

FARM FIRST VETS NEWSLETTER <<<



SEPTEMBER 2024

SHEEP LAMENESS

Lameness is a major concern in the sheep industry. As it is a painful condition, it presents a welfare issue which subsequently has a knock-on effect on the productivity of the flock, as well as accounting for much of the antibiotic usage in sheep flocks. With concern about antibiotic resistance there is a drive to reduce reliance on antibiotics in both human and veterinary medicine.

Most cases of lameness in sheep are caused by infectious disease, typically one of three bacterial diseases: Footrot, Scald or Contagious Ovine Digital Dermatitis (CODD). For this reason, treatment of affected animals with antibiotics is both appropriate, and necessary. However, other control measures should be implemented in conjunction, to reduce case numbers and therefore the number of animals requiring antibiotic treatment.

The Five Point Plan is a multifaceted approach to sheep lameness control that has been applied in the industry for a number of years. This focuses on five key areas to try and reduce spread of the bacteria which cause disease and increase the sheep's resilience to these infections.

The key areas are:

- **Treatment** for this to be most effective, the correct treatment should be given promptly. In order to administer or apply the correct treatment, it is important to ensure the diagnosis is correct. If there is any uncertainty with this then seek advice from a veterinary professional. Treatment should ideally be given within 3 days to limit spread and reduce recovery time.
- **Isolation** and environmental control this will reduce the spread of bacteria from affected animals to healthy ones. Following treatment lame sheep should be kept separate from sound sheep until the lameness is resolved. Reducing poaching and applying disinfectants to high traffic areas can also limit spread.



- Culling some animals will become chronically infected and will be repeatedly lame. Animals treated more than three times in a year should be removed from the flock as they will act as a constant source of infection for others. These chronically affected ewes are likely to be less productive, rearing smaller lambs who are more likely to become lame themselves. Record-keeping is helpful to avoid retaining daughters from these sheep.
- Vaccination the use of the footrot vaccine, Footvax, has been shown to reduce spread in the flock and reduce healing time of lame sheep due to improved immunity. A vaccination protocol can be tailored to individual flocks.
- Quarantine avoiding introducing new strains of bacteria by effectively quarantining any bought in sheep will help to avoid lameness outbreaks. This is especially important if CODD is not present in the flock but given there are large numbers of different strains of the Footrot bacteria, it is also important to avoid introducing novel strains into the flock. Keeping bought-in animals isolated from the main flock for a minimum of 3 weeks allows time to monitor for lameness and treat any affected animals that may occur.

The period between weaning and tupping is the ideal time to get on top of a lameness issue in the breeding flock. Whilst ewes are dry it can be easier to manage smaller groups for isolation. It is also a good time to identify chronically affected ewes that should not be bred from and ensures ewes are sound which will help them regain condition ahead of tupping. To help with this we will be offering a Sheep Lameness Package where we examine a group of lame sheep to get a diagnosis and come up with a bespoke treatment plan for your flock. The cost of this will be £95+ VAT (not including visit). We can either come out to the farm or examine the sheep at the surgery. Farming Connect funding could be used by farms in Wales to get 70% funding for this work.





Potential increased risk of exposure to ergot and fusarium from grain

AHDB have issued a warning that there is likely to be an increased risk of grain contamination with ergot and fusarium resulting from the wetter than average growing period for crops in the UK. Grain merchants and agronomists have also suggested that this is the case. AHDB have urged farmers to familiarise themselves with the clinical signs of ergotism and fusarium toxicity.

Ergot causes vasoconstriction of the peripheral blood vessels resulting in tail-end and ear-tip loss, and lower limb and hoof tissue damage and sloughing. Lameness, weight loss, and neurological signs may also be exhibited. Fusariotoxins can cause gastrointestinal tract lesions, oedema, and general malaise.

The information on the AHDB website can be found at this link:

Farmers warned of potential risk to livestock posed by fusarium and ergot in grain | AHDB

Information on mycotoxicosis can be found on the WOAH information note at this link: mycotoxicosis.pdf (woah.org)

ALTERNATIVE ANTIOBIOTIC DRY COW PRODUCT

When we come to the end of our Cepravin supplies, we will be switching to Cepritect which is pharmacologically identical to Cepravin. It comes in larger 120 tube packs which is enough for 30 cows, or we can split packs into smaller numbers to enable use in smaller herds or where very few antibiotics are used.

Please speak to your routine vet for advice on how to reduce antibiotic use at drying off.



Johne's Disease Testing after TB tests

Recent research has shown that in cows that were classified as "infected" (J5 cows with multiple positive results), the Johne's Disease milk antibody test results were immediately increased after the bTB skin test, resulting in an increased likelihood that the animal would test positive. The theory is that the bTB skin test boosts the immune response to the Map resulting in the increased production of

antibodies, picked up in the blood or milk test. However, for "non-infected" cows, there was also an increase in the Johne's Disease milk antibody test results – although this was delayed until 2-4weeks after the bTB skin test. This unfortunately increases the likelihood of "false positive" test results in non-infected cows. Overall, the current recommendations remain unchanged. The bTB skin test does affect the Johne's Disease milk and blood antibody test results, and you should ideally leave a minimum interval of 42 days (milk test) and 90 days (blood test) between the bTB skin test and Johne's Disease testing.

EU Declaration and Medicine Review Visits

Many farms are nearing the time for their annual EU Declaration and Medicine Review. Farms booked in on the same day and grouped in the same area will have a discounted travel charge, so please liase with your neighbours to save money. Declarations can also be combined with other work such as sheep lameness examinations and TB tests but we will need to see all the food-producing species present on the farm at the visit.

STAFF NEWS

We are delighted that our Office Manager Natalie gave birth to a baby boy William Spencer Barrell on 17th August.

Both mother and baby are doing well and we are looking forward to meeting him very soon.

UPCOMING EVENTS

Tuesday 17th September 4pm - FARMING CONNECT FARM WALK - TY COCH

- The impact of colostrum quality on lamb performance Hillary Jones, Farm First Vets
- Options for Undersowing Maize and Alternative cover cropping Juliet Anderson
- Growing and Finishing Beef using Homegrown Crops Hefin Richards, Rumenation
- Soil Carbon Analysis Non Williams, Farming Connect

Venue: Ty Coch, Brynbuga, Usk, NP15 1PL

Please book through the Farming Connect website or contact Elin Haf Williams: 07985379890

Thursday 17th October - CATTLE BEHAVIOUR AND IMPROVING SAFETY AND HANDLING OF CATTLE ON FARM - on Farm Workshop with Miriam Parker, Livestockwise Ltd.

Venue: Clytha Farm Partnership, Cwm Farm, Bettws Newydd, Usk NP15 1JT Sponsored by Farming Connect, further details to follow. Please phone the office to book.

USK SHOW SATURDAY 14TH SEPTEMBER

Please come and see us at Usk Show for a chat and to enjoy a refreshment from our local suppliers.
We will be at stand E55 opposite the cattle rings.

