Dedications

To my husband and family,

To Kuku Dairy producers

and those who suffered From Brucellosis

I dedicate this work.

Khansaa

ACKNOWLEDGEMENTS

First, Thank God who gave me the patience, ability and strength to complete this work.

I was told before I came to work with Prof Mohamed Hashim Awad and Prof Babikir Alhaj that they did not tolerate" tomfoolery." Accordingly, I must convey gratitude to my supervisors for years of academic guidance, and the occasional "tomfoolery"-correction. For patient and valuable recommendations throughout this work.

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Most importantly, my family has all sacrificed so that I could be a student:

My mother, husband, Anfal ,Amel, Sami, Amin, Rawan Elnour and Aam . I can never repay that debt.

ABSTRACT

The objective of this research is to quantify the impact of Brucellosis on Kuku Dairy scheme. Ecozoo model with introduction of some modifications was used as analytical framework. It provides the information needed to analyze the epidemiology of the disease in both animals and humans as well as the economic analysis. Epidemiological data required were obtained from primary sources. These include two seroprevalence surveys for cattle, personal communications were also used as a source of primary data.

Two field surveys (including seroprevalence and socioeconomic surveys) were conducted during the period Jan- June 2004. The Humans Brucellosis survey included 176 Volunteers from the population at risk. In the Bovine Brucellosis survey the sample design was based on two stages random sample design. In the first stage, holdings (the primary statistical units) were identified. Then the individual Animals (the Secondary Statistical units) were selected. The size of the primary Statistical units was calculated as 30.1 with α =0.05 and desired accuracy of (10). The number of animals examined was 574.

The laboratory diagnosis relied mainly on serological tests namely Rose

–Bengal Test (RBT) as screening test and Competitive Enzyme linked

Immuno- Sorbent Assay (cELISA) as confirmatory test. Tube agglutination
test (TAT) was used as a routine test.

According to the confirmatory test: the herd prevalence rate is 90%, individual animal prevalence rate 24.9% and average within herd prevalence rate 24.5% (Sd 15.7 CI 4.088 at 95%). Based on c-Elisa human prevalence rate is 11.3% considering the seropositivity and 2.8% considering active brucella infection. Based on prevalence rates estimates on human parameters was found to be 18 active infected person in the baseline year and the infected cattle are 1508 head. These parameters were introduced into Ecozoo model. Data for DALYs calculation were obtained from primary sources as well as secondary sources.

Based on the epidemiological and economic data the total cost of the disease in both dairy and health sectors was found to be 67126953.8 SD out of which 66910503.8 SD was the cost of the dairy sector and 216450SD was the cost of health sector. Accordingly, the dairy sector Shouldered 99.76 % of the cost, while the health sector Shouldered 0.33% of Brucellosis cost in the base line year.

The burden of the disease was measured in DALYs. In the baseline year 18 persons were infected with Brucellosis . If we considered Brucellosis associated with level 0.1-disability weight, every infected person will loose 0.392659 year of his healthy life as a result of the infection. The total infected people will loose 7.067862 years of their healthy life. If the disease associated with level 0.2 disability weight, every infected person will loose 0.785318 years and the whole infected people will loose 14.13572 years of their healthy life.

Evolution of the disease over 11 years was investigated in two scenarios. In scenario 1 the total animal population was left to grow at the normal rates. In this case the number of seropositive animals will increase with growth rate of 103.2% followed by the increase in number of actively infected humans with growth rate of 27.8%.

The total cost of the disease in both dairy and health sectors were found to be 1022123020SD (745547286 SD in PV) equivalent to 4088492.08 US\$over the 11 years.

The total loss of healthy years over the 11 years will account to 59.7 years (0.1 DW). And 119.4 years (0.2 DW).

In Scenario 11 the total number of animals was held constant. In this case the number of seropositive animals will increase during the 11 years with growth rate of 258.1% Followed by the increase in number of actively infected humans with growth rate of 133%. The total cost of the disease in both dairy and health sectors was found to be 1414827570 SD (101505075 in PV) equivalent to 5655170.142US\$ over the 11 years.

The total loss of healthy years over the 11 years will account to 89.1 years (0.1 DW). And 178.3 years (0.2 DW).

Most of the producers (80%) are well informed about the disease and its zoonotic nature, (53%) are well acquainted with the economic importance of the disease. All of them Support the idea of disease control.

