ahi MONTHLY NEWS

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NATIONAL MASTITIS CONTROL PROGRAMME

COLLECTING MILK SAMPLES IN A STERILE FASHION

HOOF HEALTHCHECK PROGRAMME

COMMON CONDITIONS CAUSING LAMENESS

IRISH JOHNE'S CONTROL PROGRAMME

GET YOUR JOHNE'S HERD TEST ORGANISED EARLY!

www.AnimalHealthIreland.ie

To contribute to an economically, socially and environmentally sustainable farming and agri-food sector through improved animal health and welfare.

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Animal Health Ireland (AHI) is a private-public partnership established between private agri-sector stakeholders and the Department of Agriculture, Food and the Marine (DAFM).

AHI aims to provide the knowledge, education and coordination required to establish effective control programmes for important diseases of livestock that are not subject to international regulation and in so doing to contribute to an economically, socially and environmentally sustainable farming and agrifood sector through improved animal health and welfare.

AHI gratefully acknowledges the financial and other contributions of our stakeholders

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YOU GROW WHAT YOU COLLECT!

Finola McCoy, CellCheck Programme Manager

Collecting Milk Samples in a Sterile Fashion

It is not possible to tell which bacteria are responsible for infections just by looking at milk, udders or somatic cell counts- you have to actually grow the bacteria to know for sure. A milk sample can be processed in a microbiology lab so that the bacteria that are present can be identified. However, all bacteria in the sample will be identified, whether they came from the cow's udder, your hands or dirt from a cow's tail!

The lab can also check if the bacteria are resistant or sensitive to a predetermined list of antibiotics (called 'antibiotic susceptibility testing' or AST). However AST only provides a guide, as conditions on a plate in the lab are not always exactly the same as in the cow's udder. Other factors such as duration of infection, lactation number etc. will also influence treatment outcomes. What AST is often used for is to identify the antibiotic not to use, in cases of resistance.

If a sample contains three or more bacterial species, it is generally considered a contaminated sample. However, the sample has to go through the full lab process before it is known to be contaminated, and so you will still end up paying for a result that is essentially useless! You can avoid wasting time, effort and money, by making sure that any milk samples that you collect are done so in a sterile fashion, so the only bacteria present are the ones you want to identify, that came out of the cow's udder.

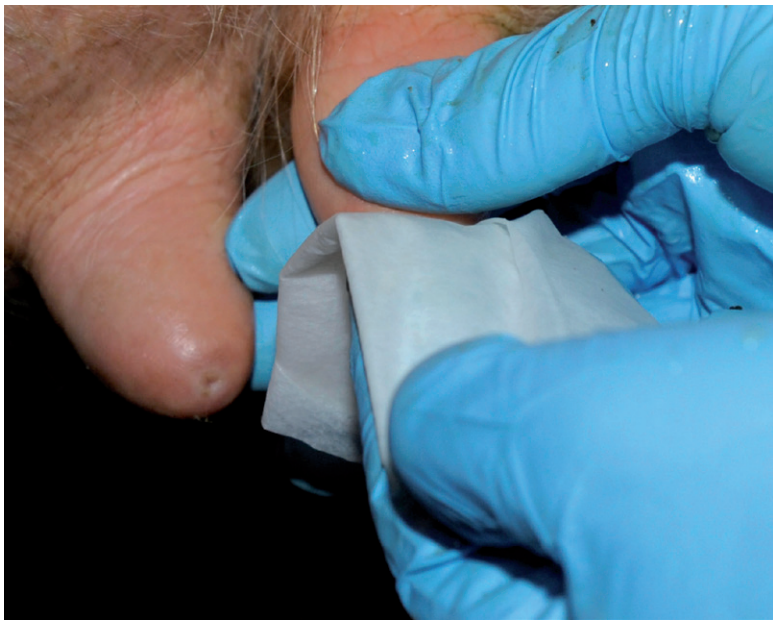
Remember, hygiene is key!

