

VACCINATIONS



EI/FLU (EQUINE INFLUENZA)

Flu is a highly contagious virus that affects the respiratory system. Horses usually develop symptoms 1-5 days after contracting the virus which include high temperature (above 38.6C), cough, nasal discharge, enlarged glands, conjunctivitis, depression, loss of appetite and swelling of lower limbs. Although most horses recover in a few weeks to months, if a horse's immune system is weakened or naive to the virus (i.e. unvaccinated), the disease can quickly deteriorate into life threatening bronchitis or pneumonia and leave them susceptible to other infections with the potential to cause long-term side effects.

Horses can contract the disease from direct contact with an infected horse or from contamination in the environment and air (in favourable weather conditions, it can spread up to 5km).

There are different strains of the influenza virus, **Proteq** is the only vaccine currently available in the UK to contain the 'Florida clade 1' strain which is thought to be the biggest flu risk to the UK. As seen in the Flu outbreak in early 2019, the vast majority of horses with serious flu symptoms were unvaccinated horses.

We know the vaccine gives the most protection within the first 6 months and so for any competition and race horses we recommend vaccinating every 6 months.

Equine Influenza vaccination schedule

First Injection	
Second Injection	21-92 days after first injection
Third Injection	150-215 days after second injection
Booster	Annually (Depending on the competing body, this may be required to be more frequently. For at risk horses or during a Flu outbreak a 6 month booster is also advisable)

Regular vaccinations ensure your horse's immune system has maximum protection to fight infectious diseases. We strongly recommend that all horses are vaccinated against equine influenza and tetanus.

IMMUNE MODULATORS

Zylexis is a product which has gained some support across the frequently jet setting sport horse world. Not a vaccine in itself, it is based on a killed Parapox virus, which is similar in structure to Herpes viruses particularly those causing respiratory disease. The role of this modulator is to prime or awaken the immune system to recognise such viruses and create an effective response, which should help equip the immune system when it does encounter a herpes virus. There is no withdrawal period prescribed for this product.

EHV (EQUINE HERPES VIRUS) (AKA Rhinopneumonitis)

There are several different types of herpes virus; we most commonly we see EHV-1 and EHV-4 and these are the types that we vaccinate against. **We recommend this vaccine for competition and racehorses. Since the widespread use of both Flu and EHV vaccine in most of our competition yards, we see much less viral disease – loss of form in a yard is now more likely a forage issue.**

EHV-1: usually causes respiratory disease but can also causes abortions and neurological disease.

EHV-4: causes a respiratory disease which is usually mild.

Respiratory disease: EHV-1 and 4; common in young stock, signs include snotty nose, cough, fever and reduced appetite.

Abortion: EHV-1 (and occasionally 4) can cause abortion, stillbirth or birth of sick, weak foals. Abortions can occur in 'storms' where up to 50% of mares lose their foals.

Neurological disease: is rare and can occur with a variety of signs from mild muscle weakness in the hindlimbs to paralysis of the bladder, collapse and generalised paralysis leading to euthanasia.

EHV-3: a less common venereal disease in mares and stallions.

Equine Herpes vaccination schedule

First Injection	
Second Injection	4-6 weeks after first injection
Booster	Every 6 months*
* mandatory for racing in France, but follow the Equine Influenza vaccination protocol with annual boosters	
Pregnant mares are vaccinated at 5,7 and 9 months of gestation	

