

1 **Title**

2 Liver function markers and haematological dynamics during acute and chronic phases of
3 experimental *Fasciola hepatica* infection in cattle treated with triclabendazole

4

5 **Authors**

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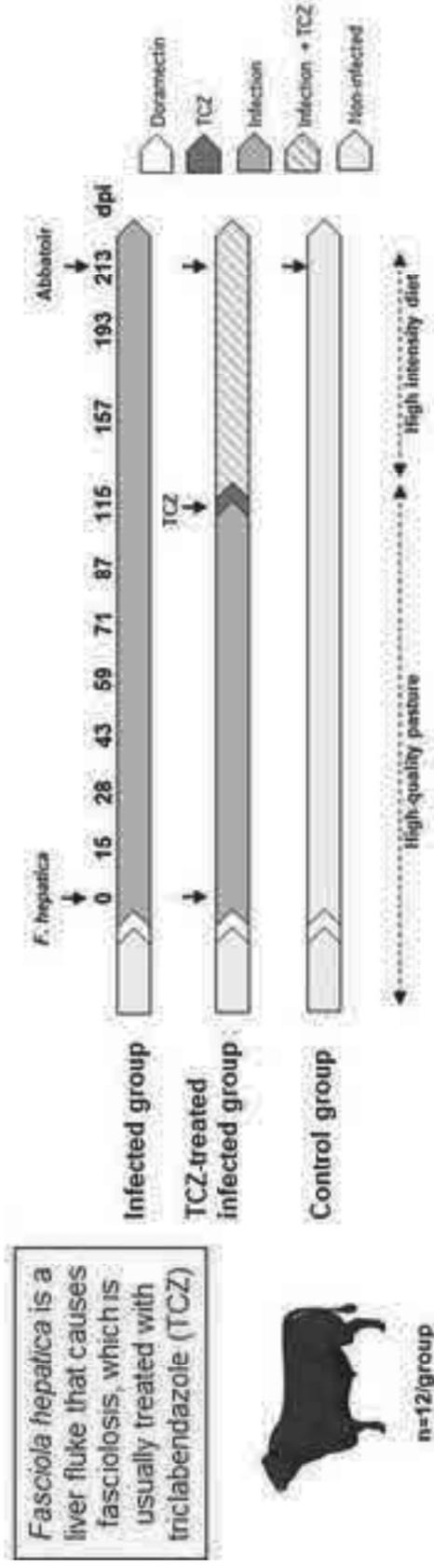
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11 **Highlights**

12

- 13 • *Fasciola hepatica* is a liver fluke that causes fasciolosis, which is usually treated with
14 triclabendazole (TCZ)
- 15 • In this work we exhaustively analysed *F. hepatica* acute and chronic phases of infection
16 in bovines.
- 17 • Increased levels of serum transaminase activity levels were detected in early stages of
18 infection.
- 19 • Circulating eosinophil count and platelecrit were correlated with fluke number in livers
20 from infected bovines.
- 21 • TCZ-treatment partially reduced parasite burden and liver damage.

Liver function markers and haematological dynamics during acute and chronic phases of experimental *Fasciola hepatica* infection in cattle



- Increased levels of serum transaminase activity levels were detected in early stages of infection
- Coprological method was not efficient to early diagnose bovine fasciolosis
- Circulating eosinophil count and platelet count were correlated with fluke number in livers from infected bovines
- TCZ-treatment partially reduced parasite burden and liver damage, but did not avoid liver condemnation

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22

23 **Abbreviations:** TCZ: Triclabendazole; dpi: days post-infection; wpi: weeks post-infection

24 **Abstract**

25

26 *Fasciola hepatica*, a worldwide-distributed liver fluke, is one of the causative agents of
27 fasciolosis, a zoonotic disease that affects livestock and humans. In livestock, fasciolosis causes
28 huge economic losses worldwide, reducing animal fertility, milk production, weight gain and
29 condemnation of livers. In spite of the availability of drugs, such as triclabendazole (TCZ), for
30 the treatment of fasciolosis, they do not necessarily prevent liver damage or parasite reinfection
31 and can eventually increase parasite resistance. The aim of this research was to relate the hepatic
32 function, haematological parameters, leukocyte counts in circulation and parasite egg shedding
33 during *F. hepatica* acute and chronic phases of infection in cattle as well as to determine how
34 these parameters change with TCZ-treatment of chronically infected cattle. Our results show
35 that increased levels of serum aspartate aminotransferase (AST) and gamma
36 glutamyltransferase (GGT) were detected in early stages of the experimental infection.
37 Moreover, high circulating eosinophil count and plateletricit levels were correlated with fluke
38 number in livers from infected cattle. On the other hand, although TCZ-treatment in the chronic
39 phase of infection reduced parasite burden and damage in the liver, it was not able to completely
40 avoid them. In conclusion, our work sheds light into the physiopathological mechanisms
41 induced during fluke infection in cattle, revealing the complexity of the host response to the
42 infection, together with the effects of TCZ-treatment in chronically infected animals.

43

44 **Keywords**

45 *Fasciola hepatica*, fasciolosis, liver, fluke, triclabendazole

46 **1. Introduction**

47 *Fasciola hepatica*, a worldwide-distributed liver fluke, is one of the causative agents of
48 fasciolosis, a zoonotic disease that affects livestock and humans (1). Indeed, the World Health
49 Organization estimates that around 17 million people are infected in more than 70 countries
50 worldwide (2, 3). Furthermore, fasciolosis in livestock causes huge economical losses of
51 approximately 3 billion dollars per year (1, 4, 5) due to reduced fertility and milk production,
52 prevalence of secondary infections, reduced weight gain and condemnation of livers caused by
53 chronic infections (6-8). In cattle, *F. hepatica* causes liver damage due to immature fluke
54 migration and obstruction of the bile ducts by adult parasites (1, 5, 9). A recent review on
55 fasciolosis epidemiology has reported its prevalence in ruminant species, with up to 91% in
56 cattle some regions of Africa and South America (10). In Uruguay, the overall prevalence of
57 bovine fasciolosis in abattoirs was recently reported to be about 34%, while in some territories
58 of the country it increases up to 55%, implicating considerable economic losses considering
59 only liver confiscation (11). Furthermore, this report also concluded that *F. hepatica* infection
60 in Uruguayan cattle is associated with poorer carcass quality parameters and lower weights at
61 slaughter, and the effect on weight differs across age ranges (11). The life cycle of *F. hepatica*
62 is complex as the parasite goes through multiple stages before reaching its adult form and
63 includes an intermediate host, a mud snail of the *Lymnaea* genus, and a definitive host, for
64 instance livestock or humans (3, 5, 12). After ingestion of metacercariae, the infective form of
65 *F. hepatica*, by the mammalian host, excystation occurs and the newly excysted juvenile flukes
66 penetrate the host's intestine wall and reach the liver between 4-6 days. Juvenile flukes then
67 burrow through the liver parenchyma for up to 6 weeks and damage considerable amount of
68 tissue (5). Eventually, the flukes reach the bile ducts, where they become sexually mature and
69 start to shed eggs from 12 weeks post-infection (wpi) (3), although these characteristics can
70 change depending on the mammalian host taking up to 30 weeks for the parasite to complete

71 its life cycle (12, 13). Acute fasciolosis is generally characterized by the presence of immature
72 flukes in the liver that destroy hepatic parenchyma and cause haemorrhage, extensive liver
73 damage with fibrinous deposits on the capsule (13). Then flukes enter the bile ducts. Chronic
74 phase of fasciolosis occurs when flukes, once inside the bile ducts, extensively ingest blood,
75 damage the mucosa and cause cirrhosis, anaemia and hypoproteinaemia (13, 14). The damaged
76 bile ducts become enlarged, or even cystic, and have thickened, fibrosed walls and, in cattle,
77 they are usually calcified (13, 14). Chronic infection in cattle is usually analysed after 12 and
78 up to 14 wpi (15, 16).

79

80 Triclabendazole (TCZ), a benzimidazole derivative, is usually used for the treatment of
81 fasciolosis. However, this drug does not necessarily prevent liver damage induced by the
82 parasite or parasite reinfection (17). Furthermore, although several studies have assessed the
83 efficacy of TCZ against *F. hepatica*, it was determined by assessing post-treatment reduction
84 in the faecal egg count (18-20), a parameter that is not necessarily correlated with the liver fluke
85 burden (21, 22). Indeed, the detection of parasite egg shedding in faeces does not reflect parasite
86 infection, since parasite eggs cannot be detected during the long prepatent period of 11-12
87 weeks post-infection and their shedding is discontinuous (21). Interestingly, a coproantigen
88 ELISA test was demonstrated to be more sensitive than faecal egg count in experimental-
89 infected cattle (20). Also, this study analysed the TCZ treatment on experimentally-infected
90 cattle although no correlation with liver damage was included (20). Furthermore, while the
91 detection of specific antibodies is more sensitive and sooner than coproantigen ELISA test, they
92 persist after treatment with TCZ, while both coproantigen ELISA and faecal egg counts
93 returned to negative status (20). In fact, the antibody response to infection is frequently
94 associated with exposure to the infection and may not be useful for the diagnosis of natural *F.*

95 *hepatica* active infection (23, 24). Last, reports of resistance to TCZ are increasing (25),
96 evidencing one of the major drawbacks nowadays in the treatment of this disease.

97

98 The characterization of the pathological events induced by *F. hepatica* infections turns out to
99 be difficult when working in naturally infected cattle, because animals are permanently
100 challenged with parasite ingestion and the effects of the infection are deduced from the clinical
101 signs of the animals or the liver damage at slaughter. Different works have been carried out to
102 characterize damage caused by the parasite in the livers both in naturally and experimentally
103 infected cattle (16, 20, 23, 24, 26-31), although correlations with hepatic function and TCZ-
104 treatment for long periods after infection are scarce. The present work relates hepatic
105 dysfunction, together with haematological and circulating leukocyte parameters with liver
106 damage caused by *F. hepatica* in cattle through both the acute and chronic phases of the
107 infection during 30 wpi and to determine how these parameters change with TCZ-treatment of
108 chronically infected cattle.

109 2. Materials and Methods

110

111 2.1. Parasite experimental infection

112 Animal handling and experiments were carried out in accordance with strict guidelines and
113 regulations from the National Committee on Animal Research (Comisión Nacional de
114 Experimentación Animal, CNEA, <http://www.cnea.gub.uy/>, National Law 18.611, Uruguay),
115 according with the ARRIVE guidelines and the National Institutes of Health guide for the care
116 and use of Laboratory animals (NIH Publications No. 8023, revised 1978). All procedures
117 involving animals were approved by INIA's Committee on Animal Research (CNEA Protocol
118 Number: 0009/11). Eighteen- to twenty-four-month-old male Aberdeen Angus steers (mean
119 body weight $421.88 \pm 17,7$ kg) were used in this experiment. Animals were negative to *F.*
120 *hepatica* exposure determined by the sedimentation technique (32) in three previous
121 consecutive tests (every 4-5 weeks) during 4 months before experimental infections. The
122 animals were drenched on arrival with Dectomax® 1% (Doramectin 1g/100 ml) with the
123 recommended dose (1 ml/50 Kg body weight) and remained free of gastrointestinal parasites
124 (as determined by the modified McMaster technique (33) until *F. hepatica* experimental
125 infection. Steers were kept outdoors and fed with high-quality pasture and water *ad libitum* at
126 the experimental station of INIA La Estanzuela, Colonia, Uruguay. Animals were divided into
127 three groups of 12 animals according to matched age and weight: i) infected, ii) infected and
128 TCZ-treated, and iii) control groups (Figure 1). Experimental infections (n=24) were carried
129 out with 500 TCZ-sensitive metacercariae (Ridgeway Laboratories, England) per animal,
130 spread in saline solution, inserted into gelatine capsules (Torpac®) and delivered orally using
131 a dosing gun. As control, non-infected steers (n=12) were maintained under the same conditions
132 of infected animals during the experiment in a separate space. After 115 days post-infection
133 (dpi), the second group of animals was treated with TCZ (12 mg/kg, Fasimec®, Novartis)

134 according to the recommendations of the drug supplier laboratory. One week after, animals
 135 were transported and fed with high-energy diets at the intensive animal farming facility
 136 (feedlot) of Marfrig Group in Fray Bentos, Río Negro, Uruguay. Establishments where animals
 137 were kept were free of snails. At day 213 post-infection animals were transported to an abattoir
 138 (Marfrig S. A. Tacuarembó) and sample collection, liver examination and fluke recovery were
 139 carried out (Figure 1).

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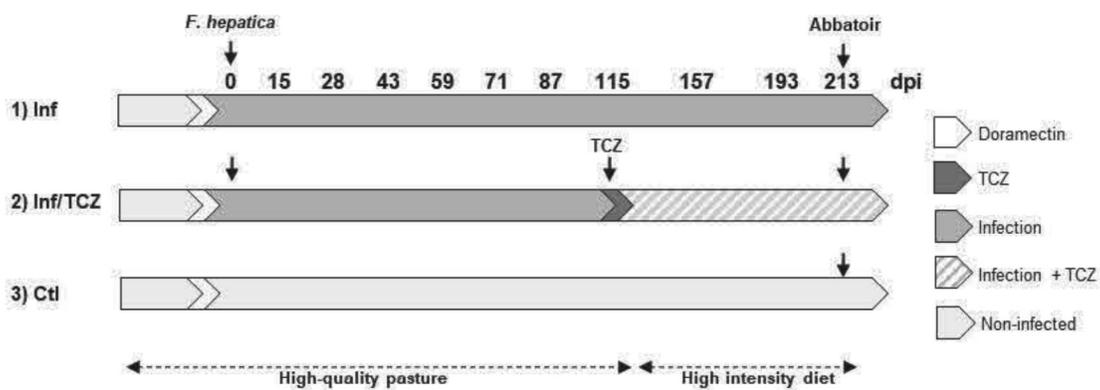
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Figure 1. *F. hepatica* experimental infection timeline. Groups of 12 Aberdeen Angus steers were used per group. Animals from all groups were drenched with Doramectin to treat gastrointestinal parasite infection. Group 1 and 2 were infected with 500 *F. hepatica* metacercariae, while group 3 (control) remained non-infected. Animals were fed with high-quality pasture until day 122. At day 115 post-infection animals from group 2 were treated with TCZ. At 122 dpi animals were transported and fed with high-energy diet at the intensive animal farming facility until slaughter at the abattoir.

