



For many, the annual reviews of National Johnes Management Plan (NJMP) will be approaching. To satisfy the requirements of the NJMP three steps need to be completed on farm along with a BCVA Accredited Johnes Veterinary advisor;

1. Risk assessment to identify risks for Johnes spread on your farm
2. Testing to establish Johnes disease status on farm
3. A written Johnes disease management plan

All three steps must be completed and reviewed annually in order for an accredited vet to be able to sign an Action Johnes declaration which is required for Red Tractor Farm Assurance and by milk buyers. Management strategies differ between farms depending on their individual statuses. If you would like to clarify what steps you need to take in order to be able to complete your annual review please contact the surgery and one of the farm team will be able to advise you.

*Please note the deadline for declarations has been extended from the 31st October 2020 to the 31st December 2020.*

#### **Abortion Vaccines – Place your orders now.**

With tugging season getting closer on the horizon, now is the time to get your abortion vaccines ordered if you know your requirements and injected if you have your breeding replacements selected or sourced already. Don't forget that Toxovax needs to be given at least 3 weeks pre-mating and Cevac Enzootic Vaccine at least 4 weeks pre mating.

There are now limited supplies of both Toxovax and Cevac with certain packs sizes being unavailable or subject to delay. Please contact us ASAP to get your Orders are non cancellable once placed).

#### **Pneumonia Vaccination**

Autumnal weather and animals coming back into housing are two of the biggest contributing factors in developing pneumonia in calves. Now is the time to act to limit the challenge on your farm. Please talk to the farm vet team about which pneumonia vaccination and protocol will be most suited for your system. Once you have decided which vaccines will be best for you please give us a call so we can get them ordered for you.



#### **Kendal Surgery**

Monday to Friday 8.30am—7.00pm  
Saturday 8.30am-12noon  
Tel:01539 722692

#### **Kirkby Lonsdale Surgery**

Monday & Thursday 8.30am-7.00pm  
Tuesday 8.30am-6.00pm  
Wednesday & Friday 8.30am-5.00pm  
Saturday 8.30am-12 noon  
Tel:015242 71221

[www.westmorland-vets.co.uk](http://www.westmorland-vets.co.uk)



# PRACTICE NEWS

KENDAL ○ KIRKBY LONSDALE ○ ULVERSTON

October 2020

Well, the last couple of weeks of sunshine have certainly allowed folk to get a cracking crop of third-cut silage in (plus those that will have got a fourth cut!) Suffice it to say that as I write this there are still plenty of folk dashing round with balers and muck-spreaders making the most of a dry spell with dry fields.

We've had a varied month just gone by. Quite a lot of calvings with a variety of problems within them- the plentiful grass has certainly helped sucklers and heifers thrive, so it might be an idea to do a quick maintenance check on the calving aide.

One problem that has reared up from the middle of September has been pneumonia in youngstock. One of the main culprits is lungworm, which can increase in severity each year on farms where the same fields tend to be used for first grazers year-in year- out. These calves go downhill over the course of a week and really look like they've had the stuffing knocked out of them, with dramatic weight loss especially over the back and spine. A soft wet sounding cough is often there, with the head and neck commonly extended. Mildly affected animals can respond well to de-worming very quickly. However, severely affected animals can get much worse after de-worming especially with ivermectin based products or equivalents. These animals can need treating for a secondary pneumonia precipitated by the dead lungworms clogging up the lungs. Careful consideration should be given as to what to treat them with and the best advice would be to speak to one of our farm vets about the best course of treatment for coughing calves. Vaccination of next year's crop twice before turnout is the way forward for next year. Cows, especially dairy ones, can be affected as adults too, to complicate the picture. Signs of lungworm in adults and other conditions such as IBR (Infectious Bovine Rhinotracheitis) can look very similar, but the treatment is very different. If something doesn't look right, give us a call and we can work through it with you.

At turn in time, thoughts go to liver fluke control, too. This is an area of medicine where folks can easily get tied up in knots and the advice needed can vary from year to year. With a carefully thought-out plan, the outcome is more likely to be successful than winging it!

*Richard Knight*



## Take Control of TB Prevention on Farm

Bovine TB is an incredibly daunting topic. It can often feel like managing the disease is taken out of farmers' hands with testing and restrictions decided by the APHA – and that it feels like a roll of the dice as to the ongoing herd status. However, this is not the case and there are lots of actions that can be done on-farm to help reduce the risk of TB. It is important to remember that management of TB should be treated like other farm infectious diseases such as BVD and Johnes - the same principles of biosecurity and testing apply.

