

Welcome to the

## WINTER NEWSLETTER 2023

### Meet the Team

With new clients and changing faces we thought it would be best to re-introduce the equine team at Catley...

**Craig** - Craig is our Clinical Director and captain of the Catley Ship, having been here since 2007. He is an accomplished equine vet, with additional qualifications in Veterinary Anaesthesia and Equine Medicine. He enjoys every aspect of equine practice but particularly wounds, laminitis, gastroenterology and ophthalmology. Craig is married to Jodie who is also a vet and they have 3 children, 2 of which ride and are active members of the Essex and Suffolk Pony Club.

**Grace** - Grace is a familiar face at Catley. She is particularly interested in lameness and poor performance cases and is currently working towards an additional qualification in "Lameness and Therapeutics" and generally loves getting to know all her patients, clients and their aspirations. In her spare time, she is busy entertaining her 15month old baby, Marigold, horse, Dermot and dogs, Tessy and Pumpkin.

**Pedro** - Pedro is an Equine Vet Clinician with 10 years of experience, including work throughout Europe before joining the Catley Team in March 2023, as our out of hours vet. He is dedicated to various aspects of equine practise and in his free time enjoys music, water sports and cycling.

**Charlotte** - Charlotte qualified in 2022 and has been with Catley Cross ever since. She is interested in all aspects of equine work, finding working with nervous horses especially rewarding, and is also keen on farm animals including sheep, goats and camelids! In her spare time, she plays football, loves to read and explore the local area.

**Natalie** - Nat is an equine vet who has worked in several of the big equine hospitals before joining us at Catley. She enjoys fast paced emergency and critical care work the most. Outside of work Nat dances and enjoys gaming.

**Becky** - Becky is an experienced horse woman having worked with elite event and dressage riders. She looks after our inpatients and often will be seen on the road helping our vets with x-rays and lameness investigations and enjoys getting to see healthy horses go home!

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**Louise** - Louise has been at Catley for 10 years and is our yard manager as well as keeping the team organised. She really enjoys nursing our sickest patients as well as chatting with clients.

**Isla** - Isla joined Catley in 2021 and is both a Small Animal and Equine Nurse. She has previously worked in Newmarket and has a degree in Equine Management. Outside of work she enjoys riding her motorbike and walking her pack of dogs!

**Lucy** - Lucy has been at Catley for 5 years and now manages the office team. She is kept busy at home with her mare and foal (soon to be weaned) and is usually seen about the practice with her 3 Pomeranians following closely behind.

**Daisy** - Daisy has been at Catley for the past 5 years and is now starting a new role sorting our equine insurance cases. She hopes she won't be needed but is always a friendly knowledgeable voice at the end of the phone!

**Steph** - Steph has been at Catley cross for 2 ½ years and is part of our admin team. She is a friendly voice at the end of the phone and is always happy to help. Outside of work she is kept busy with her crazy toddler and 2 crazier spaniels, Boo and Luna.

## A Happily Ever After story

Last Easter, poor Xena, like many other of our patients, came down with a terrible bout of laminitis. Laminitis is the painful inflammation of the connective structure, laminae, which joins the pedal bone to the horse's hoof. This inflammation can lead to death of the laminae, and collapse of the pedal bone. Despite swift intervention from her dedicated carer, Penny, and the implementation of pain relief, diet restriction and deep, soft bedding, she continued to worsen over the following week.

Xena already suffered from PPID (Cushing's disease) which was already medicated, but further investigation confirmed she also suffered from Equine Metabolic Syndrome. Equine Metabolic Syndrome causes horses to become resistant to insulin, as well as having improper distribution of body fat. Over 80% of horses with laminitis will have one or other (or both) of these hormonal diseases as the underlying reason for their laminitis. Xena started additional medication to help regulate her insulin levels, which then prevented further damage to the laminae.

Grace x-rayed her feet to assess the degree of movement of her pedal bones within the hoof, and then Penny's wonderful farrier Ricky Hilton trimmed the feet to help correct the movement of the bone and fitted special glue on shoes. These helped to reduce further movement of Xena's bones, and ensured she had adequate support therefore improving her comfort.

Xena required intensive careful nursing, monitoring and farriery, and for a long time we were not sure she would recover; but her fighting spirit and loving team around her meant that this half term she was able to go for a little walk up the road with her little boys Oliver and Will, and will return to pony club soon.

