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Authors: Saskia Bloemhof, Gerben de Jong, Yvette de Haas

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1	Genetic parameters for clinical mastitis in the first three lactations of Dutch
2	Holstein cattle
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5	Saskia Bloemhof ^{1,2, †,*} , Gerben de Jong ¹ , Yvette de Haas ¹
6	
7	¹ NRS, Animal Evaluation Unit, P.O. Box 454, 6800 AL Arnhem, The Netherlands
8	² Animal Breeding and Genomics Centre, Wageningen University, P.O. Box 338,
9	6700 AH Wageningen, The Netherlands
10	
11	[†] Present address:
12	IPG, Institute for Pig Genetics B.V., P.O. Box 43, 6440 AA Beuningen, The
13	Netherlands
14	
15	* Corresponding author:
16	E-mail address: Saskia.Bloemhof@ipg.nl (S. Bloemhof)
17	Tel.: +31-24-677 9999
18	Fax: +31-24-677 9800
19	

19 Abstract

20

The first breeding value for udder health of a bull is based on the performance 21 22 of his daughters in their first lactation. However, clinical mastitis (CM) is not a problem in first lactation only. Therefore, the objective of this study was to estimate 23 genetic parameters for CM and somatic cell count (SCC) for the first 3 lactations of 24 Dutch Holstein cattle. Data from 250 Dutch herds recording CM were used to 25 quantify the genetic variation of CM in parity 1, 2, and 3, respectively. The dataset 26 contained 35,379 lactations from 21,064 animals of different parities. Test-day SCC 27 was available from all lactations. Somatic cell counts were log-transformed to somatic 28 cell scores (SCS) and averaged over test-day records between 5 and 335, 5 and 150, 29 30 and 151 and 335 days in milk. Variance components for CM and SCS were estimated using a sire-maternal grandsire model. The heritability for CM was approximately 3% 31 in all parities. Genetic correlations between CM in consecutive lactations were high 32 33 (0.9), but somewhat lower between parity 1 and 3 (0.6). All genetic correlations between CM and SCS were positive, implying that genetic selection on lower SCC 34 will reduce CM-incidence. Estimated genetic correlations were stronger for SCS in 35 the first half of lactation than in the second half of lactation. Selection indices showed 36 that most progress could be achieved when treating CM in parity 1, 2, and 3 as 37 different traits and by including SCS between 5 and 150 days in the udder health 38 index. 39

40 Keywords: clinical mastitis, somatic cell count, genetic parameters

41 **1. Introduction**

42

Clinical mastitis (CM) is one of the major diseases in Dutch dairy herds. It is
characterized by visible signs such as clots and flakes in the milk (Hamann, 2005),
and possibly decreased milk production, swelling of the udder, pain of the quarter,
and an increased body temperature (Smith and Hogan, 1993; Harmon, 1994).

Risk of CM is affected by a number of factors such as pathogenicity of microorganisms, management factors like treatment and prevention strategies (Schukken et al., 1997), conformation and immunological performance of the cow, and genetic predisposition of the cow. This makes genetic selection a strategy to reduce the incidence of CM. The advantage of reducing CM by breeding is that it results in a permanent change in the genetic composition of the dairy herd (Shook, 1989).

Breeding for increased resistance to CM can be performed in three ways, i.e. 53 by direct selection against CM, by indirect selection using indicator traits, or by a 54 55 combination of both. For direct selection, CM needs to be measured on the cow or her relatives. Heritability of CM is generally below 0.05 when estimated with linear 56 models (Mrode and Swanson, 1996; Heringstad et al., 2000). Direct selection to 57 reduce the incidence of CM is used in Scandinavia (Norway, Sweden, Finland, and 58 Denmark). In most other countries, cases of CM are not recorded. Therefore, indirect 59 60 selection needs to be performed using traits that are genetically correlated to CM. Somatic cell count (SCC) is the trait that is most commonly used for indirect selection 61 (Rupp and Boichard, 1999; Heringstad et al., 2000; Carlén et al., 2004). Heritability 62 63 estimates of SCC or especially of log transformed SCC are around 0.10 (De Haas et al., 2003; Carlén et al., 2004; Ødegård et al, 2004). The genetic correlation between 64

SCC and CM is moderate to high, ranging from 0.2 to 0.7 (Rupp and Boichard, 1999;
Carlén et al., 2004; Koivula et al., 2004).

