





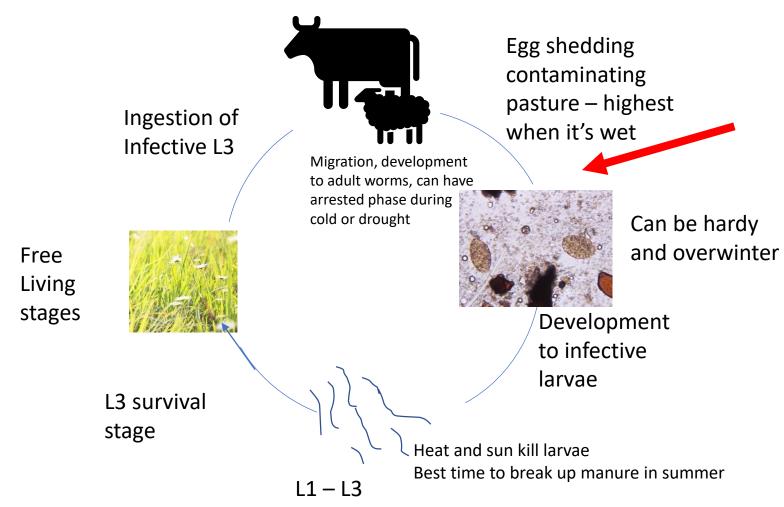
# Dewormers and vaccinations in beef cattle February 2019

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#### Internal parasites – what are we talking about?



#### Nematodes (Worms):

GI worms:

Cooperia spp

Haemonchus spp

Ostertagia ostertagi

(brown stomach worm)

Oesophagostum radiatum

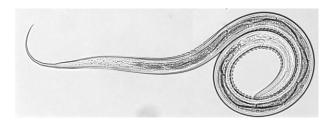
Trichostrongylus spp

Bunostomum phlebotomum

Nematodirus spp

Moniezia spp

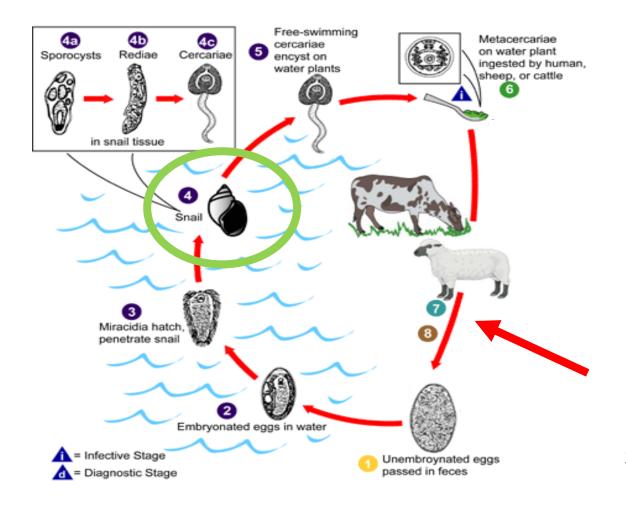
Strongyloides papillosis







## Internal parasites continued



#### Liver flukes

Fasciola hepatica



Intervention: adult flukicide: adult flukes, before egg shedding, August / September
Snails hibernate in winter





## Advantages of deworming

- Better
  - Health
  - Immunity
- Increased
  - Weight gain
  - Reproductive performance





## Three classes of anthelmintics

1)Benzimidazoles

2) Nicotinic agonists

3) Macrocyclic lactones



## Benzimidazoles (BZ)

First class of modern anthelmintics (1961)

- 1. <u>Fenbendazole</u> Safe-guard®
- 2. <u>Albendazole</u> Valbazen®
- 3. Oxfendazole Synanthic®
- 4. Thiabendazole TBZ



Benzimidazoles kill worms by interfering with energy metabolism on a cellular level by binding to beta tubulin.





## Nicotinic agonists

1) Imidazothiazoles (IMID)

Levamisole Prohibit® LevaMed®

2) <u>Tetrahydropyrimidines</u> (TETR)

Morantel Rumatel®



Act as agonists at nicotinic acetylcholine receptors of nematodes, causing paralysis of the worms.





