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Single Radial Hemolysis Technique in Comparison with Indirect Hemagglutination and Agar Gel Precipitation tests for Assaying Antibodies against Infectious Bursal Disease Virus

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Abstract

The interaction between antibodies and the surface antigens of infectious bursal disease virus particles was studied in the agarose gel by using single radial hemolysis (SRH) test. Sonicated antigen was used to sensitize the Human "O" erythrocytes. Hemolytic zones, using the filter paper discs were observed after overnight incubation in humid chamber at 37°C. Indirect Hemagglutination (IHA) and agar gel precipitation tests (AGPT) were also performed and compared with SRH. Out of 50 serum samples, the percentage of positive samples using SRH, IHA and AGP tests were 70, 58 and 38 respectively, which showed the sensitivity in decreasing order. Results revealed that SRH is simple, sensitive, quick and particularly suitable for the routine screening of serum samples and assessing the immune status of birds against infectious bursal disease virus.

Keywords: Single radial hemolysis test, Serodiagnosis, Infectious bursal disease

Introduction

Infectious bursal disease (IBD) is an immunosuppressive and economically important disease of poultry causing considerable losses (Anjum *et al.*, 1993). Immunosupression results from the depletion of Blymphocytes and secondary infections associated with Infectious bursal disease (Lukert and Saif, 1991). Chickens of 3-6 weeks of age are more susceptible to clinical infection (Ley *et al.*, 1983). Very virulent infectious bursal disease virus can cause even 60-100% mortality (Cao *et al.*, 1995).

A number of serodiagnostic tests are available to diagnose the clinical cases of infectious bursal disease including indirect hemagglutination test (Aliev *et al.*, 1990), agar gel precipitation test (Castello *et al.*, 1987), Enzyme linked immunosorbent assay (Cao *et al.*, 1995) and counter immuno-electrophoresis (Hussain *et al.*, 2002). Single radial hemolysis test has generally been reported to be a simple, sensitive and reliable test that now is being frequently used as a highly specific and reproducible test for detecting Influenza virus (Gibson *et al.*,1985), Rubella virus (De Ory *et al.*,1985), Parvovirus (Fastier, 1981), Arbovirus (Mel Nikova, 1980) Vaccinia virus (Prakash *et al.*,1977), Adenovirus (Grandien and Norrby, 1975), Measles virus (Fenwich, 1986) and Foot-and-mouth disease virus (Rweyemamu *et al.*,1980), Rinderpest virus (Bansal *et al.*,1986), Reovirus (D'Ambrosio, 1981), NewCastle disease virus (Shiv Cheran *et al.*,1980), Rabies virus (Ferguson and Schild, 1982) and Poliovirus (Schild *et al.*,1980).

No work has been reported to detect the antibodies against IBD using SRH. The present paper reports the standardize and application of SRH test for the detection of IBD antibodies and its comparison with with IHA and AGP tests.

Materials and Methods Preparation of antigen

Antigen was prepared following the method adapted by Hussain *et al.*, (2002). Briefly, after collection of IBDV affected bursa, they were chopped, mixed with PBS (pH 7.2) to prepare 10% (w/v) suspension, homogenized and finally were subjected to ultra-sonification in a jacketed vessel using rapidis 600 at an intensity of 75 watts/cm² with titanium probe (15cm dia) for 5 minutes. The temperature was kept under 20°C. The sonicated antigen was centrifuged at 5000 rmp for 15 minutes; supernatant was collected in a sterile stoppered glass tube as sonicated antigen.

Hyper immune serum

The hyper-immune serum was raised against D78 (commercial vaccine) in rabbits according to Barnes *et al.*, (1982). IBDV (field isolate) was confirmed using the modified counter immuno-electrophoresis (Hussain *et al.*, 2002) fand agar gel precipitation (Castello *et al.*, 1987) tests.

Washed human group "O" and sheep erythrocytes were used in the present study. The erythrocytes were sensitized according the procedure adapted by Rehman *et al.* (1990).

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Serum Samples

Fifty serum samples of broiler birds were collected from different commercial broiler farms in Faisalabad. After heat inactivation (56°C for 25-30 minutes) in water bath they were subjected to agar gel precipitation, indirect hemagglutination and single radial hemolysis tests.

Single radial hemolysis test

Single radial hemolysis test was performed as described by Rehman et al., (1990). One percent Noble agar was prepared in physiological normal saline, autoclaved and kept at 46°C. One ml of sensitized RBCs suspension was added to 5 ml molten Noble agar (1 %) with 0.05 ml of fresh guinea pig complement (serum). The material was layered (2-3 mm thickness) on microscopic glass slides and was shifted to refrigerator at 4° C for 15 minutes for proper solidification. Filter paper discs (6mm diameter) soaked in inactivated serum samples (absorbed 35 µl amounts each), were placed on the agar slides 2 cm apart from each other. These slides were kept at 37 °C in a humid chamber and at 4° C for overnight incubation. Sensitized sheep erythrocytes were treated similarly. Zones of hemolysis were observed and measured.

