

# AUSTRALIAN PIG VETERINARIANS

## SICK AND INJURED PIG GUIDELINES FOR VETERINARIANS 2012



**Prepared by the APV Welfare Subcommittee**  
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Disclaimer: The information contained in this publication is based on knowledge and understanding at the time of writing (May, 2012). Users are reminded of the need to ensure that information upon which they rely is up to date and to check currency of the information with the appropriate State legislation and Veterinary Boards.

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In recent years, there has been an increasing focus on the welfare of animals reared for food and fibre, with greater concern for those reared “intensively” (including pigs). Public concerns over animal welfare have recently resulted in the voluntary phase-out of stalls for housing pregnant sows and temporary bans of live cattle exports. It is likely that consumer concerns over animal welfare will play an even greater role in influencing how food-producing animals are reared and managed in the future.

Veterinarians play a major role in protecting animal health and welfare. We achieve this by not only relieving animal suffering, but by preventing adverse welfare incidents arising. Veterinarians working at the “coal face” play a major role in maintaining pig welfare during farm visits, by examining pigs and advising their clients on the best way to manage the health and welfare of the animals in their charge.

In 2010, the Australian Pig Veterinarians (APV) unanimously supported the development of guidelines for management of sick and injured pigs, with the following objectives:

- » to identify legislative responsibilities of producers and stockpersons relevant to pig welfare in all states of Australia
- » to advise veterinarians of their legal responsibilities when dealing with adverse welfare events on-farm
- » to develop a standardised set of guidelines for veterinarians regarding the treatment and management of sick and injured pigs.

It is likely that the pig industry will need to be increasingly transparent in the coming years, to address concerns of the general public regarding animal welfare. Welfare legislation is likely to change in response to these concerns, so this document will need to be reviewed as these evolve.

These guidelines are the result of the hard work of the APV Welfare Subcommittee, consisting of Kirsty Richards, Peter McKenzie and Trish Holyoake. Invaluable assistance was provided by Kevin Doyle of the Australian Veterinary Association.

This guide has been developed in consultation with Australian Pork Limited and is acknowledged in the producer’s guide to the care and management of compromised, sick or injured pigs *The Care of the Compromised Pig, Ed 1 2012*.

The APV acknowledge, with gratitude, the support provided by Boehringer Ingelheim Animal Health in the printing of this document.

## PRODUCER AND STOCKPERSON RESPONSIBILITIES

Under Australia's Constitution, each state and territory is responsible for its own animal welfare legislation, including aspects of the care of sick and injured pigs.

Producers and stockpersons should be aware of their obligations under legislation applicable to the state in which their pigs are housed.

In addition, responsibilities relating to the care of sick and injured pigs are described in the Australian Model Code of Practice for the Welfare of Animals, Pigs (2007) (MCOP). The MCOP is referenced in different ways in the animal welfare legislation of the different states and territories.

The Australian Animal Welfare Strategy, developed by the Australian Government, State and Territory governments, with the Industry and Community, and managed by the Federal Department of Agriculture, Fisheries and Forestry (DAFF) on behalf of stakeholders, is currently working to achieve harmonisation across governments to produce consistent welfare regulatory outcomes for livestock throughout Australia. Their mandate includes a review of Model Codes of Practice to deliver Australian animal welfare standards and guidelines, which are regulated by state governments and working with industry to promote self regulation through the implementation of quality assurance programs as a mechanism to apply these standards. Further information on this strategy is available at [Animal Health Australia - Australian Animal Welfare Strategy](#)

At the time of printing of this document the following applied (Animal Health Australia, 2011; Australian Pork Limited):

### New South Wales

<b>Relevant legislation and prescribed standards</b>	<a href="#">Prevention of Cruelty to Animals Act 1979</a> <a href="#">Prevention of Cruelty to Animals (General) Regulation 2006</a> <a href="#">Exhibited Animals Protection Act 1986</a> <a href="#">Animal Research Act 1985</a>
<b>Comment</b>	The Animal Welfare Code of Practice — Commercial Pig Production has been introduced under the Prevention of Cruelty to Animals (General) Regulation 2006

### Queensland

<b>Relevant legislation and prescribed standards</b>	<a href="#">Animal Care and Protection Act 2001</a>
<b>Comment</b>	Standards from the MCOP have been adopted into the <i>Animal Care and Protection Act 2001</i> through the Animal Care and Protection Amendment Regulation 2010.  The process of adopting the <i>Australian Animal Welfare Standards and Guidelines for the Land Transport of Livestock</i> into the <i>Animal Care and Protection Act 2001</i> has begun.