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2.2. Collection of samples

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Animals were bled for complete hemogram analysis before the infection (day 0) and after 43, 87, 157 and 213 dpi. Faecal and blood samples were collected before (day 0) and at 15, 28, 43, 59, 71 and 87 dpi (every approximately 15 days) and at 115, 157, 193 and 213 dpi (every approximately 30 days) during the acute and chronic phases of infection, respectively (Figure 1). *F. hepatica* egg counts per gram (EPG) in faeces were determined individually using the

158 sedimentation technique (32) before the infection (day 0) and at 15, 28, 43, 59, 71, 87, 115,
159 157, 193 and 213 dpi. Chronic infection was determined after 15 weeks of parasite infection.

160

161 *2.3. Fluke Recovery and liver damage*

162 Livers, bile ducts and gallbladders were examined for the presence of *F. hepatica* parasites as
163 previously described (34). Fluke recovery was determined by the number of adult flukes from
164 each processed liver. Livers were weighed and given a score according to the macroscopic liver
165 damage (ranging from 0 to 3) at the time of dissection by a veterinary pathologist, where 0
166 represented absence of tissue necrosis and liver damage, 1 represented less than 30% (slight),
167 2 between 30 and 70% (moderate), and 3, more than 70% (severe) of liver necrosis and damage
168 at the tissue surface. Fibrosis, capsule, consistency, calcification in the biliary ducts and
169 abscesses, as well as atrophy of hepatic lobes were also determined by a similar score: 0
170 (absence), 1 (slight), 2 (moderate) and 3 (severe) (35).

171

172 *2.4. Hemogram and circulating leukocyte counting*

173 Blood samples were processed for assessment of haematocrit mean corpuscular volume (MCV)
174 and mean platelet volume (MPV) using the Counter 19 from Weiner lab. Leukocyte total counts
175 were determined in a microscope using a Neubauer Haemocytometer. Thin smears were
176 prepared on individually labelled microscope slides using one or two drops of blood. Smears
177 were air-dried, fixed with absolute methanol, and stained with Giemsa to analyse leukocyte and
178 lymphocyte counts. Sera were collected for the quantification of transaminase activity levels.

179

180 *2.5. Hepatic synthetic functions and transaminase determination*

181 Serum levels of albumin, total protein and hepatic enzyme activity were determined using an
182 automatized spectrophotometer (Dimension RxL Max integrated chemistry system; Siemens).
183 Aspartate aminotransferase (AST), Alanine aminotransferase (ALT) and Gamma

184 glutamyltransferase (GGT) activities were expressed as international units per litre (IU/l), Total
185 Bilirubin (TBil) and Direct Bilirubin (DBil) determinations were expressed in mg/dl and
186 Albumin (ALB) and Total Protein (TP) determinations were expressed in g/dl.

187

188 *2.6. Statistical analysis*

189 Results were analysed using GraphPad Prism software 6.0 (GraphPad Software, San Diego,
190 CA) by non-parametric (with Krustal-Wallis test) or parametric one- or two-way ANOVA
191 followed by the Tukey test for multiple comparisons, according to the experiment. Asterisks
192 represent statistically significant differences as follows: * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$ and
193 **** $p < 0.0001$.

194 **3. Results**

195

196 *3.1. Characterization of acute and chronic stages of F. hepatica experimental infection in steers*

197 To study and characterize the local and physiopathological effects during both acute and
198 chronic *F. hepatica* infection in cattle, we experimentally infected steers with 500 *F. hepatica*
199 metacercariae per animal. After experimental infection, animals showed an increase in faecal
200 EPG from day 87, although this increase was significantly higher only after 115 dpi (Figure
201 2A). As expected, non-infected animals did not display detectable EPG in faeces during the
202 whole experiment (Figure 2A). Interestingly, the increase in EPG in *F. hepatica*-infected
203 animals varied during the infection period: sustained faecal EPG were constant between days
204 115 and 193, while they decreased at day 213, although they remained significantly increased
205 with respect to control steers (Figure 2A).

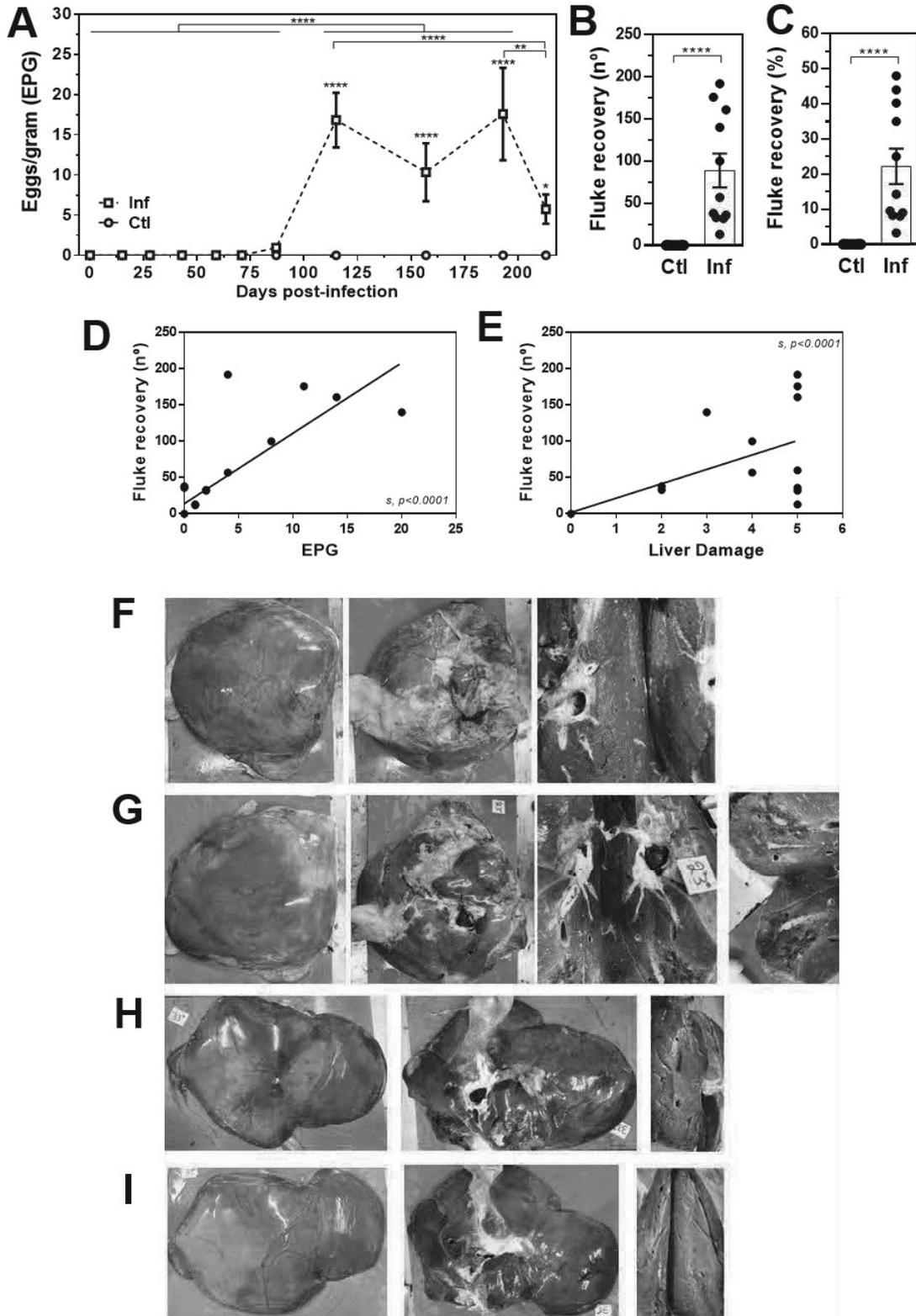
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207 The number of recovered flukes in the livers from infected animals analysed at slaughter was
208 heterogeneous, with a mean of 89 flukes per liver from infected steers, while non-infected cattle
209 did not show any flukes in livers (Figure 2B). Moreover, only between 5 to 40% of flukes were
210 recovered in infected animals with respect to the initial number of metacercariae inoculated in
211 these animals (Figure 2C). Last, the number of recovered flukes was significantly associated
212 with faecal EPG at day of slaughter (Figure 2D). Fluke recovery number was also significantly
213 correlated with liver damage (Figure 2E).

214

215 Last, livers from infected animals were characterized (Figure 2F and G) by a high degree of
216 fibrosis, right lobe hypertrophy, hyperplasia of bile ducts and a pale colour comparing to livers
217 from control animals (Figure 2H and I, and Table I).

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Figure 2. Fluke recovery from *F. hepatica* -infected animals significantly correlates with faecal parasite eggs/gram (EPG). A) EPG in faeces from infected (squares) and non-infected animals (circles). Animals were orally infected with 500 metacercariae and EPG were determined by the sedimentation technique. Only the infected group and control groups are shown (n=12). B-C) Fluke recovery from infected cattle at time of sacrifice both in number of flukes (B) or percentage in relation to the initial number of metacercariae used to infect animals (C). Asterisks indicate statistically significant differences between infected and control animals calculated with two-way Anova followed by a Tukey multiple comparison test (A) or non-parametric one-way Anova with Krustal-Wallis test (B-C): *p<0.05, **p<0.01, ***p<0.001, ****p<0.0001. D-E) Significant linear regression correlation between fluke recovery and EPG (D) and liver damage (E). F-G) Representative livers from infected that had 13 (F) and 57 (G) flukes in the liver. H-I) Representative livers from control animals.

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Table I. Macroscopic characteristics of livers from experimentally infected steers.

Groups	Score	LD	F	RLH	LLA	HBD	RB	CT	Cal	Con
INF	0	0 (0)	0 (0)	2 (17)	0 (0)	0 (0)	2 (17)	2 (17)	1 (8)	1 (8)
	1	1 (8)	1 (8)	0 (0)	3 (25)	2 (17)	0 (0)	4 (33)	1 (8)	0 (0)
	2	2 (17)	3 (25)	6 (50)	4 (33)	1 (8)	8 (67)	6 (50)	4 (33)	3 (25)
	3	9 (75)	8 (67)	4 (33)	5 (42)	9 (75)	2 (17)	0 (0)	6 (50)	8 (67)
INF /TCZ	0	0 (0)	2 (17)	8 (67)	0 (0)	1 (8)	7 (58)	7 (58)	5 (42)	5 (42)
	1	9 (75)	1 (8)	1 (8)	1 (8)	5 (42)	2 (17)	3 (25)	2 (17)	1 (8)
	2	2 (17)	6 (50)	3 (25)	7 (58)	4 (33)	2 (17)	2 (17)	3 (25)	3 (25)
	3	1 (8)	3 (25)	0 (0)	4 (33)	2 (17)	1 (8)	0 (0)	2 (17)	3 (25)
Control	0	12 (100)	12 (100)	12 (100)	12 (100)	12 (100)	12 (100)	12 (100)	12 (100)	12 (100)
	1	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
	2	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
	3	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)

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231

The number of animals together with the % (between brackets) is indicated for each score: n (%). LD: liver damage; F: fibrosis; RLH: right lobe hypertrophy; LLA: left lobe atrophy; HBD: Hyperplastic bile ducts; RB: round borders; CT: Capsule thickening; Cal: calcification; Con: consistency.

232

233 3.2. *Increased levels of serum AST and GGT are detected in early stages of infection*

234 To analyse the hepatic synthetic function of infected animals, we studied the production ratio
235 between albumin and total protein, bilirubin, and different transaminase activities in sera from
236 infected and control steers. Infection was associated with a decrease of albumin/total protein
237 production from 71 to 115 dpi (Figure 3A). These differences became clearer when the
238 albumin/total protein production ratio by the liver was normalized to control animals (Figure
239 3B). Direct bilirubin levels were significantly increased both in the acute and early chronic
240 stage of the infection in relation with non-infected steers (Figure 3C). Of note, a statistical
241 difference was detected on bilirubin levels in both groups along the infection, probably due to
242 seasonal or nutritional changes related with the maintenance of animals.

243

244 In order to expand the study of the pathological effect induced by *F. hepatica* in bovine livers,
245 we also analysed AST, ALT and GGT activities in sera from infected and control animals. As
246 indicated in Figures 3D to 3F, an increase of the three studied enzyme activities in sera of
247 infected animals was detected in relation to sera from control steers. However, the increase was
248 different for the three analysed enzyme activities. AST activity in sera was increased in infected
249 steers both in the acute and chronic phases of infection (between 28 and 157 dpi) with regard
250 to control animals (Figure 3D). On the other hand, ALT activity significantly increased only
251 between 71 and 87 dpi (Figure 3E). Last, GGT activity in sera of infected animals increased at
252 day 71 after infection, as ALT, although it continued significantly increased until animal
253 slaughter (Figure 3F). AST enzymatic activities in serum significantly correlated with both
254 faecal EPG and fluke recovery in livers (Figure 3G).

