



Emerging Zoonoses: Preparedness and Response



Nipah in Malaysia



RVF in Kenya



Ebola in Angola



CCHF in Iran





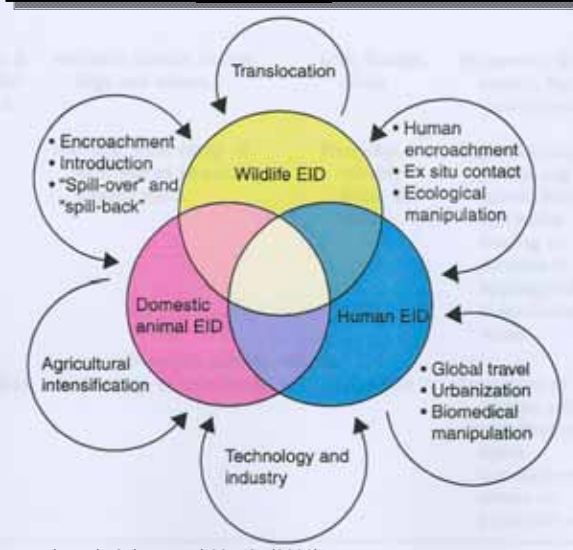
Chesapeake Area Biological Safety Association
 - 2011 Annual Scientific Symposium -
 Frederick, MD
 June 15, 2011



Emerging Zoonoses: Preparedness and Response



Nearly 60% of all human infectious diseases and 75% of all emerging diseases are of zoonotic origin.



Daszak et al., Science, Vol 287, 21 (2000)

Examples:

1. **Domestic animals to wildlife** – Canine Distemper
2. **Wildlife to humans** – Ebola, Monkeypox,
3. **Domestic animals to humans** – Rift Valley Fever, Crimean-Congo Hemorrhagic Fever, Nipah



High containment (BSL-4) facilities



Class III biosafety cabinet will be helpful
in cases of uncertain biocontainment level

Expens

operate

(uses
an



Key elements - preparedness & response -



Surveillance
Detection
Control
Prevention



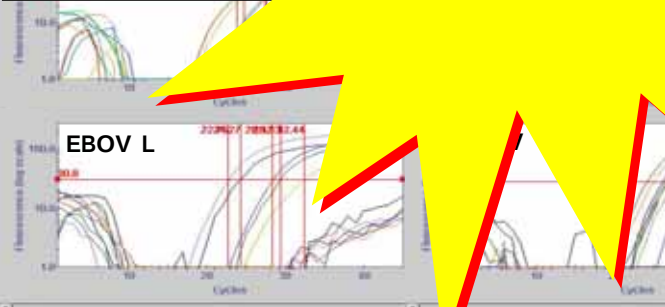
Microbiological Emergency Response Team (MERT)

**Easily transportable and reliable
multiplexed real time PCR capability**

for the detection of:

- Filoviruses
- S
- ..., H5N1)
- (RS)
- es (Nipah, Hendra)
- s A & E
- ssp.
- Neisseria spp.
- Vibrio cholera
- Shigella spp.
- Salmonella spp.
- Bacillus anthracis
- Francisella tularensis
- Yersinia pestis
- Brucella sp.
- Burkholderia pseudomallei & mallei
- Ricin

