

Talking Horses

The newsletter with news, views and practical advice

New Book!

Talking Horses *Common Problems* By Dr John Kohnke

96 pages. Published November 2008. Packed with up-to-date information and almost 200 Handy Hints. Available from produce stores and saddleries, or obtain details from www.kohnkesown.com.

Feature Review...

* EMS and ECD - How, when and why?

In Brief...

- * Preparing for winter
- * How to trim the horse-keeping budget
- * And lots of Handy Hints

From the editor...

Welcome to our first email compatible issue of Talking Horses. It's an exciting new service that will provide you with regular, practical reviews on horse disease and healthcare problems, and handy hints on caring for your horses.

Due to the increased cost of mailing out each issue, we ask you to subscribe to our free on-line version. However, the hard copy version will still be available from your local produce store or saddlery if you do not have an email connection. The email version is in full colour and formatted for easy download and print out in pdf form. The newsletter will be published as 4-6 pages at 2 month intervals, instead of the 6 pages less frequently.

Please subscribe by emailing your email address to:

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Your email details will be kept confidential and only used to send out regular issues of Talking Horses. If you are already an email subscriber, your details will be transferred to the new email list. You can also subscribe to our Racing edition by email which is published a week or so after the Equestrian edition.

The start of 2009 has been marred by the ongoing economic downturn and by the devastating Victorian bushfires. Our condolences go out to all horse owners who had horses maimed or killed by the fires, or lost family members, houses, horses and horse facilities. We were pleased to be able to provide donations of products to help horses affected or injured by the fires.

Our major topic in this issue is a comparison between Equine Metabolic Syndrome (EMS) and Equine Cushing's Disease (ECD), which have both been reviewed individually in previous issues, the latest being EMS in Issue 14. These are available on the website www.kohnkesown.com under the Newsletter section- ECD Issue 6 and EMS Issue 14.

We also discuss some ways of saving money on the horse keeping budget during these hard times.

We provide simple guidelines and handy hints on preparing for winter, as well as numerous other practical hints.

All the best,

John Kohnke B.V.Sc. RDA

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Handy Hint 1

Loading a Horse Up a Ramp

Always ensure that the front toes of un-shod or barefoot trimmed horses are short and rounded off when loading up a steep ramp onto a trailer or truck. Long toes on the front hooves can chip or tear away, exposing the inner lamellae layers to infection, or can break-away the front edges of the hooves, which can take months to repair. Loose shoes can also tear away, damaging the toe and sidewall areas. Simply wrapping a couple of layers of adhesive bandage or conforming, self-adhering leg wrap around the edges of the toes can reduce the risk of tearing and chipping to an un-shod hoof. Fitting a pair of hoof boots can also help to protect long toes if a horse scrambles when trying to gain traction during loading up a steep ramp.

First Aid by Icing the Hooves in Laminitic/Foundered Horses

The pain caused by the internal 'pressure' of inflammation, fluid accumulation and tearing of the highly sensitive lamellae within the enclosed hoof capsule during the acute phase of laminitis and early founder is excruciating. Recent studies indicate that cryotherapy first aid by applying ice or constant low temperature cooling to the painful and deteriorating internal hoof structure can make a difference in reducing the overall damage and can speed up recovery from an episode of laminitis. Confining the horse and early application of ice, at the first signs of 'heat' in the feet, a digital pulse or a shortened stride, can help avoid internal collapse of the hoof structure and chronic lameness. Quick application with a large bulk of ice is essential, preferably as crushed ice or 'discs' from an ice-making machine as they pack around the hoof more effectively than ice blocks, or shattering larger ice blocks with a hammer, in a volume to fill up at least a 5-7 litre cloth or hessian bag. A porous bag that will allow the water to seep away as the ice melts, is the most effective way to rapidly cool the affected hooves. If you use a large plastic bag, punch small holes in the bottom to allow the water to drip away as the ice melts, reducing the weight on the hooves and signaling when the ice needs a refill. Wrapping the bag of ice around the hoof wall and securing it in place with elastic wrapping leg tape, helps keep it in place until your vet can visit to examine the hooves and administer anti-inflammatory medication.

Replacing the ice as soon as it melts away will keep a constant low temperature to help control internal swelling and relieve pain. Keep up the icing first aid for as long as you can – it won't damage the horse's hooves or freeze his toes off!

Handy Hint 2

Equine Metabolic Syndrome (EMS) and Equine Cushing's Disease (ECD) How, when and why?

