

# EQUINE HEALTH NEWSLETTER

Spring 2016, Issue 1



## EAST COAST EQUINE

VETERINARY SERVICE

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## NEW: USEF

### Vaccination Rule

The USEF GR845 Equine Vaccination rule came into effect December 1, 2015. Horses competing at USEF events must be vaccinated for the Equine Influenza Virus and Equine Herpes Virus (Rhinopneumonitis) within 6 months prior to competition. Acceptable forms of documentation are as follows: 1. Documentation

such as a vaccine certificate provided by a veterinarian must include the name of the vaccine and the date the vaccine was administered.

2. If the vaccine is administered by a person other than a veterinarian, competitors must provide the receipt of purchase, Serial number, expiration date of the vaccine, and the date of administration.

3. If the horse is unable to receive vaccinations due to a history of adverse reactions, a letter from the

veterinarian on official letterhead stating that the horses cannot be vaccinated due to medical concerns and a log of temperatures taken twice daily for seven days prior to competition must be provided. Those who fail to comply may be required to leave the competition.



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## VETERA VACCINE ASSURANCE PROGRAM

The BIVI Vaccine Assurance Program offers your horse protection against West Nile virus, influenza, Venezuelan equine encephalomyelitis, Eastern equine encephalomyelitis, Western equine encephalomyelitis, and tetanus. Consult with your veterinarian concerning risk-based assessments pertaining to your horse and recommended vaccination frequency.

By incorporating the family of Vetera® vaccines into your disease prevention program, you can be assured that horses will receive comprehensive protection.

### What you need to know about the program

Vetera vaccines must be administered by a licensed veterinarian who has a valid veterinarian-client-patient relationship.

All naive horses will be covered by the BIVI Vaccine Assurance Program following two doses of Vetera® vaccines, administered at appropriate intervals.

Horses previously vaccinated with other licensed vaccines in the prior year are covered by the BIVI Vaccine Assurance Program when subsequently vaccinated with 1 dose of any of the Vetera vaccines.

Coverage under the BIVI Vaccine Assurance Program is limited to diagnostic and treatment costs for West Nile virus, influenza, Venezuelan equine encephalomyelitis, Eastern equine encephalomyelitis, Western equine encephalomyelitis, and tetanus, depending on the vaccine administered, and is limited to \$3,000 per horse.

Other terms and conditions apply. Talk to your veterinarian for complete details. You should consult with your veterinarian to determine which vaccine and frequency of vaccination(s) will optimize your horse's disease protection program.

## What is A Fecal Egg Count and Why does my horse need one?

By: *Andrea Butterfield, DVM*

In the last 40 years we have learned a lot about our horses and their worm burdens, making the old system of rotational deworming quite antiquated.

The worms we historically were most concerned about, namely the “Large Strongyles” (*Strongylus vulgaris*) are now very rare to find in adult (>3 year old) immune competent horses. Now, the “Small Strongyles” (cyathosomins) are the major parasite of concern for adult horses. Because the life cycles and host-parasite dynamics of these two parasites are different, the old method of deworming every 6-8 weeks is no longer appropriate for controlling the worm populations of today. When talking about young horses (<3 years old), the main parasite of concern remains the ascarid (*Parascaris equorum*). Large strongyles and ascarids are susceptible to different dewormers, so knowing which parasite you're dealing with will help to make the best deworming decisions for your horse.

Due to so many years of frequent rotational deworming, a high degree of resistance to the common anthelmintics (dewormers) has developed in our worm populations. By “resistance” we mean that the worms are able to survive treatment with a drug that should be effective for their species and stage of development. Drug resistance is inherited in parasites; in other words the trait is passed

down from one generation to the offspring. So, because the cyathostomins were exposed to deworming drugs so often for decades in an effort to control large strongyle populations, many of our drugs are not as effective in controlling them now. This is a serious issue, as we have no new anthelmintic drugs on the horizon, and we need to use what we currently have in our arsenal carefully in order to keep our dewormers effective against our worm populations.