Differential diagnosis
Continuing platform development

**Problems with deployment,
transport and on-site support**
- simple, small, reliable & robust -



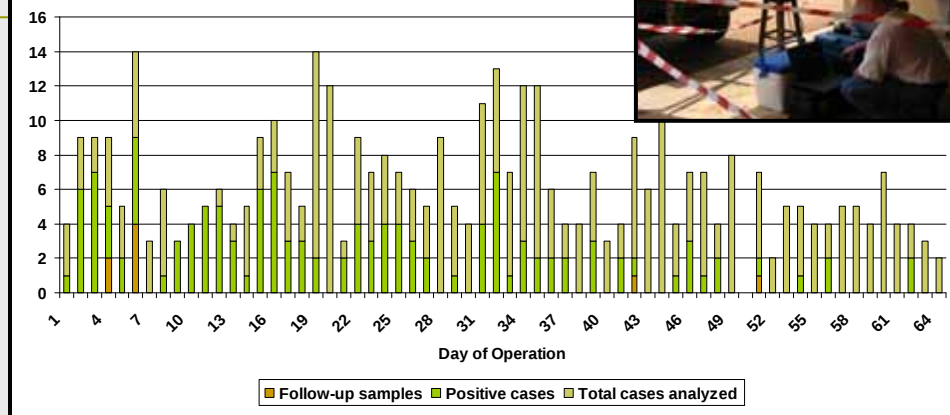

Mbomo, Republic of the Congo (Ebola - 2003)

- testing only -

Laboratory floor plan



Daily work load



Sample receiving to diagnosis ~4 hours

