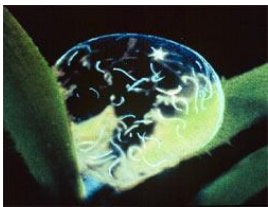


Strategic Deworming

What we Now Know Will Save You Money and Better Protect Your Horse

Our ongoing battle against internal parasites has changed. Previously, **large strongyles** represented the greatest health risk to horses. The larval forms of these “bloodworms” set up housekeeping in the wall of the arteries that supplied the intestinal tract resulting in frequent medical colic episodes and weight loss.



Veterinary Science developed and marketed a number of medications that have worked so well against this class of parasite that at this point it appears to be practically eradicated.

But nature abhors a vacuum, and other parasites have now become the prime issue. If parasite control is neglected our horses will still suffer from colic, weight loss, decreased immune responses, inadequate utilization of nutrients, organ damage, respiratory disease and even death. While large strongyles (the old “Enemy #1”) were well contained by our previous shot-gun approach to deworming, the various remaining parasites are not all sensitive to the same class of dewormers and are much more capable of developing resistance to the drugs that are currently available. Since there are no new compounds in development, it is important that we use the ones we have access to with care.

There are a number of scientific factors that come to bear on how and when we should deworm our horses.

- ❖ Not all horses have equal immunity to parasites. Hence some will need more or less frequent deworming than others. Fecal Eggs Counts (FEC) will determine the parasite load and immune capability of a given horse and guide our choice of drugs.
- ❖ By targeting the horses with the greatest loads (and the lowest natural immunity), we medicate only those horses in need. It is important not to risk the effectiveness of dewormers by deworming horses that are not at risk. Saves money too!
- ❖ Not all medications are effective against all parasites. Small strongyles (a major culprit) develop resistance quickly to many drugs. The ivermectins are not as effective against roundworms which are common in young horses. Praziquantel is the most effective anthelmintic for addressing tapeworms. Moxidectin (Quest) and larvicidal doses of fenbendazole (Panacur, Safeguard) are the only effective means of treating encysted parasites. Debilitated, young or thin horses should not be wormed with Moxidectin.
- ❖ There is some concern that the use of excess anthelmintics may negatively impact the environment.

How do we get started?

- ❖ Parasites naturally do not shed eggs in the winter, so samples should be taken at least 10 weeks after the last deworming and not before the March (or later if we are still in deep winter) in order to give reliable results. In this latitude, we generally do not have to deworm in the winter months.
- ❖ For each adult horse, provide two fresh fecal balls for quantitative egg counts. The samples should be placed in a baggie and labeled with the horse’s ID and age. Squeeze out as much air as possible before sealing the baggie. The sample must be less than 24 hours old when it arrives at our lab, and it should be protected from extreme heat or cold to give valid test results.
- ❖ During your routine spring visit we can take your samples to the lab and perform a Parasite Risk Assessment in order to design a program for each horse based on immune status and management. Parasite Risk Assessment combines the data from the fecal egg counts with a number of management factors in order to design the Strategic Deworming Protocol best suited to an individual horse.
- ❖ In most cases horses will need to be dewormed less frequently, maybe only once or twice a year, thus allowing you to realize savings in medication costs.
- ❖ With higher fecal egg counts and increasing Risk Assessment, an effective, precise and cost-saving program can be designed that addresses your horse’s individual health needs while working with your management desires.

Low Risk Assessment – Middle aged horse; Fed grain from elevated buckets; Fed hay that is not near manure area; Stocking density = 1-2 horses per acre of green grass pasture; Pasture rotated/shared with ruminants; Dry lots, paddocks and stalls have all manure removed daily



Medium Risk Assessment - Middle aged horse; Fed grain from elevated buckets; Fed hay that is not near manure area; Stocking density = 3-8 horse per acre of turnout; Pasture rotated/shared with ruminants; All turnout areas and stalls have manure removed periodically

High Risk Assessment – Young (<2), middle aged or old horses (>18); Fed on the ground in groups; Stocking Density > 8 horses per acre of turnout; No manure removal from turnout; No rotation of pastures; Mixed with donkeys; High traffic flow of horses on and off farm; Significant level of infectious diseases on premises.

What's New in Joint and Tendon Therapies?

Several new exciting treatment modalities have once again put veterinary medicine ahead of human medicine.



- **IRAP** is a new tool primarily used in combating osteoarthritis. IRAP is a protein found within the blood of the horse that blocks inflammatory receptors within the joint capsule and cartilage thereby reducing damage.
- **PRP**, or platelet-rich plasma, is a substance taken from the blood of the horse that holds the growth and healing factors within the body. By injecting this substance into lesions within tendons, ligaments, bone, and joints, we can use the body's own healing mechanisms to reduce lay up time and the strength of the tissue.
- **Stem cells** can be harvested from the horse's bone marrow or fat reserves and used to promote healing. Stem cells contribute several factors in healing such as growth factors, anti-inflammatory factors, and the ability to form any tissue within the body. By harnessing this potential, we can heal lesions faster and stronger.

The Equine Clinic at OakenCroft offers the administration of these modalities when indicated.

