

# Regional Training Course on Abattoir Surveillance for Contagious Bovine Pleuropneumonia (CBPP)

24 – 27 March 2026, Nairobi, Kenya



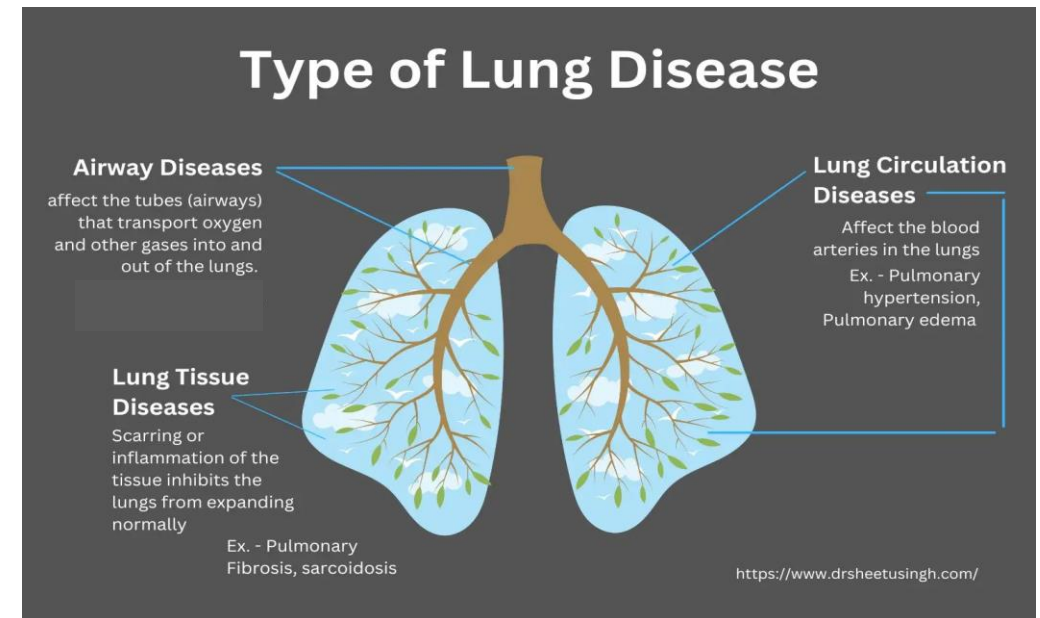
# *Lung: Most frequent lesions*

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WOAH CBPP Reference laboratory  
CBPP Expert Designate

# Preamble

**These are general lesions that are found incident to disease or any other pathological or physiological condition that alters the normal state in the thoracic cavity or the lung.**

**These are usually a demonstration of the disturbances in the homeostasis.**





# Preamble continued

- Lesions can assist in determining the primary cause of the changes noted in the thoracic cavity.
- It is imperative to be thorough, watchful and ensure each change is well noted, characterised and recorded either by notes, pictures or both.
- It is never good to be opinionated from the preliminary findings as you commence your investigation
- Sometimes, more than one type of lesion maybe present and care should be taken not to obscure other lesions present





# Hydrothorax

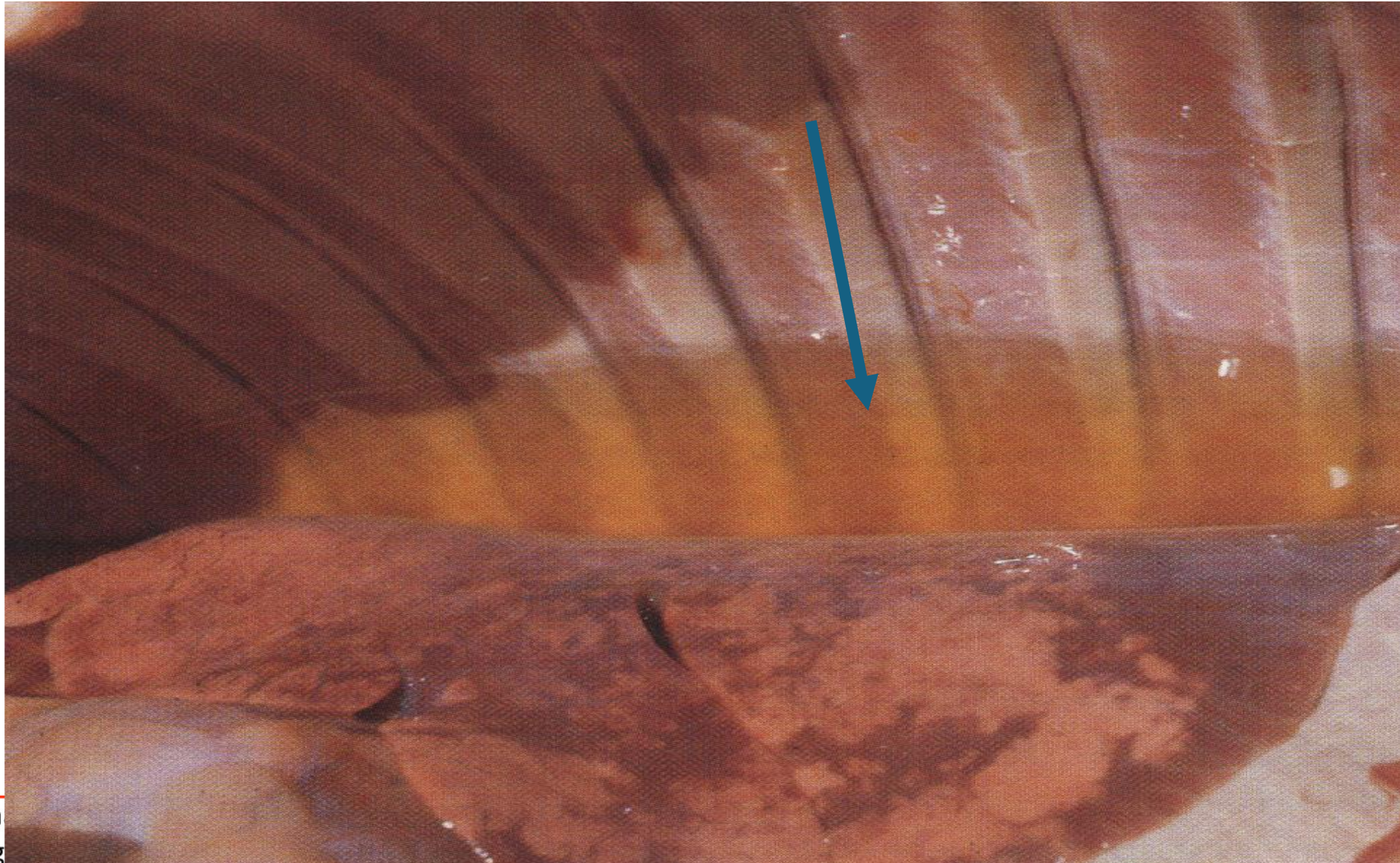
- Accumulation of fluid in the thoracic cavity.
- The quantity, colour and consistence vary from situation to situation and the cause
- Care should always be taken into consideration when opening carcasses in the thoracic cavity as the act may change the original characteristics of the fluid.



