

Getting ready for the wet season

Tableland Veterinary Service Pty Ltd

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With our summer months upon us HEN spoke with Dr. Frank Condon, an experienced equine veterinarian, to ask for clarification on the main equine health issues that we face at this time of year in the Tropical North.

From November to March, large areas of Northern Australia become wet! The wet season often follows a significant dry period and horses become susceptible to a large number of conditions.

Infectious conditions include 'Rain Scald', 'Greasy Heel Syndrome' and a common non-infectious problem is 'Queensland Itch'.

Infectious conditions

"Rain scald" and "Greasy Heel"

Both these conditions are associated with bacteria called *Dermatophilus congolensis*. The conditions are associated with wet conditions, long rainy periods and can occur at any time of the year although we do tend to see them more in the wet season and sometimes on the Atherton Tablelands during rainy winter months.



'Rain scald' occurs mostly over the back and rump and extending down over the neck, shoulder and flank, but can occur anywhere that the water runs over the body. Typically this occurs when conditions are warm and humidity is high. The hair becomes matted and stiff and if a curry comb is used vigorously, little matted clumps of hair with a little moist scab may come off exposing a small area of pus and the bare skin underneath the lesions. The problem can be widespread over the whole of the upper body in severe cases and occasionally the same lesions are seen on the cannon bone as well. In really severe cases the horse can become lethargic and unwell though



in most cases the infection is superficial. The lesions are not usually itchy although horses can become irritable, particularly when removing the scabs.

'Greasy Heel' can be complex and associated with multiple overlapping problems. It is not really a specific disease and is more a 'syndrome'. It is associated with the same bacteria as rain scald and is found on the lower legs and pasterns of



horses that are standing in water, mud or wet grass. There is often a component of inflammation. In some cases in horses with white socks, there is a secondary photo dermatitis and vasculitis that can make these very difficult to treat. There are scabs similar to rain scald although the lesions often appear more painful and the skin can be red and inflamed. If other bacteria are involved (such as *Staphylococcus* spp.), a chronic pastern folliculitis can occur that can affect the bulbs of the heels as well. It appears to occur more on white socks but can occur on any horse.

Treatment:

Povidone-iodine (Vetadine) or chlorhexidine (hibitane) antiseptic washes can be used to soften and remove the scabs and matted hair. The antiseptic should be applied and scabs removed using a gentle scrubbing brush. Many people use their fingers to gently locate and remove the scabs in small areas. The antiseptic should be left on for 10 minutes and should then be washed off and the legs or back dried carefully using a soft cloth. In many cases this is all that should be done. Some creams can tend to keep the area under them moist so should be avoided, though in some cases the skin dries out and the area can crack; in these cases Aloe Vera or Vitamin E cream can be applied to the affected area. Greasy heel can be quite resistant to treatment and an antibiotic cream (cloxacillin) can be very effective to clean up resistant lesions. This is an S4 drug found in some eye creams and intramammary creams for cattle so can only be purchased from a veterinarian. In severe cases we have stabled horses or even used leg 'bloomers' to try to keep the sunlight off the area to help manage the photo dermatitis.



There are numerous other treatments that are available over the counter but most horses respond well to removal of the scabs, drier conditions and antiseptic washes. If this does not appear to be working, then a veterinarian should be contacted for further advice.

Non-infectious

'Queensland itch'

Queensland itch is one of the most common conditions that veterinarians see in the wet season but is one of the most poorly understood. Often by the time we get asked to see the horse, the condition is severe and owners have used multiple treatments without success. Queensland itch usually occurs along the top of the neck, back and tail base. The skin is thickened and wrinkled with some hair missing; in chronic cases there may be large bare areas and scar tissue and in severe cases the horse may mutilate itself with open, raw bleeding areas. It can be intensely itchy and irritating. The condition is rare in young horses or foals, develops around 4-5 years of age and worsens with age. It is seasonal and gets worse with each progressive season. The most important thing to note is that it is a hypersensitivity or allergy. It is caused by the biting midge 'Culicoides' spp. and each species of midge bites a different area on the horse so that there are back biting midges, tail biting midges and belly biting midges (this is true!). The midges bite all horses but only some horses have a hypersensitivity or allergy to the midges. This is important to understand when it comes to treatment and the most important



thing that owners need to understand is that Queensland Itch is a chronic long-term condition. In these allergic conditions, ONE MIDGE BITE is enough to make the horse mutilate itself all along its back for up to 2-4 weeks. This means that it is very hard to control, as it is almost impossible to stop ALL bites on the allergic horse. Owners often put sprays on for a couple of weeks, think it doesn't work so they stop and move to something else. It will take a couple of months for the allergy to settle down, assuming there are no more bites in that time. Control is based on sprays, full head and ear rugs, soothing shampoos and determination from the owner (and in severe cases corticosteroids from the veterinarian)

Sprays with permethrin in them (Permethrin, Brute, Swift, Fly-Away are examples) are the best way of treatment. These need to be sprayed or sponged on at least weekly (remember one bite will start the problem all over again) but probably 2-3 times weekly would be better.

A full rug (particularly at dawn and dusk when the midges do most of their biting) is important. A soothing shampoo (Pine Tarsal is quite good or a conditioning shampoo) once a week is also helpful. Vetadine antiseptics are not useful, tend to dry the skin out making the itch worse, so we suggest that this is not used unless there are secondary bacteria (unlikely). Owners need to be consistent and determined. If one spray session is missed then the allergy will be back to the start! In severe cases where the horses are literally rubbing off or biting off their skin, then medical assistance is



required. A veterinarian can prescribe corticosteroids to help manage the intense itch while the horse owner can begin a management program to reduce the amount of biting and then reduce the reliance on corticosteroids. In many cases, the corticosteroids give a dramatically good result, but it is important to remember that this is not a cure: there is really no cure, just really good management.

There is a program of desensitization that can be undertaken by dermatologists, but this is rarely undertaken because access to veterinary dermatology specialists is not easy to get and because the program is quite expensive with only a 50% success rate, but advice for this can be sought from your veterinarian.

TVS has been providing equine veterinary services to the Far North for 35 years. Dr. Frank Condon (a member of Equine Veterinarians Australia) can offer a full equine service with the diagnosis and treatment of your horse's ailments; he has completed advanced training to specialise in equine surgery, lameness evaluation, equine reproductive support (AI) and equine dentistry. With a purpose built equine hospital based at Malanda and a service offering mobile x-ray diagnosis, TVS are well equipped to look after your horse's health and wellbeing.



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