

ISSUE 15 Autumn 2022

Equine NEWS

www.paragonvet.com



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Equine

COMPASSION, CARE AND CLINICAL EXCELLENCE

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

****AUTUMN COVER STAR****

On the cover this Autumn is Hawkmoth who is owned by Liz Elliott. He had a difficult start to life this Spring which resulted in his first week of life being spent as an inpatient at Newbiggin. Since then he has continued to go from strength to strength.

Hawk had a difficult birth mainly due to his incredible size which sadly resulted in his mum Lola passing away a few days after he was born. Due to his difficult delivery his front legs were weak and not at the correct angles, making it difficult for him to stand and feed from prospective foster mares, this ultimately meant that he ended up being hand reared.



He soon learnt how to feed from a calf feeder and lived with a lovely, maternal mare which helped to reduce his human interaction. Over the past few months and due to Liz's hard work his legs have gradually gotten stronger and have straightened, he is absolutely thriving at 5 months old.

He is a firm favourite of the equine team as he has always been a great character. We are absolutely delighted to see that he is doing so well.

****AUTUMN DENTAL PROMOTION****

During October and November we are holding our annual Autumn dental promotion.

Any dentals done during this time, either with or without sedation will receive a 15% discount.

Visit charges will apply as normal.

We offer FREE dental checks all year round so the vets are always happy to have a look to see if any treatment is required (please call the office to arrange a slot on the diary).



****JOINT SUPPLEMENTS****

If you would be interested in trying a sample of our joint care products HesteFlex or BozMerix please use the following link

<https://mailchi.mp/2cf69f1636b1/bozmerix-sample-pack-request>

The sample pack contains 2 free sachets and a 30% off voucher for your next purchase.

For more information about the Hestevard products that we stock at the practice please visit www.hestevard.com or speak to one of the equine vets.

An advertisement for joint supplements. It features two main product images: BozMerix on the left and HesteFlex on the right. Each product is shown in its packaging (a large bag and two smaller sachets) with a green circular badge that says '30% OFF VOUCHER'. In the center, white text on a dark background reads '30% off voucher in FREE sample packs for your next purchase'.

Selina Squarotti - BVMS MRCVS

SARCOIDS



Sarcoids are the most common skin cancer of horses and they do not seem to have breed, age and sex predisposition. There is still a lot of research about the causes of these tumours, but they seem to be linked to a Bovine Papilloma Virus (BPV), which causes sarcoids in genetically susceptible horses. This means that not every horse exposed to the virus will develop sarcoids, but those genetically susceptible, might get them again after treatment, since the susceptibility remains.

The ability of sarcoids to transmit by horse-to-horse contact or to be spread by flies is unproven, but there is more and more evidence suggesting that susceptible horses grazing with horses that have sarcoids are likely to develop them as well.

Sarcoids are usually locally aggressive and they vary enormously in appearance and behaviour. It is important to identify the type of sarcoid, because different types require different treatment and inappropriate treatment can make sarcoids more aggressive, especially if treatment fails and they grow back.

They may look innocuous at early stages, some looking like a flat, smooth patch of scaly skin, some wart-looking, but the lumps frequently become larger, irregular in shape, cauliflower-like and might or might not ulcerate and become aggressive.

Sarcoids are categorized by appearance and behaviour and biopsies are usually not recommended, because disturbing sarcoids can make them more aggressive.

The main types of sarcoids are occult, verrucose, nodular, fibroblastic, mixed or malignant. Due to the high rate of recurrence and their different behaviour, these tumours are difficult to treat.



There is no optimal treatment for sarcoids, but many different treatments are being proposed. Factors affecting treatment are the type of sarcoid, its location and extent, the horse's temperament and treatment cost.

Medical treatments include the topical chemotherapy cream AW-5 (formally Liverpool cream), a very caustic cream frequently applied on the skin, which causes skin necrosis and scarring; the immune stimulant BCG vaccine injected directly in the tumour, usually only used for periocular sarcoids (around the eye); injectable chemotherapy and/or various topical creams such as acyclovir and imiquimod.

Ligation or banding of a sarcoid can be quite tempting, but before this is attempted, the veterinarian needs to check if the sarcoid has a root extending into deeper tissue or it could be extremely dangerous to the horse. The ligated sarcoid will die slowly over a few weeks and fall off. Ligation is more successful if combined with topical treatment to kill the root of the superficial tumour.

Surgical treatments include surgical excision with smart surgery, as sarcoids tend to invade the sutures and re-grow locally on the surgical wound with standard surgical excision, cryosurgery (freezing) and laser surgery. Because of the rate of recurrence surgical treatments can be coupled with injectable chemotherapy drugs in the surgical site following the surgery.

To conclude, sarcoids are a form of cancer and should be treated with respect. Applying anything on sarcoids without seeking expert advice could be very dangerous and detrimental to the horse, potentially decreasing the success rate of any future treatment.

****NEW EQUIPMENT****

The practice has made considerable investment into new equipment for the equine team in recent months.

