



The magazine of Cambridge Vets

*treating all animals large and small*

June 2019

## Spring Seminar

We will be hosting our annual Spring Seminar on Wednesday 3rd July from 10am to 2pm in our clinic. This is a great opportunity to train new members of staff or to have a refresher course and share some of your own experiences. Free to members, lunch provided. Please book a place on 8277099.

Topics we will cover include:

- **Calving**
- **Metabolics**
- **Calf Rearing and Health**
- **Mastitis**



## Golf Day 2019

A big thank you to all our clients and staff who joined us for Golf Day in May. We were lucky with the weather and I think everyone enjoyed a good social round of golf, food and beer.



Congratulations to the winners of the Alan Bremner Memorial Shield; a team this time, Superheaded by Josh Monks, along with Jordan, Jenna and Aaron.

### Calf Dehorning—New Welfare Regulations

The new dehorning welfare regulations come into effect this year. Essentially this means local anaesthetic must be used for disbudding or dehorning animals of any age. For most of our clients who use us for dehorning, It's business as usual. However, if you want to do the dehorning yourself, we need to a certification process with you, whereby you receive training on how to administer the local etc. and are observed doing the job to a satisfactory standard. There after is a requirement for annual re-certification on-farm. An RVM authorization is issued to allow local to be held on farm. The volume of local dispensed and used is limited and must be recorded to audit.

Likewise all procedures need to be recorded.

Trial work suggests giving an anti-inflammatory as well as local is beneficial to the calves DATA, it may require a bit more planning for dehorning contractors, they need to do a similar procedure but the local is issues under VOI because the animals are not under their immediate care. Also the product can only can be purchased from the veterinary business which issues the VOI, and used within a specified area.



## **Mites in Alpacas**

We recently had an interesting case of an alpaca with weepy eyes. Rather than being a problem with his eyes per se, he was itchy all over and was rubbing his head, thus inflaming the skin around his eyes. A full examination revealed he had some thickened, scaly skin particularly around the legs, head and neck. We were worried it might be mange, so we took a skin scrape and looked at it under the microscope. It can be very hard to find mites and a negative result does not mean they are not there. To our delight, we found a mite from a fairly superficial scrape. Interestingly, it appeared to have long mouth parts and short pedicles on its legs.

So we diagnosed Chorioptes in this alpaca, which is a surface chewing mite, and it makes sense to treat it with a course of fipronil spray (and a shot of anti-inflammatories).

The crucial point here is that most mites found have been Sarcoptes, which burrows into tunnels deep within the skin. Obviously, spray won't penetrate deep enough here, so we would treat with an injectable abamectin, and the prognosis can be guarded if the mange has become extensive and chronic. The point from this lovely (and so far successful) little story, then, is to underline the importance of a definitive diagnosis to initiate the best treatment.



## **SHEEP PROLAPSE AND VITAMIN D**

A recent study in Canterbury has shown some interesting results that are being further investigated this winter/spring. Injecting ewes in midwinter with a dose of combined vitamin A,D and E [Hideject] showed a significant reduction in vaginal prolapse or bearings in the treated group. Only a small dose of 1ml per animal was used and treated ewes had only 25% of the problems with prolapses that the untreated group presented with. It is believed that it is the vitamin D that has the effect, and follows human studies which demonstrated responses to vitamin D treatment in post-menopausal women with pelvic floor prolapse.

## **CALF COLOSTRUM**

We saw quite a few outbreaks of severe diarrhea in mobs of calves last year. This is such a costly problem in terms of people's time and stress, as well as calf health of course. It is worth underlining the vital importance of colostrum. Calves need warm Gold Colostrum in adequate volumes (2-4 litres) in the first 16 hours of life. Each individual calf needs monitoring to ensure it drinks enough on arrival in the shed, otherwise it should be tube fed. Ideally, calves get collected twice a day. Dirt binds antibodies, so it is important that colostrum vats and milk buckets / feeders are all cleaned and disinfected frequently. Gold colostrum is best chosen by testing fresh cows' colostrum for protein levels using a Refractometer.

Other important things to remember are having:

- clean, dry pens with solid partitions
- regular disinfection
- hospital pens for sick calves, and
- boot disinfectant by the doors.



# Abortions In Cattle & Sheep

Abortions are a frustrating disease in herds and flocks. They can present early as embryonic loss, when an animal scanned pregnant ends up empty, or they can be an obvious slip in late gestation. A low number of these is quite normal, but if there are more than normal, then it is wise for us to take some samples. The rates of getting an answer from the lab vary from 5% to 90% but even ruling out worrying infectious disease can be worthwhile.

