

Medical Management of Disease in Ornamental Fish



What to do....what to do?

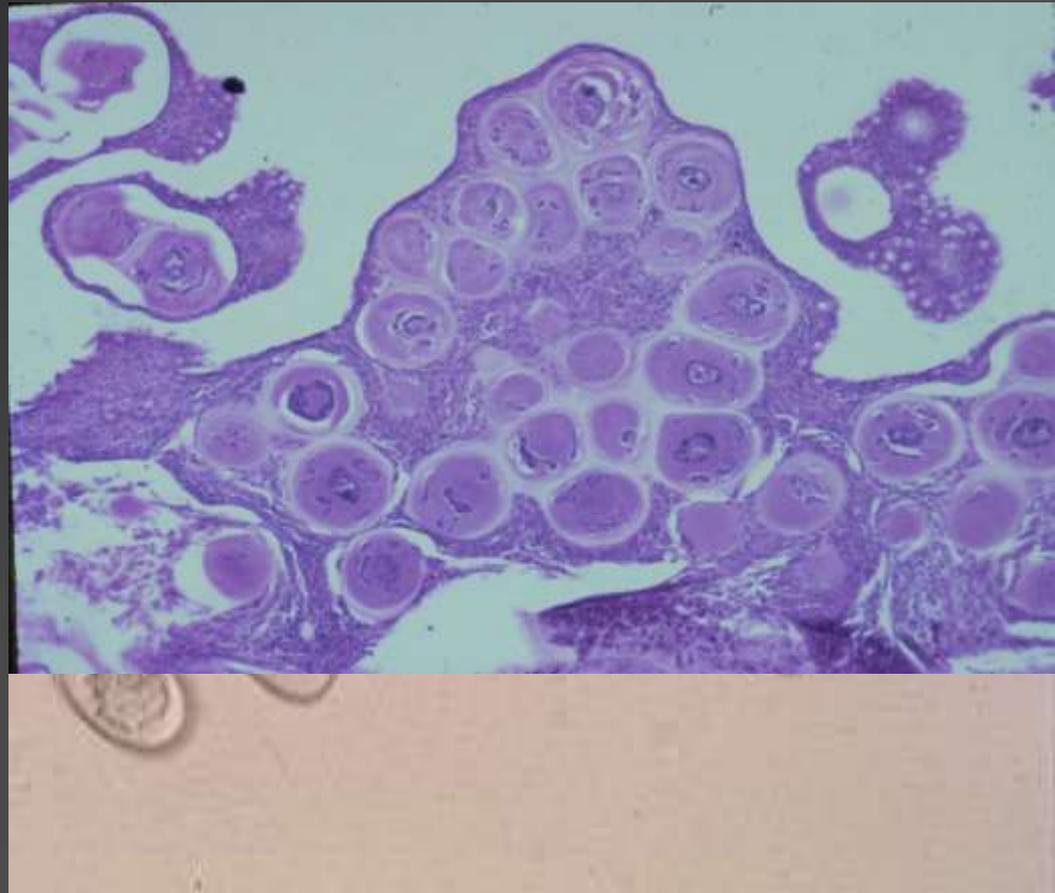


Avoiding the shotgun approach



Avoiding the shotgun approach

- Empirical treatment?
 - What are you treating??
 - Bacteria?
 - Parasites?
 - Fungus?
 - Virus?
 - Water quality?
 - Expense associated with random treatments
 - \$\$\$
 - Losses associated with misdiagnosis/empirical treatment
 - \$\$\$

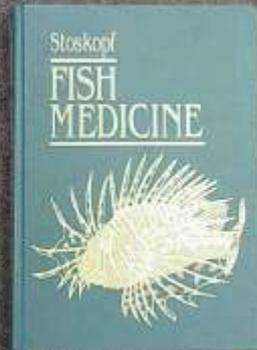
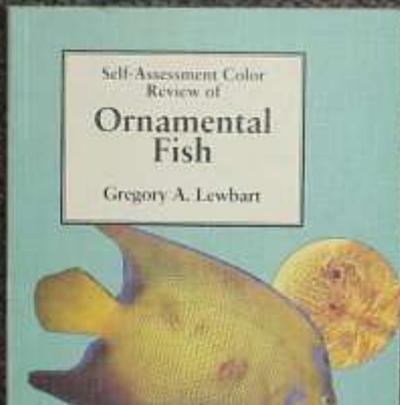
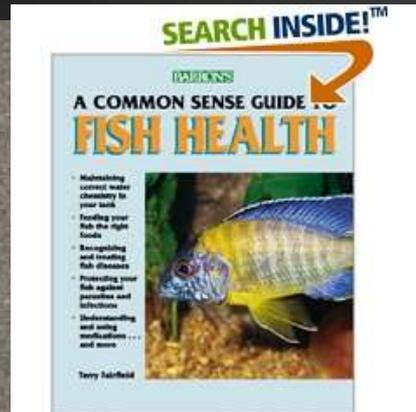
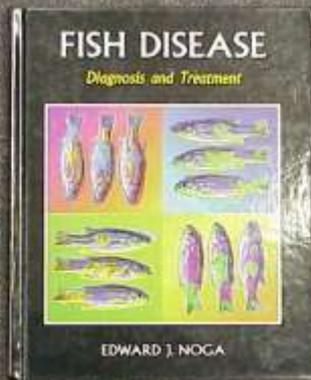


