



Hampden Equine
Veterinary Practice
Improving equine health & welfare

SPRING

Newsletter 2026

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Hampden Equine Veterinary Practice, Anchor Lane, Aylesbury, HP20 1AJ

A NOTE FROM OUR CLINICAL DIRECTOR, JESS JOHNSON

It's been lovely to see a hint of Springtime coming with the sunshine appearing. Our team has had a productive winter season, seeing lots of our wonderful patients and our lovely clients. We've got some exciting write-ups included within this newsletter. Look out for information about vaccinations; introductions to some new team members and welcoming back some familiar faces; an exciting opportunity to be involved with research being conducted; our star patient and much more! We wish all a fabulous Spring and hope your fields dry out very soon!



OPPORTUNITY TO HAVE YOUR SAY

We would love to hear your thoughts about your experience at Hampden Partners Ltd.

Jess, our Clinical Director, has been busy in her clinical work looking after all her lovely patients. She is also a gluten for punishment and in her personal time has been completing both a Certificate in Veterinary Business Management and a MSc in Veterinary Professional Studies with the University of Liverpool.

As part of her Masters, Jess has designed a questionnaire to understand our clients' satisfaction regarding their interactions with our veterinary surgeons and veterinary nurses at our small animal and equine departments. She would love to use your responses to her questionnaire to examine your satisfaction, something our whole team care deeply about. Jess also hopes to be able to analyse the results and apply them to the wider veterinary community as a basis for further research into veterinary client satisfaction and how it relates to both vets and nurses.

If you have visited our small animal or equine departments in the last 12 months and would like to volunteer to be part of this exciting study, we would invite you to follow this link or QR code to the JISC questionnaire.

<https://app.onlinesurveys.jisc.ac.uk/s/liverpool/client-satisfaction>

Further information is available at this link in the form of an information sheet. Please be assured all responses will be anonymous and will not affect your relationship with our practice in any way.

A big thank you in advance for your engagement with Jess' study



WELCOME BACK

We are very excited to see both Jo and Steph back to the Hampdens' Team after they have returned from their maternity leaves.

Jo returns to the fold as part of our vet team and is looking forward to seeing her clients and patients again that she has cared for over the last 9 years with our team. Look out for Jo and her sidekick, cockerpoo Hugo, out and about on the road from March.

Steph returned to our administrative team and will be supporting you all with your insurance queries and claims. Steph's knowledge of the practice and clinical expertise, having worked at our clinic for many years, makes her an invaluable asset for handling these claims and supporting our clients. Steph will be based at our Aylesbury hospital site and she's ready to receive your calls.

Welcome back, Jo and Steph!

WARM WELCOME

A lot of you will already have met our wonderful new vets, Helena and Liv, as they have been with us since late 2025. They have already settled into the team well and are building up their relationships with our patients and clients.

Helena has spent time in practice in Hertfordshire, working with a range of horses, ponies and donkeys on the road as an ambulatory vet. Before joining us, she also spent time working at an equine hospital in Morocco specifically treating working horses, donkeys and mules. Originally from Hampshire, Helena grew up attending her local pony club and eventing her Irish Sports horse. She now has a young New Forest pony and an Irish cob, and when not riding, you can find her at Parkrun.

Liv previously worked at a large equine hospital, where her primary responsibilities were general anaesthesia and the intensive care of sick horses and foals. She then spent time working in general equine ambulatory practice in Hertfordshire, before joining the team at Hampden Equine. Liv enjoys all aspects of equine practice but has particular interests in emergency work, ophthalmology and the care of geriatric horses. Outside of work, she is an avid follower of National Hunt racing and she also enjoys riding, running and walking her young dog Peanut.

Welcome to them both!



JO



STEPH



HELENA



LIV

CHARLIE'S STORY

Charlie presented to us with a nasty eye injury a few months ago. He had a large defect to his cornea which was diagnosed as a deep stromal abscess. Our vet, Abbie, placed a sub palpebral lavage (SPL) system. The SPL is a little tube that sits under the lower eyelid and is plaited into the main which allows the eye to be medicated.

