

Monitoring endemic diseases in pig herds

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Outline presentation

- **Introduction**
- **Respiratory disease**
- **Enteric diseases**
- **Other diseases**
- **Discussion and conclusions**

Animal health

- Different from realizing genetic potential of animals
- We do not measure health, but:
 - (absence of) disease
 - level of management and biosecurity
- Different levels: animal, group, herd, region, country, ...
- Distinction: « infection » ↔ « disease »

Why so many infectious diseases? → numerous transmission routes!!

- **Direct pig contact, incl. sow-piglet**
- **Indirect: personnel and visitors, contaminated objects, rodents, insects, feral pigs, ..**
- **Other: feed, water, via needles, etc.**
- **Semen (AI)**
- **Airborne!**

Transmission routes infectious diseases

Pig-to-pig transmission



- **Most important for most diseases**
- **Within and between herds**
- **Subclinical infections, carrier animals, long viremia**

N : number of pigs → risk increase on transmission of pathogens = $N^2 - N$

15 pigs → 210; 50 pigs → 2450

Transmission routes infectious diseases

Pig-to-pig transmission

- from sow to piglet (“vertical transmission”)
- “Early” vs. “late” colonizing pathogens



Transmission routes infectious diseases

- Contaminated people:

Examples: CSF, FMD, *E. coli*, TGE, PRRSV

Mainly by persons having direct contact with pigs

- Rodents:

Examples: swine dysentery, leptospirosis,
Salmonella



Transmission pig diseases by insects

Examples

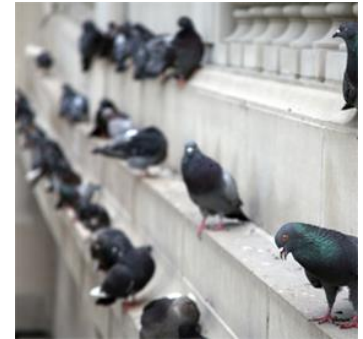
African swine fever, Classical swine fever, *Mycoplasma suis*, PRRSV, Aujeszky's disease virus, *Salmonella*, *Streptococcus suis*, Swine pox, Vesicular stomatitis

- Biological or mechanical vectors
- *Musca domestica* → 1.5 km
- Mostly based on experimental data



Transmission pig diseases

- **Birds**
- **Iatrogenic transmission → injections**
- **Vehicles → CSF, PRRSV**
- **Feed, water**
- **Other: e.g. feral pigs**

