



## Strangles

Strangles is a bacterial infection caused by a bacteria called *Streptococcus equi serovar equi*. This is a pathological bacteria, in that it is not found as a commensal (normal) bacteria in horses. It only affects equines; it cannot infect humans, dogs, cats or farm animals.

Strangles is spread by direct contact, or indirect contact where the bacteria may be transferred from one horse to another via bacteria being shed onto things like buckets, yard equipment, humans, other animals etc. It is not airborne but if a horse with strangles coughs/snorts then the bacteria in the snot may be transferred by several metres.

### **What are the signs of strangles?**

- Raised temperature (>38.3C)
- Dullness, not wanting to eat
- Nasal discharge – usually bilateral and thick, yellowy/white snot
- Lymph node enlargement – swellings under/around the jaw
- Abscesses under the jaw

The above are all signs of ‘typical’ strangles, which just affects the upper airways. However, there is a form of ‘atypical’ strangles where the lymph nodes elsewhere in the body can be affected and form abscesses – these can present in a variety of ways, but thankfully is much less common.

Typically, strangles has a very low mortality rate – most horses will survive the infection – but it can be tricky and take a long time to clear, especially on a yard where multiple horses are affected. The horses most likely to have complications with strangles are the very young and very old, or those with concurrent health problems, as their immune systems are weaker.

Bexfields Farm  
Galleywood road  
Chelmsford  
Essex  
CM2 8BY  
01245 346904

[admin@claredonequine.co.uk](mailto:admin@claredonequine.co.uk)

Horses may also be infected with the strangles bacteria but not show any of the signs listed above – these are known as **carrier horses** and can shed the bacteria intermittently without showing any signs. These are problematic as they can cause infections in other horses but are difficult to identify themselves.

## **What should I do if I think my horse has strangles?**

If you think your horse may have strangles, please isolate the horse and contact your vet. Many other respiratory infections can result in signs that are similar to those of strangles, so a definitive diagnosis is necessary.

## **Swabs, Scopes and Blood tests**

There are three different ways of testing for strangles, which can get rather confusing for owners.

**Blood tests** – this does *not* test for the presence of bacteria, therefore cannot prove/disprove that a horse is infected or not. It tests the horse's antibody levels (immune response) to the strangles bacteria, and therefore if it has been exposed to strangles. A horse with a high antibody level may therefore be one of three things: a carrier, actively infected, or has been exposed but formed an immune response and not currently infected. In the case of a horse showing signs of strangles we would rather swab or scope the horse to check which bacteria is present, but the blood test is a useful non-invasive way of identifying potential carrier horses. This makes it particularly useful for horses moving between livery yards, and many yards now require this as part of their biosecurity program.

In the case of an outbreak on a yard, it takes a while for horses to form antibodies to the strangles bacteria, therefore blood testing horses cannot rule out the very earliest stages of infection.

**Swabs** – if there is lots of nasal discharge a swab can be taken to test for the bacteria which is present. Antibiotic sensitivity testing can also be performed on these samples, to see which treatments options are the best for that horse. If there is no snot present then a nasopharyngeal swab (extra-long) swab may be used to sample by the entrance to the guttural pouches. This is not as accurate a testing method as the guttural pouch wash however, as sometimes carriers will only intermittently shed the bacteria from their guttural pouches, so is now less commonly used.

**Scopes/Guttural pouch washes** – This is the most accurate method of testing for the presence of the strangles bacteria. The horse is sedated, and an endoscope (flexible camera) is passed up their nostrils and used to enter the guttural pouches. The insides of the guttural pouches can then be seen – these should normally be empty, so if pus is seen then infection is very likely. A sample of fluid is collected ('the wash') from within each pouch and sent to

Bexfields Farm  
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the lab for testing. If there is a lot of pus within the guttural pouches then we can flush these at the time with lots of saline and also leave antibiotics directly within the pouch.

In horses that have had a confirmed strangles infection, the only way to prove that it is now cleared is to either perform another guttural pouch wash, or 3 subsequent nasopharyngeal swabs (as these are less accurate). A blood test cannot confirm the infection has cleared as antibody levels will remain high in the blood for a number of months.

## Biosecurity for strangles

In the case of an outbreak, it is important that all owners on the yard (and visitors) are aware as to which horse(s) are affected and the biosecurity plan. This should reduce the number of further cases on the yard as inadvertent spread of bacteria can be reduced.

