



Treatment

In the early days (1960s) enzootic pneumonia was often treated by medicating with tetracycline and although this did not give a total cure, the impact of pneumonia in the fattening period was usually greatly reduced. There was evidence to suggest that during the 1970s and 80s there was a decreasing susceptibility to chlortetracycline in isolates of *M. hyopneumoniae*.

Initially, programmes combining in feed and water treatments with tylosin were quite successful although the impact of tylosin on lung lesions varied, probably depending on which secondary agents were involved.

Lincomycin was also used with some success, as was tiamulin or combinations of tiamulin and chlortetracycline or oxytetracycline. More recently, newer antibiotics such as the pleuromutilins or quinolones have been used with some success.

Looking to the future, the current public concern over the use of antibiotics means that alternative strategies to control enzootic pneumonia will be sought and these may well focus on prevention.

Prevention

Obviously it goes without saying that the provision of an optimum environment, ventilation and stocking densities are a pre-requisite to any strategy aimed at preventing respiratory disease.

Historically, various schemes have been used to confirm the freedom of enzootic pneumonia in a herd including abattoir checks on plucks (lungs) and emphasis was given to the creation and keeping of enzootic pneumonia-free herds. To this end medicated early weaning systems were used, for example the Isowean system.

In such an approach piglets were weaned early from sows that had been medicated and removed to an isolated location for onwards rearing. Such a system was not *M. hyopneumoniae* specific, but also controlled other pathogens, such as *Bordetella bronchiseptica*.

More recently, vaccination against *M. hyopneumoniae* infection has been practised with some success.

Dr Bata

Growell

Interheat

Livisto

LUBING