SURVEILLANCE OF INFECTIOUS DISEASES IN ANIMALS AND HUMANS IN SWEDEN 2020

Chapter excerpt -

Porcine reproductive and respiratory syndrome











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Cover: Juvenile mink in hand. Photo: Elina Kähkönen

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Reporting guidelines: Reporting guidelines were introduced in 2018 for those chapters related to purely animal pathogens. The guidelines build on experiences from several EU projects, and have been validated by a team of international experts in animal health surveillance. The aim is to develop these guidelines further in collaboration within the global surveillance community and they have therefore been made available in the form of a wiki on the collaborative platform GitHub (https://github.com/SVA-SE/AHSURED/wiki). Feel free to contribute!

Layout: The production of this report continues to be accomplished using a primarily open-source toolset. The method allows the source text, produced by authors, to be edited independently of the template for the layout which can be modified and reused for future reports. Specifically, the chapter texts, tables and captions are authored in Microsoft Word and then converted using pandoc and R to the LaTeX typesetting language. Most figures and maps are produced using the R software for statistical computing and the LaTeX library pgfplots. Development for 2020 has further improved the importing of content from Excel files to automatically build figures in the pgfplots LaTeX library. The tool is available as an R-package on GitHub (https://github.com/SVA-SE/mill/). The report generation R-package and process was designed by Thomas Rosendal, Wiktor Gustafsson and Stefan Widgren. In 2020, final typsetting was done primarily by Wiktor Gustafsson with contributions from the report authors.

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Porcine reproductive and respiratory syndrome



After the successful eradication of Porcine Reproductive and Respiratory Syndrome virus (PRRSV) following an outbreak in 2007, annual surveillance shows that Sweden has remained free from the PRRSV since 2008. Photo: Marie Sjölund.

BACKGROUND

Porcine reproductive and respiratory syndrome (PRRS) is a disease of domestic pigs caused by an enveloped RNA-virus belonging to the family Arteriviridae. The disease was first described in the USA in 1987 and the virus (PRRSV) was subsequently identified in 1991. PRRSV has since become endemic in most pig populations of the world and is considered one of the most economically important viral diseases affecting pig production globally. PRRS is highly contagious and is transmitted between pigs through both direct and indirect contact. Sero- and virus-positive feral pigs and wild boars have been described but there is no evidence that they serve as a reservoir for PRRSV.

Sweden has had an active PRRSV surveillance programme since 1998, with Farm & Animal Health collecting samples that are analysed by the National Veterinary Institute. In July 2007, the first case of PRRS in Sweden was detected through this active surveillance programme. Until then, Sweden had been one of only a few countries to declare itself free from PRRSV. At the time of detection, the disease was not widespread, so a decision was made to control the outbreak through a modified stamping out procedure. The actions taken to eradicate the disease proved to be effective as, following extensive surveillance during the fall of 2007, Sweden was once again declared free from PRRSV with a high probability by the beginning of 2008. Despite extensive investigation, the source of the outbreak could not be established.

After the outbreak in 2007, the surveillance programme was revised in order to enable even earlier detection of an introduction of PRRSV. The programme underwent revision again in 2012 following extensive changes in the pig production system in Sweden.

DISEASE

Infection with PRRSV causes varying clinical signs depending on the age of the infected animals. The incubation period is 2–7 days and, in adult pigs, the clinical signs are typically mild, consisting of fever, lethargy and inappetence. The devastating effect of PRRSV infection in this category of animals is that it causes reproductive failure including abortions, mummified foetuses, small litters, weak-born piglets and increased incidence of non-pregnant sows. The primary clinical signs in weaned and fattening pigs are fever, respiratory signs, reduced growth and increased mortality.

In 2006, an atypical variant of PRRSV was reported from Asia. This variant causes more severe clinical signs and higher mortality than previously described genotypes of the virus. This atypical variant may cause high fever, discolouration of the skin and high mortality rates in all age groups.

LEGISLATION

PRRS was included in the Swedish Act of Epizootic diseases in 1999 (SFS 1999:657 with amendments) and is consequently notifiable on suspicion. Notification leads to further investigation.

SURVEILLANCE

The purpose of the surveillance is to document freedom from PRRSV and to detect introduction of the virus before it becomes widespread in the population. Tests to detect both viral genome and antibodies against PRRSV are used in the surveillance. All samples are analysed at the National Veterinary Institute. To detect antibodies against PRRSV, a commercial ELISA method (IDEXX PRRS X3 Ab Test, Idexx Laboratories) is used. Samples testing positive for PRRSV antibodies by ELISA are sent to the Danish Technical University for confirmation testing using an immunoperoxidase monolayer assay (IPMA). Analysis for the presence of PRRS viral genome is done using an in-house PCR method (modified from Kleiboeker *et al*, 2005).

Passive surveillance

PRRS is notifiable on clinical suspicion by both veterinarians and farmers and cases with suspect clinical signs are investigated following notification to the Swedish Board of Agriculture. The investigation may include sampling of sick or dead animals, examination of the herd for the presence of clinical signs and analyses of production results. During the investigation the farm is placed under restrictions.

In addition, PCR analysis for the presence of PRRSV genome is included in the enhanced passive surveillance of aborted foetuses (see chapter on "Examinations of abortions in food producing animals" on page 134).

