

## **Equine Emergencies What Horse Owners Should Know**

By Doug Thal DVM DABVP

I define an “equine emergency” as any equine health problem for which a treatment delay might endanger the horse’s future quality of life or soundness. Thanks to a combination of mass, power, speed and highly developed flight response, horses have a unique ability to suffer severe traumatic wounds. For their size, they are also very sensitive animals. Equine limbs are prone to lameness, and their intestinal tracts are prone to conditions causing colic.

As a horse owner, you should be well prepared for common equine emergencies. This preparedness is founded on basic veterinary knowledge, access to the right supplies and equipment, and a solid relationship with your local equine veterinarian.

In this article, I explain the importance of the veterinary–client–patient–relationship (VCPR) as it pertains to equine emergencies - a subject that is rarely discussed and is very important. I will also briefly discuss what I consider to be the most significant and common types of equine emergencies and some skills that may be helpful for you to learn.

### **THE VETERINARY-CLIENT-PATIENT-RELATIONSHIP (VCPR)**

The most important thing you can do as a caretaker for your horse is to have a good relationship with your equine veterinarian. They are ultimately your best resource in an emergency.

Mutual trust and good communication between you and your veterinarian are critical, especially during the stress of a veterinary emergency. Mutual trust and good communication contributes to the best possible outcome.

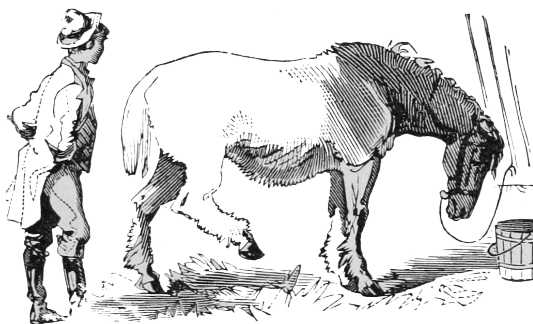
Here are some ways you can do your part:

**1. Contact Information.** Keep your veterinarian's contact information in your cell phone and in conspicuous places for caretakers. Often horse owners also keep vet contact numbers on the stall door or on the barn bulletin board. Know the protocol for reaching your veterinarian in an emergency.

**2. Early Contact.** Call at the first sign of a problem, not when it has progressed to a crisis! Even if your veterinarian does not recommend an examination, at least they are put on notice and can advise you on a course of action.

**3. If You Are Away:** Be sure to communicate your desires should your horse suffer an illness or accident while you are away or unavailable. Provide your vet and your caretaker with all your contact information so you can be reached in an emergency. If you will be unreachable, try to provide written guidelines for treatment limits and philosophies. Be sure to identify the person who will be the decision maker in your absence. Many horse owners leave a credit card on file with their vet or caretaker to cover unexpected veterinary expenses.

**4. Horse Owner Self-Help.** If you call your veterinarian when you notice a problem, often your horse will not need to be seen. The safest and best thing for a horse is to be directly examined by a veterinarian, because we can only learn so much over the phone.



However, for clients who I know and trust and who would prefer to avoid the expense of a call, I am sometimes willing to help manage simple problems without a visit. Generally, I don't charge my regular clients for telephone help. With good information and communication, I can often help make a determination as to whether or not the horse needs to be seen on an emergency basis. I am always careful to follow-up to ensure resolution of the problem. Talk to your veterinarian about how they handle these situations, because veterinarians may differ in their approach.

**5. Cost/Finances.** Equine veterinary practice is expensive to deliver, and 24 hour emergency care is even more difficult and expensive to provide. You should

always anticipate being charged an emergency or after-hours fee. I try to give clients an estimate before I depart for the call, whether or not they ask for it. If cost is a concern, ask your veterinarian to give you an estimate and payment policy before they commit to the visit.

**6. Your Skills.** Be prepared to answer relevant questions about your horse's history, like last worming and vaccination. Learn to competently take and record your horse's temperature, pulse and respiration. All of this information can be helpful for your vet in trying to make a determination of the exigency of a call and the best course of action.

For a description of the skills I expect horse owners to be able to competently perform see:

<http://horsesidevetguide.com/the-whole-horse-exam>

<http://horsesidevetguide.com/wp-content/uploads/2014/09/Whole-Horse-Exam-Form-.pdf>

<http://horsesidevetguide.com/how-to-videos>

**7. Your Supplies.** A limited stock of supplies and equipment can be very helpful for a horse owner to have in an emergency. This is especially true for caretakers who live a long distance from a veterinarian. An inexpensive stethoscope and thermometer can be bought at a drug store. Basic use of these instruments is easy to learn, and can allow you to provide very useful additional information. Your equine veterinarian can help you assemble and maintain an inventory of supplies and equipment (an emergency kit).



