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Sheep Practice

As seen by a western veterinarian

E. T. Baker, D.V.M.*

With nearly 50,000,000 sheep in this country, and over a million head in the various middle western states, this phase of practice offers many opportunities to the veterinarian in general country work.

While the fees are not large in treating only several sheep or lambs, it is a business getter, and regular fees can be charged for flock treatments.

I have always had a tender spot in my heart for sheep work, as my first check for over a thousand dollars came from a big wool grower, and I have been doing his work ever since.

Kinds of Work

One should keep in mind there are three distinct types of sheep growing, and they are:

1. The small farm flock.
2. The middle western lamb feeder.
3. The western range wool grower.

Each of these has its own peculiar problems, and it should be the aim of the practitioner to become familiar with the troubles in his territory.

The field is so vast that no one man can become an expert in all the phases of sheep practice, hence we find many veterinarians devoting much time to ovine pathology in their particular territories.

To mention a few, Dr. L. D. Frederick, of Swift & Company, has had much experience with lamb feeder troubles. Dr. P. T. Engard, of Marysville, Ohio, has had much small farm flock work. Dr. Hadleigh Marsh, of Bozeman, Montana, with the laboratory troubles of western range sheep, and Dr. W. H. Lytle, of Salem, Oregon, with range diseases. These are only a few who know a sheep when they see it, and it is too bad there are not many more.

As a general practitioner is not supposed to know everything about all things, or to be an all-round expert on every phase of practice, he can boil down some useful hints about sheep work in a very short time.

Classification

As I never believed in complicated classifications, I classified my sheep troubles into the following divisions:

1. Non-contagious ailments, such as bloat, founder, difficult lambing, eclampsia, pregnancy disease, indigestion, etc.
2. Infectious diseases, including footrot, lamb dysentery, navel-ill, tetanus, mixed infection and the like.
3. Parasitic infestations, divided into two classes: External, such as ticks, scab mites, screw-worms, maggots or nose-flies; internal, including the lung worm, the stomach worm, the liver fluke, coccidiosis, tape worm, etc.
4. Poisoning, usually of a vegetable nature. The season of the year and prevalence of the plant gives many a clue, and I have read my old reliable "Pammel" more than once. Thus, we have death camas in the early spring. I have seen 2,000 sheep dead out of 9,000 unloaded in a national forest because of this plant. Later on, comes choke cherry and ergot or smut. In wet autumns mildew or moulds cause havoc, and in winter, the dried lupine seeds may cause trouble.
5. Miscellaneous, such as animal bites, auto injuries, burns, law suits, and the like.

**Helps to Diagnosis**

The season of the year and the kind of weather may help us form a correct diagnosis of an obscure ailment, as well as the age, sex, breed and kind of care given.

One can learn much from the owner or helpers by asking questions and looking wise. This shows how simple sheep ailments really are if you can figure them out, by talking to the owner or some one else around the farm. For example, Bill Jones, who lives down by the Evergreen school house, begins losing a few ewes. He calls me down to his place for the pur-

pose of curing the sick and preventing further invasion of the disease.

Now, without a rough outline of what may affect sheep, I might be as helpless as a young widow near an army camp. When I arrive at the Jones' farm all I find is a couple of dead blackfaces stretched out along a fence in a bunch of wild rose bushes. About a dozen other ewes are standing around with their heads almost to the ground.

“What'sa matter, Doc?” is the anxious query that greets me almost before I can step out of the car.

My somewhat feeble brain tries to send impulses along my nervous system, but, due to technical difficulties, there is nothing but mental static, and plenty of that.

You see, it is summer, and a number of ailments may be involved, so go slow. You look around and admire the sheep, and Bill answers, proudly:

“Them is the best Hamps in this hull country.”

He tells me all about them, and in a short time, Mrs. Jones comes out to put in her fifteen cents' worth.

“I didn’t want Bill to bring that buck home from the stock yards,” she says.

To keep Bill’s friendship, I say nothing but look wise. To rush in like a fool where angels fear to tread has never been one of my failings.

