

Description of Targeted Diseases

Core

Tetanus is an extremely serious disease of the central nervous system that has a high mortality rate in horses. The bacteria causing tetanus, *Clostridium tetani*, is found in soil worldwide, and therefore every unvaccinated horse is a potential victim.

Eastern & Western Encephalomyelitis are mosquito-borne, viral infections that can cause severe encephalitis in horses and humans with a case fatality rate as high as 90%.

West Nile Virus is a mosquito-borne disease that causes inflammation or swelling of the brain and spinal cord. One in three clinically infected horses will die.

Rabies is caused by a *lyssavirus* that infects the nervous system and salivary glands and is almost always spread directly between animals through saliva. It is important to vaccinate against rabies as it can be spread to humans. Rabies is 100% fatal in horses and humans.

Risk-Based

Equine Influenza is caused by strains of Influenza A that are endemic in horse species. It is characterized by fever, a dry hacking cough, runny nose, depression, and reluctance to eat.

Rhinopneumonitis (EHV 1 & 4) is a viral respiratory disease caused by the equine herpes virus, common in areas of high horse concentration. EHV-1 can cause abortion in pregnant mares.

Potomac Horse Fever generally occurs in mid to late summer and is caused by the bacteria *Neorickettsia risticii* which is carried by aquatic insects. It is a serious disease marked by colitis (diarrhea), fever, depression, poor appetite, and severe laminitis.

Strep (Strangles) is caused by the bacteria *Streptococcus equi equi* and is generally a disease of the upper respiratory system but may affect lymph nodes in the thorax and/or abdomen.



Precautions:

Mild side effects may occur a few hours to one day after your horse has been vaccinated. The following signs are normal evidence that an immune response has been stimulated.

If any of the following side effects persist for more than 24 hours, please call your veterinarian:

- Local muscle soreness or swelling
- Fever
- Loss of appetite
- Lack of energy or alertness

A small risk of anaphylactic reactions can occur. Call your veterinarian immediately if the following more serious side effects occur, as these can be life-threatening:

- Hives
- Facial swelling
- Bleeding rash
- Prolonged muscular swelling
- Difficulty breathing
- Colic
- Collapse

The small risk of vaccine side effects is greatly outweighed by the benefit of protection against serious disease.

Please speak with your veterinarian regarding your concerns.



Vaccination Guidelines



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Vaccines aid in the prevention of disease by safely stimulating your horse's immune system to fight infection. The diseases vaccinated against have the potential to negatively impact your horse's health and performance, many of which are life-threatening. While no vaccine can claim 100% efficacy, vaccination, coupled with good health management, greatly improves the health of your horse.

Vaccines that help to prevent serious, often fatal diseases that are of particular risk to most horses are categorized as core vaccines. **Core vaccines are highly recommended for all horses, regardless of their status.** Other risk-based vaccines may be recommended based upon the horse's individual needs. For instance, horses attending horse shows or stabled with horses that do so may be considered high risk for communicable diseases such as equine influenza, equine herpes virus (rhino) and strangles.

Timing of vaccination is important to insure optimal immunity coincides with the greatest risk of exposure to the particular disease. In our area, vaccinating in the spring offers the best protection against West Nile virus and eastern and western encephalomyelitis as these diseases are transmitted by mosquitoes. Potomac Horse Fever vaccination may be best administered in late spring or early summer as this disease most commonly occurs from June through September.

Most vaccines require an initial series of 2 to 3 doses for the horse to achieve maximum immunity. Administering vaccine boosters to adult horses with unknown vaccination history may be indicated. Please note, the table below assumes that the adult horse and pregnant mare have already had the appropriate initial vaccine series. Foals born to unvaccinated mares may need to begin their vaccine series prior to the recommendations in this table.

Having your veterinarian administer your horse's vaccines assures proper storage and handling of the vaccine, that the vaccines are appropriate for your horse's individual needs, and in the rare case your horse suffers an adverse reaction your veterinarian is available to treat him or her and the vaccine company will fully back their product.

Recommended Vaccination Schedule

	Vaccine	Adult Horse	Pregnant Mare	Foal (born to vaccinated mare)
CORE VACCINES	Tetanus	Annual	Annual, 1 month prior to foaling	3-dose series: 1 st dose at 4 - 6 months of age, 2 nd dose 4 - 6 weeks after 1 st dose, 3 rd dose at 10 - 12 months of age.
	Eastern & Western Encephalomyelitis	Annual, Spring	Annual, 1 month prior to foaling	3-dose series: 1 st dose at 4 - 6 months of age, 2 nd dose 4 - 6 weeks after 1 st dose, 3 rd dose at 10 - 12 months of age.
	West Nile Virus	Annual, Spring	Annual, 1 month prior to foaling	3-dose series: 1 st dose at 4 - 6 months of age, 2 nd dose 4 - 6 weeks after 1 st dose, 3 rd dose at 10 - 12 months of age.
	Rabies	Annual	Annual, 1 month prior to foaling	2-dose series: 1 st dose after 6 months of age, 2 nd dose 4 - 6 weeks after 1 st dose.
RISK BASED VACCINES	Equine Influenza	High risk: Semi-annual, Low risk: Annual	Semi-annual, with one dose administered 1 month prior to foaling.	3-dose series: 1 st dose at 6 months of age, 2 nd dose 4 - 6 weeks after 1 st dose, 3 rd dose at 10 - 12 months of age.
	Equine Herpes Virus (Rhinopneumonitis)	High risk: Semi-annual, Low risk: Annual	5 th , 7 th and 9 th month of gestation	3-dose series: 1 st dose at 4 - 6 months of age, 2 nd dose 4 - 6 weeks after 1 st dose, 3 rd dose at 10 - 12 months of age.
	Potomac Horse Fever	Semi-annual to annual	Semi-annual, with one dose administered 1 month prior to foaling.	2-dose series: 1 st after 5 months of age, 2 nd dose 3 - 4 weeks after 1 st dose.
	Strep Equi (Strangles)	High risk: Annual to Semi-annual	Risk based. Semi-annual, with one dose administered 1 month prior to foaling.	Risk based 3-dose series: 1 st dose at 6 - 9 months of age, 2 nd dose 3 weeks after 1 st dose, 3 rd dose at 11 - 12 months of age.

*Some horses may require modifications to the above recommendations.
Speak with your veterinarian if you have any concerns.*