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1 **Multipathogen infections and multifactorial pathogenesis involved in noble pen shell (*Pinna nobilis*)**  
2 **mass mortality events: background and current pathologic approaches**

3

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33

34 **Abstract**

35

36 Disease outbreaks have been reported in recent years from several ecologically or commercially  
37 important invertebrate marine species all over the world. Mass mortality events (MMEs) have affected  
38 the noble pen shell (*Pinna nobilis*), causing its near extinction. Our knowledge of the dynamics of diseases  
39 affecting this species is still unclear. Early studies towards determination of the etiological agent  
40 responsible focused on a novel protozoan parasite, *Haplosporidium pinnae*, though further investigations  
41 suggested that concurrent polymicrobial infections could have been pivotal in some MMEs, even in the  
42 absence of *H. pinnae*. Indeed, moribund specimens collected during MMEs in Italy, Greece, and Spain  
43 demonstrated a systemic presence of a bacteria from within the *Mycobacterium simiae* complex and in  
44 some cases species similar to *Vibrio mediterranei*. Moreover, the diagnostic processes used for  
45 investigation of MMEs is still not standardized and requires the expertise of veterinary and para-  
46 veterinary pathologists, who could simultaneously evaluate a variety of factors, from clinical signs to  
47 environmental conditions. In this review we aim to report the data published until now and to discuss  
48 the urgent need of a consensus on the best research approaches to define MMEs in *P. nobilis*, in the  
49 context of the priorities required for their conservation. This approach should form the basis for  
50 establishing a broad foundation for future studies, aimed at preserving endangered populations of this  
51 native bivalves.

52

53

54 **Keywords**

55 Bivalves, diagnostics, *Haplosporidium*, *Mycobacterium*, *Vibrio*, polymicrobial infections

56

57 Epizootics caused by emerging infectious diseases often result in mass mortality events (MMEs),  
58 particularly in the case of newly introduced pathogens for which the host in question has had no previous  
59 exposure. These are becoming more frequent in shellfish over the last 30 years. Fish infectious diseases,  
60 their etiological agents and transmission mechanisms have been extensively studied, but much less is  
61 known about pathogens of shellfish and other benthic fauna, and particularly of diseases of bivalves.<sup>36</sup>  
62 The lack of information about the causes of disease in marine invertebrates is severely limiting our  
63 understanding of the aetiology and environmental factors contributing to MMEs.<sup>18</sup> In aquatic animals,  
64 complex interactions between heterogenous bacteria, viruses, and parasites are further complicated by  
65 an array of non-infectious environmental factors, resulting in polymicrobial infections with pathological  
66 outcomes that might be difficult to predict and control.<sup>19,93</sup> Novel cross-disciplinary approaches, involving  
67 simultaneous epidemiological and ecological studies at various levels of biological organization  
68 (molecular to population), are promising to provide a deeper understanding during host-pathogen  
69 interactions.<sup>22,46</sup>

70 The pen shell, also called fan mussel, *Pinna nobilis* is one of the largest bivalves of the Mediterranean  
71 Sea, inhabiting coastal areas and deeper areas in the range of 0.5–60 m. In the last decade, extensive  
72 mass mortalities of the species in many Mediterranean countries (Italy, Spain, Greece, Turkey, France)  
73 resulted in its inclusion in the Annex II Barcelona Convention (1992), Annex IV of the EU habitats directive  
74 (2007), and redefining the species as ‘critically endangered’ by the IUCN red list for threatened species.

75 The phenomenon began in 2016 and continues to devastate the populations of fan mussels to the  
76 present day. MMEs can reduce a population in a short period of time, in some instances, due to specific  
77 environmental conditions or weather events which can be the underlying and triggering causes <sup>Mc Dowell</sup>  
78 These phenomena have been reported all over the world in different marine taxa <sup>FEY</sup>. In the  
79 Mediterranean Sea, large-scale temperature anomalies, corresponding to increase in the frequency and  
80 intensity of marine heatwaves (MHWs), have been reported since 1999 and later between 2015-2019,  
81 for five consecutive years, and associated with MMEs of 4icrobenthic species belonging to different phyla  
82 in Italy, France and Spain <sup>1, 18, 22</sup> The most affected species reported during these MMEs belong to the  
83 coralligenous community that includincludedes gorgonians, echinoderms and sponges, which are  
84 present along thousands of kilometres of coastline from the surface to 45 m. Reported data refer mostly  
85 to temperature and non-infectious factors, but no pathologic data at individual/species level have ever  
86 been reported for most of them <sup>48</sup>.add

87 A clear understanding of the aetiology of the ongoing MMEs affecting the native *P. nobilis* populations in  
88 the Mediterranean basin is necessary. Recent diagnostic investigations repeatedly confirmed the  
89 simultaneous presence of several pathogens in the diseased bivalves. *Mycobacterium* sp. was identified  
90 frequently, followed by *H. pinnae*, while *Vibrio mediterranei* and *Perkinsus* sp. were also detected in some  
91 cases, suggesting that exposure to different pathogens could increase the complexity of disease  
92 pathogenesis (Figure 1). The phylogenetic relationships of *Mycobacteria* spp. isolated from moribund  
93 noble pen shells demonstrated a close relation to the *M. simiae* complex, which includes important  
94 zoonotic agents responsible for the cause of emerging human and mammalian diseases.<sup>48, 28, 67</sup>

95 Therefore, there is a strong need for implementing active surveillance programs focusing on new  
96 emerging pathogens with zoonotic potential. This is especially relevant for the interface of the

97 human/marine habitat in the Mediterranean basin, currently experiencing a unique ecological transition  
98 represented by biological disturbance, climate change and modifications of the deep sea ecosystems.  
99 Altogether these factors can drive the emergence of new pathogens in unpredictable ways as already  
100 reported.<sup>1, NEW</sup> Improving the available diagnostic protocols for other species is mandatory for updating  
101 the surveillance capabilities for disease outbreaks and MMEs and to support healthy coastal ecosystems.  
102 Based on the available scientific evidence herein we discuss how the MMEs of *P. nobilis* are likely a  
103 consequence of a complex interplay between infections and non-infectious factors. In this review we  
104 stress the urgent need for future research to refrain from simplified disease hypotheses and take into  
105 consideration multiple additional elements that may have an impact on the physiology of the largest  
106 bivalve in the Mediterranean basin. At events of increased mortality in the marine environment,  
107 professionals investigate the episodes through qualitative clinical and pathological examinations, submit  
108 samples to laboratories for histopathological-assessment or diagnostics of infectious agents. However,  
109 the investigation into the pathogenesis of MMEs in marine environment has its limitations in revealing  
110 causality of disease without standardized diagnostic protocols.

111

112

### 113 **Overview of the MMEs**

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115

116 *The pathogens involved in P. nobilis MMEs and their interplay*

117

118 Several pathogens have been found associated with the MMEs of the pen shell, and closely related with  
119 MHWs. The first report MMEs of *P. nobilis* described the presence of a Haplosporidian parasite in the

120 epithelium of digestive gland tubules in the autumn of 2016, although other pathogens have since been  
121 reported (Figure 1).<sup>31</sup>

122 Haplosporidians are endoparasites of invertebrates with a wide host range including bivalves,  
123 crustaceans, tunicates and polychaetes<sup>21</sup>. The phylum *Haplosporidia* has been associated with epizootic  
124 mortalities of farmed bivalves affected by the OIE-listed pathogens *Bonamia ostreae/exitiosa*, and by the  
125 MSX (Multinucleated Sphere Unknown) disease caused by *Haplosporidium nelsoni*. An outbreak due to  
126 *H. nelsoni* along the mid-Atlantic coast of the USA devastated local oyster populations and was  
127 responsible for significant economic losses.<sup>37,50</sup> In the case of the noble pen shell, the species in question  
128 is a member of the genus *Haplosporidium* and belongs to a large clade of species in the order  
129 Haplosporidia, and closely related to a *Haplosporidium* sp. infecting the cultured shrimp *Penaeus*  
130 *vannamei* in the Caribbean Sea and Indonesia.<sup>72,92, 27</sup> The parasite was reported in many areas, from  
131 Greece, Italy, Spain, Croatia and Turkey,<sup>24,58,64,82</sup> and considered as one of the major causative agents of  
132 the *P. nobilis* MMEs.

