



Weight Loss in Horses

There are 3 main differentials for chronic weight loss in the horse:

1. Malnutrition
2. Parasitism
3. Dental problems

The list for other causes of weight loss can be very long and may include: chronic liver disease, chronic disease, peritonitis, pleuritis or other chronic infection, malabsorption, endocrinopathy (e.g., pituitary adenoma), chronic respiratory disease (COPD), sinusitis, guttural pouch empyema, heart disease, chronic colic (sand, fecaliths, enteroliths), abscesses, adhesions, foreign bodies, lameness, neurological disease, pregnancy, lactation, neoplasia (lymphosarcoma).

The workup of chronic weight loss includes a detailed history. We will want to know about:

- Diet: quality, quantity, availability, changes
- Number of horses affected (a common environmental factor may indicate an infectious agent)
- Age of horse, time period affected, season (may indicate a parasite problem)
- Nature of appetite, water intake, fecal consistency
- Previous health, vaccination and deworming status
- Most recent Coggins test and results
- Previous drug therapy
- Management system – parasite control, space available
- Caregivers – knowledge, responsibility

The workup also includes a complete physical examination. This will include:

- Temperature, heart rate, heart rhythm, presence of arrhythmias, respiratory rate and character
- Auscultation of the abdomen for gut sounds and evidence of sand
- Auscultation of the thorax for evidence of abnormal breath sounds or areas of dullness (must use a rebreathing bag or something to induce the horse to take deep breaths)
- Palpation of external lymph nodes
- Examination of facial symmetry, examination of sinuses

- Examination for evidence of edema
- Examination of fecal consistency
- Observation of horse at rest, during and after exercise
- Rectal examination, if necessary

When working with clients on horses with weight loss, I usually recommend that if physical examination findings are fairly unremarkable, and one of the “Big 3” has been identified as a potential cause of weight loss, a two-tiered approach to the problem can be taken.

1. Most often, I address a problem that has been identified, e.g., nutritional guidelines, float teeth, outline a deworming program and schedule a recheck appointment or phone call to the client in one month to see if the horse has gained weight.
2. At the first appointment, we may very well discuss the value (and cost) of laboratory work. This may include a CBC (with fibrinogen), chemistry panel, urinalysis and fecal egg count. If a Coggins test has not been performed during the past year, this should be done.
3. Weight the horse, either with a scale or weight tape, so you can follow weight gain. Record the body condition score.
4. Follow-up should be done in one month.
5. If the horse has not gained an adequate amount of weight appropriate for its level of nutrition and exercise, repeat the physical examination and perform additional tests based on additional causes of weight loss outside of the “Big 3.”

Methods of feeding and management to increase weight of horses:

1. Increase feed -
 - Increase grain portion of diet, but not more than 50% of total ration
 - Increase pasture turn out (if forage is adequate)
 - Increase amount of good quality hay fed
 - Feed additional meals (lunch, bedtime snack)
2. Increase caloric content of feed -
 - Add fat to the diet (sunflower oil, rice bran, commercial diets)
 - Feed beet pulp
3. Feed thin horse separately
4. Decrease exercise