

Monthly report on livestock disease trends as informally reported by veterinarians belonging to the Ruminant Veterinary Association of South Africa (RuVASA), a group of the South African Veterinary Association

February 2018

(Previous disease reports can be seen on the RuVASA website www.ruvasa.co.za)

Click on Disease Reports

The following practices and laboratories (116) submitted reports during February 2018:

Mpumalanga (10)

Balfour – Dr. Louis van Jaarsveld
Bethal – Dr. Hardus Pieters
Ermelo – Drs. Potgieter and Steinberg
Grootvlei – Dr. Neels van Wyk
Karino – Dr. Silke Pfitzer
Malalane – Drs. Van Sittert and Van Sittert
Middelburg –Drs. Malan, Erasmus and Bernitz
Nelspruit – Dr. André Beytel
Standerton – Dr. Kobie Kroon
Volksrust – Drs. Watson, Solomon and Blaauw

Gauteng (7)

Bapsfontein – Drs. Olivier, Engelbrecht and Greyling
Bronkhorstspuit – Drs. De Bruin, De Bruin, Rudolph and Slabber
Hammanskraal – Dr. Hentie Engelbrecht
Magaliesburg – Dr. Ryan Jeffery
Onderstepoort Veterinary Academic Hospital – Proff. Annandale, Shakespear, Holm, Pettey and Drs. Fitte, Grobler, Hamman, Koeppel, Leask, Mabu, Marufu, Mokoelé, O’Dell, Tshuma and Van der Leek
Pretoria – Dr. Hanneke Pienaar
Vanderbijlpark – Dr. Kobus Kok

Limpopo (7)

Bela-Bela – Dr. Nele Sabbe
Makhado (Louis Trichardt)– Drs. Harris, Klopper and Jacobs

Mokopane (Potgietersrust)- Dr. Henk Visser

Polokwane (Pietersburg) – Drs. Watson, Viljoen, Jansen van Vuuren, Van Rooyen, Snyman and Cremona

Tzaneen – Drs. Cordier and van der Berg

Vaalwater – Dr. Hampie van Staden

Vaalwater – Dr. Annemieke Müller

North West (9)

Christiana - Dr. Pieter Nel

Klerksdorp – Drs. Coetzee and Venter

Klerksdorp – Drs. Van den Berg, Van den Berg, Theron and Geral

Leeudoringstad – Dr. Ian Jonker

Lichtenburg – Dr. Nelmarie Krüger-Rall

Rustenburg – Drs. Grobler, Sparks, Van Egdome, Van Rooyen, Goosen and Van Rensburg

Stella - Dr. Magdaleen Vosser

Ventersdorp/ Koster –Drs. Benadé and Van der Merwe

Vryburg – Dr. Jurie Kritzing

Free State (23)

Bloemfontein – Dr. Stephan Wessels

Bultfontein – Dr. Santjie Pieterse

Clocolan – Drs. Wasserman and Basson

Dewetsdorp – Dr. Marike Badenhorst

Ficksburg – Drs. Kotzé and Coetzer

Frankfort - Drs. Lessing, Cilliers and Janse van Rensburg

Hertzogville – Dr. Nico Hendrikz

Hoopstad – Dr. Kobus Pretorius

Kroonstad – Drs. Daffue, Eksteen, Van Zyl and Van der Walt

Ladybrand/Excelsior - Dr. De Vos and Nel

Memel – Drs. Nixon and Nixon

Parys – Drs. Wessels and Wessels

Philippolis – Dr. Stephan van Niekerk

Reitz - Dr. Murray Smith

Reitz – Dr. Schabort Froneman

Senekal – Dr. Jan Blignaut

Smithfield – Dr. Nienke van Hasselt

Trompsburg – Dr. Wyn Irwin

Viljoenskroon – Dr. Johan Kahts

Villiers – Drs. Hattingh and Hauptfleish

Wesselsbron – Dr. Johan Jacobs

Winburg – Drs. Albertyn and Albertyn

Zastron – Drs. Troskie and Strauss

KwaZulu-Natal (12)

Bergville - Dr. Ariena Shepherd

Bergville – Dr. Jubie Muller
Camperdown – Dr. Anthony van Tonder
Dundee – Drs. Marais, Fynn and Reynolds
Estcourt – Drs. Turner, Tedder, Taylor, Tratschler, Van Rooyen and Alwar
Mooi River – Drs. Still, Reisinger, Fowler and Hartley
Mtubatuba – Dr. Trever Viljoen
Newcastle – Dr. Barry Rafferty
Pietermaritzburg – Dr. Phillip Kretzmann
Pongola – Dr. Heinz Kohrs
Underberg - Drs. Collins, King and Delaney
Vryheid – Drs. Theron and Theron

Eastern Cape (16)

Alexandria - Dr. Johan Olivier
Aliwal North – Drs. Troskie and Strauss
Bathurst – Dr. Jane Pistorius
Cradock – Dr. Frans Erasmus
Graaff- Reinet - Dr. Roland Larson
Graaff-Reinet – Drs. Hobson, Strydom and Hennesy
Grahamstown – Drs. Mendes and Dreyer
Humansdorp – Drs. Van Niekerk, Janse Van Vuuren and Davis
Jeffreys Bay – Drs. Lategan, Hoek and McFarlane
Kareedouw – Dr. Marten Bootsma
Middelburg, Steynsburg, Barkly East – Drs. Van Rooyen and Viljoen
Port Alfred – Dr. Leon de Bruyn
Queenstown – Drs. Du preez, Godley, Klopper, Jansen van Vuuren, De Klerk and Catherine
Stutterheim - Dr. Dave Waterman
Uitenhage – Drs. Mulder and Krüger
Witelsbos – Dr. Elmien Kotze

Western Cape (18)

Beaufort West - Drs. Pienaar and Grobler
Caledon – Drs. Retief, Coetzer and Jansen
Caledon – Drs. Louw and Viljoen
Ceres – Drs. Pieterse, Wium, De Villiers and Scheepers
Darling – Drs. Van der Merwe, Adam and Senekal
George - Drs. Strydom, Truter and Pettifer
Heidelberg – Dr. Albert van Zyl
Malmesbury – Dr. Otto Kriek
Malmesbury – Dr. Markus Fourie
Malmesbury – Dr. Andries Lesch
Oudtshoorn – Dr. Glen Carlisle
Piketberg – Dr. André van der Merwe
Plettenberg Bay – Dr. André Reitz
Riversdale – Drs. Du Plessis, Taylor and De Bruyn

Stellenbosch – Dr. Alfred Kidd
Swellendam – Dr. Jacques Malan
Vredenburg – Dr. Izak Rust
Wellington – Drs. Van Zyl and Louw

Northern Cape (6)

Calvinia – Dr. Bertus Nel
Colesberg – Drs. Rous and Rous
De Aar – Dr. Donald Anderson
Kathu – Dr. Jan Vorster
Postmasburg – Dr. Boeta van der Merwe
Upington – Drs. Vorster and Visser

Feedlots (2)

Drs. Morris and Du Preez
Dr. Andy Hentzen

Laboratory reports (6)

Dr. Marijke Henton - Vetdiagnostix, Johannesburg
Dr. Alan Fisher – Queenstown Provincial laboratory
Dr. Last, Bosch and Williams – Vetdiagnostix, Pietermaritzburg
Dr. Liza du Plessis – Idexx, Onderstepoort
Dr. Emily Lane – National Zoological Gardens and Veterinary Faculty
Dr. Mark Chimes – Dairy Standards, George

Key Messages

Insect transmitted diseases (lumpy skin disease, three day stiff sickness (ephemeral fever), blue tongue) are reported from many areas of the country. This should not have been the case if animals were vaccinated before the rainy season (August). No case of Rift Valley fever was reported. We are sitting on a time bomb as many animals have never been vaccinated and most flocks and herds are highly susceptible.