But her words give me an inkling of what the real trouble may be, and pretty soon we are giving all the survivors some mixed infection bacterin, and serum to the sick ones.

**Practical Knowledge**

Doctoring sheep is much like handling dairy cattle. The troubles are much the same, and sheep are medicated very easily if one keeps a few fundamental facts in mind.

I seldom drench a sheep, and one never wants to set it on its rump to do this, or the hired man may be digging a hole large enough to accommodate the late deceased patient.

Use a short hypo needle, usually of an 18 gauge, and give the injection in the axillary space. I have given 100 cc. of gluconate in each side to a ewe down with pregnancy disease.

For oral medication, I prefer electuaries, or the medicine mixed in salt.

**Foot Troubles**

For foot troubles, my preference is for oily antiseptic solutions. First trim the foot thoroughly, and then drive the affected animals through a narrow trough with lath nailed on the bottom to prevent slipping. A little chopped hay or straw in the trough prevents the animal from holding back.

For lambs, my favorite vehicle is elixir lactated pepsin. For various types of colds, snuffles, and diarrhea, not of an infectious nature, a change of food for the ewes, and a solution made from the common poultry tablets will do no harm.

*Summer, 1945*
Sterile camphorated oil with guaiacol and gluconate and dextrose is often helpful. Parasites and various types of dysentery keep the practitioner in the corn belt guessing, but by a little study, and the use of sulfa drugs and phenothiazine, much progress is being made in handling these. Learn how to identify the various breeds kept in your community, and keep a few books on sheep husbandry for handy reference.

4-H club members and FFA are raising many lambs, and they ask a lot of questions. Can you answer them?

Bacterial ultraviolet lamps now make it possible to preserve perishable foods safely under humidity conditions so high that the edibles otherwise would be fertile fields for spoilage and mold, a refrigeration research specialist declared recently. This electronic guardian in storage spaces is the Sterilamp ultraviolet tube, a device which resembles a slenderized fluorescent lamp and kills bacteria and mold either on food surfaces or afloat in the air.

Tests conducted by Drs. I. Newton, Louise E. Poull, and Emma L. Samuel brought to light the fact that undernourished children under the age of four showed an average improvement in IQ ranking of from 10-18 points (Stanford-Binet test) with normal nutritional therapy. However, in age groups above four, no significant rise occurred in the average IQ, suggesting irreversible mental maldevelopment due to malnutrition. Normal children's IQ doesn't rise significantly after four years of age, so it is important that a child develop properly during the first four years.

If riboflavin or vitamin B₂ is lacking, growth is stunted, and a form of nutritional paralysis results, accompanied by a drying and cracking of the skin on the feet and at the corners of the mouth.

Prepaid veterinary care on yearly and monthly basis

Veterinary care for dogs—and perhaps other household pets—on a prepaid monthly or yearly fee basis, is foreseen by the Gaines Dog Research Center, New York City. The Center has been studying prepaid medical care plans for humans, and finds certain phases of these plans readily adaptable to the dog field.

Because the emphasis is on prevention rather than cure, prepaid veterinary care would tend not only to raise the level of dog health but step up the canine life-span as well, says the Center. This becomes increasingly important as more and more valuable pedigreed dogs come into American homes.

The average dog owner is all too frequently inclined to rely on home remedies in dealing with his dog's ailments, according to the Center. The result is that in many cases the veterinarian does not get an opportunity to examine the animal until after a serious situation has developed or it is already too late for him to be able to do much about it. This is neither fair to the dog nor to the veterinarian. Under a prepaid veterinary care plan, there would be every incentive for the dog-owner to take his pet to the veterinarian for periodic examinations and before there is even the first sign of trouble, and every incentive for the veterinarian to keep the dog in optimum health. Such an arrangement, if entered upon by a great many dog owners, could also be a great step toward the elimination of rabies, that troublesome disease that is the first concern of every true dog-lover.

The Center believes that prepaid veterinary care should be an entirely voluntary arrangement and one that should be worked out directly between dog-owner and veterinarian. The Veterinary Journal (London) is telling the British people that the farmers of Great Britain have done a remarkable job, considering the way the government has left them to sink or swim during times of peace.

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