### South Australia

<b>Relevant legislation and prescribed standards</b>	<a href="#">Animal Welfare Act 1985</a> <a href="#">Animal Welfare Variation Regulations 2009 (No 218 of 2009) - Reg 12 (Part 5 - Pigs)</a> <a href="#">SA Livestock Act 1997</a>
<b>Comment</b>	The 2009 pig welfare regulations that enforce the Animal Welfare Act 1985 (i.e. Regulation 12, Part 5), are based on the standards set by the MCOP. They have been effective since November 1, 2009.  The Act now allows for inspectors to visit private premises or vehicles without a warrant and without suspicion of any offence, to conduct a routine inspection of animals. The RSPCA commenced these inspections in late 2011.  A Herd Health Program, "approved by the Minister", that identifies potential health and biosecurity risks to the pig and specifies actions to manage these risks must be available for examination at an inspection. From June 2011, if you are QA accredited but <b>have not</b> transferred from APIQ to APIQ✓® you will be regarded as having an approved Herd Health Program. The new APIQ✓® program does not currently include an approved Herd Health program but is expected to have one by 2012.  South Australia is regulating the <i>Australian Animal Welfare Standards and Guidelines for the Land Transport of Livestock</i> as they are developed and is amending the <i>Animal Welfare Act 1985</i> to address most of the agreed legislative provisions required for national consistency in animal welfare laws.  Further information can be obtained from PIRSA.

### Victoria

<b>Relevant legislation and prescribed standards</b>	<a href="#">Livestock Management Act 2010</a> <a href="#">Prevention of Cruelty to Animals Act 1986</a> <a href="#">Pig Welfare Standards and Guidelines</a>
<b>Comment</b>	The Victorian <i>Livestock Management Act 2010</i> commenced on 1 January 2011. It encompasses the <i>Australian Animal Welfare Standards and Guidelines for the Land Transport of Livestock</i> and the MCOP. This Act provides a single, consolidated regulatory framework for livestock management standards. It also provides for a new co-regulatory mechanism that formally recognises commercial and existing industry compliance arrangements, including quality assurance schemes that demonstrate compliance with animal welfare standards.

Tasmania

<b>Relevant legislation and prescribed standards</b>	<a href="#">Animal Welfare Act 1993</a> <a href="#">Animal Welfare Standard-Tasmania No 5</a>
<b>Comment</b>	The Tasmanian Government has announced that it will adopt the majority of standards in the revised MCOP but will go further than the code and phase out dry sow stalls. Regulations are currently being developed under the Animal Welfare Act 1993 that will legislate most of the code and ban the use of dry sow stalls mid 2012. A program of random inspections of intensive piggery and poultry premises has been implemented in conjunction with the RSPCA to ensure that producers are complying with animal welfare standards. This program will be extended to other livestock industries as animal welfare standards are developed

Western Australia

<b>Relevant legislation and prescribed standards</b>	<a href="#">Animal Welfare Act 2002</a> <a href="#">Animal Welfare (Pig Industry) Regulation 2010</a>
<b>Comment</b>	The Animal Welfare (Pig Industry) Regulations 2010, derived from the nationally agreed standards in the MCOP, were proclaimed in November 2010. The Australian Animal Welfare Standards and Guidelines for the Land Transport of Livestock has been promoted among transporters, livestock producers and saleyard operators, particularly the 'fit to load' requirements. They received ministerial approval in 2009 but were not in regulation at December, 2011.

Australian Capital Territory (ACT)

<b>Relevant legislation and prescribed standards</b>	<a href="#">Animal Welfare Act 1992</a>
<b>Comment</b>	The ACT government has created three new offences under the <i>Animal Welfare Act 1992</i> : reckless failure to comply with a code of practice (maximum penalty 100 penalty units), failure to comply with a mandatory code of practice (maximum penalty 50 penalty units) and failure to comply with a direction from an authorised officer regarding a mandatory code (a penalty unit is currently \$110).

Northern Territory

<b>Relevant legislation and prescribed standards</b>	<a href="#">Animal Welfare Act</a>
<b>Comment</b>	The current Act was introduced in 2000, updated in 2007 and has been under review since 2009. The review process includes public consultation on the Act, promotion of animal welfare and the implementation of a training structure for animal welfare officers and inspectors. This process was ongoing in January, 2012.

Below are a number of examples of adverse welfare incidents and the penalties that may result under current welfare legislation.

Example 1:

*A group of cull sows is transported a distance of 300km from a farm near Wagga Wagga to Forbes saleyard in the back of an uncovered trailer in the middle of summer. Upon arrival, one sow is found dead as a result of heat stress and the remaining sows are sunburnt as a direct result of the trip. Under the Prevention of Cruelty to Animals Act, the producer could be fined \$5,500 or face 6 months imprisonment for the sunburnt pigs (cruelty) and/or be fined \$22,000 and face 2 years' jail for the dead sow (aggravated cruelty).*

Example 2:

*A grower pig is detected in lairage at an abattoir in Victoria with a severe tail bite extending into its back so vertebrae are exposed. This pig had not been isolated from its pen-mates when the bite was first detected by the farmer two weeks prior to dispatch and no treatments have been given. Under the Prevention of Cruelty to Animals Act, the owner or person in charge of this pig could be prosecuted for cruelty for failing to provide veterinary or other appropriate attention or treatment for the animal. The fine for cruelty in Victoria is 120 penalty units (\$122.14/pu) or 12 months jail for an individual and 600 pu for a body corporate.*