The most common causes of abortion have recently been analyzed from PCR results in a local lab.

For cattle: Neospora, Aspergillus, Ureaplasma, Listeria and BVD.

The fungal infections were often found after feeding mouldy hay/silage. The other thing we see is slips from grazing near *Macrocarpa*. Neospora is a protozoal parasite which passed through dog poo as part of its life cycle, but can also be passed from mother to calf. There is no treatment or vaccine. Blood sampling aborted cows will avoid carrying over Neospora cows and perpetuating the disease in the herd. BVD can also be detected in blood, but bulk milk vat monitoring is very worthwhile in dairy herds, or mob blood sampling in beef herds. Because a BVD infection caught during pregnancy can result in a PI carrier calf being born (which will then shed the virus to every thing in the province), vaccination of at-risk stock is a wise investment, especially young stock grazing away, bulls etc.

For sheep: Toxoplasma was the most common by a long way, then Helicobacter, Campylobacter, Hairy Shaker (Pestivirus), Chlamydia pecorum (not Enzootic Abortion).

Toxoplasma is a protozoan which life cycle goes through cats. Sheep may show up dry or there may be abortions, often mummified. It is important to bury these foetuses and membranes to limit spread to cats who then infect sheep. Campylobacter is a bacterium which causes abortions (not resorption) and can be spread via faeces or infected placenta. Sheep should be moved from contaminated paddocks and can be treated with antibiotics. The good news here is that we can vaccinate sheep against Toxo and Campy but it has to be before breeding. Toxo is a single vaccination for life, Campy requires 2 shots and annual boosters.

Helicobacter is an emerging disease; the bacteria commonly live in the stomach, but a small number of abortions associated with it have been documented.

Hairy Shaker disease is caused by a virus similar to BVD and can cause late return to oestrus, abortions, or even live lambs but small and hairy with tremors and jerky movements. If diagnosed, management intervention needs to be discussed as there is no treatment or vaccine.

## METABOLICS & MILK FEVER

**The cow undergoes a huge metabolic shift as she calves and comes into lactation. Her demand for energy and minerals shoots up, often faster than the diet and body can allow for.**

The classic **Milk Fever** is a deficiency in calcium. As this is required for the functioning of muscles, the cow is often wobbly, or down and unable to get up. She is recumbent, and looks all floppy, often with an S-bend in the neck. Cows are most susceptible to this at the time of calving and for a few days after; by this time the body has normally adapted through increasing the circulating levels of calcium.

**Treatment:** Is the administration of calcium, either in the vein or via an oral drench. Prevention normally consists of supplementing the herd with magnesium from a month before calving, as this is an essential catalyst for the mobilization of calcium. Options include water treatment, pasture-dusting, boluses or drenching (Moremag is a drench that lasts for 10 days).

However, magnesium can be a primary deficiency in the form of **Grass Staggers**. These cows may also be recumbent, but they tend to be twitchy, often with tremors, but care needs to be exercised as their nervous system is excitable and they are prone to charging!

**Treatment:** Is with administration of magnesium under the skin or as an oral drench. Intravenous magnesium may cause heart failure, so caution is advised to say the least! Affected animals may even start convulsing or paddling. Both Milk Fever and Grass Staggers can be fatal, and the longer the animal is down, the more mus-

The other two components of metabolic issues are **low phosphorous** and **ketosis**.



**Low phosphorous** may complicate milk fever, and the distinguishing feature is that it initiates a haemolytic anaemia leading to redwater (although there are also other causes of red urine) **Ketosis** is when the cow does not have enough energy for the demands of lactation; the body produces ketones as a short term energy source, but as these levels rise they cause her to become slow and dopey. This can be a big problem for the herd as a sub-clinical picture, leading to reduced milk yield and a gateway to follow-up diseases & reduced fertility.



*For details on supplementation & treatment, please see our website or one of our vet team.*

**In the spring time, prompt treatment and good nursing are essential.**

# Spring Product Deals

**Kelvin has put together some early bird deals on these essential spring products.**

**Bomac metabolic products:** If you buy a box of 12, you will get one flexipack free!

This includes the entire injectable range. The Bomac flexi pack **range** is proven and reliable. Get those cows up and milking. We stock the professional range of these products which includes a dose of B12 to boost appetite. Our recommended treatment for down cows after calving is a bag of the appropriate calcium in the vein followed by an oral dose once the cow can swallow well and is alert. This will help to stop these cows relapsing and keep them eating. Remember that products containing dextrose like Glucamax/Glucalphos should only be given in the vein. They are not absorbed well from under the skin.