Setting up a fish diagnostic and treatment plan



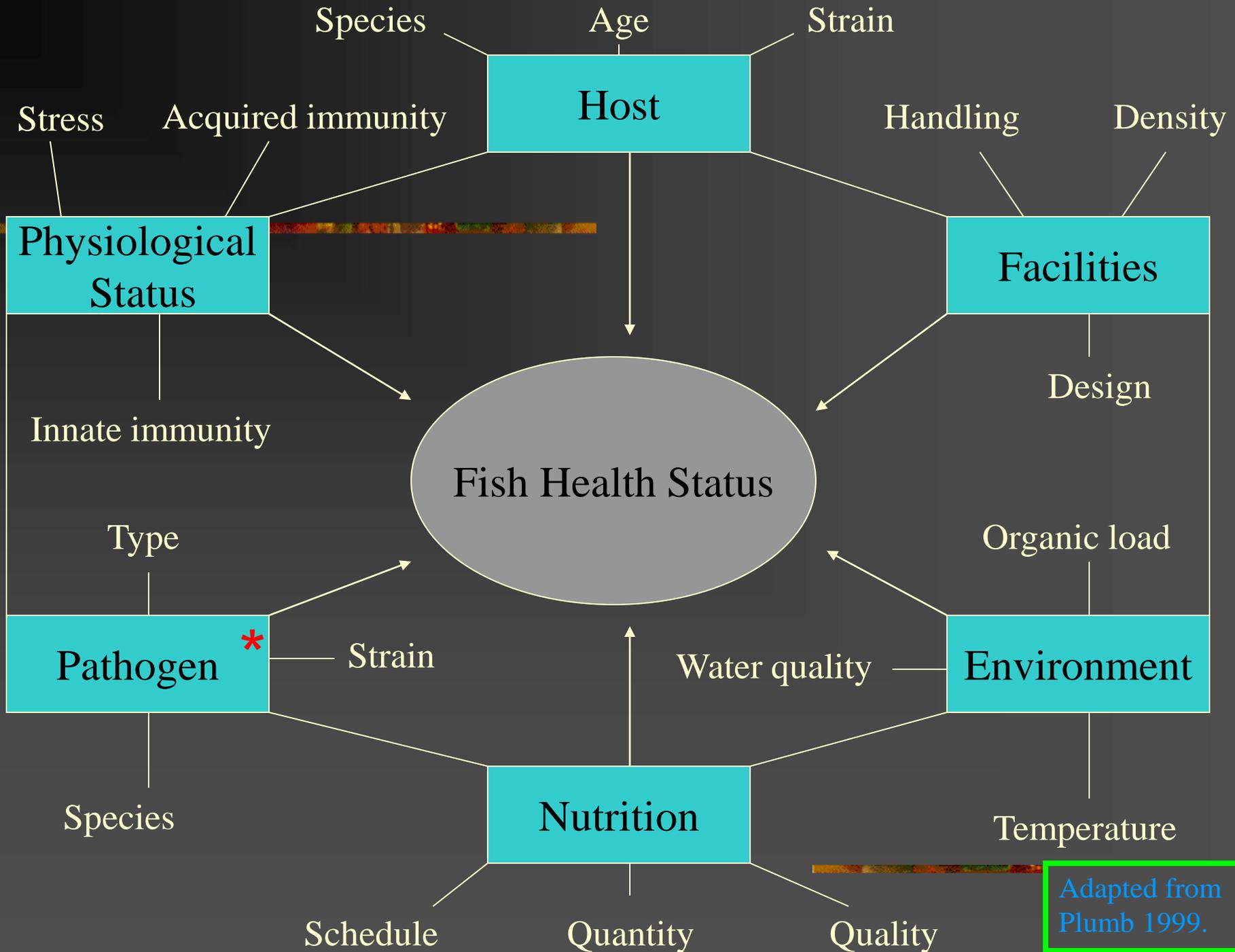
- Established hospital aquarium
 - dechlorinated, aged water
 - filtration, heater, lighting
- Fish medical literature
- Water test kits
- Microscope
- Diagnostic laboratories
- Ante-mortem and Post-mortem examinations
- Anesthetic (MS-222)
- Disease diagnosis
- Chemotherapeutics

Literature: Fish Medicine



■ Literature

- Fish Disease
 - E. Noga
- Fish Medicine
 - M. Stoskopf
- Self- Assessment Ornamental Fish
 - G. Lewbart
- A Common Sense Guide to Fish Health
 - Terry Fairfield



Adapted from Plumb 1999.

Examining the water



- Water quality exam
 - Primary problem
 - Contributes to problem
 - Role of organics
 - Infectious disease
 - Affects on therapeutics?

Examining the water



- What to measure?
 - physical characteristics
 - turbidity and solids
 - temperature
 - chemical analysis
 - Ammonia, Nitrite, nitrate, pH, alkalinity, hardness, chlorine

Understanding the problem

- Ante-mortem diagnoses
SAVE THE FISH!



- Post-mortem diagnoses
SAVE THE TANK!



