



21 HILL STREET KILMARNOCK KA3 1HF

Phone: 01563 522701
Website: www.mbmvetgroup.co.uk
E-mail: admin@mbmvetgroup.co.uk



WINTER 2014

Everyone Meet Natalie



Some of you may have already met our new equine vet Natalie.

Natalie graduated this year from Glasgow University and has been helping Mhairi with her calls recently so that she can take over when Mhairi goes on maternity leave in the new year!

We have known Natalie for a while as she is from Kilmarnock and has seen practice with MBM as a student. Natalie is interested in all aspects of equine work and has spent time at a charity clinic for working equids in Morocco. In her free time she likes to play netball and ride her horse, Rio.

Natalie looks forward to meeting you and all of your horses!

At this time of year our vets sedate a lot of horses to allow them to be clipped. It is very important that when clipping sedated horses you still treat them as dangerous. It is incredible how quickly a sedated horse can wake up and lash out, even if the second before it was sleepy and wobbly.



Please wear a hat when clipping and take the greatest of care when working around sedated animals!



WISHING EVERYONE A VERY MERRY CHRISTMAS & A VERY HAPPY NEW YEAR.

Please note we will be open as normal throughout the festive period with exception of Dec 25th, Dec 26th, Jan 1st and Jan 2nd when we will be closed for any routine work. We hope not to have to see you over the festivities but we are always here if you have an emergency and need our help.

Also, if your horse or pony is on any long term medication we recommend making sure you have enough of this medication to last over the Christmas period in order to avoid any upset to their routine.

Talk About Laminitis Scheme

This year we have had a massive response to the Talk About Laminitis (TAL) scheme which tests horses for PPID (Cushing's disease) by using elevations in the hormone ACTH. The total number has exceeded the combined 2012/13 years and showed a distinct trend.

Most older horses seem to test positive for PPID even if they show no clinical signs (foot pain/ laminitis, excessive drinking, or curly hair coat) and although the disease was previously thought to affect older horses only, has in fact been shown to affect a significant amount of the horse population from the age of 10-12 onwards. This has brought about recent developments in testing technology which uses TRH to stimulate the pituitary gland in a young horse which would normally test negative on a routine ACTH test.



Figure 1: A horse showing long hair coat, sweating, and changes in feet.

Why is this important?

PPID affects most body systems to one extent or another. PPID causes overproduction of the hormone cortisol, which is a stress response hormone. This has a lot of beneficial effects such as reducing inflammation but long term exposure can lead to damage to most organ systems. It does this by interfering with the actions of normal homeostatic (housekeeping) hormones and enzymes. Cortisol influences all body processes but seems to have a profound effect on normal insulin function (allowing normal cellular metabolism) and also on the liver, heart, feet, and kidneys.

These changes will be present many years before the horse goes onto develop the classical clinical signs normally associated with PPID. In a younger horse these will definitely limit performance and can seriously affect the animal's longevity. Due to this all poor performance investigations in the clinic in horses over 14 years old will now include a TRH stimulation test to pick up any early evidence of PPID.

If you are concerned your horse may have PPID then please contact the practice to discuss this with a member of the team.

Equine Sarcoids

At this time of year with many horses being clipped, owners often call the equine office having found lumps and bumps that have mysteriously appeared out from underneath all that fluff! Occasionally these lumps are diagnosed as sarcoids.

Sarcoids are commonly occurring skin masses that can be seen in all species of equines (including zebras and donkeys). Although sarcoids are a kind of tumour, they are benign and (in all but EXTREMELY rare cases) do not spread to the internal organs of the horse.

All ages, breeds and sexes of horses can be affected. Sarcoids are thought to be caused by a kind of virus (Bovine Papilloma Virus) which can be spread by flies between horses. However not all horses exposed to these factors will develop sarcoids, indicating there is a genetic susceptibility to the disease. Sarcoids commonly develop in the site of previous wounds.



Sarcoids are troublesome for many reasons, firstly they can be unsightly, but more importantly if left untreated, can grow and become ulcerated or infected which can interfere with the performance and in some cases the quality of life and ultimately the welfare of the horse.



Not all sarcoids look the same, there are several different forms: verrucose, occult, nodular, fibroblastic and malevolent (rare). Multiple types of sarcoids can be present on one horse, these horses are classed as having a mixed population of sarcoids. The lesions range in appearance from small, hairless, scaly regions to large ulcerated nodules. The most common sites that sarcoids develop in are the chest (particularly the folds of the front legs, groin, sheath/udder region, and face (especially round the eyes and mouth). Some lesions may remain static in size; others grow quickly and more aggressively.

There are various treatment options available including surgical removal, cryotherapy (freezing with liquid nitrogen) and topical creams. Which treatment (if any) is appropriate for each horse will depend on the type and extend of the sarcoids present. Unfortunately no treatment is 100% successful and there is no guarantee that sarcoids will not recur or develop elsewhere on the body, however early identification and prompt appropriate treatment will improve the chances of resolution of this frustrating condition.

Saying Goodbye

I am writing this article as a horse owner and not as a Veterinary Nurse. I am sure, like many horse owners, I was in some way hoping for a minor crisis to take the responsibility of the 'Big Decision' away from me. One day, during a conversation with a client of MBM at the clinic regarding an emergency euthanasia and a planned one, albeit both extremely difficult, she found the latter less distressing, I then started to think more about what was right for my own horses.

I had known since last year that I had a very important decision to make at some point regarding my older retired show jumpers. Harry or 'Uncle Harry' as he became known due to his status amongst my youngsters, had been slowly losing weight over the past few winters and Abi had an old tendon injury which was now affecting her mobility and she was reluctant to mix with my other horses at the farm.

This was not a decision I was going to take lightly but nevertheless I knew I had a responsibility to my horses. I was very fortunate to be in the position I am, which meant I was able to discuss this further with the vets at work. Having said this, I still booked the appointment by text message to avoid any tears while working.

The reason for me writing this article is to encourage my fellow horse owners to speak to your vet or even myself at the practice to discuss euthanasia – even if it is for some time in the future – or to discuss treatments/tests to assist your older horse through winter, or even to discuss the finer details of how you as an owner would like the euthanasia to go;

- Would you like to be with your horse?
- Where would you like the appointment, at the yard or at the clinic?
- Would you like to be in the stable or in the field?

And for afterwards would you prefer cremation, the traditional method of collection or burial away from any waterways if the horse is a pet? Does the stable or area you wish the euthanasia to be performed have access to remove your horse afterwards? These things are all so difficult to think about when their big nose is nuzzling in your pocket for a sweetie but I honestly felt it then made the run up to the day that little bit easier.

I miss my old horses and think about them every day but for me and most importantly for them, I did the right thing and do find relief in knowing this. There is no right or wrong but I think the important thing is that as horse owners we know our options and we can be as prepared as possible for the day when that time comes.

Common indicators that your older horse may be struggling:

- Not mixing with other horses, standing in the field corner on their own
- Chronic lameness, ongoing lameness which is non responsive to treatment or painkillers
- Loss of teeth making eating difficult
- Severe weight loss
- Sores over pressure points such as pelvis and elbows (older horses often lean against walls rather than lying down resulting in these sores on the pelvis)
- Lying down for longer periods of time
- Needing help to rise and/or defecating while still lying down



Harry & Abi

For any further information please do not hesitate to contact one of the Equine team on 01563 522701 or visit our website on www.mbmvetgroup.co.uk.