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3

4 Review paper

5 **Passive immunisation, an old idea revisited: Basic principles and**
6 **application to modern animal production systems**

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12

13 **Abstract**

14 Immunisation by administration of antibodies (immunoglobulins) has been known for
15 more than one hundred years as a very efficient means of obtaining immediate, short-
16 lived protection against infection and/or against the disease-causing effects of toxins
17 from microbial pathogens and from other sources. Thus, due to its rapid action, passive
18 immunisation is often used to treat disease caused by infection and/or toxin exposure.
19 However immunoglobulins may also be administered prior to exposure to infection
20 and/or toxin, although they will not provide long-lasting protection as is seen with active

21 immunisation (vaccination) in which an immunological memory is established by
22 controlled exposure of the host to the pathogen in question. With multi-factorial
23 infectious diseases in production animals, especially those that have proven hard to
24 control by vaccination, the potential of passive immunisation remains big. This review
25 highlights a number of examples on the use of passive immunisation for the control of
26 infectious disease in the modern production of a range of animals, including pigs, cattle,
27 sheep, goat, poultry and fish. Special emphasis is given on the enablement of passive
28 immunisation strategies in these production systems through low cost and ease of use
29 as well as on the sources, composition and purity of immunoglobulin preparations used
30 and their benefits as compared to current measures, including vaccination (also
31 comprising maternal vaccination), antibiotics and feed additives such as spray-dried
32 plasma. It is concluded that provided highly efficient, relatively low-price
33 immunoglobulin products are available, passive immunisation has a clear role in the
34 modern animal production sector as a means of controlling infectious diseases,
35 importantly with a very low risk of causing development of bacterial resistance, thus
36 constituting a real and widely applicable alternative to antibiotics.

37

38 **Abbreviations**

39 ETEC, enterotoxigenic Escherichia coli; EPEC, enteropathogenic Escherichia coli; FMD,
40 foot and mouth disease; FPT, failure of passive transfer; IVIG, intravenous
41 immunoglobulin; PCV2, porcine circovirus type 2; PEDV, porcine epidemic diarrhoea
42 virus; PWD, post-weaning diarrhoea; SDP, spray-dried plasma

43 **Keywords**

44 Passive immunisation; Maternal immunity; Lactogenic immunity; Immunoglobulins;
45 Production animals; Agammaglobulinemic; Gastro intestinal tract; Postweaning
46 diarrhoea; Failure of passive transfer; Colostrum; enterotoxigenic Escherichia coli;
47 Porcine circo virus type 2; Spray-dried plasma

48 **1. Introduction**

49 Passive immunisation, i.e. the administration of antibodies (immunoglobulins) in order
50 to protect against infection and/or disease was first demonstrated experimentally more
51 than 100 years ago by, among others Albert Calmette who protected rabbits against a
52 lethal dose of cobra venom by giving antibodies in the form of antiserum parenterally
53 prior to or within one hour of venom injection (Calmette, 1896). Since its discovery the
54 principle of passive immunisation has been used extensively for treating and preventing
55 diseases in animals and humans (Baxter, 2007, Eibl, 2008 and Hsu and Safdar, 2011),
56 supplementing active immunisation, i.e. vaccination. In contrast to vaccination,
57 administration of immunoglobulin establishes instant immunity and provides short term
58 protection with no induction of immunological memory. For most applications it works
59 across species, i.e. the species origin of the immunoglobulins is less important. Also, in
60 contrast to active immunisation, existing antibodies (e.g. maternally derived) do not
61 interfere with passive immunity provided by administration of immunoglobulins. The
62 main drawbacks of passive immunisation include the risk of adverse reactions to the
63 administered immunoglobulins, especially if given repeatedly and if given as a non-
64 purified preparation.

65 In animal production systems both active and passive immunisation may be considered
66 alternatives to the use of antibiotics, as none of these normally lead to the development
67 of antibiotics resistance problems or to microbial resistance generally; the exception

68 being creation of escape mutants of viruses with high mutation rates. Thus in the
69 present era of increasing problems with antibiotics resistance development (see below),
70 immunisation methods are becoming attractive for wider application to the treatment
71 and prevention of infectious diseases in production animals. However, a main
72 prerequisite for this use is their cost-effectiveness compared to antibiotics which are
73 presently used very extensively as inexpensive and highly efficient means for reducing
74 animal morbidity and mortality, boosting food conversion, animal welfare and growth
75 (De Briyne et al., 2014 and Garcia-Migura et al., 2014). The possible role of the wide use
76 of antibiotics in the surge of microbial antibiotics resistance experienced during the last
77 few decades is discussed in (Barton, 2000, Bester and Essack, 2012, Garcia et al., 2011,
78 Hong et al., 2007 and Mendez Arancibia et al., 2009). The situation threatens to become
79 a major problem for treating infectious diseases in humans (Barton, 2000 and
80 Fairbrother et al., 2005) and, generally, increased human mortality associated with
81 antibiotics resistant bacteria has been predicted (CDC, 2013, de Kraker et al., 2011,
82 ECDC/EMA, 2009 and WHO, 2012).

83

84 Enteric infections are often encountered in animal production and constitute the main
85 target for antibiotics intervention; this group of infections constitute a specific challenge
86 for traditional active immunisation methods as efficient mucosal immunity is generally
87 not easily achieved by vaccination (Rhee et al., 2012), and as vaccines against enteric
88 infections often need to be directed against a broad spectrum of bacterial and possibly
89 also viral pathogens in order to provide complete protection against disease (Qadri et
90 al., 2013). However, as discussed extensively below, passive immunisation in the form of
91 orally administered immunoglobulins represents an easily applied and affordable

92 solution for immediate treatment of and short term protection against enteral
93 infections, having the potential for being a real alternative to the use of antibiotics in the
94 animal production, especially for intervention at specific time periods in the production
95 in which animals are particularly exposed to enteric infectious disease such as at birth
96 and at weaning. In addition, passive immunisation can be and are currently used for
97 other types of infectious diseases in production animals using a range of different
98 administration routes (see below).

99

100 **2. Natural and passive immunity: maternal antibodies and lactogenic immunity**

101 2.1. Natural passive immunity

102 Passive immunisation is widely used in Nature to protect offspring against disease at
103 birth and during lactation (mammals) or in ovo (birds and fish). This is achieved by
104 transfer of immunoglobulins from mother to progeny, in some species transported by
105 blood through the placenta or yolk sack at the foetal stage and during lactation in
106 mammals by the oral route through ingestion of colostrum and/or milk (oro-gastric or
107 lactogenic immunity) (Hurley and Theil, 2011 and Palmeira et al., 2012).

108 Evolutionarily, transfer of maternal immunoglobulins to offspring can be traced as far
109 back as 450 million years ago, being found in primitive fish like the nurse shark (Haines
110 et al., 2005). In some mammals, including primates and rabbits, the foetus obtains
111 immunoglobulin (Ig) G over the placenta (Hurley and Theil, 2011 and Palmeira et al.,
112 2012) and the new-born is thus born with circulating mammalian IgG, persisting in the
113 systemic circulation for some months after birth. The half-life of circulatory IgG in man is
114 around 3 weeks (see below, Table 1), thus it has been observed that maternal antibodies

115 are detectable in children 2–3 months after birth as seen in a study on circulating
116 maternal anti-*Neisseria meningitidis* IgG (Shahid et al., 2002). This is supplemented
117 during lactation by the intake of maternal IgA-type immunoglobulin through the milk
118 building up local immunity in the gastrointestinal tract (Malek, 2013). In other mammals
119 such as pigs and ruminants, placental immunoglobulin transfer does not take place and
120 consequently the neonate is born agammaglobulinemic (without immunoglobulin),
121 having neither received maternal immunoglobulin nor initiated their own production of
122 immunoglobulins. Instead, these species are born with an ‘open gut’ allowing Fc-
123 receptor-mediated immunoglobulin transfer from the gut to the circulation for the first
124 approximately 24 h after birth assuring the very quick establishment of the necessary
125 circulating levels of maternal immunoglobulins through ingestion of colostrum which in
126 these species contains high concentrations of IgG (Cervenak and Kacskovics, 2009).
127 Notably in pigs, colostral IgG concentrations decrease by 80% within 24 h of parturition
128 (Foisnet et al., 2010). A variation of this is seen in rodents and some other species,
129 including mink, where the neonate is born with a certain level of circulating maternal
130 immunoglobulins and has its gut open for transfer of immunoglobulin from the milk for
131 2–3 weeks postnatally (Brambell, 1966 and Kim et al., 2009). In chickens, the pre-
132 hatching chick receives maternal immunoglobulin through the yolk sac of the egg and
133 therefore is ‘born’ with maternal immunoglobulin at hatching (Kowalczyk et al., 1985).

