

FARM ANIMAL NEWSLETTER - MAY 2021 TEST DON'T GUESS!

Coccidiosis is a problem found in intensively reared lambs, occurring primarily indoors where stocking densities are high, but may also occur in lambs at pasture where there is contamination around feed troughs in creep areas during warm, wet weather. The ewe is the initial source of the infection although coccidial oocysts (eggs) can survive on pasture or in buildings from one year to the next. Coccidia are species specific therefore the coccidial species that affect cattle or poultry do not affect lambs.

Life cycle of Coccidia

- Lambs take in coccidial oocysts (eggs) by mouth
- Inside the intestines the oocysts hatch, invade the gut cells and multiply rapidly with two results— damage to the gut lining as the coccidia emerge by bursting the cells and dramatic increase in number of oocysts in the lamb's faeces.

Symptoms

Damage to the intestinal tract results in diarrhoea which may contain mucus or blood and be accompanied by:

- Straining
- Pain
- Weight loss
- Possible death of the lamb.

Even in animals that show no obvious clinical signs sub-clinical disease can lead to reduced weight gain as the gut loses its ability to absorb nutrients from food.



Clinical coccidiosis is most often seen in lambs aged 4-8 weeks old however, the knock on effects of subclinical disease such as poor growth rates may be apparent in older lambs. If you have a history of coccidiosis on the farm from previous years or are a high risk flock, it is ideal to treat lambs after they have had a chance to pick up oocysts but before they are causing significant gut damage. In this way, the coccidiosis is killed off and the lambs are left with a residual immunity without suffering consequences of the infection.

This usually entails treating lambs at 4-6 weeks of age although it is always recommended to have dung samples tested to confirm presence of infection before treatment. There are two licensed drenches available with <u>Tolracol</u> having the advantage of a persistent action for approximately 3 weeks after administration, providing a larger window over which lambs can be successfully treated.

For advice on diagnosis and treatment please contact the surgery and speak to one of our AMTRA qualified staff or farm vets. For further information on coccidiosis please visit our website at www.daleheadvetgroup.co.uk.

Remember that at this time of year lambs may have a mixed infection of Nematodirus and coccidiosis and that no single drench will treat both worms and coccidiosis.

NEMATODIRUS ALERT - HIGH RISK PERIOD

NEMOTODIRUS RISK IN YOUNG LAMBS

The Nematodirus parasite has a simple life-cycle. Adult worms which live in the intestines of sheep/lambs lay eggs that are deposited on pasture in faeces. The Nematodirus eggs will only hatch out to release infective larvae after a period of cold weather followed by warmer weather with average daily temperatures above 10°C. This can result in a massive challenge of infective larvae on pasture in the spring when young lambs, which have no resistance to the parasite, start grazing. In most years this occurs in mid to late May but <u>this year the risk is already high in this area</u>.

Acute Nematodirus infection can be a cause of sudden death but more often results in a profuse watery yellow-green scour and ill thrift. The concern is that the performance of young lambs that receive an early season check in growth due to Nematodirus may have reduced growth rates for the rest of the grazing season due to intestinal damage.

Highest risk fields are those grazed by young lambs the previous year which could harbour dangerous levels of larvae particularly if Nematodirus has been diagnosed in the past.





Points to remember include:

- Nematodirus can cause clinical symptoms in lambs before the larvae they are carrying have matured into egg laying adults, therefore faecal egg counts from scouring lambs cannot be relied on to diagnose acute Nematodirus infection.
- * Re-infection with larvae can occur rapidly if lambs are kept on the same pasture so that a second treatment may be necessary after 7-10 days.
- * Concurrent coccidiosis infection will lead to more severe disease and increase losses.
- * Nematodirus is the dose limiting parasite for many wormers therefore under-dosing is very likely to result in treatment failures.

On most farms white drenches (e.g. Tramazole or Rycoben) should remain the drug of choice for treating Nematodirus. No anthelmintics have a persistent effect against Nematodirus.