Concurrence with ref. lab (CDC, Luanda) 97.5%

Outbreak Investigation - *gaining international reputation* -

SARS, China



Ebola, Congo



Benefit of field lab

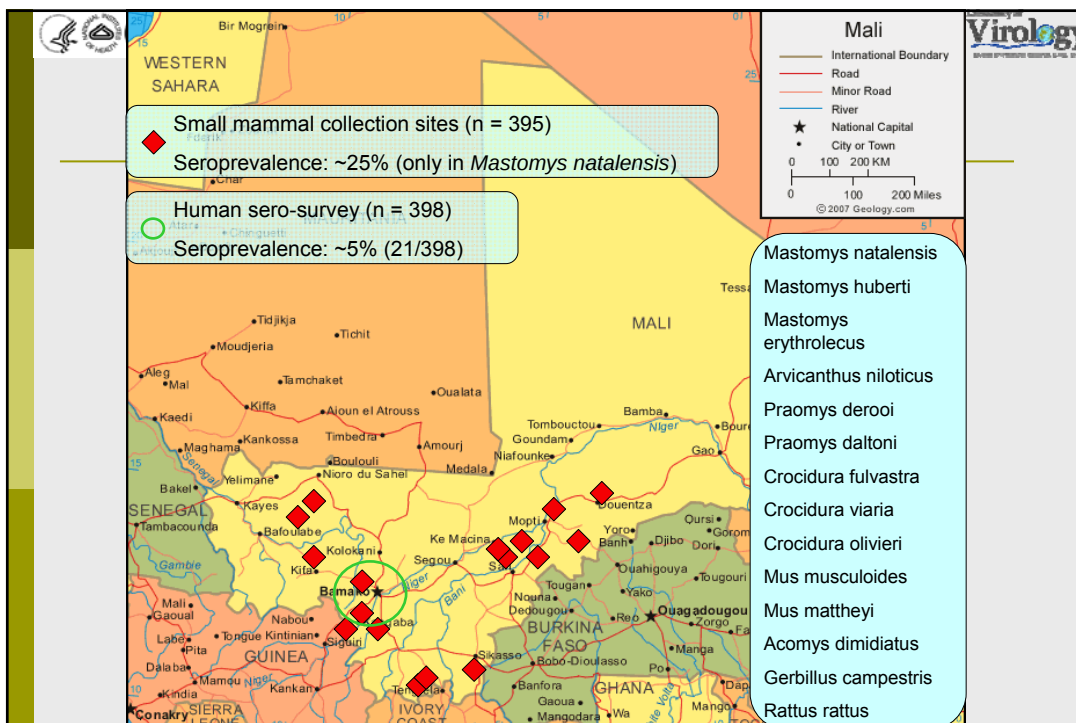
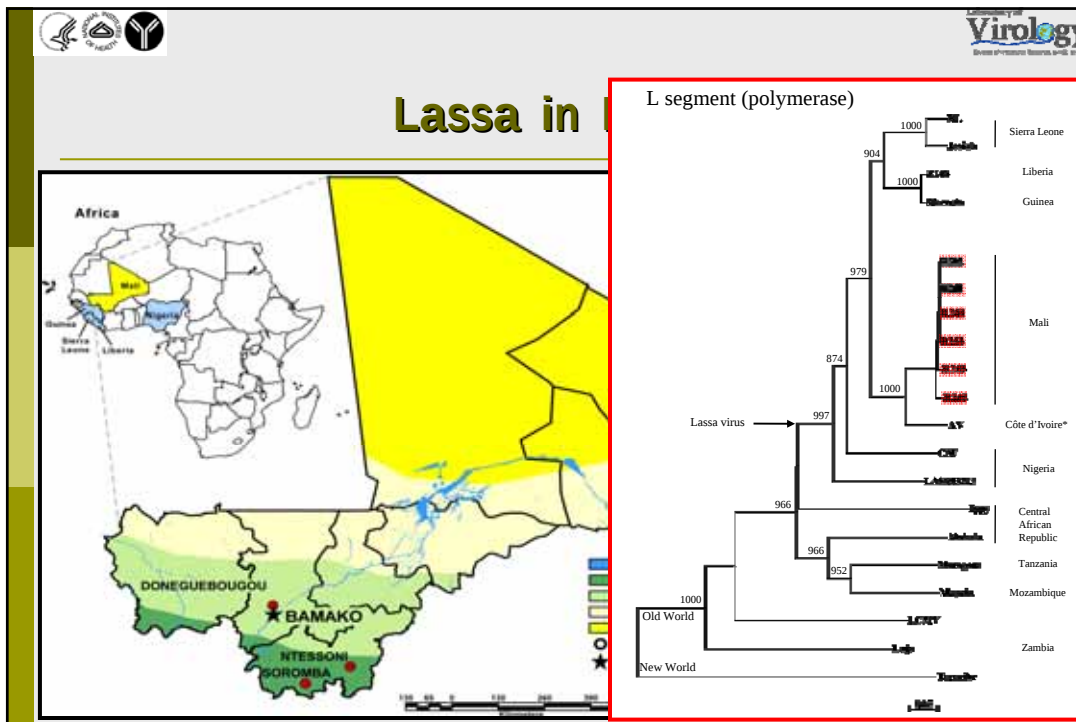
- case patient management
- safe burial in the community
- case finding
- management of survivors

