

Equine Gastric Ulcers

Gastric ulcers are a well-known problem in many species of mammal. The term gastric ulcer is a broad umbrella term, incorporating inflammation, erosion, and ulceration of the distal esophagus, stomach, and duodenum. Equine gastric ulcer syndrome (EGUS) can be described as ulceration in the esophagus, squamous stomach, glandular stomach or proximal duodenum. Gastric ulcers in horses have been associated with a wide variety of clinical signs reflective of poor health, including inappetence, poor body condition, and signs of colic. Horses are monogastric, with a simple stomach. The equine stomach can be divided into two main regions: the non-glandular region and the glandular region.

Gastric ulceration is reported throughout the literature as the most common disease condition of the equine stomach regardless of breed or discipline of horse. Overall reported prevalence varies widely from 10% to greater than 90%. This difference seems to depend upon breed and discipline. Several risk factors for gastric ulceration have been investigated. Horses in active race training are at a higher risk for EGSD epithelium regardless of breed. High concentrate diets have been shown to increase gastric ulceration. Size and composition of the grain has an effect on ulceration of the gastric mucosa. In addition, composition of hay has been shown to have an effect on ulceration. Coastal Bermuda and brome grass hay have both been shown to pose a higher risk for ulceration when compared to alfalfa hay.

Currently, the only way to reliably diagnose EGUS is with endoscopy of the esophagus and stomach. Whilst clinical signs or other tests may be suggestive of gastric ulceration the only way to truly diagnose them is with endoscopy. Diagnosis is made with the use of an endoscope, and a grade (or severity) will be assigned by your veterinarian to any lesions which are observed in either of the 2 regions of the stomach. Treatment recommendations for medication and feeding will be given and a follow up examination will be scheduled. Each horse is an individual, so response to treatment can vary, however response to medication is often seen quickly.



Normal stomach with no lesions



Lesions found on endoscopic examination

Preparation for gastroscopy:

Horses can be fed normally until approximately 6pm the evening before the procedure Please record the time you withdraw the feed.

Remove all food hay and straw after this meal.

Ensure bedding in the stall will not be eaten by the horse (or muzzle the horse)

Remove water first thing in the morning

No food or grazing the morning before the procedure

The procedure:

- Gastroscopy requires sedation - please let us know if your horse is due to compete in the near future
- On the morning of the procedure, your horse will be given a sedative and the endoscope will be passed up the nose and into the stomach. Horses typically tolerate the procedure very well. The endoscopic examination will take approximately 30-60 minutes. Images will be captured and your horse will be returned to the stall.

Management after scoping

- Water can be offered after the procedure
- Moist hay or feed can be offered when the horse has fully awakened from sedation, typically within 1 hour of the procedure

For further information:

Please contact us at 403 691 9808 or email at tdequinevet@gmail.com