Pakistan Journal of Life and Social Sciences

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www.pjlss.edu.pk



https://doi.org/10.57239/PJLSS-2024-22.2.00289

#### **RESEARCH ARTICLE**

# Clinical and Pathological Studies of Pneumonia in Sheep in Basrah

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ARTICLE INFO	ABSTRACT
Received: March 15, 2024	Study was conducted in Basrah from January till October 2023 depending on clinical cases of respiratory involvement attended to veterinary clinic.
Accepted: May 20, 2024	30 animals were included in this study divided into two groups; infected
	group include 20 animals attended to veterinary clinic during the period of study and control group include 10 apparently healthy animal. All
Keywords	animals included in this study subjected to close clinical examination and
Pasteulla	vital signs were recorded in both infected and control groups. Clinical signs of infected animals were also recorded. Post mortem and
Pasteurelosis	histopathological examination were also done to dead animals. This study
Penumonitis	revealed that; there is significant increase in all vital signs in infected animals compared with control group. The clinical findings in infected
	animals include; nasal discharge (mucoid) yellow-greenish in color thick
*Corresponding Author:	in consistency, coughing with difficult breathing, panful cough with abnormal sounds, raped and shallow breath, congested capillaries and
hassanin.naser@uobasrah.	extremely reddish mucous membrane, inappetence, dullness, sneezing
edu.iq	with head shacking and extend toward down head, loss of weight, lacrimation unilateral or bilateral, recumbency then death occur within 5- 7 days. The post mortem findings include: Enlarged lungs with black- bluish coloration as patches with rounded borders of the lung and multiple consolidation areas. Adhesion between the lungs and chest walls, yellow color fluid in the body cavities, and trachea was enlarged in dimeter. The histopathological examination of dead animals reveals the signs of different type of bronchitis, pneumonia and liver congestion.

#### **INTRODUCTION**

Pneumonia is a diseases of multifactorial causes including infectious and noninfectious agents (Di Pavavid et al., 2017 and Khareeb et al., 2022). Infectious pneumonia is the inflammation of lung tissue caused by several infectious agents such as bacteria, viruses, parasites and mycotic causes (Jiang etal. and Zhu etal., 2021). Pneumonic pasteurellosis is the most common type of pneumonia with high prevalence in ruminants especially in sheep (Dar etal.2012 and Tizard, 1992). Pneumonic pasteurellosis is the oldest type of pneumonia of domestic animals and still remain the major problem (Dhand, 2004). The clinical pictures of pneumonia ranged from mild to severe respiratory distress and sudden death which related to virulence of strain, host immunity state, and concurrent diseases (Daee, et al., 2020 and Dassanayake etal., 2010). The main clinical signs of pneumonic pasteurellosis include fever, yellow-greenish mucoid nasal discharge, coughing, dyspnea with painful coughing, congestion of mucous membrane, sneezing, loss of weight, bilateral or unilateral lacrimation and lateral recumbency and death during 72 hours (Walsh etal., 2016 and Finkbeiner etal., 2009). The main post mortem lesions include Enlarged lungs with black- bluish coloration as patches with rounded borders of the lung and multiple consolidation areas. Sometimes recording of adhesive between the lungs and chest walls (Amaravathi, 2014).

#### **MATERIALS AND METHODS**

Twenty animals suffering from respiratory symptoms attend to our veterinary medicine clinic subjected to complete close clinical examination for clinical and vital signs to contrast with ten apparently healthy animals considered as a control group. Vital and clinical sigs were recorded in both infected and control groups. Post mortem examination was done for 3 dead animals. lung tissue samples about 1 cubic centimeter were directly taken from different lesions by sterile scalpel and fixed with 10% of formalin for histopathological examination. The samples were dehydrated in graded ethanol, clearance by xylene, embedded in paraffin as blocks and sectioning from blocks were cut at 4-5 Mm using rotary microtome, finally the samples stained with hematoxylin and eosin stains (Bancroft etal. 1996). The PCR confirmative diagnostic study will publishing in another article.

#### RESULTS

The clinical manifestation of examined animals includes: Fever (20 cases), there is significant elevated in body temperature and respiratory and pulse rates in disease animals compared with control group (Table: 1). The other clinical findings include: nasal discharge (mucoid) yellow-greenish in color thick in consistency (16 cases), coughing with difficult breath in (15 cases), panful cough with abnormal sounds (12cases), raped and shallow breath (16 cases), congested capillaries and extremely reddish mucous membrane (10 cases), inappetence (20 cases), dullness (17 cases), sneezing with head shacking and extend toward down head (14 cases), loss of weight (8 cases), lacrimation unilateral or bilateral (6 cases), recumbency then death occur within 5-7 days (3 cases).

The post mortem findings are: Enlarged lungs with black- bluish coloration as patches with rounded borders of the lung and multiple consolidation areas. Adhesion between the lungs and chest walls, yellow color fluid in the body cavities, and trachea was enlarged in dimeter.

	H.R	Pulse	Res.
Infected	41.7±0.26	120.7±11.86	98.9±10
Control	39.2±0.2	80.2±7.7	61.33±8.66
P value	P≤ 0.05	P≤ 0.05	P≤ 0.05

Tabl1 (1): The vital signs in infected and control anima	s
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The results of histopathological examination of the sheep lung infected with pasteurelosis reveal many deferent changes include hyperplasia of bronchioles with defuse area of haemorrhage, excessive area of fibrosis lso to collection of inflammatory cells. As in figures (1 and 2).

