

FOWLPOX

SUMMARY

Fowlpox is a disease of chickens and turkeys caused by a DNA virus of the genus Avipoxvirus of the family Poxviridae. Its distribution is world-wide. It is slow-spreading and characterised by the formation of proliferative lesions and scabs on the skin, and diphtheritic lesions in the upper parts of the digestive and respiratory tracts. In the case of the cutaneous form, the mortality rate is usually low and affected birds are more likely to recover than those with the diphtheritic form. In the diphtheritic form, proliferative lesions involving the nasal passages, larynx or trachea can result in respiratory distress and death from suffocation.

Fowlpox causes a transient drop in egg production and a reduced growth rate in young birds.

Identification of the agent: *Fowlpox should be suspected where skin eruptions occur on exposed areas. Histological examination of cutaneous or diphtheritic lesions reveals epithelial hyperplasia with intracytoplasmic inclusions in affected cells. Elementary bodies may be detected in smears from lesions by the use of the Gimenez method. Electron microscopy of lesions will detect virus particles with the characteristic poxvirus morphology by negative staining or in ultrathin sections of the lesion.*

The diphtheritic form of fowlpox involving the trachea must be differentiated from infectious laryngotracheitis, which is caused by a herpesvirus and is characterised by the presence of intranuclear inclusion bodies.

Virus isolation is done by inoculation on to chorioallantoic membranes of 9–12-day-old developing chicken embryos or avian cell cultures.

Serological tests: *Immune responses to fowlpox virus may be demonstrated by the use of virus neutralisation, agar gel immunodiffusion, immunofluorescence, or passive hemagglutination tests, enzyme-linked immunosorbent assay and by immunoblotting.*

Requirements for vaccines and diagnostic biologicals: *Modified live fowlpox or pigeon pox virus vaccines of chicken embryo or avian cell culture origin are available commercially. The use of vaccines is indicated in areas where the disease is endemic, or on premises where infection has been diagnosed.*

A. INTRODUCTION

The morphology of the fowlpox virus is like that of other viruses of the poxviridae family. The mature virus (elementary body) is brick shaped and measures about 330 × 280 × 200 nm. The outer coat is composed of random arrangements of surface tubules. The virion consists of an electron-dense centrally located biconcave core or nucleoid with two lateral bodies in each concavity and surrounded by an envelope. The 288 kbp fowlpox virus genome encodes for over 250 genes.

Fowlpox has a world-wide distribution and is caused by a DNA virus of the genus *Avipoxvirus* of the family *Poxviridae* (17, 21). Its incidence is variable in different areas because of differences in climate, management and hygiene or the practice of regular vaccination. It can cause drops in egg production, or retarded growth in younger birds.

Fowlpox is a slow-spreading virus disease of chickens and turkeys, characterised in the cutaneous form (dry pox) by the development of proliferative lesions, ranging from small nodules to spherical wart-like masses on the skin of the comb, wattle and other unfeathered areas. In the diphtheritic form (wet pox), slightly elevated white opaque nodules develop on the mucous membranes. They rapidly increase in size to become a yellowish diphtheritic membrane. Lesions occur on the mucous membranes of the mouth, oesophagus, larynx or trachea. The mortality

rate is higher in the diphtheritic form than in the cutaneous form, sometimes nearing 50% particularly in young birds. Integration of reticuloendotheliosis virus (REV) sequences has been observed in the genome of fowlpox virus (11, 13). It is interesting that this insertion event occurred over 50 years ago (7). While most field strains contain REV provirus, vaccine strains have only remnants of long terminal repeats (13). Virulence is enhanced by the presence of REV provirus in the genome of field strains of fowlpox virus. Complete sequence of the genome of a vaccine-like strain of fowlpox virus has been determined (1). The functions of the majority of the genes are not known at this time. It is however, interesting that the virus tends to persist in the poultry environment for extended periods of time where other viruses may not survive. In this regard the presence of photolyase gene and A-type inclusion body gene in the virus genome appear to protect the virus from environmental insults (15, 16). Antigenic cross-reactivity is observed among avianpox viruses and it appears that many genes are conserved. Limited studies on antigenic, genetic and biologic comparison of fowlpox virus with other avianpox viruses especially those that infect the wild birds are available. Recently, complete sequence of canarypox virus genome has become available.