The first breeding value for udder health of a bull is based on the performance 67 of his daughters in their first lactation. However, CM is not a problem in first lactation 68 only (Carlén et al., 2004). Actually, both frequency of CM (Pösö and Mäntysaari, 69 1996), and level of SCC (Reents et al., 1995) increase with increasing parity. Genetic 70 correlations between CM in the first 3 parities, estimated using linear sire models, 71 vary from 0.67 to 0.92 (Pösö and Mäntysaari, 1996; Carlén et al., 2004). When using 72 73 multivariate threshold models, the range of estimates of genetic correlations between parities is even broader, ranging from 0.42 to 0.91 (Heringstad et al., 2004; Zwald et 74 al., 2006). These studies have been performed in Scandinavia and the United States. 75

In the Netherlands, the breeding goal is to improve resistance against CM in 76 parity 1, 2, and 3. However, cases of CM are currently not routinely recorded in 77 management information systems (MIS) in the Netherlands. Therefore, selection is 78 79 based on an udder health index, which includes the following indicator traits: SCC, udder depth, fore udder attachment, teat length, and milking speed (NRS, 2005). In 80 the current Dutch udder health index CM has been treated as the same trait in parities 81 1, 2 and 3. However, several authors suggest that CM in different parities is a 82 different trait (Pösö and Mäntysaari, 1996; Carlén et al., 2004; Heringstad et al., 83 84 2004). So far, SCC averaged over 3 lactations has been used in the Dutch udder health index, but several studies have shown that the incidence of CM is much higher in the 85 first half of lactation than in the second half (Emanuelson et al., 1988; Barkema et al., 86 1998; De Haas et al., 2002). Therefore, the hypothesis is that SCC in the first half of 87 lactation is more informative as a mastitis-indicator than SCC in the second half of 88 lactation or SCC throughout the whole lactation. 89

90	The aims of this study were: (1) to estimate genetic parameters for CM for the
91	first three lactations of Dutch Holstein cattle; (2) to correlate CM with SCC, where
92	SCC is averaged over the first half, the second half, and the whole lactation; and (3) to
93	estimate accuracy of selection for different indices to improve resistance against CM
94	in parity 1, 2, and 3.
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97	2. Materials and Methods
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99	2.1. Available data
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101	Records on CM treatments were available from MIS on 307 Dutch dairy
102	farms. Data recording was done on a voluntary basis and was performed by the
103	farmers. Data on CM were recorded from June 1998 until May 2006. All herds
104	participated in the national milk recording system. The NRS (Arnhem, The
105	Netherlands) provided the complete history of the milk production recordings (MPR)
106	from all animals that participated in the study. A record included an animal
107	identification number, herd number, date of calving, parity, date of MPR, MPR yields
108	(kilogram milk, fat percentage, and protein percentage) and SCC (in 1,000 cells per
109	ml). A pedigree file of all participating animals was available and contained their
110	ancestry of approximately 110,000 animals (about 88,400 animals and 12,600 bulls)
111	back to 1919. Record also included date of birth and breed of the animal. Breed was
112	subdivided into three main contributing breeds, with each having up to nine classes (0,
113	1/8,, 8/8) depending on the degree of contribution. The main breeds were Holstein-
114	Friesian, Dutch-Friesian, and Meuse-Rhine-Yssel.

