Causes, Management, and Outcome of Equine Neonates Presenting With Colic: 137 Neonates (2000 to 2010)

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Most neonates with colic can be managed medically. Owners should not be discouraged from performing colic surgery on neonates. Authors’ addresses: Milton Equine Hospital, 10207 Guelph Line, RR #1, Campbellville, ON L0P 1B0 Canada (MacKinnon); and Department of Clinical Studies, New Bolton Center, University of Pennsylvania, Kennett Square, PA 19348 (Southwood, Harris, Burke, Palmer); e-mail: miharris@vet.upenn.edu. *Corresponding and presenting author. © 2012 AAEP.

1. Introduction
There have been no recent studies evaluating colic in equine neonates. The objectives were (1) to document causes of colic in neonates, (2) to evaluate clinical features of neonates managed medically versus surgically, (3) to determine short- and long-term survival, and (4) to assess ability to achieve intended use.

2. Materials and Methods
There were 137 neonates (age <30 days) with a history of colic signs or signs of colic within 1 hour of admission included in the retrospective study. Signalment, history, physical examination, laboratory data, ancillary diagnostics, details of treatment, primary diagnosis, concurrent disease, and short-term survival were obtained from the medical record. Long-term follow-up was obtained through phone survey.

3. Results
The majority of neonates were managed medically (89%). The two most common diagnoses associated with colic were enterocolitis (27%) and meconium-associated colic (20%). The most common reason for surgery was small intestinal strangulating obstruction. Concurrent diseases were common and there was a strong trend for negatively affecting survival. The overall short-term survival was good (75%) and not different between medically (75%) and surgically (73%) managed neonates. All of the foals that were treated surgically and recovered from general anesthesia survived to discharge. Long-term survival was excellent and neonates surviving to maturity were likely to be used as intended. In the long-term, none of the neonates died or were euthanized as a result of having colic as a neonate.
4. Discussion
These findings are supportive of the generally held belief that the majority of neonates presenting to a referral hospital for colic do not require surgery. However, it is important to consider that the medical conditions can often be serious and require intensive management. Short- and long-term survival were good to excellent, and colic in the neonate did not affect the horse’s ability to be used as intended.