



Equine Colic

Every horse owner fears the word colic. Mysterious and historically difficult to diagnose and treat, equine colic simply refers to a horse with belly pain. Symptoms can range from mild (a horse that refuses to eat, paws the ground, and looks at its sides) to severe (a horse that flings himself to the ground, rolls, and is violent in behavior). The reason that colic remains mysterious is that it is so difficult to determine the cause of the abdominal pain and predict whether the problem will respond to medical treatment or will require surgery.

Many equine colic cases resolve spontaneously and may not be noted by the owner. The horse may be up and down, roll a few times, or stand quietly separated from his herd mates. By the time the owner notices the horse acting unusually, the cramps have resolved, and the horse returns to normal. This would be the case with simple gas colic and generally occurs when a horse has had a change in diet and the GI system has not adapted adequately to the change.

More severe colic's can result when an area in the intestinal tract becomes partially obstructed or becomes inflamed. This can occur if the horse accidentally ingests a foreign object or if he becomes dehydrated and the intestinal contents become dry. In this case, colic symptoms may be more severe, the horse may develop a rapid heart rate, dehydration, and severe pain. These horses generally require hospitalization, very large doses of IV fluids, and repeated stomach tubing with lubricants and gas dissolving medications.

Surgical colic's occur when a portion of the horse's intestinal tract becomes wrapped around an organ or an abdominal mass or becomes twisted inside the horse's abdomen. These horses exhibit the most severe symptoms and it is often difficult to keep them on their feet and keep them from rolling violently. These horses often end up euthanized unless they are fortunate enough to have an owner who is willing and able to transfer them to a surgical facility. From our area, this generally means a 5-7 hour trailer ride.

Colic diagnosis is easy but diagnosing the cause of the colic is more difficult due to the large size of the equine abdomen. The sheer size and volume of the equine abdomen make it impossible to visualize the entire abdominal contents, so pathology can often be suspected but cannot be confirmed until the horse is taken to surgery. A typical colic workup will include evaluation of the heart rate, respiratory rate, intestinal sounds and movement, stomach tubing, rectal examination, laboratory evaluation, and abdominal ultrasound.

Our clinic sees many colic cases each year and fortunately most of them resolve with medical treatment. A number of colic cases are referred for surgery, and most of these are successful but there is no guarantee. Sadly, others are older horses who are not capable of the travel required to a referral surgical hospital. This month we would like to say goodbye to three of our long-term equine patients who passed away due to colic.