Finally, we now also know that individual horses differ in their susceptibility to parasites, meaning that not every horse needs to be dewormed every 6 weeks. Selecting which horses are dewormed based on their individual parasite load not only saves you money, but also helps to control the growing issue of parasite resistance to our dewormers. In any group of adult horses only about 20-30% of the horses in the herd harbor about 80% of the parasite load in that herd. In other words, only about 1/3 of the horses in a herd are responsible for contaminating the rest of the population by shedding high numbers of parasite eggs in their manure. So by treating only the horses identified to require deworming you can still effectively control the parasite load among your whole herd, while practicing responsible deworming so that our current drugs will be effective for

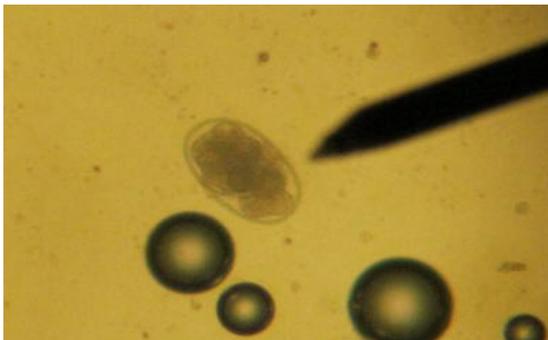
years to come.

Today, based on the information above, we recommend moving to a fecal-based deworming program. The best way to know whether your horse has a high or low parasite burden is to evaluate his/her manure for parasite eggs – a test known as a Fecal Egg Count (FEC). Horses are categorized based on the amount of eggs found in their manure:

- High Shedders – contain >500 eggs per gram (EPG) of manure
- Moderate Shedders – contain 200-500 EPG
- Low Shedders – contain <200 EPG

Based on your horse's individual parasite load, an individualized deworming protocol will be developed by your veterinarian. For example, a "low shedding" horse (70% of horses) usually only needs to be dewormed twice a year! We recommend performing a fecal exam in the spring and fall of the first year of your new program, then just once a year after that to ensure that your horse's needs are not changing. For herds, we recommend testing all horses initially to identify the high shedding individuals that should be monitored more closely.

A FEC test is performed in our office by our veterinarians and trained veterinary technicians. The test needs to be timed at least 6-12 weeks after your horse's last deworming, depending on what product was used (your veterinarian can help you determine the best timing). For the test, simply collect 2-3 fresh manure balls and place them in a plastic baggie. If you can't get the sample to our office right away, refrigerate it overnight. Alternatively, a sample can be collected when your veterinarian is seeing your horse for spring vaccinations.

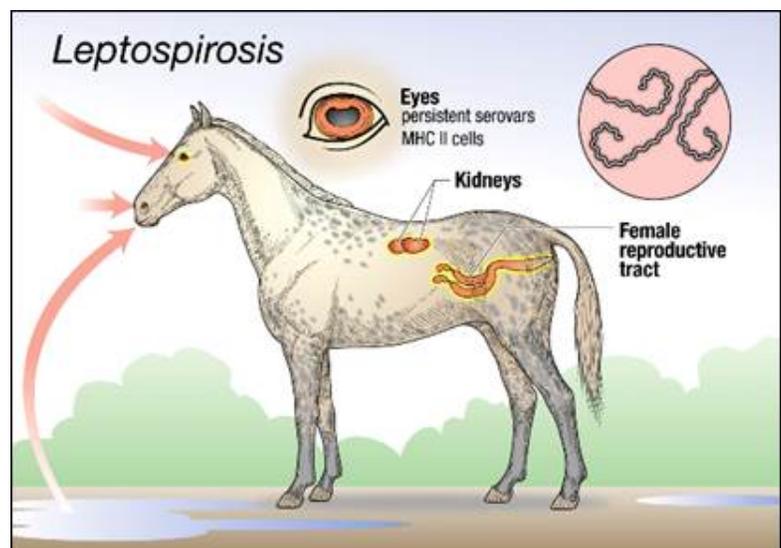


## Leptospirosis-Should We Worry

By: Dr. Alex Ciuffitelli

Leptospirosis is a not-so-uncommon disease caused by a spirochete (a spiral shaped bacteria) that is transmitted thru the urine of rodents, wildlife, and domestic animals that have already been infected. It is picked up through the mucous membranes or in open wounds from contaminated soil or water and, being a zoonotic disease, can potentially be spread to humans. If one horse on a farm becomes infected, it is possible for them to spread it to other horses on the farm thru their urine by contaminating drinking water and the environment.