A rabies outbreak, where 29 cattle died, were reported from the Stella area. Cattle were on an intensive grazing system and rabid jackals were most probably the cause of the outbreak. At all times farmers and their workers should have this deadly disease on their minds when animals behave in a strange way.

Cryptosporidiosis, coccidiosis, *E. coli*, rota and corona viruses are still causing serious disease outbreaks on many farms. It is so important to follow biosecurity measures and good hygiene practices.

Tick transmitted diseases (African and Asiatic red water, anaplasmosis and lumpy skin disease) were responsible for numerous mortalities.

Have you vaccinated all your heifers between 4 and 8 months against brucellosis?

Most of these diseases mentioned above can be prevented if a good management programme is followed. Contact your veterinarian to update your animal health programme.

Our hearts go out to farmers in the drought stricken areas and we pray that relief will soon be coming!

MEDIA RELEASE

LISTERIOSIS OUTBREAK IN SOUTH AFRICA

The Red Meat Industry Forum (RMIF) represents the entire red meat value chain from the Primary Producer through to the Consumer and records its concern that lives have been lost as a result of the outbreak of Listeriosis. The RMIF has also noted with concern the media statement released by the Department of Health and the National Institute of Communicable Diseases (NICD) on 4 March 2018 which essentially concluded that the present outbreak was traced to a food production facility in Polokwane whilst raising further concerns about a facility in Germiston.

At the outset we must point out that food safety remains at the heart of the Red Meat Industry and the RMIF would like to assure the Consumer that everything possible is being done with the utmost urgency to ensure that our Consumer's personal health and well-being is protected not only as a matter of routine, but with increased vigilance.

Unfortunately the aforesaid media release is devoid of detail and this lack of detail has resulted in misinformation which is not only detrimental to the Consumer, but also the South African Red Meat Industry. In this regard, the average Consumer is being led into a *Listeria* hysteria which is having unfortunate consequences for families who rely on processed meat as their source of protein.

Listeria monocytogenes is the primary cause of the illness called listeriosis. This bacterium is widely distributed in nature and has been found in soil, water, sewage, mud, silage and decaying vegetation. It has been isolated from humans, a wide variety of animals and birds, animal products, fresh produce such as vegetables and fruit, food packaging and processing environments. The RMIF is therefore of the opinion that there is no single, simple answer as other recent cases in Australia have emanated from the consumption of melons; with maybe more virulent *Listeria* strains emerging.

The RMIF and its member organizations, including the South African Meat Processors Association (SAMPA), representing the meat processing and related sectors, are deeply concerned that the entire processed meat industry has been implicated without justification. The devastating consequences emanating from the media coverage thus far as a result of the Minister's media release has had far reaching and catastrophic impact on the processed meat industry and the Red Meat Industry in its entirety.

Consequently the RMIF has requested all relevant information relating to the tests conducted by the National Department of Health and the NICD as referred to in the media release to determine the exact nature and ambit of the testing conducted.

The RMIF had to drag Government to Court on several occasions to implement Independent Meat Inspection Services, which should have been adopted some 18 years ago in terms of the Meat Safety Act, 2000. It was only under the threat of contempt of Court that Government did exceed to the RMIF's demands to implement Independent Meat Inspection Services. The outbreak has emphasized the responsibility of the Red Meat Industry together with other food industries to provide for proper and improved hygiene during the production, processing, packing and preparation of red meat and

red meat products. Red Meat Industry stakeholders are closely engaging the relevant authorities to improve microbiological criteria, processes and standards. This is based on key learning currently developing and taking coordinated actions in all sectors of the red meat value chain relating to food safety activities to ensure that safe food is provided to the Consumer.

Whilst Industry is responsible for producing food that is safe for human consumption, it is also the responsibility of Consumers not to content themselves, that the only contamination can come from the facilities implicated, but to adopt basic hygienic practices when buying, transporting food home, preparing and storing food to protect their health and to ensure that cross contamination does not occur between cooked and raw products or from human hands and equipment. *Listeria* presents a particular concern in respect to food handling, because it can multiply at refrigerator temperatures. During the processing of livestock to meat at the abattoir, particular attention is given to slaughter procedures, personnel hygiene and sterilization of equipment to minimize bacterial contamination during this process. Furthermore, meat inspection of each animal and carcass ensure the health of the animal and removal of any possible contamination that might have occurred. Microbiological testing of water, product, contact surfaces and hands is a prerequisite at a registered abattoir in terms of the Meat Safety Act, 2000 and supporting regulations.

It is therefore imperative that Consumers ensure that the meat they purchase is sourced only from registered abattoirs that have an Independent Meat Inspection Service and that once purchased the cold chain is maintained at all times; as well as to avoid eating raw or under cooked meat products. Various experts have confirmed that microbiological analysis of fresh meat is of lesser consequence and risk to the Consumer and that more attention should be given to ready-to-eat products that are not subject to heat treatment in its preparation.

The Foodstuffs, Cosmetics and Disinfectants Act, 1976 under the mandate of the Department of Health states that the sale, manufacture and importation of food that is unfit for human consumption is prohibited, but the Act should be supported by the appropriate regulations. As things stand there are no regulated requirements for the testing of *Listeria monocytogenes* in ready-to-eat foods in South Africa. SAMPA members adhere to all guidelines of the Department including the current SANS885 standard, a national compositional and microbiological standard which forms the basis for Consumer protection, health and safety in the meat processing industry.

The Red Meat Industry Forum members together with the South African Meat Processors Association remain committed to strengthening the national food control systems to ensure that healthy, nutritious and safe South African red meat and red meat products are sustainably supplied to the Consumer and again pledges its full support to the competent authority and its ongoing investigation. The RMIF also urges for close cooperation between the respective departments in establishing food safety guidelines and to utilize the opportunities to interact with Industry on the forums provided. All industry stakeholders are encouraged to review and strengthen their hygiene management systems to provide the Consumer with the peace of mind to offer his/her family the product of choice which is red meat.

The World Health Organization's five keys to food safety:

- Keep clean. Wash your hands before handling food and often during food preparation.
- Separate raw and cooked food. If you are handling or storing raw food, do not touch already cooked food unless you have already washed your hands and food preparation utensils.
- Ensure that working surfaces are cleaned before using for different food types.
- Cook food thoroughly. Food that does not usually need cooking before eating should be washed thoroughly with clean running water.

- Keep food at safe temperatures.
- Use safe water for domestic use at all times or boil before use.