The study confirm the endimicity of the scheme with both human and bovine Brucellosis.and prove the economic loss due to disease both financial and its burden on human heath.

The study recommends intervention to control the disease. Adoption of Whole herd Vaccination policy was recommended. Simulation of different intervention strategies to analyze the cost and benefits will help policy makers in setting up their priorities

الخلاصية

استهدفت الدراسة تقدير الخسائر الناتجة عن تفشى مرض البروسيلوزس بمشروع ألبان كوكو. استخدمت الدراسة نموذج ال Ecozoo مع إجراء بعض التعديلات كأداة للتحليل تم الحصول على البيانات المطلوبة من مصادر ها الأولية والثانوبة. للحصول على البيانات الأولية تم إجراء

مسحين حقليين لجمع بيانات عن بر وسيلا الإنسان وأخر عن بر وسيلا الأبقار أيضا تم استخدام أسلوب المقابلة الشخصية مع المنتجين و الخبراء لجمع البيانات الأولية.

تم إجراء مسح بر وسيلا الإنسان في الفترة ما بين ينائر إلى يونيو 2004 حيث جمعت عينات للدم من 176 متبرع بالإضافة الى البيانات المطلوبة.

اعتمد التشخيص المعملي على اختبارات المصل بالتحديد اختبار الروز بنغال ككاشف مسحي واختبار TAT اختبار تأكيدي. أخضعت العينات أيضا لاختبار TAT اختبار روتيني يجرى بالسودان.

لتقدير عبء المرض على الإنسان تم استخدام مؤشر غير نقدي (زمني) يعرف بسنوات التعطيل المعدلة.

بالنسبة لبر وسيلا الأبقار تم اختيار العينة على مرحلتين ، في المرحلة الأولى تم اختيار الحيازات (القطعان) عشوائيا. في المرحلة الثانية تم اختيار الوحدات الإحصائية (الحيوانات). استهدفت الدراسة كل الأبقار البالغة. بلغ عدد الحيازات المختارة 30 حيازة بينما بلغ عدد الأبقار . حيث تم اخذ العينات وفحصها بواسطة اختبار الروز بنغال و c-ELISA .

فيما يتعلق بانتشار المرض توصلت الدراسة الى النتائج التالية:

بلغ معدل انتشار المرض في الانسان11.3% بناء على ايجابية اختبار المصل و2.8% بناء على الإصابة الحقيقية.

بالنسبة للأبقار بلغ معدل انتشار المرض في القطعان 90%، معدل الانتشار بين الأبقار 90%، معدل الانتشار داخل القطيع 24.5%.

بناء على هذة المعدلات بلغ تقدير عدد الأشخاص المصابين في سنة الأساس 18 شخصا وعدد الأبقار المصابة 1508. بلغ تقدير الخسائر الناجمة عن المرض ب67126953.8 دينار (سبعة وستون مليونا ومائه ستة وعشرون ألفا وتسعمائة ثلاث خمسون دينار). منها دينار (ستة وستون مليونا ستمائة وعشرة ألفا وخمسمائة وثلاث دينار) خسائر قطاع الألبان بينما بلغت الخسائر في قطاع الصحة 216450 (مائتان وأربعة عشر ألفا وأربعمائة وخمسون دينار). عليه فان قطاع الألبان يتحمل 99.76 % من تكلفة المرض بينما يتحمل قطاع الصحة 03.33% من التكلفة .

فيما يتعلق بالعبء الصحى على الإنسان، توصلت الدراسة الى أن الفرد المصاب يفقد 0.785318 من سنوات عمره المعافاة اذا ارتبط المرض بوزن التعطيل 0.1، و 0.785318 سنه إذا ارتبط المرض بالوزن 0.2 ، وعليه يبلغ عدد سنوات العمر المعافاة الني يفقدها المصابون في الحالة الأولى 7.067862 سنه و 14.13572 سنه في الحالة الثانية.

بحثت الدراسة تطور المرض خلال 11 سنه من خلال سيناريوهين ، في السيناريو الاول ترك العدد الكلي للحيوانات ينمو وفق المعدلات الجارية. في هذه الحالة فان عدد الحيوانات المصابة سوف ينمو بمعدل 103.2% و ينمو عدد الأفراد المصابين بمعدل 27.8% وتكون تكلفة المرض الكلية في خلال إحدى عشر سنة (2004-2004) 1022123020 دينار 4088492.08 دولار .

