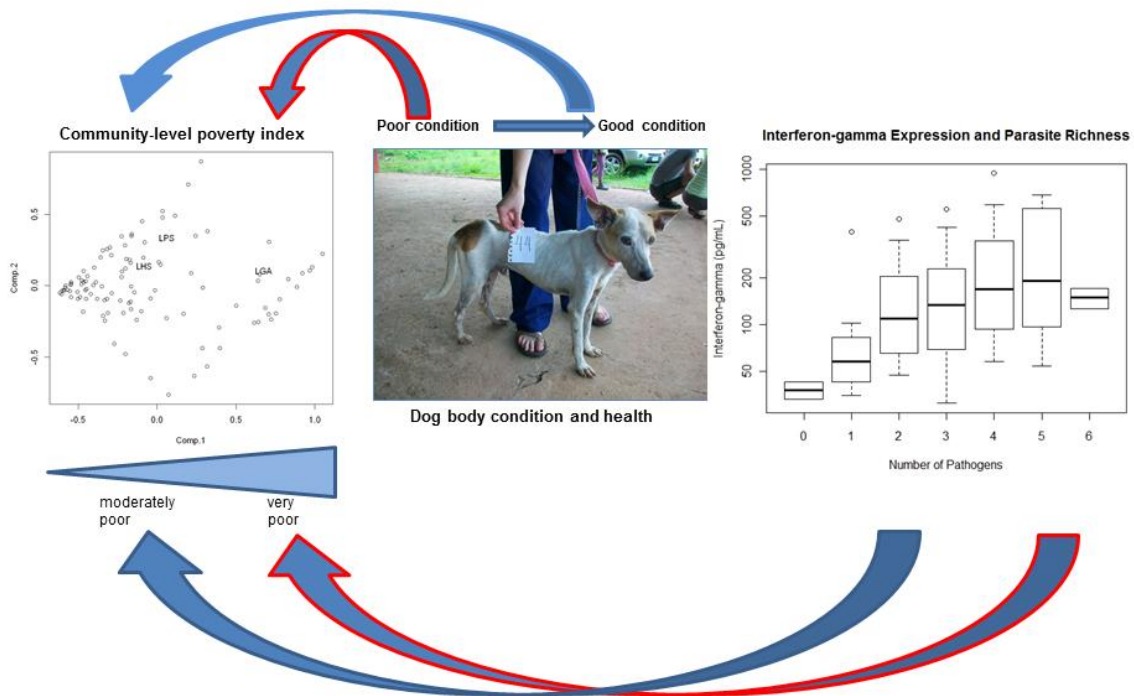


Domestic dog health worsens with socio-economic deprivation of their home communities

H.L. Fung¹, J. Calzada², A. Saldana², A.M. Santamaria², V. Pineda², K. Gonzalez², L.F. Chaves³, B. Garner¹, N. Gottdenker¹

¹Department of Veterinary Pathology, College of Veterinary Medicine, The University of Georgia, Athens, GA, USA ²Department of Parasitology, Instituto Conmemorativo Gorgas de Estudios de la Salud, Panama City, Panama, ³Institute of Tropical Medicine (NEKKEN), Nagasaki University, 1-12-4 Sakamoto, Nagasaki 852-8523, Japan

Evaluating relationships between poverty and dog health, we find that dogs in poor communities are sicker and more likely to be infected with zoonotic pathogens.



Domestic dog health worsens with socio-economic deprivation of their home communities

H.L. Fung¹, J. Calzada², A. Saldana², A.M. Santamaria², V. Pineda², K. Gonzalez², L.F. Chaves³, B. Garner¹, N. Gottdenker¹

¹Department of Veterinary Pathology, College of Veterinary Medicine, The University of Georgia, Athens, GA, USA ²Department of Parasitology, Instituto Conmemorativo Gorgas de Estudios de la Salud, Panama City, Panama, ³Institute of Tropical Medicine (NEKKEN), Nagasaki University, 1-12-4 Sakamoto, Nagasaki 852-8523, Japan

Abstract

Dogs play an important role in infectious disease transmission as reservoir hosts of many zoonotic and wildlife pathogens. Nevertheless, unlike wildlife species involved in the life cycle of pathogens, whose health status might be a direct reflection of their fitness and competitive abilities, dog health condition could be sensitive to socio-economic factors impacting the well-being of their owners. Here, we compare several dog health indicators in three rural communities of Panama with different degrees of socio-economic deprivation. From a total of 78 individuals, we collected blood and fecal samples, and assessed their body condition. With the blood samples, we performed routine hematologic evaluation (complete blood counts) and measured cytokine levels (Interferon- γ and Interleukin-10) through enzyme-linked immunosorbent assays. With the fecal samples we diagnosed helminthiases. Dogs were also serologically tested for exposure to *Trypanosoma cruzi* and canine distemper virus, and molecular tests were done to assess *T. cruzi* infection status. We found significant differences between dog health measurements, pathogen prevalence, parasite richness, and economic status of the human communities where the dogs lived. We found dogs that were less healthy, more likely to be infected with zoonotic pathogens, and more likely to be seropositive to canine distemper virus in the communities with lower economic status. This study concludes that isolated communities of lower economic status in Panama may have less healthy dogs that could become major reservoirs in the transmission of diseases to humans and sympatric wildlife.

Keywords: domestic dog; zoonotic diseases; body condition; health assessment; poverty-disease; body condition; Panama; tropical; wildlife diseases; *Trypanosoma cruzi*; Canine distemper; helminthiasis

Introduction:

Because humans, domestic animals, and wildlife commonly share pathogens, targeting domestic animal populations for detection and control of zoonotic diseases (e.g. canine rabies vaccination) can minimize transmission to human populations and is often a more cost effective and feasible alternative to interventions in human populations, as animals are commonly reservoirs for zoonotic infections. Surveillance and control of domestic animal pathogens is also important to wildlife conservation and management efforts, because domestic animals can be reservoirs for pathogens that can negatively impact wildlife populations. For instance, domestic animal pathogens have been found to have a high transmission risk and negatively impact wildlife carnivore populations (Cleaveland and Dye 1995, Cleaveland et al. 2000, Fiorello et al. 2006, Butler et al. 2004, Zinsstag et al. 2011).

The probability that an animal will be a good reservoir for a pathogen is dependent on complex interactions between extrinsic factors (ecological conditions outside the host body, e.g. nutritional resource availability, habitat structure, vector presence, climate) and intrinsic factors (internal mechanisms within the host body, e.g. genetics, sex, age, innate/adaptive immunity, coinfections with other pathogens) (Wakelin 1975, 1978, Wakelin 1996, Christe et al. 2000, Bize et al. 2008, Molyneux et al. 2011). The overall nutritional condition of a host could impact its ability to fight off infection, and hosts with underlying poor condition may be more susceptible to infectious disease, which in turn causes the host's body condition to further deteriorate, leading to a vicious cycle of negative feedback on animal health (Beldomenico et al. 2009, Beldomenico and Begon 2010). This negative feedback cycle between animal health and infectious diseases can exacerbate disease, making less healthy animals more likely to be infected with pathogens (Craig et

al. 2008, Beldomenico and Begon 2010).

1
2 Similarly, human poverty and infectious disease can be related in a positive feedback cycle,
3
4 because limited resources or social marginalization associated with poverty may lead to increased
5
6 susceptibility to infectious disease due to a variety of ecological and nutritional factors (Factor et al.
7
8 2013, Bonds et al. 2010, Chaves et al. 2008, Karpati et al. 2002, Levins and Lopez 1999, Levins
9
10 1995). Although there are theoretical and empirical studies that explore relationships between
11
12 poverty and disease in human populations (Plucinski et al. 2012, 2011, Chaves 2008), there is little
13
14 attention given to the impact that human poverty may have on veterinary health, and how declines
15
16 in animal health are related to human poverty.
17
18
19
20
21

22 Because dog and human health are closely linked, we would expect dogs living in high-
23
24 poverty communities to receive little or no veterinary care (due to lack of owner resources to pay
25
26 for care or lack of transportation to a veterinary clinic) and may receive less or poor quality food to
27
28 eat in the households under economic duress. Domestic animals can also be impacted by infectious
29
30 diseases and poverty levels. For instance, dogs and cats in impoverished Chilean regions have been
31
32 found to have a higher infection rate of zoonotic diseases than dogs and cats in wealthier areas of
33
34 Chile (Lopez et al. 2009, Schneider et al. 2011). In rural Panama and elsewhere, dogs are reservoirs
35
36 for diseases that include trypanosomiasis, leishmaniasis, helminthiases (both intestinal and visceral
37
38 larval migrans), scabies, Leptospirosis, and toxoplasmosis (Etheredge et al. 2004, Cardinal et al.
39
40 2007, Dantas-Torres 2007, Labruna et al. 2009, Deplazes et al. 2011, Jenkins et al. 2011, Petersen et
41
42 al. 2011, Teichmann et al. 2011); however, little is understood about relationships between
43
44 infectious diseases of domestic dogs, health status, and dog owner economic status.
45
46
47
48
49
50
51

52 The objectives of this study are 1) to evaluate dog health status in a rural area of Panama by
53
54 measuring body condition, hematological and immunological parameters (Th1 and Th2 cytokine
55
56 production), and infection with a diversity of macro and microparasite pathogens (especially those
57
58 important to human and/or wildlife health in the studied area), 2) to evaluate relationships between
59
60
61
62
63
64
65

1 these canine health indicators, pathogen diversity, pathogen type, and socioeconomic deprivation at
2 a community level.
3

