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# KN03\*: The societal costs of the Dutch Q fever outbreak: evaluation of past and future control strategies

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### Background

In the Netherlands, more than 4,000 human Q fever cases, including 25 fatalities, were notified during the 2007–2010 Q fever outbreak. Veterinary control measures were introduced reluctantly, late and gradually, fearing economic damage to the sector. However, within three years 60,000 dairy goats were culled.

#### Past lessons

Accounting for 85%, human costs are spread over a decade whilst veterinary costs are proportionally small and immediate. Humans develop late complications such as Q fever fatigue syndrome or chronic Q fever, which negatively affects quality of life and productivity.

#### **Future**

By analysing disease dynamics, we developed a Q fever transmission model. Compared to culling or breeding bans for Q fever infected dairy goat farms, costs of retaining the preventative vaccination programme are relatively low. This vaccination programme on Q fever free farms is preferred if the probability of re-infection exceeds once every 15 to 20 years. Only the absence of Coxiella burnetii from both livestock and the environment would warrant a return to non-vaccinated herds. Unfortunately, much remains unknown on the probability and mechanisms of re-infection of goat herds.

#### Conclusion

Q fever poses a serious long-term burden on patients and society. The real impact of a zoonosis outbreak only becomes apparent when combining human health, societal and veterinary costs. Veterinary costs are immediate, apparent and proportionally small. Due to a trickle-down effect over a decade, human cost and societal implications are underestimated. Finding the balance between economic livestock interests and human health remains a challenge when dealing with outbreaks of zoonotic diseases.

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Dr Gabriella Morroy is a medical consultant in communicable disease control at a large municipal health authority ('s-Hertogenbosch) in The Netherlands. As part of a PhD project, she researches the costs of the Dutch Q fever outbreak. Studies include the long-term health status, productivity loss, health-care consumption and serological follow-up of Q fever patients.

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