

Emergence of Inclusion Body Hepatitis with novel clinical presentation from Southern Punjab-Pakistan

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ABSTRACT

Inclusion body hepatitis (IBH) is a common disease of poultry caused by adenovirus. The disease has no significant signs and it has been remarkably increased in the case ratio in the area near Cholistan University of Veterinary and Animal Sciences Bahawalpur with no coincidence of chicken infectious anemia (CIA) or infectious bursal disease (IBD). The liver was shiny with plasticity appetite along with ecchymosis and petechial hemorrhages. Kidneys were also swollen with atrophied bursa. The disease increased about 3 to 4 folds in the neighboring area.

Keywords: Inclusion Body Hepatitis, Poultry, Pathology, Chicken infectious anemia, Infectious bursal disease

Introduction:

Inclusion body hepatitis (IBH) is caused by avian adenovirus and comes with coincidence with chicken anemia virus and infectious bursal disease. The transmission is mostly by horizontal and it can also spread vertically. It is characterized by sudden death and mortality may reach as high as 40 percent¹. The clinical signs are not apparent and some clinical signs are shown like pallor of comb, wattle and skin, bursa reduced in size, hepatomegaly and splenomegaly, and kidneys are swollen and pale. The prominent postmortem lesion is a large dystrophic liver with yellowish color². The infected birds remains carrier for a period of few weeks³. There may be prominent yellowish mucoid droppings. Treatment is not much affected and there is no vaccination in practice¹. If we control IBH then we have to control IBD and CIA. Recently there is a surge in number of cases of IBH in the Southern Punjab-Pakistan without obvious signs and identification of CIA and IBD.

Case description:

Recently in the territory of Cholistan University of Veterinary and Animal Sciences Bahawalpur in the Bahawalpur district of Southern Punjab, there are remarkable increased number of presented cases and post mortem of IBH. Mostly presented birds are between 3 to 8 weeks old. Birds are mostly kept in controlled shed and are fed with commercially prepared feed having 22% crude protein.

Physical examination:

Usually IBH signs are not significant. Pale skin, comb and wattle, yellow mucoid droppings, no nasal and ocular discharge. Ruffled feathers and no ticks and external parasites in feathers.

Postmortem examination:

The liver was enlarged and swollen with yellowish discoloration and multifocal red hemorrhages. Liver was plastic-like in consistency with shiny outer surface. Yellowish appearance of skin, wattle and comb. Kidneys were pale and swollen. Bursa was also atrophied. Leg muscles also had petechial hemorrhages. The amount of Pericardial fluid was been increased. There were no tracheal hemorrhages. There was no anemia as there was no aplasia in the bone marrow. The bursa was also reduced in size and there was no evidence of Infectious bursal disease.

Discussion:

Inclusion body hepatitis occurs along with CIA or IBD infections¹. The same finding was published in International Journal of Veterinary Sciences and Animal Husbandry 2018 in a publication⁴. There was also less frequency of cases of IBH in south Punjab. There is a prominent increase in this frequency of cases. These cases were presented without clinical and postmortem signs of Chicken infectious anemia and Infectious bursal disease.

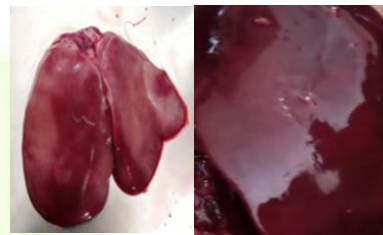


Fig:3 Tibial bone of broiler bird without anemic signs

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