The pleura was thickening by fibrin layer with present necrotic lesions and noted suppurative bronchopneumonia, (extensive area of necrosis of alveolar space and filled with pus) as in (figure 3). Other changes comprise a picture of focal area of necrosis of alveoli and filled with exudate, Also haemorrhages with inflammatory cells infiltration that represented in (figure 4).While the histopathological examination of liver section from infected animal with pasteurella illustrate congestion of central vein, dilation of sinusoid also to present vacuolation of hepatocyte and area of coagulative necrosis as in figures (6 and 7) and present of fibrosis, haemorrhage area figure (7 and 8).

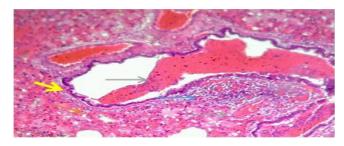
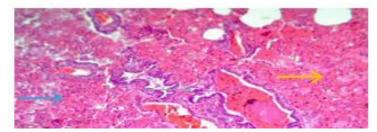


Figure 1. Histopathological section of sheep lung infected with pasteurella, shows hyperplasia of bronchioles ( ) with defuse area of haemorrhage ( ), excessive area of fibrosis ( ) also to collection of inflammatory cells ( ). (H&E X40).



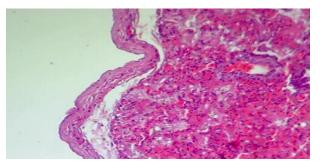


Figure 3 . Histopathological section of sheep lung infected with pasteurella, shows The pleura was thickening by fibrin layer ( ) with present sever necrotic alveoli and filled with exudate ( ) haemorrhages with collection inflammatory cells( ) (H&E X10).

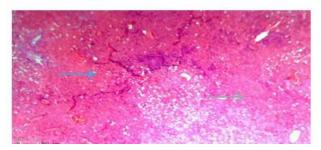
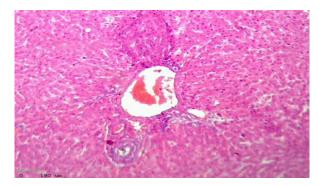


Figure 4. Histopathological section of sheep lung infected with pasteurella, explain focal area of necrosis of alveoli with infiltration of inflametotycells ( ) excessive exudate filled alveolar space ( ). (H&E X40).



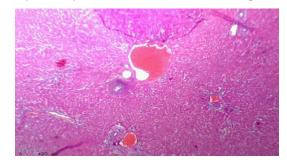


Figure 6 . Histopathological section of sheep liver infected with pasteurella, shows congestion of central vein( ), hyperplasia of bile ducts( ), focal area of coagulative necrosis of hepatocytes.( )H&E X10).

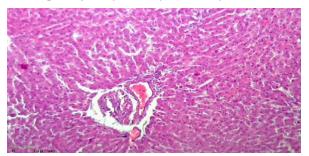


Figure 7 . Histopathological section of sheep liver infected with pasteurella, Shows dilation of sinusoid ( ), congestion of blood vessels surround by inflammatory cells.( ), and defuse area of necrotic hepatocyte with present haemorrhage ( ).(H&E X10).

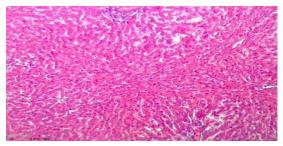


Figure 8. Histopathological section of sheep liver infected with pasteurella, Shows coagulative necrosis of hepatocytes ( ), with aggregation of inflammatory cells ( ), and fibrosis ( ).(H&E X10).

## DISCUSSION

The clinical findings recorded in this study was in agreement with (Tolera etal 2019), who reported depression, with a mucopurulent nasal and ocular (eyes) discharge, exhibit inappetence, weight loss and temperatures rise to 40.4°C to 42°C. This signs may occur do to the bacteremia and immune system reaction. Most cases happen within two weeks after transportation and the development of disease can be rapid with death without showing clinical signs of disease (Tolera et al 2019). The early clinical signs are anorexia, high fever, and frothing, coughing and rapid shallow (respiration) breathing accompanied by more profuse mucopurulent nasal and ocular or eves discharges. In the later stage of infection severe cough predominates where dyspnea with an exhalation grunt (Cozens etal 2019). The results of postmortem examination were in disagreement with (Aiswarva etal 2017) who report the fibrino-purulent bronchopneumonia without the multifocal coagulation hemolytic necrosis, *M. haemolytica* were also characteristics of fibrinous lobar pneumonia. The differences in the post mortem lesions may be due to the differences of strain involved in disease. The results of histopathological examination of the sheep lung infected with pasteurelosis reveal many different changes include hyperplasia of bronchioles with defuse area of haemorrhage, excessive area of fibrosis also to collection of inflammatory cells; these results were in partial agreement with (Hashemnia and Chalechale 2019) who found hyperemia in 7.11% and characterized microscopically by the presence of of large number of red blood corpuscles and siderocytes out of the blood vessels. The gross and histopathological findings were typical of fibrinous pneumonia and in agreement with (Odugbo et al 2006). The bronchitis and bronchiolitis of the infected animals in this study were in partial agreement with (Singh e tal 2017) who found bronchiolitis in 2.22% of cases in sheep and goats.

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