

# LINWOOD VETERINARY SERVICES PROFESSIONAL CORPORATION

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## March 2005 Newsletter

**Clinic News:** The clinic will be closed on Friday, March 25, 2005 for Good Friday.

### **Beef Cow/Calf**

Six weeks to go until the first remote possibility of opening up gates and kicking the cows and calves out into some kind of pasture. Until then we are stuck with a high density of animals in and around the barn. This kind of weather, the freeze/thaw/freeze, creates a wonderful environment for scours. If you are over the big scour challenge which occurs at 7 – 10 days then you are now facing the next scour period which is one month of age or more, this is when cocci hits and it can hit very hard. Nice big 6-week old calves can potentially have dark runny manure with blood in it. Be careful or you can lose these calves. Yes they are hard to catch at first but if you do not then they may be real easy to catch. For treatment of the calf depending on the stage and severity you will have anything from good to poor response. So treat early for a better response rate.

Treatment choices include:

- 3cc Trivettrin/100lbs IM daily for 3 – 5 days
- Sulfa boluses – follow label depending on choice
- 5cc Amprol/100lbs orally for 5 days

For both prevention and treatment, lots & lots & lots of straw. Creep areas need to be bedded daily. Wet corners in the barn or sloppy barn yards are a haven for cocci. This can be a horrible time of year to manage but Dr. Straw helps as much as anything.

For older calves, once they are on 2.0 lbs of creep feed daily for 3 weeks or more then the Deccox or Bovatec will help control cocci. For the little guys they do not eat anything, soon enough. Another suggestion, which many large herds in Canada are doing, is feed your cows Bovatec or Rumensin in their mineral to help reduce the shedding. Again, it takes 3 weeks of 22ppm Rumensin or 36ppm of Bovatec daily to reduce the amount of cocci shed into the environment. If cocci is a problem, start now and then write it on the calendar to start in December or January of the next calving season.

### **Dairy**

Often our newsletter topics reflect an issue of timely or seasonal importance, such as deworming in the fall or environmental mastitis during the hot, humid summer months. With no hot-burning topic to discuss I will take this opportunity to tie up several loose ends:

- ⇒ Users of Cystorelin will notice we are now carrying Fertiline. These products are very similar and are used for the same reasons and in the exact same doses. Research has shown no effect between these two hormones. Our only reason in switching is Fertiline represents a more cost-effective option to Cystorelin, and for the frequent user is available in a 50 ml size. However, for those so inclined, we will still be carrying Cystorelin. Just ask for it by name.
- ⇒ While on the topic of economic hormone choices, Lutalyse is priced over a dollar per dose less than Estrumate due to favorable pricing from Pfizer. Again, effectiveness is the same, price is better.
- ⇒ We will soon be switching back to Borgal instead of Trivettrin. These changes, while sometimes confusing, are done to ensure we are able to provide the lowest possible prices to you the farmer. Both Borgal and Trivettrin are used in the same way for the same problems at the same dose. Remember to observe proper withdrawals for milk and meat.

- ⇒ Not only do we have the area's largest hooftrimming chute, we also have the largest hooftrimmers! Rob and Jeff are available to trim on your farm, and you don't even have to feed them. Many farmers are using them on a regular (monthly or bi-monthly) basis to trim lame cows. Lame cows are the second greatest loss of profit on a dairy farm behind mastitis. Don't let sore feet hold you back. Give the guys a call today.
- ⇒ With the lower value of dairy cows some farmers are waiting before calling for sick cows or cows off-feed. While we understand your predicament, we politely remind you that our success in treating these animals improves when we are brought in early. In fact, the timing of our intervention can often be the difference between success and failure. For example, cows with displacements toggled early respond quicker and more successfully than the same cow toggled a day or so later.
- ⇒ A large crowd was on hand for our annual Industry Day on February 15. Also present were a great number of representatives from suppliers and drug companies. Many of these salespeople commented on how much they enjoy meeting the farmers to hear your comments, questions or concerns first-hand. On behalf of these suppliers and on behalf of the clinic, thank you for making that day such a success.
- ⇒ Thank you also to those who attended the presentations on that day. If you missed the dairy talk on ketosis (or as a reminder to those in attendance), allow me to summarize in 6 key words: Rumensin boluses, Rumensin boluses, Rumensin boluses.

### **Backyard Dairy Farmers**

The family cow program continues to prove very successful. Currently 65% of all cows enrolled have become pregnant. Give us a call at the office and learn more about how we can help your favorite cow get in calf. Remember: even though her eyes are dark and dreamy, or her milk is rich and creamy, if she's not soon due, you'll be sending her to Waterloo!

### **Beef Cow-Calf**

Gencor and Pfizer have combined on a promotion to give cow-calf farmers \$4 off the price of a CIDR. CIDRs are used to synchronize the reproductive cycle of cows to make AI both practical and economically feasible. The result is tighter, more compact calving seasons with calves from the best genetics in the business. Call for more details. We would be happy to help you examine the practicalities of synchronization in your herd.

## **SWINE**

The battle against PRRS continues. We have tried some interventions that are new to the North American industry and they are looking promising. Once we have analyzed our results we will pass on our experiences. Aside from these new approaches there are still some points that continue to prove very important.