Example 3:

*A weaner pig is showing signs of meningitis (lying on its side, lack of co-ordination, inability to feed and drink, paddling) on a farm in the Northern Territory. The pig has been treated once daily for the last 3 days with penicillin and an anti-inflammatory. It is showing no signs of recovering and is becoming increasingly weaker. Under the Animal Welfare Act, 1992, if the animal is suffering, the owner or person in charge of this pig could be prosecuted for neglect for failing to take reasonable action to alleviate the suffering – ie. euthanasing the non-responding animal in a timely manner.*

Example 4:

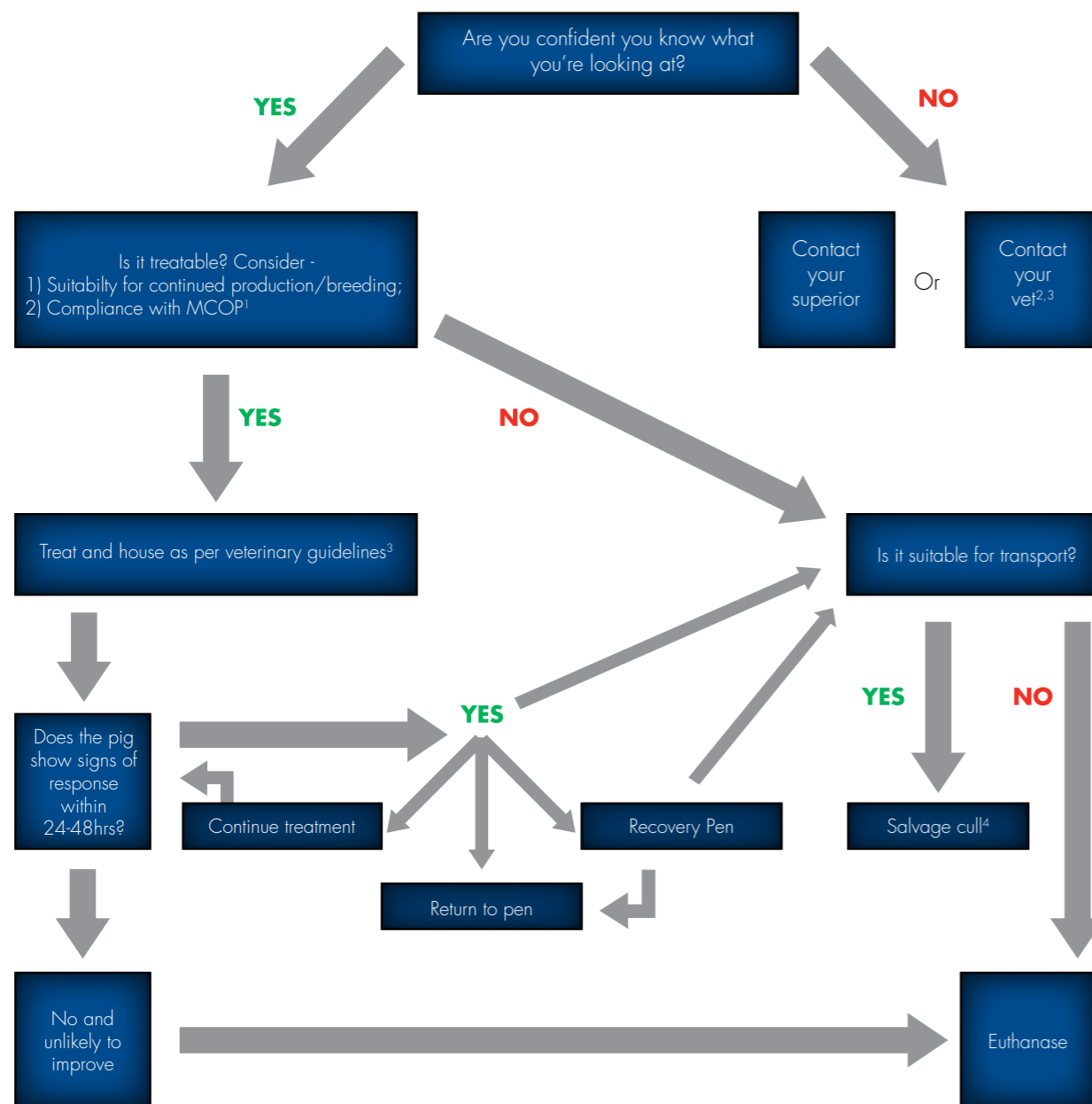
*An outdoor pig producer in Western Australia who has owned pigs for two months and has no prior pig experience is inserting nose rings into his pigs' noses to prevent excessive destruction of his pasture. Under the Animal Welfare (Pig Industry) Regulations 2010, nose ringing is defined as a "significant husbandry procedure" and must only be carried out by a "suitably qualified" person or by a person acting under the direct supervision of a suitably qualified person. In Western Australia, this person would not be "suitably qualified" as (at a minimum) they have not been responsible for at least 12 months for the care of pigs in a business in which pigs are kept, or used, for commercial purposes and which has had in place during that period a herd health programme. This person risks a fine of \$2500.*

**Animal welfare** - Veterinarians treating sick and injured pigs must ensure that the welfare of each pig is prioritised. They must also be familiar and compliant with the 2007 Model Code of Practice for the Welfare of Animals, Pigs (MCOP) and relevant state legislation.

