

Winter Newsletter



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TARN FARM VETS

- ◇ **Lambing, Calving and Kidding- Preparation and readiness**
- ◇ **Johnes updates for your farm**
- ◇ **CODD (Contagious Ovine Digital Dermatitis)**
- ◇ **Liver Fluke- It's not too late to test! Post housing treatment**



Lambing, Calving and Kidding: Preparation and Readiness:

- Thinking about calving, lambing and kidding happens well in advance of giving birth. Preparation of the pregnant female includes body condition scoring and nutrition leading up to birth.
- The correct balance of energy and protein supply in the last four weeks of pregnancy has a significant impact on colostrum volume and quality. A lack of high quality colostrum is often the main factor responsible for disease and losses in the early stages of life, particularly from scour.
- Remember hygiene is really important around newborns but is also important for adults. Make sure your pens and sheds are clean to help reduce the number of animals that succumb to disease.
- Think of all of the diseases you could encounter during calving, lambing and kidding! Almost all disease encountered at this time has a nutritional & hygiene component to it, get these right and most of these diseases cease to be a problem.
- Is your medicine cupboard looking healthy and up to date? Ensure you have a supply of medicines close at hand in case you need them. Make sure they have not passed their expiry date and are stored correctly. As a minimum, it would be advisable to carry a broad spectrum antibiotic injection, anti-inflammatory/painkiller injection, calcium/glucose injection and twin lamb drench. Remember to check stocks of other essentials too such as lubricant, gloves, iodine solution, ropes, needles and syringes.
- Avoiding abortion- consider prevention of diseases such as BVD and IBR in Cattle and Toxoplasmosis and Enzootic Abortion in Sheep and Goats. In cases of abortion, isolate the animal and remove all products/bedding. Greater than 2% occurrence should prompt investigation. Pregnant women should avoid all contact.

What we can offer you:

- ◇ **Nutritional advice-particularly important for those prone to immunity dips (younger/ thinner stock, those carrying triplets).**
- ◇ **Vaccination schedule support including boosters.**
- ◇ **Abortion investigation and advice.**

Focus on: Johnes Disease– Update for your farm!

Johnes is an incurable bacterial disease caused by Mycobacterium Paratuberculosis (MAP) - a bacteria closely related to cattle TB and is ultimately fatal. It can affect all domestic livestock and is increasingly common in all breeds of cattle, sheep and goats

Sources of infection:

(normally picked up in first few weeks/months of life)

- Infection occurs via ingestion of infected faeces (on teats/ calving aids/ ropes /buckets/ dirty pens etc) or from infected colostrum and milk
- Transplacental



Eventually oedema ('bottle-jaw') will be seen



Clinical signs in cattle (usually >18m old):

- Chronic diarrhoea in the absence of an obvious cause
- Weight loss despite a healthy appetite
- Milk drop / lost productivity

Clinical signs in Sheep and Goats are less specific and typically just present as chronic weight-loss of unknown cause. Animals may

be culled without identifying Johnes as the cause of poor health and performance so it is likely underdiagnosed in these species.

Control measures:

Consider joining an official control scheme...

****KNOW THE STATUS OF YOUR HERD/FLOCK!****

- Early identification and removal of infectious animals is crucial
- Identification of potential infected animals and their offspring so they can be monitored and removed as necessary
- Never pool colostrum. (Pasteurisation can help reduce risk).
- Provide individual birthing pens so that animals of unknown Johnes status will not be able to pass the disease on.
- Keep the environment as clean and free from faecal contamination as possible during the first 3 months of life
- Test all bought-in animals over 12mths. Screening tests should be repeated

Diagnosis (Interpreting Johnes test results on a herd basis can be tricky)

- Take milk/blood samples from all 1st Lactation and older animals in dairy herds.
- Blood sample all animals which have had 1 or more offspring in meat herds.
- Remove all positive cases (and their offspring)

from the herd.

- Repeat the herd test regularly to reassess the situation (testing interval depends on herd infection level & breeding policies)

Dairy cattle herds are part of the National Johnes Management Plan (NJMP).

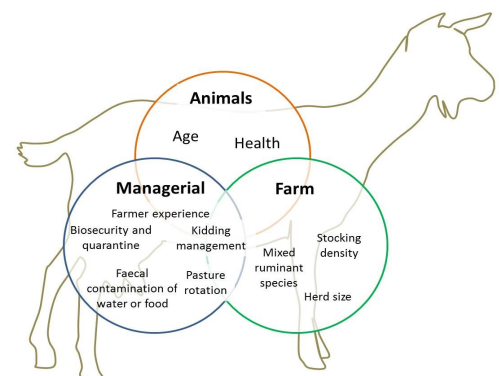
Do a status check!

