

INTERNATIONAL JOURNAL OF RESEARCH IN PHARMACEUTICAL SCIENCES

Published by Pharmascope Publications Journal Home Page: www.pharmascope.org/ijrps

Pilot scale studies on the optimization of DIVA assay for the inactivated whole cell paratuberculosis vaccine

Sujata Jayaraman¹, Kundan Kumar Chaubey², Shoor Vir Singh², Gajendra Kumar Aseri¹, Mukta Jain¹, Saurabh Gupta², Manju Singh¹, Parul Yadav¹, Neeraj Khare¹, Deepansh Sharma¹, Jagdip Singh Sohal*1

¹Amity Center for Mycobacterial Disease Research, Amity Institute of Microbial Technology, Amity University Rajasthan, Jaipur, India

²ICAR-Central Institute for Research on Goats, Makhdoom, Mathura, India

* Corresponding Author

Name: Jagdip Singh Sohal Phone: +91-9459405732 Email: jssohal@jpr.amity.edu

ISSN: 0975-7538

DOI: https://doi.org/10.26452/ijrps.v9i2.1522

Production and Hosted by

Pharmascope.org © 2018 Pharmascope Publications. All rights reserved.

INTRODUCTION

Johne's disease (JD) or Paratuberculosis is a prevalent and costly infectious disease of domestic is a ruminants around the world (Singh et al., 2016). It is chronic granulomatous enteritis and progressive weight loss with or without persistent diarrhea are the clinical signs. *Mycobacterium avium* subspecies *paratuberculosis* (MAP) is the etiological agent of this disease and is very resistant to environmental stress (like high temperature, drying etc.) and is able to persist for years in farm soil (Singh *et al.*, 2013). Paratuberulosis is endemic in India and disease has been widely reported from domestic livestock population of the country (Singh *et al.*,2014, Sohal *et al.*, 2015). For every clinical case of paratuberculosis, it is likely that 25 more animals are infected on that farm (Whitlock, 1992) and clinical animals are the 'tip of iceberg'. Majority of the animals shed bacilli in their feces without any signs of disease and therefore are continuous source of environmental contamination and infection source for other susceptible animals on that farm.

Paratuberculosis harshly affects the farm economy by reduced milk yield and quality, poor feed conversion, reduced fertility, increased susceptibility to other diseases, premature culling and reduced slaughter value, veterinary expenses etc. MAP is not killed by pasteurization and MAP zoonosis has also become threat as potential food-borne pathogen (Shankar *et al.,* 2010). There are compelling evidences in the involvement of MAP in human Crohn's disease (Singh *et al.*, 2016). Hence paratuberculosis has become notifiable disease and control of this disease has become priorities for the governments. United States Department of Agriculture (USDA) is implementing Johne's disease control program in USA, similarly, Canadian government has also launched Canadian Johne's Disease Initiative. Australia has also implemented National Johne's Disease Control Program. European Union and Japan have recognized MAP as food borne pathogen and initiated control programs (Kobayashi *et al.,* 2007; Momotani *et al.,* 2012; Nielsen *et al.*, 2009). Immediate objective of these programs is to prevent the spread of infection and eradication is the long term goal. 'Test and Cull' policy with management changes is the backbone of these control programs (Sohal *et al.*, 2015). Some nations like Germany, Denmark, Ireland, Czech Republic, Austria, Norway etc. also compensate their farmers for culling the paratuberculosis infected animals (Khol and Baumgartner, 2014; Kralik and Slana, 2014; Amely *et al.*, 2014, Østerås, 2014). To our knowledge no developing country has initiated paratuberculosis control program besides notable prevalence in countries like India, Mexico, Brazil, China etc. (Milián-Suazo et al., 2015; Singh *et al.*, 2014; Liu *et al.*, 2017; Vilar *et al.*, 2015). Major reason for developing countries for not adopting the control program is the costly nature of the test and cull policy and governments in developing countries cannot afford compensation for culled animals. Moreover, in India due to religious sentiments cattle slaughter in banded in majority of the provinces. Recently findings of test and cull policy has been reviewed and it has been analyzed that test and culling to date has not produced the expected results (Bastida and Juste, 2011) due to lack of procedures to diagnose disease in early stages (Jayaraman *et al.*, 2016). Therefore, in order to improve the efficacy of present control programs in developed countries and popularize the control of paratuberculosis in developing world alternate low cost control strategies are needed to be developed.

