



THAL EQUINE

Offering Quality Veterinary Care for Horses in Northern New Mexico

DOUGLAS THAL, DVM • BESSIE BABITS, DVM • STUART McCALL, DVM • MARY FLITNER, DVM

FALL 2005

Dear Valued Clients and Friends,

Autumn is here and it's time for the fall newsletter. I hope all of you have had a great summer.

At Thal Equine, we have had another very productive season. We've been busier than ever, as the practice continues to grow. Dr. Elizabeth "Bessie" Babits recently joined the practice. She has lots of passion for horses and veterinary medicine and she's very sharp. I think you'll really like her.

Dr. Stuart McCall continues to practice in Santa Fe, taking great care of clients and horses as always. Vet tech Jamie Greaver works with Dr. McCall.

In the main office, we've been blessed by the appearance of Maggie Minter. Maggie worked with a great equine practice in Missoula, Montana for several years before joining us. She is working both as a technician/assistant and on the phones. We are very happy to have her with us.

Our loyal staff of Cindy, Brook, Ruth and Brenda continue to provide the support structure of the practice.

As we do every year, we've purchased new equipment to allow us to offer the best in equine veterinary medicine and surgery, including a special ultrasound probe used specifically for detailed studies of tendons and ligaments. I have taken advanced training in ultrasound of joints and less commonly studied areas. This probe allows us to utilize some of the new knowledge that we have gained.

So, as always, there is change. I know it's for the better and I feel excited about the direction the practice is taking.

I'm very proud of what we have created and of all these great people working with me to provide the very best in equine veterinary care.

Thanks again for your continued support.

Doug Thal, DVM

And staff of Thal Equine, LLC

Welcome, Dr. Bessie Babits

Dr. Elizabeth "Bessie" Babits recently joined Thal Equine.

Dr. Babits was raised in Salmon, Idaho where she graduated from high school as valedictorian of her class. She attended Washington State University, College of Veterinary Medicine, graduating with honors. During her academic training she received extensive training in equine surgery, lameness and medicine.

Dr. Babits is a lifelong horse-woman, with an extensive background as a trainer and riding instructor, specializing in classical dressage. She has a comprehensive understanding and working knowledge of sport horse disciplines, including dressage, jumping, western performance events, rodeo and pleasure riding.



Dr. Babits

She worked as a volunteer for the BLM Adopt-A-Horse program, working with wild horses, and as a volunteer, instructor and trainer for a therapeutic riding program.

She has a special interest in equine lameness and musculoskeletal dysfunction as it pertains to the training of horses, particularly with performance horses. She enjoys working with a diverse array of clients helping them to achieve harmony with their horses.

We are very excited to have Dr. Babits join our practice. She's a bright and energetic person who brings some great new ideas and skills to our practice. We feel confident that you will like her as well.

UPDATE: West Nile and VS

By Dr. Bessie Babits

West Nile Virus is a mosquito-borne virus which became prevalent in the United States in 1999. Since that time, it has been encountered in virtually every state. The virus is responsible for producing encephalitis (inflammation of the brain) and myelitis (inflammation of the spinal cord) in horses. Infected mosquitoes acquire the virus from birds and spread the disease to horses and humans. West Nile Virus is not contagious between horses, between humans, or between horses and humans, as these species are dead-end hosts. This means that the virus does not reach sufficient levels in the blood to be picked up by mosquitoes and then spread to other horses or humans. Clinical signs of West Nile Virus include ataxia (incoordination, stumbling), paresis (weakness of the limbs), partial paralysis, recumbency (unable to stand), depression or apprehension, muscle twitching, or death. There is often no associated fever with the disease. Vaccination has greatly reduced the prevalence of the disease and will continue to be an integral component in con-

trolling the disease in horses.

Currently, there are five counties in New Mexico that have reported West Nile Virus cases in horses. These include Catron, Chaves, Dona Ana, Otero and Socorro counties. The total number of reported number of New Mexico West Nile cases in horses is six. We have not seen a case yet this year.

