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A novel diagnostic approach to detecting porcine epidemic diarrhea virus: The lateral immunochromatography assay

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Porcine epidemic diarrhea virus (PEDV) causes acute diarrhea and dehydration in sucking piglets and has a high mortality rate. An immunochromatography (IC) assay, known as a lateral flow test, is a simple device intended to detect the presence of target pathogens. Here, we developed an IC assay that detected PEDV antigens with 96.0% (218/227) sensitivity and 98.5% (262/266) specificity when compared with real-time reverse transcriptase (RT)-PCR using FAM-labeled probes based on sequences from nucleocapsid genes. The detection limits of the real-time RT-PCR and IC assays were 1×10^2 and 1×10^3 copies, respectively. The IC assay developed herein did not detect non-specific reactions with other viral or bacterial pathogens, and the assay could be stored at 4 °C or room temperature for 15 months without affecting its efficacy. Thus, the IC assay may result in improved PED detection and control on farms, and is a viable alternative to current diagnostic tools for PEDV.

1. Introduction

Porcine epidemic diarrhea (PED), which is caused by porcine epidemic diarrhea virus (PEDV), is an acute, highly contagious, and devastating enteric disease characterized by vomiting, watery diarrhea, and dehydration, resulting in high mortality rates in suckling pigs (Pijpers et al., 1993). PEDV is an enveloped RNA virus belonging to the order *Nidovirales*, genus *Alphacoronavirus*, within the *Coronaviridae* family (Bridgen et al., 1998; Brian and Baric, 2005; Sergeev, 2009). The viral genome comprises a single-stranded positive-sense RNA of approximately 28 kb, which encodes six genes: replicase (Rep), spike (S), ORF3, envelope (E), membrane (M), and nucleoprotein (N) (Duarte and Laude, 1994; Utiger et al., 1995; Chen et al., 2008). PEDV was first reported in growing pigs in the United Kingdom in 1971 (Pensaert and de Bouck, 1978) and subsequently in a number of European countries (Nagy et al., 1996; Pritchard et al., 1999; Martelli et al., 2008); more recently, the virus has appeared in China, Japan, Thailand, Vietnam, and South Korea (Sueyoshi et al., 1995; Song et al., 2006; Puranaveja et al., 2009; Chen et al., 2010).

PED is clinically indistinguishable from other porcine gastroenteric diseases, including those caused by transmissible gastroenteritis (TGE), rotavirus, or bacteria. Confirmatory laboratory tests are therefore necessary to definitively identify the causative pathogen. Several methods of detecting PEDV have been published: reverse transcriptase polymerase chain reaction (RT-PCR), antigen enzyme-linked immunosorbent assay (ELISA), and immunohistochemistry (Callebaut et al., 1982; van Nieuwstadt et al., 1988; Sueyoshi et al., 1995; Paton et al., 1997; Kim et al., 2000, 2007; Shibata et al., 2000; Rodák et al., 2005). Although these techniques have been used widely to diagnose PEDV infection, they are laborious, time-consuming, and require laboratory expertise and/or special equipment, making them unsuitable for field use. These methods are also unsuitable for the management of emergent PED outbreaks, thereby restricting their application to veterinary clinical diagnosis.

Immunochromatography (IC) assays were first described in the late 1960s and were originally developed to test for serum proteins (Kohn, 1968). Over the past decade, many IC assays have been developed to detect infectious diseases (Allwinn et al., 1999;

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Aidoo et al., 2001; Berdal et al., 2000; Grunow et al., 2000; Buser et al., 2001) and for use in veterinary medicine (Klingenberg and Esfandiari, 1996; Laitinen and Vuento, 1996; Oh et al., 2006; Meng et al., 2014). Lateral flow IC assays are generally not quantitative and provide only a yes/no answer; they also lack multiplexing (Zhou et al., 2012). Despite these disadvantages, the IC assay is straightforward to use because it simply requires that the user dilute the test agent in a sample buffer prior to detection. Thus, IC assays yield rapid and accurate results without the need for specialized equipment or trained personnel. The assays are also very stable and robust (they have a long shelf life and do not usually require refrigeration) and are relatively inexpensive to produce. These features make them ideal for both field and laboratory testing of samples.

Here, we describe a novel diagnostic approach to detecting PEDV antigens in diarrhea samples from piglets naturally infected with PEDV. We also evaluated the assay as a potential alternative to current diagnostic methods.

2. Materials and methods

2.1. Reference panel and field samples

Reference panels comprised PED virus strains (K14JB01, SM98, and DR13) and non-PED samples containing transmissible gastroenteritis (TGE), porcine coronavirus (PRCV), or bacteria (Supplemental Fig. 1). K14JB01 is a novel variant PEDV strain isolated from an infected pig in South Korea in 2013 (Cho et al., 2014). All of the reference panels were obtained from the Korea Veterinary Culture Collection (KVCC) (http://kvcc.kahis.go.kr) and were used to test the specificity of the developed IC assay. A total of 493 fecal samples (324 diarrhea and 169 normal feces) were collected from piglets in Chungnam, Kangwon, Gyeongbuk, and Gyeongnam provinces in South Korea. Of the 493 field samples, 77.3% (381/493) came from piglets less than 3 weeks old and 22.7% (112/493) came from piglets more than 3 weeks old.

