



# Colic

## Aka. The dreaded 'C word'

Colic is the term used to describe abdominal pain in horses, and is usually due to gastrointestinal problems, but in occasional cases this pain may be due to other abdominal organs, such as the reproductive tract, kidneys or bladder.

For owners colic is often a very scary condition, as it can be fatal in some cases. Thankfully, approximately 90% of colic cases can be medically treated, and surgical outcomes are improving all the time due to advances in treatment for the remaining 10% of cases.

## What are the symptoms of colic?

- Dullness/quiet
- Not wanting to eat
- Pawing the ground
- Kicking up at the belly
- Flank watching (looking round to the belly)
- Not passing droppings (although some colics may still pass faeces)
- Lying down, or getting up and down continually
- Rolling
- Flehmening/lip curling in some cases

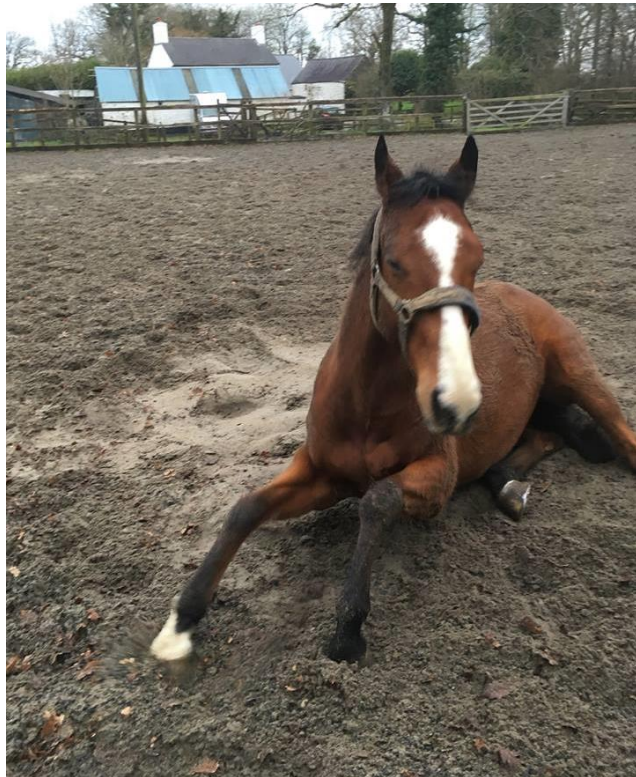
It is important to remember that different horses will have different pain thresholds, and so they may only show the 'milder' signs of colic, or be very extreme in their presentation.

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## What should I do if I think my horse has colic?

- Firstly, **don't panic!** You are of much more help to your horse (and to us) if you are calm.
- **Phone us!** We will be able to help advise (especially if you have your horses parameters) and set off sooner to see your horse. If when we are on route your horse looks much better, you are welcome to phone us back!
- Check which signs of colic your horse is showing, and whether there is anything else abnormal in their behaviour (e.g. wobbliness, an injury anywhere, snotty nose).
- Check whether your horse has eaten/is interested in eating, and whether they have passed any droppings recently.
- If possible, check the colour of your horses' gums (these should be a salmon-pink colour, and if blanched by applying pressure, the colour should return within 2 seconds), their breathing rate, pulse (can often be felt under the jaw), and also temperature if you have access to a thermometer.
- If your horse is prone to colic, try walking your horse for 20-30 minutes, as in mild colics this may help ease some of the pain. Do this in a safe place, such as the field or menage, so that if they do start rolling they will not injure themselves. If your horse is too painful to walk then place them somewhere safe so they cannot hurt themselves, or you!



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## What causes colic?

There are a number of different types of colic, which all have different potential causes. Often we cannot find a 'definitive' cause for many colics, but if your horse is frequently having colic then looking closely at their management (diet, worming, routine etc.) is very important, alongside potentially doing further investigations such as blood tests, faecal samples, gastroscopy, and/or abdominal scans.

