

# Course of Abortion

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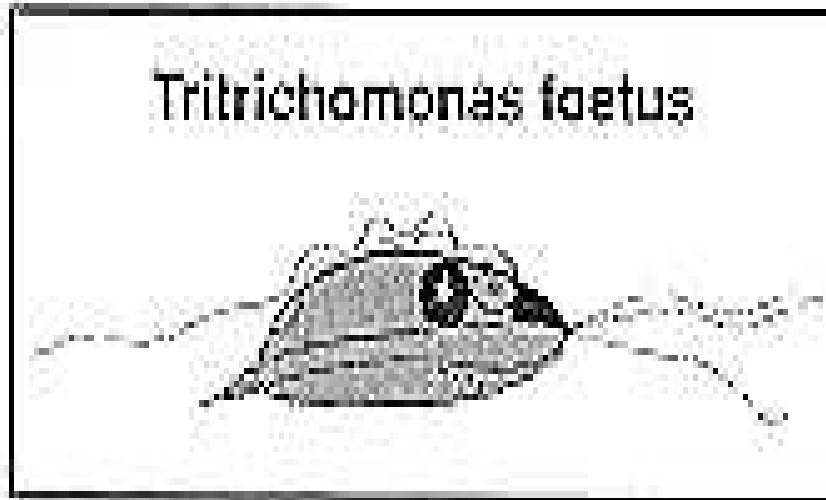
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# Abortion in cattle

By Dr.Hassan AbdEl-Sabour

## Trichomoniasis

- **The cause is Trichomonas fetus**, (flagellated protozoan, very fragile and does not last long outside the reproductive tracts of cattle, killed rapidly by drying, excessive heat and antiseptic.



## Routes of infection:

### A) Venereally:

- \*natural service (infected bull)
- \*A.I. (infected semen)

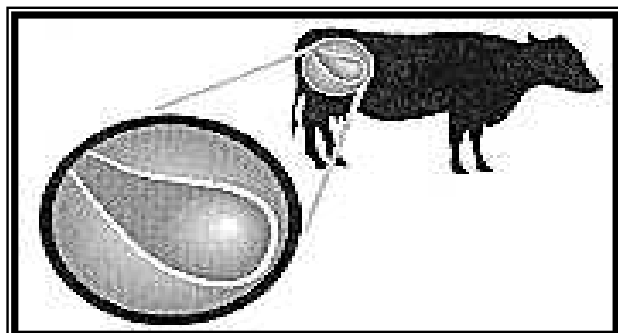
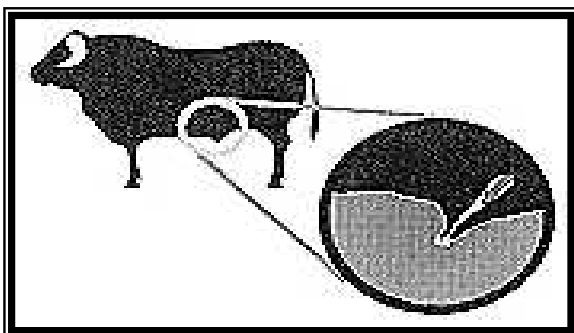
### B) Mechanical transmission:

Unsanitary gynecological equip.Contaminated A.V.

Pathogenesis:

**In Bulls :** in the folds of the penis and sheath. Bulls often show no signs and produce normal sperm. Bulls, approximately four years of age and older, usually become permanent carriers.

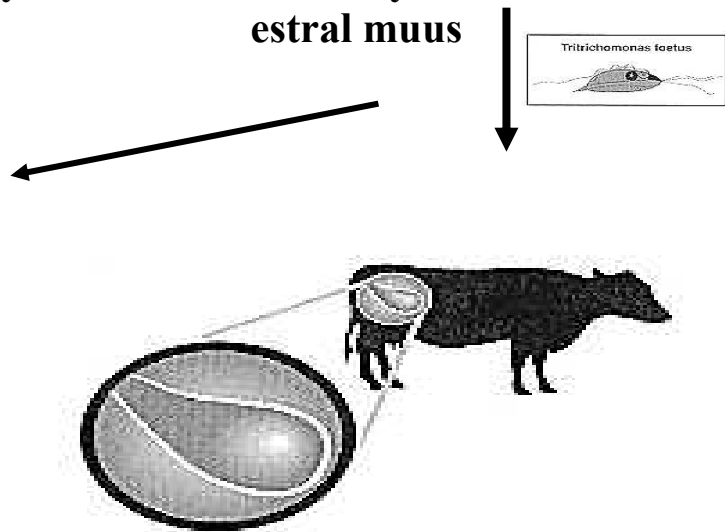
**In Cows :** T. foetus grows in the vagina and uterus.



## Pathogenesis:

\*At Coitus → semen + trichomonads  
↓ ↓  
cervix vagina (Mult.)  
T. foetus → mucinase enzyme → Viscosity of estral mucus

↪ Migration to the uterus  
Edematous metritis  
(hinders implantation)  
Early embryonic deaths  
Placentitis  
Closed Pyometra  
(8 days)



## Symptoms:

### In the female

1. Drop in CR (Irregular repeat breeder)
2. In 5% calf dies before 5<sup>th</sup> pregnancy and pass through the vagina (Abortion). (intact membran and fetus)
3. In another 5% of cows develop pyometra.
4. Some cows shows catarrhal vaginitis.
5. a small number of cows may be able to carry the infection and still deliver a normal live calf (carrier)
6. These symptoms appear in the herd following the introduction of new cows or bulls to the herd.

In the male No any clinical signs  
semen picture is normal.

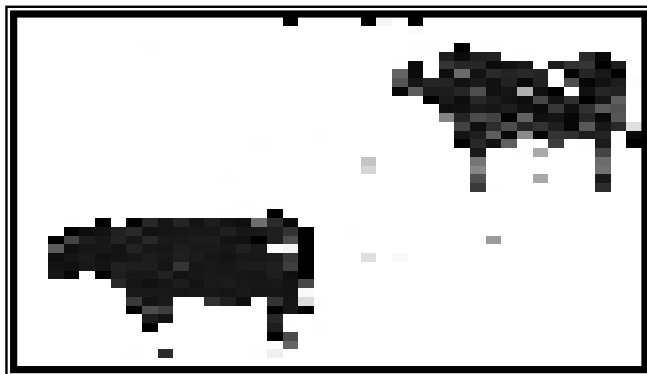
## Diagnosis:

selective media (materials from fetal, stomach, vaginal discharge)..

1. Herd history and symptoms
2. Agglutination test on vaginal mucus (+ve reaction in about 30-80 after infecting service).
3. The material: vaginal mucus, fetal contents from stomach, liver, lungs and placenta. Cultured on selective media and incubate at 37°C in 10% CO<sub>2</sub>

## In the male

### 1. Culture of the material (preputial sheath washing)



### Treatments:

#### The non infected group

Should be bred with clean bull, or semen by AI

#### The infected group

Stop breeding for 3 months

Treat animals with pyometra

Examine the animals regularly by Vaginal mucus Agg. Test.

#### The bulls

Withdrawal of the penis out of the prepuce under

\* Epidural anesthesia or bilateral internal pudendal nerve block of the dorsal nerve of the penis

### Treatments:

#### The bulls

- Trypoflavin solution 1%, ointment 0.5%
- Acriflavine 1%, ointment
- H<sub>2</sub>O<sub>2</sub> 3% (at 8-9 atmospheric pressure)
- Chloramine sol 0.3-0.5% (at 8-9 atmospheric pressure)
- Sodium iodide 10mg/100 kg BW in 500 ml dist water injected IV. (3-4 doses at 48h interval).

## Campylobacteriosis (Vibriosis)

- It is a venereal disease of cattle Characterized by: Infertility\* early embryonic deaths

\* late abortion

## Etiology

- Campylobacter fetus,
- Motile or non motile organism

\*Gram stain (-ve), short comma-shaped rods or double spiral shaped filament

\*Grow slowly and difficulty on most lab. media.

**C. Fetus is pathogenic for human and causes|:**

Undulating fevers, Placental infection, Abortion

\*Ovine, bovine and human Campylobacteriosis are closely related genetically (human get infection from contact)

## Serological types

C. Fetus venerealis

C. Fetus intestinalis      C. bubulus (non pathogenic)

## Pathogenesis:

**C. Fetus intestinalis:** In gut of animals but not in the genital tract of cows (abortion in sheep and cattle).

**C. Fetus venerialis:** only in the female genital tract, fetus and placenta and in the prepuce and semen of the bull.

**C. Fetus venerialis** Service|infected bull (after 7 days)

uterus → local immunity → after about 13 weeks → elimination of the infection or may stay for 8-18 months

**Bulls under 5 years difficult to infect, but that over 5 years may become a chronic infection.**

**Males and females may become carrier.**

## Symptoms:

### In the female

1. The cow may fail to become infection after coitus
2. Endometritis and salpingitis, no vaginitis or cervicitis A slight mucopurulent exudate in the vagina, increase cloudy estral mucus.
3. Failure of conception (E. Emb. D.)
4. Prolonged estrus cycle (27-53 days average 32 days). When the fertilized ovum destroyed after 14 days.
5. Abortion from 4 to 7-8 months of gestation (early abortion without RP, late abortion with RP).

## **Symptoms:**

### **In the female**

1. **Aborted fetus** shows autolytic changes, sc odema, thin bloody fluid in the body cavities. In stomach may present thick yellow turbid material contains many Mos
2. **Lesion in the placenta:** RP resemble those of brucella abortion, intercotyledonary spaces being filled with a thick purulent, viscid material. Cotyledon greyish white in color with chessy exudate between caruncles and fetal cotyledon, thickened and odematus membranes.

**In the male** No any clinical signs in recently infected bull  
Lack of libido (excessive sexual load), lose weight.

## **Treatments:**

### **In the cows**

- The disease is self limiting after the development of immunity
- I.u. infusion with 2 millions IU penicillin and 3-4 gm dihydrostreptomycin.

### **In the bulls**

500 µg terramycin in dist. Water and mixed with polyethyleneglycol, from which 20 ml injected into the urethra and the remainder massaged into the penile and preputial mucosa for 12-15 minutes.  
Trypoflavin, Bovoflavin ointment and washing.

## **Control and eradication**

1. Prevention of the used of communal bull
2. Proper AI service should take over
3. All bulls kept in AI centers should be tested every 3 months using culture fluorescent antibody test technique, positive bulls must be slaughtered.
4. All cows should be examined by both culture and vaginal mucus agglutination test. Infected cows must be isolated and free one should be served by clean bulls.
5. Free cows vaccination with killed adjuvant vaccine.

# Brucellosis

- It is an important cause of abortion and sometimes infertility in domestic animals (cattle, sheep and goats).

## Characterized by:

Late stormy abortion

Placental retention

Calf mortality, loss of milk production

Infertility

Costs of vaccination and eradication programs.

## Etiology

*Brucella abortus*

- non motile, small non sporing organism
- \*Gram stain (-ve), bacilli or coccobacilli
- \*destroyed by disinfectant and exposure to 65oC but can survive for a very long times in water, wet soil, bedding manure.

## Incubation period

50-250 days directly proportional to the stage of fetal development at the time of exposure.

## Routes of infection

Oral ingestion

Skin (intact, lacerated)

Inhalation (air-born inf.)

AI (infected semen)

Mucus membrane (conjunctiva)

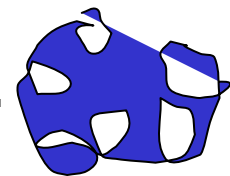
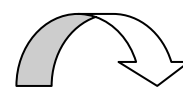
## Pathogenesis:

### After infection

**Brucella** →

penetrates m.m. of (upper digestive tract eye or skin)

Lymph nodes  
(acute lymphadinitis)



Macrophages  
(multiply and survive)

**Bacteraemia** →

spleen, mammary gland, super mamm. lymph nodes and pregnant uterus

## Pathogenesis:

### After infection

In pregnant uterus (proliferate) → penetrates epith. Of the chorion  
→ Placentitis  
← Endometritis

Ulceration of the ut. epith lining

↓  
Invasion of the allantochorion

↓  
Infection of the fetal Bl. Vessels

↓  
**Death of the fetus** due to endotoxins of brucella  
Loss of placental function

### After Abortion

M.os. Leave the uterus → invading Bl. Vessels  
reestablishment in the lymph nodes

## Symptoms:

**Abortion in pregnant cows (6th to 8th month)**

**The aborted fetus is:**

- Hairless to fully developed.
- Stained with meconium
- Subcutaneous oedema
- Body cavities are filled with reddish serous fluid

**The Placenta is:**

- **Retained**
- Necrotic changes in cotyledon
- Thickening of the intercotyledonary area (**leathery**)

## Diagnosis:

selective media (materials from fetal, stomach, liver, lung, spleen, vaginal discharge).

1. Herd history and symptoms (**Stromy abortion**)
2. Demonstration of the organism in direct smears from: Fetal stomach content, Vaginal discharge, placenta **Staining modified Ziehl-Neelsen stain.**
3. Isolation and identification on selective media (**Furrell' medium**)



4. Serological detection of specific antibodies in serum of the aborted cow
  - a) Rose bengal plate test
  - b) Agglutination test (Titer 1|40 in non vaccinated and 1|80 in vaccinated)
  - c) Compliment fixation test (CFT)
5. Hitopathology
6. Milk ring test

### Treatments:

**In recently infected non pregnant:**

single dose of 10 mg oxytetracycline

**In infected pregnant cows: less than 5 months**

Two doses of 10 mg Oxytetracycline with 12 days interval

**In infected pregnant cows after 5 months USELESS**

**Control and eradication**

Milk samples (cows and buffaloes) → Milk ring test  
(+ve must be cultured on selective media)

Blood samples (male and females) → Serological T.

+ve

-ve

Removed and slougher

retested after 3 months

until 3 successive clear test obtained

# Abortion in sheep and goat

- Abortion in sheep and goats due to:

\*Infectious

\*non-infectious agents

Some agents act directly on the fetus, placenta → (Primary abortion )

Others, because of systemic disturbance → (Secondary abortion )

## Campylobacteriosis

**It cause epizootic ovine abortion**

**Characterized by:**

- **not** a venereal disease
- late abortion (after 3 Months)
- stillbirth, birth of weak lamb

## **Etiology**

- **Campylobacter fetus,**
- **The same serotype affects cattle and man.**

## **Pathogenesis**

**The ram is not a factor in the transmission of the disease (may be an intestinal carrier)**

**Ingestion of the Mos. during the last two months of pregnancy**

**Incubation period (7-25 days) from the infection to the abortion.**

**Some birds act as reservoirs of the infection.**

## **Symptoms**

**Late abortion.**

**Stillbirth, birth of weak lambs.**

**following abortion, metritis may occur.**

**placenta** shows placentitis with edema and necrosis of the cotyledons.

**Aborted fetus:** s.c. blood-stained edema  
excessive fluid in the body cavities

**fetal liver contains necrotic foci 10-20mm  $\phi$**

## **Diagnosis:**

**Clinical symptoms**

**Culture of the Mos**

**Direct microscopical examination**

**Immunofluorescent techniques**

**PCR**

## **Control and prevention:**

**Isolation of the affected ewes and surviving lambs.**

**Dead fetuses, placenta should be burned.**

**Disinfection of the lambing area.**

**Penicillin and streptomycin (300,000 i.u. and 1 gm respectively).**

**Killed bacterin (vaccine) before breeding (yearly)**

## **Brucellosis**

**It causes enzootic ovine abortion**

### **Characterized by:**

- a venereal disease (rare)
- late abortion
- stillbirth, birth of weak lamb

## Etiology

- *Brucella melitensis* (common cause of abortion especially in goat).
- *Brucella abortus* (rare in sheep).
- *Brucella ovis* with lower pathogenicity (ram epididymitis org.).

## Methods of transmission

Ingestion of the Mos. During lambing

Droplet inhalation

Conjunctival membrane

Through lacerated skin

Venereal after mating (rare)

## Symptoms

Late abortion.

fever and lameness

outbreaks of abortion is rare.

*B. ovis* causes ram wastage

**placenta** shows placentitis with odema and necrosis of the cotyledons, thickened intercotyl. area (leathary)

**Aborted fetus:** s.c. blood-steined edema  
excessive fluid in the body cavities

## Diagnosis:

Clinical symptoms

Culture of the Mos

Direct microscopical examination (modified ziehl-Neelsen stain)

CFT

## Control and prevention:

General hygiene at lambing.

Vaccination (alum-precipitated *B. ovis* bactrin s.c. in 2 doses 30-60 days apart then single injection each year.

## Toxoplasmosis

It a serious cause of abortion in sheep.

May infect all domestic animals.

## Characterized by:

- early fetal resorbtion.
- Abortion at last trimester.
- Mummification

## Etiology

- *Toxoplasma gondii*
- Protozoa infect all domestic animals, but only serious in sheep.
- It is found as an oocyst in cat feces.
- Intrauterine infection of the newborn.
- If the dam has antibodies (no intrauterine infection).

## Methods of transmission

Ingestion of the Mos.

## Symptoms

Early fetal resorbption.

Mummification.

Abortion at last trimester (2-3 weeks before term).

**placenta** gross lesions of the cotyledons (**numerous grey-white foci**).

histologically : focal area of necrosis and organisms.

**Aborted fetus: Leukoencephalomalacia** in the CNS of stillborn lambs (fetal brain).  
excessive fluid in the body cavities

## Diagnosis:

Clinical symptoms

Culture of the Mos

Histology of cotyledons, fetal brain

CFT


## Control and prevention:

General hygiene and eradication of .

Vaccination (alum-precipitated *B. ovis* bacterin s.c. in 2 doses 30-60 days apart then single injection each year.

