

Newsletter

- ***Paperless Accounts, Accounts and Leave***
- ***Dentistry***
- ***Hoof issues***



Once again it is the end of the month and we are organizing our bookkeeping. One initiative we hope will help both our costs and the environment is going as much as possible to paperless invoices and accounts.

We have had a number of enquiries if we could stop sending paper and are pleased to have found a way to ensure people who only wish to have paperless invoices and accounts do not get the paper version. If you wish to go paperless, just send us an email with "paperless" in the subject line and we will alter your details on our computers to stop you receiving paper copies.

Chaylee and I are going to have roughly 2 weeks leave from the 1st March. One of my mentors over the years, John Walmsley, will be visiting with his wife Caroline. John is now largely retired but was one of the leading surgeons in the UK and a founding partner of Liphook Equine Hospital. He was one of the key influences in my surgical training in Melbourne. John is a keen bird watcher and we are hoping to take them to the far west to show him some of the Australian outback.

I will also be away for 4 days from the 4-7 February at meetings for the College in Brisbane. Therefore we will be doing surgery and our Gold Coast run on this Wednesday 3rd February.

This month Frank has written about Dentistry and I put together a short piece on hoof problems.

Tias

Equine Dentistry Today

Dentistry has changed a lot over the last 10-20 years. There are now recognised specialists in area of veterinary dentistry and the scientific knowledge on equine dental disease is growing by the day.

In our practice we see a range of dental problems from sharp enamel points to fractured molars and periodontal disease. However, the most common dental procedure we would perform is the rasping enamel points and creation of bit seats.

At Warwick Equine Vets, it is our preference to sedate horses for dental examination. We have found that under sedation and the use of a speculum (aka mouth gag) we are able to perform a more thorough examination of the horse's mouth. With the aid of a strong light, we can visualise any abnormalities before performing a palpation of the oral cavity with a gloved hand. We are able to identify potential lesions, such as sharp points in the mouth, which may lead to discomfort and problems with chewing or performance when worked.

Our advice is to have a good dental exam before starting a horse into training. Preventing these dental issues BEFORE they develop secondary habit such as evading the bit or head tossing, is much better than trying break the habit after it has formed. Usually with competition horses we would perform a routine rasping every 6 months and for those retired out to pasture, once every year.

Another problem that horses can get as

they age, is the loss of enamel from their teeth. These teeth can be commonly called 'soft teeth' and these horses can sometimes make a squeaking sound when they chew. When this occurs, the occlusal surface of the teeth can become very unbalanced and wave like. In severe cases, an opposing tooth can grow into the space of a worn or lost tooth and prevent effective chewing of fibre sources such as hay and grass. This may lead to quidding (dropping of feed from the mouth) and weight loss. These older horses often need regular dental care and special diets, especially in regards to fibre and soluble fibre intakes.

Occasionally, we have horses with significant dental disease which can affect the entire tooth. If these teeth are in the roof of the mouth (maxillary teeth), they may lead to infection of the sinuses. Often when these infections occur, there can be a strong smell from both mouth and/or the nose of the horse. A yellow/green thick nasal discharge may also be found coming out of one nostril. Treatment for these tooth problems is often complicated as the diseased tooth needs to be removed and if heavily infected, they will break apart easily. This often requires surgery or sometimes extraction performed standing under nerve blocks and sinus lavage can be successful.

As with many good animal husbandry procedures, prevention is much better than a cure. A regular dental check is important for horses health and performance. Further information on our dental equipment and procedures can be seen on our website www.warwickequinevets.com.au

Frank



Common hoof problems and a case of keratoma

As the old adage goes no hoof no horse. Therefore it is no surprise we spend a lot of time dealing with hoof problems.

Probably the most common severe lameness we see in horses in our day to day lives as vets are infections or abscesses in the hoof. These are more common in wet conditions, but can occur anytime.

Often these form by moisture getting into the hoof along a crack or split in the hoof capsule or between the hoof capsule and sole. These are very common and generally are relatively easily managed by allowing drainage either by paring away enough tissue or by poulticing.



This is an example of a toe abscess. A small amount of hoof and sole have been pared away to allow drainage. This would usually be followed up by poulticing for a few days and then using some means to try and prevent re-infection.

If the infection or abscess is untreated the pus will usually follow the path of least resistance and tract up the laminar region to the coronary band. If possible we prefer to have hoof abscesses drained near the sole because it is much easier to get pus to drain downwards with the assistance of gravity. Regardless of where the drainage site is once drainage is achieved there is usually great relief in the pain level for the horse. As well as providing drainage for any pus, sometimes we do use antibiotics if the abscess is severe. We usually reserve antibiotic use to cases where we have managed to establish drainage. Mostly antibiotics used alone will just suppress the abscess and it will come back as soon as the drug is discontinued. Often we also need to give some anti-inflammatories like phenylbutazone and a tetanus vaccination if it is not current.



This is an example of an abscess which has drained at the coronary band. This will give the horse relief but our preference would be to treat these before they break out in this location.

There are many other issues in the foot which can mimic foot abscesses. These include laminitis, infections or fractures of the pedal bone, and infections of other structures within the foot to name just a few.

One less common condition seen is keratoma. These are growths within the hoof which are sometimes due to recurring infection. Once they start to form

they tend to progress and in themselves often become repeatedly infected. The growth or "keratoma" slowly expands and because the hoof capsule is better able to withstand slow pressure the growth tends to eat away the pedal bone. These lytic lesions are readily seen on xray and is the most common way we diagnose them.



This is an xray of a horse with a keratoma which Tias operated during the past month. There is a needle used as a marker to allow him to determine where to cut the "window" in the hoof wall to allow access.



Intra-operative photo of elevating the keratoma out through the window cut in the front of the hoof to allow access.



The keratoma. In this case it was a discrete piece of fairly solid tissue.

Once the keratoma is removed, all abnormal tissue is scraped out and then a shoe to support the foot is used. In this case we chose to use a bar shoe with a hospital plate and clips either side of the window to give best stability and to allow easier aftercare.



The post operative view from the sole. Keratomas if completely resected as this one was tend to have a good outlook. The lytic lesion in the pedal bone is there for life. This can be confusing if seen by a subsequent vet on xray but rarely is of significance clinically.

Warwick Equine Veterinarians

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Our goal is to provide excellence in clinical service to all our equine patients.

A professional, compassionate and caring approach with good communication, and up to date services.

Excellence in Equine Veterinary Care

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