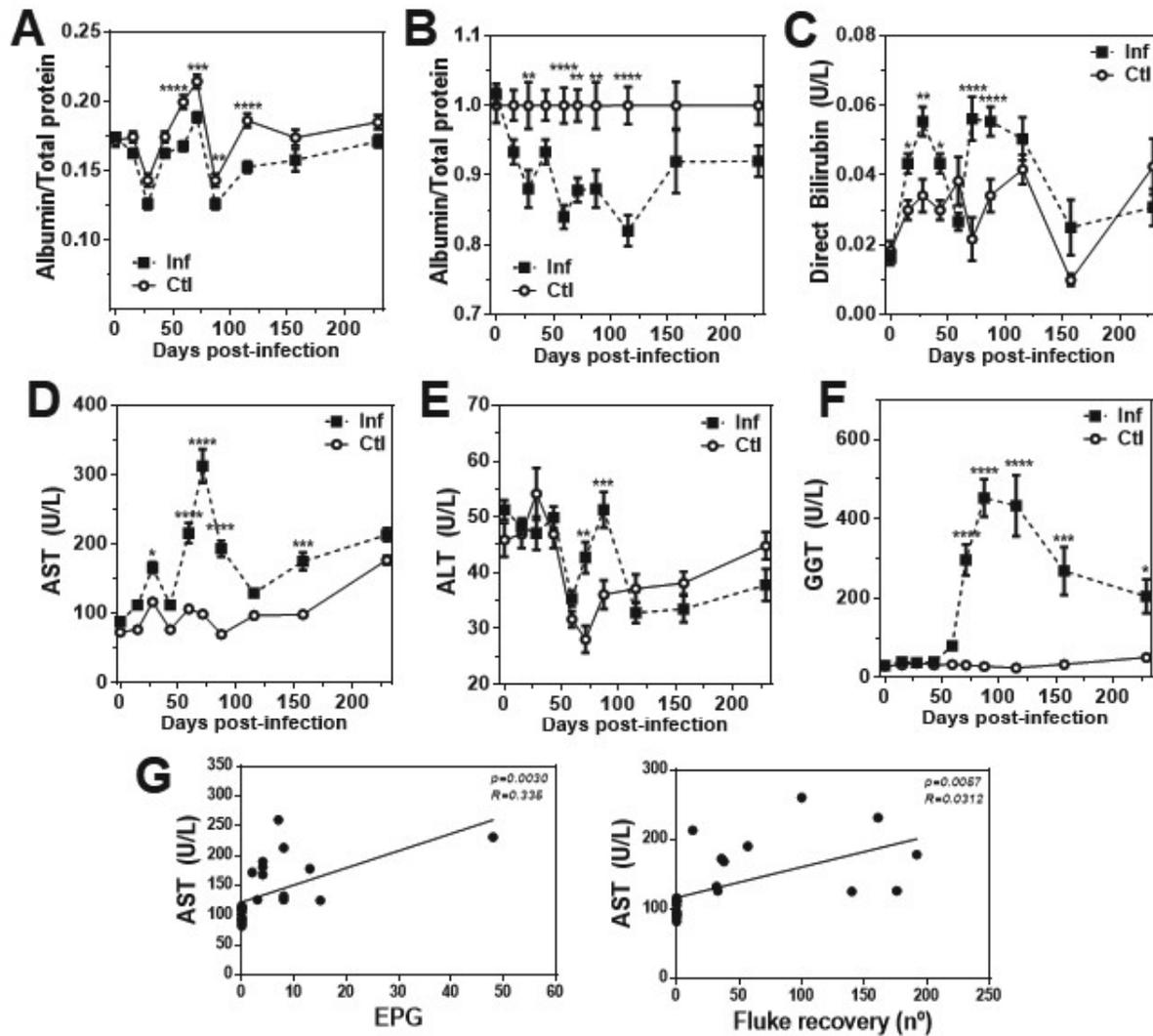


Figure 3. Infected animals present a compromised liver function and hepatic damage. A) Albumin and total protein ratio determined in U/L in sera of infected and control cattle. **B)** Normalised albumin and total protein ratio in regard to the control group of infected and control cattle. **C)** Direct Bilirubin detection in U/L of infected and control cattle. **D)** aspartate transaminase (AST) serum levels. **E)** Alanine transaminase. (ALT) serum levels. **F)** Gamma-glutamyl transferase (GGT) serum levels. Only the infected group and control groups are shown (n=12). Asterisks indicate statistically significant differences between infected and control animals calculated with two-way Anova followed by a Tukey multiple comparison test: * $p<0.05$, ** $p<0.01$, *** $p<0.001$, **** $p<0.0001$. **G)** Significant linear regression correlation between AST levels and EPG (left) at day 157 post-infection or fluke recovery (right).

255

256 *3.3. High circulating eosinophil counts are correlated with fluke number in livers from infected*

257 *cattle*

258 Considering the hematophagous characteristic of the parasite, we analysed red blood cells and
259 haemoglobin from infected and control groups of animals. From a general point of view red
260 blood cell number (RBC), total haemoglobin (Hb) and haematocrit (HCT) remained constant
261 during the infection in steers, although a significant increase in HCT was detected at 87 dpi
262 (Figure 4A to C), revealing no signs of parasite associated anaemia. Other related parameters
263 such as mean platelet volume (MPV) or mean corpuscular volume (MCV) of red blood cells
264 did not change during the course of the infection (not shown). On the other hand, platelet
265 number (PLT) and plateletcrit (PCT) increased in infected animals during the course of
266 infection (Figure 4D and E, respectively), while mean platelet volume (MPV) and platelet
267 distribution width (PDW) did not show any significant difference between infected and control
268 steers (Figure 4F and G, respectively). Of note, only fluke recovery number, and not faecal
269 EPG, was significantly associated with PCT (Figure 4H). These results indicate that an increase
270 in platelets is related with *F. hepatica* infection, which could trigger liver fibrosis and
271 regeneration (36).

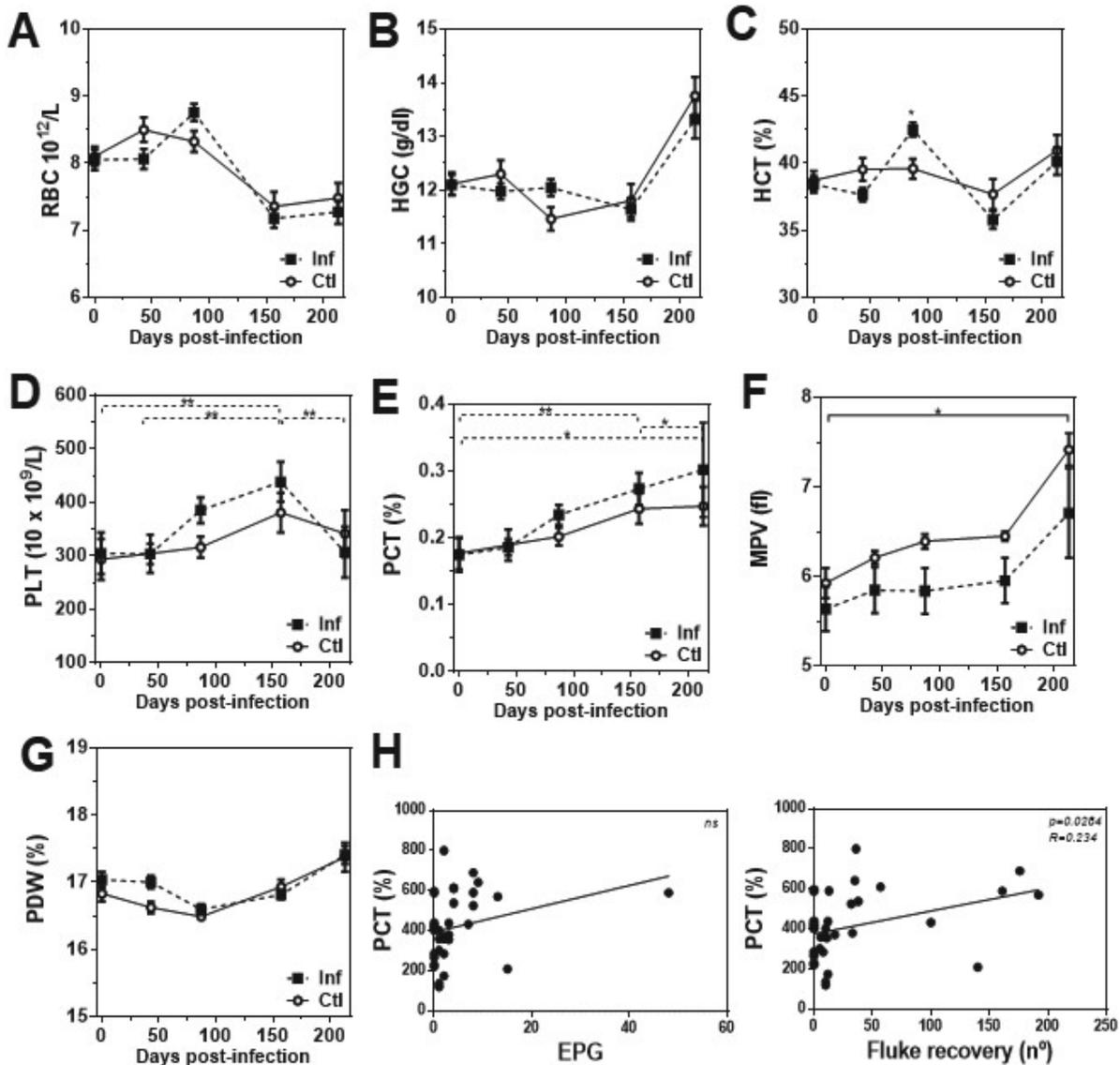


Figure 4. Infected animals do not present any signs of anaemia associated with *F. hepatica* infection while platelet number and plateletcrit increase during *F. hepatica* infection. A-C) Red blood cells (RBC, A), total haemoglobin (Hb, B) and haematocrit (HCT, C) were determined using an automated counter in infected and control groups of steers. E-G) Platelet (PLT, D), Plateletcrit (PCT, E), Mean Platelet Volume (MPV, F) and Platelet distribution width (PDW, G) were determined using an automated counter in infected (black squares) and control groups (open circles) of animals. Dotted and continuous lines indicate significant differences between different time points in the infected and control groups, respectively. Only the infected group and control groups are shown (n=12). Asterisks indicate statistically significant differences between infected and control animals calculated with two-way Anova followed by a Tukey multiple comparison test: *p<0.05, **p<0.01, ***p<0.001, ****p<0.0001. H) Significant linear regression correlation between PCT (%) and EPG (left) at day 157 post-infection or fluke recovery (right).

273 Steers presented similar levels of circulating leukocytes during experimental *F. hepatica*
274 infection, although, interestingly, in the acute and early chronic stages of the infection control
275 animals increased their number while those from infected steers did not change over time
276 (Figure 5A). A similar result was found for blood lymphocytes, which decreased at 49 dpi in
277 infected steers (Figure 5B). On the other hand, monocytes and neutrophils augmented after day
278 87 in the non-infected group of animals, while infected steers remained stable throughout the
279 whole infection period (Figure 5C and D, respectively). Last, granulocyte frequency, such as
280 basophils or eosinophils in circulation significantly increased upon infection. With regard to
281 basophils, infected animals presented two peaks: one at the acute and the other at the chronic
282 phases of infection, while non infected animals remained unchanged during the period of study
283 (Figure 5E). As expected, eosinophils largely increased from 48 dpi remaining high during both
284 the acute and early chronic phases of the infection (Figure 5F). Nevertheless, we could not
285 detect any difference between the frequency of eosinophils from infected and control animals
286 at day of slaughter (Figure 5F). On the other hand, although no significant correlation between
287 the frequency of circulating eosinophils and faecal EPG was detected at 43 dpi, there was a
288 significant positive correlation between the frequency of eosinophils at the acute phase of the
289 infection and fluke recovery number in livers (Figure 5G).

