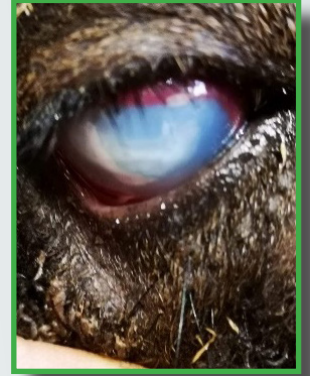


SHEEP EYE INFECTIONS

Eye infections in sheep are a significant issue resulting in production losses, increased antibiotic use and costs. There are several conditions that can affect the eyes of sheep, the most common being Ovine Infectious Keratoconjunctivitis (OIKC). This infection has several colloquial terms; pink eye, silage eye, snow blindness, bad eye or storm eye. A recent study of farmers in the UK indicated that 88% of the farmers in the survey had seen this infection in their flocks in the previous two years. There are several bacteria implicated in OIKC with *Mycoplasma conjunctivae* being cited as the most common. Other bacteria involved include *Staphylococcus*, *Chlamydia*, *Moraxella* and listeriosis. These bacteria need the surface layer of the eye to be damaged which can be caused by trauma, dryness, UV damage etc. Feeding from troughs and hay racks are common causes of trauma but also outdoors in dry dusty environments – for example when sheep gather under trees in hot weather to access shade. Recently, we have seen several outbreaks of OIKC which take a significant amount of time and effort to get under control. Sometimes the infection seems almost impossible to eliminate from a flock once it has become established.



Signs of an infection:

- Closing the eye
- Excessive tears/tear stains down the face
- Reddening of the conjunctiva (pink lining of the inside of the eyelid)
- Cloudiness of the cornea (surface of the eye)
- White focal area of the cornea
- Ulceration of the cornea, this appears like a small white crater/volcano.
- Rupture of the eye!!!

How does it get into your flock?

The most common source of infection is via purchased 'carrier ewes/rams'. These are sheep which are likely carrying the infection in the conjunctival sac. Studies have shown that *Mycoplasma* has been found in the conjunctiva of sheep which have been successfully treated for OIKC therefore these animals can carry the bacteria around without symptoms and act as a source.

Top Tips For Prevention:

- ✓ Adequate feed/forage space. Consider using a snacker to feed ewes outdoors
- ✓ Quarantine new stock/stock returning from shows
 - ✓ Ideally, maintain a closed flock
- ✓ Wear gloves to handle animals with infected eyes. This stops you spreading the bacteria around as well
- ✓ Good fly control – apply products frequently. Start applying fly products in advance of the fly season... don't wait until they are a problem!
- ✓ Speak to your vet to get a proactive approach in place to avoid outbreaks

Treatment:

Isolating affected cases promptly is absolutely vital!!! Discuss with us the most appropriate treatment, this may include topical solutions and injectable or topical antibiotics. The choice of treatment can be guided by swabs taken from the eyes to establish the bacteria involved but also which antibiotics are most likely to be effective. This condition is very painful, more so when exposed to sunlight so affected sheep should be brought indoors. Giving pain relief to affected animals can be valuable to aid recovery and encourage faster return to feed intakes – please be aware that pain relief medication is off license in sheep. Isolating affected cases will help reduce the spread. Depending on the severity of the damage to the eye, minor surgical intervention can improve the recovery rate. The aim of these 'surgeries' is to reduce light to the eye and keep the eye moist with tears to improve healing.

Antibiotic Classification

For several years we have been referring to 'critically important antibiotics' (CIA's) which include medicines such as Marbonor and Excenel. From now on you may also hear us referring to antibiotic groups A to D. This is a more sophisticated approach to choosing the antibiotics that we prescribe and trying to avoid resistance developing to the more important ones for human and animal health. The guidelines we are working to are:

Group A: Avoid – these are not licensed in food producing animals

Group B: Restrict – this includes the CIA's- only used on rare occasions- tests required

Group C: Caution – used only when a group D won't work. Includes Synulox, Tylan

Group D: Prudence – use as first line treatments when necessary. Includes Betamox, Tetracure, Trymox LA, and Diatrim

We have always followed these prescribing principles, but the categorisation is new. If you would like more information on this, please let us know.

FORTHCOMING MEETINGS

Tuesday 6th September
Mastering Medicines Course
(to ensure you are Red Tractor compliant)
2pm at the practice - £70 + VAT

Friday 23rd September
On-farm Pneumonia meeting
By kind permission of the Morgan family.
Mount Pleasant Farm,
Llanddewi Rhydderch at 2pm
followed by a pub lunch and talk

Thursday 6th October
NADIS Beef TB Talk.
Monmouthshire Livestock Market
at 7pm

USK SHOW

We will be in attendance at Usk Show on 10th September, so please visit us at stand E57 opposite the cattle rings. We will be serving a range of delicious refreshments and there will be some fun activities and a raffle in aid of RABI and the DPJ Foundation with some great prizes. Please come and say hello!

Rob's Sheep Shearing...

...he should've gone to Specsavers!! 😊



PNEUMONIA PREVENTION IN CATTLE

As we approach the Autumn, now is the time to think about protecting your youngstock from pneumonia.

Ideally, cattle should be given their pneumonia vaccines so that they are fully protected before housing. To provide young cattle with the cover against the most common causes of pneumonia, we recommend **Bovalto Respi 3**, which covers RSV and PI3 viruses and Pasteurella. Calves need 2 doses, given 3 weeks apart, which will provide 6 months cover. They can be vaccinated from 2 weeks of age, and full immunity takes 3 weeks to develop. So, for full cover at housing, **the first vaccine needs to be given 6 weeks earlier.**

There is a whole range of respiratory vaccines available, so for advice specific for your farm please call to speak to one of the vets.

Mastitis Treatments

Research has shown that the bacteria present in milk samples from cows which have failed to respond to mastitis treatment are often different ones to those cultured in pre-treatment samples. This is because the antibiotic tubes given have eliminated the bacteria which caused the infection, but new infections have been introduced by poor treatment techniques. When tubing cows with mastitis, the same precautions should be taken as when drying cows off with teat sealant:

- The teat should be visibly clean – if not clean it again
- Put on a pair of clean gloves and clean the end of the teat with surgical spirit and cotton wool until the cotton wool comes away clean
- Remove the cap from the tube (just the small tip for a flexitube). Be careful not to touch the nozzle onto any surface or the cow)
- Infuse the contents of the tube, taking care not to touch the teat end
- Massage the quarter and apply a Post Milk Teat Dip
- Identify the cow clearly. Allow to stand for 30 minutes. Update Medicine Records

If you would like a free poster to go in your parlour, covering this process, please contact the practice.

