

SHOULD I METRICHECK MY HERD?

Studies show that around 17% of cows in New Zealand herds will have endometritis (be a "dirty" cow). Some herds will be higher than this. In these cows the bacteria, pus, and inflammation associated with the infection can have a major impact on their reproductive performance come mating time.

Cows with endometritis will take longer to cycle, longer to conceive and ultimately will have a higher empty rate. How do you tell which cows are dirty and how many of them there are in your herd? - **Metricheck.**

Metrichecking can be approached a few different ways.

- 1) Metricheck at-risk cows (assisted calvings, twins, retained fetal membranes, skinny cows, sick cows, down cows) around a month prior mating. While this is better than not metrichecking at all, it risks missing 30% of the total number of dirty cows in the herd.
- 2) Metricheck the whole herd around a month before mating starts.
- 3) Do multiple metrichecks beginning around three weeks after the first cow calves and then repeating them around every three weeks so that the herd is checked around three times (referred to as batch metrichecking).

A New Zealand study showed that cows that were metricheck positive (had pus in the cup when metrichecked), at a single whole herd check, a month before the planned start of mating, had a 15-20% lower six week in calf rate than the cows in the same herd who were metricheck negative. That is a big impact on fertility!

Another large NZ study involving 15,500 cows on 29 dairy farms compared doing one whole herd check with the batched metricheck approach, as above. This study found that the metricheck positive cows identified and treated in the batched approach had a 10% higher six week in calf rate and a 3% higher twelve week in calf rate (or a 3% lower empty rate) than the cows identified and treated using the one whole herd metricheck approach!

So, from New Zealand research, it is clear that:

- dirty cows left untreated have significantly lower fertility and will impact your herd's overall in-calf rates
- herd metrichecking is more effective than trying to pick at-risk cows to check and treat
- doing one whole herd metricheck a month before mating is more effective than either no check or checking at risk cows but is less effective than batch metrichecking every 21 days for around 3 herd checks.

Can you afford to leave you dirty cows untreated this mating season? You could gain a lot of extra days in milk and reduced cow wastage simply by metrichecking!

This season we are offering whole herd metrichecking at a **fantastic price of \$120/hr** with our new technician, meaning you have even less excuse not to do it.

Call the clinic to organise your metrichecking and/or your metricuring.



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September 2022

Now I know you don't want to think about mating when you're still finishing calving, but that's life I'm afraid. It's like trying to work out which All Blacks team is going to turn up each week...

This is a crucial month with mating coming up in October. There are a few things you need to get in place well in advance of a successful mating season. Body condition is a no-brainer. If your cows have lost a lot of condition since calving (or started in lower condition than you would have liked) then you've got work to do to try & have them in a good state by the time mating begins.

Aside from that, what else should you be sorting out this month?

Well, metrichecking is probably the first thing. If you're looking for "dirty cows" you need to identify them & have them treated well before mating begins. There's no point leaving your metrichecking until Cidr time; they should have been checked and treated ideally at least 4 weeks before mating begins. If you're trying to treat dirty cows when you're putting cidrs in your non-cyclers, those cows are already 2 to 3 cycles away from conceiving. So get it done this month.

What about pre-mating bloods? If you already have a trace element supplementation program in place, then this probably isn't as important.

But if you don't, now is the time to check everything is okay & address any deficiencies if it's not. Book a blood test from 10 representative cows this month.

Do you have bulls coming? Have they been tested and vaccinated for BVD? What about your heifers? Do they need a BVD booster prior to mating? And if so, are they out grazing somewhere? And of course, tail-paint. Or whatever heat indicator you use. That should be in place a good 4 weeks prior to mating so you can identify any non-cyclers in the lead-in to mating. And speaking of non-cyclers. Don't forget that you get the best return on investment if you treat your non-cyclers 7-10 days before your planned start of mating. Waiting a week into mating reduces your return to a fraction of what it was a week before (& if you're a 50/50 sharemilker you're breaking even at best a week into mating). If you wait until the end of the first round, you're breaking even at best if you are the farm owner. If you're 50/50 you're now losing money on your investment. It's all about days in milk. You've heard all this before I know, but it's always worth repeating. As I said at the start, you've got a lot to think about. Let Foster & Co worry about The All Blacks; you've got enough on your plate. Oh and by the way, God Save the King!

BVD SUMMARY

Infection with BVD has been estimated to cost the average 400-cow NZ dairy herd over \$18,000 per year. That's why most of you use LIC's BVD vat monitoring scheme to detect a BVD incursion early. Every year the BVD vat monitoring scheme shows up at least two herds newly infected with BVD. In our worst year there were eight. Many of those herds thought of themselves as closed herds.

If you want to keep BVD out of your herd there are two essentials, either vaccinate the herd or test replacement calves every year. Either way, you still need to vaccinate your bulls and test any incoming stock (bulls or bought in cows). If you follow those simple rules, you should be fine, and if everyone followed those simple rules, we could eradicate BVD from NZ!

