

Camel Diseases Control in the MENA region

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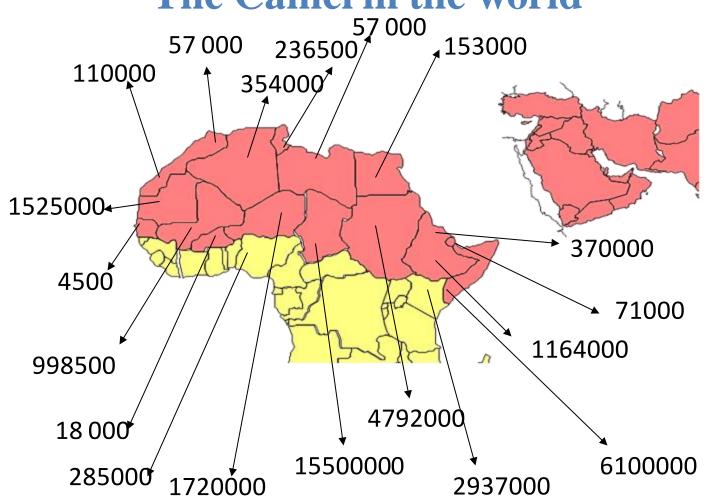


Outlines

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- 2. Socio-economic importance
- 3. Camel disease pattern particularities
- 4. Emergent diseases
- 5. Impact of present trends of camel farming on to the health status
- 6. Camel diseases control systems
- 7. Conclusion

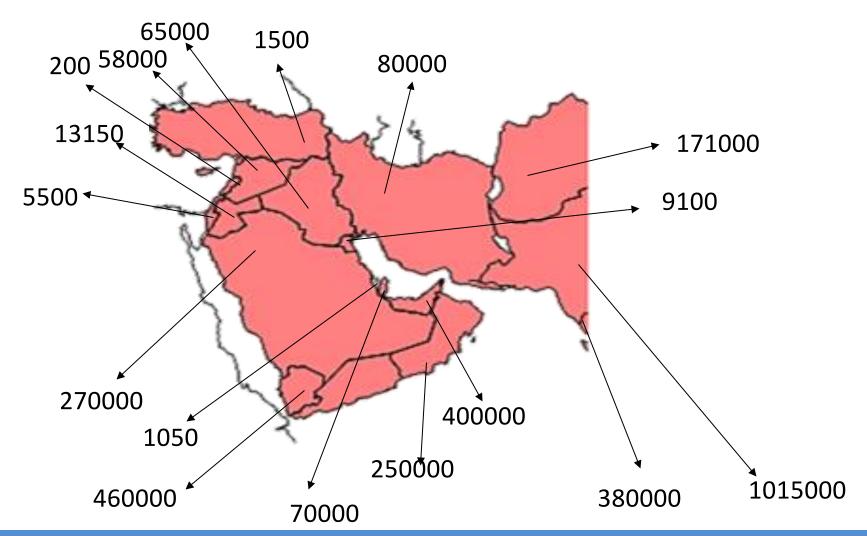


The Camel in the world





The Camel in the world









In Central Asia:

The Camel in the world

Dromedary

Azerbaijan 258

Turkmenistan 120000

Bactrian Camel

China 376000

Kazakhstan 160000

Kyrgyzstan 264

Mongolia 350000

Russia 6625

Tajikistan 45

Uzbekistan 18400

Ukraine 800







The Camel in the world

- 1. Countries where camel livestock is marginal (<1% of the DHB)
 - margin countries (Nigeria, Senegal, Burkina-Faso, Turkey)
 - countries with mainly small ruminants (Syria, Lebanon, Iran)
 - countries partially desert (India)

- 2. Countries where the contribution of camel livestock is locally important (1-8% of the DHB)
 - countries with industrialization (Maghreb, Machrek)
 - countries partially desert (Ethiopia, Mali, Kenya, Iraq, Pakistan)
 - countries with highlands (Afghanistan, Oman)