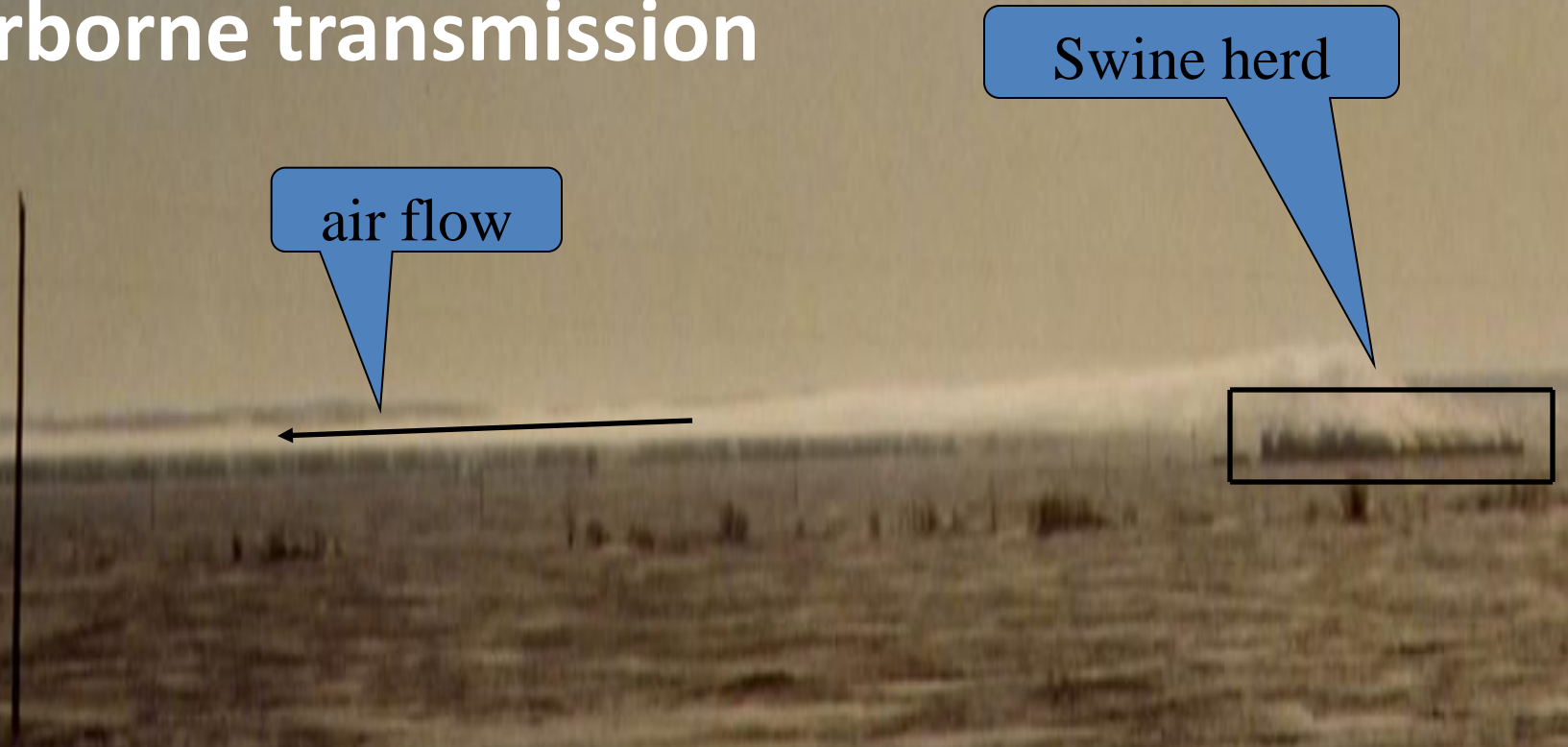


Important viruses in pig semen

(Maes et al., Theriogenology, 2008)

Organism	Timing of detection (test used)
Classical swine fever virus	7-63 DPI (RT-PCR); 11-53 DPI (virus isolation)
FMD virus	Up to 9 days post exposure (virus isolation)
Japanese encephalitis virus	35 DPI
Porcine circovirus	Intermittently between 5-47 days DPI (nPCR)
Porcine enterovirus	45 DPI (virus isolation)
Porcine parvovirus	Detected (virus isolation)
PRRS virus	Up to 92 DPI (nested RT-PCR) Up to 43 DPI (swine bioassay)
Pseudorabies virus	10 DPI (virus isolation)
Rubula virus	2 to 49 DPI (virus isolation)
Swine vesicular disease virus	Up to 4 DPI (virus isolation)

