

Spring 2021 Newsletter

Office assistant vacancy

We are currently looking for a part-time office member to join our team at Kings Bounty Equine Practice. The role is 2 days per week with some flexibility to cover additional hours if required.

You will be a highly motivated, diligent, organised and efficient individual with a professional manner and a passion for high standards.

Role requires client/supplier liaison, general office administration, data processing and would ideally include assistance to the Practice Manager. Excellent typing skills would be desirable to assist in the production of Veterinary Invoices.

Experience with Microsoft Office is essential, equine experience preferable. Job expansion available for the right candidate.

A small but fun and friendly team awaits!

Lovely office on a picturesque country estate located near Alresford, Hampshire.

Please send CV and covering letter to: pm@kingsbountyequine.co.uk

Please see our Recruitment Privacy Policy on our website for how we handle your data:

kingsbountyequine.co.uk/recruitment-privacy-notice/

Are you thinking about breeding from your mare?

We are a BEVA approved practice for AI. Please contact us should you wish to discuss specific requirements.

More details of our AI packages and breeding can be found on our website:

kingsbountyequine.co.uk/client-information/pre-breeding-and-ai-packages/



Is your horse up to date?

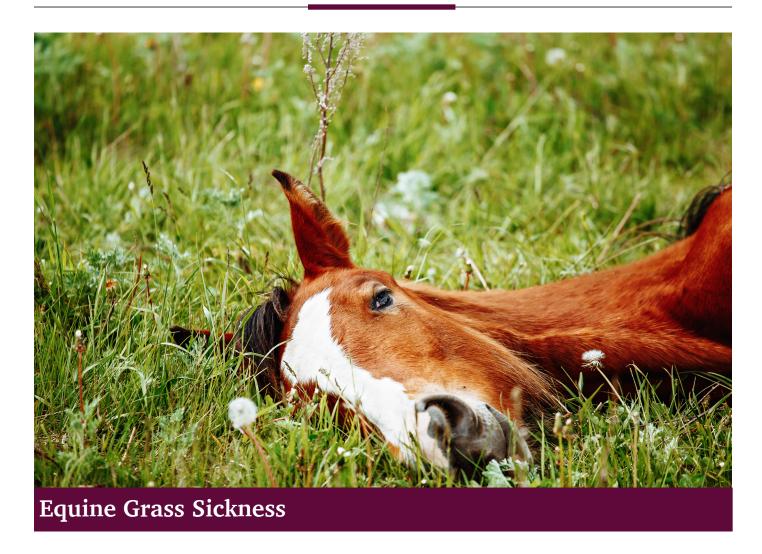


Equine influenza is a viral infection that occurs every year in the UK. As most horses are vaccinated outbreaks of disease are fortunately not very common in most years. However, outbreaks do still occur in unvaccinated horses and, on occasions, vaccinated horses may also show mild signs of the disease. If your horse has not been vaccinated in the last six to 12 months we would therefore urge you to arrange for it to be done – not only to protect your own horse, but also to minimise the chances of the virus spreading through the equine population.

Tetanus is a very serious disease caused by a toxin from the bacterium Clostridium tetani and usually results in the death of the affected horse. The organism may be present in the intestine and faeces of healthy horses and spores from the bacteria survive for long periods in the environment, especially the soil. Horses, and other species, are therefore at constant risk but tetanus vaccination is highly effective in preventing disease and therefore clinical cases are rare. Protection afforded by the tetanus vaccine lasts for at least two to three years so if your horse is not up to date we would urge you to phone the practice to arrange a vaccination.

Also a reminder that from October 2020, it became a legal requirement for ALL horses, ponies and donkeys to have a microchip.

Please call the practice if you need to book in your horse/pony/donkey.



Equine grass sickness (EGS) can occur at any time of the year but is most often seen between April to July.

EGS is a disease that was first reported around one hundred years ago. The disease affects mainly grazing horses and currently the cause remains unclear. The disease mainly acts by disrupting the nerves that supply the gastrointestinal tract hence affecting gut motility. However other parts of the general nervous system are also affected.

What horses are susceptible?

