Evaluation of a Modified Complement Fixation Test and an Indirect Hemagglutination Test for the Serodiagnosis of Melioidosis in Pigs

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A complement fixation test modified by the addition of porcine serum and an indirect hemagglutination test were used to detect antibodies to Pseudomonas pseudomallei in pigs. These tests together with cultural examinations were carried out with 250 pigs. The sensitivity and specificity values were 79.3 and 99.5% and 82.8 and 93.2% for the modified complement fixation and hemagglutination tests, respectively. When results from the combination of both tests were considered, the values were 86.2 and 92.8%, respectively.

Pseudomonas pseudomallei, a soil saprophyte and opportunistic pathogen of animals, including humans, causes a chronic form of melioidosis in pigs in Queensland, Australia (11, 17), where the disease is not often recognized until slaughter of the animal. Melioidosis then becomes an economic problem, because it results in total carcass condemnation (8). When infection occurs by ingestion or wound entry, nodules are found mainly in the spleen (11, 17). Infection by inhalation also involves the lung (8, 15).

Serodiagnosis is important when determining prevalence and distribution of infection. The serum agglutination, hemagglutination, and complement fixation (CF) tests for porcine melioidosis are unreliable (6, 13), and there is little correlation between test and culture results (9, 13, 14). A recent trial (A. D. Thomas and G. A. Spinks, Conf. Workshop Ser. QC8911, Queensland Dept. Primary Industries, 1983, p. 27–35) suggested that a CF test modified by the addition of porcine serum (CFPS) and an indirect hemagglutination (IHA) test were the tests of choice, and this study was undertaken as a more comprehensive evaluation of these tests.

For the purposes of this paper, pigs from which P. pseudomallei was isolated are described as “culture positive” and pigs from which P. pseudomallei was not isolated are described as “culture negative.”

Pigs. Serum samples were collected from 250 pigs (54 domestic and 196 feral) from areas throughout Queensland, Australia. All pigs were available for cultural examination.

Bacteriology. Methods for culture of clinical samples and identification of isolates have been described previously (18).

Serology. The CFPS test (Thomas and Spinks, Conf. Workshop Series, 1983) was a modification of the microtiter CF test for Mycoplasma hyopneumoniae (16). Briefly, guinea pig complement (GIBCO Laboratories, Grand Island, N.Y.) was reconstituted in Veronal buffer containing 1% normal unheated pig serum recently collected from 6- to 8-week-old pigs. The test had an overnight fixation step at 4°C. Doubling dilutions of sera commencing at 1:4 were used, and titers were graded 0 or 1 to 4, depending on the degree of hemolysis or buttoning at the bottom of the microtiter well. A (baseline) positive value was a serum dilution of ±1:8.

The IHA test of Alexander et al. (1) was used. Doubling dilutions of sera commencing at 1:10 were made, and titers were graded 0 or 1 to 4, depending on the amount of buttoning at the bottoms of the microtiter wells. A (baseline) positive value was a serum dilution of ±1:40.

Antigens. The antigens were prepared from a local porcine isolate of P. pseudomallei serotype 1. Antigens and sensitized erythrocytes were prepared by standard procedures (1). Preliminary trials had shown that antisera prepared in rabbits to antigens of Pseudomonas aeruginosa, Pseudomonas fluorescens, Plesiomonas shigelloides, Escherichia coli, and Acinetobacter calcoaceticus (all isolated from pigs) did not cross-react with the P. pseudomallei antigens used in this test (data not shown).

Test evaluations. Sensitivity and specificity values were calculated by the method of Fletcher et al. (5). The criterion for infected animals was culture-positive tissue. Observed percentage agreement and kappa statistics were determined by the method of Martin et al. (12). Kappa is a quotient used to measure the agreement between tests by adjusting for agreement due to chance. A value of +1 represents perfect agreement, and a value of = 0 represents perfect disagreement. Kappa values of 0 indicate no agreement beyond chance, values from 0.4 to 0.6 indicate moderate agreement, values from 0.6 to 0.8 indicate good agreement, and values above 0.8 indicate very strong agreement (2, 12).

Table 1 shows the relationship between culture results and serological status for the 250 pigs. Of the 221 culture-negative pigs, 16 had sterile lesions indicative of melioidosis in regression. Of these 16 pigs, 15 had CFPS-negative, IHA-positive titers, and 9 of these IHA titers were ≥1:160.