115

116 2.2. Data editing at farm level

Observations from farms without any case of CM were removed. It was assumed that 117 when no cases of CM were recorded, the farmer was not using the MIS for 118 registration of CM. For each farm, data were included from animals that had calved at 119 least half a year after the first case of CM was registered on that farm. It was assumed 120 that a farmer needed this period of six months to learn to use the MIS consistently. 121 This was confirmed by incidence profiles, which showed that the incidence of CM per 122 123 farm was very unstable in the first six months after installing the MIS. After that period, the incidence of CM stabilized. All test-days that were recorded later than 28 124 days after the last recorded case of CM on a farm were removed. 125

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127 *2.3. Data editing at lactation level*

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129 Clinical mastitis was defined on a lactation basis (between 1 and 335 DIM) as 130 an all-or-none trait; either an animal had CM in a certain lactation (1) or she did not 131 (0). Therefore, only the first cases of CM per lactation were included in the dataset 132 (CM1, CM2 and CM3 for clinical mastitis during parity 1, 2, and 3, respectively).

The data were edited using the following inclusion criteria: (1) age at calving ≥ 640 days; (2) parity ≤ 3 ; and (3) observations on cell count available between 5 and 335 days in milk (DIM). All animals with less than 75% Holstein-Friesian were excluded. Animals with unknown parents and daughters from sires with less than three daughters in the dataset were also removed.

Somatic cell count was transformed to somatic cell score (SCS):
 1000+100*(²log(SCC/1000)). Test-day SCS were averaged per lactation from 5 up to

335 DIM, from 5 up to 150 DIM, and from 151 up to 335 DIM (SCS5-335, SCS5-150

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150 2.4. Statistical analyses

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ASREML (Gilmour et al., 2002) was used to estimate variance components. Heritabilities were estimated in univariate analyses using a linear mixed model for CM1, CM2, CM3, SCS5-335, SCS5-150, and SCS151-335. The model included random effects for sire and MGS. The model used was:

156

157
$$Y = \mu + \text{fixed effects} + S_{\text{sire}} + \frac{1}{2}S_{\text{mgs}} + e$$

158

The random sire effect was identified by the subscripts for sire and MGS; S_{sire} and S_{mgs}, respectively. The sire effects were linked using the relationship matrix, and were assumed to be normally distributed with var($S_{sire \text{ or } mgs}$) = σ^2_s . For the CM-traits, fixed effects included were an interaction between herd and year of calving (948 classes) and month of calving (12 classes). Age at calving (in days) was included in the model

as a fixed continuous effect. For the SCS-traits, a repeatability model was used and
therefore parity (3 classes) was included in the fixed effects.

Bivariate analyses were carried out to estimate correlations between CM and SCS-traits. Fixed effects included the interaction of herd and year of calving (948 classes) and month of calving (12 classes). Age at calving (in days) was included in the model as a fixed continuous effect. For the SCS-traits, parity (with 3 classes) was added as fixed effect. Animals with missing values for one of the two traits were still included in the bivariate analyses.

Genetic parameters were calculated from the estimated variance components. The additive genetic variance was calculated by multiplying the sire variance by 4. The phenotypic variance (σ^2_p) was the sum of the sire variance multiplied by 1.25, where 1.25 was included because MGS was fitted in the model separately, plus the residual variances. Division of the additive genetic variance by the phenotypic variance resulted in the heritability. Genetic, phenotypic, and error correlations were estimated using the corresponding variances and covariances.

The breeding goal in the Netherlands is to select for an improved resistance 179 against CM in parity 1, 2, and 3. Accuracies of several selection indices were 180 calculated for this breeding goal (Hazel, 1943; Van der Werf, 2006). The selection 181 indices consisted of the same traits as the current Dutch udder health index (i.e. SCS 182 averaged over first 3 lactations, udder depth, fore udder attachment, teat length, and 183 milking speed). Table 1 lists the genetic parameters that are currently used. In the 184 Dutch udder health index, CM in parity 1, 2, and 3 has been considered as the same 185 trait (Table 1). To test if including parity-specific CM in the breeding goal increases 186 accuracy of selection, overall CM (Table 1) was replaced by CM1, CM2, and CM3. 187 The genetic correlations used between the 3 CM-traits were those estimated in our 188

study. The genetic correlations with the other traits in the index were assumed to staythe same as used in the current Dutch udder health index (Table 1).

