Effect of ambient ammonia on the immune response to infectious bronchitis virus vaccination and protection from homologous challenge in broiler chickens

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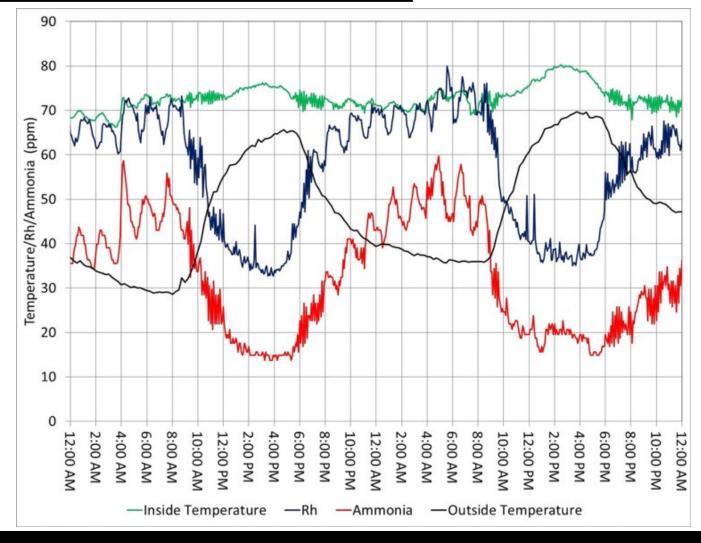


IBV vaccination and ammonia

Does exposure to environmental ammonia affect the immune response to IBV vaccination?



Ammonia levels follow Rh



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Source of Ammonia

- Reused litter
- Fans used to control relative humidity and ammonia levels
- Standard stocking density, heat sources, feed & lighting schedule
- Ammonia level target was 30 to 60 ppm

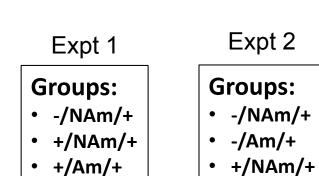


No Ammonia



Ammonia

Experimental design



Expt 2

-/Am/+

+/Am/+

-/NAm/-

Expt 3

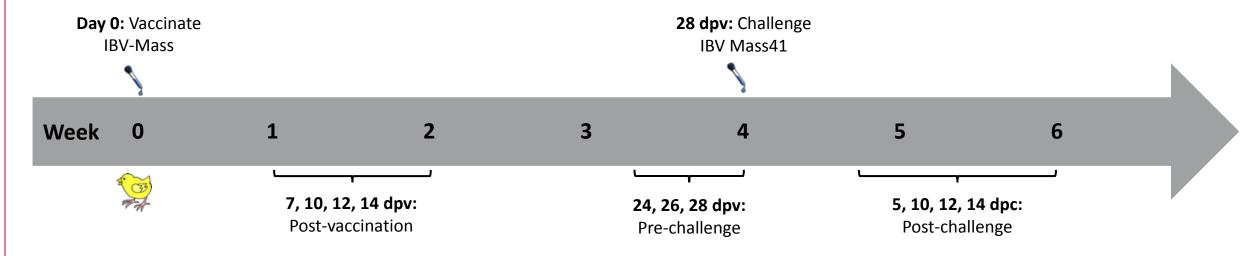
Groups:

- -/NAm/+
- -/Am/+
- +/NAm/+
- +/Am/+
- -/NAm/-

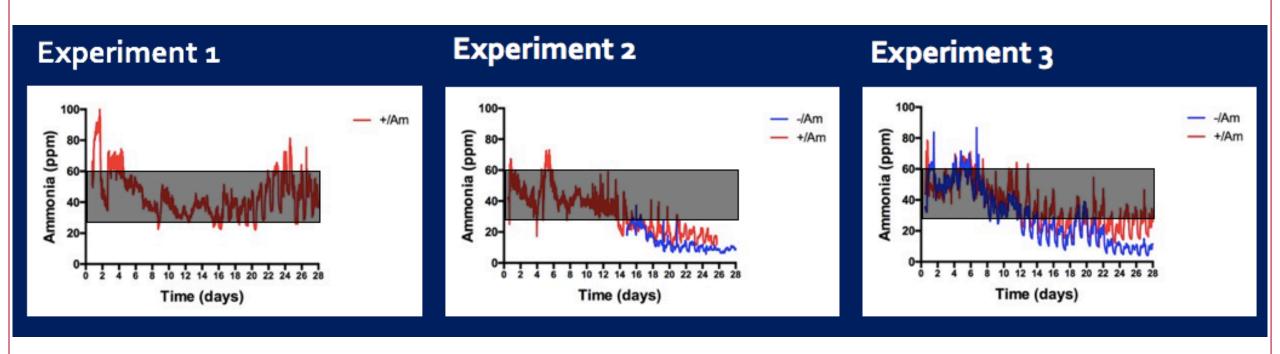
Procedures:

- Virus detection (choanal swabs)
- Clinical signs, airsacculitis, tracheal histopathology, ciliostasis^a
- ELISA (IgG serum, IgA tears)
- Flow cytometry (leukocytes, MHC I/IIIo and MHC I/IIhi, IgM+, CD4⁺, and CD8⁺ cells)

