

1 Diagnostic performance of Rose Bengal, competitive ELISA, and Native  
2 Hapten (NH) assays in S19 mass-vaccinated cattle in endemic  
3 brucellosis environment.

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25 **Abstract**

26 Vaccination with S19 is the best alternative to control bovine brucellosis, but  
27 depending on the immunization protocol, it may induce long-lasting antibodies  
28 interfering with diagnostic tests. Conjunctival vaccinated brucellosis-free heifers  
29 (Farm 1) produced antibodies detected in RBT and cELISA that disappeared <50  
30 days after immunization. In contrast, heifers of Farm 1 subcutaneously vaccinated  
31 with S19 reduced dose produced antibodies detected in 10% of the bovines for up  
32 to one year. Sera of brucellosis-free vaccinated heifers did not immunoprecipitate  
33 native hapten polysaccharide (NH). In contrast, sera of *Brucella*-infected bovines  
34 readily immunoprecipitated NH. A *Brucella abortus* infected herd (Farm 2),  
35 previously vaccinated with RB51 and subjected to regular tests and slaughter until  
36 reaching negative serology, was mass vaccinated with S19 through either the  
37 conjunctival or subcutaneous routes with reduced and complete doses. Bovines of  
38 Farm 2 displayed sustained and increasing RBT and cELISA positive reactions for  
39 a protracted period, with ~5% bovines reacting against NH, indicating an anamnestic  
40 response upon contact with field *Brucella*. After an abortion and isolation of field *B.*  
41 *abortus* at day 225 in one cow of Farm 2, a significantly higher ratio of cELISA/RBT  
42 reactors was detected ( $2.5\pm 1.6\%$ ) than in preceding days ( $0.9\pm 0.2$ ). Previous  
43 vaccination with RB51 did not modify the herd brucellosis situation or the serological  
44 results of S19-vaccinated bovines. We conclude that serial testing of RBT-positive  
45 animals with cELISA is not an adequate diagnostic strategy and that the NH  
46 immunoprecipitation test helps identify actively infected cows in herds submitted to  
47 mass vaccination with S19.

48

49 **Keywords:** *Brucella*, brucellosis, *B. abortus*, S19, vaccination, native hapten, NH,  
50 RBT, cELISA, bovine.

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## 52 **1. Introduction**

53 Facultative intracellular Gram-negative alpha-proteobacteria of the genus  
54 *Brucella* cause bovine brucellosis. This disease is broadly distributed in the  
55 American, Eurasian, and African continents, mainly in the middle- and low-income  
56 countries where it causes economic constraints and public health concerns since it  
57 is also a relevant zoonosis (Moreno et al. 2022). The most common etiological agent  
58 is *Brucella abortus*. However, when bovines are reared with infected caprine or ovine  
59 herds, *Brucella melitensis* may become predominant and perpetuated in the affected  
60 herds if no sanitary actions are undertaken (Aliyev et al. 2022; Verger et al. 1989).

61 A handful of high-income countries in Europe, North America, and Oceania  
62 have eradicated bovine brucellosis through great effort and high costs using *B.*  
63 *abortus* S19 vaccination combined with serological testing and culling the  
64 seropositive animals with compensatory actions (Blasco et al. 2020; 2023). This  
65 procedure, known as "test and slaughter," is commonly carried out alongside the  
66 S19-vaccination (Blasco et al. 2020; 2023). As expected, this is a long-lasting and  
67 expensive process that requires well-validated diagnostic tests, suitable vaccination  
68 protocols, significant economic investment, knowledge of the epidemiological  
69 settings, and a proper understanding of the performance of the diagnostic tools  
70 (Blasco et al. 2020; Ducrotoy et al. 2018).

71 Vaccination with *B. abortus* S19 is the best immunization approach to control  
72 bovine brucellosis. Unfortunately, herd vaccination coverage is only moderate to low

73 in middle- and low-income nations where bovine brucellosis is highly prevalent  
74 ([Hernández-Mora et al. 2017](#); [Quinteros-Zurita A. 2022](#)). In many of these countries,  
75 the S19 vaccine is used simultaneously with the RB51 vaccine, and not infrequently,  
76 the latter is employed as the only vaccine against bovine brucellosis ([Hernández-](#)  
77 [Mora et al. 2017](#); [Blasco et al. 2020](#); [2023](#)). However, while S19 has been  
78 instrumental in controlling and eliminating bovine brucellosis in the countries  
79 succeeding with eradication, there is no single country in which bovine brucellosis  
80 has been eradicated with the concurrence of RB51 ([Blasco et al. 2020](#); [2023](#)).

