

Pigs – Facial Necrosis

First Name:		Last Name:	
Email:			Veterinary Practice:
Postcode:		Date:	

Please circle one answer only e.g. **A**

Routine teeth reduction of piglets:

- A Is illegal
- B Is wholly justified routinely
- C Causes facial necrosis
- D Causes greasy pig disease

Facial necrosis in piglets:

- A Is present at birth
- B Is the result of bacterial infections of wounds to the face
- C Is less likely to occur in larger litters
- D Is not fatal

Bacterial infection causing facial necrosis is typically due to:

- A E.coli
- B MRSA
- C Staph hyicus
- D Erysipelas

Facial necrosis is most likely to occur:

- A In larger litters
- B When teeth are clipped or ground off
- C Where hygiene is good
- D Late in the suckling period

Facial necrosis in baby piglets:

- A Is only seen in indoor systems
- B Does not occur in freedom farrowing systems
- C Occurs in all types of farrowing accommodation
- D Is caused by the sow

Therapeutic reduction of piglets 'eye' teeth:

- A Should occur before six hours after birth
- B Should not occur until after twenty four hours of life
- C Is justified where there is evidence of facial damage
- D Is only justified if udder damage or maternal rejection occurs

Reducing piglets' teeth soon after birth:

- A Increases mortality

- B Reduces joint ill
- C Reduces mortality by up to 20%
- D Increases greasy pig disease

Reducing piglets' teeth by clipping or grinding, when justifiable :

- A Can be performed by any be stockmen
- B Can be done with de-tailing clippers
- C Should be done in pairs
- D Should be reviewed with veterinary advice as a regular basis

Where facial necrosis is seen:

- A Piglets should be euthanased
- B The sow should be treated with antibiotics
- C No treatment is necessary
- D Injectable and topical antibiotic treatment of piglets is indicated

Where antibiotic treatment is given the medicine prescribed should be:

- A The widest spectrum antibiotic available
- B Be determined by bacteriological isolation and sensitivity testing on a regular basis
- C A third/fourth generation cephalosporin
- D A fluoroquinolone