

## **Healthcare for your weanling:**

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As we approach the end of summer, many of the mare and foal pairs will be separated to yield new weanlings with their own new set of feeding and health requirements. Until now, hopefully, our involvement has included feeding and vaccinating the mare, and teaching the foal the rules of basic respect and horse etiquette. Our recommendations for routine care of the young horse begin around weaning time.

### **Feeding:**

Weaning can occur between 4-6 months of age, depending on the size and health of the foal, and the health of the mare. Ideally, the mare should maintain her weight through foaling and lactation, and it is likely that you will have had to increase her feed to nearly two times what you might normally feed her in order for her to produce enough milk to feed her foal. Foals start to nibble solid feeds at a week of age, however, their digestive tract is not able to truly digest and use forage as a sole feed source for several weeks. As they grow over the last few months they should have been introduced to hay, will have eaten pasture grass, and your choice of supplemental minerals. The transition to eating their own feed is often easier for the foal than losing the companionship of their mother. Some owners choose to feed nutritional supplements to weanlings for growth and performance. The most important elements to remember when feeding young horses are that they require a higher protein content, and calcium and phosphorus content in their feeds than do adult horses, and that they must be in balance with the amount of carbohydrates and fats that they are fed. It is important that the feed be of good quality, and equally important that it is fed in the right quantity. Overfeeding, or imbalanced feeding of young horses can cause serious developmental diseases of the cartilage and bones. Consult your veterinarian for the appropriate supplementation and mineral balance to avoid these problems.

### **Vaccinations:**

**The Mare:** Timing for vaccination of weanlings is dependant on the vaccination status of the dam. While pregnant, the dam should receive the killed vaccination for Equine Herpesvirus (Pneumobort is the trade name) at 3, 5, 7, and 9 months gestation. She should receive vaccinations for Eastern, Western, and Venezuelan Encephalomyelitis as well as Tetanus, which are contained in what we commonly call a "four way" vaccine, one month before foaling (10 months gestation). She can also be given a Equine Influenza, West Nile Virus vaccine, and a Streptococcus Equi (Strangles) vaccination at that time. The vaccinations that are important NOT to give to a pregnant mare include the live vaccine for Equine Herpes Virus and Rabies (should be given before breeding). Be sure when buying vaccines that you have the correct vaccinations if you are vaccinating your own pregnant mare.

The foal: If the mare has been vaccinated, her maternal antibodies will be transferred to the foal in her colostrum during the first 24 hours of the foal's life. These antibodies are protective for 4-6 months. These active antibodies can bind the vaccine components and prevent them from stimulating the foal's immune response, therefore, we recommend vaccinating foals that are born to these mares at 6 months of age, when the antibody levels gained from colostrum are declining. If the mare has not been vaccinated, we recommend that the foal be vaccinated with most vaccinations at 4 months of age, to stimulate immunity during this first period of stress and being weaned from its mother. Give the vaccinations 2-3 weeks before weaning to provide protection against the common viruses that cause illness in horses under stress. West Nile Virus vaccines and Strangles vaccines should be given earlier. The table below summarizes our recommended schedule. As mentioned earlier, the "4 way vaccine" includes Eastern Encephalomyelitis, Western Encephalomyelitis, Venezuelan Encephalomyelitis, and Tetanus. Equine Herpesvirus is abbreviated as "Rhino" for the virus for the viral disease rhinotracheitis that this virus causes, and is commonly sold with the Equine Influenza (Flu) vaccine. This is the vaccine that we have advised you not to give pregnant mares.

**Example of weanling vaccination schedule:**

	2 mo	3 mo	4 mo	5 mo	6 mo	7 mo	8 mo	9 mo	10 mo	11 and 12 mos
Foals born to vaccinated mares					4 way, West Nile, Rabies	West Nile, Rabies	4 way	Flu, Rhino	4 way, Flu, Rhino	1 <sup>st</sup> Strangles intranasal 11 mos, all others at 12 mos: 4 way, West Nile, Rabies, Flu, Rhino, 2 <sup>nd</sup> Strangles intranasal
	2 mo	3 mo	4 mo	5 mo	6 mo	7 mo	8 mo	9 mo	10 mo	11 and 12 mo
Foals born to unvaccinated mares	West Nile Virus and intranasal Strangles at 6 wks (3 wk interval, and done 2-4 wks before weaning)	West Nile Virus and intranasal Strangles	4 way, West Nile, and Rhino	4 way, Rhino	4 way, Flu	Flu	Flu			4 way, West Nile, Rabies, Flu, Rhino, intranasal Strangles

**Deworming:**

Foals should dewormed as appropriate for their own weight, beginning at 1 month of age, every 3 months or more frequently if there are many horses in a pasture environment. Pyrantel pamoate (trade name: Strongid) is an appropriate first dewormer that kills roundworms (*Strongylus*, and cyanthostomes) which commonly infest young foals as well as adult horses, and can be severe enough to cause impactions or even intestinal rupture in youngsters. As with adult horses, dewormers should be rotated between a pyrantel product, a product with ivermectin (to kill Bots in during the winter, there are many trade names: Eqvalan is a common one), and fenbendazole (trade name: Panacur). Once a year, you should also use a combination product with praziquantel that kills tapeworms (it is commonly combined with ivermectin (as with Equell or others), and once a year, you should consider a fenbendazole power pack: a double dose of fenbendazole for 5 days that is effective in killing the encysted stages of small strongyles. Rotating dewormers helps to prevent resistance and immunity of the parasites to the anthelmintic you most commonly use. All horses have intestinal parasites, our goal is to keep that burden low with regular deworming to maintain the health of their intestinal tract, and thus the risk of colic, anemia, and our overall feed bills lower.

An example of a deworming schedule is provided below:

	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec
Pyrantel pamoate			x						x			
Ivermectin											x	
Fenbendazole	xxxxx						x					
Praziquantel/Ivermectin					x							

The power pack is indicated by: xxxxx indicating a five day dose.

**Additional health requirements:**

You should discuss routine care with your veterinarian to determine the best health care schedule. As your weanling becomes a horse you will want to also consider castration, correction of limb deformities and hernias, and dental care. Castration can be performed any time after the testicles have descended (typically a month or two after weaning, and within the first 8-10 months when the climate is less hot, and the numbers of flies are lower). Limb deformities should be evaluated early by a veterinarian, as the growth plates for the fetlocks close around 2 months of age, and the carpus at 4-6 months of age. If there is any concern, early intervention is always preferable. Finally, horses begin shedding teeth at 2 years of age and will shed cheek teeth over the next 3-4 years of life. They should be evaluated every 6-12 months by your veterinarian to ensure that their teeth are properly taken care of.