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REVIEW ARTICLE

Bacterial coldwater disease of fishes caused by Flavobacterium psychrophilum

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Abstract Coldwater disease (CWD) is a bacterial disease that affects a broad host-species range of fishes that inhabit cold, fresh waters. This disease occurs predominately at water temperatures of 16 °C and below, and is most prevalent and severe at 10 °C and below. Coldwater disease occurs in cultured and free-ranging populations, with hatchery-reared young trout and salmon species especially vulnerable to infections. Flavobacterium psychrophilum is the etiological agent of CWD. This Gram-negative bacterium may be recovered from affected host tissues and characterized using standard biochemical techniques, providing that reduced nutrient media are used. There are numerous reports that describe sensitive and specific serologic and genomic diagnostic techniques for CWD. The entire genome of a virulent isolate of F. psychrophilum has been sequenced and described. Rainbow trout (Oncorhynchus mykiss) fry syndrome is also caused by F. psychrophilum with mortalities > 50% possible among affected fish lots. Evidence suggests that pathogen transmission occurs both horizontally and vertically. Analogous to many diseases to other animals, prevention and control are essential to avoid losses to CWD, particularly since there is currently no commercially available vaccine and a limited number of antimicrobials have been approved for treating food fish worldwide. This review provides current host and geographic ranges of the pathogen, and covers epizootiology, transmission, pathogenicity, diagnostics, and prevention and treatment.

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Flavobacterial diseases of freshwater fishes

There are three *Flavobacterium* spp. that are primary pathogens to freshwater hatchery-reared and wild fish populations: *Flavobacterium columnare*, the cause of columnaris disease, *Flavobacterium branchiophilum*, the cause of bacterial gill disease, and *Flavobacterium psychrophilum* the cause of bacterial coldwater disease. Combined, the diseases and mortality caused by these pathogens constitutes one of the broadest host- and geographic ranges of any of the bacterial pathogens to fishes. Fish pathogenic *Flavobacterium* spp. are presumed

ubiquitous in temperate freshwater aquatic environments and occur in water temperatures ranging from just above freezing (*F. psychrophilum*) to 30 °C and above (*F. columnare*). Most, if not all cultured freshwater fish species may be affected by at least one of these pathogens. Other members of the Family Flavobacteriacea have been associated with diseases of fishes. For example, *Chryseobacterium piscicola* is an emerging pathogen of Flavobacteriaceae having been reported from Atlantic salmon (*Salmo salar*) and rainbow trout (*Oncorhynchus mykiss*) [1,2].

Columnaris disease, affects many cool- and warmwater fish species, typically in warm waters at 20-25 °C and above; however, it is not unusual to diagnose columnaris disease in fish, including trout species, in water as cool as 12-14 °C. Many cultured and free-ranging fish species are considered at risk for infection and possible disease. Columnaris disease affects aquaculture species, particularly the catfish species, as well as many aquarium species. F. columnare can be cultured from external sites on fish, including lesions, skin/mucus, and gills, and internal tissues, primarily the kidneys of fish with systemic infections. Primary cultures can be made on Anacker and Ordal [3] Cytophaga agar or the selective medium of Hawke and Thune [4]. The resulting colonies on primary plates are very characteristic: pale yellow, rhizoid and adhere tightly (i.e., sticky) to the medium surface. Colonies may be subcultured and confirmed using a few relatively simple diagnostic tests [5].

Bacterial gill disease, caused by F. branchiophilum [6-8], is primarily a disease to young hatchery-reared salmonids; it is not recognized as a problem in wild fish populations [9-13]. In endemic areas, bacterial gill disease outbreaks in aquaculture occur regularly and often in conjunction with increased host stressors. Although bacterial gill disease has been experimentally induced in healthy fish of various ages [14], many workers have noted that this disease typically occurs in association with certain predisposing factors such as overcrowding, reduced dissolved oxygen, increased ammonia, and particulate matter in the water [9,10,13]. Consequently, alleviating these host stressors has often been shown to reduce severity of active outbreaks and prevent further outbreaks. Mortality can rise quickly and be high if the culture conditions are not improved or a treatment is not promptly administered. Bacterial gill disease is common in spring, which coincides with production cycles at fish hatcheries when they have their greatest numbers of small fish after spawning and prior to stocking. A diagnosis of bacterial gill disease can often be accurately made by experienced workers simply by knowing the previous bacterial gill disease history of the hatchery and observing characteristic signs displayed by affected fish. Infected fish are typically lethargic, will be high in the water column and gasping for air at the surface and align near and into the incoming water, all of which are obvious signs of respiration difficulty. A Gram-stained gill smear will show numerous Gram-negative, long-thin rods. Combined, these criteria generally constitute a confirmed diagnosis. Bacterial primary isolation of F. branchiophilum is typically not attempted because this bacterium is particularly difficult to culture.

