

Mycotoxins pose a threat to the horse's digestive system



Author: Judith Schmidt, Product Manager On Farm Solutions

Alarm in the gut! Horses have a susceptible digestive system that can quickly become unbalanced. Intestinal disorders in horses are usually associated with colic. Many factors can be responsible for intestinal issues. Have you ever thought about mycotoxins? What can horse owners do to support their horse's gut health?

The equine stomach is not robust at all. Depending on their age and use, more than half of all horses suffer from stomach pain. Their digestive system is very sensitive and very different from that of other mammals: Horses cannot vomit and often suffer from severe abdominal pain, diarrhea, or cramps if they overeat or ingest spoiled feed.

The horse's digestive system is complex and sensitive

The horse's stomach has a relatively small capacity of around twelve to fifteen liters. Depending on the feed's consistency and composition, it remains in the stomach for around one to five hours before it is pressed through the stomach outlet (pylorus) into the small intestine. The horse's entire intestine is about ten times its body length.

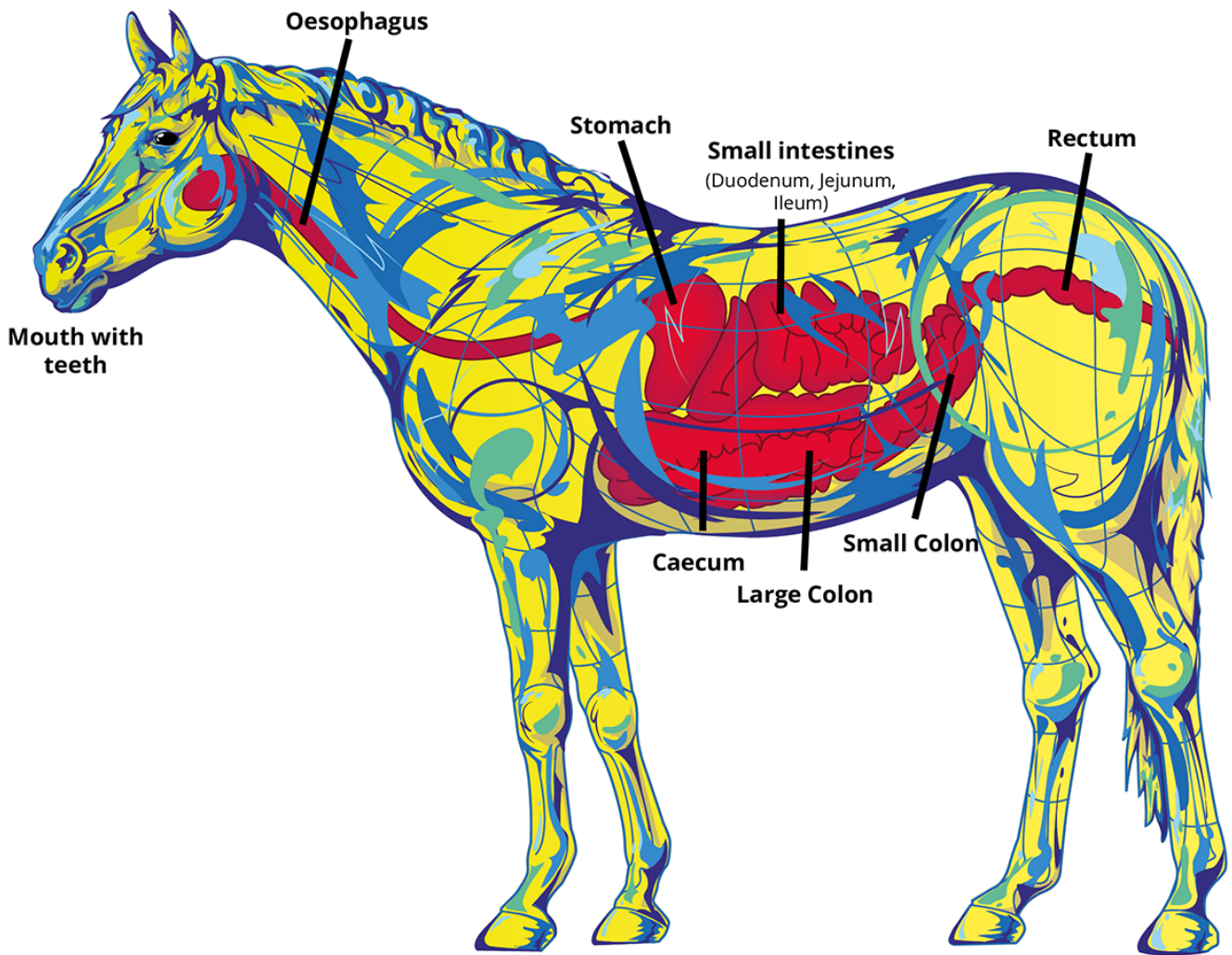


Figure 1: The horse's digestive tract

The horse's gastrointestinal tract is a complex network, reacting extremely sensitively to changes and, therefore, highly susceptible to disorders. It essentially consists of the head intestine (lips, oral cavity, teeth, and esophagus), stomach (blind pouch, fundus, and stomach outlet), small intestine (duodenum, jejunum, and ileum), and large intestine (caecum, colon and rectum). Each section plays a crucial role in the digestive process; any disruption can lead to health issues. Understanding this structure is key to maintaining a horse's digestive health.

Digestive disorders can have various reasons

Intestinal problems in horses can stem from diverse causes, often a complex interplay of multiple factors. By understanding these causes more deeply, horse owners can be better equipped to prevent and manage these issues. In the following, we delve into several of these causes.

1. Too long time between the feedings

Usually, a feeding break should be at most four to six hours, as, in nature, a horse is busy eating for at least 18 hours a day. In contrast to humans, who produce stomach acid only after food intake, the horse's

stomach produces gastric acid around the clock. The continuous intake of roughage, intensive chewing, and high saliva production (a horse produces 5 to 10 L of saliva per day) is, therefore, essential to protect the stomach mucosa by neutralizing excess gastric acid.

A too-long time between feedings and, therefore, no saliva production leads to an accumulation of gastric acid in the stomach. Four hours without roughage can already cause inflammation of the mucosa and probably ulcers.

2. Excessive amounts of concentrated feed

Excessive amounts of concentrates such as wheat or rye, conditioned by less chewing activity, increase gastric acid and histamine production, and the stomach lining can be attacked. Also, in this case, the development of stomach ulcers is possible.

Furthermore, the possibly resulting hyperacidity of the organism can lead to malfunctions of the organs, the skin, and the hooves.

3. Stress

Stress can also lead to a higher production of gastric acid and, therefore, to gastric ulcers. The horse is a flight animal. When it is under stress, it prepares for the impending escape, and the muscles are preferably supplied with blood, resulting in a lower blood flow to the mucous membranes. Furthermore, the rising cortisone level reduces the hydrochloric acid-suppressing prostaglandin E. As a result, more stomach acid is produced, irritating the gastric mucosa.

Stress can be triggered, e.g., by transportation, competitions, training, a change of house, a new rider, unsuitable equipment, or poor posture.

4. Dental diseases

The teeth are essential for digestion. When feed is chewed, it is broken down and mixed with saliva. Chipped teeth cannot chew well, and the feed is not sufficiently salivated or crushed, which has a detrimental effect on digestion.

For this reason, an expert vet should check the horse's teeth at least once a year.

5. Administration of painkillers/medication

As with humans, long-term medication administration can promote the formation of stomach ulcers. For this reason, it is essential to ensure that horses are fed a gentle diet on the stomach, especially when using oral pain therapy, and to add stomach protection if necessary.

