



Colic – Types, Clinical Signs and When to Call For Help

Colic is always an emergency. Colic is defined as any abdominal pain that can come from any abdominal organ. Despite recent advances in diagnostics, prevention and treatment, colic remains the number one killer of horses. However, most (>90%) of colic episodes are mild and responsive to medical management.

The clinical signs of colic can vary greatly but generally include: Inappetance, looking, biting or kicking at the flank, pawing, rolling, or stretching out as if to urinate. If you notice any of these signs or are concerned that your horse may be colicky, call your veterinarian. During this time it is important to remove all food from the horse but continue to offer fresh, clean water at all times. While you are waiting for your veterinarian or organizing transportation to the hospital, if the horse is laying down quietly, let it be. If the horse is rolling around and in danger of self-trauma, try to get it up and walk it around. Some horses can be violently painful, if this is the case use extreme caution and avoid getting injured by the horse.

Do NOT attempt to pass anything into the horses' stomach or rectum. This may cause catastrophic damage and can lead to the demise of the horse.

There are several different types of colic: Intestinal dysfunctions, intestinal accidents and inflammation. Intestinal dysfunctions include the most common types colics – gas and impactions. These usually respond to medical management. Intestinal accidents such as twists are often more severe and may necessitate surgical intervention or humane euthanasia. Intestinal inflammation occurs less commonly and can be caused by stress, drugs and parasites.

While horses seem predisposed to colic due to the anatomy and function of their digestive tracts, management can play a key role in prevention. Although not every case is avoidable, the following guidelines from the American Association of Equine Practitioners (AAEP) can maximize the horse's health and reduce the risk of colic:

1. Establish a daily routine – include feeding and exercise schedules – and stick to it.
2. Feed a high quality diet comprised primarily of roughage.
3. Avoid feeding excessive grain and energy-dense supplements. (Twice as much energy should be supplied from a roughage source than from concentrates.)
4. Divide daily concentrate rations into two or more smaller feedings rather than one large one to avoid overloading the horse's digestive tract. Hay is best fed free-choice.
5. Set up a regular parasite control program with the help of your equine practitioner.
6. Provide exercise and/or turnout on a daily basis. Change the intensity and duration of an exercise regimen gradually.
7. Provide fresh, clean water at all times.
8. Avoid putting feed on the ground, especially in sandy soils.



9. Check hay, bedding, pasture, and environment for potentially toxic substances, such as blister beetles, noxious weeds, and other ingestible foreign matter.
10. Reduce stress. Horses experiencing changes in environment or workloads are at high risk of intestinal dysfunction. Pay special attention to horses when transporting them or changing their surroundings, such as at shows.

Virtually any horse is susceptible to colic. The type of colic seen can relate to geographic or regional differences, probably due to environmental factors such as sandy soil or climatic stress. Importantly, what this tells us is that, with conscientious care and management, we have the potential to reduce and control colic, the number one killer of horses. For more information on colic in horses, visit the website of the American Association of Equine Practitioners (AAEP) at www.aaep.org.

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