Over the last few years, it has been increasingly common for horses and ponies to develop a form of recurring low grade laminitis and chronic founder as they age. In years gone by, an overweight horse with a history of a 'cresty' neck, lethargy, recurring hoof abscesses and founder was thought to have a 'subactive' (hypoactive) thyroid gland, which can result in weight gain and some of the symptoms of EMS and ECD in older horses. However, recent studies in Australia and overseas, have found that these symptoms are associated with insulin resistance, or IR for short. In the long term, IR is associated with a daily diet containing excess starch or soluble sugars from high quality grass pastures or cereal grain based feeds. When combined with developing obesity from a relatively inactive lifestyle and an excess intake of soluble sugars, blood sugar (blood glucose) becomes elevated. This in turn, results in an increase in circulating insulin levels in the blood, which then can trigger episodes of laminitis and founder, leading to severe, crippling disease in the long term. Horses and ponies can develop EMS in middle age. Elderly horses, and particularly ponies, can develop ECD as a result of an over reactive area in their pituitary gland, as explained below. Both these conditions can result in insulin resistance and its side-effects.

The Action of Insulin

Insulin is a hormone which is produced in the pancreas and circulates in the blood to maintain a relatively constant level of blood sugar (blood glucose) by clearing glucose into the body cells for utilisation or storage in the tissues. Horses have a naturally higher level of **circulating insulin of between 8-30µIU/mL**, because they have evolved as 'continuous grazers' with a small stomach and no gall bladder, with a large hindgut fermentation capacity to digest good quality grass forage. Insulin resistance (IR) develops when the diet is high in glucose from a starch based or a high non-structural carbohydrate (NSCs). This can occur as a result of grazing high quality improved pastures for an extended period, which are more suited to cattle and sheep, which exceeds the normal capacity of insulin to control the flood of sugars into the blood. The body responds or 'compensates' by increasing the synthesis of insulin in an attempt to control the high levels of circulating blood glucose. For a short period, the action of increased insulin maintains the blood glucose and free fatty acid levels in the blood within the normal range. In horses and ponies where an excessive intake of sugars continues due to the high NSC pasture diet or feeding processed grain based diet, without an opportunity reduce the intake for a short period (such as a winter 'strip out' on mature, slow growing grass or native low NSC pasture) to allow readjustment of the insulin response. **The blood concentration of insulin can reach 100µIU/mL and insulin resistance (IR) develops.** This decreases the clearance of blood sugar into the body cells for metabolic use, diverting it to storage sites in the tissues as fat and long term glycogen deposition, resulting in the formation of abnormal fat storage deposits behind the shoulder, tail-butt area, sheath, udder and as a hard, bulging 'cresty' neck.

Studies by Prof. Chris Pollitt and co-workers at the University of Queensland's Australian Equine Laminitis Research Unit have shown that injections of insulin to elevate the blood insulin levels to above 100µIU/mL, can trigger the onset of laminitis within 72 hours, even in thin, lean ponies without a previous history of laminitis.

Did you know that.....

- * Symptoms of EMS have been reported in horses 10-12 years of age, and ECD most commonly occurs in ponies over 19 years of age. Both EMS and ECD horses can develop IR as they age, with increased risk of chronic, recurring laminitis and founder. IR can develop in lean horses if they are on high starch and NSC diets or are not exercised on a regular basis. In many cases, we could be causing premature debilitation in our horses by feeding them too much feed to keep them in a 'rounded' condition and contented!
- * A recent US study in 2008 found that 58% of horses randomly surveyed had a Body Condition Score (BCS) of greater than 4 or heavy condition (a BCS of 6 on the USA scale), with 20% of horses being considered to be obese with a BCS of 4.5 or above (8-9 USA scale).
- * In 1989, a survey in the USA reported that around 5% of horses were considered to be overweight.
- * Some individual horses appear to be prone to putting weight and condition, even when fed a ration similar to other horses worked at the same level in training, which is often related to bloodlines of horses and ponies which are 'good-doers'.
- * A survey in Australia to map the incidence of Equine Cushing's Disease (ECD) in ponies in the early 1980's found that around 2% of elderly animals had symptoms of ECD. Another survey carried out by Dr Cathy McGowan in 2004, then based at the University of Queensland's Gatton Campus, reported an incidence of ECD of 16% in aged ponies.
- * The incidence of EMS in Australian horses has been estimated at 20% of the middle-aged equestrian population of pleasure and lightly ridden horses, with a higher incidence in some bloodlines of horse and pony breeds.