Here's the before and after photos



Charlie was an exceptional patient and after a few weeks of intensive management from his very diligent owner, he was improving and are pleased to report that we managed to save his eye.

ZONE DAYS

We continue to offer our discounted Zone Day Visits.

To qualify for the cheaper visit fee we ask clients to:

- Have a clear account balance
- Be flexible on the specific day
- Make payment before the visit takes place

Please see the map for area details.



CARE ABOUT CUSHING'S UPDATE

Important Update: Care About Cushing's Scheme (from 1st February 2026)

Boehringer Ingelheim is updating its Care About Cushing's initiative, which provides free diagnostic testing for Equine Cushing's (PPID). Here's what horse owners and vets need to know:

Focused Free ACTH Testing

Free annual ACTH lab tests will now be available during these periods only:

- Spring (March–April) – ideal for assessing laminitis risk
- Autumn (September–October) – when diagnostic accuracy peaks

New FREE "Dose-Checker" Test

A new 4–6 week post-treatment test will be available to help check medication doses early on.

Ongoing Support Continues

The scheme will still offer:

- One free monitoring test per year for diagnosed & treated horses available in Spring or Autumn
- Digital tracking tools
- Educational resources
- Reminder alerts

Registreation and Vouchers

Horse owners must work with a participating veterinary practice, which will generate a voucher code for the lab tests. Make sure the voucher is requested before or during your appointment and is submitted alongside the blood sample. As always this voucher code will cover the laboratory fees only, not the visit or cost of taking the sample.



For full details, visit the Care About Cushing's website: <https://careaboutcushings.co.uk/>

STRANGVAC

Strangvac is an intramuscular vaccine against the highly contagious respiratory disease strangles. It's not like the old vaccine that used to be given under the lip. Strangvac is indicated to reduce the clinical signs and the number of abscesses within submandibular and retropharyngeal lymph nodes in horses during the acute stage of strangles. It can be used from 5 months of age. The primary course is two vaccine doses administered 4 weeks apart with a third vaccine 6 months later and 6-12 months thereafter based on risk levels. A horse vaccinated with Strangvac will not test positive for strangles in diagnostic culture or PCR tests unless they have been recently infected with Strep. Equi.

At Hampden Equine we now offer this vaccine. If you are interested in booking an appointment for one our vets to come out, please contact the office on 01296 745 374.





COUGHS, FEVERS AND CANCELLED PLANS

Understanding Equine Flu

Equine influenza (often shortened to equine flu) remains one of the most important infectious diseases affecting horses in the UK. While vaccination has dramatically reduced severe outbreaks, the virus is still circulating and cases continue to be diagnosed every year.

Understanding how equine flu spreads, what signs to look out for and how best to protect your horse is key to keeping both individual horses and the wider equine community safe.

What is equine influenza?

Equine influenza is a highly contagious viral respiratory disease that affects horses, ponies and donkeys. It is caused by specific strains of the influenza A virus, adapted to equines and is not transmissible to humans.

The virus spreads very easily through:

- Direct horse to horse contact
- Coughing and nasal discharge
- Contaminated equipment, clothing and hands
- Shared airspace, including stables, lorries and indoor arenas

What are the signs of equine flu?

Clinical signs usually develop 1–3 days after exposure and can vary in severity depending on the horse's age, immune status and vaccination history.

Common signs include:

- Sudden onset of fever (often over 38.5°C)
- Dry, harsh cough
- Lethargy and depression
- Reduced appetite
- Nasal discharge (clear to thick and yellow)
- Muscle stiffness or soreness

Even mildly affected horses may continue to shed the virus and infect others, which is why early recognition and isolation are so important.

Why is equine flu still a problem in the UK?

Despite widespread vaccination, equine influenza continues to pose a risk because:

- The virus evolves over time
- Not all horses are vaccinated
- Immunity can wane if boosters are delayed
- Horses frequently travel and mix at competitions and livery yards

Recent UK outbreaks have shown that unvaccinated and partially vaccinated horses are most at risk, but vaccinated horses can still develop mild signs and spread the virus if exposed.