**Oral calcium products:** We highly recommend the use of oral calcium products in conjunction with under the skin

treatments, as long as the cow has a good swallow reflex. Oral calcium products give much more calcium than putting a bag under the skin and it lasts much longer. We find it drastically reduces the number of milk fever cows that relapse. Most of these products have a burst of energy as well. We stock the following proven oral products:

**Calform Plus:** Rapid acting calcium and a shot of energy that's easy to pour. The vets choice.

**Oral Max:** 650ml bottle and 10 litre packs.

**Starter plus 200 litre:** Our proven cost effective post calving start up drench. Keep them on their feet and eating through the transition period.

**Drenching:** We recommend all heifers and lighter cows are drenched at calving. There is good research work using Eprinex, in NZ, to show on average heifers get in - calf 12.9 days earlier and cows give an extra 7.4 kg of milk solids during lactation if treated as they calve.

**Eprinex pour-on:** Buy a 5L and get 10% while stocks last

**Genesis pour-on:** Pay for a 5L and get a 5.5L

## 2019 EPRINEX CAMPAIGN

EPRINEX® has been specifically engineered to be the fastest acting, most potent broad spectrum pour-on available. Its superior protection is backed by more than 20 years of productivity benefits including increased milk productivity and improved reproductive performance that no other pour-on can match.

**FREE SUPER MINI BOOSTER PORTABLE BATTERY PACK\***


\*RECEIVE A SUPER MINI BOOSTER BATTERY PACK WITH EVERY EPRINEX® 25L PACK PURCHASED BEFORE 30/06/19

\*With additional studies: McParland, M.S., Gagnier, A.P., Dwyer, K., Fenlon, A.S., Green, S.J., Mott, A.L., Spelt, M.S. 2003. Effect of postpartum eprinomectin treatment of dairy cows on milk production. New Zealand Veterinary Journal 43(2): 105-110. Murphy, A. 1998. The effect of treatment with macrocyclic lactone on milk production in lactating dairy cows. In: Post-Weaning Nutrition Symposium, 100 World Veterinary Congress, Helsinki, pp. 1-4.

PROVIDED AVAILABLE FROM YOUR LOCAL VETERINARY CLINIC. \*Increase in milk solids/litre over a season if treated at or around calving

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**Dates:** 1<sup>st</sup> May 2019 - 30<sup>th</sup> June 2019.

1 x Super Minibooster provided with every;

- 1 x Eprinex Pour-On x 25L Herd Pack.

**RAISE THE BAR**

**Eprinex**

7.41 kgMS  
EPRINEX INCREASE

4.26 kgMS  
NEXT BEST POUR-ON INCREASE

Proven to deliver the highest return - EPRINEX® has been specifically engineered to be the fastest acting, most potent broad spectrum pour-on available. Its superior protection is backed by more than 20 years of productivity benefits including increased milk productivity and improved reproductive performance that no other pour-on can match.

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# Spring Checklist

At Cambridge Vets we have a comprehensive range of what we think are the best products in the market place, at competitive prices and with professional advice to ensure you get through this season without a hitch.

## Calving gear

- ☐ Ropes
- ☐ Chains
- ☐ Handles
- ☐ Disinfectant
- ☐ Lube
- ☐ Gloves
- ☐ Penicillin
- ☐ Oxytocin



## Metabolics

- ☐ Calcium
- ☐ Magnesium
- ☐ Oral treatments
- ☐ Ketol
- ☐ MPG
- ☐ Starter Drench
- ☐ Rumenox



## ☐ Mastitis treatment

- ☐ Intramammary
- ☐ Injectable
- ☐ Bulk Magnesium
- ☐ Molasses
- ☐ Calcium
- ☐ Salt
- ☐ Eprinex/Dectomax/Genesis/Drench



## ☐ Teatspray

- ☐ Udder Cream
- ☐ Hoof gear



## Calves

- ☐ Iodine spray
- ☐ Electrolytes
- ☐ Tags
- ☐ Feeders
- ☐ Shed disinfectant



# Welcome to all new farmers in the district!



Join us now and get your first visit fee and mileage FREE of charge!

...and membership to the Cambridge Vet Club for 1 year FREE of charge!

Membership reduces your visit fee and mileage to club rates.



