

## Neospora caninum iscom ELISA Neospora-Ab

Neospora caninum is an apicomplexan protozoan parasite, which were first characterised 1988 in dogs with a neurological disease. The parasite has a worldwide distribution and is considered to be one of the major causes of bovine abortion. N. caninum is genetically related to Toxoplasma gondii, which is one of the most important causes of infectious reproductive failure in sheep. The parasite is efficiently transmitted transplacentally from an infected cow to her foetus during pregnancy which results in abortion, birth of a weak calf, or birth of a clinically healthy but persistently infected calf. Except for abortions, there are no other clinical signs of disease in Neospora infected cattle. N. caninum induced abortion can occur throughout pregnancy and may include stillbirth at full time but abortions at 5-7 months of gestation is the most common. Bovine abortions caused by N. caninum may show epidemic as well as endemic patterns. Epidemiological data indicate that external or point source infections are the most likely cause of abortion outbreaks, whereas a high level or an increase in the annual abortion rate may be a consequence of predominantly transplacental transmission. A diagnosis of N. caninum infection can be confirmed by histological investigation of tissue collected at autopsy, combined with demonstration of the parasite in cell culture. In the live animal, presence of IgG antibodies directed to N. caninum in a sample indicates that an individual is or has been infected by the parasite.

The SVANOVIR® Neospora-Ab iscom ELISA is an indirect ELISA, designed to detect bovine Neospora-specific antibodies in serum and tank milk. The test is developed in collaboration with the Swedish Agricultural University (SLU) and the Swedish National Veterinary Institute (SVA).

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Kit format: 2 plate package size

No of tests: 192

No of samples: 184 (wells for kit controls excluded)

Application Area: Diagnostics

Screening/Confirmation

Characteristics: Indirect ELISA (iscom-based)

Intra-plate variation: 6%

Relative sensitivity to IFAT: 99%

Relative specificity to IFAT: 96%

Agreement milk vs serum: 95%

Agreement SVANOVIR® vs SLU ELISA: 97.5%