

WARWICK EQUINE VETERINARIANS

185 BRACKER ROAD

WARWICK.

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Newsletter

- **Breeding**
- **Foalings**
- **Placental findings**
- **Fibrotic myopathy**

The warm weather and rain have been kind to us towards the end of October and the mares have been cycling quite well. We have also been working getting in foal increasing numbers of other breeds including Quarter Horses, Stock Horses, Warmbloods and even Friesians.



Danielle and her sister with their lovely Friesian filly foal

We are still involved with large numbers of periparturient problems in mares. This month we have seen a number of different mare problems including rupture of the uterus, bleeding into the broad ligament, prolapses and many other maladies mares can have associated with foaling.

Carefully examination, if possible, of the afterbirth of mares is ideal. It is very important that all of the afterbirth is expelled within a few hours of birth. Examination of the placenta is the easiest way to ensure all has come out.



Occasionally, when examining what has passed out a tan coloured mass is found. These are called Hippomaines. These are aggregations of cells and minerals which form in the fluids



around the foals and are considered normal. Less commonly we see cyst like structures passed. Sometimes these are mistaken for incompletely formed twins, but usually these are allantochorionic pouches. These are formed when the endometrial cups are rejected by the mares and are usually very small, but in some cases can be quite large as in this unusual case seen this month.



This allantochorionic pouch was expelled just before the foal, and measured 15 cm in diameter. The foal and mare seemed unaffected and are doing well

This is a miniature horse placenta. Both horns are present and there is only one hole in it through which the foal was delivered. This is normal.

This month we had an interesting case in a warmblood gelding. This very quiet and generally well mannered gelding had managed to get his rug off in his yard overnight 8 weeks ago. We suspect he must have caught his right hind leg in the straps and strained one of the muscles, the semitendinosus muscle. Initially we could palpate a muscle tear or defect and overtime it fibrosed to become a tight band.

This is a recognised cause of a gait abnormality where the horse is not lame in weight bearing but is unable to fully extend the limb and just before the hoof on the effected side comes to the ground there is a quick retraction. It gives the impression of a "goose stepping" type gait. These horses can be quite hard to manage but there is a surgery available which can help manage in the rehabilitation of this condition.



In this case we elected to do surgery at Lona and resect both insertions of the semitendinosus muscle and fortunately there has been a good response. We will need to manage him carefully in his rehabilitation with stretches and careful exercises to give him the best chance of resuming his dressage career.

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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