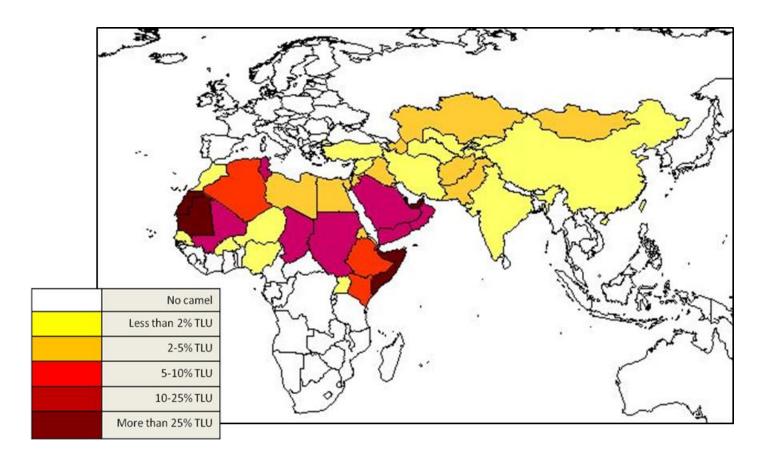


The camel in the world

- 3. Countries where camel livestock is important (8-20% of DHB)
 - -Tunisia (exception in North Africa)
 - Sahelian countries (Niger, Chad, Sudan)
 - Saudi Arabia
- 4. Countries where camel livestock is the main agricultural wealth (>20% of DHB)
- Desert countries (Mauritania, Southern Morocco, Djibouti, Qatar, Arab Emirates)
 - Country of pastoralist only (Somalia)