Agar gel precipitation test (AGPT)

Agar gel precipitation test was carried out as described by Sulochana and Lalithakanjamma, (1991).

Indirect hemagglutination test (IHA)

Indirect hemagglutination test was performed according to the method of Aliev *et al.*, (1990). Briefly, after making two-fold serial dilution of the test serum, equal quantity of sensitized human "O" RBCs (1%) were added to each well of one plate and in the other, sensitized sheep RBCs were used. The plates were gently tapped to ensure even dispersion of erythrocytes and then kept at 37^{0} C for 30 minutes of incubation.

Results and Discussion

Out of 50 serum samples, the percentage of positive results by using SRH, IHA and AGPT were 70, 58 and 38 respectively, which showed the sensitivity in decreasing order. Indirect hemagglutination antibody titre ranged from 1:4 to 1:128 both by using the sheep and human 'O' erythrocytes (Table1 and 2). It was observed that human ʻO' ervthrocvtes gave comparatively bigger and easily demarcated zone of hemolysis (Table 2) and the colour of human 'O' remained unaltered ervthrocytes while sheep erythrocytes turned light brown after sensitization. Similar results were reported by Rehman et al., (1990). Human 'O' erythrocytes and chromium chloride (CrCl₂) treated sheep erythrocytes were used for sensitization of sonicated IBDV antigen and it was seen that the quality of hemolysis produced by either of the RBCs found quite comparable but on account of ease and time saving human 'O' erythrocytes may be preffered for use in SRH and IHA tests. It was also observed that hemolytic zones obtained using sheep erythrocytes appeared somewhat hazzy and poorly demarcated. Rehman et al., (1990) used the veronal buffer, which is commonly used in complement fixation test, and is a suitable medium as it helps to adsorb the complement on to the surface of agar gel (Cruickshank, 1975) but in the present study physiological saline was used which gave equally good and comparable results.

No non-specific zone of hemolysis was observed in heat inactivated serum samples indicating the inactivation of avian complement by heating. The most suitable temperature for getting maximum zone of hemolysis was 37 $^{\circ}$ C in a humid chamber for overnight incubation. No zone of hemolysis was observed at 4 $^{\circ}$ C incubated for overnight. Fastier (1981) and Rehman *et al.*, (1990) reported similar temperature conditions for SRH test.

Table 1. Average hemolytic zone diameter with respect to the did Aor 1.					
IHA positive Samples	IHA Titer	SRH (Diameter mm)	Mean ± SD	AGPT Positive samples	
9 (31.03%)	1:4	6-8	6.86 ± 0.90	2 (10.52%)	
6 (20.69%)	1:8	7-9	8.20 ± 1.30	3 (15.79%)	
3 (10.34%)	1:16	9-10	9.67 ± 1.52	3 (15.79%)	
4 (13.80%)	1:32	10-11	10.75 ± 1.25	4 (21.05%)	
5 (17.24%)	1:64	11-14	12.80 ± 0.89	5 (28.31%)	
2 (6.90%)	1:128	14-16	15.50 ± 0.70	2 (10.52%)	

Table 1: Average hemolytic zone diameter with respect to IHA titer and AGPT.

Table 2: Average zone diameter with respect to temperature using Sheep erythrocytes and Human "O" erythrocytes.

IHA Titer	SRH (Zone Diameter)				
	Sheep I	RBCs	Human "O" RBCs		
	(37 °C)	(4 °C)	$(37^{0}C)$	$(4^{\circ}\mathrm{C})$	
1:4	6.57 ± 0.78	-	6.86 ± 0.90	-	
1:8	7.40 ± 0.89	-	8.2 ± 1.30	-	
1:16	8.66 ± 00.57	-	9.67 ±1.52	-	
1:32	9.25 ± 0.95	-	10.75 ± 1.25	-	
1:64	10.60 ± 01.34	_	12.80 ± 0.89	-	
1:128	12.00 ± 01.41	-	15.50 ± 0.70	-	

SRH and IHA tests were compared statistically to find out the correlation. Calculated correlation co-efficient (r) between SRH and IHA was 0.837, which was highly significant (P>0.01). The regression equation to the above data was SRH = 6.05 + 0.07 (IHA). χ^2 (Chi-square) values for SRH vs. AGPT and SRH vs. IHA comparisons were found to be 9.623 and 23.31 respectively, both of which were found significant at 0.01 probability level.

The present study revealed that SRH test is simple, quick, inexpensive and gave comparable results with IHA and AGPT for measuring antibody titer in birds against IBDV.

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