

SPRING EDITION 2017

XLVets Equine - Better Together

Equine

MATTERS

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Inside this issue:

No Foot No Horse

Assessing your horse's feet

Gastric ulcers

Diagnosis and management





SPRING EDITION

XLVets Equine is a novel and exciting initiative conceived from within the veterinary profession. We are all independently owned, progressive veterinary practices located throughout the United Kingdom committed to working together for the benefit of our clients.

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FROM THE EDITOR

Welcome to the 'Spring 2017' issue of Equine Matters...

...produced by XLVets Equine practices.

Welcome to the Spring edition of Equine Matters. In this issue we have a focus on new beginnings with Breeding and new foals; returning your horse to work for the upcoming season; and advice for those considering the purchase of a new horse.

On a similar theme, I would like to extend best wishes to my co-editor Imogen Burrows who is now beginning maternity leave awaiting a new arrival of her own. She has done a fantastic job as editor in recent years but fear not, she assures me she will be returning later in the year.

In the meantime, sit back and enjoy this issue. Hopefully it will impart some useful tips and information as we approach an exciting new season!



Susan Donaldson

BVMS CertAVP(EM) MRCVS,
Clyde Veterinary Group
Editor of Equine Matters

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Veterinary Surgeon Richard Morris

XLVets Equine practice Fenwold Veterinary Group



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No Foot No Horse – The Importance of Foot Balance

Foot balance is the harmonious relationship between limb, foot and horseshoe.

The dynamic movement of the horse's limb when propelling the horse must be perfectly aligned in order to minimise the stresses and strains on the tendons and joints. If the foot is not balanced, it distorts the movement of the leg causing abnormal loading of the joints and tendons, predisposing to injury and lameness.

A well balanced foot will be symmetrical in size and shape, and land flat to the ground. During movement, there should be a straight line from toe to fetlock, with the joints appearing to be in a vertical straight line when viewed from the front or behind. To assess foot balance, the whole horse and all four limbs should be evaluated carefully; the

limbs should be symmetrical, with any asymmetry being deemed a conformational fault which may also influence pre-purchase examination.

Foot balance is assessed at rest on a firm, flat surface (static) and in motion (dynamic). Static foot balance is evaluated from side to side (lateromedial foot balance) and front to back (dorsopalmar foot balance).

For the assessment of dorsopalmar foot balance, the alignment of the hoof wall at the toe and heel should be checked to ensure they are parallel, and there should be a straight line from the toe up the dorsal hoof wall and along the pastern to the fetlock – 'the Hoof Pastern Axis' (figure 1).



Figure 1. The Hoof Pastern Axis

The bones of the foot should be aligned (figure 2) and in general the front hoof wall of the front feet should meet the ground at an angle of 45-50 degrees, and 50-55 degrees in the hindlimbs, although some breed variation is to be expected. A boxy upright foot will be prone to excessive forces of concussion as it hits the ground and propels the horse. This steep dorsal angle of the hoof wall distorts the Hoof Pastern Axis and is described as 'broken forward' (figure 3).



Figure 2. Hindlimbs should meet the ground at 50-55 degrees



Figure 3. The 'broken forward' foot

A long toe and low sloping hoof may put excessive strain on the tendons and ligaments, and navicular bone at the heel. This shallow hoof wall angle and distorted Hoof Pastern Axis is described as 'broken back' (figure 4).



Figure 4. The 'broken back' foot

For the assessment of lateromedial foot balance, the foot should be viewed from front and behind and from above with the foot elevated (figure 5). The coronary band should be horizontal with both heels an equal height from the ground. This can be assessed by eye, or the farrier may use a metal frame, a little like a carpenter's set square called a 'T Bar' to ensure everything is level.

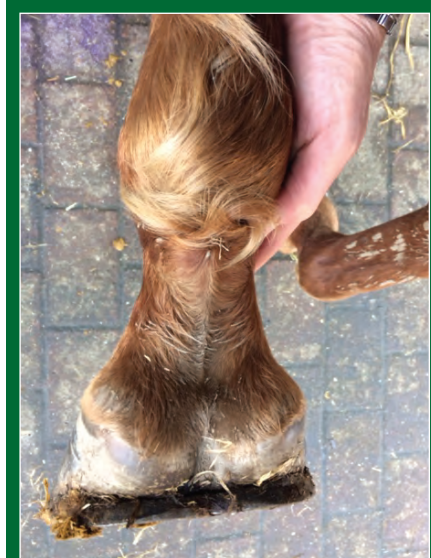


Figure 5. The coronary band should be horizontal

When the horse moves, the inside and outside of the foot should hit the ground simultaneously; if unbalanced, overloading of one side of the foot strains the ligaments and joints of the foot and in turn, alters the balance of the rest of the limb. The medio-lateral foot shape should be symmetrical; if one side of the hoof wall is steeper than the other, the foot will drift inwards or outwards. This imbalance will become self-perpetuating as the hoof wall will tend to grow in the

direction of the imbalance, altering the distribution of weight bearing forces passing through the hoof and limb, putting excessive stresses and strains on associated muscles, joints and bones.

When trimming for good dorsopalmar foot balance, the farrier should aim to have one-third of the foot in front of the widest part of the hoof and two-thirds behind to give the horse the right amount of caudal support and help keep the heels from collapsing or becoming underrun. The frog angle also gives an indication of how the pedal bone lies within the hoof and the farrier should trim the toe and heels to prevent it rotating caudally (backwards) or cranially (forwards) (figure 6).



Figure 6. The frog angle indicates how the pedal bone lies within the hoof

The Equine Lameness Prevention Organisation (ELPO) has developed a set of guidelines for foot trimming to aid in correcting hoof imbalance, and provides advice and support on identifying and dealing with distorted feet and trimming them to provide a balanced foot.

Limb balance is essential for the good athletic function of the horse, and those with conformation problems will require careful attention to their foot balance throughout their lives to ensure optimum comfort and performance.





Veterinary Surgeon Nick Graham

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Avoiding Pitfalls in Purchase

Finding the right horse can certainly be challenging. While some stories of nefarious sellers are exaggerations it certainly is a case of buyer beware.

Before involving a vet

- Watch the horse being ridden. Ride the horse yourself including in conditions you are going to experience; it seems obvious but if you are intending to use the horse for jumping, make sure you see it jump and jump it yourself. Similarly, if you intend to do a lot of hacking, ride out and see how they cope with traffic. It can be hard to ensure you 'get on' from one viewing so multiple visits are strongly recommended.
- Take a knowledgeable friend e.g. yard manager/instructor when viewing the horse
- Discuss a loan period with the seller but bear in mind that you or your child may get attached to the horse and if vetting goes on to show significant issues, returns can be difficult
- Dealer or private seller? Internet searches may unmask some dishonest dealers who claim to be private sellers. Buying from a reputable dealer does give more protection and can include a 'cooling-off' period

Involving the vet - the Pre-Purchase Examination (PPE) or "vetting"

- Is this necessary even for a child's first pony? Checking for heart issues and clear vision is still essential. It is highly recommended to have a PPE performed in horses intended for an athletic career; cheap horses are not cheap to treat if things go wrong.
- Vendor's vet vs. independent vet? If the PPE is performed by the vendor's vet, they are required to disclose any medical history of the horse which is known to them. Rest assured, during this type of examination, the vet is working entirely on behalf of the purchaser. That said, some vets may choose not to vet horses belonging to their clients on the grounds of a potential conflict of interests.
- Part or full vetting? A five stage PPE comprises the following:
 - Stage one - a complete clinical examination of the horse at rest, including the eyes and heart;
 - Stage two - the horse is led in hand at walk and trot in a straight line on a hard surface to look for lameness and in most cases flexion tests are performed. The horse is also either lunged or trotted in hand in a circle on both hard and soft surfaces.
 - Stage three - this is the strenuous exercise phase. This phase will be variable depending on the fitness of the horse

being examined. This can be performed under saddle or on the lunge with sufficient exercise being undertaken to elevate the heart rate and potentially reveal any abnormal upper respiratory noises or wind problems;

- Stage four - rest and observation;
- Stage five - this stage is the essentially the same as stage two.

