

Newsletter

Breeding

Foaling issues

Immune mediated vasculitis

As of the first of September, we have started our breeding season again. Initially this involves mostly Thoroughbred mares, but from about the end of September other breeds start to be added to our reproduction work load. Right now we are scanning and breeding as many TB mares as are cycling and so far we are progressing well with better than average numbers of mares cycling normally. This is especially true for mares that have been under lights. Non TB mares are less likely to be under lights, though some breeders still use this approach or use the Equilume or blue light masks which work well. Mares not subjected to photo period manipulation will usually start to cycle some weeks up to a couple of months later. If you are not sure where your mare is in her annual or oestrous cycle this can easily be determined by an ultrasound or reproductive examination.

At the other end of the reproduction cycle is foaling. This time of the year is nearly peak foaling season for us. Foaling is normally a quick and uncomplicated business in mares though we still see quite a number of problems with foalings each year. So far we have had a few cases of dystocia, or problems in delivering the foal.

One case was that of a deformed foal which a TB mare was trying to deliver. This was a very difficult case for us to manage. When we arrived there were two feet presented but we were unable to pull the foal further out. Unfortunately the foal was already dead, and it was apparent at least the forelimbs were severely contracted in the region of the fetlock joint.

As you can see in the photo below the feet are curled back under the cannons.



We were unable to move the neck or head into a normal presentation so were left with no option but to cut the neck off near the entrance to the

chest. Once this was done, we were able to pull the foal out quite easily after some additional lubrication. The head was then removed and it was apparent at this time why we were having so many problems. The foal had multiple defects including a wry nose, as seen in the photo below. This was all done with the mare under



we could have achieved in this case.

Another case was seen of twins. Mares are very seldom able to deliver live healthy twins. For this reason we spend a lot of time and effort trying to minimise the incidence of twinning.

general anaesthesia on the stud, which does make for challenges for the surgeons. It was a very unfortunate case but the mare has so far recovered well which probably was a much as

We usually do this by ensuring the mare is scanned a number of times early in the pregnancy, usually at about 14-17 days, and again at 30 or so days and finally in the mid 40 days. This gives us the best chance of detecting twins. In this case the mare aborted the foals some months before they were due despite the owner trying hard to maintain the pregnancy. Again a very unfortunate case but it does highlight the importance of detecting twinning in mares early when there is still something that can be done.



Once again thanks to all our clients for their support and we hope we can help you to avoid some of the disappointments as described above.

The WEV team.

Preparing for a safe and successful delivery of your foal.

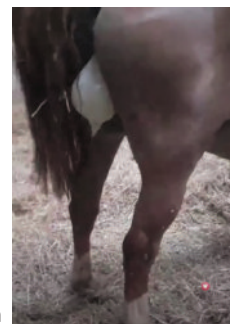
It is important to know what is normal and call early, as soon as you detect something is amiss. These are the 3 stages of labour in mares with some indication of normal times.

Stage 1: Duration is about 1-2 hours but may be longer. This includes the onset of contractions and dilation of the cervix.

Stage 2: Duration is about 30 minutes and is from the rupture of the membranes surrounding the foal or as commonly known "breaking of the waters" to delivery of the foal. Foal front legs then appear, usually followed by the nose. Foal membranes are usually white or yellow, if you see red membranes over the foal (red bag) or if the foal is not delivered within 30 minutes call your vet.



Stage 3: Usually lasts about 3 hours, and is the expulsion of the membranes or after-birth (placenta). The placenta should be an "F" shape when laid out on the ground. If the placenta is retained much beyond a few hours life threatening complications can develop quite quickly in the mare so again contact your vet promptly for advise or help.



Warwick Equine Veterinarians

STAFF

Tias Muurlink BVSc (Hons) FANZCVS Registered Specialist in Equine Surgery
Michael Duggan BVSc MRCVS Veterinarian
Andrew Hopgood BVSc MRCVS Veterinarian
Chaylee Joe Kong Vet Nurse Cert IV RVN
Danielle Assen Vet Nurse Cert IV
Monica Connolly Vet Nurse Cert IV
Odette Kolenich Vet Nurse
Tamasin Maher Admin
Dusty Turner 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

Email address: office@warwickequinevets.com.au

Website: warwickequinevets.com.au

Facebook: Warwick Equine Vets

Office (BH): 0400 977 564

Tias Mobile: 0438 791 804

This month we had an interesting case with a very sick gelding. The gelding was spelling at home after being broken in a few weeks earlier and not on any medications. The observant owners first noted depression and swelling over the cannon just below the knee in one limb. This rapidly progressed to swelling in plaques over much of the body, fever episodes, lameness, pain on flexion of the joints, and oozing from the skin in a few locations as well as very high heart and respiratory rates. This proved to be a case of immune mediated vasculitis, or some-



times called purpura haemorrhagica. It took us some time to feel confident in our diagnosis and he was extremely unwell for over a week, however, gradually with relatively simple medications of pain relief and antibiotics we managed to get improvement. The owners were very diligent in nursing this gelding, which is often the critical factor in how well these cases go. Keeping the horses eating and drinking and vital functions ticking over while the horses feel so unwell is very important. From a veterinary perspective the important thing in these cases is to be sure what we are dealing with and excluding other possibilities which could include viral diseases, toxicities, drug reactions and other systemic illnesses. Immune mediated vasculitis can have many causes but in this case we suspect it was likely due to the horse developing an allergic response to antigens from streptococcal organisms. Although at the time of writing this he is not completely recovered he certainly is much better than at his worst and now looks like a horse which might have a future again.

