

**Farm news**

February saw the first of **Calweton's Farm Walks** for the year. Many thanks to the Rowe family at Trewint Farm and Robert's family at Blabel Farm for volunteering to host the farm walks!

Both walks were very well attended, and topics covered included pneumonia investigation on farm, Bull Fertility Testing and Heifer Pelvimetry, TBAS discussion and finishing from grass (photos below!).

If you would be interested in hosting a farm walk, or would like any particular topics covered, please send an email to **training@calwetonvets.co.uk**

**Congratulations** to Rochelle and Zoe who have both completed their ATT training and assessments and are now qualified and out TB Testing on farm!

Sheila will sadly be leaving us for pastures new in the middle of March, we wish her all the best for her next adventure!

**New Faces!**

Monique recently joined the farm department as a Farm Vet, a great addition to the team! She is looking forward to getting out on farm and meeting our farm clients!

We have also welcomed two new members of staff in the Farm Office – Becky and Jess have both joined us part time in the office and Jess will also be training as an ATT! Please be patient as they are learning and say hello when you pop into the office!



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## Colostrum for your crias

For many herds unpacking season is fast approaching and it's time to start preparing so we're ready to act promptly if anything doesn't go to plan!

Crias are born without a functional immune system so are completely unprotected from disease in their first few weeks. They receive temporary immunity through their mother's colostrum, which protects them until their own immunity is up and running. Success depends on the Quality, Quantity and Quickness of colostrum consumption. It's vital to contact the practice promptly if you have any concerns about a female's milk production or cria's ability to nurse.

Crias must consume 10-15% of their bodyweight in colostrum over the first 24 hours. A newborn cria's gut is like a sieve with small gaps which allow transfer of antibodies from ingested colostrum into the bloodstream. These gaps start closing immediately after birth, so antibody transfer is only possible for around 6 hours, meaning this time period is very important to monitor (from a distance!). If the cria receives insufficient colostrum in this time it will be very susceptible to disease – this is known as failure of passive transfer (FPT).

### Several factors increase the risk of FPT:

- Low birth weight (<7kg)
- Premature
- First time mother
- Difficult birth, caesarean or retained membranes
- Dam had problems with previous cria
- Unobserved birth
- Poor weather
- Afternoon or evening birth



If you are unsure sufficient colostrum has been consumed, the cria should be blood sampled as a priority from 24-36 hours old. Sampling can be done on farm or at the practice. Blood is tested in-house to determine if the cria would benefit from a plasma transfusion.

Plasma for transfusion must be taken from adult animals **prior to unpacking season**.

The ideal donor animal is:

- Male or non-breeding female >60kg, ideally >3yo
- Up to date with clostridial vaccination (booster given at least 2 weeks previously, preferably 10-way vaccine)
- Healthy with pink membranes
- Has not donated blood in last 2 months
- Co-operative!!

Plasma collection is carried out on farm. Each adult donor provides two cria treatments. It can be kept frozen for up to 5 years in deep freeze, however in standard freezers the valuable life-span is around 1 year. Disease risk on farm changes year to year so recently harvested plasma is likely to be more effective against the current disease situation.

When treating FPT, plasma should be gently defrosted and given intravenously by a vet. Occasionally owners will give plasma by mouth but this is a waste!

- <6 hours after birth, although both contain antibodies, colostrum should be given in preference to oral plasma as it also contains energy (and is cheaper!).
- >6 hours after birth oral plasma is ineffective as the spaces in the gut are too small for the antibodies to pass through.

Legally plasma can only be given from animals in your own herd – it cannot be sold or given away. This is essential for biosecurity and prevention of disease spread through the national herd. However, in exceptional cases plasma may be provided by the origin herd to first generation crias born to alpacas sold within last 3 years if no donor animals are available.

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## Training alongside Skern Training and Skills

Through our practice training we promote relationships with other training providers. Our overall aim is to support the agricultural community in driving optimum herd health and business resilience.

One of the organisations we support is STS – we have included some information about the apprenticeships they offer below.

STS (Skern Training & Skills) have been providing business training for over 45 years and is a main apprenticeship provider offering Level 2 & 3 Agricultural Apprenticeships. Listening to industry and employer needs, the programmes are designed and delivered to meet the ever-evolving agricultural sector by qualified lecturers.

