1 On-farm Handling and Storage of Medicines on beef and dairy farms

2

3 INTRODUCTION

4 Veterinary medicines are stored on the majority of UK farms, and include antimicrobials, 5 anthelmintics, non-steroidal anti-inflammatories and vaccines (Rees et al. 2018). All prescription 6 veterinary medicines have storage requirements as directed in the datasheet or summary of product 7 characteristics (SPC) Vaccines often have storage and handling instructions on the SPC that are in 8 addition to those applied to other medications. Most vaccines require storage between 2-8°C and 9 have short shelf-lives (usually hours) once broached. As well as storage requirements, medicines 10 have specific instructions for how, when, and where they should be administered. 11 Research by Cresswell et al. (2014) found that 93% of surveyed beef and dairy farmers reported 12 obtaining vaccines from their veterinary surgeon. This suggests that the relationship between 13 farmers and their veterinary surgeons is an important area to focus on when discussing vaccination 14 of cattle. This article aims to highlight areas where on-farm medicine handling and storage could be 15 improved and provide suggestions for how veterinary practices can support their clients to ensure 16 medicines are used to their maximum benefit.

17

18 STORAGE

Health and safety requirements as well as farm assurance schemes require that medicines be stored and handled appropriately, including keeping medicines in a secure, lockable cupboard, away from domestic, office or public areas. They should not be kept with human or animal food or drink and should be separated from application equipment. Records of stock levels should be kept by the farmer and vaccines and other medicines, which require refrigeration, need to be stored in separate fridges from those containing food (HSE, 2018, Red Tractor, 2018).

¹

There is a growing body of evidence that medicines are not being stored and handled correctly on beef and dairy farms in the UK (Rees et al., 2018). One of the main concerns is the maintenance of the vaccine 'cold chain', i.e. keeping vaccines consistently between 2-8°C. A recent study concluded that on-farm fridges sampled by Williams and Paixao (2018) failed to keep the vaccines within the required temperature range for a sustained period at least during in the study period, and to such an effect that this compromised the efficacy of the vaccines stored in those fridges.

In a study carried out in the UK, Meadows (2010) observed that although refrigeration was used prior to collection of the vaccine and once it arrived on farm, the ability to maintain a chilled temperature during transport (either by farmers or vets) was not available in 89% of cases. As it takes only 20 minutes for vaccines to equilibrate with the ambient environmental temperature (Williams and Paixao, 2018), transportation is potentially a key target area to maintain the cold chain.

37 Recommendations for maintenance of the cold chain should be focused on both transport of the 38 vaccines and storage once on farm. As the cold chain is unlikely to be successfully maintained in 39 most farm fridges (Williams and Paixao, 2018), it may be helpful to minimise the length of time that 40 vaccines are stored on farms, so that they are brought onto the farm just prior to a vaccination 41 session. The Veterinary Medicines Directorate require veterinary practices to monitor fridge 42 temperatures daily, with the aim of storing vaccines appropriately up until the point of collection, 43 and this should also include fridges and storage used for delivery. The beef and dairy industry in the 44 UK is in a privileged situation where it has become common practice for vets and non-vets (where 45 suitably qualified persons (SQPs) are prescribing) to dispensevaccines and let farmers vaccinate their 46 own cattle; in the Netherlands for example, only few veterinary medicines can be left on farm and 47 vaccination is always carried out by vets.

As part of their role in disease prevention, it is in the interest of vets to ensure that the product sold
to their clients is as effective as possible when reaching the animal. Vaccines may be delivered by

practice members, e.g. vets going out to farm visits, or picked up from the practice by the clients themselves. As vets' vehicles and veterinary medicine storage compartments are reported to routinely exceed the temperature storage requirements for most veterinary medicines (Ondrak et al. 2015), providing specific cool storage, such as a cool box, for transportation of vaccines, both for vets and clients would be a cost effective way in which to ensure the cold chain is maintained until vaccines reach the farm.

56 Considering the observed challenges with on farm fridges, on-farm monitoring of fridge 57 temperatures is important and can be done cost effectively by putting a max-min thermometer in 58 the fridge and checking this on a regular basis. This ongoing requirement to monitor regularly may 59 be challenging to already time-poor farmers. Continuous data loggers with alarms, which alert when 60 temperatures approach unacceptable ranges can be helpful and are in use in some veterinary 61 practices (BSAVA Veterinary Resources). In the human field vial monitors, visual freeze indicators 62 and 'shake tests' have been used to provide a quick and easy indication of whether vaccines have 63 been potentially affected by temperature extremes, and have potential for application in the 64 veterinary field (WHO, 2015).

