



Farm Vet News

Endell Farm Vets Newsletter

Issue 5
January 2019

Happy New Year

Here at Endell Farm Vets we know that as January comes around our farmers' minds start turning to the spring and the arrival of new life. We hope you have all taken a well-earned rest over the festive period and that it has left you refreshed and ready for whatever 2019 throws at us all.

The vet team are currently busy with some of the early lambers (some of our clients were lambing before Christmas!) as well as with ensuring our autumn block dairy herds are getting their cows back in calf. We are also carrying out bull breeding soundness exams on bulls ready for use on autumn calving dairy and beef herds. Many areas of our region will be transferring to 6 monthly TB testing in 2019 so the workload for our TB testers will be increasing accordingly so we have recruited more TB testers – we know you'll greet all new faces with a friendly smile!

Finally some dates for your diary: Our Mastering Medicines course has been rescheduled to the following times:

- Newton Wood Barns
Wednesday 23rd Jan
9:30-13:00
- Endell Equine Hospital
Thursday 24th Jan
9:30 – 13:00

Watch this space if you have shown interest in the BVD Free scheme for dates of the first cluster meetings.



in this issue...

Page 1 Antibiotic Use

Page 2 The Downer Cow

Page 3 Lameness in Sheep

Page 4 Winter Worms

Responsible Use of Antibiotics

On the 1st June last year Red Tractor (the UK's biggest Farm Assurance programme) brought in a number of new guidelines. The most impactful of these are:

- Highest Priority Critically Important Antibiotics (HP-CIAs) must only be used as a last resort – these include brands such as Ceffect and Marbox.
- Not only Red Tractor dairy members but also beef and lamb members must have a veterinary written livestock health and performance review

When Red Tractor reviewed their standards in 2017 they made changes that demonstrate the agricultural industry's commitment to responsible use of antibiotics. The UK already does well in this area – it is estimated that only 20% of all antibiotics used in the UK go into livestock (compared with 70% in the USA!) Choosing to treat viral diseases with antibiotics or not finishing a prescribed course are both examples of irresponsible use and are relevant for humans and animals alike. Prophylactic use is no longer acceptable and we hope this will reduce the risk of the livestock sector being a risk factor for human medicine.

Responsible use doesn't mean removing all use but just choosing the 'right drug for the right bug', avoiding inappropriate use, monitoring sensitivity and recording and justifying any deviations from usual protocols.

Before Farm Assurance visits farmers must:

- Collate a record of the total antibiotics used in the past year.
- Have their vet review the antibiotics used including recommendations for areas of improvement – particularly regarding HP-CIAs.
- Only use HP-CIAs after diagnostics testing with culture and sensitivity results.

It is also recommended that at least one member of staff involved in administering medicines has undertaken a training course and holds a certificate of competence. This is an area we can help with as we are running our first two such courses in January – for more information see the side bar). These will cover why responsible use is so important as well as going through some practical examples.

If you have a Farm Assurance visit approaching please contact the team to see how they can best help you prepare.

Top Tips for Care

Veterinary treatment can be essential for targeting the initial cause but it is the after care and TLC that is most important for the cow's recovery. This is something we leave in your capable hands.

The most important aspects of down cow care are:

- Protection from weather extremities – not left in a field!
- Lots of soft cleaning bedding
- Fresh food and water (that can't be eaten by other cows!)
- Lifting with hip lifters or a harness – ideally twice a day
- Rolling from side to side at least twice a day or more frequently if not also lifting.

If cows are refusing to drink then water (possibly with rehydration sachets) should be stomach tubed into her though this is not a long term solution. Lifting with hip lifters may cause damage to the hips so it is important that cows are not left 'hanging' from these. Rolling and lifting are of the utmost importance as movement will ensure limbs remain functional.

If a cow does not get up in 24 hours the vet should revisit to assess further.



Down Cow Management

The downer cow is one of the more challenging calls we attend because there are so many diseases that can cause a cow to be unable to stand.

To aid diagnosis and determine the best course of treatment the vet is likely to ask you for a little more information about the cow –beyond whether she is dairy or beef and the fact that she is down! Further questions may include:

- Has she calved recently or is about to calve?
- How and when she went down – for example was she jumped on by a bulling cow?
- Is she eating or drinking?
- Has she made any attempt to stand?

The vet will then carry out a clinical examination which will assess:

- The environment the cow is in
- How alert and bright she is
- How dehydrated she is – sunken eyes and skin tent
- Her temperature
- Her rumen movements
- Heart and respiratory function
- Udder feel and milk consistency
- Limb function
- Other signs of trauma

This exam will ideally include lifting the cow to assess if she can try to stand so any lifting equipment you have should be nearby.