4 First, we measure canine exposure to *Trypanosoma cruzi*, the causative agent for Chagas
5 disease, intestinal helminths (hookworms and roundworms), and canine distemper. Chagas disease
6 is a significant cause of morbidity and mortality in Latin America, with approximately 10 million
7 people infected and an additional 60 million people at risk (Tarleton et al. 2007, Hotez et al. 2008).
8 *T.cruzi* is transmitted from a variety of wild and domestic mammalian reservoir hosts, including
9 dogs (Cohen & Gurtler 2001) to humans by the kissing bug vector (family *Reduviidae*). Soil
10 transmitted helminths, particularly roundworms and hookworms, can be zoonotic, and can cause
11 illness or hindrances to physical and mental growth in children (Dujardin et al. 2010). Canine
12 distemper virus is a pathogen that can be transmitted from domestic dogs to wildlife carnivores with
13 potentially high morbidity and mortality (Munson et al. 2008).
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

29 Second, we evaluate canine health indicators (body condition, hematology, and cytokine
30 production). We expect dogs in lower body condition to have higher number pathogenic infections.
31 Because of the many pathogens co-occurring in rural Panama (Pineda et al. 2011, Saldaña et al.
32 2013), we expect dogs in poor health to have hematological abnormalities (e.g. anemia,
33 leukocytosis or leukopenia), and an increased immune response to polyparasitism. For example,
34 intracellular microparasites, such as *Mycobacterium*, stimulate the Th1 arm of adaptive immunity,
35 allowing increased secretion of Th1 cytokines (TNF-B, IFN-g). On the other hand, a Th2 immune
36 response (cytokines IL-4, IL-5, IL-10, IL-13) may dominate after host infection with macroparasites
37 (Abbas et al. 2012). The cytokines measured in the study are Interferon- γ (Th1 arm of adaptive
38 response, expected to be high in the presence of *T. cruzi* and CDV infections) and Interleukin-10
39 (Th2 arm of adaptive response, expected to be high in the presence of parasitic worms).
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56

57 **METHODS**

58 **Study design:**

59
60
61
62
63
64
65

1 The study was conducted in Chagas disease endemic rural communities of Lagartera Grande (9° 6'
2 25N, 79° 54' 19W), Las Pavas (9° 6' 15N, 79° 53' 9W), and Los Hules (9° 3' 27N, 79° 59' 37W), all
3 located west of the Panama Canal and approximately 40 km northwest of Panama City (Figure 1).
4
5 Because of the cyclical feedback between heath and parasites, we conducted a cross-sectional
6 observational study on community-volunteered domestic dogs for pathogen infection to test our
7
8 hypotheses. The pathogens selected for this study were Canine Distemper Virus (CDV),
9
10 *Trypanosoma cruzi* (causative agent for Chagas disease), canine heartworm (*Dirofilaria immitis*),
11
12 and intestinal helminths (hookworm, roundworm, whipworm, and tapeworms). Rabies was
13
14 excluded from this study as Panama has been free of canine rabies since 1972 and human rabies
15
16 since 1973 (Belotto et al. 2005). This community of pathogens was selected as we were interested
17
18 in evaluating both directly transmitted and vector borne diseases that can infect humans, wildlife,
19
20 and domestic animal populations.
21
22
23
24
25
26

27 ***Dog sampling***

28
29 ***Health assessment:*** Dogs were recruited by a local health official of the three regions; signs were
30
31 placed around the communities the week prior to sampling days to inform community members that
32
33 vaccination clinics were being held. Samples from 78 dogs were collected across three communities
34
35 (27 from Lagartera Grande, 25 from Las Pavas, and 26 from Los Hules), on May 29, June 4, and
36
37 June 11, 2011, respectively. The dogs sampled from each community were estimated to be between
38
39 50-60% of the population of dogs in the community, based on visual counts and owner interviews.
40
41 This proportion is powerful enough to make inferences about the prevalence of pathogens in each
42
43 community, assuming a population size equal or less than 60 dogs per village, which given the lack
44
45 of any prior information, requires a minimum sample size of 26 dogs to have prevalence estimates
46
47 of 50% with a 15% precision (Kish, 1965).
48
49
50
51
52
53
54
55
56

57 Dogs were manually restrained and 3-5 mL of blood were collected from each dog from the
58
59 cephalic vein. Whole blood was used for the Trypanosoma Detect™ Rapid Test, IDEXX
60
61
62
63
64
65

1 Hearworm Snap® Test, and blood smears. Remaining blood was stored in serum red top tubes and
2 centrifuged at the lab to be separated and aliquoted for CBC for hematology analysis, ELISAs for
3 cytokine detection, and DNA extraction for PCR. Ectoparasites were assessed for presence or
4 absence and collected in 70% ethanol.
5
6

7
8
9 *Body condition scoring:* Body condition of each subject was assessed by sight and touch (spine and
10 ribs). The body condition scored was based on the 9 point Body Condition Scale developed for dogs
11 and cats (Baldwin et al. 2010). A score between 1-3 was considered too thin (emaciated, muscle
12 mass loss, ribs, lumbar and pelvis easily visible and palpated), a score of 4-5 was considered ideal
13 (ribs palpable but with some fat covering, abdominal tuck visible), and a score between 6-9 was
14 considered too heavy. Figure 2 shows a dog that was considered too thin with a body condition
15 score of 1. Age of the dog was estimated based on dental wear as specified in Merck's Veterinary
16 Manual (Siegmond and Merck & Co. 1955). The body condition score was then used as an indicator
17 for health (Petersen et al. 2001). Sex of each animal was also recorded.
18
19
20
21
22
23
24
25
26
27
28
29
30

31
32 *Hematology:* Blood samples from each dog were taken from the cephalic vein, centrifuged and sent
33 out to a local veterinarian for a Complete Blood Count to assess hematological status. Blood panels
34 (total white blood cell, red blood cell, hemoglobin, mean hemoglobin concentration, mean cell
35 volume) were analyzed using a CD-1700 Cell Dyn Analyzer and packed cell volume was evaluated
36 by centrifugation of capillary tubes. Reference ranges for canine panels were taken from Schalm's
37 Veterinary Hematology (Weiss et al. 2010). These reference values have wide range to take into
38 account variations among dogs from many different locations, and were within the values for
39 healthy dogs reported in Colombia (Bossa-Miranda et al. 2012). Anemia was characterized by
40 decreases in one or more of the following: red blood cell (RBC) count ($\times 10^6/\mu\text{L}$; reference interval
41 $5.5\text{-}8.5 \times 10^6/\mu\text{L}$), hemoglobin (HGB, mg/deciliter; reference interval 12.0-18.0 mg/dL), and packed
42 cell volume (PCV, 37.0-55.0%). White blood cell counts were considered normal between the
43 range of 5,500 and 19,500 leukocytes/ μL . 100 cell differential white blood cell counts were also
44 performed on freshly prepared, Wright-Giemsa stained blood smears.
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60
61
62
63
64
65

1 *Cytokine assays:* Canine specific enzyme-linked immunosorbent assay tests for Th1 cytokines (e.g.
2 Interferon- γ) and Th2 (Interleukin-10) were performed on collected serum (Canine IL-10 and IFN- γ
3 Quantikine™ ELISA Kits, R&D Systems, Minneapolis MN) following manufacturer's
4
5 recommendations. For the Interferon- γ , the manufacturer's reported sensitivity (based on 17 assays)
6
7 was a mean minimum detectable dose of 25 pg/mL, with a range of 8-16 pg/mL, and no cross-
8
9 reactivity was observed with recombinant canine IL-4, IL-6, IL-8, IL-10, GM-CSF, MCP-1, TNF- α ,
10
11 or VEGF. For IL-10, the manufacturer's reported sensitivity (based on 20 assays) was a mean
12
13 minimum detectable dose of 2pg/mL with a range of 1-2.8 pg/mL and no cross reaction was
14
15 observed with recombinant canine IFN- γ or IL-4.
16
17
18
19
20

21 ***Microparasite detection***

22
23
24 *T. cruzi detection:* *T. cruzi* was detected by 4 methods. The first was a *T. cruzi* antibody test
25
26 (Trypanosoma Detect™ InBios International Incorporated, Seattle, WA). The Trypanosoma
27
28 Detect™ is a canine specific immunochromatographic dipstick derived from *T. cruzi* antigens
29
30 designed for the determination of antibodies of *T. cruzi* (sensitivity 100%, specificity 95%).The
31
32 second method of *T. cruzi* detection was obtained through blood smears. The third method for
33
34 detection was PCR using extracted DNA from the collected blood sample to search for trypanosome
35
36 DNA fragments in host blood. The final method for *T. cruzi* detection was through blood culture for
37
38 live trypanosomes.
39
40
41
42
43
44

45 *Canine Distemper Virus (CDV):* CDV was detected at the University of Georgia Diagnostic Lab
46
47 using collected serum with a serum neutralization assay. The highest dilution showing complete
48
49 neutralization of the virus is considered the endpoint titer of the antibody. A titer of at least 1:4 was
50
51 considered positive for antibodies for CDV.
52
53

54 ***Macroparasite detection***

55
56
57
58
59 *Endoparasites-intestinal helminth detection:* Fecal samples were obtained using fecal loops and
60
61 placed in 1 mL Eppendorf tubes with formalin for approximately 48 hours. Intestinal helminth
62
63
64
65

infection was detected by fecal flotation analysis using a sugar solution with a specific gravity of

1.27. Helminths were identified by type – hookworm (*Ancylostoma* or *Uncinaria spp*), roundworm (*Ascaris spp* or *Toxocara spp*), tapeworm (*Dipylidium spp*) (Roberts & Janovy 2000) but not to the species level.

Ectoparasite detection: We combed the dog for fleas and ticks to evaluate infestation. For dogs infected with fleas, we attempted to catch them, and ticks were removed. Fleas and removed ticks were stored in in a 1 mL eppendorf tube in 10% ethanol for further identification.

Canine Heartworm Detection: IDEXX SNAP® Heartworm tests (Canine SNAP Heartworm Test, IDEXX Laboratories International, Westbrook ME) and blood culture was used to detect *D. immitis*. The SNAP® test has a sensitivity of 84 (78-89), specificity of 97 (84-100), and accuracy of 86 (81-90).

