# TRANSMUSE Image: Contract of the second second

Together, beyond animal health



### **CEVA GLOBAL REFERENCE** IN IBD CONTROL







#### 

#### FOREWORD

Ceva Santé Animale has been contributing to the control of Gumboro disease (IBD) for several years, due the expertise of our teams, and the portfolio of products developed for the poultry industry, such as TRANSMUNE<sup>®</sup>.

Ceva has protected, since 2006, over 220 billion broilers against IBD, acquiring a large expertise and knowledge.

In this book you will find an updated technical-economical summary of TRANSMUNE<sup>®</sup>, containing all the concepts required to understand IBD control.

In a recent IBD Survey conducted during 2019-2021, independent researchers and Ceva Santé Animale Vet Specialists updated the epidemiology of the IBD virus around the world.

We obtained real world evidences in several countries worldwide, where Ceva Sante Animale has presence, representing South & Central America, Europe, Middle East, Europe, Africa and Asia.

Each experience includes an economic calculation, based on a specific and updated scale, which suggests the value of using TRANSMUNE<sup>®</sup>. These field cases compare TRANSMUNE<sup>®</sup> (administered either subcutaneously or in-ovo) versus different vaccination programs.

Ceva Santé Animale is committed to sharing information and updated scientific data with partners and customers.

Please contact us should you require further information or explanation.

Enjoy your reading.

Global Poultry Team - CEVA Santé Animale 10 Avenue de la Ballastière 33500 Libourne France





#### 

### TABLE OF CONTENTS

1 - Infectious Bursal Disease: a threat to the poultry industry	6
2 - IBD surveys and global situation	12
Worldwide IBD surveys results	14
• Western Europe: United Kingdom • The Netherlands • Portugal • Italy	
• Asia: China • India	
South America: Brazil • Peru • Argentina • Mexico	
Africa: South Africa & Botswana	
3 - Vaccination program	26
4 . Transmune® vaccine	28
5 - Transmune® benefits	30
Worldwide IBD surveys results	34
China • Arabic Peninsula • United Kingdom • Brazil	
6 . Real World evidences	38
Wordwide IBD surveys results	40
• <b>Transmune® vs DW vaccines:</b> France • Ireland • Malaysia • Brazil • Portugal • Spain • India • Indonesia	
• <b>Transmune<sup>®</sup> vs rHVT-IBD vaccines:</b> Brazil • Egypt • Brazil • Arabic Peninsula	
• Transmune <sup>®</sup> vs VP2 killed vaccines: China	
• Transmune vs other Immune-complex vaccines: Egypt • Venezuela • Brazil • Colombia • India • Russia	

### Infectious Bursal Disease: A THREAT TO THE POULTRY INDUSTRY

Infectious Bursal Disease (IBD) or, most commonly known, Gumboro disease, despite the wide use of vaccines and increased biosecurity is, however, still very much present and ranks among the top five diseases in almost all countries globally. The World Organisation for Animal Health (OIE) listed IBD as a notifiable disease with importance in 2017.



One of the reasons for the worldwide distribution of the IBD virus is that it is very persistent, surviving in poultry houses in the absence of chickens during downtime periods. The industry is concerned about the immunosuppressive effects of IBD.

#### 



Figure 1. Worldwide IBDV presence (Ceva data)

After the initial outbreak in the US, clinical IBD was reported in many other countries in the 1960s and 1970s. More virulent forms were later reported around the same time with a very immunosuppressive form of IBD in the USA (starting around 1985), which then later spread to Central and South America (Figure 1). The very virulent (vvIBD) form of IBD spread around the same time to Western Europe, Nothern Africa, the Middle East and Asia. In the late 1990's and early 2000's, the very virulent form spread to Central, South America and California. Today, the very virulent form is predominant in most countries, and variant strains of IBD are present in several countries, leading to sub-clinical forms of the disease.

The cost of IBD has been very well described in different publications in the last decade. It has a direct impact on mortality, from 5% to 30%, depending on the degree of protection of the birds and the form of the disease (Rosenberger *et al.*, 1986; Van den Berg, 1991). In subclinical cases, it can reduce the income per flock up to 14%,

with a 11% reduction in yield and 10% profit loss due to weight loss and increased FCR (McIlroy, 1992). In layers, it can reach mortality rates of 60%, as previously described (Nunoya, 1992).

Recently, interesting calculations have been performed in North America, especially focused on the subclinical variant IBD strains. The authors correlated positively the serological IBD titers with increased hepatic lesions and condemnations during processing.



Figure 2. Rejected livers with hepatitis in the processing plant (Ceva Animal Health)



Infectious bursal disease (IBD) is a viral disease that affects chickens worldwide and it has a major economic impact on the modern poultry industry.

• It is caused by a *Avibirnavirus*, called infectious bursal disease virus (IBDV), which is a bi-segmented, double stranded RNA virus, highly resistant in the environment. The RNA encodes for five viral proteins (VP1 to VP5) of which VP2 contains hypervariable portions that enable classifying strains into various antigenic and genetic groups; in addition, VP2 contains the majority of neutralizing sites. Depending on the pathogenic type, IBDV strains are classified as very virulent, virulent, and subclinical.

Antigenically, two serotypes (serotype 1 and 2) of IBDV exist, although antigenic variants are described within serotype 1 strains, which are the ones that affect domestic poultry of the *Gallus gallus* species. There have been described, however, non-clinical cases of serotype 1 passages in turkeys, for example, making accidental carriers a determinant factor for the spread of the disease.

• Only the serotype 1 virus is pathogenic for chickens in which it can cause depression, diarrhoea, haemorrhages in muscles and proventriculus, and inflammation, necrosis and atrophy of the bursa of Fabricius depending on the virulence of the strain. Variant IBDV strains generally do not cause clinical signs or mortality, but can cause severe atrophy of the bursa without marked external pathological signs.



Depending on the age of the birds at infection and their immune status, IBDV can also induce immunosuppression. Recent reports confirmed IBD presence in various parts of the world, namely South America, North America, Africa, China, the Middle East, and Europe. Therefore, IBD is prevalent worldwide and its control is a global concern.



Clinical signs of deep depression are not always clear and present

#### 

Avibirnavirus replicates and damages the bursa of Fabricius in the domestic fowl. It is a disease which basically presents 3 different clinical forms: **immunosuppressive**, **clinical and subclinical**.

The **immunosuppressive form** is the consequence of the infection of chickens aged less than 2 weeks by any pathogenic IBD virus. During this time, the integrity of the bursa of Fabricius is critical since it is the organ where B-lymphocytes need to mature to become functional and provide the chickens with effective humoral immune response capabilities.

The **clinical form** is the consequence of infection of chickens with an IBD virus that replicates very rapidly and at a high level, increasing the mortality rate. Clinical signs may or may not be present. Post mortem examination generally shows a strong edema of the bursa with (or without) haemorrhages of variable intensity that can also be seen in the form of petechiae or suffusions in the thighs and breast muscles. The '*very virulent*' or '*hypervirulent*' cases of Gumboro disease that were reported in Western Europe in the late 1980s, and then in other parts of the world where they can still be observed, show this clinical form as well. The mortality rate varies a lot but is generally higher in slow growing chickens like layer pullets, layer/broiler breeder pullets or organic chickens (generally more than 25%) than in broilers (in general less than 15%).



