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(Article begins on next page)

1 **Factors associated with pregnancy-associated glycoprotein (PAG) levels in plasma and**
2 **milk of Holstein cows during early pregnancy and their effect on the accuracy of**
3 **pregnancy diagnosis**

4 A. Ricci,*† P. D. Carvalho,* M. C. Amundson,* R. H. Fourdraine,† L. Vincenti,† and P. M. Fricke*¹
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6 *Department of Dairy Science, University of Wisconsin–Madison, Madison 53706

7 †Department of Veterinary Science, Università di Torino, Grugliasco 10090, Italy

8 ‡AgSource Laboratories, Menomonie, WI 54751

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10
11 **ABSTRACT**

12 Lactating Holstein cows (n = 141) were synchro- nized to receive their first timed artificial insemination
13 (TAI). Blood and milk samples were collected 25 and 32 d after TAI, and pregnancy status was
14 determined 32 d after TAI using transrectal ultrasonography. Cows diagnosed pregnant with singletons (n =
15 48) continued the experiment in which blood and milk samples were collected and pregnancy status was
16 assessed weekly using transrectal ultrasonography from 39 to 102 d after TAI. Plasma and milk samples
17 were assayed for pregnancy-associated glycoprotein (PAG) levels using commercial ELISA kits.
18 Compared to ultrasonogra- phy, accuracy was 92% for the plasma PAG ELISA test and 89% for the
19 milk PAG ELISA test 32 d after TAI. Plasma and milk PAG levels for pregnant cows increased from 25
20 d to an early peak 32 d after TAI. Plasma and milk PAG levels then decreased from 32 d after TAI to a
21 nadir from 53 to 60 d after TAI for the plasma PAG assay and from 46 to 67 d after TAI for the milk
22 PAG assay followed by an increase from 74 to 102 d after TAI. Overall, plasma PAG levels were
23 approximately 2-fold greater compared with milk PAG levels, and primiparous cows had greater PAG
24 levels in plasma and milk compared with multiparous cows. The incidence of pregnancy loss from 32 to
25 102 d after TAI based on ultrasonography was 13% for cows diagnosed with singleton pregnancies, and
26 plasma and milk PAG levels decreased to nonpregnant levels within 7 to 14 d after pregnancy loss. Both
27 plasma and milk PAG levels were negatively correlated with milk production for both primiparous and
28 multiparous cows. We conclude that stage of gestation, parity, pregnancy loss, and milk production were
29 associated with plasma and milk PAG levels after TAI similarly. Based on plasma and milk PAG profiles,
30 the optimal time to conduct a first pregnancy diagnosis is around 32 d after AI coinciding with an early
31 peak in PAG levels. Because of the occurrence of pregnancy loss, all pregnant cows should be retested 74
32 d after AI or later when plasma and milk PAG levels in pregnant cows have rebounded from their nadir.

33 **Key words:** pregnancy diagnosis, pregnancy-associat- ed glycoprotein, milk, plasma

34

35 INTRODUCTION

36

37 Identification of nonpregnant dairy cows early after AI improves reproductive efficiency and
38 pregnancy rate by decreasing the interval between AI services, thereby increasing the AI service rate
39 (Fricke, 2002). Thus, new technologies to identify nonpregnant dairy cows and heifers early after AI
40 may play a key role in management strategies to improve reproductive efficiency and profitability
41 on dairy farms. Chemical tests for early pregnancy diagnosis use qualitative or quantitative measures
42 of reproductive hormones at specific stages after AI or detect conceptus-specific substances in ma-
43 ternal circulation as indirect indicators of the presence of a viable pregnancy. Assays for detecting
44 pregnancy-associated glycoprotein (**PAG**) levels in maternal circulation originating from
45 mononucleated and binucleated cells of the embryonic trophoblast have been developed and
46 commercialized to determine pregnancy status in cattle (Sasser et al., 1986; Zoli et al., 1992;
47 Green et al., 2000). Pregnancy-specific protein-B (**PSPB**) was the first pregnancy-specific marker
48 identified in cattle (Butler et al., 1982) and was later found to have the same N-terminal amino acid
49 sequence as bovine PAG-1 (Xie et al., 1991; Lynch et al., 1992). Subsequently, PSPB was
50 reclassified as bovine PAG-1, and an ELISA was developed to detect PAG as a method for early
51 pregnancy diagnosis in cattle (Green et al., 2005). Pregnancy-associated glycoproteins belong to a
52 large family of inactive aspartic proteinases expressed by the placenta of domestic ruminants
53 including cows, ewes, and goats (Haugejorden et al., 2006). In cattle, the PAG gene family
54 comprises at least 22 transcribed 2502 genes as well as some variants (Telugu et al., 2009). Mean
55 PAG concentrations in cattle increase from 15 to 35 d in gestation; however, variation in plasma
56 PAG levels among cows precludes PAG testing as a reliable indicator of pregnancy until about 26
57 to 30 d after AI (Zoli et al., 1992; Humblot, 2001). Assessment of pregnancy status through
58 detection of placental PAG levels in maternal blood (Sasser et al., 1986; Zoli et al., 1992; Green et
59 al., 2005) is now used to evaluate pregnancy status within the context of a reproductive management
60 scheme on commercial dairies (Silva et al., 2007, 2009; Sinedino et al., 2014). A commercial test
61 for detecting PAG levels in milk (The Idexx Milk Pregnancy Test, Idexx Laboratories,
62 Westbrook, ME) has been developed and marketed to the dairy industry and is now being assessed
63 in field trials (Leblanc, 2013). Few studies, however, have reported factors associated with PAG
64 levels in blood and milk of dairy cows early in gestation and the effect these factors may have
65 on the accuracy of pregnancy diagnosis. The objectives of this experiment were to assess factors

66 associated with PAG levels in plasma and milk during early gestation in Holstein cows and to
67 determine the accuracy of pregnancy outcomes based on PAG levels in plasma and milk compared
68 with pregnancy outcomes based on transrectal ultrasonography.

69

70 **MATERIALS AND METHODS**

71 All experimental procedures were approved by the Animal Care and Use Committee of the College of
72 Agricultural and Life Sciences at the University of Wisconsin–Madison.

73

74 *Synchronization of Ovulation and Timed AI*

75 Cows were housed at the University of Wisconsin–Madison Dairy Cattle Research Center (Arlington, WI)
76 in free-stall barns with feedline headlocks. Cows were fed a TMR ad libitum formulated to meet or exceed
77 NRC requirements (NRC, 2001) for high-producing dairy cows. Lactating Holstein cows (n = 141; 41
78 primiparous and 100 multiparous) from 53 ± 3 DIM were synchronized for first timed AI (TAI) using
79 a Double-Ovsynch protocol (Souza et al., 2008). Briefly, cows received the first GnRH injection (100 μ g
80 of gonadorelin diacetate tetrahydrate; Cystorelin; Merial, Duluth, GA) of the Presynch portion of the
81 Double-Ovsynch protocol at 53 ± 3 DIM, followed by an injection of PGF_{2 α} (25 mg of dinoprost
82 tromethamine; Lutalyse; Zoetis, New York, NY) 7 d later and a GnRH injection 72 h after PGF_{2 α} .
83 Seven days later, cows received an Ovsynch-56 protocol [GnRH (G1) at 70 ± 3 DIM, PGF_{2 α} 7 d later,
84 GnRH 56 h after PGF_{2 α} , and AI 16 to 20 h later], and all cows received a TAI at 80 ± 3 DIM. Three
85 experienced AI technicians performed all inseminations using sires with high genetic merit and proven
86 fertility.

87

88 *Pregnancy Diagnosis*

89 Pregnancy diagnosis was initially performed 32 d after TAI for all cows using a portable scanner (Ibex
90 Pro; E. I. Medical Imaging, Loveland, CO) equipped with a 7.5-MHz linear-array transducer. A positive
91 pregnancy diagnosis was based on visualization of a corpus luteum on the ovary ipsilateral to the fluid-filled
92 uterine horn containing an embryo with a heartbeat. Pregnant cows diagnosed with singletons (n = 48) based
93 on transrectal ultrasonography 32 d after TAI continued the experiment in which pregnancy status was
94 assessed weekly using transrectal ultrasonography from 39 to 102 d after TAI. Cows diagnosed pregnant
95 based on the presence of an embryo with a heartbeat and then diagnosed not pregnant at the subsequent
96 examination based on the presence of a dead embryo or the absence of an embryo in the previously gravid
97 uterine horn were considered to have undergone pregnancy loss.