Total parasite richness and parasite types

The total number of pathogens was counted for each dog. Parasite type was broken down into two groups: zoonotic (*T. cruzi*, hookworms, roundworms, tapeworms) or potential wildlife pathogens (CDV, *T. cruzi*, hookworms, roundworms, tapeworms). Because dogs can be a reservoir of *T. cruzi*, (Gurtler et al. 2007), this pathogen is considered zoonotic. Regarding other pathogens considered zoonotic, canine hookworms can cause creeping eruption (cutaneous larval migrans) in humans and roundworms can cause visceral larval migrans in humans (Robertson and Thompson 2002, Robertson et al. 2000). Humans can accidentally acquire tapeworm infections from dogs by accidental ingestion of *Dipylidium caninum* fleas containing the infective stage of the parasite (Robertson and Thompson 2002). Canine distemper is a generalist virus of canids that can be transmitted from domestic dogs to wild carnivores, such as coati mundis, raccoons, (Kapil and Yeary 2011, Alexander et al. 2010). Canine hookworms and roundworms can be shared between domestic and many wild carnivore species (Wapenaar et al. 2013), and occasionally cause aberrant larval migrations in a variety of wildlife species, and tapeworm species may be shared or

transmitted from domestic dogs to wild carnivores (Viera et al. 2012). Total parasites was a total count of number of different types of parasites, irrespective of type or species (i.e. a dog that had tested positive for hookworms, roundworms, and CDV had a total parasite count of 3).

Census data and poverty quantification.

Census data were obtained from the publically available Panama government database at the National Institute of Statistics and Census (<http://www.contraloria.gob.pa/inec/>). Census data were used to compare economic status of the communities. Table 1 shows the breakdown of households in each community with respect to floor material, availability of drinkable water, and electricity. Lagartera Grande has the most houses with dirt floors, without drinkable water and electricity, and was considered the most economically disadvantaged community. To quantify poverty we developed a poverty index by performing a principal component analysis (PCA) on the three variables described in Table 1 and considering the 125 rural villages in La Chorrera county of Panamá Province, Republic of Panamá.

Statistical Analysis:

Statistical analysis was conducted in R (The R Foundation for Statistical Software; <http://www.r-project.org>, version 2.13.1).

We examined the association of body condition score and site, positive/negative of *T. cruzi*, presence/absence of helminths (for all helminths and individual helminths type), positive/negative distemper, presence/absence of zoonoses, and wildlife parasite using a Kruskal-Wallis nonparametric test and Mann-Whitney U test when applicable. We employed these non-parametric tests given the nature of our data, which was mostly presence/absence and scores, quantities best suited for non-parametric statistics. We also compared the association between site and parasite diversity and presence/absence of zoonotic pathogens using Contingency table analyses). Spearman correlation was used to examine the association for body condition and total number of parasites (parasite richness), Interleukin-10, and Interferon- γ cytokine expression (Conover 1999).

1 Multiple correspondence analysis was also used to evaluate relationships between site and a variety
2 of other categorical variables related to dog health and pathogen exposure. Multiple correspondence
3 analysis allows for the visualization of associations between two or more categorical variables. The
4 data set is decomposed and then the data is commonly projected in two dimensions representing
5 two singular vectors with the largest values. Categorical variable centroids can be plotted and the
6 proximity between different variables allows for the evaluation of the association between levels of
7 categorical variables (Venables & Ripley 2002). We evaluated the following relationships: site,
8 anemia, and distemper infection, and zoonotic pathogen presence. Finally, we compared the
9 association of body condition score and zoonotic parasites, wildlife parasites, and immune response
10 through cytokine data across the three sites using generalized linear models.
11
12
13
14
15
16
17
18
19
20
21
22

23 **Results:**

24 *Health parameters: body condition, hematology, and parasite prevalence*

25 *Body condition*

26
27 The overall mean body condition score was found to be 3.2, 95% CI [2.97, 3.44], with Lagartera
28 Grande (LGA) at 2.6, 95% CI [2.30, 2.89], Las Pavas (LPS) at 3.2, 95% CI [2.66, 3.66], and Los
29 Hules (LHS) at 3.9, 95% CI [3.60, 4.17]. The total population consisted of 65% males (95% CI
30 [53.98, 75.56]) and 35% females (95% CI [24.44, 46.32]), and the mean age at 30.2 months (95%
31 CI [21.94, 38.47]). There was a significant difference in body condition score between each sites
32 (Kruskal-Wallis test, $\chi^2=22.02$, $df=2$, $p=1.7e-5$).
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48

49 *Hematology*

50
51 Of all dogs across communities, 55.1%, 95% CI [46.02, 82.76] were anemic (67.7% in Lagartera
52 Grande, 52.0% in Las Pavas, and 46.2% in Los Hules). All were classified as likely nonregenerative
53 anemia due to MCV and MCHC within or below reference range, Red Blood Cell (RBC) countsof
54 less than $5.5 \times 10^6/\mu\text{L}$ or HGB less than 12.0 g/dL. Of the 75 dogs we evaluated, 46.7% had a
55
56
57
58
59
60
61
62
63
64
65

leukocytosis, 13.3% were leukopenic, and 52% had normal total white blood cell counts. Thirty two percent of dogs had a neutrophilia, 29.3% of dogs had a lymphocytosis, and 33.3% had an eosinophilia. There was no significant difference of any blood values between sites or univariate relationships between body condition and white or red cell blood values.

Parasite prevalence

Seven dogs tested positive for antibodies to *T. cruzi* (4 from Lagartera Grande, 1 from Las Pavas, 2 from Los Hules). The PCR confirmed two dogs that were positive for *T. cruzi* on the antibody test. Trypanosomes were not detected on blood smears. *T. cruzi* prevalence in LGA was 14.8%, LPS was 4.0%, LHS was 7.7% (95% CIs [4.86, 34.61], [0.21, 22.32], and [1.34, 26.60], respectively). There was no significant difference in *T. cruzi* positive individuals across communities (Chi-square test, $\chi^2 = 1.94$, $df = 2$, $p = 0.38$) but there was significant association between site and presence of helminth infection (Chi-square test, $\chi^2 = 7.9357$, $df = 2$, $p = 0.019$). Additionally, overall seroprevalence of distemper positive individuals was 61.5%, 95% CI [49.80, 72.13], with LGA at 81.5%, LPS at 60.0%, and LHS at 42.3% (95% CIs [61.25, 92.97], [38.89, 78.19], and [23.97, 62.81], respectively). No dogs tested positive for heartworm on the antigen snap test, and an unidentified microfilaria was detected in the blood of one dog by direct microscopy.

PARASITE EFFECT

Parasite richness, infection with zoonotic and wildlife pathogens, and body condition

There was a statistically significant negative association between body condition and total number of different parasite types identified (Spearman's correlation, $\rho = -0.368$, $S = 108193.5$, $p < 0.001$).

Across all dogs, there was no difference between body condition score and the presence or absence of zoonotic parasites (Mann-Whitney U test, $W = 8.812.5$, $p = 0.096$) There was a significant difference between (Mann-Whitney U test, $W = 430.5$, $p = 0.024$) body condition scores in animals and the presence of wildlife parasite infections. Animals that were positive for distemper had a

1 significantly lower body condition score than animals that were distemper negative (Mann-Whitney
2 test, $W=928.5$ $p=0.001$), and there was significant association between site and presence of
3 distemper (Chi-square test, $\chi^2=11.58$, $df=2$, $p<0.0001$). There were, however, no significant
4 differences in body condition and *T. cruzi* presence (Mann-Whitney U test, $W=302.5$, $p=0.33$).
5
6 There was no difference between body condition score and hookworm egg shedding intensity
7 (Kruskal-Wallis, $\chi^2=7.434$, $df=4$, $p=0.15$), roundworm egg shedding intensity (Kruskal-Wallis,
8 $\chi^2=3.70$, $df=4$, $p=0.45$), and tapeworm egg shedding intensity (Kruskal-Wallis, $\chi^2=0.97$, $df=4$,
9 $p=0.92$).

10 *Cytokines and parasite richness*

11 There was a significant association between IFN- γ expression and parasite richness (Figure 3,
12 Spearman's correlation, $\rho=0.344$, $S=51906.04$, $p=0.002$), but there was not a significant
13 association between IL-10 expression and parasite richness (Spearman's correlation, $\rho=0.017$, $S=$
14 77736.8 , $p=0.88$). There was, however, no significant difference between IL-10 expression and
15 presence of zoonotic pathogens (Mann-Whitney U-Test, $W=675.5$, $p=0.89$), IL-10 expression and
16 presence of wildlife pathogens (Mann-Whitney U-Test, $W=261$, $p=0.44$). Nor was there a
17 significant difference between IFN- γ expression and zoonotic parasite presence (Mann-Whitney U-
18 Test, $W=520.5$, $p=0.13$), and IFN- γ expression and wildlife parasite presence (Mann-Whitney U-
19 Test, $W=218.5$, $p=0.15$)
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47

48 *Site Effect*

49 *Poverty indices*

50
51 A poverty index was estimated based on principal components analysis (PCA) of the variables in
52 Table 1 and considering all rural villages in La Chorrera county ($n=125$). The first PC, which
53
54 accounted for 67% of the variability in the PCA, is a weighted average of the three variables
55
56
57
58
59
60
61
62
63
64
65

(Loadings on Table 2, where larger values indicate a more destitute community, thus rendering the 1st PC a reliable poverty index. The higher the index, the more impoverished the community. The poverty index for Lagartera Grande was 0.673, 0.062 for Las Pavas, and -0.082 for Los Hules. By performing the PCA we can also show that LGA is an extremely poor village in the context of this study, but also for La Chorrera county, while LHS is slightly better off than LPS, and both LHS and LPS are far from being as poor as LGA (Figure S1). When developing the index using a PCA we tried more variables, but dirt floors were strongly well correlated with income and other house materials rendering those additional variables not informative for the development of an index.

