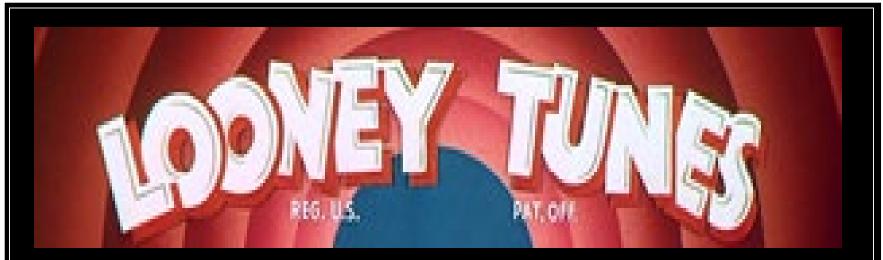
# VIRTUAL CONVENTION 2021

Looney Tunes Neurologic Diseases of Small Ruminants Margaret A. Masterson, DVM. MS

Sponsored by:



#### Neurologic Disease of Sheep & Goats Margaret A. Masterson, DVM, MS Diplomate ACVPM Clinical Professor OSU Large Animal Services

## Learning Objectives

- Learn how to perform a CSF tap in small ruminants
- Learn the signs, diagnosis, treatment & prevention for several neurologic diseases affecting small ruminants
- Learn how to manage a neurologic case in a small ruminant

## Diagnostics

- A good PE
- A good Neuro Exam
  - Blind ?
  - Cranial nerves ?
  - Lateralized signs ?
  - Ataxic ?
  - Mentation ?

# Try to localize the lesion

# CSF Tap

- Supplies:
- 18 g 3 1/2 " Spinal needle
- EDTA tubes
- Red top tubes

- White tape
- Surgical scrub & gloves
- Lidocaine
- Sedation ?

# CSF Tap

Lumbosacharal Space

#### More diagnostic Less risk





# CSF Tap

- Sternal recumbancy
- Lumbosacral space
- Surgical prep 4" x 5" w/ tape
- Lidocaine .5 1 cc
- 18g 3 1/2" spinal needle
- 2 "pops"
- 2 3 mls divided into EDTA and plain



# CSF Tap Normal

| Color            | Colorless               |
|------------------|-------------------------|
| Specific Gravity | 1.004 – 1.008           |
| Erythrocytes     | <35                     |
| WBC's            | 0 – 9 / mm <sup>3</sup> |
| Neutrophils      | None to Few             |
| Lymphocytes      | 95%                     |
| Protein (mg/dl)  | 12 – 30                 |
| Glucose (mg/dl)  | 56.0 **                 |

Smith & Sherman 1994

\*\* Glucose may double w/ xylazine

#### Listeriosis

Gram + non-spore forming rod
 Can survive for months in soil, water and feed

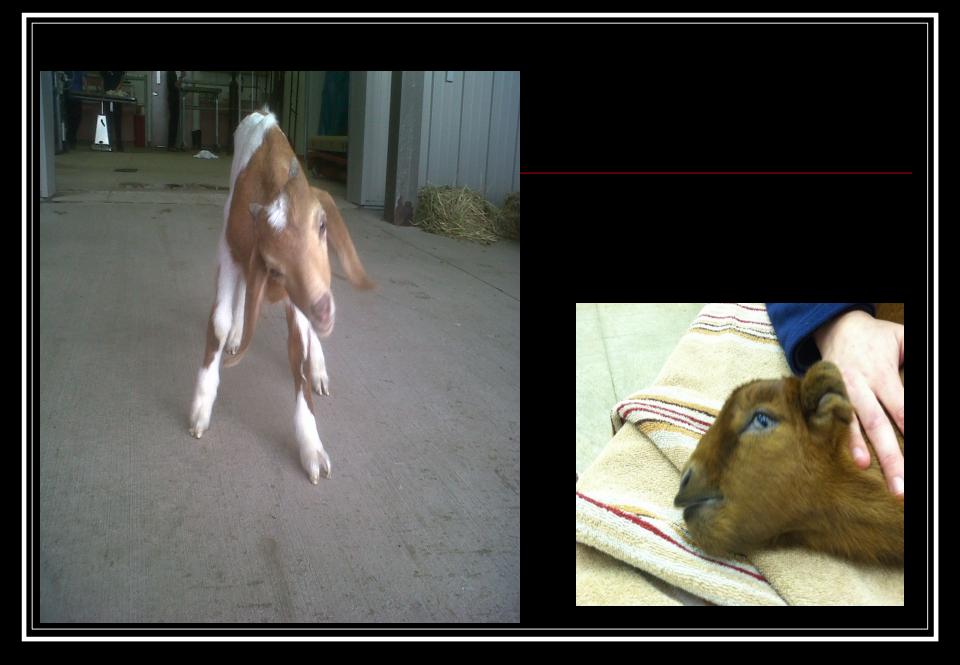
Abortion form (type 1)
Septic form (type 1 & 4)
Neurologic form "

