



## SCC DIAGNOSTICS TOOL BOX



### F-MC-3: Interpretation and Use of Laboratory Culture Results and the Characteristics of Various Mastitis Pathogens

Source: Laboratory for Udder Health, Minnesota Veterinary Diagnostic Laboratory, University of Minnesota

#### Using Your Results

Culture results can provide you with valuable decision making information. It is recommended that you and your veterinarian review all culture results and decide what mastitis management strategy is appropriate for the cows in your herd. By knowing which mastitis pathogens are infecting the high SCC cows in your herd, you can target management decisions that have the greatest impact. Generally, reduction and/or preventing new infections will depend on appropriate milking procedures, cow (dry and milking) comfort and housing, heifer rearing and appropriate dry cow management. Identifying infections early will allow you to make management changes that will have the greatest impact and result in fewer new infections.

#### Management options commonly fall into the following categories:

- **Prevention**

Preventing mastitis is the most economical method of dealing with this disease. Good bedding management is a critical factor in mastitis prevention. If you are using organic bedding the bedding must be changed daily. Scrape off the back one-third of the stall and replace it with clean, dry fresh bedding material. Sand bedding should be groomed at each milking. All alleys must be scraped at each milking. Avoid splashing manure onto the stall.

Good cow preparation is the second critical aspect. Teat ends must be targeted for cleaning. Every teat and teat-end must be clean prior to attaching the milking unit.

- **Treatment**

Identifying the causative organism for mastitis will help you and your veterinarian make informed decisions regarding possible treatment and prevention options. Therapy during lactation is more appropriate for some organisms than others. In some cases, antibiotic therapy is of little benefit but supportive therapy (fluids, anti-inflammatory drugs, etc) will be more important. Your veterinarian will help you with these decisions as well as help you design treatment protocols appropriate for your dairy. In the long run, this will help you save money and be more profitable.

- **Dry Cow Therapy**

A culture based approach is the cornerstone of a successful mastitis control program. Cows which should be cultured are those which are CMT positive (score of 3) 2-3 days after calving or those with an elevated (>200,000) SCC on the first test and those which have a high SCC at dry off. This will help determine the bacteria causing the problems and the most appropriate dry cow therapy (the one which will work the best on your dairy). Comparing linear SCC scores at dry off with those at freshening will help you assess the efficacy of your dry cow therapy program and give you an indication of the cleanliness of your dry cow housing. Use culture results and DHIA test reports to determine the percent of infected cows that were cured during the dry period. In addition, these reports will tell you the percent of cows that became infected during the dry period.

- **Milking Order**

Identifying the cows infected with contagious mastitis pathogens (*Strep ag*, *Staphylococcus aureus* and *Mycoplasma*) and milking them last, or with a separate unit, will decrease the spread of infection to uninfected cows during the milking process. Identify using culture and treat all *Streptococcus agalactiae* cows or place them in your low value pen.

- **Culling**

The economic benefit of culling or keeping a cow needs to be frequently evaluated. Cows with chronically elevated SCC with known *Staphylococcus aureus* infections should be especially considered for culling. All cows with clinical cases of Mycoplasma mastitis should be culled immediately.

- **Vaccination**

Effective core antigen vaccines (J5) are available. They aid in reducing the incidence and severity of Coliform mastitis. Significant improvements have been made in Staph aureus vaccines. However, there is no effective Staph aureus vaccine available today that will prevent new infections. They may reduce the severity of existing infections.

In general, vaccines are not a highly effective means of preventing mastitis. Vaccine use in your mastitis control program should be discussed with your herd veterinarian.

### **General mastitis control principles that apply to all dairies:**

- 1) Milk clean dry cows.
- 2) The teat ends MUST be targeted for cleaning in the pre-milking routine. (If when checking the adequacy of pre-milking cow prep you can scrub teat ends with a cotton swab and get manure or dirt off, they are not being adequately cleaned.)
- 3) Bedding must be well managed:
  - Organic Bedding (wood sawdust, shavings, straw, etc) – bedding in the back 1/3 of the stall must be completely removed and replaced with fresh clean bedding daily. Do not move the bedding from the front of the stall to the back of the stall under the udder.
  - Inorganic Bedding (sand) - groom the stall for cow comfort keeping the sand level with the curb. Do not groom more than 2" down if using a mechanical grooming device. Replace the dirty sand in the rear of the stalls every week with fresh clean sand.
- 4) Make sure pre- and post-teat dip is applied to the ENTIRE teat surface.
- 5) Do not over crowd. Preferably one cow per stall and no more than 1.2 cows per stall. In loose housing loafing areas each animal should have 100 sq. ft. per cow.
- 6) Scrape alleys at each milking.
- 7) Make sure your animals have adequate levels of Vitamin E and selenium in their diets to help maintain healthy immune system function.
- 8) Wear gloves when milking cows.
- 9) Base all your treatment decisions on culture and sensitivity results in consultation with your veterinarian.
- 10) To reduce potential for Staph aureus spread use effective fly control during summer months.