98

99 ***Blood and Milk Sampling***

100 Blood and milk samples were collected weekly from 25 to 102 d after TAI. From 32 to 102 d after TAI,
101 blood and milk samples were collected from cows on the same day that pregnancy status was assessed
102 using transrectal ultrasonography once a week. Blood samples were collected by venipuncture of the
103 median coccygeal artery or vein into 10-mL evacuated plasma collection tubes (Vacutainer; BD,
104 Franklin Lakes, NJ) and immediately placed on ice. Blood samples were centrifuged ($1,600 \times g$; 4°C)
105 for 20 min, and plasma was harvested and stored at -20°C in 2-mL Safe-Lock Tubes (Eppendorf AG,
106 Hamburg, Germany). Composite milk samples (35 mL) were collected during the morning milking in
107 the parlor. Milk samples were collected into 40-mL polypropylene milk-collection vials containing 50 μL of
108 2-bromo-2 nitropropane-1, 3-diol (18% solution, Bronolab-W II, D&F Control Systems Inc., Dublin, CA)
109 as a preservative. Milk samples were immediately placed on ice and delivered to AgSource Laboratories
110 (Verona, WI) within 2 h of collection.

111

112 ***Plasma and Milk PAG ELISA***

113 After completion of sample collection at the end of the experiment, frozen plasma samples were
114 shipped overnight in a cooled container by courier from the University of Wisconsin to Idexx
115 Laboratories for analysis of plasma PAG levels using a commercial ELISA kit (the Idexx Bovine
116 Pregnancy Test, Idexx Laboratories). Milk samples were delivered weekly to AgSource head-
117 quarters (Verona, WI) on the day of collection throughout the experiment and then to AgSource Laboratories
118 (Menomonie, WI) for analysis of milk PAG levels using a commercial ELISA kit (The Idexx Milk
119 Pregnancy Test, Idexx Laboratories). Plasma and milk PAG ELISA tests were conducted according to
120 the manufacturer's instructions by trained technicians who were blinded to the pregnancy status of the
121 cows. Briefly, a microtiter plate format was configured by coating an anti-PAG monoclonal antibody
122 onto the plate. The PAG monoclonal antibody was raised against the PAG-55 protein fraction comprising
123 PAG-4, PAG-6, PAG-9, PAG-16, PAG-18, and PAG-19 (Nagapan et al., 2009). After incubation of
124 the diluted test sample in the coated well, captured PAG was detected with a PAG-specific antibody
125 (detector solution) and horseradish peroxidase conjugate. Unbound conjugate was washed away, and
126 3,3',5,5'-tetramethylbenzidine substrate was added to the wells. Color development was proportional
127 to the amount of PAG in the sample and was measured using a spectrophotometer. Results were
128 calculated from the optical density (OD) of the sample [corrected by subtraction of the reference
129 wavelength OD of the sample (S) minus the OD of the negative control (N) at 450 nm (with both

values corrected by subtraction of the reference wavelength OD of the negative control)], which resulted in an S-N value. Each microplate included negative and positive controls. Pregnancy outcomes were determined based on cutoff values determined by the PAG ELISA manufacturer. For the plasma PAG ELISA, when the S-N value was <0.300 , the cow was classified “not pregnant”; when the S-N value was >0.300 to <1.000 , the cow was classified “recheck”; and when the S-N value was ≥ 1.000 , the cow was classified “pregnant.” For the milk PAG ELISA, when the S-N value was <0.100 , the cow was classified “not pregnant”; when the S-N value was >0.100 to <0.250 , the cow was classified as “recheck”; and when the S-N value was ≥ 0.250 , the cow was classified “pregnant.”

Milk Production

Cows were milked twice daily at approximately 12-h intervals, and milk weights were recorded at each milking and stored in an on-farm dairy-management software program (DairyComp 305; Valley Agricultural Software, Tulare, CA). Milk weights from the 7-d period preceding the weekly milk and plasma sample collections were extracted from the software program and used to calculate weekly average milk production.

Statistical Analyses

Two cows had extremely high weekly milk PAG S-N values from 74 to 102 d after TAI. Based on an inter-quartile range analysis (PROC UNIVARIATE of SAS), data from these 2 cows were classified as outliers and were excluded from the analysis of milk PAG S-N profiles and from the analysis of the correlation between plasma and milk PAG S-N values. Pregnancy outcomes for these 2 cows were included in the analysis of milk PAG pregnancy outcomes. Before statistical analysis for S-N values for the plasma and milk PAG ELISA tests, normality of the data set was tested using the Shapiro-Wilk statistic and graphical methods obtained with PROC UNIVARIATE of SAS. Because nonnormality of the data was detected, data were transformed to ranks. After data transformation, differences in weekly plasma and milk S-N values from 25 to 102 d after TAI for pregnant cows were determined using ANOVA with repeated measures using PROC MIXED of SAS. The models contained the fixed effects of parity (primiparous vs. multiparous), time, and their interaction, whereas cow within parity was used as a random effect in the model. The correlation between plasma and milk PAG S-N values was analyzed using PROC CORR of SAS. Pregnancy outcomes based on transrectal ultrasonography were considered the reference test (gold standard) to which outcomes from the plasma and milk PAG tests were compared by calculating the

162 sensitivity, specificity, positive predictive value (**PPV**), negative predictive value (**NPV**), and
163 accuracy. A total of 141 plasma samples were included in this analysis; however, because of
164 missing milk samples (n = 6), a total of 135 milk samples were analyzed. The sensitivity of the
165 assays was expressed as the proportion of pregnant cows with a positive PAG ELISA test result
166 [number of true-positive results/(number of true-positive results + number of false-negative re-
167 sults)]. Test specificity was calculated as the proportion of nonpregnant cows with a negative test
168 result [number of true-negative results/(number of true-negative results + number of false-positive
169 results)]. The PPV was calculated as the proportion of cows testing pregnant that were truly
170 pregnant [number of true-positive results/(number of true-positive results + number of false-positive
171 results)], and the NPV was calculated as the proportion of cows testing negative that were not truly
172 pregnant [number of true-negative results/(number of true-negative results + number of false-
173 negative results)]. Test accuracy was defined as the proportion of pregnant and nonpregnant cows
174 correctly identified by the test [(number of true-positive results + number of true-negative
175 results)/(number of true-positive results + number of true-negative results + number of false-
176 positive results + number of false-negative results); Martin et al., 1987; Smith, 1991;
177 Noordhuizen et al., 2001]. The rate of false-positive results is the likelihood of a positive result in
178 cows known not to be pregnant, and this rate is related to the test specificity (rate of false
179 positive = 1 – specificity). The rate of false-negative results is the likelihood of a negative result in
180 cows known to be pregnant, and this rate is related to the test sensitivity (rate of false-negative results
181 = 1 – sensitivity). The kappa statistic in PROC FREQ of SAS was used to analyze agreement
182 between reference pregnancy outcomes based on transrectal ultrasonography and the plasma and
183 PAG ELISA pregnancy outcomes. A kappa value of 1 indicates perfect agreement and a value of 0
184 indicates no agreement beyond chance (Martin et al., 1987; Noordhuizen et al., 2001). In comparing
185 tests, a kappa value of 0.4 to 0.5 indicates a moderate level of agreement, 0.5 to 0.6 indicates good
186 agreement, and >0.6 indicates a high level of agreement (Martin et al., 1987). Based on a sample-size
187 calculation (Watson and Petrie, 2010), a minimum of 123 cows are required to result in a kappa of
188 0.8 based on a confidence interval of 0.2 and an estimated true proportion of positives of 0.4.

193 **RESULTS AND DISCUSSION**

194 *Synchronization and Pregnancy Outcomes*

195 Of the 141 cows enrolled in the Double Ovsynch protocol for first TAI, 3% (4/141) failed to synchronize
196 because of lack of complete luteal regression or lack of ovulation after the last GnRH injection, and
197 these 4 cows were removed from all analyses. Overall, 42% (57/137) of synchronized cows were diagnosed
198 pregnant 32 d after TAI. Two cows were diagnosed with twins based on ultrasonography 32 d after TAI, and
199 these 2 cows were removed from all subsequent analyses. Overall, 87% (48/55) of pregnant cows
200 maintained a singleton pregnancy from 32 to 102 d after TAI. Thus, the incidence of pregnancy loss from 32
201 to 102 d after TAI for cows diagnosed with singleton pregnancies was 13% (7/55).

