# **Table of contents**

Tables	0.	f Co	ntents			i
List	of					1
List					of	1
List		of		Abbre	eviations	vii
Ackno	wledger	nents				viii
						i1
Arabic			abstract	t		1i
	luction					1
Chapt			ure Revie			2
1.1			associat	ted with	equine	2
1.1.1		S				3
1.1.2	Breed,		age	and	sex	3
1.1.3	Ma	anagemer	nt fact	cors Food	and	4
						4
1.1.4	Control		of		internal	4

1.1.6	problems Exercise			5
1.2	 Causes	of	equine	5
1.2.1	colic Distension			6
1.2.2	Simple		obstruction	6
1.2.3	Complete			7
1.2.4	obstruction Enteritis			7
1.2.5	Other	causes	of	8
1.3	colic Diagnosis	of	 equine	9
1.3.1	colic Case			9
1.3.2	history Clinical	signs	and	9
1.3.3	parameters Physical			12
1.3.4	examination Nasogastric			12
1.3.5	intubation Rectal			12
1.3.6	palpation Ultrasonography			13
1.3.7	 Abdominal			13
1.3.8	auscultation Abdominocentes	is		14

1.4	Clinical			15
1.4.1	pathology Haematology			15
1.4.2	analysis Biochemical		analysis	16
1.5	Treatment	of	equine	17
1.5.1	colic Decompression			18
1.5.2	intestine Analgesics			19
1.5.2	Non-steroidal		 iti-inflammatory	19
	agents Alpha2			21
	agonists Opioids			21
.3 1.5.2	Spasmolytics			21
.4 1.5.3	 Rehydration			22
1.5.4	 Normalizing	intestinal	peristalsis	22
1.5.5	Impaction	colic	treatment	23
1.5.6	Treatment		of	23
1.5.7	endotoxemia Surgical			23
1.6.1	treatment Complication o			24

1.7	colic Feeding		colid	cky	cases	25
-	t <b>er Two: Mate</b> Study	rials a		o <b>ds</b> area		26
2.2	Study populat					26
2.3	 Classification		of		colic	26
2.3.1	cases Classification				ity of	26
2.3.2	pain Classification	of	colic	according	to	26
2.4	age Clinical					27
2.4.1	examination Case			•••••		27
2.4.2	history Clinical					27
2.4.3	signs Physiological			param		27
2.5	Blood		 nples	colle	ection	27
2.6	 Haematologic			ir	ndices	27
	Red k		cel		RBCs)	
				·		
	Packed				(PCV)	
2.0.3	i ackeu			iiiic	(1 CV)	20

2.6.4	Total					WBCs	29
2.6.5	count Differential					cells	29
2.7	count Blood				bioche	emical	29
2.7.1	parameters Total						29
2.7.2	protein Albumin						29
2.7.3	Glucose						30
2.7.4	 Urea						30
2.7.5	 Calcium						30
2.7.6	 Sodium						31
2.7.7	 Potassium						31
2.8			samp	_		and	31
2.9	analysis Treatment						31
2.10	 Control						32
2.11	group Statistical						32
Chapt 3.1	analysis <b>er Three: Re</b> Aetiology	sults					33
3.2	donkeys Clinical						33

3.3	Severity of colic pain in relation to age	33				
3.4	Classification of colic according to severity of	33				
3.5	pain Response of treated colicky horses to	34				
	treatment with Ketoprohen and Flunixin					
3.6	meglumine Changes in physiological parameters in colicky	34				
3.7	horses Haematological changes in colicky	34				
3.8	equine Biochemical changes in colicky	34				
Chap	equines oter Four: Discussion					
4	Discussion	51				
Chap	ter Five: Conclusion and Recommendations					
5.1	Conclusion	56				
5.2	 Recommendations	56				
References						

