WARWICK EQUINE VETERINARIANS 185 BRACKER ROAD WARWICK.

ISSUE 35

MARCH 2019



Newsletter

Solar system and staff training April- Dentistry month at WEV Oviduct flush Hock deviations

Although not widely known by our clients, WEV has never been connected to the electricity grid. Being out of town connection costs would have been high, but more importantly, early on we decided we would try and become one of the first clinics which have all electricity consumed produced on site by renewable means. Our initial 4kw solar system met our early needs but as we quickly grew and demand for power increased our back up diesel generators had to run for increasing lengths of time. Recently we installed an upgrade increasing our panels to 20kw and our battery bank to lithium batteries and we expect we will only now need to run the generators in exceptional circumstances.



Our commitment to staff training and development is ongoing. This month both Paula and Sara will head off to Grafton for a week to receive advanced dentistry training. At WEV we pride ourselves on providing excellent equine dental care and we try to ensure we are abreast of all the latest developments in this rapidly changing aspect of equine practice. Tias will also be off to participate in a course in Sydney, focusing on complex medical cases. Although Tias has long had a predominant interest in surgery, keeping abreast of medical developments is important in a small practice where we don't have the luxury to have specialists in all disciplines on site.

Dentistry Month In a new initiative for WEV, we are going to encourage oral health care by offering for the month of April routine dentistry at Lona, or on farm for larger groups, for horses at markedly reduced cost. For an all up fee which includes sedation, one of the team will perform a complete oral exam as well as routine floating. As in many

aspects of horse care preventative care is important. In this case it helps with feed utilisation as well as markedly reducing the incidence of other serious problems and in some case behavioural problems. Generally we recommend at least an annual examination and floating and more often if there are problems with eating or acceptance of the bit, or in very old or young horses. Call the office and they will explain the pricing and be able to book your horse in if you wish to take advantage of this offer.



Reproduction is another focus of our practice. Not only do we provide lots of "in house" reproductive services, both routine and advanced, we are often called upon to assist with some cases by our referring vets. With respect to reproduction cases this often comes in the form of providing help with various surgical procedures

aimed at improving fertility in mares and stallions. A rewarding case this month was a stock horse mare referring in because she had failed to provide embryos on multiple cycles and the referring vet had diagnosed blocked oviducts. The treatment of choice for this condition is to flush the oviducts laparoscopically.

When Tias was still working in Melbourne he was part of the team which performed the first successful laparoscopic flushing of oviducts in Australia. This has come to become a fairly routine procedure in some practices and when we fail to get pregnancies or flush embryos on

multiple cycles with no success and all the other causes of infertility are excluded it is often the next step.

We can usually do this as a standing procedure where a laparoscope (camera) is inserted into the abdomen and the ovary and oviducts are located and a special gel is applied which causes the oviducts to contract and expel built up debris.

On the left you can see how the procedure is done, usually standing in our specially designed stocks and the photo below shows an ovary and oviduct as visualised during a routine laparoscopic procedure. It demonstrates how well we can visualise the structures and allows accurate appli-

cation of the gel.



In the case we had last month everything went really

smoothly. The mare recovered from the procedure well, and on the 2 subsequent cycles produced an embryo each time which resulted in a pregnancy in the recipient mares.

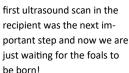
We all got to share in the excitement when the referring vet sent through a photo of the first embryo and a week or so later the first scan of the pregnancy. These cases take a lot of work by a big team and it certainly is satisfying when we

get good results like this one.



This was the first indication of success, the early embryo in a dish before implanting in to the recipient

mare. The



With the extreme dry weather impacting severely on a large part of the area in which we practice its been a tough month for many of our clients. We wish everyone the best and thank all our customers once again for entrusting us with the care of their valued horses.

The team at WEV

Warwick Equine Veterinarians

STAFF

Tias Muurlink BVSc (Hons) FANZCVS Registered Specialist in Equine Surgery Michael Duggan BVSc MRCVS Veterinarian
Paula Ellul BVSc (Hons) Veterinarian
Sara Rodes BVSc (Hons) Veterinarian
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Odette Kolenich Vet Nurse
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Tyler Aspinall Trainee Vet Nurse
Rita Gangemi Administration

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

Business office and postal address: 185 Bracker Road, Warwick, Q 4370

Equine facilities and surgery: 19811 New England Highway Rosenthal Heights, Q 4370 It is coming to the end of the season where we are kept busy trying to straighten legs of foals. This is because generally influencing the way the legs grow is most effective if done before 4-5 months for knees or hocks, and 2-3 months for fetlock deviations. Although we may get some improvement with techniques which modify the way the limb grows after these rough guides the amount of straightening we can achieve becomes less. Techniques we commonly use are controlling excessive hoof wear and sometimes extension on the feet, and either increasing or decreasing the rate of growth on one side of the limbs

with several different surgical techniques. This is a less common case we operated in the last month. We rarely have to operate hocks, but this is a case of a thoroughbred foal where there was a severe bend to the outside of the limb originating just above the hock. Other treatments had already been tried by the referring vets, and one limb had improved, however with not much growth time left to go we opted to slow growth down on the inside part of the leg with a strategically placed bone screw. This screw will need to come out as soon as the limb

is straight, otherwise the limb will start to bend the other way.



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