

INFLAMMATORY CELL PHENOTYPING AND EPITHELIAL PROLIFERATION IN PORCINE *LAWSONIA INTRACELLULARIS* INFECTION

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Introduction

An infection with *Lawsonia intracellularis* (*L. intracellularis*) causes the so-called disease porcine proliferative enteropathy (PPE) leading to major economic losses worldwide. The main objectives of this retrospective study were to compare the current gold standard detection method of *L. intracellularis* (Warthin Starry stain) to *L. intracellularis* immunohistochemistry (IHC) and to immunophenotype the intestinal inflammatory infiltrate.

Material and Methods

- Forty-two cases of PPE were selected from the archive. HE-stained intestinal samples were evaluated for presence and distribution of several histological parameters.
- Immunohistochemically, *L. intracellularis* antigen expression allowed a categorisation of animals with small (group 1), moderate (group 2), or large amount of *L. intracellularis* antigen (group 3).
- Immunophenotyping of inflammatory cells including regulatory T cells (Tregs) and evaluation of proliferation (Ki67 expression) was performed in selected cases (Table 1).

Marker	Cell population	<i>L. intracellularis</i> cases
Ki67	Proliferating cells	Group 3 > groups 1 and 2
CD3	T lymphocytes	Major inflammatory cell population (all groups)
CD20	B lymphocytes	Few cells in mucosa (all groups)
Iba 1	Macrophages	Major inflammatory cell population (all groups)
FOXP3	Regulatory T cells	In mucosa (group 1) and GALT (groups 2 and 3)

Table 1: Cell markers used in immunohistology and their relevance in *L. intracellularis* cases. Group 1 = small amount of bacterial antigen; group 2 = moderate amount; group 3 = large amount.

Results

- Histologically, the hallmark lesion was hyperplasia of crypt enterocytes which was detected in almost every animal.
- Colocalisation of *L. intracellularis* antigen and the macrophage marker Iba1 was detected (Figure 1).
- The major inflammatory cell populations consisted of macrophages and T lymphocytes (Figure 2).
- Tregs were detected in every group in the mucosa (mainly group 1) and in ileal lymphoid tissue (mainly group 2 and 3; Figure 2).
- The number of Ki67-positive cells was higher in group 3 compared to group 1 and 2 (Figure 2).

