



***STUDY OF POSSIBLE IMMUNE PROTECTION WITH GRADED DOSES OF  
PASTEURELLA MULTOCIDA TYPE B:2 INOCULATED ORALLY IN MICE***

**TAI SHEN RONG**

**FPV 2016 56**

**STUDY OF POSSIBLE IMMUNE PROTECTION WITH GRADED DOSES OF  
*PASTEURELLA MULTOCIDA* TYPE B:2 INOCULATED ORALLY IN MICE .**

**TAI SHEN RONG**

**A project paper submitted to the  
Faculty of Veterinary Medicine, University Putra Malaysia  
In partial fulfillment of the requirement for the  
DEGREE OF DOCTOR OF VETERINATY MEDICINE  
University Putra Malaysia  
Serdang, Selangor DarulEhsan.**

**March 2016**

It is hereby certified that we have read this project paper entitled “Study of Possible Immune Protection with Graded Dose of *Pasteurellamultocida*Type B:2 Inoculated Orally in Mice”, by Tai ShenRong and in our opinion it is satisfactory in term of scope, quality, and presentation as partial fulfillment of the requirement for the course VPD 4999-Project.

---

DR. FAEZ FIRDAUS JESSE ABDULLAH

D.V.M (UPM), Ph.D. (UPM),

Lecturer,

Faculty of Veterinary Medicine

University Putra Malaysia

(Supervisor)

---

PROF. DR. MOHD ZAMRI SAAD

D.V.M (UPM), Ph.D. (UK),

Lecturer,

Faculty of Veterinary Medicine

University Putra Malaysia

(Co- Supervisor)