Vaccination remains the single most effective way to protect your horse against equine influenza.

Most competition bodies require vaccinating, but vaccinating is just as important for:

- Leisure horses
- Youngstock
- Breeding horses
- Horses that rarely leave the yard

Vaccinated horses that do become infected typically experience:

- Milder clinical signs
- Shorter recovery times
- Reduced viral shedding

It's essential that horses receive:

- A correct primary course
- Boosters at the recommended intervals

If you're unsure whether your horse's vaccination is up to date, your vet can check records and advise on the most appropriate schedule.

What should you do if you suspect equine flu?

If your horse shows signs of respiratory disease:

1. Stop all movement on and off the yard immediately
2. Isolate the affected horse
3. Contact your vet for advice

Do not continue training or competing a coughing or feverish horse. Exercise during or soon after infection significantly increases the risk of secondary complications and prolonged recovery.

Recovery and aftercare

Although most horses recover fully, equine influenza can damage the respiratory tract, leaving horses vulnerable to secondary infections.

Your vet can provide tailored advice based on your horse's age, workload and severity of illness.

How can you reduce the risk on your yard?

Good biosecurity plays a vital role in prevention:

- Isolate new arrivals for at least 14 days
- Avoid sharing water buckets, tack and grooming kit
- Wash hands and change clothing between horses if illness is present
- Monitor temperatures daily during outbreaks
- Keep vaccinations up to date across the yard



Equine influenza is serious but manageable. Good vaccination, early veterinary advice and strong biosecurity greatly reduce risk.

If you're concerned, speak to your vet early. Action protects your horse and the wider equine community.

Equine Herpes Virus

Recognise, Prevent, Protect

Equine Herpes Virus (EHV) is something most horse owners will hear about at some point, particularly when outbreaks are reported in the UK. While the term can sound worrying, understanding how EHV spreads, the signs to look out for and how to reduce risk can make a huge difference in protecting your horse and the wider equine community.

What is Equine Herpes Virus?

EHV is a common virus that affects horses worldwide. There are several strains, but the two most significant for horse owners are:

- **EHV-1** - associated with respiratory disease, abortion in pregnant mares and, in rare cases, neurological disease (Equine Herpesvirus Myeloencephalopathy or EHM).
- **EHV-4** - most commonly causes respiratory illness, particularly in young horses.

Many horses in the UK are exposed to EHV at some point in their lives, often as youngsters and may carry the virus without showing signs.

How does EHV spread?

EHV spreads easily through:

- Direct horse to horse contact
- Nasal secretions (coughing, snorting)
- Shared equipment such as buckets, tack, grooming kits
- Clothing, hands and footwear of people moving between horses

The virus can survive for short periods in the environment, making good hygiene essential during times of increased risk.

Clinical signs to watch for

The signs of EHV can vary depending on the strain and the individual horse. Common signs include:

- Fever (often the first sign)
- Nasal discharge
- Coughing
- Lethargy and reduced appetite
- Swollen lymph nodes

In pregnant mares, EHV-1 can cause abortion, sometimes with little warning.

Neurological signs (rare but serious) may include:

- Incoordination or weakness
- Difficulty standing
- Urinary incontinence

Any horse showing neurological signs should be treated as an emergency.

What should I do if I'm concerned?

If your horse develops a fever or respiratory signs:

- Isolate the horse immediately
- Stop movement on and off the yard
- Contact your vet as soon as possible

Other practical prevention measures include:

- Monitoring temperatures regularly during outbreaks
- Avoiding shared water sources at events
- Cleaning and disinfecting equipment
- Changing clothing and washing hands between horses
- Implementing isolation protocols for new arrivals

EHV in the UK: staying informed, not alarmed

EHV cases do occur in the UK, but with sensible biosecurity, prompt veterinary advice, and good communication, outbreaks can often be contained effectively. Being informed and prepared is far more helpful than being fearful.

EHV Vaccination

Vaccinations for EHV-1 and EHV-4 are available but the use of these vaccinations should be discussed with your veterinary surgeon to ensure it is correct for your setting.