When a stockperson detects a sick or injured pig, they have a number of decisions to make regarding the most appropriate way of treating and managing the animal. The flow chart below summarizes an appropriate decision-making process. Producers can use this decision tree to assist them in deciding whether the pig should be treated, sent for salvage slaughter or euthanased.

**Note: Failure to act to manage a sick or injured pig is not acceptable in any situation. Pigs must not be sent to a saleyard/abattoir unless they are Fit to Load and it is ensured that they are pain-free both during transit and in any period required to clear a medication WHP/ESI prior to transit.**

**DECISION TREE - MANAGEMENT OF SICK AND INJURED PIGS**



At the time of writing of this document, reporting of welfare concerns by veterinarians was not mandatory at a legal/regulatory level in any state of Australia. It is anticipated that this may change in the future.

Veterinarians must remain compliant with all relevant legislation, and additionally must act in a professional and ethical manner at all times. The following is provided as a guide for veterinarians working in the pig industry.

- Veterinarians should be familiar and at all times compliant with animal welfare, pharmaceutical and veterinary legislation relevant to the State/States in which they are practising.
- Veterinarians should also be familiar with the MCOP. It is recommended that veterinarians have ready access to a copy of this document, as a reference in the course of daily practice.
- Veterinarians should advise clients of their obligations under relevant legislation and with respect to the MCOP.
- Veterinarians should discuss with clients, concerns that arise with relation to the care and management of sick and injured pigs, and to other welfare concerns, when detected during the course of daily practice. Veterinarians should additionally document these concerns, in writing, to their client. It is recommended that veterinarians provide advice as to possible solutions, and that a time frame for resolution is presented to the client. It is also recommended that the veterinarian put in place a mechanism to review and re-evaluate the status of noted concerns.
- The importance of the veterinarian in supporting and educating clients with respect to the care and management of sick and injured pigs, and welfare in general, is emphasised.
- Veterinarians should at all times maintain timely, accurate and up-to-date records of all instructions given to clients regarding the detection and management of health and welfare concerns, including advice notes for the treatment of sick or injured pigs.
- Veterinarians who are also auditors under the Australian Pig Industry Quality Assurance Program (APIQ<sup>®</sup>) may have additional responsibilities when identifying welfare concerns.

References

1. Model Code of Practice. 2. Herd Health Plan. 3. Vet Treatment Guide. 4. Fit to Load guide.

## SICK AND INJURED PIGS TRIAGE DOCUMENT

A united, consistent and repeatable veterinary approach to the management of sick and injured pigs is considered critical both to optimising the health and welfare of pigs and to supporting the pivotal role of veterinarians in these areas. The following guidelines have been designed to standardise the management of sick and injured pigs by providing a reference tool to underpin consistency and repeatability within the APV.

Management outcomes for sick and injured pigs comprise four action categories as listed in the following table. Subsequent tables map specific disease conditions to these action categories. Where a treatment activity is advised, the approved medication guidelines provided by the veterinarian for the production system in question should be consulted.

Category	Descriptors	Action	2a/2b Outcomes
1	<p>Is in severe pain and is unlikely to respond to treatment</p> <p>Irreversible impediment to ability to freely access feed and/or water</p> <p>Emaciation/debilitation caused by chronic disease</p> <p>No improvement, or deterioration, after 3-5 days of treatment</p> <p>Pig will never be Fit to Load</p> <p>Is not economically-sound to treat</p>	Immediate euthanasia	Remain in hospital pen for treatment OR Move to recovery pen OR Return to Pen OR Euthanasia
2a	Likely to recover with intervention by a competent stockperson but risks deterioration if left in its home pen. Includes pigs with systemic illness, septicemia, extensive and/or painful wounds or otherwise severe disease.	Hospitalize, treat, review at least twice daily, euthanase if no response to treatment within 24-48h	
2b	Likely to recover with intervention by a competent stockperson but risks deterioration if left in its home pen. Includes conditions judged to be less severe than 2a and/or conditions which justify a longer recovery period. Includes pigs in body condition score 2 or less and/or pigs less able to compete with pen mates for food and/or water.	Hospitalize, treat, review at least twice daily, euthanase if no response to treatment within 2-10d	
3	Likely to recover with intervention by a competent person and is unlikely to deteriorate if left in its home pen.	Leave in pen, treat, inspect at least twice daily.	
4	<p>Is not in severe pain, including during WHP/ESI clearance period</p> <p>Is freely able to stand and walk on all four legs</p> <p>Is capable of being loaded and transported</p> <p>Is free of clinical signs of disease</p> <p>Will not pose a risk to public health</p> <p>Condition will not worsen during or after transport</p> <p>There is no evidence of previous neglected severe illness/injury</p>	Transport to abattoir for processing. Animals must be fit to load and must remain pain-free during the WHP/ESI period and during transit. If compromised, load last, mark as suspect, and separate to pen at the back of the truck.	

