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Thoracic Ultrasonography for IP Diagnosis and Prognosis of Feedlot Respiratory Disease

ARC Regional (West)
Luis Feitoza, DVM, PAS, PhD

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Resource Collaborations



FFAR

Grant ID 22-000564



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General Background & Objectives

- Bovine respiratory disease (BRD) is an important cause of morbidity and mortality in beef feedlot industry. BRD causes decreased feed efficiency and weight gain, increased cost, and death.
- Utilization of chute-side technologies to aid on Diagnosis and Prognosis.

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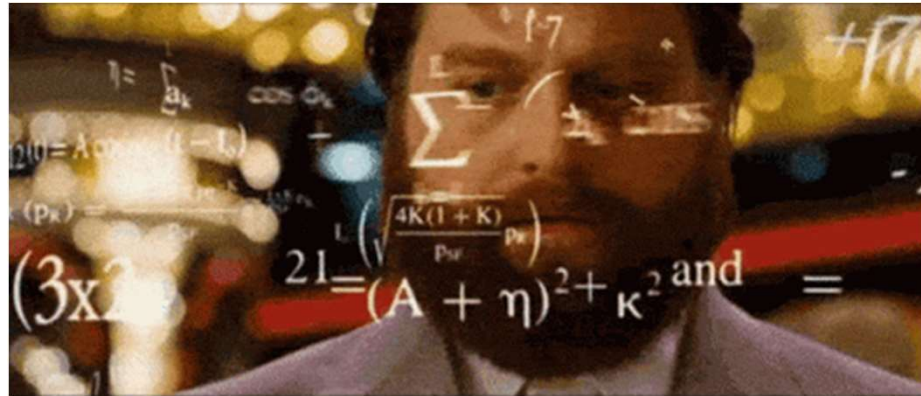


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Terminology

- **BRD** = Bovine Respiratory Disease
- **BP** = Bronchopneumonia, often associated with bacteria and results in consolidation
- **IP** = Interstitial pneumonia, typically associated with viruses or incompletely characterized pneumotoxins
- **BIP** = Bronchopneumonia with interstitial pneumonia
- **POCUS** = Point-of-care (chuteside) Ultrasound of Lung and Pleura
- **Cranio-ventral** = Towards the head and belly / elbow area
- **Caudo-dorsal** = Towards the top and tail

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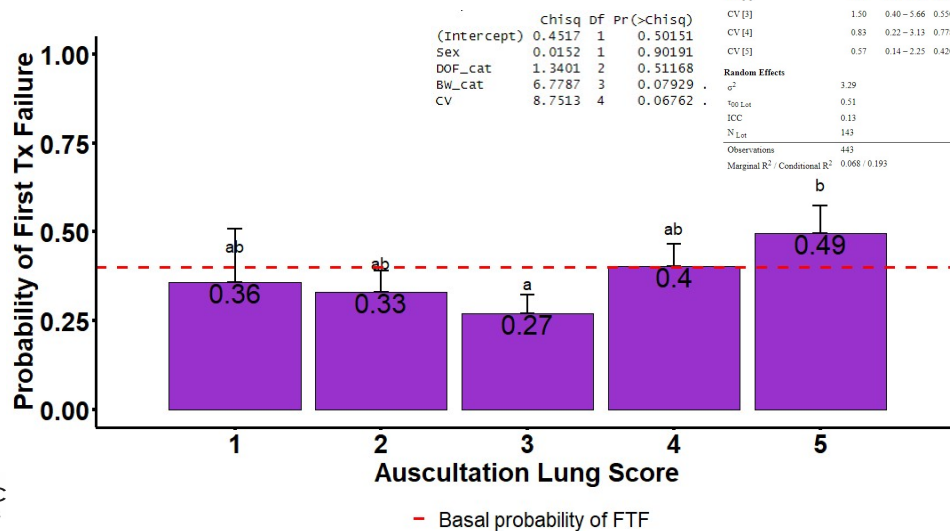
Respiratory disease and its complexity

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FTF: How about auscultation only

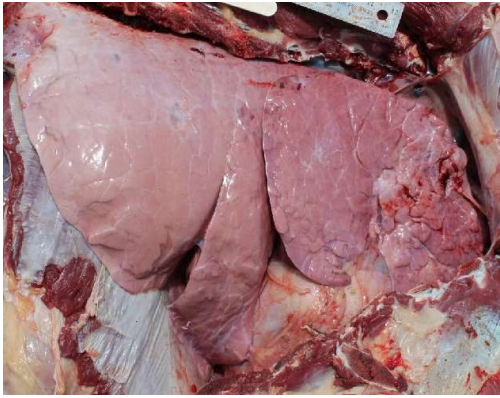


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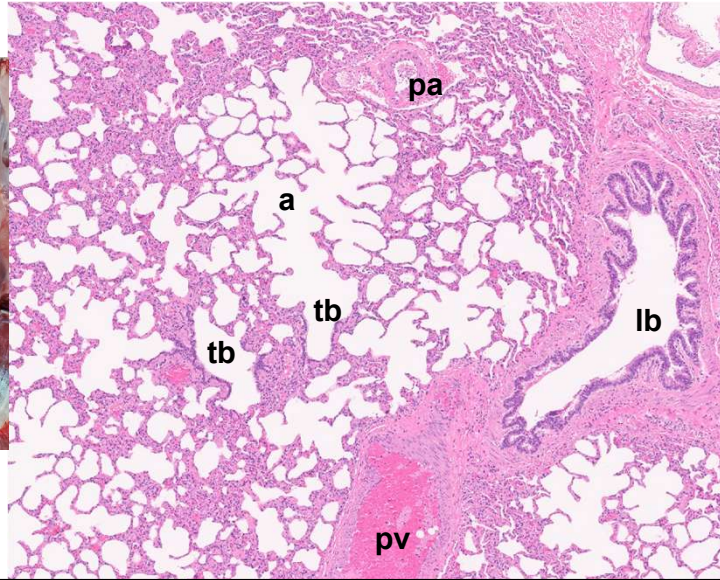


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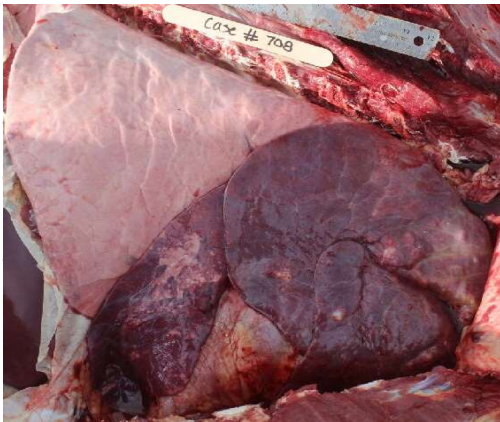
Normal Lung



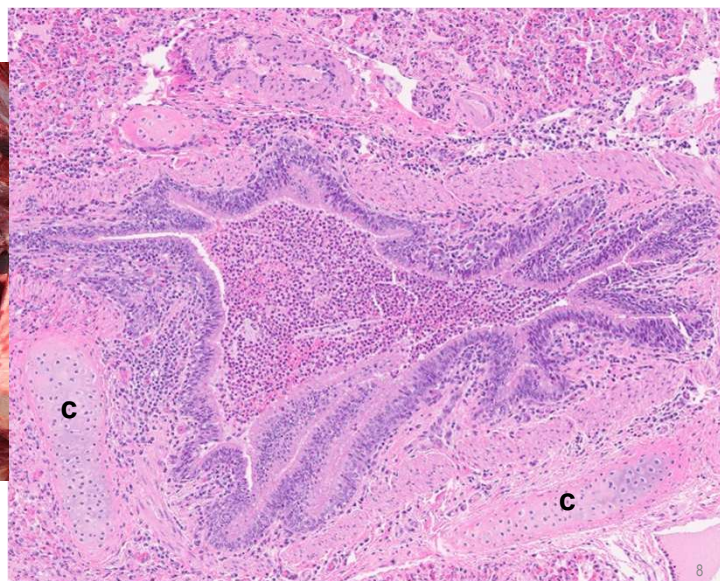
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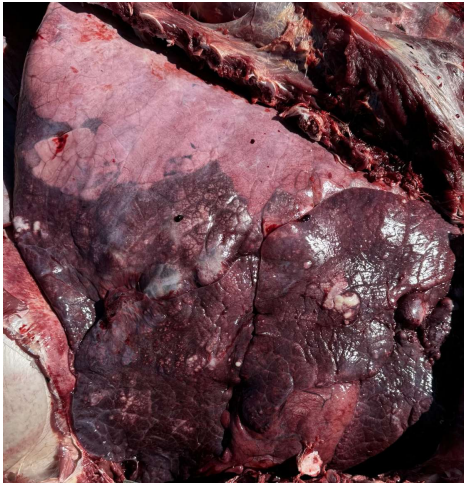
Acute BP



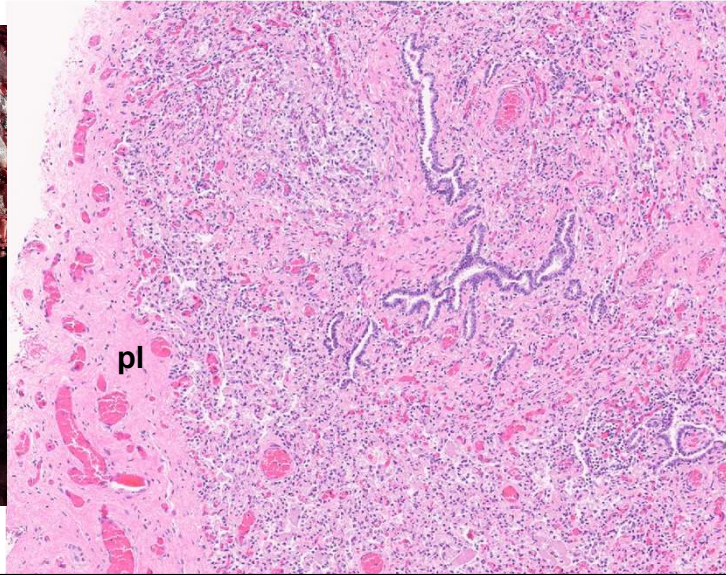
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Chronic BP



