

SEPTEMBER 2019

VET NEWS

RVM CONSULT

METRICHECK EARLY!

GRASS STAGGERS



Some photos by Richard Hilson

VETservices
www.vshb.co.nz

THE RESTRICTED VETERINARY MEDICINE (RVM) CONSULT

NAOMI BARRETT

It may seem at this busy time of year as though the RVM consult is just yet another thing that needs to be ticked off on an endless to do list for most farmers. However, the Vet Council of New Zealand stipulates that veterinarians may only authorise the prescription of restricted veterinary medicines (RVMs) for animals under their care. In order to fulfil these requirements, without needing to see every individual animal that is to be treated, we must complete an RVM consultation for each farm every 12 months.



This consultation allows us to gather the appropriate information on your farm and stock to assess which products are needed and best suited to your farming enterprise and to give you advice on the best practice guidelines for using these products. With on-farm audits becoming stricter we need to be vigilant about the process for dispensing RVMs to ensure no hiccups come audit time. An RVM product that is not already on your personal authorisation for the year will require a conversation with a veterinarian before it may be dispensed by our front counter staff.

Another important aspect of the RVM consult is the provision of information to ensure responsible drug use, in particular the prudent use of antimicrobial products in the face of increasing antibiotic resistance globally in both human and animal medicine. The article “the future of antibiotic use and prescribing for your animals” explains this in further detail.

An RVM consult can also be a great opportunity to sit down and discuss an Animal Health Plan for the coming year. Tailored specifically to your farm, this can be as detailed or as simple as you wish and can incorporate such things as management events, drenching/vaccination programmes and trace element testing and supplementation. Any specific animal health issues that you have encountered can be addressed at this time.

For more information on RVM consultations and Animal Health Plans, please contact the clinic.

INFECTED UDDERS HIT A SORE SPOT

ANNE GELLING

PAIN RELIEF FOR MASTITIS HELPS RECOVERY, REPRODUCTION AND LONGEVITY

They may be too tiny to see without a microscope, but the bacteria that cause mastitis can (literally) be a huge pain at this time of the year.

These microscopic bugs have no respect for your bank account, your workload, or your cows. While they often turn their toes up in the face of appropriate veterinary treatment, they rarely leave gracefully.

Antibiotics kill the infection, but these drugs don't immediately kill common effects of mastitis – swelling, heat, inflammation, fever, loss of appetite, depression and lethargy.

Almost all of these symptoms are associated with pain and reduced productivity. Even though cows have naturally evolved over hundreds of years to mask signs of pain from potential predators, the udder is sensitive at the best of times.

When one or more quarters is inflamed as a result of mastitis, that sensitivity becomes heightened. Your normally stoic cow

acts restless at milking, kicks the cups off, won't lie down in the paddock to chew her cud, and walks awkwardly to avoid banging her udder with her hind legs.

There's plenty of good data that shows using pain relief as part of mastitis treatment benefits in-calf rates, through earlier conception; and cow longevity, through significantly reduced culling.

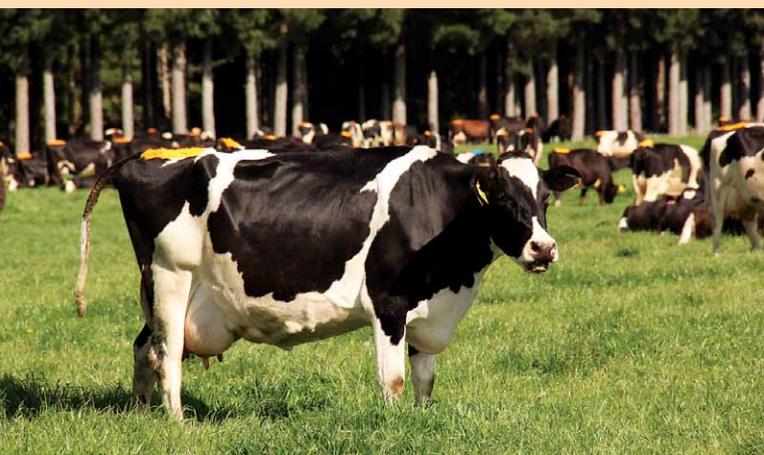
That's why we recommend an injectable non-steroidal pain killer (an anti-inflammatory) such as Ketomax for cows with mastitis, in addition to the prescribed antibiotic therapy, especially when the cow presents with a hard, swollen udder! Reducing that swelling will help your antibiotic treatment to disperse through the udder so much better as well as reduce discomfort and pain.

