

# Antimicrobial use and resistance in livestock production in a One Health context

## Edinburgh AMR Forum





**Till Bachman** (Centre for Inflammation Research) – Introduction to AMR Ecosystem in Edinburgh and DOSA project

Shailesh Shrestha (SRUC) – Economic assessment of alternative anti-microbial use options on livestock farms

**Deborah Hoyle** (Roslin Institute) – Impact of the ZnO ban on post-weaning diarrhoea and AMR on commercial pig farms in the UK

Nuno Silva (Moredun Research Institute) – Livestock: Understanding the Antimicrobial Resistance and Use of Novel Antimicrobial Alternatives



## **Edinburgh AMR Forum and DOSA project**

From Multiple Disciplines to Transdisciplinary Ecosystems for AMR

#### **Till T. Bachmann**

Infection Medicine, Edinburgh Medical School: Biomedical Sciences, University of Edinburgh Center for Inflammation Research, Institute for Regeneration and Repair





Antimicrobial use and resistance in livestock production in a One Health context Edinburgh, 22 - 24 April 2023





## **Introduction & Contact Details**

#### Till T. Bachmann, PhD FRSB

- Professor of Molecular Diagnostics and Infection
- AMR Strategy Lead Edinburgh Infectious Diseases
- Deputy Head of Infection Medicine
- Co-Director of Fleming Fund Fellowships Host Institution programme University of Edinburgh
- Chair of JPIAMR Scientific Advisory Board
- Longitude Prize Judge/Advisory Panel Member
- Member of the Expert Group for the WHO Global AMR Research Agenda
- Member of the Expert Group for the Quadripartite One Health Priority Research Agenda on AMR
- Infection Medicine, University of Edinburgh Medical School: Biomedical Sciences, University of Edinburgh
- Centre for Inflammation Research, Institute for Regeneration and Repair, University of Edinburgh
- Zhejiang University University of Edinburgh Institute, China

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LinkedIn: linkedin.com/in/tillbachmann

## Edinburgh AMR Forum

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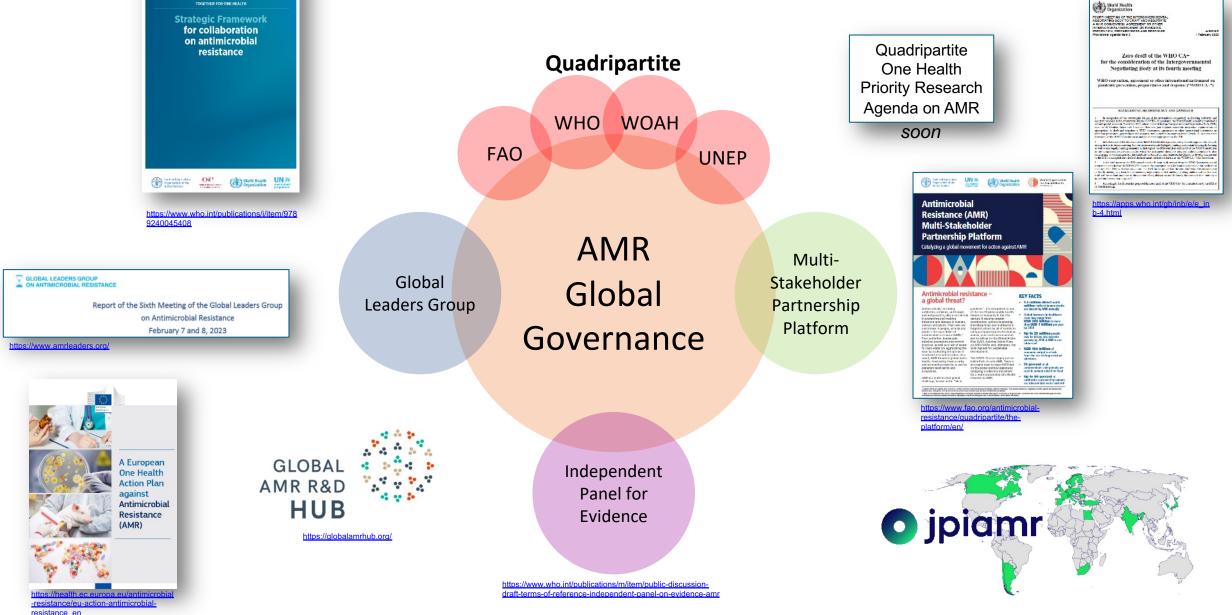




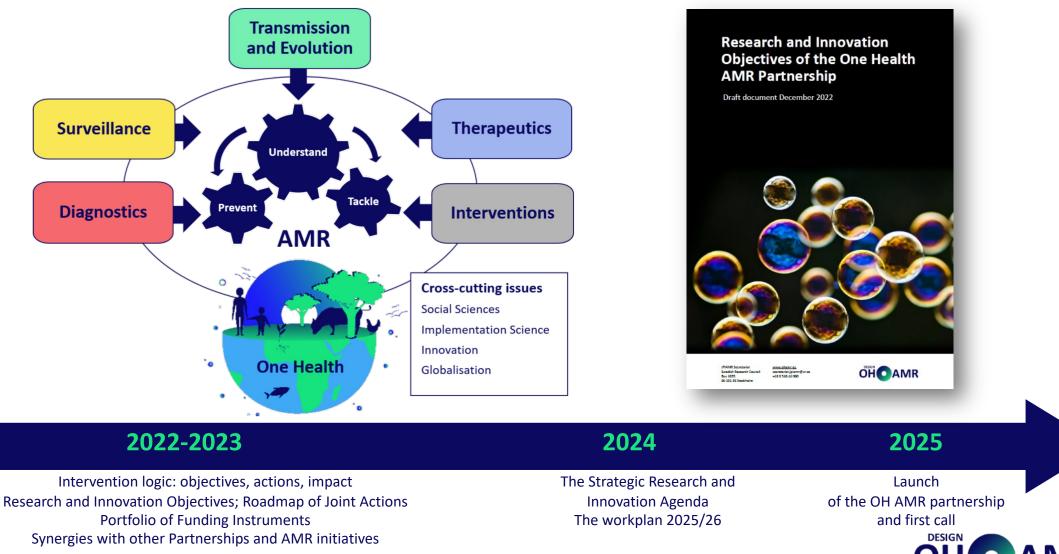


OGETHER FOR ONE HEALTH

## **Global One Health AMR Initiatives**



## **OH AMR Partnership 2025-2032**



www.jpiamr.eu/one-health-amr www.ohamr.eu

## **Edinburgh Antimicrobial Resistance Forum**

#### Led by Edinburgh Infectious Diseases AMR Strategy Lead, Professor Till Bachmann

Network of over 200 researchers from all career stages focusing on AMR in Edinburgh

- Developing collaborative interactions
- Communicating with internal and external audiences
- Increasing industry awareness of Edinburgh's strengths in AMR research, and supporting researcher engagement with external partners

# Edinburgh AMR Forum

Edinburgh Infectious Diseases



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#### Edinburgh AMR Forum

#### Summary of Activities 2021/2022

- Core Team: Till Bachmann, Hilary Snaith, Marissa Millar
- Set-up of AMR Forum Working Group, TOR, AMR strategy, regular meetings
- Set-up of AMR Forum Fortnightly Seminar Series (Zoom, stable audience ~30), from Oct 2022 cosharing of some events with Microbiology Forum
- World Antimicrobial Awareness Week (WAAW) 2021 AMR Forum Twitter Campaign, WAAW 2022 AMR Forum Showcase event
- AMR Forum **Poster Day** 20 April 2022
- Set-up of AMR Forum **Communications Group** (Katie Atkins chair, initial discussions)
- BBSRC Impact Accelerator Award Project to enhance industry relations → IP Pragmatics Report → 'translational slide deck' to EI → e.g. BIO-EUROPE SPRING March 2022
- Very strong funding and policy stakeholder links (e.g. JPIAMR, Wellcome, UKRI, LifeArc, Gifford Baillie, Quadripartite (WHO, WOAH, FAO, UNEP), Global AMR R&D Hub), involvement with AMR and One Health strategy updates of global stakeholders



#### Edinburgh AMR Forum

#### Analysis of market opportunities for industry-academia partnering in antimicrobial resistance in diagnostics

Publication numbers in particular areas of AMR research, for each selected University

	Organisms		Infection type		Innate immunity/host	Evolutionary biology	Molecular/genomic	Average	Total	Average			General		Automated systems,				Average
	Gram			Community-	response	expertise of	expertise of	across	number of	papers per			AMR		software &	Surveillance	Average	Total	papers
Institution	+ve	Gram-ve	Nosocomial	acquired	expertise	pathogens	pathogens	fields	staff <sup>41</sup>	staff <sup>42</sup>				Rapid	data	&	across	number	per
Edinburgh	1998	2102	26095	7960	501	722	19049	8347	10865	0.76822		stitution	research	testing	analytics	epidemiology	fields	of staff <sup>43</sup>	staff <sup>44</sup>
Cambridge	1606	1679	26211	5972	222	406	21157	8179	13720	0.596137	Edi	linburgh	28384	3903	24912	13394	17648	10865	1.624321
Sheffield	958	980	14469	4682	114	261	10453	4560	8774	0.519669	Ca	mbridge	31471	4097	25434	12032	18259	13720	1.330794
Glasgow	804	865	11762	3769	240	215	9131	3827	7870	0.486223	She	effield	17466	2099	15079	7193	10459	8774	1.192073
Imperial	1789	1817	18961	4757	277	305	14695	6086	12993	0.468395	Gla	asgow	14099	1597	11714	6237	8412	7870	1.068837
											Im	perial	23413	2592	18674	8631	13328	12993	1.025745
Dundee	399	422	4182	1376	103	71	3853	1487	3362	0.442169	UC	CL	27498	3318	23150	12974	16735	17324	0.966001
UCL	1645	1440	23216	7265	148	351	17766	7404	17324	0.427409	Wa	arwick	11973	1561	10563	4752	7212	7492	0.96266
Warwick	691	725	9714	3244	95	123	7085	3097	7492	0.413336	Du	undee	5318	541	4318	2411	3147	3362	0.93605
Leeds	857	812	13106	4130	84	104	9860	4136	10487	0.394407	Lee	eds	15531	2177	13441	6114	9316	10487	0.888314
Oxford	1359	1481	17326	5001	189	452	13556	5623	14517	0.387369	Bir	rmingham	14780	1755	12331	6404	8818	10287	0.85715
Birmingham	1044	1043	12200	3814	169	108	9207	3941	10287	0.383077		dord	21657	2479	16613	8976	12431	14517	0.856324
Liverpool	857	952	9207	2876	100	206	6813	3002	8011	0.374681		uthampton	11715	1276	9569	4020	6645	7915	0.839545
Southampton	494	537	9328	2734	36	69	6430	2804	7915	0.354264		/erpool	11250	1120	9151	4742	6566	8011	0.819592
MIT	1219	1263	18532	3331	113	138	13504	5443	17065	0.318949	M		23492	2943	18803	5625	12716	17065	0.745136
Institut													7414		5868		4354		
Pasteur	548	520	1970	560	121	140	2417	897	3075	0.291568		ewcastle		841		3292		7956	0.547229
Newcastle	517	553	6010	584	68	70	4664	1781	7956	0.223838		anchester stitut	12425	1223	9268	4375	6823	13381	0.509883
Manchester	561	560	9480	2613	63	70	7472	2974	13381	0.222266		isteur	2500	300	1818	1325	1486	3075	0.483171
U.California	4538	4669	75134	12495	506	973	837	14165	135742	0.104349		California	99871	9141	63465	27886	50091	135742	0.369014

