

## At-Risk Cows - Still Worth Treating

While you may decide that you don't want to spend money Metri-checking your whole herd this season you should still be checking your At-Risk cows at least a month before mating.

You know the ones - cows that had:

Retained cleanings  
Dead calf  
Twins  
Vaginal discharge

Difficult or assisted calving  
Milk fever  
Inductions  
Prolapse

The evidence is compelling that these cows, if left un-treated, will be up to 25% less likely to conceive than their herd mates. The evidence is equally compelling that if we can examine these cows and treat them at least 4 weeks before mating starts, we can reduce that percentage to negligible levels and give them an equal chance of getting in calf to AB.

So please note these cows down as you see them and put them up for examination 4-6 weeks prior to mating.

In fact, the earlier we treat them (within reason), the better the chances of getting them in calf. Metri-clean is designed to be used from 2-4 weeks after calving (this gives the uterus time to reduce in size). Early identification, good record keeping and treatment with Metri-clean will vastly improve your cows' chances of staying in your herd for another season.

## The Value of Early Intervention

### How long are you going to mate for this season?

If you start mating on the 20<sup>th</sup> October your calving start date is around 29<sup>th</sup> July.

A Christmas day conception results in a 3<sup>rd</sup> October calving and pulling the bull out on New Year's Day means your last calving will be on the 10<sup>th</sup> of October. That's just over a 10-week mating period. If you go to the end of January then you will still be calving after the start of AB and we're getting back into the pre-induction days of the 1960's & 1970's.

### Do you really want that?

So let's settle on a 10 week mating period as a fair compromise. You'll still have some cows calving late, but if you get all your ducks in a row the bulk of the herd should be in well before the end of September allowing sufficient lead-in time to mating. **With the help of early intervention.**

We've banged on about this for years but the biggest return on your investment (and that's what it is) with cidrs, etc, is when you use them pre-mating, i.e. **starting about 9-10 days before you begin AB.**

Here's the numbers based on a \$6.75 pay-out for a 400-cow herd with an expected rate of non-cyclers 10 days out from AB at around 20% (around 80 cows):

- 10 days prior to AB the costs of treatment will be around \$4,600 but the income from earlier conception & more days in milk, more AB calves, etc. will be around \$9,000; a nett return of about \$4,400. That's not a bad return on investment.
- If you wait 21 days there will be fewer cows to treat so your costs drop to just under \$800 but your return on that investment is just under \$700 because of lost days in milk, less replacement calves & so on so it will cost you just over \$100.

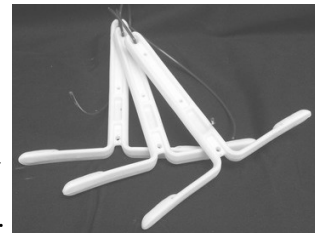
Breaking that down to a per-cow scenario:

- ◆ 10 days out the nett return is about \$55 per cow
- ◆ 7 days after the start of mating the return is about \$24 per cow
- ◆ And waiting until the end of the first round? It will cost you about \$8 per cow so you're actually losing money if you treat any later than about a week after the start of AB

Remember these figures are calculated for farm owners. **If you're a 50/50 sharemilker then the only time you'll get a positive return on investment is if you intervene early.**

These numbers are based on the usual assumptions of milk production, extra feed costs for more cows calving early, added value of an AB heifer calf & pay-out. There is enough evidence out there after many years of early intervention to back these figures up so if you're serious about having a compact calving & getting more income from more days in milk, then early intervention really is a no-brainer.

Either that or we go back to the days of 3-4 month calving spreads and mating into March.



*A guy starts his new job at the zoo and is given three tasks. First is to clean out the bird enclosure. As he does so, a feisty little finch swoops down and attacks him. To show who is boss, he beats it to death with a spade. Realizing his employer won't be best pleased he disposes of the finch by feeding it to the lions, as lions will eat anything. Moving on to the second job of clearing out the Chimp house, he is attacked by the chimps that pelt him with coconuts. He swipes at two chimps with a spade killing them both. What can he do?*

*Feed them to the lions, he says to himself, because lions eat anything ... he hurls the corpses into the lion enclosure. He moves on to the last job which is to collect honey from the South American Bees. As soon as he starts, he is attacked by the bees. He grabs the spade and smashes the bees to a pulp. By now he knows what to do and shovels them into the lions cage because lions eat anything. Later that day a new lion arrives at the zoo. He wanders up to another lion and says, "What's the food like here?"*

*The lion says: "Absolutely brilliant, today we had Finch and Chimps with Mushy Bees !"*

## **BVD testing of bulls – this is a must**

### **Avoid disasters – make sure all your service bulls are BVD free**

BVD is a widespread viral infection of NZ cattle and has a negative impact on cattle performance and productivity, including growth of young stock, pregnancy rates, susceptibility to disease and milk production.

