



THREE COUNTIES EQUINE HOSPITAL

SUMMER NEWSLETTER 2007

Staff news

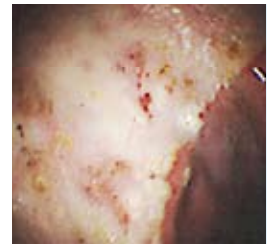
Chrissie Young (deputy head nurse) is taking a working sabbatical at Scone Veterinary Hospital, New South Wales, Australia. This will be an exciting opportunity for her to experience life in a different hospital on the other side of the world where she will work in the Equine Intensive Care Unit providing nursing care to critically ill neonates and adults and post operative patients. Chrissie leaves in July and returns to TCEH in January 2008.

Equine Gastric Ulcer Syndrome (EGUS)

Here at TCEH we are lucky enough to have a gastroscope which is a 3 metre long endoscope able to reach down to the horse's stomach. Studies have shown that 90% of racehorses in training suffer from stomach ulcers to some extent and they can also affect other types of performance horses too. Horses most at risk are those which spend long periods without access to food as they are designed to feed little and often. Other risk factors include high intensity exercise, illness, stress and some medications. Horses with EGUS may show a variety of signs including weight loss, poor performance, recurrent colic, dullness or poor appetite. The gastroscope allows us to examine the lining of the stomach at the surgery to identify any ulcers present. Treatment for this condition comes in the form of oral medications alongside alterations to the management and feeding regime. Please contact the surgery to discuss this condition further with one of the Vets if you think your horse may be affected. Please note in order for the stomach to be visualised the horse must be starved of food for 18 hours and water for 4 hours prior to the examination.



A normal equine stomach



A stomach with grade 1/3 ulcers

Insurance

Horse Insurance offers financial protection for many unforeseen events related to owning a horse for example if your horse is injured or becomes ill.

If you are looking for insurance cover be careful to read what each insurance policy covers and the total cost of what they will pay for (most insurance companies cover up to £5,000 veterinary fees).

In the event of you making a claim:

1. Request a claim form from the insurance company.
2. Fill in your part fully. Forms will be returned if not filled in properly and may result in the claim being delayed.
3. Send your form and excess FAO Insurance claims at TCEH.
4. Post your form off to the insurance company with any relevant information/invoices etc.

Remember your policy is a contract between yourself and your insurance company and not your insurance company and veterinary practice; therefore it is up to you to liaise with your insurance company regarding payment. For further clarification on insurance matters please contact Lisa Ayres on 01684 591260

Tildren

Tildren (Tiludronate) is a new drug used in the treatment of bone spavin (osteoarthritis of the small hock joints) and navicular disease. Trials were carried out in the UK in 2006 (including at TCEH) to assess the efficacy of this drug. Tildren stops the process of bone resorption and breakdown and encourages new bone formation. The drug has to be given as an intravenous drip solution and the horse needs to be hospitalised for the day to allow for monitoring of the



horse and for any side-effects which can occasionally include an episode of mild colic. It is safe to be given up to three times a year without affecting other normal bones within the body. Please speak to one of the Vets if you think your horse may benefit from this treatment and would like to discuss it further.

Colic Surgery

Fortunately of all of the horses with colic, less than 10% require surgery. Currently around 80% of horses undergoing colic surgery at specialist clinics will survive to return home.

Here are two patients treated at Three Counties Equine Hospital, both of which underwent 2 colic surgeries each. We are pleased to report both have made a full recovery.



Robson (below right on the far side, with his half brother Jerome) following his recovery from 2 colic surgeries.



Neave (pictured left with her new colt foal Oscar) who underwent 2 colic surgeries during her pregnancy.

Sweet Itch Management

Sweet Itch is the most common allergic skin disease seen in the horse, caused by a hypersensitivity reaction to *Culicoides* midges. Only some horses develop this over-reaction to the female midge bite which is recurrent each season. The signs often first appear at the age of 2-4 years but can be seen from much earlier. The skin reactions are highly itchy and the appearance of the horse's skin is due to the resulting self trauma. The season of midge activity varies according to the area and the weather conditions but can be from March to October. The management of sweet itch has 2 aspects to consider: avoidance of the midges and reduction of the inflammatory reaction. The avoidance strategies can include stabling during peak midge activity (dawn and dusk), copious insect repellent, fly screens in stables and barrier rugs (for example Boett rugs). Benzyl Benzoate has an oily barrier effect and also mild anti-inflammatory properties. Some horses need relocating to a field away from standing water as this is the ideal breeding habitat for the midges. Drugs which are used to control the inflammation are usually based around corticosteroids (topically or systemically) and a desensitisation vaccine is currently being trialled by the Sweet Itch Centre. Please contact the surgery if you would like to discuss any of these points in more detail.

