

## Pseudorabies/Aujeszky Disease Virus gB antibody test PRV-gB-Ab

Aujeszky's disease, also known as pseudorabies, is a world-wide distributed swine malady. It is caused by suid herpesvirus type 1 (SHV-1), which was first isolated from an ox by Aujeszky, 1902. The virus has the pig as the primary host but can infect all mammalian species other than humans and most species of primates. The disease is characterised by respiratory, nervous and reproductive disorders, including stillbirth, abortions and mummified foetuses. The virus may remain latent for long periods of time and then be reactivated. Virus transmission occurs mainly through direct contact between an infected and non-infected swine. In countries with a high prevalence of endemic pseudorabies, this disease - being often fatal, particularly in piglets - causes severe losses annually. All infected herds in endemic regions should therefore be monitored for the presence of infection. Uninfected herds should be protected by control measures. Different types of eradication programmes are practised. Some countries practise vaccination, while others try to control the spread by culling seropositive pigs or by combination of both measures. Since both the vaccine and field strains of PRV possess another glycoprotein gB (gII), antibodies to gB are present in sera of both infected and vaccinated pigs. Therefore, a gB based ELISA is a useful tool for screening of PRV-antibodies.

SVANOVIR® PRV-gB-Ab ELISA is developed to detect specific antibodies to the glycoprotein gB(gII) of Pseudorabies virus in porcine serum samples. However, in order to discriminate between vaccinated and naturally infected animals; it is recommended to use SVANOVIR® PRV-gE-ELISA (10-7161-02/-10).

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Kit format: 2- and 10-plate package sizes
No of tests: 192 and 960, respectively

No of samples: 184 and 920, respectively (wells for kit controls excluded)

**Application Area:** Screening of antibodies against PRV

Diagnostics as well as control and eradication program

Characteristics: Blocking ELISA

Standardised against reference serum ADV-1 according to the EEC

directive 92/24/EEC

Relative sensitivity to SNT: 100%
Relative specificity to SNT: 99.6%
Agreement with SNT: 99.7%