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5
6 **Lethal infection by Herpes simplex virus 1 (HSV-1) in a captive**
7 **Azara's Owl Monkey (*Aotus azarae*) in Paraguay**

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9 *Infecção letal por Herpes simplex virus 1 (HSV-1) em Marikiná de Azara (*Aotus azarae*)*
10 *cautivo en Paraguay*

11
12 *Infecção letal pelo vírus Herpes simplex 1 (HSV-1) em Marikiná de Azara (*Aotus azarae*)*
13 *em cativeiro no Paraguai*

14
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28

29 **Abstract**

30 **Anamnesis:** A 2-year-old male *Aotus azarae* was brought to the wild animal clinic. The animal
31 weighed 975 grams and was in poor body condition. The individual was kept in close contact
32 with the caretakers, and it was fed to a large extent by the people in the household, sharing their
33 meals. As reported by the caretaker, the animal was asthenic and anorexic since approximately
34 2 days ago. **Clinical and laboratory findings:** On clinical inspection, the animal was
35 weakened, with pale oral mucosa and hyperemic pharynx, and a rectal temperature of 34.2°C.
36 Dry crusts were observed in the perinasal region, and a slight dyspnea was perceived. The
37 patient died during the inspection. The hemogram was suggestive of normocytic normochromic
38 anemia, leukopenia, hypoproteinemia, and thrombocytopenia. The observed result of molecular
39 analysis was detectable for HSV-1. **Conclusion:** Data obtained through anamnesis and clinical
40 history, as well as hematologic findings and the PCR results, confirmed the diagnosis of HSV-
41 1 infection. To the authors best knowledge, this is the first report of the disease in a non-human
42 primate in Paraguay.

43 **Keywords:** *Anthropozoonosis; Aotus azarae; cross-transmission; Herpes simplex virus;*
44 *Herpesvirus; HSV-1; New World primate; Owl monkey; PCR; Platyrrhini.*

45

46 **Resumen**

47 **Anamnesis:** Un *Aotus azarae* macho de 2 años fue llevado al Consultorio de Animales
48 Silvestres. El animal pesaba 975 gramos y presentaba baja condición corporal. El individuo se
49 mantenía en estrecho contacto con los cuidadores y era alimentado en gran medida por las
50 personas de la casa, compartiendo sus comidas. Según informó el cuidador, el animal estaba
51 asténico y anoréxico desde hacía aproximadamente 2 días. **Hallazgos clínicos y de**
52 **laboratorio:** En la inspección clínica, el animal estaba debilitado, con la mucosa oral pálida y
53 la faringe hiperémica, y la temperatura rectal de 34,2°C. Se observaron costras secas en la región
54 perinasal y se percibió una ligera disnea. El paciente falleció durante la inspección. El
55 hemograma fue sugestivo de anemia normocítica normocrómica, leucopenia, hipoproteinemia
56 y trombocitopenia. El resultado observado al análisis molecular fue detectable para VHS-1.
57 **Conclusiones:** Los datos obtenidos a través de la anamnesis y la historia clínica, así como los

58 hallazgos hematológicos y los resultados de la PCR confirmaron el diagnóstico de infección
59 por VHS-1. Según el entender de los autores, este es el primer reporte de la enfermedad en un
60 primate no humano en Paraguay.

61 **Palabras clave:** *Antropozoonosis; Aotus azarae; Herpesvirus; Herpes simplex virus; HSV-1;*
62 *Mono búho; PCR; Platirrino; primate del Nuevo Mundo; transmisión cruzada.*

