



VET magazine

EQUINE VETNOTES

SEPTEMBER 18



MEET YOUR VETS

SPRING TIME!

It is great to see the weather has been much kinder to us this year and the mud has stayed away.

This means lots of people could continue to ride throughout the winter months. Due to the slightly warmer days we are getting rapid grass growth. If your horse is prone to laminitis or gets affected from the spring grass be mindful of how much they are getting. Foaling is well underway and we hope you are all ready for the upcoming bundles of joy.



Ellie Grieves

Ellie grew up in Victoria, Australia riding and competing since she was 12 years old. She completed a Doctorate of Veterinary Medicine at Melbourne University before starting work in Taranaki as a mixed animal veterinarian. She then went back to Australia to complete an equine internship under the guidance of three board-registered specialists at the Victorian Equine Group. She will be seen out and about on weekends competing in dressage with her horse Pistachio.



Anna van Bergen

Anna graduated at Utrecht University in the Netherlands with a Master's degree in equine medicine. After graduating she worked as an equine vet at Dierenkliniek Benschop-Oudewater. In addition to this she's had the privilege of working for other clinics in the Netherlands, Belgium and England. Besides her role as a practicing vet, she also works as a writer and editor for a Dutch label "Paardenarts", writing and publishing articles for horse owners on equine health and disease. She moved to Australia early 2017 before starting here at Totally Vets. Anna's focus in the past has been on fertility, dentistry, wounds, nutrition, saddle fitting and behavior. However, as an equine vet she loves every part of the job and is looking forward keeping your horses healthy and happy in every aspect. In her free time she loves riding her horse Juan, playing the bass guitar and teaching poledance.

QUIZZZZZZ...

Check out our website for the answers:
www.totallyvets.co.nz

1. How many teeth does an adult horse have?
2. It can be normal for a horse's heartbeat to regularly skip a beat at rest:
 - a. true
 - b. false
3. What should the resting heart rate of a horse be?
4. How many kg (dry matter) of roughage (grass / hay / haylage) should a 500 kg horse eat per day to meet its fibre needs?
 - a. 2.5
 - b. 5
 - c. 6
 - d. 7.5
5. Which worm can horses get from being grazed with donkeys?
6. At birth, once the water has broken, how long does it take for the foal to be born:
 - a. 20 min
 - b. 45 min
 - c. 1 hour
 - d. depends on the sex of the foal

EQUINE DENTALS: answering your questions

Ellie Grieves

There are real differences between just floating teeth and having a thorough dental examination and floating ("odontoplasty").

A thorough dental examination requires a good history, examination of the whole horse (particularly of the head and oral cavity) for disease and malocclusions and good record keeping. A veterinarian is the most appropriate person to perform this examination, as their knowledge of entire body systems and disease conditions are vital in dental examinations.

SEDATION, IS IT NECESSARY?

We often sedate horses for equine dentals, why is this? Sedation allows a thorough examination to be performed every time, not just when the horse prefers. It is also recommended for the safety of the owner, vet and horse. Visualisation of many small intraoral structures is next to impossible in the un-sedated horse. Normal practice in veterinary equine dentistry internationally dictates that these structures are evaluated. Sedation is also used to reduce the stress and anxiety your horse might otherwise

experience during the examination and treatment. Many horses internalise stress, they may seem calm on the outside showing little signs of discomfort but on the inside, there is a lot going on. No one likes going to the dentist, including your horse.

WHICH IS BETTER; HAND TOOLS OR POWER TOOLS?

There is much debate about this amongst horse owners. Both techniques have their pros and cons but the most important aspect is who is using these tools, their level of training and knowledge. We have both options available at Totally Vets, but prefer power tools to do the bulk of the work. Power tools have some important advantages: 1) they are much quicker, so that the horse doesn't have to open its mouth for any longer than necessary, 2) they allow each tooth to be individually treated and very particular areas of the tooth can be worked on in isolation, 3) the teeth in the back of the mouth can be treated without unintentionally bumping into the jaw bone and disrupting the soft tissues of the mouth.

DO POWER TOOLS CASE TOOTH DAMAGE?

