

# FARM ANIMAL NEWSLETTER - OCTOBER 2019

**INFECTIOUS BOVINE RHINOTRACHEITIS (IBR)** 



IBR is a highly contagious viral disease of cattle. The disease is spread by aerosol route (one cow breathing in virus particles which have been breathed out by another carrier or infected animal). The peak seasonal incidence of IBR therefore is after housing particularly in poorly ventilated buildings with high humidity. In previously unexposed animals, IBR can cause severe inflammation of the upper respiratory tract with coughing, inflamed runny eyes, nasal discharge, depression and loss of appetite. Affected animals can run high temperatures with a loss of milk production, impaired fertility and occasional abortions. Death is an uncommon outcome but possible in all ages of cattle.

Once an animal recovers from the infection it will carry the virus for life. These animals usually show no symptoms for the majority of the time, their immune system keeping the virus in check. However, at times when their immunity dips, the virus can be shed again. This drop in immunity is usually stress related (around calving, management changes, etc.) and at these times, carriers are capable of infecting other non-immune animals around them. In herds where a large number of cows have already been exposed to the infection (and therefore have developed immunity) the most dramatic signs are often seen in newly calved heifers and naïve cows entering the herd. These animals can run high temperatures and be off colour without necessarily showing any obvious

respiratory symptoms, while other cows may show snotty noses, have a mild cough with slight reduction in milk yield.

IBR is a viral disease and therefore antibiotics have no effect against it (just like colds and flu in humans). Non-steroidal antiinflammatory drugs may be used to rapidly reduce the high temperatures and discomfort involved and this can speed up the return to normal appetite and milk production. In severe cases antibiotics can be used to reduce the effects of secondary bacterial infections. Dairy herds which have not previously been vaccinated against IBR can have their status assessed by testing a bulk milk sample for antibody levels to the disease. This will give you an indication of the level of previous exposure and immunity in your herd and whether you are likely to have a number of animals that are capable of shedding the virus when stressed.

This initial test can be carried out free of charge courtesy of a drug company testing scheme, and should be monitored on a regular basis. The IBR status of dairy young stock and suckler herds can be assessed by testing 6-10 blood samples for antibody levels. Any vaccination programme should be tailored to individual herds. There are two main types of vaccine available: A live vaccine which can be administered into the muscle or up the nose and a killed (inactivated) vaccine which can be injected into the muscle. The initial course is a single dose for the live vaccine and two separate injections for the killed vaccine, 4 weeks apart. Boosters should be given 6 monthly or 12 monthly, depending on the vaccine used.

The most appropriate vaccine to use will depend on the management and disease status of the herd. Advice has to be based on whether the herd is closed or replacements bought in and whether the herd is naïve or has a level of previous infection. If antibody levels are high (a high level of previous infection) there will be a number of animals that are potential shedders of the virus. Vaccination in these animals will reduce the amount of virus shed.

To find out the IBR status of your herd or to discuss which vaccination programme would be the most appropriate for you, please ring us on 01729 823538 and chat to one of our farm vets.

#### SHEEP SCAB PREVENTION AND CONTROL

With many farmers buying in tups and replacement ewes or routinely treating the flock for scab (prevention) by o/p dip or injection (Cydectin, Dectomax, Ivomec) in the Autumn, it is worth considering whether the best control measures are being used.

#### CAUSES OF SHEEP SCAB

- Sheep scab is caused by the Psoroptes Ovis mite.
- The mite numbers on a sheep can double every 6 days.
- The mite can survive for 19 days off the host which is important to remember when considering how to tackle the parasite.

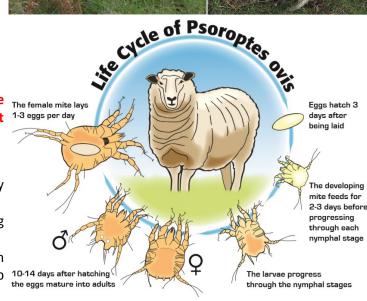
#### SHEEP SCAB DIAGNOSIS

- Easily confused with lice.
- Sheep can be infected with scab and lice at the same time.
- Veterinary examination and skin scrapes are recommended to confirm diagnosis in order to treat accordingly.

#### PREVENTION

- The risks of entry of sheep scab can be significantly reduced through good biosecurity.
- Ensure effective quarantine and treatment for incoming animals.
- Quarantined animals should be separated from the main flock until at least 2 weeks after quarantine scab <sup>10-14</sup> days after hatching treatments are given.





### SHEEP SCAB TREATMENT OPTIONS

#### **ORGANOPHOSPATE DIPS**

Single plunge dip treatment will kill off all scab mites within 2 days (treating lice as well) and its persistency prevents reinfection if sheep are returned to dirty pasture. Using an o/p dip through a sheep shower is **not** effective at controlling scab.

#### INJECTABLES

- Ivermectin (e.g. <u>Ivomec, Noromectin</u>)
  - 2 injections required, 7 days apart.
- Doramectin (Dectomax)
  - Single injection of 1ml/33kg into the muscle will treat scab. To avoid re-infection turn onto clean pasture (which has not had sheep on for at least 19 days) and avoid contact with untreated or infected and treated sheep for at least 14 days.
- Moxidectin 1% (Cydectin 1%)
  - Prevention 1 injection protects against infestation for 28 days.
  - Treatment 2 injections 10 days apart.
  - Not to be used in flocks vaccinating against footrot.
- Moxidectin 2% (Cydectin 2% LA)
  - Single injection treats scab and protects against reinfection for 60 days, therefore treated animals can be moved back onto dirty pasture.
  - **Can** be used in flocks vaccinating against footrot.

