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**Agricultural Outlook Forum 2005** 

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#### BSE AND STRATEGIES FOR TESTING

Justin A. Richt, DVM, PhD Veterinary Medical Officer National Animal Disease Center, Ames, IA

### BSE and strategies for testing

Jürgen A. Richt, DVM, PhD Veterinary Medical Officer National Animal Disease Center, Ames, IA

## Outline of Seminar

- 1. Introduction to Prion Diseases
- 2. BSE in Cattle
- 3. BSE Surveillance in the U.S

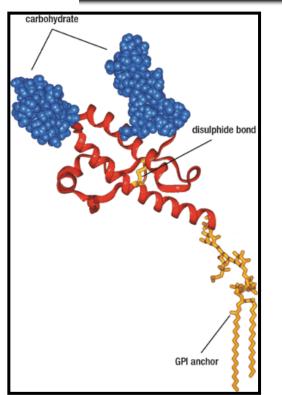
### Transmissible Spongiform Encephalopathies (TSEs) or Prion Diseases

- slow, fatal, transmissible CNS diseases
- occur in variety of mammals including humans
- can be experimentally transmitted to rodents
- incubation period: months to decades (Kuru<40y)</li>
- infection can occur from ingestion or parenteral inoculation
- TSEs are always fatal:
  - no effective pre- or post-clinical treatment
  - no sensitive, pre-clinical diagnostic test available
- no immune response to the prion agent

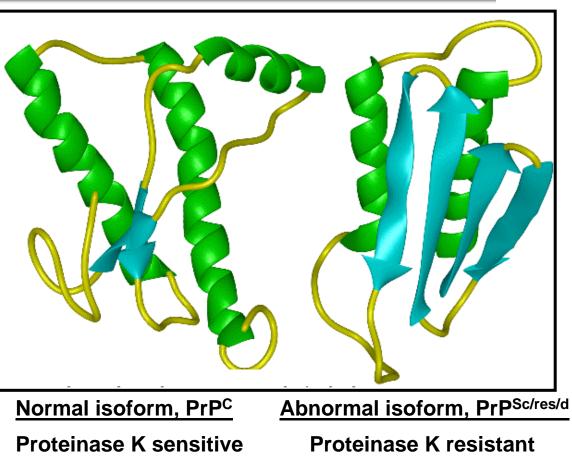
## Features of prion diseases, cont.

- Etiology: Infectious, Sporadic, Genetic
  <u>ALL</u> forms INFECTIOUS upon subsequent passage.
- Neurodegenerative Diseases
- Short clinical course: progressive & fatal.
- Neurological impairment: cognitive, motor, sensory.
- Exact nature of infectious agent still unclear (infectious protein, prion protein: PrP<sup>sc</sup>?)

### Physical and Biochemical Properties of PrP



Prion protein 33-35 kDa Two N-linked glycosylation sites Single disulfide bond GPI anchor



high  $\alpha$ -helical content

soluble

globular

onormal isoform, PrP<sup>Sc/res</sup> Proteinase K resistant high β-sheet content insoluble fibrillar

Conformational Isomers



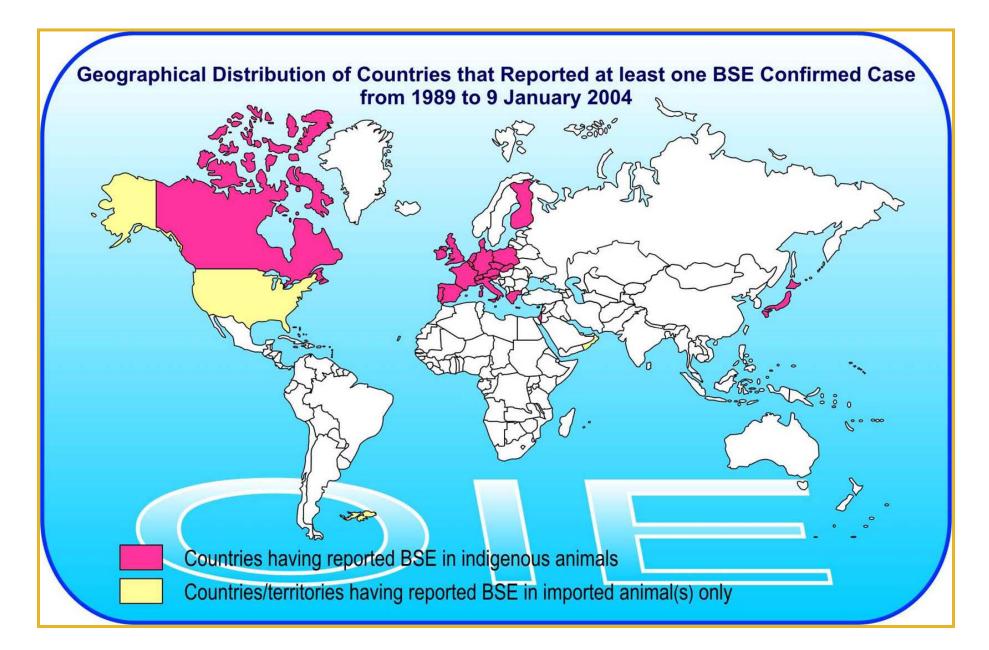
## Role of the Prion Protein (PrP) in Prion Diseases

