From: Marty, Gary D AGRI:EX
To: "Marian McLoughlin"

Subject: Question about whether clinical signs are used for the diagnosis of HSMI

Date: Friday, February 16, 2018 10:10:08 AM

Hi Marian,

We met briefly during a continuing education seminar that you gave in Campbell River, BC, on 19 February 2009. \$.22 . \$.14

s.14

I want to follow up the e-mail that I sent to James Hoare last month regarding the diagnosis of HSMI.

A recent story by an online news source correctly states that I rely on your 2007 review paper for the diagnosis of HSMI (McLoughlin, M.F. and D.A. Graham. Alphavirus infections in salmonids: a review. J. Fish Dis. 30(9):511-531.) [emphasis mine]: "It is important to make a sound diagnosis based on a combination of clinical signs, gross [pathology] and histopathology..."

I interpret this quote to mean that you recommend the use of clinical signs for the diagnosis of PD, CMS, and HSMI (i.e., not just PD).

The online story includes a different interpretation of the quote from another scientist: "'It's evident that, in the sentence reported by Dr. Marty, the authors clearly refer to PD,' he said, not HSMI."

Source: <a href="https://thetyee.ca/News/2018/01/10/DFO-Deadly-Farmed-Salmon-Disease-Downplay/">https://thetyee.ca/News/2018/01/10/DFO-Deadly-Farmed-Salmon-Disease-Downplay/</a> Here is the relevant paragraph from McLoughlin and Graham (2007) (emphasis mine):

Improved diagnostic methods including the development of IHC and molecular in situ techniques for the detection of antigen/genetic material in fixed tissues are essential to fully understand the pathogenesis of PD and SD, and to differentiate between SAV diseases and similar pathologies such as **HSMI** and CMS. The use of sero-epidemiology and longitudinal studies on farms with a history of HSMI and/or CMS could also rapidly advance our knowledge of these conditions and resolve the controversy over their aetiology. While RT-PCR is a useful screening tool, it should not be used as a sole diagnostic indicator. It is important to make a sound diagnosis based on a combination of clinical signs, gross and histopathology, serology, virus isolation plus molecular and/or IHC techniques.

**Request:** I would appreciate hearing your thoughts about the value of clinical signs for the diagnosis of PD, CMS, and HSMI (particularly in regions where the diseases have not been previously diagnosed).

Best regards,

Gary

-----

Gary D. Marty, D.V.M., Ph.D., Diplomate, A.C.V.P.

Senior Fish Pathologist Animal Health Centre Ministry of Agriculture 1767 Angus Campbell Rd. Abbotsford, BC, V3G 2M3 604-556-3123 From: Marian McLoughlin
To: Marty, Gary D AGRI:EX

Subject: RE: Question about whether clinical signs are used for the diagnosis of HSMI

Date: Monday, February 19, 2018 2:26:56 AM

Hi Gary, The point we were making here is that you cannot rely on single observation's, should they be clinical signs, gross lesions, histological lesions or laboratory tests to make a safe diagnosis of any disease including PD, HSMI, or CMS. You need a combination of observations, and results to make a confirmed diagnosis, e.g. typical histopathological lesions, and PCR, Virology, immunohistochemistry or serology . E.g. PCR tells you the fish has been exposed to an infectious agent, it does not tell you if the infectious agent has caused any harm, i.e. lesions. Indeed PCR can detect fragments of the infectious agent which is no longer viable within the animal. Clinical signs in fish are notoriously non-specific as on many occasions sick fish have similar clinical signs such as non-feeding or lethargy as the result of a variety of infections, bacterial, viral, parasitic, so clinical signs will usually only indicate sick fish and not a specific disease. With experience and intimate knowledge of an individual site history many farm operatives and veterinarians will observe clinical signs that suggest PD or CMS, (HSMI clinical signs are much less specific and apparently healthy fish can have lesions and positive PCR) Mid stage PD where the pancreas has recovered may have heart and skeletal muscle lesions very similar to HSMI and these fish may be positive for PDV PCR and Serology and PRV PCR which can make a specific diagnosis in a single fish difficult but extending diagnostic methods to the population and reviewing feeding and mortality records all contribute to making a safe diagnosis. Even with an single uncomplicated infection fish may respond in different ways, i.e. severity of lesions. We found that certain strains of Atlantic salmon were more susceptible to PD virus than others due to differing resistance genetics. So long story short your interpretation of the 2007 paper is correct.