---

DR. ANNAS SALLEH

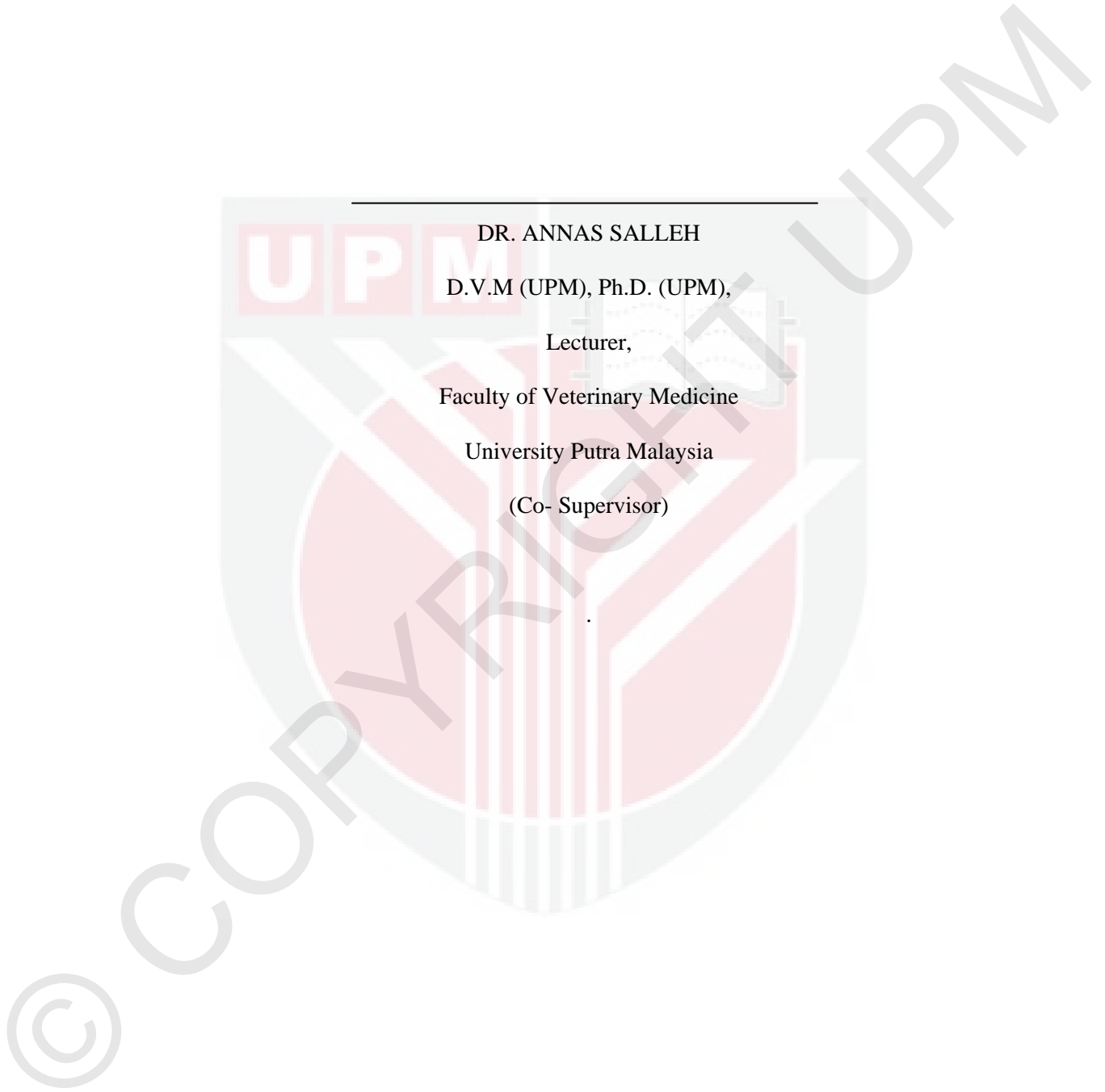
D.V.M (UPM), Ph.D. (UPM),

Lecturer,

Faculty of Veterinary Medicine

University Putra Malaysia

(Co- Supervisor)



## **ACKNOWLEDGEMENT**

I would like to extend my gratitude to Dr. FaezFirdaus Jesse Abdullah, as my supervisor, for his invaluable time, guidance, knowledge, and advice for completing this project.

Acknowledgement also goes to Dr. Eric Lim and Dr. Nagachandra who helped and guided me on my clinical works during my project time.

A word of thanks is also conveyed to Mr. Jefri from Department of Veterinary Clinical Studies and Madam Latifah from Histopathology Laboratory, Universiti Putra Malaysia for their technical assistance and support. This paper would not have completed without the help of them.

I would also like to use this opportunity to thanks my family and friend, who gave me metal support to finish my project in time.

Lastly, acknowledgment also goes to those involve directly and indirectly in the completion of this study.

## CONTENTS

	<b>Pages no</b>
<b>TITLE</b>	<b>i</b>
<b>CERTIFICATION</b>	<b>ii - iii</b>
<b>ACKNOWLEDGEMENT</b>	<b>iv</b>
<b>CONTENTS</b>	<b>v - vi</b>
<b>LIST OF TABLES</b>	<b>vii</b>
<b>LIST OF FIGURES</b>	<b>viii - x</b>
<b>ABSTRACT</b>	<b>xi - xii</b>
<b>1.0 INTRODUCTION</b>	<b>1 – 2</b>
<b>2.0 LITERATURE REVIEW</b>	<b>3 - 6</b>
<b>2.1 <i>Pasteurellamutocida</i></b>	
<b>2.2 Haemorrhagic septicaemia (HS)</b>	
<b>2.3 Diagnostic Technique</b>	
<b>2.4 Treatment, Control and Prevention</b>	
<b>2.5 Previous Studies</b>	
<b>2.5.1 Cattle</b>	
<b>2.5.2 Chicken</b>	
<b>2.5.3 Mice</b>	
<b>3.0 MATERIALS AND METHODS</b>	<b>7 – 9</b>
<b>3.1 Mice</b>	
<b>3.2 Inoculums</b>	
<b>3.3 Study Designs</b>	
<b>3.4 Sampling and Cultures</b>	