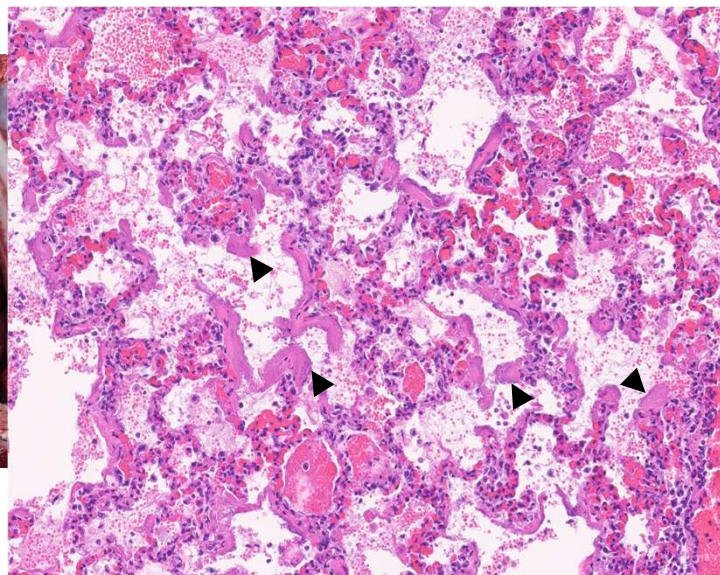
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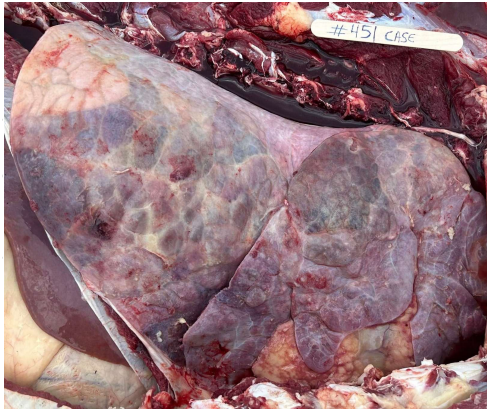
Acute IP



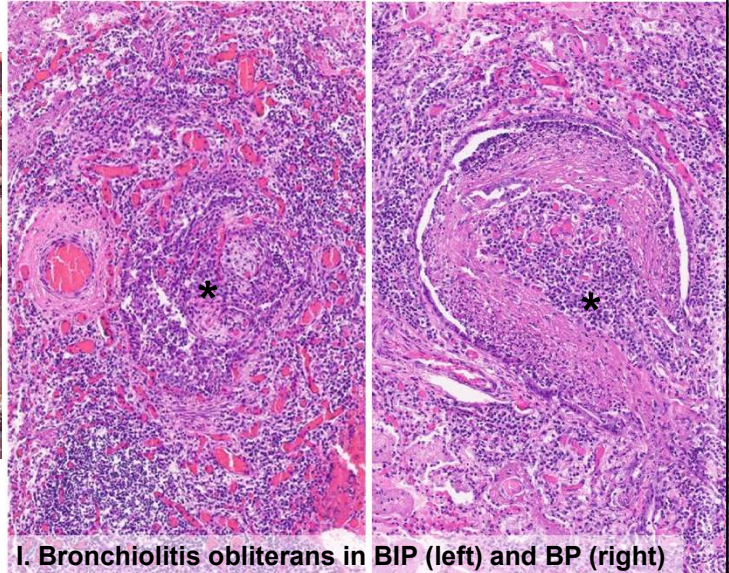
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Bronchopneumonia with Interstitial Pneumonia



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I. Bronchiolitis obliterans in BIP (left) and BP (right)

Bronchopneumonia with Interstitial Pneumonia



Chronic BP + acute IP)

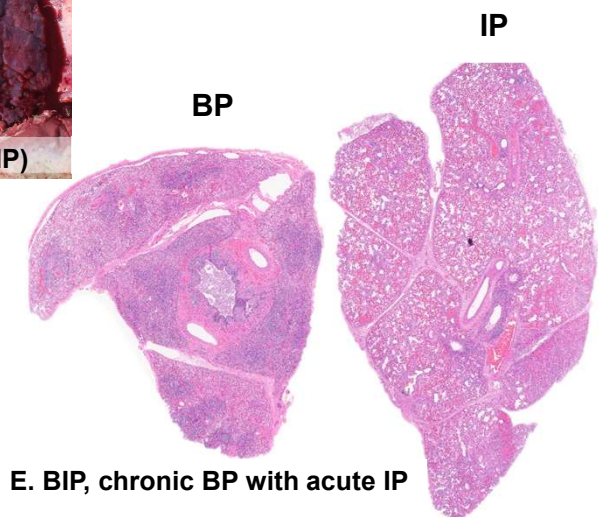


Acute BP + chronic IP)



Chronic BP + chronic IP)

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E. BIP, chronic BP with acute IP



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How did we learn about chute-side Dx/Px

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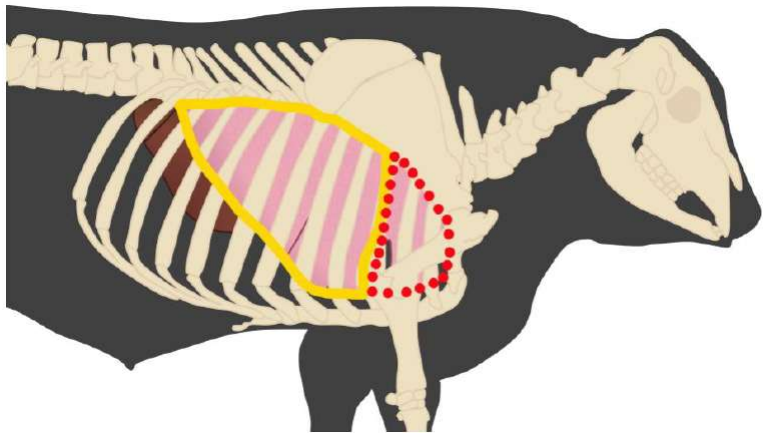
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Variables collected at time of POCUS

- | | |
|---|---|
| <ol style="list-style-type: none"> 1. Pleural Line <ol style="list-style-type: none"> 1. Moth Sign, 2. Effusion, 3. Distance: Pleural Line to B-Line 2. Lung parenchyma <ol style="list-style-type: none"> 1. Pixel Integrated Density, 2. B-Line Area, 3. B-line count, 4. A- Line Count, 5. POCUS Lung Score, 6. Min/Mean/Max/Modal Gray Value | <ol style="list-style-type: none"> 3. Animal Population <ol style="list-style-type: none"> 1. Animal Body Weight, 2. Interval from POCUS to Death, 3. Days on Feed, 4. Sex, 5. Breed 4. Other measurements <ol style="list-style-type: none"> 1. Back Fat Thickness, 2. Rib Eye Area, 3. Pulse, 4. SPO2, 5. Lung Auscultation (CV and CD) |
|---|---|

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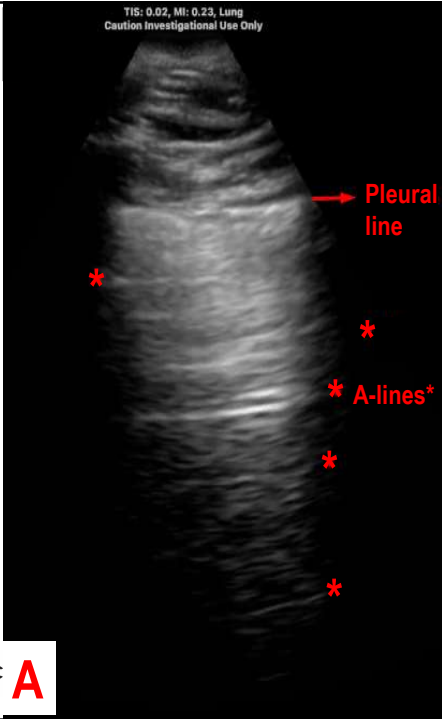
TT-POCUS