B. DIAGNOSTIC TECHNIQUES

1. Identification of the agent

Fowlpox virus multiplies in the cytoplasm of epithelial cells with the formation of large intracytoplasmic inclusion bodies (Bollinger bodies) that contain smaller elementary bodies (Borrel bodies). The inclusions can be demonstrated in sections of cutaneous and diphtheritic lesions by the use of haematoxylin and eosin (H&E), acridine orange or Giemsa stains (19). The elementary bodies can be detected in smears from lesions, for example by the Gimenez method (18), which is described below. Electron microscopy can be used to demonstrate viral particles of typical poxvirus morphology by negative staining or in ultrathin sections of infected tissues (3).

a) A smear technique for fowlpox

- i) Place a drop of distilled water and the lesion (cutaneous or diphtheritic) on a clean slide. Prepare a thin smear by pressing the lesion with another clean slide and rotating the upper slide several times.
- ii) Air dry and gently fix the smear over a flame.
- iii) Stain the smear for 5–10 minutes with freshly prepared primary stain (8 ml stock solution¹ of basic fuchsin mixed with 10 ml of phosphate buffer², pH 7.5, and filtered through Whatman filter paper No. 1).
- iv) Wash thoroughly with tap water.
- v) Counterstain with malachite green (0.8% in distilled water) for 30–60 seconds.
- vi) Wash the smear with tap water and then dry.
- vii) Examine the smear under oil immersion. The elementary bodies appear red and are approximately 0.2–0.3 µm in size.

b) Virus isolation

Fowlpox virus can be isolated by the inoculation of suspected material into embryonated chicken eggs. Approximately 0.1 ml of tissue suspension of skin or diphtheritic lesions, with the appropriate concentration of antibiotics, is inoculated on to the chorioallantoic membranes (CAMs) of 9–12-day-old developing chicken embryos. These are incubated at 37°C for 5–7 days, and then examined for focal white pock lesions or generalised thickening of the CAMs. Histopathological examination of the CAM lesions will reveal eosinophilic intracytoplasmic inclusion bodies following staining with H&E (19, 22).

Primary chicken embryo fibroblasts, chicken embryo kidney cells, chicken embryo dermis cells, or the permanent quail cell line QT-35, can also be used to propagate fowlpox virus (6, 10). The adaptation of virus strains to cell cultures is an important requirement for plaque formation, as not all strains will form plaques initially.

c) Molecular methods

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- 1 Stock solution: A solution of basic fuchsin (5 g) in 95% ethanol (100 ml) is slowly added to a second solution of crystalline phenol (10 g) in distilled water (900 ml). This stock solution, kept in a tightly screw-capped glass bottle, is incubated for 48 hours at 37°C, and then stored at room temperature.
 - 2 Phosphate buffer, pH 7.5: NaH₂PO₄H₂O (2.47 g) and Na₂HPO₄ (11.65 g) are added to distilled water (1000 ml) and stored at 4°C.

Restriction fragment length polymorphism (RFLP) analysis can be used for comparison of field isolates and vaccine strains of fowlpox virus (6, 10). However, this procedure is not used in routine diagnosis.

Cloned genomic fragments of fowlpox virus can be used effectively as nucleic acid probes for diagnosis of fowlpox. Viral DNA isolated from lesions can be detected by hybridisation either with radioactively or nonradioactively labelled genomic probes. This method is especially useful for differentiation of fowlpox from infectious laryngotracheitis when tracheal lesions are present (5).

Genomic DNA sequences of various sizes can be amplified by the polymerase chain reaction (PCR) using specific primers (4, 8). This technique is useful when there is only an extremely small amount of viral DNA in the sample.

