Original Article

Evaluation of Quality of Two Commercial Oil-Emulsion

Newcastle Disease Vaccines In-vivo and In-vitro

Rajabi Z^{1*}, Aslnajjari A²

- 1. Poultry diseases division, Clinical Sciences Department, Faculty of veterinary medicine, university of Tabriz, Tabriz, Iran
- 2. Resident in poultry diseases at faculty of veterinary medicine, University of Shiraz, Shiraz, Iran

Abstract

Background and Aims: Newcastle disease (ND) is a highly contagious disease in poultry with economic losses in the world. Vaccination is one of the most important ways for prevention and control of NDV, but there are reports of ND outbreaks in vaccinated chickens. Poor quality of the vaccines is one of the reasons of vaccine failure. In this study the quality of two commercial oil-emulsion Newcastle disease virus (OE-NDV) vaccines was evaluated in in-vitro and in-vivo.

Materials and Methods: For in-vitro study, the amount of total protein and quantity of retrieved hemagglutination activity (HA) of the vaccines were recovered and measured, then, the amount of recovered total protein and retrieved HA were compared with the serologic responses induced in chickens by each vaccine(in-vivo study).

Results: The results showed that the extracted total protein , recovered HA titer, and Mean HI titers to vaccine A are higher than vaccine B. The results also indicated that there is a good correlation between retrieved HA activity, extracted total protein and antibody response to vaccine A, but about vaccine B, there is no good correlation between total protein and retrieved HA activity and antibody response.

Conclusions: Quality of Vaccine B is lower than vaccine A, likely because of many reasons particularly improper storage of the vaccine, inappropriate harvesting of egg allantoic fluid and inactivation of NDV.

Keywords: Hemagglutination activity, Total protein, vaccine potency, Hemagglutination inhibition.

Introduction

ewcastle disease virus (NDV) which is a member of the paramyxoviridae family causes highly contagious disease in poultry and other birds. It widespreads in all over the world causing economic problems (1).

Although, vaccination is one of the most important ways for prevention and control of NDV (1-7), there are reports of ND outbreaks in vaccinated chickens (8-10). The poor

quality of the vaccines is one of the reasons of vaccine failure.

Evaluation of potency of inactivated NDV vaccines usually is achived in vivo by vaccination and subsequent HI test and challenge of birds (11).

In addition of in vivo study, determination of retrieved HA activity (12,13) and determination of the extracted total protein of inactivated NDV vaccines, will help us get more information for developing of the vaccines. The previous studies indicated that it is possible to extract total protein from inactivated avian influenza vaccines and retrieve HA activity with aqueous partition method (14,15). In this study we evaluated the the quality of two commercial inactivated OE-NDV vaccines in in-vivo, and in-vitro by both

^{*}Corresponding author: E-mail: rajabi@tabrizu.ac.ir Faculty of Veterinary Medicine, university of Tabriz, 29Bahman BLV, Tabriz, Iran., postal Code:5166616471 Tel: +989123937276, Fax: +984136378743

the determination of the amount of extracted total protein and determination of the quantity of regained hemagglutination (HA) activity.

Methods

Vaccines. Two available commercial inactivated NDV vaccines, A and B, were applied for this study.

Aqueous partition method. For determining the aqueous phase of the OE vaccines, 5 mL of each vaccine mixed with 3 mL of 1-hexanol in a centrifuge tube at room temperature and centrifuged at 1000 g for 15 min at 4°C to separate and measure aqueous phase volume. To recover the HA antigen, 45 doses of each vaccine, 4.5 mL of the vaccine A and 22.5 mL of the vaccine B, were separately added to a centrifuge tube that contained the appropriate quantities of PBS, 4.5 mL and 22.5 mL respectively, Aqueous phase of each vaccine, and PBS to aqueous phase ratios determined the volume of PBS. They were placed in an ice bath, and cooled to 0°C. The contents were mixed by a Homogenizer (IKA ULTRA-TURRAX® T 18 basic) at 20000 rpm for 50 seconds at 4°C. The mixtures were then centrifuged at 1000 g for 15 min at 4°C to allow separation of PBS fraction from the OE vaccine (13). Recovery of HA activity of the vaccines was done 2 days before vaccination.

