

EQUINE GASTRIC ULCER SYNDROME

Gastric ulcers are, unfortunately, common in our equine population, occurring in up to 60% of pleasure horses. Clinical signs can range from reluctance to work under saddle to weight loss, poor coat quality, aggression when handling, and recurrent colic. Diagnosis is made by direct visualisation of the stomach lining with gastroscopy. A 3.5m endoscope is passed into the stomach under standing sedation after the horse is starved for sixteen hours.

Squamous ulcers – Occur in the upper part of the stomach, in the white squamous mucosa, associated with acid coming into contact with a part of the stomach that should be free from acid (similar to acid reflux in humans). Typically called ‘splash back’ lesions.

Glandular lesions – Occur in the lower stomach, the pink glandular lining which is more similar to our stomach lining. These are more likely stress related and are inflammatory lesions rather than true ulcers.

Recommendations for Feeding and Managing Horses with Equine Gastric Ulcer syndrome (EGUS)

These guidelines represent a healthy diet and good management for any horse, but if your horse suffers from gastric ulcers, try to adhere closely to them.

- Maximal turn out on grass ideally with other horses
- Allow socialisation with other horses
- Ad lib Forage
NB If horse is on a restricted ration for management of laminitis/ EMS
 - Ensure 80% of hay ration given during the day and 20% at night (it is more stressful for a horse to run out of hay during the day rather than the night)
 - Use small holed haynets to increase the amount of time eating
 - If straw forms part of the fibre ration to allow a larger less calorific ration to be given as long as it is <50% total fibre ration it will not promote ulcer formation
- Fat & Fibre based ration rather than carbohydrate rich avoid grain-based feeds which are carbohydrate rich
- Split hard feeds into 2-3 portions over course of day

- Add alfalfa to diet as it has low starch and high magnesium and calcium levels which help to buffer the gastric acid
- Feed a ½ scoop of moistened chaff/ alfalfa before exercise to create a raft on the gastric acid and reduce splash back
- Reduce intensity and duration of exercise – 4 times a week or less, broken up with rest days.
- Reduce stressors - changes in people caring for the horse, herd changes, transport
- Offer roughage during transport and on arrival
- Make your vet aware if your horse has had EGUS if NSAID's are being dispensed (typically phenylbutazone), as an alternative NSAID may need to be dispensed
- Speak to one of our team - Vet/ Equine Veterinary Nurse if you have specific management needs/ concerns