

Flock Health

Autumn is slowly approaching and many people are putting in the tups. With this in mind a few points to consider as the days grow shorter. Make sure your ram isn't over worked! Ideal tup:ewe ratio in most lowland systems is 1:40, this is reduced for ewe lambs. If the ram is overworked then it will vastly increase your number of repeats. There are many benefits to having a tight lambing window including being able to group ewes for feeding based on their stage of pregnancy; decreased labour costs (although this is weighed against lack of sleep!); any preventative treatments being required around the same time e.g. clostridial vaccinations; lambs being ready for a specific market.

Increase the number of pregnancies maintained by avoiding stressing animals while they are approaching implantation. Once fertilisation of an egg occurs it takes 15 days before the pregnancy is safely implanted in the uterine wall. Any stress at this time can increase early embryonic mortality, this includes movement, changes to diet, handling stress etc.

As most people are aware Shropshire is a very selenium deficient area. Selenium is vital for maintaining a healthy immune system, fertility and lamb viability. The key window for



blood sampling to detect deficiencies prior to tupping has now passed however, if you suspect a problem please don't hesitate to get in contact with one of the vets.

If reliably using a raddle it may be worth considering culling out any ewes before scanning that haven't been marked and are not in tip top condition (teeth, udder, feet, etc). This will save on feeding until scanning and help reduce stocking pressure on sheep. This may be of particular benefit if introducing a lot of ewe lambs as replacements as lower stocking densities will help decrease the stress on them.

For any questions or further flock health advice please contact the practice.



SHROPSHIRE
FARM
NEWS

Waiting 'till the Cows come home?

Autumn is now well and truly upon us, but whilst some excellent grass has come in well all season, many maize crops are still some way off. Several farmers have commented to us that the cobs are maturing very slowly indeed despite the crop looking well in the field. It will be a game of holding your nerve well into the autumn to ensure you have the best quality crop to feed, whilst still being able to harvest it!

We have seen more LDA's of late and as people are breaking into some very high protein and high energy first cut silage this has been exacerbated. Although there is undoubtedly a lot of milk to be had from this season's excellent forage, that with lower fibre content also leaves cows more susceptible to acidosis and DA. Regular feed analysis and evaluating muck scores and rumen fill is to be recommended this autumn to keep the milking cows on track.

As the autumn calving herds start serving next month, we have been testing many sweeper bulls (1 per 40 cows expected to be served) in order to ensure they can achieve many pregnancies rapidly, and with a chance to replace any sub-fertile bulls in good time. The last two seasons we have been more proactive with the block calving herds, synchronising cows not seen bulling earlier and achieving conception rates of 60 – 80% in these cows that would otherwise not have been served in the first 6 weeks of the mating period. Speak to any of the vets if you are considering this or have an interest in achieving a tighter calving block to drive profitability – Tim, Nathan and myself have a particular interest in this area.

James

At the end of September we said our goodbyes to Zoe and wished her well in her new career path at Wynnstay. We would like to introduce our newest member of the team Chloe Davies (pictured). I know Chloe is known to some already, she is a local girl who has been actively involved with young farmers and grown up on the family sheep farm. Chloe is particularly active during lambing season at home and is really looking forward to meeting and working with Shropshire farmers.



COURSE/WORKSHOP DATES

AI Course
with Tim O'Sullivan

Tuesday 1st – Friday 4th December
Venues and Times TBC closer to the date

If you are interested in any of the above please contact the Practice 01743 860920.

PRACTICE/DISPENSARY TIMES

We are open 24 hours a day, 7 days a week; office hours:

Monday – Friday 8:15 – 5.30

SHREWSBURY LIVESTOCK MARKET

Every Tuesday From 9.30am – 12 Noon

Please order the medications that you require for collection before 4pm the previous day.

Acegon

We have nearly used up the last few bottles of Veterelin which has now been dis-continued. In its place we will be using **Acegon**. Uses are more or less exactly the same but the **dose rate in all cases is 2mls**.

Acegon comes in 20ml bottles ie 10 doses per bottle and the cost per cow dose remains unchanged.

Prelim

Cyclix is also dis-continued and have already swapped over Prelim, another prostaglandin.

Its use remains the same as (2mls) and cost per cow remains unchanged.



