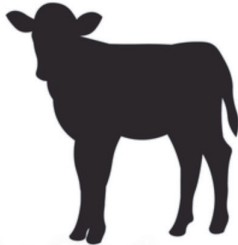


CALF SCOUR

is a common disease in calves and can be fatal due to dehydration from the increased loss of fluids. Damage to the gut will result in reduced daily liveweight gain.



CAUSES OF SCOUR*

can be linked to:

- Viruses – Rotavirus or Coronavirus
- Bacteria – E-coli, Salmonella
- Protozoa – Crypto or Cocci
- Nutritional – milk scours



TREATMENT

Dehydration is often the cause of death, irrespective of the underlying cause, so aggressive fluid therapy is key to success.

Scouring calves lose fluids, electrolytes and nutrients which can lead to **ACIDOSIS**. Acidosis is what makes the calf feel depressed/unable to stand and inhibits their suckle reflex. Most rehydration products these days have the ability to correct the acidosis and make the calf temporarily feel better but not all products help the calf to rehydrate.



DIAGNOSIS

Faecal samples can be used to determine the cause. The more samples taken, the more chance we have of getting a diagnostic result. Testing a single calf won't be enough to help future cases.

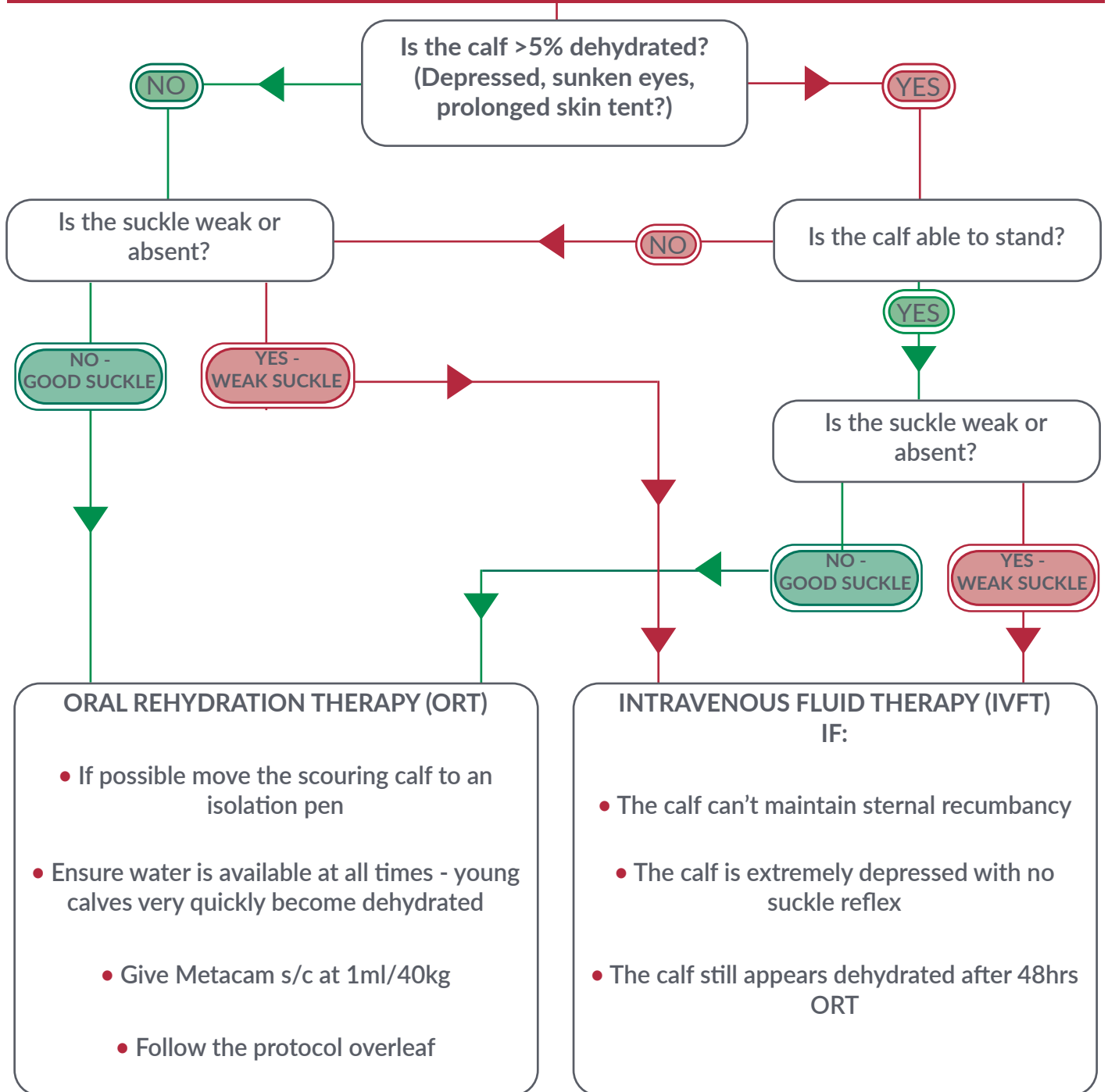
PREVENTION



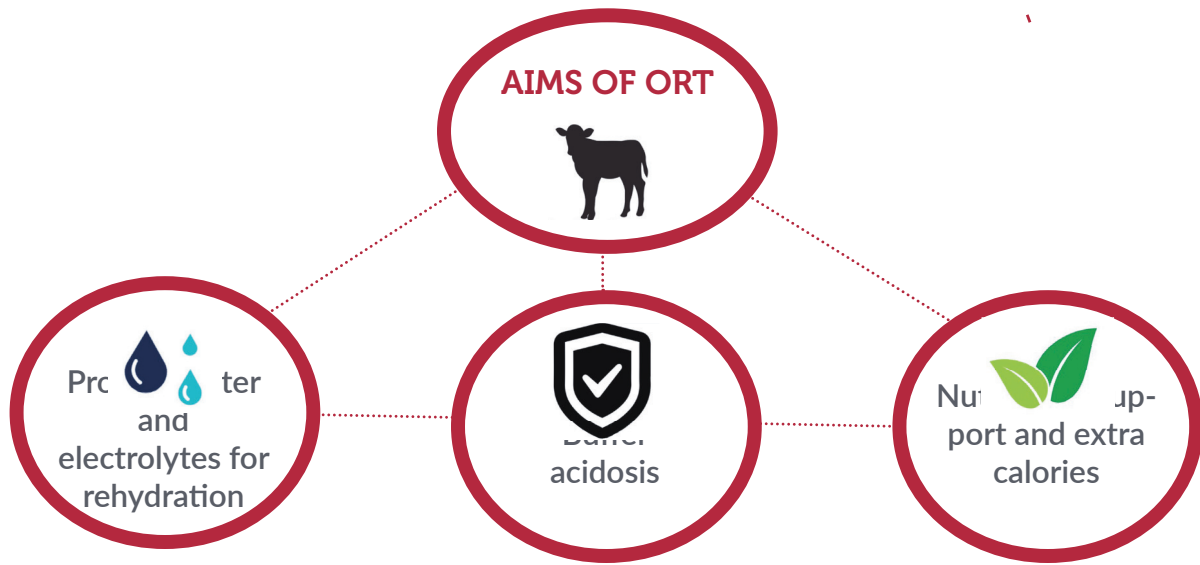
- ✓ Hygiene and colostrum are the most important ways of preventing scour in your calves.
- ✓ Vaccination of the dams with Bovigen Scour can be a solution if your calves are suffering from E-coli or rota/coronavirus scour despite hygiene and colostrum measures being in place.
- ✓ Cryptosporidium can be prevented by dosing the calves with Halocur. This has to be given daily for 7 days to all calves born, starting within 48hrs of birth.
- ✓ Cocci tends to affect older calves and is treated with an anticoccidial such as Vecoxan or Dycoxan (1ml/10kg orally). Calves tend to strain a lot when passing dung and may have blood present in faeces.

*Some causes of scour can affect people (zoonosis). Take care to avoid spreading infection to yourself and other people.

CALF SCOUR TREATMENT PROTOCOL



