

Wright & Morten Farm Newsletter

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Great News

In recognition of Hollie's contribution to the practice and her 10 years at the practice (so far), we are delighted to announce Hollie has been promoted to 'Senior Vet' in the farm team. Over the last few years, Hollie has taken a more senior role with both admin and clinical aspects of the practice, whilst still providing her usual excellent service to our clients. We hope you will all join the rest of the farm team in congratulating Hollie in this well-deserved promotion.

Reminder: Pneumonia Vaccine

It's not too late to get your calves vaccinated against pneumonia! To get the calves protected before the risk period – which is immediately after housing – we advise trying to complete the primary course of the vaccine ahead of time as most vaccines have a lag period before the animal becomes immune. If you are worried you don't have enough time, give any of the vets a ring and we can discuss the options as we can usually find a solution!



Medicines Courses

We are still running our medicine courses for those who need it for farm assurance or staff training/refreshers. Due to the restrictions, we are running these virtually in response to demand, so If you would be interested in attending a medicines course or would like more information, please give Vicky a ring at the office on 01477 571000. We have a few people waiting already, so the first date is likely to be fairly soon.

National Johnes Management Plan



As in previous years, dairy farms are required to have in place a Johnes disease management plan. Usually the deadline for completing the annual update is the end of October, however this year that has been extended to the end of December. However, some dairies are still insisting the declaration is completed ahead of this deadline.

Of course, to assess the risk of Johnes we need to know how many cows are infected, which means we will need to do some testing. The ideal is to complete a whole-herd test on milk – easiest done with your routine milk recording. For those not milk recording, the minimum requirement would be a 30-cow screen. This testing should be repeated throughout the year.

The testing and paperwork all take time, so if you haven't already heard about it from your routine vet, get in touch with the office to see what you need to do.



Liver Fluke Control in the Suckler Herd



We're sure many of you will be thinking about bringing cows in soon, if you haven't already after the recent rain! This is a great time to look at liver fluke whilst they are inside, to reduce their

infection and the amount of eggs shed onto pasture next year.

There are a few options of products/ingredients for liver fluke, and it's important to take note of which one, to ensure you treat all the stages of fluke you can/need too.

As you can see in the table, other than Triclabendazole-which works from 2 weeks of age - most are a minimum of 7-8 weeks, or adults (12weeks+). This means we usually recommend either, treat at housing and repeat 8-12 weeks later (depending on product), or delay treatment until the required time has elapsed for your chosen product. For example, Closantel could be used twice at housing and 8 weeks later or used once 8 weeks post-housing. The disadvantage of waiting until 8 weeks post-housing is the loss of condition and reduced productivity associated with liver fluke infection – this is particularly important on farms known to have high levels of liver fluke. For these farms treating twice may be the best option.

It may be useful to drop a pooled muck sample in from the cows to check for liver fluke eggs, which would confirm adult fluke were present. A negative result doesn't mean you don't need to treat but would suggest a low level or no infection.

For those farms with significant Rumen fluke levels it is worth discussing control with one of the vets, as the same products are not effective.

If you have questions about liver fluke treatment, give any of the vets a ring to set up a plan for controlling liver fluke in your herd.

Active Ingredi	ent	Administration Route	Stage of liver fluke killed
Triclabendazole		Oral	2 weeks onwards
		Pour-on	6–8 weeks onwards
Closant	el	S/c" injection or pour-on	7 weeks onwards
Nitroxyr	nil	S/c** injection	8 weeks onwards
Clorsulo	n	S/c** injection	Adults only
Oxycloz	anide	Oral	Adults only
Albendazole		Oral	Adults only

Calf Scour

Calves reared indoors are often affected by diarrhoea ('scour') outbreaks, these can have a variety of causes but there are preventative measures that can be taken to limit diarrhoea in your calves this housing time. Profits can be lost through labour and treatment costs besides deaths and growth checks.



Clinical signs of scours include:

High or normal rectal temperature, diarrhoea (loose watery faeces; plus blood and casts in Salmonella infections), weight loss/poor weight gain, 'staring' coat, sunken eyes, recumbent a lot, not drinking or eating much.

Causes of calf diarrhoea

Viral diarrhoea and cryptosporidiosis are the main causes of diarrhoea in calves under 28 days. Bacterial scours are less common, which is why you should not always need to treat with an antibiotic straightaway. Different ages of calves have varying susceptibility to different pathogens:

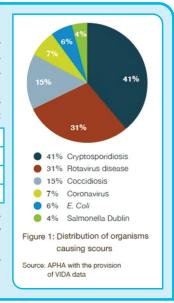
0 - 6 days of age = E. coli

6 - 12 days of age = Viral diarrhoea, cryptosporidiosis

Over 21 days of age = coccidiosis

Any age: nutritional scours, salmonella

Discussing with your vet the details about the calves affected by diarrhoea such as age, number affected, housing type, clinical signs seen will help with diagnosis. A faecal sample can also be used to help determine the cause.



Treatment of calf diarrhoea:

Treatment should be focussed on rehydration. Clinical signs are caused by the calf being unable to absorb water properly due to damaged lining of the gastrointestinal tract. Supplying extra fluids will help the calf recover as the gut lining heals.

- Isolate scouring calves, deal with these calves last after all other calves have been fed. The scouring calves can re-join healthy calves a week after scouring stops.
- Feed 1 2 litres of warm water mixed with electrolytes 2 4 times a day.
 Electrolytes can be added to water using powder sachets such as Lifeaid or gels such as Rehydion. The water can be offered in a bucket, via a teat or stomach tubed if the calf isn't sucking.
- If the calf is too weak to stand, it may need fluid via an IV drip administered by a vet.
- The calf's normal milk feeding regime should be continued, as this provides energy and hydration. Do NOT stop feeding milk!
- Your vet can help decide if additional treatment is needed besides fluids depending on diagnosis.

Prevention is key: areas to consider

Colostrum intake

- Quantity, quality, quickly; Ideally newborn calves should receive 3 litres of colostrum within 2 hours of birth.
- Ideally the best colostrum should be from vaccinated cows free from BVD and Johnes, quality can be checked with a colostrometer or a Brix refractometer
- Clean administration of colostrum - kit washed with warm soapy water between cows and calves, teat cleaned before collecting colostrum (dairy cows - teat can be prepared as for milking)

Hygiene in calving pens and calf housing

- Dipping navels with iodine shortly after birth
- Copious fresh bedding in calving areas and calf housing
- Avoid overcrowding
- Good calf hutch management

 hutches placed in a well
 drained area, hutches moved around to disinfect properly, disinfecting hutches between batches of calves etc.
- Disinfection protocol when entering calf shed - boot dips at entrance, separate overalls to wear in calf areas, latex gloves or cleaning hands before attending to calves

Correct administration of powdered milk

 Check at correct temperature, correct concentration, regular feeding regime, good quality powder

General TLC

 Warm draught free housing, calf jackets, good ventilation, fresh water and creep feed always available.

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