TB Update for August

We carried out 55 tests in September, testing a total of 8,240 animals

There were 21 reactors and no inconclusives

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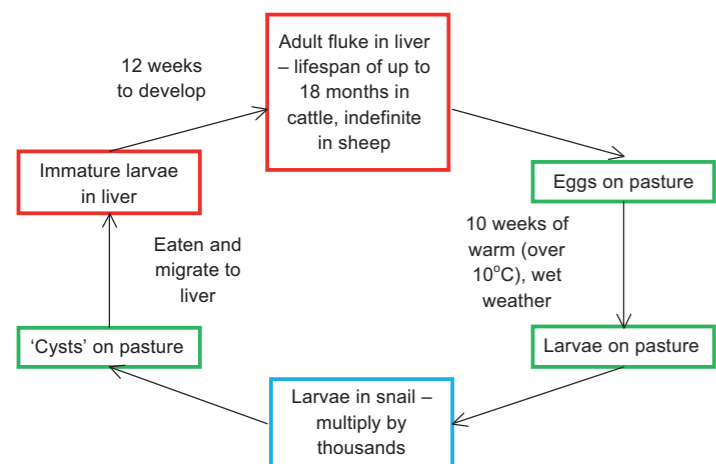
LIVER FLUKE

We have seen an increasing number of cases of liver fluke infection, most notably in adult dairy cattle. Fluke will of course be more widespread, so also think beef and sheep.

Unlike in sheep, and without actively looking for it, fluke in cattle can be very difficult to diagnose as clinical signs are often quite subtle. Everyone knows about weight loss and scour, but the true costs of fluke infection are more likely to be reduced yields (400l/cow/lactation), reduced birth weights (10%), reduced growth rates (10%), reduced adult DMI (up to 11%) leading to depressed appetite and fertility problems, abattoir condemnations etc as well as being a contributory factor in other diseases such as clostridial diseases or Salmonella; but I won't dwell on them here.

The very strict EU stance on the use of flukicides in milk-producing animals (banning or restricted use to only a few licensed at drying off) has arguably contributed to this rise of clinical cases. However we still rely on flukicides, and will continue to do so if we don't take a longer preventative view.

The basic life-cycle of fluke is shown below. Fluke do not pass directly from cow to cow or sheep to sheep, instead they have to spend some time in snails.



After the eggs have had time to hatch and the larvae develop in snails, infection is typically seen in the autumn and winter, and if you haven't noticed, early this summer was almost perfect snail conditions which has hugely contributed the rise in cases.

Due to fluke also infecting other mammals such as rabbits/deer etc, grazing areas with snail habitats will remain permanently infected, even if were possible to leave fields unstocked for several years. Strategic (or reactive) treatment using flukicides will help control the problem, but long term,

and with real worries about resistance, there will more need to be a move towards preventing infection.

Limiting new infections relies on preventing access of the grazing animals to snail habitats, or more permanently, removing snail habitats from the farm.

Possibilities include:

- Full time housing – this already happens with some high-yielding dairy herds
- Not grazing known fluke fields – a possibility if only some fields have a known fluke problem, assuming there is sufficient other grazing, and the 'fluke' fields can be used for silaging etc.
- Strategic grazing – it may be possible to limit grazing of 'fluke' areas in the autumn, limiting the number of new flukes entering the animals
- Fencing fluke areas – this will prevent new fluke infections but bear in mind drinking water sources(!)
- Long term drainage of fields, especially around water troughs – removal of the damp areas will remove the snail habitat and therefore the risk of fluke

Each option has limitations and some of the above options probably are not suitable for you, but which ones are? Some may be easier to implement, and some may be at odds with environmental grants promoting wetlands etc.

If we see fluke as a problem, and we are forced to reduce our reliance on flukicides, either by legislation and licensing, (and/or the threat of increasing resistance) every stock owner will probably be forced to rethink land use on the farm at some point.

Do you have fluke this year?