### Spasmodic and gassy colics

These are the most common types of colic, and can vary in severity from very mildly uncomfortable to extremely painful. They are often due to a change in diet (hard feed or roughage), changes in the grass (especially spring and autumn flushes), changes in routine or stressful events, although sometimes no obvious cause can be found. When the vet listens to their intestines using a stethoscope a loud continual gurgling (increased gut sounds) may be heard, or sometimes gassy 'pinging' noises. The majority of spasmodic and gassy colics respond well to medical treatment using an injection of gut relaxant, and potentially additional pain relief, along with in hand walking.

For horses that are prone to these colics, we recommend making any changes as gradually as possible – e.g. introducing to new turnout paddocks for an hour at a time initially. It may also be sensible to try these horses on a gut balancer to support their gut bacteria (a bit like us having a yakult!) or a charcoal supplement to reduce gas production.

### Displacements and Entrapments

Some horses, due to excessive gas build up or other causes, can have displacements of the large intestine – where the intestine may move upwards or across out of its normal position. These can vary in pain levels, and in the less painful horses giving gut relaxants and exercising the horse may be enough to free the displacement. In more painful horses further management may be required, such as surgery to decompress the displaced intestine and return it to its normal position.

Entrapments can also occur, most typically with a section of small intestine getting trapped between the spleen, kidney and the body wall (nephrosplenic entrapment). In some cases these can be freed by lunging the horse, and giving a drug to make the spleen contract and shrink. However, if this does not free the intestine then surgery is indicated.

### Impaction colics

The horse's gastrointestinal tract is highly complicated, involving a number of twists and turns. Horse's intestines may become 'impacted' (blocked with food), most commonly at the 'pelvic flexure' – a 180 degree turn in the large intestine – but this can occur at other

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points too.

Impactions are most commonly caused by:

- Eating bedding, especially straw
- Horses with dental problems, as they will not chew their forage correctly
- Parasites/worms
- Horses with delayed gut motility – for example, if they have been sedated or anaesthetised, or due to other health problems

Most impactions can be medically treated by starving the horse (so that they do not add further food to the impaction), managing the horse's pain levels, walking the horse at intervals, and regularly stomach tubing the horse to provide fluids, electrolytes and potentially paraffin. However, some impactions may need operating on if they do not begin to pass along, the horse is excessively painful, or if the weight of the impaction causes the intestine to twist over.

## Surgical colics

There are many different causes of colic that can only be treated surgically. Thankfully they are all fairly uncommon, but if a horse is excessively painful, isn't responding to normal medical treatment, or has findings on internal/rectal exam that suggests a surgical lesion, then referral to a specialist hospital which can perform colic surgery needs to be considered. Some causes of surgical colics include:

- Nephrosplenic entrapments which will not free with exercise
- Displacements that are not correcting medically
- Twists of the intestine
- Impactions which are not resolving medically
- Strangulated lipomas – where a section of small intestine becomes looped around a fatty lump (lipoma) and cuts off its outflow
- Tumours within the abdomen
- Enteroliths
- Uterine torsions (of in foal mares)
- Intussusceptions – where a section of intestine telescopes in on itself
- And many other potential causes...



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It is worth having a careful, considered thought as to whether you would allow your horse to be operated on for colic, as often owners are unsure and when stressed find decision making difficult. No one takes colic surgery lightly, and it is normally performed as a last resort – occasionally horses will arrive at the specialist hospital and due to improvements in their comfort levels may actually not be operated on.

However, an earlier referral for surgery with one of the problems listed above means that the surgery is much more likely to be successful. This is because the horse and their intestine will be healthier, and if operated on quickly then they are less likely to need intestine removing.

Depending on the original cause of the colic it may be more likely to recur following surgery, but many horses who have had colic surgery go on for many years more without any further issues. They will typically require complete box rest for up to two months, then small paddock rest can be gradually reintroduced. Most will be back in ridden work within 4-6 months, although this does depend on the individual.



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