The simple act of minimising the pain of mastitis infection leads to a compounding sequence of positive outcomes; the faster sick cows start feeling better, the sooner they are back with their herd-mates, eating properly, milking to potential, cycling well and having a long, healthy lactation.

That's good for your bottom line, both now and next season. It's also good for animal welfare, and for keeping our industry socially sustainable in today's global market.

Call the clinic today to find out more about using pain relief to speed the recovery from mastitis and get your girls back to their best with minimal down time this spring.

Keep in mind that if your mastitis cow looks generally sick, sunken eyed and has an increased temperature (for those of you with a thermometer) she will definitely benefit from an anti-inflammatory treatment as well as fluids and antibiotics. We do advise you to ring your vet in these cases.



METRICHECK EARLY FOR HIGHER IN-CALF RATES

GEERT GELLING

FIND DIRTY COWS EARLY & REAP MULTIPLE REWARDS

Imagine if you could improve your 6 week in-calf rate in 'dirty' cows by nearly 10% and increase your number of early calvers with just one change on farm.

It may sound unlikely, but that's exactly what happened with 29 seasonal calving herds in a recent New Zealand study on endometritis.

Instead of the standard practice of metrichecking all the cows in each herd a month prior to planned start of mating, local researchers did something quite different.

They metrichecked cows in batches much earlier, i.e. just 2-4 weeks after calving, and as a result detected and treated endometritis in dirty cows much earlier.

This meant a change from simply metrichecking all the milking cows as mating approached.

But as detection and cure for endometritis was so much better from metrichecking smaller groups of cows earlier, even with the cost of extra treatment included, the return on investment was well over 400%!

As well as a 9.6% improvement in 6 week in-calf rate, cows metrichecked and treated 2-4 weeks after calving had a 3% higher final (12 week) in-calf rate.

The cows also conceived 8 days earlier than herd-mates who were treated with antibiotics at the traditional time of 4 weeks prior to PSM.

That's money in the bank no matter which way you look at it. Better yet, that's a cleaner, healthier, more sustainable herd. The gains are so definitive we now recommend early metrichecking and subsequent treatment of infected cows with MetriVet as standard practice.

Here's how it works. Endometritis is a sneaky infection in its own right, because 'dirty' cows often show no sign of illness. But the longer we wait before checking for infection, i.e. using a Metrichecker to find pus in the vagina, the harder dirty cows are to find.

That's because the cervix closes up after calving, stopping the pus exiting the uterus. In these cases it's easy to assume infected cows have cured on their own, when in truth the disease is still there but just can no longer be readily identified as needing treatment

These hidden dirty cows only show themselves later as non-cyclers or from lower conception rates, disappointing in-calf rates and/or more empties.

So don't just imagine a better 6 week in-calf rate and more early calvers next year – call us now to help make it happen.



MARK MATTHEWS RECOGNISED FOR HIS CONTRIBUTION

Mark Matthews retired from Vet Services late last year, after a long and understated career. We recognised his contribution to our company and to the farmers of HB on his way out but Mark only recently got the professional recognition that he truly deserved. The Alan Baldry Award is presented annually by the Sheep and Beef Cattle Society of the NZ Vet Association, Marks' peers, to a member of the Society who has made a significant contribution to the New Zealand sheep and beef cattle industry. Mark is the fifth Vet Services vet to receive the award which is quite a feat in itself.

Mark came to Vet Services from an early start in Pahiatua and was the sole vet in charge when the Hastings clinic was established in the early eighties. It is easy to forget what that entailed, being the sole duty vet and dealing with a new business and many new clients with all manner of animals. Mark's pleasant and unflustered



Simon Marshall (L) with Cath and Mark Matthews at the presentation of the Alan Baldry Crook.

demeanour is well known to all and he has always been able to turn his hand to any vetting job at all. Ostriches, deer, horses, sheep, cattle, deer, goats, alpacas, fitches, working dogs, any pet: Mark was a modern James Herriot in Hawke's Bay. He has a loyal following of farming clients in particular who, like his colleagues, recognise his incredible ability to understand and investigate on-farm issues.

Never in a hurry (and not great at keeping to time!), thorough in the extreme and rarely wrong, Mark was a complete rural vet. Mark has also been a role model for many an aspiring vet and indeed has been something of a draw card for Vet Services as a top vet to show new graduates the ropes. To work alongside Mark has been good for many of us!