Bacterial coldwater disease

The etiological agent of bacterial coldwater disease (CWD) is *F. psychrophilum*, formerly known as *Cytophaga psychrophila*

and Flexibacter psychrophilus [15]. This bacterial pathogen has been recovered from a broad geographic range and from a number of free-ranging and cultured salmonid fish species and a variety of non-salmonid fish hosts (Table 1). Coldwater disease results in significant disease and mortality to coldwater fish species, particularly to certain trout and salmon populations. Disease typically occurs at water temperatures below 16 °C, and is most prevalent and serious at 10 °C and below [16]. Although all ages of fish are affected, small fish (fry and fingerling size) are particularly vulnerable to infections [16,17]. Coldwater disease presents as different manifestations with the 'classic' or most prevalent form of disease producing characteristic open lesions on the external body surfaces of fish. These lesions may be initially observed as areas of rough-appearing skin or fin tip fraying. As the infection continues, necrosis develops at the sites of bacterial colonization. often noted as dorsal and adipose fin pathology. Lesion development has a predilection for the caudal peduncle and caudal fin regions. Along with the external pathology, systemic bacterial infections and extensive internal pathology will also be present among many specimens. As the disease form is more acute, the external lesions will be less prevalent and systemic infections and internal pathology will predominate.

F. psychrophilum was initially described and recovered in 1948 from a die-off in coho salmon Oncorhynchus kisutch from the Pacific Northwest United States [18]. This disease affected the adipose-caudal fin region and in some specimens with latestage infections and prior to death, the vertebral column could be fully exposed. While usually fatal to fish with late-stage disease signs, the prevalence and mortality in affected fish populations were low. Davis [19] observed slender, Gram-negative rods 3–5 μm long and noted that overcrowding seemed to be a host predisposing factor in 'peduncle disease' outbreaks in rainbow trout in 1941 and 1945 at a hatchery in the Eastern United States (West Virginia). To control peduncle disease, Davis [19] suggested culling out those fish with obvious clinical signs in an effort to minimize the continuous shedding of pathogenic cells into the water column that served to infect other fish. It was also suggested to properly sterilize contaminated rearing troughs or ponds and all equipment, such as boots and nets, which were used to handle infected fish or water.

The pathologies and clinical disease signs associated with CWD are varied and extensive [20-24]. Listlessness, loss of appetite, and eroded fin tips are initial signs of CWD. Bacterial colonization may appear as faint, white areas on the fins, with some fish showing separation of the fin rays. Other disease signs may include exophthalmia, abdominal distension with increased volumes of ascites, and pale gills. In advanced cases of coldwater disease, necrosis of the caudal region may be severe and progress until caudle vertebra are exposed (Fig. 1). Lesions can also be noted on the lateral sides, snout-jaw region, and musculature often between the dorsal fin and back of the head. Histological examinations show extensive pathology in host tissues, including: focal necrosis in spleen, liver, and kidneys; increased vacuolar degeneration; increased eosinophilia and haemosiderin in the kidney; necrosis, pyknosis and lymphocyte infiltration in the dermis and underlying lateral musculature of skin lesions.

Rainbow trout fry syndrome [25–30] and a relatively more chronic form [31,32] are other disease manifestations caused by *F. psychrophilum*. Rainbow trout fry syndrome, as the name implies, affects the early life-stage fish, or the sac fry to

Geographic origin	Hosts	References
Australia	Rainbow trout Oncorhynchus mykiss, Atlantic salmon Salmo salar	[59,69]
Canada	Rainbow trout, brook trout Salvelinus fontinalis, Atlantic salmon,	[71,84,113–115]
	Arctic char Salvelinus alpinus, coho salmon O. kisutch, sea lamprey	
	Petromyzon marinus L.	
Chile	Rainbow trout, Atlantic salmon	[94,106,116,117]
Denmark	Rainbow trout	[27,38,40]
Estonia	Grayling Thymallus thymallus	[118]
Finland	Rainbow trout, brown trout <i>S. trutta</i> morpha <i>lacustris</i> , sea trout <i>S.</i>	[28,38,73,86,118,119]
	trutta morpha trutta, brook trout, Arctic char, whitefish Coregonus	
	muksun, perch Perca fluviatilis L., roach Rutilus rutilus	
France	Rainbow trout, common carp Cyprinus carpio, eel Anguilla anguilla	[25,28,45,57]
Germany	Rainbow trout, eel A. anguilla, common carp, crucian carp	[120,121]
	Carassius carassius, tench Tinca tinca	[40 77 05 122 122]
Japan	Rainbow trout, coho salmon, chum salmon <i>O. keta</i> , amago salmon	[48,77,85,122,123]
	O. rhodurus, common carp, yamame salmon O. masou, iwana	
	salmon <i>S. leucomaenis pluvius</i> , eel <i>A. japonica</i> , Japanese dace (ugui) <i>Tribolodon hakonensis</i> , ayu <i>Plecoglossus altivelis</i> , pale chub (oikawa	
	minnow) Zacco platypus, Japanese crucian carp (ginbuna) C.	
	auratus langsdorfii, and two species of goby Chaenogobius urotaenia	
	and Rhinogobius brunneus	
Korea	Ayu	[124]
Northern Ireland	Rainbow trout	[28]
Norway	Brown trout S. trutta morpha lacustris	[28]
Peru	Rainbow trout	[71]
Scotland	Rainbow trout	[125]
Spain	Rainbow trout, eel A. anguilla	[30,126]
Sweden	Rainbow trout, sea trout, Baltic (Atlantic) salmon S. salar	[52,118]
Switzerland	Rainbow trout	[28]
Turkey	Rainbow trout	[127]
United Kingdom	Rainbow trout, Atlantic salmon	[26,29,59,116]
United States	Rainbow trout, brook trout, brown trout S. trutta morpha	[16,18,19,32,51,58,71,109,128,129]
	lacustris, lake trout S. namaycush, steelhead trout O. mykiss	
	(migrating), Atlantic salmon, coho salmon, Chinook salmon O.	
	tshawytscha, white sturgeon Acipenser transmontanus, chum	
	salmon, goldfish Carassius auratus, cutthroat trout O. clarkii	

