



Emergency conditions when you should call your veterinarian

Horses are flight animals, thus especially prone to injury, and although large and strong, they can be affected by numerous ailments. If you wonder whether your horse's condition classifies as an emergency, here are the most common situations that require immediate veterinary attention. If you are a long-time horse owner, you have probably encountered most if not all of these conditions.

1. Colic: Colic is a term for abdominal pain, and it is still the number one killer of horses. The origin of the problem can arise from various sources: gastrointestinal tract (obstructions due to sand, hard feed material, stones, torsion, ulcers), or other internal organs such as kidney and liver. Possible inciting causes include environmental or feed changes and stress. Signs can range from mild when the horse is not interested in food to severe when he is violently rolling on the ground. Immediate veterinary attention is needed for the evaluation of vital signs, level of pain, to provide appropriate pain control, to decompress and relieve pressure in the stomach by passing a stomach tube, together with other diagnostics. In severe cases, surgery or intensive care with intravenous fluids is necessary. Nowadays, many horse owners have some non-steroidal anti-inflammatory drugs (NSAIDs) such as Banamine or Bute on hand. Please do not give any medication without first talking to your veterinarian, for this can mask the clinical signs and assessment of the severity of the condition becomes very difficult. If your horse is uncomfortable, please do not wait long before you call. Horses when not eating and drinking can get dehydrated quickly, which makes the problem even worse, and might result in more expensive treatment.

2. Lacerations: Wounds occur often, most frequently on the lower leg, but also on the head and face or the chest and shoulder area. They can result in a significant amount of hemorrhage. If your horse is bleeding from a lower leg wound, you will be advised to apply direct pressure on the wound until the veterinarian arrives. This can be accomplished by applying a snug stable bandage. Wounds are especially serious and require immediate veterinary attention if in close proximity to, or over a joint or tendon. If the wound communicates with the joint or tendon sheath, these structures become infected, and prognosis for soundness becomes worse if aggressive treatment is not initiated immediately. Joint infections also may result in permanent lameness and loss of use of the horse. Your horse will need to be given a tetanus toxoid vaccination if it was administered more than 6 months before.

3. Acute lameness: There is a wide variety of reasons why horses become suddenly lame. Inciting causes include puncture wounds to the foot/sole (such as due to a nail), hoof abscess, laminitis (founder) and bone fractures. If your horse was sound yesterday, and non-weight-bearing lame today, you should call your veterinarian immediately.

4. Choke: Choke occurs when feedstuff gets stuck in the esophagus and the horse is unable to swallow due to the obstruction. When this happens, horses seem pretty uncomfortable, with a mostly green and mucoid discharge from the nose (usually both nostrils), they do not want to eat, tend to stand with their head and neck extended, might breathe heavily, and have coughing fits. Bad teeth, eating too much too fast, and previous esophageal trauma are some of the inciting causes.

5. Eye injury: The location of a horse's eye makes it especially prone to injury. The most common emergency conditions that affect the eye include ulcers, uveitis, and eyelid lacerations. If your horse's eye is swollen, has a discharge (tearing), squinting, and looks uncomfortable, call your veterinarian immediately for an evaluation. If left untreated, corneal ulcers and uveitis can result in blindness. Please note that eyes are best examined in a dark, quiet environment, so have a shady stall or barn ready where a thorough ophthalmic examination can be performed.

6. Tying up (exertional rhabdomyolysis): This painful condition happens when horses are pushed beyond their training level, or exercised hard after a long time of rest and overexert themselves. Affected animals are unable to move, or move with a very stiff gait, their muscles become hard and hot, with fasciculations (trembling). The clinical signs resemble the ones of colic, and sometimes these horses are mistaken for being colicky. Giving anti-inflammatory medications without talking to a veterinarian might make things worse. In some cases, affected horses have to be rehydrated with intravenous (IV) fluids in order to flush the toxins out of the kidneys preventing permanent damage caused by products of the broken muscle cells.

7. Reproductive emergencies: Most broodmares don't have problems with foaling, but if something goes wrong, things can go downhill quickly. Dystocia (difficulty giving birth), uterine prolapse, hemorrhage post foaling or a retained placenta are just some examples of the emergency conditions that affect the reproductive tract.

8. Foal emergencies: Horse babies are extremely cute and cuddly, but very fragile at the same time. A foal that's not nursing has to be seen immediately by a veterinarian, since not getting enough colostrum (first milk) means there are fewer antibodies in the blood to fight infections. Also, a colicky foal might have a meconium impaction and things can turn to the worse very quickly. Other conditions such as foal diarrhea, or contracted tendons also warrant a phone call to your veterinarian in order to assess the foal as soon as possible.