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## CAUSAL AGENTS OF BOVINE THEILERIOSIS IN SOUTHERN AFRICA

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#### SUMMARY

One pathogenic and 4 mild bovine Theileria strains from southern Africa, all transmitted by Rhipicephalus appendiculatus, were compared amongst themselves as well as to bovine and buffalo strains of the T. parva complex from eastern and southern Africa and to bovine strains of T. taurotragi from Tanzania considered to be derived from eland antelope. Criteria used were parasitological, clinical, serological and cross-immunity characters.

The mild strains are similar to bovine T. taurotragi. Serological evidence suggested that T. taurotragi is also infective to sheep. The pathogenic strain belongs to the T. parva complex; the latter consists of a series of types with different behaviour ranging from the lawrencei-type (of buffalo) causing Corridor disease, through the bovis-type causing Rhodesian malignant theileriosis to the parva-type causing classical East Coat fever. Seven cattle-tick passages of a bovis-type strain did not result in transformation into a parva-type.

Four species of bovine Theileriae are now known to occur in southern Africa: T. parva (lawrencei- and bovis-types) and T. taurotragi, both transmitted by R. appendiculatus, and T. mutans and T. velifera both with Amblyomma spp. as vectors.

## INTRODUCTION

In Africa south of the Sahara there has recently been considerable development in our knowledge of the taxonomic relationships of the *Theileria* spp. involved in bovine theileriosis. In the work described here the opportunity has been taken to compare 5 isolates of *Theileria* spp. recently isolated in southern Africa with characterised strains of *Theileria* spp. of buffalo and cattle from South, Central and East Africa.

## MATERIALS AND METHODS

## Theileria strains

Theileria spp. from Zimbabwe. Three mild strains (Lawfield, Chiltington and McIlwaine) isolated by Lawrence and MacKenzie (1980).

Theileria sp. (Tzaneen). Isolated from ticks off the vegetation in farms in the Tzaneen area, northern Transvaal, Republic of South Africa (A. J. de Vos, unpub.)

Theileria sp. (Boleni). Isolated from a bovine animal on the Boleni farm in Zimbabwe where there had been a severe outbreak of theileriosis (Lawrence and MacKenzie, 1980).

These strains were compared to:

T. taurotragi. Two strains (Idobogo and Mwanza) isolated from cattle in Tanzania (Uilenberg, Schreuder, Mpangala and Tondeur, 1977).

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T. parva. Six strains isolated from classical East Coast fever (ECF) in cattle: the Muguga strain from Kenya (Brocklesby, Barnett and Scott, 1961), the Kiambu 5 strain from Kenya isolated by Irvin, Purnell, Brown, Cunningham, Leger and Payne, (1974), the Pugu 1 and Pugu 3 strains isolated during field trials in Tanzania (Uilenberg, Schreuder, Mpangala, Silayo, Tondeur, Tatchell and Sanga, 1978), the Schoonspruit strain from South Africa (isolated in 1936 and maintained since then by over 100 cattle-tick passages at Onderstepoort) and a strain which we designate as Uganda 1 isolated in north-western Uganda in 1976 by L. Siefert (unpub.).<sup>5</sup>

T. bovis (Nyakizu) from Rwanda isolated from a case of bovine theileriosis by R. W. Paling.

T. lawrencei isolated from buffaloes in Tanzania: the Manyara strain (Schreuder, Uilenberg and Tondeur, 1977) which causes classical Corridor disease and the Serengeti "transformed" strain which has been adapted to cattle in the laboratory (Purnell, Young, Brown, Burridge and Payne, 1974).

All strains arrived in Utrecht in infected *R. appendiculatus*. Cattle were infected either by subcutaneous injection of sporozoite stabilates from ground-up ticks preserved in liquid nitrogen (Cunningham, Brown, Burridge and Purnell, 1973) or by feeding infected *R. appendiculatus* on the ears in cloth bags. In all cases nymphal ticks were used to acquire the infection resulting in infective adults.

Strains were compared on parasitological, clinical and serological behaviour. They were also tested in cross-immunity experiments in calves spontaneously recovered or immunised by an infection and treatment method using oxytetracycline (Radley, Brown, Burridge, Cunningham, Kirimi, Purnell and Young, 1975) or halofuginone (Schein and Voigt, 1979; Uilenberg, Jongejan and Perié, 1980). The minimum interval between initial infection and challenge was a month.

## Ticks

*Rhipicephalus appendiculatus.* Six strains from Tanzania, Kenya, Zimbabwe, South Africa and Rwanda. One of these was the Kenyan Burguret strain (Lourens, 1979) of which males have abnormally shaped adanal shields and which appears to be of low vitality; this is possibly due to a mutation.

All tick strains at Utrecht were maintained by feeding on the ears of cattle and rabbits. Oviposition, hatching and moulting were carried out at  $27^{\circ}$ C and  $90^{\circ}_{\circ}$  relative humidity (rh), quiescent stages being kept at  $20^{\circ}$ C and  $90^{\circ}_{\circ}$  rh.

## **Experimental ruminants**

Friesian calves weighing 100 to 200 kg were obtained at markets in the central Netherlands. Some were splenectomised prior to the experiments and corticosteriods were administered to suppress immunity. A sheep of the Texel breed bought at Utrecht was also used; it was splenectomised.

The animals on experiment were monitored by taking the rectal temperature daily and by examining blood smears and lymph node biopsy smears, first of the regional parotid node draining the site of infection once it started to enlarge; then when schizonts were found of both parotid and prescapular nodes. Blood and lymph node smears were taken 5 to 7 days a week. All smears were fixed in methanol and stained in Giemsa's stain. Calves were bled once a week for serum for serological testing.

