



Ongoing Deer Worm Study

As part of the deer worm study we need to identify animals that may be showing signs of deer worm infection to determine if they should be put on a treatment protocol.



Deer worm damages the spinal cord and may cause lameness, abnormal gait, or paralysis. **A typical sign is dragging of a hind toe or weakness in the hind end.** It can also affect a nerve root, near the spinal cord, causing a constant itch (and sore) on one part of the skin.

An animal is not a candidate for the study if it only shows a skin sore or if it shows indications of brain disease such as any of the following signs:

1. Severe mental depression
2. Inability to eat or drink
3. Blindness or failure to blink when a hand is waved in front of each eye
4. Dropped jaw or drooling or tongue hanging out of the mouth
5. Rapid up and down or sideways movement of an eyeball
6. Circling in one direction

What to do with suspected deer worm animals (weak in hind end, dragging a foot, dog-sitting, or paralyzed):

First, contact the people below. Then locate your little red cooler that contains the treatment protocols and medication. Please note that there is also a business card with their contact info in one of the outside pockets of your cooler. You need to start the animal on Treatment A or Treatment B depending on what the cards inside the cooler indicate. Food and water should be put within reach of the animal, i.e. you will likely need to put it in a jug. If the animal cannot stand and is falling over on its side, it should be propped up so it is stable on its chest floor.

Whom to contact:

Call Dr. Mary Smith (ASAP)	607-253-3140	mcs8@cornell.edu
If Dr. Smith is unavailable call either:		
Tatiana Stanton	607-254-6024 (W) 607-387-5009 (H)	tls7@cornell.edu
Natasha Pettifor	813-598-3997	nlp38@cornell.edu

Treatment for Deer Worm Infected Animals on the Study

1. Safeguard (10% Fenbendazole) orally for 5 days at 25 mg per kg of live weight (1 ⅓ cc per 10 pounds of live weight).
2. Dexamethasone injectable 2 mg/mL IM at 0.2 mg/kg live weight for first 3 days and 0.1 mg/kg next 2 days (1/2 cc of Dexamethasone per 10 pounds live weight for the first 3 days, followed by ¼ cc Dexamethasone for next 2 days). **Ewes and does in last month of pregnancy are not to receive Dexamethasone. Instead, they will receive flunixin meglumine (Banamine®) 50 mg/mL at the rate of 1 cc/100 lb live weight (1.1 mg/kg) orally for 5 days.**
3. ¼ cc of either “Product A” or “Product B” SQ for 5 days for each 10 pounds of live weight determined by whether the animal has been assigned to “Treatment A” or “Treatment B”. One of these products is an Ivermectin Placebo and the other is Ivermectin 1% injectable administered at 0.5 mg/kg live wt.

Treatment protocols for deer worm infected sheep and goats of different weights.

Animal weight	Treatment
33 lb (15 kg)	<ul style="list-style-type: none"> • ¾ cc of Product A or Product B SQ for 5 days • 4 cc Safeguard® (10% Fenbendazole) orally for 5 days • 1 ½ cc Dexamethasone injectable 2 mg/mL IM for 3 days, followed by ¾ cc for 2 days¹
44 lb (20 kg)	<ul style="list-style-type: none"> • 1 cc of Product A or Product B SQ for 5 days • 5 ½ cc Safeguard® (10% Fenbendazole) orally for 5 days • 2 cc Dexamethasone injectable 2 mg/mL IM for 3 days, followed by 1 cc for 2 days¹
66 lb (30 kg)	<ul style="list-style-type: none"> • 1 ½ cc of Product A or Product B SQ for 5 days • 8 cc Safeguard® (10% Fenbendazole) orally for 5 days • 3 cc Dexamethasone injectable 2 mg/mL IM for 3 days, followed by 1 ½ cc for 2 days¹
88 lb (40 kg)	<ul style="list-style-type: none"> • 2 cc of Product A or Product B SQ for 5 days • 10 ⅔ cc Safeguard® (10% Fenbendazole) orally for 5 days • 4 cc Dexamethasone injectable 2 mg/mL IM for 3 days, followed by 2 cc for 2 days¹
110 lb (50 kg)	<ul style="list-style-type: none"> • 2 ½ cc of Product A or Product B SQ for 5 days • 13 ⅓ cc Safeguard® (10% Fenbendazole) orally for 5 days • 5 cc Dexamethasone injectable 2 mg/mL IM for 3 days, followed by 2 ½ cc for 2 days¹
132 lb (60 kg)	<ul style="list-style-type: none"> • 3 cc of Product A or Product B SQ for 5 days • 16 cc Safeguard® (10% Fenbendazole) orally for 5 days • 6 cc Dexamethasone injectable 2 mg/mL IM for 3 days, followed by 3 cc for 2 days¹
154 lb (70 kg)	<ul style="list-style-type: none"> • 3 ½ cc of Product A or Product B SQ for 5 days • 18 ⅔ cc Safeguard® (10% Fenbendazole) orally for 5 days • 7 cc Dexamethasone injectable 2 mg/mL IM for 3 days, followed by 3 ½ cc for 2 days¹
176 lb (80 kg)	<ul style="list-style-type: none"> • 4 cc of Product A or Product B SQ for 5 days • 21 ⅓ cc Safeguard® (10% Fenbendazole) orally for 5 days • 8 cc Dexamethasone injectable 2 mg/mL IM for 3 days, followed by 4 cc for 2 days¹
198 lb (90 kg)	<ul style="list-style-type: none"> • 4 ½ cc of Product A or Product B SQ for 5 days • 24 cc Safeguard® (10% Fenbendazole) orally for 5 days • 9 cc Dexamethasone injectable 2 mg/mL IM for 3 days, followed by 4 ½ cc for 2 days¹
220 lb (100 kg)	<ul style="list-style-type: none"> • 5 cc of Product A or Product B SQ for 5 days • 26 ⅔ cc Safeguard® (10% Fenbendazole) orally for 5 days • 10 cc Dexamethasone injectable 2 mg/mL IM for 3 days, followed by 5 cc for 2 days¹

¹Ewes and does in last month of gestation should receive flunixin meglumine (Banamine®, prescription only) 50 mg/mL at the rate of 1 cc/100 lb live weight (1.1 mg/kg) orally for 5 days instead of receiving Dexamethasone.