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## BODY SYSTEMS/CONDITIONS

The following tables relate to body systems and clinical conditions of varying severity where action is required according to defined categories. Highlighted boxes relate to specifically to analgesic usage.

Category	Action	1	2a	2b	3	4
Body Condition	Pig in condition score 2 or less			x		
	Pig in condition score 2 or less that is under treatment and fails to improve, or deteriorates	x				
	Pig less than 50% of average weight of pen/shelter mates			x		
Ear	Aural haematoma				x	x
		Ear swollen, shrunken or misshapen but skin intact and no signs of infection				
		Ear swollen or misshapen with signs of infection, broken skin and/or discharging wound		x	x	x
	Ear biting	Ear intact: Superficial wound in a localised area; minimal bleeding and no evidence of discharge or infection			x	x
		Ear not intact with evidence of bleeding and/or infection and/or haematoma formation			x	
Head tilt	Ear extensively damaged with bleeding +/- infection +/- haematoma formation +/- exposure of deeper tissue	x	x			
	Symptoms of middle ear infection - head tilt, head/ear shaking, +/- otherwise bright, alert and responsive and eating and drinking normally, +/- symptoms similar to meningitis if severe (see neurological)			x		
Eye	Blind		x			
	Blind in one eye				x	
	Other Eye		x			
Intestine	Diarrhoea/scours					x
		Mild scours with no blood in an otherwise bright, alert and responsive pig that is eating and drinking normally				
		Profuse and/or bloody scours (2a if results in deterioration as per line below)		x	x	
		Scours associated with poor body condition, concurrent systemic illness, or impacted ability to access feed or water		x		
	Pot belly pig	Scour of any nature associated with extreme abdominal pain	x			
	Rectal stricture	Bloated abdomen	x			
	Losing condition, bloated abdomen, +/- history of rectal prolapse	x				

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## BODY SYSTEMS/CONDITIONS

Category	Action
1	Immediate euthanasia
2a	Hospitalize, treat, review at least twice daily, euthanase if no response to treatment within 24-48h
2b	Hospitalize, treat, review at least twice daily, euthanase if no response to treatment within 2-10d
3	Leave in pen, treat, inspect and review at least twice daily
4	Transport to abattoir for processing, providing Fit to Load & pain free during WHP/ESI clearance period & in transit
	Anti-inflammatory analgesic preparations strongly recommended. Analgesia must be used where significant pain is evident or likely to occur

	1	2a	2b	3	4
Hernia	Extensively damaged, infected, ulcerated, bleeding, fly blown or with concurrent poor condition/ other disease	x			
	Hernia resulting in impediment to pig's ability to walk, eat, drink or otherwise behave normally	x			
	Any hernia larger than 30cm or touching the ground	x			
	Hernias that are outside the above criteria			x	x

Limbs	Limb broken	x			
	Completely non weight-bearing on a limb	x			
	Partial weight-bearing on a limb		x	x	
	Swelling of any joint to more than twice normal size regardless of impact on gait and/or ability to access feed and water			x	
	Swelling of any joint to less than twice normal size; gait may be mildly affected but pig is able to weight bear on all limbs and is able to access feed and water without difficulty				x
	Digit missing and/or underlying bone/tendons exposed	x			
	Superficial damage/tear to claw				x
	Superficial wound in a localised area				x
	Marked superficial wounds affecting multiple limbs and/or extensive areas of an individual limb		x		
	Erosive or ulcerated skin lesion exposing to muscle, bone or tendon	x	x		
Difficulty standing	Bursitis - swelling at bony prominence that is not inflamed and does not affect gait				x
	Paralysis	x			
	Downer pig, recumbent and unable to stand and/or walk	x			
	In extreme distress when encouraged to stand	x			
	Freely able to stand and weight bear on all limbs, but extreme distress when encouraged to walk	x	x		
	Freely able to stand & weight bear on all limbs but ability to access feed/water affected, or predisposed to bullying			x	
	Freely able to stand on all limbs; gait is affected but pig is able to access feed and water without difficulty				x
					x
					x
					x

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## BODY SYSTEMS/CONDITIONS

Category	Action
1	Immediate euthanasia
2a	Hospitalize, treat, review at least twice daily, euthanase if no response to treatment within 24-48h
2b	Hospitalize, treat, review at least twice daily, euthanase if no response to treatment within 2-10d
3	Leave in pen, treat, inspect and review at least twice daily
4	Transport to abattoir for processing, providing Fit to Load & pain free during WHP/ESI clearance period & in transit
	Anti-inflammatory analgesic preparations strongly recommended. Analgesia must be used where significant pain is evident or likely to occur