### Mastitis Bulk Tank Culture Report Interpretation

Type of Bacteria	Usual Infection Source	Major Means of Spread	Mastitis Control
Strep agalactiae	Infected udders of other cows in herd.	Cow-to-cow by contaminated udder wash rag, teat cups, etc.	Use separate towels to wash / dry: Teat dipping; dry cow treatment; eradication in special cases.
Staph aureus	Infected udders of other cows, contaminated bedding from milk of infected cows.	Cow-to-cow by contaminated udder wash rag, milkers hands, contaminated milking equipment, and improperly functioning equipment.	Use separate towels to wash / dry; teat dipping; dry cow treatment; milk infected cows last, cull chronically infected cows. Careful purchasing of replacement and herd expansion cattle using bulk tank and individual cow cultures.
Mycoplasma	Infected udder of other cows, often from infected purchased cows/ heifers.	Cow-to-cow by hands of milkers, equipment, and common towels. Aerosol transmission from animals with respiratory signs may also occur. Or the bacteria can move from a respiratory tract infection to the udder or joints.	Careful purchasing of replacement cattle, using bulk tank and cow culturing to monitor herd status and clinical cows. Use separate towels to wash/dry; teat dipping; dry cow treatment; milk infected cows last, cull any positive clinical case.
Non-ag Streps	Environment of cow.	Environment of the cow by: wet, dirty lots, contaminated bedding, milking wet cows, poor cow prep, milking machine air slips.	Improve stall and lot sanitation; milk clean dry cows, avoid air leaks and liner slips, change bedding frequently. Keep cows standing after milking.
Coliforms	Environment of cow.	Environment of the cow by: wet, dirty lots, contaminated bedding, milking wet cows, poor cow prep, milking machine air slips. Hot humid weather.	Improve stall and lot sanitation; milk clean dry cows, avoid air leaks and liner slips, change bedding frequently. Keep cows standing after milking.
Staph species	Environment of cow.	Poor teat dip coverage, poor cow prep, old bedding.	Consistent teat dipping, adequate cow prep, and more frequent bedding change.

## Contagious Mastitis Pathogens

### ***Streptococcus agalactiae* (Strep. ag)**

*Streptococcus agalactiae* (*Strep. ag*) is a contagious (spreads from cow to cow) mastitis pathogen that may be common on some dairies; especially on expansion dairies. Frequently, only 10-15% of the cows infected with *Strep. ag* will exhibit signs of clinical mastitis. Most animals which are infected will have decreased milk production and high somatic cell counts. In small herds even one cow infected with *Strep. ag* can raise the bulk tank cell count.

*Streptococcus agalactiae* only multiply in the cow's udder. However, they can survive for short periods of time on skin, common udder wash cloths and milking machine parts. Infections are spread from an infected animal to herd mates on hands, inflations, common towels, and other items used during the milking process.

Purchased animals are frequently the source of bringing *Strep. ag* into the clean herd. Use of contaminated milking equipment at fairs or auctions will also spread these infections. Because cows often do not exhibit clinical

signs when infected, *Strep. ag* can spread rapidly throughout the herd and is usually identified on bulk tank cultures, high bulk tank somatic cell counts or when *Strep. ag* is isolated from individual cows with mastitis.

### **Management**

- Culture milk from all cows in the herd.
- Treat all cows that culture positive for *Strep. ag* at the same time in all four quarters with an approved intramammary treatment. Penicillin is usually effective.
- Milk all infected cows last until subsequent cultures are negative.
- Cull the cows that do not respond to therapy.
- Milk purchased animals separately and culture milk samples from these animals before mixing them with the remainder of the herd.
- Once *Strep. ag* has been eliminated from the herd, monthly bulk tank cultures should be performed for at least 6 months to ensure that the herd is free of this disease.

