دراسة بكتريولوجية وباثولوجية لحالات عدوى نادرة بما يشبه بالسل الكاذب في الجمال

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تم تشخيص عشرة حالات للعدوى بالسل الكاذب في الجمال وكانت الاصابات موجـودة بالغدد الليمفاوية الواقعة أمام الفخذ وكان منظر الاصابات بالعين المجردة يشبه الـى حد كبير اصابات السل • أما الدراسة الميكروسكوبية فقد أثبتت أن الاصابات هي عبـارة عن عملية نكرزة في أنسجة الغدد الليمفاويه مع وجود خلايا التهابية مثل الخلايا الليمفاوية والأكولة ولكن لوحظ عدم وجود الخلايا العملاقة المتعددة الأنوية • وقد عزل ميكروب يشابـه ميكروب السل الكاذب من ستة حالات • أما العدوى التجريبية لخنازير غينيا لم تؤد الـى أي حالات مرضية •

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MICROBIOLOGICAL AND HISTOPATHOLOGICAL STUDIES FOR RARE CASES OF CORYNEBACTERIUM INFECTION IN CAMEL

(With 7 Figures)

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SUMMARY

Ten. cases of corynebacterium infection had been diagnosed in camel. Lesions were observed in the perifemoral lymph nodes. Grossly, the lesions were closely resembling these of tuberculosis. The spherical onion like concentrically laminated mass characteristic for caseous lumphadinitis in sheep were not observed in the affected lymph nodes of camel. Microscopically the lesions werecharacterized by necrosis of caseous, liquefactive or coagulative type, lymphoid and epitheliod cells reaction. Gaint cells were not observed. An organism resembling corynebacterium ovis was isolated from the lesions of six affected lymph nodes. Experimentally inoculated guinea-pigs showed no signs of illness.

INTRODUCTION

There are a number of diseases among animals associated with Corynebacterum pseudo-tuberclosis infection; cheifly among these are caseious lymphadinitis in sheep, ulcerative lymphangitis in horse and cattle and oedematous skin disease in buffaloes (SOLIMAN, 1963). This organisms was first isolated and discribed by PREISZ and GUINARD (1891) from renal abscesses in sheep. The infection has attained considerable attention of veterinary bacteriologist because of the economic importance of ovine casious lymphodinitis especially in raising countries like Australlia. The main purpose of this studies was the isolation of a diphtheroid resembling similar corynebacterium ovis organism from lymph node of camels as well as histopathological studies of infected lymph nodes of camel and organs of experimental animals.

MATERIAL and METHOD

The perifemoral lymph nodes from 10 camels had been sent from Banny Adi abattoir during the period of oct. 1984 to oct. 1985 to the Animal Health Research laboratory for examination for T.B. Direct smears from the lymph nodes were made and stained with Ziehl Neelsen and Grams. The smears were taken from necrotic areas in the lymph nodes particularly those at the edge of lesion. An emulsion of casiated material was inoculated S/C in two quinea-pigs and kept under observation for 4 weks.

Nutrient broth was inoculated from the lesions and incubated at 37°C for 48 hours. Cultures were made on 10% sheep blood agar plates from necrotic areas as well as from inoculated broth. 0.2 ml broth culture after 48 hours incubation at 37°C, was inoculated 5/C in two guinea-pigs for each sample.

The isolated colonies were subjected to morphological examination as well as to biochemical studies according to CRUICKSHANK et al. (1976). All the affected lymph nodes were carefully examined grossly. Samples from different parts of the affected lymph nodes of camels were taken for histopathological examination.

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The two guinea-pigs inoculated with emulsion of lymph nodes of camels were killed 4 weeks post-injection. The guinea-pigs were dissected and samples were taken from differnt organs including liver, spleen, intestine, lung, heart, regional lymph nodes and brain. The other two guinea-pigs inoculated with bacterial culture were sacrificed after 4 weeks and treated similarly. These samples and those from the affected lymph nodes of camels were processed for histopathological studies.

RESULTS

Bacteriological Studies:

Direct smear's performed from all of the lymph nodes of camel showed no acid-fast organism. The Gram stained smears of 6 out of the 10 lymph nodes of camels showed Grampositive pleomorphic beaded coco-bacilli arranged in chinese lettering. The other 4 smears of lymph nodes did not show such appearance and its culture was negative on blood agar.

