



# SPRING

Newsletter 2023



# CONTENTS

01

## Our quarterly update

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Read our quarterly update to find out the latest news about our practice.

02

## How to book us for your event

---

We can come out to your Pony Club or Riding Club event and give an educational talk.

02

## Hat Hair Don't Care

---

We're promoting safety by wearing a hard hat when dealing with horses.

03

## Equine dental health checks

---

Throughout March to May, we are creating awareness of the importance of equine dental health checks.

05

## Tick bites

---

Symptoms, causes, diagnosis & treatment

07

## Spring Equine Emergencies

---

Spring's hidden dangers for your horse



# OUR QUARTERLY UPDATE

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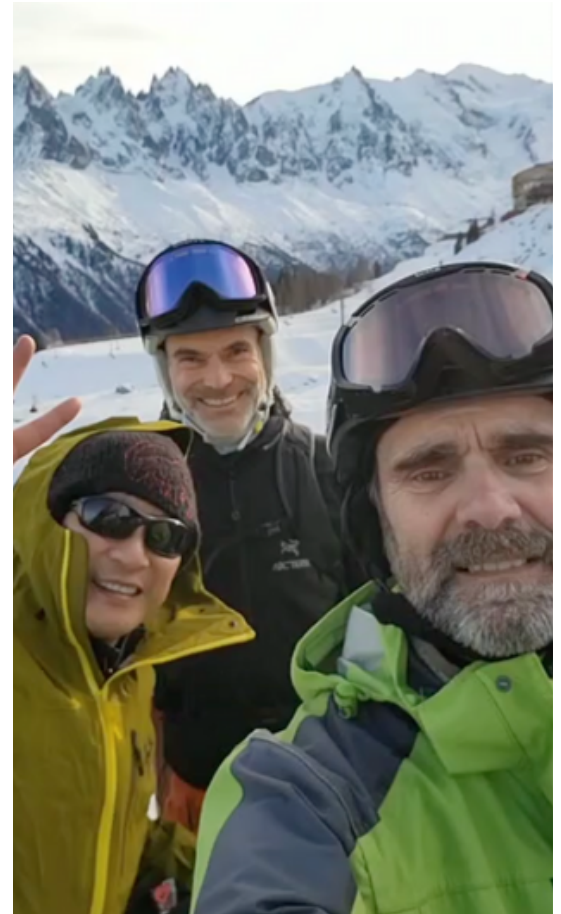
## OLD DOG - NEW TRICKS

Alex took a few days away from the clinic in January to join colleagues from around the world at the annual MRI conference in Chamonix. The conference organisers, Hallmarq have once again managed to successfully combine development of image interpretation with fun on the slopes in the renowned French resort.

Alex has attended the annual congress since 2004 and as his grey hair begins to show he can't help but notice that the speakers are looking younger every year. He recalls many of the internationally renowned imaging specialists were fresh out of university when he first met them on the slopes of the Grands Montets all those years ago.

Experienced as Alex is, his time at congress was well spent, as he was able to focus on the increased understanding of what is important and what it's not when looking at the images captured by the MRI.

MRI imaging has come a long way since those the early days of development and the new techniques and subtlety of interpretation continues to form the opinions and hone the skills of old stalwarts like Alex.



## RISING STAR

In February our lovely receptionist Sam Anderson travelled to the Morris Equestrian Centre in Kilmarnock to contest the Medium Bronze and Advanced Medium Bronze Petplan Equine Area Festivals with British Dressage.

With no expectations and a have a go attitude, Sam and her 14-year-old KPWN mount Jacob come out with a personal best score and a class win. This more than made up for being disqualified on a winning score due to a wardrobe error in a previous class earlier that morning. Sam beamed with pride as Jacob responded beautifully to every question asked. He is a superstar, and we are now excited to see him perform at the nationals in Hartpury.



Not content with her 2 places in Medium bronze for area festival secured Sam set out to Northallerton area festival 2 weeks later to build on Jacob's success. Sam describes a large hotly contended competition with 28 heading the class. With wise words from her trainer Sam rode into the ring with complete focus on riding Jacob to the best of her ability. Leading the class from nearly half-way through, meant for an anxious wait until the scores were finalised to secure an insane win. Sam is now the delighted owner of 2 beautiful sashes and 2 tickets to the nationals at Hartpury in April. From the picture it is plain to see Jacob enjoyed every minute of his success too.

