

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

July 2017

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

Click on Disease Reports

The following practices and laboratories (119) submitted reports during July 2017:

Mpumalanga (13)

Balfour – Dr. Louis van Jaarsveld
Bethal – Dr. Hardus Pieters
Delmas – Drs. Du Plessis and Ferreira
Ermelo – Drs. Potgieter and Steinberg
Grootvlei – Dr. Neels van Wyk
Karino – Dr. Silke Pfitzer
Lydenburg – Drs. Trümpelmann and Steyn
Malalane – Drs. Van Sittert and Van Sittert
Middelburg – Malan, Erasmus and Bernitz
Nelspruit – Dr. André Beytell
Piet Retief – Drs. Niebuhr and Weber
Standerton – Dr. Kobie Kroon
Volksrust – Drs. Watson, Solomon and Scheepers

Gauteng (6)

Bronkhorstspuit – Drs. De Bruin, De Bruin, Rudolph and Slabber
Krugersdorp – Dr. Clare Speedy
Magaliesburg – Dr. Ryan Jeffery
Nigel – Dr. Cindy van der Westhuizen
Onderstepoort Veterinary Academic Hospital - Proff. Annandale, Prozesky, Shakespear, Holm and Esposito, Gratwick, Hamman and O'Dell
Pretoria – Dr. Hanneke Pienaar

Limpopo (7)

Bela-Bela – Dr. Nele Sabbe
Lephalale (Ellisras) – Dr. Brigitte Luck
Makhado – Drs. Harris, Klopper and Jacobs
Mokopane (Potgietersrus) - Dr. Henk Visser

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

Vaalwater – Dr. Hampie van Staden

Vaalwater – Dr. Annemieke Müller

North West (7)

Brits – Drs. Boshoff and Coertze

Christiana - Dr. Pieter Nel

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

Klerksdorp – Drs. Coetzee and Venter

Lichtenburg – Dr. Fritz Ras

Stella - Dr. Magdaleen Vossler

Ventersdorp/ Koster – Drs. Marais and Benadé

Free State (25)

Bothaville – Dr. Johan Blaauw

Bultfontein – Dr. Santjie Pieterse

Clocolan – Drs. Wasserman and Basson

Dewetsdorp – Dr. Marike Badenhorst

Excelsior – Dr. Deidré Nel

Ficksburg – Drs. Kotze and Coetzer

Frankfort - Drs. Lessing, Cilliers and Janse van Rensburg

Gariiep Dam – Dr. Marni Strauss

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

Senekal – Dr. Jan Blignaut

Smithfield – Dr. Nienke van Hasselt

Trompsburg – Dr. Wyn Irwin

Viljoenskroon - Dr. Johan Kahts

Villiers – Drs. Hattingh and Hauptfleisch

Vrede – Drs. Bester - Cloete and Fourie

Wesselsbron – Dr. Johan Jacobs

Winburg – Drs. Albertyn and Albertyn

Zastron – Drs. Troskie and Strauss

KwaZulu-Natal (16)

Bergville - Dr. Ariena Shepherd

Bergville – Dr. Jubie Muller

Camperdown – Dr. Anthony van Tonder

Dundee – Drs. Marais and Fynn
Dundee – Dr. Paul Reynolds
Eshowe - Drs. Pryke and Hoffman
Estcourt – Drs. Turner, Tedder, Taylor, Tratschler, Van Rooyen and Alwar
Howick – Drs. Hughes, Lund, Gordon, Allison and Taylor
Kokstad - Drs. Clowes and Shrives
Mooi River – Drs. Fowler, Hartley, Alexander and Reisinger
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 (11)

Alexandria - Drs. Olivier and Dreyer
Aliwal North – Drs. Troskie and Strauss
Bathurst – Dr. Jane Pistorius
Cradock – Dr. Frans Erasmus
Graaff- Reinet - Dr. Roland Larson
Humansdorp – Drs. Van Niekerk and Janse Van Vuuren
Jeffreys Bay – Drs. Hoek and Lategan
Kareedouw – Dr. Martin Bootsma
Stutterheim - Dr. Dave Waterman
Uitenhage – Drs. Mulder and Krüger
Witelsbos – Dr. Bernadine van den Berg