- Normal PrP (PrP<sup>c</sup>):
  - required for infection and disease (PrP-/- mice)
  - mutations in PrP<sup>c</sup> can strongly influence susceptibility to TSE disease (or even be the basis for it!)
- Abnormal PrP (PrPsc):
  - associated with neurotoxic events in the CNS
  - always associated with infectious agent

## **BSE** in Cattle

## EPIDEMIOLOGY

- 1986: First case described in United Kingdom (to date more than 180,000 cases)
- Adult cattle: mean age of onset ~ 5 years
- Incubation time after oral infection: ~ 3 years, up to 8 years (depending on dose)



#### http://www.oie.int/Cartes/BSE/a\_Monde\_BSE.htm

## HOST RANGE

- Cattle (Bovidae) incl. exotic ungulates (EUE)
- *Felidae* family (Feline Spongiform Encephalopathy - FSE)
- Humans (Variant Creutzfeldt-Jakob Disease, vCJD): consumption of BSE contaminated products
- Experimentally: sheep, goats, pigs, mice, mink and marmosets/macaques

## Cattle: Infectious tissues

### Infectivity found in following tissues:

- Brain
- Spinal cord
- Trigeminal and dorsal root ganglia
- Ileum
- Tonsils (1/5)
- Retina
- Bone marrow
- NOT in muscle or blood!

## TRANSMISSION

- Ingestion of contaminated feed (meat & bone meal, MBM)
- No horizontal transmission
- Maternal transmission questionable

# Transmission rate of BSE in cattle, primates and mice

BSE boy	v <b>ine bra</b> i		D <sub>50</sub> primate			ID <sub>50</sub> cattle			ID <sub>50</sub> mice
	100 g	10 g		5 g	1 g	100 mg	10 mg	1 mg	0.1 mg
Cattle (oral)	10/10 (100%)	7/9 (78%)		ND	7/10 (70%)	3/15 (20%)	1/15 (7%)	1/15 (7%)	
RIII Mice (ic +ip)							17/18 (94%)	15/17 (88%)	1/14 (7%)
Primate (oral)			(	1/2 (50%)					

Adapted from Lasmézas et al., 2005

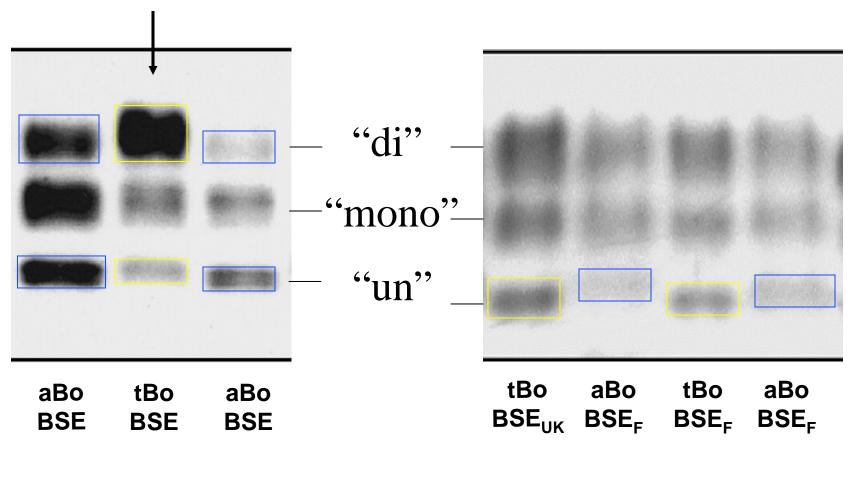
## BSE - typical/atypical strains?

- Until about 2 years ago researchers assumed that only one strain of BSE exists ("typical" BSE).
- Recently "atypical" forms of BSE have been reported in France, Italy, Japan and Belgium.

