

H25 – Prevention and treatment of sows with shoulder lesions

The aim is no sows with shoulder lesions

1. Take steps to prevent shoulder lesions

- Keep sows and gilts in medium condition throughout the entire cycle. Most important is 14-17 mm backfat at transfer to the farrowing facility
- If a sow was previously about to develop shoulder lesions or has a history of shoulder lesions, provide a shoulder jacket/rubber mat upon transfer to the farrowing facility
- Adjust the farrowing crate to give the sow max freedom of movement
- Check that the sows frequently stand up
- A dry and firm, even bedding in the farrowing pen reduces the risk of shoulder lesions

2. Identify incipient shoulder lesions

- Daily check sows' shoulders for reddening
- Flies on the shoulder may indicate incipient shoulder lesions
- Incorporate this into the daily routines

3. Treatment of shoulder lesions

- Reddening of the skin: provide rubber mat, shoulder jacket/pads
- Reddening: Daily apply zinc ointment
- Shoulder lesions below 2 cm: Apply zinc ointment or Stalosan ointment to keep the skin flexible
- Sows with light shoulder lesions **must** be treated according to the vet's instructions to prevent the lesions developing into severe lesions.
- Sows with severe shoulder lesions **must be moved to a hospital pen** and treated according to the vet's instructions. Alternatively, destroy the sow
- Keep an extra eye on the sow in the hospital pen; if you see no improvement within a reasonable time, destroy the sow



Fact
Use the clinical scale for assessing shoulder lesions

No or small shoulder lesions:

No skin changes or skin changes and lesions smaller than 2 cm in diameter.

Light shoulder lesions:

A lesion with clear edges measuring min. 2 cm in diameter and that is not a severe shoulder lesion.

Severe shoulder lesions:

A lesion with clear edges measuring min. 5 cm in diameter and is surrounded by a thickened edge.

A shoulder lesion measuring card will help you assess shoulder lesions.

Fact

Sows are destroyed with a captive bolt pistol followed by exsanguination or with a pithing rod

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0.	Shoulder lesions are somewhat identical to bed sores in humans. They develop as a consequence of long-term pressure on the tissue. Sows are particularly exposed in areas where the shoulder bone lies just beneath the skin.
1.	Thin sows lack the protective layer of fat above and around the scapula and are therefore highly susceptible to shoulder lesions. Minimum 14 mm backfat are required to prevent shoulder lesions. Sows with less than 13 mm backfat are considered risk sows and should be moved directly to a pen with a rubber mat. Frequent feedings (5-8 times a day) which make the sows stand up frequently have been seen to lower the frequency of shoulder lesions.
1.	Most shoulder lesions develop within the first weeks after farrowing. It is essential to ensure optimum body condition and keep the sow's lying time to a minimum.
1.	Sows that have once suffered from shoulder lesions are twice as likely to develop shoulder lesions in the subsequent lactation period. Therefore, always note the degree of shoulder lesions in the sow log and use this information in the culling strategy.
1.	The sow must be able to get up and lie down without problems as it will otherwise lie down for too long at a time. At transfer to the farrowing facility, adjust the farrowing crate in the outer position and only adjust inwards at farrowing. 1-3 days after farrowing, return the farrowing crate to the outer position, but without the sows being able to turn around in the crate. Frequent feedings will make the sows get up more frequently.
1.	A wet bed softens the skin and makes it less resistant to rubbing against the floor.
1.	Fully slatted floors put an uneven pressure on the shoulder and there is thus greater risk of developing shoulder lesions in pens with fully slatted floors compared with a partially slatted floor.
1.	Check for irregularities in the floor by clenching your fist and moving your knuckles over the surface.
2.	Immediate intervention in due time is essential to stop the development of the shoulder lesions. Sows <u>must</u> be inspected daily for shoulder lesions on both shoulders. The easiest time to do this is during feeding when all sows are standing up. Pay special attention to thin or sick sows and large sows with difficulty getting up in the farrowing crate.
2.	Fluid is excreted when the shoulder reddens. This attracts flies to the shoulder and may therefore be an indication of incipient shoulder lesion.
3.	Intervene at incipient reddening and swelling of the skin to prevent the condition from deteriorating further. Make the sow a soft bed in the form of straw (hospital pen), rubber mat or shoulder jacket/pad. Check daily how the lesion develops. The drawback of rubber mats is that they make it difficult for the sow to get rid of heat which generates a humid environment and makes the skin on the shoulder more sensitive.
3.	Always keep sows with severe shoulder lesions in a hospital pen. Wash inflamed shoulder lesions thoroughly in soapy water and rinse with clean water, and treat daily with, for instance, ointment or spray containing antibiotics.
3.	Pay special attention to the sow in the hospital pen; if you see no improvement within a reasonable time, destroy the sow. Destroy the sow using a captive bolt pistol or a pithing rod.
3.	Sows with severe shoulder lesions are not fit for transport. If the lesion is covered by a firm crust or granulation tissue, the sow may be fit for transport under special conditions. In such cases, the sows must not be shipped to a collection point for export.