

HERPESVIRUS TAMARINUS

V14.14

OIE BALAI EU AHL

VIRUS

Herpesvirus tamarinus, *Herpesviridae*ZONOSIS

SUSCEPTIBLE ANIMAL GROUPS	TRANSMISSION	CLINICAL SIGNS	SEVERITY	TREATMENT	PREVENTION AND CONTROL
Natural hosts: squirrel, spider and capuchin monkeys Susceptible species: marmosets, tamarins, owl and titi monkeys	Oral-fecal Aerosols Fomites Sexual	Natural host: asymptomatic or oral lesions Susceptible species: anorexia, oral lesions, pruritus, sneezing, nasal discharge, diarrhea, swollen eyelids, death	76-100% mortality in susceptible species	No data available but possibly antivirals	Strict separation of natural hosts and susceptible species, including equipment due to risk of indirect transmission

FACT SHEET COMPILED BY M. Brack, DPZ, Göttingen, Germany	LAST UPDATE August 2015
FACT SHEET REVIEWED BY W. Rietschel, Wilhelma Zoologischer-Botanischer Garten, Stuttgart, Germany C. Furley, Howletts Zoo, Bekesbourne, United Kingdom H. Niphuis, Primate viral diagnostics, BPRC, Rijswijk, The Netherlands	
DISEASE AGENT <i>Herpesvirus tamarinus</i> (<i>Alphaherpesvirus</i> , <i>Herpesviridae</i>). Synonyms: <i>Herpesvirus T</i> , <i>Herpesvirus platyrrhinae</i> , <i>Herpesvirus saimiri 1</i> , Saimirine herpesvirus 1.	
SUSCEPTIBLE ANIMAL GROUPS Natural hosts: squirrel (<i>Saimiri sciureus</i>), spider (<i>Ateles spp.</i>) and capuchin monkeys (<i>Cebus spp.</i>). Aberrant hosts: marmosets (<i>Callithrix spp.</i>), tamarins (<i>Saguinus spp.</i>), owl (<i>Aotus spp.</i>) and titi monkeys (<i>Callicebus spp.</i>).	
ZOONOTIC POTENTIAL One case report of a lab worker with non-fatal encephalitis secondary to a squirrel monkey bite.	
DISTRIBUTION South and Central America and worldwide in captivity.	
TRANSMISSION By direct or indirect contact: oral-fecal route, aerosols, fomites and sexual transmission. Many squirrel monkeys are latently infected and excrete the virus temporarily or recurrently during their entire life.	
INCUBATION PERIOD 7-10 days.	

CLINICAL SIGNS

Natural hosts are asymptomatic or rarely show oral/perioral lesions. Marmosets, tamarins, owl and titi monkeys present anorexia, oral lesions, pruritus, sneezing, nasal discharge, diarrhea, swollen eyelids, and 76-100% mortality (2-3 days after onset of clinical signs). Once infected, presume an animal is a carrier, as latent infections occur with intermittent shedding.

PATHOLOGY AND POST MORTEM FINDINGS

Gross: ulcerative dermatitis, mucosal ulceration.

Histopathology: hepatic necrosis with multinucleated syncytial cells and intra-nuclear inclusion bodies; necrosis in spleen, kidney, lung, and adrenal gland; necrosis of the epidermis with multinucleated giant cells with intra-nuclear viral inclusions.

DIAGNOSIS

Pan-herpes PCR, virus isolation, serology, histopathology, clinical signs and history of contact with natural host.

SAMPLES REQUIRED FOR LABORATORY ANALYSIS

Swabs or material from infected tissue, oral mucosa, necrotic tissue, liver, spleen and serum.

TREATMENT

No data available, but possibly herpesvirus antivirals like acyclovir, valacyclovir, famciclovir and ganciclovir.

PREVENTION

Strict separation of natural hosts and susceptible species, including cleaning, enrichment, perching and other equipments due to the risk of fecal or fomite transmission. Once infected, animals will remain carriers and sporadically shed the virus.

A live vaccine has been effective in owl monkeys, but vaccine-induced disease has also been observed.

CONTROL

Disinfect environment, clean tools, equipment and other fomites, and avoid introducing natural hosts to susceptible species. Common disinfectants will kill the herpesvirus, including chlorine bleach, UV light, heat and quaternary ammonium.

LEGISLATIVE REQUIREMENTS

Not notifiable under OIE 2019, BALAI (Council Directive 92/65/ECC) or AHL (Regulation EU 2016/429).

CONTACTS FOR FURTHER INFORMATION

1. Dr. E. Verschoor, BPRC
Lange Kleiweg 161, 2288 GJ Rijswijk, The Netherlands
Tel: +31 15 284 2592 / Email: verschoor@bprc.nl

RELEVANT DIAGNOSTIC LABORATORIES

1. PVD-BPRC
Lange Kleiweg 161, 2288 GJ Rijswijk, THE NETHERLANDS
Tel: +31 15 284 2784 / Email: pvd@bprc.nl

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