2. Serological tests

Although both cell-mediated immunity (CMI) and humoral immunity play an important role in poxvirus infections, routine use of the CMI test is not convenient. Therefore, serological tests, such as virus neutralisation (VN), agar gel immunodiffusion (AGID), passive haemagglutination and fluorescent antibody tests as well as the enzyme-linked immunosorbent assay (ELISA), are used to measure specific humoral antibody responses. Evidence of successful immunisation with vaccine can be determined by examining a flock 7–10 days after vaccination for 'takes'. A take consists of a swelling of the skin or a scab at the site where the vaccine was applied and its presence is evidence of successful immunisation.

a) Virus neutralisation

After virus/serum interaction, the residual virus activity may be assayed in embryonating chicken eggs or in cell cultures (9). This technically demanding test may not be convenient for routine diagnosis. Only some selected strains of the virus have plaque-forming ability in chicken embryo cells. Neutralising antibodies develop within 1–2 weeks of infection.

b) Agar gel immunodiffusion

Precipitating antibodies can be detected by reacting test sera against viral antigens. The antigen can be derived by sonication and homogenisation of infected skin or CAM lesions as well as by treatment of infected cell cultures as described in Section B.2.f below. The lysed suspension is centrifuged and the supernatant is used as antigen. Gel-diffusion medium is prepared with 1% agar, 8% sodium chloride and 0.01% thiomersol. The viral antigen is placed in the central well and the test sera are placed in the peripheral wells. It is important to include a positive and negative control serum. The plates are incubated at room temperature. Precipitation lines develop in 24–48 hours after incubation of the antigen with antibody to homologous or closely related strains. The test is less sensitive than the ELISA (2) or the passive haemagglutination test (23).

c) Passive haemagglutination

Tanned sheep or horse red blood cells are sensitised with a partially purified fowlpox viral antigen (20). The antigen is prepared from infected CAMs or cells as described in Section B.2.f below. Passive haemagglutination is more sensitive than AGID. The test will give cross-reactions among avian pox viruses.

d) Fluorescent antibody tests

Direct or indirect immunofluorescence tests will reveal specific intracytoplasmic fluorescence in infected cells. The latter test is commonly used and involves two steps: the antibody against fowlpox virus is reacted with the antigen in the infected cells, followed by a secondary fluorescein-isothiocyanate-labelled antibody against chicken gamma globulin (e.g. goat anti-chicken). Such labelled antibodies are available commercially. In this regard, formalin-fixed tissue sections can be used effectively for fluorescent antibody tests.

e) Immunoperoxidase

Specific staining of cytoplasmic inclusions is achieved when horseradish-peroxidase-conjugated specific polyclonal antibody against fowlpoxvirus is reacted with the hydrated sections of fowlpox-infected fixed tissues (CAM and skin) or cell culture. Similar results are obtained when either polyclonal or monoclonal antibodies are used in an indirect test. An advantage of the technique is that the sections can be examined with the light microscope and can be stored for an extended period without loss of colour (19).

f) Enzyme-linked immunosorbent assay

ELISAs have been developed to detect humoral antibodies to fowlpox virus. They are capable of detecting antibody 7–10 days after infection (2), but commercial kits for this test are not available.

Fowlpox virus antigens are prepared either from infected QT-35 cell monolayers or CAM lesions. Infected QT cells are pelleted (700 *g* for 10 minutes at 4°C), washed with isotonic buffer (10 mM Tris, pH 8.0, 150 mM NaCl, 5 mM ethylene diamine tetra-acetic acid [EDTA]) followed by lysis in hypotonic buffer (10 mM Tris, pH 8.0, 10 mM KCl, 5 mM EDTA) containing 0.1% Triton X-100 and 0.025% beta-mercaptoethanol. Nuclei and cellular debris are removed by low-speed centrifugation (500 *g* for 5 minutes at 4°C) and the resulting supernatant is used as a source of fowlpox virus antigens for ELISA or immunoblotting. To isolate viral antigen from CAM lesions, initial grinding of the lesions with subsequent detergent treatment as described earlier would be required. Virus propagated in chicken embryo fibroblasts and chicken embryo dermis cells has also been used for antigen. The antigen preparation is as described for QT cells.

