Beef and Sheep Newsletter

Autumn 2021

CAMPERDOWN VETERINARY CENTRE

CVC CLINIC NEWS

Welcome to the Autumn newsletter for Beef and Sheep producers. Once again our excellent growing season has resulted in the occurrence of some less common disease processes.

Barbers pole worm and sheep measels will be covered in this newsletter as well as routine vaccination and pregnancy toxaemia in ewes.

CVC will be hosting a client information evening covering a range of topics such as sheep nutrition, the value of bull testing and the importance of vaccinating your herd—WATCH THIS SPACE! More information to follow…..

Our Skipton and Derrinallum clinics are open in line with current COVID-19 restrictions . We are available on-farm on Wednesdays for routine work up North and every day for emergencies! Please contact the clinic on 5593 1077 to book an appointment or if you would like to talk to one of our friendly team!

Barbers Pole Worm (*Haemonchus contortus*)

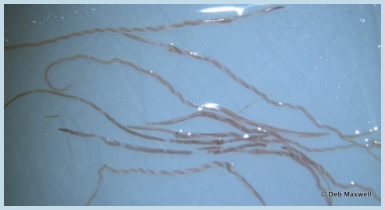
Climatic conditions determine where barbers pole worms occur and the time of year they are most prevalent. The development of eggs and larvae requires moist pasture in the warmer months of the year. Traditionally an issue in the more Northern areas of Australia— our recent warm, humid summer has led to the occurrence of Haemonchus burdens within our Southern flock.

Barbers pole is a blood sucking parasite found in the abomasum (fourth stomach) of sheep and goats. The Adult female worms are 20-30mm in length and are visible due to the characteristic “barbers pole” which is created by the spiraling of the worms pink intestinal tract and paler reproductive tract. Females are prolific egg layers, laying up to 10,000 eggs per day, and as such, much higher worm egg counts are usually seen with these worms than with scour worms. Recently we have seen counts upwards of 7,000 eggs per gram, indicating barbers pole as a potential issue.

The life cycle is typical of roundworms in sheep. Adult worms lay eggs which pass out in the faeces of the host. The eggs hatch within a few days and microscopic larvae emerge. Larvae migrate on to the pasture, where are ingested when grazed by sheep. In the intestinal tract, larvae develop into adult worms in about three weeks.

Clinical signs:

- Death can occur suddenly without the common scouring/ill thrift associated with a high worm burden
- Anaemia
- Lethargy, collapse
- Submandibular oedema (bottle jaw)
- Wool breaks may occur in acute disease where stock experience critical anaemia
- In the chronic form of disease decreased appetite and weight loss are seen



Diagnosis:

- Faecal egg count, larval culture and visual assessment on post mortem

Treatment remains the same: A combination of appropriate drenching after faecal egg counts are performed, pasture management, consideration of class of animal and time of year/weather conditions.

If you have any concerns or would like to discuss further please don’t hesitate to call the clinic on (03) 55 931 077. Additional information on grazing management, drench decision guides and worm control programs can be found at http://www.wormboss.com.au/sheep-goats/worms/roundworms/barbers-pole-worm.php.

Sheep Measels *(Cysticercus ovis)*

Sheep measles (*Cysticercus ovis*) are infective cysts from the dog tapeworm *Taenia ovis*, found in the muscles of sheep and goats, especially the heart and diaphragm. Initially the lesions are fluid filled and contain an infective larvae, but degenerate over time and become hard calcified scars. Unlike *Hydatid* tapeworm, these lesions present no risk to human or sheep health, however their importance is due to the trimming, downgrading and condemnation of carcasses at abattoirs which can result in significant economic loss.

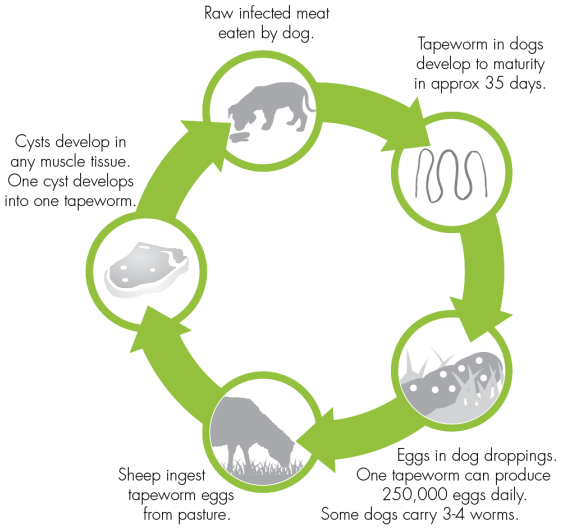
The life cycle consists of two hosts - the definitive host (dogs, foxes) and intermediate host (sheep and goats).