# Hydrothorax; Heartwater



# Hydrothorax; Heartwater



# PLEURAL-FLUID



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# Pleura fluid

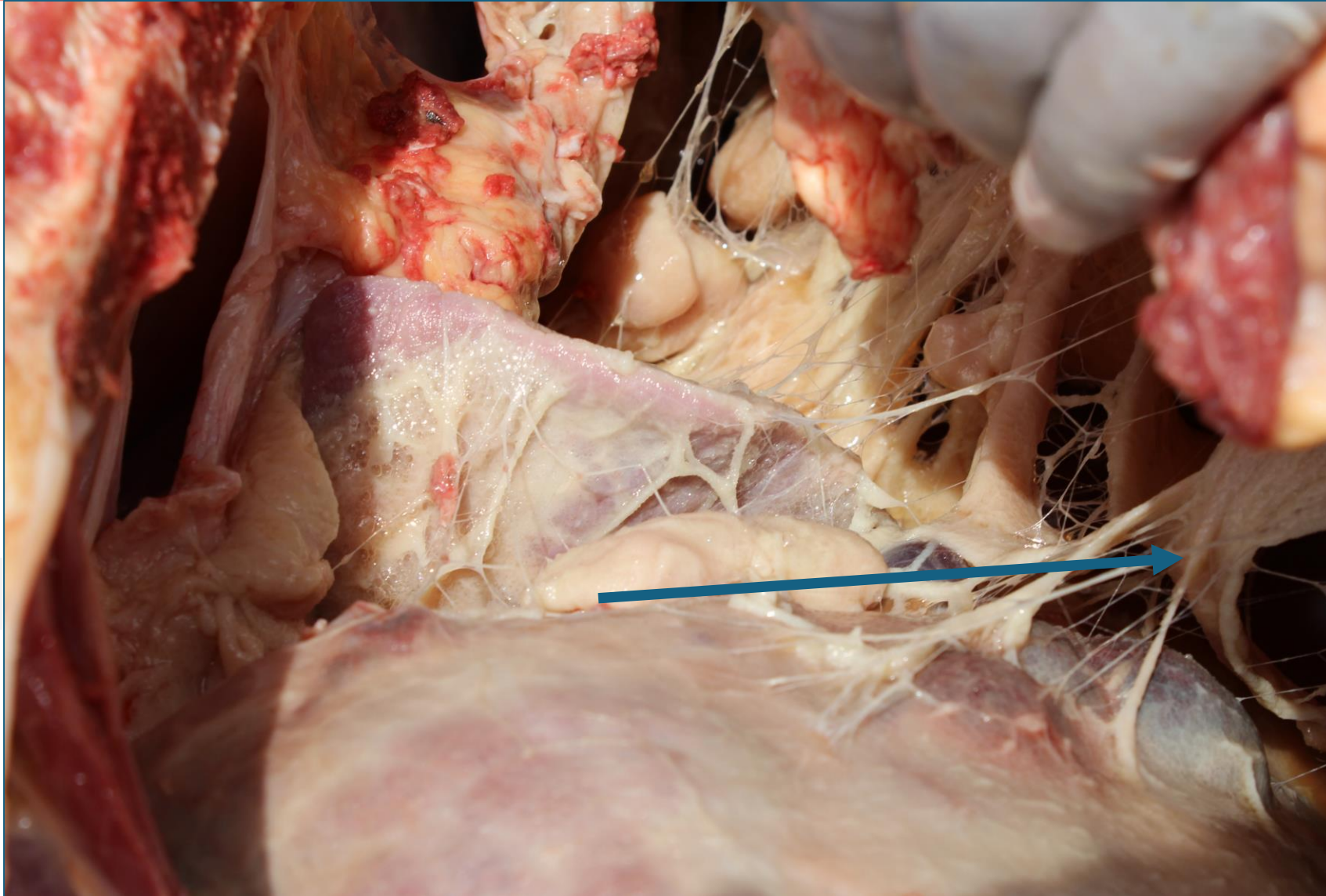




# Pleuritis

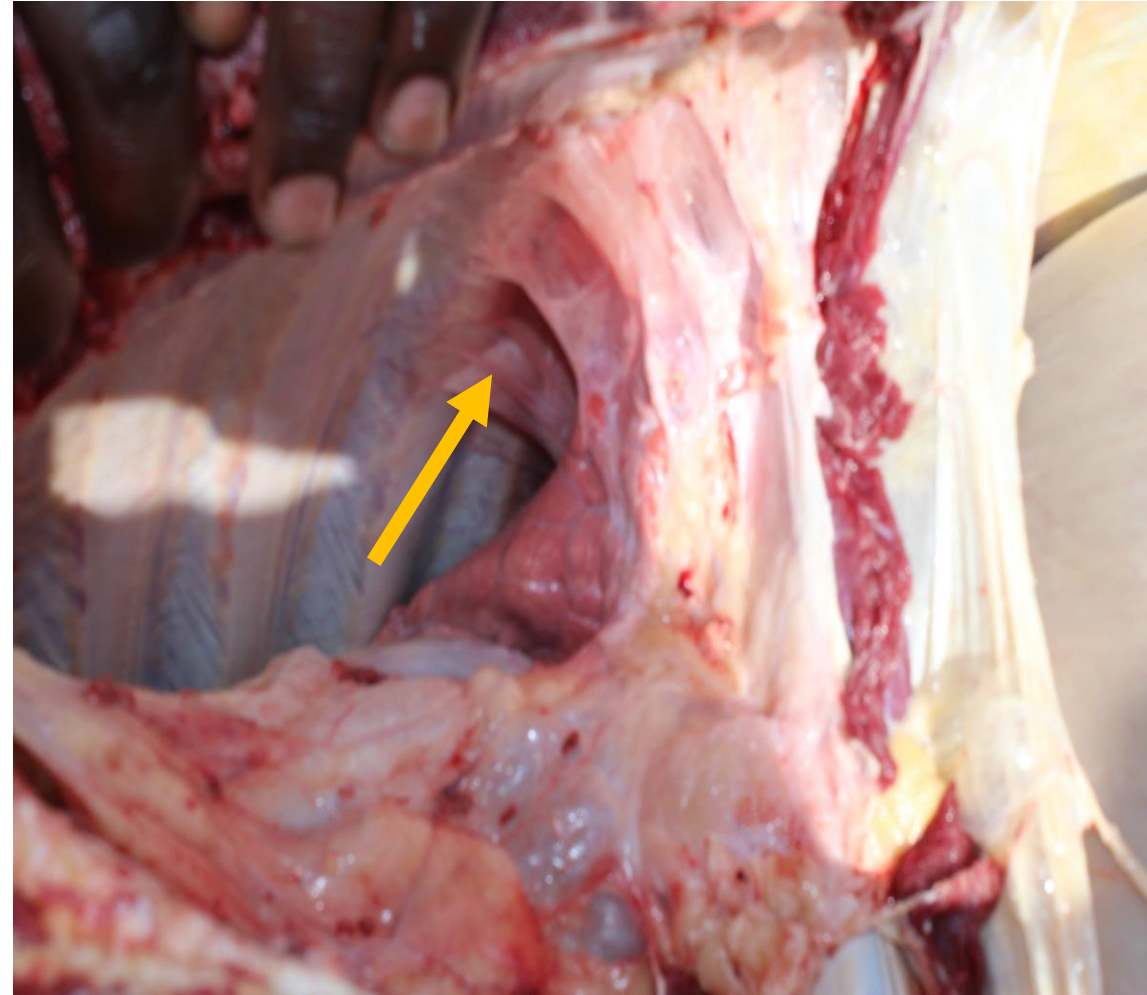
- Pleurisy, also known as pleuritis, is inflammation of the membranes that surround the lungs and line the chest cavity (pleurae).
- The colour, consistence and extent will differ from causative agent to causative agent.
- Even with the same causative agent, there isn't uniformity on the resultant pleurisy seen