Colonies of culture of 6 lymph node on blood agar were 1-2 mm in diameter, whitish in colour opaque and friable surrounded by a small zone of beta haemolysis in case of some strains. Colonies when touched by the platinum loop moved readely and were broken up into pieces. Smears from these colonies showed similar characters. Subcullure of these colonies on 10% serum broth showed fine to coarse granular deposit extending on the side of the tube with clear supenatent fluid. The six strains fermented, glucose, fructose galactose, maltose, dextrose with acid only while lactose, sucrose and dulcitol were not attacked. Litmus milk showed acid and clot after 48 hours then it was digested. Indol, methyl red and Vogesproskauer were negative, urea test was weakly positive. No utilization of koser's citrate.

All these results agreed with those of Corynebacterum ovis.

Pathological Studies:

Grossly the affected lymph nodes were extremly enlarged and hard in consistance. Cut section somtimes had a gritty sound. In cross section the entire node contained multiple focal areas of caseous necrosis. The caseous material was friable and yellowish gray in colour. Occasionally, the center of these lesions were calcified and contained lumps. Gross examination of other caseous lymph nodes revealed no detectable changes. Post mortem examination of gainea-pigs experimntally infected with the isolated diphtheroid revealed no changes.

Micromorphological studies showed that the lesion of the affected lymph nodes could be classified into two distinct types:

The first type of lesions consisted of focal areas of caseous necrosis. These areas were multiple and had different sizes (Fig. 1). Somtimes they communicate togather to form band of necrotic tissue which occupy a considerable area of the lymph node. These areas of necrosis always involved the lymph follicales of the cortical area, but sometimes they extended to involve the medulla. The caseous necrotic areas always showed calcifection, usually in the central zone. The necrotic areas were surrounded from outside by reactive zone (Fig. 2). The reaction around the necrotic area consists of proliferation of epitheliod and lymphoid cells but gaint cells were not seen. These cellular reactions were surrounded from outside by zone of intense hypermia. In a few instances the reacting cells were surrounded from outside by mild fibrous C.T. proliferation. Fibrous C.T. proliferation was somtimes seen extensively in the subcapsular zone of the lymph node. Calcification was sometimes seen in these areas of proliferating C.T. The blood vessels of the subcaular area were blocked by large organized thrombus which was sometimes reconalized (Fig. 3) or showing calcification.

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A mases of bacterial clumbs were sometimes seen within the blood vessels of the subcapsular and paracortical areas.

The second type of lesions begin with coagulative necrosis of some of the lymphoid cells, usually in the center of lymph follicales and sometimes at the periphary of them (Fig.4). These areas of coagulative necrosis as it increased in size were expanded to involve large areas of the lymph follicales and a process of liquefactive necrosis began in the center and extended to involve the areas of coagulative necrosis (Fig. 5). This process resulted in a large central areas of liquefactive necrosis which was surrounded from outside by a zone of lymphoid and epitheliod cells (2-3 rows of cells). This zone of Lymphoid cells usually sufferred from early coagulative necrotic changes (Fig. 6) The whole lesions were sharply demarcated from the surrounding tissues, but always present in the center of the lymphoid follicales and never seen in the medulla. These lesions were numerous in number and variable in sizes. Somtimes these lesions were surrounded by a mild fibroblastic proliferation (Fig. 7). No changes were observed in the organs of guinea-pigs inoculated either with the Camel's lymph nodes or with diphteroid culture. The diphteroid organism could not be recovered from the inoculted animals.

