ISSUE 6 Summer 2020

Equine NEWS

www.paragonvet.com







Staff update

Covid-19

Joint infections

Laminitis

Colic

COMPASSION, CARE AND CLINICAL EXCELLENCE

Summer 2020

Our Summer cover stars are Donald and Buzz ridden by Chloe and Isla Metcalf. Great to see the girls still managing to enjoy their ponies during lockdown.

Please email equine@paragonvet.com if you have any topic suggestions for either the newsletter or Facebook page.

STAFF NEWS

Sadly Kristen has now finished working for Paragon and has moved back home to be closer

to her family. We wish Kristen all the best for the future and thank her for all of her hard work during her time with us. She will be greatly missed and we hope she will come to visit once lock down restrictions have eased.

Sian will also be heading out on maternity leave during the beginning of August with her baby due at the start of September.





Freya Wood will be joining us later in the Summer once she has graduated from the University of Liverpool as an equine vet. She grew up in Cumbria and prior to starting university spent a few years working at Blackdyke Farm Riding Centre near Carlisle. She enjoys all aspects of large animal work but has a particular interest in equine. She is really looking forward to moving back to Cumbria and meeting our clients and their horses.

Away from work, she enjoys horse riding, exploring Cumbria with friends and scuba diving trips with her best diving buddy (her sister). She also shares her home with two Burmese cats.

OUT OF HOURS

Just to remind everyone that we now offer full out of hours equine only veterinary cover.

To speak to the equine vet on duty please call either Newbiggin on 017684 83789 or Dalston on 01228 710208 and select option 3.

WORKING THROUGH COVID-19

Paul May - MRCVS BVMS

The Corona Virus pandemic of 2020 has brought a new set of challenges to us all. Working in the equestrian world is no different, as vets we come into contact with a wide range of people, some will have had the virus and recovered while others may be deemed to be highly vulnerable.



As this human disease continues to develop our challenge is to maintain a suitable veterinary cover to meet the health and welfare needs of our equine patients, whilst ensuring that we work within government guidelines and don't represent a problem to those trying to control the effects of the pandemic.

In the first weeks of lockdown we dealt with emergencies and urgent cases only in accordance with our industry guidelines and used remote consultations through video or photo links to asses minor ailments.

With more acutely ill patients and more complex cases the need to work in close proximity increases, and so far our solution has been to work in pairs to remove the need to breach the recommended distancing guidelines. We are fortunate to have our equine facilities at Newbiggin which has allowed many of our clients to drop off horses for us to then examine and treat without having to come into contact.

Most of our equine services have now resumed as we see the initial easing of lockdown and the adoption of the NHS Covid-19 contact tracing app. This will alert people if they have come into contact with someone who has reported having Corona Virus symptoms. This will

bring new challenges to maintaining our service to our clients and changes to the way that we work.

We will continue to work closely with all our clients to ensure horse health and welfare is maintained to a high standard whilst not risking human health.

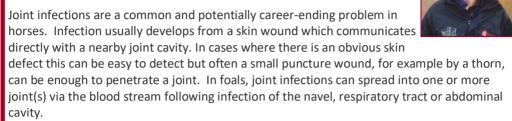
If you have any concerns about us visiting your yard then do raise them when making appointments, we are flexible and do not mind if things take a little longer as we realise how important all of our health is. At the same time



we ask you to let us know if you are displaying any symptoms and to aid us by maintaining social distancing and by wearing appropriate PPE.

JOINT INFECTIONS

Euan Hammersley- BSc MRCVS BVMS



Recognition of a potential problem relies on a good appreciation of horse anatomy. Frequently joints have more than one out-pouching. For example the knee (carpus) joint has large pouches over the front but less obvious pouches to the sides and back of the leg. The exact position of the joint capsule may also be further than expected from the bony landmarks. For example the elbow joint is several centimetres below and to the side of the point of the elbow. Throughout the horse's musculoskeletal system there are numerous additional sterile sacs (sheaths and bursae) which are also vulnerable to infection. For example the hock (tarsus) is a common site for injury and three bursae lie under the skin at the point of the hock which may become infected with serious consequences even if the hock joints themselves are not involved.