134 Once maternal circulatory IgG is no longer replenished, i.e. after parturition and gut
135 closure the half-life of IgG is around 2–3 weeks in larger mammals (Table 1). In small
136 mammals such as mice the half-life of IgG in the circulation is only a few days which is
137 also the case for immunoglobulin Y (IgY) in birds, and tetrameric IgM in fish (Table 1).
138 Other circulatory immunoglobulins, such IgA, IgD, IgE, and IgM have much shorter half-

139 lives than IgG in humans (Vidarsson et al., 2014), pigs (Curtis and Bourne, 1973) and
140 mice (Fahey and Sell, 1965 and Hirano et al., 1983).

141 Immunoglobulins of human milk and colostrum are largely dimeric IgA (Hurley and Theil,
142 2011) produced by the mucosal lymphoid tissue of the breastfeeding mother
143 (Brandtzaeg, 2010) and, as they are not taken up by the intestine (Brandtzaeg, 2010),
144 provide oro-gastric protection only, whereas colostrum from lactating cows and pigs
145 contains a very high content of IgG originating from stimulated B cells/plasma cells of
146 the dam's blood (Larson et al., 1980 and Quigley, 2002) destined for the circulation of
147 the offspring by intestinal uptake perinatally as detailed above.

148 Colostrum also contains leukocytes and antimicrobial proteins (such as Complement C3,
149 lactoferrin, lactoperoxidase, and lysozyme) (Hernandez-Castellano et al., 2015 and
150 Smolenski et al., 2007). Colostral leukocytes are believed to participate in oro-gastric
151 protection together with maternal immunoglobulins (Goldman, 1977 and Morgan et al.,
152 1984), and may enter circulation by intestinal absorption promoting neonatal cellular
153 immunity (Liebler-Tenorio et al., 2002, Salmon et al., 2009 and Tuboly and Bernath,
154 2002).

155 Thus, the principle of passive immunisation by transfer of immunoglobulin is well-known
156 in Nature, both for providing oro-gastric immunity against pathogens during the suckling
157 period (lactogenic immunity based on locally residing immunoglobulins from mother's
158 milk and colostrum), and for providing systemic immunity either by foetal transfer
159 (primates) or by perinatal transfer from the colostrum (pigs, ruminants) and milk
160 (rodents and mink), boosting circulating (IgG-like) immunoglobulin levels before onset of
161 the offspring's own immunoglobulin production.

162

163 2.2. Maternal immunisation to increase off-spring passive immunity

164 The natural transfer of maternal immunity has to some extent been exploited to
165 passively immunize offspring by maternal vaccination. For example, prevention of
166 rotavirus infection, which has a great economic impact in husbandry, especially in cattle-
167 and hog production (Saif and Fernandez, 1996), can be obtained by vaccination of
168 lactating cows against rotavirus resulting in subsequent passive immunity-mediated
169 protection in calves receiving colostrum from the vaccinated cows (Le Rousic et al.,
170 2000, Parreno et al., 2004, Saif and Fernandez, 1996 and Tsunemitsu et al., 1989).
171 Similar observations on lactogenic immunity against rotavirus have been made in pigs
172 (Fu et al., 1990). Likewise, neonate offspring from cows vaccinated with an extract of
173 ETEC (enterotoxigenic *Escherichia coli*) O101:K99 were protected against enteral
174 colibacilliosis (otherwise causing fatal diarrhoea in calves) (Nagy, 1980), and moreover
175 protection against *Salmonella Typhimurium* was obtained by vaccinating dams with
176 formalin-fixed *Salmonella Typhimurium* (Jones et al., 1988) after experimental
177 challenge. Furthermore, a combined vaccination of pregnant cows against *E. coli* and
178 rotavirus is an efficient means of protecting against calf diarrhoea (Combs et al., 1993
179 and Snodgrass et al., 1982). Lactogenic immunity against larval cestodes and
180 metacestodes has also been reported (Larsh, 1942 and Lloyd and Soulsby, 1976). For
181 lactogenic immunity to be efficient, it was show that the vaccine had to be administered
182 to the dams at least two weeks before parturition to allow enough time for adequate
183 antibody titres to develop (Haggard et al., 1982). Oro-gastric immunity has been
184 demonstrated in piglets provided with milk from immuno-competent lactating sows as
185 seen by a decrease in faecal shedding of haemolytic *E. coli* by suckling piglets whereas
186 milk from non-immune sources did not reduce shedding (Deprez et al., 1986). Passive
187 immunisation of piglets by immunisation of the pregnant sow a few weeks before

188 parturition has also been demonstrated in a porcine epidemic diarrhoea virus (PEDV)
189 infection model; intramuscular injection of the sow with live attenuated PEDV 2–4
190 weeks before farrowing conferred significant protection to the suckling piglets (Kweon
191 et al., 1999).

192 One important point to bear in mind is that maternal antibodies present in the offspring
193 may potentially interfere with active immunisation (i.e. vaccination) of the offspring by
194 binding to the vaccination antigen(s) and thereby inhibiting them from activating the
195 offspring's immune system. This becomes critical in situations in which vulnerability to
196 infection is present at the same time as colostrum derived antibodies. As an example
197 anti-hepatitis A virus specific antibodies passed on from mother to infant persists for up
198 to 6 months in the new-born preventing vaccination of infants against hepatitis A virus
199 in this period (Vidor, 2007). Also, vaccinating pregnant sows at the right time before
200 farrowing can protect piglets against Foot-and Mouth Disease (FMD) through colostrum
201 derived maternal antibodies (Francis and Black, 1984a and Francis and Black, 1984b) for
202 a limited period of time after birth. However maternal antibodies are capable of
203 inhibiting subsequent active immunisation against FMD in the piglets even at around 8
204 weeks after parturition (Kitching and Salt, 1995). Interfering maternal antibodies have
205 also been observed in poultry, inhibiting vaccination against H5N2 influenza virus
206 (Forrest et al., 2013). As dealt with in the rest of the review, other ways of creating
207 antibody based passive immunity is to administer immunoglobulins orally or by
208 injection, thereby controlling the location and the timing of immunoglobulins more
209 precisely.

210

211 **3. Protection and prevention of infection by passive immunisation of humans**

212 A wide range of immunoglobulin products are currently commercially available for
213 treating or preventing various infections and/or toxin-mediated diseases in humans by
214 parenteral administration, including those listed in Table 2. In addition to maternal
215 vaccination sometimes being useful for protecting the new-born by maternal antibody
216 transfer as mentioned above a number of other passive immunisation strategies have
217 been studied in humans and/or in models of human diseases (Keller and Stiehm, 2000
218 and Zeitlin et al., 1999). This includes parenteral administration of immunoglobulin
219 preparations for treating and/or preventing influenza (Mancini et al., 2011), plague
220 caused by *Yersinia pestis* (Froude et al., 2011) and viral haemorrhagic fevers (such as
221 Ebola (Qiu et al., 2014)). Passive immunisation is also used to protect against a number
222 of toxins from venomous animals, and bioterror-related toxins (reviewed in (Froude et
223 al., 2011)).

