

Despite the very mild winter we have luckily seen few cases of pneumonia. Lets hope for a dry and speedy turnout to avoid any late season cases. Our new vet, Amy, is settling in nicely. With her experiences from New Zealand she is contributing some welcome fresh ideas to our team. Unfortunately due to a TB breakdown in the Arundel area we have been swamped by new TB tests in addition to the scheduled pre-turnout tests. We will do our utmost to accommodate these tests without compromising our usual service. The pressure of responsible antimicrobial use is also not disappearing. Mastitis treatment together with dry-cow therapy is by far the biggest cause of antibiotic use within our practice. The Danes have demonstrated that a massive reduction in mastitis levels can be achieved if this is forced by legislation. The introduction of the practice that administration of all antibiotics (including mastitis tubes) has to be

carried out by a vet resulted in a more serious uptake of mastitis control plans. This massive reduction in clinical mastitis was achieved by adopting recommendations similar to that made by the DairyCo Mastitis Plan that we have offered our clients in recent years. In the UK, the government's approach has so far avoided implementing extra legislation on small and medium sized business, instead relying on self-regulation to reduce use of antimicrobials in animals. It is expected that a particular focus is on those drugs that are classed as critical for humans. I believe if we fail to succeed we will be forced by legislation from Brussels within the next 3 years. There are already proposals on regulation of veterinary medicines and medicated feed, made in September, working their way through the EU legislative process.

Maarten

Bull testing - the Kiwi experience (Amy)

Based on the Canterbury plains in the South Island of New Zealand, the majority of my bull testing experience involved selecting relatively large numbers of bulls (30-60) to cover dairy cows for the last 3-4 weeks of mating.

The average dairy herd was around 800 cows, and most would AI for the first 6 weeks followed by 3-4 weeks bull mating. With 6 week in-calf rates of between 65-80% that would often leave around 250 cows still to get in calf in an 800 cow herd. In addition to this they would also need bulls to use over their heifers.

We recommended 1 bull per 30 cows with an allowance to rotate the bulls every 3-4 days to prevent fatigue and lameness, so you can see how many dairy farmers would need between 30-60 bulls depending on their farm size. Additionally bulls would only be kept for one or two years and then be culled. As bulls get older they are more likely to become aggressive, by using only young bulls this problem was avoided. So as you can see there is a fairly large market for young breeding bulls.

As a 'bull soundness tester' I would be asked, for example, to go to a bull breeder and select 30 good bulls from his stock for my client to buy. These bulls would normally be 1-2 years old and Jersey, Friesian or Hereford for the majority of the time. To get through these numbers we would usually go out with 2-3 veterinary staff and manage to fully examine around 6 bulls/hour with a good set up. If I needed 30 bulls I would make sure there were at least 60 available to me and because there would be a large number of bulls to choose from I would only select the best, this meant that anything that looked in poor condition (BCS<2.5) or had any obvious external abnormality or small testicles then I wouldn't waste time carrying out a full semen exam. Just on this initial exam I would probably remove around 20 and then another 5-10 on the semen exam. Usually on the more detailed physical and semen exam alone around 20-25% would not 'pass'. These results backed up what studies had already shown to be true and just reinforced to me the importance of bull testing.

For many of you it is the time of year where you now need to think about getting your bulls tested. I am looking forward to helping Maarten out with the testing over the next couple of months and getting to meet you all on farm.



Dairy heifer integration (Sally)

There are many benefits to be gained by reducing the stress and limiting the sudden changes on heifers around calving. The main benefit will be prolonging their lives within the herd. For a few days around calving, all cows' immune systems are much reduced, but in heifers, the effects are greatest due to so many changes occurring in her life at this stage. The speed with which their bodies are capable of responding to new infections, by production of antibodies, is much reduced, which makes heifers more susceptible to developing mastitis, metritis, etc.

- Wherever possible, bring heifers onto concrete before calving to give their feet time to adapt to a hard surface.
- If possible, maintain heifers as a separate group pre and post calving for a few weeks or if possible for their whole 1st lactation. This will increase their feed intakes, improve milk yields and improve future fertility. Heifers in a separate group will spend 25% more time at the feed trough and consume significantly more dry matter when compared to heifers mixed with older cows.

If no separate group is possible then mix the heifers with the far off dry cow group as well as the transition dry group so they can adjust to the new social situation precalving. This will reduce the incidence of bullying later, when the heifers' immunity is low and they are less able to cope.

