MALIGNANT CATARRHAL FEVER (MCF)

* It is a worldwide sporadic, fatal, multisystemic disease of domestic cattle and wild ruminants (deer, buffalo, antelopes) that is caused by a gammaherpesvirus characterized by lymphoproliferation, vasculitis, and erosive-ulcerative mucosal and lesions cutaneous predominantly affecting respiratory the and gastrointestinal systems.

MALIGNANT CATARRHAL FEVER (MCF)

Cause:

caused by closely related rhadinoviruses (y-herpesviruses); Alcelaphine herpesvirus 1 (Wildebeest associated) or Ovine herpesvirus 2 (Sheep associated)

Clinical Findings

•Fever, nasal/ocular discharge, edema of eyelids and palpebral conjunctivae, corneal opacity, diarrhea, lymphadenopathy, dermatitis, oral erosions and CNS signs

Clinical Findings

- •Four clinical forms:
 - 1. Peracute: 1-3 day course with fever and possible hemorrhagic diarrhea
 - 2. Intestinal: 4-9 day course with fever, lymphadenopathy, diarrhea
 - 3. Head and eye: Typical form, longer duration than above with depression, high fever, profuse mucopurulent nasal discharge, dyspnea, ocular discharge, blepharospasm
 - 4. Mild: In experimental cases that recover

Gross Findings

- >Lymph nodes: Enlarged, edematous; characteristic lesion
- >Mucosal surfaces: Hyperemia and edema, erosions and ulcerations.
- ➤ Gastrointestinal tract: Extensive mucosal erosions from oral cavity to rectum (especially in deer), edema, hemorrhage.
- Respiratory: Serous to mucopurulent nasal discharge, crusted muzzle, edematous lungs, gray-yellow pseudomembranes that cover laryngeal and pharyngeal erosions

Gross Findings

- Eye: Corneal edema, conjunctivitis, corneal opacity (edema), ocular mucopurulent discharge, +/- corneal ulceration, blepharedema, chemosis and hypopyon
- ➤ Kidney: infarcts or multiple raised 2-4mm white necrotic lesions, ecchymotic hemorrhages, renomegaly
- Liver: Slightly enlarged and mottled
- > Spleen: Enlarged with prominent lymphoid follicles
- Skin: (base of horns and hooves, loins and perineum): Hyperemia to exanthema with crust formation and shedding of hoof wall
- >CNS: Meninges wet, possibly with petechial hemorrhages

Microscopic Findings

- Vessels (Necrotizing vasculitis): Perivascular and intramural infiltrates of lymphocytes and lymphoblasts; fibrinoid necrotizing vasculitis in all tissues
- >Lymphocytic infiltrate: in kidneys, liver (periportal), GI mucosa, dermis, meninges, heart, etc.
- > Kidney: Infarcts, foci of nonsuppurative (lymphocytic) interstitial nephritis.
- Lymph node: Active proliferation of lymphoblasts, especially in T cell-dependent areas of interfollicular and paracortical zones; Severe edema, ectatic lymphatics, lymphocytic and reticuloendothelial cell proliferation
- **Example 2.** Eymphocytic uveitis and ophthalmitis; corneal edema, secondary to vasculitis, is responsible initially for the opacity

