Farm Veterinary Solutions

Autumn Update 2022

A Message from Max...

"Welcome to the autumn edition of the FVS newsletter. We hope you have all had an enjoyable summer; although it was certainly one for the arable farmers not for those grazing livestock. At least good straw has been plentiful and we even managed to hold our first staff family BBQ in 3 years in the sunshine!

"With forage stocks now very light, we hope for favourable conditions and an extended grazing period before housing. On average, 2022 so far has seen huge reductions in the antibiotic use of our clients. All staff are proud to keep this momentum going as it provides such a powerful message for our livestock industry, in the face of negative press.

"Crucially as we move in to the winter months with margins tight, whether in terms of reproduction, meat or milk production, we must ensure that all of the animals on your farms are working efficiently. In difficult times, with feed and other major inputs sky high, there is always the temptation to cut corners. Please consider, that in all farmed species, contagious diseases (particularly pneumonia, abortion agents and infectious lameness), parasite burdens and other herd or flock health issues will all have huge negative effects on feed conversion efficiency and outputs. Our vets and SQP's are always happy to discuss disease prevention, whether out on farm or over the phone so please get in touch with any questions of concerns you have."

Max Hardy
BVSc MRCVS
Director of Farm Veterinary Solutions

TB Advisory Service: FVS Involvement

The TB Advisory Service (TBAS) is a government funded project that offers practical, farm specific, cost effective advice regarding the control of TB on farm. This free advice and support is aimed at managing TB as an infectious disease that can be controlled and its risks mitigated through biosecurity measures.

What services will benefit you?

On farm visits, telephone advice, badger sett surveys and personalised recommendations unique to your farms management plan - all with one of our own vets for familiarity!

The farm visits are completed by specially trained, independent vets. Gemma, one of our own farm vets has completed all of the necessary training and is now available to carry out the specialised, fully funded visits. If you wish to book in for this service, please contact our TB Coordinator.

What is involved?

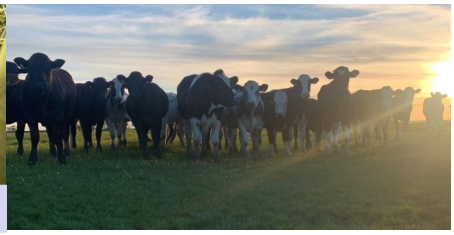
The visits are designed to be delivered in two parts, the first part is an initial visit involving completion of a questionnaire and a farm walk to identify potential risks for the spread of TB from other cattle or wildlife sources. A list of four farm specific recommendations is generated for you, the farmer, to implement in order to reduce the risk of TB transmission on farm. All of these recommendations are designed to be practical, achievable and cost effective. With the new DEFRA grant structure due to be launched over the next few seasons, you may even be eligible to gain financial support to help you implement the recommendations made in your initial visit.

The second part of the scheme involves a follow up visit from 3-6 months later, whereby the implementation of the recommendations is reviewed. Evidence must then be provided so that Gemma can submit a report to TBAS to show the completion of the two visits and provide feedback on results.

Who is this available to?

Visits are available to any farm with a CPH number, making camelids and other non bovine species also eligible for the service. Visits are suitable for any farm regardless of your TB history. This is a great opportunity to reduce the likelihood of future outbreaks or to help manage current breakdowns.

A badger sett



Gemma Barnes
BVM BVS MRCVS

What we've seen this summer:

With a hot, dry summer creating difficulties for us all, it also changes the challenges our flocks face. The drier conditions have enabled one gut parasite in particular to thrive—***Haemonchus contortus***, also known as the Barber's pole worm.

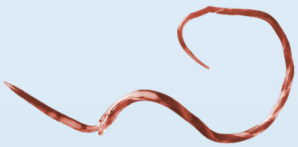
In contrast to other gut worms, the Barber's pole worm attaches itself to the stomach lining of sheep and sucks their blood. In cases of high burden, sheep can lose up to 250ml of blood per day. Clinically, signs of Haemonchus in sheep differ to those of other worm burdens as scouring is not common. Instead, sheep are anaemic, lose condition, become weak, swelling under the jaw (bottle jaw) and in serious cases, sudden death occurs.

It is essential to check if there is any worm burden present in both your breeding flock (including rams) and any lambs still on pasture by using faecal egg counts prior to tupping.

Submitting faecal samples to us at the practice allows us to assess the level of worm burden. If high egg counts are seen, we can submit them to APHA for further speciation—this provides a percentage of what specific worms are present. We have diagnosed a significant number of flocks with Haemonchus this summer and following diagnosis the best treatment plan will need to be discussed. Haemonchus is also able to hibernate within the ewe, so planning treatment pre-lambing is vital to reduce a worm burden being shed on pasture next summer.

Survival of this worm is very much climate dependant. Next year if we have a wetter summer, the Barber's pole worm is less likely to be an issue.

Bottle jaw seen in a chronically infected ewe—Nadis



Haemonchus contortus. (Barber's Pole Worm)

What to look out for this winter:

Whilst Haemonchus has caused more problems this summer, the dry heat has fortunately limited the life cycle of another parasite—the **Liver Fluke**.

However, those whom graze areas of wet land, such as marshes or pasture with water running through still need to be monitoring for disease. Fluke infection can often present similarly to cases of Haemonchus with weight loss, poor fleece condition and anaemia.

How to identify if your flock has issues with Liver Fluke:

- *Abattoir reports on condemned livers from lambs sent over the autumn;*
- *Blood testing lambs from this season for exposure;*
- *Faecal sampling ewes in the new year.*

Even if present in low levels, fluke can affect your flock sub-clinically, e.g. reduced fertility—lower scanning percentage.

Fasciola hepatica. (Liver Fluke)

It is really important to be monitoring parasites throughout the year, especially as our seasons are changing and the predictability of these diseases is uncertain. Working together we want to be strategic in your use of anthelmintics by providing targeted treatment points and overall improve the health and welfare of your flock, whilst being mindful of the financial and time constraints being felt by all businesses at the moment.

Rebecca Davenport
BVM BVS MRCVS

Meet The Team

Jess Hulse—*Farm Veterinary Surgeon*

Introduce yourself:

"I grew up in Southampton and recently graduated from Cambridge University and developed a love for all things farm! I have a particular interest in fertility and am very much looking forward to meeting and working with the FVS clients."

What do you do in your spare time?

"In my time off, I enjoy playing cricket, especially when the sun is shining! I also enjoy running, cycling and I have recently developed a love for open water swimming since moving to Rutland."

Where in the world have you been?

"France, Spain, Croatia, Germany, Austria, Slovenia, America, Jamaica, Italy, The Netherlands and Mauritius."

Interesting fact about yourself:

"I can name every country of the world."

Jess is out and attending many farm calls and will hopefully get a chance to meet many of you very soon!

Jess Hulse
BA VetMB MRCVS

TB Testing Diary

We are fast approaching the busiest time of the year for TB testing due to cattle housing. The TB testing diary over the next few months is already starting to fill up. We ask that you please aim to be organised by booking in all TB tests well in advance whether it be government or private tests. We will always aim to offer you the dates and timings to suit you but please bear with us as we work through this busy period.

With thanks,

The TB Team

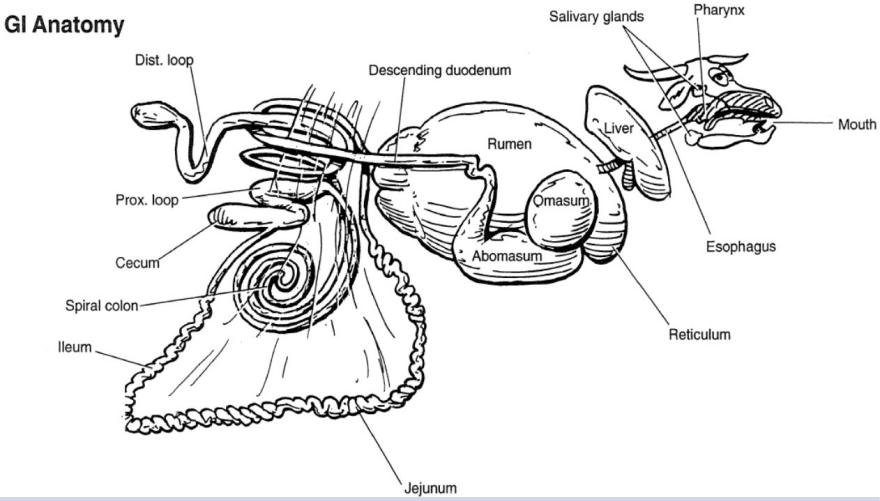
Case Study: *Sudden Death in an Adult Dairy Cow*

Recently, farm vet, Sam, received a call one morning for an adult dairy cow that had been found down with bloody faeces present at her rectum after dropping milk production significantly within the last 24 hours. The cow looked depressed and would not get up, eat or drink. She had calved three months prior and until recently was fit and healthy. Despite the best efforts the cow died.

The Diagnosis:

Upon initial inspection, the cow had the aforementioned bloody "faeces" at its rectum, although in reality it had the texture and colour of a large blood clot with no faecal material present. The mucous membranes inside of the mouth were very pale despite death having occurred recently. The cow otherwise looked in good body condition with no other signs of ill health.

The farmer elected for a post mortem to be carried out on the cow to work out the possible cause of death. Upon entry into the abdomen, grossly distended small intestines were apparent but were filled with intestinal contents that were a normal colour and not blood tinged. Moving down the small intestines towards the large intestine, a patch of intestine was reached that's surface—and the mesentery that attached the intestine to the body wall—had a deep red surface. At this point the intestinal contents were no longer the normal breakdown products of feed material, but were instead a large blood clot. This blood clot extended down the intestine, all the way to the rectum. Evidence of this bloody, partially clotted material was also present in the caecum. This pathology is indicative of a disease called *Jejunal Haemorrhagic Syndrome (JHS).*



Guide to Bovine Clinics, Pasquini et al. 2055

Post-mortem blood clot in the jejunum

About the Condition:

Jejenial Haemorrhagic Syndrome is a rare but highly fatal disease that has been recognised in the last 30 years. Whilst it has been diagnosed in beef cattle, it is primarily seen within the dairy industry and statistically more common in older cows within the first few months of lactation. Unfortunately, both medical and surgical treatment is almost always unsuccessful and the fatality rate is extremely high. Cows usually present with depression, dehydration, abdominal pain, teeth grinding, bloat, right sided pings and milk drop, amongst other symptoms. These clinical signs are similar to a right-sided displaced abomasum (RDA), torsion of the caecum, torsion of the intestine or other sources of intestinal pain. The blood loss into the intestines results in shock, collapse and eventual death.

The Causes:

Studies into the causes behind JHS have brought forward *Clostridium perfringens* type A and *Aspergillus fumigatus*—a common mould. *Clostridium perfringens* type A has been isolated from multiple cases of JHS at higher than normal levels, but it is also commonly found in the intestines of normal cows and multiplies after death. Furthermore, a recent study where *Clostridium perfringens* type A was introduced into the small intestines of twelve dairy cows, could not replicate any clinical signs of JHS. *Aspergillus fumigatus* on the other hand has been isolated from a high percentage of cows that have died from JHS, but not from cows that have died from other gastrointestinal tract diseases. However, the mycotoxins produced by *Aspergillus fumigatus* are commonly found in animal feed, but the actual role they may play in this disease in currently unknown. JHS does also seem to be more common in dairy herds that are fed high-energy, low-fibre diets, whilst herds that are grazed are seemingly less likely to develop the condition.

Hopefully none of you will have ever come across this condition in your cattle and hopefully you never will!

But nevertheless, an interesting find by Sam and a condition for cattle farmers to be aware of for the future.

Sam Hailes
BA VetMB MRCVS

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

VPS Products– Autumn Deals 2022

PRODUCT	USE	ADMINSTRATION	WITHDRAWAL	PRICE (ex VAT)
Enovex Pour-on	Ivermectin pour on for the control of adult and inhibited larval stage roundworms, mange mites and sucking lice in cattle.	Pour-on 1ml per 10kg	Cattle Meat—28 days Milk— >60 days	2.5L—£29
Eprizero Pour-on	Eprinomectin pour on for the control of adult and inhibited larval stage roundworm, mange mites and lice in dairy cattle.	Pour-on 1ml per 10kg	Cattle Meat—10 days Milk—0 hours	2.5L—£125 5L—£195
Taurador Pour-on	Doramectin pour on for the control of roundworms, mange mites and lice in cattle for up to 5 weeks.	Pour-on 1ml per 10kg	Cattle Meat—35 days Milk—do not use	1L—£75 2.5L—£115 5L—£190
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—£70
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—£60
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—£210 5L—£395
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—£50 500ml—£80
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—£16 2.5L—£32 5L—£49
Endofluke 10%	Triclabendazole drench for 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—£56 5L—£95
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
Footvax	Dichelobacter Nodosus vaccine for prevention and treatment of footrot in sheep	S/C Injection Sheep—1ml	0 days	20ml—£32 50ml—£67 250ml—£260

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

A member of XL Vets Farm

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