# Abortion in Mare

| Cause of Abortion/<br>Time of Gestation                                 | Gross Findings and<br>Clinical Signs   | Diagnosis: Samples<br>to Submit and Lab<br>Procedure   |
|---|--|--|
| <b>Early Embryonic<br/>Death (EED)<br/>0-40 d Early Fetal<br/>Death</b> | Maternal malnutrition,<br>twin pregnancy, history of<br>maternal stress, uterine<br>disease, poor<br>conformation of vulva,<br>vagina, cervix<br><br>Early (EED) signs: often<br>none<br>Later (EFD) signs:<br>aborted fetus | Repeated gynecologic<br>exams, fetal and maternal<br>serum samples, antigen/<br>antibody compatibility |


| Cause of Abortion/<br>Time of Gestation         | Gross Findings and<br>Clinical Signs  | Diagnosis: Samples<br>to Submit and Lab<br>Procedure  |
|---|---|---|
| <b>Equine Viral Arteritis<br/>(EVA) 5-10 mo</b> | <b>Mare:</b> depression, fever,<br><b>anorexia, leukopenia, keratitis,<br/>diarrhea, colic,<br/>edema of limbs and<br/>ventral abdomen,<br/>generalized vascular<br/>necrosis</b> <b>Fetus:</b> aborted<br><b>7-10 d after first signs of<br/>illness in mare, usually<br/>autolyzed because death<br/>2-4 d prior to abortion, ±<br/>pleural effusion, petechial<br/>hemorrhage, if non-<br/>autolyzed- usually no<br/>gross lesions</b> | Histopath<br>-Serology<br>-Virus isolation<br>-Check stallion since virus<br>can be transmitted via<br>semen<br><br> |

| <b>Cause of Abortion/<br/>Time of Gestation</b>               | <b>Gross Findings<br/>and Clinical Signs</b>   | <b>Diagnosis:<br/>Samples to Submit<br/>and Lab Procedure</b> |
|---|--|---|
| <b>Twinning</b> 6-9 mo<br>(=most common non-infectious cause) | <b>Twinning</b> 6-9 mo<br>(=most common non-infectious cause)  | <b>Twinning</b> 6-9 mo<br>(=most common non-infectious cause) |
| <b>Pathologic<br/>Twisting of the<br/>Cord</b><br>6-9 mo      | Fetal anoxia due to pathologic twisting of the cord diagnosed by twisting of the cord <b>and</b> localized swelling and discoloration of the cord, causing vascular obstruction. Cord is usually abnormally long (>90 cm). | <b>Histopathology</b><br>Optional                             |

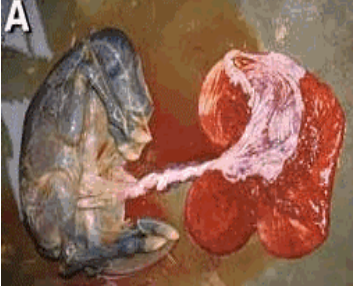
| <b>Cause of Abortion/ Time of Gestation</b>                   | <b>Gross Findings and Clinical Signs</b>  | <b>Diagnosis: Samples to Submit and Lab Procedure</b>      |
|---|---|--|
| <b>Twinning</b><br>6-9 mo (=most common non-infectious cause) | <b>Twinning</b> 6-9 mo (=most common non-infectious cause)  | <b>Twinning</b> 6-9 mo (=most common non-infectious cause) |
| <b>Pathologic Twisting of the Cord</b><br>6-9 mo              | <b>Fetal anoxia</b> due to pathologic twisting of the cord diagnosed by twisting of the cord <b>and</b> localized swelling and discoloration of the cord, causing vascular obstruction. Cord is usually abnormally long (>90 cm). | <b>Histopathology</b><br>Optional                          |

| <b>Cause of Abortion/ Time of Gestation</b> | <b>Gross Findings and Clinical Signs</b>   | <b>Diagnosis: Samples to Submit and Lab Procedure</b>   |
|---|--|---|
| <b>Leptospirosis</b> 6-11 mo                | <b>Fetus:</b> icterus, enlarged/yellow liver<br><b>Placenta:</b> thickened allantochorion or exudate | <b>Histopath</b><br>Immunofluorescence for spirochetes in aborted tissues (kidney, liver, placenta) |

| <b>Cause of Abortion/<br/>Time of Gestation</b>  | <b>Gross Findings and<br/>Clinical Signs</b>   | <b>Diagnosis: Samples<br/>to Submit and Lab<br/>Procedure</b>  |
|--|--|--|
| <p><b>Bacterial:</b><br/><i>Strep.zooepidemicus</i><br/>others: <i>E.coli</i>,<br/><i>Pseudomonas</i>, <i>Staph.</i>,<br/><i>Klebsiella</i>, <i>Enterobacte</i><br/><i>r</i>, <i>Taylorella</i><br/><i>equigenitalis</i><br/>(CEM)</p> | <p>Usually ascending infection<br/><b>Fetus:</b> gross lesions are non-specific, ± enlarged liver, ± increased fluid in body cavities; organisms most consistently isolated from fetal stomach contents<br/><b>Placenta:</b> area of the chorioallantois around the cervical star is edematous and thickened, ± chorion covered in brown</p> | <p>Fetal stomach contents, placenta, liver, kidney, and lung for culture<br/><br/><b>-Histopathology:</b><br/>Exudate, cloudy fluid in the amniotic cavity. The time from infection to the abortion depends on the presences of septicemia</p> |

| <b>Cause of Abortion/<br/>Time of Gestation</b>                           | <b>Gross Findings and<br/>Clinical Signs</b>   | <b>Diagnosis: Samples<br/>to Submit and Lab<br/>Procedure</b>  |
|---|--|--|
| <p><b>EHV-1</b><br/><b>(Rhinopneumonitis9-11 mo. can be 5-11 mo.)</b></p> | <p><b>Fetus:</b> Aborted 3 wks - 4 mo post mare exposure<br/>-Liver: enlarged with subcapsular pinpoint to 5mm grey/ white foci of necrosis<br/>Lungs: severe edema, esp.interlobular septa, ± white foci of necrosis (like liver)<br/>-Pleural/Abdominal cavities: excessive yellow fluid<br/>± Pericardial effusion and epicardialpetchiae<br/>± jaundice of mucous membrane</p> | <p>Tissues in formalin for histopath-intra-nuclear inclusion bodies<br/>-Virus isolation (fetal lung, liver, adrenal, lymph nodes)<br/>-FA<br/>-Fetal serology</p>  |



| Cause of Abortion/<br>Time of Gestation                                   | Gross Findings<br>and Clinical Signs   | Diagnosis: Samples<br>to Submit and Lab<br>Procedure   |
|---|--|--|
| <p><b>EHV-1</b><br/>(Rhinopneumonitis<br/>9-11 mo can be 5-11<br/>mo)</p> | <p>If born alive - dies<br/>within hours to days</p> <p><b>Placenta:</b> ± edematous,<br/>± no rupture of<br/>cervical star, fetus<br/>usually still attached to<br/>fetal membranes,</p> <p>± premature placental<br/>separation</p> <p><b>Mares/Farm;</b><br/>asymptomatic/abortion<br/>storms</p> | <p>Repeated gynecologic<br/>exams, fetal and<br/>maternal serum<br/>samples, antigen/<br/>antibody compatibility</p>  |

### Other Causes of Equine Abortion:

- **Hormones:** Progesterone deficiency, prostaglandin F<sub>2</sub>α, oxytocin, glucocorticoids
- **Poisonous Plants, Drugs:** Fescue, locoweed, sudan grass, sorghum, phenothiazine, organophosphates, thiabendazole.



## **Guide to Management of EHV-1 Abortion**

- EHV-1 causes abortion, respiratory disease and CNS disease.
- It is closely related to EHV-4 which mostly causes respiratory disease, but has caused abortion.
- EHV-1 spreads via the respiratory tract, but aborted foetuses, foetal membranes and fluids are a particularly dangerous source of infection.

### **Prevention of abortions**

1. Segregate pregnant mares from all other horses.
2. Maintain in small groups based on foaling date.
3. Avoid stress in pregnant mare groups.
  
4. Do not introduce mares into established foaling groups.
5. Do not transport mares late in gestation (within two months of foaling).
6. Pregnant mares from broodmare sales are common sources of EHV-1.
  
7. Vaccination is available as an aid in the control of EHV-1 abortion when used in conjunction with appropriate management practices.
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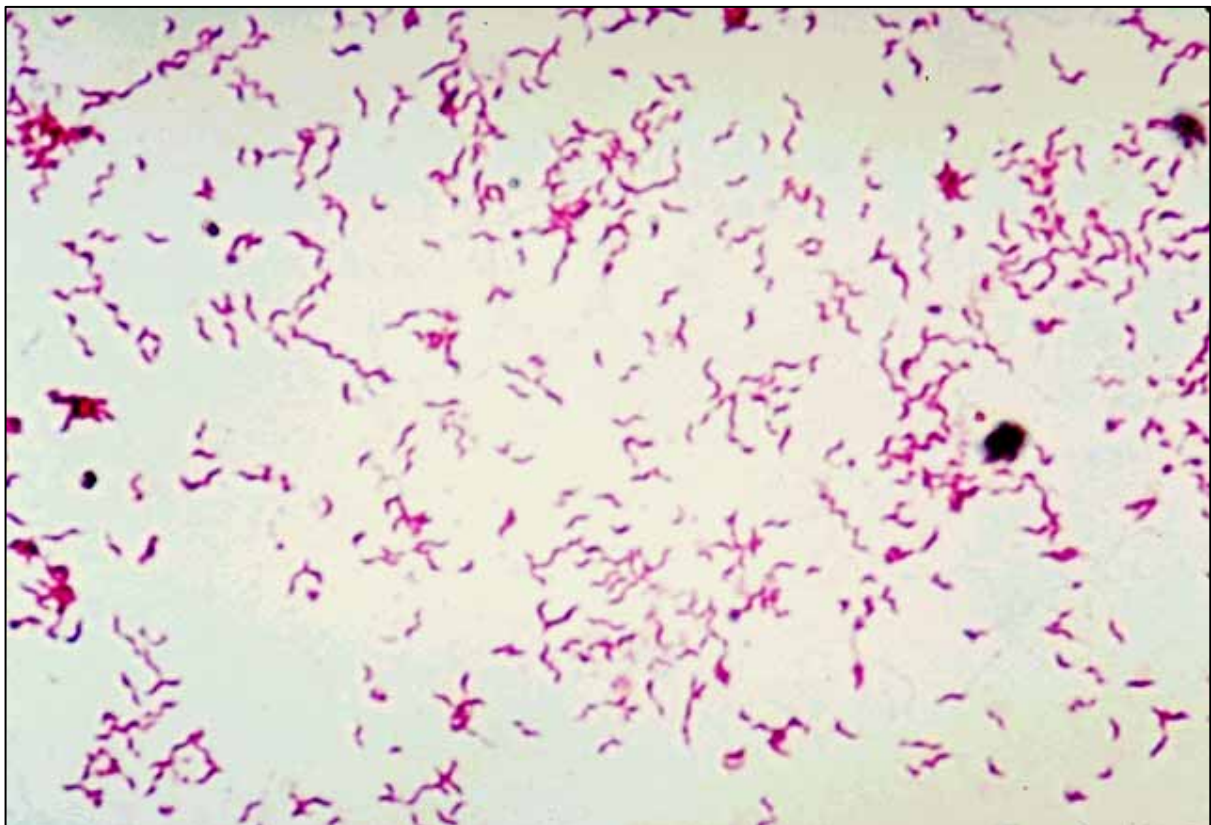
# Abortion in cattle

By Dr. Abdel-Rahman Abdel-Magied

## Specific or coital diseases

### Campylobacteriosis Vibriosis

- It is an enzootic infectious diseases caused by the organism campylobacter fetus previously known as Vibrio fetus.
- It Gram-ve, motile with a single polar flagellum, curved to spiral rods. It is appear as an "S" shaped with one or two or three spirals from direct smears of stomch contents of aborted foetus and vaginal discharges .
- The organism is killed by disinfected and dryness, but can resist deep freezing of semen.
- \*Incidence: In infected cattle, abortion rate 5-20%



### Campylobacter Fetus.

## **Rout of infection: -**

- 1- Venerally at natural service from infected bull or A.I. (infected semen).
- 2- Infection can spread from cow to cow by improperly cleaned instruments
- 3- In the male infection occurs on serving an infected cow or at semen collection with contamination of A.V.

**\*Incubation period** : from 7-9 days

## **Symptoms in the female:**

- 1- Drop of conception rate and infertility
- 2- Mucopurnlant vaginal discharge in newly served cow
- 3- Anoestrus is due to embryonic death and persistence of C.L
- 4- Abortion in 5-20% or more of infected cow
- 5- Retention of the placenta may follow abortion

## **Diagnosis**

The breeding history is important, since *Trichomonas fetus* cause early abortion and reabsorption of foetus.

### **A- Direct methods**

- 1- Isolation of the C.fetus from the aborted foetus (foetal stomach contents, liver, lung) and placenta or vaginal mucus of genital tract.

### **a- The organism can be demonstrated in direct smears**

With dilute carbol fuchsine and Gram's stain for detection of morphology and staining affinity of the isolated organisms

### **b- Vaginal mucous samples**

may be collected from infected cow by sterile glass pipette or by mean of a sterile aluminium tampon (composed of an aluminium tube, 25cm in length and 1.5 cm in diameter and aluminium wire provided with a well-fixed piece of cotton at

one end) and sterilized in hot air oven at 160°C for 2 hours. Mucous for culture should be collected at time of estrous where the mucous flow is at maximum and antibodies at the minimum and the organism is multiplying. The collected mucous was transferred from collected pipette into sterile bottles Culture of suspected materials on Campylobacter selective medium and blood agar medium containing 1/50000 brilliant green . All the cultured plates were incubated at 37°C in an CO<sub>2</sub> incubator which provides an atmosphere of about 10% CO<sub>2</sub>. The incubated plates were checked for growth after 48 and 72 hours, but they not discarded as negative before the end of the 5<sup>th</sup> day.

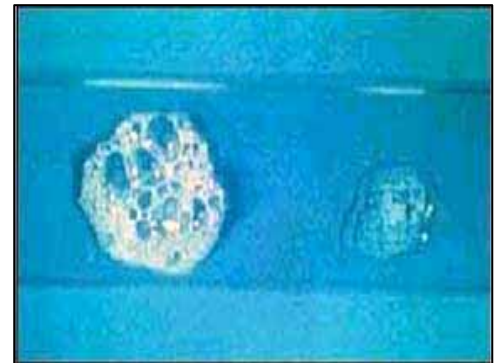
### **1- Motility test:**

by hanging-drop method:-

### **2- Catalase activity:-**

by placing a drop of H<sub>2</sub>O<sub>2</sub> on a slide

And a loopful of the isolate. The presence of gas bubbles within 10 seconds was considered as catalase –positive.



### **3- Growth temperature:**

by incubation of one plate of Campylobacter selective medium and blood agar medium containing 1/50000 brilliant green at 25°C and 42°C for 3 days (Campylobacter fetus does not grow at 42°C)

### **5- In the bull:**

The collected semen samples were transferred to sterile bottles and diluted with sterile phosphate buffered saline. Few drops of the diluted semen were spread onto 2 plates of Campylobacter selective medium and blood agar medium containing 1/50000 brilliant green. All the cultured plates were incubated at 37°C in an CO<sub>2</sub> incubator which provides an atmosphere of about 10% CO<sub>2</sub>

## **B- Indirect methods:**

### **1- Vaginal mucus agglutination test (V.M.A.T.)**

to detect the locally produced antibodies in the vagina and cervix (which appear in the vaginal mucus between 4 to 10 weeks after infection and remain for a period of 2.5-16 months)

### **2- Direct fluorescent Antibody Test (FAT):-**

From suspected materials

## **Treatment and Control**

- 1- Intrauterine therapy e.g. Penicillin (2 million I.U.) and 3-4 gram dihydrostreptomycin.
- 2- Prevention of the use communal bulls and a proper of I.A.
- 3- All bulls should be tested every 3 month's
- 4- Vaccination of free cows, by using killed adjuvant vaccine

## II- TRICHOMONOSIS

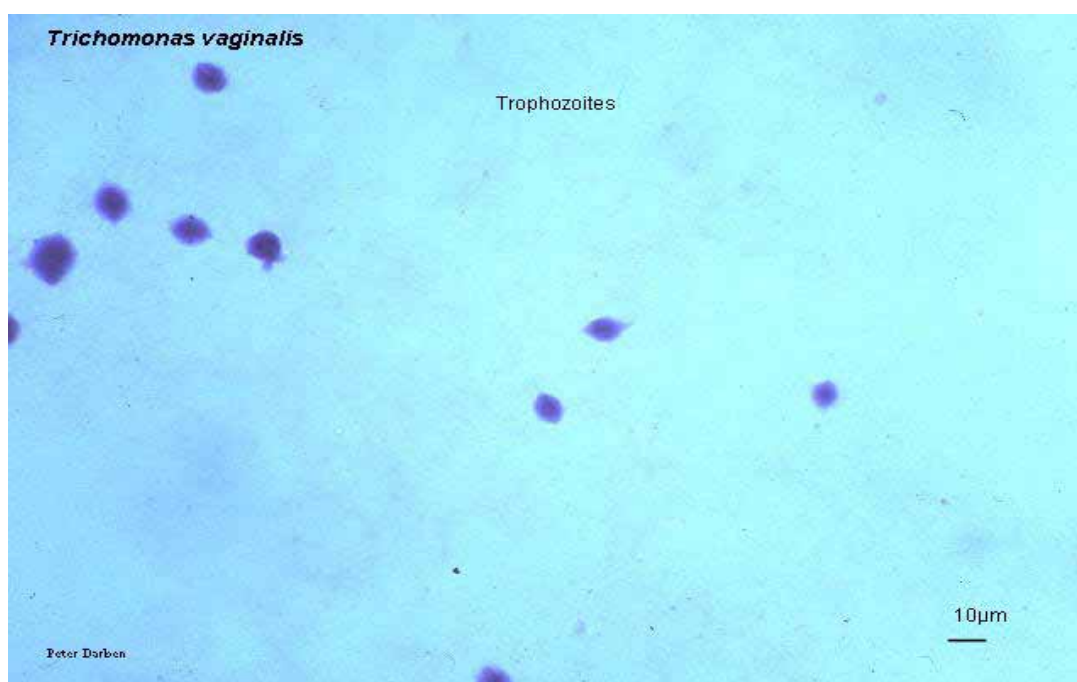
### **Definition:**

Bovine venereal trichomonosis is caused by *Tritrichomonas foetus*, a flagellate protozoan. It is world-wide in distribution and at one time was of major economic importance as a cause of abortion and infertility, especially in dairy cattle

Transmission of the disease is primarily by coitus, but mechanical transmission by insemination instruments or by gynaecological examination can occur. The organism can survive in whole or diluted semen at 5°C. Bulls are the main reservoir of the disease as they tend to be long-term carriers, whereas most cows clear the infection spontaneously. For these reasons samples from bulls are usually preferred for diagnosing and controlling the disease

### **Identification of the agent:**

*Tritrichomonas foetus* is a flagellate, pyriform eukaryotic protozoan, approximately 8–18 µm long and 4–9 µm wide, with three anterior and one posterior flagellae and an undulating membrane. Organisms move with a jerky, rolling motion



### **Tritrichomonas foetus**

## DIAGNOSTIC TECHNIQUES:

Diagnosis of trichomonosis is based on the clinical history, signs of early abortion, repeated returns to service, or irregular oestrous cycles. Confirmation depends on the demonstration of organisms in placental fluid, stomach contents of the aborted fetus, uterine washings, pyometra discharge, or vaginal mucus. In infected herds, the most reliable material for diagnosis is either preputial or vaginal washings or scrapings

The number of organisms varies according to the phase of the oestrous cycle, being highest 3–7 days after ovulation. In the infected bull *T. foetus* organisms are present in highest numbers on the mucosa of the prepuce and penis.