2.2. Real-time RT-PCR

Total RNA was extracted from fecal samples using the Qiagen viral RNA kit (Hilden, Germany), according to the manufacturer's instructions. The following primers were used for real-time RT-PCR: PED-F, CGCAAAGACTGAACCCA CTAATTT; PED-R, TTGCCTCTGTTGTTACTTGGAGAT; and PED-FAM, FAM-TGTTGCCATTGCCACGACTCCTGC-BHQ (Kim et al., 2007). The real-time RT-PCR mixture was prepared using the Taq^{TM} Universal Probes One-step kit (Bio-Rad Co., Cat no. 172-5141, USA) and comprised 5 μL of extracted RNA, 1 μL of each primer (F, R) and probe, 10 μL of 2× buffer, 0.5 μL of 25× enzyme, and 1.5 μL of nuclease-free water in a total reaction volume of 20 μL. The PCR conditions were as follows: reverse transcription for 30 min at 48 °C, followed by denaturation for 5 min at 95 °C, and 45 cycles at 95 °C for 10 s and 60 °C for 1 min. PCR was performed in a LightCycler® 96 real-time PCR machine (Roche Diagnostics, Basel, Switzerland).

2.3. IC antigen kit for detecting PEDV

The IC kit for diagnosis of PEDV comprised an IC device, dilution buffers, and droppers. Dilution buffers comprised 50 mM borax buffer, Tween 20, sodium azide, and 1.2 N NaCl. The IC device comprised a sample pad, a fecal separation pad, a gold-conjugate pad, a nitrocellulose membrane, and an absorbance pad. The control line of the IC strip was coated with 2.6 μg of a goat anti-mouse antibody, and the test line was coated with 2.1 μg of an anti-PEDV monoclonal antibody (5F15 mAb). The gold-conjugate pad was coated with another PEDV monoclonal antibody (8D28 mAb) conjugated to gold nanoparticles. The monoclonal antibodies (5F15 and 8D28) were identified to bind the nucleocapsid protein of PEDV. The monoclonal capture antibody was immobilized on the nitrocellulose membrane and dispensed using the dispenser (model no. Matrix 1600) provided by KINEMATIC AUTOMATION. The monoclonal antibodies were generated against the SM-98 strain of PEDV. The IC antigen kit (VDRG® PEDV Ag Rapid Kit, Catalog no. PS-PED-11) was purchased from Median Diagnostics Inc. (Chuncheon, South Korea). Briefly, porcine fecal samples (50–100 mg) were placed in sample collection tubes containing 1 mL of dilution buffer (50 mM Borax buffer (pH 9.0), 0.4% Tween-20, 1.2 M NaCl, and 0.1% sodium azide) and mixed vigorously. The tube was then left to stand for 3 min at room temperature to allow particles to settle. Finally, four drops of sample (100 μL) solution were loaded into the loading hole using a disposable dropper and the results were interpreted after 10 min. Three technicians read the results obtained by IC assay.

2.4. Storage stability test

The long-term stability of an IC assay is an important consideration if it is to be applicable in the field. The stability of antibodies (8D28 mAb and 5F15 mAb) immobilized on the IC strip was tested by storing the assay at 4 °C, 28 °C, or 45 °C for 0, 3, 6, 9, 12, and 15 months. Each experiment was repeated three times. After each time interval, the diagnostic accuracy was tested using a PEDV-positive reference sample (SM98 strain) at concentrations of 10^3 and 10^2 $TCID_{50}$/mL. PEDV-negative reference samples (confirmed by real-time RT-PCR) were also tested.

2.5. PEDV animal challenge test

Three-day-old PED-negative piglets were purchased from a PED-free farm and fecal swabs were taken prior to PEDV challenge. Each piglet was then challenged (orally) with the K14JB01 strain (7×10^6 copies). Fecal samples were obtained by anal swabbing at 1, 2, 3, 4 and 5 days post-challenge (dpc), and real-time RT-PCR and IC assays were performed simultaneously.

2.6. Calculation of diagnostic sensitivity and specificity

All 493 field fecal samples were tested simultaneously by real-time RT-PCR and in the IC assay. Samples were classified as "true positive" (TP), "true negative" (TN), "false positive" (FP), or "false negative" (FN) according to the real-time RT-PCR results. The diagnostic sensitivity and specificity of the IC assay were calculated as follows: sensitivity = TP/(TP + FN) × 100, and specificity = TN/(TN + FP) × 100. The results were expressed as percentages.

2.7. Calculation of Cohen's kappa value

Cohen's kappa was introduced as a measure of agreement. Cohen's kappa adjusts the observed proportional agreement to take account of the levels of agreement between real-time PCR and IC assay that would be expected to occur by chance.

The following calculation was used: Kappa = $(p - pe)/(1 - pe)$ (where p is the proportion of units showing agreement; pe is the proportion of units expected to agree by chance).

3. Results

3.1. PED antigen detection limit and non-specific reactions

The threshold of the real-time RT-PCR assay was set at a C_T value of 35 cycles according to the sigmoid profile obtained at SM98 concentrations from 10^6 to 10^1 copies (data not shown). The mean C_T