133 Haplosporidian life cycle stages include two main phases: a uni-multinucleate plasmodium, and a  
134 sporulation phase producing resistant spores with a typical opening covered by an external lid.<sup>26</sup> The  
135 plasmodia stage divides by plasmotomy and can undergo sporulation. Spores are released into the  
136 environment after the death of the host, but they do not seem to be infective to the host in which they  
137 are produced, and may require a different host for completion of their life cycle.<sup>26</sup>

138 The morphological description of *H. pinnae* was firstly reported by Darriba et al.<sup>31</sup>, and afterward by  
139 Catanese et al.<sup>27</sup>

140 Gross examination of affected animals can reveal in some case the presence of liquid cysts visible in  
141 tissues of the digestive apparatus, revealing an atrophic digestive epithelium underneath, related to the  
142 haplosporidium sporocysts dividing within the epithelial tubules<sup>24</sup>.

143 The *H. pinnae* plasmodial phase is mainly uninucleate measuring 2-3  $\mu\text{m}$  of length, with a central or  
144 slightly eccentric dense nucleus, present primarily in the connective tissue of the mantle and the  
145 digestive tissue. The plasmodia are generally observed within the hemocytes and in the connective tissue  
146 of the mantle and of the digestive gland (Figure 2a-c). Sporulation occurs in the epithelium of the  
147 digestive gland tubules, with transformed plasmodia having a lighter eosinophilic cytoplasm. Epithelial  
148 distention by sporocysts (30  $\mu\text{m}$ ) impinge the lumina of digestive tubules and when mature, sporocysts  
149 are released into the lumen (Figure 2d). In this phase, the host inflammatory response can appear mild  
150 or absent.<sup>24,25,31</sup> However, severe inflammation of the connective tissue of the digestive gland, with  
151 hypertrophy and hyperplasia of brown cells has been reported (Figure 2e-f).<sup>27,64</sup>

152 In terms of pathogen prevalence and intensity, the dynamics of haplosporidians in their hosts can be  
153 seasonal and dependent on environmental parameters like water currents.<sup>21</sup> In particular, as a pivotal  
154 step towards understanding mortality of *Pinna nobilis*, model simulations of particle drift dictated by  
155 regional surface currents have been performed<sup>45</sup>. Reported data showed that oceanic currents  
156 constitute a potential factor driving the expansion of these groups of parasites<sup>23,45</sup>. Unfortunately, the  
157 distribution of the disease pattern can't be conclusively ascribed solely to *H. pinnae* because much of the  
158 mortality reports were collected by "citizen scientists" who didn't perform any pathological analysis to  
159 assess what actual pathogens were present.<sup>6,23</sup>

160



161 Indeed, *H. pinnae* is not the only pathogen causing MMEs. Mortality of *P. nobilis* occurs also in the  
162 absence of *H. pinnae* and related to an infection by an incompletely classified *Mycobacterium*. The first  
163 report occurred in the two southern Italian regions in 2018, Campania and Sicily.<sup>24</sup> Later on, a diagnostic  
164 survey was conducted on moribund *P. nobilis* specimens retrieved from other Italian regions, such as  
165 Tuscany, Sardinia, and Apulia and then extended to Spain, in Catalonia. These studies showed that in the  
166 early phases of MMEs dying specimens presented a systemic disease associated with the infection by a  
167 *Mycobacterium* species, belonging to the *simiae* complex. Further molecular study of the *Mycobacterium*  
168 in *P. nobilis* used the genetic marker *hsp65* and the Internal Transcriber Spacer ribosomal DNA (ITS rDNA)  
169 for differentiating the strain. The study supported that the *Mycobacterium* infecting *P. nobilis* is close to  
170 *M. triplex*<sup>25</sup> that groups within the *M. simiae* complex, together with *M. sherrisi*, though phylogenetically  
171 distant to other mycobacteria reported from other mollusc species and other marine organisms. In fact,  
172 the *simiae* complex is composed of slow growing non-tuberculous mycobacteria (NTM), which were  
173 initially identified from *Rhesus* monkeys in 1965.<sup>52,54</sup> The complex has also been reported in humans in  
174 the Southern United States, Cuba, Palestine, Iran, Israel, Turkey, Japan, and more recently from Sri  
175 Lanka.<sup>49,56</sup> The species *Mycobacterium sherrisii* was recently described and characterized,<sup>84</sup> and now  
176 formally validated as a novel species.<sup>53</sup>

177 In most published cases, this *Mycobacterium* is reported to be an opportunistic pathogen, affecting  
178 immunocompromised individuals, such as HIV patients or those with pre-existing pulmonary diseases.  
179 Recent 16S rRNA gene data performed at the American University of Beirut Medical Centre, in Lebanon,  
180 revealed that *M. simiae complex* is the most common NTM isolated in human patients.<sup>8</sup>

181 In *P. nobilis* we still have scarce information on the pathogenetic mechanisms of this *Mycobacterium*.

182 Upon opening an infected pen shell, external clinical signs are non-specific, and include generalized tissue  
183 edema, characterized by a diffuse tissue swelling due to fluids that collect in the interstitial spaces of  
184 mantle and gill .<sup>24</sup> Microscopically, the bacteria seem to localize mainly within the eosinophilic  
185 granulocytes and in some cases in the Brown cells, as also shown by ultrastructure. They apparently  
186 escape from the phagosome, establishing in the cytoplasm of the host cell in a manner similar to other  
187 *Mycobacteria* (Figure 3).<sup>24</sup> Generally, 3 different patterns are described based on morphology of the  
188 inflammatory response and distribution, classified as focal, multifocal, and diffuse, involving granulocytes  
189 and brown cells. Diffuse inflammation is differentiated from focal inflammation when the affected area  
190 does not have multiple centers of hemocyte infiltration, and the immune cells are abundant and  
191 distributed broadly over a large section of tissue. During mycobacterial infection, moderate to severe  
192 multifocal inflammatory nodules are visible. Granulocytes can be admixed with aggregates of brown cells  
193 located in connective tissue of the digestive gland, and gonads (Figure 3a-c). Within the formed nodules  
194 composed of granulocytes, numerous intracytoplasmic acid-fast bacteria positive to Ziehl-Nelsen stain  
195 are visible (Figure 3b-d). Granulocytes, admixed with brown cells, could degenerate within the centre of  
196 the nodule in the connective tissue of the digestive gland and gonad. In reactive connective tissue  
197 proliferation of fibrous tissue is frequently observed, with infiltration by hyalinocytes and the presence  
198 of acid-fast bacteria within the brown cells (Figure 3 e-f).

