

Atypical BSE in the natural host - an update 12 months post inoculation

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Rome

7th May 2026

Atypical BSE in the natural host - experimental setup

Study aim:

Propagation of reference material for active TSE surveillance according to EU RL 999/2001 for all European NRLs for TSE

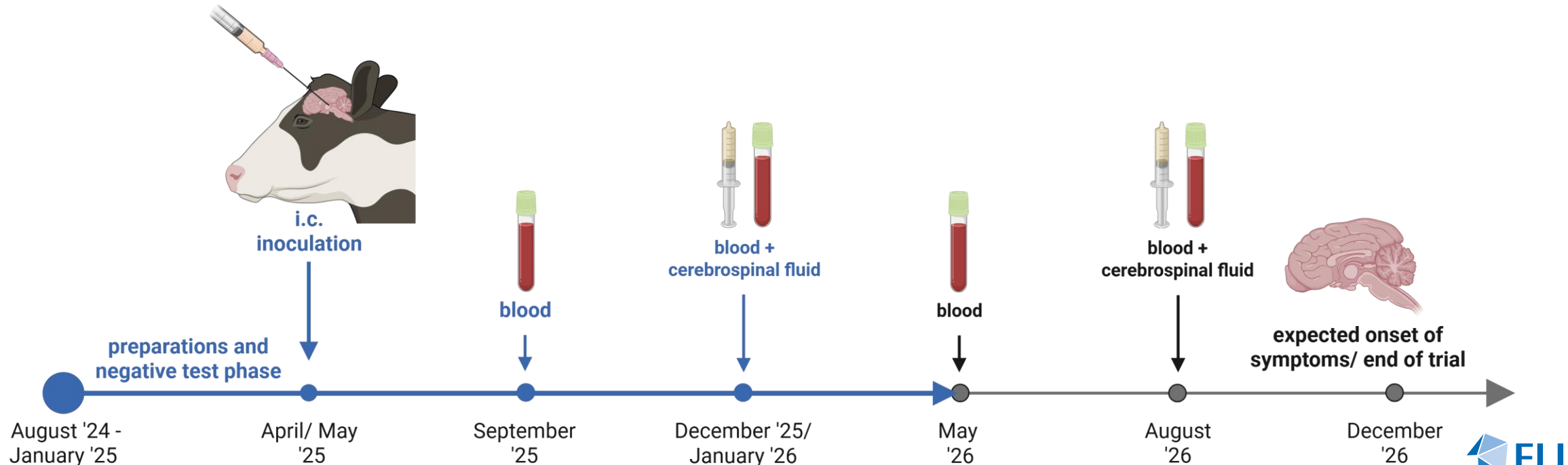
Study:

BSE infection study with H- and L-type BSE in 22 Frisian Holstein cattle

10 H-type BSE

10 L-type BSE

2 mock controls



Preparations & negative test phase - the stable



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- Establishing daily routines and testing the newly renovated BSE stable
- Parasitic treatment and BTV-vaccination
- Taking negative control samples
- Training of the i.c. inoculation



