

WARWICK EQUINE VETERINARIANS

185 BRACKER ROAD

WARWICK.

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Newsletter

Staff changes

Anaesthesia training days at WEV

Needle In Haystack

Large tumour in colon

Trimming feet using x-rays

It is now the first of January and time to reflect on the year gone by and what lies ahead. WEV has had a good year overall. There always are some sad cases and outcomes but generally most of our work has been quite positive. With regards to staff, this month it is time to farewell Caitlin. Caitlin started with us straight out from Uni and, as I am sure most of our clients who have interacted with her will agree, has developed into a experienced and competent equine vet. She is leaving to join her fiancé and will take up a position with Esk Veterinary Practice. It will be sad to see her go.

In the next few days we will have Sara Rodes joining us. Sara graduated in December 2018 from the University of Queensland and spent some time with us as a student last year. Sara is going to divide here time with us at WEV as well as with our sister small animal practice CVC to consolidate her skills and knowledge broadly.



At WEV we are committed to providing the best care we can. Part of this is our commitment to training and ongoing improvement. With Sara starting soon and Paula our other new vet starting in February, we decided to have another anaesthesia training day. This consists of getting a specialist anaesthetist to visit the practice and give some tutorials on best practice anaesthesia and oversee some anaesthesia cases. We have found this very worthwhile and this allows us to be confident we are doing as well as we can in this important part of managing surgical cases. In the photo above Leah, an anaesthesia specialist from Melbourne, with Sara and Paula are monitoring a mare in the transfer area before moving her through into the surgery.

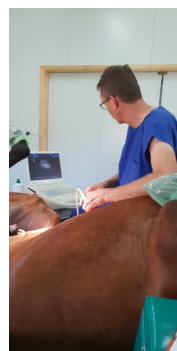
The first case to present this month is like finding the proverbial needle in a haystack. A thoroughbred gelding had developed a firm intermittently discharging swelling on the lower flank. This had started while he was at the horse breakers and was an ongoing minor but persistent problem during this time.

On his way home for a spell, he was dropped off to Lona for examination. The swelling had been

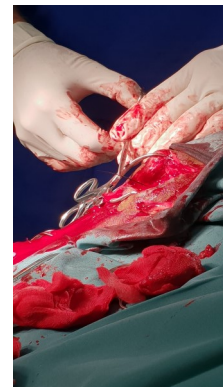
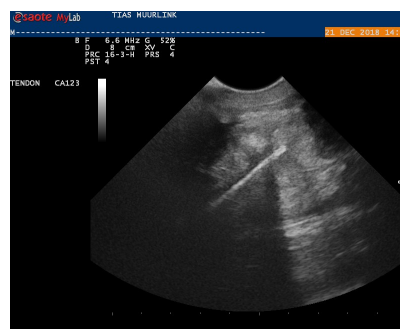


increasing and decreasing over time and also sometimes discharged a small amount of pus. He was in perfect health otherwise.

The way to diagnose these often is using ultrasound. In some cases it can be quite hard to find foreign bodies in this location and x-ray is often not useful in the abdomen as there is too much tissue to get through and also some materials like wood don't show up.

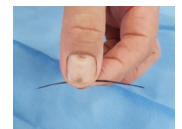


Here you can see us using ultrasound to locate the foreign object. We suspected from the history and presentation a small foreign body, however, we did not have any hard evidence there was something in there. As you can see in the copy of the scan below, a fairly straight, very thin, hard object is deep within the tissue. The object was measured to be about 2-3 cm deep at the shallowest and about 8 cm long.



Here you can see us removing the piece of wire during surgery. Foreign bodies like these can be very difficult to locate and remove without the benefit of anaesthesia and good imaging.

The owners decided the fine piece of wire most



likely came from a tyre feeder where the bead had broken through the rubber!

The next case was quite sad. A lovely middle aged highland pony mare had been having considerable trouble maintaining her body condition (quite rare for the breed!) and occasionally had very low grade colic.

After checking the basics like her blood, teeth and worming history we tried her on a course of antibiotics because there was some evidence on the bloods that infection was part of the problem. She responded really well initially but as soon as we withdrew the antibiotics, low grade pain and weight loss recurred. Eventually she came to Lona for further work up and a rectal exam and abdominal ultrasound were performed. Ultrasound in this case was not so useful, but on rectal it was easy for Tias to palpate a large, soccer ball sized mass in the region of the dorsal colon. We were not completely sure before surgery



whether the mass was a foreign body like rope in the gut or a tumour or even an abscess. Exploratory

surgery soon gave us the answer. Here you can see the opened right dorsal colon with part of the tumour of the lining just visible under the surgeon's right hand.

All of us at WEV wish all of you and your horses our best wishes for the 2019.

Tias and all the team at WEV

Warwick Equine Veterinarians

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Excellence in Equine Veterinary Care

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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.



A few months ago we discussed a pony with very overgrown feet and which, unsurprisingly, was having lameness problems. We got involved with one of the farriers we work with and used x-ray guidance to trim the foot as best we could. Without x-rays it is very difficult to know how much to take as well as exactly how to trim to achieve as good orientation of the pedal bone as possible. We do this often with a number of farriers both in the Warwick area as well as on our Gold Coast days. I thought we would show what can be achieved as in this case. The first x-ray was before the first trim, the second after the trim on day 1. The last x-ray is 3 months later and it is easy to see how well this pony has maintained the better foot conformation and he has become sound to ride. It nicely illustrates how with good basic management some seemingly hopeless cases can have great outcomes.