<sup>5</sup> This Ugandan strain has been erroneously described as originating from Entebbe by Uilenberg and Zwart (1979).

Parasitological and clinical observations. Mild strains **TABLE I** 

ain         no.         infection         number         1st day, %, pack         Renarks <sup>4</sup> wfield         297 (s)         Ticks         17         +         21, 0-1% (22-25)         Recovered after temporary alarming symptoms           305 (s)         Ticks         17         +         21, 0-1% (22-25)         Recovered after temporary alarming symptoms           305 (s)         Ticks         17         +         21, 0-1% (22-25)         Recovered after temporary alarming symptoms           305 (s)         Ticks         11         ++         35, 5% (80-87)         Recovered after temporary alarming symptoms           305 (s)         Ticks         11         ++         35, 5% (80-87)         Recovered after marked clinical symptoms           311 (s)         Ticks         14         +         15, 0'5% (35)         Rein arked clinical symptoms           322 (s)         Blood iv/s         -         -         17, 1% (32)         Recovered after marked clinical symptoms           322 (s)         Ticks         14         +         15, 0'5% (33)         Rein arked clinical symptoms           323 (s)         Ticks         14         17, 1% (32, 25)         Recovered after marked clinical symptoms           333 (s)         Ticks         12         1% (1/2-21) <th>ain no. wfield 295 305 (s) 327 (s) 327 (s) 327 (s) 311 (s) 308</th> <th>infection Ticks Ticks Stabilate Ticks Stabilate Stabilate</th> <th>nun 17 16 11 13 11 14</th> <th>1 + +</th> <th>lst</th> <th>day, %, peak</th> <th>Remarks<sup>4</sup></th>	ain no. wfield 295 305 (s) 327 (s) 327 (s) 327 (s) 311 (s) 308	infection Ticks Ticks Stabilate Ticks Stabilate Stabilate	nun 17 16 11 13 11 14	1 + +	lst	day, %, peak	Remarks <sup>4</sup>
field         25         Ticks         17         +         21, 0.1% (22-25)         Recovered after temporary alarming symptoms           297 (s)         Ticks         17         +         21, 0.1% (91-98)         Prednisolone acctate 2 mg/kg, i.m, days 23 at 305 (s)           305 (s)         Ticks         11         ++         38, 5% (80-87)         Prednisolone acctate 2 mg/kg, i.m, days 23 at 305 (s)           301 (s)         Ticks         11         ++         35, 5% (80-87)         Prednisolone acctate 2 mg/kg, i.m, days 23 at 305 (s)           302 (s)         Stabilate         14         ++         31, (30)         Prednisolone acctate 2 mg/kg, i.m, days 23 at 305 (s)           303 (s)         Ticks         14         ++         35, 0.5% (35)         Prednisolone acctate 2 mg/kg, i.m, days 23 at 305 (s)           304 (s)         Stabilate         14         ++         15, 0.5% (35)         Prednisolone acctate 2 mg/kg, i.m, days 23 at 305 (s)           305 (s)         Ticks         14         ++         17, 1% (17-21)         Recovered after marked clinical symptoms           305 (s)         Ticks         14         ++         17, 1% (32)         Mild clinical symptoms           305 (s)         Stabilate         14         ++         17, 1% (32)         Mild clinical symptoms	field 295 297 (s) 305 (s) 327 (s) 327 (s) 408 408	Ticks Ticks Ticks Stabilate Stabilate Stabilate	11 13 14	+ (	5		
335 (s)       Ticks       17 (+) $35$ , $52$ , $(87-3)$ Ticks       11 (+) $35$ , $52$ , $(87-3)$ 327 (s)       Stabilate       13 (+)       23, $52$ , $(83-3)$ Recovered after marked clinical symptoms         321 Stabilate       14 (+)       15, $12$ , $(17-21)$ Recovered after marked clinical symptoms         321 Stabilate       14 (+)       15, $12$ , $(17-21)$ Recovered after marked clinical symptoms         322 (s)       Blood iv. 6       -       17, $12$ , $(32)$ Stabilate         322 (s)       Blood iv. 6       -       -       17, $12$ , $(32)$ Rwaine       306 (s)       Ticks       14 ++       17, $12$ , $(41-97)$ 323 (s)       Ticks       14 ++       17, $12$ , $(42-53)$ Stapilate         333 (s)       Stabilate       13 (+)       -       -         333 (s)       Stabilate       13 (+)       -       -         333 (s)       Stabilate       13 (+)       -       -       -         333 (s)       Stabilate       13 (+)       -       -       -       -         333 (s)       Stabilate       13 (+)       -       -       -       -       -         332 (s)       Stabilate<	27 (8) 305 (8) 327 (8) 311 (8) 308	Ticks Stabilate Ticks Stabilate Stabilate	11 13 14	1	417 17	0.1%(22-25)	Recovered after temporary alarming symptoms