- UoE has the highest number of papers per staff (on average) in both general aspects of AMR and AMR diagnostics. ٠
- UoE ranks at the top on most research areas, both in fundamental AMR research and in AMR diagnostics, showing a ٠ remarkable depth and width of expertise in AMR.
- The focus should be on further **profile building**, internal and external **messaging**, and on making potential **collaborators** • aware of Edinburgh's expertise.





>130 Participants students, researchers, funders, policy, industry, general public

"Very well organised, really enjoyed it very, insightful, informative day with expert speakers really enjoyed the academic and routes to translation sessions great to hear from a broad range of people and different points of view"

## Edinburgh AMR Forum

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## 21 November 2022

Playfair Library Old College University of Edinburgh

## Edinburgh AMR Forum Showcase

## Innate immune microbicidal mechanisms against pathogens

#### PI: Prof. David Dockrell / SHIELD consortium

- Background:
  - Optimising innate immune responses provides a basis for host-directed therapies to combat AMR.
  - Recalibrating ineffective immune responses in disease (A) represents a therapeutic strategy.

#### Research synopsis:

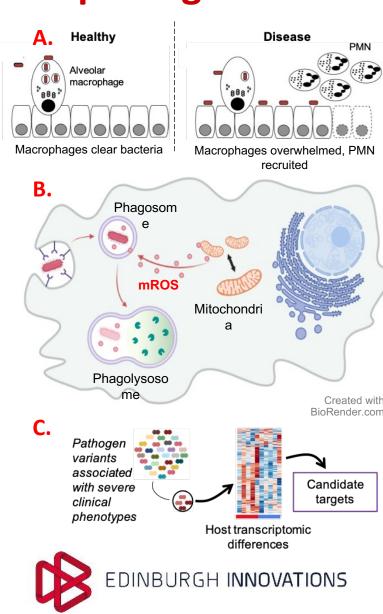
- Host responses against bacteria or viral/bacterial co-infection identify key features of a successful innate immune response.
- Rate-limiting microbicidal responses were identified in macrophages and other phagocytes.
- *In vitro* and informatics screens identified candidate host targets we assess these *in vivo*, through studies with susceptible patient groups, and therapeutically.

#### Key findings:

- Pathogens and disease states limit canonical phagolysosomal responses mitochondrial adaption is a key strategy to enhance pathogen clearance (B).
- Apoptosis associated killing is a default mechanism to prevent intracellular pathogen survival.
- Comparisons of immune-adaptive pathogen variants identifies novel microbicidal mechanisms (C).
- Opportunities for industrial collaboration:
  - SHIELD consortium investigating re-purposing of drugs for validated targets.
  - Hits from host-directed screens identifying novel therapeutic targets.

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## Identification of novel anti-microbials, therapeutic targets, clinical metagenomic diagnostics

## PI/ Group Name: Prof Ross Fitzgerald, Laboratory for Bacterial Evolution and Pathogenesis

- Background: Director of Edinburgh Infectious Diseases & Professor of Molecular Bacteriology
- Research synopsis: Evolution of host-adaption, pathogenicity and AMR in bacterial pathogens including *Staphylococcus aureus* and *Legionella pneumophila*
- Key findings: Metagenomics of clinical samples can be used to rapidly identify pathogens and antibiotic sensitivity; Microbiome analysis has revealed novel antibacterial and anti-biofilm agents; Comparative genomics has revealed mechanisms of niche adaptation representing novel therapeutic targets; Comparative genomics and reverse vaccinology can be used to identify vaccine candidates;
- Opportunities for industrial collaboration: Identification of novel anti-microbials, vaccines and rapid sequence-based diagnostics

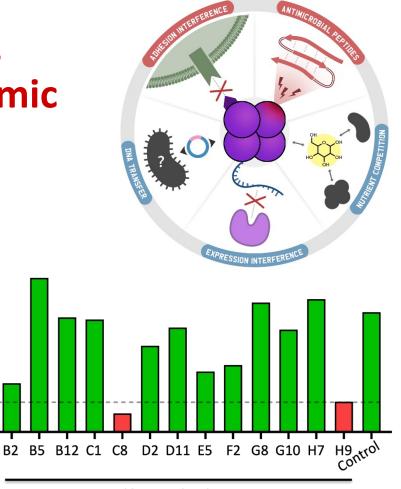
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100

% Biofilm 20.



Bovine nasal bacterial isolate supernatants

a) Different targets for anti-bacterial and anti-biofilm agent

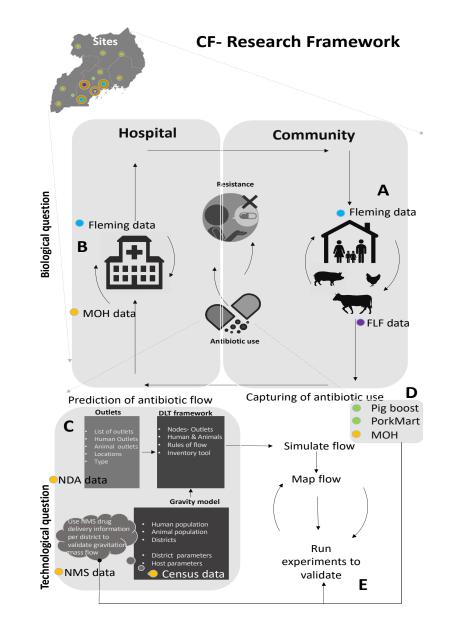
 b) Identification of novel anti-Staphylococcus aureus biofil agents produced by bacteria in the bovine nasopharynx



## **Digital one-health**

#### PI: Adrian Muwonge, Roslin Institute

- **Background**: I am a Chancellor's Fellow based at Roslin Institute, focusing on health digital. I work in collaboration with the EERA-group, Blockchain Technology Laboratory and Edinburgh Infectious Diseases
- **Research synopsis:** My research aims to develop and apply a methodology that estimates community-generated antibiotic resistance and the antibiotic usage that drives it. This supports data-driven policy decision-making on antibiotic usage and predicts the impact of livestock-targeted interventions on human health.
- To develop such methodologies, especially in developing countries with agricultural-based economies, we must define the AMR occupational risk, i.e. how resistance is generated and spread within farming communities. Our work goes a step further to ask how we can exploit technology to estimate antibiotic resistance and usage in farming systems sustainably.
- Key findings: Work in progress
- **Opportunities for industrial collaboration**: I am keen on industrial collaborations



#### Edinburgh AMR Forum

Diseases





## **Epidemiology of Antimicrobial Resistance**

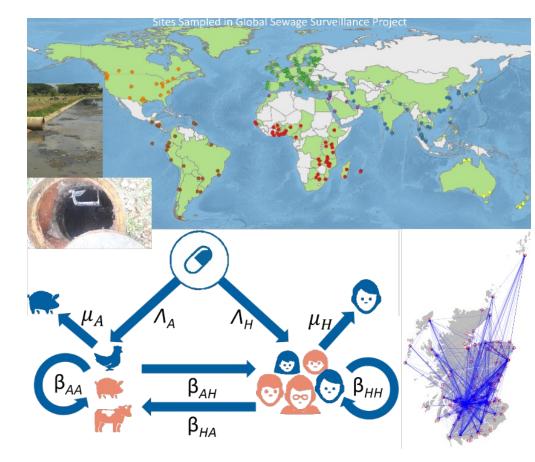
#### Epidemiology Research Group (Prof Mark Woolhouse, Dr. Bram van Bunnik, Dr. Bryan Wee)

- **Background**: Infectious disease epidemiology, antimicrobial resistance (AMR), zoonoses, metagenomics, whole genome sequencing.
- **Research synopsis**: We use a variety of quantitative and data-intensive methods to understand the dynamics of AMR at the human and animal interface.
- Key findings:
  - AMR gene abundance strongly correlates with socio-economic, health and environmental factors improving sanitation and health could potentially limit the global burden of AMR.
  - The detection of bacterial and AMR transmission requires a structured sampling framework coupled with high resolution genotyping.
  - Mathematical modelling can be used to understand the impact of One Health interventions on human health.
- Opportunities for industrial collaboration:
  - Analysis of AMR surveillance data (metagenomic, resistant isolates).
  - Epidemiological analysis of resistant infections / outbreaks.