65

66 USAGE AND HANDLING

With vets administering vaccines on farm in only 6% of cases in the UK (Cresswell et al. 2014), the responsibility for administration of vaccines and other veterinary medicines largely falls to the farmer and farm workers. It is unknown how aware farmers are of the need to keep vaccines within specified temperature ranges until they are administered to the animal. For example, some vaccines are required to be brought up to ambient temperatures of 15-25°C before administration. Although this information is on the datasheet, only about one third of farmers refer to the datasheet before starting a vaccination session (Cresswell et al. 2014). There is limited published data on the actual

effect on efficacy of the vaccine when not administered at the correct temperature, and more
research in this area could help farmers and vet focus on the key areas to improve.

76 Rees et al. (2018) demonstrated that 25 out of 27 farms stored expired veterinary medicines. Whilst 77 some efficacy is assumed after the expiry date of unopened veterinary medicines, large-scale studies 78 and information on specific products are not widely available (Ondrak et al. 2015). It is difficult to 79 assess whether the storage of expired products relates to their usage on farms. It is therefore 80 unclear what the impact of on-farm storage of expired medicines is, and this warrants further 81 investigation both from vets in practice as suppliers of veterinary medicines (i.e. how often are 82 products being used after the expiry date and why), and in the wider context (i.e. what is the effect 83 of using expired products?). However, from a perspective of appropriate medicines use and to 84 comply with datasheet regulations, expired medicines should be disposed of appropriately.

85 The same applies to vaccine bottles which have been broached; most vaccines have short shelf lives 86 once broached or reconstituted and should therefore be used within the time stated on the SPC 87 which could be only a couple of hours dependent on the vaccine used. On-farm storage of open 88 vaccine bottles is therefore unnecessary and should be discouraged. Ensuring that veterinary 89 practices stock smaller pack sizes will ensure that vaccines are only purchased for the number of 90 animals which require vaccination, which may help smaller herds or those with year-round calving 91 patterns where very few animals fit into a specific timing window. Some practices have started 92 'vaccination days' where clients share bottles of vaccine in order to vaccinate larger numbers of 93 animals on the same day. When particular attention is paid towards biosecurity in these cases, it can 94 be an effective way to reduce vaccine wastage amongst smaller herds.

Many vaccines have specific timing schedules for administration in order to optimise the immune
response of the animal. For example, calf vaccine schedules are designed so that the antibody
response is not adversely impacted by maternally derived antibodies. Conversely, colostral vaccines
to prevent *E.coli*, rota and corona virus infection in calves are designed to confer immunity from the

cow to the calf when administered at the appropriate interval pre-calving. Many vaccines specify
that sick animals should be excluded from vaccination in order that the animal mounts the
appropriate immune response and does not further compromise the animal's health (NOAH, 2018).

102 A

103 In a study evaluating farmer compliance with vaccination protocols, 27% of farmers were incorrectly 104 administering vaccines compared to the route of administration described on the datasheet. The 105 most common mistake was administering intramuscular vaccines subcutaneously and vice versa (Cresswell et al. 2014). In the same study, 31% of farmers were administering vaccines at the 106 107 incorrect site compared with that recommended on the datasheet, with the majority of farmers 108 injecting in the gluteal region where the neck was recommended. The actual effect on vaccine 109 efficacy when using a different route or site of administration is not described in the published 110 literature. It can be hypothesised, considering what is known from the human literature, that it will 111 have a detrimental effect on efficacy and duration of action of veterinary medicines, as well as 112 increasing the risk of formation of injection site lesions (Cresswell et al. 2017). In dairy systems 113 where injections often occur in the milking parlour, injections are given in the gluteal region but 114 aution should be taken when injecting in this site to avoid damaging the sciatic nerve. Where safety 115 permits and where no injection site is specified the neck region is always preferred (Kirkwood et al. 116 2018) and appropriate handling systems such as races and feed barriers with self-locking head yokes 117 can help to facilitate this. A short video directed at farmers who regularly inject in the gluteal region 118 ('Research explained: Risk of iatrogenic damage to the sciatic nerve in dairy cattle'

119 <u>https://youtu.be/MXZFjXa2LUA</u>) indicates key areas to focus on to prevent damage.

