

REPORT ON CHASA MANUAL

After the last CHASA meeting I sent an e-mail to Dr. Leon Bekker requesting some input about health requirements of venison. So far I had no reply from him.

But I then saw from the resolution list that the meeting actually tasked Gary Bauer to communicate with Leon Bekker.

I send an e-mail to Gary requesting him to forward the information from Dr. Leon Bekker to me. I also have not received a reply from Gary.

I feel quite strongly that we should include in the CHASA manual very basic instructions for a game Meat Inspection by the hunter for the meat that he will consume himself.

It must be easy understandable for persons without any training in that field. I know that hunters overseas have to have also some basic training.

So I drafted a very short instruction how to test the buck you have shot. I got the information from the Meat Safety Act 2000 (Act 40 of 2000),

I sent my draft via a veterinarian from Elsenburg To Dr. Hein Nel from IMQAS.

IMQAS has been involved in the practical training of meat inspection on behalf of a number of Technicons. Dr. Nel added something and his comment went further. "The essence of your piece is factually correct, but at IMQAS we tried to summarize meat inspection into a short paper in the past and we eventually completed a 100 page document."

Well a too long chapter in our CHASA manual would not be practical. Mine is very short at this point, but we could add something to it without making it too long.

I want you to have a look at this draft and tell me, if in principle we can put something like that into our CHASA manual.

I am hoping to get a few more pictures especially from lymph nodes and I am also awaiting some input from Dr Leon Bekker. Furthermore one of our members residing now in England promised me to send me the material that the English hunters must learn

At the CHASA meeting it was also mentioned that KZN wanted to add something in the medical section. I spoke to John Harris and he told me, that Siggi is working on it and he will forward to me once completed.

GAME MEAT INSPECTION

BY THE HUNTER

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8 FEBRUARY 2013

INTRODUCTION

If you buy a packet of meat from a supermarket you know that the carcass of that animal was inspected at the abattoir and the meat is safe for consumption. The buck that you have shot does not go through that process and therefore you as a hunter should be able to do a very basic inspection of quarry to ensure that it is safe for consumption.

You are most probably not able to identify what illness the animal has, but you should be able to recognise an abnormality and then you can consult a veterinarian about that abnormality.

What is an abnormality? Most of us hunters are not veterinarians and have never attended an anatomy class. So it is important to first teach our-self what is normal by inspecting any possible animal that is hunted. As the majority of our game is healthy we can learn what is normal by regular and repeated inspection of healthy animals. Once you have a picture of a healthy organ or lymph node you will be able to identify an abnormality.

THE INSPECTION

To start of, if the buck that you have shot is just skin and bones with a scruffy skin, and all the other buck that you have seen at the same time in the field or that your fellow hunter has shot, are nice and fat with a very smooth skin, it is a sure sign that something is wrong with your buck. It is then advisable not to bring it to the kitchen.

1 IN THE FIELD

When you gut your animal in the field you should inspect the stomach and the intestine for visual abnormalities.

ENTERITIS → Inflammation of the intestinal mucosa

The intestines are usually very red, inflamed and swollen gas filled.

Judgement and action

In general if only the intestine is affected and the rest of the carcass is normal, only the intestines are condemned. If, however, the enteritis is coupled with general disease signs such as fever, enlargement of the lymph glands, then the whole carcass is condemned.

PERITONITIS → An inflammatory process of the membrane lining of the abdominal cavity (peritoneum).

In early stages it may just be red. Depending on the cause, floccules of pus or adhesions between the organs and the abdominal wall may be evident or an accumulation of [an excessive amount of fluids (ascites)] may be present.

Judgement and action

Total condemnation of the carcass if signs of septicaemia are evident (fever, petechial haemorrhages { pinpoint bleeding } on various organs, serosal or mucosal surfaces.

FAECAL MATERIAL CONTAMINATION

If the animal has a gut shot or when you gut the animal and contaminate the meat with faecal material remember that it is not possible to wash contaminated areas. They must be trimmed away by means of (dry) cutting..