To test if the accuracy of selection could be improved and to test which SCS 191 trait would be genetically most informative as mastitis-indicator, the cell count trait 192 (Table 1) was replaced by SCS5-335, SCS5-150 or SCS151-335. The genetic 193 correlations between cell count traits and parity-specific CM traits were those 194 estimated in our study. Genetic correlations with the other traits in the index were 195 assumed to stay the same as used in the current Dutch udder health index (Table 1). 196 197 Comparisons were made between sires with 100 or 10,000 daughters, i.e. young versus proven bulls. 198

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200

201 **3. Results**

202

203 *3.1. Descriptive analyses*

204

Across parities, milk production of mastitic animals was 0.6 kilograms higher than the milk production of the healthy animals, and fat percentage for mastitic animals was lower for healthy animals (Table 2). The differences in protein percentage between mastitic animals and healthy animals were small. Somatic cell count was highest for mastitic animals. The largest difference between the SCC of mastitic compared to healthy animals was seen in parity 3 (Table 2).

The mean proportion of animals that had CM at least once during lactation was 15.8%, and was lowest for heifers (13.4%) and highest for third parity cows (19.6%). Of all second parity cows 16.1% experienced CM at least once during

214	lactation. The proportion of heifers with CM increased rapidly up to 50 DIM (Figure
215	1). Half of all first cases of CM in heifers occurred before 10 DIM, whereas half of
216	the total proportion of 2nd and 3rd parity cows with CM was approached around 70
217	DIM. Before 150 DIM, 75% of all first cases of CM had occurred.
218	
219	3.2. Genetic parameters for clinical mastitis
220	
221	The heritabilities for CM in parity 1, 2, and 3 were all around 3% (Table 3).
222	The genetic correlations between CM in consecutive parities were high ($\approx 0.9 \pm 0.1$),
223	but lower between parity 1 and 3 (0.6 ± 0.2) .
224	
225	3.3. Genetic correlations between clinical mastitis and somatic cell count
226	
227	The genetic correlations between CM and lactation-average SCS were 0.8 (\pm
228	0.1) in parity 2 and 3 (Table 4), but somewhat lower in first parity (0.6 ± 0.1). Even
229	stronger genetic correlations were estimated for SCS in the first half of lactation,
230	whereas SCS in the second half of lactation showed weak correlations with CM
231	(Table 4).
232	
233	3.4. Selection index calculations
234	
235	Accuracy was 72% for young sires with 100 daughters using the current Dutch
236	udder health index (Table 5). However, when parity-specific CM was included in the
237	breeding goal, accuracy of selection increased to 75%. Even higher accuracy could be

- achieved when selecting on SCC in first half of lactation (SCS5-150) (83%). For well
- proven sires with 10,000 daughters accuracy increased to 90% (Table 5).
- 240
- 241

242 **4. Discussion**

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- 244 4.1. Representativeness of data
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The descriptive analyses showed that the data used to estimate genetic parameters was representative of the Dutch dairy cattle population. The average milk production of the animals in this study (26.8 kg) was equal to the average daily milk production in the Netherlands (26.8 kg) (NRS, 2006). The average fat percentage (4.51%) and protein percentage (3.55%) in this study (data not shown) were only slightly higher than the national average fat percentage (4.36%) and the average protein percentage (3.49%) (NRS, 2006).

The mean proportion of animals that had CM at least once during lactation in this study was 15.8%. The Dutch udder health centre reported a frequency of 25% for the Dutch situation based on a study of Barkema et al. (1999). This higher frequency refers to all cases of CM during the entire lactation, for all parities, whereas the frequency in our study only includes the first cases of CM per lactation in the first three lactations. Incidence of CM increases with increasing parity (Pösö and Mäntysaari, 1996).

260

261 4.2. Genetic parameters of clinical mastitis

Heritability estimates of parity-specific CM were low (Table 4) but in the range of 0.01 to 0.06 reported in previous studies using linear models (Pösö and Mäntysaari, 1996; Heringstad et al., 2000; Carlén et al., 2004). However, CM is an all-or-none trait and heritability estimates on the linear scale are therefore frequency dependent. Heritability estimates of different studies are therefore not easily comparable (Heringstad et al., 2000).