A two stage (or limited) PPE comprises the first two stages only; certain conditions may not be detected and you will generally be asked to sign a disclaimer confirming that you understand the difference between the two. A five stage PPE is highly recommended and often required to insure a higher-value horse.

- Although not part of the vetting, suitable signed warranties (figure 1) are highly recommended.

Horse Purchase Warranty (UK)

Any legal official faces to prevent it competing under any discipline rules?

Part 1. Legal Owner

Has it been unable to work through illness or injury during the last 12 months?

Has it ever suffered any recurring lameness?

Name: _____ Address: _____

Part 2. Seller

Has it ever suffered any recurring lameness? e.g. Allergic respiratory distress? Colic? Laminitis? Set Fast? Sarcoid? Grease? Hoof? Headshaking? Others, including any food, drug, vaccine, allergic or substance?

Name: _____ Address: _____

Part 3. Examination

Name and address of previous owner: _____ Any vices or behavioural abnormalities e.g. Wincing, weaving, cribbing, box walking, kick the walls, tail rub, 'blink' at stall or rug?

How long has the horse been owned by current owner? _____ If none, has the horse been? _____ Could this be its final sale?

Reason for sale? _____ Does she cycle regularly and/or is she difficult when in season?

Past use/work of horse: _____ Any medication during the last 4 weeks? If so, why? _____

Is it fit enough to be strongly exercised? _____ In the horse on any supplements? _____

When was it last shod and is it shod at present? _____ If none, has the horse been? _____ Vaccination status and worming programme

Has it any BE, HD points/BS warnings, etc? _____ On the ground, is the horse easy to: groom, clip, prepare? tack-up, shoe? lead in hand? load and transport- here and trailer? catch in field and stable? Is it aggressive to: people? other animals? property?

Is it suited now and for what? _____

Has it ever been reared covered? _____ When ridden has it been known to: bolt? secede? back? rear? act? any? _____

Has a loss of use claim been paid out? _____

Part 4. Horse Name

Registered name No.: (if any) _____ Biting used? _____ Is it traffic able on-hand, driven or ridden under? _____

Previous brand: _____ Microchip: _____ Description: _____

Prospective purchaser's intention of use: _____ I hereby confirm that the information I have provided above is correct to the best of my knowledge

Signature of seller/owner: _____ Date: _____

Any reason why this horse is possibly not suitable for that purpose? _____

Figure 1.

- Bear in mind when insuring your new horse that most policies have a 14 day waiting period where coverage is for accidents only. Insurance companies generally ask whether the horse has had a PPE undertaken and will then request a copy of the report of the examination. Issues noted on this report may produce extensive exclusions, meaning that it is always worthwhile obtaining appropriate cover before purchase. For cheaper horses, buying without a vetting avoids exclusions but risks missing significant problems.

Jenna Elliott BVetMed MRCVS,
Rosevean Veterinary Practice

Advice for the first time foaling mare

The birth of your first foal is undoubtedly an exciting experience for any horse owner. However as your mare's belly is getting larger, this excitement can also be mixed with anxiety about what to expect and fear that something could go wrong.

Being well prepared will hopefully make it an unforgettable experience for all the right reasons, so here we provide some top tips you can employ to help things go as smoothly as possible;

Are you ready?

In the weeks leading up to foaling, ensure the following have been done:

- Vaccinations** – routine vaccinations for influenza and tetanus should be up to date and boosted 4-6 weeks prior to foaling.
- Worming** - routine worming regimes should be maintained throughout pregnancy. A final dose should be given 2-4 weeks prior to foaling. Not all products are suitable for pregnant mares so please check with your vet if you are unsure.
- Caslick removal** - if your mare has had her vulva stitched it is essential that they are removed by your vet 3 weeks prior to foaling.
- Nutrition** - mares should be fed high quality roughage along with stud mix and additional stud balancer if required. Mares should be in good condition but not overly fat so some will require more additional nutrition in the form of stud mix than others.
- Foaling area** - ensure your mare is comfortable and relaxed in the area she is to foal in; whether that be a deeply bedded, large foaling box or a paddock that is free of obstacles with secure fencing.
- Foaling alarms/cameras** - if using either of these, ensure they are installed and working well in advance.

When things are becoming imminent

During the last month of pregnancy the udder usually enlarges. Three weeks prior to foaling the pelvic muscles start to relax and in the last 24-48 hours the mare's vulva may swell and relax too. 'Waxing up' (figure 1) where wax-like beads appear at the end of each teat can occur anytime between 12 hours and 2 weeks prior to foaling. In some cases, usually in mares that have not foaled before, this may fail to occur at all.

The Big Push – three stages of foaling:

Stage one: Positioning of the foal

- uterus starts to contract
- mare becomes restless, sweaty and may have signs of mild colic
- foaling should occur in the next few hours

Stage two: Delivery of the foal

- waters break and abdominal contractions seen
- the foal should be in a forward diving position and can be seen in its sac at the vulval lips.
- the foal should be delivered in 15-20 minutes.

If labour progression is slow or delivery lasts longer you should call your vet to assess the mare IMMEDIATELY.

Stage three: Expulsion of the placenta

- occurs within a few hours of foaling, (if this has not happened within 4 hours, call your vet as soon as possible)

Foaling kit list (figure 2):

- Mobile phone with your vet's emergency numbers
- Pen and paper to note timings or instructions
- Fully charged torch
- Clean towels
- Clean buckets and warm water
- Tail bandage
- Scissors
- Thermometer
- Disposable rubber gloves
- String to tie off umbilical cord if necessary
- Antiseptic solution (chlorhexidine recommended), with cup for dipping the umbilical stump
- Large plastic bag to store placenta for veterinary inspection

Veterinary Surgeon Jenna Elliott

XLVets Equine practice Rosevean Vet Practice

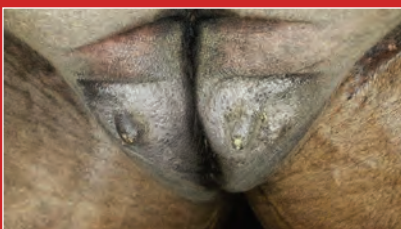


Figure 1. Waxing up



Figure 2. A foaling kit



Courtesy of Rachael Bromage Photography

Good luck.



Veterinary Surgeon	Katie Hayton
XLVets Equine practice	Capontree Vets



Katie Hayton BVM&S MRCVS,
Capontree Vets

Feeding For Fitness

Feeding is key to ensuring a happy and healthy horse. It is important that we tailor the diet to the horse's specific requirements and circumstances. Here we will take a look at some of the most common scenarios;

The Rules of Feeding

- Feed little and often. Horses are grazers and the equine gut is designed to receive an almost constant supply of roughage
- The diet should be based on roughage e.g. hay, grass or haylage
- Feed according to size, condition and workload
- Monitor body condition regularly. This can include condition and fat scoring, and the use of a weigh tape or weigh bridge
- Make dietary changes slowly over the course of a few days. Horses are hind gut fermenters and the bacteria in the large intestine need time to adapt to dietary changes
- Keep feeding times the same each day; horses thrive on routine
- Keep feed and all feeding utensils and buckets clean
- Avoid fast work immediately after feeding hard feed or concentrates
- Feed roughage such as hay or haylage prior to fast exercise to help avoid acid

splash on an empty stomach

- Provide a constant supply of clean fresh drinking water

The Good Doer

This is typically a native pony which is often body condition score (BCS) 3.5 or more (based on a scoring where 0 = emaciated and 5 = obese). Early Spring is the ideal time to encourage weight loss. No increase in calories, in response to increased work load, is required for the good doer. The diet should be based primarily on long fibre. A balancer is a good idea to ensure all the key vitamins and minerals are included in the diet especially if you live in an area of the country which is low in certain trace elements.