Needle hygiene is an important focus to reduce the risk of injection site lesions. During a vaccination session, using one needle for drawing up and another needle for injecting animals is good practice to avoid contamination. Gross contamination of the bottle should also be prevented and the top of the bottle kept clean using disinfectant. Changing the needle every few animals is advisable and should

124 be recommended at least between different groups of animals, to prevent the possible spread of 125 contamination and disease via injection; there is a suggestion that Bovine Viral Diarrhoea virus may 126 be transmitted via injection (Niskanen and Lindberg, 2003). The use of multi-dose injection guns with 127 built-in needle cleaning systems have become more widespread and could help to prevent spread of 128 contamination and disease via injection. It is also important to ensure the animal's skin is clean and 129 dry. In the pig industry intradermal injections are becoming more commonplace to help avoid the 130 problems such as injection site lesions that can be associated with vaccination by injection (MSD 131 Animal Health).

132 Considering the significant attention towards the reduction of antimicrobials in the farm animal 133 industry, the focus of this article is around vaccination, as the uptake of veterinary vaccines is likely 134 to increase in the future, due to the more preventative approach that is taken on farm towards 135 disease control. However, the principles of appropriate storage and usage apply across all veterinary 136 medicines. Moreover, for medicines such as antibiotics, anthelmintics and non-steroidal anti-137 inflammatory drugs, correct dosing of products is even more important compared to vaccines as the 138 dose of the medication is based on the animal's weight. Accurate weighing of animals either using 139 scales, weigh tapes, or precision livestock technologies can ensure that appropriate doses of 140 medicines are administered, as visual estimation has been demonstrated to be inaccurate (Wood et 141 al. 2015).

142

143 TOP 10 RECOMMENDATIONS

144 1. Have in-car fridges/cool boxes for vets with max-min thermometers

Recommend cool boxes for farmers to use when collecting vaccines and during vaccinating
 sessions

147 3. Recommend placing max-min thermometer or temperature loggers in farm fridges

148 4. Implement 'Medicine storage & Fridge health' checks in your routine visits

149	5.	Discuss with your farm clients how they/their staff are administering medicines and provide
150		readily accessible support/training – annual reviews as part of farm assurance schemes are
151		an excellent opportunity for this
152	6.	Provide flyers with key points to consider when prescribing veterinary medicines
153	7.	Recommend the use of weigh tapes or scales to check correct dosage
154	8.	Offer vaccination services carried out by trained practice staff such as technicians
155	9.	Include handling and storage of medicines topics in farmer discussion groups, share
156		experiences, invite other sectors such as pig and poultry farmers, and promote best practice
157		using examples in practice newsletters/social media
158	10.	Challenge research, levy boards and the pharmaceutical industry to investigate and provide
159		evidence for best practice and the effects of non-compliance.
160		

161 ONLINE RESOURCES

- 162 The resources below are focussed around vaccination practices but include important handling, use
- 163 and storage information relevant to all veterinary medicines used on farm.



Vaccinating Cattle Safely and

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Vaccines help to reduce the incidence or the severity of disease by stimulating the immune system to provide protection. This film has been created for farme...

164

- 165 Quiz: <u>https://dairy.ahdb.org.uk/technical-information/animal-health-</u>
- 166 welfare/vaccination/vaccination-quiz/#.We4hgFuPKCg

Vaccination Quiz - AHDB Dairy

dairy.ahdb.org.uk

Vaccination Quiz. Related Links & Publications. Dairy Pro; Terms of Use; Privacy Policy;

Accessibility Statement

- 168 Webinar Best practice for vaccination of beef and dairy cattle AHDB Dairy, AHDB-Dairy
- 169 (https://youtu.be/m6MrO1CacB4?list=PLbxhW7-AcgGWbM_ghrkza5VHAARM57LCg)



Best practice for vaccination

of beef and dairy cattle -

AHDB Dairy

youtu.be

Vaccines are an important tool to use in herd health programmes, however, the success of any vaccine is dependent on good management practices. There are man...

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171	
172	https://dairy.ahdb.org.uk/technical-information/animal-health-
173	welfare/vaccination/#.We4hVluPKCg
174	
175	

Technical Information - AHDB Dairy

dairy.ahdb.org.uk

Vaccination Published 14 November 14. Excellent cattle health is vital for maximum production since cattle must be healthy to reach their performance potential.