The genetic correlations between CM in consecutive lactations (i.e. 1 and 2, 269 and 2 and 3) were higher than the genetic correlation between CM in non-adjacent 270 271 lactations (i.e. 1 and 3). This is in agreement with the results from previous studies where also the highest genetic correlations were estimated between CM in second and 272 third parity and lowest between CM in first and third parity (Pösö and Mäntysaari, 273 1996; Carlén et al., 2004). This implies that CM in consecutive lactations is, 274 genetically, more the same trait, than CM in non-adjacent lactations. Rupp et al. 275 (2000) also showed that udder health in first and second parity was genetically 276 277 correlated. They concluded that animals with the lowest mean SCC in the first lactation had the lowest risk for CM in the second lactation. The lower genetic 278 correlation estimated between first and third lactation (0.63 ± 0.22) could be due to 279 selection. Animals that suffered from mastitis might be removed from the herd and 280 were not fulfilling three lactations. 281

Parity-specific CM and lactation-average SCS over 3 parities showed a moderate favorable genetic correlation in first parity (0.64), and strong favorable genetic correlations in later parities (0.79). The favorable genetic correlations imply that selection for lower lactation-average SCS will decrease the incidence of CM. Similar parity-specific genetic correlations were estimated by Carlén et al. (2004), who also observed the highest genetic correlation between CM in parity 3 and

lactation-average SCS. In general, the estimated genetic correlations are in line with
those reported in literature (see review Mrode and Swanson, 1996; Heringstad et al.,
2000).

291 Lower genetic correlations were estimated between CM and average SCS in the latter half of the lactation, than between CM and average SCS in the first half of 292 the lactation. Standard errors were quite large, and correlations should be interpreted 293 with caution. Even so, the estimated genetic correlations implied that selection for 294 lower SCS, especially during early lactation, decreases the incidence of CM. 295 296 Emanuelson et al. (1988) reported a similar trend in the estimated genetic correlations in three separate Swedish datasets. The genetic correlations estimated in our study 297 between CM and average SCS in the first half of the lactation were stronger than the 298 genetic correlations with lactation-average SCS in the entire lactation. This implied 299 that a real difference exists in the genetic resistance to CM between different parts of 300 the lactations, which is consistent with earlier findings (Emanuelson et al., 1988; De 301 302 Haas et al., 2002).

Heritabilities and correlations in this study were estimated using linear mixed sire maternal grandsire models. These models assume normality of residuals. However, CM is a binary trait and residuals will therefore not be normal distributed. Non-linear threshold models have been shown to be theoretically better for analyses of binary traits (Kadarmideen et al., 2000; Heringstad et al., 2004). This is something that will be taken into account in future studies when optimizing the analyses further.

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310 *4.3. Selection against mastitis*

The estimated heritabilities of CM in consecutive lactations were around 3%. This is very low when compared with production traits such as milk production which has a heritability of around 30% (Pösö and Mäntysaari, 1996; Carlén et al., 2004). Effectiveness of selection for traits with low heritability could be improved by testing more daughters per progeny-test sire. This is very costly for breeding organizations (Veerkamp and De Haas, 2005).

Another option is to combine indicator traits in an index. An "index method" 318 combines information into a single figure that gives an optimal selection criterion. 319 320 Optimal is defined as 'most accurate' or 'giving the highest selection response when selecting for it'. In the Netherlands, the breeding goal is to improve resistance against 321 CM in parity 1, 2, and 3. Therefore indices were developed to optimally predict the 322 323 animal's susceptibility for cases of CM. In the udder health index currently used in the Netherlands CM in parity 1, 2, and 3 was not treated as different traits and the SCC 324 trait included was SCS averaged over three lactations, this resulted in accuracy for 325 326 young sires of 72%. When parity-specific CM (CM1, CM2, and CM3) was included in the breeding goal the accuracy increased to 77% for young sires. SCC in the first 327 half of lactation (SCS5-150) was the most informative indicator trait. When including 328 SCS5-150, accuracy of selection increased to 83% for young sires, which is an 329 improvement of 6 percentage points. Similarly, for well-proven sires with 10,000 330 331 daughters, selection against lower average SCC in the first half of lactation (SCS5-150) was more effective than selection on other SCC measures explored in our study. 332