224 Oral intake of immunoglobulins for oro-gastric protection against enteric infections is
225 well-known in Nature (see above) and this principle has been applied in human medicine
226 for preventing and treating enteric infectious disease. For example, healthy human
227 volunteers given orally colostrum from cows immunised with several *E. coli* serotypes,
228 fimbria types, *E. coli* heat-labile enterotoxin, and cholera toxin, were all protected
229 against diarrhoea when challenged with *E. coli* O78:H11 in contrast to 9/10 in a control
230 group receiving non-immune bovine colostrum (Tacket et al., 1988). Although bovine
231 milk contains some antibody reactivity against human rotavirus (Yolken et al., 1985) it
232 appears that hyper-immune colostrum from immunised cows is needed to alleviate
233 disease symptoms in children with rotavirus-induced diarrhoea (Ylitalo et al., 1998).
234 Moreover children diagnosed with rotavirus induced diarrhoea treated with hyper-
235 immune colostrum were less dehydrated and showed better virus clearance than when
236 receiving non-hyper-immune colostrum (Davidson et al., 1989 and Sarker et al., 1998).

237 Likewise, HIV patients with *Cryptosporidium parvum* induced diarrhoea were
238 successfully treated by oral administration of a bovine immunoglobulin concentrate
239 derived from *C. parvum* immunised cows (Greenberg and Cello, 1996). A general
240 concern associated with oral administration of immunoglobulins is that the protein
241 degrading conditions of the gut may greatly reduce immunoglobulin activity (Jasion and
242 Burnett, 2015). Indeed, the combined action of low pH and proteolytic enzymes has
243 been shown to reduce the virus-neutralising capacity of bovine colostrum
244 immunoglobulins (Petschow and Talbott, 1994). Human milk IgA and IgM appear to be
245 more resistant to proteolysis than IgG as shown e.g. by mass spectrometry (Zhang et al.,
246 2014). The general observation in humans is that up to 25% of IgG passing through the
247 digestive system can afterwards be found intact in stool (Jasion and Burnett, 2015). In
248 study in rabbits that were fed bovine immunoglobulins from Cholera enterotoxin-
249 immunised cows, and the rabbit cecal extract was shown to possess Cholera enterotoxin
250 neutralization ability in vivo (McClead and Gregory, 1984). Intact, non-denatured IgG
251 could also be found throughout the digestive system after oral administration of ovine
252 IgG to rats (Balan et al., 2014). It should be noted that colostrum contains protease
253 inhibitors, such as inter-alpha-trypsin inhibitor and alpha-1-antichymotrypsin (Danielsen
254 et al., 2011 and Hernandez-Castellano et al., 2015). Also, the pH in the stomach of
255 weaned piglets is never below 2.5 (Snoeck et al., 2004), both of which contribute to
256 sustain immunoglobulin stability upon oral administration

257

258 **4. Passive immunisation of production animals**

259 4.1. Pigs

260 A number of difficult to control diseases with infectious aetiology, such as post weaning
261 diarrhoea (PWD), porcine epidemic diarrhoea, porcine circovirus associated diseases,
262 and new neonatal porcine diarrhoea syndrome, occur with a significant incidence in the
263 modern pig production worldwide. Vaccines are available for some of them including a
264 number of viral infections (see below) and others can be prevented or treated by
265 antibiotics, but products for passive immunisation of pigs are quite limited in type and
266 scope (see Table 4), and none are currently available for protecting against these
267 diseases.

268 Most pigs in North America and Europe are presently infected with type 2 porcine
269 circovirus (PCV2)(Madec et al., 2008). Several PCV2-vaccines have been developed after
270 the millennium and have proved useful for controlling PCV2-associated diseases (Chae,
271 2012 and Kristensen et al., 2011). As it is costly and time-consuming to vaccinate all
272 piglets against PCV2 it would be highly preferable to vaccinate the sows only, i.e. to rely
273 on passive immunity for protection of the piglets. It has indeed been observed that
274 clinical signs of PCV2-infection are reduced in the offspring of vaccinated sows provided
275 maternal anti-PCV2 titres are adequate (Fort et al., 2008, McKeown et al., 2005 and
276 Opriessnig et al., 2008), and one commercial sow vaccine has been reported to provide
277 passive immunity in piglets by maternally derived antibodies and lymphocytes (Table 3)
278 (Fort et al., 2008, Fort et al., 2009 and Oh et al., 2012). On the other hand, vertical
279 transmission of PCV2 may occur even in the face of maternal vaccination (i.e. PCV2
280 transmitting through milk) (Dvorak et al., 2013, Gerber et al., 2012, Madson et al., 2009
281 and Shibata et al., 2006), and maternal antibodies can potentially impede the piglet
282 immune response to vaccination as seen in a study on oral vaccine against F4+ ETEC
283 (Snoeck et al., 2003). Collectively, it does appear that neither active immunisation nor

284 lactogenic passive immunisation provided by maternal antibody transfer can prevent
285 PCV2 infection even though disease signs are reduced.

286 Infection with diarrhoeagenic ETEC affects newly weaned piglets causing post weaning
287 diarrhoea (PWD), which is a very widespread problem in modern pig production systems
288 (Fleckenstein et al., 2010, Gyles, 1994 and Hong et al., 2006). The key step in the
289 pathogenesis of PWD is the fimbria-receptor interaction necessary for the colonisation
290 by ETEC of the small intestine (Gaastra and Svennerholm, 1996 and Zhou et al., 2013).
291 An orally provided F4 fimbria subunit vaccine was shown to be able to induce protection
292 against F4 positive ETEC in an experimental model of PWD (Van den Broeck et al., 1999a
293 and Van den Broeck et al., 1999b). One commercial vaccine (Coliprotec®) for oral use
294 against PWD, containing live avirulent E. coli F4+ strain, has been marketed in Canada
295 for some years (Melkebeek et al., 2013) and was approved for the European market in
296 2015 as well (EMA, 2015). Efficacy data for this vaccine do not seem to be available.
297 However, the use of oral vaccines based on live bacteria for oro-gastric protection has
298 several limitations, including (1) in nursing piglets interfering lactogenic maternal
299 antibodies may inhibit induction of active immunity as intestinal colonisation by the
300 bacteria is inhibited, (2) oral vaccination only works fully if the weaners are able to
301 mount a full immune response, which is not the case at four weeks of age (Levast et al.,
302 2014), (3) the vaccine cannot be provided in combination with antibiotics as these will
303 kill the live bacteria of the vaccine, and (4) if the vaccine only provides protection against
304 specific antigens (e.g. F4 fimbriae) it will not work in geographical regions where other
305 bacterial strains prevail (e.g. E. coli F18+). However, passive immunisation was shown to
306 protect new-born piglets against otherwise fatal diarrhoea caused by ETEC F4+ by oral
307 administration of a combination of several monoclonal antibodies targeting different F4
308 fimbria subunits (25 mg/ml in ascites fluid) (Foged et al., 1986). Notably, one oral dose

309 (1 ml) of this monoclonal antibody mixture provided 1 h prior to challenge did not
310 provide protection, however combining administration before challenge with
311 administration at 8, 24 and 32 h after challenge provided complete protection against
312 mortality and disease. Ten days of feeding genetically engineered Arabidopsis plant
313 seeds expressing F4-specific llama-derived immunoglobulin was reported by Viridi et al.,
314 2013 to reduce excretion of F4 positive ETEC (experimental challenge at day 6) and to
315 increase the weight gain in pigs (Viridi et al., 2013). Antibodies from hens' eggs (also
316 known as IgY, see below) have also been investigated for their ability to provide passive
317 protection against enteric infections in pigs, however results have been ambiguous (see
318 below). Thus, a study on E. coli F18+-specific IgY-containing egg yolk fed to weaning pigs
319 that had been challenged with virulent E. coli F18+ showed that growth was significantly
320 improved, and both diarrhoea incidence and E. coli colonisation reduced compared to
321 the control groups (Yokoyama et al., 1997). This finding was confirmed in an
322 independent study feeding either egg powder or eggs from fimbria F18-immunised hens
323 to weaning piglets which led to significantly less shedding of the E. coli F18+ challenge
324 strain, reduced incidence of diarrhoea, and reduced mortality compared to weaner
325 piglets fed eggs or egg powder from non-immunised hens (Imberechts et al., 1997).
326 Also, a feed supplement of egg yolk powder from eggs of E. coli F4+-immunised hens
327 decreased the frequency of diarrhoea and mortality in early-weaned piglets to almost
328 zero as compared to a control group not receiving egg yolk feed supplementation (
329 Marquardt et al., 1999 and Owusu-Asiedu et al., 2002). On the other hand, other studies
330 failed to demonstrate any effect on experimental E. coli induced diarrhoea incidence
331 after feeding IgY with specificity against the challenge strain (Owusu-Asiedu et al.,
332 2003a and Owusu-Asiedu et al., 2003b) and a field trial on the efficacy of anti-ETEC IgY
333 did not show any effect on diarrhoea and mortality (Chernysheva et al., 2003).

