

Welcome to NW Equine!

We are extremely pleased to be sending you our very first quarterly newsletter. It is our intent to provide you with informative updates on current issues within the equine industry along with seasonal information to aid in the care of your horse(s). We welcome your input and encourage you to let us know if there are areas of interest you would like to read more about in future issues. After all, this newsletter is for you!

It is our promise to you to provide the highest quality care available to horses today. We believe in placing strong emphasis on preventive health care and client education. We encourage you to communicate your horse's needs and progress to us so that together, we will maintain their good health and prevent disease.

Our practice encourages proper nutrition, routine deworming, vaccinations, and dentistry while offering complete care in the areas of reproduction, lameness, video endoscopy, emergency medicine, chiropractics, and acupuncture.

Our doctors are available to speak to your group or organization on any of these topics or other areas of interest. We would be happy to tailor our presentation to suite your needs, provide informational handouts and offer slide presentations on many topics.

Watch for these sections in future issues....

Births: If you would like us to mention your new arrival in our upcoming issue, please give our office a call.

In Memory Of: We know that the loss of any animal is a very personal matter. If you would like us to insert a brief note in memory of your beloved equine friend, please let us know.

Questions to the Doctor: We will be featuring a *Question and Answer* section within each newsletter. Please feel free to call us with your question(s) or drop us a note in the mail (you may use the reverse side of your billing remittance when sending in a payment). We will try to answer as many questions as possible in each issue.

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Highlights of our February Issue:

- **Reproduction:** *Getting your mare or stallion ready for the breeding season.*
- **Chiropractics:** *by Renee Meronek, DVM*
- **Vaccinations:** *Recommendations and Schedules*
- **Toxic Plants:** *What to watch for in your pasture or on the trail*
- **Fly Spray:** *Our very own recipe.*

Equine Cushing's-like Disease

by Lisette T. Druliner, DVM

Equine Cushing's-like Disease (Pituitary Pars Intermedia Dysfunction) is a debilitating illness that has been recognized and treated more aggressively in the recent years. Most people recognize the old, hairy-in-the-summer horse that decorates the neighbor's pasture as the typical Cushing's candidate. These days we can diagnose Cushing's earlier, preventing the disease's life-threatening effects and prolonging the comfortable and useful life of the horse.

The root of the problem lies within the pituitary gland in the horse's brain. It normally processes signals that help regulate organs such as the adrenal glands, thyroid gland, and reproductive organs. The pituitary gland is very complex and affects many other systems when it does not function properly. In Cushing's Disease regulation of the pituitary gland is lost. This allows the pituitary gland to function unchecked, over-producing some of its chemical signals. The most significant targets of these chemical signals are the adrenal glands. They are told by the pituitary gland to produce more cortisol which causes many of the clinical signs of Cushing's Disease.

Horses and ponies of all ages may develop Cushing's Disease. Animals older than 15 years of age are usually affected. Ponies seem to have a higher incidence of disease. The most consistent clinical signs are an abnormally long, sometimes wavy haircoat (hirsutism), an abnormal shedding pattern, an increase in drinking and urination, increased sweating, frequent hoof abscesses, and laminitis (founder). Many horses also exhibit abnormal body fat deposition over the eyes, crest of the neck and tailhead. Other clinical signs the horse may have are dental disease, sinusitis, pneumonia, voracious appetite, weight gain in the face of a reduced diet, decreased fertility, weight loss, or seizures.

There are two main tests available for Cushing's Disease. Both are minimally invasive, requiring two blood samples. The dexamethasone suppression test has been the most widely used. Another test measures the daily rhythm of secretion of cortisol, insulin, and thyroid hormone. As with any test there can be false positives and false negatives, but both tests are fairly reliable for diagnosing Cushing's Disease.

Treatment of Cushing's Disease is a lifetime commitment. The two drugs currently available are pergolide and cyproheptadine. Pergolide is the most effective, but cyproheptadine is the least expensive. Medical treatment needs to be accompanied by routine bloodwork to determine if the drug used is effective in controlling the disease. In addition, Cushing's horses must have vigilant routine preventive health care (dentistry, deworming, vaccinations) due to their less effective immune system. A high quality, balanced diet is also important.

Equine Cushing's-like Disease can be very debilitating and life-threatening. It can be managed well with medication, diet, and proper health care. If you suspect your horse may have this disease, have your veterinarian examine and test him or her. Horses of any age or breed may develop Cushing's Disease. Early detection and treatment is the key to avoiding dangerous episodes of laminitis or infection. If you have any questions about this disease I urge you to contact your veterinarian.

"Horses and ponies of all ages may develop Cushing's Disease"

Vaccine and Deworming Recommendations for Pregnant Mares

By Sarah N. Sampson, DVM

Now that your mare has been confirmed "in foal", you can breathe a sigh of relief and look forward to next spring. It is also important, though, to continue regular maintenance, meaning regular vaccinations and deworming. She will need her annual vaccines: tetanus and possibly eastern/western encephalitis and potomac horse fever, as well as semi-annual rhinopneumonitis and influenza vaccines every 3-6 months, depending on your program. In addition, it is very important to remember to vaccinate your pregnant mare with the rhinopneumonitis vaccine for pregnant mares which helps prevent late term abortion. This shot is given at 5, 7 and 9 months of gestation. It is best to avoid modified-live vaccines in pregnant mares due to an increased risk of harming the fetus.

Last, but not least, your pregnant mare will need to be vaccinated with her regular yearly vaccines 3-4 weeks before her due date. This will ensure that she has antibodies to pass on through her colostrum which will provide passive immunity to her foal for the first 3-5 months of its life.