It is extremely important to continue to protect your horse through vaccination and management procedures. Vaccination is best done prior to the onset of mosquito season. Typically the vaccinations may be given in March or early spring so that the horse will have mounted an adequate immune response. If your horse has never been vaccinated for West Nile, he will need the initial vaccination followed 3 to 6 weeks later by a booster. Following the initial series, he may be vaccinated once every year. In areas that have a high incidence of West Nile, it is recommended to vaccinate twice a year: once in early spring and once prior to the height of mosquito season.

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Colic Lecture a Big Success

On July 16, Dr. Thal gave a lecture on colic to about 125 horse owners from the Santa Fe area. The Santa Fe County Sheriff's Posse helped organize the presentation.

The presentation consisted of a slide show and lecture, covering all aspects of colic, from what colic is to diagnosis, treatment options, surgical procedures, and management practices to help prevent colic.

A main point of the seminar was that colic is not a disease, but a symptom of disease. It is the horse's unique way of showing abdominal pain. The pain usually results from intestinal dysfunction, but can result from problems with other organs.

Here are a few key points that were discussed:

Colic presents as a group of signs which can be mild, moderate or severe. If untreated the signs may worsen. A horse may show one sign, more than one, or all of these signs. How severe the signs are may or may not relate to the severity of the problem.

Colic signs can range from subtle signs like poor performance, decreased appetite or changes in attitude to lying down, grinding



teeth, curling upper lip (flehen); cocking tail to one side; to more obvious signs of stretching, looking at side; pawing, kicking at belly, or rolling.

Colic pain comes from tension on attachments of the gut to the body wall (mesentery), over-filling (distension) of part of the intestine (i.e., gas accumulation), or irritation to inner surface of intestine (i.e., gastric ulcer).

Colic pain can come from a large variety of problems with the intestine - some mild, some severe. Some of these require treatment and a small percentage require surgery.

What can you do?

1. Try to mimic your horse's natural feeding habits as closely as possible.
 2. Feed small, frequent meals if possible.
 3. Use pasture or hay as the base of the diet.
 4. Think of grain as a supplement and feed only as much as necessary, or none.
 5. Provide as much pasture turnout as possible.
 6. Keep fresh water available at all times, heated in winter to avoid freezing.
 7. Maintain regular worming schedule.
 8. Have regular dental exams because bad teeth can result in poorly chewed feed, leading to impactions.
 9. Introduce new feed or hay gradually.
 10. Alfalfa hay can predispose some horses to gas colic.
 11. Have a good working relationship with a qualified veterinarian who can help advise you on the health of your horses.
 12. Consider PreventiCare.
- For more details, see the summary of the talk, available on our website.

Now Offering CareCredit

Veterinary costs keep rising. For a practice like ours to keep offering the best equipment and expertise available, we must charge enough to offset these cost increases and we ask that clients please keep in mind that our policy is payment at time of service.

Sometimes a crisis can take a horse owner by surprise. Thal Equine is happy to offer our clients a new payment option: CareCredit. It's easy to use and offers a broad credit line depending on your horse's needs.

- No interest plans or low interest plans
- Low minimum monthly payment and revolving line of credit
- Quick and easy application process
- You can transfer your existing balance

CareCredit is a great choice for preventative care or the unforeseen emergency. Please call our office for more information or go to www.thalequine.com.

Articles by Dr. Thal

About eight months ago, Dr. Thal began writing horse health care articles for the *Today's Horse Trader* magazine. This monthly magazine is available at area tack shops, feed stores and farm supply stores. The articles are available on our website.

There is so much information available to horse owners these days. Some of it is reliable and some is not. There are new developments taking place in all areas of equine health. Dr. Thal's goal in writing these articles is to take topics of interest and current ideas and try to convey the "take home points" that he feels affect horse owners the most.

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Vesicular stomatitis (VS) is a viral disease characterized by vesicles and blisters that occur on the tongue and membranes of the lips. It may also present as an inflammation of the coronary band. Clinical signs of coronitis include cracking, bleeding, oozing, and inflammation of tissues at the coronary band. The hoof wall may begin to separate from the coronary band. Often, these horses are not lame. Horses with mouth lesions may refuse to eat and may salivate excessively.

