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WEST NILE VIRUS, REINDEER - USA (MN) (02)

A ProMED-mail post
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[1]
Date: 18 Nov 2002
From: David Hutto <David.Hutto@biogen.com>

In response to the moderator's query.....

[On October 1st, I was informed by Dr Mitch Palmer [who he? - Mod.SH] that 3 of the 19 reindeer delivered to NVSL in May had died of WNV. Those reindeer, housed at NADC, are on pastures adjacent to or near pastures containing elk, white-tailed deer, bison, cattle, sheep, and horses. To date, however, clinical signs have been seen only in the reindeer and 3 have died -- on 20, 24, and 27 September 2002.]

Dr. Mitch Palmer is a veterinary pathologist at the National Animal Disease Center (NADC), in Ames, IA, part of the Agricultural Research Service (ARS). The National Veterinary Services Laboratories (NVSL), also in Ames and adjacent to the NADC, is part of the Animal and Plant Health Inspection Service (APHIS). The lesion description pasted into this report most likely came either from Dr. Palmer or from the veterinary pathologists in the Pathobiology Laboratory, part of NVSL.

Exclusion of a diagnosis of WNV encephalitis in animals routinely monitored for CWD will require collection of fresh/frozen [tissue] (for WNV PCR), as well as the formalin-fixed tissue that allows definitive CWD diagnosis.

Collection of fresh/frozen tissue is often not standard practice in protocols issued by state agencies responsible for ensuring the surveillance of cervid populations for CWD. The ability of an APHIS pathologist to render or exclude diagnoses is determined by the extensiveness of sample collection performed by the person in the field.

It is up to the state agencies involved to insure that state personnel, private veterinarians, and affected animal owners are made aware of the need to collect a tissue set that is complete enough to allow exclusion or diagnosis of all diseases of interest.

--
David Hutto
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[2]

Date: 18 Nov 2002

From: Mitchell V. Palmer <mpalmer@nadc.ars.usda.gov>

Clarification of previous posting on WNV in reindeer.

Although WNV and CWD are both neurologic disorders, there should be little confusion between the two.

Reindeer with WNV presented as febrile, with head tilt, flaccid paralysis of the tongue, and dysphagia. The clinical course of WNV in reindeer was rapid, with recumbency and death within 24 hours of the onset of clinical signs. As a result of the rapid clinical course, on postmortem exam, animals were in good body condition, in contrast to a chronic wasting presentation with CWD.[According to members of the ROBA (Reindeer Owners and Breeders Association), the clinical course lasted as long as 10 days, although the animals were in good body condition. - Mod.TG]

Histopathologically, there should be little confusion, as WNV in reindeer is a lymphocytic encephalitis (more easily confused with rabies or EEV). Inflammation is not a component of the histopathological picture of CWD. Moreover, spongiform change like that seen in CWD was not a feature of WNV in reindeer.

In situations where there is a need to test for both CWD and WNV in reindeer or other cervids, there should be adequate brain tissue for submission, as lesions and viral antigen are more widespread with WNV involving other areas of the brainstem and cerebellum, thus leaving the medulla at the obex for CWD submission.

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[see also:
West Nile virus, reindeer - USA (MN) [20021116.5819](#)
.....mpp/tg/pg/mpp

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