199 Earlier studies before 2019, did not perform investigations to detect the presence of this  
200 *Mycobacterium*.<sup>20,23,65</sup> However, other research groups reported the same Mycobacterial species in  
201 specimens involved in MMEs, from many locations around the entire Mediterranean basin. Both  
202 *Mycobacterium* and *H. pinnae* have frequently been detected.<sup>25,64,76,82</sup>

203 Further phylogenetic analysis of the pathogens isolated from moribund animals showed that strains of  
204 *Mycobacterium* and *H. pinnae* had high similarity to samples previously reported from Greece, Spain,  
205 and Italy.<sup>25,62,64,75</sup> In Catalunya, *H. pinnae* was observed in 36% of the examined cases, always associated  
206 with *Mycobacterium* sp.<sup>25</sup> Histopathological studies in specimens from Thermaikos Gulf, Greece, showed  
207 the presence of *Mycobacterium* sp. with *H. pinnae*.<sup>64</sup> Interestingly, monitoring of a *P. nobilis* population  
208 from the Thermaikos Gulf, an estuary of extremely high importance for bivalve production, revealed the  
209 presence of both pathogens in a few specimens in higher quantity, without clinical symptoms of the  
210 disease.<sup>64</sup> The mass mortality of the population in the Thermaikos Gulf occurred during a prolonged  
211 period of raised seawater temperature in the Autumn, causing the collapse of all populations in shallow  
212 waters (4-10 m). In the Aegean Sea, the infection spread to all habitats by the late spring of the same  
213 year, limiting the distribution of surviving fan mussel populations to only the Kalloni Gulf Lesvos Island  
214 and in the Maliakos Gulf, Greece. Despite the temperature drop in the winter of 2019, mortality of the  
215 species continued, albeit at a lower rate than in the summer months of the previous year.<sup>62</sup> The  
216 histopathology of moribund animals showed greater lesion severity in specimens with concurrent  
217 infections with both *Mycobacterium* and *H. pinnae*.<sup>82</sup> Moderate to severe inflammatory lesions were  
218 linked to the unique presence of *Mycobacterium* sp., while absent or mild to moderate inflammatory foci  
219 were seen when *H. pinnae* was found alone. In the latter case, moderate inflammatory lesions were  
220 associated with the sporulation phases of the parasite. Lesions were absent, or of mild intensity, in the  
221 presence of plasmodia. This evidence suggests that the detection of different developmental stages of  
222 this parasite could have diagnostic and pathogenic relevance during *Haplosporidium* sp. infections. The  
223 simultaneous detection of both pathogens, and their presence within the inflammatory lesions, was  
224 observed in most of the examined sick/moribund animals. The absence of the *MME* in areas where these

225 pathogens were not detected,<sup>82</sup> supports the hypothesis that both *Mycobacterium* and *Haplosporidium*  
226 are cooperating in the progression of disease pathogenesis, thus synergistically leading to MMEs  
227 affecting *P. nobilis* in the Mediterranean Sea. Given the lack of clarity of *Haplosporidium* life cycles  
228 generally, there is also the possibility of additional biotic factors such as the presence or absence of  
229 alternate hosts that may contribute to the severity of MMEs.<sup>38</sup> The lack of such knowledge clouds some  
230 interpretations of the available data.

231 Further molecular diagnostic analyses on *P. nobilis*, *P. rudis*, and other bivalve species were performed  
232 in Sardinia (Italy),<sup>83</sup> showing that *H. pinnae* was present in other bivalves at least 3 years before any first  
233 reported occurrence in *P. nobilis* associated with MMEs. Within the *P. nobilis* examined, positive *H.*  
234 *pinnae* PCR was reported in 27 (out of the 48) individuals analysed (56.3%). The protozoan was found in  
235 71.4% of individuals with signs of disease such as weakness in closing the valves, but also in 44.4% of  
236 individuals without signs of disease. In a group of asymptomatic individuals, PCR testing for the presence  
237 of *H. pinnae* revealed a total of 12 positive and 15 negative specimens. PCRs targeting the Mycobacteria  
238 16S rRNA were negative in 46 out of the 48 individuals tested. The only exceptions were retrieved from  
239 some individuals, such as PN19 from the north-western coast of Sardinia, and PN48 from the northern  
240 coast of Sardinia, which were found positive for *Mycobacterium* sp., showing 98% identity with the  
241 *Mycobacterium* sp. formerly described.<sup>25</sup>

242 Other typical bivalve pathogens such as bacteria belonging to *Vibrio* spp. and the dinoflagellate parasite  
243 *Perkinsus* sp. were detected in a few cases, suggesting that exposure to multiple pathogens could  
244 increase the complexity of disease pathogenesis<sup>25, 65</sup>. In Greece, 16S rRNA metagenomic sequencing was  
245 approached to assess the bacterial diversity within the digestive glands of diseased individuals.<sup>65</sup> Thirty  
246 moribund animals were collected in two different marine areas in the Aegean Sea. Sampling was carried

247 out between February and April of 2020. Along with the presence of pathogenic strains of *Vibrio*  
248 *mediterranei*, multiple bacterial genera were detected including *Aliivibrio* spp., *Photobacterium* spp.,  
249 *Pseudoalteromonas* spp., *Psychrilyobacter* spp. and *Mycoplasma* spp., with the latter found with a higher  
250 abundance. Interestingly, in 8-10% of the cases animals displaying different lesions, were analyzed and  
251 found to be negative for all the cited common pathogens. In early August of 2019, animals analysed in  
252 Croatia, in an area where no mortality was detected (Seline), were negative for *Mycobacterium* and *H.*  
253 *pinnae*, using both PCR and microscopic examination. However, histopathology revealed the presence of  
254 extensive inflammatory nodules associated with brown cell hyperplasia in 40% of the samples (2/5  
255 animals). Necrosis of the digestive gland was also recorded in a single individual, along with the presence  
256 of intraepithelial Gram-negative bacteria in the digestive tract. In 60% of the animals (3/5), the presence  
257 of unidentified ciliated protozoans on gills was also recorded.<sup>82</sup>

258 Negative molecular diagnostic (PCR) results were reported from Catalonia,<sup>25</sup> for 1 moribund, 1 dead  
259 (though still with turgid flesh) and 3 animals in advanced state of autolytic processes, thus excluding the  
260 presence of *Mycobacterium*, *Haplosporidium* and *V. mediterranei*.

261

262 *Vibrio mediterranei* is associated with *P. nobilis* mortality under predisposing conditions

263

264 The influence of pre-existing non-infectious factors on a bivalve's microbial communities, leading to the  
265 establishment of disease conditions, is still not well understood. It is known that to cause disease,  
266 pathogens must infect and invade the host's body, and subsequently dominate its microbial community.<sup>2</sup>  
267 *Vibrio mediterranei* (synonym name of *V. shiloi* or *V. shilonii*) has been found in various marine  
268 invertebrates.<sup>81,85,90,91</sup> The type strain (CECT 621T) was originally isolated from marine sediments,<sup>77</sup>

269 indicating that *V. mediterranei* is a cosmopolitan bacterial species.<sup>3,10,41</sup> Virulence genes were found in  
270 association with temperature/salinity-stressed animals, and include chitinases, proteases, and genes  
271 involved in an array of secretion and iron sequestration pathways.<sup>10</sup> The pathogenicity of *V. mediterranei*  
272 was first described in association with MMEs of the scleractinian coral *Oculina patagonica*, under the  
273 synonym name of *V. shiloi* or *V. shilonii*.<sup>59–6181</sup> Interestingly, in the case of coral bleaching by *V. shiloi*, in  
274 *Oculina patagonica*, the major effect of increasing temperature was reported to be the expression of  
275 virulence genes by the pathogen.<sup>80</sup> Elevated seawater temperature (a predisposing cause) increases the  
276 virulence of *V. shiloi*, synonym *Vibrio mediterranei* (a necessary cause), which enables the pathogen to  
277 adhere to a  $\beta$ -galactoside-containing receptor –produced by zooxanthellae – in the mucus on the surface  
278 of the coral host.<sup>80</sup> In the global decline of coral reef systems, the occurrence of multifactorial aetiology  
279 has been suggested, although still poorly understood.<sup>32</sup>

