

Equine Herpes Virus (EHV) Fact Sheet

EHV causes four clinical syndromes:

- 1) Respiratory
- 2) Abortion
- 3) Neonatal foal death
- 4) Neurological disease – Equine Herpes Myeloencephalopathy (EHM) may or may not be related to previous or on-going respiratory disease

Respiratory Disease: What to look out for

- High temperature. (Fever)
- Coughing
- Nasal Discharge
- Generally unwell, not eating or drinking normally.

Neurological Disease: What to look out for

- Change in behaviour pattern.
- Incoordination of the hind (and occasionally fore) limbs
- Urine retention/dribbling - can present as mild colic
- Bladder weakness
- Recumbency (inability to rise)
- Neurological signs may be preceded by fever and respiratory signs.

Transmission: How is the disease spread?

- Aerosol – most common route. Inhalation of droplets from coughing and snorting
 - Shedding can last typically 7-10 days but can persist much longer
 - Therefore at least 28-day isolation period is recommended after diagnosis, take veterinary advise
- Indirect Transmission – Fomites
 - Virus can be live in the environment for a couple of weeks.
 - Fomites (e.g. people, tack, yard equipment) can pass the virus between horses.

Incubation Time:

- May be as short as 24hrs but typically 4-6 days but *can be longer*

Prevention:

- Maximise Biosecurity. (**See advice sheet**)
- Seek veterinary attention immediately if disease is suspected.
- STOP all movements on and off the premises until your vet advises and for at least 28 days
- Stress reduction by avoiding physiological stress: maintain social structures, avoid prolonged transport, relocation, poor nutrition, parasitism, environmental exposure and en masse weaning of juveniles. If you have pregnant mares take veterinary advise.
- Disinfect and destroy bedding; clean and disinfect premises, equipment and vehicles used for horse transport.