early-feeding developmental stage. This disease form is acute and may result in high percentages of deaths among fish lots, perhaps 50% or greater total mortality. A bacteremia develops in conjunction with extensive internal pathology, including anemic and pale kidneys and livers. Lethargy, exophthalmia (often bilateral), dark skin pigmentation and pale gills are additional characteristic disease signs of rainbow trout fry syndrome. Lorenzen et al. [28] showed that F. psychrophilum isolates recovered from fish with rainbow trout fry syndrome were phenotypically homogeneous with isolates recovered from larger fish with classical CWD. Daskalov et al. [33] noted that the effects of high oxidized lipids in fish showed similarities in signs of rainbow trout fry syndrome. Some of the same histologic characteristics of rainbow trout fry syndrome were also noted in nutritional diseases caused by feeding diets high oxidized lipids [33]. Rainbow trout fed a diet with high levels of oxidized lipids had a greater mortality, relative to controls, by F. psychrophilum after exposure to the pathogen by scarifying and immersion or IP challenges.

With the chronic form of CWD, affected fish may show spiral or erratic swimming behavior, blackened caudal (tail) regions and/or spinal column deformities [31,32]. The reported disease signs and behavior appeared similar to those associated with whirling disease in fish caused by *Myxobolus cerebralis*

[31]. However, with subsequent diagnostic evaluation, a whirling disease etiology can be eliminated and a correct diagnosis of CWD can be made based upon a case history along with primary culture and characterization of F. psychrophilum from affected tissues, including brain, spleen, kidney, liver, and lesion-skin. Kent et al. [32] showed the ataxic, spiral swimming behavior was associated with F. psychrophilum infections and chronic inflammation of the cranium and vertebrae in coho salmon. Fish showing this behavior did not recover and died. Based on epizootiological analyses, Kent et al. [32] concluded that F. psychrophilum was the cause of this disease presentation because it was only observed in populations that had recovered from acute CWD. Histologic evaluations showed periostitis, osteitis, meningitis, and periosteal proliferation of vertebrae at the junction of the vertebral column and cranium. This chronic CWD manifestation has occurred in fish that have recovered from a previous outbreak of acute clinical CWD [32] or it was diagnosed in fish lots with no recent history of CWD [31]. The bacterium may be cultured from the brain, kidney, liver, spleen and heart, but not necessarily from all tissues from each specimen or from all apparently infected specimens [31,32].

Concurrent infections in fish of *F. psychrophilum* with other fish pathogens are not uncommon. Dalsgaard and Madsen [34]





Fig. 1 Typical coldwater disease caudal lesions in rainbow trout *Oncorhynchus mykiss* (Panel A) and coho salmon *O. kisutch* (Panel B) caused by *Flavobacterium psychrophilum*. Photographs courtesy of Vermont Fish and Wildlife Department, Waterbury, VT and Wisconsin Department of Natural Resources, Madison, WI.

reported a concurrent infection in rainbow trout with the Gram-negative bacterium *Yersinia ruckeri*, the causative agent of enteric redmouth disease. There are other co-infections of *F. psychrophilum* with viruses, namely, infectious pancreatic necrosis virus, infectious hematopoietic necrosis virus, and erythrocytic inclusion body syndrome [35–37]. *F. psychrophilum* does not cause diseases in other animals or humans. The impact of fish losses at hatcheries reduces the numbers of fish available for raising or for stocking for sport fishing purposes and can impact restoration or population augmentation successes of certain endangered fish species.

