

WARWICK EQUINE VETERINARIANS

185 BRACKER ROAD

WARWICK.

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Newsletter

- **Caitlin starts**
- **Hoof wall resection**
- **Diarrhoea case**
- **Bone cyst in a WB**

A new year and its time to reflect on 2016 and plan for 2017. 2016 was a very good year for WEV, with strong growth, nearly all the building work on the new surgery and stables completed, first major surgery cases in Warwick operated, and of course we had Skye, Danielle and Dusty all join us. We owe a great deal to our loyal clients who have shown such faith in us and given us the opportunity to treat their horses. Although 2016 has been very busy it has been an extremely rewarding year.

2017 will no doubt be better. The big news is Caitlin will start with us from the 3rd January. Caitlin graduated a few weeks ago with honours and was the recipient of several prizes for excellence. Although this is great, what really has impressed us is her mature and capable attitude: she is going to make an exceptional veterinarian. As we start doing more extensive medical and surgical cases in Warwick we will soon need another experienced and trained hospital nurse and vet, so we will start the process of recruiting them. Appropriate people with the right experience and a similar attitude to practice and cases are hard to find and it may take some time. Ultimately we need more staff as currently all our people are working overly hard.

We had a great range of interesting cases this month. Seedy toe is something commonly seen and often treated by farriers. In some more severe cases co-operation between vets and farriers is



Here you can appreciate the extensive loss of hoof wall which we have removed using a motorised burr.

needed. Some cases require extensive resection as in this case seen last week.

Seedy toe is generally a non painful condition where an infection establishes under the hoof wall and progressively destroys the bond between the hoof capsule and underlying laminar tissue. The key is to remove all detached hoof wall and ensure air can get in. Once this occurs generally the hoof can grow down normally. In this case, because so much of the hoof capsule was lost, we needed to take care to provide adequate support for the hoof in the form of a full heart bar shoe.

Another great case this month was a few weeks old Highland Pony filly. This filly presented with severe diarrhoea and collapse. As it transpired this filly had been deprived of its first milk because its mother had let another older foal suckle it for the first day or so depriving the filly of its all important colostrum.

Foals, if they do not receive sufficient good quality colostrum, are exquisitely susceptible to infections. In some cases foals can succumb to infections which generally would only result in mild disease in non immune compromised foals.



After several days and nights of intensive treatment it was so good to see the foal out of the stable into a yard and feeding from the mother for itself again

This foal develop severe viral diarrhoea. The treatment was relatively straight forward but intensive. We needed to give the foal antibodies (in this case in the form of hyperimmune plasma transfusions) and fluid and nutritional support until the intestine could repair itself. There is no specific treatment for viral diar-

rhoea but we also had to provide some antibiotics as the foal was equally susceptible to bacterial infections until the immune system became functional again.

An interesting case this month was a mature Warmblood mare with a stifle cyst. This cyst had been detected by the referring vets and after much consideration we decided to try a relatively new procedure of placing a bone screw across the cyst in this case. The first accounts of this technique were published in 2015 so the profession as a whole does not have much experience with it.

The technique involves using both ultrasonographic and radiographic guidance to accurately place a bone screw across the cyst. This supports and compresses the bone around the cyst. We used arthroscopy as well to visualise the joint surface and determine if any further treatments were needed.



A bone screw placed across the cyst, which will hopefully shift the dynamics towards healing, something which can be hard to achieve in these cases.

We have had many other great cases over the last few weeks and feel privileged to be able to spend our days (and often nights) doing what we love that is practicing equine veterinary science to the highest standard practicable.

We wish you and your horses all the best for 2017 and look forward to being of service again.

Tias and all of the team at WEV.

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

OUR CONTACT DETAILS



If you look carefully you can see our resident Koala in the tree (and a galah's nest) overlooking our first roarer surgery case in our new facility as he waits for transport to take him back to Grafton.

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