Targeted syndromic next-generation sequencing panel for simultaneous detection of pathogens associated with bovine reproductive failure

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Abstract

Bovine reproductive failure, which includes infertility, abortion, and stillbirth in cattle, leads to significant economic losses for beef and milk producers. Diagnosing the infectious causes of bovine reproductive failure is challenging as there are multiple pathogens associated with it. The traditional stepwise approach to diagnostic testing is time-consuming and can cause significant delays. In this study, we have developed a syndromic next-generation sequencing panel (BovReproSeq), for the simultaneous detection of 17 pathogens associated with bovine reproductive failure. This targeted approach involves amplifying multiple pathogen-specific targets using ultra-multiplex PCR, followed by sequencing with the Oxford Nanopore platform and subsequent analysis of the data using a custom bioinformatic pipeline to determine the presence or absence of pathogens. We tested 116 clinical samples and found that BovReproSeq results matched with current diagnostic methods for 93% of the samples, and most of the disagreements occurring in samples with very low pathogen loads (Ct > 35). At the optimal read-count threshold of 10 reads (minimum number of reads to classify the sample as positive), the sensitivity of the assay was approximately 82%, while specificity was 100%. The overall accuracy of the assay was 98.8%. Matthew's Correlation Coefficient was approximately 0.90 and F1 score (harmonic mean of Precision and Recall) was 0.90, indicating excellent overall performance. Our study presents a significant advancement in detecting the infectious agents associated with bovine reproductive failure and the BovReproSeq panel's ability to detect 17 pathogens makes it a promising tool for veterinary diagnostics.

Introduction

Bovine reproductive failure is a collective term used to refer to infertility, abortion, and stillbirth in cattle. It causes substantial economic losses to beef and milk producers, estimated to be approximately $1 billion annually in the USA (1). Accurate diagnosis is essential to control and manage this condition. Although non-infectious causes, such as poor nutrition, breeding practices and management, account for most of bovine reproductive failure cases in Western Canada, infectious diseases also contribute to bovine reproductive failure (2). In extreme cases, infectious diseases can lead to abortion storms if not diagnosed correctly. The pathogens associated with

this condition also pose a concern to humans as some of them belong to risk group-3 or are zoonotic.

Multiple pathogens are associated with bovine reproductive failure including viruses, bacteria, fungi, and protozoa. Infections with some of these pathogens are asymptomatic or cause similar clinical signs and differentiation between these pathogens requires a variety of laboratory tests. There is no recent data available on the diagnostic success rate in Western Canada, however, based on 338 aborted fetuses submitted to Prairie Diagnostic Services in 2010, 52% had no diagnosis, 41% were attributed to an infectious disease, and 7% to a developmental anomaly (2). The success rate for diagnosing bovine reproductive failure is typically low as there is a significant delay between infection and the occurrence of abortion (3). The diagnostic success rate also depends on the availability of appropriate samples (e.g., fresh fetus, placenta, amniotic fluid etc.), and this is not always possible as aborted fetuses are often autolyzed (4). Veterinarians and producers usually focus on testing the most likely cause and if the initial test fails to confirm the suspected cause, subsequent tests are requested. This stepwise approach to diagnostic testing is time-consuming and increases the risk of missing the correct diagnosis as veterinarians and producers are less likely to follow through a diagnostic plan if the initial tests are negative. A syndromic panel approach in which multiple pathogens are tested for simultaneously, would increase the chance of successful diagnosis and significantly reduce the turnaround time for diagnosis (5). Currently, there is no syndromic panel test available in Canada for bovine reproductive pathogens.

PCR is the most preferred method for detection of reproductive failure pathogens due to its high analytical sensitivity and specificity. Even though multiple targets can be detected using PCR, there is a limit to the number of targets that can be included in multiplex assays (6). Metagenomic next-generation sequencing (mNGS) can overcome this limitation by either sequence-independent amplification of the genetic material in the sample or by directly sequencing the genetic material, thereby providing comprehensive microbial analysis. The sensitivity of this method, however, is lower compared to species specific real-time PCR due to the abundance of host genetic material in the sample (7). Additionally, there is a high cost associated with mNGS and the turnaround times are longer compared to real-time PCR. These

limitations can be overcome by combining PCR with high-throughput next-generation

sequencing. With this targeted approach, multiple pathogen-specific targets are first amplified in

an ultra-multiplex PCR and amplified fragments are then sequenced and analysed (8, 9). While

there are several high-throughput sequencing platforms available, the Oxford Nanopore platform

offers real-time sequence data and analysis, enabling rapid and timely diagnosis. Multiple

samples can be processed in a single sequencing run and diagnostic costs can be significantly

reduced. In addition to detecting pathogens of interest, targeted metagenomic sequencing offers

the ability to determine strain types (*in silico* serotyping, virulence typing, multi-locus sequence

typing (MLST), etc.) and identify variants, which could be useful in differentiating closely

related pathogens such as *Campylobacter fetus* subsp. *fetus* and *Campylobacter fetus* subsp.

venerealis (10). There is also potential to detect emerging or novel pathogens with this approach

using random primers along with the targeted primers (11).

In this study, we have developed a syndromic next-generation sequencing panel (BovReproSeq)

for simultaneous detection of 17 pathogens associated bovine reproductive failure. The

BovReproSeq method was tested on clinical samples, and it successfully detected all 17

pathogens associated with bovine reproductive failure. Despite some limitations in detecting

pathogens at very low pathogen loads, the overall performance was excellent with a Matthew's

Correlation Coefficient of 0.90.

Materials and methods

Target pathogen selection

Seventeen pathogens including bacteria, protozoa and viruses were selected for inclusion in the

panel (Table 1). Pathogens were selected based on the results of reproductive failure cases that

were submitted to Prairie Diagnostic Services since 2014 and additional advice from

veterinarians and diagnostic pathologists. Originally 12 pathogens were included and after

successful results from initial experiments, five more pathogens were added to the panel.

