

FARM NEWSLETTER - December 2017

FIGHTING FLUKE

It is safe to say that we have been dealt a challenging year weather wise. I drove past a field of grass that was cut for silage at the end of October that was neighbouring a group of ewes that were all raddle marked! These trying climatic conditions have had an influence on fluke and mud snails development, shifting the disease pattern and resulting in a lot of people being caught out.

The dry period we had early in the year did not suit the fluke or the snails, so they were later than usual in developing (it is a vague memory but April had a below average rainfall and ended with a cold snap). The wet summer and back end has been fluke heaven however and they have been enjoying our countryside in hoards since mid-September. We have identified three main reasons for the fluke losses we have seen in the last 3 weeks.

1 - There has been such a development of fluke since September that sheep and lambs are picking up a huge burden and the liver is being overwhelmed with 4-6 week old fluke. This is known as acute fluke.

To prevent this, we need to use a drug that kills immature fluke at the right time.

2 - The sheep that were dosed in August and early September had not picked up enough fluke for the drugs to be effective. There would be no, or only very immature fluke in the liver at that time.

We are finding that the fluke season is varying every year. Watching the parasite forecasts and dosing according to the fluke level is important.



3 - We are finding a lot of drug resistance to Triclabendazole (TBZ). Fluke produce thousands of eggs so once resistance develops it means the drugs are ineffective very quickly with dramatic effects.

Triclabendazole still works well on a significant proportion of farms and even when we have an apparent drug failure it is often not the whole picture. In a large proportion of cases when sheep die despite TBZ use, it is often due to a huge fluke infestation, inappropriate timing or under-dosing. We should be careful not to write this very useful drug off as it is still the best flukicide to be using as a first dose. It is VITAL that we use TBZ at the right time and don't under-dose or

overuse it. At this time of the year if you are treating your sheep for fluke with a Triclabendazole based product (Fasinex, Tribex, Endofluke, Triclafas) it would be a good idea to have a pooled dung sample checked 3 weeks after dosing to check for the presence of fluke eggs. If fluke eggs are found it shows that adult fluke are still present in the sheep and that the treatment given has not been fully effective.

It is difficult to stay on top of the changing situation and we do see a variation across different farms. The farm vets and our SQP's are available to put a plan together for you and to advise on what is best now and going forward. Call in or give us a ring.



MSD Lameness Advisor



Congratulations to Anna Ashworth, Dalehead's Veterinary Technician and R-SQP who has recently qualified as an MSD Sheep Lameness Adviser and is able to assist farmers to develop a strategy to control lameness in their sheep flocks by identifying the causes and implementing the 5 point action plan to reduce its incidence.

Anna is also a qualified mobility assessor for dairy herds and is able to carry out mobility scoring as part of your Red Tractor Farm Assurance.

Farmers supplying milk to ARLA are being encouraged to carry out a welfare assessment of their cows before 15th December to qualify for an improved milk price. This involves mobility scoring, cleanliness scoring, injuries scoring and body condition scoring all the cows using a 3 point scale. While farmers can initially self-certify their cows Anna is able to



Top Tips For Sampling FEC (faecal egg counts)

Sample 10 animals from a group:

• Collect 10 animals into a clean pen or group them in a corner of a field. Don't mix age groups. Sample either ewes or lambs.

Collect at least 40 grams from each animal:

• Pick up a handful from 10 different piles of faeces

Put the samples in separate bags or containers. Do not mix the samples.

In the lab we do one test on the 10 samples. To get a meaningful result we mix the same amount from each sample together. This is called a pooled sample. If you put all the faeces together before we get it, we won't be testing a sample from every animal contributing to the sample and the results could be inaccurate.

Label the samples and provide relevant information. We need to know:

- If the sample is from ewes, tups, lambs
- When the last wormer and fluke dose was used
- Which product was used as the last worm and fluke dose
- A group name for the samples *e.g.* different breed groups or areas of the farm. This can help compare results in the future and give us a valuable picture of the farm.



CALF SCOURS

Calf scour is a common disease experienced on the majority of cattle farms, however with some diagnostic tests and attention to detail, this disease can be successfully reduced and even eliminated. Investigations need to start at the beginning i.e. calving, and look at calf rearing as a whole. It is then important to look at colostrum intake (calf needs 3 litres of good quality colostrum in the first six hours), calf shed hygiene and feeding protocols. Samples of scour can be tested at the surgery to help determine the main cause of disease.

