

SPRING 2018

Spring has sprung. It's warming up, but we're hoping for more spring rains on the horizon as well.

Eyelid Entropion in Foals

Spring is here, and with it one of the best parts of our job: new born foals! Foals can require veterinary attention for a variety of reasons, one of which is eyelid entropion.

Entropion is when the eyelids roll inwards, causing contact of the external eyelid skin and hair with the surface of the eye. This can cause irritation and ulceration of the cornea, the surface of the eye. This can happen due to dehydration or weight loss, both of which cause the eyeball to sink backwards into the head, or can be because the foal hasn't yet "grown into" the size of its eyelids.

Treatment involves placing sutures or staples to reposition the eyelid margin. The sutures are temporary as most cases will resolve themselves with time and not require permanent surgical correction. In the occasional case where surgical correction is required, this is delayed until the foal has reached adult size.

Other treatments that may be required are rehydration of the foal (either oral/tubed fluids or IV fluids) if necessary or 'plumping' of the eyelids with injected saline to cause them to roll outwards.



(a)



(b)

Figure (a): entropion of the lower lid in a foal. (b): entropion corrected with sutures.

(Source of photos: McKinnon et al, *Equine Reproduction Second Edition 2011*)

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Vet Nurse's Day Celebration

Friday the 12th of October marked Vet Nurse Day. The day offers an opportunity for the veterinary industry to recognise the tireless work done by all the vet nurses working in clinics around the country. All of our hard working vet nurses were treated to a lunch out at the Malt Shed Brewery as a mark of our appreciation for their work. They had a great time and always appreciate the messages of thanks from our clients for their hard work nursing all our patients back to health.



Septic Shock

Septic Shock is a disease syndrome that occurs in animals with severe infections. It is a body wide inflammatory cascade that is triggered by the release of bacterial toxins from a site of infection or by spreading of bacteria themselves into the blood stream (septicaemia). This disease state is very serious and can develop from multiple types of infection in the body. Examples of this include pyometra (pus infection of the uterus), severe dental disease and infections post dog bites. The syndrome is characterised initially by fever, rapid heart rate, lethargy and brisk red gums. As time progresses the heart rate can slow and blood pressure drops. The gums become pale and the animal's ability to get up and move around diminishes. The further the syndrome progresses the harder it is to correct and the poorer the prognosis for recovery becomes.



Treatment of septic shock is aimed at first rapidly identifying that the syndrome is developing. Then efforts to remove or kill off the bacteria must be made. This may be with aggressive antibiotic therapy or surgical drainage or excision. Concurrently shock (the state of lowered blood pressure) should be attended to with IV fluid therapy and other medications as required.

Early identification and treatment is best in this disease syndrome. Any dog or cat that appears to have an infection and is getting worse in their appetite or energy levels should be assessed to see if the infection's effects are starting to spread to other parts of the body.

Tim Craig BVSc

Warby St Veterinary Hospital

NEWSLETTER MAILING LIST

We produce a 4 page newsletter every season to keep our clients informed about the goings on at Warby St Veterinary Hospital and the Wangaratta Equine Hospital. We send the newsletter out with our statements each time it is printed, but also deliver it electronically by email. If you would like to receive the newsletter in your email inbox you can either email me your address at tim@warbyvet.com.au or fill out the slip below and return it to Warby St Vet Hospital or Wangaratta Equine Hospital in person or by snail mail.

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Vaccination of Cattle Against Clostridial Diseases

The clostridial diseases – blackleg, pulpy kidney, black disease, tetanus and malignant oedema - cause death of cattle (and sheep and goats) throughout Victoria, and can result in substantial losses for individual properties.

Clostridial diseases are caused by bacteria found in soil and faeces. They form highly resistant spores that survive for a long time and are widespread in the environment. Cattle rapidly become unwell when the bacteria enter the body (via cuts or ingestion) and conditions in the body allow multiplication of the bacteria and/or toxin production.

Clostridial diseases can occur in cattle of any age, but are more common in younger animals. Marking/castration, dehorning and calving injuries create an opportunity for bacteria to enter the body.

Enterotoxaemia (pulpy kidney) occurs in young, rapidly growing animals, especially after a gastrointestinal disruption caused by a change in diet such as the start of grain feeding.

Black disease occurs when there is damage to the liver, such as that caused by migrating liver fluke.