Western Cape (17)

Beaufort West - Drs. Pienaar and Grobler
Caledon – Drs. Retief, Coetzer, Jansen and Woudstra
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 – Drs. Bosman and Groenewald
Malmesbury – Dr. Markus Fourie
Maamesbury – Dr. N.J. Heyns
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. Malan
Vredenburg – Dr. Izak Rust
Wellington – Drs. Van Zyl and Louw

Northern Cape (9)

Calvinia – Dr. Bertus Nel

Colesberg – Drs. Rous and Rous

De Aar – Dr. Donald Anderson

Kathu – Dr. Jan Vorster

Kimberley – Drs. Van Heerden and Swart

Kuruman – Dr. Gerhard van der Westhuizen

Kuruman – Dr. Lea Shuda

Postmasburg – Dr. Boeta van der Westhuizen

Upington – Drs. Vorster and Visser

Feedlots (2)

Dr. Andy Hentzen

Drs. Morris and Du Preez

Laboratory reports (6)

Dr. Marijke Henton - Vetdiagnostix, Johannesburg

Dr. Alan Fisher – Queenstown Provincial laboratory

Dr. Rick Last – Vetdiagnostix, Pietermaritzburg

Dr. Liza du Plessis – Idexx, Onderstepoort

Dr. Lucy Lange – Pathcare, Cape Town

George - Deltamune

Key Message

The key message this month is:

Be aware when buying in animals infected with Johne's disease. This debilitating disease is usually brought onto the farm when buying in a positive animal which shows no clinical signs.

Information on the disease is available when clicking on the attached web address.

INTRODUCTION

Johne's disease (also called paratuberculosis) is a disease caused by the bacteria *Mycobacterium avium subsp. paratuberculosis*. This disease affects the intestinal tract and the affected animals show increasingly severe diarrhoea followed by slowly progressive wasting of the animal, with a normal temperature and appetite. Johne's disease primarily affects sheep and cattle, but has been reported in other species as well.

This bacterium is resistant to heat, cold and drying and can survive for long periods (more than a year) in soil and water. The disease is shed by infected animals through manure and milk, thus young animals usually become infected through contamination of the environment or drinking from an infected animal. A foetus can also become infected if the pregnant dam is infected with the disease. Shedding of the bacteria through faeces occurs before the animal shows clinical signs of the disease and thus can spread the disease before it is noticed. A herd free from the disease is usually infected by bringing in animals with the disease.

Animals usually only start showing clinical signs of the disease when they are older. The bacteria causes the intestinal walls to become thickened and inflamed, causing protein loss which leads to muscle wasting, even in the absence of diarrhoea. This may cause the animals to develop a swelling under the jaw (also known as "bottle jaw"). The animals gradually become more malnourished, debilitated and eventually die.

A diagnosis of Johne's disease is usually based on clinical signs, with a positive test required for confirmation. The biggest challenges in the control of this disease is the difficulty of identifying infected animals that are not showing signs of the disease and the currently available diagnostic testing methods which are not very reliable or efficient.

For the full article click on this web address

<http://nahf.co.za/wp-content/uploads/Johnes-Disease-Current-status-and-way-forward-2017-08.pdf>

OVINE JOHNE'S DISEASE VENDOR DECLARATION

ON THE SALE OF SHEEP

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
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9. All lambs born are vaccinated

YES	NO
-----	----

10. If vaccinated, the number of years that the vaccinations have been done is

	years
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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: _____

Diseases cannot be properly controlled if animals are not identified on a central data base, if they are not traceable and their movement controlled.

The State and private sector are now working together to get a system going addressing these issues

Draft on movement of animals published

The Department of Agriculture, Forestry and Fisheries (DAFF) published a draft document on the registration, approval, traceability and movements recording of animals in South Africa for purposes of disease control.

