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**Comon Sheep Diseases**

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Common Sheep Diseases

The fight against sheep diseases is essentially a matter of prevention rather than treatment.

You must continually be concerned with diseases as they relate to various features of your set-up. And to understand these relationships, you must know some of the distinguishing characteristics of each disease and be alert to the best means of developing management practices that will aid in preventing the disease.

The material in this fact sheet, is presented, therefore, mainly as a guide in selecting the management, breeding and feeding methods that will help keep diseases at a minimum, and to point out common disease symptoms.

Always remember that if your animals do get sick, the best, quickest, and in the long run, the cheapest way to get an accurate diagnosis is to call a qualified veterinarian.

COCCIDIOSIS
(red diarrhea, bloody scours, or red dysentery)

Cause: This disease is caused by protozoan organisms known as coccidia which live in the cells of the intestinal lining. The infective microorganisms, called oocysts, gain entrance into an animal by being swallowed with feed or water contaminated with the droppings of animals already infected. Coccidiosis is sometimes mistaken for shipping fever.

Symptoms: A severe infection with coccidia produces diarrhea. Often the liquid feces become mixed with blood.

Prevention: Daily removal of manure and soiled bedding and avoiding contamination of feed with manure will help. Eliminate or fence low, wet areas. Prevent overcrowding. It may be helpful to keep lambs that come off the range on cured native hay for 1-2 weeks before starting on feed.

Treatment: Some sulfas may be helpful. Check with your veterinarian.

ENTEROTOXEMIA
(overeating disease, pulpy kidney disease)

Cause: Oovereating disease is caused by a toxin produced in the intestine by an anaerobic bacterium, Clostridium perfringens type D. Heavy grazing in lush pastures favors the development of these bacteria.

Symptoms: The first signs of overeating disease are sudden, violent deaths among the fattest, most vigorous sheep. There are often signs of considerable thrashing about and animals may be found lying in a running position. After the first few deaths, you may notice scouring and possible vomiting among some of the other affected animals.

Prevention and Treatment: In case of sheep and lambs on feed, management and feeding practices play an important part in preventing overeating disease. Vaccination by a veterinarian with Clostridium perfringens Type D bacterin is recommended for feeder lambs and sheep and lambs over 2 months old that are to be fitted for show. Vaccination should be made in the wool free area in the body side of the arm pit (front leg). Allow 10 to 12 days for immunity to develop before vaccinated animals are placed on full feed.

Losses in unvaccinated animals being fed hay and grain can be controlled by careful hand feeding or by grinding hay and grain together. If lambs are to be fattened in the corn field or allowed to run to a self-feeder, vaccination is highly recommended.

In case of lambs under 2 months of age, or for sheep and lambs on lush pasture, the trouble is not as easily prevented. The young lambs can be given a serum but it does not produce lasting immunity. In some cases it has been necessary to remove the flock from the good pasture to one less palatable and productive until vaccination can be made and
immunity to the toxin developed.

Even proper vaccination, however, does not mean sheep and lambs cannot be overfed. It is no license to throw all precautions away. The vaccination is usually effective for a normal feeding period of from 3 to 6 months.

FOOT ROT

Cause: Foot rot is believed to be caused by a soil-borne organism. Muddy, filthy barnyards and water holes, prolonged wet spells, and failure to keep the animal's feet trimmed properly also contribute to the outbreak of the disease.

Symptoms: Lameness is usually the first symptom. In the early stages there is a reddening and swelling of the skin just above the hoof, between the toes, or in the bulb of the heel. Pus and a foul odor are usually evident. Later the joint cavities may be involved, and animals may show fever and depression, lose weight, and even die.

Prevention: Drain muddy pastures. Infected animals should be isolated.

Treatment: Treatment begins by trimming all infected material from the foot. A blacksmith's hoof knife is one of the best tools to use.

Soaking the foot for 1 minute in a solution made by dissolving 2½ pounds of copper sulfate in 1 gallon of water is still effective. Several treatments are needed and cure is not guaranteed. Wooden, earthen, or granite containers must be used.

Mass foot baths by means of a trough through which all animals walk may help prevent trouble but will not cure unless feet are thoroughly trimmed first. A more convenient treatment is made from a mixture of one-third formaldehyde and two-thirds glycerine. Local druggists can mix this material. It can be applied with an oil can and it also is effective only if the infected foot has first been thoroughly trimmed. Antibiotic injections or applications have proven useful treatments in some cases.