Airborne transmission



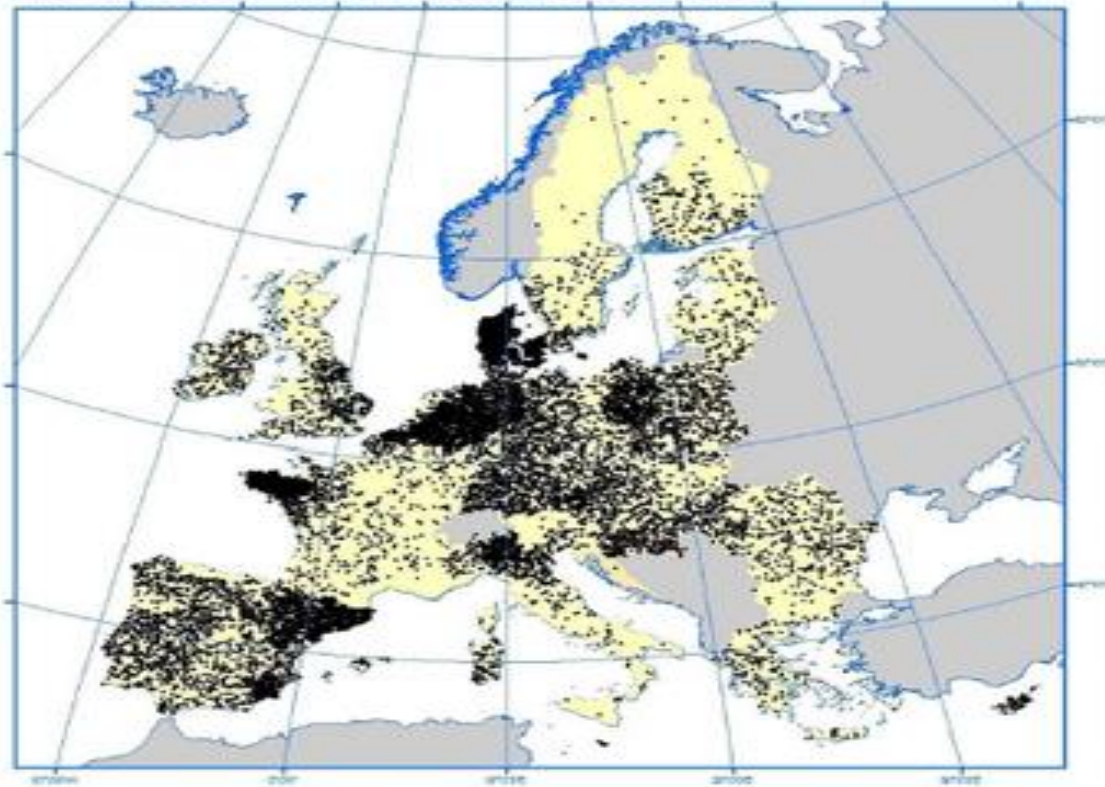
PRRS virus and Mycoplasma: > 9 km (Otake et al., 2010)

Other pathogens e.g. swine flu → neighborhood infections (Madec et al. 1982)

⋮

Pig production in the EU

1 dot = 1,000 sows - NUTS 2 except DK, DE, UK (NUTS1)



High density populated areas (e.g. >3000 pigs / km²)

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Respiratory pathogens in pigs

	PRIMARY	SECONDARY
Viruses	Influenzavirus (H1N1, H3N2, H1N2) PRRSV, PRCV, PCV2, ...	
Bacteria	<i>M. hyopneumoniae</i> <i>A. pleuropneumoniae</i> <i>H. parasuis</i> <i>B. bronchiseptica</i>	<i>A. pleuropneumoniae</i> <i>H. parasuis</i> <i>P. multocida</i> <i>B. bronchiseptica</i> <i>M. hyorhinis, S. suis</i> <i>T. pyogenes, ...</i>
Parasites	<i>A. suum</i>	

Can damage lung tissue by themselves

Previous damage of lung tissue needed

- Importance of each pathogen very variable ~ continent, country, herd, time within herd, health status (conventional vs. high health)

% of slaughter pigs with lung lesions

(Meyns et al 2011; Fraile et al 2010; Merialdi et al. 2012)

Parameter	Belgium	Spain	Italy	Major pathogens
% pleuritis	21	14	26	<i>A. pleuropneumoniae</i> , <i>H. parasuis</i> , <i>P. multocida</i> , <i>M. hyorhinis</i> , <i>S. suis</i> , ..
% pneumonia	25	56	46	<i>M. hyopneumoniae</i> , viral pathogens,..



→ similar prevalences as 20-30 years ago !

- 1978: Backström and Bremer 27%
- 1990: Christensen and Culinane 45%
- 1991: Charrier 30%
- 1993: Paisley et al 63%

% of herds with seropositive slaughter pigs

(European study, 2008; Meyns et al., Vet J 2011)

Parameter	Belgium (50 herds)	Spain (107 herds)	Italy (46 herds)
<i>A. pleuropneumoniae</i>	96	89	100
<i>M. hyopneumoniae</i>	98	82	91*
PRRSV	94	89	100*
Influenza (H1N1)	100	90	78
Influenza (H3N2)	98	100	63
Influenza (H1N2)	98	97	14

* Blood sampling at 80 kg

Monitoring respiratory pathogens

- **Historic information**
- **Clinical symptoms, ev. coughing index** (Nathues et al. 2012)
- **Routine necropsies affected pigs** → further diagnostic work-up
- **Slaughter checks:**

Advantages: cheap, easy, lesions are economically important

Limitations: no etiologic diagnosis (!), regression of lesions, subjective, min. 30 animals, different scoring methods, severe pleurisy may mask other lesions, fast speed of slaughter line, ...