The purpose of animal identification, recording and traceability (AIRT) is to accurately establish the numbers of the national herd and to allow for the monitoring thereof.

The system is an indispensable tool in safeguarding the national herd through preparedness for disease outbreaks, thus ensuring speedy containment and limiting damages to national and international trade.

The aim is to improve the access of livestock farmers to improved sanitary (animal health and product safety) services; and to provide opportunities for a more stable, predictable income generating market opportunities for the livestock and agricultural products sector.

The ultimate objectives are :-

- To be able to trace meat, animal food products and livestock back to the farm of origin.
- To be able to trace disease outbreaks back to the source and determine the possible spread of the outbreak.
- To manage disease outbreaks.
- To expand market access.
- To assist in the control of stock theft.
- To be able to support local farmers with disaster relieve in case of disease outbreak.

In order to implement a functional and efficient AIRT system, a phased-in approach is highly recommended.

A functional AIRT system aims to identify animals individually and register them on a central database.

Such an AIRT system must be able to link with animal movement information, laboratory results for animal diseases (e.g. brucellosis) and also link with residue and micro-biological testing for anti-microbial resistance and food safety.

Visit the website of the National Animal Health Forum

The website of the National Animal Health Forum (NAHF) is now operational.

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/>

Better relationships are being built between the State Veterinary departments and the private sector.

Summary of disease report for July 2017

119 Reports from veterinary practices and laboratories were received (Mpumalanga (MP) 13; Gauteng (G) 6; Limpopo (L) 7; Northwest 7; Northern Cape (NC) 9; Feedlots (FL) 2 and Laboratories (Lab) 6).

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	X
Resistant roundworms	X	X	X	X	X				
Wireworm	X	X	X	X	X	X	X	X	X
Brown stomach-worm								X	
Long-necked bankruptworm									
Large-mouthed bowelworm									
Nodularworm									
Lungworm									
Eyeworm									
<i>Parafilaria</i>									
Tapeworms	X	X	X		X	X		X	X
Liver fluke	X		X	X	X	X	X		
Conical fluke	X				X	X	X	X	X
Cysticercosis (measles)	X			X					X
Schistosomiasis (bilharzia)									
Coccidiosis	X	X	X	X	X	X	X	X	X
Cryptosporidiosis				X	X	X	X	X	

There is a perception that parasites are dormant in the winter. From the table above it is not the case as wireworm infection was reported from all the provinces. Beware as wireworm resistance reported to some of the active anthelmintic groups is wide spread. Use the five point check to keep on top of what is happening in the flock. For further detail contact your local veterinarian.

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	X	
Resistant blue ticks	X					X		X	

The best time to vaccinate cattle against Asiatic red water is during the winter months. Visit your veterinarian to discuss your vaccination programme and order vaccines in time.

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

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					

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
Ephemeral fever (Three day stiff sickness)						x			
Blue tongue		x							
Rift Valley Fever									
Wesselsbron									
Nagana									

After the first frost insect transmitted diseases usually decline as is seen in the table above. The reason why lumpy skin disease outbreaks are still reported is that this disease is also transmitted by ticks. Now is the time to order vaccines for the next rainy season to control these diseases.

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	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.

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

Harpuisbos									
Syringa berries									
Kraalbos, Geelbos								x	
Crotolaria									
Radish									
Carrot poisoning									
Onion poisoning									
Bracken fern									
Pollen beetle (<i>Astylus atromaculatus</i>)									
Water contamination									
Nitrate									
Urea	x			x	x	x			
Snake bite				x					
Moth cocoons (impaction)									
Blue green algae					x				
Copper									
Selenium									
Zinc									
Fluoride									
Lead									
Paraquat									
Phosamine									
Organophosphate									
Zinc phosphide									
Pyrethroid									
Amitraz									
Levamisole									
Ivermectin								x	
Tilmicosin									
Ionophor									
Hypo									

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

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

www.landbou.com

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!

