

CLUTHA VETS SHEEP & BEEF FARMER NEWSLETTER



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Clinic News

Annie Jackson

And wow, is it wet? Speaking to a few of our farmers round here, this end of Winter has become historically wet. It hasn't been so much the storms that have come through, but the continual rain with very little draining / drying afterwards. We are really looking forward to some sun to dry things up and give everyone a much needed boost, especially the animals—even the daffodils are getting waterlogged as they push their way up!

The Spring dairy season is already well underway with calvings coming in thick and fast! This year we are well vet staffed, and this is the season we all enjoy. As Sid Taylor once said to me years ago when the hair was less grey... "this is the time when you really feel like a vet, and you truly can make a difference".

Gemma Johnson, who has been teching for us over the last year, was recently accepted into vet school. Although sorry to see her go, we are happy to see her pursuing her aim knowing the practical experience she gained with us, along with her dairying background, will be a definite advantage for her. Gemma's replacement, Ashley Geraerts, will be starting with us very shortly in Milton. Although the techs are more involved in the dairy work, they are often involved with sheep faecal egg counting in the background, something with the increased awareness of drench resistance we have been doing plenty of lately.

A couple of our younger vets and support staff have taken the opportunity to explore more of the world over the winter period, and we are very happy to have them coming back full of enthusiasm for a busy Spring. This will be the first time in a couple of years when we feel we have a full team of vets ready to tackle whatever comes their way, and on a lovely Spring day with the daffodils and sunshine there is not a better job to have....

Here's looking forward to that sunshine eventuating for us all!

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Metabolic Disease in Ewes

By Sam Looney

There are two main metabolic disorders in sheep that are of concern during late pregnancy—ketosis and milk fever. If you're on a sheep and beef farm you've probably already come across them.

Ketosis

This disorder has many different names dependent on where you are in the country/world, but usually known as “pregnancy toxemia”, “sleepy sickness” or “twin lamb disease”. It is commonly seen in multiple bearing ewes in late pregnancy and early lactation

It happens due to an inability to meet the body's glucose requirements. The ewe attempts to fix this by the mobilisation of fat stores, which directly affects the liver (fatty liver) and produces ketones which are toxic to the brain. These changes result in the ewe being dull, off feed, showing nervous signs, eventually becoming recumbent and, ultimately, dying.

Signs of ketosis include:

- Separation from flock, reluctance to move, weakness
- Wool plucks out easily
- Neurological signs such as apparent blindness, aimless wandering
- Becoming recumbent, unnatural sitting position and twitching

Milk fever

This disorder, also known as hypocalcaemia, occurs when there is a disruption to the complex interaction between dietary intake of calcium and the absorption/resorption of calcium from the bone, resulting in an inability to meet the increasing calcium requirements of the growing foetus(es), and udder development. A dietary imbalance of calcium and phosphorus can also be to blame, which can be induced by feeding diets of cereals, (such as green fed oats) or plantain.

Signs of milk fever include:

- History of a recent diet change
- Separation from flock, reluctance to move, weakness
- Dilated pupils, reduced “blink” reflex
- Bloating
- Floppy muscles; “S” bend in neck
- Becoming recumbent, often quite bright initially, but eventually becoming comatose

Treatment of affected ewes

Not all these symptoms will be evident in all cases, and affected ewes are often suffering from a combination of the two disease processes. So treatment should aim to address both conditions.

Give 60-90ml Ketol (propylene glycol), or a similar energy-containing drench, as well as about 100 to 150ml of Glucalpos (the “brown” metabolic bag). This should be warmed first and is usually given under the skin in a couple of sites over the ribs. However it does work a lot faster if given slowly into the jugular vein. We are happy to show you how to do this next time we are out on farm.

Treatment also includes managing dehydration and maintaining appetite, and so offering some water and food (eg baleage) can also improve the success.

Ewes in advanced stages of metabolic disorders, especially ketosis/sleepy sickness, are unlikely to respond to treatment so euthanasing the more severe cases and focusing your attention on those in the early stages is not only kinder for the animals concerned, but is also a better use of your time and resources.

Prevention of metabolic diseases

The incidence of these conditions may typically be 10% or more of twin and triplet bearing ewes, but often at a subclinical level, meaning that affected ewes may not necessarily have obvious signs. Nonetheless, the effects can still be significant in terms of poorer mothering ability, poor colostrum quality and quantity, and reduced milk production. The end result therefore, will be reduced lamb survival and reduced pre-weaning lamb growth rates.