Handy Hint 3

Recognising the Cause of a 'Cresty' Neck

A thickening of the ridge or 'crest' on the neck below the mane is a common sign associated with EMS. However, there is evidence that a 'heavy' or 'cresty' neck can be inherited in some bloodlines of horses and ponies. They are prone to developing a 'crest' even when in medium condition, or when not being ridden to develop their upper neck muscles. This form of 'cresty' neck is usually **soft, wobbly and flabby** to touch and can **hang to one side** when the animal is standing. The development of a 'cresty' neck as a result of excess soluble sugar intake, abnormal fat distribution and underlying IR, results in a **hard, bulging and thick, heavy** crest as the muscles are infiltrated with storage sugars and fat as a result of IR. However, some stallions develop a **thick, hard muscular** crest due to high levels of circulating testosterone hormone during the breeding season, which is not related in most cases to IR.

Triggering Laminitis in an EMS Horse or Pony

Handy Hint 4

The more energy dense starch based grains and other feeds containing high levels of non-structural carbohydrates (NSCs) or soluble sugars, cereal grain offals (pollard, bran, mill mix or mill run, and rice bran), as well a diet based on good quality spring grass hay, such as ryegrass hay with high NSCs and sugars, can contribute to the oversupply of glucose (**high Glycaemic Index or high GI feeds**). Pasture grazing in early spring is linked to a well recognised risk in ponies prone to founder due to the overload of fructan and NSC sugars into the hindgut and fermentation to D-lactic acid. **Animals with underlying EMS and IR with glucose intolerance develop a sensitivity to any form of starch, glucose or NSCs, and even small amounts of high GI feed or high NSC pasture can tip them over into a laminitic episode.** Grazing grass which re-shoots within 5-10 days after rain in summer or autumn, when the weather is still warm enough to promote rapid regrowth, is particularly dangerous to animals with IR. Leaving a 'cresty' EMS pony out overnight on this type of pasture is a common trigger for laminitis and founder within as little as 1-2 days, and an even higher risk for such an animal with 24/7 access to grazing at this critical time.

Insulin Resistance (IR)

Insulin resistance is now recognised as a common cause of laminitis in 'easy-keepers', 'good doers' and horses fed on starch based or high GI (Glucose Index) feeds in excess of their energy needs when in training or maintained in show condition for a number of years without a yearly 'strip out' and paddock spell over winter. Although not directly linked to the increase in popularity of sweet, grain starch based commercial and processed feeds, over the last 20 years or so, there is evidence which indicates that long term consumption of high GI feeds and developing obesity, can result in IR and glucose intolerance. Maintaining a heavily conditioned horse or pony on good quality grass hay as a staple diet (the grass hay was once high NSC or high GI pasture before it was harvested and cured) can chronically elevate blood sugar if the horse is not worked on a regular basis to utilise the sugar based energy. Although the vitamin content deteriorates during storage, the soluble sugars as non-structural carbohydrates in the hay remain in the feed. Soaking the hay in lukewarm water, as outlined below, will remove excess sugars, as well as water soluble salts, trace-minerals and vitamins to help reduce the overload of sugars from a hay based diet. Even the popular 'light work' equestrian feeds based on grain offal, such as mill mix (bran and pollard) and rice bran, can contribute to the overload of soluble non-structural carbohydrates (NSCs) and sugars, especially in a relatively inactive horse. Feeds sweetened with molasses (molasses contains 76% sucrose, [that's why it is so thick!]), with each unit contributing 2 glucose units on digestion in the small bowel) can chronically elevate blood glucose levels if they are fed with a grain or good quality cereal chaff and grass hay with a high GI, which in turn, can trigger an increase in insulin hormone and in the long term, insulin resistance, even in a non-obese horse or pony as it ages.

Equine Cushing's Disease

ECD is primarily a condition which develops in horses with an average age of 19 years, although it has been reported in horses as young as 7 years of age. Pony breeds are more susceptible than larger breeds. The major underlying cause of ECD is the over-activity of the pituitary gland which is a hormone and metabolic peptide producing gland at the base of the brain. **The excessive release of ACTH from the pituitary gland is most likely a result of a benign, slow growing tumour or cancer in the gland, or possibly a natural increase in the size and number of ACTH producing cells in the central tissue area or 'pars intermedia' as a horse ages.** It is referred to as Pituitary Pars Intermedia Dysfunction, or PPID for short, and also sometimes referred to as PIA, or Pars Intermedia Adenoma, describing its tumour origin. The pituitary gland produces 4 major types of hormone, but in ECD affected ponies, it is the elevated circulating levels of ACTH or adrenocorticotropic hormone, and other cortisol-like acting hormones which cause the clinical symptoms of ECD.