<b>3.5 Histopathology Lesion Scoring</b>	
<b>3.6 Statistical Analysis</b>	
<b>4.0 RESULTS</b>	<b>10 – 18</b>
<b>4.1 Clinical Observation</b>	
<b>4.2 Lethality Rate Between Groups</b>	
<b>4.3 Detection of Organism From Cultures and Microscope</b>	
<b>4.4 Post Mortem and Histopathological Findings</b>	
<b>5.0 DISCUSSION</b>	<b>19 – 21</b>
<b>6.0 CONCLUSION</b>	<b>22</b>
<b>7.0 REFERENCES</b>	<b>22 – 27</b>
<b>8.0 APPENDICES</b>	<b>28 – 37</b>

**LIST OF TABLES**

	<b>Page No</b>
<b>Table 1:</b> Scoring system for histopathological lesions.	<b>9</b>
<b>Table 2:</b> Mean scores of clinical signs observed in different groups	<b>28</b>
<b>Table 3:</b> Survival times in between different groups	<b>28</b>
<b>Table 4:</b> Time of Death between Groups	<b>28</b>
<b>Table 5:</b> Distribution of inflammatory cell response in different organs of different groups	<b>29</b>
<b>Table 6:</b> Distribution of haemorrhages and congestions in different organs of different groups	<b>29</b>
<b>Table 7:</b> Distribution of degenerations and necrosis in different organs of different groups	<b>29</b>
<b>Table 8:</b> Distribution of oedema in lung of different groups	<b>29</b>
<b>Table 9:</b> Total of positive and negative bacterial culture from organs of survived and dead mice.	<b>30</b>



## LIST OF FIGURES

	<b>Page No</b>
<b>Figure 1: Comparison between mean clinical scores of different groups</b>	<b>10</b>
<b>Figure 2: Mean survival times in different groups</b>	<b>11</b>
<b>Figure 3: Mean time of death between groups for first and second challenge.</b>	<b>12</b>
<b>Figure 4: Bacteria Culture from Organs of Survived and Dead Mice</b>	<b>13</b>
<b>Figure 5: (a) Blood culture showing greyish mucoid colonies; (b) Blood culture showing rounded greyish colonies; (c) Gram negative rod bacteria; (d) Wright's stain showing bipolar rod bacteria.</b>	<b>14</b>
<b>Figure 6: Mean lesion scores of inflammatory cells in different organs of different groups</b>	<b>15</b>
<b>Figure 7: Mean lesion scores of haemorrhage and congestions in different organs of different groups</b>	<b>16</b>
<b>Figure 8: Mean lesion scores of degenerations and necrosis in different organs of different groups</b>	<b>17</b>
<b>Figure 9: Mean lesion scores for oedema in different organs of different groups</b>	<b>18</b>
<b>Figure 10: Showed one mouse reduced alertness and isolate from others</b>	<b>31</b>
<b>Figure 11: Mice showed ruffled fur and huddle together</b>	<b>31</b>
<b>Figure 12: Mice showed severe ocular discharges</b>	<b>31</b>

	<b>Page No</b>
<b>Figure 13:</b>	
<b>(a) Congestion of superficial blood vessels;</b>	<b>32</b>
<b>(b) normal superficial blood vessels</b>	
<b>Figure 14:</b>	
<b>Haemorrhage and congested lungs</b>	<b>32</b>
<b>Figure 15:</b>	
<b>Haemorrhage and congested liver.</b>	<b>32</b>
<b>Figure 16:</b>	
<b>Congested and enlarged spleen</b>	<b>33</b>
<b>Figure 17:</b>	
<b>Congested and enlarged kidneys</b>	<b>33</b>
<b>Figure 18:</b>	
<b>Photomicrograph of the heart, H&amp;E, 400X.</b>	<b>33</b>
<b>a) Degeneration and necrosis; b) Inflammatory cells infiltration</b>	
<b>Figure 19:</b>	
<b>Photomicrograph of the lung, H&amp;E, 400X.</b>	<b>34</b>
<b>a) Mild inflammatory cells infiltration and mild congestion;</b>	
<b>b) Moderate inflammatory cells infiltration with mild congestion and oedema</b>	
<b>Figure 20:</b>	
<b>Photomicrograph of the lung, H&amp;E, 400X.</b>	<b>34</b>
<b>a) Severe inflammatory cells infiltration;</b>	
<b>b) Mild haemorrhage and congestion</b>	
<b>Figure 21:</b>	
<b>Photomicrograph of the liver, H&amp;E, 400X.</b>	<b>35</b>
<b>a) Congested central vein;</b>	
<b>b1) Inflammatory cells infiltration;</b>	
<b>b2) Degeneration and necrosis</b>	
<b>Figure 22:</b>	
<b>Photomicrograph of the spleen, H&amp;E, 400X.</b>	<b>35</b>
<b>a) Haemorrhage and congestion;</b>	
<b>b) Inflammatory cells infiltration;</b>	

