

Risk factors associated with occurrence of anthelmintic resistance in sheep of resource poor farmers in Limpopo province, South Africa

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Abstract

Anthelmintic treatment is the most common way of controlling nematode infections in ruminants even though several countries have reported anthelmintic resistance (AR), resulting in limitation for sustainable small ruminant production. The aim of the present study was to evaluate the knowledge of resource poor sheep farmers in Limpopo province on the use of anthelmintics. A questionnaire survey regarding helminthosis control practices was administered to farmers of small ruminant flocks in five districts of Limpopo province, South Africa, namely Capricorn, Sekhukhune, Waterberg, Vhembe and Mopani. A total of 77 resource poor farmers who owned 40 - 100 sheep were interviewed between June and August of 2017 using a structured questionnaire with a combination of qualitative and quantitative, open-ended questions. None of the farmers weighed their sheep before dosing them instead visual appraisal of individual weight was the most common means of estimating the anthelmintic dose. Farmers that owned sheep for more than 10 years were better informed than their inexperienced counterparts in terms of identifying symptoms of gastrointestinal parasites infection and knowledge of infection mode ($p < 0.05$) although no significant difference was found to exist between the three groups of farmers with regard to the usage and correct application of anthelmintics ($p > 0.05$). Majority of the respondents (57%) were aware of gastrointestinal nematodes (GI) that infect sheep although only 34% knew how animals become infected. The results from the present study also revealed that 57% of the respondents can identify the clinical symptoms of gastrointestinal nematodes infection. Although 67.5% of farmers mentioned that they never dose their sheep, 32.5% use anthelmintics at varying times in a year. The above information is an indication of risks associated with occurrence of anthelmintic resistance in the study areas. *In vivo* and *in vitro* AR studies should be conducted in flocks with high treatment frequencies to establish the degree of resistance if there's any using faecal egg count reduction tests. Furthermore, there is a need to give training to resource-poor farmers of small stock on proper application of anthelmintic treatment and to educate them on how to prevent development of AR.

Key words: Gastrointestinal nematodes; anthelmintic resistance; under dosing; treatment frequency, resource poor farmers, Limpopo province.

Introduction

Gastrointestinal nematodes of small ruminants are distributed worldwide and are particularly important parasites of ruminants in all regions across the tropical and sub-tropical countries (Martinez-Valladares 2013). These infections cause low productivity due to stunted growth, poor weight gain, feed utilization, feeding and water intake, lower meat, wool and milk production, cost of treatment and mortality in young animals (Paddock 2010). Anthelmintic treatment is the most common way of controlling nematode infections in ruminants even though several countries have reported anthelmintic resistance (AR), representing a limitation for sustainable small ruminant production (Domke et al. 2011).

Anthelmintic resistance occurs when parasites, usually eliminated by a given dose, suddenly survive the treatment and since resistance is inherited, the surviving worms will pass their resistance alleles to their progeny (Sangster 1999). Resistance against drugs belonging to the same anthelmintic drug class is called side-resistance, whereas cross- and multidrug-resistance refers to resistance against two or multiple drugs belonging to different anthelmintic drug classes (Torres-Acosta et al. 2012). AR development can be limited by ensuring that the nematode parasites are exposed to an effective anthelmintic drug concentration and to consider the timing and frequency of anthelmintic drug treatments so that only a small proportion of the population is exposed to the anthelmintic (Sargison 2016).

The AR is a problem in countries such as Australia, New Zealand, South Africa, and many Latin American countries (Dolinská et al. 2012; Torres-Acosta et al. 2012). In Europe, anthelmintic resistance has been reported in the Slovak Republic (Čerňanská et al. 2006), Spain (Alvarez-Sanchez et al. 2001), Italy (Traversa et al. 2007), Greece (Papadopoulos et al. 2001), the United Kingdom (Bartley et al. 2006; Taylor et al. 2009), and the Netherlands (Borgsteede et al. 2007).