Table 1: Pathogens in the BovReproSeq panels and current diagnostic test

Pathogen	Current diagnostic test
Bacteria	
Coxiella burnetti	Real-time PCR
Chlamydia abortus	Real-time PCR
Ureaplasma diversum	Real-time PCR
Campylobacter fetus. subsp. *fetus*	Real-time and conventional PCR
Campylobacter jejuni	Conventional PCR
Campylobacter fetus. subsp. *venerealis*	Real-time and conventional PCR
Leptospira spp.	Immunohistochemistry
Listeria monocytogenes	Bacterial culture
Trueperella pyogenes	Bacterial culture
Mycoplasma bovis	Real-time PCR
Bacillus licheniformis	Bacterial culture
Protozoa	
Neospora caninum	Immunohistochemistry, serology
Tritrichomonas fetus	Real-time PCR
Toxoplasma gondii	Real-time PCR
Sarcocystis spp.	Immunohistochemistry
Viruses	
Bovine alphaherpesvirus 1 (BoHV-1)	Real-time PCR, virus isolation
Bovine viral diarrhea virus (BVDv)	Real-time PCR, virus isolation

PCR Primer design and *in silico* PCR verification

Multiple PCR assays for each pathogen were identified from published papers. The complete

RefSeq genomes for each pathogen were downloaded from NCBI RefSeq database. If complete

genomes are not available in RefSeq database, sequences of the target genes or genome contigs

of the pathogen were obtained from the NCBI GenBank database. *In silico* PCR was performed

in UGENE (version 48) using primer sets from published papers and the downloaded sequences

as templates. *In silico* PCR results were evaluated and the primer set that consistently produced

the expected amplicon across the highest proportion of representative genomes was chosen for

the BovReproSeq panel. A total of 37 primer sets were included based on the *in silico* PCR

results, typically two primer pairs targeting each pathogen (Table Sl). For Coccidian parasites

(*Neospora caninum*, *Toxoplasma gondii, Sarcocystis* spp.)*,* one specific primer set for each

pathogen, and a pan-Coccidia specific primer set were added. An additional seven MLST primer

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sets were included for *Campylobacter fetus* subspecies differentiation. A partial sequence

encoding Enhanced Green Fluorescent Protein (EGFP) was added as an internal amplification

control (IC-EGFP) to rule out false negatives due to presence of PCR inhibitors in the clinical

samples. Primers for IC-EGFP were designed using primer3 (12). Primers were synthesized by

IDT (Integrated DNA Technologies), and 100 µM stocks were prepared for each primer by

suspending the lyophilized primer in nuclease free water. Aliquots (5 µl) of each primer stock

(100 µM) were pooled together to create a working stock of pooled primers.

Synthetic controls

Synthetic controls were created and used to optimise and validate the targeted next-generation

sequencing approach. These controls were generated by flanking random sequences with target-

specific primer binding sites. Random sequences with equal nucleotide frequency were generated

using the RSAT random sequence web tool (http://rsat.sb-roscoff.fr/random-seq_form.cgi) and

then flanked with target-specific primer binding sites (13). The size of each synthetic control was

designed to match the actual size of the target (Supplemental File S3). Two to four of these

synthetic controls were integrated into a pUCIDT plasmid containing an ampicillin resistance

gene. *E. coli* DH5-alpha was transformed with these plasmids, and control stocks were stored at -

80 °C. Subsequently, plasmids were extracted from overnight *E. coli* cultures in lysogeny broth

(LB) containing 100 µg/ml ampicillin and plasmid DNA extractions were normalized to 5 ng/µl

for further use. Synthetic controls were verified by conventional PCR using both individual and

pooled primers. Equimolar amounts of each plasmid were then pooled to make a working stock,

ensuring that equal numbers of each synthetic target were in the pooled control. These controls

were used as a template for PCR optimisation and as a positive control in clinical sample

analysis.

PCR optimisation with synthetic controls

Two high-fidelity DNA polymerase kits (Invitrogen Platinum superfi II – Themofisher Cat no.

12361010 – (TF_Plati), and NEB Q5 High-Fidelity 2X Master Mix – NEB Cat no. M0492L

(NEB_Q5)) and three annealing temperatures (57 °C, 60 °C, 63 °C) were evaluated. Multiplex

PCR was performed with six different combinations of master mixes and annealing temperatures

and a primer concentration of 0.015 µM. The pooled plasmids containing synthetic controls (2

µl) was used as a template. Resulting PCR products (100 ng each sample) from each

combination was barcoded with ONT Native barcoding kit (SQK.NBD114.96) and the resulting

pooled library was then sequenced on a GridION sequencer using an R10.4 flowcell. Following

these results, a reverse transcriptase step was added to the protocol to enable the detection of

BVDv (an RNA virus). Three different reverse transcriptase kits (NEB LunaScript Multiplex

One-Step RT-PCR Kit (Cat no. E1555S), NEB LunaScript RT SuperMix Kit (Cat no. E3010L)

and NEB LunaScript RT Master Mix Kit Primer-free (Cat no. E3025L) with *BVDv* specific

primers) were tested using manufacturer's instructions with two *BVDv* positive clinical samples.