Concentrates are not normally required and are best avoided as they can lead to weight gain. To encourage the good doer to eat his balancer you could feed small amounts of chaff. It is worth bearing in mind that as spring progresses the nutritive value of the grass improves, especially the sugar content. If your good doer is prone to laminitis, a smaller barer paddock or grazing muzzle is worth considering.





The Sports Horse

Competition horses are often in increasing levels of work whilst being required to maintain condition and fitness over a long competition season. As you start to increase

their workload the plane of nutrition also needs to increase to provide enough energy and nutrients to support muscle and improving fitness. However, it is better to increase workload prior to increasing the plane of nutrition. This will avoid undesired weight gain or excitable behaviour. Again long fibre should form the bulk of the diet as this is essential for a healthy digestive tract. Increased energy requirements can be met with the addition of concentrate feeds. It may be simplest to feed compound feeds which are specifically blended for a certain level of work. This ensures that undigested starches do not enter the hindgut where they can cause colic or laminitis, and that your money is not wasted as any starches entering the hindgut are not utilised fully. Feeds containing oils are great at providing additional calories without high levels of starch; oils also provide slow release energy over a number of hours so can help maintain energy during longer periods of work.

The Poor Doer

If in moderate or heavy work, the correct diet is even more important to maintain weight or encourage weight gain. As well as supplying enough calories, providing the appropriate levels of vitamins and minerals for the workload is also important. If in light work, a higher energy diet is still required to encourage weight gain, however higher

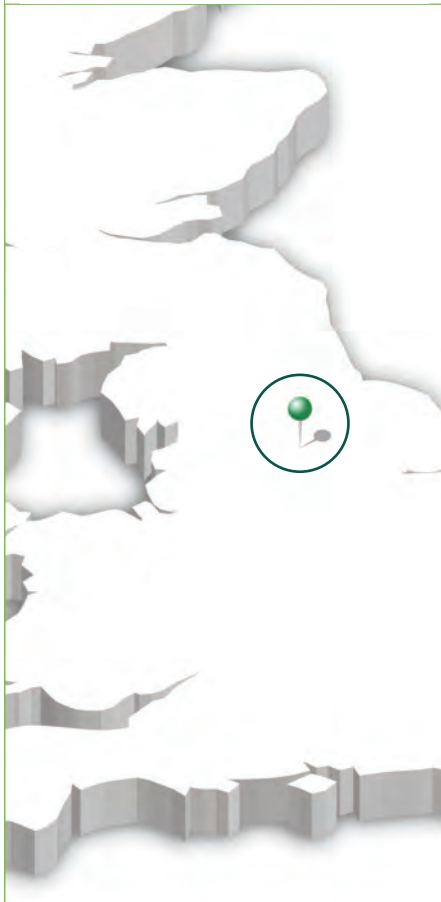
levels of vitamins and minerals are not required. Fibre based feeds which provide slow release energy are ideal in this situation. High fibre, highly digestible feeds such as sugar beet and alfalfa are good options. A prebiotic can enhance the digestive tract to get the most out of the fibre being fed.

The Fizzy Horse

Firstly ensure that the fizzy horse is not fractious for any other reason, such as poorly fitting tack which may be causing discomfort, or an underlying ailment, for example gastric ulcers (see page 9). The fizzy horse often struggles to maintain condition due to burning calories via displaying unwanted behaviours, and cannot usually cope with an increased workload. The right feed for the right workload is key, feeding a high energy feed to a horse only being hacked a couple of times of week will lead to excess energy which can lead to fizzy behaviour. A lower energy feed is often the answer which can be topped up with a balancer to ensure the correct levels of vitamins, minerals and protein. Prebiotics have been found to help the temperament of some fizzy horses and can be added to the feed.

In conclusion, regardless of the type of horse, success lies in matching the diet with the level of work and fitness required.





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Bishopton Veterinary Group

What is Equine Gastric Ulcer Syndrome (EGUS)?

Equine Gastric Ulcer Syndrome (EGUS) is the term used to describe the group of diseases resulting in ulcers in the lower oesophagus, stomach and upper duodenum in horses.

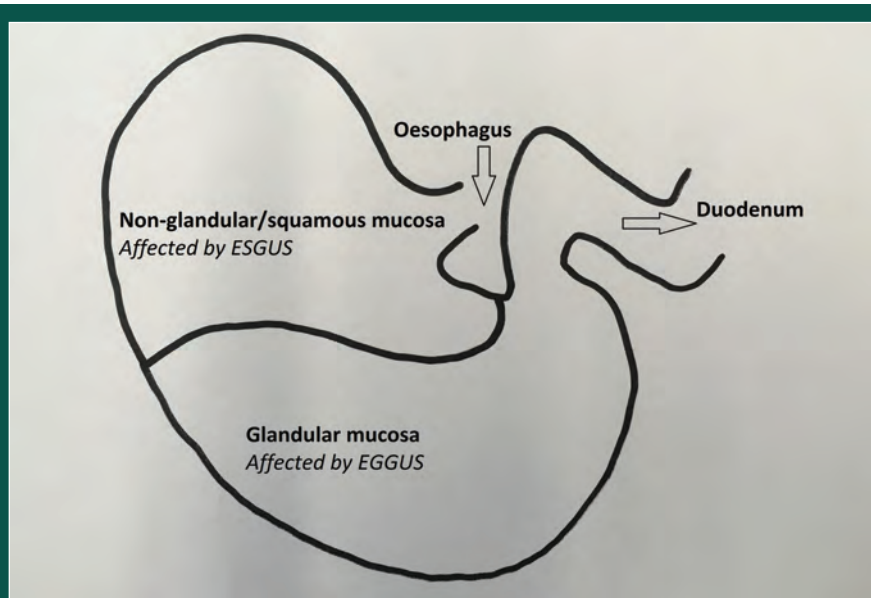


Figure 1. Diagram showing regions of the equine stomach and location of ulcer types

Symptoms vary widely with some horses showing some quite obvious signs and others appearing quite normal. Signs of EGUS can include some or all of the following:

- Weight loss
- Hair coat changes
- Poor performance
- Behavioural changes
- Girthing pain
- Recurrent colic
- Poor appetite

The stomach comprises two main areas (figure 1) and in mature horses, gastric ulcers are categorised into two disease types depending on the location of the ulceration:

- Equine Squamous Gastric Ulcer Syndrome (ESGUS) affecting the upper, non-glandular part of the stomach (figure 2) where the lining is unprotected and vulnerable to acid attack.

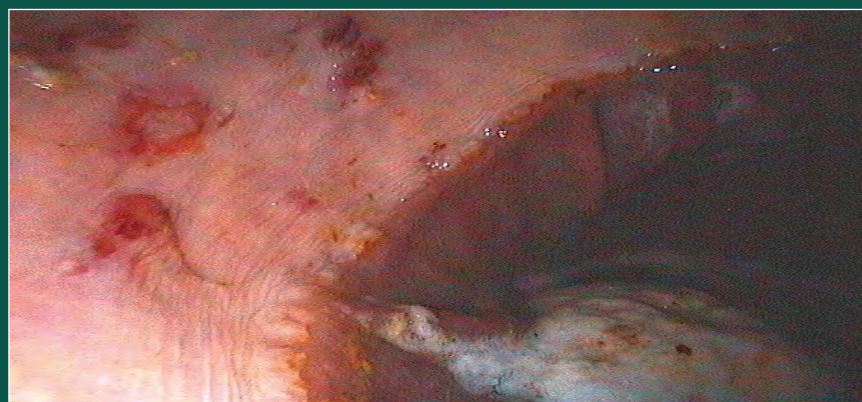


Figure 2. Gastroscopy image from horse affected by ESGUS

- Equine Glandular Gastric Ulcer Syndrome (EGGUS) affecting the lower, glandular part of the stomach (including the pyloric antrum or 'exit' from the stomach) (figure 3).

