



LINWOOD
VETERINARY SERVICES

DR. MARTIN MISENER DR. MURRAY RUNSTEDLER DR. PAUL SOSTAR
DR. NANCY CHARLTON DR. ANDREW MACLEOD DR. JODI KENDREW
DR. JOHN TOKARZ DR. CHRIS DITTENHOFFER DR. ROXANE PARDIAC
DR. CHRISTINA MOHOS

3860 Manser Road, Linwood, Ontario N0B 2A0 (519) 698-2610
1-800-663-2941 Fax (519) 698-2081
linwoodvet@linwoodvet.ca

NOVEMBER 2007 NEWSLETTER

Ontario Association of Swine Veterinarians and OPIC Swine Health Advisory Board Big Bug Day V

Date: Wed. Dec 5, 2007
9:30 a.m. to 3:00 p.m.

Location: Arden Park Hotel
Stratford, Ontario

AGENDA

9:30 a.m. – 10:00 a.m.

Registration and coffee

10:00 a.m. – 12:15 p.m.

Swine Vets Chasing PRRSv – New Information

Ontario sow herds are at greater PRRSv risk—opportunities for improvement

*-Dr. Derald Holtkamp, Iowa State University
(OSHAB PRRS Risk Assessment Project)*

We know more on how PRRS is spreading

-Dr. Scott Dee, University of Minnesota

Sow herd PRRS elimination strategies

Dr. Julie Menard, F. Menard Ltd. (Quebec)

12:15 p.m. – 12:30 p.m.

Q & A

12:30 p.m. – 1:30 p.m.

Lunch

1:30 p.m. – 2:30 p.m.

Ontario Producers Share Their PRRSv Successes and Challenges

The PRRSv Elimination Puzzle: Putting the Pieces Together

-Piet Van den Boogaard

How the #\$\$&*# did PRRSv get into two of our herds within the last year and what are we going to do about it?

-Phil Smith, Bodmin Swine Genetics

Rolling With the Punches to a Successful PRRS Elimination

-Jim Whitehouse, Pureline Swine

2:30 p.m. – 2:45 p.m.

Q & A

2:45 p.m. – 3:00 p.m.

Presentation of PRRS Survivor Awards

Registration: Linda Dillon, Clinton OMAFRA Resource Centre

Tel: 519-482-3333 Fax: 519-482-5031 Email: linda.dillon@ontario.ca

Session Cost: \$20 payable at door by cash or cheque (payable to OASV)

Pre-Registration required by Friday, November 23, 2007

Sponsored by: Pfizer Animal Health and Boehringer Ingelheim
Registration & Technical Support by: OMAFRA, Ontario Pork & OPIC
Proceeds to Ontario Association of Swine Veterinarians disease initiatives

DAIRY

The autumn is a good time to consider the application of endectocides for parasite and worm control in your dairy animals. Eprinex is approved for use in lactating cattle and is very effective in the control of intestinal and abomasal worms, as well as in controlling mites which cause tailhead mange. Fresh cows treated with Eprinex have been shown to improve milk production by as much as 7 lbs per cow per day. Topical parasiticides such as Eprinex should be used only after we have had a hard frost and cattle have come in for the winter. In this way you will not have re-infestation following treatment, and have enhanced control over lice and other mites. Discuss the use of Eprinex with your veterinarian to control costly parasites.

CALF MANAGEMENT

Viral pneumonia is here and continues to frustrate calf raisers and veal producers. Ensure that your vaccinations are up to date. In the fall and spring multiple vaccinations may be required. BRSV is rarely protected using only one vaccination. In outbreaks or on-going pneumonia then we can look at utilizing new research. This involves using Bovi 4 or Bovi-Gold up the nose. Please call the clinic for information on how to best utilize these products.

When vaccinating calves please ensure that you use Bovi-Gold. Bovi-Gold FP is for replacement heifers and cows. Do not use in calves or you may witness a setback in the calves. Don't forget to medicate at weaning or on arrival

Options:

1. Medicated crumbles – from clinic
2. Medicated starter/supplement – requires a vet script
3. Medicated water – monitor water consumption since water consumption reduces when cattle are sick; in cold weather or when water is ice cold

SMALL RUMINANTS

Goats – please be advised that currently there is no labelled vaccine for caseous lymphadenitis, the condition that causes lumps/abscesses in goats. The only product available is labelled for sheep only. It will be at least two years before anything is available for goats. For now vaccination for Clostridia species is all that is available.

To help control the abscesses, try to close your herd once it is established, except for Billy Goats. When a lump appears and is soft, remove to a treatment pen. Lance the abscess, drain, flush with hydrogen peroxide. When cut is healed place back with herd.

BEEF COW/CALF

It is a great fall! Preg-check your cows now. Don't wait until the cold, miserable weather when it is more stressful to vaccinate and dehorn your calves. Talk to the vet about ways to switch to a modified-live program so that calves can be vaccinated while on the cow and then boosted at weaning. Medicate calves at weaning. You can feed medicated feed or call the clinic for medicated crumbles.

EQUINE - Botulism

Botulism is caused by the toxins produced by *Clostridium botulinum*, type B and C. It is a gram-positive bacterium that needs anaerobic condition for multiplication, and it is usually found in the soil or in the intestines of normal birds and mammals. The most common cause of botulism is the ingestion of foodstuff that has spoiled or been contaminated with the toxin. In horses, it generally occurs due to contamination of big bale silage. It is thought that the feed failed to become acidified due to poor ensiling techniques. The lack of acidification enables the *Clostridium botulinum* to multiply and produce toxins. Once ingested, the toxins affect the nerve cells (pre-synaptic membrane) and prevent the release of a transmitter (Acetylcholine neurotransmitter) which causes the clinical signs to develop (neurological). The *Clostridium botulinum* can also develop in wounds that haven't been properly cared for or have become necrotic (wound botulism, toxicoinfectious botulism).

The clinical signs that develop are the same regardless of the method of toxin contamination but can vary in severity. The mortality rate is quite high and the animal can die within a few hours or up to a week after showing clinical signs. The clinical signs most commonly seen are progressive muscle weakness, drooling, tongue hanging out, trouble breathing and sleepy facial appearance due to muscle paralysis. Eventually, the animal becomes unable to stand followed by death due to paralysis of the respiratory muscle or from the development of severe pneumonia.

Evidently, botulism carries a poor prognosis once the animal becomes contaminated with the toxin. There is an antitoxin available, but once clinical signs develop it is usually too late. Another treatment that can be attempted is a hyperimmune serum transfusion from a horse that has been vaccinated for Botulism, however this is very expensive (\$1500 to treat a foal). The best way to help prevent Botulism is through vaccination, if you believe your horse may come in contact with contaminated or spoiled foodstuff. Thoroughly checking your

horse's foodstuff prior to feeding is highly recommended and purchasing your feed from a reputable source is advised.