CNS/ Neurological	Paralysis	x				
	Difficulty standing					
	Head tilt/abnormal behaviour	Downer pig, recumbent and unable to stand and/or walk	x			
		Symptoms of meningitis - recumbent, paddling, reduced awareness &/or responsiveness, abnormal eye movements		x		
	Symptoms of middle ear infection - head tilt, head/ear shaking, +/- otherwise bright, alert and responsive and eating and drinking normally, +/- symptoms similar to meningitis if severe		x	x		
	Symptoms of meningitis - recumbent, paddling, reduced awareness/response, abnormal eye movements, head tilt	x	x			

Prolapses	Small (less than trotter size of same size pig) fresh, intact prolapse in an otherwise bright, alert and responsive pig that is eating and drinking normally - isolate on farm & treat, or transport to abattoir individually within 72 hours			x	
	Extensively damaged, bleeding, infected or fly blown prolapse	x			
	Prolapse that is not able to be replaced by a competent person, using pain relief, within 48 hours	x			
	Any untreated prolapse > 72 hours old	x			
Uterine prolapse	Any uterine prolapse without effective veterinary intervention within 6 hours	x			
Vaginal prolapse	Any vaginal prolapse without effective veterinary intervention	x			

Reproductive	Non-productive (no piglets being produced) with visible signs of sow discomfort and/or suspect retained piglets with signs of systemic illness	x			
	Productive - piglets being produced after intervention (medical/manual) (farrowing crate may function as hospital pen)			x	
	Mild to severe mastitis with or without associated ill thrift, erosion/ulceration/abscessation of mammary tissue		x		
	Any uterine prolapse without effective veterinary intervention within 6 hours	x			
	Mild vaginal discharge in an otherwise healthy sow				x
	Profuse and/or malodorous and/or purulent vaginal discharge and/or bloody urine			x	x
Vaginal prolapse	Any vaginal prolapse without effective veterinary intervention	x			

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**BODY SYSTEMS/CONDITIONS**

Category	Action
1	Immediate euthanasia
2a	Hospitalize, treat, review at least twice daily, euthanase if no response to treatment within 24-48h
2b	Hospitalize, treat, review at least twice daily, euthanase if no response to treatment within 2-10d
3	Leave in pen, treat, inspect and review at least twice daily
4	Transport to abattoir for processing, providing Fit to Load & pain free during WHP/ESI clearance period & in transit
	Anti-inflammatory analgesic preparations strongly recommended. Analgesia must be used where significant pain is evident or likely to occur

	1	2a	2b	3	4
Respiratory				x	
	Coughing or sneezing in an otherwise bright, alert & responsive pig that is eating and drinking normally				
	Difficulty breathing (thumping) &/or coughing with evidence of lost condition and/or systemic or other concurrent illness or impediment to feed/water intake	x			
	Severe respiratory distress	x			

Abscess	Localised abscess in an otherwise bright, alert and responsive pig that is eating and drinking normally			x	x
	Multiple abscesses or a localised abscess with signs of concurrent ill thrift		x		
	Abscess resulting in impediment to pig's ability to walk, eat, drink or otherwise behave normally	x			
Erysipelas	Characteristic skin lesions in an otherwise bright, alert and responsive pig that is eating and drinking normally				x
	A pig demonstrating signs of ill thrift, fever, deterioration, lameness/stiffness/reluctance to move, extensive skin lesions and/or inability to access adequate feed or water		x		
	Superficial wound in a localised area				
Wounds and pressure sores	Superficial wounds affecting an extensive area or multiple parts of body (Eg wounds from fighting)		x		
	Erosive or ulcerated skin lesion exposing to muscle, bone or tendon	x	x		

Tail	Tail intact; superficial wound in a localised area; minimal bleeding and no evidence of discharge or infection			x	x
	Tail not intact with evidence of bleeding and/or infection		x		
	Tail extensively damaged or missing and deeper tissue exposed; wound may extend into base of spine	x			

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Sick, injured and recovering pigs are compromised populations and require special care and attention to optimise their health, welfare and chance of recovery.

Compromised pigs:

- are less competitive for feed and water than healthy pigs
- require more rest than healthy pigs
- are at risk for bullying by other pigs, including other sick, injured and recovering pigs
- may have special heat/cooling requirements

As a minimum, all hospital and recovery pens used in the management of sick and injured pigs must provide:

- a clean, dry, warm and draft-free environment
- adequate warmth for the class/category of pig being housed in them. Heat provision mechanisms include but are not limited to the use of heat lamps, bedding, covered areas and/or situation of the pen in a warm location.
- well drained conditions without accumulation of excess dung
- a solid area for all pigs to lie
- at least the minimum space requirements for pigs, as per the Model Code of Practice for the Welfare of Animals (Pigs)
- feed that is fresh, good quality, appropriate to age/stage/condition and readily accessible to all pigs in the pen.
- fresh, clean (potable), cool water that is readily accessible and ideally close to the feed source
- easy access to facilitate and ensure twice daily monitoring, recording and treatment of pigs, and to minimise any associated stress to pigs.
- adequate lighting and ventilation
- protocols to minimise the risk of spread of disease. For example foot baths, disinfection, hand washing, pen hygiene and staff management.

