

If Only They Could Talk

Our regular focus on equine health.

THIS column normally takes an in-depth look from a veterinary perspective at problems which can affect a horse's well-being, discussing the ailment from diagnosis to treatment.



John Martin

This month, sadly, such a problem was brought home to the yard in stark fashion when St Leger hopeful Namibian, was found to be unwell in the early hours.

Vet **JOHN MARTIN** describes here how he was alerted; how colic was diagnosed; and how the decision was taken to send the horse to Newmarket's Equine Hospital.

The good news is that early indications are the treatment was a success, and we all hope Namibian will make a full recovery from his ordeal.

Background

During his last run in the Great Voltigeur at the York Ebor Festival, Namibian sustained a small cut to the outside of his left cannon just below his knee.

He was examined by the attending vet at York races that day. The wound was closed with some skin staples and he was started on a course of intravenous antibiotics and anti-inflammatories.

I examined him the following morning at Kingsley House where he had some filling around the wound but he was sound and sights were still firmly fixed on his entry in the St Leger.

Over the next few days he would walk/trot in the morning along with doing a session on the horse-walker. His groom was cold-hosing his leg twice a day and he was wearing a veterinary dressing and stable bandages while in his box. The filling around the wound worsened somewhat a few days after the race. This wasn't overly concerning and after we switched his antibiotics the improvement was dramatic and again we were confident that we could have him off medication and back in full work in time for Doncaster.

Early-morning call

At 5.30am I received a phone call from the night watchman. He had found Namibian rolling in his box as he was conducting the early-morning feed. When I arrived at Kingsley House Namibian was out of his box and being led around the yard.

When examining a horse with colic there are certain vital signs a vet always checks.



Namibian (near side) winning the Group 3 Gordon Stakes at Goodwood in July this year

Firstly, the horse's behaviour may give an indication of the level of discomfort he is experiencing. Horses with mild colic may show a decreased appetite; they may turn their head repeatedly to their flanks, the source of pain; and those with more severe colic may be sweating badly and thrashing in their box.

Secondly, the horse's box is checked for evidence of recent droppings. After this, the horse is examined. The heart rate and colour of his mucous membranes are checked as these can give an indication of the severity of the colic. The next step is to listen to the gut sounds of the horse on both the left and right sides.

A normal horse should have regular gut sounds as the semi-digested food moves through the gastrointestinal tract. Reduced or absent gut sounds are never a good sign in a horse with colic. In Namibian's case his heart rate was normal and his gut sounds were present so initially I felt that it was likely he had a case of mild colic, manageable with some anti-spasmodic drugs which relax the muscle in the wall of the gut.

He was given some anti-spasmodic medication and put on the horse-walker. After coming off his heart rate was slightly raised, but more worryingly his gut sounds were now reduced. After a phone call with Mark the decision was made to refer him to Newmarket Equine Hospital.

Newmarket

On arriving in Newmarket Namibian was examined by

Mr Mark Hillyer, an expert in equine colic and soft tissue surgery. He found that Namibian's small intestine was grossly distended and surgery was the only option.

When on the table he was found to have a caecal impaction. The caecum is a large blind-ended 'outpouching' found at the junction between the small and large intestines. In Namibian's case half-digested food had impacted here and this was causing an obstruction.

The surgery involved to correct this is extremely specialised and complex. It involves removing the obstructing mass in the caecum and then performing a by-pass of the caecum whereby the small intestine is joined directly with the large intestine.

The cause of this impaction in Namibian's case was most probably related to the fact he was not in full work following his leg injury, as reduced levels of exercise are a predisposing factor in impaction colic. Also, the antibiotics and anti-inflammatories which he was receiving for the cut on his leg may have had an effect on the caecum causing a reduction in function and hence predisposing to this type of colic.

At the time of writing the news on Namibian is positive. He came out of his surgery well and is being monitored closely in the intensive care unit at Newmarket Equine Hospital. I would like to personally thank the expert staff at NEH for looking after him and providing updates on his progress.

Everyone here at Kingsley House is hoping that the news remains positive and the big fella pulls through and makes a full recovery. ■

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