

SUMMARY

Preliminary study for a prioritization of production pathologies, which cannot be reported, in free-range free-range farming of laying hens in the Lazio and Tuscany regions.

Key words: Laying hens, Mycoplasmas, Prevalence

General objectives

- Recruit a number of farms with a total number of animals reared that significantly represents the number of animals reared in the province of Viterbo;
- • Investigate the prevalence of *Mycoplasma synoviae* and *Mycoplasma gallisepticum* in the Viterbo area;
- • Correlate the onset of colibacillosis as a secondary infection to mycoplasmosis.

Specific objectives

- To investigate the circulating strains of the target bacteria
- Highlight the critical issues in farm management
- Create a collaboration between the poultry system in the area and IZSLT in order to meet the needs of the stakeholders, especially in terms of preventing diseases with a strong economic impact and on public health

Methodology

- Farm inspections and sample collection
- • Laboratory diagnosis and pathological examinations
- • Estimation of the prevalence of the investigated pathogens

Results and discussion

Twenty farms were recruited to collect serological samples and laryngeal swabs. A different number of laying hens were raised in each farm, from a minimum value of n. 150 up to a maximum of n. 40,000 animals for a total of 354010.

In particular 4 Farms raised a number of animals from 1 to 10,000 (20% of the total), 9 from 10,001 to 20,000 (45%), 4 from 20,001 to 30,000 (20%) and finally 3 from 30001 to 40,000 (15%).

In each farm were collected 100 blood samples, 20 laryngeal swabs and 3 hen carcasses except for Farm A where 75 blood samples were collected.

A total of 1974 blood samples and 400 laryngela swabs were collected to be investigated. All blood samples were investigated by Elisa screening against both *MG* and *MS* and laryngeal swabs were analyzed by RT PCR. Carcasses were analyzed for a pathological and bacteriological examination.

Out of a total of 1,974 (100%) serological blood were analyzed to detect antibodies against Mg and MS, 1443 (73.1%) samples were positive, 524 (26.5%) negative and n. 7 (0.4%) doubtful results (see attachment 2). Five of the twenty farms recruited did not have a vaccination protocol for *MS* and *MG*.

Five hundred blood samples (25.33% of the total) were collected in farms with no vaccination protocol against *MG* and *MS*. The remaining 24 negatives samples and 7 doubtful results were collected into farms with a vaccination protocol against *MS* and *MG* so an individual variability of response against the vaccine or an incorrect practice in the execution could explain this reaction .

Regarding to laryngeal swabs they were analyzed by RT PCR and it was observed that all of the farm tested shown positive results both *MG* and *MS* except for two farms, N (3 *MG* positive samples) and R (4 *MG* positive samples) (see attachment 3) positive only against *MG*.