



Equine Choke: No Heimlich Necessary

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When most people hear the word "choke" they picture a person frantically waving their arms in the air pointing at their throats because they have a piece of food lodged in their airway (trachea) and are unable to breathe. At this point in the story, someone grabs them from behind and performs the Heimlich maneuver by pushing on their abdomen, causing them to forcefully expel the piece of food across the room. Humans are unable to breathe when they are choking due to obstruction of their airway (trachea). In horses, choke refers to esophageal obstruction (the esophagus is the tube that moves food from the mouth to the stomach). Horses, unlike people, are still able to breath, however choke is still a very serious medical emergency that can occur quickly.

There are several causes of choke such as an impaction of feed material or roughage within the esophagus, foreign body, masses (within the esophagus or on the outside pushing against the esophagus), esophageal strictures and other acquired or congenital esophageal diseases. Predisposing factors for choke in horses are bolting food, poor dentition, feeding dry feed that swells rapidly when in contact with moisture (such as beet pulp or pellets), ingestion of foreign objects due to cribbing and sudden changes in feed material (adding in a new type of pellet or cubes).

So now that you know what choke is, you may ask what does choke in a horse look like? The most common clinical sign of choke is frothy discharge containing feed material coming out of the mouth and both nostrils. Other signs of choke include, anxious behavior, dysphagia (difficulty swallowing), holding the neck extended, gagging, coughing, excessive salivation, swelling of the neck at the site of obstruction and collapse.

If you suspect that your horse is choking, the first thing you should do is move them to a stall that does not contain any bedding, water or feed/roughage so that they cannot make the choke episode worse by continued ingestion of food. Next, contact your veterinarian immediately. If your veterinarian is located far away or at another emergency, the most important thing you can do for your horse is to keep him or her calm and encourage them to keep their head down low. This will allow the feed material and saliva to run out of their nose and hopefully help to keep them from aspirating it down their trachea and into their lungs. Do not force any kind of tube or hose down your horses throat as you can inadvertently pass it into the trachea or cause severe damage to the lining of the esophagus. It is also important that you do not try and administer any oral medications such as Banamine (flunixin meglumine) since your horse is already having difficulty swallowing.

When your veterinarian arrives, they will perform a physical examination and then give your horse a heavy dose of sedation in order to keep their head very low to the ground. The primary goal is to relieve the obstruction and the secondary goal is to avoid aspiration pneumonia (food or fluid in the lungs). A nasogastric tube will be passed through the nose and into the esophagus. Most of the time the obstruction can be relieved by gently lavaging the esophagus with water through the nasogastric tube. Your veterinarian will also administer intravenous anti-inflammatory medications (Banamine) and sometimes smooth muscle relaxants (oxytocin or Buscopan). If the obstruction cannot be relieved with lavage, referral to the hospital for endoscopy and further treatment may be necessary. Sometimes surgery is required to relieve the obstruction in severe and chronic cases. All choke patients should be placed on broad spectrum antibiotics due to high risk of aspiration pneumonia.

Following an episode of choke it is important to follow veterinary instructions carefully. Most horses will need to be fed soft mashes or gruels for a minimum of 7-21 days depending on the severity of the choke episode. Roughage may be added back in at the discretion of the veterinarian.

Helpful hints to avoid choke or recurrence of choke:

1. Maintain proper dentition by scheduling yearly dental examination and floatings with your veterinarian. This will ensure proper mastication of roughage.
2. Be sure that your horse has plenty of fresh clean water available at all times.

3. Avoid sudden changes in feed and soak any pelleted feed, hay pellets and beet pulp.
4. Use slow feeders, nibble nets or place large rocks (too large to eat) in feed buckets to slow down food consumption.
5. Cut up treats such as apples and carrots into small pieces.

Contact Brandon Equine Medical Center at 813-643-7177 or email info@brandonequine.com with any questions regarding this topic.

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