

# A longitudinal study of amoebic gill disease on a marine Atlantic salmon, *Salmo salar* L., farm utilising a real-time PCR assay for the detection of *Neoparamoeba perurans*.

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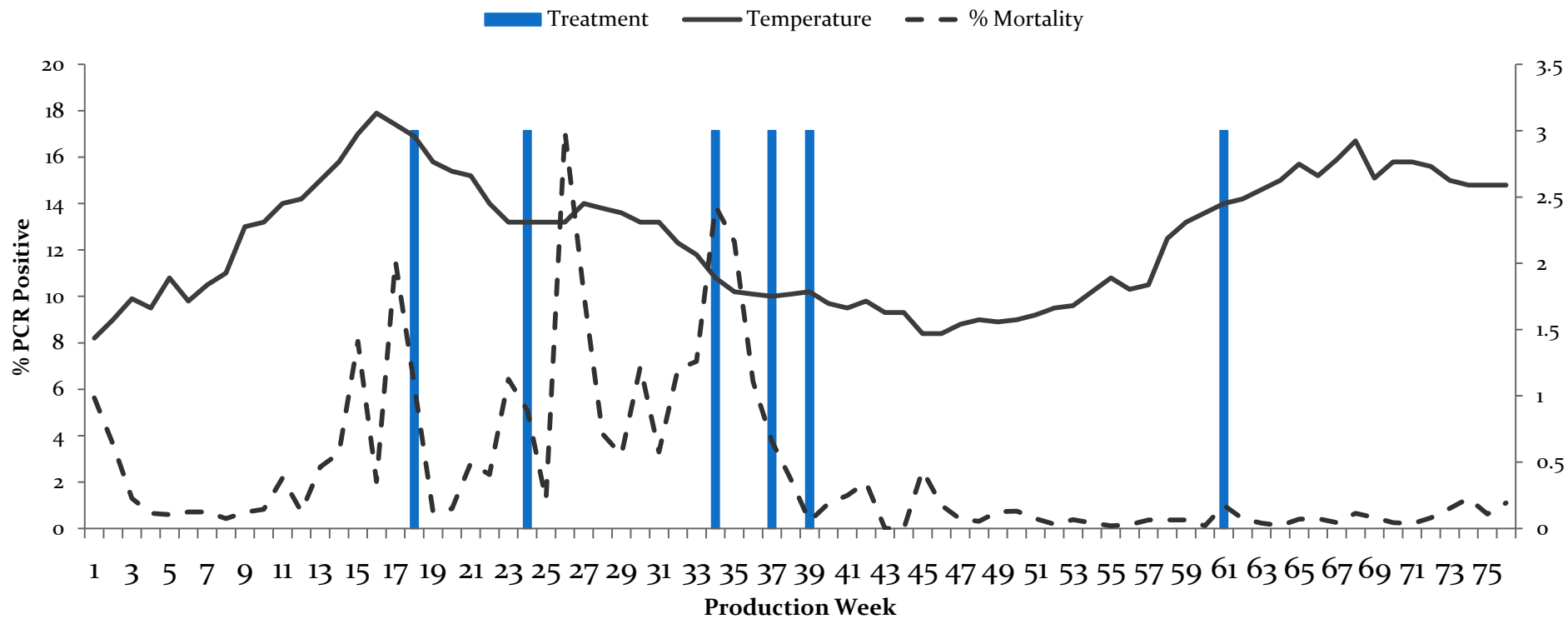


**A longitudinal study of amoebic gill disease on a marine Atlantic salmon, *Salmo salar* L., farm utilising a real-time PCR assay for the detection of *Neoparamoeba perurans*.**

- Site in the South West of Ireland was selected to be included in the Longitudinal study.
- Sampling commenced 4 weeks post transfer (May 2013) up until week 76 (September 2014)
- Samples were collected every 2-3 weeks
- Gill scoring, histology, PCR
- TaqMan PCR was developed and validated for use in screening for *N. perurans*