Epizootiology and transmission

Since *F. psychrophilum* is horizontally transmitted, the water column is the medium in which viable cells move. The reservoir(s) of *F. psychrophilum* include pathogen-carrier fish, bacteria-shedding diseased and dead fish, and water supplies. *F. psychrophilum* has a demonstrated ability to survive for long periods outside fish hosts and to occur in non-fish hosts. Madetoja et al. [38] showed that rainbow trout that died from an infection with *F. psychrophilum* shed very high numbers of bacteria. Cell shedding rates depended on water temperatures, and cells were shed for at least 80 days. Madsen et al. [39] isolated *F. psychrophilum* from water samples that were collected near farmed rainbow trout or eggs. The results from

laboratory waterborne challenges, the equivalent to natural horizontal transmission, with F. psychrophilum are equivocal [16,40] and an abrasion artificially created on the body surface, such as with a pre-challenge bath exposure to 0.005% formalin, facilitates disease [40]. Aoki et al. [41] noted success in F. psychrophilum laboratory challenges in 1.3 or 5.6 g rainbow trout depended on the growth stage of the bacterial challenge culture used to expose the fish. It was important to use log-phase cultures for experimental bath infections to produce typical clinical disease signs and mortality. Aoki et al. [41] showed that 18 and 24 h F. psychrophilum cultures with challenge doses of 2.00×10^7 and 8.50×10^7 cfu/mL, respectively, resulted in significantly greater mortalities than was obtained with a 48 h culture, even though the 48 h culture had a greater number of cells $(3.40 \times 10^8 \text{ cfu/mL})$.

Injection challenge methods are often used to expose experimental groups of fish to F. psychrophilum [36,42–44]. Decostere et al. [42] noted that only 10-week old rainbow trout developed clinical signs and mortality following IP injections with 1.00×10^6 cfu, while fish 5 or 15 months old did not. Also, spleen phagocytes from the 10-week old fish contained viable F. psychrophilum cells, and these cell numbers increased with exposure time. This contrasted with the two groups of older fish in which no F. psychrophilum cells were detected in spleen phagocytes.

F. psychrophilum has a demonstrated ability to adapt to a variety of environments, and not only survive, but also maintain pathogenicity. This bacterium has been recovered from broad host and geographic ranges, it resists lysozyme up to 2 mg/mL, and a small percentage of cells survived 100 ppm povidone-iodine for 30 min, a compound frequently used as an egg surface disinfectant. F. psychrophilum can survive in stream water for months and adopts a different morphology apparently to withstand the conditions of starvation [45]. Madetoja et al. [46] showed that F. psychrophilum cells in freshwater at 15 °C remained culturable through 300 days. Attachment to n-hexadecane and unfertilized eggs was significantly greater by F. psychrophilum cells maintained in either stream water or cytophaga broth for 1 month, in contrast to cells from 3-day-old cultures in cytophaga broth [45]. Adaptability of F. psychrophilum was further demonstrated by Brown et al. [17] when they recovered the bacterium from the brain of a newt Pleurodelinae, a non-fish host. Additionally, using PCR F. psychrophilum was detected from benthic diatoms [47] and from algae [48]. These studies suggest that perhaps any number of non-fish hosts could serve as a reservoir for F. psychrophilum. Although the contribution of aquatic non-fish hosts to the biology of CWD is not known, the capability of F. psychrophilum to survive in aquatic environments is illustrated.

Evidence suggests that *F. psychrophilum* is also vertically transmitted. For example, this bacterium has been recovered from ovarian fluids, intraovum, egg surfaces, milt, mucus samples and kidneys from sexually mature chum, coho and Chinook salmon, rainbow and steelhead trout, and Atlantic salmon [16,17,39,49–51]. Brown et al. [17] recovered *F. psychrophilum* from the insides of fertilized and eyed eggs. Ekman et al. [52] isolated *F. psychrophilum* from both male and female reproductive products from Baltic salmon (*S. salar*) returning from the Baltic Sea to spawn. Similar to other fish pathogens, *F. psychrophilum* can also contaminate the surface of pathogen-free fish eggs, which is a form of horizontal transmission

[17.53–55]. Kumagai et al. [54] exposed F. psychrophilum to groups of eggs before and after water hardening, as well as to eyed eggs. All of the groups were then disinfected with 50 mg/L povidone-iodine for 15 min. F. psychrophilum was subsequently recovered from only those eggs that were exposed to the pathogen prior to water hardening. Cipriano [49] recovered between 5.00×10^2 and 2.50×10^8 cfu F. psychrophilum per gram from Atlantic salmon eggs that were treated with 50–100 mg/L povidone-iodine at fertilization, post-water hardened and eyed egg stages. Further evidence that F. psychrophilum is internalized within eggs was reported by Kumagai et al. [53] who demonstrated that disinfection with 50 mg/L povidone-iodine for 15 min was not effective in eliminating the bacterium from either eyed- or fertilized eggs that had been pathogen-exposed prior to the water hardening process. Kumagai et al. [54] showed the importance of water hardening the eggs in pathogen-free water to prevent (egg) surface contamination.

Diagnosis and isolate characterization

A successful diagnosis of CWD considers all relevant information. Important factors include facility disease history, the rearing conditions for the fish, water temperature, host(s) involved and their ages, presence of characteristic clinical disease signs, the observation of characteristic bacterial cells in Gramstained tissue preparations, and confirmation of *F. psychrophilum* as the causative agent from moribund or freshly dead specimens through primary culture and biochemical identifications, serological, or genotypic assays.

