals finally causes a severe watery diarrhea with unexplained cough (Figure 4). Most common symptoms include weight loss, dehydration ^[56-60], fever, nausea, vomiting and stomach pain. The prevention of this disease is wash your hands often and clean the fruits or vegetables before eating ^[61-70].



Figure 4. Cryptosporidiosis.

Lyme disease

It is caused by bacteria named as borellia type and this disease also known as Lyme borreliosis (Figure 5). Main symptom of this disease is erythema migrans (expanding area of redness) and it begins at the site of tick bite. Duration of a week this can be occurred ^[71-80].



Figure 5. An adult deer tick.

Other symptoms include fever, feeling tired and headache. If cannot be taken the treatment, it can cause heart palpitations and severe headaches with neck stiffness and etc. ^[81-90].

This disease transmitted to humans by the bite of ticks, a genus of Ixodes (Figure 6). Lyme disease cannot spread person to person and animals, through food. Treatment is based on the patient's symptoms, tick bite exposure ^[91-100], and possibly testing for specific antibodies in the blood.



Figure 6. A rash caused by tick bite.

CONCLUSION

Wash your hands after handling animals, and clean the fruits and vegetables before you eat. Avoid undercooked meat like pork, beef, and fish. Wearing appropriate clothing in tick-infested areas (a long-sleeved shirt and trousers tucked into your socks).

REFERENCES

- 1. Wiwanitkit V. Emerging zoonotic diseases: can it be the case of bioterrorism. J Bioterr Biodef. 2015;S14:e101.
- 2. Dahal R and Kahn L. Zoonotic diseases and one health approach. Epidemiol. 2014;4:e115.
- 3. Iwu RU, et al. Hookworm and ascaris infections among school-aged children in ehime mbano local government area of imo state, nigeria. J Bacteriol Parasitol. 2016;7:278.
- 4. Singla V, et al. Duodenal hookworm- an endoscopic diagnosis. J Infect Dis Ther. 2016;4:268.

- 5. Hailu T. Current prevalence of intestinal parasites emphasis on hookworm and schistosoma mansoni infections among patients at workemeda health center, northwest ethiopia. Clin Microbial. 2014;3:155.
- 6. Inoue M, et al. Relationship between mycobacterium tuberculosis and hookworm infections among school children in mbita, kenya. J Trop Dis. 2013;1:120.
- 7. Insiripong S and Kitsuntisumpun S. Eosinophil count in strongyloides, hookworm, liver fluke or taenia spp. infestation. Trop Med Surg. 2013;1:127.
- 8. Cedrón-Cheng H and Ortiz C. Hookworm infestation diagnosed by capsule endoscopy. J Gastroint Dig Syst. 2011;S1:003.
- 9. Oryan A and Alidadi S. Water as a potential transmission route of infection with tapeworms. Air Water Borne Diseases. 2015;4:e135.
- 10. Abdollahi E and Mehdipour P. Biological and molecular diversity in telomerase: characteristics of htert in human, vertebrates and yeast. Cell Dev Biol. 2016;5:170.
- 11. Radjasa OK. Marine microbial symbionts of marine invertebrates: the under-utilized and rich source of environmentally friendly natural products. J Coast Dev. 2014;17:e106.
- 12. Leclerc M and Kresdorn N. The asterias rubens complement system: comparisons with lower vertebrates. J Cell Sci Ther. 2016; 7:236.
- 13. Kupriyanova NS and Ryskov AP. The new mode of thought of vertebrates' evolution. J Phylogen Evolution Biol. 2014;2:129.
- 14. Wang YJ. The future of marine invertebrates in face of global climate change. J Coast Dev. 2014;17:e105.
- 15. Basoglu A, et al. NMR based metabolomics evaluation in neonatal calves with acute diarrhea and suspected sepsis: a new approach for biomarker/s. Metabolomics. 2014;4:134.
- 16. Siengwattana P, et al. Factors determining physicians' decision making in treatment and the outcomes of nosocomial diarrhea in a tertiary care hospital: a prospective cohort. J Trop Dis. 2016;4:209.
- 17. Ali SA, et al. Surveillance system proposed to monitor the burden of diarrheal diseases in pakistan: a short communication. J Gen Practice. 2016;4:258.
- 18. Mugweru FG, et al. Antimicrobial activity of aqueous extracts of maytemus putterlickoides, senna spectabilis and olinia usambarensis on selected diarrhea-causing bacteria. J Bacteriol Parasitol. 2016;7:270.
- 19. Wilson DJ, et al. Prevalence of bovine viral diarrhea virus in bovine samples from the intermountain west of the usa comparison between age, sex, breed and diagnostic methods. J Veterinar Sci Techno. 2016;7:326.
- 20. Cruz-Escobar EDL, et al. Verner-Morrison syndrome presenting as acute persistent diarrhea. J Clin Case Rep. 2016;6:729.
- 21. Igwe JC, et al. Tetracycline resistant genes in e. coli isolated from uti and diarrhea patients in zaria, nigeria. Clin Microbiol. 2015;4:225.
- 22. Eusébio M, et al. Diarrhea and symptomatic coagulopathy: an uncommon presentation of celiac disease. J Gastrointest Dig Syst. 2015;5:358.
- 23. Pinchuk LM, et al. All is not butter that comes from the cow: the bovine viral diarrhea. understanding the pathogenesis of cytopathic and non-cytopathic infection. J Anc Dis Prev Rem. 2015;3:126.
- 24. Anuradha SD, et al. Bacterial etiology of diarrhea in children admitted in hematologic unit in a tertiary care hospital. J Leuk. 2015;S1:005.
- 25. Vasudevan G, et al. Pylori associated spruelike duodenitis presenting with chronic diarrhea, hypoalbuminemia and edema-a case report. J Clin Exp Pathol. 2015;5:223.
- 26. Nikhil Gupta S. Diarrheal epidemic grips ghallour sub-centre, jawalamukhi block, kangra district, himachal pradesh, india. Fam Med Med Sci Res. 2015;4:157.
- 27. Hernández PM and Gómez TV. Diarrhea as the main initial manifestation of meningococcemia: 2 case reports. J Clin Diagn Res. 2014;2:113.
- 28. Ewnetu H, et al. Determinants of diarrheal disease among adult people living with hiv/aids attending art clinics in jimma town, south-western ethiopia: a case control study. J AIDS Clin Res. 2014;5:380.
- 29. El Behiry A. Diagnostic aspects and novel approach for treatment of antibiotic-resistant bacteria isolated from diarrheal calves using silver, gold and copper nanoparticles. J Bacteriol Parasitol. 2014;5:195.
- 30. Taye S and Abdulkerim A. Prevalence of intestinal parasitic infections among patients with diarrhea at bereka medical center, southeast ethiopia: a retrospective study. Fam Med Med Sci Res. 2014;3:131.
- 31. Volokhina E, et al. Novel Sequence Variation Affects GPIb α in Post-diarrheal Hemolytic Uremic Syndrome. J Nephrol Therapeutic. 2014;S11:007.