Macrocyclic lactones (ML)

Newest family of anthelmintics - circa 1980's

1) Avermectins

Ivermectin
Ivomec®
Eprinomectin
Eprinex®
LongRange®
Doramectin
Dectomax®

2) <u>Milbemycins</u> Moxidectin Cydectin®



Dewormer Past Present Future





#### The past – first reports of resistance

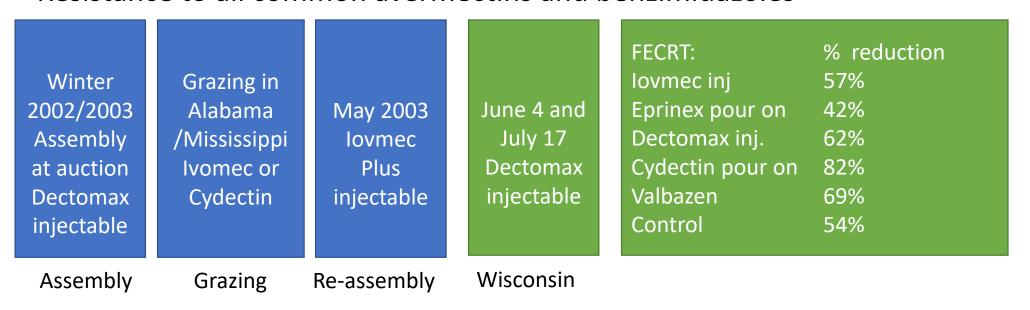
Drug	Host	Year of initial drug approval *not necessarily in US	First published report of resistance
Benzimidazoles			
Thiabendazole <sup>1</sup>	Sheep	1961	1964
	Horse	1962	1965
Nicotinic agonists			
Levamisole <sup>2</sup>	Sheep	1970	1979
Macrocyclic lactones			
Ivermectin	Sheep	1981	1988
	Horse	1983	2002
Moxidectin	Sheep	1991	1995
	Horse	1995	2003





#### First resistance in U.S. cattle

- Gasbarre et al., 2009:
- 2003: stockers, upper Midwest, southeastern origin, 9-11 months old, poor weight gain, GI signs, intensive grazing, pasture with strategic deworming > 17 years
- Resistance to all common avermectins and benzimidazoles



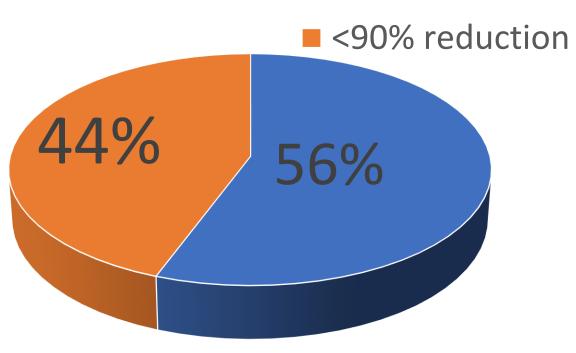




■ ≥90% reduction

## The past: 2008 NAHMS cow-calf survey

- NAHMS 2007-2008: 61 cow-calf operations in U.S. participated:
  - Fecal sample collection March 1 December 2, 2008
  - Weaned calves (6 18 months)
  - Grazing for at least 4 weeks
  - Not dewormed in previous 45 days
  - Second set of samples 2 weeks after deworming
  - = Fecal egg count reduction test







## Resistance by drug formulation

Drug formulation	Number of herds using	Percent ≤ 90% egg reduction
Brand name pour-on macrocyclic lactone	27	48%
Generic pour-on macrocyclic lactone	16	75%
Brand name injectable macrocyclic lactone	12	17%
Generic injectable macrocyclic lactone	1	0%
Oral benzimidazole	5	0%



## What about pour-ons?

- Easy to use, less stress to cattle
- Label often not followed => underdosing
- Plasma levels lower than oral products (Leathwick and Miller, 2013)
- Licking changes plasma kinetics (Sallovitz, 2005) and leads to variable drug exposure
- Most likely to be incorrectly dosed