The tapeworm stage (*Taenia ovis*) occurs in the small intestine of the dog after infected, raw meat or offal is ingested. Tapeworms produce eggs that pass out in segments in the dog's faeces. If these are on pasture, they can be eaten by sheep or goats in which larvae develop and migrate to the heart, diaphragm and other muscles.

Just one cyst found in a carcass at meat inspection leads to mandatory exclusion from export markets and from domestic markets if there are more than a small number.

Unfortunately there is no treatment for infected livestock. Prevention and control is achieved by treatment of dogs on farm as well as controlling the fox population.

https://www.sheepmeasles.co.nz/the-issue/lifecycle/

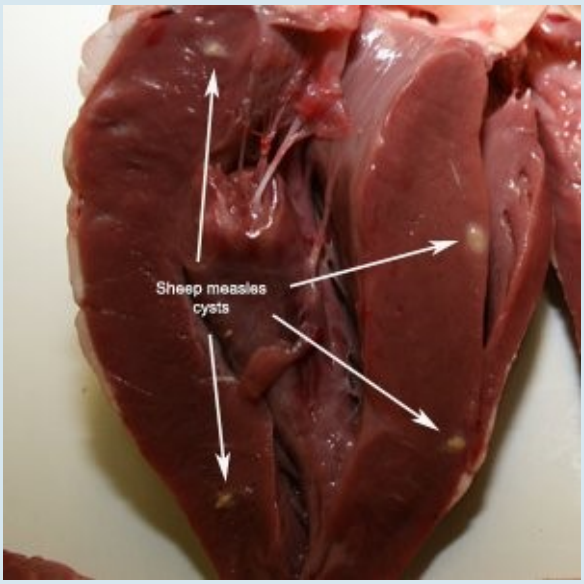


PREVENTION

Like hydatids, control is based on breaking the sheep-dog lifecycle.

- Kill tapeworms in the dog by regularly dosing with a tapewormer called **praziquantel.** This is found in many common dog wormers, but check the fine print, often cheaper products will not contain this.
- Dogs should be dosed every 4–6 weeks.
- Prevent dogs from eating offal or meat from sheep or other animals, unless *thoroughly* cooked.
- Dry dog biscuit is the safest choice to feed
- Treat all dogs on the property.
- Control fox population on farm; prevent dogs straying.

If you follow the above management measures, you will also protect your family and others from hydatid disease.



www.wormboss.com.au

To fully protect your dogs from both gastro-intestinal worms, fleas, ticks and mange we recommend a combination of the following two products:

Fenpral all-wormer: Dose every 4-6 weeks. Available in sizes for both small and large dogs.

Nexgard spectra: Dose once monthly with a palatable oral chew. Available in a range of sizes.

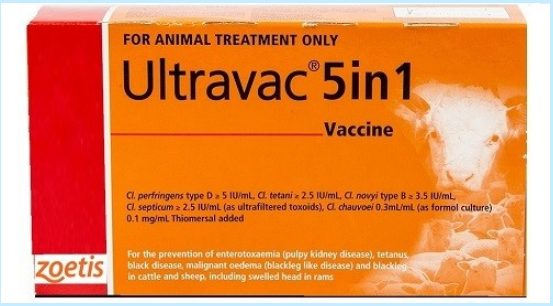
Vaccination

Routine vaccination is an integral part of good herd health management and disease prevention. Often when we are busy regular vaccination schedules can lapse, with the consequences not being seen until costly disease outbreaks occur.

Both **5in1, 6in1** and **7in1** vaccines provide cover for the most common clostridial diseases. Clostridia are widespread in the environment and are normally found in soil and faeces. They form highly resistant spores that can survive in the environment for very long periods. They are also present in the gastrointestinal tract of healthy animals and as spores in their tissues. **Not all species of clostridia cause disease, but those that do are usually fatal.**

Below are the most common clostridial bacteria:

- *C. tetani* (Tetanus)
- *C. septicum* (Malignant oedema)
- *C. chauvoei* (Blackleg)
- *C. perfringens* type D (Pulpy kidney / Enterotoxaemia)
- *C. novyi* (Black disease)



Disease occurs when these bacteria enter the body (via cuts, abrasions or ingestion) and conditions in the body allow multiplication of the bacteria and/or toxin production. Younger animals are at higher risk as procedures such as marking/castration/dehorning providing extra opportunity for clostridial invasion.

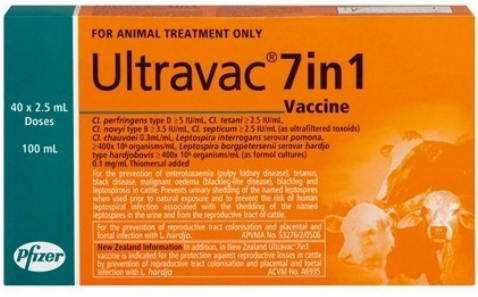
All animals must receive an initial vaccination (usually at marking) with a booster 4-6 weeks later. A yearly booster injection is then required, ideally pre calving/lambing to allow for good antibody levels in colostrum.

