



## ON FARM DAIRY MEETING

### Selective dry cow therapy (SDCT) – why and how?

**Wednesday July 12<sup>th</sup> 12.00 - 13.30 –Low Dallars Farm, Hurlford KA1 5JW**

You are warmly invited to a practice farmer meeting on Selective Dry Cow Therapy (SDCT). You will be aware that there is pressure to reduce antibiotic use in livestock and one area that milk buyers are focusing on is antibiotic dry cow therapy. SDCT is currently optional for most milk buyers, however, it is likely this will move to compulsory in the short to medium term. At this meeting you will learn about the health benefits of not using antibiotic dry cow therapy in uninfected cows, the principles of identifying uninfected cows (which will be treated with teat sealant only) and how to correctly administer teat sealant with and without antibiotic treatment. We are aware that there has been a fair amount of information provided on this subject by milk buyers, SAC etc. and some of it appears to be conflicting. We intend to present best practice based on up to date knowledge and answer any questions you will have. Lunch will be provided. *Please let the practice know if you are coming so catering can be organised.*

**Speaker/Demonstrator:**

**Mark Crawshaw** BVetMed DCHP DipECBHM MRCVS



Thank you to Alan and Fiona Kerr for providing the venue and the cows for the meeting.

*(Sponsored by Zoetis)*

## **BULL FERTILITY: Did you know 20% of bulls are sub-fertile?**

Many of you will have had your bulls out awhile now and hopefully have been watching them work. Every year we get farms that are disappointed by their scanning results as they discover an apparently healthy appearing bull wasn't working well enough (sub fertile).

Ideally you should have your bulls checked every year in advance of the season so if there are any issues you have time to source a replacement. However it is still advisable at this stage to get a fertility check to avoid running sub-fertile or infertile bull unknowingly, **sub-fertile bulls will still settle some cows and so often go unnoticed until scanning disappointment.** the cost of a bull check is nothing compared to the cost of running a sub-fertile bull. *We also strongly advise checking newly bought bulls ASAP from arrival as if there is any problems they can usually be sent back if proven infertile at the start; just because a bull looks the part doesn't mean he can play the part!*

- **Normally fertile bulls:** are defined as being capable of impregnating >95% of fifty normally cycling cows/heifers in a 9-week mating period.
- **Sub-fertile bulls:** It has been found that around 20% of bulls are incapable of doing this i.e. they are sub-fertile. 'Sub-fertile' means that although the bull will get cows pregnant the rate of conception to him is too low to achieve pregnancy in >95% of fifty normally cycling cows in a 9-week mating period. The practice of rotating bulls around mating groups will mask the presence of sub-fertile bulls making them very difficult to detect by the farmer.
- **Infertile bulls:** A few bulls are infertile which means that they are incapable of getting any females pregnant and they are more often detected by the farmer because all females mated are seen to return to oestrus.

Sub-fertility or infertility is caused by either physical defects in the bull limiting his ability to mate frequently, or poor quality semen. The bull fertility check includes a full physical examination of the bull and his internal and external reproductive organs followed by semen collection using an electro-ejaculator and evaluation of the semen. Each bull then receives a certificate outlining the findings and whether or not he is of normal fertility and suitable for breeding. This allows the farmer to make sound decisions on which bulls to use. A side opening crush is ideal.

# Pre Housing Pneumonia Vaccination

Pneumonia always has the potential to be a problem at housing time, however there are a number of steps you can take to reduce the incidence of pneumonia on your farm. These include,

- Ensuring your shed is not over-stocked & ideally aim for no more than 15 calves per pen
- Having an All in all out housing system (difficult on an all year round calving dairy)
- Ensuring the shed has adequate ventilation & drainage (checks available at MBM Vet Group)
- Ensuring all calves receive 3-4 litres of good quality colostrum in the first 6 hours of life
- Not mixing calves of different ages in the same air space
- Promptly treating clinical cases (any calf with a temperature of 39.5+) & separating out if rest still healthy
- **VACCINATION**

Vaccination works by priming the calves' immune system to the most common respiratory pathogens that they are likely to come across. However they are not a "Silver Bullet", and if the other issues listed above are not addressed then cases of pneumonia will still occur. It can be worthwhile finding out what pathogens are present on your farm and tailor your vaccination program accordingly. This can be done by blood sampling 5 calves over 6 months old to see what pathogens they have antibodies to. If the calves have antibodies this is evidence of past infection and highlights what pathogens are a problem on your farm. The calves can be tested for all the common pathogens for £18/calf, please contact MBM Vet Group if you are interested. Otherwise blanket vaccination with a product that protects against all of the most common respiratory pathogens (such as Rispoval 4) would be recommended.

**Timing of vaccination is vital.** Ideally calves should have their vaccination course **COMPLETED two weeks before they are likely to encounter challenge** i.e. housing. For most of the commonly used vaccines this means vaccinating 6 weeks before the calves are likely to come in and then again two weeks before they come in. If this is not possible vaccinating 4 weeks before and again at coming in is the next best option. Vaccinating with the first dose when the calves are inside is far from ideal and often an ineffective use of vaccine and therefore your money. This is because the calves encounter the pathogen(s) and develop pneumonia before the vaccine has had time to prime their immune system. However if this is the only option available it is better to select a vaccine that delivers immunity quickly. Intra nasal vaccines (such as Rispoval Intranasal) do this by stimulating a different part of the immune system than injection based vaccines. Very young calves born towards the end of the grazing season may require three vaccinations depending on their age and the vaccine used. For more advice about

## **FLY STRIKE SEASON HAS ARRIVED**

Please **check sheep daily** for maggoting (strike), especially if your sheep have yet to be clipped! Strike is most common in lambs with scour/wet tails and as such usually seen on the breech. However in unclipped adult ewes the back/sides where the fleece traps sweat on hot days are also likely. Signs include restlessness, biting or kicking at struck site, hunched back, and in advanced cases lying away from rest and general dull demeanor, often fleece is dis-coloured, moist and foul smelling over site. Treatment generally includes housing (wound prone to sunburn), clipping out, gently cleaning with a wound suitable disinfectant such as hibiscrub, Spot-On, antibiotics and an anti-inflammatory; some cases can be life threatening so please call the practice for advice.

In cattle we **strongly advise against dehorning between now and autumn** as beasts have no way to deter flies from landing on their heads. Any animal with an open wound/recent surgery should be treated with a fly repellent or spot-on until fully healed. Please note Spot-On is NOT A FLY REPELLANT, Spot-On is licensed to TREAT FLY STRIKE but WILL NOT NECESSARILY PREVENT IT! If you require fly repellent advice please contact the practice.



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