

Wright & Morten Farm Newsletter

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Bluetongue update

The current bluetongue outbreak is unfortunately a rapidly evolving situation. Last month Bluetongue virus (BTV-3) was found in a single animal in East Riding of Yorkshire and a further case found in North Lincolnshire leading to these areas now being included in the restricted zone.



We expect the situation to be continuously evolving over the next few months and we all need to be vigilant to any signs of disease. Previously Bluetongue had only been seen in the South East of the country so whilst these new cases are still quite far from the practice it does demonstrate how easily disease can spread outside the normal risk areas.

Bluetongue is primarily transmitted by midges and can affect a multitude of species including cattle, sheep, goats, alpacas and llamas. Clinical signs can be widely variable and vary in severity with the worst case scenario being death. Signs to look out for include:

- Lethargy
- Milk drop
- Sores in mouth and nose
- Discharge from eyes and nose
- Drooling
- Swelling and redness of lips/tongue, head, neck, coronary band of foot and teats
- Feve
- Abortion or weak calves/lambs

If you recognise any of these signs in your stock please report these immediately.

APHA are regularly sending out updates and various webinar updates are available via AHDB and other sources.





Ploughing Match success

Well the rain managed to mostly hold off allowing us to have a fantastic day at the ploughing match. The stand was in full swing right from the start of the day and the bacon butties and burgers were flying off the BBQ. It was fantastic to have good a catch up with everyone and we hope you all enjoyed having a good go at the who's who competition!





Pneumonia season is upon us

Whilst it may seem like pneumonia season has never quite ended the start of the next season is now here. We have started to see quite a few doses of pneumonia vaccines going out the door over the last couple of weeks. To get the best out of your vaccines, it's important to complete the primary course before the main risk period. The injectable products require 2 doses and aren't fully effective until 2 or 3 weeks after the second dose. The intra-nasal vaccines are quicker to act, with cover starting from 10 days after administration. These are particularly useful in young calves as it can be used from birth, or if you are buying in they can provide the quickest cover. Unfortunately vaccines are not the silver bullet we always wish for but they can drastically reduce the severity of disease if it does enter your herd.

If you still struggled with pneumonia last winter despite vaccination it may be worth discussing it with one of the vets as it could be that there is a gap in your cover which needs protected or that some changes are required to your setup in order to minimise infection pressures. We usually stock some pneumonia vaccines in the practice but any larger orders we will need to order in for the next day. If you want to discuss protocols or your own farm situation please give us a call on 01477 571000.

Small animal are moving!

As of the 12th November 2024 the Macclesfield small animal branch and the out of hours provider (Vet's Now) will be moving to a new and bigger premises. The new address is Unit 107 Heather Close, Macclesfield, Cheshire, SK11 0LR.

Most importantly for all of our farm client's this also means that our very handy grit box will be relocating as well. We will remind you of this closer to the time whenever you are ordering drugs to be collected.



Do you have a foot fetish?

Lameness is a massive issue in the UK sheep flock (with goats being affected by very similar conditions too). It is estimated that there are 3 million lame sheep in the UK at any point! As an industry, the target has been set at achieving lameness levels of <2%. This will only be achieved by correctly identifying lesions on farm and using appropriate treatment, as well as using the AHDB 5 point plan on farm.

Scald

Scald is the most common cause of lameness in lambs and occurs when underfoot conditions are wet. The bacteria most frequently isolated is Dichelobacter nodosus. At grass, the prevalence is much greater in lambs than in ewes, but scald can become



problematic in housed ewes, when straw bedding becomes wet and warm. The skin between the claws is red and swollen and covered by a thin layer of white discharge. There is no under-running of the hoof wall or sole. Often scald can be treated using topical antibiotics alongside pain relief. When several animals are affected, treating all sheep in the group in a 10% zinc sulphate solution or 3% formalin in a footbath. Antibiotic footbaths are not appropriate. Scald can progress to footrot if animals are not treated promptly.

Footrot

Footrot is an extremely painful disease and affected animals can lose weight rapidly. Sheep with footrot are very lame, lie down for long periods and may not bear weight on the affected leg. There is swelling and moistening of the skin between the claws with infection spreading to separate the horn tissue of the sole and extend up the wall in neglected cases. There is a characteristic, foul-smelling discharge. The whole hoof capsule may be shed in severe cases and chronic infection leads to grossly misshapen and overgrown hooves. Paring the hoof horn can expose or damage the sensitive growing tissue (corium) causing pain, delaying healing and sometimes resulting in toe granulomas. Injectable antibiotics such as Alamycin LA should be paired with pain relief such as Metacam. Please discuss with your vet if a single injection of Alamycin has not been successful.





CODD

CODD initially occurs at the top of the hoof (coronary band) and often results in severe lameness. Small ulcers develop at the top of the hoof (coronary band) which can become so severe that the whole hoof capsule detaches. The damage caused by CODD can be so severe that horn regrowth is permanently damaged. In the early stages not all affected sheep will be lame so careful examination of



purchased animals for signs of CODD is essential. Please speak to a vet for treatment advice if you suspect you have CODD on farm.

White line/shelly hoof

The exact causes of shelly hoof are unknown but it is suspected that there is both a genetic and environmental element. Shelly hoof causes detachment of the outer hoof wall with the gap becoming full of soil, which can cause the sheep to become lame. The loose horn should be carefully



trimmed off to prevent dirt from getting trapped in the gap.

Toe granuloma



Toe granulomas are a strawberry like growth at the toe. These are often caused by over trimming or secondary to injury. Please speak to your vet on the most appropriate course of action.

5 point plan The 5 point management plan provides

a clear strategy to control lameness on farm and is recommended where footrot, scald, and/or CODD, have been diagnosed as the cause of lameness.



Quarantine

Incoming animals should have their feet inspected to identify any early lesions. Any animals with misshapen feet should be rejected. Using a footbath (eg formalin or zinc sulphate based) on arrival can reduce the risk of spreading possible infection into your flock.

Lame sheep should be treated promptly, ideally within a couple of days of them going lame. Once treated, the sheep should be isolated from the rest of the flock to prevent further spread of infection. The choice of antibiotic treatment may vary based on the cause of lameness, so it is very important to correctly identify the lesion and discuss with your vet if you are unsure.

Avoid

There are several areas that are particularly high risk when it comes to spreading infection, these include areas where sheep regularly gather eg water roughs, feeding areas and handling areas if they are not on hard standing. Hydrated lime can help and can be used in pens, gateways and around water/feed troughs. Trimming lame sheep should be avoided as this has been shown to prolong healing time and can act as a way of spreading bacteria between animals.

Any lame sheep should be identified and treatment recorded. Medicine Hub is an excellent way of recording treatments used on individuals. Any sheep suffering from two or more cases of sever lameness should be classed as 'repeat offenders' and should be culled out of the flock at the earliest opportunity.

Vaccinate

There is currently only one vaccine available – Footvax. The vaccine is licensed for the treatment and prevention of footrot by providing protection against 10 strains of Dichelobacter nodosus (the bacteria involved in footrot and scald. The vaccine should be administered as a primary course with two injections administered 4-6weekd apart followed by either a 6 monthly or annual booster. The timing of the vaccine should be based upon risk factors for the individual flock. Please give us a ring if you would like to discuss this.