63

64 **Resumo**

65 **Anamnese:** Um *Aotus azarae* macho de 2 anos de idade foi trazido para a clínica de animais
66 selvagens. O animal pesava 975 gramas e estava em baixa condição corporal. O indivíduo
67 estava em contato próximo com os cuidadores e era principalmente alimentado pelas pessoas
68 da casa, compartilhando suas refeições. De acordo com o cuidador, o animal estava astênico e
69 anorético há aproximadamente dois dias. **Achados clínicos e laboratoriais:** Na inspeção
70 clínica, o animal estava debilitado, com mucosa oral pálida e faringe hiperêmica, e temperatura
71 retal de 34,2°C. Crostas secas foram observadas na região perinasal e uma leve dispneia foi
72 percebida. O paciente morreu durante a inspeção. O hemograma foi sugestivo de anemia
73 normocítica normocrômica, leucopenia, hipoproteinemia e trombocitopenia. O resultado
74 observado na análise molecular foi detectável para HSV-1. **Conclusões:** Os dados obtidos na
75 anamnese e na história clínica, bem como os achados hematológicos e os resultados da PCR
76 confirmaram o diagnóstico de infecção pelo HSV-1. Para o conhecimento dos autores, este é o
77 primeiro relato da doença em um primata não humano no Paraguai.

78 **Palavras-chave:** *Antropozoonose; Aotus azarae; Herpesvírus; HSV-1; Macaco coruja; PCR;*
79 *Platirrino; Primata do Novo Mundo; transmissão cruzada; Vírus herpes simplex.*

80

81 **Introduction**

82 Herpesviruses are enveloped DNA viruses with complex genomes that infect a wide variety of
83 vertebrate species, with many primates and humans being natural hosts (Ludlage and
84 Mansfield, 2003; Casagrande, 2014). Formerly classified within the family Herpesviridae, now
85 in three families within the Order Herpesvirales: the family Herpesviridae, which retains all
86 mammalian, avian and reptile herpesviruses; the new family Alloherpesviridae, comprising fish
87 and frog viruses; and the new family Malacoherpesviridae, containing the viruses of bivalves.
88 The family Herpesviridae is again divided into three subfamilies, among which are the 39-
89 known species of human and non-human primate Herpesviruses (Casagrande, 2014).

90 The genus *Simplexvirus*, of the subfamily Alphaherpesvirinae, contains five species of New
91 World Primate herpesviruses (NWP), as well as two species of human herpesviruses: *Herpes*

92 *simplex virus 1* (HSV-1) and *Herpes simplex virus 2* (HSV-2). Many human and non-human
93 primates carry their own species of Herpesviruses of this genus, which normally do not cause
94 clinical disease in the immunocompetent natural host (Casagrande, 2014). Humans are the only
95 primate species infected by two distinct herpes simplex viruses: HSV-1 and HSV-2 (Wertheim
96 *et al.*, 2014). Herpesviruses have been infecting and co-diverging with their vertebrate hosts for
97 hundreds of millions of years (Wertheim *et al.*, 2014), however, when these viruses infect
98 different primate species, they can cause significant and often fatal clinical disease (Casagrande,
99 2014).

100 Unlike Old World Primates (OWP), which have a generally self-limiting infection, like
101 infection in humans, NWP are more susceptible to HSV-1 infection, usually developing a
102 generalized and fatal disease, characterized by anorexia, dermatitis, pruritus, depression, and
103 ulcerative lesions in the oral cavity and gastrointestinal tract (Casagrande, 2014; Fortman *et al.*,
104 2018). The disease produced by these viruses has already been described in captive NWP of
105 the genus *Cebus* (Zinsser, 1929; Souvignet, 2019), *Aotus* (Katzin, 1967; Barahona *et al.*, 1976;
106 Meignier *et al.*, 1990; Gozalo *et al.*, 2008; Kreutzer *et al.*, 2011), *Callithrix* (Huemer *et al.*,
107 2002; Mätz-Rensing *et al.*, 2003; Hatt *et al.*, 2004; Casagrande, 2007; Sekulin *et al.*, 2010;
108 Imura *et al.*, 2014; Araújo *et al.*, 2016), and *Pithecia* (Schrenzel *et al.*, 2003; Lapid and Eshar,
109 2017). Primates of the genus *Aotus* are known for their high susceptibility to HSV infection, in
110 whom the virus apparently has a predilection for the cerebral cortex, causing encephalitis (Calle
111 and Joslin, 2015), which is why they are also used as a model for the study of the pathogen
112 (Katzin *et al.*, 1967; Todo *et al.*, 2000; Roth *et al.*, 2014).

