

SPRING 2009 NEWSLETTER

BELL EQUINE
VETERINARY CLINIC

BELL EQUINE NEWS

As well as working hard looking after horses, ponies and donkeys in Kent, we have been venturing further afield for your benefit. Recently our head receptionist, **Gaynor Osborne-Leeds**, has been doing further training in London, whilst our hospital administrator, **Linda Loines**, has been in Birmingham studying up-to-date medicines legislation. **Jane Morgan**, a key member of our ambulatory vet team, attended an interactive training day on managing horse wounds, but there were far too many gory pictures for this newsheet! **Rob Pascoe**, our dentistry expert (who is qualified both as a vet and an equine dental technician) has been in Holland, where he was honoured with an invitation to train European vets on new techniques in equine dentistry. **Karen Coumbe** has recently returned from America, where she was invited to be part of the treating vet team at the FEI Rolex Three Day Event in Kentucky, which was an exciting challenge.

NEW HEAD NURSES

Jo Gregory and **Matt Legg** have been working at **Bell Equine** for many years and they have recently been promoted to a joint head nurse position. This new and exciting role will enable this dynamic duo to further enhance the growth and development of the practice. Either Jo or Matt are almost always available during normal office hours and would welcome feedback from clients on all areas of the equine nursing team activities.



Left to right: Jo Gregory and Matt Legg

EQUINE GASTRIC ULCER SYNDROME

Gastric ulcers are estimated to affect 92% of racehorses and almost 60% of performance horses. If you want to know more about possible risks, go to the new gastric ulcer risk assessment website www.gastriculcerisk.co.uk or contact **Bell Equine** directly for advice on **01622 813700**.

HOW AND WHY DO ULCERS FORM?

The upper part of the stomach in the adult horse has no secretory or absorptive function. The lower part of the stomach is more complex and contains the gastric glands that secrete hydrochloric acid. Gastric ulcers can form in the upper region due to an increased exposure to acid or in the lower region due to problems with the natural protective mechanisms. Horses evolved as 'trickle feeders' grazing almost all day. In contrast, our modern horse is usually stabled, and given two or three cereal-based feeds a day, sometimes with only small amounts of forage or grazing time, depending on the level of work. This results in long periods with little or no food intake. An important feature of equine ulcers is that gastric acid is secreted continuously in the stomach, whether or not the horse is eating. If a horse does not eat for several hours, this continued secretion means a buildup of acid causing ulcers to begin to develop. In contrast, horses constantly eating hay or grass have much lower acid levels. Other risk factors included intense exercise, travelling and stress.

AND FINALLY...

We would like to take this opportunity to remind clients that we offer a 10% discount for immediate payment at the time of service either by cash, cheque, credit or debit card. Alternatively a 5% discount is available if payment is received within 15 days of receiving an invoice. In recognition of the credit crunch, we are doing our bit to help you by keeping our visit and vaccination costs the same in 2009. We have not increased these fees in three years!



We have a purpose designed 3 metre long gastroscope, which is used to diagnose equine gastric ulcers

WHAT TO LOOK FOR?

Signs can be vague. They can include some or all of the following: Reduced appetite, poor physical condition, mild or recurrent colic, diarrhoea, changes in attitude (depression or aggression) and poor performance.

TREATMENT

If ulcers are present, a change in management or medical treatment will be necessary and studies have shown the most effective treatment is the acid inhibitor, omeprazole known as GastroGard™. Stabled horses should have continuous access to hay and calorific needs should be met by the minimum quantity of concentrates that is practical.

A prescription medicine, GastroGard is a potent inhibitor of gastric acid secretion and numerous studies in horses have shown an excellent response to omeprazole, with highly significant healing of gastric ulcers. It takes three to five days for a steady state of acid suppression to be reached. Total healing time is two to four weeks. Horses on GastroGard can remain in full intensity training and can compete under FEI rules whilst on this treatment.

BELL EQUINE VET CLINIC
Mereworth, Maidstone, Kent ME18 5GS

For **general enquiries and all visits**,
Tel: 01622 813700

For **hospital appointments**,
please phone Linda Loines on
01622 816032 or 01622 813700

For **account queries**, please contact
Pat Oram on 01622 816033 or
01622 816036

WEIGHT WATCHERS



Sam Corrie and Cassie Barber weighing a patient

At Bell Equine we see far more problems with overweight horses and ponies than those that are too thin. So we would remind everyone to watch their horse and pony's weight. The very simplest way of monitoring weight is by checking the fitting of your horse's girth: does it do up tighter than usual or does it need letting out an extra hole? You can also use a weight tape (or even a long piece of string) to measure your horse's girth. We have a set of accurate equine weigh scales at **Bell Equine** and you are welcome to check your horse or pony's weight free of charge – just make an appointment at reception to see one of our trained nurses or stable staff, if you want to have a weight check done.