Anesthetics- Immersion

- Tricaine Methanesulfonate (MS-222)
 - most widely used
 - Dose:
 - induction: 100-200 mg/L
 - maintenance: 50-100 mg/L
 - Recovery
 - < 10 minutes for short procedure
 - 4-6 hours for longer procedure



Got sick fish?

■ External disease

- Mucous production
- Fin erosion
- Ocular changes (erosion)
- Skin hemorrhage

■ Internal disease

- Anorexia
 - Depressed
 - Poor body condition
 - muscle wasting
 - Dyspnea
 - Abnormal swimming
 - Flashing
 - Distended abdomen
 - Ocular changes
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Ante-mortem Diagnostic tests

- Diagnostic tests

- skin scrape

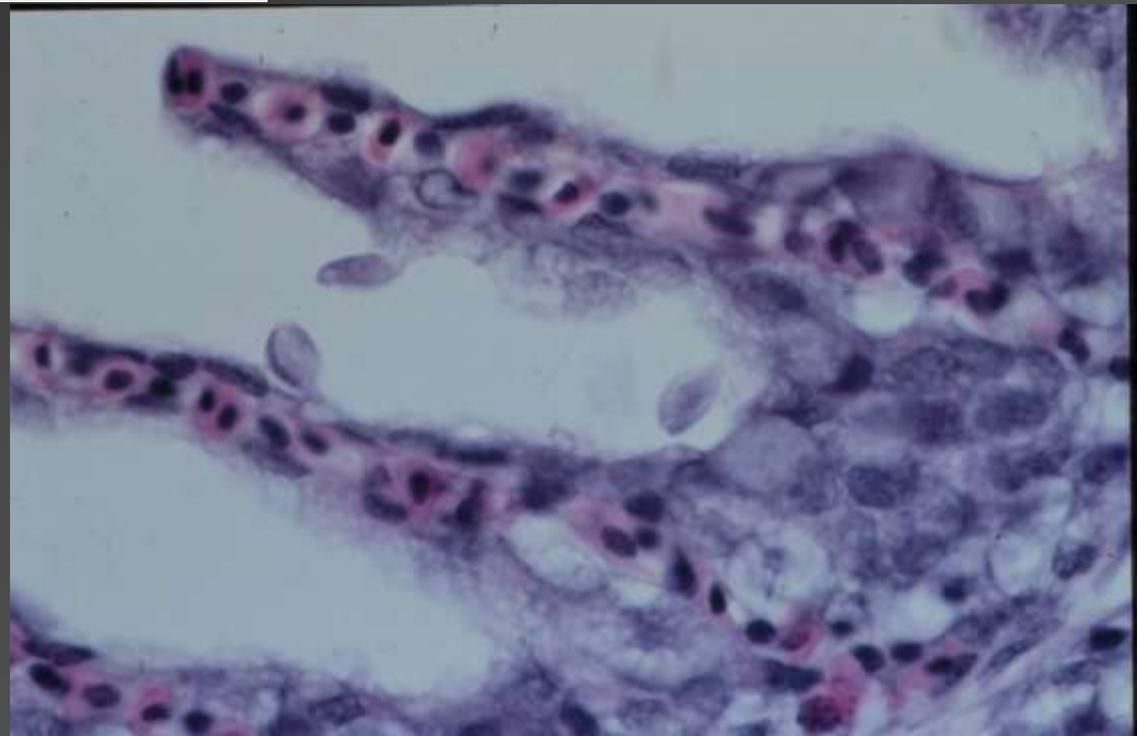
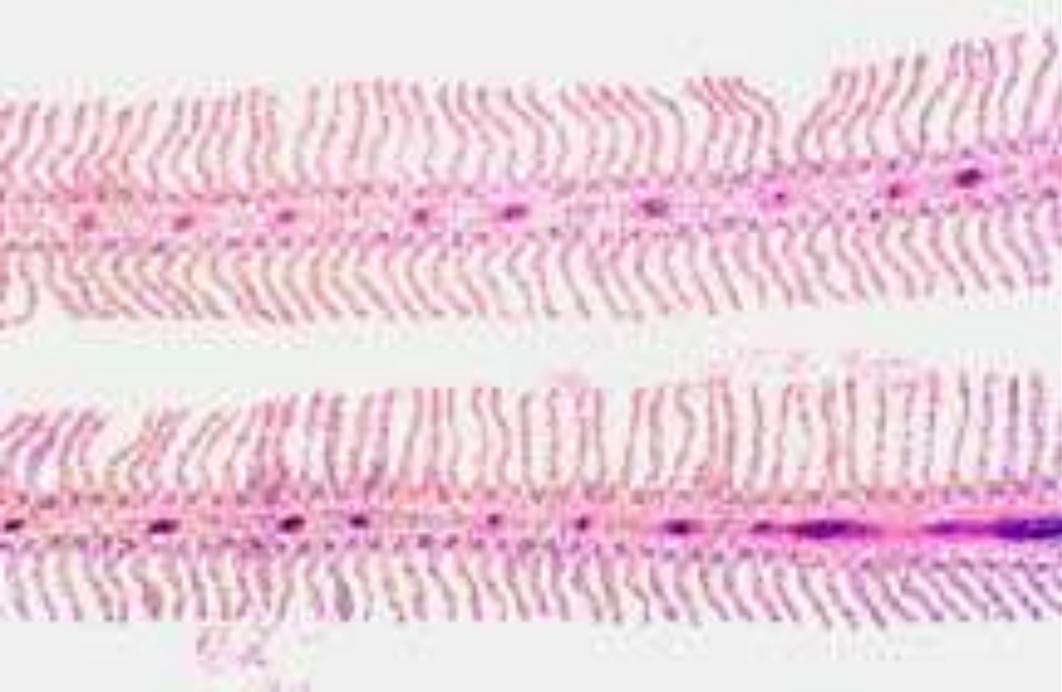
- slide or back side of scalpel
- drag slide from cranial to caudal direction
- sample mixed with saline and stained slide