6. Endotoxins

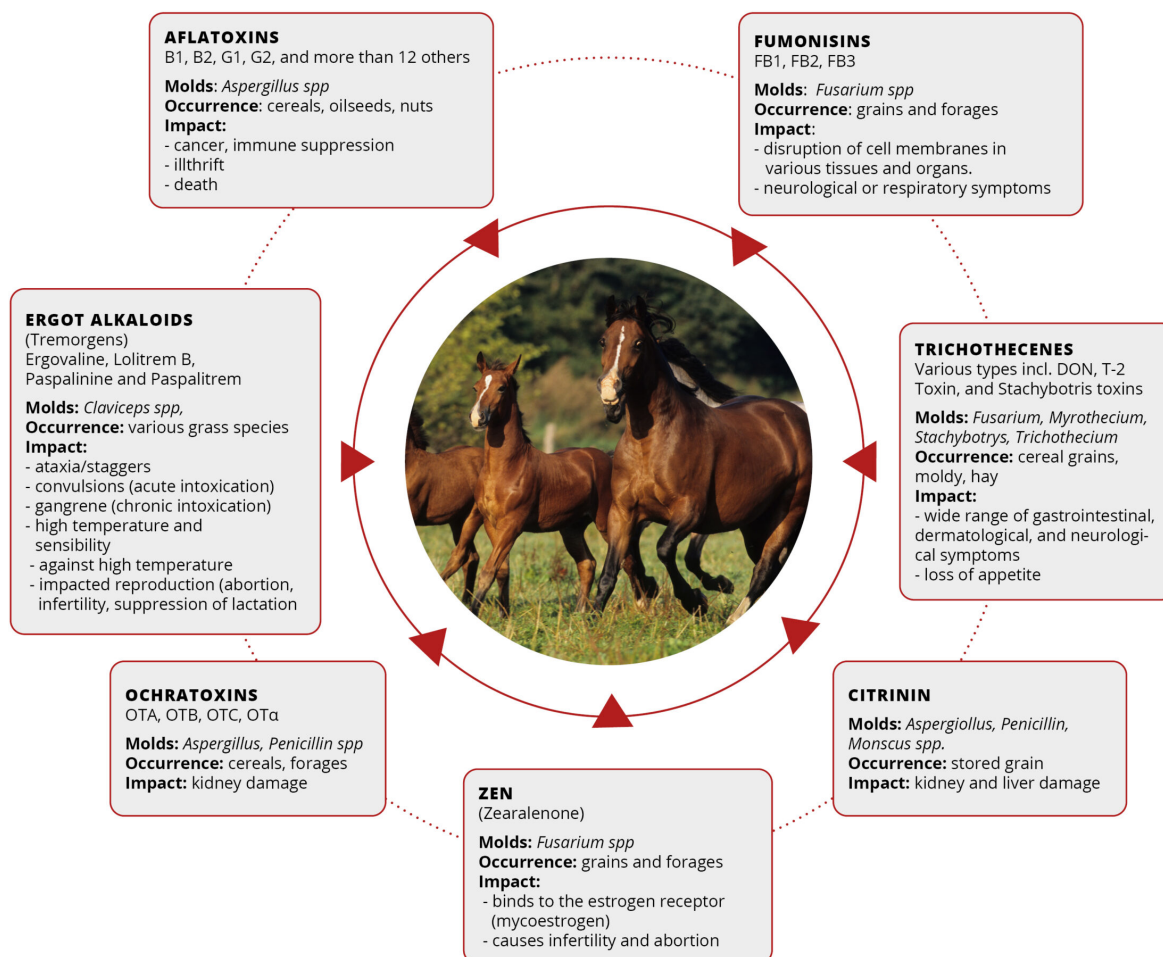
If pathogens such as E. coli or clostridia proliferate extremely or are killed by an antibiotic, endotoxins can be released. These toxins can cause transformation or inflammation of the gut mucosa. In drastic cases, whole areas of the mucosa can die off.

7. Mycotoxins - the hidden danger in horse feed

Mycotoxins in plants and horse feed are a common but often unnoticed danger to horses' health. Mycotoxins are natural, secondary metabolites of molds that have a toxic effect on humans and animals and can trigger mycotoxicosis. Contaminated feed can severely affect the horse's health and, in the worst case, lead to death.

Over 90 % of the world's feed production is estimated to be contaminated with at least one mycotoxin (see also [Global Mycotoxin Report 2023, EW Nutrition](#)). The intake of mycotoxins via hay, grain, silage, or compound feed can hardly be avoided. Mycotoxins are an increasing problem for all horse owners. Scientific studies show that the mycotoxins DON and ZEA are most frequently found in horse feed and, therefore, are also frequently detected in sports horses' urine and blood samples.

Due to the highly toxic metabolic products, feed contaminated with molds can lead to severe liver and kidney diseases in horses, affect fertility, trigger colic, and promote digestive issues (diarrhea and watery stools).



Mycotoxins Horses

Figure 2: Mycotoxins and their impact on horses

How to protect the horse from mycotoxins?

The first measure against the ingestion of mycotoxins is prevention. Correct pasture management and adequate barn and feed hygiene can contribute to preventing the ingestion of toxins.

However, despite the best prophylactic measures, it is impossible to prevent mycotoxin contamination of feed completely. As mycotoxins are not visible, analyzing the feed regarding mycotoxin contamination is recommended.

To protect your horse from mycotoxins, EW Nutrition developed MasterRisk, a tool for evaluating the risk of mycotoxins. Additionally, EW Nutrition has developed a complementary feed specifically for your horse's needs in the form of granules. The sophisticated formulation of "Toxi-Pearls" is designed to bind

mycotoxins and mitigate the adverse effects of mycotoxin contamination.

The pearls contain a mixture of mycotoxin binder, brewer's yeast, and herbs:

- The contained mycotoxin binder effectively controls the most important feed myco- and endotoxins. It additionally supports the liver and immune system and strengthens the intestinal barrier.
- Brewer's yeast supports the natural strength of the gastrointestinal tract. Due to its high natural content of beta-glucans and mannan-oligosaccharides (MOS), unique surface structure, and the associated high adsorption power, brewer's yeast has a prebiotic effect on the intestinal microbiome.
- The additional unique herbal mixture consists of the typical gastrointestinal herbs oregano, rosemary, aniseed, fennel, and cinnamon. The processed beetroot is a true all-rounder. Literature shows that it has an antioxidant effect and strengthens the immune system. It also promotes bile secretion and, therefore, supports fat digestion.

Conclusion

The horse's digestive tract is highly sensitive and must be supported by all means. Besides failures in management, such as too long breaks between feedings or too high amounts of feed concentrate, mycotoxins present a high risk in horse nutrition. To prevent horses from intestinal issues, feed and stress management, dental care, and medication in the case of disease must be optimized. Particular attention should be paid to possible mycotoxin contamination. Effective toxin risk management, which consists of analysis, risk evaluation, and adequate toxin risk-managing products, should be implemented.

Respiratory disease - one of the biggest problems in horses



By Judith Schmidt, Product Manager On-Farm Solutions

The respiratory tract in horses is prone to various problems, ranging from allergic reactions and inflammation to severe infections. Respiratory diseases are a constant topic of suffering and irritation in horse breeding and keeping. According to a study published in 2005, respiratory diseases account for about 40 % of all equine internal diseases recorded worldwide (Thein 2005). Through early diagnosis, appropriate treatment, and preventive measures, horse owners can help maintain the respiratory health of their horses and promote their well-being and performance.

The horse's lung - a high-performance organ

The respiratory tract of our horses is a high-performance system with a large surface, allowing the exchange between the inside of the body and the environment. The lungs enable the gas exchange, i.e., the transfer of oxygen from the air into the horse's bloodstream and the discharge of CO₂. A functioning gas exchange is crucial for the horse to supply its muscles with sufficient oxygen and perform.

Even when resting, a 600-kg horse breathes about 50 to 80 liters of air per minute into its lungs. With increasing load, this value can rise to 2.000 liters per minute at maximum load. If a horse is healthy, it breathes calmly and slowly and takes eight to sixteen deep breaths per minute.

A special mucous membrane covering the entire respiratory tract protects the lungs from harmful influences. When irritated by pathogens or foreign bodies, this mucous membrane generates higher amounts of mucous and transports it toward the mouth cavity with the help of the finest cilia. In this way, most harmful particles are usually trapped quickly, reliably, and, above all, effectively and, if necessary, coughed up before they can even reach the alveoli and cause damage there.

The most common respiratory diseases in horses

Chronic obstructive bronchitis

Chronic obstructive bronchitis is better known as COB or equine asthma. COB is more common in horses regularly kept in dusty or poorly ventilated environments, such as cramped stables or pastures with high mold levels. Inhalation of dust particles and allergens can cause respiratory tract inflammation, leading to coughing, increased mucus expectoration, and breathing difficulties. The clinical picture of COB can vary greatly. From occasional poor performance in show horses to chronic coughing with purulent nasal discharge or significant weight loss.

Tracheitis

Another common respiratory disease in horses is tracheitis, often caused by bacterial or viral infections. Young and older horses and those with a weakened immune system are particularly susceptible to tracheitis. Besides infections, factors such as dust, smoke, or chemicals can also irritate the mucous membrane of the trachea and trigger inflammation.

Hay fever

Hay fever, also known as allergic respiratory disease or rhinitis, is a common condition affecting horses. Known to humans, it is an allergic reaction to certain pollen, molds, or other environmental allergens that are present in the air. Common signs include sneezing, a runny nose, and itchy eyes. However, some horses may also suffer from coughing or respiratory symptoms. Hay fever in horses can occur seasonally, depending on the pollen emerging, and the symptoms may be more severe during spring, summer, or autumn.

Asthma

Asthma in horses, also known as equine asthma or heaves, is a chronic respiratory disease similar to asthma in humans in many ways. The main cause of this disease is hypersensitivity of the respiratory tract to dust, allergens, or mold spores in the horses' environment.

How to differentiate between respiratory distress and harmless rattling?



Horse owners know it – the four-legged friends have an impressive range of breathing sounds. But which are harmless, such as the excited trumpeting through the nostrils during a fright, and which could be respiratory disease symptoms?

Diagnosing respiratory problems in horses can be challenging because symptoms are often non-specific signs and similar to several diseases.

Snorting: When horses snort, it is a sign of relaxation. There is usually no cause for concern—quite the opposite.

Snorting at a gallop: Many horses snort rhythmically at a gallop, which is also considered harmless. Snorting is particularly common in thoroughbreds.

Coughing during, e.g., trotting: Occurs so frequently that it is often perceived as usual. But it is not. Coughing is always an alarm signal and can indicate an allergy, asthma, or a viral or bacterial infection.

Whistling when inhaling: In this case, to be on the safe side, a veterinarian should be consulted.

What are the consequences of respiratory disease?