Microscopic examination of *F. psychrophilum* cells in infected tissues reveals long, thin, rod-shaped cells typically in a size range of 0.75–1.0 μ m wide by 3–5 μ m long (Fig. 2). Some cells may be attached end-to-end and consequently will appear longer.

F. psychrophilum can be recovered from a number of external and internal sites including skin/mucus, gills, brain, ascites,

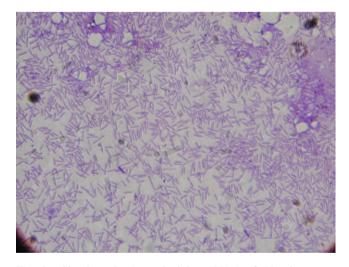


Fig. 2 Simple stain (crystal violet; 1000×) of *Flavobacterium psychrophilum* cells. External lesion material smear from a rainbow trout *Oncorhynchus mykiss* affected with coldwater disease. Photomicrograph courtesy of Vermont Fish and Wildlife Department, Waterbury, VT.

lesions, mucus, kidney and spleen and reproductive products of spawning adults. However, not all apparently affected fish could have sufficient number of viable cells in internal tissues for successful primary culture. Recovery of the pathogen from lesions is often more challenging than from internal sample sites due to the presence of environmental bacteria or oomycetes that will readily grow on primary isolation bacteriological media. Taking cultures from a greater number of fish or samples will enhance the chance to recover the bacterium. With some diagnostic cases, it may be possible to observe characteristic F. psychrophilum cells from infected tissues on histologic slides, yet be unsuccessful in culturing the bacterium from those same tissues, or vice versa, particularly from asymptomatic fish having reduced infection levels. The pathology to fish caused by F. psychrophilum can be extensive, for example, focal necrosis in various organs, and periostitis, osteitis, meningitis, ganglioneuritis and pyknotic nuclei are possible [26,32]. Particularly with chronic coldwater disease, masses of F. psychrophilum may be seen in the cranial area and anterior vertebra as well as inflammation and cartilage necrosis along the vertebral column.

Homogenization of sample tissues prior to the inoculations may enhance recovery, especially from fish with low-level infections. Primary culture plates can be inoculated using one of several techniques, such as direct streak-plating or preparing a dilution series and drop-inoculating specific volumes on the medium surface to yield viable cell numbers (i.e., cfu/g). Several bacteriological media may be used for primary culture of F. psychrophilum. Cytophaga medium [3] is frequently employed in diagnostic laboratories; the recipe consists of 0.05% tryptone, 0.05% yeast extract, 0.02% sodium acetate, 0.02% beef extract, and pH 7.0-7.2. Agar may be added if desired. Cytophaga medium was developed to support the growth of bacteria that require a reduced nutrient load requirement. Holt et al. [21] described tryptone yeast extract salts (TYES) consisting of 0.4% tryptone, 0.04% yeast extract, 0.05% magnesium sulfate, 0.05% calcium chloride. and pH 7.2 as an excellent liquid medium, that diagnosticians routinely supplement with agar for use as a primary isolation medium for F. psychrophilum. Other reduced nutrient concentration media have also been used [16,56–59]. Some authors report improved growth of F. psychrophilum after supplementing the medium with serum, a component typically used for slow growing or fastidious bacteria that will grow on rich nutrient media. Lorenzen [60] and Brown et al. [17], for example, incorporated 5.0% and 0.5%, respectively, of new born calf serum. Obach and Baudin Laurencin [61] supplemented Cytophaga medium with 10% fetal calf serum for recovery of F. psychrophilum from rainbow trout. Daskalov et al. [62] utilized Cytophaga medium as a basal medium to which they added galactose, glucose, rhamnose and skimmed milk. Rangdale et al. [59] modified cytophaga medium by increasing the tryptone concentration ten-fold (to 0.5%) and the beef extract from 0.02% to 0.05%. Increased tryptone (to 0.5%) in Cytophaga medium has since been used by various researchers who reported excellent growth of laboratory cultures. Lorenzen [60] showed the importance of the brand of beef extract to culture F. psychrophilum, with optimal results using the semi-solid form. Kumagai et al. [63] suggested the incorporation of 5 µg/mL tobramycin to primary culture media to aid recovery of F. psychrophilum by retarding the growth of environmental bacterial contaminants.