113 Because of the frequent but unapparent spread of herpesviruses, careful handling of the animals
114 should be recommended, and certain hygienic restrictions should be applied for the sake of both
115 owners and pet monkeys, whereas standard veterinary practice is to consider whether diseases
116 of primates that have been in close contact with humans may have been caused by human
117 viruses (Huemer *et al.*, 2002). In addition to considering the transmission of NWP
118 Herpesviruses, such as CeHV-1, to a human host, where it can develop potentially fatal
119 encephalitis (Casagrande, 2007), the potential link between a wild animal and an acquired
120 infection from a human host should be highlighted, considering that humans in contact with the
121 animal will not necessarily demonstrate signs of disease (Huemer *et al.*, 2002) because
122 herpesviruses do not usually cause serious infections in healthy members of their natural host
123 species, as most of these infections are asymptomatic (Eberle and Jones-Engel, 2017). A
124 distinctive feature of herpesviruses is their ability to establish latent infections that persist
125 throughout the life of the host without clinically apparent signs of infection (Eberle and Jones-

126 Engel, 2017). The objective of the present work is to report a case of lethal infection by *Herpes*
127 *simplex virus 1* (HSV-1) in a captive Azara's owl monkey (*Aotus azarae*) in Paraguay.

128

129 **Patient Examination**

130 *Anamnesis*

131 A 2-year-old male pet *Aotus azarae* was brought to the Wild animal clinic in the Faculty of
132 Veterinary Sciences, National University of Asunción. The animal weighed 975 grams and was
133 in poor body condition. The individual was kept in close contact with the caretakers: either
134 loose inside the house or tied at waist level with a nylon leash and on the caretakers' shoulders;
135 and it was fed to a large extent by the people in the household, sharing their meals, even
136 practicing mouth-to-mouth feeding. As reported by the caretaker, the animal was asthenic and
137 anorexic since approximately 2 days ago.

138

139 *Clinical findings*

140 On clinical inspection, the animal was observed weakened, with pale oral mucosa and
141 hyperemic pharynx, and a rectal temperature of 34.2°C (hypothermia). Dry crusts were
142 observed in the perinasal region, and a slight dyspnea was perceived. The patient was placed in
143 an oxygenation chamber and died after one hour.

144

145 *Diagnostic aids used*

146 Immediately after confirming the death of the animal, 3 ml of blood was extracted by cardiac
147 puncture. Of the blood extracted, 1 ml was placed in a vial with EDTA, for a hemogram, and 2
148 ml in a vial without anticoagulant, for molecular diagnostics, and both were refrigerated at 4°C
149 until processing. The caretaker refused to send the patient's body for routine post-mortem
150 studies.

151 The blood sample for hemogram was processed by the following methods: (a) Counting of
152 figured elements and hemoglobin by manual methods; (b) Differential counting of leukocytes
153 in blood smears with Giemsa staining; (c) Morphological evaluation of blood cells in blood
154 smears with Giemsa staining; (d) Determination of total plasma protein level by refractometry.
155 The results, shown in Table 1, were suggestive of normocytic normochromic anemia,
156 leukopenia, hypoproteinemia, and thrombocytopenia, being indicative of viremia.

157

158

159

160 **Table 1.** Hematological results from a sample taken from an *Aotus azarae* infected by HSV-1.

Analyte (unit)	Results	Reference*
Hematocrit (%)	24.0	34.1 – 53.6
Hemoglobin (g/100 ml)	8.6	12.0 – 19.4
Red blood cells ($10^6/\text{mm}^3$)	3.2	4.56 – 7.06
Mean corpuscular volume (fl)	75	71 – 83
Mean corpuscular hemoglobin (pg)	26	23 – 30
Mean corpuscular hemoglobin concentration (gr/dl)	35	32 – 39
White blood cells ($10^6/\text{mm}^3$)	4300	4900 – 21000
Segmented (μl)	989	910 – 7190
Lymphocytes (μl)	3311	3140 – 10600
Monocytes (μl)	--	0 – 302
Eosinophils (μl)	--	94 – 4062
Basophils (μl)	--	0 – 411
Platelets ($10^3/\mu\text{l}$)	2.0	3.7 – 24.5
Total proteins (g/L)	4.2	6.9 – 8.1