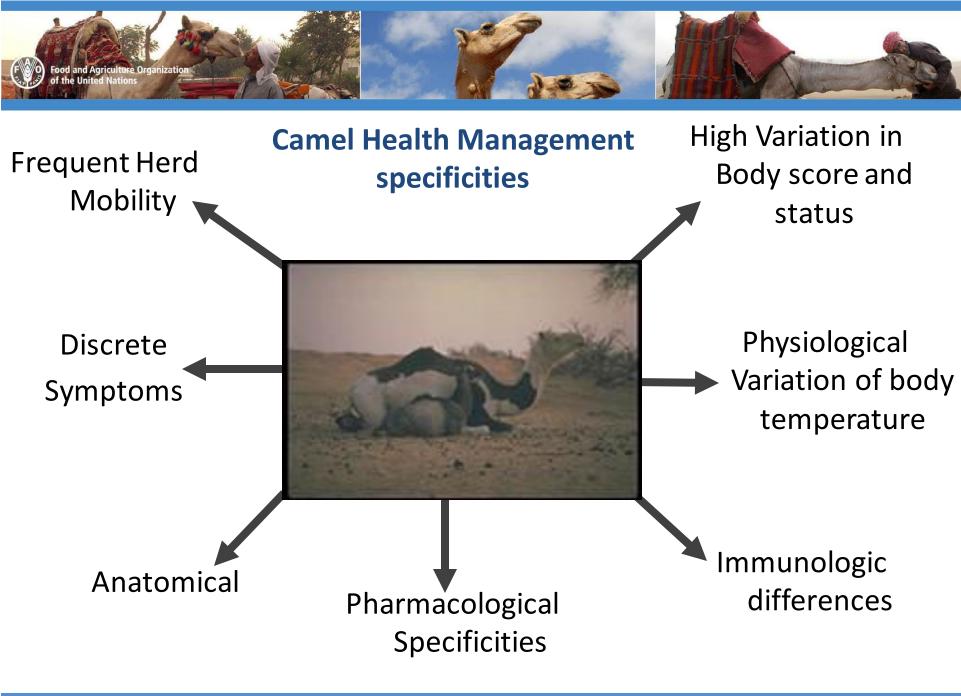


Relative importance of camel in % of total TLU





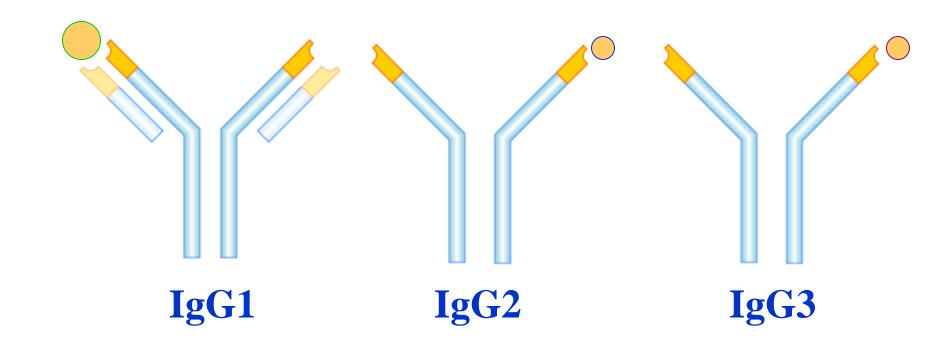






Particularity of immunoglobulins

• 3 subclass of IgG: IgG1, IgG2, IgG3











Traditional knowledge

« **Amanos** », fibrous tong Provoking pain feeding, t starvation and death

"Taras", posterior and unilateral paresis with low muscular loss of the limb





«*Izni* » : camel with cachexia – gastro-intestinal parasites or trypanosoma??



The specificity of health constraints in camel



 Scarcity of cattle in seases outbreaks (RP, CBPP, FMD, BT)
 Widely of a sed diseases (Surra, mange, ticks in is seases)
 MERS diffractorial diseases (diarrhea, spiratory diseases, metabolic disorders) spiratory diseases, metabolic disorders, reproductive failures...)



Emerging diseases

In Africa:

- New disease in the Horn of Africa (PPR like virus)
- Unexplained overmortalities in Mali, Niger, Chad, Sudan, Ethiopia, and Somalia





Role of climatic changes?





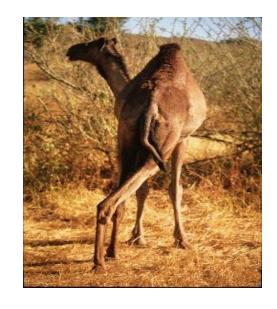


Emerging disease on camel

In the Horn of AFRICA



PPR like virus + Streptococcus equi,



All samples collected in infected mixed herds in North Africa were negative for PPR







Emerging diseases in camel

Over-mortality in Saudi Arabia -2008



Plant intoxication?
Mineral deficiencies?
Blood parasitic diseases?
Main virus (RVF, blue tongue, horse sickness)?



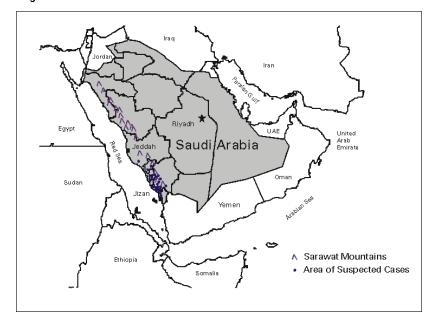


Emerging diseases in camel

Rift Valley Fever

Outbreak in 2000 in Saudi Arabia and Yemen killing hundred people. Imported by contaminated sheep and camel from the Horn of Africa

FIGURE 1. Area of reported suspected cases of Rift Valley fever — Saudi Arabia, August-October 2000





Transboundary disease



Impact of present trends of camel farming on to the health status

- **Sedentarization and intensification** (better access to services but changes in health patterns (mastitis, mange, ticks...)
- **Stronger needs for securization of pastoral systems** (water supply management, natural pasture improvement, veterinary facilities, education)
- **Development of a camel products market** (milk and meat) around the main towns (complementarity between PU systems and pastoral systems with increasing flows)
- **Territorial expansion** (camel farming system in more humid ecosystems)



Development of PU dairy camel farms

Example in Sub Saharan and North African countries









Changes in the production systems

Dairy camel production systems in KSA

Bedouin System (extensive, mobile) 36%

rangelands

Semi Intensive System 24%

Sedentarization Feed complement

Periurban Systems 35%

Around cities

Intensive Systems 5%

Irrigated forage Industrial feeding













② Establishment of a technical team for collecting data (slaughterhouses, markets, disease declaration or disease reporting in veterinary clinics), data analysis and edition of an epidemiological bulletin









- Improvement of slaughtering conditions
- Training of technicians for meat and carcass control
- Carcass classification



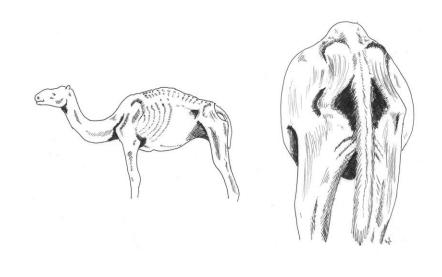






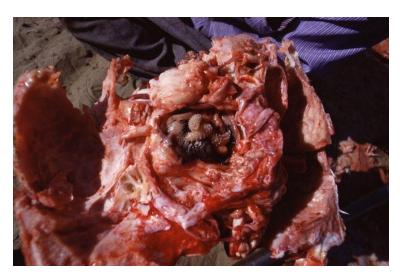
② Capacity building for livestock technical staff in local veterinary services on camel diseases (diagnostics and treatment),