Regards Marian

From: Marty, Gary D AGRI:EX [mailto:Gary.Marty@gov.bc.ca]

**Sent:** 16 February 2018 18:10 **To:** Marian McLoughlin

Subject: Question about whether clinical signs are used for the diagnosis of HSMI

Hi Marian,

We met briefly during a continuing education seminar that you gave in Campbell River, BC, on 19 February 2009. s.22 .s.14

s.14

I want to follow up the e-mail that I sent to James Hoare last month regarding the diagnosis of HSMI.

A recent story by an online news source correctly states that I rely on your 2007 review paper for the diagnosis of HSMI (McLoughlin, M.F. and D.A. Graham. Alphavirus infections in salmonids: a review. J. Fish Dis. 30(9):511-531.) [emphasis mine]: "It is important to make a sound diagnosis based on a combination of clinical signs, gross [pathology] and histopathology..."

I interpret this quote to mean that you recommend the use of clinical signs for the diagnosis of PD, CMS, and HSMI (i.e., not just PD).

The online story includes a different interpretation of the quote from another scientist: "'It's evident that, in the sentence reported by Dr. Marty, the authors clearly refer to PD,' he said, not HSMI."

Here is the relevant paragraph from McLoughlin and Graham (2007) (emphasis mine): Improved diagnostic methods including the development of IHC and molecular in situ techniques for the detection of antigen/genetic material in fixed tissues are essential to fully understand the pathogenesis of PD and SD, and to differentiate between SAV diseases and similar pathologies such as **HSMI** and CMS. The use of sero-epidemiology and longitudinal studies on

Source: https://thetvee.ca/News/2018/01/10/DFO-Deadly-Farmed-Salmon-Disease-Downplay/

farms with a history of **HSMI** and/or CMS could also rapidly advance our knowledge of these

conditions and resolve the controversy over their

aetiology. While RT-PCR is a useful screening

tool, it should not be used as a sole diagnostic

indicator. It is important to make a sound

diagnosis based on a combination of clinical signs,

gross and histopathology, serology, virus isolation

plus molecular and/or IHC techniques.

**Request:** I would appreciate hearing your thoughts about the value of clinical signs for the diagnosis of PD, CMS, and HSMI (particularly in regions where the diseases have not been previously diagnosed).

Best regards,

Gary

\_\_\_\_\_

Gary D. Marty, D.V.M., Ph.D., Diplomate, A.C.V.P. Senior Fish Pathologist Animal Health Centre Ministry of Agriculture 1767 Angus Campbell Rd. Abbotsford, BC, V3G 2M3 604-556-3123

#### Disclaimer

The information contained in this communication from the sender is confidential. It is intended solely for use by the recipient and others authorized to receive it. If you are not the recipient, you are hereby notified that any disclosure, copying, distribution or taking action in relation of the contents of this information is strictly prohibited and may be unlawful.

This email has been scanned for viruses and malware, and may have been automatically archived by Mimecast Ltd, an innovator in Software as a Service (SaaS) for business. Providing a safer and more useful place for your human generated data. Specializing in; Security, archiving and compliance. To find out more <u>Click Here</u>.

From: Marty, Gary D AGRI:EX
To: "Marian McLoughlin"

Subject: RE: Question about whether clinical signs are used for the diagnosis of HSMI

Date: Monday, February 19, 2018 9:47:03 AM

Hi Marian,

Thank you for the detailed response.

## REQUEST - May I have your permission for to forward your summary to other people?

Some people have expressed concerns about my citation of McLoughlin and Graham (2007) as justification for considering clinical signs as important for the first diagnosis of HSMI in BC. In contrast, I see this as a seminal paper that provides that basis for the differential diagnosis of PD, CMS, and HSMI.