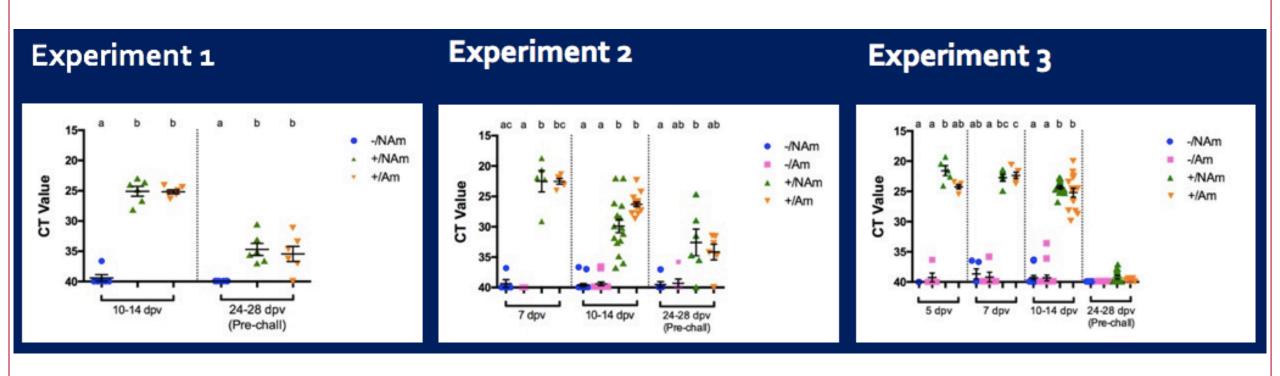
^a5 dpc only



Ammonia levels were within the target range for the first two weeks



Pre-challenge vaccine virus load was not affected by ammonia



Clinical Signs 5 days post-challenge were reduced by vaccination but not influenced by ammonia

Treatment			Clinical Signs (Mean ± SEMa)				
Vaccir	ne Ammonia	Challenge	Exp 1	Exp 2	Ехр 3	Average	
-	-	+	2.1 ± 0.4	3.0 ± 0.0	2.3 ± 0.3	2.4 ± 0.2	
-	+	+	-	3.0 ± 0.0	2.7 ± 0.2	2.9 ± 0.1	
+	-	+	0.1 ± 0.1	0.0 ± 0.0	0.2 ± 0.1	0.1 ± 0.1	
+	+	+	0.3 ± 0.2	0.0 ± 0.0	0.0 ± 0.0	0.1 ± 0.1	
-	-	-	0.0 ± 0.0	0.0 ± 0.0	0.0 ± 0.0	0.0 ± 0.0	
^a SEM=standard error of the mean							

Vaccinated birds, regardless of ammonia exposure, did not show ciliostasis 5 days post-challenge

Treatment				Ciliostasis			
Vaccine	Ammonia	Challenge	Exp 1	Exp 2	Exp 3	Average	
-	-	+	0 ^a , 10/10 ^b	0, 5/5	0, 10/10	0, 25/25	
	+	+	-	0, 10/10	0, 10/10	0, 20/20	
+	-	+	86.2, 1/10	90.7, 0/10	78.3, 1/9	85.1, 2/29	
+	+	+	87.3, 0/10	88.3, 0/10	82.2, 1/10	85.9, 1/30	
-	-	-	97.7, 0/5	96.0, 0/5	71.3, 0/5	88.3, 0/15	

Tracheal histopathology scores were reduced by vaccination but not affected by ammonia

Treatment			Histopathology Score (Mean ± SEMa)				
Vaccine	Ammonia	Challenge	Exp 1	Exp 2	Exp 3	Average	
-	-	+	9.8 ± 0.1	9.5 ± 0.0	9.6 ± 0.2	9.6 ± 0.1 ^a	
-	+	+	-	9.6 ± 0.1	9.6 ± 0.1	9.6 ± 0.0 ^a	
+	-	+	6.4 ± 0.4	6.1 ± 0.1	6.6 ± 0.2	6.3 ± 0.2 ^b	
+	+	+	5.1 ± 0.5	6.2 ± 0.3	6.5 ± 0.6	6.0 ± 0.3 ^b	
-	-	-	6.0 ± 0.4	5.1 ± 0.6	4.7 ± 0.5	4.9 ± 0.3°	
^a SEM=stand	ard error of the	mean					

Nonvaccinated birds stressed with ammonia experienced a higher incidence of airsacculitis 5 days post-challenge

Treatment			Airsacculitis				
Vaccine	Ammonia	Exp 1	Exp 2	Exp 3	Total		
-	-	+	5/10	2/5	3/10	10/25	
-	+	+	-	9/10	7/10	17/20	
+	-	+	0/10	0/10	0/9	0/29	
+	+	+	0/10	0/10	0/10	0/30	
-	-	-	0/5	0/5	0/5	0/15	
^a SEM=standa	ard error of the	mean					

Post-vaccination immune trends

No ammonia-related effect

Vaccine-related effects:

IBV-specific serum IgG and tear IgA responses weak to nonexistent 10-14 dpv

Harderian Gland

- Increased % of leukocytes
- Increased % of leukocytes with high MHC II expression
- Increased % of IgM⁺ cells
- Increased % of CD4⁺ and CD8⁺ cells, decreased CD4:CD8 ratio

Post-challenge immune trends

No ammonia-related effects

Vaccine-related effects in harderian gland

5 dpc

- Increased % of leukocytes in nonvaccinated, challenged birds
- Increased % of leukocytes with high MHC II expression
- Increased % of IgM+ cells in nonvaccinated, challenged birds

10-14 dpc

Increased % of CD4⁺ and CD8⁺ cells in nonvaccinated, challenged birds

10-14 dpc

- Increased IBV-specific serum IgG titers in all challenged birds, but especially in nonvaccinated, challenged birds
- Increased IBV-specific IgA titers in tears in nonvaccinated, challenged birds

Discussion

Ammonia levels between 30 and 60 ppm did not affect immunity to IBV following vaccination (higher levels might have an affect)

Ammonia, combined with incomplete vaccine coverage, may exacerbate respiratory disease

Maximizing vaccine coverage and managing ammonia levels are strategies to decrease airsacculitis and reduce antibiotic usage

Acknowledgments

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