Ideally calves are vaccinated 4-6 weeks prior to marking with the booster vaccination occurring at marking. Unfortunately this can often be difficult to achieve, it is not uncommon for calves to receive the first vaccination at marking and the second at weaning.

7in1 has additional coverage for leptospirosis. Leptospirosis is a bacterial infection. In cattle it is caused by *Leptospira hardjo* and *Leptospira pomona*. Leptospira survive in cool, moist conditions, so this disease is common in cooler areas where there is surface moisture. **Leptospirosis is important in cattle as it can cause infertility, abortion and increased return to service.** In young animals it can cause severe, often fatal illness (with fever, jaundice and "red water" being common clinical signs).

By far the most important factor when considering Leptospirosis is its classification as zoonotic (meaning it can pass to humans). Transmission occurs through contact with urine or birthing fluid from affected cattle. Disease in humans is severe with fever, headaches, nausea, muscle pain and light sensitivity being common, it can take weeks to months for recovery.

The vaccination schedule for **ewes and lambs** is identical to that of cattle however the product differs slightly. 6in1 vaccine covers the 5 major clostridial bacteria plus Caseous lymphadenitis (Cheesy gland or CLA)



To discuss your vaccination requirements and for further information on other available vaccines please don't hesitate to contact the clinic and speak to one of our veterinarians on 03 5593 1077

Pregnancy Toxaemia In Ewes

Pregnancy toxaemia (also known as ketosis, twin lamb disease) is a metabolic disease seen in both sheep and cattle. This disease is due to inadequate food intake as a result of the increased nutritional requirements of late pregnancy. Changes to energy metabolism cause fatty acids and glycerol to be mobilized from body fat for production of energy. If the energy supply is insufficient, the liver becomes overwhelmed and ketones are produced.

Clinical signs:

- Often separate from the flock, dull and not wanting to move
- May be thin with large abdomen (multiple foetuses)
- Down and unable to rise or listless and easy to catch
- Later in the disease process there may be evidence of neurological signs (tremoring, convulsions, teeth grinding, star gazing)

Affected animals are usually pregnant ewes in the last month of gestation (often with twins) at either extreme of body condition (very poor or overly conditioned). Outbreaks are generally associated with a decline in plane of nutrition over some time followed by sudden periods of reduced intake or starvation caused by management changes (eg. yarding, transport, driving, sudden change in diet, cessation of supplementary feeding), reduced available feed quantity or quality, disease (lameness) or bad weather.

Diagnosis is usually based on history and clinical signs. Blood can be tested for ketone levels prior to treatment.

Other disease processes that can present with similar clinical signs include:

- Hypocalcaemia (milk fever)
- Hypomagnesemia (grass tetany)
- Other causes of blindness (polio, plant toxicity)

Veterinary examination and diagnosis is ideal however over the counter treatment is available. A combination of subcutaneous 4in1 and dextrose in combination with an oral propylene glycol can be utilised. Veterinary treatment will include these in intravenous form with the addition of anti-inflammatory medication, induction of lambing or caesarean if required.

Unfortunately due to the nature of the disease once a ewe is down response to treatment is often poor. Treatment in the early stages is much more successful. Ewes affected with both hypocalcaemia and pregnancy toxaemia often respond better to treatment and have a higher success rate.

Even if a ewe survives, abortion can be a common secondary complication.

PREVENTION IS BETTER THAN CURE!

Ultrasound scanning is a very useful tool, allowing segregation of single/twin/triplet ewes. These mobs can then be managed separately to best utilize and match available resources to nutritional requirements. Remember, ewes carrying twins require 2.5 times and triplets 3 times as much feed as a DSE.

Lambing Kits

Last year we introduced our Lambing Kits in an effort to help farmers maximise the health and welfare of their ewes and lambs. Kits can be tailor made to your needs. Common products include antibiotics (for rotten lambings/retained membranes and tears), anti-inflammatory pain relief, disinfectant, lube and gloves for good hygiene. Each kit comes with a handout describing the appropriate situations in which to use the medications. If you would like to discuss management of your lambing ewes, please contact the clinic on 03 5593 1077.

Camperdown Veterinary Centre

1 Leura Street , Camperdown

www.camperdownvet.com **Ph: (03) 5593 1077** **Email: team@camperdownvet.com.au**

Hours: 8:30am – 5:00pm (Monday – Friday) 9:00am – 12:00pm (Saturday)