

Farm Animal Practice News

Summer
2019



P2. Herd & Flock Health

P3. Mastitis

P4. Lameness in Sheep

P4. Calf Hernias

Langford Vets 

 University of
BRISTOL

Welcome

Langford Vets Farm Animal Practice welcomes you to the Summer newsletter

With the change in season we have seen some changes at the practice. Rachel Adams left us at the end of May and we are happy to announce that Sarah Woollatt joined us at the start of July.

Due to the growth of the practice we will also be looking for another vet to join the team in order to grow the services available while maintaining a consistent primary vet for each farm.



Langford Vets Cattle Crush

You may not be aware that we have our own mobile crush that we can bring along to assist on visits. Please let us know when booking in your visit if you require us to bring the crush; it does require an electricity source. As well as being mobile, our crush allows us to trim both front and back feet. There is no set fee chargeable when we bring the crush on visits however it does take time to set up and pack away and this time will be chargeable in line with our current prices.



Herd and Flock Health Plans

We are now booking herd and flock health plans so will be in touch in the coming weeks to arrange your visit.

If you do not currently have a flock or herd plan but would like one, please let us know. The initial setup is £150 and thereafter an annual review fee of £50.00.

A herd health plan, performance review and record of your medicine use is required to pass the annual Red Tractor audit. There are many other benefits of having a tailored plan for your farm. Your herd or flock health plan will include a biosecurity and vaccination protocol as well as diagnostic plans to determine the health status of your animals. The health profile of your animals will determine the success of their production, including reproductive status and growth rates. Biosecurity practices are important factors to consider on your farm as all herds and flocks are impacted by infectious disease and therefore likely to benefit from the implantation of a herd health plan.

Flock Health Club

On 1st July we welcomed our new vet Sarah Woollatt. As well as becoming an integral part of the team Sarah will also be setting up our very first Flock Health Club. There is a nationwide drive to improve communications between sheep farms and their vets which is why we have taken the initiative to set up a Flock Health Club. These vet led sheep farmer discussion groups, have delivered great results in other areas of the UK.

Benefits of joining the Flock Health Club include:

- Implement active preventative health care on sheep farms
- Cost effective vet advice with costs spread through the year
- Encourages a closer relationship between vets and their clients
- Peer support and learning

The cost to join the Langford Vets Flock Health Club will be £20 per month (or a one-off fee of £240) excl. VAT and to make the club as relevant as possible it will only open to clients with 30 or more ewes. Do not worry if you have fewer, you will be able to join our Smallholder Club.

Members of the club will receive the following:

- Four faecal egg counts per year
- Quarterly meeting where we will discuss seasonal topics relating to flock health
- Tailored annual flock health plans with your routine vet, including a visit
- A free of charge visit for MV and EAE testing
- Data collection and analysis to allow anonymous benchmarking between club members
- Free of charge pre-lambing visit

For more information, or to sign up please give us a call or email us at farmpractice@langfordvets.co.uk



Taking sterile milk samples

A step-by-step guide

When testing milk for bacteriology it is important that your sample is sterile avoiding inaccurate results which are a waste of your time and money.

Separate samples should be taken from each affected quarter if there are problems in more than one – be sure to label each sample with which quarter it is from. Performing a CMT test will tell you which quarters are infected.

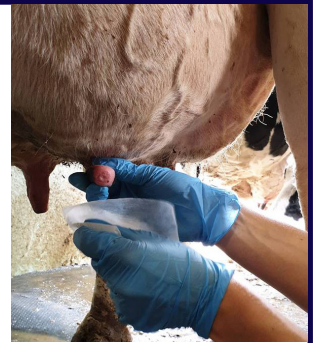
The easiest place to take a sterile milk sample is the milking parlour.

Things you will need:

- Clean disposable gloves
- Disinfectant (pre-dip or wipes)
- Paper towels
- Cotton wool
- Surgical spirit
- Sterile sample pot
- Label and marker pen

Cleaning the teat

1. Put on a pair of clean disposable gloves.
2. Wash the teat with water to remove any excess dirt and wipe dry with a clean paper towel.
3. Use a disinfectant teat dip or disinfectant wipe and wait 30 seconds then wipe dry with a clean paper towel.
4. Strip the teat 3-4 times.
5. Use surgical spirit applied to a cotton wool swab to scrub the end of the teat. Work from the centre (orifice) outwards and allow to dry.
6. Repeat steps 4 & 5 using a fresh surgical spirit swab.



Collecting the sample

Remove the lid of the sample pot and hold with the inside of the lid facing downwards and towards the palm of your hand – This prevents the inside of the lid becoming contaminated.

Hold the pot as horizontally (at least a 45° angle) as possible and strip the teat 4 times into the pot – Holding the pot this way is very important as it helps prevent dirt falling into the sample.

Replace the lid immediately and label the sample with cow ID, quarter and date.

Use a post milking dip as usual.



Sample storage tips

- Secure the lid of the sample pot with tape
- Keep samples in the fridge if sending for testing within 24 hours.
- If you need to keep samples for longer than 24 hours they should be kept in the freezer.