Environmental conditions

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

Other conditions

	MP	G	L	NW	FS	KZN	EC	WC	NC
Drug residues (milk, meat, liver, kidney etc)									
Preditors		X			X				
Theft					X				X
Traumatic pericarditis (wire in fore stomachs)									
Trauma (fractures etc)		X							

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

Bathurst – Dr. Jane Pistorius

Karino – Dr. Silke Pfitzer

Kareedouw – Dr. Martin Bootsma

Malmesbury – Dr. N.J. Heyns

Mooi River – Dr. Daniel Alexander

Newcastle – Dr. Barry Rafferty

Oudtshoorn – Dr. Glen Carlisle

Smithfield – Dr. Nienke von Hasselt

Trompsburg/Springfontein – Dr. Wyn Irwin

Vaalwater – Dr. Annemieke Müller

Vredenburg – Dr. Izak Rust

National Zoological Gardens – Dr. Emily Mitchell

Ostriches

Western Cape

Oudtshoorn – Ostrimed

Condition	Comments
Tapeworms	1
Biting and sucking lice	1
Poor doers	Slow growth rate/ mass gain – cold mornings hot day times, just too large fluctuations. Poor feed intake = poor growth increased problems
Upper respiratory problems	Few cases of sinusitis/rhinitis – winds and dust
Lung conditions	Dust, kraaled, stress, cold stress
Nutritional deficiencies	Drought – no roughage available – cheaper to feed concentrates such as maize than roughage. Lot of birds just to weak.
Selenium deficiency	1
Energy deficiency	Heat waves reduce feed intake considerably.
Acidosis	2
Cold	2 Very cold day or evenings. Older chicks which are not fully protected suffer most. Show poor intake, negative metabolic rate and long tail of mortalities

Equines

Lydenburg

Babesiosis -1

Gauteng

Muldersdrift

Gastrodiscus – 3

Limpopo

Mokopane

Screw-worm - 1

Eastern Cape

Humansdorp

Ophthalmia – Severe infection in a donkey

Coli – 2 moderate cases in horses

Northern Cape

Colesberg

Ascaris – yearlings

Systemic fungal mycosis

Game

Gauteng

Pretoria

Brown ear-tick – 2
Bont tick - 1
Heartwater – 2
Lungs – 2
Abscesses - 2

Limpopo

Bela-Bela

Abscesses – 1 Hippo died
Snare – Warthog with snare around mouth
Rotten carcass – no diagnosis
Makhado - Lungs

Mokopane

Blue ticks - 1
Heartwater ticks – 1
Copper deficiency - 1

Polokwane

Intestinal roundworms – 3
Resistant roundworms – 3
Brown ear-tick – 1
Bont-legged tick -1
Coccidiosis – 1
Diarrhoea – 3
Abscesses – 1
Eye infection - 1
Capture myopathy – 1

North West

Klerksdorp

Protein deficiency – 2
Red-legged ticks - 2

Free State

Parys

Lungs - 1

KwaZulu-Natal

Pongola

Vitamin A deficiency – 1

Eastern Cape

Graaff-Reinet

Rabies – Bat eared jackal

Humansdorp

Malnutrition – 1 Drought - Wildebeest

Cold exposure – 8 Wildebeest died

Uitenhage

Clostridium perfringens A (Blood gut) - game

Western Cape

Wellington

Loss of weight and deaths – 3 Wireworm

Northern Cape

Colesberg

Theileriosis- Roan

Kuruman

Coccidiosis – 1 Young springbok

Rabies – 1 Confirmed in bat eared jackal

Upington

Protein deficiency

Monthly report on Livestock and Wildlife isolations for June 2017 from Vetdiagnostix –Microbiology Laboratory, supplied by dr. Marijke Henton (henton@vetdx.co.za)

Enteritis in young ruminants was again common during May. Most [11/13] of the cases yielded *Cryptosporidium* as well as *E. coli* in calves [4] and lambs [7]; but one case in calves was only *E. coli*, and one in a lamb, only *Cryptosporidium*. *E. coli* strains need to be further characterized [serotyping is presently unavailable] to distinguish them from environmental strains of *E. coli*. In two cases from lambs, PCR tests showed that no virulence factors were present, and so the *E. coli* were certain to be environmental opportunists. Enteritis in a pig also yielded *E. coli*.