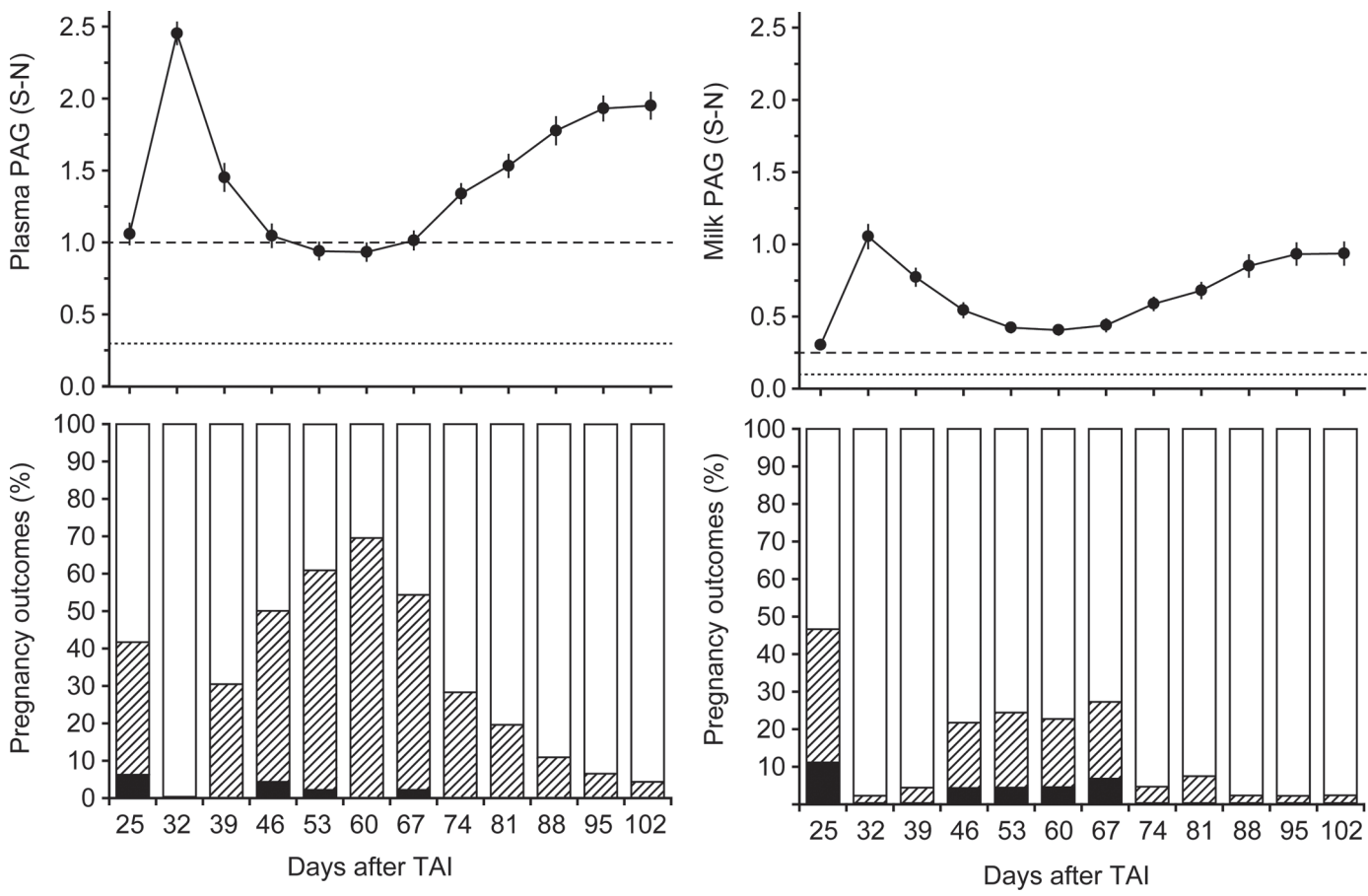
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203 *Plasma and Milk PAG Profiles*

204 To determine the weekly PAG profile in plasma and milk during the first trimester of gestation, data from
205 cows that maintained a singleton pregnancy from 25 to 102 d after TAI (n = 48) were analyzed
206 (Figures 1 and 2). Overall, the weekly PAG profile in both plasma (Figure 1, upper panel) and milk
207 (Figure 2, upper panel) from 25 to 102 d after TAI for pregnant cows was similar; however, plasma PAG
208 levels were approximately 2-fold greater compared with milk PAG levels. Temporal PAG profiles from
209 the present study are similar to other studies reporting PAG profiles in serum. In the first study to
210 evaluate PSPB concentrations throughout gestation in Holstein cows (Sasser et al., 1986), serum PSPB
211 (i.e., PAG-1) concentrations were detectable in some but not all cows 15 d after AI, increased to about 40
212 d after AI and stayed constant until about 70 d, and then steadily increased until the end of gestation. A
213 study that evaluated the same commercial PAG ELISA test kits evaluated in the present experiment
214 reported similar relative PAG profiles (S-N values) in both plasma and milk (Lawson et al., 2014). In the
215 present study, plasma PAG levels were affected by both week after TAI ($P < 0.01$) and parity ($P = 0.009$),
216 and milk PAG levels were affected by both week after TAI ($P < 0.01$) and parity ($P = 0.05$). When all
217 cows that maintained pregnancy from 25 to 102 d after TAI were analyzed (Figures 1 and 2), plasma and
218 milk PAG levels increased from 25 d after TAI to an early peak 32 d after TAI. Plasma and milk PAG
219 levels then decreased from 32 d after TAI to a nadir from 53 to 60 d after TAI for the plasma PAG
220 ELISA and from 46 to 67 d after TAI for the milk PAG ELISA, followed by a gradual increase in PAG
221 levels from 74 to 102 d after TAI. Primiparous cows had greater plasma and milk PAG levels compared
222 with multiparous cows (Figures 3 and 4). A similar relationship between parity and serum PAG levels
223 in crossbred *Bos indicus* beef cattle has been reported (Lobago et al., 2009). The biological function of
224 PAG is unclear because PAG levels in circulation constitute inactive aspartic proteinases (Xie et al., 1991;

225 Telugu et al., 2009). Furthermore, the biology underlying temporal PAG levels during early pregnancy is
 226 not clearly understood. The transient decrease in PAG levels in pregnant cows after the early peak in PAG
 227 levels 32 d after TAI is intriguing. It is possible that production and secretion of PAG is regulated by
 228 other hormones during early pregnancy. By contrast, the decrease in PAG levels may be related to
 229 hormonal or physical changes in the placenta during this stage of gestation. The PAG gene family
 230 comprises at least 22 transcribed genes as well as some variants (Telugu et al., 2009), whereas the
 231 monoclonal antibody used in the plasma and milk ELISA tests evaluated in the present study recognizes
 232 only 6 of these PAG variants (Nagappan et al., 2009).

233



234

235 **Figure 1.** Plasma pregnancy-associated glycoprotein (PAG) profile for Holstein cows (n = 48) that maintained pregnancy from 25 to 102 d after AI, and the
 236 resulting pregnancy-diagnosis outcomes of the plasma PAG ELISA test. (Upper panel) Plasma ELISA outcomes were calculated from the optical density
 237 (OD) of the sample [corrected by subtraction of the reference wavelength OD of the sample (S) minus the OD of the negative control (N) at 450 nm (with
 238 both values corrected by subtraction of the reference wavelength OD of the negative control)], which resulted in an S-N value. Mean (\pm SEM) plasma PAG
 239 levels were affected by week after AI ($P < 0.01$). (Lower panel) When the S-N value was <0.300 (dotted line in the upper panel), the cow was classified “not
 240 pregnant” (black bars); when the S-N value was >0.300 to <1.000 , the cow was classified “recheck” (hatched bars); and when the S-N value was ≥ 0.300
 241 (dashed line in the upper panel), the cow was classified “pregnant” (open bars). TAI = timed AI.

