



Another year in upon us and vaccine and riding season is soon arriving. Enclosed are clinic dates, vaccine recommendations, and pricing. We plan to continue hosting jumping lessons with Jerry Dean and would be open to hosting other events if there is interest.

As always, I welcome your input and recommendations to make every part of Roaring Brook Veterinary Service better and more able to suit your needs.

In 2017, we will continue scheduling primarily on the weekends to better accommodate your schedules. The haul-in vaccine clinics were a huge success last year. We will offer more this year as well as small animal vaccine clinics. By scheduling on vaccine clinic days you will receive an additional 10% off your bill. We will also be offering for any other haul-in appointments a waiver of a call fee and any after-hours fees. Please take advantage of our haul-in facility!

Spring 2017 haul-in dates will be:

- March 26 (Sunday)
- April 8 (Saturday)
- April 23 (Sunday)
- May 6 (Saturday)
- May 14 (Sunday)

****You must schedule a time for vaccinations at the clinics. Spots fill quickly so reserve early.**

Vaccine recommendations will be the same for 2017. We did see a drastic increase in lyme disease and are recommending testing followed by vaccination in endemic areas.

Also, a reminder to "like" our facebook page (Roaring Brook Veterinary Service) to keep updated on lesson and clinic schedules as well as monthly give-aways.

WINTER HORSE CARE

Caring for your horse can be a little confusing and a bit difficult, especially in frigid northern New York. Remember that although our horses are very special to us, they are horses and are quite capable of tolerating cold temperatures.

Feeding Modifications:

As the weather cools, animals' caloric requirements increase. Horses have a thermal neutral zone, in while their body starts requiring more energy (calories) to function. This varies based on hair coat.

Wet or short – 60 F; Medium – 50 F; Long – 30 F

For every decrease in degree below the thermal neutral zone, there is a one percent increase in caloric needs. For example, if a 1000lb horse with a heavy winter coat is normally consuming 15lbs of hay per day (minimum recommended normal maintenance), and the temperature drops to 20F the horse would now need 16.5lbs. Remember this is simply maintenance of normal activity and these values change with wind chill and whether the horse is wet. Adding a 10mph wind chill will increase hay requirements 5lbs/day and rain will increase hay requirements 6lbs/day. This is why often horses are put on grain (or increase grain) in winter, because they are unable to consume enough calories with hay alone.

Along with changing feed is monitoring water intake. Horses tend to decrease their intake of water, but there needs increase due to the increased forage consumption. This is why impaction colic is more common in winter. Supplying a free-choice mineral or salt block will help increase intake. Remember to check water buckets for ice and, if able, add de-icers to help maintain and more preferable water temperature.

Shelter and Air Quality:

All horses should have at least a three-sided shelter for protection against the elements. Often owners choose to keep the horses stabled more during winter; however this is wrought with problems. Horses allowed to exercise throughout the day are healthier and less likely to colic. Also air quality is a major factor in stabling, especially during winter months. Stables should be managed around horse care and unfortunately not human care. It is better to have a cooler, fresher air and have to wear an additional jacket, than deal with poor air quality. Closing a barn completely allows for an accumulation of urine ammonia, endotoxin particulates from manure, dust, and molds from hay and bedding. Ammonia can destroy the epithelial lining if the respiratory system and contribute to respiratory diseases such as inflammatory airway disease and heaves. When accessing the air quality in the barn one must be sure to evaluate the stalls, not the just the alleyways, because the ammonia is often concentrated at ground levels in the stalls. If you can smell ammonia it is too much. Recommended ammonia levels are less than 10ppm, but the human nose doesn't detect it until 20ppm. There are also testing kits available for ammonia testing.

Blanketing:

A horse's best defense is a proper hair coat. If there lifestyle allows it (heavy training and working may require clipping), they should be allowed to grow a thick winter coat. A blanket may be necessary under several conditions; clipped hair coat, improper shelter, wet coat, older horse, or improper winter coat growth. If a horse is shivering at any time they need additional coverage. Blankets should be checked frequently for rips and dryness, and check to make sure your horse is not too warm.

Hoof Care and Exercise:

If a horse isn't being worked heavily outside then shoes should be removed. Normal shoes can be slippery and cause snowballs to build up on the bottoms of feet. Regular hoof maintenance (trimming) can often be decreased from every 8 weeks to at least every 12 weeks. If shoeing is necessary, use the proper shoes with traction and most likely snow pads will be necessary. When turning horses out, be careful of rough frozen ground that can easily bruise their feet and slippery ground that can lead to devastating accidents. Gravel, sand, kitty litter and ice salt can be used to aid in traction.

Exercise through the winter is important for intestinal motility as well as general fitness and health. Also remember when exercising in winter take time to properly cool down your horse. Wool coolers and walking after exercise will help to cool down and dry their sweaty coat. Horses can quickly chill after a strenuous work out which can lead to muscle cramping and illness.

2017 Vaccine Guarantee-

- Immunization Support Guarantee from Boehringer Ingelheim
- Guarantee offering up to \$3000 at no additional cost when vaccine is supplied and administered by veterinarian.
- This will pay toward diagnostic and treatment costs if horse contracts a vaccinated disease, such as:
 - o West Nile
 - o Influenza
 - o Tetanus
 - o Eastern Equine Encephalitis
 - o Western Equine Encephalitis

The recommended vaccines for 2017 for northern New York are Rabies, EEE, WEE, West Nile, Tetanus, as well as Influenza, equine herpes virus and Potomac Horse Fever based on specific location and use. Equine herpes virus prevalence is increasing nationwide and it is highly recommended that if your horse will be in contact with other horses (events, shows, trails) that they are vaccinated against it. It is predominately seen in race and show horses and easily spread.

