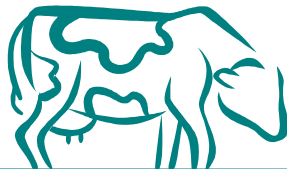




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Newsletter October 2010

Government Cutbacks

Much of the work done by the VLA at Langford and Exeter is heavily subsidised by DEFRA (up to 84% of the cost). Unsurprisingly, the level of subsidy will be reduced. Please be aware that some lab fees are increasing in price. The greatest effect will be on whole carcase post-mortems.

The procedure will also change, a veterinary surgeon must now discuss the suitability of the carcase as the best diagnostic specimen for disease surveillance with the duty vet at the VLA. If the VLA agree that the carcase should come in there will still be some subsidy. Therefore, you will have to arrange carcase submission through us. The cost of a "surveillance" PM (the carcase accepted by the VLA as the best specimen) for cattle over 12 months old will be £240 plus VAT including tests performed. The new cost of a commercial PM will average will AVERAGE £521.60 plus VAT .

Looking Ahead to Winter

It is time to start looking to prepare for winter pneumonia vaccinations. Bovipast RSP or Risposal 4 use requires two injections 4 weeks apart with another 2 weeks to gain full immunity. Therefore, the whole process needs to start 6 weeks before housing.

Parasites

Those who have not treated sheep for fluke yet should treat during October without fail. Triclabendazole is the treatment of choice e.g. Tribex 5%. Any deaths or ill-thrift in lambs should be investigated as *Haemonchus* infection is not usually associated with scouring.

Neck Rails, Lameness and Mastitis

Cubicle neck rails are often placed to keep the backs of cubicles clean to reduce mastitis, however, this approach can lead to increased lameness. A recent study compared a restrictive head rail (not allowing cows to stand with all 4 feet in the cubicle) and a unrestrictive head rail which allowed cows to stand wholly in the cubicle. The amount of lameness in the two groups was compared as was the types of lesions found on the feet. Out of the 16 cases of solar ulcers found, 15 were found in the restrictive head rail group.

When dung appears on the back of cubicles it is easy to jump to the conclusion that the neck rails are too far forward. What tends to happen is that cows will stand diagonally to get all four feet on to the cubicle bed and then they dung by the partitions. If this occurs then it is better to actually move the neck rail forward so that the largest 25% of cows can stand straight in the cubicle but dung in the alleyway. This will also improve the way cows lie (cows should never have to lie or stand diagonally in a cubicle) and so make it easier for them to get up and lie down.

Generally, the neck rail should be directly above the brisket board which itself should be 68 to 70 inches from the back of the cubicle. The height of the neck rail should be 44 to 50 inches above the bedding surface. If the cubicle has a sand base then the neck rail needs to be set back a distance equal to the width of the concrete lip at the back of the cubicle.

Mastitis Control and the Dry Period

Thank you to all those who came to our recent evening meeting to listen to Dr Andrew Bradley give a very interesting talk on the importance of the dry period. Whilst we all appreciate the importance of the dry period, I think Dr Bradley managed to show that the dry udder is more susceptible to infection, and effects of dry period management longer lasting, than most people think.

Below are outlined some of the points raised during the talk. Next month we will list proven management tips for improving dry period performance.

- ⇒ Dry period cure rate of high cell count cows is usually high with a rigorous approach to dry cow therapy. The dry period is still the best chance to cure high cell count cows.
- ⇒ The dry udder is not as resistant to infection as most think and is actually quite common.
- ⇒ Clinical mastitis in the dry udder is relatively uncommon (summer mastitis!) and infection with bacteria may be cleared or only show as clinical mastitis in the next lactation.
- ⇒ Toxic e.coli cases, even months into lactation, may be from infection in the dry period and can be associated with some trigger factor e.g. bulling
- ⇒ Clinical mastitis of lactation period origin should be pretty evenly spread through lactation. If a peak occurs in early lactation then it is probably due to dry period infection.
- ⇒ Dry period infection does not only occur with e.coli but with staphs and streps too.
- ⇒ For every 10% increase in the whole herd calving in with high cell counts is likely to double the bulk milk cell count e.g. 10% of cows calving in with high cell counts leads to a bulk cell count of 100,000 and 20% leads to a bulk SCC of 200,000 and 30% to 400,000.
- ⇒ Using a targeted dry cow therapy (using more than one type of tube for all cows) may help reduce e.coli infections in low cell count cows
- ⇒ Double tubing low cell count cows may lead to an increase in e.coli infections *relative* to staphs and streps BUT please speak to us before abandoning double tubing for these cows.
- ⇒ Double tubing tends to increase the amount of time internal teat sealant remains in the udder.
- ⇒ Selective dry cow therapy can be effective as effective as blanket dry cow therapy but decisions need to be made on a cow level not a quarter level. This means that if only 1 quarter is infected in a cow then treat all quarters with antibiotic dry cow tubes.
- ⇒ Blanket dry cow therapy is an aid to controlling new infections in the dry period but is not the whole story. When the whole dry period to 21 days post-calving is looked at, protection against e.coli and staphs is negligible unless an internal teat sealant is used.
- ⇒ If you want to know whether the dry period is a problem for you then tot up all your mastitis cases and list them by time after calving. Less than 1 in 12 cows should have a case of mastitis in the first month of lactation and less than 2 in 12 cows should have mastitis in all the other months of lactation combined.