Long days and long nights … here is an extended newsletter to keep you up and awake whilst watching the ewes!

Diseases of the Newborn Lamb

Hopefully disease in this year’s lamb crop will be low but occasionally we can see problems and it is important to be aware of the best ways to minimise risk and to treat affected lambs.

Hypothermia

Hypothermia in the newborn lamb occurs when the heat loss is greater than the heat production resulting in a body temperature that is lower than normal.

- 39-40°C – normal body temperature
- 37-39°C – indicates mild hypothermia
- Less than 37°C – indicates severe hypothermia

Newborn lambs that are less than 5 hrs old usually have a brown fat reserve which lambs can use for heat production. These lambs should therefore, respond to drying, warming and then feeding by stomach tube if necessary.

Newborn lambs older than 5 hrs old have no brown fat stores left. If these lambs are warmed without being given energy, they may develop hypoglycaemic fits and die. To provide energy to these lambs, we can do the following:

- If the lamb can hold its head up, feed the lamb by stomach tube before warming, and then warm under a heat lamp before re-feeding.

- If the lamb cannot hold its head up, it is dangerous to feed as the lamb will most likely regurgitate, inhale and then die. For these lambs, we recommend an intraperitoneal injection of glucose before warming the lamb.

The technique for intraperitoneal glucose injection is as follows:

- Use a warm 20% glucose solution (equivalent to 1 tsp sugar in 25ml water) at a volume of 10ml/kg
- The site for injection is just below and to one side of the navel. The lamb is held by its front legs and the needle is directed at a 45° angle backwards towards the tail end of the lamb.

- When the lamb is conscious and able to suck, feed at least 150-200ml milk 3 times a day.

If this is a technique you would like to try, please contact the farm office to speak to one of the farm vets for advice or for a visit to be shown how.

Any questions or queries please contact us in the farm office on:

Phone: 01793 501499
Email: farm@drovevets.co.uk
**Watery Mouth**

Watery mouth is a condition that affects very young lambs, normally up to 3 days of age. It is caused when lambs swallow a lot of E.coli bacteria from a dirty environment before they've sucked colostrum. The bacteria pass into the gut and multiply and die. As the bacteria die, they release an endotoxin which is absorbed into the bloodstream resulting in endotoxic shock.

**Clinical signs:**
- Lambs quickly become dull and weak. They don't get up and they become unwilling to suck.
- Lambs have cold, wet lips and muzzles from drooling saliva.
- The tail is often dry with no faeces.
- Without treatment, the lamb usually dies within a day but some live long enough to develop scouring and even joint ill.

**Treatment:**
- Daily antibiotic injection
- Oral antibiotic therapy
- A small dose of anti-inflammatory such as Metacam which has anti-endotoxin effects.

**Prevention:**
- Ensure lambs receive adequate colostrum - stomach tube at risk lambs such as weak lambs or triplets.
- Ensure the lambs have a clean environment.
- Oral antibiotics at birth. This should be done if other methods fail.

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**Neonatal Scours**

Outbreaks of diarrhoea in newborn lambs can be investigated to determine the causal agent if the outbreak is deemed to be causing a problem. This can be done by submitting up to 10 samples which can be sent off to the lab for analysis. By diagnosing the causal agent, appropriate treatment and control measurements can be put in place.

**Clinical signs:**
- Swollen navel
- High temperature
- If tracked into the bloodstream lambs can become very sick and stop sucking. They lie for extended periods and stand with hunched backs.

**Treatment:**
- A short course of antibiotics can clear up simple infections but more severe cases will need extended courses
- Anti-inflammatories.

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**Joint Ill**

Joint ill occurs when bacteria enter the newborn via the oral route, through the navel or through other routes. These bacteria travel through the bloodstream to the joints.

**Clinical signs:**
- Hot, swollen joints
- Very painful joints
- Reluctance to stand and suck

**Contributing factors and treatment is as with navel ill and should include antibiotics and anti-inflammatories.**
Colostrum Management

Colostrum intake is key to preventing disease in the lamb's first few weeks of life. Colostrum management varies widely from farm to farm but we have listed some basic principles which every farm should be aware of.

Quantity

Ensuring that lambs get enough colostrum in the correct amount of time is essential.
- 200-250ml/kg colostrum is required within the first 24 hours.
- At least 50ml/kg should be given within the first 6 hours of life.
- Lambs born outside have greater energy requirements and so require more colostrum.

Quality

Quality of colostrum can vary from ewe to ewe. Factors that can affect quality include:
- Age of ewe: ewe lambs often produce poorer quality colostrum
- Ewe nutrition: as discussed in previous newsletter, poor nutrition in the last trimester can reduce colostrum quality
- Poor flock health can affect quality e.g. lameness

Colostrum handling can damage the important components of colostrum. Care should be taken when warming colostrum. Excessive heating should be avoided: do not microwave.

