



MAY 2024 DAIRY NEWSLETTER

Down Cow Management

Down cows are an unfortunate situation that every producer will be faced with. A properly managed down cow is much more likely to recover. This short guide on approaching a down animal can help to maximize chances of recovery.

Assessment:

When presented with a down cow, a lot can be learned about the cause through observation. A series of questions to ask yourself when looking at a down cow include:

1. Where is she in production?
A recently calved cow, or one who is imminently due is most likely to have an electrolyte imbalance, such as low calcium (hypocalcemia)
2. Is there any evidence of injury?
Marks on the back could be from being stuck under a divider or being jumped by another cow. Marks on the legs could have come from being stuck in a scraper or feed rails. Legs that do not have a normal resting position could indicate nerve damage, a break, or dislocation.
3. Does the cow look sick?
Checking the temperature and udder, assessing the hydration by looking at the eyes, and watching demeanor can give us a clue if there is another illness preventing her from rising.
4. Where is she located?
A down cow in an unusual place is more likely to have had an injury or become stuck than one that is properly in a stall.

Treatment:

1. **Environment:**
It is extremely important that a down cow has a deep, soft, clean substrate to lie on. At least 6 inches or deep pack is best. A cow lying on concrete will rapidly develop nerve damage from the swelling of the muscles, preventing her from rising even if the primary problem is resolved.
2. **Electrolytes:**
Cows near or after calving that are down are often deficient in electrolytes, typically calcium. If a cow is completely unable to rise, it is unlikely that calcium given under the skin, in the muscle, or orally will be sufficient to get her up. In these cases, intravenous treatment with one bottle is indicated. If calcium is the primary and only problem, one bottle IV and one under the skin should be sufficient for most cows. Other methods of calcium application given a longer duration, lower amplitude increases in blood calcium, which is excellent as support to IV treatment but not enough

to clinically correct the calcium in a timely manner. Further investigation of electrolytes is warranted in any cow that doesn't respond to initial treatment. Blood taken from the tail vein is best, and calcium, magnesium, and phosphorus can be checked at the clinic. Any non-responsive cow is a good candidate for an examination by a vet.

3. Swelling and Discomfort:

Anti-inflammatory medications such as meloxicam (Metacam) or ketoprofen (Anafen) are essential in treating down cows. Swelling from injury or prolonged lying is the biggest concern for any down cow.

4. Other Illnesses:

Other illnesses that can keep a cow down include toxic mastitis, pneumonia, metritis and hardware diseases. Treating these other conditions is necessary before expecting a cow to recover.

Other Supportive Actions and Prognosis:

Long Term:

Generally, a cow down for more than 24 hours with the primary problem treated has a poor likelihood of standing. The better the environment and access to feed and water, the better the prognosis. It is important to rotation the side the cow is laying on every 4 to 6 hours to allow blood flow and stretching of the hind legs, to avoid nerve damage.

Lifting and Moving:

Lifting, especially with hip lifters, can be very damaging to the muscles and ligaments of the hip. If a cow is close to rising and has been treated, she can be lifted once daily, so long as she is able to stand without lifters once and they are removed immediately. It is never recommended to move a cow using hip lifters. Kirkton Vet Clinic has an upsi-daisy and cow skidder available for lifting and moving cows safely. To use these, simply call the clinic and speak with the staff.

Predef is now back in stock!

Call the clinic to order