Experiences from past and recent findings suggest that vaccination against paratuberculosis is the most practical method to control paratuberculosis (Jayaraman *et al.*, 2016). Compared to test and cull based control methods, studies have established vaccination as the economic method to control paratuberculosis (Dhand *et al.,* 2013; Juste and Casal, 1993; van Schaik et al., 1996). Vaccination offers various advantages, like reduces morbidity & mortality due to paratuberculosis, reduces shedding of MAP in feces, improves clinical condition (reduces diarrhea & increases body weight), cures intestinal lesions and enhances flock immunity to JD (Singh *et al.,* 2007; Singh *et al.,* 2010b; Singh *et* al., 2013). Studies have confirmed that vaccination not only reduces the prevalence of JD but also brings economic benefits to farmers (Groenendaal

et al., 2015). The most significant advantage of paratuberculosis vaccination is therapeutic effects (Singh *et al.*, 2010b). This is very substantial to Indian context since infected cattle cannot be culled. so vaccination is the best solution to manage the infected cattle. Killed whole cell vaccines are preferred over other types due to their safety and higher stability.

Although vaccination for paratuberculosis has many advantages, but there are regulatory restrictions on mass and field use of paratuberculosis vaccine (Patton, 2011). Reason of regulatory restrictions is our inability to discriminate between infected and vaccinated animals within the herd, because paratuberculosis bacilli shares antigenic structures with *M. bovis* (responsible for bovine tuberculosis). Vaccination for paratuberculosis will therefore interfere with serology and DTH based diagnosis of both diseases. Hence DIVA tool is required for the field and free use of paratuberculosis vaccine. In the present study, we have optimized DIVA tool in plate ELISA format for whole cell killed paratuberculosis vaccine using secretory proteins. Since secretory proteins are not part of vaccine, so antibodies to these proteins should be absent in vaccinated individuals. The detailed strategy has been explained by Jayaraman *et al.*, (2016).

MATERIALS AND METHODS

Selection of the secretory proteins, cloning and **expression**

Four secretory proteins (MAP1693c, MAP2677c, MAP3547c and MAP4308c) were selected. These proteins have been reported to be immuno-dominant in previous studies (Roupie *et al.,* 2008; Mon *et al., 2012; Roupie et al., 2012).* Nucleotide sequences of these proteins were subjected to codon optimization using GeneOptimizer software. Optimized gene sequences were synthesized commercially from Thermo Fisher Scientific, USA and cloned in $pET151/D-TOPO$ expression vector.

Recombinant plasmid was transformed to *E. coli* BL-21 cells for expression as per Sohal *et al.*, 2008. Expression was done in 1000 ml LB broth containing ampicillin $(100\mu g/mL)$ using IPTG stimulation at final concentration of 0.3 mM, after stimulation cells were incubated for 24 hours at 37° C, cells were pelleted and suspended in 5 ml equilibration buffer (50 mM, TrisHCl, 200 mM NaCl, 5mM DTT, 1mM PMSF, pH 8.0). The suspension was subjected to sonication (20 cycles of 1 minute with 1 minute interval at 45% amplitude). Recombinant proteins were further purified by nickel-nitrilotriacetic acid (Ni-NTA) gel matrix. Purified protein was analyzed by SDS-PAGE (Gupta et al., 2015) and concentration was taken using Nanodrop. Immunogenicity of

