



Tibbs and Simmons

Farm Animal Veterinary Surgeons

Newsletter April 2017

It is great to see the sun shining, cattle at grass and the ploughs working the soil at the beginning of April. We will once again be offering hospitality at the North Somerset Show on the 1st May. You are all very welcome to join us for a cuppa and cake. We very much look forward to seeing you there.

There are some changes to TB policy that are about to be implemented, some of these may affect you, these include the following:

a) Wider use of the Gamma blood test; where there is evidence that repeated skin testing of the herd has failed to resolve a TB incident and when APHA veterinary investigation has concluded that the most likely TB transmission route for the affected herd was contact with infected cattle and that measures are now in place to prevent further spread of disease from this source.

b) From April, we will be instructed to use the severe interpretation of the skin test for all spread tracings from TB breakdown herds to reduce the possibility of missing infected animals.

c) In the HRA (SW England), Inconclusive Reactors that go clear on their subsequent skin re-test will now be permanently restricted to the holding in which they were identified. If that resolved IR is subsequently subject to a private gamma blood test with negative results, then it will not be restricted for life. We are not yet sure who will do this or what the cost will be.

d) From April, movements of cattle between two TB-restricted holdings will only be allowed where the destination herd is due to have at least two short-interval tests (SITs) at severe interpretation. The moved cattle would be required to undergo those two skin tests at severe interpretation, the first of which should not take place until at least 60 days from the date of the arrival of the cattle from the herd of origin.

e) When reactors are identified in a TB breakdown herd, the next Short Interval Test cannot take place until at least 60 days after removal (rather than detection) of all reactors. This rule has already been applied in some areas of England and will now be applied more consistently.

We have reviewed our visit fees as a result of increasing travel costs (especially out of hours), we have increased the price of visits for emergency call outs but held the price of pre-planned fertility visits.

We have seen a recent rise in the number of cases of grass staggers in cattle. When grass growth is rapid at this time of year, lactating and fast growing animals are particularly susceptible and should either be given licks or alternative forage/hard feed.

We have also seen a rise in the number of cases of left displaced abomasum in dairy cows. It is a re-occurring phenomenon that these cases come along like London buses; having seen very few cases at the start of the winter. These cases typically occur in the first 4 weeks post-calving with a sudden milk drop and inappetence (especially concentrate); it is not uncommon to be recovered cases of milk fever or suffering with endo-metritis (whites). Prevention is geared around correcting the transition period running up to calving to minimise the cases of milk fever, endometritis and ketosis. A partially full rumen after calving allows for movement of the abomasum when in combination with abomasal atony due to one of the precipitating factors above, the abomasum can fill with gas when it is not contracting allowing it to rise within the abdomen and float above the rumen. When it is displaced to the left the best treatment is surgery although there is some limited success with rolling the cow.