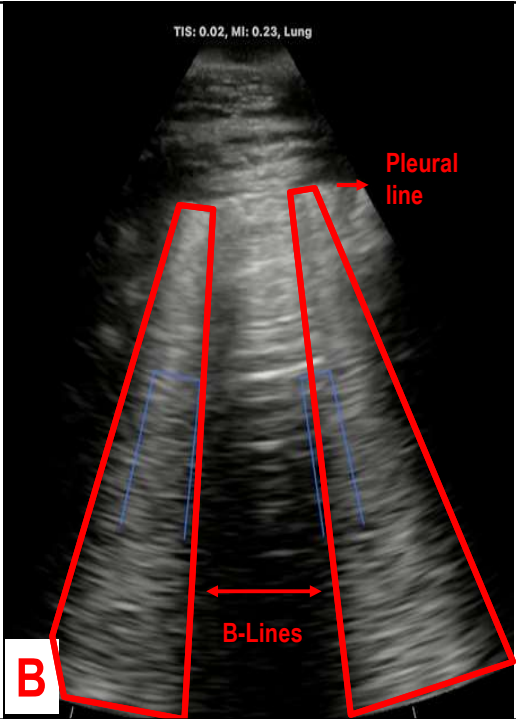
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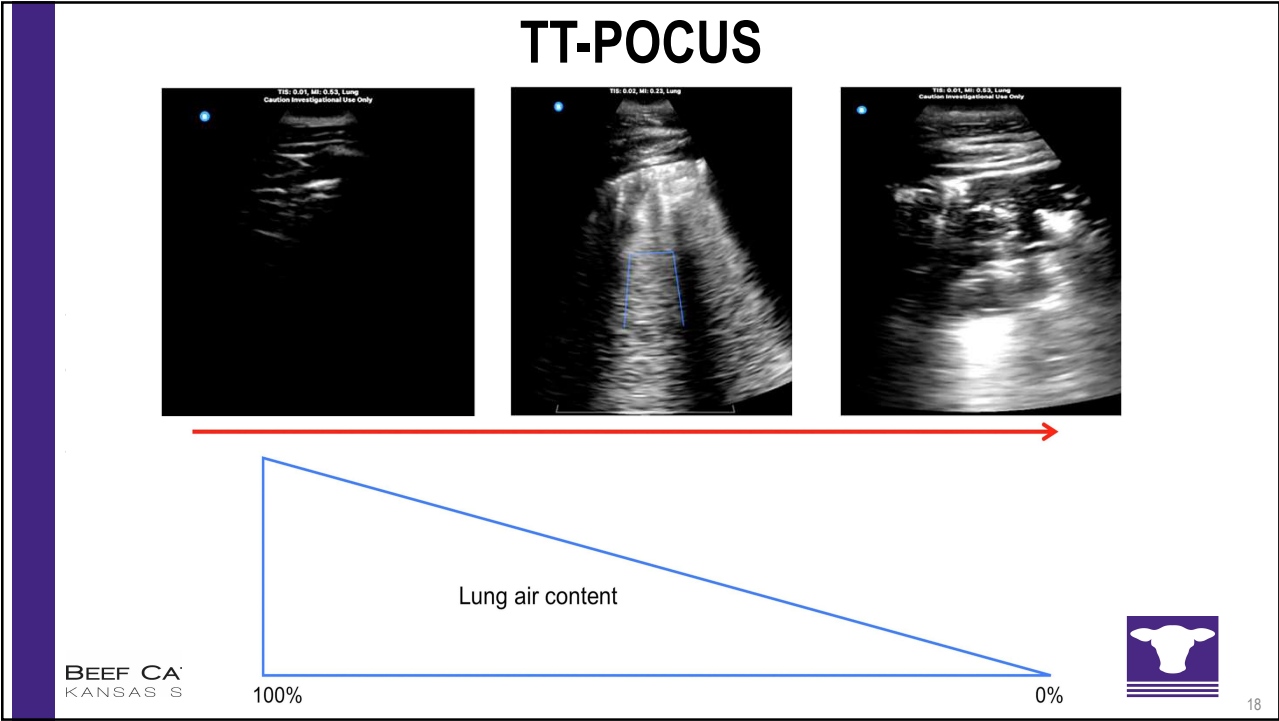
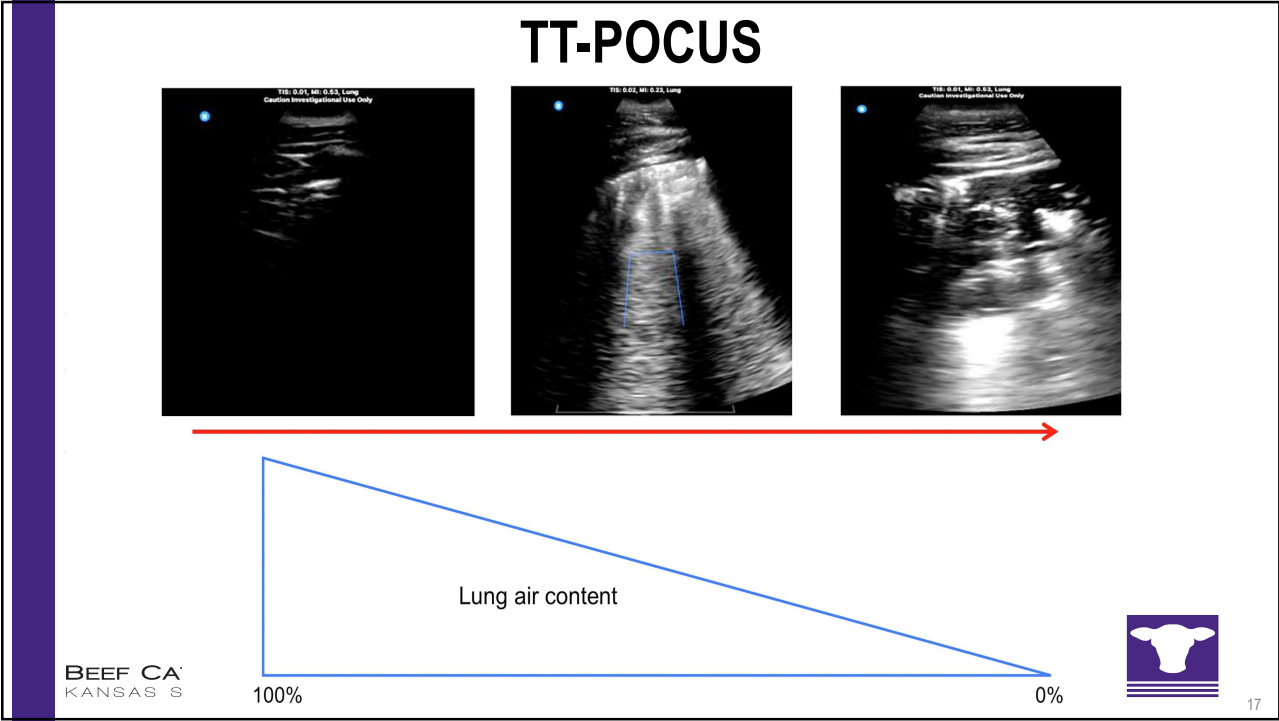


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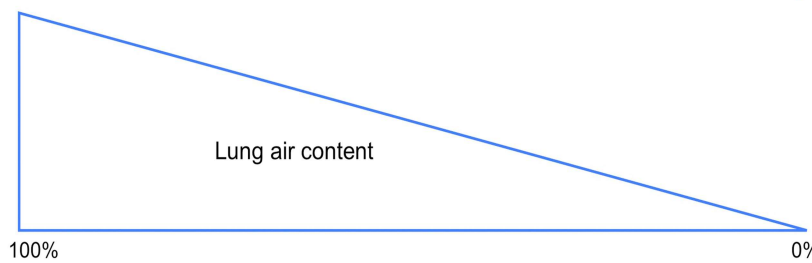
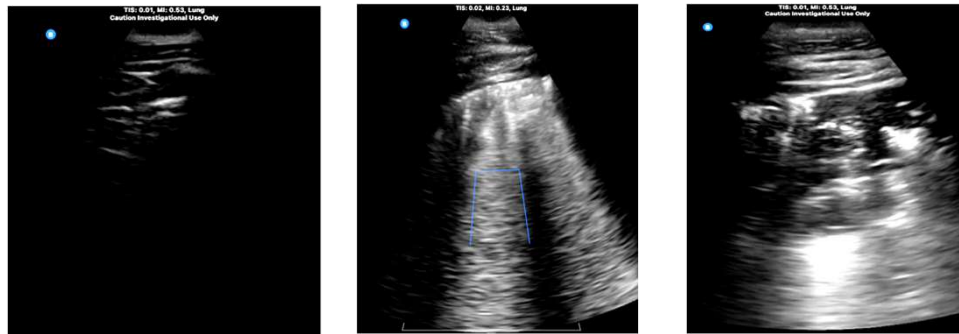


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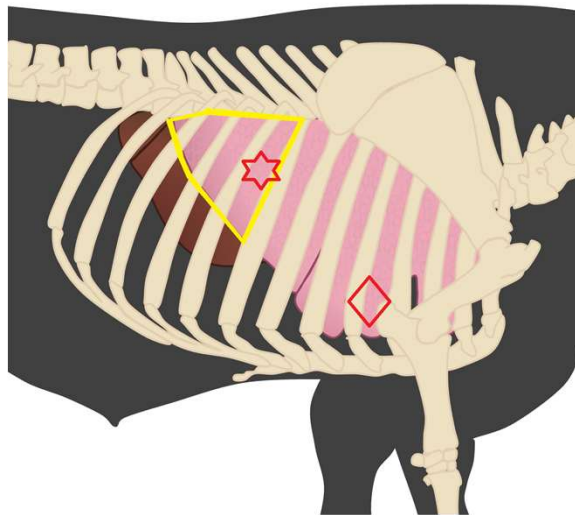


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Lung Auscultation



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Pulse oximetry



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Evaluation of targeted thoracic point-of-care
ultrasonography for identification of interstitial
pneumonia in feedyard cattle

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Hypothesis & Objective

- Targeted use of Ultrasound technology can decrease evaluation time, Dx respiratory diseases and differentiate Interstitial-pattern Pneumonia from other respiratory diseases
- Identify variables associated with interstitial pneumonia using Multivariate Logistic Regression.

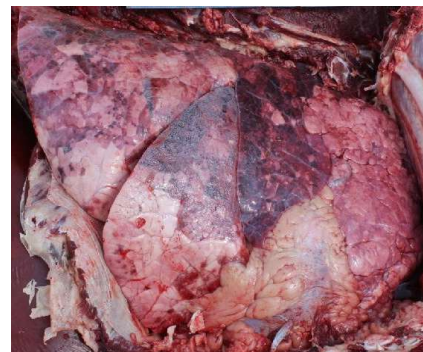
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Inclusion criteria

