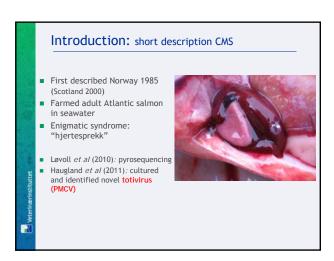
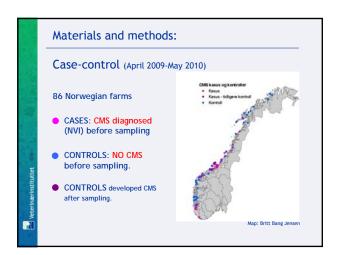
Cardiomyopathy syndrome (CMS):
Cardiac pathology and cause
in field material.

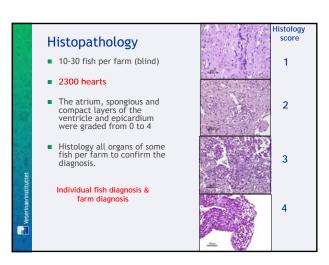
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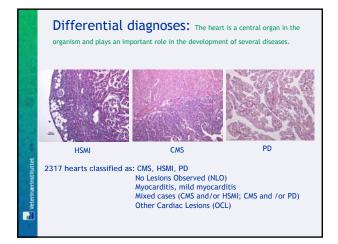
## Overview Introduction & Project description Material and methods Results Conclusions Future work

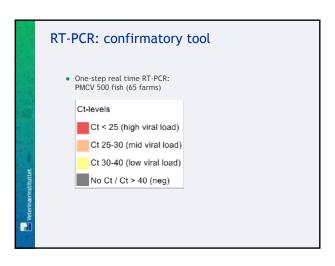


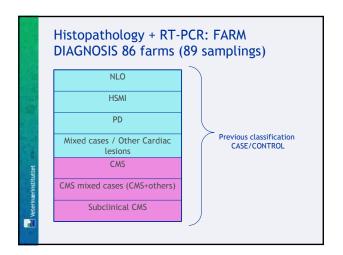


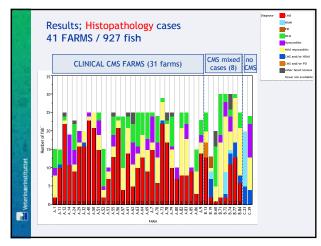


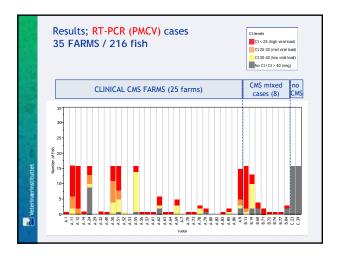


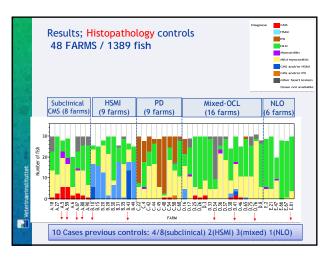


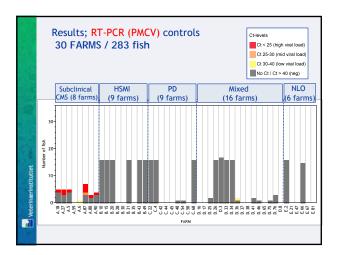


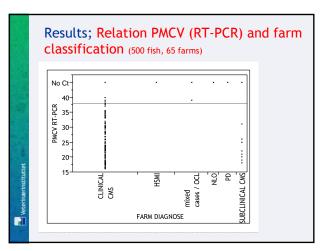


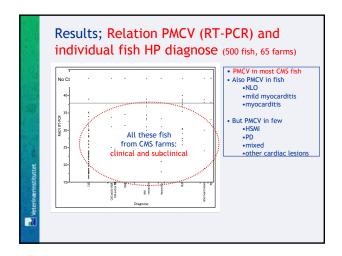


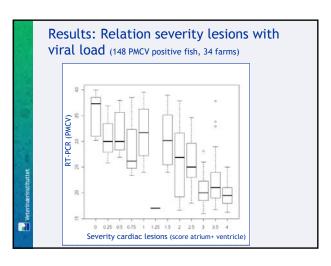


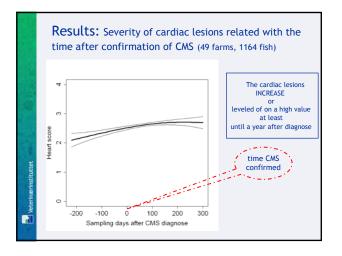


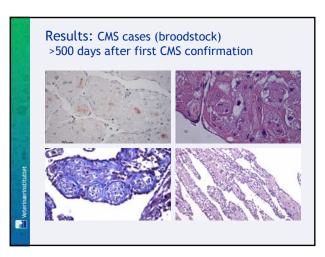












## **Conclusions**

- Diagnosis: histopathology not enough in mixed cases and subclinical CMS.
  - combination HP and PCR more specific diagnosis
- Disease is underdiagnosed: 4/8 subclinical cases not diagnosed.
- Virus and CMS lesions detectable much earlier than disease (4 months earlier)
- Viral persistence (detected after 1,5 year)

## Future work

- - Pathogenesis:

     how the virus infect the fish?

     how the virus spread in the fish and which organs are infected?

     RT-PCR and ISH in different organs of field cases

    what kills the fish?

     No mortality in challenge trials

     No problems in young salmon
- Genetic variation within PMCV?
  Sequencing: 50 fish from clinical cases are being sequenced.
  Possibility to sequence fish from subclinical cases.
- Possibility to validate IHCM (when PMCV Antibody available) in field material
- Gen bank: all organs from 2300 fish (86 farms) in formalin fixed, paraffine blocks and RNA-later.

Plenty of material and still a lot to learn but lack of funding!

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- Researchers at Section for pathology at the NVI (guidance and discussion)



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