81       The most effective strategy to control brucellosis in heavily infected herds is  
82 to lower the prevalence by culling as many seropositive bovines as possible,  
83 followed by mass S19 vaccination of the remaining cows ([Nicoletti 1990](#)). In many  
84 endemic circumstances, culling a large proportion of animals is not economically  
85 feasible, and mass vaccination is primarily used to lower the prevalence. However,  
86 after mass vaccination in endemic areas, standard serological tests become  
87 challenging to interpret, and the results are frequently misunderstood, resulting in  
88 over-culling of healthy vaccinated animals.

89       Native Hapten (NH) *Brucella* polysaccharides share the N-formyl perosamine  
90 sugar determinants with the lipopolysaccharide molecule (LPS). It has been  
91 demonstrated that NH, which in the bacterium is intertwined in the outer membrane  
92 with the O chain of the LPS, can be identified as a separate molecule in agar gel  
93 immunodiffusion (AGID) tests where NH and LPS show different migration resulting  
94 in distinct precipitation bands ([Aragón et al. 1996](#); [Moreno et al. 1981,1987](#)). In  
95 addition, despite their epitopic similarities, the behavior of NH and LPS in  
96 immunoprecipitation tests differs. While a proportion of S19 vaccinated animals

97 persistently produce antibodies against LPS in assays such as the rose bengal test  
98 (RBT) and ELISAs, the NH does not react with sera of these bovines bled 2-3 months  
99 after vaccination (Díaz et al. 1979; Jones et al. 1980; Moreno et al. 1981).  
100 Furthermore, these serological reactions are minimized when a reduced dose (5 x  
101 10<sup>9</sup> CFU) of S19 is applied, mainly when administered through the conjunctival route  
102 (Alonso-Urmeneta et al. 1998; Díaz-Aparicio et al. 1993; Ducrotoy et al. 2018; Marin  
103 et al. 1999; Moreno 1981; Muñoz et al. 2005; Blasco et al. 2021). In contrast, NH  
104 reacts in the AGID test with a high proportion of sera from *Brucella*-infected bovines,  
105 correlating with bacterial shedding (Alonso-Urmeneta et al. 1988a; 1988b; Díaz et  
106 al. 1979; Díaz-Aparicio et al. 1993; 1994; Ducrotoy et al. 2018; Jones et al. 1980;  
107 Marín et al. 1999; Moreno 1981; Muñoz et al. 2005; WOA 2023). Following this, it  
108 has been proposed that the AGID with extracts rich in NH and LPS is a practical test  
109 for identifying the epidemiologically relevant cows (i.e., *Brucella*-infected animals  
110 that are likely shedding the bacterium) in infected herds submitted to S19 mass  
111 vaccination. Here, we present a descriptive study on the performance of the RBT,  
112 competitive ELISA (cELISA), and AGID with NH-LPS-rich extracts in bovines  
113 immunized with *B. abortus* S19 through various vaccination protocols in brucellosis-  
114 free and *B. abortus* infected herds.

115

## 116 **2. Materials and methods**

117

### 118 **2.1. Vaccination and obtention of sera**

119 Quality control of the S19 vaccine batch used in all experiments  
120 (Antibrucelica, CDV, Argentina, lot number 136205688) was assessed by CFU

121 counting, absence of dissociation, and determination of residual virulence in mice  
122 following WOAHA protocols (Grillo et al. 2000; WOAHA 2023). The following groups of  
123 sera were used: Positive control sera (used for test validation) were from 35 naturally  
124 infected cows from Costa Rica showing a *B. abortus* positive culture (Hernández-  
125 Mora et al. 2017). Negative control sera (used for test validation) were obtained from  
126 35 non-vaccinated dairy cows from a brucellosis-free herd in a Costa Rica region  
127 where no brucellosis has been recorded for at least 25 years. Sera from Farm 1  
128 corresponding to a total of 25 crossbred Angus-Zebu brucellosis-free heifers (8 -11  
129 months of age) located in a *Brucella*-free environment in San Carlos, Alajuela, Costa  
130 Rica which were vaccinated with a reduced dose ( $5 \times 10^9$  CFU) of the *B. abortus* S19  
131 vaccine applied either by the subcutaneous (n= 20 heifers) or conjunctival (n=5  
132 heifers) routes, as described before (Blasco et al. 2020; Chacon-Díaz et al, 2020).  
133 The vaccinated animals of Farm 1 were permanently maintained in the same  
134 brucellosis-free herd during the experiment and bled at intervals after vaccination  
135 through an 1100-day observational period (Table 1).