Taking practical measures will not only reduce the TB risk – but the risk of many other infectious diseases too. Here are some key points to consider:

### **Responsible cattle movement:**

According to the government TB Hub website, **around 50% of breakdowns in the Low Risk Area (LRA) are due to purchase of infected cattle.** When buying cattle, it is important to get a TB history:

**Have the animals been pre movement tested?** This gives greater reassurance of the TB status of bought-in animals.

**What is the herd test history?** If the herd has not had a routine test in a while, the movement and testing history of the purchased animal isn't clear, or the farm has only recently gained officially TB free status (OTF), we recommend :

**Isolation and additional Post Movement Testing.** If your farm already isolates to test for other diseases, then it would be straightforward to also test for TB.

The TB skin test can miss infected animals, so the higher the number of tests, the more likely it is to pick up a positive animal.

### **Establishing Farm Boundaries**

It is really important that perimeter fencing prevents direct contact with neighbouring cattle. This reduces the risk of all infectious diseases. Double fencing with a boundary of at least 3 metres is the standard to aim for at all perimeters. This is particularly important if you use different land parcels and therefore have increased risk of exposure to neighbouring cattle.



Effective double fencing in place – image from [nadis.org.uk](http://nadis.org.uk)

### **Reducing Risk from Wildlife**

This is a large topic, with lots of information available on the tb hub website (see below). Some key areas that are at risk from contamination from badgers include feed stores, mineral licks and troughs. Contamination can be in the form of urine, faeces, mucous from the respiratory tract and discharge (eg from a wound.)

To help mitigate these risks, take actions such as:

Avoid having **excess food** left in troughs by feeding only what is needed, and cleaning out regularly to avoid a build up of residues.

**Raise troughs and mineral licks** as high as possible – at least 90cm off the ground - with sheer sides to prevent badgers climbing in. These can be purchased or home made.

**Keep feed stores secure**, especially at night, with doors and gates. Clear up any spilled feed, and consider the use of feed bins and silos where feed cannot be secured.

**Useful Resources:** [www.tbhub.co.uk](http://www.tbhub.co.uk) [www.tbas.org.uk](http://www.tbas.org.uk)

Farm Vet Team – please give us a ring if you would like to discuss any of these topics further.

## Sheep News

Tupping is or will soon be underway and ewes should be in top condition. I know it's traditional to give ewes a 'good clear out' pre tupping and treat them for worms and fluke but the majority of ewes don't need worming at this time and this is an unnecessary treatment. Fit, healthy adult sheep won't be carrying a significant worm burden. Having said that, it can be worthwhile worming small or lean shearling ewes pre tupping as they may not have full immunity and could still be carrying a worm burden. Whether you need to treat ewes for fluke will depend on the grazing that they have been on previously and the history of fluke on your farm. The autumn fluke forecast will be available on NADIS later this month but the summer forecast was for moderate risk in this area.

The next question is what to do if you ewes that are still thin in the flock ?Any ewe that has been weaned for 6 weeks and has not managed to gain condition this summer has got to ring alarm bells.

One of the main causes of failure to gain weight is tooth loss.

This can be obvious and affect the incisors so sheep can't graze effectively or more insidious and be due to damage or loss of molar teeth. Problems with back teeth is being seen increasingly

when veterinary investigation centres are investigating issues with ill thrift in older ewes. Try getting an idea about the ewe's back teeth by feeling through her cheeks-

believe me putting your fingers anywhere near the back of their mouths is not to be recommended.

There are a number of 'iceberg' disease that can cause ewes to lose weight including Johnes Disease.

Johnes disease is caused by a bacterial infection. Lambs are most susceptible to infection with older sheep unlikely to become infected even if they graze infected pastures. Lambs can pick up infection during pregnancy, whilst suckling or from contaminated grazing. Signs of disease don't develop until the animal is much older commonly not until 2 or more years of age. The gut becomes thickened and absorption is reduced so affected sheep lose weight despite an adequate diet and good teeth. Because of this malnutrition they can also have a high worm burden. Unexpectedly high egg counts in older ewes are always suspicious. Strangely though sheep affected with Johnes disease seldom scour.

In the final stages due to low levels of protein in the blood they can develop bottle jaw and be confused with sheep affected with fluke. Diagnosis can be a little challenging as not all positive cases are positive on blood tests and post mortem findings are varied. Despite this if you lose more than 5 % of your flock annually to emaciation or unexplained deaths its time to investigate! You know where we are!



Judith Lee