Preventing these disorders is largely about reducing the risk factors, which include:

- Multiple bearing ewes particularly older ewes in late pregnancy, or early lactation being held off feed for >18hrs for yarding events
- Underfeeding in late pregnancy
- Sudden changes of diet close to lambing
- Feeding diets with calcium/phosphorus imbalances close to lambing
- Concurrent diseases, such as heavy worm burdens or lameness
- Light body condition
- Inclement weather with inadequate shelter

Growing Interest in Pain Relief at Tailing Time

By Alisa McDonald

Some of you may be aware that suppliers to The New Zealand Merino Company (ZQ Wool), which includes some crossbred wool growers in our region, have been told that, in order to continue to supply the company, they must provide pain relief to sheep for painful procedures such as tailing and castration. This is to meet market demand for ethical production and is being phased in over the next two years.

We are not aware that any regulations around compulsory usage of pain relief are imminent, but as time goes on it is likely that other wool, as well as meat, companies may take a similar stance to satisfy customer demands, at least for some of their markets. There are some farmers who, of their own accord, have chosen to go down this route.

Benefits of pain relief

So why give pain relief at tailing and castration time?

Pain relief at the time of docking was shown to lead to increased survival rates (1 – 1.6%) in a Massey University study. This is likely due to the fact that instead of writhing in pain on the ground, lambs are up and back with mum quicker. The quicker that lambs find mum, the less chance of being mis-mothered. Lambs also take less of a tailing check, as they are back eating and drinking again quicker.

As mentioned some of our farms are using pain relief for tailing already; most of you gents would have to agree that having a rubber ring put on your testicles would be considered painful!

Pain relief options

There are several options available, with variation in cost and practicalities.

Injectable local anaesthetic

An injection of a small amount of local anaesthetic at the base of the tail, and also into the scrotum when castrating ram lambs, can provide good pain relief about 2-3 minutes after injection. You can either use the Numnuts system, which includes a specially designed rubber ring applicator that gives a dose of local anaesthetic at the time of ring application, or use a flexi-pack of local connected to a conventional vaccinator gun.

Topical local anaesthetic

Tri-Solfen is a local anaesthetic in the form of a gel spray which can be applied to open wounds (ie after docking with a hot iron). It provides pain relief for up to eight hours, thanks to a formulation containing both short and long acting types of local anaesthetic. It also contains an antiseptic agent.

Injectable anti-inflammatories

Meloxicam is a non-steroidal anti inflammatory that can be injected subcutaneously as the lamb comes into the tailing chute. It takes a bit longer than local anaesthetic to kick in, but lasts a lot longer, providing 50 hours of pain relief. It is sold under several brand names, including Metacam

Topical anti-inflammatories

Meloxicam is also available as a topical gel called Buccalgescic. It is given into the cheek pouch, and takes effect within 15 minutes.

The NZ Merino Company said in a recent webinar that they would not be prescriptive about what type of pain relief their suppliers should use. So a discussion with your vet about what is most practical for your farming operation is a good plan if you are impacted by their requirements

All of the above options are classified as restricted veterinary medicines (RVMs) so, if you are considering using pain relief in your lambs at tailing, and are due for your annual RVM consult, we can discuss them with you at the time. If opting to use injectable local anaesthetic we are happy to pop out to train and sign off you and your staff in its use for tailing.



Animal Health Reminders

Pre-lamb treatments to improve lamb survival

Have you got all your bases covered when it comes to maximising new born lamb survival? Deficiencies of iodine, selenium and Vitamin E can all lead to the birth of weak lambs that lack the vigour and drive to get to their feet and have that all-important first feed. For iodine and vitamin E, the risk of deficiency is greater for ewes wintered on kale or swedes. There is a range of options for topping up your ewes' reserves of these important nutrients; have a chat to one of our team to work out the best approach for you.

Do your cattle or deer need their copper reserves topped up?

Cattle and deer have high copper requirements which are not always met by what's in the pasture. And the situation is often worse over winter as the soil ingested with winter crops, or when break fed on grass, often contains high levels of iron which interferes with the animal's ability to absorb copper from their diet. Cattle and deer, wintered on crop, that were not copper supplemented before the winter are very likely to need a top up coming into the spring.