Deworming your pregnant mare regularly is also an important part of maintaining her health through gestation. The two programs we recommend are:

1. Daily pyrantel tartrate with ivermectin paste given every 6 months.
2. Rotation between pyrantel pamoate and ivermectin every 6-8 weeks, with double dose pyrantel pamoate in fall and a 5 day double dose regimen of fenbendazole paste in the spring.

It is important with either program to deworm your mare with ivermectin paste at foaling to kill any strongyloides which may be passed to the foal in the milk.

Please contact your veterinarian at any time if questions arise regarding proper care of your pregnant mare.

Winter Health Care for Your Horse

by Jake Lynch, DVM

As everyone knows, horses cannot be put away for the winter like lawn furniture; they require constant care. Routine grooming, hoof care, dental care, vaccination, and deworming schedules should be maintained. Additionally, there are some special concerns for the winter months.

Keeping Warm:

The horse has a remarkable ability to keep warm without our help. A horse can withstand temperatures well below zero; however, exposure to wind and rain compromises significantly the hair coat's ability to insulate. Therefore, it is important to provide shelter for your horse. Three-sided run in shelters are great because they allow horses to choose shelter according to their needs, and they provide good ventilation. Resist the temptation to close the barn down airtight. While this may make you feel more comfortable, poor ventilation in the barn can exacerbate medical conditions such as Chronic Obstructive Pulmonary Disease (COPD). Also, the concentration of ammonia from urine and manure in a horse's bedding tends to be highest in the first 18 inches off of the ground, and this is precisely where your horse's nose will be when he or she lays down at night. So a little bit of air circulation in the barn is a good thing.

Should you blanket your horse? As previously stated, horses are adapted to withstand subzero temperatures. After all, they have survived worse winters than the Pacific Northwest has to offer for thousands of years. The horse that has free access to adequate shelter, a thick hair coat, and good nutrition does not necessarily need a blanket. Conversely, the horse that is body clipped or is turned out for periods of time without free access to shelter might appreciate a blanket. Blankets may be indicated for horses that are not acclimated to northern climates or if there is an abrupt temperature change. Blankets can compress a horse's thick winter coat thereby compromising its ability to insulate to some degree. To overcome this, the blanket you choose should be of good quality and in good condition.

Most horses will not require an increase in their hay or grain ration. For horses that are thin and tend to get cold, free-choice grass hay is a good idea. Hay actually generates more heat energy than grain or oil when it is digested. In addition, multiple small meals can reduce the incidence of gastric ulcers, and stable

vices may decrease since they can occupy more of their time with eating. For the overweight "easy-keeper," free choice hay may not be such a good idea. Instead, take this opportunity to limit their intake to achieve a more desirable body condition. Remember that any large dietary change should be done slowly over the course of two weeks.

Riding:

A consistent, low level of activity is beneficial for keeping your horse's joints, tendons, and ligaments in working order. This takes more importance if you plan on going great guns in the spring. If you plan on riding over the winter, be sure to take a little extra time warming up and cooling down your horse. Make certain that your horse is done sweating and is dry prior to replacing his or her blanket. A matted down hair coat might give them the chills.

Colic:

Colic simply means abdominal pain of any origin. Horses show abdominal pain by looking at their sides, kicking at their belly, getting up and down repeatedly, and by lying down and rolling. There are a number of causes of colic, and some are more serious than others. Most colics are the result of problems with the gastro-intestinal tract, though problems with other abdominal organs can cause pain. Causes of colic include gastric ulcerations, sand impactions, feed impactions, enteroliths, nephrosplenic entrapments, epiploic foremen entrapments, large colon volvulus, and strangulating lipomas just to name a few. In winter, there is an increased incidence of feed impactions because many horses drink less water when it gets cold. Ideally, a 1000 lb horse should drink eight gallons of water a day (5 minimum). Many tricks have been tried to get horses to drink more water. Adding a small amount of apple juice to the water may work for some horses. Syringing salt water into their mouths or adding 1-2 tablespoons of salt per day to their ration might help. Also, it has been demonstrated that warming water to 60 degrees F will increase water consumption 40-100%. Very wet mashes made with a complete pelleted feed may help increase water intake. Giving bran mashes regularly should be avoided. Bran is very high in phosphorus, and if it becomes a significant portion of your horse's diet, it could unbalance the calcium:phosphorus ratio.



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First Aid Kit Recommendations:

event you need to stabilize your horse until the doctor arrives, the following list of items are recommended to have on hand:

60cc dose syringe	Nolvasan shampoo
apple sauce	Nolvasan solution
bandage scissors	(with diluting directions)
betadine scrub	notebook for records
cortisoothe shampoo	sterile saline
cotton sheets (4)	stethoscope
duct tape	table salt
elastikon (3")	telfa pads (large & small)
epsom salt	thermometer
flash light	triple antibiotic ointment
gauze - white sponge	or Nolvasan ointment
hand towels	vetwrap
molasses	

*Ask your doctor about any
medication requiring
a prescription.*

A special "Thank You" to our very own **Patty Capps** for her ~~wonderful contribution of artwork throughout our Newsletter.~~ You may have also seen Patty's work in many of our informational handouts.

Patty has been an employee of Northwest Equine since September of 1999. Working as a Veterinary Assistant, she has had the opportunity to meet many of you while in the field assisting our doctors.

Are you prepared in the event of an emergency? Not all emergencies require a visit from the veterinarian, or in the