# **List of Tables**

No.	Table	Pa
1	The most encountered causes of colic in	<b>ge</b> 36
2	horses  The most encountered causes of colic in	37
3	donkeys Frequency of clinical signs noticed in colicky	38
4	horses Frequency of clinical signs noticed colic in	39
5	colicky donkeys Distribution of colicky horses according to	
	severity of colic pain in relation to age	42
6	Classification of colic in horses according to	43
7	severity of pain Response of treated colicky horses to	44
8	Ketoprofen Response of treated colicky horses to Flunixin	44
9	meglumine Physiological parameters of colicky horse	45
	compared to control	
	group	
10	Physiological parameters of colicky donkeys	46
	(n=11) and control group of	
11	donkeys Haematological indices of control group and	47
12	colicky horses Haematological parameters of colicky donkeys	48

	(n=11)	and	the	control	group	(n=6)	
13	Biochem	ical par	rameter	s of co	 ntrol gro	oup and	49
14	colicky h Biochem			rs of c	colicky	donkeys	50
	(n=11)	and	con	trol g	group	(no=6)	

# List of Figures

No.	Figure				
1	Watching		flank	<b>e</b> 40	
2	region Stretching			40	
3	Rolling	in	the	40	
4				40	
5	Coffee-		like	41	
	urine				

### **List of Abbreviations**

BCG Bromocresol green

EDTA Ethylene diamine-tetra-acetic acid

No. Number

PCV Packed cell volume
Hb Haemoglobin
RBCs Red blood cells
WBCs white blood cells
SD Standard deviation
TPP Total plasma protein

#### **ACKNOWLEDGEMENTS**

Above all, praise is to Allah, the Compassionate, and the most Merciful for giving me the health and strength to carry out this work.

I would like to acknowledge and express my deepest gratitude and sincere appreciation to my supervisors Dr. Siham Elias Suliman Mohamed and Dr. Hisham Ismail Seri, Department of Veterinary Medicine and Surgery, College of Veterinary Medicine, Sudan University of Science and Technology; for their unfailing guidance, constructive criticism, provision of facilities, encouragement and for their considerable assistance throughout this work.

The keen interest of the staff of the Department of Clinical Studies, college of Veterinary Medicine (SUST) especially Prof. Dr. Mukhtar Taha Abu Samra and Prof. Dr. Galal eldin Alazhari Mohammed, who offered all possible assistance required to make this study possible, is highly acknowledged. This study would have been difficult to complete without their continuous support. And to the members of Nyala University and its administration who provided financial support to carry out this study.

Special thanks are due to Dr. Eltahir Salih Shueip, Faculty of Veterinary Science, University of Nyala, for statistical analysis of the data and for Elikhier Tumr Ahmed, Ferdous Abdalla Koko, Taha Omer Taha, Farooq Gabshawy, Assia Mohmed, Abdelrahim Abdelrhman Ali, and Ahmed Ibrahim Osman, for the technical assistance and encouragement.

#### **Abstract**

This study was conducted to identify the underlining aetiological agents of equine) horses and donkeys) colic and to investigate the clinical, haematological and biochemical changes that may occur during colic period, and to evaluate different treatment protocols in the diseased animals according to the severity of colic either namely: Flunixin meglumine or Ketoprofen. A total number of 80 draught horses and 11 draught donkeys (colic group) were clinically examined in Nyala, South Darfur State, Sudan from 1/1/2012 to 1/10/2014 (22 months). Animals with colic were assigned into mild, severe and recurrent subgroups according to the severity of pain and degree of change in clinical parameters. For the purpose of normal standard values six donkeys and six horses (control group) were included in the study. Causes of colic were identified from the case history of the colic in equine and/or by the test of its food before colic, clinical parameters were conducted using standard methods. PCV, Hb, white blood cells differential count were recorded also. Plasma glucose, total protein, albumin, urea, sodium, potassium, and calcium were measured using spectrophotometery methods. Pulse rate, capillary refill time and rectal temperature significantly increased in severe colic subgroup, but they did not change in light subgroup, whereas respiration rate increased in whole colic group. PCV and Hb were significantly increased in animals with severe colic, but no differences were found between mild subgroup and control group; total white blood cells number significantly increased in colic group, but no differences were noticed in the white blood cells differential count of colic group except increasing of basophiles, in colic group. No changes were noticed in sodium, urea, total protein and albumin between control group and colic group; globulin and glucose significantly increased in colic group,

but calcium and potassium decreased in the same group. Flunixin meglumine was found better than ketoprofen in controlling pain of light and severe colic cases.

