

CASE NUMBER: 03F-96-P2-41

DATE: Dec 22, 2003

HISTOPATHOLOGY:

Slide 103, P2-41-1:

1). Liver: Hepatitis, mild, multifocal, lymphocytic, chronic

There are no overt lesions within the heart, peripheral nerve, spleen, adipose tissue, peripheral vasculature or kidney.

Slide 104, P2-41-2:

There are no overt lesions within the peripheral nerve, liver, spleen, heart, peripheral vasculature or kidney.

Slide 105, P2-41-3:

- 1). Heart: Myocarditis, moderate, focally disseminate, granulomatous, necrotising, with scattered intralesional cocci
- 2). Liver: Hepatitis, moderate, multifocal, granulomatous, with rare intralesional cocci
- 3). Spleen: Splenitis, moderate, multifocal to coalescing, pyogranulomatous, subacute to chronic with scattered intralesional cocci

There are no overt lesions within the peripheral nerve or peripheral vasculature.

Slide 106, P2-41-4:

There are no overt lesions within the peripheral nerve, liver, spleen, heart, peripheral vasculature or kidney.

Slide 107, P2-41-5:

1). Spleen, ellipsoids: Histiocytosis, moderate, diffuse

There are no overt lesions within the heart, peripheral vasculature, peripheral nerve, liver, or kidney.

Slide 108, P2-41-6:

- 1). Kidney: Granuloma, marked, multifocal to coalescing, chronic with occasional central necrosis
- 2). Heart: Myocarditis, focally disseminate, marked, granulomatous, necrotising, subacute to chronic with intralesional bacilli
- 3). Liver: Hepatitis, mild to moderate, multifocal, granulomatous, chronic
- 4). Spleen: Splenitis, mild, multifocal, granulomatous, chronic with lymphoid depletion

There are no overt lesions within the peripheral vasculature or peripheral nerves.

Slide 109, P2-41-7:

1). Liver: Hepatitis, severe, nodular to diffuse, necrotising, acute with intralesional cocci and bacilli

- 2). Heart: Epicarditis, moderate, focally extensive, granulomatous, chronic with focally extensive ventricular hemorrhage
- 3). Spleen, capsule: Peritonitis/serositis, mild to moderate, focal, granulomatous with lymphoid depletion
- 4). Anterior kidney, sinusoids: Histiocytosis, moderate, diffuse

There are no overt lesions within the peripheral nerves or peripheral vasculature.

Slide 110, P2-41-8:

- 1). Spleen: Splenitis, moderate, multifocal, fibrinohemorrhagic with intracellular coccobacilli

There are no overt lesions within the heart, liver, peripheral nerve, peripheral vasculature or kidney.

COMMENTS:

In 6 of 8 slides there is variable inflammation and necrosis of multiple internal viscera which cumulatively would have contributed at least moderately to impaired homeostasis. Based on the intralesional bacilli and cocci noted in slides 110, 108 and 105, a bacterial etiology is a prime consideration and follow up culture (and sensitivity), IFAT, or polymerase chain reaction may be considered. The lymphoid depletion noted in the spleen and kidney is likely related to peripheral mobilization of lymphocytes to nidi of inflammation. The ellipsoid histiocytosis is attributed to persistent antigenemia. As these fish were likely shedding pathogens antemortem, additional stock have presumably been exposed, are possibly infected and should be closely monitored for possible development of clinical signs.

FINAL REPORT