

ESTCOURT HOUSE

VETERINARY SURGEONS

J.E.DAVIES MA VetMB BSc Hons MRCVS
P.A.SHEPHERD MA VetMB MRCVS
S.M.CARPENTER BVM&S MRCVS
A.P.MUCKLE BVSc MSc(VetGP) Dip.LHP MRCVS

5, Estcourt Street, DEVIZES.
Wiltshire SN10 1LQ
Tel: (01380) 723687
email: mail@estcourthouse.co.uk

ESTCOURT HOUSE FARMERS' NEWSLETTER – March 11



My apologies for the lack of a newsletter since Christmas. As many of you have probably realised TB testing has been extremely busy over the last few months – which is good! However this has meant I have not had the time to sit down and put some thoughts on paper.

WELCOME

We have welcomed a new face to the practice in the form of James Arding, who some of you have already met. James qualified from Bristol in 2000, and saw practice with us during his time at University. After qualifying he worked in mixed practice in Essex, New Zealand and Australia before returning to these shores to spend more time working with small animals. He has moved down from St. Albans with his wife Penny and their twin daughters. James will be joining the partnership in due course.

SCHMALLENBERG VIRUS

Obviously there has been a lot of information about Schmallenberg virus – so for your information I thought I would provide a summary of the latest known information:

Background Between August and October 2011, outbreaks of disease in adult cattle that included mild to moderate fever, reduced milk yield, loss of appetite, loss of body condition and diarrhoea were reported in both the Netherlands and Germany. Testing for common causes proved negative. From November 2011, abortion and stillbirths associated with foetal abnormalities, affecting mainly sheep but also cattle and goats, were identified in the Netherlands, Germany and Belgium. A new virus was identified in December 2011 as the cause of both conditions. This was named 'Schmallenberg virus' after the German town where the virus was first identified. In early 2012, the first cases were suspected in the south and east of England. In these initial cases, the disease was diagnosed following the testing of deformed lambs. Schmallenberg virus is in the Simbu serogroup of the

Orthobunyavirus group. This group of viruses includes many different viruses which occur in Asia, Africa and Australia, but have not previously been identified in Europe. As this is a newly identified virus there are still aspects of the disease that remain unknown at this point until more research has been done.

Species affected Currently we know the virus will infect and cause disease in sheep, cattle and goats

Transmission Orthobunyaviruses are typically primarily spread by biting insect vectors, such as midges and mosquitoes, although the routes of Schmallenberg virus transmission have not yet been confirmed. The potential for direct transmission (i.e. direct from one animal to another) is therefore, as yet, unknown. If biting insect vectors are the major route of transmission, significant spread is believed unlikely during the winter period when biting insects are usually inactive. It is believed Schmallenberg virus was circulating widely in sheep and cattle in the Netherlands and in a part of western Germany between August and October 2011. The initial introduction of the virus to the UK therefore may have resulted from either wind-blown insect vectors or via imported infected livestock during this period.

Clinical signs In adult cows, cases of acute infection have resulted in diarrhoea, fever, a reduction in milk yield, with a full and rapid recovery over several days. Affected herds had outbreaks of disease lasting two to three weeks. In other species this stage of the disease has not been noted. Clinical signs have not been reported in adult or growing sheep. In newborn animals and fetuses, the disease has been presented as malformations including bent limbs and fixed joints, brain deformities and marked damage to the spinal cord. Some animals are born with a normal outer appearance but have nervous signs such as a 'dummy' presentation or blindness, ataxia, recumbency, an inability to suck and sometimes fits. The foetal deformities vary depending on when infection occurred during pregnancy.

Treatment There is no treatment or vaccine currently available for this disease. As this is a new disease further work is needed to determine what control measures may be appropriate.

Risk to humans There is not thought to be a risk to humans at present, but as ever strict hygiene precautions are advised when dealing with livestock

This is not a notifiable disease, but farmers are asked to contact their veterinary surgeon if they encounter cases of ruminant neonates or fetuses which are stillborn, show malformations or are showing nervous disease. Veterinary surgeons should then contact their AHVLA/SAC laboratory if they suspect infection with the virus.

Information from the VLA website