For a discussion on scab prevention/treatment options please contact the surgery.



## **ZOLVIX QUARANTINE DOSING**

When new sheep are introduced on to your holding it is important to assume they are carrying both internal and external parasites. Treatment should then be administered which ensures all parasites are eliminated before new purchases enter the existing flock. These treatments will prevent transmission of external parasites as well as pasture contamination of resistant internal parasites.



**Zolvix** is the only broad spectrum wormer with monepantel belonging to the 4-AD group, the orange class of anthelmintic. **Zolvix** is licensed to kill worms that are resistant to; white drenches (1-BZ), yellow drenches (2-LV) and clear drenches (3-ML) and kills closantel resistant Haemonchus contortus.

All farms will have a level of resistance to one if not more groups of anthelmintic, using **Zolvix** at quarantine will ensure all resistant worms are killed and no pasture contamination occurs. All sheep coming on to the farm, whether new stock bought in or the existing flock moving back from different grazing, are at risk in terms of resistant worms and should be treated on arrival to protect the farm! If replacements are reared with fat lambs with the same dosing regime these should receive a quarantine dose when they are mixed with the ewes pre tupping.

For more information or to discuss your quarantine protocol, please contact the surgery and speak to one of the farm vets or farm SQP's.

#### JOHNES DISEASE SURVEILLANCE IN SHEEP FLOCKS



A lot of effort has been put into Johnes disease control in cattle in the last few years but what a lot of people don't realise is that Johnes disease can also affect sheep, and that the disease is greatly underdiagnosed in many flocks. In sheep the condition is characterised by emaciation (wasting) but not necessarily accompanied by the chronic severe diarrhoea which is usually seen in cattle.

We have had some funding made available to us to ascertain whether flocks are carrying the infection. The test involves pooling dung samples taken from 10 thin adult ewes on a farm and testing the

pooled sample for the presence of Johnes disease organisms. The results obtained would be confidential but would contribute to a nationwide survey of how widespread the infection is.

The testing is open to flocks who breed their own replacements, will be free of charge and will only be available on a 'first come first served' basis, as the funding is only sufficient to test a limited number of flocks.

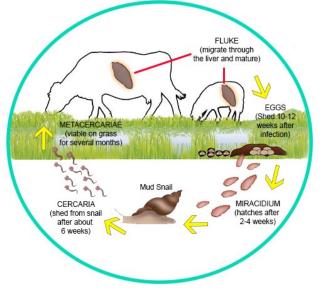
## **FLUKE UPDATE**

As many of you will be aware we have been blood sampling lambs on several monitor farms in the practice for evidence of fluke infestation to enable us to advise on the timing of flukicide treatments this Autumn.

The blood test can indicate evidence of infection with 2-3 week old immature flukes and will therefore demonstrate presence of infection approximately 8-10 weeks before eggs from adult flukes are detected in dung samples.

Up until now (30th September 2019) all results have been negative showing that on the majority of farms there have not yet been significant new fluke infections picked up this Summer.

For up to date advice on when to dose for fluke and which products would be most appropriate to use on your farm please contact the surgery.



### **BOVALTO PNEUMONIA VACCINES FOR CALVES**



**Bovalto Respi 4** and **Bovipast** are calf pneumonia vaccines which as well as protecting against the 2 most prevalent viral causes of pneumonia (PI3 and RSV) also offer protection against the most common bacterial cause of pneumonia (Mannheimia haemolytica). Vaccination programmes can be started from 2 weeks of age with 2 doses required 3 weeks apart.

With many calf pneumonia vaccination options available e.g. **Rispoval 4, Bovalto Respi 4, Bovipast, Rispoval Intranasal, Bovalto Instranasal** we suggest speaking to one of the farm vets to decide which protocol may be most appropriate for your needs.

### **FINADYNE INJECTION**



Finadyne injection was unexpectedly withdrawn in August 2018 amid concerns that one of the preservatives in the formulation was persisting longer in the tissues of treated animals than had previously been thought.

The product has now been re-launched with a different preservative and we have stocks with the same dose rate, meat and milk withhold and price as when it was previously available.

## **BVD STAMP IT OUT MEETING**

The 'BVD Stamp it Out' campaign is a national campaign which allows farmers to carry out BVD surveillance testing and draw up BVD control plans which are fully funded. The testing and health planning is open to all herds with breeding cattle even if you are already a member of a cattle health scheme (e.g. Premium Cattle Health Scheme) and/or are already carrying out testing.

We already have over 60 farms that have registered for free testing and shall be holding our next meeting on:

## Tuesday 19th November 2019 7рм - 7.30рм At North Ribblesdale Rugby Club

If you would like to attend or for more details contact the surgery.

### **MEDICINE COURSE**

As stated in our previous newsletter it is now a Red Tractor requirement for dairy farmers to have completed a 'Responsible Use of Medicine' course as part of their Farm Assurance audit. To enable you to comply with these standards we have arranged a course on

## 20TH OCTOBER 2019 7PM-7.30PM AT THE KNIGHTS TABLE, STAINFORTH PRICE £25.00

Refreshments available. Please contact the surgery to book your place.



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