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## Research Article

# A Study on the Pathological and Bacterial Shedding of 9R *Salmonella gallinarum* and *Salmonella pullorum* Killed Vaccine in Layer Hens

\*<sup>1</sup>Hani H. Al-Daraji

## About Article

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### About Author

<sup>1</sup> Department of Veterinary Pathology  
and Poultry Diseases, College of  
Veterinary Medicine, University of  
Baghdad, Baghdad, Iraq

Contact @ Hani H. Al-Daraji  
[hani.helal2207@covmuobaghdad.edu.iq](mailto:hani.helal2207@covmuobaghdad.edu.iq)

## ABSTRACT

This study aimed to evaluate the effectiveness of immunization of the 9R *Salmonella gallinarum* strain and killed *Salmonella Pullorum* vaccine in protecting layer chickens from *Salmonella pullorum* infection. 60 chickens were divided into three groups: one group received the 9R vaccine; the other received the killed *Salmonella pullorum* vaccine, and the third group the control negative. After challenge revealed that the group vaccinated with the killed vaccine (G2) noticed slight histopathological changes, represented by moderate MNCs infiltration with heterophils whereas the group that received the live vaccine (G1) showed moderate multiple MNCs infiltration and mild sinusoidal congestion with the prominence of Kupffer cells compared to the third group, which showed focal MNCs infiltration forming granulomatous lesion with sinusoids dilation and congestion. In conclusion, the killed vaccine has an important role in protection against challenges with *S. pullorum* in comparison with the live vaccine (9R), without bacterial shedding, low morbidity without mortality and less histological changes.

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## 1. INTRODUCTION

Salmonellosis is a significant bacterial disease affecting poultry worldwide, caused by various *Salmonella* species (Kabeta *et al.*, 2024; Islam *et al.*, 2025). Among them, *Salmonella pullorum* and *Salmonella gallinarum* are highly host-adapted to chickens and other gallinaceous birds, leading to two major poultry diseases: pullorum disease and fowl typhoid (Guo *et al.*, 2019). Both diseases cause severe economic losses due to high mortality, reduced productivity, and the risk of vertical transmission (Saleem *et al.*, 2016). *Salmonella Pullorum* is caused by the non-motile bacterium *Salmonella enterica* subspecies *enterica* serovar *gallinarum* biovar *pullorum* (Gast *et al.*, 2020).

## 2. LITERATURE REVIEW

PD disease is a severe systemic disease and is associated with a high mortality rate. Infected chickens show a range of symptoms, including anorexia, depression, diarrhea, and persistent cloacal infection (Tian *et al.*, 2018). *Salmonella pullorum* can remain in the spleen and reproductive system for several months, even though infected adult hens may not show any symptoms, leading to vertical transmission to eggs and offspring (Shen *et al.*, 2022). *Salmonella pullorum* can infect chickens of all breeds and ages. However, mortality rates from infection decrease numerous infected hens get latent and chronic illnesses with age (Revolledo, 2018). Like an intracellular parasite, *S. pullorum* is difficult to eradicate completely, even while medication therapy is enough to control clinical symptoms, ultimately leading to the development of a subclinical persistent infection. After infection, it is clear that *S. pullorum* can modulate host immunity, with antibody responses lasting for more than 40 weeks (Kang *et al.*, 2022). The main threat to poultry production in developing countries is PD because it causes significant economic losses every year (Abdhal et al., 2023; Eriksson *et al.*, 2018). *S. gallinarum* is closely related to *Salmonella pullorum*, sharing many antigenic and pathogenic features, although each causes distinct diseases (Valentina *et al.*, 2022). Fowl typhoid affects poultry of all ages, with adult poultry being particularly susceptible (Vaid *et al.*, 2021). Several strategies have been attempted to control the disease in chickens, including vaccination, use of antibiotics, and preventive measures. Vaccination has been accepted to prevent or reduce *Salmonella* infection in poultry worldwide. Killed vaccines can be effective in reducing *Salmonella* infection in poultry. They are safe because they do not cause recurrence of the disease, do not spread into the environment, and are considered good enough to protect chickens when used in large-scale poultry production (Buck *et al.*, 2004). However, live vaccines are thought to have advantages over killed vaccines with respect to induced immunity (Van Immerseel *et al.*, 2005). Live vaccines, by causing the expression of all relevant antigens in vivo, induce better protection against *Salmonella* because they induce both cellular and humoral immunity and the expression of all relevant antigens in vivo, whereas inactivated vaccines primarily induce the production of antibodies only against antigens present at the time of harvest in vitro (Barrow & Wallis, 2000). Killed vaccines can also be rapidly destroyed and eliminated from the host, and are generally considered incapable of inducing cytotoxic T cell