161 *Takeshita *et al.* (2011)

162

163 From the blood sample, RNA extraction was performed with the commercial kit Ribospin vRD
 164 (GeneAll), following the manufacturer's instructions. The primers used for HSV-1 detection:
 165 HSV-1 Forward: 5' GCAGTTTACGTACAACCACATACAGC 3', Reverse: 5'
 166 AGCTTGCGGGCCTCGTT 3' and the probe: CGGCCAACATATCGTTGACATGGC. The
 167 primers used for HSV-2 detection: Forward: 5' TGCAGTTTACGTATAACCACATACAGC
 168 3', Reverse: 5' AGCTTGCGGGCCTCGTT 3' and the probe:
 169 CGCCCCAGCATGTCGTTTACGT. The conditions used in the BioRad CFX96 thermal
 170 cycler were: Activation: 95°C for 2 minutes, then 40 cycles of denaturation: 95°C, for 5 seconds
 171 and, finally, 60°C extension for 20 seconds. The observed result was detectable for HSV-1, and
 172 not detectable for HSV-2.

173

174 Discussion

175 Given that humans and nonhuman primates (NHPs) are genetically and physiologically similar,
 176 it is not surprising that some herpesviruses from NHPs can infect humans, and vice versa.

177 Although most of these cross-species infections are probably abortive (i.e., the virus cannot
178 complete its replicative cycle to produce an active or latent infection or cause clinically apparent
179 disease), some herpesviruses produce severe or lethal infections when transmitted to a non-
180 natural host species (Eberle and Jones-Engel, 2017).

181 The clinical signs reported in captive primates of the genus *Aotus* infected with HSV-1 partially
182 coincide with the case reported in the present work, mentioning severe dyspnea, apathy,
183 hypothermia and lethargy that gradually worsened until the death of the animal in a period of 4
184 to 7 days (Melendez *et al.*, 1969; Kreutzer *et al.*, 2011). Reports also mention lesions in the oral
185 cavity, including vesicles, mucous exudate, necrotic plaques, moderate multifocal gingival
186 defects and ulcers in the oral mucosa and tongue, which may extend into the pharynx,
187 esophagus and trachea (Melendez *et al.*, 1969; Gozalo *et al.*, 2008; Kreutzer *et al.*, 2011). All
188 cases report infection with high case fatality (Melendez *et al.*, 1969; Meignier *et al.*, 1990;
189 Gozalo *et al.*, 2008; Kreutzer *et al.*, 2011).

190 In *Callithrix* spp. another group of NWP, an acute course of infection is also reported, with an
191 evolution between 1 to 8 days (Juan-Sallés *et al.*, 1997; Huemer *et al.*, 2002; Mätz-Rensing *et*
192 *al.*, 2003; Hatt *et al.*, 2004; Casagrande, 2007). Clinical signs are similar, reporting prostration,
193 paresis, hyporexia, hypersalivation, vomiting, diarrhea, aggressiveness, seizures, nystagmus,
194 anisocoria and dyspnea (Huemer *et al.*, 2002; Hatt *et al.*, 2004; Casagrande, 2007; Imura *et al.*,
195 2014). Associated with the neurological signs, most animals present small ulcers covered by
196 crusts on the skin of the face, extensive ulcers covered by whitish fibrinous material on the oral
197 mucosa and tongue, and conjunctivitis may occur (Mätz-Rensing *et al.*, 2003; Hatt *et al.*, 2004;
198 Casagrande, 2007; Sekulin *et al.*, 2010; Araújo *et al.*, 2016). Some animals present neurological
199 alterations without skin and mucosal lesions (Juan-Sallés *et al.*, 1997; Casagrande, 2007; Imura
200 *et al.*, 2014), or do not present clinical manifestations, being found dead (Mätz-Rensing *et al.*,
201 2003; Hatt *et al.*, 2004; Casagrande, 2007). In *Pithecia pithecia*, outbreaks of acute and fatal
202 infection have also been reported, with animals dying between 48 and 96 hours after the onset
203 of signs, being similar to the cases in *Aotus* spp. and *Callithrix* spp. (Schrenzel *et al.*, 2003;
204 Lapid and Eshar, 2017).

