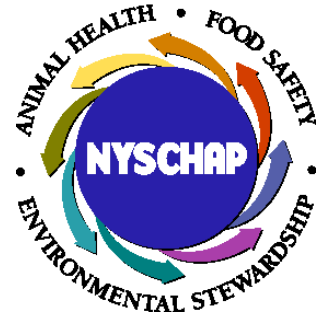


NYSCHAP

New York State Cattle health assurance program

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Identification Tags at a Discount

The National Farm Animal Identification and Records (F.A.I.R.) Program, through the Holstein Association, has teamed up with NYSCHAP to offer discounted identification tags. The sturdy Allflex USA, Inc. tags come with NYSCHAP printed on the tag or producers can work with the Holstein Association to customize tags. Until *March 31, 2001* tags can be purchased for \$1. After March 31 the price will be \$1.55 (purchase of 100 or more). Replacement tags are always \$1.10. If you would like more information regarding the- identification tags or the F.A.I.R. program, please contact Dave Paddon at 716-584-8145.

Johne's and Crohn's , One and the Same?

(Kathy Kaufman, NYSCHAP Coordinator)

Severe diarrhea and excessive weight loss. Sounds like Johne's, right? Yes, but it also sounds like Crohn's disease. Crohn's disease is a chronic inflammation of the human gastrointestinal tract that causes severe diarrhea, excessive weight loss, rectal bleeding and abdominal pain. Crohn's disease has been getting popular press recently for the possibility of being linked to *Mycobacterium avium subsp. Paratuberculosis*, the organism responsible for Johne's disease in cattle and other ruminants. At least two large newspapers, the Los Angeles Times and the Cleveland Free Press, have published articles speculating that *M. paratuberculosis* in milk may cause Crohn's disease. While it is true that in heavy shedding cows the organism can be passed into the milk, there has not been any definitive research proving cause and effect.

As with most of the aspects of Crohn's disease, studies on the effectiveness of pasteurization killing *M. paratuberculosis* have been mixed. Several studies in the US conducted by the FDA have shown that pasteurization is an effective means of killing *M. paratuberculosis*, while other studies conducted in the US have shown the organism to survive pasteurization. Mixed results have also been produced by British researchers.

There has been *M. paratuberculosis* cultured from Crohn's disease patients and many research studies have been conducted to determine if there is cause and effect. Dr. Bhushan Jayarao, Pennsylvania State University, recently reviewed 27 Crohn's studies published between 1990 and 1998. The result of Dr. Jayarao's analysis inferred that *M. paratuberculosis* is not an etiological agent of Crohn's disease.

One of the reasons that *M. paratuberculosis* has been thought to be associated with Crohn's is the geographic distribution of the disease. Crohn's disease appears to be concentrated in industrialized regions of Europe and North America. Interestingly, Sweden has one of the highest incidences of Crohn's disease and the lowest incidence of Johne's disease.

The only clear issue about the controversy regarding the link between *M. paratuberculosis* and Crohn's disease is that it remains unclear. This controversy is alive and well and not going away anytime soon. Any link established between Crohn's and *M. paratuberculosis* will definitely raise a call for stricter health measures for cattle and stricter regulations for processing of milk. Stay tuned...

Non-Steroidal Anti-Inflammatory Drug Use in Food Producing Animals

(Dr. John Huntley, NYS Agriculture & Markets)

A recent slaughter survey analysis conducted at a major northeast slaughter plant provided evidence that a significant number of slaughter animals were contaminated with unacceptable levels of non-steroidal anti-inflammatory drugs.

Cull dairy cattle with suspect injection sites and other at risk post mortem conditions were screened for antimicrobial residue using the Fast Anti-microbial Screening Test (FAST) at slaughter. Three hundred of these at risk cattle were subsequently evaluated for the presence of non-steroidal anti-inflammatory drugs (NSAIDs). Fifty of these animals produced evidence of violative residues for NSAIDs including flunixin meglumine (ex. Banamine) and phenylbutazone. Sixteen of the fifty animals were positive

for phenylbutazone and 37 were positive for flunixin meglumine. Flunixin meglumine is approved for non-lactating cattle with a four-day slaughter withholding label requirement. Phenylbutazone is not approved for food producing animals and can present some unique health issues to sensitive humans. All of the cattle found to be contaminated with phenylbutazone and other NSAIDs in excess of established tolerances were condemned as an adulterated food product.

Flunixin meglumine is labeled for the control of endotoxic inflammation and fever. It does produce a transient improvement in the clinical appearance of ill cattle, which may create an incentive for its use in cull cattle destined for market.

Although flunixin meglumine is cleared rapidly in most cases, clinical illness can prolong the normal metabolism of any drug. Consequently, withholding times may have to be adjusted to reflect the physiological state of the animal. It is apparent, however, that a number of these animals presented at slaughter are treated shortly before they were offered for entry into the human food chain.

Phenylbutazone is not approved for food animals. Use of this drug in cattle is extralabel and subject to AMDUCA standards. Its use requires an established veterinary-client-patient relationship. Note: drugs that contribute to residues that present a risk to public health may not be used extralabel.

The veterinarian and the producer are responsible to ensure that any drug used in an extralabel manner does not introduce a violative residue into the human food chain. The human side effects of phenylbutazone as reported in the literature make its use a questionable practice in food producing animals. Other, more suitable alternatives are available.

FDA and USDA Food Safety Inspection Service (FSIS) are very concerned with this issue. Furthermore, packing plants are considering measures to exclude producers that are responsible for violative drug residues in their animals. Inappropriate use of drugs generates regulatory pressure to further restrict the use of veterinary drugs and may result in a loss of market for your animals.

Please consider carefully the use of NSAIDs in animals that will shortly enter the human food chain and adhere to recommended withholding times. Modifications (extension) to the withholding times should be considered in animals that are debilitated as recommended by your veterinarian. It is easy to forget that cull cows are also human food.

NYSCHAP Management Team

(Dr. Ynte Schukken, Quality Milk Promotion Services)

The NYSCHAP management team consists of representatives from producers, veterinary practitioners, Pro-Dairy, Diagnostic Laboratory, Quality Milk Promotion Services and the department of Agriculture and Markets, and is supported by the NYSCHAP coordinator. One of the issues that has taken much of the time and effort of the management team in recent months is the preparation of a NYSCHAP certification program for veterinarians. Practicing veterinarians with an interest in providing herds with an opportunity to participate in the NYSCHAP program will be trained in 2001. The veterinarians will be asked to participate in a number of education short courses on each of the NYSCHAP modules. Their first series of herd plans will be evaluated by experienced NYSCHAP veterinarians. In the future when practitioners develop herd plans, validation of these plans will be performed by the veterinarians from the Department of Agriculture and Markets. Furthermore, NYSCHAP certified practitioners will participate on an annual basis in continuing education programs specifically aimed at dairy herd health.

The participation of veterinary practitioners in the NYSCHAP program is essential to make it possible that a large portion of New York dairy farmers take advantage of the program. The preventive herd health approach that is the key to any successful NYSCHAP program is already a large part of today's bovine practice. The additional tools as developed under the NYSCHAP program are a great opportunity for both the producer and the veterinary practitioners to enhance their herd health programs.