Digital dermatitis of the accessory digits of dairy cows

Celso A. Rodrigues2*, Maria C.R. Luvizotto2, Ana Liz G. Alves3, Piero H.M. Teodoro3 and Elisa A. Gregório4

ABSTRACT.- Rodrigues C.A., Luvizoto M.C.R., Alves A.L.G., Teodoro P.H.M. & Gregório E.A. 2010. Digital dermatitis of the accessory digits of dairy cows. Pesquisa Veterinária Brasileira 30(3):246-248. Departamento de Clínica, Cirurgia e Reprodução Animal, Curso de Medicina Veterinária, Universidade Estadual Paulista, Campus de Araçatuba, Rua Clovis Pestana 793, Araçatuba, SP 16050-680, Brazil. E-mail: celrodri@fmva.unesp.br

This report characterizes the digital dermatitis (DD) lesions in the accessory digits of dairy cows and presents data on the applied therapy. Fifteen Holstein cattle with DD affecting the accessory digits of the hindlimbs from four dairy farms with previous history of DD were evaluated. Lesions were excised, the wounds were sutured, and a topical application of oxytetracycline powder covered by bandaging was associated with a single parenteral administration of long acting oxytetracycline IM (20mg/kg). Tissue samples were obtained for histopathology and transmission electronic microscopy (TEM). Lesions from all the animals were recuperated 15 days after surgical procedure. Overall, most DD lesions were papillomatous epidermal projections or wartlike verrucous lesions. Histopathologically, samples revealed hyperplasia of epidermis with hyperkeratosis, several mitoses in the stratum basale and elongated rete ridges in the superficial and middle dermis. TEM revealed long, thin spirochete-like bacteria. Morphologic features of lesions and its response to therapy were comparable to those described for DD.

INDEX TERMS: Dairy cattle, accessory digit, dewclaws, digital dermatitis, papillomatosis, spirochetes.

INTRODUCTION

Digital dermatitis (DD) is an apparently contagious, painful, circumscribed dermatitis of the feet of cattle. Early lesions are typically red, flat and ulcerative whereas older lesions are raised proliferative with wartlike papillary projections.
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DD lesions usually occur on the hind feet at or above the plantar interdigital ridge adjacent to the bulbs of the heels (Blowey & Sharp 1988, Döpfer et al. 1997, Read & Walker 1998, Berry 2001), but DD lesions have not been reported to occur above the level of the dewclaws (Berry 2001). DD has been referred to as papillomatous digital dermatitis (PDD), verrucous dermatitis, hairy footwarts and by other names (Read & Walker 1998). While spirochetes Treponema sp. are the predominant organisms in DD lesions (Walker et al. 1995, Döpfer et al. 1997, Cruz et al. 2005), polymicrobial communities and a number of management and environmental factors have been associated with a multifactorial etiology for DD (Döpfer et al. 1997, Rodriguez-Lainz et al. 1996, 1999, Edwards et al. 2003, Cruz et al. 2001, 2005). Most DD affected cows may respond favorably to therapy (washing of the lesions preceding topical applications of antibiotics and/or desinfectants preparations followed by bandaging). Topical spray preparations, parenteral antibiotics, and surgical excision, among other methods have all been described as effective methods (Blowey & Sharp 1988, Read & Walker 1998). However, some degree of recurrence of the DD lesions has also been frequently reported. The condition has been reported as a major cause of lameness in numerous countries (Blowey & Sharp 1988, Read & Walker 1998, Argaez-Rodriguez et al. 1997, Rodriguez-Lainz et al. 1999, Berry 2001). In Brazil, preliminary studies already indicated the occurrence of DD since the mid-1990s (Borges et al. 1992, Molina et al. 1999); however, DD lesions were later studied by Cruz et al. (2001, 2005). This communication describes DD lesions affecting an unusual site: the accessory digits of dairy cows, as well as present results on the treatment of the condition.

MATERIALS AND METHODS

Animals used in this study were from four dairy farms with previous history of DD occurrence. Data were collected and animals were treated during farm visits by authors. This study was performed in compliance with institutional guidelines for research on animals. Circular incisions through the skin edges of the lesions were performed and the accessory digits were amputated. The wounds were sutured following topical application of oxytetracycline powder and bandaging. Finally, each animal received a single injection of oxytetracycline IM (20mg/kg) long acting. Tissue samples from all lesions excised were formalin fixed, paraffin embedded, and routinely processed for histology. Ultrastructural analysis was performed on sections from all lesions sampled. The sections were fixed in buffered phosphate (pH 7.3) at 2.5% glutaraldehyde solution for three hours and post fixed 1% osmic acid for two hours. The sections were dehydrated in graded series of ethanol and embedded in Araldite M. Ultrathin sections were cut on a ultramicrotome5, stained with uranyl acetate saturated solution and Reynold’s lead acetate and examined with a transmission electron microscope.

RESULTS

Fifteen Holsteins, male and female, with different ages and affected with DD on the accessories digits were used in this study. In fourteen animals, lesions were restricted to one affected. Animals were observed for healing 15 days after surgical procedures. Most of DD lesions had papillomatous appearance or were of wartlike verrucous form (Fig.1). The histopathological findings were constant in samples from all animals and included hyperplasia of epidermis with hyperkeratosis, several mitoses in the stratum basale and elongated rete ridges in the superficial and middle dermis. Superficial epidermal necrosis was observed with diffuse infiltrate of polymorphonuclear and mononuclear cells. These findings were also observed in the dermis. The TEM found long, thin spirochete-like organisms with a coat of fibrils in association with the cytoplasmic membrane (Fig.2A-B). During the follow-up period of one year, no recurrence of the proliferative lesions was observed.

DISCUSSION

Gross, microscopic, and ultrastructural findings observed in those DD lesions affecting the accessory digits of dairy cattle were comparable to those described for DD or PDD (Blowey & Sharp 1988, Grund et al. 1995, Read & Walker 1998). Although the lesions studied here were of unknown age, their predominant features of severely proliferative

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5 LKB Instruments Ltd, Addington Road 232, South Croydon, Surrey CR2 8YDI, London, UK.
changes may be associated with advanced processes (Thompson 1984). While a number of topical preparations/approaches have been described to treat DD lesions (Blowey & Sharp 1988, Read & Walker 1998), without excision such proliferative lesions would probably not cure totally with topical antibiotic/disinfectants preparations. Surgical excision associated with topical and parenteral administration of oxytetracycline was highly effective to treat the DD lesions in accessory digits. Similar results have already been reported (Read & Walker 1998).

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REFERENCES


