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Welcome to your Farm Newsletter for September/October of 2023!

In this issue we investigate Parasite and Disease Control during the lambing period and the best way you can keep your flock healthy with a combination of vaccine control, good hygiene, having the right equipment and organised record keeping.

We also delve into Selective Dry Cow Therapy and why it is an effective and preferable route to take to ensure you keep antibiotic usage to a minimum and protect your herd for the future.

Please let us know what you think of these topics and any others you would like us to cover in upcoming newsletters.

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See you next time,

The team at Ardene House Vets

## In this issue:



### Selective Dry Cow Therapy

Milking and calving can be a stressful period so allowing your herd to keep their energy up is essential for good health management. Whilst Antibiotic Dry Cow Therapy was once preferable, by being more selective you can cut down antibiotic usage and still look after your herd.



### Parasite and disease control during the lambing period

During the lambing period the last thing you need is problem parasites or diseases running rampant in your flock, which is why it's advisable to put a programme in place that includes everything from vaccination to record keeping.

## Selective Dry Cow Therapy Vs Antibiotic Dry Cow Therapy

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Milking and calving can be a stressful period so allowing your herd to keep their energy up is essential for good health management. Happy, healthy cows = productive cows.

The drying off period, at the end of the lactation cycle, is a dairy cow's chance to recoup the energy needed for the rest of the year. It gives her a couple of months where she is not producing milk or being milked.

However, the dry period comes with its own challenges in terms of managing possible udder infections. New infections can occur during this period and not become evident until the next lactation therefore management in this period should not be neglected.

### Antibiotic Dry Cow Therapy

Since 1950, ADCT (antibiotic dry cow therapy) has been a popular way of ensuring the herd doesn't suffer with infection when they are not lactating. Antibiotics and teat sealants are used to fight any existing infections and prevent more being introduced.

At the beginning of the dry period, when the cow's body realises milk production is no longer required, a plug is naturally formed in each teat to prevent infection getting in. Not all cows are able to naturally form this plug and so a teat sealant is used.

With ADCT, antibiotic tubes which contain a high concentration of antibiotic in a slow-release base, are inserted into the quarters. ADCT is about fighting existing infections and preventing new infections in the dry period.

However, the blanket use of antibiotics, regardless of whether the cow has an infection or not, is discouraged by the government, vets and milk buyers.

Worldwide concern about antibiotic resistance within animals and the possible transfer from animals to humans means that best practice, when it comes to antibiotics and your herd, is 'use them as little as possible and as much as necessary'.

Some studies have also shown that using antibiotics on quarters that have no infection increases the risk of E.coli mastitis during the next lactation cycle.

Milk buyers are now insisting supplier farms adopt selective dry cow therapy in their herds and are monitoring closely.

### Implementing SDCT

The key word here is 'selective'. All cows being 'dried off' receive teat sealants but, only those cows above an agreed somatic cell count are 'selected' to receive the antibiotic tubes, cutting down on the use of antibiotics in those cows that don't need them.

And don't worry about the cows that don't get antibiotics. The use of a teat sealant alone in uninfected cows has been shown to be as good as, if not better than, antibiotic dry cow therapy at preventing new infections.

SDCT takes careful planning and preparation. The three essential requirements are:

- Accurate records of herd bulk cell counts and previous mastitis cases
- Vet involvement
- Operator training

This is outweighed by the benefits of SDCT to your herd, your farm and your bottom line, as well as ensuring your farm is leading the way in the reduction of antibiotic use.

A good place to start is by having a chat with your vet about what is involved. They will be able to help you decide whether it's feasible for your herd to begin SDCT at their next dry off by looking at herd cell counts and clinical mastitis cases. They'll also be able to help you create a protocol for SDCT as operator training and strict hygiene protocols are of the highest importance for success.

There is no doubt that there is a move away from antibiotic dry cow therapy as selective dry cow therapy becomes the norm. All the major milk buyers are very engaged in this and see the benefit in enrolling their farms in SDCT.

Get in touch with your vet a call to find out more about Selective Dry Cow Therapy in your herd.



# Parasite and Disease control during the lambing period



The best way to avoid the spread of parasites or diseases in your flock is to have a structured flock health programme in place.

Ideally, one should monitor and control internal parasites (worms and fluke), as infestations will negatively impact body condition and potentially result in smaller lamb sizes and poor colostrum supply.

In terms of disease control, all sheep that lamb should be on a vaccination programme for clostridial diseases. If not, it may result in increased mortality rates.

It is also advisable to add a pasteurilla (pneumonia) vaccine and depending on the history and husbandry system, a vaccination against Enzootic Abortion and/ or Toxoplasmosis. If unsure, always seek veterinary advice on necessity and timing.