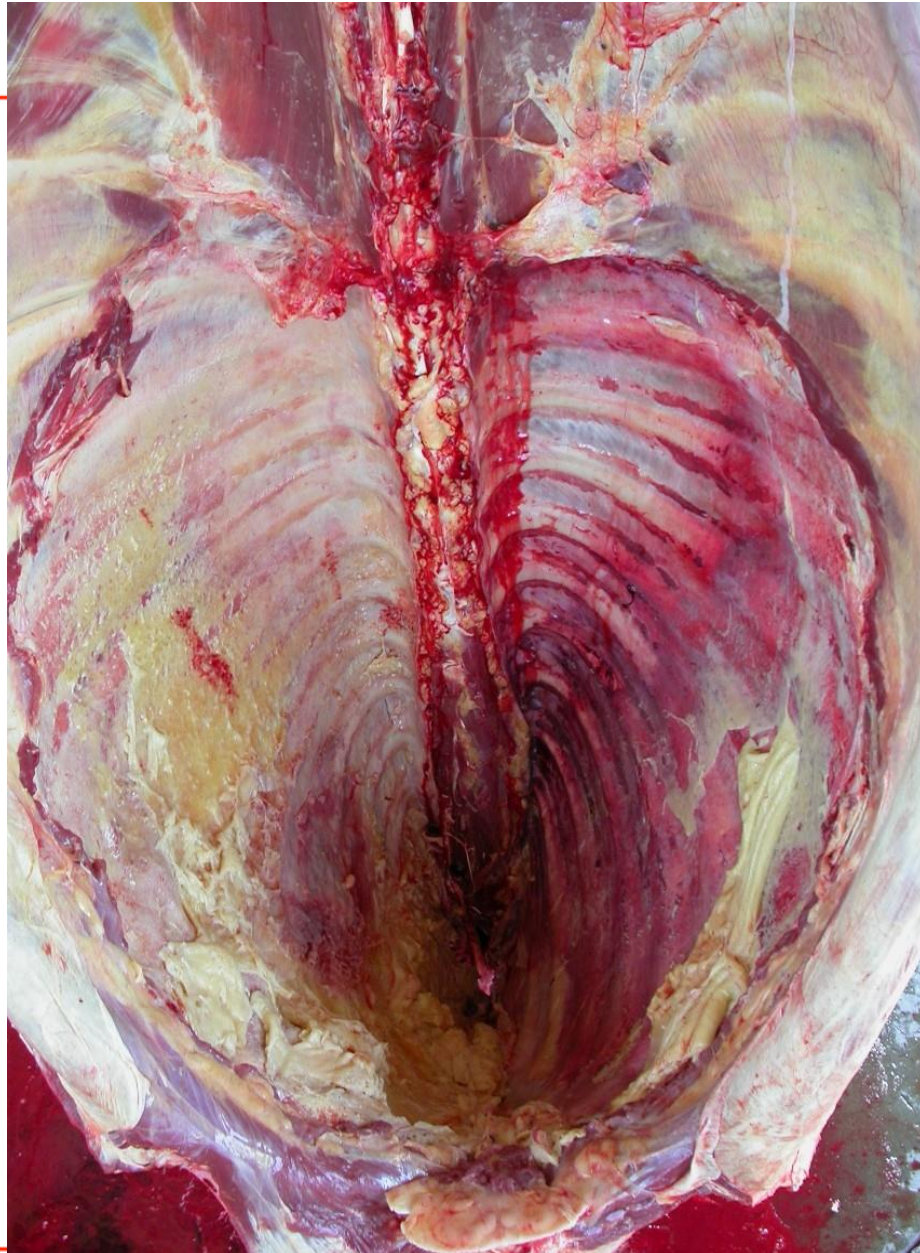
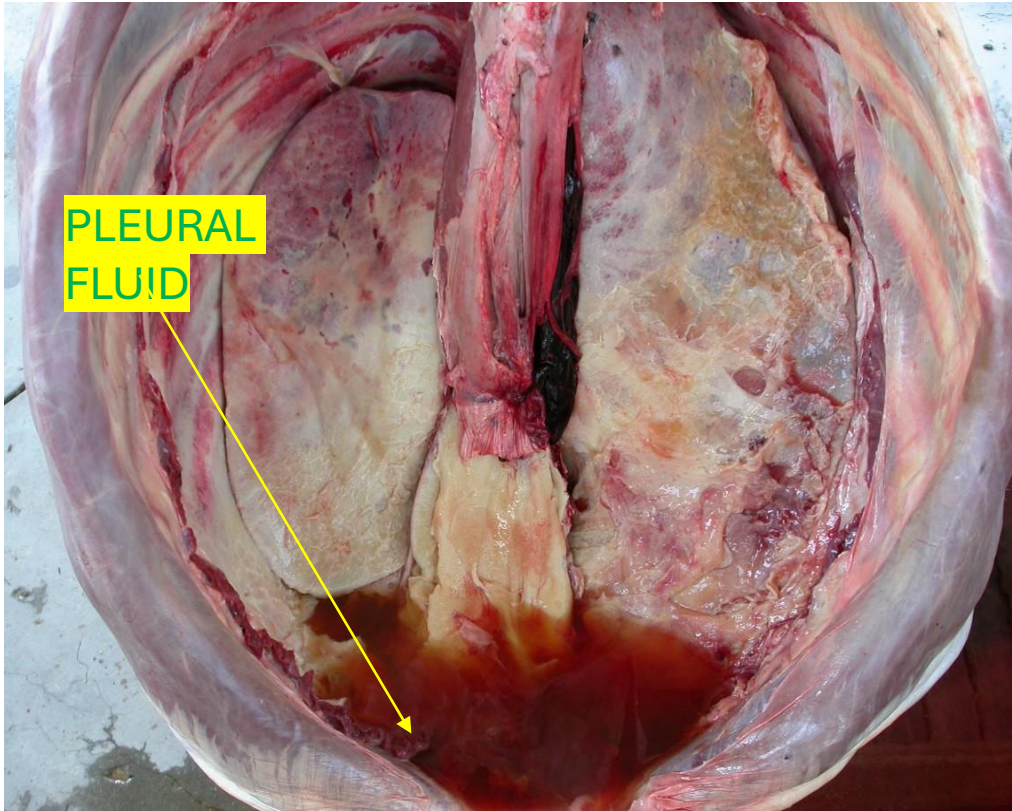