A proportion of cattle that get exposed to the virus become carriers for life. These are the animals that become infected whilst still a foetus. These 'persistently infected' (PI) animals are the major cause of spread of infection and should be detected and culled.

Persistently infected bulls are a great way to spread BVD as they shed large amounts of virus. They are also introduced to the herd at a time of greatest potential impact – during the first 3 months of pregnancy. The virus reduces conception rates and causes increased early embryonic loss. PI bulls are often subfertile. Unvaccinated bulls which catch BVD remain subfertile for months. If this is not enough, some of their surviving calves will be PI's and perpetuate the virus by infecting all the stock around them.

To avoid such disasters, it is essential that all bulls brought in for mating are tested free of BVD virus to make sure they are not PI, and also BVD vaccinated prior to their use (ideally several months before use if possible).

When purchasing bulls that are advertised as BVD tested, ask to see a veterinary certificate of proof or the actual laboratory results. Make sure the result says 'BVD Ag negative' or 'BVD PCR negative.' If they haven't been BVD tested, purchase them conditional on a free test. Purchase them early enough to allow this to happen and give time for 2 vaccinations one month apart prior to their use – i.e. purchase at least 6 weeks prior to putting them into the herd or from a bull supplier who vaccinated them in the winter.

Given the devastating economic impact a BVD persistently infected bull can have on a herd, it is a no brainer to insist all bulls are BVD free and vaccinated at the time of purchase, even if you have to pay slightly more for such assurance.

Incidentally TB testing of service bulls is free so if there is any doubt on the TB status of a bull ring TBfree New Zealand on 0800 482 4636 to check the status or arrange a test.

For more information on BVD, refer to [www.controlbvd.org.nz](http://www.controlbvd.org.nz)



## **Heifer Synchrony with a CIDR programme**

Breeding replacement heifers to AI is the fastest way to increase genetic gain in your herd. It also helps your heifers calve early and gives them the best chance to get back in calf in their first lactation.

If you are considering AI on your replacement heifers, then it may be advisable to synchronise them with a 'Cosynch' programme. This programme involves:

- Day -9: Insert CIDR & Inject GnRH
- Day -2: Remove CIDR & Inject PG
- Day 0: Inject GnRH & Inseminate

This is similar to the non-cycler programme for cows, but as heifers respond faster than cows to this programme, AI is performed straight after the final GnRH injection.

This programme showed the best economic return on investment in a trial of three heifer synchrony programmes in 2008-9 by Scott McDougall and Chris Compton. In this study the Cosynch programme achieved a first service conception rate of 57%.

However the success of any heifer synchrony program depends on heifer liveweight and general health. Reaching liveweight targets is essential to ensure heifers have achieved puberty and are cycling. The In Calf program liveweight target for a heifer at mating is 60% of her mature weight.

In the run-up to mating ensure heifers have good parasite management and trace element status and vaccinations are up to date. The In Calf program and your veterinarian can provide comprehensive advice to help you set your heifers up for a successful mating.

## **Blood in Milk – Is it Mastitis?**

This is a relatively common occurrence - a cow or heifer calves with a very full udder (almost to the point where it looks like she might burst) and pretty much from the first milking she has blood in her milk. Is it mastitis and should you treat it?

Good question. Initially this is simply blood due to excessive pressure within the udder & in many cases as soon as she's been milked a few times the pressure is reduced, the bleeding stops & milk returns to normal.

However, the complication is that blood is a wonderful medium for the growth of bacteria so it's not that uncommon for mastitis to develop. Our advice is initially to assume the bleeding is due to pressure (unless the cow is sick) & all you should have to do is give the cow an anti-inflammatory (Metacam, Ketomax, Flunixin or Rimadyl), milk her twice a day & wait for the milk to return to normal.

However, you also need to monitor the cow and the udder & milk for signs of pain, illness or clots (blood clots &/or mastitis clots). If there is any suggestion that the situation has changed then you need to treat it as mastitis.

If it's just in one quarter then use an intramammary. If it is in multiple quarters then use an injectable such as Penethaject, Mamyzin or Tylan.

And don't forget the pain relief.