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# **Antimicrobial Resistance and Intensive Food Production**

**Pandemics and Industrial Food Animal Farming**

**CSE Webinar**

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## **Antimicrobial Resistance (AMR):**

- Antimicrobial resistance happens when microorganisms (such as bacteria, fungi, viruses, and parasites) change when they are exposed to antimicrobial drugs (such as antibiotics, antifungals, antivirals, antimalarials, and anthelmintics) (WHO)
- Antibiotic resistance happens when germs like bacteria develop the ability to defeat the drugs designed to kill them. That means the germs are not killed and continue to grow. (CDC)

## **Pandemic:**

- A pandemic is the worldwide spread of a new disease (WHO)
- Viral pandemics – such as of influenza virus and corona virus

**AMR - a chronic pandemic of huge cumulative damage**



## Impact of AMR is huge and goes beyond health

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- Existing **antibiotics are becoming ineffective** leading to:
  - Increased **morbidity** and **mortality** in humans and animals
  - **Longer hospital stays** and expensive treatments - higher healthcare expenditures
- Can also cause productivity loss, food security and livelihood issues
- Make attainment of **sustainable development goals** difficult. Such as:
  - No poverty (SDG 1)
  - Zero hunger (SDG 2)
  - Good health and well being (SDG 3)
  - Clean water and sanitation (SDG 6)
  - Responsible consumption and production (SDG 12)
- **USD 100 trillion** – cumulative cost to global economic output by **2050**



## High annual deaths due to AMR leading to huge cumulative damage vis-à-vis viral pandemics of the 21st century (which are acute crisis of a limited duration)

- **700,000** deaths globally every year estimated due to resistant infections (Review on AMR, 2016)
- **2,30,000** deaths globally in 2017 due to **MDR/RR-TB**; most cases and deaths in India and China (WHO, 2018)
- **> 35,000** deaths each year in the **U.S.** (CDC, 2019)
- **~33,000** deaths estimated each year in the **EU** (Lancet 2019)
- **>56000 neonatal deaths** estimated due to sepsis by drug-resistance to first-line antibiotics each year in **India** (Lancet 2016)

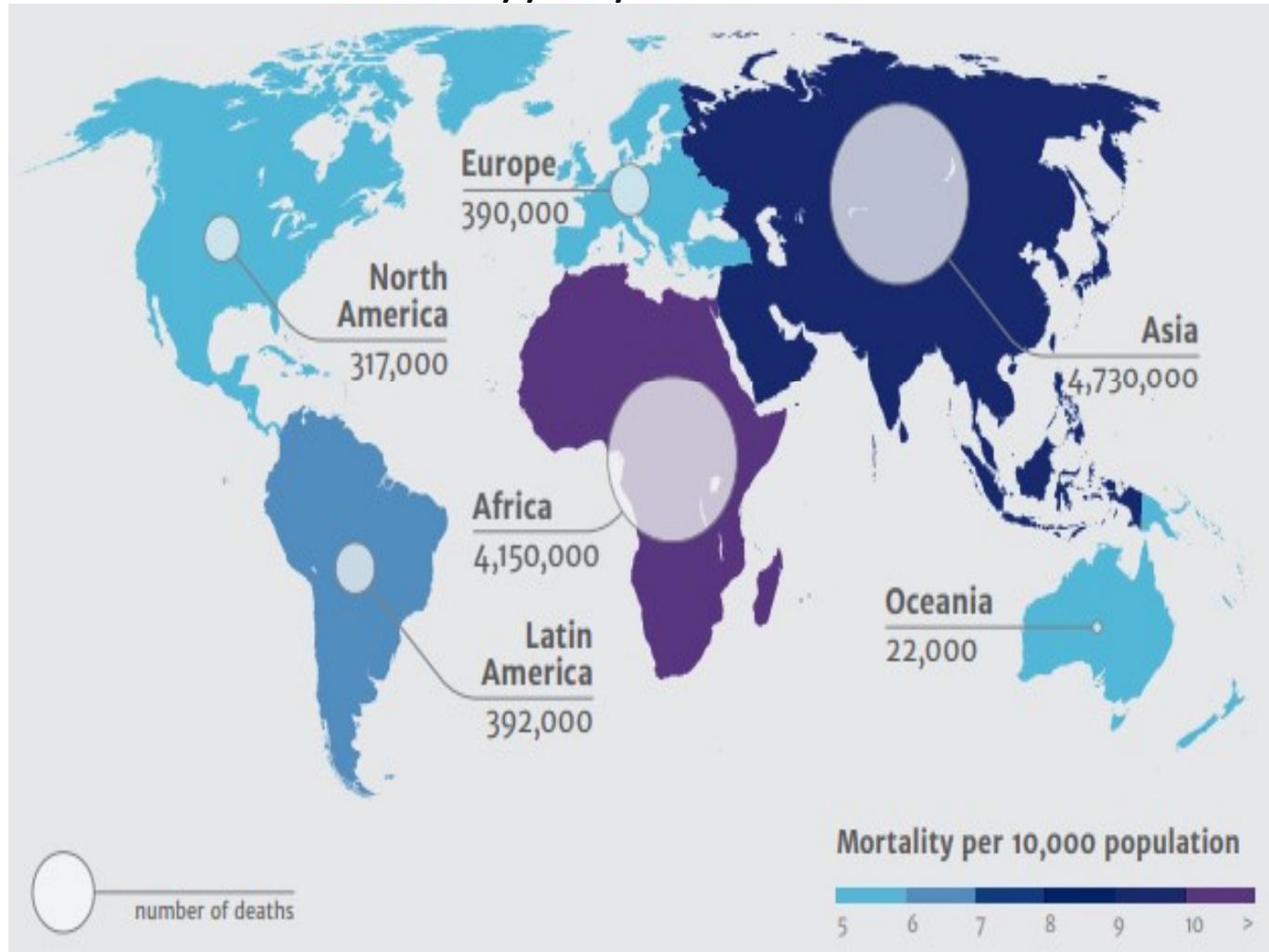
Pandemic	Causative organism	Worldwide deaths
Spanish Flu (1918-19)	Influenza A (H1N1) virus	20-50 million
Asian Flu (1957-58)	Influenza A (H2N2) virus	1.1 million
Hong Kong Flu (1968)	Influenza A (H3N2) virus	1 million
<b>After 2000</b>		
SARS (2003)	SARS CoV virus	916 (Nov 2002- Aug 2003)
Swine Flu (2009)	Influenza A (H1N1) virus	0.15-0.57 million (during first year)
MERS (2012)	MERS-CoV virus	858 (since Sept 2012)
Ebola (2014-16)	Ebola virus	11, 310
Covid19 (2019-20 ongoing)	SARS-CoV2 virus	<b>&gt;0.4 million (as on June 10, 2020)</b>