The 5 in 1 vaccination for cattle protects against the five common clostridial diseases:

Clostridium	Disease caused
<i>C. tetani</i>	Tetanus
<i>C. septicum</i>	Malignant oedema
<i>C. chauvoei</i>	Blackleg
<i>C. perfringens type D</i>	Enterotoxaemia
<i>C. novyi</i>	Black disease



Left: An example of a 5 in 1 vaccination against 5 different clostridial bacterial pathogens

Recommended vaccination course:

Vaccinate calves from 6 weeks of age. Give two doses, 4-6 weeks apart. Give the first dose 4 to 6 weeks before marking, and a booster at time of marking.

Adult cattle which have never been vaccinated should receive two doses, 4-6 weeks apart.

A booster 12 months after the initial two doses will give lifelong immunity to tetanus and blackleg.

Annual boosters are required to maintain immunity against black disease.

Immunity against enterotoxaemia (pulpy kidney) only lasts 3 months. Young stock (up to 2 yo) may require boosters at appropriate intervals, depending on local and seasonal conditions. If there is a change in diet (eg the start of grain feeding) a booster is recommended.

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Base Narrow Deciduous Canines in the Dog

As in humans dogs have two sets of teeth. The initial baby or deciduous teeth fall out and make way for the permanent (adult) teeth from around 4-6 months of age. The loss of the deciduous teeth in the correct manner is important to ensure the adult teeth erupt in the correct positions and move into the correct alignment or occlusion with the other adult teeth. The most common problem we see in this process is the retention of the deciduous canine teeth at the front of the mouth. In some cases the deciduous teeth fail to fall out before the adult teeth emerge from the gums. This causes crowding in the mouth and alters the final position of the adult teeth. The placement of the two canine teeth close together also creates a pocket that traps food and can accelerate gum disease. Tooth root abscesses of the retained deciduous canines are also common. Removal of the retained canine teeth as soon as possible is advised to avoid permanent problems with the placement of the adult teeth. A similar problem to this is base narrow canine teeth. This is thought to be a genetic issue where the lower jaw is narrower than the upper jaw or the angle of eruption of the lower canine teeth is narrow and the teeth end up inside the upper teeth and the tips rub on the hard palate causing discomfort as they form a pocket in the roof of the mouth. It is thought that the tips of these teeth tend to sit in these pockets and this impedes the growth forward of the lower jaw contributing to a situation where the lower jaw is shorter than the upper jaw. This then upsets not only the occlusion of the canine teeth but also the front (incisor) teeth. The rubbing of the teeth on the hard palate causes chronic pain and infections and therefore treatment is recommended. There are several treatments that can be considered. These include orthodontic moving of the teeth as they erupt, removal of the teeth, orthodontic moving of the adult teeth after eruption or shortening of the teeth and capping. It is best to act in the younger dog before the lengths of the jaws are affected. Removal of the deciduous canines when they are noticed to be malpositioned is recommended as soon as possible to try and allow the adult teeth to come up properly. In a recent case we were presented with several pups from a German Wirehaired Pointer litter



Retained upper and lower deciduous canine teeth + food/tartar and gingivitis.



Normal canine tooth occlusion: the lower canine should sit in front of the upper canine and behind the third incisor tooth. It should be angled somewhat outwards so the tips of the lower teeth do not press on the gums. There is a groove in the gum in this position that accommodates the lower canine tooth.

that were showing the base narrow canine tooth issue. The deciduous teeth were removed, but unfortunately the adult teeth also came up in a narrow configuration and rubbing on the roof of the mouth began. Of the options it was decided to try and move the lower canines laterally (outwards) into the correct position. Dental acrylic was used on the tips of the lower canine teeth to form extensions that direct the erupting tooth outwards into the correct position. This method relies on early intervention as it uses the eruption of the tooth out of the gum to drive the movement of the tooth. The extension just guides the tooth in the right direction. After 4-5 weeks the extensions are removed and the teeth polished. All going well they will have drifted outwards into the correct anatomical location.



BEFORE: Left: Erupting lower canine. You can see the lower canine is going to strike the roof of the mouth rather than move out into its correct position. Right: the solid arrow shows a depression in the roof of the mouth where the lower canine tip is pressing a hole. The dashed arrow is where the tip of the lower tooth should be positioned more laterally.



TREATMENT: Lower canine extensions directing eruption of the adult teeth outwards into the correct position (above two images)

OUTCOME: Lower canines engaged in the correct groove. Further eruption will see them reach a normal position.