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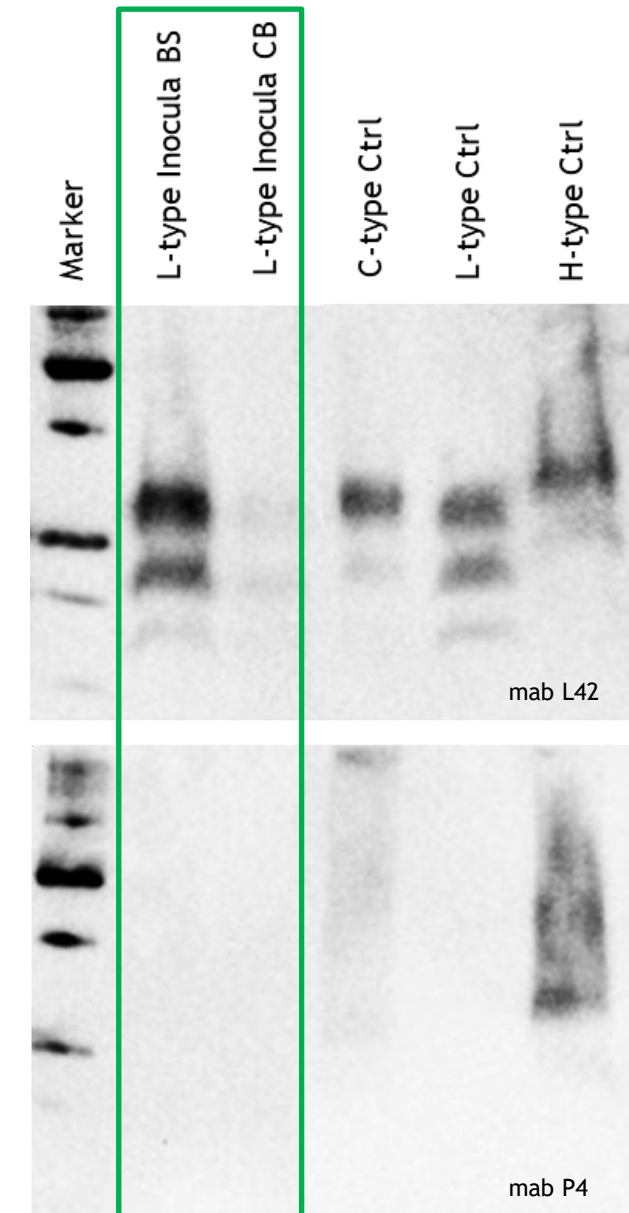
January - April 2025

Preparations & negative test phase - L-type

ID	L-Type
Origin	Bavaria/ Germany emergency slaughter
Breed	Pinzgauer
Age	14 years
Tissue	Brain stem and cerebellum

L-type inocula

- Brain stem with strong signal with mab L42
- Cerebellum only weak signal with mab L42
- No signal with mab P4

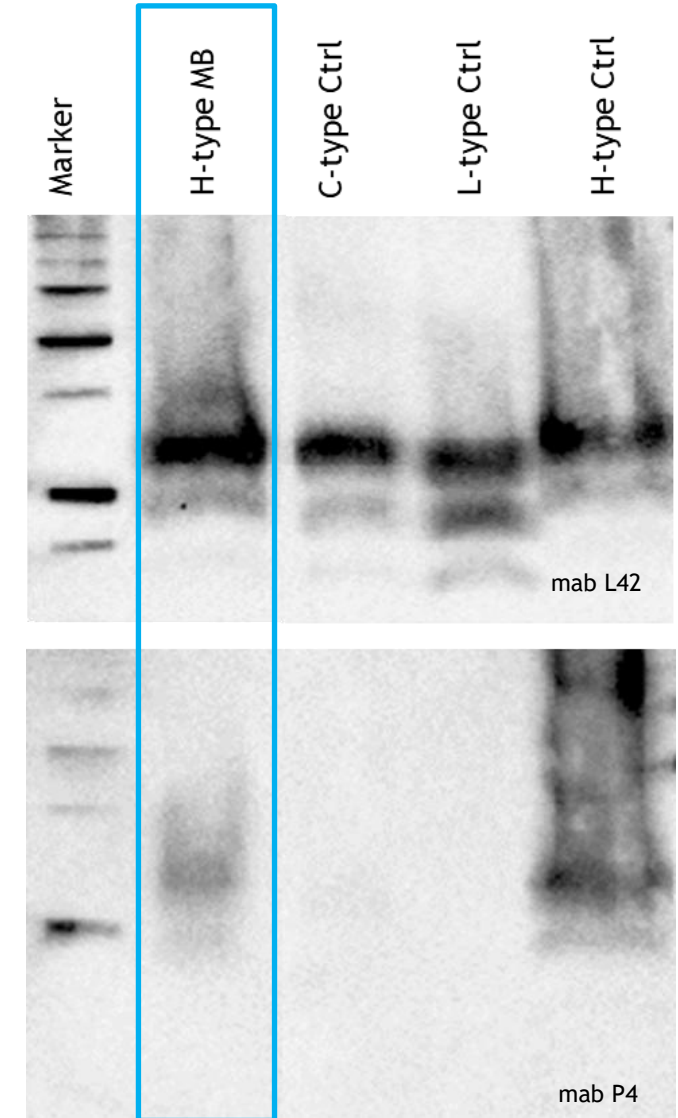


Preparations & negative test phase - inocula

ID	H-Type
Origin	Bavaria/ Germany healthy slaughter
Breed	German Angus
Age	13 years
Tissue	Mid brain

