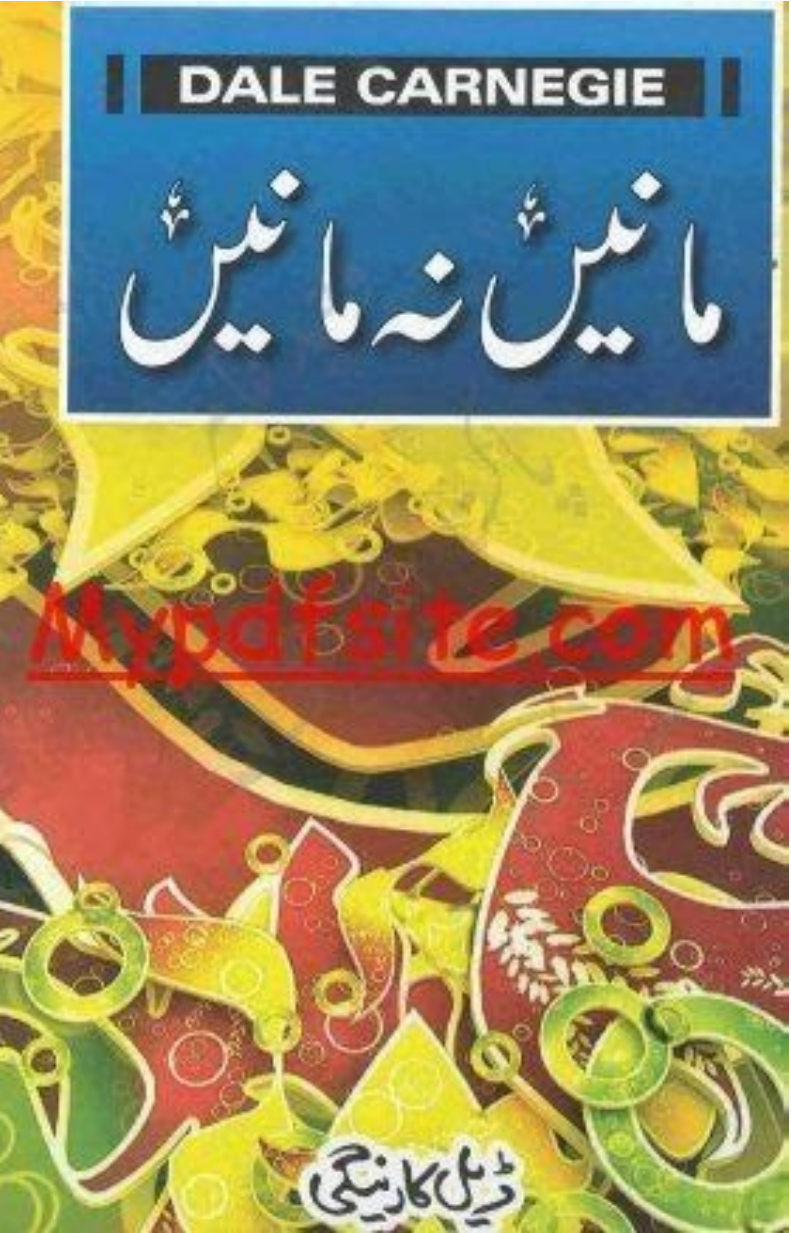
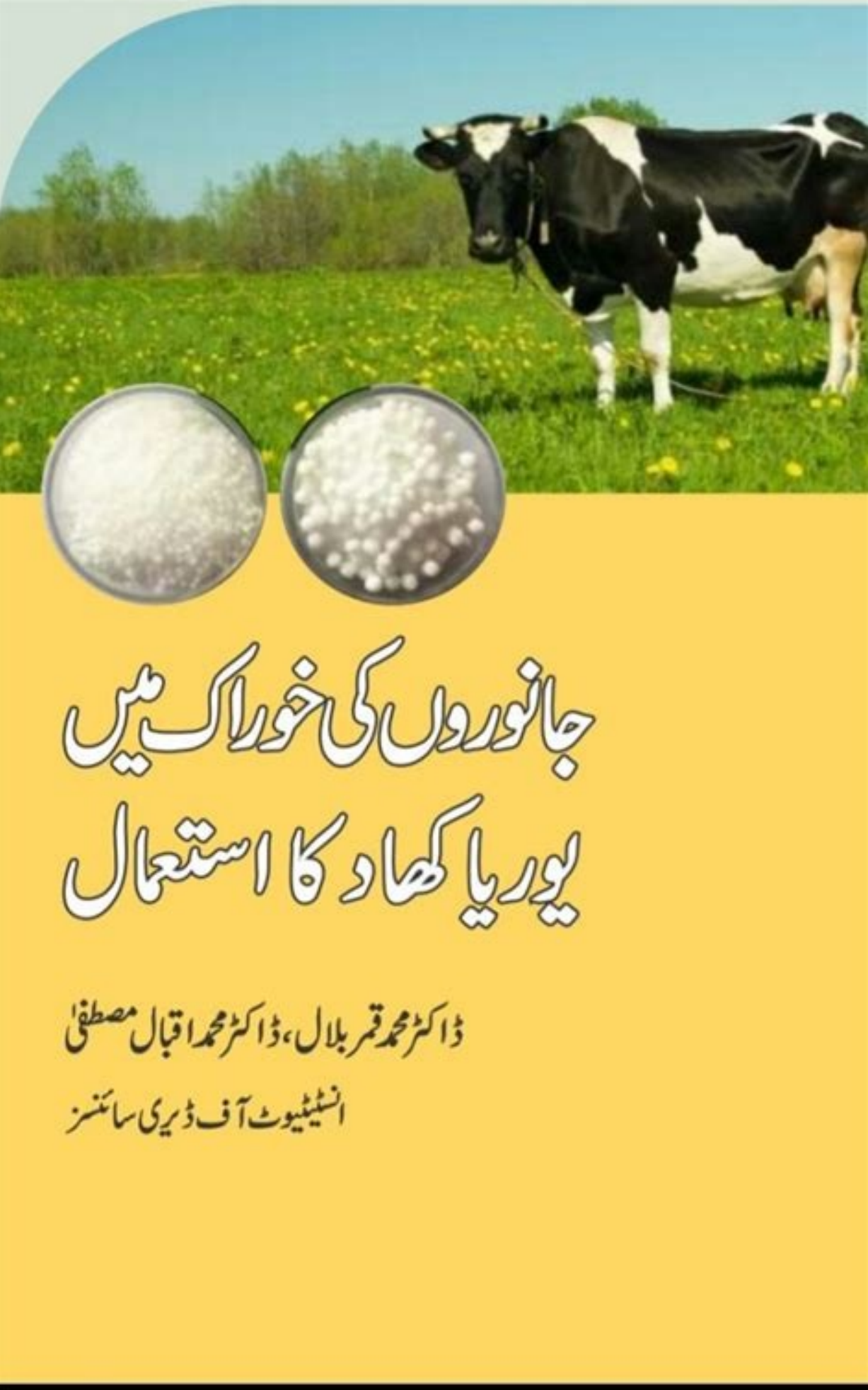
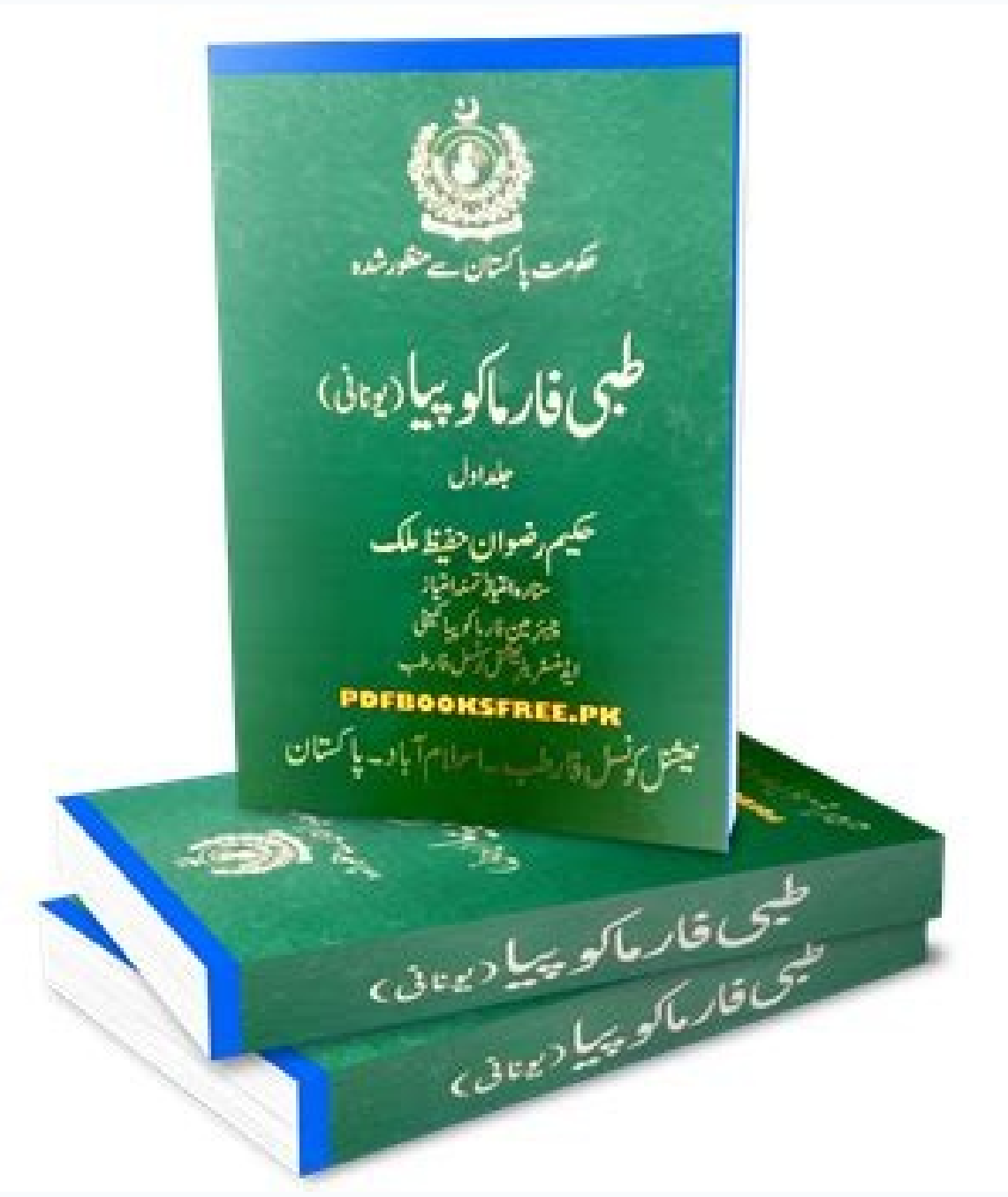


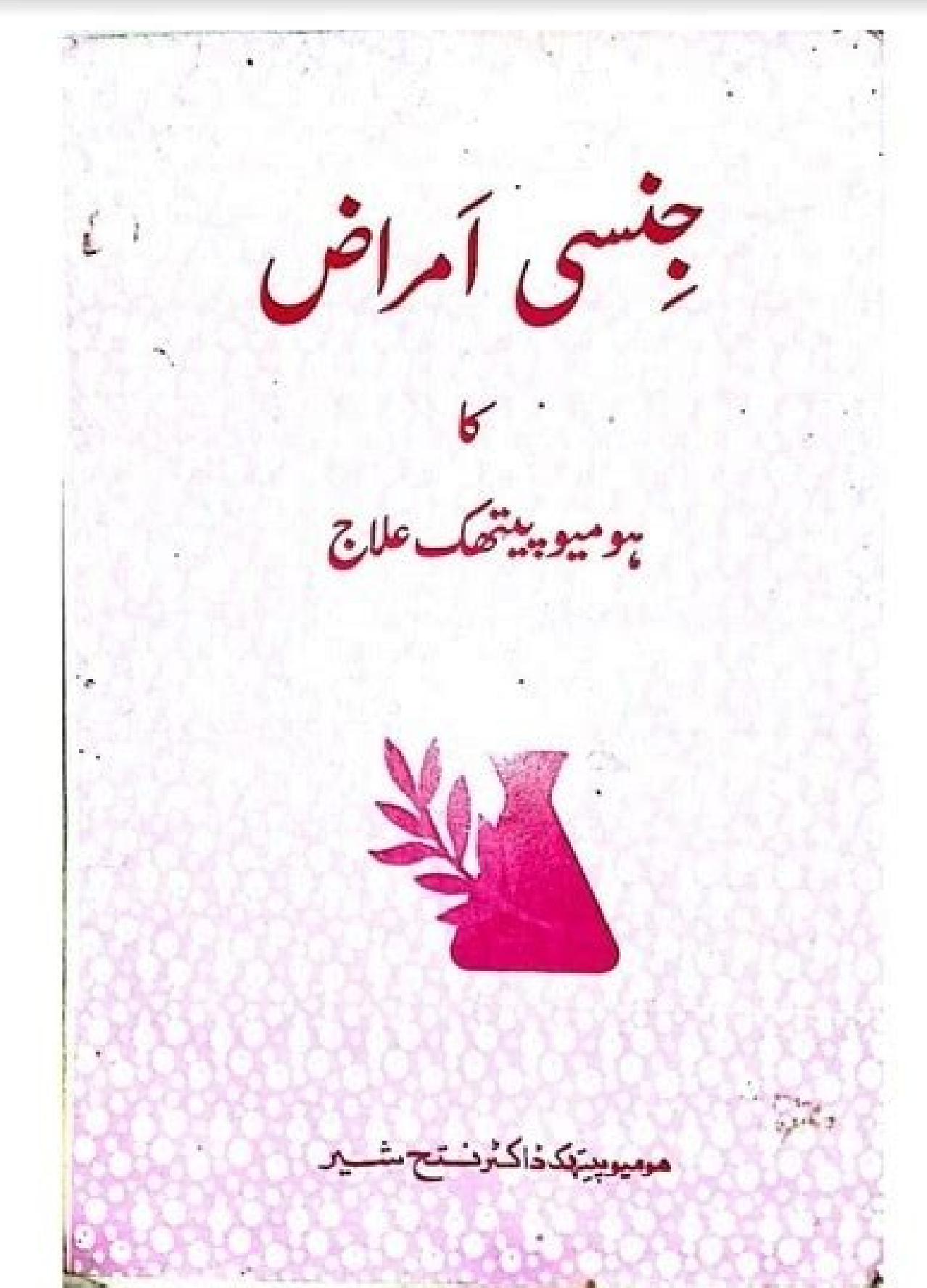
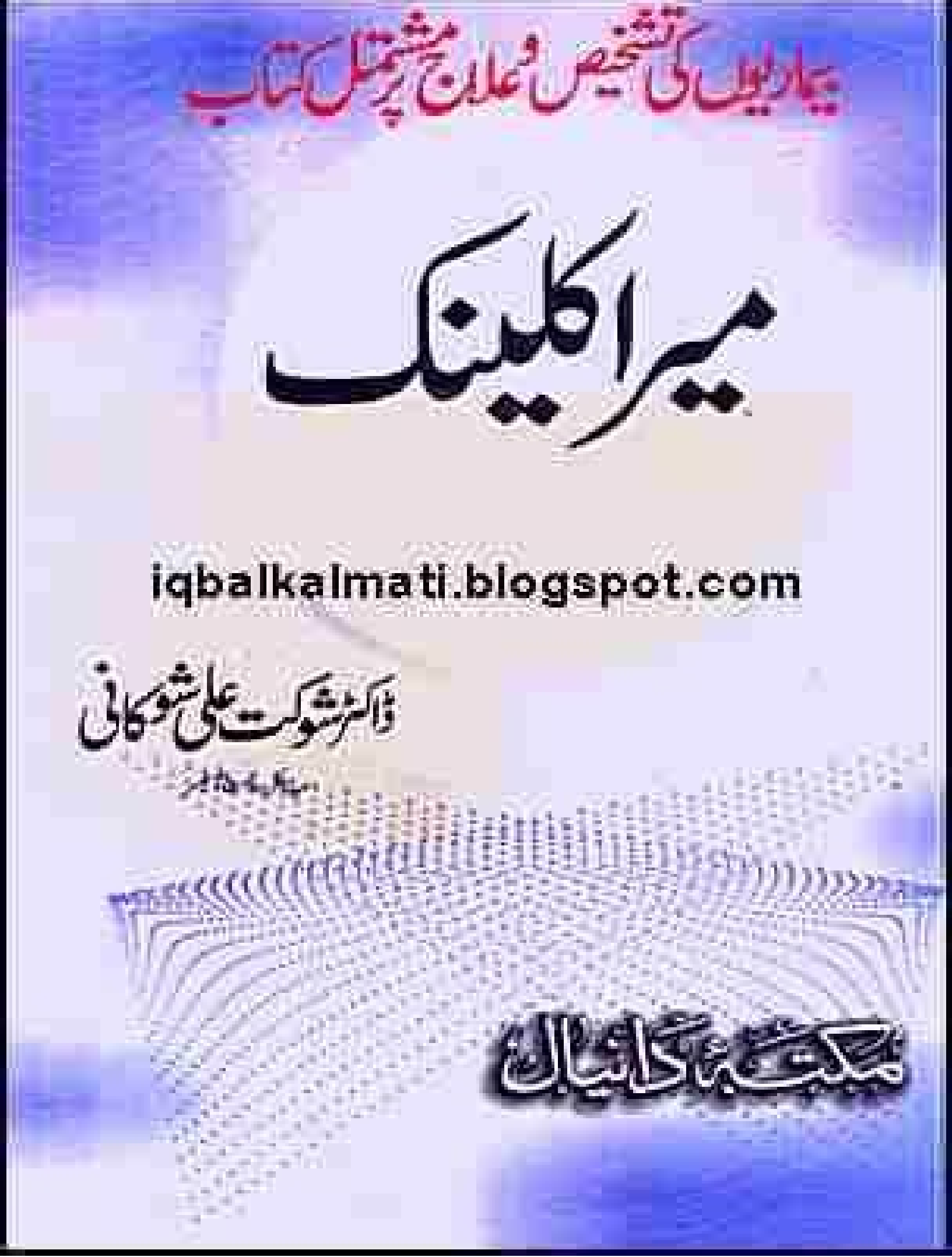
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Cow diseases and treatment in urdu.

Viral infection alone is not dangerous for life but predisposes to secondary bacterial pneumonia, which can cause death. Faring and lung lymph nodes can be acutely swollen and hemorrhagic. The youths and breeding and replacement bulls should be immunized when 6 miles were old, before breeding and subsequently. Aborti generally occur during the second half of pregnancy, but early embryonic death is possible. The bovine coronavirus can play a role in some outbreaks of pneumonia of the calf on the pasture in cow's carnage operations. The Brsv can be considered as a primary BRD pathogen and is also a component of the complex of beef respiratory disease. However, since the gravity of the disease can vary, it is better to differentiate the bhv-1 from other viral infections by viral insulation. The lesions can merge to form plaques. These viruses play a role similar to that of the other viruses previously discussed; IE, in combination with other stress factors, can serve