

Assessment of aflatoxin-related health risk for milk consumers in rural and peri-urban areas in Burkina Faso

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Objectives

- Map the dairy value chains operating in rural areas in Burkina Faso and in peri-urban Ouagadougou.
- 2) Determine the presence of milk-borne pathogens in milk consumed in rural and urban settings.
- Assess the level of aflatoxin contamination in dairy cattle feed and milk in dairy production systems.
- 4) Estimate the aflatoxin-related health risk for rural and urban consumers of liquid milk, with a focus on children under 5 years, and pregnant and lactating women.

Aflatoxin levels in cow's feed and milk in Burkina Faso

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Introduction

 We compared aflatoxin levels in feeds and milk from two farming systems in different locations in Burkina Faso

Methods

- Collected 251 milk samples and 231 animal feeds from dairy farms
- Dairy farms were peri-urban (in Ouagadougou) or rural (in Dori)
- We tested samples for presence of Aflatoxin BI (AFBI) in feeds and Aflatoxin M1 (AFMI) in milk (AgraQuant ELISA tests)

Results

- Maize-based feeds have higher AFBI concentrations. They are also the most common diet component for dairy cows in peri-urban settings.
- Milk samples from both farming systems have similar AFM1 levels

Despite differences in animal diets and aflatoxin BI concentration in feeds (animal intake),

Aflatoxin MI concentration in milk is

concentration in milk is similar in peri-urban and rural farms.

52% of feed and 100% of milk samples respectively met US aflatoxin standards

Table I. Aflatoxin BI concentration (ppb) in cow feeds from dairy farms

	Ouagadoug	ou (semi-i	intensive)	Dori (smallh	Dori (smallholder and pastoralist)			
Type feed	N (%)*	Mean	(SD)	N (%)*	Mean	(SD)	% above 20 ppb	
Commercial	27 (24%)	17.25	(21.74)	5 (4%)	50.38	(50.08)	34%	
Cotton cake	24 (21%)	25.9	(28.77)	98 (84%)	44.74	(96.74)		
Maize flour	12 (11%)	86.22	(66.93)				92%	
Maize bran	35 (31%)	72.85	(51.91)				80%	
Millet bran	3 (3%)	11.63	(13.66)	9 (8%)	13.38	(11.39)	25%	
Bran (other)	4 (4%)	39.6	(5.50)	5 (4%)	9.24	(7.9)	56%	
Local shrubs/trees	6 (5%)	50.22	(87.18)				33%	
Other	3 (3%)	72.7	(84.52)				100%	
Total	114	47.23	(52.16)	117	41.05	(89.68)	48%	
Overall	N = 231			Mean = 44.1 (SD = 73.5) Median = 16.9 (range 0.6-515.9)				

^{* %} from total. Represents the relative importance of that product as part of the diet of dairy cows in that area; I note the small sample size; - represents no samples available. There is a statistically significant difference in AFBI concentration in feeds between both locatic

Table 2. Aflatoxin MI concentration (ppt) in cows' milk from dairy farms

	Ouagadougou (semi-intensive)						
Type sample	N	Mean	(SD)	Median	Range	above 50 ppt*	Above 500 ppt**
Fresh milk	100	84.3	49.1	85.2	12.72-267.73	67%	0%

^{*}Eu regulation** FDA regulation

	Dori (smallholder and pastoralist)						
Type sample	N	Mean	(SD)	Median	Range	above 50 ppt*	Above 500 ppt**
Fresh milk	151	89.3	44.9	94.9	14.3-197.1	69.5%	0%

^{*}Eu regulation** FDA regulation

Research gaps:

- What factors drive the differences in ABI concentration across different types of feeds and between both locations?
- Understand the relationship between AFBI concentration in feeds and AFMI in milk and what factors influence it.

Exposure to AMI from milk by vulnerable groups

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Introduction

- There is limited scientific evidence on exposure to Aflatoxin M1 (AFMI) in West Africa
- Families in dairy farms are known to consume high amounts of milk
- Unknown potential health risk for children and other vulnerable groups in those households.

Methods

- Collected diet data from children <5, pregnant and breastfeeding women in dairy farms
- Compared rural & peri-urban farms
- Data from AMI testing of milk `

Based on reported levels of milk consumption, children and breastfeeding women have higher exposure to AMI in milk.

Table 1. Milk consumption at the farm

	Ouagadougou (semi-intensive) N visited farms = 103			Dori (smallholder and pastoralist) N visited farms = 194			
	N	Mean age	Daily milk intake (ml) mean ± SD	N	Mean age	Daily milk intake (ml) mean ± SD	
Children <5yr	78	2.8	792.3 ± 449.9	81	3	1167 ± 380.7	
Pregnant women	18	27.4	300 ± 0	26	24.6	762.5 ± 475	
Breastfeeding women	54	27.5	575 ± 298.6	43	27.7	1128 ± 755.4	

Table 2. Exposure to AM1 via milk consumption

	Ouagadougou	Dori
	Exposure	Exposure
	ng/kg bw/day	ng/kg bw/day
Children	0.009 (0.00048-0.03)	0.0126 (0.0014-0.03)
Pregnant women	0.0026 (0.00035-0.01)	0.0052 (0.0007-0.012)
Breastfeeding women	0.006 (0.00039-0.02)	0.0012 (0.001-0.03)

Results

- Individuals in rural dairy farms have higher exposure due to the higher milk intakes, compared to periurban dairy farms.
- Pregnant women consume less than children and lactating women

Future opportunities

 Conduct a risk assessment to measure the health risk (hepatocarcinoma) associated with AMI intake



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