136 Sera from Farm 2 corresponds to a collection obtained from Holstein-Zebu  
137 crossbred bovines inhabiting a brucellosis endemic area in Guácimo, Limón  
138 (Caribbean, Huetar region), Costa Rica. During 2016-2017, the herd of Farm-2 was  
139 heavily *Brucella*-infected with a high individual prevalence (with a maximum of 47%  
140 assessed with both the RBT and cELISA tests) and high abortion rates (with a  
141 maximum of 30%), with recurrent isolation of *B. abortus* biovar 1 always of the same  
142 genetic cluster (Hernandez-Mora et al. 2017). A significant proportion of bovines  
143 from Farm 2 were previously vaccinated and revaccinated with standard doses of  
144 the RB51 vaccine (Colorado Serum Co, USA) applied at 4-5 months of age and

145 revaccinated as adults vaccine (Colorado Serum Co, USA) without obtaining any  
146 significant reduction in the seroprevalence or abortion rate. At the beginning of 2017,  
147 RBT and cELISA testing was initiated following the national mandatory procedures  
148 of SENASA, Costa Rica (Hernandez-Mora et al. 2017), resulting in the culling of a  
149 total of 593 at the end of 2018. Of these, 345 were culled due to positivity in  
150 brucellosis tests and 248 due to pregnancy loss/infertility. A remanent of 253 bovines  
151 of Farm 2 with no record of abortions, which tested negative in both RBT and cELISA  
152 and were negative for *Brucella* spp. by a repeated culture of milk samples, were  
153 vaccinated with S19 following various protocols (Table 1). Ninety-four of these 253  
154 animals had been previously vaccinated during 2016-2017, with RB51 (Table 1).  
155 Following the S19 vaccination of the 253 bovines of farm 2, blood samples were  
156 taken at intervals over 13 months. Sera was just tested after 13 months of S19  
157 vaccination with RBT, cELISA, and AGID and, after that, at 1000 days. During the  
158 observational period, 81 bovines (out of 253) were culled due to lack of pregnancy  
159 as determined by palpation (Table 2). One cow aborted at day 225 of pregnancy,  
160 yielding a positive culture for *B. abortus* biovar 1 field strain.

161         The sera collections were kept under -80°C at the Bacteriology Laboratory at  
162 the National Service of Animal Health (SENASA) of Costa Rica until tested. All sera  
163 were coded, and the identity of each serum was not revealed until all results were  
164 analyzed.

165

## 166 **2.2 Bacteriological studies and serological assay.**

167         Searching for *Brucella* infection in milk, vaginal secretions and fetuses was  
168 performed using the Farrell's and CITA media and the culture as described (De-

169 [Miguel et al. 2011](#)). Cultures were incubated in a 10% CO<sub>2</sub> atmosphere at 37°C for  
170 at least two weeks. The identification of suspected colonies was carried out by  
171 conventional bacteriological procedures and genetic analyses ([Hernández-Mora et  
172 al. 2017](#); [Suárez-Esquivel et al. 2020](#)).

173 The RBT (ID.Vet, France) was performed as described elsewhere ([Alton et  
174 al. 1988](#)). The test was validated (showing 100% diagnostic sensitivity and  
175 specificity) with the control positive and negative serum populations (see above) and  
176 considered positive when rendering any agglutination after four minutes ([Alton et al.  
177 1988](#)). Competitive ELISA (BioNote. Inc., Korea) was performed and standardized  
178 according to the procedures described before ([Moreno et al. 1998](#)), and the cut-off  
179 established at 30%, coincident to the value currently accepted for diagnosing bovine  
180 brucellosis by the National Service of Animal Health (SENASA) of Costa Rica  
181 ([Hernández-Mora et al. 2017](#)), which resulted in 100% diagnostic sensitivity and  
182 specificity when using the control sera.

183 The AGID test was performed as described elsewhere ([Marín et al. 1999](#)).  
184 Briefly, the antigen preparation rich in NH and LPS was a soluble lyophilized extract  
185 from *B. melitensis* 16M, obtained as described elsewhere ([Aragón et al. 1996](#)).  
186 Before use, the antigen preparation was reconstituted with deionized water. One  
187 percent of Noble Agar (Difco) in borate buffer (pH 8.3) containing 10% NaCl was  
188 used for immunodiffusion. A volume of 11 ml of hot liquified agarose solution was  
189 placed in a plastic Petri dish of 100 mm x 15 mm and let solidify for 30 min at room  
190 temperature and 1 h at 4°C. The thickness of the gel in the plate was 1 mm, allowing  
191 to cut four rosettes of six wells around a central one inside the plate (3 mm-diameter  
192 wells set 3 mm apart). Each well was filled with 16 µl of the antigen (central well) or



193 serum samples (external wells) for immunodiffusion (Moreno et al. 1981). The  
194 optimal antigen concentration for the AGID test was established at 1mg/ml by serial  
195 dilutions against the control positive sera (Muñoz et al. 2005). Gel diffusion plates  
196 were incubated at room temperature inside a wet chamber and read at 24, 32, and  
197 48 hours to test the reactivity of sera against NH and/or LPS (Marín et al. 1999).  
198 Before the 48h reading, the plates were soaked in a 5% sodium citrate solution for  
199 1 hour to clear potential unspecific reactions (Muñoz et al. 2005). The same person  
200 recorded the precipitin lines in all samples using a dark box with indirect light coming  
201 from the bottom. The AGID reaction generated the following possible results (Fig 1):  
202 i) precipitation lines against only the LPS close to the antigen well (henceforth  
203 AGID/LPS positive) were interpreted as due to infection or vaccination; ii)  
204 precipitation lines against both NH (close to the serum well) and LPS (henceforth  
205 AGID/NH+LPS positive) were interpreted as a very recent vaccination or as infected  
206 with *Brucella* and possible shedding of the bacterium, and; iii) no precipitation lines  
207 (AGID negative).