2 THE SLAUGHTER FACILITY

At the slaughter facility when you eviscerate [remove all the contents of the chest and abdominal cavities] you should inspect the heart, lungs, the liver and the kidneys.

NEPHRITIS → Is infection of the kidneys causing swelling and bulging and red coloration of the organ.

Cause → Disease – Bacteria, fungi, viruses

Judgement and action

Will depend on level of infection and whether the carcass is otherwise affected. (other signs of systemic involvement present, e.g. septicaemia)

HEPATITIS → Inflammation of the liver.

If severe there can be liver dysfunction. On inspection the liver may be swollen, with rounded edges (oedema) with or without discolouration, congestion, necrosis or scar tissue formation.

Judgement and action

Condemnation of the liver with careful scrutinising of the rest of the carcass for signs of associated illnesses. (systemic involvement e.g. septicaemia)

OEDEMA → An excessive accumulation of fluids in the intercellular spaces and body cavities

Judgement and action

Depending on the cause—partial or total condemnation.

PARASITIC INFESTATION

You have also to check the head, heart, lungs, liver, kidneys and carcass musculature for signs of parasitic infestation.

The parasites may be alive or calcified. They may be in the form of typical “worm” infestations, e.g. tape worm in the intestine or present themselves in the “bladder worm” from e.g. hydatid disease or the cystic form, e.g. “measles”.

Next inspect the whole carcass and look for inflammation, an abscess and a tumour.

ABSCCESS → A localised, encapsulated collection of pus in a cavity formed by disintegrating tissue.

In size abscesses may vary from microscopic to almost unlimited dimensions. Pus is a collection of dead disintegrating tissue cells and the body’s own inflammatory cells (white blood cells). The general appearance of pus can be described as viscous, cream coloured fluid. Inspissated [clotted] pus has a dry cottage cheese like appearance.

Judgement and action

A single abscess may be removed if no further spread of infection or contamination with pus to the rest of the carcass can be determined.

In case of multiple abscessation in various organs (metastatic) – total carcass condemnation.

TUMOUR → The term is derived from a Latin word meaning “new growth” or “new formation”.

A neoplasm is an abnormal mass of tissue, the growth of which exceeds and is uncoordinated with that of normal tissues.

Judgement and action

Trim or condemn affected part due to aesthetic reasons. If wide spread (metastatic), total condemnation.

LYMPH NODES

The next important parts to inspect are the lymph nodes.

Where do you find the lymph nodes? The picture below will help you to find them.

What will you be looking for?

- 1 Oversize
- 2 Colour
- 3 Abscesses or necrotic (dead tissue)
- 4 By feeling (palpation)
- 5 Cut through them and have a visual inspection.