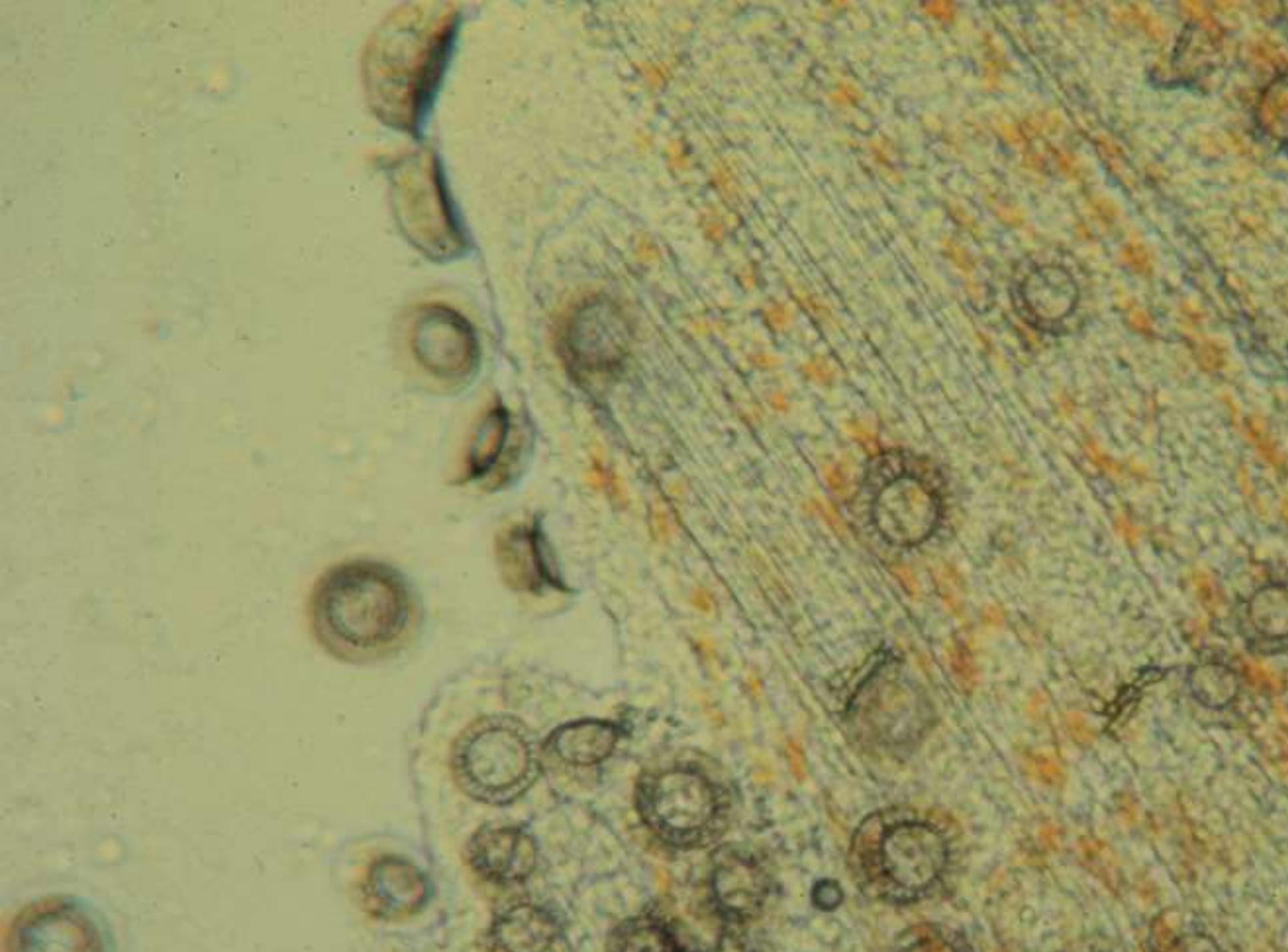


Ante-mortem Diagnostic tests



- Diagnostic tests:
 - rule in/out disease
 - use anesthesia
 - analgesia
 - gill clip
 - technique
 - place sample on slide with saline