DISCUSSION AND CONCULOSION

Local literature on Corynebacterium ovis infection in camel is rather scanty as most of the work is restricted to bacteriological routine diagnosis of the disease in sheep. CARPANO (1932) reported the disease in camel. Also CARNE (1939) stated that, there were reports in the literature of the ocurance of natural infection by Corynebacterium ovis in ox, goat, camel, wild deer, pig and fowls. In this study 6 isoaltates of a morphologically and biochemically diphtheroid resembling Corynebacterium ovis had been isolted from prefermoral lymph nodes of 10 camels. On the other hand, these isolates differed from other diphtheroids which may be isolated from other domestic animal as Corynebacterium equi (Woolcock et al., 1980). Grossly, the lesions were closely resembling those of tuberculosis. The characteristic lamination (onion shape appearance) of the lymph node pathognomonic for this disease in sheep (JUBB and KENNEDY, 1985), was not observed in the lymph nodes of camel. Microscopically the lesions were of two types. The first type consisted of multiple focal areas of caseous necrosis. These necrotic areas were surrounded by lymphoid and epitheliod cell reaction and zone of prominen congestion, gaint cells were not seen. Calcification was commonly observed in the central zone of the necrotic areas, the second type of lesions consisted of multiple focal area of liquefactive necrosis which was surrounded from outside by a zone of lymphoid and epitheliod cells. Not infrequently the latter showed coagultive necrosis. Such lesions were observed only in the lung of sheep affected with caseous lymphadinitis (JONES and HUNT, 1983). Lesions of the blood vessels in the subcortical areas were prominent and consistes of thrombosis, orgnization of thrombus and its calcifection. While some of the blood vessels showed colmbs of bacteria. These facts point out to the possobility of hematogenous infection of the lymph nodes. Tuberculous infection of the dlymph glands of camel was not only excluded on the results of the pathological findings but also on those of bacteriological investigation. The latter included negative smears as well as negative animal inoculations. The isolated diphtheroid differed from the classical Corynebacterium ovis as regards being non-pathogenic to guinea pigs since it did not produce pyogenic or toxigenic action. This result is in partal agreement with the studies of SOLIMAN et al. (1963)

From this study, it can appears that camels are susceptible to lymph gland infection by an organism very similar to Corynebacterium ovis.

Lymph glands lesions in camels showing the above appearance should not exclusively considered to be tuberclous and simple bacteriological examination for our diphtheroid should be taken in consideration.

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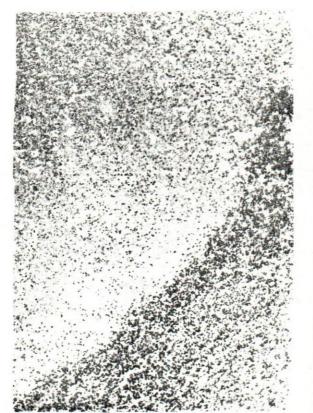


Fig. (1): Lymph node showing caseous necrosis.

H & E (16 X).

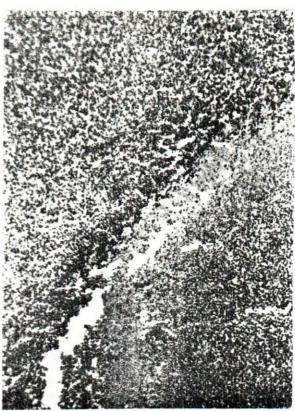


Fig. (2): A Zone of cellular reaction around the necrotic areas. H & E (16 X)



Fig. (3): Blood vessels in the subcortical area in the lymph showing thrombus with recanalization. H&E (16 X)

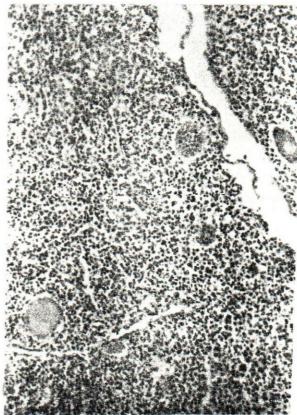


Fig. (4): Minute focal areas of coagulative necrosis in the lymph node. H&E (16 X)



Fig. (5): Area of liquefactive necrosis.

H & E (25 X).

Fig. (6): Area of liquefactive necrosis surrounded by zone of coagulative necrosis H & E (40 X).

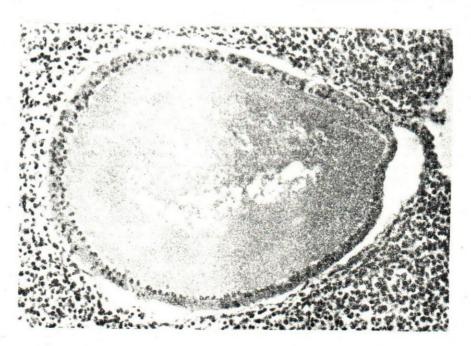


Fig. (7): The necrotic area sometimes was surrounded by fibrobalstic prolifration. H & E (16 $\,$ X $\,$)