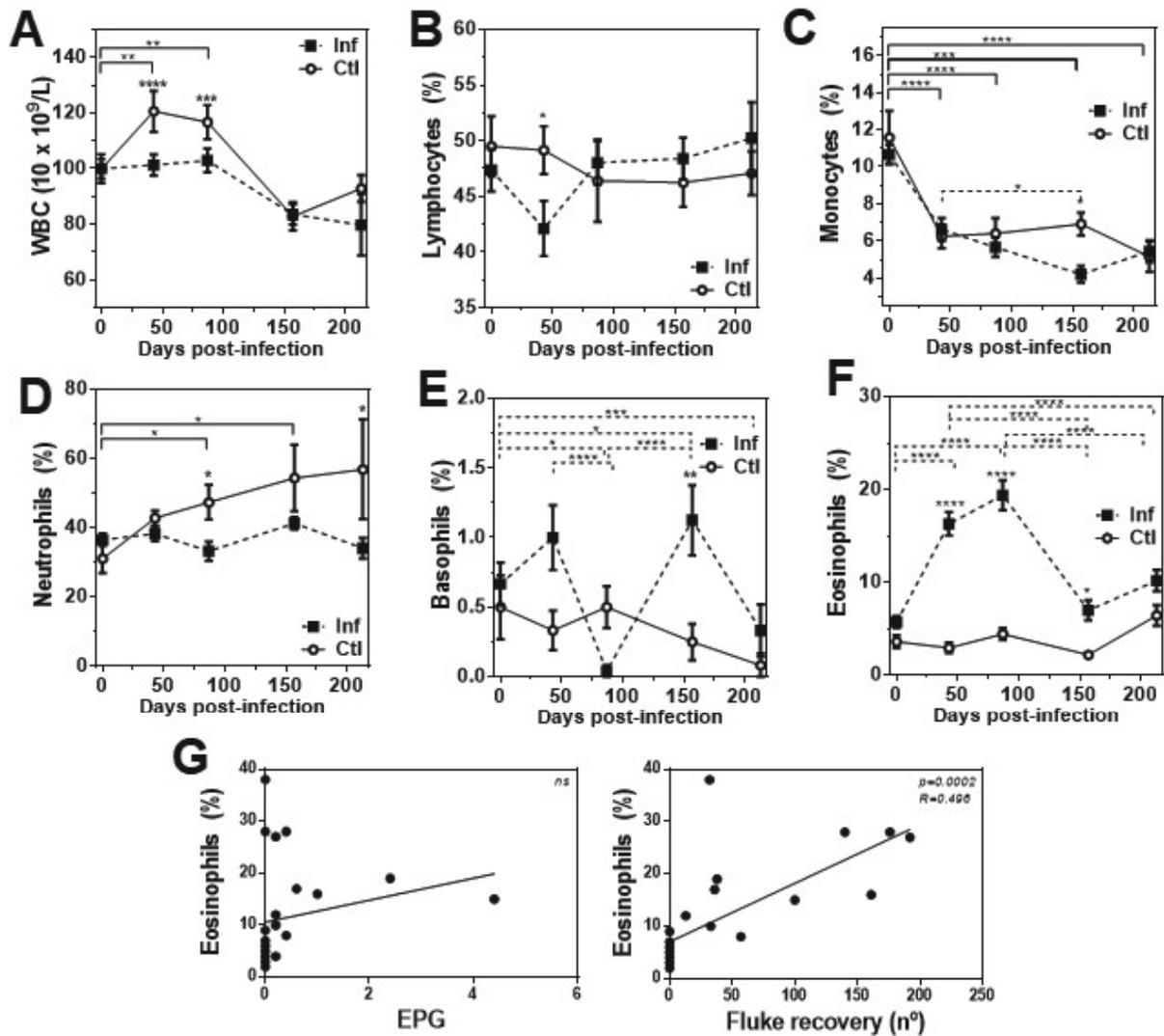


Figure 5. *F. hepatica* infection is associated with a decrease in white blood cells but an increment in eosinophils. White blood cells (WBC, A), lymphocytes (B), monocytes (C), neutrophils (D), basophils (E) and eosinophils (F) in blood were detected in blood smears prepared on individually labelled microscope slides and stained with Giemsa. Dotted and continuous lines indicate significant differences between different time points in the infected and control groups, respectively. Asterisks indicate statistically significant differences between infected and control animals calculated with two-way Anova followed by a Tukey multiple comparison test: * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$, **** $p < 0.0001$. G) Linear regression correlation between eosinophils (%) and EPG (left) at 43 dpi or fluke recovery (right).

291 3.4. Treatment with TCZ does not completely eliminate hepatic flukes or abrogates liver
 292 damage

293 In order to evaluate the effect of a commonly used anti-helminth drug on parasite infection as
 294 well as on liver damage and dysfunction, 12 out of the 24 infected steers were treated with TCZ
 295 in the chronic phase of *F. hepatica* infection (at 115 dpi). The TCZ-treatment induced, as
 296 expected, a considerable decrease in faecal EPG from 157 dpi with regard to infected animals
 297 (Figure 6A), which remained unchanged as the control group until the end of the study. TCZ-
 298 treated *F. hepatica* infected animals showed a reduction between 10 and 15% of faecal EPG in
 299 comparison with the initial number of EPG before TCZ treatment (Figure 6B). However, TCZ-
 300 treatment of infected steers did not completely eliminate all flukes in the biliary tracts of livers
 301 since a significant increase in fluke recovery (6 to 35 flukes) was determined in comparison to
 302 control animals, although their number was significantly reduced compared to the non-treated
 303 *F. hepatica* steers (32 to 192 flukes) (Figure 6C and Table II). Fluke recovery in infected steers
 304 varied from 3 to 38% in relation to the initial inoculation of 500 metacercariae (100%), while
 305 TCZ-treatment of infected animals reduced this number to 1 to 7% (Figure 6D and Table II).
 306 However, the efficiency of TCZ-treatment was from 5 to 39% taking into account the mean of
 307 fluke recovery from infected animals (Figure 6E and Table II).

308

309 **Table II.** Fluke recovery from *F. hepatica*-infected steers with or without TCZ-treatment.

	Fluke recovery (n°)	Fluke recovery (%)	Fluke recovery (%) for TCZ efficiency*
<i>F. hepatica</i>	88.1 (32-192)	17.8 (3-38)	100 (15-198)
<i>F. hepatica</i> + TCZ	12.3 (6-35)	2.5 (1-7)	13.8 (5-39)

310 *To calculate TCZ efficiency the n° of flukes (88.1, column 1) was considered as 100% (column 3).

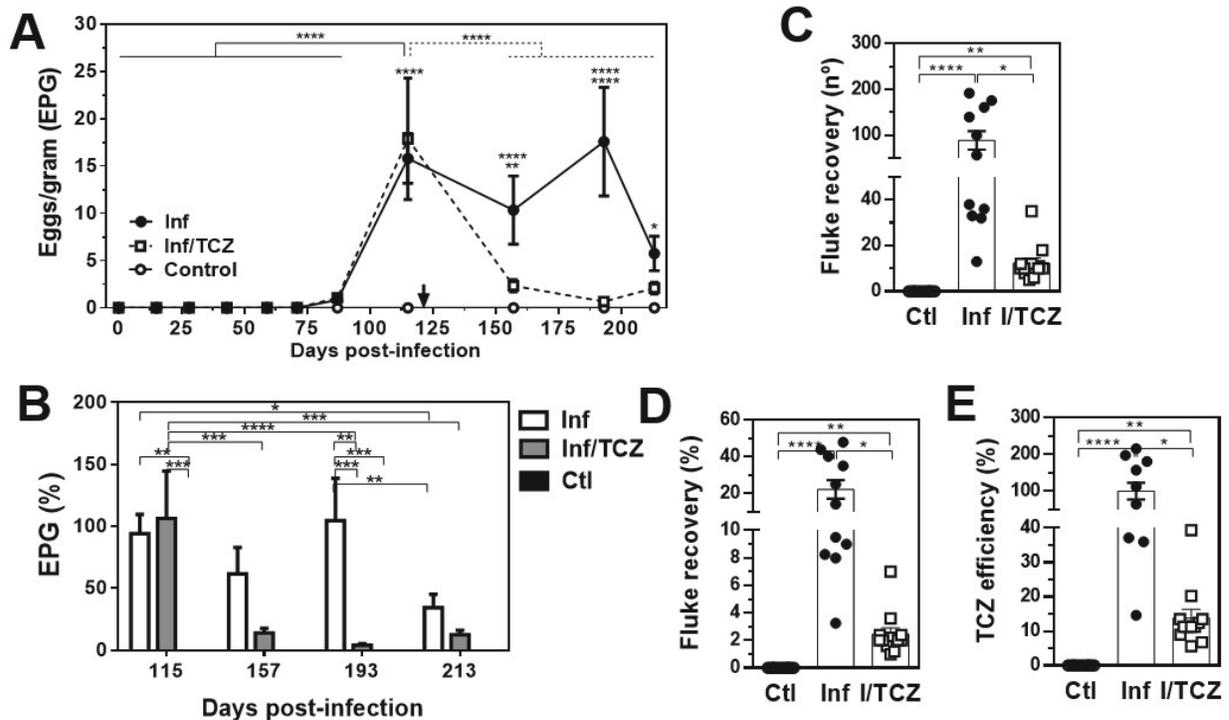


Figure 6. Treatment with triclabendazole (TCZ) decreases fluke recovery although does not completely eliminate hepatic damage. A) EPG from infected (close squares), TCZ-treated infected (open squares) and non-infected animals (open circles). Animals were orally infected with 500 metacercariae and EPG were determined by the sedimentation technique. The arrow indicates the moment of TCZ administration (115 dpi). B) EPG percentage from infected cattle with or without treatment with TCZ. Number of recovered flukes from livers of infected cattle with or without TCZ-treatment at time of sacrifice (213 dpi). D) Percentage of recovered flukes considering the initial number of metacercariae administrated as 100% (500). E) TCZ efficiency calculated with respect to non-treated infected animals. The mean of recovered flukes from infected animals was considered as 100% (88.1 flukes). Infected group, TCZ-treated/infected animals and control groups are shown (n=12/group). Asterisks indicate statistically significant differences between infected and control animals calculated with non-parametric two-way Anova followed by a Tukey multiple comparison test (A and B) or non-parametric one-way Anova with Krustal-Wallis test (C-E): *p<0.05, **p<0.01, ***p<0.001, ****p<0.0001.

311

312

313 In order to analyse the type and degree of liver lesions associated with TCZ-treatment of *F.*

314 *hepatica*-infected steers, we developed a score to quantify damage, fibrosis and lobe

315 hypertrophy, as explained above. Infected animals showed significantly higher hepatic damage

316 (Figure 7A) and fibrosis (Figure 7B) than controls. TCZ-treated infected animals also showed

317 higher levels of liver damage and fibrosis than control steers, although they were lower than

318 non-treated animals (Figure 7A and B). Of note, TCZ-treatment completely abrogated the

319 increase of liver mass (Figure 7C) and right hepatic lobe hypertrophy (Figure 7D) induced by

320 the infection (Figure 7E and Table I). Interestingly, both liver damage (Figure 7F) and fibrosis
321 (Figure 7G) were significantly correlated with the number of recovered flukes.

322

323 Last, we analysed how the hepatic function and circulating leukocytes were affected by TCZ-
324 treatment of infected animals. As shown in Figure 7H, TCZ-treated animals did not show any
325 significant differences in the albumin/total protein ratio in comparison with non-treated infected
326 animals. However, only infected animals showed a significant decrease in albumin/total protein
327 levels compared with the control group (Figure 7H). In addition, both GGT and AST activity
328 levels in serum from infected animals remained significantly higher than TCZ-treated infected
329 and control groups (Figure 7I). Finally, no significant changes in circulating neutrophils,
330 monocytes, eosinophils or basophils were associated with TCZ-treatment of infected animals
331 (Figure 7J). Altogether these results indicate that, although TCZ-treatment reduces parasite
332 burden and damage in the liver while it is not able, however, to completely avoid them.

333

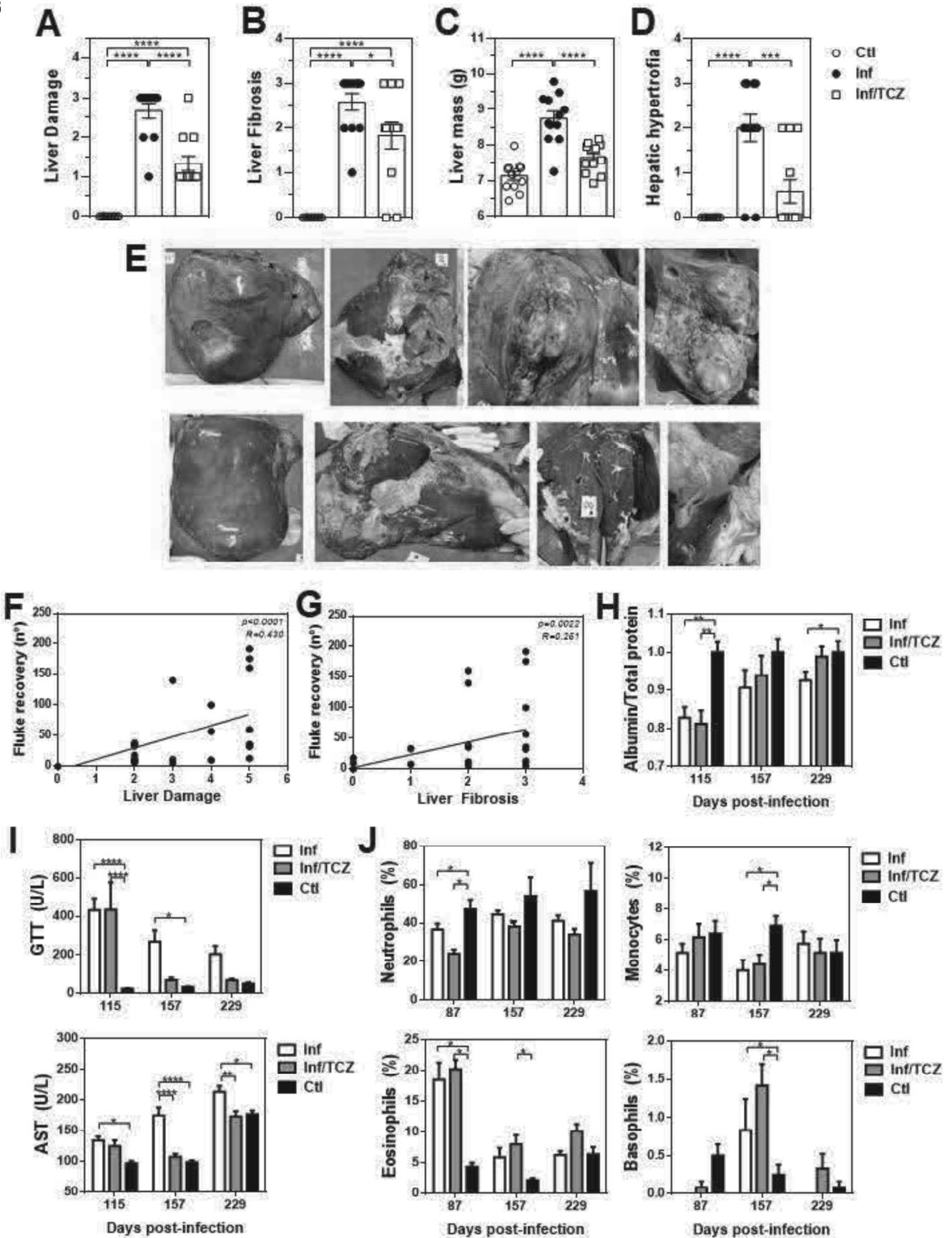
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337 Figure 7 in next page

Figure 7. TCZ-treated cattle present liver damage and liver fibrosis, which correlates with fluke recovery. Liver damage (A), fibrosis (B) and right lobe hypertrophy (C) was determined by a veterinary anatomopathologist anatomic. Livers were also weighted (D). Significant linear regression correlation between fluke recovery and liver damage and EPG (E) or fibrosis (F) of both infected and infected/TCZ treated groups. G) Albumin and total protein ratio determined in U/L in sera from *F. hepatica* infected animals with or without TCZ-treatment and control steers at 115, 157 and 213 dpi. H) Gamma-glutamyl transferase (GGT) and aspartate transaminase (AST) plasmatic levels. Percentage of neutrophils, monocytes, basophils and eosinophils (I) in blood at 115, 157 and 213 dpi were detected in blood smears prepared on individually labelled microscope slides and stained with Giemsa. Infected group, TCZ-treated/infected animals and control groups are shown (n=12/group). Asterisks indicate statistically significant differences between infected and control animals calculated with one-way Anova (A-D) or two-way Anova followed by a Tukey multiple comparison tests (G-I): *p<0.05, **p<0.01, ***p<0.001, ****p<0.0001. J-K) Representative livers from TCZ-treated infected animals that had 10 (J) and 11 (K) flukes in the liver.