334 In summary, there are clear indications that orally administered immunoglobulins can
335 aid piglets in handling enteric infections, both when used prophylactically and
336 therapeutically, however dose and timing need to be optimized carefully.

337

338 4.2. Cows

339 Bovine colostrum and milk contains IgG antibodies against many bacteria and yeast
340 (Kelly, 2003 and McConnell et al., 2001), and as is the case with piglets, calves are born
341 agammaglobulinemic and thus are highly dependent on efficient enteral uptake of
342 maternal IgG from colostrum in which IgG is the dominating protein at around 70 mg/ml
343 (Matte et al., 1982). However, up to 40% of new-born calves suffer from 'Failure of
344 Passive Transfer' (FPT), defined as failure to attain a serum concentration of IgG of at
345 least 10 g/L within 24–28 h after birth (Godden, 2008 and Weaver et al., 2000). Poor
346 quality colostrum (low IgG concentration) and inadequate enteral uptake of IgG are the
347 main causes of FPT (Godden, 2008 and Quigley, 2002). Calves suffering from FPT show a
348 reduced average daily weight gain and also have an increased risk of mortality within the
349 first 3 months of life (Robison et al., 1988 and Wittum and Perino, 1995). In order to
350 prevent FPT, colostrum replacer may be given to the calf just after birth, and several
351 currently marketed products for ruminants apply the passive immunisation principle
352 (Table 4) for helping new-born calves achieve adequate concentrations of circulating
353 immunoglobulins within the first 24 h after birth. E.g. colostrum replacers contain IgG
354 purified from colostrum or plasma in addition to other proteins, fat, vitamins and
355 minerals and provide 100–150 g IgG per 1.5–2 l dose (Jones and Heinrichs, 2005) and
356 colostrum replacers can thus prevent FPT.

357 In an experimental setting, Sherman et al. administered ascites fluid containing
358 monoclonal antibodies against K99 bacterial antigen orally to calves before oral
359 challenge with ETEC O9:K30:K99:F34; 82% of the untreated control calves died in
360 comparison to only 29% of the passively immunised calves (Sherman et al., 1983). This
361 demonstrates proof-of-principle for passive immunisation mediated protection against
362 this E. coli infection; however monoclonal antibodies are not generally available or
363 applicable for passive immunisation of production animals as they are prohibitively
364 expensive. They may have interest as drugs for treating and/or preventing infections in
365 very high price animals, though (thoroughbred and dressage horses, koi carps,—see
366 below). On the other hand, avian immunoglobulin (IgY, see below), in the form of the
367 water-soluble fraction of yolk from eggs of immunised birds has been demonstrated to
368 efficiently reduce ETEC infection in calves as well as in pigs and rabbits (reviewed in (
369 Chalghoumi et al., 2009)), and to provide protection against rotavirus induced diarrhoea
370 in new-born calves (Sarker et al., 2007 and Vega et al., 2011) by the enteral route. Also,
371 a number of IgY based calf feed supplements are commercially available (see Table 4).

372

373 4.3. Sheep

374 Infection with enteropathogenic *Escherichia coli* (EPEC) and *Salmonella enterica*
375 Typhimurium is common in lambs. Passive immunity obtained by transfer of maternal
376 antibodies in colostrum from ewes vaccinated with extracts of K99 pili from EPEC and
377 with live attenuated *Salmonella*, respectively has been demonstrated in lambs (Altmann
378 and Mukkur, 1983 and Mukkur et al., 1998). Lactogenic immunity against enteric
379 infections with the tapeworm *Taenis ovis* can also be achieved by vaccination of ewes
380 against the larvae (Rickard et al., 1977). Commercial products using similar maternal

381 vaccination approaches, vaccinating ewes three to four weeks before lambing are
382 available for protection against *Clostridium perfringens* types C and D infections,
383 lockjaw, lamb dysentery, pulpy kidney, and pasteurellosis (see Table 3). Several of these
384 vaccines can be administered for active immunisation for the offspring as well when the
385 initial, passively mediated protection has waned. Products for direct administration of
386 immunoglobulins for providing passive immunity in sheep against especially Clostridial
387 diseases, but also Tetanus, are listed in Table 4. Collectively, licensed products are
388 typically combination products, targeting a number of different diseases at the same
389 time, increasing cost effectiveness of the invention.

390 4.4. Horses

391 Just like ruminant neonates, foals acquire immunoglobulins from the dam's colostrum
392 by enteric uptake during a limited 'open gut' period just after birth as for example
393 illustrated by passive transfer of immunity against West Nile Virus and rotavirus from
394 dam to foal (Sheoran et al., 2000 and Wilkins et al., 2006), and indeed several licensed
395 vaccines for horses are available (Wilson, 1999) providing maternal passive immunity for
396 foals against many diseases (see Table 3). The foal are usually re-vaccinated four months
397 after parturition (Wilson, 1999). FPT can also occur in foals with adverse consequences
398 on infections rates, disease and mortality (McGuire et al., 1977). It is well established in
399 horses to use plasma transfusion as well as colostrum supplementation in foals to
400 overcome FPT (Nath et al., 2010), and other immunodeficiency diseases (Crisman and
401 Scarratt, 2008 and Tennent-Brown, 2011) (also see Table 4).

402

403 4.5. Poultry

404 Young chicks have an increased susceptibility to pathogens during the first few weeks
405 after hatching, since their immune system is not fully developed and as maternal
406 immunity is insufficient in providing full protection against certain pathogens. Passive
407 immunity has been investigated extensively in poultry (see Table 5), and a number of
408 studies provide positive indications that passive immunisation by the enteral route can
409 be used to prevent and even treat infectious diseases in poultry. The main avian
410 immunoglobulin isotype is IgY and when hatching, the majority of circulating
411 immunoglobulin is constituted by maternal IgY, while in the alimentary tract of the
412 chicken maternal IgA and IgM dominate (Hamal et al., 2006). IgY is functionally similar to
413 mammalian IgG however has four constant domains and no hinge region (reviewed in
414 (Kovacs-Nolan and Mine, 2012)). IgY is transferred from the dam to the yolk of the
415 developing egg through the ovarian follicular epithelium (Morrison et al., 2002 and Tesar
416 et al., 2008) while avian IgA and IgM are mainly found in the egg white (albumen)
417 transferred in the oviduct through the mucosal secretion (Rose et al., 1974). The amount
418 of IgY transferred to the progeny from the dam is proportional to the IgY serum
419 concentration in the dam; at day 3 the circulatory IgY concentration of the progeny is
420 approximately 30% of that of the dam (Hamal et al., 2006). The level of protection
421 provided by maternally derived IgY varies in different disease models (Table 5, Maternal
422 Protection); in some cases, even though pathogen-reactive IgY was present in both yolk
423 and serum of the hatchling it was still susceptible to experimental infection (Glavits et
424 al., 1991, Le Roy et al., 1995 and Lin and Kleven, 1984). On the other hand eight out of
425 ten studies on immunoglobulin transfer in poultry (Table 5, passive transfer) show that
426 antibodies induced by active immunisation of adult birds and then given in the form of
427 antiserum to newly hatched birds protected the recipient birds when challenged by
428 infection.

