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ABSTRACT

Zoonotic infections of humans from animal reservoirs can result in severe disease in individuals and, in rare cases, lead to pandemic outbreaks. Vast spectrums of new and re-emerging infectious diseases, nearly 75% of which are zoonoses, have become a serious hazard to human health. Zika virus, influenza virus, coronavirus, filovirus, and Rabies virus are examples of zoonotic viruses transmitted from animals to humans. Human diseases are often transmitted by animals through direct contact or vector-mediated transmission. Natural reservoirs are the habitat in which infectious disease pathogens live, matures, and multiply. Several bat species Wild ducks, farmed poultry, swine, horses, and dogs have been identified as zoonotic viruses' reservoirs. Microbial adaption, human habitat, climate change and agriculture intensification are different factors play a vital role in the emergence of zoonotic diseases. Zoonoses pose a severe health risk to the global society. Surveillance is essential for the prevention and control of zoonotic illnesses. To avoid viral infection is to utilize vaccinations with enhanced safety profiles and efficacy, which serve as the foundation for contemporary generation vaccines. Animal vaccinations limit disease transmission in companion animals, secure safe food supply by maintaining healthy livestock herds, and act as a significant hurdle to the transfer of several zoonotic illnesses to humans. To promote human health, manage disease effectively, and reduce mortality and morbidity in humans and animals, it aids in adjusting control strategies against new and reemerging diseases. Research concentrating on a certain health strategy must be prioritised in order to discover crucial interventions phases in disease transmission due to the connection of humans, animals, and the environment. Strong multi-sectoral collaboration among medical professionals, veterinarians, environmental health personnel, and agricultural staff is required.

Keywords: Zoonosis, Animal-human interface, livestock farming, zoonotic viruses.

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CHAPTER HISTORY

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1. INTRODUCTION

Zoonotic diseases are defined as infections that may be transferred between vertebrate humans and animals, with either the person or the animal as the receiver, via food-borne infections, direct contact, or intermediate vectors such as mosquitos and ticks (Christou 2011). Vast spectrums of new and re-emerging infectious diseases, nearly 75% of which are zoonoses, have become a serious hazard to human health. Zika virus, influenza virus, coronavirus, filovirus, and Rabies virus are examples of zoonotic viruses transmitted from animals to humans (Dong and Soong 2021). Only around 25% of these infections arise in domestic animal species, with the remainder originating in wildlife animals (Tomori and Oluwayelu 2023). Because RNA viruses can emerge and spread quickly, they pose a particularly high zoonotic risk. The most reliable sign of interspecies transmission and infection in humans, according to a statistical analysis of 146 cattle viruses, is a virus's propensity for cytoplasmic reproduction. (without nuclear entry) (Pulliam and Dushoff 2009). Combining the Greek words "zoon" (animal) and "nosos" (disease), "zoonoses" is a disease. The World Health Organisation defines zoonosis as any disease or infection that can spread spontaneously from vertebrate animals to humans or from humans to animals. Zoonoses are a major public health risk that can potentially result in mortality (Rahman et al. 2020). The reservoir might be the origin of the agent's transmission to a susceptible host. The target population is exposed to an infectious illness from the natural reservoir, which is a population of organisms or a particular habitat where the illness that is transmissible lives and reproduces naturally or on which the pathogen depends heavily. Typically, a pathogen lives inside an actual host of a particular kind (human or animal), sometimes without generating illness in the reservoir or it can exist in an environment that is not part of the organism, such as contaminated air or water (Peters 2003).

Human-harming zoonoses may originate in either household pets or wildlife; the latter, as hunters, ambitious tourists camping in the woods, and cave explorers have demonstrated, is becoming a more significant reservoir for human disease. In their nonhuman vertebrate hosts, these viruses typically cause little or no obvious sickness. Some zoonotic viruses have extremely narrow host ranges, whereas others may infect a broad variety of vertebrates. Human infection can range from undetectable to deadly. Both new and ancient viral zoonoses play a critical role in developing and reemerging virus diseases (Reed 2018). The human health burden and livelihood effect of zoonotic illness are larger in underdeveloped nations than in industrialized countries, but due to poor diagnosis and underreporting, the influence of zoonotic disease on overall human disease burden is not well characterized (Jones et al. 2013).