H-type inocula

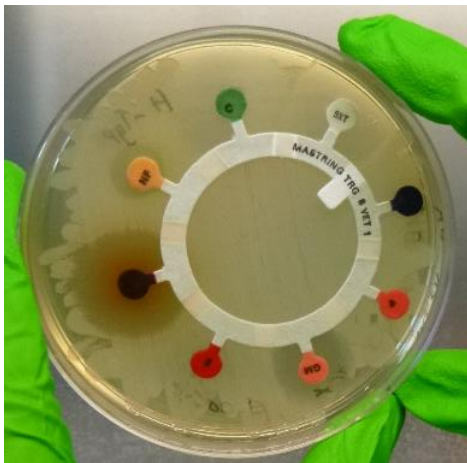
- Strong signal with mab L42
- Clear signal with mab P4



March - April 2025

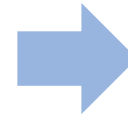
Preparations & negative test phase - inocula

ID	L-Type	H-Type
Origin	Bavaria/ Germany emergency slaughter	Bavaria/ Germany healthy slaughter
Breed	Pinzgauer	German Angus
Age	14 years	13 years
Tissue	Brain stem	Mid brain



© FLI

- Several small aerobic and anaerobic colonies
- sensitive to erythromycin and streptomycin



**Addition of 1-2% antibiotics
to inocula**

March - April 2025

Atypical BSE in the natural host - the inoculation



Preparation for anaesthesia



Anaesthesia



Inoculation



Positioning of the animal



Preparation of the drill

Inoculation of 10%
homogenates in NaCl
+ 1-2% antibiotics

April - May 2025

Emergencies



© FLI

Animals opened one gate →
Break into the feed storage

Result: 2 sick animals

Animal KT75 (Control)

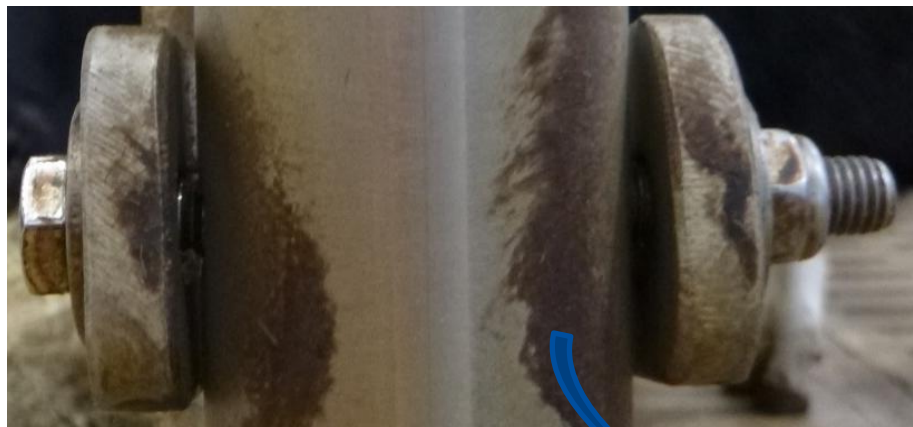
- No feed intake
- 39,5°C body temperature
- Excessive drooling
- Pale skin
- Suspected ruminal acidosis
- Extremely stressed
- Died shortly after treatment

Necropsy:

- Severely dehydrated + anaemia
- Severe hematoma at the level of the cervical spine

