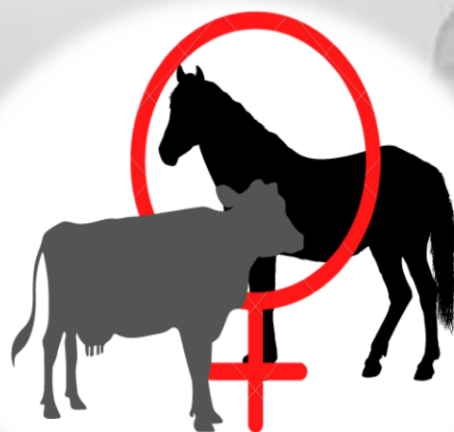


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**5<sup>th</sup> International Conference on  
Uterine Disorders in Farm Animals:  
*Endometritis as a cause of infertility in  
domestic animals***

22<sup>nd</sup> – 25<sup>th</sup> June 2022, Cracow, Poland

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## Welcome to the Conference

*Dear Colleagues,*

We are pleased to welcome everyone to Cracow for the International Conference “ENDOMETRITIS AS A CAUSE OF INFERTILITY IN DOMESTIC ANIMALS”. It is the fifth edition of our Conference and we hope not the last one.

The aim of the Conference is to provide current knowledge about uterine biology and morphology, as well etiology and pathogenesis of endometritis, clinical and subclinical endometritis, endometrosis, new diagnostic methods and new treatment strategies. As in previous conferences, the impact of endometritis on reproductive health and animal productivity will be also discussed.

The first edition was held in Olsztyn in 2013 under special EU program Regpot – project Refresh that was implemented to improve research standards of the Institute and integration with the European Research Area and regional development.

The second one, in Gdansk, in 2015 was carried out as a main part of bigger international Conference on **"Biology and Pathology of Reproduction in Domestic Animals"**.

The third conference, held again in Olsztyn in 2017, was organized with the funds from our next project KNOW: Leading National Research Center in Veterinary Sciences: “Healthy Animal – Safe Food”.

The fourth conference, in Warsaw was a **joint Polish-Japanese Seminar entitled "Cutting edge of Reproductive Physiology - Key processes for birth of a new life"** and was held together with our partners from Japan.

This year, we meet in Cracow for the 5<sup>th</sup> edition and it gives me a great pleasure to welcome all the seventy participants from ten countries to this conference. Unusually, we meet after 3 and not 2 years, as due to COVID-19 pandemic we had to postpone the conference. Also new this time is the hybrid format of the conference, so we welcome not only all the participants gathered here, but also all of you connected with us remotely. This year's conference is also a satellite meeting of the ICAR 2020+2 taking place in Bologna, Italy starting on June 26<sup>th</sup>. Over the years we have gathered a group of regular participants in our conference and if we may say good friends with common passion for reproductive biology of domestic animals. We therefore really look forward to meeting you after such a long break and we are sure that we will have many exciting discussions.

We want to thank all of our invited speakers who have accepted our invitation to come to Cracow. We are very pleased to have them with us in our meeting and look forward to hearing about the interesting research that they carry out.

Finally, we want to thank organizing committee for their hard work. We are grateful to you for your work and support. Especially we want to thank:

Anna Szóstek-Mioduchowska, Karolina Łukasik, Beenu Moza Jalali, Magdalena Weidner - Glunde from the Department of Reproductive Immunology and Pathology, IAR&FR PAS and Monika Bugno - Poniewierska from the Department of Animal Genetics, Breeding and Ethology, University of Agriculture in Krakow.

*The Conference is organized with support of IRZBŻ PAN, MEiN “Doskonała Nauka” and PAN “DUN”.*

The organizers of the conference strongly condemn Russia's military aggression against Ukraine. At this critical time, we express our solidarity with the Ukrainian people.

We wish all of you many fruitful discussions, meetings with old friends, establishing new partnerships and having a pleasant stay in Warsaw

*Dariusz Jan Skarzyński, Tomasz Janowski*

We are grateful to our sponsors for generous support of the Conference:

- MEiN “Doskonała Nauka” grant
- Polish Academy of Sciences - “DUN” grant
- Institute of Animal Reproduction and Food Research of Polish Academy of Sciences



Ministerstwo  
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## GENERAL INFORMATION

The Conference Venue will be the Kossak Hotel (Plac Kossaka 1, Kraków), lectures will be held in the conference room at 6<sup>th</sup> floor.

## **FOOD SERVICE**

### **Meals**

Lunches will be provided with in Kossak Hotel Restaurant “Percheron” at lobby floor according to the schedule of the meeting.

### **Coffee Breaks**

Coffee and cookies will be available in foyer close to the presentation room.

## **SOCIAL EVENTS**

### **Welcome**

Wednesday, 22<sup>nd</sup> June, 7:30 p.m. (free for registrants) at Kossak Hotel Restaurant “Percheron”, later guided Cracow sightseeing tour

### **Gala Dinner**

Thursday, 23<sup>rd</sup> June, 8:00- 11:00 p.m. (free for registrants). The Restaurant is located in walking distance from the Venue Hotel.

Restauracja Szara Gęś w Kuchni  
Rynek Główny 17  
Kraków

### **Arabian Horses State Stud**

Saturday, 25<sup>th</sup> June 8:30 a.m – 3 p.m. Scientific excursion to Michalow Arabian Horses State Stud (free for registrants). Buss will stop in front Kossak Hotel.



## 5<sup>th</sup> International Conference on Uterine Disorders in Farm Animals:

### *Endometritis as a cause of infertility in domestic animals*

Wednesday, June 22<sup>nd</sup>

- 14:00 – 15:00 Registration
- 14:45 – 15:00 Opening Ceremony – **Prof. J. JANOWSKI & Prof. D. SKARZYŃSKI**
- Preconference Session: *Genetic and biotechnological aspects of equine reproductive health – in memory of Prof. William Twink Allen***
- Chairman: Prof. Amanda DE MESTRE  
Chairman: Prof. Graca FERREIRA-DIAS
- 15:00 – 15:30 **Prof. Marian TISCHNER** – in memory of Prof. William Twink Allen
- 15:30 – 16:00 Invited lecture: *It's not always the endometrium: genetic variants of the conceptus associated with pregnancy loss throughout gestation*  
**Prof. Amanda DE MESTRE**
- 16:00 – 16:30 Invited lecture: *Mare Endometrosis: From histopathology to epigenetics*  
**Prof. Graca FERREIRA-DIAS**
- 16:30 – 16:50 Coffee break
- 16:50 – 17:10 *Research trends in biotechnology of horse reproduction over the last two decades inspirated by Krakow-Cambridge cooperation - summary of own research*  
**J. KOCHAN, M. TISCHNER, A. OKÓLSKI, A. NOWAK, W. MŁODAWSKA, M. TISCHNER JR, J. GABRYŚ, M. BUGNO-PONIEWIERSKA**
- 17:10 – 17:30 *Semiautomatic detection of local vasodilation based on two vascular measures in inflamed equine endometrium*  
**Ł. ZDROJKOWSKI, T. JASIŃSKI, A. NIWIŃSKA, B. PAWLIŃSKI, M. DOMINO**
- 17:30 – 17:50 *Immunohistochemical expression of Myeloperoxidase in the equine endometrium (online presentation)*  
**S. PARRILLA-HERNÁNDEZ, F. Reigner, E. Feyereisen, C. Munaut, T. Franck and S. Deleuze**
- 19:30 **”Welcome reception” with Cracow sightseeing tour**  
**At Kossak Hotel Restaurant**

