

Park Veterinary Centre

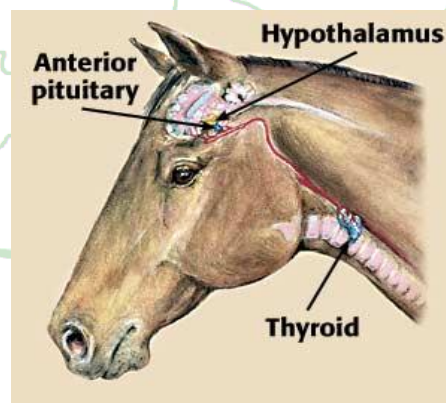
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EQUINE CUSHING'S DISEASE

What is it?

Equine Cushing's Disease is commonly encountered in older horses and ponies but is now also recognised in equines in their mid-teens. The condition results from a pituitary gland adenoma (a benign tumour) which secretes abnormally high levels of adrenocorticotropin (ACTH). ACTH stimulates the production of cortisol (a type of steroid) from the adrenal glands. Therefore, high levels of ACTH result in an excessive production of cortisol (Hyperadrenocorticism).



Symptoms

- Thick, long, shaggy coat that is not shed (hirsutism). Curly in advanced cases.
- Excessive drinking and urinating (polyuria/polydipsia).
- Abnormal deposition of fat (crest, bulging of fat pads above eyes).
- Recurrent laminitis, due to high levels of cortisol in the blood stream. Intractable pain secondary to laminitis represents the leading cause of euthanasia in Cushingoid horses.
- Increased susceptibility to infections (especially skin, foot abscesses, thrush) due to the immunosuppressive effect of circulating steroids.
- Muscle wastage in advanced cases. Drop-bellied/ 'Pantomime' horse appearance.

Diagnosis

The most practical way of testing for Cushing's disease in practice is a single blood test to detect ACTH levels.

Treatment

There is no cure for Cushing's disease, however there are some drugs available to control the disease. Pergolide is to date the most effective drug to lower ACTH levels and help alleviating the clinical symptoms. Pergolide is administered once daily and should be given for life after diagnosis of the disease. The dose can be adjusted in relation to individual response. Side effects (anorexia, depression are often transient and resolve after lowering the dose). Husbandry is also very important in managing a Cushingoid horse. Particular attention should be paid to diet, worming, oral hygiene/dental care, hoof trimming and prompt treatment of infection. Cushingoid horses with long hair coat should be clipped during the warm season. Laminitis is probably the most difficult complication to deal with. However, the medical therapy should bring improvement in patient comfort and decreases the likelihood of further bouts of laminitis.



Pony with advanced Cushing's disease.

EQUINE METABOLIC SYNDROME

What is it?

Equine Metabolic Syndrome is very similar to Type 2 human diabetes and it manifests as a reduced sensitivity of the body to the hormone insulin. Insulin is the hormone responsible for the uptake of glucose (sugars) from the bloodstream into the tissues. In Equine Metabolic Syndrome, due to the reduced activity of Insulin, blood glucose levels increase. High levels of blood glucose then trigger an over production of insulin (hyperinsulinemia).

Symptoms

Equine Metabolic Syndrome is characteristic of obese ponies, often showing fat deposits on the crest of neck, on the shoulders and at the base of the tail. It mostly affects young to middle aged equines and is most common in native type pony breeds. This is because they have evolved to survive in harsh conditions with poor quality pastures and do not cope well with a high calorie intake provided by a lush pasture or feeding of concentrates.

Diagnosis

Most commonly animals are tested following bouts of laminitis or inability to achieve weight loss.

A starved blood test is required to determine the blood levels of glucose and insulin.

Treatment

Management is essential: regular exercise and a low calories diet are most effective in achieving weight loss. A drug called Metformin can be administered to sensitise the body to Insulin.

