

SHEEP LOCOMOTION SCORING

Locomotion scoring helps to identify lame sheep and note the severity of the disease. It is a useful tool to assess the proportion of lame sheep within the flock at a particular time i.e. the prevalence, as well as the progress of treatments.

HOW TO LOCOMOTION SCORE

- Locomotion scoring is best carried out by observing sheep walking in an open field, undisturbed. Sheep are less likely to show lameness when stressed.
- Avoiding gathering sheep will also reduce the risk of spreading infection.
 TIP: When moving sheep in rotational grazing systems lame sheep can be held back and isolated in the previous field; this creates a separate lame group to target treatment and prevent infection spread.
- Where possible ensure the same person performs all scoring, to minimise variation in results and improve consistency.
- It can be challenging to spot mildly lame sheep, but lameness can develop quickly so it is important to identify these animals and treat promptly.

Work with your veterinary advisor to determine the best way to carry out locomotion scoring on your farm.

Working through the 5 Point Plan (5PP) can identify your farm's areas of strength and weakness.

Identify, record and treat early.

Even mild disease can be significant.

Record lame sheep:

- Tag no.;
- Electronic ID;
- or use coloured ties over ear tags to identify previously lame/treated sheep.

Please refer to the University of Liverpool website for videos and tips on how to locomotion score sheep using the scorecard below: www.liverpool.ac.uk/infection-and-global-health/research/codd/locomotion-scoring



0 (SOUND)

Bears weight evenly on all four feet. Walks with even rhythm.

LAMENESS SEVERITY SCORECARD

1 (MILDLY LAME)

Uneven steps. Unclear which limb(s) affected.

2 (MODERATELY LAME)

Uneven steps. Stride may be shortened. Affected limb(s) are readily identifiable.

3 (SEVERELY LAME)

Severely compromised mobility. Sheep frequently stops or lies down. Obvious discomfort.

HOW TO USE THE CHART OVERLEAF

- Record all lame sheep and the severity of lameness as per the scoring system.
- Tally the total number of sheep in each group.
- Use the equation at the bottom to calculate lameness prevalence.
- Sheep should be inspected daily for lameness; but aim to perform locomotion scoring regularly to gauge the prevalence, level of severity within the flock and the progress of treatment programmes in place.
- This will help to formulate strategies, to identify outbreaks earlier, tackle longer-term lameness challenges and evaluate interventions.

SHEEP LOCOMOTION SCORE CHART

FARM NAME:		DATE:
	100	
SCORER NAME:		TOTAL NO. SHEEP

SCORED:

Group/Field/Flock (i.e. ewes, ewes and lambs, rams etc.)	SCORE 1 (MILD)	SCORE 2 (MODERATE)	SCORE 3 (SEVERE)	TOTAL LAME (Score 1-3)	TOTAL in the group	% LAME (Prevalence)	
				201 - Eagle - 194			
Lameness Prevalence % = <u>Total Lame x 100</u> Total in Group							

Additional information:

• The Farm Animal Welfare Council (FAWC) have set a target of reducing sheep lameness to less than 2% in UK flocks. This will be achieved by adopting the Five Point Plan. More information on the 5PP can be found at: https://www.faifarms.com/lameness5pointplan/

• Angell, J.W., et. al. (2015). A Practical Tool For Locomotion Scoring in Sheep: Reliability When Used by Veterinary Surgeons and Sheep Farmers. Veterinary Record, 176: 521 https://www.liverpool.ac.uk/infection-and-global-health/research/codd/locomotion-scoring/

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Footvax[®] contains antigens from 10 serotypes of *Dichelobacter nodosus* and is indicated for the active immunisation of sheep as an aid to the prevention of footrot and reduction of lesions of footrot. **POM-VPS**.

Further information is available from the SPC, datasheet or package leaflet. MSD Animal Health UK Limited. Registered office Walton Manor, Walton, Milton Keynes MK7 7AJ, UK. Registered in England & Wales no. 946942. Advice should be sought from the medicine prescriber. Use Medicines Responsibly. Copyright © 2023 Merck & Co., Inc., Rahway, NJ, USA and its affiliates. All rights reserved.

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