Available diagnostic tools to demonstrate *Erysipelothrix* spp presence and to further characterize the bacterium.

Application	Diagnostic tool	Comments
Detection of live bacterium	Direct bacterial isolation	 Laborious and time consuming (>3 days). Allows antimicrobial analysis and further isolate characterization. Low sensitivity. Interference of prior antimicrobial treatment.
	Indirect bacterial isolation after enrichment steps	 Laborious and time consuming (>3 days). Allows antimicrobial analysis and further isolate characterization. Significantly increased sensitivity compared to direct isolation. Interference of prior antimicrobial treatment.
Detection of antigen	Immunohistochemistry	 Particularly useful on chronic lesions and skin. No interference of prior antimicrobial treatment with detection. Requires availability of anti-serum.
Detection of DNA	Conventional PCR	 Sensitive and rapid. Requires an electrophoresis step. No interference of prior antimicrobial treatment with detection.
	Real-time PCR	 Sensitive and rapid. No electrophoresis step; therefore faster compared to conventional PCR. No interference of prior antimicrobial treatment with detection. Requires sophisticated equipment and experienced lab technicians.
	Loop-mediated isothermal amplification (LAM) assay	Sensitive and rapid.Cost effective and requires only rudimentary equipment.Could be used directly on the farm.
Detection of antibodies	ELISA	Can be used to detect and monitor humoral response over time.Low cost.
	Fluorescent microbead immunoassay (FMIA)	 Can be used to detect and monitor humoral response over time. Low cost. Possibility of multiplexing for simultaneous detection of antibodies against several pathogens.
Further characterization	Pulsed-field gel electrophoresis (PFGE)	 Requires availability of an isolate. Capable of differentiating vaccine strains from field strains. Time consuming (>3 days after initial isolation).
	Serotyping	 Requires availability of an isolate. Time consuming (>3 days after initial isolation). Requires availability of anti-serum against all serotypes.