LAMB SCOURS (Dysentery)

Cause: Lamb dysentery, a highly fatal disease to young lambs, has no single cause. Some animal breeders believe that Clostridium perfringens, the same bacteria that causes overeating disease, is involved; others feel it is caused by a virus. Poor sanitation and chilling are likely to help bring on the disease. Also, lambs born on the range seem to be less susceptible than those born in a lambing shed.

Symptoms: The disease usually develops in lambs in the first few days after birth; it seldom occurs after the first week. Affected lambs are weak, depressed, and do not care to nurse. A profuse diarrhea (scours) that may be tinged with blood is often present. Usually the temperature rises and the lamb becomes gaunt or bloated. Death usually follows within a few hours.

Prevention: Keep lambs clean, warm, and dry, and then get them out on clean pasture or range as soon as possible.

Treatment: Consult a veterinarian for treatment. The sulfas, acidophilus milk (in 2 ounce doses, repeated two or three times daily), and antibiotics have been used with varying degrees of success.

LISTERIOSIS (Circling disease)

Cause: A highly fatal disease of both lambs and older sheep, it is produced by the bacterium (Listeria monocyctogenes), which invades the brain, causing nervous symptoms. The disease is most common in spring and summer but may occur whenever new sheep are brought in. The danger is that the new sheep may be healthy carriers of the infection; animals in the home flock are thus exposed and may become infected, or the situation may be reversed. The home flock may contain carriers that threaten newly purchased animals.

Symptoms: Affected sheep are sluggish and lag behind others when flock is moved. They may stand off in a corner while the rest of flock feeds; or they may feed restlessly, only partially chewing. Often a sheep will hold his head to one side and move in a circle, always in the same direction. Most of the affected animals will circle this way. When not circling, they may hold their heads against buildings or feedboxes; finally they go down, and are unable to rise. Death usually occurs within 48 to 72 hours, although some animals live as long as a week.

Prevention and Treatment: Promptly isolate sick sheep. Treatment of those affected is of questionable value. Raising all of your replacements, however, is one way to keep from introducing it to the flock.

MASTITIS (Blue Bag)

Cause: Mastitis is a bacterial infection. Contributing causes are bruises, shear cuts, and rough handling.

Symptoms: In acute stages there is a high fever, loss of appetite, stiffness, swollen bluish udder, and sometimes death. Later, in chronic stage, abscess formation in udder is common. Abscesses rupture and heavy scar tissues form, destroying all milk secreting tissue.

Prevention: Maintain strict sanitation in sheds,
corrals, and bed grounds. When additional sheep are purchased, examine udders closely to avoid "buying the disease." Avoid clipping udder while shearing. Remove high door sills or other obstructions which might bruise udders. Remove infected ewes from flock and disinfect the area.

**Treatment:** Treatment must be immediate. Apply hot packs to infected udder, and lance abscesses. Sulfa drugs and antibiotics usually give good results.

**PINKEYE (Infectious Keratitis)**

*Cause:* A nuisance disease caused by bacteria affecting both adult sheep and lambs. It is easily spread by contact and by flies.

*Symptoms:* One or both eyes appear inflamed with a heavy discharge of tear fluid. Ulcers may form in severe cases. If unchecked, blindness may follow. Infected animals lose weight during attack.

*Prevention:* Prevention is questionable because of lack of knowledge as to the specific cause. Avoid placing newly purchased animals with the herd for 3 weeks.

*Treatment:* Segregate affected animals in a dark stall, if possible. Provide good feed and water. Antibiotics and eye pellets are currently effective. Several treatments with these medicines are usually necessary.

**PNEUMONIA**

*Cause:* This is one of the most common sheep diseases. Chilling, overexposure, and fatigue play a big part in bringing it on. Exposure connected with dipping and shearing may be enough to allow it to develop. Healthy sheep may carry pneumonia bacteria or viruses of various kinds in their lungs or other parts of the respiratory tract. However, the disease develops only after the animal becomes "run-down" from poor feeding, parasites, or prolonged exposure.

*Symptoms:* These include fever, labored breathing, and refusal to eat. Later the animal becomes depressed and may have a discharge from the eyes and nose. Sometimes older sheep die without showing any symptoms.