AHDB Dairy. (14 October 2013) Aseptic Milk Sampling. Available from: https://dairy.ahdb.org.uk/non_umbraco/download.aspx?media=15831 (Accessed 29th May 2019)
University of Bristol. (2018) Aseptic Milk Sampling for Bacteriology. Available from: <http://www.bristol.ac.uk/media-library/sites/vetscience/documents/clinical-skills/Aseptic%20Milk%20Sampling%20for%20Bacteriology.pdf> (Accessed 29th May 2019)



Mastitis

The importance of culture and sensitivity in clinical and subclinical mastitis

Subclinical and clinical mastitis in a herd is important in terms of food safety, dairy profitability and animal health.

Individual somatic cell counts (scc) can be used to identify sub clinically infected cows and doing cultures of clinical and sub clinical milk samples allow for the specific bacteria to be identified. Typically, contagious bacteria contribute to chronically high cell counts, whereas environmental bacteria cause a high number of clinical cases which require treatment.

By far the most significant contagious bacteria is *Staphylococcus aureus*, with *Streptococcus agalactiae* and *Mycoplasma* species also contributing to the disease. These bacteria live on the udder and teats and are spread during milking. Identifying the contagious bacteria means management can be targeted towards parlour routine, machine function and disinfection of the teat post-milking, as the teat canal remains open for 30 minutes.

Environmental mastitis bacteria, including *E. coli* and *Klebsiella*, live in bedding and housing. These bacteria are spread between milkings, when the cow is eating or when she is lying down. It is important to clean these bacteria off the teats once the cow enters the parlour and before applying the clusters. Again, identifying the specific pathogen by culture allows for more focused management plan.

Routine culture and sensitivity of a selection of clinical and subclinical mastitis samples should be done routinely every year as this can inform up-to-date mastitis management and treatment protocols specific to each farm.

Lameness in sheep

Prevention is better than cure

Sheep lameness can cause lots of problems within flocks and therefore remains an economic and welfare concern for many smallholders and shepherds in the UK.

Identifying the cause of lameness is important in ensuring correct treatment and prevention measures are taken early to prevent losses and suffering.

90% of lameness in sheep is caused by scald and footrot. The milder form is scald which can progress to footrot in certain conditions. Both conditions can cause severe lameness and pain. While early identification of the lesions is important to allow appropriate treatment, it also ensures the most effective prevention measures can be put in place.

Identify scald or footrot

Scald presents as a sudden onset lameness with red inflamed interdigital tissue and a foul smell. Contrastingly, footrot is a more advanced form of scald characterized by underrunning of the hoof wall. Footrot is caused by bacteria specifically found on sheep feet so can be bought into a flock.

The most significant risk factor is trauma to the foot combined with moist conditions which allows the bacteria to invade and proliferate. Overstocking and wet conditions further increase the risk of disease.

If you have a lame sheep you should;

- Isolate the sheep
- Inject with long acting oxytetracycline. This can be repeated up to 3 times.
- Cull persistent cases

Footrot is highly infectious so culling and reducing stock density are integral to eliminating this disease from a flock.

Prevention is key. Foot bathing is recommended in combination with vaccination, as foot trimming is no longer recommended.

Vaccination plays a key role in the prevention of footrot. Vaccinating sheep which suffer from footrot can help to treat current cases and prevent infection of new ones.

A single 1ml Dose of Footvax vaccine can help to prevent infection for up to five months, and a booster given 4 to 6 weeks after the first can give longer protection.

Please contact us if you are interested in vaccinating your flock:

01934 852 650



Flystrike

With summer setting in please be on the lookout for blowfly strike. There are several options for control, such as chemical pour ons, plunge dips, management methods and fly traps.

Management methods will help to reduce exposure to flies:

- Lookout for mucky backsides
- Control mites and infection
- Graze on open pastures with cross winds
- Avoid overstocking
- Dagging, crutching or shearing
- Ensuring fields have good drainage
- Keep dung heaps away

Remember to monitor your sheep closely during high risk periods. Ensure you count all your animals daily (this is a legal requirement) and look in the shade and in the hedges for any you can not find. If any present as dull or with a twitchy tail then these must be examined closely for any sign of maggots.

Calf hernias

Umbilical hernias are a common finding in cattle, most of which are hereditary. We advise not to breed from these animals. The other cause of hernias is when there is an umbilical infection, with the infection breaking down the abdominal muscle and creating a hernia. These defects often need to be repaired to prevent them increasing in size as the animal grows and the weight of the abdominal contents increases. This is especially true of heifers which you hope to carry a calf one day. Even small hernias present a danger to the animal due to the possibility of intestine becoming trapped.

We recommend that hernias are repaired whilst the calf is still milk-fed. This makes the anaesthesia less risky to the animal and easier for the vet, due to a reduced chance of regurgitation, as the animal does not have a functioning rumen at this point. The hernia operation can be quickly done and the whole process should take no more than an hour to do.

We are happy to come out to your farm to perform the procedure. We are also able to operate using the facilities at our Equine Hospital on an outpatient basis for a similar fee. This would require you dropping-off and collecting the calf at the hospital. The added benefits are that the hernia can be scanned to ensure the umbilical vessels are not infected, which would complicate the surgery and the anaesthesia can be closely monitored. Please contact us if you have any queries or suspected cases that you feel may be in need of surgery.

Farm Animal Practice Opening Hours

Mon - Fri 8.30am - 5pm

Telephone:

01934 852 650

24 hour emergency cover

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