

**May Newsletter 2017**



It was terrific to see so many of you at the North Somerset Show on Monday. Well done to all those that took part in our 'Guess the famous farmer' competition. The winner was Jane Butler & Steve Yendole of Barrow Court Farm, Tickenham; being one of only a few teams to identify Minette Batters correctly! Your prize will be with you shortly. For those that are keen to know who they were looking at, I have put the answers on the website, [www.northsomersetvets.co.uk](http://www.northsomersetvets.co.uk).

Bringing in cattle or sheep from markets or other farms/common grazing can introduce new diseases to your farm such as liver fluke. Liver fluke is a common parasite that infects cattle, sheep and other domestic animals as well as wildlife such as deer and rabbits. Resistance of fluke to treatments, in particular those products containing Triclabendazole (Fasinex / Endofluke / Tribex) appears to be an increasing problem and one that needs managing on all farms. Triclabendazole should only be used where absolutely necessary to reduce the pressure on emergence of resistance. Triclabendazole is a popular drench as it kills all life stages of fluke from 2 weeks old; however other products are available and should be used where possible. It is always wise to quarantine purchased cattle either in a shed or put on pastures that contain no wet areas and therefore no mud snails; as the mud snail is the intermediate host for fluke. All purchased animals have the potential to be infected with liver fluke and should therefore be treated with an effective product. If possible, fluke should be allowed to develop beyond the immature period so they can be treated with a product other than Triclabendazole. Assuming a dose of Triclabendazole will be effective on arrival will not only lead to resistant fluke being deposited on your pasture but may also be an ineffective treatment. Faecal samples should be taken 6 weeks after treatment to confirm no fluke have survived.

We have seen a few cases of Lead poisoning over the past 6 months due to accidental ingestion of flaked lead paint residues. Lead poisoning presents as a sudden onset brain disorder. There is a change in behaviour, head pressing and blindness may be apparent with teeth grinding and signs of colic. Death may follow rapidly or can take several days. Once clinical signs are present treatment may be hopeless but is occasionally successful. Care should be taken to avoid access to lead residues including waste car batteries/scrap cars, lead paint and soil contamination of silage. Lead accumulates in offal (kidneys and liver) so affected groups of animals are placed under restriction until levels return to normal.

I hope May proves to be a good growing month and silage stocks are plentiful, dare I say it a little more rain than April would be welcome!