# Longitudinal study

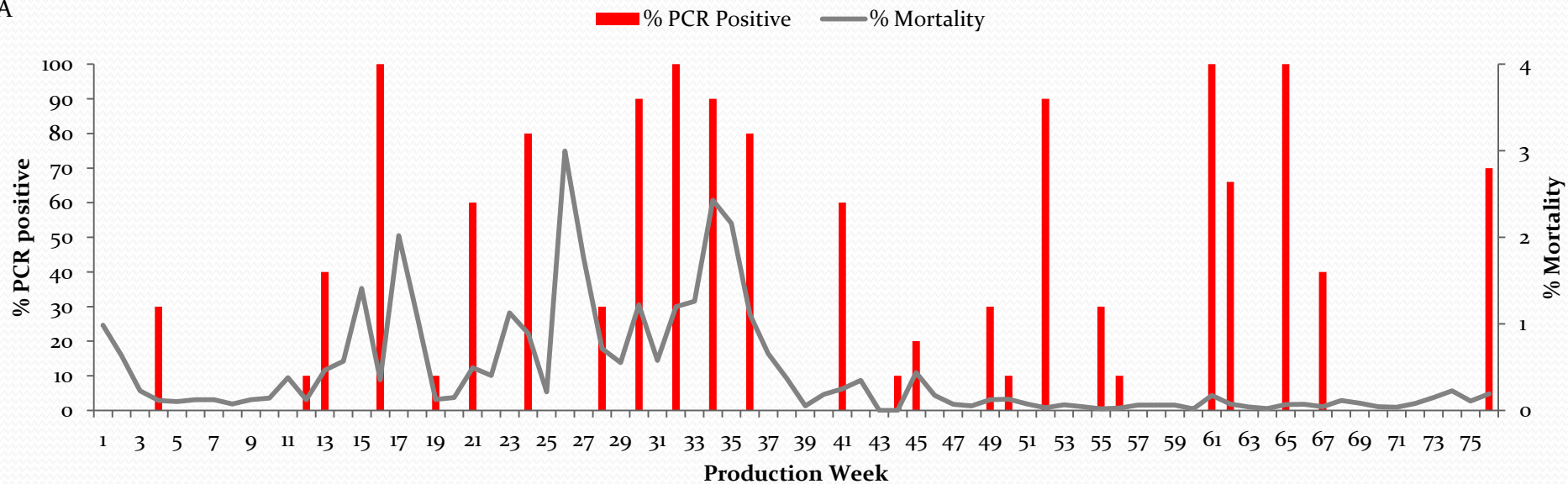
- 3 observed peaks in mortality due to AGD, additionally large peak in mortality due to *P. noctiluca*
  - 2 full treatments, 4 partial
- Following drop in temp and fish above 1kg mortality returned to background levels



# Molecular screening

- PCR methods appears to be sensitive enough to pick up infection 2/3 weeks prior to gross assessment and track proliferation of amoeba post treatment
- Samples collected 4 days post treatment saw immediate reduction in positive fish, further increase 3 weeks observed post treatment
- Mortality was reduced to background levels, still having detections and gill pathology, important to take all information into account.

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# Evaluation of non-destructive molecular diagnostics for the detection of *N. perurans*

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## Evaluation of non-destructive molecular diagnostics for the detection of *P. perurans*

- Much effort has focused on molecular diagnostics with limited use in screening
  - Norway and recently Ireland
- No. of different assays and sampling methods in use
- Project would allow the evaluation of suitability of each assay and non-destructive sampling methodology
- Collaboration between CSIRO, Australia, Marine Institute, Ireland and GMIT, Ireland
- Preliminary results from the project



# Aims

1. Assess most appropriate non-destructive sampling methodology
  - Swabs/filament clip
2. Determination of the most appropriate molecular assay with regard to sensitivity and specificity.
3. Comparison of diagnostic/screening methods
  - Gill score + Molecular
4. Correlation of non-destructive molecular diagnostics to the clinical gill score
5. Standardised methodology for field sampling and molecular diagnosis of AGD

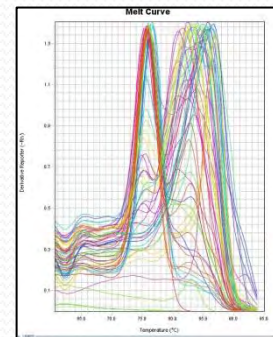
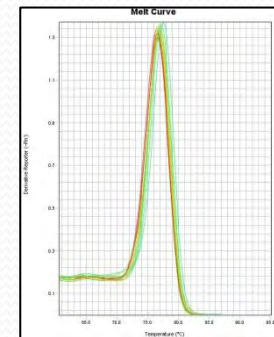
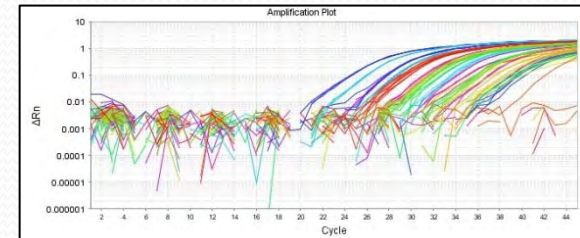
# Sampling

