The equine herpes virus has five different strains; the main strains of concern are Equine Herpes Virus 1 (EHV-1) and Equine Herpes Virus 4 (EHV-4).

**How does the disease spread?**

The vast majority of horses will be exposed to the virus during their first year of life, and will develop low grade respiratory disease which generally, in uncomplicated cases, will resolve in 1-2 weeks. These horses will go on to develop short-term immunity to the virus.

Infection is spread by the inhalation of infected droplets or eating contaminated material. Infected horses shed the virus in nasal secretions and abortion products, such as the placenta, aborted foetus and uterine discharges. The virus can remain in the environment for up to two weeks.

The immune system, however, often fails to eliminate the virus from the horse’s body completely and as a result, the horse will then remain latently and asymptomatically infected with herpes virus for life (these horses are called silent carriers). These inapparent infections can be reactivated later in life during periods of stress, such as, periods of poor nutrition, heavy parasite infestations, and lengthy periods of transport or stressful herd situations.

When the virus is reactivated the horse may not show any signs of illness and still shed the virus, therefore, he becomes infectious to other horses. This explains why outbreaks of Herpes virus can occur in a closed herd situation, without the need for introduction of new animals.

**Clinical signs**

**EHV-1** is the most serious of the strains of Herpes virus as it has the ability to target the respiratory, reproductive and nervous systems in the horse and can affect either individuals or large groups of horses.

**Respiratory disease**

EHV-1 is a regular cause of ‘the common cold’ in young horses. They normally present with varying degrees of fever, nasal discharge, inappetence and depression. The majority of these infections are mild but can result in large numbers of horses, especially weanlings up to 3-year-olds, becoming infected. EHV-2, EHV-4 and EHV-5 can all also cause respiratory disease, which is generally mild in severity.

**Neurologic signs** range from temporary lack of coordination, urinary incontinence, rear limb weakness (sitting), complete paralysis and death.

**Common clinical signs may include:**

- Fever, depression, inappetence, upper respiratory infection, nasal discharge and abortion.
- Neurologic signs range from temporary lack of coordination, urinary incontinence, rear limb weakness (sitting), complete paralysis and death.

Equine Herpes virus is a notifiable disease in Australia. If you suspect your horse is suffering from the abortion or neurological effects of the disease, you need to contact your veterinarian who will then contact Biosecurity Queensland.
Abortion

EHV-1 and occasionally EHV-4 can cause abortion, which usually occurs in the last four months of gestation, but can occur as early as four months gestation. The mare will normally abort a foal, often still within the placenta 10 days to 12 weeks after being infected with the virus. Often the mare will not show any signs of being ill before aborting the foal. Some mares if infected in late pregnancy may deliver a live foal, however these foals are often born with severe disease and often die despite intensive veterinary treatment. These abortion products and foals are also a major source of infection to other foals and horses on the same property.

Neurological disease/Myeloencephalopathy

Neurological signs associated with EHV-1 are uncommon, but can be life threatening. Horses showing neurological symptoms will often be housed on a property that has had an outbreak of respiratory illness or abortions within the last few weeks. Symptoms often appear suddenly, approximately 6-10 days post-infection. Mild cases become weak and slightly wobbly in the hind legs and can dribble urine. More severe cases show weakness and paralysis of the hind limbs, which often results in the horse sitting like a dog and being unable to stand. Even though the neurological symptoms appear suddenly, they tend to stabilise in the first 24-48 hours. Most horses with the neurological form of EHV-1 do not have a fever.

Diagnosis

Herpes is a notifiable disease in Australia. If you suspect your horse is suffering from the abortion or neurological effects of the disease, you need to contact your veterinarian who will then contact Biosecurity Queensland. EHV is specific to equines and it is not transmissible to humans.

EHV Prevention

Prevention of Equine Herpes virus can be managed by taking several steps:

1. Isolate:
   Prompt isolation of suspect cases and the horses that have been in contact with the sick horse will help to decrease the risk of further infection and disease. These in-contact horses should be isolated for a minimum of one month and pregnant mares should be isolated until they have foaled.

2. Vaccinate:
   Whilst vaccination does not protect against the neurological form of EHV-1, it can reduce the severity of clinical signs. Vaccination of pregnant mares is recommended at 5, 7 and 9 months of pregnancy and will help to reduce the risk of abortion. Vaccination of horses that are required to travel extensively for competition or breeding is also recommended.

3. Quarantine:
   New additions to the property should be isolated and quarantined for a 21 day period prior to coming into contact with any horses on the property.

4. Separate pregnant mares:
   Pregnant mares should be kept separate from other horses on the property, especially weanlings and yearlings.

5. Minimise stress:
   Good management practices, such as regular worming, good nutrition and minimising lengthy periods of transport will help to reduce the incidence of the virus.

Whilst Equine Herpes virus is something that horse owners and breeders need to be aware of, simple management practices along with good biosecurity and vaccination can significantly reduce the risk of your horse developing any form of the disease.