Respiratory disease in feedlot cattle yielded *Mannheimia haemolytica* [8], *Pasteurella multocida* [3], *Histophilus somni* [4], *Mycoplasma* [8], *Trueperella pyogenes* [2] and one each of *Mannheimia* biovar 9, *Pseudomonas aeruginosa* and *Staphylococcus pseudintermedius*. Respiratory disease in sheep was due to *M. haemolytica* in one case, and the anaerobe, *Prevotella* in another.

There were two cases of *Salmonella* Dublin in calves.

An abscess in a bovine yielded *T. pyogenes*, and a lung abscess *Mycoplasma*. One abscess in a sheep yielded *Corynebacterium pseudotuberculosis* and the secondary invader *Pseudomonas aeruginosa*, and the other *Actinobacillus lignieresii*. *A. lignieresii* causes Wooden Tongue and sporadic abscesses in the head and neck area of ruminants. Bovine mastitis was caused by *Streptococcus uberis*, *Actinomyces*, *Nocardia*, *Enterobacter* and a methicillin resistant *Staphylococcus pseudintermedius*.

Dermatophilus congolensis [Senkobo disease] was isolated from a bovine skin.

Clostridial myositis was associated with *C. chauvoei* and *C. septicum*, and a third case was positive for *C. novyi*, *C. septicum* and *C. sordellii*, which made the case more likely the result of putrefaction than disease.

Streptococcus zooepidemicus and *S. dysgalactiae* [was *S. equisimilis*] were isolated from various conditions in horses; abscess [1], respiratory tract [1], nasal discharge [2], eye [1] and an infected wound. Other wound infections yielded *Staphylococcus aureus*, *Actinobacillus equuli*, *Porphyromonas* and two cases of *Actinomyces*. *E. coli* and *Enterococcus* were isolated from joint infections.

Salmonella Typhimurium was isolated from the liver of a serval, and *Pasteurella multocida* from the liver of a cheetah. A roan abscess yielded *T. pyogenes* and *S. aureus* was isolated from the uterus of a sable. A rhino with a respiratory infection yielded *Klebsiella pneumoniae*, and another rhino *S. dysgalactiae* from the uterus. A cheetah with enteritis yielded an Extended Spectrum Beta Lactamase *E. coli* isolate, which means that the isolate was resistant to all penicillins and cephalosporins. A lion had ringworm due to *Trichophyton mentagrophytes*.

Feedlot report received from Drs. Shaun Morris, Eben du Preez and Pierre Jansen Van Vuuren for July 2017 (edupreez1@telkomsa.net)

Sheep Feedlots:

Relative healthy period experienced with few cases of pulpy kidney, pneumonia, eye infection, *Trueperella pyogenes* abscesses and lameness mostly due to injury.

In the abattoirs lung lesions, *Corynebacterium ovis* abscessation, *Trueperella pyogenes* abscesses in lungs, liver abscesses and trimming of livers due to migration tracts in livers, *Stilezia hepatica* in bile ducts and occasional localized white spots on kidneys.

Cattle feedlots:

Pneumonia caused many morbidities and mortalities. Dust plays major role in this condition. Acute Interstitial Pneumonia caused acute mortalities in cattle close to finishing and is associated with dust and digestive problems. Calves that die from pneumonia within 10 days of arrival usually arrive with lung lesions and abscesses. They actually got sick while on the farms with the cows. Vaccinating calves against BRD before weaning will prevent most of these losses. This vaccination can occur together with vaccinating against the Clostridial diseases at 4 months of age. Calves can also be protected during the first 4 months after birth if the cows are vaccinated within a month or two before calving.

Acidosis in acute and subacute form also cause losses either by mortality or increased disease due to the effect on the immune system and economic losses due to reduced growth. Red gut is associated with more acute acidosis and cause acute deaths.