242 **Figure 2.** Milk pregnancy-associated glycoprotein (PAG) profile for pregnant Holstein cows (n = 48) that maintained pregnancy from 25 to 102 d
 243 after AI, and the resulting pregnancy-diagnosis outcomes of the milk PAG ELISA test. (Upper panel) Milk ELISA outcomes were calculated
 244 from the optical density (OD) of the sample [corrected by subtraction of the reference wavelength OD of the sample (S) minus the OD of the negative
 245 control (N) at 450 nm (with both values corrected by subtraction of the reference wavelength OD of the negative control)], which resulted in an S-
 246 N value. Mean (\pm SEM) milk PAG levels were affected by week after AI ($P < 0.01$). (Lower panel) When the S-N value was <0.100 (dotted line in
 247 the upper panel), the cow was classified “not pregnant” (black bars); when the S-N value was >0.100 to <0.250 (dashed line in the upper panel), the
 248 cow was classified as “recheck” (hatched bars); and when the S-N value was ≥ 0.250 , the cow was classified “pregnant” (open bars). TAI = timed
 249 AI.

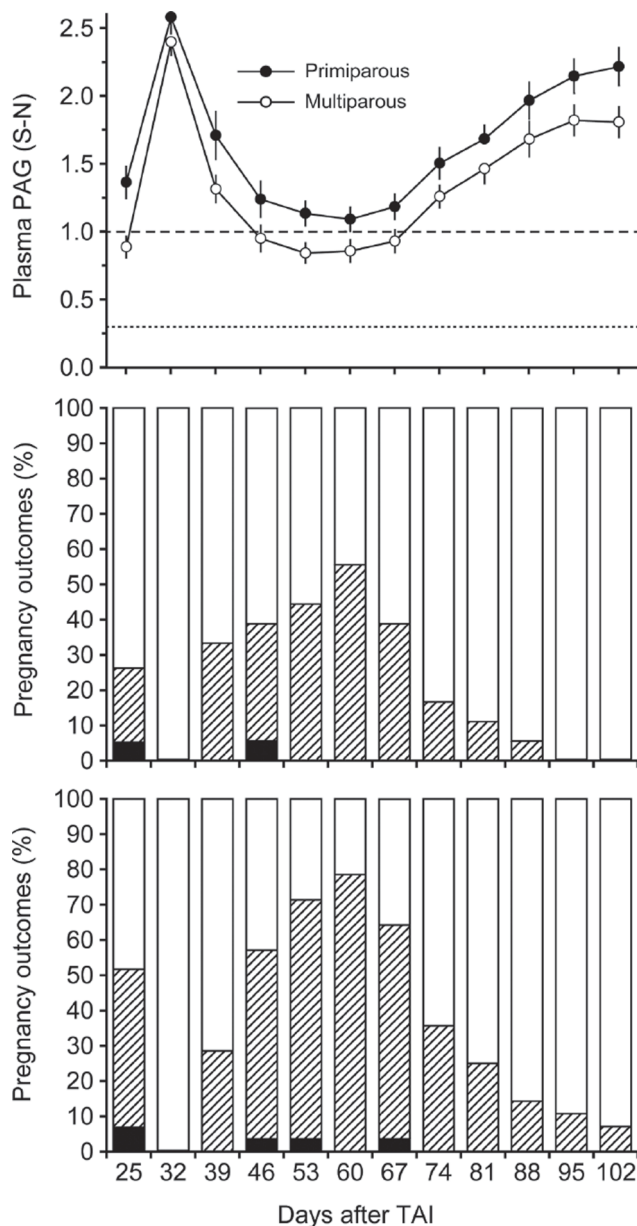
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251 A correlation analysis was conducted to compare S-N values from plasma and milk PAG ELISA tests
 252 within the same cows (Figure 5). Overall, S-N values between the plasma and milk PAG ELISA tests
 253 were highly correlated ($P < 0.01$; $R^2 = 0.64$), and the slope of the regression line reflects the greater
 254 relative PAG concentrations in plasma compared with milk. These results agree with a similar analysis
 255 using the same commercial plasma and milk PAG ELISA tests that were evaluated in the present
 256 experiment (Lawson et al., 2014).

257 *Accuracy of Plasma and Milk PAG ELISA Tests for Pregnant Cows*

258 To determine the accuracy of plasma and milk PAG ELISA outcomes during the first trimester of
 259 gestation, data from cows that maintained a singleton pregnancy from 25 to 102 d after TAI (n = 48)
 260 were analyzed. Cows diagnosed pregnant 32 d after TAI based on transrectal ultrasonography
 261 continued the experiment in which pregnancy outcomes based on PAG levels in plasma and milk were
 262 classified based on cutoff levels specified by the manufacturer. Overall, pregnancy outcomes for all
 263 pregnant cows based on both plasma and milk PAG ELISA tests were a reflection of PAG levels in
 264 plasma and milk (Figures 1 and 2). Although transrectal ultrasonography was not performed 25 d after
 265 TAI, we assumed that all cows pregnant 32 d after TAI based on ultrasonography were pregnant
 266 25 d after TAI. Plasma and milk PAG ELISA outcomes of “not pregnant” and “recheck” occurred
 267 25 d after TAI for pregnant cows. Plasma PAG ELISA outcomes for pregnant cows, however, were
 268 100% pregnant 32 d after TAI, whereas the milk PAG ELISA exceeded 98% pregnant outcomes 32
 269 and 39 d after TAI. Plasma and milk PAG ELISA outcomes of “not pregnant” and “recheck” increased

270 concomitant to the temporal decrease in plasma and milk PAG levels during the nadir and then
 271 decreased as plasma and milk PAG levels increased as gestation ensued. There also was a relationship

