STAFF NEWS

Congratulations to:
- Emmanuel Engell MRCVS, our orthopaedic surgeon and his fiancée Liz, whose wedding took place at the end of September.
- Jane Lindop MRCVS, our senior ambulatory assistant vet, who returned from holiday engaged to her boyfriend Ben Morgan.
- Toni Kelley MRCVS, our new hospital intern from the Royal Veterinary College, London, whom we welcome. She joins our team of dedicated young vets who live in our flats at Bell Equine and care for the horses at our equine hospital.
- Emma Houghton MRCVS, who has just finished her year's internship with us and has now completed an exchange visit with a Dutch Equine Hospital with whom we work. Then she is off to Australia before returning to work as an equine vet in Salisbury. Rosie Naylor MRCVS will also complete her year with us this autumn and is planning a move to Newmarket. We wish them both well and thank them very much for all their hard work and dedicated care of our patients. We hope they will return to us in the future!
- A certain other member of our team is shown celebrating a big birthday in September below. He wishes to remain anonymous, but we welcome captions to go with this photo to celebrate the event!

NEW COMPUTER SYSTEM AND ACCOUNTS

Computers
You may already have noticed that the financial paperwork that accompanies this Newsletter has improved. This is because we have just completed a major upgrade of our practice management computer system. The new system (Eclipse) went live at the beginning of September - after the inevitable first week of teething problems, it is working well and we are really pleased with our new system!

The software programmers have managed to export all of the information from the old database, stretching back 10 years, so the client records and clinical notes are unaffected by this changeover. However, with this more advanced software, you may be asked for some additional information when you make an appointment, for example the post code for the location of your horse, and it would be helpful if you could have this to hand. This will help us find you and your horse more quickly using the Satnav equipment which is now in regular use by our vets to ensure our service to you is more efficient.

A big advantage of our new system is the computerised diary. Previously we had a paper based appointment management system. As the practice has grown, this has become increasingly complicated. We now have up to seven vets out visiting stables, as well as the same number working in the hospital. All these vets require various pieces of equipment in different places, which can be challenging to organise. To make sure everyone is at the right place at the right time we have had a centralised real-time diary designed to efficiently manage everything.

There will be further teething problems of course, but please bear with us and let us know of any issues as soon as they arise, so that we can continue to provide the best possible service for you and your horse.

Accounts
We wish to remind clients that the prompt payment discount scheme is unaffected by this change. All clients will continue to be entitled to a 10% discount if payment is made at the point of service i.e. at the time of a visit, out-patient appointment or at the discharge of a hospital in-patient. Clients who choose not to take this discount will be entitled to a 5% discount, if payment is made within 15 days of receipt of the invoice. We can take payments in person or over the phone, and accept cash, cheques, credit and debit cards. Please call our accounts department direct on 01622 816033.

PHARMACY INFORMATION

Bell Equine runs a fully stocked equine pharmacy that is accessible by our vets at all times. Most treatments will be dispensed by the vet at the time of their visit to your horse or when your horse is discharged from the hospital. Occasional items may need to be collected from the hospital or rarely some may be posted; however, we are legally restricted as to what can be sent in the post. There are a few treatments that we do not routinely stock (some of which we are not legally permitted to stock), and in these cases we may need to order them specifically for your horse or may issue you with a prescription to enable you to purchase medicines from a pharmacist.

Repeat treatments may be supplied at the discretion of the vet in charge of your case, provided that your horse is still being seen by us on a regular basis. If we have not actually seen your horse or pony for more than 6 months we are obliged to re-examine him/her to ensure that it is reasonable to continue with the same treatment. We may make an exception in the case of some of our patients that we have seen regularly over more than three years or for those of you whose horses are on our Regular Veteran review scheme. For these we may be able to extend the interval between repeat prescription check ups for a maximum of 12 months.

In order to keep our books balanced, we can only supply repeat treatments...