2. ZOONOTIC VIRUSES AND THEIR TRANSMISSION

Some notable zoonotic viruses and their routes of transmission are discussed below;

2.1. CORONAVIRUS

Coronaviruses are a part of the Nidovirales order and the Coronaviridae family. They are separated into the genera coronavirus α , β , γ , and δ coronavirus. Their hosts mainly, humans, bovines, avians,

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porcine, etc. suffer from infections like diarrhea, pneumonia, kidney failure, and enteric indications (Satarker and Nampoothiri 2020). The 2019 novel coronavirus (2019-nCoV), also referred to as the SARS-CoV-2, originated in Wuhan, Hubei Province, China, and is currently spreading quickly throughout the world. Under an electron microscope, coronaviruses, which have spike-like protrusions on their surface which give them the look of a crown, appear to be enclosed positive sense RNA viruses. The incident was reported to China on December 31st, 2019, and the WHO was informed. On January 1st, the Huanan sea market for food was shut down. On January 7th, the virus was determined to be a coronavirus with >95% homology to a bat coronavirus and >70% resemblance to the SARS-CoV (Bhatt et al. 2021).

2.2. INFLUENZA VIRUS

Influenza viruses (IVs) are Orthomyxoviridae family members that possess segmented, single-stranded RNA genomes that are oriented in the -ve direction. Based on genetic and antigenic variations, IVs are classified into three types: A, B, and C. They infect mammals as well as birds (Nuwarda et al. 2021). IVs pose a constant and serious worldwide hazard to humans and many animal species. Influenza is a highly infectious, acute respiratory illness with worldwide implications that affects people of all ages and can reoccur. Because ducks are the natural reservoir for the disease's etiological agent—the influenza virus—and many other animal species can be affected, the virus cannot be eliminated. As a result, the sickness will continue to resurface regularly (Abramo et al. 2012).

2.3. FILOVIRUSES

Filoviruses are non-segmented negative-stranded RNA viruses of the order Mononegavirales that differ genetically, morphologically, physiochemically, and physiologically from other members of the order Mononegavirales (Languon and Quaye 2019). These are the zoonotic viruses that infect human beings. Filoviruses are thought to be transferred from animals to humans via interaction with reservoir fruit bats (Mekibib and Ariën 2016).

2.4. RABIES VIRUS

Rabies is a neglected zoonotic illness produced by negative-strand RNA viruses of the Lyssavirus genus. Rabies viruses circulate in a wide range of animal reservoir hosts within this genus, are found globally, and are virtually invariably lethal in non-vaccinated humans (Nahata et al. 2021).

2.5. ZIKA VIRUS

The arthropod-borne Zika virus (ZIKV) belongs to the Flavivirus genus and Flaviviridae family of viruses. Many animal species serve as arbovirus reservoirs. ZIKV is often spread by the bite of an infected mosquito (Kuno 2016).

3. VIRAL RESERVOIR AND AMPLIFYING HOSTS

There is extensive pathogen transfer from animals to humans in zoonotic illnesses. Human illnesses are often transmitted by animals through direct contact or vector-mediated transmission. The involvement of animals in the transmission, amplification, and zoonotic overflow of causative agents of developing zoonoses is depicted in Fig. 1.

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Table 1: Transmission route of zoonotic viruses

Zoonotic Viruses	Route of transmission
Coronavirus	Multiple modes of transmission including, direct transmission by physical contact with an infected patient, airborne transmission and indirect transmission through contaminated objects (Dhand and Li 2020)
Filo virus	Human-to-human transmission through direct contact with an infected person, their body secretions (sweat, breast milk), blood and excretions (stool, vomit, semen, urine) (Mekibib and Ariën 2016)
Influenza virus	Transmission through direct contact with an infected person, contaminated hands, aerosol droplets, and indirect transmission via fomites (Asadi et al. 2020)
Rabies virus	Virus transmitted through direct contact between infected saliva and broken skin, or via bite, or ingestion of infected animals (Fisher et al. 2019)
Zika virus	Vector-borne transmission, arthropods transmit the virus from one vertebrate to another, horizontal transmission of infectious saliva during blood feeding, and vertical transmission from mother to child, Via bone marrow and sexually transmitted (Kuno 2016)

