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Stephens, N., Holyoake, C.S., Finn, H. and Bejder, L. (2011) An unusually severe presentation of dolphin poxvirus in bottlenose dolphins (Tursiops aduncus) within the Swan-Canning Estuary.
In: 48th Annual Conference of the Australian Marine Science Association, 3 - 7 July, Fremantle, Western Australia.

Presentation

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An unusually severe presentation of dolphin poxvirus in bottlenose dolphins (*Tursiops aduncus*) within the Swan-Canning Estuary





First report of fatal cetacean morbillivirus infection in WA and an accompanying unusually severe presentation of dolphin poxvirus infection

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Unusual mortality event 2009



 6 bottlenose dolphin deaths within 5 months in the Swan Canning estuary

 Represent a marked ↑ in dolphin mortalities based on previous stranding data



Dolphins in the estuary



• 2001-2003: 20-25 bottlenose dolphins were consistently found in the estuary

Mortalities:

DATE	SIGNALMENT	COMMENT
5 June	Male, calf	Too decomposed
8 June	Male, juvenile	
21 June	Female, adult	
17 Sept	Female, adult	
9 Oct	Male, adult	Too decomposed
25 Oct	Female, adult	



June 8: Male juvenile



Most significant findings:

- Fungal meningoencephalitis with intralesional fungal organisms consistent with Aspergillus spp. (fungal infection of the brain)
- Lymphoid depletion noted histologically (reduction in immune cells in lymph nodes & spleen)





Aspergillus



- Ubiquitous in the environment
- Usually exposure does not result in infection as the immune system is able to ward off infection in healthy animals
- Infection with Aspergillus suggests that the immune system of this dolphin was compromised

June 21: Female adult



Most significant findings:

- -severe chronic fishing line entanglement of the right fluke
- -Lung fungal & bacterial infection
- -Kidney bacterial infection
- -Lymphoid depletion noted histologically
- -Septicaemia likely











September 17: adult female



Most significant findings:

- Numerous, extensive ulcerative skin lesions with intralesional opportunistic bacterial & fungal organisms
- Intracytoplasmic viral inclusion bodies detected in keratinocytes, indicative of poxvirus infection



Poxvirus inclusion bodies





October 25: female, adult



Most significant findings:

- Numerous, extensive ulcerative skin lesions with intralesional opportunistic bacterial & fungal organisms
- Intracytoplasmic viral inclusion bodies in keratinocytes (poxvirus infection)
- Acute (recent) human induced injury – fish-hook lodged in oesophagus, minor entanglement with minimal tissue laceration of the right pectoral fin



Poxvirus/Tattoo Skin Disease



- Poxvirus infection most often reported in juveniles (adults tend to develop protective immunity following infection as a juvenile)
- Considered to be only weakly pathogenic. Infection usually self-limiting
- Does not usually result in large deeply ulcerative lesions
- Usually not associated with death







General post-mortem findings



- Secondary infections (bacteria &/or fungi)
- •Lymphoid depletion (reduction in immune cells in lymph nodes & spleen)
- •Severe skin lesions in 2 dolphins

= Clinical findings suggestive of compromised immune function →underlying cause????



Possible causes of impaired immune function



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What was different about 2009?





Cetacean morbillivirus



Most pathogenic virus known to cetaceans

Causes severe lymphoid depletion

Secondary infections (pneumonia, encephalitis, parasites)



Cetacean morbillivirus



- Implicated in mass mortalities in US & Europe
- Little surveillance for disease in Australian cetaceans
- 1st confirmed case in Australia in a dolphin calf from QLD in 2010



Morbillivirus testing



• Immunohistochemistry (IHC) for the detection of morbillivirus antigen

DATE	SIGNALMENT	IHC
5 June	Male, calf	Not tested
8 June	Male, juvenile	Positive
21 June	Female, adult	Positive
17 Sept	Female, adult	Not tested
9 Oct	Male, adult	Not tested
25 Oct	Female, adult	Negative



Significance of morbillivirus for WA



- •First time in WA
- Second in Australia
- •First Indian Ocean
- Highly pathogenic



Transmission of morbillivirus



- Virus needs a very large population to persist
- Herd immunity not maintained in small dolphin communities
- No carrier or latent state
- Infected dolphins that survive remain immune
- Pilot whales thought to be reservoir hosts



The 2009 mortalities are best explained as the outcome of multiple contributing factors



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Acknowledgements



•Swan River Trust for providing funding which enabled this project

•Swan River Trust and Department of Environment and Conservation personnel responsible for the retrieval of the dolphin carcasses





Questions?