Monitoring respiratory pathogens

- **Serial or cross-sectional sampling at herd**

Samples:

- blood, oral fluids, ... → antibodies
- blood, oral fluids, BAL fluid, tracheal, tonsil / nasal swabs, ... → pathogen or parts of pathogen

- **Blood sampling at slaughter**

- Herd veterinarian should integrate information from herd, laboratory, necropsy, etc.
- Challenge is mostly not “is pathogen present on herd” but mostly “which pathogens are important in specific age group”

Paired or serial sampling

= same animals sampled over time

Advantage:

- provides the most informative results

Disadvantages:

- requires time before results are known
- different herd visits necessary
- needs individual identification of animals

Cross-sectional sampling

= sampling different age groups at same day
e.g. nursery, growing and fattening pigs

Advantage:

- results quickly known (one herd visit)
- no individual identification of animals

Disadvantage:

- results more difficult to interpret

→ Possible to combine serial and cross-sectional sampling

Serology

- **Different tests:**
 - mostly ELISA
 - other (HI-test swine flu, virus neutralization, etc.)
- **Sensitivity and specificity may vary**
- **Antibodies may develop fast or slow after infection, or may not be detectable**
- **Correlation** (*e.g.* HI-antibodies swine flu) **or no correlation** (*e.g.* Mycoplasma) **with degree of protection**

Serology

- **Interpretation difficult in:**
 - **vaccinated populations**
 - **nursery pigs because of maternal antibodies**
- **Retrospective data**
- **Interpretation at group level**

Oral fluids

- Quick, easy, and inexpensive to collect
- Prospective → to forecast health and productivity
- Mixture of saliva and "oral mucosal transudate"
- *e.g.* PRRSV, PCV2, SIV and *M. hyopneumoniae*

Antibodies against these pathogens → test validation needed

- No individual samples → no prevalence data

Samples of respiratory tract

- **Nose → tonsil → trachea → BAL fluid**
- **Depends on pathogen** *e.g.* BAL fluid and trachea more sensitive for *M. hyo*; nasal swabs ok for swine influenza in acute outbreaks
- **Upper respiratory tract (nose) easier for routine sampling**
- **Detection of bacterial pathogens ~ antimicrobial medication**

For optimal laboratory testing, veterinarians should...

- Define goal of submission
- Select appropriate sample(s)
- Use correct method of submission
- Select animals with typical disease
- Submit adequate number of samples
- Include samples from control animals
- Consider strengths and weaknesses of lab tests
- Interpret in relation with farm data*

* Herd veterinarian should integrate information from herd, laboratory & necropsy

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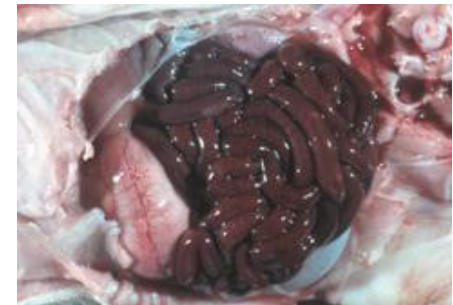
Clostridium perfringens

(Songer 2012)

<u>Type A</u>	<u>Type C</u>
<ul style="list-style-type: none">• Neonatal necrotizing enteritis, gas gangrene• Usually from <u>1w after birth until weaning</u>; <u>low mortality</u>	<ul style="list-style-type: none">• Neonatal hemorrhagic and necrotic enteritis• Mostly <u>in 3-day-old piglets</u>; rare >1w<ul style="list-style-type: none">- directly after birth: severe bloody diarrhea + <u>high mortality</u>- later: lower morbidity and mortality
<ul style="list-style-type: none">• α-toxin	<ul style="list-style-type: none">• α- and β-toxin
<ul style="list-style-type: none">• Normal inhabitant of intestinal tract → quantification (pure cultures of $>10^6$/g feces)	<ul style="list-style-type: none">• Primary pathogen, can also colonize lesions of other diseases