# Listeriosis – Septic Form

- Neonates
- Weak, unable to nurse, FPT
- Intention tremors
- Hypo or Hyperthermia, Hypo or Hyperglycemia
- Seizures nystagmus and death

#### Listeriosis – Neuro Form

- Organism enters buccal mucosa from a cut and travels up the Trigeminal nerve
   Lateralizing signs – circling, head tilt,
  - ptosis, inability to eat or swallow, drooling
- Preference to lay on one side, but also down
- CSF increased PMN w/ monocytosis, increased protein



#### Listeriosis

#### Treatment: ?

- Nuflor<sup>®</sup> 20 mg/kg q 48 hrs.
- Tetracycline 20 mg/kg SID or BID x 5d
- Penicillin 60,000 IU/kg IV q 6 hrs.
- Penicillin 80,000 120,000 IU/kg IM BID
- Supportive

#### Listeriosis

#### Prevention

Avoid poor quality silage & forage

pH > 5.5

Chlortetracycline

6 - 12 mg/kg PO daily

Prevent fecal contamination of feed Zoonotic

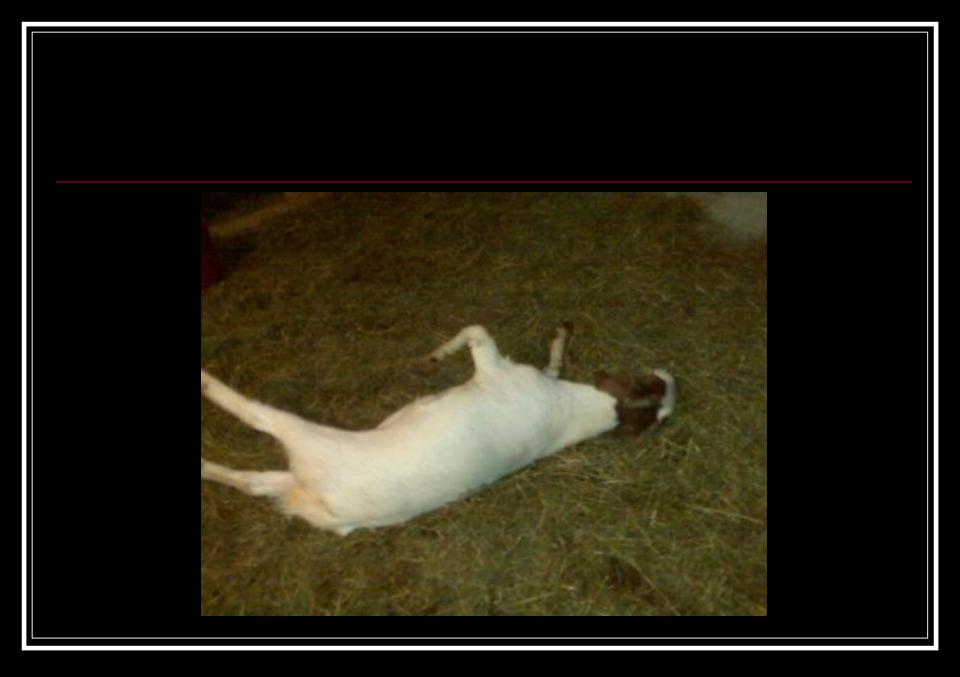
Polioencephalomalacia Thiamine deficiency  $(B_1)$ Causes: Poor quality forages Hay stored > 1 year Amprolium Thianinease producing bacteria High CHO diets, Grain overload, Feed changes Sulfur toxicity (molasses, ammonium sulfate) Bracken fern

#### Polioencephalomalacia Thiamine deficiency $(B_1)$

Signs:

#### Blind

- Intact PLR's, especially early
- Dorsal medial strabismus
- nystagmus
- Opisthotonos
- May go down
- CSF often normal
  - Subclinical poor growth rates



Polioencephalomalacia Thiamine deficiency  $(B_1)$  Treatment: Dx by response to TX Often within 2 hours 10 – 15 mg/kg Thiamine g 4 hrs IV &/or IM IV slowly Keep from light If B complex dose based on  $B_1$ Supportive Dexamethasone / Mannitol for edema

Polioencephalomalacia Thiamine deficiency (B<sub>1</sub>) Necropsy

- Cerebral Cortex
  - Soft, Edematous, Grey to Yellow
  - Flattened gyri
  - Necrotic Areas Fluoresce
  - Cerebellum
    - May be Herniated



- Condition of Newborn and Growing Kids
- Weak kids, easily fatigue
- Head nodding, muscle tremors
- Ataxia, symmetrical progressive paralysis
- May also see anemia, fractures
- Demyelination of nerves

Copper deficiency
 Either 1°
 < 4 ppm in feed</li>
 or 2°



- Excess Molybdenum, Sulfate, Iron,
- Manganese, Cadmium, Lead

Diagnosis

Normal blood copper
 9.4 – 23.6 umol / I (.6 – 1.5 ppm)

Enzootic Ataxia blood or serum copper
 < 8 umul/l (0.5 ppm)</li>

liver copper

< 20 ppm dry weight</p>

Treatment:

- Oral copper
- Parenteral copper
- Prevention
  - Feed 5 15 ppm
  - Copper : Molybdenum 6 : 1 during gestation
  - Top dress pasture w/ CuSo4 2-3 kg / hectare
  - Sulfate levels < 3500 ppm</p>

# CAE (OPP?)

- Arthritis
- Encephalitis
- Hard Bag
- Pneumonia



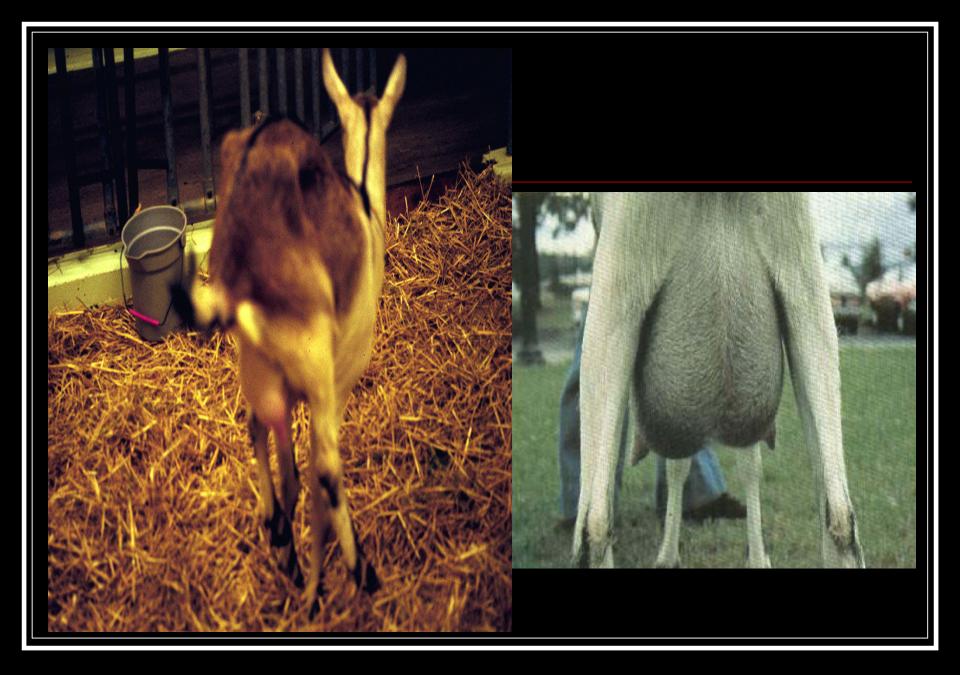
### CAE

Dairy breeds 1–6 months or very old

- Progressive paresis
  - Usually begins in 1 rear leg
  - Dog sitting
  - Often BAR in front end
- Paralysis may take 1 2 weeks

 Blind, tremor, circling, opisthotonos, decreased PLR, depression, fever





#### CAE

## Prevention

Do not feed colostrum from infected dams
 Feed colostrum from negative dams only
 Pasteurize colostrum

