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JANUARY 2010

FARM NEWSLETTER

SHEEP

LAMBING LISTS AND READY FOR LAMBING!

We are heading into lambing season soon and it is time for a few last minute reminders. The lambing list is up and running and available both from the farm shop and from our website www.hooknortonvets.co.uk. Please telephone, post or fax your order at least 24 hours in advance of your preferred date of collection. Payment on collection yields a 5% discount.

We advise having antibiotics ready for poorly sheep and bad lambings and we are happy to recommend which ones are appropriate to your farm. Long acting Penicillin and Tetracyclines (**Betamox LA and Tetroxyl LA**) are good universal broad spectrum drugs to have available. **Oxycomplex** or **Hexasol LA** are excellent products containing the antibiotic **Oxytetracycline** and anti-inflammatory **Finadyne**. These should be given to any

ewe that has suffered difficulty lambing or seems off colour e.g. Mastitis. Don't forget to stock up on **Calciject No6**, glucose and **ketol drench** for metabolic problems pre-lambing.

ASSISTING WITH LAMBINGS

Please do not hesitate to bring any difficult lambings up to the surgery for some assistance but make sure you ring first for an appointment. There will be no visit fee and we have a heated lambing room ideal for carrying out caesareans if needed in a clean environment (and therefore a good chance of success!). If the ewe is brought to us early before too many attempts to lamb have taken place, we tend to have good results – healthy ewes and live lambs.

HEPTAVAC P PLUS

Don't forget the importance of vaccinating for Clostridial disease before lambing. The **Heptavac P plus** (or **Ovivac P**) boosters (for Clostridial diseases and Pasteurella) are due 4-6 weeks before lambing, and must be given early to ensure maternal antibodies are passed onto lambs in the colostrum. Forgetting these boosters could lead to many problems post lambing and high levels of mortality! It provides essential protection from causes of sudden death and pneumonia in the first 3 months of life.

If ewes have not been vaccinated at all they will need two vaccinations 4-6 weeks apart, but

the final one must still be given a minimum of ONE MONTH before lambing begins. We advise giving a dose of wormer +/- Flukicide at the time of vaccination.

BARREN EWES CHECK AND ABORTIONS

For those of you that have had ewes scanned, if you had more than 3% of the flock barren, it may be worth considering the **Barren Ewe Check Scheme 2010**. This is a free blood testing scheme to test for Toxoplasmosis (one major cause of abortion and infertility in sheep). It may be worth testing for other things also, but this is one test that is not only free but if it shows a positive result – there is a good vaccination which can be used to prevent problems occurring again! The only charge will be that of the vet taking the blood, especially if sheep are brought to the surgery when there will be no visit charged. Samples should be taken from 6-8 barren ewes.

If you experience more than 3% abortions in the flock please consider taking a lamb AND its placenta to the VLA in Luddington. If we can identify a cause there is more chance of us providing you with the correct antibiotic or vaccination to benefit the rest of the flock.

CATTLE

TOXIC MASTITIS

Unfortunately we are seeing more cases of E.coli toxic mastitis at the moment, probably due to wet conditions and housing. Symptoms include a sick or down

cow with mastitis (ALWAYS check the udder of your poorly cows!) which often will have a high temperature and be dehydrated. Sometimes the condition is so rapid in onset the udder may not appear mastitic externally so do not rule this disease out if the udder looks ok. Rapid treatment is needed as this can often be fatal. The cow will need an intravenous injection of antibiotic and anti-inflammatory. We like to use **Advocin A180** and **Finadyne**. The cow will also need treating with fluids so if you have an Aggers Pump they will benefit greatly from **Restore** and **Glycerol** in WARM water (very important under the current climatic conditions!). One additional treatment sometimes overlooked is calcium. E.coli is a crafty bacterium that can steal calcium from the blood stream, and the cow ends up with both toxic mastitis and milk fever. Therefore toxic mastitis cows could benefit from **calcium** under the skin - especially if they are recumbent.

If you think you have a cow with this condition please call us as soon as possible so that we can come and administer the correct treatment.

SCOURING CALVES

Young calves that start to scour badly need to be treated promptly as they are at risk of severe dehydration. The most likely causes are viruses such as Rotavirus and Coronavirus or infection with cryptosporidium. We now have a comprehensive laboratory test that can be used to determine the cause so if you think you are having a problem with scours in young calves we would recommend collecting faeces in a sample pot that can be collected from the Surgery and checked out in the Surgery

lab within 24 hours. Ascertaining the cause will help us give the right treatment and may point to ways of prevention i.e. vaccination or improved hygiene.

A 60kg calf needs 6-8 Litres of fluid spread out throughout the day to prevent dehydration. This should be given either in the form of drenches or tubing depending on the health of the calf. Rehydration remedies are very helpful. We currently favour **Rehydion gel** which is an excellent electrolyte product which can be mixed with milk to feed to young calves. It should be given twice daily for 2 days to ensure the calf remains rehydrated.

Antibiotics should be given and we routinely give **Combiclav** and also **Metacam** as an anti-inflammatory to speed up recovery. **Synulox** boluses given twice daily are useful covering the period of severe scouring and should be given every day until twelve hours after the scouring has stopped. If the problem is severe it should always be combined with an Injectable drug.

UNEXPLAINED DEATHS IN CATTLE

Sudden death in cattle i.e. animals found dead without any outward clinical signs can occur. These cases should always be reported to DEFRA enabling an investigation to be carried out for **Anthrax**. Once this has been confirmed negative then disposal can be carried out. Common causes of sudden deaths include **Clostridial disease**. These bacteria are found in the soil, water and also in the carcase. Liver fluke,

injuries or wounds and certain high risk pastures (recently dug ditches or soil moved onto land) can trigger the disease, and invariably it is the best fastest growing animals that tend to be affected.

If Post-Mortem identifies Clostridial disease as the cause of death, vaccination using **Bravoxin 10** is the best preventative measure for the rest of the group. With the current value of the stock we would recommend ALL growing cattle are given a double-dose of Bravoxin 10 clostridial vaccine after weaning.