208

### 209 **2.3. Statistical analysis**

210 Interrater reliability against different assays and between vaccinated animal  
211 populations was achieved by calculating Cohen's kappa coefficient ( $\kappa$ ) (McHugh  
212 2012), with a Confidence Interval of 95%. The level of agreement according to the  $\kappa$   
213 values and the corresponding proportion of reliable data (within parenthesis)  
214 followed the interpretation as follows (McHugh 2012): none=0-0.2 (0-4%);  
215 minimal=0.21-0.39 (4-15%); weak=0.4-0.59 (15-35%); moderate=0.6-0.79 (35-  
216 63%); strong=0.8-0.9 (64-81%); almost perfect>0.9 (82-100%).

217 .

### 218 **3. Results**

219

#### 220 ***3.1. The diagnostic sensitivity and specificity of sera from *B. abortus* infected*** 221 ***and brucellosis-free cows.***

222 With positive and negative control sera, the RBT, cELISA and AGID/LPS  
223 scored 100% diagnostic specificity and 100% diagnostic sensitivity. The  
224 AGID/NH+LPS resulted in 100% diagnostic specificity and 94.3 % diagnostic  
225 sensitivity. However, the two sera from infected cows that resulted negative in  
226 AGID/NH+LPS were positive in the AGID/LPS. Precipitin lines against the NH  
227 alone, occasionally seen in infected animals in previous studies, were not observed.

228

#### 229 ***3.2. Diagnostic performance after *B. abortus* S-19 vaccination in brucellosis-*** 230 ***free heifers***

231 The evolution of the proportion of reactors after S19 vaccination in brucellosis-  
232 free heifers (i.e., Farm 1) is shown in [Figure 2](#). None of the vaccinated animals  
233 induced positive responses in the AGID/NH+LPS independently of the route of  
234 vaccination. As expected, conjunctival vaccination ([Fig 2A](#)) induced a significantly  
235 lower and shorter serological response than subcutaneous vaccination ([Fig 2B](#)). The  
236 conjunctively vaccinated heifers became negative in all tests seven weeks after  
237 vaccination ([Fig 2A](#)). Moreover, no conjunctively vaccinated animal was either  
238 AGID/LPS positive or AGID/ NH-LPS positive. In contrast, the serological response  
239 induced in the subcutaneously vaccinated heifers was of high intensity and duration  
240 ([Fig 2B](#)), with 20% of the animals remaining positive after one year, 5% after two

241 years and none after three years. Although the proportion of reactors in the RBT in  
242 the subcutaneous vaccinated group was slightly higher than the cELISA from day 70  
243 on, the correlation of the grouped assays between both tests was similar throughout  
244 the experiment ( $\kappa=0.81$ ) (Table 3), inquiring about the alleged higher specificity of  
245 the cELISA for discriminating the S19 vaccinated cattle (Fig 2B). A moderate to high  
246 proportion of the subcutaneously vaccinated heifers was AGID/LPS positive until day  
247 80, but none reacted against the NH (Fig. 2B).

248

### 249 **3.3. Diagnostic performance after S-19 vaccination of the *B. abortus*-infected** 250 **herd**

251 The first RBT and cELISA analyses in Farm 2 were performed just one year  
252 after the S19 vaccination, while the AGID responses were studied 1000 after the  
253 S19 vaccination. About one year after vaccination (day 345), 39 animals were culled.  
254 After this time, 42 additional bovines were culled, with 172 bovines remaining after  
255 1000 days (Table 2). Although all cows in this infected farm were serologically  
256 negative just before S19 vaccination, they displayed positive antibody responses in  
257 the various tests after S19 vaccination (Fig. 3). Overall, the serological responses  
258 were higher and more persistent in cows and heifers vaccinated subcutaneously (Fig  
259 3A, B and E). The evolution of the proportion of reactors in the cows vaccinated  
260 subcutaneously with the reduced doses (Fig 3A) was closely similar to that of the  
261 heifers vaccinated subcutaneously with the standard dose, with a high number of  
262 serologically positive animals (mainly in the cELISA) until the end of the  
263 observational period. The subcutaneous vaccination route caused the lowest  
264 diagnostic specificity of all serological tests, with some animals positive even in the