Few cases of Black quarter was seen.

Injuries mostly caused by animals playing and riding.

Few Rectal prolapses occurred.

At abattoirs many cases of *Parafilaria* infestation and cysticercosis were seen.

**Feedlot report received from Dr. Andy Hentzen for July 2017
(andyvet@mweb.co.za)**

Condition	Comments and Specie
Cysticercosis	B3
Blue ticks	B 3
Biting lice	B 2
African red water	B3
Asiatic red water	B3
Anaplasmosis	B2
Blackleg	B2
Red gut	B 3
Ringworm	B 2
BVD	B 2
IBR	B 3
Orf	O 2
Protein deficiency	B 2
Energy	B2
Lameness	B3
Lungs	B3
Diarrhoea	B3
Ophthalmia	B 3
Abscesses	B,C 3

Monthly report for July 2017 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, Aborted foetus	Bovine Herpes virus (IBR) abortion	1	Mooi River, KZN

Ovine, Lamb	<i>Mannheimia haemolytica</i> pleuropneumonia	1	Greylingrust, Free State
Bovine, Beef Weaner	<i>Pasteurella multocida</i> bronchopneumonia	1	Kokstad, KZN
Bovine, Beef Cows	Stootsiekte - Cotula/Matricaria poisoning	1	Bergville, KZN
Bovine, Calf 3 months	Mycotic rumenitis	1	Estcourt, KZN
Ovine, Lamb 2 months	White muscle disease	1	Underberg, KZN
Bovine, Holstein Heifers	Citrus pulp poisoning	1	Humansdorp, E Cape
Ovine, Lamb	Listeriosis	1	Porteville, W Cape
Bovine, Adult Cow	Lumpy skin disease	1	Port Edward, KZN
Bovine, Dairy calf	Salmonellosis	1	Ixopo, KZN
Bovine, Steer	<i>Babesia bovis</i>	1	Mtunzini, KZN
Bovine, Aborted fetus	<i>Salmonella</i> Dublin abortion	1	Creighton, KZN
Bovine, Calf 3 days	<i>Cryptosporidium</i>	1	Estcourt, KZN
Bovine, Calf 4 days	<i>Cryptosporidium</i>	1	Humansdorp, E Cape
Bovine, Aborted foetus	Bovine Herpes virus (IBR) abortion	1	Kokstad, KZN
Bovine, Heifer	Chronic seneciosis	1	Caledon, W Cape

WILDLIFE DISEASE SURVEILLANCE – 2017			
WILDLIFE SPECIES	DISEASE AGENT	NO. CASES	LOCATION
Njala, Cow	Mycobacterial pneumonia	1	Tzaneen, Polokwane
Rhino, Calf	Middelburg Virus	1	Umfolozi, KZN
Rhino, Calf 2 weeks	<i>Salmonella arizonae</i> navel-ill	1	Nelspruit. Mpumalanga
Njala, Sub-adult Male	Malformation left AV valve, capture heart failure	1	Brits, Gauteng
Kudu, Adult Bull	Transport tetany	1	Queenstown, E Cape
Zebra, Adult Mare	Aspiration pneumonia	1	Ugie, E Cape
Wilbebeest, Adult Cow	Sarcoptic mange	1	Thabazimbi, Limpopo
Rhino, Cow	Ulcerative gastritis with bacterial endotoxaemia	1	Amakhala, E Cape
Sable, Calf	Theileriosis	1	Thabazimbi, Limpopo
Roan, Calf	Theileriosis	1	Thabazimbi, Limpopo
Buffalo, Aborted Fetus	Hyperplastic goitre	1	Port Elizabeth, Eastern Cape

Monthly report for July 2017 from Queenstown Provincial Veterinary Laboratory as supplied by Dr. A.D. Fisher (alan.fisher@drdar.gov.za)