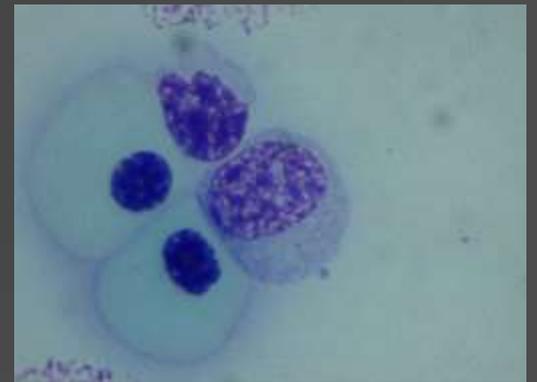
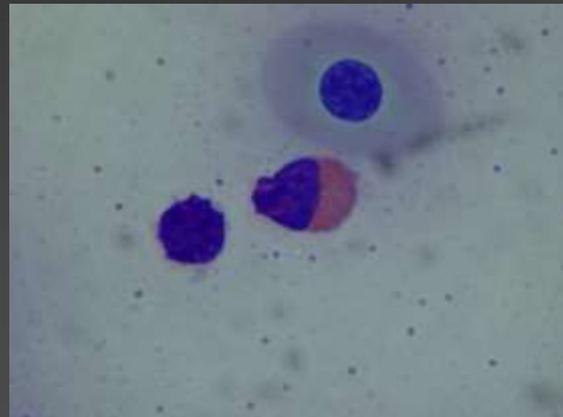
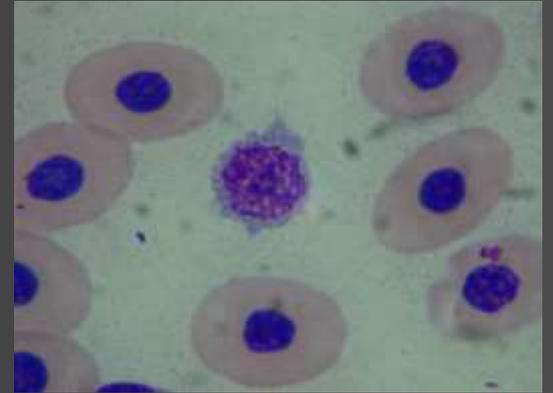
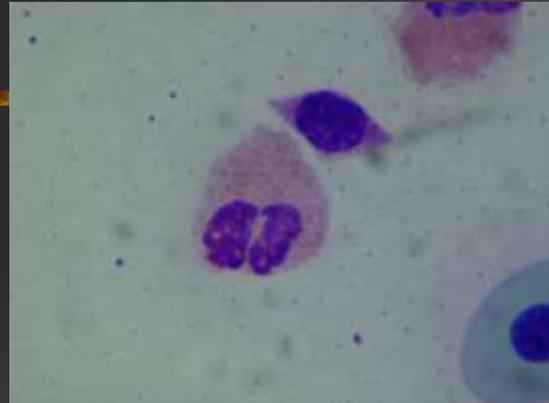
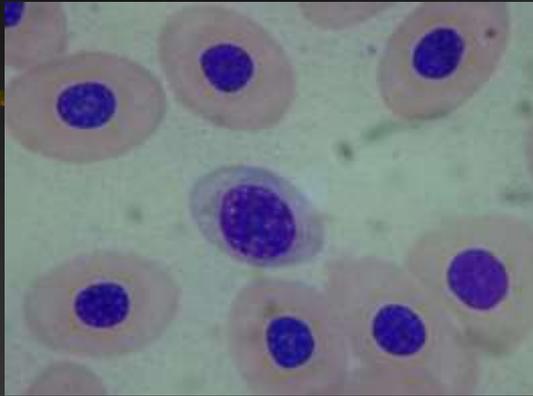




Diagnostic tests



- Diagnostic tests
 - venipuncture
 - caudal vein
 - ventral to caudal vertebrae
 - 25-30 ga needle
 - use anticoagulant
 - analysis
 - PCV, blood smears, cell counts