## Atypical vs. Typical BSE

- Spongiform changes: different distribution; no histopathology
- IHC: different staining and distribution pattern; negative by IHC
- Western Blot: higher or lower molecular weight of unglycosylated form
- Glycoform profile: low content of diglycosylated isoform

## Atypical BSE cases



Casalone et al., 2004

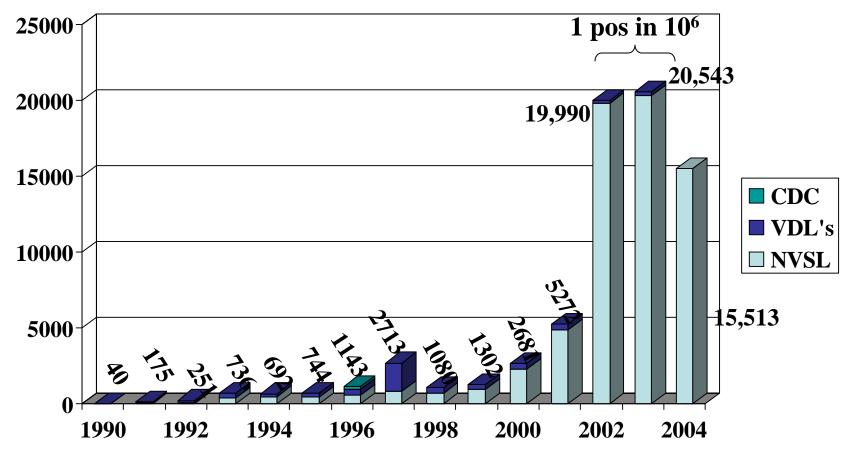
Bacarabe et al., 2003

## Atypical BSE

- Transmission attempts: To this date no successful transmission into cattle, "bovinized" mice or other animals!
- Question: Is "atypical" BSE infectious?

## BSE Surveillance in the U.S. (APHIS-VS)

## BSE Surveillance in the U.S. 1990 - 2004 (before June 1; IHC)



Lisa Ferguson, APHIS

## BSE Surveillance (since June 1, 2004)

- APHIS, in cooperation with FSIS, and FDA, has implemented an intensive national BSE surveillance plan.
- This one-time effort will help to define whether BSE is actually present in the U.S. cattle population and if so, provide better estimates of the level of disease.
- The goal of this plan is to test as many adult cattle in the targeted high-risk population as possible in a 12-18 month period (plus 20,000 healthy slaughter).
- Animal health purpose NOT food safety!

## BSE Surveillance- cont.

- If a total of 201,000 samples is collected, this level of sampling would allow us to detect BSE at the rate of 1 positive in 10 million adult cattle at a 95% confidence level.
- If a total of at least 268,500 samples is collected, this level of sampling would allow us to detect BSE at the same rate at a 99% confidence level.

Enhanced program could detect BSE if there were five positive animals in the targeted population in the entire U.S.

## BSE Surveillance: Targeted Cattle Population

Age – Over 30 months as evidenced by the eruption of at least one of the second set of permanent incisors

- 1. Non-ambulatory cattle
- 2. Cattle with CNS signs and/or rabies negative
- 3. Cattle exhibiting other signs that may be associated with BSE
- 4. Dead cattle

## Rationale for surveillance targeted at high risk cattle (EU experience)

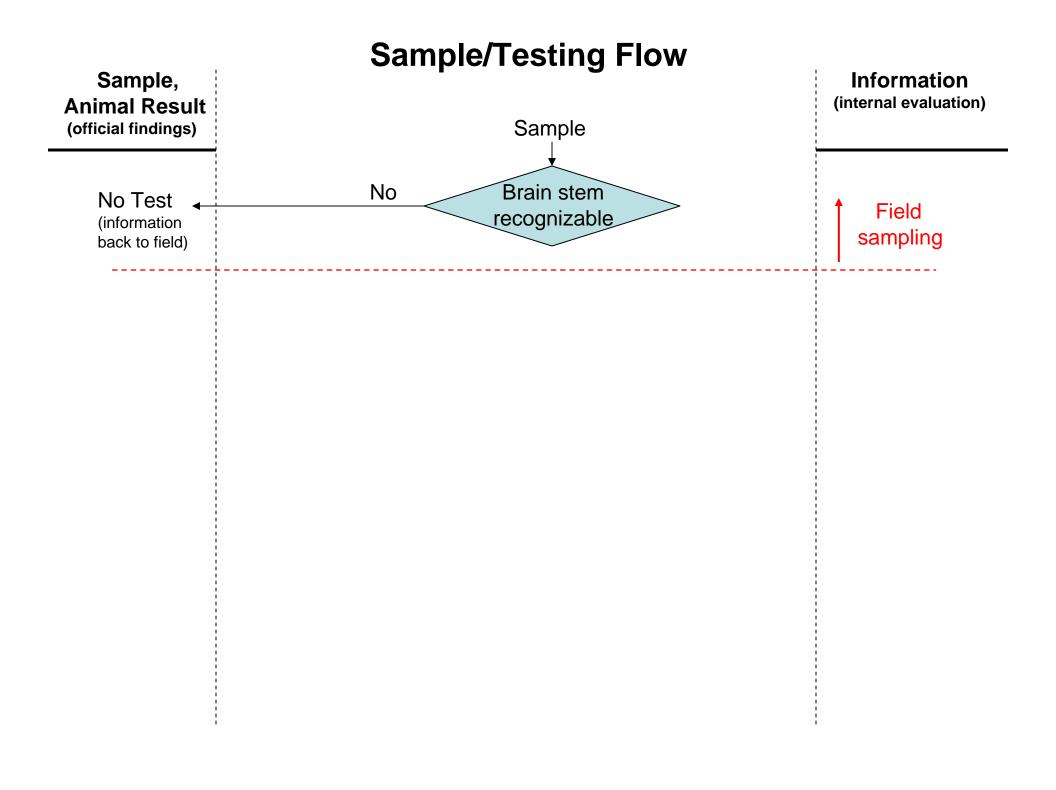
#### BSE surveillance in France (2001):