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#### **Development and evaluation of a complex ePrescribing-based Antimicrobial Stewardship (ePAMS+) intervention for hospitals**

#### PI/ Group Name: Professor Aziz Sheikh, Usher Institute

- **Background**: Despite national guidance, antibiotic prescribing rates are still increasing in hospitals. The reasons are multifactorial, including limited real-time access to information that may influence decisions to initiate antibiotics, concerns about missing potentially serious infection (e.g. sepsis), and lack of continuity of care, which limits the opportunity for an informed review of progress and results in a reluctance to delay initiation of and/or change/discontinue an antibiotic that has already been commenced. These challenges are compounded by the substantial time pressures that clinicians face.
- **Research synopsis**: A multidisciplinary collaboration to develop and evaluate a multifaceted intervention (ePAMS+) that incorporates technical, behavioural and organisational components to safely reduce inappropriate antibiotic use in adult medical in-patients.
- Key findings: 1) Attention to socio-organisational contexts and workflows is crucial when designing technologybased antimicrobial stewardship interventions; 2) Interventions that help reduce prescriber/reviewer uncertainty and improve multidisciplinary collaboration surrounding antimicrobial prescribing and review are most likely to be effective; 3) Larger well-designed randomised studies are needed to investigate the impact of interventions on AMS; 4) There is a need for outcome measures to be standardised and for more quantity measures to be included by researchers to measure the number or cost of antibiotics being used; and 5) We have developed an ePAMS+ intervention and are preparing to run a feasibility trial.

Contact: <u>Rona.Sharp@ed.ac.uk</u> (ePAMS+ Research Manager)

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## **Rapid Diagnostics**

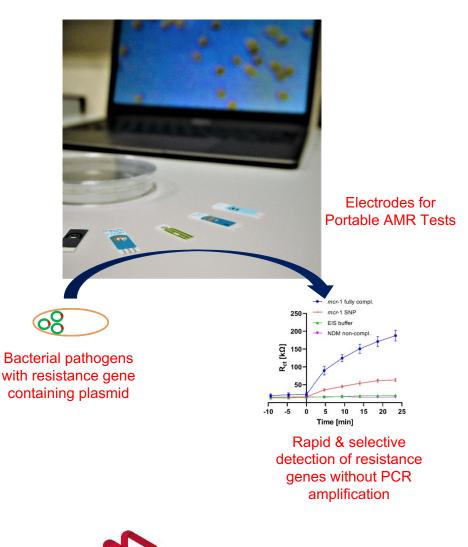
#### PI/Group Name: Prof. Till Bachmann/Infection Medicine

- Diagnostics are priority tools against AMR. By detecting pathogens, antibiotic resistance, antibiotic susceptibility and/or host response to infection, diagnostics enable appropriate therapy decisions, patient management, narrow spectrum drug development and surveillance.
- We study user needs for diagnostics, develop target product profiles, and do research on rapid, low complexity, cost effective diagnostics which can be used at the point of need in a One Health and Global Health context using e.g. electrochemical biosensors, artificial intelligence, microfluidics, wearable sensors and paper diagnostics. Key disease areas are urinary tract infections, sepsis, liver health.
- Key findings: Point-of-Care-Test platform for PCR free and label free detection of pathogens (e.g. *E.coli, P. aeruginosa*), AMR (e.g. MRSA, NDM, *mcr-1*), microRNAs, biomarkers (e.g. TREM-1, MMP9), exosomes.
- Opportunities for industrial collaboration: Target Product Profile development. Assay development for new targets/diseases. Feasibility/Design for manufacture studies. Performance analysis.
- Nat Rev Microbiol 2019, Anal Chem 2021, JAC Antimicrob Resist 2021

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## Fleming Fund Fellowship scheme

Fleming Fund is £265 million UK government investment into improving laboratory capacity for diagnosis and surveillance of AMR in low and middle income countries

#### Edinburgh Host Institution Phase I (2019 - 21) Ross Fitzgerald, Adrian Muwonge

- Total grant income to UoE £1.4 M
- Major support through Edinburgh Infectious Diseases
- 19 Fellowships in Uganda (2 cohorts), Malawi, Kenya
- Bespoke training and Collaborative research project

#### Renewal for phase II (2023 - 2025) Till Bachmann, Adrian Muwonge, Stella Mazeri

- ~ 45 Fellowships (Uganda, Malawi, Kenya)
- Potential for mentorship networks
- Potential for linkages with other host institutions



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## UKRI Transdisciplinary funding to tackle antimicrobial resistance

- Phase one (£3 million): transdisciplinary networks to connect and expand the UK AMR communities with researchers from a broad range of disciplines with the knowledge and skills to transform our understanding of AMR and deliver innovative and effective solutions by developing and applying a diverse range of methods.
- Phase two (£7 million): transdisciplinary research grants to facilitate evidence-based decision making through timely, high impact, and independent research on AMR that meets the needs of policymakers, practitioners, industry, civil and broader society.
- AHRC, BBSRC, ESRC, EPSRC, MRC, NERC



## Phase one (£3 million) – Scope

Timeline



- Transdisciplinary networks to connect and expand the UK AMR communities with researchers from a broad range of disciplines (across all UKRI council remits).
- The networks will have the knowledge and skills to
  - transform our understanding of AMR and
  - deliver innovative and effective solutions by
  - applying and developing a diverse range of methods.
- We expect networks to work effectively across all disciplines.
- Networks must be **open** to new members throughout the lifetime of the networks (100s of members)
  - Academics, business, policymakers, public, private, third sectors, end users of research, such as farmers and clinicians, representatives of civil society and people with lived experience



#### **One Health AMR Transe**

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sciplinary imicrobial erspective call. Since d through ), one of infectious EAMRFs spects of MRF has

ng a wide multidisciplinary area of Ith, Global Health, diagnostics, host illance, genomics, epidemiology, veterinary medicine, mathematical law). Edinburgh has long standing I. through DOSA, SHIELD, the MRF d as Fleming Fund Host Institution, sed network. It is increasingly clear not be solved through one country, e sector. Integrated One Health the intersectorial and interdisciplinary

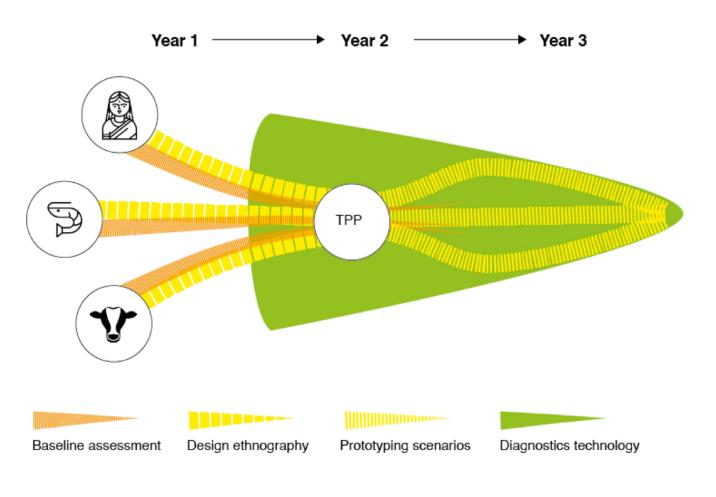
thinking.

## DOSA Diagnostics for One Health and User Driven Solutions for AMR

2018 - 22, £3m+, UK-India, University of Edinburgh, IIT Delhi + 8 Partners

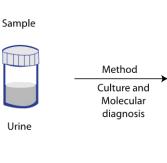


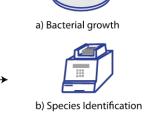
- User mapping studies in Human, Dairy and Aquaculture environment settings
- AMR baseline assessment in Human, Dairy and Aquaculture environment settings
- Develop rapid/POC diagnostic assays/ prototypes for UTI, Mastitis, AMR pathogens and antibiotic residues
- Refinement, performance benchmarking, validation and impact assessment of prototype(s) in **community settings**
- TPP Target Product Profile



## **AMR Baseline Analysis for UTI in Community Care in Assam**

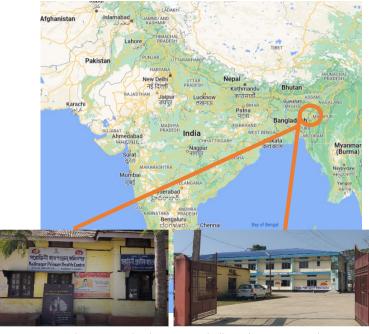












Patient's no Sample ID 1-12013



#### Antibiotic Susceptibilities

PHCs & Isolates ID	ST-types	ESBL, AmpC & Carbapenemase genes	Phylotype	Susceptibility pattern											Replicon type				
				TGC	CST	SXT	IPM	ERT	MEM	NIT	CRO	CIP	AMC	TZP	FEP	AMK	GEN	NAL	
B (Ec-182)	ST3268	CTX-M-15 + CMY-42	B1												-			-	Inc P
B (Ec-146)	ST304	CTX-M-15	A																Inc P
B (Ec-10)	ST3268	SHV-148	B1		-													-	Inc F
A (Ec-144)	ST3430	PER-1	A																Inc P
B (Ec-189)	ST4671	CTX-M-15	A															_	Inc F
A (Ec-155)	ST361	PER-1	B1																Inc F
B (Ec-89)	ST4671	CTX-M-15	B1																Inc P
A (Ec-252)	Unknown	CTX-M-15 + DHA-1	B1				<u> </u>												Inc P
B (Ec-3)	ST219	SHV-148 + CMY-42	A																Inc P
A (Ec-200)	Unknown	NDM-1	B1		-														Inc FrepB
A (Ec-237)	ST3430	CTX-M-15 + DHA-1	81		-														Inc P
A (Ec-154)	ST304	TEM	A		-	-	<u> </u>												Inc F
B (Ec-125)	ST3268	TEM + SHV-148	B1												-				Inc P
B (Ec-5)	Unknown	SHV-148	B1		-														Inc P
B (Ec-12)	ST3492	NDM-1 + CMY-42	A		-														IncFrepB
B (Ec-272)	ST10	CMY-42	81		<u> </u>										-				
A (Ec-284)	ST361		A		-	-	<u> </u>												
A (Ec-167)	ST167		B1		-														
B (Ec-56)	ST304		B2		-	<u> </u>	<u> </u>												
A (Ec-76)	ST167		B1																
A (Ec-106)	ST361		A																
B (Ec-132)	Unknown		A																
B (Ec-139)	ST4671		A																
B (Ec-36)	ST167		B1																
A (Ec-218)	Unknown		B1																
A (Ec-244)	ST10		A																
A (Ec-268)	ST167	-	B1												-				