Our programmes are industry-led, and we deliver at venues near the apprentices, with a mix of practical, face-to-face and e-learning sessions. The STS team can support matching apprentices with employers, and advertising vacancies, your assigned mentor will work with the apprentice throughout their programme.

The STS team are holding several information evenings this spring for potential apprentices and employers to meet us and find out more. The evenings are all 7-8pm and will be held:



- Monday 3rd April at Hayle Rugby Football Club, Memorial Park, Hayle, TR27 4PS
- Tuesday 4th April at Kernow Training, 1 Burthy Bungalows, Summercourt, Newquay, TR8 5BN
- Wednesday 5th April at Lifton Community Centre, Devon PL16 OLA.
- Thursday 6th April at Devon Young Farmer Centre, Cheriton Bishop EX6 6JH.
- Tuesday 11th April at Skern Lodge, Appledore EX39 1NG
- Wednesday 12th April at Maiden Newton Village Hall, Dorset DT2 0AE.

If you would like to know more information, please attend one of the events above or contact [enquiries@skerntrainingandskills.co.uk](mailto:enquiries@skerntrainingandskills.co.uk) or call 020 3058 4517, alternatively visit [www.skerntrainingandskills.co.uk](http://www.skerntrainingandskills.co.uk)



### In this edition...

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## Infectious diseases of cattle and sheep

This article gives an overview of infectious diseases on farm providing principles of disease control with specific examples presented to us on farm.

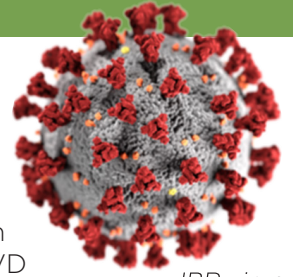
We have certainly had our eyes opened over the last few years when an infectious disease has had a profound effect on our lives - we have been able to relate the policies put in place during Covid-19 to how we manage disease on our farms.

The adage of 'Measure to Manage' is very relevant in infectious disease control. We have diagnostic tests at our disposal. We can use blood testing to monitor animals' exposure to a disease to tell us whether a certain disease presentation is related to symptoms (for diseases such as IBR, Johnes or Neospora). On the back of results, we can make an informed decision on vaccination or if on an individual basis such as Johnes disease, to identify and subsequently cull the animal. For lactating animals, milk testing offers either a herd or individual test for diseases such as BVD, IBR, Leptospirosis, Johnes, Mycoplasma and Fluke as examples. Post-Mortem of acute cases (not chronic) can give useful diagnostic information. Several cow-side tests offer rapid diagnosis, examples being calf scour. Bacteriology/virology of swabs is proving useful in diagnosis of causes of calf pneumonia. Direct microscopy can reveal parasites such as cryptosporidium and coccidiosis.

We use this 'evidence' to decide as to the best way of future prevention and eradication. We mustn't forget the importance of clinical signs with some diseases having classic presenting signs - several have non-specific signs together with at what age of animal they occur in.

Having a preventative plan in place revolves around

eradication, vaccination, and biosecurity. The decision will be dependent on the disease in question. For example, the BVD Free programme relies on revealing the carrier animals in the herd and their removal. Other diseases on farm are endemic. We realise that we can control these by putting a vaccination programme in place. Vaccination, as we saw during Covid, can significantly reduce the occurrence of disease. Vaccination increases the specific immunity by the production of protective antibodies to a virus (IBR, BVD), bacteria (Pasteurella, E Coli) or parasite (lungworm, ringworm).



IBR virus

Colostrum offers animals another source of antibodies specific to diseases on a farm and the importance of providing optimum levels of colostrum and it's bearing on disease in young animals up to 9 months of age cannot be over-emphasised.

Biosecurity aims to keep disease from entering the farm. Closed herds offer the best protection but this does not fit in with many farming systems so biosecurity revolves around knowing the disease of animals being brought onto the farm. Disease prevention revolves around managing risk factors.

We are always available either over the phone, when dropping into the office or when we are out on farm to discuss and questions or concerns you may have on infectious disease on your farm.

The Animal Health and Welfare Pathway (AHWP) offers free advice on issues affecting your animals' health and production so please take advantage of it.



If you would like more information on what we've discussed in this month's newsletter, please speak to any of our farm veterinary team.

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