## Thursday, June 23<sup>rd</sup>

- 08:00 – 09:00 Registration
- 09:00 – 09:45 **Plenary lecture – *Protecting the bovine endometrium against damage caused by pathogenic bacteria* (online lecture)**  
**Prof. Martin SHELDON**
- 09:45 – 10:15 Coffee break
- 10:15-13:10 Session I: Pathophysiology of Uterine Functions**
- Chairman: Prof. Tal RAZ  
Chairman: Prof. Claudia KLEIN
- 10:15 – 10:45 Invited lecture: *Postpartum ovarian and uterine functions associated with metritis and endometritis in dairy cows*  
**Prof. Tal RAZ**
- 10:45 – 11:15 Invited lecture: *Excessive TAGLN and CCN2 expression in equine endometrial fibrotic glands*  
**Prof. Claudia KLEIN**
- 11:15 – 11:30 Coffee break
- 11:30 – 11:50 *How EVs affect reproduction*  
**A. ANDRONOWSKA**
- 11:50 – 12:10 *Transcriptomic analysis of mare endometrium reveals molecular changes in immune response and metabolism at different stages of endometriosis*  
**A. SZÓSTEK-MIODUCHOWSKA, A. WÓJTOWICZ, A. SADOWSKA, B.M. JALALI, M. SŁYSZEWSKA, K. ŁUKASIK, A. GURGUL, T. SZMATOŁA, M. BUGNO-PONIEWIERSKA, G. FERREIRA-DIAS, D.J. SKARZYNSKI**
- 12:10 – 12:30 *The role of interleukin 13 in the development of endometriosis in the mare*  
**A. WÓJTOWICZ, A. SADOWSKA, FERREIRA-DIAS, A. SZÓSTEK-MIODUCHOWSKA**
- 12:30 – 12:50 *Substrate stiffness modifies gene expression of equine endometrial fibroblasts in vitro*  
**E. ZU KLAMPEN, D. HERRMANN, C. KLEIN**
- 12:50 – 13:10 *DNA methyltransferases in equine endometrial fibroblasts*  
**J. ALPOIM-MOREIRA, A. WÓJTOWICZ, A. SADOWSKA, A. SZOSTEK-MIODUCHOWSKA, M.R. REBORDÃO, D.J. SKARZYNSKI, G. FERREIRA-DIAS**
- 13:10 – 14:10 Lunch



**14:25 – 15:00 Around Animal Reproduction - Poster session - Flash Talk**

14:25 – 14:30 *The effect of interleukin 6 on mRNA expression of fibrotic markers in equine endometrial fibroblasts*

**E. ŻEBROWSKA**, G. FERREIRA-DIAS, A. SZÓSTEK-MIODUCHOWSKA

14:30 – 14:35 *Genetic polymorphism of NOTCH4 gene is associated with anestrus in cows*

**K. Gh. M. MAHMOUD**, S. IBRAHIM, A. SOSA, H. R. H. DARWISH, E. A. ALMADALY, D. E. ILIE, M. H. HASANAIN, M. F. NAWITO

14:35 – 14:40 *EGF regulates expression of extracellular matrix proteins in porcine endometrium through STAT3 activation*

**P. LIKSZO**, K. ŁUKASIK, B.M. JALALI

14:40 – 14:45 *Changes in transcriptome profile in equine corpus luteum during early pregnancy,*

**K. LUKASIK**, M.B. JALALI, A. BACLAWSKA, A. GURGUL, M. BUGNO-PONIEWIERSKA, D. J. SKARZYNSKI

14:45 – 14:50 *Expression pattern of apoptotic genes in corpus luteum during thermal stress in Egyptian buffaloes,*

**S.M. GALAL**, S. IBRAHIM, K. MAHMOUD, O. ADEL, A. A. SHOKRY, El-Belely M S, Ismail S T

14:50 – 14:55 *Gene expression and interaction between aryl hydrocarbon receptor, interleukin 17 and transforming growth factor  $\beta$ 1 in equine endometrial fibrosis,*

**A. SADOWSKA**, A. WÓJTOWICZ, E. ŻEBROWSKA, M. SŁYSZEWSKA, G. FERREIRA-DIAS, A. SZÓSTEK-MIODUCHOWSKA

14:55 – 15:00 *Possible factors which determine testosterone levels in Japanese black bears*

**J. TOMIYASU**, M. KAYANO, K. HAZANO, M. MATSUI, Y. NEMOTO, T. NAGANUMA, S. KOIKE, K. YAMAZAKI

**15:00 – 18:20 Session II: Effects of uterine disorders in reproductive health of farm animals**

Chairman: Prof. Christine AURICH

Chairman: Prof. Wojciech BARAŃSKI

15:00 – 15:30 Invited lecture: *Association of the breeding induced endometrial response with subsequent fertility in mares*

**Prof. Christine AURICH**

15:30 – 16:00 Invited lecture: *Reproductive tract diseases – endometritis and what else?*

**Prof. Wojciech BARAŃSKI**

- 16:00 – 16:20 *Effect of heat stress on the occurrence of endometritis in dairy cows*  
**M. TEKIN**, C. GUSE, M. IWERSEN, M. DRILLICH, K. WAGENER
- 16:20 – 16:40 *Hastening first postpartum ovulation in early lactation may reduce the incidence of endometritis in dairy cows,*  
**S. A. Druker**, R. SICSIC, M. KEDMI, A. KAPLAN, T. RAZ
- 16:40 – 17:00 Coffee break
- 17:00 – 17:20 *Nucleolar size of large luteal cells increases in mares with endometritis*  
**M. J. ESTRADÉ**, F. PEREYRA MONTANTS, S. CASTRO, N. DZIUGYS, C. LARRANAGA, B. VARELA, R.C. MATTOS, G. PEDRANA
- 17:20 – 17:40 *Circulating and endometrial polymorphonuclear leukocyte function dynamics in postpartum dairy cows with subclinical or clinical endometritis*  
L. LIETAER, **O. BOGADO PASCOTTINI**, S. HEIRBAUT, K. DEMEYERE, L. VANDAELE, E. MEYER, V. FIEVEZ, J. LEROY, G. OPSOMER
- 17:40 – 18:00 *The vascular and perivascular morphometric features and their correlations in equine endometrium affected by endometrosis*  
**T. JASIŃSKI**, Ł. ZDROJKOWSKI, K. SIEWRUK, B. PAWLIŃSKI, M. DOMINO
- 18:00 – 18:20 *Inflammation effect on the endometrial percentage of reproductive hormone receptors and the height of the superficial and glandular epithelium in anestrus type II dairy cows*  
**M. TRELA**, Ł. ZDROJKOWSKI, D. DOMAŃSKA, O. WITKOWSKA-PIŁASZEWICZ, K. SIEWRUK, B. PAWLIŃSKI, M. DOMINO
- 20:00 – 23:00 **Gala dinner – Restauracja Szara Geś w Kuchni**

## Friday, June 24<sup>th</sup>

- 09:00 – 09:45 **Plenary lecture – *How do viruses cross the porcine endometrium to reach embryos/fetuses and cause reproductive failure?***  
**Prof. Hans Nauwynck**
- 09:45 – 10:15 Coffee break
- 10:15 – 13:00 Session III: The role of bacteria and viruses for the pathogenesis of uterine disorders**
- Chairman: Prof. Rodolfo DE LA SOTA  
Chairman: Prof. Marc DRILLICH
- 10:15 – 10:45 Invited lecture: *Carryover effect of uterine diseases on subsequent pregnancy losses in lactation*  
**Prof. Rodolfo DE LA SOTA**
- 10:45 – 11:15 Invited lecture: *Research in bovine endometritis – are we asking the best questions?*  
**Prof. Marc DRILLICH**
- 11:15 – 11:30 Coffee break
- 11:30 – 11:50 *The most common pathogens isolated from the uterus in mares before the breeding season in 2018-2020 in the Mazovia region of Poland*  
**D. DOMAŃSKA, O. WITKOWSKA-PIŁASZEWICZ, M. TRELA, B. PODESZEWSKI, M. DOMINO**
- 11:50 – 12:10 *Growth characteristics of *Trueperella pyogenes* in an uterine in vitro model*  
**M. IBRAHIM, K. WAGENER, M. DRILLICH, M. EHLING-SCHULZ, C. GABLER**
- 12:10 – 12:30 *Relationship between cultivable aerobic microbiota in the uterus and oviduct of postpartum dairy cows*  
**K. WAGENER, L. NEUBRAND, H. AWWAD, M. TEKIN, H. POTHMANN, V. HAVLICEK, U. BESENFELDER, M. EHLING-SCHULZ, M. DRILLICH**
- 12:30 – 12:50 *The effect of uterine lavage on the isolation of bacteria in mares with subclinical endometritis*  
**M. SIKORA, J. BUCZKOWSKA, R. KOZDROWSKI, J. KRÓL, M. MARCINEK**
- 12:50 – 13:10 *Isolation and host range determination of bacteriophages specific to selected equine uterine pathogen (online presentation)*  
**M. KÖHNE, S. KITTLER, M. PLÖTZ, H. SIEME**
- 13:10 – 14:10 Lunch