 56°C for 1 hour

 Feed colostrum suppliment
 Elective C-section

## TSE's

- BSE = Mad Cow
- Scrapie
- CWD
- Creutzfeld Jakob
- Atypical Scrapie
  - Nor 98

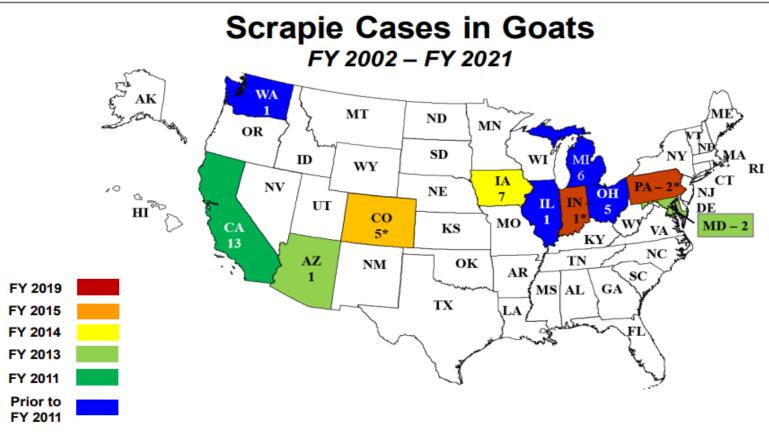
- FSE
- T. Mink Enceph.
- KURU
  - Gerstmann-Straussler-Scheinker
- Fatal Famillial Insomnia

# Scrapie

- Prion protein particle that is infectious
- Causes astrocytic gliosis
- No detectable immune response
- Persists in environment for perhaps years
- Uncommonly reported in goats
- Usually but not always associated w/ sheep contact







(Figure 1)

Color code indicates fiscal year of last case by State. 44 NVSL confirmed cases. \* States with 1 RSSS positive goat; samples collected November 2014, July 2018, and June 2019

### Small Ruminants get 3 types of TSE's

Classical ScrapieAtypical ScrapieBSE



#### Classical Scrapie

> 2 years old usually 2 - 5
Duration of signs is 2 weeks - months
Spread by placenta
But no so much in goats

## Classical Scrapie

Behavior changes:

- Isolation
- Aggression
- Disorientation
- Abnormal vocalization

#### Classical Scrapie

Sensory Changes:
 Hyperexcitable
 +/- Pruritus
 Alopecia

+ /- Ecstasy when scratched



# Classical Scrapie in Goats

#### Changes in Movement:

- Ataxia
- Hypermetria
- Head tremor
- Paresis in rear



#### Other signs:

Weight loss with good appetiteSigns can lateralize!

## Atypical Scrapie = Nor 98

- Much more rare
- Worldwide distribution
- More rostral in brain
- Most detected in aged healthy sheep on routine postmortem following culling

#### 1 12 yr. old goat found dead

## BSE

#### Experimental infection in goats

- Ataxia
- Trembling
- Lethargy
- Weight loss
- No Pruritus

## Scrapie Genetics

#### Sheep codon

- 171
  - R vs Q
- 136

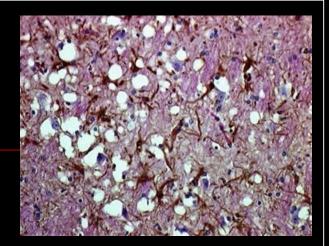
- **Goat codons** 
  - R143
- **S146**
- H154
- K222
- M142

# Differential for Scrapie

- Listeria
- CAE
- Hepatic / Renal encephalitis
- Abscess
- Tumor
- Rabies

# Diagnosis of Scrapie

- Postmortem
- 3<sup>rd</sup> eyelid
- RMALT rectal mucosal biopsy
  - 87% accurate in sheep





#### Tetanus

- Clostridium tetani
  - Sources:
    - Dehorning/castration
    - Surgery
    - Kidding
    - Wounds
    - Shearing



#### Tetanus treatment

Penicillin PPG or IV

- Antitoxin 10,000 15,000 IU, IV BID
- Debride wound and apply hydrogen peroxide
- Supportive care

## Otitis Media

- Signs: head tilt, facial nerve deficits, ptosis, ataxia, nystagmus, listing to one side
- May be associated w/ external ear infection
  - Especially due to mites
- Spread internally secondary to respiratory infection
- CSF: may see increased protein but no monocytosis