265 AGID/NH+LPS for a protracted interval after vaccination (Fig 3A and B). In contrast,  
266 the lowest serological reactivities were obtained in conjunctively vaccinated animals  
267 (Fig 3 C and D). None of the heifers vaccinated through this route generated positive  
268 AGID/NH+LPS results (Fig 3D). Similar results were obtained in the cows vaccinated  
269 conjunctively (Fig 3C) (only one animal was positive in the AGID/NH+LPS).  
270 Moreover, in the conjunctival vaccinated bovines, the proportion of reactors in RBT  
271 was moderate to very low, but not in cELISA. This last test showed the lowest  
272 specificity to interpret the serological response of the vaccinated animals in the  
273 infected herd. Thirteen months after vaccination, no additional AGID/NH+LPS-  
274 positive animals were detected. The proportions of AGID/LPS and AGID/NH+LPS  
275 positive reactions (mainly the latter) were significantly lower than those observed in  
276 RBT and cELISA.

277         The only abortion registered occurred in cows vaccinated subcutaneously  
278 with a reduced dose of S19 (see arrow in Fig 3A), resulting in a positive culture for  
279 the *B. abortus* biovar 1 field strain, thus confirming the infection. As expected, the  
280 aborted cow displayed a positive AGID/NH+LPS response. After this abortion event,  
281 the proportion of reactors of Farm 2 increased (Fig 3F), attaining its maximum at 345  
282 days, indicating an anamnestic response of the herd upon contact with field *Brucella*.  
283 It is worth noting that, independently of the S19 vaccination scheme of bovines in  
284 Farm-2, a higher overall ratio of cELISA/RBT reactors was observed in the grouped  
285 values from day 285 to 1000 ( $2.5 \pm 1.6\%$ ) (after the abortion event) than in preceding  
286 days ( $0.9 \pm 0.2$ ). Likewise, the correlation values between the RBT and cELISA were  
287 lower from 285 to 1000 days ( $\kappa < 0.50$ ) than in previous dates ( $\kappa = 0.60-0.79$ ) (Fig 3F).  
288 This cELISA increase related to the RBT assay after day 225 adds further doubts on

289 the usefulness of the cELISA as a "confirmatory" test. No other field *Brucella* was  
290 isolated despite repeated attempts, and no other cow aborted during the study.  
291 However, a *B. abortus* RB51 vaccine strain was isolated from the milk of one RBT-  
292 negative but cELISA-positive cow, showing that RB51 can be shed during a  
293 protracted period after vaccination and induces positive cELISA responses.

294 The interrater reliability  $\kappa$  values between tests was estimated in cases where  
295 data allowed analysis (Table 3). The overall  $\kappa$  coefficients among the RBT and  
296 cELISA in the population of bovines from Farm-2 varied from none to barely  
297 moderate ( $\kappa=0.16-0.61$  [0-35%]) levels (Table 3). Again, this inconsistent agreement  
298 reflects the poor reliability of the cELISA as a "confirmatory assay" in the S19-  
299 vaccinated animals of Farm 2 (Fig 3). Overall, there seems not to be a significant  
300 influence of previous RB51 vaccination on the serological response against the  
301 AGID/NH+LPS after S19 vaccination, regardless of the route. Indeed, the  $\kappa$   
302 coefficients among the various tests varied from none to weak ( $\kappa < 0.55$ ).

303 The results of the animals reacting positively in the AGID (either AGID/LPS  
304 positive or AGID/NH+LPS positive) after vaccination in the infected farm are  
305 described in Table 4. AGID/NH+LPS positive responses appeared throughout the  
306 serological follow-up in 7 cows and 5 calves, corresponding to ~5% of the herd. All  
307 these animals were also RBT, cELISA and AGID/LPS positive at all sampling dates  
308 after vaccination. One subcutaneously vaccinated cow (574/5) and two calves  
309 (18161, 18168) gave a positive AGID/NH+LPS reaction on day 45, probably due to  
310 immunoprecipitating antibodies produced early after vaccination that disappeared  
311 afterward. One cow (587/5) was AGID/NH+LPS positive on day 45 and again on day  
312 345, indicating infection or reactivation close to one year after vaccination. Bovines

313 (7338, 10517, 8044, 10002, 18162, 18174 and 18166) precipitating NH in later days  
314 are considered infected. The cow 7338 was RBT, cELISA and AGID/NH+LPS  
315 positive before and on the date it aborted. Since immunoprecipitating antibodies  
316 against NH correlate with the shedding of *Brucella* organisms (Alonso-Urmeneta et  
317 al. 1988a; 1988b; Díaz et al. 1979; Díaz-Aparicio et al. 1993; 1994; Ducrotoy et al.  
318 2018; Jones et al. 1980; Marín et al. 1999; Moreno 1981; Muñoz et al. 2005; WOA  
319 2023), these are the most epidemiological relevant animals.