S. No.	Animal ID	PPD ELISA S/P ratio	DIVA ELISA S/P ratio
$\mathbf 1$	36A	0.57	0.27
$\overline{2}$	15c	0.82	0.21
3	33 _b	0.47	0.27
$\overline{\mathbf{4}}$	17b.2	0.75	0.33
5	22A	0.66	0.39
6	$\mathbf{1}$	0.73	0.10
$\overline{7}$	13A	0.68	0.16
$\, 8$	129	0.43	0.24
9	$\overline{2}$	0.71	0.23
10	121	0.68	0.39
11	19	0.60	0.18
12	168(m)	0.42	0.31
13	128	0.53	0.14
14	tag63	0.41	0.17
15	tag226f	0.47	0.17
16	tag53	0.82	0.18
17	tag37	0.46	0.10
18	tag46	0.80	0.20
19	47	0.52	0.31
20	13a	0.49	0.28

Table 1: Analysis of the serum samples of vaccinated cattle using PPD ELISA and DIVA ELISA

Table 2: Analysis of the serum samples of naturally infected cattle using PPD ELISA and DIVA **ELISA**

S. No.	Animal ID	PPD ELISAS/P ratio	DIVA ELISAS/P ratio
$\mathbf{1}$	8a	0.52	0.72
$\sqrt{2}$	3	0.53	0.81
3	19a	0.48	0.86
$\overline{4}$	23a	0.72	1.10
5	9	1.18	1.72
6	12	0.58	0.93
7	32b	0.62	0.66
$\, 8$	17 _b	0.53	1.12
9	23 _b	0.78	0.81
10	35b	0.44	1.23
11	20 (red)	0.78	0.46
12	124	0.72	0.45
13	19	0.93	0.46
14	22M buff	0.91	0.43
15	12a	0.52	0.51
16	tag233f	0.50	0.71
17	tag07	0.60	1.04
18	18	0.84	0.42
19	11	0.78	0.54
20	bull3	0.90	1.00

the proteins was confirmed by standard immunoproteomic analysis (Gupta *et al.*, 2015) using positive control sera from cattle, goat, sheep and buffalo.

Optimization of DIVA ELISA

An indirect plate ELISA was optimized to differentiate vaccinated and naturally infected animals using cocktail of the above four recombinant proteins using traditional checker board titration technique as per Singh et al. (2011). ELISA OD values were converted into S/P ratio for presentation of results. Sera of vaccinated, infected and healthy animals used for optimization of the assay were provided by Central Institute for Research on Goats (CIRG), Mathura (Table 1-3). The serum samples were also analyzed by traditional ELISA based on PPD developed by CIRG. Mathura. After this initial optimization, DIVA ELISA was evaluated on the extended panel of sera from field samples available with the repository of CIRG, Mathura. In total 104 sera from

Table 5. Alialysis of the set uni samples of healthy cattle using FFD ELISA and DTVA ELISA						
S. No.	Animal ID	PPD ELISA S/P ratio	DIVA ELISA S/P ratio			
	5	0.04	0.01			
2	3(M)	0.05	0.01			
3	223(f)	0.09	0.03			
4	tag 104	0.09	0.05			
5		0.06	0.04			
6	pb14	0.02	0.04			
	pb ₆	0.04	0.04			
8	pb1	0.01	0.07			
9	2C	0.02	0.06			
10	CN	0.01	0.08			

Table 3: Analysis of the serum samples of healthy cattle using PPD ELISA and DIVA ELISA

