Core Vaccines in Dairy Cattle

Definitions

- **Pathogen:** disease-causing microbe (e.g. bacteria, virus, parasite).
- Antigen: pathogen feature that allows the body to recognize it as "foreign" (non-self), and generate an immune response.
- Antibody: a protein produced by the body that binds an antigen, marking it to be destroyed by immune
- Herd immunity: when a high proportion of animals are vaccinated within a herd, preventing the spread of disease.

Why We Vaccinate:

When used effectively and within the larger context of herd management, vaccine programs are an **investment** that result in a positive economic return-on-investment over time (as well as other intangible benefits such as improved animal welfare and farmer satisfaction). Core vaccines recommendations are based on region and other criteria.

The Immune System: There are two branches of the immune system: Innate and Adaptive.

- Innate (~synonymous with local or mucosal immunity) = "the security guards" the first line of defense, e.g. physical barriers (skin, mucus membranes) as well as non-specialized cells (pacman). Present at birth.
 - IgA (antibody type A) is important in local mucosal immunity. Intranasal vaccines stimulate IgA production.
- Adaptive immunity (~synonymous with systemic immunity) = "special forces" trained over time in the face of repeat exposures to pathogens. Stores "memory" cells and generates specialized responses (e.g. killer cells and antibody-producing cells).
 - o IgG (antibody type G) is important in adaptive immunity. Injectable vaccines stimulate IgG production.
- Maternal IgG: Dams also deliver IgG to their offspring "passively" via colostrum
 - Maternal IgG will not interfere with intranasal vaccines, but will interfere with injectable
 - o Maternal IgG levels start to taper off around 3-6 months, while the calf's own immune system is still developing. The calf's immune system will begin to respond to injectable vaccines at 3-6 months, but it will be important to booster after 6 months.

Core Vaccine Program

Always consult your herd vet

- Calves: Intranasal (viral, bacterial)
- Replacement Heifers, Cows:
 - o 5-way Modified Live Vaccine with FP (fetal protection) OR Killed vaccine
 - o Mastitis Vaccine (coliform at minimum, staph also recommended, strep uberis as per risk)
 - **Scour** Vaccine (even better when used in combination with transition milk feeding)

Putting a Face to the Names

Respiratory +

- Bovine respiratory syncytial virus (BRSV): "local" to the respiratory tract; causes outbreaks; worst in young calves
- Infectious bovine rhinotracheitis (IBR): "red nose"; respiratory & reproductive disease; herpesvirus (latency)
- Parainfluenza-3 (PI3): secondary respiratory pathogen, cannot cause disease on its own

Intranasal vaccines have a shorter duration of immunity than injectable vaccines.

Modified live vaccines generally stimulate a better immune response than killed vaccines, but need to be used safely (ask your vet).

- Mannheimia haemolytica: "shipping fever"; "commensal" until animal is stressed; toxin kills white blood cells
- Histophilus somni: versatile (infects: lungs, reproductive tract, neurologic system, ears, heart valves, joints)
- Pasteurella multocida: secondary pathogen that contributes to respiratory disease

Reproductive +

- **Bovine viral diarrhea**: "persistently infected" (PI) calves can't distinguish virus as "non-self" shed high volumes of virus into the environment
- Leptospirosis spp.: more commonly causes increase in early embryonic loss, but can cause abortion outbreaks

Mastitis

- Coliform mastitis (E. coli, Klebsiella, etc.): environmental, mild to severe (toxic mastitis)
- **Staphylococcus aureus**: #1 cause of mastitis & reduced production; mostly goes undetected; protected by biofilm
- Streptococcus uberis: emerging as an important mastitis pathogen; often see recurring cases

Scours

- Rotavirus/Coronavirus: very common in calves <3 weeks of age; prevents absorption of water/nutrients
- E. coli type K99 (scours): toxin tricks intestinal cells into releasing excess electrolytes; profuse watery diarrhea
- Clostridium perfringens type C toxin kills intestinal lining; bloody fetid diarrhea +/- neurological signs

Quick Tips

- **Vaccine killers**: contaminants (dirty bottle, needle, injection site), incorrect/fluctuating temp (ideal 4*C), shaking (roll or invert instead)
- Use MLVs within 1-2 hours of mixing. If you have many doses to give, bring a cooler bag along, and mix bottles as you go.
- Don't be afraid to recruit your herd vet in tracking data over time. You don't know what you don't measure.