Respiratory disease in horses can have significant economic consequences. If a horse suffers from chronic obstructive bronchitis or another respiratory illness, this can lead to various problems:

- **Veterinary costs increase:** Diagnosing and treating respiratory diseases often require veterinary visits, medication, and possibly further examinations such as x-rays or endoscopy.
- **Performance decreases:** A horse with respiratory problems may have severely limited performance. It may have difficulty breathing, negatively affecting its athletic performance, equestrian work, or other activities.
- **Downtime:** During the treatment or recovery, horses may have to take a break or be taken out of training, resulting in loss of income, especially if the horse was intended for competition or show.
- **Decrease in value:** A horse with chronic respiratory problems may lose its value as a sport or breeding horse. The demand for that horse and, therefore, the selling price might decrease.

Early diagnosis and treatment are crucial for containing the economic impact. However, the best strategy is to minimize the risk of respiratory disease by appropriate preventive measures.

Prevention

Preventing cough in horses is considerably important to reduce the incidence and severity of respiratory disease. Several measures can be taken to achieve this goal:

1. A clean horse stable is crucial: Dust is a common trigger of respiratory symptoms in horses. Removing dust, dirt, and mold spores regularly from the stable and horse boxes can help improve air quality and reduce respiratory stress.
2. Allow horses to breathe fresh air with efficient pasture management: When possible, horses should have access to fresh pastures. The natural outdoor environment helps horses breathe cleaner air and inhale fewer harmful particles.
3. Hay feeding should not increase exposure to allergens: The exposure to allergens can be reduced by choosing high-quality, low-dust hay. Moist soaking of the hay before feeding can also help reduce dust levels.
4. Ventilation ensures air exchange: Appropriate ventilation in the stable is essential to avoid stagnant air and dust accumulation. The use of fans or natural ventilation systems can improve air circulation.
5. Feed management: High-quality feed free of molds and allergens can reduce the risk of respiratory problems. It is vital to adjust feed rations to the individual needs of each horse.
6. Supplements support hygiene measures: Supplements can play a positive role in preventing respiratory problems in horses if used selectively and with expert advice.
 - Immune system support: Supplements such as vitamins, minerals, and antioxidants can strengthen the immune system. A healthy immune system helps the horse to better defend itself against infections and inflammation of the respiratory tract.
 - Certain supplements contain ingredients with anti-inflammatory properties, such as omega-3 fatty acids or herbal extracts. They can help alleviate inflammation in the respiratory tract and thus reduce the risk of respiratory problems.
 - Supporting respiratory health: Some supplements on the market have been specially designed to support respiratory function. They help regulate mucus production, improve respiratory protection, and facilitate the expectoration of mucus.
 - Strengthening lung capacity: Certain ingredients in supplements can support the horse's lung capacity and promote better oxygen uptake, which is essential for performance and respiratory health.

Conclusion

Respiratory health is essential for horses. So, you should consult the vet in case of noticeable breathing sounds, coughing, fever, or a drop in performance. Respiratory diseases tend to become chronic and long-term problems if they are not treated appropriately. Fresh air and species-appropriate husbandry, feeding dust- and mold-free feed are the first steps to support the normal function of your horse's respiratory tract. A holistic approach to equine health, including proper stable and feed hygiene, sufficient exercise, and good air quality in the stable is crucial. Appropriate feed supplements can be an excellent tool to round this approach off.

References:

Handbuch Pferd: Dr. med. vet. Peter Thein, 2005

Tierklinik Kaufungen (2016): Chronische Obstruktive Bronchitis (COB), Barbara Liese & Dr. Kristian Sander

Respiratory disease - the biggest problem in horses



Author: **Judith Schmidt**, Product Manager On-Farm Solutions

The respiratory tract in horses is prone to various problems, ranging from allergic reactions and inflammation to infections. Through early diagnosis, appropriate treatment, and preventive measures, horse owners can help maintain the respiratory health of their horses and promote their well-being and performance.

Respiratory diseases are a constant topic of suffering and irritation among horse owners. According to a study published in 2005, respiratory diseases account for about 40 % of all equine internal diseases recorded worldwide (Thein 2005).

The high-performance organ: the horse's lung

The respiratory tract of our horses is a high-performance system with a large exchange surface between the inside of the body and the environment. The lungs enable the so-called gas exchange, i.e., the transfer of oxygen from the air into the horse's bloodstream. Only when this gas exchange functions properly can the horse supply its muscles with sufficient oxygen.

Even at rest, about 50 to 80 liters of air per minute enter the lungs of a 600 kg horse. With increasing load, this value can rise up to 2.000 liters per minute at maximum load. If a horse is healthy, it breathes calmly and slowly and takes eight to sixteen deep breaths per minute.

In order to protect the lungs as best as possible from harmful influences, the entire respiratory tract is equipped with a special mucous membrane. When irritated by pathogens or foreign bodies, for example, this mucous membrane forms more mucous and transports it towards the mouth cavity with the help of the finest cilia. In this way, most harmful particles are usually intercepted quickly, reliably and, above all, effectively and, if necessary, coughed up before they can even reach the alveoli and cause damage there.



The most common causes of respiratory diseases in horses

Chronic obstructive bronchitis

Chronic obstructive bronchitis is better known as COB or equine asthma. COB is more common in horses that are regularly kept in dusty or poorly ventilated environments, such as cramped stables or pastures with high levels of mold. Inhalation of dust particles and allergens can cause inflammation of the respiratory tract, resulting in coughing, increased mucus expectoration and breathing difficulties. The clinical picture of COB can vary greatly. From occasional poor performance in show horses to chronic coughing with purulent nasal discharge or significant weight loss.

Tracheitis

Another common respiratory disease in horses is tracheitis. This disease is often caused by bacterial or viral infections. Young horses, older horses or those with a weakened immune system are particularly susceptible to tracheitis. Besides infections, irritating factors such as dust, smoke or chemicals can also irritate the mucous membrane of the trachea and trigger inflammation.

Hay fever

Hay fever, also known as allergic respiratory disease or allergic rhinitis, is a common condition that can also affect horses. Like humans, it is an allergic reaction to certain pollens, molds or other environmental allergens that are suspended in the air. Common signs include sneezing, a runny nose and itchy eyes.

However, some horses may also suffer from coughing or respiratory symptoms. Hay fever in horses can occur seasonally, depending on the pollen seasons. Depending on the region and season, the symptoms may be more severe during spring, summer or autumn.

Asthma

Asthma in horses, also known as equine asthma or heaves, is a chronic respiratory disease that occurs mainly in horses. It is similar to in many ways to asthma in humans. The main cause of this disease is hypersensitivity of the respiratory tract to dust, allergens or mold spores in the horse's environment.

Respiratory distress or harmless rattling?

Horse owners know it – the four-legged friends have an impressive range of breathing sounds. But which are harmless, such as the excited trumpeting through the nostrils during a fright? And which ones could be symptoms of a respiratory disease?

Diagnosing respiratory problems in horses can be challenging because symptoms can often be non-specific and/or show signs similar to several diseases.

Snorting: When horses snort, it is a sign of relaxation. There is usually no cause for concern. Quite the opposite.

Snorting at gallop: Many horses snort rhythmically at a gallop. This is also considered harmless. Snorting is particularly common in thoroughbreds.

Coughing, for example when trotting: Occurs so often that it is often perceived as normal. But it is not. Coughing is always an alarm sign and can indicate an allergy, asthma or a viral or bacterial infection.

Whistling when inhaling: To be on the safe side, a veterinarian should be consulted.

Consequences of respiratory disease

Respiratory disease in horses can have significant economic consequences. If a horse suffers from chronic obstructive bronchitis or another respiratory disease, this can lead to various problems:

- **Veterinary costs:** The diagnosis and treatment of respiratory diseases often require veterinary visits, medication, and possibly further examinations such as x-rays or endoscopy.
- **Reduced performance:** A horse with respiratory problems may be severely limited in its performance. It may have difficulty breathing, which can have a negative effect on its athletic performance, equestrian work, or other activities.
- **Downtime:** During the treatment or recovery period, horses may have to take a break or be taken out of training. This may result in loss of income, especially if the horse was intended for competition or showing.
- **Decrease in value:** A horse with chronic respiratory problems may lose its value as a sport or breeding horse. Selling price might decrease and the demand for such a horse might decrease too.

To minimize economic impact, early diagnosis and treatment is important, as the implementation of appropriate preventive measures to reduce the risk of respiratory disease.

Prevention

Prevention of equine cough is of big importance to reduce the incidence and severity of the disease.

Clean stable environment

Dust is a common trigger of respiratory symptoms in horses. Regular removal of dust, dirt and mold spores from the stable and horse boxes can help to improve air quality and reduce respiratory stress.

Pasture management

When possible, horses should be allowed access to fresh pastures. The natural outdoor environment helps horses breathe cleaner air and inhale fewer harmful particles.

Hay feeding

Choosing high quality, low dust hay can reduce exposure to allergens. Moist soaking of hay before feeding can also help reduce dust levels.

Ventilation in the stable

Good ventilation in stables is essential to avoid stagnant air and dust accumulation. The use of fans or natural ventilation systems can improve air circulation.

Feed management

Feeding high quality feed that is free of mold and allergens can reduce the risk of respiratory problems. It is important to adjust feed rations to the individual needs of each horse.

Supplements

Supplements can play a positive role in the prevention of respiratory problems in horses if they are used selectively and with expert advice.

