

# Contagious Mastitis Day Handout

This handout is not aimed to be a treatment plan for your animals, merely a useful tool as an aid to your existing herd health plan which will be specific to your farm. If you have any queries you should speak to your vet.

Contagious mastitis pathogens include:

- ***Staphylococcus aureus*** - a bacteria that can cause a variety of mastitis presentations from severe gangrenous mastitis through to subclinical infection with high SCC, the pathogen can be very difficult to treat and often extended or more intensive therapy is required.
- ***Streptococcus dysgalactiae*** - infection in the dry period or in heifers is common, particularly if not protected by dry cow therapy, outbreaks usually follow hygiene breakdown or increase in teat lesions and can often be controlled by ensuring adequate teat disinfection.
- ***Coagulase negative staphylococci*** - a group of bacteria that have contagious characteristics, are associated with moderate increases in SCC and some researchers believe possess characteristics that help protect the udder from other pathogens.
- **?? *Streptococcus uberis*** - an organism that is found in the environment but in recent times appears to possess contagious characteristics.

Contagious pathogen spread can be:	<b>Cow to cow</b>	ie between cows
	<b>Quarter to quarter</b>	ie within the udder

Transmission of infection

- **Soiled milking equipment:** ensure adequate cleaning, good hygiene and cow cleanliness and teat preparation.
- **Dirty hands:** wear gloves and change when dirty or contaminated.
- **Poorly operating milking equipment:** this can act as a vector for infection and adversely affect teat condition and reduce teat defence, reduce the risk with regular testing, maintenance and cleaning.
- **Poorly operated milking equipment:** staff should all be familiar with correct operation of the plant.
- **High burden of infection due to order of milking:** always have a mastitis group which are milked last.



## Treatment

This often depends on the severity or grade of infection:

<i>Grade 1</i>	Milk changes only, often responds to intramammary antibacterial therapy
<i>Grade 2</i>	Milk changes and udder affected, requires systemic (injectable) antibacterial therapy as well as intramammary therapy. Antiinflammatories can also be useful.
<i>Grade 3</i>	Milk changes, udder affected and cow is sick, again this requires systemic antibacterial therapy with antiinflammatories, intramammary therapy in association with regular stripping of the affected teat. If the cow is severely affected the cow may require therapy given into the vein as well as fluids and veterinary involvement as soon as possible.

## Mini Dry period

This may often be reserved for high cell count cows during lactation but there is also a use for persistent clinical cases. The theory is to take advantage of chemical changes in the cow's quarter when milk ceases to be harvested. The key points are noted below:

- A short acting dry tube is used in affected quarter. *Cephaguard DC* is good as has good clearance once milking resumes.
- Quarter not milked for 7 days although other 3 are and milk **discarded**.
- After 7 days milk withheld until composite sample from all 4 quarters passes antibiotic screening test - usually not too long.



## Remember:

Withdrawal times may be longer with combined therapy or when medicines are not used in accordance with data sheets. If in doubt ask!

Collect and freeze samples from clinical cases for future bacteriology!

For more info on Clover or any of its products please contact Louise on 01772 866014 or visit [www.clovergroup.eu](http://www.clovergroup.eu)

*Enclosed is some information on the use of Metacam in mastitis cases to improve long term cow health. This was discussed by Laura on the day but hopefully this will be a good reminder.*