**14:25 – 15:00 Around Animal Reproduction 2 - Poster session - Flash Talk**

- 14.25 – 14.30 *Application of the microflow technique for the selection of stallion semen*  
**M. BUGNO-PONIEWIERSKA, J. KOCHAN**
- 14:30 – 14:35 *Endometrial miRNA expression profile during pre-implantation period of pregnancy in the mare*  
**A. SADOWSKA, T. MOLCAN, A. WÓJTOWICZ, K. ŁUKASIK, K. PAWLINA-TYSZKO, A. GURGUL, T. SZMATOŁA, M. BUGNO-PONIEWIERSKA, G.FERREIRA-DIAS, D. J. SKARZYNSKI, A. SZÓSTEK-MIODUCHOWSKA**
- 14:35 – 14:40 *IL-6 induced STAT3 activation increases VEGF expression and capillary formation in porcine endometrial endothelial cel*  
**B. M. JALALI, K. LUKASIK**
- 14:40 – 14:45 *ADAMTS metalloproteases and their regulation by transforming growth factor- $\beta$ 1 in mare endometrium,*  
**M. SŁYSZEWSKA, E. ŻEBROWSKA, A. WÓJTOWICZ, A. SADOWSKA, G. FERREIRA-DIAS, A. SZÓSTEK-MIODUCHOWSKA**
- 14:45 – 14:50 *New insight into pregnancy maintenance in she-camel: Molecular interaction among ovulatory site, uterine body and uterine horns*  
**O. ADEL, S. IBRAHIM, K. MAHMOUD, S.M GALAL, M. FATHI, A.A.M. SEIDA**
- 14:50 – 14:55 *Mammary gland carcinoma in a dog caused the hypertrophic osteopathy,*  
**O. WITKOWSKA-PILASZEWICZ, D. DOMAŃSKA, M. TRELA, B. PAWLIŃSKI**
- 14:55 – 15:00 *Genotyping of NOTCH2 gene in fertile and anestrus cows,*  
**K. Gh. M. MAHMOUD, A. S.A. SOSA, H. R. H. DARWISH, S. IBRAHIM, M. H. HASANAIN, A. M. SAKR, A. Sh. E. SHAMS, D. E. ILIE Y.F. AHMED**

**15:00 – 18:00 Session IV: Methods of diagnosis and therapy of uterine disorders in farm animals**

Chairman: Prof. Igor CANISSO  
Chairman: Prof. Geert OPSOMER

- 15:00 – 15:30 Invited lecture: *Persistent Breeding-Induced Endometritis in Mares — A Multifaceted Challenge: From Clinical Aspects to Immunopathogenesis and Pathobiology*  
**Prof. Igor CANISSO**
- 15:30 – 16:00 Invited lecture: *An overview of diagnosis and treatment protocols for uterine diseases in cattle*  
**Prof. Geert OPSOMER**
- 16:00 – 16:20 Coffee break

- 16:20 – 16:40 *Comparison of cytological, microbiological and histopathological findings of genital canal in healthy cows and cows with vestibulo-vaginal sphincter dysfunction*  
**E.S. ÖZDEMİR-SALCI, Ö.YAVAŞ, Ö.YILMAZ, G.SÖNMEZ, S.KAHYA-DEMIRBILEK, K.SEYREK-İNTAŞ**
- 16:40 – 17:00 *A new method of cytological sampling from the endometrium of dairy cows*  
**D. TOBOLSKI, Z. POLAK, M. KUPA**
- 17:00 – 17:20 *The role of microRNAs in endometritis and their potential as a diagnostic biomarker” (online presentation)*  
**S. IBRAHIM, M. O. TAQI, K. Gh. M. MAHMOUD, M. F. NAWITO**
- 17:20 – 17:40 *Endometritis in breeding mares from Spain: Microbial prevalence and antimicrobial susceptibility (online presentation)*  
**A. DORREGO, M. PÉREZ-SANCHO, M. UGARTE RUIZ, P. GAGO, E. CAMINO, A. BUENDÍA, L. DE JUAN, F. CRUZ-LÓPEZ**
- 17:40 – 18:00 *Cows with subclinical endometritis show lower IL1RA / IL1B ratio in uterine secretions detectable in vivo and at the abattoir (online presentation)*  
**A. KNEIDL, S. KIRSCH, F. WEBER, A. HELFRICH, S. SCHABMEYER, J. SCHNEIDER, W. PETZL, H. ZERBE, M. M. MEYERHOLZ**
- 18:00 **Closing Ceremony, Awarding of best presentation and poster**

## Saturday, June 25<sup>th</sup>

- 08:30 **Scientific excursion to Michalow Arabian Horses State Stud**



**UNIwersytet Rolniczy**  
im. Hugona Kollątaja w Krakowie



**Ministerstwo**  
**Edukacji i Nauki**

**INVITED LECTURE**

**It's not always the endometrium: genetic variants of the conceptus associated with pregnancy loss**

A. M. DE MESTRE<sup>1</sup>, C. SHILTON<sup>1</sup>, J. ROACH<sup>1</sup>, A. KAHLER<sup>1</sup>, R. MOUNCEY<sup>2</sup>, D. C. WATHES<sup>2</sup>, B. DAVIS<sup>3</sup>,  
T. RAUDSEPP<sup>3</sup>

<sup>1</sup>Department of Comparative Biomedical Sciences

<sup>2</sup>Department of Pathobiology and Population Sciences, The Royal Veterinary College, London, United Kingdom

<sup>3</sup>College of Veterinary Medicine, Texas A&M University, College Station, Texas, USA

Corresponding author email: [ademestre@rvc.ac.uk](mailto:ademestre@rvc.ac.uk)

Embryonic and fetal loss remain one of the greatest challenges in reproductive health with 5 - 10% of established day 15 pregnancies and subsequently 5% of day 70 pregnancies failing to produce a viable foal. The underlying reason for these losses is variable but ultimately most cases will be attributed to a primary pathology of the mare (such as endometrial pathology, endocrine function, immunopathology and oocyte characteristics) or the embryo/feto-placental unit (inherited from the stallion or mare via the germline or acquired during development). In both cases, defects could be intrinsic to the tissue or alternatively the response of that tissue to extrinsic factors such as pathogens, nutrients, and environmental contaminants. Whilst previous research has focused on both intrinsic and extrinsic factors that impact the environment in which the embryo develops, surprisingly little is known about defects intrinsic to the embryo. Both large and small genetic variants intrinsic to the conceptual tissues are commonly associated with miscarriage in women but to recently little was known about their role in fetal viability in the mare.