- Immune system support: Supplements such as vitamins, minerals and antioxidants can strengthen the immune system. A healthy immune system helps the horse to better defend itself against infections and inflammation of the respiratory tract.
- Certain supplements contain ingredients with anti-inflammatory properties, such as omega-3-fatty acids or herbal extracts. These can help reduce inflammation in the respiratory tract and thus reduce the risk of respiratory problems.
- Supporting respiratory health: Some supplements on the market have been specially designed to support respiratory function. They can help to regulate mucus production, improve respiratory protection, and facilitate the expectoration of mucus.
- Strengthening lung capacity: Certain ingredients in supplements can support the horse's lung capacity and promote better oxygen uptake, which is important for performance and respiratory health.

Conclusion

If there are noticeable breathing sounds, coughing, fever or a drop in performance, the vet should come quickly. A respiratory disease tends to develop into a long-term problem if it is not treated appropriately. Without treatment, it can become chronic in some cases. Fresh air and species-appropriate husbandry, as well as feed that is free of mold and dust, are the first steps to supporting the normal function of your horse's respiratory tract. Supplements can be an excellent tool for prevention. A holistic approach to equine health is crucial. This includes proper stable and feed hygiene, sufficient exercise, and good air quality in stables.

References:

Handbuch Pferd: Dr. med. vet. Peter Thein, 2005

Tierklinik Kaufungen (2016): Chronische Obstruktive Bronchitis (COB), Barbara Liese & Dr. Kristian Sander

Fighting antimicrobial resistance with immunoglobulins



By **Lea Poppe**, Regional Technical Manager On-Farm Solutions Europe, and **Dr. Inge Heinzl**, Editor

One of the ten global public health threats is antimicrobial resistance (AMR). Jim O'Neill predicted 10 million people dying from AMR annually by 2050 (O'Neill, 2016). The following article will show the causes of antimicrobial resistance and how antibodies from the egg could help mitigate the problem of AMR.

Global problem of AMR results from the incorrect use of antimicrobials

Antimicrobial substances are used to prevent and cure diseases in humans, animals, and plants and include antibiotics, antivirals, antiparasitics, and antifungals. The use of these medicines does not always happen consciously, partially due to ignorance and partially for economic reasons.

There are various possibilities for the wrong therapy

1. The use of antibiotics against diseases that household remedies could cure. A recently published [German study](#) (Merle et al., 2023) confirmed the linear relationship between treatment frequency and resistant scores in calves younger than eight months.
2. The use of antibiotics against viral diseases: antibiotics only act against bacteria and not against viruses. Flu, e.g., is caused by a virus, but doctors often prescribe an antibiotic.
3. Using broad-spectrum antibiotics instead of determining an antibiogram and applying a specific

antibiotic.

4. A too-long treatment with antimicrobials so that the microorganisms have the time to adapt. For a long time, the only mistake you could make was to stop the antibiotic therapy too early. Today, the motto is “as short as possible”.

Let's take the example of neonatal calf diarrhea, one of the most common diseases with a high economic impact. Calf diarrhea can be caused by a wide range of bacteria, viruses, or parasites. This infectious form can be a complication of non-infectious diarrhea caused by dietary, psychological, and environmental stress ([Uetake, 2012](#)). The pathogens causing diarrhea in calves can vary with the region. In Switzerland and the UK, e.g., rotaviruses and cryptosporidia are the most common pathogens, whereas, in Germany, *E. coli* is also one of the leading causes. To minimize the occurrence of AMR, it is always crucial to know which pathogen is behind the disease.

Prophylactic use of antibiotics is still a problem

1. The use of low doses of antibiotics to promote growth. This use has been banned in the EU now for 17 years now, but in other parts of the world, it is still common practice. Especially in countries with low hygienic standards, antibiotics show high efficacy.
2. The preventive use of antibiotics to help, e.g., piglets overcome the critical step of weaning or to support purchased animals for the first time in their new environment. Antibiotics reduce pathogenic pressure, decrease the incidence of diarrhea, and ensure the maintenance of growth.
3. Within the scope of prophylactic use of antimicrobials, also group treatment must be mentioned. In veal calves, group treatments are far more common than individual treatments (97.9% of all treatments), as reported in a [study](#) documenting medication in veal calf production in Belgium and the Netherlands. Treatment indications were respiratory diseases (53%), arrival prophylaxis (13%), and diarrhea (12%). On top, the study found that nearly half of the antimicrobial group treatment was underdosed (43.7%), and a large part (37.1%) was overdosed.

However, in several countries, consumers request reduced or even no usage of antibiotics (“No Antibiotics Ever” – NAE), and animal producers must react.

Today's mobility enables the spreading of AMR worldwide

Bacteria, viruses, parasites, and fungi that no longer respond to antimicrobial therapy are classified as resistant. The drugs become ineffective and, therefore, the treatment of disease inefficient or even impossible. All the different usages mentioned before offer the possibility that resistant bacteria/microorganisms will occur and proliferate. Due to global trade and the mobility of people, drug-resistant pathogens are spreading rapidly throughout the world, and common diseases cannot be treated anymore with existing antimicrobial medicines like antibiotics. Standard surgeries can become a risk, and, in the worst case, humans die from diseases once considered treatable. If new antibiotics are developed, their long-term efficacy again depends on their correct and limited use.

Different approaches are taken to fight AMR

There have already been different approaches to fighting AMR. As examples, the annually published [MARAN Report](#) compiled in the Netherlands, the [EU ban on antibiotic growth promoters](#) in 2006, “[No antibiotics ever \(NAE\) programs](#)” in the US, or the annually published “[Antimicrobial resistance surveillance in Europe](#)” can be mentioned. One of the latest approaches is an advisory “One Health High-Level Expert Panel” (OHHLEP) founded by the Food and Agriculture Organization of the United Nations (FAO), the World Organization for Animal Health (OIE), the United Nations Environment Program (UNEP), and the World Health Organization (WHO) in May 2021. As AMR has many causes and, consequently, many

players are involved in its reduction, the OHHLEP wants to improve communication and collaboration between all sectors and stakeholders. The goal is to design and implement programs, policies, legislations, and research to improve human, animal, and environmental health, which are closely linked. Approaches like those mentioned help reduce the spread of resistant pathogens and, with this, remain able to treat diseases in humans, animals, and plants.

On top of the pure health benefits, reducing AMR improves food security and safety and contributes to achieving the [Sustainable Development Goals](#) (e.g., zero hunger, good health and well-being, and clean water).

Prevention is better than treatment

Young animals like calves, lambs, and piglets do not receive immunological equipment in the womb and need a passive immune transfer by maternal colostrum. Accordingly, optimal colostrum management is the first way to protect newborn animals from infection, confirmed by the general discussion on the [Failure of Passive Transfer](#): various studies suggest that calves with poor immunoglobulin supply suffer from diarrhea more frequently than calves with adequate supply.

Especially during the immunological gap when the maternal immunoglobulins are decreasing and the own immunocompetence is still not fully developed, it is crucial to have a look at housing, stress triggers, [biosecurity](#), and the diet to reduce the risk of infectious diseases and the need for treatments.

Immunoglobulins from eggs additionally support young animals

Also, if newborn animals receive enough colostrum in time and if everything goes optimally, the animals suffer from two immunity gaps: the first one occurs just after birth before the first intake of colostrum, and the second one occurs when the maternal antibodies decrease, and the immune system of the young animal is still not developed completely. These immunity gaps raise the question of whether something else can be done to support newborns during their first days of life.

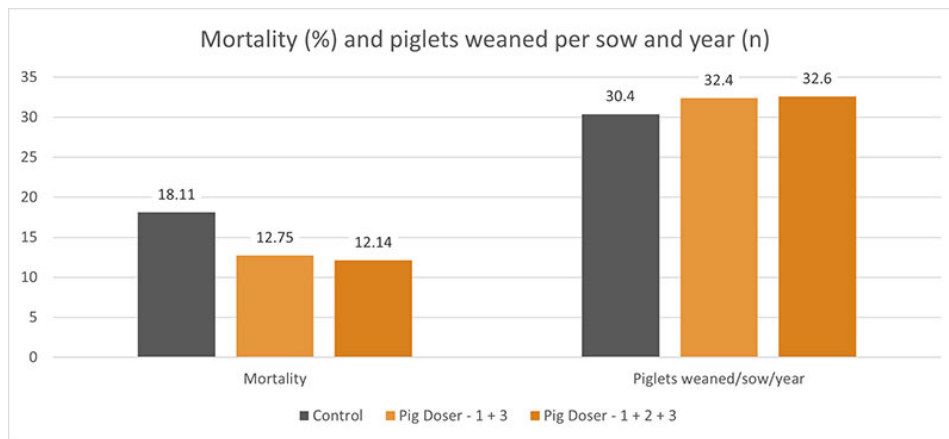
The answer was provided by Felix Klemperer (1893), a German internist researching immunity. He found that hens coming in contact with pathogens produce antibodies against these agents and transfer them to the egg. It is unimportant if the pathogens are relevant for chickens or other animals. In the egg, the immunoglobulins usually serve as an immune starter kit for the chick.

Technology enables us today to produce a high-value product based on egg powder containing natural egg immunoglobulins (IgY – immunoglobulins from the yolk). These egg antibodies mainly act in the gut. There, they recognize and tie up, for example, diarrhea-causing pathogens and, in this way, render them ineffective.

