

Several milk buyers have subscribed to the NJMP (Arla, First Milk, Meadow Foods, Yew Tree Dairy and others) which requires all suppliers to have established their Johnes status and have a suitable health plan in place by October 31st 2018. Even if you do not supply one of these milk buyers, we would strongly recommend you establish your current Johnes status if testing has not been carried out recently.

Jasmine Smith

Sheep Abortion Vaccines

Please place your orders ASAP as we are now in peak season for Toxovax and supplies of Cevac are limited. Enzootic abortion supplies are limited this year – we have protected supply of vaccine specifically for XL Vets practices but this will not last for ever.

Huge Success

Thanks to everyone who made it along to our farmers bbq. We managed to raise a massive £700 for charity and had a great night socialising with you guys.



Mastering Medicines (approved as a Safe Use of Vet Meds course for Red Tractor Assured Farms)

The workshop aims to increase trainees' knowledge of safety and good practice as well as outlining the legislative requirements for on farm medicines use. The course also aims to increase trainees' understanding about the different types of medicines used and how these relate to the common diseases relevant to their farms.

Thurs 6th September, 1-3.30pm (lunch included).
Westmorland Vets, Kendal.

Cost—£35

To book your place please tel 01539 722692



At last the rain has come and a “second spring” is upon us, judging by the vibrant colour of the grass! Maybe there might be three months’ worth of rain in one month, though? This rapid growth of lush grass with low fibre has thrown up a few health problems for dairy cows, though. Mostly this has been through an upsurge in metabolic disease, commonly resulting in left-displaced abomasums (LDAs). These are usually very successfully corrected with prompt surgery, and a rewarding operation to do, as uncomplicated cases often recover very quickly. However, very occasionally they can recur in the same cow, often several lactations later. When the surgery is repeated, the adhesion achieved successfully from the previous surgery is still in place, with the fat used as the anchor point remodelling and stretching over the years. Also, as a result of dilation during the original episode, the muscular wall of the abomasum can be overstretched and therefore be more lax and floppy than it was originally. It’s nearly always worth re-operating on these cows as there is a very high reward from doing the surgery- i.e. converting a cull cow into a productive cow.

The rapid grass growth has also thrown up a couple of cases of hypomagnesaemia (grass staggers), due to insufficient magnesium being eaten by the cow to support her needs, namely the increase in magnesium used in her milk production. These are true emergencies, with suckler cows faring better than dairy cows on average.

We have seen a few cows struggling for energy, evidenced by reduction in the protein content of milk and the reduction or absence of cows seen showing natural heats. This may be caused by a reduction in the dry matter content of grass where grazing forms the majority of their diet, and the cow struggling to eat enough volume in the day. Buffer feeding is usually the way forward. However, with forage stocks still uncertain it may be best to take advice from us in conjunction with your nutritionist on the best way forward.

Oh, and keep an ear out for an increase in coughing animals at grass- as it’s getting to be lungworm season!

Richard Knight

Westmorland County Show

Come along and see us on stand G265.
There’ll be a piece of cake and drink waiting for you.



**WESTMORLAND
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Johnes Disease

What is it?

It is a contagious disease of the small intestine caused by *Mycobacterium Avium* (MAP) affecting mainly cattle but also sheep. The bacterium causes severe thickening of the intestinal wall which prevents absorption of nutrients leading to the classic clinical signs of scour and wasting. The disease takes a long time to cause outward signs that we can see, hence it is only seen in adult cattle. There is no treatment or cure for the disease.

If it only affects the odd cow why should we be bothered?

For every cow that shows signs of Johnes i.e. scouring and wasting you can expect 10-20 more to be subclinically infected. Some of these may go on to become clinical Johnes cases but most are culled early due to reasons such as a high cell count, lameness and infertility.

A Johnes infected cow:

- Is five times more likely to be lame
- Twice as likely to have mastitis
- Gives 4000kg less milk in her lifetime.
- Weans lighter beef calves.

Clearly it has serious hidden economic consequences and the clinical cases we see are the tip of the iceberg!

Where does it come from and how is it spread?

As explained earlier the disease has a long incubation period and so it is often bought in when infected cattle are purchased unknowingly. The tests are not sensitive enough to reliably say a young animal such as a heifer is free of disease therefore cattle should be purchased from low risk accredited herds.

Baby calves and young-stock are most susceptible to infection and immunity increases with age. The bacteria is transmitted mainly through the ingestion of infected muck or colostrum/milk but occasionally via the uterus during pregnancy.

How is it controlled?

Controlling Johnes requires testing to identify infected cattle **AND** improved farm management. The test for Johnes (blood or milk) detects antibodies to MAP, but they are usually produced late in the course of infection. Typically once a cow starts producing antibodies she will begin to shed the bacteria in her faeces 6-12 months later. At this point she is **infectious** and therefore able to spread the bacteria. Once we know her Johnes status we can manage her accordingly to reduce the likelihood of her infecting calves and youngstock. Control measures will vary from farm to farm so speak to your routine vet for an individual plan for your farm.

Continued on back page.....

Sheep News

This has been a challenging year for everyone, throwing up some interesting variations in parasitic disease in sheep.

The very wet spring and perhaps animals grazing in the wettest parts of the farm during the dry spell, has meant that we have seen chronic fluke and positive faecal egg counts over the summer which came as a bit of a surprise. So, should you fluke your sheep now and if so, what with? This will be very farm and even field specific. Faecal egg counts will confirm the presence of adult fluke and coproantigen tests again on faeces show that sheep have been infected with fluke for 6 weeks or more. Blood sampling lambs for antibody will tell us if they have been exposed 2 or more weeks ago. Antibody to fluke is long lasting so isn't useful in older sheep. Speak to one of our vets for a farm specific plan.



The dry spell in the summer has meant that although worm eggs may have been on pastures, they will have found it difficult to make it into the lambs. In turn this means that the lambs won't have built up immunity as we would expect in a normal year. The low number of worm egg counts done at the surgery this year shows how little scouring we have seen over the summer; - but now the rains have come! It is likely that lambs will pick up gut worm infections that they are naive to and we will see scouring later than normal and in older lambs. The flush of high quality grass with great protein levels could also cause scouring both in lambs and adult sheep. The only way to differentiate parasitic problems and dietary scour is for us to do faecal egg counts.

Our latest Flock Health club meeting included a practical session on measuring sward DM, calculating DM requirements and ewe condition scoring. This year, many ewes are coming into tupping time in poorer than normal condition. If this is not tackled, it will have a significant impact on lamb numbers and early growth rates next year. It is more important than ever, to sort ewes into groups by condition score and try and get them back on track before tupping. It takes 6-8 weeks on good quality grazing for ewes to gain a condition score. It might be worth considering delaying tupping for the leaner ewes and using a teaser ram to ensure they come in season promptly when the rams do go in. (If you have >200 sheep and would be interested in joining our FHC please speak to Judith or Jasmine)

Ram and Ewe Sales

Don't forget to quarantine new arrivals! Treat any sheep you buy in for scab, fluke, resistant gut worms, CODD and footrot. For more details see the quarantine treatments poster at both surgeries. A few minutes and pence spent now could save you pounds later. For those of you with MV accredited flocks, SAC are strongly recommending that you blood test any bought in sheep just after purchase as well as 6-12 months later.

Judith Lee