In order to address this gap, we set out to develop a bank of fetal and placental tissues from three phenotypes: Early Pregnancy Loss (EPL); 15 to < 70 days gestation), abortion (70 to 300 days gestation) and stillbirth (300 days to birth). DNA isolated from both allantochorion and/or fetus was hybridized to Axiom Equine 670K or GGP 70K SNP Genotyping Arrays allowing us to explore a number of candidate variants including aneuploidy, Copy Number Variation (CNVs) and more recently Single Nucleotide Polymorphisms (SNPs). Combining our published (Shilton et al, 2020) and unpublished data, we have identified autosomal aneuploidy as the most common lethal variant occurring in 20.6% (95%CI 12.0-31.6%) of EPLs (15/73). A single case of partial trisomy 6 was identified in abortion (1/104) and a partial trisomy/monosomy in a stillbirth (1/24). Our analysis of CNVs revealed a significant genome enrichment of CNVs in the allantochorion but not fetuses of EPLs when compared with age matched viable pregnancies suggesting premature acquisition of CNV in the placenta may be sufficient to cause a genetic imbalance and disrupt early development. Additionally, specific CNVs containing key developmental genes were uniquely found in the fetus and/or placentae of two or more EPLs but were absent in all viable individuals supporting an additional role for specific microdeletions. Collectively this data suggests large genomic variants are significant contributors to lethality in the first two months of gestation but can also lead to lethality in mid to late pregnancy. Future work is focusing on SNPs inherited through the germline that may contribute to these phenotypes.



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**INVITED LECTURE****Mare Endometrosis: From histopathology to epigenetics**

G. FERREIRA-DIAS<sup>1,2</sup>, M. R. REBORDÃO<sup>1,2,3</sup>, J. ALPOIM-MOREIRA<sup>1,2</sup>, A. AMARAL<sup>1,2,4</sup>,  
A. Z. SZÓSTEK-MIODUCHOWSKA<sup>5</sup>, D. J. SKARZYNSKI<sup>5,6</sup>

<sup>1</sup>CIISA-Centre for Interdisciplinary Research in Animal Health, Faculty of Veterinary Medicine, University of Lisbon;

<sup>2</sup>Associate Laboratory for Animal and Veterinary Sciences (AL4Animals);

<sup>3</sup>Polytechnic of Coimbra, Coimbra Agriculture School, Coimbra, Portugal

<sup>4</sup>Faculty of Veterinary Medicine, Universidade Lusófona, Lisboa, Portugal

<sup>5</sup>Institute of Animal Reproduction and Food Research PAS, Olsztyn, Poland,

<sup>6</sup>Faculty of Veterinary Medicine, Wrocław University of Environmental and Life Sciences, Poland

Histopathological alterations in the mare endometrium, characterized by irreversible chronic degenerative changes, mainly the deposition of collagen fibres, were first described by Kenney in the late 70's. This disease, later named endometrosis, has been a major concern for the horse industry, being responsible for large economic losses due to infertility. The only available standardized approach to diagnose endometrosis is the histopathological grading of endometrial biopsy according to Kenney and Doig. This system considers several criteria, as inflammation and fibrosis, among others. However, interpretation of histopathological lesions in the endometrial biopsy may not be consensual. Currently, studies are being conducted to establish blood-markers of endometrosis, as non-invasive diagnosis methods. Thus, our last study showed that in mares with endometrosis, blood collagen type 3 might be a useful biomarker, as a complementary less invasive diagnostic approach of fibrosis and as a fertility predictor. But, when the precise diagnosis of endometrosis is reached, no efficient treatment for this disease is currently available.

Deep knowledge of the pathogenesis of endometrosis is crucial to reach its cure. From earlier times, it is known that soon after sperm gets into the uterine lumen, a post breeding endometritis (PBE), which is a physiological event in the mare, driven by pro-inflammatory cytokines/chemokines, develops and attracts immune cells. Despite decades of research, it is controversial what drives some mares' endometrium to develop endometrosis. Mares' aging, but not so much parity, predisposes to deficient immune system function or tissue remodeling capacity that impairs extracellular matrix (ECM) homeostasis and facilitates fibrogenesis. Neutrophils are the major inflammatory cells of the innate immune system to first arrive at the mare uterus after breeding to phagocytize damaged cells, spermatozoa or microorganisms and fight endometritis. In addition to the classical antimicrobial host defense mechanisms of neutrophils, they release DNA strands entangled by proteins from their cytoplasm and nucleus to the surroundings, forming Neutrophil Extracellular Traps (NETs). This phagocytosis-independent system of pathogen destruction also occurs in the mare endometrium, when challenged by bacteria causing endometritis. Besides the antimicrobial role of the proteins present in NETs (histones, myeloperoxidase, cathepsin G, and elastase), they might provoke a deleterious effect on the endometrium of cyclic mares by stimulating collagen formation and fibrosis establishment, whose severity depends on endometrium histopathological grade and estrous cycle stage. Promising data from the *in vitro* use of specific inhibitors of enzymes present in NETs might be an important contribute to develop endometrosis therapeutical means.

Endometrosis could develop when PBE does not resolve timely and turns into a prolonged PBE, leading to persistent neutrophilia with NETs formation and collagen deposition, showing the connection between inflammation and fibrosis. As such, persistence of endometritis, flips the inflammatory uterine milieu to a fibrotic environment, resulting in endometrosis establishment. In the mare endometrium, resident fibroblasts differentiate into myofibroblasts responsible for collagen production and fibrogenesis, by action of pro-fibrotic cytokines, growth factors, and other proteins secreted by inflammatory cells and damaged cells. The pro-fibrotic cytokines affect metalloproteinases (MMPs) and their tissue inhibitors (TIMP). As such, endometrosis severity may be modulated by TGF- $\beta$ 1, which induces *in vitro* myofibroblast differentiation, up-regulates the transcription of ECM components and alpha smooth muscle actin ( $\alpha$ SMA), mediated by MMPs and TIMPs. In addition, in mare endometrium, the expression of several interleukins, cytokines and growth factors, such as connective tissue growth factor (CTGF), pro-inflammatory monocyte chemoattractant protein-1 (MCP-1), and nuclear factor kappaB (NF- $\kappa$ B) has been associated with the presence of inflammatory cells (neutrophils, eosinophils, lymphocytes), and with the establishment of endometrosis.











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**Protecting the bovine endometrium against damage caused by pathogenic bacteria**

I. M. SHELDON

Swansea University Medical School, Swansea University, Swansea, SA2 8PP, UK  
i.m.sheldon@swansea.ac.uk

Bacterial infections of the uterus cause metritis or endometritis in up to 40% of postpartum dairy cattle. Metritis and endometritis are important because they result in delayed conception or infertility. The annual cost of treatment, lost milk production and replacing infertile animals is about \$2 billion across the EU and US. However, resilient cows remain healthy and fertile, even when exposed to the same pathogenic bacteria.

Resilience to bacterial infections depends on immunity and tolerance. Immunity and inflammatory responses help clear pathogens from the uterus. Tolerance is the ability to cope with tissue and cell damage caused by the pathogens or by excessive inflammation. Immunity and inflammatory responses to pathogens are well characterized in the bovine endometrium. However, less is known about tolerance to the damage caused by bacteria in the endometrium.

Many species of pathogenic bacteria damage cells by secreting toxins that form pores in their plasma membrane. Membrane pores enable the delivery of other bacterial virulence factors into cells, result in the leakage of cytosolic molecules that bacteria can use as nutrients, and facilitate pathogen invasion. Endometrial pathogenic bacteria that secrete pore-forming toxins include *Trueperella pyogenes*, *Staphylococcus aureus* and *Escherichia coli*.

*Trueperella pyogenes* is the pathogen most associated with the severity of endometritis and infertility in dairy cattle. *Trueperella pyogenes* secretes pyolysin. Pyolysin is a cholesterol-dependent cytolysin that forms pores in cholesterol-rich areas of the plasma membrane. Endometrial stromal cells are particularly sensitive to pyolysin, which is important because the protective epithelium is lost after parturition. Therefore, there is interest in protecting endometrial cells against pore-forming toxins.

Cytolysin accessible cholesterol in plasma membranes is essential for binding of cholesterol-dependent cytolysins. We first considered whether reducing cellular cholesterol could protect against pyolysin. Cellular cholesterol was reduced using three approaches: (a) cyclodextrins to bind cholesterol; (b) activators of cellular cholesterol efflux; and (c) inhibitors for enzymes in the cholesterol biosynthesis pathway. All three approaches protected cells against pyolysin-induced cell damage. The treatments reduced pyolysin-induced leakage of potassium ions and lactate dehydrogenase protein from cells, reduced cytoskeletal changes, and prevented cytolysis.