429 Also, a number of studies provide positive indications that passive immunisation by the
430 enteral route; using hyper-immune IgY prevented and even treated infectious diseases
431 in poultry (see Table 5, egg yolk immunoglobulins). The two studies that showed no
432 protection against the pathogenic challenge by passive transfer (Table 5, passive
433 transfer) indicate that protection against infections by antibodies may, as in other
434 species is insufficient against certain avian pathogens such as *Histomonas meleagridis*
435 and Avian metapneumovirus. In addition, and in contrast to neonates and young off-
436 spring of mammals the newly hatched bird does not have natural access to maternal
437 immunoglobulin.

438

439 4.6. Fish

440 Similar to poultry natural passive immunity is provided to fish embryos by transfer of
441 maternal antibodies to the embryos' yolk sack (Swain et al., 2006). The main circulating
442 form of immunoglobulin in fish is tetrameric IgM (Rauta et al., 2012 and Salinas et al.,
443 2011), and monomeric IgT seems to constitute the equivalent of mammalian IgA as
444 secretory immunoglobulin associated with mucosal surfaces in fish (Salinas, 2015).
445 Passive immunisation with immunoglobulins from other animal classes has been
446 investigated in various infection models in fish (see Table 6). For example, complete
447 protection of Channel catfish (*Ictalurus punctatus*) against the freshwater protozoan
448 parasite *Ichthyophthirius multifiliis* using murine monoclonal immunoglobulins injected
449 intraperitoneally was reported in the study by (Lin et al., 1996) and correlated with
450 circulating murine monoclonal antibody titres against the parasite. As noted below,
451 however, high-value antibodies such as monoclonal antibodies will probably be too
452 expensive to find their way into use in low-cost production animals such as fish.

453 In other studies on passive transfer of immunity in catfish (Pasnik et al., 2011 and Shelby
454 et al., 2007), Nile tilapia (*Oreochromis niloticus*) (Pasnik et al., 2006), and Pacific herring
455 (*Clupea pallasii*) (Hershberger et al., 2011) only partial protection was achieved by
456 intraperitoneal administration of fish antiserum/plasma against challenge infections
457 with a range of bacterial and viral pathogens. In other studies passive transfer of
458 immunoglobulin to *Oncorhynchus mykiss* (rainbow trout), failed to provide protection
459 by injection in naïve trout, receiving serum from immune donor trout, against both
460 *Yersenia ruckeri* (Raida and Buchmann, 2008) and the parasite *Gyrodactylus derjavini* (
461 Lindenstrom and Buchmann, 2000). This indicates that in order to achieve protection
462 against these pathogens in teleost fish humoral immunity needs to be supplemented by
463 other types of immunity e.g. cell mediated immunity.

464 Oral administration of pathogen-specific IgY to fish has also been investigated.
465 Protection against Paracolo Disease and Vibriosis was obtained in Japanese eels
466 (Gutierrez et al., 1993) and in *Plecoglossus altivelis* (Ayu) (Li et al., 2014), respectively by
467 oral administration of purified IgY prophylactically in models of these two diseases. On
468 the other hand, studies in *Oncorhynchus mykiss* (rainbow trout) provided orally with
469 pathogen-specific IgY in the form of the water-soluble fraction of egg yolk formulated as
470 pellets did not demonstrate full protection against disease in models for Vibriosis and *Y.*
471 *ruckeri* infections (Arasteh et al., 2004 and Lee et al., 2000). However, full protection
472 was acquired if the *Y. ruckeri*-specific IgY was provided parenterally (egg yolk)
473 intraperitoneally (Lee et al., 2000), in contrast to the failure of whole antiserum from
474 immune donor fishes to provide protection in the same infection model (see above,
475 (Raida and Buchmann, 2008)). Highly priced ornamental fish (Koi carps) have also been
476 successfully treated with immunoglobulins. Thus, two Nishiki carps diagnosed with a
477 mixed *Aeromonas salmonicida* and *A. hydrophila* infection were successfully treated by

478 intramuscular injection with goat antiserum raised against these pathogens three times
479 over three weeks, clearing the infection (Prof. Sasaki Takeji, personal communication),
480 and it was recently published that simply immersing Koi carps in anti—*A. salmonicida* IgY
481 containing rearing water at 12.5 µg/ml protected them against skin ulcers and mortality
482 caused by subsequent exposure to this bacterium (Gan et al., 2015), probably by coating
483 the skin of the fish with the IgY antibodies. The fish IgA equivalent IgT could be
484 speculated to be useful for protecting mucosal surfaces and maybe the skin of fish,
485 however no such applications of IgT seem to be reported.

486 The use of IgY for treating other marine animals has also been studied: In a model for
487 *Vibrio alginolyticus* infection of shellfish *Haliotis diversicolor supertexta* (small abalone),
488 *Vibrio alginolyticus*-specific IgY was provided orally and increased survival from 0% to
489 more than 65% after challenge (Wu et al., 2011). *Metapenaeus ensis* (greasyback
490 shrimps) challenged with White spot syndrome virus had 73% and 33% survival, after
491 subsequent passive immunisation (IgY) and active immunisation, respectively (Lu et al.,
492 2008).

493 In general, it appears that immunity against infectious pathogens in fish can be passively
494 transferred by parenteral routes (intraperitoneally in most cases) whereas protection by
495 feeding specific immunoglobulins, being much more attractive from a practical point of
496 view, seems to be more challenging. This may be due to the presence of other easily
497 accessible entry points for infectious agent in fish, such as the gills and the fact that the
498 whole body of the fish is constantly challenged.

499

500

501 **5. Immunoglobulin sources**

502 In contrast to human medicine, the implementation of passive immunisation strategies
503 for prevention and treatment of infectious diseases in production animals like pigs, fish,
504 poultry and dairy cattle is massively dependent on the large scale availability of low cost,
505 highly efficient immunoglobulin products. That is, the immunoglobulin product needs to
506 be available to the farmer at a price that can compete with existing solutions including
507 antibiotics and vaccines (see above). In addition, ease of use and broad applicability are
508 pivotal, as are consistent quality, reliable high volume supplies and compatibility with
509 existing vaccine and diagnostic management schemes. Conventional methods for
510 producing antibodies, such as rodent- and/or cell culture derived poly- and monoclonal
511 antibodies, as used for laboratory, biotechnology and clinical and diagnostic uses in
512 humans and high value animals, are generally less useful for production of large
513 amounts of low cost immunoglobulin. This is also the case for phage-derived, and/or
514 engineered and/or recombinantly expressed immunoglobulins. Below, a number of
515 examples on alternative low cost readily available sources of immunoglobulins enabling
516 the general use of passive immunisation strategies in production animals are described.

517

518 **5.1. Blood plasma**

519 Spray-dried blood plasma (SDP) contains a high concentration of immunoglobulins and is
520 widely used as a feed additive to promote health and growth, especially in the pig
521 production (see Table S1). Documented effects in pigs include increased daily weight
522 gain, improved intestinal health and morphology and improved resistance towards
523 various pathogens (e.g. F4+ ETEC and PCV2) (see Supplementary Table 1) (Bhandari et
524 al., 2008, Hunt et al., 2002, Niewold et al., 2007, Perez-Bosque et al., 2006, Pierce et al.,

525 2005 and Quigley and Drew, 2000). It has also been demonstrated in pigs that SDP can
526 protect against experimentally established *E. coli* colonisation using large amounts of
527 SDP in just weaned pigs, significantly decreasing shedding of the challenge *E. coli* strain (
528 Nollet et al., 1999). Approximately 20% of SDP dry matter is constituted by
529 immunoglobulin (Pierce et al., 2005 and Quigley and Drew, 2000) and it is generally
530 accepted that the beneficial effects of SDP is due to its copious immunoglobulin content.
531 For example, in a study on the effect of different SDP fractions on the performance of
532 early weaned pigs Pierce et al. (2005) demonstrated that the growth promoting effect of
533 SDP resided in the immunoglobulin rich fraction (Pierce et al., 2005). Also, hyperimmune
534 SDP from pigs vaccinated against F4+ ETEC more efficiently reduced shedding of F4+
535 ETEC in an experimental model of PWD than SDP from non-immunised animals (Niewold
536 et al., 2007). As methods are now in place to efficiently purify immunoglobulin from
537 slaughterhouse pig plasma by very cost-efficient methods (Lihme et al., 2010) it would
538 be attractive to use the purified immunoglobulin fraction itself instead of SDP, and the
539 anti-bacterial effect in experimentally challenged weaning piglets of such a purified
540 immunoglobulin fraction purified in bulk from slaughterhouse blood was demonstrated
541 recently by us (Hedegaard et al., 2016). The slaughterhouse pig plasma was shown to
542 contain 'natural' antibody activity against both *E. coli* and *Salmonella enterica* spp (
543 Hedegaard et al., 2016). Unfractionated blood products, such as SPD may harbour viral
544 pathogens. For example, PEDV has been suggested to be present in porcine SDP (Pasick
545 et al., 2014) although the heat treatment which is part of the spray-drying process may
546 partly inactivate it (Gerber et al., 2014). Also, porcine parvovirus in liquid plasma has
547 been shown to be inactivated by ultraviolet light irradiation (Polo et al., 2015). Anyhow,
548 purification of immunoglobulin has the added benefit of allowing the removal of blood

549 borne pathogens, including viruses, such as PCV2 and porcine epidemic diarrhoea virus
550 (PEDV).

