

# KEYSTONE EQUINE VET SERVICES



FALL 2011 NEWSLETTER

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## SCRATCHES - A wet summer curse!



Lower limb dermatitis or scratches affects many horses in our area. It becomes even more evident in wet, dirty environments. Many different bacteria and fungi have been implicated with most cases likely involving both.

When I see a case, there is often a buildup of crusty lesions. These crusts are a buildup of skin cells, discharge and dirt stuck on

the skin. I describe this as “armor” protecting the infection that lies beneath. Therapy needs to focus on removing these crusts. Clipping the hair may be needed to help in the removal process or to keep future buildup from occurring. Often you will need to soften the crusts to aid in their removal. This can be done with simple soap and water or in more advanced cases you can use Corona conditioner or even furazone sweats to aid you. Once softened, it then requires picking with your fingers or vigorous but gentle agitation with a grooma or stiff brush. Getting down to clean exposed skin is a huge step in this battle.

I generally recommend washing the legs daily for 5 days. Antiseptic type shampoos can be very helpful in these situations. These may include Micro-Tek, iodine shampoo or chlorhexidine shampoo. It is important to remember that these shampoos need exposure time to work properly. Soap the legs up and allow for 10 minutes of soaking time before rinse and drying.

Keeping your horses skin clean and dry will get you a long way. Greasy ointments will only keep things moist and collect dirt. If you have a more advanced case of scratches, you may need to contact your vet for further advice.

## CONTINUING EDUCATION - Good for the vet, good for your horse.

On August 4th I was able to attend an ophthalmology wetlab as part of the Hambletonian Continuing Education Meeting at the Meadowlands Race Track in New Jersey. A wet lab allows for hands on education and practice of newly learned procedures. This allowed me to try new instruments available for in

depth ophthalmic exams as well as revisit procedures for nerve blocking the eye for various ocular surgeries.

Additionally, I will be attending the Bluegrass Equine Symposium from September 24-27. This intensive continuing ed symposium is held by the world renowned Hagyard Equine Medical Institute in Lexington,

KY. The focus of this years meeting is on advanced equine medical and surgical care in the on farm setting.

I strive to attend specialized continuing education meetings to obtain the latest information that can have an impact on my clients horses.



SEPTEMBER 11, 2001  
We will always remember.



Facebook us for weekly  
equine health related posts.



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## FALL VACCINATIONS

Fall vaccination time has arrived. This year has brought about an enormous amount of bugs and mosquitoes. Individual farms should consider tailoring their plans for your area.

Rhino/Flu boosters are recommended every six months.

Those areas experiencing high mosquito numbers (I currently can't survive outside my home right now) should consider a fall booster for West Nile Virus.

Horses in New Jersey and certain pockets in Pennsylvania may want to consider boosting for Potomac Horse Fever. The wet weather has made snails, slugs and aquatic insects very prevalent.

## FLORIDA BOUND HORSES

Those owners that have horses heading south for the winter will want to keep vaccine boosters on their mind. Traveling south opens these horses up to continual biting fly and mosquito exposure. Having a Rhino/Flu booster every 6 months is already strongly recommended. In addition to these, I would absolutely suggest boosting West Nile Virus and Eastern & Western Encephalitis.

## EQUINE CUSHINGS—A Short Story

Cushings Syndrome (CS) is always a source of many questions. CS is caused by a pituitary tumor at the base of the brain. The pituitary is responsible for controlling many things in the body. The adrenal gland is turned on and off by the pituitary. In CS we get a situation where a normal adrenal gland is over stimulated by the abnormal pituitary. The result is the adrenal over produces corticosteroids, more commonly called the stress hormones.

Cushing's Syndrome is most commonly a problem in horse over 15 years of age but has been seen in as young as 7. All breeds can develop CS with Ponies and Morgan's being the most represented. Horses may develop any number of a wide array of signs. Classically, we think of the long curly hair coat (hirsutism). Other symptoms include increased drinking and urinating, laminitis, lethargy, loss of muscle mass, patchy fat deposition as well as an increase in infections and decreased healing. Many horses can also have elevated blood glucose leading to the condition of insulin resis-

tance.

Testing for CS is most commonly done by screening ACTH and Insulin. This testing is a simple blood sample but must be handled very carefully as it requires being centrifuged and frozen within 4 hours. Additionally, in the fall season, there is a natural rise in ACTH so we avoid testing from September thru November.

Pergolide is the treatment of choice for CS. This medication helps to block ACTH production. Supportive care is also important to improve the horses quality of life. Preventive med such as deworming, vaccinations, dental care, foot care, hair clipping and proper diet are all important.

Advances in medicine have led to longer lives for our equine companions. As many horses age, screening for Cushings should become a part of their yearly preventive health plan. We can develop a plan to control CS and limit the devastating effect it can have on your horse.