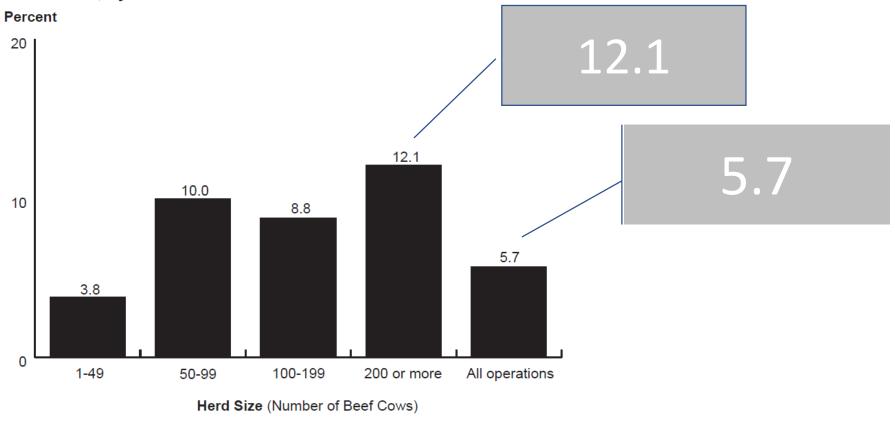


## How many test to evaluate parasite burden

Figure 1. Percentage of Operations that Performed Any Fecal Testing During the Previous 3 Years to Evaluate Parasite Burden in Their Cattle, by Herd Size

From: APHIS Veterinary Services Info Sheet: Parasite Control Practices on U.S. Cow-calf

Operations, 2007-08







#### Present: FDA request for label revision



December 6, 2018

- Any use of a dewormer can result in antiparasitic resistance
- Proper dosing is critical
- End-users should work with their veterinarian to determine the extent of antiparasitic resistance
- Dewormers should be only one part of an internal parasite control program





## What leads to resistance?

From FDA's public meeting on Antiparasitic Drug Use and Resistance in Ruminant and Equines

- Management factors:
  - Treating too often
  - Treating every animal
  - Treating when most parasites are in the animal and not the environment
  - Inadequate quarantine: not testing or treating new animals
  - Under dosing: sub-therapeutic doses



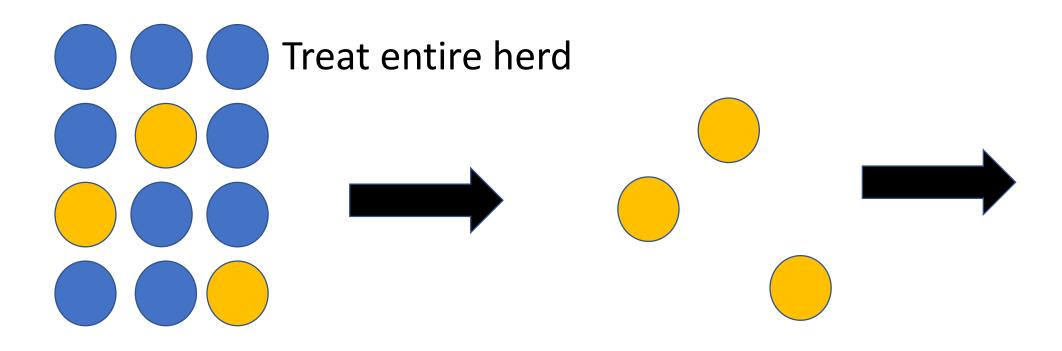


## Ways to slow resistance

- Choosing the right drug
- Good pasture management
  - Do not overgraze
  - Disperse manure pats in dry weather
- Long-acting drugs may increase resistance
- Refugia
  - In animal: only deworm 90% of cattle
  - Environmental refugia: only deworm when parasites are on pasture