The most commonly used anthelmintic classes are: macrocyclic lactones, benzimidazoles and imidazothiazoles (Cezar et al. 2010). Many reports of AR are cases of benzimidazoles or levamisole, but the number of cases of resistance to the macrocyclic lactone, namely, ivermectin is increasing (Papadopoulos 2008). Reports of resistance to doramectin and moxidectin are less common (Papadopoulos et al. 2012).

In South Africa, farmers control nematode infections in their livestock primarily by means of anthelmintic drugs, namely ivermectin, albendazole and levamisole (Tsotetsi et al. 2013). Ninety percent of South African sheep farms harbour nematode strains resistant to at least one class of anthelmintics and 40% of South African farms have been found to house strains of nematodes resistant to three or more classes of anthelmintics (Van Wyk et al. 1997).

Van Wyk (1999) reported that the AR of *H. contortus* in South Africa is possibly the highest that has so far been recorded in the world with emerging strains that may soon be impossible to treat with any of the existing anthelmintics.

Although farmers are doing their best to combat nematode infections, the severity of anthelmintic resistance has led to a decrease in the efficacy of anthelmintics (Tsotetsi et al. 2013). In South Africa AR have been reported in both commercial and resource-poor farming sectors, with the commercial sector being described as being the worst in the world (Vatta & Lindberg 2006).

Table 1: Anthelmintic Resistance evaluated by the Fecal Egg Count Reduction Test (FECRT) in small ruminants in South Africa

| Area and period resistance reported | Drug | Host animal | Source |
|-------------------------------------|--|-------------|----------------------|
| Limpopo province, Tompi Seleka | Benzimidazole and Rafoxanide | Sheep | Van Wyk et al. 1999 |
| Northwest Province, Mafikeng | Rafoxanide, Levamisole and Fenbendazole | Goats | Bakunzi 2003 |
| Mpumalanga, Emerlo | Benzimidazole, Levamisole, Ivermectin and Rafoxanide | Sheep | Van Wyk et al. 1999 |
| Kwazulu Natal | Benzimidazole, Levamisole, Ivermectin and Rafoxanide | Sheep | Van Wyk et al. 1999 |
| Gauteng Province, Hammanskraal | Albendazole, Levamisole and Ivermectin | Goats | Tsotetsi et al. 2013 |
| | Levamisole and Ivermectin | Sheep | Tsotetsi et al. 2013 |
| Gauteng province, Nigel | Albendazole, Levamisole and Ivermectin | Goats | Tsotetsi et al. 2013 |
| | Albendazole and Ivermectin | Sheep | Tsotetsi et al. 2013 |

The risk of under dosing and a continued use of one class of anthelmintics, irrespective of efficacy status are frequently encountered factors enhancing development of anthelmintic resistances (Čerňanská et al. 2008; Aga et al. 2013). In an Ethiopian study, a questionnaire survey to assess community's current knowledge revealed that majority of the respondents had poor or no information on economic importance of gastrointestinal nematode and anthelmintic drugs utilization practices (Belina et al. 2017). Furthermore, two studies in Norway and Slovakia revealed that in the majority of the small holder sheep flocks, determining the anthelmintic dose by visual appraisal of the weight of the heaviest lamb or ewe before the start of the drenching operation was a common practice and insufficient weight estimations for calculating the correct anthelmintic dose may lead to development of AR (Domke et al. 2011; Kupčinskas et al. 2016).

The aim of the present study was to evaluate the resource poor farmer's knowledge on anthelmintic use in Limpopo province, South Africa.

Materials and Methods

Study area description

This study focused on Limpopo Province located in the north of South Africa (Figure 1A & B). It is one of the developing provinces in South Africa and is particularly vulnerable to climate change impacts, due to its exposure to extreme weather events (Tennant & Hewitson 2002; Cook et al. 2004). The province has three distinct climatic regions: the Lowveld region which is characterized by a semi-arid climate(s), the Middle- and Highveld that is considered semi-arid, and Escarpment that experiences sub-humid climate (Limpopo Department of Agriculture 2008).