Issued by

Issued by

Dave Ford
Chairman
Red Meat Industry Forum
On behalf of the Red Meat Industry

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***Listeria* infections in dogs and cats**

Cases of *Listeria* infections in animals in South Africa are uncommonly encountered, and on the few occasions when they do occur, the illness is usually in cattle and sheep. *Listeria* infections in dogs and cats are very rare, and only a few cases have been reported world-wide. As far as it is known, it has never been reported from dogs or cats in South Africa.

Natural infection usually results from the ingestion of contaminated food. It appears as if stomach acid confers a degree of inhibition on infection rates in man, and this may also be so for carnivores.

Listeria can be carried in the intestinal tract of dogs without them showing any apparent illness. A Japanese study showed that fewer than 1% of healthy dogs and no cats were carriers.

When the rare cases of listeriosis occur in dogs and cats, it is usually associated with the ingestion of contaminated meats and meat by-products. Animals with a depressed immune system are more likely to become infected. Infected dogs may show signs of fever, diarrhoea and vomiting. Further signs such as septicaemia, encephalitis and abortion are infrequently encountered.

Listeria is susceptible to commonly used antibiotics such as penicillin and ampicillin, and they are the antibiotics of choice. Tetracycline and trimethoprim-sulphonamide are also effective. *Listeria* is intrinsically resistant to cephalosporins. *Listeria* is susceptible to pasteurization and boiling.

Concern has been expressed in cases where dogs and cats have been fed the processed meats that have been implicated in the current South African outbreak. It is unlikely that dogs and cats will become ill, but if there is any concern about possible infection, a veterinarian should examine the affected animal. Hygienic measures such as hand washing after handling animals and before food

preparation is crucial. Any skin wounds should be protected from contamination when handling possibly infected animals and items. Gloves should be used when cleaning up faeces.

Feeding possibly affected products to dogs and cats as a way of disposing of unwanted products should be discouraged. The transport and storage of possibly infected items, poses a risk to people handling such items and may spread the infection to other, previously uncontaminated, sites.

Written by:

Dr. Marijke Henton, Bacteriologist, Vetdiagnostix (henton@vetdx.co.za)

At the following link information needed to educate cattle owners and consumers of unpasteurised dairy products regarding brucellosis are available..

<http://nahf.co.za/category/diseases/brucellosis/>

Translations in the major languages regarding the 5 core facts on bovine brucellosis are available at the following link:

<http://nahf.co.za/translations-for-bovine-brucellosis-5-core-facts-and-a-dozen-things/>

Websites that are there to help you with information regarding animal health:

National Animal Health Forum

www.nahf.co.za

Read what the Forum is all about:

<http://nahf.co.za/about/>

This website will become the information centre of animal health in Southern Africa. On the toolbar click on **Stakeholders** and you will find links to producer organizations and other organizations who are participating in the NAHF

<http://nahf.co.za/stakeholders/>

Provincial Animal Health Forums have their own site – click on **Provinces**

<http://nahf.co.za/provinces/>

Important is to study the Veterinary Strategy (2016 -2026) as it gives direction to where we are going with Animal Health in South Africa.

<http://nahf.co.za/wp-content/uploads/Vet-strategy-final-signed.pdf>

Click on **Info centre** for more information on the “war” we have against Bovine Brucellosis. Please be up to date on the role all have to play to control this zoonotic disease.

<http://nahf.co.za/category/diseases/brucellosis/>

Information on other controlled diseases (Ovine Johne’s Disease, Pest of small stock – PPR, and African Horse Sickness) is available.

This link will continuously be updated.

Information on **antibiotic resistance** is also available at this address:

<http://nahf.co.za/category/antibiotic-resistance/>

Rural Veterinary Association of South Africa

www.ruvasa.co.za

Click on **Disease reporting** where maps and information can be sourced on the prevalence of diseases in all provinces. Abattoir reports are available. Use the information available to update management programmes

Landbouweekblad's webpage

www.landbou.com

[Vra vir Faffa](#)

Click on: **Indeks van antwoorde** where more than 4 000 answers can be sourced on animal health.

Click on Beeste

Click on Siektes

Click on Brusellose

Stop Brusellose

Gevaar om Beesbrusellose (BBR) deur vendusies en skoue te versprei

Rapportering aan bure of ander eienaars oor die voorkoms van brusellose

Inligting oor brusellose op die NAHF se webblad

Kuddebestuur voor die dekseisoen

Bees Brusellose handleiding

Teenliggaamwaardes om beesbrusellose in koeie te bepaal

Veterinêre Strategie 2016 -2026

'n Dosyn dinge wat jy moet weet van beesbrusellose

Vyf kernfeite wat jy van beesbrusellose (Besmetlike misgeboorte – BM) behoort te weet

Veiligheid van vleis en biltong afkomstig van 'n bees met brusellose

Vervoer van diere uit 'n positiewe brusellose kudde

Beheer van brusellose in 'n beeskudde

Boerderypraktyke wat die gevaar van die voorkoms van brusellose verhoog

Pak brusellose by die horings

Brucellose kan jou lewe verwoes

Brusellose in wild

Bestuur van positiewe besmetlike misgeboorte beeste

Aankoop van beeste wat besmetlike misgeboorte het

Antwoorde oor brusellose
 Behandeling van besmetlike misgeboorte
 Besmetlike misgeboorte uitbreek in 'n kudde
 Gevaar van brusellose onderskat
 RB51-inenting teen brusellose in dragtige koeie
 Alles oor Besmetlike Misgeboorte (BM)
 Kompensasie vir BM en TB positiewe beeste?
 Nóg vrae oor besmetlike misgeboorte
 Koeie positief getoets vir besmetlike misgeboorte
 Vrae, antwoorde oor besmetlike misgeboorte
 Brucellose: Wat staan ons te doen?

Internal parasite control

www.wormx.info

Summary of disease report for February 2018

116 Reports from veterinary practices and laboratories were received (Mpumalanga (MP) 10; Gauteng (G) 6; Limpopo (L) 7; Northwest (NW) 9; Free State (FS) 23; KwaZulu-Natal (KZN) 12; Eastern Cape (EC) 16; Western Cape (WC) 18; Northern Cape (NC) 6; Feedlots (FL) 2 and Laboratories (Lab) 6).

For the detailed report and previous reports go to www.ruvasa.co.za and click on Disease reporting

Internal parasites

The following reports were received from practices regarding internal parasite infestations:

Internal parasites	MP	G	L	NW	FS	KZN	EC	WC	NC
Roundworms	X	X	X	X	X	X	X	X	
Resistant roundworms	X	X	X	X	X	X	X	X	
Wireworm	X	X	X	X	X	X	X	X	X
Brown stomach-worm									
Long-necked bankruptworm									
Large-mouthed bowelworm									
Nodularworm						X			
Lungworm									
Eyeworm	X			X	X				
<i>Parafilaria</i>	X		X			X			
Tapeworms	X		X	X	X		X	X	
Liver fluke	X	X	X	X	X	X		X	
Conical fluke	X			X	X	X	X	X	

Cysticercosis (measles)	X	X	X		X	X		X	X
Schistosomiasis (bilharzia)									
Coccidiosis	X	X	X	X	X	X	X	X	
Cryptosporidiosis	X			X	X	X		X	

Good rainfall occurred in most of the the summer rain fall area and parasite populations are at a high level. Use the five point check to keep on top of what is happening in the flock. For further detail contact your local veterinarian.