The Equine Clinic at OakenCroft

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Visit us on the Web at www.oakencroft.org for upcoming events, information, directions, the client survey and our on-line pharmacy. You can also find us on Facebook!

Regional Horse Owners Seminars Offered in March

We will once again be offering regional seminars in four locations during March. We will have hot soup and sandwiches at the beginning of the program at the three remote sites (Cobleskill, FMCC, and N. Chatham) so folks can come straight from work or school, eat, and still be out by 8pm.

Where and When:

- SUNY Cobleskill – from 6pm to 8 pm on Wednesday, March 16 in Warner Hall Room 213
- Fulton Montgomery Community College -- from 6pm to 8 pm on Wednesday March 23 in the Classroom Building Room C110
- North Chatham Fire House – from 6pm to 8 pm on Thursday, March 10
- The Equine Clinic at OakenCroft – from 9am until noon On Saturday March 26 at the Clinic (warm food and drink provided)

Topics

- Treatments for Lameness (IRAP, PRP, Stem Cells, Hyaluronic Acid, Polyglucan, Adequan) – When, Why, How, How Much
- Strategic Deworming – Science tells us that we are deworming the average horse too much...Find the ones that really need it and save \$\$ (see the article in this Newsletter). We will have a tech there to process your samples on site (1 horse free for each attendee). Answer a few simple management questions and go home with a parasite control plan tailored to your needs!
- Broodmares, Foals, Stallions – A practical approach to breeding in tough economic times (offered only at the clinic site)

A nominal fee of \$15 per person will be charged to cover food and materials, and we ask that you register beforehand so we can plan accordingly. You can find directions to each seminar on our web page at www.oakencroft.org. You can also register for the conference online or by calling the office (518) 767 2906. As always, youths, families, 4-H and rescue groups are offered special pricing.

The Equine Clinic at OakenCroft

Winter 2010-2011

Demand for Reproductive Services Declines - ECO Restructures to Meet Client Needs

The general economic recession is one cause for the current decreased demand for reproductive services nationwide. The simple fact of the matter is that in many cases a known and ready-to-use young prospect can be purchased at a significantly lower cost when compared to the expense of breeding and waiting several years for what one hopes will be a suitable horse. Breeders have also come to realize that the costs of production (care and board, vets, farriers, breeding fees, registrations, training...) will in most cases not be recouped in the current economy. Since many of the larger farms enter into a breeding program as a business model, they have come to the conclusion that while the market demand for their product is decreased they should cut back on production until the horse market returns.



The picture on the racing side is complex. Here in New York we have witnessed the owners and breeders being held in limbo by situations in politics and management that are beyond their control. There has been significant restructuring of racing venues and breeding incentives over the last 30-40 years. Only time will tell what the racing industry will look like in an economy that meets the new demand for remote electronic wagering instead of “a day at the track”.

Besides the economic factors, there is an ever increasing awareness of the problem of the unwanted horse. All aspects of the horse industry have struggled in recent years to find a solution to the excess number of horses produced each year, and to find uses for those many horses that do not quite “fit the bill” of the use their breeders intended.

The Equine Clinic at OakenCroft remains dedicated to providing those services requested by our client base. For our first twenty years Dr. Lesser provided practical and proficient breeding services, and for the last decade the practice has employed a reproductive specialist trained in assisted reproductive technologies such as embryo transfer and semen freezing. We will always be indebted to Drs. John Hyland, Terry Lowis, Kelly Stich and Tamara Dobbie for their dedication and excellent service. In a reality that is similar to the national picture, our clients produced significantly fewer foals over the last 2 years, and when surveyed for the 2011 season, most planned on cutting back

even further. With that in mind, Dr. Dobbie began to re-tool her skill set to include assisted reproductive services for small animal practice, and she is currently practicing at Shaker Animal Hospital. Dr. Christine Cocquyt, who provided the balance of the breeding farm work, has accepted a position at the University of Tennessee in the Internal Medicine Department. We are happy that both of these outstanding practitioners have been able to relocate to positions where their talents will be greatly appreciated.

ECO welcomes **Dr. Carlin Jones** to head our reproductive services division. Dr. Jones is 2002 graduate of The University of Pennsylvania. Since graduation Carlin has practiced broodmare and general medicine in Pennsylvania and New York. **Her expertise will afford all of our clients the same level of breeding, foaling, and stallion services that they have come to expect from ECO.** In addition to offering broodmare services both at the clinic and on site at client farms, Carlin will provide comprehensive routine and general care to the clients in the southern and western portions of our practice area. Her commitment to professional norms will preclude her providing service to clients inside the area served by her previous practice.

We are starting the 2011 breeding season with a staff ready, willing and able to foal mares supported by a 24 hour staff and veterinary attendance for each foaling. We will continue to manage stallions and sub fertile mares, and breed with both fresh and frozen semen. As the market dictates, we will continue to offer assisted services such as embryo transfer and stallion freezing. At this time we have space available for additional resident mares for those clients that want individualized care for their mares, foals and stallions. If you are interested, contact Dr. Jones at the clinic.

Pictured: CBMF Defying Gravity and her dam (Above)

CBMF Fearless (Below)