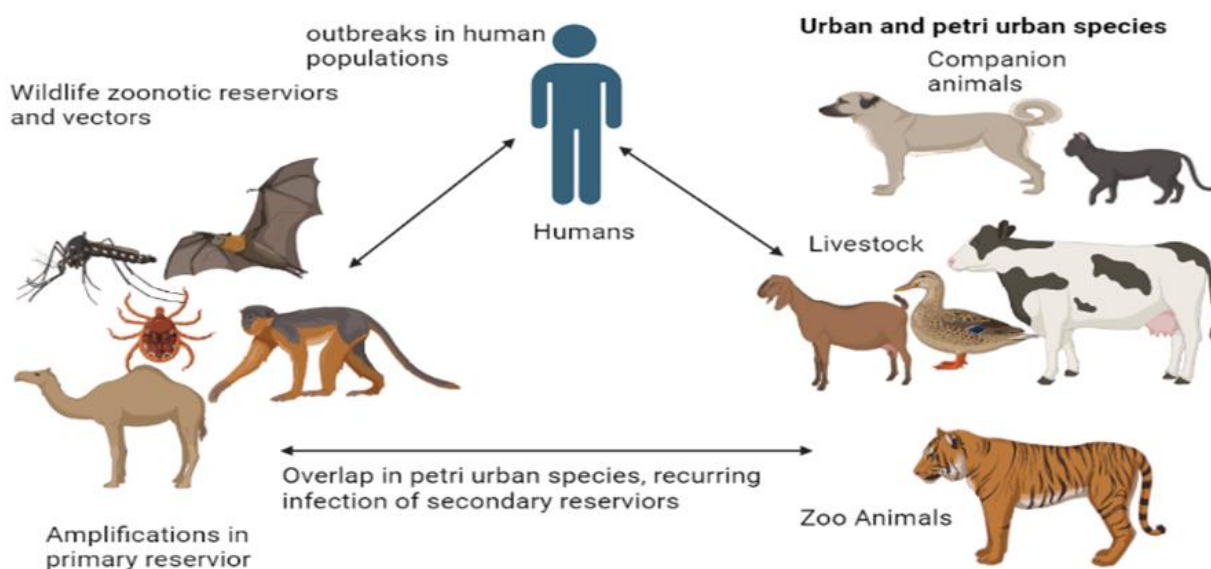


Fig. 1: Represent pathogen transmission between human, wildlife and urban or peri-urban species

Natural reservoirs are the habitat in which infectious disease pathogens live, matures, and multiply. They include humans, animals, and the environment (both alive and dead). Many pathogens live in animals and sometimes jump species to infect humans. Animal reservoirs are made up of pathogen-infected wild and domesticated animals. Animals have been implicated in the spread of zoonotic viral infections to humans. Several bat species have been identified as zoonotic virus reservoirs, including rabies and other lyssaviruses. Domestic dogs are the most common reservoirs, accounting for more than 99% of all human rabies deaths (Tomori and Oluwayelu 2023). Wild ducks, farmed poultry, swine, horses, dogs, and bats are reservoir hosts for influenza virus. Coronavirus is found in a variety of wild and domestic animals (dogs, cats, bats, pangolins, and so on). There have also been reports that palm civet cats (SARS) and dromedary camels (MERS) served as intermediate hosts for the Coronavirus (Singla et al. 2020). According to research, female *Aedes* mosquitoes are the main vectors for ZIKV transmission. Where non-human primates are absent, humans act as important amplification hosts, and transmission occurs mostly in urban and sylvan settings. The latter serves as the amplification host in a sylvatic cycle. As hematophagous arthropods,

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mosquitoes pick up the virus during a blood meal and carry it about for the rest of their lives without getting sick. They convey it to the following amplification host, or their target, during the subsequent blood meal (Gutiérrez-Bugallo et al. 2019). Zika virus was first identified from, ducks, goats, rhesus monkeys, horses, cows, carabaos, bats, domestic sheep, and rodents. Filoviruses are thought to be spread from animals to humans via reservoir fruit bats, intermediate hosts such as great apes, duikers, pigs, or monkeys, and infected individuals who come into touch with bat saliva or feces (Kuno 2016).

