

MARCHES VETERINARY GROUP FARM ANIMAL NEWSLETTER – FEB 2016

Mastitis in Ewes

Some of you may have been to a recent AHDB funded meeting on mastitis in sheep. Professor Laura Green from Warwick University outlined the findings of recent studies on risk factors for mastitis in ewes. The main factors associated with acute mastitis were:

- **underfeeding protein in late pregnancy**
- a Body Condition Score (BCS) of less than 2.5
- **teat lesions**
- the presence of **abscesses in the udder**

The study also found that ewes lambing for the first time (either as ewe lambs or yearlings) are particularly susceptible to acute mastitis. This is thought to be because the udder is still developing whilst the ewe is lactating so there is a nutritional demand for growth as well as for lactation. This demand is often not met if first timers are rearing twins.

So, what does this mean in practice?

1. that you need to know the **protein and energy level of the forage** as well as the concentrate feed in order to know if the ewes' needs are being met. We can blood test a few ewes about 3 weeks before the start of lambing to check. We often see diets that do not supply enough protein.
2. regularly **monitoring BCS** will identify thinner ewes and enable you to segregate them for preferential feeding, both before and after lambing
3. keeping first time lambers, whether ewe lambs or **yearlings, as a separate group** will ensure that they get their share of the feed and don't get pushed out by greedy mature ewes. After lambing, yearlings are still best run separately from the mature ewes. Yearlings with twin lambs are under a lot of nutritional pressure, and creep feeding their lambs can help to reduce the demands on the ewes and reduce the risk of mastitis.
4. **teat lesions** tend to occur when the ewe is struggling to supply enough milk to fast growing lambs. Milk yield increases during the first 3 to 4 weeks of lactation, so it's important to ensure that ewes have a plentiful feed supply at this time after lambing. If **orf** is present in a flock, teat lesions are likely to be more severe. Vaccinating ewes against orf pre-lambing should help, but the timing is important.
5. if a ewe has a lump in her udder, it is likely to be an abscess and there is a high chance of her developing mastitis in her next lactation. So it is best to **cull any ewe that has a suspicious lump in the udder**. (Note that there are two lymph nodes at the top of the udder at the back and these can be quite enlarged when the ewe is lactating – so don't confuse these with abscesses).

The importance of colostrum

For newborn calves and lambs, the factor that will have the most impact on their survival is whether or not they have a **feed of quality colostrum in the first few hours of life**. And the main factors that influence the quality and quantity of colostrum produced are protein intake in late pregnancy and body condition score. Studies have shown that approximately 30% of yearling ewes having twins do not produce enough colostrum for two lambs.

Many farmers rely on powdered colostrum for situations where the dam may have an insufficient supply or the calf or lamb is unlikely to get up and suck straight away. However, some powdered colostrum products do not contain sufficient levels of antibodies to replace natural colostrum. It's important to check that the product you are using is designed to **replace** natural colostrum, not to be fed as a supplement. If the dam has colostrum, it is always best to milk her and feed this to the newborn rather than to use powdered colostrum.

Liver Fluke screening

If you know you have fluke on your farm, it's a good idea to test animals at this time of year to see if they are passing out **fluke eggs in faeces**. If they are, they should be treated before turn out so they don't increase the level of fluke challenge for next year. If pregnant ewes are carrying fluke, this is likely to adversely affect their body condition and affect colostrum quality and milk yield.

The effects of BVD

Over the past few months we have seen two severe pneumonia outbreaks, one in dairy bred calves and one in a suckler herd, where losses have been high despite treatment with antibiotics and anti-inflammatories. In both cases, investigations have identified BVD infection in the affected groups. BVD is **immunosuppressive**, so when BVD virus is circulating in a group of animals they become **more susceptible to other diseases**, and cases of pneumonia tend to be more severe than you would normally see.

BVD is a disease that presents in many different ways – it affects fertility, can cause abortions and stillbirths, weakly calves, older animals that scour and die. It is often only when BVD is eradicated from a herd that it becomes apparent how wide ranging the effects of the disease were. Testing for BVD has become much easier over recent years as you can now test blood samples, milk samples or ear tissue samples collected by using special ear tags. The 'tag and test' method makes it easy for those buying in cattle to test them on purchase, at a cost of approximately £5 a head. But one thing that you still can't test is an unborn calf – so it is always risky buying in-calf animals. We would encourage everyone to be **monitoring cattle for BVD** – even if you are vaccinating against it. In suckler herds you only need to test a small number of animals to identify whether or not BVD is present in the herd.