Colic: nursing the horse and supporting the client

COLIC is the most common medical condition of the horse and it can be extremely distressing for a client to witness. Fast decision making can be important but when faced with an emotional owner this may not be possible. Treatment decisions can also be delayed if the patient's owner has to be tracked down for consent. So it is a good idea to ask our clients to consider what their wishes may be if their horse suffered from colic, before it happens. Client talks, newsletters and social media are a great way to get owners thinking about how they would deal with colic.

We are in a good position to encourage them to consider the following questions and ensure their wishes are known to yard staff and anyone caring for the horse:
1. Can you easily contact your vet from your yard?
2. Does everyone who cares for your horse know who to contact in an emergency?
3. How would you transport your horse to a veterinary hospital at very short notice (possibly at night)?
4. Is your horse insured and what does the policy cover?
5. Would you consider allowing your horse to undergo colic surgery?

Prevention
As well as planning for colic before it happens, it's also worth educating clients on prevention. Some measures they can take to help prevent some cases of colic include:
- Making any changes in diet or management as gradually as possible.
- Ensuring free access to water and feeding a moist diet.
- Feeding plenty of fibre.
- Regular worming and/or worm egg counts.
- Having dental checks/teeth rasping every 6-12 months.
- Preventing the horse from eating its bedding.

Avoiding grazing on sandy soil or if this is not possible feeding a psyllium husk supplement to aid passage of sand.
- If a horse is prescribed box rest, ensuring hay and feed is soaked and ensuring adequate water intake.
- After sedation or anaesthesia, following feeding recommendations from their vet.

Phone advice
Faced with an upset client on the phone, reassurance that the importance of their call is understood and a vet will be on the yard as soon as possible is the most essential thing to most owners. Some calmly delivered practical advice is also usually appreciated.

It may also be useful to establish that no home remedies or “bute from the tack box” has been given and to make clear to the caller not to do this. The majority of clients will want to do something helpful for their horse whilst waiting for a visit and there's no harm in this as long as no one puts themselves in unnecessary danger.
The caller can be advised to remove any food and ensure the horse doesn't eat any bedding.

Often clients will already have removed the horse from the stable and started walking it around the yard so it may be a good idea to advise them to walk the horse on a lunge line in a sand school and reduce the risk to both handler and horse.

Decision to operate
Colic surgery is a major operation and several factors play a part in making the decision to undertake this procedure.
Unfortunately, cost often means surgery is not an option. It is an expensive procedure with long-term intensive aftercare which means costs can easily add up.

Having insurance does not necessarily mean the insurance company will cover the full bill and in most cases hospitalisation costs are not covered.

It's a good idea to get the client to check their policy to see if colic is excluded or if they have an injury-only policy.
Different policies have varying amounts of vet’s fee cover and frequently clients end up covering some of the cost of treatment.

It is important to ensure the client understands that recovery from colic surgery is a long process and there are many potential complications which could prolong recovery further.

Home care
It's easy to think once the patient has been discharged that it's fixed, job done! Home care is something often overlooked and its importance underestimated. Most clients appreciate written home care instructions and, even with these, will often call for further advice. Obviously, specific home care instructions will depend on the condition treated but the main considerations are usually diet and exercise.

Feeding small frequent amounts of fibre may be required as well as walking out to grass, progressing to turnout. Feeds should be wetted well and hay soaked or steamed as well as free access to fresh clean water. Monitoring should include appetite and amount of food eaten and amount of faeces produced.

Water intake should also be monitored and if insufficient amounts are being taken then the horse will need encouragement to drink. It is often underestimated how much fluid intake a horse obtains from soaked feed and hay, so be sure this in mind if a client reports their horse is not drinking a lot.

Encouraging a horse to drink can be tricky and what works for one horse won't for the next. There are products which can be added to the water to flavour it; however, fruit juice or peppermint tea can be a good (cheaper) alternative. Access to a salt lick or salt added to the feed can also be helpful.

A clean deep bed is a good idea both for comfort and in case of recurrence of colic episodes. Bedding should not be edible and so shavings or paper would be preferable.

If the horse has had surgery, the client will have an incision to monitor.

As well as advising them to check for any sign of wound breakdown, discharge, heat or swelling, it can also be useful to show pictures of what is normal and what isn't.

Make sure they are aware of when stitches or staples are due to be removed and they aren't forgotten about.

Demonstrating how to monitor for an increase in temperature and heart rate and the presence of strong digital pulses can help early detection of potential complications.

It may also be useful to explain the importance of changes in faecal consistency, especially if the patient is still receiving antibiotics, so colitis may be detected quickly. Periodic follow-up calls to the client are rarely unappreciated and allow them to ask questions they may have already asked all of their horsey friends because they didn't want to bother the vet!