# Adhesion

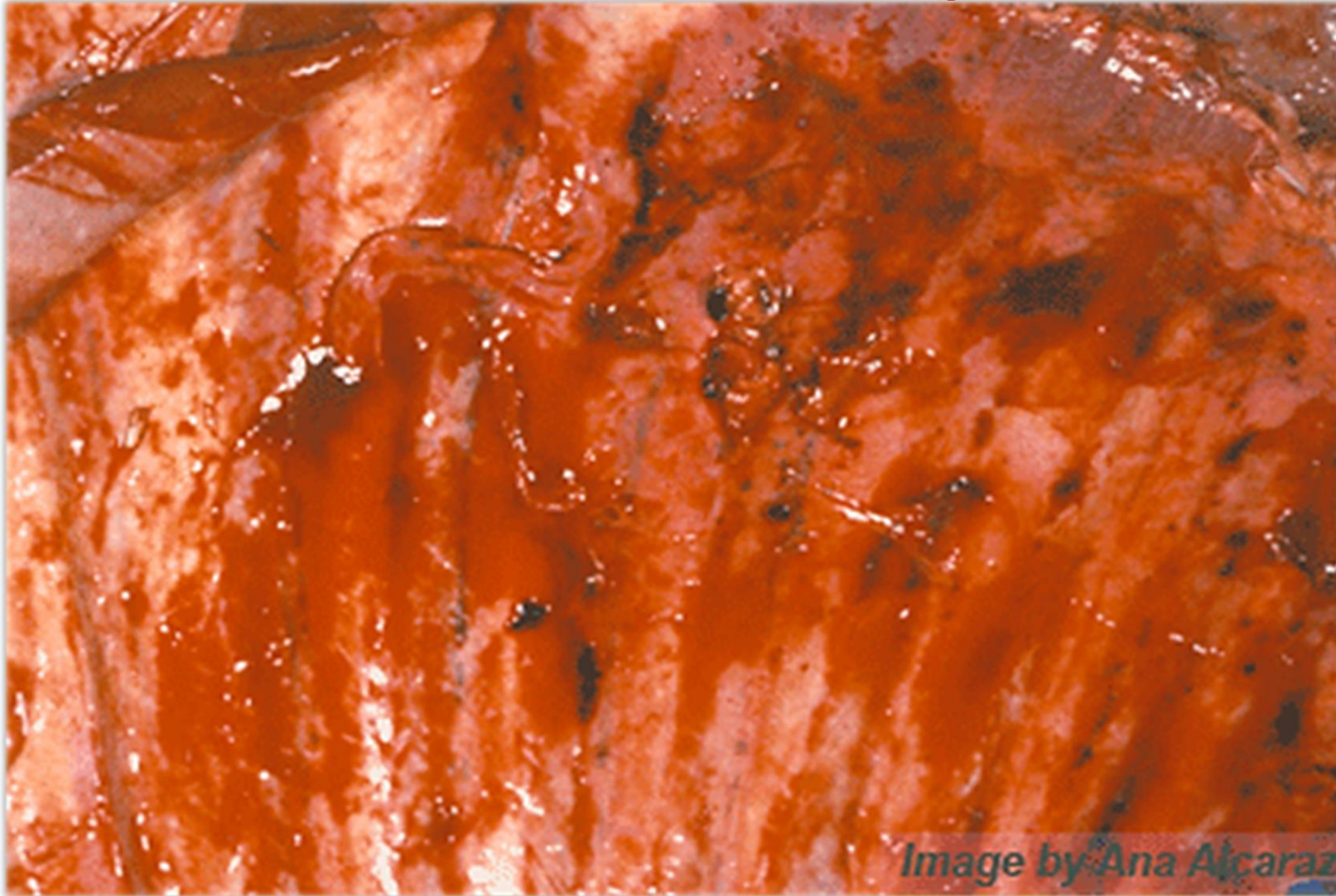


# Pleuritis; CBPP

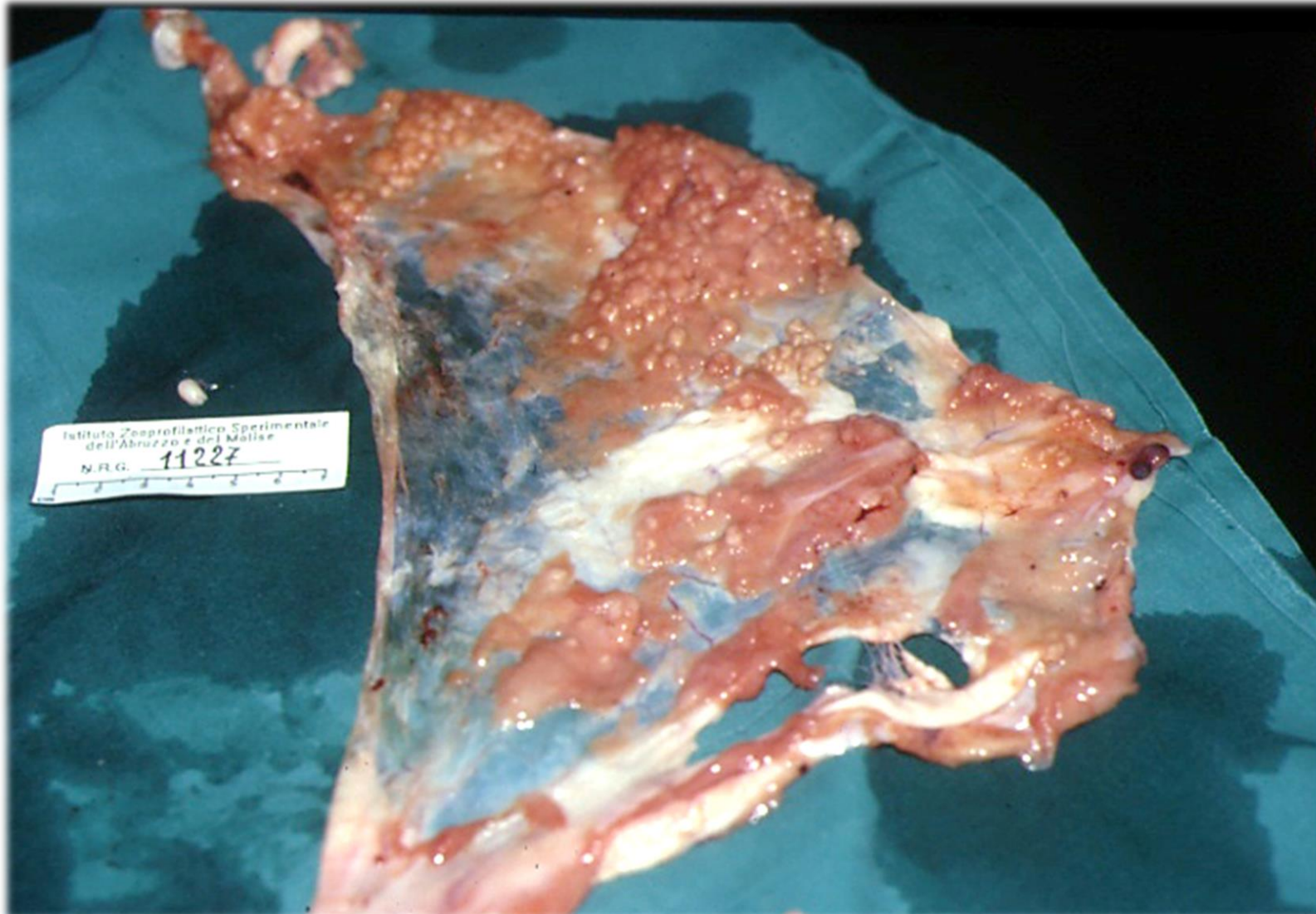


# Pleuritis; Pasteurellosis

## *Mannheimia haemolytica*



# Necrotic caseous-calcific Pleuritis; TB



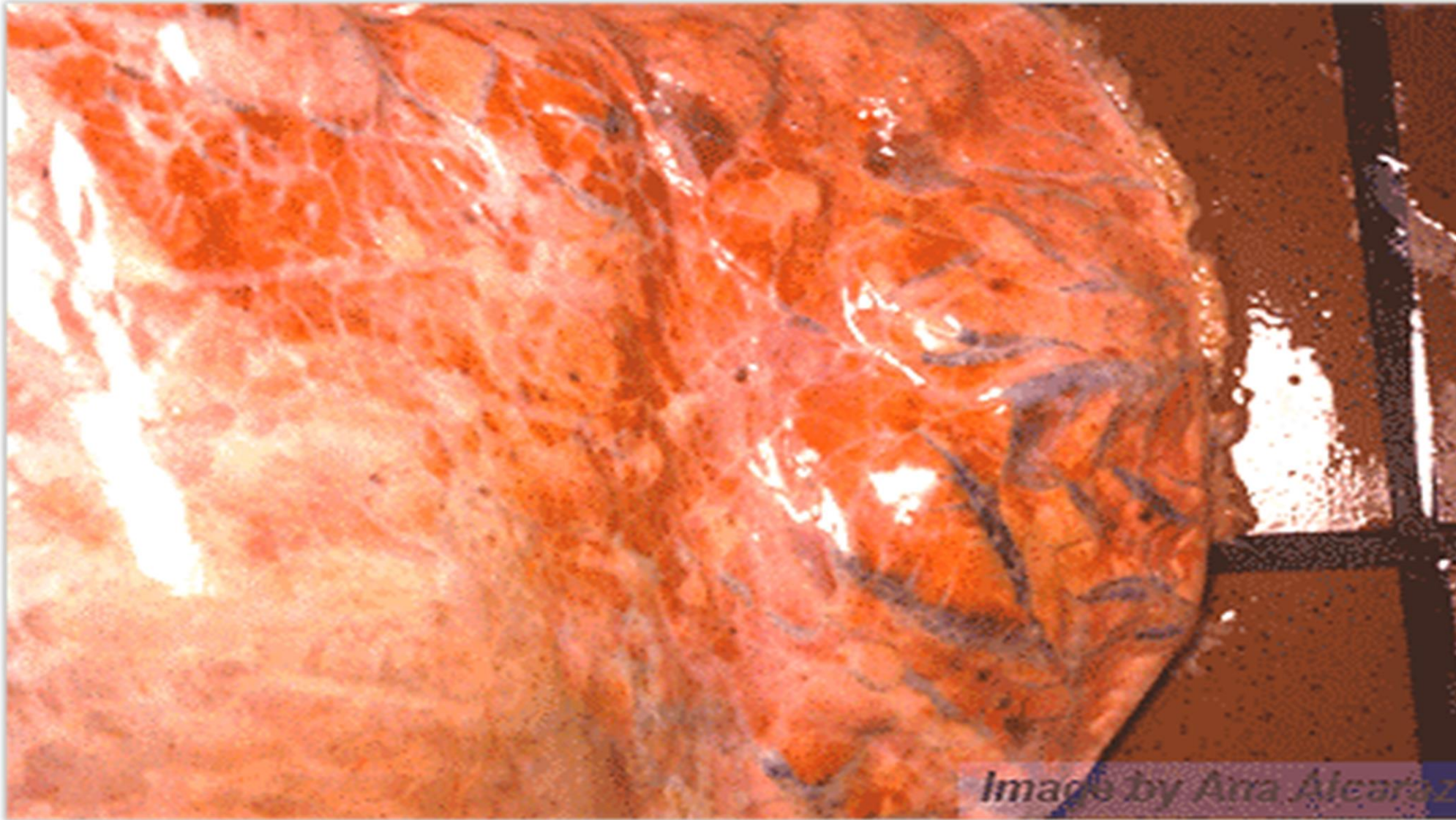


# Emphysema

- Usually characterised by air-filled spaces in the lung, that can vary in size
- Breakdown of the aveolar walls results in trapping of air in the created spaces replacing the spongy lung tissue
- Several factors can precipitate the damage of the alveolar walls and its finding at postmortem should well noted and defined