### 1- Sample collection: -

A number of techniques for collecting preputial samples from bulls or vaginal samples. Samples can be collected from bulls by scraping the preputial and penile mucosa with an artificial insemination pipette or metal brush, by preputial lavage.

The samples must be submitted to a laboratory and cannot be delivered within 24 hours, a transport medium should be used (e.g. Winters' medium, buffered saline solution with 5% fetal bovine serum, or skim milk, with or without antibiotics

For samples collected by preputial wash it is necessary to process the sample by centrifuging. The sediment is then examined and inoculated into culture media. The organisms may be seen under a standard light microscope using a magnification of 100 or more. Culture media should be examined microscopically at intervals from day 1 to day 7 after inoculation. The organisms may be identified on the basis of characteristic morphological features. The pear-shaped organisms have three anterior and one posterior flagellae.

### 2- Culture: -

Several media can be used. The CPLM (cysteine/peptone/liver-infusion maltose) medium, BGPS (beef-extract/glucose/peptone serum) medium, Clausen's medium (Neopeptone-Lemco-liver extract glucose), Diamond's trichomonad medium, Oxoid's Trichomonas medium. Culture media should be examined



microscopically at intervals from day 1 to day 7 after inoculation. The organisms may be identified on the basis of characteristic morphological features. The pear-shaped organisms have three anterior and one posterior flagellae.

### 3- Alternative tests:-

#### 1- Mucus agglutination test:-

A mucus agglutination test was detects about 60% of naturally infected cows, antibody levels varying according to stage of oestrus. Mucus samples are collected from the cervical region of the vagina, preferably a few days after oestrus. Antibodies appear in cervical mucus about 6 weeks after infection, and persist for several months. Antibodies may also be found in preputial secretions . The mucus agglutination test is most useful as a herd test, being capable of detecting latent or recently cleared infections. It is specific and does not cross-react with *Campylobacter foetus* or *Brucella abortus*, but lacks sensitivity

#### 2- Intradermal test Tricin

An intradermal test for diagnosis of bovine trichomonosis has been reported The injection site is in the skin of the neck, similar to the site used for the tuberculin test. A dose of 0.1 ml of the 'Tricin' antigen is injected intradermally and the reaction is measured 30–60 minutes later. The reaction consists of a shallow plaque observed visually and showing an increase of >2 mm in skin thickness.

### 3- Immunohistochemistry on tissues:-

### 4-PCR

### VACCINATION: -

Whole cell vaccines for cows have been shown to offer protection and are available commercially as either a monovalent 'bacterin' or part of a polyvalent vaccine also containing *Campylobacter* and *Leptospira* spp. (CL-vaccine). These products show efficacy in the female but not in the bull.

## **11-Non -specific diseases:-**

### **A- Contagious diseases**

#### **Bovine brucellosis**

Is usually caused by *Brucella abortus*, less frequently by *B. melitensis*, and rarely by *B. suis*. Infection is widespread in several countries.

#### **Clinically**

The disease is characterised by one or more of the following signs: abortion, retained placenta, orchitis, epididymitis and, rarely, arthritis, with excretion of the organisms in uterine discharges and in milk. Diagnosis depends on the isolation of *Brucella* from abortion material, udder secretions or from tissues removed at post-mortem. Presumptive diagnosis can be made by assessing specific cell-mediated or serological responses to *Brucella* antigens

*Brucella abortus*, *B. melitensis* and *B. suis* are highly pathogenic for humans, and all infected tissues, cultures and potentially contaminated materials must be handled under appropriate containment conditions.

#### **Identification of the agent:**

In cattle, the disease is mainly produced by the *Brucella abortus* and occasionally by *Brucella melitensis*. The organism is small, non-motile, non-sporing, Gram -ve bacilli or coccobacilli. Demonstrated with Modified Ziel-Neelsen stain. The organism can be destroyed by disinfectants and by 10 min. exposure to tem. of 65°C, but can survive for long time (months or years) in water, manure, bedding

### **DIAGNOSTIC TECHNIQUES**

There is no single test by which a bacterium can be identified as *Brucella*. A combination of growth characteristics, serological and bacteriological methods is usually needed.

### **Collection and culture of samples:-**

For the diagnosis of animal brucellosis by cultural examination, the choice of samples usually depends on the clinical signs observed. The most valuable samples include aborted fetuses (stomach contents, spleen and lung), fetal membranes, vaginal secretions (swabs), milk, semen and arthritis or hygroma fluids. From animal carcasses, the preferred tissues for culture are those of the reticulo-endothelial system (i.e. head, mammary and genital lymph nodes and spleen), the late pregnant or early post-parturient uterus, and the udder

#### **1- Tissues:**

Samples are removed aseptically with sterile instruments and macerated using a 'Stomacher' or tissue grinder with a small amount of sterile phosphate buffered saline (PBS), before being inoculated on to solid media

#### **2-Vaginal discharge**

A vaginal swab taken after abortion or parturition is an excellent source for the recovery of *Brucella* and far less risky for the personnel than abortion material. The swab is then streaked on to solid media.

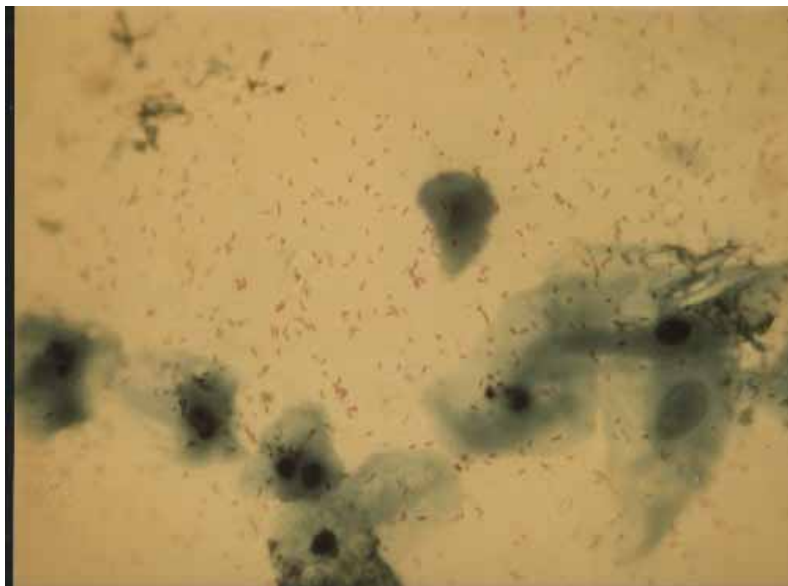
#### **3- Milk:**

Samples of milk must be collected cleanly after washing and drying the whole udder and disinfecting the teats. It is essential that samples should contain milk from all quarters, and 10–20 ml of milk should be taken from each teat. The first streams are discarded and the sample is milked directly into a sterile vessel. The milk is centrifuged at  $2000g$  for 15 minutes in sealed tubes (to avoid the risk of aerosol contamination of personnel), and the cream and deposit are spread on solid selective medium, either separately or mixed. If brucellae are present in bulk milk samples, their numbers are usually low, and isolation from such samples is very unlikely

## 2- Staining methods:-

*Brucella* is coccobacilli or short rods measuring from 0.6 to 1.5  $\mu\text{m}$  long and from 0.5 to 0.7  $\mu\text{m}$  wide. They are usually arranged singly, and less frequently in pairs or small groups. *Brucella* is Gram negative. Stamp's modification of the Ziehl–Neelsen method.

*Brucella* organisms stain red against a blue background. DNA probes or polymerase chain reaction (PCR) methods currently under development can be used to demonstrate the agent in various biological samples



*Brucella abortus* organism isolated from stomach contents stains by Modified Ziel-Neelsen

## 2-Culture

### A-media:-Basal

Direct isolation and culture of *Brucella* are usually performed on solid media. A wide range of commercial dehydrated basal media is available, e.g. *Brucella* medium base, trypticase (or tryptone)–soy agar (TSA). The addition of 2–5% bovine or equine serum is necessary for the growth of strains such as *B. abortus* biovar and many laboratories systematically add serum to basal media, such as blood agar base (Oxoid) or Columbia agar (BioMérieux), with excellent results. Other satisfactory media, such as serum–dextrose agar (SDA) or glycerol dextrose agar, can be used.

**B- Selective media:-**All the basal media mentioned above can be used for the preparation of selective media. Appropriate antibiotics are added to suppress the growth of organisms other than Brucella. The most widely used selective medium is the Farrell's medium, which is prepared by the addition of six antibiotics to a basal medium.

#### **4- Serological and allergic skin tests:**

The buffered Brucella antigen tests, i.e. rose bengal test and buffered plate agglutination test, the complement fixation test, the enzyme-linked immunosorbent assay (ELISA) or the fluorescence polarisation assay, are suitable tests for screening herds and individual animals.

#### **5- Buffered Brucella antigen tests (prescribed tests for international trade): -**

**a- Rose Bengal Test: -**This test is a simple spot agglutination test using antigen stained with rose bengal and buffered to a low pH, usually  $3.65 \pm 0.05$ . The RBT is very sensitive. However, like all other serological tests, it could sometimes give a positive result due to S19 vaccination or due to false-positive serological reactions (FPSR).

#### **b- Buffered plate agglutination test: -**

#### **6- Complement fixation test:-**

CFT is a widely used and accepted confirmatory test although it is complex to perform, requiring good laboratory facilities and adequately trained staff to accurately titrate and maintain the reagents.

#### **7- Enzyme-linked immunosorbent assays (prescribed tests for international trade:-**

##### **Indirect ELISA:**

The I-ELISA is a highly sensitive test but it is sometimes not capable of differentiating between antibody resulting from S19 vaccination or other FPSR

## 8-Brucellin skin test

The brucellin intradermal test is one of the most specific tests in brucellosis (in unvaccinated animals)

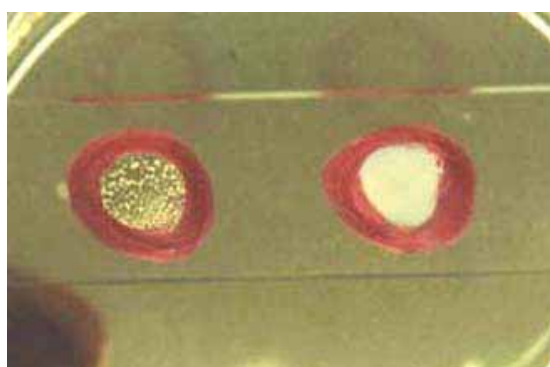
An alternative immunological test is the brucellin skin test, which can be used for screening unvaccinated herds, provided that a purified (free of sLPS) and standardised antigen preparation (e.g. brucellin INRA) is used.

## 9- Serum agglutination test:-

SAT has been used with success for many years in surveillance and control programmes for bovine brucellosis. Its specificity is significantly improved with the addition of EDTA to the antigen.



**TUBE AGGLUTINATION TEST**



**SLIDE AGGLUTINATION TEST**

## 10-ring test Milk-

An efficient means of screening dairy herds is by testing milk from the bulk tank. Milk from these sources can be obtained cheaply and more frequently than blood samples .

When a positive test result is obtained, all cows contributing milk should be blood tested. The milk I-ELISA is a sensitive and specific test, and is particularly valuable for testing large herds. The milk ring test (MRT) is a suitable alternative if the ELISA is not available.

In lactating animals, the MRT can be used for screening herds for brucellosis. In large herds (>100 lactating cows), the sensitivity of the test becomes less reliable. False-positive reactions may occur in cattle vaccinated less than 4 months prior

to testing, in samples containing abnormal milk (such as colostrum) or in cases of mastitis. Therefore, it is not recommended to use this test in very small farms where these problems have a greater impact on the test results.

Vaccination of calves with *B abortus* Strain 19 or RB51 increases resistance to infection. Resistance may not be complete, and some vaccinated calves may become infected, depending on severity of exposure. A small percentage of vaccinated calves develop antibodies that may persist for years, which may confuse diagnostic test results.

**a- *Brucella abortus* strain 19 vaccine** The most widely used vaccine for the prevention of brucellosis in cattle is the *Brucella abortus* S19 vaccine, which remains the reference vaccine to which any other vaccines are compared. It is used as a live vaccine and is normally given to female calves aged between 3 and 6 months as a single subcutaneous dose of  $5-8 \times 10^{10}$  viable organisms.

**b- *Brucella abortus* strain RB51 vaccine:-** Strain RB51 has largely replaced Strain 19. It is a rough attenuated strain and does not cause production of antibodies, which are detected by most serologic tests.

**c- *Brucella melitensis* strain Rev.1 vaccine**

## **2-LEPTOSPIROSIS**

### **Definition :**

Leptospirosis is a contagious disease of animals and humans caused by infection with any of the pathogenic members of the *genus* Leptospira.

### **Identification of the agent:**

The internal organs (such as liver, lung, brain, and kidney) and body fluids (blood, milk, cerebrospinal, thoracic and peritoneal fluids) of clinically infected animals gives a definitive diagnosis of acute clinical disease or, in the case of a fetus, chronic infection of its mother. The kidney, urine, or genital tract of animals without clinical signs is diagnostic only of a chronic carrier state.

The demonstration of leptospire in blood and milk of animals showing clinical signs suggestive of acute leptospirosis is considered to be diagnostic. However, isolation from blood is not often successful because bacteraemia is transient and not always accompanied by clinical signs.

The demonstration of leptospire in body fluids or internal organs (usually kidney, liver, lung, brain, or adrenal gland) of aborted or stillborn fetuses is considered to be diagnostic of chronic leptospirosis of the mother, and is evidence of active infection of the fetus



## **Diagnosis:**

### **1- Culture:**

**Culture** should be carried out in a semisolid (0.1–0.2% agar) medium containing 1% bovine serum albumin (BSA) and either Tween 80 (e.g. Tween 80/BSA medium).

Addition of 0.4–1% rabbit serum to semisolid culture medium enhances the chances of isolating some fastidious leptospiral serovars. Cultures should be incubated at 29 +/- 1°C for at least 16 weeks, and preferably for 26 weeks.

Leptospire may also be demonstrated by a variety of immunochemical staining techniques, e.g. immunofluorescence.

Polymerase chain reaction (PCR)-

### **Serological tests:**

:Two tests have a role in veterinary diagnosis:

**1-1- Microscopic agglutination test (MAT)**

**2-Enzyme-Linked Immunosorbent Assay (ELISA)**



**1- VACCINES:-**Leptospiral vaccines for veterinary use are suspensions of one or more strains of pathogenic *Leptospira*

### **3-Listeriosis**

**Definition:** Listeriosis is primarily a disease of the central nervous system, but in herd infections, a small proportion of animals abort between the fourth and seventh month of gestation

**Listeria monocytogenes:** It is Gram-positive coccoid to short rods shaped are seen single or in pairs or in short chains, motile, non-sporulated, aerobic or micro-aerobic, Grows well at room temperature and at 37<sup>0</sup>C on all media, produce Beta-haemolysis on blood agar

**Causes:** *Listeria monocytogenes*

**\*Symptoms:**

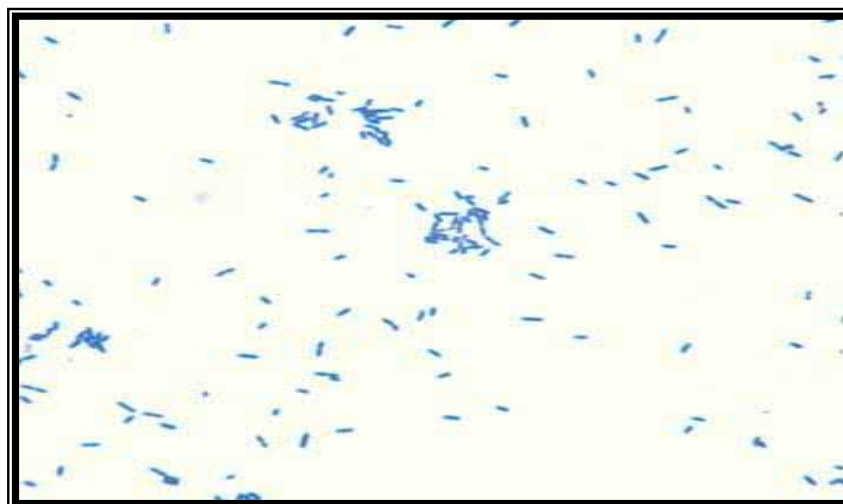
**A- Nervous manifestations**

**B- Abortion of pregnant animals at about 4-7 month of gestation**

**\*Diagnosis:**

1- Symptoms and clinical finding

2- Demonstration of the causative organism from direct smears (placenta and foetal liver) and stained with Gram's stain



***Listeria monocytogenes***

**3-Culture swabs on blood agar medium at 37<sup>0</sup>C produced Beta-haemolysis**

## **4-Detection of antibodies in the serum of infected animals using SAT and CFT test**

### **Non –Contagious diseases**

**A-Tuberculosis**

**B-Corynebacterium**

**C-Staphylococcus**

**D-Streptococcus**

**E- Other microorganisms**

### **BOVINE TUBERCULOSIS**

Bovine tuberculosis is a chronic bacterial disease of animals and humans caused by *Mycobacterium bovis*. In a large number of countries bovine tub Bovine tuberculosis is an infectious disease caused by *M. bovis*, and is usually characterised by formation of nodular granulomas known as tubercleserculosis is a major infectious disease among cattle, other domesticated animals

#### **Definition**

It is acid- fast bacilli ,rods shaped arranged in pairs or small clumps, non-motile, non-sporulated

**Cause:** Bovine type

The infection of the uterus, vagina and vulva is mostly occurs secondary infection from primary focus in the body of cattle and buffaloes in Egypt %\ , -^ Incidence

#### **Symptoms:**

- 1-Reduced fertility with anoestrus or irregular estrus
- 2-Genital discharges with pus
- 3-Abortion of pregnant animals in late gestation (8-9th month). It may occasionally occur during 4-5th month
- 4-General condition is bad and the animal is emaciated

## Diagnosis

**1- Rectal examination** may reveal lesion in the ovary, F.T. and uterus

**2-Symptoms and clinical finding**

**3-Isolation of the causative** organism from uterine discharges (the organism is most frequency after calving and abortion

a- **Direct smear** from affected parts by used of a

**Peteroff,s method** (The sample is mixed thoroughly with an equal volume of 4% caustic soda, placed in the incubator at 370C for 2o minutes, centrifuged at 3000 r.p.m. for 30 minutes, the supernatant is poured off. The deposit is neutralized with HCL and smear stained with Zihel-Neelsen show the acid-fast bacilli).

b- **Cultivation** on a suitable medium (Lowenstein-Jensen medium) of the sample directly or better still after treating with caustic soda at 370C for at least week to 2weeks

## 2-Guinea pig inoculation

The material is injected subcutaneously in 2 guinea-pigs, one is to be killed after 3-4 weeks, if it does not show lesions of tuberculosis, the other should be killed 4-6 weeks later

**a- Haemoagglutinstion test .**

**b- Allergic test orTuberculin test**

**1-Subcutenous one:** It is depend on recording the temperature after injection of the tuberculin, a rise temperature was considered positive

**2-Double interadermal:** It is depend on a rather local reaction

**3-Ophthalmic test:** It is depends on instillation of tuberculin in the eyes and oberservation of inflammation of the conjunctiva in positive cases

**Control:** Positive diagnosed animals should be condemned\*



## 2- Culture of *Mycobacterium bovis*:

In order to process specimens for culture, the tissue is first homogenised using a pestle and mortar, stomacher or blender a blender followed by decontamination with either an acid or an alkali, such as 5% oxalic acid or 2–4% sodium hydroxide. The mixture is shaken for 10 minutes at room temperature and then neutralised. The suspension is centrifuged, the supernatant is discarded, and the sediment is used for culture and microscopic examination. For primary isolation, the sediment is usually inoculated on to a set of solid egg-based media such as Lowenstein–Jensen. Cultures are incubated for 8 weeks at 37°C with or without CO<sub>2</sub>. The media should be in tightly closed tubes to avoid desiccation.. When growth is visible, smears are prepared and stained by the Ziehl–Neelsen technique. Growth of *M. bovis* generally occurs after 3–6 weeks' incubation

## 3- The PCR

## 5- Enzyme-linked immunosorbent assay

## Corynebacterium

**Definition:** It is Gram-positive, but non-acid-fast rode, arranged in pairs or Chinese letters, non-motile, non-capsulated, non-sporulated, grow aerobically and anaerobic.