The **sub-clinical (or economical)** form of the disease corresponds to infection of chickens after 2-3 weeks of age, by an IBD virus without occurrence of typical clinical signs (hence the term 'sub-clinical') or direct mortality. The bursa of Fabricius might show signs of variable intensity and persistence. Most of the time, only poor or sub-optimal performances are detected.



Irregular appearance of the bursae in a flock with sub-clinical IBD

### Biosecurity is key in preventing IBD. However, vaccination is regarded as an important tool to complement biosecurity efforts.

Parent stock vaccination is useful to elicit humoral immunity that will be transmitted to the progeny (passive immunity); it will protect the young chicks for the first few weeks of life. Live vaccination is applied in the progeny because passive immunity does not last long enough to ensure adequate protection for the whole broilers' lifespan. By doing so, chickens develop an active immunity. Several vaccines are commercially available for the control of IBD in broilers.

Historically, vaccination has been applied in the farm via drinking water using live attenuated vaccines of various residual pathogenicity (mild, intermediate, intermediate plus, hot). Hatchery vaccination is becoming a growing trend because of the increasing capacity of poultry producing companies, a higher degree of integration, and the willingness to better master the vaccine application using automated equipment, either by day-old injection via subcutaneous route, or in ovo route. High-throughput automated equipment is now available (in ovo or day-old injection) enabling a higher quality, consistency, and cost-effectiveness of vaccination. In addition, hatchery vaccination removes the risk of vaccination failure in the field (due to poor water quality, inappropriate timing, and insufficient flock coverage); it also prevents the stress of water withdrawal in the farm when using the classical drinking water method. As a consequence, moving vaccination in the hatchery improves the welfare of the birds in the farm. Altogether, it offers a significant improvement in terms of immunization success as recently demonstrated. Advances in technology have enabled the development of new vaccines that are able to escape the neutralizing effect of maternally derived antibodies (MDA) and hence are eligible for hatchery application.

### Three types of IBD vaccines are currently available for hatchery application in several parts of the globe:

- An immune-complex vaccine in which a live attenuated IBD vaccine strain has been in vitro complexed with a high titre polyclonal serum in specific quantities;
- A vaccine using the herpesvirus of turkeys (HVT) vector technology as a carrier expressing IBDV's VP2 antigen.
- A third type of less attenuated, naked viruses or «hot strains», used as vaccines, which could be applied in the hatchery.





#### As the Gumboro virus is a very persistent virus, in many cases it is already present inside the farm, which can lead to a field challenge when new birds are placed.

The characteristics of this challenge in chickens (age of birds, severity, consequences, etc), will vary from house to house but the challenge will definitely occur. In this case vaccination should aim at both protecting the chickens and preventing the Gumboro challenge from getting out of control.

When considering a sound Gumboro vaccination program the main objectives must be:

- Ensure continuous protection of the chickens against farm infection of Gumboro disease, or "Prevention of Infection"
- Protect against the clinical signs of infection or "Clinical Protection",
- Prevent or significantly reduce the amount of virus shed after challenge or "Reduction of shedding of the Gumboro
- Prevent the build up of a higher virus pressure, production cycle after production cycle,
- Prevent the evolution of the farm Gumboro disease towards a virus that could escape the protection program.

The last two points are important for the reduction of the shedding of the Gumboro field virus, since the goal of a strong Gumboro vaccination program should be to stop the Gumboro cycle.

### Over the last 50 years the economic development in many countries has increased the number of birds placed per farm and has led to stricter biosecurity and surveillance programs.

Despite the wide use of vaccines and increased biosecurity, still very much present and ranks among the top five diseases in almost all countries globally. One of the reasons for this dominance is that the **Gumboro disease virus** is a very persistent virus surviving in poultry houses in the absence of chickens during downtime periods.

#### Bibliography

Cazaban C, Swart WBF, Rietema RMW, Wit JJD, Palya V, et al. (2018). Field Assessment of An Immune-Complex Infectious Bursal Disease Vaccine in Chicks Born to Non-Hyperimmunized Broiler Breeders. J Vet Sci Ani Husb 6(3): 304 Cazaban C, Gardin Y, Gonzalez G., Van Oort R., Arbe M., González C. (2016)

World Poultry: Gumboro Disease Special - Effectively vaccinating your flock against Gumboro Disease

World Livestock Disease Atlas - A Quantitative Analysis of Global Animal Health Data (2006-2009). The World Bank, November, 2011 Molecular characterization and pathogenicity of very virulent infectious bursal disease virus isolated from naturally infected turkey poults in Egypt.

Samah M Mosad, Abdelfattah H Eladl, Mohamed El-Tholoth, Hanaa S Ali, Mohamed F Hamed.

Trop Anim Health Prod. 2020 Nov;52(6):3819-3831. doi: 10.1007/s11250-020-02420-5. Epub 2020 Oct 1.

## 2 IBD surveys& global situation

### Conducting IBD surveys is key to understand the extension and disease challenge in poultry production.

In Ceva, we always conduct epidemiological IBD surveys in order to recognize the potential impact of the disease in the operations of our customers. First, we focus on the real problems of our customers in a specific setting and, once that they are correctly identified, we discuss different solutions to address them. This is how we believe that our solutions should be implemented. In order to accomplish this, we propose the following charts, which explain how to approach each situation.

#### Presence of IBDV in flocks vaccinated with drinking water vaccines



#### Presence of IBDV in flocks vaccinated with rHVT vaccines





#### Presence of IBDV in flocks vaccinated with very invasive vaccine strains



#### Presence of IBDV in flocks vaccinated with other immune-complex vaccines



#### Worldwide IBD surveys results

Ceva Santé Animale Vetarinary Services Specialists, in cooperation with independent researchers conducted an IBD Survey during 2019-2021 in order to update the epidemiology of the IBD virus around the world.

In the next pages, you will access result of several studies from this survey, demonstrating the presence of different field strains in Europe, Asia, Latin America and Africa.



### United Kingdom





#### CONCLUSION

vvIBDVs were found, possibly associated to subclinical infections. Compared to other drinking water vaccines, Transmune<sup>®</sup> demonstrated its superiority and STOPPED THE GUMBORO CYCLE.

#### 

VACCINATION PROGRAM

### The Netherlands

)	MATERIAL	AND	METHODS

SAMPLING PERIOD	2019-2020
TARGET	Layers
SAMPLING AGE	6 and 8 weeks
NUMBER OF SAMPLES	Bursas from all 18 flocks
TECHNIQUE	Serology (Elisa Biochek) and RT-PCR (bursas)

#### RESULTS



Serology IBD ELISA Biochek 16.000 14.000 12.000 10.000 8.000 6.000 4.000 2.000 0 В С D Е F GHI А J К L М Ν 0 Ρ R 0 8 weeks 6 weeks

• rHVT-IBD



#### CONCLUSION

Field and vvIBDV strains were detected in several rHVT-IBD vaccinated flocks. rHVT-IBD vaccine could not stop the Gumboro cycle.