In addition, it is essential that there is a procedure in place for sheep that abort their lambs, such as the example shown below:

1. Isolate and permanently mark ewes that abort
2. Impose strict biosecurity and disinfection when dealing with aborted ewes and their foetuses
3. Collect samples from the foetus and afterbirth and submit for testing via your vet
4. Dispose of any contaminated materials carefully
5. Prevent any avoidable contact with other ewes
6. Identify the cause from lab testing and seek advice on treatment, control and prevention
7. Vaccinate the flock if a vaccine is available
8. Establish or review your flock health plan with your vet



## Hygiene

Poor hygiene at lambing can put both ewes and lambs at risk, so this should be a priority when planning your flock health programme. It will also increase the risk of the ewe getting metritis or mastitis.

Key points to consider include:

- Lambing pens and sheds (if indoors) need to be disinfected prior to lambing and not overcrowded or overused
- Fresh bedding and clean water need to be available
- When indoors, an adult ewe should be allowed 1.2 - 1.4 square metres during pregnancy and 2.0 - 2.2 square metres with lambs
- One individual pen should be available for every 8-10 ewes and disinfected before re-bedding between ewes
- If outside, sufficient individual pens should be available for any complicated lambings

Risk areas for lambs to pick up infections that can lead to illness (including joint ill, navel ill and watery mouth) are the lambing pens, early ear tagging, docking tails and castrating.

Ensuring the lambs receive good quality colostrum in the first few hours of birth is vital to help protect them from environmental contamination. Lambs need to receive 50ml/kg of good quality colostrum within the first 4-6 hours of life and continue the intake over the first 24 hours, giving 200ml/kg over the first day.

If lambs do not get sufficient colostrum, they will be likely become low in energy once the reserves they are born with are used up. At this point they will become hypothermic (temperature below 39C – severe if below 37C) and will need to have appropriate treatment to restore their energy levels and warm them up.

Adopter pens should be provided at a rate of approximately 1 per 50 ewes.

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If lambs are outside in an area with a known risk of tick infestation, then an appropriate pour on will help protect against tick borne disease.

Special attention should be given to older ewes, first crop ewes, ewes expecting multiple lambs and ewes with below target body condition scores.

Correct staffing levels for lambing are very important to maintain the best possible hygienic conditions. There should be at least 1 experienced lamber for every 250 ewes if indoor lambing and 1 for every 600 - 1000 ewes for outdoor lambing. Lambing staff should have had some training and experience in how to correct common lamb malpresentations at birth and be proficient in the use of lambing ropes and a head snare.

## Medical Issues

Commonly seen issues in ewes during late pregnancy are:

- **Prolapse of the cervix/vagina** - early treatment gives the best chance of success. Affected ewes should be marked for culling
- **Pregnancy Toxaemia (twin lamb disease)** - a dull ewe off her food, lying down – needs energy treatment as soon as possible
- **Hypocalcaemia** - ewe wobbly on her feet, lies down, becomes comatose – give an appropriate calcium injection under skin – she should look brighter within an hour
- **Mastitis and Metritis** - after lambing look out for Mastitis (hot, swollen, painful udder) and Metritis (discharge from swollen vulva)
- **Listeriosis (brain infection)** - at any time especially when fed on silage

## Assistance at lambing

Most ewes lamb without difficulty and just need to be quietly observed to detect problems. A prolonged labour can be associated with a large lamb, incorrect positioning of the lamb or lack of nutrition during pregnancy.

Assistance should be given if labour has lasted for more than 1 hour in older ewes or over 2 hours in ewe lambs. The time between lambs arriving is usually about 20 minutes.

Once born, ensure good mothering behavior. For young mothers it is useful to pen them with their lambs and assist the first suckle to ensure maternal bonding.

## Lambing equipment and drugs

Before the busy lambing season starts, all essential equipment should be obtained:

- Lambing ropes (2 leg ropes and one head rope or lambing snare)
- Prolapse retainers/harnesses
- Iodine solution
- Needles and syringes
- Thermometer
- Stomach feeding tube and syringe
- 40% glucose (dextrose) solution
- Calcium borogluconate solution
- Twin lamb oral remedy for ewes
- Colostrum supply
- Electrolyte sachets
- Sterilising solution for equipment/feeding tubes
- Disinfectant for floors/walls/surfaces
- Hot water supply
- Warming box for lambs
- Sufficient number of lambing pens/isolation facilities
- Medicines on advice of vet including anti-inflammatory drugs and maybe antibiotics
- Phone number of vet for any temporary staff
- Recording system for lamb and ewe losses, medication given and any notes about ewes

## Record keeping

Record keeping is very important so analysis can be carried out on areas where losses occur, and measures put in place to improve productivity.

Try and record the probable causes of lamb deaths and the time that losses occur. This information can be compared to industry targets to highlight areas where significant improvement could be made.

Time of lamb loss	Industry target
% empty ewes at scanning _____	<2%
Lamb losses from scanning to birth _____	<5%
Lamb losses from birth to turnout/marketing _____	<5%
Lamb losses from turnout to weaning _____	<3%
Lamb losses from scanning to rearing _____	<13%

Permanently marking or keeping a note of ewes that show poor mothering behavior or poor quality or quantity of colostrum production will enable them to be culled and reduce the occurrence in the flock.

If in doubt, always consult your vet and get advice on all aspects of parasite and disease control during the lambing period.