280 The first detection of *V. mediterranei* associated with a mass mortality in *P. nobilis* was reported during  
281 one of the early MMEs, registered in October 2016 along the coast of Alicante along the Southern  
282 Mediterranean coast of Spain. This multidisciplinary study used various methods including  
283 histopathology, bacteriology, virology, and parasitology, pathogen culture and PCR procedures.<sup>79</sup> A  
284 Saccharose positive bacterium was isolated in a TCBS medium from organs and tissues of two affected  
285 specimens and was absent in a third apparently healthy individual. The analysis of the 16s rRNA gene  
286 sequence obtained indicated the etiological agent was *V. mediterranei*. This information, together with  
287 experimental challenges of juvenile Manila clams (*Ruditapes philippinarum*) at 17°C and 24°C,<sup>78,79</sup> was  
288 reported and used as the basis for further testing the Koch postulates in juveniles of *P. nobilis*.<sup>3</sup> Similarly,  
289 in the Aegean Sea, the investigation of mortality events in *P. nobilis* populations conducted during the  
290 winter months along the Greek coastal zones, revealed the first detection of *V. mediterranei*, although

291 concurrently with another *Vibrio* sp. including a member of the *V. splendidus* clade.<sup>62</sup> In that study, apart  
292 from the presence of *Vibrio* spp., *Mycobacterium* sp. was detected in all examined individuals together  
293 with *H. pinnae*, which was present in 3 of 17 specimens studied.

294 Prado et al.<sup>75</sup> recorded over 90% cumulative mortality over 19-month period, peaking in summer and  
295 early fall and coinciding with water temperatures above 25 °C. This temperature effect was also  
296 observed in a challenge experiment in which *P. nobilis* individuals with mean shell length of 24 cm, were  
297 injected with a strain of *V. mediterranei* (IRTA18-108) and held in open flow tanks for 23 days.<sup>3</sup> At the  
298 start of the experiment, water temperature was 18°C. Mortalities started at 22°C on day 6 post-injection  
299 and sharply increased after water temperature rose above 24°C. Even though mortality rates were not  
300 correlated with the bacterial doses injected, pathogenicity of the strain used for challenge was  
301 confirmed in *P. nobilis* through PCR.

302 Field samples of *P. nobilis* collected in Alfacs Bay in the Ebro Delta were also found to be infected with *V.*  
303 *mediterranei* in different tissues (particularly muscle and kidney), with 60% of the individuals having PCR  
304 positive results in at least one tissue (adductor muscle, gonad, kidney, digestive gland, or branchia),  
305 without displaying any disease signs. Apart from the challenge experiment described above, additional  
306 individuals held in captive conditions suffered mortalities and necrosis of kidney and digestive tissue that  
307 may be explained by consequences of generalized stress, and/or poor nutrition due to inappropriate  
308 dietary maintenance leading to potentially reduced immune capacity and vulnerability to infection by *V.*  
309 *mediterranei*. With individuals subjected to a more balanced diet, lower and later rates of mortality were  
310 observed.<sup>75</sup> Yet, the pathogenicity of *V. mediterranei* in the context of other stressful events contributing  
311 to debilitation of individuals, such as previous infections by other pathogens (e.g. *H. pinnae* or  
312 *Mycobacterium* sp.), remains to be properly investigated. In a field study carried out in 2020 in the

313 Thermaikos Gulf on the remaining populations of *P. nobilis*, *Vibrio* species including *V. mediterranei*, were  
314 detected alongside other *Vibrio* spp. in moribund individuals (unpublished data).

315

316 *Penshell immune and stress response associated with the MMEs*

317

318 The field of pathology is devoted to defining the causes of disease by describing the changes in cells,  
319 tissues, and organs that are associated with disease and give rise to the presentation of signs and  
320 symptoms in sick organisms.<sup>33</sup> Cells actively interact with their environment, constantly adjusting their  
321 structure and function to changing demands and extracellular stressors.<sup>40,87</sup> As cells face physiologic  
322 stresses or adverse conditions, they can undergo adaptation, achieving a new homeostatic state and  
323 preserving viability and function by activating stress related genes and immune genes.<sup>2,29</sup>

324 Bivalves possess an innate immune system composed of cellular and humoral immune components  
325 which are regulated by many immune-related genes.<sup>9,88</sup> Expression of some immune genes influences  
326 genetic regulatory mechanisms, modifying cellular and organismal responses of ectotherms, such as  
327 bivalves.<sup>35</sup> A first attempt to morphologically describe the pen shell immune cells, using cytology and  
328 electron microscopy, was performed by Matozzo et al.<sup>69</sup> just before the spreading of the MMEs. Two  
329 types of haemocytes were described: granulocytes and hyalinocytes; and granulocytes were further  
330 subdivided either as basophilic, acidophil, and neutrophilic, capable of an active phagocytosis.  
331 Haemocytes can produce superoxide anion and acid and alkaline phosphatases. Recently, during MMEs  
332 Brunet et al.<sup>17</sup> reported a first insight into the genome of *P. nobilis* showing a large variety of genes  
333 related to immunity, ranging from the pattern recognition receptors to effectors of the immune  
334 response, and genes involved in apoptosis signalling, typically involved in the response of cellular damage



335 in bivalves.<sup>94</sup> Pattern Recognition Receptors such as Toll-like receptors, peptidoglycan recognition  
336 receptors, glucan-binding proteins, lectins and laminins were highly represented in the *P. nobilis* genome  
337 along with members of the Bcl-2 family, caspases and inhibitors and activators of apoptosis.

338 Peculiar immune cell types reported present in many bivalve species and highly represented in *P. nobilis*  
339 are the so-called *brown cells*, abundant in the blood sinuses underlying the intestinal tract and renal  
340 pericardial region filled with yellow-brown granules. They are fixed phagocytes common in the  
341 connective tissue of bivalves. They aggregate in lesions and are found during *H. pinnae* and  
342 *Mycobacterium* infection in *P. nobilis* but capable of active diapedesis. They may resemble higher  
343 vertebrates Dendritic Cells , or Melanomacrophages Centres from birds and fish, and they are filled with  
344 brown/yellow pigmented phagocytes that contain lipofuscin and melanin. In bivalves they contain  
345 lysozyme, glutathione reductase and acid phosphatase<sup>96</sup> . When activated they pass from an immature  
346 state into mature cells specialized for antigen capture with the initiation of lysosomal function.

347 Specimens of *P. nobilis* infected with either bacterial or parasitic pathogens generally display  
348 hypertrophic and hyperplastic brown cells throughout the vesicular connective tissue in various states of  
349 activity and degeneration (Figure 2-3).

350 Studies on stress response-related genes in the pen shell have identified members of the cytochrome  
351 P450 gene family, heat shock proteins as well as sulfotransferases and glutathione-transferase genes.  
352 Various triggering stimuli have been identified. Previous works showed that *P. nobilis* colonized by the  
353 invasive algae *Lophocladia lallemandii* as well as individuals affected by anthropogenic activities have  
354 increased levels of markers of oxidative stress.<sup>15,89</sup> *P. nobilis* affected by *H. pinnae* showed a reduction of  
355 the antioxidant effectors catalase and superoxide dismutase, as compared to the healthy individuals,  
356 while sick individuals also had higher levels of malondialdehyde, an indicator of lipid peroxidation.<sup>14</sup>

357 Other stress indicators like heat shock proteins and immune response pathways, apoptosis and  
358 autophagy were investigated in few affected animals in Greece by Lattos et al.<sup>63</sup> Analysis of both  
359 Hsp70/Hsp90 demonstrated that Individuals coinfecting by *H. pinnae*, *Mycobacterium sp.* and *Vibrio sp.*  
360 species exhibited higher levels of the stress proteins, indicating an increased cellular stress response in  
361 comparison with the individuals infected only with *Mycobacterium* and *Vibrio*. Regarding specific  
362 immune genes, levels of the pro-inflammatory cytokines, Il-6 and TNF- $\alpha$ , did not show any significant  
363 differences between individuals infected only with *H. pinnae*, or the three pathogens together.