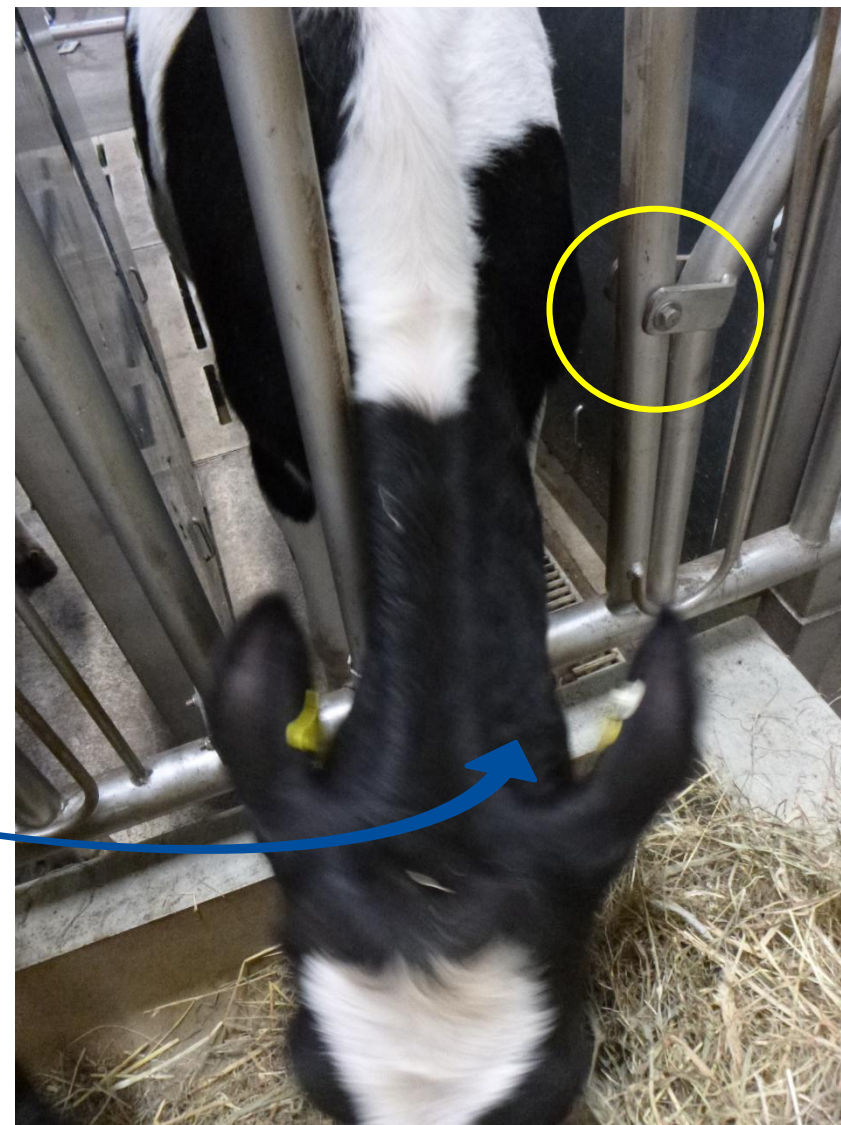
Troubleshooting: Feeding grid

Cause of the severe neck trauma:



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The screw cap caused severe trauma, when cattle continuously and forcefully moved backwards in the feeding grid



© FLI

Troubleshooting: Feeding grid



© FLI

2 more animals showed similar symptoms and bruises around their necks

→ pain treatment and feeding in an open feeding grid to let the bruises heal



© FLI

Solution for the feeding grid:
Removal of all screws and exchange with new ones to avoid further trauma

Emergencies



© FLI

Animals opened one gate →
Break into the feed storage

Result: 2 sick animals

Animal KT75 (Control)

- No feed intake
- 39,5°C body temperature
- Excessive drooling
- Pale skin
- Suspected ruminal acidosis
- extremely stressed
- Died shortly after treatment

Necropsy:

- Severely dehydrated + anaemia
- Severe hematoma at the level of the cervical spine

Animal RA27

- Spread-eagled hindlimbs after fall/ slip
- inflamed skin sores at the stifles
- No food/ water intake
- No response to pain treatment for several days

Necropsy:

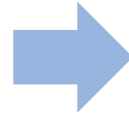
- Severely torn adductor muscles
- Haemorrhages in affected muscles
- Purulent inflammation of the skin at the level of the stifle joints

Troubleshooting: slippery floor

concrete floor gets slippery when wet (urine, faeces, water) → animals can get hurt



© FLI



Installation of special mats for cattle stables
(Kraiburg profiKURA system)



© FLI

K KRAIBURG
legt die Weide in den Stall

3R: additional enrichment

To avoid stereotypic behaviour such as tongue rolling, stereotypic movement and to refine (3R) the experimental setup we equipped the stable with different enrichment