FACTS ABOUT NEMATODIRUS

- Nematodirus Battus has a unique life cycle as the larvae develop on the pasture within an egg. With most parasitic worms of sheep, eggs are passed out by infected sheep on pasture, they then undergo development into larvae within the sheep's gut once it has been ingested.
- The Nematodirus larva stage is resistant to extreme temperature and survives even harsh winters on pasture within the egg.
- Larvae will hatch in large numbers after a period of cold exposure followed by a temperature exceeding 10°C over a period of days. This is predicted to occur within the next week in your local area.
- In wet and cool conditions, the larvae can survive for months on the pasture.
- This mass hatch occurs annually on permanent pasture, but the level of disease depends on it coinciding with grazing activity of young susceptible lambs.
- The cold spring this year has resulted in a delayed hatching of the larvae.
- If lambs are 6-12 weeks old at the time of the hatch, they are likely to experience problems.
- Lambs typically become immune to the effects of Nematodirus from exposure by about 3 months old and so are less likely to be affected if they are older when the mass hatch occurs.

Signs To Watch Out For:

- Only lambs are affected by Nematodirus; ewes do not show disease.
- Sudden onset of profuse watery diarrhoea in young lambs and dirty 'back ends'
- Lambs are dull and depressed, stop sucking, and rapidly develop a gaunt appearance with obvious dehydration and condition loss
- Death from dehydration (early in an outbreak death can occur suddenly and without obvious signs of scour)



• Weight loss in the remaining lambs.

Prevention & Treatment

- If possible, move lambs to clean grazing (i.e. Pasture that has not been grazed by lambs in the previous year)
- If lambs can't be moved to clean grazing, treat all 'at risk' lambs
- Repeat treatment 2 weeks later may be required (speak to one of the vets to help make this decision)
- White (1-BZ) wormers are still the recommended treatment of choice unless other worm species are present and resistance is confirmed. We will advise you of this if you are carrying out faecal egg counts on your farm
- Some other commonly used wormers aren't as effective as white wormers against Nematodirus
- Take a Faecal Egg Count 14 days after treatment to monitor if it has been effective. This will also tell us about your coccidiosis and other worms infection level.

Other Facts To Remember

Many white drenches have cobalt in them which is a valuable supplement in lambs to maximise growth rates. We can add more cobalt to white drenches to make oral drenching as effective as possible. If necessary, on farms where growing lambs are likely to be stunted by cobalt/vitamin B12 deficiencies, we also have a long acting vitamin B12 injection which, due to its micro-encapsulation technology, lasts 3-4 months when 0.5mls is injected into young lambs. It is ideal to supplement growing lambs from 1 month of age. It costs in the region of 40p/lamb so it's an extremely cost effective and effective supplement! Ask the farm vets for details.

Carrying out a post drench test to ensure the drug is working and to check there are not any other gut worms or coccidiosis present is always worthwhile. It is very common for lambs to scour at this time of year due to cocci and Nematodirus at the same time.

Cow Comfort - Lame Cows

Last month we looked at cow comfort and how rest on comfy beds was critical for maximising yield, without a comfy bed and a well designed cubicle we see increased standing times and an increase in lameness.

Let's look at lameness in more detail:

- Approximately 25% of Dairy Cows in the UK may be experiencing some degree of lameness at any one time. This will have a big impact on yield, but also on milk contract retention; as Mobility Scoring is rapidly becoming compulsory with penalties for farms with higher levels of lameness.
- By Mobility Scoring regularly every 3 to 4 months, you can identify cows that need remedial foot trimming and either trim them yourself or get your foot trimmer in for a visit. If there are cows that are constantly lame despite trimming then it is worth identifying why and seeing what other options are available.
- Some conditions such as Toe Necrosis are almost impossible to cure as the infection sets into the bone and the claw will never heal – leading to a chronic lameness. In these situations there is an alternative to culling good cows; Toe Amputation.
- By amputating the bad claw we can get a full resolution to the problem and the cow will continue to milk and move pain free on her one toe for several more lactations.
- In the photograph (below centre) you can see a cross section of a claw that was amputated this month instead of a nice triangular bone there is a very misshapen and infected bone that would never have healed.



