Evaluation of Hepcidin Level and Clinico-Pathological Modifications in Canine Parvovirus Enteritis

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ABSTRACT

Canine parvovirus enteritis (CPV) is one of foremost reasons of vomiting and diarrhea in puppies with consequential alterations in homeostasis; anemia is one of these major changes. This investigation aimed to study alterations in Hepcidin and clinic-pathologic parameters in CPV infected puppies. This investigation carried out thirteen puppies with CPV enteritis and five clinically healthy puppies were enrolled as control with total number of 18 puppies. Upon admission, clinical signs were recorded and rapid in-clinic IC test kit for detection of CPV Ag in feces. Blood samples were used to determine hematologic and biochemical alterations along with hepcidin level. Vomiting and diarrhea were the main recorded clinical signs. Significant reduction in erythrogram and leucogram were recorded in CPV infected puppies. A reduction in Total Protein and albumin accompanied with elevation in triglycerides and Blood Urea Nitrogen were recorded. Significant elevation in serum hepcidin values in CPV enteritis when compared to control data was recorded. Depending on obtained results, CPV enteritis is associated with elevation in hepcidin level, anemia, reduction in leucocytes and elevation in triglycerides.

Key words: Canine Parvovirus enteritis, Hepcidin, Hematology, Serum Biochemistry, Dogs

INTRODUCTION

Gastroenteritis is a vastly common disorder among puppies; in considerable number of cases can be attributed to a highly contagious agent, namely canine parvovirus enteritis “CPV” (Judge, 2015).

CPV is a DNA non-enveloped virus belongs to Parvoviridea (Carr-Smith et al., 1997). The virus has great affinity to invade lymphoid and intestinal tissue, and it is transmitted via fecal-oral means (Prittie, 2004).

Fever, lethargy, vomiting, dehydration and diarrhea which alternated from mucoid to hemorrhagic are the most common recorded clinical signs associated with CPV (Lamm and Rezabek, 2008; Goddard and Leisewitz, 2010; Tabor, 2011). Suppression in leucocytes, neutrophil and lymphocytes are predicated in this condition (MaCartney et al., 1984, Goddard et al., 2008); while anemia is a frequent finding, however it was thought to be a result of oxidative stress status rather than the virus suppresses erythropoiesis (Panda et al., 2009).

Diagnosis of canine parvovirus enteritis cannot depend solely on clinical signs, as it might be confusing with other diseases (Goddard and Leisewitz, 2010). Nowadays, the recent development of rapid immune-migration test kit that doesn’t need sophisticated equipment and can give rapid in-clinic confirmation of affection within minutes (Shashidhara et al., 2009) was gaining wide acceptance as a method of diagnosis (Salem, 2014).

Lately, a peptide produces from liver under effect of different stimuli under the name of “Hepcidin” gains attention of many researchers (Sahinduran et al., 2016). Hepcidin, acute phase protein "APP" (Nemeth et al., 2003), was considered to have antimicrobial properties only (Park et al., 2001). However, hepcidin was found to play an integral regulatory role in iron metabolism (Nemeth and Ganz 2009). It was also thought that, hepcidin expression is in association with inflammatory conditions as well as decrease with iron deficiency anemia (Theurl et al., 2009). This study aimed to investigate alterations in clinic-pathological parameters in CPV enteritis as well as alteration in hepcidin level associated with CPV infection to puppies.

MATERIALS AND METHODS

Animals

A total number of 13 puppies of different breeds, with age range of 2 months-6 months old admitted to small animal clinic, Faculty of Veterinary Medicine, Cairo University, with signs compatible with canine parvovirus enteritis. Another apparently healthy five puppies within similar age range were enrolled as control group.

Clinical examination and sampling

All animals were clinically examined and clinical signs were recorded at time of admission. Fecal samples from affected animals were taken for microscopical examination to ensure animals were parasitologically free. In-clinic rapid CPV Ag rapid kits were used on stool of suspected dogs (Quicking Biotech Co, Ltd, Shanghai, China) (Figure 1).

Only the dogs give positive results upon IC-test were enrolled in this study. In the same way, blood samples from all animals were withdrawn and divided into 2 tubes; EDTA-containing tubes were used for clinical hematology. Blood in plain tube was used for serum separation.

Serum biochemistry examination

Sera of affected dogs were used to estimate TP, albumin, triglycerides, BUN and ALP using specified test kits (Spectrum-diagnostic, Egypt). Serum samples used to estimate Hepcidin were stored at -80°C until use.

Determination of hepcidin level

Serum hepcidin levels were determined by Sandwich quantitative ELISA technique using dedicated canine hepcidin (HEPC) ELISA kit (Catalogue # MBS010437; MyBiosource, USA).

Statistical analysis

Data of Parvovirus enteritis affected puppies were compared to data of control group using Student T-test. P value ≤0.05 considered of significant value.

RESULTS AND DISCUSSION

Inappetence, depression, pyrexia, vomiting, dehydration and bloody diarrhea were the most observed clinical signs in this study (Figure 1). These symptoms were reported in association with CPV infection (Goddard et al., 2008; Lamm and Rezabek, 2008; Salem, 2014). Though diarrhea might range from mucoid to hemorrhagic; it is mostly attributed to production of cytokines, endotoxemia and epithelia damage of intestinal vasculature (Isagai et al., 1989; Zafar et al., 1999). However, depending on signs only is not confirmatory of diagnosis (Goddard and Leisewitz, 2010).