### Portuga

#### MATERIAL AND METHODS

SAMPLING PERIOD	November 2020 - February 2021
TARGET	Broilers and Layers
SAMPLING AGE	> 35 days of age
NUMBER OF SAMPLES	104
TECHNIQUE	RT-PCR
LABORATORY USED	MAPS, Italy

#### VACCINATION PROGRAM

• Drinking water (various)

#### RESULTS







#### CONCLUSION

A potential new IBDV genogroup was discovered in Portugal. Farm vaccination with other types of vaccines (not immune complex) could not protect the bursa of Fabricius.



VACCINATION PROGRAM

 Transmune, rHVT-IBD vaccines or conventional field vaccines



#### MATERIAL AND METHODS

SAMPLING PERIOD	March 2020 to April 2021
TARGET	Broilers
SAMPLING AGE	28-42 days of age
NUMBER OF SAMPLES	25 bursas
TECHNIQUE	RT-PCR (bursas)

#### RESULTS





#### CONCLUSION

There is a clear difference in vvIBDV prevalence in the flocks monitored. Transmune<sup>®</sup> was able to STOP THE GUMBORO CYCLE, when rHVT-IBD and conventional field vaccines did not. ASIA

### China

#### MATERIAL AND METHODS

SAMPLING PERIOD	March 2019 - August 2019
TARGET	Broilers
SAMPLING AGE	35 days of age
NUMBER OF SAMPLES	249 BURSAS: Fresh (174); FTA Cards (75)
TECHNIQUE	Serology; RT-PCR;
LABORATORY USED	LAB – IND, Malaysia

#### VACCINATION PROGRAM

- GROUP 1 (2 farms): - Cevac<sup>®</sup> IBD L + Cevac TRANSMUNE<sup>®</sup>
- GROUP 2 (2 farms): - Chinese subunit ND-H9-IBD Inactivated





#### CONCLUSION

New IBDV variants were not perceived as a threat by the producers, despite their impact on performance. ND-H9-IBD vaccines could not stop the Gumboro Cycle.



### India



#### MATERIAL AND METHODS

SAMPLING PERIOD	June - October 2018
TARGET	Broilers
SAMPLING AGE	1 day of age and 35-38 days of age
NUMBER OF SAMPLES	22 BURSAS on FTA Cards: 2500 sera
TECHNIQUE	Serology ELISA Biochek IBD; RT-PCR
LABORATORY USED	LAB – IND, Malaysia, Ceva SSIU Phylaxia

#### RESULTS



#### Drinking Water IBD titers at slaughter age





#### CONCLUSION

Conventional Drinking Water IBD vaccines could not protect the Bursa of Fabricius and could not stop the Gumboro cycle.

#### VACCINATION PROGRAM

• Drinking water vaccination (D78 or MB group) at 12-13 days of age

### Brazil

#### MATERIAL AND METHODS

SAMPLING PERIOD	December 2020 – February 2021
TARGET	Broilers
SAMPLING AGE	34 days of age
NUMBER OF SAMPLES	50 Bursas in FTA Cards
TECHNIQUE	Histopathology

#### RESULTS

#### Histopathological results





VACCINATION PROGRAM

• rHVT-ND-IBD



#### CONCLUSION

The bursas from the flocks vaccinated by rHVT-ND-IBD vaccines showed lesions by field strains infection.





#### MATERIAL AND METHODS

SAMPLING PERIOD	March - May 2020
TARGET	Broilers
SAMPLING AGE	21-35 days of age
NUMBER OF SAMPLES	44 BURSAS in 11 FTA Cards
TECHNIQUE	RT-PCR
LABORATORY USED	SSIU Phylaxia, Hungary

#### RESULTS





VACCINATION PROGRAM

• Live Immune-Complex vaccine, strain 1052



#### CONCLUSION

Variant A IBDV was detected from the 24 days of age onwards despite a vaccination program which had been used for over a year. Competitor immune-complex vaccines could not stop the Gumboro Cycle.

### Argentina

#### MATERIAL AND METHODS

SAMPLING PERIOD	January 2021 - March 2022
TARGET	Broilers
SAMPLING AGE	18-21 days of age
NUMBER OF SAMPLES	22 BURSAS in FTA Cards
TECHNIQUE	RT-PCR
LABORATORY USED	SSIU Phylaxia, Hungary; INTA Castelar (Argentina)

#### RESULTS

#### Broilers, 24 days of age





#### VACCINATION PROGRAM

• rHVT-IBD





#### CONCLUSION

Early infection with a new genogroup 2 variant IBDV, was detected from 13 to 42 days of age. New variant IBDVs are replacing vvIBDVs and were massively detected in rHVT-IBD flocks.



VACCINATION PROGRAM

Conventional field IBD vaccination

Mexico

#### MATERIAL AND METHODS

SAMPLING PERIOD	2020
TARGET	Broilers
SAMPLING AGE	1 day of age
NUMBER OF SAMPLES	180 blood samples
TECHNIQUE	Serology

#### RESULTS



#### IBD - Maternal Delivered Antibodies (MDA)



#### CONCLUSION

The MDA titers showed a high variation from farm to farm, and from chick to chick. This brings a strong challenge to define the correct date of field vaccination, and to protect all the chicks of the flock.

#### AFRICA

### South Africa and Botswana



#### MATERIAL AND METHODS

SAMPLING PERIOD	Sept. 2019-December 2021
TARGET	Broilers
SAMPLING AGE	21-31 Days of age
NUMBER OF SAMPLES	1083 BURSAS
TECHNIQUE	RT-PCR

#### RESULTS

#### VACCINATION PROGRAM

• Live conventional DW IBD vaccines

AGE AT DIRECT INFECTION	7 DAYS OF AGE	10 DAYS OF AGE	
SAMPLING DAY	6 dpi (13 days of age)	4 dpi (14 days of age)	5 dpi (15 days of age)
BURSA GROSS LESIONS	9/9 positive (moderate- severe)	"5/5 positive (moderate- severe)"	4/5 positive (moderate- severe)
BURSA HISTOLOGICAL LESIONS	9/9 positive (4 at onset, 5 in acute-subacute phase)	4/4 positive (2 at onset, 2 in acute-subacute phase)	4/5 positive (in acute-subacute phase)

#### Ceva SSIU Phylaxia Study id. P126

Pathogenicity test of variant IBDV strain of South African origin in SPF and commercial broiler chickens. (2020)



No IBDV Infection

Infected at 7 days of age

Infected at 10 days of age



#### CONCLUSION

Poultry producers were not concerned about the pathogenicity of the south African family of variant IBD viruses. The behaviour of the virus in infected flocks was subclinical. New variant IBDVs produce subclinical signs and atrophy of the bursa of Fabricius.





### Vaccination program

3



Since IBD is a very persistent virus, it is capable of prevailing for a long time in the farms. This can lead to a field outbreak if new birds are placed in the same houses. The characteristics of this challenge in chickens (age of birds, severity, consequences, etc.), might vary from house to house, but the challenge will definitely occur at some point in time. As a result, vaccination should succeed at protecting the chickens and preventing disease challenge.