- The **DR (Digital Radiography) System** arrived in early Summer. Many of you will have already seen our equine vets using the system. The DR enables the vets to generate quality images onsite whilst attending your horse at home. This provides you with a quicker diagnosis and enables treatment to start straight away.
- The new **Dental Power Rasp** arrived at the end of August. We now have two power rasps for the vets to use which will enable us to be more flexible with dentistry appointments.
- Our **Surgical Laser** arrived at the end of September (check out Mel, Charlotte and Freya modelling the safety goggles). Previously we have hired in this equipment which delayed the treatment of sarcoid and melanoma cases, also increasing the costs to owners. This new equipment will enable these cases to be dealt with promptly at your convenience.
- The **Dental Endoscope** will arrive at the start of October. This piece of equipment enables images to be taken within the horses mouth. The images will transfer onto a linked laptop so that they can be easily viewed. This makes it easier for the vets to see what is going on in the horses mouth, particularly at the back and to point out any areas of concern to owners when discussing treatment plans.



Charlotte Pennington - BVetMed (hons) MRCVS**CUSHINGS DISEASE**

Equine Cushings Disease or PPID (Pars Pituitary Intermedia Dysfunction) occurs when an area of the pituitary gland at the base of the brain over produces several hormones resulting in excess ACTH and cortisol production. We are not sure exactly why this occurs, in some horses it may be a gradual degenerative changes in the pituitary gland or in others a benign tumour.

Many predisposing factors have been implicated more recently including obesity and Equine Metabolic Syndrome (EMS) earlier in life and environmental factors such as diet, although there is little data to support this at present.

Usually PPID is a gradual age-related change so primarily affects ponies and horses over 15 years of age, but can sometimes affect horses as young as 10. Recent studies have also shown a significant proportion of horses with laminitis also have PPID as well.

The classic symptom that most people associate with PPID is a thick curly hair however there are a range of other clinical signs displayed with PPID:

- Laminitis - occurring acutely or as recurrent bouts and often unresponsive to treatment until the PPID is controlled
- Hairy coat (hirsutism) which is often preceded by patchy or late shedding of the coat
- Drinking excessively and producing large volumes of urine
- Lethargy
- Loss of muscle with a dipped back and pot bellied appearance
- Bulging fat pads visible above the eyes
- Weight loss
- Excess sweating
- Repeated infections (due to the immune system being compromised) making affected horses more prone to skin, respiratory, dental infections and parasite infestation

Diagnosis

Blood tests can be performed to help diagnose PPID. There are several tests available but the most commonly performed one measures the levels of the hormone ACTH.

Affected horses usually show a high level when compared to the seasonal reference range. For horses that have not been previously diagnosed with Cushings Disease we can apply for a voucher that will entitle you to FREE lab fees for an ACTH test; a saving of around £40.00.

Treatment

There is no cure for PPID but the disease can be well controlled with daily medication. Pergolide (via a paste or tablet) is the drug of choice for treatment; it acts to control the over-production of ACTH and cortisol and should be continued for life. Getting the appropriate dose is essential and there can be some side effects. Usually horses are started on a higher initial dose then this is gradually dropped to the lowest dose needed to control symptoms.

Follow Up

We advise 6 monthly prescription checks for horses on all long term medications to ensure the correct dose is being given and that the medication is working as required, bloods may be repeated at this time. Good management is also very important: clipping hair can improve comfort levels; frequent checks for early identification of wounds and infection; regular farriery, dentistry and worming checks.

Check out www.careaboutcushings.co.uk for more information about Cushing's Disease. If your horse has been diagnosed with Cushing's Disease you can sign up to join the membership scheme, as part of this you will then be entitled to a yearly voucher for FREE lab fees when performing a monitoring test.

CARE ABOUT CUSHING'S

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What is Cushing's? How to spot it What to do Membership **Free Cushing's Test**

Understanding Equine Cushing's Disease

Care About Cushing's is here to help further understanding of Equine Cushing's Disease - the 5th most commonly diagnosed disease affecting horses in the UK

****PARAGON WORMING GUIDANCE****

As we head into October and the Autumn/ Winter months we advise clients to stop sending faecal worm egg counts (FWEC) for testing unless they have been advised to do so by one of the vets.

FWEC become less reliable as the temperatures cool with worms encysting and lying dormant over the winter, reducing the number of eggs shed. We advise all owners to provide their horse, pony or donkey with a worming treatment around December time to treat for encysted small redworm. Ideally using a moxidectin based

wormer to prevent a mass emergence in the Spring which can lead to severe health problems.

If you are unsure about worming and when you should be doing what, our new worming leaflets are available to collect from Newbiggin and Dalston receptions. We have also created a worming graphic that has been designed to simplify worming for owners.

Our aim is to encourage FWEC and the un-necessary use of wormers which leads to the development of resistance, only worming when required and with the appropriate product.

SPRING
from March FWEC

POSITIVE Treat
NEGATIVE No need for treatment

Good paddock management
Repeat FWEC in 3 months

SUMMER
FWEC

POSITIVE Treat
NEGATIVE No need for treatment

Topworm saliva test or treatment if not been treated in the last 6 months
Good paddock management
Repeat FWEC in 3 months

WINTER

WINTER WORMER (moxidectin based)
If not already given in the autumn

Topworm saliva test or treatment if not been treated in the last 6 months

AUTUMN
FWEC (until start of October)

POSITIVE Treat
NEGATIVE No need to treat yet

WINTER WORMER (MOXIDECTIN BASED)
Topworm saliva test or treatment if not been treated in the last 6 months

For more information and specific guidance on treating foals see our worming guide.



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