4. ZOONOTIC VIRUSES AT THE HUMAN-ANIMAL INTERFACE

Epidemics mostly brought on by infectious diseases spread by animals, particularly wildlife, have long plagued humans. Everyone agrees that the human-animal interface—direct or indirect interactions between humans and animals and their bodily fluids—is necessary for effective cross-species transmission. Fresh food markets where animals that are alive are bought and killed, usually for food or medicine. According to reports, the ongoing COVID-19 outbreak began at the Huanan seafood wholesale market in Wuhan. The availability of live wild animals like snakes, small mammals, and birds at this seafood market increased the risk of zoonotic disease transmission from wildlife to humans (Peters, 2003). In some parts of the world, primarily in tropical regions where livestock is underdeveloped, hunting for wildlife and consuming are still common. This meat is often referred to as "bushmeat," especially in Africa. Wildlife is a key source of protein and/or revenue in these contexts through the selling of meat, large-game tourism, and exchanging items for medicine (Alves and Alves 2011), and it is also valued for traditional hunting and ritual occasions (Walters and Touladjan 2014). In this perspective, any action that involves the manipulation of wildlife species creates an human-animal interface that allows pathogens to spread (Wolfe et al. 2005). Hunters (mostly males) and anybody handling dead animals for cooking or trade (mostly females) are exposed to possible infections found in animal remains and bodily fluids. Bush meat eating has also been linked to the formation of Ebola virus illness, which has resulted in multiple outbreaks in Central Africa over the previous 5 decades, as well as the big epidemic in West Africa from 2013 to 2016, which killed over 11,300 people. Fruit bats were discovered to be a reservoir species, with direct or indirect spillover to humans occurring via an intermediary animal species (Magouras et al. 2020). The worldwide increase in animal-human interfaces and the mixing of diverse kinds of animals in human-compact marketplaces enabled the establishment of new viral infections such as avian influenza H5N1, A/H7N9, SARS, and the present COVID-19 epidemic (Singla et al. 2020). The excessive involvement of Human activities in varied ecosystems has increased the possibility of human-animal encounters. This increases the transfer of infectious and contagious illnesses from animals to people, and subsequently among humans. In most situations, animals serve as reservoirs for viral species, contributing significantly to viral outbreaks. Birds also serve as a reservoir for many viruses and spread infections as they migrate over large areas every year (Mohsin et al. 2021).

5. FACTORS INFLUENCING ZOONOTIC EMERGENCE

There are the following factors play a vital role in the emergence of zoonotic diseases as mentioned in Fig. 2. These are as,

6. CLIMATE CHANGE AND HUMAN HABITAT

Species distributions can fluctuate as a result of large-scale environmental change (e.g., landscape modification and climate change), favoring species responsible for illness initiation and transmission. Temperature and humidity have been demonstrated to be substantially linked with mosquito populations.