37	$KGF-1$	K.G. Farm, Mathura,	Goat	15	0.78	0.23
38	KGF-2	UP			0.80	0.30
39	KGF-3				0.85	0.26
40	KGF-4				0.87	0.27
41	KGF-5				0.76	0.31
42	KGF-6				0.58	0.39
43	KGF-7				0.63	0.28
44	KGF-8				0.61	0.31
45	KGF-9				0.57	0.40
46	KGF-10				0.92	0.32
47	KGF-11				1.04	0.38
48	KGF-12				0.87	0.21
49	KGF-13				0.78	0.28
50	KGF-14				0.56	0.35
51	KGF-15				0.62	0.22
52	KGF-16				0.73	0.37
53	KGF-17				0.81	0.21
54	KGF-18				0.63	0.33
55	KGF-19				0.77	0.37
56	KGF-20				0.83	0.28
57	BDF-1	B.D. Farm, Gurgaon,	Cattle	12	0.80	0.30
58	BDF-2	Haryana			0.82	0.22
59	BDF-3				0.76	0.36
60	BDF-4				0.68	0.28
61	BDF-5				0.72	0.37
62	BDF-6				0.66	0.26
63	BDF-7				0.97	0.27
64	BDF-8				0.94	0.36
65	BDF-9				0.83	0.19
66	BDF-10				0.72	0.21
67	KD_M-1	K.D.Farm, Mathura,	Cattle	18	0.89	0.40
68	$KD_M -2$	UP			0.69	0.28
69	$KD_M -3$				0.96	0.35
70	$KD_M -4$				0.78	0.32
71	$KD_M - 5$				0.80	0.20
72	$KD_M -6$				0.85	0.35
73	KD_A-1	K.D. Farm, Agra, UP	Cattle	18	0.58	0.28
74	KD_A-2				0.67	0.36
75	KD_A-3				0.68	0.38
76	KD_A-4				0.72	0.22
77	EGL_C-1	E.G.L.Farm, Sundrel,	Cattle	06	0.71	0.32
78	EGL_C-2	MP			0.61	0.33
79	DDK-1	D.D.K. Gausala,	Cattle	18	0.75	0.35
80	DDK-2	Farah, UP			0.62	0.26
81	DDK-3				0.56	0.35
82	DDK-4				0.83	0.23
83	DDK-5				0.59	0.39
84	DDK-6				0.92	0.28
85	DDK-7				0.88	0.39
86	DDK-8				0.73	0.34

Table 4: Analysis of the extended panel of serum samples from vaccinated animals of different species using PPD ELISA and DIVA ELISA (Continued...)

87	$GGF-1$	G.G. Farm, Ma-	Cattle	24	0.77	0.29
88	$GGF-2$	khdoom, UP			0.55	0.28
89	$GGF-3$				0.61	0.36
90	$GGF-4$				0.99	0.38
91	$GGF-5$				1.01	0.40
92	$GGF-6$				0.58	0.28
93	$GGF-7$				0.64	0.31
94	$GGF-8$				0.91	0.36
95	$GGF-9$				0.88	0.38
96	$GGF-10$				0.77	0.31
97	$KBF-1$	K.B. Farm, Mathura,	Buffalo	18	0.69	0.25
98	$KBF-2$	UP			0.99	0.34
99	KBF-3				0.76	0.29
100	KBF-4				0.58	0.21
101	KBF-5				0.71	0.29
102	KBF-6				0.82	0.35
103	KBF-7				0.89	0.39
104	KBF-8				1.01	0.39

Table 4: Analysis of the extended panel of serum samples from vaccinated animals of different species using PPD ELISA and DIVA ELISA (Continued...)

Table 5: Analysis of the extended panel of serum samples from naturally infected animals of different species using PPD ELISA and DIVA ELISA

Table 5: Analysis of the extended panel of serum samples from naturally infected animals of **different species using PPD ELISA and DIVA ELISA (Continued…)**

Table 5: Analysis of the extended panel of serum samples from naturally infected animals of different species using PPD ELISA and DIVA ELISA (Continued...)

vaccinated animals, 90 sera from naturally infected animals and 17 sera from healthy animals were used to validate the DIVA ELISA (Table 4-6). These sera were also analyzed by PPD based ELISA developed by CIRG, Mathura.

