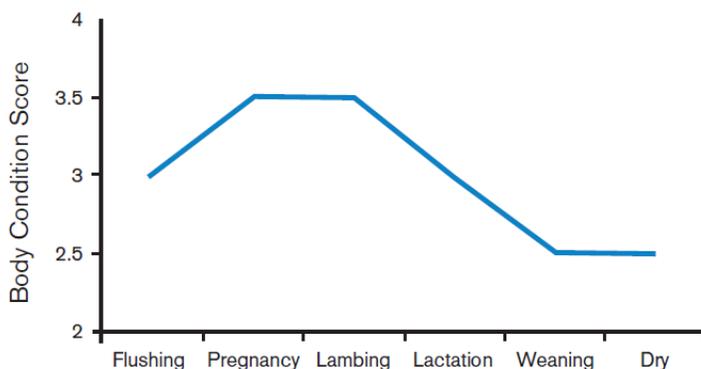


January 2014

Once again happy New Year to you all. The end of 2013 was pretty horrible for many and so let us hope that 2014 brings a lot more happiness and prosperity for everyone. We really could do without a repeat of last years spring weather. Many of the **sheep guys have scanned very well**, which is good news. With the continued late grass growth I am hoping that our ewes will be in **far better condition than this time last year**. The **fleece covering can be very misleading** and what seems like a ewe in condition score 3 may in fact be only 2 or even worth. I would strongly urge people to **put their hands on the backs of the ewes** and separate out any thinner ewes and start feeding them up.

Figure 1: Body condition targets for optimum sheep reproduction



The main reasons for lamb losses includes:

1. Poor birth weights.
2. Poor colostrum intake / quality.
3. Poor milk production.

All of which are **related to poor energy / protein in the diet**.

Don't forget about **minerals** as well. The **last part of pregnancy** is the best time to test the ewes and the most cost effective time to **remedy the problems as you are treating one animal but benefiting at least 2**

What is sub clinical milk fever?

This means that the cows are suffering a **slight deficit in calcium**, due to the huge surge in requirements for milk production. In the extreme cases we see the **classical down cow** but **sub clinical milk fevers can be very difficult to detect**. Typically we diagnose it where there are **lots of retained cleansings after calving** or there are lots of **whites when we first check the cows 21 days after calving**. These whites can be difficult to clear up and cost you dearly with fertility.

Other conditions that can be caused by sub clinical milk fever:

1. Increased numbers of bed outs post calving.
2. Increased LDA's.
3. Increased mastitis.
4. Increased ketosis.
5. Increased calving problems / dopey calves.
6. Reduced milk yields.
7. Increased cull rates.

What can you do about it?

1. Sort out the **nutrition** of the dry cows, whether they are sucklers or dairy they need to be specifically managed and well!!
2. Administer a **bovicalc** bolus at calving. These last for 24 hours taking you over the main risk period.
3. **Drench** the cows with at least 20 litres of warm water. This will get the rumen expanded and get her eating.

Which cows are most at risk?

1. Lame cows.
2. Older cows.
3. Fat cows.
4. Cows with a long dry period.
5. Cows with twins.
6. High yielders.

• **Last year we did a fair amount of metabolic profiling** on the ewes which were **6 weeks prior to lambing**. This is able to tell us whether the ewes are currently suffering from an **energy deficit** or whether they are coping. An energy deficit would result in reduce lamb size as well as a reduced quantity and quality of colostrum and milk. In severe cases it would lead to twin lamb disease.

A ewe which is simply surviving / maintenance requires 10 mj energy per day.

A ewe in early pregnancy requires 15 mj energy per day.

A ewe in late pregnancy requires 20 mj energy per day.

A lactating ewe requires 30mj energy per day.

Don't forget as the ewes womb gets bigger they can take in less feed but they need twice as much energy.

Sub clinical milk fever..... has never been easier to prevent.

Clinical milk fever (ie down cows) which won't get up affect **3.5%** of cows.

Sub clinical milk fever affects **50%** of all cows after their 2nd lactation.....