327 (5)       Stabilate       13       (+)       21, < 0'1, % (40)         311 (5)       Ticks       11       ++       35, 5% (68-83)       Recovered after marked clinical symptoms         308       Stabilate       14       +)       15, 1% (17-21)       Recovered after marked clinical symptoms         308       Stabilate       14       +)       15, 1% (17-21)       Recovered after marked clinical symptoms         308       Stabilate       14       +)       15, 0.5% (35)       Scanty schizonts in peripheral blood day 14, no         310       Si Ticks       14       ++       17, 1% (31-97)       Scanty schizonts in peripheral blood day 14, no         320 (5)       Stabilate       16       (+)       25, 0.5% (51)       Mild clinical symptoms         333 (5)       Ticks       12       (+)       15, 0.5% (51)       Died day 16 with high parasitaemia of <i>Epe</i> 333 (5)       Stabilate       1       -       -       17, 2% (37-33)       Died day 16 with high parasitaemia of <i>Epe</i> 333 (5)       Stabilate       -       -       17, 2% (37-33)       Died day 16 with high parasitaemia of <i>Epe</i> 333 (5)       Stabilate       -       -       17, 2% (37-33)       Died day 16 with high parasitaemia of <i>Epe</i>	327 (s) (tington 311 (s) 308	Stabilate Ticks Stabilate Stabilate	113	Eŧ	f 89	5% (80-87)	LICULINOIOUS acciais 2 IIIS/AS, 1.111., Uays 23 and 23
tington 311 (s) Ticks 11 ++ 35, 5% (68-83) 321 Stabilate 14 (+) 15, 1% (17-21) Recovered after marked clinical symptoms 322 (s) Blood i.v. <sup>6</sup> 17, 1% (32) Iwaine 306 (s) Ticks 14 ++ 17, 1% (32) image 306 (s) Ticks 14 ++ 17, 1% (41-97) 320 (s) Stabilate 16 (+) 25, 0.5% (51) meen 333 (s) Ticks 12 (+) 19, 1% (34) 330 (s) Stabilate 13 (+) 25, 0.5% (42-53) 330 (s) Stabilate 13 (+) 25, 0.5% (42-53) and (a) 16 with high parasitaemia of <i>Epe</i> day 12 bogo 278 Ticks 15 ++ 17, 2% (37-38) avortagi bogo 278 Ticks 15 ++ 19, 0.5% (53) 355 (s) Stabilate - 17, 2% (37-38) bogo 278 Ticks 15 ++ 19, 0.5% (53) 355 (s) Stabilate - 17, 2% (37-38) bogo 278 Ticks 15 ++ 19, 0.5% (53) avortagi avortagi 205 (s) Stabilate - 17, 0.5% (53) Stabilate - 17, 2% (37-38) bogo 758 Ticks 15 ++ 19, 0.5% (53) bogo 758 Ticks 15 ++ 19, 0.5% (53) Stabilate 17, 2% (53) Stabilate 17, 2% (37-38) bogo 758 Ticks 15 ++ 19, 0.5% (53) Stabilate 17, 2% (37-38) Ticks 15 ++ 19, 0.5% (53) Stabilate 17, 2% (53) Stabilate 17, 0.5% (53) Stabilate	tington 311 (s) 308	Ticks Stabilate Stabilate	14	÷	21,<	0.1%(40)	
308Stabilate14(+)15, 1%(17-21)Recovered after marked clinical symptoms321Stabilate15, 0.5%(35)Scanty schizonts in peripheral blood day 14, no322(5)Blood i.v. <sup>5</sup> 17, 1%(32)Mild clinical symptoms322(5)Ticks14++17, 1%(32)Mild clinical symptoms323(5)Ticks14++17, 1%(34)330(5)Stabilate12(+)25, 0.5%(51)331(5)Ticks12(+)19, 1%(34)333(5)Stabilate13(+)333(5)Stabilate13(+)332(5)Stabilate13(+)332(5)Stabilate13(+)355(5)Stabilate17, 2%(37-38) <i>unotragi</i> 278Ticks15++19, 0.5%(53)275(5)Stabilate17, 0.5%(63)276(5)Stabilate17, 0.5%(53)275(5)Stabilate17, 0.5%(53)275(5)Stabilate17, 0.5%(53)275(5)Stabilate17, 0.5%(53)275(5)Stabilate17, 0.5%(53) <td>308</td> <td>Stabilate Stabilate</td> <td>14</td> <td>, + , +</td> <td>35,</td> <td>5 % (68-83)</td> <td></td>	308	Stabilate Stabilate	14	, + , +	35,	5 % (68-83)	
321       Stabilate       -       15, $0.5\%$ (35)       Scanty schizonts in peripheral blood day 14, no         Maine       322 (s)       Blood i.v. <sup>5</sup> -       17, $1\%$ (32)       Mild clinical symptoms         322 (s)       Ticks       14       ++       17, $1\%$ (32)       Mild clinical symptoms         320 (s)       Stabilate       16       (+)       25, $0.5\%$ (31)       Mild clinical symptoms         320 (s)       Stabilate       14       (+)       25, $0.5\%$ (31)       Died day 16 with high parasitaemia of <i>Epel</i> 333 (s)       Ticks       13       (+)       15, $0.5\%$ (42-53)       Died day 16 with high parasitaemia of <i>Epel</i> 332 (s)       Stabilate       13       (+)       15, $0.5\%$ (42-53)       Died day 16 with high parasitaemia of <i>Epel</i> 332 (s)       Stabilate       -       -       17, $2\%$ (37-38)       Died day 12         abogo)       278       Ticks       15       (+)       20, $1\%$ (33-73)         bogo)       287       Ticks       10       +       20, $1\%$ (53-73)         205 (s)       Stabilate       -       -       17, $2\%$ (37-38)         205 (s)       Stabilate       -       -       17, $0.5\%$ (63)       20, $1\%$ (7) <tr< td=""><td>&gt;&gt;&gt;</td><td>Stabilate</td><td></td><td>(+)</td><td>15,</td><td>1% (17-21)</td><td>Recovered after marked clinical symptoms</td></tr<>	>>>	Stabilate		(+)	15,	1% (17-21)	Recovered after marked clinical symptoms
322 (s)       Blood i.v. $s$ -       -       17, 1% (32)       Mild clinical symptoms         306 (s)       Ticks       14       +       17, 1% (31-97)       300 (s)       Stabilate       16 (+)       25, 0.5% (51)         neen       333 (s)       Ticks       12 (+)       19, 1% (34-97)       310 (s)       Stabilate       16 (+)       25, 0.5% (51)         neen       333 (s)       Ticks       12 (+)       19, 1% (34)       34)       36)       Stabilate       14 (+)       15, 0.5% (42-53)       Died day 16 with high parasitaemia of <i>Epel</i> day 12         335 (s)       Stabilate       13 (+)       -       -       17, 2% (37-38)       day 12         355 (s)       Stabilate       -       -       17, 2% (37-38)       day 12       day 12         bogo)       278       Ticks       15 (+)       0.5% (25)       37-38)       day 12         bogo)       287       Ticks       10 +       20, 1% (53-73)       Died day 16 with high parasitaemia of <i>Epel</i> dog 128 $unotrogi       275 (s)       Stabilate       -       -       17, 2% (35-37)       Died day 12       Died day 12     $	321		I	ļ	15,	0.5% (35)	Scanty schizonts in peripheral blood day 14, none found in lymph nodes