## بسم الله الرحمن الرحيم **المستخلص**

هدفت هذه الدراسه الى معرفة اسباب المغص فى الفصيله الخيليه (الحصين والحمير), بالاضافه الى التعرف على اعراض المغص السريريه, ومعرفة التغيرات الدمويه والبيوكيميائيه الـتى تحدث اثناء دوره المغييص, وتقويم دور الفلونكزين ميغلومين . والكيتوبروفين في ازالة الالم حسب شدة الاصابه

تم فحص 80 من حصين الجر و 11من حمير الجر (مجموعة المغص) في مدينة نيالا, ولاية جنوب دارفـــور,السودان في الفتره من 1/1/2012 الى 1/10/2014م (22شهر). تم تقسيم مجموعة المغص الى تحت مجموعات شملت تحت المجموعة المصابه بالمغص الخفيف, تحت المجموعة المصابه بالمغص الراجع وذلك بناءا على الشديد, وتحت المجموعة المصابه بالمغص الراجع وذلك بناءا على شــدة الالم و درجة التغير في العوامل السريرية. بغرض الحصول على قيم قياسية تمت اضافة 6 من الحمير و 6 من الخيول الى الدراسة الدراسة الدراسة الدراسة الدراسة الدراسة الدراسة العربية التغير المعتمد الحمياء الحمياء الدراسة الدراسة الدراسة الدراسة المعتمد المعتم

تم التعرف على مسببات المغص اما من تاريخ الحاله المرضيه او من خلال التعرف على بقية الطعام الذى تناوله الحيوان قبل اصابته بالمغص. القراءات السريريه تم اجراءها بطرق قياسيه. حجم الهيموغلوبين، عد كريات الدم الحمراء ،) ( IPCV الخلايا المتكدسه والعد الكلى لكريات الدم البيضاء، العدالتمييزى لكريات الدم البيضاء تم قياسها باستخدام طرق مختبرية معتمدة. جلكوز البلازما، السروتين الكلى، الالبيومين، اليوريا، الصوديوم، البوتاسيوم والكالسيوم تمت قياستهم بواسطه جهاز المطياف الضوئي

معدل النبض ورجوع الدم فى الاغشيه المخاطيه بالاضافى الله درجة حراره المستقيم ارتفعوا بصوره معنويه فى تحت المجموعة المصابه بالمغص الشديد، لكنهم لم يتاثروا فى تحت المجموعة المصابه بالمغص الخفيف، بينما معدل التنفس ارتفع فى كل المصابه بالمغص.

حجم الخلايا المرصوصه والهيموغلوبين ارتفعا بصوره معنويه فى تحت المجموعه المصابه بالمغص الشديد لكن لم يلاحظ اختلاف فى قراءتهما بين تحت المجموعة المصابه بالمغص الخفيف فى قراءتهما بين تحت المجموعة التحكم.

العدد الكلى لكريات الدم البيضاء ارتفع بصوره معنويه فى مجموعه المغص مقارنة مع مجموعه التحكم لكن لم يلاحظ اختلاف معنوى فى نسب الخلايا فى العد التمييزى عدا نقصان عدد الخلايا القاعديه فى مجموعه المغص.لم يلاحظ تغيير فى كل من الصوديوم، اليوريا، البروتين الكلى والالبيومين بين مجموعه المغص و مجموعه التحكم بينما انخفضت مستويات الكالسيوم و البوتاسيوم فى مجموعه المغص.

وجد ان الفلونكسين ميغلومين افضل من الكيتوبروفين في التحكـم على المغص الخفيف والشديد.