Hemagglutination Assay. Hemagglutination test was achived as recommended by (16). PBS fraction of the vaccines was used for determining hemagglutination activity of retrieved hemagglutinin. HA activity determined and expressed as reciprocal dilution titer.

Determination of the extracted total protein. Protein concentration of PBS fraction of the vaccines was determined by the method of Lowry et al.(17) using crystalline bovine serum albomin as standard. Briefly, 2% Na2CO3 mixed with 0.1 normal NaOH and called A reagent, 0.5% CuSO4.5H2O mixed with 1% sodium tartrate and called B reagent, 50 mL of reagent A mixed with 1 mL of reagent B and called C reagent. For measuring extracted total protein of the vaccines, 0.2 mL of PBS fraction of each vaccine separately mixed with 1 mL of

reagent C, after 10 min incubation at room temperature, 0.1 mL of 1 normal of Folin-Ciocalteu reagent was added and completely mixed. After 30 min the sample was read in a spectrophotometer which adjusted to a wavelength of 550 nm. Standard curve prepared in concentrations of 25, 50, 100, 200 and 400 μg/mL of BSA.

Efficacy of the vaccines in broiler chickens. Seventy two day-old broiler chickens (Ross 308®) were obtained from a commercial hatchery and reared by standard practices. Before vaccination they randomly divided into three groups (I, II and III), each group had two subgroups, and placed in separate cages (12 chickens/cage). Group I and group II received vaccine A (0.1 mL/ dose), and vaccine B (0.5 mL/dose) respectively in the dorsal cervical region via the subcutaneous route at 11 days of age, the group III received PBS (0.5/dose) as a control group. Blood samples were taken at five weeks old, approximately three weeks post-vaccination, for HI serology.

Hemagglutination inhibition assay. This test was achived as recommended by Alexander et al. (18). Mean NDV HI titers of each group was determined and expressed as reciprocal. Statistical analysis. One-way ANOVA and Duncan multiple range tests were used for analysis of HI titers. The SPSS statistics, 22 version, was used for statistical analysis.

Results

Aqueous phase of the vaccines. OE-vaccines consist of two phases, oil phase and aqueous phase, antigens of OE- vaccines are in the aqueous phase. In this study the aqueous phase of both vaccines was 1.2 mL/5mL of the each vaccine. These results indicated that aqueous to oil ratios are different between each dose of the vaccines.

Recovered haemagglutinin titers. The HA titers of vaccine A and B which recovered by the aqueous partition technique were 9 and 2 respectively (Table 1). These results showed that the aqueous partition method, similar to a previous study on inactivated NDVs vaccines (Stone 1985) can retrieve HA antigen from commercial inactivated NDV vaccines; in

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Vaccinesa	HA titerc	Total proteind μg/mL	HI e at 24-day post vaccination
А	9	2.65	4.5 ± 0.31c
В	2	2.50	3.4 ± 0.29b
Cb	0	0	0.1 ± 0.07a

addition, the amount of active hemagglutinin of vaccine A is much more than vaccine B per dose.

Extracted total protein. The extracted total protein of vaccine A and B was 2.65 and 2.50 µg/mL of PBS fraction of the vaccines respectively. These results indicated it was possible to determine the extracted total protein, and the extracted total protein of vaccine A is more than vaccine B.

HI mean titers. The mean HI titers of chickens which vaccinated with vaccine A and B were 4.6 and 3.4 respectively, which statistically there is significant difference between them (P<0.05). These results indicated that the efficacy of vaccine A was more than vaccine B (Table 1).

Discussion

NDV occurs in poultry industry of developed developing countries despite and widespread use of vaccination (19-21), therefore, it is necessary to continue evaluation developing and of **NDV** vaccines. Immunogenicity of NDV inactivated vaccines on different factors inactivating agents, type of adjuvant and content of antigens (22,23). At least 90% variations in HI antibody titers after NDV vaccination could be related to differences in NDV-HN and F content of the vaccines (24). The influence of intact hemagglutinin protein of NDV vaccines in immunity against Newcastle disease has been confirmed by researchers (1,11,12).**NDV** inactivated vaccine must have 400-600 intact HA units per dose for prevention of Newcastle disease (11), which has direct correlation with hemagglutinin titers. In this study, the results of recovered haemagglutinin titers indicated

that the content of NDV and indirectly content of intact HA in vaccine A is more than vaccine B. because the recovered HA titer of vaccine A is 4.5 times higher than vaccine B.