The efficacy of egg antibodies was demonstrated in different studies (Kellner et al., 1994; Erhard et al., 1996; Ikemori et al., 1997; Yokoyama et al., 1992; Marquart, 1999; Yokoyama et al., 1997) for piglets and calves.

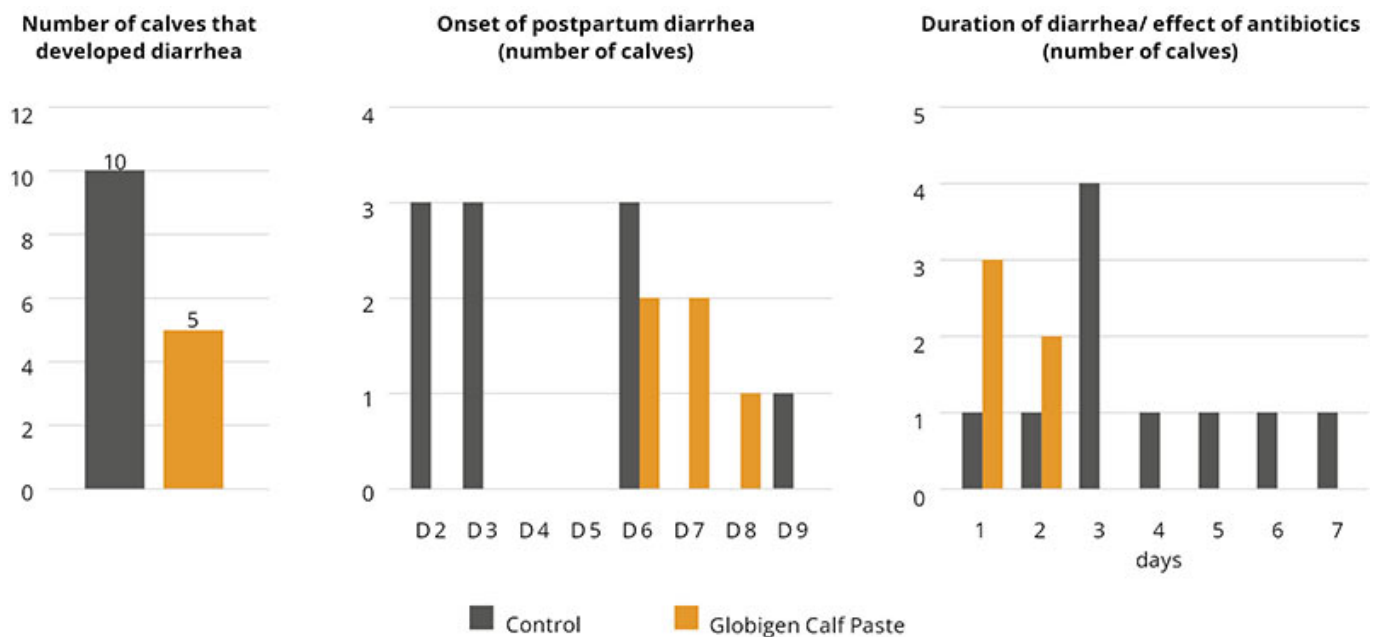
Trial proves high efficacy of egg immunoglobulins in piglets

One trial conducted in Germany showed promising results concerning the reduction of mortality in the farrowing unit. For the trial, 96 sows and their litters were divided into three groups with 32 sows each. Two of the groups orally received a product containing egg immunoglobulins, the EP -1 + 3 group on days 1 and 3 and the EP - 1 + 2 + 3 group on the first three days. The third group served as a control. Regardless of the frequency of application, the egg powder product was very supportive and significantly reduced mortality compared to the control group. The measure resulted in 2 additionally weaned piglets than in the control group.



Egg immunoglobulins support young dairy calves

IgY-based products were also tested in calves to demonstrate their efficacy. In a field trial conducted on a Portuguese dairy farm with 12 calves per group, an IgY-containing oral application was compared to a control group without supplementation. The test product was applied on the day of birth and the two consecutive days. Key observation parameters during a two-week observation period were diarrhea incidence, onset, duration, and antibiotic treatments, the standard procedure on the trial farm in case of diarrhea. On-farm tests to check for the pathogenic cause of diarrhea were not part of the farm's standards.



In this trial, 10 of 12 calves in the control group suffered from diarrhea, but in the trial group, only 5 calves. Total diarrhea and antibiotic treatment duration in the control group was 37 days (average 3.08 days/animal), and in the trial group, only 7 days (average 0.58 days/animal). Additionally, diarrhea in calves of the Globigen Calf Paste group started later, so the animals already had the chance to develop an at least minimally working immune system.

The supplement served as an effective tool to support calves during their first days of life and to reduce antibiotic treatments dramatically.

Conclusion

Antimicrobial reduction is one of the biggest tasks for global animal production. It must be done without impacting animal health and parameters like growth performance and general cost-efficacy. This overall demand can be supported with a holistic approach considering biosecurity, stress reduction, and nutritional support. Feed supplements such as egg immunoglobulins are commercial options showing great results and benefits in the field and making global animal production take the right direction in the future.

References upon request.

Cryptosporidia in calves - chickens can help



By **Lea Poppe**, Regional Technical Manager, EW Nutrition

Diarrhea due to infestation with cryptosporidia is one of the most pressing problems in calf rearing. These protozoa, along with rotaviruses, are now considered the most common pathogens in infectious calf diarrhea. Due to their high resistance and thus limited possible control and prevention measures, they have now overtaken other pathogens such as coronaviruses, salmonellae, and *E. coli*.

Cryptosporidia show complex development

Cryptosporidia are single-celled intestinal parasites. In calves, *Cryptosporidium parvum* and *Cryptosporidium bovis* are most commonly found. *C. bovis* is normally considered nonpathogenic. Accordingly, the disease known as cryptosporidiosis is caused by *C. parvum*. The rapid tests for determining the diarrheal pathogens, which are increasingly widespread, are usually unsuitable for distinguishing between the individual strains, which can lead to false positive results.

Resistant in the environment, active in the animal

In the environment, cryptosporidia are distributed as oocysts. The oocysts are only about 5 μm in size and have a very resistant shell. They can remain infectious for up to 6 months in high humidity and moderate temperatures. Drought and extreme temperatures (below -18°C and above 65°C) cause the oocysts to die.

After oral ingestion, the oocysts are reactivated by conditions in the gastrointestinal tract (low pH and body temperature): As sporozoites, the parasites attach to the posterior small intestine, causing diarrhea symptomatology. There, they surround themselves with a special protective membrane, and the complex life cycle continues. Only a few days after infection, reproductive forms are detectable in the calf's intestine, and excretion of infectious oocysts in the feces begins.

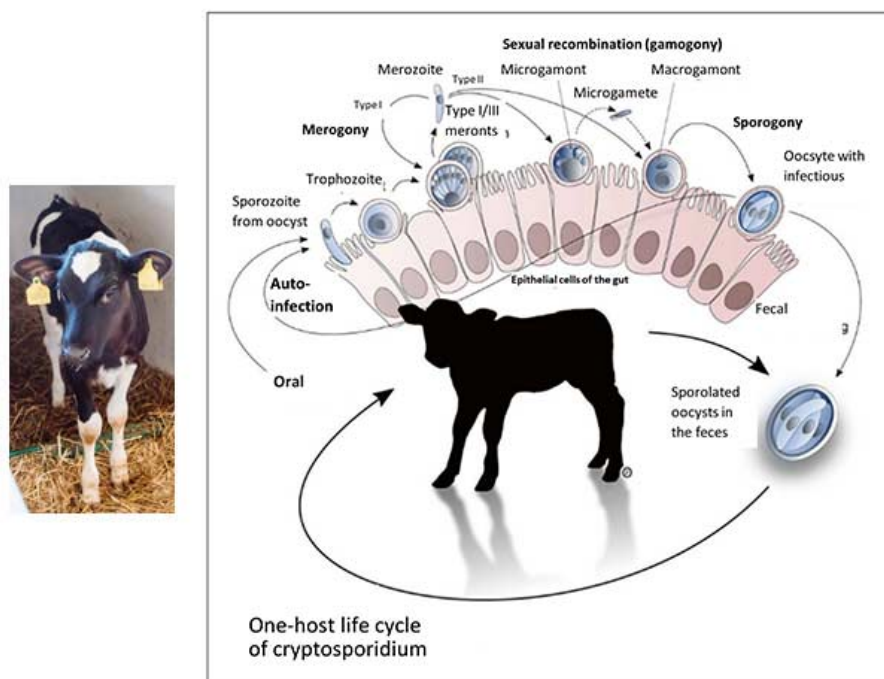


Figure 1 (Olias et al., 2018): Life cycle of cryptosporidia: ingested oocysts release four sporozoites that invade host enterocytes (intestinal epithelial cells). There, they develop into trophozoites before asexual and sexual reproduction ensues, and thin- and thick-walled oocysts are formed. Thick-walled oocysts are excreted through the intestine. Thin-walled oocysts may break apart, and the sporozoites may infect other enterocytes, resulting in relapse or prolonged diarrhea. Infestation of the cells leads to their destruction, resulting in villi atrophy or fusion.