The province experiences long sunny days and dry weather conditions on most days. During the summer months, warm days are often interrupted by a short-lived thunderstorm (Limpopo Department of Agriculture 2008). It can get very hot in October to March, with average temperatures rising to 27°C in summer and 20°C in winter. The bulk of the precipitation occurs in summer, and annual rainfall totals range from about 400 - 600 mm over most of the province (Anon 2007). Limpopo is a province having a high number of rural dwellers dependent on natural resources and farming is of considerable importance (Reason et al. 2005; Thomas et al 2005).

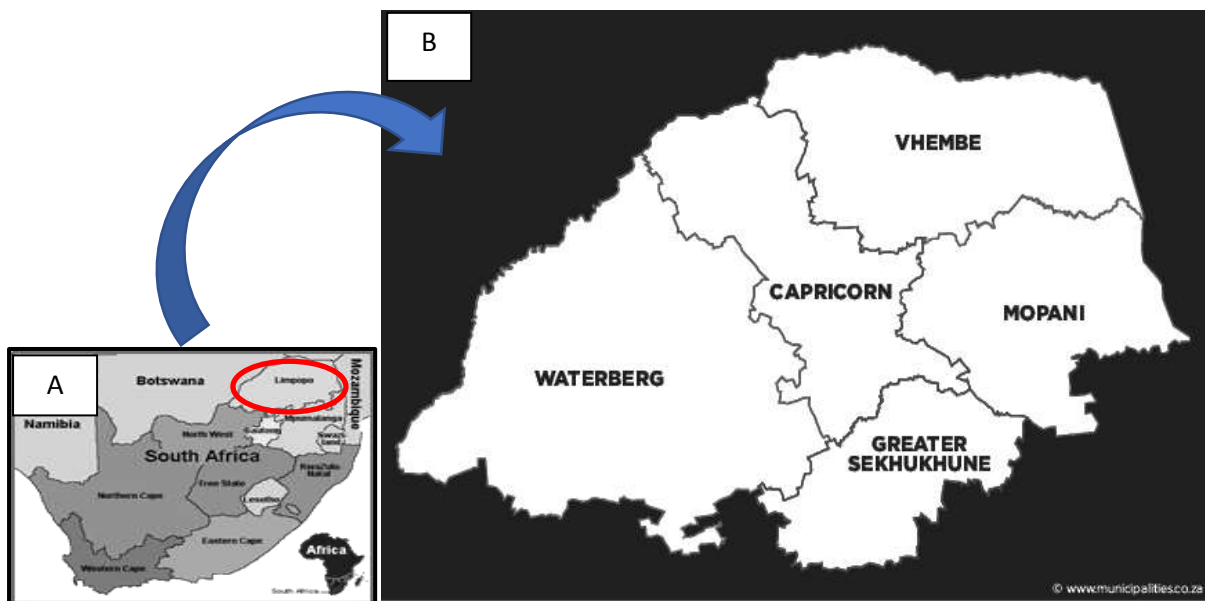


Figure 1: Map showing study areas. (A) Map of South Africa showing Limpopo province circled in red, (B) Limpopo province showing five districts of Limpopo (Limpopo local government 2012).

Questionnaire survey

A total of 77 resource poor farmers derived from the extension officers and animal health technician's data base in Limpopo province, who owned 40 - 100 sheep were interviewed between June and August of 2017 using a structured questionnaire with a combination of qualitative and quantitative, open-ended questions. The farmers in Capricorn, Sekhukhune and Vhembe districts converged at the dipping tanks with the exception of Waterberg and Mopani districts where farmers were visited in their respective homes. All the farmers were interviewed individually. The questionnaire was composed of two sections, whereby the first section was related to main characteristics of the farm management such as flock size, breed, grazing conditions and housing time. The second section was dedicated to helminth parasite control practices. Questions regarding among other things mode of infection, clinical signs linked to parasitism, time and reason for anthelmintic treatment, anthelmintic products used, dose determination and mode of application were included.

Statistical analysis

Data collected was manually coded and analyzed using descriptive statistics and frequencies. Microsoft® Excel 2016 and SAS Statistics (Version 9.4) statistical package were also used to analyze the data. Chi-square analysis was used to compare the proportions of yes to no in response to different variables.