Average SCC values do not reflect dynamic variation in SCC. The most desirable animal would respond very quickly to an infection, resulting in increased SCC, followed by return to normal SCC levels. De Haas et al. (2003) showed that patterns of peaks in SCC, which are based on deviations from the normal lactation

curve, are more effective in the selection against CM than lactation average SCC.
Further optimization of indices might therefore possibly be achieved by including
patterns of peaks in SCC in addition to lactation average SCC. This will be
investigated in future studies.

Cases of CM are not routinely recorded in the Dutch breeding evaluation program, but many commercial dairy farmers record disease treatments in a MIS (Zwald et al., 2006). If these farmers give permission to upload the CM treatment information to the Dutch breeding evaluation program, direct information on CM could be included in the Dutch udder health index.

To investigate if combining direct and indirect information in an index 346 increased accuracy of selection, CM1 information of 10, 25, 50, and 100 daughters 347 was added to the index for young sires with 100 daughters (Table 6). Without 348 optimizing the SCC trait, the accuracy of the current udder health index could 349 increase with 2 to 10 percentage points. Combining the most informative SCC trait 350 351 (SCS5-150) and direct CM1 information on 100% of the daughters resulted in an even higher accuracy of selection (89%). This is an improvement of 12 percentage points. 352 However, at this moment it is not feasible to have CM information of the complete 353 population. It was shown that including CM1 information of 10% of the daughters in 354 the index already resulted in an increased accuracy of selection of 86% (Table 6). This 355 is 9 percentage points higher than the accuracy currently achieved for young bulls 356 with the Dutch udder health index. Higher accuracies result in more consistent 357 estimated breeding values of young bulls, and a better distinction will be given 358 between the best and worst sires, with regard to udder health. Therefore it is 359 worthwhile for the Dutch dairy industry to develop a national recording system for 360 CM. Until direct CM information is available in a continuous data flow, future studies 361

- 362 should focus on defining alternative SCC traits that provide additional information for
- 363 selection that aims to decrease genetic susceptibility to CM.
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- 365

5. Conclusions

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The occurrence of CM increases with increasing parity, from 13% to 19%. 368 The estimated heritabilities of CM in parity 1, 2, and 3 were all low, around 3%. 369 370 Genetic correlations between CM in consecutive parities were high, but somewhat lower between CM in non-adjacent parities. This implies that CM in consecutive 371 lactations is, genetically, more the same trait, than CM in non-adjacent lactations. 372 Strong genetic correlations were estimated between CM and all SCC traits, implying 373 that selecting on lower SCC leads to an increased genetic resistance against CM. 374 Genetic correlations between parity-specific CM and SCC traits increase with 375 increasing parity. Somatic cell score across the first half of lactation is more strongly 376 correlated with CM than SCS across the whole lactation or the second half of the 377 lactation; however this should be interpreted with caution because of high standard 378 errors. Dutch dairy bulls are selected for udder health based on an udder health index. 379 This index currently treats CM as the same trait in parity 1, 2, and 3 and comprises 380 381 udder conformation traits, milking speed and SCC averaged over 3 lactations. However, higher accuracies can be achieved when parity-specific CM is considered in 382 the breeding goal and when SCC averaged over first 150 DIM is included in the 383 index, instead of the currently used 335d SCC. Heifer mastitis is genetically a 384 different trait than mastitis in older cows. Therefore breeding programs should 385 consider CM in different parities as different traits. 386

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390	
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396	
397	
398	Conflict of interest
399	
400	None of the authors (S. Bloemhof, G. de Jong, Y. de Haas) has a financial or
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402	influence or bias the paper entitled "Genetic parameters for clinical mastitis in the first
403	three lactations of Dutch Holstein cattle".
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405	
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484 Table 1