SUMMERHILL EQUINE VETERINARY PARTNERSHIP LLP

THE VETERINARY OFFICE, SUMMERHILL FARM, NAUNTON, CHELTENHAM, GLOS. GL54 3AZ

T: 01451850086 E: office@summerhillequine.co.uk W: www.summerhillequine.co.uk

Buffy Shirley-Beavan: 07831698976

Tim Beauregard: 07881552052

Kevin Bishop: 07562601799

Emma Marecki: 07850981229

Steven Walsh: 07397971221

Ollie Timms: 07789512029

TETANUS

Tetanus is can be a fatal disease caused by a toxin produced by the bacterium *Clostridium tetani* which can be found in soil. Once it contaminates a wound, it can take 7-21 days to show symptoms. Symptoms usually start by becoming increasingly sensitive and nervous to movement and touch, they go onto develop a stiff gait and muscle spasms, protrusion of the third eyelid, raised tail head and eventually horses have severe muscle spasm in the jaw and neck preventing them from eating and eventually unable to move and die from respiratory and heart failure. Because this is a disease contracted from the environment, we advise all horses are vaccinated, even those that don't travel or mix with other animals. Approximately 90% of unvaccinated horses who contract tetanus don't survive. Tetanus vaccine is often combined with the influenza vaccine, but if given by itself it should follow the following schedule:

Tetanus vaccination schedule	
First injection	
Second Injection	4-6 weeks after first injection
First Booster	12 months after second injection
Boosters thereafter	Every 2 years

EVA (EQUINE VIRAL ARTERITIS)

EVA is a virus spread between horses during mating or teasing via infected semen, contact with aborted fetuses or placentas or via the respiratory route. Signs include fever, depression, abortion, swelling of lower limbs, scrotum and mammary glands, conjunctivitis, nasal discharge and nettle rash and can occasionally be fatal. Stallions can become life-long shedders in their semen without any clinical signs.

Vaccination is carried out in the sport horse population but is not routine in the European TB population. All mares and stallions are screened for EVA antibodies in blood samples before the breeding season commences.

ROTAVIRUS

This is a very common virus and although often found in faeces, it does not always cause disease. The disease is more common in foals less than 6 months old (1-3 months old are most commonly affected). Signs include lethargy, poor appetite, bloated abdomen, diarrhoea and sometimes fever.

Vaccination can be given to pregnant mares during 8th, 9th and 10th month of pregnancy. This increases the antibody to rota virus in the mare's colostrum and therefore helps to protect the foal.

VACCINE REACTIONS

These are uncommon and can vary in severity. The general protocol is an easy few days post vaccination. The most common side effect is some short-lived swelling and soreness in the muscle where the vaccine was administered and/or filling of the lower limbs. Severe reactions can require treatment especially if the horse is reluctant to drop its head to eat. Very rarely they may develop urticaria (hives), colic, or anaphylaxis.

If your horse does react to a vaccine, generally it tends to be by one type of vaccine, so we can try to address this and then vaccinate into a different muscle site to minimize the impact of any swelling and soreness.

Any vaccine reaction needs to be reported to the drug company, so let your vet know if you suspect your horse is having a reaction.

COMPETITION RULES

No horse should be vaccinated within the 7 days before an event and are covered from 7 days after their second vaccination in a primary course (starting or re-starting). Rules do change so make sure you check the up-to-date advice and if necessary, contact the competition or your vet.

FEI: standard primary course of Flu and annual vaccinations PLUS a booster vaccination must have been given within 6 months +/-21 days of the competition.

BHA: Flu vaccine should be given within 9 calendar months of the day of the race (8 months plus 1 month grace period). A revision of these rules is due to be implemented in 2021 as shown below.

	Current interval	Proposed interval
V1		
V2	21 – 92 days	21 – 60 days
V3	150 – 215 days	120 – 180 days
Booster interval	Not more than one year apart	Not more than six months apart

LAWSONIA INTRACELLULARIS

Is a relatively new disease recognised primarily in weanlings. Has long been associated as a major loss of production in pigs. This bacteria attacks the inner wall of the large intestine, leading to diarrhoea, fluid and protein loss, poor appetite and weight loss. Treatment can be successful with antimicrobials and supportive fluid therapy. Vaccination has been successfully used over the past 7-8 years in the form of an off licensed pig vaccine which is administered as an enema. Vaccination is indicated in farms where Lawsonia has been previously diagnosed.



Photo from AHF.org.uk

WEATHERBY'S APP

Weatherby's have recently launched an E-Passport vaccination app to allow digital records for registered Thoroughbreds. This will allow for notification of due or expired vaccines, issuing certificates for lost passports and providing pre-clearance for raceday. More information is available on their website.

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