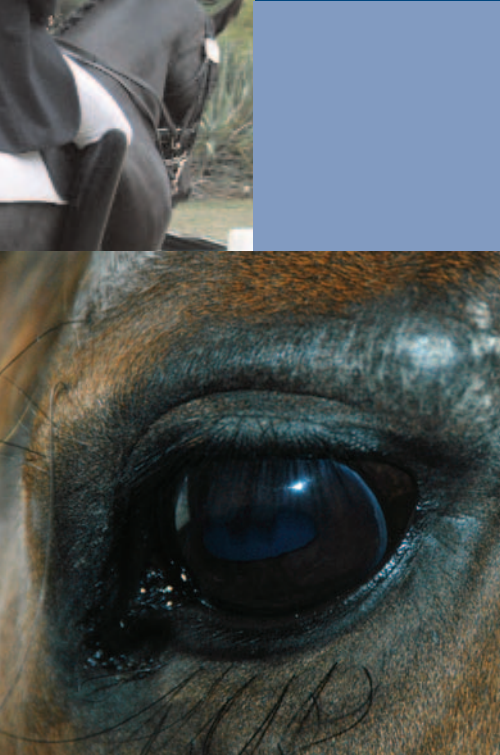


AHT Equine

Iridium 192

brachytherapy



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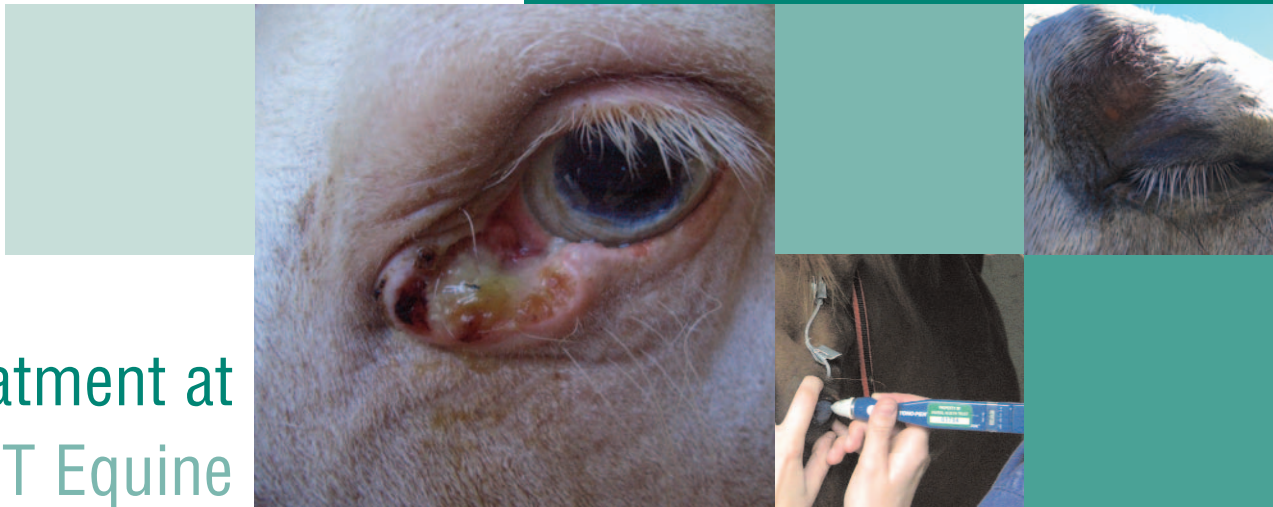
Registered Charity No. 209642



Iridium 192 brachytherapy

AHT Equine

Treatment at AHT Equine



The Animal Health Trust's radiotherapy capabilities now include the use of Iridium-192 brachytherapy. This approach has a success rate of 87 to 98% for equine skin tumours that do not respond to other types of treatment, or for tumours where recurrence is a major problem, including sarcoids, fibrosarcomas, periocular squamous cell carcinomas and melanomas.

Iridium-192 treatment is a form of topical radiotherapy and is particularly applicable for tumours in locations unsuitable for surgical or other forms of topical or systemic treatment. Sarcoids are the most common form of cancer in the equine species and, although they are unlikely to spread to other body systems, they can be locally invasive and frequently recur following standard treatment options. They are not only unsightly, but can often become painful related to trauma and therefore limit the work capability of the horse. In addition, periocular tumours can affect the function of the eye.

Veterinary practitioners wishing to refer a case for Iridium-192 brachytherapy should contact AHT Equine on 08700 502430.

Horses admitted for Iridium-192 brachytherapy are likely to be in the clinic for approximately 7–10 days. On Day 1, the horse will be admitted and clinical staff will carry out a detailed examination of the horse and a consultation with the owner. Whenever possible information about tumour size and location will be obtained from the referring veterinary surgeon prior to offering an appointment. This will allow the appropriate treatment to be planned and the wire activity calculated and ordered. The exact treatment protocol will depend on the size and location of the tumour, the tumour type and correspondingly the wire activity required to treat the calculated fixed volume of tumour. The wires will be pre-ordered for each case.

Placement of the wires will usually be under sedation, using local anaesthesia as appropriate. However, general anaesthesia may be required in some cases. Preparation of the tumour, including debulking as necessary will be undertaken. An experienced member of our yard staff will hold the horse throughout the procedure, and exposure to radiation will be monitored. While the wires are in place, the horse will be monitored and kept stabled in a specific yard which is a designated controlled area.

After the wires have been in place for the calculated treatment time they will be removed under standing sedation. There is no residual radiation within the horse post treatment and so they can be discharged shortly thereafter. Following treatment, the tumour will gradually reduce in size over the forthcoming weeks to months, during which time Trust staff will continue to advise the referring veterinary surgeon. If necessary, a follow up examination can be arranged.