- ✓ Label a sterile sample bottle-do this before sample collection as it can be difficult to write on a wet or milky label.
- ✓ Put on disposable gloves.
- ✓ Wash and dry the teats.
- ✓ Completely disinfect the end of the teats to be sampled, with a cotton ball and alcohol (or teat wipes). This step is critical.
- ✓ Remove the cap from the sterile bottle and place it upside down in a place not likely to be contaminated.
- ✓ Discard the first 2-3 squirts of milk. Collect the sample in the bottle, holding the bottle at an angle (to avoid anything falling into it) at least 3- 4 cm from the end of the teat. 2- 4 mL of milk is sufficient.
- ✓ Replace the cap, secure it tightly and refrigerate as soon as possible.

Ideally samples should be kept cool and arrive at the laboratory within 24 hours. If this is not possible, most mastitis bacteria survive freezing, so you can store them in the freezer until delivery. Samples can be stored by freezing for up to four months without any negative effect on most major mastitis pathogens.

For more information on collecting and culturing milk from cows with mastitis, see Management Notes A in the CellCheck Farm Guidelines for Mastitis Control **click here.**

Correctly labelled and sealed bottles are essential.



Disinfect vigorously with cotton wool or teat wipes.

WHAT ARE THE MOST COMMON CONDITIONS CAUSING LAMENESS IN THE EARLY GRAZING MONTHS OF THE YEAR?

Ger Cusack MVB - Hoof HealthCheck Technical Working Group Member

More than 80% of the conditions that cause lameness occur in the foot of the cow. Most of these foot conditions (80% +) occur in the hind foot. Lameness occurs as a result of both infectious and non-infectious hoof lesions. The most common causes of lameness in Irish dairy grazing herds are non-infectious. These non-infectious foot lesions are white line disease, sole haemorrhages or bruising and sole ulcers.

Common Causes of Lameness in Grazing Dairy Herds

NON-INFECTIOUS	INFECTIOUS
White line disease	Mortellaro/Digital Dermatitis
Sole bruising	Foul-in-the-foot (Necrobacillosis)
Sole ulcer	Heel horn erosion (Slurry heel)

Sole Bruising/Haemorrhages

Sole haemorrhages occur when there is trauma and damage to the germinal layer of cells ('the quick') that are responsible for producing sole horn, resulting in haemorrhage and bruising.

Sole ulcers

A sole ulcer is essentially a much more severe case of a sole haemorrhage. It occurs when the quick is so severely damaged that some cells can no longer produce any sole horn at all. A complete hole in the sole horn results, which allows the sensitive corium to protrude. Sole ulcers are extremely painful. The same conditions that lead to sole haemorrhages also lead to sole ulcers. This is a condition that often affects both hind feet.

Treatment of sole ulcers usually requires the involvement of a professional hoof trimmer or a vet. If the ulcer is severe, the cow may require local anaesthetic. Treatment involves:

1. Trimming to remove underrun horn and relieve the pressure on the lesion.
2. Application of a block/shoe to the sound claw.
3. Administration of an anti-inflammatory. Sometimes an infection may also be present; in this case antibiotics are also required.

The factors that contribute to both of these conditions include:

1. Calving: the connective tissue attachments that hold the pedal bone within the hoof capsule become weak and loose at the time of calving, allowing the pedal bone to sink and put pressure on the germinal cell layer between the pedal bone and the sole horn.
2. Excessive body condition loss: this results in a thinner digital cushion (the fat pad towards the heel of the hoof which acts as a shock absorber).
3. Shallow foot angle and claw overgrowth.
4. Standing on concrete for extended periods of time due to insufficient numbers of comfortable cubicles.
5. Trauma to hooves from walking on rough, uneven farm roadways or being rushed along and not being allowed time to check surface for hazards.