It brings us so much joy to see our sickest patients return to health, and love supporting our clients through the journey. This wouldn't be possible without the help of other professionals including farriers, physiotherapist, osteopaths and instructors.



# Unpacking lambing- the do's and don'ts

Spring can be a stressful time of year for smallholders, whether you have goats, alpacas, sheep or pigs. Through this article we will discuss the must haves, what you can do to help your animals and when to call your vet. This is a general article covering many different species. For more specific advice feel free to give us a ring and someone will be happy to talk through any concerns you may have.

The first step is always to have a registered vet and ensure everyone working with your animals knows who your vet is and how to contact them. This can save valuable time in an emergency and allow you to get advice if needed.

## STAGES OF LABOUR:

- First stage: cervical dilation. You may see behaviour changes such as refusal to eat, isolation from the group, restlessness (pawing at ground, alternatively standing and laying). At the end of the first stage of labour the cervix is fully dilated, and the water bag appears.
- Second stage: expulsion of the foetus. You should see the water bag rupture and contractions should follow very shortly. The head should appear nose first with two front limbs alongside in what is commonly known as a 'diving' position. Sometimes the foetus can be born still in a sac, if this happens it is important that the bag be opened immediately, or the newborn can suffocate.
- Third stage: expulsion of foetal membranes. This should occur within maximum 12 hours in goats, sheep and pigs, maximum 6 hours in alpacas.
- After delivery: check the milk is present and ensure the newborn suckles promptly (within 30 minutes in kids, lambs and piglets, within 2 hours in crias). If the udder is hot/hard/swollen, the dam shows signs of pain or the newborn will not suckle, this will need immediate attention. Clean your hands and arms thoroughly with soap and warm water, do not touch your face or eat until this is done.

## WHEN TO CALL YOUR VET:

- If your animal has been labouring without any progress for more than 30 minutes
- If you see a pink fleshy dome protruding (this may be a vaginal or uterine prolapse)
- If the fluid sac is red instead of yellow (red bag delivery)
- If you are not familiar with the labour process of your animals
- If the newborn is not on its feet and drinking promptly
- If mum is rejecting the newborn (refusal to allow to drink, not licking the membranes off, headbutting, kicking etc)
- If the placenta is not delivered promptly
- If mum is refusing to stand after delivery

## WHAT TO HAVE - BOX CONTAINING

- Arm length disposable plastic gloves
- Obstetrical lubricant (minimum 1L)
- Lamping ropes and snare
- Dry, clean towels
- Clean bucket of warm water
- Clean, dry place to go with deep straw bed
- Warming apparatus

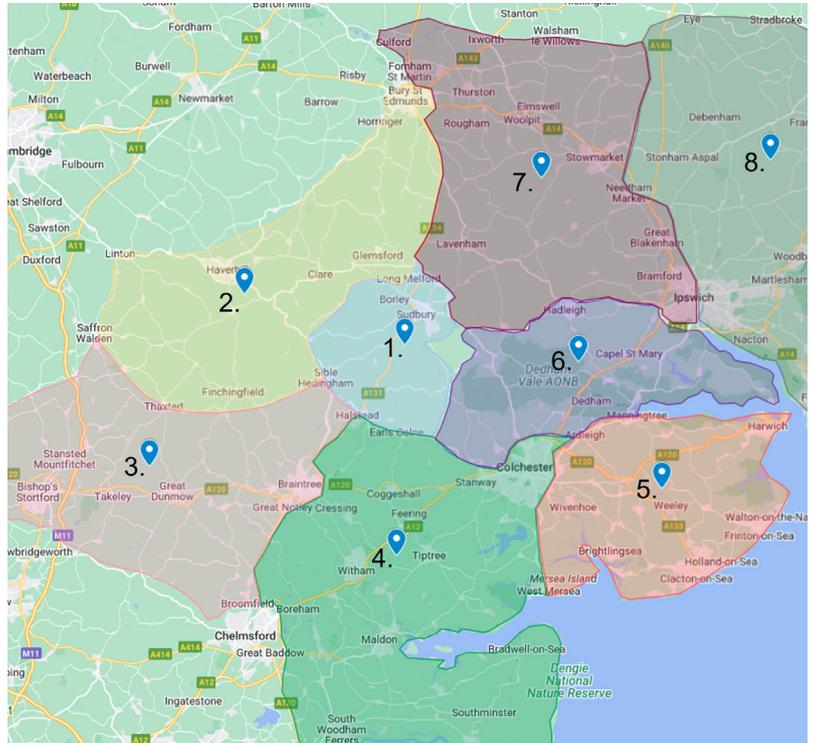


## Area Day Launch

We are also excited to let you know that we will now be offering Area Discount days. On a set day each month we will be in each Zone (please see the map for your zone) and your visit will be half price, per premises attended. This is a fantastic opportunity to save money on your routine health care, such as vaccinations, dentistry, prescription checks and blood tests. Our zone days are as follows:

- Zone 1** First Tuesday of every month
- Zone 2** Second Tuesday of every month
- Zone 3** Third Tuesday of every month
- Zone 4** Fourth Thursday of every month
- Zone 5** Second Thursday of every month
- Zone 6** Third Thursday of every month
- Zone 7** Fourth Tuesday of every month
- Zone 8** First Thursday of every month

We are also able to offer a free of charge visit if 5 or more horses are seen on a premises through out the month and are happy to arrange "Yard Days". Please call the office if you wish to know more. Keep an eye out for our Healthy Horse club, launching soon, which will be another way to help save some pennies and spread the cost for routine care of your horses and ponies.



## Worming Programs from just £1 a week

As the year draws to a close, it is time to start thinking about plans for next year, and one of the most important considerations is parasite control for your horses, ponies and donkeys. We offer a comprehensive worming program which can be tailored to your specific needs. The standard program is £52 and consists of 3 faecal worm egg count kits and your Autumn wormer as well as unlimited worming advice throughout the year and 10% off any wormers needed. We can adjust the cost if you do not require a wormer per horse.

Anthelmintic (de-wormer) resistance is a growing problem in the equine world, and we have growing concern regarding the impact of wormers on the environment. We can also offer a "wormer free" program, which incorporates a tape worm saliva test and blood test for encysted redworm (as well as the visit needed to take the blood, on an area day), 3 faecal egg counts, and unlimited worming advice for the price of £120, as well as 10% off any wormers needed following testing. This program is ideal if your horse is in a settled environment and not sharing fields with a changing herd.

# No Scope, No Hope! The Low down on Gastric Ulcers

Gastric Ulcers are a problem which many horse owners are already familiar with, and often are a diagnosis made alongside other problems.

There are 2 different types of gastric ulceration, which relate to the area of the stomach they effect, and each type has a different underlying cause.

Squamous ulcers affect the top portion of the stomach. This area of the stomach shouldn't usually come in contact with the stomach acid, and therefore, it can splash up and cause the classical gastric ulcer lesions. These ulcers are often caused by insufficient fibre in the diet, intensive exercise, lack of access to sufficient fresh water, excessive grain or cereals in the diet or potentially stress and pain.

Glandular Ulcers affect the lower portion of the stomach. This area of the stomach produces the gastric juices and is designed to tolerate the high acidity levels normally present in gastric fluid. The risk factors and causes of glandular ulcers is still unknown but there is increasing suspicion they are associated with underlying disease or chronic stress. When ulcers occur in this area it is usually around the pylorus (exit of the stomach) and often they do not look as dramatic as the squamous lesions.

Both squamous and glandular ulcers can produce similar symptoms; weight loss (or poor weight gain), poor coat quality, "girthy" behaviour and trouble tacking up, poor performance and behavioural problems under saddle and general stressy or grumpy behaviour. Confusingly, these symptoms often overlap with those caused by other conditions.



Treatment of ulcers can be very effective but may be costly and outcomes differ depending on type of ulcers the horse has. Experts therefore recommend confirming the presence of gastric ulcers via gastroscopy rather than treating blindly. Gastroscopy requires the horse to not be given food for 12 - 16 hours before examination. The horse is given some sedation prior to an endoscopic camera being passed into the stomach via the nose. We can perform gastroscopy both at the clinic and on your own yard. Often owners will choose to bring the horse into the clinic to be 'scoped'. This means we can ensure your horse does not eat his bed and avoids the scoping being delayed by the veterinary team being caught in morning traffic – much appreciated by the horse, having already been starved overnight! It also allows other investigations such as x-rays and ultrasound to be carried out at the same time.

On the 18th January 2024 we will be hosting our second Gastroscopy Day, where we will be able to offer gastroscopy at the clinic at a substantially discounted cost of £170 (including VAT) This price includes overnight livery at the practice, sedation and the cost of the procedure, as well as a consultation and brief lameness examination of the horse prior to scoping, as we know most horses with ulcers will have an underlying musculoskeletal problem.