**c) Degeneration and necrosis**

	<b>Page No</b>
<b>Figure 23: Photomicrograph of the kidney, H&amp;E, 400X.</b>	<b>36</b>
<b>a) Mild haemorrhage and congestion;</b>	
<b>b) Mild degeneration and necrosis</b>	
<b>Figure 24: Photomicrograph of the stomach, H&amp;E, 400X.</b>	<b>36</b>
<b>a) Mild haemorrhage and congestion;</b>	
<b>b) Mild degeneration and necrosis;</b>	
<b>c) mild inflammatory cell infiltration</b>	
<b>Figure 25: Photomicrograph of the small intestine, H&amp;E, 400X.</b>	<b>37</b>
<b>a) Mild haemorrhage and congestion;</b>	
<b>b) Mild inflammatory cell infiltration</b>	
<b>Figure 26: Photomicrograph of the large intestine, H&amp;E, 400X.</b>	<b>37</b>
<b>a) Mild haemorrhage and congestion;</b>	
<b>b) Mild degeneration and necrosis</b>	

## ABSTRACT

Haemorrhagic septicaemia (HS) is an acute fatal septicaemic disease in cattle and buffaloes caused by *Pasteurella multocida* Type B:2 in Malaysia. There is need to develop a vaccine easily administered compared to those currently used. This study describes the possibility of using graded doses of oral bacterium to induce immunity. A total of 26 mice were divided into treatment groups (Group 1, 2, 3, and 4) each with 5 mice and control (n=6) groups. Treatment groups were inoculated orally with 0.2ml of 103, 105, 107 and 109 colonies forming units (CFU) respectively, while control received 0.2ml of phosphate buffered saline (PBS). Surviving mice were re-challenged with 0.2 ml of 107 CFU orally and observed for another 7 days. Clinical signs, mortality rate and histopathological lesions were examined. All clinical signs were observed to be not significantly ( $P > 0.05$ ) observed in Group 1 and 2 except (level of alertness and ocular discharges) in Group 3 and 4. Presence of inflammatory cells, haemorrhages and congestions were mild to moderately observed in all treatment groups. However, degeneration and necrosis were observed to be moderate to severe in Group 4. All mice in Group 3 and 4 were euthanized at early stage after second challenged, except Group 1 and 2 with 20% of survival. Bacterial culture from survived mice was significantly lower ( $P < 0.05$ ) in heart, lung, liver, spleen and kidney. *Pasteurella multocida* was confirmed by Gram and Wright's stains from all positive organ cultures. In conclusion, better survivability was observed in oral bacterium of 103 and 105 CFU with milder clinical signs and histological lesions, while 107 and 109 CFU resulted in detrimental effects on mice. Thus, low but not high dose of oral inoculum was believed to induce immunity and possible to use as oral vaccine.

Keywords: *Pasteurella multocida* Type B:2, mice, oral inoculation, clinical signs, histological signs, oral vaccine.



