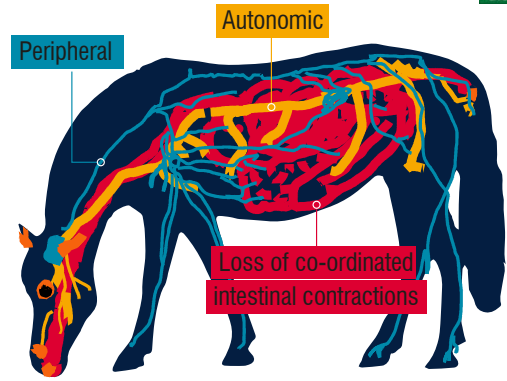


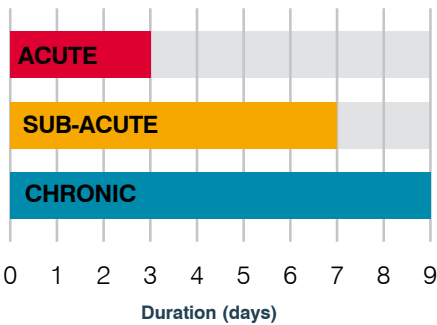


- Colic
- Listlessness
- Changes in faeces
- Loss of appetite

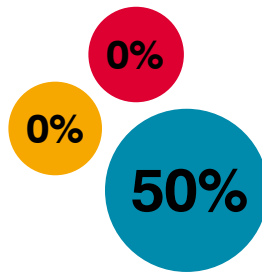
- Disrupts food passage and digestion
- Impaction
- Malnutrition



Attack type



Survival chance

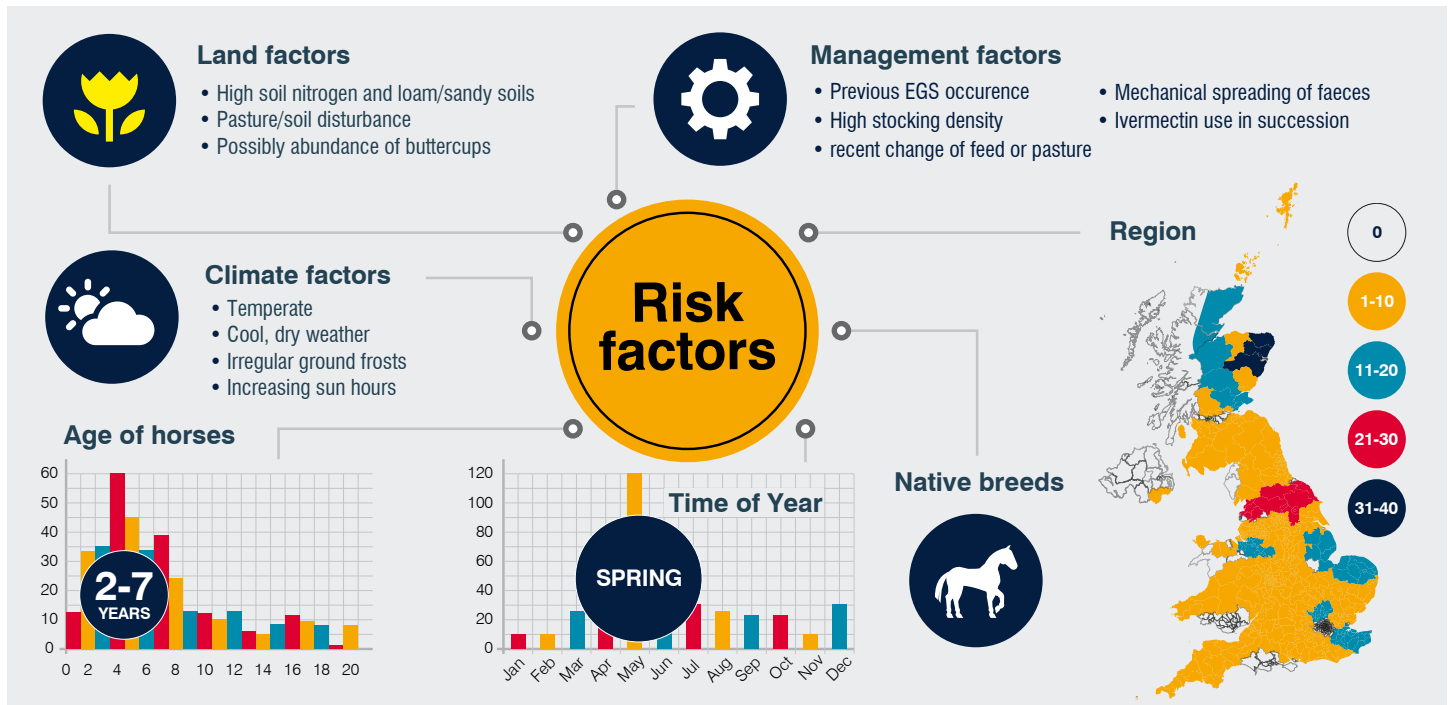


Clinical signs/symptoms

Severity high and onset fast

- Drool saliva
- difficulty swallowing
- silent -distended gut
- Tucked up
- patchy sweating
- high heart rate (60-120 pm)
- Ptosis (droopy eyelid)
- listless
- gastric reflux

- Slower onset
- Rhinitis sicca
- Some appetite
- loss of appetite
- Mild colic
- Slow recovery
- Rapid weight loss
- Reduced gut sounds



Prevention

These recommendations are derived from published associations which are not necessarily causal; therefore, the potential value of acting upon these associations is not known, nor can it be predicted.

- Keep stock density low
- Mixed species grazing
- Check horses daily
- Thorough faeces picking or vacuum removal
- Check faeces daily
- Worm according to faecal egg count – avoid ivermectin use in succession
- Keep hay in diet all year
- If soil needs to be 'disturbed' – remove horses, reseed and wait for full grassland recovery
- No sudden dietary changes: gradual introduction to turnout
- Avoid pasture where cases have occurred – change livestock

Potential EGS case?

Yard First response:

- Ideally, remove horses from the affected paddock immediately. Stable with soaked forage, good access to water and use arena for exercise. Gradual introduction to turnout.
- Prioritise 'at risk' horses: native breeds, horses aged 2-7 yrs, newcomers.

In case of euthanasia following confirmed EGS. Please contact us to arrange a sample donation.