University of Mosul Lecture No.: 5 College of Veterinary Medicine

Date: 2024-2025

Unit of Scientific Affairs

Website:



Lecture title: Oral and Laryngeal Necrobacillosis

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Summary:

Synonyms: Calf Diphtheria (CD), Oral and Laryngeal Necrobacillosis or دفتيريا العجول.

Definition: Is an infectious disease. There are two forms: oral (which is the most common) and laryngeal. The condition is caused by Fusobacterium necrophorum.

History: The disease was first described in 1664

ETIOLOGY

- ☐ Fusobacterium necrophorum
- o Gram-negative, non-spore-forming, rod-shaped anaerobic but aerotolerant organism.
- o Normal inhabitant of the ruminant oral cavity and upper digestive and respiratory tract.
- o Opportunistic pathogen.
- o Virulence factors: endotoxic LPS, leukotoxin (LT) hemolysin, and hemagglutinin.

EPIDEMIOLOGY

- □ Infectious but noncontagious disease.

Pathogenesis:

The incubation period is about four days.

Injury of the mucosa of the oral cavity, pharynx, and larynx bacteria penetrate tissues

Inflammation and necrosis — Edema and inflammation of the mucosa of the larynx Inspiratory dyspnea and stridor — •

The lesion causes discomfort, painful swallowing, and toxemia extension of the lesion to the arytenoid cartilages laryngeal chondritis delayed healing or failure to recover completely

I. Oral form

- Is the most common form and is usually sporadic in occurrence,
- although there may be outbreaks where hygiene is poor.
- In such cases, it is probably spread by dirty milk pails, machine teats or feeding containers.
- Individual cases sometimes occur where fibrous and coarse food is offered.

University of Mosul Lecture No.: 5 College of Veterinary Medicine

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- Although mainly seen in housed calves, it may also occur at pasture.
- Affected calves are usually under three months old and often have concurrent disease, nutritional deficiency or erupting teeth.

CLINICAL FINDINGS

- A- The major sign is a swelling of the cheek, particularly in the region of the first cheek tooth
- The calf is often bright and active with a normal temperature.
- > Opening the mouth reveals a necrotic swelling in the cheek, which may contain impacted food material, and there may be a foul smell
- The animal may salivate a little. In a few cases there is also involvement of the tongue, which may become swollen and protrude from the mouth.
- In neglected cases, lesions may extend to the nasal cavity, pharynx, lungs, abomasum and coronets of the legs.

II- Laryngeal form

This form is less common and is sporadic in occurrence. It has been seen in animals around one year old.

Clinical signs

- These cattle tend to be dull with inappetence or anorexia.
- ≥ Often there is pyrexia (40.5 °C).
- Respirations are dyspneic to a varying degree.
- There is a cough that is moist and painful.
- Palpation of the larvnx is resented and can elicit the cough.
- Painful cough accompanied by severe inspiratory dyspnea that cause a roaring inspiratory sound ("honker calf" or "hard breather").
- The mouth may be foul smelling.
- Many of these animals do not respond well to treatment and the diphtheritic area may become detached, resulting in sudden asphyxiation or lung infection.

2. Postmortem lesions

- 🖎 Oral lesions are usually well circumscribed with an area of edema and a necrotic center.
- ≥ If the necrotic area is lost, an ulcer is seen

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The lesion in the larynx is normally well embedded in the laryngeal cartilage. When lung

lesions occur, there are necrotic areas present, surrounded by a catarrhal pneumonia

Diagnosis

- The main differential diagnoses are foreign bodies in the mouth, papular stomatitis, mouth and jaw injuries and mucosal disease.
- All are quite easy to rule out by oral examination
- laryngeal edema, laryngitis and vocal cord paralysis.

Treatment

Treatment	
$\hfill \Box$ Lesions of necrotic stomatitis will usually heal in a few days following debriden	nent of the ulcers.
☐ Application of a solution of tincture of iodine.	
$\hfill\Box$ Oral administration of sulfamethazine at a dose of 150 mg/kg BW daily for 3 to	5 days.
☐ Parenteral antimicrobials:	
$\circ~$ Procaine penicillin 22,000 IU/kg IM every 12 h or 44, 000 IU/kg IM every 24 h	for at least 7 d
 Oxytetracycline 10 mg/kg IM every 24h for at least 7 d 	
 Ampicillin trihydrate 10 mg/kg SC or IM every 24 h for at least 7 d 	
 Ceftiofur hydrochloride 2.2 mg/kg SC or IM every 24 h for at least 7 d 	
O Dexamethasone 0.2–0.5 mg/kg IV or IM as a single dose	
Control	
☐ Proper hygienic precautions in calf pens or feeding and drinking places.	
□ Avoidance of rough feed.	