



PO Box 112, Middle Falls, NY, 12848

Ph: 518-692-2000 Fax: 518-692-7554

Email: info@battenkillequine.com

Kurt Lutgens, DVM
Christina Hill, DVM
Sarah Begley, DVM

Find us on the web at
www.battenkillequine.com
and visit our page on

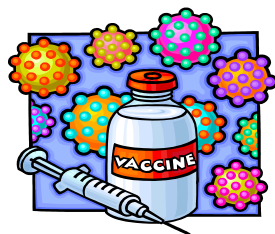
facebook

Fall Vaccine Special

It's time to think about protecting your horse from the challenges of infectious agents with fall vaccinations. At this time we recommend:

- **Influenza/
Rhinopneumonitis**
- **Potomac Horse
Fever**
- **Intranasal Strangles**

This series of vaccines will be offered at a reduced price for horses receiving the entire package. For larger facilities, there will be a minimum call charge per horse. This special price will only be available through November 15th, so call the office soon at **518-692-2000** to schedule your horse's appointment.



**Horses
Traveling South**

For those horses traveling south to warmer climates this winter, we recommend boosters of **West Nile Virus, EEE, and WEE** vaccines as your horse's exposure to mosquitoes will be extended. (Please see reverse side for more information on mosquito borne viruses.) Also remember to check that your horse's negative Coggins is current and call for a health certificate to your destination at least 2 weeks in advance of your scheduled departure date.

Weanlings

We recommend beginning vaccination of weanlings from vaccinated mares at 5-6 months. The initial round of vaccines takes four visits to complete as all immunizations will require a booster.

Broodmares

Broodmares should be confirmed as to their pregnancy status and vaccinated for Rhinopneumonitis at 3, 5, 7, and 9 months of pregnancy. Pre-foaling vaccines should be given one month prior to the mare's due date.

Rabies A notable number of cases of rabies in wild animals and at least two equine rabies cases have been confirmed in our upstate NY area so far this year. Cases of equine rabies are always fatal. The equine rabies vaccination is one of our regular spring recommendations. If your horse remains unprotected, please contact us to schedule an appointment for a rabies vaccination right away.

Eastern Equine Encephalitis (EEE) and West Nile Virus

Mosquito borne viruses continue to be a problem this year. New York State's first confirmed equine case of EEE, located in Oswego County, was announced on August 27th. While no cases of West Nile Virus in horses in New York have been reported for 2010, there have been a number of human cases reported and pools of mosquitoes carrying the virus have been found in various locations throughout the state. Horses contract EEE and West Nile Virus through the bite of an infected mosquito. Infected mosquitoes acquire it from feeding on infected birds. A horse will not pass EEE or West Nile to another horse, but the presence of an infected horse indicates the presence of infected mosquitoes, and therefore a locally higher risk of infection.

Cases of EEE in horses come on quickly and are almost always fatal. An affected horse will be unsteady, exhibit erratic behavior, and have a notable loss of coordination. No effective treatment for EEE in horses exists. West Nile Virus affects the horse's central nervous system and causes symptoms of encephalitis similar to those presented by EEE. There is no specific treatment for West Nile encephalitis in horses; with supportive veterinary care it is possible for a horse to overcome the virus.

As it is virtually impossible to completely isolate a horse from exposure to mosquitoes, the only way to protect a horse from EEE and West Nile infection is with a professionally administered vaccination. The doctors at Battenkill Veterinary Equine recommend annual vaccination against both EEE and West Nile, and both vaccines are included in our spring vaccine package. If your horse received the recommended annual vaccinations, no further action is necessary. If your horse remains unvaccinated against EEE and/or West Nile it is advised that you vaccinate them at this time. If your horse will be traveling to the southern states this fall or winter it is *highly recommended* that even horses who have been previously inoculated receive a booster vaccine. Please contact us if you have any further questions. You can also visit our page on **Facebook** to stay updated on these and other equine health related issues.



PO Box 112
518 State Rte. 29
Middle Falls, NY 12848
(518) 692-2000
www.battenkilllequine.com

To our valued clients:

Fall Considerations

Teeth: Regular dental care is an important part of your horse's health maintenance. The winter months can be difficult for all equines, particularly older ones. Horses may face challenges in maintaining/gaining weight as much of the energy that they consume will be used to keep warm. It is important to give them the best chance at getting the most benefit from their feed by providing regular dental care. In the winter horses generally consume more hay and grains than grass. A horse whose teeth are in good shape will have an easier time managing that diet. Please contact the office to schedule an appointment to address your horse's dental needs.

Deworming: Horses receiving a Pyrantel daily dewormer (such as Strongid C® or Continuex®) should receive a biannual dosing of Ivermectin, once in the spring and once in the fall. We recommend Equimax®; it has the broadest spectrum of activity against the parasites we commonly see. As well as being effective against Bots, Round Worms, Pin Worms, and all stages of Strongyles, Equimax is effective in removing tapeworms. Horses who are not receiving a daily dewormer should be dosed according to the schedule provided on our website (www.battenkilllequine.com) and available from the clinic. We recommend a fecal examination two times a year to monitor how your deworming program is working. There is some current evidence that equine parasites can develop resistance to deworming medications over time. The previous recommendations are still a trusted defensive strategy against equine parasites. Our doctors will continue to stay informed on the latest research regarding this matter, and if necessary will adjust their recommendations according to any new findings.