### **Staphylococcus aureus (Staph. aureus or Staph. A)**

*Staphylococcus aureus* is the organism responsible for causing one of the most common types of contagious mastitis in dairy cattle. It is a major source of expense and lost revenues on many dairies. *Staph. aureus* infections are considered contagious. The primary means of spread is from an infected udder to an uninfected cow. Thus, infected cows are a common source for new infections. However, these bacteria may also be found on the teat skin of cows and in the environment. Most commonly, *Staph aureus* mastitis exists as a very chronic, subclinical infection. *Staphylococcus aureus* infections can damage tissue producing areas of walled off infections that do not respond to antibiotic therapy. These infections can result in decrease milk production up to 45% per quarter. In addition to milk production losses, elevated somatic cell counts are seen and may be accompanied by recurrent episodes of clinical mastitis.

*Staphylococcus aureus* are primarily spread from an infected cow to non-infected cow during the milking process by contaminated milking equipment, milkers' hands, common towels etc. *Staphylococcus aureus* can colonize lesions on the teat ends and/or gain entrance to the gland through the teat canal. Teat injuries, excessive teat end hyperkeratosis, teat chapping and frozen teats can also increase the risk and spread of *Staph aureus* within a herd. Calves that can cross-suckle can also spread this disease.

*Staphylococcus aureus* commonly produce chronic infections that persist from one lactation to another despite dry cow therapy. New infections in young animals may respond to antibiotic therapy but often these animals are infected for life. It has been determined that the suckling horn fly (*Haematobia irritans*) is a vector (transmitter) for the staph aureus bacteria.

### **Management**

- Good pre and post teat dipping is critical. Make sure every teat is consistently and completely covered with teat dip.
- Milk known *Staph aureus* cows last, or with a separate unit, for as long as they are in the herd.
- If possible, segregate them to their own group or area of the barn.
- During cold weather use teat dips containing sufficient levels of emollients to avoid chapping.
- If it is economically feasible consider culling chronically infected cows.
- Culture milk samples before purchasing any replacement animals and before mixing these animals with the remainder of the herd.
- An effective fly control program should be implemented.

### **Mycoplasma species**

*Mycoplasma* species are contagious organisms that may be found in infected udders, respiratory tracts, and urogenital tracts of apparently healthy animals. This disease is frequently brought onto a farm through the purchase of infected milking cows or heifers. *Mycoplasma* species are transmitted from cow to cow at milking

time on hands of milkers, equipment, and common towels. Udder infections or swollen joints can occur in animals with a recent history of a respiratory tract infection. Aerosol transmission from animals with respiratory signs may also occur.

Mycoplasma infected cows tend to shed high numbers of organisms at calving time. This is a good time to check animals by culturing transition milk to determine if they are infected. Many Mycoplasma infections are subclinical and the infected cow has a low SCC. Cows that pose the risk to the herd are those in the hospital pen because of clinical mastitis. Mastitis due to Mycoplasma does not respond to antibiotic therapy. Milk from Mycoplasma infected cows may vary from thick appearing milk to a watery, sandy consistency. One or all four quarters may be affected.

### **Management**

- Culture all animals with clinical mastitis and all fresh cows and those with long term high SCC.
- Cull all cows that are known to be Mycoplasma positive with clinical mastitis.
- Teats should pre-dipped with an approved product and dried with individual use towels.
- Dip all teats with an approved product immediately after milking. Ensure the entire teat surface is covered.
- Segregate and milk separately all animals last that are known to be Mycoplasma positive.
- Culture all herd replacement animals including heifers.
- When buying animals, multiple bulk tank cultures from the herd of origin is recommended.
- House young stock and lactating animals separately.
- Do not feed waste milk to calves.
- Practice good fly control on the dairy and heifer grower facilities.

## **Environmental Mastitis Pathogens**

### **Streptococcus and Enterococcus species (non-ag. or environmental streps)**

*Streptococcus* and *Enterococcus* species (non-agalactiae streps) include *Streptococcus uberis* and *Streptococcus dysgalactiae* as well as many other species of streptococci and enterococci. These organisms come primarily from the environment. Major sources of these bacteria are bedding material, manure, mud and infected cows. Infections with “environmental streps” frequently occur during the dry period especially during the first 2 weeks following dry off and during the first 2-3 weeks prior to calving.