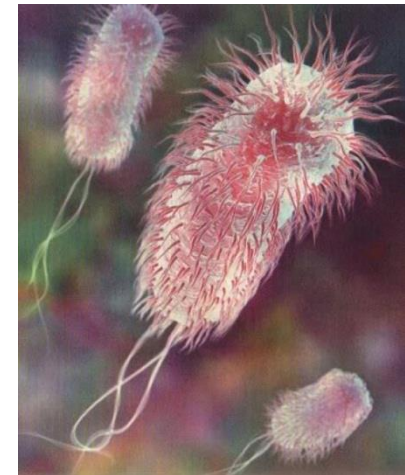
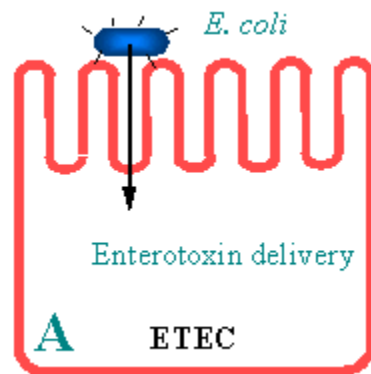


Other Clostridia in pigs: *C. difficile*, *C. novyi*



Neonatal *E. coli* enterotoxigenesis

- Enterotoxigenic *E. coli* (ETEC) important cause of diarrhea
- Adhesion factors (mainly F4^{*}, F5, F6, F41)
- Enterotoxins (LT, Sta, Stb)
- Intestinal epithelium intact



* F4+ ETEC highly prevalent in pig breeding farms – 65% of young sows seropositive (Van den Broeck et al., 1999)

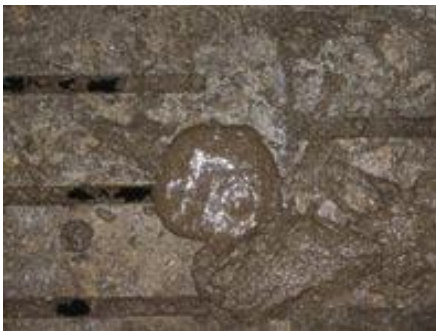
Post-weaning diarrhea/edema disease

- Both caused by *E. coli* that colonize the small intestine and produce exotoxins

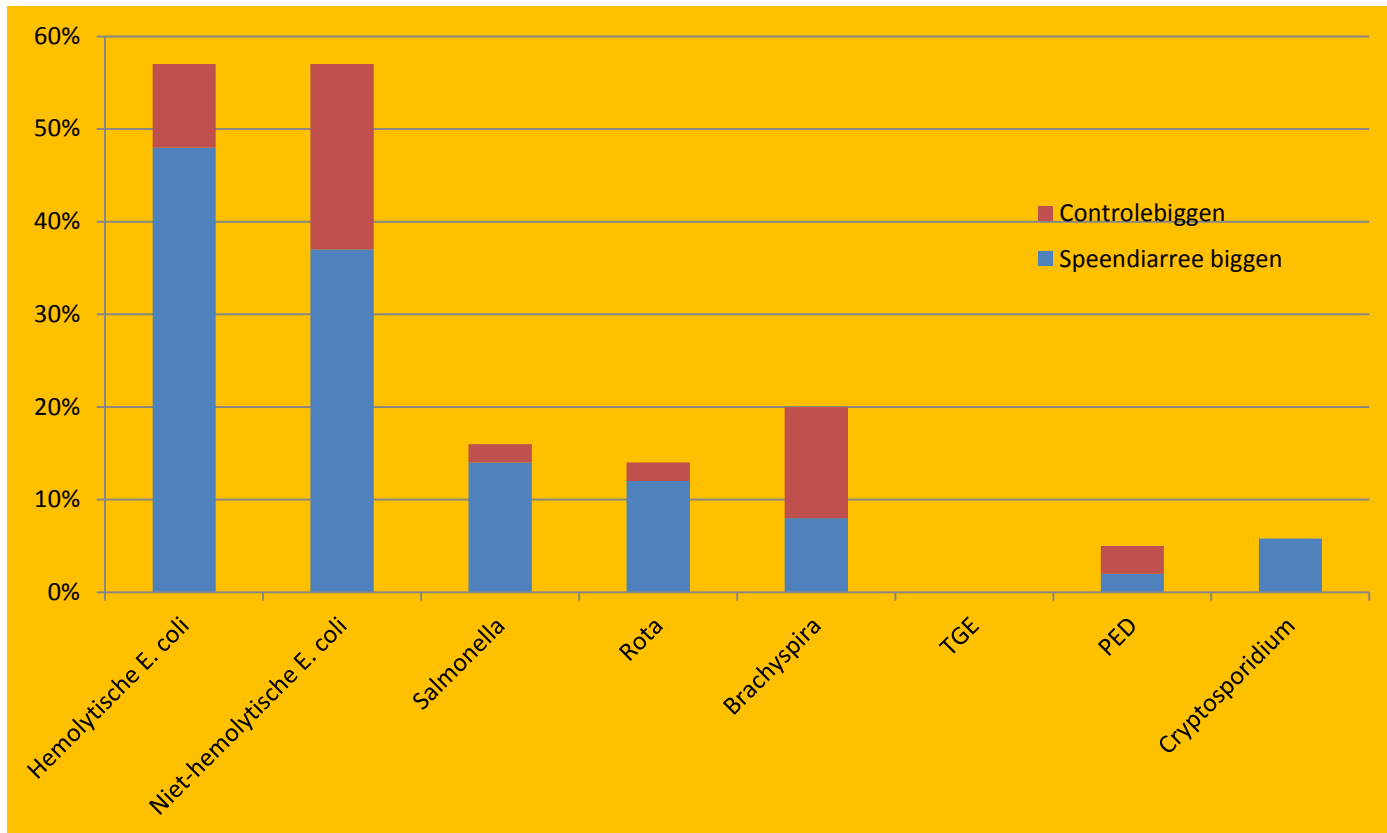
- Diarrhea: mostly F4+ and F18+ ETEC
Enterotoxins

