# **Differential Diagnosis of Digestive Tract Disorders**

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# The Causes of Manifestations of Diseases of Alimentary Tract of Cattle

## 1. Inanition

Chronic disease

(Anorexia or malabsorption)

# 2. Dehydration

Acute disease

Severe enteritis, intestinal accident and obstruction of forestomachs and abomasum resulting in loss of fluid from body or accumulation within gastrointestinal tract.

# 3. Shock

Peracute disease

Severe intestinal or gastric accident

Accute diffuse peritonitis

D-lactic acidosis

# 4. Abdominal Pain

Usually subacute

Distention of stomachs and intestines

Peritonitis

# 5. Abnormalities of Prehension, Mastication and Swallowing

Stomatitis

Painful teeth

Pharyngeal lesions

Esophageal disease

# 6. Alterations in Feces

## a. Diarrhea

Enteritis

Indigestible nutrients

Congestive heart failure

# b. Constipation

True constipation not common

# c. Scant Feces

## Partial obstruction

Inappetence - Anorexia

## 7. Tachicardia

Severe acid-base imbalance, toxemia and dehydration

#### 8. Fever

Peritonitis

Enteritis

# 9. Cud-dropping

Painful teeth

Diseases of esophagus, reticulum and rumen causing abnormalities in regurgitation.

# 10. Vomiting

Not common in cattle

# 11. Hemorrhage

Abomasal - Black feces

Intestinal - Brown - Black feces

Colonic - Pink feces

Rectal - Bright red feces

## 12. Tenesmus

Disease of rectum

Intestinal obstructions

# 13. Distention (Accumulation of fluid, gas or ingesta)

Defects in motor function

Trapping of normal gases of fermentation in frothy bloat.

Obstruction of forestomachs and abomasum

Obstruction of large colon

Peritonitis

## 14. Abnormalities of Motor Function

Hypermotility - enteritis

- distention of stomachs or intestines

Hypomotility - obstruction

- paralytic ileus

- peritonitis

# 15. Abnormalities of Digestive Function

Changes in ruminal pH, protozoan activity, ruminal bacteria due to lack of feed, excessive substrate or toxic agents.

# Clinical Examination of the Alimentary Tract of Ruminant Cattle

## 1. History

## a. Time of Occurrence

Pregnant and dry

Recent parturition

Anytime

Season of the year

# b. Nature of Ration

Consistency

Composition

- c. Speed of Onset
- d. Response to Treatment
- 2. Systemic State

Temperature, pulse, respiration

Toxemia

Weakness - recumbency

State of hydration

Acid-base imbalance

# 3. Visual Inspection of Abdomen

Shape, Size and Symmetry of Abdomen

Normal

Distended

- Asymmetrical
- Symmetrical

Gauntness

# 4. Close Examination of Left Side of Abdomen

# Palpation

Rumen

- Ingesta Fluid

Gas

## Auscultation

Primary and secondary contractions of reticulo rumen

# Percussion

Rumen

Left-sided displacement of abomasum

## **Rumen Contents**

Rumen juice pH

Protozoan activity

# 5. Close Examination of Right Abdomen

# **Palpation**

## Percussion and Auscultation

Upper half

Lower half

Distended abomasum

Torsion coiled colon

Torsion of cecum

Gravid uterus

Ventral sac of rumen

Enlarged liver

# 6. Presence of Abdominal Pain

Grunt on percussion or deep palpation just posterior to xiphoid sternum or anywhere over abdomen.

# 7. Rectal Exploration

Four quadrants of abdomen

Amount and character of feces

# Palpate in Normal State

Rectal wall

Rumen

Kidneys

Lymph nodes

Uterus

Peritoneum

# Palpate in Abnormal State

Rectal wall

Rumen - distended and distorted

Abomasum - distention and right-sided displacement

impaction

Cecal torsion

Torsion of coiled colon

Small Intestines - distention

Peritoneum - adhesions

Kidney - enlargement

Ureters - enlarged

Uterus - Hydrops

# 8. Exploratory Laparotomy

Anterior

Direction

# From left flank

Rumen

Spleen

Reticulum

Diaphragm

# From right flank Duodenum

Greater omentum

Liver

Abomasum Omasum

Posterior Direction Kidney - Ureter

Uterus

Intestines

Liver - Gall Bladder

Abomasum

## 9. Paracentesis

Peritoneal fluid

Stomach and intestinal fluid

# 10. Rectal Biopsy

# 11. Clinical Pathology

Hemogram

Serum biochemistry

# 12. Terminate Pregnancy

Normal parturition

Caesarean section

Induce parturition

Aid to the Clinical Diagnosis of Some Diseases of the Alimentary Tract of Ruminant Cattle Etiological Classification of Some Diseases of the Alimentary Tract of Ruminant Cattle

	Nutritional	Physical/Metabolic	Infections	Toxic	Congenital Defects and Tumors
Forestomachs	Simple indigestion	Vagus indigestion with hyperactivity or atony	Mycotic rumenitis	Lead Poisoning	Papilloma of esophageal groove
	D-lactic Acidosis or Grain Overload.	of rumen.			
		Reticular adhesion		Chemical rumenitis	
	Bloat.	indigestion		due to D-lactic acidosis	
	Rumen Starvation	Rumen stasis due to hypocalcemia or ketosis			
		Diaphragmatic hernia			
Abomasum	Abomasal Impaction dietary in origin	Abomasal impaction associated with vagus indigestion	Abomasitis: Bovine Virus Diarrhea.	Arsenic Poisoning	Lymphoma of abomasum
		Left-sided displacement of abomasum	Malignant Catarrhal Fever.		
		Abomasal distention, right-sided displacement	Rinderpest.		
		and abomasal torsion	Ostertagiasis		
		Abomasal ulceration			
		Abomasal hair balls			

Intestines		Intussusception and volvulus of small intestine Cecal Torsion.  Torsion coiled colon	Salmonellosis. Winter Dysentery. Johnes Disease.	Arsenic lead Copper Toxemia from peracute coliform mastitis Saline Waters	Atresi coli Atresi Ani	
		Transection of small intestine at parturition.	Coccidiosis. Helminthiasis. Bovine Virus. Diarrhea. Malignant Catarrhal Fever			
Liver		Fatty liver.	Liver abscesses			
Peritoneum		Traumatic reticuloperitonitis.	nitis.	Chemical peritonitis from injection of	Lipomatosis	
		Acute diffuse peritonitis due to perforation of abomasal ulcer, intestine or ruptured uterus.		irritating drugs.		
		Fat necrosis.				
Pathogenesis	Accumulation of	Obstruction	Enteritis - loss	Toxemia and enteritis Obstruction	Obstruction	
	and gas	Accumulation of fluid, ingesta and gas.	electrolytes.	With thind accumulation		



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