Data sourced from the WHO and the Centers for Disease Control and Prevention



# Estimated 10 million lives in a year at risk by 2050, if no action taken; About 90 per cent to be in Asia and Africa

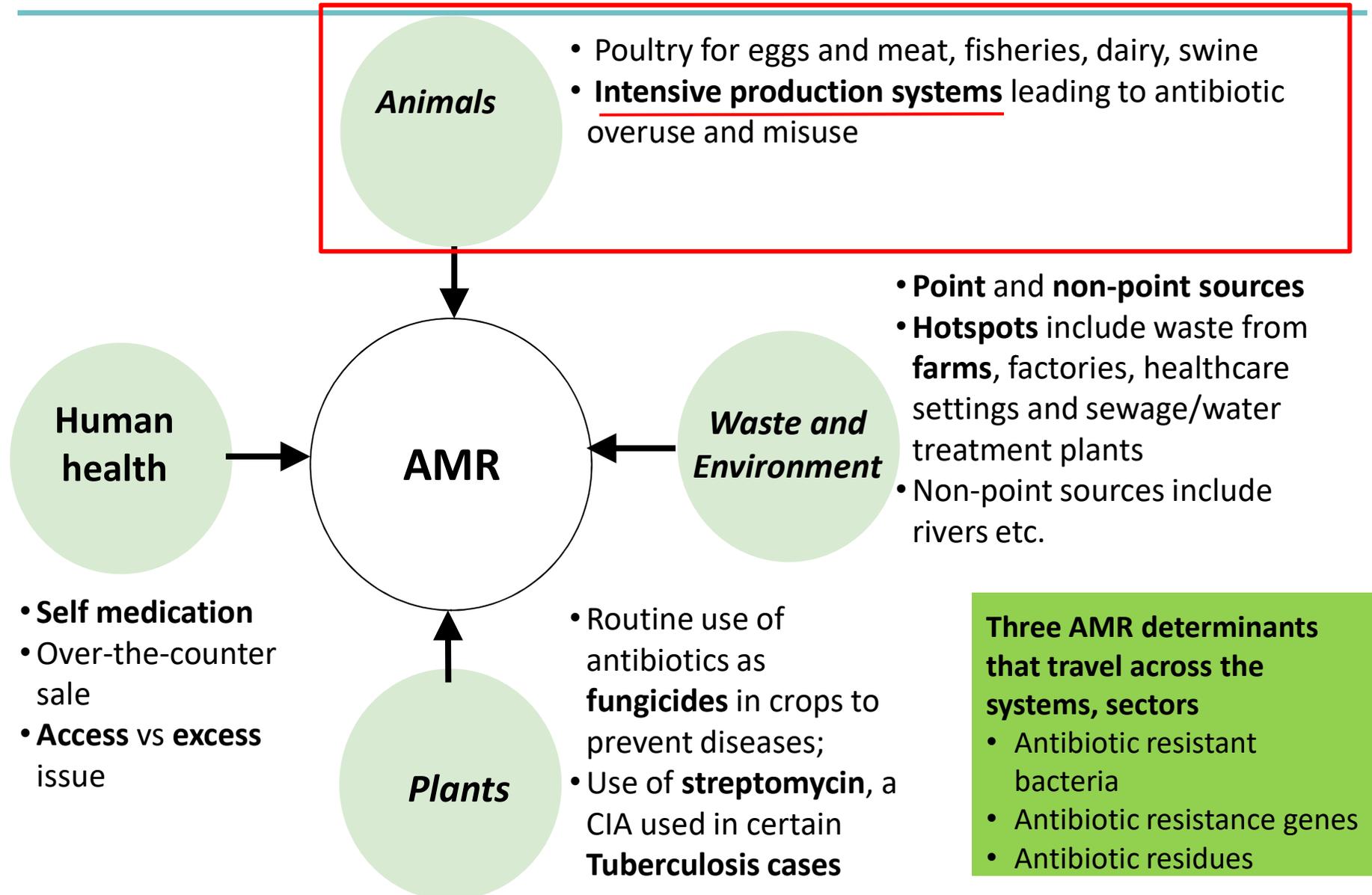
Deaths attributable to AMR every year by 2050



