**Equine Vaccination Recommendations**

**About**

All horses should be protected against tetanus. A strangles vaccination is recommended as well, depending on your risk to getting the disease.

**Foal Vaccination Protocol**

* Year 1
  + Tetanus & Strangles sensitiser @ 3 months of age
  + Strangles booster @ 3.5 months of age
  + Tetanus & Strangles booster @ 4 months of age
* Year 2
  + Tetanus & Strangles annual booster @ 1 year 4 months of age

**Adult Horse Vaccination Protocol**

* Tetanus booster every 5 years (following vaccination at 1 year 4 months of age)

**In case of any injury or trauma**

* Tetanus antitoxin AND tetanus booster vaccination @ time of injury

**Equine Herpes-virus**

Equine herpesvirus 1 and 4 can cause serious disease, including respiratory disease, neurological disease and abortion.

We vaccinate horses against EHV to control the disease and reduce risk of abortion. Only healthy horses should be vaccinated.

An initial vaccination course is required:

* Vaccinate prior to service. Two primary vaccinations are given 30 days apart, the last of which should be administered at least 14 days prior to service. Followed by a third injection in the 5th month of pregnancy.
* For mares not vaccinated prior to service, a course of three vaccinations is required- in the 4th, 5th and 7th months of pregnancy.
* Annual booster vaccination is then required (for all mares) at no more than a 12-month interval, which should ideally fall in the 4th or 5th month of pregnancy (if pregnant).

For mares that are pregnant, have not received any vaccination, and have missed the opportunity to complete the initial course whilst pregnant, the following protocol is recommended:

* Two vaccinations to be given 30 days apart. An initial course will be required when she is next bred, as outlined above.

Vaccination does not provide complete protection and so biosecurity measures need to be taken to prevent infection:

* New arrivals should be isolated for 3 weeks and monitored for signs of illness. Monitoring rectal temperature can be very useful. The normal adult rectal temperature is 37.5 – 38.50C.
* Group pregnant mares according to stage of gestation and avoid mixing groups.
* Pregnant mares should be isolated from other horses, especially weanlings and those returning from training facilities/competition as these will be at high risk of reactivating subclinical, latent viral infection.
* Sick horses should be quarantined, away from healthy horses and strict hygiene procedures should be established.
* Keep stress, such as handling and transport to a minimum.
* Notify your veterinarian of any abortion and keep the fetus and membranes for examination and sampling.
* Isolate mares that abort and do not let other horses contact the aborted fetus or membranes.

**For more information and other vaccinations go to:**

www.equinevaccineguide.co.nz/pdf/guidelines.pdf