Clinical samples

A total of 116 samples were selected from clinical cases submitted to Prairie Diagnostic Services

(PDS). Each sample was tested for one or more pathogens as requested by the clients using

current diagnostic methods (Table 1). This resulted in 152 outcomes: 64 confirmed positive and

88 confirmed negative for the requested tests. Due to the unavailability of positive bovine

samples for certain pathogens in the panel, caprine and ovine samples were included, as several

abortifacient pathogens are common across cattle, goats and sheep. Various sample types were

tested, including placenta, amniotic fluid, vaginal swabs, InPouch media (InPouch TF Bovine,

BioMed Diagnostics), semen, and fetal tissues. For pathogens such as Bovine Viral Diarrhea

Virus (*BVDv*)*, Mycoplasma bovis,* and *Bovine alphaherpesvirus-1 (BoHV-1)*, positive samples

associated with abortions were not available. Therefore, positive samples submitted for

respiratory disease investigation were included to ensure representation of these pathogens in the

experiment. Positive clinical samples were not available for *Listeria monocytogenes, Leptospira*

spp. (3 different species), *Toxoplasma gondii, Neospora caninum,* and *Sarcocystis* spp*.* In these

cases, mock test samples were created by spiking 10 µl of ATCC culture (*Listeria*

monocytogenes (ATCC 7644)*, Leptospira* spp. (3 different species ATCC 23580, ATCC 23606,

ATCC 23469), *Toxoplasma gondii* (ATCC 50611), *Neospora caninum* (ATCC 50977)*,* and

Sarcocystis spp. (ATCC PRA-420)) of the pathogen into 90 µl of placenta matrix (clarified tissue

homogenate) that was confirmed negative for BovReproSeq pathogens using the current

diagnostic methods in Table 1.

BovReproSeq workflow

The complete BovReproSeq laboratory workflow includes nucleic acid extraction and reverse

transcription, multiplex PCR and library preparation, sequencing and bioinformatic analysis

(Figure 1).

Total nucleic acid extraction

Applied Biosystems MagMAX CORE Nucleic Acid Purification Kit (Cat no. A32700) was used

for extracting total nucleic acid from various sample types, including placenta, amniotic fluid,

fetal tissues, and InPouch medium. For placenta and tissue samples, approximately 0.25 g of

tissue was added to1 ml of PBS in a beater tube with glass beads. The tissue was then lysed by

beating at 30 Hz for 2 minutes in Qiagen TissueLyser II. The lysate was then centrifuged at 1000

× g for 1 minute, and 100 μl of the clarified lysate (matrix) was used for extraction. In the case of

amniotic fluid (200 μl) and InPouch medium (300 μl), the samples were used directly without

any pre-processing. Total nucleic acid was extracted from the prepared samples on a KingFisher

Flex instrument using the MagMAX CORE kit according to the manufacturer's instructions.

First strand cDNA synthesis

Reverse transcription was carried out with 8 μl of total nucleic acid added to 2 μl of NEB

Lunascript RT Supermix (New England Biolabs Cat no. E3010). Nuclease free water was used

as a no template control (NTC) and pooled plasmids containing the synthetic controls was used

as a positive control. The primers were annealed at 25°C for two minutes, followed by cDNA

synthesis at 55°C for 10 minutes and heat inactivation at 95°C for 1 minute. cDNA synthesized

in this step was used as a template for the multiplex PCR.

Multiplex PCR

The mastermix was prepared by combining 12.5 μl of NEB Q5 Hot Start High-Fidelity 2 ×

Master Mix (New England Biolabs Cat no. M0492L), 9.5 μl of pooled primers (final

concentration: 0.5 μM for each primer), 0.9 μl of nuclease-free water, and 0.1 μl of IC-EGFP

(150 copies/μl). For each PCR reaction, 2 μl of cDNA/DNA was added to 23 μl of the master

mix. The PCR was carried out with the following cycling conditions: initial denaturation at 98°C

for 30 seconds, followed by 35 cycles of denaturation at 98°C for 10 seconds, annealing at 57°C

for 10 seconds, extension at 72°C for 30 seconds, and a final elongation step at 72°C for 2

minutes. The reaction was then held at 4°C.

Magnetic bead clean-up

Agencourt Ampure XP beads (Cat No. Beckman Coulter A63880) (25 μl) were added to each

PCR product and mixed thoroughly. The mixture was incubated for 5 minutes at room

temperature and then placed on a magnetic rack to separate the beads. Once the solution became

clear, it was aspirated and discarded, leaving the pellet. Subsequently, 200 μl of 70% ethanol was

added to each sample without disturbing the pellet. The ethanol was aspirated and discarded.

Ethanol washing step was repeated once more. The pellet was allowed to dry for 2 minutes and

was then removed from the magnetic rack. The pellet was suspended in 50 μl of nuclease-free

water and incubated at room temperature for 5 minutes, followed by magnetic separation. Once

clear separation was achieved, the liquid was aspirated and placed into a labeled tube or a 96-

well PCR plate. The eluate was then quantified using the Qubit Invitrogen Qubit 4 Fluorometer

(Qubit 1x dsDNA HS Assay Kit (Thermofisher, Cat no. Q33231)).

Library preparation

The sequencing library was prepared using the ligation sequencing amplicons protocol (Version:

NBA_9170_v114_revL_15Sep2022). The NEBNext Ultra II End repair/dA-tailing Module

(NEB, Cat no. E7546) was used to add dA-tails to the ends of the amplicons. Subsequently,

unique barcodes from the Native Barcoding Kit 96 V14 (ONT, Cat No. SQKNBD114.96) were

ligated to the end-prepped amplicons using NEB Blunt/TA Ligase Master Mix (NEB, Cat no.

M0367). After barcoding, samples with unique barcodes were pooled together. Sequencing

adapters were then ligated to the pooled samples using the NEBNext Quick Ligation Module

(NEB, Cat no. E6056). Finally, the resulting library was quantified using Invitrogen Qubit 4

Fluorometer with the (Qubit 1x dsDNA HS Assay Kit (Thermofisher, Cat no. Q33231)).

 Sequencing

The prepared library was loaded onto a ONT R10.4.1 flowcell and sequenced on a GridION

platform for a minimum duration of 15 hours. Super-accurate basecalling model was used for

basecalling. Only reads with barcodes on both ends were used and barcodes were trimmed while

sequencing using the trim barcodes option in MinKNOW software.