#### THE MAIN PROPERTIES OF A SUCCESSFUL VACCINATION PROGRAM SHOULD BE:

- Ensuring continuous protection of the chickens against infection at farm level: 'Prevention of Infection'.
- Protecting against clinical signs of disease: 'Clinical Protection'.
- Preventing or significantly reducing the amount of virus shed to the environment after challenge: 'Reduction of shedding of the field IBD virus'.
- Avoiding the "elevator effect", or reaching a higher virus concentration cycle after cycle.
- Stopping the evolution of the IBD virus towards a form that could escape the prevention program.

The last two points are important for the reduction of the shedding of the field IBD virus, thus becoming the backbone of a quality IBD vaccination. The vvIBD virus is sometimes isolated where inefficient application and low vaccine take has been observed (Morla, 2016; Phylaxia, 2017).



### Transmune<sup>®</sup> vaccine

In broilers, the best option to control IBD is to use a live attenuated IBD vaccine of the Intermediate Plus type. Only this category of vaccine can bring a high level of protection against various types of IBD viruses and effectively prevent shedding, so that the virus pressure decreases cycle after cycle and the likelihood of emergence of variant IBDV can be strongly reduced. Since vaccination in the hatchery is the only method to ensure 100% vaccine coverage, then this vaccine should be presented under the immune-complex form.

TRANSMUNE<sup>®</sup> is an IBD immune-complex vaccine containing the original Winterfield 2512 strain, which is blended with specific antibodies called Virus Protecting Immunoglobulins (see Figure 5). The product was developed in the early 2000's, and quickly registered in many countries in Asia, Latin America and Europe. Currently, the vaccine is marketed in over 75 countries worldwide.



Figure 5. Schematic representation of TRANSMUNE®



As the formulation between the attenuated vaccine virus and specific antibodies needs to be extensively tested, in order to have the optimum safety and efficacy balance of the product, more than 100 different formulations were tested before the introduction of TRANSMUNE® to the market.

It has been designed to be applied in the hatchery (in-ovo or subcutaneously) and it has been used in over 90 billion broilers worldwide, since its launch in 2006.



Since the vaccine is registered in Europe, an unique QC procedure was developed to safeguard the efficacy and safety of the vaccine. Every single production batch is thoroughly tested using a CID (Chick Infective Dose) 50 test. This test is performed with the aid of live birds and with the final blend of vaccine-antibodies, in order to guarantee the potency and safety of the vaccine.



### Transmune<sup>®</sup> benefits



THE GUMBORO CYCLE

The take of the immune-complex vaccine (that corresponds to replication of the vaccine virus in the bursa) occurs when the MDA level has reached an optimum point that allows the vaccine to take and before the flock has become susceptible to infection, preventing the infection and shedding of the field virus. This is also known as «STOP The Gumboro Cycle».

- Full protection against clinical signs, high degree of resistance against infection, independently of the challenge IBDV strain.
- High level of prevention against shedding, no selection pressure on the Farm IBDV population. The vaccine adapts individually to the immune status of each chicken and always replicates at the 'optimum' time.
- The vaccine can be administered in the presence of passive immunity, so it does not contradict and may even complement the breeders program.
- The vaccine can be injected in the hatchery, where reliability and consistency of application is at a maximum.
- Every chicken benefits from the properties of the vaccine.



The use of TRANSMUNE<sup>®</sup> and the outstanding Ceva services team up for a perfect combination to stop the Gumboro cycle. Thanks to our long experience in collaborating with our customers, Ceva is proud to offer now an outsanding range of services from the hatchery to the further processing, namely:

• Ceva Hatchery Immunisation Control Keys (C.H.I.C.K.) program • Ceva Global Protection Services (GPS)

In order to monitor the correct application of the vaccine, Ceva developed and implemented several years ago the C.H.I.C.K program. More recently, Ceva has introduced the Global Protection Services (GPS) to screen IBD pressure on farm and to monitor vaccine take and the serological response to IBD. These service programs are monitored by local and fully dedicated vaccination services managers and veterinary services experts. Several scientific papers and publications are available, which demonstrate the efficacy, safety and compatibility of the vaccine. A good example is the compatibility between TRANSMUNE® and Vectormune® ND providing protection against IBD, ND and MD in one application.<sup>(1)</sup>



Throughout the years, our customers have obtained very positive results with TRANSMUNE®, confirming the superiority of the immune-complex vaccination. These results can be described and organized, depending on the production phase where the improvements were observed

Improvements in vaccination control and immunization

Improvements in performance Improvements in processing

### Improvements in vaccination control and immunization

TRANSMUNE<sup>®</sup> can be injected in the hatchery, where reliability and consistency of application is at a maximum. Every chicken benefits from the properties of the vaccine. It requires an investment from the producer's side in "in-ovo" equipment or in extra staff, in case that the vaccination is performed subcutaneously. However, the investments are outperformed by the economic benefits of vaccinating and controlling the vaccination process in the hatchery.





**The quality and strength of the protection** coming from replication of a complete Intermediate plus live attenuated IBDV are conserved: full protection against clinical signs, high degree of resistance against infection whatever the challenging IBDV strain, high level of shedding control, no IBDV strain selection at farm level (Ceva data, 2004-2017).

#### **IBDV evolution in South Africa**



Figure 6. PCR field data, GPS South Africa 2004-2017 (Ceva, Data on file)

#### TRANSMUNE

TRANSMUNE® achieves a more regular immunization when compared with drinking water vaccines:

- Absence of stress and thirst during application, thus compliance with welfare standards: "Freedom from hunger or thirst by ready access to fresh water and a diet to maintain full health and vigour" (Farm Animal Welfare Council, 2012).
- The vaccine can be administered in the presence of passive immunity, so it does not contradict the breeders' vaccination program. At least 25% better distribution of titers versus drinking water vaccination (GPS Spanish field data, 2009-2016, figures 7 & 8).

Figure 7 & 8: Distribution of titers in DW-Lukert (above) and TRANSMUNE<sup>®</sup> (below) vaccinated groups. Number of flocks (%) falling into each titer interval. A range of 4000-9000 ELISA BioChek units is considered an acceptable protection level (Ceva Data on file)







TRANSMUNE® blocks the bursa of Fabricius and the replication of field viruses, thus reducing undesired viral shedding. Additionally, by using the C.H.I.C.K. program and GPS, it can be ensured that all birds are well vaccinated and immunized.

Figure 9: % of protected bursae of Fabricius in various TRANSMUNE® vs. rHVT IBD vaccine challenge models (Ceva, Data on file)



Figure 10. TRANSMUNE<sup>®</sup> and IBD-DW vaccine AMT and CV% 3-year-long field seromonitoring. GPS Spain 2012-2015 (Ceva, Data on file)

#### **IBDV** challenge strains



#### 

### Arabic Peninsula

#### PREVIOUS SITUATION

Customer with high pressure of vvIBDV and variants IBDV strains.

#### VACCINATION PROGRAM

- Transmune®
- IBD Drinking Water conventional vaccines

#### MATERIAL AND METHODS

#### Transmune<sup>®</sup> was introduced to control.

600 Bursal samples were collected for PCR at 28 days of age.

#### RESULTS

#### IBDV detection by PCR : evolution of Transmune® year after year





#### CONCLUSION

Controlling the vvIBDV and variant strains challenges, Transmune<sup>®</sup> was able to STOP THE GUMBORO CYCLE.