- 30 fish over the full range of gill score were sampled.
- Individual gill scores were recorded for each fish
- Two methods for non-destructive molecular sampling were examined.
  - Filament biopsy - ethanol
  - Gill swab (Isohelix swabs) - ethanol
    - Front and back of second gill arch were swabbed
- Additionally cultures from 3 countries were included for testing (Australia, Ireland, Norway)
- Known quantities of amoebae cells were also assessed

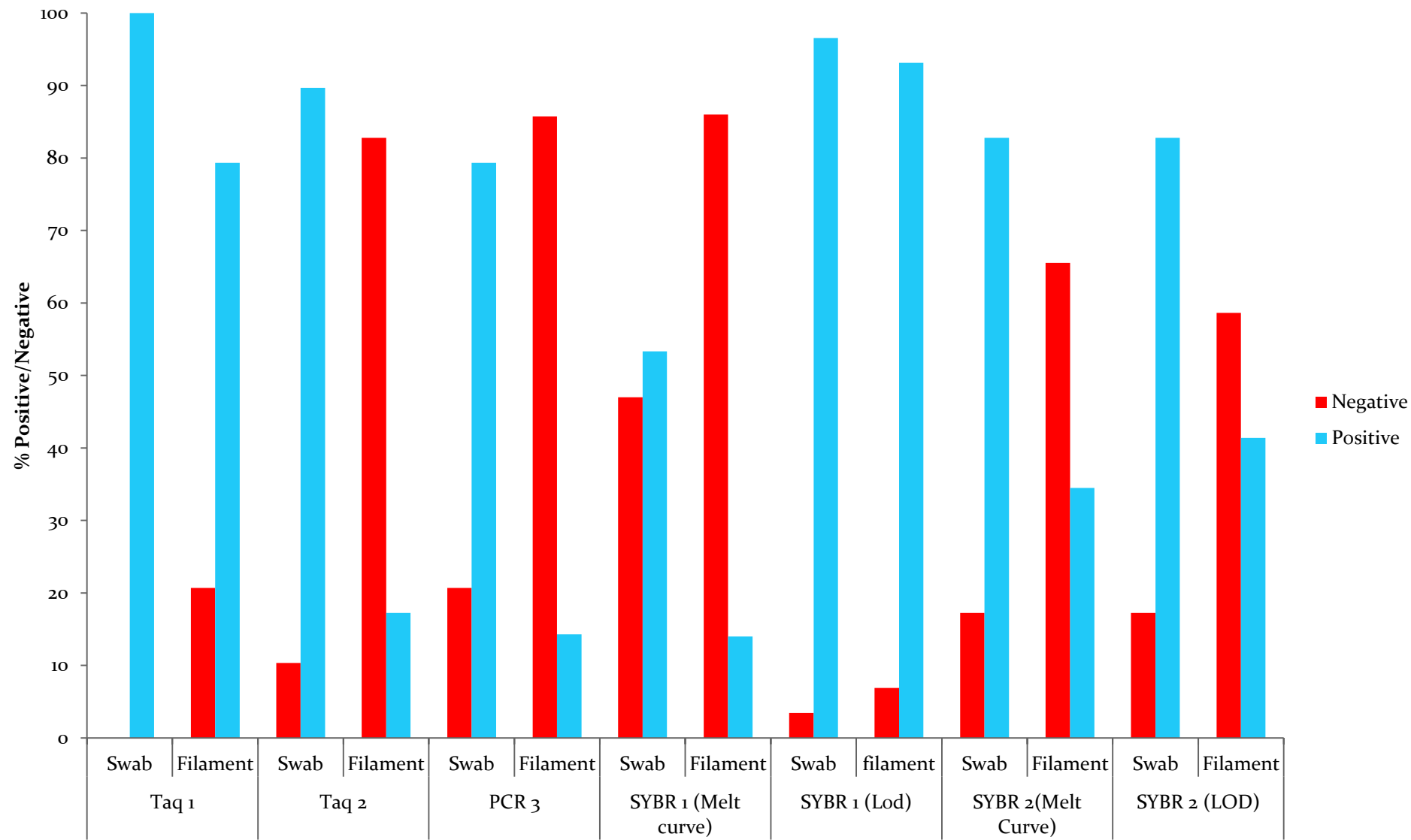


## PCR assays included

- 5 different assays available for use for trial
  - 2 TaqMan assay
  - PCR<sub>3</sub> (Partial analysis)
  - SYBR green 1
  - SYBR green 2 (Nested)