*Prevention:* Because exposure and chilling are so important in causing pneumonia, do everything possible to prevent these conditions. Provide warm, sanitary lambing pens. Do not dip or shear in cold, raw weather unless you have warm housing. Sound parasite control together with proper feeding and management will also do much toward pneumonia prevention.

*Treatment:* Watch your flock constantly for signs of the disease. Call your veterinarian early if symptoms in one or a few sheep look suspicious. Early treatment is quite effective. Sulfonamides and antibiotics, like penicillin, aureomycin, or streptomycin, give best results in most cases.

**PREGNANCY DISEASE (Lambing Paralysis)**

*Cause:* The disease is a metabolic disorder thought to be a disturbance in carbohydrate metabolism.

*Symptoms:* Older ewes carrying twins or triplets are most likely to be affected but younger ewes receiving poor quality roughage may also develop the disease. In early stages, affected ewes are less active than the rest of the flock and walk slowly. Later they weaken, show stiffness and have difficulty getting up. They frequently walk in a circle and stand with their head against a fence or bunk. As trouble progresses, the ewe cannot rise and lies with the head turned around to the side. Other symptoms are rapid breathing, blindness, and grinding of the teeth.

*Prevention:* Prevention lies in removing the cause. Check the flock carefully for condition of all ewes. Increase quality and quantity of roughage as ewes get near lambing. Separate ewes that are not gaining in weight and feed these more liberally.

*Treatment:* If given promptly, treatment may be helpful. Affected ewes should be drenched with a cup of cane molasses twice daily. Diluting molasses with warm water makes it easier to give. Sugar solutions can be injected into the blood stream by a veterinarian to hasten recovery in severe cases. The ewe should be offered choice feeds. After the lambs are born, the ewes usually make complete recovery.

**SORE MOUTH (Contagious ecthyma)**

*Cause:* This is a virus disease affecting primarily the lips of sheep and lambs.

*Symptoms:* It is recognized by the formation of pustules and ulcers and the piling up of thick crusts of scabs on the lips and in the mouth. It formerly was considered chiefly a disease of feeder lambs but each year it is found more and more in the breeding flock, especially in younger lambs. It is here that it does the greatest damage, since the infection will be transferred to the udder and teats of the ewe.

With both the mouth of the lamb and udder of the ewe affected, some lambs may die or be seriously
TETANUS (lock jaw)

Cause: Tetanus is a violent disease caused by an infectious agent widely distributed in soil or manure. Any contaminated wound can bring on tetanus. Puncture wounds are especially dangerous. In sheep, tetanus commonly follows routine operations such as docking, castrating, ear tagging, or shearing. It can also develop from infections of the umbilical cord.

Symptoms: First signs of tetanus in sheep are stiffness of limbs, difficulty in getting up, and walking with a straddling gait. Later the tail and jaw may become rigid and the animal may not be able to open its mouth. Sudden noises may cause spasmodic jerking of muscles. Death usually follows in 3 days to a week.

Prevention and Treatment: Because the germ is always likely to be present, prevention begins with extreme cleanliness in all surgical operations. Sterilize all instruments used in docking, castration, ear-tagging, or shearing before use by placing them in boiling water for 25 minutes. After the operation, turn the animal out on clean grass, or hold in well-bedded pens. Tetanus can also develop after castration or docking with rubber bands. In fact, it has been observed to occur more frequently when this method is used in place of the surgical method.

Treatment for tetanus is seldom satisfactory. Good feed and management appear to lessen the incidence, but no sure preventive is known.

URINARY CALCULI (Gravel Stones)

Cause: The cause is unknown, but high incidences occur when there is (1) high potassium intake, (2) an incorrect calcium-phosphorus ratio, or (3) a high proportion of beet pulp or grain sorghum in the ration.

Symptoms: Frequent attempts to urinate, dribbling, or stoppage of the urine; pain and renal colic are good indications. Usually only males are affected; females are usually able to pass the concretions. The bladder may rupture, with death following. Otherwise, uremic poisoning may set in.

Prevention and Treatment: Good feed and management appear to lessen the incidence, but no sure preventative is known.

Once calculi develops, dietary treatment appears to be of little value. Surgery may save the animal.