For a list of items I suggest that you keep in your first aid kit see:

<http://horsesidevetguide.com/equine-first-aid-kit>

**8. Medications.** As with supplies, it may be helpful for horse owners to have a small number of medications handy in case of an emergency. However, you should have a basic understanding of how to administer them, their expected effect, and their limitations.

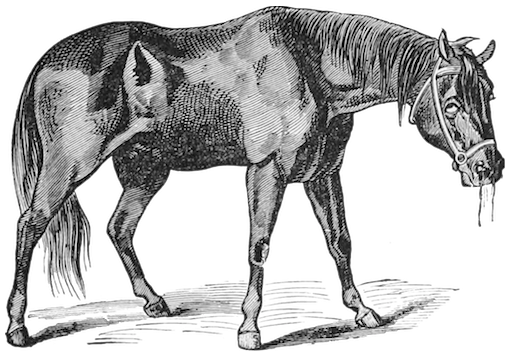
There is strong legal regulation on veterinarians with respect to dispensing prescription medications. Your veterinarian's willingness to dispense items will depend on the existence of a good VCPR. Improper or careless use of drugs and

veterinary equipment can be fatal to a horse and dangerous to handlers. I only dispense medications to clients who I trust and who fully understand their benefits and limitations. If I dispense a prescription medication for emergency use – such as Banamine® – I ask that my client call me before giving it to their horse.

For more information on this important topic, see my blog post: <http://horsesidevetguide.com/bute-banamine>

**9. Routine Preventative Care.** In order for me to advise a client over the phone regarding an emergency, it helps to have an established VCPR. This is why I like to do well-horse exams along with preventative care in both spring and fall. This routine care helps familiarize me with the owner, horse, and facility, and better prepares me in the event of an emergency. Periodic physical examination often allows me to diagnose some problems before they progress. I believe that periodic veterinary consultation on equine facilities, feeding, and management can improve equine well-being and reduce the likelihood of emergencies.

## THE MOST COMMON EQUINE EMERGENCIES



**EQUINE COLIC (ABDOMINAL PAIN):** Colic is simply the horse's demonstration of abdominal pain and is probably the most common reason I am called on an emergency basis. Colic is distressing for both horses and their owners.

It's important to recognize colic signs. Keep in mind that these can range from very subtle (like reduced appetite or laying down a little more than usual), to obvious signs (like rolling, pawing, or kicking at the belly).

Other important points about colic:

- Horses with signs of colic can be dangerous to handle because they can suddenly collapse, roll, paw or kick. Be especially careful when handling these horses. Sometimes, the best thing you can do is leave them alone until your veterinarian advises otherwise.
- If you see signs of colic, call your veterinarian immediately. Ideally you should do this before administering pain-relieving medications. Keep in mind that some pain relieving drugs will mask the

signs of colic, delaying proper treatment and giving horse owners a false sense of confidence.

- Be ready to describe the signs of colic and your physical findings (if you were able to safely take them), including temperature, gut sounds and gum color. Heart rate (pulse rate) is especially helpful information for horses in colic pain.
- 70% of colic cases are simple gas or spasm causing pain, and resolve spontaneously or with simple treatment or no treatment. Your veterinarian may ask you if you have access to a pain reliever and if so may ask you to give it and give the horse some time. Be sure to take feed away from a horse that has been treated with a pain reliever.
- Horses that do not respond to simple medical therapy require a proper diagnosis. Colic is just a sign of an underlying problem – usually abdominal pain, and our task as veterinarians is to identify (diagnose) what is causing the pain.

Some colic diagnoses may require emergency colic surgery. Colic surgery is expensive, now averaging about \$8k - \$10k nationally for surgery and the hospital stay. But the cost could be higher, and will depend on the specific diagnosis, the procedures performed and the complications encountered.

Colic surgery is a big financial and emotional commitment. I believe you should educate yourself about it, and be prepared to make the decision if you are ever faced with it.

*For more information about equine colic and colic surgery see my blog posts:*

*<http://horsesidevetguide.com/colic-surgery-what-you-should-know>*

*<http://horsesidevetguide.com/equine-colic-abdominal-pain-part-1>*

*<http://horsesidevetguide.com/equine-colic-abdominal-pain-part-2>*

**WOUNDS:** Wounds are also a very common equine veterinary emergency. If you have any doubt about the severity of a wound sustained by your horse, call your veterinarian immediately. Time is an important factor in the effective management of wounds.

The most important factor in assessing the severity of a wound is not how large the wound is, but where it is located and whether it might involve a critical structure like tendon, bone or especially a joint or tendon sheath. For years now, I have asked clients to e-mail digital photos of wounds to me. This is an excellent way for

me to distinguish between wounds I need to evaluate first-hand from wounds that the client can manage themselves.

Generally, potentially serious wounds are those that:

- Are near or involve a joint, tendon or tendon sheath, coronary band or the hoof itself. All but minor lower limb wounds should be considered emergencies;
- Involve the eye or eyelid; or
- Wounds that appear to be penetrating into the deeper tissues over the abdomen or rib cage.

