



Mastitis

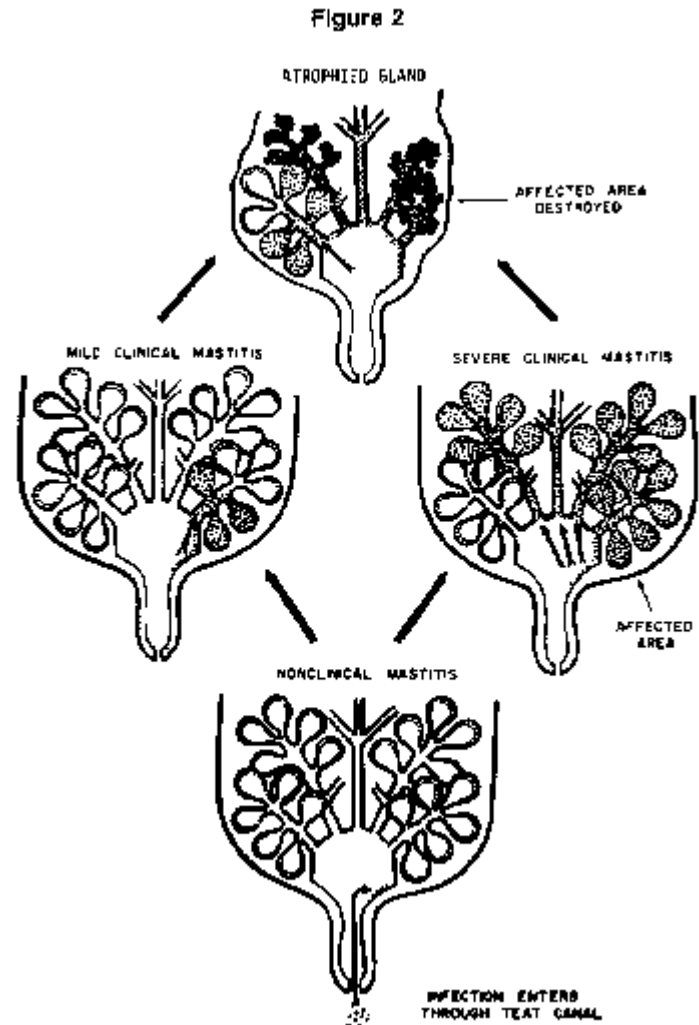


- **Inflammation of the mammary gland**
 - Almost always from intramammary infection
 - Bacterial or mycotic infection can cause milk secreting cells to dysfunction
- **Decreased milk production can last through one or more lactations**
- **Most cases are mild or subclinical infections**
- **More severe cases can lead to agalactia, systemic infection, or death**



Mastitis

- **Normal mammary gland has somatic cells for defense**
 - In mastitis, increase numbers of WBCs respond to infection and can be found in abnormal milk
- **Inflammation of mammary cells lead to increase in blood proteins and enzymes in milk and decrease in normal proteins**
- **Types of Infection**
 - Subclinical-Infection with no gross abnormalities of milk or gland





Mastitis

- **Types of infection**

- Clinical-Infection with grossly abnormal milk with gland inflammation or systemic illness
 - **Mild-Overall healthy animal with abnormal milk**
 - **Moderate-Abnormal milk and gland inflammation but no systemic illness**
 - **Severe-Milk or gland abnormalities with systemic illness**
 - **Gangrenous mastitis caused by Gram –'s, S. aureus, or Clostridium perfringens**

- **Causative agents**

- Any bacterial or mycotic agent could infect
- Most common agents can be classified by habitat

Contagious	Environmental
Streptococcus agalactiae	Streptococcus dysgalactiae
Staphylococcus aureus	Streptococcus uberis
Mycoplasma bovis	Coliforms (E. coli, Klebsiella, etc.)