ACTH is the messenger hormone which triggers the production of natural cortisol hormone, the 'stress hormone', from the adrenal gland, which in excessive amounts, circulating in the blood and tissues, results in a number of chronic metabolic changes. It is considered that certain bloodlines of ponies have a genetic risk and aged Arabian crossbred grey ponies in Australia appear to have a higher incidence, possibly due to the production of another hormone in grey horses with black skin, melanocyte stimulating hormone (MSH), which also has a cortisol-like action, by the over-active pituitary tissue.

There is also a 'metabolic' related form of ECD which is thought to lead to EMS as a pony ages, because the increased cortisone levels elevate blood sugar in preparation for an increased metabolic rate, as many aged ECD animals also have insulin resistance (IR). They can have a circulating insulin level of at least 188µIU/mL of plasma and this makes them highly susceptible to repeated episodes of laminitis and founder, with recurring hoof abscesses, even if they are in a thin, lethargic condition. If an aged ECD pony has this level of insulin from chronic IR, it is probable that it will survive for less than 2 years.

Confirming a Diagnosis of EMS and ECD

The diagnosis of EMS and ECD is a job for your vet, but your careful description of the age and symptoms can help in deciding which blood tests should be requested to confirm a diagnosis. The symptoms are specific for each syndrome, with a common history of lethargy and recurring laminitis.

EMS – The measurement of blood glucose and insulin levels is most accurate in a long standing case of EMS and IR, as initially the increased insulin will suppress the excess of blood glucose. New techniques, including a combined glucose tolerance test following a high glucose boosted feed and intravenous injection of insulin and then monitoring both at hourly intervals over several hours is a much more accurate method to confirm EMS and associated IR. However, food has to be withheld for at least 3 hours and it is expensive to monitor the blood in this way. Moreover, extreme care must be taken in a horse with an already high insulin reading associated with IR, as the test can trigger an episode of laminitis in a glucose intolerant and highly insulin resistant animal.

Handy Hint 5

Comparative Symptoms of EMS and ECD

EMS affected horses and ponies with IR are usually in heavy or obese condition, with **abnormal fat accumulation behind the shoulder, above the tail butt, sheath, udder and a 'cresty' neck**, with muscle wastage along the topline and rump. Although, they do not have a long, abnormally shedding coat, they sometimes develop a **slight 'curl' on the tips of the hair** along the neck and barrel. They **have little energy for exercise, are often lethargic** and have a high risk of **repeated laminitic episodes**.

ECD affected ponies, in contrast, are usually **aged** and have an **abnormally long, often wavy hair coat**, with **delayed, often patchy shedding** even during the normal seasonal summer thinning-out time, so they often have a long, shaggy, 'yak'-like coat for years. They develop a **skinny, ribby, 'pot-bellied' appearance** with loss of topline muscles, lethargy and weakness in the hindquarters, a 'dodderly-like' walk and no apparent energy to exercise. The high levels of cortisone-like 'stress' hormones also **increases their appetite, reduces wound healing and immunity** and increases the likelihood of **heavy worm burdens** as they age, which exacerbates their already poor condition. They **drink more water and pass large volumes of thin urine** and thus, often appear dehydrated. Because of the high levels of circulating insulin, they invariably have a **history of repeated, crippling laminitis and have foundered** (ie rotated pedal bones, internal collapse of the hoof structure with dropped soles) and recurring hoof abscesses.

Handy Hint 6

Fat Lumps above the Eyes

Although horses and ponies with EMS develop abnormal fat deposits behind the shoulder(like a 'spare tyre'), above the tail-butt and a 'cresty' neck, the **abnormal build-up of a soft lump of fat** about as big as a golf ball above the eye socket on each side in the supraorbital fossa (normally a hollowed in area) is diagnostic of ECD, in contrast to EMS horses, even in older age EMS, which do not have this prominent lump of fat tissue above the eyes. Combined with the weight loss, pot-bellied appearance and long coat, the fat lump is a sign of ECD.