Results

A total of 77 questionnaires (100%) were returned. Demographics revealed that 88% of the respondents were older people aged over 40 years, of which 50 (73.5%) were males and 18 (26.4%) were females. The results presented in Table 2 show that there was a numerical difference between the male and the female farmers in terms of knowledge on the risk factors that are associated with the development of anthelmintic resistance but no significant difference ($p > 0.05$) between the two genders was observed.

Table 2: The percentages of yes between male and female on questions relating to risk factors associated with development of anthelmintic resistance

| Risk factors | Female | Male | Chi square value | Pr > Chi square |
|------------------------------------|--------|-------|------------------|-----------------|
| Knowledge of symptoms of infection | 15.91 | 84.09 | 2.27 | *0.13 |
| Knowledge of mode of infection | 15.38 | 84.62 | 1.02 | *0.31 |
| Usage of anthelmintics | 15.63 | 84.37 | 1.32 | *0.24 |
| Knowledge of dosage calculation | 17.39 | 82.61 | 0.41 | *0.51 |

*Pr > Chi square = Probability at which the proportions of yes are different

Of all the respondents, only 1 farmer (1.7%) was aged between 21 – 30 and 8 (13.5%) were aged between 31 – 40 years and there was no significant difference between the farmers falling in different age group categories in respect of their knowledge of symptoms of infection, knowledge of mode of infection, usage of anthelmintics and knowledge of dosage calculation ($p > 0.05$). All in all, the highest number of female farmers was found in Sekhukhune district (38.8%) and the lowest was in Waterberg and Capricorn districts with 2 (11.1%) female farmers each.

The results indicated that visual appraisal of individual weight was the most common means (100%) of estimating the anthelmintic dose used in sheep. Table 3 shows that only a small percentage (4.35%) of farmers from Vhembe district stated that they know how to calculate anthelmintic dose as compared to the farmers in Capricorn, Mopani, Sekhukhune and Waterberg districts at 30.43, 34.78, 13.04 and 17.39 respectively ($p < 0.05$) and these correspond with a similarly small percentage (4.55) of farmers with some knowledge of symptoms of internal parasites infection and the probability at which the proportions of yes are different was highly significant ($p < .0001$).

Table 3: The percentages of yes from farmers in the five districts of Limpopo province on questions relating to risk factors associated with development of anthelmintic resistance

| Risk factors | Capr | Mop | Sekh | Vhembe | Waterberg | Chi square value | Pr > Chi square |
|------------------------------------|-------|-------|-------|--------|-----------|------------------|-----------------|
| Knowledge of symptoms of infection | 27.27 | 25.00 | 29.55 | 4.55 | 13.64 | 24.83 | *<.0001 |
| Knowledge of mode of infection | 43.31 | 19.23 | 19.23 | 7.69 | 11.54 | 16.10 | *0.0029 |
| Usage of anthelmintics | 25.00 | 31.25 | 18.75 | 12.50 | 12.50 | 13.83 | *0.0079 |
| Knowledge of dosage calculation | 30.43 | 34.78 | 13.04 | 4.35 | 17.39 | 17.51 | *0.0015 |

Capr = Capricorn; Mop = Mopani; Sekhu = Sekhukhune. *Pr > Chi square = Probability at which the proportions of yes are different

Majority of the respondents (57%) were aware of gastrointestinal nematode (GI) that infect sheep although only 34% know how animals become infected. The results in Table 4 reveals that the farmers that owned sheep for more than 10 years were better informed than their inexperienced counterparts in terms of identifying symptoms of internal parasites infection and knowledge of infection mode ($p < 0.05$) although no significant difference was found to exist between the three groups of farmers with regard to the usage and correct application of anthelmintics ($p > 0.05$).