485 Genetic parameters of clinical mastitis (CM) and the traits¹ in the current Dutch udder

	СМ	UD	FUA	TL	MS	SCSLAC1-3	b-values
СМ	0.04						
UD	0.40	0.40					0.07
FUA	0.35	0.72	0.30				0.04
TL	-0.15	-0.26	-0.26	0.43			-0.09
MS	-0.30	0.00	0.00	-0.30	0.21		-0.12
SCSLAC1-3	0.70	0.35	0.30	0.05	-0.30	0.35	0.38

486 health index, heritabilities on diagonal and genetic correlations below diagonal.

487 ¹ CM= Clinical mastitis, UD= Udder depth, FUA= Fore udder attachment, TL= Teat

488 length, MS= Milking speed, SCSLAC1-3= Somatic cell score averaged over 3

489 lactations

- 490 Table 2
- 491 Average daily milk production (in kg), fat percentage, protein percentage, and somatic
- 492 cell count (SCC) (*1,000 cells/ml) for healthy (0) and mastitic (1) animals, over all
- 493 parities, and divided per parity

Overall 0 26.7 4.52 3.55 132.7 1 27.3 4.47 3.54 318.3 1 st parity 0 23.9 4.50 3.51 114.6 1 23.9 4.47 3.52 263.8 2 nd parity 0 28.3 4.53 3.58 133.1 1 28.5 4.46 3.57 314.6 3 rd parity 0 29.8 4.53 3.55 165.9 1 29.8 4.47 3.54 383.5	Overall 0 26.7 4.52 3.55 132.7 1 27.3 4.47 3.54 318.3 1 st parity 0 23.9 4.50 3.51 114.6 1 23.9 4.47 3.52 263.8 2 nd parity 0 28.3 4.53 3.58 133.1 1 28.5 4.46 3.57 314.6 3 rd parity 0 29.8 4.53 3.55 165.9 1 29.8 4.47 3.54 383.5		СМ	Milk	Fat	Protein	SCC
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	1 27.3 4.47 3.54 318.3 1 st parity 0 23.9 4.50 3.51 114.6 1 23.9 4.47 3.52 263.8 2 nd parity 0 28.3 4.53 3.58 133.1 1 28.5 4.46 3.57 314.6 3 rd parity 0 29.8 4.53 3.55 165.9 1 29.8 4.47 3.54 383.5	Overall	0	26.7	4.52	3.55	132.7
1* parity 0 23.9 4.50 3.51 114.6 1 23.9 4.47 3.52 263.8 2nd parity 0 28.3 4.53 3.58 133.1 1 28.5 4.46 3.57 314.6 3rd parity 0 29.8 4.53 3.55 165.9 1 29.8 4.47 3.54 383.5	1** parity 0 23.9 4.50 3.51 114.6 1 23.9 4.47 3.52 263.8 2nd parity 0 28.3 4.53 3.58 133.1 1 28.5 4.46 3.57 314.6 3rd parity 0 29.8 4.53 3.55 165.9 1 29.8 4.47 3.54 383.5		1	27.3	4.47	3.54	318.3
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	1 23.9 4.47 3.52 263.8 2 nd parity 0 28.3 4.53 3.58 133.1 1 28.5 4.46 3.57 314.6 3 rd parity 0 29.8 4.53 3.55 165.9 1 29.8 4.47 3.54 383.5	1 st parity	0	23.9	4.50	3.51	114.6
2 nd parity 0 28.3 4.53 3.58 133.1 1 28.5 4.46 3.57 314.6 3 rd parity 0 29.8 4.53 3.55 165.9 1 29.8 4.47 3.54 383.5	2 nd parity 0 28.3 4.53 3.58 133.1 1 28.5 4.46 3.57 314.6 3 rd parity 0 29.8 4.53 3.55 165.9 1 29.8 4.47 3.54 383.5		1	23.9	4.47	3.52	263.8
1 28.5 4.46 3.57 314.6 3 rd parity 0 29.8 4.53 3.55 165.9 1 29.8 4.47 3.54 383.5	1 28.5 4.46 3.57 314.6 3 rd parity 0 29.8 4.53 3.55 165.9 1 29.8 4.47 3.54 383.5	2 nd parity	0	28.3	4.53	3.58	133.1
3 rd parity 0 29.8 4.53 3.55 165.9 1 29.8 4.47 3.54 383.5	3 rd parity 0 29.8 4.53 3.55 165.9 1 29.8 4.47 3.54 383.5		1	28.5	4.46	3.57	314.6
1 29.8 4.47 3.54 383.5		3 rd parity	0	29.8	4.53	3.55	165.9
			1	29.8	4.47	3.54	383.5