Figure 1: BovReproSeq workflow. Total nucleic acid was extracted from samples using the MagMAX
CORE kit, followed by a two-step RT PCR with pooled primers. The generated amplicons were then
prepared for sequencing using the Oxford Nanopore Ligation Sequencing Kit. The prepared library was
loaded onto the R10.4 flowcell and sequenced on the ONT GridION sequencer. The resulting sequencing
data were analyzed using a custom bioinformatics pipeline, and a comprehensive results report was
generated.

Bioinformatics analysis

A Nextflow bioinformatics pipeline was developed for the analysis of sequencing data and

interpretation of results (Figure 2). The path to a directory containing subdirectories with fastq

files and the path to a Kraken2 Plus-PF-8 database (14) were used as the inputs for the pipeline.

Individual fastq files were merged followed by quality filtering (q20) for each sample using

nanoq (15)*. The resulting merged file was then mapped to a reference sequence containing the

amplicon sequences using *minimap2* (16). *Samtools* was used to generate read statistics and split

reads based on mapped amplicons (17). Primer trimming was performed on both ends of the

sequences using *ampliconclip* option in *samtools*. Consensus sequences were generated on the

split reads with a minimum mapping quality of 30 and a base quality of 10 using *samtools* (17).

These generated consensus sequences were then polished using *medaka* and compared against a

custom Blast database containing the BovReproSeq amplicon sequences using *ABRicate* (18) to

determine the presence or absence of the pathogen and internal amplification control (IC-EGFP).

Concurrently, taxonomic classification was performed on the raw reads using *Kraken2* (14), to

identify the unmapped reads and to support the results from *ABRicate*. The results from *kraken2*

were visualized as an interactive pie chart using *krona* (19). Output data from these analyses are

collated into a HTML report. All the quality metrics from *samtools* and *Nanostat* were captured

and visualised using *multiQC* (20, 21). The pipeline, along with detailed information, is

accessible on GitHub at https://github.com/dhineshp565/BovReproSeq.

Figure 2: BovReproSeq Bioinformatics workflow. Multiple FASTQ files generated for each sample were
merged into one and renamed. The merged file was then mapped against a reference using minimap2. The
generated SAM file was subsequently used to generate consensus and read statistics using Samtools. The
consensus sequence was further analyzed using MLST and Abricate to determine the type and identity of
each consensus. In parallel, merged reads were taxonomically classified using kraken2. Finally, all the
results were stitched together to create a comprehensive results report.

Real-time PCR

Total nucleic acid was extracted using Applied Biosystems MagMAX CORE Nucleic Acid

Purification Kit (Cat no. A32700) and used as the template for real-time PCR. For DNA-based

assays, real-time PCR was performed using Applied Biosystems TaqMan Fast Advanced Master

Mix (Cat No: 4444965), with specific primers and TaqMan probes tailored to each pathogen.

Detection of Bovine Viral Diarrhea Virus (*BVDv*) was carried out using the ThermoScientific

VetMAX-Gold BVDV PI Detection Kit (Cat no: 4413938).

Evaluation of read-count threshold and overall performance

Performance metrics, including sensitivity, specificity, accuracy, and precision were calculated

for each read-count threshold. Precision-recall curves were plotted to evaluate the performance

of the BovReproSeq method across different thresholds. The F1 score (harmonic mean of

precision and recall) was used to determine best read-count threshold. An F1 score of 1

represents perfect precision and recall, indicating optimal model performance, and a F1 score of

0 occurs when either precision or recall (or both) is zero, indicating poor model performance

(22). Matthew's correlation coefficient (MCC) was calculated to determine the overall

performance of the assay. MCC is a specialized application of Pearson's correlation coefficient,

designed for imbalanced binary classification scenarios (22, 23). It incorporates all four

categories of the contingency matrix (True Positives, False Positives, True Negatives, and False

Negatives) to provide a comprehensive score of overall performance (22, 23). The contingency

table, Precision-Recall curves, F1 score and MCC were generated using custom Python scripts

with the following libraries: pandas for data manipulation, scikit-learn for performance metric

calculations, and matplotlib for visualization.

Results

PCR optimization with synthetic controls

The BovReproSeq method was developed and optimized using synthetic controls before testing

the approach on clinical samples. Pooled plasmids containing synthetic control sequences for 12

pathogens and one internal amplification control (IC-EGFP) were used as a template to test two

different multiplex PCR kits (NEB_Q5 and TF_Plati), and three different annealing

temperatures. The total mapped reads obtained from each amplification protocol were as follows:

NEB_Q5_57°C: 439,971, TF_Plati_57°C: 409,795, NEB_Q5_60°C: 470,324, TF_Plati_60°C:

414,916, NEB_Q5_63°C: 458,083, and TF_Plati_63°C: 486,733. The sequencing depth of each

amplicon varied significantly in each combination (Figure 3). The NEB_Q5 with an annealing

temperature of 57°C yielded a higher read depth for most of the amplicons (17 out of 29) and a

balanced performance, with reads evenly distributed across different amplicons compared to

other treatments, which showed skewed distributions favoring specific amplicons (Figure 3). As

a result, the NEB Q5 High-Fidelity 2x Master Mix and an annealing temperature of 57°C were

used in subsequent experiments. The read depths for *Campylobacter fetus* targets glyA, aspA,

and *Ureaplasma diversum* 16S rRNA were particularly low (<500 reads) compared to other

targets in all six combinations of annealing temperatures and polymerases. To address this,

primer concentration of each primer was increased to 0.5 μM and new primer pool was made.

The multiplex PCR was then repeated with NEB Q5 High-Fidelity 2x Master Mix with an

annealing temperature of 57°C and new pooled primers (0.5 μM), which resulted in a significant

increase in the number of reads mapping to *Campylobacter fetus* glyA (40 reads to 1047 reads),

aspA (137 reads to 2670 reads), and *Ureaplasma diversum* 16S rRNA (44 reads to 1214 reads)

(Figure 4). As a result, primer concentration of 0.5 μM was used in subsequent experiments.