These bacteria may cause either clinical mastitis with abnormal milk, swelling of the gland, and fever or a subclinical mastitis with no apparent signs. Individual cow somatic cell counts are frequently elevated. Frequently, most of the infections caused by *Strep* species are eliminated by the cow's immune system or by antibiotic therapy. Some environmental strep. infections (18%) will become chronic and are refractory or poorly responsive to treatment.

Culture all cows with clinical mastitis or those having chronically elevated somatic cell counts. Individual cow cultures of high SCC cows in addition to and antibiotic susceptibility testing of bacteria will help your veterinarian design a treatment protocol appropriate for your dairy.

### **Management**

- Minimizing exposure to the bacteria is essential for the prevention of environmental mastitis caused by non-ag. streps.
- Adequate amounts of clean, dry bedding should be provided in all stalls. Well-managed inorganic bedding (sand) is associated with fewer pathogens than organic bedding (straw, shavings, sawdust, etc.). Wet or soiled bedding should be removed at each milking. The back one-third of every stall should be bedded daily when using organic bedding material.
- Maintain dry and clean dry cow loafing areas. These need to be cleaned daily. Avoid bedded packs.

### **Streptococcus uberis**

*Streptococcus uberis* is a commonly found non-ag streptococcus or environmental streptococcus. It is frequently cultured from the bovine udder. Cows become infected from environmental sources between milking when teat ends come in direct contact with surfaces contaminated with manure or dirty bedding material. Cows frequently become infected with *Strep. uberis*, like other environmental organisms, during the early dry period and during the 2-3 weeks prior to calving. *Streptococcus uberis* may occasionally spread from cow to cow through milking units, common udder wash cloths or multi use towels.

These bacteria may cause either clinical mastitis with abnormal milk, swelling of the gland, and fever or sub clinical mastitis with no apparent signs except that individual cow somatic cell counts may be elevated SCC >400,000 or linear score of  $\geq 4$ . Cow to cow transmission can occur but is thought to be relatively rare.

#### **Management**

- Minimize exposure to dirty environmental conditions.
- Provide adequate amounts of clean, dry bedding material in all stalls. Inorganic bedding (sand) is associated with fewer pathogens than organic bedding (straw, shavings, sawdust, and paper pulp). Wet or soiled bedding should be removed at every milking.
- Alleys, walkways, and holding areas should be scraped free of manure at each milking.

### **Streptococcus dysgalactiae**

*Streptococcus dysgalactiae* is considered a non-ag streptococcus or an environmental strep. *Streptococcus dysgalactiae*, unlike the other non-ag streps., (*Streptococcus uberis* and *Enterococcus*) may occasionally spread contagiously from cow to cow through milking units, hands, common udder wash cloths or multi use towels. Cows become infected between milkings when teat ends come in direct contact with manure, soiled bedding, etc. or at milking time when poor udder preparation occurs prior to milking unit attachment.

These bacteria may cause either clinical mastitis with abnormal milk, swelling of the gland, and fever or subclinical mastitis with no apparent clinical signs. Individual cow somatic cell counts are usually elevated in these animals. Most of the infections caused by *Streptococcus dysgalactiae* are eliminated by the cow's immune system or by intramammary antibiotic treatment. Approximately 18-20% of these infections will become chronic.

It is recommended that cows with clinical mastitis or those that have chronically elevated somatic cell counts (greater than 4 linear score on two consecutive tests) be cultured and antibiotic susceptibility be performed. This will help provide information that will allow you and your veterinarian to design the most effective treatment protocols for your dairy.

#### **Management**

- Minimize exposure to dirty environmental conditions.
- Be sure adequate amounts of clean, dry bedding material should be provided in all stalls.

### **Escherichia coli**

*E. coli* is a Gram negative bacterium (coliform) that is commonly found in bedding, manure, water, and soil. Mammary gland infections with *E. coli* can cause life-threatening illness. Most of these infections occur during the first two weeks prior to calving through the first 60 days of lactation. Infection occurs when the teat end contacts contaminated material between milking.

Most *E. coli* infections are of short duration. Approximately 50% last less than 10 days. However some may become chronic lasting more than 100 days. Ten percent of the cows may have a sudden onset of fever, markedly decreased milk production, loss of appetite and dehydration. Often these cows will go down and be unable to rise. Milk from the affected quarter may have large clots or be watery or bloody. Supportive therapy with anti-inflammatory drugs and fluids may be required for these cases. Antibiotic therapy is often of little benefit unless the organism has spread to the animal's circulatory system. Most often the cow's immune system will effectively kill the bacteria. The clinical signs are due to toxins produced and released by the bacteria.

