



## National Johne's Disease Action Plan update



**The National Johne's Disease strategy is now in phase 2; this should be completed by October 2019 although some dairies have set earlier targets. 70% of British dairy farms are participating with this scheme and have a management plan in place as part of phase 1.**

It is important to note that control will only be achieved if these plans are followed and fine-tuned over a number of years. Working with veterinary surgeons that have completed the Action Johne's training and are up to date with the latest control measures is important as new evidence for spread and control is found.

The disease is very difficult to truly eradicate and a long term strategy is needed, a 50% reduction has been achieved studying 2 beef breeds (Limousins and Welsh Blacks) nationally over the last 10 years. Ignoring the disease or not fully implementing an action plan can cause severe setbacks; reinfection or introduction into a herd is far easier and quicker than reduction!

Johne's disease, also known as Paratuberculosis, is a chronic, contagious bacterial disease of the intestinal tract that primarily affects cattle (most commonly seen in dairy cattle), sheep and goats as well as other ruminant species. A clinical case of Johne's is characterised by slowly progressive wasting and increasingly severe diarrhoea. However it also causes poorer production and diseases such as mastitis and high cell counts which may be seen before clinical Johne's disease.

Johne's disease has not been demonstrated as a zoonosis, however, the organism that causes Johne's disease (*M. paratuberculosis*) is thought to act like an allergen and trigger inflammation in humans with Chron's disease; a chronic painful inflammatory disease of the human intestinal tract.

Infected animals shed the bacterium in manure, colostrum and milk. Infection is most commonly

acquired in young animals through contamination of the environment or ingestion of contaminated milk from an infected cow.

**It can also be transmitted from an infected pregnant animal to its foetus in up to 60% of positive animals, this is now thought to be of increased importance and supports removing positive animals from the herd and not breeding replacements from positive animals.**

**Calves from heavily infected dams are also able to infect other calves they are housed with.**

Faecal shedding of the bacteria begins before clinical signs are noticeable, so these 'silent' carrier animals are important sources of transmission.

One of the biggest problems can be identifying infected animals. Increasing testing frequency will improve the accuracy of the results as infected cows will only shed the disease intermittently and a cow that has repeatedly tested positive is 'losing control of the disease'.

**At calving a positive animal is up to 6 times more likely to shed the disease.**

This animal will then contaminate the calving pen and any calves in the maternity pen at this time or later. Remember if a cow misses a milk sample because it is in the calving pen or has mastitis then it may go undetected. A clear testing protocol and interpretation with culling and management decisions and breeding policies should be included as part of the control plan and discussed with your vet.

**Feedback from farmers that have actively engaged with a control plan have found that there is better overall herd health, (less mastitis, lower SCC, less SARA, lameness), there is reduced forced or emergency culling and that calves are healthier.**

## Key points on Johne's Control

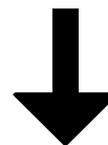
Tackle risks in order of biggest win.  
Control the 'one to many' route:

- Manage risks by testing cows to identify high risk animals.
- Tag positive animals and do not allow into 'clean' calving areas.
- Do not feed milk or colostrum from positive cows to calves.
- Do not spread slurry from herds that are not free from the disease on pasture that will be grazed by youngstock.
- Monitor grazing risk from sheep and other carriers such as deer and rabbits.

Then, focus on the 'one to one' route....

- Do not breed replacements from positive cows or heifers from the last 2 calvings before a cow has a positive result.
- Tag calves from positive dams and do not house with calves from negative cows. This may need to be clearly set out on farms where keeping calves in pairs is a requirement from the milk contract.

Phase 1  
Herd risk assessment and  
control plan selection.



Phase 2  
Review risks and strengthen  
the control plan.

**Eradication of Bovine Viral Diarrhoea (BVD)** has been called for across the UK. In 2018 the BVD Stamp It Out campaign was rolled out across England as a voluntary testing scheme. Oakhill Farm Vets secured funding to test a limited number of farms as part of this initiative and have completed initial testing on 40 farms.



**A recent survey of UK farms highlighted the following:**

- 49% of UK farms have signed-up to BVD Free England programme, others were either unaware of the initiative or not got around to testing.
- 51% do not tag and test.
- 18% do not cull persistently infected (PI) animals, either choosing to do nothing, rear them for slaughter or sell them to other farms (accounting for 21% of PIs).
- 62% of farms identify themselves as closed herds, however 19% brought in bulls, 2% heifers and 1% fattening stock and so are not truly closed.

National feedback from this initiative is that some progress is being made to tackle BVD however a standardised plan is required if we wish to eradicate it. England and Wales are behind Scotland and Northern Ireland where the prevalence of BVD has reduced by 40-50% since 2013.

BVD causes a range of problems including poor fertility and abortion, reduced daily live weight gain, high levels of calf disease, low milk yields and in some cases mortality. BVD is one of the biggest drivers for antibiotic usage on farm and is often the reason for pneumonia outbreaks (due to BVD suppressing the immune system leaving the cow susceptible to secondary infection).

Tackling BVD is important to boost consumer confidence, improve farmers' bottom line and uphold our high standard of health and welfare for continued global trade.

If you have not enrolled in the BVD stamp it out eradication scheme or do not have a control plan in place on your farm please discuss this with your vet. Screening for the disease is relatively straightforward using bulk milk samples and 10 youngstock blood samples in most cases.



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