1. Gilt introduction is the main issue to stabilizing and maintaining herd PRRS stability. In farrow-finish systems "weaner" gilt introduction is an excellent method. I prefer introduction of 55lb animals to weanlings and each system can set up its best case flow patterns. **Can't** needs to be taken out of our vocabulary.
2. Maternal colostral immunity management and elimination of high risk, low viability pigs speeds up herd stability. Our basic program is no cross-fostering until at least 24 hours after farrowing and day 3 processing and culling. ie: teeth, tails, castrate and antibiotic all on day #3 as well as humane euthanasia of low viability piglets.

Other diseases are causing some problems this winter. We have seen 3 cases of acute Glasser outbreaks. These can be very severe and require immediate intervention. NuFlor has been an excellent drug in treating these outbreaks. The dose is 15mg/kg or approximately 2.5cc/100lbs I.M. Repeat in 48 hours with a 14 day slaughter withdrawal.

Rota Virus has shown up in a few sow herds. It causes a scour in piglets resulting in high morbidity but low mortality. Feed back is the best and cheapest fix but we also have a pre-farrow vaccine that is very effective for this problem.

Finally, it is the season for TGE. As you are well aware we don't want to see TGE. In fact, we don't want to even hear about TGE. We ask you to call for a phone consult if you suspect TGE and we thank you in advance for your co-operation. This germ causes sows to go off feed and vomit and scour. It can cause scours and vomiting in weaner and grow finishers and it kills baby piglets. It is very transmissible. If you suspect it has affected your farm it is important to notify us and other suppliers so we do not spread this germ.

## SWINE A.I.

We have had excellent results with the swine A.I. from our rent-a-pen boars. We have 10 Duroc boars, all the same blood line in the OSI boar stud. We own another 15 so semen availability can be increased. On farm conception rates have been very good and more and more producers are using this service. We are adding another price category. If you buy 1 – 5 services at one time the cost is \$13.00/service. If you buy 6 – 10 services at one time cost is \$11.50. If you buy greater than 10 services at one time the cost is \$10.00.

## EQUINE

**Mares:** Many mares in the country are approaching foaling. If you are moving your brood mare prior to foaling, try to do so 4 to 6 weeks before her due date. This allows her to adjust to her new environment as well as to develop immunity to the local micro organisms. Ensure that the area is clean and well bedded with straw (not shavings). Pre-foaling vaccinations can be done 2 to 8 weeks prior to foaling and should include a tetanus toxoid to protect the mare during foaling. Other vaccines can be given to boost colostrum antibody levels to protect the foal. West Nile Virus vaccine is commonly given as foals are more susceptible to the virus than adult horses and vaccination of the foal is expensive as it requires multiple doses. Other examples of pre-foaling vaccinations are flu/rhino, strangles and sleeping sickness. Once the foal is born, the most important consideration is colostrum ingestion. Colostrum is the mare's milk that is produced in the first 24 hours post foaling. It is high in antibodies which the foal absorbs through its intestine after ingestion. Foals who do not drink or ingest adequate levels of colostrum within 24 hours (ideally 6 to 8 hours) are at a massive disadvantage as their immune system cannot respond to bacteria or viruses. These foals are termed "Failure of Passive Transfer (FPT). This is the primary underlying cause of infection in new born foals. This is tested for with a blood sample and can be treated with a plasma transfer.

Give new foals a foal kit which includes Vitamin E/selenium (to prevent white muscle disease), tetanus antitoxin (to protect foal from lockjaw – this is not the same as tetanus vaccination) and an antibiotic injection (Tribrissen) which is given in case the foal is exposed to bacteria during the birthing process. Keep your foal kits on hand prior to foaling and in the refrigerator.

Umbilical cord treatment involves using a disinfectant such as iodine or chlorhexadine to prevent infection of the cord. The umbilical cord is a major source of infection in the foal. Try to make sure your hands are very clean when handling the navel, or put disinfectant in a spray bottle and do not touch the cord at all.

Please remember that mares should pass their fetal membranes within 3 hours of foaling. A retained placenta in a mare can become a serious problem, with complications such as laminitis, infected uterus, decreased future fertility and/or endotoxemia potentially resulting in death. Oxytocin at a dose of 1cc IM is often successful at causing expulsion of the placenta within 30 minutes. If the initial oxytocin does not work, a second dose of oxytocin 1cc IM can be given 1 hour after the first. If you suspect your mare has not fully passed her afterbirth within 6 hours of foaling please call to have her examined.

We can ultrasound a maredown to 15 days easily. Eighteen days is the ideal time to preg check mares as it is easy to identify twins and make a twin correction game plan. It is always a good idea to have your mare re-pregnancy checked at 90 days (3 months) gestation. If early embryonic death occurs, the mare reabsorbs the fetus and often the only clue is a return to heat or a lack of a foal the next year!! If you are planning to have your mares ultrasounded, please give us a couple of days notice, as we have only one equine vet at the moment and scheduling can become a challenge! Mares that were bred early will soon be ready to start vaccinating for rhino (contagious abortion).

**Vaccination Program:** Pneumabort K at 5, 7 and 9 months gestation.

If you have multiple pregnant mares that are reasonable similar in gestation length (i.e. within a couple of months) begin vaccinating all mares with Pneumabort K when the first mare is at 5 months, and continue every other month until each mare foals.