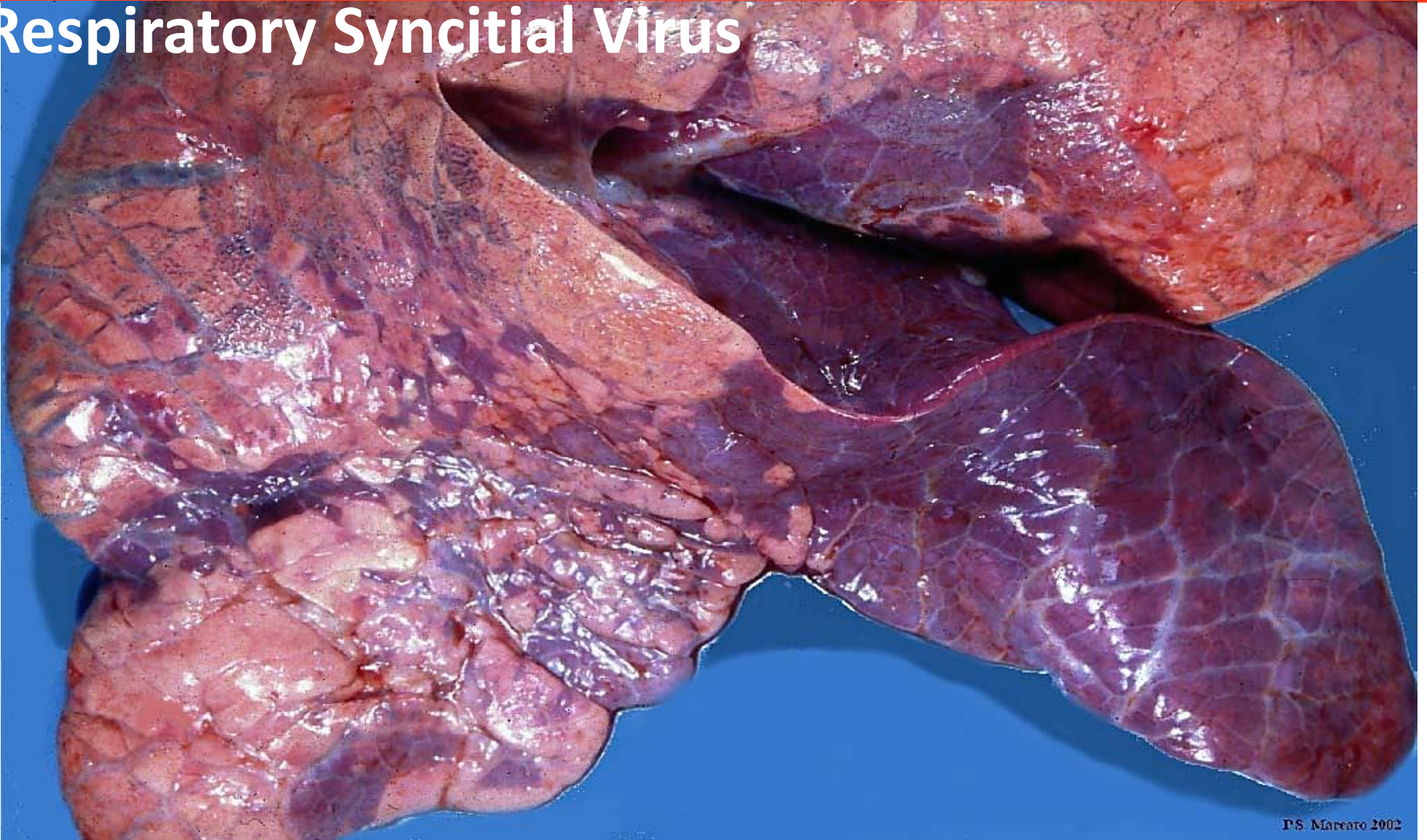
# Emphysema: Unknown



# Emphysema: Bovine Respiratory Syncytial Virus



# Respiratory Syncytial Virus



P.S. Martorello 2002



# Pulmonary Congestion/Edema

- Abnormal accumulation of fluids in the alveoli
- Usually seen as distension especially of alveoli septa
- Can be caused by multiple factors including; left-sided heart failure or high blood pressure, pneumonia, toxins etc.

