

# Decision time as bluetongue creeps on

Farmers should plan strategies with their vets, says **Richard Knight**



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Bluetongue Virus serotype 8 (BTV8) is creeping up to northern France. The best calculations are that there is an 80% chance it will occur in southern England in September this year. So what to do?

When the last outbreak of this Orbivirus occurred in 2008, vaccine was available from the May onwards, with large numbers of doses being sold. The fact that we didn't have a major outbreak of disease in that, or the next, year was attributed to the large uptake of vaccine at the time, reducing the ongoing infection of midges. There seems less urgency this time, but no doubt those livestock farmers on the south coast will be starting to feel the heat.

Sheep usually come off much worse than cattle when



affected, with up to 100% of a group affected and between 30-70% of affected animals dying. Disease typically involves the head and neck, with mouth, lip, nasal and eyelid reddening. There is usually a fever and often lameness too, commonly leading to them being down.

Excess salivation, nasal discharge and a blue tongue (through lack of oxygen in the blood) are also commonly present.

Death in sheep often occurs

through secondary bacterial infections and pneumonia. Since other signs can be reproductive, such as infertility and abortion, any strange disease needs to be investigated.

BTV8 is notifiable. This means that the Animal and Plant Health Agency (APHA) must be contacted (this can also be done through a vet) as a legal requirement, as is the case with foot-and-mouth, anthrax and bovine tuberculosis. The insect which introduces infection into an individ-

ual animal is the midge (*Culicoides* spp.). Its control is an important part of any prevention strategy, but is hampered by a current lack of specific claims for particular products – last time Butox Swish, which contains deltamethrin, was indicated for the control of midges. Keeping animals housed during high-risk times of the day for midge activity will be prudent, especially in areas with a high-risk disease forecast.

There are a couple of vaccines on the market now. One is a single dose for sheep from one month of age, with onset of immunity three weeks after vaccination; the other requires two injections three weeks apart and the onset of immunity is 25 days after the second injection.

Both are safe for use during pregnancy and lactation, but neither is licensed for breeding males. This leads to a

quandary with tup sales coming up and individual breeders must have a chat with their vets about their individual flock risk. Most of the risk would appear to be from a transient fever which can be induced by the vaccine and any effect this might have in decreasing sperm production and theoretical subsequent transient infertility.

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