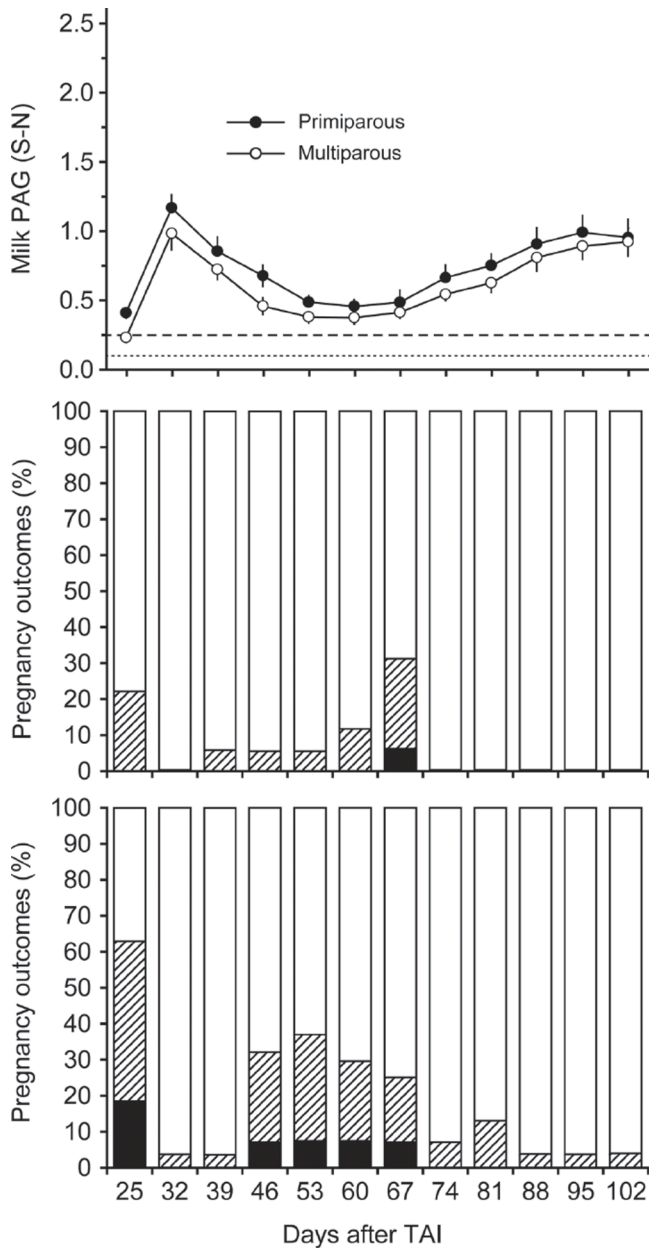


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 273 **Figure 3.** Association between plasma pregnancy-associated gly- coprotein (PAG) profiles and parity for pregnant Holstein cows, and the resulting
 274 pregnancy-diagnosis outcomes of the plasma PAG ELISA test by parity. (Upper panel) Plasma PAG levels for primiparous (n = 19) and multiparous
 275 (n = 29) cows that maintained pregnancy from 25 to 102 d after AI. Plasma PAG ELISA outcomes were calculated from the optical density
 276 (OD) of the sample [corrected by subtraction of the reference wavelength OD of the sample (S) minus the OD of the negative control (N) at 450 nm
 277 (with both values corrected by subtraction of the reference wavelength OD of the negative control)], which resulted in an S-N value. Mean (\pm SEM)
 278 plasma PAG levels were affected by week after AI ($P < 0.01$) and parity ($P = 0.009$). (Middle panel) Pregnancy outcomes based on plasma PAG
 279 levels of primipa- rous cows. (Lower panel) Pregnancy outcomes based on plasma PAG levels of multiparous cows. When the S-N value was <0.300
 280 (dotted line in the upper panel), the cow was classified “not pregnant” (black bars); when the S-N value was >0.300 to <1.000 , the cow was clas-
 281 sified “recheck” (hatched bars); and when the S-N value was ≥ 1.000 (dashed line in the upper panel), the cow was classified “pregnant” (open bars).
 282 TAI = timed AI.

283 between parity (primip- arious vs. multiparous cows) and PAG levels in which the plasma and milk

284 PAG ELISA tests generated fewer “not pregnant” and “recheck” outcomes for pregnant primiparous
285 cows compared with pregnant multiparous cows (Figures 3 and 4). Thus, pregnancy outcomes across
286 all days evaluated were more accurate for pregnant primiparous than for pregnant multiparous cows
287 for both the plasma and the milk PAG ELISA tests. In a study to assess aggressive early
288 nonpregnancy diagnosis with a strategy for resynchronization of ovulation, pregnancy status of cows
289 initiating the first GnRH injection of an Ovsynch protocol 25 d after TAI was determined 27 d after
290 TAI by using a PAG ELISA test (Silva et al., 2009). Cows diagnosed not pregnant continued the
291 Resynch protocol by receiving an injection of $\text{PGF}_{2\alpha}$ 7 d after the initial GnRH injection and a
292 second GnRH injection 54 h after the $\text{PGF}_{2\alpha}$ injection. Cows received TAI approximately 16 h after
293 the second GnRH injection 35 d after AI. The authors concluded that earlier detection of nonpregnant
294 cows using the PAG ELISA in conjunction with a protocol for resynchronization of ovulation and
295 TAI increased the rate at which cows became pregnant in a dairy herd compared with transrectal
296 ultrasonography conducted at a later stage after TAI. This agrees with an economic simulation of use
297 of chemical tests for identification of nonpregnant cows early after AI in conjunction with a protocol
298 for resynchronization of ovulation and TAI, which concluded that the major economic advantage of
299 using a chemical test was to decrease the interbreeding interval (Giordano et al., 2013). By contrast,
300 another experiment similar in design to that of Silva et al. (2009) but with AI to estrus included
301 throughout the experiment in addition to TAI showed no economic benefit of the early pregnancy
302 test (Sinedino et al., 2014). This likely occurred because inseminating nonpregnant cows that
303 returned to estrus decreased the interbreeding interval more than the strategy of early nonpregnancy
304 diagnosis alone.

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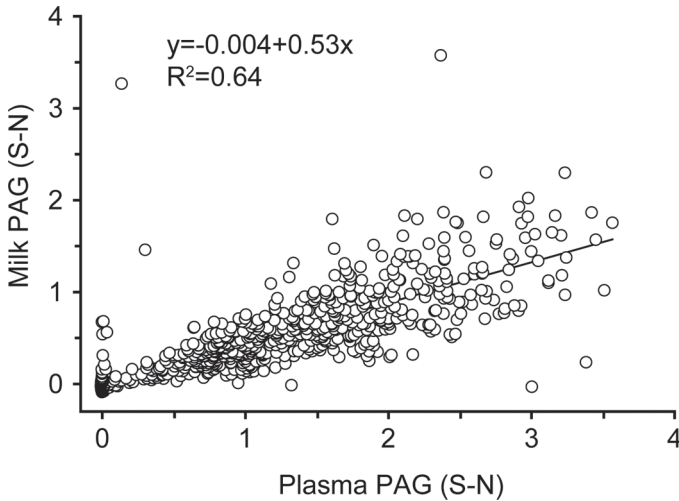
Figure 4. Association between milk pregnancy-associated glyco- protein (PAG) profiles and parity for pregnant Holstein cows, and the resulting pregnancy- diagnosis outcomes of the milk PAG ELISA test by parity. (Upper panel) Milk PAG profiles for primiparous (n = 19) and multiparous (n = 29) cows that maintained pregnancy from 25 to 102 d after AI. Milk ELISA outcomes were calculated from the optical density (OD) of the sample [corrected by subtraction of the reference wavelength OD of the sample (S) minus the OD of the negative con- trol (N) at 450 nm (with both values corrected by subtraction of the reference wavelength OD of the negative control)], which resulted in an S-N value. Mean (\pm SEM) milk PAG levels were affected by week after AI ($P < 0.01$) and parity ($P = 0.05$). (Middle panel) Pregnancy out- comes based on milk PAG levels of primiparous cows. (Lower panel) Pregnancy outcomes based on milk PAG levels of multiparous cows. When the S-N value was <0.100 (dotted line in the upper panel), the cow was classified “not pregnant” (black bars); when the S-N value was >0.100 to <0.250 , the cow was classified as “recheck” (hatched bars); and when the S-N value was ≥ 0.250 (dashed line in the upper panel), the cow wasclassified “pregnant” (open bars). TAI = timed AI.

319 *Analysis of Pregnancy Outcomes 32 d After TAI*

320 To evaluate pregnancy outcomes from the plasma and milk PAG ELISA tests in cows of unknown
321 pregnancy status, 2×2 contingency tables (Tables 1 and 2) were constructed to calculate sensitivity,
322 specificity, PPV, NPV, and accuracy of the pregnancy outcomes for the plasma and milk PAG
323 ELISA tests 32 d after TAI, and these outcomes were compared with those based on transrectal
324 ultrasonography 32 d after TAI (Table 3). Sensitivity of both the plasma and milk PAG ELISA
325 tests in the present experiment was high (100 and 98%, respectively), compared with specificity (87
326 and 83%, respectively). As a result, the NPV for the plasma and milk PAG ELISA tests in the present
327 experiment was high (100 and 99%, respectively) compared with the PPV of both tests (84 and 79%,
328 respectively). The over- all accuracy of the plasma and milk PAG ELISA tests 32 d after TAI was 92
329 and 89%, respectively. Statistical agreement (kappa) based on pregnancy outcomes based on transrectal
330 ultrasonography 32 d after TAI was 0.84 for the plasma PAG ELISA and was 0.77 for the milk
331 PAG ELISA (Table 3).

332 Results from the sensitivity analysis in the present study support that the accuracy of using plasma or
333 milk PAG levels as an indicator of pregnancy status in dairy cows 32 d after AI is high, and our results
334 agree with others who have conducted similar analyses from 27 to 39 d in gestation when PAG levels
335 in both plasma and milk are at early peak levels (Silva et al., 2007; Lawson et al., 2014; Sinedino et al.,
336 2014). By contrast, one study evaluated the milk PAG ELISA test for use as a pregnancy
337 reconfirmation after an initial pregnant diagnosis was made by a veterinarian based on tran- srectal
338 palpation (LeBlanc, 2013). In that experiment, the 661 cows diagnosed pregnant had a mean (\pm SD)
339 stage of gestation of 140 ± 49 d (range = 60 to 230 d), and among 22 cows diagnosed not pregnant, the
340 mean interval from the last AI was 153 ± 83 d (range = 61 to 341 d). It is likely that most cows in
341 that experiment were well past the nadir in milk PAG levels observed in the present study from 53
342 to 67 d after AI (Figure 2) based on the high sensitivity (99.2%) and specific- ity (95.5%) reported
343 (LeBlanc, 2013). Based on plasma and milk PAG profiles in the present study, outcomes of a
344 sensitivity analysis conducted during the temporal nadir for either plasma or milk PAG levels would
345 have decreased dramatically. We were unable to accurately estimate these values after 32 d because
346 only cows -

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Figure 5. Relationship between relative levels of pregnancy-associated glycoproteins (PAG) in plasma and milk of Holstein cows from 25 to 102 d in gestation ($P < 0.01$; $R^2 = 0.64$). Plasma and milk PAG ELISA outcomes were calculated from the optical density (OD) of the sample [corrected by subtraction of the reference wavelength OD of the sample (S) minus the OD of the negative control (N) at 450 nm (with both values corrected by subtraction of the reference wavelength OD of the negative control)], which resulted in an S-N value.