Oocysts bring the disease to the animal

Cryptosporidiosis is transmitted either by direct contact of calves with feces from infected animals or indirectly by ingesting contaminated feed, bedding, or water. Each gram of feces excreted by calves showing symptoms may contain up to 100 million oocysts. According to experimental studies, as few as 17 orally ingested oocysts are sufficient to trigger infection. In addition, some multiplication forms can infect other intestinal cells directly within the intestine and thus further advance the disease by autoinfection.

Cryptosporidiosis caused by cryptosporidia often presents with typical diarrhea symptoms and occurs primarily in calves up to 3 weeks of age. Older calves may also be infected with cryptosporidia but usually show no symptoms. Pathogen excretion and, thus, the spread of disease within the herd is nevertheless likely due to the minimal infectious dose.

Damage to the intestinal wall leads to retardation of growth

Attachment of cryptosporidia to the intestinal wall is associated with an inflammatory reaction, regression and fusion of the intestinal villi, and damage to the microvilli. As a result, nutrient absorption in the small intestine is impaired, and more undigested nutrients enter the colon. The microflora starts a fermentation process with lactose and starch, leading to increased lactate levels in the blood and, thus, hyperacidity in the calf. Faintness, unwillingness to drink, recumbency, and growth disorders are the consequences.

Diarrhea often occurs late or not at all and, accordingly, is not considered the main symptom of cryptosporidiosis. When diarrhea occurs, it lasts about 1-2 weeks. The feces are typically watery, greenish-yellow, and are often described as foul-smelling. Due to diarrhea, there is a loss of electrolytes and dehydration.

Studies show: Cryptosporidia are the most prevalent diarrheal pathogens

Several studies in different regions, which examined calf diarrhea and its triggers in more detail, came to a similar conclusion: Cryptosporidia are one of the most common causes of calf diarrhea. In addition, mixed infections often occur.

Country or region	Number	Age/Health status	% Crypto-sporidia	% Rota viruses	Combined infections with crypto-sporidia	Others (%)	Source
Switzerland		2 - 21 DL Ill and healthy	43	46		1 case of E. coli	Luginbühl et al., 2012
Switzerland	63	1 - 4 DL Ill and healthy 7 - 20 DL 26 - 49 DL	34.4 54.0 33.3	3.1 28.6 13.3	2 EP - 1.6 4 EP - 3.2 2 EP - 19 3 EP - 3.2 4 EP - 0 2 EP - 30 3 EP - 11.7 4 EP - 6.7	Corona 4.7 E. coli 4.7 Giardia 1.6 Corona 0 E. coli 3.2 Giardia 6.3 Corona 0 E. coli 15 Giardia 35	Weber et al., 2016 Weber et al., 2016 EN
Switzerland	147	Up to 3rd WL; Diarrhea	55	58.7		5.5 % Rota 7.8 % BCV	Lanz Uhde et al., 2014
Sweden	782	1 - 7 DL Diarrhea	25.3		Detected with Giardia, E. coli, Rota, Eimeria		Silverlås et al., 2012
USA (East coast)	503	Pre-weaning	50.3				Santin et al., 2004

USA	30	2 weeks old 1-8 weeks old 3-12 months 12-24 months	96.7 45.8 18.5 2.2				Santin et al., 2008
Germany	521		32	9			Losand et al., 2021
Ethiopia	360		18.6				Ayele et al., 2018
Argentina	1073	n.m. / Ill and healthy	25.5				Lombardelli et al., 2019
UK	n.m.	Ill ??	37	25	20	Coccidia 8 E. coli 4 Corona 3 Co infections not including Cryptosporidia 3	APHA, SRUC, Veterinary investigation diagnosis analysis (VIDA) report (2014)

DL = days of life WL = weeks of life n.m. = not mentioned EP = enteropathogen

Cryptosporidia reduces profit

Infection with cryptosporidia and sometimes subsequent diarrhea entails treatment of the animals and generates costs (veterinarian, medication, electrolyte drinks). In addition, poorer feed conversion, lower growth, and animal losses result in lower production efficiency.

A [Scottish study](#) shows 34 kg less gain in the first six months of life compared to healthy calves in beef calves that experienced severe cryptosporidiosis in the first three weeks of life. Similar results are described in lambs, also a susceptible species to cryptosporidia. These studies suggest a long-term negative effect of cryptosporidia on growth performance and production efficiency.

Here's how you can support your calves against cryptosporidia

High resistance of the pathogens to environmental influences, a very low necessary infection dose combined with an elevated excretion of infectious oocysts, and the possibility of autoinfection make cryptosporidia tough opponents. This is also reflected in their worldwide distribution.

What is the treatment?

Suitable drugs for the treatment of cryptosporidiosis are currently unavailable on the market. The only medicine that can be used in case of cryptosporidiosis infestation may only be administered to calves that have had diarrhea symptoms for 24 hours or less. Accordingly, this agent is usually used only for prevention. Scientific studies on its effectiveness are contradictory; some suggest that it merely delays the onset of the disease. In addition, it is not always easy to use due to the exact dosage that must be followed. Doubling the dose (sometimes happening already due to incorrectly observed intervals between doses) can lead to a toxic overdose.

Accordingly, only the symptoms of the disease – diarrhea with its accompanying symptoms – can be treated. Electrolyte and water losses must be continuously compensated with the help of a [high-quality electrolyte drink](#). The buffer substances contained also reduce the hyperacidity of the blood caused by faulty fermentation in the intestines. For successful treatment, the electrolyte drink should be given in addition to the milk drink. Under no circumstances should the feeding of milk or milk replacer be discontinued because the sick calf urgently needs energy and nutrients. Opinions to the contrary are outdated.

As always: prevention is better than treatment

To make it more difficult for [cryptosporidiosis](#) to spread from the outset, it is worth looking at the risk factors. These include direct contact with other calves and general herd size. Furthermore, organic farms seem to have more problems with cryptosporidia. Weather also influences calves born during warmer and, at the same time, wetter weather periods (temperature-humidity index) often get sick.

Due to the limited possibilities for treatment, prevention is of greater importance. For other diarrheal pathogens such as rotavirus, coronavirus, and *E. coli*, it has become established practice to vaccinate dams to achieve better passive immunization of the calf. However, commercial vaccination against cryptosporidia is not currently available, making dam vaccination as unavailable as calf vaccination.

Accordingly, optimal colostrum management is the first way to protect the calf from cryptosporidia infection. This also confirms the general discussion on the [Failure of Passive Transfer](#): various studies suggest that calves with poor immunoglobulin supply suffer from diarrhea more frequently than calves with good supply, although a concrete link to cryptosporidia itself cannot always be established with certainty.

Furthermore, it is essential to break the chain of infection within farms. In addition to the separate housing of the calves, it is necessary to ensure consistent hygiene. One should take advantage of the pathogen's weakness as well as its sensitivity to high temperatures and ensure that the water temperature is sufficiently high when cleaning the calf pens and calving area. When disinfecting afterward, it is crucial to consider the spectrum of activity of the agent used, as not all are effective against cryptosporidia.

Egg immunoglobulins support animals against cryptosporidia

[Egg immunoglobulins](#) were initially designed to help chicks get started. In this process, hens form antibodies against pathogens they are confronted with. As studies have shown, this also works with cryptosporidia. Cama and Sterling (1991) tested their produced antibodies in the neonatal mouse model and achieved a significant ($P \leq 0.001$) reduction in parasites there. Kobayashi et al. (2004) registered decreased binding of sporozoites to the intestinal cell model and their decreased viability in addition to oocyst reduction.

In the IRIG Research Institute (2009, unpublished), feeding egg powder with immunoglobulins against cryptosporidia (10 g/day) to 15 calves reduced oocyst excretion. Before administration, calves excreted an average of 106.42 oocysts/g of feces. After administration of egg powder, only two calves still showed 103.21 oocysts/g feces, and the other 13 of the 15 calves showed no oocyst excretion. All these results are confirmed by positive customer feedback on [IgY-based feed supplements](#).

Egg immunoglobulins and optimal colostrum management as a key solution

Since there are no effective drugs against cryptosporidia, animals must be prophylactically protected against this disease as much as possible. In addition to optimal colostrum management, which means feeding high-quality colostrum ($\text{IgG} \geq 50\text{g/L}$) to the calf as soon as possible after birth, we have products with egg immunoglobulins available to support the calf as a prophylactic against cryptosporidia infestation and thus prevent significant performance losses, especially during rearing.

References

Brainard, J., Hooper, L., McFarlane, S., Hammer, C. C., Hunter, P. R., & Tyler, K. (2020). Systemic review of modifiable risk factors shows little evidential support for most current practices in *Cryptosporidium* management in bovine calves. *Parasitology research* 119, 3572-3584.