A bespoke herd / flock control policy is important as no one unit is the same.

Please talk to us at the practice for further information and approaches to control.

From 1st November it is now a Red Tractor requirement for milking goat herds to have a vet-led specific Johnes control plan.

The Goat Vet Society working with the Milking Goat Association is about to launch its Johnes Control Plan for milking goats— please consider joining the GVS for further details.

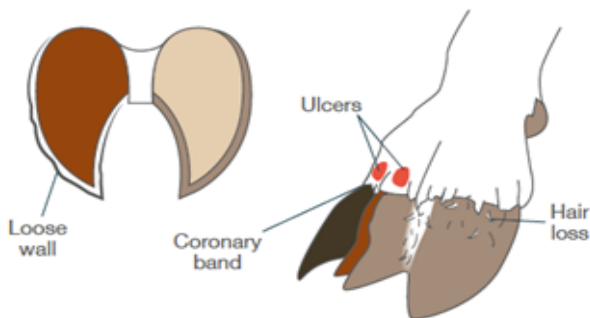


CODD (Contagious Ovine Digital Dermatitis) – Improving our understanding

In recent years there has been an ongoing rise in the incidence of CODD in the national sheep flock. Experts estimate around 30-50% of flocks are now infected and in some areas the number will be higher. Given this, CODD is currently being widely researched. With all lameness in sheep it is recommended to follow the 5 point plan. Here we summarise some of the latest findings and how to apply them to your control plan:

Recap:

CODD is thought to be caused by a treponeme bacteria. Infection begins as a small ulcerated area around the top of the hoof (coronary band) and spreads downwards, under running the horn and sometimes causing it to fall off completely. In initial outbreaks up to 50% of a flock can be affected.



Build Resilience: Mark affected animals when treated so repeat offenders can be culled

Quarantine: Brought in sheep/ mixing of flocks poses the greatest risk as animals which do not appear lame can still carry the disease. Where possible, investigate the history of a flock before purchase. Bought in sheep should be examined individually as animals with early lesions often do not show lameness. Removing these animals early for treatment can stop an outbreak from occurring.

Purchased animals should be quarantined for 28 days. In this time period animals should be examined, closely observed and foot-bathed up to 3 times at 7-10 day intervals.

Treat: CODD is highly contagious so prompt

treatment and removal of affected sheep from the flock is essential. Treatment with a long acting, appropriate antibiotic and pain relief are essential. In humans, infections with treponeme bacteria are treated with very long courses of antibiotic (2 weeks-a month). A long enough course of antibiotic is crucial, often a second or even third dose is required. Often reports that antibiotic “didn’t work” are actually cases which required a longer course of treatment.

Avoid: Avoid spread during handling, gathering etc. Hands, gloves and foot trimming shears all carry significant amounts of bacteria. Research shows 1% FAM30®, 2% Virkon® or 2% sodium hypochlorite are all effective at preventing treponeme growth after 20 seconds contact. So, keeping a bucket of disinfectant to hand in the sheep pens for dipping foot shears is advisable. Also, wearing clean disposable gloves when treating lame sheep or washing hands between individuals is recommended.

Wet/soiled areas should be avoided so clean pens after use and move feeders etc regularly.

Establish Immunity: Vaccinate - Research has shown that in a trial of sheep exposed to CODD over 80% of sheep that developed infection had previously had scald or footrot. As such controlling these diseases is key to controlling CODD. This may mean that footvax is appropriate for your flock – please give us a call to discuss



Liver Fluke: A reminder that its not too late to test and treat for fluke. Housing your livestock over the winter prevents them from picking up any new fluke. Treating and removing fluke burdens after housing will help livestock perform well over winter and achieve their potential in terms of productivity as well as preventing contamination and re-infection at turnout. Get in contact for advice on how to test, but importantly for this time of year—which treatment to use.



Christmas Opening Hours:



* Friday 24th Dec-08.30-12.30

Please ensure all drug orders are placed by 12.00 on Thursday 23rd December for collection/delivery on 24th.

* Saturday 25th-Tuesday 28th Dec-Emergency Calls only

01931 716024

* Wednesday 29th-Friday 31st Dec-08.30-12.30

* Saturday 1st-Monday 3rd Jan-Emergency Calls Only

* Tuesday 4th Jan-Normal Hours

*Wishing you all a Merry Christmas
and a Happy New Year*