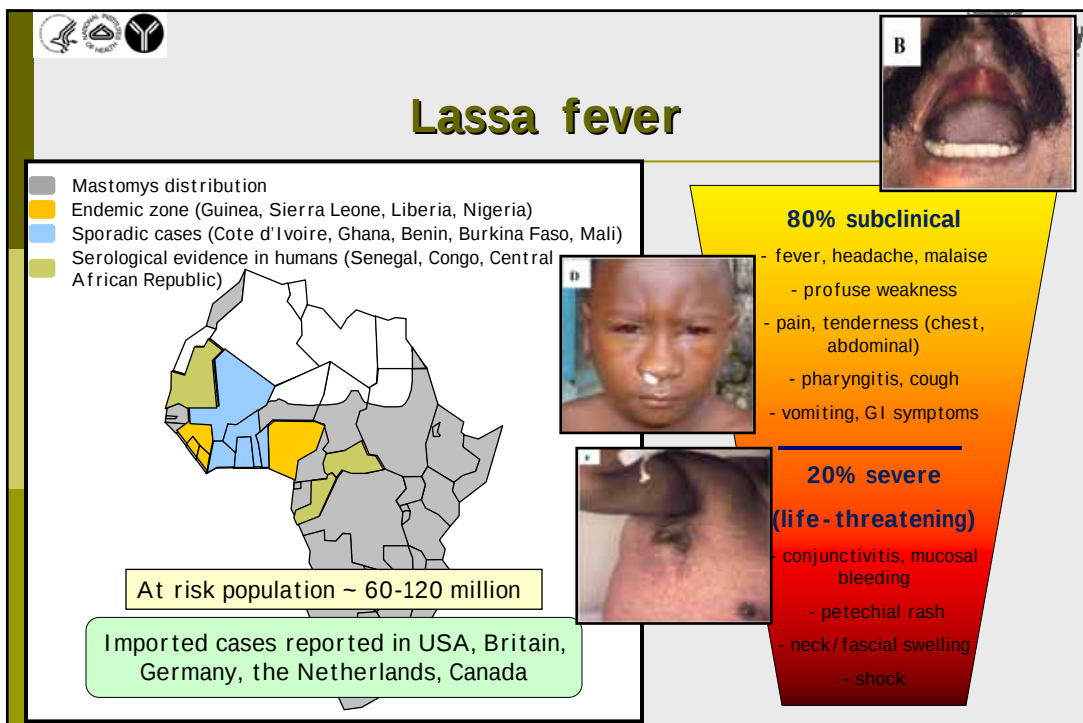
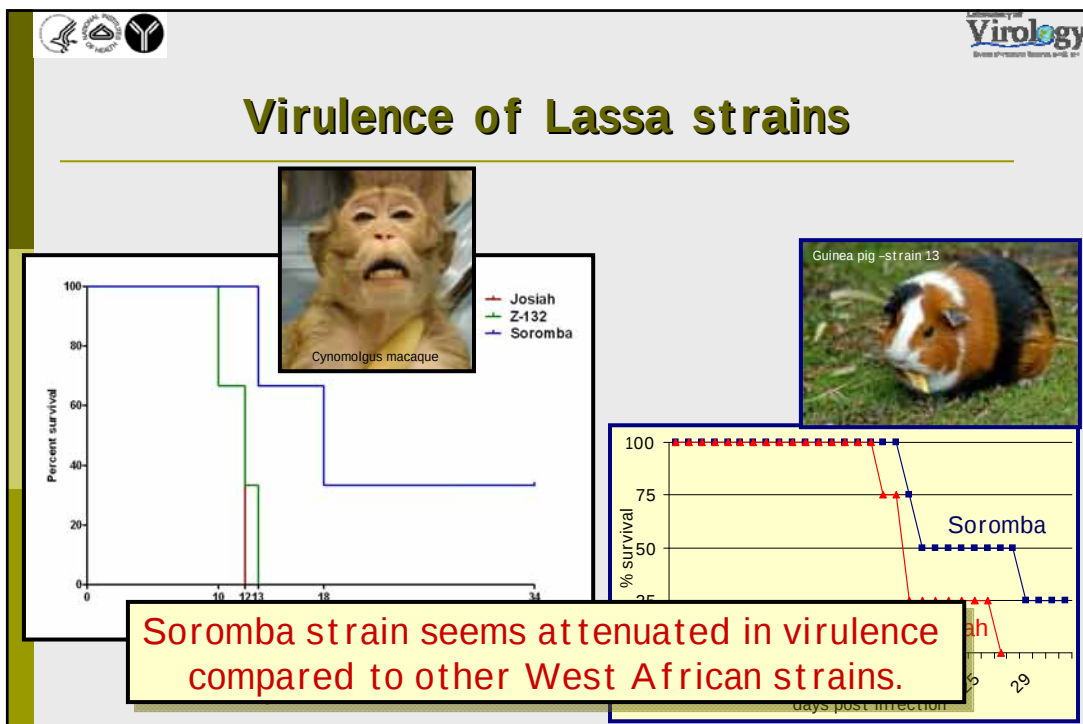
Nipah, Bangladesh



