**Intestinal Lubricants and Laxatives**

**Mineral oil** is the most commonly used medication in the treatment of a large-colon impaction. It coats the inside of the intestine and aids the normal movement of ingesta along the GI tract. It is administered through a nasogastric tube, as much as 4 L, once or twice daily, until the impaction is resolved. Although mineral oil is safe, it is not highly effective in treating severe impactions or sand impactions, because it may simply pass by the obstruction without softening it.

**Dioctyl sodium sulfosuccinate** (DSS) is a soap-like compound that acts by drawing water into the dry ingesta. It is more effective than mineral oil in softening impactions; however, it may interfere with the normal fluid absorptive functions of the colon and can be toxic. Thus, DSS can be given safely only in small quantities two times 48 hr apart.

A safe and useful compound to treat impactions, especially those containing sand, is **psyllium hydrophilic mucilloid**. When mixed with water, it forms a gelatinous mass that carries ingesta along the GI tract. Although usually given through a nasogastric tube to horses with impactions, psyllium also may be used as a preventive by mixing the dry powder into the feed. Horses that live in a sandy environment or that persistently develop impactions may be given psyllium powder, 400 g/500 kg/day, in their feed for 7 days. This treatment is repeated 2–3 times each year in an effort to prevent development of sand impactions.

**Fluid therapy**, whether the fluids are administered through a nasogastric tube or IV, is an important and effective part of treating horses with colonic or cecal impactions. If an impaction does not start to break down within 3–5 days, surgery may be necessary to evacuate the intestine and help restore normal motility.