- Cama, V. A., and C. R. Sterling. "Hyperimmune Hens as a Novel Source of Anti-Cryptosporidium Antibodies Suitable for Passive Immune Transfer." University of Arizona. Wiley-Blackwell, January 1, 1991. <https://experts.arizona.edu/en/publications/hyperimmune-hens-as-a-novel-source-of-anti-cryptosporidium-antibo>.
- Kobayashi, C, H Yokoyama, S Nguyen, Y Kodama, T Kimata, and M Izei. "Effect of Egg Yolk Antibody on Experimental Infection in Mice." *Vaccine* 23, no. 2 (2004): 232-35. <https://doi.org/10.1016/j.vaccine.2004.05.034>.
- Lamp, D. O. (25. Januar 2020). Rinder aktuell: Kälberdurchfall durch Kryptosporidien – Hartnäckig und weitverbreitet. *BAUERNBLATT*, S. 52-53.
- Losand, B., Falkenberg, U., Krömker, V., Konow, M., & Flor, J. (2. März 2021). Kälberaufzucht in MV – Alles im grünen Bereich? 30. Milchrindtag Mecklenburg-Vorpommern.
- Luginbühl, A., K. Reitt, A. Metzler, M. Kollbrunner, L. Corboz, and P. Deplazes. "Feldstudie Zu Prävalenz Und Diagnostik Von Durchfallerregern Beim Neonaten Kalb Im Einzugsgebiet Einer Schweizerischen Nutztierpraxis." *Schweizer Archiv für Tierheilkunde* 147, no. 6 (2005): 245-52. <https://doi.org/10.1024/0036-7281.147.6.245>.
- Olias, P., Dettwiler, I., Hemphill, A., Deplazes, P., Steiner, A., & Meylan, M. (2018). Die Bedeutung der Cryptosporidiose für die Kälbergesundheit in der Schweiz. *Schweiz Arch Tierheilkd, Band 160, Heft 6, Juni 2018*, 363-374.
- Santín, M., Trout, J. M., Xiao, L., Zhou, L., Greiner, E., & Fayer, R. (2004). Prevalence and age-related variation of Cryptosporidium species and genotypes in dairy calves. *Veterinary Parasitology* 122, 103-117.
- Shaw, H. J., Innes, E. A., Morrison, L. J., Katzer, F., & Wells, B. (2020). Long-term production effects of clinical cryptosporidiosis in neonatal calves. *International Journal for Parasitology* 50, 371-376.
- Silverlås, C., H. Bosaeus-Reineck, K. Näslund, and C. Björkman. "Is There a Need for Improved Cryptosporidium Diagnostics in Swedish Calves?" *International Journal for Parasitology* 43, no. 2 (2013): 155-61. <https://doi.org/10.1016/j.ijpara.2012.10.009>.
- Thomson, Sarah, Carly A. Hamilton, Jayne C. Hope, Frank Katzer, Neil A. Mabbott, Liam J. Morrison, and Elisabeth A. Innes. "Bovine Cryptosporidiosis: Impact, Host-Parasite Interaction, and Control Strategies." *Veterinary Research* 48, no. 1 (2017). <https://doi.org/10.1186/s13567-017-0447-0>.
- Uhde, F., Kaufmann, T., Sager, H., Albin, S., Zanoni, R., & Schelling, E. (2008). Prevalence of four enteropathogens in the feces of young diarrhoeic dairy calves in Switzerland. *Veterinary Record* (163), 362-366.
-

Coughing calves? How to save costs and prevent respiratory disease



By **Judith Schmidt**, Product Manager On Farm Solutions

There will always be germs in barns. Yet, calves are particularly susceptible to lung viruses and bacteria that attack the respiratory systems. What can we do to prevent calf flu?



Coughing in calves is one of the most obvious signs of illness. It should be taken seriously – calves are important for the profitability of farms. Calf flu not only leads to treatment costs but also has long-term consequences, such as weak daily gains, delayed lactation, lower milk yield, reduced fertility, and increased susceptibility to other diseases.

Respiratory disease in calves: recognize the symptoms and protect their lung health

Calves are much more [sensitive to respiratory diseases](#) than many other animals. Why? One major cause is that calves are born with immature lungs. The lungs are only fully developed at about one year of age. In addition, calves generally have small lungs relative to their body size. Furthermore, the immunological gaps around the second month of life are decisive. During this phase, the number of maternal antibodies in the calf's blood decreases, while the calf's own [immune system is still slowly building up](#).

Symptoms of calf flu

1) Cough

A very easy-to-recognize sign of a developing calf flu is coughing. Coughing can also be caused by changes in weather, stress, or an unsuitable barn climate, but coughing should always be monitored, and animals should be checked for other symptoms.

2) Respiratory distress

Sick calves breathe heavily and show an increased respiratory rate. Even at rest, this can be more than forty breaths per minute, ranging from a slight acceleration of breathing to severe respiratory distress and breathing through the open mouth. Mouth breathing can be the first indication of lung damage.

3) Eye and nose discharge

Calf flu not only shows its symptoms in the internal respiratory tract but also in the eyes and nose through clear, watery discharge. In later stages, bacterial infections can also cause purulent discharge. The animal's gaze is not clear and rather "sleepy."

4) Body posture

Calf flu often manifests itself by drooping ears or an overall low head posture, as the calves are dull and weak. They are inactive and separate themselves from the group. They also lie down and standing up is delayed.

5) Reduced water and feed intake

Due to their physical condition, animals suffering from flu tend to take in only little feed and water or do not eat and/or drink at all. The logical consequence is a weakening of the animals. In case of doubt, one should actively water and feed the animals.

Economic significance of respiratory disease in calves

Influenza in cattle and calves is a herd disease and often causes serious financial losses. Losses are caused by pronounced performance decreases, developmental disorders of the animals, and treatment costs. Significantly reduced daily gains have been [demonstrated for fattening animals](#).

Next to [diarrheal diseases](#), calf flu causes the highest treatment and follow-up costs for calves. A study by the Chamber of Agriculture of Lower Saxony (Germany) found that farmers had to spend between 83 and 204 euros per sick calf, depending on the severity of the disease.

4 tips to save costs and tackle calf flu with less antibiotics use

1) Offer a stable climate

Warm, damp barns, as well as overcrowded and poorly ventilated ones, weaken the calf's defense mechanisms. Temperature fluctuations of more than 10°C between day and night also favor the development of calf flu. It is important to keep the calves' environment free of dust and draughts. This can be achieved by adjusting the air exchange rate.

In addition, the humidity in barns without a heating system should be between 60 and 80 percent. Data loggers help to keep an eye on the climate in the barn. They make it possible to check how the outdoor climate and ventilation affect the climate conditions in the barn.

2) Hygiene-sensitive calving management

Attention should be paid to calving management. The long-term health of the animal is already predetermined in the calving pen. If several cows calve at the same time or if calving pens are not mucked out regularly, harmful germs will accumulate. In other words: if a calf is born into a dirty box, it will absorb many germs through its mucous membranes.

3) Avoid stress

It is crucial to minimize stress from causes such as transport, re-housing, feed changes, group formation, dehorning, and weaning. These events should be spaced out as far as possible and should never occur simultaneously.

4) Prevention through supplementary feed

In the winter months, when the weather is cold and damp and constantly changing, calf flu incidence skyrockets. Now, it is imperative to strengthen the calf's respiratory tract from the beginning. [EW Nutrition's Bronchogol Liquid](#) is a herbal concentrate that supports respiration and stabilizes the physiological defense system in the respiratory organs.

Bronchogol liquid supports young calves in stressful situations, such as critical weather transition periods (autumn-winter; winter-spring) and housing changes, and when they suffer from calf flu. The product is based on a proprietary mixture of phytomolecules. By stimulating the cilia in the respiratory tract, the phytomolecules promote the transport of mucus and facilitate expectoration.

4 steps to improve dairy cow fertility through feeding



By **Judith Schmidt**, Product Manager On Farm Solutions

The average pregnancy rate for dairy cows has declined over the past decades. But why is my cow not getting pregnant? Is it because of feeding? These are questions we ask ourselves when things do not quite work out with the offspring in the cowshed. Economic success in the cow barn is closely related to the successful reproduction of our cattle herd.



The maintenance and possible improvement of fertility are becoming increasingly important issues for farm productivity. Infertility is still one of the main reasons for culling on dairy farms. When farmers decide to cull a cow after a few unsuccessful inseminations, they often ask themselves whether this could not have been prevented. There is no “all-encompassing” solution for achieving an optimal fertility rate, which ultimately requires excellent management. Relevant factors include oestrus monitoring and insemination timing, genetic conditions, feeding, hygiene, and climate.

How can I tell if a cow is in heat?

A cow behaves differently than usual during oestrus. She is restless and walks around more. A cow in heat stands next to other cows – head to tail. She also quarrels with her herd mates or sniffs at the shame of the other cows. Fertility in cows decreases during late winter and spring; the resulting absence of clear signs of oestrus makes it difficult to recognize the right time for insemination. There are several possible causes which will be reviewed below.

Possible causes of fertility problems in dairy cows

Beta-carotene deficiency

A productive herd needs to receive an optimal mineral and trace element supply. Beta-carotene, in particular, is essential for herd fertility. But why?

Beta-carotene is an orange-yellow plant pigment whose name comes from “carrot” because of its appearance. It is also a precursor of vitamin A. Both as a precursor and as vitamin A itself, it is essential for the organism of humans and animals, particularly when it comes to the fertility of dairy cows. Besides its important function as provitamin A, beta-carotene also exerts an independent effect on the ovary. It influences the quality of the follicle and the corpus luteum. Beta-carotene also protects the corpus luteum. It promotes the synthesis of the pregnancy hormone progesterone and thus enables the fertilized egg to implant successfully in the uterine lining.

A beta-carotene deficiency can lead to the following problems:

- Smaller, not fully functional follicles
- Altered oestrus intervals
- Indistinct signs of oestrus
- Decreased corpus luteum quality

Scientific trials show how much a [beta-carotene deficiency](#) influences the fertility process. With a beta-carotene deficiency, the fertilization rate after the first insemination is only 40%, whereas with a normal beta-carotene supply, the fertilization rate is about 70%.