CCHF, Iran







Hendra virus

Challenge
(5×10^5 pfu intratracheal)

Rhesus macaque
(*Macaca mulatta*)

No clinical symptoms

Cynomolgus macaque
(*Macaca fascicularis*)

No clinical symptoms

African green monkeys
(*Chlorocebus aethiops*)

Acute respiratory distress
encephalitis

- Zoonotic transmission only

Has been circulating...

RELATED STORY: Subclinical exposure to Hendra virus

ARDS - like s

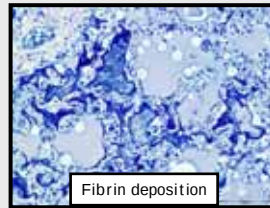
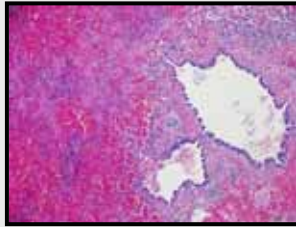
A

B

C

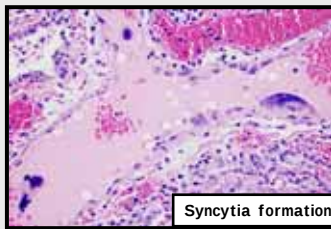


Histopathology

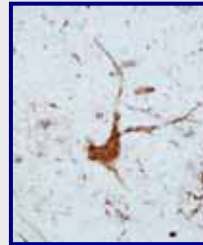


Lung

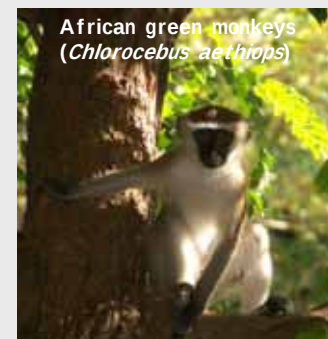
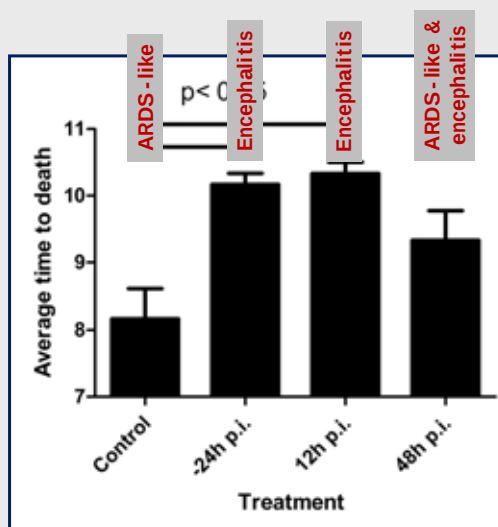
Brain



Syncytia formation in endothelium



Ribavarin efficacy



Treatment scheme

- loading dose: 50 mg/kg s.c.
- maintenance dose: 10 mg/kg s.c.
- scheme: 3 times daily for 14 days





Henipah conclusion

Mother, daughter offered experimental hendra virus treatment



Andree Withey and Nikole Jacobi, ABC
May 27, 2010, 10:49 am



An experimental drug for hendra virus has been offered to a mother and daughter on Queensland's Sunshine Coast who have been exposed to the deadly disease.

Humoral immune response seems main mechanism of protection

- Neutralizing antibodies seem effective in treatment
- Vaccines should be possible !!!!!

Hendra problem could be tackled with horse vaccination
Nipah problem ???

Related Links

virus at a Tewantin property on the Sunshine Coast 10 days ago.










Intentional Release

Vaccines strategies/requirements for rare but high impact infectious diseases (e.g. EBOV HF, MARV HF, Lassa F)

