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Equine Technical Bulletin

West Niles Virus Update:

The West Niles Virus was isolated from birds in Shelby County and from a horse in Lee County, MS in September. No cases in horses have been reported in Tennessee. As of September 17, the USDA-APHIS has confirmed a total of 112 cases in 12 states and estimates the mortality rate in these case at approximately 25%.

When you review this update, please temper your response with the knowledge that we have no estimate about the infection rate of WNV in horses since only horses with clinical nervous system disease are being tested for the virus. It is estimated that most horses infected will show minor Flu-like signs or clear the virus asymptotically. Also the reported 25% mortality rate is down from the 38% mortality rate reported in August.

For now, my vaccination recommendations for the WNV remain the same as published in my previous letter (WNV, dated 30 Aug 2001). The Fort Dodge Vaccination is under Conditional License, and I recommend vaccinating horses of high emotional or economic value and horses travelling into endemic areas. Since the WNV has entered the Midsouth faster than I expected, I will probably change my vaccination recommendations starting next spring to include the WNV Vaccination for all horses.

Equine Protozoal Myeloencephalitis Vaccination:

The Fort Dodge *Sarcocystis neurona* Vaccine remains under USDA Conditional License. I discussed **EPM** in the ACH Newsletter dated December 2000 and still do not recommend routine use of this product. For more information about EPM, the Vaccine, or your specific situation, please call the Hospital.

Pregnant Mares:

Broodmare owners are reminded of the disaster that Fescue Toxicosis causes. Remove all Fescue forages (including hay) from your mare's diet 3 months prior to the expected foaling date. Less than 10% Fescue in a mare's diet has caused abortions. If you are unsure of whether or not you have Fescue in your pastures follow Stephen's Rule of Thumb: If you live in the Midsouth and see anything green in your pasture during the cool season (Nov-Mar), it is probably Fescue. An antidote to Fescue Toxicosis is available, but prevention is the best cure for this disease.

Abortive Rhinopneumonitis is also present in the Midsouth. Avoid contact between broodmares and unfamiliar horses. Vaccinating the mare against Abortive Rhinopneumonitis is recommended at 5, 7 and 9 months of gestation.

Information on Fescue Toxicosis, Vaccinations, and Broodmare & Foal Care is available at the Hospital.

Nutrition & Stockpiling Winter Forage:

Those of us growing pasture this year have been blessed with rain, while those baling hay have been cursed. Quality forage, not grain, is the primary ingredient in a horse's diet. Ideally, horses should be allowed to graze pasture. The next best alternative is free choice hay. Meal feeding horses is not recommended, but is sometimes required. If hay is a horse's only source of roughage, I plan for 30 to 40 pounds of hay per horse per day (@ 1/2 Sq. Bale/ horse/ day). Horses should only be fed enough grain to maintain body condition. The general rule of thumb is 1 lb. of grain per 100 lbs. body weight, not to exceed 9 lbs. per day. As with all people and animals, on a horse in good condition you should be able to feel ribs but not see them. Adding a loose mineral to your horses diet will increase water intake and may prevent colic impactions during cold weather. Placing a heater in your tank will also help increase water intake during cold winters, as well as prevent freezing. I strongly encourage owners of Senior Horses (18yrs+) to feed a Commercial Senior Diet to ensure that all nutritional requirements are being met.

If you have any questions, concerns, or suggestions, please call the hospital. Our job is serving you and your animals!