

Dawson Creek Veterinary Clinic



238-116 Ave
Dawson Creek, BC V1G 3C8
Large Animal (250) 782-1080
Small Animal (250) 782-5616
Fax (250) 782-2426

Equine Strangles

Dr. Mike Ross DVM

Most horse owners cringe when they hear whispers of “Strangles” or “Equine distemper”. This is due to this disease’s extremely contagious nature and the impact it can have on horses. Strangles is caused by a bacterium called *Streptococcus equi* which affects only equids. Outbreaks are seen wherever horses are comingled and introduction of new horses is common.

A 1-3 week period of incubation exists between exposure and clinical signs. Symptoms include sudden onset of anorexia, depression, fever and nasal discharge. The bacterium proceeds to cause abscessation of the lymph nodes below the jaw and in the throat region. Occasionally in severe cases the abscessed pharyngeal lymph nodes become large enough to cause difficulty in eating and breathing. Hence the name “Strangles”. These abscesses usually rupture and exude thick pus. This pus is loaded with infective bacteria particles.

80% of normal healthy horses handle the disease without complication, and it usually runs its course in approximately 3 weeks. However 20% of horses may develop complications. Abscesses may burst internally and affect internal structures like the guttural pouches in the horse’s throat region. This can cause guttural pouch empyema where cheese ball- like “chondroids” are formed which may create a horse whom is a chronic shedder of the organism.

The most common complication is called “Bastard Strangles”. In these cases the bacteria gain access to the horse’s lymphatic system and have the ability to cause an abscess of any lymph node in the horse’s body. This can be very serious if the lymph node affected by bastard strangles is inside the chest or abdomen of the patient.

Another major complication of strangles is called Purpura Hemorrhagica. This is an allergic type disease which usually presents after a horse has recovered from Strangles. It causes swelling of the head, limbs, and body with bruising and serum leakage. Skin on the limbs can eventually slough. Case fatality rate is high.

It is possible to treat strangles with penicillin. In the face of an outbreak affected horses can be isolated and body temperature monitored on unaffected horses. Horses with early signs may be treated to help prevent or lessen the severity of the disease.

Prevention and control in an outbreak situation is very important. The disease is very contagious and can be spread on objects such as feed tubs, brushes, water troughs etc. All premises must be thoroughly sanitized after an outbreak has run its course. Most horses are done shedding the bacteria within a few weeks, however there are cases reported where horses have remained carriers for many months. The bacterium does not survive readily in the outside environment, but under the right moisture and heat conditions may live for some time. Consult our veterinary staff about which sanitization products and procedures work best.

When introducing new horses from questionable backgrounds, it is a good practice to quarantine them for 3 weeks. Use good biosecurity common sense when travelling with your horse. Bringing your own water bucket, stabling your horse in clean premises, and tying your horse away from strangers are simple things you can do to prevent bring home Strangles.

Vaccination is another option when considering prevention. An intra- nasal vaccine is available which creates local immunity in the nasal passages and helps prevent or limit the severity of the disease.

Consult our professional staff at the Dawson Creek Veterinary Clinic if you have any questions about equine Strangles.