339 **4. Discussion**

340 This work deeply characterized liver function markers, haematological and circulating
341 leukocyte dynamics in 30 weeks of an experimental *F. hepatica* infection in steers, together
342 with the impact of TCZ-treatment in liver damage during the course of chronic experimental
343 parasite infection.

344

345 Faecal EPG from infected animals varied during the infection process and only started to
346 significantly increase after 16 weeks from infection (wpi), while it decreased at time of
347 slaughter (30 wpi). It is already known that faecal EPG, although used as the gold standard
348 assay, has a low sensitivity in cattle since it can only detect patent infection and also because
349 egg shedding is discontinuous (21, 37). However, it is cost effective, simple and does not
350 require specialized instrumentation (38, 39). Surprisingly, previous reports in cattle indicate
351 that faecal EPG can be detected from 10–11 wpi (40), much earlier than what it was found in
352 our experimental infection (16 wpi). We also found great heterogeneity in EPG and recovered
353 flukes from livers in the infected group, although infections were carefully handled and
354 administration of metacercariae in capsules was successful. Thus, altogether, these facts
355 highlight the drawbacks of coprological methods for fasciolosis diagnosis (38) and the need of
356 alternative diagnostic methods. Indeed, an integral diagnostic can be more reliable, especially
357 those that combine both coprological and immunological methods including antigen detection
358 and serological assays (38, 41, 42).

359

360 The heterogeneity found in faecal EPG was also correlated with fluke recovery from livers from
361 infected animals demonstrating that individual genetic background of selected animals and/or
362 the experimental infection procedure might affect parasite survival in the infected animals. This
363 fact is relevant, considering that we analysed an experimental infection with minimal

364 variability, as compared to natural infections, in which cattle might be permanently challenged
365 with metacercariae present in the pastures, and where acute or chronic phase of the disease is
366 difficult to determine since immature versus mature fluke coexist in cattle (31).

367

368 Both protein and bilirubin determination in sera allowed the assessment of hepatic dysfunction
369 in protein synthesis and possible cholestasis in the livers of infected animals, especially in the
370 acute (until 10 wpi) and early chronic phases of the infection (from 10 to 16 wpi). However,
371 these differences were not detected after 16 wpi, indicating that liver regeneration can take place
372 to supply adequate protein levels. Interestingly, infected-steers presented an increase in both
373 platelet number and plateletcrit at 22 wpi which could be promoting liver fibrosis and
374 regeneration in the chronic phase of *F. hepatica* infection. Indeed, it has already been
375 demonstrated that platelets improve liver regeneration directly on hepatocytes, although their
376 role in liver diseases is still controversial (36).

377

378 This study also demonstrates that the analysis of different transaminase activities in sera from
379 *F. hepatica*-infected animals reveal different increased kinetic profiles, as already suggested in
380 previous studies (26-28). The different profile obtained for the studied transaminases may be
381 related with their organ-specific expression or function according to the hepatic dysfunction or
382 biliary tract obstruction. In fact, ALT is the only enzyme produced by hepatocytes, being more
383 specific than AST and GGT and results to be a very specific marker of hepatocellular injury
384 (43). However, its expression can fluctuate during the day and according to the level of
385 strenuous exercise (43). This latter fact might explain the differences obtained for both infected-
386 and control groups of animals during the studied period of time. On the other hand, AST and
387 GGT can be produced by other organs, such as the kidney, apart from the liver. Nevertheless,
388 AST usually rises in conjunction with ALT to indicate hepatocellular injury, while high serum

389 GGT activity suggests biliary tract obstruction (cholestasis) (43). Furthermore, this study
390 indicates that *F. hepatica* infection was associated with an early increase (at 4 wpi) of AST in
391 sera, while both GGT and ALT increased levels were detected after 10 wpi suggesting hepatic
392 dysfunction likely due to liver damage in the parenchyma induced by the juvenile flukes, which
393 can be observed up to 6 wpi (5). On the other hand, increased levels of GGT were detected after
394 10 wpi and lasted the whole period of infection (up to 30 wpi), indicating cholestasis associated
395 with the chronic phase of infection. Importantly, a recent report using a transcriptomic approach
396 analysing immune responses in peripheral blood mononuclear cells of experimentally infected
397 cattle demonstrated that gene pathways for hepatic fibrosis and cholestasis were enriched at
398 chronic stages (16). Moreover, the hepatic damage of experimental infected cattle was
399 associated with excessive reactive oxygen species production (30). Altogether, these results
400 suggest that AST could be used to detect acute stages of infection in experimental infected-
401 cattle, which turns out to be at least as earlier as antigen detection or serological tests. These
402 last methods are capable of diagnosing fasciolosis between 2 and 4 wpi (23, 38, 44, 45) or 2
403 wpi, respectively (38, 44, 46). In addition, fasciolosis acquired by natural infection in different
404 mammalian hosts was also associated with increase of hepatic transaminases, although an
405 association with the stage of the infection was difficult to determine (31, 47-49). Thus, the use
406 of ALT, AST and GGT activity levels in plasma to detect natural infection may be limited likely
407 due to the coexistence of immature and mature flukes in the livers of subclinical infected cattle.

408

409 Eosinophils participate mainly in the defence against multicellular parasites and in several Th2-
410 driven immune disorders (50). The classical functions of eosinophils include mainly
411 degranulation triggered by antibodies in a mechanism known as antibody-dependent cell
412 cytotoxicity (50, 51). Their functions have been well characterized in helminth infections, and
413 in particular, our group has recently demonstrated that they play a protective role during

414 experimental *F. hepatica* infection in mice (52). The fact that an increase in the frequency of
415 circulating eosinophils was detected in the acute phase of infection (at 4 wpi) and that they were
416 significantly correlated with fluke recovery number, but not with EPG, at 43 dpi, indicates that
417 they would be more useful and reliable to detect early stages of the experimental infection,
418 together with other hepatic markers. It also confirms the fact that EPG is a late and likely a non-
419 confident technique to follow infection, as it has been previously reported (53, 54). Thus, our
420 experimental study provides case-control groups and establishes a better association between
421 liver pathological changes and serum biochemical alterations in *F. hepatica* experimental
422 infection in cattle during a long period of time (30 wpi) (55, 56). However, immunological
423 studies including humoral and cellular immune response elicited by *F. hepatica* should be
424 further investigated to complement the circulating leukocyte population dynamics performed
425 in this work.

426

427 It is worth noting that steers, regardless of *F. hepatica* infection, presented some variations in
428 some of the red or white blood counts during the analysed period of time, although they
429 remained in general between values of reference (57). This indicates that animals might be
430 sensitive to other factors, independently of parasite infection. These may include seasonal or
431 nutritional changes, variation in the distribution of eggs within a single faecal specimen, daily
432 fluctuations of faecal production and consistency in the host (40, 44, 57), animal age or other
433 factors influenced by the environment shared by the animals. Indeed, steers were free grass-fed
434 up to day 110 after the infection and then transported to a feedlot facility where they were
435 intensively feed with high energy diets. After transport, animals lost some weight (not shown).
436 Therefore, both the transportation-induced stress as well as the nutritional changes during the
437 experiment might have influenced the synthetic liver function and circulating blood and white
438 cells, regardless of parasite infection.

439

440 TCZ is one of the antihelminthics for the treatment of fasciolosis, with a mechanism of action
441 that involves disruption of the parasite tegument and causes severe damage to the reproductive
442 system of *Fasciola* spp. (25, 58). Although effective, the increase of TCZ-resistant flukes in
443 different parts of the world is an important drawback (17, 25, 59). TCZ-treatment has shown to
444 be effective, especially during the acute phase of fasciolosis, since it would prevent liver
445 damage. Indeed, in recent studies the efficacy of TCZ was confirmed in cattle (59) but mainly
446 in sheep and goats (19, 60, 61), although the histopathological effects caused by the parasite in
447 the liver were not studied in depth during the chronic stage of the infection. Indeed, one previous
448 work analysed the serological and coproantigen ELISA and EPG in cattle experimentally
449 infected with *F. hepatica* until 126 dpi with TCZ treatment, although no hepatic lesions were
450 described (20). Interestingly, the authors found that steers infected with 500 metacercariae and
451 treated at 84 dpi did not have detectable EPG or flukes in the liver (20). However, our results
452 strikingly demonstrate that the administration of TCZ at 115 dpi in steers infected with 500
453 TCZ-sensitive metacercariae, although significantly reduced parasite burden in the liver, did
454 not kill all the flukes in the liver, a fact that was accompanied by considerable hepatic damage.
455 However, it remains to be determined whether TCZ treatment was associated with the presence
456 of immature flukes in the livers of infected animals. Of note, animals treated with TCZ did not
457 show any detectable faecal parasite eggs, likely due to the low sensitivity of the technique. An
458 important issue is that in our study steers were maintained in snail-free establishments,
459 preventing the parasite to continue its life cycle in the intermediate host. Thus, TCZ-treatment
460 in the chronic phase of infection was associated with significant hepatic damage and would not
461 resolve the economic losses due to confiscation of livers. In fact, condemnation of *Fasciola*-
462 infected bovine livers at slaughter represents a significant loss of income for livestock in the
463 world (1), including Uruguay (11).

464

465 **5. Conclusions**

466 In conclusion, our work sheds light into the physiopathological parameters associated to both
467 acute and chronic phases of fluke experimental infection in cattle, revealing the complexity of
468 the host response to the infection, together with the effects of TCZ-treatments in chronically
469 infected animals.

470 **Declaration of interest**

471 The authors declare no conflict of interests.

472

473 **Animal welfare statement**

474 Animal experimentation was carried out according to the International Guiding Principles for
475 Biomedical Research Involving Animals, as issued by the Council for the International
476 Organizations of Medical Sciences.

477

478 **Acknowledgements**

479 We are highly grateful to Prof. Franklin Riet-Correa and Benjamin Doncel for his help and
480 advice. We thank Marfrig Abattoir located in Río Negro and Tacuarembó, Uruguay. Financial
481 supports were provided by Programa de Desarrollo de Ciencias Básicas (PEDECIBA), Agencia
482 Nacional de Investigación e Innovación (SNI-ANII and FCE_1_2019_1_156295) to Teresa
483 Freire.

484

485 **Author contributions**

486 Monique Costa: Investigation, data curation and analyses, original draft of the manuscript;
487 Anderson Saravia: Biological sample collection and parasitology and reviewing the manuscript;
488 Diego Ubios: Animal care and biological sample collection; Pablo Lores, Valeria da Costa,
489 María Florencia Festari, Mercedes Landeira and Santiago A. Rodríguez-Zraquia: data curation
490 and analyses and reviewing the manuscript; Georgget Banhero: Conceptualization and
491 reviewing the manuscript. Teresa Freire: Conceptualization, experiment design and
492 supervision, analyses of data and writing, review and editing the manuscript.

