**Teat stenosis (Hard milker)**

It may be congenital or acquired.

It is the condition in which the teat sphincter gets contracted due to repeated trauma resulting in hard milking of the teat. During milking, one must apply more force to take the milk out and the milk will come out in a fine stream.

What causes it?

It usually results from a contusion or wound that produces swelling or formation of a blood clot or scab or from mastitis infections (especially in pre-lactating heifers).

Treatment:

conservation:

Conservative treatment involves the use of teat dilators to stretch or tear the fibres.

Surgical:

Stenosis of streak canal without acute inflammation can be treated successfully by incising the sphincter in three directions with a Lichty teat knife, danish teat slitter or teat bistoury.

Procedure using the ringed teat slitter:

1. A ring block is performed to anaesthetize the teat.
2. The teat slitter is carefully placed into the streak canal.
3. The ring is pushed to release the blade from the shaft
4. The teat slitter is then pulled out, incising the streak canal.

The opening of the sphincter is maintained at the desired size by inserting a Larson teat tube and leaving it in place for 5 - 7 days. Milking is accomplished by removing the cap of the tube. The tube should be rotated often so that the mucosa does not adhere to it when healing.

Prophylactic antibiotic infusion to the quarter in which the teat is affected.

Complications:

-Infections

-Mastitis