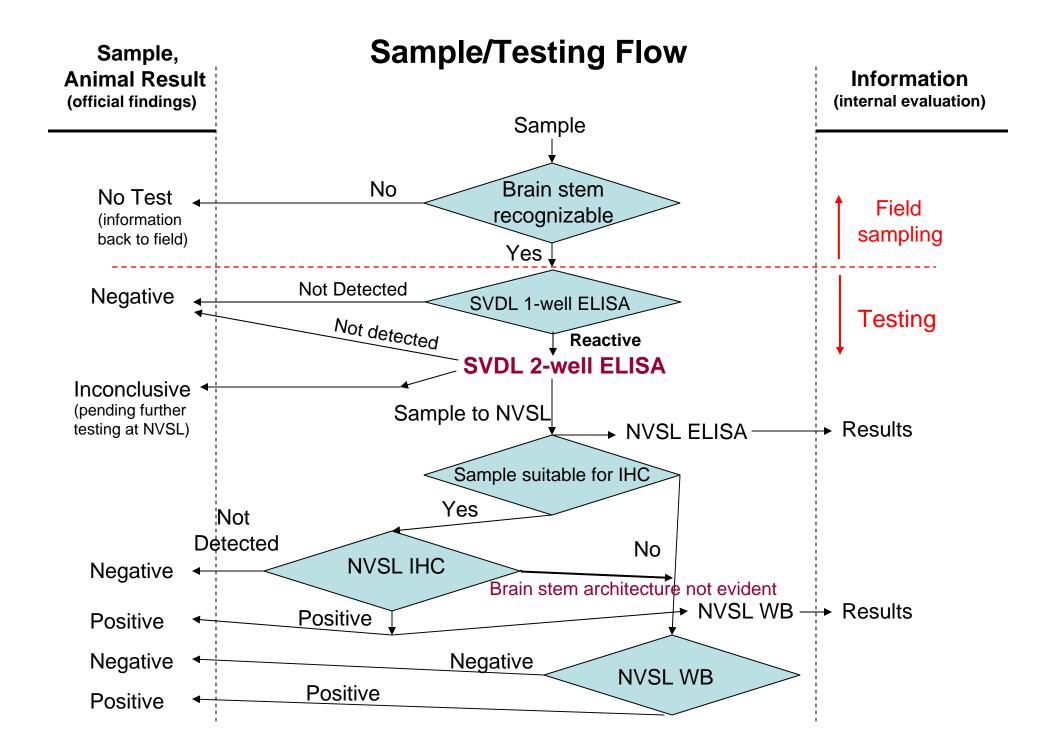
- 1. ~1/5 clinical suspects positive for BSE
- 2. ~1/1,300 non-ambulatory cattle positive for BSE
- 3. ~1/30,000 healthy slaughter positive for BSE

Targeted surveillance more effective than random sampling in detecting BSEinfected animals

## **BSE Sampling & Testing**

- Sampling at farm, slaughter & rendering facilities, veterinary clinics, livestock auctions & public health laboratories.
- Testing conducted at NVSL and 7 geographically placed contract laboratories (SVDLs)





## Laboratory Diagnosis of BSE

A laboratory diagnosis/case definition of BSE in the United States will be made if one of the following criteria is fulfilled:

- 1. Positive results by Rapid test and IHC.
- 2. Positive results by Rapid test and Western Blot in case sample is not suitable for IHC or brain stem architecture is not evident.
- 3. Positive results by IHC only in case no appropriate fresh brain tissue ("formalin fixed") is available to employ either a Rapid or Western Blot test.

# Characteristics of BSE situation in the U.S.

## Yield of positive cases from surveillance of high risk cattle:

- 1. One (imported) case from ~ 70,000 samples up to May 2004
- 2. No additional cases from >240,00,000 high risk cattle tested by Rapid test since June 1, 2004

**BSE - if present – is a rare disease in the U.S.**