176

177

178 EASIER SAID THAN DONE

179 Often the so-called 'simple solutions' as described in this article, are the most challenging to enact 180 on farm. Studies have shown that encouraging a change to improve compliance requires individual 181 farm insight into clients' motivations, values and goals (Kristensen and Jakobsen, 2011). What can 182 you do to help your clients change their current behaviour and check their fridge, expiry dates, 183 injection techniques? Asking them this question is often the best way to access this information and 184 it may take a bit of time for people to answer this question truthfully. It may be your clients want to 185 do the best they can for the animals under their care; in those situations explaining the impact of 186 using and handling medicines incorrectly (i.e. it may increase the change of disease and reduce 187 welfare compared to inadequate use) may encourage them to change their technique. Some clients 188 are motivated by money; explaining that they have just lost £2000, which they spent on 189 inappropriately stored vaccines may help to motivate an investment in ensuring for example, a 190 correct fridge temperature. Other farmers are finding time to be their main barrier and therefore 191 never 'get round' to improving their use and storage of medicines, even though they are aware of 192 their shortcomings; discussing how your practice could offer support by providing for example 193 vaccination services may help. Most farmers highly regard and trust their vet (Richens et al. 2015) 194 and by finding out what drives them, we can offer bespoke solutions and support. This could be in

195 the form of providing knowledge transfer through information events, or through more practical

196 solutions such as transport and administration of vaccines.

197

198 CONCLUSION

- 199 Much of the handling and storage of medicines on farm occurs with minimal veterinary input.
- 200 However, it has been repeatedly demonstrated that farmers value veterinary input on their farms
- 201 (Hall and Wapenaar, 2012, Cresswell et al. 2014), particularly with regards to distribution and
- administration of vaccines (Richens et al. 2015). As practitioners are often regularly on farm and able
- 203 to view medicine storage and administration veterinary practices are well-placed to provide services
- and advice in this area. Further research is warranted from levy boards and the pharmaceutical
- industry to provide evidence for best practice and the effects of non-compliance.
- 206
- 207

208 SELF ASSESSMENT QUIZ

- 209 Q1. Most vaccines should be stored between...
- 210 0-1 degrees Celcius
- 211 2-8 degrees Celcius
- 212 9-15 degrees Celcius
- 213 16-20 degrees Celcius
- 214 (Cresswell, E., Brennan, M. L., Barkema, H. W. and Wapenaar, W. (2014) A questionnaire-based
- survey on the uptake and use of cattle vaccines in the UK. Vet Rec Open 2014;1:e000042.
- 216 doi:10.1136/vropen-2014-000042)

218	Q2. What is the approximate percentage of cattle carcasses in the UK that have abscesses at
219	slaughter which are most likely due to poor injection technique and reduce carcass value?
220	2%
221	6%
222	12%
223	16%
224	Cresswell, E., Remnant, J. G., Butterworth, A., & Wapenaar, W. (2017). Injection-site lesion
225	prevalence and potential risk factors in UK beef cattle. Veterinary Record, 180(3)
226	
227	Q3. What percentage of beef and dairy farmers obtains vaccines from their veterinary surgeon?
228	93%
229	73%
230	53%
231	23%
232	(Cresswell, E., Brennan, M. L., Barkema, H. W. and Wapenaar, W. (2014) A questionnaire-based
233	survey on the uptake and use of cattle vaccines in the UK. Vet Rec Open 2014;1:e000042.
234	doi:10.1136/vropen-2014- 000042)
235	
236	Q4. What percentage of farmers report they do NOT read the instructions before they start
237	vaccinating?

238	93%
239	73%
240	53%
241	23%
242	(Cresswell, E., Brennan, M. L., Barkema, H. W. and Wapenaar, W. (2014) A questionnaire-based
243	survey on the uptake and use of cattle vaccines in the UK. Vet Rec Open 2014;1:e000042.
244	doi:10.1136/vropen-2014- 000042)
245	
246	Q5. In a study monitoring farm fridges, what percentage of fridges maintained a temperature within
247	the storage range required for vaccines (monitored over an 8 month period)?
248	0%
249	20%
250	40%
251	60%
252	(Williams P.D. and Paixão G. On-farm storage of livestock vaccines may be a risk to vaccine
253	efficiency: a study of the performance of on-farm refrigerators to maintain the correct storage
254	temperature. BMC Veterinary Research. 2018;14(136))
255	
256	Q6. In a study investigating vaccine compliance, what percentage of farmers used a new needle for
257	each animal they vaccinated?
258	0%
259	6%

260	16%
261	26%
262	(Cresswell, E., Brennan, M. L., Barkema, H. W. and Wapenaar, W. (2014) A questionnaire-based
263	survey on the uptake and use of cattle vaccines in the UK. Vet Rec Open 2014;1:e000042.
264	doi:10.1136/vropen-2014- 000042)
265	
266	Q7. In a study assessing risk of nerve damage by injecting in the gluteal region, what percentage of
267	participants were injecting in the 'high risk' area?
268	29%
269	49%
270	69%
271	89%
272	(Kirkwood, RM., Remnant, JG., Payne, RM., Murphy, AM., Wapenaar, W. (2018) Risk of iatrogenic
273	damage to the sciatic nerve in dairy cattle Veterinary Record 182, 140.)
274	
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