Active surveillance

Within the active surveillance programme, which has been running in its current, revised form since 2013, all Swedish nucleus herds, multiplying herds and sow pools are sampled twice a year, with the aim to collect eight samples per herd on each sampling occasion. In addition, pigs from randomly selected production herds are sampled at slaughter throughout the year at the 9 largest Swedish abattoirs which slaughter approximately 99.5% of Sweden's pigs. Three samples per herd are collected on each of these sampling occasions.

The revised programme was designed to take into consideration an increased risk of PRRSV introduction and changes in the structure of Swedish pig production, as well as to keep the probability of freedom from PRRS at the same level as it was after demonstration of freedom following the outbreak in 2007. To achieve this, the programme was designed using a between-herd design prevalence of 0.5%, a within-herd design prevalence of 40% and a risk of introduction of 1 in 5 years. The number of samples needed is calculated yearly taking the outcome of the surveillance in previous years into account. For 2020, the calculated number of samples required was 2400 from the abattoir sampling in addition to the field sampling described above.

RESULTS

Passive surveillance

Five investigations following clinical suspicions of PRRS were conducted in 2020. In all of these herds, reproductive problems such as abortion, weak-born piglets, high piglet mortality and increased numbers of open sows were the primary clinical signs. The number of animals sampled and the methods used during the investigations varied and were dependent on factors such as the nature of the suspicion, the clinical manifestation and how widespread the clinical signs were in the herd. All samples taken during the course of the investigations were negative and all herds were subsequently declared negative for PRRSV.

Within the programme for enhanced passive surveillance of aborted foetuses, 21 foetuses from 11 herds were examined for the presence of PRRSV genome and all samples were negative.

Active surveillance

In 2020, 601 samples from 43 nucleus herds, multiplying herds and sow pools were analysed. In the abattoir sampling, 2410 samples originating from 468 herds on 806 sampling occasions (some herds were sampled more than once during the year) were analysed. For comparison, the number of samples tested per year since 2009 is given in Table 16. Of all samples collected during 2020's active surveillance, 4 samples from 4 different herds were serologically positive by both ELISA and IPMA testing. Three of these positive samples were collected in sow herds and one sample was collected at an abattoir. Herd investigations were conducted in all 4 herds. Clinical examination of the herds found that none of the herds displayed clinical signs consistent with PRRS. Additional serum samples were also collected in each of these herds and analysed for the presence of PRRS antibodies. All additional samples were negative, and it was concluded that the positive samples were singleton reactors and not due to infection with PRRSV.

Taking the surveillance outcome from previous years into account, the probability of freedom based on the surveillance during 2020 was >99%.

Also in 2020, one herd investigation was initiated after a serum sample taken from an imported boar in a quarantine

Table 16: Number of samples and herds tested in the active surveillance for porcine reproductive and respiratory syndrome 2009–2020 in relation to the number of registered swine herds.

Year	Field sampling		Abattoir sampling			Total number	Number of
	Number of samples	Number of sampled herds	Number of samples	Number of sampling occasions	Number of sampled herds ^B	of samples	registered swine herds in Sweden ^A
2009	1106	69	2712	904	841	3818	2027
2010	2012	126	4424	1475	931	6436	1695
2011	1240	78	2308	770	700	3548	1297
2012	1055	66	2145	717	623	3200	1113
2013	1024	64	1548	516	488	2572	1281
2014	912	57	2028	676	537	2940	1282
2015	824	52	2382	780	521	3206	1228
2016	875	60	2446	815	506	3321	1252
2017	826	54	2625	875	546	3451	1272
2018	784	54	2707	903	514	3491	1346
2019	647	42	2550	851	506	3197	1089
2020	601	43	2410	806	468	3011	1146

^A Jordbruksverket statistikdatabas (statistik.sjv.se/pxweb).

^B Some herds were sampled more than once.

unit tested positive for PRRS by both ELISA and IPMA analysis. No clinical signs indicative of PRRS were observed in the herd and follow-up samples taken from animals in the quarantine unit were negative so the herd was subsequently declared PRRS negative.

DISCUSSION

Before the outbreak of PRRS in 2007, the active surveillance programme was based on field sampling in all nucleus herds, multiplying herds, sow pools and 50 production herds once a year, usually clustered in time. This surveillance design had the drawback of being expensive, having a low sensitivity and a risk of poor timeliness. After the outbreak, the surveillance was further developed by employing continuous abattoir sampling and more effective field sampling in nucleus herds, multiplying herds and sow pools to improve early detection of a PRRSV introduction and to increase the sensitivity of the surveillance. The evaluation of the programme in 2012 indicated that the probability of freedom and the sensitivity of surveillance were declining over time and the changes that were suggested aimed at breaking this trend. The main reason for the declining probability of freedom was a decreasing number of samples tested. During recent years, the Swedish pig industry has undergone substantial structural changes leading to a rapidly declining number of herds and extensive changes in the market and in the habits of farmers. These changes emphasise the need for continuous monitoring of surveillance performance over the year and a yearly evaluation of performance and design. The present design, with continuous sampling and testing over the year

in combination with the clinical surveillance, increases the probability of early detection compared to the strategy used before the outbreak.

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