Edema disease: mainly F18ab+ EDEC
Shiga-toxin

- From 2d after weaning onwards

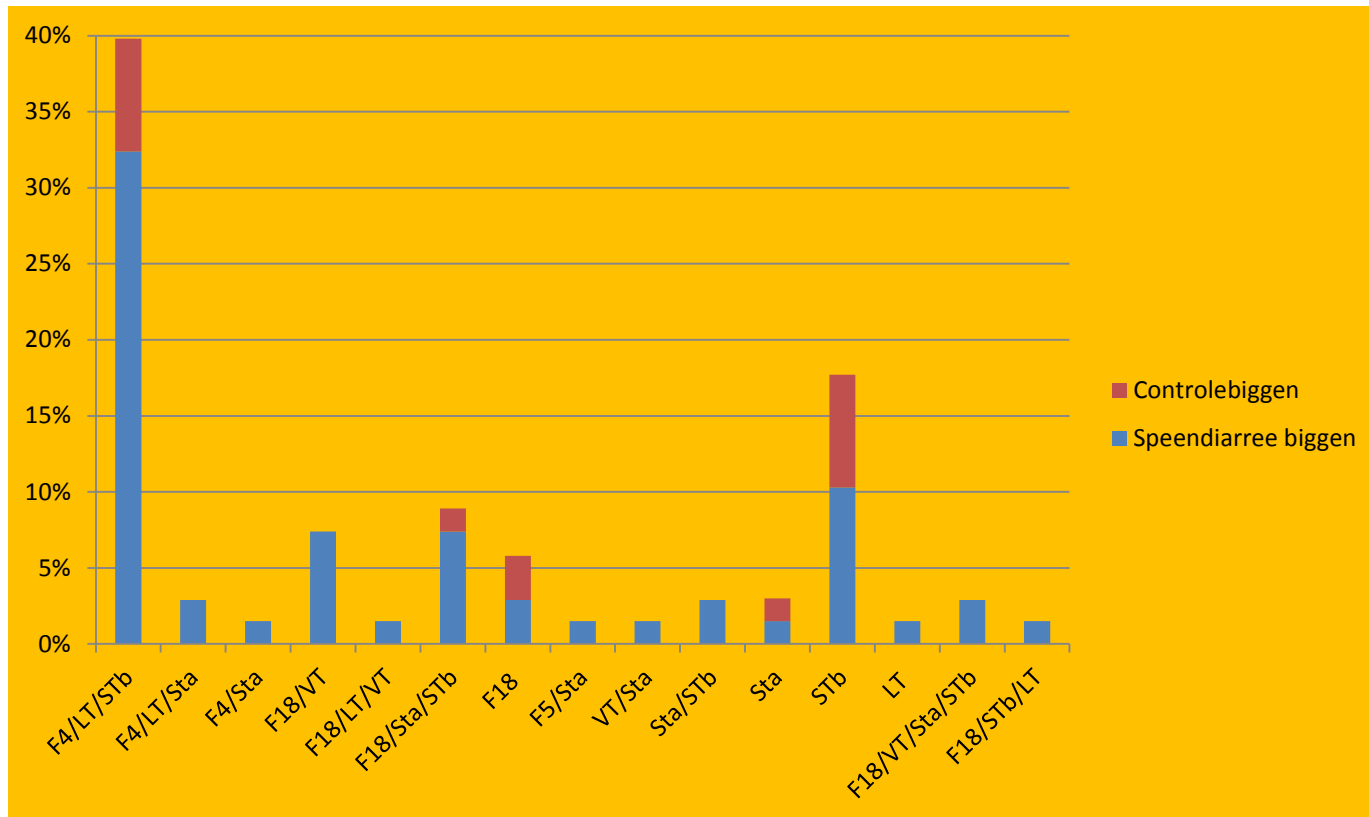


Prevalence of pathogens in recently weaned pigs (Animal Health Service, Flandres, 2012)



- 100 recently weaned pigs at necropsy during one year
- Control pigs n=25; pigs with weaning diarrhea n=75
- 57% hemolytic *E. coli*

Virotypes of *E. coli* with virulence factors in weaned pigs (Animal Health Service, Flandres, 2012)



- 114 isolated *E. coli* strains
- Approx. 60% of *E. coli* strains contained virulence factors
- Most common virotype: F4/LT/STb

Prevalence rotavirus A infections in pigs with and without diarrhea (Theuns et al. 2015)

Country	Year	Diagnostic test	Age (days)	Symptoms	n=	% RVA positive	Reference
USA, Canada, Mexico	2009-2011	RT-qPCR	1-3	D	954	30%	[62]
			4-21	D	2144	46%	
			22-55	D	2538	84%	
			>55	D	1207	61%	
Argentina	1999	PAGE + antigen EIA	<45	ND	901	3.3%	[63]
Canada	2005-2007	RT-PCR	Slaughter	ND	96	8.3%	[64]
			>24	ND	50*	16.0%	
Denmark	2006-2007	EIA	1-28	D	308	10%	[65]
Germany	nd	EM	1-21	D	102	2.0%	[66]