493 **References**

494

- 495 1. Mas-Coma S, Valero MA, Bargues MD. Fascioliasis. *Adv Exp Med Biol.*
496 2019;1154:71-103.
- 497 2. Cwiklinski K, O'Neill SM, Donnelly S, Dalton JP. A prospective view of animal and
498 human Fasciolosis. *Parasite Immunol.* 2016;38(9):558-68.
- 499 3. Howell AK, Williams DJL. The Epidemiology and Control of Liver Flukes in Cattle
500 and Sheep. *Vet Clin North Am Food Anim Pract.* 2020;36(1):109-23.
- 501 4. Borgsteede FH, Moll L, Vellema P, Gaasenbeek CP. Lack of reversion in
502 triclabendazole-resistant *Fasciola hepatica*. *Vet Rec.* 2005;156(11):350-1.
- 503 5. Beesley NJ, Caminade C, Charlier J, Flynn RJ, Hodgkinson JE, Martinez-Moreno A,
504 Martinez-Valladares M, Perez J, Rinaldi L, Williams DJL. *Fasciola* and fasciolosis in ruminants
505 in Europe: Identifying research needs. *Transbound Emerg Dis.* 2018;65 Suppl 1:199-216.
- 506 6. Nonga HE, Mwabonimana MF, Ngowi HA, Mellau LS, Karimuribo ED. A
507 retrospective survey of liver fasciolosis and stilesiosis in livestock based on abattoir data in
508 Arusha, Tanzania. *Trop Anim Health Prod.* 2009;41(7):1377-80.
- 509 7. Howell A, Baylis M, Smith R, Pinchbeck G, Williams D. Epidemiology and impact of
510 *Fasciola hepatica* exposure in high-yielding dairy herds. *Prev Vet Med.* 2015;121(1-2):41-8.
- 511 8. Ezatpour B, Hasanvand A, Azami M, Anbari K, Ahmadpour F. Prevalence of liver fluke
512 infections in slaughtered animals in Lorestan, Iran. *J Parasit Dis.* 2015;39(4):725-9.
- 513 9. Olaechea PM, Palomar M, Alvarez-Lerma F, Otal JJ, Insausti J, Lopez-Pueyo MJ,
514 Group E-H. Morbidity and mortality associated with primary and catheter-related bloodstream
515 infections in critically ill patients. *Rev Esp Quimioter.* 2013;26(1):21-9.
- 516 10. Mehmood K, Zhang H, Sabir AJ, Abbas RZ, Ijaz M, Durrani AZ, Saleem MH, Ur
517 Rehman M, Iqbal MK, Wang Y, Ahmad HI, Abbas T, Hussain R, Ghori MT, Ali S, Khan AU,

- 518 Li J. A review on epidemiology, global prevalence and economical losses of fasciolosis in
519 ruminants. *Microb Pathog.* 2017;109:253-62.
- 520 11. da Costa RA, Corbellini LG, Castro-Janer E, Riet-Correa F. Evaluation of losses in
521 carcasses of cattle naturally infected with *Fasciola hepatica*: effects on weight by age range and
522 on carcass quality parameters. *Int J Parasitol.* 2019;49(11):867-72.
- 523 12. Moazeni M, Ahmadi A. Controversial aspects of the life cycle of *Fasciola hepatica*. *Exp*
524 *Parasitol.* 2016;169:81-9.
- 525 13. Mazeri S, Sargison N, Kelly RF, Bronsvort BM, Handel I. Evaluation of the
526 Performance of Five Diagnostic Tests for *Fasciola hepatica* Infection in Naturally Infected
527 Cattle Using a Bayesian No Gold Standard Approach. *PLoS One.* 2016;11(8):e0161621.
- 528 14. Taylor MA, Coop RL, Wall RL. *Veterinary Parasitology*. 3rd Edition, Blackwell
529 Publishing, Oxford, 717 2007.
- 530 15. Niedziela DA, Naranjo-Lucena A, Molina-Hernandez V, Browne JA, Martinez-Moreno
531 A, Perez J, MacHugh DE, Mulcahy G. Timing of Transcriptomic Peripheral Blood
532 Mononuclear Cell Responses of Sheep to *Fasciola hepatica* Infection Differs From Those of
533 Cattle, Reflecting Different Disease Phenotypes. *Front Immunol.* 2021;12:729217.
- 534 16. Garcia-Campos A, Correia CN, Naranjo-Lucena A, Garza-Cuartero L, Farries G,
535 Browne JA, MacHugh DE, Mulcahy G. *Fasciola hepatica* Infection in Cattle: Analyzing
536 Responses of Peripheral Blood Mononuclear Cells (PBMC) Using a Transcriptomics
537 Approach. *Front Immunol.* 2019;10:2081.
- 538 17. Kelley JM, Elliott TP, Beddoe T, Anderson G, Skuce P, Spithill TW. Current Threat of
539 Triclabendazole Resistance in *Fasciola hepatica*. *Trends Parasitol.* 2016;32(6):458-69.
- 540 18. Mooney L, Good B, Hanrahan JP, Mulcahy G, de Waal T. The comparative efficacy of
541 four anthelmintics against a natural acquired *Fasciola hepatica* infection in hill sheep flock in
542 the west of Ireland. *Vet Parasitol.* 2009;164(2-4):201-5.

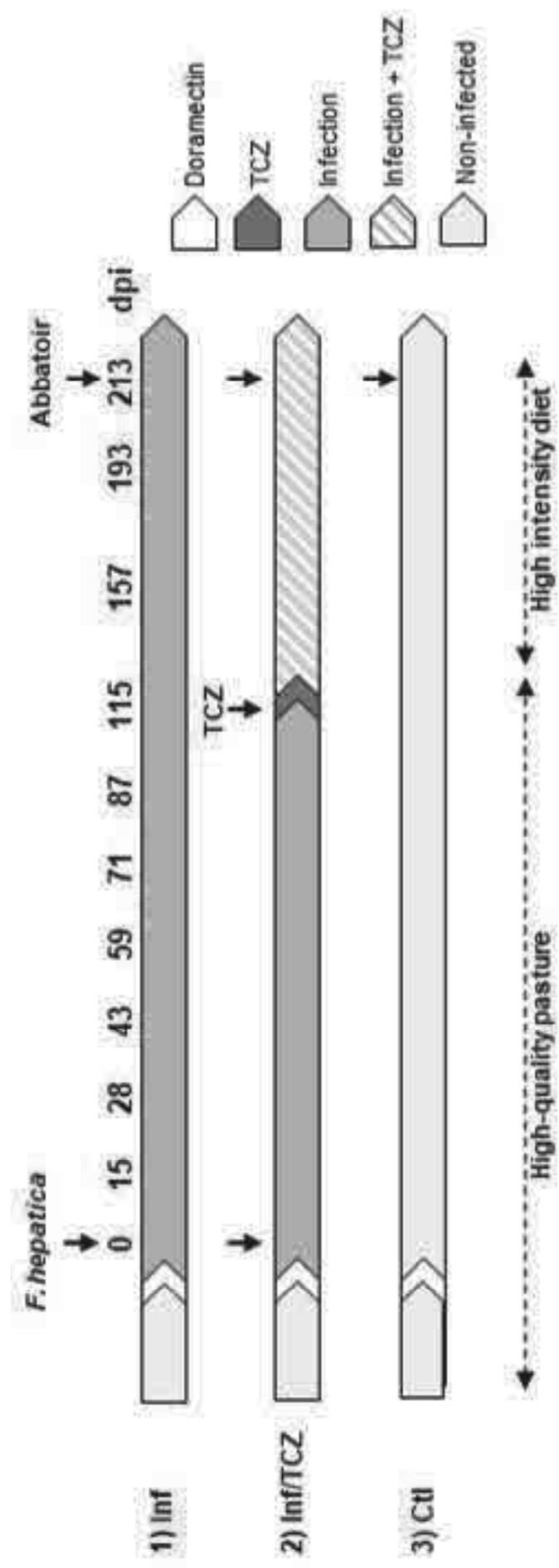
- 543 19. Romero J, Villaguala C, Quiroz F, Landaeta-Aqueveque C, Alfaro G, Perez R. Flukicide
544 efficacy against *Fasciola hepatica* of Triclabendazole and Nitroxynil in cattle of the central
545 valley of Chile. *Rev Bras Parasitol Vet.* 2019;28(1):164-7.
- 546 20. Brockwell YM, Spithill TW, Anderson GR, Grillo V, Sangster NC. Comparative
547 kinetics of serological and coproantigen ELISA and faecal egg count in cattle experimentally
548 infected with *Fasciola hepatica* and following treatment with triclabendazole. *Vet Parasitol.*
549 2013;196(3-4):417-26.
- 550 21. Braun U, Wolfensberger R, Hertzberg H. Diagnosis of liver flukes in cows--a
551 comparison of the findings in the liver, in the feces, and in the bile. *Schweiz Arch Tierheilkd.*
552 1995;137(9):438-44.
- 553 22. Hutchinson GW, Dawson K, Fitzgibbon CC, Martin PJ. Efficacy of an injectable
554 combination anthelmintic (nitroxynil+clorsulon+ivermectin) against early immature *Fasciola*
555 *hepatica* compared to triclabendazole combination flukicides given orally or topically to cattle.
556 *Vet Parasitol.* 2009;162(3-4):278-84.
- 557 23. Walsh TR, Ainsworth S, Armstrong S, Hodgkinson J, Williams D. Differences in the
558 antibody response to adult *Fasciola hepatica* excretory/secretory products in experimentally and
559 naturally infected cattle and sheep. *Vet Parasitol.* 2021;289:109321.
- 560 24. Jayraw AK, Singh BP, Raina OK, Udaya Kumar M. Kinetics of serum immunoglobulin
561 isotype response in experimental bovine tropical fasciolosis. *Vet Parasitol.* 2009;165(1-2):155-
562 60.
- 563 25. Fairweather I, Brennan GP, Hanna REB, Robinson MW, Skuce PJ. Drug resistance in
564 liver flukes. *Int J Parasitol Drugs Drug Resist.* 2020;12:39-59.
- 565 26. Lotfollahzadeh S, Mohri M, Bahadori Sh R, Dezfouly MR, Tajik P. The relationship
566 between normocytic, hypochromic anaemia and iron concentration together with hepatic
567 enzyme activities in cattle infected with *Fasciola hepatica*. *J Helminthol.* 2008;82(1):85-8.

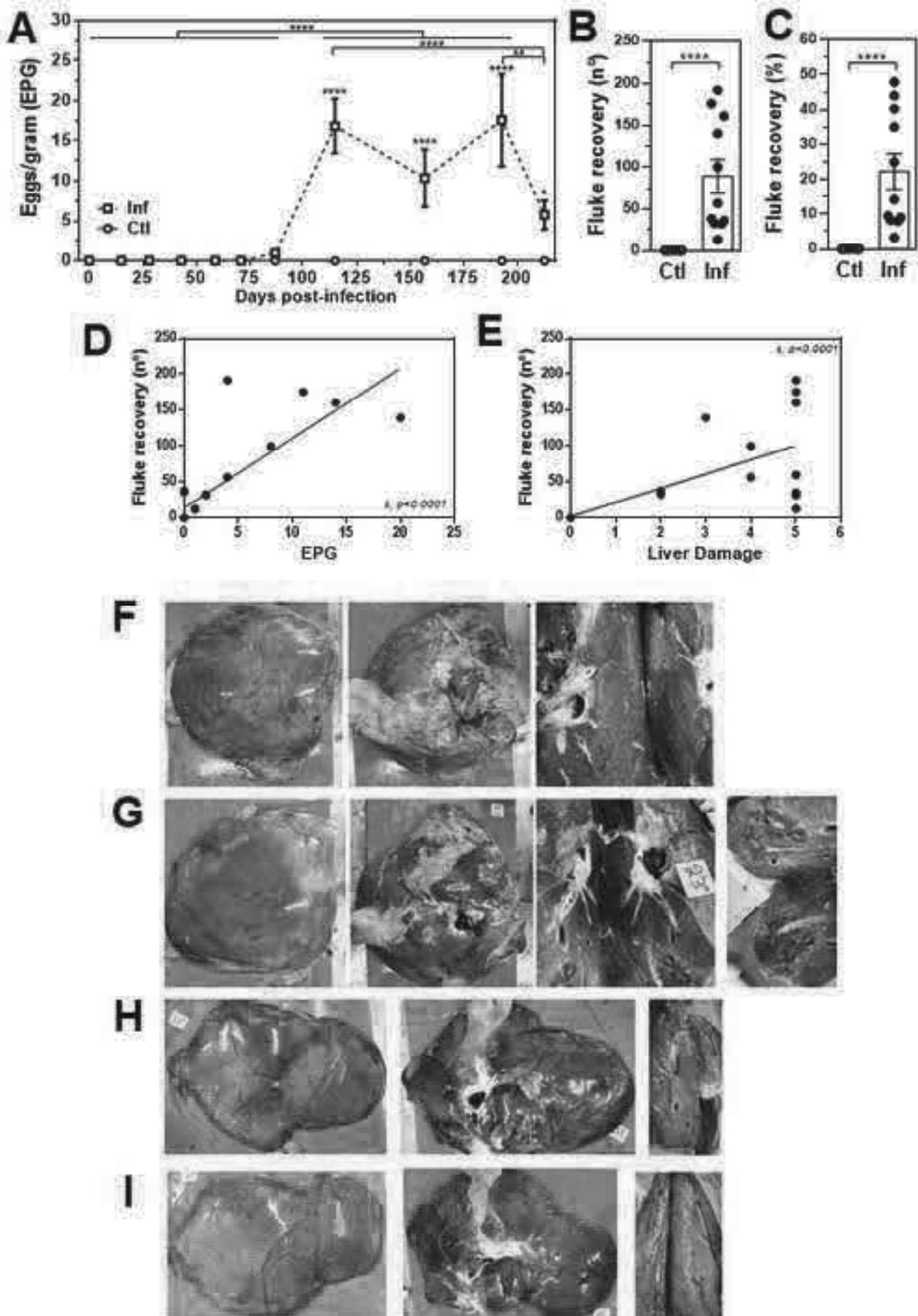
- 568 27. Bulgin MS, Anderson BC, Hall RF, Lang BZ. Serum gamma glutamyl transpeptidase
569 activity in cattle with induced fascioliasis. *Res Vet Sci.* 1984;37(2):167-71.
- 570 28. Wyckoff JH, 3rd, Bradley RE. Diagnosis of *Fasciola hepatica* infection in beef calves
571 by plasma enzyme analysis. *Am J Vet Res.* 1985;46(5):1015-9.
- 572 29. Clery D, Torgerson P, Mulcahy G. Immune responses of chronically infected adult
573 cattle to *Fasciola hepatica*. *Vet Parasitol.* 1996;62(1-2):71-82.
- 574 30. AS DAS, Baldissera MD, Bottari NB, Gabriel ME, Rhoden LA, Piva MM, Christ R,
575 Stedille FA, Gris A, Morsch VM, Schetinger MR, Mendes RE. Oxidative stress and changes in
576 adenosine deaminase activity of cattle experimentally infected by *Fasciola hepatica*.
577 *Parasitology.* 2017;144(4):520-6.
- 578 31. Kitila DB, Megersa YC. Pathological and Serum Biochemical Study of Liver Fluke
579 Infection in Ruminants Slaughtered at ELFORA Export Abattoir, Bishoftu, Ethiopia. *Global*
580 *Journal of Medical Research Microbiology and Pathology.* 2014;14(8).
- 581 32. Giovanoli Evack J, Kouadio JN, Achi L, Balmer O, Hattendorf J, Bonfoh B, Zinsstag J,
582 N'Goran EK, Utzinger J. Accuracy of the sedimentation and filtration methods for the diagnosis
583 of schistosomiasis in cattle. *Parasitol Res.* 2020;119(5):1707-12.
- 584 33. Escribano C, Saravia A, Costa M, Castells D, Ciappesoni G, Riet-Correa F, Freire T.
585 Resistance to *Haemonchus contortus* in Corriedale sheep is associated to high parasite-specific
586 IgA titer and a systemic Th2 immune response. *Sci Rep.* 2019;9(1):19579.
- 587 34. Roberts JA, Estuningsih E, Widjayanti S, Wiedosari E, Partoutomo S, Spithill TW.
588 Resistance of Indonesian thin tail sheep against *Fasciola gigantica* and *F. hepatica*. *Vet*
589 *Parasitol.* 1997;68(1-2):69-78.
- 590 35. Marcos LA, Yi P, Machicado A, Andrade R, Samalvides F, Sanchez J, Terashima A.
591 Hepatic fibrosis and *Fasciola hepatica* infection in cattle. *J Helminthol.* 2007;81(4):381-6.

