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# Diagnostic, Hematological and Therapeutic Studies on Theileriasis in Cattle in Babylon

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Abstract : The target of this study is to evaluate hematological changes in theilaria in cattle and to evaluate the efficacy of some drugs in treatment it.24 cows divided in to four group, first is control ,second is infected showed clinical signs varied from rise of body temperature, nasal and ocular discharge, corneal opacity, diarrhea, pale mucous membranes, associated with enlargement of lymph nodes in some cases, third is treated with butalax and fourth with oxytetracycline and butalex. The obtained results showed a significant (P < 0.05) decrease in haemoglobin, packed cell volume and white blood cells counts compared to the control group... The hematological parameter showed the Hypochromic macrocytic anemia with significant decreases Hb(6.4833±0.9152) PCV(23.666±2.7325)%, in g/l, MCHC  $(25.4000 \pm 1.5231)\%$ , RBCC(3.7333±0.80911)10/mm, WBCC(5.5833±0.60470)10/mm, neutrophils (20.3333±1.63299)% while recorded a significant increases in the lymphocytes (77.4833±4.01020)% MCH(10.8333±1.47196) and MCV(60.333±3.0767)fl Various formulations have been used for the treatment of theileriosis. Among these, Buparavaquone has been considered as the drug of choic in case acute and oxytetracycline and Buparavaquone in case chronic.

Key words: hematological, cattle, oxytetracycline, butalex.

## Introduction

Tropical theileriosis is one of the most prevalent and economically important fatal diseases of cattle in  $Iraq^{1,2}$  and it consider atick-bornedisease caused by *Theileria annulata* and transmitted by ticks from genius *Hyalommaspp*<sup>1</sup>*T. annulata* is pathogenic and causes tropical theileriosis with high morbidity and mortality in cattle. The disease threatens an estimated 250 million cattle and acts as a major constraint on livestock production and improvement in many developing countries. *T. annulata* is more widely distributed in many areas of the world, extending from southern Europe to southern Asia<sup>3</sup>

The clinical signs in the infected animals were fever pyrexia enlargement of superficial lymph nodes, nasal and ocular discharges, salivation, anemia, respiratory distress and eye lesions<sup>4</sup>.Diagnosis of theileriosis is mainly based on clinical signs of the infected animals and confirmed by microscopic examination of Giemsa stained thin blood and lymph node smears. Antitheilerial drug as buparvaquone has been used effectively in the treatment of tropical theileriasis in the field<sup>5</sup>There is no safe and efficacious vaccine against tropical theileriosis in Egypt and control of the disease is mainly based on the chemotherapy and tick control<sup>4</sup>-Butalex

(Buparvaquone) can be used in the treatment of recently infected animals with Theileria annulata in single dose of 2.5 mg/kg body weight intramuscular with efficacy varied from  $88.7\%^{6}$  (to  $100\%^{7}$ 

### Materials and method

#### **Experimental Design:**

24 cow which divided into four equal groups,1st group healthy cow as control, 2ndgroup cow suffering from theilerosis and 3nd group that give drugbutalex and fourth treated with oxytetracycline and butalex. Clinical examination body temperature, rate of respiration, Two blood samples were taken from each animal by jugular vein.

Microscopic examination: Methanol used for 1 min for fixation of blood smears and Giemsa diluted in 5 % buffer solution used for staining for 30 minutes. Then blood smears were examined at 1000x magnification(8).

Blood sample was collected from ear vein, and used for marking blood film. Another a blood sample was collected by vein puncture of the jugular vein 5 ml EDTA tube and 5 ml without EDTA (gel tubes).

#### Haematological Examination

Haematological examination was done according to (9), including red blood cells count (RBCC) and white blood cells count (WBCC), Hemoglobin Concentration (Hb), Packed Cell Volume (PCV), Differential White Blood Cells Count (DWBCC), Mean Corpuscular Volume (MCV), Mean Corpuscular Hemoglobin (MCH) and Mean Corpuscular Hemoglobin Concentration (MCHC).

#### Statistical analysis

In order to determine the statistical significances among different variables SPSS program (Statistical program for social sciences) .All hematological test values were expressed as mean and stander error of mean and P<0.05 was considered as statistically significant.