355 diagnosed pregnant 32 d after TAI continued the experiment, thereby removing all nonpregnant cows, with
356 the exception of the 7 cows that underwent pregnancy loss, from the calculations.

357 From an economic perspective, the sensitivity of an early nonpregnancy test (i.e., correct identification of
358 pregnant cows) is more important than the specificity (i.e., correct identification of nonpregnant cows) based
359 on 2 economic simulations (Ferguson and Galligan,

360

361 **Table 1.** Contingency table for evaluation of sensitivity,¹ specificity,² positive predictive value,³ negative predictive value,⁴ and accuracy⁵ of the plasma
362 pregnancy-associated glycoprotein (PAG) ELISA test for determining pregnancy status 32 d after AI considering transrectal ultrasonography as the
363 reference test

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PAG ELISA	Transrectal ultrasound		Total
	Pregnant	Not pregnant	
Pregnant	52 (a)	14	66

(b)

Not pregnant	1 (c)	68	69
		(d)	
Total	53	82	135
			(N)

¹Proportion of samples from pregnant cows with a positive PAGELISA, $[a/(a + c)] \times 100$.

²Proportion of samples from not-pregnant cows with a negative PAGELISA, $[d/(b + d)] \times 100$.

³Proportion of pregnant outcomes using the PAG ELISA that were truly pregnant, $[a/(a + b)] \times 100$.

⁴Proportion of not-pregnant outcomes using the PAG ELISA that were truly not pregnant, $[d/(c + d)] \times 100$.

⁵Proportion of pregnancy-status outcomes (pregnant and not pregnant) that were correctly classified using the PAG ELISA, $[(a + d)/N] \times 100$.

2011; Giordano et al., 2013). Furthermore, to obtain a positive economic value for an early chemical nonpregnancy test, the sensitivity had to be greater than 96% when the test is used 31 d and greater than 94% when used 24 d after AI (Giordano et al., 2013). The sensitivity of both the plasma and the milk PAG ELISA tests evaluated in the present study (Table 3) as well as the sensitivity reported by others (Silva et al., 2007; Romano and Larson, 2010) exceed those criteria and support that use of these commercial tests to diagnose pregnancy status 32 d after AI would economically benefit a dairy farm.

Results from the present study support use of plasma PAG testing around 32 d after TAI and milk PAG testing 32 to 39 d after TAI when PAG levels in pregnant cows are at an early peak and pregnancy outcomes for pregnant cows approach 100% accuracy. Because we collected samples weekly, it was not possible to determine the earliest day between 25 and 32 d after TAI that is optimal for accurate pregnancy outcomes. By

Table 2. Contingency table for evaluation of sensitivity,¹ specificity,² positive predictive value,³ negative predictive value,⁴ and accuracy⁵ of the milk pregnancy-associated glycoprotein (PAG) ELISA test for determining pregnancy status 32 d after AI considering transrectal ultrasonography as the reference test

PAG ELISA

Pregnant Not pregnant Total

contrast, the advantages of the plasma and milk PAG

	Pregnant	57 (a)	11 (b)	68
Not pregnant	0 (c)	73 (d)	73	
Total	57	84	141 (N)	

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¹Proportion of samples from pregnant cows with a positive PAGELISA, $[a/(a + c)] \times 100$.

402

²Proportion of samples from not-pregnant cows with a negative PAGELISA, $[d/(b + d)] \times 100$.

403

³Proportion of pregnant outcomes using the PAG ELISA that were truly pregnant, $[a/(a + b)] \times 100$.

404

⁴Proportion of not-pregnant outcomes using the PAG ELISA that were truly not pregnant, $[d/(c + d)] \times 100$.

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⁵Proportion of pregnancy-status outcomes (pregnant and not pregnant) that were correctly classified using the PAG ELISA, $[(a + d)/N] \times 100$.

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ELISA tests are diminished when conducted during the temporal nadir in plasma and milk PAG levels from 46 to 74 d after TAI because of an increase in pregnant cows with outcomes of not pregnant or recheck (Figures 1, 2, 3, and 4). Pregnant cows incorrectly diagnosed not pregnant ultimately may undergo iatrogenic pregnancy loss if they continue the resynchronization protocol and are treated with PGF_{2α}, thereby resulting in an economic loss (Galligan et al., 2009; Giordano et al., 2013). The benefit of early pregnancy diagnosis is not to identify pregnant cows but rather to identify nonpregnant cows and rapidly return them to an AI service. Preg

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Table 3. Sensitivity,¹ specificity,² positive predictive value (PPV),³ negative predictive value (NPV),⁴ and accuracy⁵ of plasma and milk pregnancy-associated glycoprotein (PAG) ELISA tests for determination of pregnancy status 32 d after AI

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PA G ELI SA	Sensitiv ity [% (no./no.)]	Specific ity [% (no./no.)]	PPV [% (no./no.)]	NPV [% (no./no.)]	Accura cy [% (no./no.)]	Kapp a
Plasma	100 (57/57)	87 (73/84)	84 (57/68)	100 (73/73)	92 (130/141)	0.84
Milk	98 (52/53)	83 (68/82)	79 (52/66)	99 (68/69)	89 (120/135)	0.77

420

¹Proportion of pregnant cows with a positive PAG outcome.

421

²Proportion of not-pregnant cows with a negative PAG outcome.

422

³Proportion of cows diagnosed pregnant using PAG that truly were pregnant.

423 ⁴Proportion of cows diagnosed as not pregnant using PAG that truly were not pregnant.

424 ⁵Proportion of pregnancy status, pregnant and not pregnant, that was correctly classified
425 by PAG.

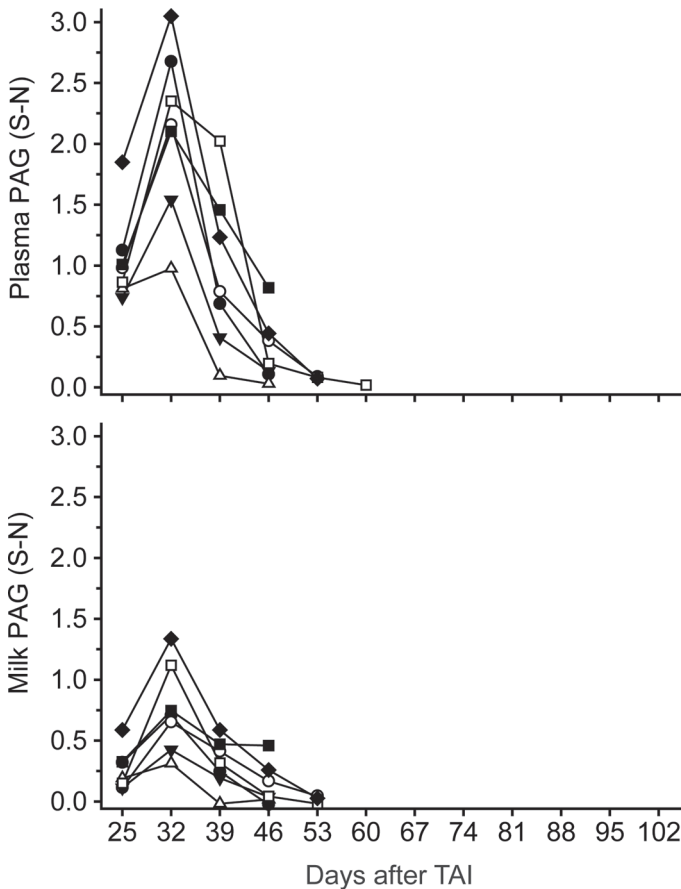
426
427 nancy recheck outcomes decrease the specificity of the test, leading to a lost opportunity to rapidly return
428 that cow to AI (i.e., PGF_{2α} cannot be administered to continue the resynchronization protocol). Thus, instead
429 of completing the resynchronization protocol and receiving TAI, cows with recheck outcomes will not be
430 reinseminated until they are either detected in estrus or diagnosed not pregnant at a pregnancy
431 reconfirmation.

