

## CLINICAL SIGNS OF COLIC:

The behavioural manifestations of colic include repetitive lying down and getting up (usually without shaking off bedding), rolling, getting cast, straining to defecate, frequent small amounts of urination, pawing, kicking at their abdomen, looking at the flank region, and assuming a “stretched out” posture. Sweating, playing with the water, tail swishing, and depression are other signs of colic that may be seen, although sweating can also be induced with the administration of some analgesics. Horses with small colon obstructions or other large intestinal impactions may be noted backing up into the walls of their box stalls.



Figure 1. Lying down more than usual



Figure 2. Stretching out



Figure 3. Dog-sitting

## Signs of Colic



Flank watching



Repeated rolling



Mucous coated manure



Phlegm



Tight flank



Kicking at belly

Pain is frequently evaluated by the severity, duration, and quality of response to administered analgesic medications and by the horse's response to environmental factors. Mild colic pain may be hidden by handling or hand-walking.

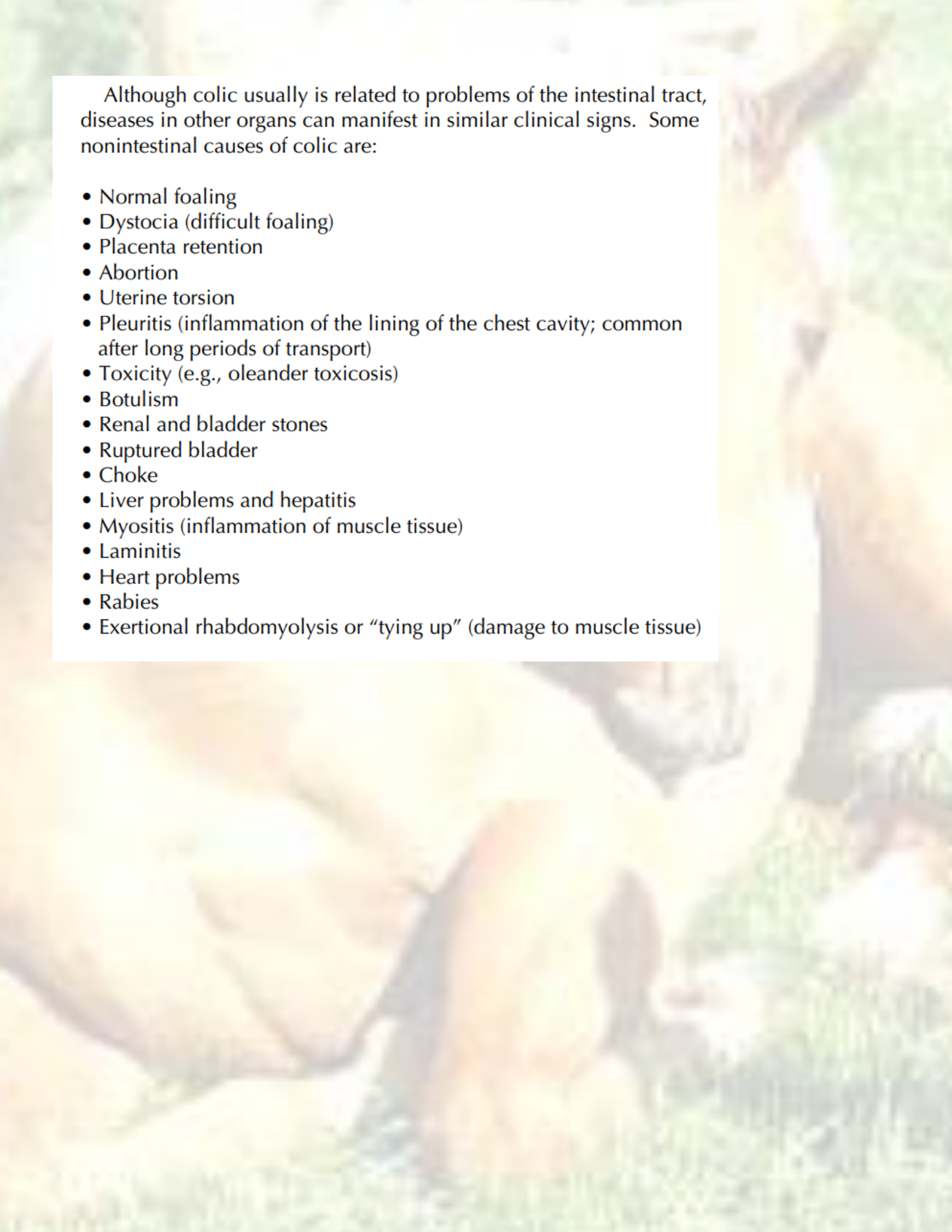
Moderate pain is usually manifested by some of the behaviour patterns mentioned previously—it can also be temporarily interrupted by hand-walking, but return when the horse is replaced in its box stall. Relief from analgesics may last for several hours but redosing is frequently required and is usually an early indicator of the need for surgical intervention.

Moderate to severe pain is noted by very short or no response to administered analgesics, and the horse is uncontrollable even with constant walking or handling.

Horses with uncontrollable pain are a danger to themselves and to handlers and should be treated as such.

Horses with colic that is likely to need surgery, frequently stay comfortable for 1 hour or less after the administration of xylazine (0.2 to 0.5 mg/kg IV).

### DIFFERENTIAL DIAGNOSIS FOR COLIC:



Although colic usually is related to problems of the intestinal tract, diseases in other organs can manifest in similar clinical signs. Some nonintestinal causes of colic are:

- Normal foaling
- Dystocia (difficult foaling)
- Placenta retention
- Abortion
- Uterine torsion
- Pleuritis (inflammation of the lining of the chest cavity; common after long periods of transport)
- Toxicity (e.g., oleander toxicosis)
- Botulism
- Renal and bladder stones
- Ruptured bladder
- Choke
- Liver problems and hepatitis
- Myositis (inflammation of muscle tissue)
- Laminitis
- Heart problems
- Rabies
- Exertional rhabdomyolysis or “tying up” (damage to muscle tissue)