- 32. Alzahrani AK. Congenital chloride losing diarrhea. Pediat Therapeut. 2014;4:193.
- 33. Anand V, et al. Admissions for pediatric diarrheal illness in a southern indian hospital peak during the rainiest month of the year. Trop Med Surg. 2013;1:150.
- 34. Faruque ASG, et al. Comparison of stool microscopy between young and elderly adults without diarrhea in rural bangladesh. J Health Med Inform. 2012;4:116.
- 35. Wilson DJ, et al. Bovine viral diarrhea milk elisa test detecting anti-p80 antibody association with milk handling methods and cow characteristics. J Veterinar Sci Technol. 2012;3:114.
- 36. Keynan Y, et al. Diarrhea and colonic ulcers of unusual etiology. Mycobac Dis. 2012;2:112.
- 37. Tahira F, et al. Prevalence of cryptosporidium in children with diarrhoea in north indian tertiary care hospital. J Community Med Health Edu. 2012;2:136.
- 38. Amare B, et al. Levels of serum zinc, copper and copper/zinc ratio in patients with diarrhea and hiv infection in ethiopia. Vitamin Trace Element. 2011;1:101.
- 39. Lahmar I, et al. Prevalence of toxoplasmosis in sheep, goats and cattle in southern tunisia. J Bacteriol Parasitol. 2015;6:245.
- 40. Kianersi F, et al. Anti-vascular endothelial growth factor for choroidal neovascularization associated with toxoplasmosis: a case series. J Clin Exp Ophthalmol. 2015;6:463.
- 41. Abu EK, et al. Visual outcome in ocular toxoplasmosis: a case series of 30 patients from ghana. J Clin Exp Ophthalmol. 2015;6:458.
- 42. Oshiro LM, et al. Serology for toxoplasmosis and neosporosis in ewes in the state of mato grosso do sul, brazil. J Veterinar Sci Technol. 2015;6:233.
- 43. Espinoza-Oliva M, et al. Case Report: cerebral toxoplasmosis infection by reactivation of t. gondii in pediatric patients with HIV. J Neuroinfect Dis. 2015;5:175.
- 44. Jaroudi MO, et al. Outcome of macular toxoplasmosis. J Clin Exp Ophthalmol. 2014;5:379.
- 45. Almasian R, et al. Sero-Epidemiology of toxoplasmosis among the people of khorram abad, iran. J Infect Dis Ther. 2014;2:159.
- 46. Helieh S. Toxoplasmosis, pancreatitis, obesity and drug discovery. Pancreat Disord Ther. 2014;4:138.
- 47. Sagel U and Krämer A. Screening of maternal toxoplasmosis in pregnancy: laboratory diagnostics from the perspective of public health requirements. J Bacteriol Parasitol. 2013;S5:003.
- 48. Sajjad A and Sunil K. Treatment outcomes with nitazoxanide in immunocompetent adults naive patients with cryptosporidiosis; do we need combination therapy with paromomycin or azithromycin?. Trop Med Surg. 2015;3:198.
- 49. Blanchard SS, et al. Giardiasis and cryptosporidiosis recent literature with a focus on nitazoxanide. Pediat Therapeut. 2015;5:265.
- 50. Elizabeth I, et al. Current care giver awareness of pediatric giardiasis and cryptosporidiosis. Pediat Therapeut. 2015;5:264.
- 51. Attias E, et al. Emerging issues in managing pediatric parasitic infections: an assessment of clinical and epidemiological knowledge of giardiasis and cryptosporidiosis. Pediat Therapeut. 2015;5:254.
- 52. Cornu M, et al. Digestive cryptosporidiosis in an allogeneic hematopoietic stem cell transplant recipient: a case report. J Bacteriol Parasitol. 2015;6:209.
- 53. Yadav P and Mirdha BR. Acute cryptosporidiosis following exposure to hydrocarbon containing compounds. J Clinic Toxicol. 2012;2:149.
- 54. Heidari A. A Thermodynamic study on hydration and dehydration of dna and rna–amphiphile complexes. J Bioeng Biomed Sci. 2016;S:006.
- 55. Vieillard P, et al. Thermo-Analytical techniques on mx-80 montmorillonite: a way to know the behavior of water and its thermodynamic properties during hydration dehydration processes. Pharm Anal Acta. 2016;7:462.
- 56. Julie T, et al. An unusual cause of dehydration. J Gerontol Geriatr Res. 2016;5:264.
- 57. Sangeeta and Hathan BS. Elephant foot yam (amorphophallus paeoniifolius): osmotic dehydration and modelling. J Food Process Technol. 2015;6:499.
- 58. Ramesh SV, et al. Physiological response to drought and dehydration responsive transcripts (drts) from the leaves of water-deficit indian soybean [Glycine max (L.) Merrill cv NRC7]. Transcriptomics. 2015;3:105.
- 59. Bera D and Roy L. Osmotic dehydration of litchi using sucrose solution: effect of mass transfer. J Food Process Technol. 2015;6:462.