The next consideration was whether physiological regulators of accessible cholesterol in the plasma membrane could alter cell-intrinsic protection against pore-forming toxins. Accessible cholesterol in plasma membranes is regulated by oxysterols, which are oxidised forms of cholesterol. Using mass spectrometry, we found the oxysterols 27-hydroxycholesterol and 25-hydroxycholesterol in peripheral plasma, uterine fluid, and ovarian follicular fluid. Furthermore, endometrial epithelial cells released additional 25-hydroxycholesterol in response to a pyolysin challenge. Treatment with 27-hydroxycholesterol or 25-hydroxycholesterol protected endometrial epithelial and stromal cells against pore formation and the damage caused by pyolysin. Treatment with 27-hydroxycholesterol also protected endometrial cells against *Staphylococcus aureus*  $\alpha$ -hemolysin. The oxysterols limited pyolysin-induced leakage of potassium and lactate dehydrogenase from cells, reduced cytoskeletal changes, and prevented cytolysis. Oxysterol cytoprotection against pyolysin was partially dependent on acyl-coenzyme A:cholesterol acyltransferase (ACAT) reducing cytolysin-accessible cholesterol in the plasma membrane. In addition, oxysterol cytoprotection was partially dependent on activating liver X receptors, which stimulate cellular cholesterol efflux. Collectively, these findings imply that oxysterols may help defend the endometrium against pathogenic bacteria.

In conclusion, tolerance of damage caused by bacterial infections is important for resilience to pathogens in the endometrium. The mechanisms of tolerance are underexplored but are important for developing new strategies to prevent and treat disease. Our findings imply that reducing accessible cholesterol in the plasma membrane is a cell-intrinsic mechanism of tolerance. These finding could lead to pharmaceuticals to enhance endometrial tolerance to pathogens. *Funding: BBSRC (BB/K006592/1) and NIH (R01HD084316).*









## Transcriptomic analysis of mare endometrium reveals molecular changes in immune response and metabolism at different stages of endometriosis

A. SZÓSTEK-MIODUCHOWSKA<sup>1</sup>, A. WÓJTOWICZ<sup>1</sup>, A. SADOWSKA<sup>1</sup>, B.M. JALALI<sup>1</sup>, M. SŁYSZEWSKA<sup>1</sup>,  
K. LUKASIK<sup>1</sup>, A. GURGUL<sup>2</sup>, T. SZMATOŁA<sup>2</sup>, M. BUGNO-PONIEWIERSKA<sup>3</sup>, G. FERREIRA-DIAS<sup>4,5</sup>,  
D.J. SKARZYNSKI<sup>1</sup>

<sup>1</sup>Department of Reproductive Immunology and Pathology, Institute of Animal Reproduction and Food Research, 10-748 Olsztyn, Poland;

<sup>2</sup>Center for Experimental and Innovative Medicine, University of Agriculture in Cracow, 30-248 Cracow, Poland;

<sup>3</sup>Department of Animal Reproduction, Anatomy and Genomics, University of Agriculture in Cracow, Poland

<sup>4</sup>C.I.I.S.A., Faculty of Veterinary Medicine, University of Lisbon, Lisbon, Portugal;

<sup>5</sup>Associate Laboratory for Animal and Veterinary Sciences (AL4AnimalS), Portugal

Endometriosis is a degenerative chronic condition of the equine uterus, defined as a fibrotic process that develops around the endometrial glands and/or in the stroma. Equine endometriosis leads to changes in the uterine microenvironment and early pregnancy loss. In our study, we aimed to carry out a global analysis of mRNA using high throughput mRNA sequencing of mare endometrium at different stages of endometriosis. Additionally, we investigated the action of the potential regulators of the expression of altered genes in endometrial cells *in vitro*. In Exp. 1., uteri were collected *post-mortem* from cyclic mares at the follicular phases of estrous cycle (n=36) at a local abattoir. The endometrial tissues were divided into four groups (n=9 for each) according to Kenney and Doig's categories: I, II A, II B, III of endometrium classification. Isolated RNA was used for library construction using the TruSeq RNA Sample Prep v2 kit. In Exp. 2., fibroblasts isolated from healthy category I (n=5) and endometriosis category IIB (n=5) endometrium at the follicular phase of the estrous cycle were treated with TGF- $\beta$ 1 (10 ng/ml) or IL-17 (10 ng/ml) for 48h. Then, the transcription of DEG and fibrotic markers were determined using qPCR. In the comparison of the transcriptomes of endometrial tissue in categories IIA vs I, 61 genes were up-regulated and 205 genes down-regulated. In category IIB, in contrast to category I, 677 genes were up-regulated and 547 genes down-regulated. In category III vs category I, 15 genes were up-regulated and 24 genes down-regulated. In category IIA endometrial tissue, the predicted activation of DEGs was annotated to processes, such as inflammatory response, organismal injury and abnormalities, lipid metabolism, small molecule biochemistry, hematological system development and function, and tissue morphology. In category IIB endometrial tissue, the predicted activation of DEGs was annotated to processes, such as organismal injury, and abnormalities, cell-to-cell signaling and interaction, inflammatory response. Transforming growth factor- $\beta$ 1 and IL-17 affect DEG expression on mare endometrium depend on the presence and stage of endometriosis.

Supported by the project no. 2019/35/D/NZ9/02989 (Sonata 15) financed by the National Science Center, Poland.





## The role of interleukin 13 in the development of endometriosis in the mare

A. WÓJTOWICZ<sup>1</sup>, A. SADOWSKA<sup>1</sup>, G. FERREIRA-DIAS<sup>2,3</sup>, A. SZÓSTEK-MIODUCHOWSKA<sup>1</sup>

<sup>1</sup>Institute of Animal Reproduction and Food Research of Polish Academy of Sciences, Olsztyn, Poland;

<sup>2</sup>Faculty of Veterinary Medicine, CIISA – Centre for Interdisciplinary Research in Animal Health, University of Lisbon, Lisbon, Portugal

<sup>3</sup>Associate Laboratory for Animal and Veterinary Sciences (AL4Animals), Portugal

Endometriosis is a chronic condition with developing fibrosis of mare endometrium. As a consequence of endometriosis, embryo implantation failure results in economic losses in the horse-breeding industry. The pathogenesis of endometriosis remains not completely understood. Interleukin (IL)-13, which is secreted by activated T helper 2 lymphocytes, regulates both physiological and pathological processes. Studies focused on fibrosis in different species and tissues indicated a meaningful role of IL-13 in the development of organ fibrosis. However, the role of IL-13 in the pathogenesis of endometriosis remains unknown. Thus, we aimed at the evaluation of the role of IL-13 on processes associated with the development of endometriosis. For this purpose, we localized IL-13 and its receptor (IL-13R) in mare endometrium (n=3 at each stage of endometriosis) using IF-P. We further cultured mare endometrial fibroblasts (n=5, category I endometrium) in 2D (48h and 96h) and 3D (48h and 144h) *in vitro* culture systems without or with IL-13 (10 ng/mL). The effect of IL-13 on fibroblast proliferation was assessed using an MTT-based assay. The action of IL-13 on gene expression of fibrosis markers, such as *collagen (Col)1A1*, *Col3A1*, *α-smooth muscle actin (SMA)*, *metalloproteinase 2 (Mmp2)*, *Mmp9*, *tissue inhibitor of metalloproteinase 1 (Timp1)* and *Timp2* was determined using qPCR. The presence of IL-13 and IL-13R was determined in epithelial, stromal, and glandular cells of mare endometrium. Interleukin 13 increased (p<0.01) mare endometrial fibroblast proliferation. Treatment with IL-13 affected (p<0.05) *α-SMA*, *Col1a1*, *Col3a1*, *Mmp2*, *Mmp9*, *Timp1* and *Timp2* gene expression. Moreover, IL-13 treatment decreased the endometrial ratio of *Mmp2* to *Timp1* and *Mmp9* to *Timp1* gene expression. Obtained results strongly suggest the role of IL-13 in the processes associated with the initiation and development of endometriosis. The profibrotic effect of IL-13 may depend on the regulation of the expression of extracellular matrix proteins and enzymes involved in endometriosis development.