Wells of microtitre plates are coated with 1 µg of soluble fowlpox virus antigen in 100 µl of coating buffer (15 mM Na₂CO₃, 35 mM NaHCO₃, pH 9.6) and incubated overnight at 4°C (2, 19). Each well is then rinsed once with wash solution (0.29 M NaCl, 0.05% Tween 20) and then blocked with phosphate buffered saline (PBS, pH 7.4) containing 3% bovine serum albumin (BSA) for 1 hour at 37°C. After one wash, serial dilutions of the test sera in PBS containing 1% BSA are added to the wells. After rocking for 2 hours at 37°C, the wells are washed three times prior to the addition of 100 µl/well horseradish-peroxidase-conjugated goat anti-chicken IgG (H+L) antibodies³ at a recommended dilution in PBS. After 2 hours' incubation at 37°C and three subsequent washes, 100 µl of the peroxidase substrate TMB³ is added to each well. Reactions are terminated by the addition of 1 M phosphoric acid and absorbance at 450 nm is recorded using an ELISA plate reader⁴.

g) Immunoblotting

Antigenic variations between strains of fowlpox virus can be evaluated by means of immunoblotting or Western Blotting. In this method, viral antigens separated by SDS-PAGE (sodium dodecyl sulphate-polyacrylamide gel electrophoresis) are reacted either with polyclonal or monoclonal antibodies against fowlpox virus (6, 12, 14). This method is not convenient for routine diagnosis.

C. REQUIREMENTS FOR VACCINES AND DIAGNOSTIC BIOLOGICALS

Early studies indicated the feasibility of protecting chickens from fowlpox by the use of pigeon pox or fowlpox viruses (21, 23). Vaccination is indicated in areas where fowlpox is endemic or on premises where infection has been diagnosed previously. Live fowl and pigeon pox virus vaccines, and also fowlpox vectored vaccines that protect against pox, are available commercially. These vaccines are derived from chicken embryos or avian cell cultures.

Guidelines for the production of veterinary vaccines are given in Chapter 1.1.8 Principles of veterinary vaccine production. The guidelines given here and in Chapter 1.1.8 are intended to be general in nature and may be supplemented by national and regional requirements.

Passively acquired immunity should be taken into consideration during vaccination of progeny from flocks that have either had a recent natural infection or been recently vaccinated. As passive immunity (for 2–3 weeks) may interfere with vaccine virus multiplication, such progeny should be vaccinated only after the decline of passively acquired antibody. Fowlpox vaccine is applied by a wing web stab method.

1. Seed management

a) Characteristics of the seed

A master seed virus (MSV) must be established and used according to a seed-lot system. A record must be kept of its origin, passage history and characteristics. Viruses used may be either fowlpox or pigeon pox viruses. The MSV must be propagated in suitable premises with materials that meet approved standards, and must be tested for freedom from contamination as well as for identity and purity.

b) Method of culture

The MSV may be propagated in specific pathogen free (SPF) chicken embryos, using the CAMs, or in avian cell cultures, such as primary chicken embryo fibroblasts, chicken embryo kidney or chicken embryo dermis.

c) Validation as a vaccine

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4 Dynatech, Chantilly, Virginia, United States of America.

i) *Purity*

The MSV may be neutralised with a specific hyperimmune serum before testing for purity. Because of difficulty in neutralising avian pox virus, it is acceptable to centrifuge the MSV at 1000 *g* for 20 minutes, followed by filtration through a 0.2 µm filter. The neutralised or filtered MSV is then used in tests to demonstrate freedom from extraneous agents. These tests should be done in embryonating eggs or avian cell cultures, to demonstrate absence of extraneous virus replication, and in SPF chickens, to demonstrate freedom from antibodies to extraneous agents.

ii) *Safety*

Vaccines should be prepared only from virus that is a stable attenuated strain or a naturally occurring isolate of low virulence.

