



SOUTH PACIFIC COMMISSION

FOWL CHOLERA



Swollen, discoloured wattles and combs may be seen in sub-acute or chronic cases of fowl cholera.

FOWL CHOLERA or avian pasteurellosis is caused by infection with the bacterium *Pasteurella multocida*. Although it is primarily a disease of chickens, other species of fowls can be affected.

Distribution

The disease is distributed world-wide and has been reported from a number of countries in the region. Pacific Island countries which have reported fowl cholera are primarily those with veterinary diagnostic facilities or access to facilities.

Infection

Infection with fowl cholera is usually seen in older birds and may vary from the per-acute form, which causes sudden deaths in apparently healthy birds

with no other signs, the acute form, where there will be many sick birds and deaths, and the chronic form where the infection is usually localised, often causing painful swelling of the comb or wattles.

Transmission

The disease is largely spread through the contamination of feed or water with the excretions from diseased birds although some spread may be due to birds pecking at the carcasses of those which have died. Rats, insects and wild birds are also known to be responsible for the spread of fowl cholera.

Clinical signs

The disease develops 4–9 days after infection. Birds affected with the acute form may appear listless, stop eating or



Left: *Necrosis (cellular death) on the surface of the liver causes the presence of pale streaks.*

drinking, suffer from diarrhoea and lose weight rapidly.

In layer birds, egg production will fall dramatically and birds appear to have difficulty in moving. In addition to swelling of the comb and wattles, the foot pads and joints may also be swollen.

Diagnosis

Diagnosis of fowl cholera is usually based on the post-mortem signs. In the very acute cases there may be no obvious lesions. However, in the less acute forms, large numbers of very small pinpoint haemorrhages may be seen on the heart, liver, stomach and intestines. The

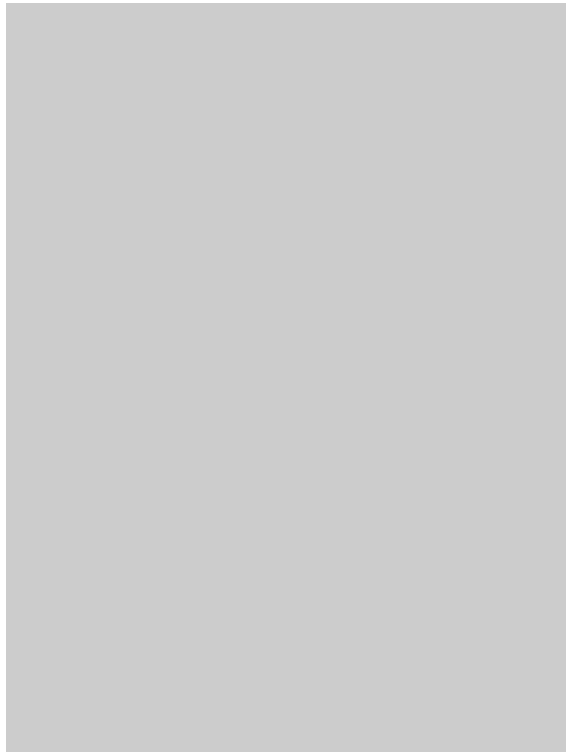
commonest sign on post mortem for diagnosis is the presence of **light-coloured streaks on the surface of the liver**.

In some layer birds, ruptured egg yolks may be found in the abdominal cavity. Diagnosis can be confirmed by examining smears of liver or heart blood which will usually contain the organism.

Prevention

Good hygiene and sanitation will largely prevent fowl cholera. Feeding and drinking vessels should be cleaned regularly and the birds kept on well-drained land or dry floors. Any dead birds should be removed to prevent

Right: *Presence of haemorrhages on the surface of the lungs.*



pecking or attack by rats. To eradicate the disease it is necessary to remove all the birds, fully clean and disinfect the area and destroy all vermin.

Control

Vaccines are available which can provide some protection. However, as outbreaks are usually caused by bad hygiene, vaccination should not be considered the answer for bad management or neglect.

Treatment

In very acute cases treatment is useless. However, in the less acute and more chronic cases, tetracyclines can be given in the food, water or by injection to all species of birds. Due to the high build-up of the bacteria in the environment, it is usually necessary to continue treatment for long periods.

This leaflet was prepared by Peter Saville, Animal Health Adviser, South Pacific Commission, Suva, Fiji, from whom further information can be obtained. Peter Walton, Information Specialist, Pacific Regional Agricultural Programme, assisted with layout and production of this leaflet. The photographs were provided by Solway Animal Health, Inc., 1201 Northland Drive, Mendota Heights, MN 55120-1149, USA.

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