

BACILLARY HEMOGLOBINURIA

The Organism

- Clostridium haemolyticum (novyi type D)
 - rod-shaped bacterium
 - soil-borne infection
 - Gram positive
 - spore-forming
 - Non motile
 - Anaerobic
 - Necrotoxic and hemolytic beta toxin produced by Clostridium haemolyticum, a soil-borne anaerobe, growing in a necrotic infarction of the liver

Epidemiology

- Cattle are the usual species involved although occasional cases occur in sheep and rare cases in pigs
- animals in good condition are more susceptible
- Occurs in summer and autumn in endemic areas, which are usually irrigated or subirrigated fields

Clinical Signs

- found dead without signs having been observed
- cessation of rumination, feeding, lactation, and defecation
- Abdominal pain
 - disinclination to move
 - archedback posture
 - Grunting may be evident on walking
- Respiration is shallow and labored
- pulse is weak and rapid

Post Mortem Lesions

- Subcutaneous, gelatinous edema, which tends to become crepitant in a few hours, and extensive petechial or diffuse hemorrhages in subcutaneous tissue are characteristic
- There is a variable degree of jaundice
- Excessive amounts of fluid, varying from clear to bloodstained and turbid, are present in the pleural, pericardial, and peritoneal cavities
- ischemic infarct in the liver One or more may be present in any part vary from 5-20 cm in diameter.
 - The infarct is pale, surrounded by a zone of hyperemia, and has the general appearance of local necrosis
- Red urine is present in the kidneys and bladder and petechiation is evident throughout the kidney

Diagnosis

- Clinical sign
- Case history
- definitive antemortem test or postmortem lesion
- Diagnostic confirmation
 - Typical liver lesion
 - positive fluorescent antibody
 - staining of organism in lesion
- Bacteriology
 - tissue from edge of liver infarct, placed in an airtight container
 - four air-dried impression smears from lesion border
 - anaerobic Culture
 - fluorescent antibody test (FAT)
- Histology
 - fixed liver lesion
 - kidney

Differential Diagnosis

- differentiation from
 - other diseases in which hemoglobinuria, myoglobinuria, and hematuria are cardinal signs.
 - In an animal found dead differentiation from other clostridial diseases and anthrax may be required
 - Acute leptospirosis
 - Postparturient hemoglobinuria
 - Hemolytic anemia caused by cruciferous plants
 - Babesiosis and anaplasmosis
 - Enzootic hematuria
 - Chronic copper poisoning (sheep)

Treatment

- Suggested drugs/*Clostridium* species
 - Penicillin G
- Alternative drugs/*Clostridium* species
 - Tetracycline
 - clindamycin
- Antipyretics
- Antiserum
- Supportive treatment
 - blood transfusion
 - parenteral fluid
 - electrolyte solutions
 - Bulls should not be used for service because of the danger of liver rupture.
- protected from nutritional and climatic stress until they are fully recovered.
- Hemopoiesis should be facilitated by the provision of mineral supplements containing iron, copper, and cobalt.

Prevention and Control

- Annual vaccination preceding the period of risk
- The carcasses of animals dying of the disease should be disposed of by burning or deep burial.