The optimum incubation temperature for primary isolation and culture growth of F. psychrophilum is 15–16 °C. Colonies on Cytophaga agar are pale-yellow and about 2-3 mm in diameter after 2-3 days of incubation. Colonies form a characteristic fried egg appearance with a slightly raised center and mild spreading, irregular margin (Fig. 3). Colonies do not adhere to the medium surface in the similar manner that F. columnare colonies do. Suspect F. psychrophilum colonies can readily be subcultured onto fresh media, e.g., Cytophaga agar, for characterization and identification using standard biochemical and physiological methods [9,15,28,57-58,64-69]. Unless growth/no growth on select media is to be evaluated, the basal medium for biochemical testing must be reduced nutrient to support bacterial growth, even for negative test reactions. For example, the basal medium of Pacha [70], which consists of 0.2% peptone, 0.2% sodium chloride, 0.03\% potassium phosphate, 0.00015\% bromothymol blue, and 0.3% agar, pH 7.0-7.2, is an excellent choice as a basal medium to evaluate acid production from assimilation of sugars.

Isolates typically do not grow, or grow poorly on highnutrient concentration media routinely used in fish disease diagnostic laboratories, including brain heart infusion agar, tryptic soy agar, triple sugar iron agar and blood agar. Most F. psychrophilum isolates are reported to produce oxidase and catalase, hydrolyze gelatin and casein, produce flexirubin-like pigments (chromogenic shift from yellow to orange in 10% KOH), degrade tyrosine, and lyse killed Escherichia coli cells. Most isolates are negative for assimilation of a suite of sugars (production of acid indicated by a pH drop in a basal medium with a pH indicator), indole production, starch hydrolysis, and degradation of tributyrin and xanthine. Variable results are reported for elastin hydrolysis, nitrate reduction, and chondroitin sulfate AC lyase. Some of the variability reported in line-data for certain biochemical tests might be attributed to differences in isolate origins or the methods

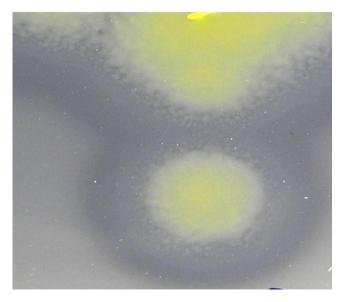


Fig. 3 Flavobacterium psychrophilum colonies on Cytophaga agar [3] supplemented with 0.2% gelatin. The bacterial colonies were gelatinase positive, as indicated by clear zones adjacent to and surrounding the colonies.

employed to determine the results. An example of this is the unique phenotype of some *F. psychrophilum* isolates from Australia, which produce brown pigment when grown on a medium containing tyrosine [69]. Lorenzen et al. [28] showed that the concentration of certain medium supplements, or biochemical test substrates, may affect the test results. If the concentration of a substrate in a medium is too low, this could result in a false-negative interpretation. Furthermore, they emphasized the need to use fresh growth cultures as the inoculum for biochemical characterization tests, and the use of sensitive test procedures for certain characters, such as the use of lead acetate to detect weak production of hydrogen sulfide.

Other sensitive diagnostic techniques in addition to bacterial culture have been employed to detect *F. psychrophilum* in water, in fish, and fish sex products, or to diagnose or confirm standard culture diagnostics for coldwater disease. A number of clinicians have used antisera raised against *F. psychrophilum* in the immunofluorescence antibody technique [41,48,71–74] and for immunohistochemistry [35,38,75]. Enzyme-linked immunosorbent assays have been developed using antibodies *F. psychrophilum* cell surface components for detection of the pathogen in fish [71,76]. Misaka et al. [77] used nitrocellulose bacterial colony blotting off culture media plates and immunostaining to quantify viable *F. psychrophilum* from kidneys and ovarian fluids of chum salmon *Oncorhynchus keta*.

Fish disease diagnosticians are increasingly employing and relying on nucleic acid genotype based assays to detect fish pathogens, including F. psychrophilum, or to confirm the identifications made using other methods, such as standard phenotypic characterizations. A number of procedures using polymerase chain reaction assays (PCR), and particularly the more specific nested PCR assays, have been described [47,51,72–74,78–89]. Amita et al. [48] detected F. psychrophilum in a water sample and in algae using PCR. Izumi et al. [47] used a nested PCR to detect F. psychrophilum from benthic diatoms samples from surfaces of stones. Suzuki et al. [90] compared the sensitivities of various PCR primers for F. psychrophilum and found that the primer targeting the 16S rDNA was the more sensitive; however, this primer resulted in a level of false-positive reactions. Because of this, they concluded that PCR primers targeting the DNA gyrase subunit gene gyrB and the peptidyl-prolyl cis-trans isomerase C gene ppiC were the preferred primers for F. psychrophilum. A multiplex PCR was developed by del Cerro et al. [82] to detect three fish pathogens simultaneously, which included F. psychrophilum.

Pathogenicity and immunity

The genome of a virulent F. psychrophilum isolate has been delineated [91]. The circular chromosome consists of 2,861,988 base pairs, which is relatively small compared to other environmental bacteria within the family; the average genome size for the genus *Flavobacterium*, estimated by DNA reassociation assays, is $4.1 \pm 1 \,\text{Mb}$ [92]. The G + C content of F. psychrophilum is 32.54% [64].