# Swab/Filament Results



## Swab/Filament

- Potential reasons for difference
  - Surface area sampled
    - Filament only covers small area 25 +/- 2 mg
    - Large surface area is covered by swab
    - Potentially more amoeba in the mucous
  - Competition
    - Assays may not be specific enough, may be competing DNA
  - Inhibition

## Determination of the most appropriate molecular assay with regard to specificity and sensitivity.

- The percentage of samples positive for the presence of *N. perurans* was assessed for each assay
- Assay Taq 1 was recorded as having 100% positive with the gill swabs with 23% difference between swabs and filaments
- Taq 2 performed relatively well with 90% but performance dropped dramatically when testing the filaments
- Both SYBR green assays required adjustment of results due to unspecific amplification following melt curve analysis

	Taq 1		Taq 2		PCR 3		SYBR 1(Melt curve)		SYBR 1(LOD)		SYBR 2(Melt Curve)		SYBR 2 (LOD)	
	Swab	Filament	Swab	Filament	Swab	Filament	Swab	Filament	Swab	filament	Swab	Filament	Swab	Filament
Negative	0	21	10	83	21	86	47	86	3	7	17	66	17	59
Positive	100	79	90	17	79	14	53	14	97	93	83	34	83	41

## Determination of the most appropriate molecular assay with regard to specificity and sensitivity.

	Known No. Of Cells					
	<b>v100</b>	<b>v50</b>	<b>v25</b>	<b>v10</b>	<b>v5</b>	<b>v1</b>
Taq 1		30.04	31.26	32.37	32.98	35.10
Taq 2		30.43	31.29	32.35	33.32	35.51
SYBR 1	28.06		30.89	31.24		36.43
SYBR 2	22.97		26.05	27.27		39.39

- Both Taq and SYBR assay were used to analysis known No. of cells
- Each assay preformed well with known cells
- Both TaqMan assays were very similar and preformed best on single cell
- Further work to be completed.
- Cultures from 3 countries (Australia, Ireland and Norway) were analysed
  - All assays performed equally well

# Correlation of non-destructive molecular diagnostics to the clinical gill score

<b>Correlation of Gill score and Molecular Results</b>				
	<b>Swab</b>		<b>Filament</b>	
<b>Taq 1</b>	-0.722	P<0.01	-0.608	P<0.01
<b>Taq 2</b>	-0.629	P<0.01	-0.545	P<0.01
<b>PCR 3</b>	-0.163	P>0.05	-0.032	P>0.05
<b>SYBR 1 (Melt Curve)</b>	-0.665	P<0.01	-0.446	P<0.05
<b>SYBR 1 (LOD)</b>	-0.740	P<0.01	-0.521	P<0.01
<b>SYBR 2 (Melt Curve)</b>	-0.717	P<0.01	-0.632	P<0.01
<b>SYBR 2 (LOD)</b>	-0.717	P<0.01	-0.554	P<0.01

- Correlation is greater with the swabs when compared with filament in all assays.
- Correlation between the majority of the assays was relatively similar for these samples
- Correlation is variable



# Correlation of non-destructive molecular diagnostics to the clinical gill score

- Correlation investigated on three separate sets of samples, 30 from trial, samples from infection trial, additional 42 samples taken previous sampling occasion were tested
- Correlation is significant
- However, can and does fluctuate due to several potential variables in gill scoring and sampling
  - Subjective gill scoring
  - Variations in area swabbed and amoeba load
  - And response of fish to amoeba
  - Brings up question of Resistance or Resilience

Correlation of Gill score and Ct values			
Taq 1	Additional	-0.828	P<0.01
	Current	-0.722	P<0.01
	Infection	-0.938	P<0.01