205 In terms of diagnostic methods, the use of serological testing for the diagnosis of herpesvirosis
206 should be approached with caution because many primates are asymptomatic carriers of various
207 species of herpesviruses. When histopathological examinations are performed, alterations are
208 non-suppurative meningoencephalitis with necrotizing vasculitis, and the presence of typical
209 intranuclear inclusions, although it does not allow determination of the species of herpesvirus.
210 In contrast, if immunohistochemistry is performed using monoclonal antibodies, it is possible

211 to differentiate several species, although antiHSV-1 and antiHSV-2 antibodies are polyclonal
212 and cross-labeled with each other (Casagrande, 2014).

213 Currently, PCR is the technique of choice for the definitive diagnosis of the herpesvirus species
214 involved in diseases of humans and NHPs, although the use of the technique must be associated
215 with the clinical presentation and lesions of the patient. Swabs of lesions or blood from diseased
216 animals can be used, as well as organs obtained during necropsy (Casagrande, 2007;
217 Casagrande, 2014). The reports by Schrenzel *et al.* (2003), Casagrande (2007), and Sekulin *et*
218 *al.* (2010) present the primers used for the detection of HSV-1 in *Pithecia pithecia* and
219 *Callithrix jacchus* specimens, respectively.

220 Treatment with acyclovir does not prevent death from encephalitis in HSV-1-infected animals,
221 although it remains the antiherpetic drug of choice in humans (Casagrande, 2014; Kukhanova
222 *et al.*, 2014). Other drugs used in humans are valacyclovir and ganciclovir, which could be used
223 in NHPs (Casagrande, 2014). There is a single report of a *Callithrix jacchus* that survived a
224 natural HSV-1 infection, and recovered spontaneously without any treatment (Hatt *et al.*, 2004).
225 It should be noted that HSV-1 infection in NHPs is an anthrozoosis, and the present report
226 coincides with acute spontaneous HSV-1 infections described in fatal cases in *Aotus* spp. and
227 *Callithrix* spp. after contact with a person carrying HSV-1 (Mätz-Rensing *et al.*, 2003), kept as
228 a pet in close contact with the owners (Juan-Sallés *et al.*, 1997; Huemer *et al.*, 2002; Hatt *et al.*,
229 2004; Kreutzer *et al.*, 2011; Imura *et al.*, 2014), or even sharing food with the animal (Araújo
230 *et al.*, 2016). HSV-1 infection in NHPs has already been widely reported in Brazil, being
231 observed in animals from zoos, conservation and breeding centers, research centers, as well as
232 cases reported by veterinarians in pet patients, but mainly in primates of the *Callithrix* genus
233 (Casagrande, 2007). A work conducted in Peru with primates kept in homes reports that 50.4%
234 go for consultation with an infectious disease, and 11.4% go for an infectious and non-infectious
235 disease at the same time (Nolasco, 2017), highlighting the potential impact of household
236 primate ownership on public health.

237

238 **Conclusions**

239 Data obtained through anamnesis and clinical history, as well as observable signs during the
240 physical examination, the hematologic findings, and the PCR results confirmed the diagnosis
241 of HSV-1 infection that caused the death of a captive Azara's owl monkey. To the authors best
242 knowledge, this is the first report of the disease in a non-human primate in Paraguay.

243

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254 *Conflicts of interest*

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257

258 *Author contributions*

259 J. Richard Vetter: study conception, data collection, wrote the paper. Marlene Florentín-Morel:
260 data collection, critical review of the paper. María Graciela Riera-Domínguez: data collection,
261 wrote the paper. Ricardo G. Cañiza: data collection, critical review of the paper.

262

263 *Use of artificial intelligence (AI)*

264 No AI or AI-assisted technologies were used during the preparation of this work.

265

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