551

552 5.2. Egg yolk immunoglobulins

553 A single chicken egg contains between 100 and 250 mg IgY (Schade et al., 2005),
554 corresponding to an annual production per egg-laying hen of 20–50 g IgY (Carlander et
555 al., 2000 and Michael et al., 2010). IgY with specific binding activity can be obtained by
556 vaccination of egg-laying hens which will then deliver eggs with high antibody titres
557 against the target antigen (Kovacs-Nolan and Mine, 2012). Such IgY antibodies have
558 shown potential for treating/preventing diseases in both humans and animals (reviewed
559 in (Chalghoumi et al., 2009, Diraviyam et al., 2014 and Kovacs-Nolan and Mine, 2012),
560 also see above). Notably, IgY does not bind mammalian complement factors and Fc-
561 receptors making its use in mammals relatively uncomplicated (Inoue et al., 2015 and
562 Larsson et al., 1991). As expected, if IgY was provided parenterally to mammals a host
563 immune response towards IgY was observed (Diaz et al., 2014). However, such problems
564 have not been reported when administering IgY enterally (Michael et al., 2010).

565

566 As IgY is generally obtained from high-value human food items (eggs) from hens
567 specifically immunised against the pathogen in question this approach is per se more
568 costly than the use of immunoglobulin obtained from otherwise largely untapped
569 slaughterhouse waste products such as blood. On the other hand, IgY could potentially
570 also be purified from waste blood from broiler slaughterhouses presumably harbouring
571 reactivity against common infectious pathogens such as *Campylobacter* spp.

572

573 5.3. Milk and whey

574 As discussed extensively above colostrum and milk provide natural oro-gastric
575 protection against enteric infection in suckling off-spring. The major immunoglobulin
576 type in bovine milk and colostrum is IgG (0.5–1 mg/ml and 60–70 mg/ml, respectively)
577 (El-Loly, 2007 and Hurley and Theil, 2011). Precipitating casein from milk, as done in
578 cheese manufacturing, removes the bulk of protein from the milk, leaving the by-
579 product whey, containing around 0.5 mg/ml IgG, constituting approx. 10% of the protein
580 fraction (Siso, 1996). In cattle, a marketed whey-product (Colostrx) is claimed to protect
581 similarly to colostrum against ETEC in a *E. coli* K99-challenge model (Harman et al.,
582 1991). Although whey is claimed to have a range of dietary benefits in humans (
583 Marshall, 2004 and Patel, 2015) and pigs (Vanavichial, 1998), and it is a cheaper source
584 of immunoglobulins than milk, it however does not seem that whey is used to any
585 discernible degree for production of purified immunoglobulin preparations. This may be
586 due to the relatively low concentration of IgG in whey (<1 mg/ml) necessitating large
587 volumes to be handled during purification thereby compromising economic feasibility
588 compared to e.g. blood serum (containing around 10 mg/ml).

589

590 **6. Challenges and perspectives**

591 Intensive animal production systems generally face challenges in the shape of infections
592 compromising productivity, economy and animal welfare, and causing extensive use of
593 antibiotics. Active immunisation (vaccination) is a very useful alternative and
594 supplement to antibiotics for protecting against infectious pathogens as it can be used

595 to target different types of pathogens (bacteria, viruses, parasites) and as problems of
596 microbial resistance is rarely a problem. However vaccines come with their own set of
597 challenges, including their cost, and lack of efficiency in very young animals with a less
598 developed immune system, with enteric infections and with multifactorial infectious
599 disease, all of which characterize some of the most common infection related diseases
600 in production animals. This among others include weaning diarrhoea and neonatal
601 diarrhoea in pigs, diarrhoea in young calves, and a host of bacterial infections in fish fry
602 as well as the more specialized example of skin infections in high price Koi carps
603 especially associated with transport and co-mingling stress. As described in this review
604 the passive immunisation principle lends itself to meet the specific need for efficient,
605 inexpensive and non-antibiotics based intervention against these types of disease
606 problems. Numerous examples in all of the common production animals on the
607 efficiency of administered antibodies to combat or prevent infections are found in the
608 scientific literature (see above), underlining the fact that immunoglobulins, administered
609 in numerous ways and not very dependent on their source can provide short term
610 'traceless' protection against infection.

611 However, passive transfer of immunity at large scale in huge animal production facilities
612 is not always feasible and while the use of passive immunisation with immunoglobulins
613 for specific purposes like e.g. oedema disease in pigs is well-known (Johansen et al.,
614 2000), as is the principle of maternal vaccination, immunizing the offspring through a
615 natural passive immunisation process (Oanh et al., 2012), the general application of the
616 principle for the broad group of production related diseases mentioned above is
617 critically dependent upon the large-scale availability of low cost immunoglobulins e.g.
618 for supplementing the feed with immunoglobulins during challenging periods in the
619 animals' lifetime. Although a range of advanced methods for producing

620 immunoglobulins including monoclonal antibody protocols and recombinant antibody
621 expression exist, such types of immunoglobulins are not expected to be prime
622 candidates for large scale use in intensive animal production systems. Also, in practical
623 terms easy administration of immunoglobulins is a must. For example, instead of
624 injecting all fry in a fish production unit it would be much more practical to provide
625 antibodies in the fry feed. Another example is the administration of colostrum feed
626 supplements in which antibodies derived from the dam provide protection against
627 infectious agents in the suckling offspring (see Table 4), and the provision of
628 immunoglobulin-containing egg yolk powder as a feed supplement to reduce enteric
629 infections e.g. in weaner piglets.

630

631 **7. Conclusion**

632 With the availability of efficient large scale methods for production of purified
633 immunoglobulins from natural sources with certified absence of pathogenic agents the
634 use of passive immunisation for controlling production related infectious disease
635 problems in intensive animal production systems is likely to become relevant and
636 feasible in the near future. In addition to offering a real and broadly applicable
637 alternative to antibiotics with no anticipated resistance development problems, this will
638 also allow the exploitation of largely untapped, low value side streams in the animal
639 production sector, such as slaughterhouse blood and whey from cheese production.

640

641 **Conflict of interest: None.**

642

643 **Authors' contributions**

644 pH conceived the idea. CJH compiled the information and drafted the paper including
645 the figure and tables. pH critically reviewed and revised the paper and together with CJH
646 drafted the final version. Both authors agreed to the final version of the manuscript.

647

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654

655 **Appendix A. Supplementary data**

656 The following are Supplementary data to this article:

657 Unlabelled electronic file

658

659

660

661

662

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1729 **Tables**

1730 **Table 1**

Immunoglobulin half-life		
Species	Half-life (days)^a	References
Pig	14	(Curtis and Bourne, 1973)
Cow	29	(Murphy et al., 2014)
Sheep	12-24 ^b	(Watson, 1992)
Horse	27-39 ^b	(Wilson et al., 2001)
Poultry (turkey)	4-6 ^b	(Dohms et al., 1978a, b)
Fish (salmon)	2	(Voss et al., 1980)
Man	21 ^c	(Vidarsson et al., 2014)
Mouse	3-5	(Fahey and Sell, 1965)

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1736 ^a Pig, cow, sheep, horse, mouse and man; IgG. Poultry; IgY. Fish; tetrameric IgM.

