

# Calving Ease

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By Sam Leadley of Attica Veterinary Associates



## Take Time to Care for the Dystocia Calf

- **Calving difficulty, often called dystocia, affects between 13 to 15 % of Holstein calves.**
- **Treatment rates are higher for dystocia calves (scours 17%, pneumonia 70%) compared to calves experiencing unassisted births.**
- **Providing special care, both in the first few hours and first two weeks, can cut both death losses and treatments for scours and/or pneumonia.**
- **Give lots of stimulation during first few hours.**
- **Be sure to follow up for the next two weeks.**

### Lots of stimulation during first few hours.

When these calves hit the ground they typically are “out of it.” Compared to calves with unassisted deliveries, usually they are

- less alert,
- slower to lift their head and roll onto their belly,
- longer to attempt to stand,
- slower heartbeat,
- sub-normal body temperature,
- erratic breathing and
- less responsive to stimulation (for example, tweaking nose with a piece of straw to encourage breathing).

Actions for the first 15 to 30 minutes? The name of the game here is stimulation – as intense as you can manage. Be persistent. Increase the oxygen:carbon dioxide exchange rate – regular breathing is our goal to overcome oxygen deprivation.

Using a large cloth (for example a bath-size towel) rub the calf. Keep at it. Use more than one towel. Get the calf hair coat “fluff-dry.” Work at getting a strong breathing pattern. Be certain the calf is on her belly. Experience suggests that lots of attention to the neck and shoulders helps. Normal heart rate among these calves should be in the range of 100 to 150 beats per minute.

If oxygen is available start supplementation as soon as the calf is on the ground. Welding-grade oxygen will work if medical-grade is not available. Start oxygen flowing through a small plastic tube. Adjust the flow to get a gentle pressure on your cheek. If you do not have a mask slip the tube up into the calf’s

nose roughly the width of your hand. If you can tape the tube in place if that helps you. At least keep oxygen flowing until the calf is too active to keep the tube in place.

Feeding colostrum? Unless there is a lot of swelling in the tongue and mouth that clearly prevents nursing and you cannot feel any suckling response within two hours, work at getting the dystocia calf to drink from a nursing bottle.

If she absolutely cannot nurse, tube feed 3.5-4 quarts of high quality colostrum as a first feeding no later than 2 hours after birth (large breed calves). This reference on tube feeding may be helpful: <http://www.atticacows.com/library/newsletters/ColostrumTubeFeedingR1764.pdf>

If possible, come back several times in the first three to four hours. Compared to feeding with an esophageal tube feeder using a nursing bottle provides a good opportunity to persistently stimulate the calf. Use this opportunity to do more rubbing with a towel. Help the calf to stand by lifting her.

### **Follow up for the next two weeks**

- Be sure the persons giving calf care know which calves had hard deliveries.
- Encourage identification of dystocia calves. Mark the calf as soon as she is dry – keep an all-weather livestock marker (for example, Twist-Stik, PaintStik) right in the calving area.
- Mark the pen or hutch – use duct tape, colored clothes pins, or shower curtain rings. Routinely plan to give extra attention to these flagged calves. In individual pens watch to see how quickly she gets up and moves at feeding time. Look for abnormally loose manure. At feeding time keep track of whether or not she drinks all her milk. Is she slower than usual in drinking today? Any cloudy or discolored nasal discharge?

In group pens have a checklist to be sure every flagged calf is observed carefully at least four times a day. Look for signs of scours – wet soiled tail, slowness in getting up and moving around that might be a sign of dehydration. Look for signs of a respiratory infection – shallow breathing, cough, more rapid than normal breathing rate, abnormal discharge from her nose – amount and color.

- Timely treatment is essential for successful therapy. Work with the herd veterinarian to establish the appropriate antibiotic therapy for these “high-risk” calves. Agree on the drug, dose, duration and route of administration. Write this down. Train every calf care person to achieve timely and consistent treatment. This reference on achieving effective treatments may be helpful: <http://www.atticacows.com/library/newsletters/EvidenceBasedCalfCareR17101.pdf> .

Reference: Tomlinson, S., J. Lombard, F. Garry, "The Relationship between dystocia and dairy calf morbidity and mortality" <https://www.cvmb.colostate.edu/ilm/participants/summerstudents/2003%20Abstracts/Tomlinson.pdf> accessed 8/14/17.

Useful website: Severidt, Julie, H. Hirst, D. VanMetre, F. Garry, “Calving and Calf Care on Dairy Farms.” at <http://www.cvmb.colostate.edu/ilm/proinfo/calving/notes/home.htm>

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