Supported by the project nr 2019/35/D/NZ9/02989 financed by the National Science Centre, Poland











































**INVITED LECTURE****Carryover effect of uterine diseases on subsequent pregnancy losses in lactation**R. L. DE LA SOTA<sup>1,2,\*</sup>, S. CORVA<sup>3</sup>, G. DOMINGUEZ<sup>4</sup>, J. SANCHEZ<sup>5</sup><sup>1</sup>*Instituto de Investigaciones en Reproducción Animal (INIRA), Facultad de Ciencias Veterinarias, Universidad Nacional de La Plata (FCV-UNLP);*<sup>2</sup>*CONICET, Godoy Cruz 2290, CABA*<sup>3</sup>*Curso de Bioestadística y Epidemiología, FCV-UNLP, La Plata Argentina;*<sup>4</sup>*Private Practice, Venado Tuerto, Santa Fe, Argentina;*<sup>5</sup>*Department of Health Management, Atlantic Veterinary College, University of Prince Edward Island, Canada.*

\*E-mail: dairydoc82@gmail.com

The objective of this study was to assess of pregnancy losses (PL) up to 210 days of gestation due to uterine diseases in grazing dairy cows. A retrospective study including a total of 24,232 records of first, second and third plus pregnancies (PREG) within the same lactation from cows of 1, 2 or 3 plus lactations (LACT) calving from January 1st, 2010, to December 31st, 2018, was used. All cows had retained fetal membranes (RFM) were diagnosed by trained farm personnel. Puerperal metritis (PM) was diagnosed every week, and clinical endometritis (CE) and pyometra (PYO) diagnosed every other week by the veterinarian. Pregnancy diagnosis (PD) was performed by veterinarian every two-weeks between 30-44 days post-AI. Pregnancies were recorded as single or double during each diagnosis (TWIN). Pregnancy loss (PL) after confirmation of pregnancy (n=6,600) were classified as 1) cows that had a dead embryo at PD with ultrasonography 30-44 days after, 2) cows that were diagnosed not pregnant at the PD reconfirmation between 60 and 90 days post-AI, 3) cows that returned to estrus and were diagnosed not pregnant at the next examination after detected in heat, and 4) cows that were diagnosed pregnant and returned to estrus 30 days after PD and were inseminated. The risk of PL was analyzed by logistic regression using two models. The first model included the effects of lactation number (LACN), season of the year that became pregnant (SEAP), number of services became pregnant (NSP), and health status (HEALTH; healthy [no diseases], uterine [RFM, PM, CE, PYO], no uterine [anestrus, mastitis, lameness], and both [uterine + non uterine]). The second model included the effects of LACN, SEAP, NSP, RFM, PM, CE, PYO, and TWIN. Statistical significance was set at P<0.05.

The occurrence of PL was 27.5%. Healthy cows had lower PL than cows with uterine, non-uterine and both diseases (24.8 vs. 29.0, 26.1 and 28.1%; P<0.001). The odd of losing pregnancy was higher in cows with uterine diseases compared to healthy cows (odd ratio [OR] 1.3, 95% confidence interval [95%CI] 1.18-1.42; P<0.001). Cows with 2+ lactations, cows that became pregnant in summer, and cows that had more services to become pregnant had higher PL (P<0.001). The occurrence of uterine diseases and PL and the OR of PL are shown in Table 1.

Table 1. Occurrence of uterine diseases and pregnancy losses in pregnant cows and the odds of losing pregnancy.

	RFM	PM	CE	PYO	TWIN
Occurrence (%)	4.0	9.3	17.9	3.9	2.6
PL (%)					
0	27.3	27.2	26.4	26.9	27.3
1	32.7	30.4	32.4	42.0	33.1
OR (95%CI)					
0	1	1	1	1	1
1	1.14 (0.99-1.31)	1.11 (1.01-1.23)	1.30 (1.21-1.40)	1.83 (1.60-2.09)	1.17 (0.98-1.38)
P	0.06	0.03	<0.01	<0.01	0.07

Reference: no disease (RFM, PM, CE, PYO), single pregnancy (TWIN).



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**INVITED LECTURE****Research in bovine endometritis – are we asking the best questions?**

M. DRILLICH, K. WAGENER

*Clinical Unit for Herd Health Management in Ruminants, University of Veterinary Medicine, Vienna, Austria*

Several research groups worldwide have investigated bovine endometritis since decades. A simple and rough literature search using PubMed (<https://pubmed.gov>) and the search terms “(endometritis OR uterine infection) AND (cow OR cattle)” resulted in 1435 publications in the last 60 years. Interestingly, the number of publications in the last 20 years (2002-2021; n=1078) has increased significantly compared to the previous 40 years (1962-2001: n=492). This can be partly explained by a general increase in publication activity or more extensive electronic filing of publications in databases. Furthermore, we did not check the references found for their eligibility, since the intention of the literature search was not to carry out a literature review; it was only intended to illustrate the research activities in this area. There is no doubt that our knowledge of uterine diseases in cattle has increased enormously. This applies to everything from the underlying mechanisms of infection, inflammation and immune response, to the wide diversity of the uterine microbiota, and to strategies for the prevention and treatment of endometritis. We as a scientific community have identified risk factors at both individual and herd levels and gained insight into genetic predispositions for endometritis. Finally, we are aware of the later negative effects on reproduction and the economic impact on the profitability of farms. As a research and scientific community, we have asked many GOOD and important questions, tested countless hypotheses and entered previously unimagined spheres. We know a lot - but has this changed the situation on the farms? The prevalence of endometritis is still high at up to 40% and more and the affected cows still have a decreased chance to get pregnant in time. Some treatment approaches are less common than they used to be, e.g., the intrauterine application of disinfectants, and others, e.g., antimicrobial or hormone-based strategies, have been refined or modified. New approaches, e.g. vaccination against endometritis or intrauterine infusion of dextrose have been proposed. However, the variety of treatment options also suggests that no strategy can be considered successful enough to cover the majority of cases. So the authors of this presentation ask themselves: are we asking the BEST questions? What kind of research is needed and what methods are appropriate and available today that could significantly improve uterine health?

Endometritis is a complex disease with multiple risk factors and a variety of bacteria involved. For the authors, one of the central questions for the development of new prevention and treatment strategies is how to keep the microbiome in a physiological state and, thus, avoid pathologies. In the past, the most common and pathogenic bacteria have been studied in detail and intriguing mechanisms have been described. Current research aims to understand the interactions within the microbial community, and future research will likely analyze the interactions and dynamics of the entire microbiome from parturition to conception. Considering the enormous amount of different bacteria in the uterus and others entering from the environment as well as the huge amount of generated data, this will not be possible without e.g. the support of specialists, not only in microbiology but also in e.g. bioinformatics. In addition, the composition of the microbiome is influenced by internal factors such as the immune response, which in turn is related to energy balance or other nutritional factors, and by external factors such as hygiene. These and other factors at herd level, e.g. housing density or barn climate, should be taken into account if an overall picture of the dynamics of the microbial composition is to be drawn and the turning point from physiological to pathological conditions is to be found. Data scientists and modeling capacities are required for these complex analyzes and the development of prediction models. Based on all of the abovementioned analyses, different approaches to modulating the microbiome can then be tested and brought into practice. This is just one of several considerations in which direction future research might go. Other approaches, which are already being conducted, are based, for example, on a better understanding of the uterine defense mechanisms with the long-term goal of being able to influence it positively.