<http://hulp.landbou.com/kundiges/vra-vir-faffa/vyfpuntplan-en-famacha-stelsel-vir-inwendige-parasietbestuur-in-skape/>

https://docs.wixstatic.com/ugd/aded98_cb447e77eef6450f93a2b23cb0e6b9de.pdf

External parasites

The following reports were received from practices regarding external parasite infestations:

External parasites	MP	G	L	NW	FS	KZN	EC	WC	NC
Blue ticks	X		X	X	X	X	X	X	
Resistant blue ticks		X			X	X			
Heartwater ticks	X	X	X	X		X	X	X	
Brown ear-ticks	X	X	X	X	X	X			
Bont-legged ticks	X	X	X	X	X	X	X		
Red-legged ticks	X		X	X	X	X			
Paralysis ticks	X								
Tampans									
Biting lice					X		X		
Sucking lice							X		
Itch mites								X	
Sheep scab					X				
Mange mites		X			X				
Nuisance flies	X			X	X	X	X	X	
Midges	X			X	X	X	X	X	
Mosquitoes					X	X			
Blowflies	X		X	X	X		X	X	
Screw-worm	X	X	X			X	X		
Gedoeslsta (uitpeuloogsiekte)									
Nasal bot	X			X	X				

Make sure to assess the blue tick resistance status on your farm before buying tickicides. Your veterinarian will be able to collect engorged blue ticks to be tested for resistance.

Actives to be tested for resistance are: organophosphates, pyrethroids, amidines. Actives registered for controlling blue ticks are: macrocyclic lactones and fluzaron (acaricide growth regulator).

Tick numbers increased after the rains. Below is a list of diseases transmitted by ticks.

Tick borne diseases

The following tick borne diseases were reported by practices in the provinces:

Tick borne diseases	MP	G	L	NW	FS	KZN	EC	WC	NC
African red water	x	x	x	x	x	x	x	x	
Asiatic red water	x	x	x	x	x	x	x	x	
Anaplasmosis	x		x	x	x	x	x	x	
Heartwater	x	x	x	x		x	x		
Lumpy skin disease	x	x	x	x	x	x		x	x
Corridor disease						x			
Theileriosis									

Asiatic red water is spreading and is one of the deadliest diseases in cattle.

Numerous mortalities were reported! The new heartwater vaccine is still a year or two away as registration trials have to be done when the upscaling of vaccine production is accomplished.

The following tick toxicosis was reported by practices in the provinces:

Tick toxicosis	MP	G	L	NW	FS	KZN	EC	WC	NC
Sweating sickness		x	x	x	x	x			x

Insect transmittable diseases

The following insect transmittable diseases were reported by practices in the provinces:

Insect transmittable diseases	MP	G	L	NW	FS	KZN	EC	WC	NC
Lumpy skin disease	x	x	x	x	x	x		x	x
Ephemeral fever (Three day stiff sickness)	x	x	x	x	x	x			x
Blue tongue	x			x	x	x	x	x	
Rift Valley Fever									
Wesselsbron									
Nagana									

During February disease outbreaks of insect transmittable diseases were reported. Standing water is the ideal breeding environment for mosquitoes, the carriers of Rift Valley Fever! Move animals away from rivers and water source if possible. Spray animals with insect repellants such as deltamethrin.

Venerial diseases

The following venereal diseases were reported by practices in the provinces:

Venereal diseases	MP	G	L	NW	FS	KZN	EC	WC	NC
Trichomonosis	x			x	x	x	x		
Vibriosis			x		x	x			
Pizzle disease								x	
<i>Actinobacillus seminis</i>									

New cases of **trichomonosis** are reported every month and this disease is out of control. Make sure to buy bulls from farmers where biosecurity measures are in place and bulls are tested for these diseases at regular intervals.

Make sure that fences are in tact and gates closed so that bulls cannot escape to neighbouring cows that may be infected with *Tritrichomonas* and become infected or infected neighbouring bulls are jumping fences.

Cattle study groups should discuss preventative and control measures with their veterinarians. **Be sure to test bulls regularly for these diseases.**

Beware when buying in or sharing bulls! Remember female animals may also be infected.

Study the Good management SOP's for cattle farmers on the RPO website

<http://www.rpo.co.za/wp-content/uploads/2016/04/nuutRPO-NERPO-Code-Addendum.pdf>

<http://www.rpo.co.za/wp-content/uploads/2016/04/nuutRPO-NERPO-Code-Addendum-4-Good-management-practices-and-SOPs-for-cattle-farmers-1.pdf>

Bacterial diseases

The following bacterial diseases were reported by practices in the provinces:

Bacterial diseases	MP	G	L	NW	FS	KZN	EC	WC	NC
Anthrax									
Blackquarter	x	x	x	x	X	x	x	x	
Botulism				x		x		x	x
Pulpy kidney	x	x	x	x	X		x	x	x
Lamb dysentery					X				
Swelled head		x				x		x	
Red gut (cattle)	x			x	X		x		
Blood gut (sheep)	x				X				
Tetanus							x		
Salmonellosis	x				X				
Bovine brucellosis			x	x	X				
Ovine brucellosis (Ram's disease)		x						x	
Bovine tuberculosis									
Johne's								x	
Leptospirosis									
Listeriosis									
<i>Pseudomonas</i>									
<i>Fusibacterium necrophorum</i>	x				X				

Septicaemia								x	
<i>E. coli</i>	x		x	x	X	x		x	
Enzootic abortion		x							
Lumpy wool							x		
Uterine gangrene									
Bovine dermatophilosis (Senkobo disease)						x			
Wooden tongue									
Lumpy jaw									

Study the table above and determine the risk for animals on your farm. Get advice from your veterinarian on *Cryptosporidium/E. coli* outbreaks in your area and what to do to prevent losses in lambs and calves.

When buying animals this Vendor declaration can help you to minimize risk!

VENDOR DECLARATION BOVINE BRUCELLOSIS

I hereby declare that I am the legal owner or authorised representative of the cattle on sale and am competent to make this declaration

1	The cattle for sale are clearly and permanently identified		Yes	No
2	The cattle for sale/slaughter were born on my farm		Yes	No
3	The farm has a closed herd policy i.e. I do not buy in cattle, rent out grazing or speculate with cattle		Yes	No
4	I practice bio-security on my farm to a level that is **	Poor	Moderate	Good
5	I vaccinate my heifer calves against Bovine Brucellosis once between the ages of 4 – 8 months		Yes	No
6	In addition I vaccinate my cattle older than 8 months with RB51		Yes	No
7	I have all the cattle on my farm tested for Bovine Brucellosis		Yes (date)	No
8	My herd has been tested negative within the past year		Yes	No
9	I did not buy in cattle since my last negative brucellosis test		Yes	No
10	I/my vet investigates any abortions on my farm		Yes	No
11	To the best of my knowledge, my immediate neighbours and farms in my area are free of Bovine Brucellosis		Yes	No
12	I use a veterinarian to advise me on my cattle's herd health		Yes	No
13	The cattle handling facilities on my farm are	Poor	Average	Good

Note: Vaccination does not mean freedom from Bovine Brucellosis as cattle can still be carriers
Please attach the most recent *Brucella* blood test certificate

Owner or authorised representative:.....