Power instruments can cause damage to the tooth in untrained hands. All our equine vets at Totally Vets have had the required education on how to safely and effectively use these power tools to ensure the wellbeing of the horse while acquiring optimal results. **Used judiciously in well-trained hands, they are a time and effort saving tool that can accomplish more detailed work.**



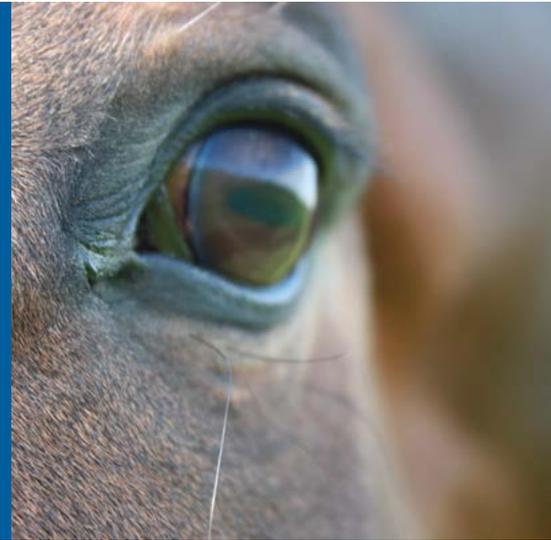
HOW FREQUENTLY ARE DENTAL EXAMINATION AND TREATMENT RECOMMENDED?

We often suggest your horse gets a dental check annually to ensure problems are identified and treated early. Some younger horses and those with less than favorable alignment require six monthly check ups.

Totally Vets is hosting a dental seminar for everyone on the 29th of September 2018, 1pm, at Kyrewood Park (previously known as Kyrewood Equestrian Center). This will give you insight into what goes on inside your horses' mouth and what we do during a routine dental examination. For more information on the seminar please visit our facebook page, to RSVP please send an e-mail to awapuni@tvq.co.nz.



7. A foal usually stands within 60 minutes. It is abnormal if this takes more than:
 - a. 1.5 hrs
 - b. 2 hrs
 - c. 3 hrs
8. A horse with a fever always needs treating with antibiotics:
 - a. true
 - b. false
9. A wound should always be treated with antibiotics:
 - a. true
 - b. false
10. Obesity can lead to laminitis:
 - a. true
 - b. false
11. It is possible to medically induce lactation in a mare for the purpose of adoption:
 - a. true
 - b. false



FOALING TIME!

Anna van Bergen

When something's off, newborn foals can deteriorate very quickly compared to adult horses. Therefore, it's important to have a good grasp of what's normal and what isn't, and assess the foal's health at parturition.

WHAT YOU NEED TO KNOW

- If the water has broken, but there's still no sign of the foal at the vulva after ten minutes, the foal's position should be examined with clean hands/arms.
- Normal positioning - two legs forward, one just in front of the other, the muzzle 10-20cm behind the feet. If the foal's position is normal, allow another 10 minutes. If the foal still hasn't advanced, call the vet immediately.
- If a red balloon-like structure is visible at the start of foaling, immediately break it open (in the middle of the slightly brighter star-shaped spot, see photo). The placenta has detached early and the foal can't get oxygen. It needs to be delivered ASAP before it suffocates! Call the vet. This foal will require vet attention post-partum.
- The foetal membranes might cover the foal's nose, pull them aside so the foal can breathe.

Don't intervene if not necessary, as it can disrupt the mare-foal bonding process.

- The foal should sit in sternal recumbency within two minutes, stand within one hour, nurse within two hours and the mare should pass her placenta within three hours. Call the vet if this takes longer.
- Let your vet check the foal's antibody level at 12 hours, check the foal for congenital problems and give the foal tetanus antitoxin if required. The latter is especially important if the mare has not had her tetanus booster within four to six weeks before parturition.

COLOSTRUM

It is important for the foal's health to drink enough good quality colostrum within the first eight hours of life. This is because a foal is born without any antibodies to protect it against the pathogens that are all around us. These antibodies are provided through colostrum, which is the first fraction of milk that the mare produces. Colostrum is more viscous (thick and sticky) than milk and looks slightly yellow. A mare will only make colostrum at the start of



lactation, which makes it very important that the mare doesn't lose her colostrum before the foal is able to drink it. Antibodies are a type of large protein. In adult horses large particles have to be broken down (digested) to be absorbed, as the gut has a natural barrier (otherwise bacteria would also be able to get through!). However, in a newborn foal, this barrier is still in its "foetal stage", which allows the antibodies to be absorbed in the gut. From birth, the gut barrier gradually starts to close up. It would normally take a foal approximately two hours from birth to nurse. If this takes longer than three to four hours it is considered abnormal. At this stage a vet should be contacted so that the foal can be helped before the gut barrier has closed completely. Once it has, therapy becomes more intensive for the foal, owner and vet. If therapy is offered too late, the foal might already have acquired an infection that'll be even harder to treat.

The vet can check the antibody concentration in the mare's colostrum (hold around 2mL aside before the foal gets to it). Even if it is good colostrum, keep in mind that the foal can still become immuno-compromised if it doesn't drink enough. That's why we recommend to have your vet do an antibody-blood test when the foal is 18 hours old to decide whether the foal needs any extra support.