as bacterial pneumonia initiators. The transmission can occur in the absence of visible injuries and through artificial insemination with subclinically infected bulls. The breasts are often filled with a serous or serophittical exudate. In genital infections, the first signs are frequent urination, the elevation of the tip and a slight vaginal discharge. With bacterial infection, it can be inflammation of the uterus and transient infertility, with purulent vaginal unloading for several weeks. In addition to cattle, sheep and goats can also be infected with respiratory claims. Passively derived immunity does not seem to prevent Brsv infections but reduces the gravity of the disease. Other viruses that have been associated with BRD include Bovino Reovirus, Enterovirus and As the disease progresses, the pharynx is covered by a serophiorinous exudate and the fluid at the blood level can be found in the trachea. a number of Westernerscountries have uprooted or are trying to eradicate BHV-1 from their domestic cattle populations. PCR methods can be used to identify antigen in a variety of tissues or exudates. The calves that become infected by BRSV in the presence of passively derived antibodies cannot seroconvert. In young animals with generalized BHV-1 infection, erosions and overlapping ulcers with debris can be found in the nose, esophagus and forest. Immunization with modified or inactive virus vaccines generally provides adequate protection against clinical disease. Two bovine rhinovirus serotypes have been recognized to cause infections of the respiratory tract in cattle. BHV-1.3 was reclassified as a distinct herpesvirus designated BHV-5. Samples should be taken early in the disease, and a diagnosis should be possible in 2-3 days. A BRSV diagnosis requires laboratory confirmation. Matched serum samples can be used to establish a diagnosis. BHV-1 latent infection plate generally does not show clinical signs when the virus is reactivated, but serve as a source of infection for other sensitive animals. Although virus isolation is difficult. PCR is a useful and rapid method commonly used to detect antigen. If secondary bacterial infections do not occur, animals recover in 10-14 days. Secondary bacterial pneumonia is a frequent occurrence. The vulva is inflated, and small papules, then erosions and ulcers, are present on the mucosa surface. Antimicrobial therapy is indicated to prevent or treat secondary bacterial pneumonia. Viral injuries are often masked by secondary bacterial infections. The bovine