Feeding options

There are different options for ensuring that lambs get enough colostrum and these may vary depending on farm management. Options available to you include the following:
- Shortly after birth, encourage lambs onto teat and ensure they suckle for at least 10 minutes.
- Strip ewe and either tube or bottle feed colostrum to lamb.
- If you routinely allow the lambs to feed themselves, we strongly advise that you check the bag and flow of colostrum to ensure there are no teat end plugs that can disrupt feeding.
- Freeze excess good quality colostrum which can be warmed and used for orphaned or multiples.

Colostrum sources

There are times when lambs may require supplementary colostrum. This may include orphaned lambs, triplets or lambs from ewes with little or no milk. There are many sources available:
- Ewe colostrum is always favoured.
- Goat colostrum is safer than cow colostrum.
- Cow colostrum is not always safe. Some cows can produce colostrum that attacks the lamb’s red blood cells causing a severe anaemia at 10-14 days of age.
- Commercial colostrum is widely available but can be expensive. Often they are very variable in their quality and some have poor antibody and energy content. We agree however, that these products are handy to have in the cupboard but they are most useful to extend a limited amount of ewe colostrum rather than using them as a single source.

Ewe Health at Lambing

Housing the ewes at lambing time enables you to keep a close eye on ewe health. Below are some common problems we see primarily at lambing time:

Lameness

Lameness is more easily assessed when animals are housed. It is a good time to footbath which helps control the spread of footrot which can occur more readily at housing.

Vaginal Prolapses

These occur in over fat ewes and can also be associated with hypocalcaemia. Once a ewe has prolapsed she is likely to cause you problems and is more likely to prolapse again next lambing. Treatment includes fitting a harness and administering antibiotics and anti-inflammatories. The harness must be removed pre-lambing.
Caesareans

Ewe caesareans are certainly an option available for problem lambings including oversized lambs, ringwomb and uterine torsions. We aim to keep ewe caesarean costs as low as possible to make it economically viable for you.

Mastitis

Mastitis is often overlooked in many flocks. The average incidence in lowland flocks is 5% and it is an important cause of enforced culling in ewes.

Tell tale signs include:

- Hungry lambs due to reduced milk secretion
- Swollen, hot or painful udders
- Visible changes in the milk
- Sometimes there may be no milk at all in acute cases

Early detection and treatment is important and involves:

- anti-inflammatories
- antibiotics.
- stripping the affected quarter.

Prevention:

- Wet or dirty environments should be avoided
- Strict hygiene procedures put in place to help prevent cases.
- Pre-tupping examination of ewes can help identify chronically affected quarters and save finding ewes at lambing with only one functional teat!!

If you would like to discuss treatment with one of our vets, please contact the farm office.

Enzootic Abortion

This is the most commonly diagnosed abortion in the UK and is caused by a bacteria called *Chlamyaphila abortus*.

Abortion occurs in the last 2 to 3 weeks of pregnancy with no evidence of illness in the ewe. Clinical scenarios that may be seen include:

- aborted fetuses
- premature lambs
- weakly live lambs
- even apparently healthy lambs but with infected membranes are seen.

Foetal membranes are often a dark red/brown colour and although the ewe appears healthy, she often passes discoloured uterine discharge for a few days.

Treatment:

- Aborting ewes rarely require any treatment other than isolation until their discharges cease.
- Do not mix the aborting sheep with the rest of the flock until the discharges cease.

To control an outbreak, there are many things you can do to help reduce transmission:

- Remove and destroy all membranes whether believed to be infected or not
- Attempt to clean up the area in the lambing shed and cover with clean straw
- The use of aborted ewes to foster lambs should be discouraged but, if practiced the lambs must be sent for slaughter and females not retained for breeding. This is because there is a high probability that the lambs will become latently infected.
- Ewes which abort should be kept since they will be immune and most evidence suggests that they will not continue to shed the bacteria.
- Protection of ewes by vaccination: The live vaccine should be given at least 4 weeks prior to the start of tupping.

EAE Fact Sheet

- The most important source of infection is from aborting ewes since the organism is mainly excreted at the time of abortion and in the uterine discharges seen for a couple of weeks after the abortion. Infection is therefore, mainly spread at lambing time and presents a serious hazard for sheep lambing under intensive housed conditions.
- Once they have aborted once, they become immune.
- The bacteria are mobilised during pregnancy giving rise to abortion one year after the ewe became infected. We term this kind of infection, a 'latent' infection and so newly purchased ewes may bring the disease onto farm, with no effects seen until lambing time.
- Lambs can be infected from birth from their mother or from other ewes. These lambs go on to produce infected lambs themselves at their first lambing.
- Ewes infected for the first time in late pregnancy, usually do not abort at this stage but may do in their next pregnancy as it takes about 40-50 days from infection to abortion.