NB antibiotics are rarely indicated in calf scour and most of the E. Coli we culture are multi resistant. Giving antibiotics will alter the gut flora of the calf and can lead to delayed healing. The exception to this rule would be in the treatment of Salmonella. Dehydration is often the cause of death so aggressive fluid therapy is key to success.



Day 1	Day 2	Day 3
<ul style="list-style-type: none"> • 2 milk feeds - 2 x 1.5L • 2 electrolyte feeds - 2 x 2L 	<ul style="list-style-type: none"> • 2 milk feeds - 2 x 1.5 - 2L • 2 electrolyte feeds - 2 x 2L 	<ul style="list-style-type: none"> • 2 milk feeds - 2 x 2 - 2.5L • Electrolyte feeds - 1 or 2 x 2L
Allow a 3 hour gap between feeds		
7 litres total	7-8 litres total	Reduce electrolyte feeds gradually as you increase milk volume as calf improves

Don't add electrolytes to milk unless specifically indicated! Dehydrated calves need the water and electrolyte sachets in milk create a hypertonic solution which slows abomasal emptying and can lead to abomasal bloot.



MONITOR FOR SIGNS OF DEHYDRATION

- Check if skin tent or if eyes become sunken in appearance
- Calf should keep suckle reflex
- See decision tree - if requires IV fluids speak to your vet ASAP

TREATMENT PRODUCT GUIDE

Product	Ingredient Weight per Dose	Enough Energy to Provide Nutritional Support?	Appropriate Rehydration?	Appropriate acidosis buffer?	Any molecules aiding sodium absorption and gut repair (e.g. glycine)?	When to Use
Rehydion	40g	No energy	Not enough free water	Yes	No	Very early scour cases, only to buffer electrolytes and mild acidosis. Can be added to milk. Not appropriate if dehydration present and does not provide energy.
Lectade Plus	77g	Not enough	Yes	Yes	Yes (20mmol)	Dehydrated and acidotic calves, BUT still able to suckle and standing.
Life Aid Extra	83g	Not enough	Yes	Yes	No	
XL Lytes	50g	Not enough	Yes	Yes	No	
Hydrafast	143g	Yes	Yes	Yes	Yes (40mmol)	'Gold Standard' of ORT for moderately affected calves as provides energy as well, BUT must still be sucking and standing.

Independent vets, dedicated care

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