

Editorial Board

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Returning to (new) normal

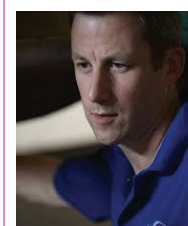
The last few months have been the most tumultuous that most will have seen in their careers. Amidst a great deal of confusion and conflicting opinion, veterinary work effectively came to a halt for a few weeks, then practices had to feel their way back into offering a service while ensuring the safety of their staff and clients. There were anecdotal reports of animal welfare being compromised for fear of endangering human health. We are fortunate in equine practice that we typically work out of doors and are more able to maintain a physical distance from other clients; however, there are still huge challenges with adapting to the 'new normal' ways of working. Many vets remain furloughed and have had a significant break from clinical work. Support staff are thin on the ground in many practices and those that have remained working have been placed under considerable pressure. While we probably all have reservations over how things are going to continue to progress into the back end of the year, this issue of *UK-Vet Equine* provides a refreshing reminder that life goes on and horses continue to suffer the same ailments. Common things remain common, and the articles in this edition will be of relevance to all in equine practice.

Fran Henson from The Animal Health Trust provides an excellent overview of back issues in an article which discusses investigation, diagnosis and treatment of these prevalent pathologies. The importance of obtaining an accurate diagnosis of the precise pathology is emphasised, as without one, the most appropriate treatment option may not be selected.

Emily Haggett from Rosssdales outlines what we know, and also a lot we don't know, about the prevention and management of equine gastric disease in foals. A lot of new data have been published on equine gastric disease in adult horses recently and Emily provides a very helpful update on where this leaves us with respect to the condition in foals, highlighting some important additional considerations in neonatal and younger equines.

Tim Barnett, also of Rosssdales, takes a close look at disease of the incisors and canines. Traditionally dental work has focused on the cheek teeth which are more susceptible to disease, but Tim highlights the importance of managing the teeth at the front of the mouth that are arguably more prone to external traumatic events and damage from bits and tack. The principles of investigating these teeth are the same as with the cheek teeth but require consideration of the specific injuries and disease states that affect them. In the final article of this issue, Imogen Johns from B and W Equine Hospital, provides an excellent practical guide to performing thoracic ultrasonography. This is a procedure that is frequently overlooked in first opinion practice, but Imogen highlights the value of ultrasonographic examination of the adult or foal thorax in identifying both pleural and parenchymal lesions. She explains how initial screening can typically be performed with equipment readily available to most equine practitioners, with follow-up more advanced imaging performed using more specialised equipment, as required. Speaking from personal experience, pleuropneumonia particularly can be readily identified in the field and its prompt diagnosis can be life-saving. Thoracic ultrasonography should be considered a common technique in certain situations such as stud premises where infection with *Rhodococcus equi* has been a problem.

Hopefully these articles will provide inspiration for those who are now back at work and encourage them to challenge their approach to some common conditions. For those who may still be furloughed, shielded or otherwise occupied, the articles hopefully provide some reassurance that when they return to work, horses and their pathologies will remain the same even if many other aspects of our professional life are rather different. **EQ**



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