#### Pathogens & AMR Genes from Urine samples

E. coli, S. aureus, K. pneumoniae, K. oxytoca, S. saprophyticus

CTX-M, SHV-148, PER-1, TEM, CTX-M-15 +SHV-148, TEM +SHV-148, OXA-10, OXA-2, NDM-1, NDM-1+OXA-23, mecA

#### **Environmental Sampling**



Paul D, Anto N, Bhardwaj M, Prendiville A, Elangovan R, Bachmann TT, Chanda DD, Bhattacharjee A. Antimicrobial resistance in patients with suspected urinary tract infections in primary care in Assam, India. JAC Antimicrob Resist. 2021 Dec 14;3(4):dlab164 dosa-diagnostics.org

DOSA is funded by UK Research and Innovation / Economic Social Science Research Council, Newton Fund, and the Government of India's Department of Biotechnology



## Human Setting Field work in Assam

Date	Participant	Number	Data collection method				
May 2019	ASHAs	57	Focus group				
May 2019	Community members	92 (female) 2 (male)	Focus group				
March, May, August 2019	Doctors	8	Semi-structured interviews				
August 2019	PHC patients	96	Drug bag				
February 2020	ASHAS/ Nurses	46	Co-design				
April – May 2021	ASHAs	18	Walk through / co-design				



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#### **Key observations:**

- There is limited awareness on AMR
- Over the counter prescription was common
- Knowledge of antibiotics is limited
- Low awareness of Urinary Tract Infections (UTI)
- Not comfortable to seek medical care until must
- PHC are burdened with large number of patients
- Average number of patients per day >150
- No sufficient diagnostics facility at PHC

Paul D, Anto N, Bhardwaj M, Prendiville A, Elangovan R, Bachmann TT, Chanda DD, Bhattacharjee A. Antimicrobial resistance in patients with suspected urinary tract infections in primary care in Assam, India. JAC Antimicrob Resist. 2021 Dec 14;3(4):dlab164
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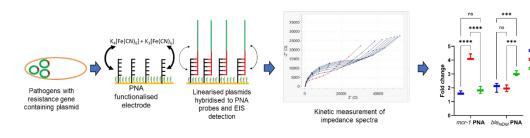
#### AMR gene Point of Care Test

- Direct electrochemical detection of AMR genes • from bacteria from urine. Current focus on carbapenem resistance
- No PCR needed ٠

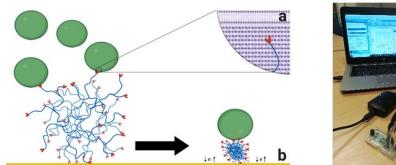
DOSA

Suitable for use at PHC level



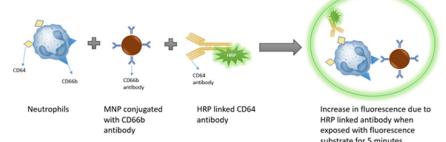


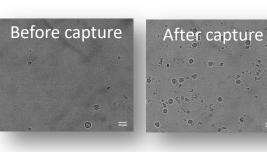
#### Whole Bacteria Detection at Point of Care

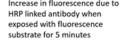




#### POC- nCD64 assay







- **CD64** expression in Neutrophils are strongly correlated with onset of infection
- Could be used identify bacterial infection at PHC level
- Simple proof of concept is done with Milk Neutrophils

#### **Automation & Integration**





dosa-diagnostics.org

## DOSA User Requirements + Co-design + Target Product Profile



Co-Design with ASHAs at Primary Healthcare Centres in Assam



Real Life Walk Throughs in Assam

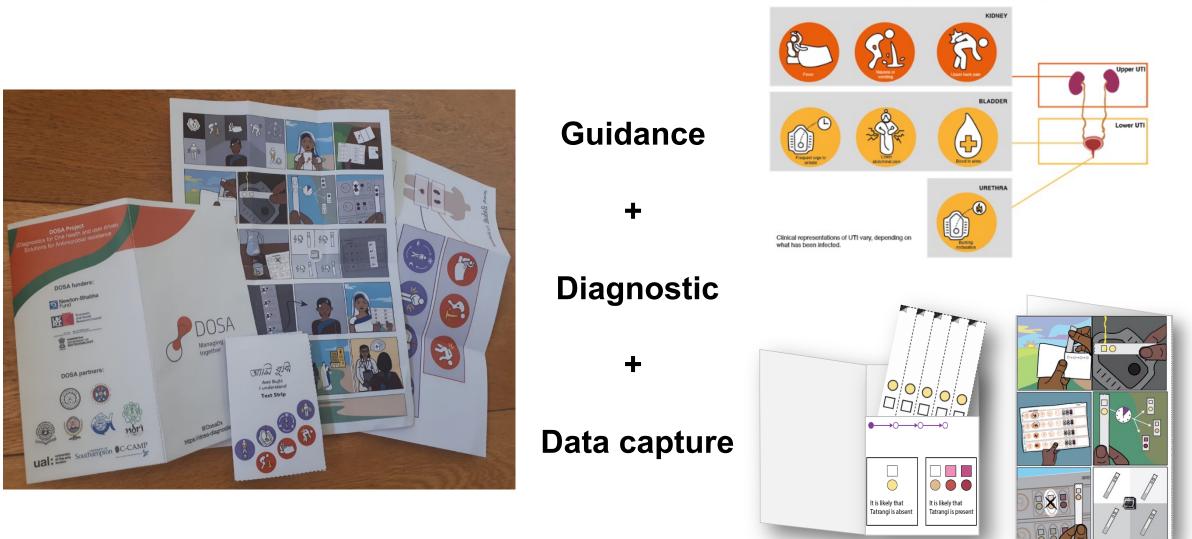


Workshops in Edinburgh

- Testing in community
- Provide meaningful information
- Easy to understand, operate, and dispose
- Low cost
- Environmental stability



## **DOSA UTI Diagnostic Solution**



#### Urinary Tract Infection Symptoms

DOSA is funded by UK Research and Innovation / Economic Social Science Research Council, Newton Fund, and the Government of India's Department of Biotechnology

Why can't we just use commercial urine dip sticks??

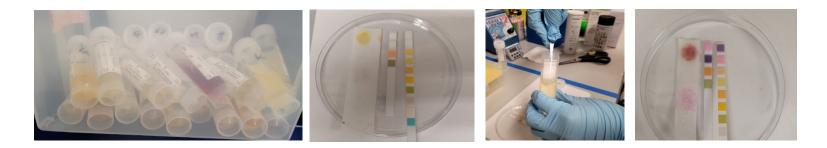


Too many parameters to be easily understood by non trained person Storage requirements too demanding Too expensive Not biodegradable

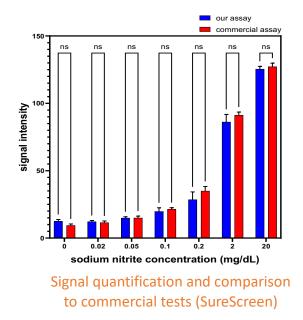


## **DOSA UTI Test Strip Validation**

- 100 Urine patient samples at Edinburgh Medical School tested with
  - 1. DOSA UTI paper strips
  - 2. Roche Combur Test UX strips
  - 3. SureScreen Urinanalysis reagent test strips
  - 4. Microbiological ID data (culture positive/negative; CFU/mL)



- 100 Urine patient samples tested at Silchar Medical College with
  - 1. DOSA UTI paper strips
  - 2. Roche Combur Test UX strips
  - 3. SureScreen Urinanalysis reagent test strips
  - 4. Siemens Multistix 10 SG Urine Test Strips
  - 5. Microbiological ID data (culture positive/negative; CFU/mL)





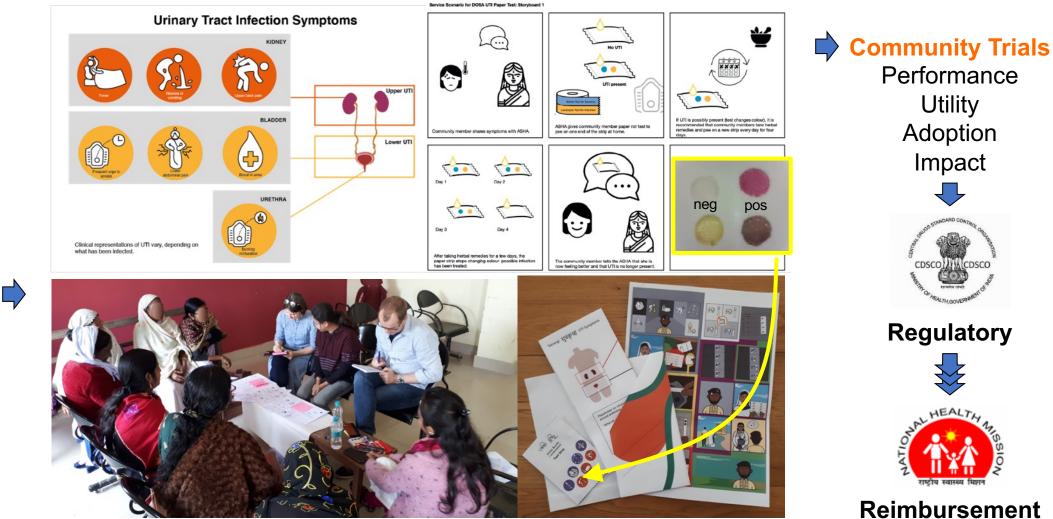
DOSA is funded by UK Research and Innovation / Economic Social Science Research Council, Newton Fund, and the Government of India's Department of Biotechnology

dosa-diagnostics.org

## **POSA** From Healthcare Need to Implementation of Diagnostics

Patients with Urinary Tract Infections in the community do rarely seek medical care.