320

#### 321 **4. Discussion**

322 Independent of the S19 vaccination protocol and dose, most bovines become  
323 protected against brucellosis (Nicoletti 1990a; 1990b). Only one abortion due to field  
324 *B. abortus* was registered during the 1000 trial period in Farm 2, and no other  
325 bacterial isolation was noted during this lapse. However, the serological response  
326 varies depending on whether the vaccinated animals are calves, adults, or  
327 subcutaneously immunized with complete or reduced doses or through the  
328 conjunctiva and whether the bovines inhabit a brucellosis-free or a *Brucella*-endemic  
329 environment.

330 As shown here, conjunctival vaccination has significant advantages over  
331 other protocols since it induces lower and less persistent antibodies detected by  
332 diagnostic serological assays, indicating that this vaccination method is the most  
333 suitable for programs aimed to control brucellosis, either in combination with test and  
334 slaughter or after mass vaccination (Blasco et al. 2020; Nicoletti 1990a; 1990b). In  
335 contrast, subcutaneous S19 vaccination of brucellosis free-heifers induced antibody  
336 responses detected by serological assays in some animals for a protracted period.

337 Accordingly, this vaccination method, although protective, is less suitable for  
338 eradication programs that combine S19 vaccination of heifers or cows with tests and  
339 slaughter since a significant proportion of the animals remain positive in diagnostic  
340 serological tests.

341 Mass vaccination of cattle with S19 aims to interrupt the transmission cycle  
342 brucellae and, with time, to reduce bovine brucellosis prevalence to a reasonable  
343 minimum to allow initiating programs based on test and slaughter combined or not  
344 with the vaccination of young replacement heifers (Blasco et al. 2021). Although  
345 most vaccinated animals are protected under this strategy, interpreting serological  
346 tests becomes extremely difficult in endemic conditions where field *B. abortus*  
347 coexists with S19 vaccination. This problem is due to previous vaccinal or post-  
348 vaccinal contacts with field *Brucella* and boosting effects in the antibody responses  
349 of vaccinated animals. In all likelihood, this was the case of Farm 2, regardless of  
350 the vaccination scheme. However, even under these conditions, the conjunctival  
351 route was again the strategy that induced the lower antibody responses.

352 Proposals to interpret serological tests under problematic conditions similar  
353 to Farm 2 are based on feeble and unreliable assumptions on the existence of the  
354 so-called "confirmatory tests" for distinguishing vaccinated from *Brucella*-infected  
355 bovines (Blasco et al. 2020; Moreno et al. 2022). Indeed, over the years, several  
356 investigators have argued that cELISA is a "confirmatory" test capable of  
357 differentiating vaccinated from infected cattle (Nielsen et al. 1995; 2007; 2008), an  
358 assumption reflected in the guidelines of at least some makers (e.g.  
359 (<https://www.svanova.com/> ; <https://www.bionote.co.kr/>). However, it was clear that  
360 cELISA was not fully specific even when testing sera from brucellosis-free heifers

361 maintained in a brucellosis-free environment of Farm 1. Moreover, regardless of the  
362 S19 vaccination dose, route, or reproductive status of the bovines, the number of  
363 cELISA reactors in Farm-2 surpassed the RBT-positives after day 225, which  
364 contradicts the confirmatory potential of this test, arguing against using cELISA after  
365 "screening" with the RBT. Indeed, if cELISA is intended as a "confirmatory" assay,  
366 should the RBT-negative/cELISA-positive be considered infected or non-infected? If  
367 estimated infected, there is the danger of over-culling protected animals.  
368 Alternatively, If considered non-infected, there is the risk of maintaining infected  
369 cows in the herd. A similar conundrum applies to other binding tests, such as iELISA,  
370 FPA and complement fixation (CFT), claimed also to be "confirmatory" brucellosis  
371 tests ([Ducrotoy et al. 2018](#); [Moreno et al. 2022](#)).

372 Under the conditions of mass S19 vaccination, the wiser approach is  
373 procuring a rational line of thought according to the epidemiological setting ([Blasco  
374 et al. 2020](#); [Moreno et al. 2022](#); [Khurana et al. 2021](#)). For instance, serological  
375 testing for a protracted time with conventional assays (e.g., RBT, ELISAs, FPA, CFT)  
376 is not recommended in the scenarios of mass vaccination in endemic areas. This  
377 decision-making seems counterintuitive; however, the rationale is based on the  
378 assays' diagnostic confusion after mass vaccination in endemic areas for a  
379 protracted period. Nevertheless, AGID/NH+LPS precipitation tests may still be  
380 valuable in these epidemiological scenarios since there is clear evidence that  
381 bovines reacting against NH are the most hazardous animals from an  
382 epidemiological standpoint. Indeed, antibodies immunoprecipitating NH correlate  
383 with an active infection and bacterial shedding ([Alonso-Urmeneta et al. 1998](#); [Díaz  
384 et al. 1979](#); [Díaz-Aparicio et al. 1993](#); [Ducrotoy et al. 2018](#); [Jones et al. 1980](#); [Marín](#)