Italy	2004-2006	RT-PCR	28-84	D	102	71.5	[67]
Ireland	2005-2007	RT-PCR	28-63	ND	292	6.5%	[68]
Slovenia	2004-2005	RT-PCR	1-21	D	6	50%	[69]
				ND	121	11.6%	
				D	14	35.7%	
				ND	133	25.6%	
				D	13	46.2%	
Japan	2000-2002	PAGE	suckling weaning	ND	119	16.0%	[70]
				D	36	18 outbreaks	
				D	475	38.3%	
South Korea	2006-2007	nested RT-PCR	3-70	D	475	38.3%	[71]
Thailand	2000-2001	antigen EIA	7-49	D	175	22.3%	[72]
Vietnam	2012	RT-qPCR	all ages	D	76	19.7%	[73]
				ND	654	24.9%	

Legend: D diarrheic; ND non-diarrheic; EIA enzyme immunoassay; EM electron microscopy; PAGE polyacrylamide gel electrophoresis; * mixed samples from multiple animals

Rotavirus A infections in pigs with and without diarrhea (Theuns et al. 2015)

- **Molecular diagnostic techniques such as RT-qPCR and RT-PCR → better surveillance techniques than fast antigen detection tests and virus isolation**
- **Pigs may become successively infected with different rotavirus A types after weaning → second replication peak less pronounced → some cross-protective immunity**

