

George MacLeod

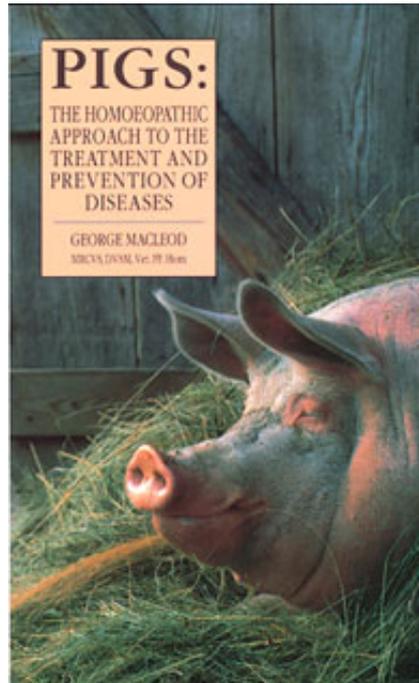
Pigs: The Homeopathic Approach to the Treatment and Prevention of Diseases

Leseprobe

[Pigs: The Homeopathic Approach to the Treatment and Prevention of Diseases](#)

von [George MacLeod](#)

Herausgeber: CW Daniel & CO



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CHAPTER EIGHT

BACTERIAL *Diseases*

Pleuropneumonia Associated with Actinobacillus spp.

This disease is caused by a bacterium known as *Actinobacillus pleuropneumonia*, also referred to a *Haemophilus pleuropneumonia*. The disease is widely distributed causing large numbers of deaths in affected herds. Survivors of acute outbreaks become carriers, the bacteria locating in necrotic lung tissue and tonsils. All ages of pigs are susceptible. Spread of the infection is airborne and transmission takes place by contact or by droplet infection. The highest incidence of the disease occurs among feeding pigs.

CLINICAL SIGNS

The incubation period may last from a few days up to three weeks. The disease itself may be per-acute, acute or chronic. Per-acute cases die suddenly or exhibit illness preceded by a rise in temperature, diarrhoea and vomiting. There may be little or no respiratory signs although extreme difficulty in breathing precedes deaths together with frothy blood-stained mucus from mouth and nostrils. Neo-natal piglets develop septicaemia leading to rapid death.

In the acute form a rise in temperature develops among different groups of pigs. Loss of appetite is followed by an

appearance of depression together with coughing and difficult breathing. Cyanosis due to involvement of cardiac muscle may take place.

Sub-acute or chronic forms may follow the acute stage. Temperature usually remains normal. Loss of appetite, coughing and arthritis have all been reported in various outbreaks while chronic abscesses develop in different parts of the body.

TREATMENT

- 1. ACONITUM.** This remedy should be given as soon as early signs appear. Suggested potency 10m one dose every hour for four doses.

- 2. ARSENICUM ALBUM.** Diarrhoea and vomiting could be contained by the use of this remedy. Suggested potency 1m one dose twice daily for five days.

- 3. ECHINACEA.** Septicaemic involvement in young pigs may be controlled by this remedy. Suggested potency 3c one dose three times daily for seven days.

- 4. PHOSPHORUS.** This remedy should be beneficial in controlling respiratory symptoms associated with acute cases. Suggested potency 30c twice daily for five days.

- 5. ACIDUM SALICYLICUM.** If arthritis develops as in some chronic states this remedy may prove useful. Suggested potency 200c one dose three times per week for four weeks.

- 6. SILICEA.** If abscesses tend to appear in chronic states this remedy will prove useful. Suggested potency 30c one dose daily for seven days.

PREVENTION

A nosode could be made from infected material and given on a herd basis as in other conditions.

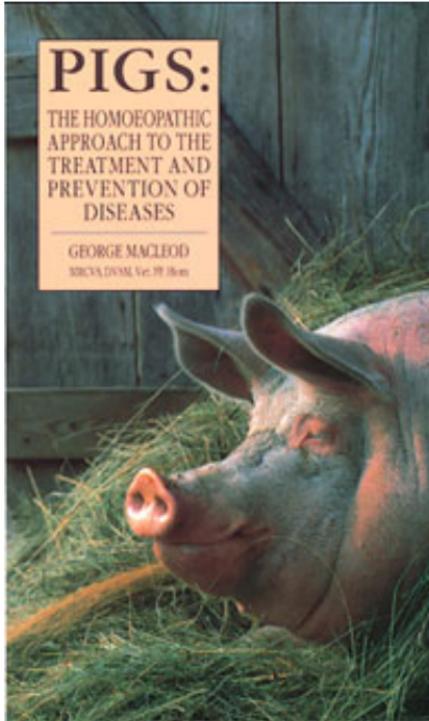
Anthrax

This disease is not particularly important in the context of pig medicine as the species is relatively resistant to infection. However outbreaks have been noted from time to time. The disease is important from the viewpoint of transmission to the human population and pigs may act as reservoirs of infection in this connection.

The causative organism is *B. anthracis* which is a sporulating organism which can remain latent in the soil in spore form. Infection through wounds from contaminated soil can lead to the establishment of disease. Soils which have been heavily manured are more likely to lead to infection than those which have not been treated in this way. Bone meal imported from countries where the disease is enzootic is an important source of infection containing as it does in many cases spores of the bacillus.

CLINICAL SIGNS

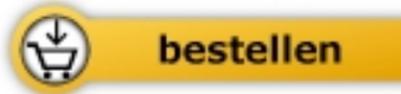
Deaths among pigs may be the only early sign that something is wrong in the herd. Blood examination will yield proof of infection. Three distinct forms of the disease are recognised viz. pharyngeal, intestinal and septicaemic. Infection may localise in the lymph nodes of the tonsils: or infection may progress to the intestines. Oedema of the neck area is a feature of pharyngeal complication. Rise in temperature is variable while difficult breathing, depression and inappetance occur together with vomiting. Intestinal infection leads to digestive disturbances such as lack of appetite and dysentery. Septicaemia follows after the intro-



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168 Seiten, paperback
erschienen 1994



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