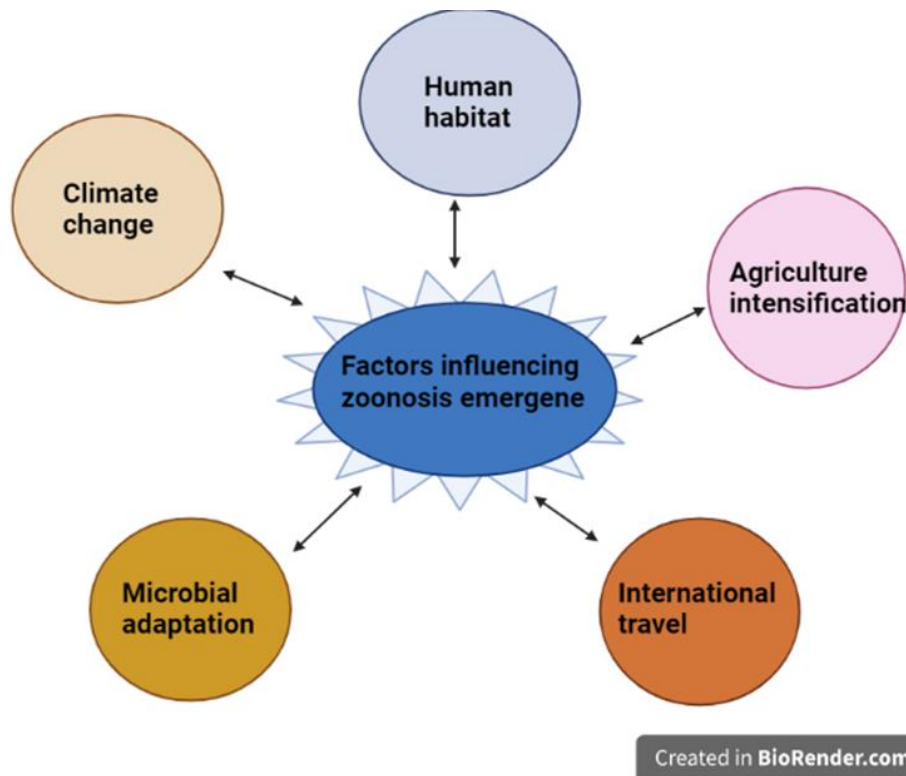


Fig. 2: Represent factors influencing zoonotic emergence

While regular rainfall increases the number of outside bodies of water in which mosquitoes may spawn, dryness causes additional Buildings that store water in populated areas to increase the number of breeding sites that are viable (Xu et al. 2017). Climate has a big influence on vector-borne and water-borne infections. Since vectors of arthropods are most active in high temperatures and lack of water during droughts results in poor sanitation, climate change is predicted to accelerate the spread of illnesses transmitted by vectors and diarrheal diseases in Southeast Asia (Birhan et al. 2015).

Ecotone transition zones between adjacent biological systems are developing as a result of human settlements and agriculture encroaching on natural ecosystems. In these areas, species assemblages from various environments mix. This opens new avenues for disease spread, genetic diversity, and adaptability. The current appearance of bat-associated viruses in Menangle virus, Australian bat lyssavirus, Australia and Hendra virus is linked to habitat degradation caused by deforestation and agricultural growth. Changes in the size, structure of bat colonies, and location as well as feeding in periurban fruit trees, have resulted in increased interaction with livestock and people, raising the risk of disease spillover (Field 2009). Pathogen spillover can be exacerbated by biodiversity loss. Vectors achieve larger disease prevalence in low-diversity populations because they feed more often on main reservoirs. Water management actions may enhance the density of mosquito breeding places (Gottwalt 2013).

7. AGRICULTURE INTENSIFICATION

As the human population grows, agricultural systems will become more dependent on providing food and other resources. The danger of consumers contracting food-borne illnesses increases with rapid growth in meat consumption, particularly from chickens and pigs (Gilbert et al. 2015). Because industrial food animal production systems establish varied wildlife-livestock-human interactions, they raise the likelihood of zoonotic development as agriculture develops (Hassell et al. 2017). In these industrial systems, a high

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number of animals are kept in close physical contact in a limited space, where infections may readily be transferred. Workers on large-scale animal farms and nearby people are particularly vulnerable to harmful bacteria and viruses (White and Razgour 2020).

8. INTERNATIONAL TRAVEL

Increased international travel, particularly without sufficient vaccination and other preventive measures, leads to increased illness among travelers, who then bring the infection back home with them when they return (Fauci 2005). In addition to human migration, increasing animal and livestock trade across borders is concerning. In trading centers, for instance, humans and dozens of different species can be combined prior to there are transported to other sectors, sold on a local level, or even released and sent back into the wild (Birhan et al. 2015).