GENERAL

If you have any queries, please do not hesitate to contact us, either on the main office number 01622 813700 or for accounts calls, tel: 01622 816032 or 01622 816036 between 9:00am and 4:00pm. To make any payments over the phone, it is helpful if you have your account number ready.

Thank you
problems of equine old age including Cushing’s disease and how best to feed and manage older animals. Our vets will be there to answer your questions and refreshments will also be available, so it will be an excellent opportunity to talk to us about your concerns. The meeting will be chaired by David Sinclair MRCVS. If you would like to attend our meeting or would like further information about this, please contact our secretaries, Joy Anderson and Jan Henderson on 01622 816034 or speak to Jane Lindop directly.

RINGWORM RISKS

Ringworm has been an all too frequent diagnosis recently. We suspect that this is due to the damp summer weather. Just to remind everyone, ringworm is a fungal infection of the skin, that can infect both horses and people. The fungal spores can survive for a long time in the environment e.g. in stables, horse boxes and on wooden fences. It can also live on tack, grooming kit, rugs and dippers. Horses become infected through small abrasions in the skin. The fungus colonises the superficial layers of the skin, the hair follicle and the hair shaft. This causes the hair to break off resulting in unsightly stubble, which, despite the name, is not always ring shaped.

The incubation period is usually 4–14 days but can be up to one month. Ringworm is very contagious so outbreaks often occur.

What to watch for:
- Ringworm can occur anywhere on the body but usually affects regions rubbed by tack e.g. the head, neck, girth and saddle regions. We most commonly see it as small blotches on the head usually spread by shared headcollars.
- The lesions are very variable in appearance. In the early stages, tufts of hair may stand up from the rest of the coat. Affected areas vary from a couple of millimetres up to 4–5 centimetres. They are often round, but can be any shape.
- The tufts of hair then fall out leaving an area of grey, scaly skin. The patches may enlarge as the fungus spreads outwards from the edge of the lesion.
- Some horses react to the fungal toxins and the skin becomes inflamed. A crust of exudate forms under the hair tuft. The lesions are not generally itchy unless secondary bacterial infection occurs.
- What to do about it
  - If the ringworm is left untreated, the disease is self-limiting and, will eventually clear up on its own with most horses recovering in 4–12 weeks. We usually recommend prompt treatment as soon as ringworm is suspected to reduce the severity and duration of the disease, prevent contamination of the environment and minimise risk of spread to other horses.
  - The disease is spread by direct contact, so infected horses should be isolated wherever possible. Since the fungus can spread between horses on clothing and hands, ideally only one person should handle the infected animals, or, the infected animals should be handled last.
  - Some strains of ringworm are transmissible to humans, so ideally overalls should be worn to protect clothes from contamination. Always wash your hands with an effective fungicidal wash (such as povidine) after handling an infected horse.

How to avoid ringworm spreading?
- Whilst the ringworm lesions are active, the infected horse can infect its surroundings with ringworm spores. Once in the environment, the fungus can live for months or years. Measures should be taken to reduce environmental and equipment contamination. These include:
  - Starting treatment and taking hygiene precautions as soon as the condition is suspected.
  - Not grooming infected horses as this is likely to spread the infection.
  - Soaking brushes, rugs, tack, clippers etc. in a fungicidal wash, such as Virkon®. Equipment and grooming kit should not be shared between horses in the event of an outbreak.
  - Remember to treat your riding boots as these can be a source of infection.
  - Avoid clipping an infected horse as this is likely to spread the infection. The exception is if the horse has a very thick coat preventing effective treatment of the lesions.
  - Contaminated stables and wood may be treated with pressure washing and an antifungal wash, bleach or disinfectant such as Virkon®. Bedding should be removed and burned if possible.
  - If the lesions are under the girth or saddle, the horse should not be ridden. The pressure could irritate the skin and cause a serious reaction.

Ringworm is not serious, but many yards have found it to be a real nuisance this year. The best advice is to be watchful and contact Bell Equine as soon as you spot any suspicious signs.