Immunization with J5 vaccine can reduce the incidence and severity of clinical cases if administered appropriately.

### **Management**

- The most effective management measure is to keep cows clean and dry, particularly in the dry cow and pre-fresh areas.
- Avoid overcrowding of pens. Avoid using bedded packs.
- There should be one cow per free stall and 100 sq. ft. per cow in loafing areas.
- If organic bedding is being used, preferably use large particulate material. Avoid dusty fine particulate bedding.
- Implement a core antigen (J5) coliform mastitis vaccination program during the dry period and early lactation.
- Prevent access to muddy corrals and pastures and areas of standing water.
- For cases of severe, acute mastitis discuss treatment protocols with your veterinarian.

### **Klebsiella species**

*Klebsiella* species are Gram negative bacteria (coliform) that are commonly found in organic bedding, manure, and soil. In the past these infections have been associated with green sawdust, however, more recent evidence indicates that manure is the most likely source of exposure. Rates of new infections are higher in the summer than in other seasons. Most of these infections occur during the first two weeks prior to calving through the first two months of lactation. Infection occurs when the teat end contacts contaminated material between milking. *Klebsiella* infections are typically very difficult to treat. The infected animals frequently have to be culled. Some cows may have a sudden onset of fever, markedly decreased milk production, loss of appetite and dehydration. Often these cows will go down and be unable to rise. Milk from the affected quarter may have large clots or be watery or bloody. Supportive therapy with anti-inflammatory drugs and fluids is may be required for these cases. Antibiotic therapy is often of little benefit unless the infection is systemic. The cow's immune system will effectively kill the bacteria; most clinical signs are due to toxins produced by the bacteria. Immunization with J5 vaccine can reduce the incidence and severity of clinical cases.

### **Management**

- The most effective management measure is to keep cows clean and dry, particularly in the dry cow and pre-fresh areas.
- Use green sawdust, wet wood, recycled manure bedding and bedded packs with caution and only if strict pre-milking cow prep procedures are implemented to assure teats surfaces are consistently cleaned at every milking.
- Avoid overcrowding of pens. Prevent access to muddy lots, pastures and areas of standing water. Each cow in loafing areas should have 100 sq. ft. and in stall barns there should be one stall per cow.
- Consider the use of immunization with a J5 vaccine during the dry period and early lactation.

### **Enterobacter and Citrobacter**

*Enterobacter and Citrobacter* are Gram negative bacteria that are found in bedding, manure and soil. Like other Gram negative bacteria, they may cause life threatening acute mastitis. Exposure to these organisms occurs between milking when teat ends contact contaminated surfaces, especially bedding material.

Most infections are of short duration. However, some may become chronic lasting more than 100 days. Cows may have a sudden onset of fever, markedly decreased milk production, loss of appetite and dehydration. Often these cows will go down and be unable to rise. Milk from the affected quarter may have large clots or be watery or bloody. Supportive therapy with anti-inflammatory drugs and fluids is usually required for these cases. Antibiotic therapy is often of little benefit. The cow's immune system will effectively kill the bacteria. The clinical signs are due to toxins produced by the bacteria. Immunization with J5 vaccine can reduce the incidence and severity of clinical cases.

### **Management**

- The most effective management measure is to keep cows clean and dry, particularly in the dry cow and pre fresh areas.
- Effective bedding management is important in limiting the incidence of the disease.

### **Coagulase-negative *Staphylococcus* species (Staph species)**

Coagulase-negative *Staph* (CNS or *Staph* species) can be normal inhabitants of bovine skin or can be found in the environment in bedding and manure. They frequently gain access to the udder between milking and are normally not contagious. *Staph* species is one of the most common organisms cultured from dairy cows (10 to 20% of quarters is common). *Staph* species infections are usually associated with subclinical mastitis resulting in moderate increases in somatic cell counts.

If a herd is experiencing a high incidence of *Staph* species infections, post milking teat dip products and their application should be re-evaluated. *Staph* species can be quite resistant to antibiotic therapy. However, most infections will resolve without treatment, given enough time. Persistent infection will likely clear during the dry period.