The treatment of scours in calves has two principle aims; firstly, to cure the calf and also to make sure the disease doesn't spread to the other animals in the shed.

Different pathogens tend to cause disease in calves at slightly different ages, though this guide does not always hold:

Cause	Timing
Enterotoxigenic E coli K99	1-5 days
Rotavirus species A	5-10 days
Coronavirus	7-15 days
Cryptosporidia	15-35 days
Salmonella	3 weeks
Coccidiosis	4 weeks
Nutritional	chronic

A very poorly calf in week one, with runny, lumpy dung and a fever/chill, often signifies E.Coli. The best thing to do with this calf is speak to a vet as it is likely to require intravenous fluids and intensive care.

During the second week of life, Rotavirus can be a problem. Typically this is characterised by a yellow paste-like scour. Feeding milk more frequently (up to 6 times a day) in combination with electrolytes can help, and if you have any, feeding colostrum through this period will help to line the gut with antibodies. Antibiotics are not usually indicated as this scour is not caused by bacteria.



In the calf's third week, a watery scour coloured white, yellow or green (often with Cryptosporidiosis. If this is a constant problem, check calf hygiene and colostrum protocols. Cryptosporidiosis may be controlled by the use of a product containing halofuginone (Halocur) administered orally daily for up to one week after birth

Once a calf is over four weeks old, it will be at risk of Coccidiosis. The scour will be a brownish-green colour, quite runny and often bloody too. The calf will most likely be dehydrated, losing weight and may be straining. Cocciddiosis can be prevented by avoiding contamination of feed and water with faeces, good hygiene and the availability of fresh, clean water. Coccidiosis may be controlled by use of products that contain diclazuril or toltrazuril (Vecoxan or Tolracol).

A calf with a yellowish, custardy scour that is slightly lethargic, but has no fever has most likely got a nutritional scour. Reducing the amount of milk fed for two feeds, then steadily increasing will help; as will working more carefully and hygienically. Check the mixing of any milk powder and that it is given to calves at the same times each day.

Control of neonatal calf diarrhoea is based on four equally important aspects:

Hygiene - the calving box and early calf rearing accommodation must be cleaned and disinfected between calves. An infected box can spread pathogens to the next calf using it even if it does not look visibly contaminated. Avoid mixing young calves with older animals.

Colostrum management - Ensure all calves receive at least 10% of bodyweight as colostrum within the first 12 hours after birth. This equates to 3 litres in 6 hours, followed by another 2 litres. Subsequently calves should receive either post-colostral milk for up to 3 weeks or colostrum mixed in with normal milk to ensure an ongoing supply of antibody to protect the calves against particularly viral infection.

Dates For Your Diary

Imrestor Meeting

Wednesday 13th December

7.30pm

North Ribblesdale Rugby Club, Settle

Imrestor is a new product for dairy cows to prevent immunosuppression around calving and licensed to reduce the incidence of mastitis in the first 100 days of lactation. The evening will involve a discussion of trial results suggesting other benefits and details of the 'Imrestor Guarantee' for new users. RSVP to the practice if you wish to attend.

Annual Sheep Meeting

Monday 15th January 2018

7.30pm

North Ribblesdale Rugby Club, Settle

This year's meeting is being held in conjunction with Dugdales Nutrition and will focus on ewe nutrition and disease control during later pregnancy to reduce the risk of twin lamb disease, prolapses etc. while maximising lamb health and survival without an over reliance on antibiotic usage for rattlebelly an stiff lamb control.

Practical Lambing Course & Lamb Post Mortem Course

Both to be held in late January/ Early February. Dates and venues are to be confirmed. Please contact the surgery if you are interested in attending as places will be limited to 15 people per meeting.

Product News: Bimectin Plus Injection For Cattle

Bimectin plus is effective against adult liver fluke and worms in youngstock or adult suckler cows. Ideally treatment should be delayed until at least 10 weeks after housing so that all developing fluke will be killed.



Through bulk purchasing we are able to market the product very competitively from as little as £1 per 500kg animal. Please contact the surgery for more information.