Table 4: The percentages of yes between experienced and inexperienced farmers in Limpopo province on questions relating to risk factors associated with development of anthelmintic resistance

| Risk factors | Less than 5 yrs. | 6 - 10 yrs. | More than 10 yrs. | Chi square value | Pr > Chi square |
|------------------------------------|------------------|-------------|-------------------|------------------|-----------------|
| Knowledge of symptoms of infection | 15.91 | 20.45 | 63.64 | 5.21 | *0.07 |
| Knowledge of mode of infection | 7.69 | 23.08 | 69.23 | 6.55 | *0.03 |
| Usage of anthelmintics | 18.75 | 18.75 | 62.50 | 1.26 | *0.53 |
| Knowledge of dosage calculation | 21.74 | 17.39 | 60.87 | 0.27 | *0.87 |

*Pr > Chi square = Probability at which the proportions of yes are different

The farmers with a lower level of education had a better awareness of three out of the four risk factors that are associated with the development of anthelmintic resistance than those with matric qualification ($p < 0.05$) (Table 5).

Table 5: The percentages of yes between farmers of different education levels in Limpopo province on questions relating to risk factors associated with development of anthelmintic resistance

| Risk factors | Below matric | Post matric | Chi-square value | Pr > chi square |
|------------------------------------|--------------|-------------|------------------|-----------------|
| Knowledge of symptoms of infection | 63.64 | 36.36 | 3.05 | *0.08 |
| Knowledge of mode of infection | 57.69 | 42.31 | 3.62 | *0.05 |
| Usage of anthelmintics | 53.13 | 46.87 | 8.98 | *0.002 |
| Knowledge of dosage calculation | 52.17 | 47.83 | 5.95 | *0.01 |

*Pr > chi-square = probability at which the proportions of yes are different

About 67.5% of resource poor sheep farmers in Limpopo province never use anthelmintics although 32.4% of them had deworming schedule for their sheep. However, the Chi square analysis of the five districts of Limpopo province yielded a statistical difference of $p = 0.0079$ and $p = 0.0015$ for farmers' usage of anthelmintics and knowledge of dosage calculation respectively, which was highly significant (Table 3).

Table 6: Knowledge on clinical manifestation/signs of gastrointestinal infection

| Clinical symptoms | Frequency | Frequency % |
|------------------------|-----------|-------------|
| Nasal discharge | 6 | 17.1 |
| Rough coat | 10 | 28.5 |
| Loss of body condition | 11 | 31.4 |
| Worms of in the faeces | 3 | 8.5 |
| Diarrhea | 3 | 8.5 |
| Bottle jaw | 2 | 5.7 |

Results of the present study also revealed that 57% of the respondents can identify the clinical symptoms of gastrointestinal nematodes infection with loss of body condition and rough coat mentioned 11 times (31.4% frequency) and 10 times (28.5% frequency) respectively (Table 7).

Table 7: Helminths control practices of resource poor farmers in Limpopo province

| Helminth control factor | Frequency | Frequency % |
|---|------------------|--------------------|
| Anthelmintic class | | |
| Benzimidazole | 26 | 70.3 |
| Macrolytic lactones | 9 | 24.3 |
| Levamisole | 1 | 2.7 |
| Praziquantel + levamisole | 1 | 2.7 |
| Treatment frequency | | |
| Once per year | 3 | 3.9 |
| Twice per year | 9 | 11.7 |
| Three times in a year | 13 | 16.8 |
| Never | 52 | 67.5 |
| Frequency of active AI change (Months) | | |
| 3 months | 10 | 66.67 |
| 4 months | 2 | 13.33 |
| 6 months | 3 | 20.00 |

Where AI = Active ingredient

Forty-eight percent of the respondents know the infection occurrence months, with 65% of them mentioning summer months when it is hot and wet, 19% citing winter and small percentages (8%, 5% and 3%) saying infections occur during spring, all year round and at the beginning of both winter and summer respectively (Figure 2).