9. MICROBIAL ADAPTATION

The significance of healthcare system variables as influences, especially about the emergence of newly resistant strains, should not be understated. These factors, in addition to climatic conditions, globalization, global mobility, and trade of environmental and demographic factors, can drive the growth of new illnesses and increase the occurrence, prevalence, or geographic scope of existing ones. Microbes are particularly adept at adapting and changing in the face of selection pressures for survival and replication. In animals and humans, microbes become resistant to antimicrobials used for the treatment of infection (Michael et al. 2014).

10. IMPORTANCE OF SURVEILLANCE SYSTEM AND ONE HEALTH APPROACH

Zoonoses pose a severe health risk to the global society. Surveillance is essential for the prevention and control of zoonotic illnesses. It can detect early illness, sick people and animals, reservoirs, vectors, and endemic areas like "hotspots" (Van der Giessen et al. 2010). To promote human health, manage disease effectively, and reduce mortality and morbidity in humans and animals, it aids in adjusting control strategies against new and reemerging diseases. Pathogen monitoring for the detection and identification of pathogens.

- By monitoring immunological responses, serological surveillance can be utilised to detect diseases in either human or animal blood.
- Syndrome surveillance, which uses analysis of data based on symptoms to identify potential illnesses. The existence of infections cannot be detected by this type of surveillance.
- Risk surveillance to identify risk variables that contribute to disease transmission. This control approach cannot be utilised to identify the clinical characteristics and prevalence of many illnesses (Rahman et al. 2020).

To prevent and control infectious diseases such as zoonotic diseases, international organizations and researchers devised the "One Health Concept" and defined the interaction between humans, animals, and the environment. This paradigm was established to appropriately address global health concerns (Kelly et al. 2017). Microorganisms can be passed from people to animals via contaminated food and direct touch. Ecosystem loss, foodborne illness brought on by consuming animal products, vegetables, tainted water, and fruits, and environmental degradation are all factors and environmental pollution are all relevant issues that cannot be controlled or eliminated by a single sector alone. Because they share an ecosystem, animals, and humans are afflicted by many of the same pathogens (Fig. 3). As a result, One Health's strategy across the animal-human-environment sectors is essential to successfully address these concerns. To promote human and animal health, The One Health approach is used to coordinate disease surveillance, handle

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and avoid zoonotic disease outbreaks, and enhance food security and safety. By promoting vigorous cooperation across key sectors, the One Health concept improves the disease monitoring system, the data exchange method with every stakeholder, diagnostic laboratory systems, and the system to speed up reaction and detection of zoonoses (Erkyihun and Alemayehu 2022).