© COPYRIGHT UPM

**ABSTRAK**

Penyakit hawar berdarah adalah penyakit septicaemic mau takut pada lembu dan kerbau yang disebabkan oleh jangkitan *Pasteurellamultocida* Jenis B: 2 di Malaysia. Terdapat keperluan untuk membangunkan satu jenis vaksin mudah diaplikasikan berbanding dengan mereka yang kini digunakan. Kajian ini menerangkan kemungkinan menggunakan dos bergred oral bakteria untuk mendorong imuniti. Seramai 26 mencit dibahagikan kepada kumpulan rawatan (Kumpulan 1, 2, 3, dan 4) masing-masing dengan 5 mencit dan kumpulan kawalan (n = 6). Kumpulan rawatan disuntik secara oral dengan 0.2ml 103, 105, 107 dan 109 jajahan membentuk unit (CFU) masing-masing, manakala kawalan menerima 0.2ml fosfat buffered masin (PBS). Mencit yang hidup pada cabaran pertama telah dicabar semula dengan 0.2 ml 107 CFU secara oral dan diperhatikan untuk 7 hari lagi. Tanda-tanda klinikal, kadar kematian dan lesihistopatologi telah diperiksa. Semua tanda-tanda klinikal yang dapat diperhatikan sebagai tidak bererti ( $P > 0.05$ ) bagi Kumpulan 1 dan 2 tetapi tidak (tahap kewaspadaan dan cecair okular) dalam Kumpulan 3 dan 4. Kehadiran sel-sel inflamasi, hemoraj dan kongesi yang ringan kesederhana diperhatikan dalam semua kumpulan rawatan. Walaubagaimanapun, degenerasi dan nekrosis adalah didapati sederhana kepada teruk dalam Kumpulan 4. Semua mencit dalam Kumpulan 3 dan 4 telah euthanasia pada peringkat awal selepas cabaran kedua, kecuali Kumpulan 1 dan 2 yang didapati 20% hidup. Bakteria kultur dari tikus terselamat adalah jauh lebih rendah ( $P < 0.05$ ) di dalam hati, paru-paru, hati, limpa dan buah pinggang. *Pasteurellamultocida* telah disahkan oleh kesan Gram dan Wright dari semua organ positif. Kesimpulannya, kemandirian lebih baik diperhatikan dalam bakteria oral 103 dan 105 CFU dengan tanda-tanda klinikal yang lebih ringan dan lesihistologi, manakala 107 dan 109 CFU mengakibatkan kesan memudaratkan mencit. Oleh itu, dos rendah tetapi tidak dos tinggi

inokulum oral dipercayai mendorong imuniti dan mungkin untuk digunakan sebagai vaksin oral.

Kata kunci: *Pasteurellamultocida* jenis B:2, mencit, oral inokulum, tanda-tanda klinikal, tanda histological, vaksin oral.



## 1.0 INTRODUCTION

*Pasteurellamultocida* is a non-motile, gram-negative, coccobacillus that is found in the nasopharynx and gastrointestinal tract of many wild and domesticated animals (Suganet *al.*, 2013). It is the aetiological agent for an acute, fatal septicaemic disease known as haemorrhagic septicaemia (HS). The disease mainly is found in South and Southeast Asia, Africa and India (Hussaini&Jumahat, 2014), which include Malaysia. The death usually occurs quickly and mortality rate without prompt antibiotic treatment in a naïve population is close to 100% (Aktorieset *al.*, 2012; Jumahatet *al.*, 2015). However, treatments of infected animals with *P. multocida* are complex and unsuccessful due to increasing antibiotic resistance strains. Vaccination is the principle method of controlling the disease (Zamriet *al.*, 2006) but difficulties in vaccine administration lead to low vaccination coverage and disease outbreaks (Sahareet *al.*, 1993). Moreover, the efficacy and safety of available vaccines are limited (Hussainiet *al.*, 2012). Large-scale vaccination of cattle against HS is not practiced in many countries of Africa (FAO, 2005), which is the same scenario in Malaysia. This could be due to the laborious process such as herding and restraining, which is involved when vaccinating the cattle by injection. In 2013, Zamri had reported the vaccine coverage of HS for buffaloes in Malaysia is just 17% and it was most probably due to difficulty in vaccine administration. Besides, vaccination via injection might result in adverse reaction such as lumps and abscess at injection sites (Verma and Jaiswal, 1998). Although intranasal HS vaccine has been developed in Myanmar, however, it is still laborious to perform in large scale. Safe and effective vaccines against pasteurellosis are still lacking (Hunt *et al.*, 2000). Therefore there is a need to improve the vaccination approaches. There have been previous studies done by (Jesse *et al.*, 2013) on oral inoculation of *P. multocida* using mice model and