## Otitis Media

#### Treatment

- Systemic & local antibiotics
- NSAID's
- Myringotomy
- Surgical management
  - Lateral ear resection

## Tick Paralysis

- Dermacentor
- Ixodes (in Australia) / produce neurotoxin

Ascending motor paralysis leading to death
Manually remove ticks – may need to shear
Topical pyrethrins
Ivermectin works too slowly

#### Rabies

- Aggressive form is most common in goats (83%)
- Aggressive animals may bite or attack other animals or objects

Increased vocalization (72%), sexual hyperactivity, running, pharyngeal paralysis, salivation (29%), paralysis (17%).

## Rabies

- Incubation period may be 2 weeks to several months
- Once clinical signs develop death occurs in 1 – 10 days
  - Diagnosis:

Negri bodies in the hippocampus and Purkinje fibers

## Rabies

Prevention:

- No vaccines are approved
- Vaccines approved for sheep are sometimes used and considered effacaious
  - Killed vaccine
  - MLV's cause post-vaccination paralysis

#### Border Disease

- Hairy Shaker Lamb Disease
- Pestivirus
- Causes infertility, abortion, stillborns
- Tremors and shaking
- Kids DO NOT show typical "hairy" condition
- May be under reported due to infertility

#### Pseudorabies

- Herpes virus
- Intense pruritus
- Ataxia
- Disorientation
- Death within 72 hours

Almost always associated with swine



- Up to 84% of WT Deer infected in Eastern US
- PP period in deer is 3 months
- In aberrant hosts:
  - Larva migrate through GI wall into peritoneal cavity and enter the spinal cord through the dorsal nerve roots and migrate to the grey matter

Meningeal Worm Parelaphostrongylus tenuis Signs 45 – 53 days post ingestion **Usually Fall & Winter** But can be Spring Gradual or Acute CSF – eosinophillic pleocytosis w/ increased protein

#### Signs:

- Lame or ataxic rear more common
- Hypermetria
- Recumbency may still be BAR
- 10% show cranial nerve signs
- 2° signs from being down are common

Treatment:

Fenbendazole 50 mg/kg PO x 5 days

Flunixin 1 mg/kg q 24 hrs. IV or IM

 Ivermectin most effective on larva prior to entering CNS

#### Prevention:

- Eliminate deer hunting, 12' fences
- Eliminate snails & slugs
  - Drain pastures eliminate wet spots
  - Guinea fowl or Peacocks
  - Vegetation proof zone limestone
- Ivermectin q 30 d. or Doramectin q 45 days
  - May December
  - Resistance ?

Meningeal Worm Parelaphostrongylus tenuis Vaccine is in development **\$** 300,000 > 3 years away

## The "Other" Meningeal Worm

Elaphostrongylus cervi

Red deerSeen in the U.K.

#### Trauma, Abscess, Tumor

- Necessary to localize the lesion
  Radiographs may be helpful
  Tumors slowly progressive signs
- Tumors rarely reported in sheep & goats

# Differential Diagnosis

- Heat stress
- Hypoglycemia/ Hyperglycemia
- Hypocalcemia or magnesemia
- Pregnancy toxemia
- Hepatic encephalopathy
- Uremic encephalopathy

# Differential Diagnosis

- Neurologic coccidiosis
- Tick paralysis
- Clostridial Disease
- Lameness
- Plant or other toxic substances
  - Rye
  - Ionophore

## Supportive Neurologic Treatment

Steroids or NSAID's

- Solu-Delta
- Dexamethazone .5 1 mg/kg IV or IM SID
- Banamine 1.1 mg/kg IV SID or BID

Watch steroids if pregnant

## Supportive Treatment

#### Thiamine

10 – 15 mg/kg IV or IM SID

#### DMSO

1 mg/kg in 5% dextrose
 IV SID

- Fluids w/ or wo/ Protein
- Physical Therapy
- Systemic Antibiotics
- Vitamin E / Selenium
- Transfaunation

## Antibiotics

Penicillin
Amoxicillin
Tetracycline
Nuflor



# VIRTUAL CONVENTION 2021 Nov. 12-14

#### **Questions:**

Margaret A. Masterson, DVM, MS Clinical Professor OSU Large Animal Field Services Phone: 937 642 2936 Email: masterson.2@osu.edu