activation (Freitas Neto *et al.*, 2007). It is widely accepted that cellular immunity is more important than humoral responses in protection against *Salmonella*, especially in infections caused by host-specific serotypes (Barrow, 2007). The objective of the study is to assess the most effectiveness immunization of the 9R strain of *Salmonella gallinarum* and killed *Salmonella pullorum* vaccine to protect layer chicken from infection with *Salmonella Pullorum*. by assessment the bacterial shedding, morbidity and mortality and histological changes in internal organs.

## 3. METHODOLOGY

### 3.1. Ethical Approval

Ethical approval was granted according to the local committee of care and use of the animal in research at the College of Veterinary Medicine, University of Baghdad (P-G/12196 at 10/11/2024) before starting this study.

### 3.2. Experimental design

Sixty-layer chickens (ISSA brown) at 100 days old were confirmed to be free of *S. pullorum* by culturing the fecal samples. The study was conducted from mid-December 2023 to January 2024 to evaluate the immunopathological study of an inactive *Salmonella pullorum* and 9R vaccine to protect layer's chicken from *Salmonella pullorum* infection. Orally challenged with *Salmonella pullorum* 0.5 ml (25×104 CFU/ml) was administered to all groups (OM988162.1). Following that, they are split up into three groups, each with 20 chickens: First group: received a 0.5 ml subcutaneous dose of the 9R *S. gallinarum* vaccine. The second group 0.5 ml of dead a subcutaneous dose of *S. pullorum* vaccine administered subcutaneous at 100 days of age. The third group considers as control negative. From the jugular vein, samples of blood were collected at 14, 15, 16, 17, and 18 weeks, the strain of vaccines used in the study includes *Salmonella gallinarum* 9R strain (Himmvac-Korea). *Salmonella pullorum* killed whole cell antigen was prepared according to the motive procedure (Duncan, 2024).

### 3.3. Histology

Briefly, the formalin fixed tissue sections were dehydrated by ethanol, cleared by xylene, infiltrated and embedded by paraffin, sectioned by microtome at 4-5 µm thickness and mounted on the slides to be stained later with the Hematoxylin and Eosin following the manufacturer instructions (Syrbio, Syria). The stained slides were visualized under an objective lens of 10x of light microscope (MEIJI, Japan), (Gharban *et al.*, 2023; Hussen *et al.*, 2024).

### 3.4. Statistical Analysis

The Statistical Analysis System (SAS) (2018) program was used to detect the effect of different factors on study parameters. The least significant difference (LSD) was used to compare the means (ANOVA/One-way) significantly (Gharban and Yousif, 2020).

## 4. RESULTS AND DISCUSSION

The observation of the results showed that all groups at 14, 18 and 19-weeks-old when utilizing the most probable number (MPN/g) method to count the amount of *Salmonella* in the chickens' feces, there were extremely noticeable differences at



level ( $P \leq 0.05$ ) are presented in Table 1. At 14 weeks, the results of MPN/g not recorded any colony in all groups, whereas after challenge at 17 weeks the results of MPN/g revealed highest means at 18 weeks in G3 and G1 with lowest means relative to the G2. But the results of MPN/g show substantial drop counting number after infection ( $P \leq 0.05$ ) at 19 weeks in all groups especially in G2 in comparison with G3 and G1, which have larger MPN/g means respectively.