Iwaine $306$ (s)Ticks $14$ $++$ $17$ , $1\%$ , $(41-97)$ $320$ (s)Stabilate $16$ $(+)$ $25$ , $0.5\%$ , $(51)$ $333$ (s)Ticks $12$ $(+)$ $25$ , $0.5\%$ , $(51)$ $333$ (s)Stabilate $14$ $(+)$ $15$ , $0.5\%$ , $(42-53)$ $332$ (s)Stabilate $13$ $(+)$ $15$ , $(-5\%, (-53))$ $332$ (s)Stabilate $13$ $(+)$ $15$ , $(-2\%, (-23))$ $335$ (s)Stabilate $  17$ , $2\%$ , $(37-38)$ $326$ (s)Stabilate $  17$ , $0.5\%$ , $(53)$ $326$ (s)Stabilate $   320$ (s)Stabilate $   320$ (s)Stabilate $  -$	322 (s)	Blood i.v. <sup>5</sup>	I	I	17,	1 % (32)	Mild clinical symptoms
320 (s)       Stabilate       16 (+)       25, 0.5% (51)         neen       333 (s)       Ticks       12 (+)       19, 1% (34)         330 (s)       Stabilate       14 (+)       15, 0.5% (32-53)       Died day 16 with high parasitaemia of <i>Epe</i> 332 (s)       Stabilate       13 (+)       -       -       -       day 12         335 (s)       Stabilate       1       -       -       17, 2% (37-38)       day 12         aurotragi       355 (s)       Stabilate       -       -       17, 2% (37-38)       day 12         bogo)       278       Ticks       15       ++       19, 0.5% (25)       273       326 (s)       Stabilate       -       -       30, <0.1% (7)	Iwaine 306 (s)	Ticks	14	++	17.	1% (41–97)	
313 (s)       Ticks       12 (+)       19, 1% (34) $330$ (s)       Stabilate       14 (+)       15, 0.5% (42-53) $330$ (s)       Stabilate       14 (+)       15, 0.5% (42-53) $332$ (s)       Stabilate       13 (+)       -       - $335$ (s)       Stabilate       13 (+)       -       - $355$ (s)       Stabilate       -       17, 2% (37-38)       day 12 $urotragi$ $555$ (s)       Stabilate       -       -       17, 2% (37-38) $urotragi$ $275$ (s)       Stabilate       -       -       17, 2% (37-38) $urotragi$ $275$ (s)       Stabilate       -       -       30, <0.1% (53-73)	320 (s)	Stabilate	16	(+	25,	0.5% (51)	
330 (s)       Stabilate       14 (+)       15, 0.5% (42-53)         352 (s)       Stabilate       14 (+)       15, 0.5% (42-53)         352 (s)       Stabilate       13 (+)       -       -         353 (s)       Stabilate       13 (+)       -       -       -         355 (s)       Stabilate       13 (+)       -       -       -       -         355 (s)       Stabilate       -       -       17, 2% (37-38)       day 12         aurotragi       355 (s)       Stabilate       -       -       17, 2% (37-38)         bogo)       278       Ticks       15 ++       19, 0.5% (25)       No recognisable peak parasitaemia         275 (s)       Stabilate       -       -       30, <0.1% (7)	neen 333 (s)	Ticks	11	(+)	.61	1% (34)	
352 (s)       Stabilate       13 (+)       -	330 (s)	Stabilate	14	( <del>+</del> )	15,	0.5% (42-53)	
<ul> <li>355 (s) Stabilate 17, 2% (37-38)</li> <li>355 (s) Stabilate 17, 2% (37-38)</li> <li>bogo) 278 Ticks 15 ++ 19, 0.5% (25)</li> <li>275 (s) Stabilate 30, &lt;0.1% (7) No recognisable peak parasitaemia</li> <li>326 (s) Stabilate 17, 0.5% (63) Dexamethason Na-phosphate 0.2 mg/kg i.m.</li> </ul>	352 (s)	Stabilate	13	( <del>+</del>	' 1	1	Died day 16 with high parasitaemia of Eperythrozoon wenyoni since
<i>urotragi</i> bogo) 278 Ticks 15 ++ 19, 0.5% (25) 287 Ticks 10 + 20, 1% (53-73) 275 (s) Stabilate 30, <0.1% (?) No recognisable peak parasitaemia 326 (s) Stabilate 17, 0.5% (63) Dexamethason Na-phosphate 0.2 mg/kg i.m.	355 (8)	Stabilate	I	1	17	2% (37–38)	day 12
bogo     278     Ticks     15     ++     19, 0.5% (25)       287     Ticks     10     +     20, 1% (53-73)       275 (s)     Stabilate     -     -     30, <0.1% (7)	urotraei						
287 Ticks 10 + 20, $1\%$ (53-73) 275 (s) Stabilate $30, <0.1\%$ (?) No recognisable peak parasitaemia 326 (s) Stabilate 17, $0.5\%$ (63) Dexamethason Na-phosphate $0.2 \text{ mg/kg i.m.}$ <i>notragi</i> 20 Ticke 15 (±) 280 was not infecting to ticke	ogo) 278	Ticks	15	++	19,	0.5% (25)	
275 (s) Stabilate $  30'_{\circ} < 0.1\%$ (?) No recognisable peak parasitaemia 326 (s) Stabilate $ -$ 17, 0.5% (63) Dexamethason Na-phosphate 0.2 mg/kg i.m. <i>unotragi</i> - $        -$	287	Ticks	10	+	2	1% (53-73)	
326 (s) Stabilate – – 17, 0.5% (63) Dexamethason Na-phosphate 0.2 mg/kg i.m. ( <i>urotragi</i> 280 Ticks 15 (±) – – – 280 was not infective to ticks	275 (s)	Stabilate	I	ł	30, <	0.1% (?)	No recognisable peak parasitaemia
motragi $morral$ 280 $mer not infervite to ticke 15 (\pm)  - 280 mer not infervite to ticke$	326 (s)	Stabilate	i	1	17,	0.5% (63)	Dexamethason Na-phosphate 0.2 mg/kg i.m. daily, days 31-36
$3072$ $30$ Ticks $15(\pm)$ $ 30$ $30$ use not infective to ticks	urotragi				•	, ,	
	anza) 280	Ticks	15	( <del>+</del> )	1	1	280 was not infective to ticks

