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# NEWSLETTER

FEBRUARY 2005  
ISSUE 1

## Mayes & Scrine, Equine Veterinary Practice

## MUD FEVER



The Mud Fever and Thrush season is well and truly upon us, despite (as I write) the relatively low rainfall. Sadly, Dermobion is no longer being manufactured as one of the active

ingredients, nitrofurazone, is banned in the EU. I still recommend washing twice weekly with Betadine or a medicated shampoo e.g. Horse Health's "Clear Up". Give the scabs a good soaking, pick off any that want to come and then dry with PAPER TOWELS. Clipping the legs to expose the scabs is often essential. Dispose of away from other horses. Over washing can remove the skins naturally protective oils. Apply GOOD creams or gels to the sore areas. FUCIDERM is a powerful dog and cat gel that is very effective (prescription/vet only). Fungatrol (Equine America) can be tried.

The bad cases may require more veterinary attendance and more aggressive treatment such as cling film "sweats" and antibiotics.

Remember that in cobs and heavy horses mange mites may not be helping and often cause the horse to stamp. These can be treated with a Dectomax injection. Mud fever can lead to Lymphangitis, a severe disease.

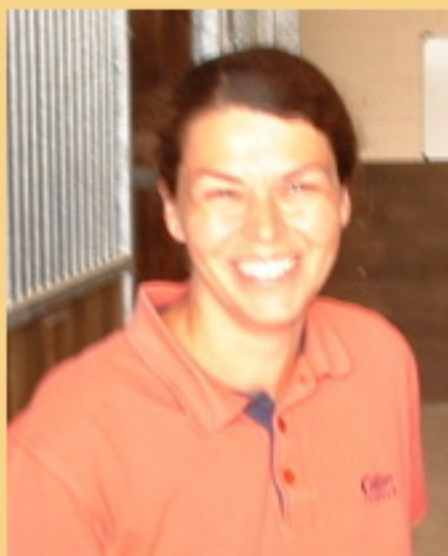
Thrush of the frog may lead to lameness and needs twice weekly management with peroxide or antibiotic spray (veterinary only). Scrubs with Betadine may help, and the application of sugar/Betadine ("sugardine") can be very effective.

**MORE INFORMATION ON A PRACTICE FACT SHEET - RING FOR A COPY.**

## PRESCRIPTION DRUGS

Most of the drugs we provide are Prescription only drugs. Although we charge a handling fee on these it is less of a mark up than you think - less than Tesco's average for example. Please remember VAT has to be charged on veterinary products but not human medical products. We use Prescription drugs because they are the best and they work. They should only be used in the animal to which they are dispensed and MUST be kept away from children. Some drugs, such as wormers, are PML or GSL and can be bought over the counter at licensed outlets e.g. some food

merchants and tack shops. We can provide you with a prescription and you can source your drugs elsewhere e.g. at an on-line pharmacy. However, we are obliged by law to re-examine animals on long term prescription drugs, such as bute and Ventipulmin. This should be at least every six months. There are several black market prescription drugs available in some yards locally. These are illegally imported, illegally labelled (usually Australian), illegally sold and illegally purchased. Please do not encourage this black market.



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## WELCOME



Welcome to the inaugural practice newsletter. We hope to use the tried and tested newsletter format to keep our clients and yards informed of developments in the practice and trends in horse health care nationally and locally. As a practice we are committed to customer care and very personalised patient care. Hopefully the newsletter, information sheets, client talks and the website (coming soon) will supplement the existing professional services we offer.

The newsletter will be published quarterly. To save us just pouring more paper through your letterbox, this first newsletter is the only one that will automatically be sent to all of you. The May edition will be sent out with the accounts for three months or can be e-mailed or sent to you on request. We intend to build an e-mail contact database so they can ultimately be sent out quickly and paper-free. Just e-mail the office to get on the list.

Obviously, feedback, comments and requests are most welcome and can be added to future editions.

Wishing you and your horse a healthy 2005

Ben (editor, No.1)

## HANDSOME YOUNG NEW VET JOINS PRACTICE

LAURENCE O'HARA JOINED THE PRACTICE IN OCTOBER. LAURENCE IS A PERSONABLE YOUNG ENGLISHMAN, GRADUATING FROM CAMBRIDGE (LIKE BEN AND JUDY) AND SPENDING A YEAR AS HOUSEMAN, ANAESTHETIST AND REFERRAL RECEIVER AT BELL EQUINE HOSPITAL IN KENT. HERE HE WAS BOMBARDED WITH REFERRAL AND PRACTICE CASES AND LEARNT TO DEAL WITH THE DEMANDS OF KENT CLIENTS (REPUTEDLY SECOND ONLY TO ESSEX FOR AWKWARDNESS). SINCE JOINING US, LAURENCE HAS PROVED TO BE POPULAR WITH ALL THE CLIENTS AND PATIENTS HE HAS MET.