Protecting your lambs against clostridial diseases

Reducing the incidence of diseases such as tetanus, pulpy kidney and the nastier forms of navel infection in your lambs used to be simple; give their mums a shot of "5 in 1" before lambing and you'll be right! Now there are more considerations including a wide range of products and different vaccination timing options for the lambs themselves. Give us a call if you'd like to learn more.

Pre-Lamb Drench Options for Your Ewes

As is always the case at this time of year, a lot of discussions we are having with our sheep farmer clients have centered around pre-lambing worm management options for your ewes and pregnant hoggets. The unavailability of Bionic Plus has added another layer of complexity to these discussions.

As with most animal health issues, when it comes to offsetting the effects of internal parasitism, there is nothing better than having your ewes in good body condition and feeding them well during late pregnancy and lactation. However we are dealing with nature and so it is very rare for everything to line up perfectly; chances are there will be a portion of your flock that may benefit from a little assistance on the worm control front.

You may find the following table helpful when reviewing the options and deciding on your plan of attack. Please note:

- The prices listed are designed as a guide only, as the exact price will depend on factors such as which brand and pack size you choose and the estimated weight of your ewes. The prices include your vet club member discount and are exclusive of GST
- The persistent activity listed is for Ostertagia, the most important worm in ewes in the spring.

Product	Persistent Activity	Dose Rate	Meat WHP	Approx cost 75kg ewe
Long acting injection eg Cydectin LA	112 days	1ml/20kg	91 days	\$2.30
Medium acting injection eg Cydectin Inj	35 days	1ml/50 kg	28 days	\$0.85
Medium acting injection + vaccine; Eweguard B12 + Se	35 days	1ml/25 kg	49 days	\$2.40
Oral drench (triple) eg Boss Triple	None	1ml/5kg	14 days	\$0.40

For a more detailed consideration of the options available, their pros and cons, and specific prices and deals (eg delayed charging options) please call in for a chat or phone one of our technical field reps:

- Roly (027) 643 5813
- Lisa (021) 262 0387

How Did Your Scanning Go?

By Hamish Moore

With ewe scanning well under way we have been fielding a number of enquires around scanning percentages. This year there seems to be a big variation in scanning results with reports of some very good results up around the 200 percent, while others have really struggled with results down below 150%.

We have conducted several investigations into poor scanning percentages +/- high dry rates. Several properties have had very poor results in their two-tooths.

It is not always easy to identify the cause of these poor results several months after the fact, but I think it is always a worthwhile process to go through so you can plan to avoid the same issues going forward.

Poor scanning results can be caused by a number of different factors and so each case needs to be looked at separately and investigated properly.

One thing we have identified in a number of the properties with poor two tooth results is very low liveweights in either the whole mob or a large tail end of the mob. We know that there is a direct correlation between liveweight at mating and scanning percentage, and so poorly grown animals will always have a reduced scanning result.

Other causes of poor scanning results are low condition score at scanning or ewes that lost weight over scanning, low trace element levels at scanning, high worm burdens, and stressors over the mating period such as shearing.

There are also ram factors that can reduce scanning percentage and increase dry rates. The recommended ram to ewe ratio is 1:100 for mixed aged ewes, 1:80 for two tooth and 1:50 for hoggets. A higher ram to two-tooth/hogget ratio is required as these animals do not seek out the ram when they are on heat like the mixed aged ewes do. Ensuring that the rams are not lame, have two working testicles and are in good condition to do the job is important as if one or two rams are not up to the job it increases the ewe to ram ratio and the likelihood of a poor result.

If you are unhappy with your scanning result please give us a call. We have a number of vets who love investigating this sort of thing to get to the bottom of the problem and help make improvements for next year.

Anti-inflammatories for Ewes

By Andrew Roe

As our dairy farming clients know, the use of anti-inflammatories can hugely improve the success of treating a range of diseases and disorders in their stock. From difficult calvings to mastitis, and even scours in calves, an anti-inflammatory drug is often the first thing a farmer will reach for, either in combination with antibiotics or, as is often the case now, instead of them.

We know, for example, that reducing pain and inflammation after a hard calving, will help a heifer to bounce back quickly, maintain her appetite and suffer less of a check in milk production. For pretty much all calvings that our vets get called out to do, the cow or heifer will receive an injection of an anti-inflammatory before or after the procedure.

So if these drugs have a role in cattle, can they be helpful for sheep? The answer is most definitely "yes"! A number of our sheep farmers have recently started using meloxicam, a long acting anti-inflammatory, in their ewes during spring and have reported good results. The most common use is for treating bearings, but some have used it following difficult lambings as well, especially in hoggets.