<sup>1</sup> (s) splenectomised. <sup>2</sup> First day after infection when schizonts were detected in regional lymph node. (+), scanty; +, fairly numerous; + +, numerous; + + +, very numerous. These symbols refer to the maximum number reached in 1 or more lymph nodes. <sup>3</sup> First day after infection when piroplasms were detected in blood with approximate maximum percentage of infected red cells and day(s) after infection when the parasitaemia was at this peak. 4 Mild infections, followed by recovery, in all animals, except where otherwise indicated. 5 90 ml of blood from calf 311 with a parasitaemia of approximately 0.1% were injected intravenously into calf 322.

## Serological test

The indirect fluorescent antibody test (IFAT) was used to detect antibodies to *Theileria*. Both piroplasm antigen (Burridge, 1971) and cell culture grown schizont antigen (Burridge and Kimber, 1972) derived from various strains were used for *T. parva*; only piroplasm antigen was prepared of *T. taurotragi* (Idobogo) and from each of the strains Lawfield, Chiltington, McIlwaine and Tzaneen. Only schizont antigen of *Theileria* sp. (Boleni) was used. Serum dilutions were 2-fold starting from 1:40.

## RESULTS

## Mild strains

The Lawfield, Chiltington, McIlwaine and Tzaneen strains proved to be benign parasites (Table I). Apart from 1 splenectomised calf which died of intercurrent infection with *Eperythrozoon wenyoni* all animals recovered spontaneously. Only 2 out of 14 showed temporarily alarming clinical symptoms of theileriosis. Hyperthermia was invariably present during the period that schizonts were found, with a maximum of about 40°C only (range 39.5-40.6°C) and subsequently subsided. The type of infection resembled that seen in animals reacting to bovine *T. taurotragi* (Table I) with low numbers of schizonts and piroplasms. Schizonts and piroplasms appeared on average later than in *T. parva* infections and the peak parasitaemia was often considerably delayed and prolonged. Neither splenectomy nor synthetic immuno-



FIGS 1 to 6. — *T. parva* piroplasm antigen; — *T. parva* schizont antigen; — *T. taurotragi* Idobogo piroplasm antigen; — Tzaneen antigen; — Lawfield antigen (Fig. 5 only) ---- Mcllwaine antigen (Fig. 5 only); ZZZZ Field covered by combined results of antigens of the 3 Rhodesian strains, Lawfield, Chiltington and Mcllwaine. (Except Fig. 4, as no Chiltington antigen was available any more for sera of animal 333.)



FIG. 2







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suppressive steroids appeared to influence the infection in a consistent way. The animals remained carriers, piroplasms being detectable in blood smears continuously or intermittently as long as observations were continued (from a few weeks to several months).

Microschizonts were not seen with certainty. Macroschizonts and piroplasms resembled those of T. taurotragi in cattle, macroschizonts being indistinguishable from small T. parva schizonts and piroplasms being predominantly round and oval with far less rod- and comma-shaped forms present than in T. parva infections. There was no intra-erythrocytic bar and/or veil, associated with the piroplasms.

The Lawfield, Chiltington, McIlwaine and Tzaneen strains were indistinguishable from T. taurotragi (Idobogo strain) in the IFAT (Figs 1-6). Antigens and antisera were fully cross-reactive. They were also similar in their reaction to T. parva antigens and sera. Antigens of all these strains reacted strongly with sera recovered from T. parva infection but sera from animals recovered from the Zimbabwean and South African strains showed only low titres to T. parva antigens.

Cross-immunity tests are summarised in Table II. Animal no. 308 immune to 2 strains of T. parva was fully susceptible to the Chiltington strain and showed clinical symptoms associated with this group of strains. Animal no. 326 recovered from T. taurotragi (Idobogo) was immune to challenge with the Chiltington strain. The experiments also confirmed the lack of protection against T. parva after recovery from the Tanzanian bovine strains of T. taurotragi. The 4 strains from Zimbabwe and South Africa were similar in this respect also, although 2 of the animals recovered from the Chiltington strain and 1 of those infected with the Tzaneen strain survived T. parva challenge (including 1 challenged with the Boleni strain which has proved to be T. parva).