494

495 Table 3

496 Estimated parameters for clinical mastitis in parity 1, 2, and 3 (CM1, CM2, and CM3,

497 respectively). Heritabilities on diagonal, phenotypic correlations below diagonal and

498 genetic correlations above diagonal, with standard errors as subscripts

	CM1	CM2	CM3
CM1	0.03 0.01	0.88 0.13	0.63 0.22
CM2	0.06 0.01	0.03 0.01	0.91 0.12
CM3	0.05 0.02	0.12 0.01	0.04 0.01

499

500 Table 4

501 Genetic correlations between clinical mastitis in parity 1, ,2 and 3 (CM1, CM2, and

502 CM3, respectively), and somatic cell scores averaged from 5 to 335 days (SCS5-335),

503 from 5 to 150 days (SCS5-150), and from 151 to 335 days (SCS151-335), with

504 standard errors as subscripts

	CM1	CM2	CM3
SCS5-335	0.64 0.12	0.79 0.10	0.79 0.10
SCS5-150	0.65 0.11	0.86 0.08	0.88 0.09
SCS151-335	0.50 0.15	0.59 0.14	0.61 0.14

Ś

505

Accuracies of udder health indices with regard to increased resistance to clinical mastitis (CM) in parity 1, 2, and 3 treated as the same trait (Current Dutch udder health index) and treated as different traits (Parity-specific CM). Including different somatic cell count traits¹ in addition to the indicator-traits udder depth, fore udder attachment, teat length, and milking speed, based on sires with 100 or 10,000 daughters.

	100 daughters	10,000 daughters
Current Dutch udder health index	0.72	0.75
Parity-specific CM	0.77	0.81
Parity-specific CM and SCS5-335	0.80	0.84
Parity-specific CM and SCS5-150	0.83	0.90
Parity-specific CM and SCS151-335	0.67	0.70

¹ somatic cell scores averaged from 5 to 335 days (SCS5-335), from 5 to 150 days

514 (SCS5-150) and from 151 to 335 days (SCS151-335).

Accuracies of udder health indices with regard to increased resistance to clinical mastitis (CM) in parity 1, 2, and 3 treated as the same trait (Current Dutch udder health index) and treated as different traits (Parity-specific CM). Including direct clinical mastitis (CM) information in first lactation of 10 daughters, 25 daughters, 50 daughters and 100 daughters, in addition to different somatic cell count traits¹ and the indicator-traits udder depth, fore udder attachment, teat length, and milking speed, based on young sires with 100 daughters.

	# daugh	# daughters with direct CM information				
	10	25	50	100		
Current Dutch udder health index	0.74	0.76	0.79	0.82		
Parity-specific CM	0.78	0.79	0.80	0.81		
Parity-specific CM and SCS5-335	0.82	0.82	0.83	0.85		
Parity-specific CM and SCS5-150	0.86	0.87	0.88	0.89		
Parity-specific CM and SCS151-335	0.69	0.71	0.73	0.76		

¹Somatic cell scores averaged from 5 to 335 days (SCS5-335), from 5 to 150 days

524 (SCS5-150) and from 151 to 335 days (SCS151-335).

525



526

527 Figure 1

528 The cumulative frequency of animals with at least one case of clinical mastitis during

529 parity 1, 2, or 3 (CM1, CM2, and CM3, respectively) per day in milk.

66.