Potential gene products related to virulence for *F. psychro-philum* were described [91]. Proteases are considered to be essential virulence components, and potential secreted proteases were identified in the genome [93]. Genes coding

for cytolysins and haemolysin-like proteins are considered important virulence determinants, while fibronectin-type adhesins may have an essential role in the bacterium's attachment capability. Other enzymes act to negate host defense mechanisms. Avendaño-Herrera et al. [94] employed pulsed-field gel electrophoresis of *Sac* I restriction patterns of Chilean *F. psychrophilum* field isolates and demonstrated two distinct genetic groups that correlated with host of origin, rainbow trout and Atlantic salmon.

Innate immunity to F. psychrophilum in rainbow trout has been correlated with spleen size [95]. Hadidi et al. [95] screened 71 full-sibling crosses and found that the resistant or susceptible phenotypes were stable. The spleen-somatic indices of 103 fish created high, medium, and low spleen-index groups. Specimens having the larger spleen indices were significantly more resistant to F. psychrophilum. Acute serum amyloid A (A-SAA) is normally thought to be a major acute-phase reactant and effector of innate immunity in vertebrates. When challenged with whole cell F. psychrophilum, lipopolysaccharides (LPS), or CpG oligonucleotides, A-SAA was strongly induced in many immune-relevant rainbow trout tissues [96]. Unlike mammalian A-SAA, trout A-SAA does not increase in the plasma of diseased fish. Therefore, the role of this molecule in protection against F. psychrophilum is perhaps more important in localized defense mechanisms.

Numerous studies have been done that demonstrate protective immune responses in an effort to develop a vaccine for CWD. Passive immune protection to F. psychrophilum with serum from convalescent, and previously immunized rainbow trout was demonstrated (in rainbow trout) by LaFrentz et al. [97]. Protection to specific molecular mass F. psychrophilum cell fractions was shown by LaFrentz et al. [36], also to the P18 surface antigen [98], and to formalin- and heat-inactivated F. psychrophilum cells [99]. Additionally, protection against F. psychrophilum was shown by vaccination with an outer membrane fraction [100] and a 70-100 kD cell fraction [36] composed of O-polysaccharide components of LPS. Aoki et al. [101] showed that membrane vesicles were released in F. psychrophilum stationary phase growth cultures. Stationary phase F. psychrophilum cells or membrane vesicles alone provided no protection to rainbow trout; however, host survival to challenge was 94-100% when these two components were combined in experimental vaccines. Analysis of virulent and avirulent strains of F. psychrophilum by comparative immunoproteomic methods demonstrated eight proteins that were unique to the virulent strain [102]. Two highly immunogenic heat shock proteins (HSP 60, HSP 70) shared extensive homology with the heat shock proteins of other, related bacteria. LaFrentz et al. [103] developed an attenuated strain of F. psychrophilum through repeated passage on increasing concentrations of rifampicin. Intraperitoneal injection with the attenuated strain conferred significant protection in rainbow trout to challenge with the virulent parent strain. The protected fish showed elevated specific antibody titers. More importantly, LaFrentz et al. [103] showed that immersion exposure to the attenuated strain also elicited a protective immune response in fish. Álvarez et al. [104] also demonstrated protection in rainbow trout fry using an attenuated strain of F. psychrophilum; this strain was attenuated using transposon insertion mutagenesis. LaFrentz et al. [105] suggested that the glycocalyx of F. psychrophilum may be an antigen for the development of a vaccine for protection against CWD and rainbow trout fry syndrome. Johnson et al. [44] showed that the major histocompatibility gene region MH-IB was linked to survivability to CWD in rainbow trout that were IP injection challenged to F. psychrophilum.

Prevention, control, and treatment

As with all fish diseases, including CWD, management strategies that minimize the risks of pathogen introductions or transmission, and reduce the severity of overt disease outbreaks are desired alternatives to chemical or antimicrobial treatment therapies. Prevention of diseases is the most prudent form of disease control and treatment; this especially pertains to cultured fish populations, and ultimately to wild fish populations restored or augmented with fishes reared at hatcheries. Proper fish husbandry will alleviate host stressors that are often involved or suspected in the disease processes, such as factors that compromise the integrity of the mucus covering the fin tips [106,107]. Disease preventative techniques include rearing small (i.e., most susceptible) fish in pathogen-free water, maintaining safe carrying capacities for the water supply and flow, the use and proper storage of quality fish food, cleanliness of the fish holding tanks, minimizing organic material and nitrite [108], and effective sanitization of equipment used in fish production [109]. High numbers of F. psychrophilum cells are shed into the water column by fish that died from CWD. It was shown to be very important to quickly remove dead fish from the population thereby reducing re-infection [38]. Periodic health and pathogen inspections on statistically significant numbers of specimens from each fish lot to detect a pathogen prior to the expression of clinical disease are an essential part of a disease prevention strategy. If a pathogen is detected early, the affected fish and therefore, the pathogen can be confined (i.e., quarantined) within a designated area of a facility and a containment and treatment strategy begun. Caution should always be exercised when moving fish between culture facilities, especially if fish are suspected to be diseased or if the source facility has a disease history.