A splenectomised sheep was infected with the Lawfield strain by subcutaneous injection with the tick-derived stabilate which had proved to be infective to a calf. Although the regional prescapular lymph node became swollen no schizonts were

Animal no.	Recovered from	Challenged with	Results
295	Lawfield	T. parva (Serengeti)	ECF, killed in extremis day 16
305		T. parva (Pugu 1)	ECF, killed in extremis day 24
311	Chiltington	T. parva (Muguga)	ECF, killed in extremis day 23
321		T. parva (Serengeti)	Severe ECF, recovered
322	**	Boleni strain	Severe theileriosis, recovered
306	McIlwaine	T. parva (Muguga)	Died of ECF day 23
330	Tzaneen	T. parva (Uganda)	Died of ECF day 19
333		T. parva (Uganda)	Very mild reaction, recovered
275	Idobogo	T. parva (Pugu 3)	Died of ECF day 24
287		T. parva (Pugu 3)	ECF, killed in extremis day 24
326		Chiltington strain	No reaction
326	Idobogo & Chiltington	Boleni strain	Died of theileriosis day 18
280	Mwanza	T. parva (Pugu 3)	Died of ECF day 26
308	T. parva <sup>2</sup>	Chiltington strain	Marked clinical symptoms, recovered

 TABLE II

 Cross-immunity tests with mild strains<sup>1</sup>

<sup>1</sup> All animals were challenged with stabilates of batches of which the infectivity had been proved in other animals except for 287 and the Boleni challenge of 326, where ticks were used.