Individual risk factors:

- Seems to affect native breeds but there have been many reports in other horse and pony breeds
- Young adults (two to seven years old)

Premises risk factors:

- Previous occurrence of cases on the premises
- High soil nitrogen
- Pasture disturbance
- Increased number of horses especially younger animals

Management risk factors:

- Grazing at pasture only a few cases have been reported in non-grazing horses
- Recent movement to the premises
- Change of feed (type or quantity) in 14 days prior to disease
- Mechanical removal of faeces (hand removal has been shown to decrease risk of recurrence)
- Frequent use of ivermectin based dewormers

Climate risk factors:

- Cool, dry weather
- There is a peak in spring and a smaller peak in autumn - though cases can occur all year round

What signs will my horse show?

The disease is a continuum of clinical signs, divided in three categories depending on their severity and duration.

The signs seen in individuals affected is reflective of the degree of dysfunction of the nervous system.

Acute cases have a sudden onset of between 24 and 48 hours, subacute of two to seven days and chronic from seven days onwards.

Horses may show some of the following signs:

- Colic (mild or severe)
- Dull demeanour
- Muscle tremors
- Sweating
- Difficulty eating
- Excess salivation
- Eyelids appear droopy (ptosis)
- Increased heart rate (tachycardia)
- Firm faecal ball with mucous coating and other signs of slowed gut motility (impactions)

The above signs are more common in acute and subacute cases. Chronic cases tend to show milder signs than acute and subacute initially.



Other signs can also include:

- Drying and scab formation in the nostrils (rhinitis sicca)
- Tucked up abdomen
- Penile prolapse

How can your vet diagnose grass sickness?

- The diagnosis is commonly presumptive and made upon clinical signs, history and exclusion of other possible diseases
- Definitive diagnosis requires histopathology of a small intestinal biopsy
- Topical administration of phenylephrine drops to the eye may cause temporary reversal of the ptosis seen in some cases

What treatment options are available?

- Cases of acute and subacute grass sickness are invariably fatal
 - Supportive care such as intravenous fluids and analgesia can be started before a diagnosis is reached
 - Once a definitive diagnosis is reached then euthanasia is usually recommended
- Cases of chronic grass sickness are reported to have a 40% survival rate. Treating these can be costly as they do require intensive care with recovery in some cases taking between three to eighteen months. Complications are also common in the recovery period

How do I minimise the chance of my horse getting grass sickness?

- Try and limit exposure to pastures during high risk periods where previous cases have occurred
- Try and reduce the amount of soil disturbance from methods such as harrowing or mechanical faeces removal
- Encourage removal of faeces by hand
- In heavily grazed or sparse pastures offer supplementary forage
- Avoid sudden changes in diet
- Limit use of ivermectin based wormers
- Minimise the number of horses co-grazing, especially youngsters

Grass sickness is unfortunately a very frustrating disease and the exact cause remains elusive. Although it poses a serious risk to infected individuals, management practices can be put in place to reduce the occurrence of the disease.

Pre-Purchase Examinations (PPEs) – What is the difference between a 2 and 5 stage?

Pre-purchase examinations (PPE) are a big part of equine practice. We are often asked what the difference is between a 2 and 5 stage PPE.

The stages are designed to examine the different aspects of the horse and determine their soundness and suitability.

We would always advise a 5 stage PPE to be performed due to the limitations of the 2 stage.

If a client wishes for a 2 stage PPE to be performed, they must sign a form declaring that they understand the limitations of the 2 Stage PPE.



If you have any specific questions relating to vettings then please feel free to contact the practice. A 5 stage PPE involves all 5 stages detailed below whereas a 2 stage PPE only involves stages 1-2.

The stages are:

Stage 1: Preliminary examination

A thorough external clinical examination of the animal at rest including examination of the incisor teeth, eyes and auscultation of the heart and lungs.

Stage 2: Walk and trot in hand

Horse is assessed at walk and trot in a straight line in hand. The horse is also turned in tight circles and backed up. Flexion tests and lunging on the hard surface can be carried out if it is deemed safe to do so.

Stage 3: The exercise phase

This enables the horse's gait to be assessed at walk, trot, canter and if appropriate, gallop. It also enables the horse to be assessed when it has an increased breathing effort and heart rate.

Stage 4: Period of rest and re-examination

The horse is allowed to stand quietly for a period. During this time the respiratory and cardiovascular systems can be monitored as they return to their resting levels.

Stage 5: Second trot up

The animal is trotted in hand again to look for any signs of strains or injuries made evident by the exercise and rest stages.

New rules now apply to equine exports



Did you know that since Britain has left the European Union, there are a number of changes with regards to travelling a horse to the EU?

If you are planning on travelling your horse to the EU and would like more information, please use the following link:

gov.uk/guidance/export-horses-and-ponies-special-rules