RESULT AND DISCUSSION

Immuno-proteomic analysis confirmed that selected antigens are strong immunogens for domestic ruminant species (cattle, goat, sheep and buffalo) (Fig. 1-4). Checker board titration results showed that 10 ng per well of each antigen is optimal for the coating the wells of the ELISA plate. DIVA ELISA optimization results showed that based on the S/P ratio we can distinguish vaccinated, infected and healthy animals with respect to paratuberculosis (Table 1-3). Healthy animals had S/P ratio in the ≤0.09, vaccinated animals had S/P ratio \leq 0.40 and infected animals had S/P ratio >0.40. Validation of DIVA ELISA on extended panel of the sera also confirmed the optimization findings (Table 4-6). It was found that PPD based ELISA

is unable to distinguish vaccinated and naturally infected animals (Table 1-6).

Global burden of paratuberculosis is mounting (Singh *et al.,* 2014) and due to failure of the 'Test and Cull' programs, there is need to develop alternate disease control strategies. Vaccination has been recognized as better alternate to 'Test and Cull', however, vaccination will interfere with the routine diagnosis of disease and will be problem in herd certification programs, therefore for the field use of vaccine, DIVA tool is needed. DIVA tool will not only popularize the paratuberculosis vaccination but will also boost the ongoing programs. Concept of DIVA has been well-established for veterinary vaccines and DIVA technology has been recognized as unprecedented achievement in veterinary world for its ethical, environmental, and social-economic benefits towards animal and human well-being (Domínguez *et al.*, 2014).

In the present study, we report the development of first DIVA assay for inactivated paratuberculosis

vaccine. Like the majority of available DIVA tools (Domínguez *et al.*, 2014), presently study also exploited the immunogens that are active during the natural infection and are not part of vaccine. We used secretory antigenic biomarkers (MAP1693c, MAP2677c, MAP3547c and MAP4308c) to develop DIVA. These secretory antigens are specific to MAP and are absent from *M. tuberculosis* complex (Leroy *et al., 2007*; Mikkelsen *et al., 2012*). These proteins are secreted during the active growth of mycobacteria in the host (Waghmare *et al.*, 2016) and strong humoral and cell mediated responses have been reported against secretory proteins of mycobacteria during natural infection (Wu et al., 2010, Xu *et al.*,2008). So, serological response

against these antigens should be present in naturally infected animals but as these antigens are not part of vaccine so antibodies to these proteins should be absent in vaccinated individuals. Immuno-dominance of these proteins to all domestic ruminant species (cattle, goat, sheep and buffalo) was first time confirmed in this studies, previous studies only analyzed either in cattle or sheep (Leroy *et al., 2007*; Mikkelsen *et al., 2012*).

Optimized DIVA ELISA showed promise and could differentiate vaccinated and infected animals. Since ELISA OD values may vary with kind of reagents used or person to person handling variations. So, a unique standard was needed to predict the results of the ELISA, in the present study we used the S/P ratio criterion (Collins *et al.*, 2002) to

analyze the findings of the DIVA ELISA. We found a consistent S/P ratio range for vaccinated $($ <0.40), naturally infected (>0.40) and healthy animals $(≤0.09)$ with respected to paratuberculosis both in our optimization studies as well as laboratory scale validation studies. Serology based DIVA tool has successfully been developed for other veterinary diseases viz. rinderpest virus (RPV), peste des petits ruminants viruses (PPRV), bovine herpesvirus 1 (BHV-1), Aujeszky's diseases, foot & mouth disease virus (FMDV) and *Salmonella* (Vordermeier *et al.*, 2016; Bearson *et al.*, 2016; Domínguez *et al.,* 2014; Lee *et al.,* 2012). DIVA strategy has been applied successfully for the control of pseudorabies in pigs and avian influenza (Pasick, 2004). In conclusion, results of the present study are promising and DIVA ELISA has the potential to be used in field with vaccination and field validation of the DIVA ELISA is need for more stringent confirmation.

