

1 **Attaining and Retaining Small Ruminant Clients**

2 Dr. Kayleigh M. Marinac-Prudente, DVM

3 KMP Farm Vets, PLLC - Owner/Veterinarian

4

5 **Abstract**

6 The purpose of this presentation is to aid bovine practitioners and clinic owners in expanding  
7 their practice to include small ruminant clients as well as how to service them to keep them as  
8 returning and valued clients. We will review what makes small ruminant clientele as well as the  
9 animals themselves, different to cattle clients and patients.

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11 **Keywords:** small ruminant clientele, SEO, small ruminant, sheep, goat, differences between  
12 cattle and goats

13

14 **State of the Industry**

15 There are a lot of clients that are in desperate need of small ruminant care. This industry is  
16 incredibly diverse and dynamic. The kinds of people who choose to own sheep and goats use  
17 them in a great variety of ways; milk, meat, fiber, packing, weed management, education, show,  
18 breeding, sale, exhibition, as well as pets. The nature of small ruminants make them a great  
19 option for people who want a taste of farming with low input or low cost. They are smaller, eat  
20 less, take up less space, and are generally cheaper to acquire. There has been a large surge of  
21 sheep and goat ownership over the last 10 years that is trending towards pets. Millennials seeking  
22 that “homestead” lifestyle, as well as social media, has increased their popularity, especially  
23 since Covid.

24

25 Word of mouth or referrals from other clients is the most common way clients find clinics.

26 Social media, online message boards, blogs, and member groups allow for small ruminant  
27 owners to gather and share advice quickly. These clients rely on the internet to aid them in the  
28 care and management of their animals.

29

30 While online communities that are open and caring are valuable, it can also come with  
31 misleading information and dangerous advice. Owning and caring for small ruminants is very  
32 individual. From the various uses, to the dramatic differences in breeds, and then also  
33 considering the microenvironment of each individual farm, and various outside obligations these  
34 clients may have (kids, full-time jobs, other animals, etc.) each individual farm and owner has  
35 different needs and going to the internet for generic advice can lead to difficulties.

36

37 There is also a general distrust from some older or more experienced owners with veterinarians.

38 The veterinary curriculum is dense and difficult, with the majority of material being focused on  
39 small animal companions, horses, and cattle. It is no secret that small ruminants - sheep, goat,  
40 camelids and cervids - are not a main priority for graduating veterinarians and vet school faculty.

41 As well, there is less economic impact of sheep and goat industries on the economy. Less people

42 in the USA and Canada eat sheep and goat meat and milk products, as well as being worth less in

43 general per animal. This does create a frustrating gap in research in procedures and

44 pharmaceuticals that can be used in small ruminant medicine and surgery.

45

46 So that puts the industry at a crossroad. We have clients who demand quality medicine from  
47 practitioners who have to be self motivated to learn these species, while having very few  
48 resources to guide them, and keep it low cost. It is no wonder many clinics have decided to move  
49 away from small ruminant practice to conserve their resources, time, and mental strength to  
50 cattle, equines, and small animals.

51  
52 However, if we want to see the lives of our sheep and goat friends improved, as well as continue  
53 to nurture the agriculturalists of the future, we need to have individuals who are self-motivated  
54 and curious enough to go against the grain and pursue these patients with as much support as  
55 possible. Plus, this is a largely untapped industry with opportunities to increase your clientele  
56 without having to increase your practice area.

#### 58 **Small Ruminant Client Survey (Unpublished)**

59 Through a self-written survey, I was able to reach a very small group of small ruminant clients  
60 (n=42) from Eastern and Mid-West USA to ask their anonymous opinion on their experiences  
61 with small ruminant veterinarians. I believe there is a greater need for research into this area so  
62 that we can glean insight into how to service these clients better and what veterinarians can do to  
63 support this industry without burning out.

64  
65 The main takeaways of the survey showed that clients are hungry for knowledge, they want more  
66 veterinarians in the industry, and to me offered similar services as those offered to cattle and  
67 horses. They want affordable care, as well as mobile service with veterinarians that care about  
68 their animals. These clients are frustrated by the law changes regarding prescription medications,

69 and believe this greatly hurts “small farms and homesteads”. They are frustrated that  
70 veterinarians who like, know about, and are willing to treat small ruminant patients are few and  
71 far between. What they do offer is deep gratitude for those of us who show up. They want to  
72 build solid VCPRs and want their concerns to be heard.

73

#### 74 **Getting Seen**

75 Your clinic’s online presence and social media interactions are important. Not just to be fun and  
76 cute, but to be “googlable”. SEO is key to being successfully found when clients are trying to  
77 find a vet. This is also why they get frustrated and turn to the message boards and owner groups.  
78 They can’t find us online. Word of mouth and referrals from trusted colleagues are how the  
79 majority of clients get a clinic's name and number. Clients use very different terminology than  
80 veterinarians do. Even the word “ruminant” is vastly not understood. Practitioners who are  
81 interested in increasing the number of small ruminants they see should acknowledge these facts  
82 and implement changes into their website and social media posts. Include words like “goat or  
83 sheep vet” or “pet sheep and goats”.