<sup>2</sup> 308 had been immunised with the Pugu 1 and the Serengeti strains.

		~~~	parasitological and clinic	al observations. Boleni strai	, v
<i>Theileria</i> strain	Passage no.1	Anîmal no. <sup>2</sup>	Schizonts <sup>2</sup> 1st day, highest number	Piroplasma <sup>2</sup> 1st day, highest number	Remarks <sup>3</sup>
Boleni	-==========	329 (s) 324 (s) 322 (s) 325 (s) 335 (s) 343 343 343 343 350 363 374	11 9 9 12 9 12 10 10 10 10 10 10 10 10 10 10 10 10 10	18, 1, 5, 5, 18, 1, 2, 2, 2, 2, 2, 18, 0, 18, 0, 18, 0, 18, 0, 18, 0, 18, 0, 18, 0, 11, 18, 0, 11, 11, 11, 11, 11, 11, 11, 11, 11,	Died day 21 Killed in extremis, day 34 <sup>4</sup> Severe reaction, spontaneous recovery Died day 18 Died day 18 Died day 14 Died day 13 Died day 19 Killed in extremis, day 22 Killed in extremis, day 21 <sup>5</sup>
<ol> <li>Number of <sup>8</sup> See legend t <sup>8</sup> All animals <sup>4</sup> The first da of <i>Theileria</i>.</li> <li><sup>5</sup> Treated with</li> </ol>	tick-cattle pat o Table I. were infected y of the paras h halofuginon	sages in Utrec by ticks apart itaemia could e, 1 mg/kg, on	ht (see Fig. 7). from 322 and 335 whic not de determined in th t day 14 which failed to	h received stabilate. ese animals as they were ps prevent the fatal outcome.	atent, recovered carriers of other species

Ē • TABLE III .

TABLE I Serology of sheep Lawfield str	V infected with ain
	Titre <sup>1</sup>
Before infection	<40
Weeks post-infection	
2	160
3	320
4	640
5	640-1280
6	640-1280
7	640
8	1280
9	640
10	80-160
1 Decimenal diama in	TIPATE

<sup>1</sup> Reciprocal titre in IFAT using McIlwaine antigen.

found in biopsy smears made from day 8 to day 18 but abnormally high numbers of lymphoblastoid cells and of dividing cells were observed on days 12 and 13. No piroplasms were found in blood smears during an observation period of nearly 5 months. Serological evidence (Table IV) suggested, however, that the sheep had acquired a latent infection.

## The Boleni strain

Fig 7 summarises the transmissions carried out with this strain excluding animals cured by oxytetracycline or halofuginone. It proved to be highly pathogenic causing fatal theileriosis in 10 out of 11 cattle (Table III). Rectal temperatures reached  $41^{\circ}$ C except in the animal that recovered ( $40.7^{\circ}$ C) and persisted until the end. Piroplasm parasitaemia remained low while schizonts were numerous only in animals receiving the 3rd and 4th passage (Table III). Prepatent periods to schizonts were similar to those seen in animals infected with *T. parva*.

Schizonts resembled those of T. parva as did piroplasms the majority of which were rod-shaped, comma-shaped or oval. The Boleni strain proved indistinguishable from T. parva in the IFAT. Sera from animals recovered from infection by the Boleni strain gave high titres to T. parva antigens and schizont antigen of the Boleni strain reacted as strongly with T. parva sera as did T. parva schizont antigen. Cross-immunity tests confirmed the identity of the Boleni strain with T. parva. Animals recovered from Boleni infection did not react or reacted very mildly to challenge with the Muguga, Pugu 1 or Serengeti strains of T. parva. Challenge with the Boleni strain caused no or mild reactions in animals immunised against the Pugu 1, Muguga or Uganda strain. However, Boleni-recovered animals reacted severely to challenge with the Uganda or Nyakizu strain but these 2 strains also caused severe reactions in animals immune to the Schoonspruit, Muguga, Manyara, Pugu 1, or Kiambu strains of T. parva. Idobogo and Chiltington strains conferred no protection against Boleni challenge (Table II).

Seven cattle-tick passages of the Boleni strain were carried out between November 1978 and April 1980 (Fig. 7). The results are summarised in Table III, showing that, although the numbers of schizonts were higher in the 3rd and 4th passage, no consistent increase in piroplasm parasitaemia was achieved and the strain had not signicantly changed its behaviour.





FIG 7. Tick-borne passages of Boleni strain.

## DISCUSSION

To date there have been 6 causal agents of bovine theileriosis identified in southern Africa. *T. parva* was introduced into Rhodesia (now Zimbabwe) and South Africa in 1901. This parasite is transmitted between cattle by *R. appendiculatus* and causes ECF,

a disease manifested by the presence of large numbers of intra-lymphocytic schizonts and intra-erythrocytic piroplasms. In addition 2 closely related parasites also transmitted by R. appendiculatus have been recorded in southern Africa. T. lawrencei (Neitz, 1955) was described from South Africa having been first recognised in Southern Rhodesia by Lawrence in 1933 (Neitz, 1957). This was considered to be a parasite of buffalo (Syncerus caffer) transmissible to cattle in which few schizonts and rare piroplasms could be detected. The disease in cattle, Buffalo disease or Corridor disease, was always associated with the presence of buffalo, transmission between cattle rarely if ever being recorded. A third parasite T. bovis, able to maintain itself in cattle without contact with buffalo, causing the disease Rhodesian malignant theileriosis or January disease, was recognised by Lawrence in 1935 (Neitz, 1957). In this disease fewer schizonts and piroplasms are present than in ECF. T. bovis was, however, synonymised with T. lawrencei when it was discovered that the latter could be transmitted between cattle by Neitz, 1957, who also reported cross-immunity between T. parva and T. lawrencei and T. bovis respectively. Barnett and Brocklesby (1966) confirmed the immunological relationship between T. parva and T. lawrencei and were able to change the behaviour of T. lawrencei by cattle-tick passages so that it became indistinguishable from classical T. parva. Serological evidence (Burridge, Young, Stagg, Kanhai and Kimber, 1974) confirmed the identity of the 2. Accordingly Uilenberg (1976) proposed that T. parva and T. lawrencei should be considered as biological subspecies and Lawrence (1979) added T. bovis as a third candidate subspecies, viz. T. parva parva, T. parva lawrencei and T. parva bovis.

Another theilerial species T. mutans was described in South Africa as being benign and readily transmissible by blood inoculation (Theiler, 1906). What was thought to be T. mutans was subsequently transmitted by R. appendiculatus (Theiler, 1909) but it was later found that a parasite similar to that originally described as T. mutans was transmitted by species of Amblyomma: A. variegatum (Uilenberg, Robson and Pedersen, 1974), A. cohaerens (Young, Burridge and Payne, 1977), A. gemma (Paling, Grootenhuis and Young, 1981) and A. hebraeum (de Vos and Roos, 1981); this parasite could not be transmitted by R. appendiculatus. However, the benign theilerial strains from Zimbabwe and South Africa, which we have shown in this paper to be similar to the Idobogo strain of T. taurotragi, are transmissible by R. appendiculatus but not A. hebraeum (A. J. de Vos, unpub; Lawrence and MacKenzie, 1980).

Another non-pathogenic theilerial species, *T. velifera* (Uilenberg, 1964), widely distributed in Africa south of the Sahara has recently been found to occur in South Africa (Berger, 1979) and Mozambique (Vilhena and Arnold, in press). This parasite is transmitted by at least 3 *Amblyomma* spp.: *A. variegatum* (Uilenberg and Schreuder, 1976), *A. hebraeum* (Schein and Uilenberg, in van Vorstenbosch, Uilenberg and van Dijk, 1978) and *A. lepidum* Dönitz, 1909 (Uilenberg in van Vorstenbosch *et al*, 1978).