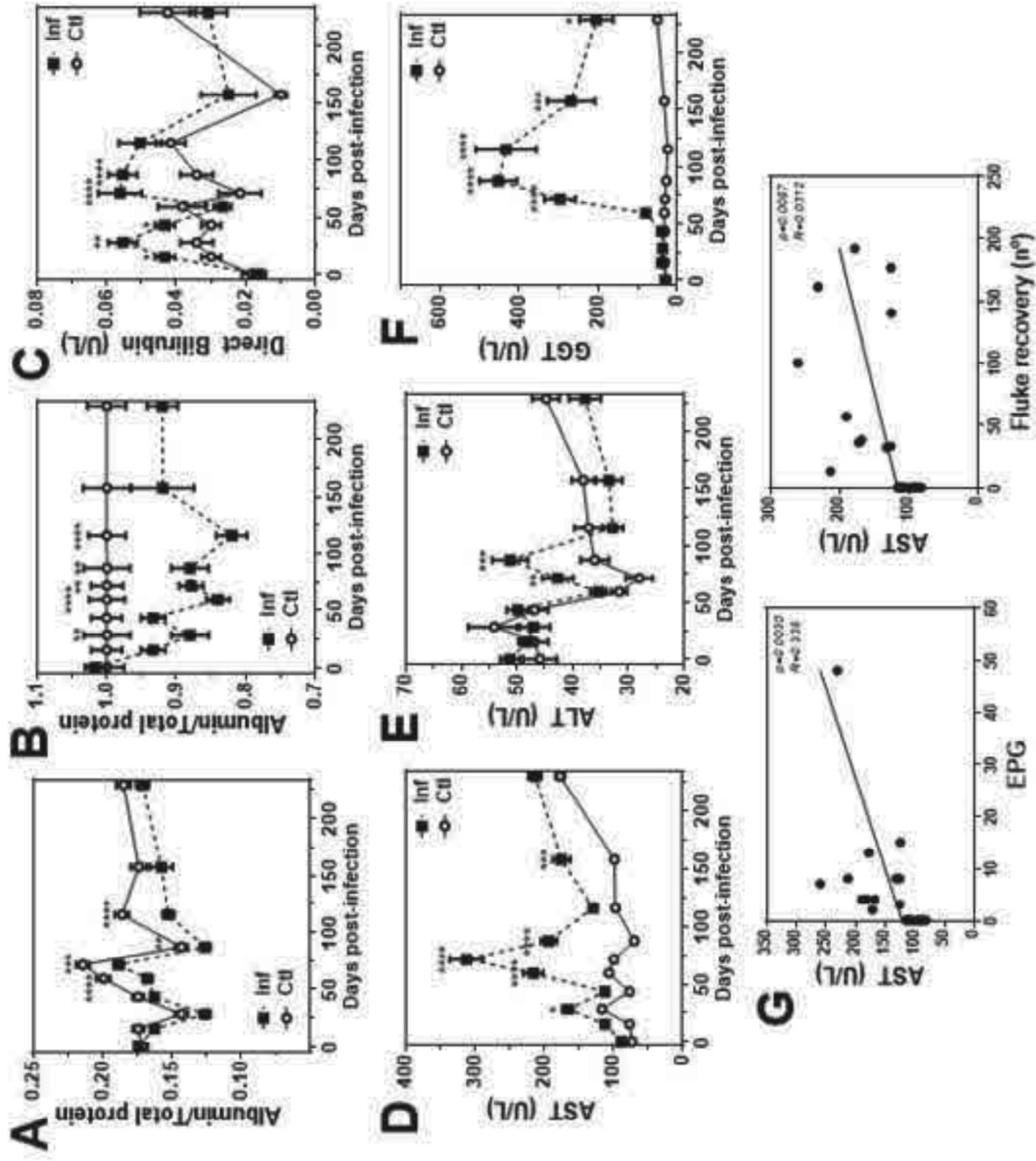
- 592 36. Kurokawa T, Ohkohchi N. Platelets in liver disease, cancer and regeneration. *World J*
593 *Gastroenterol.* 2017;23(18):3228-39.
- 594 37. Castro-Hermida JA, Gonzalez-Warleta M, Martinez-Sernandez V, Ubeira FM, Mezo
595 M. Current Challenges for Fasciolicide Treatment in Ruminant Livestock. *Trends Parasitol.*
596 2021;37(5):430-44.
- 597 38. Mirzadeh A, Jafarihaghighi F, Kazemirad E, Sabzevar SS, Tanipour MH, Ardjmand M.
598 Recent Developments in Recombinant Proteins for Diagnosis of Human Fascioliasis. *Acta*
599 *Parasitol.* 2021;66(1):13-25.
- 600 39. Peters L, Burkert S, Gruner B. Parasites of the liver - epidemiology, diagnosis and
601 clinical management in the European context. *J Hepatol.* 2021;75(1):202-18.
- 602 40. Valero MA, Panova M, Perez-Crespo I, Khoubbane M, Mas-Coma S. Correlation
603 between egg-shedding and uterus development in *Fasciola hepatica* human and animal isolates:
604 applied implications. *Vet Parasitol.* 2011;183(1-2):79-86.
- 605 41. Mas-Coma S, Bargues MD, Valero MA. Fascioliasis and other plant-borne trematode
606 zoonoses. *Int J Parasitol.* 2005;35(11-12):1255-78.
- 607 42. Kuerpick B, Schnieder T, Strube C. Evaluation of a recombinant cathepsin L1 ELISA
608 and comparison with the Pourquier and ES ELISA for the detection of antibodies against
609 *Fasciola hepatica*. *Vet Parasitol.* 2013;193(1-3):206-13.
- 610 43. Lala V, Goyal A, Bansal P, Minter DA. Liver Function Tests. *StatPearls. Treasure*
611 *Island (FL)2021.*
- 612 44. Mas-Coma S, Bargues MD, Valero MA. Diagnosis of human fascioliasis by stool and
613 blood techniques: update for the present global scenario. *Parasitology.* 2014;141(14):1918-46.
- 614 45. Calvani NED, Windsor PA, Bush RD, Slapeta J. Scrambled eggs: A highly sensitive
615 molecular diagnostic workflow for *Fasciola* species specific detection from faecal samples.
616 *PLoS Negl Trop Dis.* 2017;11(9):e0005931.

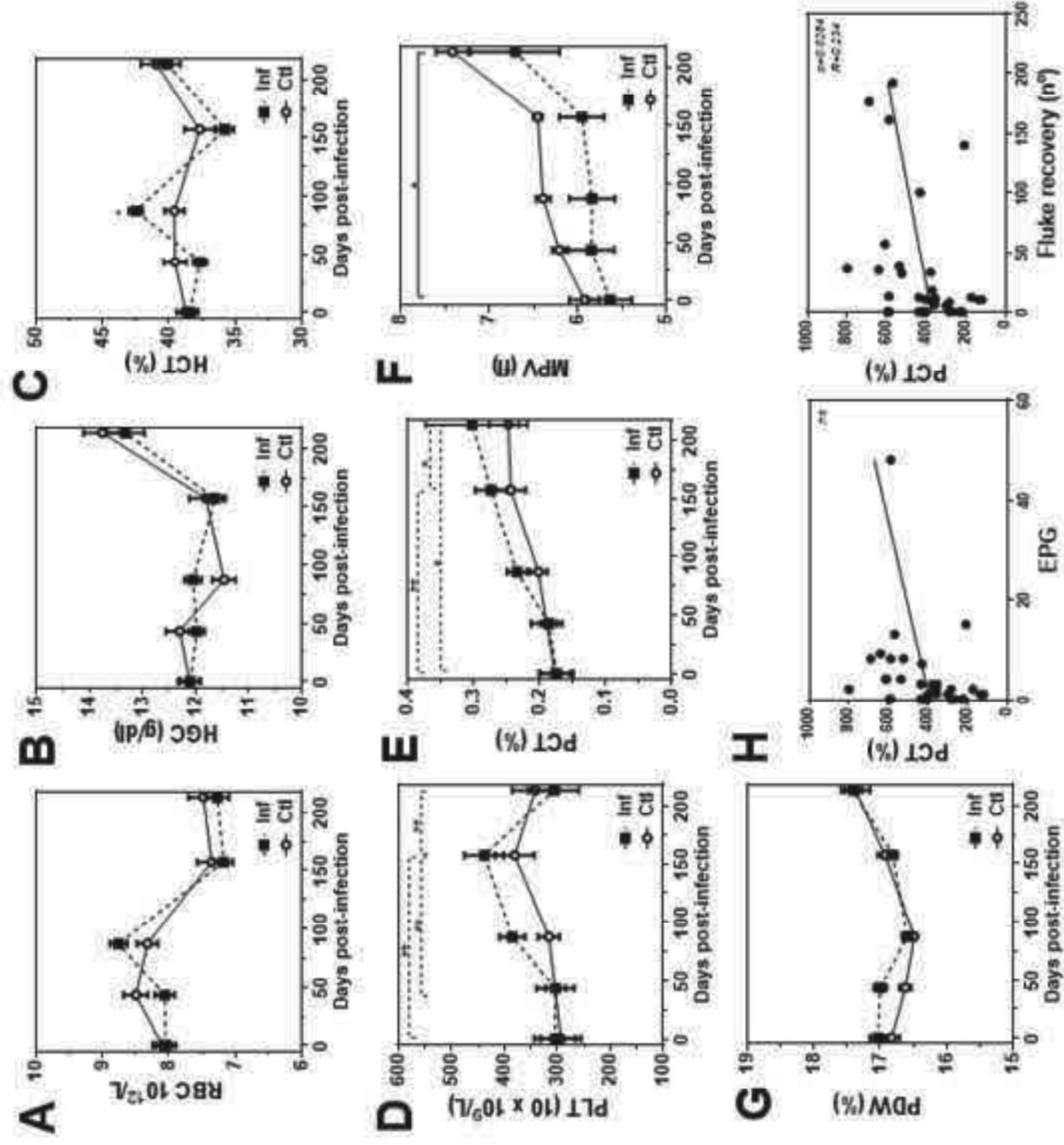
- 617 46. Sarkari B, Khabisi SA. Immunodiagnosis of Human Fascioliasis: An Update of
618 Concepts and Performances of the Serological Assays. *J Clin Diagn Res.* 2017;11(6):OE05-
619 OE10.
- 620 47. Purnama MTE, Dewi WK, Triana NM, Ooi HK. Serum liver enzyme profile in Timor
621 deer (*Cervus timorensis*) with fascioliasis in Indonesia. *Trop Biomed.* 2021;38(1):57-61.
- 622 48. Afshan K, Kabeer S, Firasat S, Jahan S, Qayyum M. Seroepidemiology of human
623 fascioliasis and its relationship with anti-Fasciola IgG and liver enzymes as biomarkers of
624 pathogenicity. *Afr Health Sci.* 2020;20(1):208-18.
- 625 49. Jarujareet W, Taira K, Ooi HK. Dynamics of liver enzymes in rabbits experimentally
626 infected with *Fasciola* sp. (Intermediate form from Japan). *J Vet Med Sci.* 2018;80(1):36-40.
- 627 50. Long H, Liao W, Wang L, Lu Q. A Player and Coordinator: The Versatile Roles of
628 Eosinophils in the Immune System. *Transfus Med Hemother.* 2016;43(2):96-108.
- 629 51. Makepeace BL, Martin C, Turner JD, Specht S. Granulocytes in helminth infection --
630 who is calling the shots? *Curr Med Chem.* 2012;19(10):1567-86.
- 631 52. Frigerio S, da Costa V, Costa M, Festari MF, Landeira M, Rodriguez-Zraquia SA,
632 Hartel S, Toledo J, Freire T. Eosinophils Control Liver Damage by Modulating Immune
633 Responses Against *Fasciola hepatica*. *Front Immunol.* 2020;11:579801.
- 634 53. Arifin MI, Hoglund J, Novobilsky A. Comparison of molecular and conventional
635 methods for the diagnosis of *Fasciola hepatica* infection in the field. *Vet Parasitol.* 2016;232:8-
636 11.
- 637 54. Duscher R, Duscher G, Hofer J, Tichy A, Prosl H, Joachim A. *Fasciola hepatica* -
638 monitoring the milky way? The use of tank milk for liver fluke monitoring in dairy herds as
639 base for treatment strategies. *Vet Parasitol.* 2011;178(3-4):273-8.