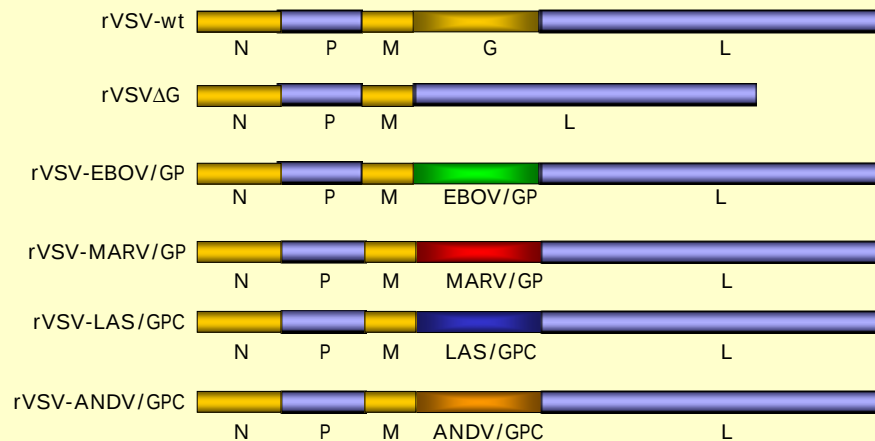
- targeted rather than a population-based approach
- single rather than boost immunization approach
 - safe and efficacious
 - short time to immunity
 - widely cross-protective
- little interference and reusable
- potential for post-exposure treatment






Vesicular stomatitis virus (VSV) reverse genetics system

• T7 Polymerase



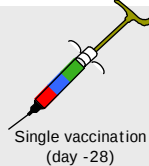
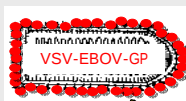
VSV system kindly provided by J. Rose



'The magic bullet'

- Emergency vaccine for Ebola, Marburg, Lassa & other VHF -

Pre-exposure



Single vaccination
(day -28)



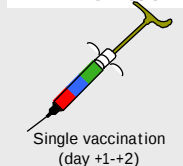
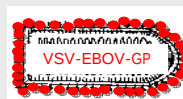
Challenge
(day 0)

Complete
(often 'sterile')
protection

Post-exposure



Challenge
(day 0)

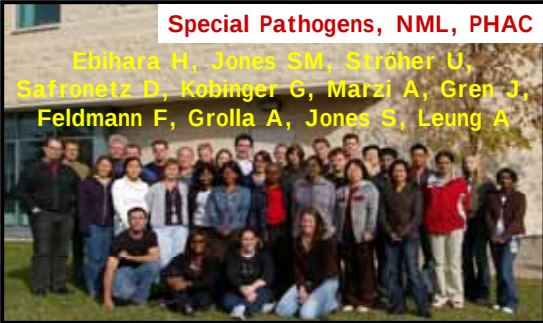


Single vaccination
(day +1/+2)

No, partial or
complete protection

Special Pathogens, NML, PHAC

Editha H. Jones SM, Ströher U,
Safrenetz D, Kobinger G, Marzi A, Gren J,
Feldmann F, Grolla A, Jones S, Leung A





LV, DIR, NIAID, NIH

T. Geisbert, UTMB, Galveston, USA
 C. Broder, Uniformed Services, Bethesda, USA
 M. Jarvis, Oregon Health and Science University, Portland, USA
 G. Kobinger, J. Strong, A. Grolla, Public Health Agency of Canada, Winnipeg



Public Health Agency of Canada (PHAC)
 National Institutes of Health (NIH)







Ebola and 'Great Apes'








Common chimpanzee
(*Pan troglodytes*)



Western gorilla
(*Gorilla gorilla*)



'Disseminating' vaccine strategy

(Michael Jarvis, VGTI, Oregon Health and Science University, Portland, Oregon, USA)

- ◆ CMV is highly immunogenic
- ◆ CMV is host specific, with each species infected by its own CMV
- ◆ CMV is ubiquitous and benign
- ◆ CMV immunity does not prevent reinfection
- ◆ CMV has evolved to spread

*Single Vaccination Gives Long-lasting EBOV-specific T cell Response

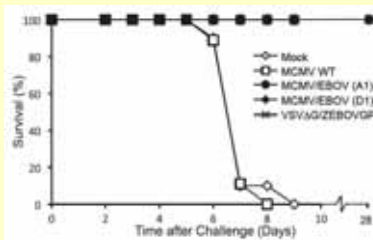


Protot

MCM

MCM

Survival



EBOV Viremia

