

## PREVENTION AND CONTROL

### ▲ VACCINATION

Age of the bird	Vaccine	Route
2 <sup>nd</sup> week	Live attenuated intermediate vaccine	Intraocular
10-14 weeks	Live attenuated intermediate vaccine	Intraocular
16-18 weeks	Inactivated vaccine	Subcutaneous/ intramuscular

- ▲ Disposal of all infected birds
- ▲ Proper carcass disposal
- ▲ Thorough cleaning and disinfection of premises
- ▲ Rodent and pest control in flocks
- ▲ Infectious bursal disease virus is persistent in the environment of a poultry house for 54 days after the removal of infected birds. Hence, restocking should be done after 2 months.

## SAMPLE TESTING AND FEE

Test	Fees
Agar gel Precipitation test (AGPT)	Rs.50/sample
Counterimmunoelectrophoresis test	Rs. 50/ sample
Virus isolation in embryonated eggs	Rs. 1000/ sample
Histopathology	Rs. 200/sample

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## INFECTIOUS BURSAL DISEASE (IBD) (Avian nephrosis; Gumboro disease)

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Infectious bursal disease (IBD) is an acute, immunosuppressive, highly contagious viral infection of young chickens which has special predilection for pre B-lymphocytes of the bursa of Fabricius leading to immunosuppression and vaccination failure.

### CAUSE

Avibirnavirus, a ds RNA virus belonging to the family Birnaviridae

### SUSCEPTIBILITY

Chicken, turkeys, ostrich, ducks and pheasants. Chicks of 3 to 7 weeks are the most susceptible. Sporadic outbreaks have been recorded in birds up to 26 weeks of age.

### TRANSMISSION

- ✦ Direct contact between affected and healthy birds
- ✦ Ingestion of contaminated feed and water
- ✦ Mechanical transmission through contaminated equipments and personnel

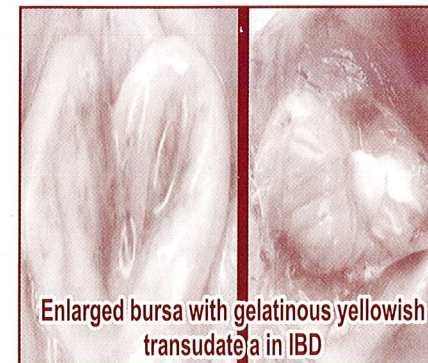
### CLINICAL SIGNS

- ✦ Vent pecking
- ✦ Soiled vent feathers
- ✦ Whitish or watery diarrhea
- ✦ Anorexia
- ✦ Depression
- ✦ Ruffled feathers
- ✦ Trembling
- ✦ Severe prostration
- ✦ Death

**MORBIDITY – 100%; MORTALITY -20-30%**

### POST MORTEM LESIONS

- ✦ Dehydration
- ✦ Hemorrhages in the pectoral and thigh muscles
- ✦ Hemorrhage at the junction between proventriculus and gizzard
- ✦ Spleen - Enlarged and mottled with gray foci
- ✦ Enlargement of bursa [2-4 times than normal size] .A gelatinous yellowish transudate cover the serosal surface and the normal white color turns to cream color.



### SAMPLES TO BE COLLECTED

- ✦ Blood in anticoagulant
- ✦ Serum
- ✦ Cloacal bursa and spleen in PBS on ice
- ✦ Bursa in 10% formalin