### **Management**

- Minimize exposure to dirty environmental conditions.
- Adequate amounts of clean, dry bedding should be provided in all stalls. Inorganic bedding (sand) is associated with fewer pathogens than organic bedding (straw, shavings, sawdust, and paper pulp). Wet or soiled bedding must be removed daily.
- Alleys, walkways, and holding areas should be scraped free of manure on a regular basis.

## **Miscellaneous Mastitis Pathogens**

### ***Pseudomonas* species**

*Pseudomonas* species are environmental bacteria commonly found in water, soil and wet bedding. Water supplies (ponds, troughs, wells, and wash hoses), contaminated teat dips, poor intramammary treatment administration and contaminated multidose bottles of medications can be sources on a dairy farm. *Pseudomonas* spp. gain access to the udder via teat end contact with contaminated material.

*Pseudomonas* spp. usually causes chronic infections that respond poorly to antibiotic therapy requiring the culling of cows, or individual quarters dried off. Infection rates in dairy herds are generally less than one percent and usually involve higher producing dairy cows in early lactation. Clinical outbreaks can occur with swelling of the udder, high fevers, and abnormal milk.

### **Management**

- If clinical outbreaks occur, water supplies on the dairy should be cultured.
- The most effective management measure is good cow preparation and to keep cows clean and dry, particularly in the dry cow and pre-fresh areas.
- Make sure bedding is clean and dry. Avoid access to ponds, low wet areas, and standing water.

### ***Pasteurella* species**

*Pasteurella* sp. is a Gram-negative bacterium that may, on rare occasion, cause mastitis in individual cows. These organisms are normal inhabitants of the respiratory tract of most animals. How this disease spreads is unknown but allowing calves to suckle may be one source.

*Pasteurella* sp. may cause acute or chronic mastitis. Affected quarters may produce a thick, creamy, yellow secretion with a foul odor. Although when isolated, *Pasteurella* sp. appears susceptible to many antibiotics, infected cows respond poorly to intramammary or systemic antibiotics. Infected cows may require culling or the quarter may need to be dried off.

### **Management**

- Avoid overcrowding and provided comfortable stall areas to avoid teat injuries.
- Milk cows infected with *Pasteurella* sp. last, or with a separate milking unit.
- Cull infected cows or dry-off infected quarters.

### **Proteus Species**

*Proteus* species are Gram negative bacteria that are found in the cow's environment in bedding, manure, feed and water. Generally, *Proteus* species is not a common mastitis pathogen. If this organism is isolated it is generally a contaminant. However, rare infections can occur between milkings when teat ends are in direct contact with contaminated surfaces. However, it has been know to cause mastitis outbreaks. Mastitis due to *Proteus* spp. is often chronic, difficult to cure, and unresponsive to antibiotics. If *Proteus* species are isolated from a quarter sample you must consider how the sample was taken and if this was the only organism isolated. If another organism(s) was isolated it may be a contaminant and not involved in the mastitis process. However, if is the only organism isolated it is probably the mastitis causing agent.

### **Management**

- Maintain clean, dry, well-bedded cow areas.

### **Serratia species**

*Serratia* spp. is a Gram-negative bacteria that is commonly found in soil and water. It is generally a contaminant in the milk sample. However, *Serratia* species may cause clinical mastitis that does not respond well to lactating cow antibiotic treatment. Exposure occurs between milkings when teat ends contact contaminated surfaces. These bacteria may also cause chronic infections lasting several lactations. If *Serratia* species are isolated along with other more common mastitis causing agents it may be a contaminant. However, it is the only agent isolated; it is probably the agent responsible for causing the mastitis in the quarter.

### **Management**

- Maintain clean, dry, well-bedded cow areas.

### **Yeast**

Yeast are microorganisms that are found in a variety of areas such as soil, plants, decaying organic matter, and bedding especially sunflower hulls. Other on-farm sources may be contaminated multi-dose antibiotic or other medication bottles, contaminated syringes and teat cannulae. A primary means by which yeast are spread is by contaminated intramammary infusions where aseptic technique has not been followed. Spread can also be cow-to-cow but is rare. It may occur at milking time when improper procedures or faulty milking equipment is used.

Most cases of yeast mastitis are self-limiting and cows usually return to normal production. Antibiotic therapy should *NOT* be used. Yeast mastitis is not responsive to standard anti-microbial therapy.

### **Management**

- Care during when inserting instrument or antibiotic into the udder. Be sure to disinfect teat ends. Scrub teat ends with alcohol prior to inserting any instrument or antibiotic tube. Use single use treatment tubes only.
- Avoid treatment with multi-dose bottles of medication.
- Change bedding from sunflower hulls to another type.