**Note: Pigs should not be housed in isolation except where there is no alternative option available or where it is deemed most appropriate for their health and welfare.**

All pigs in a hospital or recovery pen must be:

- clearly identified on an individual basis and treatment records maintained to monitor duration of illness of individual pigs and response to treatment. This ensures compliance with welfare obligations and enables timely identification and euthanasia of pigs that are not responding to treatment. Individual identification and treatment of pigs also minimizes the risk of violative chemical residues at processing.
- checked at least twice daily by a competent stock-person, and treated where relevant, under veterinary advice.
- easily able to access feed and water with ease. Where pigs are unable to feed or drink on their own, for example where their mobility is impaired, feed and water must be provided to them at least twice daily, more often according to conditions, and these activities should be recorded on treatment sheets/hospital records.

- stocked with consideration given to size, age, condition (illness/injury) and severity. For example, avoid housing small, less competitive pigs with larger/more active pigs that may bully them. Also avoid housing pigs with infectious conditions e.g. scours/coughing with pigs with injuries. Pigs under treatment should not be housed with recovering pigs.
- housed with consideration for their individual social needs. In most cases pigs should not be housed in isolation. Exceptions include but may not be limited to pigs suffering from meningitis.

It is recommended that pigs that are compromised in their ability to access feed or water, or otherwise likely to be subjected to compromised welfare, are housed separately to pigs that are able to adequately ambulate and access feed and water. In this way, compromised animals are less likely to be subjected to bullying or other negative welfare outcomes. It is recommended that housing strategies for compromised pigs comprise:

- leaving pigs in their home pen, providing this is not detrimental to their recovery. Movement between pens, including to a hospital pen, represents a source of stress for pigs.
- hospital pens – for pigs actively undergoing treatment and/or with compromised ability to access feed or water and/or pigs that might otherwise be subject to compromised welfare.
- recovery pens – for pigs that are recovered, recovering and/or otherwise able to carry out basic eating/drinking/behavioural functions without risk of compromised welfare.
- return of pig to general pig population where no evidence of potential compromise to pig welfare is deemed likely.

Persons managing hospital pens must ensure that:

- staff treating and caring for sick, injured and recovering pigs meet industry competency requirements. These are available from state livestock authorities and from Australian Pork Limited at [Stockperson Training and Competency Requirements](#).
- sufficient hospital pens and space are available to house sick and injured pigs
- sufficient time is allocated each day to monitor and manage hospital and recovery pens.
- individual stock are inspected at least twice daily, treated (where relevant), monitored for duration of illness and response to treatment and records kept.
- where pigs do not respond to treatment (refer to Categories and Actions in this guide), that euthanasia is carried out promptly and humanely.
- hospital pens and recovery pens, and the pigs housed in them, are managed in accordance with the MCOP and the minimum standards for hospital pens and hospitalised pigs described in this document.
- stock are managed such that individual pigs are not bullied, including by other sick, injured or recovering pigs in the hospital pen. Recovery pens are recommended as a means of ensuring that the welfare of acutely sick and/or injured pigs is not compromised by those more fit and able.

Special considerations are needed in the care of pigs demonstrating signs of meningitis.

These include that:

- pigs suffering meningitis represent a major potential welfare concern. These pigs must be managed with intensive care, supportive and medical treatment and monitoring. Pigs should be checked every 2-3 hours and provided with oral supportive therapy in the form of feed and water. Where these conditions cannot be guaranteed it is recommended that affected pigs be euthanased.
- pigs suffering meningitis that do not demonstrate a drink reflex should be euthanased.
- hospital facilities for pigs with meningitis should be dark and quiet, and pigs should be housed in isolation in the early recovery period.
- under no circumstances should a recumbent pig suffering meningitis be housed such that it may be subject to physical trauma and/or over-stimulation caused by other pigs.

### Euthanasia of Pigs

As per the MCOP, which contains further information on the humane destruction of pigs, the APV advises that:

- the method of destruction must cause sudden unconsciousness, with death occurring whilst the pig is unconscious.
- euthanasia must only be carried out by a person who is suitably trained to perform euthanasia.

In addition, the APV recommend that blunt trauma only be used for piglets in the period **prior to weaning** and **under 10kg** bodyweight. Blunt trauma should not be used in any pig after the point of weaning, or in any pig over 10kg regardless of its weaning status.

### Hernias and Rectal Prolapses

As at the time of printing of this document, the APV has identified the management of hernia and rectal prolapse conditions as areas requiring further research.

Veterinarians treating sick and injured pigs must comply with both Commonwealth and State or Territory legislation relating to the supply and use of veterinary medicines and pesticides. Breaches of relevant legislation or of Australian Veterinary Association guidelines could constitute unprofessional conduct.