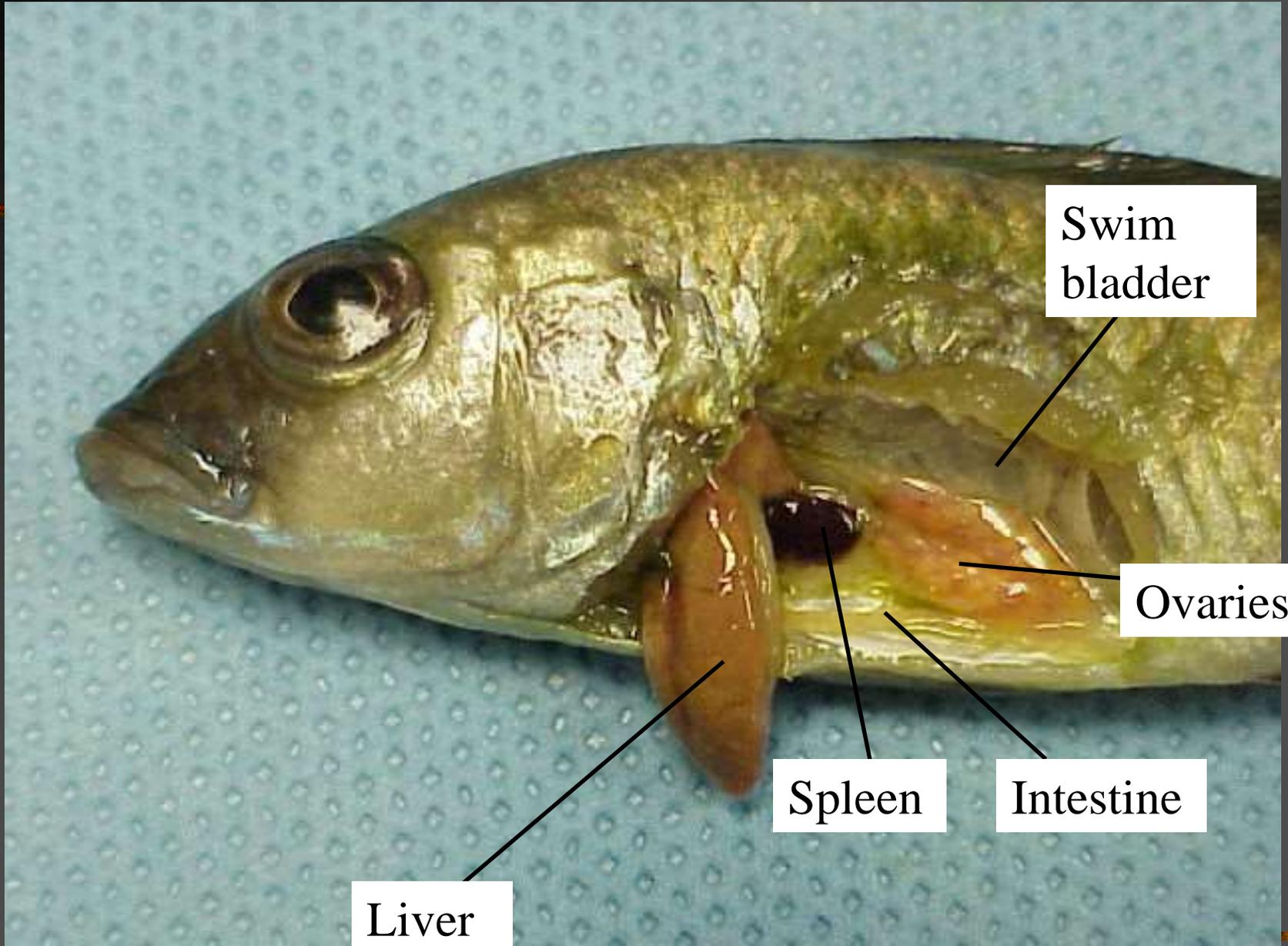




Post-mortem examinations

Sacrifice one (or 2 or 3) for
the good of all





Swim bladder

Ovaries

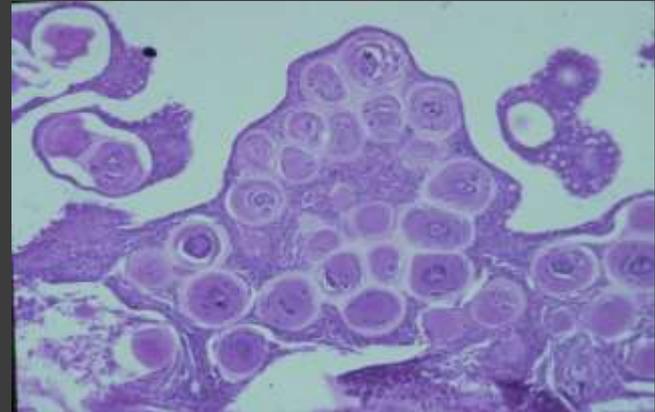
Intestine

Spleen

Liver

Diagnostic laboratories

- Veterinary pathology services
 - Northwest Zoo Path
 - State diagnostic laboratories
 - Private firms
 - Culture
 - Histopathology





Therapeutic considerations?







Therapeutics

■ General considerations

- fish diseases fulminating, treat immediately
- treatments may damage biofilters
- remove carbon filters when using bath/immersion
- oral and parenteral routes preferred
 - bath techniques inconsistent



Therapeutics

- General considerations
 - pharmacokinetics unknown
 - metabolism is temperature dependent
 - resistance to drugs possible if used inappropriately
 - efficacy of over the counter drugs is questionable
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Therapeutics



- Water
 - dip, bath, immersion
 - MIC's probably not reached
 - stress of daily Rx
 - treating the environment