# OUR QUARTERLY UPDATE

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## THE BRITISH ANIMAL RESCUE AND TRAUMA CARE ASSOCIATION (BARTA)

On occasion we will get a call from the Fire Department asking for a vet to assist with a horse who is down and unable to rise. These calls are always treated as an emergency and our assistance is always appreciated by the attending emergency services. Having a vet on hand to advise on care of the horse and administer sedation as appropriate can be fundamental in the success of the operation. Over the years our own vets have been involved in some dangerous situations including at least 3 fast flowing water rescues and several situations where horses have been trapped in field ditches.

The British Animal Rescue and Trauma Care Association (Barta) has introduced a course for vets to attend which aims to help the rescuing teams work together effectively. Michelle van Niekerk is the latest of our team to attend the course which she described as a really practical, useful mix of lectures and role play.

Seeing how the rescue services, especially the fire fighters, are taught to work around the down animal was invaluable. Michelle got to see how the vet fits into the rescue teams protocols, with the emphasis on ensuring everyone involved in the rescue is kept safe while the rescue is engineered. A vet could be called to a range of incidents including road traffic accidents, trailer malfunctions, horses trapped in ditches or even trapped in stables all of which are highly stressful situations. Being able to practice the protocols and use the lifting equipment in a safe environment was really helpful.

Our intention is that every vet at the clinic attend the course this year. We have also learned that Equine Nurses will be invited to attend a similar course later this year, meaning more trained staff to assist when the need is greatest.



# OUR QUARTERLY UPDATE

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## A DAY IN THE LIFE OF A NURSING ASSISTANT

A run of emergency surgeries can be an exhausting time for the team as they come one after the other on top of routine calls. You can be sure those days always come on a Friday when you can't help but think of the coming weekend. One of those day caught Becci, our newest nursing assistant by surprise and saw her plunged into a weekend she will remember for a long time. It kicked off first thing with a joint penetration that required immediate surgery and the knowledge that her mentor was away from the clinic. Head Nurse Laura had trained her well though and together with her colleague they supported the surgical team admirably throughout the 2-hour long surgery and had the patient comfortable and recovering, just as lunch arrived.

Before the last bite was swallowed the team heard that a surgical colic was on its way, and they were being called to arms again. This time Becci was going to have to manage the support role alone as her colleague had become unwell. Smooth as silk, the knock down was performed, and the critical patient was lifted into the theatre area. It's a tense time during that initial exploration, while waiting for the surgeon to determine the cause of the issue but Becci performed her theatre duties without a hitch.

Once the patient was recovered and everyone but her and the anaesthetist had left for home, she set about cleaning the theatre for a second time that day. It was late in the night when she finally got home but she knew she would only be sleeping for a couple of hours before returning to meet the vet and care for her charge in the early hours.

The weekend continued at the same pace with much disrupted sleep and long hours of watching and waiting for signs of improvement. Along with the treating vet Becci kept going through the second night until Monday morning arrived and she was able to hand over her duties to her colleagues and finally get some rest. Becci coped brilliantly during a tense and challenging weekend and earned the respect of her colleagues and team with her indomitable spirit. We are so pleased to have her on the team.



# BOOK US FOR YOUR EQUINE EVENT

WE CAN COME OUT TO YOUR PONY CLUB OR RIDING CLUB EVENT AND GIVE AN INTERACTIVE AND EDUCATIONAL TALK.

To book, please contact us via email or telephone the practice.



## HAT HAIR DON'T CARE!

**DID YOU KNOW....ACCORDING TO A SURVEY CONDUCTED BY THE BRITISH EQUINE VETERINARY ASSOCIATION, BEING A HORSE VET CARRIES THE HIGHEST RISK OF INJURY OF ANY CIVILIAN OCCUPATION IN THE UK.**

That is why we have embraced safety for our whole veterinary team, by supplying all of them with a helmet.

In other professions and disciplines within the equine industry, the wearing of hard hats has for a long while been accepted as the norm and a mandatory safety requirement.