**Table 1.** Salmonella in feces counted using the most probable number (MPN/g) approach

Groups	Period (week)		
	14	18	19
G1	0 ± 0 A	45.8 ± 8.3 B	20.7 ± 6.4 B
G2	0 ± 0 A	7.1 ± 2.4 C	1.2 ± 0.4 C
G3	0 ± 0 A	62.5 ± 14.7 A	35.6 ± 14.2 A
LSD		12.08	9.17
MPN/g Means ± Stander error			

Number of samples: 5 from each group. Significant differences between groups are indicated by capital letters ( $P \leq 0.05$ ) on the means of the same column. LSD: less significant differences.

#### 4.1. Morbidity and mortality

This study shows that the morbidity and mortality in groups after challenge with local isolate of *Salmonella Pullorum* at 17 weeks, the results showed that were significant decrease ( $P \leq 0.05$ ) in rates of morbidity and mortality specially in G2 vaccinated with killed vaccine followed by G1 that vaccinated with 9R, while control groups G3 showed a high significant increase ( $P \leq 0.05$ ) in morbidity and mortality rates (Table 2).

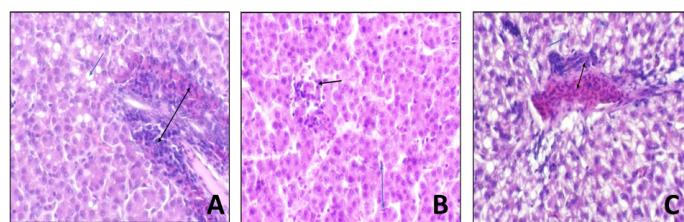
**Table 2.** Development of clinical signs and mortalities during 18 weeks post challenge with local *S. pullorum* isolate at 17 weeks of age

Groups	Index [% (No.)]	
	Morbidity	Mortality
G1	40% (4/10) b	30% (3/10) b
G2	20% (2/10) c	0% (0/10) c
G3	100% (10/10) a	50% (5/10) a

Number of chickens for each group: 10. = Number of chickens showing clinical signs or death. G1: vaccinated with 9R *Salmonella gallinarum* live vaccine. G2: vaccinated with killed *Salmonella Pullorum* vaccine. G3: control negative not vaccinated. All groups challenge with local strain of *Salmonella pullorum* ( $25 \times 10^4$  cfu/ml) at 17 weeks. The small letters appear on the means of the same column refer to significant differences among treatment means at ( $P \leq 0.05$ ).

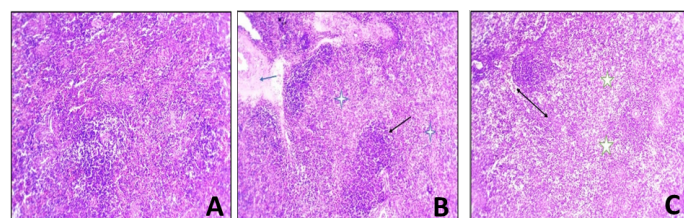
The histopathological results post-challenge with *Salmonella pullorum* ( $25 \times 10^4$  cfu/ml) at 17 weeks of the liver in G1 group showed multiple MNCs infiltration and mild sinusoidal congestion with prominence of Kupffer cells. In G2 group, showed moderate MNCs infiltration with heterophils were

reported in portal region accompanied with venous dilation. G3 group, see in other section revealed central vein congestion and dilation with perivascular leukocytic aggregation accompanied with necrosis of adjacent hepatic cells (Figure 1).



**Figure 1.** (A) Liver section G1 showed marked aggregation of lymphocytes and heterophils around hepatic vessel (black arrow) with evidence of cytoplasmic fat droplets in adjacent hepatocytes (blue arrow) (H and E stain, 40X). (B) Liver section G2 showed Kupffer cells proliferation (blue arrow) and small leukocytic aggregation (black arrow) (H and E stain, 40X). (C) Liver section G3 revealed C.V congestion and dilation with perivascular lymphocytic aggregation (black arrow) accompanied with necrosis of adjacent hepatic cells (blue arrow) (H and E stain, 40X).