- Individual animals POCUS'd at chute-side AND deceased

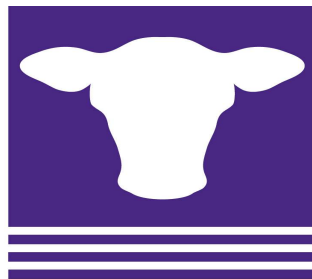
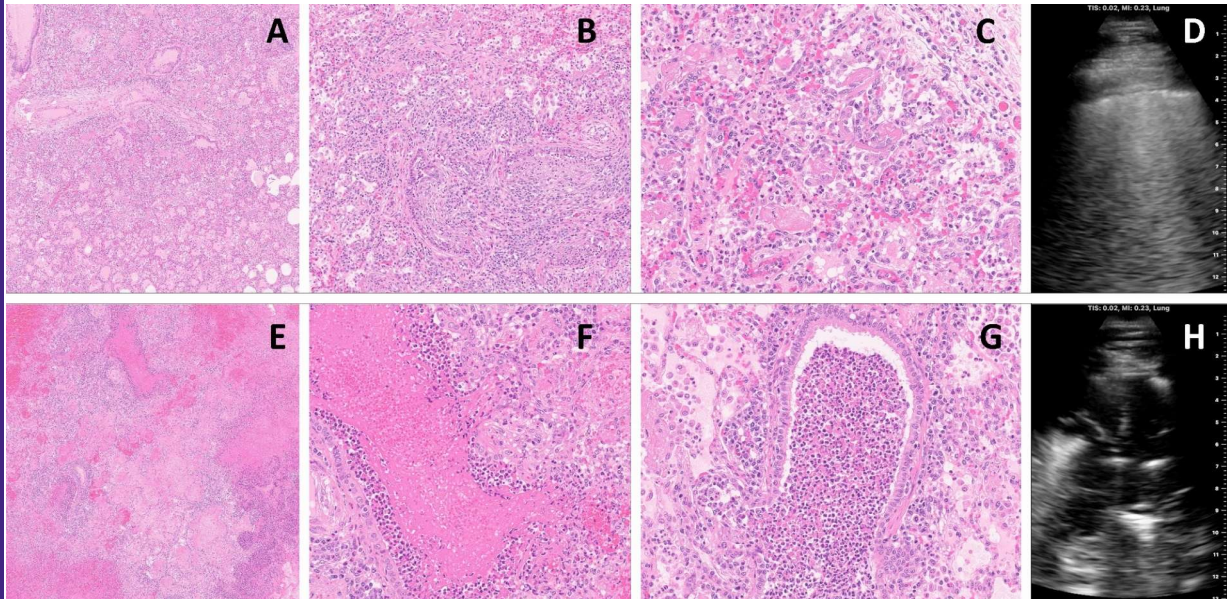


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Outcome = Histopathology Dx



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Results & Discussion

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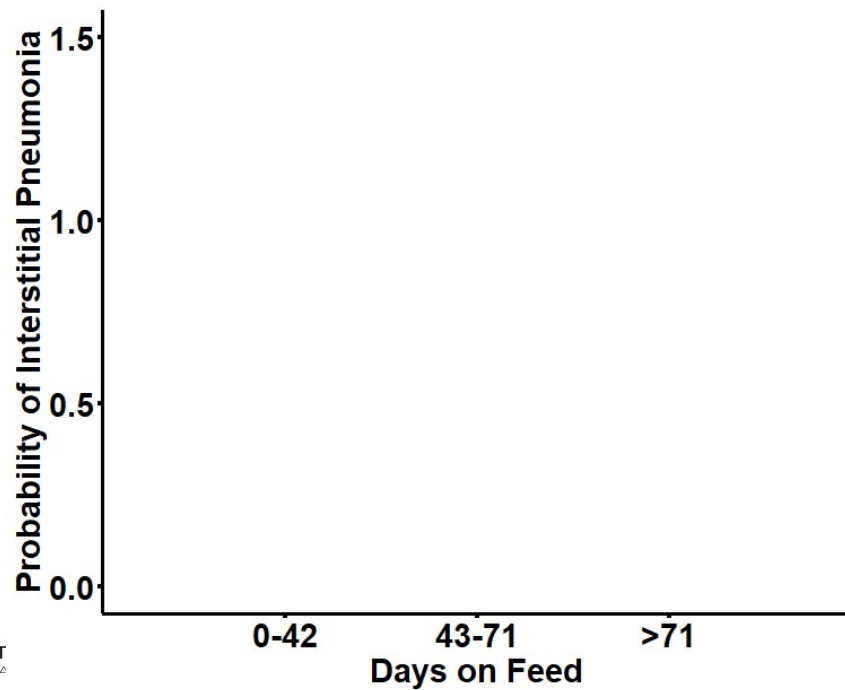


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Multivariate Logistic Regression using GLM

