
TAREE VETERINARY HOSPITAL

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APRIL NEWSLETTER

By the time you get this we'll have moved next door, and with a bit of luck the phones will be working and the computers talking to each other. Moving is such fun.....just like cleaning out a shed we've found things that qualify as time capsules, such as notes for ostrich farmers and chloral hydrate, an anaesthetic used before use-by-dates were even thought of.

The information handling revolution that computers have brought has been matched by the regulatory bureaucracy, so we have to keep huge amounts of records on hard copy, for legal reasons. That's not mentioning the computers themselves, with old monitors, printers that were once top quality, harddrives, discs, faxes, all superseded.

But, like all shed clean outs, I'm vowing to be more ruthless this time. However, I just can't bring myself to throw out books, especially those with pictures.

Feed is certainly not a problem at the moment. However, with high grain prices many farmers have cut back on concentrates, which, with the exception of fresh cows, is the right thing to do. You just have to check that the cows are still getting adequate minerals, in particular calcium and phosphorus, and possibly increase them. Buffers are less important with less concentrate fed. However, fresh cows (and springers if fed in the dairy precalving) have high metabolic demands, especially for calcium, and also give the greatest return on supplementary feeding.

Mastitis seems to be a never ending battle on some farms, because of reinfection. No sooner are millionaire cows culled than others crop up. The cause of this is hygiene breakdown and spread of bacteria, but this can be very hard to identify and change. The type of bacteria, such as staphs or environmental streps will give a clue. The farms with the better SCCs tend to use gloves, iodine and strip cows. Good cow health also plays a big part. The farm with the staphs that I wrote about two months ago now has a SCC of 160,000, mainly

achieved through culling.

Further to last month's newsletter where I mentioned AI bulls that don't perform, and the perils of purchasing a heap of straws, another four farmers have let me know that they've used this particular bull, a Wagyu 036, and I've only heard of a single conception.

DISEASES OF THE MONTH

Calvings

Eye cancers

Down cows—milk fever, low Phosphorus

Lame cows

Prolapsed uterus, vaginas

Blocked teats

Zamia (Burrawang) toxicity—weight loss, liver problems. Diagnosed through access to plants, confirmed on post-mortem.

Flea anaemia in calves

Pestivirus in a calf, with textbook symptoms of ulcers in the mouth, lameness, intermittent diarrhoea and ill-thrift.

Retained Foetal Membranes in a mare

Pregnancy Diagnosis in Mares

Mares have very different uteruses than cows, and very fragile rectums, and very quick hind feet, so pregnancy diagnosis can be challenging.

Ultrasound scanning—the method of choice under 3 months. A vesicle can be detected from 15 days, and the foetus seen at about 25 days. Twins can be

detected pre implantation (~23 days) and either aborted or squeezed. Empty mares can also have their uterus and ovaries examined.

Manual diagnosis is traditionally done at 45 days when the conceptus is the size of an orange. Over 3 months the weight of the foetus drags it over the edge of the pelvis and diagnosis can be difficult, although you can still feel an empty uterus. Scanning and manual diagnosis is much easier in a horse crush, or even a race with some bars as protection. If mares need to be sedated it will not cause abortion.

Blood tests—there are two tests depending on the stage of pregnancy. Equine Chorionic Gonadotrophin is tested for between 45 and 100 days, then oestrone sulphate >100 days. These are very accurate within these time frames.

RUN DATES FOR APRIL

Lansdowne.....Thurs 5th

Oxley/Mitchell's Is.....Tues 10th

Hannam Vale.....Thurs 12th

Dyer's Crossing.....Tues 17th

Wingham.....Thurs 19th

Lorne/Comboyne.....Tues 24th

Coomba and the deep south..Thurs 26th