

Newsletter

August 2025

This month we introduce Ryan, who most of you may well have met already, and he discusses lungworm disease in cattle. Lastly we wanted to give updates on Bluetongue that we have.

Ryan Gallagher

Originally from Kilkenny in the sunny south-east of Ireland, I graduated from the University of Veterinary Medicine in February 2020. I began my career in the south-west of Ireland, working in a mixed (predominantly dairy) practice. After a year, I moved to the UK and spent two years in a large mixed practice in North Yorkshire.

Like many Irish vets in their mid-twenties, I then emigrated to Australia. I initially worked in small animal practice in Sydney for six months, but soon found myself missing farm animal work. This led me to complete my obligatory regional work on a dairy farm in South Victoria, during which I successfully passed the Australasian Veterinary Examination.

I returned to Sydney for the summer months, locuming as a small animal vet while making the most of the weather and beaches. In early 2025, I joined the Royal (Dick) School of Veterinary Studies as maternity cover for Jane. This marks my first role in veterinary education, and I'm excited for the new challenge, particularly the opportunity to return to farm animal work after an 18-month break.

Outside of work, I enjoy running, hiking, swimming, and all things rugby.



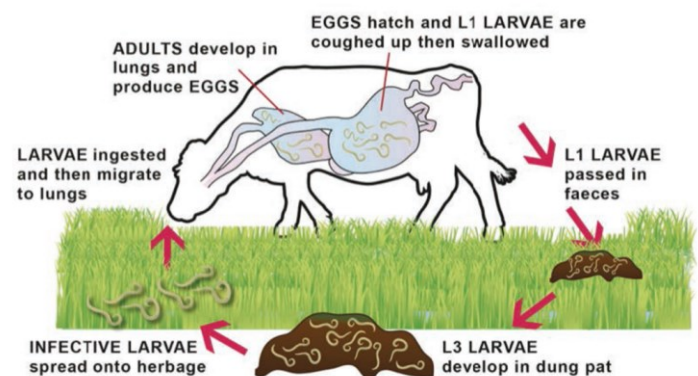
Lungworm in cattle

Dictyocaulus Viviparus (lungworm), commonly known as husk, is a serious parasitic disease of cattle. Wet summers facilitate larval survival and increase incidences of infection

Clinical signs of lungworm are most commonly seen in first-year grazing cattle in late summer and autumn, but can also occur earlier in the year and in older cattle.

Clinical signs include:

- Widespread coughing in grazing cattle
- Loss of condition
- Increase in respiratory rate (tachypnoea)
- Difficulty breathing (dyspnoea)
- Reduced milk yield in adult cows



The cost of disease for lungworm is predicted to be £50-100 per cow and loss of milk production in adult dairy cattle may reach £3 per cow per day.

Cattle ingest the larvae (L3) while grazing and they migrate to the lungs. Here larvae then mature into adult worms in the lungs (8 days post infection) and pass eggs (25 days post infection), resulting in clinical signs seen in animals. The eggs are coughed up by the cattle and passed in faeces onto the pasture, where they become larvae and the cycle repeats.

Pasture that had grazing cattle on it in the previous season should have low worm burdens as larvae do not typically survive the winter climate. Some cattle however may act as carrier reservoirs for infection. Therefore, it is not recommended to mix animals of differing immunity. **Naïve animals should not go on pasture that was just grazed by older animals.**

The most common method for lungworm diagnosis involves a faecal larval test called the Baermann technique. Larva (L1) will be present in faeces 25 days post infection. Since there is a delay between clinical signs and larvae in faeces a negative Baermann's does not necessarily mean the animal is not infected and it may be at the early stages of the disease. Consider sampling the first animals showing clinical signs, as they are more likely to have progressed to patency by the time of the investigation.

Blood sampling and bulk milk sampling is also available but has drawbacks. Blood sampling will only detect infection after 4-6 weeks and 30% of the herd must be infected to test positive on bulk milk sampling. Post-mortem examination in fatal cases is usually effective at diagnosing infection.

All available anthelmintics are highly effective against lungworm. Affected cattle should be treated as early as possible because severely affected animals may either not respond, or disease may be exacerbated, as dead or dying larvae block the lower airways and alveoli. Treated cattle should be removed from infected pasture and transferred to clean pasture if available or housed in well-ventilated facilities.

A vaccine for lungworm is available on the market (Huskvac). Primary course involves 2 doses four weeks apart. Wormers are to be avoided 8 weeks prior to the 1st dose and 2 weeks after the 2nd dose. Natural immunity should develop after the first grazing season, however in high-risk areas a booster vaccine may be necessary prior to the second grazing season

Youngstock should be given the opportunity to graze low infection pastures every 3-6 months to continue to boost natural immunity.

Bluetongue Update

With midge activity increasing, we are now considered to be at higher risk of spread of Bluetongue in the UK. There have been a few cases in July in parts of England, one of which was identified in Cumbria last week. This is the first cases in the far north of England so it is slowly creeping up country. Vaccine supplies appear to be stable whenever we have ordered any recently. If you have any queries or want to discuss vaccine options for your herd/flock then speak to one of the vets at the practice.

Farmer meeting Autumn 2026

We had a number of atypical pneumonia outbreaks in cattle over the Winter season and wanted to run a meeting in the coming months to look at factors associated with pneumonia control in cattle. Ideally this would include housing assessment so we are looking for a farm that would be interested in having some assessment done on their housing and would be willing to host the meeting on their farm. If you have any queries or would like to volunteer then please get in touch as soon as you can.

Reception cover

As you'll be aware, the current situation when Ali takes holiday is for our reception and pharmacy to be covered by staff from the equine reception. With staffing challenges over there this can sometimes be difficult. We are looking for someone potentially to cover Ali's holidays over the year, full training would be given for the candidate. If anyone is interested, or you know of anyone who might be then please speak with Fraser at the practice.