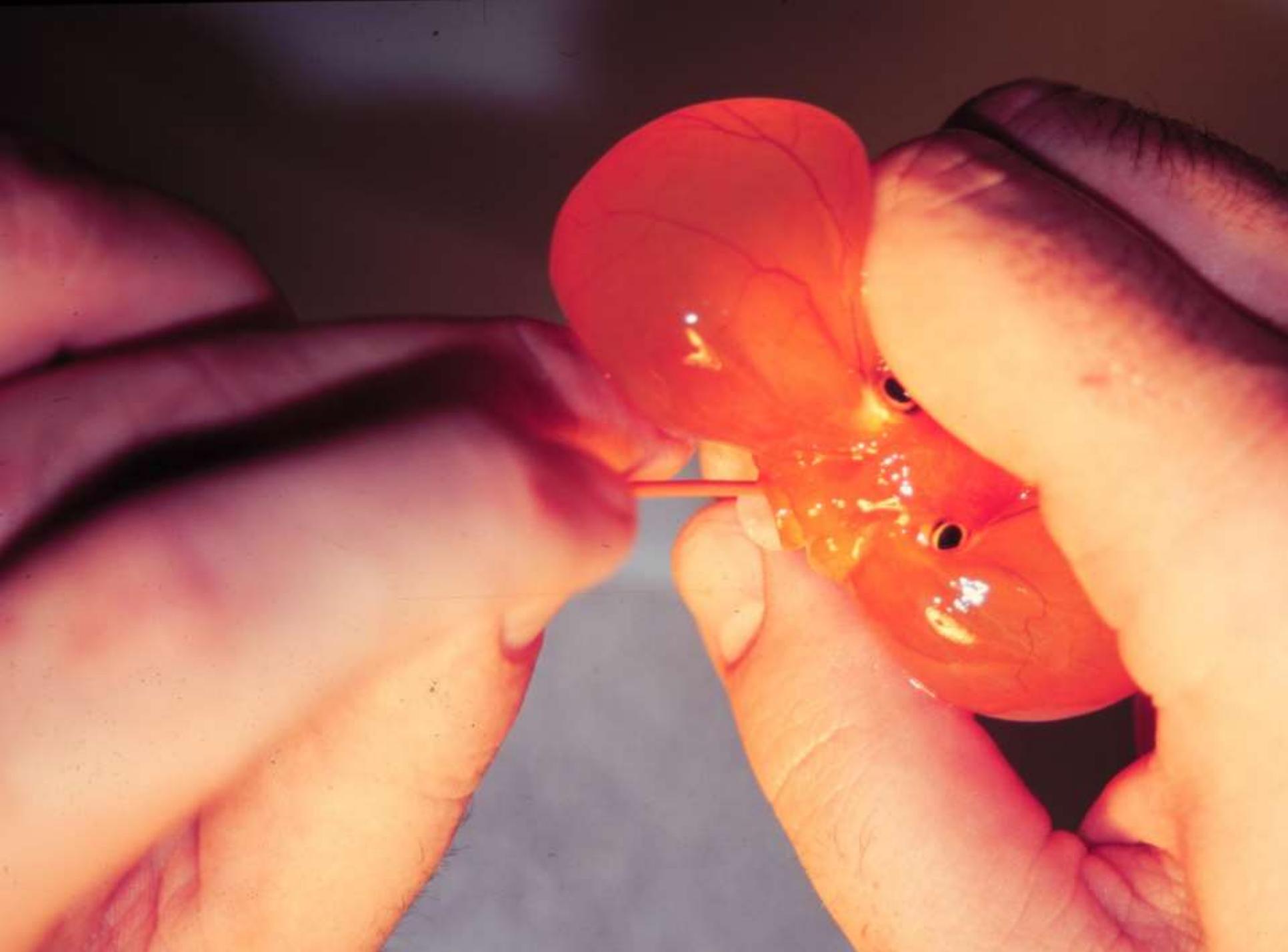
Any differences??



Therapeutics



- Oral
 - excellent delivery route
 - medicated feeds
 - many sick fish anorectic



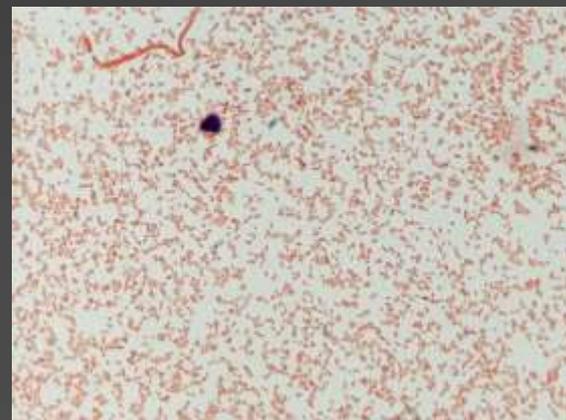
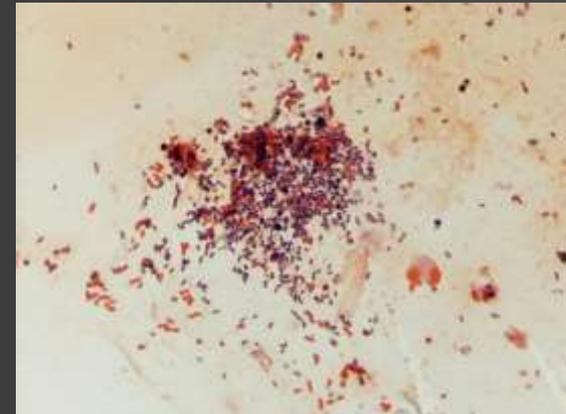
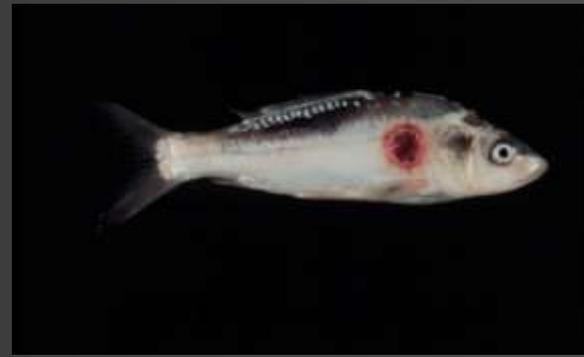
Therapeutics



- Injectable
 - IM and IP
 - rapid
 - longer intervals between handling
 - accurate dosing difficult
 - dilute drug
 - do not use irritating drugs