If you want to start testing your calves, you can contact LIC and do the ear-notching yourself (same as for DNA), or we can test calves when we are disbudding them. If you want to vaccinate your herd about 4 weeks before the start of mating is the ideal time for their annual boosters.

Calves and heifers can also suffer from BVD. Unless you can arrange a BVD free grazing situation where all animals have been tested BVD negative vaccination is the main control measure. Calves can get quite sick if exposed to BVD and have reduced growth rates. Heifers can turn up empty or have deformed calves because of BVD. If you're already vaccinating your calves, it makes sense to give them a booster vaccination as heifers before the start of mating.

Remember that the essentials of BVD control are either testing replacement calves or vaccinating the herd each year and the research shows a good return on investment. We recommend that you choose one of these and get started. It's much better to put prevention in place before you have an outbreak!

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Newsflash!

Scientists have discovered that women who put on a little extra weight as they age live considerably longer than the men who point it out.

WHEN RECYCLING IS A REALLY BAD IDEA

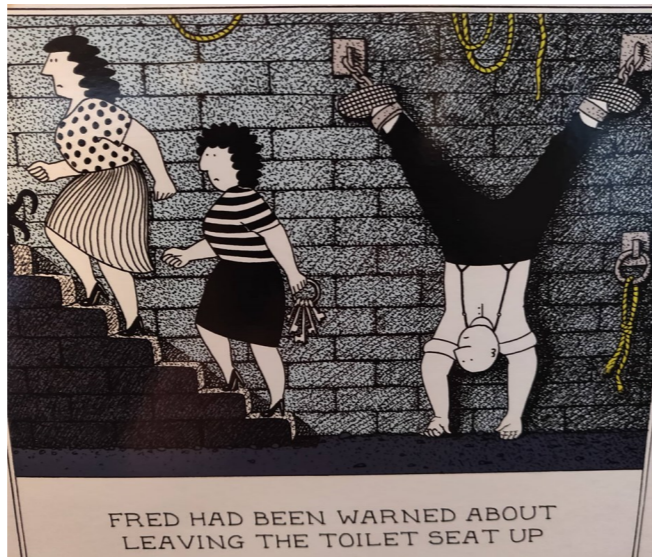
Ongoing Foot and Mouth Disease outbreaks in SE Asia mean we all need to be on high alert. A Foot and Mouth disease outbreak here would jeopardise all our livelihoods and cripple New Zealand's economy for years. The 2001 Foot and Mouth Disease outbreak in the UK was caused by feeding untreated meat waste to pigs. *It is vital that people who feed waste food to their pigs understand that feeding untreated meat waste might introduce Foot and Mouth Disease.*

If you, or anyone you know, wants to recycle food waste to pigs, you must first discard all food containing meat and any food that has come into contact with meat. If you can't do that, by law, you must boil the food waste for one hour, stirring it all the time and keeping it at boiling point for the full hour to ensure that disease causing bacteria and viruses are destroyed.

"Meat" includes any material taken or derived from an animal. It does not include eggs, milk or milk products and rendered material such as blood meal, tallow or meat and bone meal. If you are not certain what's in food waste or that it's been properly heat treated, don't risk it. If you suspect that untreated food waste that contains meat or has been in contact with meat is being fed to pigs you can report the pig owner, or the waste food supplier, to Biosecurity New Zealand on 0800 00 83 33. Your details will be kept confidential.

He waka eke noa, we are all in this together.

And if you notice unusual symptoms in your animals, contact us ASAP. There is more information on www.mpi.govt.feeding/feeding-food-waste-to-pigs



Heifers are due for their pre-mating BVD Bovilis booster now

Please phone **to book or discuss**

Tips on Treating Calf Scours

So you've got scouring calves. Welcome to the world of calf rearing. While it's tempting to think that addition of a tablet, powder or injection will sort your problem out there are a few basics that really should be non-negotiable when dealing with calf scours and calf rearing in general:



- Isolate scouring calves from healthy ones
- You may have seen articles suggesting taking infected calves out of pens will cause problems with socialisation later on. From our viewpoint, we would rather you isolated infected calves whenever possible not only to make individual care & treatment easier for the poor person who has to nurse them but also to lessen the chance of spread to more calves. In a big pen this becomes even more important. I'm sure they will all get to know each other later on.
- Don't add newborn calves to an infected mob (it happens)
- Treat scouring calves with electrolytes to replace lost fluids & salts
- If it's nutritional scours, often removal of milk for one feed and replacement with electrolytes will be enough.
- If it's an infectious cause you can't withdraw milk for too long because of the lost energy that results. If the calf is really sick, withdraw milk & feed electrolytes only then either add electrolytes to subsequent milk feeds (making sure fresh water is always available) or alternate during the day between milk/milk replacer and electrolytes.
- Try and find out what the cause is. If we can identify the cause then we can use the correct treatment to sort the issue out quickly. We can test scour samples at the clinic for same day results.
- **Always make fresh water available to all calves.** We are constantly amazed to find calves with no access to fresh water. A dehydrated calf will actively seek water (if it's able to stand) so make sure it's always available.