ECD - Various blood tests are available to confirm ECD. The measurement of combined ACTH and blood insulin readings (as high as 150µIU/mL) can be influenced by feeding a starch based or high sugar hay meal prior to the test period. Most vets opt for a low dose dexamethazone (a synthetic cortisone-like acting anti-inflammatory) response test, with ECD confirmed by higher levels of cortisol hormone being retained in the blood for up to 24 hours. Other more sophisticated but expensive tests are also available. In many cases, horses owners opt for medicating the suspected ECD animal with the drug pergolide, which acts to decrease ACTH and cortisol levels in the blood within 5-7 days and the affected animal can become more active, alert and start eating well again within 24-48 hours. If it does not improve the animal's well-being after 3-4 days, it will not do any harm, but it may simply be a form of ECD or old-age metabolic EMS, which is non-responsive to pergolide and which will respond to dietary management.

Whilst there is a specific medical treatment for ECD, there is no current drug medication for EMS. Although studies to evaluate medications used for type 2 diabetes in humans (which is similar in many respects to EMS) are promising, more research is continuing. These drugs are also expensive for use in horses because of the large dose rate. With Pergolide therapy over the long term, the underlying pituitary gland over-activity can override the action of pergolide, which becomes less effective, progressing to severe debilitation, discomfort, blindness, seizures and recurring laminitis, which usually results in the animal passing away or needing to be humanely euthanased in its old age.

Dietary Management

The dietary management of EMS and ECD involves the **provision of a low starch and soluble sugar diet, soaking hay to help reduce excess soluble sugar intake and introducing daily exercise** if the animal is not suffering from laminitis or its associated long term hoof damage. These measures will help control both syndromes and the accompanying Insulin Resistance.

The dietary management program of EMS was extensively reviewed in Talking Horses Equestrian Issue 14, which is available from the website: www.kohnkesown.com, or as a hard copy by mail or fax by phoning Simone on 1800 112 227.

Preparing for Winter - The Facts

The forthcoming winter is expected to be colder than usual with more rain in southern areas. These conditions can be made easier to cope with to maintain your horse in good condition over the cold, harsh months by following some simple tips.

- * **Worm out for Tape worms in Mid April and for Bots in late May - use a broad spectrum wormer for these 2 wormings, 6 weeks apart prior to winter, to remove any worm burdens which sap energy and nutrients over winter.**
- * **Good quality roughage digests by fermenting in the hindgut to help maintain warmth and core temperature during cold overnight conditions. Arrange a supply of hay before winter so that you don't run low - store it in a dry, well ventilated area off the floor on a pallet. Feed trucks delivering hay can make a mess in boggy stable or paddock areas, so organise where your hay will be delivered before you order. You can always pick up a bucket of supplement or a bag of feed in your car, so avoid organising truck deliveries for smaller items.**
- * **Check teeth in young or elderly horses to help make chewing hay and harvesting short winter pastures more efficient so that optimum nutrition is obtained from the hay and hard feed.**
- * **Purchase new rugs or repair winter rugs - at least 2 rugs are necessary just in case one gets wet, caked with mud or ripped on a fence. Waterproof older rugs if necessary.**
- * **Plan regular hoof care - trim every 4-6 weeks and apply twice weekly applications of Hoof-Seal®, especially on the sole (it doesn't wash off, collect mud or wear off like hoof greases), to help maintain natural water content in hooves without water-logging the hooves and making them soft and unable to carry the horse's weight during wet weather.**
- * **Ensure a balanced diet - supplement with zinc, copper and Vitamin A to help maintain hoof health and skin condition, with either Cell-Provide®, Cell-Vital® or Aussie Sport™. A daily supplement of a balanced Omega 3/Omega-6 oil, such as 50-60mL of Energy-Gold daily in the feed will provide oils for optimum coat condition during prolonged wet weather.**
- * **Repair shelters, ensure adequate drainage in yards and in small flat paddocks and safe fences.**

Handy Hint 7

New Research

Studies have shown that as a horse puts on condition and remains overweight, the sensitivity to insulin decreases, so that higher blood levels of insulin remain. Prof Nick Frank of the University of Tennessee, believes that once insulin resistance (IR) develops, it then mobilises fats to storage sites in the muscles, crest of the neck and liver. Once a 'cresty' neck forms in an IR affected animal, the type of fat cells are metabolically active, releasing chemical mediators which exacerbate IR. The horse becomes less tolerant to even small intakes of starches and soluble sugars from pasture and hard feed and suffers recurring laminitis. Heavyweight ponies with a hard 'cresty' neck are a laminitic and founder time bomb!

Handy Hint 8

Reducing Sugars in the Diet

Soaking a biscuit of grass hay in double its volume in lukewarm water for 1 hour, then draining before feeding, to remove soluble sugars and non-structural carbohydrates, is also helpful in limiting the glucose response and fat storage. Carrots (8% NSC's) have a lower glycaemic index than apples (57% NSC's) as a treat!