### United Kingdom

#### PREVIOUS SITUATION

Customer with presence of vvIBDV strains, and sub-clinical effects.

### PREVIOUS VACCINATION PROGRAM

• IBD Drinking Water conventional vaccines

#### MATERIAL AND METHODS

#### Transmune<sup>®</sup> was introduced to control.

Bursal samples were collected for PCR at slaughter age and were compared after the first cycle.

#### RESULTS

#### Comparison of PCR tests: Transmune® vs IBD Drinking Water conventional









#### CONCLUSION

Transmune<sup>®</sup> controlled the vvIBDV challenge since the first cycle, and could STOP THE GUMBORO CYCLE.




## PREVIOUS SITUATION

Rra

Customer with low IBD pressure.



- Group 1: Transmune®
- Group 2: rHVT IBD

## MATERIAL AND METHODS

After the first cycle, bursal samples were collected at slaughter and tested by histopathology and RFLP-PCR in order to detect the presence of vaccine and field strains, or absence of virus.

• Group 1: Transmune<sup>®</sup> - 10 flocks (352,000 birds)

• Group 2: rHVT IBD - 10 flocks (340,000 birds)

## RESULTS

#### Comparison of PCR tests: Transmune® vs rHVT-IBD vaccines





#### CONCLUSION

In the rHVT-IBD group, 50% of the bursae were positive to the IBDV (field strain). Transmune<sup>®</sup> had excellent recovery (100%) in the vaccinated flocks, and managed to STOP THE GUMBORO CYCLe.

# 6 Real world evidences

## **IMPORTANCE OF A PROPER ANALYSIS**

Over the past 10 years, digitalization – along with the new technologies – has emerged and developed itself in all industries a llowing to get more and new relevant information. Valuable data helps in our constant decision-making process. The Poultry industry – globally integrated from the breeders to the slaughterhouses, passing by the hatcheries and farm – has therefore quickly adapt to this new environment, seeing the hidden value of the data.

In Ceva, we are collecting huge amounts of health data (serology data, broiler age, vaccination program...) thanks to our services, the GPS, and the hatchery C.H.I.C.K. program. Our customers are also collecting a lot of production parameters in order to follow the health and growth of their birds. Due the importance of combination of health and production parameters, in 2021, has been launched a Real World Evidence (RWE) project on top of the data activity already in place.

**RWE is a recent wording commonly used in human medicine in order to demonstrate the benefits of a product through the analysis of real world data (RWD).** Data in real life conditions, without control of the environment or some parameters, on chosen subjects. For us, it means analyses of field poultry data (vaccines or not involved). Even though, Ceva being an animal health company, the majority of our RWE analysis are focusing on the birds health

The objective of the RWE project is simple: enlarge the capability to work on poultry data, to do professional statistics for the Poultry Industry -using a statistical software called Python- thanks to key veterinarians located around the world. The data analyse skill, associated with the veterinarian knowledges, is making a true difference for the interpretation of the results, as well as for the solution to put in place.



#### A METHODOLOGY IN 3 MAIN STEPS HAS BEEN ESTABLISHED INTERNALLY :

#### 1 - Challenge

Analysis of the individual serology titers to answer to the following question « Is there an IB / IBD / ND challenge in my farms ? if yes, how many farms were concerned ? ». According to the lab historic, the country, the vaccination program and the kit used, a threshold is defined by our experts. Then, if at least 20% of the birds are above that threshold, we consider the flock has « challenged »

#### 2 - Performances

Analysis of the production parameters (slaughter age and weight, mortality percentage, feed conversion rate....). This analysis is done either per vaccination program, or following the previous classification « challenged vs non challenged »

#### 3 - Economics

Analysis of a disease impact. The statistical differences observed at the previous step are converted into money, in order to evaluate the cost of an IB / IBD / ND challenge. In a few years, already 200 RWE studies have been done worldwide, demonstrating the strong enthusiasm and willingness of the Poultry Industry to learn from its data, to improve the production and raise healthy well protected birds.

## 

Together with the clear benefits obtained in the hatchery and immune system, several trials have confirmed the superiority of TRANSMUNE® at field level. These are just a list of the clear economic benefits obtained throughout years of use of TRANSMUNE®. You will find below a sample of 12 field observations performed in different countries.

Based on our experience, the performance results obtained with a good application of a TRANSMUNE<sup>®</sup> vaccination program, compared to different vaccine program types, support clearly the application of TRANSMUNE<sup>®</sup> in the hatchery. The expected average improvement in performance corresponds to the following figures:





The return on investment has been calculated by assuming the following market prices: **Final body weight of 2kg**  $\bullet$  **FCR 1.6**  $\bullet$  **Feed price: 0.30**  $\in$ /kg  $\bullet$  **Live bird price: 0.80**  $\in$ /kg

By doing so, it was possible to calculate an additional profit related to improvements in the major production performance parameters.

Technical Parameters	Value/000 Birds	Value/100 M. Birds
0.01 FCR	6€/000 birds*	600 K€*
10 g. BW	3.2€/000 birds*	320 K€*
1% Mortality	11€/000 birds*	1,100 K€*

## TRANSMUNE<sup>®</sup> vs DW vaccines

France

## ) STUDY DESIGN

53 FLOCKS 1,590,000 DAY-OLD CHICKS, 2 GROUPS *GROUP1: 34 FLOCKS* (1,020,000 CHICKS) TRANSMUNE® SUBCUTANEOUSLY **GROUP 2: 19 FLOCKS** (570,000 CHICKS) DRINKING WATER VACCINATION SLAUGHTER AT 42 DAYS OF AGE

#### **RESULTS & CONCLUSIONS**

Vaccine	Feed conversion*	Slaughter weight (kg)	Mortality (%)	Average daily gain (g/day)*	EPEF*
TRANSMUNE®	1.77	2.600	2.01	63.15	329
Control Group	1.83	2.520	2.64	59.33	306

\*Statistic difference





Statistic amerenec





#### ECONOMIC EVALUATION

Based on the cost benefits calculation ( - 6 pts PCR, +80g of weight, +0.64% viability),

the extra revenues per 1,000 birds would be **+86€** 





## STUDY DESIGN

320 FLOCKS, 9,600,000 DAY-OLD CHICKS, 2 GROUPS **GROUP 1: 63 FLOCKS** (1,890,000 CHICKS) TRANSMUNE<sup>®</sup> SUBCUTANEOUSLY

**GROUP 2: 257 FLOCKS** (7,710,000 CHICKS) DRINKING WATER VACCINATION SLAUGHTER AT 36 DAYS OF AGE

#### RESULTS & CONCLUSIONS

Vaccine	Feed conversion*	Slaughter weight (kg)*	Mortality (%)*	Average daily gain (g/day)	EPEF*
TRANSMUNE®	1.65	2.070	1.33	58.47	341
Control Group	1.73	1.970	3.51	54.12	310