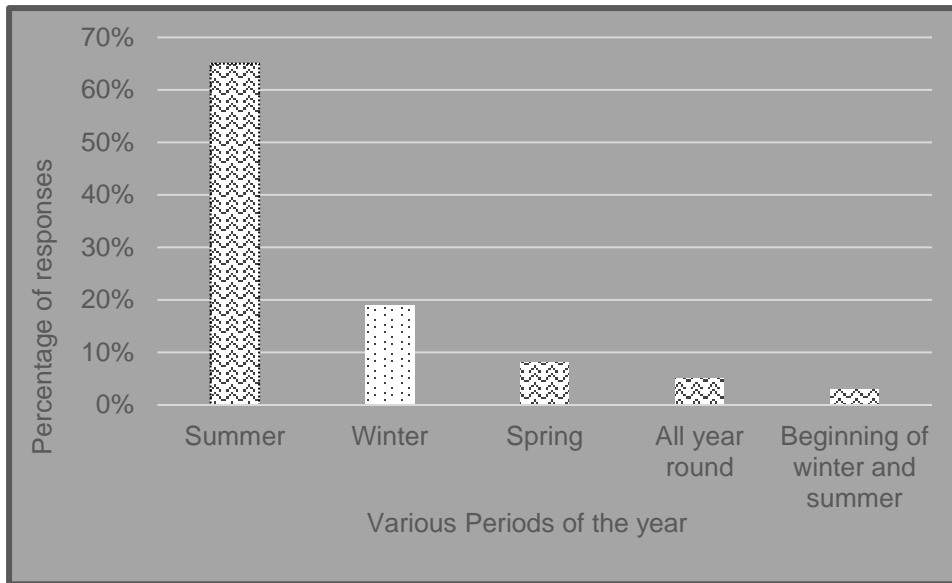


Figure 2: Periods of helminth infections according to resource poor farmers' knowledge in Limpopo province

Table 7 shows that 67.5% of the farmers never use commercial anthelmintics whilst 32.5% apply anthelmintics at varying intervals during the course of the year. Benzimidazoles were the most common anthelmintic class used in sheep. Macrocytic lactones were mentioned 9 times (24.3% frequency) as the preferred drug for the control of gastrointestinal nematodes in sheep with levamisole and praziquantel levamisole combination mentioned once for each (Table 7).

Discussion

The main factors for selection for anthelmintic resistance are, a high treatment frequency (Chartlier et al. 1998), under-dosing and the use of the same anthelmintic class over several years (Sargison et al. 2007). These factors, alone or in combination, together with certain types of farm management can accelerate the development of AR (Jackson 2009; Jabbar et al. 2006).

None of the resource poor farmers in the present study weighed their sheep before dosing but relied solely on the visual appraisal of an animal to determine its weight and wrong weight estimation may be a cause of under dosing. Bakunzi (2003) attributed anthelmintic resistance observed in goats in a study conducted in Mafikeng to under dosing as a result of limited financial resources. Kumsa et al (2010) also reported that animal owners in Ethiopia do not have information about anthelmintic rotation and similar to the findings of the two South African studies, the farmers treat their animals only by visual estimation of animals' body weight to determine the required doses.

Underestimation of real weight has potential to lead to under-dosing, which can contribute to the development of AR (Chartier et al. 2001). A poor drenching practice can result in under-dosing of a drug and select for AR (Smith et al. 1999); Wolstenholme et al. 2004). It is not only the incorrect estimation of animal live-weight that causes under-dosing but also incorrect calibration of drench guns and in consideration of ensuring a correct dose, one has to estimate the weight as accurately as possible, preferably by an individual weighing of each animal (Waller 1997). Weighing the heaviest animal before drenching all animals with a slightly over-calculated dose can also be considered as an appropriate way to ensure correct anthelmintic dose (Waller 1994).

Results of the current study indicated that only 32.4% of resource poor farmers had deworming schedule for their animals and although frequency of treatments with anthelmintics varied among farmers, 16.8% of them treated their animals three times a year and these results are in agreement with the result in an Ethiopian survey that showed only 17.78% of the farmers had deworming schedule and 68.33% of the respondents did not deworm their animals (Belina et al. 2017). Although most of the farmers (67.5%) never treat their animals with anthelmintics, there is still a percentage of farmers (32.4%) made up of those farmers who treat their animals once a year (3.9%), twice a year (11.7%) and three times a year (16.8%) with anthelmintics. Those farmers who treat their flocks two or more times per year, do so without coprological checking for the necessity of treatment or its efficacy afterwards and that puts the flocks at risk of anthelmintic resistance.