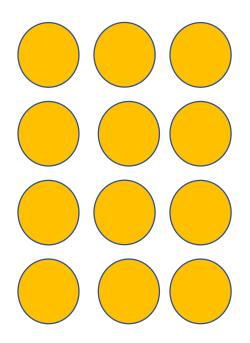










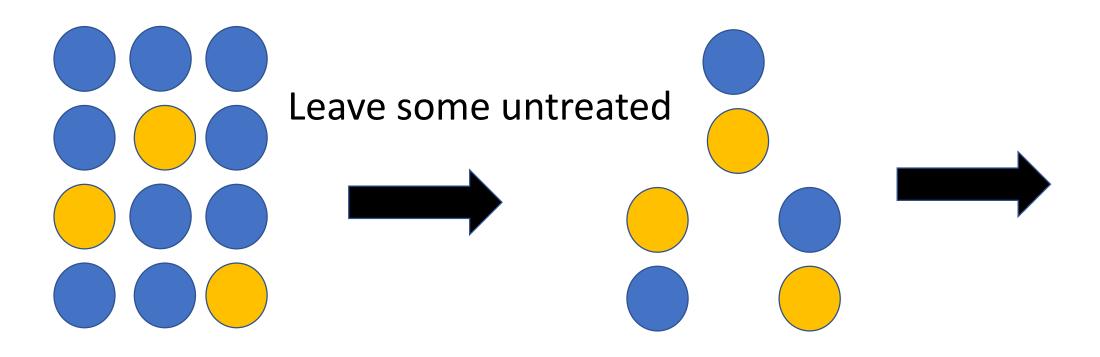








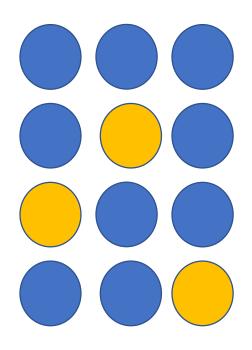












No studies have demonstrated the validity of this concept for bovine nematodes









#### General recommendations

- Test your method if response to treatment is less than expected:
  - Especially if unhappy with weight gain
  - 10 animals at least if re-testing same animals
  - 17 animals at least if testing group (not re-testing same animals)
  - Test high-risk group: calves at weaning / yearlings
    - Egg count will decrease with age
  - CAHFS: McMasters test: lower detection limit 50 eggs per gram cost \$10.50
  - Summer 2019 UC Davis dewormer efficacy study
- Do not under-dose:
  - Don't go by the "average" weight will by default under-dose 50% of animals
  - If no scale use girth tape

Gasbarre, 2014





#### Summary

- Internal parasites cause damage
- Parasite resistance to dewormers appears to be on the rise
- A program that consists of only repeated use of the same single drug will eventually fail
- To use dewormers judiciously:
  - Make sure you are dosing correctly
  - Consider testing to ensure efficacy
  - Apply good pasture management

Look out for upcoming UC Davis study!



## Vaccinations in cow calf operations



Goal of herd health including year nations

Immunity/Resistance: good biosecurity and crum management, mineral supplementation, nutrition management, stockmanship, vaccinations

Immunity/Resistance

Disease Challenge: weather, vectors, wildlife, environment, introductions, emerging diseases

