



Farm Veterinary Solutions

Winter Update

2024

A Message from Max...

"Happy New Year to you all and welcome to the first FVS newsletter of 2024! Firstly, we hope you have all had a good festive period and managed a break after a challenging end to 2023 and before the spring lambing and calving season comes around again!

Here at FVS, the last few months of 2023 were very busy. With the changes to post-movement testing and the new slaughter attestation requirements for non-assured farms, adding to our normal winter visits. If you aren't farm assured and still require an attestation for the coming year, please contact the office so we can try and tie visits in with any other routine work you may require.

There have been some changes amongst the vets; Maria is heading off to Holland and Sam is starting a new challenge in the pathology department at Nottingham University. I would personally like to thank them both for their hard work and wish them every success in their new roles. Also, we are looking forward to having some familiar faces around, in Noah and Jorge, back with us again for the spring.

In terms of disease, with the wet conditions and cattle housed early, we have seen high levels of challenge from pneumonia in cattle. If you have been affected please contact us to discuss diagnostics and future prevention. Late season sheep parasite challenges also seem to be constantly increasing with high faecal egg counts underlying many of the losses in store lambs and ewes throughout November and December. Fingers crossed now for some settled cold weather over the next few weeks."

Max Hardy
BVSc MRCVS

Director of Farm Veterinary Solutions



Date for the Diary!

Topic: Lambing Meetings 2024

Market Harborough: Wednesday 31st January 2024

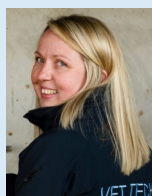
Melton Mowbray: Wednesday 7th February 2024

The annual lambing meetings are back for 2024. Join us for an evening discussing all of the challenges you may face at lambing time and how they can be overcome!

Vet Tech Update

Congratulations Robyn! - You may remember from our Autumn update that Robyn had begun training to perform TB testing duties... it with great pleasure we can now share that Robyn has passed her training and is officially an Approved Tuberculin Tester! Please join us in congratulating her in this big achievement. We are very proud of her for taking this next step in her role and adding to her already lengthy list of skills and services.

Housing To Do List - Housing is an excellent time to carry out many tasks that aren't so simple during the grazing period such as trace element investigations and herd vaccinations. Robyn and Emily are available to help with these, whether this be sample collection or assisting with vaccinations. Take a look at the blog post on our website for details of things to consider.



Robyn Oram (left) K-SQP
Emily Cox (right) L-SQP



Smallholders Club

The club is perfect for those who may be new to owning livestock or for those who want to improve their knowledge and skill set. We aim to create a local network for like-minded people to share and gain knowledge.

What's Included?

- Annual vet visit*
- Three seasonal meetings including a practical session
- Six faecal egg counts per annum

As well as...

- Biannual club newsletter
- Private email list and Facebook group
- Personal vet contact

*Twelve monthly medicine check visit and general inspection as well as vet discussion - any examination or procedures are chargeable.

Calving Season—The Suckler Herd



Body Condition Score of the Dam

It is important to ensure that the dam is in appropriate condition throughout the year to optimise production. Condition can be assessed by regular body condition scoring: stand behind the cow and assess the amount of fat around the tail head and pelvic bone e.g. A BCS of 3 is felt as fat covering over the whole tail head with the ability to feel the pelvis with firm pressure. The best time to alter a cow's BCS is pre-pregnancy, although alterations can be made mid-pregnancy if required. However, care should be taken to avoid rapid changes during pregnancy as this will place physiological stress on the cow during an already demanding time. It may predispose to disease or in severe cases, reproductive issues such as embryo death.

BCS is very important; an under conditioned cow may raise weak calves and struggle to get back in calf, whereas an over-conditioned cow will be prone to prolapses and difficulty during calving as the birth canal will be tighter due to the presence of excess fatty tissue.

