

# A VET'S VIEW

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MILK fever is the most important nutritional disorder affecting dairy cows, and yet it is preventable. Not only will milk fever lead to downer cows, and death if left untreated, it will be costing you money – whether through decreased yield, associated health problems and increased vet costs, or dystocia and less viable calves.

Each case will cost about £250. Direct costs include treatment, labour and management, vet bills, decreased milk yields and the cost of replacing the cow if she does not recover. However, it is the indirect costs which are not noticeable and which really raise the cost of the disease. These include the increased incidence of associated diseases and metabolic problems, and the effects of decreased dry matter intakes.

Sub-clinical milk fever occurs when a cow has low blood calcium without showing the typical signs of milk fever, yet could still be suffering from the associated diseases. Estimates put the cost of sub-clinical milk fever at up to 1ppl.

The first step to rectifying the situation is to identify whether you have a sub-clinical problem. An increase in mastitis rates, ketosis, displaced abomasums, retained foetal membranes, metritis and more dystocia cases can all be signs of a calcium deficiency. If any cattle are going down with milk fever, many others could be just under the threshold and suffering sub-clinically.

Once a problem has been identified, the next step is pin pointing where the problem is occurring. Nutritional analysis can be very helpful in these cases. Forage, which is high in calcium, can lower the cow's



ability to mobilise her own calcium around the time of calving when it is needed most. Diets with high potassium, or low magnesium are risk factors, as is a low dry matter intake.

## Action

The final step is taking action. Consulting your vet and nutritionist is essential as most calcium deficiencies can be resolved through the ration and dietary management. Identifying which cows are at risk and providing these with calcium around the time of calving can lessen the chances of milk fever and reduce the incidence of associated diseases.

One step to achieve this is the use of a bolus (such as Bovikal<sup>®</sup>). Each bolus provides 42g of calcium in two forms; a quick release formula which releases most of the calcium in 30 minutes and a slow release formula which delivers further calcium over a prolonged period.

Administration of supplemental calcium to at-risk cows around calving can reduce the amount of clinical milk fever cases, and the costs associated with the sub-clinical disease. Giving these cows a bolus at onset of calving, or at calving and again 12 hours later, can dramatically decrease the incidence and effects of milk fever.



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