



LARKMEAD VETERINARY GROUP

EQUINE

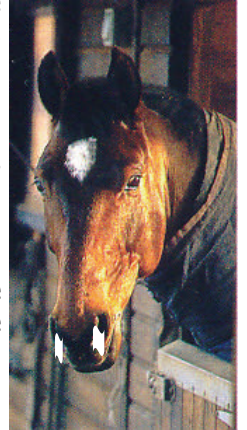
NEWSLETTER

March 2003

COPD - Chronic Obstructive Pulmonary Disease (Heaves/Broken wind)

COPD is the most common cause of chronic coughing in horses and has frequently been seen on visits during the last couple of months. The condition is caused by an allergy to dust and mould spores and, therefore, at this time of year when horse are stabled and fed more forage the exposure to potential allergens increases. The horse's airways constrict, causing it to breathe faster and wheeze and excess mucus is produced in the airways, which the horse coughs to clear.

Usually older horses are affected, and the most common history from owners is of an increased respiratory rate (>25 breaths per minute) and increased respiratory effort, often with a visible "heave line" along the base of the rib cage. Many horses have a chronic cough, which is often triggered by exercise, and globules of white, thick discharge are sometimes coughed up and seen over the stable door. Auscultation of the chest reveals loud, wheezing sounds. The horse's temperature will often be normal and they will have a good appetite.



A diagnosis is commonly made on the history and clinical signs alone. Blood testing can be used to rule out infectious causes, and for cases of COPD the results usually come back within the normal ranges. Bronchoalveolar lavage, where fluid is flushed down into the lungs and then sucked back and collected, can be used for diagnosis as inflammatory and allergy cells are often found.

Treatment

The main aim of treatment is to change the management of the horse to enable it to live in a minimal dust environment. This may involve turning the horse out as much as possible, if not all the time. Straw bedding should be replaced with shavings or paper. Feeding hay substitutes such as haylage or cube diets, or soaking all hay for 30 minutes and not letting it dry out, is also advisable. Avoid keeping stores of hay and straw near to the stable. (Neighbouring horses that share the same air space should not be kept on straw). In most horses the symptoms considerably reduce in 1—2 weeks when these measures are applied. In long-standing or severe cases it may take considerably longer - but don't lose heart!



For horses showing clinical signs of the disease the main drug treatment is Ventipulmin, which acts as a bronchodilator (opening up the airways). Long-term treatment is occasionally necessary. Antibiotics are sometimes required if secondary infection is also involved. Oral steroids also provide good relief of clinical signs and enhance the response to Ventipulmin.

Nebulizers, adapted from human "asthma puffers", are also available as a preventative measure in horses with a chronic history of COPD.

**Overleaf is a summary of this condition in the form of a flow chart.
However, if you would like any advice or if we can assist you in any way, please feel free to call us at the surgery on 01491 651479.**

Phone: 01491 651479 Fax: 01491 652072 E-mail: info@larkmead.co.uk

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