Alterations in hemato-biochemical parameters are shown in Table 1. Significant reduction in erythrogram was recorded in affected puppies. The recorded anemia in CPV enteritis is doubtful to be the doing of clampdown of bone marrow production, however, the virus was found to cause modifications in erythroid cell-lines (Potgieter et al., 1981; Boosinger et al., 1982). Hemorrhage from intestinal damage may also implicated in PCV reduction (Wazir et al., 2011). In the recent years, the oxidative stress process associated with viral infection was believed to play a crucial role in anemia (Panda et al., 2009).

Leucogram showed leucopenia, neutropenia and lymphopenia. Parvovirus infection is known to cause devastation to swift dividing cells along with substantial exudation of neutrophils to the damaged intestine (Raskins et al., 2004). CPV has the capability to abolish “active precursor” of circulating WBCs with especially affinity to neutrophils (McCaw and Hoskins, 2006). Lymphocyte reduction was linked to extended hospital stay of ill-dogs (Kalli et al., 2010). Moreover, Mylonakis et al., 2016 attributed the resultant leukopenia, lymphopenia and neutropenia to huge request of inflamed mucosa of intestine along with exhaustion of lymphoid tissue. However, leukocytosis and neutrophilia were also recorded (Goddard et al., 2008).

Slight reduction in TP and albumin were recorded; damage of intestinal villi by the effect of virus might cause a condition of protein-losing enteropathys (Prittie, 2004). Generation of acute phase proteins as a reaction to inflammation and tissue impairment come on the expanse of albumin synthesis (Mazzaferro et al., 2002). ALP showed non-significant elevation compared to control data, and this finding recorded elsewhere (Salem, 2014). Triglycerides and BUN showed significant elevations, these alterations were attributed to modifications in lipid metabolism and acute phase response (Yilmaz and Senturk, 2007; Salem, 2014). Dehydration as a consequence to vomiting and diarrhea might be linked to BUN elevation (Barsanti et al., 2004).

Fig. 1: A) Boxer dog with bloody diarrhea; B) IC rapid test kit for detection of CPV Ag showing positive result.
Table 1: Hematologic and biochemical changes in canine parvovirus enteritis compared to control dogs (Mean ± SEM)

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Diseased dogs</th>
<th>Control dogs</th>
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<tbody>
<tr>
<td>RBCs</td>
<td>3.95±0.42*</td>
<td>6.00±0.15</td>
</tr>
<tr>
<td>PCV</td>
<td>34±1.56*</td>
<td>40.0±1.38</td>
</tr>
<tr>
<td>HB</td>
<td>11.54±0.57*</td>
<td>14.01±0.80</td>
</tr>
<tr>
<td>WBCs</td>
<td>6.81±4.75*</td>
<td>12.30±1.34</td>
</tr>
<tr>
<td>Neutrophils</td>
<td>2989±151.25*</td>
<td>8027±985*</td>
</tr>
<tr>
<td>Lymphocytes</td>
<td>1969.09±218*</td>
<td>3195±383*</td>
</tr>
<tr>
<td>TP</td>
<td>5.59±0.15*</td>
<td>6.54±0.35*</td>
</tr>
<tr>
<td>Albumin</td>
<td>2.73±0.140*</td>
<td>3.380±0.27</td>
</tr>
<tr>
<td>ALP</td>
<td>179.96±23.52*</td>
<td>111.62±12.7</td>
</tr>
<tr>
<td>BUN</td>
<td>21.84±1.95*</td>
<td>13.63±1.475</td>
</tr>
<tr>
<td>Triglycerides</td>
<td>61.75±6.02*</td>
<td>33.05±5.43</td>
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*P≤0.05.

Table 2: Hepcidin profile among diseased and control dogs

<table>
<thead>
<tr>
<th>Hepcidin (ng/ml)</th>
<th>Minimum</th>
<th>Maximum</th>
<th>Mean ±SEM</th>
</tr>
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<tbody>
<tr>
<td>Diseased</td>
<td>7.864</td>
<td>50.1</td>
<td>30.615±4.035*</td>
</tr>
<tr>
<td>Control</td>
<td>5.348</td>
<td>15.631</td>
<td>10.895±1.712</td>
</tr>
</tbody>
</table>

*P≤0.05.

Significant elevation in serum hepcidin values in CPV enteritis was observed when compared to control data (table 2). Hepcidin renews body iron metabolism (Grimes et al., 2012). Inflammation and/or infection motivate assembly of hepcidin in body (Nemeth et al., 2003). Iron-deficiency anemia is associated with decline in hepcidin levels while infection, inflammation and anemia of inflammation associated with rise in hepcidin level (Ganz, 2011; Grimes et al., 2012). Although hepcidin plays integral role in iron metabolism, it also connected with wide variety of non-hematologic and hematologic affections. CPV enteritis was thought to cause an increase in inflammatory response, namely cytokines (Coskun and Sen, 2012). Moreover, Sahindur et al., 2016 attributed elevation of hepcidin level in association with CPV enteritis to the marked elevation of IL-1, IL-6 and TNF in response to viral infection, endotoxemia, sepsis in correlation with secondary infections and mucosal damage. Furthermore, inflammatory reaction stimulates IL-6 release during sepsis and inflammatory conditions (Kali et al., 2015).

Conclusion

In canine parvovirus enteritis, Canine hepcidin level has a tendency to rise during the clinical illness along with anaemia, leukopenia and reduction in protein level.

REFERENCES