Home Testing & Patient Education + Empowerment

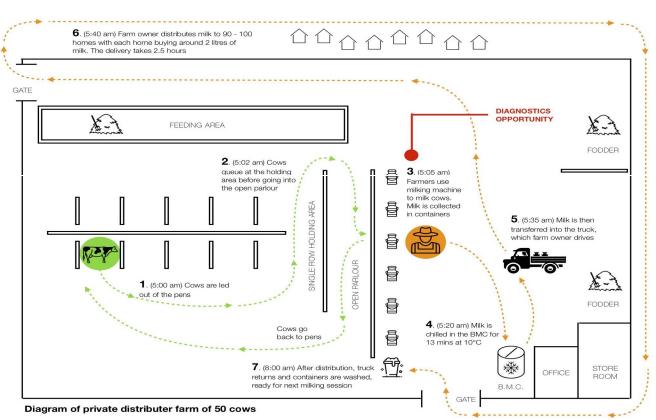


## **P**DOSA Dairy Setting - System Mapping and Assessment of User Requirements

#### India is the largest producer of milk in the world with highest number of animals. (127 million tons 2018)

Antibiotics use is more prevalent in organised sector than individual cattle owners

- Farmers are keen to adopt new technology
- Animal healthcare is mostly done on farm, unless condition is extreme
- Drive to quickly cure animal due to economical pressure



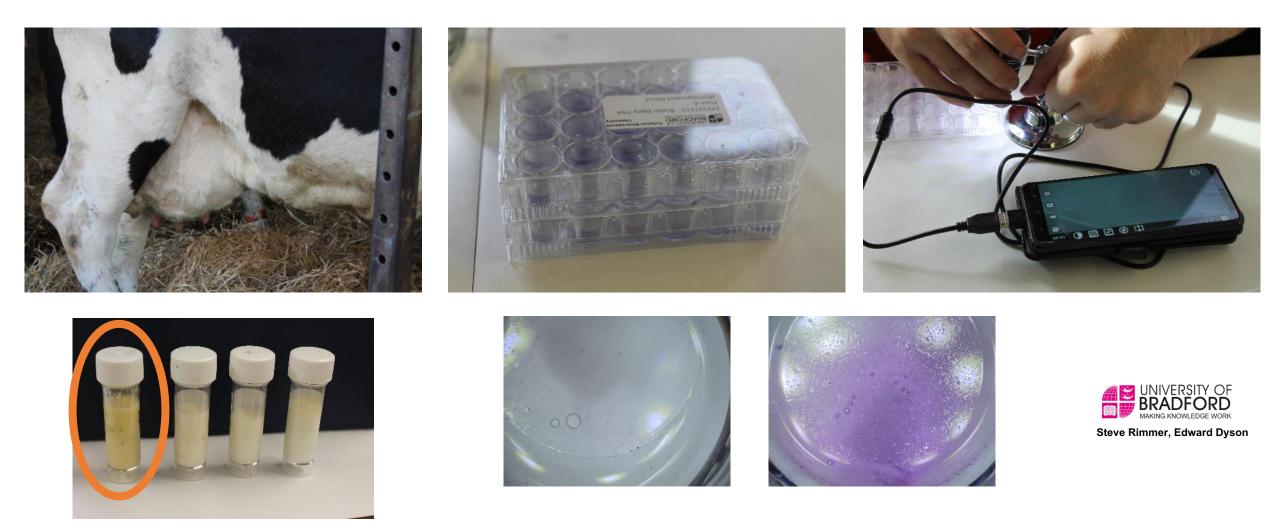


Goel P, Vishweswaraiah RH, Kumar N. Spore-based innovative paper-strip biosensor for the rapid detection of β-lactam group in milk. Sci Rep. 2022 Dec 19;12(1):21965

#### dosa-diagnostics.org

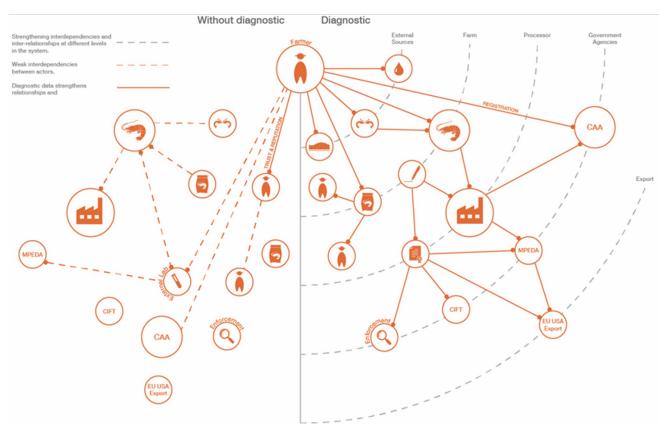


## On-site Trial for Mastitis Detection (Langhill Farm, University of Edinburgh)



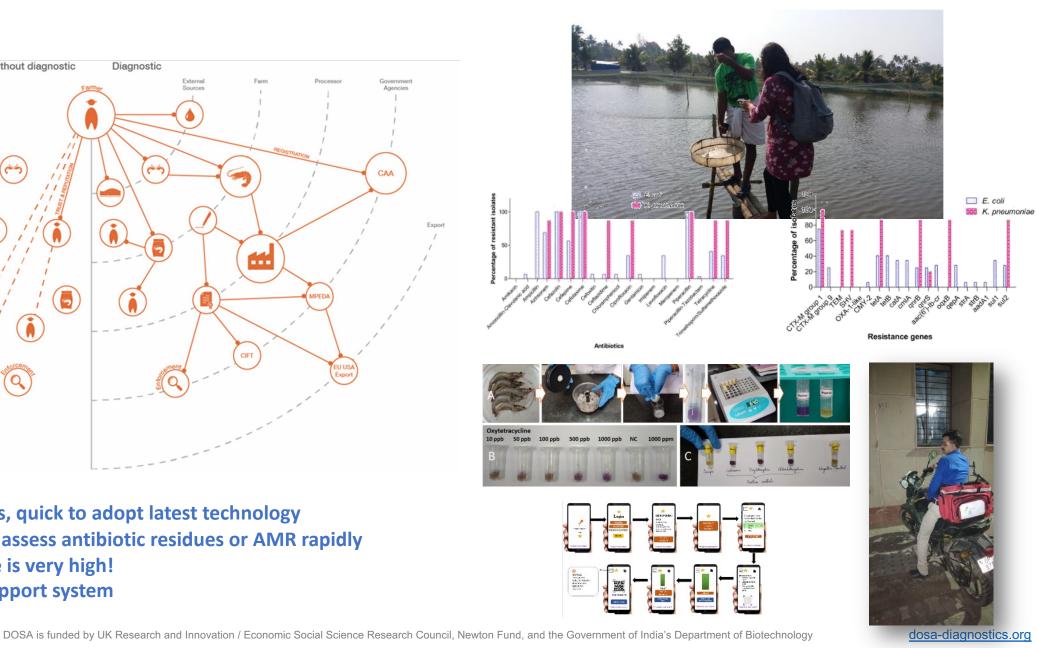
Many thanks to Prof Alastair Macrae, University of Edinburgh for providing access and benchmark testing

## Aquaculture - Systems Approach to Diagnostic Interventions



**Key observations:** 

- Very smart farmers, quick to adopt latest technology
- There is no tool to assess antibiotic residues or AMR rapidly
- **Economic pressure is very high!**
- Need structural support system





## **Thanks** for your attention and to all the DOSA and JPIAMR partners and **Teams**.





Edinburgh Infectious Diseases

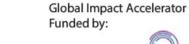


















DEPARTMENT OF BIOTECHNOLOGY Newton-Bhabha

Economic

and Social

**Research Council** 



# Economic assessment of alternative anti-microbial use options at a farm level

## Shailesh Shrestha

Department for Rural Economy, Environment and Society, SRUC, Edinburgh

Leading the way in Agriculture and Rural Research, Education and Consulting

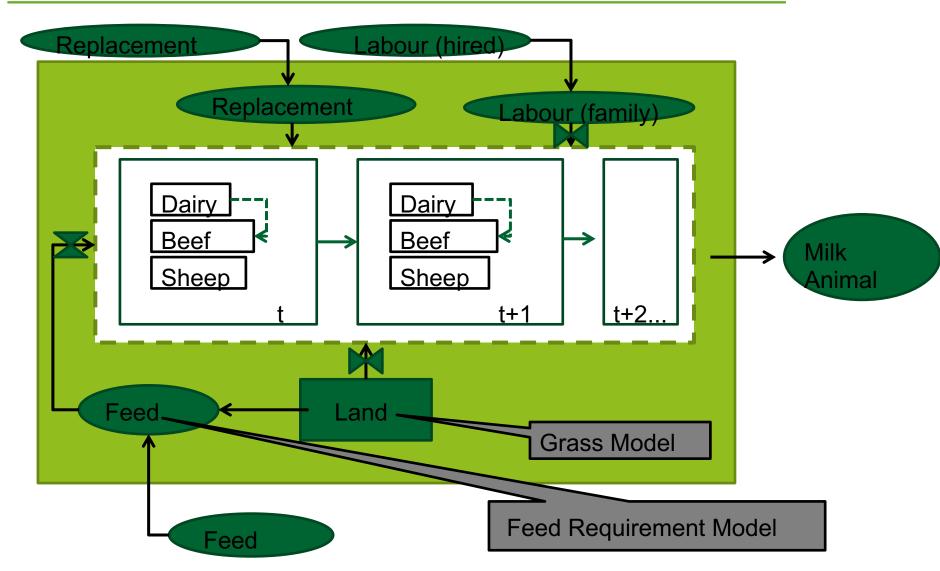
## Farm economy



- Farm level models
- Production based
- Farming system analysis
  - Physical interactions between activities
  - Translated to economic flows
- Optimising production economic models,
  - Maximises farm net profit/production
  - Constraint over farm resources and management practices