**Cause:** Corynobacterium pyogenes:

**Resistance:** It is rapidly killed at 57°C and very sensitive to disinfectants

**Symptoms:**

Metritis occurs after parturition or retained placenta, large amounts of pus come out from vagina

**Diagnosis:**

1- Direct smear from pus vaginal discharge and stained by Gram stain would show the diptheroid in masses and intracellular.

2- Vaginal swabs culture on blood agar at 37°C for 24 hours producing Beta-haemolysis while it produced clear zone around the growth on milk agar and produced turbidity with granular deposit on serum broth

3- Biochemical reactions;

It is strongly proteolytic and it liquefies gelatin, egg or solid serum media, ferments a number of carbohydrates

**Other organisms**

Streptococcus, Staphylococcus, E.coli, Pseudomonas aeruginosa, Corynebacterium pyogenes Pasteurella haemolytica, Pasteurella multocida, and Salmonella, these are the most predominant bacteria isolated from cow suffering from retention of the placenta, endometritis, and pyometre.

**Diagnosis:**

Isolation and identification of the isolates:

**a-Isolation methods:**

**Culture media:**

MacConkey's agar, Blood agar, Nutrient agar, Violet Red Glucose Agar, Baried-parker medium.

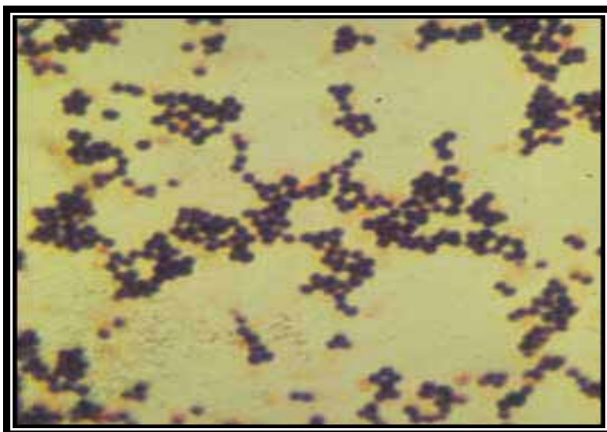
The screw capped bottles containing the samples were incubated at 37°C for 24 hours to enhance growth and multiplication of microorganisms. By a platinum loop, a loopful was streaked onto different media and incubated at 37°C for 24 hours, after which they examined for bacteria growth. Different colonies were picked up and purified, then kept on nutrient agar slopes

## b- Identification of isolates

Smears were prepared from the sloop agar tube and stained by Gram,s stain. The isolates were classified according to the staining affinity into Gram negative rods, Gram,s positive rods and Gram positivity cocci



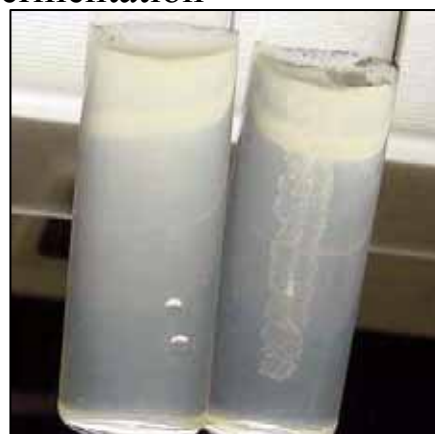
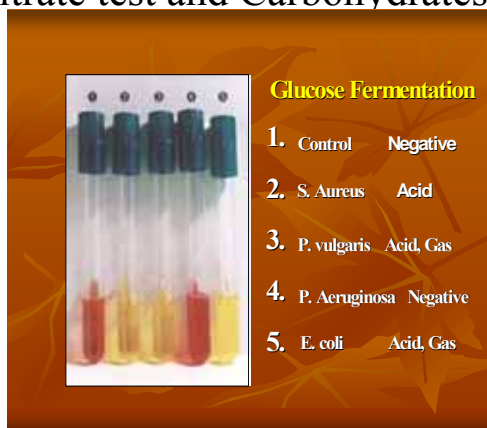
**Staphylococcus organism**



**Streptococcus organism**

## Biochemical rea

‘Voges proskauer test, Indol test, Methylene test, Urease test  
Citrate test and Carbohydrates fermentation



#### d- Sensitivity test

The isolates were tested for sensitivity to different chemotherapeutic agents. One ml of 24hr. broth cultures was spread on the surface of blood agar. Antibiotic sensitivity discs were placed on the surface seeded agar. Plates were incubated aerobically or anaerobically at 37°C for 24hr. The sensitivity was judged according to the diameter of clearance zone around the discs



# ***Pregnancy diseases abortion***

By  
Prof. Dr. M. I. El Sherry

## **Definition :**

- \*Abortion is the expulsion of a fetus before the time of normal parturition .
- \*Stillborn is a dead fetus delivered within the period of parturition.

## **Etiology**

### **1-Viral:**

- \*Equine rhinopneumonitis (ERP).
- \*Equine viral arteritis (EVA)
- \*Infectious bovine rhinotracheitis.
- \*Bovine virus diarrhea.
- \*Rift valley fever.
- \*Canine herpes virus.

### **2-Rickettsial:**

- \* Coxiella burnetii.

### **3-Bacterial :**

- \* Brucellosis.
- \* Campylobacteriosis.
- \* Listeriosis.
- \* Chlamydia.
- \* Leptospirosis.

### **4-Mycotic :**

- \* Aspergillus, Absida , Mucor , Rhizopus and Mortierella wolfii.

### **5-Protozoal :**

- \* Toxoplasmosis.
- Trichomoniasis.**
- \* Neospora.



# ***Viral abortion***

## **Equine rhinopneumonitis (ERP)**

### **Etiology:**

- \*Equine herpes virus 1.

### **Susceptibility:**

- \*Horse , Donkey , Mule.

### **Transmission:**

- \*Respiratory.
- \* Ingestion.

### **Clinical signs:**

- \* Incubation period from 10 days to 4 month.
- \* Spontaneous late abortion 8-11 months, but it can be early as 4 months.
- \* Infected mares show no signs of respiratory illness.
- \* Placenta passes intact covering the foal.
- \* Foals aborted before 6 months are autolyzed.
- \* In late gestation, infected foals are either stillborn or they show weakness, jaundice and difficult in breathing and die within few days of birth.

### **Lesions:**

#### **Grossly:**

##### **Fetuses aborted before 6 months:**

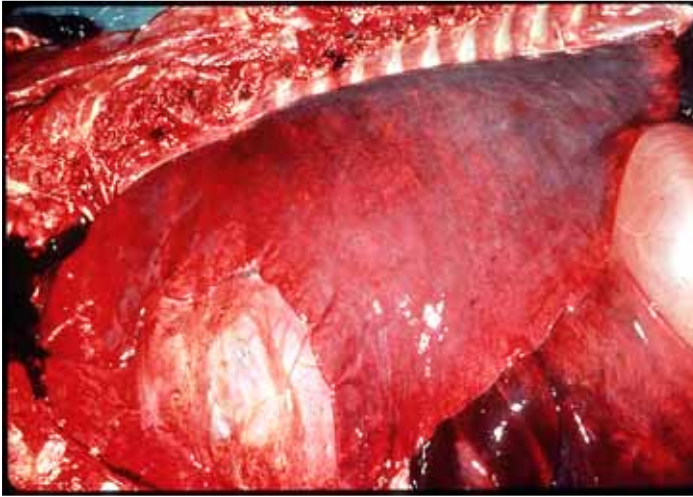
- \* Severe autolysis.

##### **Fetuses aborted after 6 months:**

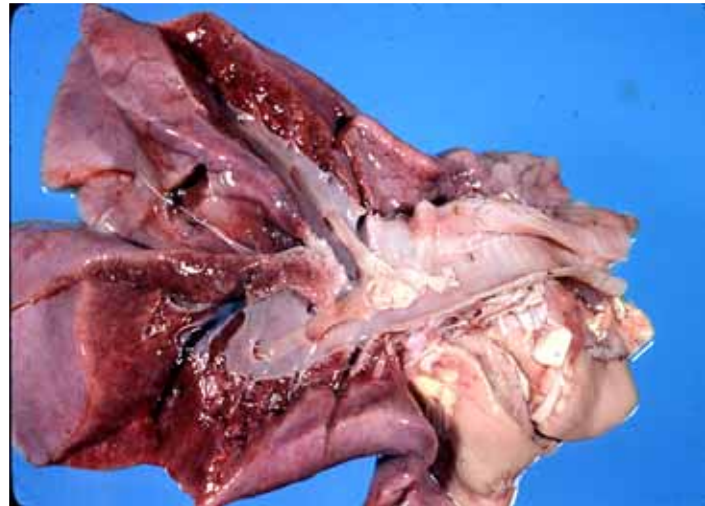
- \* Jaundice.
- \*Petechiation of mucous membranes.
- \* White to cream colored necrotic foci in liver.
- \* Accumulation of fluid in the pleural cavity.

#### **Equine rhinopneumonitis fetal lung**

**Rhinopneumonitis fetal lung and Equine trachea**

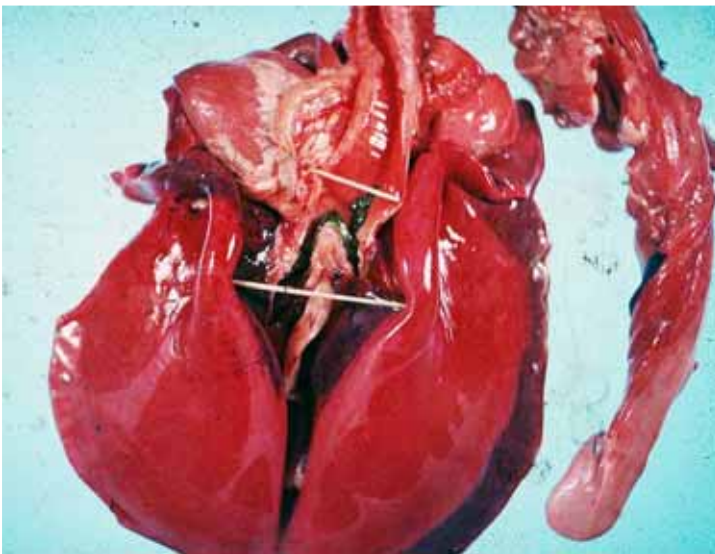


Many pale white 2–3 mm foci diffusely scattered in meaty firm lungs

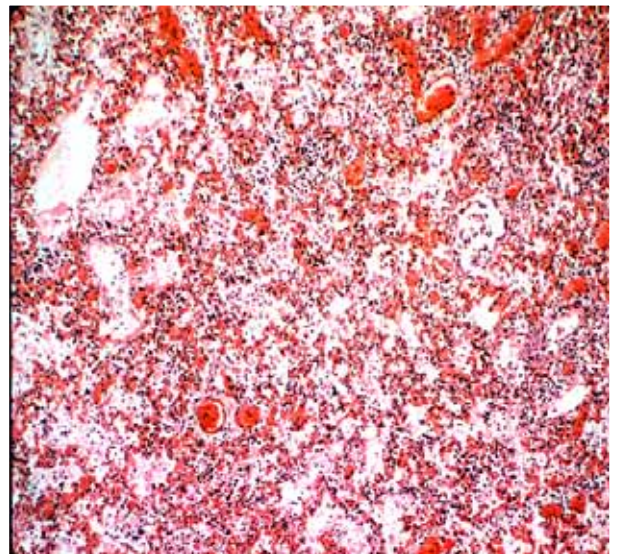


The lung is firm diffusely and pale fibrin clot is lumen present in the tracheal

Equine rhinopneumonitis fetal lung

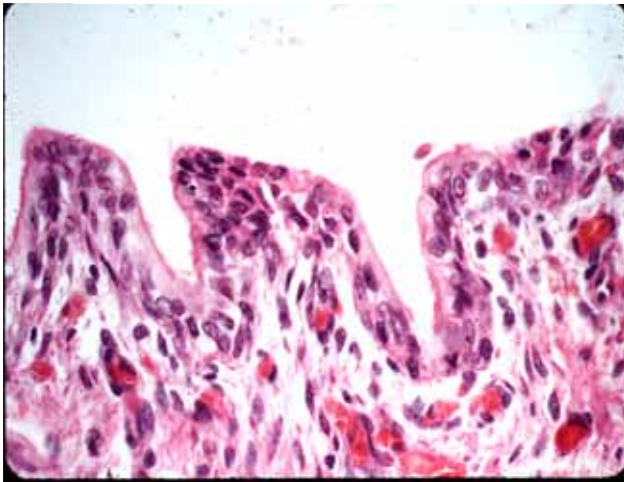


A meconium plug at the tracheal bifurcation



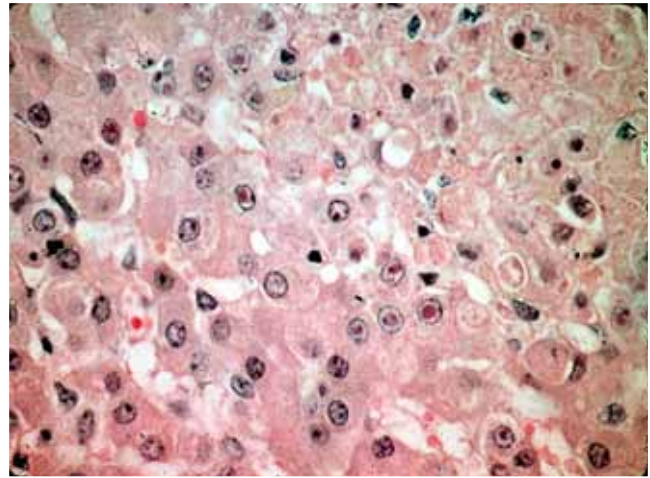
Diffuse pneumonia

**Equine rhinopneumonitis bronchial epithelium**



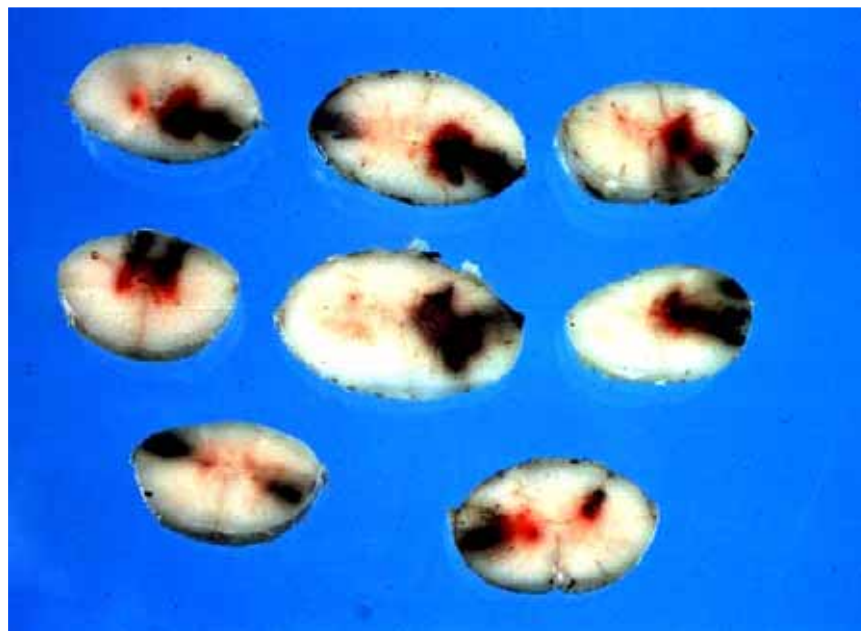
**Scattered intranuclear inclusions in epithelium cells**

**Equine rhinopneumonitis fetal liver**



**Focal necrosis with intranuclear inclusions in hepatocytes**

**Equine rhinopneumonitis fetal spinal cord**



**Multiple , hemorrhagic , irregular soft areas**

## **Placenta :**

- \* Edematous.
- \* No rupture of cervical star.
- \* Fetus usually still attached to fetal membranes.
- \* Premature placental separation.

## **Microscopically:**

- \*Pulmonary intralobular septa are edematous and infiltrated by mononuclear cells.
- \*Fibrinous alveolar exudation.
- \*Liver necrotic foci and acidophilic intranuclear inclusion bodies.
- \*Serofibrinous placentitis with vasculitis.
- \*Necrosis of the germinal centers of all lymphatic tissues with herpes inclusions in reticular cells.

## **Equine viral arteritis (EVA)**

### **Etiology:**

- \*Arteriviridae.

### **Susceptibility:**

- \*Equines.

### **Transmission:**

- \*Respiratory.
- \*Venereal.

### **Clinical signs: :**

- \* Mares abort during or shortly after febrile period.

