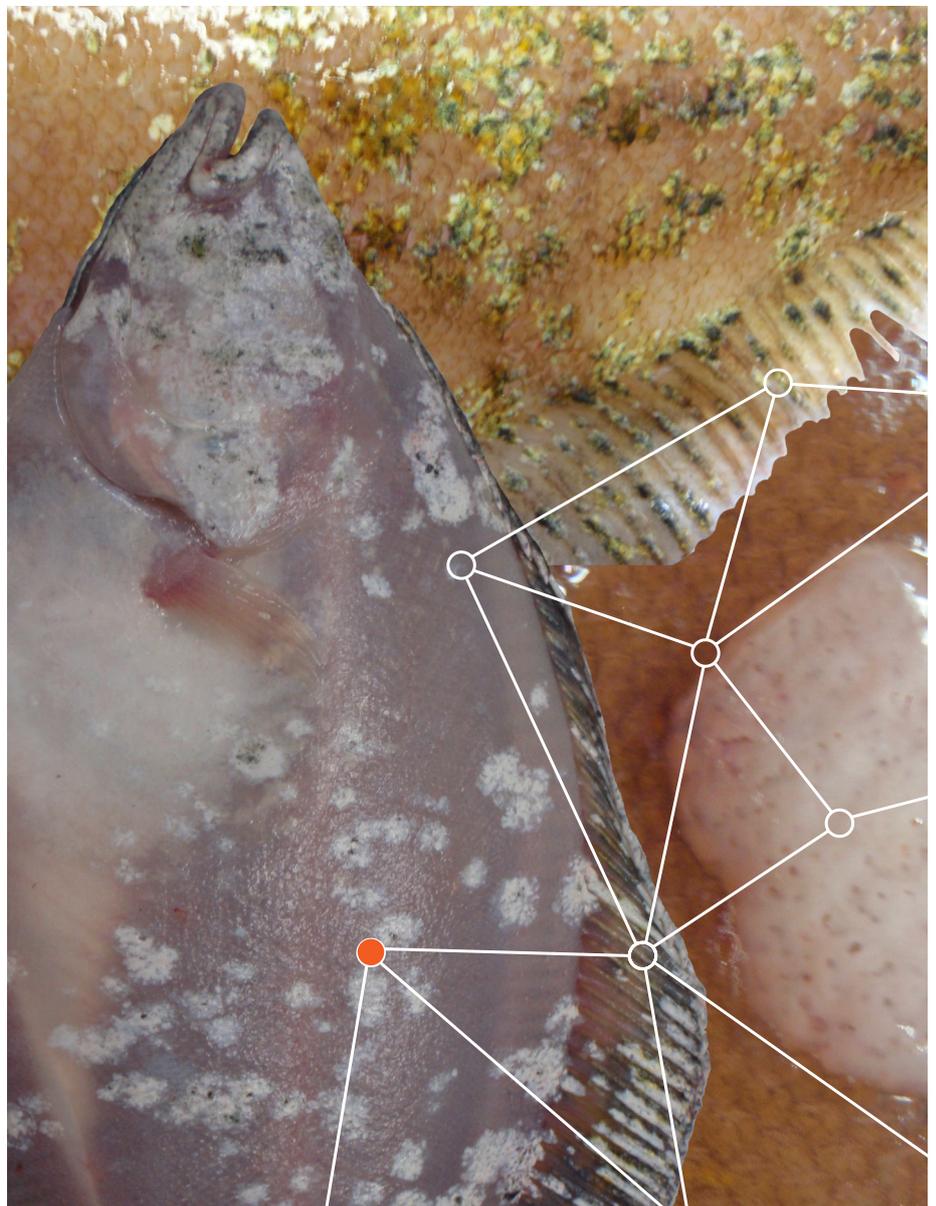


# Brown ring disease: a vibriosis affecting clams *Ruditapes philippinarum* and *R. decussatus*

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No. 65

JANUARY 2017

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Christine Paillard



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Recommended format for purposes of citation:

Christine Paillard. 2017. Brown ring disease: a vibriosis affecting clams *Ruditapes philippinarum* and *R. decussatus*. ICES Identification Leaflets for Diseases and Parasites of Fish and Shellfish. No. 65. 8 pp. <http://doi.org/10.17895/ices.pub.1924>

Series Editor: Stephen Feist. Prepared under the auspices of the ICES Working Group on Pathology and Diseases of Marine Organisms.

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ISBN 978-87-7482-176-2

ISSN 0109–2510

DOI: <http://doi.org/10.17895/ices.pub.1924>

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# Brown ring disease: a vibriosis affecting clams *Ruditapes philippinarum* and *R. decussatus*

Christine Paillard

## Susceptible species

Clams of the genus *Ruditapes*, *Tapes* and *Venerupis* in wild and reared populations (*Ruditapes philippinarum*, *Ruditapes decussatus*, *Tapes rhomboids*, and *Venerupis aurea*) are susceptible. All these species could be experimentally infected with *V. tapetis* (Maes and Paillard, 1992). The most sensitive species is the manila clam, *R. philippinarum*. The syndrome, which characterizes brown ring disease, has been reported in several other bivalve species including *Mercenaria mercenaria*, *Dosinia exoleta*, *Pecten maximus*, *Crassostrea virginica*; Maes and Paillard, 1992). However, the bacterium *V. tapetis* has not been found in those species.

