

Wright & Morten Equine Newsletter



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Meet the team:

Over the next few weeks we would like you to get to know us more as a team, be able to put faces to names when you call the clinic, and understand what we like/dislike etc. etc...

Mark

Mark joined the practice way back in 1999, when we were still working out of a converted house in Macclesfield. During this time some things haven't changed - he still sees some of the same clients he did more than 20 years ago - but lots of other things have changed a lot. Seeing us into our new clinic was a proud moment as it gave us the scope to offer the highest quality care to our patients. Mark loves working as part of a big team, where everybody develops their skills and uses them to best advantage - and has encouraged the clinical vets and nurses to follow the paths that interest them the most. Mark does a great deal of equine dentistry, both routine and advanced referral work. He has been part of the generation of equine vets who redeveloped equine dentistry and as specialist interest in itself, using techniques that are now commonplace, with sedation, head torches and motorised equipment. We now commonly do fillings and advanced extractions at the clinic. All this means that we are better at treating our patients than we were when Mark first arrived at the practice 20 years ago, and these advances in veterinary medicine mean both happier horses and people.



Rachel

Rachel has been here for three years, but has lived in Cheshire her whole life. Rachel has a beef and sheep farm in Macc forest and can often be seen out on the road with one of her many collies. In her spare time she cooks, competes in sheep dog trials and hacks Poppy through the forest. Her main areas of interest include equine medicine with a particular interest in gastroscopy and endoscopy, and anaesthesia.



Lara

Lara has been with the practice three years, and manages the clinic diary and reception. Lara deals with all admissions and keeps clients up to date with their horse's progress whilst in the clinic. In the old days she would be the one making the brews! Lara also manages social media and is part of the office team answering the many phone calls. In her spare time Lara spends a lot of time riding and competing Jules, her Belgian warmblood, walking and socializing when we are allowed.



Goodbye...

In February we said good bye to two of our vets - Liz and Lucy. Both have been with us for several years and many of you will know them well. In true Wright and Morten style we had lots of food and cakes as we said a socially distanced, fond farewell to them. We wish them both well in the future both personally and professionally.

We will be introducing two new vets to you in the very near future... watch this space!

100 Moredun * Centenary



Equine Grass Sickness Webinar for Horse Owners

Calling all horse owners interested in helping us to find solutions to this dreadful disease.

Join us on Thursday 25th March 7.30-8.30pm to hear about our new research project using a fresh approach to investigate the causal agents involved in EGS. Find out about how you can help us develop the new national biobank and database, critical to help further research into this devastating disease of equids.

Chaired by Anne Logan, MRCVS, Loch Leven Equine and EGSF Chair, with short updates from Drs Beth Wells and Kathy Geyer, Moredun; Sylvia Ormiston, Balmoral Stud Manager; Sophie Cookson, Welfare Manager, BHS and Donald McLean, MRCVS, experienced EGS vet. With a Q and A chat box session at the end to answer all your questions.

This is a free webinar but please register your attendance at:

<https://www.eventbrite.co.uk/e/horse-and-pony-owners-egs-ambassadors-webinar-tickets-142695272401>



Then follow the link given to join the webinar. We look forward to seeing you there!

A to Z of donkey health

A **Average** body weight of a donkey is 160kg, (*height approximately 11 hands*). There are also miniature donkey breeds, as well as larger donkey breeds such as the *mammoth ass* and the *rare poitou donkey*.

B **Bonding** - donkeys are social animals and like company. They develop strong bonds or attachments to other donkeys (*or other animals*), and for this reason should not be kept as lone animals. If separated from their companion, even for a short time, this can be very stressful, leading to depression and anorexia, and can precipitate hyperlipaemia (see later)



C **Colic** is a term for abdominal pain - a clinical sign that has many causes, most of which are the same as in horses. However presenting signs may be different to those seen in horses; dullness and inappetence may be the only signs noted, *due to the stoic nature of the donkey*.



