

Mælkeafgiftsfonden

Notat vedr. selektiv goldning på kirtelniveau AP4 2023

I arbejdspakke 4 (AP4) er der arbejdet med at afdække forskere og dyrlægers holdning til selektiv goldning på kirtelniveau, for at få et ansvarligt antibiotikaforbrug og samtidig forholde os til at der meget ofte behandles på kirtler som ikke er inficeret. Der er indledningsvis udarbejdet et survey ved Nordic Mastitis Researchers Meeting august 2022, der dannede basis for det videre forløb. Det blev valgt at anvende Sawtooth Software® til at udarbejde en conjoint analysis, hvor respondenten bliver eksponeret for forskellige kombinationer af svarmuligheder (Bilag 1). Spørgerammen blev udarbejdet i samarbejde med Wageningen University, Bart van Der Borne og professor Henk Hogeweegen. I forbindelse med lancering d. 16-3-2023 med reklame via Facebook og generel opfordring til at deltage som kvægdyrlæge.

På trods af massiv formidling og opfordring til at deltage, var der kun 25 besvarelser hvoraf det kun var en mindre del som var komplette. Vi har efterfølgende evalueret på anvendelse af survey til kvægdyrlæger i arbejdspakken og ikke mindst når besvarelsen var på engelsk. Vi er ligeledes udfordret af, at antallet af dyrlæger der har malkekægt som hovedbeskæftigelse er dalende og generel modvilje mod at deltage i survey.

Da survey blev lukket, blev det derfor diskuteret hvordan man alternativt kunne få dyrlægerne i spil, for at vurderer hvordan man kan formidle implementering af selektiv goldning på kirtelniveau. Vi vurderede at en væsentlig hindring i besvarelse var pga. det var udarbejdet på engelsk, hvorefter vi udarbejdede et nyt baseret på Survey Xact i SEGES-regi der kom online 7-10-2023 og blev afsluttet 15-11-2023.

I bilag 2. ses introduktion og spørgeguide der blev anvendt i det efterfølgende survey. I dette survey var der 34 komplette besvarelser som der danner rammen for videre arbejde i 2024. De indsamlede besvarelser var en kombination af deskriptiv statistik og spørgsmål baseret på en 7-punkt Likerts scale graduering, der har til formål at vurderer enighed i de opstillede udsagn. Yderligere er der i forbindelse med besvarelse mulighed for at tilføje kommentar i slutningen af survey, som har givet en række fokusområder der bliver arbejdet videre med i forbindelse med formidling.

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Husdyr

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	A	B	C	D	E	F
1	ACBC Counts Report Results Summary					
2	Study Name: SelektivGoldning					
3	Exercise Name: ACBC					
4	Results File:C:\Users\mifa\AppData\Local\Temp\ACBC_counts.csv					
5						
6	Selections in BYO Section					
7						
8		Frequency	Base	Percent		
9						
10	Sample Size	11	11	100,00		
11						
12	[%ToolTip("Management","Do you think management of SQDCT will be more complicated when selecting quarters, or no change in management!")%]					
13	More management intensive	7	11	63,64		
14	No change in management	4	11	36,36		
15						
16	[%ToolTip("Cost","You can have a up front saving at 9 Euro (three tubes), no change in cost or a increased cost due to more dry period mastitis!")%]					
17	Cost saving (9 Euro per cow)	7	11	63,64		
18	No change	3	11	27,27		
19	Cost increase (34 Euro per cow)	1	11	9,09		
20						
21	[%ToolTip("Antimicrobials","How much reduction in consumption do you at least want before turning to QDCT?!"%)]					
22	Decrease consumption (1 tube at dry off)	3	11	27,27		
23	Substantial decrease (3 tubes per dry off)	8	11	72,73		
24						
25	[%ToolTip("Early lactation mastitis 0-30 days post partum","Can you accept a change in dry period mastitis as a consequence of implementing QDCT?")%]					
26	No change	3	5	60,00		
27	Slight increase (2 cases per 100 cows calvings)	2	5	40,00		
28	Increase (4 cases per 100 cows calvings)	0	5	0,00		
29						
30	Number of Concepts Marked "A Possibility" in Screener Section					
31						
32		Frequency	Base	Percent		
33						
34	Sample Size	11	11	100,00		
35						
36	0	0		0,00		
37	1	0		0,00		
38	2	0		0,00		
39	3	1		9,09		

