# Calving and colostrum management

OB	IECT	IVE:

To minimise calf exposure to MAP before and at calving from dams' faeces and colostrum.

BEST PRACTIO	
BEST FRACTION	Calve only JD test-negative cows free of any signs of JD  Move springer mob regularly to clean pasture  Remove newborns from the calving mob at least twice a day  Use fresh colostrum from test-negative cows only
ALTERNATIV	E OPTIONS
N	<ul> <li>☐ Manage high-risk (JD test-positive) cows separately at calving</li> <li>☐ Do not rear heifer calves from high-risk or JD positive cows</li> <li>☐ Collect colostrum from young cows (2-4 years) to dose calves</li> </ul>
HIGH-RISK BE	EHAVIOURS
HIGH-RISK BE	<ul> <li>☐ Ill-thrifty cows and dirty claving environment</li> <li>☐ Leaving calves with dams longer increases the exposure risk</li> <li>☐ Fresh pooled colostrum sourced from untested older cows</li> </ul>
HIGH-RISK BE	☐ Ill-thrifty cows and dirty claving environment ☐ Leaving calves with dams longer increases the exposure risk







## Calving and colostrum management

Calves and heifers are the groups most susceptible to infection; while signs of clinical JD usually appear years later. Progression of infection to shedding of MAP and clinical disease is also highly dose dependent.

Lowering the amount of MAP ingested by young stock will reduce the impact of JD.

#### Manage suspected and test positive cows at calving

JD test-positive cows are a major source of infection not only for their own offspring but all other calves that may be exposed to the cows' faeces, colostrum or milk. In particular, test high-positive cows are likely to be in advanced stages of the disease and may be super-shedders:

• Cull all JD test-positive cows if possible well before calving to reduce contamination of the calving environment. If necessary, focuse on getting rid of high-positive cows.

Any remaining test-positive cows that cannot be culled should be clearly marked as high-risk JD cows:

- Manage separately at calving to reduce contamination
- Do not rear the calf as replacement
- Discard colostrum from these cows and do not feed to calves. Up to 10-40% of calves from cows with advanced clinical JD may be infected.

#### Minimise exposure after birth

Contact with adult cows and faeces is unavoidable, but an effort should be made to keep exposure to a minimum:

- Move the calving mob to clean break regularly
- Do not leave newborns with the calving mob unnecessarily and separate at least twice a day
- Herds with high JD losses should consider snatching calves before suckling if possible and sourcing all colostrum from test-negative cows or commercial colostrum replacer.

### Use pooled colostrum from low-risk cows

Feeding all newborn calves with fresh pooled colostrum is good calf management to ensure optimal maternal anti body protection.

However, cows with advanced infection shed huge amounts of MAP and are a major risk to all calves. Mitigate this risk by:

- Collecting colostrum only from JD test-negative cows
- Alternatively collecting pooled colostrum only from younger cows

   four years old or less. Older cows are much more likely to be shedders and become clinical JD cows
- Ensuring that dirty udders and teats are free of faecal matter.