Source- [AMR: Tackling a crisis for the health and wealth of nations](#)



# AMR has strong linkages with food and environment





## Intensive animal farming systems – confined settings and high density





## More food is now grown in intensive settings; the very nature of such industrial production can create crisis

Food that we eat is increasingly being produced in intensive/industrial systems

- In **high income countries**, most of food from animals is grown in intensive settings
- In **low and middle income countries** intensification is growing due to **animal protein demand** (from 2000 to 2030 poultry meat demand in India estimated to grow >8 times)

But the very nature of such production systems can create crisis

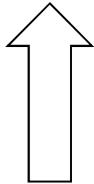
- **Large-scale units** with **high stocking density** of animals/birds/fish
  - **Genetically selected breeds** for productivity (not disease resilience)
  - Confined conditions; **limited focus on animal husbandry**
  - Dependence on **commercial feed**, inputs (also known as animal feeding operations, factory farms)
  - Often **geographically concentrated**; vertically integrated by large players; involves contract farming
  - Industrial systems but considered agriculture; do not get required **regulatory attention**
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- High use of **chemicals and drugs** (easy/economical substitute):
    - **Routine** antibiotic use to promote faster **growth** and **prevent diseases** despite no clinical sign
    - Use of medically important antibiotics including **critically important** and last-resort



# Intensive food production is strongly linked to several pandemics

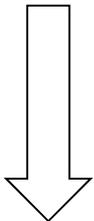
## Antimicrobial Resistance

- Antibiotic use favors resistance; **misuse accelerates it**
- **Low/sub-therapeutic doses creates selection pressure** in the gut bacteria of the animal/bird
- **Resistant** bacteria survives and spreads through food, contact and waste; **Un-metabolised antibiotics in feces, antibiotic residues** in food add to problem



## Intensive food animal production

- About **60 per cent** of all infectious diseases in humans are **zoonotic diseases**; many originate in wildlife, livestock often serve as an **epidemiological bridge**
- Intensive conditions reflect '**monoculture effect**', a vulnerability due to more **contact opportunities** among those who lack genetic diversity; can help viruses **amplify** and **attain higher virulence**; Avian Influenza linked to intensive poultry and Swine flu linked to pig farming
- **Agriculture expansion for animal feed crops** (e.g. soy) and intensification entering into **forests** and **natural habitats** diffuses boundaries; Ebola outbreak in West Africa was a result of forest losses; pathogens of Ebola, MERS, SARS and SARS CoV2 are believed to have wild-life reservoirs as long-term hosts