VS is a reportable disease because of its resemblance to foot and mouth disease in cloven-hooved livestock. Horses are not susceptible to foot and mouth disease. If livestock present with vesicular lesions and horses in proximity to the livestock do not, then this is a red flag for foot and mouth disease. Horse confirmed positive for VS will have a 21-day quarantine from the day the lesions heal imposed on the property at which they reside.

Currently, VS has been confirmed for the first time in Montana and Wyoming. Colorado, New Mexico and Utah are among the other mountain states with affected premises. The following counties in New Mexico have had confirmed cases: Rio Arriba, San Juan, Taos and Valencia. The total number of reported cases is six.

If your horse exhibits signs of VS, it is very important to call your veterinarian immediately. Blood will be drawn and sent out to a laboratory to test the serum for VS.

If the horse tests positive, the state veterinarian will contact you and place the premises under quarantine. This essentially means that horses cannot go onto or leave the property.

IMPORTANT NEW IDEAS ON LAMINITIS

Excerpt from two-part article printed in Today's Horse Trader

Fall is a time when we see an increase in the number of cases of laminitis in our area, especially in grazing horses. Laminitis (known by horsemen as founder) is a disease of the feet that is a common form of lameness in equines (horses, donkeys, mules). Laminitis typically results in very severe lameness which is usually worse in the forelimbs than hind limbs. The mechanisms of laminitis have been studied intensively for many years but there is still much that is not understood.

Recent research has contributed more to our understanding of this devastating disease and sheds some light on why we see a spike in laminitis cases in the fall.

Following are a few key points from of an article that I recently wrote for *Today's Horse Trader*. The article summarizes new research that is vital for horse owners to know.

The word "laminitis" means "inflammation of the laminae." It is a disease which involves dysfunction of the unique system of attachment of the bone to the soft tissues (the laminae). Laminitis can progress to allow complete breakdown of the structure of the foot. Thus, it is life threatening.

The most important thing you can do as a horse owner to prevent laminitis in your horses is to establish a working relationship with an experienced equine veterinarian who can provide appropriate advice and consultation.

A few general points of which every horse owner should be aware:

1. Maintain your horses at a healthy weight and avoid a high grain diet. Prevent horses from becoming obese on pasture.
2. Learn as much as you can about this devastating disease so you can recognize it.
3. Understand the predisposing factors and be alert for the classic signs of horses with these problems. These diseases include "Equine metabolic syndrome," "Insulin resistance" and others.
4. Prevent accidents such as grain overload by paying attention to methods of grain storage and prevention of access. If accidents occur, call your vet right away.
5. Maintain your horse's feet regularly with the help of a skilled farrier.
6. Recognize and do what you can to avoid acute diseases which can cause laminitis. Examples are retained placenta in mares, colitis, pneumonia and certain types of colic. If they do occur, contact your veterinarian for prompt and appropriate treatment of the primary problem, leading to a reduced chance for laminitis.

Some of the main points from some excellent new research on laminitis:

- Cold weather grasses like fescue and brome have higher carbohydrate than native pastures and warm weather grasses like gamma grass so they are more of a risk factor than the native grasses.

- Surprisingly, alfalfa may be lower in these carbs and so may **not** be more of a risk factor than grass.
- Testing growing grasses and hays is possible through some forage laboratories and is the best way to know the laminitis risk for forages.
- Horse owners should restrict or avoid grazing during times of highest plant stress. The most dangerous periods are **spring and fall, especially during periods of warm days and freezing nights.**
- Bran is high in dangerous carbohydrate and so is not a good supplement for horses at risk for laminitis.
- Soaking hay is a way to drastically reduce dangerous carbohydrate in hays fed to at-risk horses and horses suffering from ongoing laminitis. We have been doing this in horses who have ongoing laminitis. Our first impressions are that it is helpful.
- Grazing muzzles and dry lot turnout in horses at risk is a way to provide exercise while preventing excessive intake of forage.

Being aware of some of these new findings will help you to avoid conditions which might put your horses at risk for laminitis. For more details, the entire laminitis article (printed in two parts) is available on our website - www.thalequine.com.

Lameness seminar scheduled for Nov. 6

As part of our ongoing client education series, we are offering a seminar on Understanding Lameness.