Body condition and site

There was a significant association between body condition and site (Figure 4, Kruskal-Wallis, $\chi^2=22.023$, $df=2$, $p=1.65e-5$), and a follow up multiple comparisons test showed a significant difference between body condition in Lagartera Grande and Los Hules. A significant difference was found in body condition between Lagartera Grande (LGA) and Las Pavas (LPS, $p=0.02$) and between Lagartera Grande and Los Hules (LHS, $p=0.001$). GLM results predicted a significantly higher body condition dogs from in Los Hules ($p<0.001$) compared to those in Las Pavas and Lagartera grande.

Parasite richness, zoonotic, and wildlife diseases and site

While there was a statistically insignificant association between site and parasite richness (Chi-square test, $\chi^2=16.2$, $df=12$, $p=0.18$), there was a significant association between site and the presence of zoonotic parasites (*T. cruzi*, hookworms, roundworms, Chi-square test, $\chi^2=12.00$, $df=2$, $p=0.0025$), but no significant association site and parasites of concern to wildlife populations (Chi-square test, $\chi^2=6.16$, $df=4$, $p=0.19$). However, we did find a significant association between site and presence of distemper virus (Chi-square test, $\chi^2=11.58$, $df=2$, $p=0.0031$).

Multiple correspondence analysis of the relationships between zoonotic pathogen presence, site, anemia, and distemper show (Figure 5) a relatively close association between dogs not carrying

1 zoonotic infections and residing in the wealthiest community (LHS), an association between canine
2 distemper and site (LGA), with less wealthy communities (LGA and LPS) associated with dogs
3 infected with zoonoses.
4

5 6 *Cytokine expression and site*

7
8
9
10 There was statistical significance between IFN- γ expression and site (Kruskal-Wallis, $\chi^2=51.1$,
11 $df=2$, $p=8.01e-12$) (Figure 6) but there was not a significant association between IL-10 expression
12 and site (Kruskal-Wallis, $\chi^2=0.625$, $df=2$, $p=0.732$)
13
14
15
16
17

18 **Discussion:**

19
20
21 This study examines relationships between poverty, pathogen richness, and domestic animal health.
22
23 The conclusions of the study are that 1) dogs with lower body condition and higher plasma
24 interferon gamma levels were found in more impoverished communities, 2) dogs with lower body
25 condition had higher parasite richness and also increased cytokine response, and 3) dogs in the
26 region of La Chorrera, Panama have the potential to harbor and transmit diseases to humans and to
27 wildlife, particularly those dogs in poor body condition.
28
29
30
31
32
33
34
35
36

37 In our study, polyparasitism was greater in animals with lower body condition. Body
38 condition is an important aspect of health that can influence an animal's ability to fight off
39 infection, and nutrition may have an impact on body condition. Constant feeding of mice with
40 nematode infections, while prolonging nematode survival, has been shown to increase weight gain
41 and allowed for parasite clearance in the host (Tu et al. 2007). A balanced diet provided to
42 schoolchildren in Burkina Faso, Africa has also been shown to decrease the prevalence of intestinal
43 helminths such as hookworms, roundworms, and tapeworms (Sanou et al. 2010). Disease-driven
44 poverty traps are formed when income near poverty levels and infectious disease conditions
45 interact, and theoretically can be released by improving the health condition of the population
46 (Bonds et al. 2010). Because body condition was strongly correlated with site and total number of
47 parasites is associated with site, we may infer that malnutrition may be contributing to these higher
48
49
50
51
52
53
54
55
56
57
58
59
60
61
62
63
64
65

domestic dog parasite loads.

1
2 Overall, dogs in communities of poorer economic status were less healthy than dogs found
3
4 in communities with a relatively higher economic status. With dirt floors, lack of potable water, and
5
6 lack of electricity as an indicator for poverty, Lagartera Grande was found to have the lowest body
7
8 condition, highest prevalence of parasites, highest proportion of anemic animals, and
9
10 (observationally) was the most isolated community sampled, approximately 10 km from a main
11
12 road with bus access, and the main access road to Lagartera Grande is unpaved and frequently
13
14 inaccessible by car during the rainy season. Isolated communities may not have access to the same
15
16 resources such as food and medicine for their animals as communities closer to areas with better
17
18 infrastructure, and owners may not be able to afford adequate food or veterinary care for their pets.
19
20 Future studies should include surveys of domestic dog care among communities in relationship to
21
22 socioeconomic marginalization. Additionally, there may be cultural differences in pet rearing and it
23
24 is possible that the majority of rural inhabitants, regardless of economic status, do not customarily
25
26 take pets to the veterinarian for routine care. Dogs must be vaccinated for rabies in Panama by law,
27
28 and other pathogen vaccinations are likely to be rare in poorer rural communities such as the ones
29
30 studied.
31
32
33
34
35
36
37
38

39 Because there was an association between site and distemper infection, and Lagartera
40
41 Grande had the highest seroprevalence of distemper (81.5%, 95% CIs [61.25, 92.97]), that
42
43 community has a greater potential to spread distemper to wildlife carnivores. Lagartera Grande is
44
45 located adjacent to protected forests of the Gigante Peninsula, part of Barro Colorado National
46
47 Monument, and the probability for disease transmission may potentially be due to wildlife spillover
48
49 ([Kapil and Yeary 2011](#)), and also from domestic dog spillover ([Acosta-Jamett et al. 2011](#)). The
50
51 proximity of Lagartera Grande to protected forests and the distemper seroprevalence in the
52
53 community may pose a risk to wildlife carnivores, where CDV has higher morbidity and mortality
54
55 in other wildlife species ([Appel and Summers 1995](#)). It has been speculated that in this region
56
57 peccaries may be particularly susceptible to CDV, though this has yet to be studied and confirmed
58
59
60
61
62
63
64
65

1 in the study region. Additionally, dogs can transmit generalist intestinal helminths by defecating out
2 in areas where wild mammals can come into contact with infective eggs. Dogs are often used for
3 hunting and can even come into contact with wildlife through territorial conflicts (Fiorello et al.
4 2006).
5
6

7
8
9 Zoonoses is a concern due to the economic status of La Chorrera county and neglected
10 tropical diseases. Dogs in Las Pavas were less likely to be infected with zoonotic pathogens (Figure
11 5) than dogs in the communities that were less wealthy. While we did not find a strong significant
12 correlation between body condition or site and *T. cruzi* infection, previous research has shown that
13 malnutrition of dogs in Argentina lead to higher rates of canine *T. cruzi* infectivity to feeding
14 vectors (Petersen et al. 2001). If sampling was continued, we may potentially see a similar trend
15 given the current study's sample size was too small to detect an association between body condition
16 and *T. cruzi* infection.
17
18
19
20
21
22
23
24
25
26
27

28
29 Arthropod vector-borne diseases (i.e. Chagas Disease) and soil and tissue transmitted
30 helminths (i.e. hookworms and roundworms), many of which are zoonotic, have been identified by
31 the Pan American Health Organization as the first and second major groups of neglected tropical
32 infectious diseases in the Latin American and Caribbean region, respectively (Dujardin et al. 2010).
33
34
35
36
37
38
39 Dogs in poorer health may be more likely to serve as potential reservoirs for zoonotic and wildlife
40 pathogens, and thus pose more of a risk to human and wildlife populations.
41
42
43
44

45 Because there was a significant negative association between body condition and cytokine
46 expression, we may infer that dogs that are less healthy are more likely to have an increased
47 cytokine inflammatory response. Lagartera Grande had the most significant levels of IFN- γ
48 expression, which may be an indicator that the immune systems of the dogs are being challenged
49 more so than the other sites. This may potentially be associated with a recent distemper outbreak in
50 the community or polyparasitism. Therefore, it is difficult to distinguish if the increased IFN- γ
51 levels are correlated with the overall health of the dog or recent distemper outbreak. Further
52
53
54
55
56
57
58
59
60
61
62
63
64
65

1 directions on this portion of the study would be to complete a more comprehensive cytokine profile
2 in dogs across the communities, in addition to further field sampling in these communities to
3 compare levels of IFN- γ and distemper. The interaction between Th1 and Th2 cytokine expression
4 tradeoff can also be looked within the context of multiple/coinfections, and this could be
5 accomplished with additional sampling as well.
6
7
8
9

10
11 Although Lagartera Grande harbored the greatest proportion of anemic dogs, significant
12 proportion of dogs (55%) across all communities were anemic with a non-regenerative anemia.
13 Non-regenerative anemia can be due to chronic parasitism or other chronic infection (Weiss et al.
14 2010). Underlying causes for the WBC abnormalities seen in the dogs are uncertain, but
15 eosinophilia is often attributable to ectoparasites or other macroparasites, such as helminths (Fabre
16 et al. 2009). Leukocytosis and lymphocytosis may be due to epinephrine-mediated responses
17 associated with blood collection or in some instances, inflammation.
18
19
20
21
22
23
24
25
26
27
28

29 Despite limitations, the conclusions of the study that more rural, isolated, impoverished
30 communities have domestic animals with higher pathogen richness and greater potential to spread
31 diseases to humans and wildlife, are informative for poverty-related diseases and recommendations
32 for prioritizing targeted communities for possible disease control strategies. Because of the risk
33 dogs pose for zoonotic and wildlife diseases, domestic animal health must be considered together
34 with information on owner economic status to develop disease control strategies, particularly in
35 developing countries, countries of low economic status, or with large degrees of economic
36 inequality.
37
38
39
40
41
42
43
44
45
46
47
48

49 **Acknowledgements:** This work was supported by a UGA Latin American and Caribbean Studies
50 Tinker Summer Travel Award to HM Fung, the University of Georgia (1011RX208068 12 GTT),
51 and the Gorgas Institute for Health Research. Jose Calzada and Azael Saldaña are members of the
52 Sistema Nacional de Investigación, SENACYT. Luis Fernando Chaves was funded by Nagasaki
53 University (Program for Nurturing Global Leaders in Tropical and Emerging Communicable
54
55
56
57
58
59
60
61
62
63
64
65

Diseases). Research was approved by UGA IACUC number A2011 03-046-Y3-A1 . We thank the Gorgas Memorial Institute department of Parasitology department. We thank Sr. José Montenegro, Sr. Roberto Rojas, Chystrie A. Rigg, Dr. Stephanie Dietzel, and Dr. Jamie L. Barnabei for their outstanding help in the field.