shows that it can produce similar clinical signs and pathological lesion in the real host. However, there is still lack of research in immunization against pasteurellosis via oral exposure to the animals. Most of the study is either via subcutaneous route or intraperitoneal route.

Due to the huge economic losses, many research have been carried out to determine which is the protective antigens found in the bacteria. For now, the identified protective antigens are the outer membrane protein-H (OmpH) (Luo *et al.*, 1999), lipoprotein B (Tabatabai and Zehr, 2004), lipopolysaccharide, and one or more iron-responsive OMPs (Ruffolo *et al.*, 1998). However, Boyce and Adler (2006) state that there are “host-respond-proteins” that expressed only during *in vivo* situation and these proteins might be the antigens that able to stimulate full protective immunity against both homogenous and heterogenous infections.

Studying the possible oral immunization of live bacteria in animals can give valuable information regarding the minimal dosage that will protect the host from getting the disease. Besides, this study might result in a new vaccination route where HS vaccine can be given in feed and water. Therefore, this study was conducted to examine the possibility of using oral live bacterium of *P. multocida* to induce immune-protection in mice and the minimal dosage that will protect the host from HS disease.

A. A. (2014). Effect of dose dependent oral inoculation of *Pasteurellamultocida* type B: 2 in mice: Molecular detection and histopathological evaluation. *Research Opinions in Animal & Veterinary Sciences*, 4(10).

Abubakar, M. S., & Zamri-Saad, M. (2011). Clinico-pathological changes in buffalo calves following oral exposure to *Pasteurellamultocida* B: 2. *Basic and Applied Pathology*, 4(4), 130-135.

Ahmad, T. A., Rammah, S. S., Sheweita, S. A., Haroun, M., & El-Sayed, L. H. (2014). Development of immunization trials against *Pasteurellamultocida*. *Vaccine*, 32(8), 909-917.

Aktories, Klaus, Joachim H. C Orth, and Ben Adler. 'PasteurellaMultocida'. Google Books. N.p., 2012.

Ali, O. S., Adamu, L., Abdullah, F. F. J., Abba, Y., Hamzah, H. B., Mohd-Azmi, M. L., ... & Zamri-Saad, M. (2015). Haematological and Histopathological Vicissitudes Following Oral Inoculation of Graded Doses of *Pasteurellamultocida* Type B: 2 and its Lipopolysaccharide in Mice. *Veterinary Science & Technology*, 6(2), 1.

Annas S, Zamri-Saad M, Abubakar MS, Jesse FFA, Zunita Z (2014) Distribution of *Pasteurellamultocida* B:2 in the Respiratory, Gastrointestinal and Urinary Tracts of Buffaloes Following Experimental Subcutaneous Inoculation. *J VeterinarSciTechnol* 5: 177.

Benkirane A, De Alwis MCL (2002) Haemorrhagic septicaemia, its significance, prevention and control in Asia. *Vet Med – Czech* 47: 234-240

Bisht, K. S., Salim, N., Hassan, L., Zunita, Z., Kamarudin, M. I., & Saharee, A. A.

(2006). Temporal Patterns of Haemorrhagic Septicaemia Mortalities in Cattle and Buffaloes in Peninsular Malaysia, 1993-2003. *Journal of Animal and Veterinary Advances*.

Boyce, J. D., & Adler, B. (2006). How does *Pasteurella multocida* respond to the host environment?. *Current opinion in microbiology*, 9(1), 117-122.