بلغ عدد سنوات العمر المعافاة المفقودة إحدى عشر سنة 59.7 سنه بوزن 0.1 و 119.4 سنه بوزن 0.2 .

أجرى السيناريو الثاني بافتراض ثبات العدد الكلى للحيوانات. في هذة الحالة فان عدد الحيوانات المصابة سوف يزيد بمعدل. 1 258% في خلال إحدى عشر سنة بينما يزيد عدد الأفراد

المصابين أصابه فعليه 133% . تبلغ التكلفة الكلية للمرض 1414827570 دينار القيمة الحالى. ما يعادل 5655170.142 دولار .

يقدر الفقد الكلى لسنوات العمر المعافاة ب 89.1 سنه بوزن 0.1 وطبيعته المعدية للإنسان.وأن الدراسة الى أن معظم المنتجين(80 %) لديهم العلم الكافي بالمرض وطبيعته المعدية للإنسان.وأن (53 %) منهم يدركون أهميته الاقتصادية.أكدت الدراسة استيطان المرض بالمشروع وأثبتت الخسائر الناجمة عنه. كما أوضحت تطور المرض والخسائر الناتجة عن ذلك عند عدم السيطرة عليه في خلال إحدى عشر سنه .أوصت الدراسة بالتدخل للسيطرة على المرض في الحيوان وذلك بإتباع سياسة التطعيم الكلى للقطيع ثم تطعيم العجول سنويا والحيوانات البالغة كل سنتين لمده عشر سنوات ثم إتباع سياسة الفحص وذبح الحيوانات الموجبة .وذلك بعد مضاهاة الاستراتيجية المختارة بمعدلات مختلفة لكفاءة المصل لتحديد نسبه التكاليف والمنافع مما يساعد متخذي القرار في اختيار البديل المناسب .

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LIST OF ABBREVIATIONS

ACAPP Arab Company for Agriculture production and processing

ASA Applied science and analysis

BBAT Buffered Brucella antigen tests

BEP Brucellosis Eradication Program

BTB Bovine tuberculosis

Cc Conjugate control

c-ELISA. Competitive Enzyme Linked Immuno- sorbent Assay.

CDC The Centers for Disease Control and Prevention

CNS Central Nervous System

CF Complement fixation

DALYs. Disability-adjusted life years

Defra Department for Environmental, Food and Rural Affairs

DW Disability weight

DBMD Division of Bacterial and Mycotic Diseases

FAO Food and Agriculture Organization

GATT General agreement on Trade and Tariff

GU Genitourinary

H2O2 Hydrogen peroxide

HR P Horse- radish peroxidase

IELISA Indirect Enzyme Linked Immuno- sorbent Assay

ICFTU International Complement Fixation Unit

IM Intra muscular

IMI intramammary infusion

IV Intravenous

KCDFs Kuku cooperative dairy farms

LA-OTC long-acting oxytetracycline

LDCs Less developing countries

LDPS livestock development planning system

M.D Medical Doctor

MAb Monoclonal. Antibody

MMWR Mortality and Morbidity Weakly Report

MRT Milk Ring Test

OD Optical density

OIE Office International des Epizooties

OIEISS OIE International Standard System

PBS Phosphate buffer saline

PCR polymerase chain reaction

PI percentage inhibition

PO Per Oss

PP per cent positivity

RBSA Rose-Bengal slide agglutination

RBT Rose –Bengal Test Serum agglutination test **SAT** Smooth Lipopoly Saccaride **S-LPS** ST streptomycin **STA** Standard tube agglutination **TAT** Tube Agglutination Test trimethoprim/sulfamethoxazole TMP-SMZ World Health Organization **WHO** WTO World Trade Organization

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Dedications

To my husband and family,

To Kuku Dairy producers

and those who suffered From Brucellosis

I dedicate this work.

Khansaa

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First, Thank God who gave me the patience, ability and strength to complete this work.

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ABSTRACT

The objective of this research is to quantify the impact of Brucellosis on Kuku Dairy scheme. Ecozoo model with introduction of some modifications was used as analytical framework. It provides the information needed to analyze the epidemiology of the disease in both animals and humans as well

as the economic analysis. Epidemiological data required were obtained from primary sources. These include two seroprevalence surveys for cattle, personal communications were also used as a source of primary data.