ESGUS and EGGUS should be treated as different problems, even when both are seen in the same horse, as the risk factors and treatments are different.

Does my horse need gastroscopy or could I just give him some medication?

Whilst 'typical' symptoms may lead you to suspect EGUS in your horse, it is important this is confirmed by gastroscopy (figure 4) to establish whether your horse has ESGUS, EGGUS or both. Also, 'trial' treatment with medication is costly and in some horses affected by EGGUS symptoms will not resolve even after a few weeks of medication. It is also common for a horse showing symptoms typical of EGUS to have a different, or additional issue, such as lameness or back pain.

Gastroscopy is useful to determine and measure response to treatment and, should symptoms return in the future, to confirm ulcer type remains the same.

My horse has EGUS, what should I do?

Medication is usually necessary following diagnosis and your vet will prescribe drugs appropriate for your horse. It is important to follow any directions as to how these should be administered to ensure they are effective. For example, you may be asked to give medication a set time before feeding.

Nutritional and management changes are important to aid resolution of ulcers and reduce risk of future recurrence.

Unfortunately ulcers will return quickly if changes cannot be implemented, resulting in reliance on expensive medication. Management changes alone, however, may not lead to resolution of EGUS.

As a further prevention, your vet may also recommend a low dose of medication is given at times of stress, such as transportation.

Management for ESGUS

Risk of ESGUS increases with intensity of exercise, with ulcers often improving during rest periods. Feeding a small, roughage-based feed such as alfalfa chaff approximately thirty minutes prior to exercise is recommended.

Horses are designed to be trickle feeders, so free access to roughage, preferably from multiple different sources, has been shown to be helpful. Using straw as the only roughage source should be avoided (except in donkeys). Alfalfa may have some beneficial effects.

Increased time at pasture should have a positive impact, though other 'stressors' may affect this and any supplementary feed given during turnout should also be considered. Water should be made available at all times.

Reducing concentrate feed, and the proportion of soluble carbohydrates within this feed, is beneficial ensuring small, more frequent meals. Adding roughage, e.g. chaff, to feeds will help by encouraging chewing, increasing saliva production which in turn buffers stomach acid. Adding corn oil to feed has a beneficial effect on acid production as well as being a useful source of 'non-carbohydrate' calories. Commercial feeds are also now available for horses with EGUS.

Feed supplements containing antacids are widely available. Their short duration of action does limit their usefulness but, given regularly, they may be of benefit to horses in regular work. These supplements are often available in combination with mucosal protectants such as pectin-lecithin complex and may be useful in preventing ulcers in some circumstances. Sugar beet is a good

source of pectins and is therefore useful to add to the diet. Further feed supplements are becoming available with some early positive reports, however additional controlled clinical studies of these products are required to confirm their efficacy. The use of concentrated electrolyte pastes or solutions is not recommended in horses prone to EGUS.

Management for EGGUS

The cause of EGGUS is poorly understood and further research is required to improve our knowledge of this condition. In contrast to ESGUS, exercise does not appear to be a key factor. Whilst bacteria have been detected in horses with ESGUS and EGGUS they are not currently thought to be a significant cause, though research is ongoing.

Use of non-steroidal anti-inflammatory drugs, such as bute, can cause issues at high doses. However few problems are seen at commonly used doses, particularly when used for short periods, and these drugs are unlikely to be a significant cause of EGGUS.

Diet may have an impact on EGGUS and feeding recommendations for ESGUS should also be appropriate for these horses. The use of feed supplements may also be beneficial but again further research is required. Reducing social and behavioural stress is also likely to be helpful.

Summary

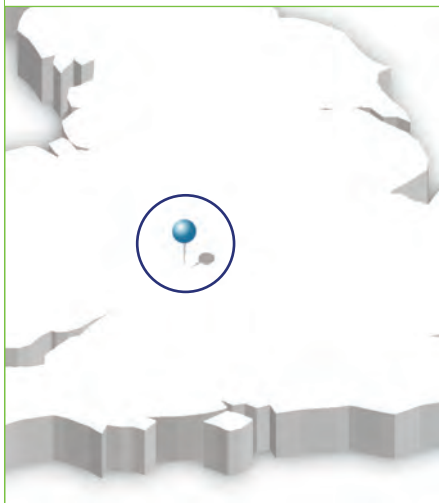
- Gastroscopy is essential for diagnosis and monitoring of EGUS
- There are 2 different types of EGUS
 - ESGUS
 - EGGUS
- Treatment and management of these conditions are different
- Both medication and management changes are necessary to reduce recurrence of EGUS



Figure 3. Gastroscopy image from horse affected by EGGUS



Figure 4. Gastroscopy being performed at the practice



Veterinary Surgeon **Gavinder Panesar**
 XLVets Equine practice **608 Farm and Equine**



Gavinder Panesar BVSc MRCVS,
 608 Farm and Equine

A not so quiet Christmas Eve!

A vet's favourite time of year – sorting out the Christmas Rota! I landed Christmas Eve, a Saturday, however with people doing last minute Christmas shopping, surely this would be a quiet day?

Christmas Eve arrived and, sure enough, the opposite soon proved to be the case. Five minutes into being on call and the phone rang: 'Hi Gav, I've got a yearling with a bit of a wound. Can you come and stitch it?' Reading between the lines, the undertone of the conversation suggested this 'bit of a wound' might actually be a bit more of a gaping hole!

On my arrival I was presented with a yearling in a barn that had never really been caught, or even left the barn. After a little persuasion, the youngster was caught and sedated to reveal a sizeable wound on the outside of its right fore cannon (**figure 1**). Amazingly this yearling was sound and fortunately had managed to miss every vital structure in its leg!

My initial dilemma was that the leg was currently so swollen that the wound may not be viable to be sutured closed. Being a bit of a perfectionist, I wanted to do everything I could to reduce both the amount of scarring and the healing time if at all possible. After some deliberation I decided to stitch it, but needed to reduce the tension in the skin surrounding the wound so that it could heal.

My solution to this problem was tension-relieving sutures (**figure 2**). Two hours later it was then bandaged securely. This was particularly important since the yearling had a bit of a reputation of being mischievous and there was a concern that he might manage to remove the bandage and expose the wound.

A few days later the swelling had subsided and a 'normal' looking leg was left. Unfortunately since the swelling had reduced, the stitches were no longer doing their job and there was no tension on the wound (**figure 3**). I re-stitched the wound in the hope that it would hold together (**figure 4**).

Unfortunately, a few days later, the sutures had not held together as I would have liked and the wound had broken down (**figure 5**). I had no choice but to remove the stitches and to reassess my plan to get this yearling back on track (**figure 6**). I decided to allow the wound to heal by 'secondary intention' with the assistance of Manuka honey treatment. Over the years I have found Manuka honey is a very good product for helping wounds to heal when they cannot be stitched. The high sugar content prevents bacteria growing and allows time for the wound to heal while reducing the chance of infection. This worked, and even after the first Manuka honey bandage, things were looking up (**figure 7**).

After two or three further Manuka honey bandage changes, things were going from strength to strength and I finally decided to leave the wound unbandaged (**figure 8**).