Povidone-iodine is commonly used as a fish egg surface disinfectant to fertilized and eyed eggs [107]. Although this treatment is not 100% effective to inactivate F. psychrophilum in all situations, it reduces egg-associated pathogen transmission. Brown et al. [17] showed that 2% of F. psychrophilum cells survived an exposure to 100 ppm povidone-iodine for 30 min. Kumagai et al. [53] treated fertilized rainbow trout, coho and masu salmon eggs with 50 ppm povidone-iodine for 15 min and subsequently recovered F. psychrophilum from 60% to 80% of the treated eggs; additionally, they treated eyed coho salmon eggs with up to 1000 ppm povidone-iodine for 15 min or 200 ppm for up to 120 min and both resulting data sets for treated eggs were comparable to infected, but untreated controls. At the 1000 ppm concentration, for example, 8.0×10^4 cfu/g egg were recovered. Results clearly show that standard egg treatment protocols may not be relied upon to effectively disinfect salmonid eggs and control the spread of *F. psychrophilum* [17,53,110].

In the United States, antimicrobial agents or other drugs to be used in fish destined for human consumption must be approved by the U.S. Food and Drug Administration and used

in accordance with product label information. Certain factors should be considered when using a therapeutic agent, such as tissue clearance time, toxicity to fishes in different water chemistries, and the organic load in the water. If it is unclear whether a drug will result in adverse effects to fish in a certain water chemistry profile, it may be advisable to initially try the treatment in a pilot study on a small number of individuals to identify a potential problem, rather than simply treating large numbers of fish and discovering toxicity with no means to quickly stop the treatment.

For fish bacterial diseases treated with oral delivery of medicated food, early intervention is paramount to achieve a successful treatment for CWD. This is especially true since one of the earliest disease signs is the fish's loss of appetite, which will directly affect the efficacy of treatment. A successful antimicrobial treatment is dependent on an early and accurate diagnosis of F. psychrophilum as the causal agent of disease. However, prophylactic or indiscriminate antimicrobial therapy should be avoided because of the risk to develop antimicrobial-resistant bacterial strains [59,111,112]. Prior to the use of an antimicrobial agent, it is desirable to recover the causative bacterium of the disease, confirm the identification, and perform in vitro sensitivity testing to ensure that the particular bacterial isolate is susceptible to the drug to be used. If the isolate is resistant to the antimicrobial agent, then therapy will be ineffective and perpetuate the resistant isolate at the facility, and will result in a financial loss for the medicated food.

Two drugs are approved for treatment of CWD in captive-reared fish in the United States (www.fda.gov/cvm). Both antimicrobials are delivered to affected fish orally via medicated feed. Florfenicol (Aquaflor®) may be used for freshwater-reared salmonids and must be prescribed by a licensed veterinarian. Dosage is 10 mg florfenicol per kilogram of fish per day for 10 consecutive days. The withdrawal time is 15 days. Oxytetracycline dihydrate (Terramycin®) is similarly permitted for freshwater-reared salmonids, at 3.75 g per 45.4 kg of fish per day for 10 consecutive days, and with a 21-day withdrawal time. Either treatment should be used in conjunction with improved environmental parameters that may reduce stressors to fish. It is important to maintain clean holding tanks and to promptly remove dead fish to minimize *F. psychrophilum* cells in the water column.

Currently, there are no vaccines commercially available to protect fish against bacterial CWD. A problem unique to vaccination of fish is the need for the vaccine delivery method to be easily and effectively given to large numbers (e.g., thousands) of fish held in hatchery systems. This is particularly so for rainbow trout fry syndrome, in that fish will be just beyond sac fry stage when vaccinated. Ideally, the delivery method will be an immersion or waterborne exposure, which is not only efficient for the fish culturist, but will also be minimally stressful (e.g., handling) for the fish.

Recent research on vaccine development for F. psychrophilum has been related to specific proteins produced by the bacterium. Plant et al. [43] demonstrated high antibody responses in rainbow trout to heat shock proteins 60 and 70, singularly or in combination, which were administered (IP) with Freunds complete adjuvant. Eight weeks post-immunization, the fish were exposed to 5.0×10^6 or 1.25×10^7 cfu F. psychrophilum by subcutaneous injections. Mean mortality in the heat shock protein treatment groups was 74% or greater and significant protection compared to control groups was not afforded to

the fish. Plant et al. [43] concluded that these proteins did not seem to be useful for further vaccine development. LaFrentz et al. [130] identified and analyzed specific proteins of *F. psychrophilum* cultures grown *in vivo* and *in vitro* in an iron-limited medium. Through evaluations using 2-D polyacrylamide gel electrophoresis, numerous proteins from the cultures showed increased intensities, while others showed lesser intensities. The expressed (upregulated) proteins may be important in the course of CWD in fish (LaFrentz et al. [130] and perhaps warrant utilization in the development of a fish vaccine.

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