84

85 Retaining small ruminant clients can also be a challenge to a practitioner who may not have  
86 confidence in their abilities to handle small ruminant cases. While clients want vets who know  
87 about sheep and goats, vets want clients who know about how to care for sheep and goats. Client  
88 education is hugely important but is harder to “bill for” and therefore is often neglected. The  
89 diversity of the industry makes it difficult to make generic recommendations for all farms/cases.  
90 What works in one part of the world, does not mean it is appropriate for this farm.

91

92 **What is different about Small Ruminant medicine vs Cattle?**

93 Small ruminants are not just small cows. While being a ruminant is similar, there are many  
94 differences that clinicians who are unfamiliar should take into consideration. This list is not  
95 exhaustive, but includes some of the obvious and relevant differences.

96

97 1. Use of Extra-Label Drug Use (ELDU)

98 2. More “pet” potential

99 3. Disbudding very early and castration much later

100 4. Risk of urinary calculi

101 5. Parasite management

102 6. Seasonal breeding (Long day breeders)

103 7. Larger litters and shorter gestations

104

105 The largest hurdle from moving between bovine medicine to small ruminants is the severe lack  
106 of drugs on label for sheep, and even fewer for goats. As food animal veterinarians, we have an  
107 obligation to adhere to strict safe milk and meat practices, and pride ourselves on being the  
108 liaison between safe food and healthy animals. Goats and sheep are considered food animals in  
109 the US. With that distinction comes severe penalties to finding drug residues in the human food  
110 chain. With so few drugs on label, we must rely on research, FARAD, and our peers to guide us  
111 on ELDUs that are safe and effective, and attempt judicious use, of not only antibiotics, but of all  
112 our medications.

113

114 Given that fact, these species are often being “used” as companions and pets. Clients have the  
115 best intentions of never having these animals go to the food chain, or even treated any less than a  
116 member of the family. However, we dance a razor thin line between doing our best medicine,  
117 keeping our actions legal, keeping clients happy, and consumers safe. The best way to attempt to  
118 handle these situations is with documentation, excellent ID management, and client education.  
119 We should not let our clients bully us into uncomfortable situations, but it is easy to sympathize  
120 with people over beloved pets.

121  
122 Disbudding of goat kids occurs much earlier in life (between 5 and 14 days of life). These kids  
123 have much smaller body weights, thinner skulls, but an increased sensitivity to our sedatives and  
124 blocks. This makes this procedure more risky and in need of an experienced facilitator. There has  
125 actually been some excellent research that has been dedicated to this particular subject leading  
126 the AASRP to post specific guidelines on this, and some other “welfare” based topics. The  
127 guideline outlines the use of cauterization (hot iron) disbudding between 5 - 14 days of age, following  
128 at least 2 of the 3 following methods of pain reduction; oral meloxicam at 1 mg/kg once, a two-  
129 point corneal nerve block or ring block with lidocaine diluted 1:1 with sterile water, and sedation  
130 of clinician’s preference.

131  
132 There is also a higher risk of urinary calculi causing urinary blockage in male small ruminants.  
133 These cases bring poor prognosis because of the chronic nature of them as well as the anatomy  
134 of the male ruminant reproductive system. The medical intervention or surgical correction are  
135 time consuming, expensive, and do not guarantee that reblocking or euthanasia will not still be  
136 the end result. As well as being difficult to manage on a farm. Veterinary surgeons have moved

137 away from perineal urethrostomy and are more likely to suggest tube cystotomy. The nature of  
138 the “pet” lifestyle and diet have been blamed for causing a 4 x risk to these pets over other small  
139 ruminant patients.

140

141 Parasite management is also a very large topic in small ruminant management, and may be one  
142 of the largest areas of misconception and frustration from owners. Barber pole worm  
143 (*Haemonchus contortus*) and menigeal worm (*Parelaphostrongylus tenuis*) are the two major  
144 areas of concern. There is not only individual animal susceptibility, but geographical difficulties  
145 with these parasites and their ever growing resistance to our antihelenthics. The small ruminant  
146 community have been pursuing alternative methods to chemical dewormers in an effort to keep  
147 the upper hand on these parasites. There has been promising research in pasture rotation, sericea  
148 lespedeza species of grass, and fungal nutritional additives. More information regarding these  
149 methods can be found on the American Consortium for Small Ruminant Parasite Control  
150 website.

151

152 The last major difference from cattle medicine that will be addressed here is the reproductive  
153 differences between cattle and sheep/goats. These species are long-day seasonal breeders as well  
154 as have shorter gestation periods. The fetal growth in the third trimester plus the higher  
155 likelihood of multiple fetuses, puts small ruminants at risk of pregnancy toxemia, ketosis, during  
156 gestation instead of leaving the greatest risk to be post-partum like in cattle. C-sections are  
157 technically the same except the dramatic friability difference in the uterus of the sheep or goat.  
158 Dystocias can be nearly impossible to correct due to the very small size of the doe/ewe as well as  
159 the increased friability of the uterus.

160

161 **Conclusion**

162 While this presentation only scratches the surface as to the nuances between bovine and  
163 ovine/caprine practice, we have covered some common topics that this author believes are “must  
164 knows” before setting foot on a clients farm. The industry is in dire need of more veterinarians  
165 that are not only trained in small ruminant medicine and surgery, but are enthusiastic about it.  
166 Clinics and practitioners should be considering whether it is possible for them to open their truck  
167 doors to small ruminants as a way to meet the needs of these animals and to support the  
168 communities in which we live.

169

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