Six weeks later the wound is nearly completely healed and the yearling is none the wiser, now running around in a field!

A nice (Christmas) Happy Ending!



Figure 1.



Figure 2.



Figure 3.



Figure 4.

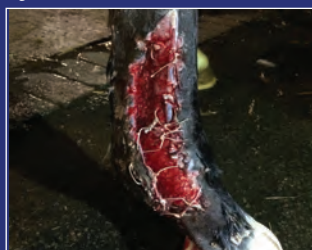


Figure 5.



Figure 6.



Figure 7.

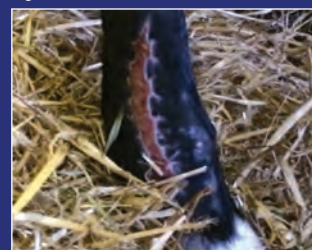


Figure 8.



Equine

XLVets Equine and your veterinary practice - what does it mean?

Within the veterinary profession there are traditional privately owned practices and others that are part of a larger corporate group. XLVets Equine practices fall into the first category and as we are owned and run by vets, any decisions that are made come with a sound ethical and clinical backing from the vets on the ground that are treating your horses.

XLVets Equine is the equine specialist division of XLVets, which founded in 2005, is a unique group of veterinary practices which span the length and breadth of the country, from Penzance to Orkney. Our member practices range from large equine referral hospitals to mixed veterinary practices with an equine component, incorporating over 100 equine vets. Our aim is to work collaboratively and cooperatively to share resources, learning and clinical skills to deliver a high level of customer care and equine welfare.

Whilst, like any business there is a need to generate profit, the drive for this is to

reinvest in the facilities, equipment and staff who are there to give your equine friends the very best. A quality veterinary practice will always be progressive in exploring new ways to deliver excellent care to you as horse owners.

As a horse owner this gives reassurance that if your horse, pony or donkey is treated by a practice carrying the XLVets Equine brand, you will have the personal approach that you have come to expect from your local independent veterinary practice, and the backing of one of the most respected groups of vets in the country - the only collaborative group of its kind.



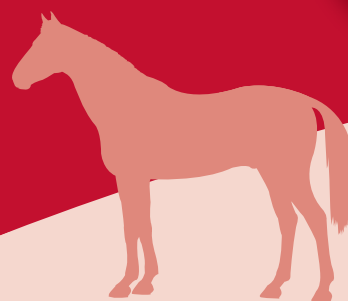
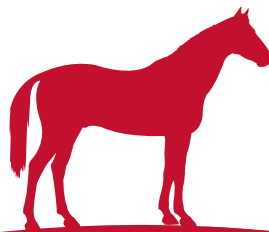
XLVets Equine practices work together to share knowledge and skills, to ensure together we are equipped to keep your horses well and healthy. XLVets Equine vets very much focus on helping you keep your horses fit, not just treating them when they are ill.

There are many ways you can get involved with XLVets Equine including our healthcare campaigns such as 'Keep one step ahead' and our practical vet-led EquineSkills training workshops - visit www.xlequine.co.uk for more information.

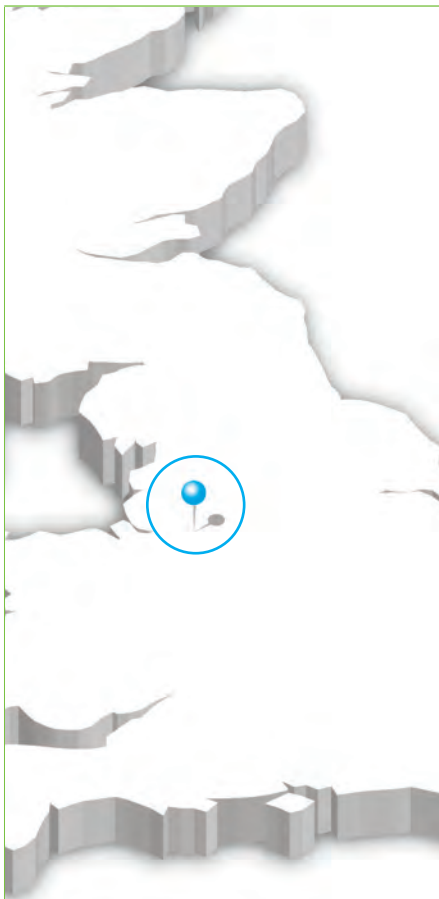
XLVets Equine provides a quality assurance mark for excellent equine care. We are proud to be associated with XLVets Equine and hope that you will feel proud of your practice too.

“ I am very grateful for the collaborative yet skilled approach you take, and the sensitive way in which you deal with the difficult dilemmas we all face as horse owners. ”

C Hopkins Kingston



www.xlequine.co.uk



Veterinary Surgeon Roger Dixon

XLVets Equine practice Ashbrook Equine Hospital



Roger Dixon BVM&S CertAVP(ESM) MRCVS,
Ashbrook Equine Hospital

Breeding: AI or Natural Cover

Artificial insemination (AI)

Artificial insemination (AI) is a well-established assisted-breeding technique. It involves a veterinary surgeon or qualified AI technician depositing previously collected, frozen, chilled or fresh semen into the uterus of the mare at the optimum time to allow fertilisation of her egg. It is widely used in show-jumpers, dressage, eventing and pleasure horses. However, AI is less commonly used in thoroughbreds because, by convention, the offspring are ineligible to be registered for racing. Natural cover therefore predominates in the thoroughbred industry.

Natural cover

There are several different management systems that have been adopted for 'natural' cover. In the least intensive and most inexpensive system, the stallion 'runs' with a number of mares in the field and covers them as they come into season. This mirrors the situation in the wild and favours those mares of superior fertility. It may take several oestrus cycles to achieve conception; indeed, the average 'per-cycle' conception rate in this situation is surprisingly low at around 40%. A variation on this system involves visually monitoring the mares and 'hand-covering' them when they are receptive to the stallion; this at least ensures that mating occurs.

The intensively managed thoroughbred studs are at the other end of the spectrum. These

stallions may be in very high demand with just one opportunity per oestrus for mating; close veterinary management of the mare is therefore required to ensure she is presented to the stallion at the optimum time to achieve conception. Although veterinary costs will be higher, a well-managed thoroughbred stud can expect to achieve per-cycle conception rates of up to 70%.

Selecting natural cover or AI?

A mare owner considering breeding a foal, may have to decide whether to proceed with natural cover or AI.

The option of AI will depend on several factors. These may include:

- The availability of the stallion:
 - Many sports horse stallions will only be available via AI due to competition commitments or concerns about the stallion suffering injury during covering.
- The location of the stallion:
 - A mare may go to a stud close to home and the semen can be brought in from elsewhere in the UK or abroad. This removes the need to subject the mare to long-distance travel.
- The age and breeding history of the mare:
 - AI is particularly suitable for sub-fertile mares e.g. older mares or mares with poor vulval conformation who are prone to uterine infection (endometritis).



Advantages of artificial insemination

- Mares may be bred to a stallion many miles away, or even abroad, without the need to transport them vast distances. This may also be a consideration if there is a foal at foot (figure 1).



Figure 1. Mares with a foal at foot may be unable to travel long distances for breeding

- AI allows quality control of the semen. Semen quality can vary significantly between ejaculates from the same horse, even from a very fertile stallion. The ejaculate will be examined prior to shipping/insemination and if it is noted to be substandard, the collection may be repeated.
- By using frozen semen (figure 2), mares may be bred to stallions which are currently competing.



Figure 2. Using AI is safer for the mare, stallion and handlers

- Mares may be bred with frozen semen from a stallion who has since died or been castrated.
- It is considerably safer for the mare, stallion and the handlers.

