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# AVA NEWSLETTER

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We are very pleased to announce **Dr. Susan Greenbaum** as the latest addition to the Attica Veterinary team! Dr. Susan is a recent graduate of “The” Ohio State University. She will be riding around on farm visits over the next few weeks so be sure to introduce yourself!

Congratulations to Diane on the birth of her second son, Joel Robert Deleo on June 26<sup>th</sup> 2014!

## **Pinkeye: Infectious Keratoconjunctivitis**

The disease commonly called “pinkeye” in cattle is the inflammation of the cornea and surrounding tissue of the eye caused by a bacterial infection. Commonly this disease causes painful, red, watery eyes and the classic formation of a small white “scar” in the center of the eye.

Pinkeye is the result of an infection caused by the bacteria *Moraxella bovis/bovoculi* which attach to the cornea with finger-like projections that induce ulcers. This results in scar formation that usually eventually heals but may progress to complete blindness or rupture of the eye. The infection is extremely contagious and is easily spread from cow to cow by flies which carry ocular secretions on their feet and mouthparts.

Risk factors: Exposure to ultraviolet light (sunlight), dry conditions, dust, light skin around the eyes, and compromised immunity or stress.

Prevention: Decrease exposure to the risk factors listed above. There are some vaccination strategies that may prove useful in preventing pinkeye in your herd. Cattle should be vaccinated BEFORE fly season around 6-8 weeks before the first anticipated case. There are some commercial bacterins available with varying levels of efficacy. There are also autogenous vaccines available at AVA that have been formulated specifically targeting the bacteria cultured from pinkeye cases around our practice area. If interested in implementing a pinkeye vaccine protocol on your farm call the clinic or talk to the vet next time they are on the farm!

## **Calf Health: What Bleach Can and Cannot Do**

It is very tempting to just rinse out a nursing bottle or tube feeder rather than clean it thoroughly. And, we figure that all the “germs” can be killed with a good soak with bleach.

The bad news is that in most cases bleach actually cannot kill the “germs.” So, why doesn’t it kill bacteria on milk or colostrum feeding equipment?

If equipment is completely clean, chlorine bleach does give an excellent kill rate for bacteria. Notice the words, “completely clean” above. If a biofilm exists on the inside of a nursing bottle, for example, it acts as a buffer between the bleach active ingredient (sodium hypochlorite) and the bacteria.

It’s easy for a biofilm to develop on equipment if it is not cleaned completely after **every** use. For example, washing feeding pails every morning and then just rinsing after the afternoon feeding allows a biofilm to accumulate. These films often are thin enough that we can neither see nor feel them. However, be assured, they can be present unless we have a good four-step washup procedure that is followed after **every** use.

Remember, use a lukewarm prewash rinse, brush using hot water for the wash with both detergent and bleach, use an acid rinse and allow the equipment to dry thoroughly between uses. For more washup resources go to [www.calffacts.com](http://www.calffacts.com). Scroll to “Washing milk containers Protocol” and “Washing milk containers Checklist.”

When we substitute a bleach rinse for regular washing, equipment biofilms may support large Staph and Strep species populations. We frequently find lots of these bacteria in milk, milk replacer or colostrum that come in contact with bottles, tube feeders and pails that are cleaned by “bleaching” them.

Use bleach all the time when washing. Soak with bleach and hot water occasionally to back up an effective washing program. At [www.calffacts.com](http://www.calffacts.com) click on “Bleach Dilution Rates.” These are tables showing the amount of bleach to use for washing, sanitizing and soaking for selected volumes of water.