## ScotFarm





# Optimising farm resource and practices



- Changes farm plans, innovation, technology etc
- Scenarios
- Counterfactual impact assessment
  - Baseline vs Alternatives
- Feasibility of alternative options
- Identifying the best option

Alternative anti-microbial use



- Considered as management options
- Changes in farm plans, production and economy
- Requirements
  - implementation costs
  - additional changes costs
  - production change
  - effectiveness

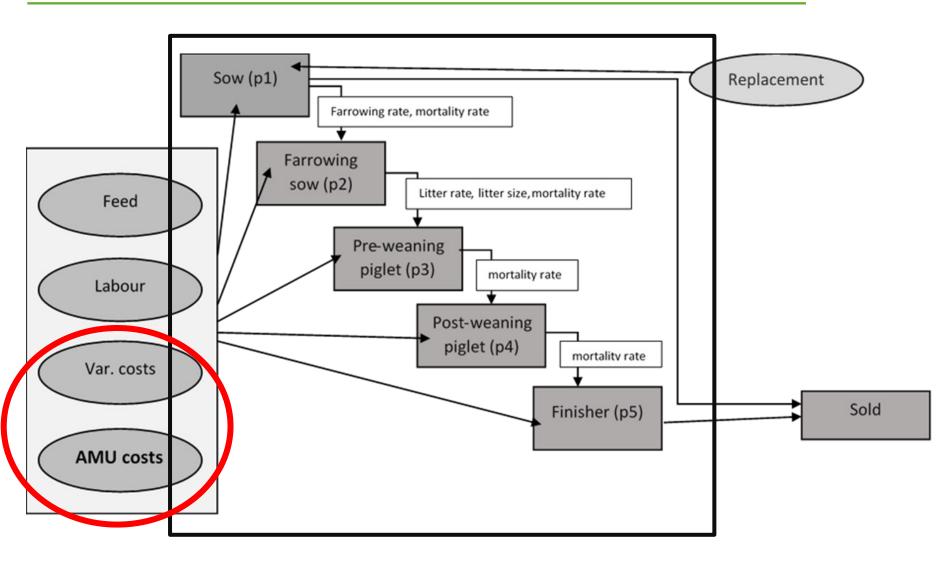
# Example – AMR on UK pig farms



- VMD funded project 2019 2022
  - Data collection and analysis,
  - alternative management options to reduce AMUs
  - Identifying optimal AMUs,
- Economic assessment of alternative options
  - Pig Production Economic Model (PPEM)

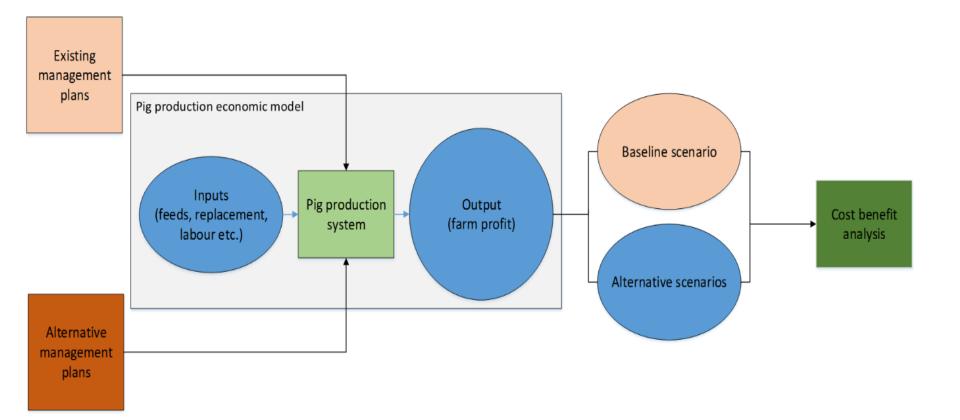
# PPEM





# Work flow





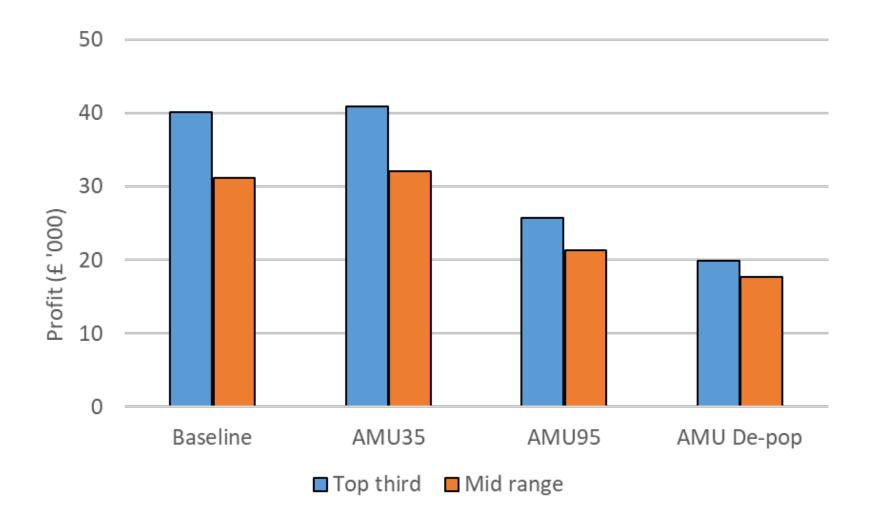




- Baseline: existing management conditions on an average pig farm, a comparison point
- Alternative management scenarios
  - AMU35: 35% AMU; 10% production and 10% farm variable costs
  - AMU95: 95% AMU; 10% production and 100% farm variable costs
  - AMU De-pop: 'all in and all out'; 95% AMU; 10% production and 50% farm variable costs

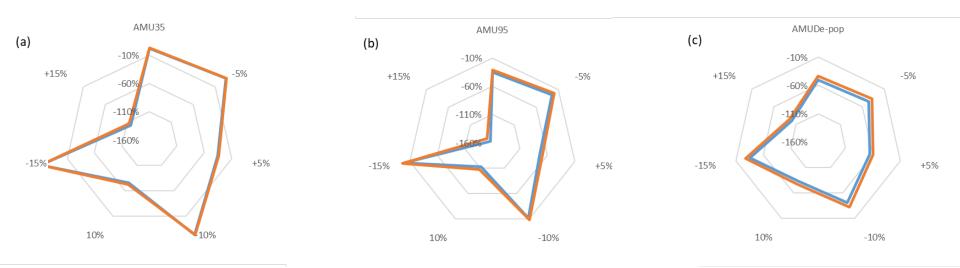
## Results





# Sensitivity analysis





Sensitivity analysis of changing feed price  $(\pm 5\%, \pm 10 \text{ and } \pm 15\%)$  on farm profit under; (a) AMU35, (b) AMU95 and (c) AMU De-pop scenarios [ — Top third farm, — Mid-range farm]

# Summary



- Production and economy at farm level
- Implementing alternative options
- Comparing feasibility
- Identifying the most feasible and effective option





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# Impact of the ZnO ban on post-weaning diarrhoea and AMR on commercial pig farms in the UK

Deborah Hoyle

Roslin Institute & R(D)SVS, University of Edinburgh



Management of post-weaning diarrhoea and the implications for AMR in response to the upcoming ban on zinc oxide supplementation in pigs

### **Predict, Prevent and Treat Endemic Livestock Disease**











UNIVERSITY





- Consortium project with industry partnership
- Workshop series endemic livestock disease
- ZnO issue raised by feed company & producers
- Priming 12 month project, seeking onward funding

**Deborah Hoyle** Mark Stevens Ilias Kyriazakis Muna Anjum Sam Beechener Abel Ekiri Roberto la Ragione Nick Wheelhouse **Sophie Prentice** 

**Roslin** Institute **Roslin Institute** Queen's University, Belfast APHA SRUC University of Surrey University of Surrey Edinburgh Napier University Innovation Lab by abagri



### Post Weaning Diarrhoea (PWD)

### **Primary Pathogen**

- Enterotoxigenic Escherichia coli (ETEC)
- Toxins heat labile (LT); heat stable (STa, STb), enteroaggregative EAST1
- $\circ$  Non-invasive, secretory diarrhoea
- Predominantly F4/F18 strains

### **Secondary Factors**

- Co-infection e.g. rotavirus, coccidian, clostridia
  Dietary
- $_{\odot}$  Weaning age, mixing stress & stocking density

PWD peaks at 7-14 days post-weaning

- Immediate: weight loss, morbidity, mortality
- Later : growth & disease resilience



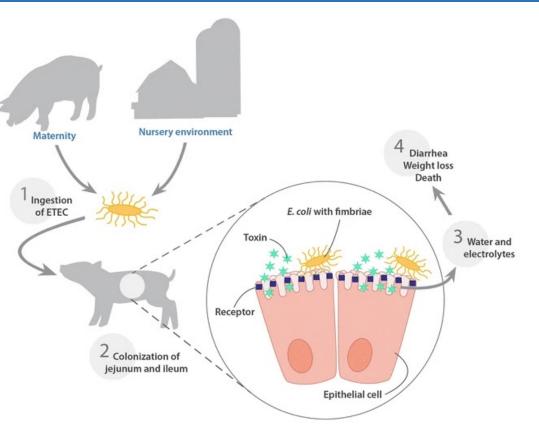


Image from: Rhouma M, Fairbrother JM, Beaudry F, Letellier A. Post weaning diarrhea in pigs: risk factors and non-colistin-based control strategies. Acta Vet Scand. 2017 doi: 10.1186/s13028-017-0299-7