Signs of leptospirosis include fever, inappetance, depression, and jaundice. It can cause liver and kidney failure, as well as abortions in pregnant mares and is believed to be the cause of ~13% of bacteria-caused abortions in endemic areas. Most horses, however, do not exhibit obvious outward signs of leptospirosis and clear the infection on their own. If clinical signs are observed, treatment can be started by your veterinarian including antibiotics, intravenous fluid therapy, and anti-inflammatories. The greatest concern surrounding lepto is the development of Equine Recurrent Uveitis (ERU), colloquially called "moon blindness". Uveitis is inflammation within the eye and, when chronic, can cause cataracts, glaucoma, lens luxation, and blindness. The two most common types of uveitis seen in the US are "classic" and "insidious". Classic uveitis presents with squinting, tearing, discomfort, and corneal edema, amongst other signs. Insidious uveitis, however, often goes undetected as the horse is usually not showing significant signs of discomfort despite there being a long term, low-level of inflammation in the eye, which can ultimately lead the eye to the same fate as several flares of classic uveitis – blindness. Upwards of 50% of all cases of ERU are associated with leptospirosis infection of the eye (ocular leptospirosis).



# Kids Corner

By: Olivia Kotula

Created with [TheTeachersCorner.net](http://TheTeachersCorner.net) Word Search Maker

## Vet Tools

Find these nine vet tools

F A V H X E V A S S O H G S X B S I X Y  
 Q R F N U Q X E H Z X N A O T T O N L J  
 E N C I I A Q S E K V W Z Z E B Z R G X  
 Q D J G G S D N U O S A R T L U N O T B  
 P K S J Z X E Q V A O X H B R T I R D U  
 Z U V D L D F A E T N O A Y S U D T K U  
 X V V V U G Z K O E S T M Z Y X C P J G  
 - F B L T G P U E C X H Z U V S G O M M  
 R D K I H A R D O Q J E T N K D K K Q V  
 A G O O U G L P X L Q R O E X U Q N Z Z  
 Y R M I T E E W O T S M W D V K U A Z U  
 I Q D I V U O I Z I D O L Z B K Y Y E E  
 Y G I D M D C S V W M M P T A T O Z R K  
 I B P B H N J M P W X E J X R E P Q T M  
 M A I K I Y S Z W E Y T S Y R I N G E H  
 B N S D W Y O Q M I C E Y W D U Y F S H  
 T C O W F X C J O A V R N O K G O R D A  
 R V B N Q Z L F U A D B O R P J E Z N N  
 O E B W R G Y I L B S D Z F D L O X I G  
 V S P E C U L U M N V P J S I A F Q O F

STETHOSCOPE  
 SYRINGE  
 GAG

NEEDLE  
 THERMOMETER  
 SPECULUM

ULTRASOUND  
 X-RAY  
 FORCEPS

The reason why a horse may not present with obvious signs of lepto but can develop ERU is because the inside of eye is “immune-privileged”, meaning that lepto can hide-out within the fluids of the eye and basically remain unreachable by the bacteria-killing cells of the immune system. However, the body still recognizes an abnormality within the eye and sends in inflammatory cells, causing the pain, squinting, and tearing we see with uveitis. Appaloosa horses are particularly prone to developing uveitis and with a concurrent ocular leptospirosis infection, significantly increases their odds of blindness and other significant problems from uveitis.