GRASS TETANY (STAGGERS) IN SHEEP

Well the rain has landed! But will it make the grass grow? Lets hope so!! Now is the time that we need to be on high alert for grass staggers, or to use the correct terminology, Grass Tentany. Ewes and lambs which have been grazing bare pastures but are going to be turned onto lush grass (if you have any) are at a greater risk due to this grass being low in magnesium and fibre, causing a huge change in diet.

Signs of grass tetany appear very rapidly with tremors, convulsions and rapid death.

Prevention includes ensuring ewes have a daily intake of magnesium until the animals get accustomed to the change in diet. This can be achieved by offering high mag-lick buckets, concentrates, adding magnesium to water or administering magnesium bullets.

Treatment with subcutaneous magnesium is an option but unless treated very early after onset of clinical signs treatment may be unsuccessful.

SHE'S GELD!!

For more information or advice regarding prevention or treatment, please give us a call on 01729 823538



The majority of you will have finished lambing and those of you who don't scan will have discovered who's not in lamb. During this season we have diagnosed abortions due to Enzootic abortion, Toxoplasmosis, *Staphlococcus Equorum* and Salmonella.

Blood samples can be taken from barren or aborted ewes, which can be tested for the evidence of exposure to Toxoplasmosis and Enzootic abortion.

The lab fees for processing the bloods are free of charge. For more information about abortion control in sheep please contact the surgery to speak to one of the farm vets.

LABORATORY UPDATE



We've had lambs testing positive for Nematodirus over the last week. Faecal samples from several farms have had quite high counts, particularly those that lambed in early Jan/Feb. WECs are recommended to see what other parasites are present i.e. strongyles and cocci as this would affect which product we use to treat the lambs.

Testing for fluke showed a late season at the back end, with some farms not showing any positives. It is likely most farms will have a low level of infection. Advice is to test sheep using faecal egg counts. Low levels of fluke can be hard to find, so this year we recommend sampling 20 ewes per group. An adulticide product could be used over the next month or so to clear out fluke egg and prevent pasture contamination for next season.

We wanted to let you know about some interesting cases we've had:

Pulpy Kidney

Lambs around 3 weeks of age had become lethargic and ataxic, dying rapidly within a few hours. Thick pericardial fluid was found on post mortem of the lambs; this is a common finding for Pulpy kidney. Samples from the lambs tested positive for Clostridial perfringens D, the bacterial cause for Pulpy kidney. The ewes and lambs had not been vaccinated against clostridial disease.

Lamb Dysentery

There have been both suspected and confirmed cases of Dysentery in lambs. Lambs suffered from bloody scour and again, died quickly. Post mortems showed thickened, inflamed guts. Confirmed cases had samples sent to an external lab who reported positive tests for Clostridial perfringens B from gut contents.

The confirmed cases were from a hill flock that had not used clostridial vaccines. Other suspected cases had used a clostridial vaccine in their sheep but had used them incorrectly; giving two different brands, one to booster the other; this is incompatible and lacks complete cover.

These cases show the importance of using clostridial vaccines but also why we must use them properly. A pre-lambing booster should be given to ewes 4-6 weeks before lambing. This ensures adequate levels of antibodies in colostrum in order to provide protection against clostridial disease in lambs. Lambs must get sufficient colostrum to achieve this benefit. Don't forget breeding ewes must have had a full clostridial vaccine course in order for the pre-lambing booster to work. Lambs can be given clostridial vaccines from 3 weeks of age.

Mycoplasma in Suckler calves

Calves suffering from a pneumonia outbreak which were unresponsive to oxytet antibiotics, have tested positive for Mycoplasma bovis. Look out for an article in next month's newsletter about the affects of M.bovis in dairy herds.



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