Liver Fluke in sheep and cattle
(Fasciola hepatica)

Fluke causes disease in two forms either acutely or chronic

Acute Fluke:

- More common in sheep
- Deaths often before fluke eggs seen in faeces
- Sheep will be pale (anaemic) and may have a swollen abdomen

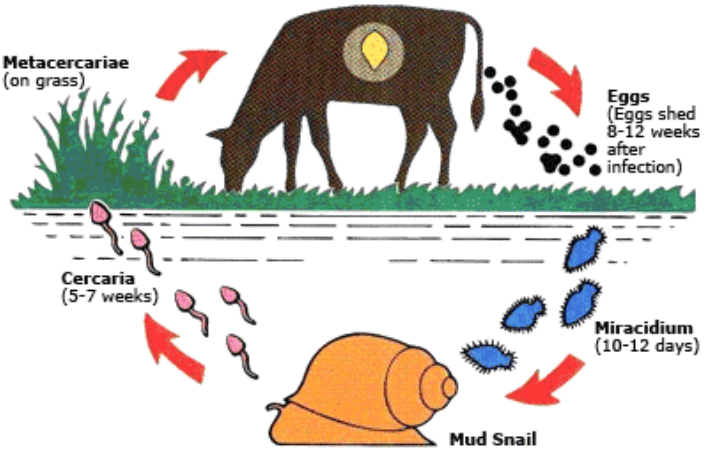
Chronic Fluke:

- Most common form in both sheep and cattle
- Late winter/spring – early summer
- Signs
  - Weight loss
  - Anaemia
  - 'Bottle Jaw' (swelling under jaw)
  - Deaths (uncommon)
  - Poor fertility/scanning rate

Diagnosis

1. Faecal egg count – not always positive even if fluke causing disease
2. Fluke ELISA
   - Either on milk: individual or bulk tank
   - Or on blood
3. Post mortem exam: a useful monitoring tool is feedback from abattoirs regarding the state of the liver.

Importantly the lifecycle of fluke involved a water living snail; therefore fields which are at risk are those which are prone to pooling with water or next to ponds/lakes.



Fasciola hepatica egg

Control

- Avoid waterlogged areas for grazing – fence off if possible
- Regular worm egg counts to monitor burden.
- Flukicides – various products are available, care should be taken to use appropriate spectrums at certain times of year. As different products are effective against different stages of fluke.
    - Triclabendazole. This kills all stages of fluke and should be used when immature stages are likely to be high (October-January)
    - Closantel
    - Nitroxynil

      These flukicides do not kill all stages of fluke (only >5 weeks) but are effective in April/May
    - Albendazole – Kills adults only

Resistance to flukicides has been reported and therefore responsible dosing protocols must be used in order to reduce selection for resistant liver fluke. Use of parasite forecasts such as: http://www.nadis.org.uk/parasite-forecast.aspx can help with determining a dosing schedule.