References

- Abbas, A. K., Lichtman, A. H., Pillai, S. 2012. Cellular and molecular immunology. 7th edition. Saunders/Elsevier, Philadelphia.
- Acosta-Jamett, G., Chalmers, W. S., Cunningham , A. A., Cleaveland, S., Handel, I. G., Bronsvoort, B. M. 2011. Urban domestic dog populations as a source of canine distemper virus for wild carnivores in the Coquimbo region of Chile. *Vet Microbiol* **152**:247-257.
- Alexander, K.A., McNutt, J.W., Briggs, M.B., Standers, P.E., Funston, P., Hemson, G., Keet, D., van Vuuren, M., 2010. Multi-host pathogens and carnivore management in southern Africa. *Comparative immunology, microbiology and infectious diseases* **33**, 249-265.
- Appel, M. J., Summers, B. A. 1995. Pathogenicity of morbilliviruses for terrestrial carnivores. *Vet Microbiol* **44**:187-191.
- Baldwin, K., Bartges, J., Buffington T., Freeman, L. M., Grabow, M., Legred, J., Ostwald, D. 2010. AAHA Nutritional Assessment Guidelines for Dogs and Cats. *Journal of the American Animal Hospital Association* **46**:285-296.
- Beldomenico, P. M., Begon, M. 2010. Disease spread, susceptibility and infection intensity: vicious circles? *Trends Ecol Evol* **25**:21-27.
- Beldomenico, P. M., Telfer, S., Gebert, S., Lukomski, L., Bennett, M., Begon, M. 2009. The vicious circle and infection intensity: the case of *Trypanosoma microti* in field vole populations. *Epidemics* **1**:162-167.

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60
61
62
63
64
65

Belotto, A., Leanes, L. F., Schneider, M. C., Tamayo, H., Correa, E. 2005. Overview of rabies in the Americas. *Virus Res* **111**:5-12.

Bize, P., Jeanneret, C., Klopfenstein, A., Roulin, A. 2008. What makes a host profitable? Parasites balance host nutritive resources against immunity. *Am Nat* **171**:107-118.

Bonds, M. H., Keenan, D. C., Rohani, P., Sachs, J. D.. 2010. Poverty trap formed by the ecology of infectious diseases. *Proceedings of the Royal Society of London. Series B, Biological Sciences* **277**:1185-1192

Bossa-Miranda, M., Valencia-Celis, V., Carvajal-Giraldo, B., Rios-Osorio, L., 2012. Automated hemogram values for healthy dogs aged 1 to 6 years attended at the Veterinary Hospital-Universidad de Antioquia (Colombia), 2002-2009. *Revista Colombiana de Ciencias Pecuarias* **25**, 409-416.

Breslow, L. 1972. A quantitative approach to the World Health Organization definition of health: physical, mental and social well-being. *Int J Epidemiol* **1**:347-355.

Butler, J. R. A., Toit, J. T. d., Bingham, J. 2004. Free-ranging domestic dogs (*Canis familiaris*) as predators and prey in rural Zimbabwe: threats of competition and disease to large wild carnivores. *Biological Conservation* **115**:369-378.

Cardinal, M. V., Lauricella, M. A., Marcet, P. L., Orozco, M. M., Kitron, U., Gurtler, R. E.. 2007. Impact of community-based vector control on house infestation and *Trypanosoma cruzi* infection in *Triatoma infestans*, dogs and cats in the Argentine Chaco. *Acta Trop* **103**:201-211.

Chaves, L. F., Cohen, J. M., Pascual, M., Wilson, M. L. 2008. Social exclusion modifies climate and deforestation impacts on a vector-borne disease. *PLoS Negl Trop Dis* **2**:e176.

Christe, P., Moller, A. P., Saino, N., De Lope, F. 2000. Genetic and environmental components of

phenotypic variation in immune response and body size of a colonial bird, *Delichon urbica*
(the house martin). *Heredity* (Edinb) **85** (Pt 1):75-83.

Cleaveland, S., Appel, M. G., Chalmers, W. S., Chillingworth, C., Kaare, M., Dye, C. 2000.

Serological and demographic evidence for domestic dogs as a source of canine distemper
virus infection for Serengeti wildlife. *Vet Microbiol* **72**:217-227.

Cleaveland, S., Dye, C. 1995. Maintenance of a microparasite infecting several host species: rabies
in the Serengeti. *Parasitology* **111 Suppl**:S33-47.

Cohen, J. E., Gurtler, R. E. 2001. Modeling household transmission of American trypanosomiasis.
Science **293**:694-698.

Conover, W.J. 1999. *Practical Nonparametric Statistics*. Third Edition, John Wiley & Sons, New
York.

Craig, B. H., Tempest, L. J., Pilkington, J. G., Pemberton, J. M. 2008. Metazoan-protozoan parasite
co-infections and host body weight in St Kilda Soay sheep. *Parasitology* **135**:433-441.

Dantas-Torres, F. 2007. The role of dogs as reservoirs of *Leishmania* parasites, with emphasis on
Leishmania (Leishmania) infantum and *Leishmania (Viannia) braziliensis*. *Vet Parasitol*
149:139-146.

Deplazes, P., van Knapen, F., Schweiger, A., Overgaauw, P. A. 2011. Role of pet dogs and cats in
the transmission of helminthic zoonoses in Europe, with a focus on echinococcosis and
toxocarosis. *Vet Parasitol* **182**:41-53.

Dujardin, J.-C., Herrera, S., do Rosario, V., Arevalo, J., Boelaert, M., Carrasco, H. J., Correa-
Oliveira, R., Garcia, L., Gotuzzo, E., Gyorkos, T. W., Kalergis, A. M., Kouri, G., Larraga,
V., Lutumba, P., Garcia, M. A. M., Manrique-Saide, P. C., Modabber, F., Nieto, A.,
Pluschke, G., Robello, C. 2010. Research Priorities for Neglected Infectious Diseases in
Latin America and the Caribbean Region. *PLoS Negl Trop Dis* **4**:1-5.

- Etheredge, G. D., Michael, G., Muehlenbein, M. P., Frenkel, J. K. 2004. The roles of cats and dogs in the transmission of *Toxoplasma* infection in Kuna and Embera children in eastern Panama. *Rev Panam Salud Publica* **16**:176-186.
- Fabre, V., Beiting, D.P., Bliss, S.K., Gebreselassie, N.G., Gagliardo, L.F., Lee, N.A., Lee, J.J., Appleton, J.A., 2009. Eosinophil deficiency compromises parasite survival in chronic nematode infection. *Journal of Immunology* **182**, 1577-1583.
- Factor, R., Awerbuch, T., Levins, R. 2013. Social and land use composition determinants of health: variability in health indicators. *Health Place* **22**:90-97.
- Fiorello, C. V., Noss, A. J., Deem, S. L. 2006. Demography, Hunting Ecology, and Pathogen Exposure of Domestic Dogs in the Isoso of Bolivia. *Conservation Biology* **20**:762-771.
- Gurtler, R.E., Cecere, M.C., Lauricella, M.A., Cardinal, M.V., Kitron, U., Cohen, J.E., 2007. Domestic dogs and cats as sources of *Trypanosoma cruzi* infection in rural northwestern Argentina. *Parasitology* **134**, 69-82.
- Hotez, P. J., Bottazzi, M. E., Franco-Paredes, C., Ault, S. K., Periago, M. R. 2008. The neglected tropical diseases of Latin America and the Caribbean: a review of disease burden and distribution and a roadmap for control and elimination. *PLoS Negl Trop Dis* **2**:e300.
- Jenkins, E. J., Schurer, J. M., Gesy, K. M. 2011. Old problems on a new playing field: Helminth zoonoses transmitted among dogs, wildlife, and people in a changing northern climate. *Vet Parasitol* **182**:54-69.
- Kapil, S., Yeary, T.J., 2011. Canine distemper spillover in domestic dogs from urban wildlife. *The Veterinary clinics of North America. Small animal practice* **41**, 1069-1086.
- Levins, R., Lopez, C. 1999. Toward an ecosocial view of health. *Int J Health Serv* **29**(2):261-293.
- Levins, R. 1995. Toward an integrated epidemiology. *Trends Ecol Evol* **10**(7): 304.