Signature:.....

Date:.....

**** * Biosecurity**

Poor – speculates with cattle, does not vaccinate, poor fences, cattle come into contact with other cattle

Medium – Vaccinates heifers, does not buy in cattle of unknown health status

Good – closed herd/never buys in cattle, vaccinates heifers and no contact with other cattle, follows a herd health plan as advised by his veterinarian, does not allow transport trucks onto property, washes and disinfects truck after returning from the abattoir or auction grounds.

Compiled by: Dr. Sewellyn Davey, Chairman of the Brucellosis Steering committee of the National Animal Health Forum

Vendor's declaration for Ovine Johne's Disease

OVINE JOHNE'S DISEASE VENDOR DECLARATION

ON THE SALE OF SHEEP

(Updated Draft May 2015)

- | | |
|--|----------------------|
| 1. I hereby declare that I am the owner or authorised representative of the sheep on sale and am competent to make this declaration. | YES NO |
| 2. The sheep for sale are clearly identified in the accompanying description. | YES NO |
| 3. The sheep for sale were born on my farm. | YES NO |
| 4. The farm has a closed flock policy. (No live sheep are brought onto the farm from elsewhere) | YES NO |
| 5. I know the signs of the disease and to the best of my knowledge, all of my properties are free of cases of Ovine Johne's Disease. | YES NO |
| 6. I have actively looked for Ovine Johne's Disease and have had tests done for this. | YES NO |
| 7. To the best of my knowledge, my immediate neighbours and farms in my magisterial district of my farm(s) are free of cases of Ovine Johne's Disease. | YES NO |

8. The sheep on my properties have been vaccinated against Ovine Johne's Disease and are clearly marked with the approved ear tag.	YES NO
9. All lambs born are vaccinated	YES NO
10. If vaccinated, the number of years that the vaccinations have been done is	<input style="width: 40px; height: 20px;" type="text"/> years

NOTE: Vaccination does not mean freedom from OJD, vaccinated animals can still be carriers.
Statement 8 and 9 apply only to already infected flocks, and such sheep can only be sold to other infected flocks by law.
Buyers should consult their veterinary advisor before any purchases.

Signature

Date

NAME

Farm: _____

OWNER OR AUTHORIZED REPRESENTATIVE

District: _____

The use of this declaration is supported by the following organisations:



Viral diseases

The following viral diseases were reported by practices in the provinces:

Viral diseases	MP	G	L	NW	FS	KZN	EC	WC	NC
BMC (snotsiekte)	x	x	x	x	x				
Rabies (cattle)				x		x			
BVD		x			x				
IBR						x			
BRSV								x	
PI3								x	
Maedi visna virus									
Rotavirus / Coronavirus	x				x				
Enzootic bovine leucosis (EBL)						x		x	
Sheep leucosis									
Jaagsiekte									
Orf		x	x		x	x	x	x	x
Warts	x			x	x	x	x	x	

There is no treatment for viral diseases with the result that animals have to be protected by vaccinations if they are available.

The snotsiekte vaccine is still in the experimental stage and will hopefully be registered in two years time.

Discuss vaccination programmes and biosecurity measures with your veterinarian.

Fungal diseases

The following fungal disease was reported by practices in the provinces:

Fungal diseases	MP	G	L	NW	FS	KZN	EC	WC	NC
Ringworm		x	x	x	x	x	x	x	

Protozoal diseases

Protozoal diseases	MP	G	L	NW	FS	KZN	EC	WC	NC
Besnoitiosis (olifantsvelsiekte)			x						

Toxicities

The following toxicities were reported by practices in the provinces:

Toxicities	MP	G	L	NW	FS	KZN	EC	WC	NC
Cardiac glycoside									
Slangkop									
Crotalaria									
Gifblaar									
Gousiekte				x					
<i>Cestrum</i> (ink berry)				x					
Tulip							x	x	x

Fluoride									
Lead				X					
Paraquat									
Phosamine									
Aldicarb									
Organophosphate									
Zinc phosphide									
Pyrethroid									
Amitraz									
Levamisole									
Ivermectin									
Tilmicosin									
Bromoxynil nitrate									
Ionophor									
Hypo									
Monensin									
Diazinon									
Chicken litter							X		

Beware when buying in animals or moving into rested grazing camps as they are the animals which usually eat toxic plants such as tulp and ink berries (*Cestrum*).

Toxic plants are sometimes eaten by young animals that do not know these plants. Be aware of this situation and know where these plants are growing on the farm.

For further information on treatment of tulp and other poisonings visit:

www.landbou.com

Vra vir Faffa

Klik op Indeks van antwoorde

Klik op Beeste of Skape

Klik op Vergiftigings

Klik op die Opskrifte

Every month there are reports of urea poisoning. Be aware when feeding this product that the correct concentration is used and that the lick does not get wet!

The following deaths due to toxic plants and substances were reported: ink berries, duwweltjies, gifblaar, Lantana, vermeersiekte, diazinone and lead (batteries).

Research are being done to control Lantana:

We would like to investigate involvement of your readers and yourself in the development of a National Programme for Management of Lantana similar to the attached National Programme for

Management of Parthenium. Our focus would be on the biological control of the species, however, farmers, landowners and communities would be interested in an integrated approach to the management of the species. Please do bear in mind that the rust-fungus will unfortunately not be a 'silver-bullet' as it is likely to impact some subspecies more than others and work better in some micro-climates than others..

Please can we consider how your readers would be able to contribute to the development of a National Programme? One element would be accurate mapping of the distribution of Lantana. If readers could be encouraged to report locations of Lantana then a more comprehensive map of its distribution would be feasible (we need to make sure that this is done in a co-ordinated fashion and using technology that allows for accuracy and ease of data collection (smart phone application to geographically referenced database – which would need to be set up and managed).

Encouraging readers to give input into a National Programme would result in greater support for its implementation. We would need to make sure that this is not too tedious a process.

Encouraging readers to be aware of the biological control agents that are out there already would also be useful. Again this could be reported using photographs and submitting these to a central database.

It would also be good if we could have landowners who would be willing to have 'biological control reserves' on their property. This would mean setting aside land that is infested by Lantana and ensuring that it is not cleared for any reason. The biological control agents would then be allowed to multiply in this area under the 'protection' of the landowner.

I write on behalf of Biological Control researchers at the Agricultural Research Council – Plant Protection Research Institute and at the Centre for Biological Control at Rhodes University.

<http://www.ru.ac.za/centreforbiologicalcontrol/>

Philip Ivey [mailto:P.Ivey@ru.ac.za]

Nutritional deficiencies

The following nutritional deficiencies were reported by practices in the provinces:

Deficiencies	MP	G	L	NW	FS	KZN	EC	WC	NC
Energy			X		X		X	X	
Protein					X			X	X
Phosphate			X	X	X		X	X	X
Calcium		X		X	X		X	X	

Micro-nutritional deficiencies

The following micro-nutritional deficiencies were reported by practices in the provinces:

Deficiencies	MP	G	L	NW	FS	KZN	EC	WC	NC
Iodine									
Copper									
Zinc								X	X
Selenium					X			X	
Magnesium				X				X	
Manganese								X	
Vitamin A								X	
Vitamin B 1								X	

There are antagonists such as calcium, iron and sulphur which hamper the uptake of micro-minerals. Have water and soil samples analysed to see what the levels of these antagonists are. Arrange with your veterinarian to have liver samples analysed to determine the status of these micro-minerals in your herd or flock.