Time

Immunity/Resistance

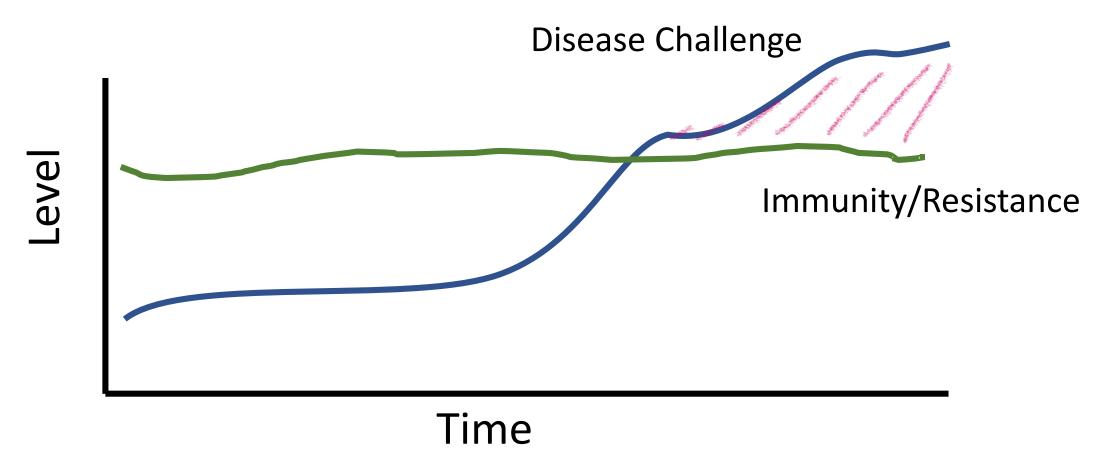
Disease Challenge

**Time** 





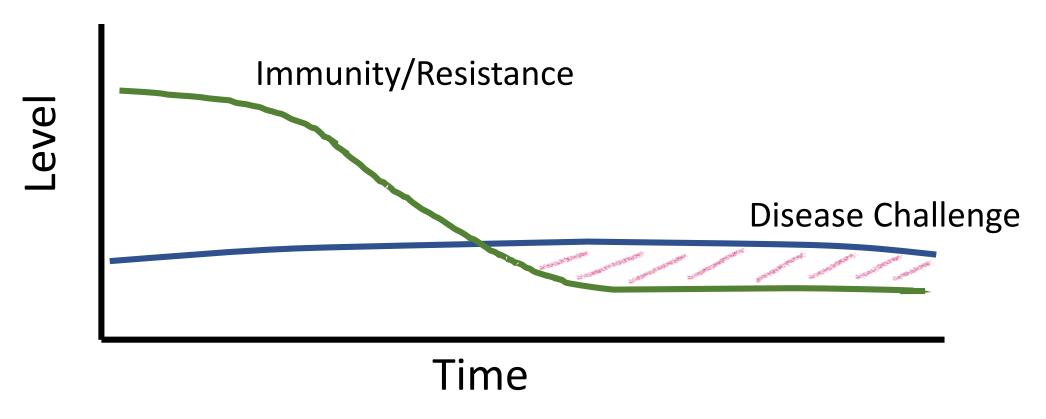
#### Problems with herd health







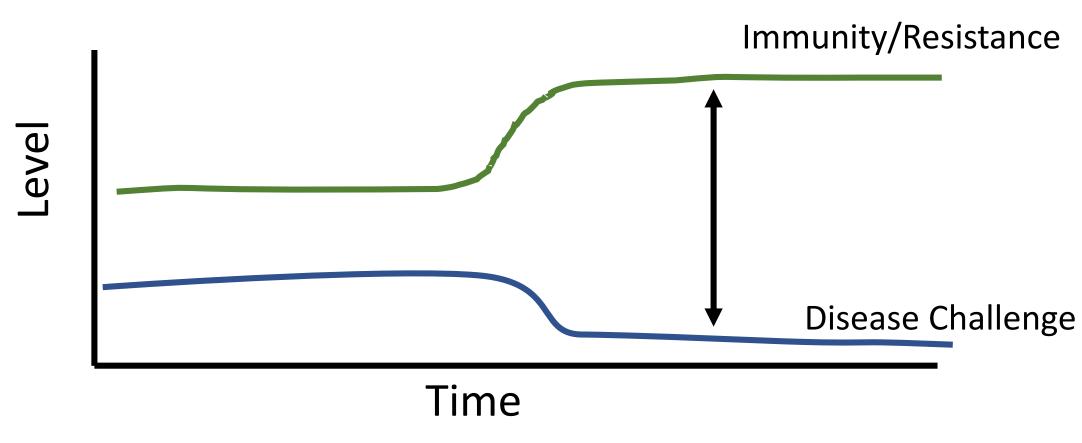
#### Problems with herd health





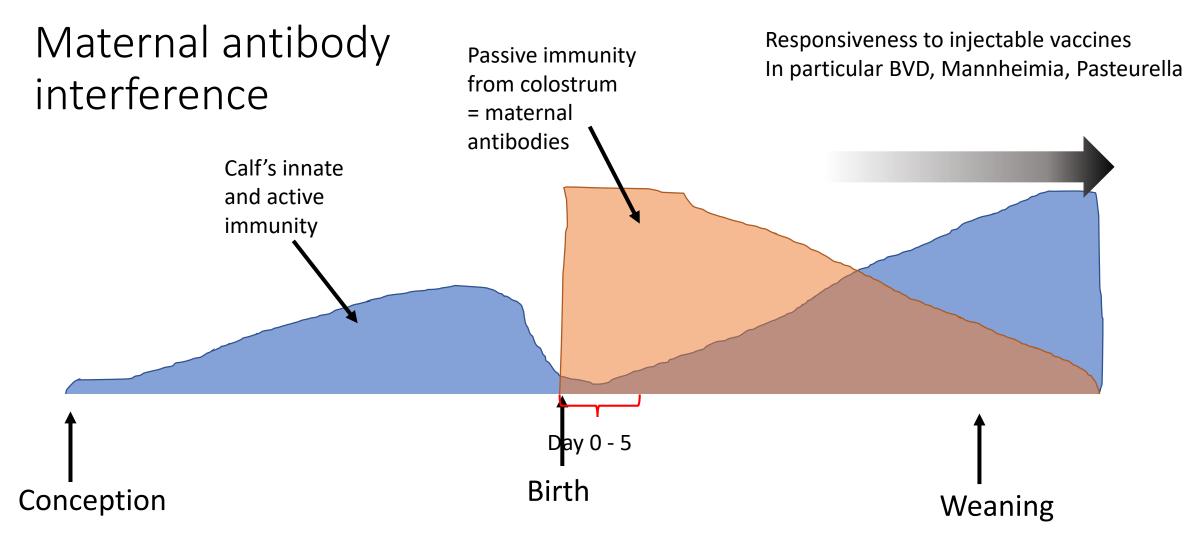


## Goal of herd health including vaccinations



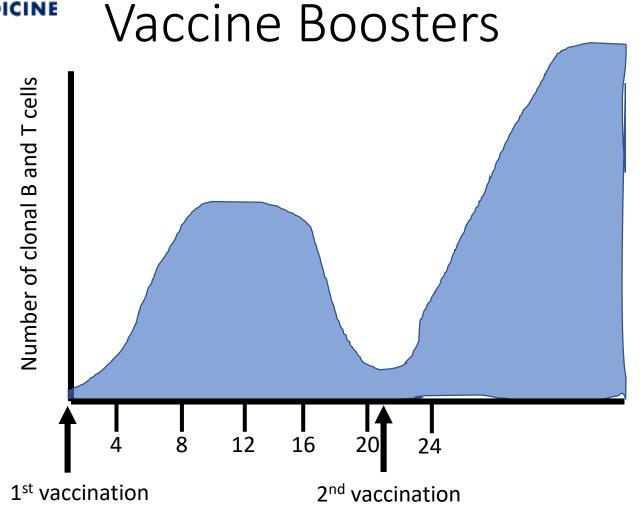












Days post vaccination

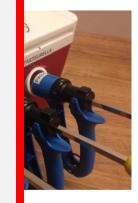
According to Chase et al. Neonatal Immune Development in the Calf and Its Impact on Vaccine Response, Vet Clin Food Anim 2008 87-104



Things to do with vaccines

**Follow** 

Before you make changes to your vaccination protocol please talk to your vet! t



ecl





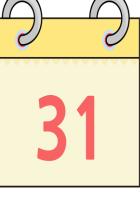






#### Things NOT to do with vaccines

Don't vaccinate with a modified live vaccine for **IBR or BVD** less than 30 days before breeding (ovarian pathology)







Do not vigorously shake bottle when mixing vaccines



Do not inadvertently inactivate vaccine with disinfectants



Do not contaminate the vaccine bottle



Do not mix 2 vaccines in 1 syringe

Do not use the same syringe for different vaccines



Do not give Vitamin EAD with scour vaccines => can potentiate endotoxins and lead to abortins



Don't give too many vaccines at one time, especially Gram negatives (E. coli, Vibrio, Histophilus, pinkeye, Mannheimia, Pasteurella) => fever, off feed





#### Modified live or killed?

- Modified Live:
- Pros:
  - Longer immunity than killed
  - Stronger response
  - Fewer hypersensitivity reactions
- Cons:
  - Less forgiving if stored improperly
  - Potential to revert back to virulence (rare)
  - Need to use up immediately
  - Pregnant animals can abort
    - If not already vaccinated with same vaccine pre-breeding within 12 months
    - Also not recommended for suckling calves on pregnant dams, if dam not vaccinated with same vaccine

#### Killed:

- Pros
  - Cannot cause disease
  - Safe for pregnant animals
  - Longer storage
  - No mixing required
- Cons:
  - Require more frequent boosters
  - Often cause reactions
  - Shorter immunity and slower onset
  - Oil-adjuvanted vaccines confer longer immunity, more likely to cause swelling

#### Calves from birth to weaning



www.fwi.co.uk/

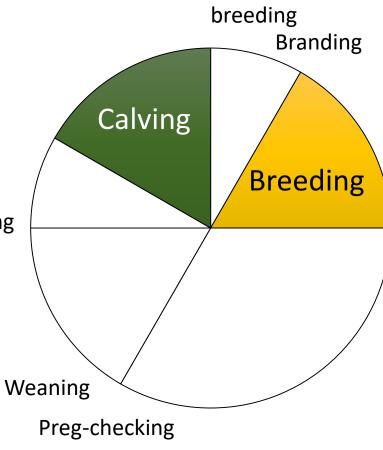
#### **Breeding Bulls**



Replacement heifers



Precalving



Pre-

Adult cows



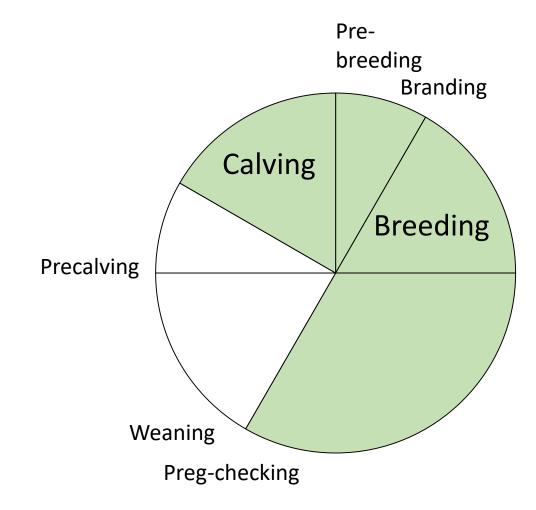
#### Calves from birth to weaning



www.fwi.co.uk/

#### <u>Diseases</u>

- Scours: E. coli, Rota, Corona, Salmonella, Giardia, Cryptosporidium, Coccidia Clostridium perfringens,
- Respiratory disease
- Tetanus (castrations)
- Other Clostridial diseases (Blackleg, enterotoxemia)





## Calves: options and considerations

# At birth: Most important for immunity is good quality COLOSTRUM

Maternal antibodies may interfere with some injectable vaccines Avoid injectables the first 5 days of life

#### Vaccines: oral or intranasal

- Calfguard®: Rota/Corona— oral, before colostrum
- Bar-Guard 99™: E. coli K99 oral, after colostrum but within 20 hours of birth
- Intranasal IBR/PI3/BRSV
  - ML, local immune response
  - make sure nose is clean
  - Fast onset, but shorter immunity
- Bo-Se / Mu-Se / Multimin (not a vaccine, but can help with immunity)



www.BeefResearch.ca





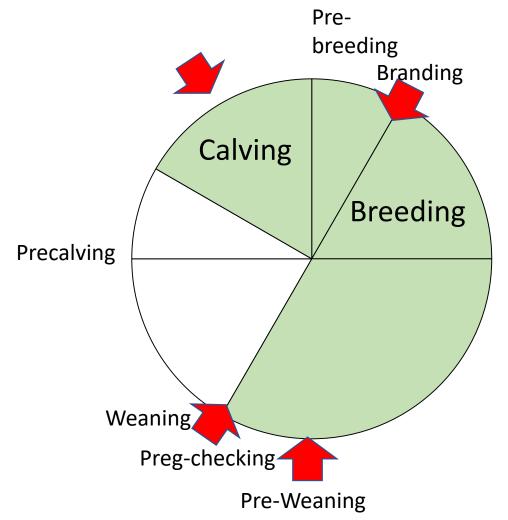
## Calves: options and considerations

#### Injectable vaccines:

- 7 or 8 way Clostridial (Blackleg etc.)
  - Need 2 doses
  - Include Clostridium hemolyticum (cause of Redwater) if flukes are a problem
  - Tetanus, especially if banding for castration

#### 4-way viral BRD +/- Lepto

- Small risk of abortion in dam if suckling calf is vaccinated with MLV unless dam received same vaccine in previous 12 months (check label)
- Option: MLV intranasal + injectable killed BVD (needs booster)
- Killed (needs booster)



#### Replacement heifers

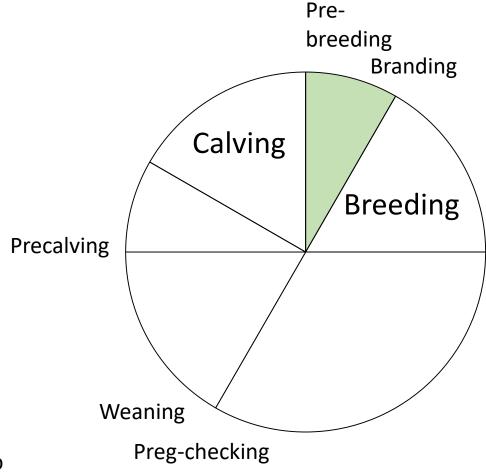


#### Diseases

- Reproductive diseases:
  - IBR, BVD, Vibrio, Lepto, Trich
  - If using AI, Vibrio and Trich of little concern (neighbors?)
- Clostridial diseases

#### Vaccines pre-breeding:

- Multitude of options, modified live and FP recommended
- Combinations available
- Vaccinate > 1 month before breeding (ovarian pathology due to vaccines) and to establish immunity
- Make sure appropriate boosters have been given
- Trichguard®: "aids in the reduction of shedding of *T. foetus*"
  - Only recommended for affected herds



#### Adult cows

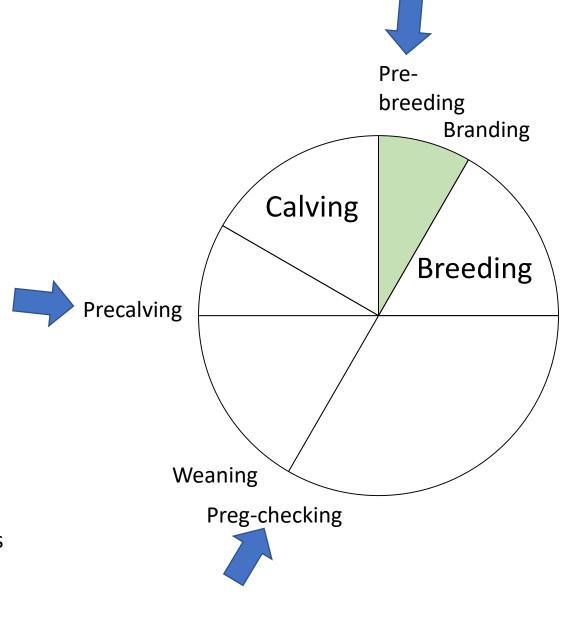


#### **Diseases**

- Reproductive diseases:
  - IBR, BVD, Vibrio, Lepto, Trich
- Calfhood diseases => colostrum

#### Vaccines:

- Pre-breeding / Preg-check / Pre-calving
- Pre-calving/Preg check: to booster colostral antibodies
  - Scours vaccine Don't give with Vitamin AED shots
  - Prior to calving check label
- Lepto: short duration of immunity



#### **Breeding Bulls**

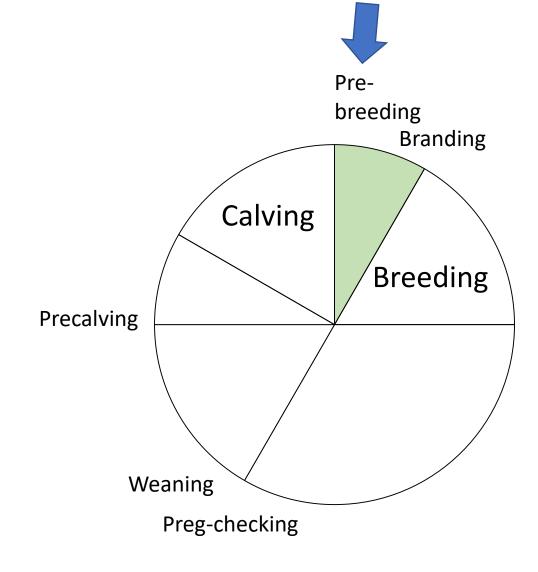


#### <u>Diseases</u>

- Reproductive diseases:
  - IBR, BVD, Vibrio, Lepto, Trich

#### Vaccines:

- Pre-breeding
  - Also BSE and Trich test (vaccine not labelled for bulls)
  - Mineral status, parasites





#### University of California Agriculture and Natural Resources

## Optional vaccines

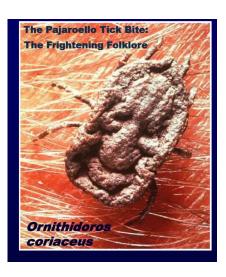
- Pinkeye before fly season
  - Commercial
  - Autogenous made from bacteria isolated from your cattle
- Mannheimia, Histophilus, Pasteurella
  - To prevent shipping fever (BRD)
- Anaplasma:
  - Experimental vaccine not fully licensed
  - Available through CCA
  - Does not prevent infection
  - Make the decision to vaccinate with your vet
- Anthrax
  - Only if you have had cases in the past
- Brucellosis
  - heifers 4 12 months old
  - only mandatory for change of ownership unless going to slaughter or feedlot



#### Update on Foothill abortion vaccine

- Local small manufacturer found
- Still in USDA approval process
- Dr. Stott hopeful vaccine commercially available in 2020
- Vaccine trials ongoing, but closed to new participants
- Currently vaccinating about 100 herds / year





# Thank you

## Questions?

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