All results of the comparative studies of the Lawfield, Chiltington and McIlwaine strains from Zimbabwe and the Tzaneen strain from South Africa show their specific identity with the Tanzanian Idobogo strain for which the name *T. taurotragi* appears to be justified. It could be argued that the correct name for these parasites is in fact *T. mutans* as it was thought since 1909 that *T. mutans* was transmitted by *Rhipicephalus* spp. The *Amblyomma*-transmitted *Theileria* should then be given a new name and the eland *Theileria* would have to be designated as *T. mutans* instead of *T. taurotragi*. However, Theiler (1906) described *T. mutans* as readily transmissible to intact cattle by blood inoculation and as causing anaemia. These characteristics apply to the *Amblyomma*-transmitted parasite not to the *Rhipicephalus*-transmitted strains. Although we did transmit the Chiltington strain once by intravenous injection of

blood to a splenectomised animal (Table I), an attempt by J. A. Lawrence to transmit the Lawfield strain with blood to a splenectomised calf failed and de Vos was unable to induce patent infection in intact cattle by blood inoculation with the Tzaneen strain. The *Amblyomma*-transmitted strains produce readily detectable parasitaemias in intact cattle following blood inoculation even when the subcutaneous route is used; peak parasitaemia commonly reaches 1% or more in intact animals and usually at least 10% in splenectomised cattle. Furthermore the *Amblyomma*-transmitted parasites often cause anaemia even in intact cattle contrary to those having *Rhipicephalus* ticks as vectors.

T. taurotragi may be to some extent related to T. parva considering their partial serological relationship, their transmission by the same vector and the morphological similarity of the macroschizonts. Their differences are immunological (absence of cross-immunity), serological (partial), differences in the infection rate in the vector and in the developmental cycle in the tick (Young, Grootenhuis, Leitch and Schein, 1980), morphological (more rod- and comma-shaped piroplasms in T. parva) as well as differences in the infectivity for the eland. This antelope has so far not been shown to be susceptible to T. parva although the few experiments reported in the literature Grootenhuis, 1979) are certainly not conclusive and were not done with eland born and bred in tick-free conditions.

T. taurotragi has in our single experiment caused latent infection in a splenectomised sheep, an observation which confirms Neitz' (1957) findings.

Theileria sp. (Boleni) is undoubtedly a strain of T. parva with characteristics intermediate between those of the classical parva-type (ECF) and those of the buffaloassociated lawrencei-type (Corridor disease).<sup>6</sup> Dr S. F. Barnett (pers. comm.) suggested that rapid tick-cattle passages may be necessary for full transformation of such intermediate bovis-type strains and that the reason why such strains do not further transform in southern Africa may be that the vector only undergoes 1 developmental cycle per year so that there is only 1 annual passage of the parasite. Nearer to the equator R. appendiculatus produces more than 1 generation annually and tick-cattle passages occur more frequently. It should be remembered of course that classical ECF was introduced into southern Africa from equatorial regions although buffalo and possibly the lawrencei-type of T. parva were present in southern Africa long before that. So far seven rapid passages have not appeared to change the characters of the Boleni strain.

The strain of *R. appendiculatus* did not appear to have any significant influence in our experiment on the evolution and the severity of different theilerial strains. Moreover as southern strains of *R. appendiculatus* have shown themselves for more than half a century to be effective vectors of introduced classical East African ECF and as Corridor disease as well as the *bovis*-type of strain (Nyakizu) are maintained in the equatorial regions by the local strains of tick, it is unlikely that particular types of *T. parva* are associated with and influenced by different vector strains. The aberrant Burguret strain also proved capable of transmitting *T. parva*. Apart from the fact that we know that a *lawrencei*-type of strain can be adapted to cattle we do not yet know how stable the behaviour is of different types of such adapted strains. We do believe that one should keep in mind that wherever strains of the *lawrencei*- or *bovis*-types occur the possibility of classical ECF re-emerging spontaneously cannot be ruled out.

<sup>&</sup>lt;sup>6</sup> In evaluating the type of strain one should take into account the existence of very virulent strains of classical *parva*-type which may kill their host too quickly for the parasites to become numerous and thus may on occasion simulate *bovis*- or even *lawrencei*-types of strain.

## CONCLUSION

At the moment we distinguish in Zimbabwe and South Africa the following theilerial parasites of cattle:

Theileria spp.	Main local vectors
T. parva (lawrencei- and bovis-types)	R. appendiculatus
T. taurotragi	R. appendiculatus
T. mutans	A. hebraeum, A. variegatum
T. velifera	A. hebraeum, A. variegatum

Of the 5 parasites isolated from southern Africa, in this study the Boleni strain from Zimbabwe would be classified as T. parva (bovis) and the Lawfield, Chiltington and McIlwaine strains from Zimbabwe and the Tzaneen strain from South Africa as T. taurotragi.

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## AGENT DE LA THEILERIOSE BOVINE EN AFRIQUE AUSTRALE

Résumé—Une souche pathogène et quatre souches bovines bénignes de Theileria d'Afrique australe, toutes transmises par Rhipicephalus appendiculatus ont été comparées entre elles, puis avec des souches de bovins et de buffles du complexe de T. parva de l'Afrique australe et orientale et enfin avec des souches bovines de T. taurotragi de Tanzanie considérées comme originaires de l'Elan du Cap. Les critères utilisés ont été d'ordre parasitologique, clinique, sérologique avec recherche des caractères d'immunité-croisée.

Les souches bénignes sont similaires à T. taurotragi. La sérologie a suggéreré que T. taurotragi est également infectieuse chez le mouton. La souche pathogène appartient au complexe de T. parva ; ce complexe consiste en une série de types présentant divers comportements depuis le type lawrencei du buffle causant l'affection "Corridor", et le type bovis cause de la theileriose maligne de Rhodésie jusqu'au type "parva" cause de l'East Coast Fever classique. 7 passages bétail-tique d'une souche de type bovis n'ont pas réussi à la transformer en type parva. 4 espèces de Theileries bovines sont maintenant connues en Afrique australe : T. parva (types lawrencei et bovis) et T. taurotragi toutes deux transmises par R. appendiculatus, T. mutans et T. velifera avec toutes deux Amblyomma spp. comme vecteurs.

## AGENTES CAUSALES DE THEILERIOSIS EN EL SUR DE AFRICA

Resumen-Se compararon 5 cepas de Theileria del sur de Africa, 1 patógena y 4 benignas, todas transmitidas por Rhipicephalus appendiculatus, entre si y también con cepas derivadas de bovinos y búfalos, del complejo T. parva, del sur y este de Africa, y con cepas bovinas de T. taurotragi de Tanzania derivadas de antílope eland. Los criterios de evaluación utilizados fueron parasitológico, clínico, serológico, utilizando también los caracteres de inmunidad cruzada.

Las cepas benignas son similares a T. taurotragi de bovinos. Las pruebas serológicas indicaron que esta última es también infectiva para ovejas. Las cepas patógenas pertenecen al complejo T. parva; este último consiste de un rango de tipos con diferente comportamiento que van desde el tipo lawrencei (búfalo) que causa la enfermedad Corridor, a través del tipo bovis que causa la theileriosis maligna de Rodesia, hasta el tipo parva que causa la típica Fiebre de la Costa Este. Siete pasajes a través de bovinos y garrapatas de un tipo bovis, no produjo transformación alguna al tipo parva.

Se conocen entonces 4 especies de Theileriae bovina en el sur de Africa: T. parva (tipos lawrencei y bovis) y T. taurotragi, ambas transmitidas por R. appendiculatus, y T. mutans y T. velifera, ambas transmitidas por Amblyomma spp.