Commercial NDV inactivated vaccines usually produced by growing virus in eggs, and then treating whole virus with inactivating agents (24), therefore the extracted total protein, in addition of hemagglutinin protein may also contain other immunogenic proteins, and nonimmunogenic proteins of NDV, but we know that there is high correlation between content of total protein and content of immunogenic proteins of the virus. In this study, there was not much difference between the total protein of vaccine A and B, in spite of much difference in retrieved HA activity and antibody response. It means probably either the harvesting of allantoic fluid from eggs or inactivation of NDV or conditions of storage had been incorrect in vaccine B; for any reason, quantity of inactivated whole NDV and subsequently recovered HA activity of the vaccines were different, in spite of using the equal doses and the same ratios of PBS to aqueous part of vaccines for extraction.

There is a good correlation between presence of HI antibody titers and protection from ND at day of challenge (2,12), therefore postvaccinal serology, usually HI test, is used to evaluate an adequate immune response by the bird to vaccination (1). The results of this study indicate that the immunogenicity of vaccine A is more than vaccine B.

The presence of adequate amount of intact hemagglutinin and other immugenic antigens of NDV, indirectly total protein of NDVs, in inactivated NDV vaccines are necessary for good protection (2,11,24). There are reports that indicate there is high correlation between the log NDV -HN content of OE-NDV

vaccines and HI antibody titers (12), and between antibody response and HAU per vaccine dose (11). The previous studies also indicated that there is high correlation between extracted total protein of inactivated avian influenza vaccines and retrieved HA activity and HI titers (15). The present study indicate that there is a good correlation between retrieved HA activity, extracted total protein and antibody response to vaccine A, but about vaccine B, there is no good correlation between total protein and retrieved HA activity and antibody response.

Conclusion

Quality of Vaccine B is lower than vaccine A, likely because of many reasons particularly improper storage of the vaccine, inappropriate harvesting of egg allantoic fluid and inactivation of NDV.

Acknowledgements

The authors would like to thank the Research Council of the University of Tabriz for funding this research.

References

- 1. Miller PJ, Koch G, Suarez D. Newcastle disease, other avian paramyxoviruses, and avian metapneumovirus infections .In Swayne DE, Glisson JR, Mcdougald LR, Nolan LK, Suarez DL, Nair V, editors. Diseases of poultry. 13th ed. Ames, IA: Blackwell Publishing; 2013. P. 89-138
- 2. Kapczynski DR, King DJ. Protection of chickens against overt clinical disease and determination of viral shedding following vaccination with commercially available Newcastle disease virus vaccines upon challenge with highly virulent virus from the California 2002 exotic Newcastle disease outbreak. Vaccine. 2005; 23(26):3424-33.
- 3. Kelleher CJ, Halvorson DA, Newman JA. Efficacy of viable and inactivated Newcastle disease virus vaccines in turkeys. Avian diseases. 1988; 342-6.
- 4. Parede L, Young PL. The pathogenesis of velogenic Newcastle disease virus infection of chickens of different ages and different levels of immunity. Avian Diseases. 1990; 803-8.

