AETIOLOGY

Classification of the causative agent

African swine fever virus (ASFV) is a DNA virus in the Asfarviridae Family; genus Asfivirus. ASFV is the sole member of its genus but viral genotypes have been identified by restriction enzyme and sequence analysis. Virulence of ASFV isolates vary greatly and standard nomenclature of isolates includes City or Country of isolation and last two digits of year of isolation (e.g. Lisbon '60, DR '78). It is the only known DNA arbovirus.

Resistance to physical and chemical action

Temperature: Highly resistant to low temperatures. Heat inactivated by 56°C/70 minutes; 60°C/20 minutes.

pH: Inactivated by pH <3.9 or >11.5 in serum-free medium. Serum increases the resistance of the virus, e.g. at pH 13.4 – resistance lasts up to 21 hours without serum, and 7 days with serum.

Chemicals/Disinfectants: Susceptible to ether and chloroform. Inactivated by 8/1000 sodium hydroxide (30 minutes), hypochlorites – 2.3% chlorine (30 minutes), 3/1000 formalin (30 minutes), 3% ortho-phenylphenol (30 minutes) and iodine compounds.

Survival: Remains viable for long periods in blood, faeces and tissues; especially infected, uncooked or undercooked pork products. Can multiply in vectors (Ornithodoros sp.).

EPIDEMIOLOGY

ASF epidemiology is complex with different epidemiological patterns of infection occurring in Africa and Europe. ASF occurs through transmission cycles involving domestic pigs, wild boars, wild African suids, and soft ticks.

Hosts

- African wild swine (warthogs *(Phacochoerus aethiopicus)*, bush pigs *(Potamochoerus* sp.), giant forest hogs *(Hylochoerus meinertzhageni)*) are usually inapparently infected and act as reservoir hosts of ASFV in Africa
- Hosts that demonstrate disease: domestic pigs *(Sus domestica)*, European wild boar, and American wild pigs
- Ticks of the genus *Ornithodoros* are considered the natural arthropod host and there exists some speculation that ASFV is a virus of arthropods and that mammalian species, such as domestic swine, represent “accidental hosts”

Transmission

- Direct transmission:
  - contact between sick and healthy animals
- Indirect transmission:
  - feeding on garbage containing infected meat (ASFV can remain infectious for 3–6 months in uncooked pork products)
  - biological vectors – soft ticks of the genus *Ornithodoros*
  - fomites include, premises, vehicles, implements, clothes
- Within tick vector: transstadial, transovarial, and sexual transmission occur
Sources of virus

- Blood, tissues, secretions and excretions of sick and dead animals
- Animals which have recovered from either acute or chronic infections may become persistently infected, acting as virus carriers; especially in African wild swine, and in domestic pigs in enzootic areas
- Soft ticks of the genus Ornithodoros

Occurrence

African swine fever is enzootic in most countries of Sub-Saharan Africa including Madagascar. In Europe, it has been reported and successfully eradicated from the Iberian Peninsula but continues to be found in Sardinia. In the 1970s, ASFV was present in the Caribbean (Haiti and the Dominican Republic) and one country in South America (Brazil) but was successfully eradicated. Most recently, it has appeared in the Caucasus (Georgia, Azerbaijan, and Armenia) and Russia.


DIAGNOSIS

Incubation period in nature is usually 4–19 days; acute form 3–4 days. For the purposes of the OIE Terrestrial Animal Health Code, the incubation period in Sus scrofa is 15 days.

Clinical diagnosis

Peracute (highly virulent virus)

- Sudden death with few signs

Acute form (highly virulent virus)

- Fever (40.5–42°C)
- Early leucopenia and thrombocytopenia (48–72 hours)
- Reddening of the skin (white pigs) – tips of ears, tail, distal extremities, ventral aspects of chest and abdomen
- Anorexia, listlessness, cyanosis and incoordination within 24–48 hours before death
- Increased pulse and respiratory rate
- Vomiting, diarrhoea (sometimes bloody) and eye discharges may exist
- Death within 6–13 days, or up to 20 days
- Abortion may occur in pregnant sow
- Survivors are virus carriers for life
- In domestic swine, the mortality rate often approaches 100%

Subacute form (moderately virulent virus)

- Less intense signs; slight fever, reduced appetite and depression
- Duration of illness is 5–30 days
- Abortion in pregnant sows
- Death within 15–45 days
- Mortality rate is lower (e.g. 30–70%, varies widely)

Chronic form (moderately or low virulent virus)