D **Dullness** and depression may be the only symptoms exhibited for many diseases in the donkey, *due to the stoical nature of the donkey*. Reduced appetite (anorexia) may also be noted. This means that a disease may be at an advanced stage before it is noticed. A vet will always treat a call to a dull donkey as an emergency, as it may potentially be a very sick donkey.

E is for **Equus asinus**, the latin name for donkey. E is also for 'Eeyore', probably the most famous donkey in the world!

F **Foot trimming** should be carried out every 8 weeks. Donkeys' hooves are smaller, and more upright and boxy than those of horses. The horn has a higher moisture content. As the donkey evolved in an arid desert environment it will be prone to foot conditions such as abscesses and seedy toe in our wetter UK climate.



G **Gelding** or castration of the male donkey should be performed under general anaesthesia, using what is known as a closed castration technique. This enables a ligature to be placed, reducing the risk of post operative bleeding.

H **Hyperlipaemia** is a life threatening disease. It can be primary or secondary- if a donkey stops eating fat reserves are mobilised to be converted to glucose for energy, resulting in high levels of lipid in the blood stream, which is then deposited in organs such as the liver and kidney, leading to organ failure. Early clinical signs are easy to miss, and treatment needs to be early and rapid to be successful.

I **Impactions** of the large intestine are the most common cause of colic in donkeys.

J **Jam** sandwiches are a useful way to give oral medication to donkeys. Ginger nut biscuit sandwiches also work well!

K **Ketamine** is an injectable drug used to induce general anaesthesia. The adaptation of the donkey to its natural desert environment has led to changes in its metabolism, meaning that the drug is metabolised more quickly than in horses, so the dosing interval is more frequent.

L **Laminitis** is a painful condition affecting the feet. Overweight donkeys are at increased risk of laminitis. It can present differently to laminitis in ponies, with alternate lifting of the feet, or lying down more.

M **Mule** is the offspring of a donkey stallion (jack) and a pony mare. Mules are infertile due to their odd number of chromosomes (63).

N **Nutritional** / energy requirements of a donkey are 25% less than a similarly sized pony. They are very efficient at metabolising food, having adapted to live in a desert environment on sparse fibrous vegetation. Restricted grazing, supplemented with straw is sufficient for most donkeys. In the winter hay can be substituted for 50% of the straw.

O **Obesity** is very common in UK donkey population, because our pastures are very nutritious, compared to the sparse vegetation they have evolved to live on.

P **Pars** Pituitary Intermedia Dysfunction (PPID) or Cushings disease commonly affects older donkeys. This disease increases the risk of developing laminitis; PPID can be managed with a drug called pergolide.

Q **Quiet** behaviour may be normal behaviour particularly in an older donkey, but it can also be an early symptom of illness, so knowing your donkeys' normal behaviour and checking them regularly is very important.

R **Respiratory** disease in donkeys can be caused by viral or bacterial infections, parasites and allergies. Symptoms include, nasal discharge, coughing, increased respiratory noise, rate or effort, general dullness, or anorexia.

S Donkeys are **stoic**, which can make detection of disease difficult.

T for **teeth**, donkeys have up to 44 teeth. These erupt throughout life, and develop sharp enamel points which require regular removal to prevent discomfort when eating. Even with severe dental disease donkeys will rarely show any symptoms or lose weight, so yearly examination is required to detect and treat tooth problems.

U **Unusual** behaviour can be a sign of underlying disease.

V Annual **vaccinations** should be given against equine influenza and tetanus.

W Shelter is necessary for donkeys as they do not have **waterproof** coats.

X **X-rays** can be used to help assess the pedal bone within the hoof- overgrown, laminitic, pedal sepsis, foot disease common


Y **Yards** can be useful areas for donkeys to stand on to limit access to grazing and help prevent obesity.

Z **Zeedonk** is a cross between a zebra and a donkey.



EQUINE CLINIC

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