Mon - Wed 8am - 7pm  
Thurs - Fri 8am - 5pm  
Sat 9am - 12:30pm  
Sun 9am - 12pm

**41 Empire Street**

827 7099  
0800 226 838

[www.cambridgevets.co.nz](http://www.cambridgevets.co.nz)





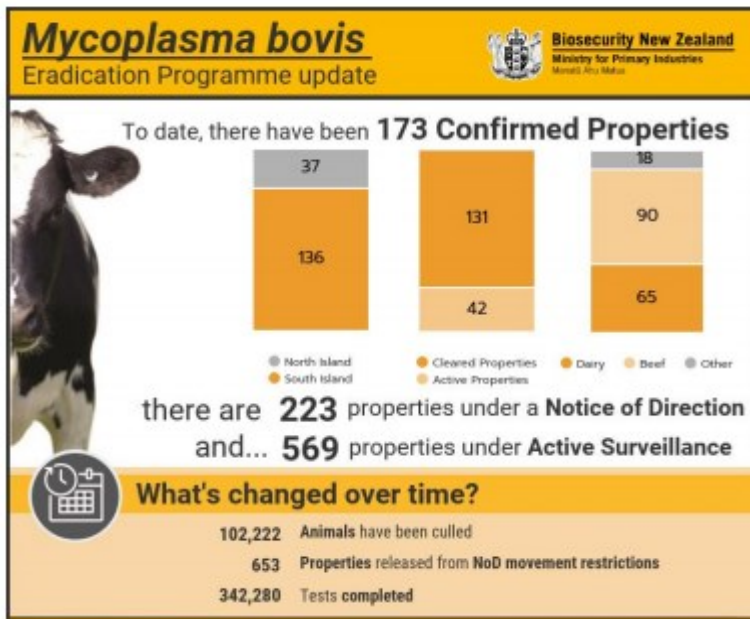
## M BOVIS UPDATE

Monthly testing of bulk tank milk will commence from July. The test will be the ELISA. Hopefully farmers will be notified of both positive and negative results this time. However, you can get false positives with this test, and a negative does not guarantee there is no M. bovis in the herd, so the idea is it is a screening test and will be practical to test the whole country every month. Reading the recent newspaper interviews, they are developing tests with improved accuracy, but it sounds like this testing will continue for some years....

I tend to listen National Radio NZ in my truck, and was interested to hear the chair of the M Bovis Advisory Group (Dr. John Roche) being interviewed. He explained why the bacteria is peculiar and how New Zealand has unique characteristics that make it difficult to detect.

"It's what we term a secondary or tertiary pathogen in that it waits for another disease or it waits for the animal to be under stress before it actually causes sickness itself. It can infect the animal and go and hide from the immune system. So when you go looking for the DNA circulating in the body, you won't always find it."

Dr Roche said there are nine different priority research areas and that better diagnostics is key. The call has gone out to scientists all over the world for research proposals looking for a way of improving current diagnostic techniques, and also to discover if there might be other tests or approaches to detect infection that should be used in the eradication response.



## MASTITIS

Spring is the time when most herds get challenged by mastitis cases and cell count spikes. It is really important to RMT your colostrum cows and make sure they do not enter the milking herd if they have mastitis or high SCC. It sometimes just takes a day or two extra for the cell count to drop after calving.

The classic Teat Spraying part of the Five Point Plan is still critical. Not only does it reduce the rate of staph aureus by killing it before it goes up the teat after milking, it has also been shown to reduce strep infections too. It is important to add emollient (e.g. glycerine) over the wet, cold months particularly. This improves teat condition and helps the natural barriers to infection to function. We all know how cracked dry hands can get infections, and it's true for teats too!

Many teat sprays have some emollient pre-mixed, so check the ingredients, as you do not want more than 10% w/v or it may interfere with the disinfectant properties.

There is evidence to suggest that the classic environmental bug *Strep uberis* (most common in spring) can become chronic and then act in a contagious manner, spreading from cow to cow via the milking plant. On the other hand, *E coli* can either cause a brief spike in SCC before the cow's immune system overcomes it, or it can progress to toxic mastitis. We advise getting milk samples cultured to find out what agent is causing mastitis, which can then be used in conjunction with data analysis and a milking visit to develop a plan of action and choose best treatments.

If taking a milk sample, use teat wipes, squirt some strips out, wipe again and then squirt a few strips into a clean pottle. Label with cow's ID, date and quarter. If dirt or skin bugs get in the sample the cultures are meaningless.

## MASTATEST

We are planning on getting a machine for testing antibiotic sensitivity. This will be run on individual milk samples in our clinic lab. It will be used hand in hand with our traditional culture plates as these still detect a wider range of bugs, and it is probably unnecessary to test every single bacterium for resistance! However, it will allow us to test for the best type of treatment at any time of the year so we can improve treatment results, minimize antimicrobial resistance and avoid wasting money on drugs that are not working. We envision this will be particularly useful if you are getting a frustrating number of cases, or treatment failures, and pre-dry off. Watch this space....

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