### **Lesions:**

#### **Fetus:**

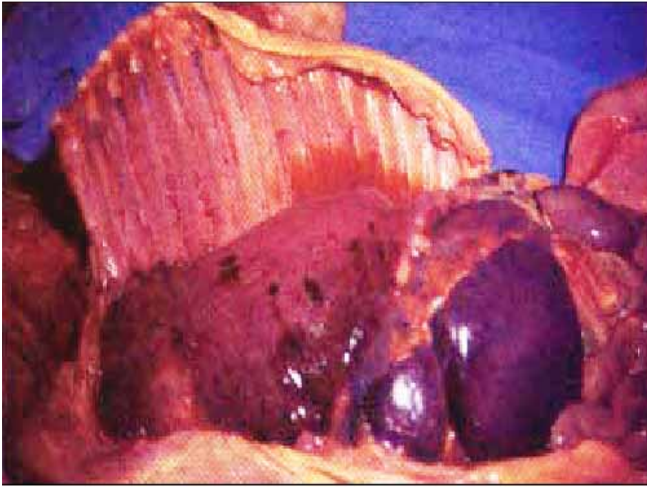
#### **Grossly:**

- \*Serosanguinous fluid in body cavities.
- \*Vasculitis in fetal organs i.e. liver, kidney ect.

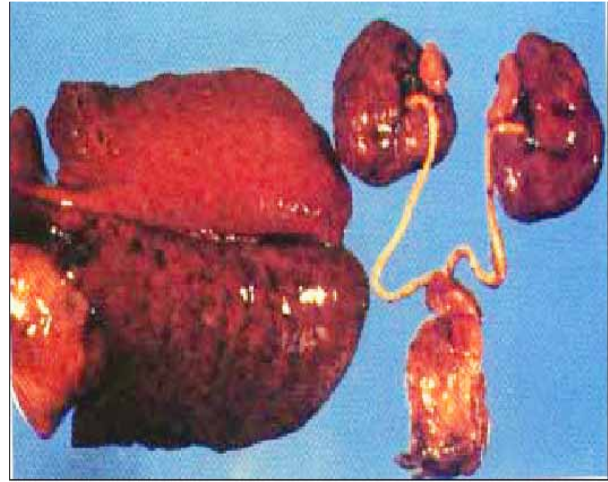
#### **Placenta :**

- \*Vasculitis .

## Equine viral arteritis



Plural and pulmonary hemorrhages



Pulmonary edema and hemorrhages

## Infectious bovine rhinotracheitis

### Etiology:

- \*Herpes virus type 1.

### Susceptibility:

- \*Bovine.

### Transmission:

- \*Respiratory.
- \*Venereal.

### Clinical signs:

- \*Abortion in the second half of pregnancy.
- \*Fetus autolyzed before delivery.

### Lesions:

#### Fetus:

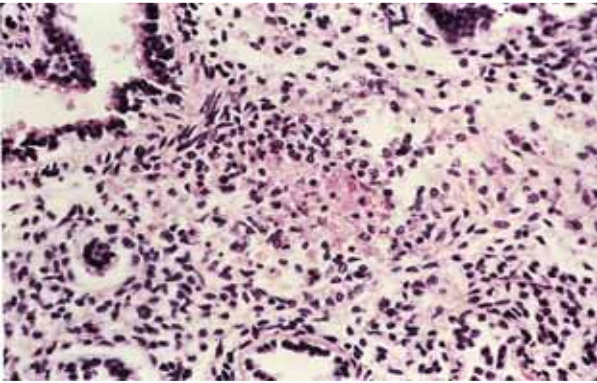
#### Grossly:

- \*Autolyzed.

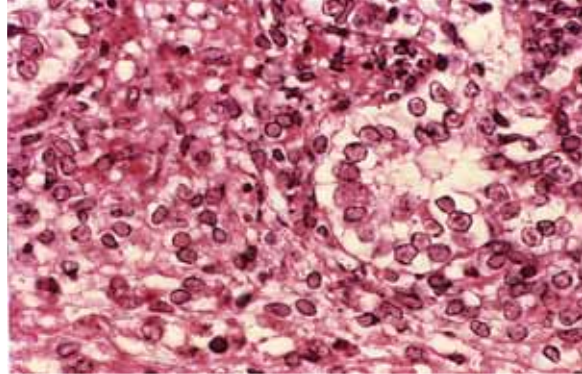
#### Microscopically:

- \*Liver and lung show focal necrosis with acidophilic intranuclear inclusion bodies.

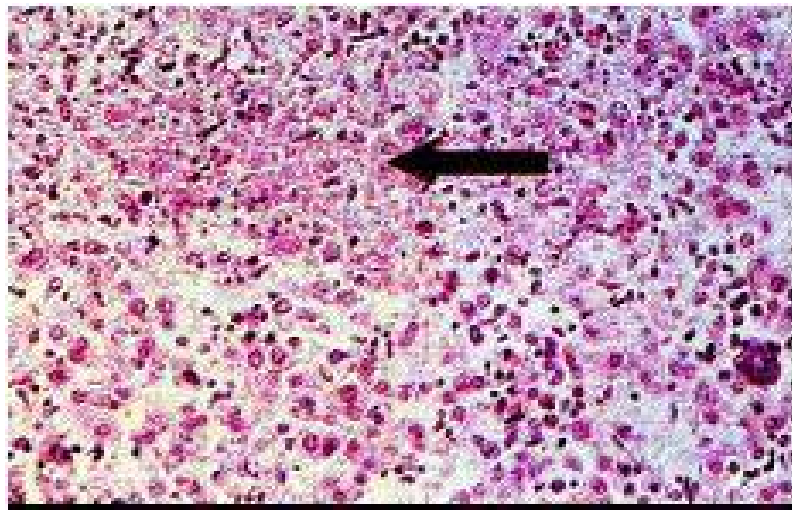
## Infectious bovine rhinotracheitis



Pulmonary foci of necrosis

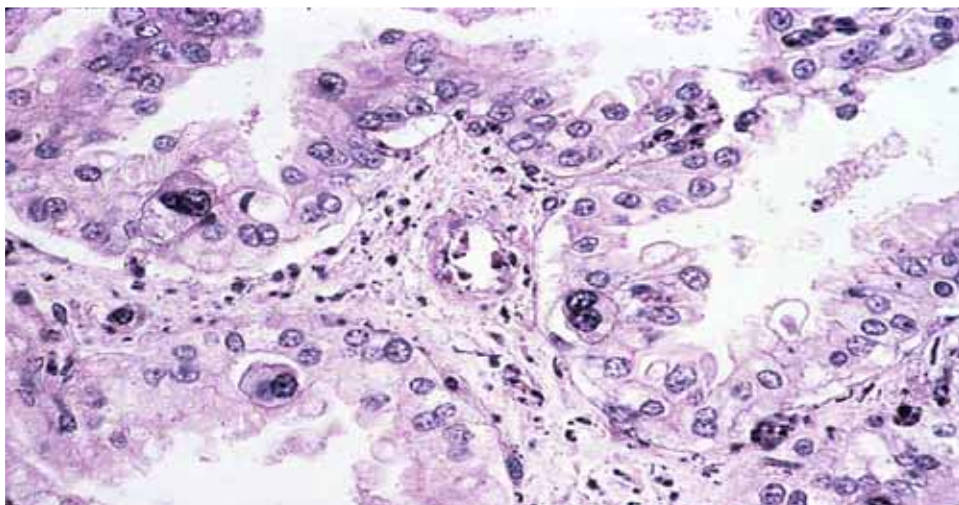


Inclusion bodies in bronchial epithelium

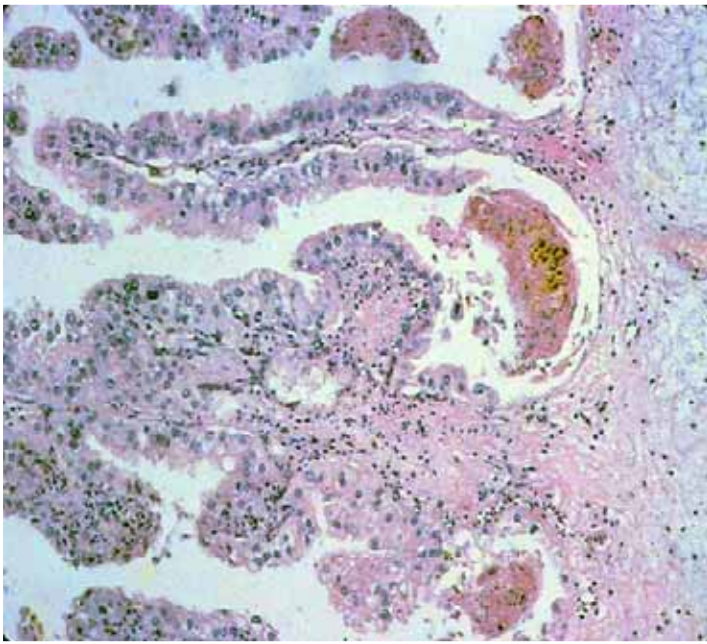


necrosis and inclusion bodies

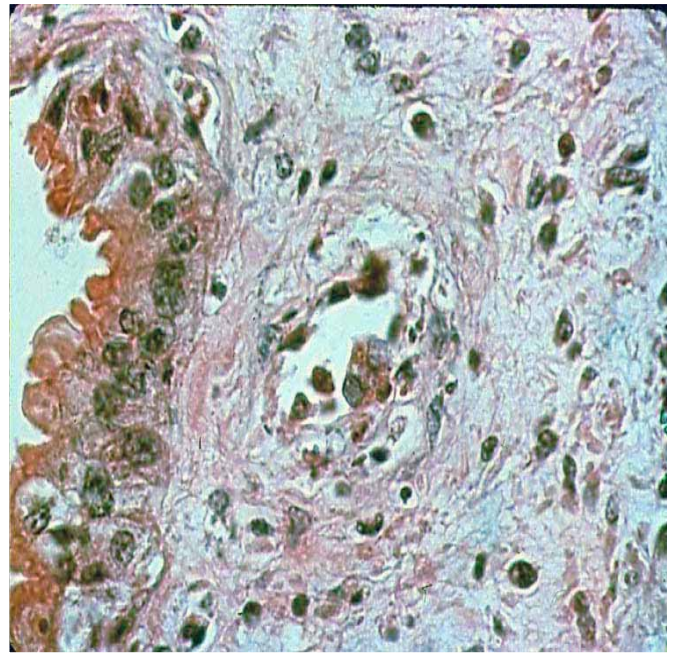
## Cow placenta



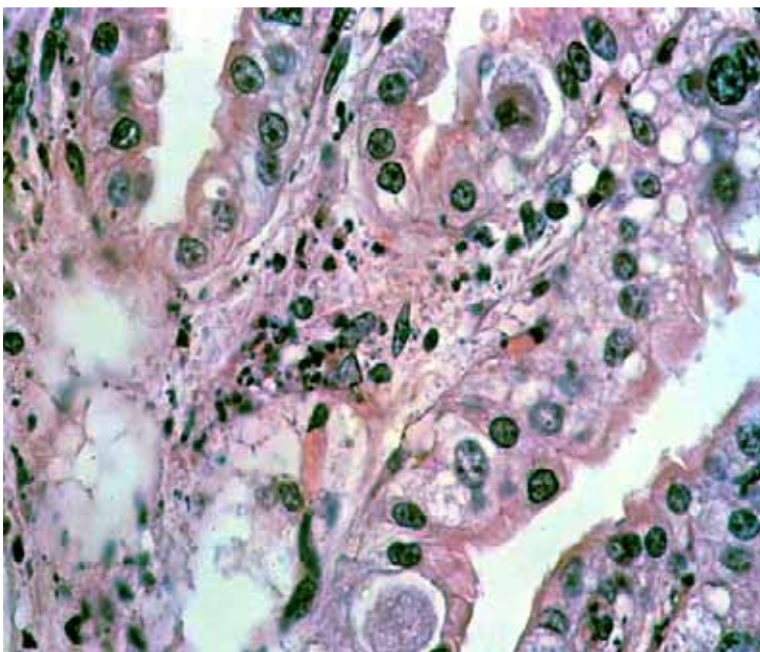
Necrosis of the endothelium of the vessels in the connective tissue of the chorionic villi .The necrosis causes karyorrhexis and pycnosis of the connective tissue cells .The trophoblastic cells are normal



**The pycnotic cells in the connective tissue of the chorionic villi is characteristic for IBR infection**



**IBR placenta with necrosis of endothelial cells .Intranuclear inclusion in endothelial cell at top of vessel**



**IBR placenta with intranuclear inclusions in two fibroblasts. Basophilic material filling nucleus with very little shrinkage. Pycnotic cells in surrounding tissue. Normal trophoblastic cells.**



**Chorioallantois from IBR abortion, massive edema**

## **Bovine virus diarrhea**

### **Etiology:**

- \* Pestivirus.

### **Susceptibility:**

- \* Bovine.

### **Transmission:**

- \* Ingestion.

### **Clinical signs:**

- \* Late abortion.
- \* Newborn with cerebellar hypoplasia.

### **Lesions :**

#### **Fetus :**

#### **Grossly :**

- \* Aborted fetuses may be fresh , autolyzed or mummified.
- \* Calves may be born alive with uncoordinated movements due to cerebellar hypoplasia .

### **Bovine virus diarrhea aborted calf**



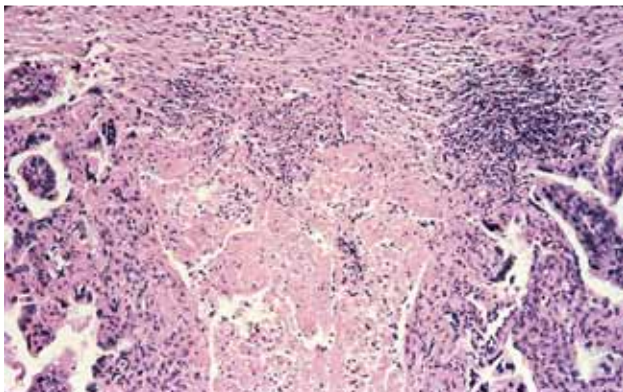
**cerebellar hypoplasia**

### **Bovine virus diarrhea**

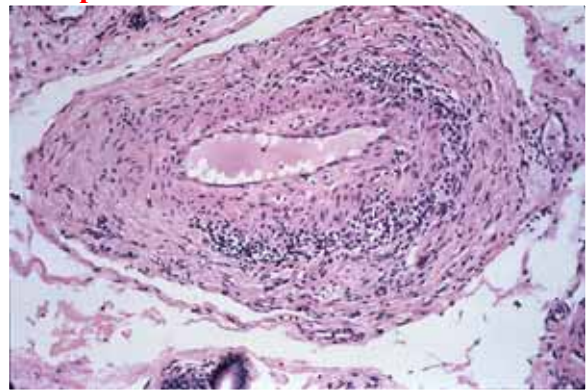


**Uncoordinated movements**

### **Bovine virus diarrhea ewe placenta**



**Focal areas of necrosis of chorioallantois .  
Lymphocytic infiltration adjacent to area  
of necrosis.**



**Necrotic arteritis**



## **Rift valley fever**

### **Etiology:**

**\*Bunya virus.**

### **Susceptibility:**

**\*Ruminants and human.**

### **Transmissions:**

**\*Mosquitoes.**

### **Clinical signs:**

**\*Explosive rate of abortion in sheep.**

### **Lesions:**

#### **Fetus:**

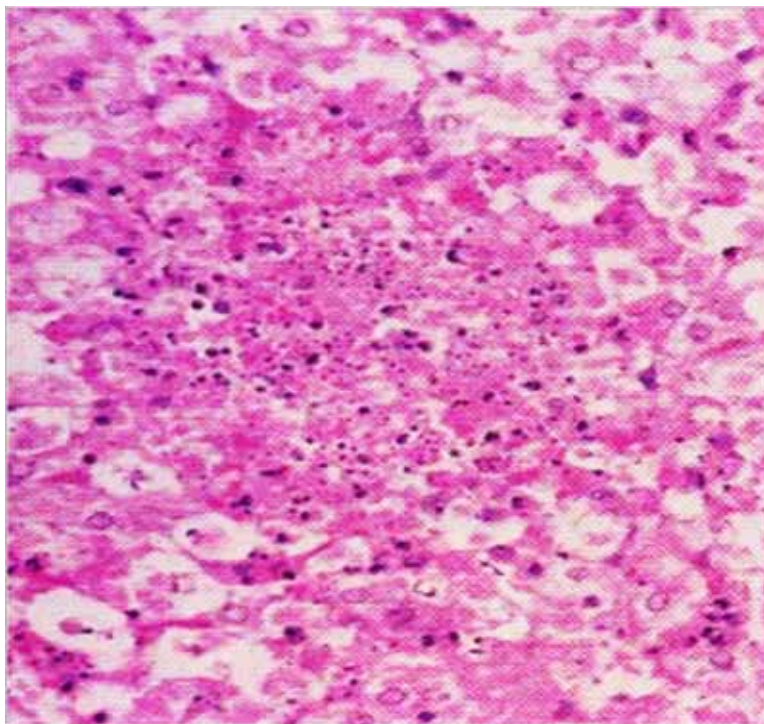
##### **Grossly:**

**\*Focal necrosis in the liver.**

##### **Microscopically:**

**\*Intranuclear cigar shape acidophilic inclusion bodies in hepatocytes at the periphery of coagulative necrotic foci.**

**Rift valley fever aborted calf**



**Focal hepatic necrosis**

## Canine herpes virus

### Etiology:

- \*Herpes virus.

### Susceptibility:

- \*Canines.

### Transmission:

- \*Respiratory.

### Clinical signs:

- \*High mortality and morbidity rate in new born puppies.
- \*Abortion, stillbirth and infertility.

### Lesions:

#### Fetus:

##### Grossly:

- \*Edema lung.
- \*Leptomeningitis.
- \*Hemorrhagic kidneys.

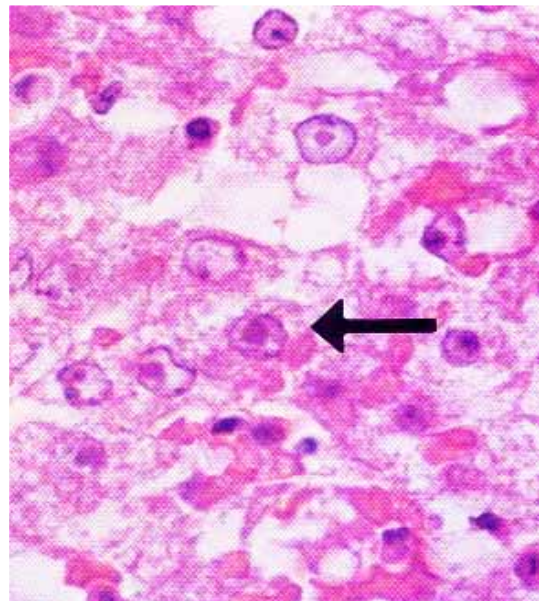
##### Microscopically:

- \*Leptomeningitis.
- \*Intranuclear acidophilic inclusions in liver, kidneys, lungs and adrenal .

