## Staphylococcic Dermatitis of Sheep

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Diseases of sheep in the United States have generally received less attention and have been the subject of fewer reports than have other classes of livestock. This may be partially explained by the heretofore low value of individual animals and the failure of research workers to be attracted to those sections of the country where large numbers of sheep are available for study. Furthermore, the economic worth of the individual animal also accounts for the fact that workers have often failed in the past to report on conditions involving only one or a few sheep in a flock of several thousand. With the exception of ectoparasitic infection, this is especially true of skin diseases. However, the present-day economy is exerting a profound effect on the sheep industry, and this will in turn be reflected in a revised attitude of ranchers and veterinarians toward afflictions involving a small percentage of the flock.

The authors do not presume the reported condition to be rare but, on the contrary, suspect that it may have occurred many times in the large sheep-raising areas. However, a survey of the literature available to us fails to reveal an appropriate report.

Staphylococcic dermatitis in range sheep is described. Considering the density of the fleece of most breeds of sheep, it seems improbable that the infection could spread to more than a few animals in a flock. Head abrasions resulting from ram fights would appear to offer the greatest opportunity for natural inoculation.

Case Report.—A producer of cross-bred lambs presented 2 mature, registered Suffolk rams which were afflicted with well-advanced skin lesions at the poll, withers, back, and rump. The ears were also affected, but were merely dotted with small lesions. The fleeces were denuded in areas as large as 15 cm. in diameter. Even in some areas where the fleece appeared from a distance to be intact, the skin surface was

covered by a hardened layer of serum; moreover, in these areas the fleece and crust could easily be pulled free, leaving a reddened, dry, rough dermis that was the pitted mirror image of the removed crust. The skin surface at the denuded areas contained numerous wafer-thin scales, about 6 mm. in diameter. Both rams evidenced pruritis by rubbing against the sides of the stall and by scratching with the hind feet.

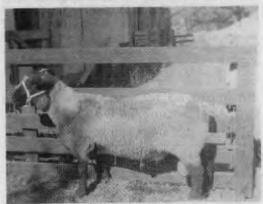


Fig. 1-Staphylococcic dermatitis in a sheep.

The smaller of the 2 animals was somewhat emaciated. Foot lice were present on both rams.

The owner first noticed the broken fleece on the smaller ram almost two months prior to our examination. Two weeks later, the other ram appeared to be affected (see fig. 1). No further cases appeared in the breeding flock of 100 Suffolk rams, nor in the 4,500 Rambouillet ewes to which they were bred.

Parasitic infection was ruled out by clinical and microscopic examination, and inoculation of mycological mediums resulted in no growth of pathogenic fungi. Inoculation of blood-agar plates yielded pure cultures of Staphylococcus albus (species identification in accord with Bergey's Manual<sup>1</sup>). Because this organism is a common skin contaminant, the isolation procedure was Sterile swabs were carefully repeated. probed into the pits described above, then streaked onto blood-agar plates. Results were consistent. In only a couple plates did other organisms appear. These were Escherichia coli and molds.

Two lambs, Corriedale and Rambouillet,

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<sup>&#</sup>x27;Breed, Robert S., Murray, E. G. D., and Hitchens, A. Parker: Bergey's Manual of Determinative Bacteriology. 6th ed. The Williams & Wilkins Company, Baltimore, Md., 1948.

respectively, were inoculated by pin-pricking skin areas which had been swabbed with a suspension of the suspected organism. By the eighth day, there had developed at the inoculation sites typical lesions from which pure cultures of *Staph. albus* were readily obtained. These lesions seemed to have no tendency to spread beyond the general area of inoculation, however, even when the fleeces were kept moist with water for one week. Healing occurred spontaneously in about two and a half months.

The emaciated ram died three and a half weeks after arrival at the laboratory, while the other had apparently recovered at the end of two months.

## An Improved Method of Packing the Anal Sacs of the Dog Prior to Extirpation

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Many times complete surgical removal of the anal sacs of the dog is difficult because of the inability to produce a satisfactory line of demarcation between the sac and the surrounding perirectal tissue.

Theobold<sup>1</sup> has described a method of packing the anal sacs with cotton warp as an aid in outlining the sac.



Fig. I-Anal sacs as they appear following removal.

The injection of rapid-drying plaster of Paris makes a most satisfactory means of

outlining the anal sac. This technique is carried out as follows: Rapid-drying plaster of Paris, such as that which is incorporated in plaster of Paris bandages, is mixed with water to form a paste of such consistency that it can be injected through an ordinary

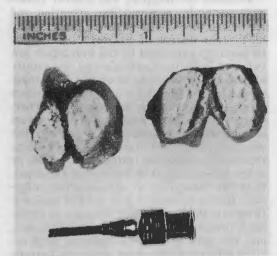


Fig. 2 (Above)—Opened anal sacs showing the hardened plaster of Paris; (below) the blunt needle used for injecting the plaster of Paris.

glass syringe and a 15-gauge needle which has been ground down to  $\frac{3}{4}$  in. in length with a rounded end. With the dog under complete anesthesia, the blunt needle is inserted into the duct of the anal sac and the plaster of Paris injected until the sac is distended, as evidenced by the oozing out of plaster of Paris around the needle. This usually requires 3 to 5 cc. of the mixture. It is sometimes necessary to hold the duct closed for a short time with a pair of forceps to prevent escape of the injected material. The syringe should be washed out immediately upon completion of the injection.

The plaster of Paris hardens in five to ten minutes. The distended sac is then grasped between the finger and thumb and an incision made over the sac. Following the initial skin incision, the outline of the sac is readily seen and may be easily dissected out with a pair of scissors.

This method presents the following advantages: No special instruments are required to pack the sac; the process of injection is more rapid and simpler than packing the sac with cotton warp; and in case of accidental cutting of the sac wall during removal, no packing material escapes

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<sup>&</sup>lt;sup>1</sup>Theobold, A. R.: Surgery of the Anal Sacs. North Am. Vet., 23, (1942):44-46.

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