Treatment involves applying a block to the unaffected claw (if only one claw affected), resting the cow and keeping her on a soft surface until she has recovered. Limiting the amount of walking by keeping in a paddock near the parlour or once a day milking should also be considered. She will also benefit from an anti-inflammatory drug. Do not remove excessive horn as the soles are often already thin.

GET YOUR JOHNE'S HERD TEST ORGANISED EARLY!

Liam Doyle, Johne's disease Programme Manager

To make the most of the Johne's Disease Control Programme, it is important to organise and carry out your herd test early in the programme year. Early testing gives you more flexibility to manage the many challenges that can arise on the farm throughout the year.

The Johne's herd test is a key element of the programme. It helps assess the likelihood of infection in the herd and provides crucial animal-level results. These results support informed decisions about test-positive animals, their offspring, dams, and cohorts.

Key Points to Keep in Mind

Timing Between Tests

- isrt of one Johne's testing round and the next.

Using Milk Recording

- If your farm uses milk recording, it can be a cost-effective and labour-saving way to complete most of your Johne's testing.
  - » Organise this through your Milk Recording Organisation (MRO).
  - » Best practice: test during mid-lactation (May to September).

Avoid TB Testing Overlap

- Johne's testing cannot be carried out within 90 days of the first injection of a TB test.
  - » If your herd is undergoing frequent TB testing, speak to your vet. In certain cases, testing may be allowed from 60 days.

When to Avoid Milk Samples

- Don't collect milk samples within 7 days of calving.
- Avoid the late stages of lactation.
  Both scenarios can result in higher rates of false positives, making it harder to identify high-risk animals.

Eligible Cattle

- All cattle over two years old must be tested on the date of the herd test.
  - » Animals not tested through milk recording (e.g. bulls or cull cows) will still need to be sampled.
  - » Plan a 'sweeper test' (using blood samples) within 30 days of the main herd test. It is efficient to coordinate this with the first day of a TB test.

ICBF Johne's Webpage Tools

- The ICBF Johne's site **https://johnes.icbf.com** allows you to:
  - » Generate a list of all eligible animals for testing on a selected date (see Figure 1).
  - » See which animals were missed and need to be included in a sweeper test.
  - » Identify animals requiring additional faecal testing.