- Various signs: loss of weight, irregular peaks of temperature, respiratory signs, necrosis in areas of skin, chronic skin ulcers, arthritis
- Pericarditis, adhesions of lungs, swellings over joints
- Develops over 2–15 months
- Low mortality

**Lesions**

**Acute form (not all lesions are seen; this depends on the isolate)**

- Pronounced haemorrhages in the gastrohepatic and renal lymph nodes
- Petechial haemorrhages of the renal cortex, also in medulla and pelvis of kidneys
- Congestive splenomegaly
- Oedematous areas of cyanosis in hairless parts
- Cutaneous ecchymoses on the legs and abdomen
- Excess of pleural, pericardial and/or peritoneal fluid
- Petechiae in the mucous membranes of the larynx and bladder, and on visceral surfaces of organs
- Oedema in the mesenteric structures of the colon and adjacent to the gall bladder; also wall of gall bladder

**Chronic form**

- Focal caseous necrosis and mineralisation of the lungs may exist
- Lymph nodes enlarged

**Differential diagnosis**

- Classical swine fever (CSF or hog cholera)
  - not possible to differentiate ASF and CSF by clinical or post-mortem examination; essential to send samples for laboratory examination
- Porcine reproductive and respiratory syndrome (PRRS)
- Erysipelas
- Salmonellosis
- Aujeszky’s disease (or pseudorabies) [younger swine]
- Pasteurellosis
- other septicaemic conditions

**Laboratory diagnosis**

**Samples**

**Identification of the agent**

- A complete set of field samples should be submitted and especially:
  - blood collected during the early febrile stage in EDTA (0.5%)
  - spleen, lymph nodes, tonsil and kidney kept at 4°C

**Serological tests**

- Serum collected within 8–21 days after infection in convalescent animals

**Procedures**

**Identification of the agent**

- Isolation:
  - cell culture inoculation (primary cultures of pig monocytes or bone marrow cells – most isolates produce haemadsorption)
• a) Haemadsorption test (HAD) – positive HAD test result is definitive for ASF diagnosis (two procedures)
  o procedure 1: in primary leukocyte cultures
  o procedure 2: ‘autorosette’ test with peripheral blood leukocytes from infected pigs

• b) Antigen detection by fluorescent antibody test (FAT) – positive FAT plus clinical signs and appropriate lesions can provide a presumptive diagnosis of ASF

• c) Detection of virus genome by the polymerase chain reaction – PCR techniques are particularly useful when samples may be unsuitable for virus isolation or antigen detection (putrefaction)

d) Pig inoculation is no longer recommended for use

Serological tests

• a) Enzyme-linked immunosorbent assay (the prescribed test for international trade)
• b) Indirect fluorescent antibody (IFA) test – should be used as a confirmatory test for sera from areas that are free from ASF and are positive in the ELISA, and for sera from endemic areas that give an inconclusive result in the ELISA
• c) Immunoblotting test – used as an alternative to the IFA test to confirm equivocal results with individual sera

For more detailed information regarding laboratory diagnostic methodologies, please refer to Chapter 2.8.1 African swine fever in the latest edition of the OIE Manual of Diagnostic Tests and Vaccines for Terrestrial Animals under the heading “Diagnostic Techniques”.

PREVENTION AND CONTROL

Sanitary prophylaxis

ASFV-recovered carrier swine and persistently infected wild pigs require special consideration in controlling the disease.

Free countries

• Careful import policy for animals and animal products
• Proper disposal of waste food from aircraft or ships coming from infected countries
• Efficient sterilisation of garbage

In outbreaks

• Rapid slaughtering of all pigs and proper disposal of cadavers and litter is essential
• Thorough cleaning and disinfection
• Designation of infected zone, with control of pig movements
• Detailed epidemiological investigation, with tracing of possible sources (up-stream) and possible spread (down-stream) of infection
• Surveillance of infected zone, and surrounding area

Infected countries

• Avoid contact between pigs and soft tick vectors or their habitats (Africa) – i.e. prevent pigs from wandering

Medical prophylaxis

• No treatment
• No vaccine to date

For more detailed information regarding safe international trade in terrestrial animals and their products, please refer to the latest edition of the OIE Terrestrial Animal Health Code.
REFERENCES AND OTHER INFORMATION

- Spickler A.R., & Roth J.A. Iowa State University, College of Veterinary Medicine - http://www.cfsph.iastate.edu/DiseaseInfo/factsheets.htm

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The OIE will periodically update the OIE Technical Disease Cards. Please send relevant new references and proposed modifications to the OIE Scientific and Technical Department (scientific.dept@oie.int). Last updated April 2013.