Porcine epidemic diarrhea infections

- **Sporadic PEDV cases on Belgian pig farms (2015): diarrhea without mortality**
- **Strains genetically almost identical to German and US INDEL strains → milder symptoms**
- **INDEL strains:**
genetically different from highly virulent US (spring 2013) and Asian PEDV strains, and the European PEDV strain CV777 (1970s-1990s)
- **Diagnosis:** most efficiently = RTqPCR analysis of RNA extracted from diarrheic feces; Detection of virus by ELISA or EM in feces

Swine dysentery




- Increased prevalences in many countries
- Major losses to farms
- New *Brachyspira* species: *B. hampsonii*, *B. suanatina*
- Treatment: expensive, few effective antimicrobials, antimicrobial resistance problem (Herbst et al., 2014)

MIC₅₀ and MIC₉₀ for pleuromutilins

(Vangroenweghe et al., 2010, ESPHM)

Year	Tiamulin		Valnemulin	
	MIC ₅₀	MIC ₉₀	MIC ₅₀	MIC ₉₀
2006	0.25	2	0.03	0.50
2008	0.50	8	0.12	8
2009	>8	>8	8	>8



→ **Significant increase in MIC values!**

→ **No vaccine available against *B. hyodysenteriae***

Swine dysentery: monitoring

- **Demonstration of *B. hyodysenteriae* (and/or other types) in feces or colon:**
 - **PCR-test:** specific or more general
 - **bacteriology:** anaerobic culture – 6-9 d
MIC testing
- **Serology → not in practice**



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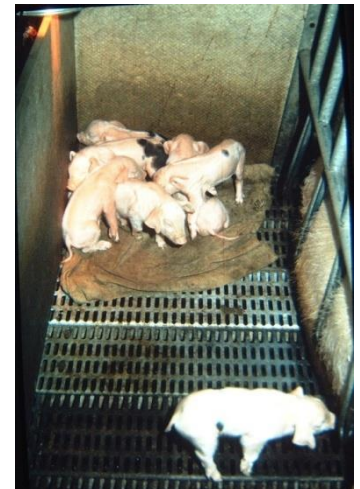
Streptococcus suis



- **Early colonizer:** upper respiratory tract (tonsils, nasal cavity), genital and alimentary tract
- **Septicaemia:** meningitis, arthritis, pericarditis, polyserositis, inflamm. heart valve, pneumonia (?)
- **Zoonotic**
- **Isolation of pathogen in lesions – no serology**
- **Important for preventive use of antibiotics in piglets**

Porcine Reproductive and Respiratory Disease Syndrome (PRRS)

- Major economic losses
- Many pig herds infected
- Large heterogeneity of strains



Porcine Reproductive and Respiratory Disease Syndrome (PRRS)

- **Monitoring: breeding – nursery – fattening**
- **Blood samples:**
 - antibodies (IF, SN, ELISA → European vs. US strains)
 - detection of pathogen: VI, PCR
 - molecular characterisation of strains
- **Oral fluids**
- **Control:**
 - management and biosecurity, vaccination
 - filtration of incoming air → 80% reduction of PRRS introduction
(Alonso et al., 2013)

Other diseases → slaughterhouse information

- **Stomach lesions:**
 - finishing pigs: >65%
 - sows: 10-15%
- **A. suum infections → liver white spots (serology)**
- **Skin lesions → mange**
- **Urogenital tract infections in culled sows**



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Primary disease prevention

- = pathogen (or virulent strains) not present
- Disease-free animals: quarantine, vaccination
- SPF or « high health » herds
- Depop-repop, partial depopulation, medication
- Balance: cost to become free vs. benefits of remaining free
- Difficult for diseases with airborne spread in pig dense areas → filtration of incoming air

Secondary disease prevention

- **Infection is present**
- **Prevention of clinical disease, maintaining optimal production targets**
- **Control programs: good balance between host and infection pressure**

Monitoring

Essential for primary and secondary prevention:

- **To confirm freedom of infection**
- **To assess infection level, affected age group, optimal age for vaccination, prevalence and severity of lesions, etc.**

Conclusions

- **Most herds infected with major pathogens, some are SPF**
- **Monitoring essential in both situations:**
 - Health → blood, oral fluids, feces, clinical scores, slaughter data, ...
 - Antimicrobial resistance
 - Performance
 - Feed & water intake, climatic parameters
- **More & better diagnostics: fast testing for multiple pathogens** (characterisation, virulent strains, ...)