

UPDATES IN BRIEF

- Allergic airway disease refresher
- Cliffe Equine is now an RCVS Tier 2 accredited practice and a BEVA registered clinic for AI
- Special offers on supplements for respiratory and joint disease.
- Cliffe Equine News
- Case study: Tar-sometatarsal Joint Disease in the Hock

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With special thanks to Vetoquinol for sponsoring October's edition of the Cliffe Equine newsletter.

Refresher on Allergic Airway Disease

Allergic airway disease (heaves; recurrent airway obstruction (RAO); COPD) is characterized by chronic cough, nasal discharge, & respiratory difficulty. RAO in horses is most similar to asthma in humans. Episodes of heaves are usually seen when horses are stabled, bedded on straw & fed hay, whereas, elimination of these factors results in remission of clinical signs. There is no breed or gender predilection, however, it is more common in middle aged & older horses & there does appear to be a heritable component to this condition.

Horses with classic RAO have flared nostrils & difficulty breathing. Abdominal muscles are used to help when there is difficulty breathing & over time produce the classic heave line. Mild to moderately affected horses may present with minimal clinical signs at rest, however, coughing & exercise intolerance are seen during work. Horses do not have a fever,

unless secondary pneumonia has developed, but mild secondary infection is not uncommon. Diagnosis is done on the basis of history & physical exam findings. Chest x-rays & endoscopy to sample respiratory secretions may be necessary in complicated cases.

The single most important treatment for RAO is to improve the environment, reducing dust & mould exposure commonly found in hay & straw. Medication will alleviate clinical signs of disease, however, respiratory disease will return after medication is discontinued if the horse remains in a poor environment. If possible, horses should be

maintained at pasture with fresh grass as the source of roughage, supplemented with pelleted feed. Round bale hay is particularly offensive to heavy horses, & commonly causes treatment failure for horses on pasture. Horses that must be stabled should be maintained in a clean, controlled environment & fed a complete feed, eliminating the need for roughage in the diet. Hay cubes & hay silage may be alternative acceptable, low-allergen roughage sources. Soaked hay is unacceptable for highly sensitive horses. Stables should not be in the same building as an indoor arena & hay should not be stored overhead. Straw bedding should be avoided, it is best to use shredded paper or cardboard.

Medical therapy consists of anti-inflammatories & bronchodilators. Medication may be given by aerosol, oral or injectable methods. Aerosols are generally more effective (when administered correctly) and safer for long-term use.



Heave line on the abdomen

Cliffe Equine Clinic News

As many of you will have heard, John Daykin, senior partner at Cliffe Veterinary Group died tragically last month. He had dedicated many years into the practice & was known well by a great number of clients. We were all shocked by the news & he will be greatly missed.

We were looking forward to the return of our head nurse, Penny Brownings to work in the near future as she has been recovering from her knee injury steadily. Unfortunately, her return will be a

little delayed again as she has now fractured her wrist! We wish her a speedy recovery again & hope she will be back soon.

Finally, we are sad to announce that one of the vet team will be leaving us at the start of October 2008. Ed Jose-Cunilleras who has been with us for the last couple of years is leaving us to return to Spain, taking a lecturing post at the University of Barcelona. We have greatly enjoyed having Ed working at Cliffe Equine & wish him & his family the best of luck in their new



venture.

Fortunately for us, our current seasonal locum, Jessica Dicks, whom I sure many of you now know, will be staying on with us until December until we find the latest additional to our team.

Lastly, Anne Cownley & Cathy Dawes are also departing for pastures new so some new faces (and voices) will soon be welcomed to the office.

CLIFFE EQUINE



CLIENT EDUCATION EVENING

Many thanks to the people who attended the either one of the client evenings. It is the first time we have run two separate evenings with the same talks on the east and west sides of Sussex. We hope people will find that one venue will be closer to them and encourage people living on the further outreaches of the practice area to come along. We hope everyone enjoyed the evening and took away some helpful tips and advice. Should anyone have ideas or requests for future topics they would like an client evening on please ring Imogen on (01323) 815120. Don't forget to keep checking the website frequently for details and more information of upcoming events:

www.cliffeequine.co.uk

HORSE HEALTH PLANS

Don't forget now is the time of year when the **horse health plans**, launched last year are best done. The plan provides a complete health care assessment of your horse or pony, including blood samples. The plans helped to identify subtle abnormalities in the early stages in many horses of all ages over the past 12 months which prevented future problems. The health plans also have extra benefits attached to them; such as: 10% off vaccinations done at the time; 10% off dental work performed within 6 weeks; 10% off wormers purchased and discounted foot balance

SPECIAL OFFERS ON

JOINT & RESPIRATORY SUPPLEMENTS

As a follow up to the allergic airway and joint disease talks, we are offering 10% off on all nutraceutical supplements bought from us for your horse or pony before the start of December.

We stock a wide range of supplements, many of which are not available through regular feed suppliers/tack shops. We only supply products we feel have good evidence demonstrating clinical improvement, e.g. the joint supplement **Equi 4S** and **Equi HY120 4S**, because of a better bioavailability of the constituents necessary to improve function and reduce inflammation in diseased/aged joints. These supplements are especially useful before any problems are found to maintain joint health and prevent arthritic changes occurring.

Another thing to consider when using supplements is whether a competition drug withdrawal period needs to be observed prior to an event. Many of the supplements we supply are acceptable for use during competitions. For example, **Secreta Pro** will provide excellent support for the respiratory system without enhancing athletic performance.

For help when choosing any feed supplement, please contact us at the clinic to discuss your horse's requirements so we can advise you of the best supplement choice for your individual case.

x-rays, at a price of £100 plus a visit charge. Should you like more information about this and to find out if it is suitable for you, please ring Sally at the clinic on (01323) 815120.

Case Study: Degenerative Joint Disease in the hock

"Dora" was bought about 6 weeks ago to use as a general purpose family cob. All was going well until she started refusing at jumps, putting in the occasional buck and was difficult to get on the correct canter lead.

"Dora" was examined at the clinic and was found to have a short, choppy stride in both hind legs but no obvious lameness at walk or trot in a straight line or on circles on a hard surface. However, there were positive results to flexion tests of both hind legs.

When examined on the lunge on a soft surface "Dora" did not seem to be able to canter easily, running the transition in to canter, striking off disunited repeatedly on both reins & bunny-hopping frequently.

Physical examination showed that "Dora" stood naturally with an hind limb, base-narrow stance. When observed from the side, she had an "elephant on a tub" stance. No joint swellings were found or pain elicited on palpation of any part of the limb.

Several nerve blocks were performed to numb the foot; pastern and fetlock region; flexor tendons & suspensory ligament. None of the blocks improved the action of the horse & the flexion tests remained positive.

The tarsometatarsal joint of the right hind hock was injected with local anaesthetic to



Right hock x-ray showing arthritic changes & new bone formation

numb this area. After 15 minutes "Dora" was trotted up and an obvious left hind limb lameness was now apparent. The same joint was blocked on the left hind leg. "Dora's" gait had a much longer stride and no lameness was evident at trot, even with flexions.

When "Dora" was put onto the lunge, she was no longer bunny hopping, had much smoother transitions & led on the correct leg at all times.

Because of this response, radiographs of both hocks were taken. Evidence of marked osteoarthritis in both the left & right hock low motion joints with extensive new bone formation was found, as is seen on the x-ray shown.

The amount of destruction shown in this case meant that joint arthrodesis, a surgery to fuse these joints together to prevent further pain, was performed. The surgery was successful and "Dora" returned to full work only a few months later. The joint supplement Equi HY120 4S was prescribed to maintain the health of her other joints.