### Canine herpes virus



Meningeal petechial hemorrhages  
Canine herpes virus



Acidophilic intranuclear inclusion bodies

# **Rickettsial abortion**

## **Coxiella burnetii**

### **Etiology:**

- \*Coxiella burnetii.

### **Susceptibility:**

- \*Sheep & goats.

### **Transmission:**

- \*Respiratory.

### **Clinical signs:**

- \*Endemic abortion in late gestation period.
- \*Weak lambs and kids may be born during the outbreak.

### **Lesions:**

#### **Fetus:**

##### **Grossly:**

- \*Generalized subcutaneous edema.
- \*Reddish fluid accumulation in the thoracic cavity.

##### **Microscopically:**

- \*Focal lymphoid accumulations around bronchioles .
- \*Few lymphocytes and macrophages in renal medulla and portal triads.

#### **Placenta:**

##### **Grossly:**

- \*Placenta is thickened and leathery.
- \*Copious exudate covers intercotyledonary areas.
- \*Soft cotyledons.

##### **Microscopically:**

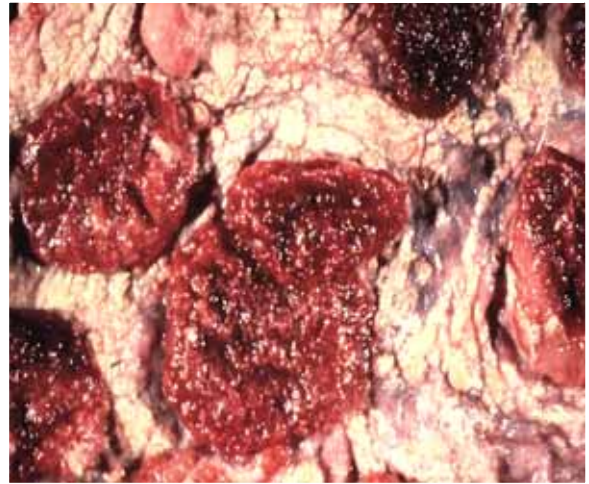
- \*Necrotic placentitis.
- \*Multifocal necrosis and neutrophilic infiltration in both cotyledonary and intercotyledonary areas.
- \*Placental stroma is edematous and hyperemic.
- \*Vasculitis.
- \*By Gimenez method coxiella organisms appear as intracellular acid fast red short rods . Chlamydia and brucella stain negative blue.

**Coxiella burnetii ewe placenta**



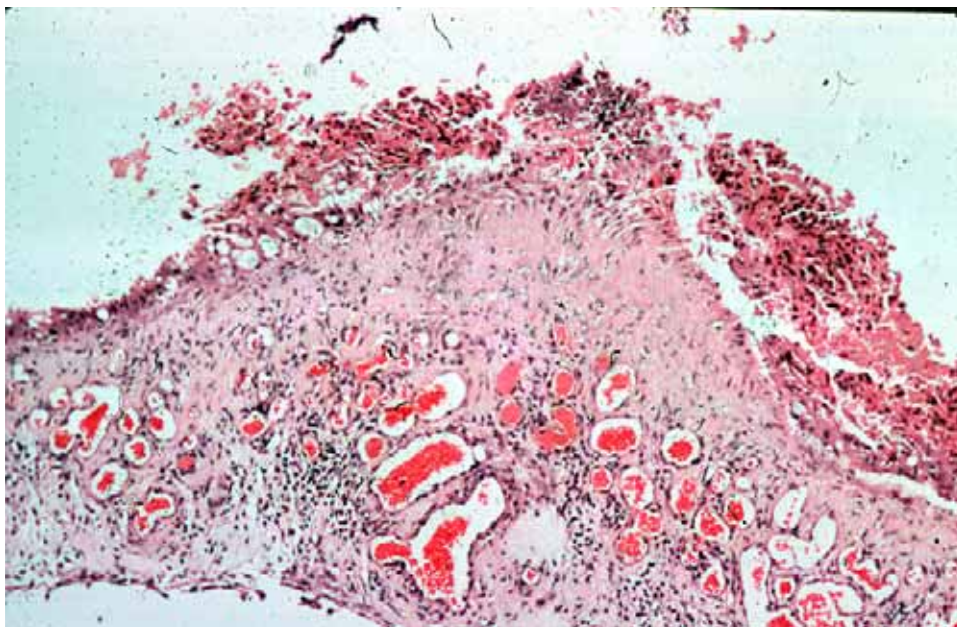
**Small areas , 1-2 mm of yellow thickened debris in the intercotyledonary space**

**Coxiella burnetii ewe uterus**



**Multiple yellow foci in the intercaruncular space and few in the red caruncles**

**Coxiella burnetii ewe placenta**



**Focal necrosis**

# Bacterial abortion

## Brucellosis

### Etiology:

\*Brucella abortus.

### Susceptibility:

\*Cattle , Sheep and goats.

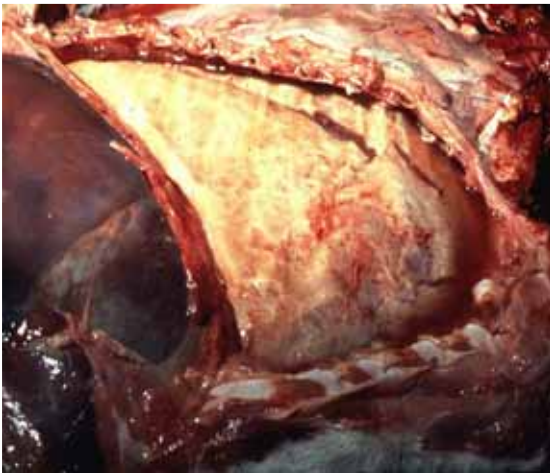
### Source of infection:

- \*Aborted fetus.
- \*Placenta.
- \*Uterine discharge.

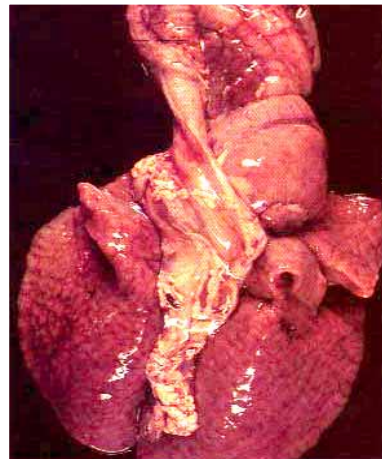
### Route of infection:

- \*Ingestion.
- \*Coital.
- \*Conjunctiva.
- \*Broken or even intact skin.

## Brucellosis aborted calf

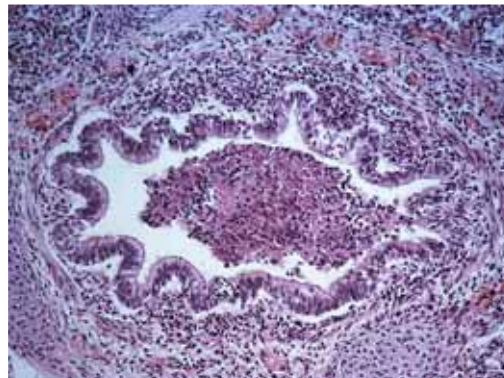


Fibrinous pleuritis



Bronchopneumonia ( cobble stone appearance )

## Bronchopneumonia ( cobble stone appearance )



Catarrhal bronchopneumonia

### **Brucellosis ewe placenta**



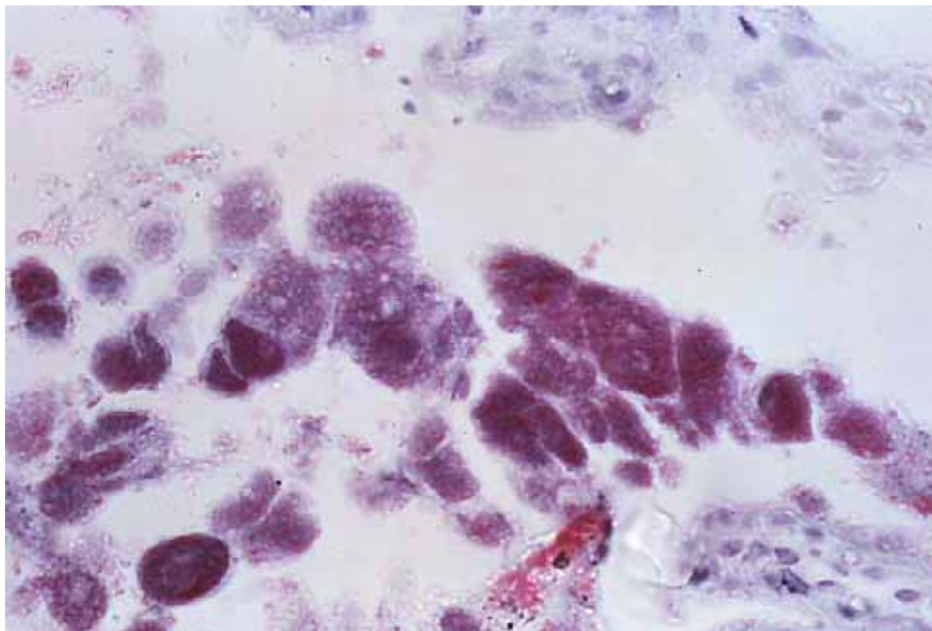
**Necrotic foci are scattered in the cotyledons .  
Fibrinous inflammation of intercotyledonary areas.**

### **Brucellosis cow placenta**



**Fibrinonecrotic placentitis**

### **Brucellosis cow placenta**



**Numerous brucella organisms in trophoblastic cells**

## **Campylobacter fetus (Vibriosis)**

### **Etiology:**

- \*Campylobacter fetus.

### **Susceptibility:**

- \*Cattle , Sheep.

### **Cattle:**

### **Transmission:**

- \*Coital.

### **Source of transmission:**

- \*Bulls carry the organism in preputial cavity.
- \*Infected bulls develop balanoposthitis.
- \*By time become permanent carriers without lesions.

### **Clinical signs:**

- \*Repeat breeder.
- \*Abortion at 4 to 6 months.
- \*Retained placenta.

### **Lesions:**

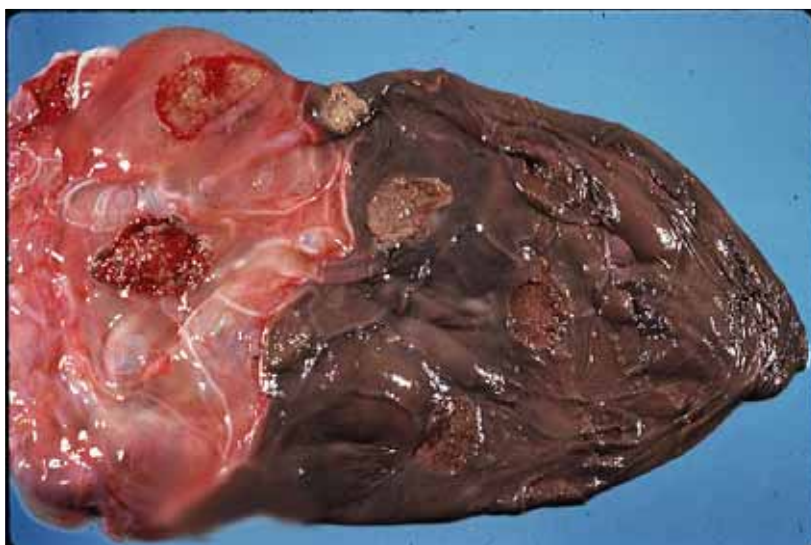
#### **Fetus:**

- \*Edema.

#### **Placenta:**

- \*Fibrinonecrotic placentitis.

## **Vibriosis cow placenta**



**A definite line of demarcation is present between the infarcted and more normal placenta.**

## Sheep:

### Transmission:

- \*Ingestion.
- \*Intestinal carriers.

### Clinical signs:

- \*Late abortion.
- \*Premature birth.
- \*Birth of weak lambs.

### Lesions:

#### Fetus:

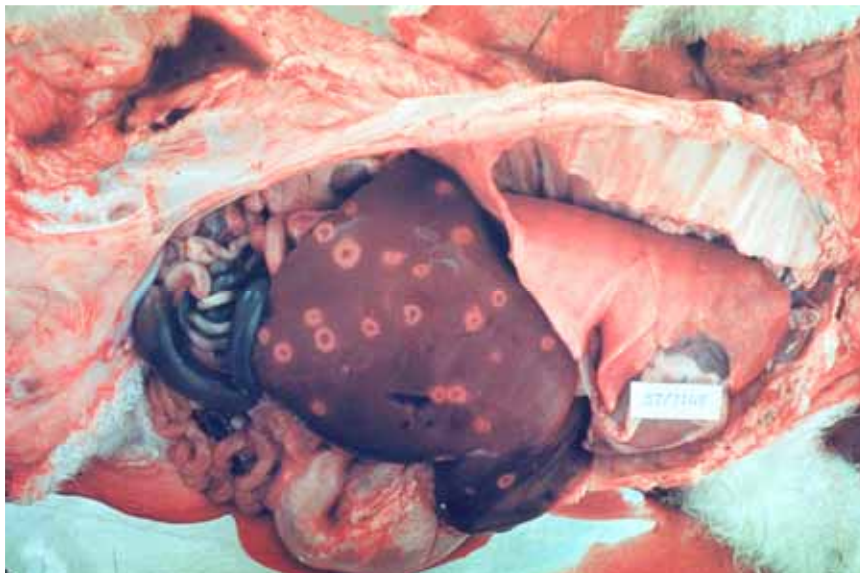
##### Grossly:

- \*Focal necrotic hepatitis.
- \*Light tan areas 1-2 mm up to 1-2 cm in diameter randomly distributed.
- \* No surrounding reactionary zone.
- \* Renal cortical hemorrhages.

##### Microscopically :

- \* Focal areas of coagulative necrosis.

### Campylobacter abortion lamb



Liver necrotic foci



## Listeriosis

### Etiology:

\**Listeria monocytogenes*.

### Susceptibility :

\*Cattle , Sheep.

### Transmission :

\*Ingestion.

### Clinical signs:

\*Encephalitis .

\*Abortion and stillbirth.

\*Abortion at last trimester of pregnancy.

\*May occur together or one or other occurs exclusively.

### Lesions:

#### Grossly:

##### Fetus:

\*Small foci of hepatic necrosis.

##### Placenta:

\*Purulent placentitis ; the necrotic tips of villi are covered by purulent exudate.

### Microscopically :

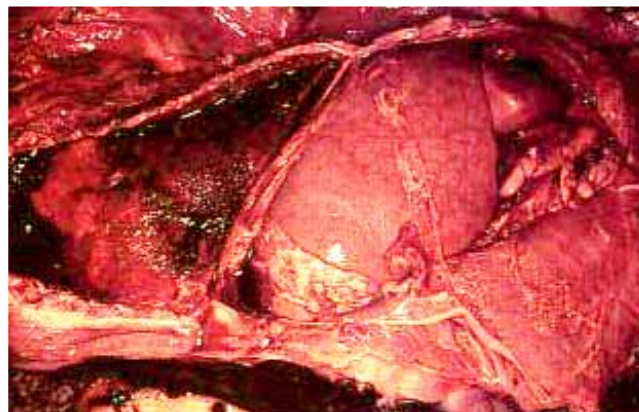
#### Fetus:

\* Microabscesses.

#### Placenta:

\* Purulent placentitis

### Listeriosis aborted calf



Pin head necrotic foci in the liver ( microabscesses)

## **Pin head necrotic foci in the liver ( microabscesses)**

### **Etiology:**

- \*Leptospira interrogans.
- \*Pomona.
- \*Hardjo.

### **Susceptibility :**

- \*Cattle , Sheep and Horse.

### **Transmission:**

- \*Ingestion .
- \*Lacerated skin.

### **Clinical signs:**

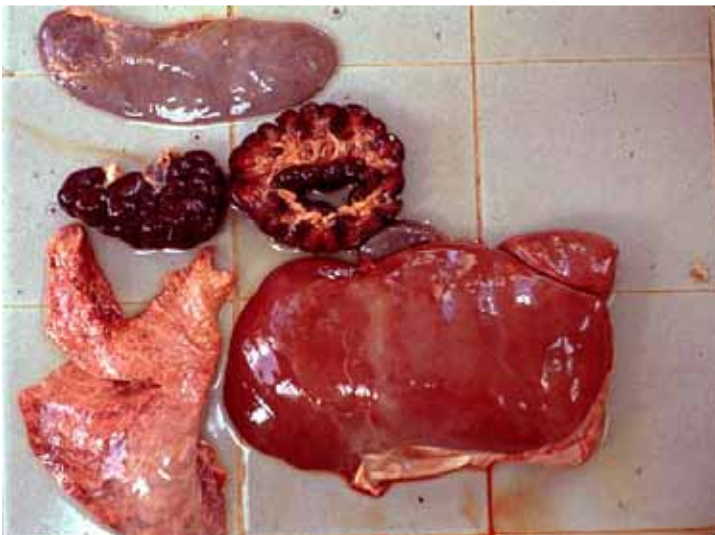
- \*Abortion in the last third of pregnancy.
- \*Stillborn.
- \*Birth of weak calves .

### **Lesions:**

#### **Fetus:**

- \*Focal interstitial nephritis.
- \*Calves surviving a week or more showed in addition hemoglobinic nephrosis.