1737 ^b Half-life changes from neonate to adult and varies between IgG subtypes.

1738 ^c Certain allotypes of IgG3 can have much shorter half-lives.

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1744 **Table 2**

Licensed^a immunoglobulin products for human passive immunisation		
Disease/pathogen source	Immunoglobulin product	
Allograft rejection	Equine or rabbit anti-thymocyte IgG	
Anthrax	Monoclonal antibody (Raxibacumab and Obiltoxaximab), immune human Ig (Anthravig™)	
Black widow spider	Equine Ig	
Snakebite	Scorpion	Equine F(ab') ₂ ^b
	Rattlesnake ^c	Ovine Fab ^b
Botulism	Type A and B	Human Ig
	Type A-G	Equine Ig
Chickenpox, shingles (Varicella-Zoster virus)	Immune human Ig ^d	
Cytomegalovirus	Immune human Ig	
Digoxin toxicity or overdose	Ovine Fab ^b	
Diphtheria	Specific equine Ig	
Hepatitis A, measles	Pooled human Ig	
Hepatitis B	Immune human Ig	
Primary Humoral Immunodeficiency, Immune Thrombocytopenic Purpura, (prevention of) allogeneic bone marrow transplantation rejection, Guillain Barré syndrome, Kawasaki disease	Pooled human IgG ^d	
Rabies	Immune human Ig	

Respiratory syncytial virus induced disease	Monoclonal antibody (Palivizumab)
Smallpox (Vaccinia virus)	Immune human Ig
Tetanus	Immune human Ig ^d

1745 ^a Licensed by either FDA or EMEA

1746 ^b Fab/F(ab')₂ denotes products of IgG molecules after enzymatic digestion still capable of
 1747 binding to antigen in question.

1748 ^c Rattlesnake antivenom covers following species: North American snake venoms:
 1749 *Crotalus atrox* (Western Diamondback rattlesnake), *Crotalus adamanteus* (Eastern
 1750 Diamondback rattlesnake), *Crotalus scutulatus* (Mojave rattlesnake), and *Agkistrodon*
 1751 *piscivorus* (Cottonmouth or Water Moccasin).

1752 ^d Pooled human IgG (i.e. IVIG) can also be used

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1762 **Table 3**

Licensed Products for induction of maternal immunity for passive immunisation of progeny ^a		
Product	Animal	Disease/pathogen prevention
Equine Rotavirus Vaccine	Horse	<i>Rotaviral diarrhoea</i>
Strep-Vax II ^b , Pinnacle [®] I.N.	Horse	<i>Strangles</i>
Equivac [®] 2in 1 ^b	Horse	<i>Tetanus, Strangles</i>
Botvax B	Horse	<i>Butolism</i>
Prestige [®] V + WNV ^b	Horse	<i>Eastern and Western Encephalomyelitis, Tetanus, Influenza, equine herpesvirus and West Nile virus</i>
Eryvac ^{®b}	Sheep	<i>Erysipelas polyarthrits</i>
Glanvac [®] 6 ^b	Sheep + Goat	<i>Cheesy Gland, malignant oedema, lamb dysentery, pulpy kidney, struck, tetanus, braxy, blackleg, black disease and clostridial metritis</i>
Hepatavac P Plus ^b	Sheep	<i>Clostridium perfringens type A; C. perfringens type B; C. perfringens type C; C. perfringens type D; C. chauvoei; C. novyi type B; C. septicum; C. sordellii; C. haemolyticum, and C. tetani</i>
Bravoxin 10, Ultravac [®] 5in1 ^b	Cattle + Sheep	<i>Clostridium perfringens type A; C. perfringens type B; C. perfringens type C; C. perfringens type D; C. chauvoei; C. novyi type B; C. septicum; C. sordellii; C. haemolyticum, and C. tetani</i>
BoviShot [®] PneumoGuard4	Cattle	<i>Pneumonic Pasteurellosis</i>
Rotagal, Rotavec,	Cattle	<i>Scours (rota –, coronavirus and E. coli)</i>

BoviShot® ROCO	Cattle	Scours (rota –, coronavirus)
NeoVac®	Swine	Scours/Colibacillosis (E. coli)
Porcilis Ery ^b	Swine	Erysipelas (<i>Erysipelothrix rhusiopathiae</i>)
Lepto-Eryvac® ^b	Swine	Erysipelas and Leptospirosis
Rhini Shield® TX4 ^b	Swine	Atrophic rhinitis, Erysipelas and Pneumonic Pasteurellosis
LitterGuard® LT-C	Swine	Enterotoxemia and Colibacillosis
ProSystem® TREC	Swine	Rotaviral diarrhoea, Transmissible gastroenteritis, Enterotoxemia and Colibacillosis
Prefarrow Strep Shield ^b	Swine	Meningitis, Septicemia and Streptococcosis
CircoVac ^b	Swine	PCVAD (Porcine circo virus type 2)
SuiShot® Aujeszkey ^b	Swine	Aujeszkey disease
SuiShot® PT-100	Swine	Porcine epidemic diarrhoea and Transmissible gastroenteritis
SuiShot® AR-DT	Swine	Pneumonic Pasteurellosis
SuiShot® Allres ^b	Swine	Glasser's disease, Enzootic Pneumonia (<i>Mycoplasma hyopneumoniae</i>), Pneumonic Pasteurellosis, Pleuropneumonia (<i>Actinobacillus pleuropneumoniae</i>), Streptococcosis, and Atrophic rhinitis
Gripovac 3	Swine	Swine influenza (H1N1, H1N2, H3N2)

1763 ^a Active vaccines intended for providing the offspring with immunity through colostrum.

1764 ^b Can be administered for active immunisation for the offspring when initial protection
1765 has waned.

1766 ^c Pathogens that cause the above-mentioned diseases

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1783 Table 4

Licensed products for passive immunisation of ruminants, horses and pigs				
Product type	Animal	Disease prevention/targeted pathogens	Immunoglobulin type/origin	Administration (Oral/parenteral)
<i>E. coli</i> specific antibodies	Calves	Scour	Bovine colostrum IgG/IgY	Oral
Antibacterial bovine serum antibodies	Cattle Calves Sheep	<i>Arcanobacterium pyogenes</i> <i>E. coli</i> <i>Mannheimia haemolytica</i> <i>Pasteurella multocida</i> <i>Salmonella</i> Typhimurium	Bovine serum	Parenteral
<i>Clostridial</i> antitoxins	Cattle Calves Goat Sheep Swine Horses	<i>Clostridium perfringens</i> C&D <i>Clostridium Botulinium</i> C&B	Equine Ig	Parenteral (sc and iv)
Tetanus Antitoxin	Horses Cattle	Tetanus	Equine serum	Parenteral

	Sheep Swine Goats			
Anti-West Nile Virus Antibodies	Horses	West Nile Virus	Equine Ig	Parenteral
Anti-endotoxin antibodies	Horses	Septicaemia	Equine plasma from hyper- immune horses	Parenteral
Antibacterial plasma antibodies	Horses	<i>Rhodococcus equi</i> <i>E. coli</i> J-5	Equine plasma from hyper- immune horses	Parenteral
Equine plasma	Horses	Failure of Passive Transfer	Equine plasma	Both

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1800 **Table 5**

Studies on passive immunisation of birds				
Immunoglobulin type	Method of delivery	Model (disease/pathogen)	Species	References
Polyclonal antibody ^a	Enteral (milk)	<i>Campylobacter jejuni</i>	Chicken	(<u>Tsubokura et al., 1997</u>)
Egg yolk immunoglobulins	Enteral	Avian coccidiosis	Chicken	(<u>Lee et al., 2009a, b</u>)
	Intramuscular	<i>Escherichia coli</i> spp.	Chicken	(<u>Kariyawasam et al., 2004</u>)
	Intraperitoneal	Infectious bursal disease (Birnavirus)	Chicken	(<u>Malik et al., 2006</u>)
	Enteral	<i>Campylobacter jejuni</i>	Chicken	(<u>Tsubokura et al., 1997</u>)

