***NAVAN VETERINARY SERVICES May Newsletter***

Last month for our annual spring meeting, we had Dr. Robert Trembley, the technical Veterinarian, specializing in bovine and equine medicine for Boehringer Ingelheim Animal Health host two roundtable discussions. The morning talk was regarding how to handle cows with abnormal milk, that are not deemed sick enough to treat. The second, afternoon talk focused on calf health and how we can strategize our calf assessments to improve our treatment success, particularly for scours and pneumonias. The format was different than our typical larger group meetings as these two group discussions were kept to approximately 20 producers each. Feedback from clients was very positive as there was a lot of group interaction (voluntary or not!). Thank you to all who attended.

This Newsletter will highlight some of the pertinent points that arose from the two meetings.

MASTITIS COWS

* Research done a few years ago by Boehringer Ingelheim wanted to confirm that the label dose of one of their products, (Cefalak) was still effective in the treatment of mastitis, in the current climate of more and more extended treatment protocols. Cefalak is labeled for two treatments, 12 hours apart. They compared this label protocol to extended protocols of other products and found that clinical cures of mastitis were similar in both scenarios. With the movement in agriculture to improve the prudent use of antibiotics, this was a welcoming report.
* When the participants were asked how long they expect a cow, that was discovered to have abnormal milk to be cured, regardless of treatment decision, most people thought 4-6 days was normal. But when asked “if you decide to treat a cow in the quarter, how long will you wait before deciding the treatment is not working and change to a different product”? Surprisingly most producers said 1-2 days. The point being made, I believe is that even though we are not expecting normal milk for 4-6 days, we are quick to change our protocol if milk isn’t better in 1-2 days.
* Mastitis that reoccurs in a quarter up to 4 weeks later is thought to be the same infection that never completely cured. There is a difference between **clinical** cure, where the milk now looks normal and **bacteriological** cure, where the actual infection is completely gone. Culturing milk samples is the only way to determine if the infection is eliminated.
* Results from milk cultures that are “no growths” is a good result. We should see approx. 40% cultures as “no growths’ because the cow’s immune system has killed off the infection before we saw it.
* Some interesting math…Cows will self-cure approx. 60%-70% of the time. These are infections that we never even noticed, as the research has shown, the average cow has 7 intramammary infections per lactation. If 60% of the time cows cure themselves without us knowing it, and 40% of the infections we see are no growths (the cow killed off the infection on her own as well), that leaves 24% or only about ¼ of mastitis cases that require treatment.
* Which cows should you treat? Culturing will help to establish a data base of the type of organism causing mastitis on your farm and help in deciding whether an infection is worth treating. It also helps us to investigate the source of the bacteria and give advice on how to reduce it.

CALF HEALTH

* Participants were asked “how does the calf have to present to you before you decide that it needs further attention’? Many producers mentioned that the calf not drinking its milk or drinking slower than normal was the first sign. Other participants mentioned the calf’s appearance…droopy ears, lethargic, coughing etc. Dr. Trembley mentioned that a drop in appetite in a calf probably suggests that the calf should have been treated yesterday.
* The chances of successfully treating a calf for one of the two most common issues, scours and pneumonia, really depends on how quickly a proper treatment plan is started.
* The long-term effects (out into their first lactation), of 2 or more bouts of pneumonia in a young calf is so dramatic that some herds will not keep a heifer as a replacement if it was treated for pneumonia on two separate occasions.
* Dr. Trembley presented some University of Wisconsin, Calf Health Scoring charts to help in calf assessments. By adding up points for visible signs, it becomes easy to decide if the calf needs treatment or not. When it comes to respiratory scores, 5 or more requires treatment and for scours, 3 points or more requires treatment. For diarrhea, particularly, early intervention is critical. If you would like a laminated chart, please let us know. It is a great tool to hang on the wall close to your calf area.
* A discussion was started on improving calf weaning weights and some newer strategies on feeding pre-weaned calves. Calf starter feeds, particularly the crumbled, non-pelleted formulations do promote rumen development. The sooner this occurs, the sooner calves will take to starter and once they consume approx. 1kg of starter three days in a row, they can begin to be weaned.

Adding chopped straw to calf starter has been shown to really accelerate calf rumen development, DMI and calf growth. There are prepared products that can be purchased, but these can be made on farm. The goal is to add 6%-16% of chopped straw (1-2” length) on a dry matter basis to your existing calf starter. The final product will look like a lot of straw with some calf starter. May be worth a try.