385 [et al. 1999](#); [Moreno 1981](#); [Muñoz et al. 2005](#)). Since the diagnostic specificity of the  
386 NH tests for detecting actively infected bovines is high (as in the case of cow 7338  
387 of Farm 2), the AGID/NH+LPS test is suitable under epidemiological conditions  
388 similar to that of Farm 2 for the serial testing and culling of the most hazardous cows.  
389 This strategy has been successfully applied to eradicate bovine brucellosis in some  
390 regions ([Blasco et al. 2021](#)). It is important to emphasize that this culling strategy  
391 was not undertaken in this work because our study aimed to determine the evolution  
392 of the serological responses in the cumbersome epidemiological conditions of Farm  
393 2, in which S19 vaccinated animals were maintained in an endemic environment.

394 We did not find any systematic study describing the effects that RB51-  
395 immunized cattle have on S19 vaccination. Overall, the previous immunization of  
396 Farm 2 cows with RB51 did not improve the outcome of infection since, before the  
397 test and slaughter and S19 vaccination were implemented, there was a high  
398 brucellosis prevalence and high abortion rates. Moreover, the fact that RB51 was  
399 isolated in one animal indicates that this rough vaccine was circulating in the herd  
400 for a prolonged period. This event is relevant since this rough vaccine may hamper  
401 the diagnoses' interpretation, induce abortions in cattle and infect humans ([Blasco](#)  
402 [et al. 2021](#)).

403 Overall, we conclude that S19 conjunctival vaccination is the most suitable  
404 immunization protocol to combat bovine brucellosis, that serial testing of RBT-  
405 positive animals with cELISA is not an adequate diagnostic strategy under any  
406 epidemiological conditions and that the NH immunoprecipitation test helps identify  
407 actively infected cows in herds living in endemic areas and subjected to mass  
408 vaccination with S19.

409

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414

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416 The authors declare that they have no known competing financial interests or  
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419

**420 Ethical approval**

421 The authors confirm that the ethical policies of the journal have been followed.

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**Table 1.** S19-vaccinated bovines from brucellosis-free (Farm 1) or infected (Farm 2) herds according to age group, vaccination protocol, and previous RB51 vaccination.

<b>Facility</b>	<b>Reproductive status</b>	<b>S19 Vaccination and dose (CFU)<sup>a</sup></b>	<b>Previous RB51 vaccination</b>	<b>Nº bovines</b>
Farm 1	Heifers	Conjuntival 5x10 <sup>9</sup>	No	5
		Subcutaneous 5x10 <sup>9</sup>	No	20
Farm 2	Cows	Subcutaneous 5x10 <sup>9</sup>	Yes	32
			No	42
	Conjuntival 5x10 <sup>9</sup>	Yes	62	
		No	44	
	Heifers	Subcutaneous 5x10 <sup>10</sup>	No	19
		Subcutaneous 5x10 <sup>9</sup>	No	18
Conjuntival 5x10 <sup>9</sup>		No	36	
<b>Total</b>				<b>278</b>

<sup>a</sup> Conjuntival and subcutaneous S19 vaccinations were carried out as described elsewhere ([Balsco et al. 2020, 2023](#); [Chacón-Díaz 2021, WOA 2023](#)).

**Table 2.** The number of S19 vaccinated animals tested in Farm 2 and culled at different periods over 1000 days.

Sampling days after S19 vaccination	Number of bovines	
	Tested	Culled <sup>a</sup>
0	253	0
45	253	0
105	252	1
165	251	1
225	248	4 <sup>b</sup>
285	243	5
345	215	28
405	211	4
1000	172	38

<sup>a</sup> The animals were culled due to infertility,

<sup>b</sup> One cow *B. abortus* culture-positive was culled due to abortion

**Table 3.** Interrater reliability  $\kappa$  values between RBT and cELISA tests of sera from bovines of Farm 1 and Farm 2, following different S19 vaccination protocols and tested at various intervals.

<b>Facility</b>	<b>Reproductive status</b>	<b>S19-vaccination<sup>a</sup></b>	<b>Number of bovines</b>	<b>RBT vs. cELISA</b>
Farm 1	Heifers	S.c. 5x10 <sup>9</sup> CFU	20	0.81 (1.00-0.65)
		S.c. 5x10 <sup>9</sup> CFU	5	ND <sup>b</sup>
Farm 2	Cows	S.c. 5x10 <sup>9</sup> CFU	74	0.55 (0.47-0.63)
		Conj. 5x10 <sup>9</sup> CFU	106	0.27 (0.21-0.34)
	Heifers	S.c 5x10 <sup>10</sup> CFU	19	0.61 (0.46-0.75)
		S.c 5x10 <sup>9</sup> CFU	18	0.55 (0.40-0.71)
		Conj. 5x10 <sup>9</sup> CFU	36	0.16 (0.06-0.25)

<sup>a</sup> Subcutaneous: S.c; Conjunctival: Conj. The confidence interval was 95%. The numbers within the parenthesis correspond to interval range values.