The microscopic findings of the spleen in G1 group were characterized by lymphoid depletion. In G2 group, the findings showed moderate hyperplasia of lymphatic follicles with medial thickening of splenic vessels and mild red pulp congestion. G3 group, histopathological section in the spleen showed moderate necrotic finding of reticular tissue with sinus congestion and dilation (Figure 2).

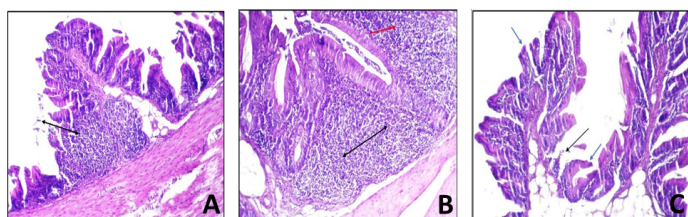


**Figure 2.** (A) Splenic histopathological finding of G1 characterized by lymphoid depletion (H and E stain, 10X). (B) Splenic section G2 showed moderate hyperplasia of lymphatic follicles (black arrow) with medial thickening of splenic vessels and mild red pulp congestion\* (H and E stain, 10X). (C) Splenic section G3 revealed moderate necrotic finding of reticular tissue\* with sinus congestion and dilation (black arrow) (H and E stain, 10X).

The microscopically findings of the cecum in G1 group showed the lamina propria is moderate expanded by lymphocytic inflammatory infiltrate also, revealed evident of GALT hyperplasia accompanied with moderate villous desquamation. In G2 group, revealed normal cecal folds with healthy villi (mild height villi), where see in other section marked obvious hyperplasia of lymphatic nodules with diffuse submucosal MNCs. G3 group, revealed moderate villus standing with remnant of atrophic lymphatic nodule also, showed abnormal irregular cecal folds with evidence of fecal mucosal ulceration (Figure 3).

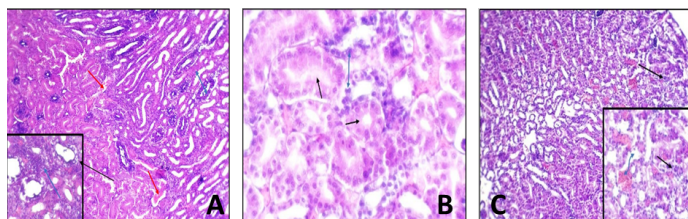






**Figure 3.** (A) Cecum section G1 showed evident of GALT hyperplasia accompanied with moderate villous desquamation (black arrow) (H and E stain, 10X). (B) Cecum section G2 revealed marked obvious hyperplasia of lymphatic nodules (black arrow) with diffuse submucosal MNCs (red arrow) (H and E stain, 40X). (C) Cecum section G3 revealed abnormal irregular cecal folds (blue arrow) with evidence of fecal mucosal ulceration (black arrow) (H and E stain, 10X).

The histopathological findings of the kidney in G1 group showed moderate tubular dilation of renal parenchyma with vacuolar degeneration of some tubules associated with mild interstitial MNCs infiltration and hemorrhage. In G2 group, exhibit prominence of basophilic cortical tubules with mild cellular swelling of major renal tubules. G3 group, focal tubular dilation with flat epithelial lining with interstitial hemorrhage accompanied with focal MNCs infiltration mainly between degenerated tubules (Figure 4).



**Figure 4.** (A) Kidney section G1 showed moderate tubular dilation of renal parenchyma with vacuolar (black arrow) degeneration of some tubules associated with mild interstitial MNCs infiltration (blue arrow) and hemorrhage (red arrow) (H and E stain, 40X and 10X). (B) Kidney section G2 showed prominence of basophilic cortical tubules (black arrow) with mild cellular swelling of major renal tubules (blue arrow) (H and E stain, 40X). (C) Kidney of G3 group post-challenge revealed focal tubular dilation with flat epithelial lining with interstitial hemorrhage accompanied (blue arrow) with focal MNCs infiltration mainly between degenerated tubules (black arrow) (H and E stain, 10X and 40X).

