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Common Trail Emergencies

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Whether out for an afternoon ride or deep into a week-long camping trip, emergencies on the trail present a unique challenge because veterinary help is often hours or sometimes even a day away. Even if you are too far away for a veterinarian to reach you, remember that we are always a phone call away to help advise you through an emergency situation. This article will describe a few common emergencies so you will be able to recognize and address them appropriately if you should encounter them.

Lacerations and Puncture Wounds

The first step in treating any kind of laceration is to control hemorrhage. If a wound is actively bleeding, apply pressure with a bandage and keep it in place until you are certain the bleeding has stopped. If bleeding is minimal, clean the wound by gently running cold water over the wound or use a wound cleaner such as Vetericyn or dilute betadine solution and then cover the wound with a light bandage until you can reach your veterinarian. Do not apply any ointment or cream to the wound if there is a chance that it may need to be sutured. The severity of a laceration or puncture depends much more on the location of the wound than the size. Any wound that is located in the vicinity of a joint or tendon sheath can quickly become a life-threatening infection if left untreated. As a general rule, any wound that is on a horse's head or limb should be seen by a veterinarian the same day it occurs.



Colic

The word colic refers to any type of abdominal pain in horses and can be caused by a number of different things, most of which are related to the gastrointestinal tract. The most common type of colic is called gas or spasmodic colic, where an area of the colon has filled with gas distension and becomes painful. This type of colic often resolves with a dose of Banamine and hand walking until gastrointestinal motility picks up and starts moving the gas through again. If you are out of reach of your veterinarian and colic symptoms are mild, you can administer Banamine either intravenously or orally and lightly hand walk for 45-60 minutes. (Never give Banamine intramuscularly in horses due to a high incidence of Clostridial infections when it is administered this way). If symptoms resolve, continue to hold the horse off feed and monitor closely for the horse to pass manure over the next 6-12 hours. If symptoms are severe or persist beyond Banamine and an hour of hand walking, it is likely that the horse will require further treatment. Other common causes of colic include impaction, colon displacements, or conditions causing a complete obstruction of the GI tract. These types of colic may require hospitalization for either medical or surgical treatment.

Choke

A feed obstruction in the esophagus is referred to as choke in horses. Symptoms include stopping eating in the middle of a meal, saliva and feed material running out of the mouth and nostrils, coughing, wrenching the neck, and sometimes distress to the point of pawing or rolling that can resemble colic. Some obstructions will clear on their own with time, so take away all feed and water and try to keep the horse in a calm, quiet area for 20-30 minutes. If the obstruction does not clear on its own in 30 minutes, it will likely need veterinary intervention in the form of sedation, anti-inflammatories, and passing a nasogastric tube to flush out the obstruction. Complications can include damage to the trachea from the obstruction causing pressure on the tissue, and pneumonia from aspirating saliva and feed material. The longer the horse is choked, the greater the risk of these complications, so it is important to address this type of emergency quickly.



Eye Injuries



Corneal ulcers are a common injury in horses due to the location of their eyes protruding from the side of their head. Swelling, holding the eye partially or completely closed, tearing, and any cloudy appearance to the eye are signs of an eye injury that should be treated immediately. Corneal ulcers can progress rapidly if they become infected, so they should be addressed quickly with topical antibiotic ointment formulated specifically for the eye and a systemic anti-inflammatory.

Sudden onset lameness

Whether your horse takes an off step on the trail or you wake up from camping one morning to find him non-weight bearing on one of his limbs, acute lameness is a common occurrence when trail riding. Carefully look the limb over for any heat, pain, or swelling and cold hose the limb if you find any of these things. If a fracture is suspected, call your veterinarian to discuss how to best stabilize the limb before attempting to move or transport the horse. Check the foot for the presence of any foreign bodies stuck in it. If you find a foreign body such as a nail or wire stuck in the foot, do not remove it until after x-rays have been taken. The location of the object within the foot may be the difference between preventing a simple foot abscess versus a life-threatening infection. To keep a nail from driving deeper into the foot as the horse walks, you can wrap a block of wood onto the bottom of the foot leaving space where the object is stuck until you can get the horse to a location where x-rays can be taken. If no heat or swelling is detected in the limb and you suspect a foot abscess or sole bruise, you can soak the foot in warm water and Epsom salt daily or wrap the foot in a poultice.



Allergic Reactions

Allergic reactions in horses usually present as hives or as swelling of the face. If hives are mild and the horse is otherwise comfortable, run cool water over the horse and monitor to see if the hives start to go away on their own. If the hives continue to worsen or any facial swelling develops, the horse will need to be treated with medications such as a corticosteroid like dexamethasone and an antihistamine.



Anhidrosis

Sometimes, for unknown causes, horses will lose the ability to sweat, resulting in a condition called anhidrosis. This typically occurs when there have been long, dry hot stretches of weather. Horses present with symptoms of lethargy, lack of sweat when they should be sweating, and heavy, fast breathing. Management for this condition involves getting the horse cooled down by stopping any exercise, cold hosing their legs and under their belly, and getting them to a shaded area with good air circulation and a fan if possible.

First Aid Kit

Here is a list of suggestions to have on hand in a first aid kit. The number of items you need depends on how far away from veterinary help you will be, how long you will be away, and how comfortable you are administering certain medications.

- Bandage material
 - Roll cotton bandage
 - 4 to 6 inch gauze
 - Absorbent pads or 4X4 gauze
 - 4 inch Vet wrap and/or elastikon
- Thermometer
- Scissors
- Light source
- Twitch
- Stethoscope
- Syringes and needles
- Topical wound products
 - Silver sulfadiazine
 - Triple antibiotic like Neosporin
 - Vetericyn
- Medications
 - *** Always discuss treatment with your veterinarian before administering
 - Oral Bute and Banamine
 - Antibiotics
 - Penicillin
 - SMZ Tablets
 - Triple antibiotic eye ointment
 - Dexamethasone