Response outcome: Interstitial Pneumonia	VIF	LR χ^2	<i>P</i> -value (χ^2)
Sex	1.10	0.92	0.33
Days on Feed	1.58	5.12	0.02
B-Line Count	1.90	4.92	0.03
Lung Score	2.70	12.4	0.002
A-Line Count	1.70	13.67	0.0003

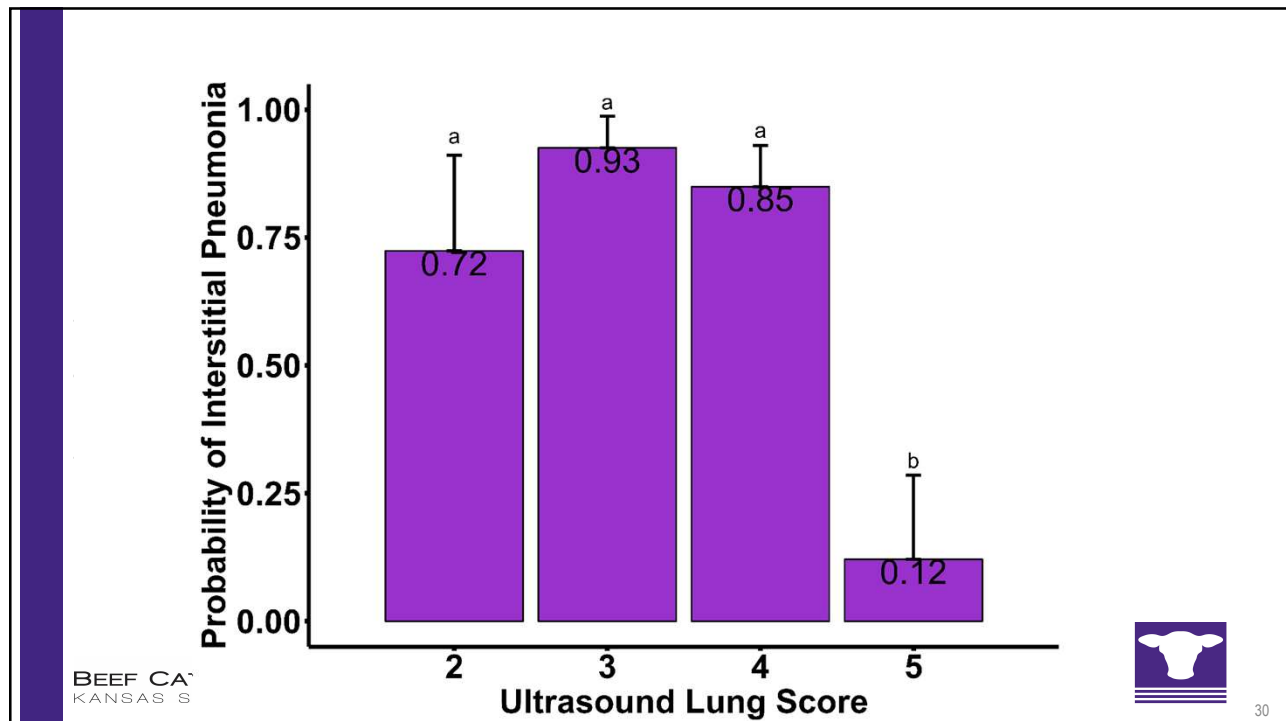
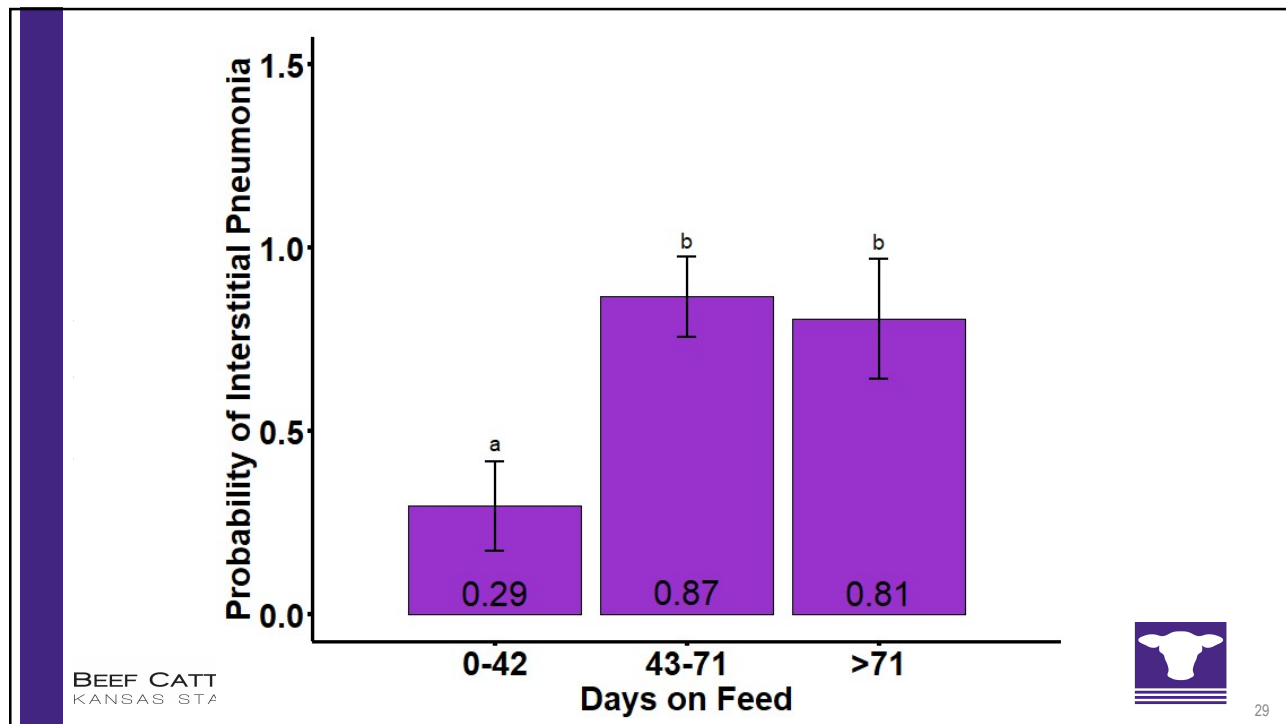
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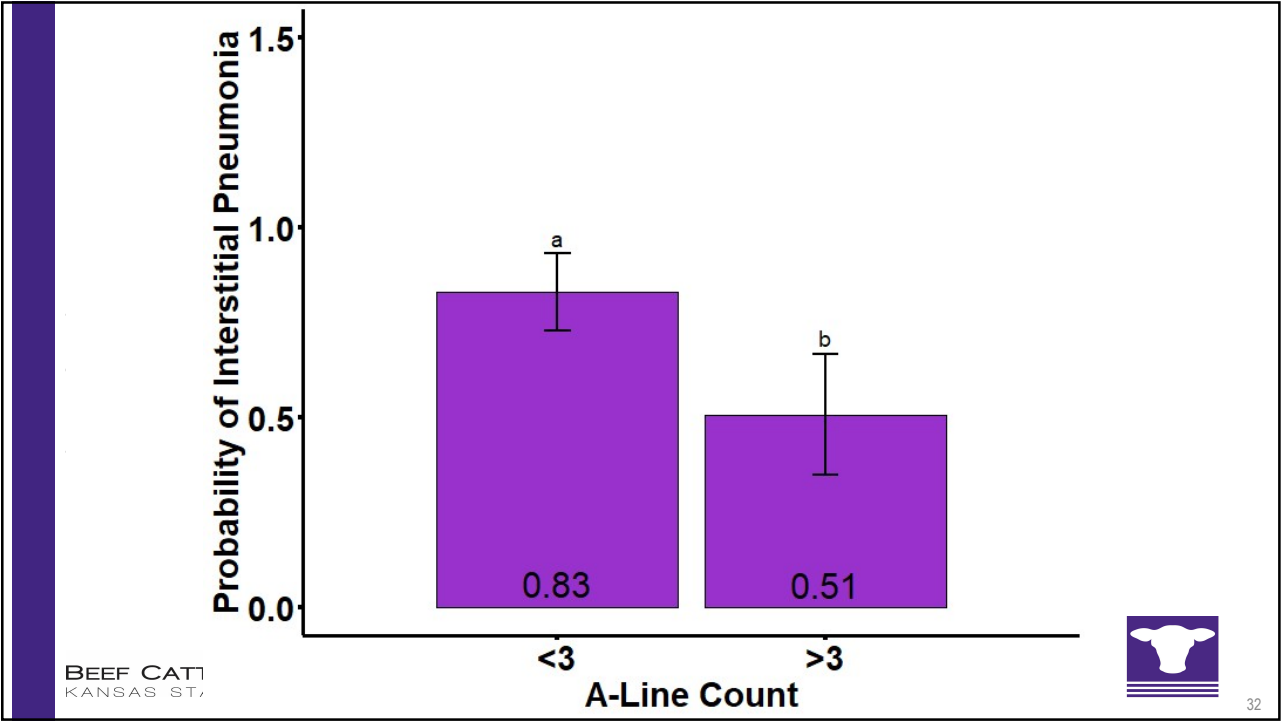
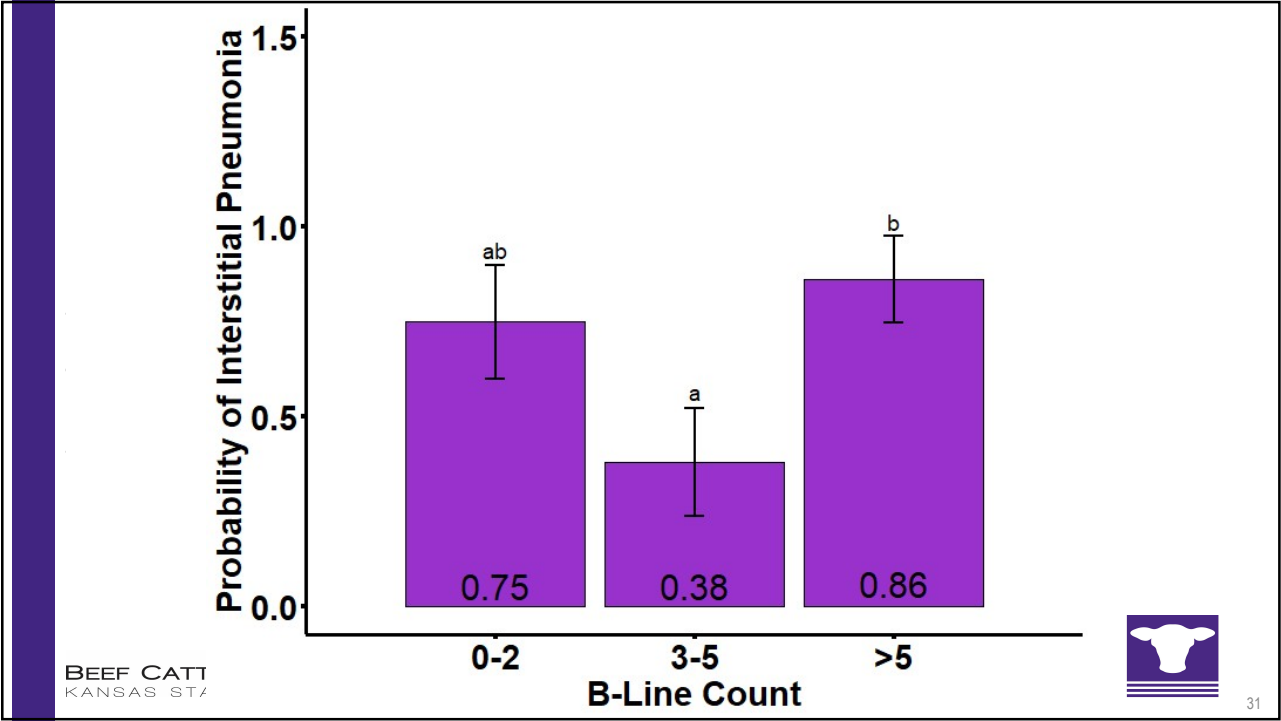


