

Well another month flies by and you all seem to be stuck into harvest.

Over the last few years, all of us vets have been keeping a tally of the cow caesareans that we have performed, how long the animal was attempted to be calved prior to the operation, basic information about how the operation went i.e. Amount of contamination from dead calf/cow falling in the straw!, drugs administered and techniques used. After some analysis of these 52 caesareans only 2 weren't alive 2 weeks post operation. Unsurprisingly, complications i.e. incision infection, metritis, peritonitis occurred at a higher rate in animals that were calves for 30mins + prior to the

operation, if the calf was dead or contamination to the uterus occurred. This study didn't look at what percentage of these animals have gone on to recalve, but it should reassure us that it is worthwhile doing a caesarean in the majority of cases. Obviously, no calving intervention is still preferable so keep up with those easy calving bulls and monitor those body condition scores!

Take a read of Sally's article overleaf as August is a time where worm burdens can be taking a toll, so monitor your animals closely. Have a good month. *Claire*

Treatment of chronically lame cows with horn lesions (Maarten)

A study done by the University of Nottingham looking at the recovery rate of chronically lame dairy cows following the treatment of claw horn lesions. Selected animals received: 1) Trim only, 2) Trim and shoe or 3) Trim, shoe and non-steroidal anti-inflammatory drug (NSAID). At 42 days after the treatment no significant difference of cure rate across the groups was seen. Many developed lameness on the opposite leg. A possible reason for this is that many claw horn lesions (ulcer, white lesion) happen at cow level and therefore affect both limbs. Also increased loading on the opposite limb will exacerbate lesions on the other foot. Comparing these results with those of an earlier study where the best recovery of newly lame cows was found to be trim, block and NSAID it highlights the importance of identifying lame cows early. Also in acute cases of lameness, both hindlimbs should be examined to reduce the likelihood of lameness occurring in the other foot.

Calf Hutches (Maarten)



On my recent visit to Holland I came across an inventive way of building calf hutches. I didn't measure the size of them but the recommended width of the individual pen for a calf from birth to eight weeks of age in the UK must be at least equal to the height of the calf at the withers. In practice, this means pens at least 1.5 x 0.9m, but preferably 1.8 x 1.0m.

New Product for Transition Cows—Elanco Imrestor (Amy)

Around calving, cows undergo immune suppression, this makes them suffer from increased mastitis and metritis at this time, as well as other diseases. These diseases are costly and time consuming often resulting in milk loss, reduced fertility, cow death and premature culls. A new product became available on 1st July which restores the immune function in these cows. It is the first product of its kind to become available in cattle however similar products are used in human chemotherapy patients and also in horses. It has been available in New Zealand and Brazil for a couple of years now with no adverse effects seen and has had some pretty positive reports from farmers.

So what is it? It is neither an antibiotic nor a vaccine but a different kind of product that stimulates the immune system. It therefore has no milk or meat withhold. It is a subcutaneous injection (pegbovigrastrim) that is given twice to cows or heifers, 7 days before the expected calving date and then again within 24 hours of calving. Its main claim is that it reduces mastitis by 26% (even when dry cow therapy is used) in the 30 days after calving.

It should reduce antibiotic usage and increase cow welfare and production at this time so is obviously something we are keen to support. If you want to find out more please do contact your regular vet or myself for more information.



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Thanks to Raj....

... For his help locuming over the last 6 months. We wish him luck going back to New Zealand for the intensive calving period!

This month we shall be welcoming a new member of the team. Watch this space for formal introductions....

Cattle Parasites & their control (Sally)

Parasites are one of the most common causes of poor live weight gain in youngstock (with good health and nutrition) and a comprehensive worm control plan must be an essential in every farms' herd health plan. This plan will be different for every farm as control will vary with what grazing is available, calving pattern, handling/weighing facilities etc and so should be formulated with advice from your vet.

There are 3 main avenues of anthelmintic control: Therapeutic: Treat individual sick animals, Tactical: treat individuals or groups to limit the impact of infection/disease, Strategic: treat groups or individuals to prevent high levels of infection/disease. Grazing management is also an important branch of parasite control to limit exposure of cattle to infection and mitigate impact – however this cannot be used as control in lung worm infections where vaccination or anthelmintic control are the only options.

The aims of good parasite control are to reduce any negative impact on live weight gain in youngstock but also to confer good immunity to adults which will last them through their adult life (for breeding animals). However there is no immunity to liver fluke in adult cattle so treatment and control on infected farms must cover all ages.

Some anthelmintic plans will cover the first grazing season only as the animals will have gained enough immunity to carry them through the second grazing season (with monitoring). However those that have had limited first season grazing such as spring born suckler calves or late born dairy calves will need a second season worming plan as they will not have had enough exposure in their first grazing season,

Housing worming treatment for youngstock has to be the most important anthelmintic dose of the year as it will ensure all cattle are worm free over the winter housed period and therefore start the next year grazing free of worms and help keep pasture levels low in early spring. This will also remove any encysted worm larvae as long as an appropriate anthelmintic is used – advice is use an ML product (*macrocyclic lactones* (ivermectins and milbemycins). Also fluke treatment at winter housing for infected farms is vital followed by a treatment at 8-12 weeks post turnout.

This is whistle stop account of cattle parasite control, for more information please contact me or one of the vets in the practice

Gut worms in a nutshell

Two main species of gutworms

Ostertagia ostertagi
(Abomasum)

Cooperia oncophora (Small intestine)

Clinical: most common in young weaned calves

Ill thrift and scour

Subclinical: cattle of any age

Reduced food intake and poor performance

Lungworm in a nutshell

One species of lungworm

Dictyoacaulus viviparus

Clinical: most common in young weaned calves

Respiratory distress, coughing, mortality

In dairy cows, sudden drop in milk yield,

depression

Subclinical: cattle of any age

Poor performance

Carriers important in epidemiology

Fluke in a nutshell

Two main species of fluke

Fasciola hepatica (Liver fluke)

Calicophoron daubneyi (Rumen fluke)

Clinical liver fluke: any age of cattle

Ill thrift, bottle jaw and scour

Subclinical liver fluke: cattle of any age. Reduced food utilisation, poor performance and immunosuppression



Images from google...

