

HISTORY TAKING

History taking or anamnesis is the process of obtaining information on the animal patient about its illness, onset of illness, feeding practice etc through careful questioning of the owner. In Veterinary practice, the disease is presented indirectly in the form of a complaint by the owner or the attendant. Thus it is very necessary to have all the information from the owner. Most of the time, the owner or attendant fail to provide pertinent and adequate history and inaccurate history may lead to misdiagnosis. The clinician must substantiate these with rational question utilizing professional knowledge.

History taking is important for the following reasons:

- To get complete information about the illness of the animal patient, as the animal patient cannot talk as in the case of human patient.
- Owner is the first person to notice the illness and he will have noted the clinical symptoms, which will give us some important clues for the diagnosis.
- To rule out the diseases those are species specific and age specific. For example FMD in bovine not in horses, milk fever in lactating cows not in calf.

Do's during history taking

- Be polite while asking questions to the farmers
- Use simple language, if possible it is best to speak the language of the farmer
- Be humorous but not sarcastic so as to offend the farmer
- Be empathic and try to show that you are concerned about the farmer's problem

Avoid being rude to the farmers while taking history, do not be authoritative and shout, and always avoid leading question.

Cautions: be at a look out for the following points:

- Some farmers may give wrong history / information
 - to hide their mistakes
 - fear of being scolded for the mistake they committed
 - to hide their negligence
- Some farmers may not talk for various reasons in that case
 - start with their family before you ask them question about the animal disease
 - encourage them to speak, gradually ask question on the animals
- Some farmers may be talkative and may talk about what is not relevant the history trying to collect
 - in such a case select the information that are relevant the particular sick animal only and avoid other information that are not related to the diseases condition of animal presented to the hospital
- Some farmers may not know anything about the problem, this normally happen when a farmer attending the animal notices the problem and sends his children or a neighbour along with the animal to the veterinary centre. In such a case you might have to wait for the farmer himself or ask the representative of the farmers if he/she heard anything about the problem mentioned by the farmer.

History taking may be achieved under three headings via:

1. Immediate history (present history):

It comprises of recording the sequential events from the start of the illness. Questions about physiological functions such as appetite, urination, defecation, rumination, respiration, sweating, milk production, gait, posture and also of the first symptoms shown by the animal should be asked. All these information deal with the current problem of the animal and the events associated with it.

Points to note:

1. Locations of the problems: listen carefully to the complain that a farmer has to say and from there you can tentatively say the likely system involved in that condition for example

- Digestive system involvement will be shown as absence of rumination, appetite, bloat or diarrhoea
- Respiratory system involvement will be indicated presence of nasal dischargem coughing, dyspnoea
- Urinary system involvement will be manifested as frequent urination, passing red coloured or cloudy urine
- Musculo-skeletal and nervous system involvement will be manifested as lameness, inco-ordination, paralysis

2. Nature of illness: while trying to assess this you should try to find out the TIME of onset of disease, ANY CHANGE in managements practices, and signs noticed by the farmers. In doing this some of the questions that are required to be asked are:

- When did the farmer notice the disorder? (time)
- Did it occur suddenly/slowly? (acute /sub acute / chronic nature)
- What were the signs noticed? (anorexia/drop in milk yield/ others)
- Is the animal fed / grazed in pasture / forest grazed? (getting information on management practices e.g. ketosis seen in stall fed animals, while babesiosis seen in forest grazed animals)
- Is there any other animal affected with similar condition in the same herd / in other farmer's herd in the village (to find out if the disease is rapidly spreading)
- Ask if there has been any introduction of new animal to the herd / village (sick animal may have been bought from affected area and disease has started)
- Is the affected animal vaccinated against food-and-mouth disease (FMD), anthrax, haemorrhagic septicaemia (HS), Black quarter (BQ) (to find out if the animal is protected against common diseases)

2. Past Histories:

Inquiring into the past history may help in arriving at a diagnosis. History of drenching a day or two earlier may cause aspiration pneumonia. History of past disease may be co-related to the present illness. Past history will also give idea if such condition prevailed previously in the area.

Points to note:

- Ask if such condition was reported previously too (reveal endemic nature of disease, or occurrence of a new disease)
- Does this occur at certain period of time? (find out the seasonal occurrence of the disease)
- Was the disease reported form other places in the locality? (area of spread / occurrence can be found out)
- Has any animal recovered from such a sickness? (to aid in prognosis)

- Is the disease restricted to certain age group / sex? (BQ is seen in animals between 1 – 3 years of age in both sex).

3. Nutritional history.

The state of nutrition may have some bearing on the health of animals and enquiries on nutrition may prove helpful in diagnosing a disease. Change in diet may lead to diarrhoea and feeding of excessive carbohydrate rich feed may result into acid indigestion.

4. Environment History:

Environment or surrounding of the animals may help in the diagnosis of disease. e.g.- Animal grazing on pasture irrigated with sewerage water may suffer from nitrate poisoning. Parasitic diseases are more in animals, which are kept in marshy lands. Recent spraying of weedicide or insecticides may poison the animals. Environmental history can be divided into outdoor environment and indoor environment.

Outdoor environment history:

This include the information with regard to the topography of land where animals are reared, vegetation, type of agriculture practised in the locality, use of chemicals in agriculture (pesticide, weedicide) and system garbage disposal in the area. animals that are grazed are likely to be infested by parasites and prone to vector borne diseases like babesiosis, trypanosomiasis, or animals that are grazed in the marshy area including paddy field are likely to be infested by liver fluke etc.

Indoor environment history:

When this is been assessed you should pay attention to the type of animal house, look if there is proper ventilation, in the rural area traditionally animals are housed in the ground floor of the house where there hardly any ventilation and this will predispose the animals to respiratory diseases, if the animals are stall fed check if the animals are provided with enough drinking water, see if the floor is dry and clean, damp and dirty floor may lead to mastitis in milking animals, if the bedding materials are used see if the materials are changed daily or topped daily to keep the animals dry and clean. If the animals are housed separately see if the height of the roof is at a required level, if it is too low, in hot places like Lobesa animals may be subjected to heat stress in summer months, if it is too high animals will be exposed to rain. It is also important to check the health of cowboy because if he infected with zoonotic diseases like tuberculosis animals may get infected as well.