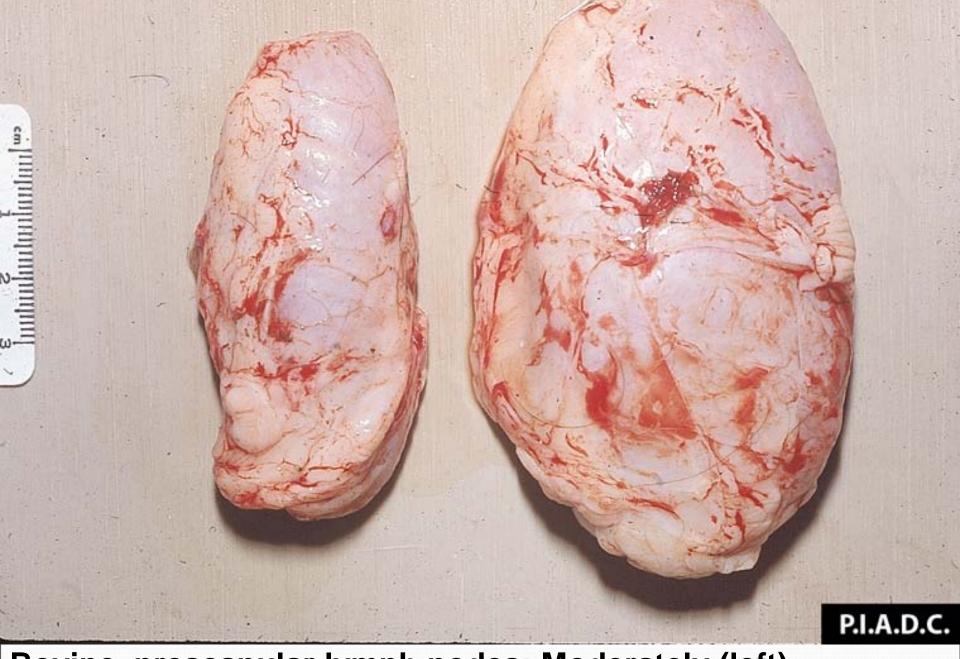
Microscopic Findings

- Spleen: Variation between lymphoid cell hyperplasia in the periarteriolar sheaths to atrophy and depletion of lymphocytes
- CNS: Perivascular edema, nonsuppurative meningoencephalomyelitis, lymphocytic perivascular cuffing
- ➤GI: Edema, congestion, mucosal erosions, abomasal ulcers and submucosal eosinophilic inflammation
- **≻Oral and pharyngeal mucosa:** Epithelial necrosis, lymphocytic stomatitis and pharyngitis
- Skin: Exudative lymphocytic dermatitis, edema, epithelial necrosis