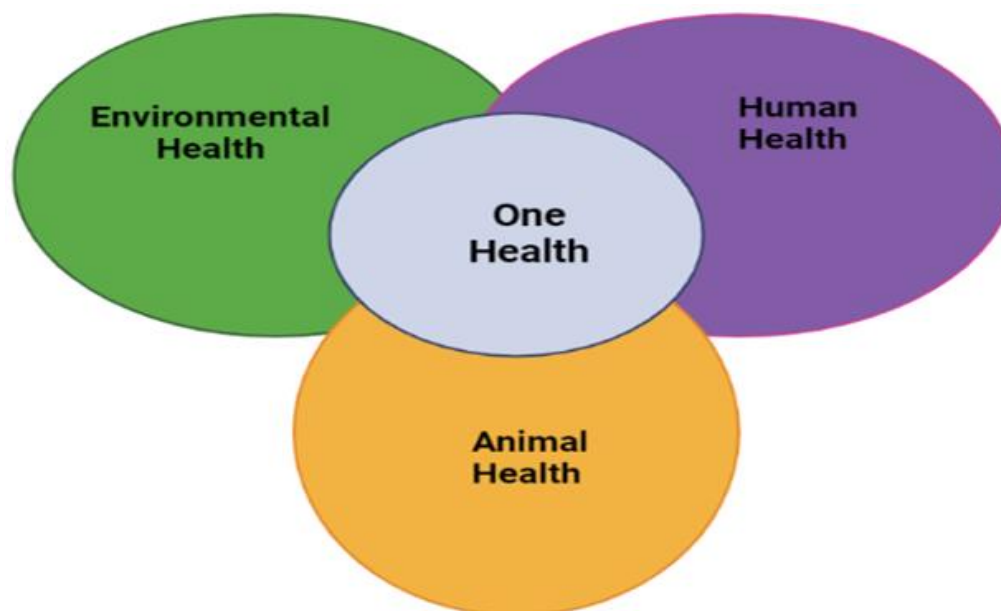


Fig. 3: Elaborate One Health Concept

Emerging illnesses and their fast or subtle spread have troubled societies throughout history. Current generations have suffered the costs of HIV/AIDS, SARS, and MERS, which have resulted in the loss of lives and livelihoods, as well as significant economic consequences. The recent appearance and spread of the ZIKV and COVID-19 show the world is so ill-prepared to respond and manage quickly shifting disease dynamics. The overwhelming majority of emerging infectious diseases, or EIDs, are zoonotic, which means they are brought on by pathogens that are transmitted from animals to people. These diseases kill 10 of thousands of people each year, and the economic costs of a single epidemic can run into the tens of billions of dollars (Shaheen 2022).

Human, animal, and ecological well-being are inextricably linked, and early detection and response to emerging pathogens require an integrated, cooperative, cross-sectoral, multidisciplinary strategy at the regional, local, and global levels. Recent examples of zoonosis include the H1N1 pandemic, influenza H5N1 and H7N9 avian influenza, ZIKV, and EVD (Heymann and Dixon 2013). PREDICT's monitoring system was created in response to the need for a more comprehensive, proactive strategy for preventing pandemics, in which diseases are identified before they start or become out of control among people (Morse et al. 2012). Building an integrated monitoring system that includes humans, animals, and the environment can provide more comprehensive ways to prevent disease spread at the source (Shaheen 2022). PREDICT, which was first adopted in more than 20 countries, increased illness detection and response through 5 major strategies:

1. Developing or improving zoonotic viral detection capability
2. Enhancing diagnostic laboratory capabilities and illness outbreak response capabilities
3. Identifying high-risk human-animal interfaces
4. Improving prediction models for disease onset and dissemination
5. Employing communication and information management systems to create a more incorporated, worldwide approach to sharing zoonotic virus monitoring data (Kelly et al. 2017).

11. CHALLENGES TO CONTROL VIRAL ZOONOSIS

Several obstacles to halting the spread of viral zoonosis have been identified. There aren't many regulations governing cross-sector collaboration, there isn't many medical equipment available (such as masks and goggles), and there aren't many lab facilities for illness assessment. Furthermore, many instances may have been asymptomatic, making it impossible to anticipate when the pandemic would peak and complicating case discovery. Poor information sharing, inadequate management of the animal, human, and environmental health sectors, competing priorities for zoonotic disease prevention and control strategies, a lack of government leadership and funding for One Health, a limited capacity of diagnostic laboratories to identify causal agents, and weak or nonexistent legislation implementing One Health continue to plague most nations (Lee and Brumme 2013). Most universities throughout the world are unable to offer One Health course curricula in veterinary, human, and another field (Fasina et al. 2021). The main challenges of One Health are assorted zoonotic diseases; increased animal-human-environment interaction as human and livestock populations grow exponentially, extremely intimate relationships between wild and domesticated animals that can lead to forest encroachment, quickly expanding urbanization, shifting agricultural practices, the globalization of trade in animal products, and climate change are all factors (Aliyi et al. 2015).

Recent zoonotic outbreak and lesson learned (COVID-19).

Because the COVID-19 pandemic exerts demands on society from all areas of life, both nationally and worldwide, it poses unusual ethical quandaries. Health practitioners must comply with judgements regarding how to assign finite resources, It might cause moral distress and hurt mental health. Everybody must contend with travel restrictions that have caused entire economies to collapse to smooth out the epidemic curve: recent zoonotic epidemics and their lessons. Here, we address some of the ethical and potential lessons quandaries.