Figure 2: Immuno-proteiomic analysis of recombinant proteins using cattle serum, left to right; M: pre-stained protein ladder, Lane 1: MAP 1693c, Lane 2: MAP 4308c, Lane 3: MAP **3547c, Lane 4: MAP 2677c**

Figure 3: Immuno-proteiomic analysis of recombinant proteins using buffalo serum, left to right; M: pre-stained protein ladder, Lane 1: MAP1693c, Lane 2: MAP4308c, Lane 3: **MAP3547c, Lane 4: MAP2677c**

Figure 4: Immuno-proteiomic analysis of recombinant proteins using sheep serum, left to right; Lane 1: MAP1693c, M: pre-stained protein ladder, Lane 2: MAP4308c, Lane 3: **MAP3547c, Lane 4: MAP2677c**

ACKNOWLEDGEMENT

We thank Vice-Chancellor, Amity University Rajasthan, Jaipur and Director, Central Institute for Research on Goats, Mathura for laboratory resources. We express our sincere gratitude to Department of Scientific and Industrial Research (Govt. of India) for the funding of the present study.

REFERENCES

- Bastida, F., & Juste, R. A. (2011). Paratuberculosis control: a review with a focus on vaccination. *Journal of Immune Based Therapies and Vaccines*, 9: 8.
- Bearson, B.L., Bearson, S.M.D., Brunelle, B.W., Bayles, D.O., Lee, I.S., Kich, J.D., (2016). Salmonella DIVA vaccine reduces disease, colonization and shedding due to virulent *S. Typhimurium* infection in swine. *Journal of Medical Microbiology*. 66(5), 651-661.
- Collins, M. T. (2002). Interpretation of a commercial bovine paratuberculosis enzyme-linked immunosorbent assay by using likelihood ratios. *Clinical and Diagnostic Laboratory Immunology*, *9*(6), 1367-1371.
- Dhand, N. K., Johnson, W. O., Eppleston, J., Whittington, R. J. & Windsor, P. A. (2013). Comparison of pre- and post-vaccination ovine Johne's disease prevalence using a Bayesian approach. *Preventive Veterinary Medicine,* 111, 81-91.
- Dominguez, M., Gache, K., Touratier, A., Perrin, J.B., Fediaevsky, A., Collin, E., Breard, E., Sailleau, C., Viarouge, C., Zanella, G., Zientara, S., Hendrikx, P., Calavas, D. (2014). Spread and impact of the Schmallenberg virus epidemic in France in 2012-2013. BMC Veterinary Research, 10, 248.
- Groenendaal H., Zagmutt, F. J., Patton, E. A. & Wells, S. J. (2015). Costbenefit analysis of vaccination

against Mycobacterium avium ssp. paratuberculosis in dairy cattle, given its cross-reactivity with tuberculosis tests. *Journal of Dairy Science*, 98, 6070-84.

