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Circulating concentrations of bovine pregnancy-associated glycoproteins and late embryonic mortality in lactating dairy herds

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ABSTRACT

The objectives of these experiments were as follows: (1) to determine the association between circulating concentrations of pregnancy-associated glycoproteins (PAG) and late embryonic mortality (EM) in lactating dairy cattle following fixed-time artificial insemination (TAI) on d 0 or timed embryo transfer (TET) on d 7, (2) to identify a circulating concentration of PAG on d 31 below which late EM would be likely to occur, and (3) to identify when during gestation (d 31–59) late EM is occurring. Cows were diagnosed pregnant on d 31 of gestation based on presence of a fetal heartbeat and reconfirmed to be pregnant on d 59 of gestation. Late EM occurred when a cow had a viable embryo on d 31 of gestation but not on d 59 following TAI or TET. Only pregnant cows on d 31 were included in the analysis (TAI-maintained, n = 413; TAI-EM, n = 77; TET-maintained, n = 238; TET-EM, n = 47). Cows that were pregnant at d 31 of gestation and maintained the pregnancy until d 59 had significantly higher circulating concentrations of PAG at d 31 of gestation compared with cows that experienced late EM between d 31 and 59 of gestation in both TAI and TET. To conduct a more stringent test of the effectiveness of a single circulating PAG concentration (d 31) to predict EM, a receiver-operating characteristic curve was generated to identify a PAG concentration on d 31 that would predict EM with >95% accuracy in cows that received TAI or TET. Based on positive and negative predicative value analysis, a circulating concentration of PAG below 1.4 ng/mL (TAI; minimal detectable level 0.28 ng/mL) and 1.85 ng/mL (TET) was 95% accurate in predicting EM (between d 31 and 59) at d 31 of gestation, respectively. Following TET, embryonic loss was tracked by Doppler ultrasound, progesterone, and PAG from d 24 to 59 of gestation, with more than 50% of the loss occurring between d 31 and 38 of gestation. In summary, circulating concentrations of PAG on d 31 of gestation may provide a good marker for predicting EM between d 31 and 59 of gestation, and the data suggest that this model could help predict which cows will undergo late EM.

Key words: bovine pregnancy-associated glycoprotein, pregnancy loss

INTRODUCTION

The factors negatively affecting fertility in the lactating dairy cow are multifaceted; however, it is well documented that embryonic mortality (EM) during the first third of gestation plays a large part in reproductive inefficiency. Intensive genetic selection over the past few years has emphasized both milk production and fertility. This increased selection pressure on fertility has led to a notable increase in reproductive success in dairy cows but has not eliminated the embryonic wastage that occurs during early gestation. Multiple reports have demonstrated that early EM (<28 d of gestation) accounts for a large amount of the loss that occurs during gestation (DeJarnette et al., 1992; Dalton et al., 2001; Sartori et al., 2002). Loss of pregnancies after d 28 represents a smaller proportion of EM. However, the economic consequences of late EM (>28 d of)gestation) are reported to be disproportionately greater than that of early EM, because late EM can cause a significant delay in conception date (Silke et al., 2002). In cattle, late EM has been reported to range from 3.2 to 42.7% (Vasconcelos et al., 1997; Cartmill et al., 2001a,b; Lamb, 2002; Ribeiro et al., 2011; Ribeiro et al., 2012; Aono et al., 2013; Pereira et al., 2013; Ribeiro et al., 2013); however, little is known about the exact causes of these losses. The timing of this loss between

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d 30 to 60 of gestation suggests compromised placental function because the timing corresponds to when establishment of a functional cotyledonary placenta in cattle is taking place (e.g., between d 25 and 40; Pfarrer et al., 2006; Aires et al., 2014).

Because placental insufficiency is a potential cause of late EM, identification of a marker of placental function in the maternal circulation may be a useful tool for predicting late EM. Bovine pregnancy-associated glycoproteins (**PAG**) are secreted by the ruminant placenta (Wallace et al., 2015) into the maternal circulation starting about d 24 of gestation and have been used to diagnose pregnancy in cattle (Sasser et al., 1986; Zoli et al., 1992; Green et al., 2005) and may serve as a marker of placental function (Perry et al., 2005; Breukelman et al., 2012; Pohler et al., 2013). The objectives of these experiments were to examine the relationship between d-31 circulating concentrations of PAG and embryonic survivability in lactating dairy cows undergoing timed AI (**TAI**) or timed embryo transfer (**TET**), along with determining when the majority of late EM is occurring during gestation.