Chung, E. L. T., Abdullah, F. F. J., Ibrahim, H. H., Marza, A. D., Zamri-Saad, M., Haron, A. W., ...& Norsidin, M. J. (2016). Clinico-pathology, hematology and biochemistry responses in buffaloes towards *Pasteurella multocida* type B: 2 immunogenically polysaccharide via oral and intravenous routes of infection. *Microbial pathogenesis*, 91, 141-154.

De Alwis, M. C. (1984). Haemorrhagic septicaemia in cattle and buffaloes. *Rev. Sci. Tech. Off. Int. Epizoot.*, 3, 707-30.

De Alwis, M. C. (1982). Immune status of buffalo calves exposed to natural infection with haemorrhagic septicaemia. *Tropical animal health and production*, 14(1), 29-30.

De Alwis, M. C. L. (1992, August). Pasteurellosis in production animals: a review. In *ACIAR proceedings* (Vol. 43, pp. 11-22).

Dua, S. K., & Maheswaran, S. K. (1978). Studies on *Pasteurella multocida*. VI. Nature of systemic immunity and analysis of the correlation between levels of immunity induced by various fowl cholera vaccines and protection against challenge. *Avian diseases*, 748-764.

Dziva, F., Muhairwa, A. P., Bisgaard, M., & Christensen, H. (2008). Diagnostic and typing options for investigating diseases associated with *Pasteurella multocida*. *Veterinary Microbiology*, 128(1), 1-22.

Fao.org. 'EMPRES Transboundary Animal Diseases Bulletin No. 27-2005'. N.p., 2005.

- Homchampa, P., Strugnell, R. A., & Adler, B. (1997). Cross protective immunity conferred by a marker-free *aroA* mutant of *Pasteurella multocida*. *Vaccine*, 15(2), 203-208.
- Horadagoda, N. U., Hodgson, J. C., Moon, G. M., Wijewardana, T. G., & Eckersall, P. D. (2001). Role of endotoxin in the pathogenesis of haemorrhagic septicaemia in the buffalo. *Microbial pathogenesis*, 30(3), 171-178.
- Hunt, M. L., Adler, B., & Townsend, K. M. (2000). The molecular biology of *Pasteurella multocida*. *Veterinary microbiology*, 72(1), 3-25.
- Hussaini, J., Abdullah, M. A., & Ismail, S. (2012). Expression and immunogenicity determination of recombinant clone of *Pasteurella multocida* serotype B against hemorrhagic septicaemia towards a vaccine development. *Journal of Animal and Veterinary Advances*, 11(3), 315–356.
- Hussaini, Jamal, and Noor Masyitah Jumahat. 'Characterization Of Recombinant Protein Of *Pasteurella Multocida* Serotype B'. N.p., 2014
- Jesse, F. F., Affandi, S. A., Osman, A. Y., Adamu, L., Saad, M. Z., Haron, A. W., ... & Saharee, A. A. (2013). Clinico-pathological features in mice following oral exposure to *Pasteurella multocida* B: 2. *IOSR J. Agric. Vet. Sci*, 3(4), 35-39.
- Jumahat, Noor, Zaini Zain, and Jamal Hussaini. 'Identification Of Immunogenic Soluble Protein Of *Pasteurella Multocida*'. *Journal of Advanced Biomedical & Pathobiology Research* 5.1 (2015): n. pag.
- Kalorey, D. R., Yuvaraj, S., Vanjari, S. S., Gunjal, P. S., Dhanawade, N. B., Barbuddhe, S. B., & Bhandarkar, A. G. (2008). PCR analysis of *Pasteurella multocida* isolates from an outbreak of pasteurellosis in Indian pigs. *Comparative immunology, microbiology and infectious diseases*, 31(6), 459-465.
- Kehrenberg, C., Salmon, S. A., Watts, J. L., & Schwarz, S. (2001). Tetracycline resistance genes

in isolates of *Pasteurellamultocida*, *Mannheimiahaemolytica*, *MannheimiaglucoSIDa* and *Mannheimiavarigena* from bovine and swine respiratory disease: intergeneric spread of the tet (H) plasmid pMHT1. *Journal of Antimicrobial Chemotherapy*, 48(5), 631-640.