Best regards,

## Gary

From: Marian McLoughlin [mailto:marian.mcloughlin@fishvetgroup.com]

Sent: Monday, February 19, 2018 2:27 AM

To: Marty, Gary D AGRI:EX

Subject: RE: Question about whether clinical signs are used for the diagnosis of HSMI Hi Gary, The point we were making here is that you cannot rely on single observation's, should they be clinical signs, gross lesions, histological lesions or laboratory tests to make a safe diagnosis of any disease including PD, HSMI, or CMS. You need a combination of observations, and results to make a confirmed diagnosis, e.g. typical histopathological lesions, and PCR, Virology, immunohistochemistry or serology . E.g. PCR tells you the fish has been exposed to an infectious agent, it does not tell you if the infectious agent has caused any harm, i.e. lesions. Indeed PCR can detect fragments of the infectious agent which is no longer viable within the animal. Clinical signs in fish are notoriously non-specific as on many occasions sick fish have similar clinical signs such as non-feeding or lethargy as the result of a variety of infections, bacterial, viral, parasitic, so clinical signs will usually only indicate sick fish and not a specific disease. With experience and intimate knowledge of an individual site history many farm operatives and veterinarians will observe clinical signs that suggest PD or CMS, (HSMI clinical signs are much less specific and apparently healthy fish can have lesions and positive PCR) Mid stage PD where the pancreas has recovered may have heart and skeletal muscle lesions very similar to HSMI and these fish may be positive for PDV PCR and Serology and PRV PCR which can make a specific diagnosis in a single fish difficult but extending diagnostic methods to the population and reviewing feeding and mortality records all contribute to making a safe diagnosis. Even with an single uncomplicated infection fish may respond in different ways, i.e. severity of lesions. We found that certain strains of Atlantic salmon were more susceptible to PD virus than others due to differing resistance genetics. So long story short your interpretation of the 2007 paper is correct.

Regards Marian

From: Marty, Gary D AGRI:EX [mailto:Gary.Marty@gov.bc.ca]

**Sent:** 16 February 2018 18:10

**To:** Marian McLoughlin <marian.mcloughlin@fishvetgroup.com> **Subject:** Question about whether clinical signs are used for the diagnosis of HSMI Hi Marian,

We met briefly during a continuing education seminar that you gave in Campbell River, BC, on 19 February 2009. s.22 . s.14 s.14

I want to follow up the e-mail that I sent to James Hoare last month regarding the diagnosis of HSMI.

A recent story by an online news source correctly states that I rely on your 2007 review paper for the diagnosis of HSMI (McLoughlin, M.F. and D.A. Graham. Alphavirus infections in salmonids: a review. J. Fish Dis. 30(9):511-531.) [emphasis mine]: "It is important to make a sound diagnosis based on a combination of **clinical signs**, gross [pathology] and histopathology..."

I interpret this quote to mean that you recommend the use of clinical signs for the diagnosis of PD, CMS, and HSMI (i.e., not just PD).

The online story includes a different interpretation of the quote from another scientist: "'It's evident that, in the sentence reported by Dr. Marty, the authors clearly refer to PD,' he said, not HSMI."

Source: https://thetyee.ca/News/2018/01/10/DFO-Deadly-Farmed-Salmon-Disease-Downplay/ Here is the relevant paragraph from McLoughlin and Graham (2007) (emphasis mine): Improved diagnostic methods including the development of IHC and molecular in situ techniques for the detection of antigen/genetic material in fixed tissues are essential to fully understand the pathogenesis of PD and SD, and to differentiate between SAV diseases and similar pathologies such as **HSMI** and CMS. The use of sero-epidemiology and longitudinal studies on farms with a history of **HSMI** and/or CMS could also rapidly advance our knowledge of these conditions and resolve the controversy over their aetiology. While RT-PCR is a useful screening tool, it should not be used as a sole diagnostic indicator. It is important to make a sound diagnosis based on a combination of clinical signs, gross and histopathology, serology, virus isolation

**Request:** I would appreciate hearing your thoughts about the value of clinical signs for the diagnosis of PD, CMS, and HSMI (particularly in regions where the diseases have not been previously diagnosed).

