



VET NOTES

DECEMBER 2005

Previous VET NOTES

- November 2005 - Strangles
- October 2005 - The “dummy” foal
- September 2005 - New medications
- August 2005 - Extracorporeal shockwave therapy (ESWT)
- July 2005 - Vaccination recommendations
- June 2005 - The advantages of high fat/low carbohydrate diets for horses
- May 2005 - The Hoof: Form and function
- March 2005 - Liquid gold
- February 2005 - Breeding the problem mare
- January 2005 - Condylar fractures
- December 2004 - Early diagnosis and treatment of high-risk pregnancy in the mare
- November 2004 - Know your horse
- October 2004 - White Line Disease
- September 2004 - Announcements
- August 2004 - Reminders for pregnant mare management
- July 2004 - The heat is on
- June 2004 - Equine first aid
- May 2004 - Bacterial pneumonia in foals

Affording the unhealthy horse

Fortunately we are able to save and improve the lives of horses in ways which were not possible many years ago. This is due to two primary factors: the first is improved education of the horse owner, and the second is improved technology, techniques, and medications available to the veterinarian. As with anything new and improved, it has also become more expensive to provide the best care for your horse.

There are several options available to most horse owners to help make the best care affordable, however, frequently the time when the owner needs it the most—usually an emergency—is often not the time to figure it out. This is either because some of the options require prior planning or because the mental capacity of the owner due to stress is already overloaded.

Preventative care plans

One of the most common and most expensive emergency situations for horses is colic requiring surgical intervention. The theory is that although there are some types of colic that cannot be prevented by any means, there are many colics that may be prevented through appropriate routine health care. Currently there is only one program available, and it is through Pfizer and is called Preventicare. It requires the veterinarian to perform an annual physical examination, dental examination, and nutritional consultation. The horse must be vaccinated as recommended, maintained on Strongid C, and dewormed twice annually with Equell or Equimax. If the horse requires surgical intervention, Pfizer will pay up to 5000.00 towards the bill. Certain horses are excluded if they have had previous colic surgery, have a history of chronic colic, have had a colic episode in the last year, or are less than months old or older than 20 years old.

Equine insurance

Equine insurance is available to cover a variety of emergencies, as well as many non-emergencies such as lameness work-ups and elective surgeries. There

(Continued on page 2)

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are several different levels of insurance to choose from. The most basic form of coverage is mortality insurance. This means that if the horse dies for any reason (illness, act of nature, complication of illness, etc) the owner receives the amount the horse was covered for. This does require documentation as to the cause of death (an autopsy) and proof that any care needed up to the time of death was properly provided. The most common form of coverage is major medical coverage which is always in addition to mortality coverage. This covers both emergency and non-emergency medical conditions. Coverage for surgery only is also available. Insurability is based on an examination performed by a veterinarian and benefit payments require communication about the horse's medical condition with the insurance company.

Animal health care lending companies

Certain companies are specifically concerned with providing credit for animal health care expenses. The company most familiar with the equine industry is CareCredit. They offer low interest short term loans and longer term loans at rates comparable to most credit cards. Credit approval is required but is usually very efficient and accounts may be established prior to actually needing the loan for no charge.

Summary

There are several options available to assist the horse owner with medical bills. There are a couple of basic important points to keep in mind. The first is to remember that even though assistance is available, many forms of assistance do not work through third party payment. This means that the owner is responsible for the bill and then is reimbursed. The other critical factor is for any owner to remember that horses are not inexpensive, and sometimes this means that a decision to take on the responsibility for an animal should be thought out carefully.

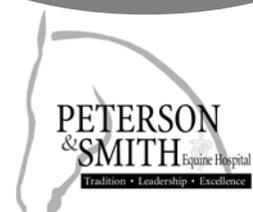
Announcements

We would like to thank the horsemen and women who attended the Second Annual Peterson & Smith Horseman's Seminar on November 19 & 20, 2005, and our sponsors who helped make it possible. Once again three renowned guest speakers presented the latest information on their respective field of expertise, and shared their insights at this educational opportunity for horse owners; and our sponsors were there to help with questions on feed, medications, supplements, and equine building products.

For those of you who attended, we hope that you enjoyed the seminar and will join us again next year. For those of you who were not able to attend we hope that you will be able to do so next year. Pencil in the dates in your calendar—The Third Annual Horseman's Seminar, Saturday and Sunday, November 18 & 19, 2006.

- April 2004 - Digital radiographs
- March 2004 - Colic in the post-foaling broodmare
- January 2004 - Lameness and poor performance
- December 2003 - Internal parasites - the hidden battle
- November 2003 - Equine tapeworms - The forgotten parasite
- October 2003 - Blister beetle poisoning
- September 2003 - The horse owners' role in wound care
- August 2003 - West Nile update: Broodmare vaccinations
- July 2003 - Stifle radiographs
- June 2003 - A newly emerging cause of diarrhea in weanling foals

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