

CLOSTRIDIUM PERFRINGENS TYPES C & D ANTITOXIN
EQUINE ORIGIN

Colorado Serum
Antitoxin

Clostridium perfringens Types C & D Antitoxin, Equine Origin

Active Ingredient(s): Prepared from the blood of horses hyperimmunized with Clostridium perfringens types C and D toxin.

Contains phenol and thimerosal as preservatives.

Indications: A potent multivalent antitoxin specific for the temporary prevention of clostridial enterotoxemia in cattle, sheep and goats caused by types C and D toxin and in swine when caused by type C.

Dosage and Administration: Injections should be made as soon as possible after birth.

CLOSTRIDIUM PERFRINGENS TYPES C & D ANTITOXIN, EQUINE ORIGIN confers a prompt passive immunity lasting about 14–21 days. Administer subcutaneously using aseptic methods. The following doses are recommended:

Suckling lambs, goats and pigs	5 mL
Suckling calves	10 mL
Feeder lambs and pigs	10 mL
Feeder calves and cattle	25 mL

Clostridium perfringens type D is not known to cause disease in swine.

Precaution(s): Shake well before withdrawing. Store in the dark at 2–7°C.

Use the entire contents when the bottle is first opened. Sterilize needles and syringes by boiling in clean water.

CAUTION(s): Anaphylactic reactions sometimes follow the use of products of this nature. The risk of this reaction increases when injections are intravenous. If noted, administer epinephrine or an equivalent drug. Antihistamines injected prior to or simultaneously with intravenous administration may reduce the incidence of shock.

For veterinary use only.

WARNING(s): Do not vaccinate within 21 days before slaughter. If the antitoxin must be used under emergency conditions, the animals treated should be withheld from market for 21 days after injection.

Discussion: Type C, sometimes called hemorrhagic enterotoxemia, occurs most often in calves and in swine; type D, occasionally referred to as pulpy kidney disease, most often occurs in sheep and goats. Affected young animals are commonly suckling dams that are heavy milk producers. Because both types of toxin have been identified as the cause of problems in all four species of animals and clinical diagnosis is difficult, more reliable protection is ensured by injection of a multivalent antitoxin.

The essentials for activating Clostridium perfringens, rich ingesta and bowel stasis, are likely to be present when animals are on feedlot rations, and digestive problems arise because of excessive grain concentrates. It is for this reason that the infection is also called “overeating” disease. When the disease appears in feeder livestock, the prompt use of antitoxin can often mean the difference between the success of treatment and failure.

Antitoxins contain antibodies formed as a result of hyperimmunization with a specific toxin and which are capable of neutralizing that toxin. An almost immediate response is provided at the time of injection. Antitoxins do not actively stimulate the antibody system of the vaccinated animal and the resulting immunity is passive, lasting only until the injected antibodies are eliminated from the system, a period of approximately 14–21 days.

Clostridium perfringens is a micro-organism that normally exists in the lower intestinal tract of most domestic animals and which lives on decaying organic matter. It is opportunistic and when triggered by proper circumstances becomes highly toxigenic. Fatal intoxication causing a hemorrhagic enteritis and peritonitis follows. Lethal toxins can be grown in nutritive media in the laboratory in just a few hours. As feeds rich in protein and carbohydrates are ingested a suitable medium for the development of the organism is provided in the animals. Progress of the disease is, therefore, almost as rapid as the growth of the organism in the laboratory. Deaths frequently occur without symptoms ever being observed

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Disclaimer

Every effort has been made by Jeffers to ensure the accuracy of the information listed above. However, it remains your responsibility to become familiar with the products you are purchasing. Please consult your family veterinarian if you have any questions.