This outbreak acts as a sharp reminder of the disparity among individuals who have access to medical care compared to those who cannot and could be forced into hardship as a result in countries without universal health care. Unfortunately, we live in a world where people can die because it is too expensive. It occurs often in sectors such as humanitarian help, road safety and the support of drug development (Hauer 2011). Every nation's healthcare budget will always include a budgetary cap on our attempts to save lives. The goal is for budget allocation to be transparent and inclusive of all stakeholders, governed by the ethical ideals of usefulness and equit (Hughes et al. 2005). Whatever tools are utilized, they must be basic and examined on a frequent basis as the pandemic progresses.

We must be aware that the COVID-19 epidemic will have an impact on mental health. Decisions on resource allocation produce disagreement and mixed feelings in both healthcare providers and the broader public. Ethical discomfort affects us all and must be respected and shared honestly. Those who are stigmatized as disease carriers will suffer psychologically. Chronic stress is caused by racism and prejudice. They are impediments to the realization of equality, a fundamental principle of human rights. Quarantine and travel restrictions Loneliness, bewilderment, resentment, aggravation, boredom, and a persistent sense of inadequacy may come from recommended and approved steps to reduce transmission, such as school and employment closures (Brooks et al. 2020). Children are vulnerable simply because they lack power. Some of these issues may be mitigated by appeals to benevolence.

While our attention is on preserving lives, a severe health risk is posed by economic collapse. For individuals who are struggling financially, access to healthcare will be a major worry, especially given that the pandemic increases the dangers of less secure employment. Although many employers urge employees to work remotely, this is not always an option. A worldwide recession is approaching, and the pandemic will ultimately impact everyone's financial situation (Fernandes 2020).

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Interventions are required to address the issue. We have an ethical responsibility to learn as much as possible as rapidly as possible in order to produce effective health policies, medications, and vaccinations. Researchers, clinicians, ethical committees, administrators, sponsors, and regulators all have a responsibility to confirm that this happens as soon as possible. Protocols can be devised to allow expedited ethics assessment without jeopardizing fundamental ethical concepts such as benevolence, respect for people, and fairness. One possibility is to enable the advance assessment of general research procedures, which can then be promptly changed and reviewed. International relationship can assist assure the feasibility of the research. International collaboration and data exchange are required to expedite clinical trials. We require licensing agreements that span foreign boundaries (Khoo and Lantos 2020).

12. VACCINATION

The rapid appearance of prominent zoonotic viruses in recent decades has become a major source of worry for global public health. Ninety-nine percent of infectious illnesses are caused by zoonotic viruses with a high potential for spread, infecting a vulnerable population with no herd immunity. The development and reemergence of viruses that continually change has considerably expanded the possibility of transmission and immune escape mechanisms in humans. As a result, the only way to avoid viral infection is to utilize vaccinations with enhanced safety profiles and efficacy, which serve as the foundation for contemporary generation vaccines. Animal vaccinations limit disease transmission in companion animals, secure safe food supply by maintaining healthy livestock herds, and act as a significant hurdle to the transfer of several zoonotic illnesses to humans (Gutiérrez et al. 2012). The idea of immunising both domestic and exotic animal species has been put out as a strategy for zoonotic disease animal vaccination programmes. Evolving new and better vaccinations to limit the spread of difficult or developing zoonotic diseases is an essential future research focus (Murphy 2008). The CDC Global Immunisation Strategic Framework in the United States provides guidelines for the CDC's activities over the next 10 years to progress the elimination, eradication and control of vaccine-preventable illnesses (Carpenter et al. 2022).

13. CONCLUSION

Animals are responsible for the majority of infectious illnesses in humans. These illnesses not only make animals sick, but they also jeopardise human health. Growing human-wild animal interaction, changing food patterns, the origin and resurgence of a number of zoonotic illnesses are influenced by factors such as climate change and environmentally harmful human activities. Research concentrating on a certain health strategy must be prioritised in order to discover crucial interventions phases in disease transmission due to the connection of humans, animals, and the environment. Strong multi-sectoral collaboration among medical professionals, veterinarians, environmental health personnel, and agricultural staff is required. To detect zoonoses early and effectively, In order to execute efficient control measures, monitoring must be conducted across all aspects of a single health plan.

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