Infectious Laryngotracheitis (ILT)

t is upper respiratory tract affections of mature or emi mature chickens (8 week or more) Ch.ch by ----respiratory manifestation, conjunctivitis ----coughing of blood ----decrease egg production ----high morbidity & low mortality **Economical importance:** -decrease egg production 2-high cost of vaccination

Causative agent: Alpha herpes virus---DNA, enveloped virus, antigencally related -grow on CAM inducing pock's lesions with **Intranuclear inclusion bodies Transmission:** Via droplet infection either respiratory or conjunctival route **Source of infection:** 1-adult & recovered birds, carrier birds -latent infection

Clinical forms: 1-acute (severe epizootic) from Infection by high virulent virus for susceptible birds Sings **1-conjunctivitis with exudation** 2-coughing of blood with special gasping &inspiration sound "Pump head position" 3-feather, wall, drinkers having mucous tinged with blood 4-drop in egg production without change in quality 5-mortality rate reach 20% in complicated cases & 1-2% in uncomplicated cases 6-morbidity rate reach 100% with rapid spread **1-Svere conjunctivitis** heamorraghic tracheitis presence of blood in nasal passage & buccal cavity

2-Mild (enzootic) form

Sings:

Infection by moderate pathogenic virus or vaccinated bird with virulent virus or follow severe form

- **1-decrease in egg production**
- 2-conjunctivitis with respiratory manifestation
- Casiated material inside trachea due to sloughing of tracheal mucosa &lysis of cells may extend to nasal passage &sinus 3-Atypical form
- Infection by low pathogenic virus or infection of immunized Sings:
- 1-mild respiratory manifestation2-slight drop in egg production3-act as source of infection

1-history **2-clinical sings** 4-lab.diagnosis A-in acute epizootic form At 1st 3-5 days --- examine stained impression smear from trachea as found intranuclear inclusions bodies **B-in mild enzootic form** Inclusion bodies present but not detected as cell lysis So by tracheal swab cannot detected but can detected on CAM of ECE from pock's lesions then apply AGPT or FAT

Diagnosis:

Prevention & control:

- 1-hygienic measures
- 2-avoid mixing of vaccinated &non vaccinated birds
- 3-quarantine & examination of new purchased birds for ILT
- 4 vacction:

milder

- Depend upon local immunity not humeral 2 types of vaccine
- A-live attenuated egg adapted vaccine
- Anave more strong post vaccinal reaction
- -used in good healthy birds
- -intra ocular installation
- **B-live attenuated tissue culture adapted vaccine**
 - sed to vaccinated birds under stress via intraocular

5-treatment of infected birds good ventilation vitamin K therapy to decrease hemorrhages -antibiotics to decrease 2ndry infection mixture of vitamins as supportive treatment n surrounding farms use vaccination even was vaccinated before as booster dose emergency vaccination"