Calving Signs

As the calving season approaches, here is a reminder of the signs to look out for to help make decisions as to whether a cow will calve on her own or if intervention may be needed. The stages of parturition are as follows:

⇒ Stage 1—Dilation of the cervix

This stage can take anywhere between 2-24 hours but commonly 2-6 hours before delivery of the calf. The cow may show signs of discomfort and isolation. As the cow approaches full dilation, the tail may be elevated or twitching, there is a thick vaginal mucous discharge and possibly a sunken appearance either side of the tail head.

⇒ Stage 2—Delivery of calf

A noticeable significant abdominal effort from the dam as well as the presence of membranes (water bag) at the vulva which will rupture causing a sudden rush of fluid—if the bag does not rupture this must be done manually (give heifers assistance after 60mins and 30mins for a cow). Failure of the water bag rupturing can cause death by suffocation and is more common with twins. The end of stage 2 is the delivery of the calf.

⇒ Stage 3—Detachment and expulsion of the placenta (*cleansing/foetal membranes*)

A cleansing will usually be expelled by the cow within the 12 hours following delivery of the calf and should be allowed to happen naturally. Pulling the placenta may cause rupture of the cotyledons that anchor the placenta to the uterus. Rupture of these cotyledons can cause significant haemorrhage and in severe cases, death of the dam.

When to call the vet

You should call a vet if you notice any of the following:

- **Dystocia**—continual, prolonged or excessive straining without any improvement.

If a cow is pushing but not making progress and you can feel that the birth canal is tight, Sensiblex can be given to dilate the birth canal and aid in delivery of the calf. Sensiblex has greatest effect 30-40 minutes after administration and can be repeated for a total of 2 doses.

- **Prolapse**—can be a solely or a combination of vaginal, uterine or rectal during or after calving.
- **Tears**—a large calf delivered vaginally may cause tears in the uterus or the vagina. Where intervention has been required, tears can be larger and require treatment.
- **Hiplock/nerve damage**—large calves can become stuck in the dam's pelvis which can cause nerve damage to the dam when excess traction is applied. Lameness or inability to rise can occur with delayed recovery.
- **Hypocalcaemia (Milk Fever)**—most common within 72 hours pre-calving and may be mistaken for dystocia. Milk fever can also occur post-calving - the cow refuses to rise and may appear bloated.
- **Retained foetal membranes (RFM)**—we discourage manually removing a placenta, however a retained placenta can predispose to infection. Keep an eye on cows with RFM and phone the vet if they are showing signs of illness.



Sonny Vinton
BVMSci MRCVS

Suckler Cows and Heifers	Autumn Calving	Spring Calving	Summer Calving
at calving	3	2-2.5	2-2.5
at service	2.5-3	2.5	2.5-3
at turnout	2	2	2
at housing	2.5-3	3	2.5

A cow's BCS varies for the different stages of the production cycle and is dependant on calving block. Scan the QR code for a full BCS guide.



Calf care

Remove any mucous or membranes covering the nose or within the mouth of the calf immediately after delivery. If it's airways are not cleared quickly the newborn calf is at risk of suffocation. Prompt naval care is essential to prevent infection. Dip the navel in diluted iodine at birth and again 12-18 hours later to sterilise and dry it out. This should diminish opportunities for pathogens to enter the calf through its exposed naval.

- **Colostrum**—To achieve transfer of maternal immunity, calves should receive at least 5% of their body weight in colostrum within the first 2 hours of life, followed by a further 5% of their bodyweight within 2-6 hours. To do this, calves need to be standing and suckling well. If you are at all unsure whether a calf has suckled, always top up by bottle of stomach tube. It is best to use fresh colostrum from the dam, alternatively use frozen colostrum defrosted in warm water—never use a microwave! Use a refractometer to assess the colostrum quality. (See below table)
- **Feeding calves**—If a calf requires milk supplementation, use bottles or buckets with suckler teats raised above their heads. When feeding, ensure their head and neck are outstretched and facing up to mimic the natural sucking position. Calves should also have access to hay/straw and concentrate feed.
- **Calf disease**—Scour is the biggest killer of calves under 6 months of age, closely followed by pneumonia. Good colostrum management is the key to minimising scour. If scour is noticed, a vet should be contacted to investigate the cause and provide effective treatment quickly to minimise the chance of spread and mortality. Rehydration therapy is often required and can be provided orally for mild cases. Severe or prolonged cases may require intravenous fluid therapy.