364

365 *Considerations on false diagnoses or lack of knowledge of normal histology and histopathology*

366

367 Histology remains a standard assessment tool for disease diagnosis in pathology, providing information  
368 on the state of the host tissues, the etiology of disease, the level of infection, and pathological alterations  
369 of affected tissues.

370 In the invertebrate pathologists' community, there is an increasing concern about the quality and veracity  
371 of histopathological findings published in peer-reviewed journals in the field. Animal pathology training  
372 programs encourage students to obtain rigorous, comprehensive education in histology, histopathology,  
373 and systemic pathology. The trained and experienced animal pathologist must know the studied animals  
374 in detail and have ability to distinguish normal histological variations from pathological processes in  
375 examined tissues. Historically, histopathology has mostly been used for the identification of bivalve  
376 parasites, with focus on the species of commercial interest such as clams, oysters and mussels, and to  
377 some extent as an endpoint in toxicological studies, sometimes using sentinel species such as zebra  
378 mussels. On the other hand, increased interest in publishing findings about invertebrate pathology has

379 not yet been met with an increase in availability of expert reviewers with specific training. Consequently,  
380 inaccurate interpretations of microscopic observations are being published in peer reviewed scientific  
381 publications.

382 The first histological misinterpretation about *P. nobilis* was reported by Katsanevakis et al.<sup>35</sup> where  
383 reported histopathologic findings of *H. pinnae* in the digestive gland are in fact photomicrographs of a  
384 female gonad follicle with evident regressing oocyte phase, surrounded by brown cells and scattered  
385 hemocytes. This error is apparently a combination of the authors' failure to recognize the normal tissue  
386 and the failure of the reviewers to reject the incorrect interpretations of the images and their associated  
387 findings. Recently Kunili et al.<sup>58</sup> also misinterpreted a normal tissue for *Haplosporidium*. Throughout the  
388 publication, the authors erroneously describe constitutive immune cells of a pen shell (brown cells) as  
389 "sporocysts enclosing more or less mature spores", and apparent nuclei of digestive epithelia are  
390 incorrectly reported as plasmodia or binucleate phase of the parasite. Furthermore, designated tissue  
391 types are hardly recognizable as such in the published low-quality images. These two examples of  
392 inaccurate and poorly presented histopathological data emphasize the need for augmentation of the  
393 knowledge on microanatomy and pathology of bivalve species (in particular those without commercial  
394 interest), encompassed by comparative pathologists.<sup>7</sup>

395

#### 396 **Non-infectious factors can play a role in the evolution and distribution of disease patterns in the field**

397

398 Factors like temperature, humidity and soil nutrients and ocean chemistry in general can all have strong  
399 influences on spatial distributions of pathogens. Studies of relevant non-infectious factors, like water  
400 temperature and salinity have been reported.<sup>68</sup> These same non-infectious factors also affect animal

401 physiology, such as spawning and the subsequent recruitment of juveniles that are affected by water  
402 temperature. An absence of recruitment has been noted previously among the Ebro Delta populations,<sup>5</sup>  
403 and investigations using *P. nobilis* -specific qPCR detected very low levels of *P. nobilis* eggs/larvae in  
404 seawater samples collected in this region during Aug-Sept. 2016.

405 Currently surviving *P. nobilis* populations are found only in enclosed bays, like in the Sea of Marmara and  
406 in a few scattered lagoons. With such geographical limitations in distribution, recruitment bottlenecks  
407 can be a driver of reduced genetic diversity that ultimately may enhance the severity of MMEs regardless  
408 of the cause. The last known remaining population from Greece, is located near the estuaries of the  
409 Spercheios River, Phthiotis, central Greece, in a habitat characterized as having lower salinity levels than  
410 at the other populations in the same Gulf. This population was the last one that survived during the rising  
411 temperature regime in the spring of 2020 (unpublished data). Mortalities occurred in the populations of  
412 Maliakos, Phthiotis, central Greece, during the winter 2020, however not at the scale considered to be  
413 an MME. Temperature of these sampling sites ranged between 10°C and 15°C. Also, regarding the Greek  
414 coastline, despite the numerous diving efforts in different sites, no living individuals were detected in the  
415 Ionian Sea in 2020, except for the population originating from Laganas Bay in Zakynthos Island, Ionian  
416 Sea.<sup>97</sup> Cabanellas-Reboredo et al.<sup>23</sup> collected data on pen shell MMEs and environmental conditions  
417 assembled by scientists and citizens across the Spanish Mediterranean coast, south of France, and some  
418 more isolated locations in the Tyrrhenian and Adriatic Sea, Crete and Chypre and found that disease  
419 expression was closely related to temperatures above 13.5 °C and to a salinity range between 36.5-39.7  
420 ‰. Although no pathological evaluation was conducted to determine the exact cause of mortality, the  
421 results indicated a clear influence of salinity and temperature in outbreak patterns. This suggests that  
422 the interaction between these factors at the local scale could influence the outcome of MMEs. Similarly,

423 in the outer part of Alfacs Bay (South Ebro Delta), mass mortality events in 2018 and 2019 did not occur  
424 until the months of July and August, when temperatures rose above 28 °C (considerably higher than 13.5  
425 °C) and coincided with salinity increases above 35 g/L (36.5 to 38.5 range).<sup>76</sup> In this case of Alfacs Bay, it  
426 is important to note that mortality rates (100% near the mouth, 43% in middle regions, and 13% in inner  
427 regions) were significantly associated with the summer salinity gradient across the bay (averages of 37.4  
428 to 35.7) caused by freshwater agricultural discharges during the spring-summer season. *H. pinnae* was  
429 detected in individuals from all study zones of Alfacs Bay, whereas *Mycobacterium* was only found in the  
430 region near the mouth of the bay, featuring the highest salinity. Interestingly, neither *H. pinnae* nor  
431 *Mycobacterium* were found in the small population of Fangar Bay (North Ebro Delta) subjected to  
432 summer salinity ranges of ca. 30.5 to 33.5 g/L.<sup>76</sup> Also, importantly, a small contingent of young surviving  
433 individuals (3 years of age) was found in the region of Alfacs Bay subjected to MMEs where both *H. pinnae*  
434 and *Mycobacterium* were present.<sup>76</sup>

435 Given that the prevalence of infection with *Mycobacterium* and other Gram (-) bacteria increases with  
436 host size, these patterns suggest that both pathogens are to some degree involved in the overall  
437 mortality rates observed in the field. In addition to those from the Ebro Delta, surviving pen shell  
438 populations have also been found in other confined or semi-confined environments featuring higher or  
439 lower salinities as compared with the open sea.<sup>39,42,44,73,86</sup> All these observations taken together, stress  
440 the importance of environmental monitoring to assess the mortality risks to populations and to consider  
441 possible palliative management actions such as controlled release of freshwater, where possible, to  
442 balance possible increases in salinity above 36.5 g/L during the summer period.

