



WHAT TO DO:

COLIC



CALL US ON 01584
841 080

YOU'VE CALLED THE VET

WHAT CAN YOU DO WHILST YOU WAIT FOR US TO ARRIVE

We appreciate that this is a very stressful time in any horse owners life. Once you have made the call to us and explained you have a colic we will send our nearest vet to you. There are a few things you can do whilst you wait for us.

- Remove all feed.
- If possible move the horse to a flat, enclosed area. An arena or dry paddock is ideal.
- If the horse is stabled, make sure there is plenty of bedding to prevent injury.
- Walking the horse can be useful for some types of mild colics, but is of no use in severe colics and can be dangerous for the handler. If in doubt, the horse is best moved to a safe area away from obstacles and left until the vet arrives.
- Trying to stop the horse rolling rarely achieves anything and can be dangerous.
- Do not administer any treatment or medication
- Arrange access to transport for your horse just in case your horse need to be referred to an equine hospital
- Be careful – horses in severe pain do not respond normally to people/handling. Wear a hard hat & if you are unsure whether it is safe to handle your horse, put them in a safe area and wait for the vet to arrive.

THE VETERINARY EXAMINATION

Once we arrive, our vet will examine your horse. Examining a horse with colic, a number of factors will influence your vet's decision making process:

- **History** – is the horse prone to colic? Has it had previous colic surgery? Have there been recent changes in management/feeding? Number of droppings passed last 12 hours?
- **Type of horse** – age, sex, breed.

The above questions are usually asked whilst observing the horse prior to examination, we may even ask these over the phone. If the colic is particularly severe, the vet may deal with the horse first and ask the relevant questions later!

- **Severity of signs** – observe the horse first, what colic signs are being displayed?

CLINICAL EXAMINATION

- Heart rate (very important indicator of severity, over 60bpm usually indicates a more severe form of colic)
- Breathing rate
- Rectal temperature
- Abdominal sounds

- Mucous membrane (gum) colour
- Hydration status
- In severe colics, sedation may be required for a clinical examination to be safely performed. In most cases, the vet will try and obtain a heart rate first prior to sedation

Further tests may include:

- Rectal palpation (often most important test)
- Passing a stomach tube (reflux of fluid from stomach indicates blockage and therefore a more severe colic)
- Belly tap (useful if peritonitis suspected)
- Blood sample
- Abdominal ultrasound (can be very useful, especially in small breeds or youngstock where rectal palpation is not possible)

The information obtained from the history, examination and further tests all provide invaluable clues for the veterinary surgeon. Once this process has been completed, the veterinary surgeon has to make an informed decision about what to do next:

1. MEDICAL TREATMENT

Simple colics will often resolve with medical treatment. This may include painkillers, sedation and spasmolytics. For some medical colics, fluids may be given by either stomach tube or intravenously. Stomach tubing is the mainstay of treatment for impaction colics, and often needs to be repeated several times.

2. SURGERY

Some types of colic are immediate candidates for surgery. In cases where medical treatment alone is unlikely to be successful, surgery is the only treatment option. This would include strangulating obstructions of the small intestine and severe twists of the large intestine. Modern surgical and anaesthetic techniques have improved success rates with colics. However, a truly accurate prognosis cannot be given until the horse is opened up and the cause of the colic can be fully visualised.

3. EUTHANASIA

If surgery is urgently required but not an option, then euthanasia should be advised. Occasionally the colic may be so severe that the prognosis with any treatment, be it medical or surgical, is hopeless. In such cases, it is in the horse's best interest to be put down immediately.

4. THE GREY AREA

Unfortunately, not all cases of colic fit easily into one of the above categories. Certain types of colic can be managed medically in the initial stages, but may need surgery if they do not improve. These cases will require repeat examinations and careful management. An example of a type of colic that would fit this category would be a partial twist, or 'displacement' of the large intestine. Surgery is a big undertaking, both for the horse and financially, and should not be performed without a clear indication to do so.

Having a horse with colic can be very distressing and we hope this information sheet helps you prepare, should you have to deal with it.

**IF YOU SEE COLIC SIGNS CALL US ON
01584 841 080**