Bacteria

- General considerations:
 - bacterial infections in fish can rapidly become systemic
 - most infections are caused by Gram-negative bacteria
 - most infections are stress mediated
 - poor water quality, overcrowding, poor diet
 - culture considerations
 - incubation temperature



Therapeutics

- Water bath
 - Oxytetracycline
 - 10-50 mg/L for 1 hour
 - 10-100 mg/L for 1-3 days
 - Kanamycin
 - 50-100 mg/kg every 3 days, change water
 - Furazolidine
 - 1-10 mg/kg 24 hours
-

Therapeutics

■ Oral

- Amoxicillin
 - 40-80 mg/kg/day for 10 days
 - Enrofloxacin
 - 10 mg/kg for 10 days
 - Erythromycin
 - 25-50 mg/kg for 7 days
 - Trimethoprim sulfa
 - 50 mg/kg for 5 days
 - Oxytetracycline
 - 55-80 mg/kg for 10 days
-

Therapeutics

■ Injectables

■ Enrofloxacin

- 10 mg/kg IM or IP every 3 days

■ Chloramphenicol

- 20-50 mg/kg IP once a week for 2 weeks for ulcer disease in goldfish

■ TMPS:

- 50 mg/kg IP daily for 7 days
-

Parasites



- Clinical signs depend on parasite and location involved
 - gills
 - hypoxia (gulping) and coughing
 - body surface
 - flashing, rubbing, scale loss, fin erosion
 - internal
 - poor-doer, anorexia, weight loss

Therapeutics

■ External Protozoa

■ copper sulfate

■ freshwater:

- every other day for 3 treatments for Ich
 - longer treatments if cool temperatures
- monitor water levels
 - immunosuppressive
 - toxic to aquatic plants
 - toxic to invertebrates and elasmobranchs
 - do not use at alkalinity <50 ppm



Therapeutics

- External Protozoa

- Copper

- saltwater
 - use chelated form
 - 0.15-0.2 mg Cu/L for 14-21 days
 - toxic to invertebrates and elasmobranchs
-

Therapeutics

■ External Protozoa

■ Formalin

■ bath:

- 0.125-0.250 ml/L (125-250 ppm) up to 60 minutes
- monitor closely for behavior and neurological changes
- prolonged immersion
 - 0.015-0.025 ml/L (15-25 ppm) 24 hours
- Toxic side effects potentiated at temperatures >80F
- Wear gloves when handling formalin



Therapeutics

- External Protozoa
 - Malachite Green
 - prepare stock solution to 3.7 mg/ml
 - bath:
 - 13-16 ml/L of stock solution for 10-30 s
 - 0.26 ml/L for 30-60 minutes
 - prolonged immersion
 - 0.026ml/L for 24 hours 3 times at 3 day intervals
 - topical on lesion: 100 mg/L
 - carcinogenic: wear gloves
 - remove residual with activated carbon



Therapeutics

- Sodium chloride
 - Used as a stress reliever from 0.1 to 1 ppt
 - Parasite and *columnaris* treatment requires levels of 4-5 ppt. (g/l)
 - My preference: 3-5 g/L or ½-1 tsp/L
-

Therapeutics

- External Protozoa
 - Potassium permanganate
 - prolonged immersion
 - 2.0 mg/L
 - water with high organic loads require higher dosing levels
 - Water
 - FW fish- saltwater dip
 - SW- freshwater dip
 - Monitor closely, remove at first signs of stress
-

Therapeutics

- Monogenetic trematodes
 - Formalin
 - Trichlorfon
 - bath
 - 2-5 mg/L for 60 minutes
 - prolonged immersion
 - 0.25 mg/L <80F
 - 0.50 mg/L >80F
 - two treatments at 3 day intervals



Therapeutics

- Monogenetic and Digenetic trematodes, and Cestodes
 - Praziquantel
 - prolonged immersion
 - 2-10 mg/L for 24 hours
 - oral
 - 50 mg/kg once
 - injectable
 - 25 mg/kg once
-

Therapeutics

■ Gastrointestinal nematodes

■ Fenbendazole

■ prolonged immersion

- 2 mg/L once a week for 3 weeks

■ oral

- 25 mg/kg/day for 3 days
- 50 mg/kg once a week for 3 weeks

■ Levamisole

■ oral

- 2.5-10 mg/kg/day for 7 days



Therapeutics

- Gastrointestinal Protozoa

- Hexamita

- Metronidazole

- prolonged immersion

- 25 mg/L every other day for 3 treatments

- oral

- 25 mg/kg/day for 5-10 days

- 100 mg/kg/day for 3 days

- soak brine shrimp in 1% solution (refrigerator) for 3 hours
-

Therapeutics

■ Antifungals

■ Formalin

- prolonged immersion

- 0.015-0.025 ml/L (15-25 ppm) 24 hours

■ Malachite green

- prolonged immersion

- 0.026ml/L for 24 hours 3 times at 3 day intervals

- topical on lesion: 100 mg/L

■ Saltwater



Zoonotic Diseases

- Humans exposed by ingestion or contact with fish or water
 - Contamination of open wounds
 - Immunocompromised and young people more susceptible
 - *Erysipelothrix rhusiopathiae*, *Mycobacterium*, *Staphylococcus*, *Streptococcus*, *Clostridium*, *Salmonella*, *Edwardsiella*
 - Always wear gloves
-



Questions?