

Sheep Farmers Newsletter June 2009

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Animal Health Centre

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Practice News

Follow up (matters arising if you like) from the last newsletter –

- I met with the Minister of Agriculture over the non inclusion of South Otago in the recently announced vet bonding scheme (where new graduates effectively get \$11,000/yr paid off their student loans for 3 years). It seems that we will have to

the scheme so in the meantime we are at a huge disadvantage as far as attracting new vets goes – life can be a bitch sometimes!

- The mythical Syd Taylor starts on June 15. He will be working out of the Milton clinic. In addition Peter Heslip, who did a locum in the small Animal

clinic at the beginning of the year, will be back on a permanent basis. Peter has many years experience and will be Team Leader of the Balclutha & Milton Small Animal clinics. He starts August 17th.

Recent Animal Health Problems

1. Sheep Measles: – I have had several instances lately of people ringing up saying that they have had sheep measles identified in their lambs as notified by the works killing sheets. This is usually in spite of an adequate (monthly) worming regime in their own farm dogs. The only way lambs can get sheep measles (sheep measles is the cystic stage of the dog tapeworm *Taenia ovis*) is to eat pasture contaminated by faeces from dogs carrying this tapeworm. If your dogs are on a monthly worming programme with Droncit then the source can really only be other wandering dogs. You can't control every wandering dog but insist that those you can control (pig hunters accessing your property, visitors etc.) are up to date with worming (and vaccinations for that matter). Information packs including signs for your boundary gates are available at the clinic.

2. Pink Eye: - While there always seems to be cases of this about I have perhaps heard of a few more than usual lately. Pinkeye is caused by *Chlamydia* organisms – look on them as a “close cousin” of bacteria. They are spread indirectly by dust, pollen in grass and flies, and directly by close contact with the eye secretions of infected animals especially when yarded or feeding out etc. Handling of sheep when drenching a mob with infected animals could also result in spread. After sheep have recovered the eyes of most continue to harbour the organism for periods of up to a year and such carrier animals can be a source of reinfection.

Most cases recover spontaneously after a fortnight or so however early treatment does aid recovery. However this needs to be balanced against the fact that yarding and handling will assist the spread of the disease. In the summer maybe cases are best left untreated but closer to lambing when affected pregnant ewes may be at risk of sleepy sickness, treatment may be desirable.

Reminders

1. Salmonella Brandenburg Vaccination: - This is a disease where the numbers of affected farms tends to go through cycles (wax & wane) as overall flock and district immunity rises and falls. We have just had a couple of years where the number of affected farms has been at a relatively lower level so I would predict that in the next year or two we will see a bit of an upsurge in this number. I am not trying to be alarmist

- just stating the facts. It may not be this year but a rise will occur at some point.

The basic vaccination programme is two doses to the two-tooths 4 – 8 weeks apart with the second dose given by the end of June. An annual booster (by the end of June) is then needed to maintain a reasonable level of protection. Hoggets can, but rarely do, get the disease so don't worry about vaccinating them. The vaccine (Salvexin+B) is, unfortunately, not fully effective but extensive work has shown it reduces the impact of the disease by a good two thirds. A reasonable compromise, if you want to reduce the overall work and cost, is to vaccinate the two-tooths each year as they often seem to be the more at risk mob.

2. Ultravac Vaccination of Hoggets: - By now the hoggets should have received their 2 doses of Ultravac 3 - 6 weeks apart prior to going onto winter crop. They will then be protected against blackleg etc, often picked up while brassica grazing as well as being correctly set up for their lifetime programme of annual boosters pre-lamb.

3. Clostridial Vaccination of Cattle: - Although less common than in sheep, cattle can still die from clostridial diseases – pulpy kidney, blackleg etc. The odd sudden death in cattle through the winter period is not uncommon and they can look a bit like a bloat death. Most of these can be prevented by Ultravac vaccination. In a few instances the deaths can be caused by a strain of *Clostridia* not in the 5 in 1 vaccine and in those cases we prescribe a 10-strain vaccine called Covexin 10. Clostridial deaths are the classic instance of prevention being better than cure (as there is no cure by the time you find them) and saving one death will pay for many years of vaccinating.

