

# The “Art of Seeing” In Dairy Nutrition

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*The following paper is the collaborative efforts of the Attica Veterinary Associates, a seven person ambulatory practice providing service exclusively to the dairy and beef industry.*

Embodied in the practice’s mission statement is the charge to offer leadership through traditional services and products, while developing areas for independent consultation in dairy management and nutrition. The ultimate goal being to enhance mutual satisfaction and profitability for the clientele and the practice. Breaking away from traditional practice invariably forces one out of one’s comfort zone, however the perspective of this paper is to **see** how this experience may be made less intimidating. Our experiences in this area have been both positive and negative, however we feel confident that if one intends to better serve the industry this is the direction one must take.

The “art of seeing” in dairy nutrition is much akin to the “art” of physical diagnosis. It implies the subjective use of all available faculties to process the various symptoms and signs to arrive at a diagnosis and rational treatment. As the economic crunch of the dairy industry makes traditional “sick-cow” practice less economically feasible, the need to focus more on the cow as a sign of the disease, and view the entire dairy operation as the actual patient, will certainly be evident. Coupled with this is the realization that any consideration of dairy health and performance must encompass dairy nutrition. Dairy cattle health and nutrition should be viewed as two sides of the same coin. While veterinarians have traditionally been recognized as the animal health care specialists, the same cannot be said for their role as nutritionists. The insurgence of qualified non-veterinary dairy professionals to provide the nutritional

services needed by our clients, provides the impetus to adapt, change, or lose market share.

This being said, does it mean that every practitioner must balance rations? Probably not. As many of us have undoubtedly experienced, the learning curve of ration balancing can be frustratingly slow. However, having a computer to generate rations does not necessarily make one a dairy nutritionist, any more than carrying a stethoscope makes one a veterinarian. The quantitative portion of dairy nutrition, the ration, is only part of the science. Equally, if not more crucial, are the qualitative aspects of the discipline. The “art” of it, if you will. Fortunately, they are the same subjective qualities that would provide proficiency as a dairy nutrition consultant specifically, the powers of observation. Successful practitioners tend to be astute observers.

The first step in this transition from practitioner to consultant involves utilizing much of the knowledge and skills one already has, but through an expanded focus. As a traditional practitioner one addresses the concerns and problems as defined by the producer to effect a definitive diagnosis and treatment, thereby satisfying the client. Now take the next step. Seize the opportunity to discuss the significance and consequences of the problem that go beyond the clients’ awareness. Dare to propose cost justifiable intervention, and the role of practitioner merges with that of the consultant. The “art of seeing” in dairy nutrition involves recognizing this opportunity, and **taking the time** to expand the clients’ understanding of the problem and the potential value of our input in resolving it. Consider the following example. One is called to a client for a problem of retained placentas. The client expects the latest insight on antibiotic and hormonal intervention regarding the treatment of this entity. If one stops at that point one satisfies the client’s expectation but makes little in the way of lasting contribution to the operation. However, if one details how a reviewing of the feeding program for the close-up dry cows might decrease the

incidence of retained placentas and improve fresh cow performance, we enhance the client's awareness of our value as consultants. Without necessarily dissecting the specifics of a springer group ration, we can usually decide if feed quality and availability suggest the opportunity for immediate intervention.

Other opportunities depicting how our powers as trained observers can be used to expand our market share as consultants occur on a daily basis. For example, if one sees:

.....a herd with a high incidence of milk fever, is it only an opportunity to sell the latest oral calcium supplements, or the opportunity to discuss current concepts in cation-anion balance with respect to the dry cow feeding program?

.....a herd with severe udder edema and high incidence of coliform mastitis in fresh cows, does it present only an opportunity to market more "J-5" vaccine and diuretics, or should the subject of sodium chloride and potassium levels in the diet fed to the close up dry cows be discussed?

.....a herd with a high incidence of ketosis and displaced abomasum in cows fresh less than 10 days, does it represent the opportunity to market more dextrose and corticosteroids or should it be the impetus for a discussion of preventing body condition loss during the dry period?

.....a herd with a high incidence of ketosis and displaced abomasum in cows fresh 3-4 weeks, does it represent the normal for a high producing herd, or does it represent the opportunity to review adequacy of dry matter intakes and energy density of the fresh cow ration?

.....a herd with a significant portion of 1st lactation heifers with swollen knees and hocks, and general reluctance to move, does this represent the need to investigate a chlamydial arthritis problem, or should it point out the need to critique stall maintenance and adequacy of effective fiber in the diet?

Virtually any metabolic or production disease the practitioner is confronted with opens the door for dis-

cussion regarding appropriate nutritional intervention, as a means of prevention. In each of the above examples, the attending veterinarian has the opportunity to provide a productive nutritional input, without necessarily getting directly involved in ration formulation. Usually, if the practitioner has the interest, and the ration balancing skills are honed, the opportunity to get directly involved with the ration formulation will present itself. For those practitioners who chose not to get intimately involved with the numbers, the opportunity still exists to provide essential feedback to the producer and nutritionist as an unbiased advocate. Providing such consultative services are no less valid than, and at least of comparable value as, traditional diagnosis and treatment.

As prowess and confidence in one's powers of observation in doing nutrition evaluation inevitably increase, so will the opportunity for expanding such services. Quite often the veterinarian/consultant will be called in to render an opinion because of perceived ration failure and reflected in poor herd performance and health. Rarely does quantitative evaluation of the formulated ration reveal any glaring errors. Instead, one typically finds program failure due to inaccurate mixing or improper delivery of the finished product, coupled with limitations of the physical set up which constrains return availability. Success of a feeding program is predicated on having consistent products, accurately combined in the correct proportion to form a ration that is provided and consumed in known amounts. Once it has been ascertained that all of the quantifiable ration components are correct, it becomes necessary to discern the other limiting factors that might be involved in causing poor performance and ration failure. Quite often seemingly subtle problems such as rough bunk surfaces, build up of refused feed products in the mangers, or even inadequate access to feedbunk space or water due to overcrowding or cow traffic problems, can be implicated in significant reduction of dry matter intakes ultimately causing ration failure.

**To the astute practitioner, these problems appear intuitively obvious, however the fact remains that it is these basic qualitative elements of doing nutrition evaluation that seem to go unnoticed or taken for granted by all except those who have acquired an appreciation for "the art of seeing" these things.**