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3R: additional enrichment

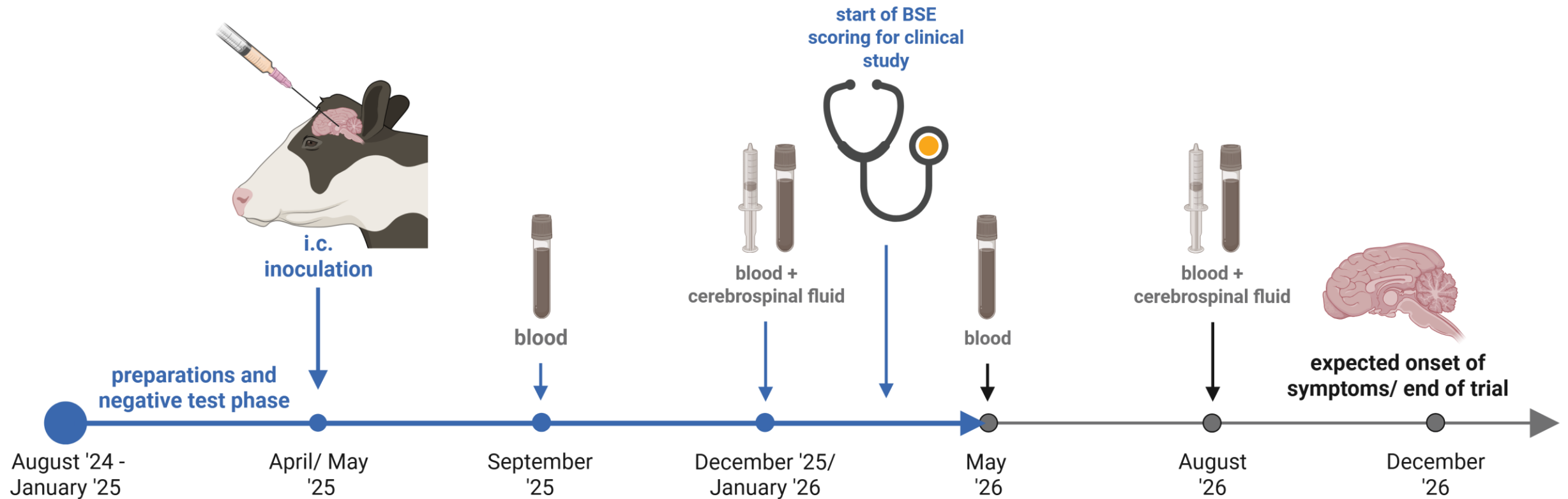
To avoid stereotypic behaviour such as tongue rolling, stereotypic movement and to refine (3R) the experimental setup we equipped the stable with different enrichment for cattle



Clinical BSE study

Study aim:

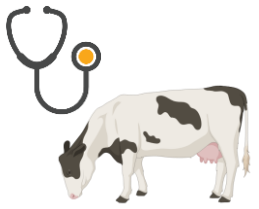
Regular clinical scoring of potential BSE symptoms to define clinical parameters from early onset of BSE until end stage disease that can be useful for veterinary practitioners, official veterinarians etc.



Februar 2026

Clinical BSE study

In cooperation with Ute Ziegler (FLI)



Clinical examination of BSE suspects (Braun et al., 2002) → every 8 weeks

- General examination: general condition, body condition score, body temperature, feed uptake
- Behavioral examination → observation in the stable/ feeding grid
- Neurological examination (sensitivity) → reactions to noise, light, approaching, touch
- Gait analysis → lameness/ ataxia, orientation

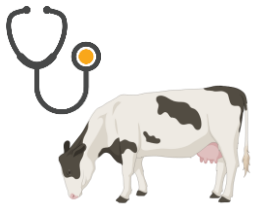
General examination
Score 0 - 3/ parameter

+

BSE examination
Score 1 - 4/ parameter

Score > 30
→ **BSE**

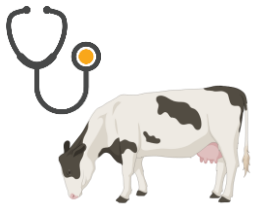
Clinical BSE study



„broomstick“ test

- Examination of back/ hind limb sensitivity with a broom stick
- Score 1 - 4 depending on reaction:
 - 1 no reaction
 - 2 Mild defensive movements
 - 3 Defensive movements/ kicking
 - 4 Severe kicking

