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Treatment

Infected animals may benefit from supportive therapy including antibiotics for secondary infections when present.

Anti-inflammatory products, such as corticosteroids and NSAIDs, are contraindicated because both predispose the digestive tract to erosions and ulcers.

Prevention

Effective control centres around four key steps:

- Improving herd immunity through vaccination/immunisation.
- Identification and removal of persistently infected animals from the herd.
- Screening new incoming stock for persistent infection before allowing them into the herd.
- Implementing biosecurity measures to prevent foetal exposure to the bovine viral diarrhoea virus.

Vaccination faces two important challenges. Firstly, the broad antigenic diversity of the BVD virus makes it difficult to produce a vaccine that is effective against all the potential viruses that could exist over a period of time. Secondly, the massive amounts of virus shed from persistently infected animals may result in infection in immunised animals.

There is a choice between modified live and killed vaccines. The pros and cons are as follows:

	Modified live vaccines	Killed vaccines
Disadvantages	<p>Potential transient immunosuppression.</p> <p>Potentially unsafe for use in pregnant animals.</p> <p>Colostrum derived antibodies may block immune response in calves.</p>	<p>Primarily activate a humoral response.</p> <p>Require more frequent administration.</p> <p>Shorter duration of immunity.</p> <p>Variable foetal protection.</p>
Advantages	<p>Activation of cellular humoral immunity.</p> <p>Long duration of immunity.</p> <p>Good, although incomplete foetal protection.</p> <p>Potential for transient ovarian infection and fertility impairment.</p> <p>May induce acute disease in persistently infected animals.</p>	<p>Not immunosuppressive.</p> <p>No risk of ovarian or foetal infection.</p>

Mervue Laboratories

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Schaumann

Vettec

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