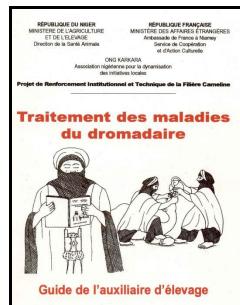


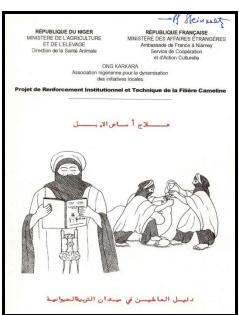




Extension/education and support to animal health operators including camel farmers susceptible to perform some basic treatments and drugs,

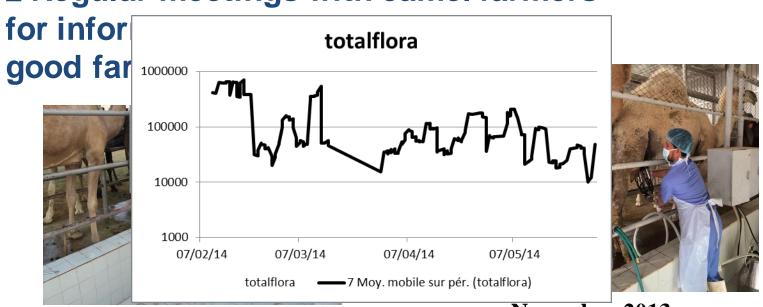








Regular meetings with camel farmers



February 2013

Coliforms: 10⁶ UFC/ml

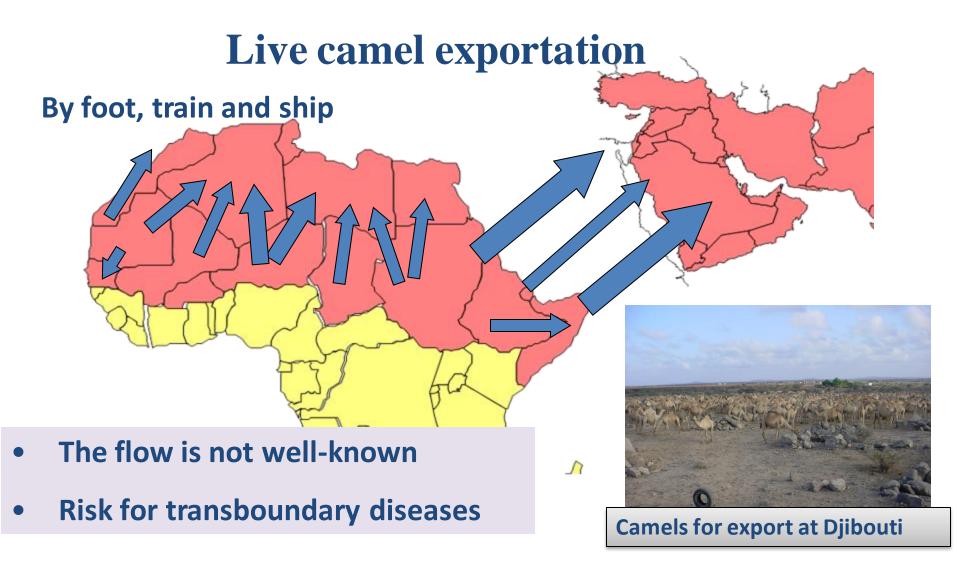
Total Flora: 3.5 x 10⁵ UFC/ml

November 2013

Coliforms: 10³ UFC/ml

Total Flora: 1.8 x 104 UFC/ml

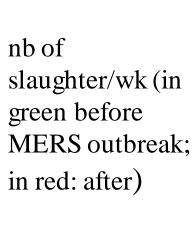


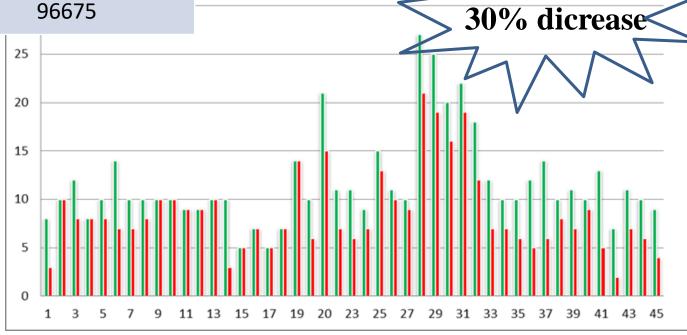




Year	Camel import
2013	131932
2012	136196
2011	96675

Example in Saudi Arabia: impact of MERS on camel meat market







Djibouti example

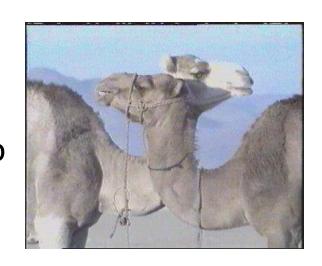