Do you have a pregnant mare and would you like to be prepared? The NZ Equine Research Foundation has published a nice booklet for horse owners. It takes you through everything you need to know. Please contact us if you would like one.

LAMINITIS vs FOUNDER

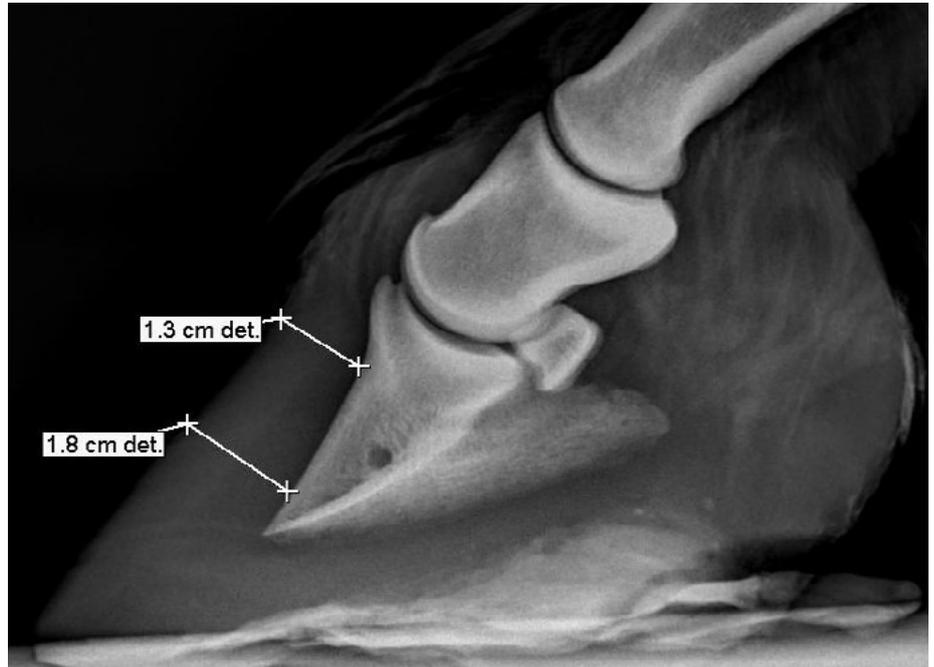
Anna van Bergen

Did you know the terms laminitis and founder do not mean the same thing?

Some owners will describe their horse as foundering when their horse is actually suffering from laminitis. So what's the difference?

Laminitis is a disease of the feet. It literally means "inflammation of the lamini". The lamini are what make the connection between the pedal bone (also known as coffin bone or P3) and the hoof. The pedal bone is suspended in the hoof by these lamini, which keep it firmly in place. This is necessary because the horse's weight and the tendon that is connected to the pedal bone create forces that would otherwise move it. When the lamini inside the foot become inflamed, the local swelling that goes with it causes the lamini to lose their grip and the connection between the bone and the hoof wall becomes unstable.

When the lamini lose their grip, the forces that are put on the pedal bone can cause it to shift. The horse's bodyweight can cause the pedal bone to sink down inside the hoof. The



deep digital flexor tendon, which attaches to the pedal bone, can cause the bone to rotate by pulling the toe tip backward. When these incidents occur, it's commonly called "founder" or a sunken bone can be called a "sinker".

As you can imagine laminitis is an extremely painful condition. An acute episode of laminitis is an emergency situation that needs to be handled ASAP! If this does not happen in time, the horse can start to founder. Once the pedal bone sinks or rotates, the prognosis becomes poorer. After initial treatment, some horses can be managed long term with special shoeing for extra support and corrective trimming

(often calculated from radiographs). Founder however can be too painful for a horse to have a good quality of life, in which case euthanasia becomes the only option.

Laminitis is a serious condition that can have lifelong effects on a horse (and therefore the owner). It is important to find the cause of laminitis and treat it, otherwise it is likely to recur.

Do you have questions about laminitis or founder? Or do you think your horse might be at risk? Call us on 06 356 5011 or e-mail awapuni@tvq.co.nz to talk to one of our vets.

OUR SERVICES

- Vaccinations
- Castration
- Pre-purchase exams
- Dental exams
- Nutrition
- Reproduction exams and AI
- Lameness exams
- Wounds & emergency care
- General health exams
- Radiography
- Endoscopy
- Electrocardiography

Just a reminder that our afterhours services are shared with Equivets to ensure you all get an equine vet in an emergency (027 487 8479).

UPCOMING EVENTS

DONKEY BUSINESS Seminar
9th September

EQUINE DENTISTRY Seminar
29th September