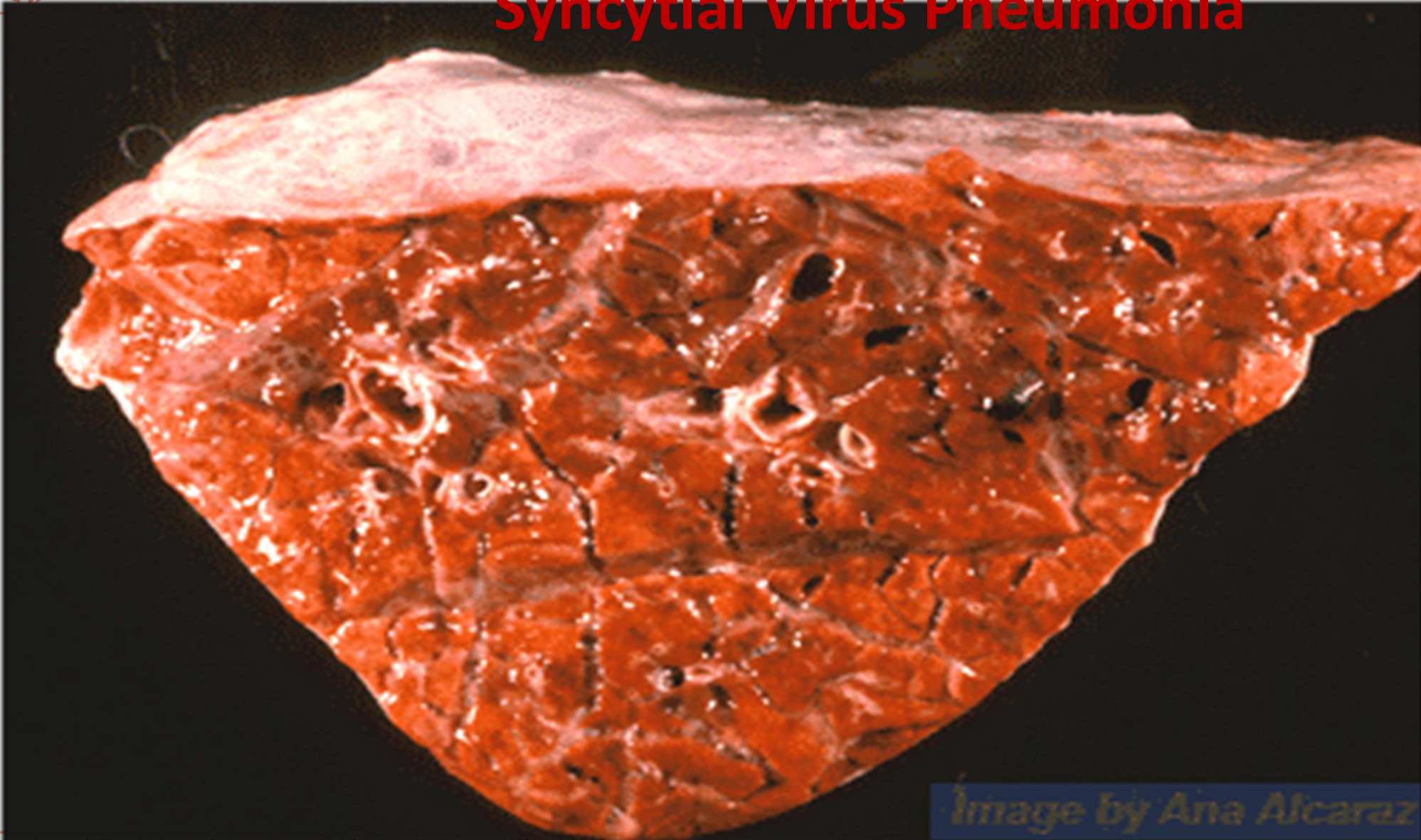


# Acute interlobular edema :

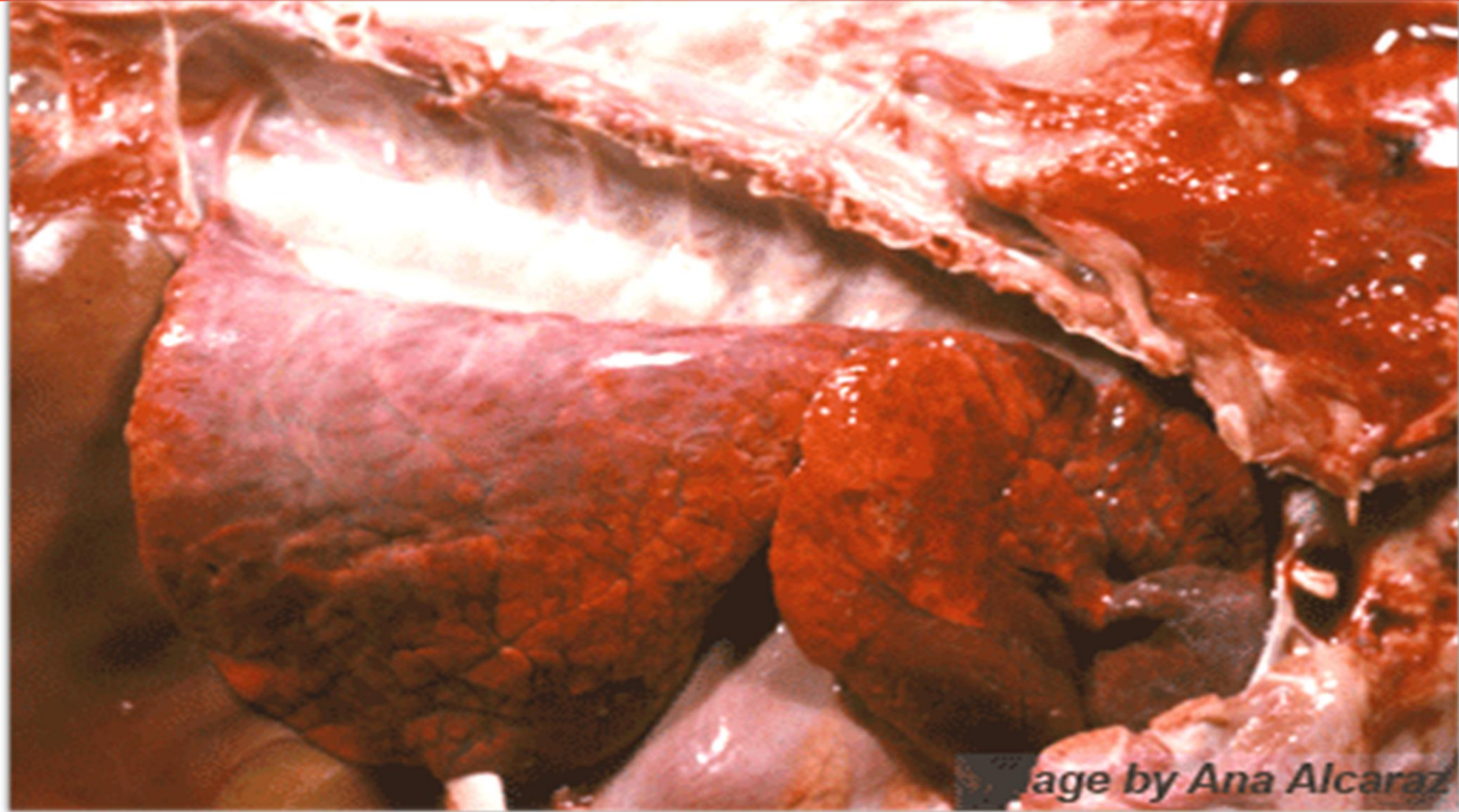
## Unknown



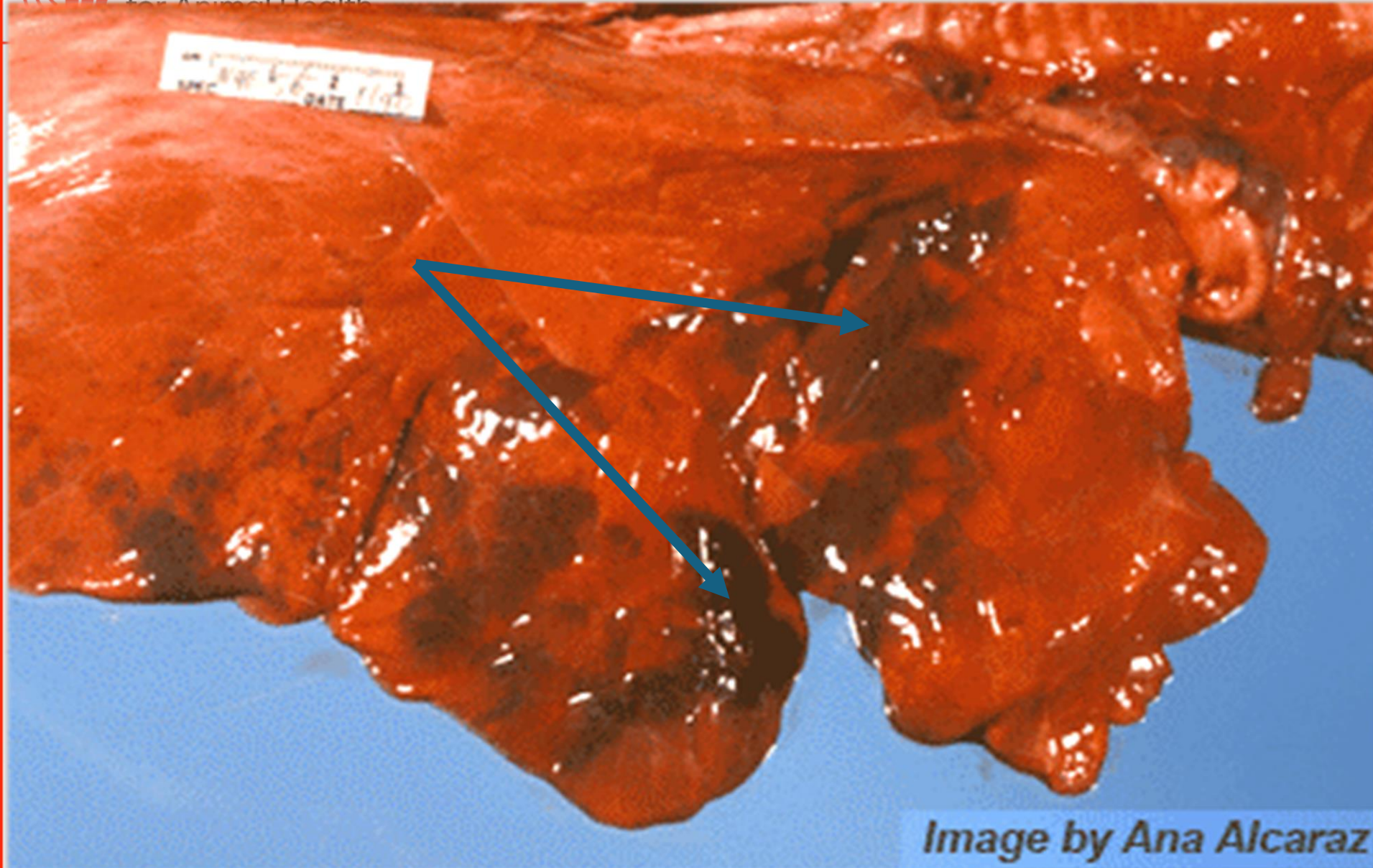
# Air Infiltration: Bovine Respiratory Syncytial Virus Pneumonia



*Image by Ana Alcaraz*



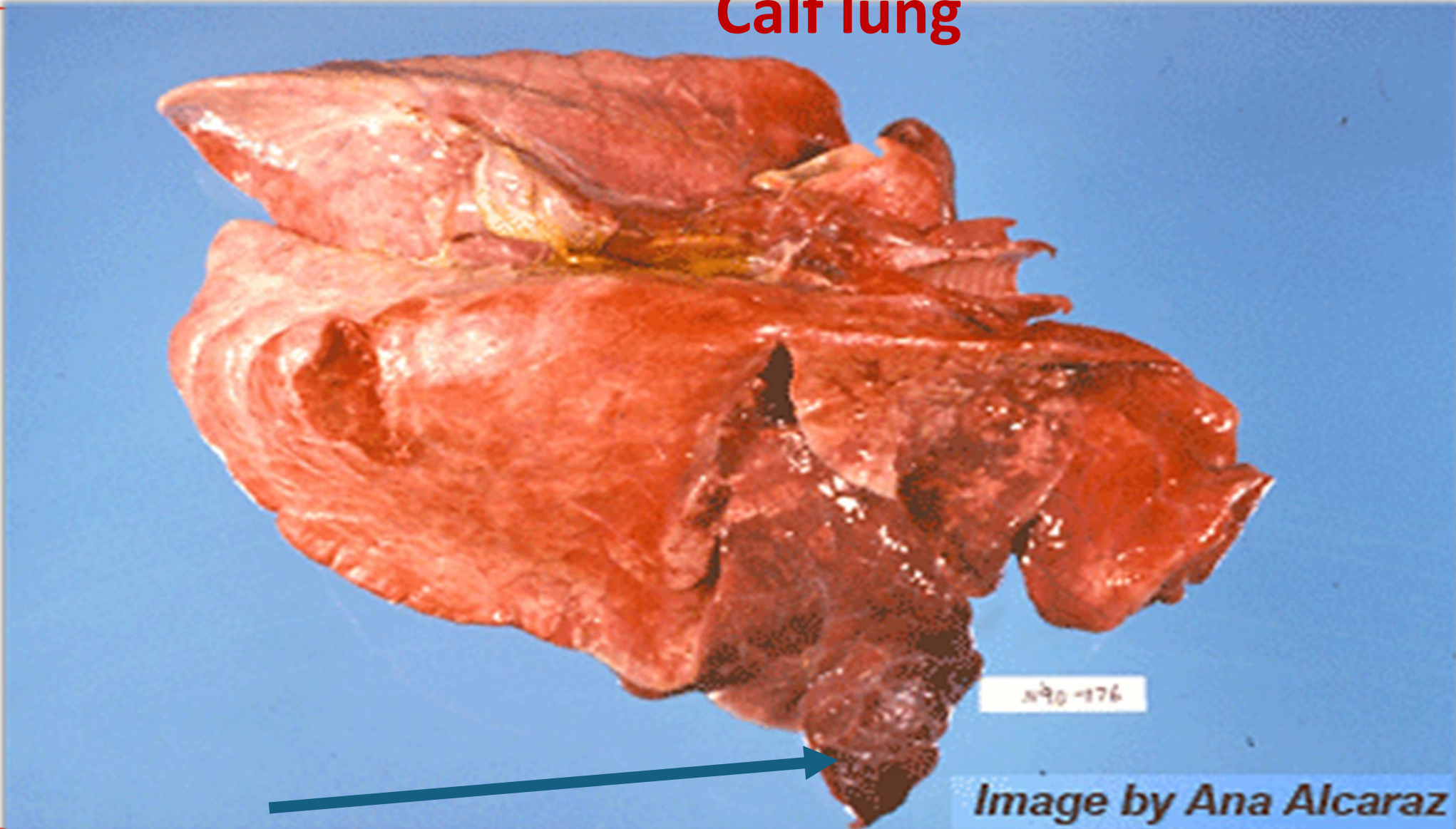
**Calf lungs  
with  
congestion  
: Unknown**



