

RECTORTOWN EQUINE CENTER
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Web site: www.rectortownequine.com

Spring 2007

The following are our current recommendations for vaccination and deworming.

VACCINATION

Eastern and Western Encephalitis – two viruses transmitted by mosquitos which can cause a fatal encephalitis (“sleeping sickness”). Due to the method of transmission, these viruses tend to cause problems during the warm part of the year. The time period is location-dependent (i.e. Virginia is June through September, Florida is March through November), and the vaccination should be most effective at this time. This is an annual vaccination unless there is an outbreak close to home.

West Nile Virus – a relatively new virus which is transmitted by mosquitos and carried by some birds. The virus causes an encephalitis similar to Eastern and Western Encephalitis. It is our aim to have horses protected before the onset of mosquito season. The vaccination has proven to be safe and effective. Bi-annual vaccination is required.

Tetanus – a bacterium found in feces and soil. It produces a toxin that can be a deadly contaminant of wounds. Yearly vaccination is required.

Equine Influenza – a highly contagious virus causing serious respiratory and heart disease. This can be given twice to four times yearly, depending on your horse’s exposure and the vaccination used. We recommend an intranasal vaccine which has a 6-month protection period with effective local immunity. There is also an intramuscular vaccine with 2-3 months of protection.

Equine Herpes Virus – a virus which can cause abortions, neurological, and upper respiratory disease, also known as Rhinopneumonitis or Rhino. Of concern for horses that are exposed to groups of horses whether by boarding, showing, competing, training, racing or traveling. This vaccine should also be given to pregnant mares at 5, 7, and 9 months of gestation.

Rabies – a deadly virus, which is an increasing problem in Virginia. Transmission can occur from unvaccinated domestic and wild animals to both horses and humans. Foals can be vaccinated between 4 and 6 months of age and annually thereafter; adults annually.

Lyme Disease – a disease carried by ticks which can affect muscles, joints and the heart of horses. A vaccine approved for use in dogs has been thought to be effective in the horse, and may be warranted in certain circumstances, i.e. heavy exposure to ticks or known Lyme Disease in your area or on your farm. The vaccine is given annually.

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Vaccinations are also available for Strangles, Potomac Horse Fever, and Botulism. We do not routinely use them, but there are certain occasions for which they may be indicated.

Please be sure to call the office or speak with the doctor during a visit if you have any questions regarding your horse's vaccination needs. There is a lot of information out there, so let us help you make sense of it!

The vaccines we recommend allow us to provide each horse with the optimum vaccination protection to meet his needs without excess. At this time we use one multivalent vaccine ("4-way") which includes Eastern and Western Encephalitis, West Nile Virus and Tetanus. Rabies, Equine Influenza and Rhino are added as needed, according to the schedules below:

Program for horses with high levels of exposure or heavy training:

SPRING (late March/April): Eastern and Western Encephalitis/West Nile/Tetanus (4-way)
Rabies
Intranasal Flu
EHV1&4
FALL (October/November): West Nile Virus
Intranasal Flu
EHV1&4

Program for horses with little exposure:

SPRING: Eastern and Western Encephalitis/West Nile/Tetanus (4-way)
Rabies
Intranasal Flu
FALL: West Nile Virus
Intranasal Flu

Program for foals:

5 MONTHS: Rabies
6,7, 8 MONTHS: Eastern and Western Encephalitis/West Nile/Tetanus (4-way),
EHV1&4
10 MONTHS: Intranasal Flu

Please keep in mind that foals will need the appropriate boosters for their first vaccinations 2-3 weeks after the first dose. **Adult horses being vaccinated for the first time for any disease must also receive these boosters.**

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Program for Pregnant Mares:

5, 7, and 9 months gestation: Rhino (Pneumabort-K)

10 months gestation: Eastern and Western Encephalitis/West Nile/Tetanus (4-way)

Rabies

Botulism under certain circumstances.

DEWORMING

The following eight-week rotational schedule should help keep your horses free of intestinal parasites.

JANUARY: Ivermectin

MARCH/APRIL: Tapeworms are the biggest concern at this time and we recommend Quest Plus Gel (moxidectin/praziquantel) available through our clinic.

MAY: Strongid C or Strongid C 2x daily throughout the summer, starting in May. It is advised to continue this through the fall and early winter.

JULY: Continue Strongid C or Strongid C 2x as above.

SEPTEMBER: Regular Quest Gel (moxidectin)

NOVEMBER: Continue Strongid C or Strongid C 2x as above. May want to give ivermectin for bots 14-21 days after the first hard freeze.

Additional information is available on our web site :

www.rectortownequine.com