

Lumpy skin disease (LSD)



Preparing for clinical examination at an LSD suspected farm

- Always wear protective clothes, footwear and disposable gloves while examining suspected animals.
- Change the gloves between the examinations, particularly if contaminated with saliva, nasal or eye discharge.
- Disinfect your hands, footwear, and outfit using any common disinfectant and when at home/office wash the clothes at +60 °C.
- Separate susceptible animals from the rest of the herd, if possible.
- Inform the official veterinarian about the suspicion of LSD.

Clinical examination



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Take the history

Record for each suspected animal

- Animal identification number/mark.
- Vaccination records.
- Clinical signs noticed by the farmer.
- Date when the clinical signs were first noticed?
- Fever.
- Changes in appetite.
- Changes in milk yield.
- Other nonspecific clinical signs.
- How many, and which, animals have been affected?

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Observe, select animals for examination and document

Animals should be first observed from a distance.

- Focus on animals already showing clinical signs, those suspected of being infected or those in close contact with infected animals. Select animals showing clinical signs and in-contact animals for close examination.
- It may be necessary to examine all the animals on the farm to find the mild cases or animals with older skin lesions.
- It is important to keep good clinical records and where possible take photographs.

3 Physical examination

Typical clinical signs of LSD include:

- Fever.
- Ocular discharge.
- Nasal purulent or mucopurulent discharge.
- Excessive salivation.
- Superficial lymph nodes (subscapular, prefemoral).
- Appearance of skin nodules.
- Necrotic lesions in the mucous membranes of the mouth, nares, muzzle.
- Swellings in the dewlap and the legs.
- Lameness.

Ensure the animal is adequately restrained. Examine the animal thoroughly, starting from the head and ending with the tail and record your findings.

Collect preliminary epidemiological data

- From where the disease came, how long it has been present and to where it may have spread?
- Number of animals in the herd, number of suspected animals, estimated age of lesion(s).
- Origin, age, sex, breed, production type and vaccination status of suspected animals.
- Contacts with other herds and use of communal grazing; contacts with wild ruminants.

Recommendations for suspected farms (before confirmation)

If possible, separate the rest of the animals from neighboring herd(s) by feeding them on the farm and avoiding communal grazing.

Stop cattle movement from/to the farm.

Neighboring farmers, and those who have recently bought or sold animals from/to the affected farm, should be notified so they are aware of the risk.

Differential diagnosis

- Pseudo lumpy skin disease/ Bovine herpes mammillitis (Bovine Herpesvirus 2).
- Vaccine adverse reaction.
- Insect bites, urticaria, and photosensitization.
- Early Ringworm lesions.
- Demodicosis.
- Bovine papular stomatitis (parapox virus).
- Besnoitiosis.
- Onchocerciasis.

4 Sampling

If needed, for safe sample collection, consider using a sedative and analgesia.

- Blood (EDTA and heparin tubes).
- Serum.
- Nasal and saliva swabs.
- Skin scrapings, biopsy and scabs.

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EuFMD activities and tools

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Move FAST

Foot-and-mouth And Similar Transboundary animal diseases



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Sustainable Development Goals, UN-SDGs.
EuFMD's programme focus



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