### **Nocardia species**

*Nocardia* spp. is an organism that is found in the soil, water, grass and on the teat skin. They are NOT a common cause of mastitis. Contaminated intramammary treatments, syringes or cannulae and improper pre-infusion sanitation may spread infection from cow to cow. *Nocardia* spp. can also be spread cow to cow at milking time.

*Nocardia* spp. may cause sub clinical or clinical mastitis with reduced milk production. The udder may have hard nodules or feel woody on palpation. Some quarters may develop draining sores on the side of the gland. Infected cows may develop fevers. *Nocardia* spp. infections do not respond to antibiotic treatment.

### **Management**

- Care during teat disinfection (swabbing teat ends with alcohol) and single use treatment tubes should be used.
- Keep stalls clean and dry and avoid dirt lots.
- Avoid treatment with multi-dose bottles of medication.
- Consult with your veterinarian regarding management of infected cows.

### **Prototheca species**

*Prototheca* is a single cell colorless algae and can be common in the dairy cows environment. They have been isolated from plants, bedding material, soil, mud, ponds and standing water, manure, and water troughs. The most common mastitis producing strain is *Prototheca zopfii*. These organisms may cause acute or chronic mastitis and can become endemic in some herds causing significant losses as a result of eroding milk quality and milk production loss. Clinical signs may be apparent or the infection may remain sub clinical. Affected cows may experience decreased milk production and a watery mammary secretion with flakes and clots. Infections can come from teat end contact with contaminated surfaces during milking or be transferred from cow to cow at milking time. Cows infected with *Prototheca* species are unresponsive to intramammary or systemic antibiotics and may become chronically infected. The risk of *Prototheca* mastitis increases with parity, previous mastitis infection and unsanitary treatment procedures.

### **Management**

- Maintain clean, **dry**, well-bedded cow areas. Limit access to ponds, mud, and other areas with standing water.
- Cows infected with *Prototheca* spp. should be identified, segregated and milked last, or with a separate unit.
- Remove infected cows from the herd.
- Improve sanitation of all treatment and milking procedures.
- Be sure milking system wash cycle temperatures are appropriate and that cleaning is effective as well as consistently done between each milking.

### **Arcanobacterium pyogenes**

*Arcanobacterium pyogenes* is a Gram positive bacterium that is a cause of environmental mastitis which does not respond to therapy. Sources for these bacteria include wounds, abscesses, contaminated bedding material and damaged teat ends. These organisms are frequently spread by flies or by direct teat end contact with a contaminated surface.

Once an infection is established, the prognosis is poor and loss of the quarter is expected. The severe clinical mastitis caused by *A. pyogenes* is characterized by a thick, yellow, foul smelling discharge. Some *A. pyogenes* infected cows cure spontaneously. Some infections are unresponsive to antibiotic therapy.

### **Management**

- Maintain clean, dry, well bedded cow stalls and loafing areas.
- Stalls should be comfortable and overcrowding should be avoided to minimize teat injuries.
- Cull infected cows or dry off infected quarters.
- Milk *Arcanobacterium pyogenes* infected cows infected with a separate unit.
- Establish an effective fly control program.

### **Corynebacterium bovis**

*Corynebacterium bovis* is a Gram-positive bacterium that is rarely found in infected udders and the teat canal normal animals. *Corynebacterium bovis* is spread primarily from cow to cow at milking. These bacteria can cause mild udder infections with a mild increase in somatic cell count and slight reduction in milk production. Rarely do they cause clinical mastitis. An increased incidence of these infections in a herd warrants reassessment of teat dipping procedures and application methods. Most infections are self-limiting and do not require antibiotic therapy.

#### **Management**

- Dry cow therapy will eliminate most *Corynebacterium bovis* infections.

### **Gram positive bacillus**

Gram-positive bacilli are found in soil, water, dust, air, and manure. Since Gram positive bacilli are normally found in the environment, infection, although rare, can result from improper teat end cleaning and sanitation prior to treatment, direct teat end contact with contaminated treatment materials, etc. Mastitis caused by these organisms is infrequent. However, *some* cases may be fatal.

#### **Management**

- Use only single dose intramammary treatment tubes and clean teat ends thoroughly with 70% alcohol prior to infusion.
- Keep the bedding environment clean and dry.

