Q FEVER NEWS UPDATE Summer 2024



Hello and welcome to our first Q fever newsletter



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As our Q fever journey is progressing, we thought it would be valuable to keep you updated. The campaign has progressed from our small base in 2022 when we started testing a few herds to now, where so many practices have come on board with putting Q fever on their potential differential diagnosis lists. At the end of April we had tested over 500 herds using the Q Test.

Recently, there have been 3 new publications of interest released that we have included in this edition. The first looks at the economical return on investment of vaccinating a Q fever infected farm. The next is a large study in Spain looking at the effect Q fever exposure has on reproductive parameters. The last study is a great evaluation of the literature surrounding the reproductive effects of Q fever. Details of the papers can be found further on.

We are now beginning to get feedback from farms that are a year into vaccination, with some of the data set to be shared in the next newsletter.

As always, if you have any queries or questions around Q fever, please speak to your Territory Manager or myself, Ceva's Ruminant Vet Advisor.

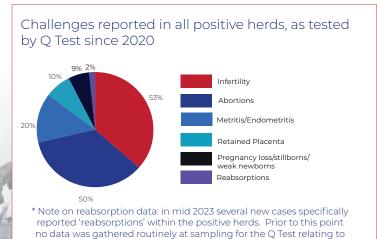
Katherine

Diagnosis Dashboard

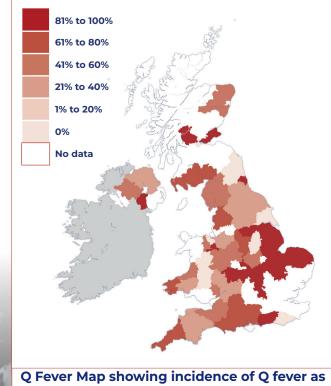
O Test - BTM PCR

- **500** BTM samples tested since 2020
- **48%** of which received a positive diagnosis for Q fever
- ▶ 17% of the positive cases (as diagnosed by the Q Test) have commenced vaccinating

Data collated upto and including 24 April 24¹



reabsorptions, so it may be under represented here. A SECURITY DESCRIPTION



diagnosed by Q Test (PCR)1 Total number of tests reported on map: 500.

Number of tests by county varies from 45 to 1. National Average 48% positive.

Research Papers of Interest

A New Tool to Assess the Economic Impact of Q Fever on Dairy Cattle Farms

Raboisson. D et al. 2024

Prevalence, Risk Factors, and Relationship between Reproductive Performance Uxía Yáñez et al. 2024 and the Presence of Antibodies against Coxiellosis in Dairy Farm Milk Tanks in the Northwest of Spain

Coxiella burnetii and Reproductive Disorders in Cattle: A Systematic Review

Gisbert, C et al 2024





Farmer info pack:
Please request copies
from your Territory
Manager for all herds
that test positive for
the disease

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Clinical Viewpoint



Tom Angel BvetMed
PGDipVCP MRCVS, veterinary
surgeon at Synergy Farm
Health, comments on his
recent experience on Q
fever diagnosis on farm
and strategies for on-farm
control:

"The bulk milk Q fever testing we have been undertaking in our practice has returned positive results in approximately 65% of farms sampled.

The challenge for vets is assessing the impact this disease is having on farm. In some cases, where other causes have been excluded, signs such as increased pregnancy losses and still birth rates have been identified. However, on other units more subtle, but still costly effects, such as increased days open and increased transition disease may be attributable to Q fever.

Working out the best strategy for on-farm control is where supplementary diagnostics, such as serological testing of animals in different management groups, and the cost calculator from Ceva's Q'Audit has allowed us to guide the best vaccination protocols on different farms in a cost-effective manner.

Where a vaccination protocol has been implemented, early results have been positive with apparent reduction in pregnancy loss and still births on these farms. Whilst it is too early to assess any long-term impact of vaccination, these preliminary findings are encouraging."



Selection of Herds for Testing

The diagnosis of Q fever can be quite challenging, with poor seroconversion.

PCR BTM can be tested at anytime however a positive diagnosis is most likely when there is an introduction of freshly calved cows milk into the bulk tank, due to the intermittent nature of shedding of the bacterium.

Think 'ASPW' when selecting herds to test for Q fever. It is important to look for a number of fertility issues as a trigger to test, not only one or two.

	✓ Infertility
✓ Stillborn	☑ Weak or premature offspring
Reabsorbtion	☑ Metritis & endometritis

As such problems are multi-causal, it is also recommended to only select herds that have good transition management and vaccination protocols in place when considering Q fever.

The Q'Audit Tool

- making herd selection for testing easier

Using UK referenced industry data on costings the Ceva Q'Audit has been developed to highlight where fertility issues are placing a signficant cost on a herd. By inputing readily available herd data a cost associated to fertility is calculated. Please contact your territory manager for info.

			Total Cost	£66,537	£159,838	
Average Weak Newborns/Stillbirths	6.6%	£139	4.20%	£4,037	£2,569	
Average Retained Placenta Cases %	3.7%	£505	6.80%	£8,221	£15,110	
Average Endometritis Cases %	10.0%	£61	30.00%	£2,684	£8,052	
Average Metritis Cases %	5.6%	£297	5.00%	£7,318	£6,534	
Average Abortion Cases %	3.4%	£595	5.00%	£8,901	£13,090	
Average Days Open (days)	115	£5.23	148	£0	£75,940	
Average Replacement % - FOR INFERTILITY	6.7%	£1,200	7.3%	£35,376	£38,544	
Practice & Herd Averages	Industry Average	Cost per case £	0.00%	Ind Ave Cost to Farm	Cost to Fari	
Abortion Cases %	3,40%	0%	5.00%			
Conception Rate %	38%	45%	24%			
Pregnancy Rate %	16%	21%	12%			
Calving to Conception (CCI) (days)	115	90	148			
Calving to First Service (days)	80	70	68			
100 Day in Calf Rate (Median)	39	46	33			
Practice & Herd Averages vs Industry	Industry Average	Industry Target	Herd Average			
Average herd size	0	HERD SIZE		440		
Total number of milking cattle under care	0	FARM NAME	0			
Number of dairy clients in practice/branch	0	CLIENT				
Practice Name	0					
Practice Name	Q Fever Practice Dairy Audit					

