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## Skin Issues

Now that we are well and truly immersed in winter some of your horses and ponies may be stabled more than usual or enjoying some muddy winter turnout where you will be caught up in a constant battle keeping your horses clean and dry. Certain skin problems become more prevalent due to these conditions including ectoparasites and mud fever/rain scald.

Chorioptes mites typically affect horses with a lot of feathering such as Cobs and Clydesdales. The typical signs include stamping and scratching the lower legs. There may be secondary damage to the skin due to the intense itching that the mites cause. The most common treatment for this condition includes two Dectomax (doramectin) injections two weeks apart. Depending on severity, treatment may also include topical antiseptic shampoo and topical antimicrobial creams if skin damage is evident.



Management to reduce the moist, warm environment which encourages mite infestation is also important by ensuring the lower limbs are dry and clean and bedding is replaced regularly. Clipping of the feathers may also be required.

Lice infestations are more common when horses are stabled for longer periods and in close contact with each other as the condition is very infectious. Horses will be itchy and usually present with hair loss on the neck and body indicative of where the horse has been scratching. Lice may also be visible to the naked eye when hair in the affected areas is parted. Topical treatment using an ectoparasiticide, such as Deosect, is required to treat this condition successfully and precautions to reduce the spread of lice should be put in place such as washing rugs and disinfecting grooming equipment.



Dermatophilosis, a bacterial skin condition, is commonly known as mud fever when present on the lower limbs and rainscald when in the saddle region. Horses which are turned out in the field and those that are not rugged tend to be affected due to the likelihood of the skin becoming moist and damaged. The condition is characterised by diffuse scabs in these typical regions and, in severe cases, marked pain and cellulitis. In most horses, topical antimicrobial treatment and washes combined with the daily removal of scabs suffice but some may require systemic antibiotics and anti-inflammatories. In horses which are prone to the condition, prevention should include trying to keep skin dry and ensuring legs are effectively cleaned and dried following turnout if your horse is prone to mud rash. Barrier creams may also be beneficial as an adjunct preventative measure to provide physical protection to the skin.

## Vaccination Reminders

This month marks the start of a new courtesy text message service in place of our normal vaccine reminder cards. We can continue with postal reminders if you would prefer; please contact the practice if this is the case.

Whilst we are more than happy to offer this service we would be very grateful if you could do your part as the owner. Please ensure that we have an up to date mobile number for you and please put your horse's vaccination dates in your diary, so, in the case of an error, you are not relying totally upon our text service to keep your horse's vaccinations up to date!



## Foot Penetrations

A penetrating injury to the foot is a very serious and potentially life threatening condition. The horse's foot contains many important structures and penetration by a sharp object should always be investigated. Depending where the object has entered, in what direction and to what depth can impact on the outcome (see pic 1).

If your horse has stood on a nail or sharp object which is still within the foot, **LEAVE IT IN PLACE** and **CALL THE VET** immediately. If the horse is trying to stand on the foot, then it may be required to try to cut the object at the level of the sole so weight bearing does not push the object further into the foot or applying bandage material to the sole to 'build up' the foot to prevent weight bearing on the object. If you must remove the object then please **KEEP IT FOR REFERENCE** and make a note of the point of entry and in what direction to allow more accurate assessment by the vet.

Radiographs (figure 1) are recommended to assess the direction and depth of the object in relation to important structures within the foot.

Contrast is often injected (figure 2), to assess if the coffin joint or navicular bursa have been penetrated. If the tract has only gone through the sole, opening the tract with a hoof knife and poulticing/bandaging the foot until the tract has healed is necessary. Unfortunately, some injuries do involve important structures and the optimal treatment is flushing of the affected structure(s) surgically, which is very expensive and has a fair to guarded prognosis.

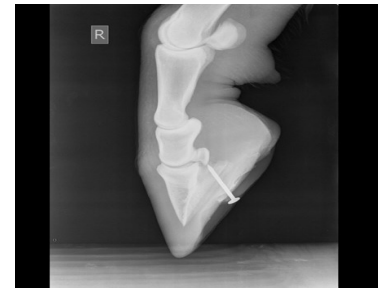


Figure 1—Radiograph showing a nail in the foot towards the navicular bone/bursa

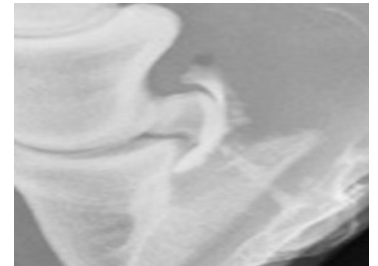


Figure 2—Contrast injected into the tract has filled the navicular bursa, indicating it has been penetrated by the nail

## Why Is My Horse Coughing?

Unlike humans, horses only breathe through their nose and being athletes their lungs have a very large internal surface area to allow them to perform to the best of their abilities. The airways of the horse, as in humans, are prone to irritation and often the reason for this irritation is quite obvious, such as dusty hay or bedding.

RAO (Recurrent Airway Obstruction) is a term you are likely to hear used and refers to a hypersensitivity reaction which produces airway spasm and results in a cough. The most common allergens encountered tend to be dust, mould spores, ammonia from urine etc. Management of these cases is aimed at reducing the exposure of the horses to these allergens. Dust from bedding can be reduced by moving to rubber matting, shredded paper/cardboard or dust extracted shavings. Removal of wet bedding promptly can reduce how much ammonia is found in the stable environment. Making a plan for cleaning the stable as part of your routine should minimise the dust load. Soaking or steaming hay should reduce the volume of dust produced but may affect how keen your horse is to eat the hay.

Summer pasture associated RAO is generally a reaction to grass and pollen and is sometimes a challenge to manage. Generally the more turnout for a horse with RAO, the less the horse will cough. Medical treatments from your Vet generally are a combination of anti-inflammatories and bronchodilators. Bronchodilators, like 'Ventipulmin', act to increase the airway diameter and anti-inflammatories, such as 'Equisolon', act to reduce the inflammation within the lungs.

Please contact us to discuss your individual case.

## Worming After Winter

It is that time of year again to worm your horse for encysted redworm and tapeworm, if you have not already done so.

We recommend giving a 5 day course of Panacur Equine Guard to treat any encysted redworm, regardless of low faecal worm egg counts during the year.

Please treat for tapeworm with Equitape, in cold weather if possible, as tapeworm has been linked to spasmodic colic episodes.

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!