Testing for liver fluke can be done in the following ways:

- Antibody test (only possible in cattle) – detectable for up to 9 months after all flukes are killed
 - Bulk milk, **will be foc till end of 2015**
 - Blood, **will be subsidised by 50% till end of 2015**
- Faeces test for eggs
 - Only produced by adults, so will be negative for the first twelve weeks of infection, will be subsidised by 50% until end 2015
 - Proves current infection
- Slaughterhouse information
 - Most abattoirs will report when livers are condemned due to fluke damage

We will continue to provide a range of flukicides that are appropriate for use, but, and especially if you are looking to treat dairy cows, please speak to one of the vets regarding specific information about options.

Alistair

SELECTIVE DRY COW THERAPY

As reducing antibiotic usage in agriculture becomes an ever increasing topic of discussion, the issue of using (or not using) antibiotic dry cow therapy is coming to the fore. Certainly now it has become a relevant issue in the Herd Health Plan, and the subject of Selective Dry Cow therapy has to be considered, especially with those who have Arla contracts. We are now going to have to justify the use of antibiotic Dry Cow Therapy, and come up with an action plan to reduce the amount of cows which receive antibiotic therapy.



Antibiotic DCT was introduced in the 1960's to try and reduce the levels of sub-clinical mastitis in the British milking herd. This was a the period when the most prevalent mastitis organisms were the contagious Staphs and Strepts, and the use of DCT became an integral part of the 5 Point Mastitis Control Plan. As the genetics of especially Holstein cattle improved to produce cows that will milk quicker, there has been a corresponding increase in the size of the teat orifice, often leading to slower or incomplete formation of the teat plug when cows cease lactating. With the change of emphasis more to environmental mastitis organisms, especially E.coli, the Teat Sealant evolved a few years ago with the idea of preventing infection during the dry period when the natural defences of the keratin plug were compromised. The basis of selective DCT is that you use antibiotics and teat sealants on cows suspected of having subclinical mastitis, and just using teat sealants on those known to be free of infection. Selective DCT has been used successfully over a number of

years, but certain guidelines have to be followed. Essentially, it needs individual cell count data and accurate clinical mastitis records. Some herds don't have individual cell count data, but this does not rule out Selective DCT as appropriate regular use of California Milk tests can identify cows that should be suspected of being "clean" with regular clear results before drying off.

Certainly, if a herd has a continuing bulk cell count below 200,000, it is likely that Selective DCT could be introduced but you would have to discuss with your vet at what intervention level you are going to initiate it, the last three milk recordings before drying off of 200,000, or even 150,000, all other cows receiving antibiotics as well.

If over 25% of the herd have cell counts above 200,000, then this would suggest widespread infection, and there would be justification for using blanket antibiotic treatment. Similarly if there is a known Staph aureus problem, or Strept uberis, the dry period is the most effective time to try and clear up these infections, and antibiotic use would be justified. It is these bugs that DCT was intended to clear, most antibiotics having little effect on E.coli.

With this information, we can produce a course of action to follow, and be able to justify to your milk buyer the continued use if necessary. However, if we do this, we must also come up with an action plan of how we are going to reduce levels of mastitis, and cell counts, which may be the introduction of a Dairy Co mastitis Plan. This should help us to reduce mastitis, and change the intervention levels for our dry cow treatments. It can be a minefield, but it is something that we are all going to have to consider. The responsible use of antibiotics, and reduction in drug resistance will become more and more of an issue, and we have to be seen to be addressing it. Arla are certainly demanding it now, but with discussion between us we can justify what we are doing and draw up plans for the future. Again I would say how important accurate records are (the Herd Health Monitor is a useful tool) to support any course we decide to take.

One can't deny, and papers over the years have supported the fact that dry cow antibiotic usage does reduce infection levels and cell counts in freshly calved cows, but we are being asked to reduce antibiotic use. Conversely, there is much evidence to show that uninfected cows are 12X more likely to develop coliform mastitis if they had an antibiotic Dry Cow Treatment v sealant alone (the protective effect of non-pathogenic bacteria at the teat orifice offering some protection against invading E coli). This is the strong argument for its implementation. There is also a financial saving in these hard times as well, but careful consideration should be given to any course of action. Speak to us so we can draw up an action plan.

It would also be opportune to mention here that it is some three years ago that the issue of residues arose from the cheese makers arising from Teat Sealants. We were having to certify that you were trained in the correct use of these products, and these certificates lasted for three years. Just to mention that some of these may be due for renewal now.

Rod