- Veterinary control is performed by the veterinary services
- A certificate is attributed for international market.
- Some serological surveys can be achieved on a sampled flock to detect main infectious diseases (Rinderpest and Rift Valley Fever).
- Certification will be guaranteed by an international organisation in charge of the certification agreement at international level (as SBS from Switzerland).

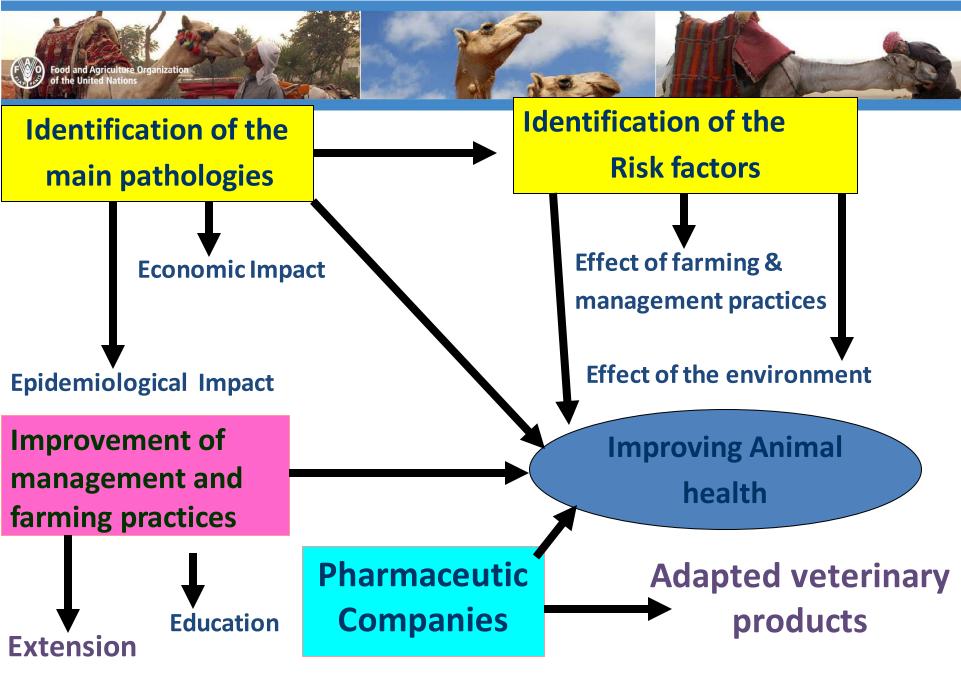


Conclusion

The camel health control is not easy because the type of dominant farming system is:

- ✓ extensive
- ✓ nomadic
- ✓ performed in remote areas with no veterinary facilities







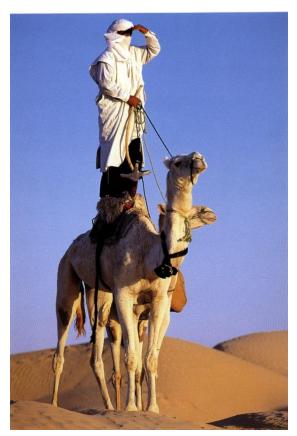
Website on camels

- http://camelides.cirad.fr
- □http:://www.isocard.org











Thank you for your attention