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Characterizing Medical Countermeasure Efficacy Against Aerosol Administration Of Bacillus Cereus Biovar Anthracis Cameroon And Cote D'ivoire In The New Zealand White Rabbit Model.

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Bacillus anthracis is the causative agent of anthrax and was developed as a weapon by several former state bioweapons programs and used as a bioterror agent against the United States in 2001. The U.S. government (USG) has invested > \$900 million developing detection platforms, medical countermeasures (MCM), and risk models to mitigate potential consequences resulting from a bioterrorism event involving B. anthracis. Bacillus cereus biovar anthracis (Bcbva) is a variant of B. cereus that possesses the B. anthracis virulence factors, causes an anthrax-like disease in animals and is a Department of Health and Human Services (HHS) Tier 1 Select Agent. However, there were no reports on the effectiveness of MCMs developed for anthrax against Bcbva. As a result, the efficacy of anthrax MCMs against inhalational challenges of Bcbva Cameroon (CA) and Cote d'Ivoire (CI) in a New Zealand white rabbit model was evaluated. The results demonstrated that pre-exposure vaccination with Anthrax Vaccine Absorbed (AVA) and post-exposure prophylaxis of levofloxacin with or without AVA vaccination were effective against an aerosol challenge with a dose of ~200x inhalation median lethal dose with either Bcbva strain. Furthermore, host temperature responses and bacterial virulence factor expression were evaluated as function of treatment group and administered strain. The results from this study suggest that the current MCMs for anthrax would be effective at mitigating the consequences associated with exposure to Bcbva.

This work was funded under Agreement No. HSHQDC-15-C-00064 awarded to Battelle National Biodefense Institute (BNBI) by the Department of Homeland Security (DHS) Science and Technology Directorate (S&T) for the management and operation of the National Biodefense Analysis and Countermeasures Center (NBACC), a Federally Funded Research and Development Center. The views and conclusions contained in this document are those of the authors and should not be interpreted as necessarily representing the official policies, either expressed or implied, of DHS or the U.S. Government. The DHS does not endorse any products or commercial services mentioned in this presentation. In no event shall the DHS, BNBI, or NBACC have any responsibility or liability for any use, misuse, inability to use, or reliance upon the information contained herein. In addition, no warranty of fitness for a particular purpose, merchantability, accuracy, or adequacy is provided regarding the contents of this document.

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