#### ECONOMIC EVALUATION

Based on the cost benefits calculation (-8 pts FCR, +100 g of weight, +2.18% viability),

the extra revenues per 1,000 birds would be +40€

## TRANSMUNE<sup>®</sup> vs DW vaccines

Malaysia

## STUDY DESIGN

78 FLOCKS, 2,320,000 DAY-OLD CHICKS, 2 GROUPS GROUP 1 : 64 FLOCKS (1,900,000 CHICKS) TRANSMUNE® SUBCUTANEOUSLY **GROUP 2 : 14 FLOCKS** (420,000 CHICKS) DRINKING WATER VACCINATION SLAUGHTER AGE: GROUP 1: 36.2 DOA GROUP 2 : 35.9 DOA

#### **RESULTS & CONCLUSIONS**

Vaccine	Feed conversion	Adjusted feed conversion	Slaughter weight (kg)	Mortality (%)*	Condem- nation (%)*	Antibiotic cost (RM/kg)*
TRANSMUNE®	1.54	1.54	2.100	6.14	0.61	0.22
Control Group	1.52	1.52	2.070	6.49	0.90	0.26

\*Statistic difference









#### ECONOMIC EVALUATION

Based on the cost benefits calculation (-0.35% mortality, -0.29% condemnations, lower medication),

the extra revenues per 1,000 birds would be +19,60€







## STUDY DESIGN

600,000 DAY-OLD CHICKS, 2 GROUPS (CONTEMPORANEOUS) **GROUP 1:** TRANSMUNE® SUBCUTANEOUSLY AT DAY 1

**GROUP 2:** INTERMEDIATE IBD IN DRINKING WATER AT 6 AND 15 DAYS OF AGE SLAUGHTER AT 45 DAYS OF AGE

#### **RESULTS & CONCLUSIONS**

Vaccine	Broilers	Days	Mortality (%)	Average Live Weight (Kg)	FCR	Efficiency Index
TRANSMUNE®	188.000	45	3.36	2.64	1.69	335
Intermediate IBD	388.000	45	4.89	2.68	1.77	320

2



#### **Performance Results**

Less condemnations due to *E. Coli* and other pathologies



Intermediate IBD



#### ECONOMIC EVALUATION

Based on the cost benefits calculations (mortality, body weight and FCR),

the extra revenues per 1,000 birds would be +48€

#### TRANSMUNE<sup>®</sup> vs DW vaccines

# Portugal

## STUDY DESIGN

**GROUP 1:** 4,868,205 BROILERS TRANSMUNE® SUBCUTANEOUSLY AT DAY 1

**GROUP 2:** 10,238,709 BROILERS INTERMEDIATE IBD IN DRINKING WATER AT 10 AND 15 DAYS OF AGE

## **RESULTS & CONCLUSIONS**



# The Efficiency Index was more homogeneous in the TRANSMUNE® group

#### **Efficiency Index**

#### ECONOMIC EVALUATION

Based on the cost benefits calculations (mortality, body weight and FCR),

the extra revenues per 1,000 birds would be +31€





## STUDY DESIGN

GROUP 1: **TRANSMUNE® SUBCUTANEOUSLY** AT DAY 1

**GROUP 2:** INTERMEDIATE IBD IN DRINKING WATER AT 10 AND 15 DAYS OF AGE 300,000 DAY-OLD CHICKS PER WEEK, 2 GROUPS, 4 FARMS EACH. ROSS 308 AND COBB 500 BREEDS

## **RESULTS & CONCLUSIONS**











#### ECONOMIC EVALUATION

Based on the cost benefits calculations (mortality, body weight and FCR),

the extra revenues per O birds would be +72€1,(

## TRANSMUNE<sup>®</sup> vs DW vaccines

India

۲

## STUDY DESIGN

**GROUP 1:** 386,000 BIRDS TRANSMUNE® SUBCUTANEOUSLY AT DAY 1 **GROUP 2:** 1,580,000 BIRDS INTERMEDIATE PLUS VACCINE STRAIN INTRAOCULAR VACCINATION AT 12 DAYS OF AGE

## **RESULTS & CONCLUSIONS**









Based on the cost benefits calculations (mortality, body weight and FCR),

the extra revenues per 1,000 birds would be +17€



# Indonesia

## STUDY DESIGN

- 42,000 DAY-OLD CHICKS 2 GROUPS
- **GROUP 1:** 21,000 BIRDS TRANSMUNE® SUBCUTANEOUSLY AT DAY 1

**GROUP 2:** 21,000 BIRDS INTERMEDIATE PLUS VACCINE STRAIN IN DRINKING WATER AT 12 DAYS OF AGE

## RESULTS & CONCLUSIONS







#### ECONOMIC EVALUATION

Based on the cost benefits calculations (mortality, and body weight),

the extra revenues per 1,000 birds would be **+36€** 

## TRANSMUNE<sup>®</sup> vs rHVT-IBD vaccines



## STUDY DESIGN

22 FLOCKS 660,000 DAY-OLD CHICKS, 2 GROUPS **GROUP 1: 17 FLOCKS** (510,000 CHICKS) TRANSMUNE® SUBCUTANEOUSLY AT DAY 1

**GROUP 2: 5 FLOCKS** (150,000 CHICKS) rHVT-IBD VACCINATION SLAUGHTER AT 47 DAYS OF AGE

## **RESULTS & CONCLUSIONS**

Vaccine	Feed conversion*	Adjusted feed conversion*	Slaughter weight (kg)	Mortality (%)	Average Daily gain	Condem- nation (%)*	Airsac- culatis (%)*	EPEF*
TRANSMUNE®	1.625	1.555	3.130	2.55	66.65	0.17	0.35	400
<b>Control Group</b>	1.692	1.621	3.136	3.4	66.01	0.37	1.47	380



Feed conversion





Condemnation rate and airsacculatis (%)

\*Statistic difference

TRANSMUNE®

#### +20 points EPEF



ECONOMIC EVALUATION

Based on the cost benefits calculation (-7 pts FCR, +0.85% viability, less condemnations),

the extra revenues per 1,000 birds would be +71€



## **RESULTS & CONCLUSIONS**

Vaccine	Slaughter weight (kg)*	Mortality (%)*	Feed conversion*	EPEF*
TRANSMUNE®	1.839	5.22	1.624	360
Control Group	1.705	7.57	1.717	295

\*Statistic difference



+2.35% viability

Mortality (%)

+9 points FCR



Improvement of EPEF





ECONOMIC EVALUATION

Based on the cost benefits calculation (-2.35% mortalituy, +134g of body weight, -9 pts FCR)

the extra revenues per 1,000 birds would be +90€

## TRANSMUNE® vs HVT IBD vaccines



## ) STUDY DESIGN

18 FLOCKS 950,000 BROILERS, 2 GROUPS GROUP 1: 11 FLOCKS (816,000 CHICKS) TRANSMUNE® SUBCUTANEOUSLY AT DAY 1

**GROUP 2: 7 FLOCKS** (134,000 CHICKS) rHVT IBD VACCINATION SLAUGHTER AT GROUP 1 : 43 DOA GROUP 2: 42 DOA

## **RESULTS & CONCLUSIONS**

Vaccine	Feed conversion*	Adjusted feed conversion*	Slaughter weight (kg)*	Mortality (%)	Average daily gain*	EPEF*
TRANSMUNE®	1.766	1.707	2.431	2.20	55.58	305
Control Group	1.922	1.849	2,180	3.77	51.90	274