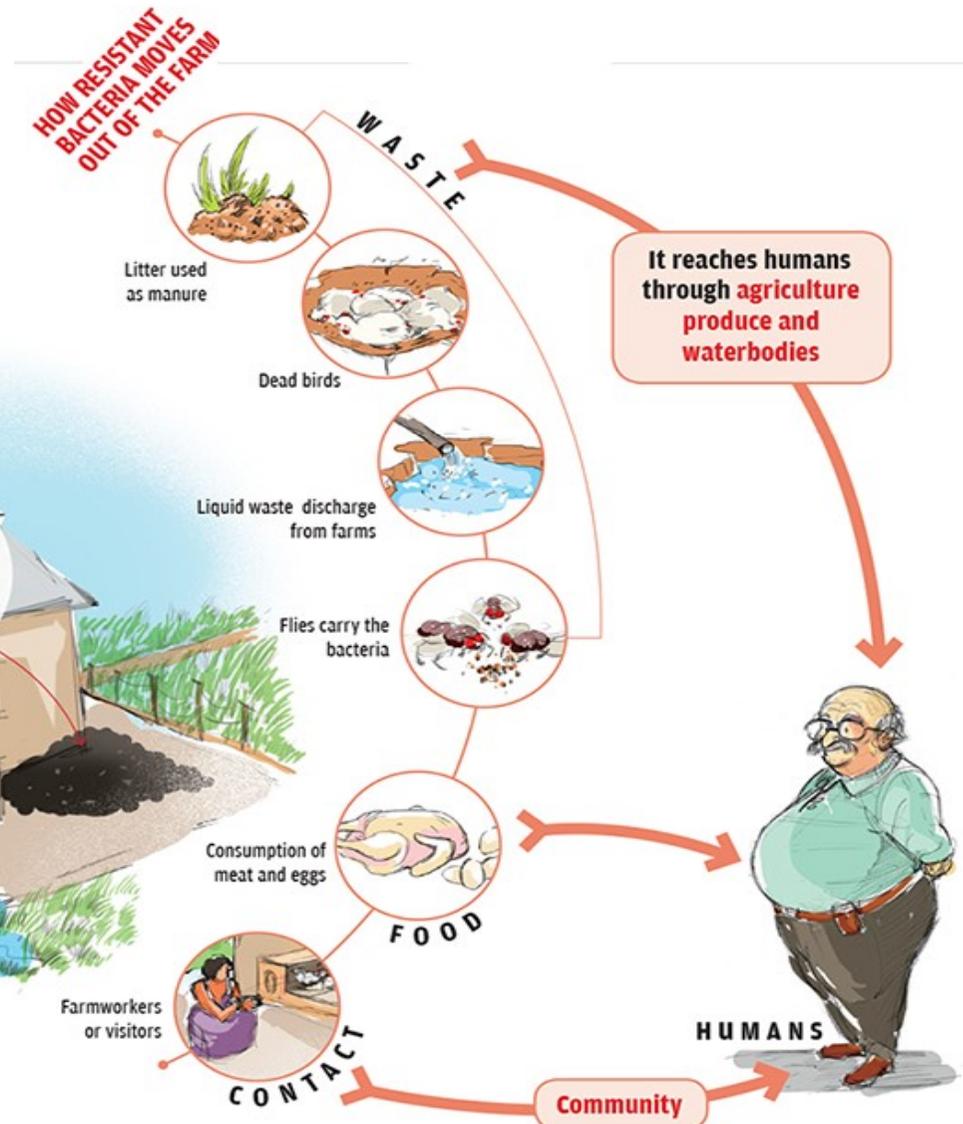
## Viral Pandemics



# Intensive poultry farm and AMR linkages: food, contact and waste

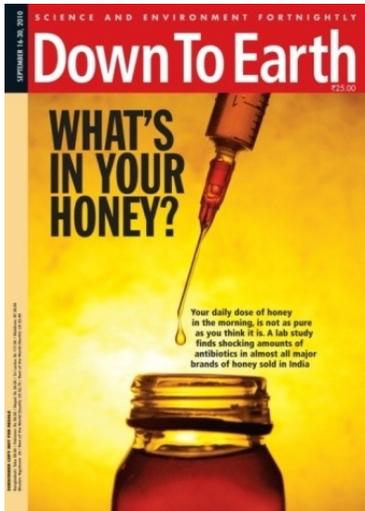
## Poultry litter is rich in antibiotic resistant bacteria and un-metabolized antibiotics

The common practice of using untreated poultry litter as manure in agricultural land is transferring bacteria that are resistant to multiple antibiotics