herpesvirus 4 has been implicated in several diseases, including BRD. BHV-1 infections are widespread in the cattle population. The bovine adenovirus wasto a wide spectrum of diseases, with the bovine adenoid type 3 being the serotype most often associated with the BRD. Vaccines are not available etnemetedecerp otanq id DRB allen etnatropmj 'Aip olour nu ereva 'Aup onivob surivanoroc li ehc evorp el odnecserc atS .oizuperp lus e enep lus onacifrev is ilimis inoisel ,rot ieN .1-VHB ad enoizefni id enoizatsefinam acinu emoc isracifrev 'Aup elaeoroc .Aticapo noc etivitnuignoc aL .%02 - 0 eresse 'Aup .Atilatrom id ossat li e atavele eresse da ednet. 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It is known that there are antigenic subtypes for HRSV and preliminary tests suggest that there may be antigenic subtypes of BRSV. This virus has been called for its characteristic cytopathic effect - the formation of syncitial cells. In cattle breeding, abortion or genital infections are more common. Pyrexia, eye and nasal discharges, respiratory distress, diarrheea, incoordination and finally convulsions and death may occur in a short period after generalized viral infection. In the absence of bacterial pneumonia, recovery generally occurs 4 - 5 days after the beginning of the signs. (See also vulvite and vaginitis in large animals vulvite and vaginitis in large animals.) BHV-1 infection can be severe in young calves and cause a generalized disease. Also, white fires can be found in the liver, kidneys, spleen and lymph nodes. The general recommendations for control are discussed in accordance with pneumonia for the fever of consignment in enzootic pneumonia and the pneumonia of consignment fever share many similarities in their etiologies and pathogenesis and in general measures for control and prevention. In order to help eradication, mutant selective vaccines have been developed that allow discrimination between antibody produced in response to vaccine and antibody produced in response to natural exposure. The human respiratory syncitial virus (HRSV) is an important respiratory pathogen in infants and small children. The BRSV is a difficult virus to detect, although isolation possibilities can improve when animals are sampler in the acute phases of the infection. The fever (104 ° a ° e a, ~ "108 ° a ° F [40 ° a ° e a, ~ 42a ° a ° C]), the depression, the reduction of the intake of feed, the increased respiratory speed, the cough and nasal and tear unloading are common. 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Sit 6â€"SCâ€2 SMROF Latineg dna yrotipser eht rof lesions in all tissues, which are especially visible in the liver. They can occur regardless of the severity of disease in the dam. However, the antibody titer of animals with well-developed clinical disease may be higher in the acute sample than in the sample taken 2eAAA3 wk later, because the antibody response often develops rapidly, and clinical signs follow virus infection by up to 7eAAA10 days. A rise in serum antibody titer also can be used to confirm a diagnosis. Dyspnea, possibly with open-mouthed breathing, may become pronounced in the later stages of the disease. Other procedures that have proved useful in detection of BRSV antigen are fluorescent antibody and immunoperoxidase staining. Subcutaneous emphysema may occur. Single serum samples with high antibody titers from a number of animals in a respiratory outbreak may help diagnosis if coupled with clinical signs. Feeder calves should be immunized 2eAAA3 wk before entry into the feedlot. Bovine respiratory syncytial virus (BRSV) is an RNA virus classified as a pneumovirus in the Paramyxovirus family. They may later be accompanied by pseudodiphtheritic yellowish plaques. plaques.



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