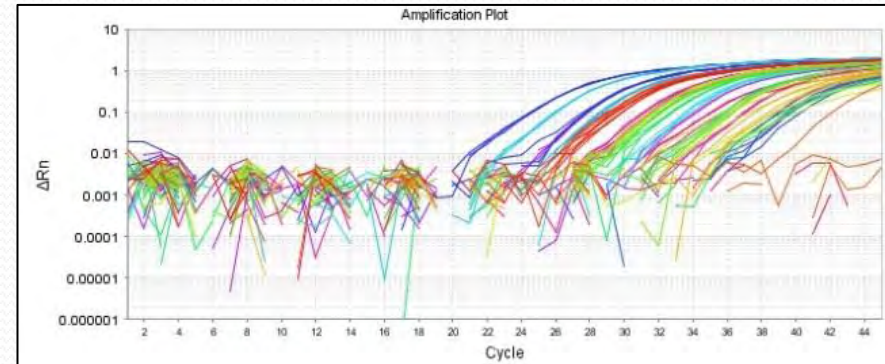
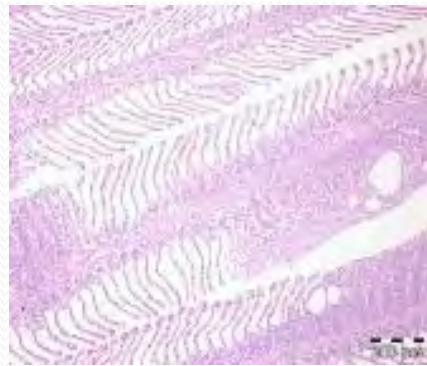
## Correlation of non-destructive molecular diagnostics to the clinical gill score

<b>Gill score</b>	<b>TaqMan 1</b>	<b>TaqMan 2</b>	<b>Sybr 1 Melt</b>	<b>Sybr 1 (LOD)</b>	<b>Nested (Melt Curve)</b>	<b>Nested (LOD)</b>
<b>0</b>	A	A	A	A	A	A
<b>1</b>	AB	A	AB	A	A	A
<b>2</b>	AB	A	A	A	A	A
<b>3</b>	BC	A	AB	A	AB	AB
<b>4</b>	C	B	BC	B	B	B
<b>5</b>	C	B	C	B	B	B

- Gill scores that do not share a letter are significantly different
- Two to three groupings of Gill scores are observed in Tukey's post hoc test

## Comparison of screening methods

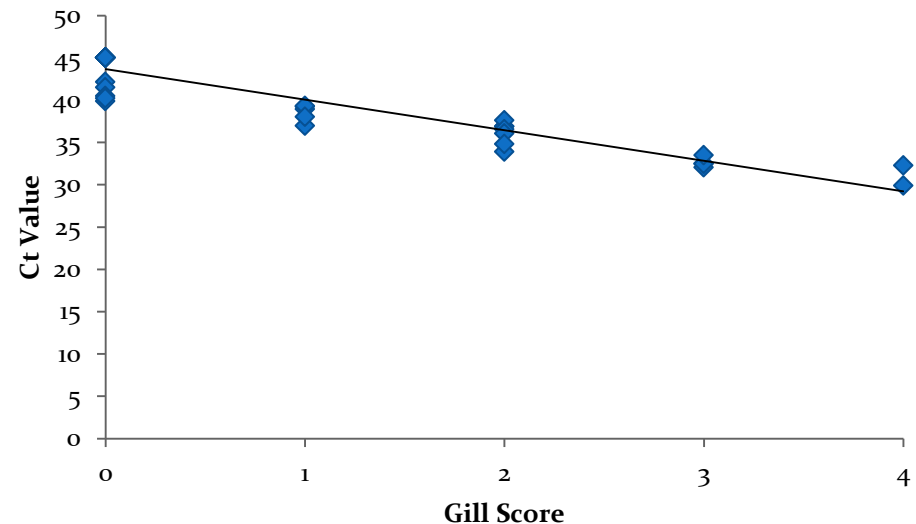
- Comparison of screening methods in order to determine the most suitable method for the ongoing monitoring of amoebic gill disease.
  - Gill score, Histology and Molecular
- 40 Fish sampled from infection trial with 1000 cells/L
  - 1, 2, 3, 8, 15, 21 days post infection



## Comparison of screening methods

- Observed gill and histology scores appeared 1 week P.I
- Amoebae first observed in histology 2 weeks P.I
- Molecular diagnostics picked up amoebae 48hrs post infection
- Significant correlation between each of the methods  $P > 0.01$

	Gill score	PCR
PCR	-0.938	
Histo scores	0.849	-0.836



## Standardised methodology for field sampling and molecular diagnosis of AGD

- Further work will also include
  - Comparison of copy numbers
  - Cost analysis
  - Labour and time requirement
- Each assay will also be assessed for its suitability for the detection of *N. perurans* in water
  - 1.2µM filters using pump system designed by CSIRO
- Standardise the methodology for field sampling
  - fully utilise molecular methods to help inform management decisions
  - finely measure potential gains in AGD resistance and altered management practices

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