Horses should be restricted to access to improved grass pastures to 1-2 hours per day to limit sugar overload, and this will not only reduce the risk of laminitis (founder) in spring, but also the onset of EMS as a horse or pony ages.

Use Winter as a 'strip-out' Period for Over-weight Horses and Ponies

The cooler winter months are an ideal time to let your horse lose some excess weight to help naturally adjust his blood glucose and insulin response and reduce the risk of him developing EMS. The colder weather will sap some energy and assist weight loss on an adequate, but well balanced diet. Ensure that he is given enough feed and soak half of the hay to reduce the sugars and energy to help weight control. But do not be too harsh and don't starve him to hasten his weight loss and become 'the biggest loser', because over-weight ponies and some Thoroughbreds, can develop the condition of hyperlipaemia within 7-10 days, which can be fatal if not recognised early. Ensure that his hooves are well maintained and that the fences are secure and safe, as he may want to lean through for a snack between meals on cold day!

Handy Hint 9

How to Trim the Horse-Keeping Budget

The world-wide economic downturn has squeezed the horse-keeping budget for many horse owners and riders. The price of hay and hard feeds has come down slightly, but the continuing drought in many areas has maintained fodder and grain prices at 2008 levels before the downturn came into reality.

However there are other savings that you can make to help keep the budget under control and save money.

- Buy hay in larger amounts if you have suitable weather proof storage facilities, as the price usually increases by the end of winter, and a bulk load may also save on delivery costs. However, check the hay you are considering stock-piling to ensure that it is good enough for your horse. Wastage of poor quality, first cut hay can increase the cost of feeding. If you plan to feed out from a round bale, portion it out and carry it to the horses in a wheelbarrow, as wastage of self-fed round bales is very high for horses and much is spoiled around a bale in the paddock.
- Save on fuel by sharing trips or taking turns to make trips to the feed store or saddlery with a friend. Significant fuel savings and running expenses for your vehicle can be achieved by sharing the horse trailer with a friend to shows and weekend rides-split the fuel costs to save money.
- If you need tack or a new rug - check out the horse magazines or go on the internet and look up winter sale weekends at saddleries and produce stores - many retailers have an end of June stock-taking sale and you can save money by purchasing at the special price.
- Shop around for supplements and horse care items - often stores have sales. Purchase products on a cost per dose basis and the concentration of nutrients delivered in each dose. You will be surprised by checking the formulations and working out the value for money for alternative products. The Kohnke's Own range of supplements are formulated to NRC 2007 standards and are invariably the lowest cost per dose and value for money products available, whilst still providing balanced and optimum nutrition.
- If you have good pasture available, cut back on your hard feed and allow your horse to use it as a natural base for his diet.

Handy Hint 10

Check out the Sales Catalogues

Many saddleries and produce stores have seasonal sales catalogues with significant savings on gear and other tack. A 20% savings on wormers, for instance, can mean that for every 6 wormers you purchase, you get one free. On a group of horses, this can add up to a worthwhile saving over a 6 month period.

Handy Hint 11

Consider Using the Feed XL on-line Feed Analysis Program

It is surprising how much you can save on feed costs by checking your ration to determine the right feed balance and adequacy for your horse. The on-line Feed XL ration analysis facility, even though it costs a few dollars to purchase the on-line service, can help you save significant money on feed bills-every day and every week. Go to www.FeedXL.com and subscribe to check your feeds.

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PRODUCT OF THE MONTH

CELL-PROVIDE

Cell-Provide is the ideal ration balancer for lightly worked horses, horses resting at pasture with a daily hard feed snack, ponies in work and miniatures, as well as aged horses in retirement. It contains a blend of 3 cold-pressed Supplet[®] pellets, including separate bone mineral, trace-mineral and vitamin pellets to correct low or inadequate levels in the ration. It can be used to top-up a bag feed based ration with a range of essential nutrients if you are not feeding the full recommended amount. The small, palatable pellets mix well into the feed and are well accepted, eliminating sift-out, dust and sludging in the feed bin, as well as nutrient interaction common with powdered supplements.

Cell-Provide is used by many top show competitors to ensure health, vitality and a well-conditioned and coloured coat and is a popular supplement for horses over-wintering at pasture, in fact, most horses and ponies will take them off your hand without the need to mix them into a handful of hard feed.

Available in 1.4, 3.5 and 10kg packs from all produce stores and saddleries.



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