## Aetiological agent

The aetiological agent, *Vibrio tapetis*, first isolated in 1990 in Landeda (North Finistère, in France) has been previously named as VP1 (Paillard *et al.*, 1989; Paillard *et al.*, 1990; Borrego *et al.*, 1996).

The reference strain, *V. tapetis* CECT4600T is also known as CIP 104856. The plasmid sequencing has been completed (Erauso *et al.*, 2011) and 17 *V. tapetis* complete genome strains have been sequenced and molecular comparative genomic analysed (Paillard *et al.*, unpublished).

## Geographical distribution

The disease was first detected in Europe, in Brittany (France) in 1987 and subsequently in Spain in 1994, England in 1997, in Ireland in 1998 and occasionally in Italy in 1990 (Paillard *et al.*, 2004; Drummond *et al.*, 2007). In Norway, in 2003, BRD has been also diagnosed in manila clams, seeded between 1988 and 1991 (Paillard *et al.*, 2008). BRD in manila clams was first reported in northern Asia (yellow sea, China Korea) in 2004 South Korea (Park *et al.*, 2006) and Hyogo prefecture in Japan in 2008 (Matsuyama *et al.*, 2010) To date, BRD has never been observed where susceptible clam species were first introduced outside their natural range to Western USA and Canada in 1936. Since 1990, in Italy, in north Adriatic lagoons, the disease has not spread, and is generally absent after the summer. In Spain, BRD is observed generally in both *R. decussatus* and *R. philippinarum* inhabiting several Rias of the Galician coast of northern Spain where environmental conditions, in particular temperature, are similar to those of the north European Atlantic coast. Considering the geographical distribution of this disease, BRD can be classified as a cold-water disease.

## Associated environmental conditions

The sensitivity of *V. tapetis* to temperature must be emphasized. It does not grow at temperatures exceeding 27°C, and is rapidly killed at 30°C in seawater (Paillard *et al.*, 1997). Field and experimental studies confirm the significant effect of temperature on the development of BRD and on clam immune defence responses. Along the French

Atlantic coast, a border (River Loire) has been identified with the production sites located in the south of Loire exhibiting lower prevalence's of BRD (up to 3%) compared to northern sites with higher prevalence's (20 to 60%). In France, higher prevalence's of the disease are regularly observed in sites where manila clams were cultivated compared to wild populations (Paillard *et al.*, 2014; Paillard, 2016).

### Significance

BRD provokes mass mortalities of reared juvenile and adult clams, especially in winter and spring, when maximum prevalence occurs.

Several physiological parameters such as growth, weight and condition index are subsequently affected. Diseased clams are significantly smaller, lighter and have a condition index significantly lower than healthy ones (Flye-Sainte-Marie *et al.*, 2007; Paillard, 1992). Biochemical analyses of the dried flesh of experimentally diseased clams have shown that there is a decrease in glycogen levels.

It is clear that the clams are weakened by the BRD and therefore more sensitive to various causes of mortality such as environmental stress, pollution and secondary infections but also reduced ability to cope with commercially practices such as seeding, high density, handling, storage, transport, and marketing (Jean *et al.*, 2011). Consequently, BRD has a real impact on fisheries and aquaculture of clams.

### Gross clinical signs

*V. tapetis* perturbs initial shell growth by adhering to the periostracal lamina, organic matrix involved normally in calcium biomineralization. This disorganized periostracal lamina is not a good substrate for the biomineralization process and therefore accumulates between the pallial line and the edge of the shell, forming a brown ring, the name of this disease (Paillard *et al.*, 1989; Paillard *et al.*, 1994). The characteristic sign of BRD is an obvious abnormal brown deposit, organic in nature, which is generally located between the pallial line and the edge of the shell (Paillard, 2004) (Figure 1). Two signs allow identification of the disease. The first is an organic film made up of one or several layers, which strongly adheres to the prismatic layer. The second sign is the presence of conchiolin spots surrounded by a pale brown halo adhering to the inner layer. Clams can recover from the disease by covering the organic deposit by shell secretions. This defence process has been named nacrezation. A classification system based on disease and recovery stages have been established for use in epidemiological and experimental studies (Paillard and Maes, 1994). Deformations of the external shell, showing strong growth cessation, are very often associated with this disease.

This syndrome is a defence reaction and it is not exclusively due to *V. tapetis*, some others parasites (fungi, annelids, and trematodes) are also well known to lead pallial edge reaction, after shell boring, epithelial irritation, or because of living parasites within mantle tissue. Because of the non-specificity of the brown ring symptom, BRD diagnostic must include *V. tapetis* detection.

### Light microscopy

Alterations of the periostracal lamina are observed due to the adhesion and colonization of *V. tapetis* in the first steps of infection, before brown spots deposits appear on the inner shell (Allam *et al.*, 1996; Paillard and Maes, 1995a, b). Tissue lesions are not systematically observed in diseased clams. Alterations of the digestive gland and the mantle are uniquely detected during the more severe stages of the disease (Plana *et al.*, 1991; 1996).