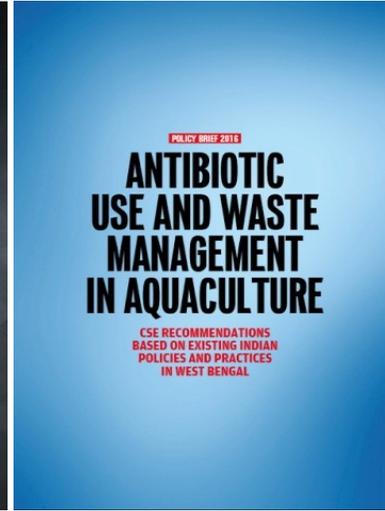
# CSE's work to help contain antibiotic misuse and AMR: examples of studies and reports



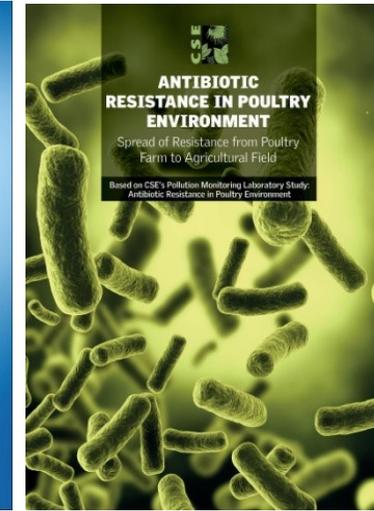
2010 (Honey)



2014 (Poultry)



2016 (Fish)



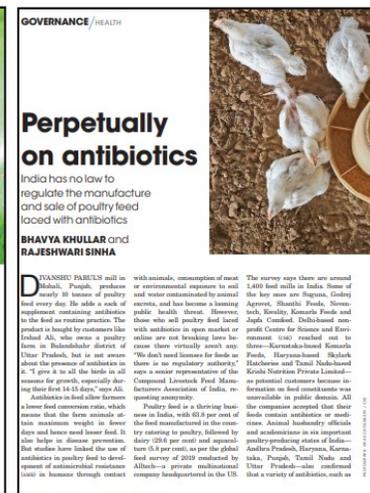
2017 (Poultry farms)



2017 (Fast food)



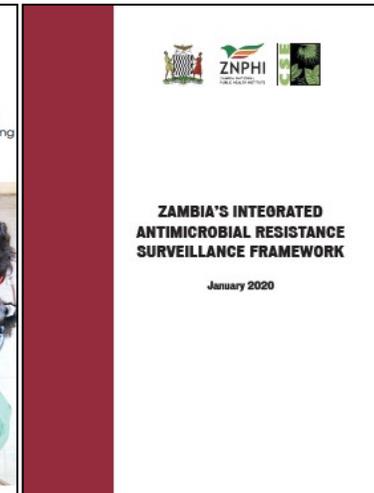
2019 (Crops)



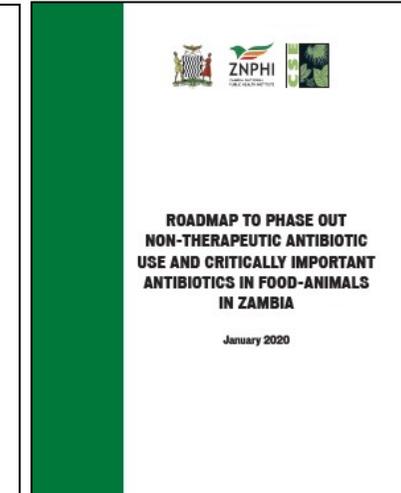
2020 (Feed)



2020 (Fast food)



2020 (Zambia-AMR surveillance)



2020 (Zambia-Roadmap to eliminate antibiotic misuse)



## Time to change the way we grow our food; re-think our relationship – how it is produced and its overall impact

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- **Urgent steps:**
  - Ban antibiotic use for **growth promotion**; regulate feed well – antibiotics not to be allowed
  - Restrict **mass disease prevention** (i.e. group preventative use); regulate over-the-counter antibiotics sold without prescription
  - Limit use of **critically important antibiotics**; preserve those with **highest priority** for human use (quinolones, macrolides, 3<sup>rd</sup>, 4<sup>th</sup>, 5<sup>th</sup> gen cephalosporins, polymyxins, glycopeptides)
  - In parallel - **reduce need for chemicals** by focusing on animal husbandry, bio-security, alternatives, diagnostics, and veterinary extension systems
- **For mid and long-term:**
  - Limit the **environmental spread** of AMR determinants:
    - Adopt AMR-centric approach to manage waste from farms; make standards, monitor and manage waste/effluents, litter, manure
  - **Reduce dependence** on intensive systems; grow more food in other settings



**Thank you**

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