



# Park Veterinary Centre

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## EQUINE SEDATION FOR CLIPPING

It would appear from our records that over the last few years the sedating of horses/ponies for clipping has become more common. Therefore we felt it prudent that a few guidelines should be made available to our clients in order to make the process go smoothly (for both client and vet) and to minimise risk of injury to horse and operator.

### 1) SAFETY

#### **Horse**

Ground Surface – preferably normal bedding or rubber matting, if needs be manege surface/grass. (Proximity to electrical supply must be taken into account). If needs be the horse could wear knee boots up until the point when the legs are clipped (if appropriate).

Large Working Area – without ‘obstructions’ fitted to wall or floor, sharp objects and glass.

High Ceiling – Safe ‘tying up’ point (directly onto twine – quick release knot)

#### **Operator**

Clothing protection affording some form of ‘padding’ in important areas (cricket pads can be useful!)

Footwear - sensible e.g. boots preferably with steel toecaps.

Headwear – hard hat makes sense (or cycle helmet).

Clippers- These should be recently serviced and used with a circuit breaker and an extension lead (of satisfactory length). Clippers should also have a long lead that doesn’t get tangled in ‘sedated’ horse’s legs. It is very important to minimise the risk of any form of electric shock for either horse or operator (the quickest way of making horses detest clipping). Cordless clippers (rechargeable) make most sense.

## 2) EFFICIENCY

- i) Make sure the clippers and extension lead are in good working order and are tested just prior to the horse being sedated/vet's arrival, (preferably not near the horse). If cordless ensure battery is fully charged.
- ii) The horse must be in a clean dry state (recently groomed) and calm (not sweating) prior to the intravenous injection or (sedative paste).
- iii) In order to achieve the best results in the minimum length of time, two operators could clip simultaneously. (Most i/v sedation lasts approximately 30 minutes). Ideally at least two adults should be present at all times, one to hold the horse/lift the heavy sedated head etc.
- iv) The area should be well lit (multiple fluorescent tubes) or natural daylight taken advantage of. Therefore a vet visit for sedation should preferably be arranged to occur between 9am and 2pm.
- v) The correct sequence of clipping is important. Intravenous sedation takes approximately 2 minutes to take effect and the maximum effect occurs between 5 and 15 minutes post injection. Thereafter the effect gradually wears off and there is usually little worthwhile effect after 40 minutes (post injection). Consequently the operator should start on a 'safe' area of the horse e.g. shoulder/trunk and move to the difficult areas between 5 and 15 minutes post injection (i.e. neck, tummy, stifle folds and arm pits and head where appropriate). In our opinion sedated horses should either not have their head clipped out at all, or at the very most have a half head clip. (The head is in fact the 'least sedated' part of the horse – looks are deceptive!)

## 3) COST

Sedating a horse even in the correct manner and the correct surroundings can be a relatively expensive procedure (approximately £45 minimum for a 500kg horse without visit fee). However following the points mentioned under the heading 'efficiency' will help to keep the costs to a minimum, particularly by avoiding 'top-up' doses of further sedation at that clipping. It must make sense to consider having other procedures performed whilst the horse is still sedated (preferably at the end of the clipping) e.g. teeth rasping, sheath cleaning, mane pulling, freeze-branding etc. At larger yards, shared visits obviously help to reduce visit fees. The veterinary surgeon performing the intravenous sedation would be expected to remain on the yard, or close by, for approximately 5-10 minutes. It is possible, if organised correctly, that the vet will be present for the duration of the clipping where a shared visit has been arranged and the sedation is performed first. In addition this would mean that the vet would be able to carry out any of those procedures mentioned above whilst the horse is still slightly sedated.

#### **4) ADMINISTRATION OF ORAL SEDATIVE**

**e.g. Sedalin paste or acetylpromazine tablets (A.C.P.)**

Please note that this form of sedation cannot be relied upon to produce a consistent effect in terms of general 'sleepiness' and removal of aggressive response. Occasionally the horse or pony can in fact become more intransigent/aggressive. Therefore where potentially dangerous procedures such as clipping/mane pulling/trailer loading are carried out using this method of sedation, the operator has to accept the attendant risk. Increasing the dose does not necessarily alter the response!

The horse should be kept in a quiet, preferably darkened, area for approximately 30-40 minutes after oral administration of acetylpromazine, in order that sedation can take effect. Any form of stimulation (noise, light, tactile) during that period will diminish the sedative effect.

Care should be taken when administering acetylpromazine to males, particularly entire males and the drug should not be given to breeding stallions.