Two field surveys (including seroprevalence and socioeconomic surveys) were conducted during the period Jan- June 2004. The Humans Brucellosis survey included 176 Volunteers from the population at risk. In the Bovine Brucellosis survey the sample design was based on two stages random sample design. In the first stage, holdings (the primary statistical units) were identified. Then the individual Animals (the Secondary Statistical units) were selected. The size of the primary Statistical units was calculated as 30.1 with α =0.05 and desired accuracy of (10). The number of animals examined was 574.

The laboratory diagnosis relied mainly on serological tests namely Rose

–Bengal Test (RBT) as screening test and Competitive Enzyme linked

Immuno- Sorbent Assay (c-ELISA) as confirmatory test. Tube agglutination
test (TAT) was used as a routine test.

According to the confirmatory test: the herd prevalence rate is 90%, individual animal prevalence rate 24.9% and average within herd prevalence rate 24.5% (Sd 15.7 CI 4.088 at 95%). Based on c-Elisa human prevalence rate is 11.3% considering the seropositivity and 2.8% considering active brucella infection. Based on prevalence rates estimates on human parameters was found to be 18 active infected person in the baseline year and the infected cattle are 1508 head. These parameters were introduced into Ecozoo model. Data for DALYs calculation were obtained from primary sources as well as secondary sources.

Based on the epidemiological and economic data the total cost of the disease in both dairy and health sectors was found to be 65833570 SD out of which 65617120 SD was the cost of the dairy sector and 216450SD was the cost of health sector. Accordingly, the dairy sector Shouldered 99.97 % of the cost, while the health sector Shouldered 0.03% of Brucellosis cost in the base line year.

The burden of the disease was measured in DALYs. In the baseline year 18 persons were infected with Brucellosis . If we considered Brucellosis associated with level 0.1-disability weight, every infected person will loose 0.392659 year of his healthy life as a result of the infection. The total infected people will loose 7.067862 years of their healthy life. If the disease associated with level 0.2 disability weight, every infected person will loose 0.785318 years and the whole infected people will loose 14.13572 years of their healthy life.

Evolution of the disease was investigated in two scenarios. In scenario 1 the total animal population was left to grow at the normal rates. In this case the number of seropositive animals will increase with growth rate of 1.574 followed by the increase in number of actively infected humans with growth rate of 1.875.

The total cost of the disease in both dairy and health sectors were found to be 936445610SD (665340905.8 SD in PV) over the 10 years, out of which 934974941SD (664219621.8SD in PV) was the cost of the dairy sector and 1610142 SD (1121284 SD in PV) was the cost of health sector.

The total loss of healthy years over the 10 years will account to 52.61631 years (0.1 DW). And 105.2326 years (0.2 DW).

In Scenario 11 the total number of animals was held constant. In this case the number of seropositive animals will increase during the 10 years with growth rate of 2.27. Followed by the increase in number of actively infected humans with growth rate of 3.667. The total cost of the disease in both dairy and health sectors was found to be **1321723709** SD (912709172SD in PV) over the 10 years, out of which 1319199296 SD (911003344SDPV) was the cost of the dairy sector and 2524413 SD (1705828 SD in PV) was the cost of health sector.

The total loss of healthy years over the 10 years will account to 82.06573 years (0.1 DW). And 164.1315 years (0.2 DW).

Most of the producers (80%) are well informed about the disease and its zoonotic nature, (53%) are well acquainted with the economic importance of the disease. All of them Support the idea of disease control.

The study confirm the endimicity of the scheme with both human and bovine Brucellosis.and prove the economic loss due to disease both financial and its burden on human heath.

The study recommends intervention to control the disease. Adoption of Whole herd Vaccination policy was recommended. Simulation of different intervention strategies to analyze the cost and benefits will help policy makers in setting up their priorities

الخلاصية

استهدفت الدر اسة تقدير الخسائر الناتجة عن تقشى مرض البر وسيلوزس بمشروع ألبان كوكو

استخدمت الدراسة نموذج ال Ecozoo مع إجراء بعض التعديلات كأداة للتحليل تم الحصول على البيانات المطلوبة من مصادر ها الأولية والثانوية. للحصول على البيانات الأولية تم إجراء مسحين حقليين لجمع بيانات عن بر وسيلا الإنسان وأخر عن بر وسيلا الأبقار أيضا تم استخدام أسلوب المقابلة الشخصية مع المنتجين و الخبراء لجمع البيانات الأولية.