4. Abortion Submissions: These will have no doubt started before the next newsletter (unfortunately) so following are some hints on practices to ensure the lab gets samples in the best condition and hence increases your chances of getting a diagnosis of the cause.

- Don't send samples in off the first one or two cases – they could be unimportant one-off cases.
- Send in fresh aborted fetuses – preferably two from two different abortions i.e. not a set of twins.
- Black mummified fetuses are no use at all.
- If possible include some placenta (afterbirth).
- Make sure they haven't been scavenged – seagulls can sneakily remove gut contents through the navel and stomach contents are an important sample as far as the lab is concerned.
- Put fetuses in something leak proof – e.g. at least three supermarket bags. We don't appreciate *S. Brandenburg* organisms being dripped the entire length of the clinic.

- Preferably bring them in by 1pm each day and they will be almost a day quicker getting to the lab than if you are after 2pm.
- **No samples after 1.30pm on a Friday.** Late samples have to sit around till Monday which reduces the chances of growing organisms & actually getting a diagnosis (but the cost doesn't reduce).

Working Dog Nutrition

I was at the annual NZVA Sheep & Beef Conference a couple of weeks ago and there was a section on working dog health. One interesting fact that emerged was that on trials on treadmills dogs on a lower protein diet (19% or less) had eight times as many soft tissue injuries as those on a higher (24%) protein diet because of muscle fatigue resulting in less bony support. In other words diets that reduce muscle fatigue are likely to reduce both orthopaedic and soft tissue injuries.

Feeding prior to exercise is more likely to result in abdominal discomfort and vomiting during exercise. The best time to feed dogs is within 2 hours, and preferably immediately after exercise – this is because muscle proteins “used up” during exercise are replenished more completely and rapidly when a meal is provided within two hours of exercising. Dogs should not be worked within eight hours of a small meal or up to 16 hours after a large meal to allow for complete stomach emptying.

The ideal working dog diet contains >25% protein, high fat (30-40%) and carbohydrates of not much over 15%. Many of the cereal based biscuits are low in protein and fat and too high in carbohydrate. If too much of the energy in a biscuit is provided by carbohydrate at the expense of protein and/or fat the dog will not have as much endurance and will become more exhausted towards the end of a long day.

The above helps explain why Eukanuba (protein level of 30%) is superior to most other commonly available brands.

Twisted Stomach in Huntaway's

Some of you, unfortunately, will have had experience with this condition. Some dogs are prone to this life threatening condition – large breed dogs with deep chests and especially huntaways. In fact, certain lines of huntaways are more prone than others. Signs range from mild discomfort and restlessness, salivation to unproductive vomiting, abdominal distension and complete collapse. Preventative steps include:

- Feeding several small meals a day, rather than one large meal. Despite what I said above

about feeding dogs, if you have large huntaways, especially if a close relative of the dog has experienced the condition, it might pay to feed a very small amount in the morning and perhaps again at lunchtime, and reduce the main end of day meal.

- Avoid stress during feeding – feed dogs separately.
- Do not use an elevated feed bowl.
- Do not breed dogs with a first degree relative that has a history of the condition – sometimes termed G.D.V.
- For high risk huntaways surgery to “fix” the stomach in place is effective.

Dogs and Motorbikes

One topic that came up at the conference was the old “dog jumps off the motorbike tray & gets a paw caught under the little rail around the edge of the tray”. Result - a totally wrecked carpus (wrist) or tarsus (ankle), a huge bill & a dog that is often not 100% ever again. In many of these cases all we can do is fuse the entire joint which is easier said than done.

This got mentioned many years ago in the newsletter and the number of instances dropped right off. However there is still the odd case occasionally and with new farmers in the area it is worth repeating. **Fill in the gap** between the tray and the bar so that dogs can't slide a paw underneath - this simple little step can save a huge amount of grief.

Zolvix™

As I indicated in the last newsletter this is the unique new drench active from Novartis. By the time you read this newsletter stocks should just about have arrived in the clinic. The use of Zolvix™ was another topic at the conference alluded to above, plus I have also been gathering my own thoughts on where it should (or just as importantly shouldn't) be used, so following are some of the “rules” I have come up with for its responsible use with explanations where appropriate. With a bit more thought I may well add more to this at a later date.