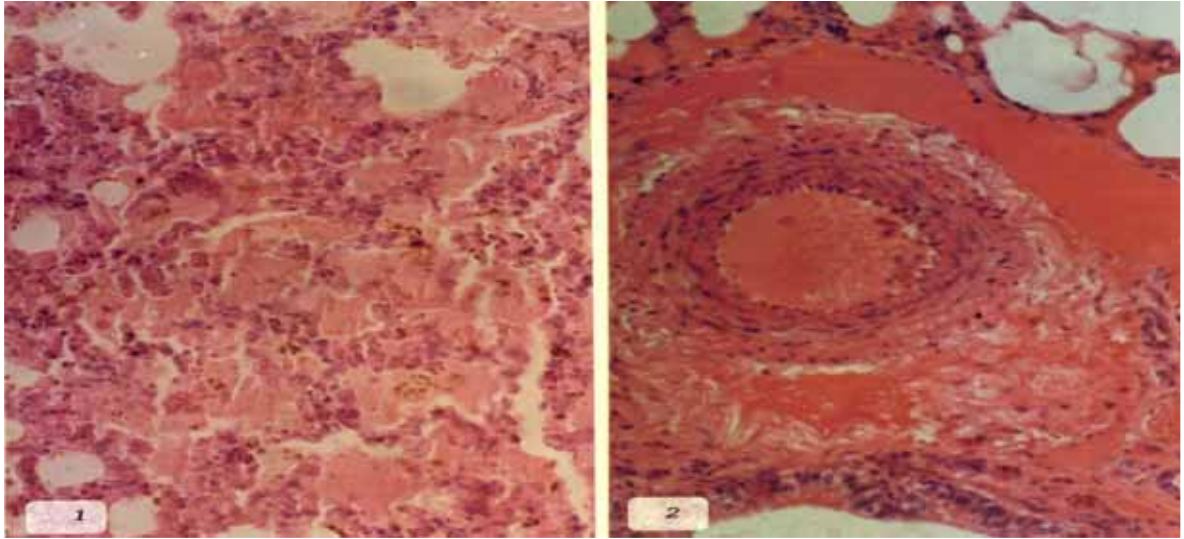
## **Leptospiral aborted calf**



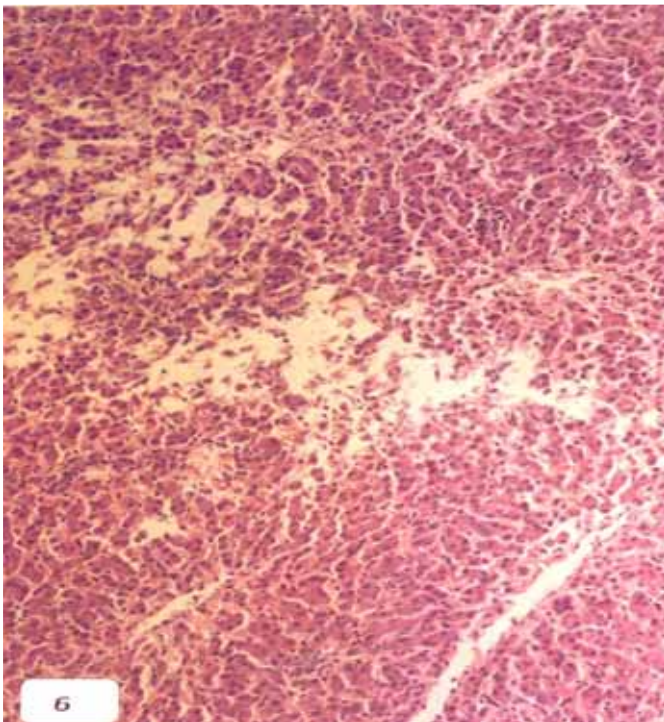
**Interstitial nephritis with hemoglobinic nephrosis & lung edema**



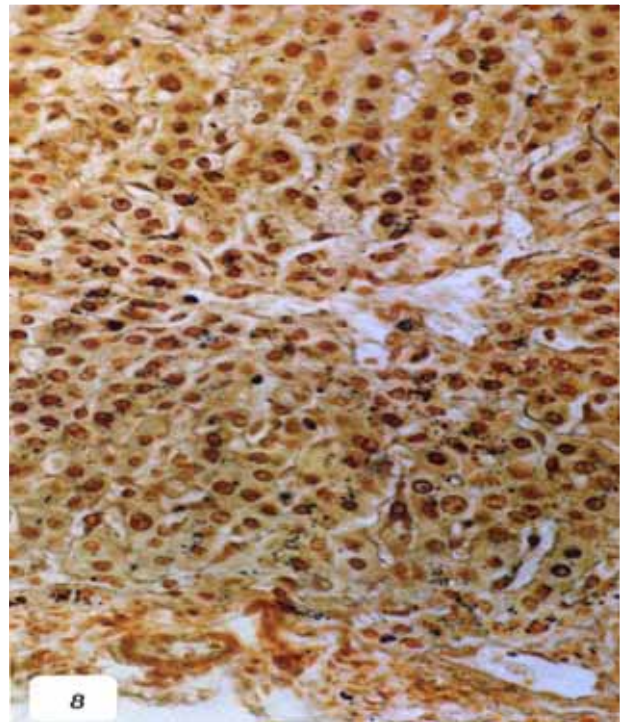
**Focal interstitial nephritis with hemoglobinic nephrosis**



**Pulmonary edema and intravascular haemolysis**

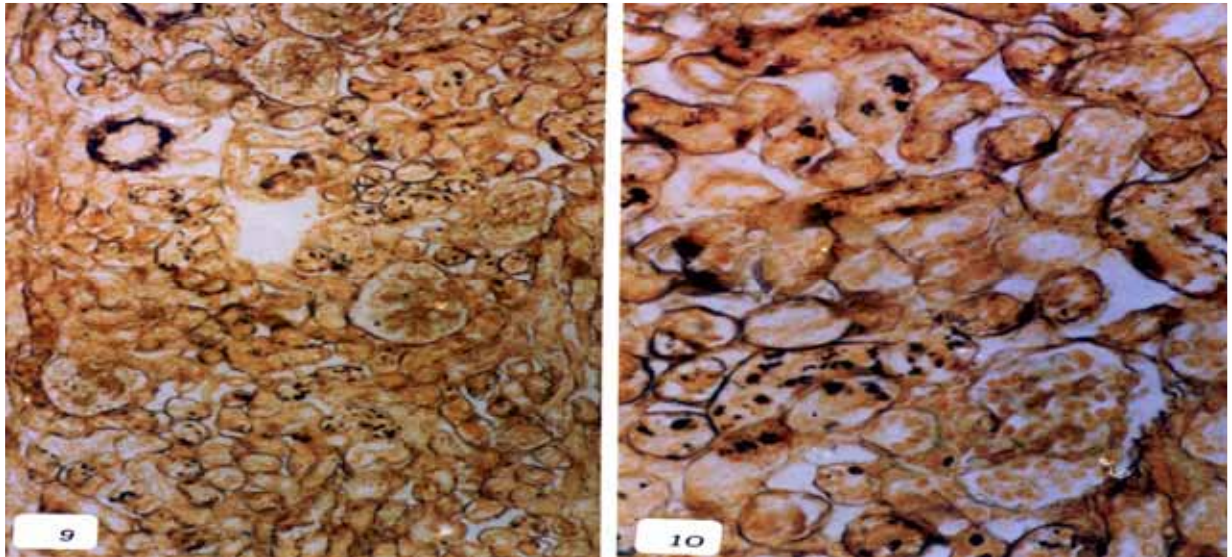


**Dissociation of liver cells from cords.**



**Leptospira organisms in Hepatocytes ( silver stain ).**

## Leptospira organisms in kidney



convoluted tubules ( silver stain )

## Chlamydia abortion

### Etiology:

\*Chlamydia psittaci.

### Susceptibility:

\*Sheep and Goat.

### Clinical signs:

- \*Late abortion.
- \*Premature lambing.
- \*Retention of placenta.

### Lesions:

#### Fetus:

#### Grossly:

\*Body cavities are filled with hemoglobin stained fluid.

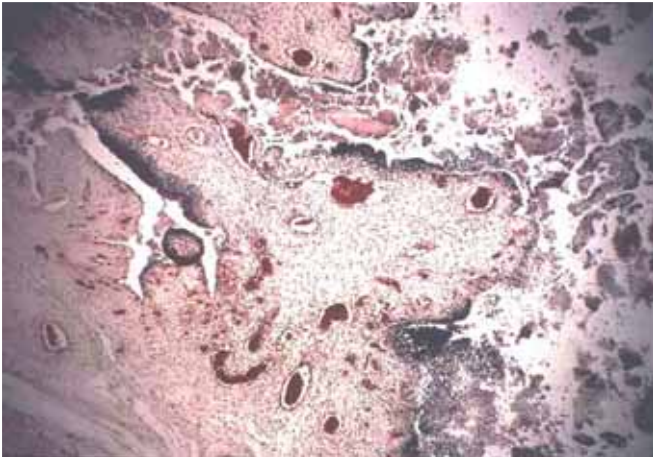
#### Microscopically:

\*Lymphoid hyperplasia.

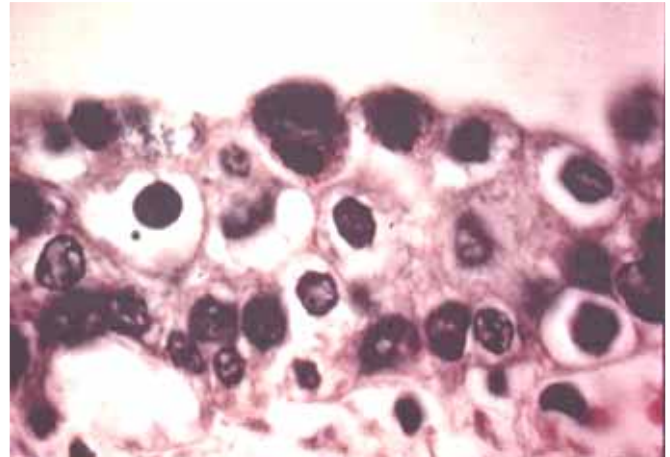
#### Placenta:

- \*Fibrinonecrotic placentitis.
- \*Vasculitis is microscopic differential feature for chlamydia.

## Chlamydiosis ewe placenta



Inflammation of connective tissue and trophoblastic cell layer



Chlamydial organisms in trophoblastic cells.

# Mycotic abortion

### Etiology:

- \*Aspergillus
- \*Absida.
- \*Mucor.
- \*Phizopus.
- \*Mortierella wolfii.

### Susceptibility:

- \*Cattle and Horse.

### Transmission:

- \*Respiratory.
- \*Ingestion.
- \*Haematogenous for pregnant uterus.

### Clinical signs:

- \*late abortion 6-9 months.
- \*Retained placenta.

### Lesions:

#### Fetus:

#### Grossly:

- \*Cutaneous granulomas inform of irregular plaques.
- \*The plaques are elevated grayish, irregular in outline and tend to coalesce.
- \*Located at the periorbital, shoulder, back and sides.

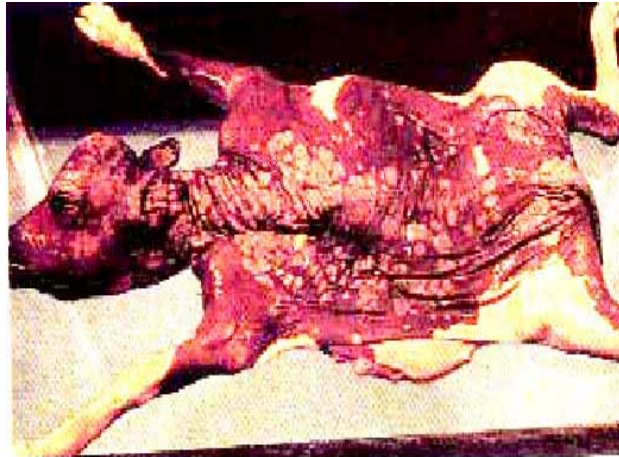
#### Placenta:

- \*Granulomatous placentitis.
- \*Button like lesions.

## Aborted calf

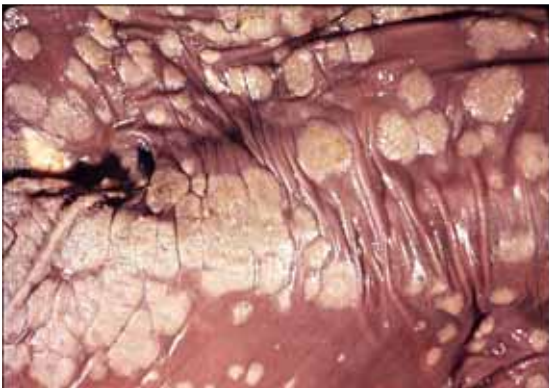


**Mycotic dermatitis**



**Mycotic dermatitis**

### **Mycotic dermatitis calf**



**Aspergillosis ... thickened pale plaques in the skin**

### **Mycotic placentitis cow**



**Thickened and leathery with swollen cotyledonary edges and necrotic debris centrally.**

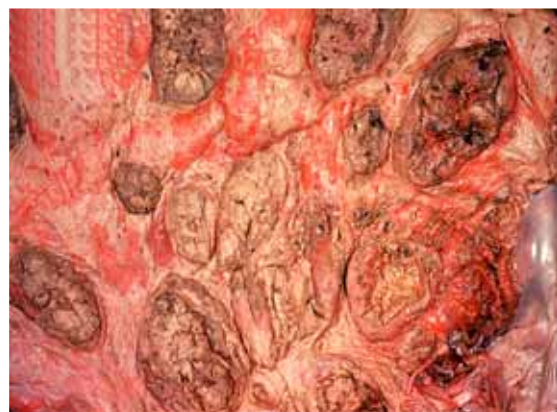
### **Mycotic placentitis cow**



**Thickening of cotyledonary edges is specific for mycotic abortion**

### **Mycotic placentitis Rhizopus sp**

### **Mycotic placentitis Rhizopus sp**



**Discriminated only by tissue culture**

**Mycotic placentitis Mortierella wolfii**



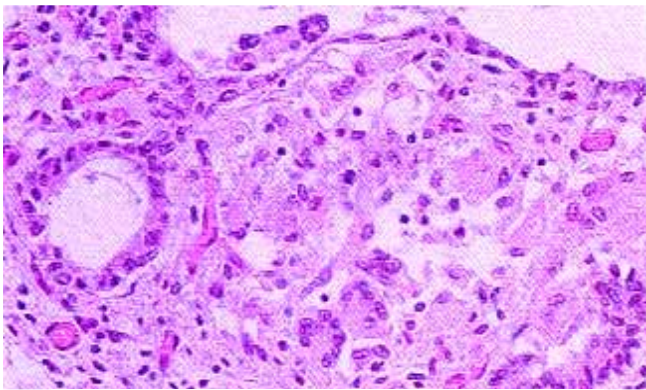
**Discriminated only by culture**

**Mycotic placentitis mare**



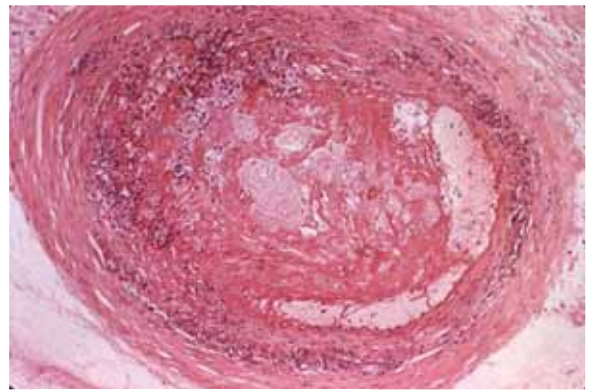
**The early lesion is in the placenta adjacent to cervix**

**Aborted calf**



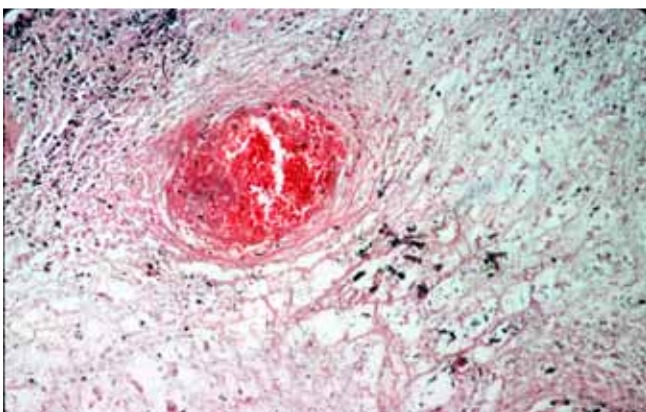
**Granulomatous mycotic dermatitis**

**Artery in cow with mycotic placentitis**



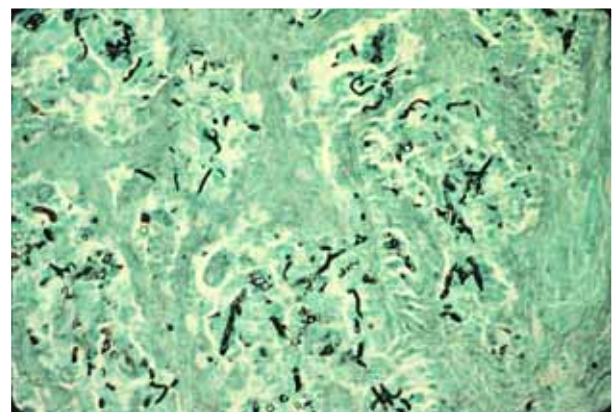
**Severe arteritis**

**Mycotic placentitis cow**



**Vascular thrombosis , edema and scattered fungal hyphae**

**Mycotic placentitis cow**



**Black stained branched septated hyphae ( Gomori's methamine silver )**

# Parasitic abortion

## Toxoplasmosis

### Etiology:

\*Toxoplasma gondii.

### Susceptibility:

\*Domesticated animals.

\*Common in ewes.

### Transmission:

\*Venereal.

\*Transplacental.

### Clinical symptoms:

\*Late abortion .

### Lesion:

#### Fetus :

##### Grossly:

\*No gross lesions.

##### Microscopically:

\*Demonstration of protozoal cyst in myocardium , Lung and brain.

#### Placenta:

##### Grossly:

\*Small white foci of necrosis in the cotyledons.

\*Edema of intercotyledonary areas.

##### Microscopically:

\*Necrosis with protozoal cyst.