Following these optimizations, five additional pathogens (*Toxoplasma gondii*, *Sarcocystis* spp.,

Bacillus licheniformis, Trueperella pyogenes and Mycoplasma bovis) were added to the panel,

and new synthetic controls were created for these pathogens. The updated pooled synthetic

control was tested, and all 37 synthetic targets were detected.

A reverse transcriptase step was then added to the multiplex PCR step to enable the detection of

BVDv (RNA virus), and three different reverse transcriptase kits were tested on two *BVDv*

positive clinical samples. Gel electrophoresis results from the NEB LunaScript Multiplex One-

Step RT-PCR Kit (Cat no. E1555S) indicated a significant amount of short non-specific

amplifications, so the PCR product from this kit was not sequenced. PCR products from the NEB

LunaScript RT SuperMix Kit (Cat no. E3010L) and the NEB LunaScript RT Master Mix Kit

(Primer-free, Cat no. E3025L) with *BVDv*-specific primers were sequenced. The NEB

LunaScript RT Master Mix Kit (Primer-free) yielded 10,598 *BVDv*-specific reads in sample-1

and 7,385 *BVDv*-specific reads in sample-2. In contrast, the NEB LunaScript RT SuperMix Kit

with random hexamers produced 1,170 *BVDv*-specific reads in sample-1 and 2,567 *BVDv*-

specific reads in sample-2 (Table S4). A control experiment without the RT step showed no

detection of *BVDv* in either sample. Despite the lower read depth for *BVDv*, the NEB LunaScript

RT SuperMix Kit (Cat no. E3010L) was selected because it successfully amplified *BVDv* RNA

in clinical samples and allows for the potential detection of additional pathogens not included in

the panel, due to the presence of random hexamers in the mix.

Figure 3: Comparison of sequencing depth of amplicons produced with NEB Q5 High-Fidelity 2x Master
Mix and TF Invitrogen Platinum superfi ii polymerase, annealing temperatures of 57°C, 60°C and 63°C,
and primer concentration of 0.015 μM. NEB Q5 High-Fidelity 2x Master Mix at 57°C consistently
produced higher read depths across most amplicons.

Figure 4: Comparison of sequencing depth for amplicons produced with two different primer
concentrations (0.015 μM and 0.5 μM) using NEB Q5 High-Fidelity 2x Master Mix and an annealing
temperature of 57°C. The higher primer concentration of 0.5 μM consistently yielded greater read depths
across most amplicons compared to the lower concentration of 0.015 μM.

IC-EGFP titration and Repeatability

An internal amplification control was included in the BovReproSeq panel to rule out false negatives caused by inhibiting factors such as humic acid and urea in clinical samples. The amount of IC-EGFP to be spiked into each reaction was determined experimentally, as excessive amounts could interfere with the detection of targets of interest, while insufficient amounts might go undetected.

To determine the optimal quantity of IC-EGFP to be spiked into each sample, a titration experiment was conducted using two concentrations of IC-EGFP: 150 copies/reaction and 15 copies/reaction. A mock *Neospora caninum* positive sample was prepared by spiking 10 μl of *Neospora caninum* ATCC 50845 culture into 90 μl of placenta matrix (clarified tissue homogenate) confirmed negative by current diagnostic methods (Table 1). This mock sample was serially diluted (10-fold dilution) using placenta matrix (clarified tissue homogenate) as the diluent to maintain consistent matrix composition across dilutions. Total nucleic acid (DNA/RNA) was extracted from the dilutions, and BovReproSeq PCR was performed in triplicate for each of the two IC-EGFP concentrations. For each concentration, a sequencing library was prepared and sequenced on separate flow cells. Real-time PCR (*Neospora caninum)* was performed in triplicate to determine the Ct value of each dilution.

Both pan-Coccidia and *Neospora caninum*-pNC-5 gene targets were consistently detected in all replicates and dilutions up to a Ct value of 32 (10^{-5} dilution) in both experiments demonstrating the repeatability of the assay (Figure 5A, 5B). However, for dilutions with Ct values above 32, detection of both *Neospora caninum* targets was inconsistent, occurring only in one or two of the replicates. As the concentration of *Neospora caninum* decreased in the dilutions, the number of IC-EGFP reads increased in both experiments. The IC-EGFP reads were at their lowest when the number of reads and concentration of *Neospora caninum* were at their highest (Ct 18.25). Specifically, in the 15 copies/reaction experiment, there were 23 IC-EGFP reads out of 42,275 total reads, while in the 150 copies/reaction experiment, there were 2,081 IC-EGFP reads out of 51,175 total reads. In both experiments, IC-EGFP reads stabilized around a dilution of 10^{-5}. The experiment with 15 copies of IC-EGFP per reaction demonstrated better read depth for *Neospora*

caninum, particularly in dilutions with lower pathogen load (Ct 36.56). At this dilution, the 15

copies/reaction experiment yielded 4,021 *Neospora caninum* reads out of 12,932 total reads,

compared to only 21 *Neospora caninum* reads out of 85,252 total reads in the 150 copies/reaction

experiment. Moreover, *Neospora caninum* was detected by BovReproSeq in dilutions 10^{-7} and

10^{-8} which were not detected with real-time PCR. Although these results suggest that the

BovReproSeq method is more sensitive than real-time PCR, it is important to note that these

experiments used samples spiked with live organisms. The sensitivity may vary in actual clinical

samples, where factors such as sample type, sample matrix and presence of inhibitors could

influence detection limits. Based on these results, 15 copies of IC-EGFP per reaction was

selected as the optimal concentration for subsequent experiments, as it provided a better balance

between internal amplification control and pathogen detection.