The seminar will be held Sunday, Nov. 6, starting at 3 p.m. It will be held at the same location as the July Colic seminar (Ag Extension on Rodeo Road in Santa Fe). We will be doing full lameness exams and evaluations on two demo horses in the arena just opposite the Exhibit Hall at the Ag Extension Center, followed by lecture and slide presentation. The presentation will include the Glass Horse's new program "The Distal Limb." The Glass horse is an innovative interactive program that helps horse owners and veterinarians understand the anatomy of equine limb structures.

Everyone is invited to attend this free seminar. See our web site for details.

For news and veterinary information check out The Thal Equine web site

We are proud of our totally redesigned web site! The updated web site features information about our practice, links to other equine health related web sites and published articles by Dr. Thal and client information handouts as well as all the AAEP client education brochures. Dr. Thal's articles (in Word format) can be downloaded or opened and read on-line. The AAEP brochure are PDF downloads. If you would like any of these brochures in Word format instead, just email the office and we will email it to you.

Directions to Thal Equine's Taos location, with PDF map, are available on the web site on the "How to Reach Us" page.

Beginning next month, we will be sending out updates by email to clients who are interested in getting the latest news from our practice. This will be a simple email text message, designed to let clients know of any special news, horse health alerts and happenings. If you would like to receive the email news, just send an email to info@thalequine.com to request this. You can also check the "What's New" page on the web site for the latest news.



FALL SPECIALS

Anyone can learn to vaccinate their horses. Vaccinating a horse is not difficult to do. Why do we continue year after year to encourage you to do the spring and fall specials? Here are the top reasons you should let us see your horses twice annually. Think of it as basic maintenance.

- It is a chance for you to discuss your horse and his care with your vet. We take 5 to 10 minutes per horse and really look at the horse with you and discuss every aspect of care.
- Your vet gets to see and know your horse in good health, see how you manage him, see how he is housed. Included in the fall special is a brief exam and dental exam. This is our time to do a brief lameness exam, talk to you about your hay or discuss any other question you might have concerning your horse and his care.
- Dental exams are an important part of horse health maintenance.
- We do the research and provide for you the most effective and safest vaccines. Vaccines are not all equal. You can be sure that when we vaccinate your horses, they are as well vaccinated as they can be. We regularly see people wasting money on vaccines they don't even need, or that don't work, and not using vaccines that are essential.

- We provide you with a parasite control program that works and is not more or less than you need.
- PreventiCare clients are required to have their horses seen twice annually, so they automatically get the equivalent of a spring and fall special.
- The fall special is timed to coincide with post-frost fall worming. Included in the special is ivermectin liquid, which kills bots and is a good broad spectrum wormer. We can customize the special as best fits your horses and management.
- The fall special includes Calvenza™ vaccine for equine influenza and rhinopneumonitis. We feel that this is the best flu/rhino vaccine available. It is only available through veterinarians. The vaccine is given IM initially, but subsequently can be given either IM or intra-nasally. The studies have supported six months of protection, which is superior to other vaccines on the market.
- Recent research has shown that the modified live rhino vaccine offer the best protection against neurologic forms of rhino. Modified live flu/rhino vaccine is an additional option in your fall special.
We provide stable discounts for larger numbers of horses at the same location.

**FALL/WINTER CLINIC HOURS BEGINNING OCT. 31: 8-4 Monday-Friday; 8-12 Saturday
24-HOUR EMERGENCY SERVICE. PHONE: 505-737-5322; Outside of Taos 888-737-5322**

2005 FALL SPECIALS

Service	Cost (1)	Cost 5 or more	Cost 10 or more
Fall Special #1 - Routine: Flu/rhino, deworming with Ivermectin spray, brief exam, dental exam	\$58	\$53 each	\$48 each
Fall Special #2 - Intra-nasal flu, Rhino vaccination, deworming with Ivermectin spray, brief exam, dental exam	\$68	\$63 each	\$58 each

If you prefer doing the vaccinating yourself, we can provide you with the best vaccines at competitive pricing. Call the clinic to discuss the most effective and cost effective preventative medicine for your horses.

Deworming options – Ivermectin spray included in specials. If you choose Equimax paste or Quest Plus for tapeworms, add \$8 to the prices at left.

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