

Bovine leucosis BL

(Enzootic bovine leucosis EBL) (Bovine lymphosarcoma) (Bovine leukemia)

By

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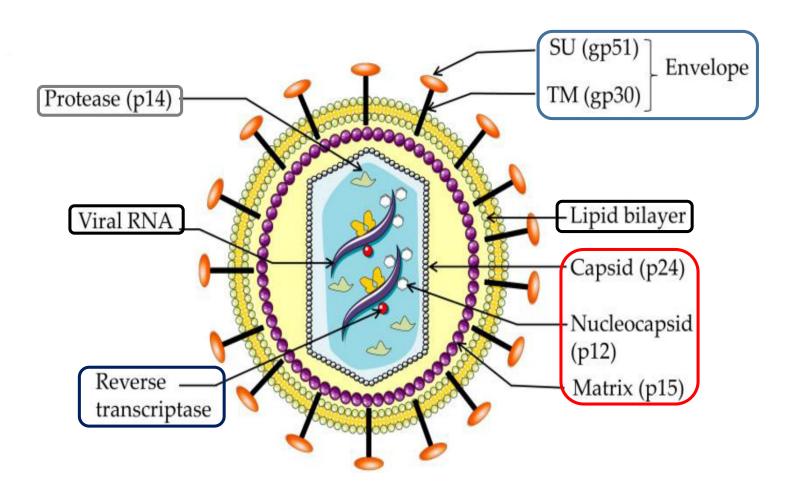
Definition

- ➤ Highly fatal systemic malignant neoplasm of the reticulo- endothelial system of cattle.
- Ch. by generalized lymphadenopathy (symmetrical enlargement of most peripheral lymph nodes).
- > Other signs as GIT, cardiac and nervous signs due to aggregations of neoplastic lymphocytes.
- ➤ Infected animals remain infected for life and carrying the virus in B- lymphocyte.

Etiology

- ➤ Bovine leukemia virus (BLV) RNA, genus Genus Deltaretrovirus Family Retroviridae cell associated not free.
- ➤ Viral protein can replicated as host cells replicate because the virus integrate its nucleic acid into the chromosomal DNA of the host cells.
- ➤ Heat labile and sensitive to lipid solvents, phenols, trypsin, formaldehyde and freezing &thawing.

Virus structure and its Genome (100 -120 nm)



• **Predisposing factors:** Genetic predisposition are the major factor where resistance to the virus infection is genetically determined.



Epidemiology

1. **Distribution:** Worldwide (Europe consider to be the homeland of the disease) and recorded in Egypt.

2. Host rang:

- Naturally affect cattle and buffaloes.
- Dairy more than beef.
- Adult more than young (rare less than 2 y).
- Experimentally infect sheep (more faster sever signs)
- 3. Seasonal incidence: Summer (more than others)

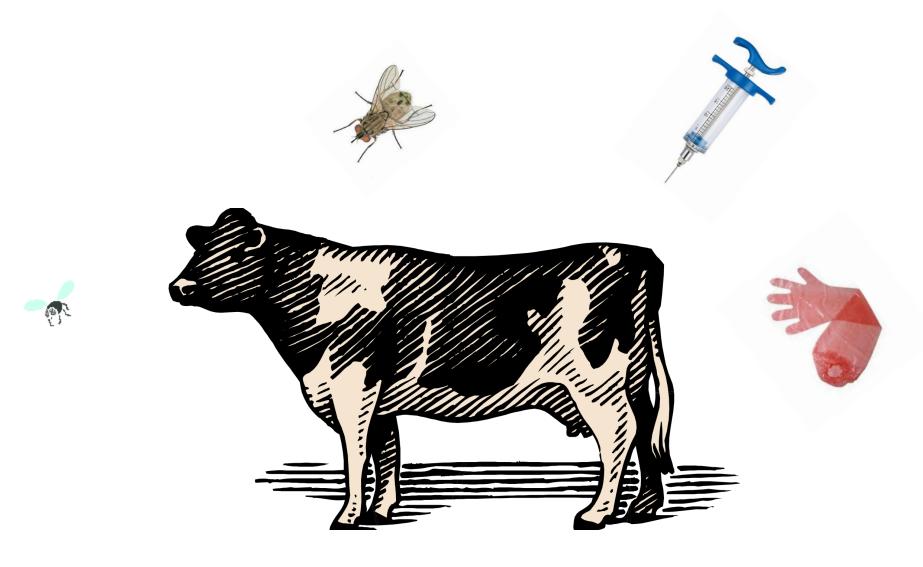
4. Transmission:

a. Source: Infected fresh blood or any secretions and excretions contain (infected B lymphocytes).

b. Mode:

1. Mainly horizontal transmission:

- Blood sucking insect (Tabanus or ticks)
- Inappropriate re-use of injection needles.
- Common gloves for rectal examination.
- Contaminated surgical instruments.
- Milk and colostrum ingestion.
- Introduction of new animals to the herd.