443

#### 444 **The need for standardized diagnostic protocols for noble pen shell MMEs**

445

446 Diagnostic procedures have a key role in disease control and infection prevention in the case of captive  
447 animals: medical care, risk evaluation, management, and mitigation, as well as development of  
448 government policies in a framework of One Health, all rely on diagnostic tools to guide further  
449 decisions.<sup>11,12,16,51, .98</sup> However, diagnosing any infectious disease in aquatic animals requires more than  
450 just the result of a laboratory-performed diagnostic tests to identify (known) pathogens. The diagnostic  
451 process usually requires the expertise of a veterinarian and/or trained para-veterinary pathologists, who  
452 could simultaneously evaluate all known factors, from clinical signs to environmental conditions, that  
453 could be associated with the presence of a pathogen to support their diagnosis as happens in human  
454 medicine; this would be the approximation of collecting the patient's history through written and oral  
455 records, which is given primary importance in human medicine. Moreover, this process is prone to errors,  
456 and undermine the ability to identify the primary causative agent with certainty. The availability of  
457 specific and sensitive diagnostic tests is also of high importance to assist veterinary services in providing  
458 correct diagnosis.<sup>99</sup>

459 In the case of bivalves, it is challenging to determine the health status considering that there is an  
460 absence of observable clinical signs until very late stages of infection. Preliminary information on the  
461 health status of *P. nobilis* populations is usually based on field observations of animal behavior describing  
462 animals generally as *healthy* or *sick /moribund*. For both adults and juveniles, assigning a bivalve to one  
463 of these categories is based on presence/absence of signs of adductor muscle weakening, such as gaping,  
464 and retraction of the mantle from the edge of the shell, to define it as sick.<sup>27,31,74</sup> Moreover, during field  
465 examinations of bivalves, the valve closure speed is usually estimated by applying a gentle or more

466 stronger touch, or by pushing the water in the direction of the valve opening; slower closing response  
467 indicating a sick or moribund animal. However, studies performed on bivalves in Croatia and Italy showed  
468 that the valve closing speed may be unreliable evidence (Carella pers. communication), thus, the  
469 determination of their health status based only on this observation could be incorrect. In fact, bivalves  
470 considered healthy in the field for the quick closing speed, at a direct or “hands-on” physical examination  
471 may show evident clinical signs such as generalized tissue oedema, cysts or areas of discoloration along  
472 with infection with pathogens when once subjected to microscopic evaluation. This can be true even  
473 with the presence of clear evident gross lesions (i.e. digestive gland cysts associated with the presence  
474 of *H. pinnae* in apparently healthy animals) (Figure 4). Variability in clinical signs can often be confusing  
475 and misleading due to the lack of knowledge of physiology and pathology of the studied host animals,  
476 with consequent difficulty in correct interpretations of clinical signs/animal behavior.<sup>95</sup> Such absence of  
477 a reliable clinical interpretation can be frustrating, leading to misinformed and possibly wrong decisions.  
478 Indeed, a prerequisite for formulating correct etiopathogenetic hypotheses and for the development of  
479 treatment or conservation strategies, is that they must be based on a correct assessment of a bivalve’s  
480 health status.<sup>43</sup>

481 Gaps in the diagnostic processes applied during investigations of mass mortalities in *Pinna nobilis* are  
482 clearly emerging from the increasing number of reports: there is no comprehensive and methodologically  
483 standardized description of the morphology, stage and grade of the macro-and microscopic lesions  
484 associated with the presence of specific pathogens. Therefore, it is not possible to link a pathogen to a  
485 specific response, lesion, or molecular pattern.

486 Possibly due to the endangered status of this species, most studies have utilized only mantle biopsies  
487 and molecular diagnostics to define the animal’s health status, which is itself a very limiting approach

488 that can lead to “over-interpretation” in pathological diagnosis.<sup>20</sup> Taking into consideration that a)  
489 multiple pathogens are potentially associated with MMEs, and b) these pathogens show systemic  
490 distribution patterns in several organs and tissues during different phases of disease progression, it is  
491 obvious that a simplified mantle biopsy/PCR approach cannot work as the optimal diagnostic strategy.  
492 Moreover, molecular diagnostics alone do not give enough information to differentiate the infection and  
493 the associated disease. Different developmental stages of *H. pinnae* can elicit very different tissue  
494 reactions and lesions; information which cannot be derived from molecular analyses that are qualitative  
495 on the presence/absence of the pathogen, and possibly quantitative, in the case of qPCR.<sup>25</sup> Furthermore,  
496 the absence of detailed histopathology descriptions from tissue lesions linked to the pathogens leads to  
497 confusing results.

498  
499 *A proposal for an integrated microscopy and molecular diagnostic protocol*

500  
501 Various techniques and an integrated approach needs to be used to collect, identify, and monitor host  
502 populations for pathogens and related lesions, along with the associated environmental data. For animals  
503 still alive in the field, mantle biopsy is usually collected to define if an animal is infected by *H. pinnae* and  
504 coupled with associated animal behavior. This type of sampling can't be used alone and should be  
505 coupled to the collection of other biological material, like hemolymph used for smear preps for  
506 microscopy and DNA-based diagnostic approaches, also for a parallel testing for other pathogens.

507 In the field, mantle biopsy is generally performed maintaining the valves opened with the use a wooden  
508 stick (diameter=0.5 cm), put in proximity of the hinge ligament. A tissue fragment of approximately 0.5  
509 cm<sup>2</sup> is taken using a sterilized bite forceps and fixed in absolute alcohol for subsequent DNA diagnostic.



510 This method ensures no damage for the sampled animal, performed by many researchers. A reliable  
511 technique for sampling hemolymph is needed to complement and expand this current base protocol for  
512 non-lethal assessment. In bivalves, hemolymph collection is done at the adductor muscle anterior or  
513 posterior, depending on the species, and less frequently the ventricle of the heart. Similarly, to the blood  
514 tests in humans and livestock, it has been demonstrated to be a suitable tissue to evaluate the state of  
515 infection in marine invertebrates.

516 Hemolymph can be taken from live animals in the field without sacrificing them. This practice needs  
517 experienced manipulation, since a needle of 150 to 300  $\mu$ m is used, inserted in the posterior adductor  
518 muscle, accessible from the upper part of the valve (Carella pers. communication). The adductor muscles,  
519 visible through gaping valves, allow needle insertion. Successful collection from a 50 cm animal can yield  
520 approximately 1.5 ml of fluid.

521 When moribund animals are collected instead, a complete panel of microscopic evaluation composed of  
522 hemolymph smear and histopathology of all the tissues, with routine and special staining, should be  
523 performed (**Table 1**). After the field examination, animals can be collected directly from their natural  
524 habitats and processed as soon as possible (max. 3-4 hours), transported in refrigerated containers.  
525 Specimens can survive much better in a chilled environment at 5-15°C. Species that tend to gape should  
526 be placed in damp towels or seaweed, then bagged and chilled. Care should be taken during collection  
527 to prevent damage and stress to specimens, which may affect histological interpretations. Animals are  
528 measured from the tip of the right valve near the hinge to the longest point on the bill, and their size  
529 (cm) is recorded. Few of the published articles on mussel mortality events describe gross lesions. The  
530 general appearance and overall body condition of each animal should be assessed as part of the routine  
531 examination or the investigation of mussel declines. External examination must consider shell

532 abnormalities, presence of fouling organisms, parasites, gross abnormalities, predators, and  
533 physiologically related conditions as performed for other bivalves. Before animal opening, withdrawal of  
534 hemolymph can be performed. Hemolymph can be collected via a 23-gauge needle from the posterior  
535 adductor muscle of mussels. Collected hemolymph can be stored for cytology or for molecular diagnostic  
536 assays. The mussels are opened through severance of the adductor muscle and then examined for color,  
537 condition (fat, medium, or watery), macroparasites, and shell and tissue abnormalities. The body is  
538 removed from the shell by severing the adductor muscle as close to the left valve as possible.