- **ISOLATE** the affected horse(s)
- Operate a 'traffic light' biosecurity plan – **red** for horses that are infected, to be completely isolated, **amber** for those that have been recently in contact with the infected horses, these can remain together with other 'amber risk' horses, and **green** for horses that have not been in contact with the infected horses. These can mix with other 'green risk' horses but should avoid 'amber risk' horses.
- Fence off areas around the infected horses and label them so that people do not inadvertently come into contact with them. This is especially important if there are children on the yard.
- Take care with dogs and yard cats as these may spread bacteria around.
- Monitor all other horse's temperatures on the yard at least daily – if a horse's temperature rises above 38.5C or they begin showing other signs of strangles this horse should also be isolated and tested.
- Horses should not leave the yard to go to shows, lessons etc. If one needs to go to the vets for whatever reason please inform the vets beforehand so that they can take appropriate biosecurity measures at the clinic.
- Yard equipment should not be shared between horses – this includes things like communal bucket brushes which may act as a reservoir for bacteria.
- If possible, people dealing with the infected horses should not come into contact with the other horses on the yard, or other yards. However, on some yards this is not possible – in this case using overalls for the infected horses, gloves and having either changes of footwear or a disinfectant foot dip (e.g. Virkon) outside their stables is

Bexfields Farm  
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CM2 8BY  
01245 346904

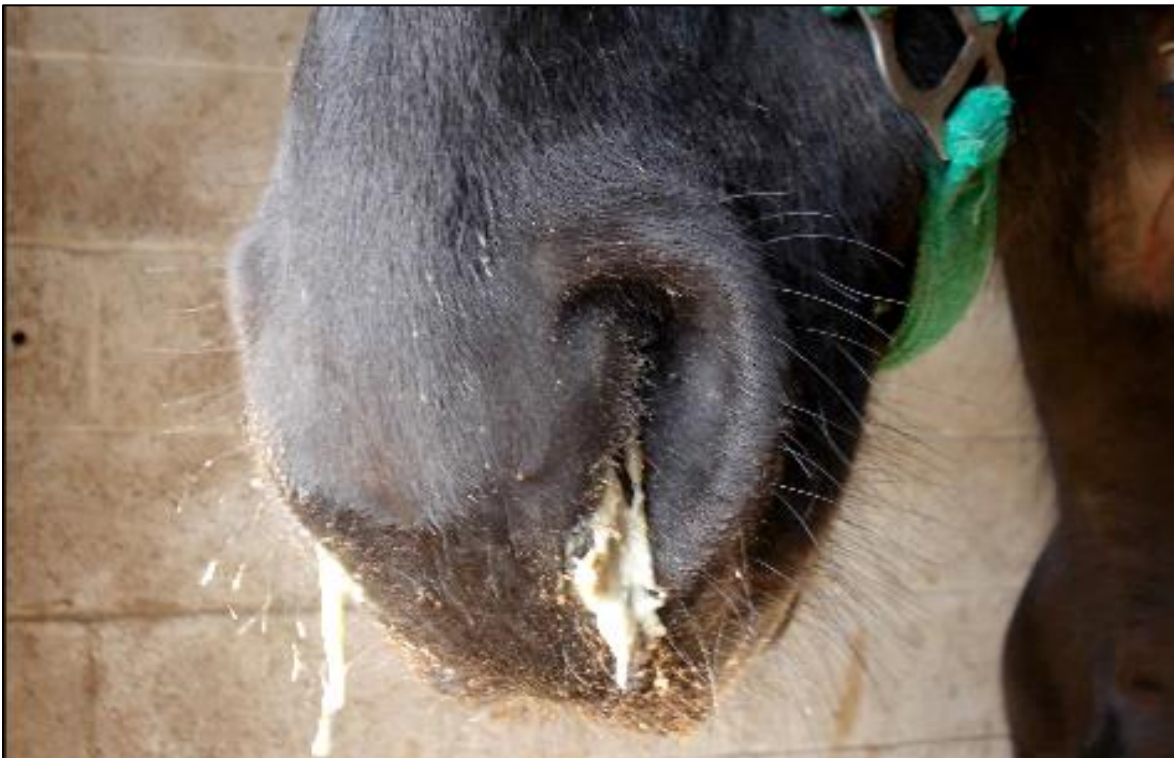
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advisable. Also, if possible, tend to these horses last so that bacterial spread is less likely.

- Disinfectant foot dips (e.g. Virkon) should be used around the yard and changed regularly. Alcohol hand wash should also be available.

There are many other extra biosecurity rules you may choose to follow that may be unique to your yard – if you are unsure as to the best plan for your individual yard then please speak to your vet to organise a plan.

Many yards are now requesting strangles blood tests prior to a new horse moving on to the yard. This is advisable from a strangles perspective, but we would still recommend an isolation period for new horses of 1-2 weeks in case of other infections.



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Essex  
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[admin@claredonequine.co.uk](mailto:admin@claredonequine.co.uk)