- Gupta, S., Chaubey, K.K., Singh, S.V., Bhatia, A.K., Kumar ,N., Goel, A., Sachan, T.K., Rawat, K.D., Sohal J.S. & Dhama, K. (2015). Immunoreactivity to culture filtrate proteins of *Mycobacterium avium* subspecies *Paratuberculosis* in naturally infected goat and sheep sera. *Advances in Animal and Veterinary Sciences,* 3, 347-353.
- Jayaraman S., Mukta Jain, Kuldeep Dhama, S. V. Singh, Manali Datta, Neelam Jain, K.K. Chaubey, S. Gupta, G. K. Aseri, Neeraj Khare, Parul Yadav, A. K. Bhatia, J. S. Sohal. DIVA Technology: Indispensable Tool for the Control of Johne's disease. Journal of Experimental Biology and Agricultural Sciences, 2016, 4 (16-25)
- Juste RA & Casal J. An economic and epidemiologic simulation of different control strategies for ovine paratuberculosis. Prev Vet Med. 1993;15:101-115. doi: 10.1016/0167-5877(93)90106-4.
- Khol, J.L. & Baumgartner, W. (2012). Examples and suggestions for the control of paratuberculosis in European cattle. Jpn J Vet Res. Suppl: S1-7.
- Kobayashi S., Tsutsui T., Yamamoto T., Nishiguchi A. (2007). Current surveillance and control program on paratuberculosis in Japan. *Bull. Int. Dairy Fed.* 410:30.
- Kralik P, Pribylova-Dziedzinska R, Kralova A, Kovarcik K, Slana I. (2014). Evidence of passive faecal shedding of Mycobacterium avium subsp. paratuberculosis in a Limousin cattle herd. Veterinary Journal. $201(1)$: 91-4.
- Lee, N. H., Lee, J. A., Park, S. Y., Song, C. S., Choi, I. S. & Lee, J. B. (2012). A review of vaccine development and research for industry animals in Korea. *Clinical and experimental vaccine research*, 1(1), 18-34.
- Leroy, B., Roupie, V., Noel-Georis, I., Rosseels, V., Walravens, K., Govaerts, M., Huygen, K. & Wattiez, R. (2007). Antigen discovery: a postgenomic approach to paratuberculosis diagnosis. *Proteomics*, 7, 1164-1176.
- Momotani, E., Ozaki, H., Hori, M., Yamamoto, S., Kuribayashi, T., Eda, S., & Ikegami, M. (2012). *Mycobacterium avium* subsp. *paratuberculosis* lipophilic antigen causes Crohn's disease-type necrotizing colitis in Mice. *SpringerPlus*, 1(1), 47.
- Mon, M.L., Viale, M., Baschetti, G., Alvarado Pinedo, F., Gioffre, A., Travería, G., Willemsen, P., Bakker, D., Romano, M.I. (2012). Search for *Mycobacterium avium* subspecies *paratuberculosis* antigens

for the diagnosis of paratuberculosis. *Veterinary Medicine International*, 2012, 860362. doi: 10.1155/2012/860362.

- Nielsen SS, Krogh MA, Enevoldsen C (2009). Time to the occurrence of a decline in milk production in cows with various paratuberculosis antibody profiles. *Journal of Dairy Science*, 92: 149-55.
- Pasick, J. (2004). Application of DIVA vaccines and their companion diagnostic tests to foreign animal disease eradication. Animal Health Research Reviews, 5, 257–262.
- Patton EA. Paratuberculosis vaccination (2011). Veterinary Clinics of North America: Food Animal Practice, 27(3): 573-80.
- Roupie, V., Leroy, B., Rosseels, V., Piersoel, V., Noël-Georis, I., Romano, M. & Huygen, K. (2008). Immunogenicity and protective efficacy of DNA vaccines encoding MAP0586c and MAP4308c of Mycobacterium avium subsp. paratuberculosis secretome. *Vaccine*, *26*(37), 4783-4794.
- Roupie, V., Viart, S., Leroy, B., Romano, M., Trinchero, N., Govaerts, M. & Huygen, K. (2012). Immunogenicity of eight *Mycobacterium avium* subsp. *paratuberculosis* specific antigens in DNA vaccinated and Map infected mice. *Veterinary im*munology and immunopathology, 145(1), 74-85.
- Shankar, H., Singh, S. V., Singh, P. K., Singh, A. V., Sohal, J. S. & Greenstein, R. J. (2010). Presence, characterization, and genotype profiles of *Mycobacterium avium* subspecies *paratuberculosis*from unpasteurized individual and pooled milk, commercial pasteurized milk, and milk products in India by culture, PCR, and PCR-REA methods. *International Journal of Infectious Diseases*, *14*(2), e121-e126.
- Singh, A. V., Chauhan, D. S., Singh, S. V., Kumar, V., Singh, A., Yadav, A., & Yadav, V. S. (2016). Current status of *Mycobacterium avium* subspecies *paratuberculosis* infection in animals & humans in India: What needs to be done? *The Indian Journal of Medical Research*, *144*(5), 661–671
- Singh, A.V., Singh, S.V., Verma, D.K., Yadav, R., Singh, P.K. & Sohal, J.S. (2011). Evaluation of "Indigenous Absorbed ELISA Kit" for the Estimation of Sero-prevalence of Mycobacterium avium subspecies paratuberculosis Antibodies in Human Beings in North India. Veterinary Sciences, doi: 10.5402/2011/636038.
- Singh, S. V., Singh, M. K., Singh, N. P., Singh, P. K., Singh, A. V., Sohal, J. S., Gupta, V. K. & Vihan, V. S. (2007). Quick and early response to vaccination and improvements in production traits in naturally infected breeding farm of Jamunapari goats in India using indigenous vaccine against Johne's