Following general examination of the horse, any obvious wound is explored using a sterile gloved hand. Often the position of the skin wound is some distance from initial impact, for example if the horse was stretching to jump a fence or has sustained a glancing kick. More detailed investigation of potential damage to underlying structures requires radiography (to identify bone damage or metallic foreign bodies) and ultrasonography



(to identify tendon and ligament damage, and foreign bodies such plant material that will not appear on a xray).

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Injection of sterile saline into the neighbouring joint/sheath/bursa will often result in flow of this fluid from an adjacent wound, confirming communication. Collection of fluid directly from joint/sheath/bursa under sterile conditions is also extremely useful as levels of proteins and cells within the joint will rise rapidly following a joint injection. Normal synovial fluid is a clear pale yellow colour and should form a long string when dripped from a syringe or held between two fingers. Dark, opaque, watery fluid is abnormal and indicates a severe inflammatory process within the joint.

If infection is confirmed prompt, aggressive flushing of the affected region using high volumes of sterile saline is required. The most effective way to achieve this is via an endoscopic lavage system under general anaesthesia. This allows rapid inflow and outflow of fluid. detailed inspection of the cartilage, joint/bursa/ sheath lining and removal of any foreign material. Without intervention the ongoing inflammation within the infected site would result in a severe chronic lameness.



The prognosis following joint infection depends on a large number of factors including time since injury, degree of damage to surrounding bone and soft tissue structures and health status of the affected animal. A recent study that collected date on horses treated for joint infections over several years found that 70% of horses made a full recovery and a return to ridden exercise.

The important points to take from this article are if your horse sustains a wound near to joint, it is advisable to have the horse examined to ensure there is no damage to a nearby joint. Simple skin wounds should not make a horse lame so if your horse does show signs of lameness following a skin wound then you should seek veterinary treatment urgently. It is also advisable not to administer any pain relief to your horse prior to veterinary examination as this may hide the initial signs of a joint infection and lead to a delay in treatment.

LAMINITIS WARNING

As always at this time of year laminitis is a frequent topic of conversation.

This unusual dry spell has held back grass growth but despite that we have still been seeing cases. The strong light drives photosynthesis creating more sugar even if the length of the grass is not increasing. On top of that the ground is



hard leading to bruising of the sole. This once again demonstrates how much the weather dictates the number of and severity of cases.

In the picture you will be able to see the 'Laminitis' App which offers



a warning grading system depending on the weather conditions. This can be a useful tool to help you know on which days time at grass should be limited, particularly for more at risk horses and ponies.

COMPLIMENTARY CUSHING'S DISEASE (PPID) TESTING

Throughout the year we are able to offer FREE laboratory fees for PPID testing on horses that have not previously been tested or that are not previously on veterinary treatment for Cushing's Disease.

Owners will need to visit www.careaboutcushings.co.uk to sign up and apply for a voucher. The voucher code will need to be given to the vet when they come to take a blood sample.



The website also has lots of useful information about the disease.

Please speak to one of the equine team if you have any questions or would like to discuss whether testing would be beneficial for your horse

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These foals belong to some of the mares that we had with us during 2019 for Artificial Insemination (AI), we're already looking forward to seeing pictures of next years foals.













RECENT SURGE IN COLIC CASES

During May we have seen higher than normal numbers of horses showing symptoms of colic (abdominal pain). Although there are many different causes of colic this recent surge has highlighted to us how important good management is.

With the prolonged dry spell and variable temperatures grass growth has not been consistent. Due to this we advise that any changes to turnout regimes or paddocks are done gradually to allow your horse to adjust to the different levels of nutrients and energy within the grass.

In older horses we have seen more cases of large colon impactions, this is often related to

problems in the horse's mouth preventing them from fully chewing their food. This highlights the importance of routine dental care that for many horses has had to be delayed due to the recent lockdown.

As well as dentistry it is important not to forget about worming, we advise that all horses should have a worm egg count done every 12 weeks during the grazing season as a high worm burden can lead to colic. Samples can be dropped off at either practice receptions for analysis.





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