It will now be a common occurrence to see our team members wearing a helmet in the practice or when our vets are visiting patients on the road.

Please help us to stay safe as we examine and treat your horses ...and please wear your helmet too!



# EQUINE DENTAL HEALTH CHECKS



Throughout March to May, we are creating awareness to the importance of equine dental health checks. Dental care is extremely important of the health and welfare of our horses. Prevention is always better than cure and as such we encourage our clients to have their horse's mouths examined on a regular basis.

## EQUINE DENTAL CARE

The horse's mouth has evolved over several million years to become a highly efficient grinding machine, perfect for grazing for long periods of time on coarse, fibrous grasses. In the wild, a horse may graze for up to 18 hours a day. As herbivores they rely on the grinding mechanism of their teeth to break down their feed in order to obtain adequate nourishment.

Horses' teeth are durable and have a large crown, making them capable of withstanding significant wear. Unlike human teeth, horses' teeth continue to erupt throughout their life.

The rate of eruption is around 2-3mm per year and corresponds to the rate of wear caused by the opposing tooth and a fibrous diet. The result is that the crown height (above the gum line) remains roughly constant whilst the reserve crown (the part of the tooth beneath the gum line within the skull) becomes shorter with age.

When horses chew their food, they move their jaw in a repetitive cyclical motion. The amount of time spent chewing and the range of movement in the jaw is significantly greater when eating a coarse high fibre diet, as compared to a softer more carbohydrate rich diet.

The modern domesticated horse doesn't need to work quite as hard as their wild counterpart for their calories. They generally have access to much more plentiful grazing and grass types which are softer and lusher, and therefore more easy to break down and digest.

Unfortunately, this means there is more potential for the development of dental wear abnormalities over time. This is why regular examination and preventative treatment is essential in domestic horses.

## COMMON SIGNS OF A DENTAL PROBLEM

**Clinical signs of dental disease are variable and there may be no outward signs at all. The lack of clinical signs can therefore not be relied upon to make the assumption that all is well.**

Some of the more obvious indicators of dental disease include:

- Weight loss
- Difficulty eating (Dysphagia)
- Quidding (dropping chewed up balls of feed)
- Biting problems
- Issues when ridden
- Halitosis (bad breath)
- Behavioural changes
- Facial swelling
- One-sided nasal discharge

## EXAMINING A HORSE'S MOUTH

**Legally, dentistry should only ever be carried out by a vet or a qualified Equine Dental Technician (EDT).**

The dental exam should not be simply thought of as a 'tooth rasp' - it is an examination first and foremost. Compare this with your own visits to the dentist.

Veterinary surgeons will always thoroughly examine your horse's mouth. This will most commonly be done under sedation, meaning that subtle pathology will be identified at an early stage and appropriate treatment can then be given.

Who is permitted to carry out specific dental procedures is regulated by law. Veterinary surgeons are qualified to deal with the full range of problems which they may encounter within your horse's mouth. They are also able to take a holistic view of the patient and put any findings into context with the animal as a whole. Only veterinary surgeons can legally administer intravenous sedation.

## HOW OFTEN SHOULD MY HORSE RECEIVE A DENTAL EXAMINATION?

**Your horse's teeth should be examined by your vet every 6-12 months unless advised otherwise.**

It's important to identify problems early.

**Thorough and regular examination is key to maintaining dental health.**

## OUR EQUINE DENTAL SERVICES

Our experienced veterinary surgeons regularly perform a full range of dental procedures at your stables or in our clinic:

- Routine dental rasping
- Wolf tooth removal
- Ophthalmoscope examination
- Dental radiography
- Tooth extraction

**If you have any questions regarding your horse's dental health, please contact us to speak to one of our vets.**





# TICK BITES

## SYMPTOMS, CAUSES, DIAGNOSIS & TREATMENT

Ticks are widespread in the UK and are arachnids rather than insects. Like spiders, adult ticks have 8 legs and vary tenfold in size from 1 millimetre to 1 centimetre.

Ticks hatch from eggs and develop into larvae, then nymphs, and finally into adults. At each stage ticks have to attach onto and feed from an animal (their host), to develop into the next stage. The younger stages of ticks, like larvae, prefer to feed on small animals like birds and rodents. However, the older stages can attach onto and feed on larger mammals, such as horses, and also humans.