539 All the tissues (digestive tissues, gonad, kidney, gills, muscles) should be fixed in fresh fixative solution  
540 (buffered Formalin or Davidson's) in the right amount of volume ratio (1:10). Poor fixation can make  
541 tissues useless for histological assessment. Formalin and Davidson's are good general fixatives for  
542 bivalves because they have good penetration, prepare the tissue for histological stains, and give superior  
543 staining results with hematoxylin and eosin stains and other staining techniques. Some tissues require  
544 special care and handling, like the bivalve's digestive gland that degrades very rapidly and need to be  
545 immediately fixed after sampling as it is highly sensitive to weak fixation displaying artifacts.

546 Development of DNA-based diagnostic methods currently offer a broad panel of probes and tests but for  
547 the pathogens related to *P. nobilis* MMEs the effort is still scarce. These methods have the theoretical  
548 advantages of high sensitivity and high specificity and possible rapid screening for the presence of a  
549 targeted pathogen. These methods should be coupled with highly sensitive qPCR for multiple targets,  
550 ideally multiplexed using TaqMan or similar fluorochrome probes. Molecular tools are valuable for  
551 establishing the presence of a pathogen, but they do require care for their interpretation. This is crucial  
552 because many laboratories rely heavily on polymerase chain reaction (PCR) methods, which provide  
553 information as to the presence or absence of a pathogen, although in some assays the primers are not

554 designed or tested adequately to diagnose a pathogen correctly. Primers sets for a PCR assay that are  
555 overly-specific may not detect novel emerging strains, thus making all aspects of the pathological  
556 examination equally relevant.

557 A routine diagnostic approach should at least include a classification of the extent and severity and nature  
558 of the disease (i.e. pathological process, or lesions), based on a standardized quantitative evaluation of  
559 tissue lesions at the time of the diagnosis.

560 The lesion severity should be classified using a standardized histological score, based on semi-  
561 quantitative estimates of amount of tissue involved (in %), and on the type of lesions seen (inflammation,  
562 degeneration, necrosis, etc.) with consistent lesion nomenclature / definitions in relation to the pathogen  
563 detection.<sup>82</sup> Such an approach was developed before for salmonid whirling disease,<sup>4</sup> by assigning an  
564 arbitrary numerical scale to identifiable discrete stages of disease development. Although, such disease  
565 grading needs to be optimised for each etiological agent and related lesion, thus it will require careful  
566 preparation and validation when multiple concomitant aetiologies are suspected.

567 At light microscopy, the lesions can be graded, and the extent of involvement recorded and related to  
568 *Mycobacterium* and *H. pinnae*. The importance of consistent grading has been reviewed, and many  
569 grading schemes have been reported for bivalve pathology and in one case in *P. nobilis*.

570 The sections need to be analysed blinded to molecular diagnostic results to minimise bias. In the case for  
571 *Mycobacterium* and *H. pinnae*, the scorings are similar for both the pathogens and must consider the  
572 phase of development, only for *H. pinnae*, and the site of infection. Special stains can help in visualizing  
573 them (**Table 1**). As reported by <sup>82</sup> for *H. pinnae* we can give a score 1, for a mild infection, when we  
574 observe the presence of few plasmodia in mantle or digestive tissue; mild to moderate infection (score  
575 2): the parasite is present in the digestive gland and within digestive tubules in the pre-sporulation phase

576 within digestive epithelium (until 30% of the digestive tubules in a histological section are involved); score  
577 3, marked infection, when the parasite is present within digestive tubule epithelium (more than 30% of  
578 the digestive tubules filled).

579 For *Mycobacterium*, Ziehl-Neelsen slides are prepared, using similar criteria; mild infection (score 1): few  
580 immune cells filled with Ziehl-Neelsen + bacteria in the mantle and digestive tissue capsules; mild to  
581 moderate infection (score 2): aggregates of immune cells filled with Ziehl-Neelsen (+) bacteria spreading  
582 in the connective tissue of the mantle as well as in the digestive gland, infiltrating tubules and  
583 hemolymph vessels; marked infection (score 3): big aggregates of Ziehl-Neelsen (+) bacteria spreading in  
584 all the tissues within nodules of hemocytes (digestive gland, mantle and gonad).

585 This approach, accompanied by a detailed description of the lesions per case, can give us a better and  
586 more complete overview of the pathogenesis leading to the mortality.

587

588 In parallel, standardized molecular diagnosis should also consider the "quantity" of any identified  
589 pathogen(s), to better estimate their relative importance when a polymicrobial infection is suspected.

590 Taken together, it has become evident that one of main reasons for our limited progress in understanding  
591 the epidemiology and pathobiology of MMEs affecting the noble pen shell is the lack of standardized  
592 diagnostic protocols that could be sensitively applied when multiple pathogens are occurring.

593 In **Table 1** is presented a list of all the necessary analyses for the evaluation of *P. nobilis* health status and  
594 possible causes related to the mortality.

595 In the table is given an overview of the diagnostic approaches with all the analyses needed to be  
596 performed in dead/or sacrificed animals, or in tissue biopsies from live animals: histopathology, cytology,

597 and DNA based methods for both *H. pinnae* and *M. sherrisi*, using both qualitative and quantitative PCR  
598 correlated with sequencing.

599 In field studies, when animals are to be kept alive, the alternative diagnostic procedure until now has  
600 been to perform mainly mantle biopsy, but previous studies showed that the mantle is not suitable for  
601 *Mycobacteria* detection, so only *H. pinnae* can be revealed using this method. The alternative, currently  
602 in course of validation, is to collect and use hemolymph with a non-lethal method.

603

604 Recent research perspectives are mainly focused on the optimization of the already described techniques  
605 to gain sensitivity and specificity with faster and easier application, and that allow a positive diagnosis in  
606 even early stages of infection. Molecular tools can detect DNA sequences of the pathogen, which does  
607 not imply that the pathogen is visible in the host cell, although with use of *in situ* hybridization techniques  
608 its reliability can be determined.

609 In **Table 2** we present the analysis performed and the pathogens detected in different cases in many  
610 Mediterranean countries.

611

612

### 613 **Future directions**

614 Reported investigations of MMEs and other research efforts addressing the spread of *P. nobilis* disease  
615 have been using rather diverse methodological approaches, primarily due to lack of standardized  
616 diagnostic tools, unknown/complex disease aetiology, largely missing information on basic biology of  
617 healthy animals, and lack of communication between scientific groups. Furthermore, diagnostic  
618 techniques with inherent limitations were used, including clinical signs based on the closure of the valves,

619 mantle biopsies, and reliance mostly on molecular information. Such an approach interferes with  
620 comprehensive analysis and interpretation of the rapidly accumulating data about mass mortalities.  
621 Further problems in understanding disease arise due to limited availability of knowledge about *P. nobilis*  
622 physiology, anatomy, histology, nutrition, and microbiology. Taken together, our efforts to understand  
623 this disease are currently undermined by limitations in both quality and quantity of empirical knowledge.  
624 Apparently, we are facing a crisis of complexity, in which many factors and relations intertwine.  
625 Mortalities do not appear to be related to a single pathogen, and it is also possible that a primary agent  
626 common to all mortalities remains elusive and is yet to be described. It is therefore necessary to clarify  
627 the role of each suspected pathogen and their association to inflammatory lesions of each of the affected  
628 organs in observed mortalities, their relationships with environmental variables, routes of entry and  
629 dispersion (vectors), and multiple other epidemiological characteristics of this disease. As a way forward  
630 to further research, the following points should be considered:

631

632 *Solve the diagnostic issue*

633

634 We have incomplete knowledge of the problem, due in part to variable approaches to analyse the  
635 collected samples and the differences among focus areas of the studies that were carried out to date. It  
636 is therefore necessary to standardize the pathogen detection protocols, supported with the further  
637 development of reliable detection methodology. A manual of such an approach should be created in the  
638 context of *P. nobilis* MMEs involving all the experts of the sector. Moreover, we advise that collection of  
639 hemolymph from the adductor sinus can be safe for sampled *P. nobilis* and should be explored as a  
640 relatively non-invasive, and potentially useful, approach to the evaluation of mussel health.

