Item	Test +	Test -	SEM	P-value	P Value From
Morbidity	2.7	7.03	3.0	< .01	Glimmix
Retreat	4.76	0.45	3.4	0.29	Glimmix
Mortality	3.16	1.67	1.2	0.41	Glimmix
In wt.	647	679	50.9	0.66	GLM
Out wt.	1216	1147	36.9	0.22	GLM
DOF	285	227	30.3	0.20	GLM
ADG, lb./d	2.64	2.37	0.16	0.28	GLM
DMI, lb./d	20.10	19.32	1.28	0.67	GLM
FG	7.7	8.12	0.38	0.42	GLM
COG, \$/lb.	.86	.86	0.06	0.92	GLM

The Testing and Removal of Feeder Calves at the Time of Arrival to the Feedlot that are Persistently Infected with Bovine Viral Diarrhea Virus and the Subsequent Outcome on Morbidity, Mortality and Performance

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Abstract

In a previous study we determined the effects of testing and removing cattle persistently infected (PI) with bovine viral diarrhea virus (BVDV) at revaccination (10 - 14 days on feed (DOF)). We found that there were no statistical differences for mortality, retreatment, performance or carcass characteristics. However, we did find morbidity to be statistically different between the two cohorts $(19 \% \text{ for non exposure vs. } 30 \% \text{ for } 10 \% \text{ for non exposure vs. } 20 \% \text{ for non$

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exposure). In light of our previous findings, a new research trial was completed to determine the effect of testing and removing PI-BVDV cattle on arrival to the feedlot and the outcome on health and performance. We found a significant difference in the morbidity of cattle that had no contact (NC) with a PI-BVDV animal and those that did have contact (P < .0001). Cattle that had NC on arrival exhibited an overall morbidity of 7.2 % compared to that of 2.3 % for cattle with contact on arrival. No significant differences were detected between the two cohorts for retreatment or mortality. Additionally, there were no significant differences in performance parameters (end weight, days on feed, average daily gain, dry matter intake, feed to gain, and cost of gain). Although between the two studies there were no differences in mortality, retreatment, and performance with respect to the length of exposure to a PI-BVDV animal, our recent study suggests that testing and removal on arrival may be more effective than testing and removing at revaccination for reducing morbidity during the feeding period.