How do I know if my herd is deficient in beta-carotene?

The easiest way is to check the color of the fresh colostrum. If it is a deep yellow to an even orange, the cows are supplied with sufficient beta-carotene. If it looks more ivory, this is a sign of a deficiency. Of course, a poor herd fertilization rate can also indicate a deficiency. If you suspect a beta-carotene deficiency, it is best to test some blood samples from your animal or use a testing device such as a carotene photometer. With such a test kit, you can determine not only the levels in the blood but also in the colostrum and the milk.

Feeding deficiencies

Feeding plays a major role in fertility issues. Too low input rates often have a negative effect on the health of cows. Feed quality and herd management have an impact on how long the cow loses weight after calving and at what point she gains weight again. One must always keep in mind the cows' feeding, energy balance, and nutrient supply because cows with a negative energy balance often do not show oestrus. It is also important that the silage is of high quality – poor silage inhibits fertility.

Follicle quality

The quality of the follicle is [crucial for good fertility](#). The quality is influenced by the energy supply during the dry period and lactation during the first days. Since the follicles are already formed in the last days of gestation, a lack of energy during this period means that the maturation of the follicles – even with a better supply later on – can no longer proceed optimally and is ultimately inferior. This inevitably leads to a reduction of oestrus symptoms and minimizes the chances of successful insemination.

Prevention is key: 4 steps to improve fertility through feeding

1) Avoid stress in the feeding environment

Well-being and a high feed intake are the basis for high milk and fattening yields as well as healthy and fertile animals. Dry cows and transit cows particularly should only experience low stress. This means no overcrowding and generous feeding space, i.e., each animal should have its own feeding space. Feeding areas that are too narrow prevent the animals from eating, rank fights occur, and feed intake decreases.

Freshly lactating cows should be separated from the group. If the cows are in calving pens or calving stables, they should always have visual contact with the herd.

2) Optimize feed quality and rations

Feed quality and feeding management determine how long the cow loses weight after calving (negative energy balance) and at what point the cow gains weight again (positive energy balance). Optimal fertility performance can only happen when a positive energy balance is achieved.



The cow's fertility performance is primarily determined by nutrient supply and feeding. At the beginning of the lactation, high-quality basic feed with a high energy concentration should be fed, as feed intake is slow to get going after calving. Nevertheless, this ration should have sufficient structure. The amounts of

concentrate should be divided into several individual portions and carefully increased. For high feed intakes, fresh water should be constantly available to the animals.

3) Treat diseases early to enable feeding

Diseases that lead to a reduced appetite should be treated as early as possible. In particular, attention should be paid to healthy hooves because a cow that has pain or difficulty getting up and walking is much less likely to go to the feed table.

4) Supplement vitamins, minerals, and trace elements

The needs-based supply of vitamins, minerals, and trace elements in every performance phase is a decisive success factor for good herd fertility. A sufficient supply of trace elements, especially selenium, manganese, zinc, as well as vitamin A and beta-carotene, are important for the formation of fertility hormones and optimal insemination success. At the same time, they ensure a high colostrum quality.

[EW Nutrition's Fertigol Bolus](#) is a long-term bolus to support fertility. The high content of beta-carotene has a positive influence on the formation of the corpus luteum, the oestrus cycle, the quality of colostrum and sperm. The release rate of the ingredients beta-carotene, selenium, vitamin A, and other trace elements takes place over at least twenty days. Fertigol Bolus can be used for female and male breeding animals shortly before and during the breeding or insemination period.

Milk fever: Causes, consequences, prevention



Find out more about On Farm Solutions [here](#)

Nowadays, dairy cows are real top athletes. This comes with additional challenges for their health and for on-farm management. Many of these problems can be traced back to supply deficits and can be easily managed with appropriate feed supplements.



Milk fever is a disease that occurs mainly in cows around calving. It is caused by an insufficient amount of

calcium in the blood and particularly affects cows with a very high milk yield.

The link between calcium and milk fever

Calcium performs essential functions in the body. It is particularly important for the nervous system and muscle cells, and plays a central role in muscle contraction. If the calcium content in the blood is too low, the muscles can no longer contract. When this happens, the cows cannot move or stand up.

While mild cases may not be easily detectable, they still trigger productivity loss. If undetected, long-term calcium deficiency can even lead to cardiac arrest and thus to the death of the animal.

The development of milk fever

The cause of milk fever is a lack of sufficient calcium in the blood serum (hypocalcemia). The dairy cow has to abruptly change its metabolism at the end of the dry period, going from the resting phase to a high performance phase. During the dry period, cows have a relatively low need for calcium.

When lactation starts, the need for calcium suddenly almost doubles, as large amounts of calcium are required for the production of colostrum (2.3 g/l). The calcium is generally drawn from feed or from the bones. In older cows, the mobilization mechanism often does not start quickly enough. The supply from the bones and feed is insufficient and the body draws the missing calcium from the muscles. This ultimately leads to symptoms of paralysis and overstimulation of the nervous system.

Phases of milk fever

Stage One

In the initial phase of milk fever, the initial signs are

- muscle tremors
- restlessness
- stiff gait
- slightly elevated temperature

Stage Two

At this point, the cows lie on the stomach with an extended neck or the head is lying on the flank. Early symptoms of paralysis appear:

- fast, flat pulse
- cold body surface
- dilated pupils
- flatulence

Stage Three

In the last phase of milk fever, the cow lies on its side, loses consciousness and falls into a coma. The third phase often leads to death (the mortality rate averages 2 – 5%).

While the second phase of milk fever is easy to recognize due to the clear symptoms, the consequences of a “slight” calcium deficiency (Stage One) are often underestimated. Feed intake diminishes, the negative energy and protein balance is increased, and the cows barely move. The impairment of the muscles can cause problems in the udder (mastitis) or in the gastrointestinal tract.

Prevention and solutions

As cases of hypocalcemia immediately after calving may be as high as 50% among second- or third-lactation cows, it is important to act preventively to keep potential milk fever from developing. The dairy farmer’s aim is to support the dairy cows that are at higher risk of milk fever, especially around the critical time of calving. The cows must be enabled to quickly release calcium from the bones after calving, or they must be supplied with calcium that can be easily metabolized.

Upfront prophylaxis

An energy and protein oversupply during the dry period should be avoided. In addition, an application of Vitamin D3 at the end of the pregnancy makes sense.

To stimulate the active regulatory mechanisms of calcium metabolism, the calcium content in the feed should be reduced three to four weeks before calving. In practice, however, this often is not properly observed and feed with a relatively high calcium content is still given out during this period.

There are, no doubt, farms where these above-mentioned preventive measures cannot be carried out due to operational reasons, just as there are animals that are particularly susceptible due to factors such as age, breed or healthy history.

To protect the cow from milk fever around calving, oral administration of calcium salts is widespread in practice. Vitamin D also plays a central role in calcium metabolism. It ensures that the absorption of calcium from the intestines and bones is increased.

When administering oral calcium supplements, there are three important points:

- The cow must have sufficient calcium available per dosage
- The calcium must be available immediately
- Administration must be appropriate for the animals and farmers

Methods of calcium supplementation

To support the cow, oral supplements such as pastes and gels are widely used. They are useful, however they are also relatively difficult to administer, as they require handling the animal in relatively difficult ways.

Liquids are another way of administering calcium supplements. When administering liquids, it is important to make sure the animal does not choke so that the liquids do not get into the lungs.

Boluses are probably the easiest and safest method of supplementation to prevent milk fever. The bolus must naturally be carefully inserted, however the process is easy and requires minimal handling of the animal.

EW Nutrition’s Calzogol Bolus is a dietetic mineral feed with a high level of calcium from of highly available calcium salts and vitamin D3. The Calzogol Bolus contains several calcium sources with different release

rates. One major advantage is the very high mucous membrane compatibility, which helps avoid irritation of the mouth, esophagus and rumen. Furthermore, the Calzogol Bolus does not contain caustic calcium chloride. The application is simple and economical, as only one bolus per dose must be administered at the time of calving.

Conclusion

Milk fever is very common in dairy herds. When a cow has milk fever, the farm can incur costs of approx. €350. This is reflected in the loss of milk yield up to 600 kg, losses due to unusable milk, and veterinary and medication costs.

Time resources are also to be taken into account: The economic repercussions represent a significant factor, however they come on top of the extra workload due to the increased need for care of animals.

Cows that suffer from calcium deficiency are also much more susceptible to other diseases. For the farmer, the best strategy is to avoid losses through prophylaxis. Feeding plays a central role; to ensure the best possible production conditions, oral calcium administrations, such as Calzogol Bolus, have proven themselves in practice.

by Judith Schmidt, Product Manager, On Farm Solutions

References:

Rérat, M. (2005): Milchfieber bei der Milchkuh. *ALP aktuell*. Nr. 20.

Spiekers, H., Potthast, V. (2004): *Erfolgreiche Milchviehfütterung*. DLG-Verlag, Frankfurt a. M.

Kirchgeßner, M., Roth, F. X., Schwarz, F. J., Stangl, G. I. (2008): *Tierernährung*. 12. Auflage. DLG-Verlag, Frankfurt a. M.