Well done, Mark, on receiving the richly deserved Award and a fitting recognition of a huge and longstanding contribution to farming in the Bay.

B&LNZ MONITOR FARM FIELD DAY

THURSDAY, 31 OCTOBER 2019 • 9:00am—4.00pm
TE HAU WOOLSHED, 1235 Waihau Road, Patoka, Hastings
GUEST SPEAKER: DERRICK MOOT

You are invited to attend the inaugural field day for the B&LNZ Hawkes Bay Monitor Farm. Patrick and Isabelle Crawshaw have been hosting the program since its launch in February this year. The field day is a great opportunity to meet the team and see the progress made to date.

The day will start with an overview of the B&LNZ Monitor Farm program, description of Patrick and Isabelle's goals and KPI's for the farm and how their first year in business has worked out for them.

A large part of the day will be dedicated to the topic of legumes and how they are key drivers of production. Derrick Moot will lead an interactive discussion in the woolshed and then continue the discussion on the farm tour.

Please note there is to be no doubling on ATV's and helmets must be worn by everyone. Make sure you arrange your own farm travel and helmet prior to the event as we can't promise a ride on the day.

Please bring your own lunch. Morning tea and afternoon tea will be provided as will finger food and refreshments to finish the day.

**For further information contact B+LNZ's Mark Harris 027 577 9991 or
Vet Services Hawke's Bay Veterinarian Greg Tattersfield 027 473 8860**

Please register for catering purposes with
Penny Munro penny.munro@beeflambnz.com

VACCINATION RUN — WAIPUKURAU & HASTINGS

YES it is that time again!

YES We will come to your place mileage free to vaccinate your dogs.

YES We will contact you late during September to confirm times.

If you have not heard from us by early October you may not be on our runs.

Please call us at the clinic to ensure you don't miss out.

Waipukurau Ph: 06 858 9060

Hastings Ph: 06 876 7001



OUR VET TEAM

Napier & Hastings:	Clare Ryan, Dave Kruger, Dave Warburton, Georgina Campbell, Greg Tattersfield, Helen Crawford, Ian Leadbetter, Joao Dib, Neil Stuttle, Rachel Griffiths, Rachel Muir, Richard McKenzie, Roger McKinley, Sharné Boys, Siobhan Ellis, Stuart Badger, Veronika Pipe and Vicki Gilchrist.
Waipukurau:	Annelise Enslin, Anyika Scotland, Anne Gelling, Camille Flack, Caroline Robertson, Gabby Muschamp, Geert Gelling, Harry Whiteside, Kathryn Sigvertsen, Lucy Dowsett, Mike Fitzgerald, Nicolette Adamson and Richard Hilson.
Dannevirke:	Johnny Atkins, Kate Matthews, Naomi Barrett, Simon Marshall, Sophie-Leigh Anderson and Tim Hogan.
Masterton:	Anne Ridler, Jacques Van Zyl, Louisa Broughton, Naya Brangenburg, Nicola Haglund, Sandy Redden, Sanncke Neal, Sara Sutherland, Sarah Wolland, Stuart Bruere and Urthe Engel.

THE FUTURE OF ANTIBIOTIC USE AND PRESCRIBING FOR YOUR ANIMALS

JOAO DIB & ANNE GELLING

Over the past few decades we have seen growing awareness and concern regarding the resistance of bacteria to the antibiotics (aka antimicrobials) used in human and animal medicine.

For example, we have all heard of MRSA; a multiple resistant staph aureus causing life-threatening illness in the young, old, pregnant and immune-suppressed people. What can we do to minimize the emergence of resistance? Actually, we can all help; by using antibiotics only when deemed necessary and when doing so, using the right treatment for the right disease, at the correct dose rate and interval and for the correct length of time.

The World Health Organization (WHO) has compiled a list of all the different types of antibiotics and their importance to human health, and it includes 'critically important antimicrobials'. Based on the WHO list, NZ has created the "Traffic Light System" and you will see it more and more. Fundamentally, it is designed to ensure



GREEN – most penicillin-based (Intracillin 300/ LA, Depocillin, Bovipen) and Tetracyclines (Engemycin, Bivatorp, Alamycin, Tenalin)

YELLOW – Gentamycin, Sulpha Powders, Vibrostrep, Founderguard, Orbenin LA, all DCT products

RED – Excenel, Excede LA, Tylan, Micotil, Baytril, Marbocyl, Kelacef

that important antibiotics to human (and animal) medicine are used judiciously. Below, some of our most commonly used antibiotics are classified

GREEN - Antimicrobials for first line therapy under therapeutic conditions. First choice, first treatment attempt.