Considerations of artificial insemination:

- A number of ultrasound scans may be required to ensure the mare is inseminated at the optimum time, thus increasing the veterinary costs.
- Shipment costs of semen, particularly if importing from abroad.

- There may be a temptation to 'cut corners' in screening for venereal transmissible disease, e.g. contagious equine metritis (CEM) and equine viral arteritis (EVA). Contrary to popular belief, the causal agents of these diseases survive in transported semen and may be inadvertently transmitted from stallions to mares. Reputable stallion owners and AI centres will adhere to the HBLB Code of Practice which advises that stallions and mares are tested to ensure they are free of venereal disease before breeding commences.
- When using fresh or chilled semen, good communication between the mare owner, the stallion owner and the vet is essential. Regularly updating the stallion owner of the mare's progress can aid planning to ensure a collection at the optimum time. It can be intensely frustrating and expensive if the mare is ready for insemination but no semen is available due to a communication breakdown.
- If ordering semen from abroad, many mare owners choose to order semen through an experienced agent. Importing semen can be logistically difficult; communicating with the stud, tracking couriers and ensuring the semen is accompanied by original Health Papers (a legal requirement) can be stressful! An agent will deal with these challenges and ensure that the process runs smoothly. The veterinary surgeon can then order semen directly through the agent at the appropriate time.

Summary

Both natural cover and AI can produce excellent conception rates in a well-managed stud with fertile mares and stallions. However, the choice for many mare owners is governed by how their preferred stallion is available for breeding and his geographical location.





Veterinary Surgeon **Alistair Todd**

XLVets Equine practice **Kernow Farm and Equine**



Alistair Todd BVSc MRCVS
Kemow Farm and Equine

Back in the Saddle

Returning your horse to work after a period of rest can be a stressful task. In this article, I hope to provide a few helpful tips to make that experience a little easier for both you and your horse.

Periods of 'prescribed' rest can be a good opportunity for routine checks, such as making sure your horse's vaccinations are up to date and that he has had a dental examination - including any required treatment (**figure 1**).



Figure 1. A dental examination

Before commencing any exercise, it is important to consider that he hasn't gained too much weight over the rest period and that his feet are in good shape, thus avoiding any further injuries. Regardless of what type of injury your horse sustained, he will most certainly have lost fitness and muscle tone. The musculoskeletal system should not be placed under any undue stress at this time and so exercise following a rest period should be introduced gradually and controlled as far as possible.

Every injury will require a different 'return to work' regime, making it essential to get specific advice from your veterinary surgeon. Regular check-ups from the vet whilst increasing your horse's workload should ensure everything stays on track and any potential problems can be prevented.

It is also well worth considering including others in the rehabilitation programme, such as a qualified Association of Chartered Physiotherapists in Animal Therapy (ACPAT) physiotherapist, chiropractor, nutritionist, trainer and your farrier. Involving all relevant members of the team will help to obtain the best possible outcome for your horse.

Prior to starting work, it is beneficial to consider your horse's nutrition. It is not unusual for horses that have been on box rest to feel a

bit fresh or excitable when they first return to work, but by providing a diet with low levels of starch and a high fibre content, any potentially excitable behaviour should be reduced. Oral sedatives can be of use in some more difficult to control patients and this should be discussed with your vet on a horse-by-horse basis.

A controlled, gradual return to work is most easily achieved using a horse walker (**figure 2**) but if one isn't available, then lunging (**figure 3**), lead or ridden work may be your next best option. Once the exercise regime has increased to a suitable level, turnout will be the next step.

It is always a good idea to turn out after the day's exercise period so that excess energy has been 'burned off' and the horse is more settled. It is best to leave him fully booted and turn into a small paddock with plenty of grass to help distract from the excitement of new surroundings. Oral sedatives may also be required at this point in the rehabilitation process. As workload further increases and a routine becomes established, the chances of your horse injuring himself should diminish.



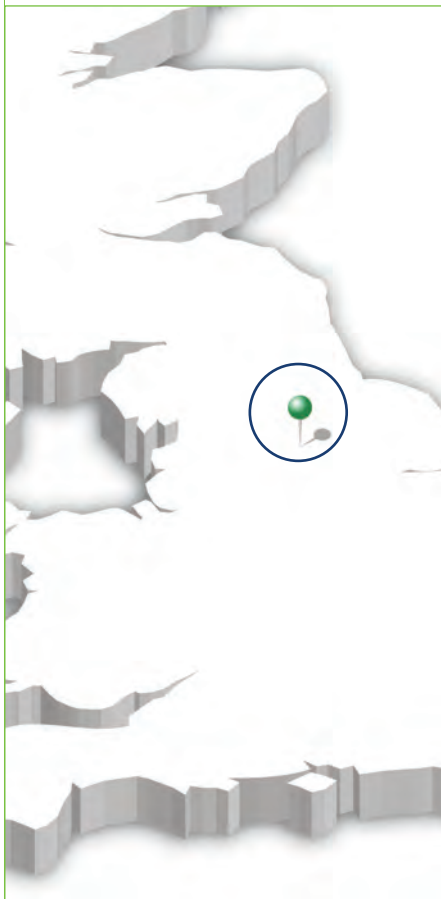
Figure 2. A horse walker makes for an easier return to work



Figure 3. Lunging is useful when gradually returning a horse to work

KEY POINTS

- Team approach to rehabilitation
- Regular vet checks to ensure success
- Commence controlled exercise only when ready
- Exercise regime depends on injury



Veterinary Surgeon **Nicola Mason**

XLVets Equine practice **Durham Equine Practice**



Nicola Mason BVMS MRCVS,
Durham Equine Practice

Vaccinating my horse, why should I bother?

If you could save your horse's life for less than the price of a magazine subscription, would you? Of course, every responsible horse owner would answer 'Yes'.

Vaccines successfully mimic nature, by stimulating the immune system to protect itself against specific viruses and bacteria - but without the devastating effects of the disease. The secondary benefit of a vaccine is that it can activate the horse's immune system much faster; in effect, the vaccine turbo-charges the horse's natural system to give him a security system against diseases that could otherwise make him extremely ill, and even cause death.

And that is why it is so important to make sure your horse is vaccinated against influenza and tetanus, and that those vaccinations are kept up-to-date.

So what can happen to horses that are not vaccinated?

Tetanus is often fatal and can cause an excruciating death. It floods the horse with toxins that destroy the nervous system. Light and sound become unbearable for affected animals and the mortality rate is devastatingly high, even when the horse receives prompt treatment. Treatment attempts are also very expensive.

The bacteria that causes tetanus can be found just about anywhere, and can enter the horse's system by the tiniest injury: making every single horse vulnerable if they are unprotected. So a vaccine that takes a second to administer can save both horse and owner untold pain.



Sadly, it is a reality that we have seen fatal cases in recent years. Inevitably with these horses, their owners wish they could turn back the clock and get their vaccinations sorted.

They loved their horse of course, but were either unaware of the consequences or never quite got around to booking the appointment.

Equine influenza is very common and spreads quickly. Symptoms include a snotty nose (**figure 1**), a dry, hacking cough, fever and loss of appetite.



Figure 1. Nasal discharge is a typical symptom of influenza

While many horses recover, they can develop serious complications, particularly if they are very old or young. Again, treatment can be expensive.

All in all, is the risk worth it? Definitely not. Of course, if you're taking your horse to competitions, vaccinations are a requirement.

So if your horse is all covered - great! However if not, take a moment to get him booked in with your vet for a primary course. You won't regret it and your horse will thank you.





Veterinary surgeon Paul May

XLVets Equine practice Paragon Veterinary Group



Paul May BVMS MRCVS,
Paragon Veterinary Group

Day in the life of: A British Eventing ‘Course Vet’

British Eventing has an established range of competition levels from introductory through to advanced, with each bringing its own challenges. The aim is to encourage participation at an entry level as well as providing an arena for the more established horses and riders.