BRIX % (Refractometer)	Colostrum Quality
<10-15%	Poor
15-20%	Borderline
20-30%	Adequate
<30%	Very Good

Ewe Mastitis



Is mastitis causing more of a problem for your flock than you would like?

Clinical signs of mastitis can be obvious especially if it occurs in the lambing shed or somewhere you can easily monitor your sheep. Heat, swelling and red watery discharge are common signs. However, more often than not, sheep are presenting with more general signs such as lameness or lambs may not be thriving. In these cases, examining a ewes bag should be a routine check to rule out mastitis as a cause.

Across the industry, the prevalence of mastitis in our flocks is difficult to quantify because it can occur in two forms—acute or chronic. Acute mastitis is often when the ewe is clinically sick, the udder is hot and discharge is stripped out. Chronic and subclinical cases can be missed or only noted at a routine examination such as pre tupping checks. In these cases, udders have hard lumps from historical infection but may not have required treatment. Mastitis levels within UK flocks range from 0.6-6.6% incidence with an estimated cost to the industry of £120 million. This includes not only the cost of treatment, but indirect costs such as impact on reduced lamb growth, higher culling rates and reducing the longevity of ewes on farm.

Whilst the cause of mastitis is usually a result of a bacterial infection, there are a number of predisposing factors that can increase the risk of incidence on your farm:

1. Ewe Nutrition

It has been found that ewes with a poorer body condition and poor dietary intake of protein and energy in the last 6 weeks prior to lambing are more likely to have issues with mastitis. Trace elements also have an affect a ewes immune system and therefore udder health; in particular low selenium and copper.

2. Genetics

Breeding a better udder conformation with good shape and size can help to reduce mastitis. Studies have found that even if ewes recover from mastitis, they still carry the common bacteria causes of mastitis and can work as a reservoir for infection.

3. Number of lambs

Multiple lambs can lead to more competition for the teats and therefore cause damage and allowing entry for bacteria. Reviewing your management of triplets in particular may improve mastitis levels in your flock.

4. Hygiene and housing

This will mostly impact the indoor lambing systems. High stocking density, poor lambing shed conditions and poor hygiene of pens and individuals lambing sheep can increase infectious causes of mastitis.

5. Disease status

Maedi Visna (MV) is a wasting disease that affects a ewes immune system over time, making her more susceptible to infection and secondary diseases like mastitis.

Rebecca Davenport
BVM BVS MRCVS



Take these next steps if you are concerned about mastitis levels in your flock:

1. Record keeping

Record as much information as possible—when cases occur, treatment given and if the treatment was effective.

2. Body condition scoring (BCS)

Body condition score your flock at the key time points to highlight higher risk groups and enable management changes to reduce the risk—scanning, lambing, weaning and pre-tupping.

3. Trace element status

Check the levels of copper, selenium, cobalt and iodine by blood sampling 6 ewes per management group to check if current supplementation is sufficient or if further supplementation is required.

4. Disease status

Know your MV status on farm via our labs MV monitoring scheme. To begin with, we advise that 12 cull ewes are blood sampled and screened for MV.

5. Bacterial culture and vaccination

Sample cases of mastitis for bacterial culture. We have support from a pharmaceutical company to provide testing for 5 cases of mastitis per farm. This information may highlight a particular bacterial cause and if vaccination could be an option on your farm.



TB Update

It is that time of year when the TB diary gets very busy! We kindly ask that you be as organised as possible and book in any tests with as much notice as you can so we are better able to fulfil your requests.

Post-Movement Testing

As of the 1st August 2023, cattle moving from higher TB incidence areas of England and Wales into the annual surveillance area of England, are now required to undergo post-movement testing. APHA were kindly sending postal reminders to farms to carry out such testing when required. However, since the 1st December 2023, APHA have stopped sending these reminders. As with pre-movement testing, it is your own responsibility to remember and organise the relevant post-movement TB tests.

