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EQUINE

Castration

The most favorable time of year to have a colt or stallion castrated is during the spring or fall. It is important to avoid the summer months mainly due to the over abundance of flies. Prior to scheduling an appointment, the colt or stallion should be quickly examined. There should be no nasal discharge, coughing or sneezing for at least one week prior to the surgery. It is also very important to verify that there are two testicles present. It is normal that one testicle may be significantly larger than the other.

If only one testicle is palpable, this condition is known as a cryptorchid or high flanker. Often the horse's right testicle will be present and the left testicle will not. It is believed to be genetic in nature, and a high probability exists that the condition may be passed on to the foals. In order for the horse to be gelded properly, both testicles need to be removed. If only the descended testicle is removed, the horse can still potentially breed a mare and stallion-like characteristics can still be exhibited. The retained testicle may be located in the adjacent scrotal tissue, inguinal canal or in the abdomen.

A routine castration can be performed in approximately 1 hour. The horse's heart, lungs and testicles will be examined and a general history will be collected. If everything appears to be normal then the animal will be sedated. Upon appropriate sedation, the horse will be lead to an open area either inside or outside the stable. A larger dose of anesthetics will be administered. This will cause the animal to lie down and from that point the horse will be maintained with injectable anesthetics. After the surgery is performed, the incisions will remain open, in order to allow proper drainage to occur. Excessive swelling often develops when the incisions seal over too quickly.

As with any surgery, there are risks involved with castration. The most common complication is excessive bleeding. If the bleeding is excessive at the time of the surgery, then the vessels will be ligated. If the bleeding occurs after the surgery has been completed, gauze packing will be inserted into the incision to encourage a clot to form. Close observation after the surgery is always recommended. Younger animals (yearlings) generally tolerate and recover from the surgery the best. The risks for complications increase as the horse ages. If you have any additional questions or concerns regarding the surgery do not hesitate to contact your veterinarian.

BEEF COW/CALF

Don't forget to get organized for processing this year's calves. It is always best to plan to vaccinate and dehorn before weaning to minimize the stress on these calves. Also, a sunny day in September or October is far better than a rainy, snowy day in November or December. Call now and book for a veterinarian and processor to help keep your herd up to date for pregnancies as this year's forages have not left a lot of extra hay around the countryside, no sense in feeding open cull cows if the cull cow price does not reward you for it. Also, please see the section below on Beef Feedlot for the launch of a new antibiotic for use in feedlots. This may be of interest

to you for treating calves on your farm. For those of you who may background your own calves for a few months there is always the risk on pneumonia even in home-grown. Take a look at the new Excede as an option for you, the one-dose in the ear vein may be an option for you. Mark your calendar now for the presentation at Ross McCall's, Brussels, Ontario.

BEEF FEEDLOT

“What’s New in Anti-microbials (Antibiotics)?” This is the theme for a **Pfizer** presentation on **October 10th** at Ross McCall's Livestock, Brussels, Ontario. Starting at 5:30 pm Beef on a Bun will be served followed by an update on **Draxxin** Usage and the latest drug to be launched, **“Excede”**. **Excede** is a new long acting Excenel that will be marketed as a first line drug choice. It is administered under the skin in the ear and its long acting effect is 7 to 10 days. This is a new approach to injecting cattle, so Dr. Les Byers a veterinarian from Calgary, will be there to demonstrate how to use it. A special needle comes with the product to help guide you under the skin between the two ear veins. Pfizer will talk about it's recommendation on placing its drugs for on-arrival high risk cattle and then for first line treatments followed by second line treatments. Mark this on your calendar and plan to attend now.

CALF MANAGEMENT

In recent discussions with producers I have identified an on-going challenge with post-weaning pneumonia. This is a concern because the fall weather will only make it worse. In speaking with producers we have both agreed that older weanings appear to do better, in particular if you are raising calves in hutches then try to leave them out there longer. I am still a fan of feeding lots of milk as this is your best bang for growth. However, I do realize that cocci control is better from dry feed and lugging milk is not always fun. So, aim for at least six weeks on milk and then take a week to wean onto feed. Work hard to ensure at least 2.0 lbs per head per day at weaning off of milk. Depending on your challenges after weaning, leave them in the hutch longer. Watch the neck straps, they can get too tight quite quickly. Feed at least a 20% Protein calf ration at weaning and then switch to an 18% whenever you or your feed company feel that is appropriate for your operation. Introducing hay or forages is another area of debate, I prefer to have them eating at least 6.0 lbs of grain before a lot of forage goes into them. Big deep bellies are known as hay bellies and if the feed is just sitting in there, then it isn't going onto their backs and is a loss for you. At the end of the day let the calves tell you how well you are doing and I enjoy learning from stock people who can take what is on paper and combine it with reading the livestock to know how to adjust the feed to either more or less. If you are able to keep calves in hutches for at least two months and possibly even three then try to vaccinate them twice with modified-live vaccine to help reduce the role of BRSV in fall pneumonia. If you would like to use a Pasteurella vaccine please call the office to discuss its benefits and risks. If you think lugging feed out to hutches is crazy for calves pushing three months of age, then look at utilizing a used golf cart or modified ATV to put the feed onto it. It has to be labour friendly or I agree it won't get done. One last recommendation is to wean calves onto a feed with deccox, bovatec or rumensin and then use our medicated crumbles for at least two weeks post-weaning. Your other option is needle two days before weaning with Draxxin at 1.1 ml/100lbs under the skin. Please call if you still continue to have challenges.

SWINE

We are heading into another fall season and producers need to be focused on environmental controls. This time of year we tend to see warm days and cool nights and ventilation can be challenging. Pay close attention to your barn environments. At this time of year we also often review and change medication programs help control respiratory disease challenges during the changing weather. If you have cut down medication usage in the summer be prepared to resume use if you see the beginnings of a clinical change.

Draxxin continues to be an excellent choice for individual pig treatment. The one shot long acting treatment is very labour friendly and the broad spectrum of activity make this an excellent choice for pneumonia treatment.