Treating Coccidia before it causes lasting problems

As every farmer and calf-rearer knows, raising replacements can be a challenge. Diarrhoea is one of the costliest problems, so sorting out the cause is key to calf welfare and profitability. One of the most common but easily treatable causes of diarrhoea is coccidiosis. The parasite is a major problem for young calves and can spread quickly through a mob with devastating short- and long-term effects. Coccidiosis can be clinical, showing some or all of the following symptoms:

- Dark green to blackish diarrhoea
- Presence of blood and threads of fibre in stool
- Abdominal pain and straining
- Fever and lack of appetite

However not all calves will show symptoms of infection. A subclinical case can be invisible, but the damage is still being done. Plus the continued shedding of coccidia 'eggs' (oocysts) and escalating environmental contamination may then lead to clinical coccidiosis in the mob.

It's important to remember that when clinical signs are seen, serious damage to the calf's gut has already occurred, reducing her ability to absorb feed and liquids, and opening a way for other bugs to cause infection. Even when the disease is treated, the gut does not fully recover for several weeks, and appetite may be suppressed. Longer term effects include poorer milk production at first lactation.

The good news is that studies have shown that early, preventative treatment with Baycox C not only stops coccidia, it can result in earlier first service and higher conception rates. In other words, treating calves well before they display clinical symptoms is vital to your farm's prosperity.

Nearly all calves have been exposed to coccidia by the time they get to 4 or 5 weeks old. So it makes sense that all calves between 4-10 weeks of age should have the opportunity to be protected against coccidia before it causes them trouble.

The good news is that you have 3 options now.

Either **Baycox-C** or **Catalyst Mini dose** for young calves still in the shed (it only treats coccidia) or in the face of an early outbreak.

For older calves that are now outside most of the time you can use **Turbo Initial**, which as well as treating them for coccidia, also treats them for worms. So it makes an ideal first or initial drench around the time of weaning.



To discuss your options give Daniel a call.

The Value of Early Intervention

How long are you going to mate for this season?

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

A Christmas day conception results in a 3rd October calving and pulling the bull out on New Year's Day means your last calving will be on the 10th 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 7-10 days before you begin AB.**

I'm not going to do numbers because a couple of years ago someone much smarter than me rang up to tell me my calculation was incorrect, and the return was x rather than y. I defended myself by saying the figures weren't mine but were from many sources from many studies done over many years. He still wasn't convinced.

So instead I'll just tell you the basic trends:

- 10 days prior to AB the costs of treatment will obviously be higher because you're treating more cows. But the income from earlier conception & more days in milk, more AB calves, etc. means you get a positive return on investment.
- If you hold off until the end of the first week, you'll still get a positive return, but it will be less than half what you would have got if you had treated 7-10 days before the start of AB.
- If you wait 21 days there will be fewer cows to treat so your costs are lower but your return on investment is negative because of lost days in milk, less replacement calves & so on. So it will cost you to delay until the second round.

The main message is that the earlier you treat, the bigger the return on investment. If you wait until the end of the first round there is no return on investment and the whole thing is costing you money.

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 before the start of AB.**

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 assertions 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.

JOHNE'S DISEASE

Johne's disease (JD) is a common problem in cattle in Taranaki. Johnes is caused by the bacteria *Mycobacterium avium* subspecies *paratuberculosis* invading the cells lining the small intestine. There is no cure, no vaccine in NZ and it is always fatal. Clinical JD disease is characterised by ill-thrift, progressive weight loss and profuse diarrhoea. The major source of infection in a herd is infected animals shedding bacteria in their faeces. Calves are most susceptible to infection and most at risk under 6 months of age, although older stock can also become infected. If a clinical case of JD occurs it is very likely that other animals in the herd will be infected even though they may appear healthy. In JD milk yield is affected before fertility or body condition. Milk production is reduced by about 25% in the lactation before the cow becomes clinical so for each sick cow there are probably several more infected cows which have reduced milk yield but are not yet scouring. JD isn't going away, as farming intensifies it is likely to increase. Higher stocking rates, effluent discharge on to land instead of into waterways and housing cows all make it easier for JD to spread. Johnes's disease is not a problem for every herd but don't be too quick to decide it is not a problem for yours.

At Eltham Vets we look after about 226 herds. In 2020/21 twenty nine herds found infected cows through the milk test. Another 34 herds found infected cows through blood testing.

That's 63 herds so **27% of our herds had a positive Johnes's Disease test in just one year.**

Testing and culling infected cows is one way to decrease JD in your herd. LIC offer a JD milk test which is done on samples taken at a routine herd test. The cost is \$4.85 ex gst per cow. Blood testing will always have its place for individual skinny scouring cows, but the milk test offers you an opportunity to detect and cull infected cows while they are still in good enough condition to go to the works, that revenue pays for testing bill.

JD affected cows pass on the infection in their diarrhoea so removing cows from the herd before they start scouring removes the biggest source of infection for the next generation of calves.

If you would like more information about the test, please phone to request an explanatory PowerPoint by email or speak to Polly or Teresa