Condition	Area	Comments and Specie
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Intestinal roundworms		O 3 – Wireworm and bankruptworms
Lungworm		G 1 - Springbok
Tapeworms		O,C 2 – Taenia multiceps (malkop)
Asiatic red water	Hogsback	B 2
Heartwater	Mthatha, Cofimvaba	B 2
Lumpy skin disease	Cofimvaba	B 2
Brucellosis	Cofimvaba	B 1
Lam dysentery		O 1
<i>E. coli</i>	Lady Frere Cofimvaba	Dairy cows 2
Septic pericarditis		
Rabies	Lusikisiki Mthatha Molteno Cofimvaba Tsolo Sterkspruit Qunu Sterkstroom	Canine 1 case Canine 2 cases Canine 1 case Ovine 1 case Ovine 2 cases Bovine 1 case Bovine 1 case Caracal
Enzootic bovine leucosis (EBL)	Queenstown	Dairy cow – 1
Suspected salt poisoning		O 2
Methamidiphos poisoning	Whittlesea	Avian and C – 1
Energy deficiency		O 3
Domsiekte		O 3

Rabies: Large outbreak (canine associated) continues in Eastern areas of E Cape (former Transkei) and KZN. Two human cases.

New outbreak (Molteno / Sterkstroom) thought to be mongoose associated.

Brucellosis: Communal farming area Cofimvaba – 1 positive in herd (CFT 784). Morbidity is almost always **low** in communal areas – suspected to be due to sparse pasture and exposure of bacteria to sunlight / dessication

Ketosis (Domsiekte): Good late mid to late summer resulted in abnormally high twinning in communal sheep flocks and fat ewes. Harsh winter and overgrazing resulted in ketosis. Not

often seen in communal flocks as sheep are usually too thin.

Cold exposure: Large numbers of lambs and kids died of cachexia / exposure in communal farming areas – lambed in June / July onto very poor winter grazing without sufficient supplementation to ewes. July was very cold. Mating and lambing seasons largely determined by rainfall and not planned mating.

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 for July 2017 from Dr. Lucy Lange: PathCare Vetlab

[\(lange@pathcare.co.za\)](mailto:lange@pathcare.co.za)

Disease condition	Specie
Brucellosis	Cattle
Pneumonia (also foreign body)	Cattle
<i>Campylobacter</i>	Cattle
<i>Tritrichomonas</i>	Cattle
<i>Salmonella</i>	Cattle
BMC (Snotsiekte)	Cattle
<i>Candida</i> & Necrotic placentitis	Cattle
Liver necrosis	Cattle
Embolic bacterial nephritis	Cattle
Ulcerative abomasitis	Cattle
Squamous cell carcinoma	Horses
Sarcoid	Horses
Pneumonia	Sheep
Pulpy kidney	Sheep
CCN	Sheep
Colibacillosis	Sheep
Purulent glomerulonephritis	Sheep
Embolic bacterial nephritis	Sheep
Septicaemia	Sheep
Cryptosporidiosis	Sheep
Coccidiosis	Boer goats
Pulpy kidney	Boer goats
Bakterial meningitis	Boer goats

Game:	
Capture myopathy	Springbok, Gemsbok, buffalo
Liver necrosis	Gemsbok
Ulcerative abomasitis	Sable
Hypoproteinaemia	Buffalo
Theileriosis	Reedbuck
Enterotoxaemia	Eland, Roan

Monthly report on Livestock and Wildlife isolations for July 2017 from IDEXX Laboratories supplied by dr. Liza du Plessis (Liza-DuPlessis@idexx.com)

Condition	Comments and Specie
Blackquarter	G 1
Salmonellosis	B 1
<i>E. coli</i>	O 1
Enzootic abortion	O,C 2
Coccidiosis	O 1
BMC (snotsiekte)	B 2
Equine sarcoid	E 2
Protein/Energy malnutrition	G 2
Abortion	B,O,C,G 2
Lungs	B,O,G 2
Diarrhoea	B,O 2
Ink berry toxicity	B 2
Cold exposure	G 2

For the full report visit www.ruvasa.co.za and click on Disease reports