Post movement tests must be completed 60-120 days after the animals arrival on the holding and is to be arranged and paid for by yourselves.

Please call us if you are unsure or visit the TB Hub website for more information by scanning the QR code.



If you wish to discuss any of the topics raised in the Winter Update, please call the office on 01664 567481 (option 2) to speak to one of our Receptionists, SQPs, Vet Techs or Vets.

VPS Products– Winter Deals 2024

PRODUCT	USE	ADMINISTRATION	WITHDRAWAL (Guide Only)	PRICE (ex VAT)
 Enovex Pour-on	Ivermectin pour on for the control of adult and inhibited larval stage roundworms, mites and lice in cattle.	Pour-on 1ml per 10kg	Cattle Meat—28 days Milk—>60 days	2.5L—£30
 Eprizero Pour-on	Eprinomectin pour on for the control of adult and inhibited larval stage roundworm, mites and lice in cattle.	Pour-on 1ml per 10kg	Cattle Meat—10 days Milk—0 hours	2.5L—£135 5L—£195
 Dectomax Injection	Doramectin injection for the control of roundworms, mites and lice in cattle and sheep.	Cattle 1ml per 50kg Subcutaneous Inj Sheep 1ml per 33kg Intramuscular Inj	Cattle Meat—70 days Sheep Meat—70 days	200ml—£65
 Closamectin Pour-on	Ivermectin and Closantel pour-on for control of adult and inhibited larval stages of roundworms, mange mites, lice, late immature and adult liver fluke in cattle.	Pour-on 1ml per 10kg	Cattle Meat—56 days Milk—do not use (>150days)	2.5L—£230 5L—£410
 Endospec SC 2.5%	Albendazole (white) drench for the control of roundworms, tapeworms and adult liver fluke in sheep.	Oral drench See pack info	Sheep Meat—4 days	2.5L—£35 10L—£65
 Bimectin Plus Injection	Ivermectin and Clorsulon injection for control of adult and inhibited larval stage roundworms, mange mites and lice, late immature and adult liver fluke in cattle.	Subcutaneous inj 1ml per 50kg	Cattle Meat—66 days Milk—do not use (>60 days)	250ml—£48 500ml—£75
 Noromectin Drench	Ivermectin (clear) drench for the control of adult and inhibited larval roundworms in sheep.	Oral drench 2.5ml per 10kg	Sheep Meat—14 days	1L—£18 2.5L—£35 5L—£49
 Endofluke 10%	Triclabendazole drench for the control of early immature to adult liver fluke in sheep and cattle.	Oral drench 1ml per 10kg	Cattle Meat—56 days Sheep Meat—56 days	2.5L—£60 5L—£98
 Solantel Drench	Closantel drench for the control of late immature and adult liver fluke and Haemonchus in sheep.	Oral drench 1m per 5kg	Sheep Meat—42 days	2.5L—£64 5L—£90
 Bovigen Scour	E.coli K99, Rotavirus and Coronavirus calf scour vaccines for administration to cows pre-calving.	Subcutaneous Inj Cattle—3ml	0 days	15ml—£40 (5 doses) 90ml—£216 (30 doses)
 Footvax	Dichelobacter vaccine for the prevention of footrot in sheep	Subcutaneous Inj Sheep—1ml	0 days	20ml—£40 50ml—£75 250ml—£280

To place an order or for more information, please call 01664 567481



Emergency Contact: 01664 567481

Email: farmteam@rutlandvets.co.uk

Farm Veterinary Solutions

1-3 Kings Road, Melton Mowbray, Leicestershire LE13 1QF

Elms Farm Industrial Estate, Bitteswell, Lutterworth LE17 4LR

Langton Garden Centre, Melton Road Market Harborough LE16 7TG

12a Ayston Road, Uppingham LE15 9RL

Farm Office: 01664 567481 option 2

Lutterworth: 01455 248500