Infectious bronchitis

(IB)

DEF:

- It is an acute contagious disease affecting respiratory tract of **Young chicken** ch.ch by tracheal ralls, cough & sneezing
- -In Semi mature birds infected with nephrogenic strain ch.ch by inflammation of kidney after mild respiratory sings
- -In Laying flock drop in egg production (10 20 %) for 3-4 weeks with change in shell quality, broken claza (diff in ND) & watery albumen
- -IBV targets not only the respiratory tract but also urogenital tract
- -IBV causes respiratory disease and also drops in egg production in layers and breeders
- -kidney damage can also occur.

ECONOMIC IMPORTANCE:

- 1-Poor growth performance and mortality due respiratory disease in broilers
- 2-Complication with Mycoplasma &
- E.coli
- 3-High condemnations rates
- 4-High losses due to drop in egg
- production and renal damage
- 5-High prevention cost

CAUSE:

 $45c^{0}$

- -sRNA ==corona virus, pleomorphic enveloped with spikes.
- -multiplicates in kidney, respiratory & oviduct
- -withstand PH ranged from 2-12
- -inactivated after 15 minutes at 56c⁰ and 90 minutes at
- -sensitive to most common disinfectants

Virus strains:

- -Large number of strains differs antigenically
- -Many methods are used to differentiate and classify isolates of IBV, Serotype and more recently genotype classification, based on features of the S protein, are used to classify strains.
- -IBV serotypes have been defined by VN and HI tests.

Major classification

1-Classical IB= affect respiratory & reproductive systems

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(Massachusetts = H120, H52, Ma5)
(Connecticut and Arkansas (Ark) serotype)
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- 2-Gray (nephrogenic) == kidney lesions
- 3-Variant = virulent, D247, 4/91
- Differentiated between both by ---HA --- ELISA
- -IB virus can be cultivated by inoculation on ECE via
- allantoic sac 9-11 days and after 4-5 blind passages
- =causing curling &dwarfing of embryo

Epidemiology

- -world wide distribution
- -several different serotypes can co-circulate in the same area at the same time
- -chickens are the most important natural hosts for IB
- -all ages of chickens can be infected
- -the most severe clinical signs are seen in chickens younger than 6 weeks of age -morbidity rate is dependent on the age of chickens when

infected, and presence of secondary invading organisms such

as E.coli

Transmissions: (highly contagious)

- -I.P==18-36 hrs
- -air borne infection by aerosol can spread to entire flock within one or two days
- -contaminated organic material, drinking water

Pathogenesis

- -IBV initially infects and replicates in the upper respiratory tract causing loss of protective cells lining the sinuses and trachea
- -after a brief viraemia, the virus can be detected in the kidneys, reproductive tract and caecal tonsils.
- -some strains which are nephropathogenic cause lesions in the kidney
- -renal damage associated with different IB strains which is important feature of IB infections, especially in broilers

Forms of disease:

1-Respiratory form

A-sings

- -general signs (off food, ruffled feather ...)
- -Young ages (2- 3 weeks)-gasping, cough, sneezing, tracheal ralls& nasal discharges
- -little mortality not exceeds 1% but resp. complication with other bacteria increase mortalities

B-P/M lesions

- -Rhinitis, tracheitis, mild conjunctivitis
- -caseous plug in tracheal bifurcations
- cloudy air saculitis, pericarditis, pneumonia==occur due to complications

2-Nephropathogenic form (nephropathogenic strain)

In some cases in broilers follow respiratory sings or in semi mature (6-10 weeks)

A-Sings

- -general sings (depression, ruffled feather)
- -wet dropping +whitish diarrhea
- -dropping with ureates
- -increase water intake
- -mortality up to 25%

Complicated factors for nephrogenic:

- 1-increase Ca intake
- 2-sulphonamides intake + nephrogenic strain =

urolitheiasis in chickens

3-nephrotoxins

B-P/M lesions

- -swollen pale kidneys with distended tubules, cord like ureters filled with ureates
- -ppt of Ca ppt. in kidney lobules

3-Reproductive form

- -Infection occur in layers& layers breeder during production show mild respiratory sings with drop in egg production with change in egg internal & external
- -infection in young age or recovered birds showing:
- 1-appear permanent decrease in egg production
- 2-below production curve
- 3-some bird showing egg peritonitis

P/M lesions

(False layer = blind layers)

- -shortening &dwarfing in oviduct
- -normal active ovary but short oviduct when happen ovulation ova descend in abdominal cavity
- -this can be detected by (Trape nest)
- -fluid yolk material may found in the abdomen of birds in production
- -degeneration of the ovary and swollen oviducts

DIAGNOSIS:

1-history (respiratory signs, egg production curve and poor egg quality) 2-sings 3-P/M

4-lab.diagnosis

A-Isolation

- -On 9-11 day of age E.C.E SPF eggs, several blind_passages necessary before clinical signs characteristic of IBV are observed in embryos
- -Typical lesions in embryos occurring at 5-7 days post inoculation as culling, dwarfing and red hemorrhagic with white urates deposits in kidneys

B-serological identifications (Abs for 7-10 days)

-IFAT, RT-PCR, AGPT, VNT, HI (need phospholpase C type 1 and ELISA

CONTROL:

1-Biosecurity==Hygienic measures; avoid stress factors, separation of chicken ages
2-vaccination

PREVENTION:

NB==IB, ILT, and IC----infect chicken only

- 2-vaccination: (two types of vaccines)(2 weeks interval)
 1-live attenuated classical vaccine, Massachusetts
 serotype (H120) = Spray or eye drop alone (common used,
 mild vaccine) or Ma5 vaccine
- *in combination with Hitchner or Lasota during 1st week of age
 - * (100 unit IB, 500 units Lasota)
 - *H120 against classical IB resp.
- 2-live attenuated variant vaccine (D274, 4/91) = against gray variant strain
- Methods: by oculo-nasal, spray, drinking water

- 3-oil adjuvant vaccine ==
- -for **breeder flock** to provide 1day old chick maternal immunity &protect it from false layer
- -Long lasting immunity, by injection (4-6weeks)

Protectotypes(cross protection)

New serotypes can emerge as a result of only a few changes in the amino acid sequence of S1 part, although a new serotype emerges, much of the virus genome remains unchanged, and this may be the reason that IB vaccines from a certain serotype may provide protection against IB strains not belonging to that serotype.