- 1
2
3
4 Kapil, S., Yeary, T. J. 2011. Canine distemper spillover in domestic dogs from urban wildlife. *Vet*
5
6 *Clin North Am Small Anim Pract* **41**:1069-1086.
7
8
9
10
11
12 Karpati, A., Galea, S., Awerbuch, T., Levins, R. 2002. Variability and vulnerability at the
13
14 ecological level: implications for understanding the social determinants of health. *Am J*
15
16 *Public Health* **92**(11):1768-72.
17
18
19
20
21
22
23
24 Kish, L. (1965). *Survey Sampling*. New York, John Wiley & Sons . 643 pp.
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60
61
62
63
64
65
- Kollataj, W., Milczak, A., Kollataj, B., Karwat, I. D., Sygit, M., Sygit, K. 2012. Risk factors for the
spread of parasitic zoonoses among dog owners and their families in rural areas. *Ann Agric*
Environ Med **19**:79-84.
- Labruna, M. B., Kamakura, O., Moraes-Filho, J., Horta, M. C., Pacheco, R. C. 2009. Rocky
Mountain spotted fever in dogs, Brazil. *Emerg Infect Dis* **15**:458-460.
- Lopez, J., Abarca, K., Cerda, J., Valenzuela, B., Lorca, L., Olea, A., Aguilera, X. 2009.
Surveillance system for infectious diseases of pets, Santiago, Chile. *Emerg Infect Dis*
15:1674-1676.
- Molyneux, D., Hallaj, Z., Keusch, G. T., McManus, D. P., Ngowi, H., Cleaveland, S., Ramos-
Jimenez, P., Gotuzzo, E., Kar, K., Sanchez, A., Garba, A., Carabin, H., Bassili, A.,
Chaignat, C. L., Meslin, F.-X., Abushama, H. M., Willingham, A. L., Kioy, D. 2011.
Zoonoses and marginalised infectious diseases of poverty: Where do we stand? *Parasit*
Vectors **4**:106-111.
- Petersen, E., Chen, L. H., Schlagenhauf-Lawlor, P. 2011. *Infectious diseases: a geographic guide*.
Wiley-Blackwell, Chichester, West Sussex; Hoboken, NJ.
- Petersen, R. M., Gurtler, R. E., Cecere, M. C., Rubel, D. N., Lauricella, M. A., Hansen, D.,
Carlomagno, M. A. 2001. Association between nutritional indicators and infectivity of dogs
seroreactive for *Trypanosoma cruzi* in a rural area of northwestern Argentina. *Parasitol Res*

- 1
2 Pineda, V., Saldana, A., Monfante, I., Santamaria, A., Gottdenker, N. L., Yabsley, M. J., Rapoport,
3
4 G., Calzada, J. E. 2011. Prevalence of trypanosome infections in dogs from Chagas disease
5
6 endemic regions in Panama, Central America. *Vet Parasitol* **178**:360-363.
7
8
9 Pluciński, M.M., Ngonghala, C.N., Getz W.M., Bonds M.H. 2012. Clusters of poverty and disease
10
11 emerge from feedbacks on an epidemiological network. *J R Soc Interface* **10**(80):20120656.
12
13 Plucinski, M.M., Ngonghala, C.N., Bonds, M.H. 2011. Health safety nets can break cycles of
14
15 poverty and disease: a stochastic ecological model. *J R Soc Interface* **8**(65):1796-803.
16
17
18 Roberts, L. S., Janovy, J. 2000. Gerald D. Schmidt & Larry S. Roberts' Foundations of Parasitology.
19
20 6th edition. McGraw Hill, Boston.
21
22
23 Robertson, I.D., Irwin, P.J., Lymbery, A.J., Thompson, R.C., 2000. The role of companion animals
24
25 in the emergence of parasitic zoonoses. *International journal for parasitology* **30**, 1369-1377.
26
27
28 Robertson, I.D., Thompson, R.C., 2002. Enteric parasitic zoonoses of domesticated dogs and cats.
29
30 *Microbes and infection / Institut Pasteur* **4**, 867-873.
31
32
33 Saldaña A., Chaves L.F., Rigg, C.A., Wald, C., Smucker, J.E., Calzada, J.E. 2013. Clinical
34
35 cutaneous leishmaniasis rates are associated with household *Lutzomyia gomezi*, *Lu.*
36
37 *Panamensis*, and *Lu. trapidoi* abundance in Trinidad de Las Minas, western Panama. *Am J*
38
39 *Trop Med Hyg* **88**(3):572-574.
40
41
42
43 Sanou, D., Turgeon-O'Brien, H., Desrosiers, T. 2010. Nutrition intervention and adequate hygiene
44
45 practices to improve iron status of vulnerable preschool Burkinabe children. *Nutrition*
46
47 **26**:68-74.
48
49
50 Schneider, M. C., Aguilera, X. P., Barbosa da Silva Junior, J., Ault, S. K., Najera, P., Martinez, J.,
51
52 Requejo, R., Nicholls. R. S., Yadon, Z., Silva, J. C., Leanes, L. F., Periago, M. R. 2011.
53
54 Elimination of neglected diseases in Latin America and the Caribbean: a mapping of
55
56 selected diseases. *PLoS Negl Trop Dis* **5**:e964.
57
58
59
60 Siegmund, O. H., Merck & Co. 1955. The Merck veterinary manual. Page v. Merck and Co.,
61
62
63
64
65

Rahway, N.J.

1 Tarleton, R. L., Reithinger, R., Urbina, J. A., Kitron, U., Gurtler, R. E. 2007. The challenges of
2 Chagas Disease-- grim outlook or glimmer of hope. PLoS Med **4**:e332.
3

4
5 Teichmann, C. E., Da Silva, A. S., Monteiro, S. G., Barbosa, C. F., Barcelos, R. 2011. Evidence of
6 Venereal and Transplacental Transmission of Canine Visceral Leishmaniasis in Southern Brazil.
7
8 Acta Scientiae Veterinariae **39**.
9

10
11 Tu, T., Koski, K. G., Wykes, L. J., Scott, M. E.. 2007. Re-feeding rapidly restores protection
12 against *Heligmosomoides bakeri* (Nematoda) in protein-deficient mice. Parasitology
13 **134**:899-909. Venables, WN, Ripley, B.D. 2002. Modern Applied Statistics with S.
14
15 Fourth Edition. (XI, 497 p.). Springer, Oxford.
16
17

18
19 Vieira, F.M., Luque, J.L., Lima Sde, S., Neto, A.H., Muniz-Pereira, L.C., 2012. Dipylidium
20 caninum (Cyclophyllidea, Dipylidiidae) in a wild carnivore from Brazil. Journal of
21
22 wildlife diseases 48, 233-234.
23

24
25 Wakelin, D. 1975. Genetic control of immune responses to parasites: immunity to *Trichuris muris*
26 in inbred and random-bred strains of mice. Parasitology **71**:51-60.
27

28
29 Wakelin, D. 1978. Immunity to intestinal parasites. Nature **273**:617-620.
30

31
32 Wakelin, D. 1996. Immunity to parasites : how parasitic infections are controlled. 2nd edition.
33
34 Cambridge University Press, Cambridge ; New York.
35

36
37 Weiss, D. J., Wardrop, K. J., Schalm, O. W., ebrary Inc. 2010. Schalm's veterinary hematology.
38
39 Pages 1 online resource (xxiii, 1206 p.). Wiley-Blackwell, Ames, Iowa.
40

41
42 Zinsstag, J., Schelling, E., Waltner-Toews, D., Tanner, M. 2011. From "one medicine" to "one
43
44 health" and systemic approaches to health and well-being. Prev Vet Med **101**:148-156.
45
46

47
48
49 Table1. Percentage of houses within each community of La Chorrera County, Panama, that has dirt
50
51 floors, no potable water, and no electricity. (Table adapted from INEC).
52
53
54
55
56
57
58
59
60
61
62
63
64
65

Site (n)	% Houses with dirt floors (n)	% Houses without potable water (n)	% Houses without electricity (n)
----------	-------------------------------	------------------------------------	----------------------------------

Lagartera Grande (71)	49.3% (35)	76.1% (54)	87.3% (62)
Las Pavas (83)	42.2% (35)	19.3% (16)	60.2% (50)
Los Hules (98)	34.6% (34)	23.5% (23.5)	38.8% (38)

Table 2. Principal components analysis (PCA) for the percent of houses with dirt floors, and lack of access to Potable water and electricity across the 125 rural towns of La Chorrera County, Panamá Province. Comp. 1 stands for the 1st principal component (PC), which accounted for 67% of the variability in the PCA, while Comp. 2 is the 2nd PC, which accounted for 23% of the variability in the PCA.

Loadings	Comp. 1	Comp. 2	Comp. 3
% Houses with dirt floors	0.324	0.458	0.828
% Houses without potable water	0.687	-0.715	0.127
% Houses without electricity	0.650	0.528	-0.547

Figure 1. Location of study sites in Panama.

1 Figure 2. A dog from the community of Las Pavas with a body condition score of 1. Note the
2 prominent ribs and pelvis bones, obvious loss of muscle mass, and no body fat.
3

4 Figure 3. Boxplot of the association between parasite richness and IFN- γ expression (Spearman's
5 correlation, $\rho=0.344$, $S=51906.04$, $p=0.0021$). Minimum and maximum IFN- γ levels are depicted
6 by lines extending perpendicular to the vertical dotted line, small clear circles represent individual
7 maximum outliers, the box represents upper and lower quartiles, and the median is represented by a
8 bold black line within the box.
9

10 Figure 4. Boxplot of the relationship between site and body condition. A significant association
11 was found between body condition and site (Kruskal-Wallis, $\chi^2=22.023$, $df=2$, $p=1.65e-5$). Site
12 abbreviations are as follows; LGA-Lagartera Grande, LPS-Las Pavas, LHS-Los Hules. The box
13 represents upper and lower quartiles, and the median body condition value is represented by a bold
14 black line. Maximum and minimum body condition scores for each site are delimited by the line
15 extending perpendicular to the vertical dotted line extending from the box. For Los Hules, the
16 minimum body condition score (3) is at the bottom of the quartile box.
17

18 Figure 5. Multiple correspondence analysis of associations between zoonotic pathogen presence,
19 site, anemia, and distemper in domestic dogs). Site abbreviations are as follows; LGA-Lagartera
20 Grande, LPS-Las Pavas, LHS-Los Hules. Anemia.Yes refers to anemic dogs, Anemia.no refers to
21 non-anemic dogs, Zoonotic.N is the absence of zoonotic disease in dogs, zoonotic.y refers to dogs
22 positive for zoonotic diseases. Distemper.YES and Distemper.NO refers to dogs positive and
23 negative for antibodies to canine distemper virus.
24

25 Figure 6. Boxplot of the relationship between IFN- γ and Lagartera Grande (LGA), Los Hules
26 (LHS), and Las Pavas (LPS) communities. Minimum and maximum IFN- γ levels are depicted by
27 lines extending perpendicular to the vertical dotted line, small clear circles represent individual
28 maximum outliers, the box represents upper and lower quartiles, and the median is represented by a
29 bold black line within the box. Significant associations between site and IFN γ were detected with a
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60
61
62
63
64
65

Kruskal-Wallis test ($\chi^2=51.1$, $df=2$, $p=8.01e-12$).