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Conclusion

- Without disturbing commercial feedyard hospital pace, TT-POCUS at chute-side served to identify cases of respiratory diseases at caudo-dorsal level.
- This study identified imaging parameters that could be used to differentiate Interstitial-pattern pneumonias from other respiratory diseases in feedlot cattle.

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How about Prognosis

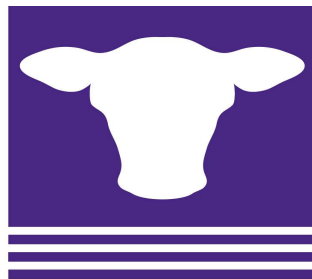
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Utilization of point-of-care evaluation to determine
prognosis in feedyard cattle with multiple previous
respiratory disease treatment

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Background

- Point-of-care chuteside diagnostics may be valuable to enhance **prognostic** accuracy for diseased cattle.
- Accurate prognosis for chronically ill cattle with pneumonia facilitates informed management practices.

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Objective

- Identify associations between chuteside parameters at the time of ≥ 3 treatment with:
 - Mortality or culling (DNF)

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Enrollment

- Animal's ≥ 3 **treatment** for respiratory disease clinically diagnosed by feedyard and 60-day outcome data
- Feedyard doctor blinded to chuteside evaluation;



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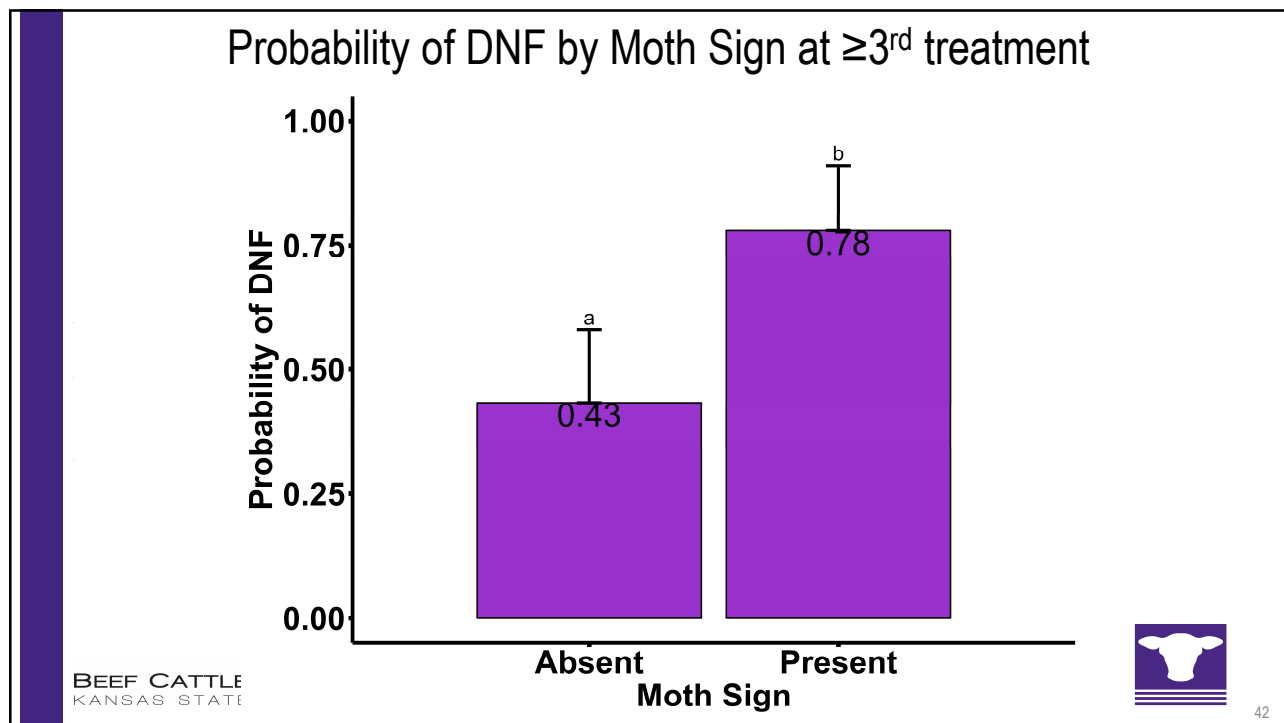
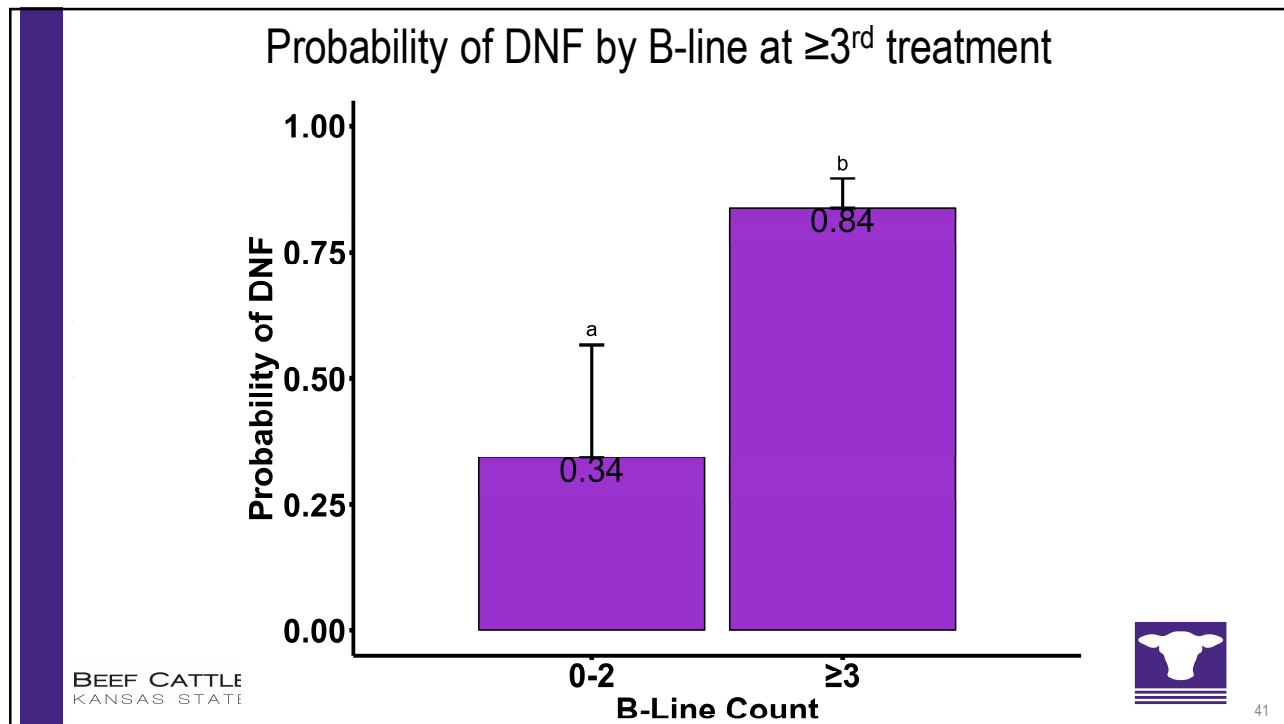
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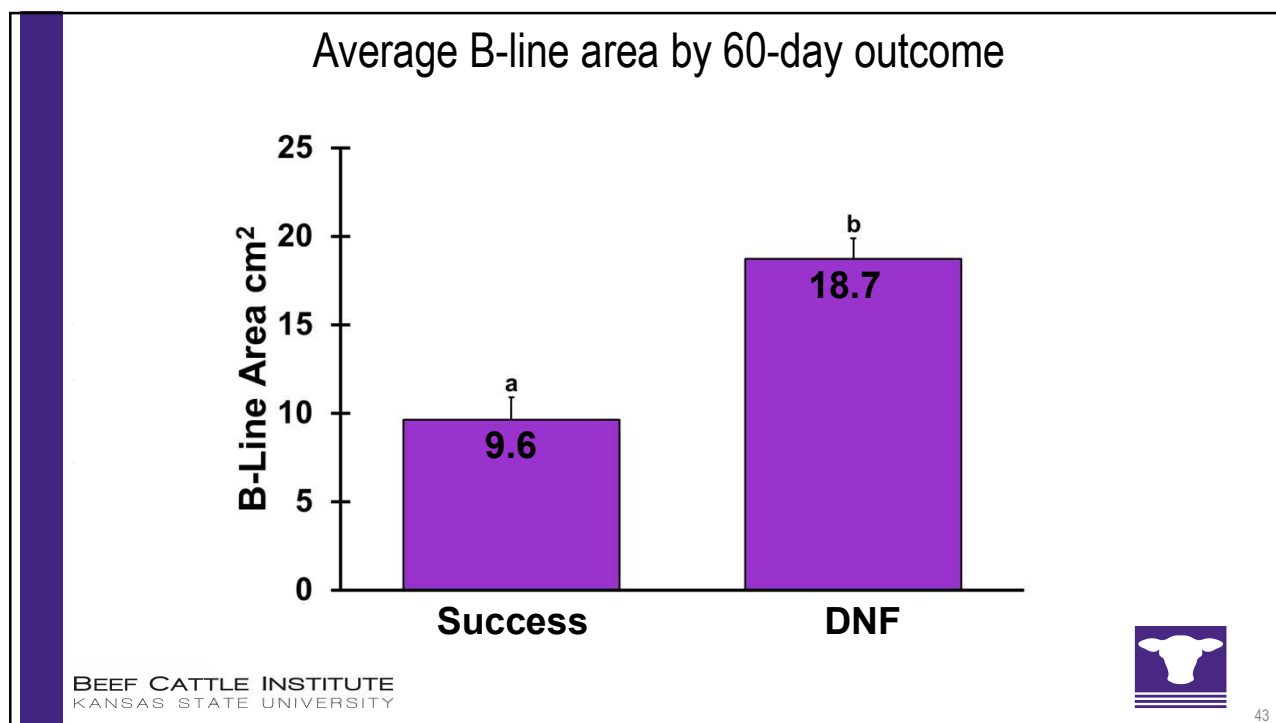
Final Multivariate Logistic Regression

Response outcome: Did not finish	LR χ^2	<i>P</i> -value (χ^2)
Sex	0.09	0.75
Days on Feed	3.13	0.20
B-line count category	5.32	0.02
Moth Sign	4.53	0.03
B-line area	4.35	0.03

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Conclusion

- Pulse, SPO₂, lung auscultations, sex, DOF, BW and breed showed no evidence of association with the 60-day post treatment outcomes in these multivariate logistic regression ($P > 0.05$).
- **Target thoracic ultrasound measurements: B-line category, Moth Sign and B-line area** were valuable information at time of ≥ 3 treatment to prognose respiratory diseased feedyard cattle to inform decisions

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Associations Between Chuteside Evaluations and 60-day Outcomes in Feedyard Cattle at Time of First Treatment for Respiratory Disease

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Background

- Point-of-care chuteside diagnostics may be valuable to enhance **prognostic** accuracy for diseased cattle.
- Accurate prognosis for cattle at time of **first treatment** with pneumonia facilitates informed management practices.

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Objective

- Identify associations between chuteside parameters at the time of first treatment with:
 - Mortality or culling (DNF)
 - First treatment failure = Relapse+DNF (FTF)

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Materials & Methods

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Enrollment

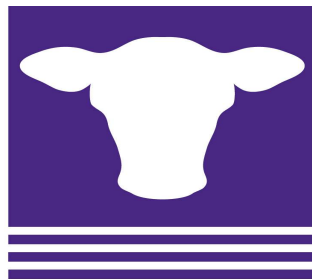
- Animal's **first-time treatment** for respiratory disease clinically diagnosed by feedyard and 60-day outcome data
- Feedyard doctor blinded to chuteside evaluation;



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Model: Did not finish (DNF)

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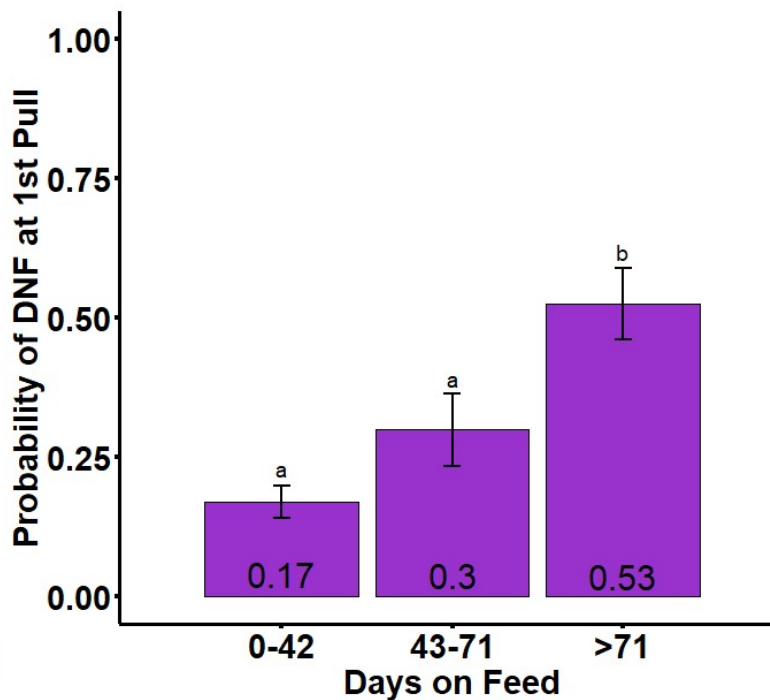
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Final Multivariate Logistic Regression

Response outcome:

Did not finish	χ^2	<i>P</i> -value (χ^2)
Sex	1.02	0.31
Days on Feed	12.25	0.01
Body Weight	15.14	0.03
Moth Sign	18.58	0.0001
B-line count	32.96	0.0001
Ultrasound Lung Score	29.56	0.01

