

Warby St Veterinary Hospital/Wangaratta Equine Hospital Newsletter



WINTER 2017

Right on cue the temperatures have plummeted and there is snow on the hills. Winter is here.

Arthritis Awareness in Horses

DURING MAY/JUNE WE ARE HAVING PROMOTIONS ON ARTHRITIS DETECTION AND TREATMENT IN HORSES AT THE WANGARATTA EQUINE HOSPITAL

At the Wangaratta Equine Hospital we are passionate about helping maintain healthy joints in your horses, particularly those that are expected to perform in racing, trail riding, endurance, jumping, dressage and eventing.

HEALTHY JOINTS MEAN YOU CAN ENJOY RIDING YOUR HORSE FOR LONGER, AND A PAIN FREE HORSE IS A HAPPY SUCCESSFUL HORSE!

During the months of May/June we are promoting arthritis care of horses. Over the winter months we see an increase in horses presenting with mild lameness and degenerative joint problems. A special price on a soundness examination will be offered along with **SPECIALS** on **PENTOSAN** and **HA injections** and **DISCOUNTS** on supplements containing Glucosamine, MSM and Chondroitin.

The Wangaratta Equine Hospital recommends that all performance horses are given PENTOSAN Equine as a preventative for arthritis by lubricating the joint surfaces and producing anti-inflammatory and anti-arthritic effects.

An initial course of 1 injection weekly for 4 weeks is required, then a booster injection 3-6 monthly depending on the needs of the horse. Injections are given intra-muscular and follow up injections can be given at home by a confident owner.

Other products such as feed additives in a powder/granule or gel form that contain ingredients such as Glucosamine, MSM and chondroitin have proven to also offer relief to horses with mild arthritis.

Arthritis Specials at WEH	1
Saddle Thrombi in Cats	2
Newsletter Subscription	
PPID in Horses	3

Calf Scours

Hyulauric Acid (HA) injection is also proving to be very effective. This can be given as a one off intra-venous injection every 3-6 months by a Veterinarian. HA can also be injected directly into the affected joint by a Veterinarian; however this procedure carries greater risks.

Qualified nurses are available to give **PENTOSAN** injections at the Wangaratta Equine Hospital to horses at no charge other than the cost of the **PENTOSAN**.

HA injections are to be given by Intra-venous injection by a Veterinarian only.

4Cyte Gel and Granules are ordered into The Wangaratta Equine Hospital for easy pick up.

Specials are only available for consultations at the Wangaratta Equine Hospital site. For bookings please call (03) 5722 3400

Aortic Saddle Thrombosis in the Cat

A saddle thrombus in a cat is a distressing medical condition that can occur very quickly and suddenly in a seemingly healthy animal. A thrombus is the name given to a blood clot that forms within the bloodstream and moves around with the circulating blood. Often animals that form these sorts of clots may have an underlying heart condition that is contributing to formation of clots. These clots can get lodged or caught in a vessels and cause an array of problems throughout the body.

A saddle thrombus is the term given to a particular type of clot which arises in the heart and gets caught in one of the main branches of the aorta. The aorta is a huge artery that exits the heart to pump blood around the body. From its exit point at the heart it travels down the back of the cat until it reaches the level of the pelvis where it divides in two and is the main blood supply to the hind legs. It is at this bifurcation of the aorta that the moving thrombus (clot) gets lodged or 'saddled', hence the name.

When the blood supply to the cat's hind end is compromised due to the blocked vessels the muscles and nerves in the hind legs do not receive vital oxygen and nutrients. The legs become cold and the muscles start to swell and become extremely painful. Often the cat will not be able to move its limbs properly, will drag one or both of its hind legs or will have complete paralysis of the hind legs. The footpads and skin may turn a dusky purple/blue due to a lack of oxygen. The condition is extremely painful so the affected cat may yowl or have fast open mouth breathing.

Treatment involves pain relief, treatment of shock and blood thinning medication to try and 'dissolve' the thromboembolism. Often investigation of underlying heart problems and subsequent treatment is also required.

This condition is an emergency and if you notice any of these sorts of signs in your cat you should seek veterinary attention immediately.

Dr Kirri Solly-Slade DVM

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.

YES! I'D LIKE TO RECEIVE THE QUARTERLY WARBY ST VET HOSPITAL NEWSLETTER BY EMAIL!
NAME:
NAME:
EMAIL ADDRESS:

"KING VALLEY RUN"

A service for routine work provided most <u>TUESDAYS</u> charging travel fees from:

Glenrowan, Greta, Moyhu or Milawa.