YELLOW - Antimicrobials only to be used for specific indications or used as a second treatment attempt when the first choice did not work.

RED - Antimicrobials considered important in treating life-threatening or non-responsive conditions in human and veterinary medicine where other antibiotics have no effect. These will only be used following veterinary diagnosis on a case by case basis with sufficient evidence to indicate need.

RED-classified antibiotics will be increasingly restricted, and Yellow and Green less so, BUT an antibiotic being GREEN or YELLOW does not equate free-for-all, unrestricted use!

Practically, it means that veterinarians will require more information and may need to come out to examine an animal, that might seem to you to be a very straight forward case, before being able to prescribe. Together, we need to ensure judicious use of antimicrobials.

By us all working together, resistance against antimicrobials will be slowed as much as possible and the use of antibiotics will be protected for future generations.

EQUINE INSURANCE – SHOULD I BOTHER?!

MICHAEL FITZGERALD

This is a question we are being asked more and more. Often, clients will explain that their horses or ponies are not worth very much money, and so they don't think it's worthwhile. With this in mind, I thought I'd put together some of the aspects to consider, and some of the questions to ask about your potential cover. I'll also summarise some of the costs you might expect for treatment for various conditions – you might be surprised! We always recommend you read the fine print in your policy, as this is just a guide. Types of Insurance cover available include:

MORTALITY INSURANCE

This is a reasonably straightforward cover – if your horse dies by illness or accident, you are usually covered. The insurer may put restrictions on what you are covered for, depending on the policy. E.g. you might not have cover if the horse dies from colic if he / she has a history of colic prior to the year's policy starting.

VET FEES COVER

Depending on your policy, this may be a set amount for your horse, or a proportion of its market value. From our perspective, as vets, this is the cover that provides you with most help and peace of mind. It means that you can go ahead and get that surgery, or get the treatment for your horse's joint problem, or run those expensive diagnostics straight away if indicated.

These advances often have equipment and products that are not cheap. Here are some ballpark figures:

- Colic – medical management (on a drip, in hospital) \$1000 - \$4000. Surgery: \$5000-\$10000.
- Wounds – rather than the stitch up at the time, it's often the bandaging that can go on for months that can run up a big bill. \$500 - \$7000 wouldn't be unexpected.
- Wounds involving joints – as soon as you need an anaesthetic and some joint flushing, the cost can skyrocket. \$2500 - \$12000.

- Joint / arthritis / tendon / foot therapies – This can include identifying the lameness using nerve blocks, joint blocks, x-ray, ultrasound, CT and scintigraphy (\$2000-3000 alone).

LOSS OF USE COVER

This often adds up to a significant amount but is often not paid out. Depending on your policy, you may need a vet certificate to find any pre-existing conditions, then it's often quite specific as to what your use is. For example, if you just had 'eventing' as a use, then your horse that has tweaked a sesamoidean ligament might be fine at a lower level, but may struggle to work at 3* again. If you haven't specified your level, you might not then get paid out.

You may have spent a significant amount of time and money on diagnosing the exact problem. So my advice is, always get appropriate vet fee cover if you're getting loss of use cover!

Hopefully this has been of some help. It's not our place to recommend an insurance company – we'll always encourage you to ring around to find the policy that suits you best.



RUMETRACE MAGNESIUM CAPSULES – INSURANCE AGAINST GRASS STAGGERS

Grass Stagers (hypomagnesaemia) is a metabolic disease that primarily affects adult lactating cows. Grass Stagers is caused by a deficiency in magnesium.

Unlike calcium, body stores of magnesium cannot be mobilised in times of high demand or in response to low blood levels. This means that cattle are dependent on an adequate daily intake of magnesium to meet metabolic requirements.

Grass Stagers can be rapidly fatal. In extreme circumstances the first sign can be up to 20 – 30% of the cow herd found dead. More commonly, initial signs of restlessness, increased alertness, and suddenly running for no apparent reason are observed.

When disturbed, cows may bellow and walk with an unusual gait. These signs can rapidly lead to uncoordinated staggers and convulsions, often leading to death unless immediate treatment is provided.