Veterinarians must also be aware of quality assurance requirements pertaining to Australian piggeries under the Australian Pork Industry Quality Assurance Program (APIQ<sup>✓</sup>®). Breaches to APIQ<sup>✓</sup>® food safety, animal welfare, biosecurity, traceability and/or quality standards may impact on the certification of individual producers and hence their capacity to sell livestock. Furthermore breaches to APIQ<sup>✓</sup>® may have far-reaching consequences for the Australian Pig Industry as a whole, compromising domestic and export markets.

Full detail regarding prescription and dispensing of medications is outlined in the Australian Veterinary Association Guidelines for Prescribing, Authorising and Dispensing Veterinary Medicines, available at [AVA Prescribing Guidelines](#)

APV specific guidelines are in the process of being drafted.

Further detail regarding APIQ<sup>✓</sup>® is available at [www.apiq.com.au](http://www.apiq.com.au)

When prescribing medication for use in pigs, veterinarians must ensure that they consider -

- **Food producing animals** - Pigs in Australia are food producing animals and as such may be subject to restrictions in the use of certain medications. Any group of pigs may be considered to be a herd, and the definition of a single pig varies by state. Compounds generally considered to be banned for use in food-producing animals are listed below.
  - Anabolic steroids
  - Antithyroid agents – e.g. thiouracils, carbimazol, mercaptobenzimidazol, tapazol
  - Beta agonists – clenbuterol, salbutamol, except ractopamine (registered for use in pigs in Australia)
  - Carbadox
  - Chloramphenicol
  - Chloroform
  - Chlorpromazine
  - Colchicine
  - Coumaphos
  - Dapsone
  - Dihydrostreptomycin (streptomycin)
  - Dimetridazole
  - Fluoroquinolones – e.g. enrofloxacin, difloxacin
  - Gentamicin
  - Glycopeptides – e.g. Avoparcin, vancomycin
  - Nitrofurans
  - Nitroimidazoles – e.g. metronidazole, ronidazole, ipronidazole
  - Resorcylic acid lactones
  - Stilbenes/oestrogens – e.g. diethylstilbestrol

- **Unregistered products** – Unregistered products should not be used to treat food-producing animals, excluding single animals and as per specific state legislation. The definition of a “single animal” varies by state.
- **Off Label use** – Off label use is prescribed use in a manner outside those permitted by approved label directions, including species, dosage, and treatment interval. When a medication is used off label:
  - **use must not** occur contrary to a specific restraint.
  - products banned for use in food-producing animals must not be used at all, unless specific state legislation allows their use on single animals, as defined in their legislation.
  - use should only occur where a product is already registered in at least one major food producing species.
  - veterinarians must ensure that consideration is given to the prevention of illegal residues in edible products. An appropriately long WHP/ESI should be established and provided, in writing, to the client.
  - all treated animals should be identified in a manner that ensures identification through to expiry of any relevant WHP/ESI.
  - chemicals formulated for oral or external use must not be used by injection.
  - human medicines should not be used for treatment of food-producing animals where approved veterinary medications are available.
  - the veterinarian assumes full legal responsibility for the use of any drug contrary to as registered and on the manufacturer’s label and/or when an unregistered chemical is used.
  - clients must be informed of off-label use and documented consent should be obtained.
  - records of off-label prescription, use or supply should be kept
  - off label use of non-restricted (non S4) medications by owners of food producing animals is illegal.
- **Restraint labels** - detail under a specific *Restraint* heading prohibits **any** off label use in contravention of that statement. Veterinarians must not prescribe any chemical for use contrary to a *Restraint* statement. Other restraint labels, for example those commencing with DO NOT, may apply only in certain jurisdictions, including Queensland and Victoria.

- **General** – Veterinarians prescribing medications for use in pigs should ensure:
  - **species knowledge** – an adequate knowledge of the species being treated.
  - **therapeutic need** – including consideration of potential residues in pigs for food production.
  - **client understanding** – regarding use of medications, including dose, route, method of administration, side effects and, importantly, **applicable withholding periods (WHP) and export slaughter intervals (ESI)**.
 

**Note** – For off-label use of medications in food-producing animals, the responsibility for advising on WHPs, ESIs and administration directions rests with the veterinarian. Written advice should include, as a minimum:

    - name of product
    - date of treatment
    - identification or description of stock to be treated
    - appropriate WHPs and ESIs
  - **client competence** – where medications are dispensed for use by a “responsible agent” rather than directly by the veterinarian, the veterinarian must ensure that the intended user is adequately competent. Industry competency requirements must be observed. Information regarding these can be obtained at [www.australianpork.com.au](http://www.australianpork.com.au) or [www.apiq.com.au](http://www.apiq.com.au)
  - **records** – must be kept, including treatment advice details and all off-label use. A duplicate of any advice note or prescription must be retained by the veterinarian.
  - **identification of all treated animals** – ideally permanently (eg ear tag) but at all times sufficient to ensure identification through to expiry of any applicable WHP/ESI.

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