

Gastric Ulcers - Could your horse be suffering?

Over the last few years awareness surrounding Equine Gastric Ulcer Syndrome (EGUS) has increased, with many equestrian professionals and horse owners realising that this is in fact a very common condition and not exclusive to high performance horses.

Studies have shown that up to 60% of competition horses and 50% of leisure horses suffer from this condition and it affects all shapes and sizes. Add racehorses into the equation with an estimated 90% suffering and that is a considerable number of horses which are affected.

Why do horses get EGUS?

Horses are designed to trickle feed which means they forage and slowly graze for up to 20 hours a day. This constant grazing allows a continuous source of saliva and fibre within the stomach which is broken down by acidic gastric juice. When the stomach is empty this acid is still produced and can cause erosions to the mucus lining of the stomach, which subsequently leads to ulceration.



During exercise there is increased pressure on the stomach causing acid to move to the top non-glandular part of the stomach. This compression, coupled with a lack of fibre, can often lead to further damage to the stomach lining, which is why EGUS is often more prevalent in horses with a higher workload.

There are many causes of EGUS including stress, restricted diets which result in long periods without access to food, high carbohydrate diets, intense workloads and use of anti-inflammatory medication such as phenylbutazone (more commonly known as bute). Previously it was assumed that this would be a progressive condition, but another recent study has shown that EGUS can appear in as quickly as 24 hours.

The biggest challenge that we face as owners and vets is that clinical signs are often vague and can sometimes be put down to 'behavioural issues'. EGUS is a painful condition and can be comparable to oesophageal reflux and stomach ulcers in humans.

Clinical signs

- Poor performance
- Dislike of being girthed
- Dull appearance
- Lack of appetite
- Difficulty to gain and maintain condition
- Grumpy temperament
- Kicking out when eating
- Recurrent colic

It is becoming more common for professionals to recommend gastroscoping following poor performance without any other clinical signs, so if this is something which you recognise in your own horse it is worth considering a gastroscopist to rule out this condition.

Diagnosis

The only way of definitively diagnosing Gastric Ulcers is by using a gastroscopist. This is a procedure where a three metre long fibre optic video camera is passed up one nostril, down the oesophagus and into the stomach.

This then allows the vet to visualise any ulcers present and grade, location and the severity of them. Where ulcers can be seen these are graded from 1-4, with 4 being the most severe.



Prior to endoscopy it is vital that the horse is not allowed anything to eat for a minimum of 12 hours prior to being gastroscopied. This is to allow time for the stomach to empty and allow a proper assessment of the stomach to be performed. If there is food still in the stomach the vet is unable to perform the scope. The gastroscopist is performed under standing sedation. Following the procedure the horse can return to their stable and begin eating again once the sedation has worn off.

Treatment

Treatment is recommended with a course of Omeprazole – a drug that reduces the amount of acid production in the stomach. For glandular ulcers in particular, better results are achieved with once a week injections rather than the previous daily oral medication.

Commercially the drugs are wider known as Peptizole or Gastrogard. Alongside medication management changes will also help to prevent the ulcers from returning.

Feeding little and often (mimicking trickle feeding), ensuring a high fibre diet, feeding a small amount of roughage an hour prior to exercise, recognising and reducing stress and the use of additional supplements such as probiotics can help. This should be discussed with your vet at the time.

Foals

Foals are prone to gastric ulcers and can often occur secondary to other complications such as diarrhoea. Clinical signs may include excessive salivating, grinding of teeth, restless behaviour, lying on their back continuously and lack of appetite. It is vital that veterinary attention is sought immediately so that diagnosis and treatment can take place.



At Loch Leven Equine Practice we hold monthly gastroscopes clinics where gastroscopy can be performed at a heavily discounted price. This is open to everyone and referrals are welcome. We can also carry out gastroscopes at your yard.

For more information call us on 01577 841010.