Beware of fluoride poisoning as borehole water levels drop.

Supplement animals with vitamin A during drought conditions.

Multifactorial diseases and other conditions

The following conditions were reported by practices in the provinces

Multifactorial diseases and other conditions	MP	G	L	NW	FS	KZN	EC	WC	NC
Abortions	X	X	X		X	X		X	
Stillbirths					X	X		X	
Abscesses	X	X	X	X	X	X	X	X	X
Intestinal ulcers									
Bladder stones –urolithiasis					X		X		
Blindness					X	X	X	X	
Bloat	X	X			X	X		X	
Blue udder	X	X		X	X			X	
Diarrhoea	X	X	X	X	X	X	X	X	
Epididymitis								X	
Eye cancer					X		X	X	
Eye infections	X	X	X	X	X	X	X	X	X
Joint ill	X				X	X	X	X	
Lameness/foot problems	X	X		X	X	X	X	X	
Lung infection	X	X	X	X	X	X	X	X	X
Mastitis	X	X			X	X	X	X	
Navel ill	X			X	X			X	
Red gut (sheep, torsion of gut)		X							
Rectal prolaps									
Trauma	X				X	X	X	X	
Teeth wear									
Plastic bags (ingestion)									
Downer		X		X	X		X	X	

Discuss the origin, treatment and prevention of these diseases with your veterinarian.

Metabolic diseases

The following diseases were reported by practices in the provinces:

Metabolic diseases	MP	G	L	NW	FS	KZN	EC	WC	NC
Acidosis	X	X			X	X	X	X	
Displaced abomasums						X		X	
Ketosis (Domsiekte)								X	
Milk fever				X	X			X	

Make sure that you adapt animals to feed containing concentrates.

Discuss the etiology, treatment and prevention of these diseases with your veterinarian.

Reproductive diseases

Reproductive diseases	MP	G	L	NW	FS	KZN	EC	WC	NC
Dystocia (difficult births)	X	X		X	X	X	X	X	X
Endometritis					X	X		X	
Hydrops									
Metritis	X	X				X		X	
Poor conception	X				X	X	X	X	
Retained afterbirth	X	X			X	X		X	
Sheath prolaps	X	X			X	X			
Uterine prolaps				X	X	X		X	
Vaginal prolaps	X	X		X	X	X			
Penis injury									
Orchitis									

Environmental conditions

	MP	G	L	NW	FS	KZN	EC	WC	NC
Exposure to cold							X		
Frozen to death									
Heat stress								X	
Lightning	X				X	X	X	X	X
Drought							X	X	

Other conditions

	MP	G	L	NW	FS	KZN	EC	WC	NC
Drug residues (milk, meat, liver, kidney etc)								X	
Preditors	X			X	X		X	X	
Theft				X	X				

Traumatic pericarditis (wire in fore stomachs)			X		X	X			
Trauma (fractures etc)		X			X	X			
Trauma (veldfires)									

In the CODE OF CONDUCT of the RPO the following standard operating procedures are documented. The local veterinarian should be your partner to help you achieve the necessary standards. <http://www.rpo.co.za/BestPractices/English.aspx>

PRECAUTIONARY MEASURES TO SUPPORT BIO-SECURITY.

Precautionary measures are required to protect the herd against diseases acquired because of external contact. The following categories are of concern:

1. DIRECT LIVESTOCK PURCHASES (and own animals returning):

The following should be *verified* before importing new animals into the herd:

How long animals have resided at the purchase or previous location?

Have there been any recent disease outbreaks in the location?

Do brand marks clearly confirm ownership?

Was a vaccination program followed (need paper or veterinarian proof). What are the local prevalent external parasites and the routinely implemented control program?

Is a veterinarian supported control program against transmittable diseases followed?

Dates and sufficient number of tests for reproductive diseases of both male and female

Dates and tests for zoonotic diseases

The above should also be verified with the purchaser's own veterinarian.

2. PURCHASES FROM SALES OR SPECULATORS

Purchase only in areas which are not in close proximity to scheduled areas

Visually inspect the animals before purchasing for:

* brand marks

* parasite infestation

3. TRANSPORT TO THE FARM

Use only reputable transporters

Has the truck been cleaned and disinfected?

Truck to follow the shortest uninterrupted route

Truck to take the shortest route to the handling facilities

Do not allow the truck personnel to get in contact with the farm herd

4. ARRIVAL ON THE FARM

Off-load the livestock to limit stress and to be visually evaluated for any unnatural conditions.

Isolate them from the farm herd and shared facilities for at least 21 days (quarantine)

Retest for diseases of concern if needed, before mixing with the rest of the herd

Process new arrivals within 24 hrs after arrival (unique ID tag brand, dip, dose, vaccinate)

Inspect regularly

5. FEED PURCHASES

Ensure bales of hay are sourced from areas that are not bordering scheduled areas

Purchase feed from reputable dealers only

Avoid buying feed in second hand bags

Ensure feed trucks are also disinfected and cleaned, especially if also used to transport animals to abattoirs

6. VISITORS

Do not allow strangers or their vehicles amongst the livestock

Ensure fences are well maintained and preferably jackal and warthog proof

7. EMPLOYEES

Do not allow the employees to eat in feed stores

Supply employees with sufficient ablution facilities

Regularly arrange to let employees be medicated for tape worm and have health check-ups

Keep record of all employee livestock on the property

Treat employee livestock with separate but dedicated health programs

Ensure employees understand the reason behind the implemented bio-security measures to help ensure compliance.

GENERAL AND REPRODUCTION MANAGEMENT

Record keeping: All animals are individually identified and recorded.

To prove ownership: All animals are marked with the registered brand mark according to the Animal Identification Act, No 6 of 2002.

A defined breeding season is the basis of effective management: The breeding season coincides with the rainy season, i.e. the period when nutritive value of the pasture is at its best.

Sufficient energy reserves in the herd as measured by condition scoring are vital, especially for effective breeding, and when inadequate the herd is supplemented in consultation with a nutritionist: Condition scoring of bulls and cows are regularly done, particularly at the onset of the breeding season and supplemented if necessary.

Bull - cow ratios are maintained: A ratio of 1 to 25 is maintained in every separate herd.

Fertility of breeding bulls: All breeding bulls are tested for mating ability and semen quality before the breeding season.

Sexually transferable diseases: Sheath washes or scrapes on bulls are performed annually.

Diseases that can cause poor conception, abortion or weak calves: Cows are vaccinated against such diseases in consultation with the veterinarian.

Breeding success monitored by a veterinarian: Rectal pregnancy or scan diagnosis is done by the veterinarian 8 weeks after the breeding season.

Twenty percent of cows or more not pregnant: Further tests are done to determine cause of low pregnancy rate.

Culling of non-pregnant cows: Non-pregnant cows are removed from the herd and considered a necessary bonus to supporting herd income.