Best regards, Gary

, -----

plus molecular and/or IHC techniques.

Gary D. Marty, D.V.M., Ph.D., Diplomate, A.C.V.P. Senior Fish Pathologist Animal Health Centre Ministry of Agriculture 1767 Angus Campbell Rd. Abbotsford, BC, V3G 2M3 604-556-3123

## Disclaimer

The information contained in this communication from the sender is confidential. It is intended solely for use by the recipient and others authorized to receive it. If you are not the recipient, you are hereby notified that any disclosure, copying, distribution or taking action in relation of the contents of this information is strictly prohibited and may be unlawful.

This email has been scanned for viruses and malware, and may have been automatically archived by Mimecast Ltd, an innovator in Software as a Service (SaaS) for business. Providing a safer and more useful place for your human generated data. Specializing in; Security, archiving and compliance. To find out more <u>Click Here</u>.

From: Marian McLoughlin
To: Marty, Gary D AGRI:EX

Subject: Re: Question about whether clinical signs are used for the diagnosis of HSMI

Date: Tuesday, February 20, 2018 12:58:03 AM

## Hi Gary,

That's is fine. That paragraph was to address the necessary methodology to make a differential diagnosis.

In the Ferguson HSMI paper in Scotland these fish had just been through a PD infection/outbreak and without the use of immunhistochemistry it is not possible to differentiate the lesions described by his paper and make a firm diagnosis of HSMI hence the ambiguity of the title.

Currently HSMI in Scotland tends to be a sub clinical disease with mild heart and skeletal lesions and tends to occur in first 6-9 months post sea transfer.

Marian

Marian McLoughlin Veterinary Surgeon & Fish Pathologist FVG Ltd, UK

On 19 Feb 2018, at 17:47, Marty, Gary D AGRI:EX < Gary.Marty@gov.bc.ca> wrote:

Hi Marian,

Thank you for the detailed response.

# REQUEST - May I have your permission for to forward your summary to other people?

Some people have expressed concerns about my citation of McLoughlin and Graham (2007) as justification for considering clinical signs as important for the first diagnosis of HSMI in BC. In contrast, I see this as a seminal paper that provides that basis for the differential diagnosis of PD, CMS, and HSMI.

Best regards,

Gary

From: Marian McLoughlin [mailto:marian.mcloughlin@fishvetgroup.com]

Sent: Monday, February 19, 2018 2:27 AM

To: Marty, Gary D AGRI:EX

Subject: RE: Question about whether clinical signs are used for the diagnosis of HSMI Hi Gary, The point we were making here is that you cannot rely on single observation's, should they be clinical signs, gross lesions, histological lesions or laboratory tests to make a safe diagnosis of any disease including PD, HSMI, or CMS. You need a combination of observations, and results to make a confirmed diagnosis, e.g. typical histopathological lesions, and PCR, Virology, immunohistochemistry or serology . E.g. PCR tells you the fish has been exposed to an infectious agent, it does not tell you if the infectious agent has caused any harm, i.e. lesions. Indeed PCR can

detect fragments of the infectious agent which is no longer viable within the animal. Clinical signs in fish are notoriously non-specific as on many occasions sick fish have similar clinical signs such as non-feeding or lethargy as the result of a variety of infections, bacterial, viral, parasitic, so clinical signs will usually only indicate sick fish and not a specific disease. With experience and intimate knowledge of an individual site history many farm operatives and veterinarians will observe clinical signs that suggest PD or CMS, (HSMI clinical signs are much less specific and apparently healthy fish can have lesions and positive PCR) Mid stage PD where the pancreas has recovered may have heart and skeletal muscle lesions very similar to HSMI and these fish may be positive for PDV PCR and Serology and PRV PCR which can make a specific diagnosis in a single fish difficult but extending diagnostic methods to the population and reviewing feeding and mortality records all contribute to making a safe diagnosis. Even with an single uncomplicated infection fish may respond in different ways, i.e. severity of lesions. We found that certain strains of Atlantic salmon were more susceptible to PD virus than others due to differing resistance genetics.