### Toxoplasmosis in fetus and placenta ewe



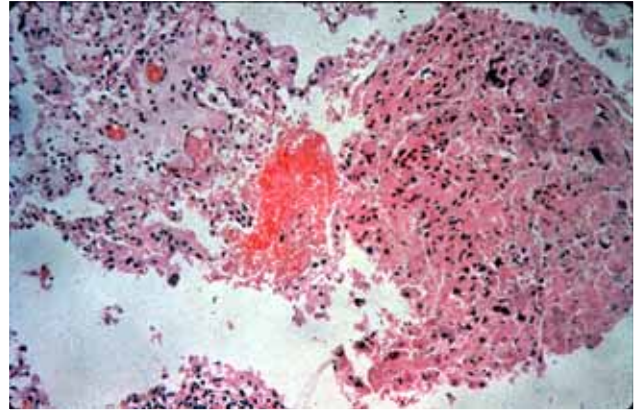
Numerous pin head necrotic foci in cotyledons. The intercotyledonary tissue is normal



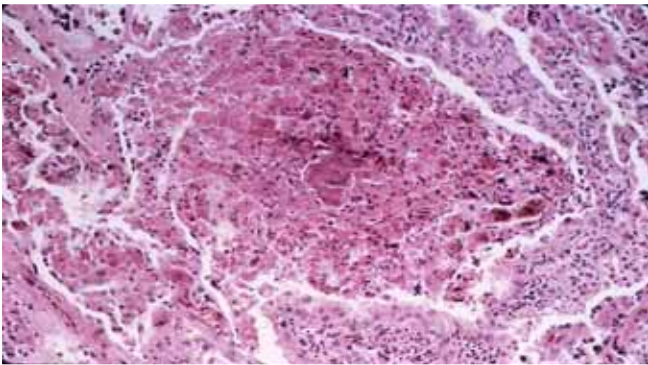
## Toxoplasmosis placenta ewe



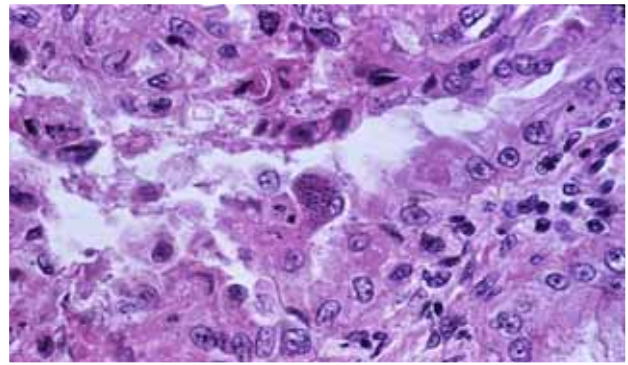
Numerous pin head necrotic foci in cotyledons



Acute necrosis and a few clumps of organism

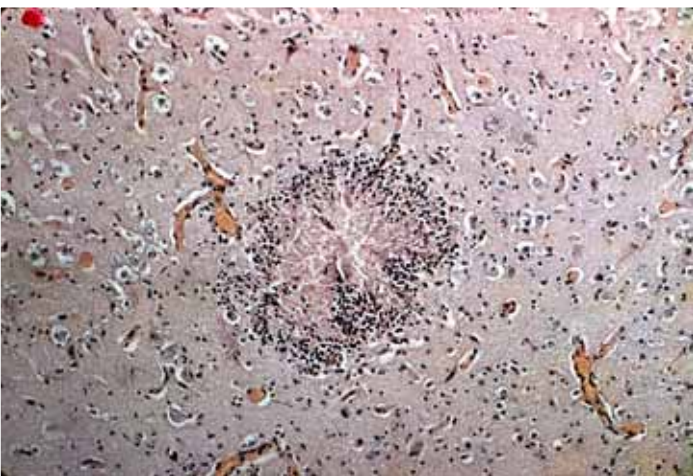


Cotyledon with focal area of necrosis



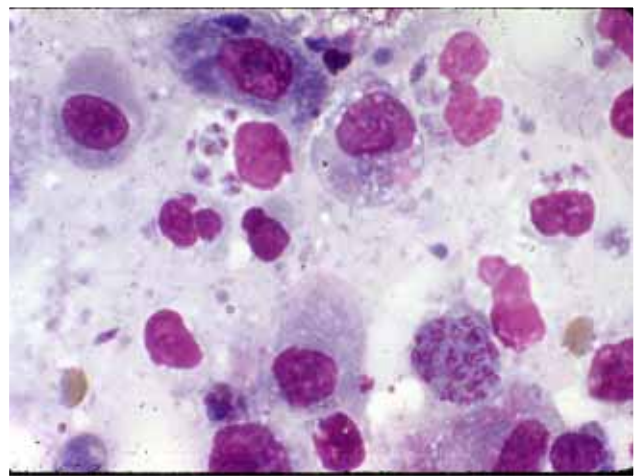
Toxoplasma cyst in trophoblast cell

## Toxoplasmosis brain of sheep fetus



Multifocal granulomatous encephalitis

## Toxoplasmosis



Toxoplasma sporocyst

# Trichomoniasis

## Etiology:

- \*Trichomonas fetus.

## Susceptibility:

- \*Cattle.

## Transmission:

- \*Coitus.

## Clinical signs:

### Bull:

- \*Acute purulent balanoposthitis.
- \*With chronicity, the bull becomes carrier .

### Cow:

- \*Acute catarrhal vaginitis.
- \*Chronically, the infection localize in uterus and cervix.
- \*Nonspecific cervicitis and endometritis.
- \*Repeat breeding.
- \*Pyometra.
- \*Abortion at any time but mainly in the first half of pregnancy.

## Lesions:

### Fetus:

- \*Giant cell pneumonitis.
- \*Demonstration of protozoa by silver stain.

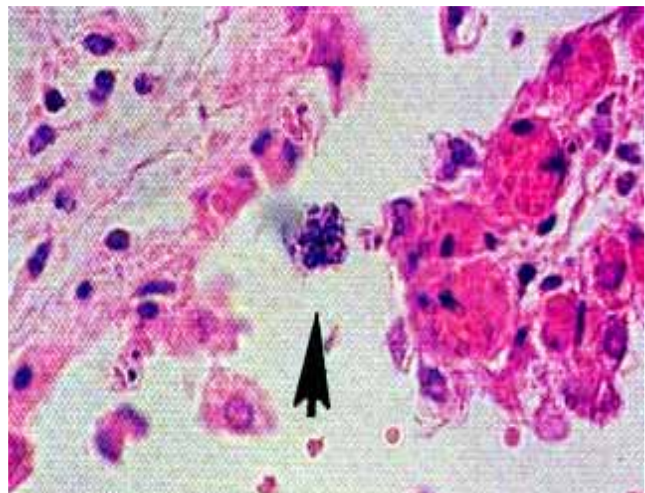
### Placenta:

- \*Fibrinonecrotic placentitis .

## Trichomoniasis

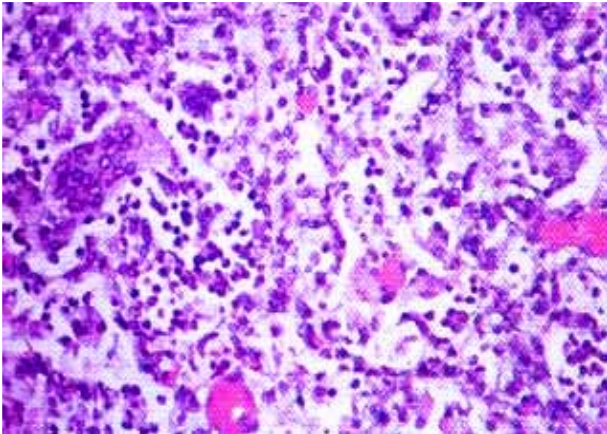


Pyometra



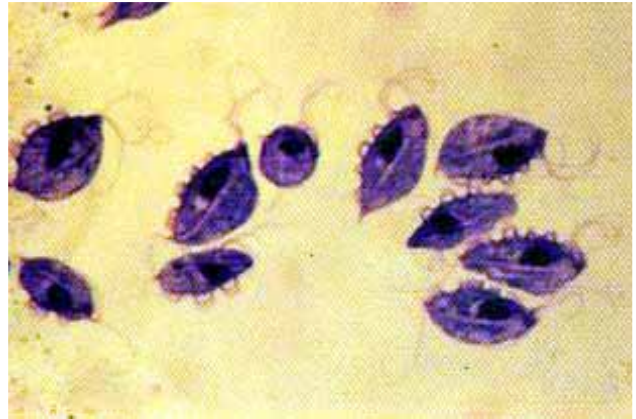
Trichomonad in lung macrophage

## **Bovine Trichomoniasis**



**Giant cell pneumonia**

## **Trichomoniasis**



**Trichomonas fetus ( flagellated protozoa)**

## **Neospora**

### **Etiology:**

**\*Neospora Caninum.**

### **Susceptibility:**

**\*Cattle , sheep , goat , dog and horse.**

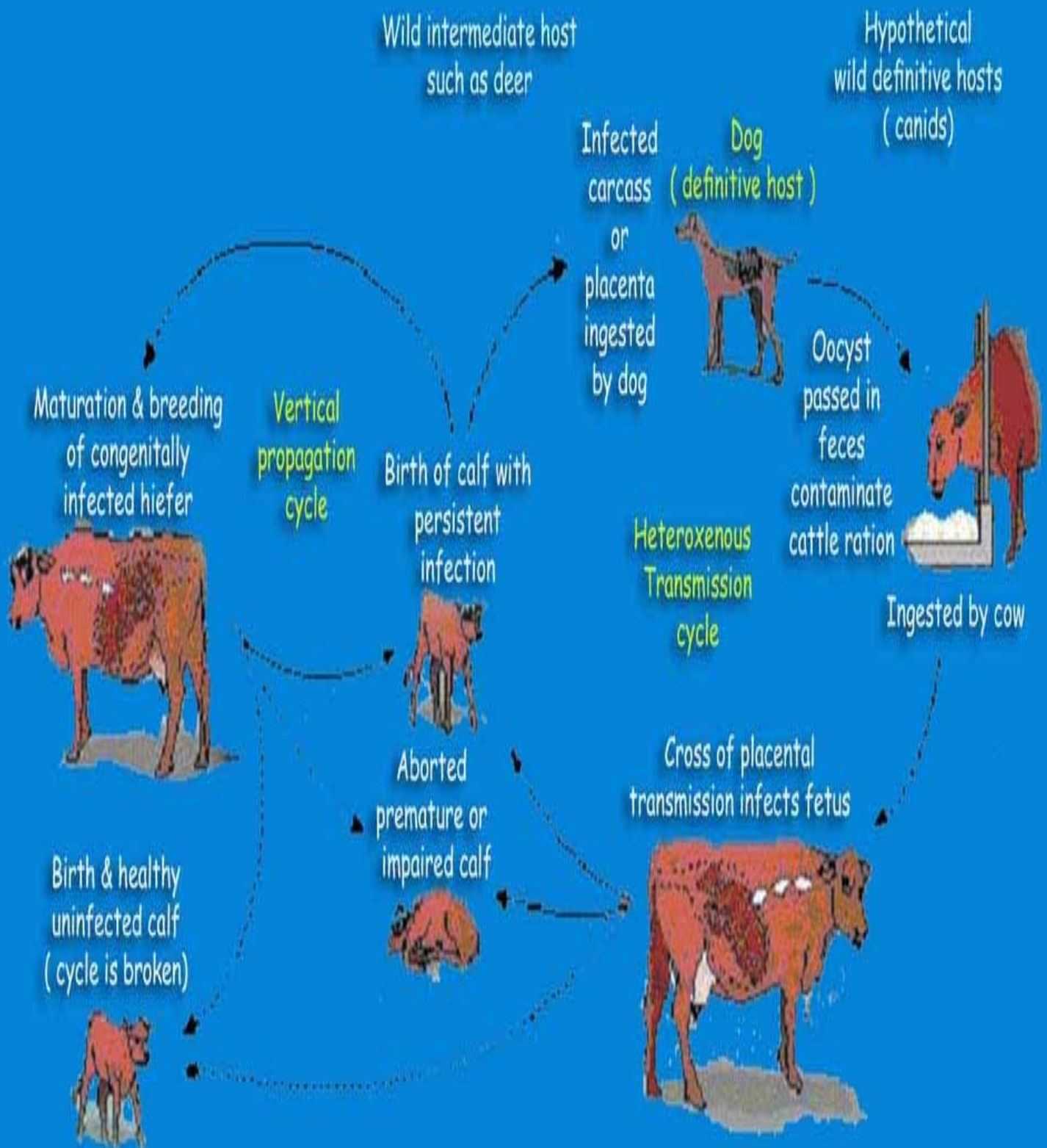
### **Transmission:**

**\*Ingestion.**

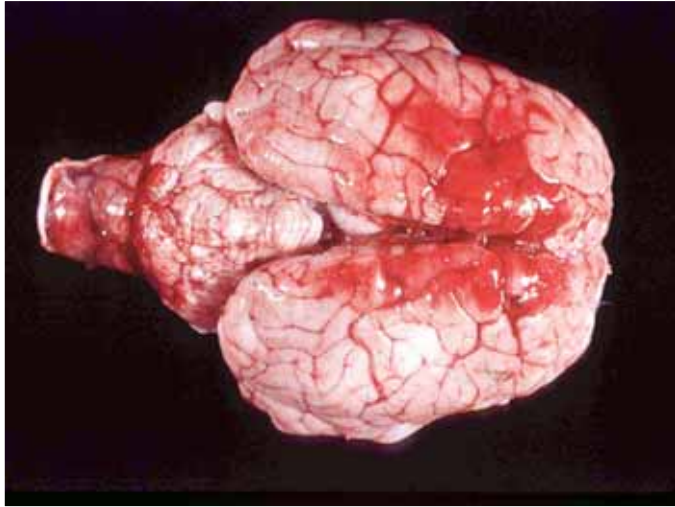
### **Clinical signs :**

- \*Abortion between 4 – 6 months .**
- \*Congenital malformations in calves.**

# Life cycle of Neospora caninum

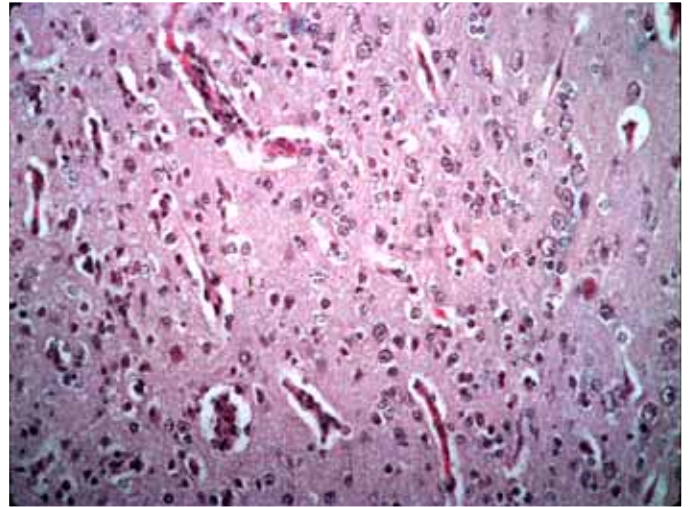


**Neospora abortion Brain of aborted bovine fetus**



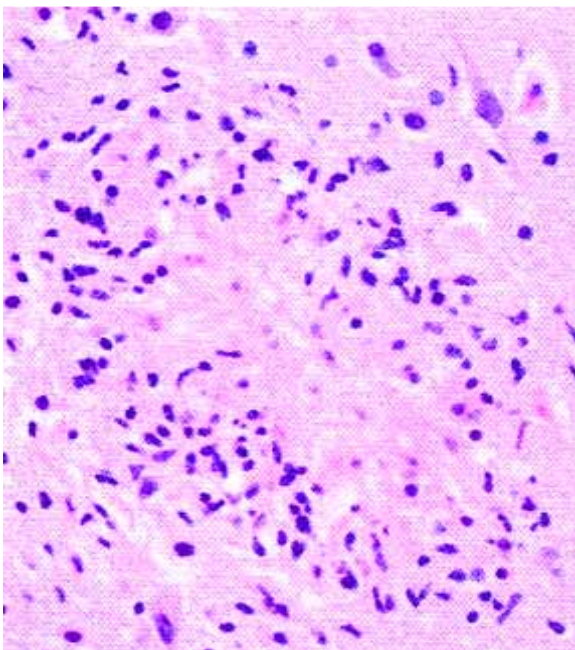
**Granulomatous encephalitis and hemorrhage. Massive area of hemorrhage over the cerebral hemispheres and cerebellar nodules**

**Neospora abortion brain of bovine fetus**



**Neospora encephalitis glial reaction**

**Neospora abortion**



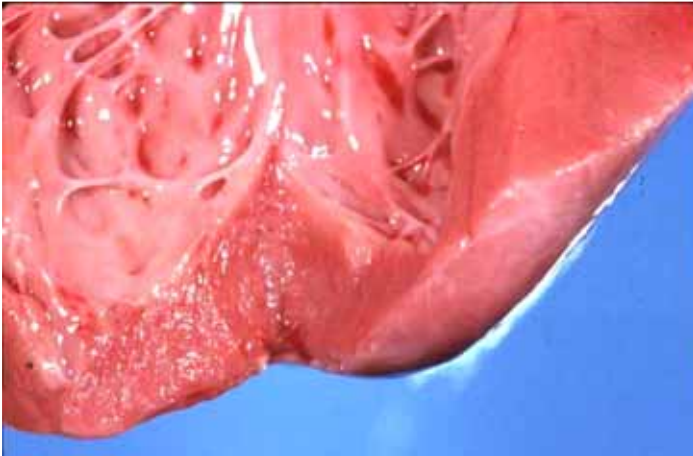
**Focal malacia surrounded by gliosis**

**Neospora abortion**

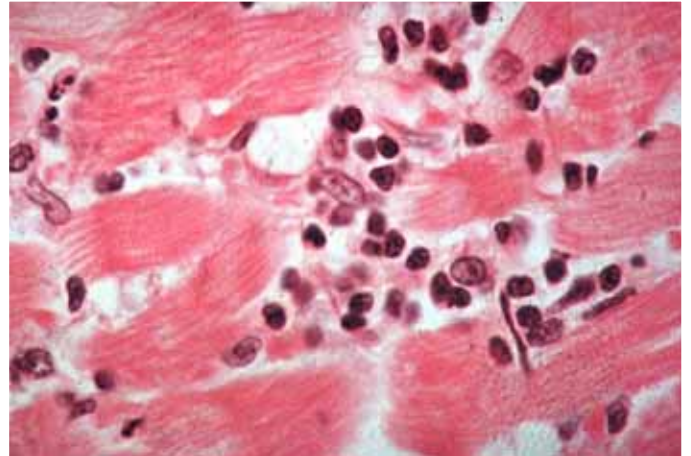


**Neospora cyst in cerebral neuron**

## **Neospora caninum heart of aborted calf**

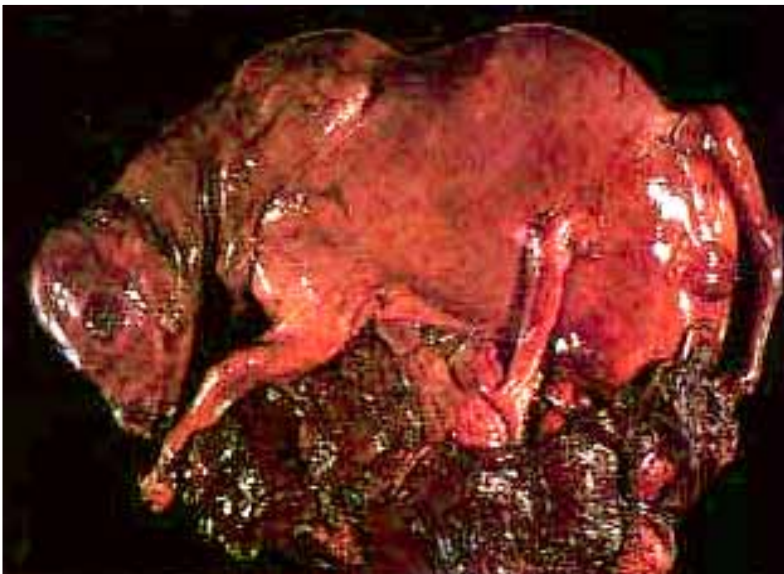


**Multifocal interstitial myocarditis  
(scattered pale foci in myocardium )**



**Focal interstitial myocarditis**

## **Neospora abortion**



**Arthrogryposis aborted calf**



**Arthrogryposis newborn calf**