NOTICE BOARD

THE LIVES
STOCK
PARTNERSHIP
SUCCESS THROUGH HEALTH

the

liVeStock partnership Ltd

Market Square, Petworth
West Sussex, GU28 0AH

Tel: 0845 3138434

info@livestockvets.co.uk



As we have been asked by many of you why we didn't make a 2015 calendar we have decided to make another one for 2016.

Since we had such a great response from you that resulted in a fabulous calendar we like to ask you again to submit your animal or farm themed pictures to: sarah@livestockvets.co.uk

Go out there and get snapping! Be brave like me who shot this picture of the vicious Little Ears who chased me out the field soon after this shot was taken... MB

Sole Ulcers, Treatment Principles (Ben)

When you are faced with a sole ulcer then you need to adhere to the following principles:

1. Relieve pressure from the diseased area – The sole ulcer is, essentially, a pressure sore so you will need to carefully trim horn from around the site, taking care to reduce any 'pinching' of the ulcer by delicate removal of the horn around the base of the ulcer. Then, the best bet is to take pressure of the claw by using a block on the other foot. In some cases, blocks will need to be removed as it wears and then a new one reapplied as it may take several months for an ulcer to heal – Some experts reckon cows never really properly 'heal' from a sole ulcer, but I think if caught early enough, then you can get a very good resolution of problems.
2. Remove loose horn – the area of horn around a sole ulcer can very easily become separated from the underlying quick and this can allow dirt etc. to penetrate and set up an infection. As with all diseases of digit, loose horn must be removed so that pressure cannot build up and cause further separation.
3. Do not damage the sensitive tissue of the sole – When I was first taught to trim ulcers I was shown to remove the little red button that can form either by removing with a knife or sometimes we would freeze them. Advice now is to leave it well alone. This 'button' is a swelling of the sensitive corium, or quick. If pressure is removed this will reduce in size and may be able to heal. If it is removed then we could have permanent damage to the sole.
4. Control infection – If a sole ulcer becomes infected, it can be very dangerous. It is very easy for infection to spread to important structures in the foot such as tendons and joints. If the foot is swollen around the heel and there is penetration of the sole then it is a good idea to keep the cow on a treatment of antibiotics until the swelling has reduced.
5. Pain relief – Administration of pain relieving medication has been shown to improve resolution of lameness in a recent large-scale study.

More on prevention next time.....

Mastitis treatment (Maarten)

Regularly we are being asked if we know of a stronger and more effective mastitis treatment than currently used. Analysis of research papers shows that there is very little evidence to suggest that injectable antibiotic therapy has a significant beneficial effect over, or in addition to, intramammary therapy. Injectable antibiotics do not only treat the udder but have the undesirable effect of treating the digestive tract, therefore exposing other bacteria (E.coli, Campylobacter) unnecessarily to antibiotics, with potential detrimental consequences for human and animal health. For this reason it might be hard to defend the use of injectable antibiotics to treat mastitis. The only area where there might be a place for it is toxic E.coli mastitis. Having said that, often the bacteria have vanished by the time this type of mastitis is detected and it is the toxins released by the bacteria that cause the clinical symptoms. However critically classed antimicrobials like 4th generation cephalosporins or fluoroquinolones (Cobactan or A180) are hard to justify as a first-line treatment if older antibiotics like trim-sulpho (Norodine) are showing to be just as effective. We use a computer programme that can analyse the cure rates for those herds that record clinical cases through the milk recorder or Interherd. This can be a useful tool to assess a mastitis issue. Cure rates are linked with the speed of mastitis detection in the parlour. Changes in the milk will nearly always be noticeable before changes in the udder, allowing the start of treatment at the earliest opportunity. Identifying mastitis solely on the basis of changes to the udder and reduction in yield are arguably responsible for a significant number of mastitis cases repeating. Those clients with a robotic milking system have a distinct advantage here.

In addition to the traditional mastitis treatment and as a long-term option, the effect of breeding should not be underestimated, as a decrease in the percentage of cows affected by clinical mastitis by up to 10-20% per generation can be achieved by selecting the right bulls.

The veterinary profession is being told that if we don't alter our prescribing habits, like the use of critically classed antibiotics as first-line treatment, we will be forced to do so by legislation. Our dairy clients with a supermarket contract and our organic clients have coped fine with this. The approach of continuing using these groups of antibiotics because they are available might be unjustifiable in times of MRSA and worried consumers and milk buyers. I am unaware of any client that has moved away from these critically classed antibiotics who has regretted it.



Deteriorating cure rates over recent months