Sam Corrie (who is spending an intercalated year studying with us at Bell Equine as part of his equine studies degree at Warwickshire College) has been comparing the different methods used to measure horses' weights. Sam's study confirmed what we have long suspected - a weight tape will provide a good *approximation* of weight but it can be out by a significant margin, especially in lean or odd-shaped animals, such as a pregnant mare, and in donkeys. We use our equine weigh bridge at the hospital not only to ensure every patient is accurately dosed for any treatment whilst staying with us, but also to allow us to effectively use weight changes to monitor our patients' progress.

HINTS TO HELP YOUR HORSE TO LOSE WEIGHT from Bell Equine

- Modify the type and amount of feed gradually. *Sometimes* vets may advise total starvation for a short time, for instance, when treating certain colic cases. Otherwise never reduce rations by more than 10 per cent within a week.
- Weight reduction must be gradual to avoid metabolic disturbances. Hyperlipaemia, a serious disorder of fat metabolism, is triggered by cutting the feed too drastically or by a period of starvation. It is particularly common in fat ponies and Shetlands.
- If you are not sure, always ask for professional advice from **Bell Equine** and/or a specialist nutritionist. There are some horses and ponies with medical conditions such as equine metabolic syndrome that make losing weight a particular challenge. For more facts on pasture, fructans and feeding the insulin-resistant horse, see www.safegrass.org
- Measure any feed to be given accurately (this means by weight, not volume) to determine appropriate rations.
- Give feeds that are low in fat, since fat is an energy-dense nutrient source, which will obviously increase weight. Most, if not all, feed should be forage-based and any extra food should be low in energy and high in fibre.
- If a horse is only in light work, he may actually need nothing more than hay and grass, but make sure that the horse's vitamin, mineral and protein requirements continue to be met.
- Plenty of fresh water will help the horse's digestive and other systems to function efficiently. A change to a higher-fibre diet can cause impactions and colic, especially if water intake is inadequate.
- Horses naturally graze and eat almost continuously when at grass. Limiting access to high calorie lush grass is an important way of preventing weight gain. Turning out in a sparse 'starvation' paddock can be beneficial as it is more like the natural mountain and moorland environment of many British native ponies.
- When animals are stabled, increase eating time by using double or treble haynets, one inside the other, or use haylage nets with small holes to reduce the amount pulled out with each bite. When seriously restricting feed intake, as with a laminitic pony, we sometimes suggest scattering the hay in amongst non-edible bedding, so they have to hunt for it and take longer to eat it.
- Choose your forage with care. Hay will be better than haylage to encourage weight loss and the type of hay is important too. Use less nutritious hay, e.g. hay made from older plants (i.e. late cut) which will have increased fibre content, a lower percentage of leaves and is less easily digestible and not as fattening. Consider soaking hay to leach out soluble carbohydrates, particularly when dieting a fat pony.
- Feed an overweight horse separately, so he cannot steal the other horses' feed.
- Balance the horse's diet against age and level of activity. Never feed more than a horse needs for the level of work he is doing.
- Increase the time and intensity of exercise as the horse's fitness improves. The more work a horse does, the more he will lose weight. Never feed more *in anticipation* of increased work.

If you want more information on how to determine your horse's body condition, there is a free chart on body condition scoring available to download at www.bellequine.com

BELL EQUINE GUIDE TO IDEAL WEIGHTS FOR DIFFERENT BREEDS OF VARIOUS SIZES, but please remember that it is a guide – young or elderly animals, or those of unusual conformation, may show differences from the figures given.

Breed/type	Approximate height	Girth	Bodyweight guide kg (lb)
Dartmoor	112 cm (11 hh)	140 cm (55 in)	200–250 kg (440–550 lb)
Welsh section A and B	122 cm (12 hh)	145 cm (57 in)	250–350 kg (440–770 lb)
Welsh section C	138 cm (13.2 hh)	160 cm (63 in)	300–400 kg (660–880 lb)
Cob/Welsh section D	148 cm (14.2 hh)	175 cm (69 in)	450–500 kg (990–1,100 lb)
Thoroughbred	163 cm (16 hh)	190 cm (75 in)	500–550 kg (1,100–1,212 lb)
Warmblood	173 cm (17 hh)	205 cm (81 in)	600–700 kg (1,323–1,544 lb)
Shire	183 cm (18 hh)	220 cm (87 in)	700–900 kg (1,323–1,985 lb)

IF you are worming your horse, check the weight first as many horses get underdosed for their true weight.

- One in 5 riding horses between 14.2 hh and 16 hh weighs over 600 kg.
- 3 out of 5 horses between 16.1 hh and 17.2 hh weighs over 600 kg.

IF you need help ask us – ring **Bell Equine** on **01622 813700**

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