OUT WITH THE SCOT... SADLY ALASTAIR LEFT THE PRACTICE IN OCTOBER AFTER NEARLY TWO YEARS. HE VERY MUCH ENJOYED HIS TIME WITH US AND HAD BUILT UP A DEDICATED "CULT" FOLLOWING. HOWEVER, HOPING TO GET MORE SURGICAL EXPERIENCE, HE HAS MOVED TO A 15 VET EQUINE HOSPITAL NEAR NEWBURY WITH PREDOMINANTLY RACEHORSE WORK. HAVING LOST HIS NEW PRACTICE CAR IN A RIVER IN HIS FIRST WEEK HE HAS NOW SETTLED IN WELL. BEN RECENTLY SPENT A WEEK WITH HIM ON A SPECIALIST COURSE IN NEWMARKET AND HE ASSURES US AL HASN'T CHANGED.



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# PASSPORT DEADLINE

The magic date for the "enforcement" of Horse Passports (England) Regulations 2004, that is 28th February 2005, is nigh. For those of you who may not be aware, all horses, ponies and donkeys in Europe legally have to have a passport. This is primarily to do with human consumption of horsemeat (80% of horses on the continent) and EU concerns about meat drug residues. The declaration "not intended for human consumption" was a concession to the UK and has allowed us to keep using certain drugs, such as bute. There are over 70 passport issuing organisations in the UK, mainly breed societies and it is recommended that you contact them to apply for a passport if your equine is of a known breed. The Practice has Horse Passport Agency application forms and they charge £14 for a passport. We charge £5 to transfer identity drawings done by a vet (e.g. vaccination certificate/vetting certificate) to an application form. The identity now has to be done by a vet or a registered identifier.

It is the responsibility of the OWNERS to apply for a passport. It is they who may be fined by DEFRA or trading standards for not having one. Vets are NOT policing passports. We will still treat your horse if you do not have one, although the identity of the horse

and a list of drugs and batch numbers have to be recorded in duplicate. Ultimately we may have to charge you for the extra time this will incur. The passport should be checked by the vet prior to treatment. If the DECLARATION that the horse is NOT intended for human consumption (Part A) is SIGNED BY THE OWNER in the MEDICAL TREATMENT section of the new passport then that is all that needs to be done. Please note, passports more than a year old, e.g. thoroughbred, warmblood or FEI passports, may not have a Medical Treatment section and must be updated by the issuer. The medicines only need to be recorded BY THE OWNER if that declaration is not signed. The countersignature by a "competent authority" is not a requirement. In reality, it is likely that we know your horse well. We intend to check your passport and the signed declaration, record the passport details in our database and thus reduce repeat checking. Please keep your passport with the horse e.g. at the yard.

### SUMMARY:

Finally, for the vast majority of you who already have passports, if in agreement please sign the "not intended for human consumption" declaration in Part A of the Medical Treatment section (and please keep the passport with the horse.

## Practice Spring Talk

OAKWOODHILL  
VILLAGE HALL  
7:30pm TUESDAY  
15th MARCH 2005  
ALL WELCOME

This year's talks will be three short presentations, including Ben on "How to achieve the Healthy Horse" which will include advice on vettings, insurance, vaccination, worming and teeth, Laurence on the realities of referral hospital versus clinic-based practice and an "industry" talk e.g. on strangles vaccine or nutrition. Tea, coffee and biscuits will be served in the interval and you are welcome to join us all for a drink in the Punchbowl afterwards.

The Hall is opposite the Punchbowl Inn, just off the A29 one mile south of Ockley (signed Oakwoodhill). Please let us know numbers of attendees by Friday 11th March if possible.

## STRANGLES VACCINE

For the first time in Europe a vaccine for Strangles is now commercially available, "Strep-e" from Intervet. We are happy to vaccinate your horse against this potentially devastating disease, BUT please consider the following:

■ In my experience, the Strangles bug, Strep. equi, is quite common in the Surrey/Sussex area and we often isolate it from a burst abscess or thick runny nose.  
■ However, this is usually isolated to the one individual horse and yard outbreaks are relatively uncommon. Five yards in this Practice in ten years.

■ In a yard outbreak about half of the horses are affected, and only a fifth of these develop abscesses. Only 2% may die from complications, however 8% become carriers. The yard will need to be closed down for several weeks and checked for carriers before the all clear is given.

■ Like all vaccines, vaccination is about population control more than individual control. The vaccine will only reduce symptoms in an infected horse. If 70% or so of the yard is vaccinated there is unlikely to be an outbreak in yard, but if only one or two are vaccinated...

■ The vaccine only works after a primary course (two jabs one month

apart) and requires six monthly boosters, and every three months if Strangles is known to be around. This is costly at £25 + VAT per jab. It has to be injected into the inside of the upper lip and may cause the horse to be a bit dull for a day or two.

### Stop Press: Flu Vax

If you compete under F.E.I. rules, from January 2005 Influenza vaccines need to be boosted every SIX months. This primarily involves international competitions, but may effect some British Eventing and BSJA competition. Please check with your competition governing body.

### Contact us

The office is open Monday to Friday 8am-5pm, please TELEPHONE for appointments, 01306 628222 (2 lines). The new fax number is 01306 628379.

E-mail Charlie (and Jane) on office@equinevetpractice.co.uk, Claire (in-patients and pharmacy) is on info@equinevetpractice.co.uk.

I am on ben.mayes@equinevetpractice.co.uk, PLEASE do not use e-mail to make appointments, ALWAYS telephone, we are at the end of a phone 24 hours a day, everyday.

