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Tips With **Goats**. (\*\*products in bold can be purchased here)

Feeding Adult Goats. They are Browsing Ruminants. They prefer leafy foods & need roughage in their diet. Mixed pasture grasses are usual, but goats prefer to browse e.g. blackberries as well Do supplement with pasture hay over-winter and in spring (when fresh clovers can cause bloat). Lucerne hay, especially if first-cut [with leaf & flower] is often too rich, as is paddock hay containing excess clover. Hay can also carry burrs, bracken fern, ragwort etc. Be careful. Concentrates such as sheep or goat pellets should be introduced slowly and with caution.

Goats are fussy eaters, and generally select safe foods BUT they will eat toxic vegetation if it has already been lopped from the tree & is then offered to them. Take care: especially with rhododendrons, azaleas & other introduced garden plants.

Worms: These are a serious problem for all goats, but especially kids, breeding nannies, & any that are tethered. Unlike sheep goats do not develop a tolerance to worms as they age, so lifelong, they may suffer diarrhoea, ill-thrift, breathing problems &/or death. It is possible to have "worm-free" goats, but only if they do not and never have shared pasture or housing with other goats, sheep, cattle or alpaca. We can provide clients with individualized & specific advice on this.

We can assess your stock's worm problem by faecal flotation tests [bring in ½ cup fresh pool.

In general: Drench kids at 3, 9 and 12 weeks and then each 3-4 months life-long, especially in Autumn, Spring, and whenever they enter new pasture. Tethered goats may need drenching each 6-8 weeks. We can determine individual recommendations for clients. Ivermectin-based drenches are recommended. Caprimec (made especially for goats) is available here. New-to-you goats should be drenched ASAP after arrival on your property.

Other Parasites: Lice, bacterial dermatitis, coccidial scours etc. may need to be specifically treated, but note: when present, these may also reflect some other husbandry problem such as malnutrition or inadequate hygiene.

**Vaccination:** "5 in 1" protects goats from Clostridial Disease, including Pulpy Kidney & Tetanus. "6 in 1" also covers Cheesy Gland (important in goats that are to be shorn). Leptospirosis vaccine is also available and should be considered if you live on or near a dairy farm or piggery. Johne's vaccine is recommended also, but does require specified inoculation techniques and recordkeeping [information is available here or from the D.P.I.] For 5-in-1, vaccinate kids at 6 and 12 weeks, then each 6 months.

We can vaccinate your goat for you, and will demonstrate the technique so that you are then able to do it yourself. We on-sell vaccine packs, as well as individual doses.

**Lifespan:** Goat live 8-14 years.

Marking: of horns: at 2-4 weeks

of young males: ring them within a month of birth, if older, they may need surgical castration.

Breeding: Puberty can be as early as 4-5 months. So be careful, sons can impregnate their mum!

Females should not be bred until their 2<sup>nd</sup> year. They cycle each 21 days, especially in Autumn, and are <u>usually</u> sexually guiescent over Winter in Tasmania. They are in oestrus (receptive) for 12-24 hours.

Gestation [Pregnancy] lasts 5 months.

Most will have 2 or 3 kids.

## To Raise an ORPHAN GOAT-KID.

Two Boer kids in our hospital.

Inside, on clean hay, they have a warm-air plastic under-bed and are wearing weather-proof natural wool jerkins.

**Housing.** Should be warm, dry, clean and safe. As from a few days of age they should be let out daily to exercise and to start nibbling leafy pasture.



A first drink of **goat colostrum** within 48 hours of birth is **essential** to provide them with early immunity against disease (After 48 hours the colostrum will be nutritious, but cannot provide immune-protection).

### Diet.

3.

4.