Sensitivity and specificity values for the two tests are

| Table 1. Serological results for and culture status of 250 field pigs by using the CFPS and IHA tests for P. pseudomallei |
|---|---|---|
| Result with: | Culture positive | Culture negative |
| CFPS | IHA | (n = 29) | (n = 221) |
| + | + | 22 | 0 |
| + | – | 1 | 1 |
| – | + | 2 | 15 |
| – | – | 4 | 205 |

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shown in Table 2. The values given are from examinations of each test alone as well as examinations of both in parallel (either test positive).

The percentage of agreement between the two tests is shown in Table 3, as is the kappa value of agreement.

Our results have shown that the CFPS and IHA tests are useful for the serodiagnosis of porcine melioidosis. The tests may be used in parallel, or alternatively, the more sensitive IHA test could be used as a screening method followed by the more specific CFPS technique as a confirmatory test. Laws (10) found little correlation between serological titers and culture results with a CF test on pig sera. The increased sensitivity of the CFPS test was due to the addition of normal unheated porcine serum to the guinea pig complement. This added the porcine C1q component of the complement system necessary for specific fixation to the antigen-antibody complex, since guinea pig C1q is non-effective in porcine CF reactions (3, 4, 16).

Johnson (7) and Laws (9, 10) (in studies with humans and sheep and goats, respectively) reported that CF antibodies did not persist for very long after melioidosis infection had been resolved and that persistence of a CF titer indicated persistence of infection. Six false-negative CFPS reactions were recorded in the present study. These reactions were noted for pigs with chronic melioidosis highlighted by a few well-encapsulated nodules in single organs. Lowered sensitivity values for the CF test for goats with latent chronic infections have been reported (19).

Observed agreement between the two tests was high (92.4%), and the kappa quotient (0.66) showed good agreement. Some disagreement is expected, since the two tests are measuring different antigen-antibody reactions. The IHA test was less specific than the CFPS test (Table 2). This was due to the 15 false-positive reactions in the IHA test as compared with 1 in the CFPS test. The 15 pigs with false-positive IHA reactions had sterile lesions indicative of melioidosis in regression, a common occurrence in pigs (11, 15, 18); therefore, these pigs could have recovered from infection with P. pseudomallei. However, by definition (5), specificity is calculated by using infected animals with culture-positive tissues. Other factors that could contribute to the lowered specificity of the IHA test are infections with cross-reacting organisms such as Salmonella sp. or other pseudomonads (1, 4, 17) and the presence of natural agglu-

tinins in endemic regions due to frequent exposure to P. pseudomallei (6, 13, 15).

The CF and IHA tests have been recommended for the serodiagnosis of human (1) and caprine (19) melioidosis. An enzyme-linked immunosorbent assay is being tested in our laboratory, but until a more sensitive and specific test or combination of tests is evaluated, the CFPS and IHA tests, run in parallel, are recommended for the serodiagnosis of porcine melioidosis.

We thank the Department of Primary Industry officers who collected the samples from abattoirs and during feral pig surveys.

TABLE 2. Sensitivities and specificities of the CFPS and IHA tests for porcine melioidosis

<table>
<thead>
<tr>
<th>Test</th>
<th>Sensitivity (%)</th>
<th>Specificity (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(n = 29)</td>
<td>(n = 221)</td>
</tr>
<tr>
<td>CFPS</td>
<td>79.3 (60-92)‡</td>
<td>99.5 (99-100)</td>
</tr>
<tr>
<td>IHA</td>
<td>82.8 (64-93)</td>
<td>93.2 (90-97)</td>
</tr>
<tr>
<td>CFPS and IHA in parallel</td>
<td>86.2 (73-99)</td>
<td>92.8 (89-96)</td>
</tr>
</tbody>
</table>

‡ n, Number of porcine serum samples used per test.

LITERATURE CITED


TABLE 3. Agreement between the CFPS and IHA tests for melioidosis by using 250 porcine serum samples

<table>
<thead>
<tr>
<th>IHA test result</th>
<th>No. of CFPS test results*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Positive</td>
</tr>
<tr>
<td>Positive</td>
<td>22</td>
</tr>
<tr>
<td>Negative</td>
<td>2</td>
</tr>
</tbody>
</table>

* Observed percentage of agreement, 92.4%; kappa value, 0.66.

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