Figure 5: Comparison of mapped reads in serially diluted mock *Neospora caninum* positive samples
spiked with 150 copies (A) and 15 copies (B) of IC-EGFP per reaction. Each dilution was tested in
triplicate. The x-axis shows mean Ct values from real-time PCR of serial dilutions of the mock sample.
Error bars represent the standard deviation of read counts across triplicates. *Neospora caninum* was

consistently detected in all replicates up to Ct of 32, with inconsistent detection in subsequent dilutions.
15 copies of IC-EGFP per reaction yielded higher read depth for *Neospora caninum* in higher dilutions
than 150 copies per reaction.

Specificity evaluation

A total of 29 clinical samples, both positive and negative for BovReproSeq targets, along with

no-template controls (NTC) and pooled BovReproSeq synthetic positive controls, were tested to

determine the specificity of the assay. Results from the BovReproSeq method matched current

diagnostic methods for all samples. However, most of the samples showed a high abundance of

reads mapping to the *Campylobacter jejuni* amplicon (cjejuni23s). Manual analysis of the

consensus sequence using BLAST revealed that these reads did not correspond to

Campylobacter jejuni. Instead, they matched other *Campylobacter* species and *Campylobacter*-

like organisms. Similar non-specificity issues were observed with the Tpyo-cpn60 target, as

reads mapping to this target did not match *Trueperella pyogenes* reference sequences and

resulted in poor consensus sequences. Additionally, in *Mycoplasma bovis* (Mbovis) positive

clinical samples, the Mbovis gltX target was consistently undetected, and the gspA target was

detected with only a very low number of reads. Due to the non-specificity of cjejuni23s, Tpyo-

cpn60, and the poor performance of both Mbovis targets, these primers were replaced with more

specific targets to improve the overall assay performance. Synthetic controls were developed for

the newly added targets, and a new set of pooled controls was made (Table Sl). This updated

pooled synthetic control and the clinical samples were then tested with BovReproSeq method.

All 37 synthetic controls including the replacements were detected from a single PCR reaction

(Figure 6).

Figure 6: Comparison of read counts for each synthetic control from a single PCR reaction, where the
final version of the pooled control was used as a template. All 37 synthetic targets were detected from a
single PCR reaction.

Performance on clinical samples

To evaluate the performance of the BovReproSeq method against current diagnostic methods

(Table 1), 116 clinical samples with existing results (for tests requested by veterinarians and

pathologists) were tested using the BovReproSeq approach. BovReproSeq PCR was performed

and PCR amplicons from these samples were pooled into four libraries, loaded onto four R10.4

flow cells, and sequenced. The data was analyzed using the BovReproSeq bioinformatics

pipeline. The number of raw reads per sample varied significantly, ranging from 6,636 to

642,695 reads, with a median of 110,509 reads. The median total bases generated per sample was

105.5 Mb, and the median raw read quality score was 19.6. Positive controls had reads and

consensus sequences mapping to all 37 synthetic controls, while negative controls (NTCs) were

negative for all pathogens. Two samples lacked IC-EGFP reads, indicating potential PCR

inhibition, and were omitted from further analysis. The results from the BovReproSeq method

matched the existing results from current methods for approximately 93% of the samples

(139/150, Table 2). The kappa value of 0.85 indicated almost perfect agreement between the two

methods, however, there were 11 false negatives. The Ct values from the current diagnostic

PCRs for positive samples ranged from 12 to 37, with all false negatives having Ct values

between 33 and 37, which is consistent with low pathogen load (Figure 7). For the six samples

submitted for *Campylobacter* spp. PCR, the BovReproSeq method successfully differentiated

Campylobacter fetus subspecies in all cases and identified the MLST type in five of them.

Additionally, BovReproSeq identified *BVDv*-type 2 in two samples among those tested for

BVDv.

Table 2: Comparison of results between current laboratory methods and BovReproSeq. It includes
only the results for which specific testing was requested.

		BovReproSeq results		
		Positive	Negative	Total
Current lab methods	Positive	52	11	63
	Negative	0	87	87
	Total	52	98	150

Figure 7: Real-time PCR Ct values of the samples and the corresponding results from the BovReproSeq method. Ct values for the positive samples ranged from 12 to 36, while all the false negatives had a Ct value close to 35 or above indicating that these samples had a very low pathogen load. Additionally, some of these false negative samples had a high abundance of reads mapping to pathogens such as *Ureaplasma diversum* and *Trueperella pyogenes*.

Notably, in 43 samples, additional pathogens were detected using the BovReproSeq method that were not part of the initial testing request (Table S2). In most cases, these additional pathogens were either *Ureaplasma diversum* or *Trueperella pyogenes*. However, in seven cases where the initial test requested was negative, abortifacient pathogens such as *Coxiella burnetii, Campylobacter jejuni*, or *Campylobacter fetus* were identified (Table 3). Subsequent real-time PCR results confirmed the presence of these additional pathogens.

436 Table 3: Comparison of results from initial test request and BovReproSeq method.

Tests requested by veterinarians	Results from initial request	Results BovReproSeq
Chlamydia abortus, Coxiella burnetii	Negative	*Campylobacter jejuni*
Chlamydia abortus, Coxiella burnetii	Negative	*Campylobacter jejuni*
Chlamydia abortus	Negative	*Campylobacter jejuni*
BVDv, Campylobacter fetus subsp. *venerealis, Coxiella burnetii, BoHV-1, Tritrichomonas fetus*	Negative	*Trueperella pyogenes*
Coxiella burnetii	Negative	*Chlamydia abortus, Trueperella pyogenes*
Coxiella burnetii	Negative	*Campylobacter fetus* subsp. *fetus*
Ureaplasma diversum	Negative	*Coxiella burnetii*
Bovine alphaherpesvirus 1 (BoHV-1)	Positive	*Mycoplasma bovis, Coxiella burnetii, Trueperella pyogenes*
Bovine alphaherpesvirus 1 (BoHV-1)	Positive	*Ureaplasma diversum, Mycoplasma bovis, Trueperella pyogenes*

