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Abomasal Ulceration in Cattle

Abomasal ulcers in adult cows are a significant cause of indigestion.

Risk factors include being a high producing dairy cow, increased silage or concentrate rations and the stress of being a freshly calved cow. A bacteria known as *Helicobacter pylori*, has been isolated from the abomasum of cows with ulcers, but it's not known if it is a direct cause of abomasal ulcers in cattle.

Abomasal ulcerations are classified in to four categories based in the depth of the ulceration:

- Type 1: Erosions and non-perforating ulcers
- Type 2: Ulcers with profuse intraluminal haemorrhage
- Type 3: Perforated ulcers with local peritonitis
- Type 4: Perforated ulcers with diffuse peritonitis

Whilst most abomasal ulcers are only diagnosed definitively via a post mortem – The clinical signs seen depend on the location and thickness of the ulcer. Cases can be so mild they go unnoticed, or so severe that sudden death occurs from blood loss.

Type 1 abomasal ulcerations are usually subclinical with little to no affect on the cow.

Types 2 to 4 abomasal ulcerations usually have a clinical effect on the cow. Typically, cows have a reduced appetite, reduced rumen function (indigestion), reduced milk yield, diarrhoea (sometimes black as a result of digested blood), ketosis, teeth grinding and mild colic (abdominal pain). If an ulcer erodes into blood vessels, blood maybe seen in faeces or if the cow experiences a fatal bleed she will have an elevated heart rate, pale mucous membranes, rapid shallow breathing, weakness and collapse with moderate abdominal pain and if she survives long enough, the development of dark bloody faeces occurs 24-36 hrs later.

If a cow experiences a type 4 abomasal ulceration, with diffuse peritonitis, the cow will have an elevated heart rate, pale mucous membranes, cold extremities, subnormal temperature, show signs of colic, have rapid shallow breathing and a preference to lay down. The prognosis for these animals is guarded and despite intensive therapy they often die.

Treatment for bleeding ulcers include blood transfusions (4-6L) and fluid therapy, dietary management, confinement, antibiotics and oral antacids. If treatment is successful, the cow usually recovers in 1-2 weeks.