#### 4.2. Discussion

The results of the most probable number showed in all groups no *Salmonella* shedding in their feces at 14 weeks between vaccinated and unvaccinated groups. These findings are in agreement with a previous study (Gole *et al.*, 2014). Whom recorded results of the culture method indicated that the age of 14 weeks, the prevalence of *Salmonella* in feces was not recorded in any colony in all groups. Differences in *Salmonella* counts between groups were evident by 18 weeks post-challenge with *Salmonella pullorum*. However, G1 vaccinated with the 9R *S. gallinarum* live vaccine had a moderate reduction in salmonella shedding; this is

consistent with Al-Zuhariy (2023) who reported live *Salmonella* vaccines have been shown to prioritize cell-mediated immunity, which may not significantly reduce fecal shedding. On other hand the count of *Salmonella* in the controls G3 was the highest, this is consistent with the researcher (Ishola, 2009; Yue *et al.*, 2025) who recorded that Challenge dose significantly affects *Salmonella* shedding in experimentally infected chickens, the lack of prior immunity allowed *Salmonella pullorum* to multiply unchecked in the intestinal tract, resulting in increased shedding. Foremother, the killed vaccine with the best protection and least *Salmonella* shedding, even in the post-challenge- period, likely resulting from a more robust immune response and these results are consistent with previous studies (Al-Rubaye *et al.*, 2023, Hasan *et al.*, 2023) who recorded that killed *Salmonella* vaccine provided greater protection against *Salmonella* colonization in laying hens compared to live vaccines. chicken immunized showed lowest morbidity the clinical symptoms were slight and temporary following challenge in immunized chicken with killed *salmonella pullorum* vaccine compared with those in G1 9R live vaccine and the control group these results are in agreement with, whom recorded that the killed *salmonella pullorum* vaccine can offer efficient protection against acute systemic Pullorum diseased infection through stimulating both humoral and cell-mediated immune responses. Morbidity rates were significantly lower in the vaccinated groups than in the controls, with the G2 killed vaccine having the lowest morbidity. This also seems to support by Eeckhaut *et al.* (2024) who proposal that killed vaccines have the potential to elicit stronger and more durable immune responses than other types of vaccines. The unvaccinated group G3 showed the highest levels of morbidity and mortality of all, demonstrating the susceptibility of unvaccinated chickens to *Salmonella* infection (Alsadwi, 2024), they proved that lack of pre-existing immunity in the absence of vaccination, birds lack specific antibodies or memory cells to mount an effective defense against *S. pullorum*. Unregulated immune activation causes severe inflammation, further tissue damage and several lesions. On the other side, G1 showed limited protection against morbidity and mortality in chickens challenged with virulent *S. pullorum* (Lee *et al.*, 2007). *Salmonella pullorum* caused bacteremia and colonized to varying degrees in the liver, spleen, kidney, and intestine of chickens, according to results from the oral inoculation route (Shivaprasad & Barrow, 2008). In fact, all organs showed levels of infection in this investigation, which is similar to the results of a previous study by Noomi (2018) who examines the pathology and colonization of internal organs in broiler chickens after experimental oral infection with *Salmonella gallinarum*, highlighting differences in pathological changes. On the other hand, the results of histopathological changes post-challenge with *Salmonella pullorum* of where in G1 showed in the liver marked aggregation of leukocytes around hepatic vessels mainly consist of lymphocytes and heterophils with evidence of cytoplasmic fat droplets in adjuvant hepatocytes, in G2 showed Kupffer cells proliferation and small leukocytic aggregation. Moreover, the control group revealed focal MNCs infiltration, forming granulomatous lesion with sinusoidal dilation and congestion, these finding was also recorded (Ismail & Garo, 2009; Shahinuzzaman *et al.*, 2011; Purwanti *et al.*, 2019; Rahman *et al.*, 2019; Shchebentovska *et al.*, 2021). Previous reports have



documented similar degenerative, necrotic, and infiltrative lesions, with results showing that while the live vaccine primed the immune system, it did not completely prevent hepatic stress or inflammation. Similar liver changes were documented in *Salmonella pullorum*-infected birds, with the vaccinated groups showing milder changes compared to controls. They provided better protection with minimal liver damage, reflecting their role in eliciting a balanced immune response.

