



Dear Farmer,

Welcome to the February edition of our farm newsletter. As always, if there are any topics you would like to see in the newsletter then please let us know.

Ensuring Survival of Newborn Lambs

The average scanning from UK lowland flocks is about 200%, however the number of lambs weaned is around 155 lambs per 100 ewes put to the ram.

Lamb deaths in the perinatal period (from birth to three days) range from 10 to 25 per cent or 2 to 6 million dead lambs annually. In well-managed flocks, vaccinated against toxoplasmosis and enzootic abortion (or EAE-accredited flock), lambing indoors (or outdoors during good weather) the target perinatal lamb mortality figure should be less than 7%; with 5% achievable.

Factors affecting perinatal lamb mortality include:

- Farm management especially nutrition
- Level of flock supervision
- Infectious diseases



Key factors of flock nutritional management affecting perinatal lamb mortality are:

- lamb birthweight
- ewe body condition score
- colostrum accumulation in the udder at lambing

The effect of ewe energy undernutrition during late gestation on reduced lamb birthweights and inadequate accumulation of colostrum in the udder was established more than 40 years ago.

Ewe body condition score

Ewe body condition scores are low (2.0 or less; scale 1 to 5) when late gestation nutrition has been inadequate for more than two weeks. Where feeding of the whole flock started on the same date,

later-born lambs typically have heavier birthweights due to a longer period of dam supplementary feeding.

Flock problems such as parasites can lead to low body condition in a large percentage of ewes and this problem is exacerbated by litter size. Lambs are smaller than normal even with prompt treatment and supplementary feeding.

Ensuring the lamb's best start in life

There are three critically important events which must happen to ensure that newborn lambs have the best chance of survival.

Lambs must be born into a clean environment to an attentive dam with a good colostrum supply.

The lamb must ingest sufficient colostrum (200mls/kg) during the first 24 hours of life, and 50ml/kg within the first 2 hours, if not sooner.

The navel must be fully properly treated with strong veterinary iodine or a drying treatment (e.g. Veterycin Super 7) within the first 15 minutes of life, and this procedure repeated at least once 2 to 4 hours later if necessary.



Don't Forget..

- Get medicine cupboard ready for lambing time
- Create isolation area for aborted ewes and consider testing
- Heptavac-P breeding ewes 4-6 weeks prior to lambing
- Remain vigilant in housed cattle against pneumonia



Ingestion of colostrum is the single most important event in the lamb's life. Immunoglobulins in colostrum afford specific protection against clostridial and other diseases depending upon dam vaccination status, as well as non-specific immunity. Colostrum is an essential source of energy, minerals and vitamins, as well as possessing laxative properties. Despite the importance of colostrum in ensuring the health of the neonatal lamb, studies have consistently shown that many lambs, particularly triplet and small birthweight lambs, do not suck sufficient colostrum during the first few hours of life.

Treatment of comatose lambs

Treatment of comatose lambs is divided into two age groups; either less or more than 6 hours-old.

Treatment of comatose lambs less than 6 hour-old

Coma should not arise in lambs less than 6 hour-old unless the lambing flock has suffered adverse weather conditions. This situation occurs most commonly in the UK when ewes lamb outdoors during severe weather conditions, and in hill flocks which lamb outdoors where there is no supervision during the hours of darkness.



Hypothermic lambs less than 6 hours old do not require intraperitoneal glucose injection because the lamb is born with considerable reserves which can be mobilised to produce glucose.

The lamb is placed in a warming box with the thermostat set at 45°C. Colostrum should be stomach-tubed at a rate of 50ml/kg once the lamb has been warmed and can maintain sternal recumbency. If there is insufficient ewe colostrum, it is possible to use cow colostrum pooled in advance from more than four dairy cows previously vaccinated with a multi-component sheep clostridial vaccine preparation 3, 6 and 10 weeks prior to calving. Proprietary colostrum supplements are available but are costly and do not compare to ewe colostrum.

Artificial milk replacers should not be used for the first feed, but can be used after the first feed to save colostrum stores. Electrolyte solutions contain as little as 15% of daily energy requirements and should only be used for treating neonatal diarrhoea.

Treatment of comatose lambs more than 6 hours-old

Diligent flock supervision should quickly detect all hungry lambs which can then be fed and should recover uneventfully long before becoming comatose. Starvation of 24 to 48 hours' duration exhausts glycogen and brown fat reserves and the lamb becomes hypoglycaemic and hypothermic.

This metabolic crisis can be corrected by intraperitoneal injection of 25ml of 20 per cent glucose solution followed by placing the lamb in a warming box with the thermostat set at 45°C. It is essential that the intraperitoneal injection is administered before the lamb is placed in the warming box. The lamb must be regularly checked if the box does not have a thermostat to prevent overheating.



Intraperitoneal injection

The lamb is suspended vertically by the front legs a 19 gauge 1.5" long needle is introduced through the body wall 2 to 3 cm to the side of the navel and 2 to 3 cm caudal. The needle point is directed towards the lamb's tail head. The solution is slowly injected in to the body cavity once the needle has been introduced up to the hub. The recovery of hypothermic and hypoglycaemic lambs takes 30 to 60 minutes.

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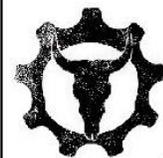
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