#### The result and discussion

Cattle infected with theilerosis showed enlargement of the superficial lymphnodes beside anorexia, congested mucous membranes anemia. Clinical observation of the cattle infected with thelaria species were in agreement with the findings of other studies<sup>9,10</sup> who stated that the main clinical signs in buffaloes infected with Theileria were pyrexia (40.5–41.5°C),slight nasal discharges, enlargement of superficial lymph nodes, salivation, decreased milk yield, and respiratory distress. Anorexia couldbe due to persistent fever; furthermore the enlargement of superficial lymph nodes may be due to hyperplasia oflymph nodes that occurs in early stages of disease. Clinical signs of weakness, bilateral nasal discharge, fever, pale mucous membrane and increased respiration rate were also observed during this study. These clinical findings were also observed in crossbred calves and Friesian cattle by<sup>12,13</sup>. The results of the hematological investigation in cattle suffering from thelariosis revealed significant reduction in erythrocytic count, haemoglobin content, packed cell volume %.intheileriosis there, increase in MCV and decrease in MCHC table(1).

#### Table (1):effected of theileriosis on some hematological parameters:

Hematological parameters	Control animals	Infected animals
RBC	7.3000±0.6356	3.7333±0.80911**
WBC	8.9167±0.84479	5.5833±0.60470**
NEU	26.8333±1.47196	20.3333±1.63299**
LYM	63.1667±1.47196	77.4833±4.01020**
MCHC	35.1667±1.9407	25.4000±1.5231**
MCH	16.6667±1.21106	10.8333±1.47196**
MCV	50.1667±2.3166	60.333±3.0767**
PCV	36.1667±2.786	23.666±2.7325**
HB	12.766±1.233	6.4833±0.9152**

These results were identical to that recorded formerly [14] in cattle. Also,.[15] mentioned that protozoanintra-erythrocytic parasites inducedlyses of the infected RBC, which resulting in severe clinical symptoms, such as anemia, fever, and hematuria.theileriosis induced general anemiawith fall in total erythrocytic count, packed cell volume% and hemoglobincontent<sup>16,17</sup>. Our observations were in accordance with those documented previously<sup>12,18,19</sup> stated that Theileria inducesignificant decrease in packed cellvolume, total erythrocytic count and hemoglobin content. Besides, theileriain calves induced macrocytichypochromic anaemia<sup>20</sup>. This mightbe attributed to the toxic metabolites of theileria species which have harmful effect on bone marrow and interfere with the process of erythropoiesis<sup>21</sup>. In the present study, it has been shown that bovine theileriosis evoked leukopenia, neturopenia and eosinopenia accompanied withlymphocytosis, monocytosis and basophilia compared to that of control group. Our results of treatment with-1-buparvaquue are in accordance with the finding of.<sup>22</sup>Who showed 93% curative rate of buparvaquue in tropical theileriosis. Likewise Zahid *et al*<sup>23</sup> showed 100% curative rate and 81.73 % recovery rate showed by Qayyum *et al*.<sup>24</sup>the results revealed that buparvaquone (Butalex) was effective in treating cases suffering from acute theileriasis. However, oxytetracycline and Butalex were effective in treating cases with chronic theileriasis table (2).

Hematological parameters	Treatment with Butalex and oxytetracycline	Treatment with Butalex
RBC	7.6500±0.45935	6.6833±0.52694
WBC	9.0000±0.76420	7.6000±0.4427
NEU	27.8333±1.47196	28.5000±1.04881
LYM	63.5000±1.3784	61.1667±1.1690
MCHC	36.666±1.63299	33.666±1.3662
МСН	17.6667±1.2110	15.5000±1.0488
MCV	51.333±1.7511	52.2917±5.3930
PCV	34.667±1.7511	31.1667±1.9407
HB	13.1500±0.8757	11.450±0.6024

Table(2): Treatment of the laria infection	with both used drugs
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Low efficacy of buparvaquone in the treated infected cattle may be attributed to a failure to control the respiratory lesion, possibly due to damage or bacterial infection to the lungs. Similar results were reportedby.<sup>25</sup>

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