Many factors can contribute to Grass Stagers. During lactation the magnesium demands of the cow are sharply increased, as magnesium is an integral component in the production of each litre of milk. Cows over 4 years are most at risk as their milk production is higher than younger cows, as are higher producing cows, or those with twin calves at foot. Grass Stagers most often occurs when lactating cows are grazing lush, rapidly growing pasture with low dry matter (DM) and low magnesium content. The risk is further increased if potash or nitrogen fertilisers have been used on the pasture, as the resultant grass is often lush with lower DM content, and also potassium can interfere with magnesium absorption from the diet. Cases of Grass Stagers or deaths are frequently preceded by a period of reduced feed intake; perhaps caused by inclement weather, yarding or transport.

Preventing Grass Stagers requires a combination of management actions

Key items are summarised below;

Managing the Diet

Beware of Nitrogen and/or Potassium fertiliser or effluent affected lush, fast growing pasture. If this grass is the primary feed for lactating cows, be very aware of the grass staggers risk, and always ensure a magnesium supplement is provided. Consider adding an alternative feed source containing a higher proportion of magnesium to the diet during high risk periods.

Managing the Cows

Minimise transport and yard time of cows in late pregnancy and especially during early to peak lactation. If transporting cows, ensure they are adequately fed and supplemented with magnesium prior to the journey, and also during long journeys. Feed cows adequately to minimise loss of body condition after calving. Ideally provide shelter if inclement weather is likely.

Magnesium supplementation

There are several ways to provide additional magnesium to cows. It is important that supplementation occurs at least two weeks prior to the start of the "risk period".

Some supplementation methods will not be possible or practical for all herds or farms. Ask your vet for advice on the best method for your herd.

Magnesium can be;

1. Top-dressed (dusted) onto pasture (magnesium oxide)
2. Added to silage and other feeds (typically magnesium oxide, or other mag salts)
3. Added to water troughs (mag sulphate, mag chloride)
4. Drenched to cows individually (magnesium oxide)
5. Delivered into the rumen via a slow release intra-ruminal capsule (Rumetrace^a Magnesium Capsules)

Supplementation is just that! Metabolic disease can still occur in herds receiving magnesium supplementation in seasons where there is a high risk (due to the factors discussed above). Even in high challenge circumstances, however, magnesium supplementation will substantially reduce the severity of clinical disease and limit mortality.

About Rumetrace Magnesium Capsules

For some herds, the best option for magnesium supplementation is Rumetrace^a Magnesium Capsules. This is especially the case in situations where

- dusting the pasture or hay with magnesium oxide is difficult or impractical
- water reticulation infrastructure does not allow water trough treatment,
- access to free water means cows will not drink water from treated troughs
- daily observation and/or supplementary feeding of cows is not undertaken

Rumetrace Magnesium Capsules are made from a specific magnesium alloy. The specially designed rubber hinge closes into a cylindrical bolus for administration into the rumen. Once in the rumen the capsule opens out to a flat shape with two semi-cylindrical magnesium portions adhered, minimising likelihood of regurgitation.

The rubber hinge of the Capsule also acts as a conductor. The interaction between this conducting rubber (cathode) and the magnesium alloy (anodes) drives the release of magnesium from the Capsule. The magnesium released from the Capsule is fully available for absorption by the cow. Also important is that magnesium (in this Mg⁺⁺ form) is only absorbed in the rumen of cows. In contrast, magnesium in feed and other supplements must first be extracted and solubilised in the rumen, before becoming available as Mg⁺⁺ and hence only a relatively low proportion of magnesium from these sources is absorbed before passing from the rumen.

Rumetrace Magnesium Capsules release magnesium at a constant rate over a 9 – 12 week period. They must be administered a few days ahead of when they are required, to allow time for the electrolytic reaction to get underway. The capsules provide around 2 grams of available magnesium per day. This compares to the daily available magnesium requirement of 1.5g for a beef cow producing 10L of milk per day. These figures do not take into account the antagonistic interference in the rumen by minerals such as potassium. Magnesium Capsules are a supplement to augment dietary magnesium intake, and can be considered 'insurance' to minimise the seasonal risk and impact of Grass Stagers.

Give us a call to find out how Rumetrace can best fit your system.

NAPIER 210 Taradale Road **06 843 5308**

HASTINGS 801W Heretaunga Street **06 876 7001**

WAIPIKURAU 43 Takapau Road **06 858 9060**

DANNEVIRKE 193-195 High Street **06 374 7021**

MASTERTON 24 Lincoln Road **06 378 2662**

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