Lyme vaccination is possible with a canine vaccine. This is an off-labeled use, but veterinarians have seen results. It is a three-dose series. We have seen a significant increase in our area. Treatment is difficult and can be unrewarding. Testing before vaccination is required.

When deciding which vaccines to use you must evaluate the risks and exposure of your horse or herd. Remember that although only one horse from a given facility may travel, he exposes all of his herdmates. Therefore all horses in a given facility should be vaccinated appropriately. Risks are age, environment, climate, and use. Exposure may range from insect prevalence to a single horse to horse-horse contact at various events. All of these must be kept in mind when deciding on a vaccine protocol.

We use vaccines to keep our horses safe, but must be mindful of their well-being. We must remember to practice good horsemanship, such as using fly control, parasite management, and horse-horse exposure. Vaccines aid in this prevention, but are not 100%.

There also is a risk of post-vaccine reactions. These can range from mild soreness to full-blown anaphylactic reaction and should be kept in mind when deciding what to vaccinate against. I encourage everyone to check out www.outbreak-alert.com. This website continually updates with positive cases in your area.

2016 Vaccine Pricing

Rabies	12.00	Digital Coggins	40.00
Potomac + rabies	31.00	Fecal	25.00
Vetera Gold (EEE, WEE, Tet, Flu and west nile)	68.00	Feline distemper	18.00
Vetera Gold XP (EEE, WEE, Tet, Flu, West nile + Rhino)	75.00	Canine distemper	18.00
Vetera EWT (EEE, WEE, tetanus)	50.00		
Strangles	36.00		
Pneumabort	26.00		
Lyme	38.00		
Lyme Assay test	80.00		

Springtime is the best time to vaccinate you horse in the northeast. Even if you have vaccinated your horse in the late summer or even fall, it would be beneficial to change them to a spring schedule. This will cause no harm to your horse. The goal is to establish titers when the threat is highest, which is summer in the northeast. Remember when traveling it is best to have proper vaccination on board two weeks before departure.

1. Rabies –Rabies is a viral neurologic disease which is prevalent in the wildlife in our area. The risk is very high for every horse, regardless of use. It is spread by blood and saliva. Clinical signs are extremely varied. Ranging from colic, difficulty swallowing, depression, loss of appetite, a low-grade fever, lameness and/or incoordination, convulsions, increased sensitivity to being touched, abdominal pain (straining to urinate or defecate), odd behavioral changes, nervousness, irritability, muscle contractions, and death. Mortality rate is 100% and there is no treatment. Exposed unvaccinated animal recommended to be in quarantine for 6 months (vaccinated horses for 45 days)

2. EEE\WEE Eastern/Western Equine encephalitis is a mosquito-borne viral disease spread from birds and rodents. Clinical signs are sudden death, progressive central nervous system disorders, depression, fever, depression, and blindness. Mortality rate is 75-90% and there is no treatment.

3. Tetanus-is caused by the bacteria clostridium tetani, which is found in soil, feces and gastrointestinal tract. Infections develop from open wounds (lacerations, surgical incisions, umbilicus, retained placenta). Clinical signs are muscle contraction (startled facial expression, saw horse stance), fever, colic, lockjaw, third eyelid spasm, and limb rigidity. There is a 90% mortality rate. Treatment is high doses of penicillin and supportive therapy.

4. Equine influenza- Equine influenza is a viral disease spread by direct contact with aerosolized droplets (coughing, snorting) from possibly from as far as 50 yards away. There is a possibility of spreading disease indirectly (horse coughs on brush, other horse chews on brush). Clinical signs are fever, coughing, nasal discharge, distal limb edema. Treatment is supportive therapy. Prevalent in horse populations.

5. West Nile is a mosquito-borne virus that causes inflammation in the brain. It is spread by mosquitos feeding on infected birds and passing it along to horses. Clinical signs are ataxia, depression, weakness, paralysis, muscle twitching, and death. It is not spread from horse to horse or horse to people. Treatment is supportive with a 35% mortality rate.

6. Potomac Horse Fever (equine erlichiosis) is caused by Neorickettsia risticii which is spread by freshwater snails and aquatic insects (mayflies, caddisflies, dragonflies,etc) and causes colitis (inflammation of the gastrointestinal tract). It is not spread from horse to horse or horse to people. Clinical signs are diarrhea, depression, anorexia, fever, dehydration, and laminitis (from endotoxemia). Also can cause abortions. There is a 30% mortality rate. Vaccine decreases clinical signs but may not prevent disease. Treatment consists of oxytetracycline and supportive therapy (fluids and anti-inflammatories) and can be very expensive!

Additional Needs-based Vaccines:

Equine Herpes Virus type 1 (type 3 (mostly abortion) and 4(mostly respiratory))

- Causes respiratory disease, abortion, neonatal foal death and neurological disease(myeloencephalitis)
- Outbreak in midwest last year- 57 confirmed cases, 13 deaths
- Spread through air, contaminated equipment, clothing and hands
- Highly contagious
- Incubation period- up to 14 days
- Treatment- anti-inflammatories and supportive care

Strangles

- Streptococcus equi bacteria
- Highly contagious
- Spread from horse to horse, contaminated equipment, can live in environment for weeks
- Clinical signs- nasal discharge, lymph node enlargement, fever, depression, anorexia
May affect other areas of body- "bastard strangles"
 - Treatment is controversial
 - Antibiotics may be necessary depending on severity
 - Recovery in 6-8 weeks
 - Vaccine is questionable efficacy and has greater occurrence of vaccine reaction