### Physiological alterations

Alterations of immune parameters have been well described in the hemolymph and in the extrapallial fluids of wild and experimentally diseased clams (Allam *et al.*, 2000; 2002; 2006; Choquet *et al.*, 2003; Paillard, 2004). Physiological processes, such as breathing, the activities of clearance and filtration, decrease sharply in clams presenting with advanced stages of the BRD (Flye Sainte Marie *et al.*, 2007; 2009). The repair process is involved in healing and "resistance" clams facing the BRD (Trinkler *et al.*, 2010 a, b; 2011). Transcriptomic study of the mantle and haemocytes of clams after *in vivo* infections with *V. tapetis* have shown alterations of the immune cell cytoskeleton and enzymes involved in phenoloxdase system and biomineralization process (Allam *et al.*, 2014; Brulle *et al.*, 2012; Jeffroy *et al.*, 2011; 2013; Le Bris *et al.*, 2015; Richard *et al.*, 2015). A theoretical model has been recently developed (Paillard *et al.*, 2014); results of simulations illustrate the complex interaction of temperature effects on propagation and viability of the bacterium, on the phagocytic activity of the hemocytes, and on other physiological processes of the host clam.

### Control measures and legislation

A significant increase in temperature reaching 27–30°C has a preventive effect on the development of the disease (Paillard *et al.*, 2004). In France, hatcheries have adapted their clam cycle culture to take into account this effect. To produce disease-free clams, larvae and juveniles are usually produced at sites located south of River Loire in France. Using the model developed by Paillard *et al.* (2014) slight increases in temperature between 1°C and 2°C, generally favoured disease development, indicating that climate warming might facilitate the spread of BRD (Paillard *et al.*, 2014).

### Diagnostic methods

For each clam sample, the Brown Ring Disease (BRD) diagnosis requires two complementary tests.

The development and recovery of BRD is assessed by scaling macroscopic symptoms according to the classification system established by Paillard and Maes, 1994 ( $n = 100$  minimum). The description a new shell repair stage (SRS 2.5) has been added to the classification of BRD (Paillard, 2004).

Quantification of *V. tapetis* burden in shell fluids measured by an immuno-enzymologic method (ELISA), (Noël *et al.*, 1996) or by a recently developed qPCR (Bidault *et al.*, 2015).

In cases where *Vibrio tapetis* is isolated at a new geographic location or within a new host, the use of replica tests is required (Paillard and Maes, 1992). Thereafter, multi-locus sequence analysis (MLSA) is necessary to confirm *V. tapetis* identification of new isolates (Balboa and Romalde, 2013; Balboa *et al.*, 2013).

A clam sample will be considered as healthy under two conditions:

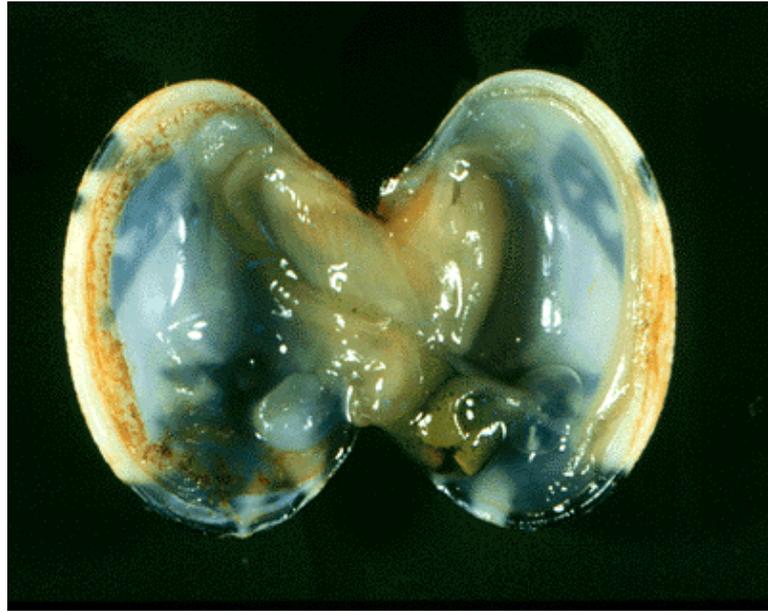
- 1) No detection of brown deposit after macroscopic and microscopic observations (binocular microscope).
- 2) No detection of *V. tapetis* by the ELISA technique (detection limit is  $5 \times 10^4$  CFU ml<sup>-1</sup> (fluids) or g<sup>-1</sup> (whole clams homogenates) or by qPCR (detection limit 11.3 bacteria per mL of extrapallial fluid of clam  $10^3$  CFU ml<sup>-1</sup> in extrapallial fluids).

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**Figure 1.** Clam juvenile, *Ruditapes philippinarum*, exhibiting conchiolin deposit on the inner face of the valves. Experimental transmission, four weeks after pallial *V. tapetis* inoculation.

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