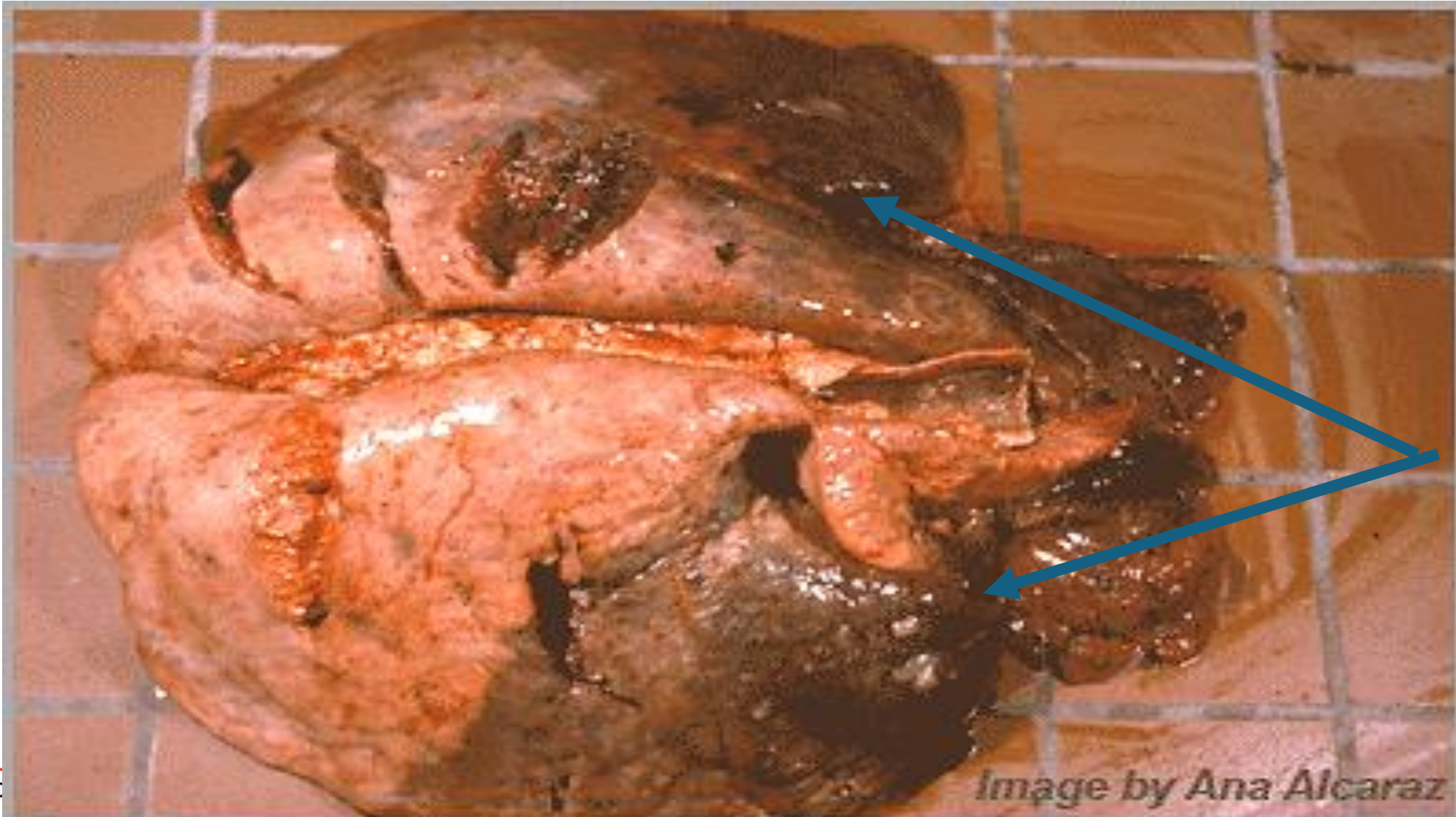
**Calf lungs  
with  
congestion  
: Unknown**

# Congestion: Enzootic Pneumonia

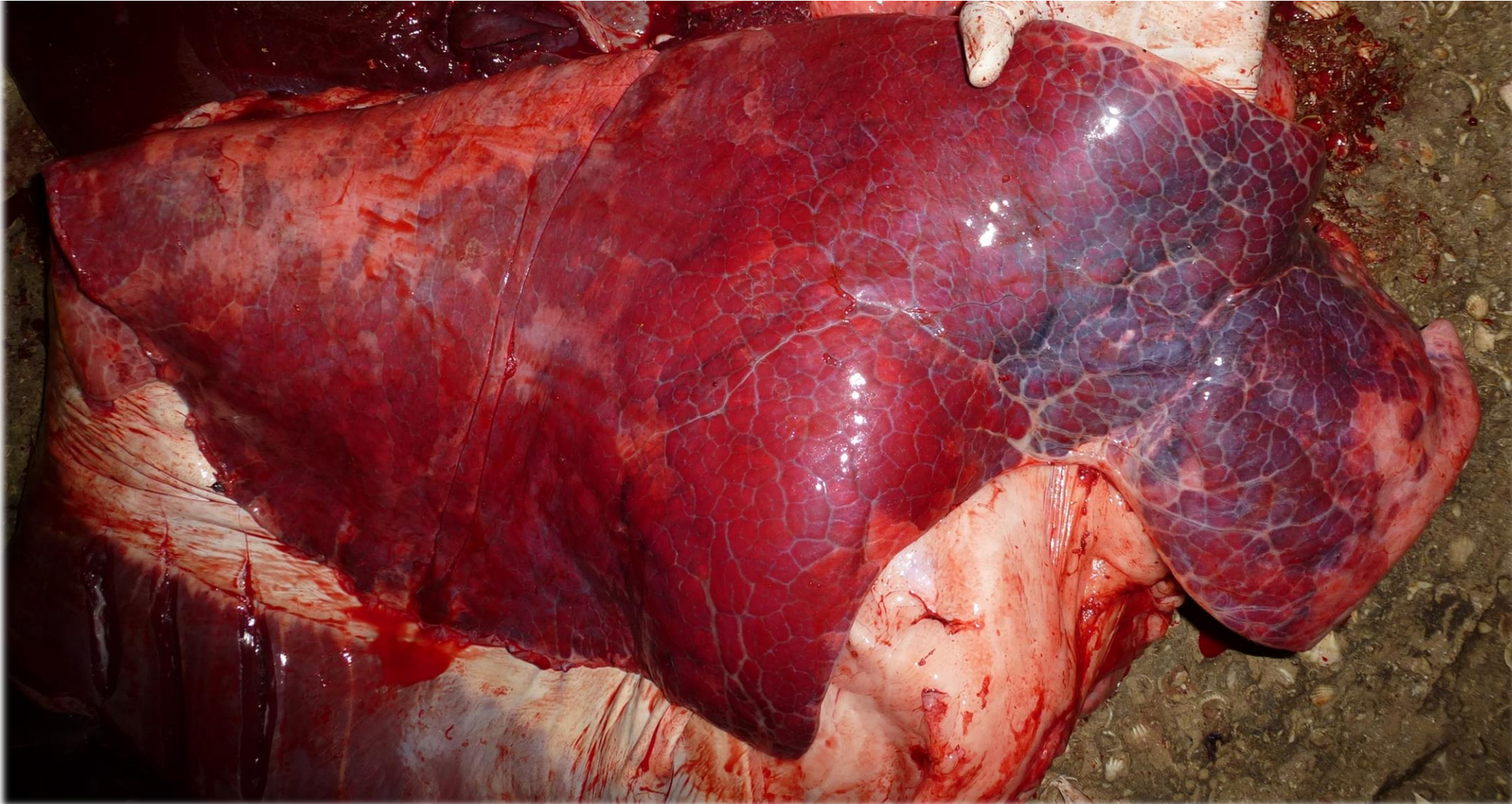
## Calf lung



# Congestion: Bilateral aspiration pneumonia post surgery



# Monolateral blood aspiration



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# Blood aspiration





# Consolidation

- Occurs when the lung tissue becomes dense and solid rather than spongy to touch
- Usually caused by invasion of the normally air filled aveolar spaces by either fluid, blood, pus or cells.
- The common cause of consolidation are; infectious pneumonia, pulmonary edema, pulmonary hemorrhage, aspiration, pulmonary infarction