- 60. Atiqur Rahman SM, et al. Osmotic dehydration of pumpkin using response surface methodology influences of operating conditions on water loss and solute gain. J Bioprocess Biotech. 2015;5:226.
- 61. Fayer R and Ungar BL. Cryptosporidium spp. and cryptosporidiosis. Microbiological reviews. 1986;50:458.
- 62. Current WL and Garcia LS. Cryptosporidiosis. Clinical microbiology reviews. 1991;4:325-358.
- 63. Current WL, et al. Human cryptosporidiosis in immunocompetent and immunodeficient persons: studies of an outbreak and experimental transmission. New England Journal of Medicine. 1983;308:1252-1257.
- 64. Ma P and Soave R. Three-step stool examination for cryptosporidiosis in 10 homosexual men with protracted watery diarrhea. Journal of Infectious Diseases. 1983;147:824-828.
- 65. D'antonio RG, et al. A waterborne outbreak of cryptosporidiosis in normal hosts. Annals of Internal Medicine. 1985;103:886-888.
- 66. Millard PS, et al. An outbreak of cryptosporidiosis from fresh-pressed apple cider. Jama. 1994;272:1592-1596.
- 67. Tzipori SA. Cryptosporidiosis in animals and humans. Microbiological Reviews. 1983 47:84.
- 68. Chen XM, et al. Cryptosporidiosis. New England Journal of Medicine. 2002;346:1723-1731.
- 69. Xiao L. Molecular epidemiology of cryptosporidiosis: an update. Experimental parasitology. 2010;124:80-89.
- 70. Hayes EB, et al. Large community outbreak of cryptosporidiosis due to contamination of a filtered public water supply. New England Journal of Medicine. 1989;320:1372-1376.
- 71. Burgdorfer W, et al. Lyme disease-a tick-borne spirochetosis?. Science. 1982;216:1317-1379.
- 72. Halsey NA, et al. Prevention of Lyme disease. Pediatrics. 2000;105:142-147.
- 73. Barbour AG. Isolation and cultivation of Lyme disease spirochetes. The Yale journal of biology and medicine. 1984;57:521.
- 74. Fraser CM, et al. Genomic sequence of a Lyme disease spirochaete, Borrelia burgdorferi. Nature. 1997;390:580-586.
- 75. Johnson RC, et al. Borrelia burgdorferi sp. nov. etiologic agent of Lyme disease. International Journal of Systematic and Evolutionary Microbiology. 1984;34:496-497.
- 76. Steere AC, et al. The spirochetal etiology of Lyme disease. New England Journal of Medicine. 1983;308:733-740.
- 77. Steere AC, et al. The early clinical manifestations of Lyme disease. Annals of internal medicine. 1983;99:76-82.
- 78. Benach JL, et al. Spirochetes isolated from the blood of two patients with Lyme disease. New England Journal of Medicine. 1983;308:740-742.
- 79. Dressler F, et al. Western blotting in the serodiagnosis of Lyme disease. Journal of Infectious Diseases. 1993;167:392-400.
- 80. Wormser GP, et al. The clinical assessment, treatment, and prevention of Lyme disease, human granulocytic anaplasmosis, and babesiosis: clinical practice guidelines by the Infectious Diseases Society of America. Clinical Infectious Diseases. 2006;43:1089-1134.
- 81. Hubálek Z. Epidemiology of Lyme borreliosis. InLyme borreliosis. Karger Publishers. 2009; 37:31-50.
- 82. Baranton G, et al. Delineation of borrelia burgdorferi sensu stricto, borrelia garinii sp. nov., and group vs461 associated with lyme borreliosis. International Journal of Systematic and Evolutionary Microbiology. 1992;42:378-383.
- 83. Canica MM, et al. Monoclonal antibodies for identification of Borrelia afzelii sp. nov. associated with late cutaneous manifestations of Lyme borreliosis. Scandinavian journal of infectious diseases. 1993;25:441-448.
- 84. Dattwyler R, et al. Treatment of late Lyme borreliosis-randomised comparison of ceftriaxone and penicillin. The Lancet. 1988;331:1191-1194.
- 85. van Dam AP, et al. Different genospecies of borrelia burgdorferi are associated with distinct clinical manifestations of lyme borreliosis. Clinical Infectious Diseases. 1993;17:708-717.
- 86. Christen HJ, et al. Epidemiology and clinical manifestations of Lyme borreliosis in childhood. Acta paediatrica. 1993;82:1-76.
- 87. Stanek G and Strle F. Lyme borreliosis. The Lancet. 2003;362:1639-1647.
- Barthold SW, et al. Lyme borreliosis in selected strains and ages of laboratory mice. Journal of Infectious Diseases. 1990;162:133-138.
- 89. Lane RS, et al. Lyme borreliosis: relation of its causative agent to its vectors and hosts in North America and Europe. Annual review of entomology. 1991;36:587-609.
- 90. Aguero-Rosenfeld ME, et al. Diagnosis of Lyme borreliosis. Clinical microbiology reviews. 2005;18:484-509.

