

COLIC: WHAT YOU NEED TO KNOW



UNDERSTANDING COLIC

WHAT IS COLIC?

The term "colic" means only "pain in the abdomen" or "pain in the belly". There are many causes for such pain, ranging from the mild and inconsequential to the life-threatening or fatal. One of the problems with equine colic is that it can be very difficult in the early stages to distinguish the mild from the potentially fatal. This is why all cases of abdominal pain should be taken seriously right from the onset.

MAJOR TYPES OF COLIC

Impaction colic: This is the term used when the intestine becomes blocked by a firm mass of food. Impactions most commonly occur in the large intestine at one of the flexures. This is a fairly common type of colic which usually resolves relatively easily with appropriate treatment. However, an impaction may be just the first obvious sign in a more complicated case.

Gas colic: Sometimes gas builds up in the intestine, most commonly in the large intestine and/or caecum. The gas stretches the intestine, causing pain. Gas colics usually resolve fairly easily with appropriate treatment, although it is essential to ensure that there is no underlying reason for the problem.

Spasmodic colic: Some cases of colic are due to increased intestinal contractions, the abnormal spasms causing the intestines to contract painfully. These cases usually respond fairly well.

Displacement/volvulus/torsion ("twisted gut"): In a "displacement", a portion of the intestine has moved to an abnormal position in the abdomen. A "volvulus" or "torsion" occurs when a piece of the intestine twists. The suspension of the small intestine from the mesentery (the "net curtain") and the unfixed nature of much of the large intestine predispose horses to intestinal displacements and torsions. Except in rare cases, these types of colic cause a total blockage of the intestine and require immediate surgery if the horse is to survive. In the early stages of a displacement/torsion colic, the signs may be similar to those of a horse with one of the more benign causes of colic. That is why it is important to take all cases of colic seriously, and to seek veterinary advice at an early stage.

Enteritis/colitis: Some cases of abdominal pain are due to inflammation of the small (enteritis) or large (colitis) intestines. These are serious medical cases and require immediate veterinary attention.

Gastric distension/rupture: When a horse gorges itself on grain or, even more seriously, a substance which expands when dampened like dried beet pulp, the contents of the stomach can swell. The horse's small stomach and its inability to vomit mean that in these circumstances the stomach may burst. Once this has happened death is inevitable. If you suspect that your horse may have gorged itself on concentrate feeds, seek veterinary advice immediately.

"Unknown": In many cases of colic it is impossible to determine the reason for the pain. Symptomatic treatment, close monitoring and attention to any adverse developments usually lead to resolution of the problem.

SIGNS OF COLIC

The signs of colic in horses range from almost imperceptible in mild cases to extremely violent in severe cases. The following list includes the most common signs:

- Lying down more than usual
- Getting up and lying down repeatedly
- Standing stretched out
- Turning the head towards the flank
- Repeatedly curling the upper lip
- Pawing the ground
- Kicking at the abdomen
- Rolling

WHAT TO DO

The severity of the case will dictate what you do when you find your horse showing signs of colic. If he is behaving violently call your veterinarian immediately. Violent behaviour usually equates with great pain which usually equates with a serious case of colic. Time is of the essence here. Not all horses show the same severity of signs with the same type of colic, though, and some horses may become quite violent with a relatively "mild" case. If the signs of pain are less extreme, you can take a few minutes to observe the horse's appearance and behaviour before calling the veterinarian. **CALL YOUR VET** and be prepared to provide the following information:

- Temperature, pulse and respiratory rate;
- Colour of mucous membranes and capillary refill time (tested by pressing on the gums, releasing, then counting the seconds it takes for colour to return);
- Behavioural signs, such as pawing, kicking, rolling, depression, etc.;
- Digestive noises or lack of them;
- Bowel movements including colour, consistency and frequency;
- Any recent changes in management, feeding or exercise;
- Medical history including deworming and past episodes of abdominal pain;

Breeding history and pregnancy status if the patient is a mare, and recent breeding history if the patient is a stallion. It is important to take all food away from the horse until the veterinarian arrives. If he is nibbling at his bedding, find a way to prevent this. Walking the horse can be a useful way of distracting him from the pain, but he should not be walked to exhaustion. If the horse insists on rolling, there will be little you can do to prevent it. If possible, try to get the horse to an area where he will do himself the least damage when he rolls. But do not get hurt yourself. Do not administer any drugs until your veterinarian has seen the horse, unless he/she tells you to do so.

PREVENTING COLIC

The digestive system of a horse is a complicated series of interactions among many different organs. The small intestine alone is 60 feet long in your average size horse. This entire digestive network is suspended and nourished by a thin membrane called the mesentery. Any malfunction, displacement, twisting, swelling, infection, or lesion of any part of this complex body system is what we recognize as colic.

Colic is the number one killer of horses. It is not a disease but a combination of signs that alert us to abdominal pain in the horse. Colic can range from mild to severe, and in every case should be taken seriously. Many conditions causing colic become life-threatening in a relatively short period of time. Only by quickly and accurately recognizing colic and seeking qualified veterinary help can the chance for recovery be maximized.

Management can play a key role in prevention. The following guidelines can maximize a horse's health and reduce the risk of colic:

- Establish a daily routine including feeding and exercise schedules and stick to it.
- Feed a high quality diet comprised primarily of roughage where possible.
- Avoid feeding excessive grain and energy-dense supplements. (At least half the horse's energy requirements should be supplied through hay or forage. A better guide is that twice as much energy should be supplied from a roughage source than from concentrates.)
- Divide daily concentrate rations into two or more feedings rather than one large one to avoid overloading the horse's digestive tract.
- Hay is best fed free-choice.
- Set up a regular parasite control program with the help of your equine practitioner. Utilize fecal testing to determine its effectiveness.
- Provide exercise and/or turnout on a daily basis.
- Change the intensity/duration of an exercise regime gradually.
- Provide fresh, clean water at all times. (The only exception is when a horse is excessively hot. Then it should be given small sips of lukewarm water until it has recovered.)
- Avoid medications unless they are prescribed by your equine practitioner, especially pain-relief drugs (analgesics), which can cause ulcers.
- Check hay, bedding, pasture and environment for potentially toxic substances, such as blister beetles, noxious weeds, and other ingestible foreign matter.
- Avoid putting feed on the ground, especially in sandy soils.
- Make dietary and other management changes as gradually as possible.

- Reduce stress. Horse's experiencing changes in environments or workloads are at a high risk of intestinal dysfunction.

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