**Why vaccinate?**

Vaccinations are essential to your horse’s health by helping to prevent some infectious diseases that are potentially life threatening. Vaccinations work by stimulating the immune system in such a way that antibodies to a particular disease are created giving the horse protective immunity against that disease. This protective immunity does not last forever and this is why booster vaccines are required.

**What disease can my horse be vaccinated for?**

The most common disease vaccinated against are Tetanus and Equine Influenza (Flu). Other vaccinations include Equine Herpes Virus (EHV), Equine Arteritis Virus (EVA), Rotavirus and Strangles.

**Tetanus**

Tetanus is caused by the soil borne bacteria Clostridium tetani and enters the body via contaminated wounds. Tetanus affects all domestic animals, however horses are the most susceptible. Clinical signs of tetanus include muscle stiffness and rigidity, protrusion of the 3rd eyelid, pricked ears and flared nostrils. Affected horses are extremely sensitive and over-react to any type of stimulation. They often take on a “saw-horse” stance whereby the forelegs are stretched out in front and the hindlegs are stretched out behind. Clinical signs develop 7-14 days after entry of the bacteria and prognosis is extremely poor. Vaccinations for tetanus are usually done in association with Influenza vaccinations and can be done yearly, or every second year.

**Equine Influenza (Flu)**

Equine Influenza, like human influenza is a respiratory disease that causes fever, lethargy, depression, nasal discharge and a productive harsh hacking cough. In mature horses it is seldom life threatening but does have the potential to initiate a secondary bacterial pneumonia. Most infected horses fully recover but infection does result in lengthy recuperation periods. Equine Influenza is highly contagious and can spread rapidly amongst susceptible horses. The virus has the potential to spread long distances when carried by the wind and is also spread on peoples hands and clothing. Equine Influenza is endemic (always present) in the United Kingdom and throughout Europe, but due to effective vaccines it is rarely seen.

All horses that go to any form of equestrian competition, show or event are required to be vaccinated for Equine Influenza. Most livery yards require annual flu vaccinations as...
standard and any horse that leaves their own property, or comes in contact with other horses on a regular bases is advised to be vaccinated against flu.

**Vaccination Rules and Regulations**

The British Horseracing Authority (BHA) and The Pony Club, along with other equestrian authorities recognise the importance of protecting against Flu. They have strict vaccination requirements which your horse must comply with in order to compete. If your horse is not fully vaccinated and up to date with its boosters it might be prevented from competing.

The BHA / Pony Club vaccination protocol is:

- 1st Equine Influenza vaccination
- 2nd vaccination after 21 to 92 days from 1st vaccination
- 3rd vaccination after 150 to 215 days from 2nd vaccination

Thereafter annually, with the last permissible day being the same date as the previous year’s vaccination.

* Horses can not be vaccinated less than 7 days prior to the start of the competition

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**Easy way to remember the BHA / Pony Club protocol**

- First vaccination now
- Second vaccination one month later
- Third vaccination six months after the first
- Annually from then on

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**FEI Vaccination Rules**

All horse registered with the FEI and competing at FEI level must receive booster for Equine Influenza twice per year. Booster must not be given less than 7 days prior to the day of competition or entry to the FEI stables. The protocol is as follows:
• All horses that compete in FEI competitions must have received the second injection between 21 and 92 days after the administration of the first dose and the third dose must be given within 6 months +21 days of the second dose.

• Annual boosters must be given within 365 days and if the horse is scheduled to take part in an FEI competition, the last booster must have been given within 6 calendar months +21 days of the day of competition or of entry to the FEI stables, whichever is the sooner.

**Easy way to remember the FEI protocol**

• All FEI horses require flu vaccinations every 6 months

**HPA Vaccination Rules**

The Hurlingham Polo Association is the governing body for Polo in Great Britain and states in its rules and regulations that:

• Each horse must have a valid vaccination certificate, which undeniably relates to the horse, completed, signed and stamped on each line by a veterinary surgeon, who is not the owner of the animal.

• It must state that the horse has received two injections for primary vaccination against Equine Influenza given no less than 21 days and no more than 92 days apart.

• Thereafter, booster injections must be given annually.

• The first injection for primary vaccination must have been given before the horse may play at any club or in any tournament.

**Easy way to remember the HPA protocol**

• First vaccination now
• Second vaccination one month later
• Annually from then on
Equine Herpes Virus (EHV)
There are 4 types of Equine Herpes Virus, but it is EHV1 and EHV4 that are the most concerning.

There are three disease syndromes that EHV can produce:

- Respiratory disease
- Neurological disease
- Abortion

EHV Respiratory
Both EHV1 and EHV4 can produce respiratory disease. It presents as an upper respiratory tract infection seen as fever, lethargy, coughing and a nasal discharge. Outbreaks of EHV respiratory disease is often seen on competition and racing yards where young horses are travelling, competing and mixing with other horses on a regular basis. Affected horses usually recover uneventfully but on occasion the primary viral infection can predispose to secondary bacterial infection or develop into more severe forms of the disease. Older horses can become infected with EHV and spread the virus without showing clinical signs. EHV also has the potential to remain latent within the horse from weeks to years prior to shedding, which is believed to be stimulated by any of a number of factors including stress.

Vaccination protocol for EHV respiratory disease

- Two vaccinations 3-6 weeks apart
- Booster every 6 months

EHV Neurological
Herpes neurological disease is due to EHV1 and usually follows on from an outbreak of the respiratory disease. It occurs rarely in the UK, but is devastating when it does. Affected horses initially present with an increased temperature and progressive ataxia (wobbliness) and weakness of the hindlegs. Severely affected animals deteriorate quickly to a point where they are unable to stand and are often euthanased. Some less affected horses will survive. There is currently no vaccine registered for the neurological strain of EHV1 in the UK.
EHV Abortion
Abortion due to EHV1 occurs in the last trimester of pregnancy and once again often follows the respiratory disease, although this may not be noticed. The aborted foetus and placenta is usually normal in appearance and often the abortion happens without any other clinical signs. The incidence of herpes abortion can be reduced by vaccinating pregnant mares and by keeping pregnant mares away from other stock.

Vaccination protocol for EHV abortion

- Vaccinate mares at 5, 7 and 9 months gestation