This means that at many events a significant proportion of the horses and riders may be new to the sport, and this sets its own particular challenges to the organisers.

As course vet, there is preparation to be done ahead of the event. In British Eventing affiliated horse trials, the organisers provide all of the necessary support documents prior to the event. A suitable vehicle (figure 1) is essential to be capable of navigating the cross country course in all weathers, along with a full veterinary emergency kit.



Figure 1. A suitable vehicle is required to get the course vet around in all weathers

On the first of the two days there is an early start:

- 07:30
 - Emergency services briefing
 - Radio sets are collected at this time and contact with control is established
 - Meet with the British Eventing officials and the event organisers
- 08:00 Dressage starts
- 09:00 Show jumping starts
- 09:45 Cross country starts
- 18:00 – 19:00 Cross country ends

The period prior to show jumping beginning gives the course vet the opportunity to run through a number of checks for the day:

- Visit the show jumping organising team and establish contact with the commentary team there;
- Establish contact with the course farrier and make a plan for the day;
- Drive around the cross country course. This is an essential task as we must be familiar with the event layout (figure 2). It is important to work out vehicular access to all parts of the course and identify any areas for concern. Many parts will be roped-off so we have to develop a map of how to navigate when there are riders out on the course;



Figure 2. Being familiar with the course layout is important

- Discuss with the horse ambulance driver and the course officials what the plan will be for the discreet handling of any equine casualties. The horse ambulance would be used to remove a fallen or injured horse but then must be made available again before competition can resume.
- Carry out equine passport checks at the request of the British Eventing Steward. The attending vet should be well versed in the rules - which differ significantly from the Rules of Racing

Once the cross country phase gets underway, it is usual to relocate to a central position that allows good access to most areas of the course. The controller will carry out a number of radio checks during which all parties involved with the provision of emergency cover need to respond.

Once this is all complete and the competition underway, it is then a matter of sitting and waiting for the call. There is usually a fairly continuous chat on the radio keeping us informed of happenings around the whole ground. For those used to racecourse work this is very different; here the riders continuously set off at two minute intervals for the duration of the event, which is up to eight hours.

Stay relaxed but alert, it is likely to be a long day!

At a typical event we expect to see a number of minor injuries, mostly cuts and grazes. It is important to treat any horses once off the course but we have to be prepared to apply a temporary dressing to a bleeding wound before carrying out a more thorough examination in the lorry park or event stables. We make sure there is a system in place for referral of cases either to our own practice or further afield as required.

Finally, and hopefully, the major incident that we have prepared for and mentally rehearsed, will not happen.

Working together to build a **Picture of Health**



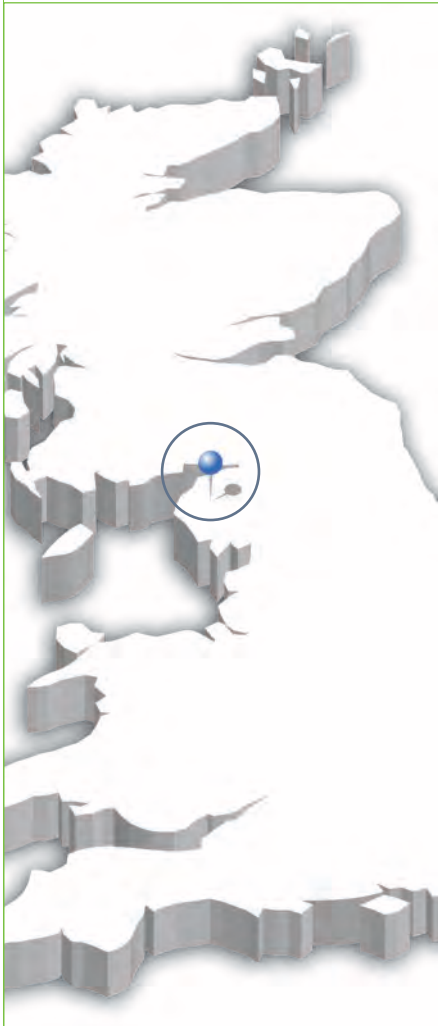
XLVets Equine veterinary practices believe that prevention is better than cure. Talk to your local XLVets Equine veterinary surgeon about preventative healthcare so together we can ensure your horse is a complete **Picture of Health**.



T: 01228 711788 www.xlequine.co.uk



Equine



Veterinary Surgeon Andrew Robinson
 XLVets Equine practice Millcroft Veterinary Group



Andrew Robinson BSc(Hons) BVMS MRCVS,
 Millcroft Veterinary Group

Angus - a healthy pony

How can we check our horse or pony is healthy, and know what is normal for the individual animal? Here are some simple checks that you can make at home - if done regularly it will help you to spot any changes if or when they occur.

Heart and pulse

Normal heart rate is 28-44 beats per minute. If you have a stethoscope place it on the left side of the pony, just behind the elbow in the girth area (figure 1). If you don't have a stethoscope you can take the pulse from the bottom side of the jaw where it crosses the bone (figure 2). Don't press too hard or you will stop the pulse.

If your pony is clipped you may also be able to see the pulse in the jugular vein on the side of the neck beside the windpipe. Take the pulse for 15 seconds and multiply by four remembering that 'lub-dub' is one beat and not two and the heart rate will increase if they are nervous or excited.

Eyes

Eyes should be bright and clear (not cloudy) and if gentle pressure is applied to the eyelid, you can see the colour of the conjunctiva (figure 3). It should be a nice pink colour.

Nostrils

Normal rate is 10 – 24 breaths per minute. The nostrils should either be free of discharge or may have a small amount of clear discharge (figure 4). To take a breathing rate, you can stand and watch the chest wall rise and fall or use your stethoscope on the windpipe or on the chest, further back and above where you took the heart rate, to listen to the lungs.



Figure 3. Bright and clear eyes

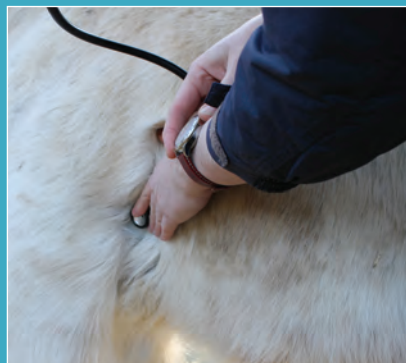


Figure 1. Normal heart rate is 28-44 beats per minute



Figure 2. Taking the pulse from below the jaw



Figure 4. If present, nasal discharge should be clear

Capillary Refill Time

Gently lift the upper lip and press your thumb on the gum (figure 5). The gum should go white and then go back to a nice healthy pink colour within 2 seconds of releasing the finger.



Figure 5. Measuring capillary refill time

Eating

Your pony should eat approximately the same amount each day (figure 6). If a lot of food is left or dropped (especially little balls of hay called quidding), contact your vet as there may be a problem, for example with the pony's teeth.



Figure 6. Monitor feed intake

Feet and Legs

The feet and legs should be checked when picking out feet (figure 7). The pony should bear weight equally on all four feet and not have any stretched out in front, underneath or behind the body, or resting one all the time. The hoof wall should not feel overly warm (unless the pony is standing in a deep shavings bed) and there should not be bounding digital pulses. The digital pulse can be felt by placing your middle finger just towards the back of the leg underneath the fetlock joint (figure 8 and 9). It is also a good idea to run your hand down the tendons and cannon bones to feel for any heat or swellings.