1. It can be used as a quarantine drench as it is effective against parasites resistant to all the other actives. Matrix™ is the only other top choice for a quarantine drench. The failure to adequately quarantine drench livestock is responsible for many farms acquiring a resistance problem so you should all be doing this as a matter of course whenever any stock (& this includes cattle) arrive on your farm.

2. A prime use for Zolvix™ will be to use it to delay resistance to the other actives. Dave Leathwick (NZ parasitologist who specialises in this area) has a computer modelling programme where he has modelled the likely outcomes from substituting one of the regular lamb drenches with Zolvix™. What this modelling found was that substituting one of the last drenches for the season in lambs with the likes of Zolvix™ should slow the rate of resistance development to the regular drench used. Note this effect was greatest when one of the later season drenches was substituted – the effect was less if one of the earlier season drenches was substituted.

This is because resistant worms gradually accumulate during the drenching period and removing them at the end of the season reduces their ability to contribute to subsequent generations. In case you (as I did years ago) wonder about computer modelling and its relevance to parasitology, Dave Leathwick has, with some quite clever trials, actually shown that several predictions made by his model are in fact true! So there you are - a strategic drench of Zolvix™ at the end of the season looks like it will be good practice.

3. In due course when Zolvix™ appears as a combination product this should be favoured over the use of the single active itself.
4. Some don'ts. Don't use Zolvix™:
- In ewes pre-lamb. In fact try to avoid it in ewes at anytime.
 - In lambs when they are going onto new pasture.

This is because these are higher risk practices as far as the development of drench resistance goes, so in order to protect the new drench active don't use Zolvix in these situations.

Zolvix™ is going to work out at around 95c for a 25 kg lamb dose so it is not cheap but some strategic use of it as outlined above would be best practice and help extend the life of the existing actives while helping to maintain its efficacy for as long as possible.

Annual Clutha Vets Golf Tournament

The 17th annual CVA golf day is to be held at the Owaka Golf course on Thursday June 18th. Usual format – food and drinks supplied, everyone gets a prize and your golfing ability is completely irrelevant. As the accompanying leaflet says, phone the clinic (418-1280) to register your interest. A ballot will be held if numbers exceed places.

Merchandise Matters

A shorter list from the retail team than usual this month.

- **Tempor 5lt** – Get a free Merino T-Shirt with each drum.
- **Matrix Hi Min 20lt** - Receive an extra 5lt free with each 20lt drum.
- **Cydectin Pour-on** – Receive 10% extra free on the 2 & 5lt packs. Also on the 15lt herd pack there is a choice of several different promos.
- **Combat Topline 5lt** - This is a new abamectin pour-on for cattle and is very well priced – see retail staff for details.
- **Tux 40kg** – Each bag qualifies for a draw to win the Nissan Navara ute we have on display at the Balclutha Clinic. One ute in each island to be won.
- If you've a use for old pallets please ring retail and ask for Rhiane – first in first served.
- Look out for the annual Spring Supply Night coming sometime in July. The retail team invariably have plenty of good “on the night” specials at this.

Promotion Winners

1. CampyVax4 Danseys Pass Weekend:

For purchasing CampyVax4 Kelvin and Rianda Ross (Owaka), Stephen and Jan Tunnah (Milton), Ross & Bridget Wilson (Owaka), Peter & Chris Angland (Waipori) and Stephen & Rhonda Bamford (Warepa) will enjoy an evening meal and accommodation at the Danseys Pass Hotel and curling at Naseby over Queens Birthday Weekend.

2. Merial Ancare Powerbuilt Tool Promotion:

The winners of this promotion are:

1. - Lachie & Jan Campbell - 27 piece mechanics tool set.
2. - Brent & Robyn Gardner – Bar/vaccine fridge and refreshments.
3. - Brendon & Donna Weir - Bar/vaccine fridge and refreshments.

Congratulations to all the above winners.

John A. Smart B.V.Sc.