2. Vertical perinatal transmission 20 % (trans-placental or birth canal route) may also occur.

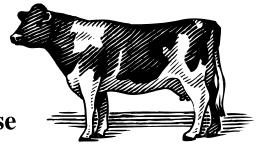
5. Economic and zoonotic importance

- 1) Decrease milk and meat production.
- 2) Decrease cow longevity.
- 3) Significant morbidity resulting from opportunistic infections following BLV infection.
- 4) Export restriction of animal and animal's product from infected localities.

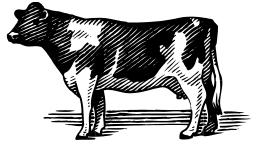
Not Zoonotic

Pathogenesis

- Genetics
- Immune states
- Size of virus infective dose





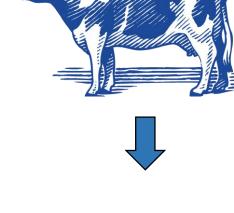




70 %

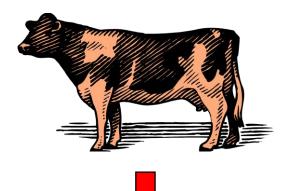
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- After infection, the virus is established in spleen for 8 days then appears in peripheral blood leukocytes.
- Antibodies are detectable in serum 6.w after infection.
- Cattle: any organ may be the site of lesion (tumors which is aggregation of neoplastic lymphocytes) but abomasum, heart, visceral and peripheral lymph nodes are mostly infected.
- Calves: visceral lymph nodes, spleen, liver are common sites.

Clinical signs (2 patterns)

1. EBL or bovine lymphosarcoma

(Represent less than 5 % of PL animals).

- Long I.P (5 years or more but in experimentally infected sheep around 2y).
- Long course.
- Low morbidity rate and high mortality.

- **A. Peracute form:** This form occurs in 5-10 % of animals, death without prior signs of illness (good body conditions) due to:
- Involvement of adrenal glands.
- Rupture of an abomasal ulcer.
- Rupture of affected spleen followed by acute internal hemorrhages.

B. Subacute & chronic form:

- o Loss of appetite.
- Slow progressive loss of weigh.
- Pale mucous membranes.
- Muscular weakness, heart rate is normal unless the myocardium is involved.
- Temperature is normal unless tumor growth is rapid and extensive and raised to 39.5-40°c.

C. Specific forms:

1. Lymph node form:

- Generalized symmetrical enlarged superficial Lns. with edema.
- Enlarged visceral Lns. which are symptomless unless they press on other organs as in intestines or nerves (detected by rectal examination).
- o Small S/C tumors masses of varying diameter on flanks and on the perineum or cover entire body.

2. Digestive tract form:

- Due to abomasal and intestinal wall involvement.
- Capricious appetite.
- o Persistent diarrhea.
- Melena due to bleeding from abomasal ulcer,
- o Tumor of medistinal Lns. cause chronic moderate bloat.
- Liver may be enlarged.

3. Cardiac form:

- Due to atrial wall involvement.
- o CHF.
- Enlargement of jugular vein and edema of brisket and sometimes intermandibular edema.
- Hydropericardium with muffling of heart sounds or tachycardia or irregularity of heart or systolic murmur.
- Hydrothorax with resulting dyspnea.

4. Nervous form:

- Due to nerves involvement.
- Neural lymphomatosis result in gradual onset of posterior paralysis.
- Cow begin to knuckle at hind fetlock while walking.
- Difficulty in getting up.
- Loss of sensation.

5. Less common lesions:

- Snoring and dyspnea.
- Bulging of eye ball.
- o Lesions in muscles, uterus, kidney and genitalia.

Clinical signs (2 patterns)

2. Sporadic bovine leucosis SBL

- Uncommon sporadic disease.
- Usually affect cattle under 3.y age.
- The virus causes this form can not cultured, nor antibody to the virus be detected in infected animals.
- Has 3 clinical forms as the following:

1. Cutaneous form (less than 3y):

- Very rare and appear as cutaneous plaques of 5-10 cm in diameter on various parts of skin as neck, back and croup.
- These plaques become covered by thick gray white scab with hair loss and depressed center.
- o The plaques start to shrink and hair grow and are disappearing after weeks or months.
- Relapse after 1-2y with Lns. involvement may occur.