1
2 Figure S1. Principal components analysis (PCA) for the percent of houses with dirt floors, and lack
3
4 of access to Potable water and electricity across the 125 rural towns of La Chorrera County, Panamá
5
6 Province, Republic of Panamá. LGA, LPS and LHS indicate the scores for Lagartera Grande, Las
7
8 Pavas and Los Hules, respectively. Comp. 1 stands for the 1st principal component (PC), which
9
10 accounted for 67% of the variability in the PCA, while Comp. 2 is the 2nd PC, which accounted for
11
12 23% of the variability in the PCA.
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60
61
62
63
64
65

Figure 1

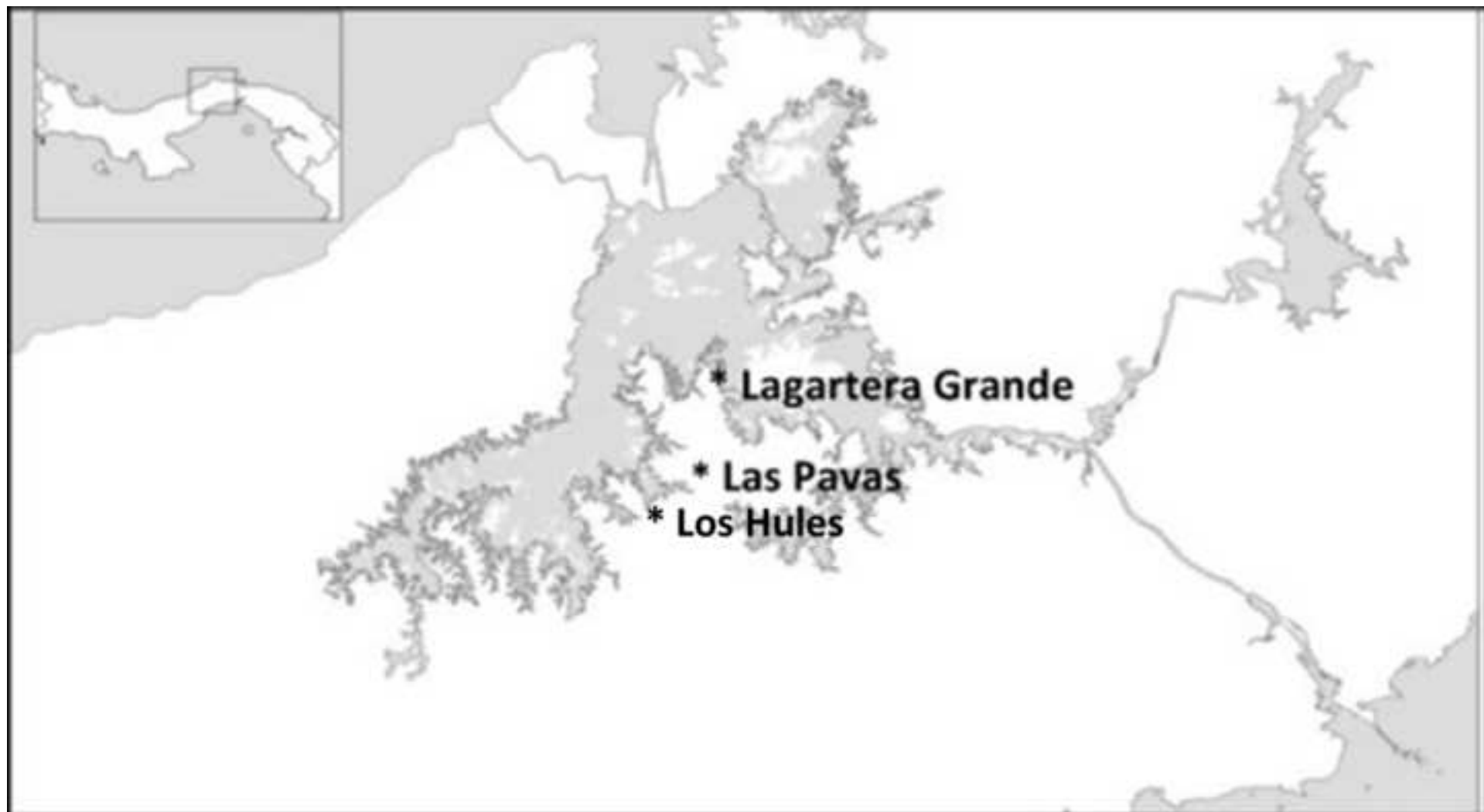


Figure 2



Figure 3

Interferon-gamma Expression and Parasite Richness

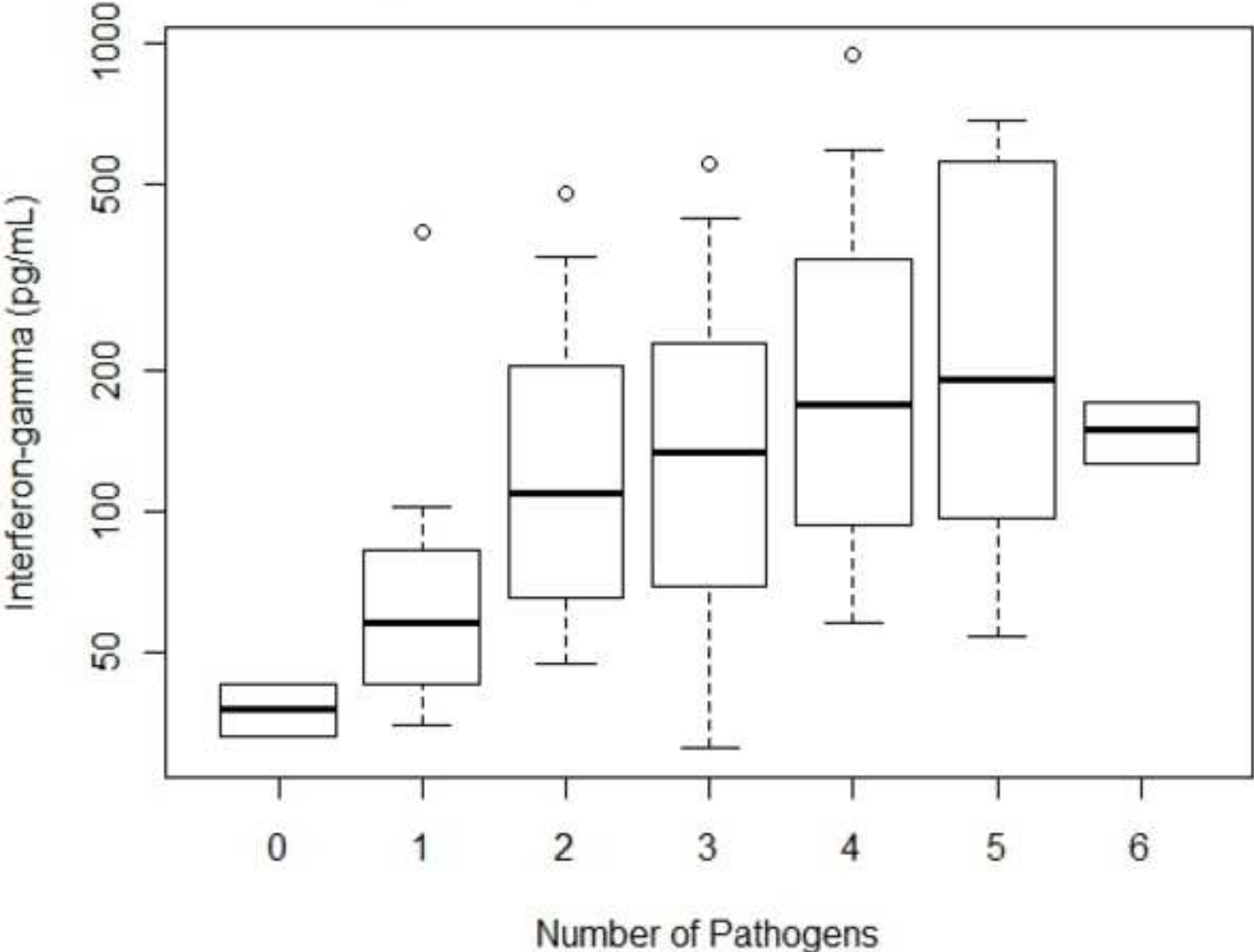


Figure 4

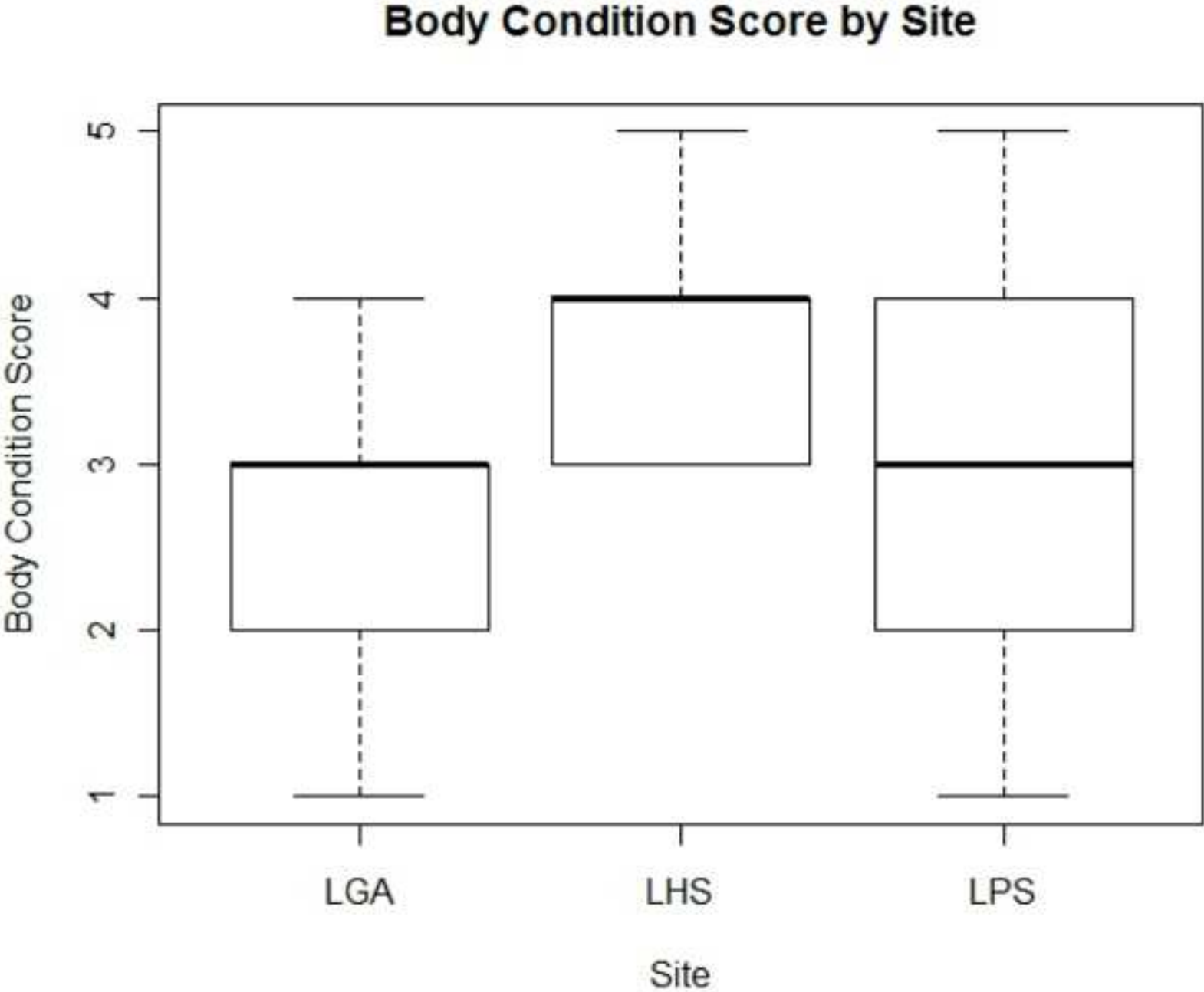


Figure 5

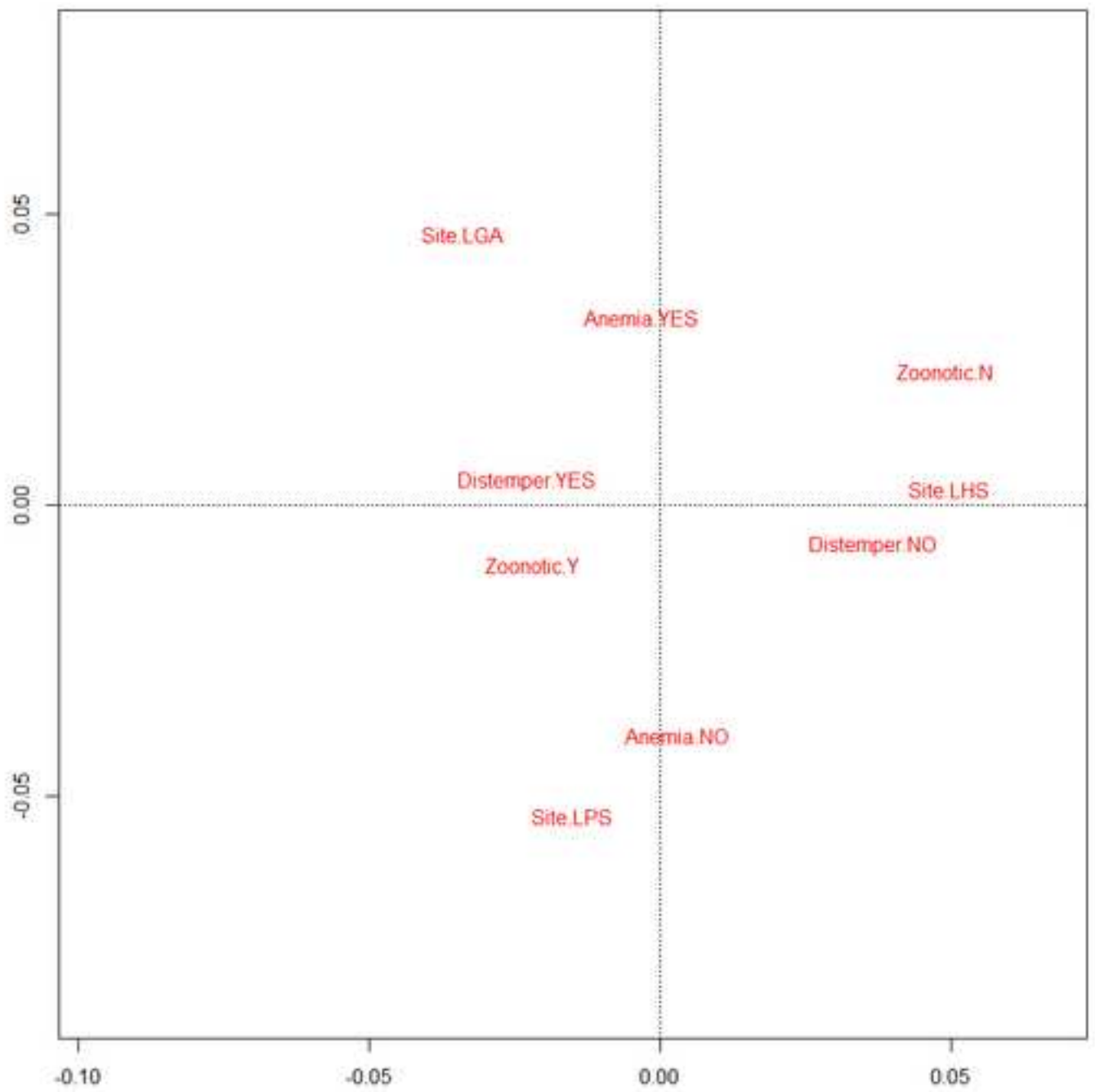


Figure 6

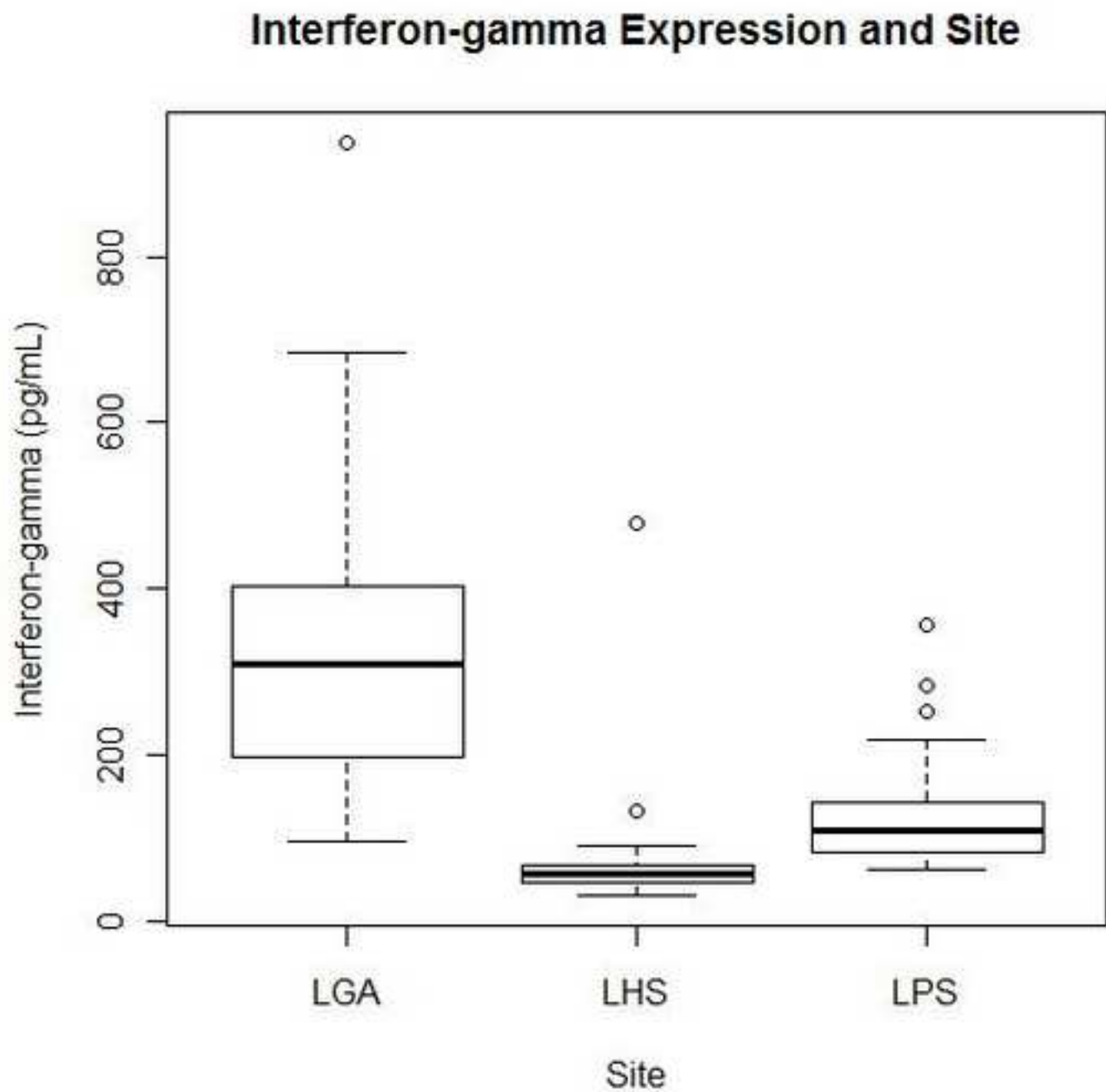


Figure S1