In a recent conversation I had with one client, he explained that he normally expected to save about fifty percent of his bearing ewes. Last season, when he tried Meloxicam, fifteen out of nineteen survived. The likely explanation is that by reducing the swelling of the affected tissue, as well as the pain and irritation, ewes are less likely to keep straining and risk pushing the bearing back out after it has been replaced. Also, by masking the discomfort, they are more likely to maintain their appetite, reducing the risk of sleepy sickness and milk fever.

And following a difficult lambing, an anti-inflammatory injection can ensure the ewe gets up and about quicker, shows more interest in her lambs and, by maintaining her appetite, milks to her potential.

When it comes to bearings and lambings (especially rotten ones), anti-inflammatories are not a substitute for antibiotics. We encourage you to continue to use these the same way as you already do. Most farmers will agree that since they started using penicillin to their bearing ewes the survival rate significantly improved. Using an anti-inflammatory in addition can not only improve the survival rate even further, but can also improve the chances of the ewes concerned going on to deliver and rear their lambs.

Please have a chat to your vet if keen to give the product a go this lambing season.

RVM Consultations

The next two or three months is a time on most sheep and beef farms where a number of restricted veterinary medicines (RVMs) are commonly used. Examples include:

- Antibiotics: injectable penicillin, oral antibiotics, mastitis treatments as well as topical formulations such as antibiotic aerosol sprays and pinkeye powder
- Vaccines: scabby mouth vaccine and some of the clostridial vaccines ("8 in 1" and "10 in 1")
- Some trace elements; eg copper injections and boluses
- Anti-inflammatory injections

As you will be aware, we are not permitted to sell RVMs without a veterinary consultation. For most farmers, who are likely to use a number of these products, the most efficient way to meet this requirement is to have an RVM consultation where we discuss your anticipated requirements for the next 12 months, and authorise them in advance.

If you are due for an RVM consult, it is a good idea to call in soon before things get busy in the spring.

BVD Vaccine Special Offer

In last month's newsletter we introduced our BVD vaccine promotion. It has generated quite a bit of interest and we would like to remind you that it is still running.

As part of a push to get on top of this widespread problem, Clutha Vets are currently offering a generous incentive—a discount of 20% off the cost of Bovilis BVD vaccine to all vet club members. If keen to take up this offer, please get in quick as it expires once current vaccine stocks run out.

The BVD virus has been shown to be present on the majority of sheep and beef farms in New Zealand, and our area is no exception. Over the last couple of years a number of our clients experienced poorer than expected pregnancy scanning results in their cattle, thanks to the introduction of the BVD virus into their herd.

Previously unvaccinated heifers and cows require two injections in the first year, with the second one given at least four weeks before the bulls go out. Annual boosters are given thereafter. And don't forget to do the bulls themselves!

Retail Ramblings: Spring Promos

Cydectin Injection and Ultravac 5 in 1—WIN

Go in the draw for 5 chances to Win—\$1000 for your local Sports Club as well as a World Cup Rugby Top for yourself!

Cattle Pour-Ons:

- Get an All Blacks bag with Eprinex 5ltr
- Get 2.5ltr FREE with every 25ltr Eprinex

Sheep Oral Drenches

- Matrix is back! And a free shirt on every drum!
- A collector's tea towel comes with every Triplemax 20ltr.

Black Hawk Dog Food:

Get a pair of work socks with every 2 bags of Black Hawk Working Dog

Your Vets

Balclutha Clinic

Jason Darwen	BVSc
Rob Mills	BVSc
Hamish Moore	BVSc
Catherine Copland	BVM&S
Peter Heslip	BVSc, MVM
Steven Butler	BVSc, PGDipVSc
Andrew Roe	BVSc, MANZCVS
David Exton	BVSc
Eckard Abrie	BVSc
Sam Lewis	BVSc, MSc MANZCVS
Darius Tan	BVSc
Anneke Muller	BVSc
Wing Szeto	BVSc
Dana Marais	BVSc

Milton and Lawrence Clinics

Sid Taylor	BVSc, MANZCVS
Annie Jackson	BVSc
Martha O'Connor	MVB
Bevan Topham	BVSc
Anna Burrell	BVSc
Sam Howarth	BVSc
Alisa McDonald	BVSc
Sam Looney	BVSc
Emma Shaw	BVSc