The vaccine must be shown to be safe by the recommended route of administration, which is wing web stab, in all ages of susceptible birds. A suitable test is to take ten SPF chickens and inoculate each by piercing the wing web with a needle dipped in the vaccine. The birds are observed for 7–10 days for evidence of ‘takes’ and for the absence of adverse effects attributable to the vaccine. A ‘take’ consists of swelling of the skin or a scab at the site where the vaccine was applied and is evidence of successful vaccination. The safety test should be repeated after at least six serial passages of the virus in SPF chickens to show that there has been no reversion to virulence.

iii) *Efficacy*

Data should be obtained using the highest passage level (fifth passage from the master seed) and the lowest titre of virus to be used in the final product: 20 SPF chickens of the minimum age indicated for vaccination should receive one dose of vaccine by the recommended method. The chickens, together with 20 unvaccinated chickens of the same age and source, should be challenged 3 weeks later by scarification with a virulent strain of fowlpox virus. The birds should be observed for 3 weeks. Ninety per cent of the control birds should develop lesions due to the challenge virus and at least 90% of the vaccinated birds should remain free from such lesions.

2. Method of manufacture

Vaccine is manufactured on a seed-lot system from the validated MSV. This must be done in approved premises designed to avoid the risk of contamination. All media and cell cultures must be tested to ensure freedom from contamination.

3. In-process control

During the process of validation as a vaccine, the efficacy data must be compared to the virus content of the vaccine. A suitable potency can thus be established. The vaccine should be filled into final containers to ensure that each container has sufficient virus to achieve the specified potency.

4. Batch control

a) **Sterility**

Tests for sterility and freedom from contamination of biological materials may be found in the Chapter 1.1.9.

b) **Safety**

The safety test described in Section C.1.c.ii above, except the requirement for six passages in SPF chickens, should be used on each batch of vaccine.

c) **Potency**

Virus content tests should be carried out using each of at least three containers. The dilutions should span 0–100% infection range, using five-fold dilution steps and at least seven replicates per dilution. Tests should be done in parallel with a standard vaccine, if available. Each lot of vaccine should be titrated in the diluent provided for its use. The virus titre should not normally be higher than 1/10 of the dose at which the vaccine has been shown to be safe and must not be lower than the release titre determined in the test for efficacy. A suitable potency for an attenuated live fowlpox vaccine is likely to be in the region of 10⁵ EID₅₀ (50% embryo infective dose) per ml.

d) **Duration of immunity**

The efficacy test given in Section C.1.c.iii may be used to determine the duration of immunity (approximately 6–12 months) by testing at intervals after vaccination, using separate groups of birds for each test.

e) Stability

Evidence of stability must be presented to justify the shelf life. This should be based on virus titrations carried out at intervals until 3 months beyond the requested shelf life on at least six batches of vaccine kept under recommended storage conditions.

f) Preservatives

Preservatives are not used in live vaccines.

g) Precautions (hazards)

It is usually recommended not to vaccinate birds that are in lay. Avoid human contact with the live vaccine. Standard fowlpox vaccine is not to be used in pigeons, though they can be vaccinated with pigeon pox vaccine. In many countries, pigeon pox vaccine has been superseded by attenuated live fowlpox vaccine designed for use in day-old chicks. These products have been safely used in pigeons in the absence of an available pigeon pox vaccine.

5. Tests on the final product

a) Safety

The safety test described in Section C.1.c.ii above is used on each batch.

b) Potency

The potency test described in Section C.4.c above is used on each batch.

ACKNOWLEDGMENT

This work was supported by funds from Illinois Agricultural Experiment Station Regional Project.

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