Khaleel, M. M., Abdullah, F. F. J., Adamu, L., Abba, Y., Haron, A. W., Saad, M. Z., & Omar, A. R. (2014). Histopathological changes in mice infected with river water contaminated by *Pasteurellamultocida* type B: 2. *American Journal of Animal and Veterinary Sciences*, 9(2), 71.

Kharb, S., & Charan, S. (2013). Mouse model of haemorrhagic septicaemia: dissemination and multiplication of *Pasteurellamultocida* B: 2 in vital organs after intranasal and subcutaneous challenge in mice. *Veterinary research communications*, 37(1), 59-63.

Luo, Y., Zeng, Q., Glisson, J. R., Jackwood, M. W., Cheng, I. H. N., & Wang, C. (1999). Sequence analysis of *Pasteurellamultocida* major outer membrane protein (OmpH) and application of synthetic peptides in vaccination of chickens against homologous strain challenge. *Vaccine*, 17(7), 821-831.

Marza, A. D., Abdullah, F. F. J., Ahmed, I. M., Chung, E. L. T., Ibrahim, H. H., Zamri-Saad, M., ... & Lila, M. A. M. (2015). Involvement of nervous system in cattle and buffaloes due to *Pasteurellamultocida* B: 2 infection: A review of clinicopathological and pathophysiological changes. *Journal of Advanced Veterinary and Animal Research*, 2(3), 252-262.

OIE, 2008. Chapter 2.4.12- Haemorrhagic septicaemia. Terrestrial Manual

OIE, 2012. Haemorrhagic septicemia. Terrestrial Manual.

Pati, U. S., Srivastava, S. K., Roy, S. C., & More, T. (1996). Immunogenicity of outer

membrane protein of *Pasteurellamultocida* in buffalo calves. *Veterinary Microbiology*, 52(3), 301-311.

Ruffolo, C. G., Jost, B. H., & Adler, B. (1998). Iron-regulated outer membrane proteins of *Pasteurellamultocida* and their role in immunity. *Veterinary microbiology*, 59(2), 123-137.

Saharee, A.A., N.B. Salim, A. Rasedee and M.R. Jainudeen, 1993. Haemorrhagic septicaemia carriers among cattle and buffaloes in Malaysia. In: Patten, B.E., T.L. Spencer, R.B. Johnson, D. Hoffmann and L. Lehane (Eds.), *Pasteurellosis in production animals. Proceeding of An International Workshop. Bali, Indonesia, August 10-13, 1992. ACIAR Proceedings No. 43: 89-91.*

Seleim, R. S. (2003). Review: Major Pathogenic Components Of *Pasteurellamultocida* And *Mannheimia (Pasteurella) Haemolytica* Isolated From Animal Origin.

Shivachandra, S. B., Viswas, K. N., & Kumar, A. A. (2011). A review of hemorrhagic septicemia in cattle and buffalo. *Animal Health Research Reviews*, 12(01), 67-82.

Sugun, Manasa et al. 'Isolation And In Vitro Antibiotic Susceptibility Of *Pasteurella Multocida* From Cattle Origin. International Research Journal Of Microbiology'. ResearchGate. N.p., 2013.

Tabatabai, L. B., & Zehr, E. S. (2004). Identification of five outer membrane-associated proteins among cross-protective factor proteins of *Pasteurellamultocida*. *Infection and immunity*, 72(2), 1195-1198.

Verma, R., & Jaiswal, T. N. (1998). Haemorrhagic septicaemia vaccines. *Vaccine*, 16(11), 1184-1192.

Youssef, E. A. (2011). Study of pathogenicity and immunogenicity of *Pasteurellamultocida* recently isolated from infected rabbits. *Egyptian Journal of Agricultural Research*.