- 91. Steere AC and Malawista SE. Cases of lyme disease in the united states: locations correlated with distribution of ixodes dammini. Annals of Internal Medicine. 1979;91:730-733.
- 92. Lindgren E, et al. Impact of climatic change on the northern latitude limit and population density of the diseasetransmitting european tick ixodes ricinus. Environmental health perspectives. 2000;108:119.
- 93. Spielman A, et al. Ecology of ixodes dammini-borne human babesiosis and lyme disease. Annual review of entomology. 1985;30:439-460.
- 94. Schouls LM, et al. Detection and identification of hrlichia, borrelia burgdorferi sensu lato, and bartonella species in dutch ixodes ricinusticks. Journal of clinical microbiology. 1999;37:2215-2222.
- 95. De Silva AM and Fikrig E. Growth and migration of Borrelia burgdorferi in Ixodes ticks during blood feeding. The American journal of tropical medicine and hygiene. 1995;53:397-404.
- 96. Bosler EM, et al. Natural distribution of the Ixodes dammini spirochete. Science. 1983;220:321-322.
- 97. Pancholi P, et al. Ixodes dammini as a potential vector of human granulocytic ehrlichiosis. Journal of Infectious Diseases. 1995;172:1007-1012.
- 98. Nadelman RB, et al. Prophylaxis with single-dose doxycycline for the prevention of Lyme disease after an Ixodes scapularis tick bite. New England Journal of Medicine. 2001;345:79-84.
- 99. Olsén B, et al. A Lyme borreliosis cycle in seabirds and Ixodes uriae ticks.
- 100. Burgdorfer W, et al. The western black-legged tick, lxodes pacificus: a vector of Borrelia burgdorferi. The American Journal of Tropical Medicine and Hygiene. 1985;34:925-930.