	A	B	C	D	E	F
40	4	1		9,09		
41	5	3		27,27		
42	6	0		0,00		
43	7	1		9,09		
44	8	0		0,00		
45	9	1		9,09		
46	10	3		27,27		
47	11	1		9,09		
48	12	0		0,00		
49	13	0		0,00		
50	14	0		0,00		
51	15	0		0,00		
52	16	0		0,00		
53	17	0		0,00		
54	18	0		0,00		
55	19	0		0,00		
56	20	0		0,00		
57	21	0		0,00		
58	22	0		0,00		
59	23	0		0,00		
60	24	0		0,00		
61						
62	Must Have Report from Screener Section					
63						
64		Frequency	Base	Percent		
65						
66	Sample Size		11	11	100,00	
67						
68	[%ToolTip("Management","Do you think management of SQDCT will be more complicated when selecting quarters, or no change in management!")%]					
69	More management intensive	0	11	0,00		
70	No change in management	0	11	0,00		
71						
72	[%ToolTip("Cost","You can have a up front saving at 9 Euro (three tubes), no change in cost or a increased cost due to more dry period mastitis!")%]					
73	Cost saving (9 Euro per cow)	0	11	0,00		
74	No change	0	11	0,00		
75	Cost increase (34 Euro per cow)	0	11	0,00		
76						
77	[%ToolTip("Antimicrobials","How much reduction in consumption do you at least want before turning to QDCT?!"%)]					
78	Decrease consumption (1 tube at dry off)	0	11	0,00		

	A	B	C	D	E	F
79	Substantial decrease (3 tubes per dry off)	0	11	0,00		
80						
81	[%ToolTip("Early lactation mastitis 0-30 days post partum","Can you accept a change in dry period mastitis as a consequence of implementing QDCT?")%]					
82	No change	0	5	0,00		
83	Slight increase (2 cases per 100 cows calvings)	2	5	40,00		
84	Increase (4 cases per 100 cows calvings)	0	5	0,00		
85						
86	Number of "Must Have" questions in Screener Sectio	2				
87						
88	Unacceptable Report from Screener Section					
89						
90		Frequency	Base	Percent		
91						
92	Sample Size	11	11	100,00		
93						
94	[%ToolTip("Management","Do you think management of SQDCT will be more complicated when selecting quarters, or no change in management!")%]					
95	More management intensive	0	11	0,00		
96	No change in management	0	11	0,00		
97						
98	[%ToolTip("Cost","You can have a up front saving at 9 Euro (three tubes), no change in cost or a increased cost due to more dry period mastitis!")%]					
99	Cost saving (9 Euro per cow)	0	11	0,00		
100	No change	0	11	0,00		
101	Cost increase (34 Euro per cow)	0	11	0,00		
102						
103	[%ToolTip("Antimicrobials","How much reduction in consumption do you at least want before turning to QDCT?!")%]					
104	Decrease consumption (1 tube at dry off)	0	11	0,00		
105	Substantial decrease (3 tubes per dry off)	0	11	0,00		
106						
107	[%ToolTip("Early lactation mastitis 0-30 days post partum","Can you accept a change in dry period mastitis as a consequence of implementing QDCT?")%]					
108	No change	0	5	0,00		
109	Slight increase (2 cases per 100 cows calvings)	0	5	0,00		
110	Increase (4 cases per 100 cows calvings)	2	5	40,00		
111						
112	Number of "Unacceptable" questions in Screener Sec	3				
113						
114	Composition of "Winning" Concept from Choice Tournament Section					
115						
116		Frequency	Base	Percent		
117						

	A	B	C	D	E	F
118	Sample Size	11	11	100,00		
119						
120	[%ToolTip("Management","Do you think management of SQDCT will be more complicated when selecting quarters, or no change in management!")%]					
121	More management intensive	4	11	36,36		
122	No change in management	7	11	63,64		
123						
124	[%ToolTip("Cost","You can have a up front saving at 9 Euro (three tubes), no change in cost or a increased cost due to more dry period mastitis!")%]					
125	Cost saving (9 Euro per cow)	9	11	81,82		
126	No change	1	11	9,09		
127	Cost increase (34 Euro per cow)	1	11	9,09		
128						
129	[%ToolTip("Antimicrobials","How much reduction in consumption do you at least want before turning to QDCT?!")%]					
130	Decrease consumption (1 tube at dry off)	2	11	18,18		
131	Substantial decrease (3 tubes per dry off)	9	11	81,82		
132						
133	[%ToolTip("Early lactation mastitis 0-30 days post partum","Can you accept a change in dry period mastitis as a consequence of implementing QDCT?")%]					
134	No change	4	5	80,00		
135	Slight increase (2 cases per 100 cows calvings)	1	5	20,00		
136	Increase (4 cases per 100 cows calvings)	0	5	0,00		

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Selective DCT at quarter level with responsible consumption of antibiotics

From a research point of view, with your experience in udder health and mastitis, please write your thoughts on the pros and cons of selective DCT.

Background information about expert

Gender:

Female

Male

Years of experience with mastitis research:

< 2 years

2-5 years

6-10 years

>10 years

Time spent on mastitis work (yearly):

< 50 % of my work

≥ 50 % of my work

Majority of work are within (one X is allowed):

Udder health consulting

Diagnostics

Microbiology

Epidemiology

Modeling

Technical issues

Other _____

Pros concerning selective DCT in general – please write in bullets:

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Cons concerning selective DCT in general – please write in bullets: