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ANTIBIOTIC SELECTION – AN UPDATE FOR ALL

At North Park we have worked continually over the past few years to improve our prescribing habits, reduce our antibiotic usage and refine it to make the most appropriate treatment choices. This would not have been possible without the hard work and determination of all of you joining us on this journey.

The European medicines agency (EMA) categorises antibiotics into 4 groups, with the associated guidance shown in the table. **With further pressure to refine our use from industry, our attention must now focus on ensuring that our treatments for common conditions mostly come from Category D**, unless there is a justification for the use of a Category C product.

Category A, Avoid	Banned from use in food producing animals.
Category B, Restrict	Critically important to human medicine - they must only be used when there is culture and sensitivity to prove they are the only suitable treatment course.
Category C, Caution	To be used when there is no category D alternative, or there is a clinical justification to use these over a category D alternative.
Category D, Prudence	Should be used as first line treatments, but as with the other categories, always used <i>prudently</i> and only when needed.

The antibiotics in Category D are mostly from the classes that have been around the longest, e.g. the Tetracyclines (Engemycin/Alamycin) and Penicillins (e.g. Amoxicillin, Trymox LA). The two main conditions that we prescribe medicines from Category C for include calf pneumonia (e.g. Fenflor, Draxxin) and mastitis treatments. In order to be confident that we are prescribing the correct medicines and to ensure their effectiveness, investigations into the causes of calf pneumonia and mastitis are recommended.

Category C also includes Pen/Strep and Synulox RTU, which are routinely used for common conditions in both cattle and sheep. As a result, and where appropriate, we will be looking at reducing the use of these products to suitable Category D alternatives.

Our most common antibiotic **dry cow tube** is Ubrostar Red, a Category C product. Where appropriate, based upon antibiotic cultures and sensitivities from your farm, we will be advising a change to Orbenin Extra Dry Cow (Category D). It should be noted that this does have a slightly longer milk withdrawal of 42 days, compared to 35 days for Ubrostar Red. For **treatment of clinical mastitis**, Ubropen (Category C) should be regarded as the first line treatment of choice over Ubrolexin (Category D), unless there are culture and sensitivity results indicating a need for a Category D product.

These changes will be gradual and follow a discussion with you all, so do expect a phone call back from a vet to discuss treatment options when you place an antibiotic order.

CALF PNEUMONIA – Have you vaccinated yet ahead of housing? Now is the time, if you have not done so already! Vaccination can reduce disease (and therefore antibiotic usage), leading to improved stock performance both in the short- and long-term, through enhanced weight gains and reduced mortalities. The stress of weaning, often in combination with housing (higher stocking densities and less ventilation vs. out at grass), is a huge risk factor for pneumonia. Speak to any of the team today for more information on how to reduce calf pneumonia this winter!

LIVER FLUKE – WHEN TO TREAT?

In the treatment of liver fluke, triclabendazole is the only the active ingredient able to kill all life stages of the parasite. However, there is now firm evidence that resistance to this flukicide has developed. As a result, it is important to target treat animals with a suitable active ingredient, at a suitable time. This might need to be triclabendazole, but it could be an alternative, such as closantel or oxclozanide. **Testing for fluke infections** will help guide the correct dosing regime. This is relevant for cattle, sheep and goats (*however there are no licensed flukicides for dairy cattle, besides those which can be given in the dry period*).



Testing an animal for fluke can be challenging however, as it takes up to 12 weeks for fluke to reach maturity and begin producing eggs. During this immature phase the fluke migrate through the liver causing damage and disease. We therefore need to be able to diagnose liver fluke earlier than this. The various methods of fluke monitoring and diagnosis are:



Prediction – Forecasting fluke infection is useful but must be done on a farm-by-farm basis with factors such water courses, grazing rotations and weather conditions all being involved. Mapping the farm can be helpful.

Antibody testing – this indicates whether an animal has been exposed to the parasite, however, it does not indicate if the infection is active or historic. The best group of animals to test are new-season lambs or calves as they can only have developed antibodies to fluke infection in the current year; a positive means recent exposure to fluke, therefore, youngstock tested this way act as sentinels for the rest of the flock/herd. Antibodies can be detected from 2 weeks after fluke infection.

Faecal copro-antigen testing – It is possible to detect enzymes produced by fluke in faeces. The presence of these enzymes indicates active fluke infection. Fluke can be detected 2-3 weeks before they start to produce eggs, therefore giving a slightly earlier detection compared to egg counts. This test is most useful in assessing the effectiveness of dosing as successfully treated animals should have negative results after 1 week.

Post-mortem/abattoir feedback – provides clear evidence of fluke infection on your farm.

A 2019 study testing for exposure to fluke in young lambs revealed very low levels of infection throughout the country during 2019, with exposure to fluke very variable between farms and generally occurring very late in the season, and with just a few lambs affected. This suggests that there is significant scope to **work together to plan a more targeted flukicide strategy, that not only maximises livestock performance but also provides the most efficient use of farm labour and helps to reduce the likelihood of resistance developing**. Speak to any of the team today to get this ball rolling!

CONFERENCE SEASON IS UPON US! Some of the team will be away at the British Cattle Veterinary Association (BCVA) and Sheep Veterinary Society (SVS) conferences this month, so expect some good updates in the next newsletter. Practicing vets in the UK are obliged to undertake at least 35hrs of continued professional development each year to ensure we stay up-to-date, with conferences providing a crucial opportunity for us to get this done.



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