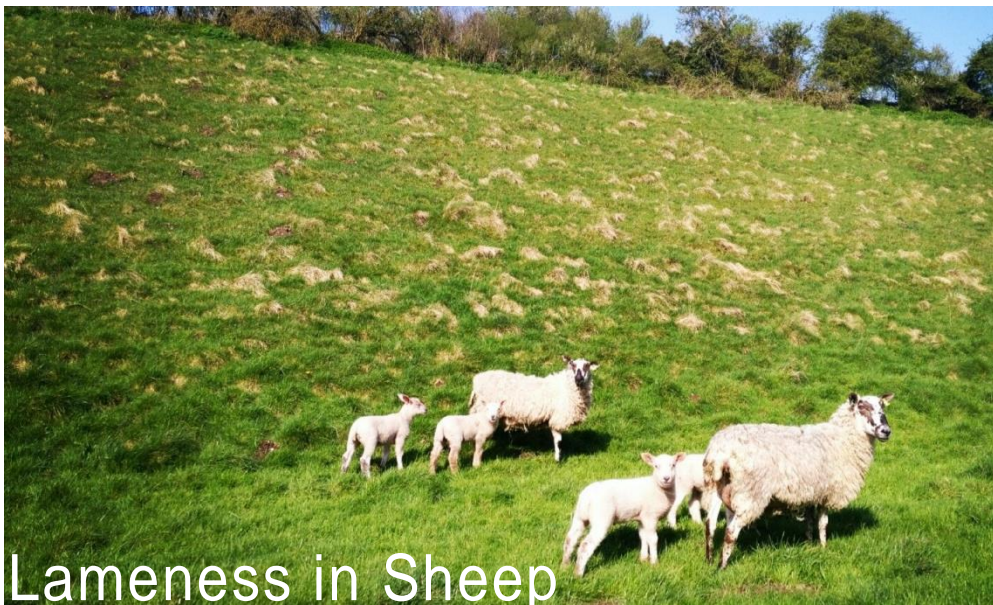
There are many causes of down cows but some of the likely options are outlined below:

- Metabolic – hypocalcaemia (milk fever), hypophosphatemia, hypomagnesaemia (grass staggers), ketosis or fatty liver, acidosis.
- Toxic – mastitis, metritis, peritonitis
- Musculo-skeletal – nerve damage (calving/bulling), fracture, dislocation, ruptured ligaments, foot lameness, spinal injury
- Nervous system – listeria or other infectious meningitis
- Unusual – ruptured uterus, exhaustion (after calving), malnutrition, haemorrhage.

Along with the clinical examination the vet may take some blood samples to aid in diagnosis or determine the prognosis. Treatment is only possible if a (possibly tentative) diagnosis has been made and the list above is certainly not exhaustive!

Treatment options include:

- Calcium, Phosphorus or Magnesium
- Anti-inflammatories
- Antibiotics if an infectious cause is found
- Oral or intravenous fluid therapy
- Vitamins
- Glucose



Lameness in Sheep

Sheep lameness can cause severe problems in many flocks and the change in weather towards milder winters and wetter summers means the prevalence of lameness has increased. Advice given by vets has now moved away from the traditional approach as new evidence emerges into lameness control. We hope this article can clarify the approach to treatment and prevention. Sheep lameness is not only a welfare problem but can also have a severe economic impact which is estimated at around £5/lamb or £7/ewe. Please don't hesitate to get in touch if you have any concerns about the degree or type of lameness affecting your flock.

Common Foot Lesions

Scald is the milder of the two diseases caused by *D. nodosus* as it only affects the interdigital space - causing redness, swelling and white exudate. Sheep can self-cure if they are on dry ground; if not oxytetracycline spray can assist healing.



Footrot occurs if scald progresses and the horn becomes under-run at the base of the interdigital cleft but if left to develop it can spread up the wall and around the hoof. It is extremely painful causing severe lameness, foot swelling, and weight loss and has a foul-smelling odour. Treatment involves antibiotic spray and a long acting injection of oxytetracycline. The affected hoof should not be trimmed as Footrot is highly contagious. It is also important to isolate affected sheep to contain spread of disease.



Contagious Ovine Digital Dermatitis (CODD) can be difficult to differentiate from footrot. Typically it affects the coronary band and the skin just above it but not the interdigital space. CODD is most commonly brought onto farm by new sheep so quarantine is important. Treatment is similar to that used for footrot.