Unfortunately, leptospirosis titers can be very low even in horses with ocular lepto infections because of the “immune-privileged” status of the eye, making diagnosis difficult. However, there is a new vaccine available to help prevent infection and reduce shedding in horses already infected. Horses at risk for complications from leptospirosis infections (such as appaloosas) and horses on farms with a history of leptospirosis should discuss the benefits of vaccination with their veterinarian to determine if it is right for them. Although there is treatment for leptospirosis, ERU caused by the bacteria can be very difficult to control and will result in chronic, reoccurring eye problems that may ultimately lead to blindness.

If you have any concerns or questions about leptospirosis and your horse’s risk, please don’t hesitate to talk to one of the veterinarians at East Coast Equine!



# zoetis

## NEW SERVICE: Video Gastroscopy

East Coast Equine is proud to announce that we now offer Gastroscopy! Do you suspect your horse has gastric ulcers? With the use of our portable video endoscope we can perform gastroscopy under mild sedation right at your farm! Our scope provides visualization of the esophagus, stomach, and proximal duodenum (beginning of the small intestine). This state-of-the-art technology provides the best quality for thorough examinations. The video endoscope projects the image onto a computer monitor so the veterinarian is able to point out areas of concern to the owner or trainer. For more information on video gastroscopy visit our Services page.



## Biosecurity Quiz

**Q1. True or False. When concerned about contagious infectious diseases, especially at horse events, owners can take a horse’s temperature twice daily (morning and night) during the event and for two weeks after return to the stable.**

**Q2. Which steps in safely taking a horses temperature prevent cross contamination?**

- A. Wear gloves
- B. Disinfect the thermometer with a cotton ball soaked in isopropyl alcohol
- C. Just wipe the thermometer on a towel
- D. A & B

**Q3. Cross-contamination is what happens when \_\_\_\_\_ from one item is transferred to another item.**

**Q4. True or False. Minimizing nose to nose contact at equine events can help protect your horse from contracting contagious illnesses.**

**Q5. True or False. Sharing water troughs, water**

buckets, and feed tubs at a horse show is ok. You don't need to bring your own.

**Q6. True or False. Washing your hands or using hand sanitizer before and after handling or riding different horses can help prevent the spread of disease.**

**Q7. Speedy has a fever, swollen glands, and discharge from his nose. You suspect a contagious illness. What should you do to protect the rest of the horses in the barn?**

- A. Nothing. Speedy will be fine
- B. Isolate Speedy in another stall, give him a separate pitch fork, muck tub, a foot bath outside his stall, hand sanitizer outside his stall, and assign one person to be in charge of Speedy's care.
- C. Turn Speedy out with his herd mates
- D. Monitor Speedy's herd mates temperatures
- E. Both B & D

**8. Which of the following vaccinations are available to help control the spread of horse to horse contagious diseases?**

- A. West Nile Virus
- B. Influenza
- C. Strangles
- D. Encephalitis
- E. Equine Herpes Virus
- F. Rabies

**Q9. Vaccinations are important for horses that show because**

- A. A vaccinated horse will NEVER get any disease it is vaccinated for
- B. It lessens the severity of the disease if contracted
- C. Unvaccinated horses are a liability for the horse show and grounds
- D. It decreases the shedding of contagious viral and

bacterial particles from stressed or sick horses

- E. B and D

**Q10. What does a Coggins test for?**

- A. Equine Infectious Anemia
- B. Equine Herpes Virus
- C. Contagious Equine Metritis
- D. Equine Viral Arteritis

**Q11. What is a fomite?**

- A. type of arachnid
- B. Anything that can carry infectious agents from one animal to another
- C. A type of foaming disinfecting product
- D. A virus that is capable of killing bacteria

**Q12. Which of the following is the most effective, commonly found disinfectant to use if you have a suspect or confirmed case of an infectious disease, such as strangles, on your farm?**

- A. Rubbing alcohol
- B. Soap
- C. Bleach
- D. Vinegar

## Answers

- Q1. True, Q2. D, Q3. Microorganisms, Q4. True, Q5. False, Q6. True, Q7. E, Q8. B,C & F, Q9. E, Q10. A, Q11. B, Q12. C