



# Newsletter

## March 2020

### Mastitis tube update

The latest news from the suppliers (updated 5<sup>th</sup> March) is as follows:

<u>Tubes out of stock</u>	<u>Resolution</u>
Synulox	May/June
Tetra-Delta	May/June
Ubro Yellow	discontinued
Multiject	May
Albionic	March (end of)
Mastiplan	June (end of)

#### Available tubes:

Ubrolexin  
Procopen  
Orbenin L.A.

Nb. High Priority Critically important antibiotics are not included and still cannot be used when an alternative is available. It is also worth noting that manufacturers tend to be very optimistic with resolution dates. Tetra Delta was originally due back in at the start of February!

### So which tube should I use?

Albionic (we still have a few in stock) and Ubrolexin are broad spectrum and most suitable for all farms as a first line tube. If you have a particular problem with gram positive infections (you'll know if you do as we will have talked to you about this) then Orbenin LA may be suitable for some cows.

Albionic is 1 tube every 12 hours for 3 milkings. Milk withdrawal 84 hours

Ubrolexin is 1 tube ONCE a day for 2 days. Milk withdrawal 5 days

### Coronavirus

Following a lot of attention in the press, and not a little scare mongering, it seems that although the Covid-19 coronavirus is likely to spread, it is unlikely to cause any more than mild symptoms in most people. There is no evidence that the disease can be passed to animals.

Having fielded the question from a few people, this is NOT the same coronavirus that causes scour in neonatal calves (and no, RotavecCorona vaccine won't protect people!).

If any farm staff do have symptoms, please let us know before you come in to collect medicines.

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Orchard Vets  
Glastonbury

## Selenium and Vitamin E deficiency

### Nutritional muscular dystrophy, White muscle disease

#### Cause

Both selenium and Vitamin E play key roles to protect cells against damage. Muscles cells are the most susceptible to damage. Disease is more common in the calves of (beef) cows fed home-grown feeds from selenium deficient pastures without appropriate mineral supplementation.

#### Clinical presentation

Sometimes selenium/vitamin E deficiency is seen either as stillbirth, or the birth of a weak calf that is unable to suck unaided and usually dies within a few days of starvation/secondary bacterial infection. More often, however, a delayed form of selenium/vitamin E deficiency is seen in calves between one and four months-old. Signs are usually brought on by sudden unaccustomed exercise, typically following turnout to pasture in the spring. The clinical appearance varies according to the muscles affected.



*Skeletal muscles* - there is sudden onset stiffness

and inability to stand. Otherwise, the calf is bright and alert with a normal appetite.

*Respiratory muscles* - the calf presents with respiratory distress.

*Cardiac muscle* - there is sudden death without previous signs of illness.

#### Diagnosis

Blood samples are most useful if disease is suspected. It is difficult to measure selenium directly, but a test for a selenium-containing enzyme, glutathione peroxidase (GSHPx), is readily available. There are also tests which can measure muscle damage.

#### Treatment

Sodium selenate or selenite may be given by injection, usually combined with Vitamin E and will provide adequate selenium supplementation for up to 3 months. The response to treatment may take 4-7 days.



#### Prevention/control measures

Injections of selenium provide adequate supplementation for 9-12 months. Intra-ruminal boluses provide slow release of selenium for up to 6-12 months. By far the most convenient way, however, is to incorporate it into feed and selenium and vitamin E are frequently added to concentrate rations for feeding to cattle.

Selenium can cross the placenta, and both selenium and vitamin E are concentrated in the colostrum therefore supplementation of the dam's diet during late pregnancy will ensure good supply to the newborn calf.