

When the groups were well in lay, they were challenged by administering live I.B. virus intranasally to all birds in the experiments. The egg yields were recorded before and after challenge, and it was found that the average egg production for four weeks after challenge was 18 per cent. lower in the unvaccinated birds than in the vaccinated birds in the first experiment, 13 per cent. lower in the second experiment, and 20 per cent. lower in the third experiment.

Figure 5 shows a graph of the egg production before and after challenge in the third experiment.

Egg production at the time of challenge was approximately the same in all groups. From the fifth day after challenge, however, egg production in the unvaccinated control group dropped off and continued at a depressed level for seven weeks, whereas the egg production from both vaccinated groups continued to rise after challenge and peaked at over 80 per cent. three weeks after challenge.

SUMMARY

Infectious bronchitis is a cause of economic loss rather than of visible disease and is widespread throughout England.

Although infectious bronchitis invades both the respiratory and the reproductive tracts of chickens, the major economic loss associated with this infection is the drop in egg production shown by infected hens.

Infection with this virus produces little or no clinical effect and the flock owner is, therefore, often unaware that his flock has become infected until he has analysed the egg production figures for the flock. Before a diagnosis of infectious bronchitis is made, egg production figures, mortality figures and clinical histories should be analysed, to permit differentiation between this infection and Newcastle disease, infectious laryngo tracheitis and avian encephalomyelitis.

Inactivated infectious bronchitis virus vaccine appears to protect susceptible laying stock against the depression in egg production shown by unvaccinated susceptible stock when exposed to infection with the virus.

ERRATUM

An unfortunate type dislocation occurred in the presentation of Dr. R. George Jaap's in the July-September issue of the Journal. From line 12, page 167 and through to the last complete paragraph at bottom of page 169 should have followed the ninth line from the bottom of page 172.

Inconvenience that may have been caused by this misplacement of type is much regretted.