- 5. Reynolds DL, Maraqa AD. Protective immunity against Newcastle disease: the role of antibodies specific to Newcastle disease virus polypeptides. Avian diseases. 2000; 138-44.
- 6. Stone HD, Brugh M, Erickson GA, Beard CW. Evaluation of inactivated Newcastle disease oilemulsion vaccines, Avian Diseases. 1980; 99-111.
- 7. Van Boven M, Bouma A, Fabri TH, Katsma E, Hartog L, Koch G. Herd immunity to Newcastle disease virus in poultry by vaccination. Avian Pathology. 2008; 37(1):1-5.
- 8. Bogoyavlenskiy A, Berezin V, Prilipov A, Usachev E, Lyapina O, Korotetskiy I, et al.. Newcastle disease outbreaks in Kazakhstan and Kyrgyzstan during 1998, 2000, 2001, 2003, 2004, and 2005 were caused by viruses of the genotypes VIIb and VIId. Virus Genes, 2009; 39(1):94-101.
- 9. Hassan W, Khair SA, Mochotlhoane B, Abolnik C. Newcastle disease outbreaks in the Sudan from 2003 to 2006 were caused by viruses of genotype 5d. Virus genes. 2010; 40(1):106-10.
- 10. Ke GM, Yu SW, Ho CH, Chu PY, Ke LY, Lin KH, et al. Characterization of newly emerging Newcastle disease viruses isolated during 2002–2008 in Taiwan. Virus research. 2010;147(2):247-57.
- 11. Liljebjelke KA, King DJ, Kapczynski DR. Determination of minimum hemagglutinin units in an inactivated Newcastle disease virus vaccine for clinical protection of chickens from exotic Newcastle disease virus challenge. Avian diseases. 2008;52(2):260-8.
- 12. Maas R, van Diepen M, Komen M, Oei H, Claassen I. Antigen content of inactivated Newcastle disease oil emulsion vaccines as an in vitro indicator of potency. Developments in biologicals. 2001; 313-8.
- 13. Stone HD. Determination of hemagglutination activity recovered from oil-emulsion Newcastle disease vaccines as a prediction of efficacy. Avian diseases. 1985; 721-8.
- 14. Rajabi Z, Nasrabadi HT, Khojin AB. In vitro quality evaluation of avian influenza subtype H9N2 oil-emulsion vaccines. Journal of Veterinary Research. 2010;65(4):295-9.
- 15. Rajabi Z, Tayefi-Nasrabadi H, Syofi AB, Janmohammadi H. Determination of Hemagglutination Activity and Total Protein Recovered from Oil-Emulsion Avian Influenza Vaccines as a Prediction of Efficacy. Journal of Animal and Veterinary Advances. 2008;7(5):604-6. 16. Hay FC, Westwood OM. Practical immunology. John Wiley & Sons; 2008 Apr 15.

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- 17. Lowry OH, Rosebrough NJ, Farr AL, Randall RJ. Protein measurement with the Folin phenol reagent. J biol Chem. 1951;193(1):265-75.
- 18. Alexander DJ, Senne DA. Newcastle disease virus and other avian paramyxoviruses. In Zavala L,Swayne DE, Glisson JR, Pearson JE, Reed WM, Jackwood MW, Woolcock PR. Isolation and identification of avian pathogens. 5th ed. Ommipress, Inc., Madison, Wisconsin. 2008. P.139 19. Damena D, Fusaro A, Sombo M, Belaineh R, Heidari A, Kebede A, et al. Characterization of Newcastle disease virus isolates obtained from outbreak cases in commercial chickens and wild pigeons in Ethiopia. SpringerPlus. 2016;5(1):1.
- 20. Dortmans JC, Peeters BP, Koch G. Newcastle disease virus outbreaks: vaccine mismatch or inadequate application?. Veterinary microbiology. 2012;160(1):17-22.
- 21. Nakamura K, Ito M, Nakamura T, Yamamoto Y, Yamada M, Mase M, et al. Pathogenesis of Newcastle disease in vaccinated chickens: pathogenicity of isolated virus and vaccine effect

- on challenge of its virus. Journal of Veterinary Medical Science. 2014;76(1):31-6.
- 22. Gough RE, Allan WH, Knight DJ, Lieper JW. Further studies on the adjuvant effect of an interferon inducer (BRL 5907) on Newcastle disease and avian influenza inactivated vaccines. Research in veterinary science. 1975;19(2):185.
- 23. Stone HD, Brugh M, Beard CW. Influence of formulation on the efficacy of experimental oilemulsion Newcastle disease vaccines. Avian diseases, 1983: 688-97.
- 24. Bell JG. A comparison of the different vaccines available for the control of Newcastle disease in village chickens. InACIAR proceedings 2001 (pp. 56-60). ACIAR; 1998.
- 25. Maas RA, Komen M, Van Diepen M, Oei HL, Claassen IJ. Correlation of haemagglutinin-neuraminidase and fusion protein content with protective antibody response after immunisation with inactivated Newcastle disease vaccines. Vaccine. 2003; 21(23):3137-42