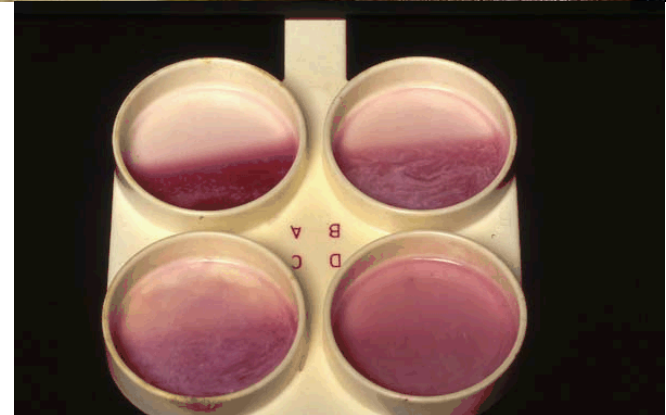
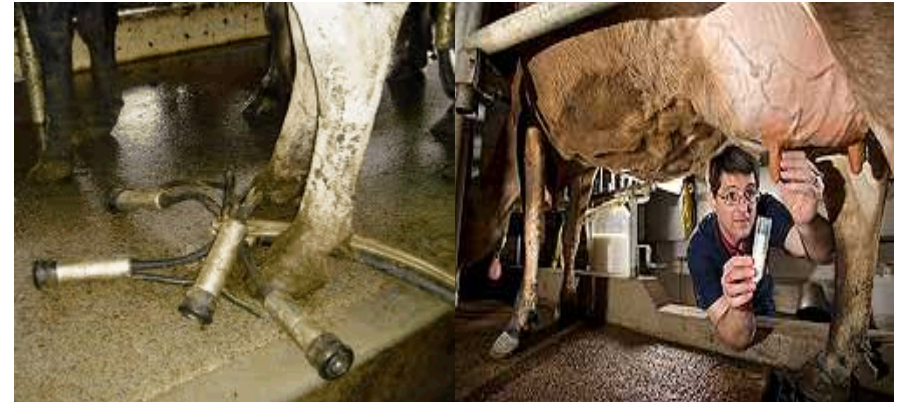
Mastitis

- **Transmission**

- Contagious mastitis primarily spread from cow to cow during milking
 - Chief reservoir is infected udders
 - Contaminate machinery, hands, towels, other objects
- Environmental mastitis results from large populations of pathogens on the teat ends
 - Often results in clinical disease
 - Can be self limiting or chronic

- **Diagnosis**

- Culture of organism can help with persistent cases but won't help identify known environmental pathogens
- California Mastitis Test

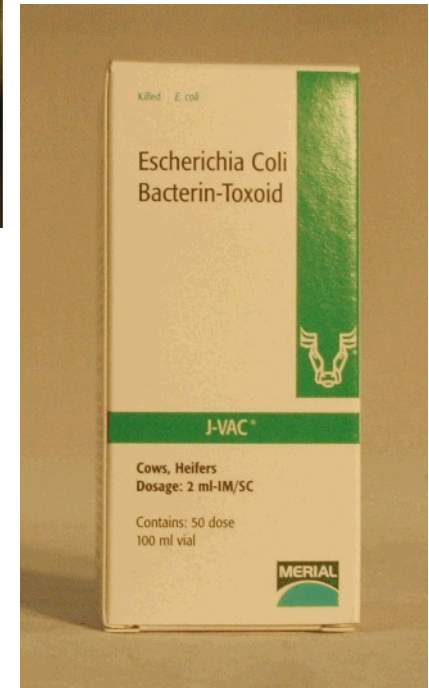




Mastitis

- **Treatment and Prevention**

- Control should focus on PREVENTION rather than treatment
- Hygiene management
 - Clean and dry teats before milking
 - Dipping teats pre and post dipping
 - Removal of feces or contaminated water
 - Clean bedding to prevent buildup of environmental pathogens
- Vaccination against *Staph. aureus* and coliforms (Gram negatives)





Mastitis

- **Treatment**

- Early detection and early therapy is best
 - **Beware of herd wide increases in clinical mastitis**
 - **Increase incidences of poor milk or positive CMT results**
 - **Increase somatic cell counts in bulk milk**
- Intramammary administration of antibiotics is most effective treatment
 - **Many commercially available products**
 - **Choose based on suspected pathogen but broad spectrum may be best choice**
 - **Administration of oxytocin to remove milk within teat recommended**
- Antibiotics per os or anti-inflammatory therapy may be indicated in severe clinical cases
 - **May reduce effects of systemic illness caused by coliforms**