### PWD impacts Production & Welfare

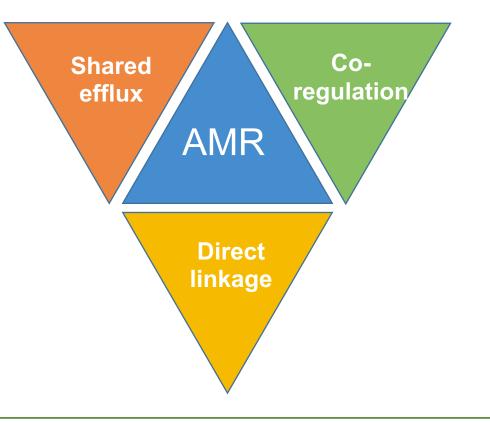
### Zinc oxide: actions & AMR

### Why is ZnO used for PWD?

- Alternative to growth promoters post 2006 ban
- Pharmacological at **2500ppm**, up to 14 days:
  - Reduces PWD incidence
  - Increases weight gain
  - Increases later resilience
- Cheap cost-effective, easy to deliver

### **Mechanisms of action?**

- Antibacterial action within gut
- Alters intestinal structure
- Modulates immune response



### **Evidence for AMR – in vivo feed trials**

- High ZnO diet increases nasal isolation of MRSA (Slifierz *et al* 2015; Amachawadi *et al* 2015)
- Increase in faecal isolation multiply resistant
   *E. coli* (Bednorz *et al* 2013; Ciesinski *et al* 2018; Johanns *et al* 2019)

## EU Regulatory Withdrawal of ZnO – June 2022



**16 March 2017**, EMA stated that "benefits of (therapeutic) zinc oxide for the prevention of diarrhoea in pigs do not outweigh the risks to the environment"

- 1. Impact on antimicrobial resistance
- 2. Environmental pollution
  - Zn in slurry heavy metal toxicity to sediment organisms and aquatic species

EU ban June 30<sup>th</sup> 2022 – maximum permitted **150 ppm** 

UK Veterinary Medicines Directorate – supplement import prohibited 06/2022, ban June 2024

### Implications for pig industry

- Increased weaning morbidity & mortality
- Initial increase in therapeutic AMU
- Economic & practical challenges
- Need for alternative prophylactics -
  - $\circ$  Feed enhancers
  - o Bacteriophage
  - Husbandry
  - $\circ$  Vaccines









### **Project Objectives**

# 1. Biological measures of pathogens & AMR in the field

Q: Does removal of ZnO in commercial herds reduce AMR genes and increase pathogen prevalence in piglets?

- Longitudinal survey on 25 commercial UK herds pre- and post-ZnO withdrawal
- Biobank samples as baseline for future research
- Molecular analyses for key pathogens, AMR & microbiome



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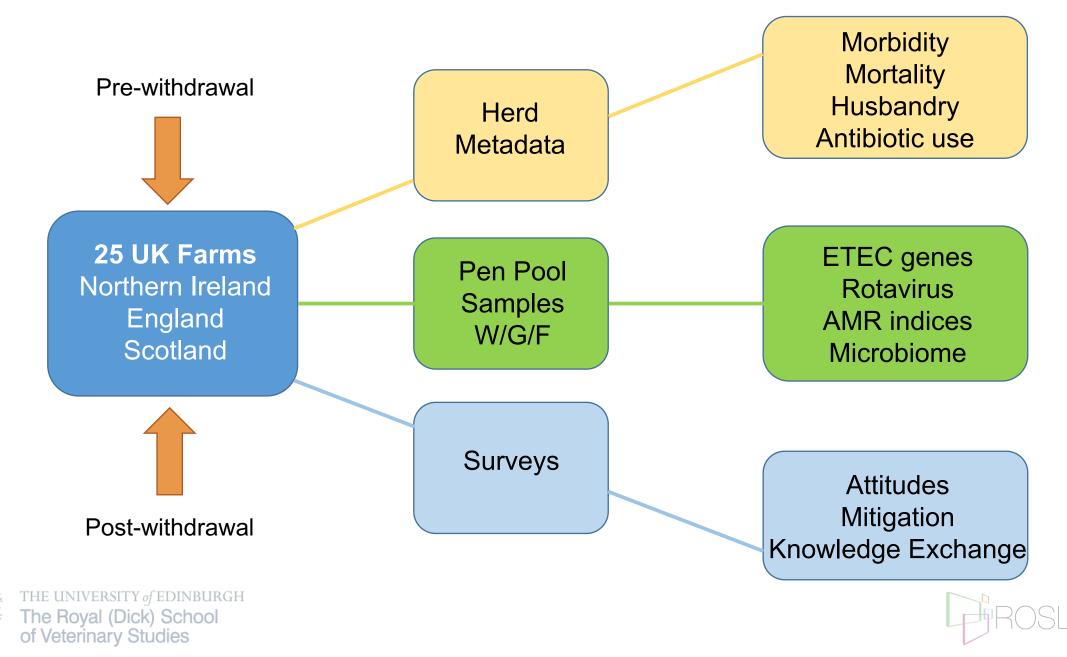
### 2. Evidence base for intervention

Q: Can we identify on farm barriers and challenges to management of PWD disease & control?

- Longitudinal metadata analysis on study farms
- Develop and pilot on-farm epidemiological survey for industry rollout
- Social attitudes survey & knowledge exchange "best-practice"



### **Study Design: repeated cross-sectional**

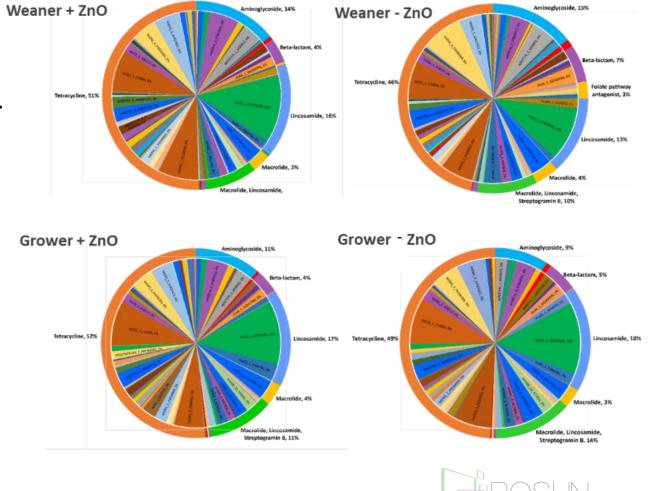


### Project Progress

- Sampled 25 herds pre-withdrawal;
   3 herds early post-withdrawal
- Collected > 900 pen pool samples from Weaner, Grower, Finishers
- Two herds: trial +/- ZnO groups (indoor reared & outdoor reared)
- Social survey started Feb 2023 (mitigation & attitudes)
- Wider industry epidemiological survey undergoing pilot review
- Knowledge exchange via producer groups underway



### **Oxford Nanopore sequencing – AMR genes in trial pigs**



Obtain funding to continue commercial herd follow-up in 12 months post-withdrawal

- Determine the consequence of ZnO removal in-field on disease, key pathogens and antimicrobial usage
- Identify microbiome communities & metabolites that may be exploited to enhance post-weaning resilience
- Compare carriage and diversity of AMR genes, mobile elements and association with metal resistance genes, before & after the ban
- Translational knowledge exchange with producers, clinicians & other stakeholders





### Thank you to the project team & contributors

### Special thanks to all participating farmers for their time and enabling sample collection.

Roslin Nicky Craig

**Andrew Bease** 

Bryan Wee

**Trevor Paterson** 

Mark Stevens

Queen's University Ilias Kyriazakis Christina Mulvenna



THE UNIVERSITY of EDINBURGH The Royal (Dick) School of Veterinary Studies APHA Muna Anjum Sam Connelley Manal Abu Oun

SRUC Sam Beechener

University of Surrey Abel Ekiri Roberto La Ragione Edinburgh Napier University Nick Wheelhouse

Industry Sophie Prentice, AbAgri Ltd Garth Pig Practice RAFT Solutions Ltd AFBI/CAFRE

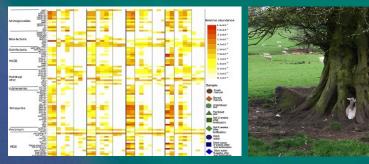
Funding, thanks to BBSRC.



Livestock: Understanding the Antimicrobial Resistance and Use of Novel Antimicrobial Alternatives



#### www.moredun.org.uk





Edinburgh 22<sup>nd</sup> May

Nuno Silva

- Soil
- Water streams
- Livestock
- Wildlife
- Human (Farmers)

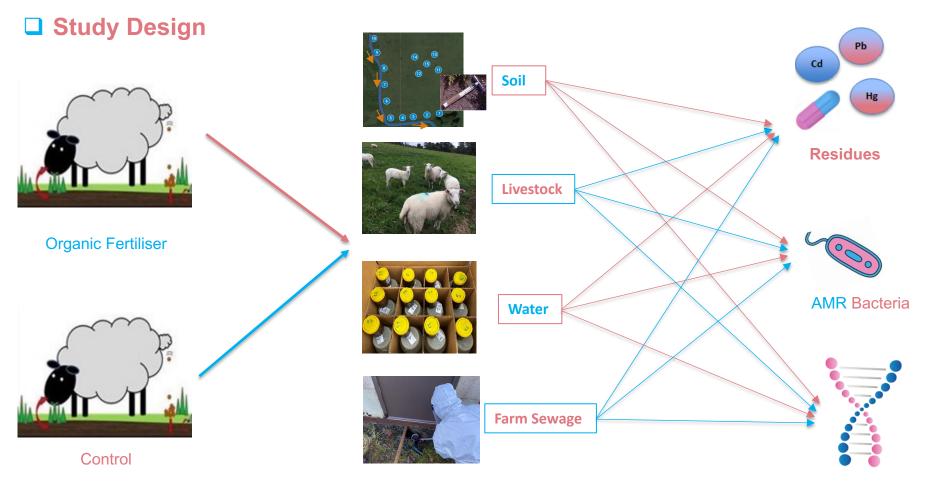
□ Novel alternatives with **eubiotic**/ **antimicrobial** capacities in farmed animals

- Natural products
- Genetically engineered platform(s)