For this reason, these unwelcome hitchhikers are something you should be aware of.

## HOW DO HORSE'S GET TICKS?

Whilst they could be found in some gardens, particularly in more rural areas, ticks are most commonly found in vegetation in areas such as woodland, meadows and moors. When they are looking for a new host to attach to, they are described as 'questing' and will wait on low branches and leaves to attach to any animal brushing past.

## IS THERE A PARTICULAR TIME OF YEAR THAT YOUR HORSE IS LIKELY TO BE AFFECTED?

Ticks are most active in spring and early summer, and then again in early autumn. They are generally dormant in cold weather. However, with global temperatures on the rise, they are likely to be active for a greater proportion of the year.



## WHY SHOULD YOU WORRY ABOUT TICKS BITING YOUR HORSE?

The majority of the time, tick bites will not harm your horse. Rarely, bacterial infections or abscesses will develop at the site of a bite. This is more likely to occur if a tick has been improperly removed, with part of the tick being left in the skin. However, the main reason for wanting to prevent tick bites in horses is that they have the potential to act as vectors (spreaders) of infectious disease.





## WHAT DISEASES CAN BE SPREAD TO YOUR HORSE FROM TICKS?

In the UK the most common disease that ticks transmit is **Lyme disease**, caused by the bacterium *Borrelia burgdorferi*.

Signs of **Lyme disease** in horses can include:

- Mild pyrexia (a temperature above the normal range)
- Lethargy
- Weight Loss/Anorexia
- Lameness/Stiffness
- Muscle soreness
- Laminitis
- Uveitis (inflammation within the eye)
- Ataxia (unable to control their movement/a lack of coordination)
- Hyperaesthesia (Sensitivity)

Your vet can diagnose Lyme disease from a clinical examination, followed by taking a blood or joint fluid sample.

Another transmittable disease from ticks is **Anaplasmosis**, which is caused by the Rickettsial organism *Anaplasma phagocytophilum* (formerly *Ehrlichia equi*).

Signs of **Anaplasmosis** can include:

- Pyrexia (a temperature above the normal range)
- Weight Loss/Anorexia
- Ataxia (unable to control their movement/a lack of coordination)
- Collapse/recumbency
- Ventral oedema (swelling under the horse's stomach)
- Small red lesions on the gums

Your vet can diagnose Anaplasmosis from a clinical examination, followed by a clinical examination and taking a blood sample.

**Treatment for both Lyme disease and Anaplasmosis includes antibiotics and anti-inflammatory medications, which may need to initially be given intravenously.**

## HOW CAN YOU PREVENT YOUR HORSE FROM GETTING TICKS?

It is important to check your horse all over daily for ticks and remove any that are found, particularly at times of the year when ticks are most active.

There are a variety of preventative tick treatments available that will repel ticks, kill them once they have attached, or both. Infected ticks do not spread infections such as Lyme disease until they have been attached to the host for around 48 hours. Effective tick treatments will kill ticks much quicker than this, meaning they are killed before they can transmit disease to your horse.

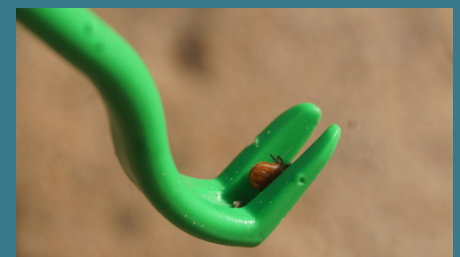
Our practice team would be happy to discuss with you what treatment would be best suited to use for your horse, so please do get in touch.

## WHAT SHOULD YOU DO IF YOU FIND A TICK ON YOUR HORSE?

The easiest way to remove a tick is by twisting it off using a special tick remover.

Properly removing a tick in this way reduces the risk of leaving the tick's mouthparts still attached.