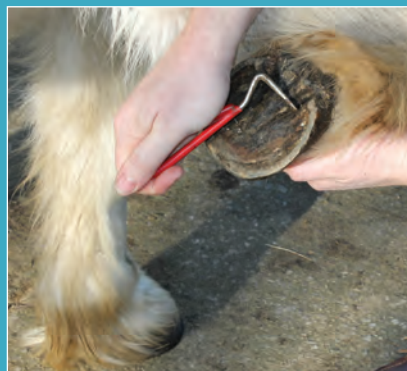


Figure 7. Examine feet and legs when picking out



Figure 8. Checking the digital pulse

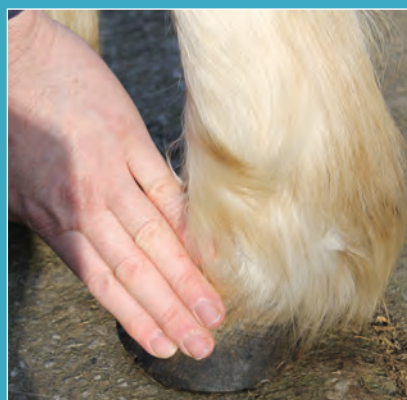


Figure 9. Feel for heat and swelling

Droppings

Get to know how often and what quantity of droppings your pony produces. Droppings should be well-formed balls (figure 10) with at most a little liquid but no mucus covering or abnormal colour or consistency. You can also listen to your pony's gut sounds by putting your ear near both sides of the abdomen or using a stethoscope. You should hear a mixture of gurgling, with gas-like growls, 'tinkling' sounds (fluid) and occasional 'roars'.



Figure 10. Know what is normal for your pony

Temperature

Normal temperature is 99 – 101°F or 37.2- 38.3°C. Place a lubricated thermometer inside the rectum (figure 11) and wait for 30-40 seconds or until it beeps if it is digital.

It is essential to get to know YOUR pony. Look at their overall appearance including how they are acting as well as the signs above. Know what is normal for them and if in doubt contact your local XLVets practice for advice.



Figure 11. Normal temperature is 37.2-38.3°C

1st Competition page

Send us a picture of your mud monster !



WIN!



Despite our best efforts to keep our horses clean and healthy, sometimes our equine friends just have to get down and dirty, so we'd like to see pictures of your mud monster.

We will publish the best pictures in the Summer issue of Equine Matters, so if you'd like to see your horse featured on this page next time, please send your photo to equinematters@xlvets.co.uk. And don't forget to include your name and your horse's name and any caption you'd like us to include. We'll enter you into a competition to win an XLVets Equine First Aid kit rucksack.

EXCELLENCE IN PRACTICE

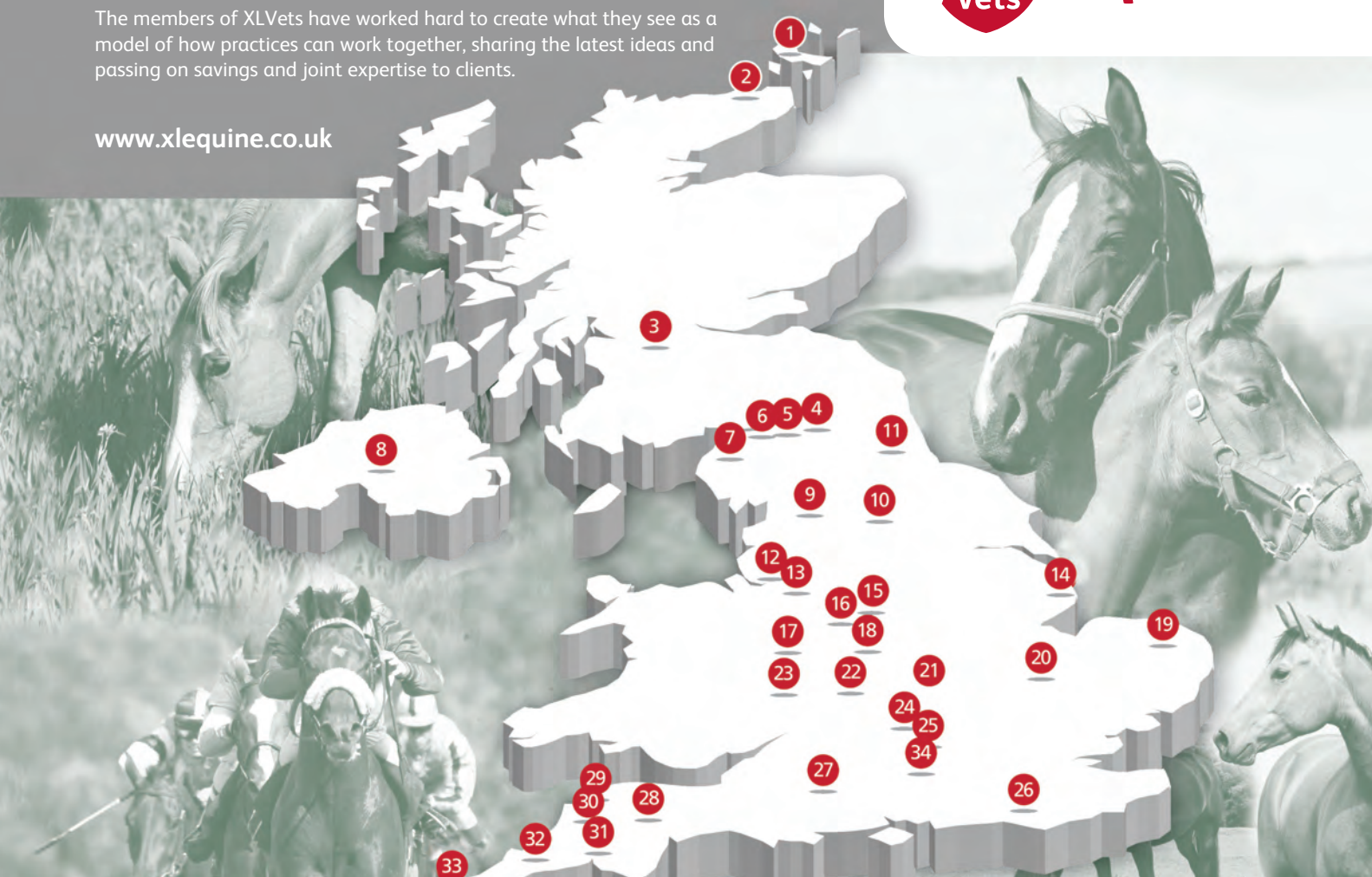
XLVets Equine - Better Together

The members of XLVets have worked hard to create what they see as a model of how practices can work together, sharing the latest ideas and passing on savings and joint expertise to clients.

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Equine



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3	Clyde Veterinary Group Lanark, Lanarkshire Telephone: 01555 660000	11	Durham Equine Durham Telephone: 0191 603 1122
4	Scott Mitchell Associates Hexham, Northumberland Telephone: 01434 608999	12	Ashbrook Equine Hospital Nr Knutsford, Cheshire Telephone: 01565 723030
5	Capontree Veterinary Centre Brampton, Cumbria Telephone: 016977 2318	13	Wright & Morten Macclesfield, Cheshire Telephone: 08458 330034
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		19	Chapelfield Veterinary Partnership Norwich, Norfolk Telephone: 01508 558228
		20	Fellows Farm Equine Clinic Huntingdon, Cambridgeshire Telephone: 01487 773333
		21	Buckingham Equine Vets Milton Keynes, Buckingham Telephone: 01908 560789
		22	608 Farm and Equine Veterinary Surgeons Rowington, Warwickshire Telephone: 01564 783404
		23	Belmont Farm & Equine Vets Hereford, Herefordshire Telephone: 01432 370155
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		29	Torch Farm and Equine Vets Ilfracombe, Devon Telephone: 01271 879516
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XLVets Equine - We Excel



Equine