

Equine Vaccination Protocols

For the vast majority of our equine clients, we recommend vaccinating adult horses in the spring with a “4-Way” or “5-Way” product along with a West Nile vaccine. Typically, a “4-way”(EEE/WEE, Tetanus, Influenza) vaccine is administered to pasture horses and foals. A “5-way” (EEE/WEE, Tetanus, Influenza, and Rhino) vaccine is administered to 4-H, exhibition, and breeding or boarding barn horses. Depending on the risk, these vaccines may be repeated in 6-month intervals. For the 4-H clients, we also vaccinate annually for Rabies virus. Additional information and guidelines on core and non-core vaccines can be found below. Unfortunately, each client and horse may need a unique vaccination schedule, so we highly recommend consulting a WVCS veterinarian.

Core Vaccinations:

Eastern/Western Equine Encephalomyelitis (EEE/WEE):

Recommended for foals as a primary 3-dose series beginning at 4-6 months of age, with 4-6 week interval between first and second doses. Third dose administered at 10-12 months of age in the spring. Adults should be revaccinated yearly, prior to the onset of mosquito season, in the spring. Pregnant mares, previously vaccinated, need one dose 4-6 weeks prior to foaling. Pregnant mares with unknown vaccination history need a 2-dose series with 4 weeks interval between doses, and a third dose 4-6 weeks before foaling. This is included in a “4-way” or “5-way.”

Tetanus

Adult horses with unknown vaccination history should receive a primary 2-dose series of tetanus toxoid with a 4-6 week interval between doses. Vaccinate annually after. Pregnant mares previously vaccinated against tetanus should receive annual vaccinations 4-6 weeks prior to foaling. Pregnant mares of unknown vaccination history should receive a 2-dose primary series of tetanus toxoid with a 4-6 week interval between doses. Revaccinate 4-6 weeks before foaling. Foals of mares vaccinated against tetanus while pregnant need a primary 3-dose series beginning at 4-6 months of age. A 4-6 week interval between first and second doses is recommended. A third dose should be given at 10-12 months of age. Foals with unvaccinated mares need a primary 3-dose series beginning at 3-4 months of age, with a 4-6 week interval between first and second doses, and a third doses given between 10-12 months of age. This is included in a “4-way” or “5-way.”

West Nile

Adult horses without previous vaccination need a primary series of 2 doses, with 4-6 week interval between doses and annual vaccination after. Pregnant mares with prior West Nile Virus vaccination need vaccination at 4-6 weeks before foaling. Pregnant mares with no prior West Nile Virus vaccination need a primary series of 2 doses, with a 4-6 week interval between doses.

Rabies

Currently required for 4-H horses in the state of Indiana. Adult, previously unvaccinated horses receive a single dose that is boosted annually. Pregnant mares, previously vaccinated against rabies, need vaccination 4-6 weeks before foaling or prior to breeding of the mare. Foals receive a primary 2 dose series, given on or after 6 months of age with a second dose 4-6 weeks later.

Non-core/Risk-based vaccinations:

Equine Herpesvirus (Rhinopneumonitis)

Equine herpesvirus type 1 (EHV-1) and equine herpesvirus type 4 (EHV-4) infect the respiratory tract causing infection consistent with pneumonia. A 6-month vaccination interval is recommended for: Horses less than 6 years of age, horses on breeding farms or in contact with pregnant mares, horses housed at facilities with frequent equine movement on and off the premises, and performance or show horses at high risk. The product we recommend is FluVac Innovator 5-way.

Additionally, EHV-1 can cause abortions. We strongly recommend vaccinating adult pregnant horses for equine herpesvirus at 5,7, and 9 months of gestation with a product labeled for use in pregnant mares to aid in the prevention of abortion due to equine herpesvirus type 1 (EHV-1) infections, as well as to help prevent respiratory infections caused by EHV-1p and EHV-1b. The product we recommend is Pneumabort K.

Equine Influenza

One of the most common infectious diseases of the respiratory tract of horses, equine influenza is highly contagious and spread through aerosolized droplets dispersed by coughing. We strongly recommend vaccinating for this disease. This is included in a “4-way” or “5-way.”

Strangles

A highly contagious disease spread from horses to horse via direct and indirect contact. Infection can cause a severe inflammatory response resulting in fever, difficulty eating, enlarged lymph nodes and nasal discharge. We recommend vaccinating with an intranasal vaccine for Strangles.

Potomac Horse Fever

Also known as equine neorickettsiosis, PHF is a seasonal disease occurring between late spring and early fall. Clinical signs are variable and can include fever, diarrhea, laminitis, and colic. Formerly considered to be only in the eastern US, the disease has been found to be across the United States. Consult your veterinarian regarding vaccination.