The results of the present study also revealed that 57% of the farmers in Limpopo province are aware of gastrointestinal nematodes and these results are following a trend of the findings of a study conducted in Gauteng Province, South Africa that revealed that about 88% of the farmers are aware of veterinary helminthosis (Tsoetsi et al. 2013). On the contrary, a study conducted by Belina et al (2017) in Ethiopia revealed that 83.61% of the respondents had poor to no information on anthelmintic drugs utilization practices and 78.89% of interviewed respondents did not know the issue of anthelmintics resistance and its future impact.

The majority of resource poor sheep farmers in Limpopo province still had poor understanding on GI nematode infection which is in line with the results of parasite control practices on gastrointestinal nematode in two separate Ethiopian studies (Aga et al. 2013; Melaku et al. 2013). Contrary to their lack of understanding on gastrointestinal nematode infection, the farmers had knowledge of clinical symptoms and loss of body condition was cited more than any other symptom which was consistent with the results of an earlier study that reported that GI nematode infections was higher in animals with poor body condition (Mohammed et al. 2015). This could be explained by

the fact that loss of body condition could be due to factors such as parasitic infections which lead to lower immunological response against infective stage of the parasites (Mohammed et al. 2015; Muktar et al. 2015).

The results of the present study also showed that a 67.5% of sheep farmers in Limpopo province never use anthelmintics which in itself pre-determines lower risk of AR in Limpopo Province South Africa. That is a notion supported by earlier workers that higher treatment frequencies increase the selective advantage for resistant parasites, allowing for an increase in the proportion of resistant parasites over time (Sargison 2011) but contrary to the results of the study by Van Wyk et al. (1999) in Limpopo province that revealed AR was still a problem even in sheep flocks where anthelmintic treatment was less intensive. Although a high risk of resistance is eliminated by the large number of farmers that never use anthelmintics in their flocks, some degree of risk may still exist on some farms that use commercial anthelmintics because the survey also revealed that knowledge of AR, the prevalence of gastrointestinal nematodes and proper usage of anthelmintics is lacking. Similar to the findings of studies conducted in the southern part of Ethiopia and Cuba, the present study established that benzimidazoles group of anthelmintics especially albendazole was the most commonly used by resource poor farmers in Limpopo province to deworm their sheep (Kumsa et al. 2010; Arece et al. 2004). On the other hand, levamisole was found to be used very rarely in South Africa, as in many European countries (Čerňanská et al. 2008).

Conclusion

In the present study, important observations and opinions emerged that reflect serious constraints for resource poor farmers in Limpopo province of South Africa. Among other things, present study has shown that the anthelmintic drenching practices such as incorrect dosages used in sheep flocks of resource poor farmers in Limpopo province, South Africa may contribute to the development of AR. None of the sheep flocks had sufficient weight estimation for calculating correct anthelmintic dose and that represents a high risk for under-dosing anthelmintics in these flocks. In order to avoid or slow down the emergence of AR, correct use of anthelmintics and on-farm training about gastrointestinal nematodes infecting small stock must be provided. Such training initiatives should focus on aspects such the importance of correct dosage, when to alternate anthelmintic classes, treatment frequency and new treatment strategies, such as targeted drenching in combination with faecal egg counts. We also suggest that government veterinary services at district and municipality levels purchase the weighing scales which animal health technicians can always carry along during branding, vaccination and dipping

campaigns so that they can also assist farmers with weighing in order to ensure they can administer accurate doses of anthelmintic.

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Competing interests

The authors declare that they have no financial or personal relationships that may have inappropriately influenced them in writing this article.

Authors' contributions

MM, AMT-K, RM and OMMT planned the study. MM conducted the experiment and drafted the manuscript. AMT-K, RM and OMMT reviewed the manuscript. MLM conducted statistical analysis.

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