The authors of this presentation do not have the BEST questions and certainly, we do not have the best answers, but we hope to stimulate a fruitful discussion on future research strategies.

































## **INVITED LECTURE**

### **Diagnosis and treatment of retained placenta in cattle**

G. OPSOMER

*Dept of Internal Medicine, Reproduction and Population Medicine, Faculty of Veterinary Medicine, Ghent University, Belgium*

#### **Introduction**

Retention of fetal membranes, defined as the fetal placenta not being expelled within 12 to 24h after parturition, lowers productivity and fertility resulting in significant economic losses for the modern dairy industry. Although this health problem is in itself not extremely dangerous nor life threatening for the individual patient, it brings a lot of stress for many modern dairy farmers since it often presents like a start of an avalanche of concomitant transition diseases like metritis, displacement of the abomasum, ketosis, clinical and subclinical endometritis and finally repeat breeding. Therefore, this in se rather harmless but very annoying problem requires special attention and an efficient preventive and therapeutic approach in order to minimize concomitant economic losses. In the present manuscript, we will focus on the diagnosis and treatment of this all too common reproductive disorder.

#### **Definition**

Retained placenta (RP) occurs when the fetal membranes after birth are retained for a longer period than physiologically normal in the uterus of the early postpartum cow. Loss of the placenta in the cow occurs during the third stage of parturition and the process of separation has been stated to take less than six hours. The definition of RP varies widely in the literature ranging from retention of the placenta for 6 to 71 hours postpartum (Van Werven et al., 1992). The most commonly used definition is the retention of fetal membranes for 12 to 24 hours or more post partum, although according to some authors, retention for more than 6 hours would probably be a better definition particularly in older cows (Van Werven et al., 1992). The cow and the water buffalo are reported as the only domestic ruminants in which retained placenta is a relatively often reported abnormality accompanied with a variety of secondary problems finally leading to important economic losses (Laven and Peters, 1996). It affects other ruminants like sheep and goats less frequently with little evidence of associated problems in these species.

In some papers, authors differentiate between primary retention of fetal membranes and secondary retention. With primary retention they refer to a real problem of cotyledon dehiscence from the caruncular crypts, while a secondary retention refers to the fact that the detachment has been successfully completed but the placenta has not been expelled out of the genital tract and remains in the uterine cavity although she is completely loose there. Mostly cited reason for this so called secondary retention, is hypocalcemia or any other reason causing inertia of the uterine musculature.

The average annual incidence of RP in cattle varies from 3 to 10-12%, and is known to be highly variable between farms and can reach even up to 30%. Gohary and LeBlanc (2018) estimated the economic cost of a RP case to be 297\$, due to production losses, treatment costs, reproductive disorders and increased culling.

#### **Diagnosis of retained placenta in cattle**

Based on the definition, the diagnosis of RP in cattle is in principle very easy to make and is indeed most often made by the farmer: when he/she has not found any placenta for 24h or longer after parturition, the cow will be indicated as suffering from RP. In many of these cases, the cow presents herself with a large part of the placenta hanging out of her vulva facilitating the diagnosis.

In practice however especially in circumstances where fresh cows are loosely housed in a maternity pen (in straw for example), cows are free to move and may eat their placenta in an instinctive attempt not to attract potential predators. Eventually, other animals like dogs or cats may 'steal' the placenta to eat it. Anecdotal stories are available of fresh cows laying down in tie stalls with extreme lacerations at the vulva caused by a dog that started to eat the (retained) placenta and ended eating a large part of the vulva. So, in cases where cows are free to move and no placenta was found, it is advisable to perform a vaginal examination to double check whether the placenta is retained or not. In most cases, parts of the placenta can be felt in the vagina, cervix or somewhat deeper in the uterus and the diagnosis will be readily made.

Following caesarean section, it can also be harder to diagnose RP. During surgery, large parts of the placenta are cut so that only remnants are left in the uterine cavity. In most cases, the rest of the placenta will be shed the day following the surgery, but in some cases at least some remnants may remain. Especially when only a relatively small part of the placenta has been left in the uterus, this remnant part can be retained quite firmly and deep in the uterine cavity, not being reachable via vaginal exploration. The latter may make the diagnosis very difficult or even impossible. This specific case is however very uncommon in dairy cows, since in dairy cows caesarean sections are very seldom and membranes will be expelled in a whole, not leaving little pieces behind deep in the uterine cavity.

As mentioned higher, RP is in many cases accompanied by one or even multiple other well-known transition diseases. Therefore, veterinarians who are confronted with a cow suspected from or indeed suffering from RP, should not neglect to perform a thorough clinical examination to detect any accompanying disorder. Besides the general clinical examination (respiratory rate, pulse, temperature, hydration status, lymph nodes, mucosae), one should not forget to control for ketosis (for example using cow-side ketosticks) and to exclude a potential displacement of the abomasum.

### **Treatment of retained placenta**

Although RP is frequently occurring in modern bovine husbandry, and although the diagnosis is pretty simple, there is a continuing debate about the most efficient treatment strategy for cows affected by this problem.

Although a plethora of studies have been performed to study the results of different treatments, there are multiple reasons why it is very difficult to come forward with generally accepted conclusions and evidence with regard to an efficient RP treatment. One of them is the question: which parameter should be used to evaluate the result of the treatment? Should one focus on the general condition of the cows, like the number of cows with fever; critically evaluate the dry matter intake or milk yield of the cows, or should one focus on the number of cows suffering from metritis, clinical or subclinical endometritis following treatment. After all, in terms of fertility, the most crucial evaluation of the end result of the treatment, should be an in-depth evaluation of the key performance indicators for reproductive performance, like the pregnancy rate after first and eventual following inseminations, the number of inseminations per pregnancy and the number of cows culled for reproductive failure among others.

An other reason hampering the scientifically sound interpretation of field studies regarding RP treatment, is the difficulty to include a control group. It is obvious that studies only make sense when control groups that did not receive any or a placebo treatment are included. The latter is a real challenge when performing field studies about RP treatment. Is it for example acceptable from an ethical/animal welfare point of view to not treat an RP cow, or to treat it with a placebo? Furthermore, the farmers who are participating in such field trials might be really challenged to treat the cows belonging to the control group behind the back of the researcher. Taking these specific challenges into account, we herewith try to give some general conclusions of the studies performed.

#### **Curative treatments**

##### **Manual removal**

In the very past, at least in Belgium, a lot of large animal practitioners daily treated multiple RP cows by manually removing the remaining membranes. In most cases, veterinarians cleaned and disinfected the perineal area to subsequently enter the genital tract to one after the other manually unpeel each individual placentome. Still, in many countries manual removal is a common procedure in modern cattle practice, mainly for the two logical benefits for the farmer: first it may improve parlour hygiene (eventually necessary for the sale of milk for human consumption in several countries), and secondly, the removal of the source of a disagreeable odour. Those are probably the reasons why in many countries, practitioners still undertake attempts to manually remove the placenta even in cases where this requires rather strong unpeeling activities at the individual placentomes.

Multiple studies have however shown that by trying to unpeel the individual cotyledons from the caruncles, in most cases microtraumata do appear. These microlesions are an easy entry port for bacteria to enter into the peripheral circulation, in many cases presenting an important reason for a higher risk to suffer from a far more severe clinical course of the problem. Therefore, most recent studies discourage to unpeel the placentomes.

There is however 1 exception to this generally accepted rule and that is the treatment of the so called 'secondary retention of the membranes'. As mentioned earlier, this type of placental retention is based on uterine inertia and the subsequent disability of the uterus to expel the placenta. In these cases, the placenta can easily be removed by causing minimal traction and without any unpeeling activity of the placentomes.