**\*\*\*Ticks should never be removed by squeezing or pulling, nor by being burnt.\*\*\***



**If you are unsure or worried that your horse has a tick, please do not hesitate to contact us.**



# SPRING EQUINE EMERGENCIES

**SPRING IS IN THE AIR; THE FLOWERS ARE BLOOMING AND THE TREES AND PADDOCKS ARE TURNING A LOVELY SHADE OF GREEN. SADLY, IT CAN ALSO MEAN HIDDEN DANGERS FOR YOUR HORSE.**

## LAMINITIS

**Spring grass is high in sugars called fructans and can induce laminitis if eaten in large amounts.**

Laminitis is a painful and potentially devastating disease that causes pathological changes in the laminae of the feet and, in severe cases, may result in long lasting, crippling changes.

### **Warning signs to look out for:**

- Weight shifting
- Reluctance to move
- Rocking back onto the heels
- An increase in hoof wall temperature

### **Minimising the risk of laminitis:**

- Watch your horse does not become overweight
- You should carefully monitor your horse's diet
- Restrict your horse's grass intake where necessary by strip grazing using electric tape or using a muzzle

**Monitor your horse daily for signs of laminitis.**

**Prevention is always better than cure - if in any doubt, always call your vet.**

# SPRING EQUINE EMERGENCIES

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## COLIC

**Spring brings an increase in lush grass and so it is vital that you manage your horse's intake.**

Horses are usually fed hay and hard feed over the winter to keep weight on and so most horses come out of the winter looking rather well. They will not be used to the rich green grass and so it is important you gradually introduce them to the Spring grass slowly. Failure to do this may cause an upset of the horse's intestinal bacteria, which could lead to colic.

### Warning signs to look out for:

- Flank watching
- Pawing
- Rolling
- Lip curling
- Quiet/dull
- Not wanting to eat
- Lying down frequently
- Reduced faecal output
- Stretching out frequently as though to urinate

Signs can vary from mild to severe, and things can often change very quickly.

It is important to know what is normal for your horse, so that you can be aware of any changes which may be an early sign of colic.

### Minimising the risk of colic:

- Make changes to routine slowly over several weeks
- For horses going onto summer grazing, increase the time spent on new grass slowly, starting with an hour per day
- For horses that are likely to gorge themselves on long grass, consider using a grazing muzzle
- Keep your horse up to date with targeted worming and dental treatment
- Ensure that your horse drinks plenty of water





# SPRING EQUINE EMERGENCIES

## GRASS SICKNESS

**Equine grass sickness (EGS) can occur at any time of the year but is most often seen between April to July.**

The disease affects mainly grazing horses and currently the cause remains unclear. The disease mainly acts by disrupting the nerves that supply the gastrointestinal tract, hence affecting gut motility. However, other parts of the general nervous system are also affected.

### Warning signs to look out for:

- Colic (mild or severe)
- Dull demeanour
- Muscle tremors
- Sweating
- Difficulty eating
- Excess salivation
- Eyelids appear droopy
- Increased heart rate
- Firm faecal balls with mucous coating

### Minimising the risk of EGS:

- Try and limit exposure to pastures during high risk periods where previous cases have occurred
- Reduce the amount of soil disturbance from methods such as harrowing or mechanical faeces removal
- Encourage removal of faeces by hand
- In heavily grazed or sparse pastures offer supplementary forage
- Avoid sudden changes in diet
- Limit use of ivermectin based wormers
- Minimise the number of horses co-grazing, especially youngsters

## ATYPICAL MYOPATHY

**Atypical myopathy, caused by horses eating sycamore seeds, often occurs during the spring and autumn months and is a highly fatal muscle disease in horses.**

It is caused by a toxin found in sycamore trees (*Acer Pseudoplatanus*) and is a distressing disease that results in degradation of respiratory, cardiac (heart) and postural muscles.

At this time of year, sycamore seedlings are starting to appear and it is vital your horses do not ingest them. Horses suffering from atypical myopathy have high levels of a toxin called Hypoglycin A that prevents energy being produced within their muscle cells.

### Warning signs to look out for:

- Weakness
- Muscle trembling
- Signs of colic
- Exercise intolerance



### Minimising the risk of atypical myopathy:

To minimise your horse's risk of atypical myopathy, reduce exposure to sycamore seeds and seedlings by removing them from the ground. If this is not possible, then removing the horse from the area is crucial.