HERD HEALTH AND BIO-SECURITY

Maintenance of herd health is key to a successful enterprise: A veterinarian should visit the farm bi-annually at least.

Calf mortality before 3 months of age is an important reason for poor weaning percentage: Good management practices are applied to limit early calf deaths.

Some diseases and parasites (internal and external) are more often encountered in specific areas:

Annual vaccinations and a parasite control program should be applied according to regional requirements and in liaison with the veterinarian.

Farmers selling weaned calves to feedlots may want to have a market advantage compared to others: A specific vaccination program is applied before weaning for that purpose.

Herds may be at risk of being exposed to CA and TB: The herd is tested annually for CA and all heifers are vaccinated against CA between 4 and 8 months of age with an efficient, approved remedy. The herd is tested at least every 5 years for TB

Precautionary measures are required to prevent diseases being imported into the herd: A quarantine program to keep incoming animals separate is followed. All incoming animals have a suitable certificate of negative test results or are of a certified clean, closed herd.

Stock remedies and medicines should be registered, correctly stored and used before the transpire date: All medicines and stock remedies are registered, stored and applied according to prescription.

Prescribed medicines with a specific application are under the control of the veterinary profession: All prescription medicines are obtained and applied under prescription from a veterinarian.

Practices that had nothing to report

Karino – Dr. Silke Pfitzer

George – Dr. Mark Chimes

Kareedouw – Dr. Marten Bootsma

Plettenberg Bay – Dr. André Reitz

Reitz – Dr. Murray Smith (in Australia)

Vanderbijlpark – Dr. Kobus Kok

Equines

Gauteng

Magaliesburg

Coccidiosis – Adult horses causing weight loss and diarrhoea

Limpopo

Bela –Bela

Swelling- Horse with acute sudden swelling on lateral side of body, not ill – horse under observation.

Maltreatment – Donkey, fracture of front leg at fetlock, used to pull chariot. Bought donkey to help her.

Mokopane (Potgietersrus)

Bont ticks – 3

Brown ear-ticks – 3

Screw-worm - 1

Free State

Trompsburg/Springfontein

Few African Horse Sickness cases

Babesiosis – 2 cases

Eastern Cape

Port Alfred

Screwworm 2 x Donkey cases - Port Alfred

Northern Cape

Colesberg

Babesiosis – few cases

Game

Gauteng

Pretoria

Intestinal roundworms - 2

Bont tick – 3

Bont-legged tick – 3

Coccidiosis – 2

Puncture peritonitis - 1

Limpopo

Bela-Bela

Internal parasites – Sable 1000-3000 eggs per gram of faeces

Anaemia, high epg (probably wireworm), aborted, retained afterbirth – Sable gave blood transfusion, uterine douche plus general treatment. Waiting for lab results for brucellosis.

Wound – Nyala with a pipe around leg

Wound – Buffalo, probably stabbed

Acute death – black impala, probably mamba bite

Poly-arthritis, mortality – Kudu calf

Trauma- Nyala with broken front leg

Mokopane (Potgietersrus)

Blue ticks – 1

Bont ticks – 3

Brown ear-ticks – 1

Bont-legged ticks - 1

Screw-worm - 1

Polokwane

Intestinal roundworms – 3

Resistant roundworms – 3

Brown ear-tick - 3

Bont-legged tick -3

Coccidiosis – 1

Copper deficiency - 1

Diarrhoea - 1

Eye infection – 1

Tzaneen

Moved Nyala and Impala from the Cape died.

Vaalwater

Tick burdens – 3 out of 5

Eye problems – Roan – (unilateral keratitis)

North West

Christiana

Roundworms - 2

Klerksdorp

Red-legged ticks – 2

Bont –legged ticks – 2

Brown ear-ticks – 3 Buffalo

Eye infections – 2 Impala

Stella

Rabies – Bat eared fox 1

Eastern Cape

Port Alfred

Buffalo 1 x screw-worm Shaw Park

Sable Bull (New to Coast) 1 x Theileria + wireworm

Swine

Gauteng

Onderstepoort

Internal roundworms – 1

Mange – 2

Dystocia - 1

Ostriches

Oudtshoorn

Diarhoea - Dysbacteriosis, severe high temp result in volatile feedintake

Monthly report on Livestock and Wildlife isolations for February 2018 from Vetdiagnostix –Microbiology Laboratory, supplied by dr. Marijke Henton

(henton@vetdx.co.za)

Vetdiagnostix Bacteriology, February 2018

February was a short month, and there were also fewer relevant isolates than usual.

Samples from the bovine respiratory tract yielded *Mannheimia haemolytica* [3], *Pasteurella multocida* [5], *Histophilus somni* [2], *Mycoplasma* [8], *Mannheimia varigena* [2] *Trueperella pyogenes* [4] and one case of *Streptococcus suis*. Septicaemia in cattle was due to *Salmonella* Dublin in 2 cases, and *Mannheimia haemolytica* in another.

Calf enteritis was due to a combination of *Cryptosporidium* together with *E. coli* in 4 cases, and *E. coli* alone in another three. One of the *E. coli* isolates was an Extended Spectrum Beta Lactamase [ESBL] producer and resistant to most of the antibiotics tested.

Only two mastitis samples yielded meaningful results and both cultured very resistant bacteria [a methicillin resistant *Staphylococcus epidermidis* and an ESBL positive *Enterobacter*] together with *Pseudomonas aeruginosa*, which is always resistant to many antibiotics.

Enteritis in lambs yielded *Cryptosporidium* [3] and *E. coli* [3]. No virulence factors were detected from *E. coli* in one of the cases where both *E. coli* and *Cryptosporidium* were found together. This confirms that the *E. coli* was a secondary invader in that instance.

Enteritis in pigs was associated with *E. coli* [6] and three of the isolates were ESBL positive. One farm yielded an extremely resistant *E. coli*, which is defined as an isolate which is resistant to all the antibiotics that were tested.

A pig with a purulent kidney and bladder infection yielded *Trueperella pyogenes*.

Buffalo with abscesses [2] yielded *Trueperella pyogenes*; in one of the cases together with the anaerobe, *Prevotella*.

Feedlot report received from Drs. Shaun Morris and Eben du Preez for February 2018 (edupreez1@telkomsa.net)

Condition	Comments and Specie
Intestinal roundworms	O 3
Tapeworms	B 1
Liver fluke worms	B 3
Parafilaria	B 3
Cysticercosis (measles)	B 3
Heartwater tick	B 3
Brown ear-tick	B 2
Bont-legged tick	B 3
Red-legged tick	B,O 3
Blowflies	O 1
African red water	B 1
Asiatic red water	B 2
Anaplasmosis	B 3
Heartwater	B,O,C 1
Lumpy skin disease	B 2
Trichomonosis	B 2
Quarter evil	B 1
Brucellosis	B 1
Lumpy wool	O 3
Red gut	B 3
Blood gut	O 3
Pulpy kidney	O 3
FSE	O 3
Botulism (farmer reported 8 deaths)	B 3
<i>E .coli</i>	B 2
Ringworm	B 3
IBR	B 1
Warts	B 3
Orf	O 3
Protein deficiency	B 3
Energy deficiency	B 3
Phosphate deficiency	B 3
Vitamin A deficiency	O 1
Dystocia	B 1
Joint ill	B 2
Lameness	B,O 3
Lungs	B,O 3
Diarrhoea	B,O 3
Eye infection	B,O 3

Abscesses	B,O 3
Heatstroke	B 1
Trauma	B,O 3
Pericarditis	B 3, O 1

Deaths reported by farmers:

Deaths on farm where backgrounding was done due to anaplasmosis and red water.