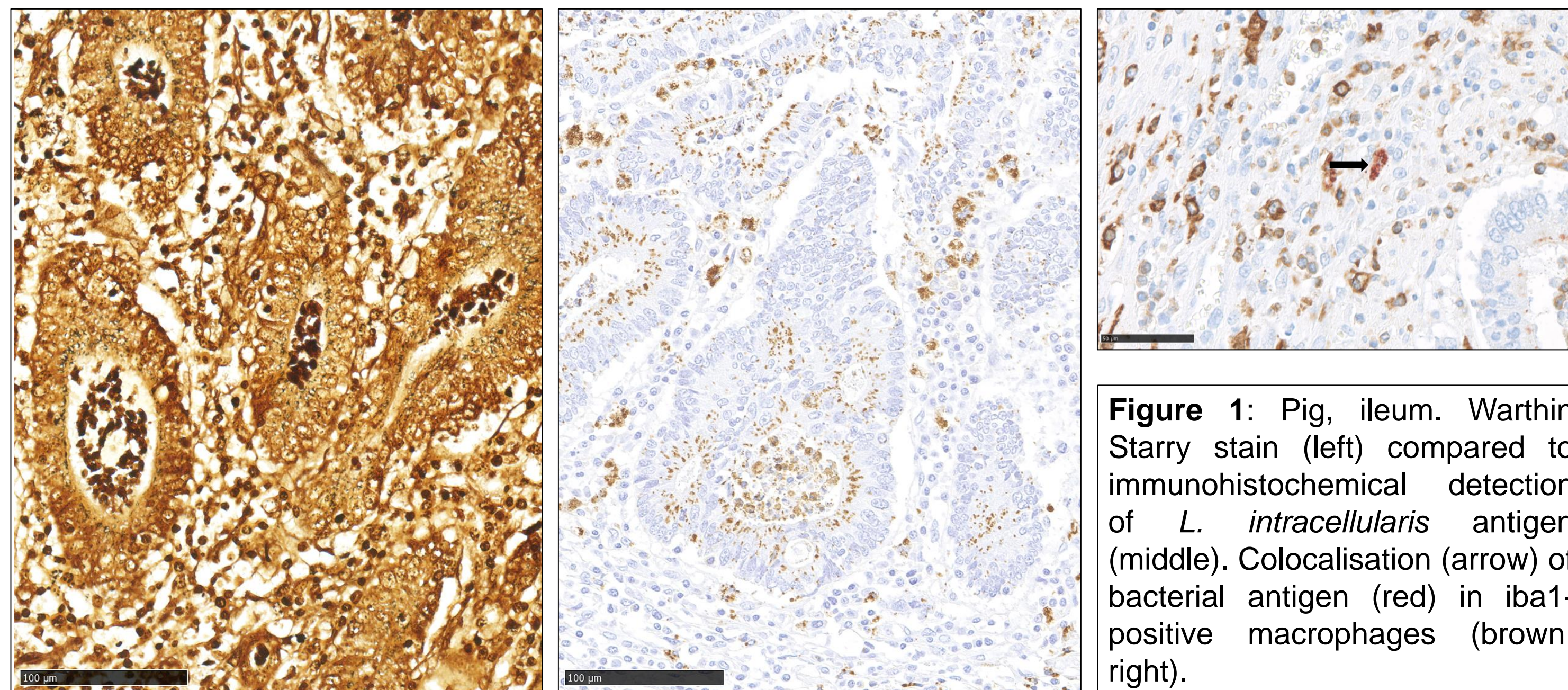


Figure 1: Pig, ileum. Warthin Starry stain (left) compared to immunohistochemical detection of *L. intracellularis* antigen (middle). Colocalisation (arrow) of bacterial antigen (red) in Iba1-positive macrophages (brown; right).

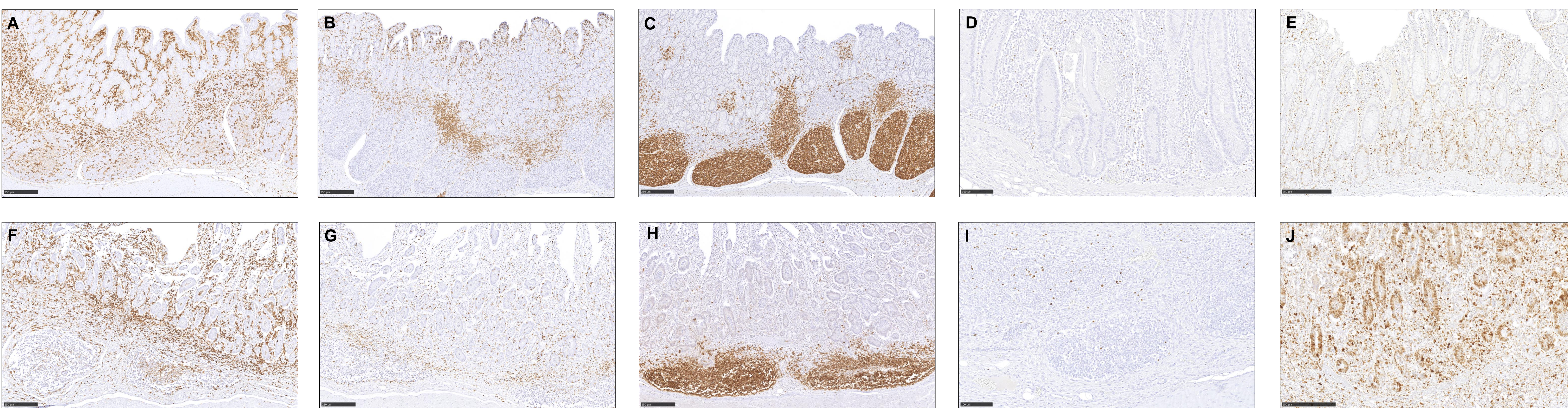


Figure 2: Pig, ileum. Inflammatory cell phenotyping and expression of proliferation marker Ki67 in *Lawsonia intracellularis* infected animals with low (group 1, A-E) and high (group 3, F-J) bacterial load. High number of Iba1-positive macrophages in mucosal and submucosal tissue of both groups (A, F). Moderate number of CD3-positive T lymphocytes in mucosal and submucosal tissue in both groups (B, G). CD20-positive B lymphocytes in Peyer's patches, only few mucosal lymphocytes in both groups (C, H). Single FOXP3-positive regulatory T cells in lamina propria (D) and submucosa (I). Low number of Ki67 expressing crypt epithelial cells and inflammatory cells in group 1 (E). High number of Ki67-positive cells (crypt epithelial and mucosal inflammatory cells in an animal of group 3 (J)). ABC method, chromogen = DAB, counterstained with hematoxylin.

Conclusions

The immunohistochemical method to detect *L. intracellularis* is equivalent to the Warthin Starry stain which serves as a gold standard. The bacterial load correlated with the severity of histological lesions and the proliferation of crypt epithelial cells. The detection of *L. intracellularis* in macrophages may contribute to a bacterial persistence in chronic infections. The immunomodulatory effects of Tregs and Treg dysregulation in early and late phases of the infection may affect the proliferation and spread of bacteria.

References

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