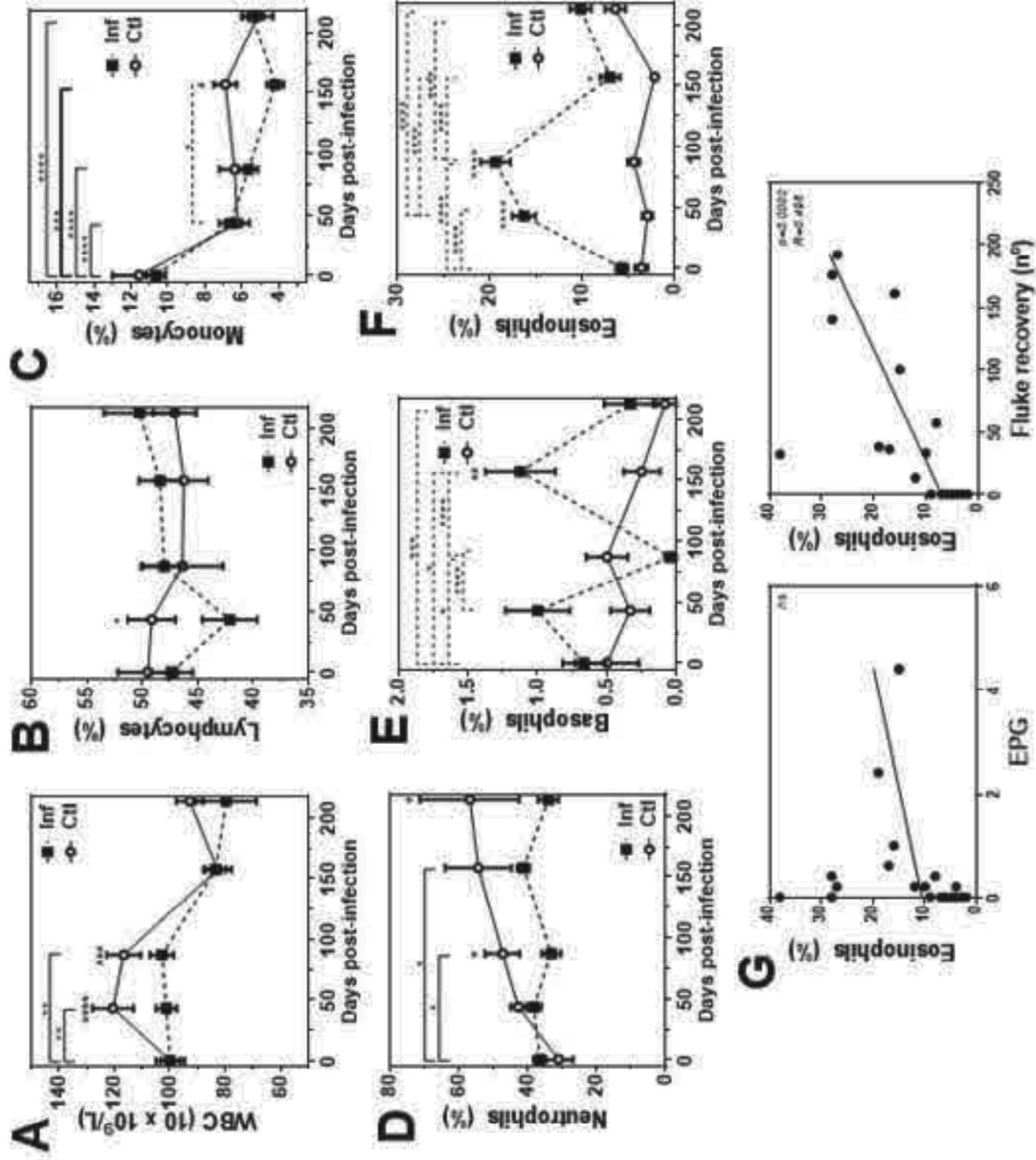
- 640 55. Zhang WY, Moreau E, Hope JC, Howard CJ, Huang WY, Chauvin A. *Fasciola hepatica*
641 and *Fasciola gigantica*: comparison of cellular response to experimental infection in sheep. *Exp*
642 *Parasitol.* 2005;111(3):154-9.
- 643 56. Raadsma HW, Kingsford NM, Suharyanta, Spithill TW, Piedrafita D. Host responses
644 during experimental infection with *Fasciola gigantica* and *Fasciola hepatica* in Merino sheep II.
645 Development of a predictive index for *Fasciola gigantica* worm burden. *Vet Parasitol.*
646 2008;154(3-4):250-61.
- 647 57. Roland L, Drillich M, Iwersen M. Hematology as a diagnostic tool in bovine medicine.
648 *J Vet Diagn Invest.* 2014;26(5):592-8.
- 649 58. Coyne LA, Bellet C, Latham SM, Williams D. Providing information about
650 triclabendazole resistance status influences farmers to change liver fluke control practices. *Vet*
651 *Rec.* 2020;187(9):357.
- 652 59. Kouadio JN, Giovanoli Evack J, Achi LY, Balmer O, Utzinger J, N'Goran EK, Bonfoh
653 B, Hattendorf J, Zinsstag J. Efficacy of triclabendazole and albendazole against *Fasciola* spp.
654 infection in cattle in Cote d'Ivoire: a randomised blinded trial. *Acta Trop.* 2021;222:106039.
- 655 60. Novobilsky A, Amaya Solis N, Skarin M, Hoglund J. Assessment of flukicide efficacy
656 against *Fasciola hepatica* in sheep in Sweden in the absence of a standardised test. *Int J Parasitol*
657 *Drugs Drug Resist.* 2016;6(3):141-7.
- 658 61. Shrimali RG, Patel MD, Patel RM. Comparative efficacy of anthelmintics and their
659 effects on hemato-biochemical changes in fasciolosis of goats of South Gujarat. *Vet World.*
660 2016;9(5):524-9.
- 661

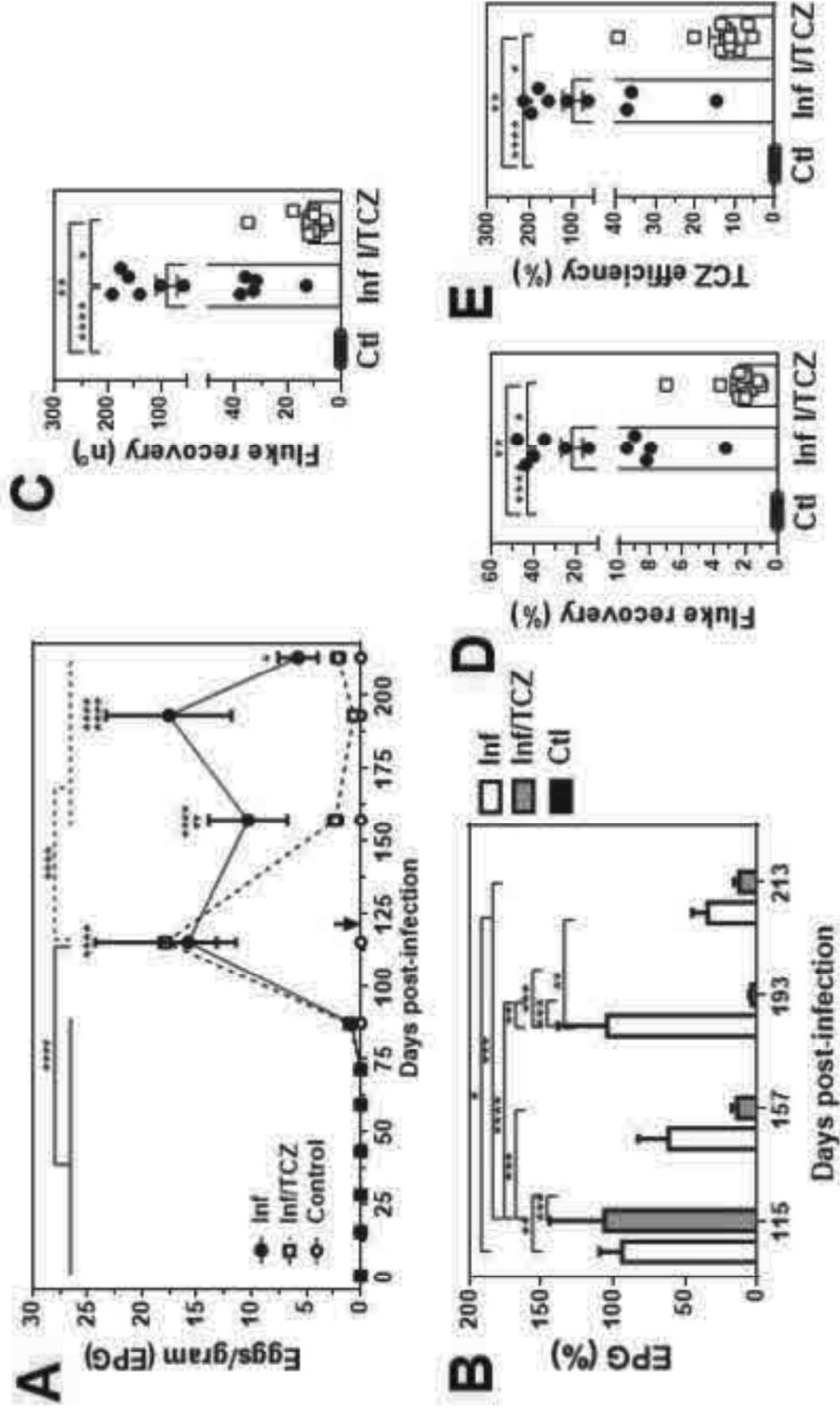


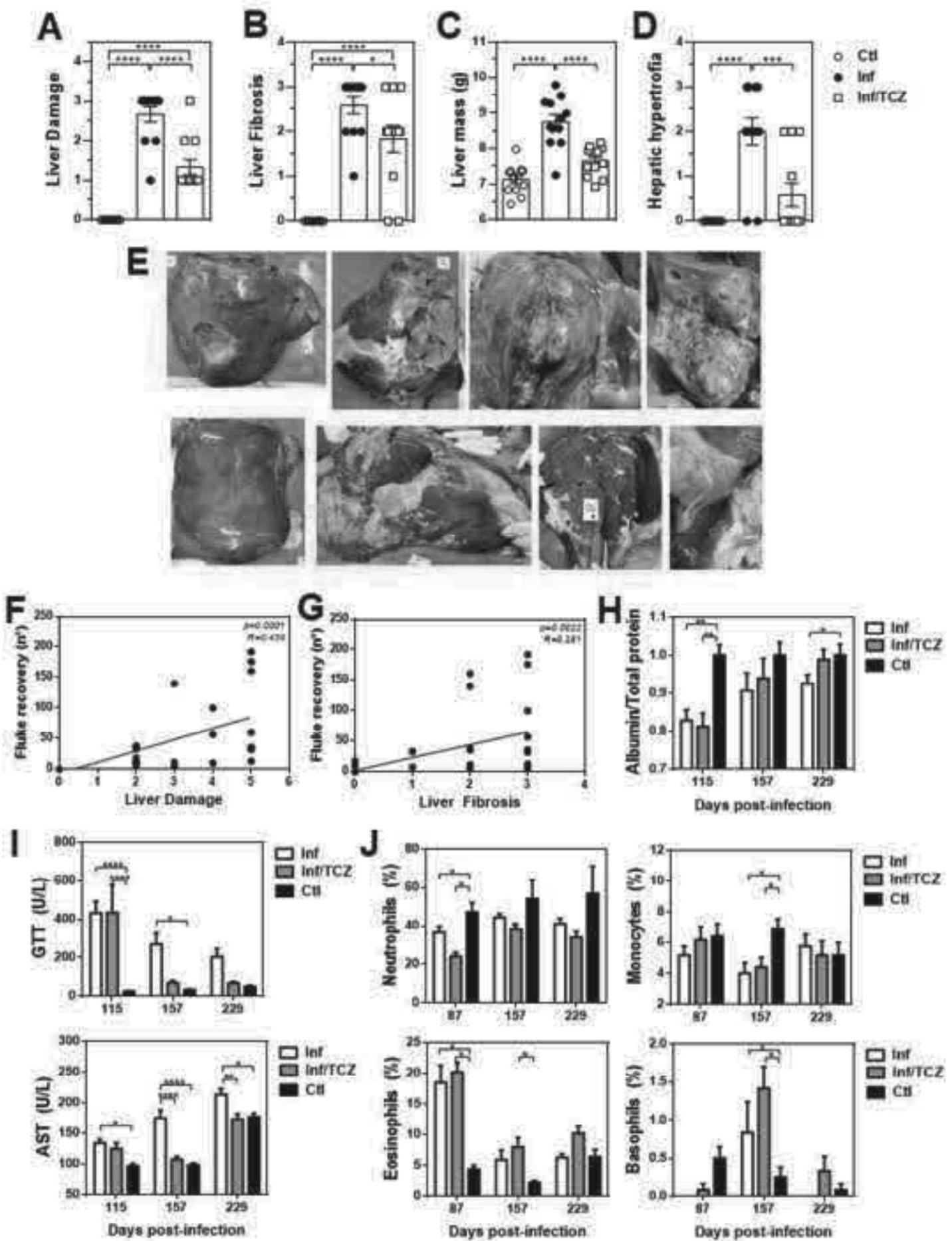












1 **Title**

2 Liver function markers and haematological dynamics during acute and chronic phases of
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4

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9

10 **Credit author statement**

11 Monique Costa: Investigation, data curation and analyses, original draft of the manuscript;
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15 curation and analyses and reviewing the manuscript; Georgget Banchemo: Conceptualization
16 and reviewing the manuscript. Teresa Freire: Conceptualization, experiment design and
17 supervision, analyses of data and writing, review and editing the manuscript.