Excessive trimming should be avoided as it can cause **toe granulomas** where a lump of tissue resembling a strawberry appears at the toe of the hoof. Anti-inflammatories can help with the pain but often there is no cure for toe granulomas.



Shelly hoof appears to occur if there is a nutritional imbalance and affects certain breeds of sheep. The sole horn separates from the wall horn causing an air pocket which will cause lameness if it fills up with soil or stones. Trimming can be combined with clearing out any debris. If your flock seems particularly prone to shelly hoof it would be prudent to assess their nutritional status.



Control and Prevention

Here are our handy tips to help reduce the level of lameness in your flock:

- **Examine** sheep as soon as you notice they are lame.
- **Identify** the disease - if in doubt call us!
- Treat all footrot and CODD cases with tetracycline **spray** and tetracycline injection.
- **Mark** the affected leg
- **Separate** the affected sheep from the main flock and ideally re-examine in seven days.
- **Avoid trimming** if possible – trimming can actually spread disease.
- **Cull** sheep with more than two marked legs as they will be an infection risk to the rest of the flock.
- Consider footrot **vaccination** (combined with other control measures) if this disease is a particular problem:
 - Initial vaccination is twice 4-6 weeks apart followed by a booster before risk periods. Timing of the booster varies between flocks.
 - If you show your sheep discuss alternatives to vaccination with us as it can cause lumps!
- **Footbath** sheep every time they are gathered
 - This is particularly useful for cases of scald in lambs or as an additional measure to attempt to prevent spread of footrot after removing lame sheep.
 - Footbathing is only effective for 36 hours so you must ensure sheep are turned out onto uncontaminated pasture. *D. nodosus* can survive for up to 10 days on the ground/handling facilities so the protection from the footbathing will run out long before the bacteria die!
- **Quarantine** all replacements for three weeks. During this time ensure you:
 - Inspect all feet and treat all cases
 - Footbath before mixing with your own flock
 - Quarantining is also useful to identify and prevent any other diseases such as mites and worms!



Fundraising

We have been incredibly proud of our clients and staff for their hard work on various fundraising efforts we have carried out this year and are pleased to report we have raised an impressive £500 for our chosen charities!

In September our MacMillan Coffee Morning raised £203.57 and we all got to enjoy delicious cakes while raising money for a good cause.

Our November team raised an impressive £263 for the November Foundation which aims to stop men dying too young by targeting prostate cancer, testicular cancer and mental health and suicide prevention.

We also took part in Save the Children's Christmas Jumper Day which allowed us all to feel suitably festive.

If you have any charities you think we should support next year then please let us know.



Winter Worms



Ostertagia ostertagia is a roundworm that lives in the abomasum of cattle and is the most commonly identified worm in cattle.

Ostertagia can affect growing cattle at two stages:

- Type I: calves turned out in the summer on grazing used last year. It can occur in calves as young as 6 months old if they are turned out to pasture in the summer.
- Type II: housed calves that have eaten larvae later in the grazing season, these can then overwinter in the abomasal glands and emerge in late winter/early spring. It tends not to affect the whole group but more specifically individual cattle that are 18-24 months old.

Prevalence of *Ostertagia* in the UK is high compared with other European countries. This is likely linked to the fact that we have a higher proportion of grazing herds

The main signs to look out for in the winter form of Ostertagiosis are

- Rapid loss of weight
- Rough hair coat
- Dehydration
- Swelling under the jaw.

If disease occurs in the winter the most likely alternative cause is liver fluke and your vet will often check for evidence of both diseases.

Your vet will carry out testing to ensure they are treating for the right disease. Common tests are:

- Faecal egg counts
- Blood tests for certain markers
- Post mortem and total worm count

All classes of wormer can be used to treat *Ostertagia* in cattle. Resistance is not being reported to the same extent as in sheep but there is some resistance to Macrocytic lactones (clear wormers). If younger animals are affected the whole group should be treated but if disease is seen in adults then only those affected should be dosed.

If clinical signs occur in the winter it can be much harder to cure treated cattle so prevention is the preferred option. Carrying out a worm egg count 3 weeks after housing can help decide whether cattle should be wormed in a preventative manner. This decision process can also be based on knowledge of the grazing conditions before housing and grazing history of those fields in previous years.

With the cost of a worm infestation in a group of growing cattle thought to be around £50/animal there is an important economic benefit of being aware of how to control disease