The presence of additional pathogens and the detection of pathogens in samples where the initial
test request was negative indicated that to comprehensively evaluate the BovReproSeq method,
each sample had to be tested for all 17 pathogens using the conventional methods. This would
provide a true comparison between the current methods and the BovReproSeq method. This was
not possible as some of the samples used were archived nucleic acid samples collected over a
long period, limiting our ability to apply methods other than PCR. Real-time PCR assays were
available for only 10 BovReproSeq pathogens (*BVDv, Campylobacter jejuni, Campylobacter*
fetus subsp. *venerealis, Neospora caninum, Toxoplasma gondii, Coxiella burnetii, Chlamydia*
abortus, Tritrichomonas fetus, Ureaplasma diversum, Mycoplasma bovis). Therefore, real-time
PCR was performed on samples (109 samples) that had enough nucleic acid to detect the
presence of these 10 pathogens, providing 1090 results. Results from each PCR were collated
into a single results table (1090 PCR results). The compiled real-time PCR results for 10
pathogens across 109 clinical samples showed 1016 negative and 74 positive outcomes. These
real-time PCR results were then compared to the results from the BovReproSeq method. The
results from the BovReproSeq method matched the current methods for 98.8% of the samples
(1077/1090, Table 4). There were 13 false negative results. All false negative results occurred in
samples with Ct values between 33 and 37 except for one sample with a Ct value of 29 for
BVDv. In this case, four other pathogens (*BoHV-1, Mycoplasma bovis, Coxiella burnetii* and

Trueperella pyogenes) were detected in high abundance, and the pathologist had reported lesions

characteristic of *BoHV-1*. The kappa value of 0.90 indicated almost perfect agreement between

the two methods. Due to the imbalance between positive and negative results, the kappa value

may not accurately reflect the performance of the assay *(24)*. Therefore, Matthew's Correlation

Coefficient (MCC) was calculated. MCC value of approximately 0.90 indicated excellent overall

performance of the assay.

Table 4: Comparison of results between Real-time PCR assay of 10 pathogens and BovReproSeq.

		BovReproSeq results		
		Positive	Negative	Total
Real-time PCR results	Positive	61	13	74
	Negative	0	1016	1016
	Total	61	1029	1090

Evaluation of read-count threshold and assay performance

Read-count thresholds represent the minimum number of reads required to classify a sample as

positive or negative. To determine whether a read-count threshold of 10 reads is optimal for

classifying a sample as positive for a target, sequence data from clinical samples were analyzed

using the BovReproSeq pipeline with 12 different thresholds (ranging from 1 read to 100 reads).

The results from each threshold were then compared to the available real-time PCR results. For

each read-count threshold, a contingency matrix (2x2 table) was created to check the agreement

of results between the two methods. Due to the imbalance between positive and negative results,

a precision-recall curve was used instead of a receiver operator characteristic curve to determine

the optimal read-count threshold (25, 26). Precision (positive predictive value) and recall

(sensitivity) were calculated for each read-count threshold, and a precision-recall curve was

plotted (Figure 8). At the lowest threshold of one read, precision was at its lowest around 48%,

while sensitivity peaked at 95%. Increasing the read-count threshold to five reads resulted in a

substantial improvement in precision (86%) but a marked reduction in sensitivity (85%).

Precision reached 100% at a threshold of 10 reads and remained consistent across remaining

thresholds, but sensitivity declined with increasing read-count thresholds and was lowest (70%)

at a threshold of 100 reads. The threshold of 10 reads yielded the optimal balance between

precision and recall with the maximum F1 score of 0.90. At the read-count threshold of 10 reads,

the sensitivity of the assay was approximately 82%, while specificity was 100%. The positive

predictive value was 100%, and the negative predictive value was 98.7%. The overall accuracy

of the assay was 98.8%. Based on these results, a read count threshold of 10 was determined to

be optimal for the BovReproSeq method.

Figure 8: Precision-Recall curve. The graph shows the trade-off between precision (positive predictive
value) and recall (sensitivity) at various read-count thresholds. The grey line represents the precision-
recall curve, with data points corresponding to different read-count threshold (1x to 100x). The optimal
performance point (10x) is highlighted, showing a best F1 score of 0.90 with a precision of 1.00 and
recall of 0.82.

Discussion

Our study demonstrates the development and validation of a syndromic next-generation sequencing panel (BovReproSeq) designed to simultaneously detect 17 pathogens associated with bovine reproductive failure. Initial testing with a pooled synthetic control successfully identified all 37 synthetic targets in the products of a single PCR reaction, demonstrating the multiplexing ability of the assay. The results from BovReproSeq testing of 116 clinical samples matched with existing results from current diagnostic methods for 93% of samples. Additionally, the BovReproSeq method detected pathogens not originally requested for testing, indicating possible mixed infections (Table 3, S2). This ability of the BovReproSeq to identify additional pathogens highlights its advantage over current single-plex diagnostic methods by providing broader detection without iterative testing.

In addition to detection of 17 pathogens, BovReproSeq method enables the typing of *BVDv* (type-1 and type-2) and *Campylobacter fetus* (MLST), aiding epidemiological studies. Since this assay involves random hexamers and multiple primers, there is potential to detect pathogens not included in the panel, further broadening the scope of the assay. The entire BovReproSeq workflow (Figure 1) can be completed within 48 hours of receiving the sample and can be cost-effective if multiple samples are processed within a single flow cell.