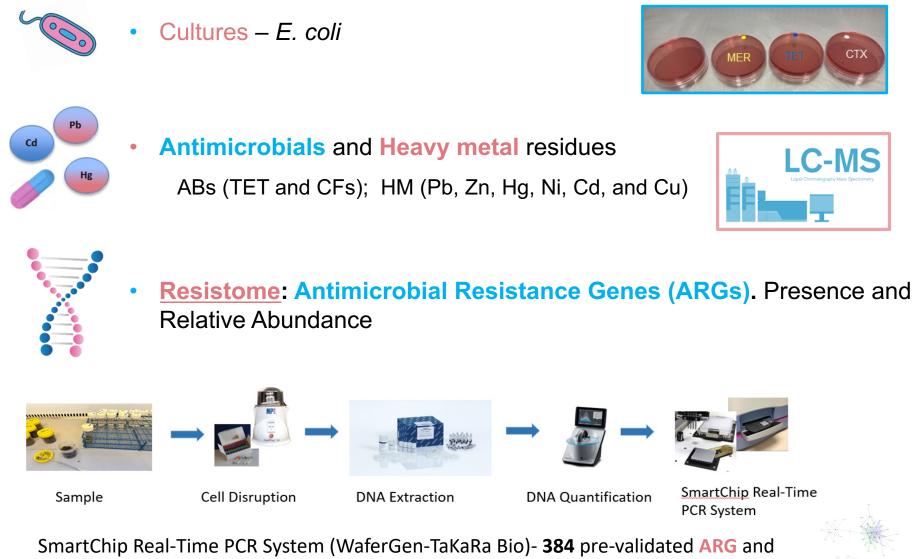
- Understanding the dynamics of antimicrobial resistance genes (ARGs) flux in the soil, water, animals and humans in different fertilisation practices for grasslands (RESAS. 2022-2027)
  - Hypothesis: Pasture soils treated with organic fertilisers are at higher risk of exposure to antimicrobial drug residue and AMR genes (ARGs), and this may result in a higher prevalence and diversity of ARGs and resistant bacteria in soil and in the gut flora of animals that graze on it.
  - The putative selection and spread of AMR bacteria and ARGs into soils may limit the use of organic fertilizers in grasslands.
     Bio-Waste Circular Economy???
  - Fertilisation practices comparison:
    - Manure
    - Slurry
    - Sludge pellets (WWTP)
    - Control (no fertiliser / inorganic)

AMR-Low Risk?





**ARGs** 



Mobile Genetic Elements (MGEs) assays

#### • AMR risk modelling

- Risk assessment approach based on the standard *source-pathway-receptor* principle to model the transmission of AMR genes (ARGs) and/or *E. coli* from source via the environment and the food chain (pathways) to the receptor

- Model aims to help assess the impact of different farm management approaches (e.g., organic vs. inorganic) on AMR transmission



#### □ Pilot study (2019)- Sludge Pellets

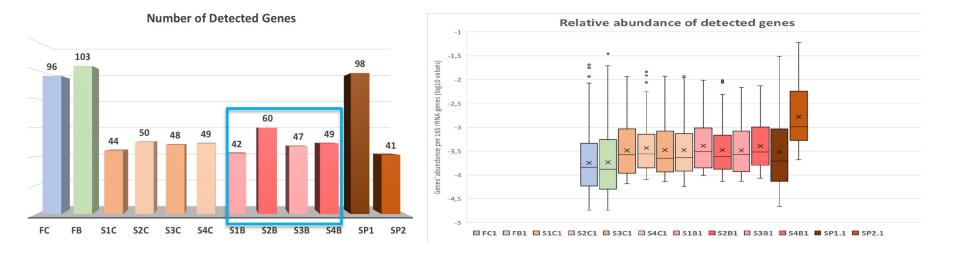
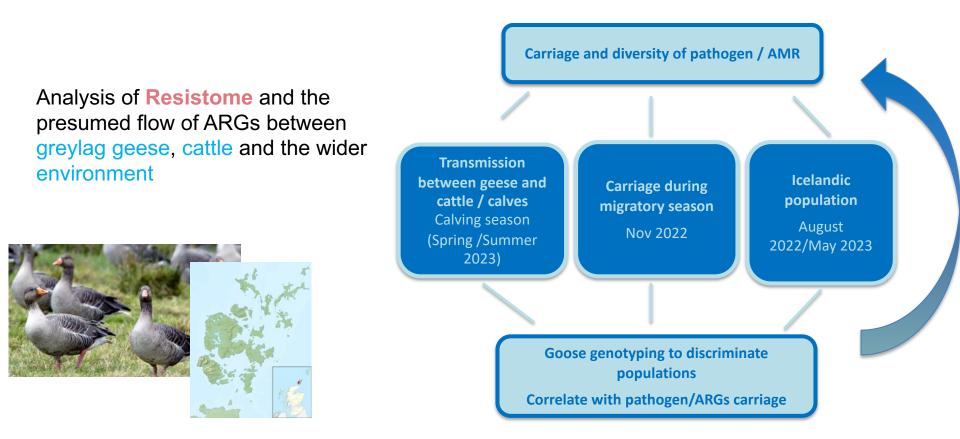


Fig.1- Distribution of positive ARG and MGE assays across different samples and Relative abundance. FC- Faecal Control; FB- Faecal sludge pellets; S1C-S4C- Soil Control; S1B- Soil sludge pellets (pre-application- Spring); S2B- Soil sludge pellets (post-application-Spring); S3B- Soil sludge pellets (pre-application-Autumn); S4B- Soil sludge pellets (post application-Autumn); SP1-SP2- Sludge pellets (Spring-Autumn).

- A total of 125 ARGs and MGEs qPCR were positive in one or more samples.
- No significant difference between sludge pellets-treated pasture and non-treated pasture samples.

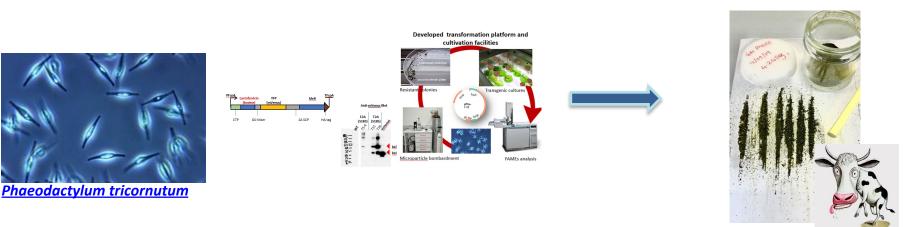
- Microbial and AMR risks associated with expanded greylag geese in livestock and environment on the Orkney Isles (RESAS. 2022-2027).
- Risks associated with spread of Foodborne Pathogens and AMR in livestock and environment.



#### Pilot study (2021)- Orkney Islands

- Evaluate the role of migratory birds (wild geese) as reservoirs and vectors of dissemination of antimicrobial resistance bacteria and resistant genes (ARGs) within livestock in the Orkney Islands.
- 2 Farms participate in the study.
- Resistance to tetracycline (78-100%) and 3<sup>rd</sup> cephalosporin (30-42%) was detected in both geese and cattle.
- ESBL-producing *E. coli* was detected on Farm 1 but only in cattle samples.
- blaCTX gene was identify in all the ESBL-producing *E. coli* (12%).
- The use of 3rd to 4th generation cephalosporins in Orkney farming is very limited or even non-existent.

- Multifunctionalized Microalgae (MM) A novel and flexible platform technology for maximising feed/energy conversion ratios and treating severe infections in livestock (I-UK; UK China collaboration to tackle antimicrobial resistance. 2019-2022).
- The project aims to investigate the capability of antimicrobial and anti-inflammatory compounds to maximise feed/energy conversion and treat severe infections in livestock. The compounds were produced using a unique, low-cost, Microalgae expression system.



- **Consortium Partners UK**





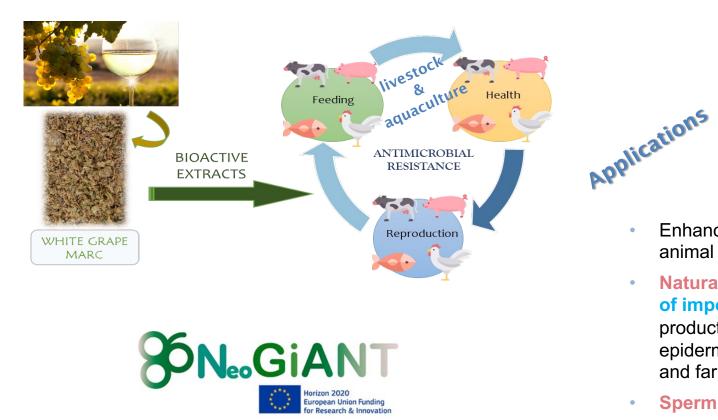
#### Consortium Partners - China

- Institute of Animal Science, of Chinese Academy
   of Agricultural Sciences
- AustAsia (AA)



### Novel alternatives with eubiotic/ antimicrobial capacities in farmed animals

- □ The power of grape extracts: antimicrobial and antioxidant properties to prevent the use of antibiotics in farmed animals (NeoGiANT) (EU H2020. 2021-2026)
- NeoGiANT will develop novel natural antimicrobial products for the control and prevention of the most relevant diseases in animal production based on natural extracts derived from agri-food byproducts as raw materials.



- Enhanced feed & feed additive for animal feeding
- Natural products for the treatment of important diseases in animal production (mastitis, exudative epidermitis, poultry enteric diseases, and farm fish diseases)
- Sperm preservation

Calf-feeding trial – Polyphenols (PF) content



**Control group** 



Low dose group 1000 ppm (PF) /kg feed



High dose group 2776 ppm (PF)/kg feed

- Four weeks length trial
- Growth performance
- Microbiome analysis
- E. coli O157 challenge study

 Antimicrobial performance of optimized intramammary syringe formulations on "In vivo" models of mastitis in cattle



- Syringe prototype PF formulation (Carbopol 974® dispersion)
- Streptococcus uberis and Staphylococcus aureus infection models



### Thanks...







中华人民共和国科学技术部

of Health