MATERIALS AND METHODS

All animal procedures followed the recommendations of the Guide for the Care and Use of Agricultural Animals in Agricultural Research and Teaching (FASS, 1999). Cows that were past the voluntary waiting period (40 d) and not pregnant received the following protocol: an intravaginal progesterone $(\mathbf{P4})$ insert containing 1.9 g of P4 (Zoetis, São Paulo, Brazil) and 2.0 mg (i.m.) of estradiol benzoate (2.0 mL of Estrogin, Farmavet, São Paulo, SP, Brazil) on day -11, 25 mg (i.m.) of dinoprost (PGF; 5.0 mL of Lutalyse, Zoetis) on day -4, intravaginal-P4-insert withdrawal and 1.0 mg (i.m.) of estradiol cypionate (0.5 mL of E.C.P., Zoetis) on day -2, and fixed TAI on d 0 (study 1) or TET on d 7 (study 2 and 3). In study 1 and 2 only pregnant cows at d 31 were used, based on presence of a viable embryo (presence of a heartbeat) detected by ultrasound scan. In study 3 only pregnant cows were used, based on the presence of a vascularized corpus luteum (CL) at d 24 of gestation, evaluated with a color Doppler ultrasound, an increased circulating concentration of P4 on d 24 (>1.0 ng/mL), and circulating d-24 PAG greater than the baseline of the assay.

Experiment 1—TAI

Timed AI was performed (d 0) by using commercial frozen-thawed semen from 13 different sires. This study used a total of 490 pregnant lactating Holstein cows. At the beginning of the experiment (d -11), cows aver-

aged 147 \pm 4.19 DIM, yielded 29.5 \pm 0.3 kg of milk per day, and had a BCS of 2.84 \pm 0.02 [in a 1 (emaciated) to 5 (obese) scale (Wildman et al., 1982)]; 264 were primiparous (= 1); 209 were multiparous (\geq 2); and cows had been bred 1.96 \pm 0.11 times.

Experiment 2—TET

Timed embryo transfer was performed (d 7) by using fresh embryos produced in vitro from 76 donors and commercial frozen-thawed sexed semen (X-bearing sperm) from 9 sires. This study used a total of 285 pregnant lactating Girolando cows (~three-quarters Holstein—*Bos taurus* × *Bos indicus*). At the beginning of the experiment (d -11), cows averaged 135 ± 4.9 DIM, yielded 18.9 ± 0.4 kg of milk per day, and had a BCS of 2.86 ± 0.03 [in a 1 (emaciated) to 5 (obese) scale (Wildman et al., 1982)]; 90 were primiparous (= 1); 148 were multiparous (≥ 2), and cows had been bred 2.07 ± 0.15 times.

Experiment 3—Profiling of Embryonic Loss Following TET

The TET was performed (d 7) by using fresh embryos produced in vitro from 24 donors and commercial frozen-thawed sexed semen (X-bearing sperm) from 8 sires. This study used a total of 101 pregnant lactating Girolando cows. At the beginning of the experiment (d -11), cows averaged 109 \pm 10.6 DIM, yielded 22.9 \pm 0.8 kg of milk per day, and had a BCS of 3.08 \pm 0.04 [in a 1 (emaciated) to 5 (obese) scale (Wildman et al., 1982)]; 50 were primiparous (= 1); 51 were multiparous (\geq 2); and cows had received an embryo 2.27 \pm 0.18 times.

Transrectal Ultrasonography

The uteri of all cows in experiments 1 and 2 were examined on d 31 of gestation following TAI or TET and at d 59 of gestation to determine pregnancy status (viable fetal heartbeat) and incidence of late embryonic or fetal mortality. In experiment 3, cows were examined by ultrasonography on d 24 by using a Doppler ultrasound probe to determine blood flow to the CL. Cows were considered to be pregnant on d 24 if they met the following criteria: (1) a well-vascularized CL, as detected by ultrasound, on the same ovary that possessed a CL at the time of embryo transfer, (2) increased circulating concentrations of P4 (>1.0 ng/mL) on d 24, and (3) the presence of elevated d-24 PAG. Normal transrectal ultrasonography as explained above was conducted on d 31, 38, 45, 52, and 59 of gestation in all cows. Only cows bearing singletons were used in this study.

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