2. Juvenile or calf lymphosarcoma (2 W - 6 M):

- o Fever, depression, weakness and tachycardia.
- o Gradual loss of weight.
- Sudden enlargement of all lymph nodes and many internal organs.
- Signs of pressure on internal organs as bloat or congestive heart failure
- o Posterior paresis (less constant signs).
- o Death occur after 2-8 m. of illness.

3. Thymic form (Beef cattle 1-2 years):

- Massive thymic enlargement.
- Lesions in bone marrow and regional lymph nodes.
- Jugular enlargement.
- Respiratory obstruction.
- o Local edema.

N.B:

- ❖ Sheep do not develop PL but the frequency of tumors development is much higher and earlier than in cattle.
- * Carrier state is the normal condition of the disease which persists for life of the animal and seropositive animals carrier animals with persistent lymphocytosis are the major source of infection.



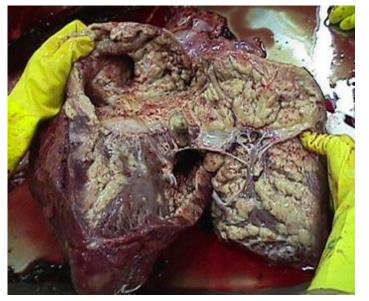






P/M lesions

- Lymphosarcoma appear in a wide range of tissues (peripheral and visceral lymph nodes, uterus, abomasum, heart, liver, spleen and kidneys) as round cell tumor infiltrated with neoplastic cells (locally or diffuse infiltration).
- In nervous system, there is thickening of peripheral nerves which may be associated with one or more circumscribed thickening in the spinal meninges.









Diagnosis

1- Field diagnosis; depends on case history, clinical signs and P/M lesions.

2. Lab. Diagnosis;

A. Sample:

- ➤ Biopsy or slices from organs as lymph nodes, bone marrow, spleen, liver, kidney, uterus.
- Milk or colostrum.
- Blood (leukocytes) and paired serum.

B. Laboratory procedures:

- 1. Virus isolation in cell cultures (cell syncytia).
- 2. Serological screening using AGID or ELISA but ELISA more sensitive and specific.
- 3. Extraction of BLV from whole blood of ELISA positive samples and detection using PCR and RT-PCR.
- 4. Sequencing and phylogenetic analysis of the isolated strains to detect the genetic relatedness worldwide.
- 5. Detection of tumor associated antigen (TAA) in tumors tissues via IFAT using monoclonal antibody.

- 6. Heamatological examination to detect PL, leukocyte count is marked increase in lymphocytes (65%).
- 7. Histopathology, tumors masses are composed of neoplastic lymphocytic cells.
- 8. Experimental infection using tumors material, milk or colostrum, blood or tissue culture virus, in cattle, sheep and goats by S/C (Infected 1000 lymphocyte can be infectious).

Differential Diagnosis

- 1. TB, tuberculin is the basis in differentiation.
- 2. Digestive form confused with johne's disease, johnin test.
- 3. Cardiac form confused with traumatic pericarditis or endocarditis, absence of fever and toxemia and there is characteristic neutriphilia.
- 4. Spinal nerves involvement:
- Spinal cord abscess (exam of CSF)

- Dumb form of rabies, has much short course beside other signs of rabies.
- 5. Snoring due to enlargement of retropharngyeal lymph nodes due to any cause as in TB.
- 6. All infectious diseases characterized by enlargement of lymph nodes as in Thelieriosis & TB

Treatment

- > No treatment should be attempted but cases should be slaughtered and
- **Prognosis** of the disease is **bad**.

Control & vaccination

Control

- ❖ Controlling of EBL at the national level usually consists of one or more of the following three approaches;
- Management interventions.
- Test and segregation.
- Test and slaughter.

- 1. Free areas: Safety procedures which aim to prevent the import of infected cattle from abroad are important to obtain BLV free herd;
- An appropriate quarantine period upon cattle arrival and serological testing of it against BLV antibodies,
- Using closed trading system without introduction of animals from infected localities

2. Endemic areas:

- A. Traditional management practices are recommended:
- Single use of hypodermic needles and reproductive examination sleeves.
- Use of AI instead of bulls for breeding purposes.
- Control of stable flies and other biting insects.
- o feeding calves only heat-treated colostrum or colostrum replacers.
- O Cleaning and disinfecting blood contaminated equipment between animals during routine procedures such as application of ear tags, tattooing, and dehorning.

(All these practices might eventually decrease the prevalence of BLV-infected cattle to a level sufficiently low)

2. Endemic areas:

- B. Real-time PCR and culling cattle with high BLV proviral loads.
- C. Hematological basis of culling older cows with higher WBCs and lymphocytes.
- D. Genetic selection of animals with resistance genes in their major histocompatibility complex class II (MHC-II) producing BLV resistant animals against BLV infection.
- Vaccination: No available commercial vaccine for field application.