641 Researchers studying MMEs of *P. nobilis* should be trained within a Ring test. “Ring” tests are  
642 competence tests coordinated among multiple collaborating laboratories including enough replicates  
643 needed for statistical analysis of assay reproducibility (between laboratories) and repeatability (within a  
644 laboratory) and facilitates process improvement.

645 Finally, the analysis of eDNA raises interesting perspectives to better detect, characterise and monitor  
646 known pathogens. These techniques will not replace, but rather complement diagnostic tools currently  
647 used including general methods such as histopathology, which helps to ensure detection of emerging  
648 diseases.

649 Once such protocol is generally accepted by the scientific community, the next step will be to use it in a  
650 re-analysis of available samples from previous works, including quantitative molecular search for  
651 multiple suspected pathogens.

652 Establishing targeted surveillance programs with the participation of multiple stakeholders (i.e.  
653 governments, non-governmental agencies, academic partners, veterinary contributors, and the general  
654 public) is of high importance, especially due to the pan-Mediterranean distribution of the MMEs and the  
655 official IUCN status as a critically endangered species. Developing highly specific and sensitive non-lethal  
656 diagnostic methods, combined with standardized investigation protocols will be crucial in supporting  
657 national veterinary diagnostic laboratories, or other diagnostic facilities in fulfilling the requirements of  
658 the EU habitats directive and Barcelona Convention (Anex II). Furthermore, surveillance programs may  
659 assist in the discovery and characterization of resistant individuals or populations, allowing further  
660 studies on resistance mechanisms and the establishment of a hatchery for production of *P. nobilis* for  
661 reintroduction/repopulation of previously affected regions. Improved communication and increased

662 awareness of the problem should be a priority to all involved research groups and stakeholders. Timely  
663 sharing of research data and surveillance information between stakeholders will accelerate our  
664 understanding of the disease epidemiology and will certainly help in conservation efforts. For example,  
665 opening a shared data repository with online access to interested parties, or setting up a forum/list of  
666 research groups, government and non-government agencies or other entities to facilitate rapid exchange  
667 of information related to emerging/ongoing outbreaks. It is also foreseeable that several public/private  
668 partnerships can be founded at various levels (from local coastal communities to multi-national  
669 consortia) with a task, among others, to encourage and support communication, dissemination of  
670 information and conservation actions based on solid scientific evidence.

671

672 *Database of full genome sequences and genomic approach to pathogenesis*

673

674 The simplification of genomic methods for acquisition of whole genomes, transcriptomes and  
675 metagenomes offers an opportunity to identify virulence factors, develop better molecular detection  
676 methods, gain knowledge of the molecular mechanisms at work of both the pathogen and the host  
677 immune response, and understand pathogens and hosts phylogeny. In this sense, it is recommendable  
678 to build a unique and dedicated database that includes genomes from *Mycobacterium*, *Vibrio* strains and  
679 *Haplosporidium* isolates collected from various mortality episodes and geographical locations. Future  
680 effort should also be put into development of isolation and culture of the pathogens most often involved  
681 in the MMEs to define their virulence and pathogenicity for the pen shell. The lack of bivalve molluscan  
682 cell lines has greatly limited the possibility of the study of experimental transmission of pathogens and



683 to better define the host-pathogen interaction. Moreover, classic serological methods are not suitable  
684 for diagnostic purposes since mollusks do not produce antibodies.

685

686 *Definition of optimal environmental variables for P. nobilis to better understand the disease pathogenesis*  
687 *and to find areas for animal refugia*

688

689 Ambient conditions can be a source of increasing stress on host populations involved in MMEs, and cause  
690 changes in pathogen virulence and infectivity, but the exact role or mechanisms of the non-infectious  
691 factors is currently unclear. To understand the epidemiological connections between various locations  
692 and differences in the appearance of the disease, it is necessary to collect further information about  
693 environmental conditions preceding and during *MMEs*. Enlightening the association between the abiotic  
694 factors of the local environment and the occurrence of *MMEs* is critical to identify potential refugia that  
695 could be used for relocation and introduction of (previously confirmed) healthy specimens. Furthermore,  
696 additional studies are needed to investigate the effects of environmental pollution and of the  
697 contaminant concentrations present in these animals. Considering a typical habitat of fan mussels (eg,  
698 coastal embayments both natural and man-made: bays, gulfs, etc.), increased urban activities and  
699 industrial discharge may incrementally increase pollutant concentrations in areas with slow water  
700 exchange, causing higher stress and lowering resistance to any and all pathogens.

701 Predisposing host factors allowing engagement of opportunistic pathogens need further investigations.

702 Current information about major potential pathogens suspected in *MMEs* supports the idea of their  
703 being opportunistic in nature, rather than exclusively pathogens. Therefore, a remarkable lack of

704 mortalities in other bivalve species that share habitat with *P. nobilis* suggests there may be an important  
705 intrinsic component of the host acting as a species-specific predisposing factor, making *P. nobilis*  
706 vulnerable to opportunistic infections. While there is only limited information about normal physiology  
707 and ecology of *P. nobilis*, a possible differential factor could be the high incidence of micro-lacerations in  
708 *P. nobilis* mantle or gills caused by commensal crustaceans like *Nepinnotheres pinnotheres* and *Pontonia*  
709 *pinnophylax*, commonly found living inside almost all *P. nobilis* specimens, but not in other bivalve species  
710 sharing the habitat. The extreme size of *P. nobilis* sets it apart from other bivalves and enables the cavity  
711 between the valves to provide shelter for these supposedly commensal crustaceans. Such micro-  
712 lacerations may act as entry points for opportunistic pathogens, specifically predisposing *P. nobilis* to  
713 development of diseases <sup>42</sup>.

714

715

## 716 **Conclusions**

717 This work offers an objective review of the current status of knowledge about possible causes of recent  
718 *MMEs* of the noble pen shells in the Mediterranean basin. We agree that the disease etiology is complex,  
719 involving multiple pathogens causing co-infections, and strongly related to environmental conditions that  
720 are specifically predisposing *P. nobilis* to poor disease outcomes. We strongly advocate that a  
721 standardized *MMEs* investigation protocol should be jointly developed and adopted by all involved in  
722 studies of epidemiology and pathology of these *MMEs*. Furthermore, we ask all stakeholders that full  
723 consideration should be given to an open data-sharing approach, including access to archived samples,  
724 gathering molecular genetic information, and other physical or electronic data from both past and  
725 ongoing investigations. This will require a timely response on the part of all Mediterranean coastal

726 nations and will require focused funding to achieve. Only by working together will we be able to keep  
727 ahead of the devastating consequences of this poly-microbial pathogenic and multifactorial syndrome  
728 affecting the noble pen shell in the Mediterranean Sea and possibly having a chance to stop their  
729 disappearing from their native habitats.

## 730           **References**

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