	Enteral	<i>Salmonella</i> Enteritidis	Chicken	(Rahimi et al., 2007)
	<i>In ovo</i>	Infectious bursal disease virus	Chicken	(Eterradossi et al., 1997)
Passive transfer ^b	Intraperitoneal			(Lardinois et al., 2014)
	Intravenous	Newcastle disease	Chicken	(Umino et al., 1987)
	Subcutaneous			(Reynolds and Maraqa, 2000)
	n/a	Avian Influenza Virus, H7N3	Chicken	(Shahzad et al., 2008)
	Intraperitoneal	Histomonosis (blackhead)	Turkey	^c (Bleyen et al., 2009)
	Subcutaneous	Stunting syndrome	Turkey	(Reynolds et al., 2000)
	Intravenous	Avian metapneumovirus	Turkey	^c (Rubbenstroth and Rautenschlein, 2009)
	Intramuscular	Duck enteritis virus	Duck	(Lin et al., 1984)
Subcutaneous	<i>Mycoplasma</i>	Chicken	(Lin and	

	Intravenous	<i>gallisepticum</i> <i>Ornithobacterium</i> <i>rhinotracheale</i>	Chicken	<u>Kleven, 1984)</u> <u>(Schuijffel et</u> <u>al., 2005)</u>
Maternal protection ^d		<i>Salmonella</i> spp.	Chicken	<u>(Barman et al.,</u> <u>2005; Gomez-</u> <u>Verduzco et</u> <u>al., 2010;</u> <u>Inoue et al.,</u> <u>2008; Si et al.,</u> <u>2014)</u>
		<i>Eimeria tenella</i>	Chicken	<u>(Smith et al.,</u> <u>1994)</u>
		Newcastle disease	Chicken	<u>(Umino et al.,</u> <u>1987)</u>
		Derzsy's disease virus	Goose	^c <u>(Glavits et</u> <u>al., 1991)</u>
		<i>Mycoplasma</i> <i>gallisepticum</i>	Chicken	^c <u>(Lin and</u> <u>Kleven, 1984)</u>
		<i>E. coli</i> MT78	Chicken	^c <u>(Le Roy et al.,</u> <u>1995)</u>
		West Nile virus	Chicken	<u>(Nemeth and</u> <u>Bowen, 2007)</u>

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1802 ^a Transfer/delivery of antibodies/antiserum from other species (e.g. mouse to chicken)

1803 ^b Transfer/delivery of antibodies/antiserum from same species (e.g. chicken to chicken).

1804 ^c Indication of passive immunity/protection was negative.

1805 ^d No transfer of antibodies/antisera other than from mother to egg.

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Studies on passive immunisation of fish		
Immunoglobulin type	Model (disease/pathogen)	References
Monoclonal antibody	White spot disease <i>(Ichthyophthirius multifiliis)</i>	<u>(Lin et al., 1996)</u>
	Viral haemorrhagic septicaemia virus	<u>(Lorenzen et al., 1990)</u>
Egg yolk immunoglobulins (IgY)	<i>Vibrosis (Vibrio anguillarum)</i>	<u>(Arasteh et al., 2004)</u>

	Redmouth disease (<i>Yersinia ruckeri</i>)	(Lee et al., 2000)
Passive transfer (serum/plasma)	Redmouth disease (<i>Yersinia ruckeri</i>) Columnaris disease (<i>Flavobacterium columnare</i>) <i>Gyrodactylus derjavini</i> <i>Streptococcus ssp.</i> Rainbow trout fry syndrome (<i>Flavobacterium psychrophilum</i>) Viral haemorrhagic septicaemia virus	(Raida and Buchmann, 2008) (Shelby et al., 2007) (Lindenstrom and Buchmann, 2000) (Pasnik et al., 2006, 2011) (LaFrentz et al., 2003) (Corbeil et al., 1999 ; Hershberger et al., 2011 ; Kurath et al., 2006 ; Traxler et al., 1999)

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Effects of SDP^a meal supplement^d			
Animal	Disease model	Effect	References
Piglets (6-20 days post weaning)	Experimental induced diarrhoea by <i>E. coli</i>	SDP ¹ reduced disease in piglets experimentally inoculated with <i>E. coli</i> O149K91. Faecal excretion of the <i>E. coli</i> was also reduced by SDP originating from <i>E. coli</i> O149K91-immunised pigs	(Niewold et al., 2007)
Piglets (7 days post weaning)		Dietary SDP significantly reduced mortality in comparison to the control group but SDP did not provide same level of protection against the <i>E. coli</i> inoculate as a group receiving antibiotics.	(Bhandari et al., 2008)
Piglets (7 and 14 days post weaning)	Post weaning diarrhoea (PWD)	Dietary porcine SDP had a positive influence on intestinal barrier function and reduced inflammation and diarrhoea.	(Peace et al., 2011)
Piglets (14 and 28 days post weaning)	The effect of SDP on piglet growth and intestinal morphology	Piglets given SDP had improved ADG ^b for 14 and increased body weight and crypt/villus ratios at day 28 as compared to control piglets.	(Tran et al., 2014)

Piglets	Salmon hydrolysate dietary supplement over SDP	Within the first 7 days, SDP, especially in 1+1 combination with salmon hydrolysate significantly improved ADG ^b and daily feed intake	(Tucker et al., 2011)
Piglets (5 days pre-weaned)	The effect of SDP on stress (weaning and transportation)	SDP provided post-weaned piglets with increased bodyweight and decreased levels of stress markers	(Wittish et al., 2014)
Piglets (28 days post weaning)	The effect of ultraviolet light on SDP	Ultraviolet light inactivated porcine parvovirus in liquid plasma, and SPD derived from ultraviolet radiated plasma improved growth in weaner piglets.	(Polo et al., 2015)
Sows	The effect of SDP on sow productivity: piglet survival to weaning, weaning interval, last lactation day of offspring, number of piglets and weight of litter, and ADG ^b and ADFI ^c of litter.	Dietary SDP had a significant positive effect on productivity in older sows (in parity 4) as compared to younger sows.	(Früge et al., 2009)

Cattle	The effect of bovine SDP against <i>E. coli</i> infection, incl. ADG ^b .	SDP resulted in borderline significant decrease in mortality and a significant increase in ADG ^b .	(Quigley and Drew, 2000)
Broilers	The effect of SDP on chicken growth	Bovine SDP significantly increased ADG and feed intake for up to 28 days after hatching.	(Campbell et al., 2006)
Chickens (1-28 days old)		Porcine SDP had no effect on body weight after 4 weeks of feeding (in comparison with control group).	(Jamroz et al., 2011)
Chicken (1-30 days old)		Porcine SDP had a significantly positive effect on body weight after 4 weeks of feeding.	(Jamroz et al., 2012)
Isa Brown hens	The effect of SDP on egg composition	The introduction of spray-dried blood by-products did not have any beneficial effects on egg quality, yolk and mineral content.	(Orda et al., 2012)
Wistar-Lewis rats (21 days post weaning)	Experimental induced intestinal inflammation with <i>Staphylococcus aureus</i> enterotoxin B.	Dietary SDP (and Ig concentrate) attenuated intestinal inflammation.	(Perez-Bosque et al., 2006 ; Perez-Bosque et al., 2008, 2010)
Male C57BL/6 mice (19 days old)	Experimental LPS-induced pulmonary	SDP (and Ig concentrate) decreased both the adaptive and	(Maijo et al., 2012a, b)

	inflammation	innate immune response.	
<i>Sparus aurata</i> (Gilthead sea bream) fingerlings	The effect of SDP on fingerling fish growth and intestinal mucosal	SDP improved fish size, weight, and increased density of intestinal goblet cells	(<u>Gisbert et al., 2015</u>)

1823 ^a SDP = Spray-dried plasma

1824 ^b ADG = average daily growth

1825 ^c ADFI = average daily feed intake

1826 ^d Also see (Torrallardona, 2010) for more on the effects in pigs