# Consolidation: Pasteurellosis

## *Mannheimia haemolytica*



# Consolidation: Enzootic Pneumonia



# Consolidation: bacterial bronchopneumonia (*H. somnus*, *Mycoplasma* spp)





# Air Infiltration: Bovine Respiratory Syncytial Virus Pneumonia

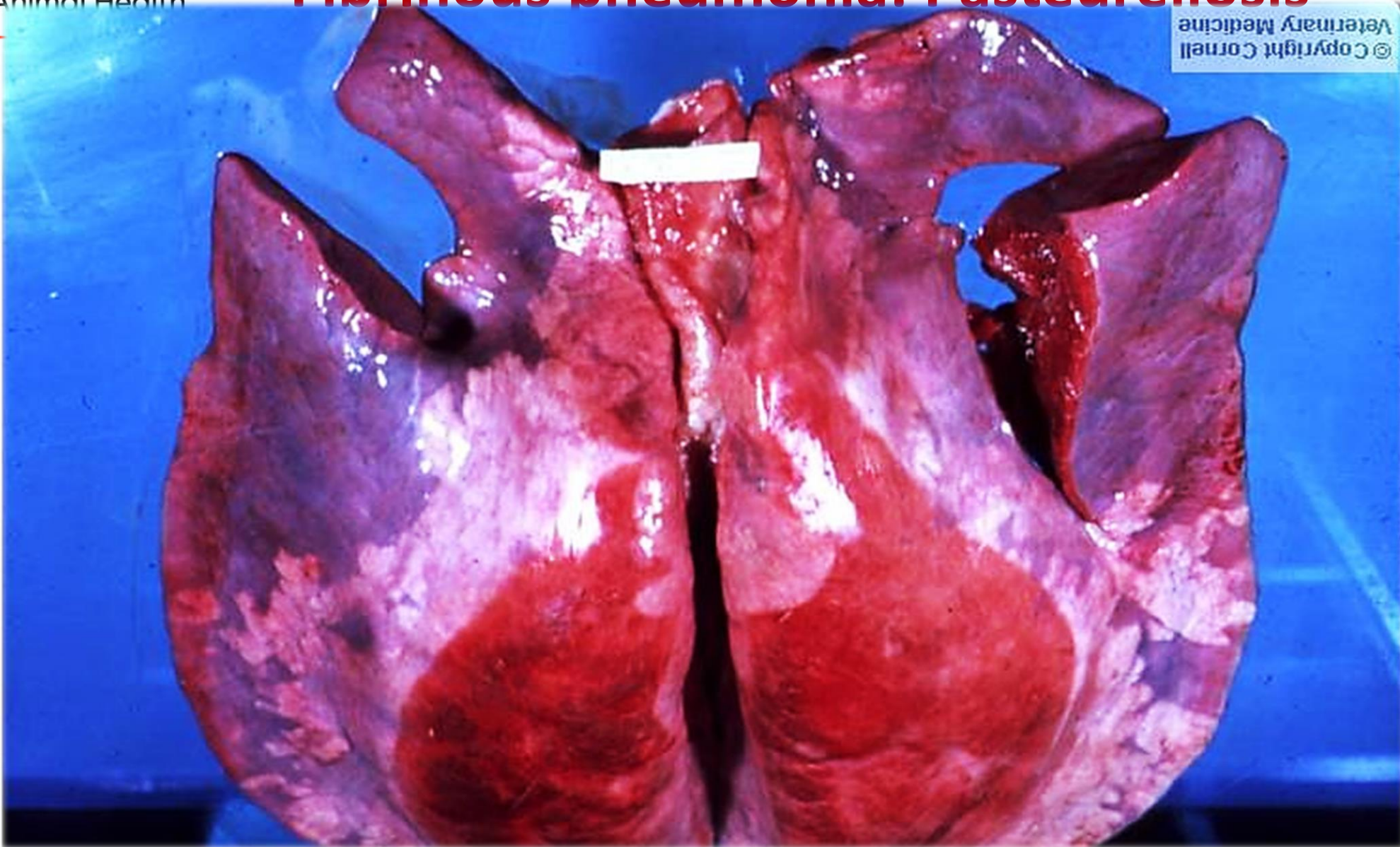


Image by Ana Alcaraz



# Fibrinous pneumonia: Pasteurellosis

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Veterinary Medicine



# Fibrinous pneumonia: Pasteurellosis

## *Mannheimia pneumonia*





# Contagious Bovine Pleuropneumonia (CBPP)



# Fibrinous/necrotizing: Pasteurellosis

## *Mannheimia pneumonia*

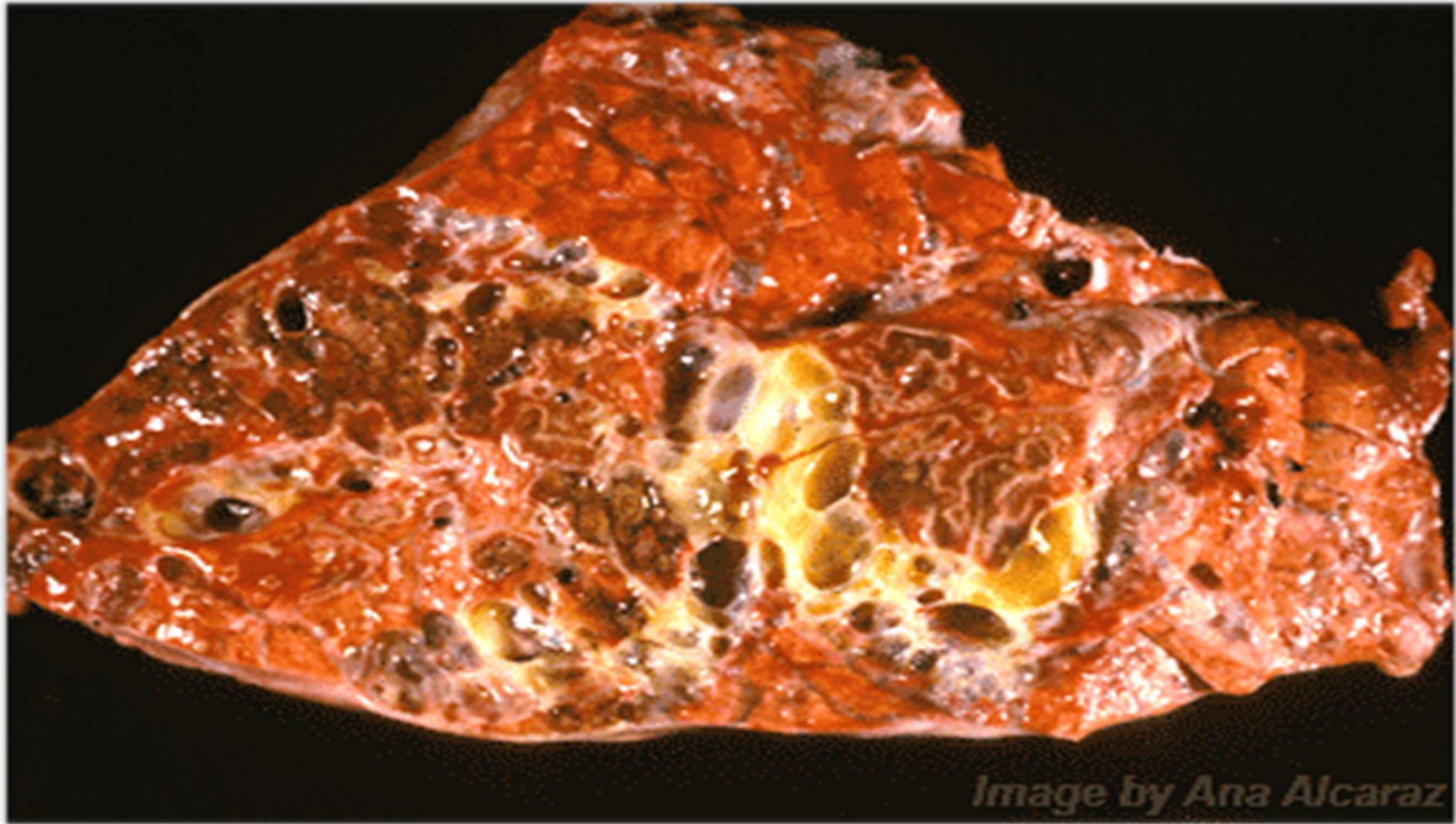
**Fibrinous-necrotic pneumonia with septic thrombi**



Image by Ana Alcaraz

# Granulomatous: Mycosis

## Mycotic pneumonia



# Necrotic caseous-calcific Pneumonia; TB





# ***Echinococcus granulosus cysts***



# Sequestra







Thank  
you

