



Equine Influenza – a reminder.

As you may have heard equine influenza made the news last summer for seriously disrupting racing in Australia. Equine Influenza is a viral disease causing respiratory signs: a snotty nose, coughing, lethargy, fever, inappetance and a loss of performance. Influenza is highly contagious and spreads quickly between horses sharing airspace. It tends to affect younger animals and can have serious long lasting effects especially if a secondary infection takes hold.

Outbreaks of equine 'flu in the UK are rare, as much of the UK population is vaccinated. However spontaneous outbreaks can occur, particularly in unvaccinated youngstock with one such outbreak occurring in the New Forest last October.

Vaccination is recommended by the Barn for all horses, ponies and donkeys. A primary course of two vaccinations 4-6 weeks apart (from 6 months of age), followed by a booster at 6 months and then further boosters every year will keep your animal protected. If you compete or show your animal it is very important to ensure that these boosters are carried out within 365 days. Reactions to the vaccines are extremely rare and usually consist of an episode of loss of appetite and dullness that passes quickly.

There is no evidence of so called 'over vaccination' causing any problems in the horse. Also, older horses that have received many vaccinations are still at risk and should not be considered to have 'had enough vaccinations'.

Did you know?

Every time we vaccinate a horse against influenza alone (rather than in combination with a tetanus vaccine), the manufacturers Schering Plough, donate a tetanus vaccine to the charity SPANA. SPANA (Society for the Protection of Animals Abroad) provides veterinary care for working horses and donkeys in poorer parts of the world. They also offer health and welfare education to their owners and carers to try and reduce cases of cruelty and neglect. More information about SPANA can be found on their website www.spana.org.

Winter Horse Health Checks

During the cold wet winter months, it can be difficult to spot when things aren't going quite as well as they should with your horse or pony. Subtle lameness may not be noticed in the mud and slight weight loss may be put down to the weather, or not noticed under the hair and rugs. In an attempt to try and spot any changes at an early stage, before they become a problem, we are offering a comprehensive winter health check. This will comprise a full physical exam to include the heart, lungs and eyes and an assessment of the horse's soundness. The mouth will be inspected and a blood sample taken to check for anaemia and infection as well as liver and kidney function. Additionally, a faeces sample will be collected and analysed for the presence of worm eggs. A written report on our findings will be sent to you for your own records.

Planning update

We have now submitted formal plans to East Dorset District Council and we now await the results of the planners meeting. We have had a site visit and feel we have demonstrated well the need for expansion of our practice at Three Legged Cross.

We would once again like to thank very much all those clients who have kindly written in support of our application.

Welcome to new staff

We are very pleased to welcome Sam Bishop MRCVS to our veterinary team. Sam qualified from Sydney in 2006 but the rain, mud and howling gales of an English winter beckoned her back to her home country. She has her own horse, Immy a six year old Trakehner who Sam hopes will be a dressage star, and two boxers called Widgy and Tina. Sam enjoys all aspects of equine

work but especially the reproductive side and she is looking forward to a busy breeding season.

Sam's arrival brings the total number of horse vets at the Barn up to seven.



Sam Bishop MRCVS

Emerging diseases

The recent outbreaks of Foot and Mouth Disease, Avian Influenza and Bluetongue have highlighted how easily 'foreign' diseases can affect our livestock. Thankfully, none of these viruses affect the equine population but two other exotic infections, namely African Horse Sickness and West Nile Fever may put our horses and donkeys at risk in the future.

African Horse Sickness

African Horse sickness (AHS) is a virus transmitted by midges (the same ones that are responsible for the spread of Bluetongue) that causes respiratory and cardiac illness. The signs that appear one to two weeks after infection include coughing, sweating and difficulty breathing. The symptoms can then progress very rapidly and death can occur within 4-5 hours. Up to 90% of individuals may die in an acute outbreak. The cardiac form of the illness causes swelling of the head, face and eyelids one to two weeks after infection. Chronically affected animals can be much more difficult to spot and may act as a reservoir of infection for others. Donkeys do not tend to show many (if any) symptoms. All cases should be notified by the vet to DEFRA

Although this disease sounds terrifying, it is important not to panic every time you hear a slight cough from the stable. Most coughs are caused by allergies to the dust and spores in hay and bedding or mild viral infections (even influenza infection is uncommon – see below). The last recorded outbreak of AHS in Europe occurred in Southern Spain in the 1980s and it has

never been reported in the UK. It is however important that as new diseases arrive in the UK we are ready for them to give us the best chance of preventing their spread.

West Nile Virus Encephalitis

West Nile Virus (WNV) is a virus spread from the bird population to humans, horses and other mammals by infected midges. WNV affects the brain and nervous system causing ataxia (the horse becomes wobbly) and muscle tremors. Some horses will also have a fever. Most affected horses recover quickly but supportive treatment may be required. Although affected horses are not themselves infectious to people, the same midges that bite the horse, may also bite the horse's handler. For this reason, any suspected cases of WNV encephalitis must be reported by your vet to DEFRA. Again, no cases of WNV have been seen in the UK yet, but the disease is widespread in the USA and cases have been reported in Europe.

Foot abscesses—a perennial winter problem

This winter, we have been called out with increasing frequency to treat horses, ponies and donkeys with foot abscesses. These poor individuals will suddenly become extremely lame, they may rest the foot constantly and be reluctant to move, although some will have more subtle signs. Some individuals will have appeared slightly lame in the previous day or two. The foot or coronary band may be hot and the leg swollen (especially around the pastern and inside of the cannon bone). The digital pulses will be increased and may be quite easy to detect.

Abscesses are most frequently seen during the wet winter months and in those horses with poor quality feet. Regular trimming and shoeing help to reduce the risk of developing an abscess but any animal can be susceptible. Most abscesses are

found within the white line – where the horn of the sole meets the horn of the hoof wall. Dirt can track up through this weaker area and cause a deep seated infection. Abscesses can also develop following small puncture wounds, in any area of damage to the hoof or frog or following an episode of laminitis.

Treatment of Abscesses

Your vet will initially examine the foot using hoof testers to try and identify where the abscess is. The shoe will need to be removed and then the abscess opened up using hoof knives to pare the sole or wall away. All dead and necrotic tissue should be removed whilst trying to leave as much of the wall, frog and heel bars as possible to allow the horse to bear weight normally. It is not uncommon for the healthy tissue to be slightly damaged during this

process and for the foot to bleed a little.

Farriers will often pare out a superficial abscess but it is important to remember that by law, they are not allowed to penetrate the sensitive structures of the foot. With deep abscesses affecting the sensitive tissues, veterinary attention should be sought. It is also important to ensure that your horse is fully vaccinated against tetanus if an abscess is present. If there is any uncertainty, your vet will administer tetanus antitoxin to provide immediate protection in addition to any pain relief that is required.

Once the abscess has been opened up, the foot will be soaked in a solution of iodine/Povidine ('tubbed') to clean out the bacteria. It is important to repeat this tubbing before bandaging the foot for the first few days of treatment. A dressing should then be applied, followed by a gamgee pad (to cushion the exposed soft tissues). This should be held in place with a bandage and then protected with a tough waterproof tape. If your horse is sound enough to turn out, then the bandage should be