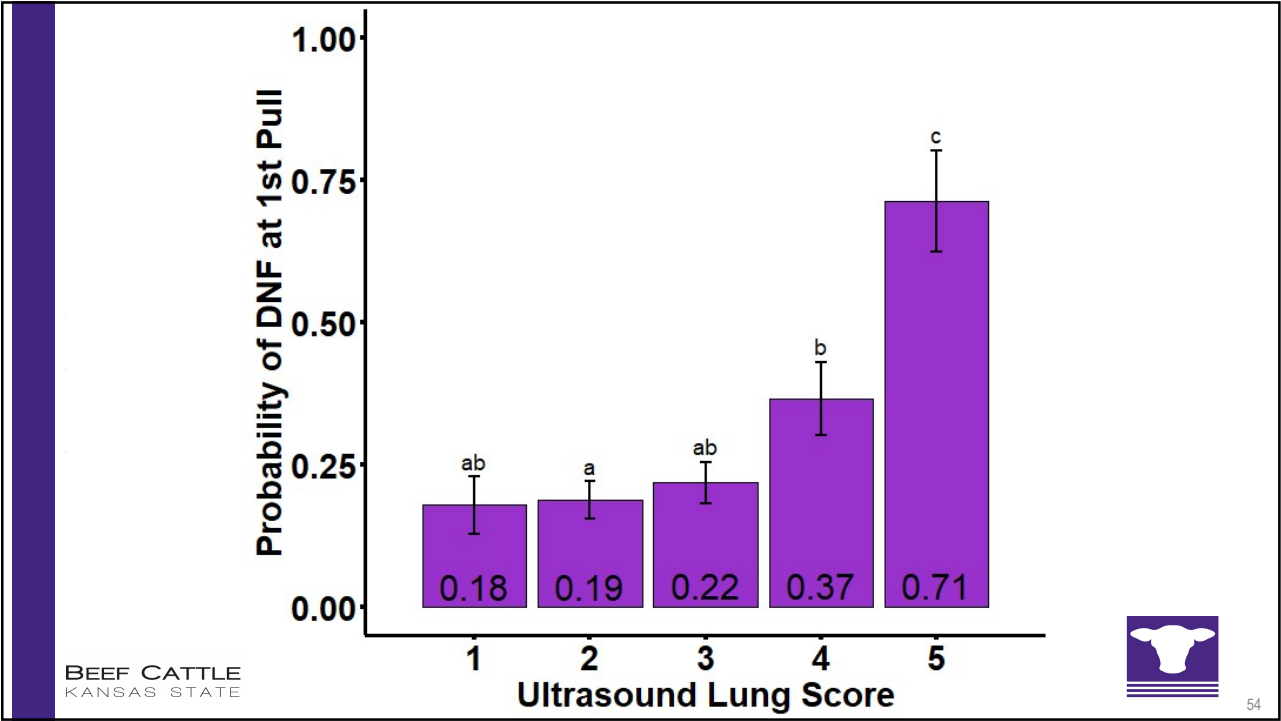
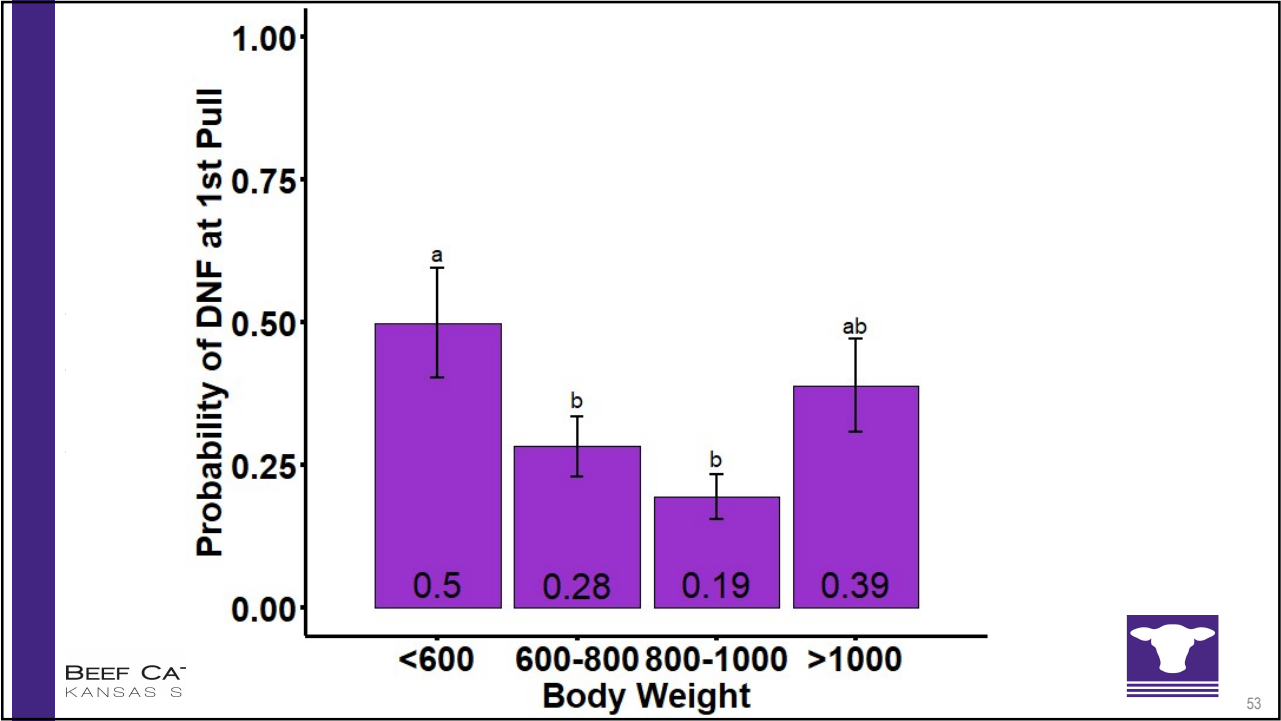
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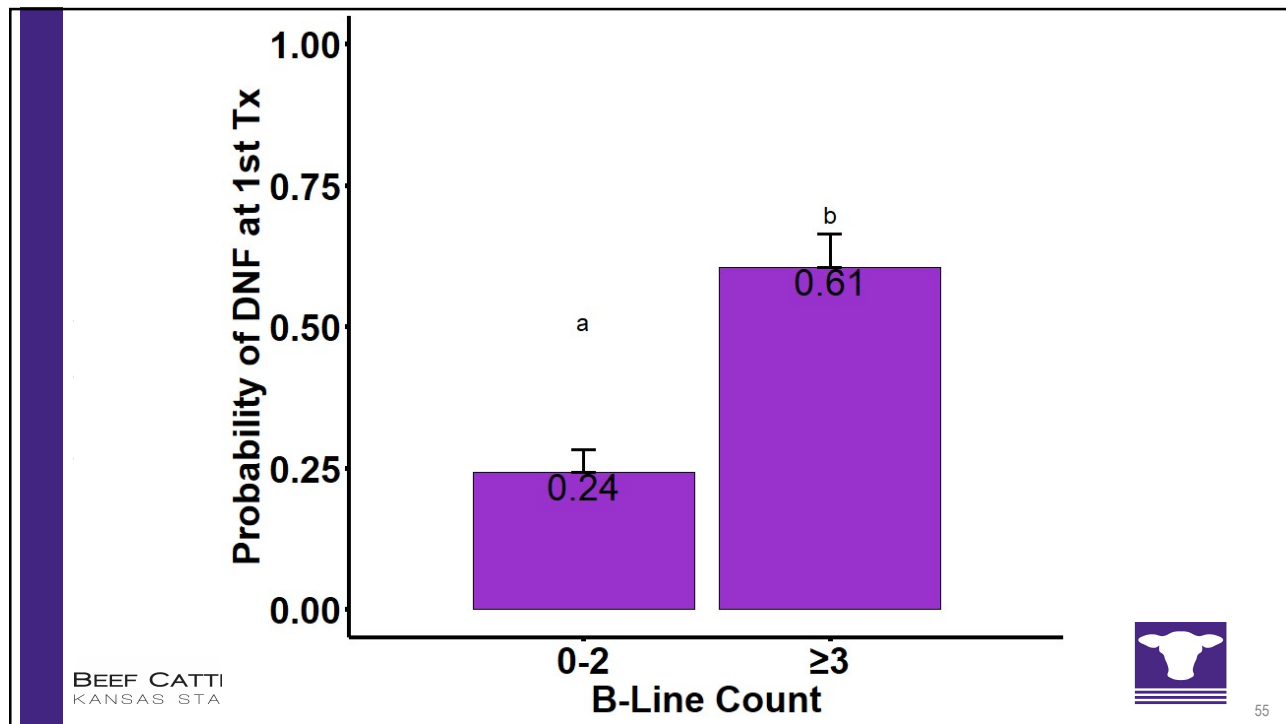


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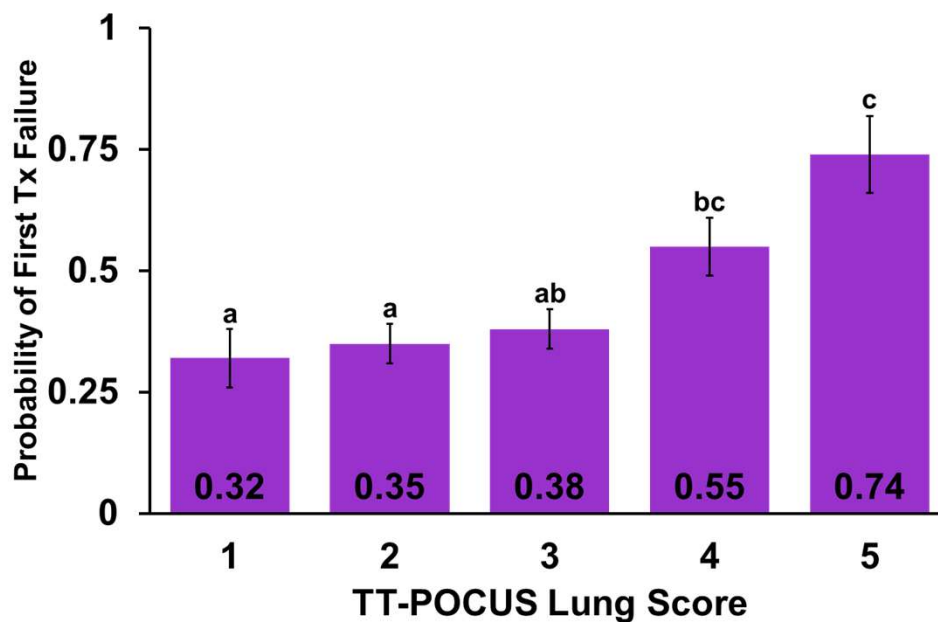
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Model: First treatment failure (FTF)