While the microscopic changes in the spleen are characterized in the first group by lymphoid depletion, also in G2, moderate hyperplasia of lymphatic follicles with medial thickening of splenic vessels; besides, in the G3 group, moderate necrotic findings of reticular tissue with sinus congestion and dilation have been reported by various studies that recorded similar changes in the spleen have been reported in poultry exposed to bacterial challenges, emphasizing the role of vaccination in modulating splenic responses (Prasanna *et al.*, 2001; Garcia *et al.*, 2010; Al-Juburi and Al-Sammarrae, 2022; Rani *et al.*, 2022). Live vaccines often induce stronger but less sustained immune responses, while killed vaccines provide more measured and longer-lasting immunity.

At the same time, the pathological changes that occurred in the intestine post-challenge, where in G1, the lamina propria, are moderately expanded by lymphocytic inflammatory infiltrates and GALT hyperplasia accompanied by moderate villous desquamation. Also, in G2, obvious hyperplasia of lymphatic nodules with diffuse submucosal MNCs. either in G3 revealed abnormal irregular cecal folds with evidence of fecal mucosal ulceration. All these lesions were also observed by several studies that reported the mild villous desquamation indicates the vaccine's live component provoked a moderate inflammatory reaction but not excessive tissue damage, which that killed indicates robust immune activation while maintaining intestinal structure (Fasina *et al.*, 2010; Abdulridha & Ibrahim, 2018; Al-Zuhariy, 2023; Hamad *et al.*, 2024). The moderate increase in villus height further signifies improved nutrient absorption and recovery post-challenge, while severe epithelial and mucosal damage due to an uncontrolled *Salmonella* infection. While in the kidney the microscopically changes characterized in G1 by moderate tubular dilation of renal parenchyma with vacuolar degeneration of some tubules associated with mild interstitial MNCs infiltration and hemorrhage also in G2, prominence of basophilic cortical tubules with mild cellular swelling of major renal tubules where G3, evidence of necrotic findings were recorded in both tubular and glomerular tissue with evident glomerular tuft atrophy Similar degenerative and infiltrative changes have been described in the kidneys of birds affected by *S. pullorum* (Shivaprasad, 2000; Deshmukh *et al.*, 2007; Rahman *et al.*, 2011; Saha *et al.*, 2012; Ali *et al.*, 2024); in which, the vacuolar degeneration and tubular dilation indicate a moderate inflammatory response to challenge, the live vaccine elicited a protective immune response but was not fully effective in preventing kidney damage. The milder pathological changes in this group reflect the stronger protective effect of the killed vaccine in mitigating kidney damage after challenge. The extensive necrotic findings in both tubular and glomerular tissue highlight the uncontrolled progression of *Salmonella* infection in the absence of vaccination.

## 5. CONCLUSION

This study demonstrates that immunization with the killed *Salmonella pullorum* vaccine provides superior protection to layer hens against *Salmonella pullorum* infection compared to the 9R live vaccine. Our findings indicate that the killed vaccine significantly reduces pathological changes, evidenced by moderate mononuclear cell (MNC) infiltration with heterophils and minimal impact on liver histology. In contrast, the 9R vaccine showed more pronounced histopathological alterations, including multiple MNC infiltration and mild sinusoidal congestion. Importantly, the killed vaccine group exhibited no bacterial shedding and maintained low morbidity without any recorded mortality, highlighting its effectiveness and safety as a preventive measure in poultry. These results underscore the potential of the killed *S. pullorum* vaccine in enhancing poultry health management and limiting the spread of infection, thereby contributing to more sustainable and productive poultry operations. Further studies are recommended to explore long-term immunity and scalability within commercial settings.

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