

Outline







- Introduction
- · Causitive agent(s)
- · Economic Impact
- Transmission
- · Clinical Signs
- · Diagnosis and Treatment
- · Prevention and Control

Chicken infectious anemia (CIA)

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Introduction





Introduction



- Frequently complicated by secondary infection.
- CIA and closely associated syndromes have commonly been termed :
 - Haemorrhagic syndrome
 - Anaemia-dermatitis
 - Blue wing disease .

- First described in 1979 in Japan
- · Occurs in meat and egg- type chickens.
- · Worldwide in distribution .
- · CIA is characterized by:
 - · Aplastic anaemia
 - · Generalized lymphoid atrophy
 - · Retardation of growth
 - Immunosuppression
 - Increased mortality (10 60 %)
 - Impaired immune response to vaccines



Etiology





Etiology



- · Resistance to chemical and physical agents
- resistant to ethylether and chloroform
- stable at pH3
- resistant to 70°C for 1 hour
- resistant to 80°C for 15 minutes
- inactivated by 50% phenol (5 minutes)
- resistant to lipid solvents
- resistant to 5% quat. ammonium compound

- Small non-enveloped virus (25 nm)
- Family Circoviridae:
 - Genus girovirus
 - Single stranded DNA virus
- The virus replicates in haematopoietic precurser cells (bone marrow) and in thymic precurser cells (thymus cortex).
- All strains belong to one serotype.
- The virus is very resistant to a wide range of physical and chemical factors

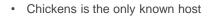






Susceptibility



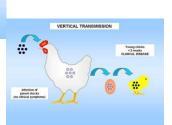


- All ages are susceptible to Infection.
- · Maternal immunity protect chicks during the first 1-3 weeks.
- · In immunosuppressed chicks maternal immunity to CIAV could be overcome
- · Outbreaks in chicks correlate with absence of maternal immunity.











Clinical signs





Clinical signs



- Apparent form (follow vertical transmission)
 - Deppression
 - Paleness
 - Anaemia (haematocrit less than 27)
 - Increased mortality (up to 60 %)
 - · Reduced weight gain
 - Focal skin lesions (blue wing disease)
 - Survivors recover 20 -28 days P.I.

In congenitally infected chicks : 10 -12 days

In horizontally infected chicks : 30 – 34 days



Clinical signs





Clinical signs



• Apparent form (follow vertical transmission)













Clinical signs





Clinical signs



- · Factors influencing morbidity and mortality
 - · Virulence of CIAV
 - Dosage
 - · Route of infection
 - · Environmental factors
 - · Age of the birds
 - · Concurrent infection
 - Other immunosuppressive factors
 - · Genetic constitution .



- Subclinical form (follow horizontal transmission)
 - · May go unobserved
 - · May cause:
 - · Slight increased mortality
 - Transient poor performance
 - (Av.B.W, Feed Conv.Ratio)
 - · Detection of antibodies in clinically normal chicks.



Immunosuppressive effects



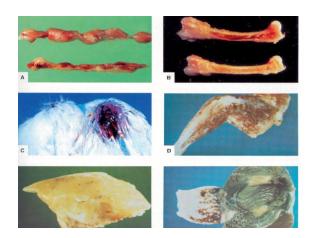


Immunosuppressive effects



- · CIAV infection up to 14 days of age depresses:
 - · Immune response to Marek,s disease and inactivated ND vaccines
- · Imunosuppression in anaemic bird is indicated by:
 - · Increased susceptibility to other infections
 - · Enhanced pathogenicity of:
 - Adenovirus
 - Reovirus
 - · Live attenuated NDV.

- · CIAV is highly immunosuppressive in susceptible
- young chicks
- · CIAV immunosuppression result from
 - · Damage to haematopoietic and lymphopoietic tissues
 - · Generalized lymphoid depletion
 - · Transient decrease in:
 - · Macrophage functions
 - · Cytokine production





Postmortem lesions



- Thymus atrophy
- Bone marrow atrophy
- Watery blood
- Hemorrhagic lesions in skin and skeletal muscles
- Discoloration and swelling of liver and spleen

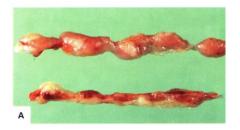














- · Microscopically
- · Almost all the hematopoietic tissue is replaced
- by adipose tissue in the bone marrow of
- CAV infected chickens



Diagnosis





Hematology



- · Flock history & Clinical signs
- · Haematological, Gross and microscopic
- · Isolation and identification of the virurs
 - Samples
 - · whole blood and buffy coat.
 - · rectal contents
 - liver homogenate (preferred)
- · Methods:
 - · Isolation in day old chicks (most specific)
 - · Isolation in cell culture

- Decrease in red blood cells
- · Decrease in white blood cells
- Decrease in thrombocytes which leads to: Watery blood
- Haematocrit values as low as 6%
- Increased clotting time





Differential diagnosis





Diagnosis



- Sulfonamide intoxication & mycotoxicosis can result in aplastic anaemia and haemorrhagic syndrome
- · MDV and IBDV : induce atrophy of lymphoid tissues
- Adenovirus: a major cause of previously designated Inclusion Body Hepatitis
- Detection of viral antigens in tissues (thymus is preferred) using FAT and IP
- Detection of viral nucleic acid using DNA probes and PCR
- · Detection of specific CIAV antibodies:
 - Neutralization test
 - Indirect FAT
 - ELISA and indirect IP .







Prevention and control





- Prevent immunosuppression
- Prevent or minimize early and heavy exposure to CIAV
- · Immunization of parent flocks several weeks before egg production
- · Good vaccination programs against MD, IBD & Reovirus to minimize immunosuppression
- Pathogen free vaccines!!!!