432 *Pregnancy Loss*

433
434 It has long been recommended that pregnancy status should be determined in dairy cows as soon as
435 possible after AI but without having the diagnosis confounded by subsequent pregnancy loss (Studer,
436 1969; Melrose, 1979). The incidence of pregnancy loss in the present study for cows diagnosed with
437 singleton pregnancies 32 d after TAI during the experiment was 13% (7/55), which agrees with the 13% loss
438 reported to occur from 27 to 31 d and 38 to 50 d of gestation based on transrectal ultrasonography in a
439 summary of 14 studies (Santos et al., 2004). Plasma and milk PAG profiles for the 7 cows in which
440 pregnancy loss occurred are shown in Figure 6. Pregnancy outcomes based on the plasma and milk PAG
441 ELISA tests were compared with pregnancy outcomes based on transrectal ultrasonography for the 7 cows
442 undergoing pregnancy loss during the experiment (Table 4). For the plasma PAG ELISA, all but one
443 cow (cow 4) that underwent pregnancy loss tested positive, whereas all cows undergoing pregnancy loss
444 tested positive at one or more time points for the milk PAG test. Similarly, 5 of 7 cows tested recheck based
445 on the plasma PAG test before the loss occurred compared with 3 of 7 cows based on the milk PAG test.
446 Mean plasma and milk PAG S-N values for cows with viable pregnancies 32 d after TAI were similar ($P =$
447 0.14 for plasma and $P = 0.10$ for milk) for cows that went on to maintain their pregnancy compared with
448 cows that went on to undergo pregnancy loss (2.46 ± 0.08 vs. 2.12
449 ± 0.26 , respectively, for plasma and 1.06 ± 0.08 vs.
450 0.76 ± 0.14 , respectively, for milk). These results are in contrast to a study that evaluated PAG levels
451 during early gestation in dairy cows and reported that cows maintaining pregnancy had greater plasma
452 PAG concentrations 30 d after AI than cows that subsequently underwent pregnancy loss (Thompson
453 et al., 2010).

454 Pregnancy loss diminishes the benefit of early preg- nancy diagnosis in 2 ways. First, because of
455 the high rate of embryonic mortality that occurs around the time during gestation that most early
456 pregnancy tests are performed (Santos et al., 2004), the magnitude of pregnancy loss detected is
457 greater the earlier after AI that a positive diagnosis is made. Thus, the earlier that pregnancy is
458 diagnosed after AI, the fewer the nonpregnant cows that are identified to which a man- agement
459 strategy can be implemented to reinseminate them. Second, cows diagnosed pregnant earlier after AI
460 have a greater period of risk during which observable pregnancy loss can occur compared with cows
461 initially diagnosed pregnant later. If left unidentified, cows diagnosed pregnant early after AI that
462 subsequently loose that pregnancy reduce reproductive efficiency by extending the interval from
463 calving to the conception that results in a full-term pregnancy.

464 Results in Table 4 support that PAG levels detected by these ELISA tests have a half-life in
465 maternal cir- culation resulting in a 7 to 14 d delay in identification of cows undergoing pregnancy
466 loss based on plasma or milk PAG levels compared with transrectal ultra- sonography. Because PAG
467 levels are high during late gestation, it takes up to 60 d for residual PAG to be cleared from maternal
468 circulation after parturition in cows (Sasser et al., 1986; Zoli et al., 1992) and other ruminants
469 (Haugejorden et al., 2006). Because of the PAG half-life in circulation, cows submitted for a
470 pregnancy diagnosis before 60 d postpartum can test positive because of residual PAG levels from
471 the previous pregnancy (Giordano et al., 2012), and the
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Figure 6. Profiles of pregnancy-associated glycoprotein (PAG) for individual Holstein cows ($n = 7$) diagnosed pregnant using transrectal ultrasonography 32 d after AI and subsequently undergoing pregnancy loss. (Upper panel) Individual plasma PAG profiles. (Lower panel) Individual milk PAG profiles. Plasma and milk PAG ELISA outcomes were calculated from the optical density (OD) of the sample [corrected by subtraction of the reference wavelength OD of the sample (S) minus the OD of the negative control (N) at 450 nm (with both values corrected by subtraction of the reference wavelength OD of the negative control)], which resulted in an S-N value. TAI = timed AI.

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manufacturer of the plasma and milk PAG ELISA tests evaluated in this experiment recommends that cows be >60 d after parturition when tested. Based on serum samples assayed using the same PAG ELISA test evaluated in the present experiment to determine how rapidly PAG concentrations decrease after an induced pregnancy loss in dairy cows at 39 d in gestation (Giordano et al., 2012), approximately 5 to 7 d elapsed before PAG levels returned to basal levels when luteal regression was induced with $\text{PGF}_{2\alpha}$ or when the embryo died. Thus, most cows undergoing pregnancy loss will test pregnant or recheck at an early pregnancy diagnosis conducted using either the plasma or the milk PAG ELISA test. Because it is impossible to distinguish between the pregnancy outcomes of cows undergoing pregnancy loss (Figure 6 and Table 4) and those of pregnant cows that test as “recheck” or “not pregnant” during the temporal PAG nadir (Figures 1

491 and 2), it is important that all cows with “pregnant” or “recheck” outcomes at an early test be retested at a
492 later time. Based on temporal PAG profiles in the present study, the best time to conduct a first
493 pregnancy test is around 32 d after TAI, with all pregnant cows submitted for a pregnancy recheck 74 d after
494 AI or later when PAG levels in plasma and milk of pregnant cows are rebounding from their nadir.
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496 *Effect of Milk Production on Plasma and Milk PAG Levels*

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498 Plasma PAG levels in pregnant cows were negatively correlated with milk production for both
499 primiparous ($P = 0.002$; $R^2 = 0.05$) and multiparous ($P < 0.01$; $R^2 = 0.18$) cows (Figure 7). Similarly,
500 milk PAG levels in pregnant cows were negatively correlated with milk production for both primiparous
501 ($P < 0.01$; $R^2 = 0.14$) and multiparous ($P < 0.01$; $R^2 = 0.23$) cows (Figure 8). López-Gatius et al. (2007)
502 first reported a negative association between plasma PAG levels and milk production in dairy cows.
503 Because relative PAG concentrations decreased in both plasma and milk with increasing milk production,
504 the negative association between PAG levels and milk production is not a result of dilution of PAG levels
505 in milk with increasing production. One possible explanation not tested in this experiment is that PAG
506 production by the conceptus decreases with increasing milk production. If PAG production by the
507 conceptus is a proxy for embryonic growth and development during early pregnancy, the decrease in
508 plasma and milk PAG levels with increasing milk production might suggest that cows with greater milk
509 production may have had slower-growing embryos during early development. Cows with greater milk
510 production may have lower progesterone concentrations early after timed AI because of increased
511 hepatic metabolism of progesterone (Sangsrivong et al., 2002), which may inhibit growth of the
512 embryo, leading to a decrease in PAG production. Because early embryos express progesterone receptors,
513 the progesterone environment early after AI may play a role in embryo growth and development
514 (Clemente et al., 2009). Several experiments using in vitro–fertilized embryos transferred into beef cows,
515 however, support a direct role of circulating progesterone within the first 7 d after ovulation on the uterus
516 that induces changes in the uterine environment that advance conceptus elongation (Carter et al., 2008,
517 2010; Larson et al., 2011). Further experiments are needed to fully understand the relationship between
518 increased milk production and decreased PAG levels in plasma and milk and what,

519 **Table 4.** Pregnancy outcomes for plasma and milk pregnancy-associated glycoprotein (PAG) ELISA tests compared with
520 transrectal-ultrasonography pregnancy outcomes by day after AI for 7 Holstein cows that underwent pregnancy loss

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Pregnancy outcome¹

Cow	Day after timed AI	Ultrasound	Plasma PAG ELISA	Milk PAG ELISA
1	25	—	+	+
	32	PG	+	+
	39	NP	RE	RE
	46	NP	—	—
2	25	—	RE	RE
	32	PG	+	+
	39	PG	RE	+
	46	DF	RE	RE
	53	NP	—	—
3	25	—	RE	RE
	32	PG	+	+
	39	PG	RE	RE
	46	NP	—	—
4	25	—	RE	RE
	32	DF	RE	+
	39	NP	—	—
	46	NP	—	—
5	25	—	+	+
	32	PG	+	+
	39	PG	+	+
	46	NP	—	+
6	25	—	RE	RE
	32	PG	+	+
	39	PG	+	+
	46	PG	—	—
	53	NP	—	—
7	25	—	+	+
	32	PG	+	+
	39	PG	+	+
	46	NP	RE	+
	53	NP	—	—

¹Pregnancy outcomes for ultrasound were based on the presence or absence of an embryo with or without a heartbeat and were classified as pregnant (PG), embryo with a heartbeat; not pregnant (NP), embryo not

526 present; or dead fetus (DF), embryo without a heartbeat. Pregnancy outcomes for the plasma and milk PAG
527 ELISA tests were classified as positive (+), negative (-), or recheck (RE) based on predetermined assay S-N
528 cutoff values. S-N value = subtraction of the reference wavelength optical diameter (OD) of the sample (S)
529 minus the OD of the negative control (N) at 450 nm (with both values corrected by subtraction of the reference
530 wavelength OD of the negative control).