So long story short your interpretation of the 2007 paper is correct.

Regards

Marian

From: Marty, Gary D AGRI:EX [mailto:Gary.Marty@gov.bc.ca]

**Sent:** 16 February 2018 18:10

To: Marian McLoughlin < marian.mcloughlin@fishvetgroup.com >

**Subject:** Question about whether clinical signs are used for the diagnosis of HSMI Hi Marian.

We met briefly during a continuing education seminar that you gave in Campbell River, BC, on 19 February 2009. s.22 . s.14

I want to follow up the e-mail that I sent to James Hoare last month regarding the diagnosis of HSMI.

A recent story by an online news source correctly states that I rely on your 2007 review paper for the diagnosis of HSMI (McLoughlin, M.F. and D.A. Graham. Alphavirus infections in salmonids: a review. J. Fish Dis. 30(9):511-531.) [emphasis mine]: "It is important to make a sound diagnosis based on a combination of clinical signs, gross [pathology] and histopathology..."

I interpret this quote to mean that you recommend the use of clinical signs for the diagnosis of PD, CMS, and HSMI (i.e., not just PD).

The online story includes a different interpretation of the quote from another scientist: "'It's evident that, in the sentence reported by Dr. Marty, the authors clearly refer to PD,' he said, not HSMI."

Source: <a href="https://thetyee.ca/News/2018/01/10/DFO-Deadly-Farmed-Salmon-Disease-Downplay/">https://thetyee.ca/News/2018/01/10/DFO-Deadly-Farmed-Salmon-Disease-Downplay/</a>

Here is the relevant paragraph from McLoughlin and Graham (2007) (emphasis mine): Improved diagnostic methods including the development of IHC and molecular in situ techniques for the detection of antigen/genetic

material in fixed tissues are essential to fully understand the pathogenesis of PD and SD, and to differentiate between SAV diseases and similar pathologies such as **HSMI** and CMS. The use of sero-epidemiology and longitudinal studies on farms with a history of **HSMI** and/or CMS could also rapidly advance our knowledge of these conditions and resolve the controversy over their aetiology. While RT-PCR is a useful screening tool, it should not be used as a sole diagnostic indicator. It is important to make a sound diagnosis based on a combination of clinical signs, gross and histopathology, serology, virus isolation plus molecular and/or IHC techniques.

**Request:** I would appreciate hearing your thoughts about the value of clinical signs for the diagnosis of PD, CMS, and HSMI (particularly in regions where the diseases have not been previously diagnosed).

Best regards,

Gary

\_\_\_\_\_

Gary D. Marty, D.V.M., Ph.D., Diplomate, A.C.V.P.
Senior Fish Pathologist
Animal Health Centre
Ministry of Agriculture
1767 Angus Campbell Rd.
Abbotsford, BC, V3G 2M3
604-556-3123

## Disclaimer

The information contained in this communication from the sender is confidential. It is intended solely for use by the recipient and others authorized to receive it. If you are not the recipient, you are hereby notified that any disclosure, copying, distribution or taking action in relation of the contents of this information is strictly prohibited and may be unlawful.

This email has been scanned for viruses and malware, and may have been automatically archived by **Mimecast Ltd**, an innovator in Software as a Service (SaaS) for business. Providing a **safer** and **more useful** place for your human generated data. Specializing in; Security, archiving and compliance. To find out more <u>Click Here</u>.

#### Disclaimer

The information contained in this communication from the sender is confidential. It is intended solely for use by the recipient and others authorized to receive it. If you are not the recipient, you are hereby notified that any disclosure, copying, distribution or taking action in relation of the contents of this information is strictly prohibited and may be unlawful.

This email has been scanned for viruses and malware, and may have been automatically archived by Mimecast Ltd, an innovator in Software as a Service (SaaS) for business. Providing a safer and more useful place for your human generated data. Specializing in; Security, archiving and compliance. To find out more <u>Click Here</u>.