The EHV vaccination should not be considered as an alternative to good biosecurity. We encourage horse owners to quarantine all horses newly arrived on their premises.

Whilst EHV vaccination reduces shedding of the virus and makes clinical signs milder, it does not necessarily abolish either. However, reducing shedding helps to minimise risk to other horses when a horse is infected with EHV.

It is important not to undertake vaccination during an active outbreak and we would always recommend vaccination is done when horses are in a stable population and not in a state of stress.

After the initial booster course, vaccinating needs to be maintained at six-monthly intervals in order to provide the best protection.

If you have any concerns about EHV, vaccination schedules, or biosecurity on your yard, our veterinary team is always happy to advise. Early action protects not just your horse, but the wider equine community too.



Don't Let Strangles Strike

How to Protect Your Horse from This Contagious Disease



Whilst strangles is rarely fatal with prompt treatment, it is highly contagious and can cause significant disruption to your horse's health and routine. Understanding how it spreads, how to recognise it and what you can do to protect your horse is essential for every horse owner.

What Is Strangles?

Strangles is caused by the bacterium *Streptococcus equi* subspecies *equi*. It primarily affects a horse's upper respiratory tract and lymph nodes, leading to swelling and the formation of abscesses, most commonly around the head and neck. The name "strangles" comes from the difficulty some horses have in breathing when these lymph nodes swell significantly.

How Do Horses Catch It?

Strangles is extremely contagious and spreads through direct horse to horse contact or indirectly via shared equipment, tack, water, feed, or even human hands and clothing. The bacteria can survive in the environment for several weeks, making hygiene and biosecurity crucial.

Horses that are newly infected may not show signs immediately, but they can still spread the disease. Some horses can carry the bacteria in their guttural pouches without appearing unwell, acting as silent carriers.

Recognising the Signs

Typical signs of strangles include:

- A very high temperature (often over 38.5°C)
- Swollen, painful lymph nodes around the jaw and throat
- Pus or discharge from the nose
- Loss of appetite and lethargy
- Difficulty swallowing or breathing in severe cases

If your horse shows any of these signs, it's important to isolate them immediately and contact your vet. Early intervention can reduce the risk of complications.

Diagnosis

- PCR testing: Detects bacterial DNA from nasal swabs, abscess material, or guttural pouch lavage
- Culture testing: Confirms presence of *S. equi*
- Blood tests

Treatment and Management

Treatment depends on the stage and severity of the disease. Mild cases may require rest, supportive care and monitoring, while severe cases may need antibiotics or veterinary drainage of abscesses. Fever and swelling often persist for several days, but most horses recover with proper care.

Horses that recover from strangles usually develop immunity, but it may not be lifelong, and reinfection is possible. Vaccination is available and may be recommended for horses at high risk, such as those in large yards or attending events.

Vaccination - Strangvac

- Strangvac is a recombinant protein based vaccine designed to reduce the severity and spread of strangles
- Provides protection without the risks associated with live vaccines
- Requires an initial two dose course (four weeks apart) followed by boosters every 6 months in high risk environments
- Reduces the risk of clinical disease and bacterial shedding but does not completely prevent infection

Preventing Strangles on Your Yard

Preventing strangles is largely about good biosecurity:

- Quarantine new arrivals for at least 2-3 weeks
- Avoid sharing tack, brushes and water/feed containers between horses
- Wash hands thoroughly after handling different horses
- Keep horses showing any signs of illness separate until cleared by a vet
- Maintain a clean environment and disinfect equipment regularly

Why Early Action Matters

Strangles can spread rapidly, particularly in yards with multiple horses. Early detection and isolation are key to preventing an outbreak. Working closely with your vet not only protects your horse but also your wider equine community.



While strangles is serious, with awareness, good hygiene and prompt veterinary care, the risk can be managed effectively. Staying informed, vigilant, and proactive is the best way to keep your horse healthy and your yard safe.

If you suspect strangles in your horse, contact your equine veterinary team immediately. Acting quickly makes all the difference.