**Feedlot report received from Dr. Andy Hentzen for February 2018
(andyvet@mweb.co.za)**

Condition	Comments and Specie
Intestinal roundworms	B 3
Tapeworms	B 3
Liver fluke worms	B 2
Conical fluke	B 1
Parafilaria	B 3
Cysticercosis (measles)	B 1
Blue ticks	B 3
Heartwater tick	B 1
Brown ear-tick	B 3
Bont-legged tick	B 3
Biting lice	B 2
Sucking lice	B 2
Nuisance flies	B 3
African red water	B 3
Asiatic red water	B 2
Anaplasmosis	B 3
Heartwater	B 1
Lumpy skin disease	B 2
Three day stiff sickness	B 2
Red gut	B 3
Coccidiosis	B 3
BVD	B 2
IBR	B 3
Orf	O 2
Water contamination	B 1
Protein deficiency	B 2
Lameness	B 3
Lungs	B 3
Diarrhoea	B 3
Eye infection	B 3
Abscesses	B,C 3

**Monthly report for February 2018 from Dr R D Last (BVSc; M.Med.Vet(Path);
MRCVS)**

Specialist Veterinary Pathologist, Vetdiagnostix - Veterinary Pathology Services

Contributors

Mr Butch Bosch, Ms Ntando Magoso, Mrs Beverley Williams, Ms Nicole Genga, Dr Rick Last

LIVESTOCK DISEASE SURVEILANCE			
LIVESTOCK SPECIES	DISEASE AGENT	NO. CASES	LOCATION
Bovine, Heifer	BVD (IHC positive)	1	Kimberley, Northern Cape
Bovine, Heifer	Septicaemic salmonellosis	1	Potchefstroom, North West
Bovine, Bulls	Sarcoptic mange	1	Botswana
Bovine, Simmentaler Cow	Seneciosis	1	Rustenburg, Gauteng
Bovine, Red Angus	Babesia bovis	1	Eston, KZN
Bovine, Heifer 3 months	Septicaemic salmonellosis	1	Howick, KZN
Bovine, Adult Cow	Paramphistomiasis	1	Memel, Free State

WILDLIFE DISEASE SURVEILANCE			
WILDLIFE SPECIES	DISEASE AGENT	NO. CASES	LOCATION
Roan Antelope, Heifer	Theileriosis	1	Swaziland
Sable Antelope, Sub-adult	Aspiration pneumonia	1	Rooiberg, Limpopo
Caracal, Adult Female	Aspiration pneumonia	1	Plettenburg Bay, Southern Cape
Sable Antelope, Neonate	In-utero theileriosis	1	Phalaborwa, Mpumalanga
Roan Antelope, Neonate	Neonatal theileriosis with DIC	1	Thabazimbi, Limpopo
White Rhino, Adult Bull	Renal amyloidosis and pyelonephritis	1	Rooiberg, Limpopo
Buffalo, Adult cow	TRP with Truperella pyogenies embolic brain abcess	1	Beestekraal, Limpopo
Lion Cub, 1 week	Escherichia coli bronchopneumonia	1	Ottosdaal, North West
Sable Antelope, Neonate	Congenital biliary atresia	1	Phalaborwa, Mpumalanga
Cheetah, Adult Male	Peripheral nerve sheath tumour	1	Hoedspruit, Limpopo
Njala, Adult Cow	Exertional myopathy	1	Polokwane, Limpopo

Monthly report for February 2018 from Queenstown Provincial Veterinary Laboratory as supplied by Dr. A.D. Fisher (alan.fisher@drdar.gov.za)

Condition	Area	Comments and Specie
Intestinal roundworms		O 3
Tapeworms		O 1
Liver fluke		O 1
Echinococcus cysts		B,O,C 3
<i>Spirocerca lupi</i>	Cofimvaba	Canine 1
Lumpy skin disease	Cofimvaba	B 3
Three day stiff sickness	Queenstown	B 2
Blue tongue	Cathcart	O 3
Brucellosis	Queenstown	B 1
Coccidiosis		O,C 3
Rabies	Mthatha Port St. Johns Nqcobo Queenstown Mt. Fletcher Barkly East	Bovine 1, Canine 1 Canine 1 C 1 Canine 1 Canine 1 Canine 1
Geel Dikkop (<i>Tribulus</i>)	Whittlesea, Tarkastad	O 2

Rabies – Canine, bovine – ongoing outbreak in Eastern Cape (former Transkei)

B – bovine; O – ovine; C – caprine; P – pigs; G – game

1 = one case; 2 = 2 to 9 cases; 3 = more than 10 cases

Monthly report on Livestock and Wildlife isolations for February 2018 from IDEXX Laboratories supplied by dr. Liza du Plessis (Liza-DuPlessis@idexx.com)

Condition	Comments and Specie
Internal roundworms	O,C 2
Heartwater tick	E,G 1
Red-legged tick	E 1
BMC (snotsiekte)	B 1
Equine sarcoid	E 1
Abortion	B,O 1
Diarrhoea	B,O 1
Rhabdomyolysis (muscle)	B 1

8th March 2018

DAFF

Import/Export Policy Unit Subdirectorate

Monthly report:

Cases sent to referring veterinarians between 12th February and 8th March 2018

Cases from State vet Skukuza or Orpen

Cases imported with master permit (none)

Note: Pending NZG cases are being done by Dr Lewis as part of her training in wildlife pathology and so results are delayed.

PMDate	Species	Final	PM No
21 Aug 17	White Rhino	Poached animal	17Z150
21 Aug 17	White Rhino	Poached animal	17Z151
21 Aug 17	White Rhino	Poached animal	17Z149
06-Sep-17	Boa constrictor	Inclusion body disease, Salmonella enteritis	17Z162
06-Sep-17	Spotted Eagle Owl	Strigid herpes virus infection	17Z161
12-Sep-17	Roan	Pending	17Z166
09-Oct-17	Skaapsteker	Bacterial enteritis	17Z169
09-Oct-17	Blue and Gold Macaw	Pending	17Z170
09-Oct-17	Domestic Cat	Bacterial splenitis, suspected FIV	17Z168
09-Oct-17	Madagascan Ground Boa	Pending	17Z171
20-Oct-17	Sable	Pending	17Z174
20-Oct-17	African Edible Bullfrog	Pending	17Z175
20-Oct-17	Egyptian Goose	Pending	17Z176

PMDate	Species	Final	PM No
10-Nov-17	Aurora house snake	Parasitic bronchopneumonia	17Z186
10-Nov-17	Nubian Ibex	Complications of cystic ovarian disease	17Z185
21-Nov-17	Tiger Fish	Encephalitis	17Z187

Kind regards,

A handwritten signature in black ink, appearing to read 'E. Mitchell', written in a cursive style.

Dr E Mitchell (née Lane)
Faculty of Veterinary Science
Research Associate, NZG

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