So, basically, in case one is confronted with a case of placental retention, we advise to thoroughly clean and disinfect the perineal area of the cow, in order to perform a manual exploration of the vagina and to grasp the placenta. Slight pulling should be applied in an attempt to remove the placenta. In case obvious progression in removing the placenta is easily noticeable, a sustained slight pull should be applied till the whole placenta can be removed out of the genital tract of the cow. In most cases however, immediate resistance is noticeable when pulling the placenta. The latter indicates that the dehiscence of the cotyledons out of the caruncular crypts did not occur (=primary or truly retained placenta). In these case, further attempts to manually remove to the placenta should be immediately stopped to avoid microlesions in the endometrium. The protruding parts of the placenta should be cut off and the back of the cow should be cleaned again.

#### Antibacterial therapy

Both acute and chronic uterine disease post partum are well known sequelae of RP. Therefore, antibacterial therapy has been commonly used in an attempt to prevent the development of this infectious postpartum uterine disease complex and its subsequent negative effect on fertility.

Antibacterial drugs have most commonly been administered via the uterus. However, when they are applied via this route, they are patently unsuccessful in preventing metritis, even when given repeatedly. Their main effect is a reduction of putrefaction, which decreases the bad odour but may prolong the retention. The effect of this kind of treatment on subsequent reproductive performance is inconclusive. While some trials did show a benefit, many others did not and some even showed a negative effect.

When applying antibacterial drugs into the uterus, one should not forget the very specific environment in which they deposit the drug. The intra-uterine environment early after calving is known to be anaerobic, to contain a lot of debris and lochia which on their turn may contain specific enzymes like penicillinases. Tetracyclines have been named to well maintain their antibacterial activity in this specific environment. Recent data however mention the increasing incidence of resistance against tetracyclines. Furthermore, we are not aware of any well carried out field study that showed that RP cows intra-uterinely treated with tetracyclines outperformed the control cows in terms of fertility parameters.

Besides applying intra-uterine antibacterial therapy, also general antibacterial therapy by injecting the cows parenterally has been studied in multiple field studies done over different continents in the world. In many countries, injecting the cows with penicillin when treating them intra-uterinely with antibiotics, has been applied for long time. The latter was done as a rather preventive therapy to avoid that cows which had not expelled the placenta, should not suffer from febrile metritis and accompanying other diseases.

The choice of antibiotic to be used has been proposed to depend on the concentrations of derivatives of the product that are reached in uterine tissues and lochial fluids and on the MIC values of these antibacterial products against the most common bacteria known to cause uterine infections, such as *Escherichia coli* and *Fusobacterium necrophorum* (Okker et al., 2002). In 2006, a large field trial was published by Drillich et al. in which common therapies like manual removal (MR), local antibacterial therapy (AP) and the combination of both (PR) were tested against a reference group (REF). In all groups, cows were injected parenterally with ceftiofur during 3 to 5 days when their body temperature raised above 39,5°C during the first 10 days after calving. In case of continued fever after 5 treatments, cows received a different antibiotic as an escape therapy. Of all animals, 79.8% had a body temperature of  $\geq 39.5^\circ\text{C}$  at least once within 10 d postpartum and were treated with ceftiofur. Occurrence of fever within 10 d postpartum was significantly lower in groups AP and PR compared with REF, but was not different between groups MR and REF. Risk of receiving an escape therapy in case of fever after 5 treatments with ceftiofur, did not differ among groups. Reproductive performance measures did not differ significantly between group REF and any of the comparison groups. Compared with a treatment protocol based only on systemic treatment with antibiotics for cows with a fever, neither intrauterine antibiotics nor manual removal of fetal membranes alone or in combination with local antibacterial therapy reduced proportions of cows needing an escape therapy nor did those treatments improve reproductive measures in the current lactation. Systemic treatment alone based on elevated rectal temperature was effective and reduced the use of antibiotics compared with therapies that included intrauterine antibiotics. In some European countries however, the use of ceftiofur in livestock has been seriously discouraged in an attempt to reduce the incidence of resistance against antibacterial drugs.

Cows that have suffered from RP regardless of an eventual treatment, should be subjected to an in depth clinical examination before breeding, preferably around day 35 after calving. Aim to perform this examination is to identify cows eventually suffering from any sequential uterine disease like (sub)clinical endometritis and pyometra. Since the uterine infection caused by RP presents a significant risk for any of these diseases, close

attention including an appropriate therapy should be applied to these cows in an attempt to safeguard their reproductive performance.

### **Other curative treatments**

There is a plethora of studies done to examine the effect of other than antibacterial curative treatments, like for example the use of ecbolic drugs (PGF<sub>2α</sub> and its analogues, ergot derivatives, oxytocin and β<sub>2</sub>-adrenoceptor antagonists). The rationale for their use is that they stimulate uterine contractions and thus physically aid the expulsion of the membranes. The consensus of opinion papers appears however to be that the response to ecbolic drugs is unpredictable and poor.

Besides the use of ecbolic drugs, also the use of local enzyme therapy (collagenase and hyaluronidase) has been tested. Aim of these therapies was to stimulate the detachment of the cotyledons to facilitate sequential manual removal. It was found that hyaluronidase had no effect but that collagenase did facilitate placental separation. So, the conclusion was that this local treatment (infusion into one or both umbilical arteries) is promising although time consuming, cumbersome and probably too expensive.

Much work remains to be done on the use of these drugs, particularly in the light of greater knowledge of placental separation.

### **Preventive treatment**

For multiple reasons, it is far better to prevent than to treat diseases. This is for sure the case for the RP disease complex in dairy cows. When searching for preventive strategies against a certain disease, one should know the typical risk factors of that disease. Major risk factors for RP are: dystocia, twinning and abortion. For secondary RP, the most well known risk factor is (subclinical) hypocalcemia.

Main preventive measures against dystocia, consist of a good young stock rearing leading to well grown heifers ready to be inseminated at an age of 13 to 15 months, in combination with a well-considered bull choice to inseminate each individual cow and heifer. Especially in heifers, the use of bulls known to procreate small calves is in this context very important. Here, we also refer to the study of Potter et al (2010), which concluded that the use of sexed semen to increase the number of (smaller) female calves has the greatest potential to reduce the incidence of clinical endometritis.

To minimize the number of abortions, protocols should be applied at herd level to eradicate infectious diseases like BVD, IBR and especially Neosporosis. In many European countries, mandatory 'official' programs to eradicate the circulation of viruses like BVDv and IBR have successfully been implemented. Neosporosis however remains a problem and this protozoan is at the moment the most often diagnosed cause of bovine abortion in multiple countries. On many dairy herds, more attention should therefore be paid to minimize abortions related to Neosporosis, based on avoiding infections brought in by a dog and minimizing vertical spread (=mother to daughter) of the infection by refusing daughters from seropositive mothers.

On many present-day dairy herds, the most important risk factor for RP is twinning. Within the Holstein breed, parallel with the increase in milk yield, the number of twins has dramatically increased, raising in some herds above 15%. The birth of a twin is in most cases followed by the retention of at least one placenta. Since this twinning phenomenon seems to be associated with the increase in milk yield, it might continue to increase while further increasing milk yield. Multiple studies have been performed to study how to tackle this problem, but none have come up with a real solution applicable in the field. Hopefully, genomic testing may help in the future to reduce the number of twin births on our dairy herds.

In order to prevent secondary RP, attention should be paid to optimize peripheral Ca-levels in the peripartum cows. The latter should be based on focusing on dietary measures during the dry period. Well accepted strategies in this context are: optimizing DCAD (dietary cation anion difference), avoiding over-conditioning, and low Ca and high Mg supplementations. Furthermore, supplementation of Vit E and Selenium (to support overall immune competence) and Vit A (to support local immune response at the endometrium), have been advocated to prevent RP or to minimize its sequential diseases.

### **Conclusion**

The seemingly simple diagnosis of 'retained placenta' hides a condition of great complexity. A large number of causal factors has been related to an increased incidence of the condition, but little is known about how the majority of these factors induce placental retention. Hence, the full pathogenesis for this disease still needs complete elucidation which impedes the search for an effective treatment. Since the most important

















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