disease. In: Neilsen, S. S., (Ed). Proceedings of *Ninth International Colloquium on Paratuberculosis, Tsukuba, Japan*, p-225.

- Singh, S. V., Singh, P. K., Singh, A. V., Sohal, J. S. & Kumar, N. (2014). Bio-load and bio-type profiles of *Mycobacterium avium* subspecies *paratuberculosis* infection in the domestic livestock population endemic for Johne's disease: a survey of 28 years (1985-2013) in India, *Transboundary Emerging Diseases,* 61, 43-55.
- Singh, S. V., Singh, P. K., Singh, A. V., Sohal, J. S. & Sharma, M. C. (2010b). Therapeutic Effects of a New "Indigenous Vaccine" Developed Using Novel Native "Indian Bison Type" Genotype of Mycobacterium avium Subspecies paratuberculosis for the Control of Clinical Johne's Disease in Naturally Infected Goatherds in India. Veterinary *Medicine International, 2010, 351846.*
- Singh, S.V., Kumar, N., Singh, S.N., Bhattacharya, T., Sohal, J.S., Singh P.K., Singh, A.V., Singh, B., Chaubey, K.K., Gupta, S., Sharma, N., Kumar, S. & Raghava G.P.S. (2013b) Genome sequence of the "Indian Bison type" biotype of *Mycobacterium avium* subsp. *paratuberculosis* strain S 5. *Journal of Bacteriology: Genome Announcement,* 1(1), e00005-13.
- Singh, S.V., Stephen, B.J., Singh, M., Gupta, S., Chaubey, K.K., Sahzad, Jayaraman, S., Aseri, G.K., Sohal, J.S., Bhatia, A.K., Chauhan, J. & Dhama, K. (2016c). Evaluation of milk dot-ELISA as field based test vis a vis milk plate ELISA for the detection of Mycobacterium avium subspecies paratuberculosis (MAP) in lactating domestic livestock. Indian Journal of Biotechnology, 15, 166-171.
- Sohal J.S., Singh S.V., Singh B., Thakur S., Aseri G.K., Jain N., Jayaraman S., Yadav P., Khare N., Gupta S., Chaubey K.K., Dhama K. (2015). Control of paratuberculosis: opinions and practices. *Advances in* Animal and Veterinary Sciences. 3(3): 156-163.
- Sohal, J. S., Singh, S. V., Tyagi, P., Subhodh, S., Singh, P. K., Singh, A. V., Narayanasamy, K., Sheoran, N., Singh, R. & Sandhu, K. (2008). Immunology of mycobacterial infections: with special reference to Mycobacterium avium subspecies paratuberculosis. Immunobiology, 213, 585-98.
- Van Schaik G, Kalis CH, Benedictus G, Dijkhuizen AA, Huirne RB. Cost-benefit analysis of vaccination against paratuberculosis in dairy cattle. Vet Rec. 1996;139:624–627.
- Vordermeier, H.M., Whelan, A., Cockle, P.J., Farrant, L., Palmer, N., Hewinson, R.G. (2001). Use of synthetic peptides derived from the antigens ESAT-6 and CFP-10 for differential diagnosis of bovine tuberculosis in Cattle. *Clinical and Diagnostic Laboratory Immunology,* 8, 571–578.

© Pharmascope Publications | International Journal of Research in Pharmaceutical Sciences 565