

## Colic DOs and DONTs

## DO'S

First of all, DO stay calm! Your horse is relying upon you not to panic and remain in control of the situation. DO call us immediately when you notice a problem. DO be prepared to give as much detail as possible, both over the phone and in person when we arrive. A thorough feeding, worming and management history is important, as well as any changes that have occurred in the recent past, and full details of the day (manure output, urination, exercise, etc) leading up to your horse's colic episode.DO perform a basic TPR if you are feel comfortable. Take note of the heart rate, respiratory rate, temperature and mucous membrane colour when you first think there is a problem, and tell us when we arrive. This gives us vital information as to how quickly your horse's clinical signs are deteriorating or improving.



DO move your horse to a safe, large area well away from fences, stable walls, miscellaneous farm machinery and concrete areas.DO allow your horse to lay down if he is most comfortable to sit still. If he is trying to roll, DO walk him to distract him from his pain. DO consider transport in case it is necessary to bring your horse into the clinic or refer him for surgery. It is easier to be prepared and not need to use the float, then

spend valuable time hooking it up at 2 am! DO allow your horse free access to water.

## **DON'TS**

DON'T adopt the wait and see approach. Your horse's health can deteriorate quickly, and for the best outcome, we need to assess and treat him quickly. DON'T medicate your horse. Medications such as bute and flunixin can mask clinical signs and make an accurate diagnosis more difficult. DON'T allow him to thrash around on the ground. Severely distressed horses can do a lot of self-harm and it is not uncommon to then be treating secondary corneal ulcers and skin abrasions. Keep him moving this can be a two person job!!DON'T walk him until exhaustion or exercise him excessively. DON'T give psyllium products during a colic episode. These are best used as preventative treatments only. DON'T attempt to force over the tongue treatments of mineral oils when forcing large volumes, it is unlikely that all the liquid will be swallowed, and there is a risk that your horse may aspirate some into his lungs, potentially causing an aspiration pneumonia. DON'T attempt to give your horse a rectal examination or enema. The rectal wall in horses is extremely fragile, and rectal tears and bruising are life threatening. DON'T ever put yourself, family or friends in a potentially dangerous situation. A severely distressed, thrashing horse will not have your safety in mind, and can behave erratically and can drop, thrash and kick out un-expectantly, tangling you in their legs or trapped against a stable wall. Finally, DON'T ignore him once we have left. Colic is an unpredictable illness, and your horse's clinical condition can worsen very, very quickly. We advise monitoring every 15-20 minutes for several hours once he is back to normal.