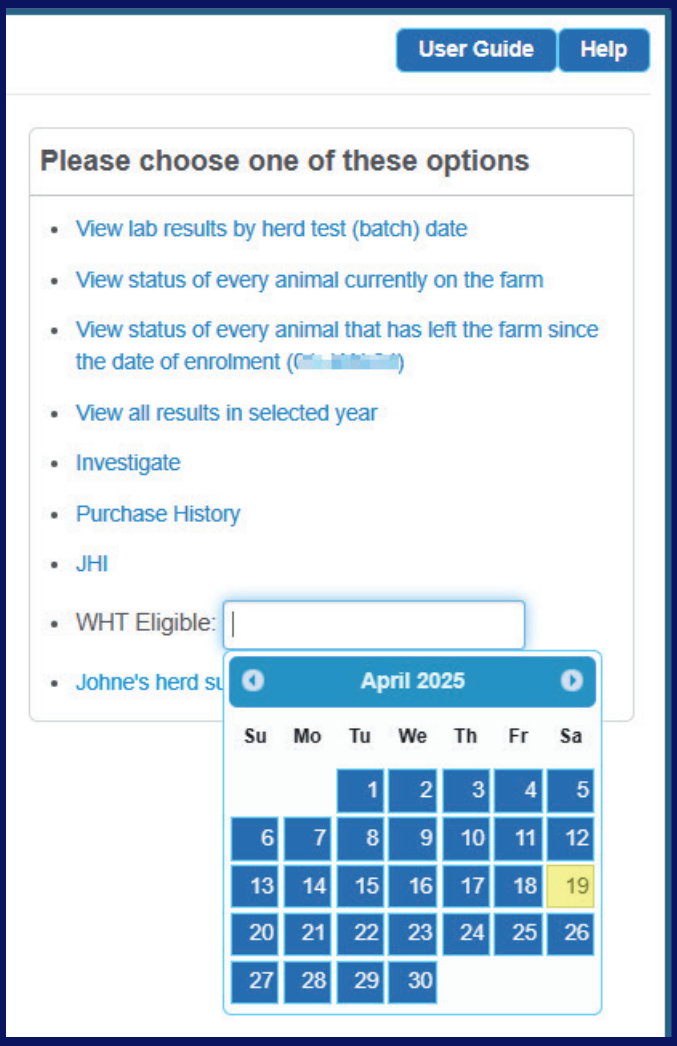


Figure 1. View of the ICBF Johne's home page dashboard and the Whole Herd Test Eligible feature which will generate a list of cattle from your herd two years or older on that date.

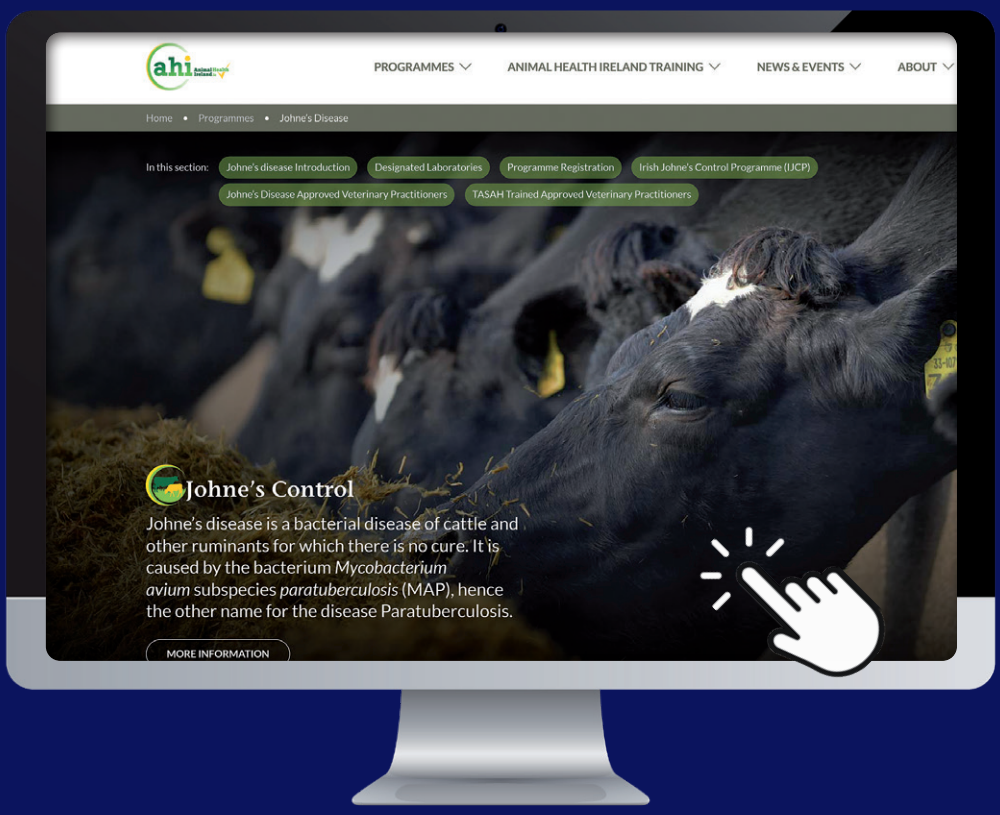
Remember

Herd testing is just one part of controlling Johne's disease. Other key measures include:

- Prompt removal of high-risk animals
- Strict hygiene at calving and in calf areas
- Early calf separation
- Feeding colostrum/milk only from low-risk cows
- Preventing contact between young stock and adult cattle manure/slurry

A proactive approach now will make herd health management much smoother later in the year.

For more information about controlling Johne's disease, speak to your veterinary practitioner or refer to the IJCP webpages - click here.



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