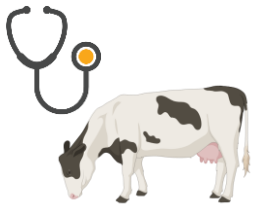
Clinical BSE study



head sensitivity

- Approaching the animal
- Blink reflex/ threatening reflex
- Sensitivity to touch
- Score 1 - 4 depending on reaction:
 - 1 no reaction/ reflex
 - 2 Mild defensive movements
 - 3 Defensive movements/ head shaking/ overreaction
 - 4 Severe overreactions/ extreme (aggressive) head shaking

Clinical BSE study



Clinical examinations of all animals in February and April:

General examination
Score 0 - 3/ parameter

general condition, body condition score, body temperature, feed uptake

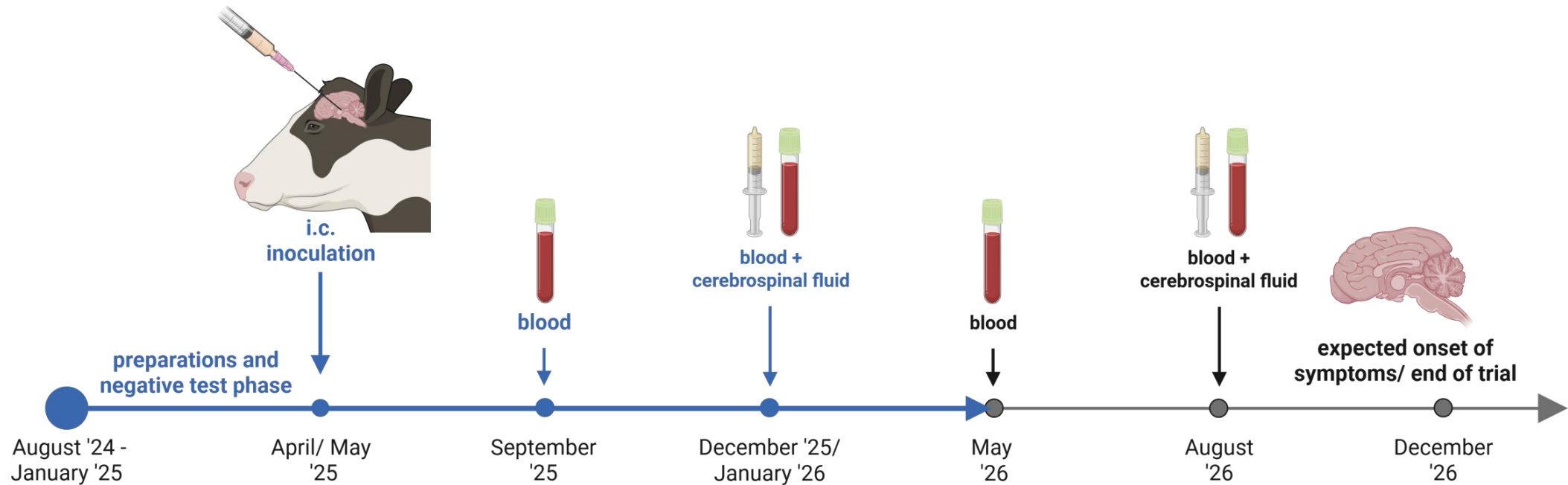
+

BSE examination
Score 1 - 4/ parameter

Behavior, Neurological examination, Gait analysis

→ no/ only mild reactions
→ no signs of a BSE-infection so far

Atypical BSE in the natural host - Outlook



1. Waiting for clinical signs
2. *PRNP* genotyping
3. Ongoing regular clinical examination and scoring (every 8 weeks)
4. Regular sampling of blood (every 4 months) & cerebrospinal fluid (every 8 months)

Thank you!

I would like to thank all colleagues that contributed to this work:

Christine Fast
Martin H. Groschup
Guiseppe Ru
Michele di Bari
Miriam A. Müller
Lina Spieß
Ute Ziegler
Martin Eiden
Anne Balkema-Buschmann
Marco Beerbohm
Thomas Pieper
Ralf Redmer
Yvonne Knauf

Ben Schiller, Steffi Marzahl, Cindy Griebenow, Verena Bechler and all animal care takers
Svenja Mamerow
Charlotte Schröder
Bärbel Hammerschmidt
Angele Breithaupt
Maik Neubauer
TD & Transport
Jens Teifke
Mathias Streitz
Sven Reiche
Sarah Jahn
Timo Hohmeier-Bachmann



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We thank all cattle that are
sacrificed for this study.