



Coombefield Veterinary Hospital
Equine Department

Christmas Newsletter 2015

*The Partners and Staff of Coombefield Veterinary Hospital
would like to wish all our Clients
a very Merry Christmas and a Happy New Year*

**Have you bought our 2016 Charity Calendar?
You really should!**

Through 2015 we ran a monthly competition on the Equine Department Facebook page looking for photographs to put together into a calendar for 2016 and they are GORGEOUS!

The calendars are on sale for £5 and ALL the profits will be going to 2 local horse charities, "munchkins miniature rescue" (who rescue miniature horses) and "Horseshoes and Handprints" providing equine based therapy to autistic children. Please support them and adorn your kitchen, office or tackroom with a thing of beauty.



www.facebook.com/coombefieldequinedepartment

Our Christmas and New Year opening hours for 2015 are:

*..The Grinch hated Christmas,
The whole Christmas season.
Now please don't ask why, no one quite knows the reason.
It could be his head wasn't screwed on quite right,
It could be his shoes were a little too tight.
But I think the most likely reason of all
was that he spent the whole season ON CALL!*

Christmas Eve	8am – 4pm
Christmas Day to Monday 28th	Emergencies Only
Tuesday 29 th – Wednesday 30 th	8am – 5pm
New Years Eve	8am – 4pm
New Years Day	Emergencies Only
Saturday 2 nd	10am – 1pm



**IN CASE OF ANY OUT OF HOURS EMERGENCIES
PLEASE CALL 01297 630500**

But rest assured that we have a dedicated equine vet on call for emergencies throughout the festive season. People often say "I wasn't sure if it was an emergency or not" - the easy answer is, if you are worried enough to think "I might need the vet" then call - we would rather speak to you or see your horse, if you are concerned, then not see it!

No Teeth – No Horse



Winter is a good time to think about your horse's teeth. A horse that was coping on grass may have difficulty chewing harder fibre if they have loose or fractured teeth, periodontal disease or just sharp points or overgrowths. Fibrous material like hay needs to be broken down into fine particles before it can be digested. If the horse is not able to do this effectively then it may pass through the gut without being used resulting in loss of condition despite a good appetite. Additionally a horse with oral discomfort may "Quid" – ball up and spit out half chewed fibre.

We advise annual oral examinations for every horse although the frequency and type of treatment required will vary between individuals.

This horse has a diastema or space between 2 of the cheek teeth. Food gets packed in here and decomposes leading to periodontal disease – this is one of the most common oral conditions we see and is very painful, often resulting in quidding, weight loss and difficulty on the bit.

Recurrent Airway Obstruction

What is RAO?

Recurrent airway obstruction is a common, chronic, performance-limiting, allergic respiratory disease of horses. It is often referred to as 'heaves' or COPD. It can affect horses and ponies of any breed, sex or age but is more common in older animals. We often see signs during the winter as horses are stabled more but there is a similar condition seen in the summer due to pollen allergies.

Causes

RAO is caused by an allergic reaction to otherwise innocuous substances – The main culprits being mould spores in hay and dust. If the ventilation is limited these can build up to a high level. When horses breathe these in their immune system launches an excessive response; leading to inflammation of the airways, mucus production and narrowing of the lower airways making breathing difficult. This can look similar to an asthma attack in humans.

Symptoms

Clinical signs range from exercise intolerance, coughing (especially when in the stable), flared nostrils and increased effort to breathe to respiratory distress. This increased effort can lead to the development of a 'heave line', caused by over-development of the abdominal muscles used when breathing.

Treatment

If at all possible, environmental management is the key. Medication will alleviate clinical signs of the disease and in severe cases is essential; however, if the horse remains in the allergen-containing environment, signs will return after medication is discontinued. This horse is having inhaled steroid treatment which is often the best long term treatment. In the early stages oral steroids or clenbuterol may be needed. Respiratory distress (asthma like signs) is a true emergency requiring intravenous medication. Where possible the horse should be turned out to pasture. If this is not practical certain alterations to the stable routine may be effective.



- **Minimise dust and maximise air quality in the stable.** Make sure the stable is kept free of cobwebs. Avoid stables that are next door to an indoor arena or hay store. Also mucking out while your horse is in the stable should be avoided. If possible increase airflow with vents or slats above the height of your horse's head (to avoid them standing in a draught)
- **Soak hay or feed a low dust alternative** (such as haylage)
- **Feeding from the ground** – eating from a haynet will shake spores and dust into the air. Feeding with their head lowered also improves drainage of secretions from the airways.
- **Dust free bedding.**

EQUINE DEPARTMENT INFORMATION

If you would like to speak to an Equine vet or arrange a visit, please call 01297 630515
Medicines can be requested via email equine@axvets.co.uk or by telephone