<sup>b</sup> ND, not performed because values were non-suitable for analysis

**Table 4.** Characteristics of the animals immunoprecipitating in the AGID with the NH+LPS antigen after vaccination with S19 in the infected Farm 2.

	Identification	Vaccine route and dose	Age at day 0 (years)	AGID results at the indicated postvaccination days									
				0	45	105	165	225	285	345	405	1000	
Cows	574/5	S.c. 5x10 <sup>9</sup> CFU	14.20		++	++						ND	
	587/5	S.c. 5x10 <sup>9</sup> CFU	3.80		++	++	++	++	++	++	++	ND	+,+
	7338	S.c. 5x10 <sup>9</sup> CFU	11.80		++	++	++	Abort	ND	ND	ND	ND	ND
	10517	S.c. 5x10 <sup>9</sup> CFU	8.50		++	++	++	++	++	++	++	++	ND
	71/6	S.c. 5x10 <sup>9</sup> CFU	13.20		++	++	++	++	++	++	++	ND	ND
	8044	S.c. 5x10 <sup>9</sup> CFU	11.00		+	+	++	+	++	++	++	++	ND
	10002	Conj. 5x10 <sup>9</sup> CFU	8.50		++	++	++	++	++	++	ND	ND	ND
Heifers	18161	S.c. 5x10 <sup>10</sup> CFU	0.30		++	++	++					ND	
	18162	S.c. 5x10 <sup>10</sup> CFU	0.30		++	++	++	++	++	++	++	++	ND
	18168	S.c. 5x10 <sup>10</sup> CFU	0.25		++	++	++	++	++	++	++	++	
	18174	S.c. 5x10 <sup>10</sup> CFU	0.25		++	++	++	++	++	++	++	++	+
	18166	S.c. 5x10 <sup>10</sup> CFU	0.26		++	++	++	++	++	++	++	+	ND
Number of bovines													

Subcutaneously (S.c.); conjunctively (Conj); AGID negative reactions: empty boxes in gray color; AGID/LPS positive reactions: boxes in blue; AGID/ NH+LPS positive reactions: boxes in orange; boxes in green: culled bovines; positive RBT( + ); positive cELISA ( + ); abortion (Abort); no serum available (ND). None of the bovines included in the table were previously vaccinated with RB51. At the time of abortion, cow 7338 was positive in both RBT and cELISA tests.

Figure legends,

**Fig 1. AGID test in infected, S19 vaccinated and negative controls using LPS-NH rich antigen.** A total of 16  $\mu$ l of 1mg/ml of LPS-NH antigen (Ag) was tested against sera of S19-vaccinated, *Brucella*-positive, and *Brucella*-negative bovines. The sera from S19-vaccinated bovines labeled v1 to v6 were confronted against NH-LPS-rich antigen (A). The sera from one *Brucella*-infected bovine (labeled "I") and five control sera from negative bovines (labeled n1 to n5) were tested (B). In panel A, five S19-vaccinated bovines were AGID/LPS positive but AGID/LPS-NH negative, while one vaccinated animal (v3) was AGID negative. In panel B, the serum of the *Brucella*-infected bovine (I) showed two lines of precipitation (i.e., was AGID/NH+LPS positive) corresponding to the LPS (line closer to the antigen well) and NH (line closer to the serum well).

**Fig 2. Evolution of the proportion of conjunctivally (Panel A) or subcutaneously (Panel B) S19-vaccinated heifers reacting in different serological tests in the brucellosis-free farm (Farm 1).** Notice that several heifers vaccinated subcutaneously reacted AGID/LPS positive, but none of the vaccinated heifers reacted positive in the AGID/NH+LPS. Day 0 corresponds to the bleeding before vaccination.

**Fig 3. Proportion and evolution of S19-vaccinated bovines reacting against different serological tests in Farm 2.** Evolution of the antibody response in time to different serological tests of cows (A and C) and heifers (B, D and E) that were vaccinated subcutaneously (S.c) (panels A, B and E) or conjunctively (Conj.) (C and D) with S19. Evolution of all bovines of Farm 2 vaccinated with S19 (independently of the dose and route) positive for RBT+cELISA (F). Notice that in "F," the antibody response shows biphasic kinetics due to vaccination (peak at 45 days) and boosting effect with field *B. abortus* (peak at 345 days). Vaccination with complete ( $5 \times 10^{10}$  CFU) or reduced ( $5 \times 10^9$  CFU) doses is indicated. The cELISA/RBT ratio in "F" from day 45 to 225 is  $0.9 \pm 0.2$ , while from day 345 to 1000 corresponds to  $2.5 \pm 1.6$ . All animals were kept together in infected Farm 2 for 1000 days.