### \*Suitable replacement milks include:

- 1. **Formula One** or similar milk replacements [available here].
- 2. Pasteurised <u>Homogenised</u> Full-Cream cow's milk (from the Supermarket (<u>not</u> straight from a cow, its fat globules are too big for kids to digest. Cows milk must be homogenized before being fed to goats). Do <u>not</u> use skim milk, it does not provide enough sustenance)
  - Goat's milk, which is now available commercially.
  - Calf/Lamb milk replacer (from Stock & Station Agents)

#### **FIRST FEEDINGS**

First feed: Offer pre-boiled water, preferably strengthened with glucose & electrolytes (e.g. Vytrate)

<u>Second feed:</u> (2-3 hours later) 2 parts mixed as for first feed + 1 part milk-replacer\* <u>Third feed</u> (perhaps 5-6 hours later) 1 part mixed as for first feed + 2 parts milk replacer\*

Then: Feed 2-3 times daily Using the full strength milk formula\*

**NOTE:** Don't make sudden changes in a kid's diet. If you need to change the type of milk used, mix the new and old milks together and dilute the mix back to 2/3 strength with pre-boiled water for a few days. If this is not possible, return to "First Feedings" above and gradually accustom the kid to its new diet.

How much to feed? Usually, 250-300ml twice daily. Larger kids may drink more. Do not over-feed. Do not force feed. If they do not drink enough, they probably need 2 or more "top-up" feeds during each 24 hour span

<u>Starting Solids</u> Kids will start to nibble leafy grass or kid/lamb-pellets at a few days of age. From 6-8 weeks, they can go onto once-daily milk feeds and be given an evening meal of milk-replacement-pellets. From 12 weeks, they can be weaned onto good pasture, but they will do best if milk and/or pellets are offered for a further 2-3 months.

Worming & Vaccinations: See page.1.

# **Coping with Goat-Kid Diarrhoea.**

### **Caused by:**

- 1. Not enough colostrum within 24(-48) hours of birth.
- 2. (Dis)stress: e.g. after-effects of a difficult birth; chilling; altered or unsuitable diet; loss of mother; exposure; going through sale-yards or show-ring; transport; non-acceptance by foster mother etc.
- 3. A sudden change of diet.
- 4. Unsuitable milk substitute: e.g. non-homogenised cows-milk; formula mix too concentrated etc.
- 5. Bad feeding methods e.g. head down to drink from a bucket (they often then gulp in too much air, causing colic, discomfort & distress); overfeeding; forc-feeding.
- 6. Bad hygiene
- 7. Contagious microbial enteritis, caught from other kids e.g. Salmonella, E.coli, Coccidiosis.
- **8.** For kids eating pasture ... worms!

Try to identify the cause, correct it, then:

## A. For Kids still alert, active & drinking well:-

Keep them warm & dry.

Go off-milk for 24 hours.

Use an anti-diarrhoeal agent such as **Scourban** for 3-5 days.

Isolate this kid from healthy kids, and maintain hygiene carefully.

For 24 hours, feed a mix of glucose and electrolytes e.g. <u>Vytrate</u>. Offer 250 - 300ml twice daily <u>via a teat</u>, & warmed to about 30 degrees centigrade. A smaller volume offered more often [e.g. 150ml each 6 hours] is even better.

Decide on the milk type you are to use (it must be suitable & available so you need not change it: (see page 2)

On the  $2^{nd}$  day feed a mix of one part milk to one part glucose/electrolyte.

On the  $3^{rd}$  day, 2 parts milk to one part glucose/electrolyte.

Then resume full milk feeds. If scours return, weaken the mix and re-strengthen more slowly.

Please do contact us if scours persist or worsen despite this approach......

#### B. If your Kid is 'flat' (chilled, weak, won't suck, has collapsed):

- 1. <u>Warm the kid</u>: wrap it in a warm dry blanket, bring it inside, near a heater, add a hot water bottle etc. Weak kids have not the energy to keep themselves warm!
- 2. <u>Slowly</u> offer Glucose and Electrolyte mix (<u>Vytrate</u>), warmed to 35 degrees centigrade, making sure the kid has time to swallow. Try to give 40ml per kg kid weight.
- 3. Repeat this each 2 hours until the kid has the strength to suck
- 4. Then continue as for the "alert" kid above.

5.

PLEASE NOTE: If you are unsuccessful, bring the kid in

We can provide all the solutions and equipment you will need, and show you how to cope. We can rehydrate your kid, perhaps by tube-feeding, or with fluids via a subcutaneous or intravenous drip. And we market a "Kid Feeder" that will allow you to safely tube-feed weak kids yourself.

For further advice, phone 6437 1331. All Products mentioned above are available from us.