تم إجراء مسح بر وسيلا الإنسان في الفترة ما بين ينائر إلى يونيو 2004 حيث جمعت عينات للدم من 176 متبرع بالإضافة الى البيانات المطلوبة.

اعتمد التشخيص المعملي على اختبارات المصل بالتحديد اختبار الروز بنغال ككاشف مسحي واختبار TAT اختبار تأكيدي. أخضعت العينات أيضا لاختبار TAT اختبار روتيني يجرى بالسودان.

لتقدير عبء المرض على الإنسان تم استخدام مؤشر غير نقدي (زمني) يعرف بسنوات التعطيل المعدلة.

بالنسبة لبر وسيلا الأبقار تم اختيار العينة على مرحلتين ، في المرحلة الأولى تم اختيار الحيازات (القطعان) عشوائيا. في المرحلة الثانية تم اختيار الوحدات الإحصائية (الحيوانات). استهدفت الدراسة كل الأبقار البالغة. بلغ عدد الحيازات المختارة 30 حيازة بينما بلغ عدد الأبقار 574. حيث تم اخذ العينات وفحصها بواسطة اختبار الروز بنغال و c-ELISA .

فيما يتعلق بانتشار المرض توصلت الدراسة الى النتائج التالية:

بلغ معدل انتشار المرض في الانسان11.3% بناء على ايجابية اختبار المصل و2.8% بناء على الإصابة الحقيقية.

بالنسبة للأبقار بلغ معدل انتشار المرض في القطعان 90%، معدل الانتشار بين الأبقار 90%، معدل الانتشار داخل القطيع 24.5%.

بناء على هذة المعدلات بلغ تقدير عدد الأشخاص المصابين في سنة الأساس 18 شخصا وعدد الأبقار المصابة 1508. بلغ تقدير الخسائر الناجمة عن المرض ب67126953.8 دينار (سبعة وستون مليونا ومائه ستة وعشرون ألفا وتسعمائة ثلاث خمسون دينار). منها دينار (ستة وستون مليونا ستمائة وعشرة ألفا وخمسمائة وثلاث دينار) خسائر قطاع الألبان.بيذما بلغت الخسائر في قطاع الصحة 216450 (مائتان وأربعة عشر ألفا وأربعمائة

وخمسون دينار). عليه فان قطاع الألبان يتحمل 99.76 % من تكلفة المرض بينما يتحمل قطاع الصحة 03.33% من التكلفة .

فيما يتعلق بالعبء الصحى على الإنسان، توصلت الدراسة الى أن الفرد المصاب يفقد 0.785318 من سنوات عمره المعافاة اذا ارتبط المرض بوزن التعطيل 0.1، و 0.785318 سنه إذا ارتبط المرض بالوزن 0.2 ، وعليه يبلغ عدد سنوات العمر المعافاة الني يفقدها المصابون في الحالة الأولى 7.067862 سنه و 14.13572 سنه في الحالة الثانية.

بحثت الدراسة تطور المرض خلال 11 سنه من خلال سيناريوهين ، في السيناريو الاول ترك العدد الكلي للحيوانات ينمو وفق المعدلات الجارية. في هذه الحالة فان عدد الحيوانات المصابة سوف ينمو بمعدل 103.2% و ينمو عدد الأفراد المصابين بمعدل 27.8% وتكون تكلفة المرض الكلية في خلال إحدى عشر سنة (2004-2004) 1022123020 دينار 4088492.08 دولار .

0.1 بلغ عدد سنوات العمر المعافاة المفقودة إحدى عشر سنة 59.7 سنه بوزن 0.2 . 0.2

أجرى السيناريو الثانى بافتراض ثبات العدد الكلى للحيوانات. في هزة الحالة فان عدد الحيوانات المصابة سوف يزيد بمعدل.1 258% في خلال إحدى عشر سنة بينما يزيد عدد الأفراد المصابين أصابه فعليه 141482757%. تبلغ التكلفة الكلية للمرض 1414827570 دينار بالقيمة الحالى. ما يعادل 5655170.142 دولار.