\*Statistic difference

TRANSMUNE® HVT IBD group



#### ECONOMIC EVALUATION

Based on the cost benefits calculation (-7 pts FCR +0.85% viability, less condemnations),

the extra revenues per 1,000 birds would be +171€



50

## 

# Arabic Peninsula

## STUDY DESIGN

**GROUP 1:** COMPETITOR VECTOR IBD PRODUCT, SUBCUTANEOUSLY AT DAY 1  GROUP 2: TRANSMUNE<sup>®</sup>
SUBCUTANEOUSLY
AT DAY 1

## RESULTS & CONCLUSIONS





**SLAUGHTER** 

AT 30-32 DAYS

• 8 SAMPLES PER HOUSE

AT 21, 28 AND 35 DAYS

OF AGE (BLOOD, BURSA,

SPLEEN)

Protection against IBDV colonization

The rHVT-IBD group could not protect against IBDV colonization in the bursa of Fabricius in 71% of the bursas investigated. On the opposite, TRANSMUNE<sup>®</sup> could block colonization in 67% of the bursas in just 1 cycle of application.

Applying TRANSMUNE<sup>®</sup> for more than 1 cycle will increase the rate of reisolation of the Winterfield 2512 strain in the bursas. Having a unique quality control and balance of antigen-antibodies, the Winterfield 2512 strain is expected, after some cycles, to colonize the bursae and STOP the Gumboro cycle.



#### ECONOMIC EVALUATION

Based on the cost benefits calculations (mortality, body weight and FCR),

the extra revenues per 1,000 birds would be **+45€** 

# China

## ) STUDY DESIGN

12 FLOCKS, 360,000 BROILERS, 2 GROUPS **GROUP 1: 6 FLOCKS** (180,000CHICKS) TRANSMUNE® SUBCUTANEOUSLY

**GROUP 2: 6 FLOCKS** CONTROL GROUP (180,000 CHICKS) VP2 killed

#### SLAUGHTER AT 44. DAYS OF AGE

## RESULTS & CONCLUSIONS

Vaccine	Slaughter weight (kg)	Livability (%)*	Average daily gain (g/day)	Medication cos (RMB per broiler)*	EPEF
TRANSMUNE®	2.74	95.6	63.7	0.95	379
Control Group	2.82	92.6	62.7	1.24	368

\*Statistic difference





#### +11 points EPEF





#### ECONOMIC EVALUATION

Based on the cost benefits calculation +3% livability, -23% medication, +11pts EPEF),

the extra revenues per 1,000 birds would be +83,70€

#### TRANSMUNE<sup>®</sup> vs other Immune-complex vaccines



## STUDY DESIGN

18 FLOCKS 332,900 BROILERS, 2 GROUPS GROUP 1: 9 FLOCKS (1 900 000 CHICKS) TRANSMUNE® SUBCUTANEOUSLY AT DAY 1 GROUP 2: 9 FLOCKS (420 000 CHICKS) OTHER IMMUNE COMPLEX VACCINATION • SLAUGHTER AT 26 DAYS OF AGE

TRANSMUNE

### RESULTS & CONCLUSIONS

Vaccine	Slaughter weight (kg)*	Mortality (%)*	Feed conversion*	EPEF*
TRANSMUNE®	1.935	5.43	1.571	354
Control Group	1.385	13.27	1.779	240

\*Statistic difference



-20 points FCR 1.80 \_\_\_\_\_\_ 1.75 \_\_\_\_\_\_ 1.779 \_\_\_\_ 1.70 \_\_\_\_\_\_ 1.65 \_\_\_\_\_\_



#### ECONOMIC EVALUATION

1.574

1.60 \_

1.55

1.50

1.45 \_

Based on the cost benefits calculation ( -7.9% mortality, -20 pts feed conversion, +114 pts EPEF)

Feed conversion

the extra revenues per 1,000 birds would be +382€



#### TRANSMUNE<sup>®</sup> vs other Immune-complex vaccines

# Venezuela

## <sup>)</sup> STUDY DESIGN

2122 FLOCKS, 3,660,0000 BROILERS, 2 GROUPS GROUP 1: 61 FLOCKS (1,830,000 CHICKS) TRANSMUNE® SUBCUTANEOUSLY AT DAY 1

GROUP 2: 61 FLOCKS (41,830,000 CHICKS) OTHER IMMUNE-COMPLEX VACCINATION SLAUGHTER AGE: GROUP 1: 37 DOA GROUP 2: 39,5 DOA

## **RESULTS & CONCLUSIONS**

Vaccine	Feed conversion*	Adjusted feed conversion*	Slaughter weight (kg)	Mortality (%)*	Average daily gain (g/day)*	EPEF*
TRANSMUNE®	1.661	1.702	2.369	5.17	63.9	366
Control Group	1.74	1.81	2.368	6.97	59.98	322





\*Statistic difference



#### ECONOMIC EVALUATION

Based on the cost benefits calculation (-1.8% mortality, -11 pts food conversion, +44 pts EPEF)

the extra revenues per 1,000 birds would be +90€





## STUDY DESIGN

84 FLOCKS, 2,520,000 BROIILERS, 2 GROUPS GROUP 1: 12 FLOCKS (360,000 CHICKS) TRANSMUNE® SUBCUTANEOUSLY AT DAY 1

GROUP 2: 72 FLOCKS (2,1160,000 CHICKS) OTHER IMMUNE-COMPLEX VACCINATION SLAUGHTER AT
42 DAYS OF AGE

#### RESULTS & CONCLUSIONS

Vaccine	Slaughter weight (kg)	Mortality (%)*	AVERAGE DAILY GAIN
TRANSMUNE®	2.082	4.06	49.57
Control Group	2.064	6.89	49.14

\*Statistic difference







#### ECONOMIC EVALUATION

Based on the cost benefits calculation ( -2.83% mortality, +18g body weight),

the extra revenues per 1,000 birds would be +32€

#### TRANSMUNE<sup>®</sup> vs other Immune-complex vaccines

# Colombia

## STUDY DESIGN

2 GROUPS: TRANSMUNE® VS. IMMUNE-COMPLEX A (CONTEMPORANEOUS) VACCINATION SUBCUTANEOUSLY AT DAY 1

## **RESULTS & CONCLUSIONS**

Vaccine	BW (g)	Mortality (%)	Age of slaughter (days)	FCR	Efficiency Index
TRANSMUNE®	1.913	3.17	40.5	1.81	252.7
Immune-complex A	1.894	3.09	40.9	1.84	243.9







Immune complex A ----- Poly. (Immune complex A)