531
532 if any, implications this may have on the health of the developing embryo.

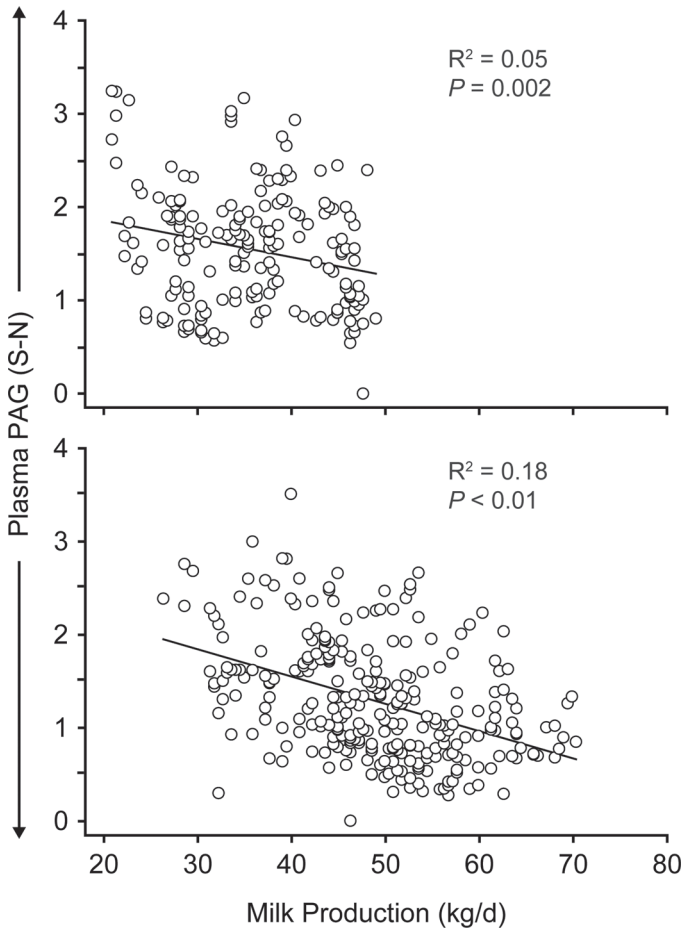
533 534 **CONCLUSIONS**

535 This is one of the first studies to directly compare factors associated with plasma and milk PAG levels during
536 the first trimester of gestation in Holstein cows. Stage of gestation, parity, pregnancy loss, and milk
537 production were associated with relative PAG levels in both plasma and milk in a similar manner; however,
538 milk PAG levels were about 2-fold lower than plasma PAG levels. Based on PAG profiles in plasma and
539 milk samples collected weekly, the optimal time to conduct a first pregnancy diagnosis is around 32 d after
540 TAI when plasma and milk PAG levels are at an early peak,

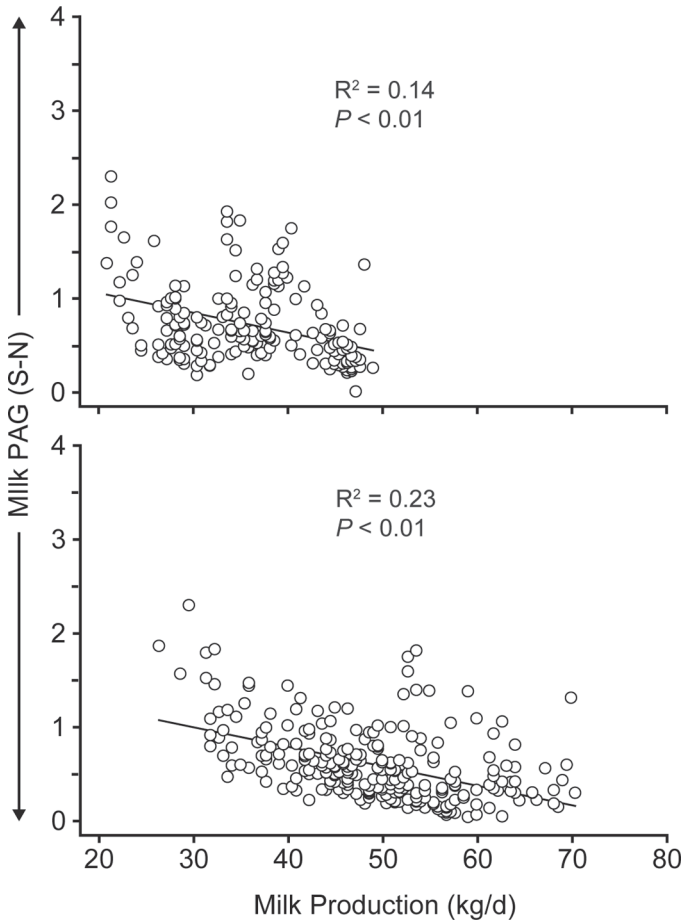
541 whereas conducting either the plasma or milk PAG test during the temporal nadir in plasma and milk
542 PAG levels would result in poor overall accuracy. Because of the occurrence of pregnancy loss, all
543 pregnant cows should be submitted for a pregnancy recheck 74 d or later after AI when relative PAG
544 levels in plasma and milk of pregnant cows have rebounded from their nadir.

545 546 **ACKNOWLEDGMENTS**

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548 tests, and Idexx Laboratories in Westbrook, Maine, for running the plasma PAG ELISA tests. We
549 also thank the farm personnel at the University of Wisconsin–Madison Emmons Blaine Dairy Cattle
550 Research Center in



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556 **Figure 7.** Relationship between milk production and relative lev- els of pregnancy-associated glycoprotein (PAG) in plasma of Holstein cows. Daily milk
557 weights from the 7 d preceding the weekly plasma- sample collection times were used to calculate weekly average milk produc- tion. Plasma PAG ELISA
558 outcomes were calculated from the optical density (OD) of the sample [corrected by subtraction of the reference wavelength OD of the sample (S) minus the
559 OD of the nega- tive control (N) at 450 nm (with both values corrected by subtrac- tion of the reference wavelength OD of the negative control)], which
560 resulted in an S-N value. (Upper panel) Primiparous cows. (Lower panel) Multiparous cows. Plasma PAG S-N values were negatively cor- related with
561 milk production for primiparous ($P = 0.002$; $R^2 = 0.05$) and multiparous ($P < 0.01$; $R^2 = 0.18$) cows.

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563

564 **Figure 8.** Relationship between milk production and relative levels of pregnancy-associated glycoprotein (PAG) in milk of Holstein cows. Daily milk
565 weights from the 7 d preceding the weekly plasma-sample collection times were used to calculate weekly average milk produc- tion. Milk ELISA
566 outcomes were calculated from the optical density (OD) of the sample [corrected by subtraction of the reference wave- length OD of the sample (S)
567 minus the OD of the negative control (N) at 450 nm (with both values corrected by subtraction of the reference wavelength OD of the negative
568 control)], which resulted in an S-N value. (Upper panel) Primiparous cows. (Lower panel) Multiparous cows. Milk PAG S-N values in pregnant cows
569 were negatively corre- lated with milk production for primiparous ($P < 0.01$; $R^2 = 0.14$) and multiparous ($P < 0.01$; $R^2 = 0.23$) cows.

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