يقدر الفقد الكلى لسنوات العمر المعافاة ب 89.1 سنه بوزن 0.1 و0.2 وطبيعته المعدية للإنسان.وأن الدراسة الى أن معظم المنتجين(80 %) لديهم العلم الكافي بالمرض وطبيعته المعدية للإنسان.وأن (53 %) منهم يدركون أهميته الاقتصادية.أكدت الدراسة استيطان المرض بالمشروع وأثبتت الخسائر الناجمة عنه. كما أوضحت تطور المرض والخسائر الناتجة عن ذلك عند عدم السيطرة عليه في خلال إحدى عشر سنه .أوصت الدراسة بالتدخل للسيطرة على المرض في الحيوان وذلك بإتباع سياسة التطعيم الكلى للقطيع ثم تطعيم العجول سنويا والحيوانات البالغة كل سنتين لمده عشر سنوات ثم إتباع سياسة الفحص وذبح الحيوانات الموجبة .وذلك بعد مضاهاة الاستراتيجية المختارة

بمعدلات مختلفة لكفاءة المصل لتحديد نسبه التكاليف والمنافع مما يساعد متخذي القرار في اختيار البديل المناسب .

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$$1/n = 1/nX + 1/N$$

$$Z \cdot st(p) = Z \quad \{ (P.q/n) \quad (N-n)/N \}^{1/2}$$

$$\alpha_{c}(effective) = \alpha_{c}(baseline) \quad (1-(\eta)) \quad (Y/X+Y)$$

$$(3)$$

$$I \text{ ncidence } cattle = \gamma_{c} \beta_{c}XY$$

$$dx/dt = \alpha_{c} (X+Y)(1-(\eta (Y/(X+Y)))) - \mu_{c}X - \gamma_{c}\beta_{c}XY$$

$$(5)$$

$$dY/dt = \gamma_c \beta_c XY - \mu_c X \tag{6}$$

$$dA/dt = v_h (A+B+C) + \lambda C - (\gamma_c \beta_{ch} AY) - \mu_h A$$
 (7)

$$dB/dt = (P\gamma_c\beta_{ch} AY) - \kappa B - \mu_h B$$
 (8)

$$dC/dt = (1-P) \gamma_c \beta_{ch} AY + \kappa B - \lambda C - \mu_h C$$
 (9)

YLD= DW {
$$\underline{KCe^{ra}} \{e^{-(r+\beta)(L+a)} \{-(r+\beta)(L-a)-1\}-e^{-(r+\beta)a}\{-(r+\beta)a-1\}\}+\underline{1-K}(1-e^{-rL})\}$$
 (10)

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Fig. 8b Change in the number of susceptible, infected and Immune humans in Kuku schem with constant animal population

LIST OF ABBREVIATIONS

ACAPP Arab Company for Agriculture production and processing

ASA Applied science and analysis

BBAT Buffered Brucella antigene tests

BEP Brucellosis Eradication Program

BTB Bovine tubercullosis

Cc Conjugate control

CELISA. Competitive Enzyme Linked Immuno- sorbent Assay.

CDC The Centers for Disease Control and Prevention

CNS Central Nervous Sytem

CF Complement fixation

DALYs. Disability-adjusted life years

Defra Department for Environmental, Food and Rural Affairs

DW Diability weight

FAO Food and Agriculture Organization

GATT General agreement on Trade and Tariff

GU Genitourinary

H2O2 Hydrogen peroxide

HR P Horse- radish peroxidase

IELISA Indirect Enzyme Linked Immuno- sorbent Assay

ICFTU International Complement Fixation Unit

IM Intra muscular

IMI intramammary infusion

IV Intravenous

KCDFs Kuku cooperative dairy farms

LA-OTC long-acting oxytetracycline

LDCs Less developing counteries

LDPS livestock development planning system

M.D Medical Doctor

MAb Monoclonal. Antibody

MMWR Mortality and Morbidity Weakly Report

MRT Milk Ring Test

OD Optical density

OIE Office International des Epizooties

PBS Phosphate buffer saline

PCR polymerase chain reaction

PI percentage inhibition

PO Per Oss

PP per cent positivity

RBSA Rose-Bengal slide agglutination

RBT Rose –Bengal Test

SAT Serum agglutination test

S-LPS Smooth Lipopoly Saccaride

ST streptomycin

STA Standard tube agglutination

TAT Tube Agglutination Test

TMP-SMZ trimethoprim/sulfamethoxazole

WHO World Health Organization

WTO World Trade Organization

LIST OF MAPS

Map

- 3- The Republic of Sudan
- 4- Khartoum State

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