The BovReproSeq method has some limitations, particularly in samples with high Ct values (close to or above 35) indicating that very low pathogen concentrations in the sample may not be detected (Figure 7). This finding is consistent with a similar study in which a targeted next-generation sequencing method was not able to detect vector-borne pathogens in canine samples with Ct values greater than 35 (9). It is worth noting that PCR artifacts and cross-contamination can sometimes lead to amplification at Ct values >35, and samples with Ct values >35 are often considered "suspect" rather than "positive" in diagnostic laboratories. Moreover, pathogens like *Coxiella burnetii* and *Chlamydia abortus* are known to occur in healthy animals in low numbers and their presence in low quantities without associated lesions is generally not considered as the cause of the abortion (27). In most infectious abortion cases, high pathogen loads with characteristic lesions or signs are typical. Thus, the failure of BovReproSeq to detect very low

abundance pathogens may not be a clinically significant limitation. Notably, we had only one

sample with a Ct value of 29 for *BVDv* where BovReproSeq failed to detect the virus. In this

case, four other pathogens in the BovReproSeq panel (BoHV-1, *Mycoplasma bovis, Coxiella*

burnetii and *Trueperella pyogenes*) were detected in high abundance, and the pathologist had

reported lesions characteristic of BoHV-1 (Table 3). Similarly, we frequently detected pathogens

such as *Ureaplasma diversum* and *Trueperella pyogenes*, and in a couple of cases, their

abundance had a negative impact on the detection of the causative pathogen. This suggests that

multiple pathogens in high abundance in a sample may impede the detection of pathogens in low

abundance.

The analytical sensitivity of our BovReproSeq method is lower compared to PCR assays and it

could be improved by reducing the number of samples per flow cell and extending sequencing

time to improve the sequencing depth of low abundance targets. The one-pot multiplex PCR

could also be split into multi-pot PCR with smaller primer pools to improve sensitivity, and the

number of PCR cycles could be increased from 35 to 40 to increase the number of copies of the

amplicons. Regarding primers and PCR target selection, selecting specific genes of pathogens

rather than conserved housekeeping genes was more successful, as the primers targeting

conserved genes (*T. pyogenes* cpn60 and *C. jejuni* 23S rRNA gene) were more likely to amplify

sequences from related organisms present in the sample and obscure the targeted pathogens of

interest. This observation should be factored into any future additions to or modification of the

panel.

Similar studies have been published recently, but our research presents a few methodological

differences and advancements (Anis et al., 2018; Kattoor et al., 2022). Anis et al. developed a

targeted NGS method for the simultaneous detection of 43 common bovine and small-ruminant

pathogens. Their primer design was a collaboration with the White Glove Team (Ion Torrent;

Thermofisher Scientific) using Ion Ampliseq Designer (Ion Torrent; Thermofisher Scientific,

Waltham, MA). Kattoor et al. focused on the comprehensive detection of 17 vector-borne

pathogens in canines. The primers in their study were designed with Thermofisher Scientific's

AgriSeq Bioinformatics team, and the primer sets are now proprietary items of Thermofisher

(Kattoor et al., 2022). Both studies used Ion Torrent Suite and Geneious software for

bioinformatics and neither includes an internal amplification control. In our study, we have used

previously published primers and further evaluated them based on *in silico* PCR results.

Additionally, in the BovReproSeq bioinformatics pipeline, we have used open-source tools and

packaged them as one Nextflow pipeline that produces a readable results report and the pipeline

can be scaled up to run on any platform (Paolo Di Tommaso et al., 2017). Our pipeline is

currently available on GitHub, and the primer information is included in the supplementary

section (Table S1) to ensure open access to our methods and facilitate reproducibility.

The previously published bovine and canine pathogen sequencing panels used Thermofisher Ion

Torrent technology with IonChef for sequencing multiplex PCR products. This second-

generation sequencing technology has limitations including short reads (<400 bp), low

throughput and poor accuracy in homopolymer regions. BovReproSeq uses Oxford Nanopore

technology (ONT), a long-read approach that enables sequencing of longer gene segments than

the Ion Torrent platform and allows for real-time sequencing and analysis, resulting in faster

turnaround times. Additionally, BovReproSeq uses only full-length reads to generate the

consensus sequences resulting highly accurate results. The use of long reads allows us to perform

MLST typing, as most MLST fragments are around 600 bp, which would be challenging with

Ion Torrent technology. Although the raw read accuracy with ONT was known to be lower

compared to other platforms, the raw read quality has significantly improved with the newest

version of the R10 nanopore and the associated kit 14 chemistry (28, 29). In our BovReproSeq

pipeline, we exclusively used raw reads with a quality score of 20 or above (>99% accuracy) to

ensure that only highly accurate reads were used for downstream analysis.

The incorporation of an internal amplification control in the BovReproSeq assay allows the rule

out of false negatives due to PCR inhibition. The amount to be spiked into each reaction was

determined experimentally and to ensure repeatability, we performed this assay in triplicates on

serial dilutions with consistent results between the replicates (Figure 5A, 5B). Additionally, the

pooled synthetic positive control for the assay allows the detection of positive control

contamination since the sequences of the positive control amplicons are unrelated to the actual

biological targets. Finally, we analysed the sequence data generated from 109 clinical samples

using 12 different read-count thresholds to determine the optimal threshold and the overall

performance of assay, significantly enhancing the reliability and robustness of our results.

Conclusion

In conclusion, our study presents a significant improvement to diagnosis of infectious causes of

Bovine reproductive failure. The ability of the assay to detect 17 pathogens despite some

limitations, makes BovReproSeq panel a promising tool for veterinary diagnostics. This

approach could be applied to other syndromic diseases and could contribute to broader

improvements in animal health diagnostics. However, as with all nucleic acid-based methods, the

detection of a pathogen does not necessarily mean it is the cause of the disease and results from

the BovReproSeq method must be carefully interpreted with pathological findings and case

history.

Data availability

589 All synthetic control sequences, reference amplicon sequences, and the custom ABRicate

590 database with Accession numbers for each sequence, along with the Nextflow pipeline, are

591 available in the GitHub repository at https://github.com/dhineshp565/BovReproSeq.

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