"BEECHWORTH AND MYRTLEFORD RUN"

For routine work most THURSDAYS travel fees from:

Markwood, Everton, Beechworth, Myrtleford

WINTER 2017 PAGE 3

Cushings Syndrome in Horses

Pituitary Pars Intermedia Dysfunction (Cushing's Disease) in Horses

Dr. Kirri Soly-Slade DVM

Pituitary Pars Intermedia Dysfunction (PPID) in horses occurs due to dysfunction of the hypothalamus and pituitary gland which are located at the base of the brain. Due to this dysfunction an imbalance of three hormones (ACTH, dopamine and cortisol) occur and cause multiple changes throughout the body responsible for the clinical presentation of PPID. The prevalence of PPID in horses over the age of 18 is very high.



What are the Clinical Signs of PPID?

The clinical signs associated with cushing's are many and varied and no two cases will present in exactly the same way. Perhaps the most obvious

Classic appearance of a pony with Cushing's Disease. Note the overly long and curly hair coat.

changes are the physical manifestations of the disease. Horses with cushing's often develop a long hairy or abnormally curly hair coat which may not shed or does so irregularly. Other changes in appearance can include abnormal depositions of fat around the body particularly above the eye or around the abdomen (which can give the animal a 'pot bellied' appearance.) Despite this, overall condition of the horse may decrease and a poorly developed topline and weightloss is common.

Horses or ponies with cushing's may experience repeat episodes of laminitis or founder and are often more predisposed to developing infections (for example of the respiratory tract or sinuses.)

Their demeanour may be sluggish or lethargic and there may be a decrease in performance abilities.

Despite all these changes appetite remains intact and often increases along with an excessive water intake and an increase in urination and sweating.

What happens if my horse or pony has Cushings?

Cushing's disease is readily diagnosed by a blood test looking for abnormalities in levels of the hormone ACTH. Once a diagnosis is confirmed treatment is commenced with either a liquid formulation or a small tablet that can be added to a horse's feed and the results can be quite remarkable. A useful resource for owners on this condition is www.prascend.com

Have you "Liked" our Facebook pages?

Search 'Warby Street Veterinary Hospital' and 'Wangaratta Equine Hospital' to follow us and keep updated on pictures of our staff, patients and other fun things every week



Calf Scours

Diarrhoea is one of the most common conditions affecting calves with devastating results if not managed adequately. There are a few different pathogens that can cause scouring and poor nutrition can also attribute. In some cases multiple pathogens may be involved in a clinical case of sours! The table below outlines some of the main causative agents of scouring and when they are likely to occur.

AGE (In days)																										
		1	2	3	4	5	6	7	8	9	1 0	1	1 2	1 3	1 4	1 5	1	1 7	1 8	1 9	2	2	2 2	2 3	2 4	25
	Nutritional																									
	E. coli																									
Patho-	Salmonella																									
gen	Cl. Perfringens																									
	Rotavirus																									
	Coronavirus																									
	Cryptosporid- ium																									
	Coccidia																									
	Nutritional	В	Bacterial									Viral									Protozoan					

Each organism causes a slightly different disease process and may require slightly different treatment protocols but once scouring has begun the consequences in all cases are similar. A cycle of dehydration and electrolyte imbalance will lead to progressive weakness and debilitation of the calf.

Prevention of scours (with a focus on beef herds)

Despite the different causes of scouring in calves there are general things that can be done to prevent occurrence. First and foremast adequate colostrum intake for each individual is essential. Precalving nutrition in the dam is vital for ensuring adequate colostrum production. A difficult or traumatic birth is the most common reason a calf will fail to get adequate colostrum intake, hence it is a good idea this is enabled by supplementary feeding those individuals. Stressful situations such as transport or overcrowding should be avoided. We also need to consider how to avoid the presence of disease causing pathogens in the environment. If possible rotate calving paddocks each year and if you do have a problem in a particular paddock that you should definitely avoid using it again for at least 12 months. If you are able to separate nursing cows and newborn calves to a new paddock A young calf showing evidence of some yellow within 24hours of birth than you will greatly minimise the scour stuck in the fur around the backside. exposure of calves to infection. Introduction of any new animals



(and hence new pathogens) into a nursing mob should be avoided. This includes the introduction of 'bobby calves' in response to neonatal death which is a huge risk factor. Additionally if supplementary feeding is occurring then nutritional management is incredibly important. This pertains not only to the quality of the diet that you are feeding but also to how it is stored, mixed and delivered to the calf.

Dr Kirri Solly-Slade