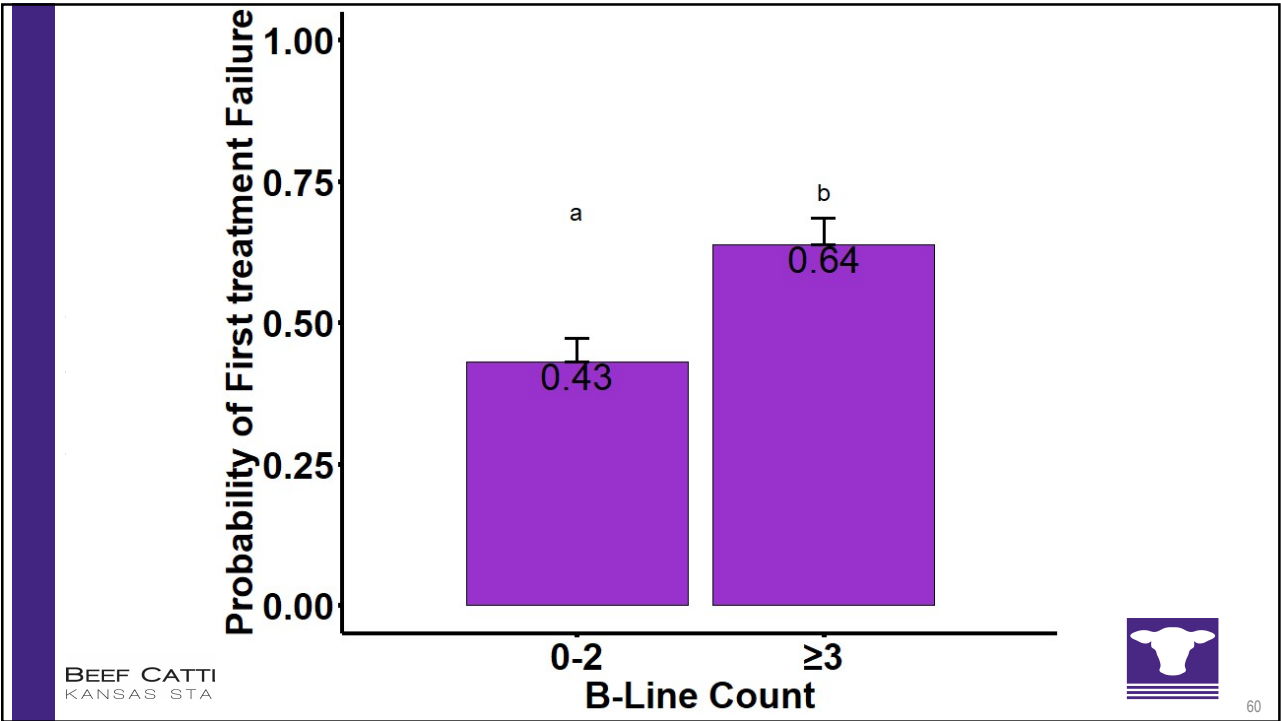
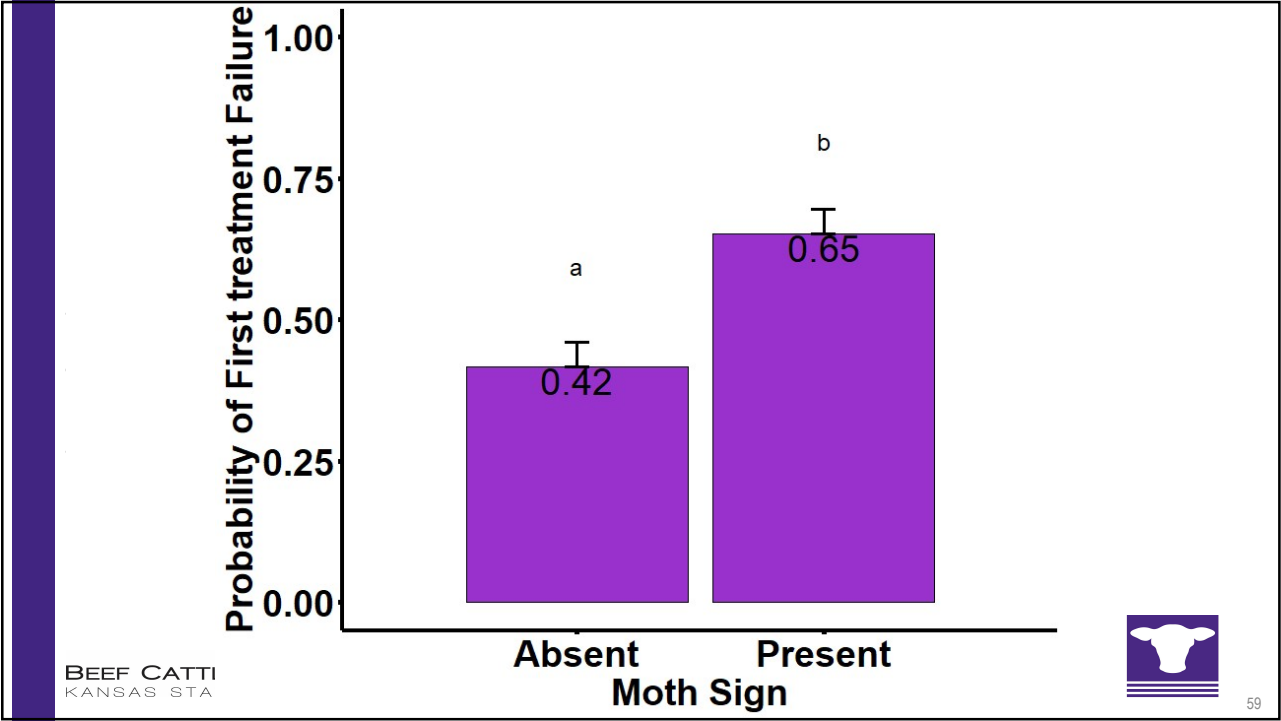
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Final Multivariate Logistic Regression

Response outcome: First Treatment Failure		
	χ^2	<i>P</i> -value (χ^2)
Sex	0.74	0.38
Days on Feed	3.51	0.007
Body Weight	12.10	0.01
Moth Sign	22.79	0.0001
B-line count	16.51	0.0001
Ultrasound Lung Score	24.41	0.038

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Conclusion

- Pulse, SPO2, lung auscultations, sex, and breed showed no evidence of association with the 60-day post treatment outcomes in these multivariate logistic regression ($P > 0.05$).
- In addition to cattle BW class and DOF, **Ultrasound lung score, B-line count, moth sign** were also valuable information at time of first treatment to prognose respiratory diseased feedyard cattle.

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Training



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Overall conclusions

- Novel targeted thoracic ultrasound results indicated that certain ultrasound parameters were associated with disease differentiation and prognosis.
- The ability to differentiate interstitial pneumonia and predict disease outcomes using targeted thoracic ultrasonography can represent a significant advancement in the point-of-care diagnostics for feedyard cattle.

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Article

Associations Between Thoracic Ultrasound Chute-Side Evaluations and 60-Day Outcomes in Feedyard Cattle at Time of First Treatment for Respiratory Disease

Luis F. B. B. Feitoza ¹, Brad J. White ^{1,*}, Robert L. Larson ¹ and Tyler J. Spore ²

AJVR



Targeted thoracic ultrasonography shows high diagnostic potential for interstitial pneumonia in feedyard cattle

Luis F. B. B. Feitoza, DVM, PAS, PhD¹; Brad J. White, DVM, MS^{1*}; Robert L. Larson, DVM, PhD, DACVPM¹; Makenna Jensen¹; Laura Carpenter¹; Brandon L. Plattner, DVM, PhD, DACVP²; Abigail Finley, DVM, PhD, DACVP²; Tyler J. Spore, MS, PhD⁴



Review

Thoracic Ultrasound in Cattle: Methods, Diagnostics, and Prognostics

Luis F. B. B. Feitoza, Brad J. White * and Robert L. Larson

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Questions?

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Ultrasound Lung Score

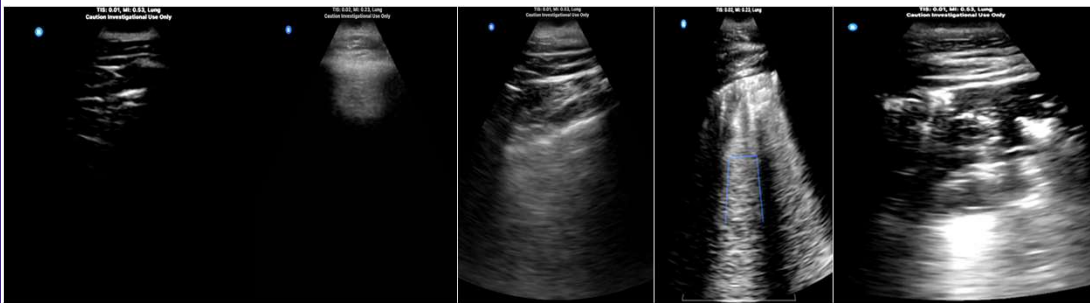
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Lung air content

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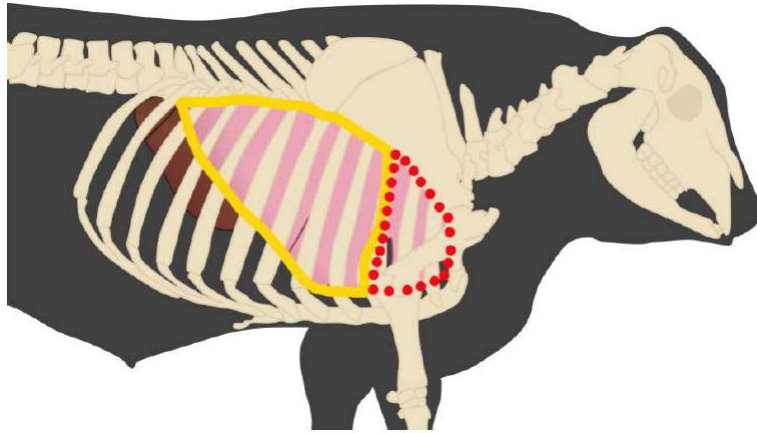
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TT-POCUS



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