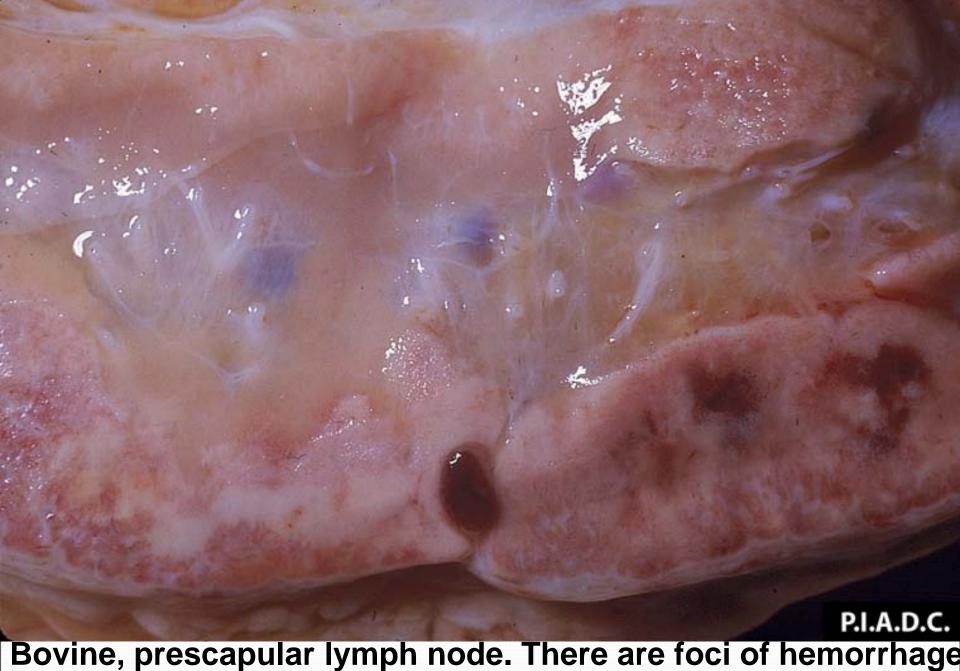




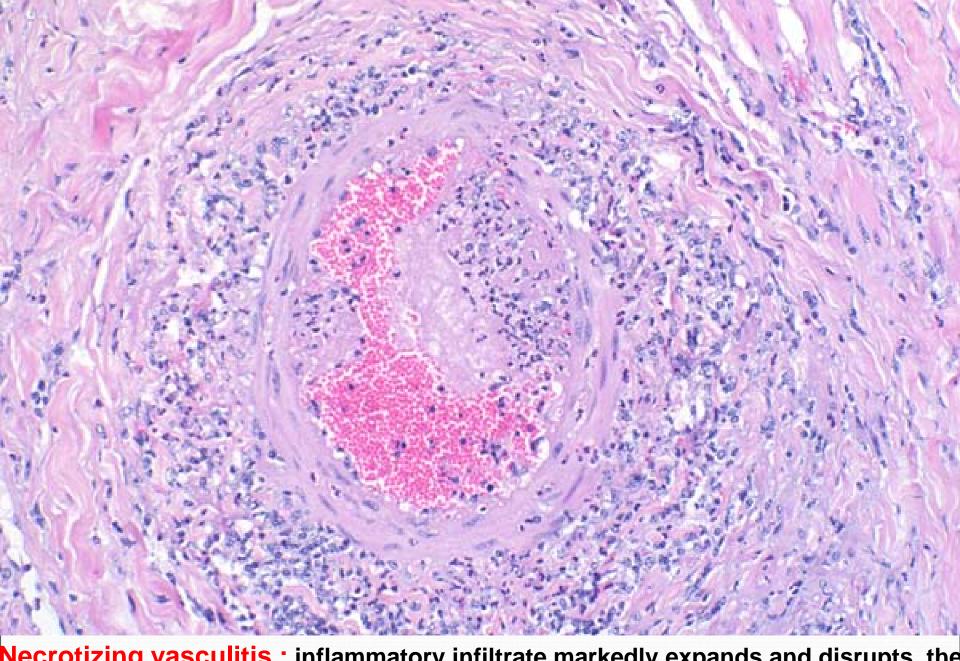
Bovine, muzzle. The muzzle is hyperemic, multifocally covered by adherent mucopurulent exudate, and contains many shallow erosions



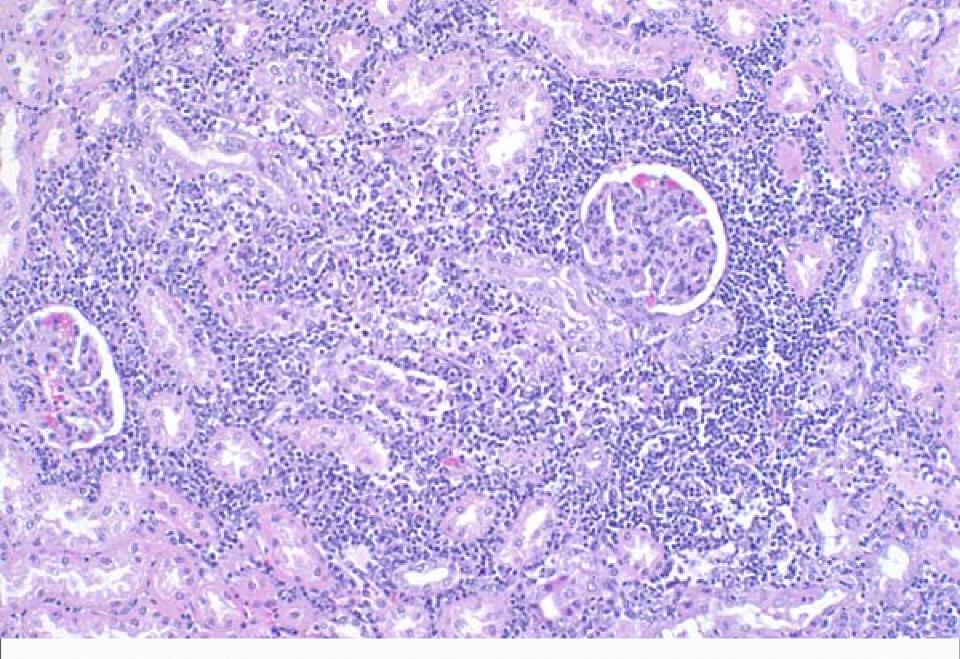
Bovine, prescapular lymph nodes: Moderately (left) to markedly enlarged (right) due to MCF.



(and necrosis) in the cortex, and the medulla is edematous.



Necrotizing vasculitis: inflammatory infiltrate markedly expands and disrupts the tunica media and adventitia, admixed with cellular and karyorrhectic necrotic debris



lymphocytic interstitial nephritis