



**Irongate Equine
Clinic**

VACCINATION RECOMMENDATIONS

Vaccinations or immunizations are given to help prevent or lessen the severity of life threatening or infectious diseases. Vaccination recommendations are based on the age of the animal and the animal's exposure level to potential infections. This handout covers general information for each of the diseases that horses are routinely vaccinated against.

The American Association of Equine Practitioners (AAEP) considers the following equine vaccines to be "core" vaccines and therefore strongly recommended for all horses:

Tetanus, Eastern/Western Equine Encephalitis, West Nile Virus, and Rabies. Core vaccinations are defined as those "that protect from diseases that are endemic to a region, those with potential public health significance, required by law, virulent/highly infectious, and/or those posing a risk of severe disease. Core vaccines have clearly demonstrated efficacy (effectiveness) and safety, and thus exhibit a high enough level of patient benefit and low enough level of risk to justify their use in the majority of patients."

For specific recommendations for your horses (including broodmares and young foals), please consult with Dr. Nesson or Dr. Ketover.

TETANUS – Annual vaccination, generally given in the spring in combination with Eastern & Western Encephalitis virus vaccine

Tetanus is a condition that is caused by the bacteria, *Clostridium tetani*. Tetanus is fatal in greater than 90% of horses. The bacteria that causes tetanus is found in the soil so all horses are exposed to it every day. It is not contagious from horse to horse. ALL HORSES SHOULD BE VACCINATED FOR TETANUS!

EASTERN & WESTERN ENCEPHALITIS – Annual vaccination, given in the spring prior to mosquito season

Eastern and Western Encephalitis are two mosquito borne diseases that affect the horses' brain and cause life-threatening neurologic (brain) disease in some horses. Affected horses that survive may have permanent brain damage that may limit their usefulness as performance, pleasure or breeding animals. The viruses are not contagious from horse to horse. If your horse is traveling in the southern United States year round, you should consider having your horse vaccinated twice a year due to continued mosquito exposure in the southern climate. ALL HORSES SHOULD BE VACCINATED FOR EASTERN & WESTERN ENCEPHALITIS VIRUS.

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WEST NILE VIRUS – Annual vaccination, given in the spring prior to mosquito season

West Nile virus is spread by infected mosquitoes. The virus causes neurologic (brain) disease in horses that results in death in a third of the horses affected. Horses that survive West Nile viral infections may have permanent neurologic impairment that limits their usefulness as a performance, pleasure or breeding animal. The virus is not contagious from horse to horse or horse to human. ALL HORSES SHOULD BE VACCINATED FOR WEST NILE VIRUS. HORSES IN ENDEMIC AREAS SHOULD BE VACCINATED SEMI-ANNUALLY.

RABIES – Annual vaccination

Rabies is a viral disease that is universally fatal in any animal that contracts the disease. It is spread through the saliva (bite wounds) of an infected animal. The disease is relatively rare in horses but could occur if the horse has been bitten by an infected animal (ie raccoons, opossums, dogs, coyotes, etc.). The disease can be transmitted from an infected horse to a person. The vaccine is one of the most effective vaccinations available. It is also very safe (few reported reactions and side effects). ALL HORSES SHOULD BE VACCINATED FOR RABIES.

EQUINE INFLUENZA & EQUINE HERPES VIRUS (RHINOPNEUMONITIS) – Generally semi-annual vaccinations, given in the spring and fall

Equine Influenza is a viral disease that causes significant respiratory disease in susceptible horses. Affected horses typically run high fevers, develop a dry, hacking cough and may have a watery nasal discharge. This is a highly contagious disease and can be spread rapidly from horse to horse. The virus is spread through the air as well as through the respiratory secretions (coughing, nasal discharge) of infected horses. ALL HORSES THAT TRAVEL OR THAT ARE IN CONTACT WITH HORSES THAT TRAVEL SHOULD BE VACCINATED SEMI-ANNUALLY FOR EQUINE INFLUENZA.

Equine Herpes virus (EHV-1 & 4) or rhinopneumonitis virus causes respiratory and neurologic disease in addition to abortions. The vaccines that are available for equine herpes virus are only affective against the respiratory form of the virus and the form of the virus that causes abortions. Currently there is no vaccine that will protect against the neurologic form of this virus. The respiratory disease that is caused by this virus is typically milder than that caused by the influenza virus but it is equally as contagious horse to horse. Most horses are infected at a young age. Abortions caused by this virus may follow an outbreak of the respiratory disease and are typically late term abortions or result in premature births of infected, non-viable foals. Rhino vaccinations should be given annually to all horses or semi-annually to all horses less than five years of age or in high risk environments or age groups (<5 years or >15 years of age). ALL HORSES THAT

TRAVEL OR ARE IN CONTACT WITH HORSES THAT TRAVEL OR IN CONTACT WITH PREGNANT BROODMARES SHOULD BE VACCINATED FOR EQUINE HERPES VIRUS 1 & 4.

Broodmares should be vaccinated with either Pneumabort K + 1b or Prodigy at their (3rd), 5th, 7th, and 9th months of pregnancy.

STRANGLES – Annual vaccination except in the situation of high exposure or outbreak

Strangles is a bacterial disease that is highly contagious horse to horse through direct contact between horses or contact with the nasal discharge and abscesses of infected horses. It can affect a horse more than once during its' lifetime. This disease is typified by abscess formation in the lymph nodes in the horse's throatlatch region. Secondary complications do occur in some horses following a strangles episode. These include bastard strangles and purpura hemorrhagica. The majority of horses that develop strangles survive without complications. The vaccine used by Irongate Equine Clinic is a modified live intra-nasal vaccine. This vaccine is more effective and has fewer complications than the killed intra-muscular vaccines. ALL HORSES THAT TRAVEL OR ARE IN CONTACT WITH HORSES THAT TRAVEL OR ARE GOING TO A FACILITY WITH A RECENT/CURRENT HISTORY OF STRANGLES SHOULD BE VACCINATED FOR STRANGLES.

POTOMAC HORSE FEVER – Semi-annual vaccination given in early spring and again in early fall or late summer

Potomac Horse Fever is a disease characterized by fever, depression, diarrhea and laminitis. It is not contagious horse to horse although farms or geographic regions with a history of the disease are likely to have additional cases in future years. The disease is seasonal, occurring between late spring and early fall in temperate areas, with most cases in July, August, and September at the onset of hot weather. The vaccinations, if used, should be given in the spring (March or April) and again in late summer/early fall (August) in order to provide the best protection. The vaccination may not protect the horse from the disease but it may lessen the severity or shorten the course of the disease.