#### ECONOMIC EVALUATION:

Based on the cost benefits calculations (mortality, body weight and FCR),

the extra revenues per 1,000 birds would be +20€





## STUDY DESIGN

GROUP 1: 287,000 BIRDS TRANSMUNE® SUBCUTANEOUSLY AT DAY 1

**GROUP 2:** 358,000 BIRDS OTHER IMMUNE-COMPLEX VACCINE SUBCUTANEOUSLY AT DAY 1

## RESULTS & CONCLUSIONS







#### ECONOMIC EVALUATION

Based on the cost benefits calculations (mortality, body weight and FCR),

the extra revenues per 1,000 birds would be +59€

Immune-Complex A

Russia

## STUDY DESIGN

**GROUP 1:** 133,708 BIRDS TRANSMUNE® SUBCUTANEOUSLY AT DAY 1 **GROUP 2:** 159,597 BIRDS HOT LIVE VACCINE IN DRINKING WATER AT 16 DAYS OF AGE

## RESULTS & CONCLUSIONS





Hot live strain

## ECONOMIC EVALUATION

Based on the cost benefits calculations (mortality, body weight and FCR),

the extra revenues per 1,000 birds would be +1€



# Russia

## **STUDY DESIGN**

**GROUP 1:** 110,624 BIRDS TRANSMUNE® SUBCUTANEOUSLY AT DAY 1

GROUP 2: 164,723 BIRDS HOT LIVE VACCINE IN DRINKING WATER AT 9 AND 16 DAYS OF AGE

## RESULTS & CONCLUSIONS





ECONOMIC EVALUATION

Based on the cost benefits calculations (mortality, body weight and FCR),

the extra revenues per 1,000 birds would be +52€



# Summary of profitability

To summarize, advanced technology like the Egginject in-ovo equipment and new technology vaccines, like TRANSMUNE<sup>®</sup>, are becoming more popular among hatcheries, since they enable fast, safe and welfare friendly vaccination of chicken embryos. The time between hatch and delivery to the farms is reduced, and less handling is needed in the field due to extra vaccinations. This vaccination application needs specific high quality equipment, close support, maintenance and monitoring of correct vaccine application. It also needs specific vaccines which are able to overcome the presence of MDA, while inducing an active immunity. TRANSMUNE<sup>®</sup> is able to do this. At the same time, profitability is the lead driver for change in the industry nowadays.



TRANSMUNE<sup>®</sup> has demonstrated in several countries that it reduces disease pressure, profitability loss and condemnations, linked to clinical or subclinical IBD, to a value range of 41€/1,000 birds. An estimated amount of 13 billion broiler chickens were vaccinated with TRANSMUNE<sup>®</sup> in 2018, thus confirming the economic advantages of hatchery vaccination with TRANSMUNE<sup>®</sup>.



Technical Parameters	Value/000 Birds	Value/100 M. Birds	
0.01 FCR	6 €/000 birds*	600 K€*	
10 g. BW	3.20 €/000 birds*	320 K€*	
1% Mortality	11 €/000 birds*	1100 K€*	

Table 1. Summary of the economic results in the field cases previously described.

\* This value has been calculated from Ceva field data and might vary depending on IBD disease pressure and region

Disclaimer: Study results disclosed through the present document are intended to report the results that have been obtained in the specific conditions of performance of the Study and were known at the time of the Study's completion. Ceva does not make any warranty, expressed or implied, with respect to results herein disclosed and assume no liability for any party's use, or the results of such use, of any information contained in this document.

## 



IMPACT IN PERFORMANCE RESULTS

Country	Mortality (%)	BW (extra g./bird)	FCR (points)	Results (€/1000 birds)
France	-0.63	+80	-6	+86
Ireland	-2.18	+100	-6	+40
Malaysia	-0.35	+30	-2	+19.60
Brazil (1)	-1.56	-40	-8	+48
o Portugal	-1.1	+40	_	+31
Spain	+0.62	+140	_	+72
💌 India (1)	-0.25	+40	-3	+17
Indonesia	-1.5	+60	_	+36
Brazil (2)	-0.85	-6	-7	+71
Egypt (1)	-2.35	+134	-9	+90
Brazil (3)	-0.57	+251	-14	+171
Arabic Peninsula	_	+90	-3	+45
* China	-3	-80	_	+83.70
Egypt (2)	-7.9	+550	-20	+382
Venezuela	-1.8	+1	-11	+90
Brazil (4)	-2.83	+18	_	+32
Colombia	+0.08	+23	-3	+20
💽 India (2)	-1.32	+120	-1	+59
Russia (1)	_	+72	-2	+1
Russia (2)	_	+79	-5	+52

Table 2. Values used to evaluate the economic return of the field cases previously described: BW: 2Kg.; F.C.R.: 1.6; Feed price:  $0,3 \in /Kg$ . Live Bird Price:  $0.8 \in /Kg$ .; \*Additional profit.

# References

ROSENBERGER, J. K. and s. s. CLOUD, 1986. Isolation and characterization of variant infectious bursal disease viruses. Journal of American Veterinary Medicine Association 189, 357.

NUNOYA, T., Y. ÜTAKI, M. TAJIMA, M. HIRAGA and T. SAITO, 1992. Occurrence of acute infectious bursal disease with high mortality in Japan and pathogenicity of field isolates in SPF chickens. Avian Diseases 36, 597-609.

VAN DEN BERG, T. P., M. GONZE and G. MEULEMANS, 1991. Acute infectious bursal disease in poultry: isolation and characterization of a highly virulent strain. Avian Pathology 20, 133-143.

VAN DEN BERG, T. P. and G. MEULEMANS, 1991. Acute infectiousbursal disease in poultry: protection afforded by maternally derived antibodies and interference with live vaccination. Avian Pathology 20, 409-42.1

MCILROY, S.G., GOODALL, E.A., BRUCE, D.W., MCCRACKEN, R.M. & MCNULTY, M.S., 1992. The cost benefit of vaccinating broiler flocks against subclinical infectious bursal disease, Avian Pathology 21, 65-76.

SHANE S.M., LASHER H.N. & PAXTON K.W., 1994. Economic impact of infectious bursal disease. In Proc. First International Symposium on infectious bursal disease and chicken infectious anaemia (E. Kaleta, ed.), 21-24 June, Rauischholzhausen, Germany. World Veterinary Poultry Association, Giessen, 196-205.

FAWC, 2012. Report on farm animal welfare: health and disease.

AMINI K., ZACHART., POPOWICH S., *et al.* 2015. Association of increased rate of condemnation of broiler carcasses due to hepatic abnormalities with immunosuppressive diseases in the broiler chicken industry in Saskatchewan. Canadian Journal of Veterinary Research. 2015;79(4):261-267.

MORLA S., DEKA P., KUMAR S., 2016. Isolation of novel variants of infectious bursal disease virus from different outbreaks in Northeast India. Microbiol. Pathogenesis. 2016; 93: 131-136.

Ceva Phylaxia, 2017. Data on file.

Ceva Santé Animale, 2018. IBD and GPS field experiences, data on file.

## TRANSMUNE IBD



**STOP** 

THE GUMBORO CYCLE

of peace of mind: stops the Gumboro cycle

of consistency: flocks with uniform results

**of trust:** strong partnership between producers & Ceva year after year

## TRANSMUNE IBD

## THE GUMBORO CYCLE

**STOP** 

## Transmune<sup>®</sup> stops reinfection and protects against all IBD virus strains



Ceva Santé Animale S.A. 10, av. de la Ballastière - 33500 LIBOURNE - France www.ceva.com / www.transmune.com