Less serious wounds are those that are to the heavily muscled upper limb, chest or body and do not involve deeper structures.

Blood loss is rarely a life-threatening problem for horses. The vast majority of even large and apparently severe wounds stop bleeding before becoming life threatening. That said, it is important to be able to control bleeding if you must. The critical skill to know is how to apply direct pressure to a wound. This does not mean applying a tourniquet! It means consistent, firm pressure focused right on a bleeding vessel. You can do this with a finger and a thick wad of gauze or a pressure bandage with a wad of gauze focused only on the bleeding area.

For more information on equine wounds see:

<http://horsesidevetguide.com/drv/Topic/117/equine-wounds-what-horse-owners-should-know/>

**GENERALIZED TRAUMA OR SWELLING:** Cases of swelling of a location are common reasons for horse owners to call their veterinarian. Often, these are traumatic in origin but can be due to stings, snake bite, puncture wounds and local allergic reactions. Again, providing your veterinarian with good photographs can be helpful, in addition to providing the results of your whole horse assessment.

**LAMENESS:** Severe or non-weight bearing lameness is always an emergency. Mild lameness can often wait for a scheduled appointment. Sudden lameness should always be taken seriously and should usually prompt a call to your veterinarian.

Most lameness is in the foot, so always pick it up and examine it, feeling for heat in the hoof itself, and comparing the temperature of the affected side to the other side. Examine further up the limb and compare this to the other limbs. Stand in front and to the side and compare the lame limb to the others visually. Run your

hands up and down the limb, feeling for swelling, heat, pain, or wounds. Take your horse's rectal temperature. Learn to take digital pulse.

Provide all of this information to your veterinarian when you call. When dealing with severe lameness, always rest a horse in a box stall until the veterinarian can examine him or her.

The most common cause of sudden severe lameness is sole abscess and severe sole bruise. But laminitis, fractures, infected joints or tendon sheaths, and other problems can also cause non-weight bearing lameness.

For more information about equine lameness see:

<http://horsesidevetguide.com/drv/Topic/62/lameness-amp-the-lameness-exam-what-horse-owners-should-know/>

<http://horsesidevetguide.com/drv/Topic/219/subtle-or-hard-to-diagnose-lameness-what-horse-owners-should-know/>

• **EYE INJURIES:** Always consider conditions affecting the eye as emergencies. The eye is a vulnerable, sensitive, complex and vital organ. Disease processes of the eye can progress quickly, resulting in irreversible damage and potentially permanent blindness. The most common causes of eye-related emergencies relate directly or indirectly to trauma.

Other common conditions are fly irritation and Equine Recurrent Uveitis (Moon Blindness). Call your veterinarian immediately when your horse has an eye problem. Use a quiet, darkened stall and/or a fly mask to protect it until your veterinarian arrives.

For more information on the Equine Eye:

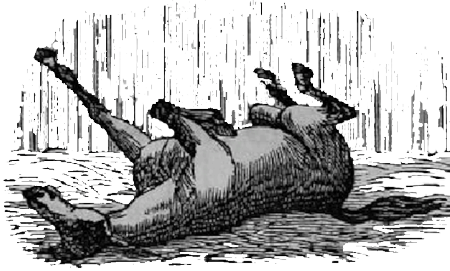
<http://horsesidevetguide.com/drv/Topic/87/the-equine-eye-what-horse-owners-should-know/>

Other examples of common equine emergencies that may require veterinary attention include:

• **CHOKER:** Esophageal obstruction, a/k/a choke is a common problem in older horses or horses fed pelleted feeds or beet pulp. When a horse is choking you often see nasal discharge with feed, severe salivation, and gagging.

• **GRAIN OVERLOAD:** This usually results from a horse gaining access to the grain storage supply. While colic can result from grain overload, the primary and most serious potential consequence is laminitis (founder). Evidence of laminitis (stiffness,

lameness, reluctance to walk) may not be visible for several days, and by then the severity of change in the hooves may be irreversible and fatal. Your vet may be able to lessen the likelihood of laminitis through early, proactive treatment.



- **DOWN OR CAST HORSE:** A relatively common complaint is a horse that has gotten down and unable to rise. This is especially common in older, arthritic or debilitated horses.

- **DIARRHEA:** This observation in the adult horse is uncommon but is also considered an emergency. It can be a sign of life threatening bacterial colitis, among other things.

## CONCLUSION

I have discussed above what I consider to be the most common and significant types of equine emergencies, but the variations are limitless. Ultimately, a horse owner must use common sense, knowledge and instinct to determine what constitutes an emergency. In addition, I created a mobile app called Horse Side Vet Guide, which can provide guidance in an emergency.

Remember that good communication with your veterinarian is a critical factor. Guidance is just a phone call away and can mean the difference between the life and death of your horse.

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