LYMPH NODES

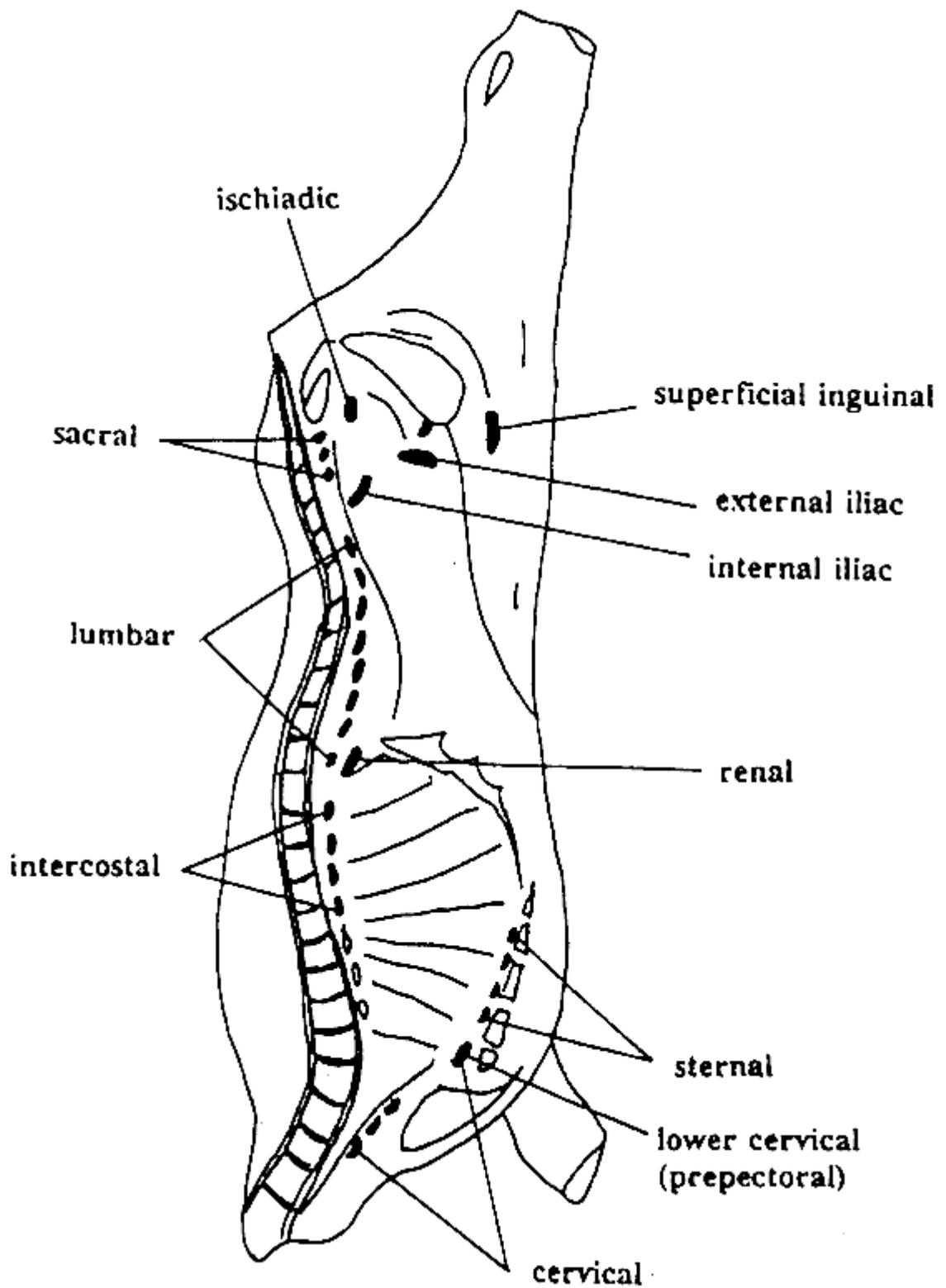
Pay special attention to the following lymph nodes.

External and internal iliac

Superficial inguinal

Cervical

Lymph nodes are excellent indicators of where the primary pathology exists as specific lymph drainage areas can be ascribed to specific lymph nodes, e.g. a swollen reddened left internal iliac lymph node may indicate a possibly unseen pathological condition in the left hind leg, e.g. knee joint arthritis. The affected pathology (arthritis hind leg) is then removed together with the affected lymph node. If multiple lymph nodes are affected (in more than one lymphatic drainage area), it is called “generalized lymphadenitis” and is typical of a systemic spread (metastatic) of an infectious agent and as such should always be totally condemned for human consumption.



MICRO ORGANISMS

Micro organisms play a very important part in breakdown of plant material into carbon and energy in animal stomachs.

The moment an animal dies decomposition of the meat starts. Micro organisms accelerate this process, but without them this is a very slow process. The higher the temperature the faster the micro organisms multiply. At near freezing point the multiplication is near negligible. That is why we keep meat in cold-rooms or fridges.

To prevent rotting or decomposition of meat we must limit the amount micro organisms and that is done by gutting the animals as soon as possible after it died. Gutting the animal also reduces the body mass and allows it to cool of quicker.

Furthermore we should keep the carcass as cool as possible under the circumstances.

Initially a dead buck's muscles are tense and tuff , that is why we allow meat to mature for 7 to 14 days at 4° C . Under 4° C the effect of micro organisms is unnoticeable